

Two chapters from an experimental unfinished didactic novel

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CHAPTER ONE: 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 Proust, *Remembrance of Things Past*: Vol. 1.
trans. R. Moncrieff.
(New York: Random House, 1932, p. 325)

Thinking is reflecting on something that one knows. It is a movement of thought to and fro, a being moved to and fro by thought, by possibilities, offers, doubts, and new questions.

Hans-Georg Gadamer, *Heidegger's Ways*.
trans. J. Stanley

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 saw one.

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Why did I agree to make this trip for the university? Because I thought of asking for it, of applying for a grant, that's why. 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 an intellectual tour of Turkey. It is no longer publish or perish in academia, but rather publish and obtain grant money, or perish. But 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 rational insight.

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 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*. (New York: Knopf, 1999). 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? (p. 426)

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 these 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. “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, as we psychiatrists would say, autistic, and that on the other enables it to exercise its function of reaching beyond all set bounds.

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 consciousness. 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 pumping into me.

As I recall it now, these were my impressions of our first tour group meeting. Gertrude Evans and Sarah Bollinger were an inseparable middle-aged lesbian pair from Oregon. Gertrude, plump and friendly, was a radical feminist psychoanalyst. Her partner Sarah, short, thin, and bird-like with flashing dark eyes, was a professor of English literature and very much the teacher. Richard Adler and his wife Pearl came from New York. Tall sandy-haired Richard was a prominent member of the New York Psychoanalytic Society and had the air of dogmatic knowing all about him. His blue eyes

cast a penetrating look very much like the subject of Titian's magnificent "Portrait of a Man". Pearl was short and stocky, her hair cut in a masculine way, and so soft spoken that one could hardly hear what she had to say. She also called herself a psychoanalyst but was not a member of the New York Society. Finally, the lovely slender dark-haired young resident Claire arrived, greeting 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, to guard his wife's virtue. It was no secret that men's heads all turned when Claire bounced into the room.

This group was to gather at the airports in Chicago and New York. We were to meet others when we landed in Ankara. I'm a conscientious fellow and I arrived early at Chicago's O'Hare Airport to make sure all our reservations were in order. You may ask, why was I chosen to guide this tour? Again, as a psychoanalyst with no special qualifications, I was just clever enough to apply for the grant. I was lonely and hoped for some interesting conversation. At a deeper level I hoped for J.

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 more 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. I 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, but the only reference to happiness in the entire *Standard Edition of the Collected Works of Sigmund Freud* is in his monograph *Civilization and Its Discontents*. 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 flourishes in solitude (see Chessick R. *Emotional illness and creativity*. Madison, CT: International Universities Press; 1999).

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!

O'Hare was its usual noisy mess; long lines at the ticket counter and television screens 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 review Dante's *Divine Comedy*, all three volumes of it, in what I consider to be the most readable translation, that of

C. H. Sisson (Chicago: Regnery Gateway, 1981). 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 the room of medieval paintings and sat on a bench 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 everyone 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, I resolved to put in a grant application to the university officials and see what would happen.

And now there I was in the O'Hare airport trying 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 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.

After Claire and her husband bounced in and interrupted my reverie, I saw J. and Henry coming toward us down the long metallic O'Hare corridor. J. was a vision in that sterile environment, appearing in a corridor marked only by the gaunt skeleton of a huge dinosaur that some fool had decided to install in the O'Hare national terminal. She was a sylph, narrow and slender, and her eyes sparkled with a spectacular 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 an infinite work of nature, her beautiful body matched her beautiful mind and I was nuts about her, but I had to hide it from everyone. 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 cot 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. "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* (Yale University Press, 1999) out of his pocket, he read in a loud voice to be sure I could 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."

Out of all this, Mesmer constructed his theory of *animal magnetism*, whereby he explained "the periodical changes which we observe in sex, and in a general way those which physicians of all ages and in all countries have observed during illness." According to him, the heavenly bodies, "exert a direct action on all parts that constitute animate bodies, particularly the nervous system, by means of an all-penetrating fluid."

