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COMMENTS ON THE TREATMENT OF A NARCISSISTIC PATIENT

JOAN CODERCH, BARCELONA

In this work I propose to illustrate some aspects of my way of understanding and conducting the psychoanalytic process and also my way of interpreting resistance and transference. In order to do this I will present clinical material describing my treatment of a patient with a markedly narcissistic personality. At the same time, I will also discuss the relationship observed in this patient between narcissism and the psychotic side of the personality, as understood in the sense described by Bion when he divides the personality into its neurotic and psychotic aspects. I will attempt to show that psychotic functioning is a tactic used by the narcissistic self to deny reality—i.e. the existence of and need for an object and the self's dependency on that object—in order to be able to sustain its omnipotent role.

In the course of my first interviews with the patient, a young bachelor I will refer to as Mr A, he told me that, albeit unwillingly, he had felt different from other children since his early adolescence. He said he felt unhappy and indifferent and did not really want to live. He explained that he also felt very worried by his tendency to turn to pornographic magazines and videos in order to achieve sexual arousal. He also told me he had neither the ability nor the drive to get ahead in the world of work as he would have liked. At that time, he was doing a job that was far beneath his true professional training but did not know how to achieve a more satisfactory level. He also said that he had been smoking a lot of cigarettes every day for years and as a result suffered from throat problems and irritations. He often tormented himself with the idea that he would get cancer as

a result of this habit but despite this he still could not seriously think of giving up.

Mr A displayed anxiety when he spoke to me of his parents. Their relationship, he said, had been cold and distant. This was especially true of his father, whom he criticized for working too hard despite his advanced age. He spoke of his mother as nosey and meddling, even though he said she had always looked after him very well.

For my part, I agreed to Mr A's application for analysis because I thought his request very sincere. I thought this could be his only hope of bringing about the change in his personality, which would free him of the anxieties and difficulties that beset him. Though I thought five sessions a week were indicated, it proved necessary to reduce the number to four because Mr A's job prevented him from attending any more.

From the very beginning, Mr A adopted an extraordinarily whining, depressed and exaggeratedly childish tone during the sessions. He spoke in a monotonous voice without inflections, dully, as though he was describing great suffering. This was the case even when he spoke of apparently unimportant things. At the same time, the language and grammatical constructions he used were extremely educated and elaborate. I also received the impression that he was talking to himself, listening intently to himself and putting forward all sorts of reasons and arguments which seemed mainly aimed at justifying himself. At some times, I had the sensation that Mr A was reading from a very well-prepared script. I received the impression that Mr A was very satisfied with this arrange-

ment and did not appear to expect anything else from me but my attention.

During the first few months, I felt that Mr A was perplexed when I intervened, almost surprised that I had spoken. He then carried on talking as though I had not spoken. In view of this, during the first year of treatment I focused my interpretations on this attitude; particularly his need to feel that I was interested in him yet would not try to add any ideas of my own.

Mr A's attitude began to change when we started the second year of treatment and he became more interested in my interpretations. At the same time, he began a relationship with a girl and this is still continuing.

A few months after starting analysis, a new symptom appeared that the patient had not mentioned at the beginning. This was his habit of telling lies with the aim of disguising certain things about his life. These lies were neither grandiose nor designed to raise his stature as is the case with the pathological lies told by hysterical personalities. The only purpose of these lies appeared to be to distort reality when he saw fit. Mr A said that these lies came to him unexpectedly without his being conscious of it and the things he lied about were of no importance to him.

Because he had not explained it before beginning treatment, Mr A now gradually began to reveal that he mainly used the many pornographic magazines he bought to arouse himself during sexual relations. He did this by looking at them and making his partner look at them. After starting analysis, he made it clear that these activities mainly took place at weekends. Mr A told me very reluctantly, with apparent embarrassment, that in order to make sex more exciting he would suggest to his partner that they both pretend they were involved in a scene of incest between brother and sister, or between father or mother and daughter or son, or that a third person was present to watch them have sex, or that the girl was having sex with another man, etc. On other occasions, he wanted both of them to imagine scenes of sadism. Mr A is now critical of this form of conducting sexual relations and feels less need to use this type of fantasy. He is developing a more communicative and loving relationship with his partner.

I will now transcribe a session that took place at the beginning of the second year of analysis.

