

A DIAGNOSTIC PROBLEM

Gustavo Dessal

The purpose of this intervention is to present a diagnostic problem which still remains uncertain for me.¹ It could be a serious case of obsessional neurosis. Or maybe an infantile psychosis which was prolonged throughout the life of the subject without arriving at a triggering, but perhaps rather, in these last years, has arrived at a *decompensation*. I am deliberately going to present the elements of the case without a theoretical elaboration, in order to open a discussion which is not predetermined.

The young J, 25 years old, came to see me at the end of last year. His fiancée is in analysis and it is through her that he found my name. He is in a state of anxiety, and at the same time he is demoralised by a series of thoughts and ideas which assail him in a compulsive manner, and which make him despair. The ideas revolve around his sexual identity, and although he is convinced of his interest in women, he is worried on this point. Very often he finds himself looking at men, and he then feels scared that people will believe him a homosexual. This obliges him to develop a reactive behaviour, and he adopts body movements that exaggerate the semblance of virility. He is conscious of the grotesque character of the situation, and that increases his anxiety. This unease has brought him to resignify an event from puberty where, once, only once, he surrendered himself to a masturbatory game with a friend. He wonders whether that could have been the seed of a latent homosexuality that he is having now to address. He rebels against it, and he does not understand why he should have to adopt a sexual identity that he considers repugnant.

At the same time he demonstrates a firm commitment to undergo treatment. Not only must he free himself from his problem, he says, but he must also discover its cause.

When did it begin? He can't remember exactly. He thinks that it was when he was about 16, a time when he frequented discotheques, accompanying a sister who was 10 years his senior. The young man here had his initiation into synthetic drug use, and it is to these tablets that he attributes the beginnings of his tormenting thoughts. At this time there is also the beginning of an extreme sensitivity to being looked at, and a preoccupation with contemptuous or mocking comments that could be made about him. During the course of the sessions he noticed the incestuous *rapport* with his sister at that time. He spoke of having been witness to sexual behaviour of his sister's, things 'that he should not have seen'. This emerged in a strange formula: he was scared that people would think of him what he himself thought of his sister. Although I don't understand what he meant exactly, it seemed to bring relief to him. With much tact I tried to find out what he thought of his sister. The patient didn't dare say, but gave me to understand that it had something to do with the signifier 'whore'.

The young J presents clear obsessional symptoms. Once, he was leafing through some pornographic magazines in a shop. While doing this, he looked at the gay magazines out of the corner of his eye. He thought he sensed the beginnings of an erection, and he fled the shop in horror. A little later, he decided to return to see whether the pictures of men really did excite him or not. He repeated the sequence several times, configuring thus a symptom in two phases: where the desire to look interfered with the defence.

When he was little, before he could go to sleep, he used to hit his head against the pillow for hours. When I asked him about it, he surprised me with this rationale: perhaps it was about punishing himself for masturbating, except that the order was reversed, the masturbation was achieved through hitting his head.

When he is with his girlfriend, he feels a falling away of desire which plunges him into a sea of doubts. He reproaches himself with a lack of sincerity towards her, and decides to leave her. The following day, he feels that he is burning with love and passion, and decides that she is the love of his life. He rushes off to find her, declares himself once again and the relationship begins again. He has repeated this cycle several times, until at last, it is the woman who puts an end to the relation.

To what does he attribute this fluctuating desire? To the fact that in certain circumstances he finds her 'not very feminine'. In particular he does not like her walk, which reminds him of a man's. J understands very well that this impression is due to the doubts that he feels about his own virility.

The mirror

J has a curious relationship with mirrors. He looks at himself in them all the time, because ever since childhood he has rejected his image. He believes himself to be ugly, excessively small and this complex makes him suffer. So that every relationship with a man is dominated by an extreme narcissistic tension, where the elements of desire and of identification always balance in an unstable manner without the aid of a symbolic mediation. He does not know if he looks at men because he likes them, or because he would like to look like them. He leans towards the second possibility, all the while thinking that it is perhaps a way of covering the fact of the first.

Until this point, the patient seems to be well within the clinic of neurosis: the return of the repressed, doubt, obsessions, compulsive behaviour, feelings of guilt, the conduct in the face of a love object, the incestuous link with his sister, all the signs more or less characteristic of an obsessional neurotic.

