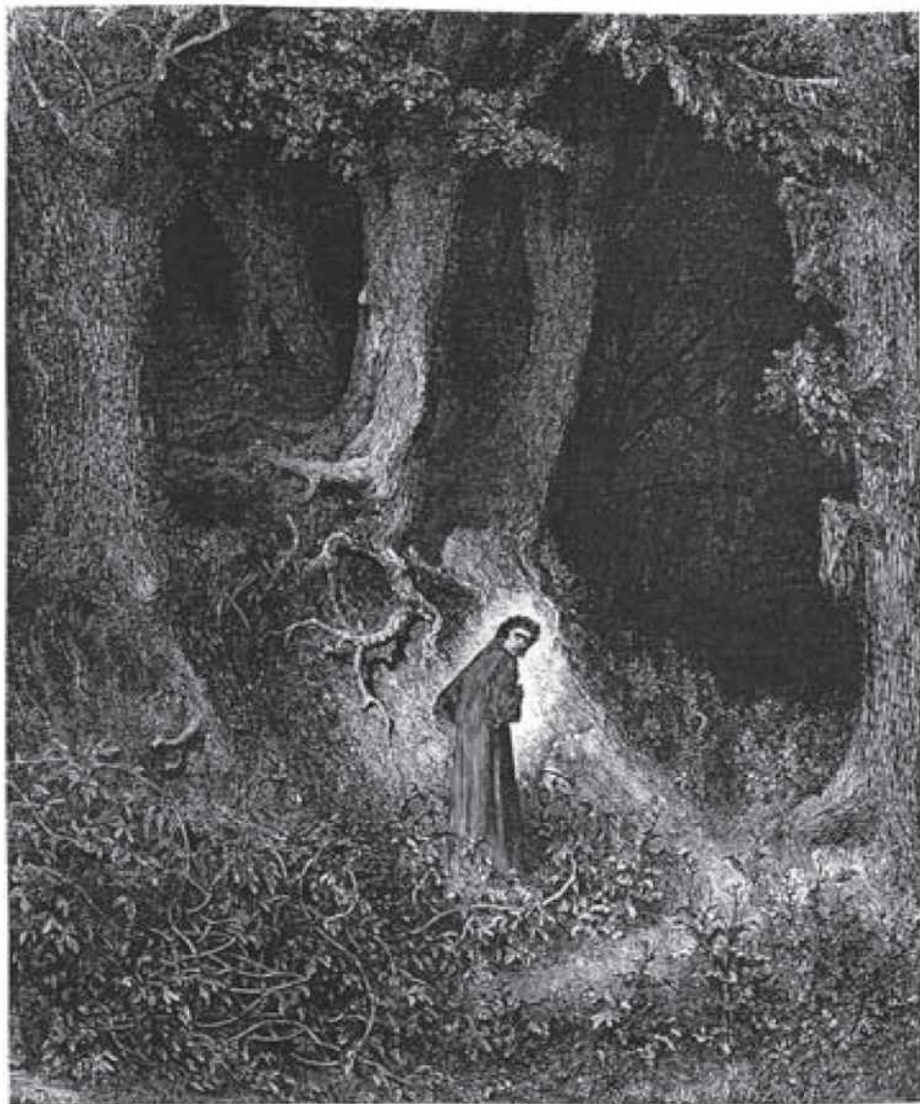


DESCENT INTO DARKNESS

*The Psychodynamics of Mental Illness:
An Introduction and Illustration in the Form of a Novel*



by
Richard D. Chessick, M.D., Ph.D.

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Table of Contents

[About the Author](#)

[Acknowledgements](#)

[Foreword](#)

[Preface](#)

[Chapter 1 Chicago](#)

[Chapter 2 Ankara](#)

[Chapter 3 Berlin](#)

[Chapter 4 Cappadocia](#)

[Chapter 5 Hattuşaş](#)

[Chapter 6 Ephesus](#)

[Chapter 7 Pergamum](#)

[Chapter 8 Troy](#)

[Chapter 9 Istanbul](#)

[Chapter 10 Milan](#)

About the Author

Richard D. Chessick, M.D, Ph.D. is Professor of Psychiatry and Behavioral Sciences, Northwestern University, Life Fellow of the American Academy of Psychoanalysis, Distinguished Life Fellow of the American Psychiatric Association, Training and Supervising Psychoanalyst (emeritus) of the Center for Psychoanalytic Study in Chicago, Senior Attending Psychiatrist (emeritus), Evanston Northwestern Healthcare Hospital, and is in the private practice of psychoanalysis in Evanston, Illinois, U.S.A. He is the author of 17 books in the field of Psychiatry, Psychoanalysis, and Philosophy, and of over 200 papers published in peer-reviewed professional journals, as well as another 200 book reviews. In an over 50 year career he has been an invited lecturer and teacher all over the world, in academic departments of psychiatry, psychoanalysis, and philosophy.

r-chessick@northwestern.edu

Books by Dr. Chessick:

Agonie: Diary of a Twentieth Century Man (1976)

Intensive Psychotherapy of the Borderline Patient (1977)

Freud Teaches Psychotherapy (1980)

How Psychotherapy Heals (1969, 1983)

Why Psychotherapists Fail (1971, 1983)

A Brief Introduction to the Genius of Nietzsche (1983)

Psychology of the Self and the Treatment of Narcissism (1985, 1993)

Great Ideas in Psychotherapy (1977, 1987)

The Technique and Practice of Listening in Intensive Psychotherapy
(1989, 1992)

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1991)

What Constitutes the Patient in Psychotherapy (1992)

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Psychotherapy (1993)

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Psychoanalytic Clinical Practice (2000)

The Future of Psychoanalysis (2007)

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TO MARCIA

They preserve the purest and tenderest affection for each other, an affection daily increased and confirmed by mutual endearments and mutual esteem.

... Henry Fielding (*Tom Jones*)

Gods who rule the ghosts; all silent shades;
And Chaos and eternal Fiery Stream,
And regions of wide night without a sound,
May it be right to tell what I have heard,
May it be right, and fitting, by your will,
That I describe the deep world sunk in darkness^[*]

^[*] *Aneid*, Bk.6. Trans. E. Fitzgerald. N.Y.: Random House, 1983.

Foreword

Commentary by Christoph Mundt, M.D., University of Heidelberg

Dr. Christoph Mundt is Professor of Psychiatry and Psychotherapy, Chairman of the Psychiatric University Hospital, and previous Director of the Center for Psychosocial Medicine all at the University of Heidelberg, Germany, and is the editor of the journal *Psychopathology*.

I was brought up as the son of a publisher in Munich with novelists and poets around, among them returning emigrants, being frequently guests in my parent's home. So I was provided with a penchant for literary art, novels in particular. This is the reason why I will take this novel as a novel, as a piece of literary art, not of science, following the author's denomination of it as a didactic novel. Novelists' observations and language are less restricted than the scientific one, reflecting the complexity and subtlety of inner worlds better than scientific formalisation even in descriptive psychopathology. I am not alone with this view. Oswald Bumke, the great German editor of psychopathological textbooks in the 1920s to 30s, claimed that one true novelist finds out more about the human psyche than a hundred scientists.

Interpretation of the novel as a piece of literary art

When I went through the first chapter of this novel, titled “Chicago”, it occurred to me to lay out a number of topics which are partly entailed partly superseded partly set aside in relation to the ever-present theme in this novel of teaching principles of psychodynamics and psychoanalysis. These topics in outline are the following:

The literary format of this piece of teaching as such: Art or science? If art, can it grasp its objective?

Bereavement, grief, loneliness; being thrown back to oneself and his reminiscencies, aloofness with a notion of resistance and negation.

Aging, illness, being bound to medication as an artificial means to sustain being alive; salience of long-term memories over presence—and future-directedness; going back to one’s roots, collecting the essentials.

Identity as a topic recurs several times in Chessick’s book, later again related to psychoanalysis, its delineation to psychiatry, psychopharmacology, neurobiology, and the humanities vs. neopositivism.

The Ghazalian experience pointed out at different levels: The would-be love-affair of the main protagonist Martin and J.; the passages about bacchanalia; orgies and cannibalism and indirectly the fusion with Freud and his revered system of thinking, experiencing, and approaching the world.

All this is interwoven with the prime motive of the novel of teaching psychoanalysis and psychodynamics with its different facets and foci as main tune and *cantus firmus* to the many descants and contrapuntals.

I do not re-iterate Chessick's story in detail here, but will immediately go into the interpretation.

So, what does the novel tell us?

The main protagonist, Martin, is strained by his particular life situation of bereavement. His wife is recently deceased. His heart is broken, he suffers angina and atrial fibrillations.

The journey that Martin invites his friends and colleagues to partake is a journey to the past with the aim to reassure himself about what his life was dedicated to: Psychoanalysis and existential philosophy dealing not only with helping patients but with recognising oneself and living for 'clarification of existence', to use a word of Jaspers, or the Greek command to know yourself.

Formally the novel consists of narratives and descriptions of the relationship between the protagonists interrupted by theoretical passages in form of lectures or a kind of Socratic dialogues. The narrative parts show outbursts of what is put as 'instinctual' drives by the author, both sexual and aggressive ones. The main protagonist, Martin, tries to balance the group but

is entangled with his own feelings to his former patient. His attempts to temper and master the group dynamics gradually fail, at some instances even in a dramatic way. His group member Edward considers his teaching as lofty and detached from real life and his group management as a complete disaster. Another group member Richard leaves the group with the announcement to put all effort in ruining Martin's reputation as psychoanalyst upon his return to Chicago. In the end the group dissolves before returning and Martin is alone. The text-passages about the pairing up in the group in new relationships and the aggressive attacks on Martin's teaching are interrupted by theoretical reconfirmation of the instinctual drive-theory including aggression. It is contrasted to Kohut's reformulations of self-psychology, obviously disenchanting Martin as non-orthodox but hinted at as a possible alternative way to understand what happens.

This formal stratification of the novel—real life illustrating theory—theory opening the eyes for real life—resembles Mario Vargas Llosa's novel *In Praise of the Stepmother*. In this novel chapters with partly charming, partly rude and almost pornographic descriptions of the son-mother-relationship interchange with chapters on antique mythology, for example, the story of Kandaules and Gyges. It is a literary technique which lifts the plain story to a high abstraction level and opens a perspective on individual developmental psychology and the whole cosmos of cultural history behind the seemingly plain story. So the patronizing dominance of husband or father over wives

and women in the family of the step-son in Vargas Llosa's novel are related to the narcissistic relationship of Kandaules to his wife Nyssia. This topic is even more clearly worked out in Zemlinski's Opera on Kandaules and Gyges, when Kandaules urges his wife to show herself unveiled to the guests of his court and later offers her to Gyges. Martin speaks of physical and mental sexual relationships also in the public of the group, which is his court.

The journey to Asia Minor may be considered as metaphor for the main protagonist Martin's journey of his life and at the same time a retrospect to it. The overall atmosphere is that of loss and mourning amalgamated with defiant defence of psychoanalysis and psychodynamics, its five channels of perception and the belief in deeper truth in humanities and their image of man than in the natural sciences within medicine. This is counteracted again and again by group members. The philosopher Henry and husband of J. ridicules it by his speech about Mesmerism, Edward does it with his condemnation of the whole enterprise of this journey. But what hurts most, is Martin's former patient J.'s resistance to his courting. The passages describing the dialogues of the two convey to the reader that J. is the more authentic person who is able to frankly speak about her ambivalences including her love for Martin, during her therapy with her transference and to a certain extent still now, but also of her suspicion that his feelings may be rooted in those specific constellations in which they had met. To be phoney was a criticism also put forward by Edward to Martin. In contrast to J.'s clear and

encompassing statements about her feelings and her resolution to maintain her life condition as it is, Martin's approaches are accompanied by quotations of revered poets and writers, phrases of her beauty, but nothing personal apart from the teaching.

One of these novelistic passages about Martin's chasing J. is coupled with a theoretical passage about the Ghazalian experience. This passage goes over to bacchanalia, orgies, and cannibalism. The theoretical text suggests that the essence of the Ghazalian experience and cannibalism ingesting the identity of another, implies forgetting about oneself and of somebody or something else. In the light of my interpretation, the Ghazalian experience Martin seeks by approaching his former patient J. would express his desire to re-identify with psychoanalytic working and with Freud and the principles he has laid down. To give in to the transference-countertransference love despite crossing an ethical border, shifts the therapy away from curiosity for the bewildering unknown by changing the format to a standard situation. Love is an antidote against depression and the incipient loss of the self is intricately enmeshed with Martin's profession of a psychoanalyst.

Loss of identity in my view is the main topic of the novel. It resembles the novel *Disgrace*, by Coetzee the South African Nobel Prize-Laureate, in many respects. The main protagonist in Coetzee's novel is also a university teacher who feels that his expertise in the philological humanities is not asked

for any more. With the interest of his students fading away, he feels his self-esteem and his whole identity beginning to falter. He starts a series of affairs with female students, which ends with a repudiation by the faculty after his stubborn refusal to formally apologize. The story of partly suffered, partly self-inflicted humiliations was then replicated within the life-history of his daughter in a specific South-African conflict. The novel ends with a hint that the protagonist commits suicide.

Beside the novelistic perspective in Chessick's text there is the dimension of the philosophical dialogue. The form of dialogue chosen keeps the Socratic questioning at a lower level of sophistication than the teaching part of it. This is expressed most clearly by J. at one instance, when she states that the degree of "pontification" has bored her as being too scholarly, dogmatic, too much handing down the law. It implies a top-down attitude, a reproach made to Martin on several instances by different group members. So the philosophical inquiry is not really a Socratic dialogue—which would essentially challenge the teaching—but rather a dialogue in which the scholar is provided with cues by his disciples for opening just another chapter of his lecture.

To sum up my interpretation:

To my perception the author has described the tragedy of a protagonist

who represents a culture and an epoch, which is by himself perceived as gradually falling off its own aspirations. Disinterest as in the case of J. hurts more than aggressive confrontation. The novel describes a certain feeling and mood which can be sensed in some seminars in psychiatry and psychotherapy. It can be generalized to a higher level of cultures and epochs.

The novel also points out that the actual predicament of the protagonist and his art is encapsulated in the problem pertaining to his identity. Bearing on it too rigidly leads to what J. has called "pontification", i.e. dogma and scholasticism. The steadily alert self-interpretation of analysts may connote indulgence in other fields and provide seriously questioning of their own intrinsic axioms, so as to identify with the aggressor and ostracise a colleague who does so. Martin may have faced what Max Planck, the German physicist, has said: "Theories are not refuted, but they die out with their representatives." Martin's story ends in this sense with a grotesque scene and the author's black humour casts a smile over this seeming bleak finale. Permitting change without losing identity altogether would require a daring attitude which lives with the tension between the paradigms, curiosity towards the unexpected, which may emerge from walking the line between humanities and brain research. Transcending one's own stance would perhaps set off humour and self irony, so much missing in Martin's group.

If psychodynamic psychiatrists could work in a relaxed atmosphere

with neuroscientists, Eric Kendall's suggestions, for example, could be discussed then in a relaxed atmosphere: The studies on experimental procedural learning compared to declarative learning; the neurobiology of imitation and mirroring, empathy and intersubjectivity; the stratifications of autobiographical episode memory, so important for the free association technique; the rules of contingency learning; the imprinting mechanisms with their developmental psychological implications and the ensuing relativity of genetics all could be mutually examined. Also, a canon of quality criteria for findings and theorising in the hermeneutics and in phenomenology aspects of psychodynamics can be systematised together with the neuroscientists.

Richard Chessick's novel has accomplished what a good piece of art should do: To elucidate the general in the particular. This needs audacity to tell the truth and humour to bear it. Both are in this text.—My deepest respect for this piece of art.

Preface

The purpose of this book is to help students and therapists in the mental health field learn about psychodynamic psychotherapy and psychopathology as well as to acquaint educated interested persons outside the field with the issues involved. In order to make this information more convincing, more intelligible, and hopefully more interesting for the reader, I have cast it in the unusual form of what I call a didactic novel. To my knowledge this has not been tried before. Here the lectures and discussions and arguments are interspersed with dramatizations showing how the basic assumptions behind psychodynamic psychotherapy, what Freud called “our science”, can be experienced in actual everyday living situations. Also illustrated and discussed are some of the current controversies in the field of uncovering psychotherapy and the socioeconomic influences that bring pressure on those who practice this discipline and influence their theory formation. The approach I have employed enables me to present arguments among proponents of differing theoretical orientation and I hope brings to life the difficulties involved in reaching common ground even among trained and experienced therapists. Because of the novel form, terms which may seem unclear at first will be gradually explained and returned to as we move along in the narrative; the reader who needs more immediate or detailed explanation of any term is referred to my dictionary¹, although I hope that will rarely be necessary.

Ovid, in his *Metamorphoses* VII, 20, wrote *Video meliora, proboque, deteriora sequor*. The common translation of this is, "I see and approve better things, but follow worse." The philosopher Benedictus Spinoza borrowed from this in the fourth part of his masterpiece *Ethics*, titled "On Human Servitude or the Strength of the Emotions". I consider Spinoza the father of psychodynamic psychiatry, first because of his understanding of the power of the emotions and consequently his study of human intrapsychic conflicts, and second because he was the first person to offer what even today is a contemporary viable theory of the problem of the mind and the brain. Regarding the former topic Spinoza wrote

Human lack of power in moderating and checking the emotions I call servitude. For a man who is submissive to his emotions is not in power over himself, but in the hands of fortune to such an extent that he is often constrained, although he may see what is better for him, to follow what is worse^{*}.

* Sources of quotations are found as numbered notes at end of each chapter.

Spinoza died in 1677 and because he was under such intense pressure from ecclesiastical and secular authority he dared not publish his masterpiece during his lifetime. It appeared on the year of his death and the manuscript of it was only narrowly rescued. But that's another story. This section by Spinoza was utilized by Somerset Maugham in his famous novel called *Of Human Bondage*. It is also the underlying idea of my didactic novel.

I chose to use the occasion of my 75th birthday celebration panel at the 2006 meeting of the American Academy of Psychoanalysis and Dynamic Psychiatry in Toronto, Canada, to learn the first reactions to this kind of experiment. It is an experiment which grew out of the fact that most individuals in the mental health field, as I learned from teaching psychiatry, psychology, and philosophy for 50 years at Northwestern University and other educational institutions, read very little. Even the works of Freud, which I regard as our basic texts in our field, are no longer studied in any depth at many psychoanalytic institutes. Freud's notion of the drives, a curious somatopsychic amalgam that Freud invented in order to form a scientific-sounding theory of what goes on in psychic conflict, has come under considerable attack by various new psychoanalytic schools of thought. As Anna Freud wrote, "Psychoanalysis is above all a drive psychology. But for some reason people do not want to have that"³. Even the so-called neuropsychanalyst Schore, in a whole series of publications on the subject⁴, supports Freud's idea about the central role of drive in the system unconscious, but there is much opposition to it.

Unfortunately the contemporary tendency in our field has been to ignore Freud's concentration on intrapsychic conflict and to ride off madly in many other directions. His fundamental idea is that so-called traumatic events in childhood which may or may not be very minor ones are magnified in the imagination of the child due to the power of the drives and further

fueled by projective identification and projective reintroduction, terms to be discussed in this book, to form a basic fantasy core that functions as a pair of glasses for the rest of the person's life. That is to say, all human relationships and all interpersonal experiences are received through the pair of glasses that has been fitted on the individual in the first few years of his or her existence. The tendency, as Freud taught us, is to repeat these experiences and these internalized object relationships over and over again even in the face of the fact that the person often consciously knows they are maladaptive and self destructive. This is our fate.

I wanted to get Freud's fundamental principles across to the readers who will be both attending to and experiencing this book in their hope of learning something about how human beings actually function as a reflection of unconscious intrapsychic phenomena. So I gathered together four themes. The first of these was standard teaching material on the subject of the psychodynamics of mental functioning and psychotherapy and psychoanalysis which could have been presented separately as a textbook and which actually I have published separately in textbooks in the past. But the trouble with textbooks is that they tend not to be read. They sit imposingly on the bookshelf. For the second theme I picked a country with an ancient history, Turkey, to use as a metaphor for Freud's discussion of the mind as having in it a buried city and so there are several references to buried cities and early civilizations throughout my descriptions of Turkey. The third

theme was to illustrate the interaction of even successful mental health professionals when they are placed in close proximity in a foreign country. I wanted to demonstrate that mental health professionals are human like everybody else and are driven by the force of their emotions like everybody else. Even Freud engaged in activities that were self destructive and counterproductive such as his addiction to cigars, which literally destroyed him.

Finally there is the presentation of the physically sick narrator, Martin. Martin is remotely modeled on Marcel, the observer and interlocutor in Proust's *Remembrance of Things Past*. I confess that I am an avid follower of Proust and think he was a remarkable genius not only in his capacity to write but also in his capacity to observe the nuances of human behavior. I did not keep the experiences on the tour described in this book at a Proustian subtle nuance level because I wanted to sharply portray the power of the drives in shaping interpersonal behavior, especially when people are thrown together intimately. Martin was also chosen to illustrate the power of intrapsychic conflicts in generating or at least precipitating psychosomatic diseases such as heart disease. So in Martin I chose a more or less typical individual therapist with deep unresolved problems and who expresses these problems psychosomatically primarily in his cardiovascular system during this tour, as well as in his fascination and interaction with J.

My model here was Groddek's magnificent *Book of the It*. I do not know of any training program that assigns this book any more. Groddek was an internist who had a similar deep conviction about the power of intrapsychic unconscious emotional factors and unresolved early infantile conflicts in producing all sorts of physical symptoms and ailments including even death in adults. He called himself a "wild analyst" but he was highly respected by Freud and a lot of his work, which is reflected in the demise of Martin, deals with what Melanie Klein at one point calls the core psychosis present in every human being. I tried to pack all this into my didactic novel because I want to have a powerful impact on the reader, especially those who are just beginning to deal with patients and even experienced therapists who need to reflect on what they are doing. I also hope to educate the interested non-professional reader about these matters, which are of universal human significance.

My model for Martin's psychic state comes from Dante's *La Vita Nuova*. Dante lost his mother at a very early age and, although he married and had a family, he was struck like lightning by his vision of Beatrice. I suggest that at this point a powerful yearning broke loose from deep in his unconscious, a kind of circumscribed psychosis for which his later creation, *The Divine Comedy*, represents the cure, as I have discussed it elsewhere⁵. In *La Vita Nuova* Dante⁶ writes:

With tears of sorrow and with tears of anguish
My heart is wearied when I am alone;

Any who heard with pity would be filled;
And what this life has been wherein I languish
Since to the world above my lady's flown,
To tell it all no tongue is there so skilled.

At another point the theme of cardiovascular death from his "weariest heart" is woven into this yearning:

Fair jewel, when to see you I draw nigh;
When I am close to you I hear Love say:
"If you fear death now is the time to fly!"
My looks the color of my heart betray
Which, fainting, for support leans all awry;
And in this tremor as I reel and sway
The very stones I walk on echo "Die!"

I am very fortunate in that after over fifty years first of a training analysis and then self analysis⁷, and of full time clinical experience, I have been able to be in touch to at least a certain extent with this deep core in myself and have been able to use it in empathic communication and understanding of seriously ill patients, especially depressed, psychotic, and borderline patients, as well as those with life-threatening psychosomatic disorders. I have written books about such patients and also about creativity, which similarly requires one to be deeply in touch with the basic springs or derivatives of one's own unconscious.

From all these sources the present didactic novel emerged, much in the sense that Plato teaches us when he explains that in one's emerging dreams

one does all sorts of crazy psychotic things such as marrying one's mother and expressing every sort of lust and aggression. In my opinion if one wishes to do successful psychoanalysis or psychodynamic psychotherapy one must be very much in touch with this aspect of one's self and make friends with it so that it can enable one to both be insightful and empathic with other individuals who are in trouble.

I believe in Heidegger's theory that truth expresses itself in art. In our current terminology it would mean that the unconscious of the artist expresses itself and communicates itself to us, including our unconscious, in a successful work of art, which is why it has a lasting effect and conveys a truth that cannot be conveyed in a lecture or a scientific experiment. In this novel I will lead the reader through issues of fundamental psychodynamics, boundary violations, ageing and mortality, cultural factors affecting medicine and psychiatry, sexual intrigue, historical issues, and will present summaries of philosophical viewpoints applied to the field of mental health conveyed through discussions, lectures, and dramatic interaction of the protagonists. The idea is to have an impact on the reader that an ordinary lecture or textbook would not have. Whether that impact is intensely negative or intensely positive, if there is an impact I have succeeded in what I have tried to do. Whether this is a useful didactic method remains for all of us to try to determine. Surely the standard didactic methods in use today lead to very little conviction about the value of psychoanalysis and psychodynamic

psychiatry on the part of students, residents, and even practicing psychiatrists, and that doubt filters down to the general public, who unfortunately do not understand what a powerful tool we have here to understand humans and their often irrational and self-defeating behavior.

Notes

- ¹ *Dictionary for Psychotherapists: Dynamic Concepts in Psychiatry*. Northvale, NJ: Jason Aronson, 1993.
- ² *Ethics*, p. 141. N.Y.: Everyman's Library 1950
- ³ Letter to J. Hill quoted in Young-Bruehl, E. (1988). *Anna Freud*. N.Y.:Summit, p.457
- ⁴ e.g., A century after Freud's project: Is a rapprochement between psychoanalysis and neurobiology at hand? *J. Am. Psychoanal. Assoc.* 1997;45:807.
- ⁵ Dante's Divine Comedy revisited: What can modern psychoanalysts learn from a medieval "psychoanalysis"? *J. Am. Acad. Psychoanal.* 29:245-265, 2001.
- ⁶ p.84, p.50. trans. B. Reynolds. N.Y.: Penguin Books, 1969
- ⁷ see my Self-analysis: Fool for a patient? *Psychoanalytic Review* 77:311-340,1990.

Chapter 1

Chicago

The places that we have known belong now only to the little world of space on which we map them for our own convenience. None of them was ever more than a thin slice, held between the contiguous impressions that composed our life at that time; remembrance of a particular form is but regret for a particular moment; and houses, roads, avenues are as fugitive, alas, as the years.

Marcel Proust¹

I invited J. and Henry because I was in love with J. and I was hoping to snatch some moments alone with her. Their marriage was rotten. Henry was a loud skeptical academic philosopher, a sour man who blamed all his troubles on J . . . You guessed it; J. was a patient of mine years ago. My friend Danny used to say that when a psychiatrist goes crazy he falls in love with a patient. He was right.

After my wife died I was alone for a long time. My friends used to call me the lonesome cowboy because while visiting my daughter in Phoenix, I would don a cowboy hat and take long walks alone in the desert. I was hoping to step on a rattlesnake and make an end of it but I never met one.

I thought of asking for a trip, of applying for a grant to do it, to get my mind off being desperately lonely and sick. A travel grant was approved and

the flyers sent by the university to mental health professionals all over the country brought a small assortment of characters that I was to lead on a continuing education tour of Turkey. It is no longer publish or perish in academia, but rather publish and obtain grant money, or perish. By the time the two years of grant request paperwork dragged by, I lost faith in the value of intellectual tours and in the reasoning power of humans. I became convinced that we are creatures of drives rather than of rational insight. Nothing new about that, these days.

A philosophical tradition stemming from Plato and Aristotle conceived of humans as rational animals, distinguished from animals by their capacity to contemplate the ultimate, underlying principles of reality. The fruits of such contemplation, they said, should be the highest goal of human activity. I began to realize, as middle age waned and old age loomed up, that we are not to be distinguished from animals by any capacity for rational insight into nature. We do have rational powers, but in this we differ from animals only in degree and not kind, just as humans have different degrees of reasoning capacity. Looking at it in this way, a kind of spin-off from Hume's philosophy, seems to undermine the status and distinctiveness of the understanding itself.

While waiting for the grant to be approved, one of the books I read was Keegan's *The First World War*. He asked:

Why did a prosperous continent, at the height of its success as a source

and agent of global wealth and power and at one of the peaks of its intellectual and cultural achievement, choose to risk all it had won for itself and all it offered to the world, in the lottery of a vicious and local internecine conflict? Why, when the hope of bringing the conflict to a quick and decisive conclusion was everywhere dashed to the ground within months of its outbreak, did the combatants decide nevertheless to persist in their military effort, to mobilize for total war and eventually to commit the totality of their young manhood to mutual and existentially pointless slaughter?²

On August 25th, 1914, the Germans occupied the little university town of Louvain, the “Oxford of Belgium.” This university town was a treasure store of Flemish, Gothic and Renaissance architecture, painting, manuscripts, and books. After three days of incendiarism and looting, the library of 230,000 books had been burnt out, 1,100 other buildings destroyed, 209 civilians killed, and the population of 42,000 forcibly evacuated. Yet the eighteenth-century Enlightenment of Lessing, Kant, and Göethe was Germany’s passport into Europe’s life of the mind and it had been the inspiration of Germany’s enormous contributions to philosophical, classical and historical scholarship during the nineteenth century. To say nothing of Bach, Beethoven, and Brahms!

In four months at Verdun in 1916 about twenty million shells had been fired into the battle zone. The shape of the landscape was permanently altered, forests were reduced to splinters, villages had disappeared, the surface of the ground was so pock-marked by explosions that shell-hole overlapped shell-hole. In just those four months twenty thousand men were

killed and wounded on each side. *Homo homini lupus.*

Preoccupied with such thoughts, I had imperceptibly shifted during my transition from middle age to old age from the reason of Ulysses to the reason of Plato, as Whitehead named them, writing after retirement in his amazing senior years. The “reason of Ulysses” is the reason of so-called professionals in various technical fields, and is characterized by a lack of vision. It seeks an immediate method of action. Science directs us to things rather than values, as Whitehead points out in *Science and the Modern World*. He reminds us of the consequences of basing life only on this kind of reason, for example: “Ulysses has no use for Plato and the bones of his companions are strewn on many a reef and many an isle.”

The “reason of Plato” seeks a complete understanding of “the universal scope of things.” It is continuously opposed by common sense and the apparent chaos of everyday experience, and it is on this basis that scientists have attacked and devalued it. The problem of speculative reason, another name for the “reason of Plato,” is that it must find a method that on the one hand keeps it from being anarchic or pure imagination, and on the other hand that enables it to exercise its function of reaching beyond all set bounds of the empirical world. Whitehead suggested that the Greeks made important advances in defining this method so as to set speculative reason off from inspiration or autistic reverie. They insisted that speculative reason must

conform to intuitive experience, have clarity of propositional content, have internal and external logical consistency, and present a logical scheme with widespread conformity to experience, coherence among its categorical notions, and methodological consequences for further expansion and progress.

He tried to illustrate this in his masterwork *Process and Reality* but, in my opinion, his great metaphysical scheme suffered from a fatal flaw, his fanciful and idiosyncratic doctrine of prehension. We psychoanalysts would call this doctrine an unwarranted extension of empathy, in which he attempts to bridge the gap between Descartes' *res cogitans* and *res extensa*, or mind and body, by attributing the capacity for "feeling" of some sort to inanimate objects.

Philosophers and psychiatrists and psychoanalysts have a vital area of overlapping interest here; it became clear to me that all their work in epistemology and metaphysics invariably comes to grief over the attempt to solve the mystery of human consciousness³. Freud also ran into a theoretical shipwreck in his attempt to deal with this essentially philosophical problem. Curiously, I have observed much more study going on regarding this issue in the psychiatric literature rather than in the current philosophical literature! This raises questions about the direction of modern philosophy that Whitehead of course was also so worried about; he tried unsuccessfully to

alter this direction . . . But I digress, something I tend to do more and more these days as I fade in and out of a kind of dreamlike state here in the hospital. Perhaps it is due to all the cardiac medications the nurses keep nervously pumping into me.

You may ask why I was chosen to guide this tour. I am a psychoanalytic psychiatrist with no special qualifications or abilities, but, as I told you before, I was just clever enough to come up with the idea and apply for the grant. I was lonely and hoped for some interesting conversation. At a deeper level I hoped for J.

Speaking of loneliness and conversation, it seems to me that for humans the problem of relationships has replaced the problem of anxiety about the precariousness of the external world, at least in the more technologically developed countries. Freud pointed out that technological development renders intimacy less stable, leading us to expect too much from marriage, asking for nirvana from sexual satisfaction. But I do believe this satisfaction is a necessary factor in feeling human, and in some cases a precondition to accomplishment. The artist and the scientist try to make sense and order out of a chaotic world and to enhance our adaptation to reality. Since perfect adaptation to the environment is not possible, man is preprogrammed always to search for something better. This gives a positive adaptive function to fantasy. The discrepancy between our inner world and our outer world

stimulates creative imagination, which in my experience has flourished in solitude.

The capacity to be alone without anxiety is a good criterion for mental health, and I was not outstanding in that capacity ever since my wife died. The problems of the second half of life are different than the problems of the first half of life; Jung gets credit for pointing that out, one of his few sensible ideas. In our Western culture, with our sensorium overloaded by the media, conventional success is encouraged at the cost of inner self development. We end up having to abandon pursuits which once gave life meaning in our earlier days. It follows that the rediscovery of earlier interests can bring new zest to a sterile life. But so can an intense love affair!

Again I digress! To go on with my dictation into this infernal tape recorder: I'm a conscientious fellow and I arrived early at Chicago's O'Hare Airport to make sure all our reservations were in order. O'Hare was its usual noisy mess; long lines at the ticket counter and television screens mindlessly blasting away at every waiting area making it impossible to think or read or relax. After a dull back-aching standing in line I reached the counter. The clerk verified the tickets for the group, checked my baggage, and sent me to the proper gate where I would meet the others. I walked through the corridors in a state of dullness and mild annoyance, found the gate, and sank into one of the ugly black leather chairs with my book. For the long trip I had chosen to

take and to reread Dante's *Divine Comedy*, all three volumes of it, in what I consider to be the most readable translation, that of C. H. Sisson⁴. But instead of opening the book I began to reminisce and day-dream, as I am so often prone to do . . .

. . . I was sitting in the Metropolitan Museum in New York in one of the gallery rooms, surrounded by early medieval paintings. This was during a psychoanalytic meeting when I should have been listening to the program but found myself drawn to the Metropolitan Museum as I always am when I go to New York City—a nice place to visit but I could never afford to live in Manhattan. After I wandered into a gallery of medieval paintings and sat on a bench in there enjoying the fact that the room was empty and hardly ever visited so I could be essentially alone and uninterrupted, I gradually realized I was surrounded by another world. This was the world of God and religion where the answers to the great philosophical questions were all apparent and everyone shared them except the Jews, who, as it still is today, were substitutes for the devil and gave the rest of the populace an opportunity to take out their frustration and anger every once in a while by a pogrom. Medieval art brought into being our universal despair that life always ends in death.

That's when the idea of going on an intellectual tour of Turkey occurred to me, because Turkey contains the remains of civilizations from the very

beginning of human history that we have any information about, to the present time. Fool that I was, I thought it would be wonderful to take a group of mental health professionals through a historical time line from the earliest Hittite civilizations to modern Ankara with its grim mausoleum to Atatürk. All through what was once the proud Ottoman Empire, just as in human development, temples, synagogues, churches, mosques, and secular buildings were erected one on top of the other as time passed. For example, the Great Umayyad Mosque in Damascus was erected in 705 C.E. on a site occupied by a Christian basilica, which in turn had supplanted a Roman Temple of Jupiter.

As I dragged myself reluctantly out of the soul-satisfying room of medieval paintings and back to the boring analytic meeting and to watching my colleagues endlessly dispute, I resolved to put in a grant application to the university officials and see what would happen. And now here I was in the O'Hare airport trying think and read and to somehow block out the horrible and endlessly offensive barbarism of television. I thought of Oscar Wilde's saying, "America is the only country that went from barbarism to decadence without civilization in between." I was tired of America and the despicable evils that so-called managed care in our country was doing to sick human beings but I knew that the whole world was becoming America and there was no escape from it except by stepping on a rattlesnake.

The group was to gather and meet at the airports in Chicago and New

York. We were to then meet others from the Turkish contingent when we landed in Ankara from New York. As I recall it now in a kind of misty haze, here are my impressions of our initial tour group meeting in Chicago's O'Hare airport. The first to arrive were Gertrude Evans and Sarah Bollinger, who constituted what appeared to be an inseparable middle-aged lesbian pair from Oregon. Gertrude, plump and friendly, was a radical feminist psychoanalyst. She was rather short, tied her hair in a bun behind, and dressed somewhat unattractively, making her look older than she was. Gertrude was, on my first (and wrong) impression the bubbly passive member of the pair, and her pleasant personality contrasted with that of her partner. Sarah, short, thin, and bird-like, with flashing dark eyes, was a professor of English literature and very much the teacher. She had a remarkable memory as we shall see, and came along both to keep her apparent lover Gertrude company and to learn what she could about psychodynamics as they applied to literature. She was less trusting and seemed to move about quite rapidly, in a sense anticipating challenges either to her knowledge or to her sexual orientation. She struck me as a much traveled and experienced academic, a person worthy of respect.

Marsha, an intelligent, relaxed, pleasant elderly lady, and George, an unusual person with a razor sharp mind which had mellowed a lot with age, were the next to arrive. They were the senior members of the group, semi-retired psychoanalysts who came along to get continuing medical education

credits and views of Turkey. Marsha lived in Chicago and began her career as a schoolteacher who became interested in child psychology and took training to become a child analyst. She dressed modestly and appropriately and was an easy person to relate to. I believed she would be a continuing asset to the psychology of the group. George began as a surgeon in Europe and, as a refugee from the Nazis, came here and did research. He became increasingly interested in philosophy and psychology and he trained as a psychoanalyst under Franz Alexander in Chicago. George originally came from Hungary as did Alexander, and he was interested in the work of Ferenczi. He still looked like a refugee in his choice of ill-matching clothes, but George clearly could be counted on to be a sophisticated rational traveler. Like his wife, he had an optimistic sunny personality and always tended to look at the good side of things. Marsha and George, although respected by everybody, tended not to contribute quite as much to technical conversation because they were easily tired, in contrast to the energetic and cantankerous younger group. I knew I could count on them to calm everybody down in case of any emergency or crisis.

Finally, the lovely slender but shapely dark-haired young resident in the psychiatric department where I was a professor arrived. Claire greeted me with an ebullient "Hello Martin," followed by her husband Edward, a successful businessman who looked askance at the whole undertaking but went along, I think, because he thought he needed to guard his wife's virtue. It

was no secret that men's heads all turned when Claire bounced into the room. Claire was a serious student and was trying very hard to learn about psychodynamics. She was a well-trained physician and, beside her good looks, she was the kind of resident that supervisors enjoyed teaching because of her obvious attitude of interest in the field and her natural cleverness at making people like her. And, let's face it, she was indeed a pleasure to look at.

Edward was tall and casually dressed, apparently a very strong man with dark eyes and hair that was starting to turn grey, which made him appear quite distinguished, and who obviously worked out regularly in a high echelon health club for business executives. It was apparent that he was not looking forward to this trip. He was considerably older than Claire, and gave the impression that he did not like to be disagreed with. He was used to giving orders to employees and he thought primarily in terms of what would bring him profits of all kinds. He tolerated Claire because I think he thought of her as a kind of trophy wife whom he had impressed with his financial power while she was still a naïve and impecunious student.

After Claire and her husband had bounced in and interrupted my greetings to Marsha and George, I saw J. and Henry coming toward us down the long metallic O'Hare corridor. J. was for me a heavenly vision in that sterile environment, appearing in a corridor marked only by the gaunt skeleton of a huge dinosaur that some fool had decided it was appropriate to

install in the O'Hare national terminal. J. was a sylph, narrow and slender. Her brown eyes radiated with a spectacular and indescribable beauty. I thought of Leonardo Da Vinci's saying in about 1500 C.E. that, "the eye which is the window of the soul is the chief organ whereby the understanding can have the most complete and magnificent view of the infinite works of nature." J. was that infinite work of nature, her beautiful body matched her beautiful mind and I was utterly enamoured with her like Dante was about Beatrice, but I had to hide it from everyone. When she appeared I heard in my imagination what I call the magnificent opening of the heavens theme that explodes and then pervades the final movement of Brahms's first symphony—that's how love-stricken I was. Strong stuff! The preoedipal mother? Those lovely breasts! Her callipygian derrière! I could go on and on even as I think of it now, lying on this ugly bed in the intensive care unit with all the cardiac monitors going.

J. was not happy; her husband was haranguing her again with his favorite story about Mesmer as they walked toward us. "Even John Searle, the world's most foremost philosopher, says Freud's psychoanalysis is not a science," he said, "Consider Mesmer." He obviously had prepared this scene. Pulling a clipping from Stanley Jackson's *Care of the Psyche*⁵ out of his pocket, he read it in a loud voice as he came closer to be sure I could hear and understand him:

During 1773-1774, Mesmer “undertook in my house the treatment of a young lady aged twenty-nine named Oesterline, who for several years had been subject to a convulsive malady, the most troublesome symptoms of which were that the blood rushed to her head and there set up the most cruel toothaches and earaches, followed by delirium, rage, vomiting and swooning.” Influenced by efforts in France, Germany, and Britain that used magnets in the treatment of stomach ailments and toothaches, and by his own theories of planetary influences and magnetic effects on animal bodies, he had Fräulein Oesterline ingest an iron preparation and then applied magnets to her stomach and both legs, regularly bringing her temporary relief from her symptoms. Each time, “she felt inside her some painful currents of a subtle material which, after different attempts at taking a direction, made their way towards the lower part and caused all the symptoms of the attack to cease for six hours.”

I watched Henry as he decanted dramatically. He was about as tall as J. and not in very good physical shape. His shoulders drooped and he sported a paunch, yet he was obviously a man of energy but at this point without any insight into himself. It was his habit to blame J. if anything went wrong with his life and interrupted his comfort. He had a full head of hair, even though he was middle aged, and kind of a dull look one does not expect from philosophers, that gave me the impression he would be a more pliable member of the group than Edward. Clearly he was used to giving lectures and presentations. I decided on the spot to ask him to make a presentation to the group when the proper time arrived. Pretending not yet to see me, he continued,

“Reasoning that the magnets that he had used with Fräulein Oesterline were themselves “incapable of such action on the nerves,” Mesmer argued that the magnets had served as conduits for the animal magnetism from

within his own person and had reinforced its effects. From the accumulation of this subtle fluid in his own body, he had influenced the comparable fluid in the patient, and so had brought about the clinical change. He subsequently “undertook the treatment of various disorders” in other patients, “including, among others, a case of hemiplegia due to apoplexy, stoppages, vomiting of blood, frequent colics, a case of paroxysmal sleep with spitting of blood stemming from infancy, and cases of normal ophthalmia.”

I had met Henry once before, in my office, where I tried to convince him he was the luckiest man in the world to have J., and to not to blame her for his failings. Needless to say, this did not endear him to me, nor did he pay any attention to what I had to say. Clearly his anger came out in an intellectual challenge right at the start of our trip.

“Henry, Henry, Henry,” I cried, politely shaking hands with both of them as they drew up, “I could not help but overhear your diatribe and you have it entirely wrong.” Looking at Henry but really watching J. out of the corners of my eyes, I said, “Psychoanalysis is indeed a science. It has a method and does not work simply by intuitive genius or mesmerian charlatanism. Its method is the method of free association in a situation where there is relative neutrality, privacy, objectivity, and abstinence. The analyst observes the inevitable transference, or at least inevitable in a well conducted psychoanalytic treatment, which is the closest to a natural science phenomenon that he has at his disposal. The patient transfers to the analyst various characteristics from significant individuals in the past or projects onto the analyst certain

undesirable aspects of himself. The analyst listens from at least five theoretical channels and allows his or her own mind to wander in free floating attention, picking up his or her own associations to the patient's material. After considerable careful listening on all the channels that the analyst was trained to work with, the analyst gains a sense of conviction about the material and is able to interpret it to the patient. He or she then observes the patient for behavior, dreams, and further associations, in an attempt to validate or invalidate the interpretations, which must be thought of as hypotheses. It is very much the same as in any other scientific procedure where hypotheses are tested and accepted, rejected, or modified as the case requires. For example, if an interpretation is followed by boring flat material and causes no change in the patient and nothing new to appear in dreams or fantasies, it is either wrong or ill-timed or inappropriate.

“So the most essential insights of psychoanalysis derive directly from our inference of the patient's unconscious mental life through free association and evenly suspended attention,” I concluded. Then in order to fight fire with fire, I reached into my folder of lecture notes and took out a reprint of Balter's⁶ article in Volume 54 of *The Psychoanalytic Study of the Child*, which I brought along in anticipation of Henry's assault. I read, in what I hoped was my most professorial tone of voice,

The unique and characteristic insights of psychoanalysis include: the predominantly infantile and instinctual nature of unconscious mental life;

the omnipresent influence of unconscious mental life on conscious mental life; transference, analytic and extra-analytic; the meaning of dreams and slips; infantile sexuality and psychosexual development, including the Oedipus complex; the genesis of neurotic symptoms and perversions in the Oedipus complex; the oedipal origin of a universal unconscious moral agency (the superego); the existence of narcissistic object relations. These and other insights are interrelated and constitute a relatively coherent—but open-ended—view of the mind and its development. They can best be validated and confirmed through the unique psychoanalytic method of inferring unconscious mental processes—free association and evenly suspended attention—the very method that fostered their genesis international the first place.

That will show him I'm a professor too, I thought, but to my surprise instead of Henry answering, Claire drew herself up to her full dark haired height, her dark brown eyes looking directly at me. Again one could sense the attention of all the men focussing on her. But she simply said respectfully, realizing that she was a resident and I was the professor and leader of the group, "Doesn't this mean that when Kohut announced that empathy and introspection were the essential observational method of psychoanalysis or when there were schools like the Kleinians who were not concerned with free associations to guide them to their interpretations but rather used subjectivity and intuition, that these individuals are using a different method than that of Freud?"

"You are correct, Claire" I replied, "but we do not have a situation of polarity here; rather one of overlapping ideas and differences of approach which are all trying to achieve the same thing, the best possible

understanding of the unconscious conflicts and fantasies of the patient.”

Claire responded, “I don’t understand this because it seems that these are diametrically opposed techniques. Using projective identification and countertransference analysis as the Kleinians do, makes it seem that the analyst’s understanding of the patient rests more on his idiosyncratic intuitive talent than on inferences derived from a standard, generally employed method.”

“I am glad you are reading the literature Claire,” I answered gently, “and I think we will have to discuss this at great length on our trip, because it is a very controversial issue. My approach has been to use more than one theoretical channel, but with emphasis on the Freudian channel as the basic methodology.”

Claire looked puzzled and was about to reply when Gertrude and Sarah, who had been at the airport restaurant while waiting for the others, came up gushingly, shaking hands all around. “We just flew in from Oregon,” chirped Gertrude. “And soon we have to get on the plane again,” complained Sarah.

Edward, Claire’s husband, was glad to meet Sarah because he was beginning to feel like the only individual in the group who was not interested in the clinical practice of psychoanalysis or psychodynamic therapy. He had hopes for Henry also. He yawned and said, “Do we have to continue this

discussion here in the airport? They're already announcing the boarding of our plane to New York. We have to land there and pick up Richard and Pearl according to the protocol you gave us, Martin, and then we must find the plane for Ankara."

We stood in line and walked down the rickety tunnel to the cramped incredibly uncomfortable plane that was to fly us from Chicago to New York in a couple of hours. We shoved our carry-on baggage into the overhead compartments that were too small to handle them and pried ourselves into the tiny soiled uncomfortable seats.

I chose, in making up the seating for all the flights, to always sit just in back of J. This was because I was hoping when she got up to go to the lavatory I would also get up and stand in line behind her, giving myself a chance to have a few words privately with her. This scheme was simply a derivative of a repetitive dream I experienced ever since arranging this tour. In it we are on the plane for Turkey, a nine or ten hour flight and everyone was more or less asleep in the cabin with the lights out. I heard J. stir and finally get up to go to the lavatory. I got up and followed her into the lavatory itself so we were both enclosed in a small private space. At my urgent request she fellated me and when I ejaculated in the dream I awoke with an anguished cry and a nocturnal emission. I could feel my heart palpitating arrhythmically and jumping all over my chest as a spell of atrial fibrillation overtook me again.

These spells were happening more and more, but my cardiologist said not to worry about them as long as they spontaneously converted into normal rhythm in an hour or two, but it was taking longer and longer to convert in spite of all the ill-tasting medicines and pills he gave me. But what was the hidden wish in the dream? Sadly, the ecstatic pleasure the infant receives feeding at the maternal breast could not be reproduced in this kind of sexual encounter in reality because of all the conflict it caused, resulting in a mixture of pain and pleasure. So it had to be gratified and sexually disguised in a dream. Again and again I had whispered to J., "I have to have you, I cannot live without you." She would reply, "This is not realistic Martin. I am married. I would feel very guilty at betraying a husband in our marriage of fourteen years duration." So the intense and needy passion I felt for her was not reciprocated, although clearly she liked me, perhaps even loved me, and would be happy to see me pleased.

On the plane to New York I was sitting next to Gertrude and Sarah who noticed my book and jolted me back from these thoughts to reality by laughingly pointing to my volume of Dante. "If this is not sciolism then I don't know what is," she said with a broad smile, "Is Dante going to be your relaxation and airplane reading?"

"Yes," I replied, "for many reasons. As T. S. Eliot said in his fine essay on Dante, one outlives and outgrows most poems, but Dante's is one of those

which one can only just hope to grow up to at the end of life. I have been struggling with this poem for over sixty years. Also, as Dante was led by Virgil, I am led by Freud. To me Freud was *il miglior fabbro* (the better craftsman), as T.S.Eliot said of Ezra Pound in the epigraph that begins Eliot's famous poem, *The Waste Land* . I still believe that we should be led by Freud and not allow ourselves to stray too far from his basic principles."

"Well they certainly do stray in Oregon!" said Gertrude, shifting her overweight body around uncomfortably in the cramped airplane seat. On the west coast it is all intersubjectivity, all the co-creation of the data of analysis in the here-and-now. The whole concept of childhood seems to be put in the background by this new approach in which the analyst is analyzing not only the patient but himself in a kind of mutual investigation, the sort of thing that was perhaps started by Ferenczi."

"We have to go back to Freud." I said, "We have to read him again and again and again. All the rest of us are little pygmies standing on his shoulders."

"Well," said Gertrude, "a lot of psychoanalysts would disagree with you Martin, and they certainly would not accept his drive theory or his metapsychology."

"But in English literature we do accept the concept of Eros and the death

instinct,” interpolated Sarah. “In fact I think in the field of English literature Freudian psychoanalytic interpretation is more respected than in the field of psychiatry and, it seems, even than in the current field of psychoanalysis in the United States today!”

“Freud’s drive theory was right,” I insisted, “Anna Freud said psychoanalysis is a drive theory and she could not understand why there was so much objection to that. We are all *au fond* bundles of libidinal and aggressive drives and whenever we gratify the archaic aspects of these drives we achieve an extremely intense and unparalleled satisfaction that can only be duplicated by the use of mind-bombing drugs such as cocaine. This is why a disease like cocaine addiction is so difficult to cure; there are few normal adult satisfactions or gratifications that can equal the high these chemicals can provide.”

“Do you think Freud was a cocaine addict?” asked Sarah. “There are some authors who blame his whole discovery of psychoanalysis on his effort to withdraw from cocaine.”

“This is nonsense,” I said, “And of course Freud always had and always will have virulent enemies who cannot stand what he has to tell us about what is basic in all human beings. Shakespeare, the world’s greatest psychologist, portrayed these basic drives as Caliban, living underground and

always a danger to reason and civilization.”

“Thank you Martin” said Sarah mockingly. “I *have* heard of Shakespeare.”

My attention returned to J., who had not moved in the seat in front of me or shown any indication that she was listening. But now the plane began its slow descent to New York’s JFK International airport and soon we were on the ground again and transferring ourselves to the international flight to Turkey. Here again we found a dirty crowded waiting area with television blasting everywhere and annoying me beyond words. Soon Richard Adler and his wife Pearl appeared and we were ready to board for our international flight. Tall sandy-haired Richard was a prominent member of one of the many psychoanalytic societies in New York, a very prestigious one, and had about him the air of a dogmatic knowing more than ordinary mortals. His blue eyes cast a penetrating look very much like the subject of Titian’s magnificent “Portrait of a Man” and he trained them on people as if to magically penetrate into their minds, making them uncomfortable. His demeanor was always serious and professional. He dressed quite conservatively, wearing expensive suits and ties over a large frame of a body that clearly was toned up regularly in an exclusive athletic club. He spoke beautifully and intelligently, but always about matters he considered important and in a carefully controlled manner. He rarely smiled.

Pearl was short and stocky and wore her blond hair cut in a masculine way. In contrast to her husband she dressed rather poorly and her clothes could have come off the rack in a discount store. She also called herself a psychoanalyst but was not a member of the same New York society and did not mix in the same professional circles as her husband. She appeared to be rather oblivious of her husband's airs, and there was a kind of detached atmosphere about her. One assumed that this was the only way she could live with him. It was not possible at first to decide if she was preoccupied with important psychoanalytic matters and her clients, or simply a kind of dull person. She seemed to be what Richard wanted, as she was apparently a willing audience to his pronouncements. I suspected she simply humored him and did not take his opinions seriously.

Richard was wearing a very fashionable suit and I wondered how he would survive a nine or ten hour flight to Turkey in that outfit. The others were dressed more casually but Richard attempted to preserve his professional distance and demeanor all the time. Perhaps this was a habit from his consulting room, because Richard claimed he was trained in the mid-twentieth century to avoid "parameters" in the analytic process as much as possible and to follow Freud's rules of being opaque and to show nothing to the patient except what the patient was showing, like a mirror. I regarded this as impossible to do—certainly Freud with his temperament and energy could not do it—but Richard and his group stayed with what Freud had advised. I

wondered how many of the neuroses that these rigid analysts treated were made worse by the cold atmosphere of what they thought constituted a classical analysis. Apparently they had never really allowed themselves to study Freud's case histories from the point of view of examining Freud's behavior. I am certain they were familiar with Lipton's classic papers pointing out that Freud was less of a Freudian analyst than anybody else. It is as Marx once said, "I am not a Marxist!" I was sure all of this would come up again in Ankara.

There is almost nothing so unpleasant as a domestic flight in an American airplane. The only thing worse is a flight overseas in an American airplane. The seats are small and cramped, the aisle is needle wide, and when the person in front of you leans back the seat is in your lap. This makes it impossible to read because there is not enough space to hold the book away from your face more than a few inches and one has to go through all sorts of bodily contortions to find a suitable distance for the book to reach your eyes. As I was twisting and turning in the cramped little seat at the beginning of the flight to Ankara, I heard Richard Adler behind me in a discussion with his wife Pearl. When we met I always felt that Pearl was drab in every way; her eyes were drab, her hair was drab, and her clothes were drab. Furthermore, she spoke in such a soft voice that I could barely hear her and some of the time I could not hear her at all. I regarded this as passive aggression, but others seemed to tolerate it fairly well. On the other hand when one did hear Pearl,

as I gradually learned, what she said usually made sense.

Richard was going on and on about the differentiation between the therapeutic alliance, the real relationship, and the transference. He felt they could not be separated. Those few comments by Pearl that I could hear indicated a difference of opinion. Richard insisted that all of the relationship between the patient and the therapist would have to be regarded as infused by transference and countertransference. He was contemptuous of Lipton's work establishing that Freud did not follow his own recommendations for psychoanalytic technique. Indeed, Freud was very human with his patients and at times crossed boundaries that even he should not have done, such as recommending whom to marry or whom not to marry. But on the whole Freud treated his patients as guests in his house, and from the time the patients got off the couch his demeanor was pleasant and friendly. He was not so concerned with the "exit line" so aptly described by Gabbard, in which the analyst needs to pay careful attention to the opening and closing comments of the patient as he or she enters or leaves the office, although he was certainly aware of the dynamic importance of such material. Pearl thought these opening and closing interactions represented the real relationship and if that was not properly established nothing else would happen in the treatment. Richard was much more austere, saying practically nothing when the patient entered or left and assuming a poker face. I wondered how Richard's patients could tolerate such behavior, but of course if one is convinced that one's

doctor knows everything and is doing exactly the right thing, one would put up with any kind of offensive and even sadistic treatment. Richard was getting the better of the argument and I glanced back to see him in his Brooks Brothers suit, shirt, and tie. A tall fellow, his suit I thought (hoped?) was already beginning to rumple under the torture of the sardine-can airplane seat. Pearl, being smaller, was less uncomfortable.

After the usual tasteless *mélange* that passed for airplane food was served and the remains collected, the cabin was soon darkened to allow the travelers to attempt to sleep away their discomfort on this long nine-hour flight. I took a milligram of Ativan and began to drift off into an uncomfortable doze. I thought to myself, “How can some modern analysts be so foolish to believe that anything could replace Freud’s prescient notion of drives. Even Melville in the nineteenth century put these words in the mouth of Captain Ahab⁷:”

What is it, what nameless, inscrutable, unearthly thing is it; what cozening, hidden lord and master, and cruel, remorseless emperor commands me; then against all natural lovings and longings, I so keep pushing and crowding, and jamming myself on all the time; recklessly making me ready to do what in my own proper, natural heart, I durst not so much as dare?

With thoughts about lust and aggression, I drifted off into uncomfortable sleep. The hours passed and somewhere in the middle of what was night in Turkey but just evening in New York, I sensed that J. was stirring.

I awoke with a start like an Indian in the wild west hearing a snap of a twig as intruders appeared. J. had dropped her book while she was asleep. This woke her up and she unfastened her seat belt and bent over to pick it up. The view swept over me and initiated a wave of lust, but I choked it down. Now awake, J. began walking towards the lavatory. At last! I unbuckled my seat belt and followed her.

As we stood in the alcove waiting for our turn I whispered to her, "I must have you, I cannot live without you."

She replied calmly, "Please Martin, do not talk to me this way. I'm a married woman. You stir up tremendous guilt."

Her eyes were sad and one could see that she did not really know what to make of my fervor. "I must have you," I repeated. "We must have some time together, I cannot stand it when we are apart."

"Please Martin," she said and then the lavatory door opened and it was her turn. She slipped inside and closed the door, leaving me standing outside. So much for my wish-fulfillment dream.

Clearly I was ensorcelled by this woman. I wanted her to be a maenad but she had no such intention of letting herself go. I wanted to have a Ghazalian experience with her! In the eleventh century Abu Hamid al-Ghazali

made a drastic turn in his life. He was a highly respected and wealthy and prestigious professor in an outstanding university and he left it all and wandered around the Middle East for many years. Hence any drastic turn that one makes in life that seems incomprehensible to one's family, peers, and the popular culture, is known, at least to me, as a Ghazalian experience. I had visions of running away with J., spending time in Paris in the spring, Sarasota, or San Diego in the winter. If J. had any such visions she certainly did not express them to me. My ego tried to console me with the famous words of Sir Isaiah Berlin, "*Hic biscuitus disintegrat*," his clever Latin version of "So the cookie crumbles" but it did not work and I felt emptiness and despair.

I waited in the alcove wondering what to say or do next. Clearly this was getting nowhere. I glanced down the aisle of the plane and saw Richard standing up and looking over the seats of our party at Claire. When he caught sight of me he smiled a bit sheepishly and came down the aisle to take his turn in the lavatory.

"I was just talking to Pearl about the so-called real relationship between the patient and the therapist," he said.

I thought, "Does this man never quit? Must he go on and on about psychoanalysis and psychoanalytic technique with no other interests and no capacity to be silent?" But I said nothing.

He continued, "I feel everything is transference and countertransference and it is completely the responsibility of the therapist to prevent any kind of enactments or primary process behavior in the office. What the patient does outside of the office should simply be analyzed and no opinions should be expressed. What do you think Martin?"

I could not help myself. "I think," I said, "that it is the middle of the night on a devilishly uncomfortable airplane and I cannot wait to go to the bathroom and then go back to my seat and take another Ativan so I can sleep away the rest of the night."

"Ah yes," Richard said, "I knew you were a pragmatic sort of fellow but I am sure we will have a chance to discuss these matters later on. I understand that J. was once one of your patients, is that not true?"

"Yes," I said, "years ago. Now she and her husband are my friends."

"That's funny," said Richard, "I mentioned to Henry that he was a friend of yours and he said, 'No, only J. is his friend'."

"Well," I lied, "that is probably because he does not agree with the whole orientation of psychoanalysis. We will have to sound him out on these matters after we arrive in Turkey."

"Then why did you invite him?" asked Richard incisively. Just then the lavatory door opened and J. came out, smiled hello to Richard, and returned to her seat. It was my turn.

"I like a little variety" I lied, "and Henry is certainly outspoken and intelligent enough to keep us on our toes. Excuse me Richard." I entered the lavatory cursing to myself. "Why is it," I thought, "that nothing can be kept quiet? Why must people pry and gossip so much? I will have to be very careful on this trip. This Richard is very nosy, perhaps his voyeurism and continual need to probe in a somewhat sadistic fashion represents the infantile roots of why he chose to become a psychoanalyst. We shall see."

Afterwards, I squeezed myself down the little aisle towards my seat. J. had already wrapped herself in the dinky blanket the airplane provided and was trying to sleep. Again a wave of desire and lust washed over me. It was not so much an urge for sexual gratification as it was an urge for fusion and for the experience of feminine warmth again. Feeling desperate, I resumed my position in the cramped seat behind her and took another two milligrams of Ativan. In a short while I fell asleep and had a dream. In the dream I was with my wife who was alive again and we were walking toward the house of a patient of mine, an unpleasant bulimic woman named Dianne. She and her husband had invited us to a *soirée*. As we approached their house someone started shooting at us and I placed myself in front of my wife in order to

protect her. I decided we should forget about going to their house to the party and we turned around and came home. To my surprise Dianne and her husband were having the party at our house. Dianne offered me some food, which I refused. There was another couple there; the husband was a businessman and we began to chat. However, because Dianne was my patient, I was very uncomfortable.

When I awoke and remembered this dream I was surprised because I almost never have a dream about a patient. I had been making no progress with Dianne over a long period of psychotherapy and was feeling increasingly frustrated as my efforts were thwarted. As I tried to analyze the dream it occurred to me that it was primarily a dream of narcissistic rage at three women, my wife for dying and thus leaving me, Dianne for frustrating my best efforts as a psychotherapist, and of course J., who was not responding the way I wanted her to respond to my ministrations. I became aware that the death of my wife was leading to some psychic fragmentation on my part. On the one hand, there was an unbearable longing for the archaic selfobjects of my childhood, a very early time of life when the primary caretakers are experienced as a part of one's self, or, in Kohut's terms, selfobjects, who are expected to meet every need of the child and have none of their own. On the other hand, a tremendous anger was eating me up inside at these women who would not provide this selfobject experience. I had little more time to think about the dream because the lights went on in the cabin and the attendants,

in their usual cold brisk and unfeeling way, went around distributing little hot towels. It was necessary to wipe one's hands and face in preparation for more dull and unpleasant airplane food called breakfast.

There were about two hours left to the flight and the plane would be beginning its descent in about an hour. I decided to while away the time by going over unfinished notes about a lecture I planned to give to the group, but it soon led to a series of remembrances about the circumstances of my first lecture to psychiatrists many years ago . . .

. . . It was not long after my father died that I got up to work and think earlier and earlier in the morning. Like Ivan Karamazov, I imagined a meeting, but not with the devil. Instead I met Sartre's Roquentin and engaged him in a debate over how his plight eventually led to Sartre's existential psychoanalysis, his ruminations about the meaning of existence, and existential philosophy. This led me to begin work on a lecture in which I proposed to explore existential preoccupations from a psychodynamic perspective and examine so-called "existential psychotherapy."

