

Vol 7, n 3, 2019

Reports

Revue des Revues. Revue française de psychosomatique, 2018/2, (n°54). Pages 95-112.

*Federica Sicari*¹

¹ Department of Cognitive Sciences, Psychology, Educational and Cultural Studies (COSPECS), University of Messina, Italy

E-mail: federicasicari7@gmail.com



DOI: 10.6092/2282-1619/2019.7.2347

"Désorganisations et destructivité" (Kapsambelis, 2018) was taken from Volume 54, 2018/2 of the *Revue française de psychosomatique*, whose focus is mainly centered on the relationship between psychic and somatic, with particular reference to the concept of "destructiveness".

Within the study, the author has created a link between pathologies of distant clinical environments but united by a common substrate called "disorganization". The author's intent concerns the possibility of analyzing the aforementioned construct, in line with Freudian theories, comparing the disorganization of the psychotic subject with the disorganization of the psychosomatic subject (De Burge, 2001; Fava, Cosci, & Sonino, 2017). This analysis will reveal the centrality of hypochondria as "current neurosis".

The article kicks off from a historical excursus that focuses on the lively debate between Freud and Bleuler, which allows the author to introduce the concept of psychotic disorganization.

In the first decade of the twentieth century, in Europe, positivist scientism seemed to lose its influence in favor of a dynamic approach, which transcended the strictly organic data. The need to reconcile body and soul, internal and external, implicit and explicit, was evident to understand the dynamics underlying these "dark diseases" (Modena, 1907; Motofei & Rowland, 2018).

Kapsambelis focuses in particular on the theoretical conflict born in those same years between Freud who was shaping his revolutionary model of the functioning of the mind and Bleuler, which aimed to re-establish the concept of psychosis.

The nature of the contrast between the two doctrines can be understood, according to the author, through the Kraepelin's theories, which years before had already identified the existence of a symptomatological constellation referable to this condition (Kraepelin, 1883). The well-known psychiatrist had in fact proposed a descriptive classification of mental illnesses based on the observation of his patients over the course of several decades and he had grouped the hebephrenia, catatonia and paranoid dementia in the common definition of "dementia precox", convinced that it was variants of the same pathology (Kraepelin, 1921). The author highlights with the word dementia, the terminal and disintegrative path common to the aforementioned pathologies, despite the heterogeneity of their initial characteristics.

Starting from Kraepelin's studies, which considered the psychotic condition as a progressive weakening of the affective and cognitive sphere, Bleuler postulated the heterogeneous nature of the human psyche. According to the well-known theorist, in fact the mind would succeed in splitting into relatively autonomous parts, capable of functioning independently of the integrity and general coherence of the personality. Kapsambelis brilliantly observes that this split doesn't represent the product of a passive deterioration but it's the result of an internal conflict, of an "active principle of disorganization" (p. 97). This creates alterations in thought, feeling and relationships, not found in other mental illnesses. In order to name this process, Bleuler will borrow the concept of Spaltung from Freud and will coined the term "schizophrenia", literally divided or fragmented (Bleuler, 1950).

Starting from this concept of division, Jung believed that this condition didn't depend on the weakness of the conscience, but on the "primary force of the Unconscious". He was the first to apply psychoanalytic concepts to schizophrenia and to study the processes of association with the experimental method, highlighting the link between cognitive content and affective charge. He believed that there are many emotionally charged complexes that can take over the ego that yield to their domain: according to the author, this is how personality disintegration begins (Jung, 1994).

Through Jung in the uncomfortable role of ambassador, Bleuler tried in vain to convince Freud of the interest of his theory. The father of psychoanalysis didn't deal primarily with psychoses but simply argued that, in psychotic manifestation, the Ego return to its original undifferentiated state: it dissolves entirely or partially in the Id that doesn't know objects and reality. This implies not only a total loss of meaning or a widespread disorganization but also a change in the patient's relationship with people and objects in his environment, a way of interpreting the world different from the usual one (Freud, 1961).

Once the analysis of the concept of psychotic disorganization has been concluded, the author introduces that concept of disorganization in the psychosomatic sphere, a condition that is associated with emotional states such as anxiety, depression and guilt (Porcelli & Taylor, 2018; Tesio, Goerlich, Hosoi, & Castelli, 2019). These states manifest themselves not only through the body but also through dream activity, whose coherence is so relevant as to suggest a specific nosographic dimension (Settineri, Frisone, Alibrandi, & Merlo, 2019b).

