

Jacques-Alain Miller  
*How Psychoanalysis Cures According to Lacan*  
The First Paris/Chicago Psychoanalytic Workshop, 1986

I

My title is meant as a tribute to Heinz Kohut's last work, *How Psychoanalysis Cures*.<sup>1</sup> As to Lacan, I suppose there are both people acquainted with his thought and people who will hear of his existence for the very first time. I will try to keep contact with both parts of the audience.

I shall begin with various misconceptions about Lacan. Perhaps Dr. Richard Chessick, who so kindly gave me his book yesterday evening, will not mind if I begin with his misconceptions of Lacan.<sup>2</sup> I am sure that he knows a lot more than I do about Heinz Kohut, Otto Kernberg, and others, but perhaps I could refer to the two pages he devotes to Continental psychiatry and psychoanalysis, and help clarify some points on Lacan.

The first misconception is that Dr. Chessick placed Lacan, as is usually done in this country, on a par with Roland Barthes, Claude Levi Strauss, Michel Foucault, and Jacques Derrida. That occurs on page 286 of this book, and I call this the "post-structuralist error."

The second misconception is a fine point on institutional matters. Dr. Chessick says that in the famous "pass" which Lacan instituted in his school, the students, one's fellow students, could decide who was going to be a **training analyst**. The idea that Lacan allowed fellow students to decide who was going to be a training analyst is a misconception. He had them participate in the process, but the final decision rested with a body of analysts. In any case, the very idea of **training analysts** is not Lacanian.<sup>3</sup>

4

The third misconception that I find is that for Lacan, Chessick writes, psychoanalysis is hermeneutics. Certainly this depends on the definition one wants to give to hermeneutics: the science of meaning or the definition one gives of interpretation. But I believe it would have been important to Dr. Chessick to take into account the fact that Lacan made a statement, a very clear statement, that psychoanalysis is not, from his point of view, hermeneutics. So, this presents yet another difficulty.

There are five or six parts on Lacan in this book, but I will only address five misconceptions. The fourth misconception concerns the biological forces of aggression. According to Dr. Chessick these were ignored by Lacan, even Freud's "death instinct." Well, this is an error. As you know, Freud's notion of the "death instinct" was rejected by the mainstream of the psychoanalytic community at the time he introduced it. And, if I may say so, Freud was isolated from all his pupils because of this concept. Even one of the most faithful, like Ernest Jones, found this concept difficult to accept because the death instinct looks as if it were impossible from a biological viewpoint. And that is a problem. Neither ego psychology nor structural theory accept the death instinct. But contrary to Chessick's misconception, **Lacan-I** may say this very emphatically-has from the outset always supported the concept of the death instinct. I recently published an intervention of Lacan's from a text by Bion, recorded in the archives of the Institute of Paris. This intervention was made in 1938 when Lacan answered his own analyst, Rudolph Lowenstein, who was in Paris for ten years before coming to the United States. In this contribution Lacan emphatically developed Freud's concept of the death instinct.<sup>4</sup> I would say it is a cornerstone of Lacan's own teaching: named the "death instinct." If we take the death instinct it may enable us to understand the true relationship of Freud's thought to biology, a relationship which is not limited to a single dimension. Freud's thought, even though it takes something from biology, is not fundamentally biologically oriented.

Dr. Chessick's fifth misconception is that Lacan's seminars were surrealistic (p. 292) and that his theory was also surrealistic and, therefore, cannot be proved by clinical evidence or research. Lacan's seminars took place in Paris every week for approximately thirty years. They were recorded, and I am writing them up. I began during Lacan's lifetime. Six have been published in book form; three have been published in journals.<sup>5</sup> In the bulk of twenty-five volumes, and when they appear in English, you will see for yourselves whether they are sur-

5

realistic or not; whether they are not a complete and very careful reading, not only of Freud, but of analytical literature in every language. Lacan's teaching encompassed all of Freud's works, and his clinical references are constant in his Seminars. During his lifetime Lacan attended clinical hospitals. He went regularly to St. Anne, the central psychiatric hospital in Paris, where he gave a case presentation to an audience, and for an hour and a half up to two hours Lacan tried to get inside the case. We observed, I observed these presentations, from the beginning of the 1970s to the end of Lacan's life. Every two weeks we listened and learned from these case stories. Some of these sessions have been recorded, and as soon as we find that sufficient time has elapsed, they will all be published. You may read one of these case presentations in Stuart Schneiderman's book called *Returning to Freud*, which I wrote up from the material.<sup>6</sup>

Those are some of the misconceptions in Dr. Chessick's book. I will go back to the first one; that is, the misconception of taking Lacan on a par with the names I mentioned earlier. Claude Levi-Strauss was born in 1908 and is an anthropologist, as you may know. Roland Barthes was a bit younger, and is now dead. He was a literary critic all his life. Michel Foucault was born in 1923 and was a philosopher. He was a student at the Ecole Normale Supérieure, where I studied later. Foucault is known for his work on the history of thought. Jacques Derrida was born in 1930 and is a philosopher. He was also a student and a teacher at the Ecole Normale Supérieure. His speciality was the history of philosophy. Those four people whom you can find in the same sentences in Dr. Chessick's book are grouped under post-Structuralist psychoanalysis and philosophy: the work of Barthes, Levi-Strauss, Foucault, and Derrida. But what did Levi-Strauss, Barthes, Foucault, and Derrida do for a living? They taught and they wrote. They gave classes. They were intellectuals. They were teachers. They were university people.

What did Lacan do during his lifetime? There is one answer. He saw patients. He was not of the generation of Derrida, or Foucault, nor Barthes. Lacan was born in 1901, and died in 1981. His analytic practice was not a small practice on the side. It was a full-time practice. In his lifetime he saw more patients than any other past or present psychoanalyst, in part, also, because of his introduction of the short session. He had an enormous practice. I think I surprised Dr. Merton Gill when we had lunch together today. He asked me a question about

6

numbers, and I said **hundreds** of patients. And I may add that quite a few French psychoanalysts from all the different groups were analysands of Lacan. So keep that in mind. Lacan was a practicing psychoanalyst, after having been trained as a psychiatrist, not as a student in philosophy. I have nothing against students in philosophy. I was one.

You know the important interest that Lacan elicits among academic people, from literary critics to film theorists. But he was a practicing analyst. He began as a psychiatrist. He was a friend of Henri Ey, the foremost French psychiatrist of this century. Lacan was the clinical director in a psychiatric hospital and in 1932 he submitted a thesis on paranoia. That was not exactly yesterday. What was his idea at that time? Before I enter into that matter, I should add that Lacan had read Freud's theories on the super-ego, masochism, through examining a clinical history, to produce a new clinical category in his thesis: selfpunitive psychosis. That was his idea at the time. It was not a philosophical thesis. It was not literary material. It was from one case he had followed in St. Catherine's Hospital. And Dr. Chessick claims that Lacan was not a clinician! All his fellow psychiatrists, even today when they give testimony, even when they are not psychoanalysts, or when they are psychoanalysts in other groups, they all recognize that Lacan had the finest clinical sense of his generation. This is perhaps the most important thing to stress at the beginning of any study of Lacan. That is why I feel gratified to be here in a clinical hospital. In Lacanian clinics we maintain very close links between teaching and practice.

