

NOTES UPON A CASE OF OBSESSIONAL NEUROSIS
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The matter contained in the following pages will be of two kinds. In the first place I shall give some fragmentary extracts from the history of a case of obsessional neurosis. This case judged by its length, the injuriousness of its effects, and the patient's own view of it, deserves to be classed as a moderately severe one; the treatment, which lasted for about a year, led to the complete restoration of the patient's personality, and to the removal of his inhibitions. In the second place, starting out from this case, and also taking other cases into account which I have previously analysed, I shall make some disconnected statements of an aphoristic character upon the genesis and finer psychological mechanism of obsessional processes, and I shall thus hope to develop my first observations on the subject, published in 1896.¹

A programme of this kind seems to me to require some justification. For it might otherwise be thought that I regard this method of making a communication as perfectly correct and as one to be imitated; whereas in reality I am only accommodating myself to obstacles, some external and others inherent in the subject, and I should gladly have communicated more if it had been right or possible for me to do so. I cannot give a complete history of the treatment, because that would involve my entering in detail into the circumstances of my patient's life. The importunate interest of a capital city, focused with particular attention upon my medical activities, forbids my giving a faithful picture of the case. On the other hand I have come more and more to regard the distortions usually resorted to in such circumstances as useless and objectionable. If the distortions are slight, they fail in their object of protecting the patient from indiscreet curiosity; while if they go beyond this they require too great a sacrifice, for they destroy the intelligibility of the material, which depends for its coherence precisely upon the small details of real life. And from this latter circumstance follows the paradoxical truth that it is far easier to divulge the patient's most intimate secrets than the most innocent and trivial facts about him; for, whereas the former would not throw any light on his identity, the latter, by which he is generally recognized, would make it obvious to every one.

¹ 'Further Remarks on the Neuro-Psychoses of Defence', 1896*b* (Section II. 'The Nature and Mechanism of Obsessional Neurosis').

Such is my excuse for having curtailed so drastically the history of this case and its treatment. And I can offer still more cogent reasons for having confined myself to the statement only of some disconnected results of the psycho-analytic investigation of obsessional neuroses. I must confess that I have not yet succeeded in completely penetrating the complicated texture of a *severe* case of obsessional neurosis, and that, if I were to reproduce the analysis, it would be impossible for me to make the structure, such as by the help of analysis we know or suspect it to be, visible to others through the mass of therapeutic work superimposed upon it. What add so greatly to the difficulty of doing this are the resistances of the patients and the forms in which they are expressed. But even apart from this it must be admitted that an obsessional neurosis is in itself not an easy thing to understand - much less so than a case of hysteria. Actually, indeed, we should have expected to find the contrary. The language of an obsessional neurosis - the means by which it expresses its secret thoughts - is, as it were, only a dialect of the language of hysteria; but it is a dialect in which we ought to be able to find our way about more easily, since it is more nearly related to the forms of expression adopted by our conscious thought than is the language of hysteria. Above all, it does not involve the leap from a mental process to a somatic innervation - hysterical conversion - which can never be fully comprehensible to us.

Perhaps it is only because we are less familiar with obsessional neuroses that we do not find these expectations confirmed by the facts. Persons suffering from a severe degree of obsessional neurosis present themselves far less frequently for analytic treatment than hysterical patients. They dissimulate their condition in daily life, too, as long as they possibly can, and often call in a physician only when their complaint has reached such an advanced stage as, had they been suffering, for instance, from tuberculosis of the lungs, would have led to their being refused admission to a sanatorium. I make this comparison, moreover, because, as with the chronic infectious disease which I have just mentioned, we can point to a number of brilliant therapeutic successes in severe no less than in light cases of obsessional neurosis, where these have been taken in hand at an early stage.

In these circumstances there is no alternative but to report the facts in the imperfect and incomplete fashion in which they are known and in which it is legitimate to communicate them. The crumbs of knowledge offered in these pages, though they have been laboriously enough collected, may not in themselves prove very satisfying; but they may serve as a starting-point for the work of other investigators, and common endeavour may bring the success which is perhaps beyond the reach of individual effort.

I

EXTRACTS FROM THE CASE HISTORY

A youngish man of university education introduced himself to me with the statement that he had suffered from obsessions ever since his childhood, but with particular intensity for the last four years. The chief features of his disorder were *fears* that something might happen to two people of whom he was very fond - his father and a lady whom he admired. Besides this he was aware of *compulsive impulses* - such as an impulse, for instance, to cut his throat with a razor; and further he produced *prohibitions*, sometimes in connection with quite unimportant things. He had wasted years, he told me, in fighting against these ideas of his, and in this way had lost much ground in the course of his life. He had tried various treatments, but none had been of any use to him except a course of hydrotherapy at a sanatorium near ---; and this, he thought, had probably only been because he had made an acquaintance there which had led to regular sexual intercourse. Here he had no opportunities of the sort, and he seldom had intercourse and only at irregular intervals. He felt disgust at prostitutes. Altogether, he said, his sexual life had been stunted; masturbation had played only a small part in it, in his sixteenth or seventeenth year. His potency was normal; he had first had intercourse at the age of twenty-six.

He gave me the impression of being a clear-headed and shrewd person. When I asked him what it was that made him lay such stress upon telling me about his sexual life, he replied that that was what he knew about my theories. Actually, however, he had read none of my writings, except that a short time before he had been turning over the pages of one of my books¹ and had come across the explanation of some curious verbal associations which had so much reminded him of some of his own 'efforts of thought' in connection with his ideas that he had decided to put himself in my hands.

¹ *The Psychopathology of Everyday Life.*

(A) THE BEGINNING OF THE TREATMENT

The next day I made him pledge himself to submit to the one and only condition of the treatment - namely, to say everything that came into his head, even if it was *unpleasant* to him, or seemed *unimportant* or *irrelevant* or *senseless*. I then gave him leave to start his communications with any subject he pleased, and he began thus:¹

He had a friend, he told me, of whom he had an extraordinarily high opinion. He used always to go to him when he was tormented by some criminal impulse, and ask him whether he despised him as a criminal. His friend used then to give him moral support by assuring him that he was a man of irreproachable conduct, and had probably been in the habit, from his youth onwards, of taking a dark view of his own life. At an earlier date, he went on, another person had exercised a similar influence over him. This was a nineteen-year-old student (he himself had been fourteen or fifteen at the time) who had taken a liking to him, and had raised his self-esteem to an extraordinary degree, so that he appeared to himself to be a genius. This student had subsequently become his tutor, and had suddenly altered his behaviour and begun treating him as though he were an idiot. At length he had noticed that the student was interested in one of his sisters, and had realized that he had only taken him up in order to gain admission into the house. This had been the first great blow of his life.

He then proceeded without any apparent transition:-

¹ What follows is based upon notes made on the evening of the day of treatment, and adheres as closely as possible to my recollection of the patient's words. - I feel obliged to offer a warning against the practice of noting down what the patient says during the actual time of treatment. The consequent withdrawal of the physician's attention does the patient more harm than can be made up for by any increase in accuracy that may be achieved in the reproduction of his case history.

(B) INFANTILE SEXUALITY

'My sexual life began very early. I can remember a scene during my fourth or fifth year. (From my sixth year onwards I can remember everything.) This scene came into my head quite distinctly, years later. We had a very pretty young governess called Fräulein Peter.¹ One evening she was lying on the sofa lightly dressed, and reading. I was lying beside her, and begged her to let me creep under her skirt. She told me I might, so long as I said nothing to any one about it. She had very little on, and I fingered her genitals and the lower part of her body, which struck me as very queer. After this I was left with a burning and tormenting curiosity to see the female body. I can still remember the intense excitement with which I waited at the Baths (which I was still allowed to go to with the governess and my sisters) for the governess to undress and get into the water. I can remember more things from my sixth year onwards. At that time we had another governess, who was also young and good-looking. She had abscesses on her buttocks which she was in the habit of pressing out at night. I used to wait eagerly for that moment, to appease my curiosity. It was just the same at the Baths - though Fräulein Lina was more reserved than her predecessor.' (In reply to a question which I threw in, 'As a rule,' the patient told me, 'I did not sleep in her room, but mostly with my parents.')

'I remember a scene which must have taken place when I was seven years old.² We were sitting together one evening - the governess, the cook, another servant-girl, myself and my brother, who was eighteen months younger than me. The young women were talking, and I suddenly became aware of Fräulein Lina saying: "It could be done with the little one; but Paul" (that was I) "is too clumsy, he would be sure to miss it." I did not understand clearly what was meant, but I felt the slight and began to cry. Lina comforted me, and told me how a girl, who had done something of the kind with a little boy she was in charge of, had been put in prison for several months. I do not believe she actually did anything wrong with me, but I took a great many liberties with her. When I got into her bed I used to uncover her and touch her, and she made no objections. She was not very intelligent, and clearly had very strong sexual cravings. At twenty-three she had already had a child. She afterwards married its father, so that to-day she is a Frau Hofrat. Even now I often see her in the street.

¹ Dr. Alfred Adler, who was formerly an analyst, once drew attention in a privately delivered paper to the peculiar importance which attaches to the *very first* communications made by patients. Here is an instance of this. The patient's opening words laid stress upon the influence exercised over him by men, that is to say, upon the part played in his life by homosexual object-choice; but immediately afterwards they touched upon a second *motif*, which was to become of great importance later on, namely, the conflict between man and woman and the opposition of their interests. Even the fact that he remembered his first pretty governess by her surname, which happened to be a man's first name, must be taken into account in this connection. In middle-class circles in Vienna it is more usual to call a governess by her first name, and it is by that name that she is more commonly remembered.

² The patient subsequently admitted that this scene probably occurred one or two years later.

'When I was six years old I already suffered from erections, and I know that once I went to my mother to complain about them. I know too that in doing so I had some misgivings to get over, for I had a feeling that there was some connection between this subject and my ideas and inquisitiveness, and at that time I used to have a morbid idea *that my parents knew my thoughts; I explained this to myself by supposing that I had spoken them out loud, without having heard myself do it.* I look on this as the beginning of my illness. There were certain people, girls, who pleased me very much, and I had a very strong wish *to see them naked.* But in wishing this I had *an uncanny feeling, as though something must happen if I thought such things, and as though I must do all sorts of things to prevent it.'*

(In reply to a question he gave an example of these fears: 'For instance, *that my father might die.*')
'Thoughts about my father's death occupied my mind from a very early age and for a long period of time, and greatly depressed me.'

At this point I learnt with astonishment that the patient's father, with whom his obsessional fears were, after all, occupied *now*, had died several years previously.

The events in his sixth or seventh year which the patient described in the first hour of his treatment were not merely, as he supposed, the beginning of his illness, but were already the illness itself. It was a complete obsessional neurosis, wanting in no essential element, at once the nucleus and the prototype of the later disorder, - an elementary organism, as it were, the study of which could alone enable us to obtain a grasp of the complicated organization of his subsequent illness. The child, as we have seen, was under the domination of a component of the sexual instinct, the desire to look, as a result of which there was a constant recurrence in him of a very intense wish connected with persons of the female sex who pleased him - the wish, that is, to see them naked. This wish corresponds to the later obsessional or compulsive idea; and if the quality of compulsion was not yet present in the wish, this was because the ego had not yet placed itself in complete opposition to it and did not yet regard it as something foreign to itself. Nevertheless, opposition to this wish from some source or other was already in activity, for its occurrence was regularly accompanied by a distressing affect.¹ A conflict was evidently in progress in the mind of this young libertine. Side by side with the obsessive wish, and intimately associated with it, was an obsessive fear: every time he had a wish of this kind he could not help fearing that something dreadful would happen. This something dreadful was already clothed in a characteristic indeterminateness which was thenceforward to be an invariable feature of every manifestation of the neurosis. But in a child it is not hard to discover what it is that is veiled behind an indeterminateness of this kind. If the patient can once be induced to give a particular instance in place of the vague generalities which characterize an obsessional neurosis, it may be confidently assumed that the instance is the original and actual thing which has tried to hide itself behind the generalization. Our present patient's obsessive fear, therefore, when restored to its original meaning, would run as follows: 'If I have this wish to see a woman naked, my father will be bound to die.' The distressing affect was distinctly coloured with a tinge of uncanniness and superstition, and was already beginning to give rise to impulses to do something to ward off the impending evil. These impulses were subsequently to develop into the *protective measures* which the patient adopted.

¹ Yet attempts have been made to explain obsessions without taking the affects into account!

We find, accordingly: an erotic instinct and a revolt against it; a wish which has not yet become compulsive and, struggling against it, a fear which is already compulsive; a distressing affect and an impulsion towards the performance of defensive acts. The inventory of the neurosis has reached its full muster. Indeed, something more is present, namely, a kind of *delusion* or *delirium* with the strange content that his parents knew his thoughts because he spoke them out loud without his hearing himself do it. We shall not go far astray if we suppose that in making this attempt at an explanation the child had some inkling of those remarkable mental processes which we describe as unconscious and which we cannot dispense with if we are to throw any scientific light upon this obscure subject. 'I speak my thoughts out loud, without hearing them' sounds like a projection into the external world of our own hypothesis that he had thoughts without knowing anything about them; it sounds like an endopsychic perception of what has been repressed.

For the situation is clear. This elementary neurosis of childhood already involved a problem and an apparent absurdity, like any complicated neurosis of maturity. What can have been the meaning of the child's idea that if he had this lascivious wish his father would be bound to die? Was it sheer nonsense? Or are there means of understanding the words and of perceiving them as a necessary consequence of earlier events and premises?

If we apply knowledge gained elsewhere to this case of childhood neurosis, we shall not be able to avoid a suspicion that in this instance as in others (that is to say, before the child had reached his sixth year) there had been conflicts and repressions, which had themselves been overtaken by amnesia, but had left behind them as a residuum the particular content of this obsessive fear. Later on we shall learn how far it is possible for us to rediscover those forgotten experiences or to reconstruct them with some degree of certainty. In the meantime stress may be laid on the fact, which is probably more than a mere coincidence, that the patient's infantile amnesia ended precisely with his sixth year.

To find a chronic obsessional neurosis beginning like this in early childhood, with lascivious wishes of this sort connected with uncanny apprehensions and an inclination to the performance of defensive acts, is no new thing to me. I have come across it in a number of other cases. It is absolutely typical, although probably not the only possible type. Before proceeding to the events of the second session, I should like to add one more word on the subject of the patient's early sexual experiences. It will hardly be disputed that they may be described as having been considerable both in themselves and in their consequences. But it has been the same with the other cases of obsessional neurosis that I have had the opportunity of analysing. Such cases, unlike those of hysteria, invariably possess the characteristic of premature sexual activity. Obsessional neuroses make it much more obvious than hysterias that the factors which go to form a psychoneurosis are to be found in the patient's *infantile* sexual life and not in his present one. The current sexual life of an obsessional neurotic may often appear perfectly normal to a superficial observer; indeed, it frequently offers to the eye far fewer pathogenic elements and abnormalities than in the instance we are now considering.

(C) THE GREAT OBSESSIVE FEAR

'I think I will begin to-day with the experience which was the immediate occasion of my coming to you. It was in August, during the manoeuvres in ---. I had been suffering before, and tormenting myself with all kinds of obsessional thoughts, but they had quickly passed off during the manoeuvres. I was keen to show the regular officers that people like me had not only learnt a good deal but could stand a good deal too. One day we started from --- on a short march. During a halt I lost my pince-nez, and, although I could easily have found them, I did not want to delay our start, so I gave them up. But I wired to my opticians in Vienna to send me another pair by the next post. During that same halt I sat between two officers, one of whom, a captain with a Czech name, was to be of no small importance to me. I had a kind of dread of him, *for he was obviously fond of cruelty*. I do not say he was a bad man, but at the officers' mess he had repeatedly defended the introduction of corporal punishment, so that I had been obliged to disagree with him very sharply. Well, during this halt we got into conversation, and the captain told me he had read of a specially horrible punishment used in the East . . .'

Here the patient broke off, got up from the sofa, and begged me to spare him the recital of the details. I assured him that I myself had no taste whatever for cruelty, and certainly had no desire to torment him, but that naturally I could not grant him something which was beyond my power. He might just as well ask me to give him the moon. The overcoming of resistances was a law of the treatment, and on no consideration could it be dispensed with. (I had explained the idea of 'resistance' to him at the beginning of the hour, when he told me there was much in himself which he would have to overcome if he was to relate this experience of his.) I went on to say that I would do all I could, nevertheless, to guess the full meaning of any hints he gave me. Was he perhaps thinking of impalement? - 'No, not that; . . . the criminal was tied up . . .' - he expressed himself so indistinctly that I could not immediately guess in what position - 'a pot was turned upside down on his buttocks . . . some *rats* were put into it . . . and they . . .' - he had again got up, and was showing every sign of horror and resistance - '. . . *bored their way in* . . .' - Into his anus, I helped him out.

