

In Dora's Case

Freud—Hysteria—Feminism

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6. Dora: Fragment of an Analysis

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The word is understood only as an extension of the body which is there in the process of speaking. . . . To the extent that it does not know repression, femininity is the downfall of interpretation.

Michèle Montrelay, "Inquiry Into Femininity," *m/f*, no. 1, p. 89

Filmed sequence—it is the body of Dora which speaks pain, desire, speaks a force divided and contained.

Hélène Cixous, *Portrait de Dora* (Paris, 1976), p. 36

What would it mean to reopen the case of Dora now? The quotations above point to an urgency that is nothing less than that of the present dialogue between psychoanalysis and feminism, a dialogue that seems crucial and yet constantly slides away from the point of a possible encounter, psychoanalysis attempting to delimit an area that might be called femininity within the confines of the drive, within a theory of sexuality that constantly places and displaces the concept of sexual difference, feminism starting precisely from that difference which it then addresses to psychoanalysis as a demand, the demand for the theory of its construction. Feminism, therefore, first turns to psychoanalysis because it is seen as the best place to describe the coming into being of femininity, which, in a next stage, it can be accused of pro-

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ducing or at least reproducing, sanctioning somehow within its own discourse. And then, where it fails, as it did with Dora, this can be taken as the sign of the impossibility of its own project, the impossibility then becoming the feminine, which, by a twist that turns the language of psychoanalysis against itself, it *represses*. Quite simply, the case of Dora is seen to fail because Dora is repressed as a woman by psychoanalysis and what is left of Dora as somehow retrievable is the insistence of the body as feminine, and since it is a case of hysteria, in which the symptom speaks across the body itself, the feminine is placed not only as source (origin and exclusion) but also as manifestation (the symptom). Within this definition, hysteria is assimilated to a body as site of the feminine, outside discourse, silent finally, or, at best, "dancing."

What I want to do in this article is look at some of these difficulties through the case of Dora—not simply to accuse the case of its failure, which failure must, however, be described and interrogated; not to produce an alternative reading whose content would be the feminine; but nonetheless to bring out some of the problems of the case precisely as the problem of the feminine within psychoanalysis in its urgency for us now. To do this will involve a discussion of the case itself, how its failure relates to changes in the concept of sexuality, and how these changes, which come at least partly in response to that failure, make certain conceptions of the feminine problematic.

The article falls into three parts: (1) the failure of the case, its relation to Freud's concept of femininity; (2) the relation of changes in the concept of femininity to changes in that of analytic practice (transference), and then to the concept of the unconscious in its relation to representation (hysterical and schizophrenic language); and (3) how these changes make impossible any notion of the feminine that would be outside representation,¹ the failure of the case of Dora being precisely the failure to articulate the relation between these two terms.

THE CASE OF DORA

The case of Dora was first drafted under the title "Dreams and Hysteria" in 1901, the year after the publication of *The Interpretation of*

Dreams. Yet it did not appear until 1905, in the same year as the *Three Essays on a Theory of Sexuality*. The space between the two dates is punctuated by Freud's own comments on his hesitancy regarding a case that had promised so much, that he had in fact promised as nothing less than the sequel to *The Interpretation of Dreams*, as the link between clinical practice and dream analysis, between the etiology of the symptom and the primary process. The history of the case, its hesitancy, in this sense speaks for itself, for it is caught quite literally between those two aspects of Freud's work, the theory of the unconscious and the theory of sexuality, whose relation or distance is what still concerns us today, as if the case of Dora could only appear finally at the point where the implications of its failure had already been displaced onto a theory of sexuality, by no means complete and still highly problematic, but at least acknowledged as such. Dora then falls, or fails, in the space between these two texts, and Freud himself writes: "While the case history before us seems particularly favoured as regards the utilization of dreams, in other respects, it has turned out poorer than I could have wished" (*SE* 7:111; *P* 40; *C* 26).

What then was wrong with Dora? First, in the simple sense of diagnosis and/or symptom, leaving aside at this stage the question of the status of the diagnostic category itself, not forgetting however that it was from this very question that psychoanalysis set out (rejection of hysteria as an independent clinical entity²), Dora, then, as first presented or brought to Freud, was suffering from *tussis nervosa* and periodic attacks of aphonia (nervous cough and loss of voice), "possibly migraines, together with depression, hysterical unsociability, and a *tardium vitae* which was probably not entirely genuine." Her entering into the treatment had been precipitated by the discovery of a suicide note by her parents and a momentary loss of consciousness after a row with her father, subsequently covered by amnesia. The symptoms are so slight, in a sense, that Freud feels it necessary to excuse to the reader the attention he is to give to the case, its status as it were as exemplary of a neurotic disorder whose etiology he sets himself to describe.