But that isn't everything. J explained to me that he had still not said certain things, and after a few detours, he gave me some new elements.

The fact is this: three or four years ago, when he was in a disco, under the effects of drugs, he saw himself in a mirror and he thought he saw himself with a woman's breasts. He himself could have easily attributed this to the effect of the drugs, if it was not that some time later, while driving his car without having taken any drugs, lowering his head, he had seen that he didn't have a penis. He could not clearly explain these facts. He did not know if he had really seen it, or if he had thought it. Perhaps he could have seen it 'in a fraction of a second', but in any case, it was sufficient to make him terrified that he would see himself transformed into a woman. He knew that that could not happen, but in spite of that he could not stop himself thinking it. In regard to this, there is no delusional elaboration, no how or when or why these things might happen.

At certain moments of extreme horror he begins to imagine himself dressed as a woman, or imitating the movements of women. Then he remembers a crucial scene from childhood where, at the age of 8 he was running in the playground of the school. When passing in front of a group of young girls, he had the feeling of being observed and had the impression that his movements, when he ran, resembled those of a girl.

In front of women he suffers sometimes from a strange specular inversion: he sees them as men, and he feels himself a woman. It is a sudden and momentary phenomenon that abruptly stops when he suspects the women can figure out what is happening to him. All this arouses in him a mixture of rage, anxiety, and impotence.

The organ

Since childhood he has had an obsession with his penis. He never manages to find the fitting place for it, and so he is always putting it back into place. When he feels anxious, he feels a 'pressure' in his organ, and also in his breast, as if it was in the process of growing. In speaking, he assures me that he considers this idea absurd and extravagant, but that at the same time, it imposes itself on him.

For some months, the fear that he would see himself transformed into a woman has lessened, whilst his preoccupation with homosexuality persists. One sequence of three dreams in the same night, accompanies this change:

First dream: he has a sexual relationship with an older man, a gardener who works close to where he lives. He points out that in the neighbourhood the local gossip was that this man has touched little girls in a sexual way.

Second dream: he has mutilated his penis, and sees it lying on the ground, in a pool of blood. He looks between his legs and realises that his penis has begun to re-grow.

Third dream: he and a friend make love with a porno-actress. On waking, he thinks that he was lucky that the face of that actress was not his sister's.

Finally, I can add that what he has told me so far of his family history does not reveal any significant element.

'I AM SO SUPERFICIAL'

Clinical Conversation with Jacques-Alain Miller²

The analyst — as we said at the beginning — has a problem of diagnosis. It is with this element of doubt that Gustavo Dessal introduces his case in a very simple style, very convenient as a starting point. In his paper, he gives clinical elements without any theoretical elaboration, and I quote: 'to enable a discussion which is not predetermined'.

And so, Gustavo Dessal brings us some material in which none of our usual constructions appear. He does not speak of *jouissance*, he does not refer to the Name of the Father, he does not mention the signifier, in short, he speaks in an everyday language. Of course, it is not a matter of depreciating our particular language, because it simplifies many things; I believe rather that we must never totally lose the connection between our particular language and that of the layman. It is true that sometimes our own particular language gets converted into a kind of scholastic which closes in on itself, and in these cases we lose its quality as an instrument. What we have to maintain in our clinical conversation, is the instrumental capacity of our letters: object *a*, - ϕ , etc. In the present case, there is none of that, but instead, an effort to describe the phenomenology of the case.

Trans-structural obsessions

The diagnostic choice is centred — as I have already said — between psychosis and obsessional neurosis. We observe that the subject presents specific phenomena of thought and it is there that we begin to doubt the clinical structure. This usually happens when the individual is subjected to one or several ideas that have a particular fixedness, and manifest themselves in an intrusive way; that is to say when there is a force that does not respond to the subject's own initiative, but rather to what we call the Other. A force which invades and usurps the jurisdiction of the interior world of the subject, and which can come to inhibit the normal function of the mind. When this happens, a way to elucidate whether it is a matter of a psychotic or an obsessive phenomenon, is to determine the intensity of the phenomenon around the fixed idea or ideas, i.e. if it has a partial character or if it falls on the whole mind.