At all the more important moments while he was telling his story his face took on a very strange, composite expression. I could only interpret it as one of *horror at pleasure of his own of which he himself was unaware*. He proceeded with the greatest difficulty: 'At that moment the idea flashed through my mind *that this was happening to a person who was very dear to me*.'¹ In answer to a direct question he said that it was not he himself who was carrying out the punishment, but that it was being carried out as it were impersonally. After a little prompting I learnt that the person to whom this 'idea' of his related was the lady whom he admired.

¹ He said 'idea' - the stronger and more significant term 'wish', or rather 'fear', having evidently been censored. Unfortunately I am not able to reproduce the peculiar indeterminateness of all his remarks.

He broke off his story in order to assure me that these thoughts were entirely foreign and repugnant to him, and to tell me that everything which had followed in their train had passed through his mind with the most extraordinary rapidity. Simultaneously with the idea there always appeared a 'sanction', that is to say, the defensive measure which he was obliged to adopt in order to prevent the phantasy from being fulfilled. When the captain had spoken of this ghastly punishment, he went on, and these ideas had come into his head, by employing his usual formulas (a 'but' accompanied by a gesture of repudiation, and the phrase 'whatever are you thinking of?') he had just succeeded in warding off *both* of them.

This 'both' took me aback, and it has no doubt also mystified the reader. For so far we have heard only of one idea - of the rat punishment being carried out upon the lady. He was now obliged to admit that a second idea had occurred to him simultaneously, namely, the idea of the punishment being applied to his father. As his father had died many years previously, this obsessive fear was much more nonsensical even than the first, and accordingly it had attempted to escape being confessed to for a little while longer.

That evening, he continued, the same captain had handed him a packet that had arrived by the post and had said: 'Lieutenant A.¹ has paid the charges for you. You must pay him back.' The packet had contained the pince-nez that he had wired for. At that instant, however, a 'sanction' had taken shape in his mind, namely, *that he was not to pay back the money* or it would happen - (that is, the phantasy about the rats would come true as regards his father and the lady). And immediately, in accordance with a type of procedure with which he was familiar, to combat this sanction there had arisen a command in the shape of a vow: '*You must pay back the 3.80 Kronen to Lieutenant A.*' He had said these words to himself almost half aloud.

Two days later the manoeuvres had come to an end. He had spent the whole of the intervening time in efforts at repaying Lieutenant A. the small amount in question; but a succession of difficulties of an apparently *external* nature had arisen to prevent it. First he had tried to effect the payment through another officer who had been going to the post office. But he had been much relieved when this officer brought him back the money, saying that he had not met Lieutenant A. there, for this method of fulfilling his vow had not satisfied him, as it did not correspond with the wording, which ran: '*You must pay back the money to Lieutenant A.*' Finally, he had met Lieutenant A., the person he was looking for; but that officer had refused to accept the money, declaring that he had not paid anything for him, and had nothing whatever to do with the post, which was the business of Lieutenant B. This had thrown my patient into great perplexity, for it meant that he was unable to keep his vow, since it had been based upon false premises. He had excogitated a very curious means of getting out of his difficulty, namely, that he should go to the post office with both the men, A. and B., that A. should give the young lady there the 3.80 *kronen*, that the young lady should give them to B., and that then he himself should pay back the 3.80 *kronen* to A. according to the wording of his vow.

¹ The names are of little consequence here.

It would not surprise me to hear that at this point the reader had ceased to be able to follow. For even the detailed account which the patient gave me of the external events of these days and of his reactions to them was full of self-contradictions and sounded hopelessly confused. It was only when he told the story for the third time that I could get him to realize its obscurities and could lay bare the errors of memory and the displacements in which he had become involved. I shall spare myself the trouble of reproducing these details, the essentials of which we shall easily be able to pick up later on, and I will only add that at the end of this second session the patient behaved as though he were dazed and bewildered. He repeatedly addressed me as 'Captain', probably because at the beginning of the hour I had told him that I myself was not fond of cruelty like Captain N., and that I had no intention of tormenting him unnecessarily.

The only other piece of information that I obtained from him during this hour was that from the very first, on all the previous occasions on which he had had a fear that something would happen to people he loved no less than on the present one, he had referred the punishments not only to our present life but also to eternity - to the next world. Up to his fourteenth or fifteenth year he had been devoutly religious, but from that time on he had gradually developed into the free-thinker that he was to-day. He reconciled the contradiction between his beliefs and his obsessions by saying to himself: 'What do you know about the next world? Nothing *can* be known about it. You're not risking anything - so do it.' This form of argument seemed unobjectionable to a man who was in other respects particularly clear-headed, and in this way he exploited the uncertainty of reason in the face of these questions to the benefit of the religious attitude which he had outgrown.

At the third session he completed his very characteristic story of his efforts at fulfilling his obsessional vow. That evening the last gathering of officers had taken place before the end of the manoeuvres. It had fallen to him to reply to the toast of 'The Gentlemen of the Reserve'. He had spoken well, but as if he were in a dream, for at the back of his mind he was being incessantly tormented by his vow. He had spent a terrible night. Arguments and counter-arguments had struggled with one another. The chief argument, of course, had been that the premise upon which his vow had been based - that Lieutenant A. had paid the money for him - had proved to be false. However, he had consoled himself with the thought that the business was not yet finished, as A. would be riding with him next morning part of the way to the railway station at P--, so that he would still have time to ask him the necessary favour. As a matter of fact he had not done this, and had allowed A. to go off without him; but he had given instructions to his orderly to let A. know that he intended to pay him a visit that afternoon. He himself had reached the station at half-past nine in the morning. He had deposited his luggage there and had seen to various things he had to do in the small town, with the intention of afterwards paying his visit to A. The village in which A. was stationed was about an hour's drive from the town of P--. The railway journey to the place where the post office was would take three hours. He had calculated, therefore, that the execution of his complicated plan would just leave him time to catch the evening train from P--- to Vienna. The ideas that were struggling within him had been, on the one hand, that he was simply being cowardly and was obviously only trying to save himself the unpleasantness of asking A. to make the sacrifice in question and of cutting a foolish figure before him, and that that was why he was disregarding his vow; and, on the other hand, that it would, on the contrary, be cowardly of him to *fulfil* his vow, since he only wanted to do so in order to be left in peace by his obsessions. When in the course of his deliberations, the patient added, he found the arguments so evenly balanced as these, it was his custom to allow his actions to be decided by chance events as though by the hand of God. When, therefore, a porter at the station had addressed him with the words, 'Ten o'clock train, sir?' he had answered 'Yes', and in fact had gone off by the ten o'clock train. In this way he had produced *fait accompli* and felt greatly relieved. He had proceeded to book a seat for luncheon in the restaurant car. At the first station they had stopped at it had suddenly struck him that he still had time to get out, wait for the next down train, travel back in it to P--, drive to the place where Lieutenant A. was quartered, from there make the three hours' train journey with him to the post office, and so forth. It had only been the consideration that he had booked his seat for luncheon with the steward of the restaurant car that had prevented his carrying out this design. He had not abandoned it, however; he had only put off getting out until a later stop. In this way he had struggled through from station to station, till he had reached one at which it had seemed to him impossible to get out because he had relatives living there. He had then determined to travel through to Vienna, to look up his friend there and lay the whole matter before him, and then, after his friend had made his decision, to catch the night train back to P--. When I expressed a doubt whether this would have been feasible, he assured me that he would have had half an hour to spare between the arrival of the one train and the departure of the other. When he had arrived in Vienna, however, he had failed to find his friend at the restaurant at which he had counted on meeting him, and had not reached his friend's house till eleven o'clock at night. He told him the whole story that very night. His friend had held up his hands in amazement to think that he could still be in doubt whether he was suffering from an obsession, and had calmed him down for the night, so that he had slept excellently. Next morning they had gone together to the post office, to dispatch the 3.80 *kronen* to the post office at which the packet containing the pince-nez had arrived.

It was this last statement which provided me with a starting-point from which I could begin straightening out the various distortions involved in his story. After his friend had brought him to his senses he had dispatched the small sum of money in question neither to Lieutenant A. nor to Lieutenant B., but direct to the post office. He must therefore have known that he owed the amount of the charges due upon the packet *to no one but the official at the post office*, and he must have known this before he started on his journey. It turned out that in fact he had known it before the captain made his request and before he himself made his vow; for he now remembered that a few hours *before* meeting the cruel captain he had had occasion to introduce himself to another captain, who had told him how matters actually stood. This officer, on hearing his name, had told him that he had been at the post office a short time before, and that the young lady there had asked him whether he knew a Lieutenant L. (the patient, that is), for whom a packet had arrived, to be paid for on delivery. The officer had replied that he did not, but the young lady had been of opinion that she could trust the unknown lieutenant and had said that in the meantime she would pay the charges herself. It had been in this way that the patient had come into possession of the pince-nez he had ordered. The cruel captain had made a mistake when, as he handed him over the packet, he had asked him to pay back the 3.80 *kronen* to A., and the patient must have known it was a mistake. In spite of this he had made a vow founded upon this mistake, a vow that was bound to be a torment to him. In so doing he had suppressed to himself, just as in telling the story he had suppressed to me, the episode of the other captain and the existence of the trusting young lady at the post office. I must admit that when this correction has been made his behaviour becomes even more senseless and unintelligible than before.

After he had left his friend and returned to his family his doubts had overtaken him afresh. His friend's arguments, he saw, had been no different from his own, and he was under no delusion that his temporary relief was attributable to anything more than his friend's personal influence. His determination to consult a doctor was woven into his delirium in the following ingenious manner. He thought he would get a doctor to give him a certificate to the effect that it was necessary for him, in order to recover his health, to perform some such action as he had planned in connection with Lieutenant A.; and the lieutenant would no doubt let himself be persuaded by the certificate into accepting the 3.80 crowns from him. The chance that one of my books happened to fall into his hands just at that moment directed his choice to me. There was no question of getting a certificate from me, however; all that he asked of me was, very reasonably, to be freed of his obsessions. Many months later, when his resistance was at its height, he once more felt a temptation to travel to P-- after all, to look up Lieutenant A. and to go through the farce of returning him the money.

(D) INITIATION INTO THE NATURE OF THE TREATMENT

The reader must not expect to hear at once what light I have to throw upon the patient's strange and senseless obsessions about the rats. The true technique of psycho-analysis requires the physician to suppress his curiosity and leaves the patient complete freedom in choosing the order in which topics shall succeed each other during the treatment. At the fourth session, accordingly, I received the patient with the question: 'And how do you intend to proceed to-day?'

'I have decided to tell you something which I consider most important and which has tormented me from the very first.' He then told me at great length the story of the last illness of his father, who had died of emphysema nine years previously. One evening, thinking that the condition was one which would come to a crisis, he had asked the doctor when the danger could be regarded as over. 'The evening of the day after to-morrow', had been the reply. It had never entered his head that his father might not survive that limit. At half-past eleven at night he had lain down for an hour's rest. He had woken up at one o'clock, and had been told by a medical friend that his father had died. He had reproached himself with not having been present at his death; and the reproach had been intensified when the nurse told him that his father had spoken his name once during the last days, and had said to her as she came up to the bed: 'Is that Paul?' He had thought he noticed that his mother and sisters had been inclined to reproach themselves in a similar way; but they had never spoken about it. At first, however, the reproach had not tormented him. For a long time he had not realized the fact of his father's death. It had constantly happened that, when he heard a good joke, he would say to himself: 'I must tell Father that.' His imagination, too, had been occupied with his father, so that often, when there was a knock at the door, he would think: 'Here comes Father', and when he walked into a room he would expect to find his father in it. And although he had never forgotten that his father was dead, the prospect of seeing a ghostly apparition of this kind had had no terrors for him; on the contrary, he had greatly desired it. It had not been until eighteen months later that the recollection of his neglect had recurred to him and begun to torment him terribly, so that he had come to treat himself as a criminal. The occasion of this happening had been the death of an aunt by marriage and of a visit of condolence that he had paid at her house. From that time forward he had extended the structure of his obsessional thoughts so as to include the next world. The immediate consequence of this development had been that he became seriously incapacitated from working.¹ He told me that the only thing that had kept him going at that time had been the consolation given him by his friend, who had always brushed his self-reproaches aside on the ground that they were grossly exaggerated. Hearing this, I took the opportunity of giving him a first glance at the underlying principles of psycho-analytic therapy. When there is a *mésalliance*, I began, between an affect and its ideational content (in this instance, between the intensity of the self-reproach and the occasion for it), a layman will say that the affect is too great for the occasion - that it is exaggerated and that consequently the inference following from the self-reproach (the inference that the patient is a criminal) is false. On the contrary, the physician says: 'No. The affect is justified. The sense of guilt is not in itself open to further criticism. But it belongs to some other content, which is unknown (*unconscious*), and which requires to be looked for. The known ideational content has only got into its actual position owing to a false connection. We are not used to feeling strong affects without their having any ideational content, and therefore, if the content is missing, we seize as a substitute upon some other content which is in some way or other suitable, much as our police, when they cannot catch the right murderer, arrest a wrong one instead. Moreover, this fact of there being a false connection is the only way of accounting for the powerlessness of logical processes to combat the tormenting idea.' I concluded by admitting that this new way of looking at the matter gave immediate rise to some hard problems; for how could he admit that his self-reproach of being a criminal towards his father was justified, when he must know that as a matter of fact he had never committed any crime against him?

¹ A more detailed description of the episode, which the patient gave me later on, made it possible to understand the effect that it produced on him. His uncle, lamenting the loss of his wife, had exclaimed: 'Other men allow themselves every possible indulgence, but I lived for this woman alone!' The patient had assumed that his uncle was alluding to his father and was casting doubts upon his conjugal fidelity; and although his uncle had denied this construction of his words most positively, it was no longer possible to counteract their effect.

At the next session the patient showed great interest in what I had said, but ventured, so he told me, to bring forward a few doubts. - How, he asked, could the information that the self-reproach, the sense of guilt, was justified have a therapeutic effect? - I explained that it was not the information that had this effect, but the discovery of the unknown content to which the self-reproach was really attached. - Yes, he said, that was the precise point to which his question had been directed. - I then made some short observations upon *the psychological differences between the conscious and the unconscious*, and upon the fact that everything conscious was subject to a process of wearing-away, while what was unconscious was relatively unchangeable; and I illustrated my remarks by pointing to the antiques standing about in my room. They were, in fact, I said, only objects found in a tomb, and their burial had been their preservation: the destruction of Pompeii was only beginning now that it had been dug up. - Was there any guarantee, he next enquired, of what one's attitude would be towards what was discovered? One man, he thought, would no doubt behave in such a way as to get the better of his self-reproach, but another would not. - No, I said, it followed from the nature of the circumstances that in every case the affect would be overcome - for the most part during the progress of the work itself. Every effort was made to preserve Pompeii, whereas people were anxious to be rid of tormenting ideas like his. - He had said to himself, he went on, that a self-reproach could only arise from a breach of a person's own inner moral principles and not from that of any external ones. - I agreed, and said that the man who merely breaks an external law often regards himself as a hero. - Such an occurrence, he continued, was thus only possible where a *disintegration of the personality* was already present. Was there a possibility of his effecting a reintegration of his personality? If this could be done, he thought he would be able to make a success of his life, perhaps more of one than most people. - I replied that I was in complete agreement with this notion of a splitting of his personality. He had only to assimilate this new contrast, between a moral self and an evil one, with the contrast I had already mentioned, between the conscious and the unconscious. The moral self was the conscious, the evil self was the unconscious.¹ - He then said that, though he considered himself a moral person, he could quite definitely remember having done things in his *childhood* which came from his other self. - I remarked that here he had incidentally hit upon one of the chief characteristics of the unconscious, namely, its relation to the *infantile*. The unconscious, I explained, was the infantile; it was that part of the self which had become separated off from it in infancy, which had not shared the later stages of its development, and which had in consequence become *repressed*. It was the derivatives of this repressed unconscious that were responsible for the involuntary thoughts which constituted his illness. He might now, I added, discover yet another characteristic of the unconscious; it was a discovery which I should be glad to let him make for himself. - He found nothing more to say in this immediate connection, but instead he expressed a doubt whether it was possible to undo modifications of such long standing. What, in particular, could be done against his idea about the next world, for it could not be refuted by logic? - I told him I did not dispute the gravity of his case nor the significance of his pathological constructions; but at the same time his youth was very much in his favour as well as the intactness of his personality. In this connection I said a word or two upon the good opinion I had formed of him, and this gave him visible pleasure.