The situation is all the more complex in that the case is offered as a "fragment," and this in a number of different senses: first, the case was broken off by the patient; second, it was not committed to writing

until after the completion of the treatment (only the words of the dreams were recorded immediately after the session); and third, as a corollary to the second factor, only the results of the analysis and not its process were transcribed. Finally, Freud explicitly states that, where the etiology of the case stalled, he appeals to other cases to fill in the gaps, always indicating the point at which "the authentic part ends and my construction begins."

Each of these notions of fragment are crucial for the case, and each is double-edged. If the case is broken off after three months, this only "fragments" it insofar as the whole practice of psychoanalysis had changed from the immediate analysis of the symptom to an engagement with whatever presented itself to the mind of the patient in any one session, so that the inadequacy of the time span is the consequence of a new privileging of the discourse of the patient herself. Thus the distinction between the results and the process of analysis, which is the basis of the second and third notions of fragment, in one sense collapses on the first (this incidentally should be remembered in any simple dismissal of the case as the suppression of the patient's "own" language). On the other hand, the process is missing from the case in another and more crucial sense, that of the relation between the analyst and the patient, which Freud calls the transference, and to whose neglect he partly ascribes its failure. All these points should be borne in mind as the signs of this failure, and yet each is a paradox: the process is there, but it is somehow elided; a meaning or interpretation of Dora's "complaint" is produced, but it is clearly inadequate.

To give a history of the case is therefore impossible, but a number of central points can be disengaged that I hope will be of help in the discussion to follow:³

1. The parameters of the case are defined by the sexual circuit that runs between Dora's parents and their "intimate" friends, Herr and Frau K., in which Dora herself is caught.
2. Thus, Dora is courted by Herr K., and the crisis that leads to the treatment is partly precipitated by an attempted seduction on his part, which she repudiates.
3. Behind this is the affair between Dora's father and Frau K.; behind this, crucially, the absence of Dora's mother in her relationship both to Dora

("unfriendly"—SE 7:20; P 50; C 35) and to Dora's father (hence his relationship with Frau K.).

4. Behind this again, there is an intimacy which is first that between the two families but which also completes the sexual circuit between them—the intimacy of Dora and Frau K., whose precise content is never given and that functions exactly as the "secret" of the case, the source of the sexual knowledge that Dora undoubtedly has, and that thus cuts straight across from the "manifest" behavior of the participants to the "latent" etiology of the symptoms (Freud's theory of hysteria).

Put at its most crude, Freud's interpretation of the case is based on a simple identification of the oedipal triangle, and starts with Dora's protest at her place in the relationship between Frau K. and her father, that is, with Dora as a pawn who is proffered to Herr K. Thus her repudiation of the latter is the inevitable consequence of an outrage that takes Herr K. as its immediate object, and yet behind which is the figure of the father, who is the object of real reproach. In this way Dora's rejection of Herr K., "still quite young and of prepossessing appearance" (sic) (SE 7:29 n.3; P 60; C 44, n.15) can be seen as simultaneously oedipal and hysterical (repudiation of her own desire). Dora's own desire is defined here as unproblematic—heterosexual and genital. At this stage Freud was still bound to the traumatic theory of neurosis, and he thus traces the repudiation on the part of Dora to an attempted embrace by Herr K. when she was fourteen, which was also repulsed—"the behaviour of this child of fourteen was already entirely and completely hysterical" (SE 7:28; P 59; C 44). To be more precise, therefore, we would have to say that the oedipal triangle is there in the case history but that it is held off by this notion of trauma, which makes of Herr K. the first repudiated object (the seducer). In his analysis of Dora's first dream, there is no doubt that Freud interprets it as a summoning up of an infantile affection for the father *secondarily*, as a defense against Dora's persistent and unquestioned desire for Herr K. (The second dream is then interpreted as revealing the vengeance/hostility against her father that could not achieve expression in the first.)

Now the way in which the case history is laid out immediately spoils

the picture, or the "fine poetic conflict" (SE 7:59; P 94; C 77) as Freud himself puts it, since Dora has been totally complicit in the affair between her father and Frau K., and it had in fact been entirely through her complicity that the situation had been able to continue. Furthermore, Dora's symptom, her cough, reveals an unmistakable identification with her father, a masculine identification confirmed by the appearance of her brother at three points in the case history—each time as the object of identification, whether as recollection, screen memory, or manifest content of the dream. The revealing of this masculine identification leads directly to the uncovering of the "true" object of Dora's jealousy (made clear if for no other reason by the overinsistence of her reproaches against her father), that is, Frau K. herself, with whom Dora had shared such intimacy, secrecy, and confessions, even about Frau K.'s unsatisfactory relationship with her husband, in which case, Freud asks, how on earth could Dora in fact be in love with Herr K.? We may well ask.

