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## LETTERS TO THE EDITOR

Dear Larry:

Thank you for the Spring 1984 issue of the Bulletin. This letter was precipitated by three passages in it. The first was an excerpt from a paper by J. Masson, in which he says,

...the search for traumas...refined  
as these might become in later theory  
...was a necessary corollary of  
Freud's fundamental discoveries.

The second was in the report of the Madrid Congress, in which it was mentioned that the analyst "seek to find himself as the cause" of transference-countertransference impasses. The third was Rangell's remark that "Ultimately we may have to decide between two different concepts of transference: intrapsychic vs. interactional."

It seems to me that there is a sense in which Masson was right. Freud never really abandoned the trauma theory; but he did modify it in a fundamental way -- not as Masson suggests, by including more and more refined traumas in his theories -- but by recognizing that trauma was only one pole in what he called an "etiologic series." This alteration was so important that, as Anna Freud said, without it there would have been no psychoanalysis -- a point Masson seems not to have understood at all. At one pole of this series we may imagine a trauma so massive and overwhelming that it would damage any psyche, no matter how well constituted. At the other end, a psyche so eggshell-like that no encounter with the outside world, no matter how gentle, could fail to damage it. In between fall the cases actually encountered in reality, which extend in a line from somewhere near one pole to somewhere near the other.

The suggestion that the analyst seek to find himself as the cause of transference-countertransference deadlocks implies that the cause of an interaction between two people can be found in one of them. While it makes sense to speak of "the cause" of events occurring, say, between two balls on a billiard table, it goes beyond that kind of sense to speak of single cause when the billiard balls are both alive. Again, the etiologic series -- both analyst and patient make contributions which somehow find each other congruent, and neither can be said to be the cause of the block.

Finally, Rangell's dichotomy of intrapsychic vs. interactional concepts of transference suggests that we must decide whether a transference has a realistic basis in the character and demeanor of the analyst, or conversely whether it is a product of the patient's unconscious fantasy. Why not both? That is, after all, the approach Freud used when he allowed that the day residue (the impact of external reality) plays a role in forming a dream. How much of each component, external reality and unconscious fantasy, is to be found in the final product is a matter to be established by analysis of each instance. Again, this is a matter of location along the line of the etiologic series. It has been argued rather convincingly and in detail (by Racker and others) that transference fits in with the reality of the analyst in precisely the manner of latent dream content and day residue.

Freud underwent a mighty struggle, documented in the Fleiss letters, to reach beyond the point-cause trauma theory, and it remains a struggle not to fall back into it, with its spurious nature-nurture (or external-internal) dichotomy. The unconscious, as Melanie Klein never tired of pointing out, is a product of both internal and external factors, along the lines of Freud's etiologic series.

Robert Caper, M.D.  
Los Angeles Psychoanalytic  
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# EDITOR'S NOTEBOOK

## FOR PROFESSIONAL SERVICES

### ABSTRACT:

Despite Freud's (1913) advice to "cast off false shame on the subject of money," the role of the fee and its effect on the psychoanalytic process is a topic often avoided by both patient and analyst. As a result, it often happens that during analysis, in Eissler's words (1976), "the whole complex problem of money is only rarely treated in a satisfactory and sufficient way." The author suggests that issues around fees and their multiple meanings might best be explored if the fee is not fixed by the analyst, but decided by the patient with the analyst helping to clarify conflictual issues that arise around the decision-making process.

"The Psychoanalytic Fee:  
Its Significance in  
Treatment" by  
Daniel Jacobs, M.D., Boston

This paper permits a refreshing interlude during a time of wars of cosmic metapsychological issues. Indeed the subject of psychoanalytic fees may at first glance appear hardly the material for deep study filled with significance. In his presentation Dr. Jacobs proposes to examine two aspects of the fee: setting it and modifying it. He urges a negotiated open-ended fee arrangement to circumvent difficulties which may arise later. The acting out in his experience is minimal and the benefits of asking the patient to take the responsibility for both setting and paying are invaluable.

Rules for payment of analysis have been constantly evolving from the very beginning. In an era when professional courtesy for physicians, their families and servants was an ethical given, it was Freud who first insisted, in a paper seventy years ago, that physicians pay for their analyses. Freud's argument was simple: an analyst treating three physicians would be giving up a third of his income for

months. He insisted also that the fee must hurt to help the patient in his analysis, that a low fee means low esteem and that patients must be solely responsible for the cost of analysis. He never addressed the matter of changing the fee.

Interestingly enough, however, Freud's protracted free analysis of the Wolf Man is the paradigm of the special interest research patient. Freud even went so far as to collect money from friends for him.

Later Freud and Rank made an attempt to standardize fees but Jones led the revolt against this and prevailed. As Jones put it, his wealthy patients made it possible for him to see deserving people for low fees (Rodman 1984). By any standards, fees for psychoanalysis in the 20s, 30s and 40s were minimal.

Earlier generations of psychoanalysts confessed that when they came to America they could not charge appropriate fees. Simmel said that he had a hard time adjusting to changing times in this respect (Rodman). As a rule younger analysts (frequently) charge more than their own analysts. Fenichel charged Greenson eight dollars; Greenson paid four dollars and owed the rest. Later Fenichel forgave the debt. When he died and Martin Grotjahn inherited a patient, Grotjahn found himself charging for one hour what Fenichel had charged for five. The patient was horrified; the reasonable fee stood (Grotjahn 1984).

A good point raised by Dr. Jacobs is the poor preparation of clinical associates in regard to the whole matter of fees. In our institute the fee is set by the clinic social worker, collected by the student, endorsed and sent to the Clinic. The student donates his obligatory time to the clinic and receives free supervision in return. It is as if no fees are involved as far as the student and the supervisor are concerned. The result: usually no discussion of fees.

I kept wishing Dr. Jacobs had addressed some "what-if?" premises. For example, what if a patient is referred at a quoted and appropriate fee? A low fee? A high fee? What if the patient feels quite anxious and greets the fee discussion as a further major burden?

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\*A modified version of this discussion was presented at the American Psychoanalytic Association meeting, San Diego, May 1984.

What if the patient feels the discussion is a form of seduction, coercion, persuasion or criticism? What if a patient in the course of his trial analysis tells of an insurance policy which pays for fifty percent of the fee? What if the patient is wealthy and all bills, of any amount, are paid directly by a business manager?

I have a few other points: Doesn't a patient respect an analyst who feels his time and skill are of value? Doesn't Dr. Jacobs' method represent a countertransference attitude designed to avoid a patient's aggression by appeasement? Does Dr. Jacobs advocate a modification in technique? Hardly, since there is no formal prescription on how to deal with the problem of the fee. Make no mistake, fees can be a sticky problem.

What is new in Dr. Jacobs' paper is his proposal to discuss the fee as part of the early analysis and not set it in the first sessions. One can proceed as he suggests, inviting the patient to participate in an exploratory phase, but I wonder if by this measure there is a real danger of over-emphasizing money and giving it undeserved importance. Resistances would surely be attracted to giving the fee a position of such centrality.

I feel a reasonable fee legitimizes the analysis, whereas if it is too high or too low, the relationship between the analyst and analysand is skewed into one of disadvantage or exploitation. While the fee is reality or rather an artifact of reality, what the exchange of money stimulates is full of unreality. For example, presenting a bill to a patient at the end of the month invariably sets off dreams, fantasies or memories in what is almost an analytic cliché. Dreams or fantasies of being robbed or confronted by a powerful figure, a bandit, a cruel policeman are ubiquitous. So complex are our reactions to the fee that if the reactions were analyzed, from the beginning through the twists and turns, an interesting possibility comes to mind. Namely it parallels the legend of the first dream which if analyzed fully would constitute the entire analysis.

There is no way for the analyst to divest himself entirely of his authoritarian trappings. It is he who articulates the ground rules, he who controls the day, the hour, the length of the session, he who decides on holidays, vacations and absences for meetings. The patient has no such autonomy. As Glover (1955) said, "There is no point in pretending that arrangements about fees are not for the benefit and convenience of the analyst."

S.L.P.

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## An Interview with Muriel Gardiner

Dr. Anita G. Schmukler\*

In April 1983 I had the unexpected pleasure of acquiring a copy of Code Name Mary, which I read in one evening -- totally absorbed by the courage and fortitude of the author. I decided to write a review of the volume at once. Following a few telephone calls, I received an invitation to prepare a review for the Review of Psychoanalytic Books. I then telephone Dr. Gardiner and arranged to meet with her, both to discuss issues raised in the book and to talk further with the person whose memoirs had left such a profound impression on me. (Previously I had met Dr. Gardiner at psychoanalytic meetings but on this occasion we spoke for several hours.)

