

Bodily feelings in a dreaming world¹ Clinical thoughts on psychosis

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Introduction

Dreaming is a complex way of thinking; it is a particular experience in *oneiric* space and time, governed by what Freud referred to as the “primary process”. It therefore involves a very primitive experience in the unconscious. When Freud’s book on dreams was published in 1900, it coincided with the mourning process he had endured with in the recent death of his father. Like many others, he was unable to process certain aspects of this consciously, so he “closed his eyes” to reality and had a dream... This was a normal kind of denial that operates with respect to any truly painful experience.

Psychotic patients process their feelings of loss and mourning in a pathological manner. The psychotic ego is too fragile and sensitive; faced with a traumatic experience, psychotics tend to fall to pieces and to escape reality by running away into a world of dreams. It is as though they bring together the bits and pieces of their catastrophic reaction in order to construct a new vision of the world that has a closer relationship with an oneiric kind of “logical” thinking. In dream interpretation, the interpreter attempts to discover the hidden meaning and logic behind the dream.

Freud discovered through his book on dreams – which in my view is Freud’s major contribution to the field of psychoanalysis – that the psychotic experience is similar to dreaming (though they are not, of course, identical).

In my book *The Delusional Person* [1], I argue that, with psychotic individuals, there is a tendency to substitute the terrible emptiness of a painful loss, projected into daily reality, with a dream-like panorama that consumes the space in inner and outer time-life.

Bion used to say² that at times the psychotic patient found it impossible to differentiate between sleeping and wakeful states. Sometimes I have the same feeling with my own psychotic patients; however, most of the time I have the impression that they are living in a dream-world and that they find it impossible to wake up.

That is why, generally speaking, analysts believe that psychotic patients cannot

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² In my personal supervision with him, as well as in many of his writings.

dream – but to my mind they are in fact dreaming all the time, though in a very particular way. However, just as with normal people, if they cannot wake up, they can never know they have been dreaming.....

As we know, Freud established a close connection between dreaming and mental illness [2]; other authors, including Garcia Badaracco [3], also make a connection between dreaming and psychosis. Garcia Badaracco is concerned with the relationship between dream-thoughts and psychotic regression, arguing that this may lead to a sort of fusion / confusion between inner and outer reality. He goes on to say that in delusional thinking – closely connected to oneiric thinking – the patient is trying not only to construct a new conception of the world or a new „true-ness” for him/herself, but also to impose it on the world in general. Like Freud, Garcia Badaracco believes in an intimate relationship between dreams and psychosis, and argues that in almost any phenomena we can find both neurotic and psychotic aspects. For my part, I have attempted (in my book *The Theatre of the Dream*) to establish a semiological differentiation between psychotic and neurotic dreams [4].

Dreams and psychosis

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I would now like to explore the interpretation of dreams and their relationship to psychosis within the context of clinical analytical work, with particular emphasis on the semantics of the dreaming climate in the transference situation and its impact on the analyst’s own unconscious. Sometimes the analyst feels caught up in the dream-cloud that aims to make the entire world fall asleep – and therefore to forget the painful and persecutory experiences of life. Freud uses the expression dream-life to indicate that in his view there was a particular atmosphere surrounding the life of the psychotic patient.

In his seminal book, Freud argued that hallucinating is a physiologically normal phenomenon that takes place in dreams. He mentions Wundt, for whom dream-images were a kind of illusion arising from faint sense-impressions which never cease during sleep [2]. Freud showed how day residues participate in the dream material.

It is generally accepted that in the psychoses the boundaries between inner and outer are partly lost. Therefore, day residues, night residues and hallucinations are mixed together. The effect is that hallucinations seem to be entering into the outer world. To put it another way, a sort of oneiric ideology of life takes possession of normal reality.

Many psychotics, who would not accept the idea that they are hallucinating, would nonetheless agree with us if we said to them that we have impression that they are asleep most of the time, even though their eyes may be open.

I would like now to illustrate and develop some clinical and theoretical suggestions with the help of material drawn from the analysis of a patient I shall call “Samuel”.

Charlemagne’s horseman

“Madness is made of dreams,” Samuel said to me one day.