There is sometimes something extreme in obsessional neurosis which seems akin to psychosis and which makes us doubt — in the clinic and in supervision — according to the intensity of the phenomena: according to criteria of more or less. The solution is more than taking up a position as to whether there is a continuum between neurosis and psychosis, because a belief in a continuum does not rule out a structural difference between neurosis and psychosis. But in practice, in order to be able to decide between the two clinical structures, we need to evaluate the intensity of the phenomenon, the more or the less. Let's say that for a structural differentiation we must sometimes make use of quantitative criteria.

On the side of the obsessional, we have two types of behaviour which Gustavo describes very well as 'repetitive cycles'. These are the pornographic cycle, and the one with his girlfriend. The repetitive pornographic cycle consists of the following: he leafs through some pornographic magazines in a shop and while doing so glimpses out of the corner of his eye the covers of gay publications. At that moment he believes he feels the beginning of an erection, which makes him flee the shop, terrified. A little later, he returns to verify whether or not the photos do excite him. He repeats this behaviour several times, showing that he is driven to an obsessional act propped up by doubt and consequently needing verification.

In the second cycle we are dealing with a repetition, but this time in relation to a love object: his girlfriend. This second cycle has in its turn two phases. In the first, he feels a strong passion for his girlfriend and in the second a falling away of his desire for her which is instrumental in plunging him into a sea of doubt and self-reproaches. This sequence repeats itself once and then again. Evidently this cycle of love and desire, with an internal defence against desire itself, leads us to think of an obsessional neurosis.

We can recognise too another bit of repetitive behaviour, which is moreover in the category of memory or screen memory: when he was little, before going to sleep, he banged his head against the pillows for hours and he supposes that it was a matter of punishment for the sin of masturbation. We therefore have a compulsive style in this subject since infancy where repetition makes itself manifest.

At the same time, we have a pseudo-hysterical symptomatology, which is the doubt about his sexual identity. This we should examine in more detail because it is not simply a question of knowing whether he is a man or a woman, it is something far more *sui generis*. Very often he finds himself looking at men — we have seen this in the example of the magazines — and at the same time, he fears that people will believe he is a homosexual. It is this that obliges him to develop a compensatory demeanour

where he adopts body movements which exaggerate the semblance of his virility. This fear is in relation to that which the Other might believe, the text says 'the fear that people will believe him a homosexual'. Then he reacts by exaggerating the virile masquerade. Consequently, something has appeared under the obsessional modality, the doubt as to whether he is homosexual or not, with the sense of repugnance and rebellion against the possibility of homosexuality.

There are these very important words: "he rebels and he does not understand". That is to say that these things come from the Other, they are things in which he does not recognise himself, he does not feel himself to be in harmony with this thought, but rather, on the contrary, it is something which motivates his rebellion. The rebellion in question reminds us of the indignation of President Schreber faced with the sexual desires of God in relation to him.

A prevalence of the imaginary

At the age of 18, something happens which is related to the gaze of other people, to which he becomes extremely sensitive. This is a period when he goes out a lot with his sister (10 years older than he). He goes to discotheques, he takes drugs. And also a judgement emerges upon his sister's loose life. At that moment, a strange fear emerges which expresses itself in a very particular formula, a formula which displays a kind of imaginary transitivity of the identity: *he is afraid that people will think the same of him as he thinks of his sister*, so that if he thinks his sister is a whore, then others might also think that he is one.

To what does he attribute the fall of his desire for his girlfriend? Gustavo tells us that it is because in those moments he finds her not very feminine, because the way she walks reminds him of a man. In other words we find something of the man in the woman, and at the same time in him, who is a man, we find something of the feminine. In short, the girlfriend is masculinised, and he is feminised. As if, faced with the two poles of sexualisation, the subject met with a kind of transitivity indicating a prevalence of the imaginary. Gustavo says it like this: "We see that the man has a particular problem with mirrors. He looks at himself constantly in them, because since his infancy he has strongly rejected his image". This seems to be a contradiction; he cannot stop looking at himself in the mirror but he feels ugly and therefore rejects his image.

