

Performance as Annihilation or Integration

The Annihilation of the psychoanalyst

Joachim F. Danckwardt and Peter Wegner

(Final version accepted for Int J Psychoanal 12 October 2006)

What happens when the analyst has the impression of being annihilated by the patient? Analysts have a tendency to use more general, i.e., simplifying constructions such as destructiveness, psychosis or death instinct as explanatory models. In the authors' view, these constructions in the end evade rather than mirror clinical reality. More recent research points to promising possibilities of differentiation, e.g. psychotic mechanisms which are-as yet undiscussed-based in Freud's notion of the partial „rent in the relation between ego and external world". These findings emphasize the restitutive function of a symptom or disturbance, that is, destruction of a relationship which hinders the therapeutic process and which is not understood initially, instead of solely stressing the destructive meaning in a tabooing gesture. The concept of Performance attempts to replace simplifying models with a discriminant process, and will be preliminarily defined and explained in delineation to terms already in use such as acting out, enactment, role responsiveness. The paper explores the question of how the perception of unthought certainty in the Performance can either be recognized as a blueprint, i.e., organizing activity, or as the destruction of the relationship so that new one can emerge. The evidence from a detailed clinical example shows that many treatments can fail at this point and demonstrates how an understanding of performance in this sense offers a chance for integrating processes that otherwise impede treatment.

Predicting the effectiveness of psychoanalyses in cases of severe personality disorder is possible only to a limited extent. This is also true for the type and degree of aggressive-destructive conditions as they begin to unfold, as well as the responsiveness to the psychoanalytic process itself, even given that our skills in determining the indication for psychoanalysis and our knowledge regarding the "subjective indications", i.e., the "fit" between analyst and analysand, have increased considerably (Dantlgraber 1982; Wegner, 1992; Danckwardt & Gattig 1998; Danckwardt 2000; Kächele & Kordy 2003).

In this single case study we follow specifically the prominent role of destructivity. When analysts are caught off guard by destructivity during the course of treatment, there is a tendency to stress the degree of the aggressive-destructive disturbance as being a defence against psychosis. If this is so, are we dealing then with manifestations of the death instinct, a subject which has been controversial among psychoanalysts since Freud (Freud 1920g, 44; M. Klein from 1932) or the covert workings of psychoses (Freud 1914c)? Then there is the question of differentiating these alternatives, of the various "organizing activities" (Loch, 1968), which have yet to be sufficiently worked out. As far as we are aware, Sabina Spielrein was the first to pose these questions in her 1912 paper "Destruction as a cause of coming into being".

Why do our concepts of destruction quickly become attributed to the "psychoses"? It was always a special feature of psychoanalysis not to regard phenomena that hinder the therapeutic process as simply unresolvable, but to further investigate them. When Freud was asked what allowed him in his *Dream book* to decipher dream-distortion in particular, he answered that he tolerated the superego anxiety and continued to think in spite of it: "I believe what enabled me to discover the cause of dream-distortion was my moral courage." (Freud, 1923f, 263). Beland added to this: "If Freud tolerated the moral paranoid anxiety, then Melanie Klein tolerated the depressive anxiety and Bion the anxiety of becoming insane,... the worst type of separation anxiety, [which he] placed at the center of developmental problems [and thereby] became the great psychologist of psychotic communication... the discoverer of basic processes of normal thought" (Beland 1999, 69). This was the courage that made it possible for psychoanalysts to realize that processes directed against healing are also in the service of balancing and stabilizing the ailing ego. Therefore more recent thought is no longer centered around speaking in terms of manifestations of an assumed psychosis, but rather in terms of the effects of specific "psychotic mechanisms" (Hinz, 2004, 51-54), in place of the death instinct, "destruction in the service of creating" and of the predominate mechanism of "performance" (Danckwardt, 2004).

Conceiving of it in this way implies that we are not describing new syndromes, but rather specific processes within those already known. The focus is on the varieties of the loss of reality in neuroses (Freud, 1924e). Since the therapist acts as the representative of the external world, the destruction of the connection affects him directly. Moreover, he is annihilated in a couple of ways: destruction and the loss of reality affect him not only as the representative of external reality, they affect him as the representative of the analysand's internal reality at the moment that the patient projects it into the psychoanalyst. The patient then has extended a part of his internal reality through projection within the transference to the therapist, so as to then destroy his connection to this part, that is, to undo the connection through a loss of reality: firstly, as a rupture in the connection of the ego to the external world; and secondly, as a rupture in the connection of the ego to the internal world which has been projected.