¹ All of this is of course only true in the roughest way, but it serves as a first introduction to the subject.

At the next session he began by saying that he must tell me an event in his childhood. From the age of seven, as he had already told me, he had had a fear that his parents guessed his thoughts, and this fear had in fact persisted all through his life. When he was twelve years old he had been in love with a little girl, the sister of a friend of his. (In answer to a question he said that his love had not been sensual; he had not wanted to see her naked for she was too small.) But she had not shown him as much affection as he had desired. And thereupon the idea had come to him that she would be kind to him if some misfortune were to befall him; and as an instance of such a misfortune his father's death had forced itself upon his mind. He had at once rejected the idea with energy. And even now he could not admit the possibility that what had arisen in this way could have been a 'wish'; it had clearly been no more than a 'train of thought'¹ - By way of objection I asked him why, if it had not been a wish, he had repudiated it. - Merely, he replied, on account of the content of the idea, the notion that his father might die. - I remarked that he was treating the phrase as though it were one that involved *lèse-majesté*; it was well known, of course, that it was equally punishable to say 'The Emperor is an ass' or to disguise the forbidden words by saying 'If any one says, etc., . . . then he will have me to reckon with.' I added that I could easily insert the idea which he had so energetically repudiated into a context which would exclude the possibility of any such repudiation: for instance, 'If my father dies, I shall kill myself upon his grave.' - He was shaken, but did not abandon his objection. I therefore broke off the argument with the remark that I felt sure this had not been the first occurrence of his idea of his father's dying; it had evidently originated at an earlier date, and some day we should have to trace back its history. - He then proceeded to tell me that a precisely similar thought had flashed through his mind a second time, six months before his father's death. At that time² he had already been in love with his lady, but financial obstacles made it impossible to think of an alliance with her. The idea had then occurred to him that *his father's death might make him rich enough to marry her*. In defending himself against this idea he had gone to the length of wishing that his father might leave him nothing at all, so that he might have no compensation for his terrible loss. The same idea, though in a much milder form, had come to him for a third time, on the day before his father's death. He had then thought: 'Now I may be going to lose what I love most'; and then had come the contradiction: 'No, there is some one else whose loss would be even more painful to you.'³ These thoughts surprised him very much, for he was quite certain that his father's death could never have been an object of his desire but only of his fear. - After his forcible enunciation of these words I thought it advisable to bring a fresh piece of theory to his notice. According to psycho-analytic theory, I told him, every fear corresponded to a former wish which was now repressed; we were therefore obliged to believe the exact contrary of what he had asserted. This would also fit in with another theoretical requirement, namely, that the unconscious must be the precise contrary of the conscious. - He was much agitated at this and very incredulous. He wondered how he could possibly have had such a wish, considering that he loved his father more than any one else in the world; there could be no doubt that he would have renounced all his own prospects of happiness if by so doing he could have saved his father's life. - I answered that it was precisely such intense love as his that was the necessary precondition of the repressed hatred. In the case of people to whom he felt indifferent he would certainly have no difficulty in maintaining side by side inclinations to a moderate liking and to an equally moderate dislike: supposing, for instance, that he were an official, he might think that his chief was agreeable as a superior, but at the same time pettifogging as a lawyer and inhuman as a judge. (Shakespeare makes Brutus speak in a similar way of Julius Caesar: 'As Caesar loved me, I weep for him; as he was fortunate, I rejoice at it; as he was valiant, I honour him; but, as he was ambitious, I slew him.' But these words already strike us as rather strange, and for the very reason that we had imagined Brutus's feeling for Caesar as something deeper.) In the case of some one who was closer to him, of his wife for instance, he would wish his feelings to be unmixed, and consequently, as was only human, he would overlook her faults, since they might make him dislike her - he would ignore them as though he were blind to them. So it was precisely the intensity of his love that would not allow his hatred - though to give it such a name was to caricature the feeling - to remain conscious. To be sure, the hatred must have a source, and to discover that source was certainly a problem; his own statements pointed to the time when he was afraid that his parents guessed his thoughts. On the other hand, too, it might be asked why this intense love of his had not succeeded in extinguishing his hatred, as usually happened where there were two opposing impulses. We could only presume that the hatred must flow from some source, must be connected with some particular cause, which made it indestructible. On the one hand, then, some connection of this sort must be keeping his hatred for his father alive, while on the other hand, his intense love prevented it from becoming conscious. Therefore nothing remained for it but to exist in the unconscious, though it was able from time to time to flash out for a moment into consciousness.

¹ Obsessional neurotics are not the only people who are satisfied with euphemisms of this kind.

² That is, ten years ago.

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³ There is here an unmistakable indication of an opposition between the two objects of his love, his father and the 'lady'.

He admitted that all of this sounded quite plausible, but he was naturally not in the very least convinced by it.¹ He would venture to ask, he said, how it was that an idea of this kind could have remissions, how it could appear for a moment when he was twelve years old, and again when he was twenty, and then once more two years later, this time for good. He could not believe that his hostility had been extinguished in the intervals, and yet during them there had been no sign of self-reproaches. - To this I replied that whenever any one asked a question like that, he was already prepared with an answer; he needed only to be encouraged to go on talking. - He then proceeded, somewhat disconnectedly as it seemed, to say that he had been his father's best friend, and that his father had been his. Except on a few subjects, upon which fathers and sons usually hold aloof from one another - (What could he mean by that ?) -, there had been a greater intimacy between them than there now was between him and his best friend. As regards the lady for whose sake he had sacrificed his father in that idea of his, it was true that he had loved her very much, but he had never felt really sensual wishes towards her, such as he had constantly had in his childhood. Altogether, in his childhood his sensual impulses had been much stronger than during his puberty. - At this I told him I thought he had now produced the answer we were waiting for, and had at the same time discovered the third great characteristic of the unconscious. The source from which his hostility to his father derived its indestructibility was evidently something in the nature of *sensual desires*, and in that connection he must have felt his father as in some way or other an *interference*. A conflict of this kind, I added, between sensuality and childish love was entirely typical. The remissions he had spoken of had occurred because the premature explosion of his sensual feelings had had as its immediate consequence a considerable diminution of their violence. It was not until he was once more seized with intense erotic desires that his hostility reappeared again owing to the revival of the old situation. I then got him to agree that I had not led him on to the subject either of childhood or of sex, but that he had raised them both of his own free will. - He then went on to ask why he had not simply come to a decision, at the time he was in love with the lady, that his father's interference with that love could not for a moment weigh against his love of his father. - I replied that it was scarcely possible to destroy a person *in absentia*. Such a decision would only have been possible if the wish that he took objection to had made its first appearance on that occasion; whereas, as a matter of fact, it was a *long-repressed wish*, towards which he could not behave otherwise than he had formerly done, and which was consequently immune from destruction. This wish (to get rid of his father as being an interference) must have originated at a time when circumstances had been very different - at a time, perhaps, when he had not loved his father more than the person whom he desired sensually, or when he was incapable of making a clear decision. It must have been in his very early childhood, therefore, before he had reached the age of six, and before the date at which his memory became continuous; and things must have remained in the same state ever since. - With this piece of construction our discussion was broken off for the time being.

¹ It is never the aim of discussions like this to create conviction. They are only intended to bring the repressed complexes into consciousness, to set the conflict going in the field of conscious mental activity, and to facilitate the emergence of fresh material from the unconscious. A sense of conviction is only attained after the patient has himself worked over the reclaimed material, and so long as he is not fully convinced the material must be considered as unexhausted.

At the next session, which was the seventh, he took up the same subject once more. He could not believe, he said, that he had ever entertained such a wish against his father. He remembered a story of Sudermann's, he went on, that had made a deep impression upon him. In this story there was a woman who, as she sat by her sister's sick-bed, felt a wish that her sister should die so that she herself might marry her husband. The woman thereupon committed suicide, thinking she was not fit to live after being guilty of such baseness. He could understand this, he said, and it would be only right if his thoughts were the death of him, for he deserved nothing less.¹ - I remarked that it was well known to us that patients derived a certain satisfaction from their sufferings, so that in reality they all resisted their own recovery to some extent. He must never lose sight of the fact that a treatment like ours proceeded to the accompaniment of a *constant resistance*; I should be repeatedly reminding him of this fact.

He then went on to say that he would like to speak of a criminal act, whose author he did not recognize as himself, though he quite clearly recollected committing it. He quoted a saying of Nietzsche's:² "I did this," says my Memory. "I cannot have done this," says my Pride and remains inexorable. In the end - Memory yields.' 'Well,' he continued, 'my memory has *not* yielded on this point.' - 'That is because you derive pleasure from your self-reproaches as a means of self-punishment.' - 'My younger brother - I am really very fond of him now, and he is causing me a great deal of worry just at present, for he wants to make what I consider a preposterous match; I have thought before now of going and killing the person concerned so as to prevent his marrying her -well, my younger brother and I used to fight a lot when we were children. We were very fond of each other at the same time, and were inseparable; but I was plainly filled with jealousy, as he was the stronger and better-looking of the two and consequently the favourite.' - 'Yes. You have already given me a description of a scene of jealousy in connection with Fräulein Lina.' - 'Very well then, on some such occasion (it was certainly before I was eight years old, for I was not going to school yet, which I began to do when I was eight) - on some such occasion, this is what I did. We both had toy guns of the usual make. I loaded mine with the ram rod and told him that if he looked up the barrel he would see something. Then, while he was looking in, I pulled the trigger. He was hit on the forehead and not hurt; but I had meant to hurt him very much indeed. Afterwards I was quite beside myself, and threw myself on the ground and asked myself however I could have done such a thing. But I *did* do it.' - I took the opportunity of urging my case. If he had preserved the recollection of an action so foreign to him as this, he could not, I maintained, deny the possibility of something similar, which he had now forgotten entirely, having happened at a still earlier age in relation to his father. - He then told me he was aware of having felt other vindictive impulses, this time towards the lady he admired so much, of whose character he painted a glowing picture. It might be true, he said, that she could not love easily; but she was reserving her whole self for the one man to whom she would some day belong. She did not love him. When he had become certain of that, a conscious phantasy had taken shape in his mind of how he should grow very rich and marry some one else, and should then take her to call on the lady in order to hurt her feelings. But at that point the phantasy had broken down, for he had been obliged to own to himself that the other woman, his wife, was completely indifferent to him; then his thoughts had become confused, till finally it had been clearly borne in upon him that this other woman would have to die. In this phantasy, just as in his attempt upon his brother, he recognized the quality of *cowardice* which was so particularly horrible to him.³ - In the further course of our conversation I pointed out to him that he ought logically to consider himself as in no way responsible for any of these traits in his character; for all of these reprehensible impulses originated from his infancy, and were only derivatives of his infantile character surviving in his unconscious; and he must know that moral responsibility could not be applied to children. It was only by a process of development, I added, that a man, with his moral responsibility, grew up out of the sum of his infantile predispositions.⁴ He expressed a doubt, however, whether all his evil impulses had originated from that source. But I promised to prove it to him in the course of the treatment.

He went on to adduce the fact of his illness having become so enormously intensified since his father's death; and I said I agreed with him in so far as I regarded his sorrow at his father's death as the chief source of the *intensity* of his illness. His sorrow had found, as it were, a pathological expression in his illness. Whereas, I told him, a normal period of mourning would last from one to two years, a pathological one like this would last indefinitely.

This is as much of the present case history as I am able to report in a detailed and consecutive manner. It coincides roughly with the expository portion of the treatment; this lasted in all for more than eleven months.

¹ This sense of guilt involves the most glaring contradiction of his opening denial that he had ever entertained such an evil wish against his father. This is a common type of reaction to repressed material which has become conscious: the

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'No' with which the fact is first denied is immediately followed by a confirmation of it, though, to begin with, only an indirect one.

² *Jenseits von Gut und Böse*, iv. 68.

³ This quality of his will find an explanation later on.

⁴ I only produced these arguments so as once more to demonstrate to myself their inefficacy. I cannot understand how other psychotherapists can assert that they successfully combat neuroses with such weapons as these.

(E) SOME OBSESSIONAL IDEAS AND THEIR EXPLANATION

Obsessional ideas, as is well known, have an appearance of being either without motive or without meaning, just a dreams have. The first problem is how to give them a sense and a status in the subject's mental life, so as to make them comprehensible and even obvious. The problem of translating them may seem insoluble; but we must never let ourselves be misled by that illusion. The wildest and most eccentric obsessional ideas can be cleared up if they are investigated deeply enough. The solution is effected by bringing the obsessional ideas into temporal relationship with the patient's experiences, that is to say, by enquiring when a particular obsessional idea made its first appearance and in what external circumstances it is apt to recur. When, as so often happens, an obsessional idea has not succeeded in establishing itself permanently, the task of clearing it up is correspondingly simplified. We can easily convince ourselves that, when once the interconnections between an obsessional idea and the patient's experiences have been discovered, there will be no difficulty in obtaining access to whatever else may be puzzling or worth knowing in the pathological structure we are dealing with - its meaning, the mechanism of its origin, and its derivation from the preponderant motive forces of the patient's mind.

As a particularly clear example I will begin with one of the *suicidal impulses* which appeared so frequently in our patient. This instance almost analysed itself in the telling. He had once, he told me, lost some weeks of study owing to his lady's absence: she had gone away to nurse her grandmother, who was seriously ill. Just as he was in the middle of a very hard piece of work the idea had occurred to him: 'If you received a command to take your examination this term at the first possible opportunity, you might manage to obey it. But if you were commanded to cut your throat with a razor, what then?' He had at once become aware that this command had already been given, and was hurrying to the cupboard to fetch his razor when he thought: 'No, it's not so simple as that. You must¹ go and kill the old woman.' Upon that, he had fallen to the ground, beside himself with horror.

In this instance the connection between the compulsive idea and the patient's life is contained in the opening words of his story. His lady was absent, while he was working very hard for an examination so as to bring the possibility of an alliance with her nearer. While he was working he was overcome by a longing for his absent lady, and he thought of the cause of her absence. And now there came over him something which, if he had been a normal man, would probably have been some kind of feeling of annoyance with her grandmother: 'Why must the old woman get ill just at the very moment when I'm longing for *her* so frightfully?' We must suppose that something similar but far more intense passed through our patient's mind - an unconscious fit of rage which could combine with his longing and find expression in the exclamation: 'Oh, I should like to go and kill that old woman for robbing me of my love!' Thereupon followed the command: 'Kill yourself, as a punishment for these savage and murderous passions!' The whole process then passed into the obsessional patient's consciousness accompanied by the most violent affect and *in a reverse order* - the punitive command coming first, and the mention of the guilty outburst afterwards. I cannot think that this attempt at an explanation will seem forced or that it involves many hypothetical elements.

¹ The sense requires that the word 'first' should be interpolated here.

Another impulse, which might be described as *indirectly* suicidal and which was of longer duration, was not so easily explicable. For its relation to the patient's experiences succeeded in concealing itself behind one of those purely external associations which are so obnoxious to our consciousness. One day while he was away on his summer holidays the idea suddenly occurred to him that he was too fat [German '*dick*'] and that he must *make himself slimmer*. So he began getting up from table before the pudding came round and tearing along the road without a hat in the blazing heat of an August sun. Then he would dash up a mountain at the double, till, dripping with perspiration, he was forced to come to a stop. On one occasion his suicidal intentions actually emerged without any disguise from behind this mania for slimming: as he was standing on the edge of a steep precipice he suddenly received a command to jump over, which would have been certain death. Our patient could think of no explanation of this senseless obsessional behaviour until it suddenly occurred to him that at that time his lady had also been stopping at the same resort; but she had been in the company of an English cousin, who was very attentive to her and of whom the patient had been very jealous. This cousin's name was Richard, and, according to the usual practice in England, he was known as *Dick*. Our patient, then, had wanted to kill this Dick; he had been far more jealous of him and enraged with him than he could admit to himself, and that was why he had imposed on himself this course of slimming by way of a punishment. This obsessional impulse may seem very different from the directly suicidal command which was discussed above, but they have nevertheless one important feature in common. For they both arose as reactions to a tremendous feeling of rage, which was inaccessible to the patient's consciousness and was directed against some one who had cropped up as an interference with the course of his love.¹

¹ Names and words are not nearly so frequently or so recklessly employed in obsessional neuroses as in hysteria for the purpose of establishing a connection between unconscious thoughts (whether they are impulses or phantasies) and symptoms. I happen, however, to recollect another instance in which the very same name, Richard, was similarly used by a patient whom I analysed a long time since. After a quarrel with his brother he began brooding over the best means of getting rid of his fortune, and declaring that he did not want to have anything more to do with money, and so on. His brother was called Richard, and '*richard*' is the French for 'a rich man'.