We also see — in the first part of the presentation — that for him it is not the same thing to be faced by a man as it is to face a woman. In front of a woman, he feels himself absorbed, captivated by her image and identifies himself with her at the price of losing his virility. Faced with a man, he is afraid that he will like him, and at the same time he would like to resemble him. Faced with a man he experiences, in short, an extreme narcissistic tension. Gustavo formulates it like this: 'without the aid of any symbolic mediation'. Doesn't this affirmation place the subject on the side of psychosis? On the one side we have the symptomatological cycles of obsessive repetition, and on the other there is an imaginary transitivity around sexual identity, which seems devoid of any symbolic mediation.

And so, we come to the end of the first part of the text, to that which I designated at the beginning as a cut, which divides it in two parts. Gustavo says: 'until this point, the patient seems to be well within the clinic of neurosis'. Then, certain elements appear that the patient had not yet admitted. That often happens, in the first phase the patient watches the analyst in order to see if he is trustworthy, in order to see if he can tell him certain things that he is ashamed of. As a general rule there is a phase of observation of the analyst before the subject can decide to speak about intimate things.

I am thinking of a patient of mine who attended 3 years before he admitted to me that he was homosexual, three years to make sure that I could hear that statement. I must also say that during those three years I understood nothing of what he said, because, effectively, he spoke to me in order that I could not understand. As soon as he confessed all became astonishingly clear. He confessed his homosexuality, his obsession with his penis, and those of other men, and so began a kind of mutation in the treatment, where one could see retroactively that those three years had been nothing but a smoke screen.

I remember another example. In supervision I heard the case of a subject who said he was coming to see the analyst in order to resolve the continuous arguments that he had with his partner. But after some weeks, he confessed that at a given moment, he had felt a sexual attraction for a child. Here it seemed evident that the quarrels with his friend were completely secondary to the true motif: his paedophilic inclination, but that had been the way this subject found to build up an analytic relation.

In the case that Gustavo relates, we observe also this initial phase, which we could qualify as the negative transference, and which ends, finally, in an overture towards the analyst. Now, I ask Gustavo to

engage in conversation.

An elementary experience

Gustavo Dessal: Remember that the main admission of the patient centres around two events which took place some years before he came to see me. The first happened when he was in a disco and under the effects of some kind of drugs, he saw himself in the mirror and believed he saw himself with women's breasts. I say *ex professo* 'he believed he saw himself' because until now there is a difficulty for him to express exactly what that experience had been.

It is not clear whether it is a hallucination made worse by the effect of the drugs he has taken. I have tried with due caution to get more details about this and to clarify this phenomenon, but without much success. However, it is important to take account of the fact that this phenomenon would repeat itself later when the subject was not under the influence of drugs. Even for him, it is not clear whether this experience was a result of the drugs or not. Shortly after, he drives his car, and at a precise moment, he looks between his legs, and it seems to him that he has no penis.

Jacques-Alain Miller: We have to take into account the fact that he is dressed.

Gustavo Dessal: Exactly. I made a comment about that. I said 'By all accounts you were dressed?' He became very perplexed, as if he acknowledged at the same time the certainty of the experience, and its almost impossible nature. So, he doubts and he hesitates, that is his usual reaction in the face of a repetition of his experiences.

So, it is important to take account of the fact that his experiences do not produce any discourse, that is to say, there is no attempt to find a signification for them. The experience occurs, no more, and it generates an effect of perplexity and anxiety in the subject. But he does not go beyond it, he produces no elaboration, except something which is absolutely crucial in his reconstruction and that is the memory from childhood which has perhaps constituted the most fundamental mark of his story.

When he was about 8, he was running in the playground of his school. At the very moment when he passed some young girls, he felt two things: first of all the sensation of being watched, that the little girls mocked him; and then the impression that his movement, when he was running, resembled that of a girl. Don't forget that in order to try to justify his uneasiness in front of his girlfriend (who he perceives as masculine), he argues that the repelling thing with her is precisely the way she walks.

Jacques-Alain Miller: We often speak about elementary phenomena, but this is really an elementary experience: to be watched by another, in this case feminine and collective, and then to feel a strong captivation by the feminine even up to the point of being overcome.

A significant stumbling block³

Gustavo Dessal: Between the moment when I wrote the text, and now, there are certain phenomena which lead me to think of it as a case of psychosis. I qualify these phenomena as mimicry, and they make me think about the film *Zelig* (Woody Allen). *Zelig* is a fictional person who identifies himself imaginatively without any difficulty, adopting the form of whichever face or interlocutor he is confronted with. Our subject is in a disco, for example, he watches a woman and suddenly he realises that he is involuntarily imitating her body movements, including the movements of her lips, apparently repeating what she is saying at that moment. It all happens in a fraction of a second, because all at once he feels horrified by what happens to him and stops himself immediately.