At eighty-one, Dr. Gardiner displayed unusual vigor. Conversation flowed easily. I was aware of her intensely focused attention, warmth, striking intuition and sensitivity. It was a delight to share Dr. Gardiner's excitement and interest in children. She spoke of one of her "best interviews," by a group of elementary school children who meet with persons of outstanding achievement and question them directly. Dr. Gardiner was pleased to see the development of such an opportunity for children.

The 'senior members' are about eleven years old and are not allowed to ask questions, but act as 'counsellors,'

Dr. Gardiner told me, with her eyes twinkling.

Dr. Gardiner spoke of how much she enjoyed school consultation in Pennsylvania, and of her special enthusiasm for consultation with delinquents. This led to her publication of The Deadly Innocents, the engrossing story of some aspects of her work with juvenile offenders. The lucid prose of this volume demonstrates Dr. Gardiner's deep and continuing interest in each child presented -- not as a case, but as a person.

Dr. Gardiner spoke of the Wolf Man and her contact with him for many years. Again it was clear that her deep interest was in Mr. P., other than a "case."

With respect to activities described in Code Name Mary, it was my impression that in spite of intense clandestine activity, I observed almost no evidence of Dr. Gardiner's impulsively taking risks. I questioned her about this and she replied that her missions were well planned, and indeed her risks were quite calculated. She conveyed to me a deep sense of purpose, -- singlemindedness. Her response to conflict regarding external events appeared to be: evaluate fully, determine direction, and pursue the goal. The goal did not seem to include a "happily ever after," or passivity cloaked in "neutrality" but simply loyalty and work -- action to produce salutary change.

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## A Review of "Lovesick"

Con: Richard Johnson, M.D.

In my opinion the movie "Lovesick" not only lacks depth but does the psychoanalytic image a serious disservice. In contrast, in my review of "Ordinary People" for the SCPS Newsletter, I praised the writer and actors for a legitimate portrayal of real people in emotional difficulty. In that movie the psychiatric intervention, albeit somewhat simplified, was realistic and sympathetic.

An individual contemplating the seeking of psychiatric or psychoanalytic help would be reassured or encouraged to trust his inner problems to another individual after seeing "Ordinary People." I would expect the opposite effect from the film "Lovesick."

Psychotherapy and psychoanalysis have always been under attack. Some of the basis for the attacks include misunderstandings and threat of concepts that are new and strange. In general it goes against the grain of most primary religious identifications. For all but a few individuals daring to seek individual psychoanalytic help, an enormous social negativism must be faced. The family, one's friends, business associates, insurance companies, scientists, sociologists, clergy, family doctors, etc. rarely enthusiastically support psychotherapeutic efforts. Even when there is reluctant acceptance, they usually urge magical, gimmicky, short-term programs rather than serious psychoanalysis. My concern is not for my present patients who like myself would see this picture as ridiculous and unfunny. My concern is for the general public who are regularly fed false and misleading information about psychoanalysis.

For many years I have been deeply impressed with the impact of audiovisual materials particularly movies on the value systems and opinions of the viewer. As psychoanalysts we know that comedy and humor by-pass conscious, logical screening devices. We should be aware of the power and significance of this type of presentation. Experts in advertising, politics, public relations and the media spend millions on this very issue.

Public image for the doctor, lawyer or Indian Chief is essential for part of the role fulfillment. In a successful psychoanalysis the transference is eventually analyzed and becomes less significant. However in the early phases, society and the individual seeking help must bestow on the analyst certain trust including

magical powers. These irrational elements offer the patient support and security in facing the more scary part of invading one's unconscious. Public ridicule of the role weakens the potential for an early meaningful transference.

I don't recall many of the specifics when I saw "Lovesick." It is not a movie I would recall because of its accurate representation of characters or reality situations. It had a cartoon effect similar to that expected from a hostile cartoonist who has an incompletely analyzed negative transference. Dudley Moore played the role of an analyst whose behavior was infantile and unethical but also very unlikely in reality. At his supposed level of training he would have already experienced a long series of seductive, provocative young women. This behavior by an analyst on first contact with an attractive, desirable woman as represented on the screen would be bizarre and possibly reflect some weakening of ego controls or even in his reality testing. In the movie not one but two analysts succumbed to the wiles of this not too impressive character disorder -- now really! Actually an analyst this adolescent and incompetent would be a hazard to his patients and should not be in practice.

This type issue is not taken as tongue-in-cheek by a naive public. There are unfortunately examples of analysts who do act out in this fashion. To treat this as superficial or routine is not accurate. I personally have not known of a graduate analyst who didn't take his patients or his role seriously.

The implied banality, primitive narcissism, and utter disregard not only for his regular patients but also for this hysterical character, doesn't do service to our long years of training. Our training as physicians, our personal analysis, and our years of case presentations have been directed toward some form of mastery of our unconscious impulses in clinical situations. The public could take this movie to indicate that there is really no significant difference between a friendly "Dutch Uncle" and a trained psychiatrist. Actually a mature Dutch Uncle would be preferable to the analysts in the movie. This idea is supported by many people critical of psychoanalysis.

The treatment of the Institute Committee could be an amusing spoof as an in-house joke. There is rigidity, artificiality and pettiness in any established order. However, again I feel that this public smearing, as tempting as it is to tweek authority figures, hits a destructive note to an already flagging credibility of the psychoanalytic movement. This kind of communication is not benign. The friends of psychoanalysis are not directly effected, the enemies will gleefully agree and be pleased but more importantly the large relatively uninformed, general public will have again been subtly indoctrinated to reject psychoanalysis as a science or legitimate clinical technique.

## Pro: Martin Grotjahn, M.D.

Dudley Moore plays a psychiatrist in a movie entitled "Lovesick" and he does that with charm, wit, intelligence, modesty and great natural humanity. I was amazed, enchanted, entertained; I felt liberated and once more justified in my dreams of therapeutic freedom. The psychoanalytic consultant to this movie -- who remains strictly anonymous -- deserves highest praise.

Naturally, the official psychoanalytic establishment must perhaps protest and repeat what should be known to everybody that any sex action with a patient in treatment is never justified, always a crime, unethical and must not be permitted. I took the sexual activities in the movie as a countertransference fantasy -- and that solved the ethical problem for me.

Dudley got a new patient referred from a friend and colleague who had died the previous night. She arrived twenty-four hours later at Dudley's office, who fell in love at first sight, got up from his chair and kissed her. She certainly looked inviting for every analyst's fantasy: young, attractive, natural, warm, vibrant with youthful femininity, ready for love and smiling. There stands Freud himself (played beautifully by Guinness), and is most skeptical about such behavior -- but makes at the same time a remark which Dudley must take as approval. Freud says, "Well, she does not seem to mind. Look at her dilated pupils."

Then a romance develops, played, photographed, directed to perfection. It is a great aesthetic delight with New York as most seductive background. Free, open -- the city of progress and freedom. The future opens the doors to an utopian land of freedom with the Big Apple smiling from the guilt-free Tree of Knowledge.

The complications are predictable: Dudley is called and must appear before the committee on ethical standards. It is a dinner meeting with Freud presiding. He is Dudley's former indulgent analyst, the only one who seems to understand Dudley and seems to defend him.

The typecasting of the committee members is side-splittingly funny and so are their questions. Only Freud is tolerant, defending, understanding (as he was in an early case of such analytic misconduct by a former analysand in training with him).

Dudley eats with good appetite and obviously cannot take the situation very seriously. He wishes to leave and makes his exit unforgettable. Totally inappropriately, he performs a "magic trick" to everybody's embarrassment and Freud's hilarious delight. Finally he trails off into a fairyland of dreams and beauty in Central Park.

He says to Freud: I feel free! I feel independent! I feel well! Guinness-Freud smiles and says: This is the end of your analysis: You are a good, dependable man. That is the way I went through life. I had a few good, original insights -- I never wanted to be the founder of a commercial enterprise.

There were several Freuds at different times, most of them heroic, dogmatic, some even gullible; also revolutionary, and Victorian, but mostly good and wise. Guinness-Freud was one of them, historically correct.

I am all for training and my record speaks for me. I am also of the firm conviction that the good therapist has to be free from dogma (but free within the framework of a few basic ethical rules), independent in his thinking, but thinking Freudian; honest in his search for the answer -- and if he has Dudley Moore's sense of humor and wit, more power to him!

This is a good and great movie. On the Franklin Scale from 1 to 10 I would vote for a 12.

## “Should You Pet Your Thalamus Today?”

Sumner Shapiro, M.D.