This formulation of a "disturbance in the relationship between the ego to the external world" comes from Freud (1924b, 150). In this understanding we are dealing with a rift ["Einriss"] in the function that regulates the ego's relationship to internal and external reality, but not with a break. Therefore, it is clinically meaningful and correct to speak not of psychoses, but rather of psychotic mechanisms. Freud presumed it must be a "mechanism, analogous to repression". This presumption is based in a drive- (and therefore wish-) psychology. The mechanism must "like repression, comprise a withdrawal of the cathexis sent out from the ego" (Freud 1924b, 153). All psychic regulatory systems which influence linking are called into question regarding their psychotic mechanisms. Riesenberger-Malcolm (2004) describes for example the meaning of excessive forgetting of contents, Wegner (2004) describes the melancholic triumph and Hinz (2003, 2004), what he called the smallest piece split, as a form of the removal of important links in the ego and assumed them to be psychotic mechanisms "in the strictest sense".

What is restitution?

Freud's view that symptoms represent not only signs of illness, but simultaneously the autotherapeutic restoration of health, seems to have been forgotten. Freud borrowed this concept implicitly from physical medicine: following an injury, the skin shows the consequent symptoms of inflammation, pain, redness, loss of function, not merely as a sign of the injury, but as a sign of the healing process as well. As a rough analogy, Freud recognized, for example, that the tormenting certainty of being persecuted can not only represent an insane projection of one's own aggressive-destructive responsiveness, but that the symptom must also count as an attempt at restitution. It is an internal image that is converted into a perception of the external world. The patient can rally against something external, while an aggressive-destructive impulse directed inwardly must remain diffuse, insistent and without a narrative. Freud stated further that with the idea of being persecuted, the rift is covered by a "patch" so to speak (Freud 1924b, 150). With this "patch"-as symptom-the connection to reality is reestablished. "What we take to be the pathological

product" writes Freud, "is in reality an attempt at recovery, a process of reconstruction" (Freud 1911c, 71). The patient must keep himself from knowing that because of the disruption caused by the tormenting certainty of being persecuted, the effectiveness of his own attempt at cure, which was his autotherapeutic response to the illness, is denied to him.

We have identified various processes by which the destruction of the therapeutic connection is set in motion and supported. Other processes were likewise investigated, e.g., the effect of *Nachträglichkeit* (Eickhoff, 2006), various processes of identification accompanying the formation and maintenance of an internal destructive object (projective identification, Klein 1946; extractive introjection, Bollas 1987; process identification, Danckwardt, 2001a, 409-412 and 2001b, 24f and 30f), the effect of identity resistance (Schneider, 2005); the blocking of unconscious countertransference communication (Danckwardt, 2005b).

What is performance?