Now, in my young life, my search into matters like this became more and more intense. I arranged to teach a group of "friends" in order to regain a sense of closeness, but was betrayed by their refusal to cooperate after smiling to my face and promising to support my plans. I experienced the envy

among psychiatric colleagues and between psychiatrists, psychologists, and social workers. I narrowly escaped a violent fight when I single-handedly challenged a group of teen-aged musicians who were “jamming” on my next-door neighbor’s lawn. On retrospect I believe my repressed grandiose archaic sense of omnipotence began breaking through my reality testing, as a response to bitter disappointment in life and the loss of my father.

What was left then in the eerie depths, at the very core, to fall back on when I was unrecognized and unappreciated and ignored? To assuage the hurt I worked harder and harder, incessantly. On one day I saw patients for eleven straight hours, becoming extremely tense from coffee and on my way home I stopped at a bakery to buy some pastry. When I wasn’t served at once, I stormed out. I smoked continuously all day long while working. The tension was reflected on my wife; with my children; in ever expanding circles of tension in my life-world. Every aspect of living became an occurrence of tension and became invested with worry and insecurity. One night my psychiatrist friend had called, a special friend, to warn me about a case presentation I was going to make to a group of local colleagues. I was extremely angry and very hurt when my friend told me one of these colleagues was spreading lies about me; I still tried to ignore gossip. This pettiness and willingness, almost eagerness, to believe gossip even among friends is a sad thing.

A few months later I volunteered to teach for a whole day as part of a panel of speakers at a psychiatric meeting in San Francisco. The day was a failure, and I was told that I could not lecture for an hour the next day because that time is now reserved only for “distinguished psychiatrists.” I was given only twenty minutes to speak.

My reverie, as I looked out the window of the airplane at the blue expanses beyond, went on to how that youthful experience unfolded . . . I was in one of those minimal dingy hotel rooms where minor lecturers are usually placed at meetings.

Very early on the morning of my twenty minute talk I sat up in the room impatiently waiting for my order of six cups of coffee to counteract the three grains of Nembutal I took the night before. It came promptly but there was not enough. I felt woozy and nauseated. While I drank coffee I watched the magnificent view out of the window. The first TV station came on for the day, automatically opening with the Lord’s Prayer. The volume was turned up too high and the chorus boomed out slowly, “For thine is the power and the glory forever. Amen.” I snapped it off irritably, thinking to myself, “this is old fashioned provincial trash; how can people be so stupid?”

It was going to be a hot day in San Francisco and dawn was just breaking over the water. The sky was crowded with clouds of all shades of

grey. Absentmindedly I wrote on the little note pad by the telephone “all grey 7:00 A.M.” I wondered to myself, “Where do all these little boats go at this hour, leaving a big ‘V’ in their wake as they scamper under the Golden Gate Bridge?” The sun was beginning to rise, reflecting more and more light on the clouds. It was incredibly peaceful. “How I love the water,” I thought. As the sun came up I watched the dramatic changes in the colors and the reflections of the clouds in the water. By the time scheduled for the meeting, the sun was full up and the colors were gone. It beat down hard and hot; the sense of beauty and repose were extinguished.

I went downstairs to the meeting room and, as the first speaker scheduled, I delivered my presentation to the small sleepy group, more or less following this outline:

1. The therapist as a real object. His healthy personality and lack of countertransference floundering. A healthy approach to the patient. The inevitable gratifications of therapy and the deliberate gratifications offered to patients in therapy. Only when necessary, these must be provided for good psychodynamic reasons, and not be central to the therapy or they become a serious interference.
The therapist behaves himself.
2. The therapist as a transference object. The crucial event is that in psychoanalysis a transference which is so intense it crowds out the other phenomena, gradually develops. At any rate, in

psychoanalysis, conditions are presented to facilitate the development of such a transference. *Sine qua non* for cure by psychoanalysis. In some cases an intense transference develops anyway even if the therapy is not meant to be a psychoanalysis, and deeper issues must be dealt with. The unpredictability of reaching depth and of success is a big problem. Often it is finances that determine whether a patient gets psychoanalysis or the less frequent psychoanalytic psychotherapy. A fact of life, of a system where cost and resistance of third-party payers such as insurance companies have more to say than doctors about the mode of therapy prescribed.

3. Two key debatable issues are: a) To gratify or to interpret? This must be determined by our judgment of the state of the patient's ego at any given point. Mistakes are very costly either way. b) Are psychoanalysis and psychoanalytic psychotherapy inherently different?

Always interpret rather than gratify if possible but one must know the limitations. Discuss Kohut's phrase: "reluctant compliance" with the patient's overwhelming need for reassurance. The degree of gratification distinguishes supportive from uncovering therapy. The timing of interpretations is crucial.

4. Is there a third aspect? The infantile aspect of the therapist mixing in with that of the patient? How does this differ from countertransference? What is the role of empathy and love at this level? What can we learn from work with schizophrenics, for whom this total participation by the

therapist, even in his or her hopefully minimal unanalyzed infantile aspects, seems to be especially important? What is this third factor, this existential “encounter”?

I finished this lecture, in which far too much was crammed in twenty minutes, to a rippling of polite applause. Now the auditorium began to fill and the audience became alert as the speaker they had evidently come to hear strode confidently to the podium. This slim attractive lady was a statistician working in a large out-patient clinic at a prestigious university department of psychiatry. She was reporting the results of work by a highly respected research group of investigators. They studied patients judged to be chronically depressed who had not responded over four weeks to their usual procedure of brief interviews accompanied by doses of standard anti-depressant medications. They divided these patients into two groups. One group just received another trial of the same medication and procedure; the other group received a new chemical and these patients were closely studied by a team of physicians for various possible side-effects and dangers—clearly the decent and ethical procedure when administering a new drug. There was a “statistically significant” difference in the improvement shown by the latter group over the control group; a new chemical for the treatment of depression was therefore now to be added to the list.

“Not a word about the effect of all that attention and excitement on depressed empty patients,” I thought, and I groaned to myself. I felt

compassion for the sincere investigators because they were only trying to apply standard experimental design but I realized how difficult it is to separate the effect of a drug and of attention on human beings, especially those human beings who suffered chronically from a lack of stimulation and interest. Would a double-blind study help with this? Would it be more efficient if the investigators would not know which patients were receiving the new drug? "Of course, and it eventually will be tried," I said to myself, "but since the side-effects are different, the patients would catch on first, and then the doctors." It was a very difficult problem indeed, and accounted for a common phenomenon in psychopharmacology: a new drug is introduced with much fanfare and publicity of course encouraged and paid for by the manufacturer, and then it gradually sinks into the list of more or less equivalent preparations, adding to the agony of medical students and residents who must memorize all the names and nuances of the differences in order to pass examinations. And every drug has both a brand name and a generic name that the students must learn, at least until, after overcoming the many obstacles posed by the pharmaceutical manufacturer of it, a generic form of the drug is allowed to appear on the market.

Bored, my thoughts began to wander back to my brief lecture. "The logical positivists and Bertrand Russell and behavioral scientists challenge this whole business of 'the existential encounter' as a play on words, a basic confusion in logic and concepts. The existential theologians make a 'leap to

faith' the solution, avoiding everything. But these depressing preoccupations about death and the meaning of life do arise for people in extreme situations. Psychotherapists tend to view this as manifestations of mental illness rather than as the dramatic philosophical preoccupations of all humanity. These concerns are actually more important to sociology and psychotherapy than to philosophy because when taken as basic philosophical principles of human behavior they are easy to demolish, but as preoccupations secondary to either social maladjustment or inner psychic conflict they are familiar in the therapist's office . . . Heidegger's *Sorge* , a poor term, means a state of double tension, the self in flight from itself!

I began musing on and on, somewhat due to a hangover from the sleeping medication, almost in a kind of free association: "One cannot help feeling very ambivalent about Boss's existential *Daseinanalyse* . On the one hand it tears down the entire theoretical foundation of Freud's psychoanalysis; on the other it correctly emphasizes the caring for and being together aspect of healing in psychotherapy. It contrasts the scientific versus the phenomenological. Especially interesting is his reference to Heidegger's 'anticipatory' and 'intervening' forms of care! I'm drawn back to *Sein und Zeit* again and again . . .

. . . "Very embarrassed last night: at a boring cocktail party I left early and was confronted by the host and hostess on the way out. What a poor

politician I am. Unbelievable! . . .

. . . “Sartre emphasizes the notion of the absurdity, the meaninglessness of our existence. Most people attempt to escape this by following the customary roles and runways of life, pretending they are going to live forever. Sartre calls this ‘bad faith,’ for our essence does not precede our existence. Existence precedes essence for man; he makes his own essence. But does he? . . .

. . . “This is the exact reverse of Freud’s view. We are not determined in our behavior by either physiology or the unconscious, according to Sartre. Emotions are intentional and must be explained teleologically by bringing in the object of the emotions each time. There is an inherent freedom in human nature, linked with political freedom. All moral principles are based on choice. Sartre poses the question: how to escape what Kierkegaard called the dizziness of freedom without recourse to falsification or bad faith? Later Sartre tried most inconsistently to resolve the problem by seeing the human situation as due to bourgeois capitalism, and he embraced Marxism—a philosophy based on complete determinism—viewing Marxism as a system where ‘man makes his own history.’ This remains a foggy generalization and also contradicts Sartre’s early contention that existential ‘nausea’ is inherent in the being of humans. He now makes it contingent on the political life of man. Contrast Sartre, leading an eager, enthusiastic, productive, meaningful

life that includes many friends and many projects, and Roquentin in Sartre's philosophical novel *Nausea*, whose existence is meaningless and empty. Thus in his own behavior Sartre contradicts his own philosophy—a striking example of 'bad faith.' . . .

. . . I remember imagining a discussion with Roquentin. He tried to counteract his nausea born of his realization of the utter meaninglessness of his life by trying to get together with his former girl friend Amy. He hoped if he could stir up their intense love it would cure his nausea. But of course she rejected him. His nausea was the result of his being utterly alone, without friends or family, or any commitment to anybody or anything. Roquentin was actually unable to benefit from all the leisure he had available, a common problem we also see in the lives of intelligent retired persons . . .

. . . "The moment of leisure, as I have defined it, is the moment which can come only to a fully conscious human being able to draw back from activities and compare what he or she is doing with what he or she would like to do, or could conceive as better worth doing. This is also the moment at which the sense of a need for education begins. Our words school and scholarship, as Aristotle pointed out, are connected with the Greek term *schole*, leisure. Lovely. What will this do to one's finances? Schopenhauer, the genius, did not have to worry about finances. He was able to use his leisure in this fashion, in contrast to Roquentin, and even though he was just as unattached to people

and equally if not more aware of the absurdity of life . . .

. . . “I don’t see much progress on the important questions in philosophy since Schopenhauer. What is needed is the elaboration of his thought in the light of Freud. His philosophy is neglected because he was personally repulsive and his pessimism is repulsive. The endless meaningless struggle for existence is ‘vanity.’ The ‘will’ is discovered by introspection, a fundamental intuition, an entering into yourself. It is a blind impulse, endless striving. The will to live, to maintain the species, is never satisfied, for the satisfaction soon turns to boredom. The ultimate horror of existence! The only escapes according to Schopenhauer are the temporary, as in esthetic contemplation, and the permanent, as in asceticism emphasized in the Upanishads. ‘Music is the highest of all the arts,’ he said, ‘providing direct revelation and the best method to temporarily still the will.’ I agree with this . . .

“But this asceticism business seems to me to be whistling in the dark and Schopenhauer himself did not accept it or follow it—more bad faith! Schopenhauer stressed man’s kinship with all living things and insisted that the individual human life is of no importance and is impelled from behind, not drawn from in front by rational goals. This does explain many apparently irrational phenomena. But is it a metaphysical ‘will’ or is it drives and their representations in repressed archaic fantasies that impel one from behind? . .

. . . “So extremely difficult is the question of what really gets patients with serious ego defects to change! Is it a deliberate modulation in the process of psychotherapy of their aggression into docility, due to a pouring in of ‘love’, defined as the intensity of the therapist’s zeal and the need for the patient to change? But what does this do to the therapist over the years? He or she must avoid exploiting or acting out with patients. Yet at the same time the therapist must participate in a genuine existential encounter. But how can one really participate in something like that unless one brings one’s own infantile vectors into the therapy? Here is the problem—a limiting factor . . . Can the patient and therapist really enjoy each other? Searles in *Beyond the Countertransference* writes about ‘very deep feeling involvements’ that the therapist’s personal analysis makes the therapist available for. A devilish problem! How can this even be taught or described in print?” . . .

Emerging from all these reveries, I reached into my notebook and took out a quotation I planned to use in a lecture to the group that seemed to me to sum up the whole existential question, a carefully marked passage in Schopenhauer’s *Essays and Aphorisms*⁸:

When you consider how great and how immediate is the *problem of existence*, this ambiguous, tormented, fleeting, dream-like existence—so great and immediate that as soon as you are aware of it, overshadows and obscures all other problems and aims; and when you see how men with a

few rare exceptions, have no clear awareness of this problem, indeed seem not to be conscious of it at all, but concern themselves with anything rather than with this problem and live on taking thought only for the day and for the hardly longer span of their own individual future, either expressly refusing to consider this problem . . . you may come to the opinion that man can be called a *thinking being* only in a very broad sense of that term and no longer feel very much surprise at any thoughtlessness or silliness whatever, but will realize, rather, that while the intellectual horizon of the normal man is wider than that of the animal—whose whole existence is, as it were, one continual present, with no consciousness of past or future—it is not so immeasurably wider as is generally supposed.

The harsh voice of the pilot, “Flight attendants prepare for landing,” broke through my unfinished thoughts. The answers would have to wait. Perhaps they would come when I discussed the questions with my colleagues on this trip. There was hustle and bustle all around me, trays being put up and seats moved into the upright position. The panorama of Ankara loomed up through the airplane window.

Notes

¹ *Remembrance of Things Past*. trans. R. Moncrieff. N.Y.: Random House, 1932, vol.1, p.325

² N.Y.: Knopf, 1999, p.426.

³ see Chessick R. (2005). The human mind in the contemporary world. *J. Acad. Psychoanal.* 33:291-321.

⁴ Chicago: Regnery Gateway 1981

⁵ Yale University Press, 1999, pp.239-240.

⁶ Constant mental change and unknowability in psychoanalysis. 1999, p. 110

⁷ *Moby Dick*. N.Y.: Norton, 1951, p. 444-445.

⁸ trans. R. Hollingdale. Baltimore: Penguin, 1979, p.94.

Chapter 2

Ankara

There is no need to travel in order to see it again; we must dig down to discover it. What once covered the earth is no longer upon it but beneath; a mere excursion does not suffice for a visit to the dead city, excavation is necessary also. But we shall see how certain impressions, fugitive and fortuitous, carry us back even more effectively to the past, with a more delicate precision, with a flight more light-winged, more immaterial, more headlong, more unerring, more immortal than these organic dislocations.

Marcel Proust¹

It was a bedraggled group that staggered off the plane after those nine hours of discomfort. We were held up at the airport before we could come out of the security area because Richard had not bothered to get a visa to enter Turkey, so we waited while Richard went through the bureaucratic ritual, and then we took our baggage through customs and out into the main hall of the airport. Only Claire looked radiant in her youth and beauty after such a long trip. The rest of us were visibly sagging, unwashed and unshaven. We stood around rather uncertainly, not sure what to do next. A short white-haired little man came up to us, accompanied by a taller and more slender much younger man. The former introduced himself as “Professor Doctor” Aram Kozturk and introduced his handsome companion as Ali Bozan, the chief resident at the *Hacettepe Üniversitesi* hospital department of psychiatry, and the only resident who spoke fluent English. Professor Kozturk, obviously a

very efficient and authoritative person, was our host in Ankara and he hustled us with our voluminous baggage toward a waiting bus. Ali came along modestly and quietly, helping with the baggage. The women in the group quietly commented to each other that he looked like a movie star.

At the bus we met our guide for the trip, assigned by the Turkish tour agency, who introduced herself as Sema. She was dark haired, dark eyed and very Turkish in appearance, young and slender, wearing form-fitting black slacks and a white blouse, and radiating with energy and hospitality. She was a surprising opposite of what I had expected from traditional Moslem women. A six-foot tall powerful looking middle-aged Turk with very dark hair and black eyes accompanied her. This was Abdul, our tour bus driver, who was not able to speak English but who was very “old world” during the trip in his manners and his efforts to be pleasing. He looked like a football player but turned out to be a kind and gentle person.

We drove through Ankara while Sema and Professor Kozturk began explaining the mysteries of this unusual city to us. Actually Ankara is two cities, a sleepy medieval village as it was until the advent of Atatürk and then, by his decree, the capital of Turkey. The new capital city looked like a small modern metropolis. The superposition of the modern on the archaic in Ankara was our first metaphor toward understanding the development of the human mind. The hotel in the new city where Professor Kozturk had installed

us was a very tall imposing cylindrical building with a silver metallic sheen all around it. It could have been in Berlin or Paris.

While the professor and Sema were explaining the history of Ankara to us, I noticed that Ali could not keep his eyes off Claire. Richard at this point had assumed the attitude of what the Japanese call *mokatsu*, already viewing all of this and the entire tour group with silent contempt. The rest of us paid attention the best we could in our exhausted state while Professor Kozturk, rather oblivious to how we felt, extolled the virtues of his hero, Atatürk. Indeed, the huge Atatürk mausoleum was the central showpiece of Ankara, as we were to discover. It was laid out on vast well kept grounds. Hoards of Secret Service men as well as military units paraded all over the place and watched everyone with suspicion. The professor explained that foreign visitors were always brought to this mausoleum soon on arrival because it was the pride of modern Turkey. He was clearly very impressed with Atatürk, perhaps with a reverence such as some Americans feel toward George Washington, the so-called father of our country. But Atatürk's mausoleum was nothing like the Washington monument, it was more like the Lenin mausoleum in Red Square in Moscow once appeared. We had to stop there and pay our respects before we got to enter the hotel.

Strolling inside we were informed that it was very bad manners to turn one's back on the actual tomb of Atatürk, which was located imposingly at one

end of the dark inner hall. We watched a group of bemedalled generals in uniform from some foreign country being led around the inside of the mausoleum by an excited chattering guide. But there were also a number of ordinary tourists present from several countries standing about in various phases of boredom, as well as many individuals who appeared to be native Turks, including heavily veiled orthodox Moslem women. I couldn't get over the contrast with Sema. It was from a discussion on the grounds of the mausoleum that I first became aware that just as there are two cities in Ankara, there are two kinds of citizens in Turkey. Groups of devout Moslems, their women covered in black and with veils, intermingle with modern Turks who dress like westerners, such as Sema, our guide. Sema didn't say much at this point—we thought we would get to know her better in parts of Turkey where a guide is really needed—but it was clear that she deeply resented and was ashamed of the old style Turkish life. A modern young woman, she obviously had been born after the revolution produced by Atatürk.

The professor explained that at the end of World War I the Ottoman Empire was a beaten country. At Versailles it was decided to divide it up into zones of European influence, but Atatürk, a colonel who had distinguished himself in the defense of the Dardanelles at Gallipoli, and was apparently a natural born leader, rallied the Turks and convinced the European powers to allow modern day Turkey to be an independent country. He was one of the most extraordinary leaders of all time because he retained his simplicity and

never flagged in his dedication to dragging Turkey and the people who live there out of the Middle Ages and into the modern world. He wanted Turkey to become one of the European powers. But a series of devastating earthquakes ravaged and impoverished the country, threatening to fling it back into third world status. These earthquakes took place at the same time of an endless bloody Kurdish rebellion in western Turkey, making it almost impossible for anyone to visit that part of the country. Our arrival in Ankara was providentially a little before the calamitous earthquakes but, as we were soon to discover, the rebellion was already raging.

After our brief and rather dull preliminary visit to Atatürk's mausoleum we arrived at the imposing hotel, which was inside every bit as luxurious as some of the nice hotels in Europe. The group wanted to disperse to their rooms. I cautioned them not to sleep but rather to reassemble in an hour or two because it was relatively early in the day and their jet lag would be worse if they tried to sleep on arrival. Professor Kozturk and Ali and Sema were driven away by Abdul, with a promise to return and meet us later that afternoon.

After unpacking, I came down eagerly for some lunch and suddenly felt trepidation as I saw that Henry and Edward were the only ones who had arrived so far, too impatient to wait up in their rooms for their wives. They were deep in discussion and it flashed through my mind that Henry might

have been the person in the Dianne dream (reported in the Chicago section) doing the shooting and Edward the businessman at the party. I walked over and sat down. Edward brusquely began, "Martin, Martin, this Freudian thing, it doesn't really seem right."

The philosopher Henry could not wait to enter the fray. "Not only is it not right," he said, "it is a delusion. It all began with Descartes, who initiated the Enlightenment approach where each man could investigate things for himself. Before that time we had the medieval situation where every man knew what was expected of him and believed in a God that he could pray to and must answer to. It was with the breakdown of the medieval mind and the consequent loss of the spiritual comfort of everyone knowing their place in the hierarchy that set the stage for it. What started it all? It was the idea of experimentation, the notion of Bacon in the early seventeenth century that we could learn all the secrets of nature by observation and experiments and reason. Gradually the medieval system, so beautifully articulated in the copy of Dante that you carry around but never seem to be reading, broke down, and finally, with the appearance of Nietzsche, we had the announcement of the death of God."

Edward continued, "And Nietzsche was right in his predictions because the twentieth century was the worst horror in the history of the world. Everything exploded and blew apart. The turn of the century produced the

flowering of a new system to explain the emergence of what I call the sensible businessman's point of view, namely, that each person is on his or her own and pleasure is the only goal of life. And money buys pleasure, the more, the better! Capitalism represents the end of history! All countries, including this dilapidated one, will end up with democratic capitalist governments." I admired Edward's forthright words, recognizing that the current economic system in the western world is based simply on greed and the striving for immediate gratification and pleasure, without regard for other people who may be more unfortunate. "Here," I thought to myself, "is why psychoanalysis has come into eclipse. The culture has shifted. As Lear² wrote, 'Psychoanalysis stands or falls with our culture's commitment to the individual'."

"Yes," said Henry, "and that explains how the Freudian system became so popular. It enabled everyone to claim that it was scientific and rational for people to be selfish, greedy, and pursue their own ends. Actually, the whole system was a delusion, a delusion which gained popularity because it replaced the medieval system and served as a rationalization for what had already happened."

Edward added, "And what had already happened was the rise of capitalism. The Protestant ethic and the glorification of hard work and the accumulation of money were very important, far more important than any sort of spiritual values. As good old President Calvin Coolidge used to say,

"The business of America is business'."

Henry went on, "The Freudian system itself was nothing but another system of suggestion and persuasion perpetrated on the patient by a therapist who was certain that his theoretical formulations were absolutely correct. Why I even read that Freud banged on the couch with his cane when patients refused to accept his interpretations!"

Out of the corner of my eye I saw Gertrude and Sarah approaching and beginning to overhear the conversation. "No, you are wrong Henry and Edward," I said. "Freud offered us a methodology, that of free association and interpretation of the transference which gives us a chance, if studied from several channels of psychoanalytic listening, to form an ever-more-accurate representation of the interior psychic life of the patient. Psychoanalysis is primarily a method of cure in which infantile conflicts are revived and resolved again, but this time with a much more adult ego that has adult techniques and sublimatory capacity at its disposal.

"Oh, that is no longer believed," sneered Gertrude, coming up to us and unable to keep silent any longer. "On the West Coast now we are using postmodern psychoanalysis or intersubjectivity. We believe that everything is co-created by the analyst and the patient in the consulting room and that all the data of the psychoanalytic process are those emerging from the here-and-

now interaction. We study the enactments that arise out of the analyst's countertransference and we try to explain what happened in terms of the contribution of both patient and analyst to whatever is being said or done in the consulting room at the time it happens. This causes the whole Freudian emphasis on infantile sexuality and childhood fantasies to recede into the background and promotes a study of the patient's capacity to relate to other people here and now and what interferes with it. The analyst has to be willing to describe his or her own contributions to the creation of the data and not simply hold the patient responsible any more."

"This cannot be," I said, "because it loses sight of the central core of Freud's ideas. That is to say, it is the early childhood conflicts and their solutions, and the fantasies that are formed in early childhood around various experiences in which there is a contribution both from the social surround and the child's drives themselves, that precipitate a template in every adult through which that adult experiences everything. Until we understand that primordial template we cannot alter it and therefore we are doomed and compelled to repeat the same mistakes over and over again."

It was clear that nobody was convinced by what I was saying. I was hoping to go on with this when I saw J. and Claire approaching. They had formed the beginnings of a friendship as two beautiful women often do, although Claire was younger and much more self confident of her beauty and

J. did not appreciate herself sufficiently, in my opinion. I allowed myself to glance into J.'s eyes. For me J. embodied the infinite of happiness but I had no time to think about this because Henry insisted on continuing his assault on psychoanalysis, fortified by Edward's apparent agreement.

"Psychoanalysis," he continued, "made vague generalizations about sexuality and redefined sexuality in a way that did not exist before the eighteenth century. For all I know Freud's *Interpretation of Dreams* represents his effort to get free of a cocaine addiction as some authors have insisted. At any rate, Freud is one of the clerks that Benda complained about in his famous book *The Treason of the Intellectuals*, and psychoanalysts after him have remained clerks like that, justifying a culture that actually should be taken apart and attacked for its failures."

"Well, I would certainly not put it like that," said Edward, "because I think global capitalism is the wave of the future and has produced more prosperity in general than any other system. As I told Henry before, capitalism represents the end of history."

But the liberal academic Sarah interjected, "And it has also produced more disparity between the rich and the poor than any other system. There are certainly many things about global capitalism and the modern world that should not be rationalized."

Henry, ignoring the others, like a professor lecturing but not listening, went on to conclude, "The Freudians by and large were sour, realistic representatives of their time, which were themselves sour, competitive, realistic, materialistic, and suspicious." I thought to myself he must have taken this idea from Martin Wain's "*Freud's Answer*," a poorly informed book, in my opinion.

I realized this conversation was not getting anywhere at all and there was not going to be any chance to change Henry's mind by argument. I even wondered to myself if his hostility to psychoanalysis that began so soon on this trip could have anything to do with some kind of intuitive conception of my feelings for his wife. After her therapy he stayed in the marriage, albeit complaining and alleging it was my fault that he did so. He could not bear to take the blame or responsibility for any of his failures in the academic and the social world. Edward seemed to be a more mature character who appeared utterly materialistic, although with an up-front mind apparently not quite as closed as Henry's. Later I discovered how wrong I was! It must have been difficult for Edward to be married to a beauty like Claire and to see the head of every man turn when she entered a room. "But, on the other hand," I thought, "that is the purpose of exhibiting a trophy."

By the time Henry was finished descanting, all members of our group had arrived for lunch and Professor Kozturk and Ali had appeared. The

professor and Sema were to take all of us on a tour of Ankara in the bus driven by Abdul. What I was hoping to do in this Turkish excursion was to discuss the various stages of civilization, to show by introducing real archaeology Freud's concept of the unconscious representing a buried city. In Turkey a number of civilizations from the most archaic to the most modern are all jumbled together, compactly mixed together, and must live together in uneasy compromises, or the whole structure of the culture would break down. My hope was to illustrate Freud's conception by touring these various sites and discussing what they represented. At this point I felt rather discouraged because I was afraid that between Richard's dogmatic classical attitude, Gertrude's postmodern intersubjectivity, Edward's materialism, and Henry's philosophical opposition to psychoanalysis altogether, I was going to have my hands full. I decided to sit back and let Professor Kozturk dominate the tour of Ankara, which he apparently was determined to do.

The professor began, "Ankara lies in the center of Anatolia on the eastern edge of the Great High Anatolian Plateau. The area is a fertile wheat steppe land with forested areas in the northeast. The history of the Anatolian plain goes back to the bronze age Hatti civilization, which was succeeded in 2000 B.C.E. by the Hittites, and then in the tenth century B.C.E. by the Phrygians, and then by the Lydians and Persians. In the third century B.C.E., a Celtic race, the Galatians, were the first to make Ankara their capital. It was called Ancyra, in Celtic meaning 'anchor'. This city subsequently was

conquered by the Romans and then the Byzantines. The ancient city became an important cultural, trading, and art center in Roman times and a trading center on the caravan route to the East during the time of the Ottoman empire. But by the time Atatürk chose it as a base from which to direct his military operations against the European powers it was of no importance. Ankara was declared the capital of the new Republic of Turkey on October 13th, 1923.”

We boarded the bus, already a little dazed by the historical names and dates. Touring in the old Ankara, the Ulus district, we saw how narrow lanes surround the main sites of Ancyra, some Roman remains that have not been well preserved, and several mosques. Reminders of Ataturk were everywhere in both the old and new city, huge portrait posters, statues in his likeness, and streets bearing his name. The professor had Abdul drive us up to the *Hisar*, the citadel, which was strengthened by the Romans, rebuilt by the Byzantines, and finally maintained by the Seljuks and Ottomans. Its double walls are now crumbling away but some of the towers that guarded the structure are still standing. Within the walls are a rambling old—fashioned Turkish town and the city’s oldest mosque, the small *Alaaddin Cami*, originally built in 1178 C.E.

Then Professor Kozturk took us to the famous museum in Ankara, the Museum of Anatolian Civilizations. The small but outstanding collection dates from the dawn in the second millennium B.C.E. of the Hatti and Hittite

civilizations. On display are articles collected from a whole variety of civilizations that passed through the Anatolian plain from Neolithic times to the Roman era. I was hoping that viewing how the remains of one civilization are piled upon another and whatever we are experiencing in the present is pervaded throughout by the past, would be a good starting point for our group. I wanted to illustrate by this historical study tour that we were about to launch from the city of Ankara, how completely the past pervades the present, and how the remains of the past can be found in every aspect of the present.

But the group was not very interested in these considerations. Professor Kozturk brought us rather rapidly through the museum and insisted on taking us back to the mausoleum of Atatürk, which seemed almost an obsession with him. He wanted us to walk the grounds up to the mausoleum, a marble paved path lined with Hittite-style lions. At the entrance to the mausoleum are carved the words, "Beyond all doubt, government belongs to the people." Inside are gold mosaics and marble, and seven tall windows that look out over the city of Ankara. In no other country in my international travels had I seen such a sharp and ferocious cultural pull between the influence of the past and the influence of the modern world, and I hoped to use this to demonstrate to the group how in the individual human being there is also this constant struggle. The influence of the past continuously pervades the present and affects every person's perception of and response to their

current situation. This constitutes the most powerful argument against concepts like the co-creation of the data of the psychoanalytic situation, because it demonstrates how impossible it is to understand the present without a thorough knowledge of a person's childhood and those fantasies which were formed in childhood as a combination of actual experiences and the child's imagined perception of and response to them.

Probably the most impressive living demonstration of this struggle was found in Sema, our presumed guide for the rest of the trip, as we walked through the more traditional and ancient areas of the city. Dressed as a modern young western woman, she was visibly uncomfortable in the presence of orthodox Moslem women encased in their black chadors, and she absolutely refused to take us into any mosques in many of the cities we later visited. She found the whole orthodox Moslem religion repulsive because she was convinced it represented a pull back to medieval days and an obstruction to the modernization of Turkey and its rightful acceptance as a European power. She deeply resented its treatment of women.

The question kept coming up again and again in the group: If we desert the orthodox religious beliefs of the Middle Ages, whether Jewish, Christian, Moslem or any other all-encompassing system, what will take its place? The twentieth century showed that nationalism is even more dangerous and stupid as a producer of destruction and war than religious wars. This is not

because human nature has changed, but because science has enabled us to destroy more and more people in an ever more and more efficient way. The consensus was that we have reached a crisis in human history. In a situation where relatively undeveloped and poorly governed countries with huge populations such as India and Pakistan have managed to squander their slim resources on developing atomic weapons, grave danger exists. Atomic bombs are not bows and arrows; they could theoretically wipe out much of the world's population. Yet in spite of all the scientific and technological advances, there seems to have been no progress at all in the harnessing and sublimating of the basic human drives of lust and aggression. So in what sense are the modern Turks any different than the ancient Hittites? Or in what sense are modern Europeans any different than Paleolithic men?

Ankara, with its population of three million, is primarily concerned with government, universities, medical centers, and light industry. There are vast suburbs scattered on the hillsides and filled with country people who have moved here in search of work and a better life. Viewing these sprawling suburbs, almost shantytowns, which surround the city (these we found were even a worse problem in Istanbul), Edward, as the efficient businessman that he was, insisted that the country needed new leadership and a large infusion of Western global capitalism. He began quarreling with Sarah, who maintained angrily that the orthodox Moslem strain among the Turks was an important feature of their national characteristics, ones that included

kindness and hospitality to strangers such as we were. Edward felt this was all nonsense, and snorted, "The sooner we get away from the Middle Ages the better," Sarah insisted the Turkish people also needed a sense of heritage, and this kind of self representation was an important stabilizing force in any nation. Edward retorted that the days of nationhood needed to come to an end. It seemed to me that the implicit assumption of his point of view was that the entire world should become as much like the United States as possible.

Pearl, in her own quiet way, said this very thing and asked whether it was such a good idea: "Do we in the United States have the most advanced and most desirable civilization? It is true that materialistically right now we are the richest country that ever existed in the world, but are our citizens in a country inundated by a flood of powerful guns, with their road rage, the incredible discrepancy between the rich and the poor, their high incidence of coronary artery disease, and the increasingly successful tendency of huge financial interests and persons of great wealth to control the politics of the country, really better off than orthodox Moslems? Would there not be other alternatives, such as the Baha'is?"

"Why don't we try to talk to some orthodox Moslems here?" suggested Marsha amiably. "Is there some way we could get together with them?" Professor Kozturk and Sema were silent in response to this query.

“That does not mean it is the best solution that we can ever find,” insisted Pearl, resuming the argument, “There are many inequities and it is horrifying to walk on the streets of a rich city like New York and have to step over homeless people on the sidewalk. The solution by the mayor of New York, to jail these people, seems idiotic and solves nothing. The problem with global capitalism is that it brings out the greed in humans and tends to cause an indifference to the sufferings of other people. There have been other cultures where humans have been much more of a ‘species-being’ as Marx thought humans were, and we need to work towards that. Psychoanalysts should lead the way, because it is the mark of a mature person to care genuinely about the fate of others.”

“Who said that?” asked Richard peevishly. “Certainly it was not the great psychoanalyst Hartmann; he believed it was the task of psychoanalysts to help people adapt to the culture in which they live.”

By now we were back at the hotel and Abdul bid us goodbye for the night. I was beginning to worry that the discussions were not really going anywhere, just constituting proclamations by individuals with different points of view. George had not said a word. What was he thinking about us? J. also had been silent, but I believed she was intimidated by all that professional certainty of the others, as probably was Ali.

That evening Professor Kozturk apparently had not concerned himself with our jet lag or travel fatigue. He scheduled a dinner party for us with several Turkish psychiatrists from two of the medical schools in Ankara. Ali and Claire were there as psychiatric residents but J. and her husband did not attend. Everyone else from our group was present. In the Turkish contingent were three women psychiatrists and four male psychiatrists, all attending physicians at Turkish medical schools and of varying ages, as well as Ali and the elderly professor. The talk soon got around to the state of psychiatry in Turkey today. The Turks agreed that huge international pharmaceutical corporations had completely preempted Turkish psychiatry and essentially only drug administration was being taught to psychiatric residents. There was a variable amount of concern about this fact, extending from none at all by the psychopharmacologist psychiatrists present, to Ali on the other hand, who seemed very disheartened and downcast about the whole matter. Claire just could not understand how psychiatrists could have let this happen, a takeover of their profession by the pharmacological corporate giants, and Richard adopted his usual attitude of *mokatsu*. This was fortunate, for I was afraid Richard would give offense, but his jet lag and touring fatigue saved the evening. The Turks were all very kind, polite, and hospitable, and attempted in every way to offer us a congenial atmosphere. Our experience with Turkish people throughout the entire trip was always a pleasant one, but of course we did not have any opportunity to speak with orthodox Moslems. In the light of

later historical developments, that was really too bad. As Marsha hoped, it could have turned out that, as Harry Stack Sullivan said, everybody is much more simply human than otherwise.

The next morning Ali came with the bus to gather up our party, and Abdul drove us all to the medical school, where I was to give the first of my proposed lectures in Turkey. Only J. and her husband and Edward did not attend since this was to be a technical lecture. Upon arriving, I was led to a medium-sized clean and simply furnished lecture hall. About forty doctors, about equally divided into males and females, and all in white coats, sat patiently waiting for us to start. I had no idea of their level of training or expertise. Sunshine came through the many windows, making the place seem cheerful and friendly. "Professor Doctor" Kozturk gave the usual introduction, and I proceeded with my first lecture in Turkey:

My first (and last) invited lecture to Turkish Physicians

In section 34 of *Being and Time*³, Martin Heidegger defines the existential-ontological foundation of language as discourse or talk (an untranslatable term, *die Rede*). For Heidegger it is as existentially equiprimordial a structure of being-in-the-world as mood or understanding. To it belong not only speaking out and asserting but also hearing and listening, heeding, and being silent and attentive. Heidegger says, “man shows himself as the entity which talks,” and it follows that if we are to grasp a person’s mood or understanding, his or her being-in-the-world, we must learn to listen and let human beings appear as they are.

The most famous dicta from Freud on the subject of psychoanalytic listening are to be found in his 1912 paper, “Recommendations to Physicians Practicing Psychoanalysis.” Here Freud, in rejecting any special expedient, even that of taking notes, suggests the basic principle for the technique of psychoanalytic listening:

It consists simply in not directing one’s notice to anything in particular and in maintaining the same “evenly-suspended attention” . . . in the face of all that one hears⁴.

Freud’s technique of listening with evenly suspended attention constitutes an effort not to prescind from the patient’s material, in order to prevent the therapist from making any selection out of preconceived

expectations. He wishes to avoid the dangers of the therapist never finding anything out that he or she does not already know, and of distorting what is perceived to fit experience-distant theoretical preconceptions.

The question of whether one can really give such equal notice to everything communicated by the patient has often been raised, but only recently has it been answered increasingly in the negative. Many experienced therapists by now have learned that everyone approaches the data of the patient's free associations and behavior as manifested in the treatment with a certain mental set, one that is based either on conscious or preconscious theoretical and philosophical conceptions. This mental set determines what is perceived and what is selected regardless of the therapist's efforts to listen with evenly suspended attention. All a stance of evenly suspended attention can do is to try in a deliberately conscious fashion to reduce the influence of one's mental set. It is obvious that this stance is enhanced greatly if the therapist is aware of his or her preconceptions and how these influence all aspects of perception of the patient.

In the same paper Freud offers the famous telephone receiver analogy:

He must turn his own unconscious like a receptive organ towards the transmitting unconscious of the patient. He must adjust himself to the patient as a telephone receiver is adjusted to the transmitting microphone. Just as the receiver converts into sound waves the electric oscillations in the telephone line which were set up by sound waves, so the doctor's unconscious is able, from the derivatives of the unconscious which are

communicated to him, to reconstruct that unconscious, which has determined the patient's free associations.

He goes on to maintain that, "if the doctor is to be in a position to use his unconscious in this way as an instrument in the analysis," he or she must have "undergone a psycho-analytic purification." Otherwise the inevitable and innumerable "complexes of his own," even if the therapist is apparently a successful person, disqualify the therapist to practice psychoanalytic psychotherapy.

It is clear from Freud's writing that an important focus of psychoanalytic listening, if one includes both verbal and nonverbal communication, is to become aware as sensitively and quickly as possible to the nuances of the development of transference. As Freud repeatedly remarks, the success or failure of a psychoanalytic therapy rests primarily on the identification and management of transference phenomena. Let me now turn to "transference."

In the process of psychoanalytic listening Freud suggests that the therapist not attempt, at least at the beginning of the treatment, to bring any particular moment or problem into focus:

He contents himself with studying whatever is present for the time being on the surface of the patient's mind, and he employs the art of interpretation mainly for the purpose of recognizing the resistances which appear there, and making them conscious to the patient.

One of the most difficult resistances to deal with in psychodynamic psychotherapy and psychoanalysis, as Freud goes on to point out⁵, occurs when the patient, instead of remembering what has been repressed, acts it out either within or outside of the analytic situation. As Freud says, “He reproduces it not as a memory but as an action; he *repeats* it, without, of course, knowing that he is repeating it.” This transference is a common way in which patients “remember” previous relationships and it is the task of the therapist, by careful listening, to become aware of what is being repeated in the course of the treatment, either in the relationship with the therapist or in the development of relationships with others outside of the treatment. Thus all descriptions on the part of the patient about current relationships as well as dreams need to be listened to carefully for allusions to the relationship with the therapist, and for the repetition or displacement of disavowed aspects of this relationship outside of the consulting room. Very important aspects of the transference often appear in this manner and are easily overlooked.

Freud⁶ explains that the analytic psychotherapist has a “three-fold battle to wage.” The first of the forces that oppose the therapist are the group of forces in the very mind of the therapist “which seek to drag him down from the analytic level.” Today we would call this countertransference and the ever-present impulses to countertransference enactment. The second group of opposing forces comes from outside the treatment; the patient is

constantly assailed by his or her relatives or friends and by “authorities” who are opponents of psychoanalysis. All of these individuals dispute the importance and value of the procedure, question the integrity of the therapist, and repeatedly warn the patient not to get involved in it. The final set of opposing forces comes from “inside” the analysis, that is, from the patients themselves, who may at first resist the appearance of various emotionally charged material, such as that with sexual content, and then may experience the breaking forth of powerful desires. These transference desires, as in the “archaic transferences,” for example, are represented by an effort to convert the therapist into either an archaic selfobject, that is, an extension of themselves in the manner a baby experiences the mother, or an object for the massive discharge of instinctual drives. All these disruptive forces combine to prevent patiently listening with evenly suspended attention, and they are all active all the time in every therapy.

Since the time of Freud there has been increasing attention paid in all fields of science to the effect of observer’s theoretical preconceptions and activities on the clinical data itself. This leads to the question of the choice of theory, which has remained as an unresolved controversy in the psychoanalytic literature. Here I will attempt to delineate the proper stance for psychoanalytic listening, and the understanding of the data obtained by it, from a variety of frameworks. Such a variety does not imply any negation of the psychoanalytic approach, because there can still be a common

psychoanalytic conceptual base. This base is manifest in that all valid psychoanalytic theories or frameworks deal with transference and countertransference issues, and emphasize the crucial significance of infantile and childhood experience, the existence of a dynamic unconscious, the importance of free association, the vital role of the Oedipus complex with its sequelae and precursors, the centrality in one way or another of early selfobjects, and the primary role of the analyst and his or her interpretive function.

What I propose is to approach the data of psychoanalytic communication from five more or less psychoanalytic models in turn, without definitively assigning major preeminence to any one model in any given clinical situation until after we have been at least open to examining the data in detail from five points of view. In addition, clinical experience unfailingly demonstrates two principles over and over again. The first of these is that a psychoanalytic model is the only acceptable kind of model to achieve depth understanding of a person. Every psychoanalytic model has more or less the same conceptual base, although they differ fundamentally from each other in their underlying epistemological profiles.

The second principle is that one neglects Freud's drive/conflict/defense orientation at one's peril. Many "alternative" approaches have been devised over the years to get away from Freud's emphasis on the drives of sexuality

and aggression as grounding or ultimately constituting the infantile core or phantasy life or psychic reality of the adult, and his central focus on the Oedipus complex. As Lacan wisely pointed out, psychoanalysis has to be rediscovered over and over again. Many cases flounder when alternative stances are used by the therapist for his or her own defensive purposes. This is a frequent cause of the need for reanalysis of the therapist or for a psychoanalysis after an allegedly “completed” psychotherapy. To avoid this common and very unfortunate pitfall, the primary or starting model in approaching any patient material should always be the “drive/structure” model of Freud, and Freud’s dicta of psychoanalytic listening as described above should be followed whenever possible. Any departure from this listening channel should be tentative and the problem of possible defensive collusion should constantly be kept in mind.

Therefore we always begin listening from the channel of Freud’s drive/conflict/defense orientation, staying carefully tuned for derivatives of core unconscious infantile phantasies that are expressed in the material both through verbal and non-verbal manifestations. At the same time we allow ourselves to be open to what the philosopher Husserl might have called “imaginative variations” in our minds, tentatively trying to fit the material into the orientations of the other listening channels. The material itself usually suggests what channel might be most suitable to it and might be best used in understanding what the patient is trying to communicate. This affords

a temporary fusion of horizons, as Gadamer would characterize it, with the patient, and helps us to frame our interventions in a language the patient will understand and which is at the developmental level of the patient at that point. But we always keep in mind that sooner or later we are going to return to the drive/conflict/defense model as the patient develops trust in our empathy and reveals more and more of himself or herself to us. Furthermore, if the therapy is to be truly psychoanalytic, we are ultimately going to focus on the core infantile fantasy derivatives as they are expressed in the transference.

Our understanding of the patient gained from these various channels of psychoanalytic listening is then to be translated into rational interventions. With careful listening, the patient's response to our interventions may serve as validation or negation of the correctness of our understanding. So we are not simply engaging in an intuitive process without the possibility of at least quasi-empirical validation. We are advocating a specific carefully thought out technique, a "praxis" in which the patient leads us by his or her communications to our choice of certain models of understanding as best applied to the specific data, and then validates or negates the application within the ensuing data of each psychoanalytic session. These validating data are generated by the patient's response to interpretation based on our "understanding."

Thomä and Kächele, in their 1987 textbook *Psychoanalytic Practice*, correctly regard the response evoked from the patient to interpretations as “decisive.” For instance, the patient may give verbal assent and cooperatively elaborate or produce further associations or memories. But even repudiation may be presented in such terms as to provide a confirmation, for example if accompanied by guilt, terror, or change of associations that could only occur if the interpretation was correct. A dream may be suddenly remembered or brought in the next day that carries on or elaborates on the interpretation; in a similar fashion either memories or reference to external situations may fall into place. There may be an obvious resolution of anxiety and a change in the transference in which, for example, the therapist shifts from a dangerous to helpful figure or *vice versa*. Sometimes corroborating information from relatives or friends is brought in by the patient, but the most important information of all is to be gained from careful attention to transference manifestations. My experience confirms Loewald’s concept of the crucial effect of the therapist as a new significant object in the patient’s mental life along with and as a function of the development of insight through the analyst’s interpretative interventions.

Each proposed channel of psychoanalytic listening carries implicitly a stance about psychological development, a view of psychic change, and assumptions about the curative factors in intensive psychodynamic psychotherapy. These stances contradict each other in important

philosophically fundamental ways, and they cannot at present be reconciled since they reflect profound disagreement about the nature of humans and the nature of knowledge itself. This is our postmodern condition, in which human being itself is under erasure, the world of Heidegger and Derrida, a world in which we can never get clear about our origins, as eloquently described by Foucault. The breakdown of the naïve nineteenth century empirical science assumptions or *Weltanschauung* so admired by Freud has forced us into this postmodern listening orientation.

I will now briefly review these five standpoints or channels (models, perspectives, frameworks) from which we can tune in to the transmission from the patient. The first channel was presented by Freud and focuses on the Oedipus complex and the emergence in a properly conducted psychoanalysis of the need for drive satisfaction in the transference. This enables us to study the patient's conflict in terms of defenses against the instinctual drives and the resulting compromise formations produced by the ego in dealing with its three harsh masters—the superego, the id, and external reality. Freud's structural theory, placing the Oedipus complex at the focus, was developed for this purpose. At the core of it are the patient's childhood or infantile fantasies, derivatives of which repeat themselves over and over again in the patient's mental life and behavior. We carefully listen for the derivatives of these fantasies and look for them to be reexperienced or reenacted in the transference. I believe this to be the primary model, the starting point for all

psychoanalytic listening.

The second channel utilizes the perspective of object-relations theory for its model. The work of Klein and later Bion focuses on the earliest projective and introjective fantasies of the patient as they appear in the object relatedness manifest in the transference and in the process of projective identification as it occurs in the analytic process. Let me explain. Bion emphasized the “toilet function” of the analyst, in which the analyst must receive, metabolize, and give back in acceptable form the unacceptable fantasies and affects and expressions of these coming from the patient. Klein developed the concept of projective identification (defined differently by every author), in which the patient is allowed to place into the analyst whatever representations he or she wishes to place there, with more therapeutic focus on preoedipal fantasies and processes. For Klein, projective identification was also an interactional event in which great pressure is put on the therapist to behave in a manner that corroborates the projection. Kernberg, aware of Klein’s confusion of the intrapsychic and the interactional under one process, defined it as a very primitive mental event that represents an incomplete projection. A study of projective identification operating in the therapeutic process reveals the patient’s earliest internalized object relations and yields data about how the patient as an infant organized these relations into self and object representations and then projected and reintrojected various aspects of these images, taking them back in a altered form.

Understanding of these processes clarifies the patient's relationships in the present because all such relationships are perceived and reacted to through the paradigm of these early organized self and object representations.

A third channel, focusing on the patient's being-in-the-world, is the phenomenologic point of view. Here an attempt is made to grasp the facts of the patient's life phenomenologically, without other theoretical preconceptions to organize the data. This approach was elaborated in philosophy by Husserl and then differently by Heidegger, and taken up by pioneer psychoanalysts such as Boss, especially in the effort to understand seriously disturbed and psychotic patients. A corollary of this approach began with Feuerbach and Marx, and was elaborated by thinkers like Fromm, Sartre, and—most recently—Lacan: society shapes the individual and we can only understand the individual if we understand the society or culture or world in which he or she must continuously live and interact. So, to understand an individual, we must understand the lived state of being-in-the-world that is unique for the situation of each person.

The fourth approach is from self psychology, which focuses on the state of the patient's sense of self as it is empathically grasped by the analyst. Important predecessors of this approach were Fairbairn and Winnicott. The latter introduced the notion of the true and the false self that was taken up in detail by R.D. Laing in his brilliant exposition of schizoid and schizophrenic

conditions. Kohut brought the focus on the self into a systematic and elaborate theory. In the line of development of a normal sense of self the individual needs in certain phases an experience of what Kohut called selfobjects. Developmentally the earliest ones are people who are experienced by the infant simply as extensions of the infant's self, called archaic selfobjects, then mirroring and idealized selfobjects such as parents or heroic figures, and later symbols such as the flag or various group identifications which add to the cohesion of the adult sense of self. Pathology in this channel is understood as fragmentation of the sense of self in response to narcissistic wounding. The symptoms of this fragmentation may be very serious indeed.

The fifth and final approach I use to organize the transmission from the patient might be loosely termed the interactive, focusing on the countertransference of the therapist or, more generally, on the here-and-now factors in the treatment and emphasizing the analyst's participation. Many of the numerous and conflicting points of view under this rubric have been developed as a response to our increasing understanding, especially in preoedipally damaged patients, that is, patients whose development was damaged even before the oedipal period which occurs at around four years old, of the patient's need for an experience and not just an explanation in the treatment. Modell offered the notion of the psychoanalytic process in the early phase of the treatment of narcissistic or schizoid patients as providing a

“cocoon,” a holding of the patient until the patient is ready for self-exploration. Lang emphasized the presence of delineated interactive fields in which the data coming from the patient is loaded with allusions to the therapist’s participation and even the therapist’s mental state. Gill emphasized the importance of the therapist’s participation in the particular transference manifestations that develop in a given treatment and also focused his interpretations on the here-and-now interaction between patient and therapist.

Gedo sharpened our focus on archaic transferences, in which the patient forces a response out of the analyst and repeatedly contaminates the evenly-hovering attention stance advocated by Freud. The management of such archaic transferences and how they affect psychoanalytic listening is one of the most important and central issues in modern psychoanalytic therapy because so many patients present with preoedipal damage and rapidly develop such transferences. Gunther emphasized the converse of the archaic transference, namely, the narcissistic aspects of the countertransference. He pointed out that countertransference manifestations appear often after the therapist’s narcissistic equilibrium has been upset. They represent an attempt to restore the therapist’s equilibrium and can become very important indeed.

Lipton reviewed Freud’s cases in order to demonstrate how significant aspects of the real interaction between the patient and the analyst profoundly

affect the data that are presented in the psychoanalytic process. Freud in his actual practice (often quite sensibly) violated some of his own admonitions as laid down in his papers on technique. Stone placed this real interaction under the rubric of the “physicianly vocation” of the analyst and demonstrated compellingly the profound impact of it on the material produced and the process of the treatment itself. In contrast, Freud’s published admonitions tended in the middle of the 20th century in the United States to become codified into a rigid set of rules that sometimes produced iatrogenic narcissistic manifestations in patients and led to either an impasse in the treatment or a surrender of autonomy by the patient, accompanied by a massive identification with the “aggressor” analyst. Obviously these are unsatisfactory outcomes for a lengthy and expensive treatment.

My view differs significantly from that of Gedo and Goldberg in that their principle of “theoretical complementarity” assumed the different frames of reference or models of the mind may operate only as long as no internal contradictions arose among the various parts of the theory. They believed even Freud did not intend to dispense with his older conceptions as he went forward to propose new ones, and the changeover from one set of Freud’s concepts to another did not have to indicate that one superseded the other. But in my approach, theoretical orientations or models are being utilized that directly conflict with each other and can not be thought of as complementary because the basic premises that underlie them, both their epistemological

foundations as well as their basic assumptions about human nature and its motivations directly collide. This forces a radical discontinuity as we shift from channel to channel in our receiving instrument, rather than, as we would all prefer to do, sliding back and forth between theoretically consistent positions, or at least complementary positions that are consistent with each other.

The worst mistake a beginner can make at this point in the development of psychoanalytic theory is to assume that in some fashion these various standpoints can be blended or melded or reconciled into some supraordinate theory that can generate all of them. Careful examination of the premises of these standpoints reveals that this is simply impossible in our current state of knowledge and we are forced, if we use this shifting of systems, to accept the radical discontinuities. The problem in the human sciences is profound, and some thinkers such as Foucault have claimed that in principle no agreement can ever be reached on a single theoretical model for scientific understanding of all human mentation and behavior.

The hardest part of using this approach is to be willing to keep discontinuous and conflicting models in one's mind, which offends the natural and very dangerous human tendency for a neat, consistent and holistic theoretical explanation of all material, even if it is wrong. My approach requires tolerance and flexibility on the part of the therapist as well as a

certain maturity, for it is sometimes the unfortunate result of a personal psychoanalysis that the individual becomes a strong and rigid adherent of the particular theoretical orientation or style of one's analyst. Since no data available at present convincingly and decisively prove any of these theoretical orientations to be the one and only best orientation, uncritical adherence to any one of them would have to be leftover of a misunderstood or unanalyzed transference, just as emerging from one's psychoanalysis with a sense of nihilism about all analytic theories would be a similar indication for further analytic work.

* * *

When I finished the lecture, two things happened that had never occurred before in my extensive experience of international lecturing. In the first place, there was no drumming on the table as is typical in European lecture halls to represent applause. In the second place, never again was I invited to lecture in Turkey, although other medical schools could have contacted me in other cities. I said nothing about this at the time but I was very puzzled.

The question and answer session was brief, and by agreement none of our contingent raised any issues because we wanted to hear what the Turks had to say. Their responses were pleasant and polite enough but they were

mostly requesting clarification. It seemed that the group either was offended by the lecture or did not understand it or it was totally irrelevant to anything they were doing or all of these.

As we returned to the hotel, Ali asked timidly if he could have lunch with me and perhaps some of the others because he had some questions. I agreed. Over an unidentifiable Turkish lunch Ali expressed his great disappointment that there was no psychodynamic teaching in his residency. He asked if it was possible to get a grant to be a resident or an assistant in my hospital in the United States. I thought that was unlikely and suggested that he apply instead for a grant in England. I gave him the names of some distinguished English psychoanalysts. He looked dejected and it did not seem that he would ever carry this out.

I took this occasion to ask him what had gone wrong in my lecture at the medical school, that is, why there was no applause, not even polite applause. A look of dullness and despair crossed Ali's dark eyes, the look of a man caught up hopelessly in a hierarchy that he could do nothing about. "I am embarrassed to tell you," he said, "but you were not obsequious enough to the few senior attending psychiatrists who deigned to attend your lecture. You should have learned their names and announced in advance how honored you were that they had come. Because you did not do this it was felt that you were arrogant and ungracious. The younger doctors criticized you for not

extending the proper greetings at the beginning of your lecture. In addition they felt you ought to have given an entrance speech prior to your main lecture. And they wanted you to have given more eye contact during your delivery of the lecture.”

In the hallway he added along more general lines, “You should know that there were actually very few people in the audience who have any interest in psychodynamic psychotherapy. On the other hand, a few of them expressed a wish they could have had the benefit of more of your presence. They would have liked a kind of training course. Others said that too much reading material was suggested. Some said that when you stopped reading your paper and started looking people in the eye you became much better.” He continued, “Many of the experienced doctors and also especially me thought it would definitely have been more productive if a case presentation which had been prepared by a resident followed your speech.”

Ali believed that perhaps the way he had been trained made him pessimistic about the possibilities of learning how to do psychodynamic psychotherapy. He realized that this aspect of psychiatry is totally neglected in Turkey. He worried that he had too many financial handicaps to get any better training in another country, especially in psychoanalysis, which would almost certainly be beyond his financial means. He said, “I don’t know the ways for arranging grants in case it might be necessary. It seems that I may

not be able to afford this training when we consider the conditions under which we live here in Turkey.”

I told Ali how much I appreciated his candor and I acceded to his request to accompany us on the complete tour, with internal mental reservations that he was perhaps more interested in Claire than he was in psychoanalysis or psychoanalytic therapy.

Ali had to return to his duties and I was exhausted and somewhat depressed by his revelation about why my lecture was badly accepted, so I decided to return to my room in the hotel for a short rest. Washing up in the room, which resembled all the other hotel rooms all over the world, I noticed a coupon on the desk that entitled me to a free drink in the elegant bar at the top of the hotel. On impulse I called J.’s room, gambling that she would answer or at least that if Henry picked up the phone he would refuse my invitation. I did get Henry, and politely invited both of them to join me in a couple of hours in the bar for our free cocktail. After a nap I washed up and went to the top of the hotel. The elegant bar was high up with windows all around that offered an exquisite view of the new city of Ankara. I ordered my usual J&B scotch on ice, and waited rather anxiously. In a short while J. appeared alone, wearing a lovely print dress and very little makeup. She sat down and we looked at each other with glances that expressed more than words could say. The waiter interrupted this silent reverie and J. ordered a glass of Chablis. Then again an

uneasy silence as if we were not sure how to approach each other once more.

Finally I spoke up, saying, "You must have some feeling for me or you wouldn't be here at this moment." J. smiled but said nothing. I continued, "I am a passionate Hungarian. With me that feeling has got to be physical. I have got to have that fusion, that flesh on flesh feeling, that touching, that juxtaposition of our bodies that give me the sense of being whole and at repose."

J. looked rather confused because this kind of talk seemed to be at the same time crude and yet rather abstract to her. She smiled and replied, "I am not a passionate Hungarian. On the whole my experience has been that men take more than they give and it has left me with a residue of chronic irritation."

I said, "J., we are soul mates, you and I. I knew it from the very first day you walked in my office and I think I even indicated it to you." J. responded to this in a way that I did not expect. She seemed angry and finally she came out with it: "During my psychotherapy, in the transference, I loved you very very much and you were abstinent, you kept a neutral distance from me, at least for a long long time. It was dreadfully painful. Now the situation seems reversed and you want me quickly to leap into your arms. I have a great mixture of feelings about what to do and I cannot say I understand this

situation nor do I entirely trust you. But I do know what it is to love you, or whatever you stood for in the transference, passionately. Yes, I know I still love you." She glanced uneasily at her watch. "Henry detests you. He will be suspicious. I should go back to the room."

"J., let us meet again, I implore you!" I said.

"Yes," agreed J., "we have just started this trip and I am glad that you invited us. But now I must go." Without ceremony she left the table and the bar. Sitting alone, I ordered another drink. I began to remember J.'s therapy more clearly. When she started she was very unhappy and her husband was constantly berating her and blaming her for all his troubles. It took a long time to enable her to get insight into how she was allowing herself to be used. As she received this insight and her marriage improved, the psychotherapy deepened and she began to feel a genuine love for me, almost as a rescuer. She begged and implored me to let her come over from her chair and sit at my feet. This went on and on until the temptation was more than I could stand because as she loved me and showered me with her affection I could not help responding to this lovely and pure woman. Many sessions were spent with her sitting at my feet and talking with each other in a kind of tête-à-tête, although I always kept a certain neutrality and did not allow the boundary crossing to go further. But clearly I had been overwhelmed by her archaic transference desires, an indication of countertransference floundering by a

neophyte therapist. As Gradually she calmed down when she recognized that this was as far as we were going to go and, perhaps because of it, she saw less and less need to continue and pay for sessions with me. I began thinking of how years later I was impelled by a mysterious inner force to contact her after my wife died, an indication to return for further psychoanalysis which I ignored, I happened to look up and to my surprise I saw Claire standing tearfully in front of me.

“Martin I must talk to you, I must!” she said. “I am getting more and more frightened. I have been searching for you all over the hotel.” She looked exhausted.

“Sit down Claire,” I suggested, and she did. The obtrusive waiter immediately appeared and she ordered a soft drink. Although Claire was beautiful she was young and rather naïve and she did not arouse in me the kind of love or lust that J., an experienced sophisticated woman in the ways of the world, was able to do. In fact the incest barrier was functioning, since Claire was young enough to be my daughter.

“Martin we have just begun this trip and I cannot stand the way Richard looks at me,” said Claire. “My husband Edward is a violent man when he gets jealous and there is going to be trouble.

“Claire” I said, “you are a beautiful woman and you must have had many

men looking at you in that way. I suppose all I can advise you to do is to not give Richard any encouragement of any sort and hope for the best.” When I uttered what I thought were these words of wisdom, Claire’s response was simply to cry. She sat softly sobbing as the waiter brought her drink and there was really very little more to say.

“Can you speak to Richard?” she asked, after a while.

“No I cannot,” I said, “since he has not done anything overt or that he could really be fairly blamed for. Obviously he feels a great lust for you but that should be nothing unusual for you in your situation.”

Claire sobbed, “This man is evil and he is too audacious and obvious in his evil intent; Edward will spot it fairly soon and I am afraid of what will happen.”

“I don’t know what more to say Claire,” I murmured, “There are some things that I can’t control and as I get older and older I realize that the list of things that I can not control gets longer and longer. You will just have to do the best you can, but I will stand by you and try to help in any way possible. If you find Edward getting too incensed, call me and I will speak with him. I am not afraid of Edward nor at my age am I afraid of anything. Nothing more can be done to me.” Claire politely smiled her radiant smile, thanked me, and sadly excused herself. Preoccupied with her own worries, she had not noticed

the depressive implications of what I said.

The waiter wanted to bring me a third drink but I waved him away. I looked out the windows over the beautiful city and noticed that the sun was setting on Ankara, closing our second night of the trip. I began musing to myself about the whole human species, myself included. How powerfully we are driven by lust and aggression and how clearly our defenses against these primitive and barbaric impulses represent compromise formations formed by the ego to satisfy the superego, the demands of our culture, and to somehow give some sort of gratification to the id. Surely culturally approved gratification is simply the discharge of these drives in some kind of sublimated form, but there is nothing that equals the pleasure that is afforded by the discharge of these drives in an archaic form, by pure lust or pure destruction. Our endless wars are the supreme proof of all this.

Then I began to free associate, and of all people, the confederate general Stonewall Jackson came to my mind. "Jackson is an example," I thought, "of a man whose life was marked by loss and death from the very beginning. As his rage mounted at these unending narcissistic wounds, he developed a severe obsessional system and turned this rage on himself, using it to literally pull himself up by his own bootstraps from nothing. This extraordinary man, still revered by foolish Southerners, became a rigid, hard-driving fanatical religionist who only came to feel really alive when he was engaged in killing

people. When he was not so engaged he was known as a nondescript fellow, very quiet and unassuming, courteous, kind, and considerate. But he was also strangely self-isolated and unable to be comfortable with banter or light raillery or ordinary people.