What we therefore have in the case is a series of contradictions, which Freud then attempts to resolve by a mandatory appeal to the properties of the unconscious itself ("in the unconscious contradictory thoughts live very comfortably side by side"—SE 7:61; P 96; C 79) revealing a theory of interpretation actually functioning as "resistance" to the pressing need to develop a theory of sexuality, whose complexity or difficulty manifests itself time and again in the case. Thus in his analysis of the hysterical symptom—aphonia, or loss of voice—Freud is forced toward the beginnings of a concept of component sexuality (a sexuality multiple and fragmented and not bound to the genital function), since the symptom is clearly not only the response to the absence of Herr K. (impossibility of the communication desired) but also a fantasied identification with a scene of imagined sexual satisfaction between Dora's father and Frau K. This is the fullest discussion of sexuality in the book, which anticipates many of the theses of the *Three Essays*, but it is conducted by Freud as an apology for Dora (and himself)—justification of the discussion of sexual matters with a young girl (the question therefore being that of censorship, Freud's discovery reduced to the articulation of sexuality *to* a woman) and then as in-

sistence on the perverse and undifferentiated nature of infantile sexuality so that Dora's envisaging of a scene of oral gratification, for that is what it is, might be less of a scandal.

The difficulties therefore clearly relate to the whole concept of sexuality, and not just to the nature of the object (for the importance of this, see later in this essay on the concept of the sexual aim), but Freud's own resistance appears most strongly in relation to Frau K.'s status as an object of desire for Dora. Thus this aspect of the case surfaces only symptomatically in the text, at the end of the clinical picture that it closes, and in a series of footnotes and additions to the interpretation of the second dream and in the postscript.

It is in her second dream that the identification of Dora with a man (her own suitor) is unquestionable, and since the analysis reveals a latent obsession with the body of the woman, the Madonna, defloration, and finally childbirth, the recuperation of a primary autoeroticism (the masturbation discerned behind the first dream) by a masculine fantasy of self-possession now charted across the question of sexual difference is clear.⁴ Yet Freud makes of the dream an act of vengeance, as he does the breaking off of the case, which perhaps not surprisingly is its immediate sequel. The way this dream raises the question of sexual difference will be discussed below. It should already serve as a caution against any assimilation of Dora's homosexual desire for Frau K. to a simple preoedipal instance. Note for the moment that Freud is so keen to hang onto a notion of genital heterosexuality that it leads him, first, to identify the fantasy of childbirth that analysis revealed behind the second dream as an "obscure maternal longing" (*SE* 7:104, n.2; *P* 145; *C* 125, n.20), outdoing in advance Karen Horney's appeals to such a longing as natural, biological and pre-given, in her attacks on Freud's later work on femininity, and second, to classify Dora's masculine identification and desire for Frau K. as "gynaeophilic" and to make it "typical of the unconscious erotic life of hysterical girls" (*SE* 7:63; *P* 98; *C* 81), that is, to use as an explanation of hysteria the very factor that needs to be explained.

Finally, it should be pointed out that the insistence on a normal genital sexuality is obviously related to the question of transference. Freud himself attributes the failure of the case to his failure in "mas-

tering the transference in good time" (*SE* 7:118; *P* 160; *C* 140), while his constant footnoting of this discussion with references to his overlooking the homosexual desire of his patient indicates that the relation between these two aspects of the case remains unformulated. At one level it is easy to see that Freud's failure to understand his own implication in the case (countertransference) produced a certain definition of sexuality as a *demand* on Dora, which, it should be noted, she rejects (walks out). On the other hand, and more crucially, Freud's own definition of transference in its relation to the cure can be seen as caught in the same trap as that of his theory of sexuality, since he sees the former as the obstacle to the uncovering of "new memories, dealing, probably, with actual events" (*SE* 7:119; *P* 160; *C* 141) (relics of the seduction theory), just as he defines neurosis as the failure "to meet a real erotic demand" (*SE* 7:110; *P* 151; *C* 132), and even allows (thereby undermining the whole discovery of psychoanalysis) that neurosis might ultimately be vanquished by "reality" (*SE* 7:110; *P* 152; *C* 132). The concept of a possible recovery from neurosis through reality and that of an unproblematic feminine sexuality are coincident in the case.

"IN FACT SHE WAS A FEMINIST"

The reference comes from Freud's case on the "Psychogenesis of Homosexuality in a Woman," and in one sense the step from the failure of the case of Dora to this case, which appeared in 1920, is irresistible—not, however, in order to classify Dora as homosexual in any simple sense, but precisely because in this case Freud was led to an acknowledgment of the homosexual factor in all feminine sexuality, an acknowledgment which was to lead to his revision of his theories of the Oedipus complex for the girl. For in this article he is in a way at his most radical, rejecting the concept of cure, insisting that the most psychoanalysis can do is restore the original bisexual disposition of the patient, defining homosexuality as nonneurotic. Yet, at the same time, his explanation of this last factor—the lack of neurosis ascribed to the fact that the object-choice was established not in infancy but after puberty—is then undermined by his being obliged to trace back the homosexual attraction to a moment prior to the oedipal instance, the

early attachment to the mother, in which case either the girl is neurotic (which she clearly is not) or all women are neurotic (which indeed they might be).

