Anne Dunand

The End of the Treatment

Part One

The problem with a title such as "The End of the Treatment" ["cure" in French] is what it implies: that there could be such an event as the end of the treatment. This means, because of the very term cure, one supposedly will be restored to health, just as one recovers from an illness. As far as illness is concerned, one is used to thinking in terms of beginnings, middle section, and end. It is true in the domain of physical illness, or when we face the necessity of a surgical operation. Something extraneous to the body, causing specific symptoms, is felt as noxious and has to be discarded because it is a cause of endless troubles. It has to be extracted or eradicated, or detached from the living organism. Now this approach is made very difficult, if not impossible, in the process of analysis because what an analysand is most attached to, does not feel he wants to get rid of --: thé cause of his symptom - is not experienced as incompatible. Indeed, to him, it is considered an absolute necessity. So much more so because what causes the disturbance is unconscious. He does not know what he will have to part with.

The treatment, any treatment, is determined by what is aimed at as it's end, that is globally covered by the notion of health. The whole process of the treatment has to keep the end in mind. But when we consider what happens in analysis, either the cause or the riddance of the trouble are somehow impossible to predict in advance.

Now what Lacan has promoted and invented is an end with a very different conception of what is aimed at, compared to what the current schools of psychoanalysis have defined. It takes into account the fact that one cannot be cured of language. And, from

120

this single factor, all the others derive. One cannot be cured of language, therefore one will, in the end, be incurable. But what can be changed is the use a subject will make of the means at his disposal.

A good number of people go to see an analyst to be cured of desire. They would like to not want. To be cured of want, since what they want is out of reach. And that of course is impossible. So the end can be defined in terms of not wanting the impossible. However, that is really where the snag lies: It sounds as if people were meant to become reasonable, or to try to adjust to their environment. It is in this way that Freud's well-known statement has often been interpreted: his idea that the treatment should enable a person to work and love.

Let us say that this aim is only a side effect of the treatment, and certainly one most valuable to society. From the point of view of the subject though, we have to determine the end in terms of structure; that is, the place that a subject will assume in a structure of discourse, especially if what is to be searched for is an irreversible change. How is one to measure such a transformation?

Not in terms of behavior, adaptation, or adaptability, or even stoicism in the face of the unforseen, in the face of all that can maim and hurt a human being. How can one be sure there will not be a relapse into bad habits or mental disease? Well, one has to accept the fact that the object that causes desire, and therefore all the compliances known as symptoms, all the compromises between desire and what can be obtained, this object cannot be extracted from the subject's innermost functioning. This tell-tale object, so obvious to others and so out of reach for the subject, will have to remain the same under a number of guises. And the type of symptom that is the subject's grasp onto reality cannot be disposed of. And the fantasy, which has been constructed to allow some kind of pleasure to be enjoyed still, will retain its innermost structure: a logical structure.

This may sound rather pessimistic to some and to others it will convey the idea that we are asking for too much. And to other people, it will even mean a crazy paradox. Yet it can be done. And Lacan has coined a name for such a system. It is called "La Passe" [(1967)1968]. An old name given a new reference.

I propose to undertake the task of briefly summing up what is meant by this word, and why it is a new formula for the end of the analysis. It is not possible to give here all the implications this revolutionary point of view produces. I will have to leave many

121

important, specific points out: such as the destitution of the subject, alienation and separation, and the procedure of the pass proper. I will merely give an outline of its principal features.

I will start with a short recollection of what the termination of analysis is in other schools; at any rate with those institutions or psychoanalysts that claim an allegiance to Freud's findings and claim to have built their theory and their practice from his concepts.

Freud's conception of the end of the analysis has been laid out in *Analysis terminable and interminable*, one of his last writings. But a number of his meditations on the aim and the end of a cure can be found in some of his other writings: *The New Introductory Lectures [(1933), 151], The Question of Lay Analysis [(1926), 179], The Outline of Analysis [(1940), 179].* And I shall add to these more specific discussions on the end of a treatment and the powers at stake, the article *On Construction in Analysis [(1937), 257]* because it is relevant to the fundamental delusion that

serves as the basis for the fantasy. And Freud himself had pointed out the relation of the fantasy to the symptom in chapter 23 of his Introductory Lectures, under the title The Path to Symptom Formation [(1916-1917), 358].