Some other of the patient's obsessions, however, though they too were centred upon his lady, exhibited a different mechanism and owed their origin to a different instinct. Besides his slimming mania he produced a whole series of other obsessional activities at the period during which the lady was stopping at his summer resort; and, in part at least, these directly related to her. One day, when he was out with her in a boat and there was a stiff breeze blowing, he was obliged to make her put on his cap, because a command had been formulated in his mind that *nothing must happen to her*.¹ This was a kind of *obsession for protecting*, and it bore other fruit besides this. Another time, as they were sitting together during a thunderstorm, he was obsessed, he could not tell why, with the *necessity for counting* up to forty or fifty between each flash of lightning and its accompanying thunder-clap. On the day of her departure he knocked his foot against a stone lying in the road, and was *obliged* to put it out of the way by the side of the road, because the idea struck him that her carriage would be driving along the same road in a few hours' time and might come to grief against this stone. But a few minutes later it occurred to him that this was absurd, and he was *obliged* to go back and replace the stone in its original position in the middle of the road. After her departure he became a prey to an *obsession for understanding*, which made him a curse to all his companions. He forced himself to understand the precise meaning of every syllable that was addressed to him, as though he might otherwise be missing some priceless treasure. Accordingly he kept asking: 'What was it you said just then?' And after it had been repeated to him he could not help thinking it had sounded different the first time, so he remained dissatisfied.

¹ The words 'for which he might be to blame' must be added to complete the sense.

All of these products of his illness depended upon a certain circumstance which at that time dominated his relations to his lady. When he had been taking leave of her in Vienna before the summer holidays, she had said something which he had construed into a desire on her part to disown him before the rest of the company; and this had made him very unhappy. During her stay at the holiday resort there had been an opportunity for discussing the question, and the lady had been able to prove to him that these words of hers which he had misunderstood had on the contrary been intended to save him from looking ridiculous. This made him very happy again. The clearest allusion to this incident was contained in the obsession for understanding. It was constructed as though he were saying to himself: 'After such an experience you must never misunderstand any one again, if you want to spare yourself unnecessary distress.' This resolution was not merely a generalization from a single occasion, but it was also displaced - perhaps on account of the lady's absence - from a single highly valued individual on to all the remaining inferior ones. And the obsession cannot have arisen solely from his satisfaction at the explanation she had given him; it must have expressed something else besides, for it ended in an unsatisfying doubt as to whether what he had heard had been correctly repeated.

The other compulsive commands that have been mentioned put us upon the track of this other element. His obsession for protecting can only have been a reaction - as an expression of remorse and penitence - to a contrary, that is a hostile, impulse which he must have felt towards his lady before they had their *éclaircissement*. His obsession for counting during the thunderstorm can be interpreted, with the help of some material which he produced, as having been a defensive measure against fears that some one was in danger of death. The analysis of the obsessions which we first considered has already warned us to regard our patient's hostile impulses as particularly violent and as being in the nature of senseless rage; and now we find that even after their reconciliation his rage against the lady continued to play a part in the formation of his obsessions. His doubting mania as to whether he had heard correctly was an expression of the doubt still lurking in his mind, whether he had really understood his lady correctly this time and whether he had been justified in taking her words as a proof of her affection for him. The doubt implied in his obsession for understanding was a doubt of her love. A battle between love and hate was raging in the lover's breast, and the object of both these feelings was one and the same person. The battle was represented in a plastic form by his compulsive and symbolic act of removing the stone from the road along which she was to drive, and then of undoing this deed of love by replacing the stone where it had lain, so that her carriage might come to grief against it and she herself be hurt. We shall not be forming a correct judgement of this second part of the compulsive act if we take it at its face value as having merely been a critical repudiation of a pathological action. The fact that it was accompanied by a sense of compulsion betrays it as having itself been a part of the pathological action, though a part which was determined by a motive contrary to that which produced the first part.

Compulsive acts like this, in two successive stages, of which the second neutralizes the first, are a typical occurrence in obsessional neuroses. The patient's consciousness naturally misunderstands them and puts forward a set of secondary motives to account for them - *rationalizes* them, in short. (Cf. Jones, 1908.) But their true significance lies in their being a representation of a conflict between two opposing impulses of approximately equal strength: and hitherto I have invariably found that this opposition has been one between love and hate. Compulsive acts of this sort are theoretically of special interest, for they show us a new type of method of constructing symptoms. What regularly occurs in hysteria is that a compromise is arrived at which enables both the opposing tendencies to find expression simultaneously - which kills two birds with one stone;¹ whereas here each of the two opposing tendencies finds satisfaction singly, first one and then the other, though naturally an attempt is made to establish some sort of logical connection (often in defiance of all logic) between the antagonists.²

¹ Cf. 'Hysterical Phantasies and their Relation to Bisexuality' (Freud, 1908a).

² Another obsessional patient once told me the following story. He was walking one day in the park at Schönbrunn when he kicked his foot against a branch that was lying on the ground. He picked it up and flung it into the hedge that bordered the path. On his way home he was suddenly seized with uneasiness that the branch in its new position might perhaps be projecting a little from the hedge and might cause an injury to some one passing by the same place after him. He was obliged to jump off his tram, hurry back to the park, find the place again, and put the branch back in its former position - although any one else but the patient would have seen that, on the contrary, it was bound to be more dangerous to passers-by in its original position than where he had put it in the hedge. The second and hostile act, which he carried out under compulsion, had clothed itself to his conscious view with the motives that really belonged to the first and philanthropic one.

The conflict between love and hatred showed itself in our patient by other signs as well. At the time of the revival of his piety he made up prayers for himself, which took up more and more time and eventually lasted for an hour and a half. The reason for this was that he found, like an inverted Balaam, that something always inserted itself into his pious phrases and turned them into their opposite. E.g., if he said, 'May God protect him', an evil spirit would hurriedly insinuate a 'not'.¹ On one such occasion the idea occurred to him of cursing instead, for in that case, he thought, the contrary words would be sure to creep in. His original intention, which had been repressed by his praying, was forcing its way through in this last idea of his. In the end he found his way out of his embarrassment by giving up the prayers and replacing them by a short formula concocted out of the initial letters or syllables of various prayers. He then recited this formula so quickly that nothing could slip into it.

He once brought me a dream which represented the same conflict in relation to his transference on to the physician. He dreamt that my mother was dead; he was anxious to offer me his condolences, but was afraid that in doing so he might break into *an impertinent laugh*, as he had repeatedly done on similar occasions in the past. He preferred, therefore, to leave a card on me with 'p. c.' written on it; but as he was writing them the letters turned into 'p. f.'²

¹ Compare the similar mechanism in the familiar case of sacrilegious thoughts entering the minds of devout persons.

² [The customary abbreviations for '*pour condoler*' and '*pour féliciter*' respectively.] This dream provides the explanation of the compulsive laughter which so often occurs on mournful occasions and which is regarded as such an unaccountable phenomenon.

The mutual antagonism between his feelings for his lady was too marked to have escaped his conscious perception entirely, although we may conclude from the obsessions in which it was manifested that he did not rightly appreciate the depth of his negative impulses. The lady had refused his first proposal, ten years earlier. Since then he had to his own knowledge passed through alternating periods, in which he either believed that he loved her intensely, or felt indifferent to her. Whenever in the course of the treatment he was faced by the necessity of taking some step which would bring him nearer the successful end of his courtship, his resistance usually began by taking the form of a conviction that after all he did not very much care for her - though this resistance, it is true, used soon to break down. Once when she was lying seriously ill in bed and he was most deeply concerned about her, there crossed his mind as he looked at her a wish that she might lie like that for ever. He explained this idea by an ingenious piece of sophistry: maintaining that he had only wished her to be permanently ill so that he might be relieved of his intolerable fear that she would have a repeated succession of attacks!¹ Now and then he used to occupy his imagination with day-dreams, which he himself recognized as 'phantasies of revenge' and felt ashamed of. Believing, for instance, that the lady set great store by the social standing of a suitor, he made up a phantasy in which she was married to a man of that kind, who was in some government office. He himself then entered the same department, and rose much more rapidly than her husband, who eventually became his subordinate. One day, his phantasy proceeded, this man committed some act of dishonesty. The lady threw herself at his feet and implored him to save her husband. He promised to do so, and informed her that it had only been for love of her that he had entered the service, because he had foreseen that such a moment would occur; and now that her husband was saved, his own mission was fulfilled and he would resign his post.

He produced other phantasies in which he did the lady some great service without her knowing that it was he who was doing it. In these he only recognized his affection, without sufficiently appreciating the origin and aim of his magnanimity, which was designed to repress his thirst for revenge, after the manner of Dumas' Count of Monte-Cristo. Moreover he admitted that occasionally he was overcome by quite distinct impulses to do some mischief to the lady he admired. These impulses were mostly in abeyance when she was there, and only appeared in her absence.

¹ It cannot be doubted that another contributory motive to this compulsive idea was a wish to know that she was powerless against his designs.

(F) THE PRECIPITATING CAUSE OF THE ILLNESS

One day the patient mentioned quite casually an event which I could not fail to recognize as the precipitating cause of his illness, or at least as the immediate occasion of the attack which had begun some six years previously and had persisted to that day. He himself had no notion that he had brought forward anything of importance; he could not remember that he had ever attached any importance to the event; and moreover he had never forgotten it. Such an attitude on his part calls for some theoretical consideration.

In hysteria it is the rule that the precipitating causes of the illness are overtaken by amnesia no less than the infantile experiences by whose help the precipitating causes are able to transform their affective energy into symptoms. And where the amnesia cannot be complete, it nevertheless subjects the recent traumatic precipitating cause to a process of erosion and robs it at least of its most important components. In this amnesia we see the evidence of the repression which has taken place. The case is different in obsessional neuroses. The infantile preconditions of the neurosis may be overtaken by amnesia, though this is often an incomplete one; but the immediate occasions of the illness are, on the contrary, retained in the memory. Repression makes use of another, and in reality a simpler, mechanism. The trauma, instead of being forgotten, is deprived of its affective cathexis; so that what remains in consciousness is nothing but its ideational content, which is perfectly colourless and is judged to be unimportant. The distinction between what occurs in hysteria and in an obsessional neurosis lies in the psychological processes which we can reconstruct behind the phenomena; the *result* is almost always the same, for the colourless mnemonic content is rarely reproduced and plays no part in the patient's mental activity. In order to differentiate between the two kinds of repression we have on the surface nothing to rely upon but the patient's assurance that he has a feeling in the one case of having always known the thing and in the other of having long ago forgotten it.¹

¹ It must therefore be admitted that in an obsessional neurosis there are two kinds of knowledge, and it is just as reasonable to hold that the patient 'knows' his traumas as that he does *not* 'know' them. For he knows them in that he has not forgotten them, and he does not know them in that he is unaware of their significance. It is often the same in ordinary life. The waiters who used to serve Schopenhauer at his regular restaurant 'knew' him in a certain sense, at a time when, apart from that, he was not known either in Frankfurt or outside it; but they did not 'know' him in the sense in which we speak to-day of 'knowing' Schopenhauer.

For this reason it not uncommonly happens that obsessional neurotics, who are troubled with self-reproaches but have connected their affects with the wrong causes, will also tell the physician the true causes, without any suspicion that their self-reproaches have simply become detached from them. In relating such an incident they will sometimes add with astonishment or even with an air of pride: 'But I think nothing of that.' This happened in the first case of obsessional neurosis which gave me an insight many years ago into the nature of the malady. The patient, who was a government official, was troubled by innumerable scruples. He was the man whose compulsive act in connection with the branch in the park at Schönbrunn I have already described. I was struck by the fact that the florin notes with which he paid his consultation fees were invariably clean and smooth. (This was before we had a silver coinage in Austria.) I once remarked to him that one could always tell a government official by the brand-new florins that he drew from the State treasury, and he then informed me that his florins were by no means new, but that he had them ironed out at home. It was a matter of conscience with him, he explained, not to hand any one dirty paper florins; for they harboured all sorts of dangerous bacteria and might do some harm to the recipient. At that time I already had a vague suspicion of the connection between neuroses and sexual life, so on another occasion I ventured to ask the patient how he stood in regard to that matter. 'Oh, that's quite all right,' he answered airily, 'I'm not at all badly off in that respect. I play the part of a dear old uncle in a number of respectable families, and now and then I make use of my position to invite some young girl to go out with me for a day's excursion in the country. Then I arrange that we shall miss the train home and be obliged to spend the night out of town. I always engage two rooms - I do things most handsomely; but when the girl has gone to bed I go in to her and masturbate her with my fingers.' - 'But aren't you afraid of doing her some harm, fiddling about in her genitals with your dirty hand?' - At this he flared up: 'Harm? Why, what harm should it do her? It hasn't done a single one of them any harm yet, and they've all of them enjoyed it. Some of them are married now, and it hasn't done them any harm at all.' - He took my remonstrance in very bad part, and never appeared again. But I could only account for the contrast between his fastidiousness with the paper florins and his unscrupulousness in abusing the girls entrusted to him by supposing that the self-reproachful affect had become *displaced*. The aim of this displacement was obvious enough: if his self-reproaches had been allowed to remain where they belonged he would have had to abandon a form of sexual gratification to which he was probably impelled by some powerful infantile determinants. The displacement therefore ensured his deriving a considerable advantage from his illness.

But I must now return to a more detailed examination of the precipitating cause of our present patient's illness. His mother was brought up in a wealthy family with which she was distantly connected. This family carried on a large industrial concern. His father, at the time of his marriage, had been taken into the business, and had thus by his marriage made himself a fairly comfortable position. The patient had learnt from some chaff exchanged between his parents (whose marriage was an extremely happy one) that his father, some time before making his mother's acquaintance, had made advances to a pretty but penniless girl of humble birth. So much by way of introduction. After his father's death the patient's mother told him one day that she had been discussing his future with her rich relations, and that one of her cousins had declared himself ready to let him marry one of his daughters when his education was completed; a business connection with the firm would offer him a brilliant opening in his profession. This family plan stirred up in him a conflict as to whether he should remain faithful to the lady he loved in spite of her poverty, or whether he should follow in his father's footsteps and marry the lovely, rich, and well-connected girl who had been assigned to him. And he resolved this conflict, which was in fact one between his love and the persisting influence of his father's wishes, by falling ill; or, to put it more correctly, by falling ill he avoided the task of resolving it in real life.¹

¹ It is worth emphasizing that his flight into illness was made possible by his identifying himself with his father. The identification enabled his affects to regress on to the residue of his childhood.

The proof that this view was correct lies in the fact that the chief result of his illness was an obstinate incapacity for work, which allowed him to postpone the completion of his education for years. But the results of such an illness are never unintentional; what appears to be the *consequence* of the illness is in reality the *cause* or *motive* of falling ill.

As was to be expected, the patient did not, to begin with, accept my elucidation of the matter. He could not imagine, he said, that the plan of marriage could have had any such effects : it had not made the slightest impression on him at the time. But in the further course of treatment he was forcibly brought to believe in the truth of my suspicion, and in a most singular manner. With the help of a transference phantasy, he experienced, as though it were new and belonged to the present, the very episode from the past which he had forgotten, or which had only passed through his mind unconsciously. There came an obscure and difficult period in the treatment; eventually it turned out that he had once met a young girl on the stairs in my house and had on the spot promoted her into being my daughter. She had pleased him, and he pictured to himself that the only reason I was so kind and incredibly patient with him was that I wanted to have him for a son-in-law. At the same time he raised the wealth and position of my family to a level which agreed with the model he had in mind. But his undying love for his lady fought against the temptation. After we had gone through a series of the severest resistances and bitterest vituperations on his part, he could no longer remain blind to the overwhelming effect of the perfect analogy between the transference phantasy and the actual state of affairs in the past. I will repeat one of the dreams which he had at this period, so as to give an example of his manner of treating the subject. He dreamt that *he saw my daughter in front of him; she had two patches of dung instead of eyes*. No one who understands the language of dreams will find much difficulty in translating this one: it declared that *he was marrying my daughter not for her 'beaux yeux' but for her money*.