Clearly enough do we seem to be moving toward that day when a man will slip a helmet on his noggin and watch emanate therefrom a miraculously recorded pulsatile message. One that electronically pinpoints what his cephalon is up to -- where, how, and maybe even why! Already, I believe, acronymologists endearingly have labeled "PET" a scanner that beams out and prints upon a sheet of X-ray film a Pointillism that demonstrates the dull and lifeless glow of Alzheimer's, the sparks of occiputs in vision, and the rubor of the temporals with sounds. On the research drawing board must be exciting series of experiments that monitor the pons of engineers, the genu of the supplicant, the gyrus fornicatus and cuneus of chronic dyspareunics, and, I hope, the structures sub-adjacent to the thalamus in vulcanisms of a PMS.

"Not yet a household word, PMS?"

One thought the PR men had sold it further and more wide. Reference is to those witchifiers that explode Her Placid Highness on the Kalends every month. Transmogrify and turn her termigant (arising from the 'splenium,' perhaps?). Her plates should look like Van Gogh oils...Only time will tell, however, even with the mapping out of anatomic sites and neural pathways, color tesslations, amplitudes and beats, still do I anticipate a gap. Unbridgeable and deep. It evermore will yawn between pure binary encodings and humane, empathic grasps. Always will remain a need for rational and flavorful appreciation of those subtle shades of shades...emotional nuance...for quintessential hues. And such will justify the ineluctability of current therapeutic modes. Old-fangled talking cures...

Exempli gratia: from memory, a tantalizing affective experience that would challenge PET scan's skills.

As a much younger man I took employment in a small, chronic disease hospital. Its Chief, recently emigrated from Switzerland, was terribly enthusiastic about and commensurately eager to experiment with the then new miracle drug, ACTH. Being an art connoisseur besides physician, he was painfully aware of and saddened by the crippling arthritis that was prematurely closing out the career of a contemporary painter-genius -- in consequence of which did he contrive to have said gentleman imported and admitted to the hospital. The terms: participation in a metabolic study project that involved that wonder drug. The artist came. Submitted to the shots. Collected this and that compulsively in carton, flask, syringe. Excrescences from every body orifice and otherwheres besides -- and bit by bit his

fibrous ties unaxed. His joints banked low their flames. His fingers plied again. And he could paint! And did! And handed out in happiness to nurses, aides and staff small tokens of his joy. Very precious gifts whose monetary value mattered very little to the chap. Until the work was done. And, blessings from the Chief, the artist took his leave. Much later I arrived. To sort the data out. To analyze the stats. To correlate the facts -- although the man had died.

My first assignment was to fetch from attic storage space a dozen specimens from which were needed aliquots -- surely not too difficult but, having scaled the heights, on opening the door and switching on the light -- behold! The thousand eyes of Argus, countless maumets, the scintered, ground-glass stoppered bottles, tier-on-tier around the room's perimeter, and row-on-row across the oak plank floor. Each was filled with amber colored liquid that had been preserved beneath a layering of toluene -- a spectacle unusual quite irrespective of its serving as a shrine. And not un-pretty either, the reduplicating bulbs reflected from the flasks -- despite the harsh reality that hero, genius, sage, whatever he had been, the monument, his sepulchre was little more than piss! Old piss!

A situation somewhat similar to asking what emotion would be appropriate to coming on a turd that cast the great Da Vinci's splenic flexure in a monolithic lump. Or a dessicated shard of Aristotle's sigmoid colon in a frozen S-shaped curve. I mean, how ought one properly react? To dung! From emperor to slave! Such paradoxical oxymoron presses hard upon the brain. Quite pounds the pulvinar!

There I stood alone. Silent and as awed as "brave Cortez and all his men...upon the peak at Darien." I was torn. These last mementoes, inane puppets, trying to speak for a hero, cold and dead. I mean, were they a lock of hair, a cuff-link, button, ring -- not these, a body reject. Last will and testament indeed. Mere renal ruins. In fine, his stale and void. So how thalamically respected? With a "pfech!" or with a "wow!" or something half of each? Worship micturition and secrete away a vital or clip clothes pins to my nose. I simply didn't know. My helmet wasn't on. In fact, we had no helmets then.

A minute passed before I compromised. Against a later date should wisdom supervene. I got a camera and flash and photographed the scene. To keep alive some trace of it once nothing more remained. A picture that I might reflect on in some sager frame of mind... or, possibly as an exhibit to propound an argument. With men who run computers or with radiologists...or any mechanistic creature who abjures the human touch, reminding each about the adage that applies to scanning CATs.



## Law and Psychoanalysis Anti-trust Ratiocinations

Irwin Lyons, M.D.

There was widespread public sentiment in favor of it when the Sherman Anti-Trust Act was enacted into law by Congress in 1898. Nowadays it can be warrantably argued that the anti-trust laws are outmoded, and should be substantially changed to meet modern conditions.

In the short span of the approximately fifty years since the Civil War, the country has markedly changed from a rural, agricultural, and small village, decentralized economy to an industrialized nation. With this change came many sharp business practices as corporations vied with each other for power and wealth through extremely aggressive competition for control of markets.

For example, the National Cash Register Company bribed telephone operators to listen in on the conversations of their competitors and report back on their plans to NCR, and it also sent its agents into stores using cash registers made by NCR's competitors to tamper with the workings of the competitors' products. It also manufactured and sold intentionally defective replicas of competitors' products.

Indeed, some people say that it is questionable whether such corporate giants as Standard Oil would exist today had not its founders been able to resort to the unfettered and taurine business practices that were so commonplace around the turn of the century.

The Sherman Act was a reaction to the situation which had badly victimized consumers. Particularly, Westerners were upset with the treatment they had been receiving at the hands of Eastern businessmen. Various legal commentators have observed that the wording of the Sherman Act is phrased in a way reminiscent of constitutional language itself, in keeping with the fact that it was intended to make pro-competitive government regulation of business a fundamental social policy in this country.

For breaches of the proscriptions of anti-trust laws, damage awards in the amount of three times the actual injury, cease and desist orders (i.e. injunctions), and even criminal prosecution and jail terms are available as remedies, although the latter is rarely resorted to.

Section I of the Sherman Act condemns and prohibits "conspiracies" and "combinations" to restrain or destroy competition, but neither the Act itself nor the case law developed under the Act define these terms. We do know that there has to be proof of acting together, but it is allowed to draw inferences of concerted action from courses of conduct. It is perfectly legal under anti-trust law to imply conspiracy, and sometimes (as was the case some years back with GM's power to terminate the franchise to operate an auto dealership if the dealer discounted the price of cars) the power to do an anti-competitive act may be enough.

So a conspiracy may be found from things that are done, no matter what explanations are given as to their purposes by those who do them.

Thus, an "agreement" (which is necessary under the Sherman Act) may be expressed or implied, and circumstantial evidence can be used.

However although parallel business activity is one source upon which to found an inference of unlawful activity, parallel business activity, as yet, does not constitute an automatic (i.e. "per se") violation of the anti-trust laws.

Again the term "conscious parallelism" does not appear in the Act, and has not been officially defined by the Supreme Court. Some of the elements of it are

- (1) common competitors,
- (2) similar actions,
- (3) knowledge of the similarity of actions,
- (4) reliance on this knowledge.

In other words tacit agreements can lead to the implication of a conspiracy.

Conversely, conspiracy will not be implied if the motives of the several accused persons are different or if their interests are substantially divergent.

Parallel conduct weighs heavily in the scales of anti-trust justice but it is neither dispositive nor conclusive in a case. It just gives rise to a rebuttable presumption of conspiracy but the presumption can be overcome by other evidence against it.

For example, uniformity of published prices is not evidence of collusion among competitors where the services offered are the same.

Accordingly, the defense against charges of engaging in parallel conduct is to be able to show that the conduct was done as the product of an independent business decision.

But there is a danger that in situations where there is oligopoly, then application of Section 2 of the Sherman Act will result in parallel conduct's being given more weight and force because, the reasoning goes, in an oligopoly, each individual competitor can be much more aware and informed as to the activities of his other competitors than would be possible in the situation where they are many competitors. This issue has not been legally tested yet.

Therefore, setting fees on the basis of good, sound business judgement is not an anti-trust violation even if the fees happen to be similar to the prices charged by others, but an accused defendant must be able to come up with a cogent explanation as to why he acted the way he did.

For example, economic conditions to which everyone in a given business is subject represent exemption from liability. Parallel cost factors are a defense.

Also, a person's poor credit rating might be a valid reason not to accept that person as a patient. Even if several other doctors also refused to see that person, it would not amount to an illegal group boycott.

Conversely, offering no explanation when accused makes it easier to infer a conspiracy than otherwise.

Likewise, evidence of frequent telephone calls about a patient or many exchanges of letters about fees can give rise to allegations of illegal conspiratorial activity. What gets people into trouble is acting in ways that make sense only if other parties to the conspiracy act similarly.