The temptation is therefore to see the case of Dora as anticipating, through the insistence of Dora's desire for Frau K. as substitute for the absent mother in the case ("the mystery turns upon your mother," Freud says in relation to the first dream—*SE* 7:70; *P* 105; *C* 87), the nature of the preoedipal attachment between mother and girl child, an attachment Freud finally makes specific to feminine sexuality in its persistence and difficulty. All recent work on the concept of a feminine sexuality that resists or exceeds the reproductive or genital function stems from this, and since the Oedipus complex is properly the insertion of the woman into the circuit of symbolic exchange (nothing could be clearer in the case of Dora), then her resistance to this positioning is assigned a radical status. The woman, therefore, is outside exchange, an exchange put into play or sanctioned by nothing other than language itself, which thus produces the question of her place and *her* language simultaneously. The transition to a concept of hysterical discourse as some privileged relation to the maternal body is then easy; it is partly supported by Freud's own "suspicion" that "this phase of attachment to the mother is especially intimately related to the etiology of hysteria, which is not surprising when we reflect that both the phase and the neurosis are characteristically feminine" ("Female Sexuality," *SE* 21:227).

What seems to happen is that the desire to validate the preoedipal instance as resistance to the oedipal structure itself leads to a "materialization" of the *bodily* relation that underpins it, so that the body of the mother, or more properly the girl's relation to it, is then placed as being somehow outside repression. What we then have is a constant assimilation in feminist texts of the maternal body and the unrepressed (see Montrelay, quoted at the beginning of this article), or of the maternal body and the dream (Kristeva: "different, close to the dream or the maternal body"), or of the maternal body and a primary autoeroticism (Irigaray) whose return would apparently mean the return of the (feminine) exile.⁵ In the case of Kristeva, the relation to differing modes of language is made explicit to the point of identifying a pre-

oedipal linguistic register (rhythms, intonations) and a postoedipal linguistic register (the phonologico-syntactic structure of the sentence). Hysteria, therefore, and the poetic language of the woman (which becomes the language of women poets, Woolf, Plath, etc.) are properly then the return of this primary and bodily mode of expressivity.⁶ It is no coincidence that at this stage it is schizophrenia that is invoked as frequently as hysteria, since the relation between schizophrenia and poetic discourse is a recognized and accredited one within psychoanalysis itself. It is in a sense a feminist version of Laing, but having to include the transference neurosis (hysteria) since the relation of the latter to the feminine is too heavily attested to be ignored. More often than not, the two forms are assimilated the one to the other, so that what happens is that the specificity of the two types of disorder is lost. It is worth, therefore, looking again at Dora's symptoms, and then (in the next section) at what Freud said about schizophrenia in its relation to language, in order to see whether such a position can be theoretically sustained.

A number of points about Dora first. First, as we saw above, Dora's bodily symptoms (the aphonia, the cough) are the expression of a masculine identification, through which identification alone access to the maternal and feminine body is possible. This access then threatens Dora with a physical or bodily fragmentation, which constitutes the symptoms of conversion. Thus access to the (maternal) body is only possible now through a masculine identification, which access then threatens the very category of identification itself, that is, Dora as subject. Thus at neither point of her desire for Frau K. can Dora be placed as a "true" feminine, since either she is identified with a man or else the movement is toward an instance in which the category of sexual difference is not established and that of the subject, on which such difference depends, is threatened.

Second, in the second dream, in which Dora's desire could be defined as the desire for self-possession, her position as subject is at its most precarious. The dream most clearly articulates the split between the subject and object of enunciation at the root of any linguistic utterance (the speaking subject and the subject of the statement),⁷ here seen in its relation to the question of sexual difference. Thus, if Dora

is there to be possessed, then she is not there as a woman (she is a man), and if she is not there to be possessed, her place as a woman is assured (she remains feminine) but she is not there (Lacan's lethal *vel*).⁸

Third, and as a corollary to this, what is revealed behind this dream is nothing other than this question of woman *as* representation: "Here for the third time we come upon 'picture' (views of towns, the Dresden gallery), but in a much more significant connection. Because of what appears in the picture (the wood, the nymphs), the 'Bild' (picture) is turned into a 'Weibsbild' (literally 'picture of a woman')" (*SE* 7:99, n. 1; *P* 139; *C* 119, n. 11), and then of woman *as* query, posed by Dora herself, of her relationship to a knowledge designated as present and not present—the sexual knowledge that is the *secret* behind her relation with Frau K.: "Her *knowing* all about such things and, at the same time, her *pretending not to know where her knowledge came from* was really too remarkable. I ought to have attacked this *riddle* and looked for the motive of such a remarkable piece of repression" (*SE* 7:120, n. 1; *P* 162; *C* 142, n. 2; italics mine). Thus nothing in Dora's position can be assimilated to an unproblematic concept of the feminine or to any simple notion of the body, since where desire is genital it is charted across a masculine identification, and where it is oral it reveals itself as a query addressed to the category of sexuality itself (Frau K. as the "unmistakable *oral* source of information" (*SE* 7:105, n. 2; *P* 145; *C* 126, n. 20).⁹