“He only survived his early years because of an extraordinary inborn temperament that his biographer, Robinson⁷ says, ‘separated those who rise above adversity from those who cannot adjust to setbacks’. There were a few helpful adults in his life and a powerful internal sense of self-esteem, although where he got that it is hard to tell. The biographer is not helpful and we really do not know about Jackson’s inner mind or about his extraordinary genius as a general. He was determined to make a man of himself and he insisted that whatever he wanted to do he could always do, no matter how hard he had to torment himself to do it.

“Finally he found an adult selfobject that would not desert him, God through Presbyterianism: ‘Jackson did not accept this religion: he absorbed it—hungrily, constantly, totally,’ writes Robinson. His religion made him brave and gave form, order, direction and power to his whole life, allowing him to dedicate himself to killing people.

“And he was very good at killing people. What is incredible is that humans make heroes out of individuals who are good at killing people and

crucify those who preach love and tolerance. As the methods of killing people become increasingly accurate and extensive, what does this foretell for the human race?

I mused on. "Leaders like Stonewall Jackson and Napoleon are successful obsessive compulsives who at times slide into paranoia and hypochondriasis. Above all they exhibit a kind of paranoid grandiosity with the inner narcissistic conviction that they are invulnerable. This goes on until their luck runs out. Why do we pay athletes millions of dollars and nurses practically nothing? Only a person who has been a patient in a hospital can really appreciate the importance of a nurse! Why are our value systems so upside down? What is Edward's global materialism going to lead us to? How can I protect Claire and the others from the wrath of her husband? How can I deal with my own lust for J.? How can I awaken in her the lust she once felt for me that gave me a tremendous sense of value and awoke in me the intense inspiration to nurse her back to health? Why is it that modern Turks continue to be burdened down by their medieval counterparts, trying to climb towards scientific and technological success with a ball and chain of Moslem orthodoxy around each of their ankles? Is the only alternative to global materialism religious fanaticism?" My head was spinning with all this as it grew dark outside. Perhaps it was the scotch or jet fatigue, or both. I left a generous tip for the waiter and retired to my room for the night.

On the bathroom counter I lined up my array of cardiovascular pills, six or seven little vials in all, some to be taken in the morning, some at noon, and some at night. Ever since my cardiac surgery I had become more aware of the continual presence of death and the brevity of human life. All human life and human history began appearing to me like an endless tragedy going nowhere and ending perhaps in an annihilation of the species. This was not simply an idiosyncratic pessimistic idea, because any biologist will tell you that far more species have disappeared in the history of our planet than have remained. As I took my various pills and prepared for bed a deep dreariness came over my soul, a spiritual void, a yearning for those who loved me once and now were all gone. In a kind of mesmerized trance I went through my evening ablutions and crawled under the covers in that faraway country. As I dropped off to sleep I could not help wondering what J. was doing at that moment, but as I thought of the possibilities I was appalled and depressed. She had answered my direct question some weeks ago when I asked her if she still had a sex life with her husband. The terse answer was, "Yes." I began to realize that I was now living in a self-created inferno. I was sliding in a downward spiral deeper and deeper into the abyss. Would there be a Virgil to guide me? Or was I in a hopeless trap of my own making?

Notes

- ¹ *Remembrance of Things Past*. trans. R. Moncrieff. N.Y.:Random House, 1932, vol.1, p.779.
- ² *Love and Its Place in Nature*, by Jonathan Lear. Yale University Press, 1990, p.22.
- ³ trans. J. Macquarrie and E. Robinson. N.Y: Harper and Row, 1962, p.208.
- ⁴ *Standard Edition*, Vol. 12, pp. 111-112, 115-116, and 147.
- ⁵ *Standard Edition*, Vol.12, p.150
- ⁶ *ibid.* p. 170
- ⁷ *Stonewall Jackson*. N.Y.:Macmillan, 1997, p. 23, 136.

Chapter 3

Berlin

It seems to Alfred that there are two kinds of love: the one that cares for your welfare, your food, your comfort, and the one that engages your wildest dreams and impulses. At this blessed point in his life, still in childhood, Alfred possesses both types of love, sacred and profane. He will grieve for such plentitude forever after.

Anita Brookner¹

The sun or, as Homer would say, the rosy fingered dawn, was just appearing when a bleary eyed group of travelers assembled in the lobby of the Ankara hotel waiting for the hopefully prompt arrival of Abdul and his bus to take them to Cappadocia. Few of them looked their best, and several individuals had obviously eaten too much of the high calorie high fat breakfast food that was served in the hotel buffet. Since it was free as part of the price of the hotel room, this rendered some of them unable to restrain their greed. Standing back, I allowed my eyes to rove gently over the group that I thought I would have to now take to a place that was far away in time and in history.

Sitting at the center and looking his usual impeccable self was Richard, still dressed in his suit that miraculously had not lost its pressing. At this point it still looked like he was ready to start receiving patients in his consulting room. His wife Pearl, on the other hand, looked even dumpier than

ever and had clearly not managed to wake up yet. She was hiding behind yesterday's issue of the *International Herald Tribune*. Over in one corner sat the beautiful Claire, her husband Edward, J., and Henry. Claire was radiant even in the morning and was trying in some way or the other to avoid the gaze of Richard who was sitting upright and looking across the room at her with his steely blue eyes. Henry and Edward clearly felt out of place in the group and were trying to prepare themselves to enjoy the scenery and ignore the discussions. They had already indicated contempt for the whole psychoanalytic process and boredom with the topic and/or with me.

Henry, as usual, showed little interest in his wife J., who was trying hard not to look uncomfortable although she felt left out of the foursome and saw me watching her. She was trying to engage Gertrude and Sarah in some sort of conversation but it did not work very well. Gertrude was rather possessive of her lesbian partner Sarah and looked with some suspicion on any woman who attempted to befriend her partner, the rather keen professor of English literature. This seemed more like Gertrude's natural jealousy about her possessions rather than any deep caring for Sarah. I thought to myself, "How will I ever get this prickly group through a couple of weeks of touring, get them to pay attention, and keep the remarkable manifestations of lust and aggression which have already surfaced, at bay?" It was almost like having to maintain a civilization in the Middle East today or like Prospero attempting to civilize Caliban. Yet Caliban represented the dark side of Prospero, just as

Alberich represented the dark side of Wotan, and so we all have dark sides, no matter how superlative we may seem to the outside world. I felt better when I noticed Marsha and George chatting amiably with some other guests in the hotel. They had a certain independence from all the looming *Sturm und Drang* that seemed to be threatening our trip.

The general boredom increased as everyone waited for Professor Kozturk and Ali, his resident in the department of psychiatry, the gentleman who seemed already so interested in Claire. When they finally arrived, I was surprised to see the professor looking very upset and there was even a depressed and crestfallen expression on Ali's usually smiling face.

"I am very sorry," he sighed, "We cannot go to Cappadocia. I have been informed by the Turkish authorities in Ankara that there are Kurdish terrorists in the area and it is dangerous to make the drive at this time. Turkish soldiers will be combing through the place and it is estimated that within a week it should again be safe. There have been three killings of civilians by these terrorists over the last 24 hours and so we are forbidden to go."

The room was in an uproar. Everyone was speaking at once. What to do? Richard was angry and began complaining that he had been cheated on the tour. Edward and Henry began insisting that we make a protest to the Turkish

government through the American embassy, apparently in their frustration not remembering that Turkey had a political system quite different than the United States. The women disagreed strongly because they did not want to travel in an area that was dangerous even if they could have received permission through the American consulate. The whole argument was academic, as I knew and Professor Kozturk knew, because one does not argue with the military authorities in Turkey.

I began thinking very hard as to how I could rescue this trip; after all we had just begun. I finally came up with the suggestion that we fly to Berlin for a few days and have a look at the many museums of ancient culture that are available as well as experiencing the rebuilding of a city that was almost completely ruined in World War II. I have always thought of the production of World War II and the amazing support that the demonic murderer Hitler received from the German people as possible manifestations of the death instinct in that culture. Surely Freud also would also have thought so if he had lived long enough to experience the outcome of the war and the unveiling of the Holocaust. I hoped perhaps if I also took the group on the two hour drive from Berlin to Dresden and showed them how the Germans had managed to get their own priceless treasure, one of the most beautiful cities in the world, completely destroyed, perhaps this would have some impact on their thinking about the death drive.

Of course the question came up in my mind at once as to whom I could get to be our host in Berlin. I telephoned my friend Willy in Berlin, an executive of the *Deutsche Psychoanalytische Gesellschaft*, of which I was also a member. Willy was more than happy to be our host and he also engaged a guide for us in the same capacity as was our guide Sema in Turkey, a young American woman named Lisa, who preferred to live in Germany rather than in the United States for personal reasons that were unclear. I then made the usual boring and annoying series of telephone calls, aided by the concierge at the Ankara hotel, and was able to get reservations on a flight to Frankfurt and then a transfer flight to Berlin for the entire group. So by evening a group of very tired and somewhat disoriented and disappointed individuals found themselves checking into the Hotel Forum at *Alexanderplatz*, an important square in what used to be Communist dominated East Berlin.

In return for Willie's kindness I agreed to address a local *Deutsche Psychoanalytische Gesellschaft* meeting which happened to be going on during that week. We would stay a few days in Berlin, make some side trips from there, and Professor Kozturk, Ali, and Sema would meet us when we returned to Ankara.

I also thought that some attention to the Prussian historical figure Frederick "the Great" would be helpful for our group because this unusual individual managed to combine an Enlightenment mind suffused with the

appreciation of reason and philosophy and possessing the capacity to enjoy, compose, and play music, with the behavior of a violent and cruel tyrant who was willing to gamble his entire country and the lives of its people on major military expeditions. Fortunately for him, his military gambles usually paid off and he was therefore awarded the title of “the Great,” for establishing the Prussian state as a major continental power. I remembered his interesting ambivalent relationship with Voltaire and hoped it would stir up some discussion.

The next morning Lisa appeared, a tall slender young American woman, who dressed simply and with none of the feminine sophistication or attractiveness of Sema. She was obviously self-assured and competent in her quiet sort of way, and quite experienced as a guide and Willy’s secretary. She was totally fluent in German, had numerous German acquaintances, and moved about like a native Berliner. I was fascinated to learn that in her spare time she traveled with a band and played lead guitar in performances all over Berlin, and some performances even in Finland, and Sweden, but she never expressed any sexual interest in either men or women and lived alone in a Berlin condominium she had purchased. She also was an avid golfer and participated in tournaments in Germany, a matter of considerable interest to Sarah, another avid golfer.

However, instead of having Lisa show us around Berlin, I decided to

have her first lead the group to Potsdam for a visit to Sanssouci, the summer residence of Frederick “the Great”. This is less imposing than his castle in Charlottenburg in Berlin but really was the place that Frederick enjoyed and perhaps showed himself to his Enlightenment best. What I had in mind was to illustrate through the discussion of Frederick “the Great,” the dual character of human instinctual life, what Freud called the Eros and the death instinct (named Thanatos by his disciple Federn). This is another way of highlighting the endless universal human interplay of lust and aggression and of trying to explain how these powerful forces play themselves out repeatedly and endlessly in the history of civilization.

Speaking of lust and aggression, I recall my previous visit to Germany a couple of years ago, during which I went to visit Freiburg, home of the university that was a central teaching post for both Husserl and Heidegger. When I got off the train from Heidelberg to Freiburg I was stunned by the sight that awaited me in the *Bahnhof*. Armed police with ferocious German shepherd dogs wearing muzzles stood guard, surrounding a group of skinheads—late adolescent youths who were marching and singing at the top of their voices and were obviously drunk on good German beer. The whole scene was reminiscent of what I watched on the movie newsreels over 60 years ago when the Germans were parading in the streets to the *Horst Wessel* march. Horst Wessel, you will remember, was a typical Nazi thug who died in fighting on the streets. He was modeled on Wagner’s adolescent bully

Siegfried, another German hero of the Nazi party. The son of a Protestant chaplain, Wessel deserted his family and dropped out of school. He went to live in a slum with a prostitute and devoted his life to marching and fighting for the Nazis. Communist thugs killed him in 1930. A foolish marching tune he made up became the official song of the Nazi party.

With this introduction to Freiburg, I visited the stately university with its imposing entrance framed by statues of Plato and Aristotle. I was able to see where Heidegger gave some of his famous lectures. Husserl lived some distance from the university in a very modest apartment, although it was always open to students, including Heidegger, one of his star students. Heidegger lived even farther away in a very imposing home and actually currently has a walking path named after him in Freiburg. His cruelty to his ex-teacher when he became a Nazi is well known. The Jewish Husserl lost his post and was not even allowed by Heidegger, then rector of the university, to use the library. This scene along with a tremendous pouring rain all day dampened my spirits and reminded me that in all these civilized countries, the so-called enlightened countries of the world, there is a chronic undercurrent of fascism, bigotry, and destructiveness that always waits to emerge like Caliban when political or economic times become difficult . . . but again I digress; this is nothing new.

On the way to Potsdam, Pearl quietly made the interesting observation

that the statues of the Virgin done by Tilman Riemenschneider (1460-1531) and many other sculptors during the German Renaissance—for example those statues in the *Mainfränkisches Museum* in Würzburg—all have sad and mournful looks; there were not many smiling happy Madonnas as in the many Italian paintings and statues from that era. “For”, she said, “Germany is a gloomier place with a gloomier climate, a place where the Niebelungs dwelled.” Sarah professorially chimed in, “In 1523 Riemenschneider was arrested for siding with the peasants in the ‘peasants’ revolt’ that was shockingly condemned by Luther. He was tortured for eight weeks and he never sculpted again. He and his work were buried and forgotten for nearly three centuries.” Recalling this cruel calamity, everyone became quiet and pensive. “Somehow,” said Lisa as she drove us along, “an assault on artists and art is an assault on civilization. But were the British bombers in World War II any better? Or the Germans, deliberately destroying the entire culture of Russia? Or the Americans attacking Hiroshima?”

I could see Richard starting to bristle and I didn’t want to start a debate about who deserved what in World War II. So I said, “Lisa it is not that simple. I am taking this group to study the depths of the human psyche through studying selected sites ancient and modern. I know from Willy you studied art history in the U.S. and so you know there has been in all cultures a tension between barbarism and conformity on the one hand, and creativity on the other”. To my amazement Lisa replied that she would like to come with us on

the entire trip in exchange for functioning as my assistant with reservations, luggage, and the usual details. She was apparently capable, intelligent, and well educated but peculiarly aloof, without roots, and unattached. Since the trip was getting more complicated than I expected and I was uneasy about my cardiac status, I agreed. So, in spite of Richard's angry look, Lisa was to be our guide in Berlin and my executive assistant—it used to be called “girl Friday”—from then on. I was sure I could depend on Willy's recommendation. This decision turned out to have major consequences for all of us, as it turned out.

We arrived at Potsdam. Of course Henry and Edward were only interested in visiting the Cecilienhof Manor, which played a special role after the end of the Second World War as the meeting place of the victorious powers. Lisa explained, “On February 8, 1945, there was this conference in Potsdam and efforts were made to settle post-war problems by Truman, Stalin, and at first, Churchill, who was replaced to his amazement in the middle of the conference by Attlee. They dealt with such issues as the political and economic future of and the general treatment of defeated Germany.” I added sadly for the group, “At this meeting, Königsberg, the home of the great philosopher Immanuel Kant in east Prussia and its bordering areas were placed under the administration of the Soviet Union, and the western and northern borders of Poland were redefined, leading to the creation of the Oder-Neisse line.”

Cecilienhof Manor is today used as a hotel and a memoriam dedicated to the Potsdam conference; it contains a tourist attraction consisting of a museum of very little interest. The last Prussian palace, it was built in 1913 through 1917 for Crown Prince Wilhelm. It was taken over by the Allied powers for their meeting. To the annoyance of Henry and Edward, I did not allow the group to linger there but proceeded directly to the Sanssouci castle of Frederick “the Great,” who ruled Prussia for 46 years from 1740-1786 and was regarded as “the philosopher of Sanssouci.” Due to his passion for French art and culture, he sought out the company of French men of letters and philosophers, notably Voltaire, who lived in Sanssouci for three years. Ultimately they quarreled bitterly and Voltaire left.

After a brief tour of the relatively modest castle we sat around in the garden and there I tried to initiate and moderate a discussion in spite of the tourists milling about.

“Well, Frederick knew how to live,” said Gertrude. “His dinner was an extended formal affair that lasted a couple of hours in the afternoon. It was the central point of his day and well spiced with both animated and lively conversation. Frederick employed twelve cooks, but what interests us of course is the conversation at his dinner table, which some people feel was forced and pretentious with its parade of what may have appeared ostentatious over-cultivation.” Sarah remembered from Fraser’s² recent

biography that, "It suited Frederick, however, and when his boon companions disappeared he missed them badly . . . After dinner, and before his letter-signing session, Frederick walked or rode. He had a strong streak of hypochondria." She seemed to have a remarkable memory, a true professor who was actually extremely well read.

But Sarah, with all her talent and education, was an unhappy and uncomfortable person. It was apparent that she thought herself rather ill-used by life. Her attraction to Gertrude seemed to have been based on Gertrude's plump maternal sort of body and the apparent superficial aspect to her personality, but as time passed Sarah became aware that Gertrude was a predator. It was no surprise that Gertrude fitted in well with the intersubjective and interactionist psychoanalytic schools on the west coast as she was clearly one of those people who are immersed in continual human interactions. She was not the meditative type and had a tendency to take command even while appearing to be plump, middle aged, and harmless. She was very wise in the ways of the world and dedicated to pleasure. Sarah, more of an academic person, had learned a lot from Gertrude about sexuality and how human beings kept their true missions in life hidden behind a façade of cultural amenities and customs, and about the craft of flattery and misleading others for the purpose of attaining the success of those secret missions. And Sarah was getting tired of the feeling of being manipulated and wondering if the relationship with Gertrude was worth the physical pleasures

Gertrude had to offer.

Richard suddenly came upon the scene and held up a huge poster that he was able to purchase at the bookstore of the castle. It portrayed a classical Enlightenment dinner party hosted by Frederick “the Great.” Richard felt it necessary to instruct us that on the poster seated around the table were Frederick’s friends Lord Marshall, the Marquis d’Argens, Feldmarshall Keith, Graf Algarotti, and others. Most prominently placed at the dinner table were Voltaire and La Mettrie, both of Enlightenment fame. La Mettrie died at 43, explained Richard. He was a materialist and atheist philosopher as well as a former French army surgeon. Lord Marshall was nineteen years older than Frederick, trusted utterly by Frederick, and sent to Paris as Prussian ambassador in 1751. He was probably the man Frederick esteemed the most. His brother James Keith, three years younger, was a brilliant linguist in addition to his military ability. An accomplished man of letters, he corresponded with many members of the Enlightenment all over Europe. He died in battle at the King’s side. Algarotti’s main asset was his charm. The Marquis d’Argens was a Provençal, a free-thinking philosopher, whom Frederick made the director of philosophy at the academy in Berlin. He was a good-natured and good-hearted man whose vivacity and good manners did much for the atmosphere in Sanssouci.

“Who can tell us a little more about Frederick,” I asked, trying to put an

end to Richard's display of erudition. As expected, Sarah quoted the biography again: "Frederick showed little change in skepticism about human nature, about the affairs of the world, or about religion . . . Frederick, the *philosophe*, was still eager for a fight with any intellectual willing to take him on, although, as one of his readers shrewdly observed to him, the king's skepticism was so frequently and ostentatiously paraded that it might be thought he was a little uncertain; even a little uneasy."

Claire cautioned, "Martin, Frederick seems to have been a mass of contradictions, an enigma. I have read biographies of him also and he seems to have spent most of his time not talking philosophy or playing or composing music for the flute, or enjoying his art collection, but fighting wars and battles and killing people. His main interest seems to have been to drill the Prussian army into a superb fighting force." "It is certainly clear," I responded, "that Frederick was not a completely integrated human being but a complex of human desires, instincts and faults."

"Fraser seems to think that he fell below his own standards of how a sovereign should react and behave because of his complexes," commented Marsha, who had also read the biography, "for Fraser wrote, 'The idealism of youth and ambition had often to be tempered by the sour lessons of experience and expediency'".

Richard admitted that autocracy and toleration were the basic and somewhat contradictory qualities of Frederick “the Great” but he insisted that *au fond* Frederick “the Great” was a totalitarian and a destructive person who did not hesitate to be vicious to his friends and everybody else when he felt like it. I pointed out that on the other hand, he was unusually tolerant of various religions and beliefs. He was a sincere son of the Enlightenment who abominated the sort of fanatical “certainties” that often lead followers of one creed to persecute those of another, unfortunately an even worse problem today.

“He was indeed a strange mixture,” said George, joining the conversation for the first time on this trip, “Fredrick greatly admired French artistic, intellectual, and literary achievements. He even loved the language, and ordered the Berlin Academy of Sciences to conduct their proceedings in French. Yet he never personally attended the Berlin Academy of Sciences and was often at war with France.”

There was no greater contrast than between the personalities of Richard and George. Although George was a very successful old time psychoanalyst in his field, he was a humble person who got along well with people in all walks of life, enabled them to feel comfortable with him, and who always seemed to have ample time to help others. When he was interrupted in the middle of his writing or studies, George never seemed to mind and was

always available for his friends and colleagues. He was a friendly man who enjoyed teaching students at all levels and had the knack of taking them seriously and never using his extensive erudition to put them down, make them feel foolish, or show impatience. George was the ideal teacher, and in addition he had a great sense of humor, always ready with a joke or two. In contrast to Richard, he did not worship psychoanalysis and was able to tolerate its areas of uncertainty and even the wars between the competing “schools” that sullied the history of the discipline.

Happy to hear from George, I tried to sum it up. I said, “A study of Frederick ‘the Great’ illustrates to my mind the terrible paradoxes and inconsistencies of the human mind. As Fraser tells us, ‘in his tastes, his love of learning, his artistic talents and predilections, Frederick was a sensitive and distinguished polymath’. But he was extremely conservative; Haydn composed during his middle and later years but he showed no knowledge of it and he probably heard of Mozart but showed no interest. His energy and military accomplishments were all accomplished at the cost of violating his Enlightenment orientation, in my opinion. His heavy physical presence and rapacious wit as well as his capacity to kill and destroy existed side by side with his fine intellect, love of the arts, and aspirations towards Platonic ideals. This is what I want to show you over and over again on this trip, how each and every human is beset by a mass of lustful and aggressive drives with which he or she has to grapple with from birth. The consequences of this for

the future of civilization are quite grim indeed.”

The next day those who were interested took a tour of modern Berlin, Lisa driving us from the east Berlin area and our hotel at *Alexanderplatz* around the city and into the west Berlin area, now all integrated into one amorphous city. Personally it reminded me of Chicago without the lake. We went through the *Prenzlauer Berg*, and crossed the site where the famous Berlin wall once stood, to what is now the Turkish worker area of *Kreuzberg*. We returned across the previous wall demarcation into East Berlin and visited the old Jewish quarter that was called the *Scheunenviertel*, in the *Mitte* district. I was very disappointed in the recently integrated East Berlin, for a lot more renewal of the buildings is needed and those which have been nicely renewed were made ugly by extensive graffiti. It was my feeling that a Fascist-anarchist underclass is involved in this graffiti and waiting its chance when the next economic calamity hits the Western world.

In general, Berlin seemed large, sprawling, and crowded and I heard much less English spoken than in previous years when I visited. That evening I took the group to the Philharmonia Hall to hear Haydn's *Stabat Mater*, part of an outstanding concert by the RIA chorus in the chamber music hall of the Philharmonia building.

The following day, in two cars with Richard driving one and Lisa the

other, we drove around Dahlem and the lovely area of the *Frei Universitat* and visited the Max Planck Institute. We ended up at Humboldt University and went across the street to look at the memorial excavated into the ground on the spot where the Nazis carried out the famous burning of books in 1939. It was this book burning that Freud called progress, pointing out that, as he thought, “In the old days they would have burned me, now they just burn my books.” Little did he know what was coming! The memorial is built into the ground and consists of empty bookshelves. We found it exceptionally moving, a silent reminder of how thin and easily broken is the veneer of civilization that Prospero has available to keep Caliban in check. That night, trying to keep the group distracted from their disappointment about the Turkey visit, I had Lisa take us to the *Komische Oper Berlin* for a marvelous production of Prokofiev’s *Love For Three Oranges*, a supremely civilized creation. Culture was very much alive and well in Berlin.

The next morning I gave Lisa a day off, and led the group in taking a bus to the Pergamon Museum, unique in its kind and reuniting us in spirit with our trip to Turkey. This museum, opened in its present form in 1930, is arguably the most remarkable site in Berlin. It contains the Great Altar of Pergamon built about 160 B.C.E. on the site of the present day city of Bergama in Turkey and is dedicated to either Zeus or Athena. The theme of its great frieze—the battle of the gods and giants—was chosen to commemorate the struggle of the Pergamons against invading forces from Asia Minor. How it

was preserved during World War II and the battle for Berlin is a miracle. This was the third or fourth time I visited it, and somehow it seemed out of place in a museum and colder and colder with each visit.

Most in the group were awed and transfixed by its size and splendor and this gave me another chance to look them over. Of course the one I wanted to look over the most was J., as her husband was taken up with the museum's sights, but she carefully did not respond to my interest. I think she was exhausted by this time and I sensed the tension growing between her and Henry. There was so much running around in Germany that, in contrast to the ambiance of Turkey, little energy was left for expressing the personal difficulties that were emerging in our group. Claire stayed carefully out of Richard's way, but I noticed that Edward was already watching him warily. I wondered if Henry was watching me warily and I felt a growing sense of disgust and despair at this whole set of primitive difficulties as well as a premonition that sooner or later, in spite of my best efforts, things were going to explode. Even Gertrude and Sarah, who seemed at this time on the surface most composed, were insecure and unsure about the stability of their relationship. There was not going to be a battle of the gods and giants but a different "battle of the giants" as Freud called it, lust and aggression tangling in the dust to which we all must eventually return.

In the afternoon we went to the Berlin *Akademie der Wissenschaften*

where I presented my promised lecture to the *Deutsche Psychoanalytische Gesellschaft*. The room was filled. It was flattering to have such a large audience but the moderator took up a lot of my time talking about herself. Shortly after I stood up and began speaking, someone rudely and noisily started working on a slide machine in the middle of the room, preparing for the next talk. I stopped him; perhaps my assertiveness stunned the audience. Here is my lecture as I remember it, beginning with this quote from Heidegger in the *Zollikon Seminars*³: “It is especially the case in psychiatry that the continuous encounter between the thinking of the natural scientist and that of the philosopher is very productive and exciting.”

My Last Lecture

“Everyone agrees that the field of psychoanalysis and psychodynamic psychiatry is undergoing a widespread dispersion and dilution these days with many schools of thought and many new opinions being offered. In order to maintain our sense of identity we need to have a clear notion of what we regard to be psychoanalysis and what it stands for. I will first discuss the decline and closing of the most famous academy of all time, that of Plato, and review historically how and why this academy disintegrated. Historians agree this disintegration represented a failure of nerve in the thinkers of the time as a consequence of their efforts to fit into the prevailing Christian cultural milieu, which increasingly replaced that of classical Greece and the Roman Empire. I want to suggest that a similar failure of nerve is taking place today in the era of global capitalism and managed care in which, as Foucault pointed out, the nature and structure of the human sciences are generated by the prevailing political power of the particular era. Because we are in the era of the popularity of brain studies there is a tendency to forget that psychoanalysis is a unique discipline combining natural science observations of the transference with hermeneutics and energetics. Being unique it is not replaceable or reducible to a materialist substrate.

For Pythagoras in about 550 B.C.E., mathematics was the key to the order and the beauty of the universe. The intellectual satisfaction of

mathematics leads us, as Plato subsequently said, to the realm of the perfect; it is, he thought, a way of truth, a way to recognize the real objects of the world, a way to approach the Form of the Good. Similarly, Aristotle believed that a life of *theoria*, pure inquiry, was the best life.

Everything from the time of Plato and Aristotle on was down hill. For example, the sophist Antiphon said that the whole of life is wonderfully open to complaint; it has nothing remarkable, great, or noble, but all is petty, feeble, brief lasting and mingled with sorrows. But Plato believed that reason was for the purpose of enabling humans to live for something, to identify and set up appropriate goals and then focus one's life on achieving them. However, even Epicurus and Lucretius already recognized that few humans are not slaves to lust and aggression, and with the decline of Greek civilization began a basic controversy on these matters that exists to the present day.

The first Academy known to history and devoted to the examination of these humanistic issues was opened by Plato after the death of Socrates. Over the entrance was the admonition that one must learn mathematics before entering. This Academy lasted about 900 years in one form or another. The first Academy was like a college or a group of self-supporting intellectuals teaching an enormous range of subjects. Members of this Academy were required by Plato to have certain natural gifts for the pursuit of learning, a willingness to work very hard, and to adopt a well-ordered scheme of living.

Plato hoped the love of knowledge in its purest form would be the basic motivating force of those who were admitted to his Academy.

It is very interesting to watch the subsequent development of the Academy after Plato's death. It broke up into groups of quarreling factions in which, for example, some leaders developed and rigidly followed what they took to be Plato's dogma and doctrines, while other groups adopted a more tentative questioning and somewhat more sceptical approach in the attempt to acquire knowledge. Arguments between the factions finally led to a fragmentation of the membership and the establishment of new schools, institutes, and academies.

Aristotle, Plato's most famous pupil, split off and developed a philosophy that only remotely resembled that of his master Plato. When Plato died, his nephew Speusippus inherited the leadership of the Academy. Aristotle, resenting that he was not appointed leader, went with a few other students to Atarneus, a small city on the West coast of Asia Minor governed by a friend of his who had been a student at the Academy. On land this friend gave him, near the site of ancient Troy, he established his own 'institute.'

The first two centuries after Aristotle's death were marked by a spirit of competition among the proponents of rival philosophies between and within various Academies or 'institutes.' Others attempted to reconcile them and still

others simply dogmatically promulgated the doctrines of earlier thinkers whom they idealized. The debates degenerated and took on an increasing mystical tone since there were no ways of convincingly demonstrating who was right and who was wrong, nor was the importance of clinical or empirical studies even recognized at the time as a legitimate method to settle humanistic disputes.

By this time Christianity was on the ascendance in the classical world and the aims of the Academy had shifted from the pursuit of knowledge for its own sake to attempts to reconcile classical philosophy with the increasingly influential Christian theology, to 'fit in' so to speak, with the prevailing cultural ambiance. The Christian emperor Justinian found a quick way to put an end to all this obscure philosophical squabbling by simply closing down all the philosophical schools in Athens and attempting to ban all non-Christian philosophy throughout the Roman Empire.

I think it is quite fair to label this story of the progressive degeneration of the academies and institutes and schools of thought as a loss of nerve among the intellectual lights of classical antiquity. Hegel, in his *Lectures on the Philosophy of World History*, pointed out in 1830 that all the contributory factors that led to the eventual decline of the Greek world can be ultimately condensed into a single one: the emerging principle of corruption. Indeed, with the death of Alexander, Hegel believed, the moment when Greece was a

significant power departed from the stage of world history and the role of a world-historical people now passed to the military and barbaric Roman Empire, rendering the world spiritless and heartless in comparison with the Greek world that had preceded it.

The parallels to the current cultural situation are obvious. For example, one may ask which concept of *Bildung* should we follow, both of which were extant during the time of Hegel. The first conception, developed by philosophers such as Fichte, views *Bildung* as a spontaneous natural instinct towards self-development. The opposing concept, presented by Hegel, refers it to a process of development whereby the merely natural individual is transcended, raised to the level of spirit as a member of a moral community, or as a citizen of an ethical state. In today's world the first concept of *Bildung* is what we use in explicating the goals of psychoanalysis and we are inclined to think that the second concept represents a value system that should not be imposed upon the patient. It is important to point out that this decision to reject the second concept represents an underlying philosophical premise about the nature of humans. For example, Marx argued and presented a view contrary to this premise. He claimed that humans are predominantly species-beings, borrowing Hegel's notion of *Bildung*, and insisted that given the proper conditions humans naturally would develop to where they would be concerned with each other's welfare. This clashes directly with the spirit of global capitalism prevalent today, so-called rugged individualism, the spirit of

“me-first.”

The whole drift and fashion in psychoanalysis today, in the direction of intersubjectivity and interpersonalism and even the promoting of the analyst's self-disclosure, represents a development in psychoanalysis similar to the changes that occurred in Plato's Academy. We tend to forget about Freud's admonitions and hopefulness that scientific objectivity is at least relatively possible in psychoanalysis. Bergmann⁴, in discussing Freud's structural theory, explains, 'Within this structural point of view, the aim of psychoanalysis became the strengthening of the ego against the other two institutions [id and super-ego], and also helping the ego free itself from the power of some of its own defense mechanisms, acquired during childhood which can cripple the ego's freedom of movement. The aim of psychoanalysis became the achievement of a more favorable kind of intrapsychic compromise formation'. The retreat from such lofty aims to a study of the here-and-now interpersonal interactions in the analytic consulting room represents evidence of a loss of nerve among psychoanalysts. It is hard to maintain our original ideals in a world that is morally disintegrating around us, posing the same problem that was unsuccessfully faced by the members of Plato's Academy who attempted to live the life of *theoria* while classical Greek culture crumbled all around them and eventually fell to the rule of the Roman military state.

The preconceptions and early internalized object relations of patients profoundly affect the entire 'here-and-now' interaction between the analyst and patient, as well as between the patient and significant others in his or her life. In the current rush to relational or constructivist psychoanalysis, this extremely important discovery of Freud has tended to become relegated to the background, whereas in my opinion it belongs in the foreground! Freud's profound delineation of how the earliest years of life affect and determine to a great extent the adult patient's experiences later in life or, more precisely, determine the way the given patient experiences his or her experiences, in my judgment is powerful evidence that Freud's basic conceptions of psychoanalysis are just as valid today as they were in his time. It would be a great loss for our profession to lose sight of this fact. The kinds of patients we see today are not the kinds of patients for the most part that provided the cases upon which Freud built his theories, but the principles of the practice and theory of psychoanalysis should remain the same because they are still entirely applicable and effective when employed by well-trained professionals.

I turn now to the current fashion, that of attempting to reduce mental functioning to brain functioning, based on the assumption that since this reducibility is possible then everything we know about mental functioning can be restated in neurobiological terms. If this is true it allows us to alter the neurobiology by the use of drugs and to ignore the language of

psychoanalysis entirely. The problem as we shall see is that, in the opinion of many powerful minds in the philosophy of science, it is not true.

Connecting what we know about the brain with what we think we know about the mind requires us to move beyond the confines of neuroanatomy and neurophysiology into the murky regions of philosophy of the mind. The third person perspective cannot convey the private nature of consciousness, the first person aspects of human life, what it is like to be conscious. So certain aspects of conscious experience are beyond the limits of science.

Let me briefly review some of the current thought on the problem of the relationship between the mind and the brain⁵. Dennett and certain other students of the mind-brain problem manifest a casual optimism, based on the early work of the Oxford philosopher Gilbert Ryle, that the mind-brain problem can be cleared up empirically. The usual solution of those who adopt this approach is to simply eliminate the mind! Searle on the other hand, has attempted to rediscover the mind on the basis of the fact that consciousness is ontologically subjective even though it is a physical property of the brain in spite of its subjectivity. It is irreducible, he claims, arguing in contrast to proponents of eliminative materialism like Rorty and the Churchlands. For the Churchlands, mental states do not exist, they are postulates of a primitive theory of folk psychology. So all materialist theories end up denying the reality of mind by identifying it completely with something else.

Searle, on the other hand, advocates what he calls biological naturalism, a view in which consciousness is seen as a higher-level emergent property of the brain even though it is based on the physical, just as liquid, solid, or gaseous states are properties of systems of molecules. The physical states are ontologically objective and can be studied empirically, but consciousness is ontologically subjective. However, both of the distinguished philosophers Nagel and Searle agree that the solution to the mind-brain problem is nowhere in sight. In fact Searle argues that it is a mistake to think that all that exists is comprehensible to our brains. Similarly, McGinn, in his book *The Problem of Consciousness*, says that we are constitutionally incapable of understanding the mind-brain problem.

Voorhees also insists that consciousness has an a priori ontological existence, a kind of modern version of the “soul.” He agrees with Searle that Dennett’s view eliminates the very thing—first person conscious experience, so called subjective consciousness—that was to be explained! Dennett, a distinguished proponent of eliminative materialism, dodges the issues of the overall unity of consciousness recognized even by Kant in 1781, and of how various sensory aspects of a perceptual object are parsed by the brain and so combined into a unified percept. This in mind-brain philosophy is called the ‘binding problem.’ Even more significant is the so-called hard problem, which both the artificial intelligence or functional and the eliminative materialist approaches, both restricted to third person empirical methods, cannot

answer: how does neuronal activity lead to first person experiences such as envy, love, and so on. Thus Voorhees, like Searle, concludes that consciousness is irreducible and ontologically primitive, *a priori* given.

Searle marshals powerful arguments against the 'functional' point of view, the idea that the mind is some sort of a computer. This view is the natural outgrowth of so-called token-token identity theory, a more sophisticated form of eliminative materialism than Ryle's behaviorism. He also emphasizes how both the philosophical rejection of realism and the denial of ontological subjectivity lead to attacks on rationality, on truth, and on intelligence.

There has been an increasing tendency in our field to emphasize the importance of neurophysiology, neuroanatomy, genetics, and various other aspects of the organic study of the brain. This of course is a salutary development as far as the science of psychoanalysis is concerned. Certainly well established contemporary neurobiological findings derived from standard empirical scientific experiments should and would cause we psychoanalysts to be sure that our basic premises are consistent with them. But at this point there are relatively few generally accepted and replicated experimental demonstrations of brain function that are definitively inconsistent with the basic principles of psychoanalysis. Probably the most well known of these is the discovery that the brain seeks stimuli rather than a

state of total rest, the latter being an incorrect assumption Freud made from the neurobiology of his time. Just as Freud attempted to found psychoanalysis on what was thought to be sound principles of neurophysiologic functioning, we of course must do the same today.

However, it does not follow that we have the right to assume that with a complete knowledge of brain physiology and genetics we will automatically have a complete knowledge of mental processes. There are a substantial number of philosophers of science today who believe that in principle the so-called hard problem of the mind-brain enigma (as described above) is insoluble. This 'hard problem' is essentially the same as that which baffled Freud and caused him to abandon his 'Project for a Scientific Psychology,' published posthumously in the *Standard Edition*, vol.1. It is the question of how one makes the mysterious leap from neurophysiological functioning to the individual subjective personal conscious experiences, the 'qualia' of consciousness itself. In our enthusiasm to convince the insurance companies that we are a legitimate science, we should not lose sight of the fact that it may never be possible to base psychoanalysis completely on a knowledge of neurophysiological functioning, and so a humanistic language such as that invented by Freud when he gave up the 'Project for a Scientific Psychology' will always be necessary. To put it formally, the qualia of consciousness are irreducibly ontologically subjective⁶.

We always need to have a basic orientation and a psychoanalytic language and identity of our own. It is the gradual loss of this identity that is generating a demoralization in the field of psychoanalysis, a loss which has been precipitated by the demands of insurance companies for empirical proof of the validity of the psychoanalytic process. It has become obvious that such 'proofs' in the humanistic sciences can not be established with the same kind of certainty that one finds in the natural sciences and that we must be content with accumulating observational data provided by well analyzed psychoanalysts. A vicious circle is involved here, since if it becomes impossible for patients to afford psychoanalysis then we are in a situation where less and less reliable data can be gathered out of the psychoanalytic process from the treatment of many patients.

That such a gathering is fruitful is evident from studying the history of psychoanalysis beginning from the early days of Freud's Wednesday evening society as it has evolved over the last hundred years in a direction that is clearly less idiosyncratic and much more efficacious. The emphasis on neurobiology, which has rhetorical value for obtaining third party payment, should not cause us to think of ourselves as neurologists or empirical scientists or 'neuropsychanalysts.' It is because we are a unique discipline that we should proudly hold to a focal identity. Our sense of professional integrity demands this in spite of the fact that insurance companies exploit uninformed public opinion on this matter. Even Medicare in the U.S.A. will

pay for four sessions a week of sitting up or face-to-face psychotherapy but will not pay for four sessions a week of psychoanalysis carried out on the couch, a classical example of bureaucratic obstreperousness and obnubliation.

In the current rush to get on board the neurobiological express that is so much more acceptable to our current ‘fast-fast-fast relief’ culture, we tend to lose sight of the fact that Freud’s psychoanalysis developed a language and a methodology that allowed the investigation of mental functioning without the necessity to know everything there is to know about brain functioning. We need to preserve that unique language of Freud and that unique discipline that he invented, and to preserve it with pride as a legitimate and separate method of scientific investigation. It is not simply an offshoot of neurophysiology soon to be discarded, it is not simply a relativistic interchange between a unique analyst and a unique patient in the ‘here-and-now,’ but rather it rests on a solid foundation of accumulated information over the past hundred years and a methodology invented by Freud that has proven to be of lasting value and yielded many fruitful results and new insights into the human psyche in all areas of the human sciences. But our current culture emphasizes quick electronic answers, e.g. ‘google it,’ brief texting, computer games for children and adults instead of reading and imagining, sound bites rather than meditation, slogans instead of dialectic, and a generally a situation in which our intellectual capacities are impulse

driven instead of challenged.

We are facing a similar situation today that was faced by Plato's Academy during the decline of the Greek culture. If we as psychoanalysts do not clearly articulate and maintain our basic ideals, we, as it happened to the ancient Greeks, are liable to progressively degenerate into groups of squabbling physicians accompanied by a cacophony of tediously disputatious psychologists and social workers. The entire field of psychoanalysis and psychodynamic psychotherapy will become marginalized in our culture and regarded as just another mystical cult without any empirical or scientific grounding and without any basic orientation. No emperor will be required to shut these schools down; they will just die by attrition and neglect, much to the joy of the insurance company executives.

There is a clear similarity between Freud's ideals and those of Plato. For example, Freud² writes, 'The voice of the intellect is a soft one, but it does not rest until it has gained a hearing. Finally, after a countless succession of rebuffs, it succeeds . . . No, our science is no illusion. But an illusion it would be to suppose that what science cannot give us we can get elsewhere.' What are we expecting to be given by 'our science'? The centerpiece of Freud's psychoanalysis is the discovery that in the first few years of our experiences of childhood, in combination with our genetic endowment, we lay down certain patterns of behavior and certain core archaic fantasies that govern the

rest of our lives. These patterns and fantasies are based on combinations of experiences and our infantile interpretations of these experiences which taken together constitute a threat to the ego or to the integrity of the self. So patterns of behavior and core archaic fantasies are formed that are the result of compromise formations that allow the ego and the self to remain intact. They represent a template through which the person experiences all object relations in life. They set down a paradigm that repeats itself endlessly in the patterns of thought, fantasies, and behavior that constitute the personality characteristics of the individual, driven like all of us by the endless striving to repeatedly actualize some derivative of the archaic fantasies and desires. The intense gratification in this actualization makes our life a perpetual striving that Freud correctly called the program of the pleasure principle. The pursuit of the pain that is also invariably involved he considered beyond the pleasure principle, one of the evidences for a so-called death instinct as he conceived of it in his final instinct theory.

In the therapeutic relationship in psychodynamic therapy or psychoanalysis, this paradigm shows itself by repeated anticipations on the part of the patient of the same kind of treatment or relationships the patient has experienced or imagined they experienced from significant individuals in their formative years. This is accompanied by enactments and fantasies driven by the program of the pleasure principle as described above, now aimed at the therapist. All this appears as manifestations of what Freud

labeled the transference. It is the vicissitudes of the transference which can be observed and studied that allows us to call psychoanalysis a natural science. The transference is the centerpiece of all psychodynamic and psychoanalytic therapy. It was defined by Fenichel⁸ as follows:

In the transference the patient misunderstands the present in terms of the past; and then instead of remembering the past, he strives, without recognizing the nature of his action, to relive the past and to live it more satisfactorily than he did in his childhood. He 'transfers' the past attitude to the present.

The transference offers a vital and unique clinical opportunity to observe and experience derivatives of the past directly and thereby to understand the development of the nuclear childhood conflicts. It is always present and may be most commonly manifested by allusions to it in dreams and free associations. The therapist must continually look for it, clarify the contribution of the current analytic interpersonal situation to it, interpret the patient's resistance to awareness of it, and finally translate the disguised and displaced expressions of it into direct experience and discussion. This is the centerpiece of successful psychodynamic uncovering psychotherapy and it is Freud's greatest discovery.

It represents a failure of nerve to drift this way and that with current fads and with the continuously deteriorating ambience of our culture. Franz Alexander said years ago that psychoanalytic psychotherapy is one of the last

remnants of the humanistic ideal, focussing on the individual unique person and both his or her transcendent possibilities and maladaptive pathology. As the famous American novelist Saul Bellow puts it⁹ in his discussion of the disappointing current situation for the arts and the humanistic disciplines, the intelligent public is waiting to hear from these disciplines what it cannot hear from pure science:

Out of the struggle at the center has come an immense, painful longing for a broader, more flexible, fuller, more coherent, more comprehensive account of what we human beings are, who we are, and what this life is for . . . the individual struggles with dehumanization for the possession of his soul.

Bellow points out, in talking about writers, and in a discussion equally applicable to psychoanalysts, that if we do not ‘come again into the center it will not be because the center is preempted. It is not. [We] are free to enter if [we] so wish.’”

* * *

The lecture was fairly well received as far as I could tell from my rudimentary understanding of German, and considering that some of the audience had only a rudimentary understanding of English. That evening I took the group to the *Berlin Staatsoper* to hear a production of Mozart’s *Abduction From the Seraglio*, which I thought was done very strangely. They made a heavy German drama out of it and had the two women tormenting the

Pasha and Osmin by sexually arousing them deliberately, which I had not seen in any production of that opera before. That night a group of drunken youths pounded on my hotel door due to some kind of mistake, and I had to chase them away. The next morning we walked on the famous *Kurfürstendamm* and shopped at KAY-VEE-DEE, probably the most fashionable department store in Berlin. It was mobbed with shoppers, almost a caricature of an American shopping mall, a commercial paradise. More museums in the afternoon and then to the *Konzerthaus* to hear some chamber music (Janacek, Mozart, Shostakovich) well played for a very appreciative audience. Obviously I was really trying hard to keep the group busy and distracted from their frustration with the visit to Turkey. But all this running around with a group of people in tow was beginning to get me down and, although I was not drinking much coffee or having much in the way of alcohol and beer, I awoke in the middle of that night with atrial fibrillation, noticeable angina, and a lot of sweating. After taking a couple of nitrostats I was able to fall asleep. Some time during that sleep my damaged heart reverted to a normal cardiac rhythm. I should have paid attention to this warning but I did not.

To end our brief visit to Berlin we took a bus tour to Dresden as I had hoped we could. On February 13, 1945 the city was utterly destroyed by British bombing and it still is in very bad condition. The East Germans did very little to restore the ruins. The buildings they constructed were as ugly as

possible and built in the usual Soviet housing style. The highlight of the city now is the Semper Opera House, where we attended a performance of Strauss's *Arabella*. What a sad disaster World War II was for all these beautiful European cities and their heritage! We sat around in the café adjacent to the opera house after the opera and asked each other, "How can people do this to themselves?" Arrogance, bullying, adolescent marching songs, and even today middle aged members of gun clubs parading down the streets of Bayreuth, the city that is a shrine to Richard Wagner's magnificent music. The amazing commercial opulence of the *Kurfürstendamm* and the shabbiness of former East Berlin with the disappointing graffiti uglifying what has been restored. What does it all mean? Is this all the secretion of global capitalism?

George quietly suggested that the answer might be found if we look into ourselves.

For a special final treat on our last evening in Berlin I took the group to hear the Czech Philharmonic Orchestra play Beethoven's Ninth Symphony in the main concert hall of the Philharmonia to celebrate our farewell to Berlin. But it was played in an uninspiring manner without the excitement and grandiosity of the performance that took place in Berlin shortly after the wall came down. The next morning Lisa in simple blue jeans arrived with her light traveling bag. Some of us took a taxi and Lisa drove the rest of us to the

airport, returned the rented touring bus, and joined our group. We boarded our plane for the return to Turkey with a sense of foreboding about the future of Europe, the future of civilization, and the future of the human species itself.

Notes

- ¹ *Family and Friends*. N.Y.:Vintage, 1958, pp. 47-48.
- ² *Fredrick the Great*. N.Y.: Penguin Books, 2000, pp.235, 495,615, 628.
- ³ *Martin Heidegger: Zollikon Seminars*, by M. Boss. trans. F.Mayr and R.Askay. Evanston, IL: Northwestern University Press, 2001, p. 238.
- ⁴ Life goals and psychoanalytic goals from a historical perspective. *Psychoanalytic Quarterly* 70:15-34, p. 20.
- ⁵ For details see Implications of the current insolubility of the mind-brain problem for the contemporary practice of psychodynamic psychiatry, by Richard Chessick, *Journal of the American Academy of Psychoanalysis and Dynamic Psychiatry* 37:315-351, 2009.
- ⁶ See *The Rediscovery of the Mind*, by John Searle. Cambridge, MA: MIT Press.
- ⁷ *The Future of an Illusion*. S.E.vol.21, pp. 53,56.
- ⁸ Otto Fenichel, *The Psychoanalytic Theory of Neuroses*. N.Y.: Norton, 1945, p.29.
- ⁹ *From Bellow: A Biography*, by J. Atlas. N.Y.: Random House, 2000. p. 462.

Chapter 4

Cappadocia

Early the next morning after our return to Ankara, our group, now embellished by Lisa's presence, assembled, ate breakfast hastily, and prepared to board a private bus with Abdul at the wheel for our drive to Cappadocia—a drive that was supposed to have happened a several days ago. Professor Kozturk and Ali appeared and the professor assured us that everything was safe and in order. We were to stay, of all places, at a “Club Med” in Cappadocia! Ali joined us for the trip, but Professor Kozturk remained in Ankara. I soon found myself sitting at the back, on a bench that constituted the rear of the bus, between Henry and Claire. Ali happily squeezed in at one end of the bench, next to Claire of course. He had on a decorated pair of jeans, an article rather frowned on by orthodox Moslems. His T-shirt, inscribed in overly large red letters as “University of Istanbul,” clung tightly to his obviously muscular chest and arms. Claire pretended not to notice this, although she did not seem to mind his squeezing in beside her. She was dressed modestly in dark colored slacks and a touring jacket and there was an air of tension and discomfort about her.

It was pretty clear that Claire was unhappy in her marriage and felt trapped with Edward, who was making it possible for her to have specialty training. They had little in common and Edward had solved the problem by

avoiding home most of the time while entangled in various national and international business deals. In many ways Edward reminded me of a masterpiece now hanging in the Louvre, Ingre's *Portrait of Louis-Francois Bertin*, a man who in his massiveness and uncomfortable pose appears as the incarnation of 19th century bourgeois capitalism. Their future looked grim and she was determined not to have any children by him. But, like Ali, she was intent on hearing the conversation, avoiding thinking about her troubles. And nothing incites older professionals to sparkle more than young, attractive, intelligent residents, eager to learn.

Our musings about the loss of time from our trip to Turkey led Henry to begin speaking about a philosophical interest of his, the problem of time in general. "Bergson, in his book *Time and Free Will*, pointed out the artificiality of scientifically measurable time as opposed to something he called 'real concrete duration,'" said Henry rather pedantically, "and this proves to be much involved in the recent day findings from investigations in the mathematical biology and physiology of the nervous system, on the one hand, and in psychiatry on the other."

"Well of course," I replied, not to be outdone in academic competition, "as Bergson pointed out, 'duration and succession' belong to the intellectual apparatus of the conscious mind. For example, in sleep, where our perception of space is no longer intellectually ordered, our notion of time is freed of the

bounds which consciousness imposes upon it, and becomes rather primordial or, as Lowenstein or the ego psychologists would put it, instinctualized in nature. In sleep there occurs an intermingling of past, present, and future, driven by the pleasure principle, and later when we are awake it is the work of the intellect to superimpose an abstract succession in space upon our natural perception of time. Psychologists have described how in states of alteration or disturbance of intellectual processes, whether due to sleep, drugs, disease, and so forth, there occurs what appears to the intellect to be a remarkable distortion of time perception. The past, present, and future become kaleidoscopically intermingled.”

Marsha, sitting uncomfortably on a damaged seat in front of us, overheard the conversation, turned to us, and added, “The genius of Proust enabled him to display all this directly in his magnificent novel!” Ali nervously chimed in, “This argument is also supported by cybernetics in which a distinction is made between Newtonian time inextricably bound up with intellectual calculating processes, and Bergsonian time in which the automata really seem to exist.” Everyone looked a bit puzzled at this rather obscure remark, but I chose not to embarrass him by following it up with questions. There was a brief silence.

Then Claire began, “Even more remarkable distortions of perception occur in schizophrenia, where not only time perceptions but space and

motion perceptions are capable of being twisted completely, as a secondary feature to the fragmentation of the personality.” “That’s right Claire,” I responded, “I recall a case of mine in which an acute schizophrenic episode was ushered in by the chief complaint of the patient that all the clocks in the place were slowing down. The clocks were reported as becoming slower and slower until finally they stopped and the patient became acutely psychotic. That kind of experience is what is referred to in psychodynamics as the classical sense of impending fragmentation of the whole mental works, found in patients approaching the beginning of a schizophrenic episode and even sometimes an organic psychosis. What is interesting in this case is the expression of this slowing of the mental works through disturbances in conscious time perception, again indicating the close relation of time perception to psychological status.”

“I suppose it is true then,” said Ali, obviously eager to get back into the conversation perhaps to impress Claire, “that psychiatry insists our fundamental perception of time is what Schilder called ‘biological’. That is to say, time perception may be distorted like any other perception; the experience of time is interwoven with emotional factors and the actual biological situation of the percipient.”

“Who expresses this better than Proust,” I replied, agreeing with Marsha’s comment, “in *A la recherche du temps perdu*? As Schilder pointed

out, psychoanalytic psychiatry tends to support Bergson and Proust when they insist that the social or intellectual perception of time is basically tied up with psychological conscious awareness. Or, as Freud said, "The processes of the system *Ucs* are timeless; i.e. they are not ordered temporally, are not altered by the passage of time; they have no reference to time at all. Reference to time is bound up, once again, with the work of the system *Cs*."¹ In this passage we have an integrating viewpoint of extreme interest to philosophy, neurophysiology, and psychiatry. When one juxtaposes the study of neurophysiological time or true 'instinctual' or Bergson's 'real' time, one becomes involved in the investigation of the unconscious!"

Henry then interceded, saying, "But we can't go too far with this integrating viewpoint because there are major faults in Bergson's philosophy. It shows certain serious syntactical and analytical shortcomings. There is beautiful poetic vision in Bergson, but the arguments leading up to the visions are unfortunately often characterized by mere play on words. When Bergson becomes mystical with his concept of 'real duration' scientists should part company with him. The definition of 'real time' is an exceedingly complicated problem, and one must be very careful not to fall into the medieval error of giving a metaphysical 'reality' to such an intangible, and then endlessly discussing it without hope of ever actually gaining empirical knowledge of the subject."

I was delighted that Henry was being civil and apparently engaging in a friendly conversation for a change. Claire asked, "Well Henry, then what do you think were Bergson's important contributions from the scientific point of view?" He replied, "First of all Bergson pointed out how the conscious intellect perceives the flow of time and then he raised the question of the existence of a true philosophical time, which is different from that which our intellectual perception of time would lead us to believe. But his actual argument rests on a confusion between the biological basis for our sensation of the passage of time which tells us nothing about the 'real' or intrinsic nature of time on the one hand, and this 'real' or intrinsic nature of time, on the other."

Ali, trying to focus the discussion on the contributions of psychiatry to our understanding of time, said, "Therefore, we have really three problems: 1) how the conscious intellect perceives the flow of time; 2) the biological basis for our sensation of the passage of time, or what might be called 'primitive instinctual' or 'biological time'; and 3) the 'real' or philosophical nature of time."

I brought up Harry Stack Sullivan's contention that a phasic variation of living between waking and sleep, and of physiochemically conditioned recurrent needs and satisfactions is basic and primary in human life. It is easy to see that the infantile prototype of time sensation may arise from such

phasic variations. Lewin similarly cited the original infantile repetitive situation of hunger, oral satisfaction, and sleep, which suggests the same kind of basis for the instinctual primitive sensation of the passage of time.

“These theories could be used to explain why there is a difference in time perception when the normal processes of conscious awareness are disturbed,” said Claire, “This difference could be understood on the basis of the regression that occurs under such conditions of psychic disturbance from normal intellectual perception of time to the primitive biological sensations of time.”

I added, “Freud in *The Interpretation of Dreams* suggested that the psychic system has a direction and that excitations traverse the system in a certain temporal order. Organization in time of conscious awareness seems to be based on this ordered flow of psychic processes. When the excitations in the system follow what Freud called a ‘retrogressive course’, which is neurophysiologically equivalent to the situation of regression as in conditions of sleep, psychosis, and so on, one gets the kaleidoscopic mingling of past, present, and future appearing in the conscious. This description is as far as we can go in understanding the variations in time perception that occur under various biological conditions.”

“This does not, as Bergson thought he was doing, reveal the ‘real’ or

‘philosophical nature of time,’” explained Henry, “rather it is a psychological phenomenon with concomitant neurophysiological events. For Bergson, conscious time perception is based on an indigenous mechanism of the intellect by means of which an order is brought into our state of conscious awareness. The intellectual perception of time is tied in with conscious awareness in a way not clearly understandable.”

“Then actually what can be said about the ‘real’ or philosophical nature of time?” asked Ali. Henry answered, “It is embarrassing to admit that centuries of philosophical discussion of the intrinsic nature of time have not yielded more fruitful understanding than is to be found in the famous book XI of St. Augustine’s *Confessions*.”

“There are certain basic propositions about the nature of time,” I said, trying to sum up the discussion. “First, there can be no such thing as ‘absolute time’—time depends on creation, and before that there was no time; in fact the question, ‘Can there be time without matter?’ is a nonsense question. Hawkins and Mlodinow², for example, have demonstrated that time behaves like space and the question of what there was before the beginning of space makes no sense.”

“So the relativistic theory of time in Augustine is more advanced than Newton’s dichotomy of ‘absolute’ and ‘relative time,’” trumpeted Henry.

Ignoring his obvious attempt to put down science, I continued, "Second, time is something subjectively known but not explicable in a language we can understand without knowledge of current theoretical physics. But Augustine in holding this view is being too extremely subjectivist; perhaps one should simply say that time is something subjectively understood but only indirectly or partially explicable in public language."

"So the past exists in the present only as memory traces distorted by the subjective personality of the individual?" asked Claire, and without waiting for an answer she added, "If I understand it correctly, this point of view avoids the play on words and confusion of Bergson between 'real time' or Newton's 'absolute time' and the intellectual perception of time and is supported by modern philosophy and psychodynamic psychiatry." "Definitely," replied Henry, "Time is measurable in scientific terms only when projected by the intellect into some kind of succession, usually related to space." I thought to myself that this does not solve the question of the existence of 'real' or 'absolute' time, it just moves it to metaphysical contemplation.

I was about to speak up when Sema asked for our attention. She was sitting at the front of the bus with a microphone, as is typical of tour guides, dressed in the same dark tight fitting slacks with a white blouse and black high heeled shoes. How she planned to walk around in these I could not

imagine. She asked us to look out of the left side of the bus where a large lake was appearing as we drove along. "This lake," announced Sema, "is a salt lake in the Anatolian plain. In Turkish it is known as *Tuz Gölü* and is very similar in characteristics to the famous Dead Sea salt lake. We are now about seventy miles due south of Ankara. *Tuz Gölü* is a catchment basin for run-off water and as a result during the summer months it becomes dry, desolate, and parched with salt deposited from precipitation. But unlike the Dead Sea, it is shallow and during these few months salt cake can actually be collected from the lake as solid briquettes."

Here Edward, always the businessman, spoke up for the first time on the bus, loud enough for everyone to hear, as was his habit. Clearly he had done some reading in preparation for this trip. He said, "Historians and archaeologists have found it difficult to grasp the economically important trade and caravan routes that passed by this lake and have ignored reference to these salt sources. Almost never mentioned is the strategic and critical commodity, salt, which might have explained the considerable effort and resulting prosperity for those who exploited *Tuz Gölü*. After it rains this lake could be more than three times greater than the area of the Dead Sea."

"Not only that," added Sema, "On the salt layers of *Tuz Gölü*, storage facilities are now being developed for natural gas. Turkey is hoping to avoid its dependence on Russia for natural gas imports, one of the main reasons for

criticism of Turkey's energy policies by the Americans. And quietly Turkey is also importing natural gas from Iraq." I saw Edward make a note on his elegant leather-bound pocket writing pad

This impressive lake was the only major attraction on the road from Ankara until we reached Cappadocia, a bus trip of about four hot bumpy hours. As we drove into the Cappadocia area, the famous formations that one can read about in any geology book appeared. Millions of years ago ancient volcanic mountains spread their volcanic ashes over this entire area. Over time, this ash was beaten down into a heterogenic tufa and then for thousands and thousands of more years the winds blew and the rivers snaked through the lands. Perhaps one of the most horrendous erosion events of all times formed the geological area called Cappadocia. The hills of volcanic tufa were used to carve out fortresses from which the inhabitants could defend their lands from the threat of an approaching army. The whole region is dotted with strange "fairy chimneys," rock-hewn houses, and so on. There are surrealist landscapes of rock cones, capped pinnacles and fretted ravines, in colors ranging from warm reds and gold to cool greens and grays. Dwellings were hewn from the rock as far back as 4000 B.C.E. Remarkably, the mineral-laden volcanic soil is very fertile and so Cappadocia is a primary agricultural region with fruit orchards and vineyards. Its main industry now, however, is tourism—when there is peace in the area. The name Cappadocia does not usually appear on maps, for it forms a rough geological triangle starting about

160 miles southeast of Ankara, between Nevsehir, Kayseri, and Nigde, with the main sites in an even smaller triangle marked by Ürgüp, Göreme and Avanos.

Cappadocia is along the trade route that connected the East and the West and also is along the road taken by Arab armies as they advanced against the Byzantine civilization. So during the seventh through the twelfth centuries C.E., the people of this area were under constant threat of marauding armies of all sorts. Early Christians needed sanctuaries to hide from persecutions by the advancing Romans. For this reason the Christians who inhabited these lands excavated and constructed two massive underground cities and a number of other smaller ones. Some of these underground cities are almost unbelievable. For example Derinkuyu's city goes at least twelve to eighteen floors underground (the numbers depending on which guide is speaking) and includes over 1200 rooms. This underground haven provided shelter for ten thousand people in times of danger and connected by an underground road of ten kilometers to a sister city with eight floors and perhaps the same number of rooms. Hermetic religious sects took to the hills and carved out chapels, which they decorated with frescoes. Whole monasteries were carved out of hillsides and habitats were carved out in such a way that thousands of caves became homes. Even one full day of visiting would have been long enough to give us at least an impressive overview of the area, and that was the plan. I hoped to convince the group

that these underground cities with their large population of individuals formed an excellent metaphor to Freud's vision of the unconscious with its buried population of unacceptable thoughts that nevertheless were very much alive and forcefully pressing on the preconscious for admission.

For those who were willing to go underground we planned to visit these places and also the rock-hewn chapels. Some of the art in these chapels was destroyed by orthodox believers in Islam called iconoclasts, a destruction of art that lasted until the fourteenth century. The frescoes of these chapels depict the lives of Christ and his followers described according to the beliefs of the orthodox Christian church.