What do we mean by "Performance" and how is it related to an "attempt at restitution"? Apart from the fact that the phrase "attempt at restitution" is an old, perhaps forgotten concept, a few fundamental remarks ought to be made to introduce new terms and their function. Klüwer (1983, 1995) described in two studies concerning "acting out and co-acting out" that alongside the more than 100 years old psychoanalytic term "acting out"-that is, action in the place of thought-new terms must be added. The development of contemporary psychoanalysis has actually not freed itself from negative, pejorative and superego-imbued semantics, though Freud, in the Afterword to the Dora Case (1905e [1901]) was already considering the positive aspect of acting out (Freud 1914g). Anna Freud (1968, 2455) worked out a particular aspect of the repetition compulsion in acting out: Acting out is the "repetition of the past in behaviour, but one on which the analytic rules are imposed. [that is, the patient's acting out is restricted to the re-experiencing of impulses and affects, the re-establishing of infantile demand and attitudes; but it is supposed to stop short of motor action..." [Which should] "...on the one hand it safe-guarded the continuance of analytic work in the face of resistance: on the other hand it opened the door for the re-emergence of the material from deeper layers of the personality. Resistance and (acting out in the) transference thus became the mainstays of the analytic technique." Consequently, various aspects have been worked out: Acting out is the service of "working through" (Limentani 1966; Greenson 1966); the "transformation of the transference" (White 1992); and one of the "component parts of the psychoanalytic process" (Boesky 1990). These aspects cannot be simply subsumed under "benign acting out". The term acting out has become increasingly overburdened and there is the search for a new term. For example, acting out as "playing in potential space" (Winnicott, 1971); as "actualizing", i.e., transforming something into actual facts (Laplanche and Pontalis, 1967) as well as "communication" and "enactment" of unconscious strivings (Argelander, 1967 und 1970; Lorenzer, 1970); as enactment of "early childhood neurosis in the form of action" (Loewald, 1986); as enactment of the "archaic matrix of the Oedipal Complex" (Chasseguet-Smirgel 1990); as "scenic understanding" (Argelander, 1970; Lorenzer, 1970); as "role responsiveness" (Sandler, (1976); as "an enactment", that is, an entanglement (Jacobs, 1986 and 2001; Fingert Chused, 1991); as a "dialogue in action" (Klüwer, 1983 und 1995); as "action thought" (Bush, 1989); and finally also as "Action substitution for verbal communication" (Greenacre, 1968). All of these variations in meaning incorporate positive sides of acting out and signal the further development of the therapeutic concepts. They provide for improved "armour and equipment" (Freud 1941d, 179) in psychoanalytic treatment. While classic psychoanalysis is aimed at the lifting of repression and the integration of memory and affect by means of verbalization, contemporary psychoanalysis has, under pressure of the growing influence of the staged and visual, broadened its orientation to include the lifting of denial and integration of perception and affect. If "acting out" can be understood for example as "scenic understanding", then it leads not only to a better comprehension of the patient's psychodynamics, but also to a more comprehensive treatment technique.

The term performance is common to those artistic representational forms, that is, art as action, in which

spectators are pulled into the artistic process and into the creation of art works in the here and now, and used like colours and forms as material objects. Spectators are included as part of the art work, even indispensable to the artistic process. The terms performance and enactment are lexically similar-they mean "to put up on stage". The term enactment has attained a secure place in the development of clinical psychoanalytic theory through Jacobs (1986) (Fingert Chused, 1991). In contrast to the emphasis on "becoming pulled in" through the countertransference in an enactment, performance refers to yet another form of production. The analyst is not only pulled in as a spectator, i.e., as a participant identified with its tentative nature, in an enactment he is pulled into or entangled within the transference/countertransference as a spectator, and forced into a role in an unconscious script of the analysand that already exists. In a performance, the analyst is included as "material for the show" and as a "material object" (Danckwardt 2001a, 2004, 2005a). In a performance the analysand borrows from the analyst those component parts which the analyst normally requires for his functioning-and to that extent the analyst is annihilated. The art historian Winzen (2004, 47) understood Alexej Koschkarow's surprise performance of attacking spectators with tortes as the "psychic introspective ability [of the artist] turns into a projection onto external objects". For this increased access to psychic introspection the external object, the spectator, must be made into a material object and then exploited.

For these reasons, a performance begins with the transference of what is psychically "not quite realized" and therefore works on a presymbolic level. In contrast, artistic production and enactment work between verbal-discursive and image-perceivable symbolic forms (Langer, 1983). The analysand must create the suitable narrative building blocks for the presentation of his internal urgency on and within the therapist, gather them up, and then, develop a kind of interpersonal iconography from them, just as a voice searches for a larynx it can occupy for its production. By such processes of realizing this selection of narrative building blocks taken from the analyst, the analyst can often feel himself to have been devastated and robbed temporarily of his functioning. He doesn't recognize himself, is not longer able to identify known objects in the analysand and feels himself as if emotionally colonized. To put it another way, psychoanalysts become depersonalized to the level of part object. In a performance the therapist is confronted with his destruction and being remade for purposes of exploitation. This is exactly what is described clinically when Hinz (2004, 51f) speaks of anaesthetising, smashing and disposal. In addition to disposal, in our formulation we add exploitation. The analysand not only empties himself, but also exploits himself as well in that he reintrojects. In enactment we are dealing with a particular method of information processing and communication (cf. Wegner, 2000). There the level of a two-person psychology is employed-there is a dialogue in action. A performance rather emanates out and into the analyst. In a performance, a one-person psychology and a monologue in action prevail. The analyst is forced into a psychological regression.