I am pointing out these particular arguments inasmuch as Lacan has framed the end of the analysis as identification with the symptom and the crossing of the fantasy. Freud's arguments also enable us to understand why he put the termination of analysis under the heading of "Terminable or Interminable." This particular article singles out a number of questions that remain unresolved. It has been considered pessimistic, because it explains why analysis has to take so long and why it cannot prove to be a stronghold against whatever conflicts may arise in later life; portending the consequent return of the illness or the creation of another series of symptoms.

To sum up the problem, Freud stresses that two major issues seem to hold the scene: 1), the will of the patient to remain sick, the inertia he demonstrates when the path towards recovery seems clear; 2), "the bedrock of castration," or what he terms "the repudiation of femininity" [(1937), 250-252]. In the former he points out what he deems is the death-drive at work. In regard to the later, he announces that the subject will have to give up some impossible wish: penis-envy on the side of women, fear of castration on the side of men.

The real problem he leaves open, to my mind, is whether the subject has any choice in either of these cases. I am myself divided as far as this point of choice is framed by Freud. My own personal

122

opinion of the matter is that freedom of choice is limited and that the issue does not depend on the desire of the analyst, but on the subject's good luck. I am reverting here to what Freud believes to constitute the pitfall of analysis: the preponderance of one of the drives, the wish for death, over the erotic drive. Freud points out that these drives are balanced differently in each and every case, and that their alloy is provided by constitution, meaning - not the particular gifts with which each individual is endowed -but how his relationship to those two drives have found a stable expression through particular circumstances. Overtly, the struggle takes the shape of the ego versus the id. And, if the id is too strong, the ego will either strengthen its defences against all drives, including the erotic drive; or it will abate and be taken over, invaded by the drives, all this resulting in an incapacity to deal with adverse conflicting powers.

This adds up to saying that something in the analysis will not allow for a happy ending. Not only is the conflict impossible to handle beforehand, moreover not everything can be taken up in the transference, including future conflicts. Thus, an artificial situation is created by the analytical device.

In Freud's terms, something is at work that is not analyzable. If he does not mention it *expressis verbis*, when he mentions the unforeseen, the unpredictable, Freud lets us hear that this certain something is of the order of the real.

In this same article, Freud declares that the best chances for an analysis coming to an end, according to his experience, occurs only in the case of traumatic neuroses. And this factor of Freud's experience points out the necessity for an encounter with the real to be effectuated and brought up in the analysis. In a certain sense, if we follow this point of view, we may observe that every neurosis has become a traumatic case if the end is to be brought about. I think this is what Lacan managed to achieve with the concept of the pass. That is, there can be no end without going through this traumatic experience.

We shall come back to this argument later, for I think it interesting to set it against the background of what the end is when it is not inclusive of the pass, that is when it shuns the issue of an encounter with the real. Lacan's daring enterprise will stand out better if we give the alternatives. And our point of view is that either we end with the pass or we end with identification to the analyst. We could, of course, make a historical survey of the end of the treatment, starting with Freud's early disciples and going on to the latest

123

experiments. But this would make for a lengthy study and would not be of great use to us, since we are trying to assemble the data for a change of structure and not a discussion on the many imaginary endings that have been suggested.

We have the details and the counter-arguments in Analysis *Terminable and Interminable*. Freud states it is not possible to lodge in the transference of Ferenczi's propositions events that are not part of the patient's experience. We know Freud's reactions to Jung's and Adler's trying to divert the sexual implications in the analytical process, thereby ending analysis by kowtowing to social insertion. We remember how sexuality was turned into a substance by Reich on the grounds that it was what the subject needed, and that it could be provided by immersion in such a substance. And I could name a number of similarly interesting, but imaginary, representations of the processes involved in the cure, ending with the foreverhoped-for reconciliation with the impossible. They all rest on beliefs and not on certainties. The general overall conviction that these theories rest on is the belief man was made for women and viceversa. This leads to the further illusion that the world was made to be enjoyed. It recalls the image of Adam and Eve in the Garden of Paradise. What psychoanalysis has to deal with, actually, what it works with, are certainties.

A good survey of this other attitude that conditions the treatment and its termination can be found in an article by Jonathan R. Pedder, under the heading: *Termination reconsidered [1988, 495]*. The first problem to be clarified is whether analysis comes to a natural end, like pregnancy or breastfeeding. But even these processes that seem to carry out purely natural functions to their natural end, nevertheless bring about disillusionment and mourning. So the whole gist of the quandary is to find out how mourning takes place in the analysis and if the relation to an object can be replaced by the relation to another object. In other words, what escapes no one among the esteemed practitioners cited by Pedder, is the fact that separation from the object, as embodied by the analyst, has to take place. And they generally agree it is achieved through two main processes: 1) that of mourning, involving identification; 2) that of internalizing the process of analysis itself.