It was in this restricted area that we hoped to spend the next full day walking and talking and exploring and discussing how the geography of the area symbolizes the geography of the human mind and how the endless wars and destruction and comings and goings seem to go on throughout history in a relentless manner. I knew I could emphasize in this discussion the power of archaic sadism or, as the Kleinians might put it, the death instinct turned outwards, which I hoped to then discuss as representing a confusion on their part of what Freud meant by the death instinct. At any rate, as Sema told us, the history of Cappadocia is the history of man's inhumanity to man. It was probably seriously settled first by the Hittites about 2000 B.C.E., although there is a Neolithic fresco that was found dating to about 6000 B.C.E. From

about 5000 to 4000 B.C.E., Cappadocia was ruled by a series of small but independent kingdoms. In the golden age of Anatolia at the beginning of 2000 B.C.E., Assyrian trade colonies were established in the area. The tribes that settled at that time were the Hittites. The Hittites were then conquered by the Egyptians and the Assyrians and finally the area fell under the sovereignty of the Persians between the sixth century B.C.E. and the arrival of Alexander the Great.

Cappadocia was then ruled by the Macedonians until Alexander died, after which the residents of the area attempted to form an independent kingdom, which soon fell to Roman rule in 66 B.C.E. and became a province of the Roman Empire. All this warfare and strife along with the streaming in and out of the nomadic Turks made Cappadocia a dangerous place to live and precipitated the formation of the fortresses and underground cities. I was also hoping to draw some parallels between the development of the human psyche and the historical situation in Cappadocia, setting the development of the psyche from birth to early adulthood parallel to the multi-layered history of Cappadocia from its early settlement to the fall of the Roman Empire. But it was not to be.

We arrived late in the day at our “Club Med,” a rather unpretentious series of cabins with a swimming pool. Everyone agreed that a rest period would be in order, after which we would assemble for dinner and discuss our

plans for the next day. As everyone began to scatter I cornered J. and asked her to come briefly to the bar and have a drink with me. She was tired and annoyed but attempted to be courteous. Even while dressed in casual baggy tourist clothes J. radiated for me what Plato called “the Form of the Good,” the essence of beauty, an angelic presence. And on earth or in heaven, she will always be in my mind that way. We sat down at a table in a corner where I hoped we would not be disturbed. I quickly sensed her mood and realized I was going to get nowhere by trying to be romantic, so instead of that I pulled out of my pocket a quotation that I had brought along hoping to read to her at an opportune time. It was from a letter by Samuel Johnson, one of the great minds of all time, written in 1782:

DEAR SIR,

It is now long since we saw one another; and, whatever has been the reason, neither you have written to me nor I to you. To let friendship die away by negligence and silence, is certainly not wise. It is voluntarily to throw away one of the greatest comforts of this weary pilgrimage, of which when it is, as it must be, taken finally away, he that travels on alone, will wonder how his esteem could be so little. Do not forget me; you see that I do not forget you. It is pleasing in the silence of solitude to think, that there is one at least, however distant, of whose benevolence there is little doubt and whom there is yet hope of seeing again.³

“Who are you trying to fool Martin?” retorted J., “You are not talking about friendship, you want a lot more and that is the trouble and the problem! You want to be the love of my life and at the same time keep on with your

own life project and life curve. This seems to me like narcissism in the extreme. You say that you cannot live without me but you live quite nicely without me indeed! Maybe you should get your act together and find someone else who is more malleable to your wishes. I have my hands full with a very unhappy marriage and great financial problems; why do you wish to put more pressures on me?" She sighed, and paused a moment, crossing and then uncrossing what I knew were her shapely legs hidden in the wrinkled brown trousers. Then she went on, "I know that I am drawn to you and want to be close to you but at the same time I am very ambivalent and find that you violate some of my deepest beliefs about how a person should conduct their life. I am confused and I am distracted and I am tired and I want to take a nap so let us talk later."

I was somewhat taken aback by the vehemence of this response, and realized this was not a very appropriate time to discuss the matter further. So we agreed to take our respective rest periods. J. went off to her husband in their room and I remained sitting in the bar alone, thinking and also feeling rather sorry for myself. I could not bring my mind to relax.

Soon Ali came by and asked if he could join me. As the youngest and most energetic of the group he did not need much of a rest. Ali was a man of impeccable manners, with a kind and gentle disposition, under which there appeared to be a strong wish to succeed in the secular world. Clearly he

wanted to continue the discussion on the bus. He called the waiter and offered to treat me to a cup of strong Turkish coffee, but I did not think that would be good for my heart so I politely refused. Ordering one for himself, he asked me, "You have written a number of books and papers on existentialism and depth psychology. Could you tell me more about your interest in existentialism?"

I noticed he seemed to be trying to ingratiate himself with me, but to be kind I replied, "As a clinician I am interested in existential anxiety. It has both a neurotic and a realistic aspect. The neurotic aspect comprises existential concerns and anxiety coming from the projection or the externalization of unresolved narcissistic conflicts and along with it the rage at narcissistic wounding. On the other hand, there are realistic grounds for existential anxiety, making this a complicated problem. For example, Kierkegaard said that as servitude decreases in the age of science, we have the time to begin to ask questions like 'What's it all for?' . . . so I think existential anxiety is a normal part of the human condition. But a healthy person is not preoccupied with it, because the neurotic aspect of it, the narcissism, has been transformed in the normal person into acceptance and hopefully, wisdom, as Kohut tells us. If this does not take place, then it becomes a vehicle for the expression of pathologic anxiety and narcissistic rage, in extreme cases even murder, as in Camus' novel *L' Etranger*. As such it leads to a stage called existential melancholy, existential deadness, or existential despair. The best

literary examples of that are in Kierkegaard's journals, and there are many other innumerable literary allusions to it and existential treatises and novels.

"In our own discipline of psychodynamics I⁴ have written about 'existential deadness' following the theories of Federn. He introduced the concept of *Ichgefühl*, or ego feeling, which has since been neglected. Its absence refers to the lack of what Winnicott called 'good enough holding' in infancy. If good enough holding does not take place, the individual feels this deadness and many patients complain of this sense of deadness. The antidote they try to use is usually passion. Very commonly one sees patients complaining of a great sense of deadness, and wildly involving themselves in passionate adventures or the quest for excitement in order to tranquilize the sense of deadness. These may be either dangerous physical adventures or searching for ecstatic passions or drug states of some kind.

"The state of severe existential melancholy is always pathological, and, if I am correct, the treatment for this would be the successful working through of narcissistic conflicts. Often this is impossible because only a small percentage of people try to get treatment for these things. If it is impossible, then a person is, to a certain extent, bound to be damaged and that person can only use what I call pacifiers. Of course we all need these pacifiers to some extent since there is only a quantitative difference between neurotics and normal persons, and existential anxiety is a realistic as well as a neurotic

problem. It partakes of both.”

“What are these pacifiers?” asked Ali.

“Above all, the exchange of warmth with loved ones as much as possible. Or devoting one’s life to helping others. Modern theoretical thinking, as in the earlier work of Kohut, says narcissistic libido and object libido take different developmental pathways so it is possible to exchange some warmth with loved ones and to render service to others even though one has narcissistic damage.”

As I launched into this discussion of existential anxiety and pacifiers I vaguely had the realization while I was talking that it seemed I was talking about myself. Now, lying helplessly alone in this bed in the intensive cardiac care unit, I know I was. For me, insight came too late.

I continued, “Then there are delusions as pacifiers. These may be various, speculative, political, and religious systems in which one simply consoles one’s self; for example, that the utopia or the millennia lies just over the horizon. There is also simple stoic endurance. Aurelius’s *Meditations* (more correctly translated *To Himself*) is my favorite example of that: *Sustine et abstine*.” “What’s that?” asked Ali.

“Abstain and endure. There is also immersion in aesthetic appreciation,

art and literature. Other pacifiers in the sense that I am using the term involve such things as immersion in puzzle solving, whether it be science, mathematics, chess, serious research in any discipline, or a Sherlock Holmes adventure. In all of these you take yourself out of temporality, out of time. So the concept of time or temporality is central in all forms of existential thinking.

“That is to say, the historicity of mankind is the primary problem a person must overcome if he or she is struggling with existential melancholy. Usually pacifiers are combined in all of us to some extent but whether they work or not is really not much up to the individual. It depends primarily on that person’s autonomous ego capacities. Success of the pacifiers also depends on what Harry Stack Sullivan called the ‘clamor’ of the repressed, constituting, for example, in Kohut’s terms, grandiose exhibitionistic needs or the desperate search for the idealized parental imago. If the clamor is too much, the pacifiers don’t pacify enough and the person doesn’t overcome the melancholy and anxiety. Probably commitment and engagement are most essential; here is another contribution of existentialism to modern psychotherapy. In examining a patient, the lack of commitment to anything is an important mark of psychopathology.

“Existential thinking suggests a view that is somewhat different than the scientific approach to humanity. It is a command to strain one’s capacity to

the utmost. Another way to put it is that the human is always more than the sum of his or her parts. It is not just a matter of accepting a human for what he or she could be, for no matter how much you know about a person, that person is probably more than that. So you can never reach a thorough, scientific, technical and completely dissected understanding of a person. And that 'more' is always what you are reaching for, but you never completely reach it. This kind of attitude helps in maintaining respect for patients, an approach to patients in contrast to a compulsively detached observer status in which one picks the person apart piece by piece."

Ali seemed impressed, although I don't know how much he understood. He inquired, "Is this taught to residents in psychiatry in the United States? We hear very little about it here, and most of our training is in psychopharmacology which is insufferably boring." I responded, "It is extremely difficult to present existential aspects of psychiatry and psychotherapy to American residents in psychiatry. They even resent reading anything about it. In a sense this confirms what Jaspers and Heidegger claimed. We are so immersed in the scientific approach that when someone presents a different view it is almost impossible to really grasp it and we fight against understanding it."

"Would you expect this attitude to differ in a person trained in Europe?" asked Ali. "Yes, it is different if you go to the continent of Europe. If you talk to

colleagues on the continent about psychotherapy using these concepts, you don't encounter the same kind of opposition and puzzlement. But if one has been immersed in scientific training for many years—biology, chemistry, physics—it is extremely difficult to make the transition to the language of the humanistic imagination.”

At this point the rest period was over and the group began filtering in with the expectation of having a drink or two before dinner. By the time Ali and I had finished our *tête-à-tête* conversation everyone was present and within hearing except for Claire, who, contrary to her usually reliable behavior, did not appear, and it was getting quite late. As they wandered in, everyone drew up chairs and listened as I continued to pontificate to Ali, “If you talk to psychiatric residents today, you quickly discover how harassed they are. And it isn't their fault. There is so much for them to do that there isn't time for reflection of significant depth. Furthermore, I strongly suspect most practicing psychotherapists don't take enough time to reflect about what they are doing and why. Throughout your professional life you have to discipline yourself to make time to reflect; it doesn't happen just by itself. There is so much harassment in the modern world—what Heidegger calls ‘immersion in the they’—that unless you watch out you don't give yourself any time to reflect. The problem, even beginning in medical school, is that students are confronted with an enormous amount of stuff they must memorize. They are very frightened of course, because if they do not do it

they are graded down. So those without superlative memories must spend much of their time cramming information.”

Gertrude picked up the theme. Looking benevolently at Ali, she said, “Doctors don’t receive much training in human relationships, although actually they get more presently than when I went to medical school. For example, until recently doctors didn’t know much more about sexuality than the uneducated layman. It never occurred to anyone until recently to give a course to medical students on just sexual techniques and information about masturbation and achieving orgasms. It was somehow assumed that medical students would know all about it. One study pointed out that medical students had as many misconceptions, prejudices, and ignorance about sexuality as the ordinary layman. I have known women medical students, especially years ago, who could delineate the anatomy of the female genitalia to perfection on any examination but who did not know the location of their own clitoris.”

I endured a lot of uncertainty about Gertrude. She seemed somewhat unsure at this point of the trip regarding whom she wanted to spend time with and, although she was easy to get along with, it seemed that she was putting in a lot more effort into improving her appearance, while some of the rest of us had already begun to look shabby from the vicissitudes of travel. One thing was certain, she was smart and trained well in the west coast

tradition of psychoanalysis, with much of it influenced from the work of Bion and the current fashion of emphasis on the interaction between therapist and patient. I felt that something was going on inside of her that she was not sharing with anyone, not even her partner Sarah, who seemed to be evolving into a rather cold and distant but very intelligent academic.

The soft spoken Pearl seemed to be paying unusually close attention to Gertrude and, in one of her quiet contributions to our conversations, she now turned to me and remarked, “Martin, you must have in mind Karl Jaspers, a psychiatrist who turned philosopher. He had bronchiectasis—a malformation of the bronchi with sacs at the end of the bronchi instead of the normal bronchioles. In those days it made you very prone to lung infection, so he was told he would have a short life (actually he lived into his eighties). So during his psychiatric residency he was not given the usual duties of a resident; he was given half-duties, which turned out to be the greatest thing that ever happened to him because it gave him ample time to reflect.”

This gave professor Sarah a chance to show off her erudition again: “Jaspers’ thoughts about ‘Being’ are the product of these reflections. He was a borrower; he used poor terminology and was muddled as a thinker. But he brought up the concept of the “cipher.” He borrowed it from Kant but used it differently and perhaps they both took it from St. Bonaventure’s doctrine of ‘exemplarism.’” This was too learned for many in the group and they wanted

to know what it meant.

Not to be outdone by Sarah as a teacher, I told the group that if they wanted to get an idea of what a cipher is, the simplest and most pleasant way is to read, or I hope reread, Tolstoy's novel *War and Peace*. A cipher is something occurring from time to time in flashes, giving you the sense of transcendence. It can be used, if an individual wants to use it, for reaching a sense of something over and above our sense perceptions. For example, in *War and Peace* the most typical cipher is the sky. Indeed, at almost every critical moment in *War and Peace* the sky appears—for example, at the point when Prince Andrew hopes to be like Napoleon at the Bridge of Toulon. He takes the flag, goes forward and tries to lead the regiment in an attack. He's hit by a shot, falls over on his back, drops the flag, and realizes he has missed his narcissistically sought opportunity to be a hero. On his back he sees the sky and has a typical example of a cipher experience. Or would a skeptic say he is having a delusion? At any rate Tolstoy describes what goes through Prince Andrew's mind when he is hit:

What's this? Am I falling? My legs are giving way", thought he, and he fell on his back . . . Above him there was nothing but the sky—the lofty sky, not clear yet, still immeasurably lofty, with grey clouds gliding slowly across it. "How quiet, peaceful and solemn; not at all like I ran," thought Prince Andrew—"not as we ran, shouting and fighting, not at all as the gunner and the Frenchman with frightened and angry faces struggled for the mop: how differently do those clouds glide across that lofty infinite sky! How was it I did not see that lofty sky before? And how happy I am to have found it at last! Yes! All is vanity, all falsehood, except that infinite sky.

There is nothing, nothing but that. But even it does not exist, there is nothing but quiet and peace. Thank God.⁵

George, who was listening intently to me, mused out loud for the group's benefit, "The sky keeps appearing at crucial points in the novel. I don't know whether it's deliberate or not on the part of Tolstoy. He's a fantastically good craftsman. For example, the exact opposite occurs at the time Pierre finally confesses his love to Natasha. He goes out and looks into the sky and what does he see?—the great comet of 1812! The sky appears at other times. When Nicholas is first under fire, the initial time he faces death in military action taking the Bridge at Ends, just for a moment he looks up and instead of seeing the fighting scene, he sees the panorama of nature and the sky. There are many references like that. This is what Jaspers (and I certainly agree) calls a cipher—it often tends to appear at certain critical points in one's life."

Edward was getting bored listening to us, and he was tired from the bus ride and he looked it. As an answer to George he loudly quoted Sartre's statement, "Metaphysics is the art of bewildering oneself logically." But I wanted to defend Jaspers, one of my favorite psychiatrists, so I retorted, "And how do you unbewilder yourself? Perhaps you need to try what is called ontological commitment. Jaspers named this *philosophische Glaube*—philosophic faith. This is not so difficult to grasp if one is willing to think it through. The world as one knows it must be grounded in something! Now the nature of that 'something' is a very big and unanswered question indeed. But

if one does not accept that the phenomenological world is grounded in something, then one is forced into some very difficult views, such as solipsism or various forms of logical positivism, views which, as is now well known, contain internal contradictions—Henry, can you help us?”

Henry, glad and rather flattered to be called upon explained, “You are simply saying that the phenomena studied in science must be grounded in something, and that something is usually called Being. However the problem is that Being cannot be approached without a method. Yet if the method of science is all that is used, one cannot approach Being at all. A big problem has been to find a method by which it is delineated, and by which we can approach this ‘something’ that the world is grounded in.”

“This, in my opinion,” I thought, “is Heidegger’s great contribution. I was very impressed with Heidegger’s pointing out the ‘error’, as he calls it, in the movement from pre-Socratic to Socratic philosophers. Heidegger wants to return to Heraclitus and Parmenides who concentrated on this ‘something’ that the world is grounded in. Heraclitus thought it was fire, but I don’t know whether that is a mistranslation or at least an excessively literal translation. It is very difficult to understand exactly what Heraclitus is talking about. I will ask Henry to discuss him at a later time. What we have of Heraclitus’s writings are only fragments—a hundred or so fragments. The legend is that Heraclitus was so angry that nobody paid any attention to this ‘grounding’ he

was talking about, that he committed suicide. I don't believe it.

“Heidegger makes statements like: ‘How is it that in this age where so much thinking is going on, we are not really thinking?’ Try that out on residents in psychiatry and you’ll have quite an experience because it just doesn’t make ‘sense’ to them after a lifetime spent in science. Heidegger’s idea is that in reducing things down to their distinct and separate ‘scientific’ essences, one is missing the boat. It is actually moving away from what is essential. It is moving away from Being, Existence, and also from the notion that Being as ontological grounding has any specific investment in any individual. This latter notion has to either be taken strictly on faith, or one must accept Freud’s position that it is simply an illusion based on hope for an omnipotent parent. But Heidegger had a point about our moving away from Being in this era of technology.”

To the group I said, “The difficult topic here is about ontological grounding, that some might, like Heidegger, call Being, which we know nothing about directly nor can we approach it by the method of science. As Sarah just told us, it was really Kant who started this. Kant writes in such a dreadful style that he is today insufficiently appreciated. He started what we call modern philosophy. He began in many ways the foundation of modern psychiatry because Kant’s ‘Copernican revolution’ directed our focus onto the mind of the observer. Instead of saying there are things out there, and the

mind has to find out about them, he says you can only learn about 'out there' by studying the mind, because only things with certain features out there can be known by the mind. The mind already imposes a screen or filter. He makes a division, then, between the 'observed' phenomena on the one hand and their source on the other hand, that he calls *noumena*, offering us the beginning of modern concern with ontological grounding and leading to considerable dispute and confusion.

Sarah seemed to have drifted off while I was talking and then remembered her comment about ciphers. She added, while Edward tried to stifle a rather loud yawn, "Another example of a cipher that Jaspers gives, and that I think is very important, is the cipher found in the total immersion in the work of any one of the world's great creative persons. He advocates, for example, 'to not read about the history of philosophy, but rather to pick one philosopher (or philosophically minded scientist like Einstein or Bohr or Darwin or Freud and many others), any one you like, a great one, and totally immerse yourself in that philosopher's work. Enter into the mind of that great thinker as he or she gropes over a lifetime with universal human problems. After you get so completely conversant with this person's life work, you begin to feel this sense of transcendence, this forward force, which you don't get by studying only some of a person's works or the history of philosophy, science or art. You can experience the same thing if you want to totally immerse yourself in all the works of one great artist like Rembrandt or Goya or of great

authors like Dostoevsky or Tolstoy. If you immerse yourself in *War and Peace* and *Anna Karenina*, as well as Tolstoy's many other writings, you get the same enormous sense of a man or woman groping for something that he or she cannot quite find. And not a single character ever finds it in Tolstoy's books. Even Pierre settles for domestic tranquillity."

Many in the group began to get restless with all this talk about philosophy and literature, so I added, "If the therapist is totally immersed in the mind of the patient, as he or she watches the mind of the patient unfold and do its work, the therapist may also experience a cipher. That is, the therapist experiences the groping process, the unfolding process in the patient, the intrinsic unfolding of another human being, the forward force in a person toward health. The patient may experience it also within himself or herself. Sometimes patients do and sometimes they do not, just like a person may watch the sky and sometimes may experience it as a cipher and sometimes not. The same is true for other ciphers, such as immersion in natural, or mathematical, or aesthetic beauty."

"How interesting it would be to compare this with and connect it to Bergson's concept of *elan vital*," said Henry. But no one responded.

"Is a cipher, then, a related synonym to 'insight'?" asked Ali.

"No. Insight is different because you can put insight into terminology.

Cipher is an experience. It's an experience in which you have an option—to either use it or not use it. If you use the cipher experience you can get the approach to a sense of transcendence. If you don't use it you won't get that approach or sense of transcendence. I'm suggesting that the cipher method is a better method, for example, than what Heidegger recommends. To put it in an oversimplified way, he says in his early work, go off all by yourself and listen to the voice of your 'conscience', using the term in an entirely different sense than we use it in psychiatry. This method cuts you off from people and it cuts you off even from nature and animals in a sense. It's a very schizoid type of existence . . . Heidegger in his lonely hut in the forest. The ciphers that I'm talking about are almost the opposite. But you have to feel it. It's not the kind of thing that you can teach somebody. All you can do is tell somebody it's a possibility.

"And this is what I tell my psychiatric residents about existentialism, Ali. I merely explain that here is an additional alternative way of grasping the patient. You can use it or you don't have to use it. You must decide for yourself, make a choice. And it's very hard, if someone is trained strictly in science, to know what this is all about. The British empirical philosophers thought it was a lot of gobbledygook. So I'm not trying to sell it. I'm just saying it is a possibility. If you want to use it—O.K."

"It certainly is a lot of gobbledygook," said Edward grimly.

Now dinner was served and I noticed that Claire was still not there. Edward, her husband, went to find her. We had just begun to eat a sumptuous meal when he came out visibly upset and reported that Claire had a terrible headache. As a physician and the tour leader, I asked permission to visit her in their room and Edward agreed. When I went into her hotel room I found Claire lying in the dark, face down and silent. I asked her how she was feeling and to my dismay she responded that she had the worst headache that she ever had in her life. The pain was almost unbearable and she was nauseated and could not even sit up, much less come to dinner. The phrase “worst headache I ever had in my life” rang my medical training bell and I became concerned about the possibility of a subarachnoid hemorrhage. We were in Cappadocia, far from any medical center, and Claire seemed so extremely sick that I was afraid something terrible had happened. She could not even swallow the standard NSAID analgesics because she tended to vomit them up. She just wanted to lie quietly in the darkened room. There was no history of migraine or any other headaches like this. I could feel myself beginning to sweat with worry. My heart began pounding irregularly but of course I ignored it.

By this time both Claire and I had missed the attractive and generous dinner that was set out for us by the hotel. I called Lisa aside and explained the situation; by now I was really beginning to trust her and was happy I had let her come along as my assistant. She was energetic and competent and I

knew I could depend on her, even though she seemed rather depressed but hid it well. I felt I could not take the responsibility of continuing the trip while Claire was in this condition. So for the second time changes had to be made in the itinerary! I called New York and contacted our travel agent in the middle of the night and warned him we may have to change around our air reservations due to a possible emergency, while Lisa got on the phone and shifted our hotel reservations. The plan was to go immediately back to Ankara the next day and then continue on to Istanbul if Claire was not better and medical treatment was not available in Ankara. And from there to fly immediately back to New York. The original plan after Cappadocia had been to go next to see the early prehistoric Hittite civilization at Hattusas, about 100 miles east of Ankara. My idea for the tour was to go backwards in time from Ankara to Cappadocia to Hattusas, a kind of developmental study in reverse, which I had hoped would stimulate a lot of talk about archaic aspects of the human psyche. But now I was confronted with what seemed to be a medical emergency.

After a couple of hours of telephoning and annoyance Lisa and I finally got the changes made and we were sitting exhausted in the bar again with a couple of drinks. Suddenly Pearl came out looking for Richard, who she reported had been absent since before the rest period, but who then showed up for dinner and again disappeared. Pearl also mentioned to me quietly that she was getting very uncomfortable around Sarah. It was clear that Gertrude,

Sarah's lesbian partner, was beginning to have an interest in a different possible partner, Pearl. Furthermore, I suspected that Pearl's considerable discomfort was apparently from the fact that Gertrude's interest was stimulating her more than she expected and conflicted with her image of herself. And Pearl still felt committed to Richard.

To add to my confusion, when Pearl left, still searching for Richard, Lisa told me that just as Gertrude had become interested in Pearl, it seemed that Gertrude was also showing some interest in her. Lisa did not like this at all and was not uncomfortable with coldly rejecting Gertrude's lesbian overtures. In the distance I noticed Henry walking in the gardens with Sema and I thought to myself, is it out of boredom or what is it, but people on this tour are beginning to pair off in new liaisons that are bound to lead to a lot of trouble indeed.

Foolishly attempting to break it up, I asked Lisa to call everyone together for an after-dinner seminar and question and answer session in an attempt to stimulate intellectual rather than emotional excitement. Ali, Gertrude, Sarah, Lisa, Pearl, Marsha, George and J. appeared. I wondered why J. had come. Henry, Sema, Richard, and Edward did not show up.

"It is time to get serious," I said as I opened the seminar. "Let us talk this evening about the healing aspects of psychotherapy."

“First of all, the psychotherapist must be a thoroughly trained craftsman. I try to introduce in psychotherapy what I call the field theory of interaction. There are a variety of factors in the therapist and the patient that are important and interact, and they form limiting factors in the success of therapy. The field theory is important because it offers quasi-mathematical forms that one can work with and focuses on the great variety of aspects in psychotherapeutic interaction. One discovers that these factors can be described in two different languages. Even Kant talked about two different nuclear processes in the mind—understanding and imagination. Unfortunately Kant uses ‘imagination’ in at least three different ways. So if you go back and read Kant you are going to get confused.”

“Kant’s German was muddled and very confusing,” interrupted Pearl, who was clearly not very well versed in philosophy.

“Very confusing, but his concepts are important because unless we know that there are two different possible languages, and unless we are able to go back and forth between these two languages, we stumble into many pitfalls. For example, the greatest genius in psychiatry for going back and forth into these two different languages was Freud. He was a tremendously educated man in many humanistic disciplines as well as a tremendously educated man in the sciences of his day and with a photographic memory. If you read his work he is always shifting back and forth. He talks about the

Oedipus complex. This has all kinds of overtones involving Sophocles's play *Oedipus Rex*. He knew that play very well and I bet he read it in the original classical Greek. How many psychotherapists can say that today? He talks about the Oedipus complex, using terms like energy cathexis, libido distribution, and repression—he suddenly shifts to physics, classical Newtonian physics. He can go back and forth in these languages—the speculative book on Moses, on the one hand, and then his very technical works about metapsychology on the other. Freud's followers didn't have quite this much background and they often got confused. And there's still a lot of confusion in the literature of psychoanalysis. In fact is getting more acrimonious and worse.

“But the field theory of therapist-patient interaction that I am going to try to explain here today is based on the study of borderline patients, which forces us to it. It doesn't contradict the ideal of classical psychoanalysis.”

“Are you saying, then, that psychoanalysis is the treatment of choice for all people?” interrupted Ali.

“Not at all. I think that psychoanalysis is the ideal. If every patient would form a classical and analyzable transference and could afford to come in four times or five times a week, and there were enough well trained psychoanalysts to go around, that would be what I would like to approach as

the ideal. But it's only the ideal—we're limited in many many ways and the limitations are increasing. If you work with borderline patients you just don't find the classical transferences very often. You have to deal with many other disruptive factors. Almost all authors are in agreement on this and I will tell you more about it at a later time. But formal analysis of the intense transference offers the best opportunity of producing real basic structural change."

"Characterological? Structural?" asked Ali.

"Structural. Characterological change is already a consequence of structural change. When I talk about structural change I'm talking about intrapsychic relationships between the id, ego, and superego. To use the old metapsychology, which I still happen to prefer as a valuable metaphorical tool for understanding psychic processes if you do not take it too literally, shifts in amounts of energy that are bound to various forms of ideation. To really shift those energy cathexes around fundamentally, and to free up energy for healthy living, you have to have the formal analysis of the transference. You have to resolve the infantile conflicts. Characterological change might be a result of that just like changes in neurotic symptoms might be a result of that."

Marsha began, "One of the problems with change in psychotherapy is

that when a person changes, they tend to blame the last thing they did as causing the change. That's only human nature. So if you get somebody to make any kind of a shift, even if it's a temporary shift, chances are they will blame that shift on something they just did . . ."

At this point the seminar was disrupted by shouts and vulgar curses! A tremendous row was taking place between Edward and Richard in the hall, so loudly that we could all hear it clearly in the seminar room. At one point I was afraid that Edward would actually physically attack Richard. It was unclear at that point why this altercation took place. It ended with mutual threats toward each other and a lot of abuse and hatred being expressed in the most unsavory language. To my relief, they then went their separate ways. Nobody wanted to find and ask either of them what was going on, and I felt it was better to leave them alone. Pearl, Richard's wife, seemed oddly unconcerned, and I again began wondering about the state of their marriage. Clearly, in spite of my best efforts, matters were beginning to get out of my control as I decided to give up on the seminar and the evening ended on this sour note.

It was several hours before things quieted down and everyone finally went to their rooms. George and Marsha sat with me for a while. They seemed to sense the problems I was facing, or at least some of them. George was taking it all in on the trip so far, and he looked tired but not discouraged. Marsha had retained her optimistic demeanor and, although she was the

oldest lady on the trip, she had a certain dignity that made her continuously attractive and young in spirit. They felt that I needed some cheering up and engaged me in polite conversation about this and that, trying to distract me. They were very kind, but it did not work. I had a lot of trouble sleeping that night because of what I thought were multiple premature ventricular contractions and some angina. I was very worried about what would happen tomorrow and genuinely frightened about Claire's condition.

The next morning, to complicate matters further and make them more miserable, it was raining very hard in Cappadocia. There was no hope of visiting the various sites even for a few hours before we drove back to Ankara. Some of the braver members of the party went out with umbrellas and tried to look around, while others sat gloomily in the bar. I asked permission to talk to Claire again and received it from Edward.

When I went to her room I found her crying bitterly, but her headache seemed to be much less incapacitating and it finally became obvious what it was all about. After some discussion she admitted that Richard had made several sexual passes at her on occasions while Edward was out of sight. She felt she had to tell her husband. When Edward found out he forced an ugly confrontation with Richard, as Claire had forecast to me that he would do, and as a consequence the cohesion of our group was now broken up because the hatred was scathingly permanent between the two men. Claire was very

upset and worried about what her husband would do to Richard. At the same time she was intimidated by Richard, who was a big authority in the New York psychoanalytic community and could seriously compromise her career and even her residency in the field of psychiatry. It was a terrible dilemma for Claire and she could not imagine how it could be resolved. I tried to be supportive and urged her to have patience. Sometimes things resolve themselves.

I was relieved that Claire was not physically in need of urgent medical help and I now understood the origin of her headache but it was too late to change our plans back to way they were. So once more on the bus we went and once more to Ankara.

While on the bus I managed to sit next to J., in the hope of continuing our conversation and ameliorating her irritation with me. In my palpitating heart I felt a terrible longing as I sat next to her, as if a great treasure had been placed in my proximity and yet I could not touch it. It was not from fear of Henry that this prohibition took place but from J.'s own repeated insistence that I not possess her. What made it so painful was I knew that deep down J. wanted me to possess her, wanted me to run off with her, wanted me to be with her forever. I could sense it and I was not wrong. But I was producing in J. a situation of conflict that she was beginning to find painful. Her self-preoccupied husband perhaps knew nothing about it or perhaps he sensed it,

but he could only assume that she was being irritable and unpleasant. This gave him more ammunition to blame all his problems on his apparently obstreperous wife.

I said to J., "Life without you is inconceivable to me. And I believe that life without me is inconceivable to you. Why can we not compromise and work out some kind of arrangement where we get to spend at least some intimate time with each other?" J. responded, "It's very simple Martin. I do not wish to allow myself to become sexually involved with you because I think it is wrong on the basis of my marriage vows. It is not that I do not want it and it is not that I do not love you. But I simply cannot bring myself to do anything like that. What this precludes is the possibility of physical intimacy and you have made it very clear that mental intimacy is not sufficient for you. I think a friendship would be something I could handle but it is obvious that you want a lot more and this I cannot handle."

She continued pensively, "Last night the toilet went crazy in our room. It began flushing itself over and over again and we had to call the night man who came and simply shut the toilet off. In order to use it we had to turn it on this morning and it continues to be crazy. Imagine," said J., "a psychotic toilet! What will come next on this trip?"

As the bus bounced its way toward Ankara, I felt guilt over stirring up

J.'s conflict and bitter disappointment over her resistance to my most urgent pleas. As I thought over the many unpleasant events of the past 24 hours, I remembered Kant's letter in which he reflected on the meaning of life:

Every human being makes his own plan of destiny in the world. There are skills he wants to learn, there are honor and peace, which he hopes to get from them, and lasting happiness in conjugal life and a long list of pleasures or projects make up the pictures of the magic lantern, which he paints for himself and which he allows to play continuously in his imaginations. Death, which ends this play of shadows, shows itself only in the great distance and is obscured and estranged by the light, which envelops the more pleasant places. While we are dreaming, our true destiny leads us on an entirely different way. The part we really get seldom looks like the one we expected, and we find our hope dashed with every step we take . . . until death, which always seemed far away, suddenly ends the entire game⁶.

Notes

¹ The Unconscious. *Standard Edition* 14:187

² *The Grand Design*. N.Y.: Bantam Books, 2010.

³ *The Life of Samuel Johnson*, by James Boswell. N.Y.: Modern Library Giant, undated, p. 1005.

⁴ *What Constitutes the Patient in Psychotherapy*. Northfield, N.J.: Jason Aronson, 1992.

⁵ Trans by L. and A. Maude. N.Y.: Simon and Schuster, 1942, p. 301-2.

⁶ *Kant, a Biography*. by M. Kuehn. Cambridge University Press, 2001, p. 126.

Chapter 5

Hattuşuş

We reached Ankara quite late in the day. Everyone was kind of quiet and disappointed. That night I went to bed very worried, depressed, and alarmed. I wondered if I had misdiagnosed the situation with Claire by ultimately attributing her severe headache to psychological factors. I was very concerned about the increasing tensions in the group and worried about how to maintain group cohesion in the teeth of so much rage and lust that was beginning to show itself. This tour was turning out to be far more complicated than I had expected because of difficulties in human relations that kept interfering with my original plan.

Tossing restlessly in the Ankara hotel room I dreamed of a monkey kept in a cage, and not well kept, and making a mess. Waking up, I thought this monkey represented my unconscious and the fact that because of it my choices were never quite right and my ambitions were never quite accomplished. I thought it represented my disappointment over having done so poorly in my lecture in Ankara and also that in conducting this group I have made a mess, although I realized it was not all my fault. I was very demoralized already. Professor Kozturk should not have invited me! One of the problems of Turkish psychiatry, I thought, is that the discipline, as is increasingly happening in the United States, is in a psychopharmacological

world. But I don't believe in blaming others for my shortcomings. Professor Kozturk must have known that my orientation was psychoanalytic, not psychopharmacologic, and rightly felt his students needed some teaching on psychodynamics since they were getting none in Turkey. If his group spoke English poorly, he should have had simultaneous interpretation available. He did not seem to have realized what it meant for me to be preoccupied with a difficult tour group and untutored in Turkish lecture traditions. He also must have been very disappointed.

Plagued by my anxiety all night, I was the first one down to the hotel buffet breakfast. Claire soon appeared; it was obvious that her headache was gone and she was feeling whole again. We discussed her concerns over Richard's behavior and she requested permission to rest in the morning while Professor Kozturk lectured to us about our next destination, Hattuşaş. Of course I agreed and she returned to her room. Soon everyone appeared except Richard; nobody seemed to know where he was. When Professor Kozturk arrived along with Ali, I felt it would be bad manners to keep him waiting while everybody searched for Richard so I asked him to begin his talk to the group.

I pointed out in introducing him that we were now about to move backwards in time and immerse ourselves in some of the earliest and archaic civilizations identifiable in human history. The area that we were going to

explore, central Anatolia, was already founded in Neolithic times from 8000 to 4500 B.C.E. and was characterized by early agriculture. It was followed by what was called a Chalcolithic age about 4500 B.C.E., so called because copper started to be used as well as stone. The early Bronze age was next, around the third millennium B.C.E. At that time the people of Anatolia knew how to make bronze, which they used for their weapons by mixing copper and tin.

During this era they lived in settlements surrounded by defensive walls and had reached a more advanced level of civilization. The Anatolian area became the culture and art center of the ancient Near East. Actually it was an important development in civilization, occurring as early as the upper Paleolithic age, during which Anatolia was densely populated. This began the creation of artistic objects that relate to man's intellectual life. Multicolored paintings, sketches and scenes in low relief made on cave walls, and various objects including statues have been discovered, as well as personal ornaments using fish bones, shells, and the bones and teeth of assorted animals.

Professor Kozturk now took over. "Hattuşas," he began, "is a city that dates from the Bronze Age and the time of a sophisticated culture of people called the Hatti. Around 1700 B.C.E. a mysterious people known as the Hittites appeared in Anatolia after crossing the Caucasus and from beyond the Black Sea. These people dominated the Hatti and established Hattuşas as their

capital, building one of the major empires of early civilization. The Hittites were actually of small physical stature, probably less than five feet, and were very muscular and strongly built. Their society was divided into free people and serfs, ruled over by a sovereign and a high priest who became a god after death. They followed a polytheistic religion. Their gods bear striking similarities to the Greek gods. Sema plans to lead you on a tour of the ruins in Hattuşaş."

Ali interrupted, "Will we also go to Boğazkale, a few kilometers north of Hattuşaş?" he asked, "and what about Yazilikaye, about two kilometers west of Boğazkale that served as the religious sanctuary or temple complex for the city of Hattuşaş? In fact," added Ali, "The name Yazilikaye means 'rock with writing' because the natural rock walls here are covered with the carvings of Hittite artists dating from about 1300 B.C.E."

"No," replied Professor Koçturk firmly, "We do not have enough time in an afternoon to do this and anyway the main objects that were found in these sites are now in the Museum of Anatolian civilization in Ankara that the group has already visited."

"To continue," said Professor Koçturk rather testily as he did not like to be interrupted, "the old Hittite kingdom from about 1700 to 1500 B.C.E. was often diminished due to domestic power struggles, but during the second half

of the second millennium B.C.E., in the time of King Suppiluliumas they regained their dominance and created an empire that became one of the most powerful states in the Near East, the others being Egypt and Babylon.”

“But the site of Hattuşaş, the capital city of the Hittite civilization, contains only ruins that consist mostly of reconstructed foundations and a few other things” complained Ali. Sema then spoke up, “You will see that the site itself is strange, almost eerie, exciting for its ruggedness and high antiquity rather than for its extant buildings and reliefs. The entire road looping around the site is about five kilometers long and can be walked in about an hour plus time spent exploring the ruins.”

Professor Kozturk was becoming a little irritated by these interruptions and he simply continued, “Hittite history has come to be conventionally divided into two periods: the Old Kingdom (c.1700-1500 B.C.E.) and the Empire (c.1400-1200 B.C.E.). It is with the Old Kingdom that we have the beginnings of written records. Furthermore, there is confusion about the term ‘Hittite’, which was never a name claimed for themselves by any Anatolian people. It is a Biblical name and was first loosely associated by historians of the nineteenth century with a pre-Christian people in Syria and Asia Minor. Gradually new sources of historical information about this enigmatic people became available. The search for ‘Hittite’ inscriptions and relief carvings of the sort that often accompanied them led to the discovery of the huge ruined

city of Bögazköy and a rich array of sculptured reliefs in the neighboring rock sanctuary at Yazilikaya, the places that Ali mentioned. It became possible from cuneiform tablets to identify the city of Hattuṣaş as the capital of the 'Land of Hatti'. For five centuries beginning in about 1700 B.C.E. this great nation occupied an increasingly large proportion of central Anatolia and for convenience its people still today are referred to by the old biblical term of "Hittite" to distinguish them from the native Hattians whose country they occupied and dominated. The mainstream of Hittite history ended abruptly in about 1200 B.C.E. in an upheaval which is only partially understood."

Sema added, "We have very little evidence about the psychological characteristics of the Hittites because time has deprived us of their most revealing monuments and buildings. All we have of their architecture are ground plans of stone temples and hints of sculpture in the round. Hardly a single example has survived, so you will see only the relief carvings on rock faces and wall slabs, with here and there some much-weathered portal figures. The rest of our knowledge of Hittite plastic art depends mainly on carvings in miniature, clay modeling, and the craft of metalsmiths."

The Hittites were a very military people," continued Professor Kozturk, ignoring the other comments, "There was a great weakness in their political system by which wealth was concentrated in a few great cities, leaving the rural districts impoverished. In my opinion it is impossible to escape the

conclusion that the Hittites effectively managed to ruin central Anatolia and many of their near neighbors as well.” He concluded, “The ending of the Hittite empire, however it did end, occurred around the time that is usually ascribed to the date of the Trojan war in 1200 B.C.E.”

This congruence I thought was especially interesting and then, more aware of Turkish professional sensitivities now, I thanked Professor Kozturk very much for taking the time to visit us from his busy schedule in order to lecture us a bit on what we were going to see. I told the group they had about an hour to get ready and soon they would find Abdul the bus driver in front of the hotel waiting to transport them.

Then, as they began to disperse, suddenly everything fell apart. We heard a precipitous screaming from Claire’s room! Edward, Henry, and I went running there to see what happened. We found Richard had somehow gained entrance to the room, probably by bribing the hotel clerk, and was trying to force his affections and sexual desires on her. Edward pushed the frightened partly undressed Claire out of the way and leaped onto Richard in an obviously serious attempt to choke him to death. There would have been a murder right then and there; Edward was very strong. But George, Henry, and I pulled him off and as we did so, exerting our greatest efforts, I experienced a crushing pain in the center of my chest and right elbow, but I ignored it the best I could.

By this time the entire group had come to Claire's room to see what happened and, as Claire hurriedly pulled on her bathrobe although she was still trembling, Richard, shaking with rage, suddenly and fiercely turned on me!

"You!" he shouted, "are the cause of all this trouble. You never should have led this tour or any other tour. Everything you do ends up in a mess. How arrogant of you to think you can give lectures to our group and guide us around. What psychoanalytic institute trained you? Who do you think you are?!" Attempting to smooth his now rumpled Brooks Brothers suit, he became angrier and angrier as he raged at me.

"I don't think you even have the background or training to guide anybody to anything," he insisted. "From the beginning I have noticed that you have had your eye on one of the women here and you are no person to talk to me or chastise me about what I do. There is no reason for me to stay with this tour any longer and I am going to demand a return of my fees that were paid for it. I am leaving the tour right now and returning to New York where I intend to broadcast to everyone I can what a pompous sciolist you are! If I have my way your reputation in the psychoanalytic and psychiatric community will be completely ruined; you have made an implacable enemy of me!"

Turning to Henry he shouted, "Take that monster Edward out of here!" and turning to Pearl, his wife, he said, "Let's go." Pearl, somewhat to my surprise, refused to go. She insisted in her soft voice, "Richard, you have no quarrel with Martin and you are the cause of your own difficulties. You had no business attempting to force your affections on Claire or barging into her room, acting like some character out of a Hitchcock murder mystery! I am staying with the tour and I think you are wrong. I think that you are attempting to blame others for your own impulsiveness and lack of control."

"Have it your way, bitch," snarled Richard, "I will deal with you when we both get back to the United States. I am packing my suitcase and will pay the bus driver Abdul, that dirty heathen, an extra hundred U.S. dollars to drive me to Istanbul, where I will catch a plane to New York." Turning once more to me he said, "When I finish with you your name will be mud in the whole psychiatric and psychoanalytic community, believe me." He added as an afterthought, "Was it really necessary Martin, to bring this German woman with us to Turkey? Don't you think we know what your intentions are toward her?" When Lisa heard this she did not wait for me to answer. She walked directly up to Richard and slapped him sharply in the face. Richard stalked out, threatening his revenge on us all.

After he stormed out, Claire began sobbing inconsolably. "What will become of my residency?" she wailed, "This man seems so destructive, so

almost paranoid, that I am afraid he will ruin my career.” I tried to be reassuring although I did not think she was wrong, and I asked Marsha to remain with Claire while the rest of us left her room. I hoped that would give her a sense that she was protected by a warm and motherly older person.

“What is the matter with this crazy Richard?” asked J. when we got out in the hall, “Are all psychoanalysts crazy like this?” Ali said, “Martin, you have to get us together and talk to us about the kind of person Richard is. We need some understanding about what is going on.” I thought this was a good idea and was about to reply when the Turkish police appeared. Between George, Ali, and I we were able to explain what happened and they seemed satisfied to let the matter go. But since this was the second outburst from our group, the hotel was now buzzing with rumors and excitement, and I was sure the hotel manager had called Professor Kozturk.

It took some time before everybody could calm down. The sudden shock had been traumatic for all of us. But I was already feeling a little better from the chest and elbow pain and thought I owed it to the group to at least give them some kind of formal discussion that would perhaps make sense of Richard’s behavior for them. Also a sort of post-traumatic decompression was needed. Marsha emerged, explaining that Claire had taken a tranquillizer and a nap to recover from her assault. She and George, the retired senior analysts who were respected by everyone in the group, as I had hoped were very

helpful in defusing the situation and allowing everyone to ventilate. So, once more, after an hour or two of this ventilation and a drink or two on me at the hotel bar to calm everybody down, we trooped wearily back into the meeting hall just off the lobby of the hotel where I was expected to talk about the matter.

On the way to the meeting hall I stopped in my room and took a couple of nitrostats; I was not in atrial fibrillation at the time but I needed some help with the angina, which did indeed subside shortly after I took this medication, leaving me only with the usual side effect I get from nitrostat, a splitting headache. I returned to the meeting hall where the disconsolate group had assembled and where some coffee and cookies appeared, provided by sympathetic hotel employees. The ordinary Turkish people are very hospitable, as I found out repeatedly on this tour.

As we prepared to begin the discussion, Professor Kozturk then appeared, obviously summoned by the hotel manager and not at all sympathetic but rather extremely annoyed. He preempted the meeting by announcing that he was leaving us. "Martin," he said, "what kind of *mélange* have you brought to Turkey? I am insulted that we have had to witness such behavior on the part of a number of your colleagues here and I have decided that I want no further dealings with you. Not only is the hotel management very upset but also I just got a call from Abdul. Your Richard offered him one

hundred dollars to drive him to Istanbul but when they arrived he gave Abdul only ten dollars, insulted his Moslem religion, and ran off. This is disgusting! Abdul has a large family to support on very little wages. He would dare not pursue and attack an American tourist; the police would arrest him and apologize to the American, and Abdul would lose his job. Tourism is big business in Turkey, you know that.

As he spoke Professor Kozturk seemed to get angrier and angrier. Obviously thinking about “the ugly Americans,” he concluded, almost red in the face, “You are on your own on this tour; your grant covers the hotel bill, the cost of the bus, and Abdul’s wages and you have paid Sema so she will remain with you as a guide but you are no longer officially welcome guests and I do not wish to maintain our acquaintance any longer.” Crestfallen, Ali timidly and respectfully asked, “May I stay and listen?” Professor Kozturk answered, “You may, but be wary of these people. They come from a different culture and they behave themselves in barbaric and devious ways.” With this kind of admonition, the elderly professor, clearly offended by both the interruptions during his talk earlier and by all this chaos and embarrassment in the hotel, abruptly left us. So now we were just another group of tourists, no longer honored guests.

I gathered my wits together because I had made a commitment and owed an allegiance to the group to help them understand whatever I could

about the archaic roots of human psychological development and the basic greed, lust, and aggression that has unchangingly characterized our species from Paleolithic times to the present day. This was moreover the topic of the day, to culminate in our visit to Hatussas. The pain in my chest had returned with Professor Kozturk's denouncement and withdrawal as our host, but I was determined to ignore it and continue to honor my commitment to the group. I could feel my heart jumping around irregularly but I refused to pay attention to it.

Without commenting about his abrupt withdrawal, I began, "An extreme example of the exaggeration and loss of control of these basic human drives can be found in the study of what I regard as the borderland patient, and that is what I want to talk to you about now rather than trying to make up a psychodynamic profile of Richard, who after all is not my patient and whom I do not know very well."

"Thank you," said his wife Pearl, "that is a very decent response seeing as how he spoke to you. It is good of you not to attempt retribution and lay that sort of thing on our sad group. But please give us an exposition or at least an outline of what a borderland patient is and how to treat such patients¹."

I explained, "I will begin with their manifestations of lack of impulse control, paranoid proclivities, rigidity and impaired adaptational capacity.

Such patients are in an area of psychopathology that can be understood as neither neurotic nor psychotic. They are labeled 'borderline personality disorder' in DSM IV or as 'psychotic character disorder' by some authors. Yet they never become overtly psychotic and some can even attain considerable success in life and may be exceptionally brilliant and talented.

"The borderland patient comes in all varieties. The most flagrant ones typically have a history of repeated attempts at therapy of various forms, and of interrupting treatment occasionally by such behavior as sudden flight to another city or dramatic actions in which the patient ends up in a hospital emergency room. These actions may involve a suicide attempt, self-mutilation, appearance of sudden florid psychotic or paranoid symptoms (which may disappear in a few hours), very serious sounding threats to commit murder or suicide, drug or alcohol binges, bizarre pain requiring hospitalization for 'tests,' and sometimes even exploratory surgery. Their pain may be accompanied by vomiting, fever, and other symptoms suggesting organic pathology.

"One unifying principle of the borderland group is the chaos of their lives or at least of certain sections of their lives. This chaos can even be produced by their simply slowly or suddenly doing nothing! When this happens, as the patient sits around with an attitude of *mokatsu*, a kind of sneering detachment, those around the patient correspondingly become

aware that the structure of his or her or life is falling apart, and the most complex and excited reactions take place, often with the patient sitting calmly at the center of the storm. A dramatic portrayal of this situation appears in Kazan's 1967 novel, *The Arrangement*.

"Chaos can more commonly be produced either by dramatic acting out, sudden emotional dyscontrol, intense addiction episodes, or by the appearance and fluctuation of a variety of puzzling neurotic and psychosomatic symptoms. Under stress, delusions and other psychotic symptoms may appear. At the same time these patients never break down and never show the classic schizophrenic picture for more than a short time even under the most trying conditions. For this reason they cannot be described logically as 'borderline schizophrenics' or 'ambulatory schizophrenics' as they were in the early literature. Also the variety of their symptoms and behavior patterns, ranging far beyond ordinary neurotic symptoms, rules out the old appellation 'pseudoneurotic schizophrenia.'

"Arieti in 1955 suggested the term 'stormy personality,' which covers some typical characteristics of this group. Such individuals often try all sorts of attitudes and usually do so to an extreme degree. They are often overwhelmed by a sense of restlessness, boredom, and despair over the 'meaninglessness' of life. They verbalize about this at great length. Antoine Roquentin, the protagonist of Sartre's famous novel *Nausea*, illustrates their

oppressive sense of boredom and preoccupation with the meaninglessness of the world. The patients complain of a sense of detachment from people and the stream of life, portrayed with brilliance by Dostoevsky in his depiction of the 'underground man' and by many other authors.

"In spite of the chaos of their lives they do not lapse into chronic classic schizophrenia, and certain other characteristics are typical of the group. Often a whole variety of substances, including barbiturates, marijuana, tranquilizers, amphetamines, and many other drugs and alcohol have been self-administered. The sources of these prescriptions are well meaning and often co-dependent relatives, general physicians, medical specialists including psychiatrists, chiropractors, and dentists. At times these materials are 'stuffed in' in unbelievable quantities and at other times there is complete abstention.

"The reason for the use of these substances seems based on the nature of the symptoms. These often appear to have a vague organic origin—for example all kinds of pains, twitches, fatigue, and so forth, which were thoroughly investigated by their various therapists to no avail. Then some medication or medical regimen would be prescribed; the patient would follow it for a while without relief, then exaggerate it in quantity or simply add it to previously prescribed regimens and medications. The medicine cabinets of these patients often are a well-stocked pharmacy. In desperation some patients take one or more of everything in their medicine cabinets, often

mixed with alcohol! Sometimes this buildup of tensions, weird symptoms, and hyperingestion as observed does not occur dramatically but gradually over the years, with an accumulation of complaints, symptoms, medications, and doctors. Careful history taking is necessary to reveal the pattern.

“Furthermore, these patients usually impress their physicians as either ‘bad’ or ‘undesirable’ patients, or are characterized by even less complimentary terms. They represent the diametric opposite of the classical ‘good’ patient. They appear late or not at all, fail to cancel, abuse the telephone, and sometimes fail to pay their bill. They often find the points of irritation that rub the therapist the most and then lean hard on these points. They may take a very well controlled attitude of superiority, appear above the common herd of people—in which they include their therapists and colleagues—and then suddenly have outbursts of rage or indiscreet behavior. In doing so they stir up a conflict in the therapist who wants to be a kind, generous, and understanding physician exchanging mutual benevolent respect with his or her patients.

“Searles discussed the very serious matter of the guilt stirred up in therapists as a consequence of their healing vocation coming into conflict with their rage at such patients. Many ‘accidents’ occur in the therapist’s office; ashes are spilled on the rug, favorite pictures are brushed up against and knocked down, stuffing is nervously ‘picked’ out of chairs, ash trays and

little statues are knocked off tables and broken, furniture is scratched and has food spilled on it, and so on. The neophyte therapist with his or her shiny new office and freshly out in practice is the special victim of this. The older and more tired therapist can expect to be awakened at night or have many demands for extra sessions or changes of time if his or her schedule is crowded. There is always a 'good' reason, and the patient is profoundly insulted if the demands are not met.

“Various attempts have been made to characterize and distinguish this group of patients from the psychodynamic point of view, without much success or agreement. Kernberg² prefers the term 'borderline personality organization' for this group, and calls our attention to certain typical features. These are, for example, a lack of anxiety tolerance, lack of impulse control, and lack of developed sublimatory channels. It is most important to note that oral aggression plays a crucial role in the psychodynamics, and there is a premature development of oedipal conflicts as an attempt to escape from the oral rage, with a subsequent condensation of pregenital and genital conflicts. Kernberg points out:

Their emotional life is shallow. They experience little empathy for the feelings of others, they obtain very little enjoyment from life other than from the tributes they receive from others or from their own grandiose fantasies, and they feel restless and bored when external glitter wears off and no new sources feed their self-regard.

He stresses their 'pathology of internalized object relationships,' as he calls it, and 'intensification and pathological fixation of splitting processes' in the ego functions of these patients. Well, maybe, a rather fancy way to put it.

"From the point of view of the therapist, trying to establish clear-cut distinctions between 'character disorder,' 'borderline schizophrenia,' or borderland (borderline) patients is not so important as achieving some understanding of the nature of the damage to their ego structure. A lot of research is now appearing on the emotional instability of these patients, approaching the problem from a neuropathology standpoint. Either this is built into their nervous system and regulated by genetic factors and/or there is a major role to be attributed to the vicissitudes of basic trust in the earliest phase of life, with a lot of disappointment and subsequent oral aggression that makes the development of object constancy in life very difficult indeed.

"Borderland patients are really quite common in our current culture. Many of them do not enter psychotherapy but form a burden on the rest of the medical profession and often on society, although they may hide their pathology behind considerable accomplishments in the business, political, and professional world. Sometimes in desperation they are finally referred by their family physician to a psychiatrist. This results in a triple disappointment. The referring physician is disappointed because the patient does not get better and continues to be a harassing patient and an

embarrassment, the patient is disappointed because the psychiatrist's medicine and psychotherapy do not help, and the psychiatrist is disappointed because of now having a 'bad' patient to continue to deal and struggle with. Also, the psychiatrist is angry at the referring physician for sending the patient—yet the psychiatrist is unable to express the anger because referral sources form the basis of private practice and are not to be offended. The psychiatrist is especially, of course, angry at the extremely difficult and recalcitrant patient, raising the guilty conflict mentioned above. He may also become afraid of the patient, knowing that the patient is subject to dramatic emotional outbursts and impulse dyscontrol which can threaten the therapist both personally or by engaging in dramatic public displays or accusations about the therapist.

“The psychiatrist is faced with the problem of trying to cooperate with the referral source by appearing to care for a 'bad' patient, and yet trying to protect one's self from the disruptions and frustrations the patient continuously presents. Some interesting destructive solutions to this problem have come to my attention. These fall into three categories:

1. The psychiatrist accepts the referral and schedules the patient. After the initial interview has shown what the therapist is up against, the patient is seen thereafter either for very short periods—as short as five minutes in the case of one psychiatrist I know, but usually for 15 minutes to 30 minutes—or for very infrequent periods—once a month, for example

—or both. And the psychiatrist often drives the patient into a rage by usually refusing to answer the patient's endless telephone calls.

2. The psychiatrist fills the session with medical examinations, discussion of quasi-organic pathology, prescription of drugs, and follow-up of drug regimens with dose adjustments, trying new medications, and further prescriptions for side effects from the medications.
3. The psychiatrist over-identifies with the patient and devotes amazing amounts of time and attention to rescuing efforts. Even a festive evening dinner for the psychiatrist with his or her family and friends can be spoiled; one psychiatrist of my acquaintance rushed home from a dinner party because he had promised a patient he would be home when the patient called that night at a 'critical' time when the patient was to confront some relatives. (The patient never called.)

"Empathic perception of the restricted ego functions and of the deep inner emptiness of these patients as a consequence of a possible unfortunate genetic endowment and severe damage to the mother-child symbiosis in the first year of life could enable the therapist to set limits and maintain an investigative attitude in spite of a bombardment of provocations. If the therapist is reasonable, has a healthy self-esteem, and is consistent and determined, therapy does get started, even though it sometimes appears impossible at first. The other essential ingredient to getting the patient into

treatment is proper interpretation, again based on empathic perception. This usually centers around the patient's emptiness and loneliness and defenses against these painful feelings.

"The therapist must have the capacity for great patience and be alert to signs of his or her own frustration and fatigue. A careful regulation of the therapist's personal life is necessary, as these patients produce so much frustration, psychological drain, and irritation that personal self-gratifying fantasies (or even behavior) tend to break through and seriously interfere with the evenly hovering attention that empathy requires. It also helps if there is at least something the therapist can genuinely appreciate, like, or admire about the patient. This should not be too hard to find, assuming the therapist is basically healthy and likes people. At times one finds a thoroughly unlikable patient; it is best not to begin work with them.

"The therapist cannot hide behind a professional mask but must be prepared to engage emotionally with the patient from the very beginning. This usually involves expressing appropriate reactive anger at the patient that, if it is justifiable and expressed in a civilized way, can be quite helpful to the patient (and therapist), but also it can involve the expression of esteem and encouragement. As the intensity of the symbiosis heats up, enthusiasm and even professional caring are verbally expressed. For a symbiosis is what forms if the therapy has moved forward. The patient becomes 'wrapped up' in

the therapist and the healthy therapist is able to be experienced eventually, after defenses have been worked through, as a 'real object.'

"Tarachow³ speaks of this as the therapist intruding himself or herself into the life of the patient and staying there. He feels that when this takes place the therapist and patient have entered each other's lives as 'real, serving as infantile objects to each other'. Thus the therapist uses himself or herself as a building block in the oft-times jerry-built structure of ego functions and defenses the patient has erected.

"Freud taught that the ego is a precipitate of abandoned object-cathexes. These internalizations (or introjects—this is not the place to discuss the difference; see my dictionary⁴) can assist or impede ego development. The early internalizations have a crucial bearing on how the person handles problems and forms a sense of identity. Giovacchini pointed out that the child initially internalizes from his or her parents not only values and limits as in superego formation, but styles and techniques required to solve the problems of routine living. When the child forms an internalization of a parent, this includes many elements of the relationship that involve methods of mastery. As Boyer and Giovacchini⁵ described it, the inquiring but anxiety-free, consistent, and calm attitude of the therapist is 'introjected' into the patient, enabling the development of an observing ego that can deal with archaic malignant introjects.

“There must develop, at least to some extent, through empathizing with the patient’s suffering, a warm ‘deep inner attitude’ toward the patient, even though it is not openly expressed. The therapist should be willing to be of use not directly by doing things for the patient, but through at times actively offering his or her own ego-techniques as models for identification. This may require directed questioning of the patient by the therapist to encourage the patient to focus on his or her techniques of dealing with certain problems and comparing these with the therapist’s approach. The therapist can offer a healthier model through a very limited and carefully chosen willingness to reveal his or her own personality and techniques of living. At the same time, in spite of what some contemporary analysts propose, I feel the therapist should not burden the patient with details of the therapist’s personal life or problems unless it is an emergency, an obvious pregnancy, and so on. This warm inner attitude and healthier set of ego techniques are hopefully internalized as well as is the therapist’s calm investigative attitude.

“Nacht⁶ discussed the importance of the ‘deep inner attitude’ in the psychoanalyst. She wrote:

The analyst must limit himself to a certain way of being *present*, with an underlying, deeply-felt attitude compounded of acceptance, availability, and the sincere desire to help the patient. Only this deep positive attitude can completely reassure the subject; he may detect it in the words of the analyst, but it is certainly even more in the unspoken intangible quality of his presence revealing the real character of the counter-transference that the patient will be able to find the security which he needs so much. If he

does not find it, the transference neurosis runs the risk of being melted into a permanently sado-masochistic relationship, and therefore becoming incurable.

This inner attitude towards patients cannot be phoney. It can develop only if it is based on a successful symbiosis with the therapist's own parents or through a successful training analysis treatment experience of one's own. No amount of intelligence or education can make up for a lack of it.

"With the above factors present, a symbiosis does develop, and the patient becomes 'locked' into treatment. This corresponds, however, only to the opening moves of a chess game. As complicated and difficult as the openings can be in chess, the need for true skill and artistry of the game appears in the middle of it. On the other hand, what happens in the middle game is directly based on what has taken place in the opening!

"In the opening suggested above as a solution to the many problems posed for the therapist by the borderland patient at the start of the treatment, a therapeutic engagement is slowly and eventually developed in the face of a myriad of disruptive factors, based on the occurrence of what I have described as a 'locked-in symbiosis.' It is a symbiosis because the therapist must in some way be gratifying his or her own needs through this relationship. It is a locked-in symbiosis out of the desperate inner emptiness of the patient, who, once he or she can be encouraged to clamp down like a bulldog on the therapist, will not let go if the object is a healthy one, even

forgiving the therapist's occasional mistakes.

"Clinical experience indicates that unless the therapist offers a 'real object' relationship to borderland patients, the therapy simply falls apart. The patient does not continue to come since he or she is too empty and too desperate especially at the beginning to do anything but feed, and is too overwhelmed by needs to be able to look at them except for short intervals during the therapy session. The opening of the therapy must lead either to a 'locked-in symbiosis' or to a breakup of the therapy, which, borderland patients being what they are, can be very dramatic.

"We must look further into the middle phase of therapy to study the consequences later on of the 'locked-in symbiosis' in those therapies that have not broken up. Some authors seem to feel the consequence of such a symbiosis cannot be a basic change, and if any benefits occur they are based on the delusion of the therapist's omnipotence. Therapy based on delusions of the therapist's omnipotence cannot have a favorable outcome if the patient remains in therapy. Sooner or later this omnipotence cannot be preserved even if the therapist tries deliberately to do so. But the root of the 'locked-in-symbiosis' lies in the patient's wish for the therapist's omnipotence. It does not follow that therapy will break up if the therapist is realistically not omnipotent.