For a long time it was thought that the so-called learned professions, like the practice of medicine, were exempt from the anti-trust laws. We now know (as a result of the Supreme Court case of Goldfarb v Virginia State Bar, 421 US 77, 1975) that this is not so. Prior to Goldfarb it had been argued that practice of a learned profession was not "a trade in commerce" under the anti-trust laws, but the Goldfarb case held that it was, and settled the question.

Additional comments and observations will be made in subsequent articles, which will be forthcoming.

# SCIENTIFIC MEETINGS

Southern California Psychoanalytic Society

Nov. 21, 1983

The Reality Principles of  
Psychoanalysis and Zen

Harry Brickman, M.D.

Harry Brickman, M.D. in his opening remarks quoted Freud to the effect that psychoanalysis transforms neurotic misery into ordinary human unhappiness. In his concluding remarks Dr. Brickman said that Zen would ask the question: "Who is it that is unhappy?" Zen enlightenment dissolves the polarity between union and individuation in a total immersion of the self in ordinary life in the present moment. Both poles of the autonomy -- union axis are experienced in the ultimate in the inversion of the self in ordinary life. Finally he offered the perspective of Zen to provide a means of visualizing a further step in the understanding of the self by bringing closer together our concepts of primary and secondary narcissism. Dr. Brickman reached his closure through a series of thoughts and concepts which can only be incompletely reviewed. The pessimistic prognosis of Freud leads him to a search for what has been lost. Psychoanalytic thought is incomplete and he turns to juxtapose the most comprehensive Western Psychology with the Eastern Way of understanding human experience. He listed a set of Freudian psychoanalytic criteria with which he found Zen to be compatible: Free from totemic history and the idolatry of the parent image; free of the forcible imposition of mental infantilism; free from illusions rising from wish fulfillment; acknowledge the autonomy of the individual which encompassing shared ordinary human experiences; free of moral condemnation and notions of divine judgment or retribution; concerned with life here and now; fundamentally monistic; acknowledging the co-existence of opposites and finally, include "oceanic feelings."

Key to the further development of Dr. Brickman's thought was the absence of clear distinctions between subject and object as noted in post Newtonian science, religious mystical experience, and current psychoanalytic thought, such as Loewald's notion of psychic structure as bound energy (1980) and Kohut's concept of self inextricably interconnected with self-objects. Zen enlightenment speaks directly to the point: On his death-bed Gautama Buddha said, "Be ye lamps unto yourselves." Buddha found the cause of the suffering of ordinary living as thirst or attachment and the mistaken belief that there exists a separate self which defines itself by its attachments to objects of desire -- whether they be wish fulfillment, ideology, other people or worldly possessions. Buddha prescribed a cure for ordinary human suffering: the Eight-fold Path

of correct beliefs and actions primarily achieved through the contemplation of reality by means of a prescribed form of meditation. In meditation the mind is emptied of its preoccupation with its conscious contents allowing a full experiencing life in the actual moment. Then he stated life in the moment is ordinary life with nothing added or taken away. Ordinary life merely "is." It can be happy at times and sad at other times but it is not enduringly either happy or unhappy. Dr. Brickman averred that Zen is not a substitute for psychoanalysis, but a complimentary study which can support and enrich the life of a psychologically healthy person.

In historical perspective Dr. Brickman highlighted psychoanalytic thought progressively moving from a concentration on mental life as a psychic apparatus with its interest in the intrapsychic representatives of family life (Oedipus complex), to a focus on autonomy of ego function, to a focus on the concerns of self psychology. Other matters have followed in the application of psychoanalysis from transference to counter-transference and then to assertions that the real experience of the relationship with the analyst can serve as a primary factor in building psychic structure. Self as ordinary life, Dr. Brickman proposed, is the next way-station in the trajectory of psychoanalytic understanding from an origin in the wholly intrapsychic along a course of progressively closed approximations of nature and nurture. In approximating primary and secondary narcissism, the result is intimate co-dependency not with persons alone, but with all phenomena of life.

Dr. Brickman then turned to a more extensive exposition of primary narcissism which he equated with "oneness" or union. He referred to Loewald's paper "The Waning of the Oedipus Complex" (1959) and gained the thought that non-objective forms of reality organization are useful for the understanding of narcissistic disorders and of normal mental life. He postulated that the "loss" which provokes ordinary human unhappiness is the loss of the unitive experience. The unitive experience is equated to regression to primary narcissism, as seen in such publicly understood events as personal religious experience, sunset watching, sexual orgasm, etc. The individual loses one's actions; neither happy nor unhappy, he is both.

A copy of this interesting paper along with a bibliography of relevant thinking is available at the Society office.

John Leonard, M.D.  
Reporter

Southern California Psychoanalytic Society  
Jan. 6, 1984

What It Means to Know Another Person?

Ilham Dilman, Ph.D.

Dr. Dilman stated that he shares with psychoanalysts a sense of importance of Freud's contributions to the understanding of people. The bibliography of his published papers supports that view. And this presentation represented an expansion of his philosophical contributions in context with Freud's ideas. He cast an experiential, emotional light to the concept of knowing. The central thrust of his presentation was to contradict the idea that in relation to people knowing was the antithesis of ignorance. He wished to equate knowing with contact and the antithesis with isolation. He carefully even meticulously carried this concept through many settings and relationships: the liar, the adversary, the parent, the partner -- and the psychoanalyst. Through all these possible types of exchange -- except with the psychoanalyst -- he carefully reasoned that contact was possible and people could get to "know" all these people.

The analyst-analysand relationship he pictured as having a special asymmetry which poses problems about the character of the analyst's knowledge of his patients. It is even questionable if the analyst is the object of the patient's responses. He argues that the analyst deliberately hides himself, inhibits his responses and does not expose his vulnerabilities. Thus, he reasons, there is philosophical question about the character of the contact and the sense in which he comes to know his patients. Dr. Dilman did acknowledge in later discussion that much is conveyed -- the human qualities -- in the psychoanalytic interchange.

This is a brief coverage of what was an extensive and detailed philosophical discourse. His rhetoric was constructed with painstaking care. Each word carefully placed. Anyone interested in hearing him develop his thoughts on these several areas of human contact may obtain a tape of his presentation by contacting Carol Ziff at the Society office.

John F. Leonard, M.D.  
Reporter

Southern California Psychoanalytic Society  
Feb. 13, 1984

Object Relations in a New Key

Mardi Horowitz, M.D.

It is with great pleasure that I attended the lecture by Mardi Horowitz entitled "Object Relations in a New Key." I had already tussled with some of the ideas, Dr. Horowitz expresses so well in trying to understand the concept of sublimation to Freud's pre-darwinian concepts of "pangensis"; in which libido from all organs contribute to the sperm or egg by rushing there at the moment of orgasm. Freud speaks of collateral channels and dammed up libido, in the schema of perversions, inhibitions, etc. My thinking ended up leading me to realize that a modern theory of psychodynamics has to deal with levels of personal meaning rather than energy in any form.

Harvey Weintraub was chairman and introduced Dr. Horowitz who is a professor at Langley-Porter and at Stanford. He explained that he took his title from a 1945 book by Langer, which dealt with transformations of symbolism...inner models to help interact with the outer world. Now Dr. Horowitz asserts the Cognitive Scientists have accepted the concept of unconscious inner models. Thus it is now possible to bridge the gap between psychoanalytic theory and cognitive action patterns. This is the goal Dr. Horowitz has set for himself and others like him to achieve.

In a brief review of the history of this gap, he cited the development in literature of the uni-, di-, and polypsychic self. The dipsychic position was reached by invoking demonic possession by the church and in the story of Dr. Jeckel and Mr. Hyde. Mesmerism, somnambulism and automatic writing led to the concept of multiple personalities.

In the official American Psychoanalytic view there are still hints of unipsychism, by some insisting on the great importance of fixation points, which can then be resolved in a regressive transference, thus confusing self concepts with ego functions. Kohut with borderline patients and Kernberg with narcissistic patients have tried to remedy this. We all note in conferences that

layers are described, so it is now clear that a defensive posture covering the aim, can later be seen as a deeper layer of the analysis itself. On the other hand a simple concept of polypsychism is inconsistent with our experience of continuity over time, and how people make changes with no splitting or dissociative phenomena.

Dr. Horowitz proposes that the word "self image" be polypsychic and represent the self concept experienced by the person at each moment. The "self representation" would be unipsychic, an enduring schema, constructed by a multitude of realistic and unrealistic self images of the moment. Still better would be to use the concept of Sapperstein and Gaines of a "superordinate self," a container for many self images, as unipsychic. Further elaborations would include describing which is active or dormant at a given time, and which might be the "elemental self."