The difficult cases are singled out as having a specific pathology: the attachment to pregenital objects; i.e., what we have learned to discern as object *a*. In this perspective, analysis is akin to so-called normal development, going through stages in which libido is shifted from one part of the body to another, until it reaches the

124

genital. Its end is achieved when a sexual relation can be reached; that is, it tends towards the inscription of a sexual relation, as if such a relation were inscribed in the Other, and as if its attainment had been deviated from, or thwarted, in the development of the individual. It puts the sexual relation in the place of an ideal, without noticing that such an attitude is really just taking sides with the superego's exigencies that can be spelt out: "Thou shalt enjoy the Other sex." It is an either/or injunction, paying no heed to the fact that it is precisely this wish to make One with the Other, that lays out the foundations for neurosis, psychosis and perversion.

What it really boils down to is a question Balint states clearly, in his article about the end of the analysis: "What is health? Is analysis a means to supply what normal development achieves?" [1950, 196-199]. That question had already been probed by Freud. But the answers to that query are mostly phenomenological, learned, and earnest descriptions, giving a catalogue of behaviors and attitudes in life. Nowhere can one find a statement concerning a change in structure, even when a different relation to a person's objects is detailed. Perhaps an inkling of what is missing in such an ideal of health is put forward by Winnicott, in his book *Playing and Reality:* "You may cure your patient and not know what it is that makes him or her go on living. It is of the first importance to us to acknowledge openly that absence of psychoneurotic illness may be health, but it is not life" [1971, 120].

I think that we can hear in this profound statement the yearning awakened by not finding what the cause of desire is and perhaps the intuition that the sedation of symptoms is not the end of an analysis. And furthermore, it lets us perceive a claim put to other practitioners that they should not stop at purely therapeutical aims, but should ask themselves if psychoanalysis is not something more than a chapter added to medical practice. Indeed, that it is principally an interrogation on existence.

Let us go back to the end of the treatment as it is scheduled by less haunting demands. It can be described in terms of mourning and in terms of internalizing the process of analysis itself, as we have put forward above. These two points are simple enough to grasp. Mourning is a "natural process" that comes to an end. It is symptomatic that the discussion of this phenomenon by most Authors brings up the question of the analyst's death. In Pedder's article there is a delightful reminder of the fact that every session of the British Psychoanalytic Association starts with an obituary. And he comments on how agreeable this custom is. Nobody seems to be

125

aware that this equates the end of the analysis, not with a natural process, but with the taking of a step that propends towards killing whatever the analyst stands for.

Internalizing the process means one can endlessly interpret whatever formations of the unconscious may crop up, a most remarkable factor really, that we come up against as having to deal with "unending analysands." They relentlessly explain and expound on the intrusion of the unconscious into everyday life, sometimes at a disturbing pitch. By the way, this is what most people think psychoanalysis is: a cipher to decrypt actions or thoughts that cannot otherwise be explained. In most of the accounts given by the various practitioners who have written on the subject, the end of the treatment is compared to the various rites of initiation that our society requires: such as taking a degree. It gives access to a social status, it creates an artificial before and after.

There is a last point we must take into consideration concerning what is expected at the end of the cure. It is different in the case of a patient or in the case of a candidate for the function of analyst. The future analyst goes through an examination. A selection is made before he even starts the analysis. The criteria given are too vague and intuitive to be singled out since they are based on the fact that what one really has to decide is whether the candidate would make a suitable colleague. And the candor of that position is exposed by M. Milner, when he writes 'Although there is perhaps no such thing as a completed analysis," [a fact that Balint had questioned] "most patients do, sooner or later, stop coming to analysis. Perhaps we, as analysts, are handicapped in knowing all about what ending feels like, for by the mere fact of becoming analysts we have succeeded in bypassing an experience which our patients have to go through. We have chosen to identify ourselves with our analyst's profession and to act out that identification, a thing which our patients on the whole are not able to do" [1950, 191]. This really means that before an analysis gets on the road there is a different aim in view At the end the patient will have to do without a complete identification with the profession. He will have to give up this kind of acting out. He will have to stand up to an experience that the analyst can bypass. If we take this seriously, it is only the patient who will have ended analysis: a truly marvelous statement.