“The consequence of the discovery by the patient that the therapist is not omnipotent is the development of an ambivalence toward the therapist, which eventually must be analyzed. Being of use does not imply direct ministering to the patient’s needs but does imply reasonably correct interpretations based on genuine empathy for the patient, a therapist with a relatively healthy superego and set of ego mechanisms for adaptation freely offered to the patient for internalization—just as children internalize these patterns from the parents as discussed above—and a healthy and at least passably warm deep inner attitude toward people and toward the patient, especially characterized by tolerance and magnanimity, that we hope the patient will also internalize. This is one’s ‘physicianly vocation’ and is very important. Saul² explains how the child must live on in the analyst as in everyone else, but we expect that child to be ‘a little less fractious’, less unruly, less disruptive.

“The objection to directly ministering to the patient’s needs comes from the fact that such behavior by the therapist is usually really ministering to patient-vectors in the therapist. It is not an appeal to the patient’s ego function and does not result in ego-expansion, but rather this approach tends to reward the illness and prolong the stormy chaos of the patient’s life. This chaos is based on the appeal for direct help with a concomitant need to fail the helper as the passive-aggressive expression of the rage aspect of the patient’s ambivalence toward the helper and/or the patient’s unconscious

masochistic tendencies. It ends in mutual disappointment and forms the most common series of events taking place between neophyte therapist and borderland patient.

“I have had numerous experiences of ‘bailing out’ residents who became entangled with borderland patients in two most common ways—Ali, take note!! These entanglements are (a) the resident attempts to deal with the anxiety produced in the resident by the stormy nature of a borderland patient, by taking a strictly interpretative approach and refusing to engage in any form of emotional or personal relationship or interaction with the patient. The resident comes to the supervisor with numerous intellectualizations about ‘psychodynamics’ but without any evidence that he or she perceives and empathizes with the patient as a human being with feelings who would react negatively as we all would to the ‘professional’ very cold and sterile approach of the resident, and (b) the eager resident becomes entangled with the whole administrative bureaucracy of the clinics as well as the patient’s family and employer in attempting to ‘help’ the patient directly—who repeatedly fails to follow through after all the resident’s efforts. The best signal these and other miscarriages of the therapy are happening occurs when the resident shows open hostility or passive aggression (for example, not showing up for supervisory sessions) at the point when the supervisor suggests that such direct ministrations and other enactments may not be so useful. Unless the resident can be made to see what is going on, the therapy

breaks up, with the resident giving up after repeated failures by the patient to improve. Or serious acting out and boundary violations may take place, a well known special problem in the treatment of borderland patients.

“Such experiences with neophyte therapists strengthen the conviction that detached calm interpretations alone cannot hold borderland patients in treatment. The therapist has to walk a tightrope that I label the ‘crucial dilemma’ in the treatment of borderland patients. On the one hand, directly ministering to patient’s needs prevents ego expansion by fixing the patient on the omnipotence of the therapist and encouraging dependency and stalemate. On the other hand, therapy without ‘parameters’ cannot hold the patient in treatment. The crucial dilemma the therapist always faces is where to draw the line.

“Because of the psychodynamics of these borderland people, the therapist soon finds himself or herself facing this crucial dilemma regarding the choice from session to session between staying with a strict ‘technique’ of psychotherapy or following an ‘inner attitude’ which may even at times lead to temporary abandonment of previously learned techniques of psychotherapy, albeit within ethical boundaries. Improvement seems to occur steadily when the sessions are treated as human encounters with specific technique shoved in the background. Here is where some knowledge of existentialist concepts is valuable. Watching neophyte therapists it is easy to

show that hiding behind rigid adherence to technique or rules of treatment is a defense against feeling the anxiety and rage engendered in them by the massive pregenital strivings of borderland patients. Analogous to this is society's tendency to treat such people with rigid rules, for example, 'The army will make a man out of him.'

"Dangers in allowing a predominantly intuitive approach to such patients are also present, in that the therapist must genuinely know himself or herself and not engage in countertransference acting out. These patients are eager to act out or 'act in' in the therapy, and they pose a threat to the neophyte from that point of view alone. As in the instance of Richard, they are capable of unpredictable, self-defeating impulsive behavior, and blame all their troubles on others. Sometimes they suddenly produce a situation where a therapist has to make an instant decision about what to do. Two extreme and unusual examples suffice: one patient came in the office and told me she had a gun in her purse and was going to take it out and shoot me. Later she admitted she just wanted to see how I would respond. Another patient I found lying face down on the floor of the waiting room when I opened the door to let her in to her session. It turned out there was nothing the matter with her, but she was hoping I would try mouth-to-mouth resuscitation.

"The key factor in improvement is the therapist's empathic grasp of how the patient perceives the therapist's interpretations and personality and how

the patient experiences and responds emotionally to the world around. And of course, the therapist's ability to emotionally respond to all this without predominantly using the patient for his or her own needs is crucial. In a similar fashion, the therapist must be able to draw away and permit 'individuation' at the proper time. Careful study of case material shows that it is actually possible to keep a 'secondary process' check on what is going on and so to avoid a wild and disorganized therapy. A relative degree of neutrality is possible with all patients. The more thoroughly understood the patient is, the more accurately it is possible to know whether our emotional interaction with the patient is 'on the beam' from session to session. Improvement in these patients appears to be directly related to this emotional interaction and to the degree to which it is consistently genuine, 'on the beam,' and originates from a healthy and positive 'deep inner attitude' of the therapist. This is the necessary background to achieving a proper interpretive understanding of the patient and to the appropriate timing and focus of the communications to the patient.

"In summary, the most common erroneous responses to these difficulties are varieties of attempts to directly minister to the patient's needs, or adopting too detached and analytic an approach. If one can successfully walk a tightrope between these two horns of the therapist's 'crucial dilemma' in the treatment of borderland patients, the patient is able to internalize the warm inner attitude of the therapist, develop better ego-adaptive techniques,

and is provided with a calm investigative atmosphere in which to examine himself or herself. All of these constitute the tools to make a gradual modification in the power of the patient's basic malevolent archaic internalizations and thereby produce a genuine change in the patient in the direction of cure. Please notice that I did not say the malevolent internalizations can be removed in such patients, only that benevolent internalizations, for example, from the therapist, can reduce their influence and help to maintain psychic equilibrium, impulse control, and improve adaptational techniques."

When I finished this talk, which some obviously found too long and tedious, I suddenly realized I must have had this oration to the group forming in my mind when I thought about Stonewall Jackson, for he was a borderline personality disorder who was able, in spite of a dreadful childhood, to eventually integrate and function as a warrior by total commitment to religion and certain idiosyncratic practices and beliefs.

We did indeed tour the Hittite sites that afternoon but, as Ali had predicted, there was not all that much to be seen beside what had already been described by Professor Kozturk. It became apparent to me, as I stood among the eerie ruins of what was once one of the major flourishing civilizations of the world, how these civilizations come and go while the basic greed and lust and aggression in humans remains the same. The result of

these universal human strivings for power and desires for aggrandizement and sexual dominance, led Spengler to correctly describe the phases of the various cultures and civilizations, always ending with a barren set of ruins. There was no reason in my mind to believe that the same would not happen even to my own civilization, the United States, which is already in considerable trouble from overexpansion and runaway unregulated capitalism. It happened to many powerful empires from the beginning of history to the present time, such as the Athenian empire, the Roman Empire, and the great kingdoms of Egypt, as is well known. In Hattusas, the Hittite ruins displayed another example of the decline from what was once a great military and economic power that dominated the entire area. All that remained here was residing in a museum or fading away as the wind eroded the rocks. We were all rather subdued and depressed by the sight.

I rode back in the bus with J. and the others, and I really felt terrible. Of course a large part of this despair was a displacement from the narcissistic wounding I had endured from first Richard and then Professor Kozturk in public that morning, and to add to my difficulties I felt mild angina on and off and periods of atrial fibrillation. I was trying to ignore these sensations by thinking in more philosophical and universal terms, but all I came up with was a deep pessimism about the human future, quite similar to that expressed at various times by Sigmund Freud.

As Hobsbawm⁸ summed up the 20th century, “In short, the century ended in a global disorder whose nature was unclear, and without an obvious mechanism for either ending it or keeping it under control. The reason for this impotence lay not only in the genuine profundity and complexity of the world’s crisis, but also in the apparent failure of all programmes, old and new, for managing or improving the affairs of the human race.” And now we were in the 21st century with no change in sight. I tried to distract myself from this gloom by talking to J., who was sitting across the aisle from me. I thought to myself of the power of love and how requited love would at least give each of us a brief period of respite from the desperate human condition. It occurred to me that exactly the same words used by Hobsbawm to describe the end of the twentieth century could have been used to describe the situation at the simultaneous disappearance of the Hittite empire and the fall of Troy in 1200 B.C.E.

J. in that situation could certainly not be particularly responsive to my efforts at expressing affection, as her husband was sitting next to her and she did not wish to increase the suspicion of people who, as Richard pointed out, had already noticed my interest in her. My pursuit of J. seemed to be having worse and worse results, and I found myself overwhelmed with longing and desire that was unrequited. At the same time I could not shake the feeling that J. did care for me and was using all her will power to keep anything from happening, especially on this trip where my feelings for her were beginning to

be already apparent to others. I could not take my eyes off of her; she was so beautiful and desirable, like a princess. My heart literally ached for her.

So the long day ended for a disgruntled group, each individual going to their respective rooms and preparing for our next excursion. They were even wondering what I would announce the next morning, because Professor Kozturk was gone and it was up to me to decide what to visit next. The betting was on Ephesus, since the group knew of my great interest in Greek civilization and such a civilization was next in chronological order. That is to say, after 1200 B.C.E. in Turkey we enter the Iron Age, the time of the first Greek colonies in Asia Minor and the great Persian Empire. Artemisium at Ephesus was founded about 550 B.C.E., and this city was another high point in civilization, the home of the great philosopher Heraclitus. More work for Lisa, and many arrangements for her to make!

When I returned to my room, the gloom just would not disperse itself. I felt isolated and alone and unsure of how to go on and what to do. My heart continued to beat rapidly and I felt mild angina. Finally I took a nitrostat and a milligram of Ativan and tried to relax and go to sleep. As I dozed off I had one of the most vivid dreams of my life. This is how I remember it:

APPEARING ON COMPUTER SCREEN:

Instructions: the following data is to be printed out for final check and then to be permanently erased from memory bank.

TRANSMISSION I

From: Royal Astrophysicist on Planet *Phronēsis* at Edge of Galaxy

To: Royal Philosopher on Planet *Noûs* in Center of Galaxy

To the Most Exalted Philosopher: Greetings!

We thought the following information would be of interest to you. Data from a minor planet we have named *Oikoumenē* in a solar system revolving around an insignificant star far off the center of a relatively small galaxy a mere one hundred million light years away from us revealed that during a brief period a series of explosions had occurred on the planet, the final one rendering the entire planet radioactive to a lethal degree. We focused our most powerful ultraradio telescopes on *Oikoumenē* and could discover nothing except a completely desolate landscape. However, long range microfocus nuclear magnetic resonance soundings of the surface of the planet indicated that some odd foreign material or artifacts were present in two relatively small places under the ground. Since we had no explanation for the series of explosions, we hoped a study of this foreign material would help us to understand what happened. So we sent one of our most advanced radiation

proof space ships through a time warp and landed on the barren saturnine planet briefly at the points where our soundings indicated buried artifacts.

This surprising material was found at Site A. close to the planet's equator and in a desert-like area, and at Site B., about half way around the planet from site A. and a considerable distance from the equator rather towards the north pole of the planet. The material at Site A. consisted of a series of many magnificently colored pictures painted on the walls of empty caverns in the ground. These caverns obviously represented some sort of burial tombs having a deep religious significance, since the walls were painted with meticulous care.

At Site B. a shattered trunk or suitcase of some kind was found in a basement-like structure—all that remained of what before the explosion must have been a solid brick building. Apparently this basement was made of thick concrete and when the explosions desolated the planet, the concrete fell on the trunk, preserving its contents. The Site B material consisted of long strips of some kind of tape wound around reels; there were about 30 or 40 of such long puzzling strips, each labeled "VHS Cassette."

We set our most advanced high speed Artificial Intelligence computers to work on analyzing these extragalactic archeological discoveries. It is clear that the material in the basement as well as the material in the tombs were

carefully hidden, either due to their religious importance and/or to keep others from knowing about their presence.

Artificial Intelligence selected as by far the greatest probability that we were dealing with some sort of religion shared by the inhabitants of the two widely separated sites on this planet. Furthermore, an evolution of this religion occurred, beginning at Site A.—in which the contents have been dated to be about 5,000 *Oikoumenē* years before the series of explosions—and evolving to that of Site B.—in which the contents have been dated by our advanced radioactive techniques to have been produced only a decade or two of such years before the explosions.

Our extremely sophisticated computers, which can unravel almost any code and review billions of possibilities in very short periods, soon divulged the information contained in both of these records. Clearly the material at Site A. consisted of primitive visual records in static poses painted on walls of the caverns. Stereotyped ritualized behavior was portrayed over and over again in the paintings. These rituals contained a sequence of events depicting a situation or series of situations in the life of a central king-like figure, who seems to transform from a young individual into an old one and finally into a wandering stereotyped figure, sometimes on a boat in a river. Then this figure is confronted by another stereotyped repetitive figure painted either with a white face or with a green face. This second figure sometimes holds a scale

with a heart on one side and a feather as a balance on the other. Lurking near is a third unusual stereotyped figure, with the head of a jackal.

In addition there are large numbers of two types of insignificant creatures depicted; for simple purposes I will label them *Anēr* and *Gunē*, words taken from some kind of burial tablet fragment depicting similar figures accidentally found on the surface of the planet about 1,400 kilometers to the north of Site A. The figure *Gunē* is smaller and more rounded than the figure *Anēr*, and clearly always has a subordinate role to *Anēr*. I emphasize that the same ritual and sequence of events is repeated over and over again on the tomb paintings.

A surprising and dramatic discovery made by our computers was that the tapes found at Site B. were magnetized and, the code of the magnetization having been broken, yielded when properly transmitted across certain electron beams—a similar visual record! Here again were depicted a series of stereotyped events with no evidence that the individuals in the pictures had any unique mind; that is to say, both in the pictures from Site A. and Site B. there was a structured program of activity carried out without variation over and over again. Only the type of stereotyped activity and the level of sophistication employed in recording the visual images dramatically changed.

Study of this religion shows that the creatures depicted at each site

carried out a ritual characteristic of that site, but with no apparent purpose that we could discern. The ritual at Site A, I have named “dismemberment,” because over and over in many scenes is portrayed the destruction by tearing apart or cutting off of various parts of individuals in one group of *Anēr* types armed with spears and swords by another similar group—with limbs, heads, and bodies scattered all over the ground.

The second ritual I have labeled “insertion,” because in the Site B. pictures, the stereotyped ritual carried out over and over again is of the insertion by either an *Anēr* or a *Gunē* of a curious implement, which is then made to slide in and partly out with monotonous repetition into the head or body of another *Gunē*. The *Anēr* creatures seem to have this implement as part of their bodies while the *Gunē* creatures use some sort of artificial prosthesis for this purpose.

Apparently these religions were extremely popular, because ground evidence around Site A. shows that thousands of people visited this site, and evidence of wear on the tapes from Site B shows that they had been transformed into pictures and apparently viewed innumerable times.

It is clear therefore that we have discovered the evolution of a very primitive set of stereotyped religious rituals on a planet with many mindless creatures who were divided into two groups separated in space and time—

but each group contained members all more or less the same with no unique individuality or self or mind in evidence in any of them.

What we cannot explain at this point are the repetitive explosions.

TRANSMISSION II

From: Royal Philosopher on Planet Noûs in Center of Galaxy

To: Royal Astrophysicist on Planet Phronēsis at Edge of Galaxy

To the Royal Astrophysicist: Greetings!

The universe is full of mindless creatures, comets, and asteroids, all of which endlessly follow predictable paths and are totally uninteresting. Why are you bothering me with trivial information about this irrelevant little planet?

TRANSMISSION III

From: Royal Astrophysicist on Planet Phronēsis at Edge of Galaxy

To: Royal Philosopher on Planet Noûs in Center of Galaxy

To the Most Royal Exalted Philosopher: Greetings!

It is true that these weird little creatures in the visual images appear mindless, have no empathy for each other, and display no unique

individuality or autonomy. But we have discovered by further artificial intelligence computer studies that they had some form of primitive language expressed in the Site A. pictures! It was found that some small pictures on the sides and top and bottom of the large scenes depicted in the tombs in Site A. could, by our most advanced computer analyses, be found to express a message—which they do! The message seems to describe a sort of journey of people who have died and their judgment by a god who is depicted by the creature with the face sometimes green and sometimes white.

A fragment of the message taken from what they label *The Book of the Dead* shows a primitive imagination and the rudimentary beginning of mind and religious inspiration. It tells of KA, an imagined abstract individuality or personality of each creature that *was* unique for each one. This abstract personality had an absolutely independent existence. It could move freely from place to place, separating itself from, or uniting itself to, the body at will, and also, it is claimed, enjoying life with the gods in heaven. This KA is a sort of phantasm, a double of the material substance of each creature—the latter presided over by the figure with the head of a jackal.

What is more significant than this primitive beginning aspiration for an individual self is that the picture language tells us of a third ritual which seems to have been by far the predominant activity of these creatures during their life; I have named this “competition.” Apparently these creatures spent

most of their life in the following manner—the *Anēr* group always dominated the *Gunē* group, but the *Anēr* creatures fought continuously among themselves for what they considered to be valuable. Curiously what they thought valuable was 1) a silly yellow metal, 2) the power to order about innumerable other *Anēr* creatures, and 3) some sort of “possession” of the largest possible number of *Gunē* individuals. Thus, the central king-like figure depicted in the scenes at Site A. was the individual who had the most yellow metal, the most power to order about other creatures, and the most possessions in terms of some kind of ownership of many *Gunē* creatures, the purpose of which we do not understand.

We have also subjected the material from Site B. to careful Artificial Intelligence analysis looking for themes and messages. We have found by watching the expressions on the faces of the two different types of creatures that each type reacts to this material in a different way. All the scenes show the feverish insertion of the curious implement into one end or the other of the *Gunē* creatures with very little preliminaries and no evidence of any feelings of any kind for each other; for some reason they always seem in a hurry to get at it. It is clear from our most advanced psychological studies of these creatures that both the *Anēr* and *Gunē* types are faking their reactions—pretending a pleasure they do not experience—and performing some kind of acrobatics which are not normal or natural to them. This discovery was a great triumph of our computer studies, a challenge to our Artificial

Intelligence! Furthermore, *Gunē* individuals pretend to love some kind of excretion, which comes from only the *Anēr* implements from time to time, but never do they have genuine pleasure from any aspect of the whole experience. What a curious religion!

The central figures in this series of Site B. pictures always perform the same stereotyped ritual and most of the pictures are simply close-ups of parts of their bodies, recorded under conditions that indicate very poor and primitive photographic knowledge. No plot could ever be uncovered from the behavior of these creatures, and there was no sense of character or individuality or anything resembling a self that could be found among them; the ritual shows a complete lack of empathic awareness in all the participants.

Furthermore, a study of the evolution of the religion in space and time from Site A. to Site B. seems to show a generally increasing degradation of the *Gunē* type and a depreciation of them. These Site B. *Gunē* creatures are seen as usually never wearing anything under their one superficial gown. They are depicted as often wanting to perform the ritual with anybody, always, *Gunē* or *Anēr*, no matter who it is; they seem infused and saturated and obsessed with one and only one type of behavior which appears to us to be boring and repetitious—and they are clearly only pretending to enjoy it.

These pictures show no style, no slow working up to anything, no

intimacy, no mental capacities, and no empathic personal exchange of thoughts or feelings of the higher level that we have achieved in our galaxy. The Site B. images, in spite of their far higher level of scientific development in recording techniques, are crude and disappointing and have much less artistic value than the findings from Site A. There is a certain unnaturalness about the whole thing and it appears to be an obsessive ritual at which these people work very hard with no genuine pleasure. Clearly the watching of this ritual had tremendous appeal to the *Anēr* type, but a careful analysis of the *Gunē* individuals shows that watching certain aspects of this ritual also at times appealed to them.

Artificial Intelligence has revealed a composite explanation of why the typical *Gunē* creature would watch this monotonous and boring set of pictures: it seems to have to do with the few scenes depicting foreplay before insertion. These scenes are quite rare when the pictures are of *Gunē* and *Anēr* individuals together, as stated above. The most sensual, artistic, and charming scenes are the ones involving *Gunē* persons only—if they are done well.

Clearly these pictures were made primarily for *Anēr* individuals, apparently produced to meet some need in them. The feelings or gratification of *Gunē* individuals are rarely of any concern unless the subjects of the picture are both *Gunē* creatures. Then there sometimes seems to be a sharing and tenderness not depicted in the other scenes. That *Gunē* creatures must like

these foreplay pictures the best is deduced from the following: all the other series of Site B. pictures, and all the pictures at Site A., show some sort of mastery of *Anēr* over *Gunē* types, and often in addition those at Site B. contain some kind of physical and apparently verbal abuse directed toward one or more *Gunē* persons.

We thought that philosophers would be interested in this information, because we seem to have discovered the evolution of a primitive religion practiced by creatures that appear to have had two ritualistic obsessions during their lives: dismemberment of other creatures and insertion of their implement into members of the other group.

At the same time, the data have indicated that when they were not practicing their religion—which they seem to have done as much as possible—the creatures at both sites spent their existence competing with each other for strange goals that make no sense but were apparently very important to them. Their rudimentary aspirations toward an independent, joyful, creative self seem to have disappeared over the course of their evolution, which represents a regressive development. Can you philosophers apply your wisdom and even more powerful Artificial Intelligence computers to this material to help us explain the explosions on this planet?

TRANSMISSION IV

From: Royal Philosopher on Planet Noûs in Center of Galaxy

To: Royal Astrophysicist on Planet Phronēsis at Edge of Galaxy

To the Royal Astrophysicist, Greetings:

We have reapplied our more sophisticated computers to your original data about the series of explosions on *Oikoumenē* and from this have derived the answer to your question. Over a period of about one hundred *Oikoumenē* years before the final explosion, there were a series of small explosions each of which was increasingly powerful, although the final explosion was far more devastating to the entire planet. We have concluded from this that for some reason these mindless creatures began to “compete” to see who could make the most powerful explosion. At the end perhaps each composite side, (or perhaps the *Gunē* group versus the *Anēr* group?), set off the biggest explosion they could. These explosions set off a chain of uncontrollable nuclear reactions that devastated the planet and bathed it in radiation that prevented any further life to exist.

This confirms our previous impression that these creatures were mindless, since only mindless and preprogrammed creatures would blow themselves apart and destroy the beautiful planet on which they dwell so foolishly and completely.

The history of *Oikoumenē* is already over. Our file on this creature, both

Anēr and *Gunē* types, will now be erased since we have conclusive proof that it does not represent an early form of mind, although we concede there was a beginning rudimentary aspiration in this direction. The *Oikoumenē* events are a manifestation of *Thanatos*, simply another of the many predetermined degeneration and decay phenomena silently steered by *Thanatos* in the universe, at the basis of which is the ultimate proton decay—that our artificial intelligence computers tell us will bring all matter to an end in about fifteen to twenty billion *Oikoumenē* years. We regard the self-destruction of this creature as conclusive evidence that they had no autonomy, no individuality, no self, and no more uniqueness than any of the thousands of little asteroids that endlessly revolve around that same insignificant star in that same minor solar system.

Notes

¹ For details see R.Chessick, *Intensive Psychotherapy of the Borderline Patient*. Northvale, N.J.: Jason Aronson, 1977.

² *Borderline Conditions and Pathological Narcissism*. N.Y. Jason Aronson, 1975, p. 17.

³ *An Introduction to Psychotherapy*. N.Y.: International Universities Press, 1963.

⁴ *A Dictionary for Psychotherapists: Dynamic Concepts in Psychotherapy*. Northvale, N.Y.: Jason Aronson, 1993.

- ⁵ B. Boyer and P. Giovacchini, *Psychoanalytic Treatment of Characterological and Schizophrenic Disorders*. N.Y.: International Science Press, 1967.
- ⁶ Curative factors in psychoanalysis. *International Journal of Psycho-Analysis* 43:206,1961.
- ⁷ *Technique and Practice of Psychoanalysis*. Philadelphia: Lippincott, 1958.
- ⁸ *The Age of Extremes: A History of the World 1914-1991*. N.Y.: Vintage, 1995, pp. 562-563.

Chapter 6

Ephesus

I will never forget my first trip to Ephesus about fifty years ago. As a young and still impecunious physician I took a cheap Greek boat in the March off-season to investigate the famous Greek islands and colonies. The waters were choppy and my wife was seasick during the entire trip. Regardless, the landing at Ephesus after a night when the creaky old boat rode out a severe storm was quite an experience. I was still woozy from Bonamine and 3 grains of pentobarbital. We arrived on time at Kudasai and after a brief breakfast, I left the boat to explore Ephesus and its surrounding countryside.

It was there I first realized what a poor country Turkey was, depending on farming techniques out of the Middle Ages. The land around Ephesus rolls like Kentucky and the road to the city is covered with hawkers trying to sell you everything, including phoney Roman coins. The fancy hotels the Turks had built to try to attract tourists were empty in March and the masses of people in the area were living in the same peasant poverty they did two thousand years ago.

What amazed me about the city of Ephesus, located in a very hot climate that runs to a temperature of 110 degrees Fahrenheit in the summer, was what a cosmopolitan port city it was, with large numbers of people

continually coming and going. Here all sorts of fluctuating religions, ideas, and cultures mixed together, often blended into each other and, when compared, all seemed nonsense to a good mind.

One must visit Ephesus to see how all the questioning began—the marketplace, the road to the seaport, the theatre, where everything mixed together in great flux. In this *mélange* no religion appeared to be the only sacred one and the natural tendency in the face of so much nonsense was to disbelieve in all of them.

The inevitable fluxing and changing of so many cultures, customs, and beliefs in this bustling commercial center naturally led to a search for what was permanent. The idea of the laws of change or the formula of change itself being “the that which is permanent” had to come from the genius of Heraclitus, who walked the streets of this big bustling metropolis in the heat and in disgust with himself and everybody else.

I was not impressed with the light or the climate and in fact it became surprisingly cold and misty as the day of my first visit wore on. And now, seated on the grass near the ruins, I found myself once more at the gates of Ephesus, but this time surrounded by members of a tour that I had volunteered to lead. Claire was there with her dark hair and her beautiful dark eyes, but she seemed subdued and spiritless since the episode with

Richard. Her lovely figure seemed to sag with concern. I thought the fear during what had happened had upset and disturbed her, but looking at Edward I realized something else was going on. This big strong tall man somehow was blaming his wife for what took place. He was a dignified successful businessman but clearly too old for her, and as often happens when a woman gets raped or an attempt at rape is made, it is implied by unempathic others—especially her male intimates—to somehow be her fault. Claire's radiant youth and beauty, which had appeared even after the long airplane trip to Turkey, now was clearly in eclipse as her husband, who had originally looked askance at the whole undertaking, now began feeling and showing the fiery pricks of his own temper—one always at the edge of boiling up—as he sensed his disappointment with her and as he became gradually aware of the long-standing disappointment in her with him. His main feeling about his wife, this trip, and Turkey itself, was one of disgust. He thought of his wife as an air-headed idealistic dreamer, of this trip as a ridiculous fiasco, and of Turkey as a third world country not worthy of attention.

Gertrude and Sarah and Pearl, the middle-aged ladies of the trip, sat together. Sarah, clearly the most educated and intelligent of the three, had informed me she was sleeping alone. She was much more politically liberal than Edward and much more conscious of the discrepancy between the rich and the poor in Turkey. Her insecurity about the stability of her relationship with Gertrude had proven all too correct, and now, after a quarrel, Gertrude

was sharing a room with Pearl, Richard's unfortunate wife. Sarah seemed relieved at this new arrangement.

Gertrude turned out to be a tough customer, plump and friendly as she was, and whom I might characterize as a quintessential Los Angeles intersubjectivist psychoanalyst. She was no longer interested in the Freudian emphasis on infantile sexuality and childhood fantasies. She followed the popular idea that everything in the analytic process is co-created by the analyst and the patient, and so the here-and-now interaction is the predominant area for focus in the psychoanalytic process. Gertrude was a radical feminist and an aggressive one and she had quite overwhelmed Pearl with her interest and affection.

Pearl's blond hair had become rather straggly and unkempt. Her spirits seemed quite good and she seemed happy with her new lover and change of sexual preference. She continued to speak in a voice so soft that one could hardly hear her, but when she did speak up it was usually rather intelligent. She frequently questioned whether the United States has the most advanced and most desirable civilization in spite of its materialistic riches and she called attention to our predominant road rage, discrepancy between the rich and the poor, high incidence of coronary artery disease, and the overwhelming power of huge financial interests to control the politics of the country. These rather fiery views, with which I did not disagree, were in

contrast to her actual appearance, which was kind of drab and passive, making it easy for people to overlook her entirely. Needless to say, Edward fiercely disagreed with her comments about the United States, but he considered her a harmless fool and chose not to confront her.

Sitting together by themselves but not really communicating with each other were Henry and J. To recapitulate, Henry, a reasonably intelligent philosophy teacher, had spoken up a number of times already and I was soon to call on him for his learning, but he was also an angry man and continued even on this trip with his most unfortunate tendency to blame J. for all his difficulties. He was suspicious of me and did not consider himself to be my friend. During the trip so far he repeatedly announced, too much perhaps, as many philosophers think and still do, that Freudian psychoanalysis is nonsense. Henry had told us that the Freudian system enabled everyone to claim that it was scientific and rational for people to be selfish, greedy, and pursue their own ends. As far as he was concerned, it replaced the medieval theological system and served as a rationalization for what had already happened, the rise of capitalism and the Protestant ethic replacing spiritual values. He was in late middle age, his full head of hair beginning to show thinning and balding, and he was developing a paunch from lack of appropriate exercise and too much junk food in the school cafeteria, looking in many ways like a typical academic and college professor. As far as Henry was concerned, the Freudian system is one of suggestion and persuasion

perpetrated on the patient by a therapist who is certain his theoretical formulations are absolutely correct. But I suspected that his hostility to psychoanalysis had something to do with some kind of intuitive conception he had of my feelings for his wife.

And then there was his wife, J. Even after all this time when I close my eyes I see this slender sylph, this angel, in early middle age already but with her brown eyes sparkling and reflecting youth and energy. She was an infinite work of nature and retained her beautiful body and her beautiful mind even then. My passion for her made her very uneasy and somewhat conflicted, and the fact that at one time I was her therapist did not add to simplifying the situation. In the transference in those days she loved me but at this point she was very distrustful and uncertain about what to do. She clearly did not love her husband, Henry, and there was a growing tension between them.

Finally, over to my right, were the other young people of the group. The black haired Sema felt envy and contempt of Americans and also of Moslem fundamentalists. Sema was uncertain of herself and wanted very much to be "Western." She kept silent and out of discussions entirely because she considered herself employed only as a guide in Turkey, was a bit jealous of Lisa, and actually was insufficiently educated to understand most of the conversation even though her English was excellent.

Ali the resident was clearly smitten with Claire and was making every effort he could think of to draw her attention and interest. Only Lisa from Germany seemed self contained and efficient and in need of nobody. She was a great help and I was happy that I brought her. The trip was getting more and more complicated than I expected and I was getting more and more uneasy about my cardiac status and leaning more on the assistance of Lisa, whose capacities I admired. Marsha and George were quietly present and available, and the most interested in Ephesus and Heraclitus, since they had an older time classical education background.

But at this time, lying on this hard bed in the intensive care unit and trying to turn my head enough to watch the monitors, I remember how I wanted a Ghazalian experience with J., imagining spending time with her in Paris, Sarasota and Lido Key on the ocean, and perhaps San Diego with its beautiful climate. In spite of all the difficulties, I considered J. and I to be soul mates, perhaps out of a wish and a need for one as I felt myself slipping out of life. I had been impelled by a mysterious inner force to contact J. after my wife died, and here she was, present but excruciatingly not available to me for gratification of the archaic needs that had boiled up.

I became philosophical as I looked over Ephesus and asked myself why our value systems are so upside down in the 21st century. Where, I asked myself, is global materialism leading and why do we pay athletes millions of

dollars and nurses practically nothing? Why is it that modern Turks continue to be burdened down by their medieval customs, trying to climb towards scientific and technological success with a ball and chain of religious orthodoxy around many of their ankles? Is the only alternative to global materialism to be religious fanaticism? Human life in history seemed to be an endless tragedy going nowhere and perhaps ending in the self-annihilation of the species.

I noticed that the group was watching me expectantly, so in order to gain time to continue with these morbid thoughts, I asked Sema to launch into her standard guide speech about Ephesus. "Around 1,000 B.C.E.," she began, "colonists from Greece arrived on these shores, fleeing an invasion by the Dorians. Their culture flourished and actually cities such as Ephesus exported cultural refinements back to Greece. The region where Ephesus is located is called Ionia and Ephesus was a great trading and religious city. Artemis, the virgin goddess of the hunt and the moon, became the central goddess of this area and a fabulous temple called the Artemisium was built in her honor. The city was eventually conquered by Alexander the Great, then by the Romans, and finally overrun by the Goths in 262 C.E. It is now the best preserved and probably one of the greatest reconstructed ancient sites of the world, with extensive remarkably preserved remains. The place is packed with tourists in the summer. There is nothing left of the temple of Artemis except a messy excavation site and a lone standing column, which has a grandeur of its own.

Where abstract thought and logical reasoning were concerned, great advances were made by the Greeks of this period and some of the first thinkers to become public celebrities were born and lived here. One of the most difficult and obscure geniuses of the time was Heraclitus of Ephesus.”

At this point I asked Henry, the philosophy professor, to address the group about Heraclitus, a talk that we had arranged to have him give by agreement when he said he was coming on the trip. Fumbling in his back pocket for some notes he began confidently with the following rather surprising little speech:

Henry's Lecture

“Though Heraclitus has been somewhat misunderstood and neglected for 2000 years, he is, in my judgment, the Greek father of dynamic psychiatry. His tone is not that of disinterested science or academic philosophy. He has an urgent message, and what seems to strike him most strongly is mankind's ignorance and lack of understanding. In particular, man does not understand, as he puts it, ‘the purpose which stirs all things through all things.’ Lack of understanding on this score, he claimed, engenders arrogance and lack of moderation, which to the Greeks were the greatest of sins.

Heraclitus, who lived in Ephesus around 500 B.C.E., introduced a vital element into Western thought that has been neglected until recently. The object of the pursuit of knowledge, he said, is not simply factual or quasi-factual information but rather the acquisition of wisdom and understanding which will yield the fruits of moderation and modesty. The way to this wisdom is not what we would today call rational process, but rather, in his terms, a ‘breathing in the logos’ or intuition—looking into one's self to understand the human and nonhuman world by understanding one's own inner processes. His basic purpose, however, like that of all of the pre-Socratic philosophers, was to understand nature as a whole. The surviving work of this mysterious and rather cantankerous philosopher amounts to only about a hundred fragments. One of the great tragedies of human intellectual history

is the loss of his book, *On Nature*, a work of so great a reputation that it inspired disciples, the Heracliteans. The problems in interpreting the extant fragments are deepened by frequent metaphors and obscure statements, often made deliberately difficult in order to stir up thought within the reader.

One of the central concepts of Heraclitus is that of ‘*Logos*,’ a term left largely undefined and untranslatable but which implies something common to all existing things that could be accessible to humans if it were not for their folly. The Greek term should not be confused with the *Logos* of Christian theology, a different and much later concept. The Greek word *Logos* can mean proportion, and some authors tend to use the term ‘formula’ to translate it. For Heraclitus, however, *Logos* is given a corporeal existence and symbolized or associated with fire.

Heraclitus has frequently been misquoted or misinterpreted in his famous statement that one does not step into the same river twice. This theory of flux was brought forward to demonstrate the necessity for the mind to operate as an interpreter behind apparent continuous change, not to support some form of the impossibility of any knowledge. For him it was the measure inhering in change and the stability that persists through it that were of vital importance.

Another basic concept of Heraclitus, ‘the unity of opposites,’ includes

the notion of a necessary tension between opposing forces as vital to producing harmonious functioning, a concept clearly at the basis of modern psychodynamics. The hidden law of nature he claimed to have discovered seems to have been that all things live by conflict, which is therefore essential to life. For Heraclitus, the basis of equilibrium is struggle, which is therefore good in itself, since it is the source of life. Picture to yourself a bow ready strung but not in use. As it leans against the wall, one sees no movement and thinks of it as a static object, completely at rest. But in fact, a continuous tug of war is going on within it, as will become evident if the string deteriorates. The bow will immediately take advantage, snap it, and leap to stretch itself.

The 'One,' according to Heraclitus, is the apparent differences and the differences are themselves one, they are different aspects of the 'One.' Neither of these aspects, that is, neither the upward nor the downward conflicting forces can cease: if they were to cease, then the 'One' itself would no longer exist. Things taken together are whole and not whole, something which is being brought together and brought apart, which is in tune and out of tune; out of all things there comes a unity, and out of a unity all things.

A fundamental preliminary state of western science is implied here, a fork in the road of the history of the intellect. Heraclitus insisted that an intuitive method is necessary to get at the 'One,' rather than only the method of scientific observation and experiment. Heraclitus asserted that humans

should try to comprehend the underlying coherence of things as expressed in the *Logos*, the formula or element of arrangement common to all things. He regarded himself as having access to, and trying vainly to propagate, an all-important truth about the constitution of the world while the great majority of humans forever fail to recognize this truth, this *Logos*, this measure, this proportion. Heraclitus considered *Logos* an actual constituent of things and coextensive with what he thought to be the primary cosmic constituent, fire.

Heraclitus wrote, 'The wise is one thing, to be acquainted with true judgment, how all things are steered through all.' He explained that wisdom and consequent satisfactory living consist of understanding and becoming acquainted with the *Logos*. Thus the real motive of his philosophy, as Kirk and Raven¹ point out, is 'not mere curiosity about nature . . . but the belief that man's very life is indissociably bound up with his whole surroundings.' Though such thought is quite foreign to the scientific method and difficult for the modern human to appreciate, an attempt to return to the kind of thinking demonstrated by Heraclitus, Parmenides, and other pre-Socratics has been made by the modern philosopher Heidegger. It is very controversial.

Perhaps the most spectacular contributions of Heraclitus rest on his fragments 'I searched out myself' and 'Man's character is his daemon.' Searching out one's self implies that the human's inner nature ranges outside the apparent self and manifests itself in relations with other people as well as

in our relationship with the nonhuman environment. 'Daemon' simply means that one's personal destiny is determined by his or her own character, over which one has some control, and not by external gods or capricious powers. This is a flat denial of the Homeric view, and the starting point of psychotherapy, it seems to me.

* * *

There was applause when he finished. I was surprised that Henry was so inclined to dynamic psychiatry, even though he was so hostile to Freud and psychoanalysis. Clearly he did not understand that the principles of dynamic psychiatry, to which so many psychiatrists still give lip service, come from what we have learned in psychoanalysis. "Thank you Henry," I said, "and now I would like to enlarge the topic a little by going over some general principles about the comparison of the task of philosophy and the task of science. It was the ancient Greeks who first began both of these major disciplines, which grew out of dissatisfaction with all the quarreling religions as became evident, for example, to the people of Ephesus. But first let us take a coffee break." Here Lisa went into action, having prepared the break in advance, and soon the group was relaxing in the warm Ephesian sun, drinking their beverages, munching on cookies, and chatting to each other.

After a while I called for attention and began my informal talk. "The task

of philosophy differs from that of science. Unlike science, philosophy examines not our conclusions but the basic conceptual models we employ and the kinds of concepts and ordering patterns that we use. Philosophy is concerned not with the explanation of this or that, but with the question of what really is an explanation. For example, is something explained when it is divided into parts and when we can tell how the parts behave? This is but one type of explanation. It works fairly well for a car although it does not tell us what makes the car run, and works less well for a biological cell whose inert parts seem to become alive. It does not explain life and it works very poorly for explaining personality: What are the parts of a person?

“If we choose another of the many types of explanation, has something been explained when we feel that we understand it because we have been shown how it fits into some larger context or broader organization? These questions, philosophical questions, are not designed to find the explanation of this or that but to discover what an explanation is.

“Since there are many different kinds of explanations in any one case, which shall we use? Should we try to use them all, and if so, what are the advantages and pitfalls of doing so? How is our choice among these varied explanations to be made? Should it depend on the field in which we work, on what we want an explanation for, or on the style of the times?

“Such philosophical issues at first seem to be empty, yet they very basically affect what we study, for depending on which mode of approach we use, different questions and hypotheses will be formulated, different experiments set up, different illustrations cited, different arguments held to be sound, and different conclusions reached. It is very important to realize that much in our conclusions about anything comes not from the study of things but from the philosophical decisions implicit in the way we start.

“The basic situation in philosophy is still that which was faced by Kant in 1781. How do we bridge the gap between:

- (1) The scientific conception of the world, including the human, as subject to mechanical causality. For example, Freud’s metapsychology was an attempt on the order of Newton to describe mental functioning according to orderly laws incorporating the great expansion of mental functioning to include the unconscious. It was a Newtonian system complete with forces, energies, dynamics and so on, and
- (2) The conception of the human as a free-willing, creative being with a capacity for wondering, enjoying beauty, and experiencing the sense of the joy of being alive. The human with a solid sense of self including, as one of my patients put it, ‘an iron rod of being’ that withstands the vicissitudes of mental conflicts and still preserves a feeling of being joyously alive and even a part of something greater than the self!

“Nobody has been able to reconcile these apparently contradictory aspects of reality. How can one harmonize the human being as a machine, with even the mind as ruled by causal laws, and the human being as a joyous creature creating and reaching out for transcendence; the human as an item in nature, and the human as a moral and free-living agent experiencing the joys of being alive in spite of one’s transience and even in spite of one’s imbalances and defects in physical and mental forces and mechanisms? Some thinkers such as Hayek insist that this duality is a permanent limit to our understanding. Others disagree.

“This impasse rests directly on how we approach the problem of human understanding, a subject known as epistemology. Epistemology comes from *epistemē*, meaning absolute knowledge as compared with *doxa*, which means approximation or right opinion. The seventeenth century philosopher-physician John Locke, in his famous *Essay Concerning Human Understanding*, established this as a serious discipline, although it really began with Plato’s dialogue, *Theatetus*, concerned with how we get our knowledge and what is knowledge and truth.

“It is important to understand how this differs from psychology, which asks, ‘Why do men hold certain beliefs and how do they come to hold them?’ For example, a cruel father may be used in psychology to explain a revolutionist who hates all authority. Epistemology is not interested in

particular beliefs but rather asks what are the grounds for various classes of beliefs or truths, and are these grounds justifiable.

“In epistemological rationalism, for example, we say that a clear and distinct rational mind can give us the grounds for the intuition of first principles. Empiricists on the other hand, say that ‘there is nothing in the intellect that is not first in the senses’, so Locke proposed empirical data are the sole ground of how we get our knowledge. Leibniz, answering the empiricist quotation that there is nothing in the intellect that is not first in the senses, said, ‘Except the intellect itself’. This is the traditional answer of the rationalists to the empiricists, since the former stress the contribution of the mind to our ‘knowledge’ of reality. Psychoanalysts are clearly in that camp, while behaviorist psychologists are firmly in the empiricist camp.

Finally, there is the extreme and unanswered question of Plato: ‘What does it mean to know something, what is knowledge, and how does knowledge differ from opinion?’ On this issue turns the question of ethics and values, because we determine from our assumptions about how we get our knowledge, what our ethical beliefs and propositions are or ought to be. So this issue has become a very hotly disputed one in the field of philosophy.

“Turning to scientific theories, in the epistemology of science there are two kinds of theories: deductive theories, which are mathematics and logic,

and inductive theories. The inductive theories, which we are more interested in as psychiatrists, can be further subdivided into two types. First, there are the classificatory theories. Classifications are formed through extractions from observations—thus we have the natural sciences. An example of this would be Kraepelin's statement that catatonia, hebephrenia, dementia praecox, and paranoia belong together and differ from manic-depressive insanity on the basis of the course of the disease.

“Second, we have explanatory theories. Explanatory inductive scientific theories give hypotheses about the observations, and they are of two types. The first type of explanatory theory asks: What is the form of the regularity as it is observed? This gives laws and descriptions such as Newton's laws or Nietzsche's famous statement ‘painful memories are often forgotten’. The second and more controversial type of explanatory theory is the ‘why’ and asks: What is the purpose of the observed phenomenon? These attempt to be causal explanations rather than descriptive. For example, Freud wrote that the ego, in order to reduce anxiety, represses a wish. These theories have a teleological flavor and as such are not very popular among scientists.

“Both types of theories presuppose a metaphysics. The descriptive theories presuppose a materialistic mechanistic positivistic theory, which is based on a trust in the order of nature, that nature can be described mathematically, for example. This is often known as the ‘simple-minded’

metaphysics. The 'why' type of theories are based on the 'muddle-headed' metaphysics, and involve some sort of idealism; mainly that by some intuition or empathy we may know what is behind appearances and give an explanation of it. So we are all faced with making a choice between simple-mindedness and muddle-headedness.

"Vico, another genius of the seventeenth century, pointed out that whatever the splendors of the exact sciences, there exists a sense in which we can know more about our own and others' experiences in which we are participants or authors and not mere observers than we can ever know about nonhuman nature which we can only study as outside observers. As Whitehead of our century put it, 'When you understand all about the sun and all about the atmosphere and all about the rotation of the earth, you may still miss the radiance of the sunset'.

"'Complementary' is defined as alternative ways of looking at the same data which, taken together, yield more understanding. For example, the great physicist Niels Bohr conceived of the languages of religion, science, and art in such a way as to represent different forms of complementary descriptions which, although they exclude one another, are all needed to convey the rich possibilities flowing from man's relationship to the essential order. Thus the language of the humanistic imagination and the language of scientific understanding could be thought of as representing different yet

complementary ways of looking at the same sensory manifold.

“Aristotle pointed out in *De Anima* that every science has its own method of investigation, its own first principles. He labeled these principles axioms, which are common notions, self-evident and acceptable even to a novice, postulates, which are also taken at the beginning as given first principles, but are not necessarily obvious and acceptable to the beginner or the novice, and basic definitions, which are conventions. Aristotle also wrote in *De Anima* that to obtain knowledge of the mind is one of the most difficult things in the world—it is even uncertain with what facts to begin the inquiry.

“What is the status of postulates? Take, for example, the postulates of geometry. Are they empirical truths based on sensory observations? No. We know that perspective makes parallel lines appear to meet and yet we believe essentially that in the geometry of our space parallel lines do not meet. Are they *a priori* truths, defined as universally and necessarily true and needing no support from the senses? Kant thought that Euclidean geometry was a necessary condition of our experience and yet Einstein in a way disproved this. It is not a necessary condition; space is Reimannian not Euclidean at least for physics, as we all know today. Which geometry is ‘true’ if each of the geometries are internally consistent”? Experimental evidence in physics to date proves that space is Reimannian in its structure. Thus we can choose among alternative systems by studying where they collide and then see which

one fits observation and experiment. Here truth is defined as empirical truth.

“It is not so simple. Our intuitive experience of space is Euclidean. We cannot imagine a three dimensional Riemannian space, or any other kind of space. In this sense Kant was correct. So here is an example where empirical truth is in collision with apparently self-evident intuitive truth, defining intuitive truth as the only way we can imagine or experience a concept *a priori*, a necessary condition of experience, clear and distinctly true as Descartes phrased it.

“What we must conclude from this is that no system of geometry is true or false in an absolute sense. All have uses and applications. As the great mathematician Poincaré explained, ‘One geometry cannot be more true than another, it can only be more convenient’. One geometry tells us about the space characteristics required as postulates for a consistent science of physics, while another tells us how we directly experience the world phenomenologically—as it is immediately presented to the senses. Therefore one geometry is phenomenologic and one is conceptual. Both are necessary in different contexts and for different purposes. Neither can be discarded. Other alternatives, for example, Lobachevskian geometry, wait in the wings to be picked up some day and inserted where they are needed by some genius like Einstein. The problem of which is absolutely true is ignored as far as science is concerned. In science we want to know what works. We want interesting

and fruitful results, and epistemological and metaphysical issues are usually left to philosophers.”

I could see that the group was becoming weary and their eyes were glazed over with all this long-winded speechmaking, so at this point I asked Sema to conduct us on the standard tour of Ephesus. Some of the ruins seemed to be in pretty good condition. This took about four hours on a hot day, and by late afternoon we were all pretty tired and happy to get back to our hotel in Kudasai. I don’t remember much about the details of the tour, but it had little to add to what I have already said about the impressive place that I can visualize in my mind to this day.

At dinner, I noticed that Ali and Edward both seemed very agitated. Edward also seemed quite angry and worn out. Ali’s discomfort appeared more of a professional nature so I addressed him first. “Ali,” I said, “you seem very discontented. Did you not enjoy our tour of Ephesus?” “I did,” he replied, “but somehow this is too peripheral to the subject of dynamic psychotherapy as far as I can see. What is the application of all this to the actual clinical practice of psychotherapy and psychoanalysis? It is hard for me to make that leap.”

I could see what was coming—the tireless Ali was fishing for me to do some more talking. The group seemed fatigued and bleary-eyed, and after our

dinner with much wine some people were already almost nodding off to sleep. Finally I said to Ali and Claire, "Let us go over to the corner of the lobby. Anyone else who wishes to follow us can do so and I will give some details that might link together what we have seen and talked about today with the actual clinical practice of psychotherapy and psychoanalysis." Ali jumped at the chance and Claire came along, although I was not sure that it was because she wanted to be with Ali or because she wanted to hear what I had to say. I was rather pleased that George, Marsha, Sarah, Gertrude, and Pearl also came. Lisa went alone to her room as usual. Sema had disappeared, and Edward stormed away somewhere. Henry and J. stayed in the main lobby area talking to other guests and hoping to get involved in a game of bridge.

I addressed the group in the corner of the lobby, trying to ignore the comings and goings of other patrons of the hotel, and presented them with yet another brief talk, although I was feeling unwell from hiking around Ephesus in the hot sun.

I began, "Let me discuss a few chosen so-called scientific systems of psychotherapy. These are existentialism, which has as its postulate what is known as phenomenological psychology; behaviorism, which has as its postulate reductionistic empiricism; classical psychoanalysis of Freud, which has as its postulates metapsychology and the empathic data gathering method; so-called modern psychoanalysis, which in addition to the basic

postulates of Freud's work adds object relations theory and some assumptions regarding the capacity of the infant's mind; and Kohut's psychology of the self in the broad sense, which we must first define and distinguish from Kohut's psychology of the self in the narrow sense. The latter may be thought of as simply an extension or attempt to add to Freud's psychoanalysis. The psychology of the self in the broad sense is not simply an addition to Freud's theories, it is a complementary theory. The psychology of the self in the broad sense has as its new postulate the notion of the self as a supraordinate concept and a center of initiative toward the realization of its own program.

"Modern French philosophy is replete with definitions and appeals to the self, even conceiving of the self as a starting point for metaphysics. Piaget calls this appeal to the self as a starting point to metaphysics an illusion, and he insisted that no metaphysical knowledge can be attained through an intuitive appeal to the self. Yet this appeal is precisely what French philosophers from Maine de Biran to Bergson, tried to do.

"What is the purpose and context of each of the psychotherapeutic systems? Existentialism claims that a swing into the life of the other—an encounter—is therapeutic. Behaviorism views the shaping or changing of responses as therapeutic. Freud's classical psychoanalysis claims that what is primarily therapeutic is that, via the transference, unconscious conflicts are

uncovered, permitting the adult ego with its higher level of functioning and defenses to resolve infantile neuroses.

Modern psychoanalysis claims that via transference projections and projective identifications one uncovers repressed split-off infantile and primitive archaic self and object representations, allowing fusion and better integration to take place in the adult ego, with the subsequent formation of more realistic representations, and thus better object relations and adaptations. This represents an attempt to extend the metapsychology of Freud.

“Treatment based on the psychology of the self proposes that via the unique selfobject transferences there occurs the mobilization of the grandiose self and the idealized parent imago from repression, and this allows development to resume via transmuting microinternalizations in an atmosphere of generally empathic therapeutic interaction. A better phrase to actually distinguish the existentialist’s approach from Kohut’s approach would be to call the former the use of the therapist’s presence. The therapist as a rigidly scientifically detached technician only reinforces his or her patient’s problems by becoming one more in a chain of powerful individuals who have pretended to take an interest in the patient. What is more, and what is worse, is the demand that the patient too must pretend that this interest is real, while all the while they both know that the therapist’s response is

determined by his definition of himself or herself as a psychiatrist rather than by the feelings the patient as a person arouses in the therapist. Faced with this clinical detachment the patient can only respond with, what Laing cleverly calls the absence of the therapist's presence or, still more destructively, the presence of the therapist's absence.

"The argument of the existentialists is that a distance is opened between the doctor and the patient by the analytic technique of free association, a gap which is unproductively filled by abundant verbal material and abundant analytic ideas, conceptions, and theories, rather than by emotional interchange based on staying strictly with the phenomena and the appearance that the patient presents. Phenomenological reduction of the emotional distance between the patient and the therapist is the crucial procedure leading to a true meeting or encounter.

"The notion of phenomenology has been used in many ways and is very confusing. Husserl used the term in 1900 and for him it was a way of doing philosophy, the phenomenologic method. A phenomenon is whatever appears for us immediately in experience. Husserl does not permit what he calls reduction, he does not permit the selecting out of experience of certain things, sensations, feelings, and so on, since this already assumes classificatory principles about the world. Thus, phenomenologic statements cannot be called empirical since empirical statements are already about assumed things

out there. Phenomenologic statements attempt what Husserl called presuppositionless inquiry, which of course is not really possible.

“From the point of view of the psychotherapist, the phenomenologic stance is just to react to what is simply there in immediate experience. One does not disconnect or isolate or interpret aspects of this experience. Phenomenological reduction demands a refrainment from judgment about morals, values, causes, background, or even subject (the patient) and objective observer (the therapist). One pays special attention to one’s own state of consciousness in the presence of a patient, for example, the “feel” of a schizophrenic. The application of this to psychotherapy raises the valid problem of whether we can be sure that we are seeing our patient as he or she really is, not just as a projection of our theories about him or her. The aim is to rediscover the living person, what is existentially real for that person. As Frieda Fromm-Reichman put it, “The patient needs an experience not an explanation.”

“The literature on psychotherapy is filled with discussions of these various concepts, and it is important for psychodynamic psychiatrists to be aware of recent thought and advances in this area. Dilthey, writing at the turn of the 20th century, divided all knowledge into the natural sciences, which are rigorous empirical sciences seeing the human as a natural object as in behaviorism—Freud insisted psychoanalysis also belonged to the natural

sciences—and the other division of knowledge that Dilthey called *Geisteswissenschaften*, the cultural sciences, the human sciences such as psychology, philosophy, anthropology, and sociology.

“Dilthey tried to put *Geisteswissenschaften* on a secure rigorous foundation, not just on intuition or empathy or feeling. He presented a method he called *verstehen*, which he never clearly defined. His whole philosophy is in fragmented manuscripts, but it rests on our two standpoints of experience, that is, our two ways of experiencing the world: (1) living in the world—we cannot live life without adopting a stance toward it, and (2) experiencing natural separated objects. How we elaborate these two ways of experiencing the world—living in it with a stance toward it, or the world of natural objects that we are separated from—gives us our two ways of being aware of experience.

“Dilthey divided our two ways of being aware of experience into *verstehen*, the knowledge of the inner life of the human, the system of value-laden and meaningful existence, our world view, and *erklären*, our knowledge of the laws of the causal order of natural phenomena, rigorous scientific knowledge. The key question is whether this latter is the only real way to knowledge. Decision about this is what will determine one’s choice of psychotherapeutic system.

“Kohut warns us against using only *verstehen*, basing all our knowledge on simply the assumed inner mental life of the patient, leading to what he calls regression to subjectivity. Freud said that psychoanalysis involved both *verstehen* in its so-called reconstructions and as it is implied in his comparison of psychoanalysis to archaeology and the uncovering of buried cities, and *erklären* in its empirical observations. Yet he kept insisting that it was only a natural science. There is a tension-ridden paradox running all throughout Freud’s work in his wish that psychoanalysis be a rigorous empirical science and his being forced to straddle the natural sciences and *Geisteswissenschaften* together. I have discussed this elsewhere² if you care to read about it.

“Dilthey’s very important concept of the hermeneutical circle is a method of investigation that begins with a preliminary notion of the whole and then proceeds to evermore probing analysis and synthesis of the parts which leads to an evolving ever-changing concept of the whole. This affords an increasingly internalized and thought-through understanding of the whole. It is a method of obtaining knowledge in the *Geisteswissenschaften*. Ricoeur argued that psychoanalytic interpretations fall here and not in the natural sciences. The term hermeneutics comes from Hermes, the god of speech and writing, and it originally referred to the principles of interpretation and historic reconstruction used in a study of the scriptures. Exegesis is the application of these principles to the material at hand. Freud’s epistemology

was mistaken, wrote Ricoeur, it is not comparable to the empirical sciences but rather is a form of hermeneutics, a method for the human sciences. Its principles of interpretation and historical reconstruction are applied to the data of introspection. This is an unresolved argument.

“The basic postulates of all psychology before 1900 used the classical model of natural science. This lends itself best to behaviorism and experimenting. The metaphysics is that of positivism; only verifiable concepts have meaning. It inexcusably narrows down humans. Many authors have shown that the epistemological foundations of this approach are quite naïve and untenable for all but the simplest problems. Immediate data of conscious perception, empirical data so called, are not simply built up in mosaic fashion from elementary sensations as Locke thought, for at the same time the interpretative and classificatory structures are modified by new experiences. This is the basic tenet of Piaget’s ‘genetic epistemology’, and forms a crucial finding for all his research.

“The other three systems I mentioned at the start of this talk (Freud, object relations, Kohut) are all systems of psychoanalysis and they all are based on one essential postulate of data gathering. The principles determining the use of the interpretive process are the same in the oedipal neuroses as well as in the narcissistic disorders:

The analyst listens with even-hovering attention, which is his counterpart

of the analysand's free associations. By virtue of his own analysis, training, and experience, the analyst is acutely sensitive to his inner experience and thus becomes consciously aware of mental states evoked in him through empathic contact with the analysand. Such empathically derived data then become the raw material for processing into the hypotheses that are tested by interpretations³.

"To differentiate psychoanalysis from other human studies such as the observational studies of Mahler or interpersonal studies of Sullivan, remember the observer in psychoanalysis tries to occupy an imaginary point within the psyche of the patient with whose introspection he or she empathically identifies. The observer in imagination occupies a midpoint between himself or herself and the patient, equidistant from the patient's id, ego, and superego, as Anna Freud put it.

"In the classical psychoanalytic method we have, as Freud's postulates, the hydraulic fluid model of energy based on classical Newtonian force physics. We have definitions by analogy, such as psychic energy, and homunculi such as the ego—a little man within the man—that are very much under attack now. The systems approach has been recently given as an alternative language to metapsychology, while attempting to preserve the same basic approach to data, but Friedman. comes to the conclusion that there are just as many difficulties in the systems approach as there are in basic metapsychology. So the postulates of classical psychoanalysis remain a disputed area.

“The additional postulates of object relations theory involve the concept of splitting, and of self and object representations. These representations are postulated by Klein as occurring in infancy even starting at three months, and proceeding in conceptual stages as the child develops. There are very basic objections to these notions. First it is not clear and there is no agreement on how and where object relations theory fits in with the classical drive theory of metapsychology. Each object relations theory author differs on the details. Also the whole theory is contradicted by Piaget’s work in which he observes a sensorimotor stage, lasting to one and a half years of age, before which there are no concepts and there are no mental representations possible, there are only sensorimotor schemata.

“I believe the great philosopher Leibniz, who made many brilliant suggestions but never followed them up in a methodical way, is the founder of the psychology of the self, much later elaborated in psychoanalysis by Kohut. Leibniz pointed out that our notion of substance ‘out there’ depends on our sense of self as enduring over time. When one’s sense of self fragments, so does our conviction of substantial reality.

“Why the special types of selfobject transferences⁴ occur in narcissistic disorders is not sufficiently explained in Kohut’s psychoanalytic theory, since no instinctual drive is postulated as in classical psychoanalysis. The explanation given by Kohut. is to appeal to what is known as the Zeigarnick

effect, which in academic psychology refers to the finding that interruption of any task leads to tension, and to the tendency to resume that task at the earliest opportunity, relieving the tension. Transference in the narcissistic disorders then develops in the service of the need to complete human development and form structure, not as a result of striving for instinctual gratification via objects, as in classical metapsychology.

“Notice the vagueness of this conception. For example, how does an individual know that a part of structure is missing, and what is the nature and origin of the developmental forces that drive him or her to replace or form missing structures? We assume here that the forces of development will resume even in adults in order to continue a development that was interrupted at the age of two. This is one of the biggest arguments given by many modern psychoanalysts against Kohut’s theory. In Kohut’s theory psychoanalysis proceeds by transmuting microinternalizations, not by uncovering of unconscious conflicts. The remedy then is either the addition or development of missing structures, or compensation for the defects by strengthening one or the other pole of the self. I⁵ have discussed all this elsewhere.

“Kohut’s notion of the psychology of the self is an explanatory concept of tremendous power in organizing the vicissitudes of the treatment of preoedipally damaged patients. Treatment based on this psychology

sometimes shows dramatic responses, for example, in resolving typical stalemates like those occurring when the analyst makes an empathic error. The patient becomes enraged and the analyst interprets this as transference, which makes the patient more enraged. It also avoids pejorative labels such as childishness placed on what appears to be completely self-centered behavior by the patient in analysis or as in the patient's world, and avoids head-on confrontations with the patient's narcissism.

"The most well known alternate view to that of Kohut is by Kernberg,⁶ who sees narcissistic formations and transferences as defenses against instinctual aggressive drives which must be confronted and broken down . . . Well, that's enough for tonight. I know this stuff is getting technical and we will discuss it and perhaps intersubjectivism more as we go along."

At the end of all this I felt that the little group was satisfied and that, all things considered, we had enjoyed a rational, intelligent, and cultural day, a successful experience for a change. But it was not over. As we retired to the bar for a nightcap, and were joined by J. and Henry, Edward, who apparently had been drinking at the bar for some time, came storming up appearing angrier than ever. I was totally puzzled. In front of everyone, Edward confronted me in a rage. He shouted, "Martin you have cheated us on this trip. You lecture and pontificate and talk and everlastingly dribble on with impractical and unpragmatic material that nobody can use and that has no

financial or materialistic worth. Philosophy is bunk! Get a life! Let's go out there and make a buck, I say. I am sick and tired of you, and I am sick and tired of hearing this fancy stuff and I am greatly annoyed that you constructed a tour like this. Was it really necessary to bring along a person like Richard? Was it necessary to drag us all over Turkey and back and forth to Berlin for what you could have said to us in an auditorium in Chicago? What is the gain of all this?"

At this point Sema and Lisa came into the bar, to see what the shouting was all about. Claire, listening to her husband, began turning pale as if she anticipated a scene that she had experienced before when her husband lost his temper, especially if he had too much to drink. I said nothing because I did not want to enrage Edward further and as it finally became clear to me that he had been in the bar for a while and had a few drinks perhaps out of boredom while I was talking at length to the group in the lobby. He was a big tall strong ex-college football player and I was a little physical pipsqueak compared to him and quite a bit older than he was. But this only excited Edward more, who was clearly looking for a fight. He hadn't forgiven me for helping to pull him off of Richard.