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. After some months of these treatments, Mesmer ultimately effected a stable cure for his patient. 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." (pp. 239-240)

"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. That method is the method of free association in a situation where there is relative neutrality, objectivity, and abstinence. The analyst observes the transference, which is the closest to a natural science phenomena that he has at his disposal. He listens from at least five channels and allows his 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 he is trained to work with, the analyst gains a sense of conviction about the material and is able to interpret it to the patient. He then observes the patient for behavior, dreams, and further associations, in an attempt to validate or invalidate his 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 the 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's article in Volume 54 of *The Psychoanalytic Study of the Child*. I read, in what I hoped was my most professional 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. (p. 110)

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 brown eyes looking directly at me. Again one could see the attention of all the men focus on her. But she simply said respectfully, realizing that she was a resident and I was the 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 countertransfer-

ence 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 this trip, because it is a very controversial issue. My approach has been to use more than one channel, but with emphasis on the Freudian channel as the basic methodology."

Claire looked puzzled and was about to reply when Gertrude and Sarah 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 very happy to meet Sarah because he was beginning to feel like the only individual in the group who was not interested in psychoanalysis. 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 all 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 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 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 had 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 auricular 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 the ecstatic pleasure the infant receives feeding at the maternal breast could not be reproduced in this sexual encounter because of all the conflict it caused, resulting in a mixture of pain and pleasure. 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 passion I felt for her was not reciprocated, although clearly she liked me and would be happy to see me pleased.

I was sitting next to Gertrude and Sarah who noticed my book and I was jolted back from these thoughts to reality because Sarah was laughingly pointing at 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 epitaph that begins Eliot’s famous poem *The Wasteland*. 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 in the current field of psychoanalysis in the United States today!”

“Freud’s drive theory was right,” I insisted. “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 cocaine addiction is so difficult to cure; there are few normal adult satisfactions or gratifications that can equal the high these chemicals can provide.” (see Chessick R. *Psychoanalytic clinical practice*. London: Free Association Books; 2000).

“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 this 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. Richard was dressed in 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 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 but Richard and his group stayed with it. I wondered how many of the neuroses that these analysts treated were made worse by the cold atmosphere of what these analysts 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 an argument with his wife Pearl. 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, 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 (see the next chapter). Pearl thought this opening and closing interaction represented the real relationship and that if it 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 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 they be so foolish to believe that anything could replace Freud's prescient notion of drives. Even Melville (*Moby Dick*. New York: Norton, 1951) in the nineteenth century put these words in the mouth of Captain Ahab:"

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? (pp. 444-445).

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.

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, Sarasota, and San Diego. 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 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 towards

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 psychoanalytic 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 fragmentation on my part in which, on the one hand, there was an unbearable longing for the archaic selfobjects of my childhood, and on the other, a tremendous anger that 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 a short story I wrote that was going to constitute one of my lectures to this group. It was about a psychiatrist named Steven and takes place shortly after his father died. Steven becomes feverish, hypochondriacal, and gets up to work and think earlier and earlier in the morning. Like Ivan Karamazov he hallucinates a meeting, but not with the devil. Instead he meets Sartre's Roquentin and engages him in a debate over Sartre's existential psychoanalysis, the meaning of existence, and existential philosophy. He explores existential preoccupations from a psychodynamic perspective and he examines so-called "existential psychotherapy."

Steven's search becomes more and more intense. He begins to come apart psychologically. Voyeurism begins as an attempt to restore the lost idealized selfobject. He arranges to teach a group of "friends" in order to regain a sense of closeness, but is betrayed by their refusal to cooperate after smiling to his face and promising to support his plans. He experiences the envy among psychiatric colleagues and between psychiatrists, psychologists, and social workers. He narrowly escapes a violent fight the next day when he single-handedly challenges a group of teen-aged musicians who are "jamming" on his next door neighbor's lawn. His repressed grandiose archaic sense of omnipotence begins breaking through his reality testing, as a response to bitter disappointment.

He volunteers to teach for a whole day as part of a panel of speakers at a psychiatric meeting. The day is a failure, and he is told that he cannot lecture for an hour the next

day because that time is reserved only for “distinguished psychiatrists.” He is given only twenty minutes to speak. Here is how my story unfolded:

STEVEN’S LAST MEETING

Very early that morning Steven sat up in the hotel room impatiently waiting for his order of six cups of coffee to counteract the three grains of Nembutal he took the night before. It came promptly but there was not enough. He felt woozy and nauseated. While he drank coffee he 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.” Steven snapped it off irritably. 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 he wrote on the little note pad by the telephone “all grey 7:00 A.M.” He wondered to himself, “Where do all these little boats go at this hour, leaving a big ‘V’ in their wake as they go 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,” he thought. As the sun came up he 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 gone.

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

He went downstairs to the meeting room and, the first speaker, he delivered his presentation to the sleepy group using these lecture notes:

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 (Winnicott).