(G) THE FATHER COMPLEX AND THE SOLUTION OF THE RAT IDEA

From the precipitating cause of the patient's illness in his adult years there was a thread leading back to his childhood. He had found himself in a situation similar to that in which, as he knew or suspected, his father had been before *his* marriage; and he had thus been able to identify himself with his father. But his dead father was involved in his recent attack in yet another way. The conflict at the root of his illness was in essentials a struggle between the persisting influence of his father's wishes and his own amatory predilections. If we take into consideration what the patient reported in the course of the first hours of his treatment, we shall not be able to avoid a suspicion that this struggle was a very ancient one and had arisen as far back as in his childhood.

By all accounts our patient's father was a most excellent man. Before his marriage he had been a non-commissioned officer, and, as relics of that period of his life, he had retained a straightforward soldierly manner and a *penchant* for using downright language. Apart from those virtues which are celebrated upon every tombstone, he was distinguished by a hearty sense of humour and a kindly tolerance towards his fellow-men. That he could be hasty and violent was certainly not inconsistent with his other qualities, but was rather a necessary complement to them; but it occasionally brought down the most severe castigations upon the children, while they were young and naughty. When they grew up, however, he differed from other fathers in not attempting to exalt himself into a sacrosanct authority, but in sharing with them a knowledge of the little failures and misfortunes of his life with good-natured candour. His son was certainly not exaggerating when he declared that they had lived together like the best of friends, except upon a single point (p. 2145). And it must no doubt have been in connection with that very point that thoughts about his father's death had occupied his mind when he was a small boy with unusual and undue intensity (p. 2133), and that those thoughts made their appearance in the wording of the obsessional ideas of his childhood; and it can only have been in that same connection that he was able to wish for his father's death, in order that a certain little girl's sympathy might be aroused and that she might behave more kindly towards him (p. 2144).

There can be no question that there was something in the sphere of sexuality that stood between the father and son, and that the father had come into some sort of opposition to the son's prematurely developed erotic life. Several years after his father's death, the first time he experienced the pleasurable sensations of copulation, an idea sprang into his mind: 'This is glorious! One might murder one's father for this!' This was at once an echo and an elucidation of the obsessional ideas of his childhood. Moreover, his father, shortly before his death, had directly opposed what later became our patient's dominating passion. He had noticed that his son was always in the lady's company, and had advised him to keep away from her, saying that it was imprudent of him and that he would only make a fool of himself.

To this unimpeachable body of evidence we shall be able to add fresh material, if we turn to the history of the masturbatory side of our patient's sexual activities. There is a conflict between the opinions of doctors and patients on this subject which has not hitherto been properly appreciated. The patients are unanimous in their belief that masturbation, by which they mean masturbation *during puberty*, is the root and origin of all their troubles. The doctors are, upon the whole, unable to decide what line to take; but, influenced by the knowledge that not only neurotics but most normal people pass through a period of masturbation during their puberty, the majority of them are inclined to dismiss the patients' assertions as gross exaggerations. In my opinion the patients are once again nearer to a correct view than the doctors; for the patients have some glimmering notion of the truth, while the doctors are in danger of overlooking an essential point. The thesis propounded by the patients certainly does not correspond to the facts in the sense in which they themselves construe it, namely, that masturbation during puberty (which may almost be described as a typical occurrence) is responsible for all neurotic disturbances. Their thesis requires interpretation. The masturbation of puberty is in fact no more than a revival of the masturbation of infancy, a subject which has hitherto invariably been neglected. Infantile masturbation reaches a kind of climax, as a rule, between the ages of three and four or five; and it is the clearest expression of a child's sexual constitution, in which the aetiology of subsequent neuroses must be sought. In this disguised way, therefore, the patients are putting the blame for their illnesses upon their infantile sexuality; and they are perfectly right in doing so. On the other hand, the problem of masturbation becomes insoluble if we attempt to treat it as a clinical unit, and forget that it can represent the discharge of every variety of sexual component and of every sort of phantasy to which such components can give rise. The injurious effects of masturbation are only in a very small degree autonomous - that is to say, determined by its own nature. They are in substance merely part and parcel of the pathogenic significance of the subject's sexual life as a whole. The fact that so many people can tolerate masturbation - that is, a certain amount of it - without injury merely shows that their sexual constitution and the course of development of their sexual life have been such as to allow them to exercise the sexual function within the limits of what is culturally permissible; whereas other people, because their sexual constitution has been less favourable or their development has been disturbed, fall ill as a result of their sexuality - they cannot, that is, achieve the necessary suppression or sublimation of their sexual components without having recourse to inhibitions or substitutes.¹

¹ See *Three Essays on the Theory of Sexuality*, 1905d.

Our present patient's behaviour in the matter of masturbation was most remarkable. He did not practise it during puberty and therefore, according to one set of views, he might have expected to be exempt from neurosis. On the other hand, an impulsion towards masturbatory activities came over him in his twenty-first year, *shortly after his father's death*. He felt very much ashamed of himself each time he gave way to this kind of gratification, and soon foreswore the habit. From that time onwards it reappeared only upon rare and extraordinary occasions. It was provoked, he told me, when he experienced especially fine moments, or when he read especially fine passages. It occurred once, for instance, on a lovely summer's afternoon when, in the middle of Vienna, he heard a postilion blowing his horn in the most wonderful way - until a policeman stopped him, because blowing horns is not allowed in the centre of the town. And another time it happened when he read in *Dichtung und Wahrheit* how the young Goethe had freed himself in a burst of tenderness from the effects of a curse which a jealous mistress had pronounced upon the next woman who should kiss his lips after her; he had long, almost superstitiously, suffered the curse to hold him back, but now he broke his bonds and kissed his love joyfully again and again.

It seemed to the patient not a little strange that he should be impelled to masturbate precisely upon such beautiful and uplifting occasions as these. But I could not help pointing out that these two occasions had something in common - a prohibition, and the defiance of a command.

We must also consider in the same connection his curious behaviour at a time when he was working for an examination and toying with his favourite phantasy that his father was still alive and might at any moment reappear. He used to arrange that his working hours should be as late as possible in the night. Between twelve and one o'clock at night he would interrupt his work, and open the front door of the flat as though his father were standing outside it; then, coming back into the hall, he would take out his penis and look at it in the looking-glass. This crazy conduct becomes intelligible if we suppose that he was acting as though he expected a visit from his father at the hour when ghosts are abroad. He had on the whole been idle at his work during his father's lifetime, and this had often been a cause of annoyance to his father. And now that he was returning as a ghost, he was to be delighted at finding his son hard at work. But it was impossible that his father should be delighted at the other part of his behaviour; in this therefore he must be defying him. Thus, in a single unintelligible obsessional act, he gave expression to the two sides of his relation with his father, just as he did subsequently with regard to his lady by means of his obsessional act with the stone.

Starting from these indications and from other data of a similar kind, I ventured to put forward a construction to the effect that when he was a child of under six he had been guilty of some sexual misdemeanour connected with masturbation and had been soundly castigated for it by his father. This punishment, according to my hypothesis, had, it was true, put an end to his masturbating, but on the other hand it had left behind it an ineradicable grudge against his father and had established him for all time in his role of an interferer with the patient's sexual enjoyment.¹ To my great astonishment the patient then informed me that his mother had repeatedly described to him an occurrence of this kind which dated from his earliest childhood and had evidently escaped being forgotten by her on account of its remarkable consequences. He himself, however, had no recollection of it whatever. The tale was as follows. When he was very small - it became possible to establish the date more exactly owing to its having coincided with the fatal illness of an elder sister - he had done something naughty, for which his father had given him a beating. The little boy had flown into a terrible rage and had hurled abuse at his father even while he was under his blows. But as he knew no bad language, he had called him all the names of common objects that he could think of, and had screamed: 'You lamp! You towel! You plate!' and so on. His father, shaken by such an outburst of elemental fury, had stopped beating him, and had declared: 'The child will be either a great man or a great criminal!'² The patient believed that the scene made a permanent impression upon himself as well as upon his father. His father, he said, never beat him again; and he also attributed to this experience a part of the change which came over his own character. From that time forward he was a coward - out of fear of the violence of his own rage. His whole life long, moreover, he was terribly afraid of blows, and used to creep away and hide, filled with terror and indignation, when one of his brothers or sisters was beaten.

¹ Compare my suspicions to a similar effect in one of the first sessions (p. 2145).

² These alternatives did not exhaust the possibilities. His father had overlooked the commonest outcome of such premature passions - a neurosis.

The patient subsequently questioned his mother again. She confirmed the story, adding that at the time he had been between three and four years old and that he had been given the punishment because he had *bitten* some one. She could remember no further details, except for a very uncertain idea that the person the little boy had hurt might have been his nurse. In her account there was no suggestion of his misdeed having been of a sexual nature.¹

¹ In psycho-analyses we frequently come across occurrences of this kind, dating back to the earliest years of the patient's childhood, in which his infantile sexual activity appears to reach its climax and often comes to a catastrophic end owing to some misfortune or punishment. Such occurrences are apt to appear in a shadowy way in dreams. Often they will become so clear that the analyst thinks he has a firm hold of them, and will nevertheless evade any final elucidation; and unless he proceeds with the greatest skill and caution he may be compelled to leave it undecided whether the scene in question actually took place or not. It will help to put us upon the right track in interpreting it, if we recognize that more than one version of the scene (each often differing greatly from the other) may be detected in the patient's unconscious phantasies. If we do not wish to go astray in our judgement of their historical reality, we must above all bear in mind that people's 'childhood memories' are only consolidated at a later period, usually at the age of puberty; and that this involves a complicated process of remodelling, analogous in every way to the process by which a nation constructs legends about its early history. It at once becomes evident that in his phantasies about his infancy the individual as he grows up *endeavours to efface the recollection of his auto-erotic activities*; and this he does by exalting their memory-traces to the level of object-love, just as a real historian will view the past in the light of the present. This explains why these phantasies abound in seductions and assaults, where the facts will have been confined to auto-erotic activities and the caresses or punishments that stimulated them. Furthermore, it becomes clear that in constructing phantasies about his childhood the individual *sexualizes his memories*; that is, he brings commonplace experiences into relation with his sexual activity, and extends his sexual interest to them - though in doing this he is probably following upon the traces of a really existing connection. No one who remembers my 'Analysis of a Phobia in a Five-Year-Old Boy' will need to be told that it is not my intention in these remarks to detract from the importance which I have hitherto attached to infantile sexuality by reducing it to nothing more than sexual interest at the age of puberty. I merely wish to give some technical advice that may help to clear up a class of phantasy which is calculated to falsify the picture of infantile sexual activity.

It is seldom that we are in the fortunate position of being able, as in the present instance, to establish the facts upon which these tales of the individual's prehistoric past are based, by recourse to the unimpeachable testimony of a grown-up person. Even so, the statement made by our patient's mother leaves the way open to various possibilities. That she did not proclaim the sexual character of the offence for which the child was punished may have been due to the activity of her own censorship; for with all parents it is precisely this sexual element in their children's past that their own censorship is most anxious to eliminate. But it is just as possible that the child was reproved by his nurse or by his mother herself for some commonplace piece of naughtiness of a non-sexual nature, and that his reaction was so violent that he was castigated by his father. In phantasies of this kind nurses and servants are regularly replaced by the superior figure of the mother. A deeper interpretation of the patient's dreams in relation to this episode revealed the clearest traces of the presence in his mind of an imaginative production of a positively epic character. In this his sexual desires for his mother and sister and his sister's premature death were linked up with the young hero's chastisement at his father's hand. It was impossible to unravel this tissue of phantasy thread by thread; the therapeutic success of the treatment was precisely what stood in the way of this. The patient recovered, and his ordinary life began to assert its claims: there were many tasks before him, which he had already neglected far too long, and which were incompatible with a continuation of the treatment. I am not to be blamed, therefore, for this gap in the analysis. The scientific results of psycho-analysis are at present only a by-product of its therapeutic aims, and for that reason it is often just in those cases where treatment fails that most discoveries are made.

The content of the sexual life of infancy consists in auto-erotic activity on the part of the dominant sexual components, in traces of object-love, and in the formation of that complex which deserves to be called *the nuclear complex of the neuroses*. It is the complex which comprises the child's earliest impulses, alike tender and hostile, towards its parents and brothers and sisters, after its curiosity has been awakened - usually by the arrival of a new baby brother or sister. The uniformity of the content of the sexual life of children, together with the unvarying character of the modifying tendencies which are later brought to bear upon it, will easily account for the constant sameness which as a rule characterizes the phantasies that are constructed around the period of childhood, irrespective of how greatly or how little real experiences have contributed towards them. It is entirely characteristic of the nuclear complex of infancy that the child's father should be assigned the part of a sexual opponent and of an interferer with auto-erotic sexual activities; and real events are usually to a large extent responsible for bringing this about.

A discussion of this childhood scene will be found in the footnote, and here I will only remark that its emergence shook the patient for the first time in his refusal to believe that at some prehistoric period in his childhood he had been seized with fury (which had subsequently become latent) against the father whom he loved so much. I must confess that I had expected it to have a greater effect, for the incident had been described to him so often - even by his father himself - that there could be no doubt of its objective reality. But, with that capacity for being illogical which never fails to bewilder one in such highly intelligent people as obsessional neurotics, he kept urging against the evidential value of the story the fact that he himself could not remember the scene. And so it was only along the painful road of transference that he was able to reach a conviction that his relation to his father really necessitated the postulation of this unconscious complement. Things soon reached a point at which, in his dreams, his waking phantasies, and his associations, he began heaping the grossest and filthiest abuse upon me and my family, though in his deliberate actions he never treated me with anything but the greatest respect. His demeanour as he repeated these insults to me was that of a man in despair. 'How can a gentleman like you, sir,' he used to ask, 'let yourself be abused in this way by a low, good-for-nothing fellow like me? You ought to turn me out: that's all I deserve.' While he talked like this, he would get up from the sofa and roam about the room, - a habit which he explained at first as being due to delicacy of feeling: he could not bring himself, he said, to utter such horrible things while he was lying there so comfortably. But soon he himself found a more cogent explanation, namely, that he was avoiding my proximity for fear of my giving him a beating. If he stayed on the sofa he behaved like some one in desperate terror trying to save himself from castigations of terrific violence; he would bury his head in his hands, cover his face with his arm, jump up suddenly and rush away, his features distorted with pain, and so on. He recalled that his father had had a passionate temper, and sometimes in his violence had not known where to stop. Thus, little by little, in this school of suffering, the patient won the sense of conviction which he had lacked - though to any disinterested mind the truth would have been almost self-evident.

And now the path was clear to the solution of his rat idea. The treatment had reached its turning-point, and a quantity of material information which had hitherto been withheld became available, and so made possible a reconstruction of the whole concatenation of events.

In my description I shall, as I have already said, content myself with the briefest possible summary of the circumstances. Obviously the first problem to be solved was why the two speeches of the Czech captain - his rat story, and his request to the patient that he should pay back the money to Lieutenant A. - should have had such an agitating effect on him and should have provoked such violently pathological reactions. The presumption was that it was a question of 'complexive sensitiveness', and that the speeches had jarred upon certain hyperaesthetic spots in his unconscious. And so it proved to be. As always happened with the patient in connection with military matters, he had been in a state of unconscious identification with his father, who had seen many years' service and had been full of stories of his soldiering days. Now it happened by chance - for chance may play a part in the formation of a symptom, just as the wording may help in the making of a joke - that one of his father's little adventures had an important element in common with the captain's request. His father, in his capacity as non-commissioned officer, had control over a small sum of money and had on one occasion lost it at cards. (Thus he had been a '*Spielratte*'.¹) He would have found himself in a serious position if one of his comrades had not advanced him the amount. After he had left the army and become well-off, he had tried to find this friend in need so as to pay him back the money, but had not managed to trace him. The patient was uncertain whether he had ever succeeded in returning the money. The recollection of this sin of his father's youth was painful to him, for, in spite of appearances, his unconscious was filled with hostile strictures upon his father's character. The captain's words, 'You must pay back the 3.80 *kronen* to Lieutenant A.', had sounded to his ears like an allusion to this unpaid debt of his father's.

¹ [Literally, 'play-rat'. Colloquial German for 'gambler'.]