Raising his voice louder and louder and even attracting attention from others in the bar and the lobby, Edward roared, "I am leaving this tour and I want a refund of my money. I am taking my wife with me and we never want

to see you again. I will deal with her later. You are a phoney and a failure and you can't seem to do anything right! Just as Richard is going to demolish your reputation as a psychiatrist and a psychoanalyst, I am going to speak to the grantors of the foundation that sponsored this tour and see to it that you will never receive another grant for anything again. You disgust me! You are probably a liberal and I really don't like some of the comments you have allowed to be made about the United States, which is a glorious country and of which I am proud to be a citizen. You ought to be ashamed of yourself! If people like you had their way, the United States would still be a backwater group of thirteen colonies surviving on the good will of Great Britain and the English king. Where is your courage? Where are your guts? What has all this garbage about Heraclitus and the Greeks and rationality got to do with us? The Greek language and the Latin language are dead—they are wisely not even taught in our schools any more. Spanish is the language now until we get rid of the illegal immigrants, and maybe soon Chinese! The study of humanities is over; the countries that have mastered the most science will master the world. You are leading everybody in the wrong direction and I am absolutely revulsed by you and your kind. I even bet you are Jewish !”

I was lucky, because when he finished this abuse he took his fist and drove it not into me but onto the bar so hard that he shattered the glass top of the bar, also, I am sure, injuring his hand. Edward stomped out and I never saw him again. Apparently he took a private car and a driver to Istanbul and

flew back to the United States.

But somewhat to my surprise Claire did not go back with him. I do not know if she was mortified at his behavior or even if she disagreed with it, but I do know that she felt somehow things would never be the same between them because clearly Edward could not shake off his belief that she had somehow lured Richard into her room. Once more while enduring a public humiliation and assault, I felt angina and atrial fibrillation. It was getting very uncomfortable indeed.

The evening was clearly over. Pearl, Sarah, and Gertrude were aghast at this outburst and they politely retired for the evening to their respective rooms. Marsha and George decided to take a walk and calm down. Sema had walked out in disgust as soon as Edward started further ranting and raving. Lisa had listened quietly and now put her hand on my arm and, in her matter of fact way, asked to be excused so she could begin making arrangements for our trip tomorrow to Pergamum, which is now known as Bergama. She quietly reminded me of the wonderful museum we had visited in Berlin, the Pergamum museum, which housed the magnificent and unforgettable temple stolen from the Turkish Pergamum site by the German archaeologists of the 19th century. The vision of this timeless architecture quieted my heart down a bit. There was nothing I could do anyway.

Henry wandered off to bed and J. lingered a few moments with me. To my surprise I noticed that she was crying. At first I thought that she felt sorry for me but then I realized something had happened. I asked her what was going on and she admitted that earlier she overheard Henry trying very hard to seduce Sema. She heard Sema respond by saying she had nothing but contempt for the men on this tour, except for Ali, who was too young for her and George, who was too old for her. When that failed Henry offered Sema money and Sema simply made an obscene gesture and walked away from him. J. was horrified and frustrated and disappointed and she added that this was not the first time Henry had been unfaithful. My heart skipped a beat! I thought my opportunity had finally come to be the gallant rescuer of the maiden in distress and I reached out my arms to her hoping that she would fall into them for love and consolation. But what happened was quite different. As I held out my arms to her she responded like Dido when Aeneas visited her in the underworld:

Aeneas with such pleas tried to placate
The burning soul, savagely glaring back,
And tears came to his eyes. But she had turned
With gaze fixed on the ground as he spoke on,
Her face no more affected than if she were
Immobile granite or Marpesian stone.
At length she flung away from him and fled,
His enemy still, into the shadowy grove
Where he whose bride she once had been, Sychaeus,
Joined in her sorrows and returned her love.
Aeneas still gazed after her in tears,

Shaken by her ill fate and pitying her.

... Virgil *The Aeneid* ⁷

Notes

¹ *The Presocratic Philosophers*. Cambridge University Press, 1971, pp.204-205.

² *Psychoanalytic Clinical Practice*. London: Free Association Books, 2000.

³ *The Psychology of the Self*, ed. by A. Goldberg. N.Y.: International Universities Press, 1978, p. 446.

⁴ For details see *The Restoration of the Self*, by H Kohut. N.Y.: International Universities Press, 1977.

⁵ *Psychology of the Self and the Treatment of Narcissism*. Northvale, N.J.: Jason Aronson, 1993

⁶ *Borderline Conditions and Pathological Narcissism*, by O. Kernberg. Northvale, N.J.: Jason Aronson, 1975.

⁷ Trans.by R. Fitzgerald. N.Y.:Random House, 1983, p.176.

Chapter 7

Pergamum

Even now, as I watch the monitors announce the irregularities and dysrhythmias of what is left of my myocardium, I continue to long for J. The immortal words of Machiavelli—yes Machiavelli—keep going through my sad mind:

*Io spero, e lo sperar cresce 'l tormento:
Io piango, e il pianger ciba il lasso core;
Io rido e il rider mio non passa drento,
Io ardo e l'arsion mia non par di fore;
Io temo ciò che io veggo e ciò che io sento;
Ogni cosa mi dá nuovo dolore;
Così sperando, piango rido e ardo,
E paura ho di ciò odo e guardo,.*

I hope and hope increases my torment: I weep and weeping feeds the weary heart; I laugh and my laughter does not touch my soul; I burn and no one sees my passion; I fear what I see and what I hear; everything gives me fresh pain; thus hoping, I weep and laugh and burn, and I fear what I hear and see.¹

The general tenor of his work implies that any improvement in the habits of people is not an improvement in human nature itself but a temporary uplifting of behavior under the passing influence of a strong prince. Such an improvement was probably not conceived by Machiavelli as a civilizing influence—more likely he meant an increase in Roman virtue—stoicism and military courage.

Machiavelli's specific theory of human nature, as I remember it, can be outlined as follows: The desire to acquire and hold material property is one of the fundamental desires of man. He writes that, "Men forget more easily the death of their father than the loss of their patrimony," and, "For it may be said of men in general that they are ungrateful, voluble, dissemblers, anxious to avoid danger, and covetous of gain; as long as you benefit them, they are entirely yours; they offer you their blood, their goods, their life, and their children when the necessity is remote; but when it approaches they revolt

He views men as wicked and foolish, deceived by false glory and false good, and those few who do not agree do not dare to speak up because they are afraid of the majesty of the state and so do not dare to oppose themselves to the many. As a group they may be loud and audacious in the denunciation of their rulers, but when punishment stares them in the face, then, distrustful of each other, they rush to obey.

He writes, "As human desires are insatiable (because their nature is to have and to do everything, whilst fortune limits their possessions and capacity of enjoyment), this gives rise to a constant discontent in the human mind and a weariness of the things they possess; and it is this which makes them decry the present, praise the past, and desire the future, and all this without any reasonable motive²." So Machiavelli tried to explain why change is so difficult for humans, the same problem that I have wrestled with all my

professional life. The reason humans cannot change, according to Machiavelli, is due to the impossibility of resisting their natural character as he has described it above, and the difficulty in persuading themselves that a mode of proceeding which has been successful before will not work again.

One might be hard pressed to quarrel directly with these precepts of Machiavelli; in many ways his pessimistic description of men resembles that of Freud. War is the perfect instrument for the tyrant, Machiavelli points out, because war, regardless of the reason for it, is barbarizing, and forces men to fall into line behind the tyrant or to be considered treasonous. Situations of chronic wars are the worst, since they produce a steady progressive force toward barbarization. A tyrannical, mediocre, or cynical leader also tends to barbarize the group, using the inherent barbarizing tendency for his or her own ends.

It seems that a cruel paradox is upon us in our present-day United States. In an age dominated by the enormous barbarizing influence of foolish chronic wars, mindless television, and other dumbed down mass media, either mediocrity or a clever Machiavellian approach are necessary attributes to get elected, along with astonishingly huge sums of money. We are forced to hope that the office will then make the man, and that the awesome responsibility of being the leader of the so-called free world will result in a shift in the personality of the leader to that of a wise idealist with a civilizing

influence and a powerful capacity for persuasion. There is little psychologic or historical evidence to support the belief that such a shift can take place, although occasionally it has almost miraculously occurred.

... But I digress again! It seems that delirious or not, I can't help it. In *Tristram Shandy*, Sterne³ tells us, "If he is a man of the least spirit he will have fifty deviations from a straight line ... which he can in no ways avoid. He will have views and prospects to himself perpetually soliciting his eye" ... so what can I do? ... Yet now the voice of Sema comes back to me, speaking as we rode in our bus to Bergama, driven by the ever-dependable bus driver Abdul. She droned on, "This agricultural market town of 50,000 population in the province of Izmir lies on a site occupied from Trojan times. Eight kilometers from it are the windswept ruins of Pergamum."

As she spoke I remembered how the marvelous temple of Zeus (?), taken from the weak Ottoman Empire towards the end of the 19th century by German archeologists, appeared in the Pergamum museum when we were in Berlin, providing us with an idea of how beautiful Pergamum once was.

Sema continued, "Pergamum was one of the ancient world's major powers although its moment of glory was relatively brief. It owes its prosperity to Lysimachus, one of Alexander the Great's generals. Because Pergamum seemed to be such an impregnable fortress, Lysimachus stored

there the booty that he had accumulated while marching through Asia Minor. However, he was killed in 281 B.C.E. and a series of maverick rulers took over the city. The first of these was Philetarus, the commander Lysimachus had posted at Pergamum to guard the treasure. He was followed by his nephew Eumenes and then the adopted son of Eumenes, Attalus. The latter took the title of king and made an alliance with Rome. He was succeeded by his son Eumenes II who really built Pergamum into a great city. Rich and powerful, he was the one who added the temple of (?) Zeus to the hilltop of the city and began a great library there. The reign of Eumenes II was remembered most for this library, which is said to have held more than 200,000 volumes because Eumenes was an almost monomaniacal book collector. Eventually his library came to challenge the world's greatest library in Alexandria, which had allegedly, 700,000 books. The Egyptians were afraid that Pergamum and its library would attract famous scholars away from Alexandria so they cut off the supply of papyrus from the Nile. Eumenes set his scientists to work and they came up with parchment.

“However, when Eumenes died he was succeeded by his brother Attalus II and then his son Attalus III under whom the kingdom began falling to pieces. Attalus III had no heir so he willed his kingdom to Rome and the independent kingdom of Pergamum became a Roman province in 129 B.C.E. In its heyday from about the second half of the second century B.C.E. until the end of the third century C.E. Pergamum experienced a golden age as a

magnificent architectural and artistic center. It increased in prosperity and importance until it became the greatest emporium of its contemporary area. The terraced sides of its Acropolis were covered with palaces, temples, gardens, and plantations. The culture of its citizens was esteemed all over the Greek world. The ornaments of luxury were supplied by the skill of its own craftsmen, whose cloth of gold, for instance, was considered in a class with the embroideries of Phrygia or Alexandrian brocades."

I asked myself why Attilus III willed his empire to Rome, a will that came to be considered one of the most controversial documents of contemporary history. There is no agreement as to the cause; probably he realized the vast impetus Roman imperialism was gaining and accepted it as irresistible. The inhabitants of Pergamum were not happy with this news and the Romans actually had to put down an armed uprising before they could fit Pergamum into their newly incorporated province of Asia. Sadly, by the end of the third century C.E. Pergamum had been essentially destroyed by the innumerable Roman civil wars and the repeated incursions of barbarians just as Machiavelli might have predicted, so its reign as a center of the cultural world was relatively brief.

. . . Now it all comes back to me. I remember how, as my attention wandered while Sema was talking, I mused about whether she would stay with the tour after J. caught Henry trying to seduce her and making a fool of

himself. I was sitting in the back of the bus on our way to Pergamum with Gertrude and Pearl on one side of me and Sarah on the other. All our thoughts were stirred up by Sema's exposition and inevitably we began discussing the problems facing the beleaguered human species today, involving such depressing tangles as pollution, corruption, birth control, poverty, ignorance, and many others. But over-riding all of these is the unspeakable horror called war. In our century the development of science has brought with it as a byproduct the serious danger of the total destruction of our species. In the short space of my lifetime alone this danger became a very real possibility and could now be called a definite probability.

We began discussing human history a bit. Sarah added to Sema's talk by quoting Gibbon's famous statement that history is little more than the register of the crimes, follies, and misfortunes of mankind, a comment almost identically made by Voltaire and, of course, Hegel, and Schopenhauer. Gertrude pointed out that historians sharpen our realization that war is insanity, forcing us to wonder why psychiatrists have not been more active in trying to understand the causes of war. She added that even today those who directly protest war are sometimes looked upon as flirting with treason and few if any psychiatrists have devoted themselves to a study of war.

I said, "Even Freud, who had opinions on so many subjects, had little to offer on the subject of war beside his famous correspondence with Einstein.

Probably this was a function of his pessimistic outlook about human nature, a view that found adequate justification in political events after his death.”

Machiavelli again!

Pearl quietly added, “Herodotus demonstrates that customs weigh like a yoke on the thought processes of each nation, so greatly attached is each nation to the customs it practices. Acknowledgement of customs as a whole, in their infinite and contradictory variety, could become an instrument for the liberation of our minds and a valuable tool for understanding people. This is especially true, as Herodotus points out, because people are so attached to their customs, habits, and preconceptions that all their thinking remains narrowly bound in the strictures of their prejudices, frequently described by them as absolute truths worth killing for.”

“Thucydides studied what he called the suicide of Greece,” said Gertrude, “The Peloponnesian War produced a serious decline in Western civilization. The circumstances were remarkably similar to those of today and Thucydides showed amazing prescience in predicting that his study would be useful for future ages in a similar predicament. Thucydides’ approach demonstrates a reverence for truth, an acuteness of observation, an impartiality of judgment, an appreciation of the splendor of language and a fascination with style. He recognized no guiding gods, no divine plan, and not

even progress, and he saw life and history as a tragedy redeemed now and then by great men but always relapsing into superstition and war.”

I agreed, saying, “Thucydides is one of the true forerunners of modern psychology. He draws the four or five central characters of his historical tragedy with great care and presents a view of human nature based on the desire to live and to possess. Self-interest and the sense of honor are for him the motives underlying all human action, and this he says is even truer of the behavior of states and nations.”

“Similarly,” added professor Sarah, “the writings of Titus Livius (Livy), the famous Roman historian, present the endless series of bloody battles and wars that constitute the history of Rome, but he puts a spin on it to make it an artistic epic of Rome’s ‘progress’. Tacitus, a later Roman historian, uses history as a sermon, teaching ethics by horrible examples and attempting to inspire by describing virtuous people. He is a gripping historian, full of irony and melancholy in his essentially pessimistic view of man. In reading Tacitus,” continued Sarah, “one feels the chill of an unrelieved fundamentalist sermon. He is most realistic in his pessimistic appraisal of men and makes a serious effort to understand the main characters in his historical narrative in the tradition of Thucydides. He takes great pains to delineate the characters involved, for the purpose of investigating men and their motives.” The spirit of Machiavelli, who wrote his *Discourses* on Livius, seemed to be dominating

this rather gloomy conversation.

Ali had been listening to our discussion in the seat in front of us and he turned to me and said, "Are you suggesting that to become a first class psychodynamic psychiatrist one has to steep one's self in the historical classics? How many psychiatrists have read Herodotus, Gibbon, Thucydides, Livy and Tacitus?" "Yes," I replied, "It is inconceivable to me that anybody can attempt to understand the inner workings of the human mind without standing on the shoulders of giants like these. The classical historians at their best illustrate the importance of approaching human beings and human history by energetic inquiry into their customs and beliefs, focussing on their development and their characters. An objective search for truth based on acute observation, preferably with the author on the scene at the time, and where no detail is considered irrelevant, forms the best underlying historical method."

Henry, sitting with J. in front of us on the other side of the aisle, was also listening and he remarked, "Returning again to Gibbon, the processes that lead to the decay of a country from within are nowhere better described than in Gibbon's special kind of neo-classical prose, but the wisdom in his narrative goes even deeper. His thesis is that the life of the man of reason in history is tragic by nature, that is to say, this tragedy is the central focus of the predicament of modern man."

"I want to add," I said, "that Voltaire visualized human nature already as remaining essentially the same in all ages and lands, and he argued that custom, chance, and accidents determine human history more than human ability, reason, or genius. He also made an interesting and important distinction between 'academic philosophers and theologians' who, he wrote, use a 'technically philosophic' method and produce 'foolish systems,' and contrasted them with thinkers like himself (of course) who use a 'scientific and pragmatic' approach to human problems. Like Thucydides, he approached history in a philosophical spirit and altogether excluded the supernatural."

"Is there no way that the world can be made better?" asked Ali. "Where are we all going, and what can be rationally done to influence the direction of civilization? Humans seem to have been unable to determine the direction of the series of crimes, follies, and misfortunes that constitute our history; in fact, if anything, with the advent of scientific methods of killing, the scope of these crimes, follies, and misfortunes has become greater, more devastating, and extremely dangerous to humanity!"

There was a silence as all of us turned Ali's question over in our mind. "Well," I began although not very enthusiastically, "Voltaire hoped that he had discovered some seeds in human nature such as the 'love of order' that might prevent history, that series of useless cruelties, from leading to our total

destruction.” “But,” interrupted Pearl, “in Mommsen’s work on the history of Rome he suggested the inevitability of the fall of successful civilizations. That is to say, he thought that material success for a nation carries automatically within it the seeds of future decay and deterioration. So in his history of Rome he demonstrated that victory and complete supremacy posed the only tests that the Roman republic could not meet.”

Sarah, with her usual phenomenal memory, not to be outdone in any academic conversation added, “Momsen wrote that large disparities of wealth developed, and the produce of the estates of the wealthy patricians undersold and bankrupted the small farms from which Rome had drawn many of its soldiers. The sturdy self-respecting Roman *pater familias* became increasingly lost in the growing faceless proletariat of the imperial city, which expected to be coddled, flattered, and bribed directly or indirectly by competing demagogues.” I thought, “Machiavelli again!”

Pearl’s answer was somewhat different. She said carefully, “Perhaps there are cyclic rhythms in history as suggested by the work of Vico, Spengler, and Toynbee, and others. Although these historians come up with very different conclusions and prophesies, there is a similarity in their emphasis on inevitable rises and falls. Of course they take us away from the great hope of the Enlightenment—that humans can affect the progress of their civilization—but they reflect a certain desperate frustration with the capacity

of reason and science to order the affairs of men, parallel to the various recent withdrawals into sterile logical analysis in philosophy and the adoption of pseudo-biological approaches psychiatry.”

“Can any of you tell me a little more about Spengler and Toynbee?” asked Ali plaintively. He was beginning to realize how little he had been taught about humans individually or collectively in his residency, one that so much emphasized pharmacology. Marsha, being the kind of person she was, began to have a lot of sympathy for Ali and Claire. She got up from her seat next to George farther forward, where she had overheard the conversation, and came over to the place Claire and Ali (of course) were sitting. She explained, “Spengler insisted that every great culture is a separate organism and there is ordinarily no influence of one culture upon another, although he does mention certain significant exceptions. He said cultures rise and fall out of an inherent tendency that is their unavoidable destiny. There is no progressive stream of civilization but only the periodic growth and decay of unique cultures, determined from within by their own peculiar properties. Each culture passes through age phases that Spengler labeled springtime, summer, autumn, and winter. There is always a crucial turning point beyond which the forces of death are in the ascendancy. There is a similarity here to Freud’s notion of the death instinct, *thanatos*, inherent in each human being. Spengler believed the nineteenth century ushered in the winter of the western world and so we are at the beginning of the end. He believed nothing

can be done about this decline. Toynbee developed an equally arbitrary theory, also based on a cyclical rhythm that he claimed to discover to apply to every civilization, a recurrent pattern of genesis, growth, breakdown, and disintegration. But he added a mental twist that abandons all empirical or scientific methodology. He decided that the hand of the Christian god is behind this pattern. For Toynbee, the chariot of history moves with God in the driver's seat, toward divine purposes by means of the wheels of the cycles of rise and fall."

Sarah nodded in agreement as Marsha spoke. Gertrude mistakenly took that to mean Sarah agreed with Spengler and Toynbee, and finally said, "This is certainly not history for the scientifically minded gatherer of the facts. I like the cool and objective voice of reason, as did Freud. What appeals to me is the voice of Voltaire and the *philosophes* of the Enlightenment, of the tradition of British empiricism, and of Bertrand Russell. How can we be so different Sarah?," she asked, "It's no wonder we could not remain together." And she hugged Pearl, who kissed her on the cheek.

"T.S. Eliot made the excellent point that all thinking persons must choose whether to maintain an open-mindedness in the face of the unknown and the awesome in the heavens and in human events, or to make a leap of faith into some religious explanation," continued the English professor Sarah, proudly ignoring Gertrude's provocations, "The advantages of the religious

explanation are in the answers to questions and the peace of mind that it brings; the disadvantage is that further scientific exploration is discouraged and rationalistic hope of changing the course of events through science and reason are diminished because the emotional investment is displaced from man to God."

"Perhaps it is the destiny," I added rather pompously, bringing in an unreasonable term borrowed from Nietzsche, "for each culture to decline into a rigid and materialistic civilization characterized by the presence of big cities and big mobs, without any new ideas, and replete with the preoccupation of *panem et circenses* and, above all, what historians have called the 'money spirit'. Spengler remarked that we cannot help it if we are born as men of the early winter of civilization instead of on the golden summit of a ripe culture, a Phidias or a Mozart time. Such a theory is certainly tenable, and the events of the past few years seem to justify it in many ways. At the same time, the rapid progress of science has led to a vast unpredictable element in our history that seems to me to defy any forecasts of destiny or of inevitable doom or decay. We are still in the midst of a science explosion, and who knows where it will lead us? There is no evidence that the discoveries and explorations of the past two hundred years are in any phase of decline in the Western world."

By this time the bus had reached Pergamum but the discussion was so interesting that the others joined in. We left the bus and stood around while

Sema waited impatiently. "If there is to be any hope of altering our destiny," said George, "it lies in utilizing the spirit of Voltaire, in the progress of reason and science. There are two crucial problems that philosophers and psychologists teach us must be solved if our civilization is to survive and not to follow gloomy predictions. These are first, we must develop a mutual tolerance of customs and ideas, always thinking of all humans as forming a single family, and second, we must put a permanent end to the insanity of war. Historians offer much on these problems, especially giving us perspective on the foolishness of all chauvinism and fanatical convictions of every kind and about the useless scourge of insanity called war."

"In my opinion," I said, "these are both serious medical and psychiatric problems. Hatred, intolerance, prejudice and jingoism can be best understood as characterologic defenses of a pathological nature and as consequence of a serious defect in psychological development. Our attitude toward wars of any kind still remains unscientific. Wars should be looked on as pathological failures in the family of man. In a similar fashion, the psychiatrist sees parents who must resort to beating their children with straps, hair brushes, and other weapons when they are unable to understand or to cope with their children, usually due to shortcomings in their own psychological development. So I insist that the crucial question of the survival of our civilization rests on basically medical and psychological problems involving the prevention of uncontrolled aggression, the cure for hatred and intolerance, and the

elimination of war. I do not understand why various world medical and psychiatric associations and corresponding world organizations do not do much more to create and support multidisciplinary study groups to concentrate on these problems of group psychopathology. This creation could be done without insurmountable difficulties.” As I look on that comment now, I see how foolish it was, for Machiavelli gives us plenty of reasons why princes wish to hang on to hatred and intolerance, especially of other nations and of their enemies at home. And the media is at the service of the prince, or in our culture the billionaires, and is increasingly influential, bellowing to a public increasingly uneducated and gullible.

At the time, however, I went on with my idealistic and naïve sermon to the group: “My view of course implies more than the appointment of a committee! These organizations must inform the public that our survival is at basis a public health problem, and attempt to stimulate and organize a massive worldwide effort to deal with the problem in our tradition of mobilizing against virulent international epidemics. We are faced with a public health problem of the first magnitude—the issue of our own survival. We have to understand humankind in terms of understanding thoroughly the customs, habits, and manner of thought of each family and each nation or ethnic group. This is because there is such an enormous influence that such customs and habits exercise on the very thinking processes of families and nations, as Heidegger pointed out, each of which sets itself as the sole

possessor of eternal truth and wisdom.”

Henry reminded us how Bertrand Russell also insisted that man has to learn of the human family as one (What a dreamer, Machiavelli would say). Russell argued that humans still live by the law of the jungle and have little sense of common humanity. The human sees his fellow human not as a collaborator in a common purpose, but as an enemy who will kill if he or she is not killed. Whatever the person’s sect or party may be, he or she believes that it embodies ultimate and eternal wisdom, and that the opposite party embodies ultimate and absolute folly.”

By this time we had made our way to the ruins of Pergamum, which were impressive mostly in our imagination because there was not really very much left. I could imagine an historian describing in a dreamlike fashion the rise and fall of this once magnificent cultural center of the contemporary world, and I thought of the words of Virgil⁴, as Aeneas enters the underworld:

In the courtyard a shadowy giant elm
Spreads ancient boughs, her ancient arms where dreams,
False dreams, the old tale goes, beneath each leaf
Cling and are numberless.

From this thought about the confusion of dreams and reality in history I predictably began to muse, “Here lies what apparently is my false dream of somehow reaching a passionate fusion with J., the object of my undying love.”

Looking around, I noticed that J. was busy traversing the ruins and avoiding my both adoring and lecherous glances because she did not want to raise her husband's suspicions and, frankly, because I was annoying her. Her behavior made perfect sense. I painfully remembered what had happened the night before, when quotations from Virgil first began running through my feverish mind.

Everyone was present at dinner but the group seemed rather discouraged with the touring about and lack of especially impressive ruins they had come to expect, so I brought up the history of Pergamum and its endless military and ruler vicissitudes and changes again for discussion. This led to some of Machiavelli's ideas being reviewed, and what kept coming back to me was his comment I already mentioned, "Men forget more easily the death of their father than the loss of their patrimony". I thought this might lead to Freud's emphasis on the Oedipus complex and orient the discussion from sociology and history back to psychoanalytic psychiatry, so I quoted it when it seemed appropriate to do so. I reminded the group that Machiavelli said men could not be changed, yet Freud believed that analysis of the Oedipus complex could indeed produce significant change in a person. My plan worked.

"I don't agree with any of that," said Sarah, now happily coming from her own area of expertise. "People do change; for example, Emma, in Jane

Austin's *Emma*, underwent a considerable experience of insight into herself and changed in a major fashion without ever being on a psychoanalyst's couch." Gertrude, not to be outdone by her past innamorata, claimed that all the concentration on the Oedipus complex by Freud and the old Freudians was now obsolete. She stressed change by analysis of enactments in the treatment both on the part of the patient and the psychiatrist.

This stirred George to his only long talk on the trip. He began, "My father died when I was very young. I had a deeply ambivalent relationship with my mother for as long as I can remember, but when she got old and got hit by a car while crossing the street I found myself soon developing hypertension. She did not die right away, but lingered in a dilapidated condition, and I started to experience angina. I was 45 years old. It was this episode that drove me to explore psychoanalysis, and eventually to have a training analysis and become a practicing psychoanalyst. I believe psychoanalysis saved my life. Franz Alexander used to summarize the dynamics when he heard case presentations from residents and candidates, and he always made it a point to focus on the Oedipus complex and its vicissitudes. I would like to offer a brief case presentation that shows how intense and active this can be, even pervading a person's entire life." I was delighted to hear from George and the group was apparently quite interested so I urged him to do the presentation right now. "Fine," he said, and being a member of the old school of physicians, he stood up to make his presentation and remarked, "I want to

show you how complicated this matter of the Oedipus complex can become, how confused a therapist can get, and how important it is.”

George's Case

“As I went over and over in my mind thinking about the meaning of my father in my own psychological economy, I became slowly convinced that Freud had overlooked a dimension of human existence in his description of the rivalry between father and son. Freud insisted that one of the most significant events to ever occur in the life of a man is the death of his father, but Freud emphasized the negative aspect of this relationship and the unconscious death wishes that lent such an emotional punch to the event. It was actually a patient that made me finally aware of the complementary potentially positive aspect of a man's relationship with his father, one that in many cases is even more important.

“For two years I had struggled in intensive psychodynamic psychotherapy with a forty-six year old executive, a man named Ken who had performed brilliantly in business—a business established by his father which he eventually took over. Ken found himself subject to a strange disintegration that began about a year or so before he consulted me. Ken was a talented artist as a youth but his father, who endlessly prided himself on being a ‘self-made man,’ was determined to force him into the business world and to pass on his tremendously successful enterprise to his son upon retirement.

“The first real rumblings of difficulties occurred when the future patient Ken went to college and father insisted that he join a fraternity in order to

‘establish business connections.’ Ken wanted to go to the Art Institute of Chicago and immerse himself in artistic activity, but he obeyed his father. He found himself immediately alienated from his fraternity brothers at the University of Iowa and unable to enjoy or participate in the college drinking and carousing and the whole value system symbolized by what his father called ‘amounting to a hill of beans.’ Being groomed for a lifetime of making money and viewing other people as ‘contacts’ filled Ken with a sense of horror. After a few weeks of freshman hazing at the fraternity, he broke out from his head to his toes with a severe neurodermatitis that was so bad he had to be hospitalized. This marked the end of his college career and the end of his formal education. He went home to take a position in his father’s business, to be daily under the thumb of his father and subject to the incessant lectures of this ‘self-made’ man, who began as a farm hand and with his savings opened a business at which he worked day and night and made it into a success. The American Dream came true.

Although he allegedly hated every minute of it, Ken performed surprisingly well and his neurodermatitis never returned. By the time his father retired, he was running the business himself. When his father died Ken was also a success by every standard of the American Dream. He had wealth, a beautiful wife, and three children attending fashionable Eastern universities. Like his father, he was the envy of the neighborhood and a pillar of the community.

Ken's mother died when he was a young man and his only memory of her was that of a harsh unsmiling face. She was a farm girl with no interests and was completely preoccupied with wifely obedience in an old fashioned manner to her dominating husband. Ken also reported that she tended to favor his younger sibling who was the baby of the family and who followed the father's value system without hesitation. Later on, over-reaching himself in business with heavy financial speculation in an attempt to outdo his father's wealth, Ken's brother ended in bankruptcy and killed himself. Ken and his brother were totally unable to communicate and had not seen each other for years even before that.

"Ken's wife was a carbon copy of his father. She spent her day reading the *Wall Street Journal* and investing the proceeds of the business in the stock and commodity markets, which she did rather successfully. She had no interest in his artistic proclivities and he was bored with her incessant talk about the business and the investment world. They solved this intellectual stalemate by living together but going their separate ways.

The curious thing was that after his father died at the age of 86, Ken began to be tormented by a sense of emptiness and a desire for a warm smiling woman. This was not sexual; what he seemed to be looking for was a woman who would smile with approval when he presented her with his various artistic products, for he had maintained this interest through

photography and esthetic gardening. His back yard was a blaze of colorful flowers, the envy of the neighborhood.

“As years progressed Ken began to drink, never to the point that it interfered with his work, but enough so that he would lose some of his self control and find himself impulsively calling some of his women employees in the evening just to say hello and chat. His employees soon began to think of him as an eccentric, and matters progressed to the point where Ken had trouble sleeping and began spending long hours in the early morning pacing in an agitated way in the basement. There were no suicidal thoughts; in fact there were no especially depressing thoughts at all, just profound loneliness and tremendous agitation. Although during this period Ken was able to work successfully, still he found his inner tension and preoccupation unbearable and decided to consult a psychiatrist. I came to his attention through the report of a neighbor who had consulted me successfully, and so Ken became one of my patients.

“It would have been reasonable to begin therapy by prescribing medication but I decided to wait a short while to see what story would unfold, and was not surprised to discover that within three or four weeks of twice a week psychotherapy, about the same length of time it takes for most antidepressants to work when they are given, the patient appeared much better. Thus medication became unnecessary and I decided to proceed with

an intensive uncovering treatment, three times weekly using the couch.

“Two years followed, which were marked by my efforts to interpret transference and historical material as relating to Ken’s Oedipus complex and unconscious death wishes toward his father. Ken repeatedly rejected all such interpretations, pointing out that he was well aware of his hatred and death wishes for his father. What plagued him were not such wishes but the guilty feeling that in his father’s eyes he still had not amounted to a ‘hill of beans.’ Ken kept remembering the voice of his father lecturing to him over and over again. To further complicate the picture, regardless of the repeatedly rejected interpretations the patient made rapid progress and reached an apparent recovery. His mid-life crisis seemed over!

“Yet in spite of my best efforts I could not help the patient to develop his nascent artistic self because, whenever the patient took time off from business and engaged in various forms of creativity, he felt guilty and heard in his mind the voice of his father berating him and insisting he would ‘never amount to anything.’

“As I carefully listened, I associated to an early memory reported by Freud of how as a little boy Freud had urinated in his parent’s bedroom and then overheard his father tell his mother that he would never amount to anything. Freud later interpreted this urination as due to sexual excitement

on the basis of the Oedipus complex, but he did not focus on the exhibitionistic and attention-getting aspects of such behavior. From Freud's point of view, his father's comment was an appropriate recognition of oedipal rivalry and not, as I saw it, an empathic failure in which a father and mother do not recognize their young boy's craving need for attention and love.

Only in reflecting on the death of my father and the swarm of sensations and images that came to my mind, did the reason for the therapeutic incongruity with Ken begin to emerge. Ken's father was not primarily an oedipal rival, he was instead a substitute for the absent mirroring function of his deceased preoedipal mother. The gratification obtained from Ken's father's persistent intrusive and allegedly obnoxious attention to Ken's development and his repeated efforts to force Ken to amount to 'a hill of beans' represented at least some form of abortive intensive preoccupation with Ken. This represented for the unfortunate patient the only available psychic nutrients in a vital developmental area, and for its sake he sacrificed his true artistic self.

By working for years in the immediate proximity of his father, 'enduring' the sermons, lectures, and complaints, Ken assured himself of one human being who was intensely interested in what he was doing. The loss of this person broke up an equilibrium of many years duration and left Ken back where he was as a preoedipal child, with an empty depleted nuclear self.

The agitated pacing and the frantic telephone calls and the drinking represented last-ditch unsuccessful efforts to restore lost equilibrium. Only when the patient came into treatment and experienced my intense interest and repeated efforts to understand and to help, did Ken experience again the one and only way he had of counteracting the inner emptiness. I had misunderstood the case by coming from the negative side of the Oedipus complex. The patient was using the psychotherapy as a repetition of his experience with his father in order to maintain his equilibrium and repair his fragmentation, and it really made no difference what interpretations or explanations I made. Just like his father's sermons and exhortations they were outside the realm of what the patient could use or even cared to be bothered with. Ken was irrevocably fixed at a preverbal level of development in this area and he had to have a continuous intense selfobject experience to buttress his shaky psychic apparatus and now to get it at least long enough from me to pull himself together after the loss of his father."

"What is a selfobject experience?" interrupted Ali excitedly. "At the archaic level it is when the other person is so immersed in you, even though that person may only imagine it, the person does not know where you end and he or she begins. Or later, the person views himself or herself as your twin and imitates you in every way. As development continues the person just craves your approval. In adolescence this shifts to the peer group or gang with its graffiti, and in adulthood symbols such as the flag or being fans of the

same sports team or even religion functions to shore up the sense of self”, explained George.

He then continued, “Understanding this patient led me to a deeper acquaintance with the role of my father in my own life and helped me to appreciate the intensity of Ken’s loss. Like Ken, I was somewhat uncertain as to how to replace such a vital source of nutrience; but unlike Ken I did not need the actual living presence of my father on a day-to-day basis to maintain psychic equilibrium. This role was assigned to my mother. When she disintegrated after the accident, like Ken, I was strongly propelled into psychoanalytic therapy.”

Here George sort of broke off his case presentation and began musing out loud, as I remember it. He said, “I found myself lighting a *Yahrzeit* candle on the anniversary of my father’s death. I was not religious but an eerie sense of ceremony and reunification crept through my soul as I watched the candle flicker on the kitchen table. Somewhere in the deepest recesses of the human mind there must be kept alive a continuing source of inner sunlight that bathes the soul in a glow of self-esteem. Curiously, I thought, this can happen in two ways. Either we have within ourselves an inner equilibrium based on a memory of approving smiles, or at other times when we are depleted we can experience a sense of unification with Being. The philosophical appeal of the existentialist emphasis on man as a part of Being or even, as Heidegger put it,

the shepherd of Being lies hidden here somewhere.” He continued, “When we stand on the beach and look out over the western sky and watch the play of rosy colored lights as the sun goes down over the ocean, something reverberates in us that restores a lost sense of being part of the Parmenidean universe, and this in turn has a self-confirming impact. Thus a complicated interplay goes on between an externalization of our inner needs in philosophy and religion and a subsequent reinternalization of the gratification of these needs through listening to the voice of Being” . . . here the elderly George seemed to break off, immersed in his own thoughts.

There was a quiet pause as George sat down. I am sure some thought he was very profound and others thought he was getting senile. Then Claire boldly asked, “What is the basic ego defect in so many patients that manifests itself in longing, hunger, restlessness, depression, and self abnegation, and is unanalyzable in the sense that although it can be painfully faced it is not due to a conflict but rather it represents something missing inside?” Marsha, a very intuitive person, answered, “Claire this is a very important question and needs discussion in its own right. But I think I know what is bothering you behind your question. George’s presentation made me remember musing over this very issue one afternoon years ago while waiting for a particularly frustrating patient, and daydreaming about wanting to do physical examinations again. I interpreted this as a response to the slow and frustrating work of a psychoanalytic psychotherapist who is a physician, and

the sense of isolation from the entire medical profession this entails due to the prejudice of the medical profession against psychoanalysis—and now even the prejudice of the current psychiatric profession against psychoanalysis, our very own specialty organization! They treat it like the plague, to be extirpated! I used to have a strange *déjà vu* feeling walking into a staff meeting at the hospital. As an outpatient psychotherapist I only went to the hospital for meetings and to attend lectures. It stirred up memories of being back in the hospital when I was a medical student and worked for a research laboratory and was part of medical science, the secure traditional experimental type that Freud experienced in Brücke's laboratory. It made me feel nostalgia for the old days and wonder if I had made a mistake."

Several people began commenting on this at once, but the restaurant staff in the hotel began flashing the lights as a signal they wanted to close the dining room. I could empathize with the discomfort of all thoughtful psychiatric residents like Claire, who are confused by the disagreements that are rampant in the field as to just what is the core of psychodynamics and psychoanalysis. I wondered what Freud would say to all this, and I am sure he would not welcome what had happened. I started to say, "Was George's case psychoanalysis? No. Was it psychoanalytically informed psychotherapy? Yes." But now we simply had to leave the dinner table. I resolved to address Claire's concerns as soon as possible when the opportunity to do so without getting the senior members of the group into a quarrel about what is psychoanalysis

presented itself. At this point, however, everyone seemed to have something to do and the discussion broke off when we left the dining room.

Later that evening in the hotel, as I came down to be sociable and perhaps have another opportunity to speak with J., I was rather disappointed to see that Gertrude, Sarah, and Pearl had begun drinking quite a bit at the bar. These middle-aged ladies still had a lot of spark and energy, and their subliminal tensions about their change of partners were perhaps beginning to get to them. Once more Ali cornered me and asked if I could say more about the relationship of the practice of dynamic psychiatry and psychoanalysis to these cultural and historical matters. We had gone quite far afield during the day so it was reasonable that Ali was always trying to get me to talk about what was relevant to his own education and the psychodynamic psychiatric practice that he was hoping to some day establish. I considered that interest to be a merit on his part. I liked his determination, along with that of Claire, to get what education he could out of this trip. So this time I invited just the residents Ali and Claire to come off to a corner of the lobby with me and I began to expound yet again, keeping in mind Claire's concerns stirred up by George's case presentation, that Marsha had so insightfully deciphered.

Martin Talks To The Residents

“It is very important,” I said, “to understand the significance of both cultural and family background practices and of each person’s unique infantile fantasies in providing a mental set that determines how each of us experiences the world around us and establishes an inarticulate grounding fundamental to every individual’s activities, human relationships, and self-concept. These factors constitute both the analyst and the patient, and subsequently underlie the core of the psychoanalytic process, the transference-countertransference interaction.

“The analyst’s beliefs and attitudes, personal style, and characteristic reactions are crucial components of his or her technique. The analyst’s character is defined by the complex organization of stable recurrent traits, behaviors, and attitudes. A derivative of it is the analyst’s style, which denotes more the behavioral components of the analyst’s professional identity. Patients are intimidated by aspects of our style and behavior, which they may sense are invested with a certain measure of pride and are not open to question; this is often conveyed in nonverbal ways. The sicker and more repressed patients are the most influenced by these factors, which show up especially when it is not clear to us how to proceed, for example, by our the introduction of so-called parameters (deviations from standard technique) at that point, or writing prescriptions.

“Certain character traits are even designed to evoke particular types of responses in others in order to actualize a wished-for relationship existing in fantasy. These styles and character traits of the analyst have a profound effect in determining the analyst’s day-to-day clinical decisions and interventions and in facilitating or stalemating the treatment, as well as influencing consequent transference-countertransference interactions.

“The precise interweaving and interdetermining of background practices and infantile fantasies in any individual, patient or analyst, remains murky and controversial. As the scope of psychoanalytic treatment has expanded, in our clinical work we see a variety of transference-countertransference interactions that can no longer be accounted for by simply postulating the revival of oedipal wishes now aimed across the repression barrier at the representation of the analyst. In patients with substantial preoedipal damage, other more archaic phenomena manifest themselves, thought by some to represent an ego deficit and by others to be the result of intrapsychic conflict and subsequent compromise formation. These archaic phenomena pose an immediate challenge to the character and style of the analyst. The clinician will have to decide in each case what is the optimal response, using evidence provided by the patient’s history and unfolding transference. In order to do this successfully, an understanding of how transference-countertransference interactions are grounded in background practices and infantile fantasies is essential.

“All levels of our understanding and interpreting our experiences in the world have some sort of fore-structure. Heidegger, in *Being and Time*, outlined a threefold fore-structure of interpretation. The first he called fore-having (*Vorhabe*), already having some sense of what you are dealing with, a background that is taken for granted. The second he labeled fore-conception (*Vorgriff*), having a sense of how to approach the problem. The third he named fore-sight (*Vorsicht*), having a sense of what would count as a result.

“It follows there can be no presuppositionless understanding, and all understanding and interpretation is circular. This is especially true in the human sciences, a point that is becoming more and more generally accepted. However, even the natural sciences, when viewed as a human activity, have a hermeneutic aspect, as Kuhn has carefully explicated. Kuhn’s insight is that there are no really neutral facts, for what we call facts are dependent on the presuppositions of the sciences in which they are discovered. Different scientific practices presuppose different worlds. It is not the scientific facts themselves that involve the hermeneutic circle but the implicit interpretation of the world that guides the scientific activity of the scientist, the particular fore-structure of the ‘facts,’ which is accessible only to hermeneutic investigation. The problem in the human sciences is that, to a much greater extent than in the natural sciences, the theories are attempts to make sense of the activity in question on the background of taken-for-granted practices from which the investigator can never get away. The investigator, as well as

the human subjects and behavior he or she investigates, dwell within a horizon of background practices that are so all-pervasive and subtle one can never be entirely clear about them.

“According to Heidegger, one simply lives out the culture’s version of what it is to be normal. One does not believe or choose or follow autonomous ‘desires.’ This pessimistic point of view lays very great emphasis on the early cultural background practices inculcated into the baby as it becomes a person. These practices do not necessarily even have specific linguistic articulation but are often learned by imitation and overt or covert reward and punishment. Every person, in order to be a person at all, must grow up and be trained into the routines of a particular culture. Each person can only choose an eventual role from what is available in his or her society, although the roles and goals available are not fixed. New technological and social developments are constantly changing the possibilities available, but whatever changes take place always take place on a background of accepted roles and goals. The sociocultural background may change gradually, as does a language, but rarely abruptly as the result of conscious decisions of groups or individuals, although they may try very hard to enforce it.

“A human being is socialized by other human beings through being trained to comply with norms that are multiple and often not fully available to consciousness at all. Such ‘rules’ are not fully available to any of the

participants nor could they be formulated in an explicit, context-free way. The enormous variety of background practices that are imbibed in the early relationship within the family can never be reduced to any kind of simplistic theoretical belief system.

“To illustrate, in an early discussion of the management of archaic transferences, Gedo⁵ wrote that in a case example, ‘I persisted, in spite of the lengthy rages provoked by this policy, in consistently pointing out the disavowed magical ideation at the root of the patient’s behavior, including the enactments in the analytic situation. Only the cognitive grasp of the actualities of her performances permitted the patient to gain insight into their sources in the identification with her mother.’ As Gedo explained, somewhere around 18 months of age the prevalence of the magical ideation in the patient ‘will be decisively influenced by the quality of the familial matrix.’ He added, ‘I think it is entirely likely that grandiose fantasies may not be ‘endogenous’ at all but are entirely learned,’ a comment deeply at odds with other psychoanalytic investigators and ‘schools’.

“The appearance of archaic demands according to Gedo constitutes compensatory efforts to patch over developmental deficits, skills that the patient lacks. He called these deficits apraxias, an accumulation of functional handicaps produced by early developmental vicissitudes. Gedo believed, ‘In such cases, psychoanalysis must be attempted to correct the

structuralizations of maladaptive patterns,' a kind of repair job applied to the early background practices that constitute the fore-understanding of the individual.

"Gedo pointed out that Freud's structural theory is certainly applicable to our understanding of mental development, but only from the latter half of the second year of life at the earliest. Structural concepts of the id, ego and superego, and self and object representations are a function of the acquisition of imaging capacity in which the psychic self and representational intelligence, in Piaget's terms, gradually take over. But underlying these images are the archaic phases of infantile organization with derivatives that are not necessarily ever encoded in linguistic communications. In his discussion of various psychodynamic disorders and psychophysiological dysfunctions characteristic of archaic or 'borderline' states, Gedo⁶ maintained, 'Adequate behavior depends on a variety of psychophysiological skills, beyond those of perception and cognition, for pathology of this kind comes about when primary bodily experiences are not *assimilated* into the individual's set of acknowledged personal aims.' Gedo goes so far as to insist that selfobject needs, as George explained these earlier today and claimed by Kohut to be present throughout life, 'may well disappear if patients succeed in mastering psychological skills they failed to acquire in childhood,' a contention that places him in direct opposition to Kohut. For Gedo, the selfobject transferences described by Kohut, in which the patient views the

analyst as a part of or a reflection of himself or herself, really represent an attempt to mask inadequacies at presymbolic levels of functioning through the adaptive use of external assistance.

“Organic damage is not implied in Gedo’s use of the term apaxia, although in my clinical experience, especially in the psychotherapy of patients with epilepsy and other neurological damage, this ‘apraxia’ is especially pronounced in patients with concomitant organic problems or learning disabilities. Essential adaptive skills normally are autonomous and are the same as the background practices emphasized by Heidegger that I just told you about. Whether they are lacking due to maturational lag, constitutional factors, inadequate nurture, or a combination of these, is not the relevant issue in understanding pathology. For patients with apraxia, Gedo⁷ viewed therapy as a ‘technology of instruction.’ People get into difficulty not only from certain behaviors produced by the repetition of fundamental response patterns established in infancy or early childhood but also from maladaptive or troublesome types of conduct that result from apraxia.’ The demonstration of these skills to patients Gedo called ‘beyond interpretation,’ and he considered this remedial education vital since ‘even remediable instances of disorders in thought, communication, learning, planning, affectivity, or the regulation of tensions will not respond to the resolution of intrapsychic conflicts—disorders of this type require a variety of interventions that psychoanalysts have hitherto regarded as ‘nonanalytic’ educational

measures.’ So, for Gedo as it was for Heraclitus, ‘Everyone to a large extent determines his own unfavorable destiny’ and rationalizations cover the self-restrictive or self-damaging enactments ‘that could be stopped if only patients recognized that options are open to them.’

“In a clinically valuable comment, Gedo pointed out that people with overwhelming psychological deficits can reach adulthood and adapt adequately by learning to imitate the behavior of other adults, ‘although they usually feel imposturous and fraudulent while doing so. Or they may adapt through a symbiosis to a selfobject such as in George’s case of Ken; even their use of the couch in psychoanalysis is primarily also for a holding experience. Interpretations are heard as soothing proof of caring, regardless of their content, which is ignored.’

“Gedo goes on to claim that the identification with a sick parent may commonly produce ‘focal disorders’ in thinking, because the parent identified with suffered from the same handicaps. Apparent apraxias appearing in psychoanalytic treatment must be labeled either as a temporary regression, or as an apraxia and ignorance of the rules of communication, or as identification with bizarre caretakers.”

I had to break off my talk at this point, which I think was already wearing out Ali and Claire, because the sound of raised voices from the other

side of the lobby near the bar became impossible to ignore. Returning there, we found Gertrude, Pearl, and Sarah rather drunk and behaving in an egregiously uninhibited fashion. They were singing and dancing with each other and had attracted quite a crowd of onlookers who were muttering about ugly American tourists. Clearly the tension among the three over their homosexual proclivities and rivalries had become almost unbearable and they had tried to do something about it through the use of alcohol. I became afraid that something would have to be done because these tensions threatened to disrupt the rest of the trip and to erupt into such phenomena as these drinking bouts, embarrassing all of us. It was with the greatest difficulty that the hotel management and I were able to get them to their rooms to sleep it off.

Claire and Ali were embarrassed by this display and had disappeared somewhere and that left J., Henry, and myself sitting alone in the lobby and exhausted, after the others had all gone to bed. At first I was afraid that Henry was going to confront me about my attention to his wife, but instead, being supremely confident of her loyalty and with very little concern for her needs, he yawned sleepily and said he was wandering off to bed also. That left me alone with J. who again began to cry.

Once more I held out my arms to her, hoping to achieve fusion at last. Once more I completely misunderstood her, failed her empathically out of my

own intense need. Instead of falling into my arms, she recoiled, and I realized her tears were those of anger, not sadness. "Martin, I have had just about enough of you", she said. "All through this trip I have had to endure your longing and your staring at me, to my embarrassment and discomfort. Everybody on the trip, including Henry, has become aware of your thoughts and why you have invited us to come along."

"I do not care," I replied. "I love you desperately, and can not imagine life without you. In my entire life I have never experienced such a passion, nor have I met anyone with so much beauty in both body and soul. Just looking at you is an intense aesthetic experience for me, very much like tarrying before a great work of art or architecture like the temple of Pergamum."

"Enough already," she cried. "Leave me alone! I want to be loyal to my husband even though he is not loyal to me and does not love me and I do not love him. And I am a human being, not a piece of architecture or a piece of anything else!"

"But isn't that foolish and self-defeating?," I asked, "Which is better, that you stay with a man you do not love and lose your temper at him and make his and your life miserable, or that you allow yourself to bask in the sunshine of our love. If you do, you will have an easier time with him and not feel so guilty and bad about always yelling at him and perhaps driving him to sexual

affairs.”

“I feel that you are asking me to do something wrong, and that you know it” she replied, “and I will not do it. And that is that. Leave me alone! Please do not protest your love for me, as I cannot return it. As far as I am concerned we need never see each other again. I will send you an e-mail every once in a while asking how you are, and that is that.”

“I don’t want an e-mail pen-pal,” I retorted, “This is a terrible disappointment and loss for me that I will never get over.” “That is too bad,” she answered, “but that is the way it has to be. So leave me alone! I do not want anything further to do with you except an occasional e-mail, and if you don’t like that, don’t answer it.” She turned her back on me and stalked off in a temper, making further conversation or importunity on my part impossible.

Slowly I walked to my room, took my cardiac pills, and prepared for bed. I felt devastated, crushed, bereft and injured beyond repair. Lying in bed in the darkened room, I felt like Herz, the 72 year old protagonist in Anita Brookner’s recent novel *Making Things Better*:

Moreover he was no longer sustained by his dreams, which had a tendency to turn menacing. The past once more made its way into his consciousness, and all the remembered faces—dead or absent, it made no difference—came back to haunt him. They had vanished into their own concerns, thought no more about him, abandoned him to a lonely end. Still he longed for a return of love, for it seemed to him that he had remained faithful.

From beginning to end he had been the lover, yet love had let him down. He dreaded coming face-to-face with that thought in the watches of a sleepless night⁸.

Notes

¹ Translation at bottom of page is from *The Life of Niccolo Machiavelli*, by R. Ridolfi. Trans. C.Grayson. University of Chicago Press, 1963, p. 13.

² Machiavelli. *Discourses*. N.Y.: Modern Library, 1950, p. 274.

³ N.Y.: Modern Library, 1950, p. 37.

⁴ *The Aeneid of Virgil*. N.Y.: Random House, 1983, p. 169.

⁵ *Advances in Clinical Psychoanalysis*. N.Y.: International Universities Press, 1981, p.113, 112, 57.

⁶ *Conceptual Issues in Psychoanalysis: Essays in History and Method*. Hillsdale, N.J.: Analytic Press, 1986, p. 175.

⁷ *The Mind in Disorder: Psychoanalytic Models of Pathology*. Hillsdale, N.J.: Analytic Press, 1988, p. 9,17,28, 30,61,197.

⁸ N.Y.: Random House, 2002, p. 99.

Chapter 8

Troy

I was not terribly surprised the next morning when Sema approached me and said she was returning to Ankara and Doctor Kozturk. She had obviously been deeply offended by the behavior of the three western professional women in the bar the night before. The hotel was buzzing with uncomplimentary gossip. Sema also rightfully complained that the triangle she was in with J. and Henry was too much for her, especially because Henry kept insisting that he wanted more of her and kept trying to complete what was interrupted when J. came upon them. She pointed out that J. and Henry have no sex life according to Henry (even though J. had indicated the opposite to me) and that J. understandably finds Sema's presence here disconcerting and hard to tolerate.

Sema, in spite of her western attire and slim beautiful appearance, was a confused person. She was torn between the Western ways of promiscuity and open sexual preferences, and the Moslem restrictions on women. She didn't like either, for in one situation there was the preponderance of sex without love that she found disgusting, and in the other situation the treatment she received was extremely demeaning and insulting. There was no way I could help her with this conflict except to remind her that I have heard this from many women who are caught between the two cultures and who sometimes

for various reasons have to travel back and forth from one to the other. A few years ago a detailed personal memoir of this sort of experience and a vivid description of the dilemma faced by modern Moslem women was published by Azar Nafisi¹, a professor at Johns Hopkins University, and there have been many such descriptions of the plight of women under Islam since that time, which emphasize the negative and leave out the positive aspects of being a Moslem woman at least in a sophisticated environment.

Sema pointed out that Ali knew Istanbul quite well because he was born and raised there, so he would probably be able to guide us. She added there was not much to see in Troy anyway. Poor Sema was an attractive female trying to find her way on her own. As is so typical in these Moslem countries, her parents were very poor and she was one of twelve children. Her mother was utterly overwhelmed and preoccupied with the problems of day to day living and her father was very conservative, worked in the fields, and expected women to rigidly obey. A family gathering in that culture, she explained, was not expected to center around children—the children were placed elsewhere while the adults talked. Only gradually, as is happening in parts of the Moslem world today, did Sema as she grew older become aware that another world existed where women were not in this thralldom. At the same time she was deeply emotionally connected to the culture and religion of her ancestors and she loved her family.

It is the invasion of the Moslem way of life by Western mores and attitudes, conveyed by the ever present television, radio, and audio cassettes that is causing the unbelievably fanatical and irreversible hatred in fundamentalist Moslems for anything Western. I remembered a conversation I had with a Moslem businessman in Chicago not long before the tour. He had brought his family of several girls and two boys from the West Bank section of "Palestine" to live in Chicago, which I considered to be a very wise move considering what is going on there. "But one day," he said, "my daughter came home from school and told me they taught her in school that homosexuals were not bad people. When I heard that I gathered up my family and sent them back to Palestine. I did not want my daughters and sons to be brought up in a culture that is so alien to the teaching of the Koran." So the businessman stayed here by himself and visited his family in "Palestine"—which he wisely displaced to Jordan—very frequently.

It did surprise me when Sema continued by abruptly turning on me! "Things are out of control here," she began, "and as the group leader it is your fault. Doctor Kozturk was right to have nothing further to do with you and your group, as you are an embarrassment to him." One could see the disappointment in her eyes. She had hoped to make new friends among western allegedly sophisticated professional women, perhaps even be invited to visit them in the United States. "So goodbye" she said curtly, as she walked briskly out of the room. She did not wait for me to interrogate her about these

opinions or to try to discuss them with her or even to give her the customary gratuity.

I was telling myself that this was no way to start the day when Lisa appeared, asking me to go over her travel plan to take the group to Troy later that morning. As she was explaining it, I kept thinking to myself how this group was unraveling with a momentum of its own almost in spite of anything that I said or did—at least that I consciously was aware of. Were they somehow responding to something in my soul? Were they upset by their sense that I was interested in J.? I could not tell.

While we were reviewing the map and preparing instructions for Abdul the bus driver, the remaining members of the group sauntered in, searching for breakfast. J. apparently already knew Sema was leaving because she seemed in a radiant and pleasurable mood, whereas her husband Henry was irritable and annoyed, especially with her. At first I ignored them both, J. because I was trying to hide my excitement at seeing her so beautiful and happy—like a goddess—and Henry because I had a plan to distract him. Meanwhile I continued to ruminate about what had happened on this trip to our shrinking group. Everyone who left so far did so with considerable anger and dissatisfaction, especially with me. Richard went first, soon followed by Edward. Now Sema was gone and I would have to rely on Ali as a guide.

Gertrude and Pearl came in behaving like an old married couple already. Gertrude pretended as if nothing unusual had happened the night before, bouncing around her plump and friendly body and downing a big breakfast provided by the hotel. Pearl followed her, clearly the submissive one of the pair just as she was with Richard, but she carried herself with more dignity. Although Pearl was quiet and drab, she was clearly very intelligent and experienced, as became obvious whenever she offered an opinion. Right now she was not offering any opinion but simply trying to wake up over her morning coffee and get past her hangover. But she also seemed none the worse for wear.

Claire and Ali, our psychiatric residents, arrived together accompanied by Marsha and George, who were clearly getting bored with all the adolescent behavior in the group coming from those whom they thought were certainly old enough to know better. Apparently, ever since Edward left, Claire had turned to Ali more and more and they were obviously rooming together now. He was certainly appropriate as a mate for her in as many ways as Edward was not. But Claire was legally married to Edward in the United States and he would be waiting for her when she returned. Because of this, both Claire and Ali looked pensive and somber; they seemed very much invested in each other and quite worried. Claire was still beautiful in spite of what had happened, and Ali could only be described as a handsome, dark, young Turk.

Finally Sarah Bollinger appeared, the least physically attractive of the lot, and this morning looking bedraggled and exhausted from the night before. She had already demonstrated an incredible memory for quotations that certainly must have made her an outstanding English teacher. In contrast to J.'s jealousy of Sema, Sarah did not seem all that unhappy about being deserted by Gertrude; she tolerated the coupling of Gertrude and Pearl in her presence quite well. I had the feeling she was perhaps secretly relieved to be rid of the bumptious and somewhat domineering Gertrude. Judging from the looks of the three women I doubted if there would be much more of the drinking or carousing that I was worried about last night. "If anyone in our group could be thought of as a kind of tragic figure," I mused, "it was Sarah." Yet she was now the only non-physician among us in the group besides Lisa and the married couple Henry and J., and it gradually dawned upon me that there was an exceptional sadness in those of us in this group who were psychiatrists. Only the aging Marsha and George seemed mature and content with life. What was their secret? Perhaps it was their genuine devotion, love, and real friendship they developed for each other over many years of a stable marriage.

The fact that he was now the only non-physician male in the group is what had given me the idea for my plan to distract Henry. Before we departed for Troy and just after breakfast I called the group together for a seminar and asked Henry to lecture on the Greek concept of the psyche. Of course this

concept keeps coming up again and again in the *Iliad* and is complicated by the appearance of various gods who speak to the psyche of the proponents. Jaynes² argued that this is evidence for an original archaic “bicameral mind,” perhaps the two cerebral hemispheres, in which thoughts are projected as coming from the god (one hemisphere) to the psyche (the other hemisphere). This fanciful notion has always intrigued me. I wish I had thought of it. Who knows? Henry, always happy to display his philosophical erudition, began to speak at once:

Henry's Second Lecture

“Before Plato, the Greek or Homeric notion of the soul was simply represented by the vague idea of a “light spirit” that left the body when the individual died. It was Socrates and Plato who put the notion of the soul at the center of philosophy and subsequently religion. Plato, in his magnificent mythology, conceived of the soul as an individual “entity” which existed before birth and continued to exist after death. In the *Symposium*, Plato defined the driving force of the soul as Eros, and each aspect of the soul had its own proper drive or desires; for example, the rational part had a passion for truth. His tripartite soul, discussed in the *Republic* and again in the *Phaedrus*, consisted essentially of a rational, a spirited, and an appetitive part. These three aspects of the soul were really principles of action involving bodily drives or needs, the passions and emotions, and human reason, which Plato hoped would rule over the whole. Whether the three aspects of the soul are separable or inseparable is never worked out, but at least Plato’s concept of soul represents an advance over that of Socrates in that Plato’s soul can suffer inner conflicts. In the *Phaedrus*, Plato describes reason, faced with all its problems, as a charioteer trying to guide a team of horses, one of them good or cooperative and the other one bad or unruly. I believe this is the earliest depiction of intrapsychic conflict in Greek philosophy.

“Aristotle denied the Platonic notion of the soul as a separate entity

having an external separate existence, although he was not consistent on the subject. He developed at greater length the notion of a multifaceted soul, resting his description on a hierarchy of: (1) a nutritive faculty; (2) a faculty involving sense perception, animal desire, and locomotion; and (3) a rational faculty unique to human beings. For Aristotle, the soul or psyche represented the actualization of ‘entelechy’ of an organic body potentially endowed with life.

“In *De Anima*, Aristotle deals with the soul of all living things. The notion of ‘life’ is not clearly distinguished from ‘psyche,’ except that ‘life’ seems to represent the manifestations of a power or powers that enable a creature to grow and reproduce, whereas the soul or psyche represents a form or essence—a cause and principle of force—in every living body. As he explains it, the soul is the *raison d’être* of the body.

“Reason (*noû*) is divided by Aristotle into a passive and active faculty of the human soul. In a much disputed passage in *De Anima*, Aristotle mentions that “active reason” might have some external existence of its own, and participates in some way with the eternal Unmoved Mover. Later, Christian theologians rejected this notion, but there is a curious inconsistency between Aristotle’s position about active reason, and the rest of his philosophy, which regards essences as inseparable from matter. Furthermore, he uses the concept of reason (*noûs*) in two ways, sometimes as scientific intellect and

practical deliberating power, and at other times as what we might call intuition or the mysterious power of grasping self-evident truths through some combination of intuition and induction. This is as far as Aristotle's psychology goes, and he explains that, "To attain any assured knowledge about the soul is one of the most difficult things in the world."

"What emerges from this in Aristotle's *Ethics* is that the overall health of the individual requires care and attention in three aspects. The first would be what Aristotle called the development of habits or virtues of character; that is to say the preservation of a healthy body and healthy mind by right habits of living and temperate choices, based on practical wisdom or the deliberating power of reason. Organic psychiatry and general medicine obviously work primarily in this area.

"Attention must also be paid to the care of the soul, especially the (*noûs*) part of the multifaceted soul. *Noûs* as intellect requires what Aristotle called active participation in the intellectual virtues. This would require active thinking, contemplation, and in modern non-Aristotelian terms, the pursuit of discovery in the various sciences and intellectual disciplines—what we commonly call using one's mind, or the pleasures of thinking.