Session no. 1 (First day of analysis in the week)

P: When I got up, I did not feel like coming. I could not sleep yesterday. I stayed up until two o'clock smoking, reading and listening to music. I felt like I do every weekend: unhappy and I could not sleep. This morning I was horrified by the number of cigarette stubs in the ashtray. I emptied the ashtray so my mother would not go on about it and would leave me alone... Well, I do not know what to say now. I feel sort of calm and indifferent. (Silence) When I was coming here, I felt as if I was in a hurry to get here but now I do not know what to say. (Silence) I am very worried about my smoking. Sometimes I think about this problem but then I let it go on. I am in a very bad mood.

A: Perhaps you feel anxiety and fear because of the dangers you think are inside yourself. You feel that something inside you is destroying you but you prefer to hide these feelings with indifference and ill-humour so that I will not interfere and will leave you alone without giving you any reason to think and worry.

P: On Saturday evening I went out with L (his girlfriend) and we went to D (his father's office where they go at weekends to have sexual relations). We did the same as we often do. Before going, we bought pornographic magazines to get ourselves excited. I told L that we would pretend that she was having sex with her father... L was unhappy too because her grandmother is very ill again. (Silence) When we left there, I had to visit A (a colleague from work). I do not know if you will be very interested in what I can offer you... last time I saw you, you said that things were not going very well... everything is a failure.

A: [I felt that at that moment the most important thing was for Mr A to realize that his efforts to run away from his pain and unhappiness meant that he was unable to get rid of these feelings.]

To escape from your pain and the ashes inside you, you imagine that we two have exciting relationships at the weekend, but you realize that this leads to failure and the unhappiness goes on.

P: I know that you do not get excited about me and I know how crazy these sexual fantasies are, but I feel as if I need them. I also feel as if I need to explain them... perhaps to make you

listen to me and take more notice of me. (Silence) The thing is that without these fantasies, sexual relations seem empty...unexciting...it would just be ordinary, I don't know, like everybody else, just to have children. A few days ago, I thought that you must know a lot about what is happening to me... I do not know how to say it, but I really do not like it, it hurts me, I do not know why; it is natural, but it gives me a bad feeling that I cannot cope with... even though other times I want you to explain things to me... I think it is enough for you to listen to me; I do not want to know anything else.

A: [Here I thought that although this material contained many meanings and many things to interpret, the most important thing was to get to the bottom of Mr A's desire to keep me immobile and paralysed, fully at his service, almost as if I were merely a robot.]

You do not want me to think about you or speak. You just allow me to think and say what you want me to think and say.

P: I came by car yesterday. When I came out of the car park beside this building, I had the idea that if you went past at that moment I could run you over and perhaps break your leg. I did not think it seriously...it was like a joke that made me laugh.

A: If I broke my leg, I could not walk freely; neither think nor walk. I would just be sitting here waiting for you and listening to you.

P: (Silence) It is true that I like to think that you are here, sitting down. I think that it gives me pleasure to know where you are and what you are doing. That means that even when you are doing it with other people, you are doing it more for me if I know that you are here. Holidays and weekends are different, though, because I do not know where you are. When I think that you must be doing things that I do not know about, or are with your family, I get more annoyed. Now I remember a dream I had a few days ago: *my uncle O (his mother's brother) was ill. I do not know how I knew, but I knew he had had a stroke—one of those strokes that leave half your body virtually paralysed, or completely paralysed. In the dream I knew this and I was talking to an acquaintance of mine, a history teacher. Someone told me, or somehow I knew, that my mother was looking after this uncle. It might have been my brother who told me. I thought that I should go to visit him and help my mother, but I*

carried on talking to my friend. I do not know what we spoke about, but I think he explained something about history to me and his theories. In real life he is someone who always has very strange theories. In the dream I felt anxious about not going to visit my uncle and help my mother. But I kept on talking and did not go. I woke up with that anxiety. The friend in the dream is someone who always talks about strange things and has got some very individual and original ideas about history. My uncle O is a person who has always had the habit of criticizing me and finding fault with everything I do. He is older than my mother. I would like to be like him because he has travelled a lot and I have not been able to so far.

A: [I thought that, despite the abundance of material he had given me, the best thing at that time was to carry on examining the central dominant fantasy in the patient's relationship with myself: to keep me entirely at his disposal without any independence or will of my own and therefore prevent me from interpreting and adding my own ideas or differing from him. I think that a patient's attempts to take away the analyst's independence and freedom, including his power of interpretation, must always take preference over any other interpretation. If I had added other explanations, I would have distracted the patient's attention from this crucial point.]