But the information that the young lady at the post office at Z-- had herself paid the charges due upon the packet, with a complimentary remark about himself,¹ had intensified his identification with his father in quite another direction. At this stage in the analysis he brought out some new information, to the effect that the landlord of the inn at the little place where the post office was had had a pretty daughter. She had been decidedly encouraging to the smart young officer, so that he had thought of returning there after the manoeuvres were over and of trying his luck with her. Now, however, she had a rival in the shape of the young lady at the post office. Like his father in the tale of his marriage, he could afford now to hesitate upon which of the two he should bestow his favours when he had finished his military service. We can see at once that his singular indecision whether he should travel to Vienna or go back to the place where the post office was, and the constant temptation he felt to turn back while he was on the journey (p. 2140), were not so senseless as they seemed to us at first. To his conscious mind, the attraction exercised upon him by Z--, the place where the post office was, was explained by the necessity of seeing Lieutenant A. and fulfilling the vow with his assistance. But in reality what was attracting him was the young lady at the post office, and the lieutenant was merely a good substitute for her, since he had lived at the same place and had himself been in charge of the military postal service. And when subsequently he heard that it was not Lieutenant A. but another officer B., who had been on duty at the post office that day, he drew *him* into his combination as well; and he was then able to reproduce in his deliria in connection with the two officers the hesitation he felt between the two girls who were so kindly disposed towards him.²

¹ It must not be forgotten that he had learnt this *before* the captain, owing to a misapprehension, requested him to pay back the money to Lieutenant A. This circumstance was the vital point of the story, and by suppressing it the patient reduced himself to a state of the most hopeless muddle and for some time prevented me from getting any idea of the meaning of it all.

² (*Footnote added 1923.*) My patient did his very best to throw confusion over the little episode of the repayment of the charges for his pince-nez, so that perhaps my own account of it may also have failed to clear it up entirely. I therefore reproduce here a little map (Fig. 5), by means of which Mr. and Mrs. Strachey have endeavoured to make the situation at the end of the manoeuvres plainer. My translators have justly observed that the patient's behaviour remains unintelligible so long as a further circumstance is not expressly stated, namely, that Lieutenant A. had formerly lived at the place Z-- where the post office was situated and had been in charge of the military post office there, but that during the last few days he had handed over this billet to Lieutenant B. and had been transferred to another village. The 'cruel' captain had been in ignorance of this transfer, and this was the explanation of his mistake in supposing that the charges had to be paid back to Lieutenant A.

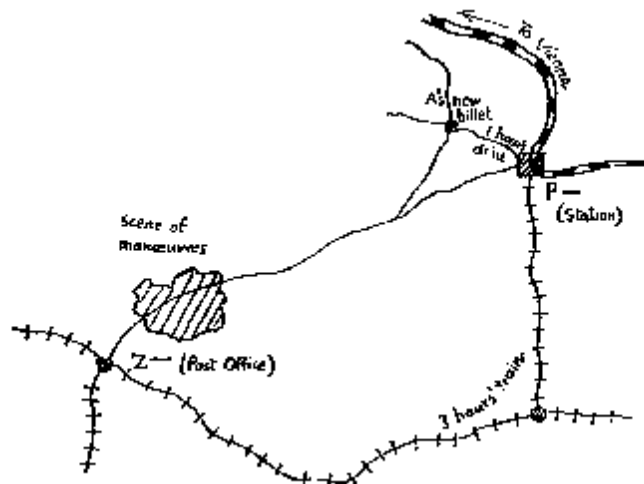


Fig. 5.

In elucidating the effects produced by the captain's rat story we must follow the course of the analysis more closely. The patient began by producing an enormous mass of associative material, which at first, however, threw no light upon the circumstances in which the formation of his obsession had taken place. The idea of the punishment carried out by means of rats had acted as a stimulus to a number of his instincts and had called up a whole quantity of recollections; so that, in the short interval between the captain's story and his request to him to pay back the money, rats had acquired a series of symbolic meanings, to which, during the period which followed, fresh ones were continually being added. I must confess that I can only give a very incomplete account of the whole business. What the rat punishment stirred up more than anything else was his *anal erotism*, which had played an important part in his childhood and had been kept in activity for many years by a constant irritation due to worms. In this way rats came to have the meaning of '*money*'.¹ The patient gave an indication of this connection by reacting to the word '*Ratten*' ['rats'] with the association '*Raten*' ['instalments']. In his obsessional deliria he had coined himself a regular rat currency. When, for instance, in reply to a question, I told him the amount of my fee for an hour's treatment, he said to himself (as I learned six months later): 'So many florins, so many rats'. Little by little he translated into this language the whole complex of money interests which centred round his father's legacy to him, that is to say, all his ideas connected with that subject were, by way of the verbal bridge '*Raten - Ratten*', carried over into his obsessional life and brought under the dominion of his unconscious. Moreover, the captain's request to him to pay back the charges due upon the packet served to strengthen the money significance of rats, by way of another verbal bridge '*Spielratte*', which led back to his father's gambling debt.

¹ See my paper on 'Character and Anal Erotism' (1908*b*).

But the patient was also familiar with the fact that rats are carriers of dangerous infectious diseases; he could therefore employ them as symbols of his dread (justifiable enough in the army) of *syphilitic infection*. This dread concealed all sorts of doubts as to the kind of life his father had led during his term of military service. Again, in another sense, the *penis* itself is a carrier of syphilitic infection; and in this way he could consider the rat as a male organ of sex. It had a further title to be so regarded; for a penis (especially a child's penis) can easily be compared to a *worm*, and the captain's story had been about rats burrowing in some one's anus, just as the large round-worms had in his when he was a child. Thus the penis significance of rats was based, once more, upon anal erotism. And apart from this, the rat is a dirty animal, feeding upon excrement and living in sewers.¹ It is perhaps unnecessary to point out how great an extension of the rat delirium became possible owing to this new meaning. For instance, 'So many rats, so many florins' could serve as an excellent characterization of a certain female profession which he particularly detested. On the other hand, it is certainly not a matter of indifference that the substitution of a penis for a rat in the captain's story resulted in a situation of intercourse *per anum*, which could not fail to be especially revolting to him when brought into connection with his father and the woman he loved. And when we consider that the same situation was reproduced in the compulsive threat which had formed in his mind after the captain had made his request, we shall be forcibly reminded of certain curses in use among the Southern Slavs.² Moreover, all of this material, and more besides, was woven into the fabric of the rat discussions behind the screen-association '*heiraten*' ['to marry'].

¹ If the reader feels tempted to shake his head at the possibility of such leaps of imagination in the neurotic mind, I may remind him that artists have sometimes indulged in similar freaks of fancy. Such, for instance, are Le Poitevin's *Diableries érotiques*.

² The exact terms of these curses will be found in the periodical *Anthropophyteia*, edited by F. S. Krauss.

The story of the rat punishment, as was shown by the patient's own account of the matter and by his facial expression as he repeated the story to me, had fanned into a flame all his prematurely suppressed impulses of cruelty, egoistic and sexual alike. Yet, in spite of all this wealth of material, no light was thrown upon the meaning of his obsessional idea until one day the Rat-Wife in Ibsen's *Little Eyolf* came up in the analysis, and it became impossible to escape the inference that in many of the shapes assumed by his obsessional deliria rats had another meaning still - namely, that of *children*.¹ Enquiry into the origin of this new meaning at once brought me up against some of the earliest and most important roots. Once when the patient was visiting his father's grave he had seen a big beast, which he had taken to be a rat, gliding along over the grave.² He assumed that it had actually come out of his father's grave, and had just been having a meal off his corpse. The notion of a rat is inseparably bound up with the fact that it has sharp teeth with which it gnaws and bites.³ But rats cannot be sharp-toothed, greedy and dirty with impunity: they are cruelly persecuted and mercilessly put to death by man, as the patient had often observed with horror. He had often pitied the poor creatures. But he himself had been just such a nasty, dirty little wretch, who was apt to bite people when he was in a rage, and had been fearfully punished for doing so (p. 2162). He could truly be said to find 'a living likeness of himself' in the rat. It was almost as though Fate, when the captain told him his story, had been putting him through an association test: she had called out a 'complex stimulus-word', and he had reacted to it with his obsessional idea.

¹ Ibsen's Rat-Wife must certainly be derived from the legendary Pied Piper of Hamelin, who first enticed away the rats into the water, and then, by the same means, lured the children out of the town, never to return. So too, Little Eyolf threw himself into the water under the spell of the Rat-Wife. In legends generally the rat appears not so much as a disgusting creature but as something uncanny - as a chthonic animal, one might almost say; and it is used to represent the souls of the dead.

² It was no doubt a weasel, of which there are great numbers in the Zentralfriedhof [the principal cemetery] in Vienna.

³ Compare the words of Mephistopheles:

Doch dieser Schwelle Zauber zu zerspalten
Bedarf ich eines Rattenzahns.

.....
Noch einen Biss, so ist's geschehn!

[But to break through the magic of this threshold
I need a rat's tooth. (*He conjures up a rat.*)

.....
Another bite, and it is done!]

According, then, to his earliest and most momentous experiences, rats were children. And at this point he brought out a piece of information which he had kept away from its context long enough, but which now fully explained the interest he was bound to feel in children. The lady, whose admirer he had been for so many years, but whom he had nevertheless not been able to make up his mind to marry, was condemned to childlessness by reason of a gynaecological operation which had involved the removal of both ovaries. This indeed - for he was extraordinarily fond of children - had been the chief reason for his hesitation.

It was only then that it became possible to understand the inexplicable process by which his obsessional idea had been formed. With the assistance of our knowledge of infantile sexual theories and of symbolism (as learnt from the interpretation of dreams) the whole thing could be translated and given a meaning. When, at the afternoon halt (during which he had lost his pince-nez), the captain had told him about the rat punishment, the patient had only been struck at first by the combined cruelty and lasciviousness of the situation depicted. But immediately afterwards a connection had been set up with the scene from his childhood in which he himself had bitten some one. The captain - a man who could defend such punishments - had become a substitute for his father, and had thus drawn down upon himself a part of the reviving animosity which had burst out, on the original occasion, against his cruel father. The idea which came into his consciousness for a moment, to the effect that something of the sort might happen to some one he was fond of, is probably to be translated into a wish such as 'You ought to have the same thing done to you!' aimed at the teller of the story, but through him at his father. A day and a half later,¹ when the captain had handed him the packet upon which the charges were due and had requested him to pay back the 3.80 *kronen* to Lieutenant A., he had already been aware that his 'cruel superior' was making a mistake, and that the only person he owed anything to was the young lady at the post office. It might easily, therefore, have occurred to him to think of some derisive reply, such as, 'Will I, though?' or 'Pay your grandmother!' or 'Yes! You bet I'll pay him back the money!' - answers which would have been subject to no compulsive force. But instead, out of the stirrings of his father-complex and out of his memory of the scene from his childhood, there formed in his mind some such answer as: 'Yes! I'll pay back the money to A. when my father and the lady have children!' or 'As sure as my father and the lady can have children, I'll pay him back the money!' In short, a derisive affirmation attached to an absurd condition which could never be fulfilled.²

¹ Not that evening, as he first told me. It was quite impossible that the pince-nez he had ordered could have arrived the same day. The patient shortened the interval of time retrospectively, because it was the period during which the decisive mental connections had been set up, and during which the repressed episode had taken place - the episode of his interview with the officer who told him of the friendly conduct of the young lady at the post office.

² Thus absurdity signifies derision in the language of obsessional thought, just as it does in dreams. See my *Interpretation of Dreams*.

But now the crime had been committed; he had insulted the two persons who were dearest to him - his father and his lady. The deed had called for punishment, and the penalty had consisted in his binding himself by a vow which it was impossible for him to fulfil and which entailed literal obedience to his superior's ill-founded request. The vow ran as follows: '*Now you must really pay back the money to A.*' In his convulsive obedience he had repressed his better knowledge that the captain's request had been based upon erroneous premises: 'Yes, you must pay back the money to A., as your father's surrogate has required. Your father cannot be mistaken.' So too the king cannot be mistaken; if he addresses one of his subjects by a title which is not his, the subject bears that title ever afterwards.

Only vague intelligence of these events reached the patient's consciousness. But his revolt against the captain's order and the sudden transformation of that revolt into its opposite were both represented there. First had come the idea that he was *not* to pay back the money, or it (that is, the rat punishment) would happen; and then had come the transformation of this idea into a vow to the opposite effect, as a punishment for his revolt.

Let us, further, picture to ourselves the general conditions under which the formation of the patient's great obsessional idea occurred. His libido had been increased by a long period of abstinence coupled with the friendly welcome which a young officer can always reckon upon receiving when he goes among women. Moreover, at the time when he had started for the manoeuvres, there had been a certain coolness between himself and his lady. This intensification of his libido had inclined him to a renewal of his ancient struggle against his father's authority, and he had dared to think of having sexual intercourse with other women. His loyalty to his father's memory had grown weaker, his doubts as to his lady's merits had increased; and in that frame of mind he let himself be dragged into insulting the two of them, and had then punished himself for it. In doing so he had copied an old model. And when at the end of the manoeuvres he had hesitated so long whether he should travel to Vienna or whether he should stop and fulfil his vow, he had represented in a single picture the two conflicts by which he had from the very first been torn - whether or no he should remain obedient to his father and whether or no he should remain faithful to his beloved.¹

¹ It is perhaps not uninteresting to observe that once again obedience to his father coincided with abandoning the lady. If he had stopped and paid back the money to A., he would have made atonement to his father, and at the same time he would have deserted his lady in favour of some one else more attractive. In this conflict the lady had been victorious - with the assistance, to be sure, of the patient's own normal good sense.

I may add a word upon the interpretation of the 'sanction' which, it will be remembered, was to the effect that 'otherwise the rat punishment will be carried out on both of them'. It was based upon the influence of two infantile sexual theories, which I have discussed elsewhere.¹ The first of these theories is that babies come out of the anus; and the second, which follows logically from the first, is that men can have babies just as well as women. According to the technical rules for interpreting dreams, the notion of coming *out of* the rectum can be represented by the opposite notion of creeping *into* the rectum (as in the rat punishment), and *vice versa*.

We should not be justified in expecting such severe obsessional ideas as were present in this case to be cleared up in any simpler manner or by any other means. When we reached the solution that has been described above, the patient's rat delirium disappeared.

¹ 'On the Sexual Theories of Children' (1908c).

II

THEORETICAL

(A) SOME GENERAL CHARACTERISTICS OF OBSESSIONAL STRUCTURES ¹

In the year 1896 I defined obsessional ideas as 'transformed self-reproaches which have re-emerged from repression and which always relate to some sexual act that was performed with pleasure in childhood'. This definition now seems to me to be open to criticism upon formal grounds, though its component elements are unobjectionable. It was aiming too much at unification, and took as its model the practice of obsessional neurotics themselves, when, with their characteristic liking for indeterminateness, they heap together under the name of 'obsessional ideas' the most heterogeneous psychical structures.² In point of fact, it would be more correct to speak of 'obsessive thinking', and to make it clear that obsessional structures can correspond to every sort of psychical act. They can be classed as wishes, temptations, impulses, reflections, doubts, commands, or prohibitions. Patients endeavour in general to tone down such distinctions and to regard what remains of these psychical acts after they have been deprived of their affective index simply as 'obsessional ideas'. Our present patient gave an example of this type of behaviour in one of his first sessions, when he attempted to reduce a wish to the level of a mere 'train of thought' (p. 2144).

¹ Several of the points dealt with in this and the following section have already been mentioned in the literature on the subject of obsessional neuroses, as may be gathered from Löwenfeld's exhaustive study, *Die psychischen Zwangerscheinungen*, 1904, which is the standard work upon this form of disease.

² This fault in my definition is to some extent corrected in the paper itself. The following passage will be found: 'The re-activated memories, however, and the self-reproaches formed from them never re-emerge into consciousness unchanged: what become conscious as obsessional ideas and affects, and take the place of the pathogenic memories so far as conscious life is concerned, are structures in the nature of a compromise between the repressed ideas and the repressing ones.' In the definition, that is to say, especial stress is to be laid on the word 'transformed'.