Samuel began his analysis with me in 1997. He was 25 years old when I first met him, a good-looking young man, but detached, aloof and very tense. In my consulting room, he remained silent. He stood in front of me and looked all around, as though he were living inside a dream and trying to envelop me in his dream-mantle; indeed, I felt as though I too were being drawn inside a dream-world, in which hallucinating would be a normal way of life. He moved his lips as though talking to someone else. In fact Samuel was hallucinating all of the time, apparently addressing some ghostly beings or other all around him. When I said to him that I had the feeling we were not alone, he said nothing at first, then, after a few moments, he declared: “There are soldiers all around us, Charlemagne’s soldiers”. Then he spoke about a “dead horseman”. Given that his manner of speaking was not very lively, I said to him that perhaps he was saying something about himself – something about not being very lively / alive. Still in a monotonous voice, he said: “the soldier died in a battle”. I understood Samuel to mean some time during what for him were the Middle Ages.

I learned from his parents, whom I first saw alone, since Samuel did not want to come out of his “shelter” (as he used to call his house), that his illness began more or less when he started his university studies in political science. At that time, he found it difficult to concentrate and study; ever since his childhood, he had been a very gentle and passive young man, but introverted. While he was a student in another town far from his parents, one of his close friends became very worried because Samuel would neither answer the phone nor open the door to anyone. His parents went to visit him on one occasion and he failed to answer their call. Consequently, they began to think that he might be dead, committed suicide, or had possibly even run away. His father asked the emergency services to break down the door – but they required the proper authority to do so. Samuel’s parents insisted, when suddenly the door opened, and in a very cold manner Samuel said “hello”, then promptly disappeared. Other friends later said that they had seen him in Rome, dressed in rags and living like a “drop-out”, sleeping here and there. Several months afterwards, he decided to phone home because he had run out of money. He was then seen by several psychiatrists, who prescribed medication and psychotherapy, but Samuel hardly responded to these initial attempts at treatment.

Over time he became more and more out of touch, and his parents came to consult me in Paris (this was a few years after the initial events). I informed Samuel’s parents that I would see him, and that they should let him know that I had the impression he felt safe and protected at home; perhaps he would feel better “jumping on a plane” (i.e. inside a containing object) to come to Paris rather than just walking out of the door... with the danger of feeling lost when he found himself out in the open. Later, I was to understand that, at that time, in his delusional world, Samuel, among his many identificatory figures, was at times living inside one of his ancestors (a famous pilot of World War I, who had been killed in the last days of the war by the notorious “Red Baron”, the German fighter ace). When Samuel “became” this heroic figure, it was of course very dangerous for him to get on a plane - because the Red Baron might well kill him too. He therefore decided to come to Paris by train from the Italian town where

he was living. The container in this case had wheels rather than wings...

He was able to leave home and to travel to Paris because he felt protected not only by his parents but also by his hallucinated / created soldiers (and, later, priests) who were like a cloak around him. Garcia Badaracco [5] argues that the psychotic, in his multiple pathological identifications, cannot be a “person”, he can only be a “character” in some drama or other. I would add that the psychotic can change the “character” he is playing by getting in and then out of his body armour, depending on the circumstances at that point in his life.

One day, I realized that Samuel’s hallucinations were not three-dimensional but two-dimensional and flat. For several months he appeared to be asleep, speaking only to his hallucinated environment; from time to time he would waken up from his dream-mantle and see me in front of him³.

Samuel appreciated my emotional interest in him. He came to one session carrying a poster of Ché Guevara – he knew that I am of Argentinean origin. When he showed it to me, he looked at me in a powerful way, as if trying to paralyze me and change me into a flat poster. When I told him of this thought I had, he said that he felt he had the power to change me into a “flat” person and that he did not want to lose this capacity. On another occasion, he said: “I had a dream, I was a magician, a kind of card-reading fortune-teller”. I understood him to mean that he was beginning to wake up. I interpreted that the magician seemed to be related to his capacity to change a three-dimensional world into a two-dimensional one. Later, it became obvious that we were all like playing cards that he could control – the flat soldiers surrounding him, Ché Guevara and myself; Samuel was holding all the trumps.

He admired Charlemagne, King Arthur and Ché Guevara – but he was also in a silent state of war or competition with these idealized figures. When he changed them into cards or posters, he felt he could control all the important people he admired and, at the same time, feared.