2. The therapist as a transference object. The crucial event is that in psychoanalysis a transference neurosis, which is so intense it crowds out the other phenomena, gradually develops. At any rate under a psychoanalysis, conditions are presented to facilitate the

development of a transference neurosis. *Sine qua non* for cure by psychoanalysis. In some cases a transference neurosis develops anyway even if the therapy is not meant to be a psychoanalysis, and deeper issues must be dealt with. The unpredictability of depth and 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, and 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. 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. Physical gratification is always, always wrong, and immediately fixes the patient on getting more of the same.

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 hopefully minimal unanalyzed infantile aspects, seems to be especially important? What is this third factor, this "encounter"?

Steven finished, and now 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 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," thought Steven, and he groaned to himself. He felt compassion for the sincere investigators because they were only trying to apply standard experimental design but he realized how difficult it was 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," he reasoned, "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, encouraged 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.

Bored, his thoughts began to wander back to his brief lecture. “The logical positivists and Bertrand Russell and behavioral scientists challenge this whole business of ‘the 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. However, these depressing preoccupations about death and the meaning of life *do* arise for people in extreme situations. Psychotherapists 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 office. . . . Heidegger’s *Sorge*, a poor term, means a state of double tension, the self in flight from itself! Being-toward-death. . . .”

“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 we left early and were 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 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.”

“Thus Sartre poses the question: how to escape what Kierkegaard called the dizziness of freedom without recourse to falsification, bad faith? Later Sartre tried most inconsistently to resolve the problem by seeing the human situation as due to bourgeois capitalism, and embraced Marxism—a philosophy based on complete determinism—as a system where ‘man makes his own history.’ This remains a foggy generalization and also contradicts his early contention that ‘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 which includes many friends and many projects, and Roquentin in *Nausea*, whose existence is meaningless and empty. Thus in his own behavior Sartre contradicts his own philosophy—a striking example of ‘bad faith.’”

“The moment of leisure, as I have defined it, is the moment which can come only to a fully conscious human being, when he is able to draw back from his activities and compare what he is doing with what he 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 σχολή, *scholè*, leisure. Lovely. What will this do to one’s finances?”

“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, 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, in esthetic contemplation, and the permanent, in asceticism. ‘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.”

“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 drives and their representations in repressed archaic fantasies that impel one from behind?”

On the flight home Steven mused again, resuming his line of thought from the afternoon. . . . “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’, the intensity of the therapist’s zeal and the need to change? But what does this do to the therapist over the years? He must avoid exploiting or acting out with patients. Yet at the same time he must participate in an encounter. But how can he really participate unless he brings his 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 him available for. A devilish problem! How can this even be taught or described in print?”

There was not much time for further musing as the week wore on, and Steven began to dig out of the chaos of unfinished work piled up during his absence at the meeting. He began with his first patient very early in the morning. In twenty minutes the telephone began ringing and ringing. Contrary to his custom he found it necessary

to answer the incessant ringing, which was caused by his father's doctor forcing the answering service to continue ringing until Steven finally answered. His father was in a coma. All through the day, beside the long work with patients and a hospital meeting in the evening, he had to keep supporting his mother. By the night, father had not died but the next morning the hospital called to make the usual announcement that father was sinking fast—which translated meant, “your father has died and when you get here we will tell you and try to talk you into permitting an autopsy.”

The following day they buried Steven's father, clamping the lid on the cement vault, sealing him in. Before leaving the funeral home Steven had to identify what the oily funeral director called “the remains” and they opened the casket. There was his father, a corpse with his mouth open a little, and Steven could see where the oxygen tube had gone in, and he was dressed in his conservative business suit just as mother had wished, and that was that. Not long after the casket was lowered in the grave, the family fell on a tray of food at his mother's house like so many vultures, gorging themselves. Steven could not get away from the fantasy that they were eating the remains.

That night Steven thought of the fierce and vigorous battle his father had fought to escape death, all to no avail. He wondered, “What caused his generalized arteriosclerosis? Genetics? Diet? Tension? Dramatics? Anger kept in? Every death is a tragedy of unfulfilled hopes and promises.” Steven was surprised at his own depression. Feelings of sadness, of wanting to cry kept welling up, at times associated with visual pictures of his father in various phases of his life all the way to the end. These sudden affect-laden images just appeared over and over and he could not stop them. He found it odd how the troubles and quarrels are forgotten and how the visual pictures appeared, flashing in and out without any story attached. Just as Freud said, it is a series of mnemonic images that are cathected and must be decathected, apparently painfully. So Proust wrote, “Our memory is like a shop in the window of which is exposed now one, now another photograph of the same person.”