Dr. Horowitz went on to apply these concepts to clinical material in the form of "self-righteous rages" as seen in some patients. I can't repeat all the clinical material but certain self elements are important in evaluation of each example such as the stability and transition of the self, related to the surge of desire and triggering event for the rage. The recursiveness meaning the degree to which a person in a rage state can contain memories of how they and others were in other states.

Other values of this approach include a new method of diagnostic formulation for research and validation. A new way to explain change in people, for example what does it mean when a patient in analysis dreams of themselves as a mature adult for the first time. Thirdly, as is pointed out by Gedo and Goldberg and Basch, technical work is thwarted by certain states of mind in the patient. In that state of mind the patient can not see the therapeutic alliance. Also this will allow us to bridge the gap between cognitive science and psychoanalysis. This is already being worked out in the area of the general theory of development.

Dr. Jack Gaines was the first discussant and he felt basically in agreement with the direction taken. He added that what was needed was the addition of a hierarchical theory of self concepts with exploration of the epigenesis of each self concept. Also that it needs to be noted that reciprocal relations exist among the "superordinate self" and the multiple "self images." Thus the "superordinate self" has access to all levels of development as we already understand in our concept of "regression in the service of the ego."

Dr. Alex Rogawski was the second discussant and he expressed enormous admiration for the work presented, especially in view of its application to clinical material. He pointed out that all of us have in some ways found the psychoanalytic "macrostructure," that of id, ego and superego at times cumbersome and lacking in relation to our analytic practice. He felt that systems theory could also wind up contributing to a better understanding.

I felt I had understood what is being attempted and why, but I had some questions. Dr. John Bowlby uses ethology to postulate "cognitive maps." Is this then a similar thing? Wilhelm Reich felt that character had to be analyzed first in some cases, thus peeling the onion. Is he a forerunner to the concept of hierarchical levels? Very importantly it was said that the "transference neurosis" becomes internally transmuted into the "superordinate self," though it may lie dormant. Therefore it can never be completely resolved, nor should it be. Yet as of now the prerequisite for any successful analysis is exactly that, the resolution of the transference neurosis. Perhaps we should realize that we must go forward but cautiously, realizing that work in progress, infant observation, in language, in information theory will one day all be brought together in a way that at least all psychoanalysts are able to use and discuss their cases.

I hope my remarks will convey to the reader the wonderful clarity Dr. Horowitz was able to bring to such a difficult subject, thus hopefully stimulating many people to take on such a task in small groups -- as he recommended to continue the work.

Alan H. Blanc, M.D.  
Reporter

Southern California Psychoanalytic Society  
March 23, 1984  
The Violence of Everyday Life:  
Toward a Psychodynamic Understanding

Martin A. Berezin, M.D.

Dr. Martin Berezin is Professor Emeritus at Harvard University Medical School and a senior psychoanalyst in Boston. He presented his ideas on violence to a special Friday night scientific meeting saying that he had been one of the few psychoanalysts to be interested in Geriatrics. He feels that psychoanalysts at that time thought it was strange but now that he has begun to study violence they look a little sideways at him. He started his talk with an excellent joke. Noting these facts I determined that Dr. Berezin was not a man of choleric nature. Therefore, I felt that he would not mind if I took some liberties with his talk. Instead of reporting it as if it was a scientific meeting in which he presented his views on the reason for violence in everyday life. I would report it as if I met him at the Fatburger, where most of the other members of the Society must have been that night.

Dr. B.: Hello, Dr. Markel, you know I have become interested in studying violence. Did you know that there was a lot of violence in the world? It is widespread in daily life. You know, like Freud's Psychopathology of Everyday Life. It must have biology at its root.

Dr. M.: Hi, Martin. Yes, I noticed a lot of examples in the Los Angeles Times. By the way, call me David. In the Southern California Psychoanalytic Institute, we like to use first names. Seems to reduce hostility.

Dr. B.: You know, Dr. Markel, I have studied all these forms of violence and feel there are biological roots. Sexuality is also part of it. Look at the oedipal themes in fairy tales. Giants getting castrated, children eaten. Primal scene is big.

Dr. M.: You're right about that. By the way; I would feel better if you called me David.

Dr. B.: Freud did not attend to the issue of aggression until 1920 and that is one of the reasons there is not a lot on the subject in the literature.

Dr. M.: I noticed you did not mention Kernberg or Kohut. I think they had some thoughts on it. They would be angry that they were not included.

Dr. B.: You think so? I heard that when Kohut was alive they had some violent arguments. Why do you think that was?

Dr. M.: I heard that one had too much innate aggression and the other was overly sensitive to slights.

Dr. B.: Is that so? Well, I have to go now Dr. Markel, I will see you at the meetings in New York. I am going to present my ideas there. I think they will make a big Splash.

Addendum: Two members of our Society, Drs. Litman and Wahl gave excellent, scholarly, critical discussions of the paper. However, I have decided not to include their comments because I heard that these gentlemen were of a definite choleric nature.

David Markel, M.D.  
Reporter

# INSTITUTE NEWS

UPDATE: Walter Briebl Human Rights Conference  
September 22 and 23, 1984

Muriel Gardiner,  
A Featured Speaker

Marvin P. Osman, M.D.

When the Walter Briebl Memorial Committee decided to hold a conference on human rights to honor Walter, Muriel Gardiner was one of the first named as a possible major speaker. Among psychoanalysts she is best known as the editor of The Wolfman by the Wolfman. To the public she is becoming increasingly known for the role she played just before World War II when, as an American attending medical school in Vienna, she assumed an active undercover role in aiding the escape of people wanted by the Nazis. She offered her home as a safe house for dissidents on the run and also transferred false passports into Austria for people whose survival depended upon being able to leave the country. Her memories, Code Name Mary, were published last year and focus particularly on her fascinating experiences rescuing numerous people who would certainly have perished otherwise.

Many people have asked Dr. Gardiner if she was the character "Julia" in Lillian Hellman's Pentimento, on which a motion picture was based. Dr. Gardiner and Julia were both wealthy young Americans who attended Oxford and joined the Anti-Fascist resistance movement while medical students in Vienna in the 1930s. Each gave birth to a daughter. Hellman described Julia as a patient-pupil of Sigmund Freud, while Gardiner was referred by Freud to Ruth Mack Brunswick for analysis. But Hellman and Gardiner have never met.

In a foreword to the memoirs, Anna Freud writes:

...She belonged to neither the hunters nor the hunted...The ugly scenes which followed Hitler's triumphant entry into Austria need have been none of her concern. Prudence as well as the protection of her young daughter would have advised that she follow the example of the many other Americans who did not hesitate to return to their native country...nevertheless, and in the face of all reason, she remained, apparently

with the aim of finishing her medical studies, but even more to help her friends. And from these, her helpfulness and compassion began to spread; to their friends; to the friends of friends; to anybody in trouble, however remote and unfamiliar until she was surrounded by a whole crowd of potential victims who looked on her as possibly their only hope of salvation.

In a letter to Gardiner from Anna Freud dated October 30, 1972, she wrote:

I like my own life very much, but if that had not been available and if I had to choose another one, I think it would have been yours.

Muriel Gardiner was born in the early part of this century in Chicago to a family of great wealth. According to an article in the American Medical News (March 23/30, 1984) Gardiner recalls hearing about poverty at age eight or nine from the family nurse and housekeeper, and, ever since, having a "vague feeling that there was something amiss in the world" which kept her from "experiencing much of the joy in life."

When she was in analysis with Ruth Mack Brunswick, while in her analytic session, they heard the tat-tat of machine guns quite close. Dr. Brunswick decided that the issue of bodily self preservation superceded the niceties of analytic technique and she broke off the session and asked the chauffeur to drive Gardiner home. Gardiner recalls the day as "being dark and cold but this might only be because of the eerie atmosphere of impending doom..."

At another time Gardiner's only request of her analyst was that she introduce her to Freud. This request was granted when Brunswick and her patient were invited to a family gathering of the Freud's. It was a sunny afternoon. Aside from the Freuds, several family members were present including Tante Minna. Gardiner was impressed by Freud's "penetrating eyes, and his earnest but charming manner."

In her memoirs Gardiner points out that many features of psychoanalytic technique at that time would now be disapproved of by most analysts in this country. For example, opinions and tastes were stated more openly and often discussed freely with patients. Some analysts were less concerned than we are today about avoiding social contact with patients. Many did not

(Continued on Page 21)

## Gleanings From Grotjahn Martin Grotjahn, M.D.

### PSYCHOANALYSIS IN THE NEW YORKER

The stories\* of infighting between the former Secretary and the Director of Research of the Sigmund Freud Archives are told in colorful detail by Janet Malcolm in The New Yorker. It is not clear who may benefit from such reports or who would be even interested in them.