You are making me have a stroke to keep me immobile, as if I had broken my leg. A stroke so I cannot think or speak, or be different from you or move away from you.

P: (Silence) Yes, I often feel angry if you appear very different from me... but it hurts me to think of making you have a stroke like you said.

Comments on session no. 1

I would like to take a look at some of the features of this session that strike me in particular.

His shield of indifference is mainly intended to stop him realizing that he needs my explanations and also to convince me that he does not need to come along to the sessions. In this way, if I do not interpret he will feel no difference between the two of us. This is also the reason why he disposes of the remains of the cigarettes he

smokes, so that I cannot see the poisonous, dirty side of his mind. If I cannot perceive anything or perform my function, therefore, I will not be different from him either. He is attacking my brain, I will not be able to think or carry out my specific function; the thing that sets me apart from him. I think that the fact he 'did not know what to say' at the beginning of the session after his hurry to get there was a reflection of his fantasy that silence is not only a way of stopping me from interpreting and thus setting myself apart from him but also a way of preventing the appearance of envy. Being there with me without talking is another way of feeling as if we are one, without any difference between us. I believe that, like some other patients with strongly narcissistic personalities, one important feature of Mr A's psychological make-up is the fact that he needs to draw a careful distinction between the anxiety of separation and the anxiety of differentiation (Folch, 1988; Torras de Beà, 1989).

We can see from Mr A's words that, like all patients with perverse sexual behaviour patterns, his form of sexual behaviour is not freely chosen but compulsive. This compulsion is directed mainly at coping with the anxiety of separation and differentiation, and also to appease his envy. Here Mr A is re-inventing the primal scene (McDougall, 1972) and thus repudiating the truth of the sexual relationship between his parents. What is on the face of it a game to achieve an extra degree of arousal is in fact a desperate effort to overcome the reality, deny it and transform it. This is the reason Mr A says that sexuality is nothing unless it is carried out in this way. He can only enjoy his sexuality if he uses his perverse enactment to appease his anxieties about separation and differentiation which are concealed, in turn, behind his fear of castration. I say this because, in my opinion, true castration is loss of the object, i.e. separation.

The anxieties about separation and differentiation that Mr A tries to appease by re-inventing the primal scene also prompt the associations that continue later during the course of the session. Running me over with his car would serve the purpose of preventing me from walking or moving away from him. In this way I would always be immobile in my armchair, like something that belonged to him, of no worth on my

own account, without autonomy, without any more life than he wishes me to have and, therefore, without separation, differentiation or the ability to cause envy.

The dream he went on to describe fully confirmed this supposition. I was paralysed by a stroke and could not think. This means that then, like him, I was no more than a child that must be looked after by his mother. The differentiation between self and object has been made to disappear due to the lies that Mr A, identifying himself with the history teacher, invents in such an 'original' manner. The stroke obviously does not represent merely an attack against my thought but is also an attack against knowledge of reality. The reality Mr A attempts to ignore and repudiate is the differentiation between self and object. This repudiation is emphasized by the sexual scenes he imagines and leads to the destruction of the sensation of his parents' sexuality, leaving them bare and stripped of all meaning as he reaches out for a false understanding that stifles truth—to Bion's minus-K effect (1957, 1962).

I will now give a transcription of a session that took place at the end of the third year of analysis. This was the last day of analysis in the week.

Session no. 2

P: My mother and L say that I always end up getting my own way one way or another. (Long silence) Yesterday, when I was leaving the session, I was already in the hall of the building when I saw a woman whom I have passed in the hall or on the stairs on other occasions. I think she must be one of your patients. I was surprised because I thought I was your last patient of the day yesterday. That made me think that you can hardly move out of here, out of your office, and that gave me the feeling that I would really like to keep you under control, and I think I manage it. Yesterday you must have finished late and today, first thing in the morning (the patient's time), I am back here again. (Silence) Well, I do not know how I can relate the fact that you are here with the thing about imposing my authority that you were talking about before. I have the same relationship with H (a colleague at work) as well. H and Z (Z is another colleague; H and

Z maintain an open homosexual relationship) organize things in their own way. That really annoys me and I always try to prevent them.