Another very important thing is the commentaries that he makes about his genital organ. He says that he always has the impression that there is something that prevents his penis feeling comfortable, that his penis bothers him all the time. That is an expression which indicates precisely what is happening to him at the level of *jouissance* of the organ, that is to say, there is something uncomfortable at the level of the penis. That leads him to be constantly making movements to make his penis comfortable. For instance, he has to touch his penis in a compulsive way. It is important to notice that this exercise is not linked with masturbation.

It is worth remembering the three dreams that place the organ in the foreground. In one he sees that he has mutilated his penis and that it was lying on the ground in the middle of a pool of blood. But immediately he looks between his legs, like he did when driving his car, and he sees his organ growing again.

Jacques-Alain Miller: First, there was an other who was able to think pejorative things about him, and who was able to comment on these things about him. He also has an inkling that a collective feminine otherness could guess what was in his mind, that is to say, his sudden feminine identification. Final-

ly, there are many things happening about him in the place of the Other. We see in these traits one clear enough configuration.

There is a second point that I want to underline: it is not when faced with a man that he thinks himself feminine, but faced with a woman. In front of a man he feels homosexual, or menaced by homosexuality, and in front of a woman he feels captivated by the image of femininity, which Gustavo defines as a phenomenon of mimicry.

But, there is one more thing, an extraordinary specular inversion. He feels like a woman in front of the women whom he sees as men. It is extraordinary, that is really as if there were two fixed points, woman and man, and that he displaced himself between the two as a function of whoever is situated in front of him, in a transitivity which he cannot escape.

This specular inversion makes us think immediately of the mirror stage, because he sees before him an image of a woman and in a reversed way the image is in his place. This is more than mimicry, because mimicry supposes a relation with the *Umwelt*, as Lacan notes in *Seminar XI*. It concerns here a plain imaginary transitivity, a true phenomenon of the mirror stage without symbolic mediation, which would then point us to a psychosis. There is a doubt at the outset, because what appeared in the first place were thoughts. But as soon as one sees in detail the contents of these thoughts, the psychosis appears clearly.

From this point of view we can make a different reading of the obsessional symptomatology, of what we first called his 'pornographic cycle', i.e. looking at the magazines, feeling an erection, leaving in haste, returning to verify, etc. That is far more than an obsessional verification, it is effectively an obsessional behaviour, but the motor appears to me to be the trouble with his penis, the non-symbolisation of his organ which plunges him into permanent turmoil.

Perhaps it is this lack of symbolisation of the organ which induces the repetitive cycle with his girlfriend, where he feels the falling away of desire because she becomes virile whereas symmetrically, he feels himself feminine. Similarly, hitting his head on the pillow linked to masturbation seems to indicate the headache that the problem of the erection poses for him. I believe that we could conclude that the obsessional symptomatology of this patient is determined by his psychosis. Now I pass again back to Gustavo Dessal.

Certainty and belief

Gustavo Dessal: In the first place, I ask myself the following question. These phenomena which in the beginning have an apparently hallucinatory character, should they be considered as an effect of the intrusion of the signifier into the imaginary, or should they rather be considered as the emergence of the signifier in the real?

I tend to think that it concerns the emergence of the signifier in the real which produces an invasion of the body by *jouissance*. The important point, in any case, is that his subjective position is clearly dissociated, that is to say, the feeling of reality that he experiences at the moment when the phenomenon appears does not merge with his belief in this reality, since the subject shows all the time the absurd character that marks these experiences. Thus he will say: "This is totally impossible, this does not make sense" — when he refers to what is in his thought or what he sees in the mirror. On the other hand, it must not be forgotten that Lacan emphasises, in his Seminar on *The Psychoses*, that psychotics do not necessarily believe in the reality of their hallucinations.

Jacques-Alain Miller: There is a certain incredulity regarding this phenomenon, but it does not prevent certainty, nor the division of the subject. It is a pity that we do not have the time, but it would be very interesting to articulate certainty and belief in relation to hallucinations, since even if this seems paradoxical, certainty can be compatible with disbelief.