Lacan went into analysis for seven years with Rudolph Lowenstein in France in the 1930s. He was accepted as a training analyst in 1938 by what was then the sole international psychoanalytic group—the International Psychoanalytic Association (IPA)—, also the sole psychoanalytic group in France. At that time, in 1938, Heinz Hartmann was also practising in Paris. Hartmann and Lacan both received the title of training analyst the same year in Paris. That gives you an idea of Lacan's age, and of what we are speaking in the French *Societe de Psychanalyse de Paris*. In 1953, there was a split in this society. The split occurred particularly with concern over the status of lay analysis (or not). The majority of the IPA group wanted to impose what is now, I believe, common American practice, and was common American practice; to keep psychoanalysis for medical doctors. Another French group did not want to do this. At that time Lacan paid no attention to the matter of championing the idea. He just wanted to resign from this

7

group. His resignation was interpreted by New York, by Chicago, and by the other centers of psychoanalytic power, as an opportunity to split from the IPA.

Lacan **resigned** from the French group. He was not expelled. Between 1953 and 1963 his principal endeavor was to have his group recognized by the IPA. During this period the IPA decided to exclude Lacan. They were prepared to take everyone back into the International, to take all Lacan's analysands back, on one condition: that Lacan not train psychoanalysts any longer. Lacan decided not to accept that. Instead, in 1964 he created his own school, and was surrounded by pupils who did not accept his exclusion by the IPA. I would say that this is really a Vatican style, a style that even the Vatican (I know I am speaking in a Catholic hospital) does not practice anymore. It is really very, very old. If you read the minutes of the IPA concerning Lacan, it brings back memories of a very, very long time ago.

In 1966 Lacan published his first book since writing his thesis of 1932 (which was not published until 1975).<sup>7</sup>

Now let us take up the question of what his chief motto was during this time. His motto was "the return to Freud." What did he mean by that? Well, he meant it essentially as a statement against what is now a part of the context of American psychoanalysis to such a degree that you do not even see it anymore. Dr. Bernard Rubin said to me yesterday, "It's like the wallpaper on the wall. We don't see it anymore: ego psychology." In the beginning of the fifties Lacan took this "return to Freud" as a motto that he opposed to what is called "ego psychology" which he considered, and we consider, non-Freudian and even anti-Freudian. I will not present the theory of ego psychology to you. It stresses the ideas of an autonomous ego and of a non-conflictual sphere. But I would go so far as to say that the immediate impact on psychoanalysis of shaping analytical practice from the perspective of an autonomous ego left such a void in **real** practice, that what developed as its opposite were the object-relations theory schools.

How is American psychoanalysis structured today? How are the problematics of American psychoanalysis structured? They are structured between concepts of the autonomous ego and of object relations. Given this, what is the actuality of your debates in the United States? I would say the actuality is made up of different blendings of ego psychology and object-relations theory.

Those ideas that are presented to us as a novelty from Heinz Kohut

8

or from Otto Kernberg are, as a matter of fact, different types of blendings of those two chief directions. On the one hand, this situation extends from the American position between Heinz Hartmann and Anna Freud; and on the other hand, Karl Abraham and Melanie Klein. And Melanie Klein influenced Donald Winnicott, the British school. From my point of view, Kohut is an offspring on this side. I place Kohut here because the very concept of a self is distinct from the ego; because the stress on the self comes from Winnicott. Those who refer to a self imply that contrary to the ego the self cannot be considered *per se*, but must be taken within its milieu, its context, its environment. When you stress "ego," you stress internal conflicts. When you stress self, you stress a function which has no meaning except in a context, in an environment. The self has no subsistence except in relation to an object, essentially. We have the "transitional object" of Winnicott, and you know that Kohut promoted what he called the "self object."<sup>8</sup> In English, it can be a funny word: "self-object." You can get "SOB," an acronym I was using when reading Kohut, and then I noticed that, well, never mind. But just the word . . . .

In my opinion, Lacan is not just one more author in psychoanalysis. I see lists where Americans say: "We are eclectic, so we take into account what we have from Melanie Klein, Margaret Mahler, Otto Kernberg, etc." I do not want Lacan to be "one name more" in this kind of list. Lacan did not produce another blending of ego psychology or object-relations theory as they continue to spring up, more everyday in American psychoanalytic literature.

First, Lacan did a careful re-reading of Freud. He never pretended to be anyone else other than a pupil of Freud. He considered that his teaching restored the true Freudian inspiration to psychoanalysis. You may agree or not. But that was his position. And in this re-reading Lacan tried to reformulate what Freud had said in his (Freud's) language, but with the scientific references he had at his disposal at that time. These were essentially references to the science of nature. It is a known fact that Freud was not interested in many other things going on at the same time he lived in Vienna: for instance, the importance of logical positivism and of mathematical logic. Freud was very alienated from that. Lacan's point of view is that through the material he had at his disposal, Freud was, nonetheless, saying something other than what he seems to mean on a first reading. As such, Lacan's teaching encompassed all of Freud's works, and tried to recapture the original inspiration of psychoanalysis before it was distorted by ego psychol-

9

ogy. It is on this goal that Lacan's work stands or falls. I mean, you won't manage to do one iota more in psychoanalysis than Lacan has done. My point of view.

## II

Now let's get to the point of how analysis cures which is the title of Heinz Kohut's last book. From Kohut's point of view, if you hope to know how analysis cures, you have to know where the illness stems from that you are to cure. There is a very simple and deep answer to that in Kohut. In his last book, which I have here, the answer is a photo: the self, the self each one of us is, the self as dependent, as articulated, as part of its milieu, its environment. But that is only a very general answer. Kohut wants to know what is necessary in this milieu for the survival of the self, for the well-being of the self, for what he calls the "self-object"? But what is a self-object? By working like a detective, I have chosen one word which is, for me, the nucleus of the self-object. Its function is empathy and empathic responsiveness. To exist, as such, the self needs to have a response from another, from something else. As Kohut says this is a response from another human being who gives empathy, comprehension, understanding. Kohut called that "psychological oxygen." When a self does not have this articulation, the linkage to a positive response from a self-object, there is no psychological survival. Well, that is not such a discovery!