A: Imposing your authority means always keeping me here at your disposal. I think that you want me to have a special relationship with you, like being the last patient I see. You think it odd that I can do something without you predicting it and controlling it.

P: I think that I do what you say with my sexual fantasies as well. (It was a day when there was a power cut and neither the front door bell nor the automatic opening device were working. I had left the door half open before Mr A arrived so that he could come in.) It seemed odd to find the door open...it was as if the whole floor was open so that anyone could walk in. On my way here, I was thinking about work and the analysis, but in a very strange way about the analysis; full of irritation and jealousy. Yesterday, I thought I would like to know who that woman is whom I saw in the hall of the building... and now I was thinking that jealousy must be very typical of patients in psychoanalysis. I shut the door when I came in, because I thought that anyone could come in and attack us.

A: I think the attack that is scaring you comes from inside yourself. The attack consists of spying on me, bringing me sexual fantasies that you think excite me and make me think of you in that way—and bringing me things that I like, like being a jealous patient so I cannot think other things. When you think that you have got inside me, you are scared that others will attack you to take your place.

P: (Long silence) I realize that often I have to stay quiet for a while after you have explained something to me before I can speak again. (Silence) My parents went off yesterday and will be away for five or six days (they often travel for business reasons). Yesterday night, when they had gone, I went into their room and took a 500 pesetas coin that my mother had in her bedside drawer... You know that I often do things like that. (Silence) I have not paid my mother the money I owe her for last month yet (the money he pays every month to contribute to his keep) ...I started to think again about that time they did not accept. [This was a complicated story. In essence, his parents did not accept an invitation

to do something for his birthday because they had already planned to do something else on that date.]

A: [When we reached this point, I thought that Mr A might have taken my earlier interpretation as an accusation. He might have thought that I was condemning his desires and for this reason he felt badly treated and rejected by me. Because of this, I thought the most important thing was to show him that I took responsibility for his feelings and understood them.]

I think that when I spoke, you felt injured, abandoned. When I explained something about yourself, you felt as if we were moving apart, a division. This was the reason you took the coin, something of mine, perhaps the sound of my words, so as not to feel so far away. You think you have to keep something that belongs to me so you do not feel rejected.

P: Yesterday, when I was on the metro I amused myself by imagining that I was talking to H and Z and they were telling me about their erotic affairs and feelings so that I could help them. They were incredible affairs. I imagined that I told them that what was happening to them was that they did not understand the unconscious reasons that drove each of them to have a relationship with the other. I really do think that this is what is happening. Sometimes I think I should tell them, and it would do them good. But of course you cannot say certain things because they would be sure not to understand and take it badly. Well, I do not really have a great desire to talk to them about things like this...although I cannot deny that if I had this fantasy it must have been because I would get something out of interfering in this matter and saying what I think. I think I would know how to explain these things quite well.

A: Now you have responded to your intolerance of feeling different from me that you spoke about before by turning yourself into an analyst so that other people have to tell you their difficulties.

P: This weekend I am going to dinner with L to celebrate because last month I earned much more than I expected (Mr A's professional status rose considerably during the course of analysis). I know what will happen after that. I will want us to get aroused by looking at pornographic

magazines or imagining a certain sexual situation... I often think of calling a prostitute again, like I told you I did once... but I do not really want to do it, it is just a thought, things are not the same any more, and I would feel really ashamed. We are bound to imagine that someone is watching us and getting aroused, or something like that, or that L and I are brother and sister.

A: Now you want it to be me who watches and gets excited so that you are reassured that the child inside you will get the amazing sex he needs to escape the sadness of the weekend. When I am far away, as your parents are, you feel lonely and rejected.

Comments on session no. 2

This session also reveals the patient's efforts to deny the differentiation and separation of the object. At certain moments, the object seems to be an extension of the patient, without any more life than he is willing to allow it. In other moments during the session, the object is seen to be dominated and controlled through projective identification or through fantasies of maintaining an exciting, erotic relationship with it that underline this lack of differentiation. On other occasions, the roles are reversed, as when he imagines he is an analyst in a desperate attempt to respond to the reality the analyst shows him, i.e. the difference between self and object, between child and parents, between childish sexuality and adult sexuality. I think it is very obvious that Mr A experiences my interpretation as a moving-away and separation on my part. This becomes evident when, for example, he responds to my words by remembering that his parents have gone off and left him on his own. In that case he has no alternative but to steal something from his parents, the 500 ptas coin. This is the only way he can find to appease the anxiety caused by the differentiation and separation.