The phenomena in the case of this subject began at the age of 17 years, but at 8 years the phenomenon of captivation took place which is here the starting point. We only know Schreber at the point of triggering, but we know that there are antecedents and perhaps there had been some episode when the girls looked at him, that we do not know.

Gustavo Dessal: The difficulty in this case — and its difference from President Schreber — is that there is no delusional efflorescence which, for me, is a concern because the subject is in a very desperate position and I fear that a *passage à l'acte* on his part must be possible.

Jacques-Alain Miller: Is he still desperate?

Gustavo Dessal: He is still desperate because these phenomena do not stop reproducing and have even intensified. Another point which seems to me very important to discuss, is the status of the

phallus in relation to the embarrassment of his organ — as he himself describes it. I think that it is necessary to confront this with the dream of castration — which could lead us to discuss whether dreams can contribute something to the differential diagnosis. But what draws our attention in the dream is not so much its frightening content as the absence of a dream-like distortion.

Jacques-Alain Miller: I remind you of the sequence of three dreams which is at the end of the account. In the first dream he has a sexual relation with an older man, a gardener who works near his home. In the second dream he has mutilated his penis and sees the organ lying on the ground in a pool of blood, then he looks between his legs and notices that his penis is beginning to grow again. And in the third dream, he and his friends make love with a porno actress and in the dream he thinks that he was lucky that the face of the actress was not that of his sister.

An elementary transitivity⁴

Gustavo Dessal: Another aspect which has also been mentioned by Jacques-Alain Miller, is that the relation the subject maintains with reality is structured around narcissism, like a see-saw between the ego and the ego ideal. About this point we cannot fail to mention the function that the *imago* of the sister has had in this respect. Concerning this we can say that the patient placed himself in the shadow of his sister, something rare in the case of the man towards the woman, so much so that for years his life revolved round that of his sister and he was not able to separate himself from her until he became acquainted with his girlfriend in the environment of the discotheques which he frequented. When later there occurred a rupture with his girlfriend, there was a fresh outbreak of the imaginary phenomena in the register of mimicry — as I called it — that is to say in the register of the specular transitivity. I think that we can conclude that for this subject we do not have an effective symbolisation of his desire.

On the other hand the masculine position also supports and maintains itself at the level of the ego. His ideals are to marry, to have children, to establish a family and to be a normal man, like everybody else. He says all the time: 'I am very superficial'. He says this because he considers himself somewhat frivolous to be so preoccupied by the image which he presents to others, by his speculations as to having more, or less, the aspect of a man, etc. It seems to me that this expression 'I am very superficial' gives the measure of the status that the function of the ego has in this case. But we must ask ourselves about his sexual identity in the unconscious, and there one can suppose a *Verwerfung* of castration which returns in the real in the experience of the negative hallucination, that is to say when he does not see his penis; that reappears also in the dream.

Here it is important to indicate the ambivalent function performed by his girlfriend. On the one hand she allows him to exercise a certain imaginary capacity, but at the same time she destabilises him — which would explain the successive cycles of abandonment and return. For example, after having been a little while with her, he cannot sustain his position and he withdraws, but then, he feels anew the necessity for the support which she gives him, for this orthopaedic support which constitutes the *imago* of his girlfriend.

Jacques-Alain Miller: This sentence is wonderful, 'I am very superficial', I must say that for me this sentence ought to be the title of this work, because it really expresses his position, which is to be at the mercy of the feminine Other. He is a superficial being because he glides on the imaginary surface, on the pure captivation of the image. That is why it is very difficult to know his sexual identity in the unconscious, because his identity is suspended by the captivation which the feminine image exercises, and when he is confronted with men, what arises is homosexual fear. Finally he does not have a fixed identity because there is something in him which alters according to the face which he has in front of him. He defines this transitivity that he experiences in terms of 'being superficial', a *ser* which is rather an *estar*.⁵ This 'superficial being' is perhaps the most paradigmatic element of this case. His transitivity is something very pure, very elementary, and there is no delusional construction about it.

