

## on psychoanalysis<sup>1</sup>

**Contributed to Section of Neurology and Psychiatry, Australasian Medical Congress, 1911**

**By Prof. Sigm. Freud, Vienna**

At the friendly request of the Secretary of your section of Neurology and Psychiatry I take the liberty of directing the attention of this Congress to the subject of psycho-analysis, which at the present moment is being extensively studied by neurologists and psychiatrists in Europe and America.

Psycho-analysis is a remarkable combination, which includes not only a method of examination of the neuroses, but also a method of treatment based on the etiology thus discovered. I may say, to begin with, that psycho-analysis is not a child of speculation, but the result of experience, and for this reason, like every new product of science, is unfinished. Everyone is invited to convince himself by his own investigations of the correctness of assertions contained herein, and to help in the further development of the study.

Psycho-analysis began with researches on hysteria, but in the course of years it has extended far beyond this field of work. The "Studies on Hysteria," by Breuer and myself, published in 1895, were the beginnings of psycho-analysis; they followed in the track of Charcot's work on "Traumatic Hysteria," Liébault and Bernheim's "Proof of the Hypnotic Phenomena," and Janet's studies on "Unconscious Psychic Processes." Psycho-analysis soon put itself into sharp antagonism with Janet's opinions, because (a) it refused to trace hysteria directly to congenital hereditary degeneration, (b) it offered instead of a mere description a dynamic explanation by a play of psychic forces, and (c) it referred psychic dissociation (the importance of which had also been recognized by Janet) not to a psychic synthesis arising from a congenital disability, but to a special psychic process called "repression," (*Verdrängung*.)

It has been directly proved that hysterical symptoms are residues (reminiscences) of impressive incidents, which have been withdrawn from everyday consciousness and are determined in form by details of the traumatic effects of these incidents in a way which excludes voluntary formation. In this conception the therapeutic possibilities consist of the chances of annulling such a "repression," so as to allow part of the unconscious psychic life to become conscious and thus deprive it of its pathogenic power. This conception is a dynamic one in so far as it regards the psychic processes as displacements of psychic energy, which can be estimated by the degree of their action on the affective elements. This is most significant in hysteria, where the process of "conversion" creates the symptoms by transforming a mental mass of emotion into somatic innervations.

The first psycho-analytic examinations and attempts at treatment were made with the aid of hypnotism. Afterwards this was abandoned and the work performed by the method of "free association," the patient remaining in his normal state. This modification had the advantage that the procedure could be applied to a far larger number of cases of hysteria, to other neuroses, and also to healthy individuals. The development of a special faculty of interpretation, however, became necessary, so as to draw conclusions from the expressed ideas of the examined individual. The interpretations established with all certainty the fact

that the psychic dissociations are kept up solely by “inner resistances.” The conclusion, therefore, seems justified, that they have arisen through inner psychic conflict, which has led to the “repression” of the under-lying emotion. To overcome this conflict and thereby cure the neurosis, the guiding hand of the doctor trained in psycho-analysis is required.

Further it has been very generally demonstrated that in all neuroses the morbid symptoms are really the end products of such conflicts, which have led to “repression” and “psychic cleavage.” The symptoms are generated by different mechanisms: (a) either as formations in substitution for the repressed forces; or (b) as compromises between the repressing and the repressed forces; or (c) as reaction-formations and securities against the repressed forces.

The investigations were further extended to the conditions under which psychic conflicts lead to “repression” (i.e., dissociations caused dynamically), because it goes without saying, that a psychic conflict may in itself have also a normal ending. Psycho-analysis yielded as result, that the conflicts are always between sexual impulses (using the word “sexual” in the widest sense), and the wishes and tendencies of the remaining ego. In the neurosis it is the sexual impulses which succumb to “repression,” and, consequently, form the most important basis for the genesis of the symptoms, which, therefore, may be conceived as sexual gratifications in substitution.

Our work on the question of pre-disposition to neurotic affections has added the “infantile” factor to the hitherto recognised somatic and hereditary factors. Thus psycho-analysis had to trace back the psychic life of the patients to their early infancy, and the conclusion was arrived at that mental arrests of development (infantilism) harbour predisposition to the neuroses. We have learnt, particularly from the tracing of the sexual life, that an “infantile sexuality” does really exist, that the sexual impulse is made up of many components and passes through a complicated development, the final result of which is, after many restrictions and transformations, the “normal sexuality” of the adult. The puzzling perversions of the sexual impulse in adults appear to be either arrests of development, fixations, or one-sided growths. The neurosis is, therefore, the negative of the perversion.

The cultural development forced on mankind is the momentum which renders the restrictions and suppressions of the sexual impulse necessary, greater or lesser sacrifices being demanded according to the individual constitution. Development is hardly ever achieved smoothly, and disturbances may occur on account of the individual constitution or of premature sexual incidents, leaving behind the disposition of future neuroses. Such dispositions may remain harmless, if the life of the adult develops satisfactorily and unpretentiously; but they become pathogenic if the conditions of the mature life deny the gratifications of the “libido,” or make too high demands on its suppression.