126

Part Two

Now we shall turn to Lacan and examine his criteria. In 1964, in his Seminar *The Four Fundamentals Concepts of Psychoanalysis*, Lacan speaks of "the crossing of the plane of identification" [273], not only as possible, but as necessary. This book, one of the few Seminars of Lacan's available in English, starts, as you may remember, with Lacan's comments on his "excommunication." It is logical that it should end with what makes the analyst's function radically different from anything that had previously been devised. He postulates an end of the analysis without identification to the analyst: "This crossing of the plane of identification is possible. Anyone who has lived through the analytic experience with me to the end of the training analysis knows what I am saying is true [1981, 273].

Within the same week of June 1964 when he made this declaration, Lacan had given out the short paper that is the Act of Foundation of the EFP (French School of Psychoanalysis). There we can read the first blueprint for the transmission of psychoanalysis as bound to the elaboration of what happens in a treatment. Lacan states that it is not an ineffable, inutterable experience. Furthermore, he articulates the restriction of the theory to its praxis, declaring that ethics are what constitute the praxis of psychoanalytical theory. Lacan, also denounces the criteria that had been used up until then for the selection to the profession, based, as they were, on the general favorable impressions of older members taken as a whole, and their particular prejudices, taken one by one.

At that time, he had not yet elaborated an actual theory of the pass, or given it this name. Although, such a protocol is written out later in 1967, all the premises are there in 1964, including the word *impasse* that he uses to designate his own position, inasmuch as he is director of the School, a teacher of psychoanalysis, and also an analyst. Lacan uses this word often and I will merely point out a few examples to convey the breadth of its meanings: For instance in the *Direction of the Treatment*, when he speaks of the Rat Man's quandary as being there before his birth and determining how his mental life and his desire were led astray.

He will use this same particular word, *impasse*, to define the Position of the subject in his summary of the Seminar *The Logic of the Fantasy* [1984], upon which Jacques-Alain Miller has amply commented in his course "1,2,3,4" (especially in the lecture given on the 24th of April, 1985). Miller says that there can be no pass

127

without first building the subject's impasse. Lacan uses this term also. I point this out here for those of you who are working on the subject of perversion, to say that the pervert is in closer confrontation to the impasse of the sexual act than the neurotic [1984, 17].

I will open a brief parenthesis here to attempt to translate into English some of the specific Lacanian signifiers I have been introducing from the French language. *Passe*, as we have seen, can best be opposed to *impasse; pass is* a common English word that can be put to many uses, express different meanings; such as in password, pass-key, to come to pass, or to bypass, as M. Milner described the probable fate of the analyst at the end of his treatment (see above). In the *Oxford English Dictionary* we have a choice of several different meanings for the word, from which we may choose what best conveys the particular situation of the subject that we intend to describe: "Narrow way over or through mountains," for instance, because in a mountain pass, there is no other way through, unless of course one gives up. This gives us an analogy with the configuration of the analysis at the end. Or, another definition is equally illustrative: "Navigable channel, esp. at river's mouth." I rather like that one because it depicts the fact that one has to be guided through, one has to be wary not to flounder or run aground in shallows. And, yet, it denotes the fact that such a passage exists, even if one has no map to provide the bearings. *Impasse , on* the other hand, can be translated as dead-end, deadlock, no through road; or more abstractedly, quandary.

It can be quite justly claimed that every session of the analysis presents the analysand with an either/or obligation: either to stick to his guns or to face up to his or her quandary and invent a way through, possibly by not acting-out. If we revert to the passage in *Seminar XI*, the subject will have to cross the plane of identification. This means he will have to give up his plea for a gratifying and meaningful trait that can be appropriated from the analyst's qualities. This will be brought about because the analyst's position is in the place of an object *a*, instead of in the place of the commanding ideal.

What is the pass then, if it is not only at the end of the treatment, but is there all the time? Does it consist in a series of passes, amounting to blotting out all other occurrences in analysis? We would then have the cure as a kind of education, or, to revert to an expression used by Ferenczi, as the "taming of a wild horse." But it has exactly nothing to do with the taming of the drive. This might bring us back to Winnicott's statement that the absence of psycho

128

neurotic illness may be health, but it is not life. On the contrary, as Lacan states in Seminar XI: "The experience of the subject is (thus) brought back to the plane at which, from the reality of the unconscious, the drive may be made present" [1981, 274].