Gustavo Dessal: Another point to emphasise is the question of his ugliness. We know that the inferiority complex is something that we very often meet in the neurotic and it does not seem to be the case here. Here we have two points which seem to me fundamental. On the one hand the feeling that the subject has of having all the time endured this experience and on the other hand the fact that the negative subjectivation of the image has not been possible. The ugliness does not seem to be situated in relation to the castration complex, as in the neurotic.

Jacques-Alain Miller: You have located the complex of ugliness very well in this case. We encounter it also at the outset of Mariasun Landa's case and in Manuel Fernandez Blanco's case. In the

latter, despite his megalomania, the subject identifies himself with a child in Dickens, who is an ugly child. We have therefore in three of these cases what Gustavo Dessal calls a negative subjectivation of the image.

If we speculate a little, we can suggest that this is something which might well have been present in Schreber's youth, the echo of the phrase 'it really would be beautiful to be a woman submitting to intercourse', as a compensation for what would be ugly in his life, for instance to administer punishments as a judge, i.e. perhaps under that 'it would be beautiful' is the delusional ugliness, a delusional certainty about his image which has nothing to do with neurotic disgrace.

Mariasun Landa's patient finds beauty in exercising his body, in playing sport, in gymnastics, in aerobics, developing a feverish activity in order to achieve beauty by voluntary transformation.

The image detached from the body

Gustavo Dessal: I haven't mentioned it in my text because it has occurred very recently, but there is another phenomenon that I have not yet commented upon. This happens at the moment of waking up in the morning, when he feels that his body doesn't obey him at certain moments — it doesn't always occur. He has the impression that his image detaches itself from his body, as if he had it in front of him. For an instant his body doesn't obey him, but then there is a recomposition of the *ego*. There is here a reference to the 'astral body'. I must confess that hearing this formula filled me with enthusiasm, because I thought that perhaps we were at the threshold of a new phase where a delusional efflorescence could be produced. But I was disappointed because it didn't go any further. He simply added that he had read it in a book.

Jacques-Alain Miller: But the best delusions usually begin with a book...

Gustavo Dessal: It could indeed be the case of an enlightened delusion, but this didn't happen with our subject. He sometimes has difficulty in getting to sleep because of the fear of waking up and the fantasy of finding himself changed into a woman.

The last point that I want to make is about the way our subject speaks, that is to say, about his position in the discourse. In spite of these phenomena, this subject gives the impression of being perfectly coherent, which does not prevent us from having the impression that it is the case of someone who has cancelled his subscription to the unconscious, that is to say, who does not have at his disposal the retroactive effect of signification in the signifying chain, and it is why he speaks in a superficial manner — exactly as he describes his being. At the same time it seems impossible for the time being to find any salient element in his history, his past, parental figures, etc.

Also I want to flag up something that surprised me; it is one of his commentaries on the third dream. In this dream he appears in the company of some friends with whom he is going to make love with a porno actress, and on waking he thinks that fortunately the actress didn't have the face of his sister. In a way, it seems that what is operating here is the mechanism of negation, by which the porno actress would have been the sister in the unconscious. But the use of negation poses a problem if we favour a psychosis. I put this as a question.

Jacques-Alain Miller: Let us offer it now to the floor.

Antoni Vicente: There is a disturbing element in this case, the complete absence as much of the father as of the mother; everything is played out in relation to the sister, which poses a question. I think also that it is the sequence of the three dreams that leads to confusion over the diagnosis, because the dreams give the impression of being the result of neurotic mental work. They seem near to structuring themselves in a sequence where there is an instant to see, a time to understand, and a moment to conclude. If these were the dreams of a neurotic they would have opened up a recollection of the infantile neurosis, which has not happened in this case.

Some years ago, Estela Paskvan presented a clinical case in which one of the most beautiful castration dreams appeared that I have ever heard, where the father, the mother and the veil all had their place. In this case, there is nothing like that. I would underline several points: in the first dream we see the ambiguity of the narcissistic position, on one side of the mirror or on the other, where he is the gardener or the little girl who is seduced. In the second we could imagine that this penis that re-grows corresponds to a fantasy 'time to understand'⁶ something of his penis. In the third dream, there is no conclusion but, in the same way that Freud appeared in the dream of Irma's injection, the subject is surrounded by a group of friends through which it seems possible to reach the woman, but the presence of the sister blots it out, or makes the subject step back a pace.