There is the question of whether we are not actually dealing with unfiltered destruction, a manifestation of the death instinct. On the basis of our clinical material we are of the opinion that even descriptively destructive events can be understood as designed, that is, as "organizing activity[ies]" (Loch, 1968). In reference to artistic processes it is not hard to see that the shaping and production processes can, first through the destruction of known interrelations or material, arrive at a creative and new result. The pieces of material the patient borrows from the analyst by the patient would be accordingly seen as indispensable to the analysand in the destruction or provocation of the relationship, in the service of creating it anew. The analysand makes use of the analytic situation with which to shape the developing ego and for the development and realization of an object relation. The analytic setting (including the place, time and person of the analyst) is the material for the evolving ego and the development of an object relation. The analytic situation is then a kind of narrative break in the basic links between beta elements, alpha elements, dream thought, concepts and preconceptions (cf. Bion, 1987).

A cumulative opening scene as "performance"

The identical opening scene (Wegner, 1992) occurred between Mr N and his analyst over many sessions,

which, in its persistent, relentless manner, gave the impression of a common repetition compulsion. Unprotected, the analyst felt himself to be overlooked during the greeting-obiterated, submitting to unknown dynamics. His accommodating attitude was annihilated, in order to then-as if remade by Mr N-temporarily be brought back into functioning. The analyst felt himself to be firmly held in place as it seemed, as if one false word or gesture could provoke an outbreak of violence.

Session after session, after having opened both doors, I reached out and offered my hand to Mr N in a friendly and expectant manner as I saw him approaching me. However, my gesture was for naught-my outstretched hand sank slowly and uselessly down, while Mr N turned on his heels as if in slow motion to carefully close the outer door. Turning toward me once again, his eye scanned widely over my desk, the windows facing outward, the couch and my chair, and as this greeting sequence created a safe closeness, he offered me his hand himself while sharply fixing me in his gaze.

The first part of the performance annihilates the analyst. He is nothing and is treated as such. The second attempt at greeting allows the analyst to come into existence, though still not recovered from the shock of having been annihilated, he struggles to find himself and his affect. The analyst is overpowered and must repeat this experience against his will at the start of many hours. The attempt to formulate an interpretation from what he could rescue from his countertransference includes the danger of countering the analysand in such a way that he himself is annihilated, that is, overpowered. For the patient, the performance involves his risking the conditions which destroy his opponent in order to be able to find his way back to the real world. Another opening scene in the entryway, repetitive and different in detail, is described by Jonathan Lear. It is in contrast to this one in that it is an example in which the analysand and the analyst are able to play through a variety of interpretive-meaning possibilities from the start with each other, without seeming to restrict the normal functioning of the analyst. Moreover, it presents "... a kind of elaboration of fantastic-emotional experience" (Lear, 2000, 308).

A performance, with its interpretive levels and its sequential nature is not directly accessible to intuitive reflection and therefore a spontaneous decision regarding the suitability of an interpretation or action is difficult to reach. The analyst accordingly withholds all would-be protective or confronting interpretations. More importantly, he was successful in finally taking on the performance, molding himself to it and seeing it initially as a non-understandable event. This occurred because he allowed himself to follow the patient's rhythm and contrary to his usual manner, offered his hand only when the patient had found a safe closeness.

In Mr N's view, having never spoken about this greeting, the cumulative opening scene as a performance might have the following meaning: He arrives internally fragmented and agitated, driven and persecuted-his existence is threatened. For him, just lying on the couch is an intolerable submission. The reality of great danger which he suffers outside ought to be tolerably lessened inside the therapeutic room as he otherwise fears that he is internally at the mercy of a protective dangerousness and thereby loses his last hope for a trustworthy object to protect him. He must therefore be sure that massive barriers between internal and external are erected and all doors are tightly closed. The rupture between internal and external that results through this process is so very threatening as he loses contact with reality as a consequent. He fears it to such an extent, that closeness without a boundary-which he also longs for-makes him feel vulnerable and defenceless: Annihilation of the other, thereby preventing intrusion from without and leakage from within, to allow for a safe closeness..., could be the internal sequence which Mr N cycles through unawares.