Perhaps we should remember here that Freud's work on hysteria started precisely with a rejection of any simple mapping of the symptom onto the body (Charcot's hysterogenic zones). By so doing he made of hysteria a language (made it speak) but one whose relation to the body was decentered, since if the body spoke it was precisely because there was something called the unconscious that could not. At this point the relation of dreams and hysteria, from which we started out, can be reasserted as nothing other than the inflection of the body *through* language in its relation to the unconscious (indirect representation). When Lacan writes that "there is nothing in the unconscious with which the body accords" he means this, and he continues: "The unconscious is discordant. The unconscious is that which, by speaking, determines the subject as being, but a being to be struck through with

that metonymy by which I support desire insofar as it is endlessly impossible to speak as such."¹⁰ We saw this above in the split between subject and object of enunciation, Dora as subject literally fading before her presence in the dream.

WORD-PRESENTATIONS AND THING-PRESENTATIONS

Freud's discussion of schizophrenic and hysterical language is at its most explicit in chapter 7 of his metapsychological paper on the unconscious (*SE* 14:196–205). That this discussion should take up the chapter entitled "Assessment of the Unconscious" indicates its importance, and it is in fact the distinction between these two types of disorder that produces Freud's definition of the concept UCS (the unconscious in his system: unconscious, preconscious, and conscious). Freud starts with schizophrenia in its inaccessibility to analysis, involving as it does a complete withdrawal of object-cathexes in their reversion to the ego. Note that what this produces is unmitigated narcissism, so that while the definition indicates Freud still basing his diagnostic categories on a differential relation to reality, what emerges at another level is a concept of schizophrenia as the "embodiment" of the category of the ego and hence of identification (as opposed to the embodiment of the body). What then appears as symptom is what Freud calls organ-speech, in which "the patient's relation to the bodily organ [arrogates] to itself the representation of the whole content [of her thoughts]." Thus the precondition of organ-speech is a reversion to narcissism, and the function of the body is the representation of a thought-content, which, in both of the examples given, reveals the patient's identification with her lover; this as distinct from the hysterical symptom, where there is not the verbal articulation of a certain relation to the body but the bodily symptom itself, i.e., conversion.

Hence there can be no equating of schizophrenia and hysteria and no assimilation of either to the body in an unmediated form. On the other hand, if the attempt to construct a theory of feminine discourse tends to produce such an identification, it is because of the attraction for such a theory of what Freud says about the schizophrenic's privileged relation to words (subject to the primary processes and obeying

the laws of the unconscious) and the definition that this then leads to of unconscious representation itself: "We now seem to know all at once what the difference is between conscious and unconscious presentation—the conscious presentation comprises the presentation of the thing and the presentation of the word, while the unconscious presentation is the presentation of the thing alone" (SE 14:201). The distinction does in fact appear to be predicated on the notion of some direct, ("truer" even) relation to the object itself: "The system UCS contains the thing-cathexes of the objects, the first and true object-cathexes" (SE 14:201).

It is on the collapse of this concept, in Freud's text itself, that the assimilation schizophrenia/body/unconscious can again be seen to fail. First, Freud does in fact state even within this definition that what is involved in the first (primary) cathexis of the object is the *memory-trace* of the object, and in the appendix on aphasia he states the relation between object and thing-presentation to be a mediate one. Second, in the choice that his distinction leaves him—for if the unconscious comprises the thing-presentation alone, repression involving a withdrawal of the word, then for the schizophrenic either there is no repression or else the schizophrenic's use of language indicates the first stage of a *recovery*, the recovery of the object-cathexes themselves. The schizophrenic's relation to the word would therefore reveal at its most transparent the loss of the object that is at the root of linguistic representation ("These endeavours are directed towards *regaining the lost object*"—SE 14:204). This is the concept at the basis of the concept of the unconscious as the *effect* of the subject's insertion into language, the loss of the object and production of the subject in that moment (the moment of its fading).

A number of conceptions about language that underpin discussion about the feminine and discourse, the feminine *as* discourse can now be disengaged. First, the idea of an unmediated relation between the body and language is contrary to the linguistic definition of the sign, implying as it does a type of anatomical mimesis of language on the body (for example, Irigaray's "two lips" as indicating the place of woman outside (phallo-)monistic discourse). Second, the concept of the feminine *as* outside discourse involves a theory of language in which a

nonexcentric relation to language would be possible, the subject as control and origin of meaning, which is to render meaningless both the concept of the unconscious and that of the subject.

It is on this latter factor that the relation of psychoanalysis to language exceeds that of linguistics, precisely insofar as it poses this problem of the subject's relation to discourse. Freud did not formulate this as such, but it is there in the contradictions of his text, in this further sense, too, and most clearly, I would suggest, in what he has to say about feminine sexuality and transference—which brings us back to the case of Dora.