On the other hand, his narcissistic personality will not allow him to accept that the object—the analyst—leads an independent existence, or gives him the attention he demands. To avoid this, he tries to stop the analyst doing his job and thus tries to form an ideal couple with him by acting

as a jealous patient. He also thinks that he has to attack the analyst, arouse him with his sexual fantasies, spy on him through the patient he thought he saw in the building entrance, steal the good things he keeps inside himself etc. In any case, I think the most important thing for Mr A during this period of his analysis was the conviction, imposed by his omnipotent, narcissistic self, that he should have something better than his analyst, that infantile sexuality between children is the really desirable and marvellous thing, and that, alongside this, the role represented by the analyst—the procreational, mother/father figure—has no value. His fantasy of sexual relations between brother and sister is another way of expressing his aggression against his parents' sexuality and, sometimes, a vindication of the fact that children have a secret coveted by parents, infantile sexuality glorified as a secret treasure. On the other hand, though, this fantasy expresses the attack on the babies inside the analyst, which must be dominated and seduced through sexual arousal.

I will now transcribe a session that took place half way through the week at the beginning of the fifth year of treatment. I believe that this shows certain changes in the narcissistic negation of reality and therefore the function of the psychotic side of the personality.

Session no. 3

P: (Long silence) I hurried here because I really wanted to get to the session... but I do not know what is happening to me. It is strange. When I got here and you let me in, I was just happy that you accepted me. I got the impression that you were very well disposed toward me. But when I lay down here on the couch, I realized I had already lost all desire to say anything... I cannot think of anything now, and I do not know what to say. It seems as though once I have arrived and am here, that is enough. I could stay here half asleep without saying anything. The only thing that is clear is that I am here... although this seems a little strange with all my problems.

A: You want to come and obtain something. But when you arrive here and meet me, willing to spend time with you, you think it is enough

for you to turn up and let me concern myself with your problems. You expect me to think for you and because of this do not think that you have to tell me anything or speak to me. [The countertransferential impression I received was that Mr A, as on other occasions, was shirking his responsibilities and denying all desire to investigate and find out about himself. I therefore thought that we had to clear up this situation before offering other interpretations because the patient would not accept these unless some change came about in his attitude first.]

P: (Laughing quietly) Yes, I think you are right. (Silence) At home this morning, my father and sister had a bit of an argument over the bathroom. Then my mother began to complain as usual and got on to other subjects. She complained about how little we give to them considering the effort they have always made for us. She said they work so hard but we do not appreciate them. It is true that my father works a lot and should not work so hard. They, my mother and father, say that now they are working for their old age. What have they been doing until now? Why didn't they do it before? I realize that my father works too hard considering his age, but it is hard to have to listen to the same thing all the time.

A: You want me to be concerned with you, but without having to recognize it, as if I were only an instrument at your service. When I explain what you are doing, you think I am being very hard on you.

P: I suppose you must be right. Last night, I had a dream. I do not know where I was. *I just remember that I was very unsettled because I knew that my mother was in the room next door and was having sexual relations with a lover. In the end, I went into the room and found her having sexual relations with a man. I got really mad and told him to go and insulted him. I do not know who I was shouting at; my mother or the man.* I cannot remember anything else. I woke up very upset... I had never had a dream like that. I had never been concerned about my parents' sexuality. More likely I thought they were asexual. (Silence) I just had the impression that you were moving. I realize that I am often waiting to see what you will do and I feel unsettled if you move a little, as if something was going to happen to me... Sometimes I wonder if you have children,

how many you have and how you treat them. I do not imagine you have children very often though, I think you are more likely not to have them.

A: [At that moment, I thought that Mr A had understood my first interpretation and was showing signs of some changes in his initial attitude. Now I would be able to go more deeply into the emotion that lay underneath.]

You feel upset that I can move, that I am not entirely a slave to you without the power of independent movement. You feel anger and pain because I have got the ability to bring up, create and have children. To block out and get rid of this anger and pain you say that what I do is have unfaithful, degrading relationships. You insult me in the dream, because you cannot bear me having the ability to procreate, to have children.