The sense of grief is the pain, but Steven could not understand exactly how it arose. It seemed almost like a side effect. He realized that grief or mourning is quite different than melancholia or depression because there was no self-directed raging anger, and he sensed the similarity in the yearning or hunger, in this case the typical yearning for one last talk or one last good-by. He remembered years ago when his best friend died and he noted the same feeling when his friend's wife said tearfully, “I never had a chance to say good-by.”

The next day when the funeral director pointed out an error in the bill and asked for more money, Steven lost his temper at him, out of all proportion to the offense. That night he found himself reading Schopenhauer again, turning to a carefully marked passage in the *Essays and Aphorisms* (trans. R. Hollingdale. Baltimore, MD: Penguin, 1979):

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.(p. 94)

In the days that followed, Steven went through a fairly typical mourning process and gradually the flashbacks and visual images became less bothersome. As he went over and over in his mind thinking about the meaning of his father in his own psychological economy, he 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 Steven finally aware of the complementary potentially positive aspect of a man's relationship with his father, that in many cases is even more important.

For two years he had struggled in intensive psychotherapy with this 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—and who then found himself subject to a strange disintegration that began about a year or so before he consulted Steven. This man was a talented artist as a youth but his father, 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 and immerse himself in artistic activity. 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.

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 he was 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 giving obedience, in an old fashioned manner, to her dominating husband. He 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 artistic proclivities and he was bored with her incessant talk about the business and the investment world, so they solved this 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.

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, he found his inner tension and preoccupation unbearable and decided to consult a psychiatrist. Steven came to his attention through the report of a neighbor who had consulted him successfully, and so Ken became one of Steven's patients.

It would have been reasonable to begin therapy by prescribing antidepressant medication but Steven decided to wait a short while to see what story would unfold, and he 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 tricyclic antidepressants to work when they are given—the patient appeared much better. Thus medication became unnecessary and Steven decided to proceed with an intensive uncovering treatment.

Two years followed, which were marked by Steven's 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 was not such wishes but the guilty feeling that in his father's eyes he had not amounted to a "hill of beans." Like Steven's visual flashbacks, 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 Steven's best efforts he 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 he carefully listened to this, Steven 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 Steven saw it, an empathic failure in which a father does not recognize his young boy's need for attention.

Only after the death of Steven's father and the swarm of sensations and images that came to his 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 preoedipal mother. Thus 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 thirty-five 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 Steven's 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. The case was misunderstood by Steven because the patient was using the psychotherapy as a repetition of this experience in order to maintain his equilibrium, and it really made no difference what interpretations or exhortations Steven made; they were outside the realm of what the patient could use. Ken was irrevocably fixed at a preverbal level in his development in this area and he had to have a continuous selfobject experience to buttress his shaky psychic apparatus.

Understanding this patient led Ken to a deeper acquaintance with the role of his father in his own life and helped him to appreciate the intensity of his own loss. He saw how his preoccupation with existential questions and Heidegger's *Dasein* as "being-towards-death" reflected his own uncertain sense of a firm organization within his earliest nuclear self-enhancing experiences. Like Ken he was somewhat at a loss as to how to replace such a vital source of nutrient; but unlike Ken he did not need the actual living presence of his father on a day-to-day basis to maintain his equilibrium.

Steven found himself lighting a *Yahrzeit* candle on the first anniversary of his father's

death. He was not religious but an eerie sense of ceremony and reunification crept through his soul as he 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," thought Steven, "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 lies hidden here somewhere."

When we look out over the western sky and watch the play of rosy colored lights as the sun goes down, 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.

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? Steven remembered musing over this question one afternoon while waiting for a particularly frustrating patient, and daydreaming about wanting to do physical examinations again. He 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. He had a strange *déjà vu* feeling walking into a staff meeting at the hospital; as an outpatient psychotherapist he only went to the hospital for meetings and to teach. It stirred up memories of being back in the hospital when he was a medical student and worked for a research laboratory and was part of medical science of the secure traditional experimental type; he felt nostalgia for the old days. . . .

The harsh voice of the pilot, "Flight attendants prepare for landing," broke through my unfinished story. 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.

And if my talk does not ease your hunger, you will see Beatrice, and she will wholly deliver you from this and every other longing. Dante *Purgatorio* Canto XV, lines 76-78 (trans. W. Mervin. New York: Knopf; 2000)

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