"In addition, the intuitive aspect of *noûs* requires care, and this aspect is not clearly distinguished by Aristotle. This intuition or inner vision or

capacity to “grasp” first principles about what is real, what is good, what is beautiful, and what is valuable, demands for continuing health and well being at least four activities: 1) intimate social relationships with other human beings including the continuing experience of love and community with others throughout one’s life, 2) maintaining our sense of communion with what Searles called the nonhuman environment, 3) a strong intuitive sense of Being, in modern terminology a feeling of being immersed in or a part of ‘something’ more fundamental than one’s own limited individuality, and 4) conviction about the ‘existence’ in some fashion, of immutable and timeless truths about what is good, what is valuable, and what is beautiful. This implies faith in one’s own inner capacities to approach or grasp these eternal truths through a lifetime of thought, discussion, and immersion in the great creative and artistic works of western man.

“The soul is a force—a force toward transcendence that drives the individual to reach a sense of unification with ‘something more’ than the individual alone. This union with ‘something more’ may be termed beatitude, love of God, ecstatic experience of the One, communion with Nature, communion with the Life Force, actualizing the Form of the species, or the heightened sense of Being that Heidegger ruminated about all his life.”

* * *

The group politely applauded and Henry sat down. “Why do we need to postulate the soul?” interrupted Ali impatiently. He clearly had heard enough about Plato and Aristotle.

I replied, “Deep thinking men have been forced to presuppose such a notion since the beginning of written history. Furthermore, to clear up a common misconception, if one insists there is no such notion as the soul, one will soon be immersed in just as many philosophical and intellectual difficulties as are involved in an acceptance of the notion of the soul.”

George said, “Every human being is forced by the ambiguity of existence to make two fundamental choices that Kierkegaard called “criterionless choices” or “leaps.” We cannot avoid these choices, and their nature will have a profound effect on the way each individual lives his or her life and on the healthy or pathological state of the spiritual aspect of the human mind. These two fundamental choices are: (1) Either the human situation is utterly absurd and hopeless and one should try to make the best of it on a day-to-day basis—or one should look for a further dimension to human existence which would make more sense out of it, support it, and bring order and fulfillment to it. (2) Either there is a force in the human mind that drives people, in spite of their limitations, to “bump up” repeatedly against the limits of pure reason (as Kant put it) and constantly to strive to transcend the self and make contact with something outside of and greater than the self, a force that makes the human

being unique among the animals—or there is no such force and human beings are strictly physiochemical entities with inherent and conditioned behavior patterns exactly like all other species.”

I added, “These two fundamental choices have special meaning to every psychotherapist: Not only do they affect the personal life of therapists, but they seriously affect their approach to their patients and the psychic field they offer patients. Furthermore, since these problems and choices cannot be avoided in the dialectic of long-term psychotherapy, therapists are forced by the patient to think about them.”

Sarah joined in at this point, asking rhetorically, “What are the needs of the soul? My favorite humanist Simone Weil suggested that some of these needs are the need to seek truth, the need for a hierarchy and a place in it, the need to feel useful to the community and to receive and dispense relationships to others with justice, the need for a sense of a complete or whole self based primarily on a sense of personal integrity, the need to have some feeling of relatedness to God or Being or to nature or to the world as a whole, the need for tradition, for a rootedness in history, mythology, and customs of the group to which one belongs; and, above all, a feeling that one has transcended oneself and belongs to something more—something longer lasting and of greater value than one’s individual life.”

George said especially to Claire and Ali, “The notion of the soul expresses the belief in, and the yearning for both a firm sense of self and a sense of connection between the individual and something greater than oneself. It represents that aspect of the self which demands a relationship to something more than the self and abhors being isolated and alone. When the needs of the soul are not met, a special kind of sadness is felt. This sadness is best described by Kierkegaard who calls it ‘anguish’. It is difficult to define precisely what is meant by anguish, but all of us have felt it from time to time.”

For the sake of Claire and Ali the psychiatric residents I translated this into the clinical aspects of the topic. I explained, “There is general agreement that the rate of suicide among physicians is significantly higher than that of the general population. There are several reasons why psychiatrists especially suffer from sadness of the soul and might have a significantly higher rate of suicide than other physicians. First of all, soul sadness is clearly contagious. After laboring for long hours and for many years with chronically anguished patients, conscientious psychiatrists tend to take anguish to bed with them at night and grieve about it even in their dreams. It remains a gnawing theme in the back of their minds even on vacations and holidays. If the needs of the psychiatrist’s soul are not attended to, they reverberate to the anguish of the soul of another person, and this reverberation tends to continue, like the effect of a great poetic work such as the *Ecclesiastes*.

“Second, by the nature of psychiatrists’ lonely work, they are isolated from healthy souls. Or, even worse, the unfortunate self-isolating maladies common in our culture—money-sickness (greed) or fame-hunger (vanity)—cause psychiatrists to fall away from the sense of transcendence. Living isolated from healthy souls or caught up in greed and vanity has been described by Heidegger as a form of “falling away from Being” and the result is that one’s self becomes increasingly inauthentic and the soul endures severe privation. Isolation occurs because of the unique relationship psychiatrists have with their intensive psychodynamic psychotherapy patients—a relationship that demands from psychiatrists warmth and concern along with careful restraint regarding their own personal needs. Thus, frustration and separation are continuous and built into the nature of psychiatrists’ work, especially if they are intensive psychodynamic psychotherapists. By the time they reach their mid-forties or fifties, they are apt to suffer from a full-blown case of anguish of the soul.

“Third, in some instances physicians whose souls are already anguished enter the field of psychiatry looking for healing of the sadness of the soul. But the healing of the soul is not taught in psychiatric residency training or discussed in chapters of modern psychiatric textbooks. So the unfortunate physicians with sad souls who turn to psychiatry for help find no help at all during psychiatric residency training. Later, as they begin to realize that they have not found help, the anguish of their souls becomes unbearable, and

unconscious urges to self-destruct begin to emerge in psychosomatic or impulsive ways.”

“Is there anything we can offer to those who suffer from anguish or sadness of the soul?” asked Ali.

Pearl was now fully over her hangover and paying close attention. She answered, “There are no psychopharmacological agents in our armamentarium; there is only common sense and the wisdom of the ages. If psychiatrists (or patients) become aware that they are suffering from sadness of the soul, there are some things that can be said to them, providing they are willing to listen. We can begin by calling their attention to Socrates, who repeatedly demanded that his partners in dialectic look toward the inner vision of their own souls to recognize and know themselves. By introspective concentration on their inner vision, people can discover what is good, what is beautiful, what is important—what they should be like. If we can get the anguished soul to take the time to bother to look inward, we can find hope”.

Marsha gently added, “We also can offer to those who suffer from sadness of the soul other examples of men of great souls like Lincoln or Schweitzer who inspired people through the development of their personal life-style, bringing them from anguish of the soul to a sense of integrity and fulfillment of the needs of the soul. Perhaps it takes contact with men of great

souls to heal anguish of the soul; certainly reading psychiatric textbooks will not affect a cure”.

“We can help those physicians suffering from anguish of the soul by reintroducing quality into their lives. We must urge them to find time to keep up with and contribute to medicine, to expand their souls through the transcendent beauty of art and music, and to contemplate human life in terms of first principles; what is true, what is good, and what is valuable,” suggested Gertrude. “And not to solve the problem by recourse to alcohol or other drugs,” I could not help adding, with a wink at Marsha and George.

Sarah, winding up for another of her remarkable memorized quotations, interrupted with a glint of malice in her eyes toward Gertrude, “Gilbert Highet³, my favorite professor and one of the inspiring teachers of our time, put it this way: ‘Wholeness of the mind and spirit is not a quality conferred on us by nature or by God. It is like health, virtue, and knowledge. Man has the capacity to attain it; but to achieve it depends on his own efforts.’ Highet then goes on to say,

That is the lesson that the great books, above almost all other possessions of the human spirit, are designed to teach. It is not possible to study them—beginning with Homer and the Bible and coming down to the magnificent novels of yesterday . . . and of today . . . without realizing, first, the existence of permanent moral and intellectual standards; second, the difficulty of maintaining them in one’s own life; and, third, the necessity of preserving them against their chief enemies, folly and barbarism.

“Clearly,” I said, “a firm sense of self and a mature capacity for love and intimacy with others are indispensable foundations for replenishing the anguish of the soul. Psychoanalytically oriented psychiatrists should be protected from the chronic drain of their demanding work. Intensive psychodynamic psychotherapy and, even better, a personal psychoanalysis is mandatory to enhance these capacities within us, and common sense should force psychiatrists to seek such therapy as a protection during residency training or later on in life when they sense the beginning of anguish of the soul.

“Not enough has been done to reduce the isolation of the practicing psychiatrist or to provide an atmosphere where self-esteem can be enhanced by personal psychotherapy. Channels for consultation with colleagues are not sufficiently open and families of psychiatrists have not been educated to the fact that psychiatrists are also human beings and at times must be strongly urged to get help by those around them. Contrary to the popular misconception, it is that psychiatrist who seeks help by consultation and further psychotherapy who shows best his or her capacity to help patients. The psychiatrist who denies his or her needs and pretends to be self-sufficient may temporarily impress those around, but actually the psychiatrist is showing weakness rather than strength. Support from colleagues and loved ones is vital if the psychiatrist is to deal with the narcissistic problems involved in seeking help and consultation.”

Pearl was being swept up by this topic, and she requested the group to listen to a case presentation related to it. Ali and Claire were especially excited about this and urged her to begin. Thinking she would be asked to present a clinical case, Henry and J. chose to return to their room to begin packing for the ride to Troy. Gertrude would have preferred a walk in the garden after breakfast. Sarah sat back quietly, listening and observing. However, as agreed, Lisa had already gone out to talk to Abdul and give directions. So I felt now it was time for us to go to Troy, and the presentation could wait until later.

The visit to Troy was a great disappointment. One of the first things we saw was a big wooden horse, which had apparently been built to attract tourists and gave the whole area a kind of Disney world ambiance. It was situated at the entrance to the present ruins of Troy. Actually the ruins that are most important are the ones that are known as Troy VI, but one must use a great deal of imagination to convince one's self that these really represent the great city that Homer describes in the *Iliad*. Little is left of the ancient glories of King Priam; the high towers and walls, palaces and temples, all described by Homer are gone. There are actually nine separate cities of altogether forty settlement layers on the same spot in that location. It is unclear whether the Trojan war ever actually happened or if it did, at which particular settlement. I reminded the group we were dealing with the same approximate era during which the Hittite empire ended, around 1200 B.C.E.,

as we explored in Hattusas.

The ridiculous wooden horse was constructed from the pine trees of the Ida Mountains, as it is thought the original wooden horse was built from in the Trojan War, if indeed there was such a war. This wooden horse does not appear in the poetic epics of Homer; the story of it is described by Virgil in the *Aeneid*. The current one was constructed in 1974.

The excavations suggest that in about 1700-1800 B.C.E., around the time when the Hittites were penetrating into Anatolia as has already been described earlier, Troy was also settled. In each case it was by people of a different culture from those of the previous settlements in the area. Nothing is known about the origins and language of those who came to Troy, but it seems likely they are related to the emigrants who penetrated mainland Greece from the north during the same period.

Ali led us to the ruins of Troy VI that were probably considered the most impressive by archaeologists, the East Tower, the East Wall, and the East Gate. The tower, walls, and the gate illustrate how Troy VI defended itself. All the walls are vertical inside and slope towards the top outside. They are built of rectangular porous limestone blocks without any mortar between them. The outward face is extremely smooth to make climbing impossible. The size of the blocks is not large and they are shaped like bricks.

Ali showed us the entrance of the East Gate, which has a corridor that apparently enabled the inhabitants to defend the entrance by cross firing at the enemy using arrows, spears, and boulders from both sides. The East Tower is located some distance away; perhaps it was built to prevent the enemy from gathering at the back of the narrow entrance.

The ruins of megaron houses of the type built after 3000 B.C.E., long and narrow and consisting of one front room as entrance and a hall with a hearth in the center, may be seen behind the East Wall. Also the unfortunate damage done by the amateur archeologist Schliemann is apparent. The rest is essentially left to the imagination, with speculation abounding about the ruins. As Sema had predicted, there was little that Ali could show us that was definitive. It is clear that the Trojans had very intense cultural and trade contacts with Crete and Cyprus, the Aegean Islands, and mainland Greece. With a good imagination and considerable knowledge of the *Iliad*, one can point out the various sites in the area that are described in the *Iliad*, but there is little to see now and any evidence that this Trojan war actually took place is lacking. The site continues to attract many visitors of course, because of the romantic fantasies that can be enjoyed by applying the various descriptions of epic battles in the *Iliad* with the landscape around the ruins.

On the whole, the group was again disappointed and felt that this area had been somewhat oversold as a tourist attraction, especially with the

wooden horse! The weather was beautiful; there were a few clouds overhead in the blue sky and it was pleasantly warm. The entire brutal scenario of the final year of the Trojan war as it is described in the *Iliad* threatened to rise up in my imagination, but I had a responsibility to the group. It did not take very long to look over the ruins, and in order to pass the time I suggested we sit around and continue the discussion from earlier in the morning. Everyone agreed and Pearl began to present her case. Usually a quiet person, she began to gather enthusiasm and loquaciousness as she immersed herself in the memory of a patient with which she struggled so valiantly.

Pearl's Case

“Ms. X., an attractive, unusually talented, and intelligent forty-eight year old woman, entered psychotherapy with the chief complaints of generalized tension to the point where she was beginning to develop arthritic pain in various joints, and a morbid fear of growing old and dying, stirred up by the recent tragic death of some friends and relatives around her age.

“An unusual aspect of this case was that in areas of interpersonal relationships, marriage, and with her teen-aged children, the patient showed no major disturbances. Although there were interpersonal problems, the major motivation for treatment came out of an internal dysphoria that arose out of the realization that sickness and death would inevitably put an end to her successful narcissistic adjustment and confront her once more with the major unresolved issues of her childhood.

“The patient's mother was very immature and resented having a baby. Mother was ‘disgusted’ at the dirt and the noise, and as soon as possible trained the patient to be clean and proper, and to gain affection by performance—which her very considerable talents made it easy for her to do. Both mother and father encouraged her infantile grandiosity and focused her life on being outstanding and unique; there was very little time for childhood play. Father was a depressed obsessive man, who would sit with the patient while she practiced the piano and point out her mistakes continuously. The

parents were still living and were invited to her many successful musical and dramatic performances, where their approval was eagerly sought and their criticism had a devastating effect. In fact the patient was unable to tolerate any criticism of any kind, and found herself immediately enraged and defensive at any hint of her limitations in any area.

“Psychoanalysis was not possible with this patient because there was such a profound affect hunger and fragile sense of self that she eagerly hung on every word of mine, trying to use it for instruction as to who to be, how to live, and how to perform in order to please me. The treatment always threatened to deteriorate into an intellectualized teaching experience, and it was clear that a limited corrective intensive psychotherapy, in which a therapy of “optimal disillusion” as described by Gedo and Goldberg could take place, and carefully avoiding serious regression, was the treatment of choice.

“The emerging psychodynamics were classical for a very severe narcissistic personality disorder. On the one hand there was a deep longing to fuse with the idealized parent that could soothe and take care of her, and on the other, she clung tenaciously to a disavowed exhibitionistic grandiose self-image that did not permit any acceptance of weakness, mortality, or limitations. The grandiose self concept was reinforced by a remarkable set of creative talents that made her invariably rise to first in everything artistic that she undertook to achieve. So, she had been what we might call a

“successful narcissist” until the second half of her life, when the realization began to occur that she was beginning to decline in physical appearance and creative power, and the concept of death became an actuality of her experience.

“The patient developed an idealizing transference and in a period of four years of twice weekly psychotherapy showed a substantial mellowing and relaxation. Two major areas constituted the focus of the treatment. The first of these was her gradual understanding, through interpretation of the transference, of the profound deprivation she experienced in childhood of her natural needs for empathic soothing and relaxation in the parent-child interaction, and her consequent developmental arrest in the narcissistic stage of the grandiose self. This was further complicated by the impossibility of idealizing her father to form a compensatory structure for her depleted sense of self. He also was only interested in her as an accomplished child he could brag about to his friends that temporarily relieved his depression.

“The actual integration of her personality took place in the medium of an inevitable dialectic with herself that continued throughout the therapy, juxtaposing her grandiose notion of complete perfection and total well being for all time with the reality of the natural order of human life from birth to fruition to death. Growing awareness of the sharp contract between her fantasies of eternal perfection and the reality of human existence enabled her

to confront her disavowed grandiose self and reintegrate it into her personality, with dramatic automatic subsequent modification of her tension and fear of death. At least for this patient it was death more than anything else that brought before her the radical finitude of her existence, and it is in the light of this that every possibility now had to be evaluated. For Ms. X., death nullified everything and ruined all the grandiose strivings and aspirations of her existence, establishing a transience which she could not accept.

“She was able to recognize in the psychotherapy that our inevitable death, although it is in one sense destructive, is in another sense creative of unified responsible selfhood, the concerns of which become ordered in the face of the end. Death became a criterion for judging her concerns. Macquarrie⁴ pointed out how death exposes the superficiality and triviality of many of the ambitions and aspirations on which men and women spend their energies.

“It was through the idealizing transference and the internalization of corrective soothing emotional experiences over many sessions of psychotherapy, that the patient could give a perspective to the meaning of death for her, relinquish the fixation to an archaic grandiose self imago, and properly integrate the grandiose self. As a consequence of this relinquishment and reintegration, the patient’s ambitions began to become more appropriate

to her age and abilities, and she began to think of herself more as in communion with the natural order of things or 'nature.'

"Her strong religious faith helped her enormously with this, and added a new sense of meaning and belonging, which consoled her for the profound narcissistic blows involved in the aging and eventual dying process. She gave up her controlling behavior and as an incidental development, her children all showed dramatic improvement in their high school work and their personal lives, a bonus that she had not expected from psychotherapy. A dramatic shift occurred from compulsively demanding the attention of everyone around her to mutually enjoyable exhibitionistic sexual foreplay with her husband, without any direct discussion of this in the treatment.

"Fortunately in this case the grandiose self was sharply split off from the rest of her personality functioning and when it did not interfere (or was reintegrated) she was able to have many friendships and a strong marriage with an active sex life that needed no further therapeutic intervention. I was dealing clearly here with a disorder of the sense of self in which a developmental arrest placed the ego at the mercy of her grandiosity. This cut the patient off from a sense of Being, from communion with nature, from the nonhuman environment, and from any conviction of universal values. It left her to face the aging process and death with a profound sense of despair and aloneness, even though she otherwise had good object relationships with

friends and family. In the context of the idealizing transference and the soothing corrective emotional experiences of the psychotherapy, the patient was enabled by herself to resume her natural development; no preaching, moralizing, suggestion, or deep uncovering in other areas was necessary to achieve a successful result . . . I thank you so much for your attention to how I struggled with this case and tried to find an optimal stance to enable her to cure herself.”

I realized Pearl was discussing this case from a Kohutian viewpoint, but I decided not to get into alternative approaches because I wanted to focus back on our previous discussion of that morning. “I⁵ have remarked at length on this kind of solution,” I said, “advocating an immersion in the ongoing dialogue of mankind. That is to say, in any person living the life of the mind, there must be time for contemplation about what is true, what is good, and what is valuable, and for a study of what others have said on the subject. The particular solutions chosen at any given time, whether theological or anti-metaphysical, etc., are not the relevant issues—it is again the sense of gaining perspective on the human condition from such a study and the uplifting and humanizing feeling that results from investigating the nature of human life and its place in the universe, that counts.

“The effect of unavoidable choices every human being has to make regarding the grounding of our existence and the nature of the human soul, is

an influential force even on the personal practice of the psychotherapist. Pearl's case illustrates how problems of this nature arise in the psychotherapy of adult patients especially in late mid-life; they cannot be avoided in long term psychodynamic psychotherapy. While guarding the autonomy of the patient's ego, the psychotherapist will have to be aware of these concerns in both one's self and one's patients, and stand ready to provide an atmosphere in which the patient can come to grips—through a self-dialectic, not through therapist intrusion—with personal limitations as well as the limits of the human condition. Each person must develop their own self in their own way. The psychotherapist who refuses to recognize such problems, belittles them, or insists on analyzing them exclusively to infantile roots, deprives the patient of a chance to make sense of his or her existence, to develop compensatory structures, and to find a meaning to life. The classical Greek notion of soul, a concept that tends to be neglected these days, is useful in orienting both the psychotherapist and patient to a vital perspective especially on problems of the transience of life and the threat of aging to mental health, issues that become paramount in mid-life and determine the quality of life thereafter.

“Neglect or deprivation of the needs of the intuitive or spiritual part of the soul has led to repeated crises in western history including the existential anguish of our time—what Heidegger called ‘the darkening of the world.’ It is not an exaggeration to say that this deprivation is the foremost worldwide

psychological problem of our present historical time and, in our increasingly materialistic era, it is getting progressively worse, leading to explosive regressive fundamentalism or other self-destructive reactions, such as drug-seeking behavior.”

For once, Henry agreed with me. He said rather professorially, “Even Aristotle, with all his efforts to develop hierarchies of living things, could not but end with comments about the uniqueness of man, although he did not develop this theme at length. His most striking attention to our uniqueness is in his crucial discussion of the ‘actualization’ of each species. According to Aristotle, one of the principle kinds of change in the universe is represented by the striving of each individual of each species to become the best possible example of the form of that species. So, imbued with a wish to imitate the beloved Unmoved Mover, there is an unconscious natural striving on the part of the individual to develop his or her own form or essence to the greatest possible perfection. Humankind, however, is different, because it strives not to just actualize form; it also partakes—through active reason—in some way, of the Divine, and therefore strives to be more than it is, and more like Aristotle’s notion of the Divine—which is active reason pure and unalloyed by a material body.”

At this point it seemed apparent that some of our group members were getting bored and sleepy, so I decided to sum up this rather academic

discussion. I concluded, "It is the conception of humankind striving to transcend itself in some manner that forms one of the most important debating points in all philosophy and psychology. If one believes that there is such an intuitive spiritual force inherent in the nature of humans, then it is clear that the neglect of such a force will result in existential anguish or despair. How well even Turgenev recognized this in the 19th century in his novel *Fathers and Sons*; Dostoevsky picked this up and ran with it in his novels also. Every psychoanalytically oriented psychotherapist needs to be familiar with these remarkable works.

"Yet some brilliant philosophers such as Sartre contend that the whole matter is ridiculous. Those who claim that life is useless and absurd, and deny the possibility of overcoming the absurdity and frustrations are still nearer to a realistic appraisal of the human condition than those who believe with Marx and Lenin that better social and economic conditions can cure all the psychological ills and existential anxiety of humanity. This becomes increasingly clear as the human relationship problems of the more affluent societies, regardless of their ideology, show themselves to be just as intractable as those of the impoverished societies. One cannot deny, however, that if Marx is right about man being a species-being, then developing a society based on concern for others rather than greed would certainly lead to a better world for all. But it would not solve this intractable existential problem. We are forced to choose between two alternatives: either we

acknowledge the absurdity of the situation in which we find ourselves responsible for an existence which we lack the capacity to master, and we just have to make the best of a bad job; or we look for a further dimension in the situation, a depth beyond both man and nature that is open to us in such a way that it can make sense of our finite existence by supporting it and bringing order and fulfillment into it.

“I contend it is impossible for anyone doing psychoanalytic psychotherapy, especially with middle aged or older patients, to avoid these universal human existential problems as they arise in the dialectic of the psychotherapeutic process. This does not imply that the psychotherapist should persuade, suggest, or enforce any point of view on the patient—it only means that this intuitive aspect of the human mind must not be neglected in drawing out of the patient an actualization of his or her best potential for mental health and adaptation. The creative and intuitive processes can form an important source of joy and compensation for a depleted self and their appearance represents a vital transformation of narcissism.

“⁶ have pointed out how, in spite of his extreme skepticism about religion, Freud presented a religious-like dedication to the pursuit of truth both in his writing and his clinical work, a dedication which provided an atmosphere that made it possible to explore such problems. He seemed unaware that in presenting such an approach he was well within the Judeo-

Christian tradition and was offering something very personal to his patients that stands beyond interpretations and technique. Actually I believe he was well aware of it, but in his day it was simply assumed that this was part of the physicianly vocation and so he tended to downplay this aspect of psychotherapy in his publications. Today, in our dark nuclear age, it has become an essential component of psychotherapy that requires continual emphasis and discussion.”

Everyone was silent in the bus on the way from Troy to Istanbul. The day had been a long and rather hot one and somewhat of a failure in terms of the original aims of our tour. The ruins were so ambiguous and questionable that it was not really possible to know much at all about Troy. It was possible, however, to compare and contrast the culture of the Trojans to that of the Hittites. But the group in general seemed disconcerted and annoyed as well as tired and bored. I hoped that in Istanbul there would be more excitement and more stimulation for them, but I was also aware of a rumbling of fragmentation in the group. It had appeared that Henry was more friendly towards me; this was probably a function of the fact that J. showed no overt interest whatsoever either in running off with me or even in continuing to listen to my exhortations. But I was pleased with his greater amicability.

I also felt that we had missed an opportunity on this day, and so without thinking much about it I strode to the front of the bus and said over Sema’s

microphone, "It is important for you all to understand that the cases we have been talking about and the therapeutic suggestions, although they are psychoanalytically informed, are not really examples of psychoanalytic exploration the way Freud understood it. Existential complaints and dread of death and so on as presenting complaints can also be understood as masking deeper anxieties, such the fear of annihilation at the basis of many borderland cases. To do a truly psychoanalytic job we would have to listen carefully, allow regression to occur and the transference to develop and via the transference allow such archaic fears to appear. These infantile fears would now be confronted by the adult ego of the patient and resolved in a more mature fashion. The trouble is that in such patients the fears are so profound they are unbearable and cannot ever be allowed to appear. So we have to deal with derivatives of them, such as death anxiety, the best we can, and Pearl certainly did a fine job. Are there any questions or is there any further discussion?" There was no response, so I dejectedly sat down.

I really did not know what to do next. The old Turkish bus was crowded, hot, and very uncomfortable although Abdul was doing a good job of driving. It seemed that the group was continuing with pairing off and the pairs were more involved with each other than they were with the heuristic purposes of our tour. In that sense I felt that I had somehow become an egregious failure in my conduct of the tour. But I still hoped that some sort of resolution would be reached in the city of Istanbul, under the influence of this great world

center with its dazzling history, architecture, and excitement. Once more by deluding myself with hope I was able to ignore the warning signs of angina and atrial fibrillation that the stress and heat and exhaustion of the day had brought upon me.

Notes

¹ *Reading Lolita in Tehran*. N.Y.: Random House, 2003.

² *The Origin of Consciousness in the Breakdown of the Bicameral Mind*. Boston: Houghton Mifflin, 1976.

³ *The Immortal Profession: The Joys of Teaching and Learning*. N.Y.: Weybright & Talley, 1976, pp. 16, 33-34.

⁴ *Principles of Christian Theology*. N.Y.: Scribners Sons, 1966.

⁵ *Emotional Illness and Creativity*. Madison, CT.: International Universities Press, 1999.

⁶ *Freud Teaches Psychotherapy*. Indianapolis, IN: Hackett, 1980.

Chapter 9

Istanbul

I woke up with a shriek from a nightmare on my first morning in Istanbul. I dreamed that I was K., the land surveyor in Kafka's *The Castle*. He is self-defeating and gets in trouble with the very official who has to deal with his application, Klamm, by taking Klamm's mistress Frieda away from him. In this rather droll and comic scene Kafka writes,

They embraced each other, her little body burned in K's hands, in a state of unconsciousness which K tried again and again but in vain to master they rolled a little way, landing with a thud on Klamm's door, where they lay among the small puddles of beer and other refuse gathered on the floor. There, hours went past, hours in which they breathed as one, in which their hearts beat as one, hours in which K was haunted by the feeling that he was losing himself or wandering into a strange country, further than ever man had wandered before, a country so strange that not even the air had anything in common with his native air, where one might die of strangeness, and yet whose enchantment was such that one could only go on and lose oneself further¹.

However, in my nightmare the droll and comic scene changed because Frieda became J. and there was I breathing with her as one, lying together with our hearts beating as one. I too had the feeling described by Kafka above from this miraculous experience and found myself wandering into a strange country farther than man had ever wandered before and enchanted in such a way that I could only go on and on and lose myself further. In my dream this serious cosmic experience was suddenly interrupted by Henry, who roared

into the room, brutally dragged J. from me, and took her away.

And so, I woke up with a loud cry of anguish. The shock of coming back from that enchanted country to the sudden harshness of reality caused intense anginal pain for me, a substernal crushing, an aching in the elbows that I could barely stand. It was the worst angina I had ever had. I reached for my nitrostat and in a few moments it began to subside. In ten minutes I took another nitrostat and it disappeared entirely, only to be replaced by the throbbing headache that I always got when I took nitrostat.

However, I was determined to go on, to somehow correct my mistakes. That morning the remainder of the group would visit the standard tourist sights in Istanbul and in the afternoon we would hold another seminar on the magnificent grounds of the Çırağan Palace Hotel.

Yes, we were at the Çırağan Palace Hotel, Istanbul's most luxurious hotel. Although the grant had not allowed for it I added my own money because I wanted to have a day or two to enjoy what I considered to be one of the most beautiful places in the world, the view from the gardens of the Çırağan Palace Hotel overlooking the Bosphorus. This hotel was built by the Sultan Abdul Aziz in 1863. It was originally a palace but there is not much left of the original palace itself as a major fire gutted the place in the 19th century. The location is unparalleled, so the Turks built a hotel next to the original

palace and also restored the palace, now called the “Old Palace”.

Our group members were placed in large rooms in the elegant hotel but these rooms had no balcony and not much of a view; one had to go out onto the grounds to appreciate the view. In order to do so we walked to the “Old Palace”, adjacent to the hotel. This walk was along the Bosphorus itself. One could see boats of all descriptions, from quickly moving little skiffs to huge lumbering tankers and freighters, going back and forth at various speeds. Even the water had a calm about it that was refreshing and beautiful.

There was nothing refreshing or beautiful about the fuss that morning over an airline refund due to us. Lisa, with her usual efficiency took care of it. Lisa was an enigma on this trip. She was always ready to help, and when she spoke it was always appropriate and to the point. Her clothes, primarily baggy jeans and a plain blouse, as well as her prim hair and rather stiff body carriage, signaled no interest in enticing or engaging anybody. She was simply pleasant but clearly did not want to share her personal life. It was hard to make conversation with her, but it was clear that she was a decent honest person and very dependable. I liked her and nobody remaining in the group ever said a word of complaint about her. She did not partake in our intellectual and emotional interactions and seemed not even all that interested in observing them. Nobody ever found out why she chose to live in Germany after being born and raised in Minnesota, or anything about her past

life. In this situation she was simply doing the job she had volunteered to do, in order to see Turkey. With all the problems and crises on this trip I do not think I could have completed it without the apparently genderless Lisa.

Then, with Ali giving directions to Abdul in Turkish, we began to tour Istanbul. The enormous skill of Abdul now showed itself in its greatest display. To drive a bus through the narrow streets of Istanbul and weave in and out of the heavy traffic was an extraordinary feat; at times he had to drive the bus backwards in order to back it up to a place of interest. It was a truly impressive accomplishment and enabled us to see whatever we wanted in Istanbul.

Istanbul was Turkey's largest city with about twelve million residents at the time we visited. This city is the business and cultural center of Turkey even though Ankara is the capitol since 1922 of the newly proclaimed Turkish republic. In the seventh century B.C.E. a group of sailors led by a man named Byzas came to the city and renamed it from its original name Lygos, that of a fishing community founded around the end of the second millennium B.C.E., to Byzantium, after their leader. In the first half of the fourth century B.C.E. it was made the capitol of the Eastern Roman Empire by the Roman emperor Constantine the Great and its name was subsequently changed to Constantinople. With the decline of this Eastern Roman or Byzantine Empire from the 11th century C.E. on, Anatolia witnessed the rise of a new civilization,

the Turks. They became known as the Ottomans and eventually in 1453 C.E. they captured the city and renamed it Istanbul. Then, until the very last years of the Ottoman Empire, the sultans spent tremendous amounts of money to build the architectural style and the cosmopolitan structure of the city. This was important for our group because Istanbul displays beautiful monuments of the Byzantine and then the Roman times proceeding by building over and painting over in various layers to arrive at the very best works of the Turkish-Islamic age.

I don't think it is necessary for me to review in any detail my memory of the major sites of this wonderful city we investigated, as they are quite familiar. We went, as everyone does, to the Haggia Sophia and the Blue Mosque. They were surprisingly quite dark and the Haggia Sophia was in very poor repair. The Blue Mosque is of course very beautifully decorated with great areas of mosaics. The Haggia Sophia displays a remarkable overlap of Islam and Christianity—but everything in there was falling down! Here was one of the important places I was trying to show the group—or what was left of it—an illustration of Freud's metaphor of a buried city with one layer on top of another. One could see where the ancient Byzantine and Christian icons and decorations had been painted over with Islamic symbols, writings, and decorations. The Hippodrome, with a capacity of one hundred thousand spectators, was completed under Constantine and then the stones from this Roman racetrack were used in the construction of the Blue Mosque.

The group seemed to have enjoyed themselves. We ate lunch at a café that was very expensive and there were no complaints. The city was absolutely mobbed with all kinds of people but to my great surprise the tourist places were rather empty. The traffic was unbelievable, going on day and night almost at gridlock. Abdul worked hard!

After lunch we all piled back in the bus. Gertrude and Pearl sat near the front, as did Ali, with Claire sitting tightly right next to him. Henry and J. sat in the middle and Lisa and Sarah sat across from them. Marsha and George were in front of me and I sat alone musing in the back. It was quite a long and slow return trip to the hotel and we were all tired. I fell asleep and again dreamed of the monkey that was in a cage and was not well kept up. It made a mess in the cage. On awakening I thought my reflections on that same dream before we went to Hattusas were pretty superficial interpretive stuff. Obviously I was missing something. As I think about it now, of course it was the cage. I was trapped in a situation of my own making. Behind making a mess was the rage at being trapped, which could not be expressed to the group or even entirely admitted to myself and ended up being somatized. What a genius was Georg Groddeck²!

That afternoon we sat in the lovely garden among the flowers, all of us: Sarah, Lisa, Pearl, Gertrude, Marsha, George, J., Henry, Ali, Claire, and I. There I continued to talk about Roman times in Istanbul (then known as

Constantinople and before that Byzantium) and about the Roman Empire. I began, using notes I had prepared before the trip, "The famous Roman 'orgies,' just like the drinking, eating, or drug-taking 'binges' seen clinically today, appear superficially to be phenomena of primitive license, with the simple goal of satiation in a drugged or drunken stuporous state. Perhaps the final degeneration of such orgies into pure pleasure seeking and uncontrolled behavior, with the implication of a certain revulsion that exists toward this in the contemporary civilized mind, is to be found in the description of the 'soma' orgies and of the 'Orgy-Porgy Festival' in Huxley's novel, *Brave New World*.

"The behavior which has come to be known as orgiastic was originally not associated with pleasure in the physical sense. It began with the worship by the pre-Greek and ancient Greek people of the gods Dionysus and Bacchus, and later their prophet, Orpheus. Dionysus was originally a great nature-god of Thraco-Phrygian stock, powerful over all vegetation and especially revealing his power in wine.

"The oriental mysteries associated with Attis, Cybele, Isis, and Sabazius, which invaded later Greece and early imperial Rome, were originally akin to the rites of the worship of Dionysus and contained many concepts in common with them. But their orgiastic ecstasies were more violent, and the psychical aberrations to which the votaries were prone through their passionate desire

for divine communion were more dangerous; for example, emasculation of self was practiced by the devotees of Attis.

In Greek orgies, originating even before the days of Homer, the emphasis was on a fusion with the god Dionysus or Bacchus. This was not thought of as a pleasure in the physical sense but rather as a purification ritual. The original meaning of the word orgy was 'sacrament'. The rituals enabled the individual to escape from the wheel of birth, and the votary became as one with the divinity Dionysus and temporarily possessed his powers.

"The etymological meaning of the word 'enthusiasm' is 'union with god.' The Bacchic ritual produced what was called 'enthusiasm', in which the god was supposed to enter the worshipper. Homer in the *Iliad* speaks of Dionysus as 'raging,' an epithet that indicates that the orgiastic character of his worship was already recognized. Homer did not consider him very important nor did Hesiod, who first called wine the gift of Dionysus.

Glancing at J., I continued, "Women played a prominent part in the ritual of worship, and a savage form of sacramental communion was at its base, in which a human, and later an animal victim, was torn to pieces raw and eaten. This victim was regarded as the incarnation of the divinity, so that his ingestion enabled the votary to gain his strength. The spectacular wild ecstasy

and orgiastic self-abandonment practiced at these rituals is perhaps most magnificently described by Euripides in his play *The Bacchae*. These women companions of Bacchus were also called Maenads, and they took a major part in his festivals. In the course of time the mysteries celebrated became occasion for intoxication and great licentiousness. The Bacchanalia, another name for these festivals or rituals to Bacchus or Dionysus, were introduced into Rome about 200 B.C.E. and were at first celebrated by women only. Later men were admitted, evening celebrations were introduced, and the orgies were held frequently instead of only three days in a year as at first. Gross immoralities and intoxication were practiced and finally in 186 B.C.E. the senate ordered the arrest of the priests and forbade further meetings in Italy. This is dramatically described by Livy, who wrote, 'More uncleanness was wrought with men than with women, and whoever would not submit to defilement . . . was sacrificed as a victim'. The senate suppressed the cult, arrested 7,000 of the devotees, and sentenced hundreds to death. This did not succeed in ending these rites, which continued unabated as a very popular festive activity."

At this point Henry, who loved this sort of thing, took over. He said, "Any cooling process of the Dionysian fervor that spread over the western world from the seventh century B.C.E. onward was arrested by the wave of the Orphic brotherhoods associated with the name of Orpheus. Such people were the original wandering preachers and had for initiation to fulfill 'the solemn

rite of the banquet of raw flesh' and henceforth robed themselves in pure white, avoided the 'taint of childbirth and funerals', and abstained from meat. Most significantly the novice then was permitted to call himself by the very name of his god Bacchus, the mystic union having been brought about through the meal of raw flesh or the drinking of the blood of the human incarnation, such as the bull, of this god."

"What explains this tremendous spread and popularity of such behavior among a people such as the Greeks and Romans who were characterized by prudence, forethought, rationality, and devotion to science?" asked Ali.

Henry answered, "I think it was essentially a reaction to the rapid development of what we might call the predominance of the reality principle in the Greek civilization; that is to say the Greeks developed a love of the primitive because they had become civilized so quickly and this love was accompanied by an hankering after a more instinctive and passionate way of life than that sanctioned by civilized morality."

"Well this may be correct as far as it goes," said Sarah, "but it leaves out the deeper and magical meanings of the Bacchanalia. This was taken up by Frazer, who gave numerous examples of eating the god or anyone more powerful in order to gain his power, and of the savage rite of homophagia where eating raw flesh in order to absorb a portion of divinity that is

incarnated in that flesh. This is what Frazer, in *The Golden Bough* has called the 'homeopathic magic of a flesh diet.'"

Now it was the psychoanalyst Pearl's turn. She quietly added, "Freud, in *Totem and Taboo*, picked this theme up and saw in the slaying and eating of the totem animal or victim a repetition of the destruction of the primal father by the sons. He pointed out how they accomplished their identification with him by devouring him and each acquired a part of his strength. This is called by Freud the totem feast and is repeated in many forms of religion and celebrations. He believed that there was an identity of the totem meal with animal sacrifices, with the anthropic human sacrifice, and with the Christian eucharist. He believed these rituals deal with a crime by which humans are deeply weighed down but of which, thought Freud, they must nevertheless feel quite proud."

"Well," announced Gertrude, "whether or not Freud is correct in his theory of the primal horde, there seems to be general agreement among authors as to the origin and development of the orgy. At its historical roots lies the homeopathic magical process of fusing with a lost object through a cannibalistic act. The hyperingested substance is invested magically with power as a reincarnation of the powerful object with which the individual wishes to fuse. Eating this material or ingesting it in some way confers the powers and characteristics of the lost object upon the ingestor. Clearly this is

a form of purification or replacement therapy in which the ingestor regains a previous state of bliss, and indeed at times even a superhuman state if the ingested substance is a reincarnation of divinity itself. Furthermore, the appeal of such a primitive procedure is seen as related to the establishment of the reality principle and the harsher and the more rapidly 'reality' has been imposed, the greater is the appeal for relapse into such mysteries. This is consistent with our clinical observations that the addictive tendency to embark upon periodic hyperingestion as a way of restoring the lost source of maternal supply is fueled by an early childhood atmosphere of harshness and forced rapid development of what some authors have called 'pseudomaturity' in the child."

As a radical feminist Gertrude could not help herself and had to claim, "It is not excessively speculative to postulate that the great attractiveness that these rites held for females in the days of the Greeks and the Romans was a consequence of the greater harshness and emotional deprivation in female upbringing resulting from the status of women in society. This rite also enabled the discharge of a substantial amount of rage at the male figure. And there is plenty of that rage left even today! In the development of the orgy, the overt murderous aspect seems to have become less prominent when men also joined the ritual, and the features of gorging or hyperingesting as a way of fusing with the lost divinity became more central. In this manner we see that behind superficial appearances, just as behind the superficial appearance

of the proverbial jovial 'fat man,' lies the cannibalistic rage rooted in the deprivation experienced during early infancy. Perhaps this is an important determinant in the later choice of periodic hyperingestion, chronic bulimia, and other eating disorders as the means of relieving the longing for the alimentary bliss experienced by the infant at the breast. It is significant that the most common example of Roman orgiastic behavior is associated with the emperor Nero, who, like some schizophrenic patients, showed clearly the murderous and cannibalistic aspects of his personality—acted out even towards his own mother.”

After Gertrude got this out, to my relief the rest of the afternoon was spent in pleasant conversation and enjoying the scenery. With the revisions and establishments of the coupling process, my group seems to have made more or less friends with each other at last. The atmosphere seemed to have improved, perhaps because more of the group members found, or could pretend to themselves they had found, a better selfobject. Time would tell . . . I am tempted to go back to our discussion of time in Cappadocia, but I will stick to the narrative here . . .

. . . In the evening Pearl and Gertrude informed me that since the tour was officially over after tomorrow, they would not be coming back to Chicago via the airport in Milan as the grant itinerary stipulated. They were going to stay in the Middle East and perhaps tour Israel and Egypt. Their attitude

toward me was one of indifference. It was clear they had absorbed very little from the trip and were much more concerned with their new found “love” for each other than with anything that I was trying to communicate to them. If they never saw me again they probably would have been satisfied. Their situation was as Sappho put it in Fragment 47:

Eros shook my
mind like a mountain wind falling on oak trees³.

Worn out from all the touring, everyone retired early to their rooms in that magnificent hotel.

Ah, the famous dogs of Istanbul, an endless variety of mangy mutts barking on and off all the night. And then at 4:30 A.M. the call to pray! I slept very poorly and got up at 5 A.M. I went out for a walk and took some photos of the adjacent “Old Çırağan Palace” which I found out does also have rooms—that were mostly occupied by very wealthy Russian mafia. In the morning Abdul drove us all to the famous Topkapi Palace for a couple of hours. The highest point of our visit there from my perspective was the Mullah singing the Koran continuously in a closed glass chamber, ensconced in a room that contained sacred objects allegedly from Muhammad such as his hair, tooth, and so on, collected over the years by the sultans.

We proceeded to the archaeological museum where we found out that

the “Alexander sarcophagus” was a phoney replica but there was indeed a magnificent authentic “mourning woman” sarcophagus. Death seemed to be in the air. We walked across the famous Galata Bridge, teeming with people and hawkers of every sort, to a tower that we laboriously climbed to enjoy a great view of the Golden Horn joining the Bosphorus. That afternoon we heard that a Frenchman had committed suicide by jumping off the tower we just visited.

We continued on to drive through the terrible traffic and arrived at Yildiz Park, once the private garden of Sultan Abdül Aziz, where the women of his harem would stroll. As we tried to relax, some horrible popular music, very loud, was piped in by a loudspeaker that even drowned out the call to prayer in the afternoon.

We proceeded to the Dolmabahçe Palace, which struck me as a kind of antique junk shop, a poor imitation of Versailles. The last sultans of the Ottoman Empire resided here and in 1923 it became the home of Atatürk. Only the great reception room with its wooden pillars painted like stone and featuring a Queen Victoria chandelier of four tons was impressive.

After a visit to the Chora museum to see the remarkable mosaics and frescoes, we embarked on an unforgettable cruise on the Bosphorus. The boat went up to the opening of the Black Sea. The weather was perfect, a

marvelous once in a lifetime experience. As we went under the bridges we finally saw the magnificent houses on the Asian shore and all the palaces including our hotel on the European shore. The water was extraordinarily blue and beautiful. It was possible to photograph the remains of the Constantine Wall and also the Fethiye Mosque—a masterpiece of the famous architect Sinan.

The Bosphorus, wider than a river and deeply blue, connects the Black Sea with the Sea of Marma, which flows into the Dardanelles and the Mediterranean. It is of course a centerpiece of history. But what was most striking was the contrast between the magnificent scenery and peacefulness of the Bosphorus, and the tremendous bustle of the overcrowded city with the continual calls to prayer that I found deeply moving and curiously attractive. The calls, just like to me the ambiance of the Bosphorus, suggested that we should not forget about transcendence. They serve as a constant reminder that there is more to life than materialism. But I also remembered that the Mullah I previously mentioned, reading the Koran in the Topkapi Palace, was frequently checking his watch! Lunch time?

Of course we also had to visit the grand bazaar where the ladies became immersed in shopping and finally the Nurosmaniye (Light of Osman) Mosque, built around 1750 C.E. in the style known as Ottoman Baroque. We ate dinner in a stuffy coffee shop and walked past a dignified and elegant Turkish

wedding in process.

Ali insisted that we take the long climb up to the Pier Loti coffee shop that offered a magnificent view of the Golden Horn. He then led us to the Eyop Mosque, a minor mosque dedicated to a sultan who was killed by an Arab “martyr”. It was located in the heart of a teeming orthodox Moslem district filled with seriously religious people. The women were dressed from head to toe in black chadors. The women in our group were rather uncomfortable in their tight pants and without head scarfs so they tried to stay in the background as much as they could. In the old days they would have been stoned. Istanbul is a raucous mixture of the new and the old, which, along with the barking dogs, is what the city is all about.

Abdul took us on a hair-raising ride through a totally mobbed flea market. The Turks are traders from centuries back, traveling to and fro in their geographic area with constant bargaining over every conceivable kind of item just as those laid out on the flea market street. We ended at the Süleymaniye Mosque, another beautiful bit of architecture—the grandest creation of the architect Sinan—and well preserved, but as we were talking about it, Ali said it was time to return to the hotel. The drive back to the hotel was again a marvelous accomplishment in hellish traffic on narrow crowded streets, the likes of which I had never seen. Abdul stopped here and there and asked Ali in Turkish to explain to us a monument or two that he knew about,

which was very kind and considerate of him to do.

That evening a few of us went for a walk and sat on the shore of the Bosphorus again in the garden of the Çırağan Palace hotel. The second seminar that we held there was essentially devoted to my last formal lecture on the tour. Ali and Claire had been asking me throughout the trip to speak about the problem of the interaction between the resident and the supervisor, and how they disappoint each other. This was rather ironic, because Ali never had obtained supervision of a psychodynamic psychotherapy case and most of Claire's supervisors were psychopharmacologists or psychologists who practiced various forms of what they called "evidence based therapies", such as cognitive therapy. However, that evening, after we had toured the sights, those of us interested in psychodynamic psychotherapy, Ali and Claire, Pearl, and Gertrude, Marsha and George, and Sarah and I came back to this rather remote corner of the Çırağan Palace garden. I offered them this formal lecture, which in today's psychiatric residencies would be mostly obsolete. I did it because I am still hoping that eventually the world and even psychiatry will return to its senses and to what I have called reverence for human life⁴.

Martin's Last Lecture

“Over fifty years ago, as a trembling resident beginning psychiatry, I entered the office of my first supervisor on a hot summer day. This beloved gentleman, now deceased, was well known for his exceptional ability to understand and supervise the psychoanalytic treatment of schizophrenic patients. Unfortunately, he tended to be rather quiet and withdrawn into himself. In his office was a noisy fan, and my first recollection of supervision as a novice psychiatrist was of my trying to decide what to say or do about this noisy fan in a hot office that made it impossible for me to hear his quiet voice—especially as he tended to cover his eyes and face with his hands when he was talking. For a long time I was unable to hear what the supervisor was saying and the disappointment of this initial experience, humorous as it may sound in retrospect, set me on a path of thinking for a long time about the problems of supervision in general.

From his or her personal point of view, the resident is facing a crucial triad of difficulties: The development of one's identity as a psychodynamic psychotherapist; the anxiety attendant upon the development of psychological-mindedness; and the development of a conviction about the meaningfulness of psychodynamics and long-term intensive psychotherapy in the face of all the so-called evidence-based therapies the resident is required to learn about and expected to practice during residency. The identity

problem of the resident is confounded by many factors. The environment expects the resident to have capacities of empathic understanding and behavioral observation that he or she has not yet developed. Brody pointed out that developing the identity of psychotherapist threatens loss of the physician's professional mantle of social responsibility and authority. He also mentioned the irrelevance for the psychiatrist of so much that is learned at arduous cost during medical school. Many authors have described the increasing sense of alienation the psychodynamically oriented psychiatric resident feels from fellow residents in both psychiatry and other specialties as his or her development progresses. Claire, you indirectly referred to this after we visited Pergamum and George gave his case presentation. Marsha picked it up and described her experiences quite poignantly, and we started to discuss this and your original question, but the dining room closed and somehow that stopped us.

The tremendous anxiety problem of the resident has been mentioned in the literature, but it has not received the attention it deserves. Many have discussed the interference with learning that undue levels of anxiety in the student produces. This anxiety is often increased by the usual experience of the resident in the first year where he or she is assigned the most pathologic and the most difficult patients that psychiatry has to offer, often chronic or recurring psychotic hospital patients. Between the resident's lack of experience and the serious pathology of his or her case load, not very many of

patients in psychodynamic psychotherapy are going to respond with dramatic success.

For us, however, taking psychoanalytic theory as the basic form of reference, the dyadic therapeutic relationship is conceived of as the primary model of the clinical psychiatrist. Gaskill and Norton optimistically wrote 40 years ago,

Fundamental to this is an increasing awareness and understanding of the dynamic unconscious and intrapsychic conflict as it relates to the patient and the therapist . . . knowledge of the intricacies and complexities of this relationship with all of its theoretical and therapeutic implications and unknowns is the unique tool of the psychiatrist of both today and the future⁵.

If this triad of difficulties is not attended to with deliberate intent on the part of the training staff, serious dangers are present. The most obvious will be the development of a psychiatrist who is mediocre or worse. A second danger is that the beginner will constrict himself or herself in a narcissistic, self-limiting fashion. Such a resident tends to go his or her own way and becomes at that point unteachable. This is in my opinion a catastrophic failure in either selection of the resident or in supervision and mentoring. The resident makes a closure in his or her points of view too early—a closure based not on training and experience but manifesting instead the rigid characteristics of a flight from anxiety.

Perhaps the most dangerous resolution, because it is so subtle and easy to rationalize, is what Ornstein described as “uncritical eclecticism.” This can take many forms, for example, a premature immersion in community psychiatry, administrative work, or somatic therapies, resulting in a psychiatrist who is a jack-of-all-trades but master of none, with a fuzzy identity, and who tends to resemble an “as if” personality. Everyone who has supervised residents has met these individuals, who represent, as Ornstein points out, a serious pedagogic failure. Thus, the shift toward eclecticism and disappointment in psychodynamics and psychotherapy are symptoms that the training program is defective.

A variety of techniques have been described, ranging from the simple to the complex, as to what the supervisor can do. The importance of the resident’s personal life situation is obvious. In addition, gaps in the student therapist’s own life experiences must be filled in by reading seminars, emphasizing not only technical books but the great novels of the past and present. These books are valued as case histories, as models to follow in the sensitive description of human beings and in widening the therapist’s understanding of human problems.

On a more sophisticated level, the “work-ego” of the trainee must be constantly improved through continual reflection on his or her own empathic processes in both seminars and individual supervision. These empathic and

introspective processes constitute the vital tool of the effective psychotherapist. Grotjahn asks:

How to teach patience and devotion, tact and timing, decency and tolerance, empathy and intuition, modesty and respect in the face of supporting loyalty and keeping distance, carefulness and courage, honesty and frankness?⁶

Grotjahn's answer is that the psychiatric attitude can be acquired best by identification of the student with his or her teacher. The teacher offers himself or herself for such identifications—the teacher uses the human contact in the personal relationship with the student as a model for the student to experience the psychiatric attitude at work. As Grotjahn points out, 'the psychiatrist shows himself in his interpersonal relations.'

Anxiety must be reduced and relieved so the student may be able to learn and grow. The phrase 'supervisory alliance' or 'learning alliance' has been repeatedly introduced by authors as parallel to the 'therapeutic alliance,' in which a certain partnership must be developed between the supervisor and resident, free of a disrupting level of anxiety and devoted to the learning and growth of the resident. The development of such an alliance is the primary task of the supervisory sessions, just as the development of the therapeutic alliance is the primary task in psychotherapy.

There are two major views on the role of the supervisor. Some focus the

supervision on the resident's problems in learning. The supervisor concentrates on the relationship between the resident and the supervisor, on the hypothesis that what the resident sees and presents about the patient is reflected in the problems he or she experiences with the supervisor. The supervisor's emotional experience with the resident has 'informational value,' useful in the supervisory process.

Others propose that the basic rule of supervision should be instruction in terms of needs and problems of the patient as expressed in the specific clinical phenomena of the patient. The supervisor should view himself or herself as a teacher and definitely not as a psychotherapist for the resident. We all agree about that. I believe the anxiety level is the crucial factor in determining to what extent the supervisor should be purely didactic and to what extent he or she should begin to approach unconscious processes in the resident that are interfering with his or her work with patients. As far as I am concerned, the anxiety level of the resident becomes the crucial factor in determining the supervisory maneuvers.

One must constantly keep in mind the social context of the supervision. The resident hopes to get from the supervisor potent remedies, both realistic and magical, in order to increase his or her sense of power and competence. The resident also hopes to please the supervisor, to make an impressive presentation in seminars so as to achieve prestige among peers, and to have

all this work accredited by the training program. Many aspects of the social context of the therapist's work are competing and sometimes interfering with what ought to be his or her primary wish, to be an effective psychodynamic therapist with the patient for the patient's sake. An extremely complicated and disruptive situation can occur when the social pressures on the resident are contradicted by the supervisor's goal for the resident. For example, if the institution is primarily oriented toward the production of administrative psychiatrists or psychopharmacologists and the supervisor pressures the resident to spend a lot of time doing intensive individual psychodynamic therapy, a conflict in the resident is bound to develop.

In addition, the resident is under severe personal pressures. Because of the feeling of ignorance the resident looks to the supervisor in order to obtain omniscience. In this deep yearning for magical power, the resident is bound to be disappointed. The disappointment will be extremely intense if the supervisor pretends to have such power or has not worked through such narcissistic yearnings in his or her own psyche. The shock of discovery that even if the resident slavishly imitates the supervisor, yet his or her patients do not get quickly well, is sometimes very difficult for the resident to accept and to avoid blaming one's self and to deal with the narcissistic injury this entails.

What does the supervisor get from the work of supervision? The

primary gains arise naturally from the fact that a worthy psychotherapist is devoted to personality growth in others, is generally respectful and trustworthy, and is neither exploitative nor retaliatory. The devotion to personality growth normally spills over as the psychotherapist gains experience, into devotion to teach and catalyze the growth of future psychotherapists. In my opinion this primary gain, as laudatory as it may be, is not realistically sufficient to motivate the majority of supervisors. There must be important secondary gains, and these are not pleasant to talk about because they appeal to the less noble and sublime and the less mature aspects of the supervisor's personality. Unfortunately, they have important practical application and to ignore them is analogous to falling in the mud while gazing at the stars.

These secondary gains involve the relief of professional loneliness of the psychotherapy supervisor who is isolated in an office, a chance to discuss his or her ideas and become exposed to the criticism of intelligent residents, an opportunity to rethink basic assumptions and to review the literature, the maintenance of a teaching appointment which has competitive value, and whatever narcissistic gratification is involved in being a member of a faculty perhaps even alongside one's former teachers, and in having a voice in the accreditation of further colleagues.

Disappointment in the resident-supervisor relationship is analogous to

failure in psychotherapy. Failure and disappointment will result when the needs of the resident or the needs of the supervisor are not being either met or communicated or worked through. The psychoanalytically oriented teacher recognizes that 'intellectual insight' and direct didactic instruction are very poor methods indeed to bring about change in people. Yet our seminars are all based on the assumption that such didactic work will bring about a change in the work-ego of the resident. If the expectations for change are too great on the part of either the resident or the supervisor, there will be disappointment.

An important source of disappointment is in the confusion of goals between the resident and the supervisor. As in psychotherapy, if there is a conflict between what the patient is looking for and what the therapist is attempting to do, there will be a failure unless this matter is brought to the surface and resolved. Such a resolution demands the recognition by the supervisor that the resident may have goals different from the supervisor, and the willingness to help the resident expose and discuss these goals without criticism. Supervisors sometimes take too much for granted at first and tend to assume residents have technical knowledge and know fundamentals of therapy that they do not actually know. Residents often go along with this to save face. Anyone who has overheard the conversation of residents or developed a good supervisory alliance will hear a great deal about the subject of saving face. If the supervisor does not recognize what the

resident needs, due to a lack of empathy for one reason or another, the resident, under the social pressures described above, will make every effort to save face even at the cost of learning nothing from the supervisor.

Being supervised as a resident can be quite painful, one in which his or her ideal personal image as the possessor of a personality with penetrating insightfulness and curative powers is badly shaken. Of course that leads to anxiety and lowering of self-esteem and may even result in depression if help is not available. As a result, a good supervisor from time to time may have to face serious hostility from a resident, based on transference phenomena and upon the narcissistic wound the supervisor may unavoidably inflict on the resident as part of his or her supervisory process. The hostility of future colleagues is not easy to face. I have seen this cause unfortunate cases of supervisor discouragement.

The common complaints of residents about supervisors who have overloaded schedules, “no time,” or are poorly prepared, suggest that some supervisors may be avoiding the intense interpersonal experience with the residents by the usual variety of minor acting-out procedures. One must ask whether the prolonged bombardment of the supervisor by the ambivalent emotions of residents over the years will not, unless special precautions are taken, lead to first a feeling of boredom (which masks anxiety, of course) and eventually to a loss of the desire to teach. Just as the resident may lose his or

her desire to learn due to a failure in the supervisory alliance and manifests this by coming late to sessions or 'forgetting sessions,' and so on, so the supervisor may act out in the same way.

If there is to be a good training program, careful attention must be paid to the selection of both residents and supervisors. It may be necessary for the training committee to renounce the wish for a supervisor with a famous name who is known to be a poor supervisor in practice, or to renounce the residency applications of a number of physicians who could easily attend to service needs such as prescribing drugs, and so on, but who do not have the capacity to develop psychologic-mindedness. Such renunciation is very, very difficult, considering the pressures that hospitals and residency training programs are under.

It is unthinkable that a good training program would not afford a regular seminar for supervisors. It is mandatory to recognize the extreme difficulty of effective supervision, the many unsolved problems in the supervisory process as I have tried to outline them above, and the serious responsibilities involved in the training of new psychiatrists and psychodynamic psychotherapists. A seminar for supervisors permits and encourages the exchange of information and experiences among the supervisors, promotes the growth of the supervisor, and reduces the sense of isolation discussed above.

But how can we get supervisors who are busy in private practice to get together?

The answer to this problem lies in the clear definition of an outside supervisor. Either it must be made clear what the demands of the program are upon the outside supervisor and just what his or her role will be, or the program should abandon the use of outside supervisors altogether. It is reasonable to expect that if the outside supervisors understand the problems involved in supervision and if the training program is in turn meeting their needs, they will respond positively to reasonable demands.

Some have emphasized the value of the preceptor system. Each resident should be assigned a preceptor who functions not as a supervisor but as the 'resident's mentor,' who brings the resident's problems and complaints with seminars and supervisors to the attention of the training committee. Similarly, the training program should encourage the formation of a resident organization, enabling the residents to speak to the training committee as a group. This will facilitate honest communication, since no individual will be held responsible for criticism.

The training committee should face squarely the fact that no one can possibly become an effective psychodynamic psychotherapist without personal psychotherapy. This does not imply that every resident must

undergo a prolonged psychoanalysis, although that would be by far the best experience for any resident, but it is inconceivable that fairly early in the residency there should not be sufficient motivation stirred up to drive the resident to get some kind of psychotherapeutic help. If a resident by the second year of training does not strongly feel the need for personal psychotherapy, there has been either a mistake in selection or a pedagogic failure. The task of the training committee is to provide an atmosphere in which residents in psychotherapy are comfortable and do not feel inferior to their colleagues, and to help residents make contact with effective psychodynamic psychotherapists in the community. It almost goes without saying that no supervisor, mentor, or administrator in the program who has training contact with the residents should simultaneously be undertaking psychodynamic psychotherapy or psychoanalysis with these same residents, since this obviously sets up a malignant peer competition and an obvious conflict of interests."

* * *

There was not much discussion after my lecture possibly because what I had to say seemed so self-evident, or perhaps my insistence on personal psychotherapy for every psychotherapist was too threatening. Only Pearl objected that it all seemed too idealistic. Gertrude pointed out that the whole trend in psychiatric residency programs today has been away from teaching

psychodynamic psychotherapy and towards teaching psychopharmacology, implying that my whole lecture was, as I feared, kind of obsolete. None of it pertained to the teaching of psychopharmacology, which is simply done with the same methods that are used in medical school. So the blunt question came up from both Pearl and Gertrude as to whether any of this is worth knowing about. “Get with it Martin,” sneered Gertrude, who was obviously feeling quite triumphant about her new conquest, not very happy with me, and ready to leave the group along with Pearl.

Ali and Claire objected to this kind of sarcastic response. Ali was especially concerned because in Turkish Medical schools the situation is just as Gertrude described it—psychopharmacology is taught and psychodynamic psychotherapy is not. He despaired of it ever changing. Claire was equally disturbed because she noted the same trend in American psychiatry and American psychiatric residency training programs, which mostly pay only lip service to psychodynamics. Marsha and George did not say much. Agreeing with my lecture material, they could only hope that some day it would be once more pertinent to the training of residents in psychodynamic psychiatry. So my lecture ran down, leaving the group immersed in a kind of sad, depressed ambiance.

Then Pearl and Gertrude coldly bid us all farewell; it was clear they considered the tour a failure and got very little out of it except an exchange of

lovers. Tomorrow they were flying to Egypt while we were scheduled to leave Istanbul for the Milan airport.

As everyone was preparing to go to their rooms, the evening to my great surprise concluded with J. asking if she could have a word with me. We wandered off to a secluded corner of the hotel bar and she said, "I have been doing a lot of worrying and thinking. I didn't realize that the part of the relationship that ended between us, the idea of our being lovers, was everything for you. I completely misjudged things and I think I have exchanged the guilt I have over loving you for another kind of guilt."

I replied, "There is no need to feel guilty. Apparently you are happier for having detached from or at least repressed the intensity of your transference love for me forever, and if that is true, I think it is best for you. I still intend to stand by you in every way I can for the rest of my life. You will never find a truer friend than I am. What I find most painful is that I will never get to see you and you will become a phantom. Looking and touching are very primitive forms of gratification in the animal species and without them one is very lonely indeed. Franz Kafka had a married woman lover who came to visit him many times. He pointed out that she had no shyness and did not consider it shameful to experience feelings intensely. Love to her was something clear, something self-evident."