Still, that idea alone is completely different from ego psychology because, in Hartmann's thought, the ego is not defined in relationship to anything else outside the milieu. For Hartmann the ego as such is a power of mastery. You may evaluate the different grades of this mastery by its instincts, the demands of the superego, etc. In objectrelations schools the difference one sees immediately is that the central function is not the ego itself. Rather an object, or whatever name you call it, is defined in relationship to something else. "It" gives a sympathetic, empathic response to what you are, to your being. What, then, is the fundamental illness that psychoanalysis can cure in Kohut's perspective? The fundamental illness is the lack of a responsive selfobject. Whether it be the psychotic or the neurotic, Kohut's theoretical answer is always that a good self-object is lacking. There may be a complete lack or a partial lack, but that is Kohut's fundamental explanation of mental illness.

## 10

How, then, does analysis cure according to Kohut? The answer is very simple. The analyst offers himself as a self-object. That is, as a substitute. I would say as a transitional substitute for the good selfobject that the subject supposedly lacked in his development. And by his presence, the analyst gives support to the reformation of this relationship such that, in some way, Kohut thinks he has gone beyond castration anxiety. Kohut says that oedipally-oriented psychoanalysts believe that the final word is castration anxiety. Freud believed that. But, in Kohut's opinion, what actually lies beyond castration anxiety is the anxiety of not having a response from the self-object. That is more terrible. Kohut gives a very fine example of a dream marking a very important moment in the analysis of one of his patients: a moment when his patient sees his mother from the back in the dream. In this dream Kohut says the patient's most horrible fear is expressed: the fear that he could never again elicit his mother's smile.

The smile is a fundamental response. Indeed, in Kohut's terms the self waits for the smile from the other. I would say that the accepting, approving smile is the nucleus of the self-object for Kohut. It is the last word. For him the last word of analysis is a kind of "yes." The self is looking for a yes. I chose this vignette in Kohut's book, and I believe it was also suitable to choose the photo of Heinz Kohut on the back of the book. It is a smiling Kohut. I believe this was the fundamental mark he wanted. For him the answer is smiling.

It is important to work with something other than an idea of the closed ego; something like what Kohut calls a self which is fundamentally and essentially connected to something else. Self and selfobject. There is a connection. You have no closed narcissism, no self-contained "agency," but openness to something other. It is, I would say, a precondition to dialectics, this openness. Kohut believed that here he shifts emphasis away from Freud. While Freud stressed knowledge and truth, Kohut believed that his own originality lay in stressing empathy and responsiveness instead of the processes of knowledge, truth, and insight. And so he explained the different "atmosphere," as he called it, of his analytic practice. If you compare Kohut's theory with ego psychology, ego psychology creates a rigid atmosphere. With his self-object theory we had a more friendly atmosphere in the experience. And you understand why? Because it is the experience of a smiling self-object.

However, I believe responsiveness and empathy are a false opposition. This opposition can be "integrated," then, if you take psycho-

## 11

analysis from the point of view of language and speech, which is the Lacanian perspective. From the Lacanian perspective, you (if I may introduce something from Kohut's language which is not ours) may "integrate" the process of knowledge and truth with the process of empathy and responsiveness. Let us say, first, that we create analysis **through** language and speech, **from** language and speech. I want to stress from the outset that while it is not a linguistic conception of psychoanalysis, neither is it non-economical or only non-biological as such. And to this is what I want to give you access. First, let us note that when you are a psychoanalyst, analysis operates chiefly through everything you do not do in psychoanalysis: for example, touching and prescribing drugs. You do not go and check the body. You must not even desire too much to touch. Also, various drugs tend to produce an altered state of consciousness. It is very clear that what has defined psychoanalysis as such is *not doing* this kind of thing, *but* eliciting talking. Despite their differences of theory and technique psychoanalysts can recognize each other when they retain this practice: eliciting talking.

But that in itself can be a problem. Eventually an analyst sees the famous mute hysterics who come precisely to keep silent, because somehow, to keep silent is a quicker way for her to constitute herself as an enigma and leave it up to the analyst to do the work. This is a way to require the analyst to try to obtain from her whatever she can say by any means. Or, an analyst can resolve the problem very quickly by throwing her out. If you accept these cases in psychoanalysis, if you do not shrink back from the excess of hysteria, you begin to have a more interesting practice than with the routines of obsessional neurosis. This is a matter of preference. But hysteria is another "atmosphere," if we speak of atmosphere. So, let's speak of atmosphere. But it is not a matter of whether the atmosphere is friendly or not, as Kohut proposes. I would say that fundamentally the atmosphere of analysis is an **interpreting atmosphere, if I may use the term**. That is, whatever the patient says is supposed to mean something else. Moreover, I would say, that the motto of the subject in psychoanalysis is fundamentally (whether he says so or not) "I don't know." As a psychoanalyst you have to bring, or keep, the analysand at this state of an "I don't know."

"I don't know" could be the meaning of the unconscious. Yes? In any case this "meaning" establishes the psychoanalyst's position. What he may say to the patient is this: "When you say you don't know, as a matter of fact, you know." In this I would say, you have the uncon-

## 12

scious proper. You say that it does not mean anything, and I the analyst say it means something. You say: "It is not my mother." It is your mother, precisely for this reason. This is the beginning of Freud's paper on "The Unconscious."<sup>9</sup> Precisely at the point when the patient says: "It's not my mother in the dream," the analyst says, "Yes it is." It is precisely in this difference that the essence of the psychoanalyst's act resides. You know what Freud says. The very fact that the name, the word "mother," is in your sentence-even if you affix a negation to this word-,the very fact that this word is there proves that it is your mother. The "not my mother," the negation, is equivalent to a "made-in-Germany" like "made-in-unconsciousland." But, that's Freud.

I would say that the capital thing in analytic experience is this supposed knowledge, this knowledge **supposed** to be somewhere, this knowledge which enables the analyst-be it right or wrong, be he or she right or wrong-which enables the analyst to sustain the subject in a state of speaking without knowing what he is saying. You recognize the analyst when he or she is able to introduce a subject to this state where he speaks without knowing what he is saying, and where some knowledge that is somewhere could mean something else, or could mean something. The analyst must sustain himself in the position where this supposed knowledge is the dimension of the speech elicited in the patient. Let's do a short cut now. For Lacan, this supposed knowledge, which is in some way the meaning of the unconscious, this supposed knowledge is the fundamental support of transference. By using the idea of response which is Kohut's term, we could say that the psychoanalyst's position implies a kind of "I understand," an understanding position.