Many analysts have heard rumors about the "Freud-Archives," which are placed under the protection of the Library of Congress, tightly sealed and not accessible to even the most qualified historians among analysts. This material shall not be revealed, presumably until the year 2201. The story of peculiar incidents in recent times at the Archives will be published soon since Kurt Eissler, the Secretary of the Archives, has reported these incidents at the International Psychoanalytic Congress in Madrid in 1983.

There is little to review or to add here to the story as told by Janet Malcolm. Much will be forgotten immediately, the rest will follow in due time. The whole "scandal" is ridiculous, even if Sigmund Freud would have not been amused but disgusted, perhaps hurt. However, it cannot be denied that the story of the Archives is entertaining in its humorous aspects with a slight touch of poetic justice. Many historians of psychoanalysis have been offended by the haughty secrecy of the Archives' administration.

Briefly told, the story is this: Kurt Eissler, M.D., well known and universally recognized as a leading New York expert about the history of psychoanalysis, felt the wish to resign from the time-consuming duties as the Secretary of the Archives. He was looking around for a possible successor without finding anybody qualified or trustworthy. Then he met Jeffrey M. Masson, a young professor of Sanscrit, with a long-standing interest in psychoanalysis, and recently graduated from a recognized psychoanalytic training institute and a member of the International Psychoanalytic Association.

Eissler was charmed by the man and developed an intensive friendship with his much younger colleague. He invited him to become Director of Research Projects,

paying him an annual salary of \$30,000 to supervise the translation of the many unpublished Freud-Fliess letters and to prepare a complete edition. Masson was also entitled to study hundreds of highly confidential tapes on which Kurt Eissler interviewed outstanding analysts on the history of psychoanalysis as they experienced it. Eissler managed to have the Board of Directors appoint Masson to the job. After a short time, disaster struck. Masson started to publish not only factual reports but also theoretical conclusions, as for instance, an attempt to float Freud's original seduction theory of hysteria. Masson climaxed his publications with reflections on Freud's character, talking about Freud's intellectual dishonesty, etc. It seems as if he also made other insulting remarks to the memory of Freud, effectively stimulating the iconoclastic public.

With the same speed with which Masson was appointed, he was fired. Kurt Eissler and Anna Freud were obviously disillusioned with the young man. It all ended as such things are always bound to do, in a lawsuit of \$13 million against the Archives.

There are perhaps two lessons to be learned, both banal, boring, often repeated but obviously not often and loudly enough: an organization, proceeding in total secrecy and without any supervision, especially when run by friends in streamlined autocratic forms, will not function well.

The second lesson has equally often been experienced and analyzed but its conclusions have also never been learned: Analysts are not knowers of men (Menschenkenner); they do not have the ability to judge people in practical matters. Analysts often start deeply felt working relationships or even friendships with people of doubtful character. Freud was a good example for choosing almost unflinchingly friends who finally disappointed him.

This practical failing is understandable -- but obviously impossible to change.

It seems to be necessary for analysts to have illusions about people in order to work with them. We must be able to believe in the essential goodness of men. That is the reason for our downfall; that is the reason why we are so often disappointed and so badly

\*Malcolm, Janet. Annals of Scholarship. Psychoanalysis, Part I, The New Yorker, December 5, 1983, pp. 59-154; Part II, December 12, 1983, pp. 60-119.



hurt. If we would have the inclination to be suspicious, paranoid, looking for evil -- or if we would be defensive and even hostile -- possibly invasively intrusive -- we would probably end up knowing men better but as analysts we could not be as effective as we expect ourselves to be.

We are not supposed to be blind against evil; we are supposed to look at men as they are: good and bad, benevolent, loving and helpful, hostile and envious, viciously competitive, and combative. We are not supposed to react to these trends if we want to understand people analytically. To be open minded we must not necessarily trust them - (because as a rule we do not want anything from them anyway) - but we must not distrust them. If we do, they will distrust us too. The basis for therapeutic work is trust. Openmindedness obviously is an invitation to come in - and this is for some people an irresistible temptation to abuse our good will. We have to accept that even if we do not like it. If we would change it, we would lose our "innocence."

This analysis of our shortcomings as "Menschenkenner" may not always be correct. There are hostile, invasive, competitive or even paranoid analysts. In their work they are like vultures, always sniffing out evil -- and finding it. They may be gifted to work with a certain kind of people with whom the average analysts may fail.

Well, we just have to realize that we cannot be simultaneously openminded, trustful and suspicious and alert against being attacked. So we will have to make mistakes and will have to pay for them.

After all, we have chosen to work in an "impossible profession."

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Jeffrey M. Masson has now published his opinions in a book: The Assault on Truth. Freud's Suppression of the Seduction Theory. (Illustrated. 308 pages. New York: Farrar, Straus and Giroux. \$16.95.) In this book Masson repeats his claim that Freud corrected his original theory of realistic trauma (1886) to psychological experience out of intellectual dishonesty and in order to make this theories about hysteria more acceptable to the medical establishment in Vienna in Victorian times. Masson does not mention clinical

material or the insights Freud had gained in his self-analysis and the discovery of the Oedipus Complex, which were actually the reason for Freud's change of opinion. -- I still believe such kind of book could be considered as acting out, not as a debatable scientific contribution.

Unanswered remains the question: Why is public opinion so intensely interested in this question? Has the public really become so hostile to psychoanalysis that any straw is grasped by the media in the hope of striking the "death blow" to psychoanalysis? It certainly seems that way.



#### "BLESS YOU!" - An Everyday Magic Gesture

I have a friend who each time when I have to sneeze -- which may be frequently in days of allergy -- has to say quickly: "Bless you!" This custom is older than the civilization of Middle Europe. It is probably as old as people's belief in demons, ghosts or souls. Until recently, meaning the time of our parents or grandparents, people used to say more clearly and less apologetically: "God bless you."

What seems to happen is that people still believe any may not be aware of their belief that sneezing is a freeing of the soul from the body. With the sneeze the blessing which we received at baptism (or at any equal ritual) seemed to have left the person. This horrible leftover "ME" is unblessed after the sneeze and must quickly be blessed to protect me against the Evil Eye or any other disaster.

My friend is visibly upset when I do not react at all to his sneeze. Finally he says with indignation: "Can't you do what all people do? To say 'Bless you' is a generally accepted custom; it is a gesture of courtesy. Well, -- no. I respect traditions and symbols, and gladly conform to some of them if I possibly can. Blessing does not belong to the few exceptions I allow myself. I do not bless and I do not curse (if I can help it). I gladly congratulate or send my best wishes. It is good to know that somebody wishes me well and when I want to wish somebody well I say so. I express also my feeling of condolence -- if I feel honestly sad. Otherwise I remain silent. I do knock on wood though. When I do it I do not reflect on it. I like to call on my old Teutonic tree gods to be with me at a time when computers and laser beams threaten me. I don't want to antagonize any one of them. They are my friends from long forgotten times.

M.G.

# BOOK REVIEWS

How to Write and Publish Papers in the Medical Sciences. Edward J. Huth, M.D., Philadelphia: ISI Press, 1982. Cloth, Paperback.

Of the making of scientific papers there is no end and Dr. Huth's book serves as an invaluable guide for this purpose, both for the educator as well as the clinician. Editor of the prestigious Annals of Internal Medicine, Dr. Huth is also professor of medicine at the University of Pennsylvania, past chairman of the Council of Biology Editors and former president of the American Medical Writers' Association. His book is one in the Professional Writing Series published by the ISI Press, a subsidiary of the Institute of Scientific Information in Philadelphia.

Psychiatrists and behavioral scientists will find nuggets of information in this guide which is meant essentially for medical publications. The chapter on literature searching is indeed an eye opener, even for an experienced professional librarian who is supposed to know all about the intricacies of present-day computer searching. I would consider Dr. Huth's chapter required reading for anyone even remotely connected with computer searching in the scientific field in this day and age.

With detailed thoroughness, he describes the various services now emanating from the National Library of Medicine, their scopes and duplications, their possibilities and limitations, how to take full advantage of them, how to make the best use of them, step by step. This chapter alone makes Dr. Huth's book a useful tool for therapists for it answers so many questions that continue to baffle the researcher-writer: What do I do and Why? Where do I start? And what do I do when out of the zillions of references I get, I can only really use just three?

Wherever questions such as these are presented to me, my answer is inevitably: How lucky can you get? For even though the National Library of Medicine continues to expand its coverage of the very terminology of psychiatry and the behavioral sciences, needed references via the available computer services continue to be elusive in some cases; even the Chicago Index falters sometimes. It is all the more necessary for the behavioral scientist to be aware of what happens and why so as to know how to proceed next when the citations to the literature evade us.