P: Yes, it is true, I did not want you to do it with anyone. Now I am thinking about having children. Sometimes I think it is odd when people have children. I do not know why, it is natural, everyone has them... but it seems odd to me, as if it is something extraordinary and the normal thing is not to have them... I do not know if I will have any one day... I do not know if I would be capable of that... I am afraid not... this makes me sad... perhaps I will never be able to have any... I am not like you.

A: You turn the relationship between your parents into something that makes you angry and make them bad in your imagination. You insist that I have to be controlled by you in your imagination, without being able to think or move, without being able to procreate. You make everything sterile and so make it odd for people to have children, your parents and me. This will never help you to acquire the ability to have a good relationship and have children, and that is what is making you sad.

P: Before I started going out with L, I used to go to prostitutes. At that time, nobody used to talk about AIDS. Now I often think about this and feel frightened that I may have caught AIDS and do not realize it... You never know because it is a disease that takes many years to appear. I have never talked about this to L... this fear I mean... it must be one of my lies... my lies that do me so much harm but that I cannot give up.

Comments on session no. 3

We are able to see a whole set of different, successive currents in this session. Mr A's haste to arrive shows his recognition of the object and his dependency on it. For this reason, we can say that he has somewhat rejected the self-narcissistic force that denies the reality of the object's existence and that makes him become the object. Despite this, the narcissistic self struggles furiously to maintain its position. For this reason, when he arrives at the session, Mr A yet again denies the separate existence of the object and the need it has for him. He tries to change the analyst into an enslaved object that must tirelessly concern itself with him and his demands. When he meets the analyst, he imagines that he takes control of him, that he makes him his, and for this reason he does not feel any desire to receive anything, or desire to communicate so that things will be explained to him.

He denies in a psychotic manner the difference and distance between himself and the analyst. The two are one, and he expects the analyst to know what he wants, or what he means, without it being necessary for him to ask anything. He can fall asleep in the analyst's arms, sure in the knowledge that he does not have to give him anything and he will maintain his omnipotent control. This is the reason why his desire and haste to arrive become disinclination and indifference as soon as his perception of the analyst's willingness to listen appears to confirm his conviction of omnipotence and control over the subject. Because, in spite of everything, he is not able completely to deny the reality of the object, he also uses his maniacal defence of contempt to achieve absolute dominion over the object, which keeps popping up in his mind despite his narcissistic self. The object must therefore carry on working, aged and scorned, always at his service, without being allowed to express itself as an independent, desired object.

The dream he recounts reveals his efforts to keep a false version of the primal scene intact. He experiences the procreative sexuality of his parents as an attack against the made-up, de-

lirious primal scene. He attacks the adult sexuality of his parents because he feels it to be a threat to his narcissistic negation of reality. For this reason, he tries to make it disappear by changing it into degraded, worthless sexuality. He attacks his mother ferociously in his pain at the narcissistic wound that his parents' sexuality represents for him. If he has made up this dream, it is because he feels that his psychotic negation of reality is wavering now that the thoughts and creative function of the analyst have made him realize that it is not he, the infantile narcissistic self, who possesses the good sexuality, the creative ability and nurturing function that he would like. When he sees that his parents and the analyst really do possess these sought-after qualities, he goes furiously into the attack in order to cancel out the truth that is opening up before his eyes. And this is the reason why he invents a false version of the primal scene, a primal scene without love or beauty. The natural consequences of this fact are his persecution complex, fear that he cannot have children and the idea that he is harbouring AIDS. Mr A is, however, showing signs of progress when he realizes that the true AIDS is his lie, i.e. the negation of reality in favour of his narcissism. This is the lie-infection that will not let him grow up, be capable of having loving, fully satisfying sexual relationships, having children and fulfilling the role of a father.

A doubt naturally arises as to whether the conclusion reached in the previous paragraph is true, or if it is a strategic adaptation, an intellectual understanding reached during the time that Mr A has been coming to analysis. I believe that the anxiety and unhappiness that accompanied this session suggest a true insight. It could be said that Mr A may be making a certain effort to adapt to what he considers are the rules and practices of an analyst. The intense, varied emotional currents observed in this session were too vivid for me to assume that the patient's associations merely reflected a desire to adapt, or that he was perversely trying to please the analyst in order to dull his perception so that he could carry on entrenched in his omnipotent, delirious narcissism.

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