Besides the cumulative opening scene as a performance, Mr N shaped other sequences within and around the sessions performatively: He often sat up from the couch abruptly, at the beginning, the middle or end, sitting on the edge of the couch and spoke directly to the analyst. He could shout loudly, accusingly and despairingly, tear at his hair and beat the couch. He had masturbated in the car before the session and uncontrollably urinated in the office lavatory before or during a session. Just as the analyst was

momentarily subjugated by the opening performance, unable to anticipate its repetition, during the sessions, the patient, because of the his excitement and tirade, often became overwhelmed, his words-which were punctuated with many cutting vocal fillers-hacked at him painfully and bored greedily into him.

A reflective state of mind was impossible, even-hovering attention did not exist. There was a rupture between the analysand's internal world of refusal and horror and the analyst's presence of wanting to understand. But the cumulative opening scene shows that the analyst takes on the analysand's state of being overpowered: he is to share it and thereby initially contain it, so that, in him, understanding could pave the way for what was needed to uncover the wishes whose fulfilment remained denied to Mr N, like those he had experienced, but could not yet think. To say it another way, with the analyst's "countertransference that ran ahead" went hand in hand a "modulation of the countertransference" (Wegner, 2004), that is, the awareness of differentiated contents in the countertransference which enabled the patient to experience himself as agent and not alone in his experience of being overpowered. At the same time, the analyst struggled to maintain his receptive presence, even if rendered ineffective or maintained by a vague hope.

Course of treatment

In addition to the modulation of the countertransference in the process of becoming aware of the cumulative opening scene, the material was enriched along the lines of being overpowered and castration anxiety: the death of a sister shortly after birth and a mother who completely fell apart; his father was a prisoner of war and tortured; Draconian punishment at the hands of his father for his failures and finally a self-imposed sterilisation at the age of 22. Somewhat later, after an argument, two men anally penetrated him with a plunger.

Following the death of his father the patient broke down, because everything he built professionally was successful because he did it in opposition to his Father. He began to dimly realize that his mother's boundless grandiosity and generous strength were fragile. In fact, contacts with his mother usually ended in an emotional disaster which held Mr N for several days so much in its grip, that he completely neglected other business and his relationship with his wife. One could say that mother and son were caught up in a kind of insane dialog and there was nothing to separate them and save them from their enmeshment. On several occasions he made the statement: "There again we put on a crazy performance."

It slowly became clear to Mr N that he had lost his "father's protection (Freud, 1930a, 72)...a 'need' to which Freud accorded highest importance. Protection here refers ...primarily to the affirmative function of the father with respect to the child's relationship to its mother, which Freud expressed by seeing it it a counterweight to a 'limitless narcissism' and the 'oceanic feeling' with its denial of the reality principle" (Loch 2006 [1993], 39).

In this respect, a few concrete changes had taken place. Mr N wore a wristwatch, he kept a calendar, took care of his office business and carried a wallet for the first time. The fact that he could eat with his wife at the dinner table improved their relationship appreciably-previously he had scavenged his meal secretly and hastily from the pots of leftovers while standing in the kitchen.

Two sessions

On this Friday (session #357) Mr N was beside himself. He could not lie down, shot up with his upper body, cried, spoke loudly and was tremendously rageful at his mother. He came to understand from her that she intentionally degraded him and wanted to drive him mad. I was very passive during the session and inwardly concerned with the question of whether the intensification of his rageful feelings against his real mother was not an expression of his anxiety of being greedily sucked dry and overpowered by an

analyst-mother. This connection was obvious because the patient was firmly convinced that his mother could destroy the analysis by "cutting off the flow of funds". Past experience had shown that Mr N was not able to really take in such interpretations. This time he was quiet for a while and asked me to repeat my formulation: "I'm sorry, I had a buzzing in my ear. I was not able to hear you." I knew that if I remained quiet for an extended period, he would become upset with a mixture of anxiety, rage and confusion, as if he had lost me forever. In this session he started to speak before I did and suddenly said: "And you, have you gone already? Not interested anymore?". I answered: "You are completely occupied with me, but don't know what is going on with you!" After a short pause, he laughed and said: "It's odd-a dream from last night just came back to me, a disgusting dream."