One approach that we have used at the NPI has been to supplement the available bibliographical resources with the numerous reprints, tearsheets and other documents referred to us from sundry sources. In our Professional Staff Library we have organized what we

call our Subject Collection which is a highly specialized addenda to our book and journal collection. The material is arranged in Magafiles of various sizes with such headings as alcoholism, anxiety, depression, drug use -- with appropriate subdivisions, thereby making an entire bibliography readily available at the fingertips of the prospective author. Ours is by no means a panacea but it is admittedly another facet, a practical method of bibliographical control amid the confusing information explosion. NPI's beloved Eugene Pumpian-Mindlin, M.D. agreed that Magafiles were a practical solution for document retention and as he predicted they are continually used and provide heavy mileage over the years.

Sometimes one has the feeling that Dr. Huth is actually looking over one's shoulder and encouraging us in the composition and creation of our paper. For example, he even has paragraphs on writer's blocks and how to cope with them and about one's attitude in preparing for effective revisions instead of succumbing to frustrations and in effect, giving up.

Another one of Dr. Huth's chapters which intrigued me is the one on book reviews and letters to the editor. He admonishes correspondents and reviewers to take the same care and caution in exposing oneself in print via shorter means of communication as is applied to a formal paper. To the best of my knowledge, this is the only chapter of its kind in which these aspects of professional writing are treated with the same formality and concern as a contributed paper.

There is clarity in the layout and format of Dr. Huth's book and it has already taken an authoritative place in the line of manuals and guides which date back to the one by the indomitable Morris Fishbein, M.D., Medical Writing: Technic & the Art, first published in 1938.

Sherry Terzian  
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Charles De Gaulle: A Biography by Don Cook (G.P. Putnam's Sons. 1984. 440pp.

The story of how General de Gaulle built the Free French movement out of nothing but his will and historical necessity is one of the great sagas of modern history. Don Cook, Paris bureau chief for The Los Angeles Times tells the tale well. The events are the rise of a renewed pride and confidence in a France collapsed and demoralized by the German onslaught of 1940. The panorama is the critical events of World War Two: the fall of France, the disastrous defeat at Dakar, the North African landings, D-Day in Normandy, the liberation of Paris. The events are thrilling, the pace is fast. I could not put the book down.

Consider de Gaulle's position in June 1940. He was a general of a defeated army whose government was suing for peace. De Gaulle represented no one but himself, he was a general without any troops except his aide. He had no state, no territory, no army, no money or resources; he was soon to be condemned to death as a traitor by his government. The French armed forces and fleet, the diplomatic service, and the colonies were overwhelmingly loyal to Vichy. Of 18,000 French naval personnel in British ports in July 1940 only 250 officers and men elected to stay in England and enlist under De Gaulle -- not much of a beginning for the liberation of France.

On June 16, 1940, as the French cabinet decided to request an armistice of the Germans, De Gaulle, whose views that France should carry on placed him in danger of arrest, made a dramatic escape to England. He drove to the airport with a British general as if he were seeing him off. De Gaulle was standing on the tarmac pretending to say good-bye as the engines revved up. Just before the RAF plane taxied out on the runway, he scrambled aboard to fly to England and exile, not to see France again for four long years of building, struggle, and reconquest. Winston Churchill said: "De Gaulle carried with him, in his small airplane, the honor of France."

Of his feelings on that day, De Gaulle wrote: "I seemed to myself, alone as I was and deprived of everything, like a man on the shore of an ocean, proposing to swim across."

The key to De Gaulle's character and his politics is his pride which he equated with that of France. When he was a student at the École Supérieure de Guerre he

so antagonized his instructors that he nearly torpedoed his career. His ratings were not good enough to qualify for an appointment to the General Staff and a place on the ladder to top rank and responsibility. When he left the Ecole Militaire he said to his fellow students: "I will come back to this dirty hole when I am commandant of it! Then you will see how things will change." He never was commandant, but was to return as leader of France.

His military postings in the 1920s took him to French occupied Germany and to Beirut. His view of the French presence in Lebanon is interesting:

My impression is that we haven't really made much impact here, and that the people are as alien to us -- and we to them -- as they ever were. It is true that as a course of action we have adopted the worst possible system in this country, that is to try to get the people to do things for themselves. But nothing has ever been achieved out here without compulsion, neither the canals of the Nile, nor the aqueduct of Palmyra nor a Roman road nor an olive grove. As far as I can see, our fate will be to go as far as that, or to get out.

De Gaulle's inter-war position on tank warfare has been glorified in retrospect to make him a prophet of the armored division. He advocated a highly mobile professional armored force in contrast to the static formations of infantry behind fortified barriers which was the French strategy for defending the country against German attack. The Minister of War said: "The government...knows perfectly well what the plan of the next war will be." De Gaulle disdained the theoretical rigidity of the General Staff.

It is, however, not true that German strategy of Panzer warfare was informed by De Gaulle's articles and books of the early 1930s. There is not one mention of De Gaulle or his writings in the reports of the German military attachés from Paris in the period 1932 to 1937. One of the reasons is that De Gaulle was ignored in France. His 1934 book on armored warfare barely sold 750 copies in his own country. He was denied permission to have his writings appear in the official Revue Militaire Française on the grounds that "it is inopportune to publish in the Revue ideas that risk running counter to, or might induce others to run counter to, the views of the Ministry."

If there is a shortcoming in this biography, it is the total absence of anything about its subject's family home, childhood or parents. Cook gives us virtually nothing of De Gaulle's background, about where this remarkable man came from. We can infer a monumental self-confidence transcending egotism, but also an isolation, no humor, and an avoidance of intimacy. He could be deeply depressed but rarely showed his anguish. An exception was his confession to a British officer in 1940: "For me, what is terrible is to feel myself alone. Always alone." Yet for the rest he remained personally aloof, cold, glacially distant and arrogant.

The issue of conflict between Allies has never been more sharply posed than in the study of De Gaulle and his relations with Roosevelt and Churchill. All the elements of pride and injured narcissism are there. It is a tragedy of the Free French movement that it had not a single major political figure in its leadership. A degree of political talent and experience could have done much to smooth the way for De Gaulle and his movement.

To be sure, many of the difficulties were inherent in the asymmetry of the situation. De Gaulle represented no one. The legitimate recognized government was in Vichy. All the resources, funds, equipment, airplanes, even the broadcasting equipment he used, were British. The United States was supporting General Giraud and trying to play the card of Admiral Darlan in North Africa.

De Gaulle's reaction was stubborn pride and insistence on the recognition of full equality. He refused to broadcast on D-Day with the other leaders of Europe addressing their peoples such as the King of Norway, the Queen of The Netherlands, and the Prime Minister of Belgium. He refused to allow 170 French liaison officers to assist the Allies. Churchill was speechless with anger and considered this "a monstrous and inexcusable betrayal of loyalty among allies." De Gaulle refused to meet Churchill in Algiers at the time of the invasion of Southern France and he repeated the snub against President Roosevelt six months later. By now he had a Free French government on territory under his control in North Africa and several divisions fighting under the Cross of Lorraine. Yet the closer he came to the liberation of France and ultimate success, the more suspicious, mistrustful, and paranoid he became. Just five days before the liberation of Paris

on 25 August 1944 he endangered his own life and that of his crew by refusing to land for a refueling in England, convinced that the British would prevent his return to France.

This is the story of a man who was in fact a movement. Without De Gaulle and his supreme dedication there would have been no Free French movement. It provided him with the base for his political power in postwar France. He was one of the rare men who shaped events, who made things happen, as much as he allowed them to shape him.

Peter Loewenberg, Ph.D.

(Continued From Page 15)

The Place of Psychoanalysis in the History of  
Knowledge According to Daniel J. Boorstin

Daniel Boorstin seems to possess a truly brilliant mind. He has developed this mind to universal reach of a renaissance man. He is the Librarian of Congress and it appears as if he had read and studied every book of this enormous library.

Now he has written a magnificent and perhaps unique book, recognized as such by authors who are suited to judge such matters. His book is a history of mankind -- but not according to nations, kings and generals, wars, treaties or even great men.

His history is the story of knowledge: its beginnings, its bloom and progress, decline and revival; its language and its spread, methods of investigation, communication and documentation. The invention of paper printing and bookbinding are described with love, devotion and most of all with expert knowledge and carefulness to detail. He calls the book The Discoverers. (New York: Random House, 1983, pp. 745).