THE QUESTION OF FEMININITY

In this final section I want to look at the two "vanishing points" of the case of Dora—the theory of feminine sexuality and the concept of transference. For if the case failed it was because Freud failed to recognize the specificity of either of these two factors, and where he saw their pertinence (addenda, postscript, footnote) they were left in a type of offstage of the case, as the thing that was missing (the "secret") or the element that he had failed to "master," as if both were a content, an object to be identified, placed, and resolved (transference as the recovery of an actual event). What I want to do here, therefore, is to show how in both of these concepts something of the subject's relation to discourse as we saw it emerging above—in Dora's second dream, and then in the schizophrenic relation to the word—can be discerned and to suggest the pertinence of that theory for discussion of the feminine not *as* discourse but, within discourse, as a relationship to it.

First, the transference, as it was elaborated by Freud in his papers on technique ("The Dynamics of Transference," "Remembering, Repeating, and Working-Through," "Observations on the Transference-Love"), where he starts again with a definition of neurosis as a libidinal turning away from reality, is first seen as a resistance in the chain of associations that would lead logically to the repairing or completing of the patient's memory. Dora's case also started, in Freud's discussion of the fragment, with this insistence that cure of the symptom and completion of memory were synonymous—psychoanalysis defined here as

the creation of a full history to which the subject would be restored. It is a concept also present at the beginning of Lacan's work on the idea of full speech,¹¹ retranscription of the history of the patient *through* language, before the development of the concept of the unconscious precisely as the effect of language, and hence behind it a moment of failing that can never be restored, that is nothing other than that of the subject itself (primary repression). Thus Freud starts by stressing transference as the obstacle to the reality of the patient's history, in a simple sense corresponding to the notion that behind neurosis is an event (seduction theory) and in front of it, if all goes well, another event (neurosis vanquished by reality), transference appearing here as something that "flings" the patient "out of his real relation to the doctor" ("The Dynamics of Transference," *SE* 12:107).

Yet, taken together, these three texts inscribe an opposite movement. In the discussion of recollection ("Remembering, Repeating, and Working-Through"), Freud interpolates a discussion of amnesia that starts with the concept of total recall as the objective of analysis but ends up with a discussion of primary or primal fantasy, indicating that concept of Freud's which was most completely to undermine the concept of the cure as the retrieval of a real occurrence. In fact, in his article on the two principles of mental functioning (*SE* 12:213-227), Freud assigned to fantasy the whole domain of sexuality, whereby it escapes the reality principle altogether (pleasure in sexuality revealing itself as pleasure in the act of representation itself).

Through this a different concept of the transference emerges, one seen most clearly in "Observations on Transference-Love," where what is objected to in transference is its status as a demand (the demand for love) and, more important, one that insists on being recognized as *real* (which it is, Freud has to concede), so that what now "irrupts" into the analytic situation is reality itself, a reality that is totally out of place: "There is a complete change of scene; it is as though some piece of make-believe had been stopped by the sudden irruption of reality" (*SE* 12:162). The patient insists therefore on repeating "in real life" what should only have been reproduced as "psychical material"—thus the relationship to the real has been reversed. What this indicates for this discussion is that Freud himself was forced to correct or to revise

the concept of transference to which he ascribed the failure of the case of Dora, and this in a way that is not satisfactorily or exhaustively defined by reference to the countertransference (Freud's implication in the case). For what is at stake is transference as an impossible demand for recognition (a return of love in "Observations on the Transference-Love"), a demand that has to be displaced onto another register, indicated here by the corresponding emphasis on the concepts of fantasy ("make-believe"), representation, psychical material (the only meaning of material that has any value here). Note the proximity of these terms to the query, image, *Bild*, of Dora's second dream, sexuality precisely not as demand (the demand for love) but as question.

In the discussion of the case itself, I suggested that Freud's concept of the transference as the retrieval of an event corresponded to the concept of a pre-given normal feminine sexuality, neurosis being defined as the failure to meet a "real erotic demand." Thus if the concept of reality has to go in relation to the notion of transference, we can reasonably assume that it also goes in relation to that of sexuality itself. I have already suggested briefly that it does, in what Freud says about the pleasure principle. What is important to grasp is that, while it is undoubtedly correct to state that Freud's analysis of Dora failed because of the theory of feminine sexuality to which he then held, this concept cannot be corrected by a simple reference to his later theses on feminine sexuality (preoedipality, etc.), crucial as these may be, since that is simply to replace one content with another, whereas what must be seen in Freud's work on femininity is exactly the same movement we have just seen in the concept of transference, which is nothing less than the collapse of the category of sexuality as *content* altogether.

Freud starts both his papers on femininity ("Female Sexuality" and "Femininity") with recognition of the girl's preoedipal attachment to the mother, its strength and duration, as it had been overlooked within psychoanalytic theory, thus feminine sexuality as an earlier stage, a more repressed content, something archaic. Yet, although the two papers in one sense say the same thing, their logic or sequence is different, and the difference has important effects on the level of theory.