But we have to consider how to take this concept of understanding, because the analytic position is not one of approval. It is a position, as a matter of fact, of suspended approval because the analyst, on the contrary, does not know what it (the analysand's speech) means. And you know it does not mean what the patient wants it to mean. Thus, the analyst is fundamentally marked by a certain reserve. He or she is in peril. I want to expand on a very fine example of that which I found in Kohut's book. He speaks of a patient for whom he felt a great deal of comprehension and understanding, a patient who had spent much of his childhood alone, left by his parents who went away often. The patient was reliving this sad experience of solitude and deprivation in analysis. Kohut felt deeply for him. There was a memory which kept coming back to the analysand. In this vivid memory, the boy was in a

13

room in his bed, and his mother was leaving him, going to a masquerade, a masked ball. She was disguised as Madame de Pompadour and she was coming to kiss him before going away. Kohut says, and I quote because it is a very fine account: "Needless to say, I felt a stirring of compassion every time this memory emerged, and I communicated my emotions to the patient on one occasion in the belief that he needed this direct expression of my emotional understanding in order to take a step forward in overcoming an old sense of abandonment" (p. 158). And, very honestly, it is at this point, when Kohut manifests himself to the patient as a comprehensive self-object, that he knows that his interpretation was not the meaning of the memory for the patient at all. This memory of his mother as Madame de Pompadour kissing him goodbye was, on the contrary, an enchanted memory of consolation for the patient, because it was a period when his parents were young and enjoying themselves. So, the meaning was different than Kohut had thought.

You understand that a Lacanian could make a lot of it when Kohut says: "And I never understood the truthful nature of the parental images. The father, dressed up as a knight, proved to be a much more important aspect of the memory than I had ever suspected." In this Kohut gives us the example of precisely how empathy or responsiveness in psychoanalysis can be the most misleading of attitudes. First, this memory meant exactly the opposite of what Kohut previously thought. Second, in interpreting the patient's memory of separation from the mother, he missed the point. The central figure there was not Madame de Pompadour. It was the father as an armed knight who was the legitimate possessor of this beautiful mother. In Kohut himself we find something that tells us in what sense interpretation is not emphatic responsiveness. In this memory he pinpoints something that means exactly the contrary of what he felt about the patient.

What is the analyst's position in the cure, then? I would say it is first the position of incitor to speech; and, then, it is the position of guarantor of analytic work. A guarantee. That is a fundamental position because it is what the analyst demands from the patient. Free association. Say anything. Don't choose. Say it as it comes to you. Lacan used to say that the very position of the analyst and his own unconscious are always completely present in the way he tells the patient how to give himself to free association. Lacan said there was not any sentence more important than that one, and that its efficacy lay in the way the analyst could transmit it. What does the analyst say, then? He says to

14

the patient, "Say what you like. Say it without choosing. You are going to say stupid things." As a matter of fact, that's what happens. "You are going to say trivialities. You are going to say things you would never think to say in any other part of your life." And the analyst is there to guarantee that these things (the *dechets*) are worthwhile. "Do it. It means something; do it and it will be useful." The analyst is there to say that what you believe you are saying by chance, is, as a matter of fact, perfectly determined, has a reason, has a cause.

And that, we may say, is the scientific inspiration of psychoanalysis. From my viewpoint, the scientific inspiration of psychoanalysis is this: psychoanalysis, in some way, pushes the principle of causality to the extreme, the principle of causality being that nothing happens without a reason. There is a reason for everything. In psychoanalysis this principle is pushed to the extreme. The presence of the psychoanalyst "guarantees" this act of faith which analysts elicit from the patient, and which is necessary at an operational level. In some way the analyst makes the patient believe that everything has a cause. No matter how you interpret the code, biologically or not, this causal reference is essential. That is why I say psychoanalysis could not have been invented except in a scientific context where "cause" had a meaning.

Even from the beginning, when a patient comes to see an analyst, the cause is present, because, for this visit to occur it is necessary that the patient have preinterpreted his symptoms. To go to an analyst, the patient must have an **idea that something is different** (not in what appears to be) in what he is suffering; there is something in the order or register of an "I don't know." But the patient's presupposition is also **that** there is something to know, something that can be known through speech and language. The patient goes to someone who is not going to get inside his body with various tools, someone who is not going to make him jump and sing. He goes to someone who is going to ask him to talk about what he does not know. Psychoanalysis is this: you are made to talk about what you do not know.

That is why Lacan writes the subject like this, with an "S" and a bar: He writes it like that because it is not so much a question of a subject, as it is a question of the subject matter, what is spoken about, and which we do not know. Eventually Lacan writes the subject as an "x." On other occasions, in Amherst (1985), for instance, I compared the ego, the self, and the subject; the Lacanian subject which is a pure "x."<sup>10</sup> The subject as a pure "x" means that from within the field of language and the function of speech, we articulate the dependency of

15

the subject on language and speech. Interpretation could not cure anyone if we did not define the subject fundamentally by its dependency on language and speech.

From this perspective the self-object is only a partial thing in the picture. The radical view of Lacan is that the subject as such is a response of the Other. It means that in speaking of a subject we are not speaking of an individual, or of a person with all the properties of the person. Rather, we have to orient ourselves to speech in psychoanalysis. We Lacanians do not do what Freud was doing; that is, trying to verify the truthfulness of the facts conveyed by the patient. We do not do that anymore. That would be a very powerful way to investigate the personality of an individual. And eventually one would refer to the individual's family, but that is not psychoanalysis any longer. In psychoanalysis we keep ourselves outside everything else except the speech; what the subject is telling us. All analysts, as a matter of fact, do that. But they do not want to see the consequences of it. The consequences are that the subject matter of this talk is not predetermined, but is **going to be constructed** in the analysis. The patient's unconscious knowledge . . . is going to be affected in the cure.

In this context, perhaps I can say a word about biology. We may say that we speak of a subject which is completely produced by language, but there are other facts and data. The subject comes biologically endowed with a body and with a sex. First, let us consider the connection between biology and psychoanalysis in a general way. From the beginning of psychoanalysis, psychoanalysts have not made a single contribution to biology, not a single one. When psychoanalysts refer themselves to biology, it is as a pure guarantee that their work have a referent. But they do not have that guarantee; they have biology. Even when psychoanalysts speak of energy or psychic energy they forget that "energy" is a very precise term in physics. You have energy when you can measure it. It is not something that flows in the air like that just because things are animated. That's a pre-scientific idea of energy. Energy is a constant. Read any current manual of physics. You may dream you will manage to make contemporary energy quantitative someday. But there is no one less well-equipped than the psychoanalyst to get inside this realm.

There are data, however. Biological facts exist in psychoanalysis, but only insofar as they have gone through language and speech. Those data do not exist apart from the meaning that was given to them during the history of the subject. Let us take an example. Say you are

16

born with a hunchback. That's a gift of nature. It happens that way sometimes. You may consider that a calamity. You may be in despair. But it may also happen that in your culture, you are a prince or a king, and suddenly you make sense of this hunchback. For instance you decide to make **yourself** a calamity for others. And so your hunchback grows into a weapon. It helps you to hide your ambition, or it may help you to obtain the love of women who are touched by your handicap. We know that in certain feminine positions the handicap of the other is a condition for desire. So you may possibly put your hunchback to use in many and various ways. The same thing is true with all biological data. Those biological data grow to existence in the unconscious-what we call the unconscious-insofar as they grow into what we may call signifiers: like the hunchback who may elicit a lot of different meanings.