It must be confessed, moreover, that even the phenomenology of obsessional thinking has not yet had sufficient attention paid to it. During the secondary defensive struggle, which the patient carries on against the 'obsessional ideas' that have forced their way into his consciousness, psychological structures make their appearance which deserve to be given a special name. (Such, for example, were the sequences of thoughts that occupied our patient's mind on his journey back from the manoeuvres.) They are not purely reasonable considerations arising in opposition to the obsessional thoughts, but, as it were, hybrids between the two species of thinking; they accept certain of the premises of the obsession they are combating, and thus, while using the weapons of reason, are established upon a basis of pathological thought. I think such structures as these deserve to be given the name of '*deliria*'. To make the distinction clear, I will give an instance, which should be inserted into its proper context in the patient's case history. I have already described the crazy conduct to which he gave way at one time when he was preparing for an examination - how, after working till far into the night, he used to go and open the front door to his father's ghost, and then look at his genitals in the looking-glass (p. 2160). He tried to bring himself to his senses by asking himself what his father would say to it all if he were really still alive. But the argument had no effect so long as it was put forward in this rational shape. The spectre was not laid until he had transformed the same idea into a 'delirious' threat to the effect that if he ever went through this nonsense again some evil would befall his father in the next world.

The distinction between a primary and a secondary defensive struggle is no doubt well founded, but we find its value unexpectedly diminished when we discover that *the patients themselves do not know the wording of their own obsessional ideas*. This may sound paradoxical, but it is perfectly good sense. During the progress of a psycho-analysis it is not only the patient who plucks up courage, but his disease as well; it grows bold enough to speak more plainly than before. To drop the metaphor, what happens is that the patient, who his hitherto turned his eyes away in terror from his own pathological productions, begins to attend to them and obtains a clearer and more detailed view of them.¹

There are, besides this, two special ways in which a more precise knowledge of obsessional structures can be gained. In the first place, experience shows that an obsessional command (or whatever it may be), which in waking life is known only in a truncated and distorted form, like a mutilated telegraph message, may have its actual text brought to light in a dream. Such texts appear in dreams in the shape of speeches, and are thus an exception to the rule that speeches in dreams are derived from speeches in real life.² Secondly, in the course of the analytic examination of a case history, one becomes convinced that if a number of obsessions succeed one another they are often - even though their wording is not identical - ultimately one and the same. The obsession may have been successfully shaken off on its first appearance, but it comes back a second time in a distorted form and without being recognized, and may then perhaps be able to hold its own in the defensive struggle more effectively, precisely because of its distortion. But the original form is the correct one, and often displays its meaning quite openly. When we have at great pains elucidated an unintelligible obsessional idea, it often happens that the patient informs us that just such a notion, wish, or temptation as the one we have constructed did in fact make its appearance on one occasion before the obsessional idea had arisen, but that it did not persist. It would unfortunately involve us in too lengthy a digression if we were to give instances of this from the history of our present patient.

¹ Some patients carry the diversion of their attention to such lengths that they are totally unable to give the content of an obsessional idea or to describe an obsessional act though they have performed it over and over again.

² See *The Interpretation of Dreams*, 1900a, Chapter VI, Section F.

What is officially described as an 'obsessional idea' exhibits, therefore, in its distortion from its original wording, traces of the primary defensive struggle. Its distortion enables it to persist, since conscious thought is thus compelled to misapprehend it, just as though it were a dream; for dreams also are a product of compromise and distortion, and are also misapprehended by waking thought.

This misapprehension on the part of consciousness can be seen at work not only in reference to the obsessional ideas themselves, but also in reference to the products of the secondary defensive struggle, such, for instance, as the protective formulas. I can produce two good examples of this. Our patient used to employ as a defensive formula a rapidly pronounced '*aber*' ['but'] accompanied by a gesture of repudiation. He told me on one occasion that this formula had become altered recently; he now no longer said '*áber*' but '*abér*'. When he was asked to give the reason for this new departure, he declared that the mute 'e' of the second syllable gave him no sense of security against the intrusion, which he so much dreaded, of some foreign and contradictory element, and that he had therefore decided to accent the 'e'. This explanation (an excellent sample of the obsessional neurotic style) was, however, clearly inadequate; the most that it could claim to be was a rationalization. The truth was that '*abér*' was an approximation towards the similar-sounding '*abwehr*' ['defence'], a term which he had learnt in the course of our theoretical discussions of psycho-analysis. He had thus put the treatment to an illegitimate and 'delirious' use in order to strengthen a defensive formula. Another time he told me about his principal magic word, which was an apotropaic against every evil; he had put it together out of the initial letters of the most powerfully beneficent of his prayers and had clapped on an 'amen' at the end of it. I cannot reproduce the word itself, for reasons which will become apparent immediately. For, when he told it me, I could not help noticing that the word was in fact an anagram of the name of his lady. Her name contained an 's', and this he had put last, that is, immediately before the 'amen' at the end. We may say, therefore, that by this process he had brought his '*Samen*' ['semen'] into contact with the woman he loved; in imagination, that is to say, he had masturbated with her. He himself, however, had never noticed this very obvious connection; his defensive forces had allowed themselves to be fooled by the repressed ones. This is also a good example of the rule that in time the thing which is meant to be warded off invariably finds its way into the very means which is being used for warding it off.

I have already asserted that obsessional thoughts have undergone a distortion similar to that undergone by dream-thoughts before they become the manifest content of a dream. The technique of this distortion may therefore be of interest to us, and there should be nothing to prevent our exhibiting its various modes by means of a series of obsessions which have been translated and made clear. But here again the conditions governing the publication of this case make it impossible for me to give more than a few specimens. Not all of the patient's obsessions were so complicated in their structure and so difficult to solve as the great rat idea. In some of the others a very simple technique was employed - namely, that of distortion by omission or ellipsis. This technique is pre-eminently applicable to jokes, but in our present case, too, it did useful work as a means of protecting things from being understood.

For instance, one of the patient's oldest and favourite obsessions (which corresponded to an admonition or warning) ran as follows: '*If I marry the lady, some misfortune will befall my father (in the next world).*' If we insert the intermediate steps, which had been skipped but were known to us from the analysis, we get the following train of thought: 'If my father were alive, he would be as furious over my design of marrying the lady as he was in the scene in my childhood; so that I should fly into a rage with him once more and wish him every possible evil; and thanks to the omnipotence of my wishes¹ these evils would be bound to come upon him.'

Here is another instance in which a solution can be reached by filling out an ellipsis. It is once more in the nature of a warning or an ascetic prohibition. The patient had a charming little niece of whom he was very fond. One day this idea came into his head: '*If you indulge in intercourse, something will happen to Ella*' (i.e. she will die). When the omissions have been made good, we have: 'Every time you copulate, even with a stranger, you will not be able to avoid the reflection that in your married life sexual intercourse can never bring you a child (on account of the lady's sterility). This will grieve you so much that you will become envious of your sister on account of little Ella, and you will grudge her the child. These envious impulses will inevitably lead to the child's death.'²

¹ This omnipotence is discussed further on.

² An example from another of my works, *Jokes and their Relation to the Unconscious*, will recall to the reader the manner in which this elliptical technique is employed in making jokes: 'There is a witty and pugnacious journalist in Vienna, whose biting invective has repeatedly led to his being physically maltreated by the subjects of his attacks. On one occasion, when a fresh misdeed on the part of one of his habitual opponents was being discussed, somebody exclaimed: "If X hears of this, he'll get his ears boxed again." . . . The apparent absurdity of this remark disappears if between the two clauses we insert the words: "he'll write such a scathing article upon the man, that, etc." - This elliptical joke, we may note, is similar in its content, as well as in its form, to the first example quoted in the text.

The technique of distortion by ellipsis seems to be typical of obsessional neuroses; I have come across it in the obsessional thoughts of other patients as well. One example, a particularly transparent one, is of especial interest on account of a certain structural similarity with the rat idea. It was a case of doubting, and occurred in a lady who suffers principally from obsessional *acts*. This lady was going for a walk with her husband in Nuremberg, and made him take her into a shop, where she purchased various objects for her child and amongst them a comb. Her husband, finding that the shopping was too long a business for his taste, said that he had noticed some coins in an antique shop on the way which he was anxious to secure, adding that after he had made his purchase he would come and fetch her in the shop in which they at present were. But he stayed away, as she thought, far too long. When he came back she accordingly asked him where he had been. 'Why,' he replied, 'at the antique shop I told you about.' At the same instant she was seized by a tormenting doubt whether she had not as a matter of fact always possessed the comb which she had just bought for her child. She was naturally quite unable to discover the simple mental link that was involved. There is nothing for it but to regard the doubt as having become displaced, and to reconstruct the complete chain of unconscious thoughts as follows: 'If it is true that you were only at the antique shop, if I am really to believe that, then I may just as well believe that this comb that I bought a moment ago has been in my possession for years.' Here, therefore, the lady was drawing a derisive and ironical parallel, just as when our patient thought: 'Oh yes, as sure as those two' (his father and the lady) 'will have children, I shall pay back the money to A.' In the lady's case the doubt was dependent upon her unconscious jealousy, which led her to suppose that her husband had spent the interval of his absence in paying a visit of gallantry.

I shall not in the present paper attempt any discussion of the *psychological* significance of obsessional thinking. Such a discussion would be of extraordinary value in its results, and would do more to clarify our ideas upon the nature of the conscious and the unconscious than any study of hysteria or the phenomena of hypnosis. It would be a most desirable thing if the philosophers and psychologists who develop brilliant theoretical views on the unconscious upon a basis of hearsay knowledge or from their own conventional definitions would first submit to the convincing impressions which may be gained from a first-hand study of the phenomena of obsessional thinking. We might almost go to the length of *requiring* it of them, if the task were not so far more laborious than the methods of work to which they are accustomed. I will only add here that in obsessional neuroses the unconscious mental processes occasionally break through into consciousness in their pure and undistorted form, that such incursions may take place at every possible stage of the unconscious process of thought, and that at the moment of the incursion the obsessional ideas can, for the most part, be recognized as formations of very long standing. This accounts for the striking circumstance that, when the analyst tries, with the patient's help, to discover the date of the first occurrence of an obsessional idea, the patient is obliged to place it further and further back as the analysis proceeds, and is constantly finding fresh 'first' occasions for the appearance of the obsession.

(B) SOME PSYCHOLOGICAL PECULIARITIES OF OBSESSIONAL NEUROTICS:
THEIR ATTITUDE TOWARD REALITY, SUPERSTITION AND DEATH

In this section I intend to deal with a few mental characteristics of obsessional neurotics which, though they do not seem important in themselves, nevertheless lie upon the road to a comprehension of more important things. They were strongly marked in our present patient; but I know that they are not attributable to his individual character, but to his disorder, and that they are to be met with quite typically in other obsessional patients.

Our patient was to a high degree superstitious, and this although he was a highly educated and enlightened man of considerable acumen, and although he was able at times to assure me that he did not believe a word of all this rubbish. Thus he was at once superstitious and not superstitious; and there was a clear distinction between his attitude and the superstition of uneducated people who feel themselves at one with their belief. He seemed to understand that his superstition was dependent upon his obsessional thinking, although at times he gave way to it completely. The meaning of this inconsistent and vacillating behaviour can be most easily, grasped if it is regarded in the light of a hypothesis which I shall now proceed to mention. I did not hesitate to assume that the truth was not that the patient still had an open mind upon this subject, but that he had two separate and contradictory convictions upon it. His oscillation between these two views quite obviously depended upon his momentary attitude towards his obsessional disorder. As soon as he had got the better of one of these obsessions, he used to smile in a superior way at his own credulity, and no events then occurred that were calculated to shake his firmness; but the moment he came under the sway of another obsession which had not been cleared up - or, what amounts to the same thing, of a resistance - the strangest coincidences would happen, to support him in his credulous belief.

His superstition was nevertheless that of an educated man, and he avoided such vulgar prejudices as being afraid of Friday or of the number thirteen, and so on. But he believed in premonitions and in prophetic dreams; he would constantly meet the very person of whom, for some inexplicable reason, he had just been thinking; or he would receive a letter from some one who had suddenly come into his mind after being forgotten for many years. At the same time he was honest enough - or rather, he was loyal enough to his official conviction - not to have forgotten instances in which the strangest forebodings had come to nothing. On one occasion, for instance, when he went away for his summer holidays, he had felt morally certain that he would never return to Vienna alive. He also admitted that the great majority of his premonitions related to things which had no special personal importance to him, and that, when he met an acquaintance of whom, until a few moments previously, he had not thought for a very long time, nothing further took place between himself and the miraculous apparition. And he naturally could not deny that all the important events of his life had occurred without his having had any premonition of them, and that, for instance, his father's death had taken him entirely by surprise. But arguments such as these had no effect upon the discrepancy in his convictions. They merely served to prove the obsessional nature of his superstitions, and that could already be inferred from the way in which they came and went with the increase and decrease of his resistance.

I was not in a position, of course, to give a rational explanation of all the miraculous stories of his remoter past. But as regards the similar things that happened during the time of his treatment, I was able to prove to him that he himself invariably had a hand in the manufacture of these miracles, and I was able to point out to him the methods that he employed. He worked by means of peripheral vision and reading, forgetting, and, above all, errors of memory. In the end he used himself to help me in discovering the little sleight-of-hand tricks by which these wonders were performed. I may mention one interesting infantile root of his belief that forebodings and premonitions came true. It was brought to light by his recollection that very often, when a date was being fixed for something, his mother used to say: 'I shan't be able to on such-and-such a day. I shall have to stop in bed then.' And in fact when the day in question arrived she had invariably stayed in bed!

There can be no doubt that the patient felt a need for finding experiences of this kind to act as props for his superstition, and that it was for that reason that he occupied himself so much with the inexplicable coincidences of everyday life with which we are all familiar, and helped out their shortcomings with unconscious activity of his own. I have come across a similar need in many other obsessional patients and have suspected its presence in many more besides. It seems to me easily explicable in view of the psychological characteristics of the obsessional neurosis. In this disorder, as I have already explained (p. 2155), repression is effected not by means of amnesia but by a severance of causal connections brought about by a withdrawal of affect. These repressed connections appear to persist in some kind of shadowy form (which I have elsewhere compared to an endopsychic perception),¹ and they are thus transferred, by a process of projection, into the external world, where they bear witness to what has been effaced from consciousness.

¹ *The Psychopathology of Everyday Life* (1901b), Chapter XII, Section C (b).

Another mental need, which is also shared by obsessional neurotics and which is in some respects related to the one just mentioned, is the need for *uncertainty* in their life, or for *doubt*. An enquiry into this characteristic leads deep into the investigation of instinct. The creation of uncertainty is one of the methods employed by the neurosis for drawing the patient away from *reality* and isolating him from the world - which is among the objects of every psychoneurotic disorder. Again, it is only too obvious what efforts are made by the patients themselves in order to be able to avoid certainty and remain in doubt. Some of them, indeed, give a vivid expression to this tendency in a dislike of clocks and watches (for these at least make the time of day certain), and in the unconscious artifices which they employ in order to render these doubt removing instruments innocuous. Our present patient had developed a peculiar talent for avoiding a knowledge of any facts which would have helped him in deciding his conflict. Thus he was in ignorance upon those matters relating to his lady which were the most relevant to the question of his marriage: he was ostensibly unable to say who had operated upon her and whether the operation had been unilateral or bilateral. He had to be forced into remembering what he had forgotten and into finding out what he had overlooked.

The predilection felt by obsessional neurotics for uncertainty and doubt leads them to turn their thoughts by preference to those subjects upon which all mankind are uncertain and upon which our knowledge and judgements must necessarily remain open to doubt. The chief subjects of this kind are paternity, length of life, life after death, and memory - in the last of which we are all in the habit of believing, without having the slightest guarantee of its trustworthiness.¹

¹ As Lichtenberg says, 'An astronomer knows whether the moon is inhabited or not with about as much certainty as he knows who was his father, but not with so much certainty as he knows who was his mother'. A great advance was made in civilization when men decided to put their inferences upon a level with the testimony of their senses and to make the step from matriarchy to patriarchy. The prehistoric figures which show a smaller person sitting upon the head of a larger one are representations of patrilineal descent; Athena had no mother, but sprang from the head of Zeus. A witness who testifies to something before a court of law is still called '*Zeuge*' [literally, 'begetter'] in German, after the part played by the male in the act of procreation; so too in hieroglyphics the word for a 'witness' is written with a representation of the male organ.

In obsessional neuroses the uncertainty of memory is used to the fullest extent as a help in the formation of symptoms; and we shall learn directly the part played in the actual content of the patients' thoughts by the questions of length of life and life after death. But as an appropriate transition I will first consider one particular superstitious trait in our patient to which I have already alluded (p. 2176) and which will no doubt have puzzled more than one of my readers.