He told me about what he called “an old dream”, which gave me the impression that he was re-enacting a catastrophic psychotic experience from the past. In this “old dream”, a train was running at a thousand kilometres an hour, and at one point became involved in an accident – some cars were destroyed, others crushed flat. After the crash, the passengers came out of the mangled train, changed into flattened people, like mechanical, dead shadows or something out of a comic strip. This catastrophic “memory”, in which people and the surrounding world became flat, reminded me of the book *Flatland* by Edwin Abbott [6]. In it, the author describes a two-dimensional world inhabited by lines, triangles, squares, circles, polygons – all in a flat, geometrical kind of existence. Triangles represent the working classes, squares and pentagons are professional people and the nobles are represented by polygons that tend towards infinity, whereupon they become circles and represent the clerics. Women are straight-line

³ A patient of mine, mentioned in my book *Delusional Person* [1], suffered from schizophrenia. I treated her during the time I spent in London. On leaving one session, after some six months of analysis, she said it was the first time that I remained behind in the consulting room-space. Up till that point, she had believed that she could take me away with her, because I became part of her dream-world whenever she left my consulting room.

segments – very powerful and persecutory. In my view, Samuel's world was very like the one Abbott describes, with its geometrical "comic-strip" characters. Sometimes Samuel felt it impossible to bring these characters back to life – he himself was very depressed and cold, in a melancholic kind of flattened state of mind in which there was an almost complete absence of feelings. In fact, as I pointed out, he used to speak of himself as a flat, dead soldier who died many years ago – in what he called the Middle Ages, during a battle between Charlemagne and his enemies.

At that time, Samuel was unable to find a link between the catastrophic accident of the train and the catastrophic experience of "his" Middle Ages. He sometimes had other versions of his illness – such as that of being on the "Titanic" when it struck the iceberg. Both Samuel and his family considered him to be a cold and frozen person. Some years previously, he had had quite a "crash" in his life, when his uncle, a very rich man, promised to make Samuel a partner in his company – at which point he would have had "titanic" power. When the uncle then refused to give him such an important role, something broke in Samuel's mind and in his heart. He became split into two antagonistic forces – or, to put it another way, into two warring factions. The experience of being dead (like Charlemagne's soldier) – a death-like way of living – made him feel very inferior and depressed. This was a kind of cold depression – sadness without feelings – a pathetic image of himself. In order to avoid pain, he tried to freeze all feeling [7]. He was also frightened by the very idea of coming back to life, to have an "existing" body with live feelings.

One day he said to me: "If you cannot save me, you should practise euthanasia, do away with me, make me die completely". This dilemma between coming back to life and being entirely dead became an ontological "impasse"; for the moment Samuel was unable to find a middle way between extremely contradictory ideologies (a delusion is also a system of ideas) relating to life and death. How could he find a meeting-point, how were we to find a space between us to deal with the metaphysical problem of someone who felt himself to be part of the living dead?

After several months of analysis, he became more awake and more alive. He would feel hungry after his sessions and always wanted to eat a hamburger in a local fast-food restaurant... I interpreted that coming back to life was hard and very difficult to digest; a hamburger was much easier by comparison.

One day, he told me he had eaten a crêpe (a kind of flat pancake) instead of a hamburger and that he had felt ill; he associated to crepare – which in Italian means "to die". It was as though he had chosen a kind of "self-euthanasia" in order to solve the problem of feeling unable to experience life once more. He was ambivalent – or di-valent as Pichon-Rivière put it – about "biting" into life as if it were a hamburger or dying and being helped to die (the formal meaning of euthanasia), thereby doing away with all painful feelings. Melanie Klein spoke of access to the depressive position, in which splitting and opposing outlooks may come together in some way or another.

One day Samuel hallucinated that he was required to have sex in a public bath with several people, men and women, but that nobody was there – he then realized that it was a hallucination. This eroticization of death-ness characterizes what Herbert Rosenfeld used to call a delusional state in which feelings and thoughts become eroticized as a

way of bringing back to life in a mechanically exciting way the patient's own dead body and feelings. I find in my experience as an analyst, who works with psychotic patients, that the fetishist approach, in which there is an attempt to bring a dead object back to life, plays a very important role in the pathological eroticization of the mind and of the body. In eroticized fetishism, it is as though a corpse could be brought back to life through masturbation or sexual arousal: a necrophilic fantasy.