Knowledge has accumulated slowly -- and so until almost recently -- the story of discoveries can be told systematically and orderly, one after the other, on 700 annotated pages, all with proper references. But the multitude of discoveries in physics and nuclear research and new concepts in almost every field begins to crowd and then to overcrowd the pages at the end. Psychoanalysis had to be mentioned and finally finds a place -- not under Natural Science -- or "Geistes-Wissenschaften" -- not even under Psychology or Medicine or Philosophy, but under "Opening the Past, History as Therapy." Freud's trip to Rome and his love for archeology are moved into the foreground. What Boorstin writes about Freud is correct, informative, filling two pages. But it contains nothing of, for instance, dream research, the unconscious, metapsychology or the great field of applied psychoanalysis. Not even the deepened human understanding of people for people is mentioned. Obviously great minds have limitations -- psychoanalysis seems to be Boorstin's limitations. The book remains most praiseworthy.

Martin Grotjahn, M.D.

object to their patients knowing each other. Some even suggested their patients make contact if it was likely that one could help another. It was through Dr. Brunswick that Gardiner met her fellow patient "The Wolfman" when she wanted to study Russian and Brunswick knew he would be glad to have some extra money. Also Dr. Brunswick sometimes told her that she had talked over some of the problems of her case with "the Professor," as she always called Freud and would then quote his opinion. Gardiner did not know whether this was good technique or not but it always pleased her when Brunswick did this.

Her first analysis with Brunswick had an unusual termination. Gardiner decided to take a vacation in the summer of 1929 and was at the last session in June. After the session was over she shook hands with her analyst (as was usual in Vienna at the end of every psychoanalytic hour). After wishing Gardiner a happy summer Brunswick said goodbye in such a tone of finality that Gardiner asked, "Do you mean it is the end? My analysis is over?" Still smiling Brunswick said, "Yes." Gardiner was overjoyed and thanked her happily.

On page 128 of the book I was delighted to come across the following passage:

Alex Rogawski, an Austrian student I knew slightly...offered to tutor and test me...His tutoring was a tremendous help to me, not only in learning the material for my ophthalmology and dermatology exams, but also as a stimulus to complete a certain stint every day.

Of course the person alluded to is our own AieX Rogawski. Gardiner was able to pay Alex's kindness in return later. When he escaped to Sweden she sent him \$100. He told her later that he had been literally destitute when his unexpected gift arrived. They met later in New York and Alex was invited to study for his New York medical boards in her apartment. Incidentally Alex will be the chairman of the session during which Muriel Gardiner will be making her address.

Our conference will be entitled "The Violation of Human Rights: The Quest for Understanding." In addition to Dr. Gardiner, speakers will be Dr. Robert Lifton; Dr. Inge Kemp Genefke, Medical Director of International Rehabilitation Center for Torture Victims; Dr. Luis Feder, Mexico; Jacobo Timerman; Rabbi Marshall Meyer, Argentina; John Healey, Executive Director of Amnesty Inter., USA; Speaker of the Assembly Willie Brown; Ramsey Clark; Beate Klarsfeld, Nazi hunter who brought Barbie to justice; Dr. Mortimer Arias, former Methodist Bishop of Bolivia and victim of appression; Dr. Saul Brown; Dr. Louis J. West; and Dr. Peter Loewenberg. We urge you to attend this meaningful conference.

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*Some Recent Acquisitions*

From the General Fund.

James F. Masterson. Countertransference and Psychotherapeutic Technique. Teaching seminars on treatment of borderlines. Case presentations.

Shlomo Breznitz, Ed. The Denial of Stress. Denial as a adaptive mechanism and as a pathological state.

Gordon Parker. Parental Overprotection. Problems of psycho-social development.

M. Masud R. Khan. Hidden Selves. The unknown self as revealed through the analytic process, and as revealed through creative works. Much clinical material.

Marie Balmary. Psychoanalyzing Psychoanalysis. Critique of Freud's analytic method and the author's theory of "omissions" in Freudian theory. Translated from the French.

Mardi J. Horowitz. Image Formation and Psychotherapy. Revised edition of his 1970 book Image Formation and Cognition.

M.B. Cantor and M.L. Glucksman, Eds. Affect. Theoretical developmental and clinical aspects.

L. Bryce Boyer. The Regressed Patient. Papers illustrating evolution over thirty-five years of the author's understanding and treatment of characterologic, borderline and schizophrenic patients.

J.D. Lichtenberg and S. Kaplan, Eds. Reflections on Self Psychology. 1980 Symposium on development of and questioning of self psychology and its relations to traditional Freudian psychoanalysis.

Peter Hartocollis. Time and Timelessness. Varieties of temporal experience as affected by age, emotions, neurotic and psychotic disorders and other conditions.

Arnold Rothstein. The Structural Hypothesis. Elaborations of Freudian metapsychology accommodating it to new data and contemporary theories of mind process.

Robert Gardner. Self Inquiry. The analytic method and other techniques used to gain self-knowledge.

Martin S. Bergmann and M.E. Jucovy. Generations of the Holocaust. Psychoanalytic studies covering Jewish survivor families and children of Nazis, and the secrets that haunt both types of families.

J.R. Greenberg and S.A. Mitchell. Object Relations in Psychoanalytic Theory. Overview of concepts of drive and of object relations theories, with discussions of exponents of each (e.g. Freud, Fairbairn, Klein, et. al.).

Vamik Volkan. What Do You Get When You Cross A Dandelion With A Rose? Detailed case history of a four year analysis. Includes countertransference material and a letter from the former patient summarizing his experience.

Aaron H. Esman, Ed. The Psychiatric Treatment of Adolescents. Collection of crucial papers on the subject by such authors as Aichorn, Eissler, Ekstein, Blos and others.

N. Bromberg and V.V. Small. Hitler's Psychopathology. Draws on recent studies of narcissistic and borderline personality disorders to bring fresh insights on puzzling aspects of his life.

Alexander Grinstein. Freud's Rules of Dream Interpretation. Practical guide, explaining the Freudian method. Much clinical material.

Rene A. Spitz. Dialogues From Infancy. Collection of his most important papers, descriptions of his films of infant behavior, with comments by authorities on his work.

Dodge Fernald. The Hans Legacy. Story of the horse, Clever Hans, who was said to be able to read and to do arithmetic, with insights into psychology and behaviorism. And a study of Freud's famous patient, Little Hans, with insights into the study of phobias.

## Gifts

### Beatrice Kotas Memorial Fund.

Raymond Dyer. Her Father's Daughter: The Work of Anna Freud. Rare work on the life of the great child analyst, with emphasis on the unfolding and development of her career and theories.

Vincent Brome. Ernest Jones. Official biography using unpublished correspondence between Jones and Freud, other primary sources, and interviews with Jones' contemporaries.

### Dr. Sherwyn Woods.

Helen Block Lewis. Freud and Modern Psychology. Critique of Freudian theory emphasizing author's view that more importance should have been given to the cultural nature of human behavior.

### Dr. Rudolf Ekstein.

Issues of American Psychologist, Ekstein reprints, other psychological publications.

### Bertram Spira Family Fund.

Psychiatry Annual Review, Vols. I & II, 1982, 1983. Excellent review articles on recent progress in many aspects of psychiatry, such as infant research, psychoanalysis.

John E. Gedo. Portraits of the Artist. Analytic studies of creativity and of creative persons, e.g., van Gogh, Picasso, Jung.

### Dr. Arnold Gilberg.

Honorarium from program at Beverly Hills High School, from which was purchased: Dennis B. Klein. Jewish Origins of the Psychoanalytic Movement. Anti-Semitism in Vienna in Freud's era, his relations with the B'nai B'rith, with Otto Rank.

Several cartons of books and journals.

### Dr. Jay Martin.

Jay Martin. Conrad Aiken: A Life of his Art.  
Jay Martin. Nathaneal West: The Art of his Life.  
Both books are in-depth studies of outstanding literary figures of the recent past.

### Lucille Ellis Simon Foundation.

Film. The Amazing Newborn. Remarkable film on the mental capabilities and emotional responses of an infant.

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Edward Joseph Shoben, Jr. Lionel Trilling: Mind and Character. Sympathetic and appreciative study of important cultural critic.

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Irving Berent. The Algebra of Suicide. The suicidal person's wish to be saved; the clues, responsibilities and difficulties facing would-be rescuers.

### Dr. Peter Loewenberg.

Frederick Morton. A Nervous Splendor: Vienna 1833/1889. The Vienna of the young Freud and other creative greats in art, music and intellect, up to the time of Crown Rudolf's suicide.

Yiannia Gabriel. Freud and Society. Insights derived from the social aspects of Freud's theories and their radicalization by Reich, Fromm and others.

Jerzy Kosinski. The Painted Bird. Remarkable and disturbing tale of a boy's escape from the Holocaust.

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