I buckled my nude, flabby mother to some kind of armchair and tilted the chair on its back legs against the wall. I stood in front of her and slapped her. I have to admit it was a very good feeling. But the funny thing was that her face slammed against the wall from left to right. Her head was as if split down the middle-her face had two sides: in front was my mother's face and in back was a kind of bird with a long beak that was your face. With one slap I saw my mother's face, with another, I could see yours. Somewhat irritated and hesitating I asked Mr N why he was hitting me. He didn't understand! Finally he said: "Without you it's over for me!" I answered: "Exactly. Just as you supposedly still today need your mother to survive, and it is precisely this that provokes anxiety and rage! Obviously I have fallen into the role of your mother whom you needed, but from whom you have not received what you deserved, nor even enough." What remained uninterpreted was why he was not able to achieve internal separation from his mother. Presumably because time and again, he was disappointed in himself.

Mr N left the session reluctantly when it had finally come to an end. The dream confirmed the suspicion that his increased upset and confusion had to do with a bit of destructive mother-transference, which he denied up to now. This transference component troubled him to the extent that he was not successful in getting a hold of regressive tendencies and anxieties of self-loss in relation to his actual mother. As such, I became the analyst-mother who threatened to abandon him and tormented him with his dependency. The projection of violence into his mother, viz. into the analyst-mother, drove him to "buckle down tight and strike at" the external threat. Two further dreams come from the next session, number 358, following the weekend break:

And this aura built up like a vapour, like an odour which built itself up...like steam coming out of a loudspeaker, into this scene ... like a second reality! And then I somehow get the roles all confused, somehow...then just one person was standing in the foreground, that, a woman, who had my mother's features, an English woman... I don't now what... probably an Indian woman? Because...in any case... then I raped the woman...tortured...with red-hot pincers the nipples off. Everything very vivid...ripped out teeth!

"Somehow everything revolves around my mother and I simply don't understand. There must be an end to this. I mean, I haven't had anything to do with her now which could have provoked it..."

I make a brief remark to the effect that the dream may well be confronting him with his internal experience of her mother, and the patient continued:

"And then there was somehow...could you just imagine? Perverse...somehow perverse, really...I dreamt of my own suicide, but how!"

Took the gun into my mouth, a pistol...a pistol pure and simple, pulled the trigger, and then the whole top of my skull was blown off! But then, I had forgotten to write the suicide note! I stand up, normally, bleeding profusely, everywhere blood...the shot-off skullcap...I search for a piece of paper. And...find the largest puddle and... swirl my index finger around in it and write on the piece of paper:

"In Love for You, Mama" (laughs mockingly).

Mr N formulates that he may well be the horrible feeling that destined him to be victimized and overpowered: "By and large I would say that the violence is directed either against me or against my mother!"

I responded that he staged his suicide in the dream for his mother: "In Love for you, Mama."

Then he speaks of a powerful sadness, feeling so boundlessly bad and of his dependence on his mother. On the other hand he experiences his mother's torment "shockingly, as being set free."

I suspected that the tormented, raped and maimed internal mother could be read as his feminine part, by which, he presumed, originally vulnerable and unprotected, he was at the mercy of being overpowered. His frightening and liberating act of completely destroying this part might correspond to his wish of not being subject to attack, vulnerable and dependent.

A sequence at the end of the session leads to a refinding, that is, invention of his girlfriend, that is, the analyst-girlfriend in the transference:

Analyst: One might say that your dependency, your neediness as a child to take something in, to receive something-which you posted as guilt-you would like to be rid of and you therefore pursue all your feminine-receptive sides which then were no longer available to you...while taking in intellectual nourishment, listening, studying, etc... From this point of view, it is not your mother, as depicted in the dream, but rather that part of you, by which you are made to feel so excessively overpowered and guilty."

Mr N: Hmm...

Analyst: "You are so sad and desperate about it. Especially when even here you can only secretly, in haste and without rest, pick at intellectual and affective nourishment, when you can't listen to me, can't simply understand me, and the unsettling greed became increasingly demanding."

Mr N: (moans)

Analyst: "Your neediness seems to overpower you and you have tried your whole life to be rid of it in a variety of ways, to mock, humiliate and torment it. In this way you could neither receive love nor take care of yourself and learn something new. You never were allowed to be found possessing something: always fleeing from guilt."

Mr N: (crying) "...What also makes me anxious...that is a life-affirming surge of feeling...which is large and overpowering and was...and therefore it is laden with great anxiety...and on the one hand because it is so powerful, it can't be shaken or that I end it...and on the other hand is the anxiety of what I am not aware of! This constant way I feel toward life...what I am aware of and all the other things that are so foreign and unknown.