In one session the patient told me about putting his penis into the crater of Mt Vesuvius. I interpreted that in becoming more and more alive he was getting in touch with hitherto-constrained feelings and sensations, including sexual ones, and that this was like exciting the volcano inside himself in a provocative way; it was perhaps both frightening and exciting to think that the people destroyed at Pompeii might come back to life... Thereupon, Samuel remembered that, having been an only child until he was 5 years of age, he had felt terribly distressed when his mother gave birth – or, in one sense more accurately, gave life – to his little brother. He recalled a dream that dated from that period: flat and transparent, he was walking down a flight of stairs made of stone. At the bottom of the stairs lay a revolver, and he knew he wanted to kill somebody – maybe even kill himself. It would be true to say that Samuel was very sad and distressed at that period in his childhood. With a kind of nostalgic bitterness, he recalled the toys he used to play with. One was a set of little bagpipes. In the analysis, these bagpipes – cornamusa or piva⁴, in Italian – were transformed into a kind of hallucination / criticism of his mother who, as he said, “had been absolutely everything” to him. In other words, Samuel experienced her as a musa / “Muse” who was nonetheless making a cuckold of him (cornu / horned – the hornlike emblem of a cuckold) by becoming pregnant with his little brother.

Later in the analysis, Samuel said that the panoramic/landscape around him had begun to change. He felt less “flat”, but other people seemed to be turning into Matrioshka dolls, one inside the other. This made him think of the fact that he was paralyzing his own feelings (Matrioshka dolls cannot move); crying, for example, was an emotion he found alienating. Some months before he began treatment, his brother had died in a car accident; the car had skidded off the road and had crashed down into a ravine (the brother died in the accident – and was crushed / flattened under the falling car). In the session, Samuel said he wanted to light a candle for his little brother; his eyes reddened, and I thought he was about to cry. He told me that though the Matrioshkas were sad, their tears were frozen (“Russia is a cold country,” he added, “but I feel you to be a warm person”). My response was that Samuel was struggling between emptiness of feelings and coming back to life – he was therefore experiencing pleasure other than in a mechanically sexual way, which meant also that the ordinary unhappiness of life was coming into his “landscape” too. He was trying to exist again as a real, authentic person, not just as a „character” in some drama or other.

In one session, he made a drawing of the Arc-de-Triomphe in Paris. (This is where the Tomb of the Unknown Soldier lies). He told me that he was struggling to know who was going to win – was it life, or was it death? The old / unknown soldier wanted – and

⁴ Piva from latin. *pipa (m), da pipire ‘pigolare’, onomat.

at the same time did not want – to come back to life; so who was going to triumph? In my words, I would put it thus: the life instinct or the death instinct? Eros or Thanatos? They were like two armies in his mind, each with its rallying flag – the one calling for life, the other for death. Whenever I would ask Samuel a question, his answer (in Italian) would unfailingly be: “Forse si, forse no!” („Maybe yes, maybe no”). I was able to interpret this as a struggle between two “forces / forse” inside himself. But perhaps they were now coming together somewhere inside his mental space? Was there to be an amnesty, an “understanding”, a reconciliation between two split-off ideologies? The question was: how was Samuel to be himself again as one person? How to get back inside his own skin? Indeed, the idea came to me that he was not even inside his own trousers – I had the impression that he was not “there”, not “in” his trousers, but completely absent. This feeling led me to ask him what he had in mind. He replied: “I’m thinking of the TV ad for Levi’s jeans” – which do indeed look as though they are empty, empty of life.

In the following session, Samuel told me of a dream in which, as a writer of comedy, he was making people laugh. I felt that he was becoming a kind of Harlequin character serving two masters at the same time, as in Carlo Goldoni’s comedy of that name – my associations were again to the “forse si” and “forse no” aspects he had told me of. I began to think that one of these was the master of magic and delusion, while the other was the master of the reality principle. I suggested that Samuel was thus changing from being a magician / card-flattening fortune-teller to a writer and then to a playful impish figure like Harlequin. With a smile on his face, he replied that he liked “underground” music; I suggested that the underground of his mind was a secret life that was beginning to come alive and to play: “I would like to be free and to visit the whole of France”, he said. This made me think that Samuel was trying to escape from his prisons – I use the plural because I had the impression that in his schizophrenic world-view he felt scattered over several places and times. In order to return to being himself, he needed to liberate his imprisoned fragments that were dispersed over various landscapes.

The idea of foreclosure is perhaps a useful concept here. According to Lacan, in the schizophrenic experience one of the origins of psychotic phenomena is what he called the primary repudiation of a fundamental signifier, that of the father figure or “name-of-the-father” (or, symbolically, the phallus). For Lacan, this repudiation (*Verwerfung* for Freud) takes place outside the individual’s universe of symbols. According to Laplanche and Pontalis [8] the signifier that is foreclosed is not integrated into the Unconscious; it does not come back “from inside”, but appears to be situated “outside”, in the “real” world – and so is a hallucinatory phenomenon. In his seminal paper on the subject Lacan [9] showed himself to be rather pessimistic as to the psychotic’s ability to... climb back inside his own trousers, if I may put it so. My own experience, however, is quite different. As I see it, the phallic position keeps ego parts and the object world together. The analyst has to become an archaeologist trying to discover, with the patient’s help, in what part of the landscape of the inner and outer worlds the exploding ego or father-function buried the fragments – for it is only then that they will know where they have to be exhumed. The question / quest then becomes: what

“reality” or “character” or historical period were they hidden or masked?