From the investigations, which deal with the sexual activity of the child, a further conception of the sexual impulse arises, which is based not on its purposes but on its sources. The sexual impulse possesses in a high degree the faculty of being diverted from its direct sexual goals, and of being led towards higher goals, which are no longer sexual (“sublimation”). The impulse is thus enabled to furnish most important contributions to the social and artistic achievements of humanity.

The simultaneous presence of the three momenta – “infantilism,” “sexuality,” and “repression” – forms the principal characteristics of the psycho-analytic theory, and marks its difference from other conceptions of morbid psychic life. Psycho-analysis has at the same time demonstrated that between the psychic life of normals, of neurotics and of psychotics

there exists no fundamental difference, but only one of degree. The normal individual has to pass through the same “repressions,” and has to battle with the same substituted or surrogate creations; the difference being only that the normal person performs these processes with less trouble and better success. The psycho-analytic method of examination can, therefore, also be applied to the explanation of normal psychic phenomena, and has made it possible to discover the close relationship between morbid psychic productions and normal creations, such as dreams, the small blunders of everyday life, the valuable attainments of the joke, myths and poetry. Of these the explanation of the dream is the farthest advanced and results in the following general formula: “the dream is a deformed fulfilment of a repressed wish.” Dream interpretation has for object: removal of the deformity, which the unconscious thoughts of the dreamer have undergone; also it is a highly valuable aid to psycho-analytic technique, since it constitutes the most convenient method for obtaining insight into unconscious psychic life.

The tendency of contradicting the doctrines of psycho-analysis often occurs in medical and especially in psychiatric circles, without any real study or any practical application. This is due not only to the striking novelty and contrast of the doctrines when compared with those hitherto held by psychiatrists, but also to the fact that the premises and technique of psycho-analysis are much more nearly related to the realm of the mind than to that of medicine. It is, however, beyond dispute, that the purely medical and non-psychological teachings have up to now done very little towards the understanding of the psychic life. The progress of psycho-analysis is further retarded by the fear of the average observer to see himself in his own mirror. Scientific men are liable to meet emotional resistances by arguments, and thus satisfy themselves to their own satisfaction! Anyone who does not wish to ignore a truth will do well to distrust his antipathies, and if he wishes to subject the doctrine of psycho-analysis to a critical examination, let him also analyse his own person.

I cannot believe that in these few sentences I have succeeded in painting a distinct picture of the principles and purposes of psycho-analysis, but I append a list of the principal publications on the subject, perusal of which will supply further enlightenment to those whom I have interested.

1. Breuer and Freud. Studien über Hysterie, 1895. Fr. Deuticke, Vienna. A portion of the above has been translated into English in “Selected Papers in Hysteria and other Psycho-neuroses, “ by Dr. A.A. Brill, New York, 1909.
2. Freud. Drei Abhandlungen zur Sexualtheorie. Vienna. 1905. English translation by Dr. Brill. “Three Contributions to the Sexual Theory.” New York, 1910.
3. Freud. Zur Psychopathologie des Alltagslebens. S. Karger, Berlin. 3d edition, 1910.
4. Freud. Die Traumdeutung. Vienna, 1900. 3rd ed., 1911.
5. Freud. The Origin and Development of Psycho-analysis. Amer. Jour. of Psychology. April, 1910. Also in German: “Ueber Psychoanalyse.” Five Lectures given at the Clark University, Worcester, Mass., 1909.
6. Freud. Der Witz und seine Beziehung [sic!] zum Unbewussten. Vienna, 1905.
7. Freud. Collection of minor papers on the Doctrine of Neuroses, 1893-1906. Vienna, 1906.
8. Idem. A second collection. Vienna, 1909.
9. Hitschmann. Freud’s Neurosenlehre. Vienna, 1911.
10. C.G. Jung. Diagnostische Assoziationsstudien. Two volumes. 1906-1910.
11. C.G. Jung. Über die Psychologie der Dementia Praecox. 1907.
12. Jahrbuch für psycho-analytische und psychopathologische Forschungen, published by E. Bleuler and S. Freud, edited by Jung. Since 1909.
13. Schriften zur angewandten Seelenkunde. Fr. Deuticke, Vienna. Since 1907. Eleven parts, by Freud, Jung, Abraham, Pfister, Rank, Jones, Riklin, Graf, Sadger.

14. Zentralblatt für Psychoanalyse. Edited by A. Adler and W. Stekel, J. Bergmann, Wiesbaden. Since Sept., 1910.
- 

## Notes

- <sup>1</sup> This article was first published in *The Australasian Medical Gazette*, April 13, 1912: 385-387. We would like to thank the *Medical Journal of Australia*, the successor of *The Australasian Medical Gazette*, and its library staff, for making available to us copies of both this and the Jung paper, also referred to in the *Litura* of this edition of *Écritique* and published in the same edition of *The Australasian Medical Gazette*, as well as informing us about the copyright issues.