Analyst: "What is unknown is that you are entitled to a life of dependency and neediness.

Mr N: "My girlfriend even has such an idea...I think that if she were to leave me, then I would not be able to tolerate living...It is completely odd and that is completely new, this feeling is completely new: I'm simply doing better when she is there, simply there! And this sadness is easier to bear, when she is simply around me!

Discussion

The process of performance in the cumulative opening scene, accompanied by the analytic work in the

sessions, made it possible to preliminarily formulate the intense humiliation by his father as: "In the end, it always came out that one way or another I do everything wrong."

His childlike curiosity and the wish to win over his father were shattered. He felt overpowered by a strict and demanding father. His helplessness and the death of the penis-less sister predetermined his fantasies from then on in the form of castration anxiety. Identifying with the aggressor, time and again he actively avoided being vulnerable to entering into an overpowered state. The ongoing discord with his father began with the injury to his grandiose phallic narcissism and his active refusal to succeed which resulted. In the sense of *Nachträglichkeit*, his sister's birth, which he experienced as his being overpowered, her death, and the psychic loss of his mother, who certainly even before never felt able to come near him, became a compounded trauma of early primary object relations. The rift between the ego and reality was interpreted retrospectively, albeit in a psychotically distorted manner, that he did not exist, since he did not exist for his mother from birth. The existential experience of not being taken in by his mother and to exist in a void, persisted and showed itself in the performance as a creative attempt at coping, until it could be firmly established that the analyst-mother actually wished to approach him. At the same time, his active efforts to be sterilised were a performance designed to horrify and exclude the analyst-father on the one hand by ignoring him and on the other by displaying his castration. In this way in his dreams, Mr N became a castrator dominated by psychotic mechanisms.

His entire adolescence was marked by repetition compulsion, including the sterilisation as performance, viz. the phantasy of a self-castration that could do away with anxiety-which also in reference to procreativity was a stage circumvention, "to do everything wrong". The sterilisation too, already had the character of a performance: "The young man pushing the doctor into an insane act."

And finally, the anal rape, which injured Mr N unimaginably and certainly contributed to an enormous hardening of his counterphobic presentation, by which he attempted to survive and not completely perish. It comes to full effect in the cumulative opening scene in which the analyst must be overpowered while Mr N attempted to widen his internal play spaces through exploration.

What has not been made explicit until now is the initial meaning of the dreams in the transference/countertransference matrix. Relating the dreams for the analyst was so overpowering that he at first felt himself not up to the task. Their content and the hacking manner in which they were told elicited in him an intense wish to leave them untouched. Reflecting on these internal reactions, however, allowed him to pursue the latent meaning behind the destructive, sadistic and narcissistically-brutal manifest content. In a stone-cold change from being passively exposed to actively destroying, the violence directed itself manifestly against the analyst-mother and destroyed her empathic and well-intended openness. But at the same time Mr N touched on this violence in the dreams himself, from which he awakened trembling, confused and bathed in sweat, alienated from reality. This led to the consideration, in abbreviated form, of clearly pointing out his feminine passive and dependent part, whose suppression had prevented him from being receptive-constructive.

The double-layering of mother and analyst in the first dream also made it possible to identify the confusion in the experience of the destructive transference and enduringly opened up to the patient the idea of transference in all. This experience secured the shared experience as well, and lent it a significant meaning, namely that Mr N had begun to deeply fathom trust. This direction was followed up by the interpretation of the second dream, because in it, by way of the torture and butchering of his feminine receptive part, a part could be emphasized which he formerly placed in others, mainly through projection: not only into the weak side of his father, who actually was tortured, and whom he began to despise as a youth, but mainly into others whom he then tormented and could make anxious and frightened. The third dream ultimately about his self-execution dedicated to his mother confirmed this initial impression because he executed himself, that is, his unprotected part, which was bound in love and inseparable from his mother, his feminine side, whose dependency and helplessness he very much feared.