In my work with Samuel, I associated to an inner army (“forse si, forse no” – positive and negative) hidden projectively (Werwefung) somewhere in the woods, as in Shakespeare’s *Macbeth* – with its concomitant change to “reality”. I then had to ask myself how a hallucinated fragment could become a tree-army and change its nature...

Thanks to his efforts to come back from dispersion and dissemination in a hidden, camouflaged world, Samuel gradually managed to return to his own body; less of a “character”, he became more of a “person”. He was slowly waking up from his dream-world. One day, he arrived early for his session. He was waiting for me at the street door, smoking a cigarette, all the time looking at his surroundings as though their novelty were somewhat of a surprise to him. Once inside my consulting room, I told him that this was the impression I had had on meeting him. He acknowledged this, and added that he felt he was waking up as though from a long sleep. He said also that recently he had begun to smoke heavily. I interpreted that his struggle was between the two philosophies of life that he was holding in his mind. He could either to wake up and come back to life in a non-catastrophic, non-volcanic way – or he could puff clouds of smoke that resembled the dream-clouds in which we both had felt enveloped at the beginning of the analysis; he had all the same to recognize that these were becoming more and more evanescent.

The struggle between awakening to life or becoming excitedly euphoric was expressed in the sessions via his giving me a new “explanation” of his madness – which was no more nor less than a new delusional hypothesis. I was struck by this “war” between the two phenomena – was Samuel to wake up or to go on producing smoke-like dreams? He was producing what appeared to be a never-ending “smoke-screen”, a series of inconsistent delusions in which he himself did not believe. This existential struggle was dramatic, for he had to come to grips with both the sense of sanity and the sense of madness.

Now that he was aware of the danger, Samuel was terrified that he might remain a prisoner of his own dreams / delusions forever. Yet at the same time, the idea of coming back to life and finding himself a prisoner of his fiery emotions was also extremely disturbing...

For me, sanity implies that the projectively-identified fragmented parts of the self, scattered over the multitude of waking or dreaming landscapes that constitute our minds, be at last brought home. In my view, this is the only way that we can become ourselves again. We therefore need a genuine introjection that goes beyond the inner and outer struggles of our minds, in order to help us tolerate the different and contradictory narcissistic models of thinking and translate them into inner and outer dialogue.

I know that in itself this is not enough. In our work with our patients, it is not simply a question of “understanding” in some abstract sense of the word – we have to *comprehend* how their thinking began *to decompose* [10], in order to help them *recompose it*.... In one unforgettable session, Samuel said to me: “You know, in times gone by, my hallucinations really were thoughts”. Through time, these thoughts had turned into hallucinations and smoke-screens; when, thanks to the analysis, they began to reintegrate his mental space [11] and his inner experienced time (*temps vecu*, in

Bergson). The work of the transference, undertaken in the field work jointly by patient and analyst, had to deal with an earlier breakdown in experiential time and space. As Freud noted [12], our task was to restore or to reconstruct, through the analysis of the transference, a world that, like Pompeii, had been buried for so long under layers of petrified, frozen lava, a world that we were about to exhume and bring back to life (this metaphor was personally suggested to me also by Mrs Tustin, some time ago, concerning autistic children).

Conclusion

My intention here is to give a clinical living picture of my approach to psychosis. I hope that my contribution will be useful to the Panel on psychosis.

I am grateful to Melanie Klein, to Herbert Rosenfeld, to Wilfred Bion, Winnicott, and to Enrique Pichon-Rivière who taught me so much, and to my wife Anna (who often discusses my papers with me) for helping me formulate some of these complex hypotheses concerning sanity and madness.

If the therapeutic process works properly, the dream-world can change from a pathological and delusional world of near-death into a stimulating and creative one.

I am convinced that healing the psychotic experience makes us more aware of the creative processes that we see at work in talented artists. In motivated and gifted people, psychoanalysis is also an art, a work of artistic craftsmanship.

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