"I am truly sorry," said J., "but it does have to be this way. I am sorry if I hurt you but the guilt I felt about listening to your pleading and your claims that you could not live without me forced me to break off our relationship." She rose as if to leave. I said, "Tonight I will dream we are living together in Puerto Vallarta, where we can stroll on the beach every evening and watch the yellow-red sun sink into the pure blue sea, considering ourselves incredibly lucky that those last few years between now and the unspeakable ugliness of death could be so splendid, so warm, so enchanting." As she walked away she replied, "Martin, you are an incurable romantic but you must face reality and the reality is that after this trip you will never see me again." She added, "By the way, I have never been so bored as I was on this trip listening to so much pontification by so many people."

Well, that was that. I went to my room on our last night in Istanbul feeling very uncomfortable and with a sense of cardiac arrhythmia and some mild angina, which I simply ignored. I took a couple of sleeping pills in order to erase that last image of J. walking away and to erase the last words she said. The eerie, almost transcendent sounds of the Moslem call to prayer in Istanbul floated through my mind as they do even today from time to time on this bed in the intensive care unit. As I fell asleep, I remembered what Tasso, rejected as beggar and banished, said to Antonio in Goethe's *Torquado Tasso*:

I reach out to you with open arms, Just as the sailor clings fast to the very

Rock upon which his vessel should have foundered.

Who was, who is, the “you”?

Notes

¹ Trans. E. and W. Muir. N.Y.:Knopf, 1951, p. 55.

² *The Book of the It*. N.Y.: Mentor Books, 1961.

³ *If Not Winter: Fragments of Sappho*. Trans. A. Carson. N.Y.: Random House, 2002.

⁴ *Emotional Illness and Creativity: A Psychoanalytic and Phenomenologic Study*. Madison, CT.: International Universities Press, 1999, p.270.

⁵ Observations on psychiatric residency training. *Archives of Psychiatry* 18:7.

⁶ The role of identification is psychiatric and psychoanalytic training. *Psychiatry* 12:41.

Chapter 10

Milan

The day opened with partly cloudy weather. A large Japanese tour group came to occupy the hotel. Confused and tired from lack of sleep I managed to bring my buffet breakfast plate from the buffet to the wrong table, embarrassing myself. The reason for my lack of sleep was the noisy but brilliant colorful fireworks that were shot over the Bosphorous last night against the background of a full moon. The moon was indeed very bright, shining down with its light shimmering over the water. Then the call to prayer drifting across the city woke me up early. Also I was becoming continuously troubled and worried about our return and what was waiting for me in the United States in the way of damage to my reputation, troubles from Richard and Edward, and complaints from the granting agency and my university. Trying to calm down and wake up I went out onto the spacious hotel garden. As I sat quietly waiting for the others to appear in the garden, musing over the Bosphorous and watching the large variety of boats traverse the blue water, I could think only of J. The words of Shelley in his *Epipsychidion* (lines 540-552) kept running through my mind:

Meanwhile

We two will rise, and sit, and walk together,
Under one roof of blue Ionian weather,
And wander in the meadows, or ascend

The mossy mountains, where the blue heavens bend
With lightest winds, to touch their paramour;
Or linger, where the pebble-paven shore,
Under the quick, faint kisses of the sea
Trembles and sparkles as with ecstasy,—
Possessing and possessed by all that is
Within that calm circumference of bliss,
And by each other, til love and live
Be one.

While I was trying to collect myself and thinking about J., almost by magic she appeared. Apparently she was also having trouble sleeping and had come for a stroll and a rest in the soothing and beautiful area of the garden of the elegant hotel. Here she also could sit and watch the abundant foliage and flowers and the variegated colors of those remarkable plants growing in the garden, as well as rest her eyes on the boats going smoothly back and forth on the mysterious calm Bosphorous. But J. was not friendly. She sat down on a bench next to me after a curt polite good morning. I waited for a while and finally I could stand it no longer. I said to her, “You know, in Anita Brookner’s *The Rules of Engagement* she writes, ‘If I desired company it was for the company of one other person, intimate colloquy, a form of nurture that I could certainly embrace. The whole idea of friendship would have to be recast if it were to mean anything.¹”

J. said nothing.

I went on, “Shakespeare in *Loves Labor Lost* (act IV) writes,

From women's eyes this doctrine I derive
They are the ground, the books, the academes,
From whence doth spring the true Promethian fire."

J. said nothing.

In desperation I continued,

"He is the half part of a blessed man,
Left to be finished by such as she;
And she of fair divided excellence,
Whose fullness of perfection lies in him.

This is from Shakespeare's *King John*, Act II, Scene I," I added.

J. said nothing.

I reminded her how Emily Dickinson wrote that each life converges to some center. I rambled on, "J., whether you like it or not, you are the center of convergence for me, even if I will not remember what you look like when this trip is over. Goya painted 'Maya Clothed' and 'Maya Nude'—as you might guess, this famous pair of paintings made a tremendous impression on me when I saw them hanging in the *Prado* in Madrid. But of course that was before you decided to reject me. Yet this pair of paintings has a unique transcendence, just as you do.

J. said nothing.

I went on to remind her what Jean Paul Sartre wrote to Simone de Beauvoir, "It has to be you, my love, someone so closely mingled with me that we no longer know what is yours and what is mine. I love you . . . I cannot be separated from you, because you are like the very consistency of my being . . . it is impossible to be more at one than we are, you and I."

Finally J. rose exasperatedly and looked at me coldly. "Martin, you are talking to yourself; your efforts to rekindle love in me with quotations are ridiculous and make even a greater fool of you than you are."

She started to walk away in disgust when Ali and Claire appeared. They were obviously now infatuated with each other, almost drunk with pleasure in their relationship. It was obvious that Claire was going to stay in Turkey with Ali. I reminded myself the name Ali in Arabic means high, lofty, and sublime.

But now they were thinking of themselves still as residents in psychiatry and when they saw me they sat down next to me and asked me to say more about intensive psychoanalytically oriented or psychodynamic psychotherapy, a subject on which they has received almost no training either in Claire's American residency or Ali's Turkish residency.

[Note added later by Lisa: *Martin was correct. Claire stayed on with Ali in Turkey. Ali gave up his residency in disgust out of the total concentration in*

Turkish psychiatry around psychopharmacology. Claire also felt that she was not interested in passing out medication, something that she could have done as an internist or even as a general practitioner. Ali went into the field of television and in due course became a wealthy and successful host of a Turkish talk show television program. Claire wrote a series of quite successful books on the clash of civilizations between the Muslims and the Christians, a clash that is still going strong as of this time. She became very active in providing medical help for abused women and children in Turkey.]

Both Ali and Claire wanted to learn what they could about intensive psychodynamic psychotherapy and psychoanalysis and asked me to chat some more with them on the topic. As I began to speak, Sarah wandered up to listen. J. remained in the garden at a distance to enjoy the view now that others were there, and she was relieved that I would bother her no longer. Finally Henry arrived and listened out of curiosity, but I did most of the talking at first; I had no formal talk or notes and just decided to say whatever came to me. As I started to speak Marsha and George came over and sat down also.

Martin's Overview

I began, "Mental illness derives in part from insoluble intrapsychic conflicts. Of course there are often genetic factors also. These conflicts are unconscious, they relate to early childhood experiences, and they rest on inadequately resolved infantile conflicts. Before the onset of the illness they were handled by the mechanisms of defense of the ego, by character traits, and by ego-syntonic symptoms—three factors that together constitute what is known as the everyday personality. If through combinations of inner and outer stresses previous methods of maintaining psychic homeostasis fail, then regression, symptoms, and/or ego-dystonic character traits appear. The pattern of these symptoms and character traits reveals elements of unconscious early inner conflicts and the way that the patient's ego deals with them.

"The point of this is to require focus on the ego. Psychotherapy always takes place through the medium of the patient's ego. We never reach the unconscious itself—we only deal with derivatives as they manifest themselves through the ego functions of the patient. Fundamentally psychoanalytic psychotherapy is aiming at a change and improvement in the patient's ego functioning and consequent adaptation to the surround, which is reflected in increased mental health. The point is not that mental health consists of adaptation, because there are many circumstances in which one

should not adapt but fight to change them instead. But this should be under the control of the person's ego, in spite of the fact that it is inexorably and repetitively driven from within. I want to make this very clear from the beginning, because authors like Lacan have criticized the emphasis on adaptation as making psychoanalysis a form of forcing the patient into bourgeoisie values and a capitalist existence. Adaptation means making realistic choices based on a realistic assessment of the consequences of those choices, rather than being driven by inner conflicts and conflict solutions and leftover illusions from childhood to make self-destructive and self defeating choices that can foreclose one's future and even one's life.

"Jerome Frank put forth for us the well-known 'demoralization hypothesis,' a plausible superficial hypothesis regardless of what school of psychoanalysis one follows, which I consider useful in assessing a patient at the beginning of treatment in order to understand why he or she is in the office now. Demoralization results when a person experiences distress that he or she cannot explain, or fails repeatedly in tasks of living that the person and others important to that person expect him or her to be able to perform. It can vary greatly in duration and severity, and is characterized by a wide variety of unpleasant feelings, based on shattered self-confidence. Although I disagree with the details of Frank's approach and with his insistence that the symptoms themselves are all a result of demoralization, I agree that the central role of the demoralization is often obscured by the fact that patients

come to therapy asking for treatment of specific symptoms. However, in this day and age I have a number of patients who came for therapy with such complaints as ‘I am all screwed up,’ with no classifiable neurotic symptoms. So much for DSM IV and DSM V.

“The importance of Frank’s notion of demoralization is to help the therapist keep in mind that pharmacologic or behavioral treatment of symptoms may completely miss the point of why the patient is there. Frank claims that all schools of psychotherapy share certain features that will bring relief by raising the patient’s morale. It is possible to consider Frank’s point of view without reaching his extreme reductionism by simply recognizing that although it is indeed true that all forms of psychotherapy have certain basic components which are vital to therapeutic improvement, this is far from the complete story. Sloane, et al², for example, have stressed the release of tension through catharsis, cognitive learning by trial and error, as well as Gestalt, operant conditioning and corrective experiences, identification with the therapist, and improved reality-testing by working through or practice, as aspects common to psychotherapy and behavior therapy. But that is not all there is.

“Frank emphasized the need for a trusting relationship between the patient and the therapist, a supportive ambiance or setting—which he described in an implicitly pejorative way as ‘the aura of the healing temple.’

Since therapists should be strongly discouraged from trying to impress their patients by their divinity—for certainly they will soon get into trouble—I greatly prefer Winnicott's famous depiction of a holding environment, one which is free from interruption and allows the therapist to concentrate on what the patient is saying and the patient to relax and think about himself or herself. No discussion of the more complex differences of approach between various psychoanalytic orientations such as those based on the psychology of the self or object-relations theory is worthwhile unless we can first assume that the patient is provided with the basic requirements of the treatment process. There is no question that at least in intensive psychotherapy, if the correct ambiance is not provided by deliberate attention to it on the part of the therapist, the treatment cannot succeed. In my practice I have been faced with a number of patients who have seen a succession of psychiatrists of good training and reputation in which the treatment failed only because insufficient attention was paid to the ambiance. The therapy can be, for instance, easily destroyed by such actions as the therapist's answering and engaging in long telephone conversations in the presence of the patient during the patient's session or, as has happened, simply falling asleep or eating while the patient is talking.

“Frank and many other authors also emphasized the need for a mutually accepted procedure, consistent structure, and a conceptual scheme or rationale that maintains the therapeutic relationship, keeps the patient's hope

alive, and provides the basic requirements for healing, as just described, to take place. Stone warned that not spelling out the therapeutic contract at the beginning of treatment, using drugs as a function of therapeutic despair rather than in a judicious manner, and other lapses from what Stone called our basic physicianly vocation, are of course equally undermining of any therapy.

“But it is necessary for conceptual clarity to distinguish nonspecific from specific treatment interventions! One might say that intensive psychotherapy begins where common sense ends. The study of mental illness as an expression of unconscious conflicts is the key to all psychodynamic psychotherapy. This is true whether we are doing analytic psychotherapy aiming at structural change, or even supportive psychotherapy aiming at better adaptation using and trying to strengthen the structure the patient has. It is the aim of structural change via the formation of transference or transference-like experiences and interpretation of these in the treatment procedure that differentiates intensive psychodynamic psychotherapy and psychoanalysis from cognitive, behavioral, supportive, educational, and learning therapies, no matter how ‘evidence based’ they claim to be.

“In formal psychoanalysis the basic tool is interpretation as a sequence of transferences evolve in an orderly fashion and in an atmosphere of technical neutrality. In intensive psychodynamic psychotherapy often face-to-

face, there is also interpretation but the transference does not develop as systematically or as intensively, there is less regression, and transference manifestations are more influenced by the moment-to-moment impetus of the relationship itself, of the patient's life situation, and by the more limited overall goals. Intensive psychodynamic psychotherapy represents a more focused approach. It is at times absolutely necessary to take an active role at the beginning of treatment to limit the patient's acting out and to form a therapeutic contract that will enable that therapy to proceed at all. This means an abandonment of neutrality and then perhaps a shift back to neutrality, a cycle which may have to occur several times or even frequently during the long-term process. These vicissitudes are the so-called 'parameters' that immensely complicate the process of intensive psychodynamic psychotherapy and may make it less theoretically neat than formal classical psychoanalysis. Some authors wish to maintain the differentiation between 'parameters' that can eventually be analyzed and 'departures' that must be maintained indefinitely to preserve the integration of certain much-damaged patients. Supportive therapy, by contrast, does not aim at change in internal structures at all, and utilizes the transference primarily for suggestion and manipulative purposes in order to improve ego functioning and consequently the patient's life situation.

"There is greater focus on the patient-therapist interaction and especially on the here-and-now experience of the patient's life in intensive

psychodynamic psychotherapy than in psychoanalysis. It should be noted that the establishment of 'relatedness' is an art and it takes a certain talent to develop a bond with another human being who is either frightened or withdrawn or who can only relate, for example, through paranoid mechanisms. It is this art that is addressed in the existential language of the 'encounter' that I talked to you about before, in which the therapist must be there and the patient must experience the impact of the therapist's personality.

"Neutrality certainly does not mean coldness or unresponsiveness. The frightened novice hiding behind the theoretical conception of psychoanalytic 'neutrality,' usually because the novice is afraid of reporting to the supervisor what he or she would like to have said spontaneously, or of admitting to countertransference-based impulses, withholds from the patient the main ingredient of therapeutic healing. If you combine this withholding with the typical unfavorable training clinic ambiance: insufficient privacy with paper-thin walls, interruptions by secretaries or other clinical personnel, and the ever-present clamor of the resident's 'beeper,' one can see the reasons for failure and a high patient drop-out rate. What is involved here is a combination of lack of understanding, overcrowding of facilities, and a typical indifference for the autonomous self of the individual that prevails in many public agencies, even those that engage in training programs.

“The therapist is a witness to the introspective self-observation of the patient in a well-conducted psychoanalytic therapy, and the therapist achieves psychological insights as the result of highly developed skills which are used in the extension of the therapist’s vicarious introspection that is called empathy. This insight may, of course, be linked and amalgamated with other methods of observation, but the final and decisive observational act is introspective and empathetic.

“It follows, for example, that since the reliability of empathy declines the more dissimilar the observed is from the observer, the earliest stages of mental development, which are vital to an understanding of the preoedipal disorders, are a special challenge to our empathic capacities, explaining the wide disagreements among even senior psychoanalysts in this area. This is because such disorders were formed from the beginning of life and certainly before the stage of the Oedipus complex. Evocative memory is very shaky for all humans for events during the preoedipal developmental stages, although procedural memories are often precipitated there and last a lifetime. It also follows that the therapist must be sufficiently free of conflicts, both oedipal and preoedipal, to be able to listen to the patient’s communications and to be able to react with empathy, introspection, and the return of communications to the patient which are actually congruent with where the patient is at. Psychoanalysis and intensive psychodynamic psychotherapy—its derivative discipline—are unique among the sciences and remain partly rooted in the

tradition of the well-trained calm craftsman practicing an art as well as a science, and are clearly delineated from other sciences—even other sciences that inquire into the nature of man.”

It appeared to Marsha that Claire and Ali were not quite following this, and so she added, “In what Freud³ called ‘borderline and mixed cases’ he reminds us the psychotherapist must face up to the fact that he or she is not dealing with neuroses and is quite often struggling with patients who are suffering primarily from an arrest in psychological development. Such patients have neither the firm and consolidated psychic structures that are a necessary precondition of psychoanalysis, nor a well-differentiated ego and superego with a concomitant consolidated repression barrier. For this reason, as Freud stated, it seems unreasonable to recommend classical or formal psychoanalysis as the treatment of choice for cases of preoedipal disorders, severe character disorders, and borderland patients. Indeed, the experience of most well trained psychotherapists indicates that the patient’s treatment soon forces the therapist into the introduction of a variety of ‘parameters’ or ‘departures’ that begin to greatly stretch the definition of psychoanalysis as Freud conceived of it.

“Because of these parameters or departures, the whole treatment of preoedipal disorders becomes more controversial. The flexible therapist has to develop changes in technique to achieve the greatest clinical utility. Yet,

since parameters and departures must be kept at a minimum so as not to endanger the processes of spontaneous transference formation, increased autonomy, and structural change through interpretation, it is necessary to have a continual and thorough psychodynamic understanding of the patient and of the effect of any parameters or departures that are introduced. It is also necessary to have a continual and thorough psychodynamic understanding of one's self."

I then continued, "Intensive psychodynamic psychotherapy is best thought of as psychoanalysis with parameters and departures, that is to say, a form of psychoanalytic treatment modified by necessity (but not counter transference-based) to suit the nature of the patient involved. Thus if we define psychoanalysis as a treatment characterized by a frequency of at least four sessions each week during which intense transferences develop and are resolved by proper interpretations, we can compare intensive psychodynamic psychotherapy with this procedure. In intensive psychodynamic psychotherapy the patient comes in less frequently, usually twice or at most three times weekly, may or may not lie on the couch, and does not ordinarily form a full-blown set of transferences. Although strong transference reactions develop, and these are interpreted, the curative factors in intensive psychodynamic psychotherapy are from a variety of influences. A combination of supportive, educative, and interpretive interventions is at times unavoidably and legitimately called for, and even the use of

psychopharmacologic agents. In psychoanalysis, on the other hand, interpretation of the transferences is thought to be the major and central curative factor, although the other factors, including psychopharmacological aid, may also be helpful and necessary at times.

“It is actually easier to exploit patients in intensive psychodynamic psychotherapy and to become lost in countertransference than it is in psychoanalysis, because in the latter the rules are more clear cut. For this reason, a therapist practicing intensive psychodynamic psychotherapy, just as the psychoanalyst, absolutely has to have undergone a deep and thoroughgoing personal analysis. Otherwise it is impossible to avoid major countertransference floundering, resulting at worst in both the exploitation of and retaliation against patients. I regret to say that much of what goes on in the name of psychodynamic psychotherapy today is performed by unanalyzed and often poorly trained therapists.”

“Can you clarify the role of intensive psychodynamic psychotherapy”, asked Ali, “since it seems more patients will receive this than psychoanalysis”. I replied, “Intensive psychodynamic psychotherapy, when properly performed, is a highly effective procedure for a large variety of emotional disorders that are not amenable to formal psychoanalysis. It is the treatment of choice for selected cases of schizophrenia, borderline patients, personality disorders (except for the addictions), and psychosomatic conditions. It is

second choice for a large number of patients who cannot afford the time and money for formal psychoanalysis. Our goals are less far reaching in intensive psychodynamic psychotherapy than in psychoanalysis. In the former we are satisfied with more limited structural change, resumption of normal developmental lines, and better adaptation. Sometimes we must help the patient accept residual deficits and scars from early infancy. One danger of dealing with preoedipal disorders lies in raising the patient's hopes for extensive intrapsychic rearrangements, which is often not possible when profound early psychological destruction has occurred.

"The uncovering and supportive approaches can be placed on the activity spectrum of the analyst. These activities, which are all present to some extent in every treatment, range from the least active to the most active: Listening; questioning and clarification; confrontation; interpretation; suggestion and prohibition; and active control or manipulation. The greatest activity is required if the patient needs the intrusion of a real object in his or her life; the least activity is called for if the patient can at all tolerate the frustration of hunger for the real object, the yearning for a real intimacy with the therapist and even his or her family. If the patient absolutely cannot tolerate the task of setting aside the therapist as a real object, supportive interventions become mandatory at least until such time as this tolerance can be developed."

“You can do better than that,” interrupted Sarah, who could keep silent no longer and was getting bored and exasperated with my long monologue, “The core assumptions of the basic psychoanalytic model include psychic determinism; the pleasure-unpleasure principle, i.e., that behavior is an effort to minimize pain and maximize pleasure and a sense of intrapsychic safety; that the individual has a biological nature which drives its efforts at psychological adaptation; a dynamic unconscious with mental forces competing for expression that leads to continual conflict and compromise formation; and finally, the genetic-development proposition, which states that all behaviors are understandable as sequences of actions developing out of earlier (even earliest infantile) events”.

George added, “Fonagy and Target⁴ take up Brenner’s suggestion ‘that all mental contents are compromise formations multiply determined by components of conflict.’ They paraphrase Brenner as saying, that such compromises are achieved between the following components: (1) a drive derivative, i.e., an intense personal and unique childhood wish for gratification; (2) unpleasure in the form of anxiety or depressive affect, and associated fears of object loss, loss of love, or castration linked with the drive derivative; (3) defense, which functions to minimize unpleasure; and (4) manifestations of superego functioning such as guilt, self-punishment, remorse and atonement.’ The authors add that even self and object representations are the result of compromise formations in this schema and

defense mechanisms represent simply ego functions having both an adaptive and a defensive role. Healthy functioning then would be the capacity to execute good reality based compromise formations.

“They mention Green’s concept of the dead mother which leads to a constricted capacity to love, and Klein’s concept that the internal images of the parents are much crueler than the parents. They remind us that, as Fairbairn said, the search for sexual gratification may be a pathological substitute for intimacy. They point out that the relationship between patient and therapist must be crucial since, they claim, all treatment methods seem to be similarly effective, and they bemoan the fact that psychoanalysis is breaking up. They say psychoanalysts are not interested in other theories and are currently experiencing not pluralism but fragmentation. They maintain that psychoanalysts do not know how their treatment works. They insist psychoanalytic theories have to be like a family of ideas, and a way must be found to prune this family tree. That is where we in the field are at right now.”

Martin's Basic Postulate

I looked Ali and Claire right in the eyes because my next comments were going to be the centerpiece of my teaching to them and probably the last teaching I could offer to those two wonderful young people. I said, "In summary, the most significant conflicts in life arise in early childhood and give rise to unconscious fantasies that act subsequently as persistent, guiding, motivational forces. The unconscious conflicts in the patient occurring early in life create a mental set that is characteristic for each individual, a predetermined tendency to respond to events in a characteristic way. These fantasies go through convolutions as one develops, and some later editions may even provide defensive distortions of earlier fantasies. As Arlow states, 'One can observe how the symptoms of the patient's illness, how his life history and his love relations, his character structure and his artistic creations may all represent unconscious fantasy activity, of the 'fantasied reality' that governs the individual's life.'⁵

"In the infancy of every person, as soon as it is neurologically possible, there arises and resides a crucial fantasy activity, interwoven with early infantile experiences to a greater or lesser degree, depending on how traumatic these experiences has been. But Arlow explains, 'What constitutes trauma is not inherent in the actual, real event, but rather the individual's response to the disorganizing, disruptive combination of impulse and fears

integrated into a set of unconscious fantasies.’ The individual’s experience, writes Arlow⁶, ‘is usually organized in terms of a few, leading, unconscious phantasies which dominate an individual’s perception of the world and create the mental set by which she or he perceives and interprets her/his experience.’ Transference is not a repetition of the patient’s actual early interactions with major present objects such as the parents, but expresses derivatives of the patient’s persistent unconscious childhood fantasies, the ‘psychic reality’ of these early interactions of the patient with parents or significant caretakers.

“The result of the pressure of the internal childhood fantasies is that there is a tendency to reenact them in all interpersonal relationships, always attempting to actualize a derivative representation of an unconscious fantasy. Without being aware of it, the individual tries to impose a preconceived situation onto a new situation, and this attempt may lead to all sorts of maladaptive difficulties in living of an acute or chronic nature that bring the patient eventually into psychotherapy or psychoanalysis.

“The patient similarly attempts to reenact derivative expressions of these unconscious fantasies and wishes in the psychoanalytic or psychotherapy situation. The analyst’s behavior or style is a stimulus to the patient’s unconscious fantasy life that produces the reaction we call transference. Even in the transference, at least at first we see only derivatives

of the persistent unconscious fantasy activity of childhood that governs the individual's life. The analyst is given an assigned role to play in the preconceived drama and tremendous pressure is placed on the analyst to act and speak in a way consistent with that unconsciously assigned role. In the ordinary analytic situation, because the analyst remains neutral and does not respond to seductions or provocations, the derivatives of these fantasies and wishes stand out in bold relief and take on varied and dramatic forms, allowing the analyst to demonstrate them to the patient. Difficulty occurs either when the patient's pressures are so great that the analyst is literally forced as, for example, in Kohut's 'reluctant compliance,' into certain behaviors and roles outside the traditional analytic situation, or when the analyst does not realize that he or she has been successfully fit or manipulated into a predetermined role through the unconscious but nevertheless effective ministrations of the patient. Remember always that patients may be sick, but they are not stupid, and many are extremely clever, sometimes even smarter than you are.

"The interpretation of the transference and of similar situations in the patient's life outside the transference should ultimately aim at focusing on the central psychic fantasy core of the patient through the continuous analysis of derivatives of that core. The patient's observing ego must engage with the analyst and eventually take over the search for the infantile fantasies and/or traumata and identify them. Events such as the primal scene are rarely

directly remembered. What counts as the patient's psychic reality is a basic core of fantasies or traumata in some combination of intensity woven into a unique special fantasy activity. In some patients the material will be almost purely fantasy and in others the most serious kind of abuse and exposure to real horror and death has taken place. Still, no matter how great the traumata, it is the basic unique fantasy activity woven around the traumata that has the primary effect on all of the patient's subsequent behavior and capacity to relate to other people.

"This view of the mental set produced by both unconscious fantasies and background practices casts considerable doubt on theories that emphasize the direct curative power of either empathetic behavior or of nontransference interpretations by the analyst, no matter how well meaning, because until the assigned role has been analyzed and understood, whatever the analyst says is experienced by the patient as belonging to that assigned role or as an opportunity to manipulate or pressure the analyst into that role.

"It is unsettled to what extent infantile fantasies are derivatives of background practices and preverbal experiences that we discussed after the visit to Pergamum, and to what extent they constitute compromise formations originating after representational thought has appeared developmentally in the middle of the second year of life. It is even difficult to see how this question could ever be answered in a general way. Each patient

requires specific in-depth study. When the analyst finds himself or herself taking educating roles with any given patient, careful study of countertransference is necessary. It may reveal some indigenous need in the analyst to play such a role, an unnoticed pressure or manipulation from the patient to edge the analyst into a scenario, or a genuine empathic response to somebody with a primary deficit that needs to be corrected. Freud pointed out that after-education is a part of every psychoanalytic therapy.

“The matter is further complicated by the infantile fantasies, for even when after-education is called for, it may not at all be experienced as such by the patient although it is offered with the best of intentions. The fantasies may have to be revealed and interpreted first. On the whole, I prefer for the most part to let after-education take care of itself out of the natural human relationship that can form between patient and therapist, and to concentrate my therapeutic endeavors on proper listening and interpretation, especially of the transference. This is true even with quite disturbed patients, and avoids the temptation to exhibit one’s self as an educator or to assume ‘authority’ with them.”

Sarah could not resist interrupting with another quotation: “As Bowlby puts it, from the point of view of attachment theory one of the main functions of a therapist, ‘is to provide the patient with a secure base from which he can explore the various unhappy and painful aspects of his life, past and present,

many of which he finds difficult or perhaps impossible to think about and reconsider without a trusted companion to provide support, encouragement, sympathy, and on occasion, guidance.⁷”

At this point Claire showed what a wonderful psychoanalyst she could have become and how great her interest was in psychodynamic psychiatry. She said, “I have been reading the Journal of the American Psychoanalytic Association, the supplement to volume 51, 2003. I was very impressed by what Renick had to say on page 50: ‘Analysts espousing different, even contradictory, theories have therapeutic successes. One explanation for this observation is that an individual analyst’s personal dispositions, not covered by theory, can be more important in determining therapeutic outcome than directives of theoretical origin. Another explanation is that many therapeutically effective analysts do things that violate their theories, but deny it to themselves—or at least don’t talk about it publicly. Probably both explanations have merit.’”

To my surprise Ali added, “But in the same issue Hirsch on page 192 replied, “Greater license to interact may indeed produce a situation in which the patient is overwhelmed by the all-too-noisy presence of the other. As in my first example [he refers here to case examples given earlier in Hirsch’s paper], the failure of the initial analysis likely reflected a mixture of people who were not a good match. Perhaps in an effort to connect or to be loved, the

first analyst asked for too much or maybe even gave excessively, and in being too focused on being loved lost the contours of his patient.” Clearly Ali had been studying on his own and I was delighted.

George ended the discussion, which was making all of us somewhat tired anyway. He concluded with a quotation from Richards in the same journal, “Every analytic style has its dangers and excesses, just as every school has its share of bad analysts and doctrines and thinkers. If, on the one hand, the Freudian ideals of neutrality and abstinence entail the risk of hardening into authoritarianism, so, on the other, do the relational ideals of empathy and participation risk yielding to inappropriate gratifications . . . This irony is reminiscent of the tendency of postmodernists to take for granted the truth of their own beliefs, while remaining condescendingly skeptical about the assertions of those with whom they disagree⁸.”

I began to feel really stupid in the presence of all these quotations from one journal supplement that I had not yet got around to reading. Clearly more discussion was needed but Lisa appeared and reminded us it was getting time to pack our things and leave for the Milan airport. The last words I heard in Turkey came to me from Abdul, the bus driver. I had Ali interpret for me to tell him how much we admired his driving skills and I gave him a large tip. To my surprise he took my hand and kissed it, and through Ali he told me what Professor Kozturk had told me already, that he had a wife and a large brood of

children and deeply appreciated the money. Here from the heart of a simple bus driver in Turkey I briefly experienced pure human goodness and genuine feeling; the memory of it stays with me, oddly almost haunts me, to this day.

Soon Lisa, Sarah, Henry, J., Marsha, George, and I took the short flight to Milan where we were to spend the afternoon and then in the evening we were all scheduled by the grant itinerary, I thought, to embark on a plane to Chicago. I managed to sit next to J. on the plane to Milan. I said to her quietly, "Maybe this will help you to understand me. Socrates, in Plato's *Phaedrus*, objects to the idea that love is chiefly a physical desire. To him it is an impulse of beauty and goodness, a kind of divine madness that lifts the soul up and can enable it to enter the path that leads to truth, beauty, and goodness themselves. The first movement in philosophy, says Plato, the impulse to seek what is higher (what Plato called 'the beyond'), comes from falling in love with visible physical beauty. It follows from this that Ezra Pound was correct when he said, 'where there is no love in the house there is nothing.' And 'nothing' does not produce inspiration, creativity, and the impulse to seek what is higher; it produces despair, exhaustion, torpor, and couch potatoes."

"Even if I do understand you, Martin," J. replied, "I cannot give you what you want. I am bound by my marriage vows and frankly, I am somewhat suspicious of what you are really after. You are becoming a nuisance and I think there is something wrong with you." There was not time on the flight to

continue this, and it was clear that J. was not interested in continuing it.

We arrived in Milan. The first thing I noticed was that my atrial fibrillation was worse than before, but I ignored it. There was not much sightseeing time available and we began by visiting the *Palais Real*, which was advertising a Modigliani exhibit. But the captions were all in Italian and we were surprised to find that not many of the paintings were by Modigliani, for us an annoying disappointment. So we moved on to the *Pinacoteca Ambrosia*. This seventeenth century museum contains Caravaggio's *Basket of Fruit*, Raphael's awesome preparatory drawing for the *School of Athens*, as well as paintings by Leonardo, Botticelli, Titian, and Brueghel. It also has Italy's oldest public library, dating from 1609, but which was not available to us for a visit.

Walking through the *Duomo* plaza, we worked our way through the usual mob of tourists with much effort and found the *Pinacoteca di Brera*, containing one of the most outstanding art collections in Europe including Mantegna's *Dead Christ*, a painting which displays remarkable precision, rendering Christ as the victim of an all too human agony, a wondrous achievement. It was hard to keep from being transfixed in front of paintings like this or Raphael's *Betrothal of the Virgin*, painted when he was 22, or Piero della Francesca's *Madonna with Saints and Angels*.

Time was running out for visits so we decided finally to end at the treasure of Milan, in the *Santa Maria della Grazi* where Leonardo da Vinci's *The Last Supper* is housed. In my opinion, even as I imagine it now, this is the greatest work of art ever produced. It was almost destroyed in World War II and of course, as everyone knows, it is falling apart because Leonardo did not use conventional fresco technique. We waited in line with all the other tourists and were allowed only 15 minutes in the large hall where the painting occupied a complete wall. At one time this was a dining hall for monks and to my great amazement I found that a door had been cut through the bottom of the painting so the monks could go more easily in and out. So much for the enculturation effect of religion and appreciation of great art. We stood near the front of the picture at the rope that blocked one from getting too close, and listened to the usual lecture by a guide. But it was only when we went to the back of the hall and saw the picture at a distance that one of the most transcendental transfigurations of my life occurred. This faded deteriorating artwork was the most remarkable picture I ever encountered. If one stands away from the painting at the back of the long hall the figures actually come to life. The depiction of the Last Supper of course represents a very emotional moment indeed and carried an extraordinary impact for me. Aldous Huxley called it the saddest artwork in the world, but I did not at the time find it a work that moved me to tears but rather to awe and astonishment. It was for me a true "cipher." Only now does the sadness

descend on me as I review my memory of it. As Jesus sits close to His earthly death, so do we all.

While we were hustled out of the hall by the guide, causing me considerable annoyance because it was hard to tear myself away, Henry asked what it was about the human mind that made intellectual defense of tyranny possible in the twentieth century, even in a country like Italy that housed such artistic masterpieces. He brought up Lilla's⁹ book in which the author mentions Isaiah Berlin's comment that the Enlightenment, what he calls the tyrannical intellectual method, bred these political tyrannies. Or was it 'religious irrationalism?' Lilla suggests that intellectuals with passionately held ideas drive the young into a frenzy that leads to tyrannical action. Those who say skepticism and moderation are a good idea, for example, the French philosopher Raymond Aron, are attacked by excited irresponsible intellectuals.

Still under the influence of this extraordinary painting I reminded Henry of what Anita Brookner's heroine in *The Rules of Engagement* had learned:

It is the gods, who are in control, and that their pagan indifference can be visited on any life, no matter how correctly that life has been lived. I have come to believe that there can be no adequate preparation for the sadness that comes at the end, the sheer regret that one's life is finished, that one's failures remain indelible and one's success illusory. I also believe that there occurs a moment of renunciation, when one is vested by the knowledge that time is up, that there is to be no more time¹⁰

I thought to myself, “Brookner as usual gives us a story that consists of the internal monologue of sad and isolated people, like me”. “Brookner also described most poignantly the longing for a soul mate,” I said, turning to J.

J. said nothing and there was an uncomfortable silence.

Finally Sarah, ever the English professor, pointed out that other famous authors looked on things quite differently, more hopefully and with less all-pervasive gloom. For example, she quoted Skilton¹¹, who in his introduction to Trollope’s *Dr. Thorne* wrote, “Trollope’s position still displays a robust, nineteenth century humanist belief in the pre-eminent importance of human nature in western literature, and in the foundation of western civilization in general.” “For Trollope,” said Sarah, again quoting Skilton, “‘The plot is but the vehicle for ‘created personages’, who shall embody and act out his perceptions about human life and human nature.’”

It certainly looked liked a new discussion was welling up while we were standing in the large plaza in front of the *Santa Maria della Grazi* church in the warm sun. I could almost imagine that Leonardo was listening and chortling at our inadequacies. Henry said with an incredulous look, “Does the human mind have any essence at all? That is not a common belief these days. Yet Winnicott’s concept of the hidden true self is that of a most essential and unharmed aspect of a person, sort of soul-like. Winnicott recognized that it is

not that the patient fears the death of the analyst but rather that the analyst will 'be unable to believe in the reality and the intensity of the patient's primitive anxiety, a fear of disintegration, or annihilation, or a falling forever and ever¹²." "Here", I responded, "is an authoritative psychoanalytic statement about an essential self that is in direct contradiction with current nihilistic, intersubjectivist, postmodern, and poststructuralist thought. ¹³ have come to agree with Winnicott in my later years and I deplore this current fashion, which I think is born of despair about the world situation."

Sarah, who was not slow in matters of academic discussion, commented that the perspective metaphor so popular with Nietzsche and contemporary poststructuralists actually leaves open the question of whether there is or might be some "truth in itself," that is the ultimate object of all perspectives. "After all," she continued, "to insist that something is viewed from a perspective seems to presume that 'it' exists independently of the perspectives." It seemed that she agreed with me.

All I could think of as she said this, with an obvious reference to Nietzsche, was when, as Zarathustra was climbing the mountain, he thought of how often since his youth he had wondered alone. Standing around in the plaza adjoining this beautiful church and enjoying the sunshine and clear Italian sky I decided to launch into further discussion. I asked the group, "What does it mean to be human?" Without waiting for an answer, I felt

driven to continue, “In dealing with human beings in the clinic, an incredible qualitative quantum leap takes place. Students are not prepared for this jump in premedical studies or even in medical school, because there is something about human beings that makes them fundamentally different from animals, corpses, and computers. As Foucault beautifully puts it in *The Order of Things*, man is a ‘strange double being’; he is ‘emprico-transcendental.’”

“The problem that faces every physician, whether a psychiatrist or in any other specialty, is how to deal with the human self of each patient. In psychiatry this problem is so clear that it intrudes into every aspect of psychiatric practice, and only with the advent of pharmacological agents has it been possible to disavow it, to push it into the background. The rest of the medical profession leans heavily on a reductionist biomedical model of the human being with molecular biology as its basic scientific discipline, a model in practice leaving no room for the social, psychological, and behavioral dimensions of illness. The lack of time for these humanistic aspects in a busy medical setting and their disavowal has led to a style of physician conduct that is creating increasing patient dissatisfaction with the entire medical profession. Patients are unable to describe exactly what is bothering them and respond only with a spate of often nasty and unfair malpractice suits, and complaints about physician fees.”

Marsha said, “I went for seven years to a well-known internal medical

specialist for my annual check-up. During all that time I never had to call him for anything, and I always waited in his reception room patiently for an hour or so before my physical examination. Then one day I developed a case of diarrhea that was not responding very well to self-medication, and George in desperation decided to call him about 6:30 a.m. (before I started to see my own patients) to find out if another medication would be better. This was our first telephone call to this doctor in seven years. We were treated to an angry lecture about disturbing him, with the result that we felt deeply humiliated and frustrated. It made us wonder what would happen if something were to be seriously wrong and we desperately needed him. Is this the physician model we wish to present to our psychiatric patients—the tired, overworked, irritable internist with too many patients?”

I added, “In my writings I have objected to the traditional biomedical view that biological indices are the ultimate criteria for defining disease. Engel¹⁴, in what I regard as a classic paper, pointed out that this attitude leads to the present paradox; some people with abnormal laboratory findings are told they are in need of treatment when in fact they are feeling quite well, while others who feel sick are assured they are well, that they have no ‘disease’. He asks, ‘When is grief a disease?’ We might ask, ‘What do we say about her complaints of fatigue and weakness to a woman who has lost her husband, or to the patient with a mild myocardial infarction who feels ‘great’ after his triple bypass operation and is smoking heavily again? Even Engel’s

'bio-psychosocial model' will not suffice, because it is too easy to pay it lip service while practicing on the biomedical model.

"When we are urged by professors of psychiatry at major universities to go back to being 'front line physicians', doing physical examinations on our patients and primarily treating them with medicines, we are asked to join this charade or pretense that our patients have no self and are simply biochemical organisms. By acquiescing in this movement, we are acting in bad faith and cooperating in a ritual of humiliation and deprivation being perpetrated on medical patients, which they are being asked to accept as 'modern science.' We are forcing what Sartre called 'being-for-others' on our patients, a deprived state he warned as calling forth either a battle for retaliatory control or masochistic submission.

"In eagerly huddling under the mantle of so-called modern medical practice in which rich people get all the advantages and poor people get nothing, we are rushing to embrace a biomedical model that arises from a society that views man as a machine and values 'fast, fast, fast' relief above everything else; a society that measures a person's 'worth' by his or her financial assets and ignores the human autonomy factor as it engages in glib talk by 'experts' about limited nuclear war, nuclear overkill, and manufacturing missiles and neutron bombs. We are allowing ourselves to be shaped by a society based on what Marx called 'the fetishism of the

commodity,' participating in what Heidegger deplored as inauthentic 'enframing' (*Ge-stell*), regarding persons as ordered 'stock' for use as 'standing-reserve' and leading in our age technology to a 'darkening of the world.' For example, an administrative psychiatrist, chairman of a local hospital department, praised a lecture of mine by referring to me as a 'valuable resource.' Here, Henry, is the underlying attitude behind the development of tyranny in the twentieth and, who knows, the twenty first century."

Marsha said, "Those currently practicing psychoanalytic psychotherapy should be especially aware of the approach of Karl Jaspers, psychiatrist and philosopher, who explained that man is accessible to himself in two ways, as an object of inquiry and as an existence endowed with the freedom that is inaccessible to scientific empirical inquiry. Jaspers¹⁵ wrote, 'In the one case man is conceived as object, in the other as the non-object which man is and of which he becomes aware when he achieves authentic awareness of himself . . . Man is fundamentally more than he could know about himself.'"

Even J. began to look interested so I decided to continue. I just could not give up hope to impress her. I pronounced rhetorically, "As we sink deeper into what threatens to be the darkest of dark ages and towards perhaps the extinction of the human species in a nuclear winter, those of us who practice psychoanalytic psychotherapy encounter more and more patients with so-

called existential complaints. These are expressed either as a vague sense that everything is wrong or as a plethora of symptoms cutting across the entire nosology of psychiatry, typical of the so-called borderland patient that I have described for you previously. This increasingly common clinical picture, viewed either sociologically as a manifestation of the ubiquitous existential despair of our age as Kierkegaard called it when he wrote, 'The wine of life is drawn,' or intrapsychically as self state anxiety as Kohut called it, is dramatically reflected in the prescient work of contemporary artists, musicians, authors, and poets. Most current academic philosophers have responded to this situation by withdrawing into irrelevant exercises marked by symbolic logic, ignoring the fundamental questions that human beings have to struggle with every day. Only now do we see signs of this withdrawal ending in philosophy. Most scientists and physicians, with some notable exceptions, have also ignored the problem and instead retired to their laboratories, enabling us to develop bigger and more lethal methods of self-extermination."

J. was not impressed. Following a short silence, George said, "After the Second World War, American psychiatry, as Grinker described it in 1964, rode off madly in all directions. Some psychiatrists stressed the organic and biological; others became alienists in the old-fashioned sense of the word. So, for example, psychiatry distinguished itself by lending itself toward a judicial procedure that incarcerated one of the world's great poets, Ezra Pound, in a

public mental institution. Life in any such institution at the time could only be described as a living nightmare to a sensitive person (this was true in spite of the honest efforts of a handful of administrative psychiatrists to render the milieu 'therapeutic'). But the great thrust of psychiatry after the Second World War and in the 1950's was in the direction of psychoanalysis and intensive psychoanalytic psychotherapy, given impetus by the massive wartime exodus of outstanding psychoanalysts from Europe to the United States.

"Among them was my psychoanalyst and teacher, Franz Alexander, also familiar to you Martin, who worried a great deal about social matters. About three months before he died, he pointed out that one of the most remarkable qualities of psychoanalytic psychotherapy was its capacity to give a contemporary meaning to the motto of the Renaissance humanists: 'Respect for the dignity of the individual.' You have mentioned this before, Martin. Here is what Alexander¹⁶ actually wrote:

Psychotherapy aims not only at enabling a person to adjust himself to existing conditions, but also to realize his unique potentials. Never was this aim more difficult and at the same time more essential. Psychoanalysis and psychotherapy in general are among the few still existing remedies against the relentlessly progressing levelization of industrial societies which tend to reduce the individual person to becoming an indistinguishable member of the faceless masses.

"Many years later, as we come closer and closer to a dehumanized

society, American psychiatrists are increasingly deserting the field of intensive psychoanalytic psychotherapy. Psychiatrists in some other countries (not all), awed by American financial success, are following their lead. The myriad patients with borderland and existential complaints and character disorders and personality problems and psychosomatic diseases are not disappearing; they are simply being forced to turn to other practitioners for help.

“The net effect of this abandonment of psychoanalytic psychotherapy by American psychiatry is twofold. First, patients are being deprived of the benefits of the superb medical training of our American psychiatrists and their grounding in scientific method and ethical concern for patients and they are forced to seek treatment from a variety of nonmedical practitioners. Some of these are very good, but many are simply charlatans acting out their own problems on hapless patients.

“Second, medical students are increasingly disenchanted by the discipline of psychiatry. If a medical student wishes to eventually practice pharmacological and organic treatment of patients, why be a second-class internist? Furthermore, a hitherto important source of future residents, those thoughtful medical students with a humanistic orientation, find psychiatry increasingly unsatisfactory as a choice for their career specialization.”

I concluded, "The psychotherapist who confronts a severely disturbed patient with a psychoanalytically informed listening or analytic stance gets no high grades, no Continuing Medical Education credits, no social approval, relatively little money, lots of public ridicule in cartoons and movies, and a growing sense of alienation from the medical, and now even from the organized psychiatric profession. All the while, he or she is driven by demands from insurance companies to get the therapy over with as quickly as possible. All of these pressures are symptoms of the increasingly darkening of our age and the progressive dehumanization and materialization of man that Nietzsche complained stridently about at the end of the nineteenth century."

Henry was now at the top of his form. It was clear to him that I had failed to entice J. and that she was going to remain loyal to him, although he realized that she did not particularly like him. But she was very useful to him as a scapegoat and so he wished to keep her around. So, being assured of that, he had no compunctions about taking over the discussion and parading his philosophical erudition and his awareness of the current state of psychiatry and psychoanalysis, which was much more than he had pretended to have. He announced, "All scientific systems take certain basic philosophical assumptions for granted. In more naïve historical eras, these fundamental assumptions were considered either self-evident or to have been established for all time. The history of science overwhelmingly proves that there are no immutable eternal truths and that all of our systems of treatment rest on

paradigms, as Kuhn called them in his brilliant exposition. Like it or not, one is forced in the practice of psychiatry to make certain philosophical assumptions and to form certain preconceptions. Furthermore, these differ and conflict.

“The choice of a biological paradigm in psychiatry, as is also becoming true in the general field of medicine, is an inauthentic choice. It is an act of bad faith that enables psychiatrists to temporarily avoid facing the problems that are really troubling their patients. It enables the psychiatrist to avoid a confrontation with the psychological, economic, and sociological factors from which arises the etiological power of personal and collective myths and psychic unconscious realities in the formation of a whole variety of disorders.

“By making this inauthentic choice the psychiatrist can share to the maximal degree in the social acceptability, prestige, financial rewards, insurance reimbursements, and numerous other valuables that our current society bestows on the physician, which are very considerable at the present time although much less than they were. In so doing, he or she simply ignores the really basic issues of the sociological, economic, and psychological forces with which patients have to grapple every day. As a result, psychiatry as Alexander described how it should be, a humanizing and revolutionary force counteracting the bellicose materialism, human alienation, and political oppression of our times, is lost, and we have in its place the so-called

pragmatic eclectic with no orientation and no identity, who tries a little of everything. Or we have, at the extreme, the so-called biological psychiatrist who is, as my elderly uncle, a urologist, called him, the 'sound neuropsychiatrist.' This 'sound neuropsychiatrist', who simply practices internal medicine and neurology under another name, is the most welcome of all psychiatrists to the rest of the medical profession and, these days, to the public.

"Eissler in 1975 wrote that an anguished mood of desperation has settled over the whole world. He pointed out that no remedy has obviously been found that could counteract the excess of aggression and narcissism that is the property of our unfortunate species. If anything, the situation is much worse today. Subsequent psychoanalytic thinkers have recognized this tacitly by attempting to replace entirely Freud's philosophical view of humans. For Freud, a person was a creature beset by lustful and aggressive drives, hemmed in by the superego and the demands of reality, and reluctantly attempting to tame the drives and hammer out all the compromises that could preserve as much drive satisfaction as possible. Only after years of childhood struggle does the individual reluctantly shift—as little as possible—from operating on the pleasure principle to operating on the reality principle. This shift is forced on one by the need to survive and by so called civilization, leaving inevitable guilt, existential malaise, and neurosis in its wake.

“Innumerable theoretical revisions and rereadings of Freud have been offered in an attempt to get away from this basically pessimistic view of people, but the dismal course of human history keeps dragging us back to it. Even massive social experiments such as in the so-called Marxist countries have totally failed to eliminate lust, greed, and aggression as barely checked forces governing people’s relationships to each other. As a matter of fact, the so-called Marxist country experiments have demonstrated above all that it was the early Marx, who wrote at length about human alienation in a capitalist society, whose writings really contain the significant psychological and philosophical contributions of Marx, in contrast to the later Marx, who produced the social and economic theories and solutions known as communism,”

It was obvious that people were becoming uncomfortable standing around for such a long time and listening to Henry, especially when he started talking about Marx, so I decided to conclude the discussion as we waited for a cab to the airport. I said, “My general impression is that the higher income that accrues to the practitioner of reductionist biological psychiatry often at least temporarily compensates for any fleeting suspicions of inauthenticity. Here are the final unanswered questions: Should the leaders of American psychiatry embrace the biological paradigm that will make certification easier and reward us with the material things of this world, or should psychiatry press forward as a revolutionary and humanizing force calling attention to

inequities, racism, sexism, and all the ills of which society is capable, at the risk of political opprobrium, and financial loss? Should the leaders of American psychiatry commit our profession to an amelioration of those psychological and sociological factors that enter into the very fabric of society, or should they circumscribe our discipline so that it wears the trappings of internal medicine and thus gains respectability in a culture that values ‘fast, fast, fast relief’, where drugs are used for everything, to the ecstatic joy of the large drug corporations that saturate our advertising media and even our professional journals and meetings with their simplistic sales messages?

Sarah could not refrain from offering a concluding quotation. She hoped that we in psychiatry would remember the lesson from the history of psychiatry as taught by Zilboorg¹⁷:

The whole course of the history of medical psychology is punctuated by the medical man's struggle to rise above the prejudices of all ages in order to identify himself with the psychological realities of his or her patients. Every time humanism has diminished or degenerated into mere philanthropic sentimentality, psychiatry has entered a new ebb. Every time the spirit of humanism has arisen, a new contribution to psychiatry has been made.

I sighed, “As Karl Jaspers said, the doctor is indeed the patient's fate.”

Sarah, Lisa, and I took one taxi and Henry and J. were in the other along

with Marsha and George. On the way to the airport Sarah pointed out that in France the replacement of psychoanalysis by standard behavioristic and biological aspects of medical thought was not as bad as it was in the United States. She argued that in France the new methodology of the 'era of the brain' was not as acceptable. She attacked the work of the philosopher Grünbaum who demands from psychoanalysis that it be assessed like a positivistic science, which misses the whole point for, she explained, "taking experimentation to be the only proof of a subjective truth does not perceive the difference between the natural sciences and the human sciences as well as the great truths that are offered to us by art."

"This does not mean that psychoanalysis is without fault, especially in the so-called 'institutes'", I said, "Roudenesco¹⁸ complained that 'psychoanalysis has withdrawn its interest from the real world and retreated into its fantasies of omnipotence.'" Roudinseco argues, correctly in my opinion, that we now live in a depressive culture characterized by a preponderance of individuals suffering from malaise, a society-wide apathy, and a resistance to confrontation. And this is getting worse and worse, fueled by hopeless and endless wars and economic upheavals.

Sarah pulled out a dog-eared copy of a journal from her carry-on bag. As the cab drove into the airport area, she said, "Eisold¹⁹ wrote an article in that same journal supplement Ali and Claire were quoting from." She proceeded to

read aloud from it, “The collapse of the psychoanalytic polity, the fragmentation of the psychoanalytic world, is both the cause and effect of a profession that has lost its way, that no longer has a clear or viable public role play. The politics of exclusion was a function of the psychoanalytic hegemony over the field of mental health, a reflection of a time when psychoanalysts ruled departments of psychiatry, when psychiatrists flocked to psychoanalytic institutes, when the other mental health disciplines emulated the dominant institutions of the mainstream and psychoanalysis was the unrivaled treatment of choice . . . But what is the profession of psychoanalysis now? A beleaguered guild? An increasingly rarified part of psychotherapy? A Ponzi scheme?”

At the airport a lot of surprises were waiting for me as we lined up at the ticket counter. Sarah and Lisa announced they were taking a different plane. Sarah was going back with Lisa to Berlin in Germany. They had become intellectual friends although certainly not lovers—Lisa would never have permitted that—and Lisa had invited Sarah to spend a week in Germany playing golf, which, for some unfathomable reason, was a passion for both of them. It was a business arrangement also, for Lisa knew all the fine golf courses in Germany and would guide Sarah there in exchange for having her expenses paid. They promised to keep in touch with me. Sarah bid us all a smiling farewell and her last words were from fragment 147 of Sappho:

Someone will remember us
I say
Even in another time

I turned rather sadly to Lisa and asked her as her final assigned task that if anything ever happened to me she would obtain my required dictated report on the trip and see that it got to the proper grant authorities who paid my way. She agreed of course. I felt terrible at losing such a loyal and dependable helper. Sometimes she appeared to me to resemble one of the Karytides from the Erectheion on the Acropolis in Athens. At other times with my more feverish imagination, I wondered if she might be an incarnation of one of the Greek gods, perhaps Athena, who spoke to me in human disguise as the gods spoke to the mortals in Homer's epics. But in the age of science we don't believe in those things any more.

Lisa had listened to all this discussion but said little, as she was not a professional person. But she remarked, as she prepared to head with Sarah away from us toward the concourse for boarding the plane to Berlin, that Nietzsche's title *Ecce Homo—How What Becomes What One Is* comes from the words Pilate spoke of Jesus, Behold, the man" (John 19:15). I listened in surprise as she turned to me and continued, "Nietzsche was trying to present a new and different image of humanity, a modern version. He struggled throughout his life with the importance of man overcoming himself to develop a creative and dynamic personality, a personality that can look at the

absurdity of human life and feel laughter and exaltation in spite of that absurdity. Do not despair, Martin,” she said, “I know what you have just been through. Remember that Nietzsche insisted one must have chaos in one’s self to be able to give birth to a dancing star.” With this surprisingly intelligent effort to be encouraging, Lisa followed Sarah to the plane that would take them to Berlin. I never saw her again.

Marsha and George politely thanked me for leading the trip and made the customary sociable comments. They also were not going back to the United States and had decided to stop over in Paris, which was George’s favorite place in the world. Marsha was not so positive about the French hospitality, but she wanted to please her husband. I think their decision was due to disappointment in the trip to Turkey. They wanted to have something memorable to preserve from this trip, and for George the place to find that was in Paris. As a surprise for Marsha, he had reserved a room in my very favorite hotel in the world, *Hotel Continental Le Grand*, across the street from the Garnier Opera House, and bought tickets to a performance there of one of my favorite operas, Berg’s *Wozzeck*. “How fitting to the end of this tour,” I thought to myself, and I was rather envious.

As we stood before the ticket counter of the airport making all these changes, I looked at J. and Henry, who were the only ones left of our party. I asked myself rather pedantically but choked with feeling, “How do I

encounter the Other, the *alter*, when it is through her alone that my confusions and opacities can be cleared up, and only through her too, that I can consistently pursue our own joint rainbows? She serves as an alibi for my ceaseless repetitions at the same time as she opens up for me an always possible space for a new inner disposition, a new game to help me decipher and interpret in a different way the score of my imaginary music.” But I said nothing.

Then J. and Henry announced they had decided not to fly to Chicago from Milan today. They were going to stay in Italy and tour for a while because they had been so impressed by even the small number of art collections we had visited in Milan. As we parted I could not refrain from whispering to her, “You are my sun, my days are dark without you.” In spite of all my obvious long-windedness, I could think of nothing else to murmur at this parting. J. did not respond and I wondered, perhaps hoped, that she was holding back tears. Henry said a perfunctory goodbye and they wandered off. J. remained silent.

I was amazed at how much Lisa had learned about us in such a short time, that by patient observation and listening she managed to do without being a psychoanalyst. As she walked off with Sarah I heard Lisa explain to her, “J. appreciated what they had in her therapy but did not want it any more, probably because she began to feel Martin was a loser or getting

progressively older and more compromised in his cardiac status. This devastated Martin, who adored her and who had found in her a reason to live and to love after the death of his wife. This is something that J. was not very aware of. J. felt she had to be blunt because Martin was so importunately desirous of her, and also because her husband whom she did not particularly love, and deservedly so, was close at hand. She misjudged just how desirable and lovable she was, perhaps because her husband was always blaming his problems on her, which ultimately damaged her self-esteem. Tough luck for Martin, his world really shrank away when he lost any hope for her. But it was a sick hope to begin with."

So I went on to the plane alone and huddled into my little coach window seat for the body punishing nonstop flight from Milan to Chicago. I did not want to think about what a failure the tour had been. I took a couple milligrams of Ativan and fell asleep. I dreamed about the old supervisor whom I could not hear during my first sessions as a resident. He had a remarkable ability to decipher the language and gestures and the suffering of schizophrenic patients. He seemed to be beckoning to me to talk about Heidegger, and Being, and how to transcend this earthly material existence. On and off in dreaming and in consciousness I realized that my heart was broken, mourning the death of my wife, the failure of my trip, the ruin of my reputation, and above all, now mourning the loss of J., from which I knew I would never recover. With my wife gone, there would never be another J. for

me in this world. The ancient Egyptian wail of Isis for the dead echoed in my ears:

My heart is a wounded gazelle,
torn by the lion claws of my grief—
There is no sweetness in the honeycomb,
No perfume remains in the desert blossom.
My soul is an empty temple,
deserted by the god of love.

As it faded out I dreamt of my mother and my father and of being a young student again, with my life before me. Then the old supervisor appeared again, beckoning to me with a sad look on his face, the look he had when he explained the suffering of schizophrenic patients and interpreted their efforts to communicate about the inferno they were living in. That is all I remember.

When I woke up there were three paramedics hovering over me. Apparently the flight attendants had assumed I was sleeping during the entire trip and it was only when the plane landed in Chicago and they could not arouse me that they realized something was wrong and called the paramedics. During the eight or nine hours on the plane, I apparently had gone into atrial fibrillation, which shifted to a complete heart block. This led to the usual slow steady ventricular pulse that threatened at any moment to transform into ventricular fibrillation, which brings death. Fortunately it did not go that far but the paramedics had to convert my dangerous arrhythmia

with an electronic device and hook me up to various bottles in order to deliver intravenous medications and so on. I was transported to this intensive care unit where it was found necessary to do immediate emergency cardiac surgery. I received five coronary artery bypasses and an artificial aortic valve but after the surgery they could not stabilize my arrhythmia. It kept recurring so they had to readmit me to the intensive care unit for observation and——

[Note by Lisa: *The dictation ends at this point. Martin was found dead in his narrow bed in the intensive care unit and, as requested in his will, since there were no relatives or descendents, his body was donated to the University of Chicago Medical School. A team of four young women medical students in the anatomy laboratory taking their basic anatomy course was assigned to dissect the cadaver, still stinking from its formaldehyde preservative. Inspired by science—or was it Apollo?—they dissected meticulously and with alacrity for, as they say, knowledge gives power. In the course of this dissection, they discovered the weakened wall of the left ventricle had given way to cause massive cardiac tamponade and death.*]

First his mother [Agave] the priestess began the slaughter and fell upon him. He ripped his headband from his hair so that unfortunate Agave might recognize him and not kill him. He said, touching her cheek, “It is I mother, your son born in the house of Echion. Have pity on me mother, do not kill your son for his failures.” But the foam came out of her mouth, her eyes were distorted and whirling about, not thinking about what she needed to think, possessed by Bacchus, she was not persuaded by him. Grabbing his left arm from the elbow down and pushing her foot against the unfortunate man’s side, she tore out his shoulder with the upper arm,

not by her strength but the god made it to be possible for her hands. Ino began working on the other side, tearing flesh, Autone and the entire mob of Bacchae attacked him. The air was filled with cries, he wailing with as much breath as he had left, they screaming aloud god sacrificial shouts. One carried an arm, another a foot still in the boot. Many of the women stripped bare the ribs; all, hands covered with blood, played ball with the scraps of Pentheus²⁰.

... *The Bacchae* (Euripides)

Notes

¹ N.Y.: Viking/Penguin, 2003, p. 157.

² *Psychotherapy versus Behavior Therapy*. Cambridge, MA: Harvard University Press, 1975.

³ Preface to Aichorn's *Wayward Youth*. *Standard Edition* 19: 273-278, 1962.

⁴ *Psychoanalytical Theories: Perspectives from Developmental Psychology*. N.Y.: Brunner-Routledge, 2003, pp.56-7, 114-116, 118, 146, 285, 289.

⁵ The concept of psychic reality and related problems. *Journal of the American Psychoanalytic Association* 33: 521-535, 1985, p. 534, 533.

⁶ Object concept and object choice. *Psychoanalytic Quarterly* 48:109-133, 1980, p. 131.

⁷ *A Secure Base*. N.Y.: Basic Books, 1988, p. 138.

⁸ A plea for a measure of humility. *Journal of the American Psychoanalytic Association* 51/Supplement: 2003, 73-89, p.84.

- ⁹ The Reckless Mind: Intellectuals in Politics. N.Y.: *New York Review of Books*, 2001, p. 211, pp. 214-215.
- ¹⁰ N.Y.: Viking/Penguin, 2003, p. 52.
- ¹¹ Skilton, D. Introduction. In *Dr. Thorne*, by A. Trollope. Oxford University Press, 1952, p. xv
- ¹² Rodman, F. *Winnicott: Life and Work*. Cambridge, MA.: Perseus, 2003, p. 82.
- ¹³ The rise and fall of the autochthonous self: From Italian Renaissance art and Shakespeare to Heidegger, Lacan, and intersubjectivism. *Journal of the American Academy of Psychoanalysis and Dynamic Psychiatry* 38: 625-654, 2010. See my Reply to Critics in press in this journal for 2011.
- ¹⁴ The need for a new medical model. *Science*, 196 (4286), 1977, pp. 129-136.
- ¹⁵ *The Way to Wisdom*, trans. R. Mannheim. New Haven, CT: Yale University Press, 1954, p. 63.
- ¹⁶ Social significance of psychoanalysis and psychotherapy. *Archives of General Psychiatry* 111: 235-244, p. 243.
- ¹⁷ *A History of Medical Psychology*. N.Y.: Norton, 1941, pp. 524-525.
- ¹⁸ *Why Psychoanalysis*. trans. R. Bowlby. N.Y.: Columbia University Press, 2002, pp. 130-131.
- ¹⁹ Toward a psychoanalytic politics. *Journal of the American Psychoanalytic Association* 51/Supplement, pp301-321, 2003, p. 313.
- ²⁰ lines 1114-1136. Translated by Dr. Chessick.