There is another aspect to this hunchback. One may decide to take the hunchback off. But it is not the psychoanalyst who will do that. If you are a surgeon you may try to operate. But if you go to a psychoanalyst, it is to get to the core of what signifier your hunchback is. It may be difficult to lie on the couch with a hunchback, but, nonetheless, from within the field of language and speech the analyst does not hope to cure the hunchback as a surgeon. If someone is sure he has a brain tumor, he does not go to a psychoanalyst. He goes to a surgeon or to a medical hospital and has surgery. When we speak of biological data, then, let's not forget the practice we have, the means we have. Sometimes, in reading analytic literature, you wonder what those analysts are doing all day? Are they operating on someone; are they? No. They are listening to someone, and trying to give a response. Some give a smile (Kohut); some are in a bad humor, but they "operate" with that. Now I do not believe that Kohut's smile was a smile. Kohut's smile was a signifier. That is very clear.

Today some people consider that (Kohut's smile) Freudian. And this is justified by looking back to the discovery of the unconscious in Freud. I alluded in Amherst to the Arlow and Brenner work of 1964 which I have read many times."<sup>11</sup> I read it through once. Since then, I go to this book for reference purposes. You know I was disconcerted by this book. Its format delineates the first discovery of Freud, unconscious, pre-conscious, conscious (the topographic theory); and then the structural theory [(from 1923, *The Ego and the Id*)] (Arlow and Brenner, p. 1). These are incompatible one with the other. They save the structural theory, and discard the third or the first series of Freud.

17

That way of addressing oneself to the history of thought shows an incredible naivete. For them the discovery of the unconscious in Freud keeps all its validity as such, as does the means by which he began to understand bit by bit what the unconscious was (which did not exist before Freud I should say). It existed in the head. It made poets create. It made hysterics agitate. But it had not been defined as Freud did it. And what is this discovery? It is, essentially, that if you interpret actions, the psychopathology of everyday life, wit, and so on, what do you have? You have the facts of language. It is through the facts of language that Freud introduced us to the dimension (he called) of the unconscious. What is he doing? He is doing translation. He is translating doings. Not with a dictionary of symbols as Jung and his followers tried to do, but with what Lacan called one's own dictionary that everyone has in his head-which is called "free association." However, such translating is not done through referring to things. It is done as an internal translation, making word work on word, sentence work on sentence, verbal work on verbal, up to the point of period.

This is not pre-conscious work. The problem of the pre-conscious is that the subject needs words over which he has no control, and which come precisely from the repressed. What Freud discovered-his discovery of the unconscious-is that there is a logic to those words. When we speak of language in Lacan, in psychoanalysis, it is not a means of expressing what you think (your thought or your mentality). Language is not a means of expression. I would say that language is weird. You are not at home in the Freudian unconscious. What is so clear in Freud, what he maintained to the end, is the Otherness of the unconscious: that you cannot feel at home in the unconscious. And the Freudian unconscious, contrary to the Kohutian unconscious, is not smiling at all. Freud called that *das Unheimliche*; the "uncanny." You believe you are in your own house, and as a matter of fact you are not at home in your own house. Freud taught that at this unconscious level, you are in relationship with a truth which is not fundamentally smiling, which is a horrible truth that Freud called "castration." That is why for Theodor Reich, for instance, surprise was so important in interpretation. Interpretation was not an explanation, but a surprise. Do you understand the word, surprise? Because in the surprise you feel this Otherness. You recognize, of course, that analysis also has this capacity to make surprise work. Well, I know that Dr. Gill is obliged to go in a few minutes, so if you don't mind, I will stop right now so the

18

audience, (especially him) if you want, can surprise us, or me anyway, by some questions, interpretations, objections, and disagreements.

III

Question: (Merton Gill) I am sorry that I will have to leave in five minutes. I thought that the afternoon was ending at three o'clock and I made an appointment that I have to get to. I appreciate the opportunity to make some responses to this talk which I would like to characterize somehow, because it seems that in addition to the content of your talk, if I may say so, what I find especially moving about it is the affect with which you speak, and the fact that you speak relatively extemporaneously. That, of course, shows not only your command of your subject, but your command of yourself. And I would like to compliment you on that. With regard to your discussion of Kohut, I think there may be some misunderstanding. I am not sure. If there is misunderstanding, it is your equation of empathy with understanding. I don't think that Kohut meant that. I think that Kohut did say that for an interaction to be properly labeled a psychoanalytic one, the issue of empathy had to be there. But he meant by that only the attempt to understand the other person. He did not mean it was necessarily a correct understanding. Your point, however, is well taken in that Kohut did say in a number of places various things that make it sound as though he did reduce what was mutative in analysis to responsiveness, and something is missing in him regarding what you referred to as knowledge. I think that when you actually read Kohut, you see that this is a misreading of him, even though he is significantly responsible for it. The very illustration that you gave, and it was well-chosen I think, does demonstrate that point because it shows that Kohut was prepared to accept the possibility that he might have felt that he was being empathic with what was going on in the subject, but that he could be mistaken. And the fact that he could be mistaken, and kept himself open for a possible other understanding, shows that as a matter of fact he was taking account both of knowledge and of responsiveness. And I think that you do too, and in that sense there is an agreement there.

There is another aspect of your lecture that I was really delighted with because it agrees with something I've been yapping about for a

19

long time—"yapping" I guess doesn't have a French equivalent; I suppose it does but I don't know what it would be—something that I've been talking about for a long time and feel very strongly about. And that is what you had to say about biology. I have often been in an argument about this point with my friend Lawrence Eagle, who says: "It's not enough just to understand meanings, you have to understand the 'provenance' of the meanings." By that he seems to imply that we have to understand the biology. In that sense I think you are entirely correct when you say it's a matter of what something means. Take, for instance, your illustration of the hunchback. A hunchback would mean different things to different people, so it isn't the hunchback *per se*. But, I do have some disagreement. The nature of the disagreement is that the fact remains that we are all biological creatures, and as biological creatures there are certain urges that we possess in common. It is perfectly true that the meaning that these urges have to us can differ from one person to another. We know that one individual can respond to his sexual stirrings in a way that's utterly different from the way another individual responds. But what we do know is that all people have sexual stirrings and they respond in some way. And that means that the field is not entirely open. In other words, there are certain contents that have to be taken account of that are universally present even though the meaning they have may be very different. And that's the place where, if I understand you correctly (and I'm not sure that I do despite the clarity with which you spoke, and let me commend you on that, too. I'll admit I hadn't expected that clarity from a Lacanian.): that is, your emphasis on language. I think that your emphasis on language is in a way equivalent to the emphasis on meaning, and there I completely agree with you when you speak of the signifier and so on. However, at the same time it seems to me that that omits something important. What it omits is the universality of the signified. That is to say, it seems to me that it was terribly important to Freud to insist on the role of the body, not as a biological body, but as a body that had meaning. I think that when one talks that way, one has to recognize what one is saying over and above and beyond the idea that language is everything in the sense that whatever it is has psychological meaning only insofar as it is signified. But there are these universals. Thank you very much. Please forgive me . . . .