"Female Sexuality" (1931) starts with the preoedipal factor and its

necessary relinquishment, which is then discussed in terms of the castration complex and penis envy. But this does not exhaust the question of the girl's renunciation of her mother, a question that then persists in a series of references to "premature" weaning, the advent of a rival, the necessary frustration and final ambivalence of the child's demand for love. None of these factors, however, constitute a sufficient explanation: "All these motives seem nevertheless insufficient to justify the girl's final hostility" (SE 21:234), which cannot be attributed to the ambivalence of the infantile relation to the object, since this would be true of the boy child too. Thus a question persists that reveals itself as *the* question, hanging over from that of a demand that has been frustrated and a renunciation that still has not been explained: "A further question arises, 'What does the little girl require of her mother?'" (SE 21:235).

Freud can only answer this question by reference to the nature of the infantile sexual aim—its activity (rejection of a male/female biological chemistry, a single libido with both active and passive aims), an activity that is not only a corrective to the idea of a naturally passive femininity but functions as *repetition* (the child repeats a distressing experience through play). Correlating this with the definition of infantile sexuality given earlier in the paper ("It has in point of fact no aim, and is incapable of obtaining complete satisfaction and principally for that reason is doomed to end in disappointment"—SE 21:231), it emerges that what specifies the little girl's aim, and her demand, is that she does not have one. The question persists, or is repeated, therefore, as the impossibility of satisfaction.

In "Femininity" (1933), the sequence is in a sense reversed. The paper starts with the caution against the biological definition of sexual difference and then reposes the question of the girl's relinquishment of the preoedipal attachment to the mother. The motives for renunciation are listed again—oral frustration, jealousy, prohibition, ambivalence—but in this case the question of how these can explain such renunciation when they apply equally to the boy is answered with the concept of penis envy, with which the question is in a sense closed (the discussion moves on to a consideration of adult modes of feminine sexuality). Thus the question is answered here, and it is as answer that

the concept of penis envy has produced, rightly, the anger against Freud. For looking at the paper again, it is clear that nothing has been answered at all, since Freud characterizes each of the earlier motives specifically in terms of its impossibility (see above): oral demand as "insatiable," "the child's demands for love are immoderate" (rivalry), "multifarious sexual wishes which cannot for the most part be satisfied," "the immoderate character of the demand for love and the impossibility of fulfilling their sexual wishes" (SE 22:122, 123, 124). Now, if what characterizes all these demands is the impossibility of their satisfaction, then the fact that there is another impossible demand ("the wish to get the longed-for penis"—SE 22:125) cannot strictly explain anything at all, other than the persistence of the demand itself—the question, therefore, of the earlier paper, "What does the little girl require of her mother?"¹²

The question persists, therefore, only insofar as it cannot be answered, and what I want to suggest here is that what we see opening up in the gap between the demand and its impossibility is desire itself, what Lacan calls the effect of the articulation of need as demand, "desire endlessly impossible to speak as such." This is why the demand for love in the transference blocks the passage of the treatment insofar as it insists precisely on its own reality (the possibility of satisfaction). What Freud's papers on femininity reveal, therefore, is nothing less than the emergence of this concept of desire as the *question* of sexual difference: how does the little girl become a woman, or does she?

To return to dreams and hysteria, isn't this exactly the question that reveals itself in the dream of the hysteric analyzed in *The Interpretation of Dreams* (SE 4:147–151) who dreamt that her own wish was *not* fulfilled, through an identification with the woman she posited as her sexual rival? Her desire, therefore, is the desire for an unsatisfied desire: "She likes caviar," writes Lacan, "but she doesn't want any. It is in that that she desires it."¹³ And behind that wish (and that identification) the question of the woman as object of desire, of how her husband could desire a woman who was incapable of giving him satisfaction (she knows he does not want her), the identification, therefore, with the question itself: "This being the question put forward, which is very generally that of hysterical identification, whereby the

woman identifies herself with the man."¹⁴ This can be referred directly back to the case of Dora, woman as object and subject of desire—the impossibility of either position, for if object of desire then whose desire, and if subject of desire then its own impossibility, the impossibility of subject and desire (the one implying the fading of the other). Thus Dora rejects Herr K. at the exact moment when he states that he does not desire his own wife, the very woman through whom the whole question for Dora was posed (the scene on the lake).

Thus what feminine sexuality reveals in these examples is the persistence of the question of desire as a question (exactly the opposite of the feminine as sexual content, substance, or whatever). Finally, to return to the hysterical symptom itself:

It is to the extent that a need gets caught up in the function of desire that the psychosomatic can be conceived of as something more than the idle commonplace which consists in saying that there is a psychic backing to everything somatic. That much we have known for a long time. If we speak of the psychosomatic it is insofar as what must intervene is desire.¹⁵

I want to conclude with this, not because I think it answers anything but because I believe it to be a necessary caution to certain current developments within feminist theory. What seems to me to need attention is precisely this movement of psychoanalysis away from sexuality as content (preoedipal or otherwise) to a concept of sexuality as caught up in the register of demand and desire. What does emerge from the above is that it was on the failings in the concept of the feminine (the case of Dora) that this problem emerged in Freud's own work. To relinquish the idea of a specific feminine discourse may be less discouraging if what it leads to is work on the place of the feminine as somehow revealing more urgently the impossibility of the position of the woman within a discourse that would prefer to suppress the question of desire as such (the question of its splitting). I would suggest that the case of Dora reveals no more, and no less, than this.