Lacan's "Proposition on the Psychoanalyst of the School," known as the Proposition of the 9th of October 1967, gives the answer to . the particular structure the end of the treatment can assume, that is' if a subject is willing to go through, and how he devised a scheme to make this passage transmissible. If nothing can be said of this particular moment, than nothing of any weight can be transmitted of what happens in psychoanalysis, except its therapeutic effects that are not pure psychoanalysis; merely its application as a marginal medical device.

Let us examine the essentials in the Proposition. As usual, with a text by Lacan, we could comment on every sentence, so dense are they in their implications. But I will merely stick to what represents the novelty of its invention. First of all, it ties up the *modus operandi* by which psychoanalysis treats with the transmission of its method. By method, I mean the structure of the experience itself, the passage from one way the subject has of relating himself to the object, of complementing his want-to-be with the desire for an object, to the position in which he recognizes the analyst as the ectopy of the object, isolating what this object is - that is its apparent substance - until he discovers that this object is only the logical consequence of what was left over of *jouissance* after it had been chased into particular relations, erotic relations of his own to his own body

This sounds complicated and could be simplified a lot by writing a certain number of letters in the place of concepts, as is done in logic. It is as simple as writing E = mc2 or using Euler's circles and the set theory, or drawing it out on a logical quadrangle. But I have always found that a certain disapproval is attached to psychoanalysis being translated thus, a prejudice obviously stemming from the belief that the human psyche must be immediately and intuitively comprehensible.

We have to be precise in indicating that the object here is not a person or a relation to a person. A person, or a relation to a person, can be described in terms of significant traits. The object that causes desire, not being a person, is what is left of the subject after it has gone through the sieve of language. In this case, the object is an unsatisfied part of whatever the subject may wish for. And the subject may locate that dissatisfaction in another and try to satisfy it

endlessly, until he discovers its location in none other than himself, and, also, that it cannot be satisfied by himself alone. This is one first phase of the deadlock, that cannot be cured by a "natural process of mourning," as you may well understand. Nor is the object identifiable with some

signifier in the chain, for it does not stand under any signifier. It has no signifier. It can only be approached and circled around by signifiers, a bit like when painting with water-colors. The vivid patches of white are reserved to highlight the painting, while the paper, that is the very ground the painting is built on, stays bare.

So it is not so much the object that is mourned, but the fact it lacks a signifier. For this very reason, one cannot identify with it. The object is really always lost, has never been in the subject's possession, and never will be. The manic-depressive mood Lacan ascribes to the end of the analysis, referring to Balint's description of such a phenomenon, is therefore not to be attributed to the loss of an object, like the death of a person, but springs from the fact that it cannot be recuperated by words or images. Separating from the object is, therefore, very different in Lacan's perspective. It means realizing that this very lack which the subject endures is a structural lack in the Other. Therefore, it cannot be recovered from by mourning and identifying. It can merely be recognized as such. And the subject will find the counterpart of his lack in the lack found in the Other.

So much for mourning and identifying. But how are we to consider the so-called internalizing of the analytical process? The process itself should not be identical in any of the cases, since it springs from the unfolding of the subject's original text. It is true that nothing resembles a subject's myth more than another subject's myth. One can apply transclinical structures to all those myths, like the Oedipus complex. Or one can cut them up into clinical structures, such as hysteria and obsessional neurosis, perversion and psychosis. If this is satisfying to the mind and prevents blunderous interventions, it still does not give us a clue as to how to make changes in the text, it merely allows us an analytical viewpoint.

For instance, how is one supposed to chart out for a subject the crossing of his fantasy, since the fantasy is the subject's only access to reality? How, unless by firmly pointing out where the bedrock lies? It is a thankless task for the analyst who has to point out precisely what the subject does not want to know, what all his defences have been built up against: not faults, or character traits

130

that he himself can denounce, but the fact he is of no value to himself. His only value rests really in the possibility of discovering that he is nothing except through the love and desire of others. And that leads to devastating depressive moods since he has come to see an analyst because he has gone through experiences in which he had already found out this sad truth.

But he has also discovered the pat on the shoulder and the comforting words to be of no avail. He is, therefore, stuck, cornered by the analysis into this hopeless situation. The obvious question is: Why should he go through this vale of tears and desperation if what he asked for was precisely the contrary? To be at peace with himself and the world?

Well, all the possible consolations he might have found so far in life have proved illusions and what he will have to build upon is some kind of truth, different from the truths he has so far been able to use. Lacan's assumption is that he will go then in search of what is left, that part of reality that he does not know, that is also missing in the Other. And from that new approach to the quest for knowledge, he can reconstruct his whole existence. That knowledge is not dogmatic, it is not universal. It is what constitutes the subject's innermost and personal foundation, because it is what the subject lacks.