Miller: Well, perhaps I'll respond in absentia. First to acknowledge the kind words you say. And, while you disagree with me, I am not prone

20

to disagree with you. I mean, sure we are biological creatures, and sure there are biological determinants. And why not say that there are urgencies and sexual urges; also hunger, thirst, and so on. The problem is this: what is this thing, **the human species**, if you permit me to use this expression? Perhaps if we want to dwell on biology and physiology, we can refer to one of the topics presented by Ellie Ragland this morning. The human being in particular is born premature—that is to say he is dependent for a long time on the environment and on other beings to grow—for an especially long time if you compare him with animal species. During all that time, I would say, and take a developmental perspective to fit the audience, in order to get his urges satisfied, the human being has to go to another, has to call for the other, has to beg for that. You know, for instance, that even the cries of the small infant are not at all natural. They are very soon a part of language. You know that the sound patterns of very young children, some days old, some months old, have been observed. The sound pattern is distinct in different languages from three months on. The baby's cry is already patterned on language at three months of age. And from the beginning, the satisfaction of those biological urgencies necessitates the calling of the other. In that sense the biological urge is already modified because you know very well that what has begun to be more important than the satisfaction of thirst is **that** the other respond to the call. What Kohut said in his last book Lacan had said already in the fifties: that what's more important than the satisfaction of material biological urgencies is the call for love and the response of love. And this transforms the urgencies themselves. That is what you find in Freud. An instinct, such as a sexual urge as in animals (but you already know that there is a difference between animals and humans) works so that they only procreate during certain periods of the year, a special period of the year. But we (humans) could procreate all the time, although we do not. So, that's a difference. There's already a biological perturbation there. Do you think that what Freud called *Wunsch* is a biological instance? He said that the *Wunsch* remains the same all the time. It never changes. He said that "drives" insisted, persisted, with out ever relenting. There is not any biological urgency which is of this type. It is in this sense that we may say like Hegel, the philosopher, that man is a sick animal. That is, his urgencies are already transformed and infiltrated through this necessity of calling the other to have satisfaction. When Freud spoke of polymorphous perversion he had the idea that something in human nature is fundamentally deviant and

makes Man seem as if he could not reach full satisfaction. There is so much discourse in our society that promotes the idea of "full satisfaction or else you will be reimbursed." In stark contrast to this, one sees that Freud is un-American. He did not believe in the pursuit of happiness. He believed in something else; that the most cherished enjoyment you have does not bring you happiness; that **the unconscious** satisfaction of drives goes contrariwise to pleasure. That is why you enjoy your symptoms, and even if they are interpreted you keep them because in this very pain you enjoy something which is not happiness, but an unconscious pleasure. This idea of masochism, of unconscious masochism, has never really been integrated by psychoanalysts because they want to believe in the good. They want to believe in harmony. They want to believe that the end of analysis brings happiness, harmony, genitality. Look at them. In his paper "Analysis Terminable and Interminable," Freud himself said that analysts may want to bring their patients to a state of health they themselves have not acquired.<sup>12</sup> If we have even Freud's testimony, and things are not much better now, let's at least be concrete. I don't know what those stories of genital harmony are good for. For love stories . . . , but that is not life.

Question: If I may be permitted, I would like to ask a question that philosophers such as I are inclined to ask. Since biology has been discussed at great length today, and since, in the framework of biology, the body is usually construed as a material entity, I would like to ask whether or not there are any indications in Lacan of an ideal, or a position of some sort, with respect to the relation between the mind and the brain? It is well known that for Freud the mind and the brain were essentially, and ultimately reductively, the very same thing, and I am wondering what a Lacanian would say to that, particularly in terms of a return to Freud?

Miller: Well, I said that the "return to Freud" of Lacan was also a change of references. That is, it is true that Lacan substituted references to the sciences of language for the biological references of Freud. So it is not a matter of Lacan's only repeating what Freud said on that. Do you believe that when he speaks of "totem and taboo," Freud is really speaking of anthropology and sociology? As a matter of fact, he used material from sociology and anthropology to try to develop something he had encountered in an analytic experience. With this material he created a myth of totem and taboo that explained the sin-

gular position of the father he meets in the analytical experience. But from my point of view this is not truly anthropology or sociology. Furthermore, it is too easy to discard Freud's discovery here if one keeps to these disciplines. Concerning biology, yes you can say, as Karl Pribram and Merton Gill did in their book on the *Project for a Scientific Psychology* that Freud anticipated the synapse, anticipated Sherrington, in the *Project*.<sup>13</sup> But, as a matter of fact, what we (Lacanian) read in this, is shades of signifiers. You must say graphically that that is what you read through it. I would say, then, that what we have in Freud concerning the brain is not operative. What does he do? In his practice, concretely, he does interpretation and translation. Psychoanalysis does not advance knowledge about the brain. There is no analyst who has given a single contribution to that. Let's be factual, let's be practical. It is a vacuous reference for psychoanalysts; an effort to guarantee that they have a material correspondent to what they experience. But practically, is that the material of things? What you have to take into account is that language is the material. You forget too often that language is material; that there are loads of this material of language. There is a science of the signifier as material that is not abstract. I am not referring to the fact that the spoken word evaporates. Then such a word is also material. In such a case you have the material connected to the tape recorder. Then you see the thing. Lacan said that in some ways Freud anticipated Saussure and structural linguistics. With the means he had at his disposal at that time, Freud did the same thing as Saussure in certain ways. We Lacanians, like you, are interested in aphasia, or other such things, but through precisely what Jakobson said about the two types of aphasia which correspond to the slope of metaphor and the slope of metonymy. Metaphor and metonymy, indeed, is a logic ingrained in language which is as material as the two sides of the brain, even if it is not observable through a microscope and you can not get to it through surgery. Linguistics, the various linguistics, treat language as an objective matter. The signifiers and the sound patterns are seen as objective matters. It is not by reference to biology alone that you have access to that .... Yes, another question.

Question: Well, I'm not sure how to phrase my question, but I would like you to talk about language other than speech; that is, other types of language. I am interested in art. I'm an art critic, but I'm also interested in the pre-verbal state, the very earliest cries of the infant, and the kinds of materials that people cannot talk about so that perhaps they

need the poet, the artist. When I say poet, I think about the image. You haven't spoken at all about imagery. That's a language too, a very important language.

Miller: So, I spoke about language.

Question: What do the Lacanians say about language that is not speech?