Kapsambelis analyzes this condition starting from some key points of the theories of Pierre Marty (1963). The latter, observing the difficulty in mentalising and processing emotions in patients with psychosomatic disorders, theorized the concept of "operative thinking". Individuals presented, according to this theory, little verbal capacity and phantasmatic activity, with extremely concrete thought and turned to everyday reality, without imagination and affective investment (Todarello, Porcelli, 1992). In them, the author has hypothesized the existence of a psychosomatic personality characterized by some deficits that prevent the adequate psychological processing of emotions and traumas, for which these would be expressed mainly in the body. In fact it is difficult to distance oneself from pathological phenomena, such as psychosomatic ones, from childhood: in this sense, the subject tends to activate a series of defense mechanisms such as suppression (Cramer, 2000; Metzger, 2014; Settineri et al., 2019), in order to manage in an adaptive way the emotions linked to the pathological reality (Settineri, Frisone, Alibrandi, & Merlo, 2019a).

According to Marty, the disorganization linked to the psychosomatic condition in particular has an anti-evolutionary status, "whose driving force is to be attributed to the individual forces of death" (Smadya, 1998). If we examine the conception of instinctual functioning in Marty, it is clear that the death drive has no independence as a driving force but is closely linked to the life instinct, of which it represents the opposite. The crucial point is this: the death instinct, in this perspective, is not a force of destruction. To define it well, we could say that it is a movement or a push of deconstruction, which is activated whenever something hinders the constructive dynamism of the life instinct (Marty, 1976).

At this point, the author tries to find a link between psychotic and psychosomatic disorganization, highlighting possible similarities. Through a connection with Freudian theories, the presence in both of them of a withdrawal of libido from objects emerges, following frustration experiences that can lead to modes of disinvestment. This libido would then be invested narcissistically on one's ego (Freud, 1957). The study of classical psychosomatic texts shows us in fact that the organizations of characters that Marty, Fain,

David and M'Uzan have described in some psychosomatic patients are characterized, quite often, by elements belonging to the narcissistic constellations (Marty, 1925).

In this sense, a crucial point emphasized by the author concerns how the economic means made available to the ego will be used: the libido could in fact remain fixed on the ego, hypertrophying it (paranoid megalomaniac delirium), be projected on a current external object (paranoia or delirium of persecution), determine processes of splitting of the ego (schizophrenia) or could eventually invest the soma determining the onset of hypochondria.

The hypochondriac condition is analyzed within the article, indicating with the aforementioned construct an "economic overflow of the libido invested on the Ego" (p.105), which is manifested through a certain symptomatology. According to psychoanalysis, the symptom symbolically represents something inaccessible to the conscience (Kano, Endo, & Fukudo, 2018; Settineri, Merlo, Turiaco, & Mento, 2017); the hypochondriac symptom, on the other hand, according to Freud, cannot be interpreted symbolically, does not have a hidden meaning but rather represents the sign of something physical ("libidinal engorgement") that escapes psychic elaboration. Separated from the chain of symbolic references, the hypochondriac symptom is therefore unanalyzable (Freud, 1923).

In this model the organs "speak" and their language are directly represented by annoying sensations and pain (Cremerius, 1957; Egidi Morpurgo, & Civitarese, 2011). The split-off Ego observes and listens to these attempts at unconscious communication without being able to understand them, in the form of "anguished waiting for the body" (Freud 1895, p. 156).

Freud (1914) takes up this concept in his fundamental work on narcissism in which, although maintaining the location of the hypochondria among the current neuroses, he inserts it simultaneously in the context of narcissistic neuroses due to the particular change of libido towards the Ego. Finally, the analogy concerning dynamic functioning represents the point of contact between hypochondria and psychosis.

It could therefore be said that one of the questions that have arisen around the disorganization and its links with destructiveness is partly illuminated from an economic point of view: the processes of destruction are in fact closely linked to the balance between narcissistic and objective investments. Any imbalance exposes the ego to a disorganization that carries with it a potential for destruction (p.107), typical of different conditions and apparently distant pathologies (Settineri, Frisone, Merlo, Geraci, & Martino, 2019), as we have seen, but in reality characterized by the common denominator of the destructiveness inherent in the somatopsychic human unit.