The sequential structure of meaning in the performance developed above—Annihilation of the other, preventing intrusion and leakage, overpowering, search for a safe closeness—was made possible and promoted by the analyst by assuming the receptive-feminine position. Taking on and maintaining this position, and in spite of it, remaining available to Mr N with fatherly interpretive functioning is the foil through which the reported session sequences after dreams two and three can be seen. In contrast to the cumulative opening scene, the analyst switches his position and Mr N is held in a feminine-receptive position: First interpretation: "Hm" (=annihilation of the other); second interpretation: "moans" (=intrusion and seepage prevented); third interpretation: "crying" (=being overpowered, but tolerating and taking on a being self-reflective and introspective facility); fourth interpretation: reference to a libidinal object (=building up of a secure closeness).

At the same time, the analyst's interpretations which were repeated, one on the heels of the other, helplessly "intruding", were an attempt at no longer being obliterated and relegated to nothingness, until Mr N was able to carve out a building block on which to build his own thought. Only at this juncture does he perceive the analyst as a person and the rupture between the ego and reality becomes a painful experience of the internal rift between the wish and self-destruction. The central meaning switch and the concomitant therapeutic change in the position that is to be borne in the transference relationship, exist between performance and development of a personal iconography, in the switch from obliteration to being obliterated, from overpowering to being overpowered, and in the switch from actively overpowered reality, to being overpowered by internal reality without being castrated or destroyed. Mr N theoretically finds a safe closeness to his girlfriend, whom he has quarried from the analyst's virtually helpless onslaught.

Remarks on performance

Performance has a creative function, which in the course of a psychoanalytic process, though initially unrecognized and uninterpreted, bridges over the rift between the internal world and reality. For Mr N, this process involved a path from a seemingly intolerable feeling of being overpowered, viz. castrated, to a receptivity which does not have to be experienced as destructive.

Ordinarily, we assume a connection between the ego and reality as a matter of course, an intrapsychic capacity for the continuity of interactive processes. We think of the capacity to perceive the other as a whole, to sustain it, enjoyed it, with a potential for change. But where does the rift occur? Between the ego and the external world, i.e., between the integrative and dissociative part of the ego? Freud writes: "„Neurotics turn away from reality because they find it unbearable—either the whole or parts of it" (Freud, 1911b, 218). By "reality" is also meant the ego and its various functions in relation to external reality. A performance contains unbearable and wished-for elements. A performance implies a stable quality, as in an object relation or a person's character, although made up of numerous associative combinations. Bollas (2002, 27-28) writes: "Character is self as form. In ways even more complex than a poem, musical composition or work of fine art, we convey ourselves through action: we enact the idiom of our being through the way we shape the object world—an aesthetic motion that of course affects others." One feels obliged to add that in a performance the other is not only affected, but annihilated in his particularity, made into a partial object, that is, forced into a one-person psychology in order to allow for an interaction which befits the internal separation from reality. In this way it makes sense to conceive of performance as glimpsing an unwavering urge worthy of being felt or thought, but which as yet cannot be felt nor thought. Precisely for this reason one cannot conceptualize performance as the sequela of an intrapsychic conflict or compromise formation in the classical sense, but rather as something not yet structured symbolically. It is what is unthought or unthinkable that allows the rift between the ego/self and reality to potentially heal, while the rift inflicts unbearable pain on the ego/self, in total disregard. Performance demands listening and interacting on the part of the analyst to be borne not only unwillingly, but also must be recognized precisely in its transformational quality and explicitly mediated, that is, interpreted. Just as in free association of the character (see above), the bodily psychic process of a performance is "... of something known about, indeed deeply informative of any self's being and relating, but something which must be

experienced and can only meagrely be described ... although it derives from the self, it can only be experienced by an other" (Bollas, 2002, 28).

With these thoughts we circle back to the beginning of our considerations and the question of the meaning of psychotic mechanisms in neurotic patients where there is often the threat of failure. The technical task of treatment aims at not interrupting the process of a performance, but more than that, to promote it and allow it to have its effect, to come into view in order to finally create a configuration which can be thought, and to be able to work it through in its transformational capacity which was already its purpose, though unknown, within the patient. In the course of the analysis, Mr. N understood that in his life he was repeatedly confronted with the inability to "complete a circle" on a psychic-processing level, were it in relationships or just the completion and the simplest tasks.

It was exactly this fact, however, that he had called upon in the cumulative opening scene, and which he shaped, worked through and finally began to resolve within and through the relationship to the analyst.

[1] Translated by Keith Westerfield.