Miller: I understand what you mean. I hope so. We do not use this category of pre-verbal. When I spoke of the small infant to give you something developmental-it's your frame of reference, I believe an important frame of reference that cannot be destroyed like that-, it was not with the idea that it was pre-verbal. On the contrary, those infant cries are from the very outset structured as a language. Secondly, you saw that I extended the concept of signifier up to the point of taking in a hunchback; an image which is not verbal as such. But it may become verbal; it may function as a signifier. Let us go to what Lacan said. It is not a matter of biology. Rather, it is a matter of heraldry. You know what heraldry is: there where you also have a part of the world such as a cow, a horse, a sword, trees, but typified. The weight we have, the data we have on our back, are heraldry rather than pure biology. I even said the smile of Kohut is a signifier in that sense. But how do you distinguish verbal and pre-verbal? The verbal goes very far, even from the outset. And why? It is not a matter of the child speaking of, or not speaking of. That is always an error of thought, to think of language in terms of learning. If one says a child has the ability, or he will get the ability, or the ability will grow in him, then we would consider language as something like the liver. Chomsky has the theory that language is like an organ of the body. But what has mattered to psychoanalysis? I must say regarding Chomsky, that his reference to biology is completely vacuous. He will not make any contribution to biology through that. What has mattered to psychoanalysis, and to other things as well, is that language, even for the non-speaking infant, is already there

in the world before he is born. He is born into a world of language. I may say that the conversation between his parents before he is born, for example, concerning whether he should be born, may be the most important discourse concerning him the (unborn) child will ever have. He is not even there and he is already **the subject matter** of that talk. What we know from our analytic experience is

24

how important, how determinant in the life of someone, this preceding talk is. To be a desired child, or not, makes a fundamental difference. You may bear the weight your whole life of the way you were accepted (or not) from the start. Sometimes we analysts see a person where we experience the limit of what we can do. There is no case where we experience our impotence with more helplessness than in these kinds of cases. It is not a complete answer, but . . .

Question: What do we get that's new by focusing on linguistics as such?

Miller: You may gain understanding of how analysis cures. You may reach the point of understanding the eventual result of this curious procedure of analysis. Why is it that just by beginning to talk to someone in a special setting such phenomena as love, transference, resolution of symptoms, and so on, are elicited? You may also understand such phenomena as the lengthening of analysis, the passion of analysis, and groups of analysts, that are produced. But I believe it is very difficult to understand how analysis works without taking into account that it is chiefly speech: speech and interpretation. How come speech has such an effect on the ego, the self or the subject? Lacan's position is a most radical one. If speech has such an effect on the subject, you have to suppose that this subject is, I would say, completely speech; that the subject of your "operation" as analyst is completely speech. Sure, if you're a surgeon that is not your problem. Then there are a lot of data you put aside. Indeed no surgeon has to operate with all the data. But the analyst does if he operates essentially through speech and interpretation. The simplest hypothesis is what Lacan said; the unconscious is structured as language. It is the simplest hypothesis you can have. And all the other hypotheses, even Kohut's-where it is a matter of interaction, smiles, the response, acknowledgement, acceptance, which is so important-well, why have this patient on the couch? Kohut's is a theory for psychotherapy, interaction, friendly interaction; and not for interpretation. So, I believe you can get some insight into the functioning of analysis from Lacan's point of view. But it is also rather useful in daily life to take the unconscious into account. It may enable you to learn how to address the other, how to take your place in the Other. Well, I won't expand. Yes?

Question: (inaudible)

25

Miller: As a matter of fact, the mirror stage is not psychoanalysis. Lacan introduced the mirror stage in 1936. It is an occurrence taken from common every day experience. He didn't even discover the fact. It was known before him. He used this empirical fact-outside analytic experience it is a fact of observation-as a matrix. As a matter of fact, he used it with Hegel's distinction of master and slave. And to say what? The fundamental point is what? It is that with this mirror stage he is already outside ego psychology because he's already working with a subject who does not have his own unity in himself, a subject who only finds his unity in the other, through the image in the mirror, through an **other** instance. This gives us the matrix of a fundamental dependency on the other, but not defined in symbolic terms or in terms of language, but in terms of image. (That's also for you, [to the woman artist questioner who wanted to know about images]). But Lacan does not expand on this premature birth, because it (foetalization) is an import from biology and physiology. Fundamentally speaking, the void at the center of the subject is not premature birth: it is Freudian castration. And at the same time, the subject's dependency is not constructed as a dependency on the image in the mirror, but as a dependency on the speech of the other. So while the first construction of Lacan in 1936-the mirror stage-keeps its validity, he displaced this during his whole teaching. Do you follow me on that? That is what is so difficult with Lacan. I wanted to give a tribute to Kohut, but in his whole book there is one idea, and it can be summed up in one page. Every lecture of Lacan is a displacement, a new idea-for thirty years. You can imagine the enormous bulk of this material when you have to give an idea, a survey of that, to an audience. Although we did not prepare it together, Ellie referred a lot to the mirror stage, which is originally 1936."<sup>14</sup> Patrick Colm Hogan referred to the text of transference, which is 1951."<sup>15</sup> And I took more recent constructions of Lacan. So, all this will give work to academics for a long time. As James Joyce said: "I'm giving work to academics for three hundred years." I believe Lacan will give a lot of work, not only to academics, but to clinicians, because the idea is not to get a model, learn the model, and apply it .... It is to re-think the matter everytime. When you go to your analytic session, you begin again to formulate. And, when you are in your clinical office you function as an analyst. But when you are a thinker, when you are a teacher (that was Lacan's position), you must function like an analyzer. Sure you prepare, sure you think, but you do not try to close things once and for all. Just to

26

have a close-cut picture which everyone is going to learn in one hour or one year, and then apply or mix it with other things, I do not take that for an ideal. Lacan's whole strategy was not to protect his thought, but to be able to continue to think so as not to have a premature (not premature birth) death of thought. He succeeded in some ways because in consistency itself, you always have to keep a small quantity of leftover inconsistency, precisely in order to continue to work. Lacan is an example of that. The way he uses terms, things do not always fit. You always have to re-think the way he is using the terms. He always gives definitions, but those definitions are just a bit displacing themselves. You won't acquire the Lacanian know-how except by knowing you are going to keep your appointments or encounters. I would say, you can't get it cheap.

Question: ("subject of the other woman")

Miller: You want me to take up the subject of the other woman again?

Question: Yes . . .



Miller: Well, no. It would be a whole conference in itself. It's connected with-it's a difficult subject because there are a lot of misinterpretations, but-it's connected with the function of the phallus in Freud. It has scandalized feminists that Freud said there is only one symbol for both sexes, one symbol of reference, and that is the phallic symbol. He was not choosing between men and women to give the advantage to men. The problem is that this symbol is exterior to both sexes. Freud himself referred to that as a symbol and also spoke of what you could find at the entrance of the Ancient Roman bordellos. The phallic symbol was at the entrance. There, it is, I must say, for men. Nobody would think that men are equal to this symbol. It's rather the measure of their impotence. And, the question of the phallus might even be confused with the topics of to have or have not. What we have in psychoanalysis is much more "to be or not to be." And precisely the fact of not being endowed biologically with this small organ, the penis, leads to giving the function of the **phallus to women**. And that's not Lacan, but a classic psychoanalyst, who formulated the equation: "Girl equals phallus" [Fenichel].<sup>16</sup> So, the question of the phallic symbol is not only "to have or to have not," biologically speaking. Like the hunchback, it's a question of the meaning it takes on.