References

1. Bleuler, E. (1908). Die Prognose der Dementia praecox (Schizophrenie-Gruppe). *Allg Z f Psychiat Psychisch-Gerichtliche Medizin*, 65, 436-464.
2. Cramer, P. (2000). Defense mechanisms in psychology today: further processes for adaptation. *Am. Psychol.* 55, 637–646.
3. Cremerius, J. (1957). Il concetto di Freud sulla formazione dei sintomi corporei. *Psyche*, 11, 125-139.
4. De Burge, A. (2001). La levèe de la suppression en psychosomatique. *Rev. Fr. Psychanal.* 1, 11–27.
5. Egidi Morpurgo, V., & Civitarese, G. (2011). L'ipocondria e il dubbio.
6. Fava, G. A., Cosci, F., and Sonino, N. (2017). Current psychosomatic practice. *Psychother. Psychosom.* 86, 13–30.
7. Freud, S. (1895). Legittimità di separare dalla nevrastenia un preciso complesso di sintomi come “nevrosi d'angoscia”, in vol. 2. *Opere di Sigmund Freud*.
8. Freud, S. (1914). *Introduzione al narcisismo*, vol. 7. VII, OSF, Boringhieri.
9. Freud, S. (1961). Neurosis and psychosis. In *The Standard Edition of the Complete Psychological Works of Sigmund Freud, Volume XIX (1923-1925): The Ego and the Id and Other Works* (pp. 147-154).
10. Freud, S. L. 'Io e l'Es (1922 [1923]). *Opere di Sigmund Freud*, 9, 471-520.
11. Jung, C. G. (1994). *Psicologia della dementia praecox*. Mondadori.
12. Kano, M., Endo, Y., & Fukudo, S. (2018). Association between alexithymia and functional gastrointestinal disorders. *Frontiers in psychology*, 9, 599.
13. Kapsambelis, V. (2018). Désorganisations et destructivité. *Revue française de psychosomatique*, (2), 95-112.
14. Kraepelin, E. (1921). Dementia praecox and paraphrenia.
15. Kraepelin, E. (1883). *Lehrbuch der Psychiatrie [Clinical psychiatry]*. (AR Diefendorf, Trans.). *Delmar, NY: Scholars' Facsimiles and Reprints*.
16. Marty, P. (1925). *Les injections intratrachéales de lipiodol au cours des affections pleuro-pulmonaires de l'enfant*. na.
17. Marty, P. (1963). La "pensee opératoire". *Revue Française de Psychanalyse*, 27, 1345-1356.
18. Marty, P. (1976). *Les mouvements individuels de vie et de mort: Essai d'économie psychosomatique*. Paris: Payot.
19. Metzger, J. A. (2014). Adaptive defense mechanisms: function and transcendence. *J. Clin. Psychol.* 70, 478–488.
20. Modena, G. (1907). Il corso di perfezionamento presso la Clinica psichiatrica di Monaco. *Giornale di psichiatria clinica*, 755-760.
21. Motofei, I. G., & Rowland, D. L. (2018). The mind-body problem; three equations and one solution represented by immaterial-material data. *Journal of Mind and Medical Sciences*, 5(1), 59-69.
22. Porcelli, P., and Taylor, G. J. (2018). “Alexithymia and physical illness: a psychosomatic approach,” in *Alexithymia: Advances in Research, Theory, and Clinical Practice*, eds O. Luminet, R. M. Bagby, and G. J. Taylor (Cambridge: Cambridge University Press), 105–126.
23. Settineri, S., Frisone, F., Alibrandi, A., & Merlo, E. M. (2019a). Emotional suppression and oneiric expression in psychosomatic disorders: early manifestations in emerging adulthood and young patients. *Frontiers in psychology*, 10, 1897.

24. Settineri, S., Frisone, F., Alibrandi, A., & Merlo, E. M. (2019b). Italian adaptation of the Mannheim Dream Questionnaire (MADRE): Age, Gender and Dream Recall effects. *International Journal of Dream Research*, 119-129.
25. Settineri, S., Frisone, F., Merlo, E. M., Geraci, D., & Martino, G. (2019). Compliance, adherence, concordance, empowerment, and self-management: five words to manifest a relational maladjustment in diabetes. *Journal of multidisciplinary healthcare*, 12, 299.
26. Settineri, S., Merlo, E. M., Frisone, F., Alibrandi, A., Carrozzino, D., Diaconu, C. C., & Pappalardo, S. M. (2019). Suppression Mental Questionnaire App: a mobile web service-based application for automated real-time evaluation of adolescent and adult suppression. *Mediterranean Journal of Clinical Psychology*, 7(1).
27. Settineri, S., Merlo, E. M., Turiaco, F., & Mento, C. (2017). The symbol theory in S. Freud, CG Jung and CS Peirce. *Mediterranean Journal of Clinical Psychology*, 5(2).
28. Smadja, C. (1998). Après coup. *Revue française de psychanalyse*, (5), 1441-1452.
29. Tesio, V., Goerlich, K. S., Hosoi, M., & Castelli, L. (2019). Alexithymia: State of the Art and Controversies. Clinical and Neuroscientific Evidence. *Frontiers in psychology*, 10, 1209.
30. Todarello, O., & Porcelli, P. (1992). *Psicosomatica come paradosso: il problema della psicosomatica in psicoanalisi*. Bollati Boringhieri.



©2019 by the Author(s); licensee Mediterranean Journal of Clinical Psychology, Messina, Italy. This article is an open access article, licensed under a Creative Commons Attribution 4.0 Unported License. Mediterranean Journal of Clinical Psychology, Vol.7, No. 3 (2019).

International License (<https://creativecommons.org/licenses/by/4.0/>).

DOI: 10.6092/2282-1619/2019.7.2347