Notes

1. See Parveen Adams, "Representation and Sexuality," *m/f* (1978), no. 1.
2. See Breuer and Freud's *Studies on Hysteria*, SE 2.
3. For a fuller discussion of the sequence of this case, see Lacan, "Intervention on Transference," in this volume.
4. Note Freud's discussion of this dream: "What was most evident was that in this first part of the dream she was identifying herself with a young man—it would have been appropriate for the goal to have been the possession of a woman, of herself." SE 7:96–97; P 136; C 116–117.
5. Julia Kristeva, *Des chinoises* (Paris: Editions des femmes, 1974); *About Chinese Women*, Anita Barrows, tr. (New York: Urizen Books, 1977); Luce Irigaray, *Speculum de l'autre femme* (Paris: Minuit, 1974).
6. It can also be objected to these arguments that they simply reproduce the classical definition of women/the feminine as irrational, outside discourse, language, etc., with clearly reactionary implications for women. See, for discussion of this, Monique Plaza, "Pouvoir 'phallomorphique' et psychologie de 'la Femme'" in *Questions féministes*, no. 1 (Paris: Editions tierce, 1977), translated in *Ideology and Consciousness*, no. 4 (1978), as "'Phallomorphic' Power and the Psychology of 'Women'—A Patriarchal Chain."
7. This is the linguistic distinction between the subject of the enunciation and the subject of the enunciated (Emile Benveniste, "De la subjectivité dans le langage," in *Problèmes de linguistique générale* [Paris: Gallimard, 1966]; trans., University of Miami Press, 1971), which I deliberately reformulate here. For a discussion of the concept for psychoanalysis, see J. Lacan, "Analyse et vérité ou la fermeture de l'inconscient," in *Le Séminaire XI: Les Quatre concepts fondamentaux de la psychanalyse* (Paris: Seuil, 1973); "Analysis and Truth or the Closure of the Unconscious," in *The Four Fundamental Concepts of Psychoanalysis* (New York: Norton, 1978).
8. For a discussion of this, see Parveen Adams, "Representation and Sexuality," p. 72.
9. See Freud's whole footnote here, SE 7:104–5, n.2; also pp. 110–111, n.1 and p. 120, n.1 (P 145, 152, 162; C 125–126, n.20, also pp. 132–133, n.26, and p. 142, n.2).
10. Jacques Lacan, "Séminaire," J.-A. Miller, ed., *Ornicar: Bulletin périodique du champ freudien* (May 1975), no. 3, p. 105. (All translations from Lacan are by Jacqueline Rose).
11. J. Lacan, "Fonction et champ de la parole et du langage en psychanalyse," in *Écrits* (Paris: Seuil, 1966); "The Function and Field of Speech and Language in Psychoanalysis," in *Écrits: A Selection* (New York: Norton, 1977).
12. "Feminine Sexuality in Psychoanalytic Doctrine," in Juliet Mitchell and Jacqueline Rose, eds., *Feminine Sexuality: Jacques Lacan and the école freudienne* (New York: Norton, 1983).

13. For a full discussion of this dream, see Jacques Lacan, "La Direction de la cure et les principes de son pouvoir," in *Écrits*; "The Direction of the Treatment and the Principles of its Power," in *Écrits: A Selection*.

14. Lacan, *Écrits*, p. 126.

15. Jacques Lacan, "Le transfert et la pulsion," "Le champ de l'autre, et retour sur la pulsion," in *Les quatre concepts fondamentaux*; "The Transference and the Drive," "The Field of the Other and Back to the Transference," in *The Four Fundamental Concepts*.

7. Freud's Dora, Dora's Hysteria

MARIA RAMAS

Freud's *Dora* case, formally titled "Fragment of an Analysis of a Case of Hysteria," is one of his best-known case histories. It is read as literary classic, as sociology, as popular romantic fiction and, occasionally perhaps, even as soft core pornography. The Collier paperback, currently in its fifth edition, certainly has been designed to entice a broader audience than psychoanalysts. Its back cover bears the titillating heading, "Dora—her homosexual . . . love for Frau K. was the strongest unconscious current in her mental life." It advertises the cast of supporting characters as "an obsessive mother, an adulterous father,

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The following bibliography is limited to works devoted either entirely or in significant part to the Dora case. Studies reprinted in this book are not listed. For a bibliography that includes books and articles concerned in a more general way with the issues the case raises (and to which we are greatly indebted), see the issue of *Diacritics* cited below.

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