27

What Freud tried to understand was precisely the phallic representation of women. The problem is that you cannot formulate the harmonious relationship of one sex to another on the unconscious level. The only thing you find there is the relationship of each sex to this symbol, and it's not the same relationship. When this translates as a lack for women, it translates as the lack of an identifying signifier for femininity. When the question at the forefront is "What is a woman?" that describes the neurosis we call hysteria. It is from this question "What is a woman?" and unconsciously, "Am I man or woman?" and at the moment when there is an answer to this question-that the hysterical subject gives a privileged place to another woman, or to the other woman, the woman who would know what it means to be a woman. And eventually, even for instance collecting men, or rejecting them, collecting men would be only a way to try to learn how to be the woman who would be worthy of this name. Well, this is very sketchy. I would have to expand on feminine sexuality from the point of view of Freud who is very much criticized by feminists, and from Lacan's point of view, Lacan who considered himself an honorary woman. Lacan thought that women might be the best analysts.

Question: (inaudible)

Miller: Yes. Does the hysteric inspire the analyst?

Ellie: She said, why does the hysteric do that?

Miller: The hysterical subject is, I would say, a question in herself. There are mystical men because they may choose to inscribe themselves on the same side as a woman. But let's speak as if it were only woman. What the hysterical subject intensifies and overtly manifests is this lack of an identifying signifier. Eventually it can manifest itself by agitation, displacement, traveling, being nobody. You may meet very successful women in analysis, successful in social life, but they may have this feeling of void, of non-identity. And finally hysteria shows up through a void of identification which the subject transforms into an eternal question, presented, I would say, to the master, anyone who is in the place of master of knowledge. The hysteric presents herself precisely as lacking knowledge: "Cure me. Try to know what I have." As a result, the analyst cannot do it. He is impotent in his knowledge of what will cure her. It's true that hysteria is always a challenge. What is

28

also clear is that the mainstream of American psychoanalysis has, generally speaking, shrunk back from the challenge of hysteria. American psychoanalysis has referred hysterics to hospitals and has referred to the neurosis as "borderline": "Analysis is not for you." Excuse me if I am too harsh, but Kohut too is very harsh on the state of American psychoanalysis. I believe that if American psychoanalysis is in a stalemate, it's because they are straying back from the challenge of hysteria, the medical field of hysterics. Obsessionals, as long as you don't disturb the ordering of things, as long as you keep in your place, they're satisfied, because everything is already dead for them, no surprises. But, such stasis is not very conducive to the progress of learning, in that sense. In history, what has always been conducive to the progress of learning is the hysteric; through the representation and intensification of the lack in knowledge itself. Freud learned through this lack, this challenge, presented by hysterics. It is necessary that analysis follow this path, this suffering, again. That is what I think, I believe that the general obsessionalization of American psychoanalysis is on a par with the difficulty of advancing learning.

*Text edited by Ellie Ragland-Sullivan  
from the presentation given by Jacques-Alain Miller  
in Chicago on July 25, 1986.*

## NOTES

1. Heinz Kohut, *How Does Analysis Cure?*, ed. Arnold Goldberg with Paul Stephansky (Chicago: The University of Chicago Press, 1984).
2. Richard Chessick, *Psychology of the Self and the Treatment of Narcissism* (Northvale, N.J.: Jason Aronson, 1985).
3. Stuart Schneiderman, *Death of An Intellectual Hero* (Cambridge, Mass.: Harvard Univ. Press, 1983). Cf. Schneiderman on the "pass."
4. Jacques-Alain Miller, "Interventions de Lacan a la S.P.P.," *Ornicar?* 31 (October-December 1984): 7-27.
5. Since this time, *L' Ethique de la psychanalyse* has appeared in book form. Jacques Lacan, *Le Seminairealyse de Jacques Lacan, Lives VII, L' Ethique de La Psychanalyse*, 1959-60 (Paris: Seuil, 1986).
6. Jacques-Alain Miller, "Teaching of the Case Presentation," *Returning to Freud: Clinical Psychoanalysis in the School of Lacan* trans. and ed. Stuart Schneiderman (New Haven: Yale University Press, 1980), pp. 42-54.
7. Lacan's thesis: *De la psychose paranoïaque dans ses rapports avec la personnalité suivi de Premiers écrits sur la paranoïa*. (Paris: Seuil, 1975).

29

8. Jacques Lacan, "Lettre A Winnicott," *Ornicar?* 33 (April-June 1985): 7-10. Cf. also translation of this letter in *October* 40 (Spring 1987): 76-80.
9. Sigmund Freud, "The Unconscious," *Standard Edition*, trans. James Strachey (1915e) 14:161.
10. Several Workshops were given by Jacques-Alain Miller. Lacan's Legacy: Lessons of the Transference: An International Conference on Psychoanalysis June 14, 15, 16 (1985), Univ. of Massachusetts, Amherst, Mass.
11. Jacob Arlow and Charles Brenner, *Psychoanalytic Concepts and the Structural Theory* (New York: International Universities Press, 1964).
12. Sigmund Freud, "Analysis Terminable and Interminable," *Standard Edition*, trans. James Strachey (1937c) 23:209.
13. Merton Gill and Karl Pribram, *Freud's "Project" Reassessed: Preface to Contemporary Cognitive Theory and Neuropsychology* (ICY.: Basic Books, 1976).
14. Jacques Lacan, "The mirror stage as formative of the function of the I," *Ecrits* trans. Alan Sheridan (New York: W. W. Norton, 1977), pp. 1-7. Cf. paper given on July 25, 1986, by Ellie Ragland-Sullivan, "Some Basic Concepts of Lacan's Early Work."
15. Jacques Lacan, "The Intervention on Transference," *Feminine Sexuality: Jacques Lacan and the Ecole Freudienne* trans. and ed. Juliet Mitchell and Jacqueline Rose (New York: W. W. Norton, 1983), pp. 61-73. Cf. paper given on July 25, 1986, by Patrick Colm Hogan, "On Lacan's Dialectical Framework."
16. Otto Fenichel, "Die symbolische Gleichung Mädchen = Phallus," *Internationale Zeitschrift für Psychoanalyse*, 22 (1936). Trans. into English as "The Symbolic Equation: Girl = Phallus," *The Psychoanalytic Quarterly* 20, 3 (1949): 303-24.

30