If desire is indestructible, the subject must hit on what the cause of desire is. He must assume this part of his living being that cannot fail him. The passage in the analysis described by the word pass is precisely this: the subject discovers his lack of value, let us write it "minus phi." He is not the phallus. The world can go on without him. He is entirely expendable and replaceable, but he still wants to live, although in life one cannot escape desire or suffering. If he wishes, he can find the basis for this desire and suffering. Some of it was provoked by unfulfilled ideals, such as bringing happiness to others, for instance. But most people can give this up since it never works. One has to find out what is at work under this vague but insistent desire for happiness. And there's the break. I am afraid this too is very disappointing. He will find out he has drives, which connect a part of the body to the experience of satisfaction he is after, whatever wants to be satisfied. And all he expects from life is this satisfaction, clothed with ideals, of course. But in the analysis it is divested of the ideal. What the analyst represents is not the interepreter of ideals, but the object itself: a gaze, a breast, feces, or a nothing. There is a kind of absurdity in trying to imagine that: that which seems so insignificant to our minds, so far from our

131

worries or our loftier thoughts, can be reduced to the enjoyment of such a simple basic factual necessity. We find it revolting unless we find a way of sublimating it, such as the artist does. It is of no use to anybody and a hindrance to our own activities. It gives a trivial note to whatever we undertake. Also, we cannot give it any satisfaction by ourselves, since it has to be satisfied by another, and so obliges us to be dependent on others. And most often they are not ready to help since they have their own drives to satisfy.

We cannot put it into words either: "Please love me and desire me" is not a thing that can be said. And so we are up against another deadlock. The subject is prone to sink into despair. Well, despair has been considered a sin since ancient times: just think of so-called *acidia*, or of *The Pilgrim's Progress*. Lacan has also passed judgement on it. He calls it moral cowardice. It is rather hard to swallow that we are supposed to stand up and go on living when we are reduced to this: an object of no value, yet still wanting to satisfy the Other or to find some kind of possible pleasure from the Other, either the world as a whole or individual people. Not to mention the daily struggles and fatigues of normal survival.

The pass is a way out, through this deadlock where the subject is not represented by his archaic signifiers, in which he is not sustained by an ideal. These have proved to be illusions: His situation is to be thrown into a world that has no use for what he is, since he is only the vehicle of his own type of particular *jouissance*, something he cannot even master since no rules of conduct apply and all these mythologies pointing to what can be done or hoped for have been discarded. He has also discovered that transference is merely shifting onto another person, the analyst, what he wanted that person to provide. And that nothing in particular is expected from him except to recover from this delusion. He even guesses that whomever he loves or desires is just a means to provide himself with satisfaction, at all costs, from certain persons chosen precisely for their compliance to his whims.

Notes

- Balint, Marion. 1950. What is health? International Journal of Psycho analysis 31:196-199.
- Freud, Sigmund. (1937) 1974. Analysis Terminable and Interminable. Standard Edition 23: 209. London: Hogarth Press.
- _____. (1937) 1974. Constructions in Analysis. Standard Edition 23: 257. London: Hogarth Press.

132

- _____. (1916-1917) 1974. Introductory Lectures on Psycho-Analysis, Part 111. Standard Edition v 16: 358. London: Hogarth Press.
- _____. (1933) 1974. The New Introductory Lectures. Standard Edition 22: 151. London: Hogarth Press.
- _____. (1940)1974. The Outline of Analysis. Standard Edition 23:179. London: Hogarth Press.
- . (1926) 1974. The Question of Lay Analysis. Standard Edition 20: 179. London: Hogarth Press.
- Lacan, Jacques. (1958) 1961. "La direction de la cure et les principes de son pouvoir." La Psychoanalyse 6: 149-206.
- _____. (1966-67). Unpublished. Seminar XIV: The Logic of Fantasy. Abstract in Ornicar? 29(1984).
- _____. 1968. "Proposition du 9 octobre 1967 sur la psychoanalyse de l'Ecole." Scilicet, 1: 14-29.
- Milner, Michael. 1950. 'A note on the beginning of analysis." International Journal of Psychoanalysis, 31:191.
- Pedder, Jonathan R. 1988. "Termination reconsidered." International Journal of Psychoanalysis, 69: 495.

Winnicot, D.W 1971. Playing and Reality. London: Tavistock.

133