I refer to the *omnipotence* which he ascribed to his thoughts and feelings, and to his wishes, whether good or evil. It is, I must admit, decidedly tempting to declare that this idea was a delusion and that it oversteps the limits of obsessional neurosis. I have, however, come across the same conviction in another obsessional patient; and he was long ago restored to health and is leading a normal life. Indeed, all obsessional neurotics behave as though they shared this conviction. It will be our business to throw some light upon these patients' over-estimation of their powers. Assuming, without more ado, that this belief is a frank acknowledgement of a relic of the old megalomania of infancy, we will proceed to ask our patient for the grounds of his conviction. In reply, he adduces two experiences. When he returned for a second visit to the hydropathic establishment at which his disorder had been relieved for the first and only time, he asked to be given his old room, for its position had facilitated his relations with one of the nurses. He was told that the room was already taken and that it was occupied by an old professor. This piece of news considerably diminished his prospects of successful treatment, and he reacted to it with the unamiable thought: 'I wish he may be struck dead for it!' A fortnight later he was woken up from his sleep by the disturbing idea of a corpse; and in the morning he heard that the professor had really had a stroke, and that he had been carried up into his room at about the time he himself had woken up. The second experience related to an unmarried woman, no longer young, though with a great desire to be loved, who had paid him a great deal of attention and had once asked him point blank whether he could not love her. He had given her an evasive answer. A few days afterwards he heard that she had thrown herself out of a window. He then began to reproach himself, and said to himself that it would have been in his power to save her life by giving her his love. In this way he became convinced of the omnipotence of his love and of his hatred. Without denying the omnipotence of love we may point out that both these instances were concerned with death, and we may adopt the obvious explanation that, like other obsessional neurotics, our patient was compelled to overestimate the effects of his hostile feelings upon the external world, because a large part of their internal, mental effects escaped his conscious knowledge. His love - or rather his hatred - was in truth overpowering; it was precisely they that created the obsessional thoughts, of which he could not understand the origin and against which he strove in vain to defend himself.¹

¹ [Footnote added 1923:] The omnipotence of thoughts, or, more accurately speaking, of wishes, has since been recognized as an essential element in the mental life of primitive people. See *Totem and Taboo* (1912-13).

Our patient had a quite peculiar attitude towards the question of death. He showed the deepest sympathy whenever any one died, and religiously attended the funeral; so that among his brothers and sisters he earned the nickname of 'carrion crow'. In his imagination, too, he was constantly making away with people so as to show his heartfelt sympathy for their bereaved relatives. The death of an elder sister, which took place when he was between three and four years old, played a great part in his phantasies, and was brought into intimate connection with his childish misdemeanours during the same period. We know, moreover, at what an early age thoughts about his father's death had occupied his mind, and we may regard his illness itself as a reaction to that event, for which he had felt an obsessional wish fifteen years earlier. The strange extension of his obsessional fears to the 'next world' was nothing else than a compensation for these death-wishes which he had felt against his father. It was introduced eighteen months after his father had died, at a time when there had been a revival of his sorrow at the loss, and it was designed - in defiance of reality, and in deference to the wish which had previously been showing itself in phantasies of every kind - were intended to undo the fact of his father's death. We have had occasion in several places (pp. 2173, and 2176) to translate the phrase 'in the next world' by the words 'if my father were still alive'.

But the behaviour of other obsessional neurotics does not differ greatly from that of our present patient, even though it has not been their fate to come face to face with the phenomenon of death at such an early age. Their thoughts are unceasingly occupied with other people's length of life and possibility of death; their superstitious propensities have had no other content to begin with, and have perhaps no other source whatever. But these neurotics need the help of the possibility of death chiefly in order that it may act as a solution of conflicts they have left unsolved. Their essential characteristic is that they are incapable of coming to a decision, especially in matters of love; they endeavour to postpone every decision, and, in their doubt which person they shall decide for or what measures they shall take against a person, they are obliged to choose as their model the old German courts of justice, in which the suits were usually brought to an end, before judgement had been given, by the death of the parties to the dispute. Thus in every conflict which enters their lives they are on the look out for the death of some one who is of importance to them, usually of some one they love - such as one of their parents, or a rival, or one of the objects of their love between which their inclinations are wavering. But at this point our discussion of the death-complex in obsessional neuroses touches upon the problem of the instinctual life of obsessional neurotics. And to this problem we must now turn.

(C) THE INSTINCTUAL LIFE OF OBSESSIONAL NEUROTICS,
AND THE ORIGINS OF COMPULSION AND DOUBT

If we wish to obtain a grasp of the psychical forces whose interplay built up this neurosis, we must turn back to what we have learnt from the patient on the subject of the precipitating causes of his falling ill as a grown-up man and as a child. He fell ill when he was in his twenties on being faced with a temptation to marry another woman instead of the one whom he had loved so long; and he avoided a decision of this conflict by postponing all the necessary preliminary actions. The means for doing this was given him by his neurosis. His hesitation between the lady he loved and the other girl can be reduced to a conflict between his father's influence and his love for his lady, or, in other words, to a conflicting choice between his father and his sexual object, such as had already subsisted (judging from his recollections and obsessional ideas) in his remote childhood. All through his life, moreover, he was unmistakably victim to a conflict between love and hatred, in regard both to his lady and to his father. His phantasies of revenge and such obsessional phenomena as his obsession for understanding and his exploit with the stone in the road bore witness to his divided feelings; and they were to a certain degree comprehensible and normal, for the lady by her original refusal and subsequently by her coolness had given him some excuse for hostility. But his relations with his father were dominated by a similar division of feeling, as we have seen from our translation of his obsessional thoughts; and his father, too, must have given him an excuse for hostility in his childhood, as indeed we have been able to establish almost beyond question. His attitude towards the lady - a compound of tenderness and hostility - came to a great extent within the scope of his conscious knowledge; at most he deceived himself over the degree and violence of his negative feelings. But his hostility towards his father, on the contrary, though he had once been acutely conscious of it, had long since vanished from his ken, and it was only in the teeth of the most violent resistance that it could be brought back into his consciousness. We may regard the repression of his infantile hatred of his father as the event which brought his whole subsequent career under the dominion of the neurosis.

The conflicts of feeling in our patient which we have here enumerated separately were not independent of each other, but were bound together in pairs. His hatred of his lady was inevitably coupled with his attachment to his father, and inversely his hatred of his father with his attachment to his lady. But the two conflicts of feeling which result from this simplification - namely, the opposition between his relation to his father and to his lady, and the contradiction between his love and his hatred within each of these relations - had no connection whatever with each other, either in their content or in their origin. The first of these two conflicts corresponds to the normal vacillation between male and female which characterizes every one's choice of a love-object. It is first brought to the child's notice by the time-honoured question: 'Which do you love most, Daddy or Mummy?' and it accompanies him through his whole life, whatever may be the relative intensity of his feelings to the two sexes or whatever may be the sexual aim upon which he finally becomes fixed. But normally this opposition soon loses the character of a hard-and-fast contradiction, of an inexorable 'either-or'. Room is found for satisfying the unequal demands of both sides, although even in a normal person the higher estimation of one sex is always thrown into relief by a depreciation of the other.

The other conflict, that between love and hatred, strikes us more strangely. We know that incipient love is often perceived as hatred, and that love, if it is denied satisfaction, may easily be partly converted into hatred, and poets tell us that in the more tempestuous stages of love the two opposed feelings may subsist side by side for a while as though in rivalry with each other. But the *chronic* co-existence of love and hatred, both directed towards the same person and both of the highest degree of intensity, cannot fail to astonish us. We should have expected that the passionate love would long ago have conquered the hatred or been devoured by it. And in fact such a protracted survival of two opposites is only possible under quite peculiar psychological conditions and with the co-operation of the state of affairs in the unconscious. The love has not succeeded in extinguishing the hatred but only in driving it down into the unconscious; and in the unconscious the hatred, safe from the danger of being destroyed by the operations of consciousness, is able to persist and even to grow. In such circumstances the conscious love attains as a rule, by way of reaction, an especially high degree of intensity, so as to be strong enough for the perpetual task of keeping its opponent under repression. The necessary condition for the occurrence of such a strange state of affairs in a person's erotic life appears to be that at a very early age, somewhere in the prehistoric period of his infancy, the two opposites should have been split apart and one of them, usually the hatred, have been repressed.¹

¹ Compare the discussion on this point during one of the first sessions. - (*Added* 1923:) Bleuler subsequently introduced the appropriate term 'ambivalence' to describe this emotional constellation. See also a further development of this line of thought in my paper 'The Predisposition to Obsessional Neurosis' (1913/).

If we consider a number of analyses of obsessional neurotics we shall find it impossible to escape the impression that a relation between love and hatred such as we have found in our present patient is among the most frequent, the most marked, and probably, therefore, the most important characteristics of obsessional neurosis. But however tempting it may be to bring the problem of the 'choice of neurosis' into connection with instinctual life, there are reasons enough for avoiding such a course. For we must remember that in every neurosis we come upon the same suppressed instincts behind the symptoms. After all, hatred, kept suppressed in the unconscious by love, plays a great part in the pathogenesis of hysteria and paranoia. We know too little of the nature of love to be able to arrive at any definite conclusion here; and, in particular, the relation between the *negative* factor¹ in love and the sadistic components of the libido remains completely obscure. What follows is therefore to be regarded as no more than a provisional explanation. We may suppose, then, that in the cases of unconscious hatred with which we are concerned the sadistic components of love have, from constitutional causes, been exceptionally strongly developed, and have consequently undergone a premature and all too thorough suppression, and that the neurotic phenomena we have observed arise on the one hand from conscious feelings of affection which have become exaggerated as a reaction, and on the other hand from sadism persisting in the unconscious in the form of hatred.

¹ Alcibiades says of Socrates in the *Symposium*: 'Many a time have I wished that he were dead, and yet I know that I should be much more sorry than glad if he were to die: so that I am at my wits' end.'

But in whatever way this remarkable relation of love and hatred is to be explained, its occurrence is established beyond any possibility of doubt by the observations made in the present case; and it is gratifying to find how easily we can now follow the puzzling processes of an obsessional neurosis by bringing them into relation with this one factor. If an intense love is opposed by an almost equally powerful hatred, and is at the same time inseparably bound up with it, the immediate consequence is certain to be a partial paralysis of the will and an incapacity for coming to a decision upon any of those actions for which love ought to provide the motive power. But this indecision will not confine itself for long to a single group of actions. For, in the first place, what actions of a lover are not brought into relation with his one principal motive? And secondly a man's attitude in sexual things has the force of a model to which the rest of his reactions tend to conform. And thirdly, it is an inherent characteristic in the psychology of an obsessional neurotic to make the fullest possible use of the mechanism of *displacement*. So the paralysis of his powers of decision gradually extends itself over the entire field of the patient's behaviour.

And here we have the domination of *compulsion* and *doubt* such as we meet with in the mental life of obsessional neurotics.

The *doubt* corresponds to the patient's internal perception of his own indecision, which, in consequence of the inhibition of his love by his hatred, takes possession of him in the face of every intended action. The doubt is in reality a doubt of his own love - which ought to be the most certain thing in his whole mind; and it becomes diffused over everything else, and is especially apt to become displaced on to what is most insignificant and small.¹ A man who doubts his own love may, or rather *must*, doubt every lesser thing.²

¹ Compare the use of 'representation by something very small' as a technique in making jokes. Cf. *Jokes and their Relation to the Unconscious*.

² So in the love-verses addressed by Hamlet to Ophelia:

Doubt thou the stars are fire;
Doubt that the sun doth move;
Doubt truth to be a liar;
But never doubt I love.

It is this same doubt that leads the patient to uncertainty about his protective measures, and to his continual repetition of them in order to banish that uncertainty; and it is this doubt, too, that eventually brings it about that the patient's protective acts themselves become as impossible to carry out as his original inhibited decision in connection with his love. At the beginning of my investigations I was led to assume another and more general origin for the uncertainty of obsessional neurotics and one which seemed to be nearer the normal. If, for instance, while I am writing a letter some one interrupts me with questions, I afterwards feel a quite justifiable uncertainty as to what I may not have written under the influence of the disturbance, and, to make sure, I am obliged to read the letter over after I have finished it. In the same way I might suppose that the uncertainty of obsessional neurotics, when they are praying, for instance, is due to unconscious phantasies constantly mingling with their prayers and disturbing them. This hypothesis is correct, but it may be easily reconciled with what I have just said. It is true that the patient's uncertainty whether he has carried through a protective measure is due to the disturbing effect of unconscious phantasies; but the content of these phantasies is precisely the contrary impulse - which it was the very aim of the prayer to ward off. This became clearly evident in our patient on one occasion, for the disturbing element did not remain unconscious but made its appearance openly. The words he wanted to use in his prayer were, '*May God protect her*', but a hostile '*not*' suddenly darted out of his unconscious and inserted itself into the sentence; and he understood that this was an attempt at a curse (p. 2152). If the '*not*' had remained mute, he would have found himself in a state of uncertainty and would have kept on prolonging his prayers indefinitely. But since it became articulate he eventually gave up praying. Before doing so, however, he, like other obsessional patients, tried every kind of method for preventing the opposite feeling from insinuating itself. He shortened his prayers, for instance, or said them more rapidly. And similarly other patients will endeavour to '*isolate*' all such protective acts from other things. But none of these technical procedures are of any avail in the long run. If the impulse of love achieves any success by displacing itself on to some trivial act, the impulse of hostility will very soon follow it on to its new ground and once more proceed to undo all that it has done.

And when the obsessional patient lays his finger on the weak spot in the security of our mental life - on the untrustworthiness of our memory - the discovery enables him to extend his doubt over everything, even over actions which have already been performed and which have so far had no connection with the love-hatred complex, and over the entire past. I may recall the instance of the woman who had just bought a comb for her little daughter in a shop, and, becoming suspicious of her husband, began to doubt whether she had not as a matter of fact been in possession of the comb for a long time. Was not this woman saying point-blank: 'If I can doubt your love' (and this was only a projection of her doubt of her own love for him), 'then I can doubt this too, then I can doubt everything' - thus revealing to us the hidden meaning of neurotic doubt?

The *compulsion* on the other hand is an attempt at a compensation for the doubt and at a correction of the intolerable conditions of inhibition to which the doubt bears witness. If the patient, by the help of displacement, succeeds at last in bringing one of his inhibited intentions to a decision, then the intention *must* be carried out. It is true that this intention is not his original one, but the energy dammed up in the latter cannot let slip the opportunity of finding an outlet for its discharge in the substitutive act. Thus this energy makes itself felt now in commands and now in prohibitions, according as the affectionate impulse or the hostile one snatches control of the pathway leading to discharge. If it happens that a compulsive command cannot be obeyed, the tension becomes intolerable and is perceived by the patient in the form of extreme anxiety. (But the pathway leading to a substitutive act, even where the displacement has been on to something very small, is so hotly contested, that such an act can as a rule be carried out only in the shape of a protective measure intimately associated with the very impulse which it is designed to ward off.

Furthermore, by a sort of *regression*, preparatory acts become substituted for the final decision, thinking replaces acting, and, instead of the substitutive act, some thought preliminary to it asserts itself with all the force of compulsion. According as this regression from acting to thinking is more or less marked, a case of obsessional neurosis will exhibit the characteristics of obsessive thinking (that is, of obsessional ideas) or of obsessive acting in the narrower sense of the word. True obsessional acts such as these, however, are only made possible because they constitute a kind of reconciliation, in the shape of a compromise, between the two antagonistic impulses. For obsessional acts tend to approximate more and more - and the longer the disorder lasts the more evident does this become - to infantile sexual acts of a masturbatory character. Thus in this form of the neurosis acts of love are carried out in spite of everything, but only by the aid of a new kind of regression; for such acts no longer relate to another person, the object of love and hatred, but are auto-erotic acts such as occur in infancy.

The first kind of regression, that from acting to thinking, is facilitated by another factor concerned in the production of the neurosis. The histories of obsessional patients almost invariably reveal an early development and premature repression of the sexual instinct of looking and knowing; and, as we know, a part of the infantile sexual activity of our present patient was governed by that instinct.¹

We have already mentioned the important part played by the sadistic instinctual components in the genesis of obsessional neuroses. Where the epistemophilic instinct is a preponderant feature in the constitution of an obsessional patient, brooding becomes the principal symptom of the neurosis. The thought-process itself becomes sexualized, for the sexual pleasure which is normally attached to the content of thought becomes shifted on to the act of thinking itself, and the satisfaction derived from reaching the conclusion of a line of thought is experienced as a *sexual* satisfaction. In the various forms of obsessional neurosis in which the epistemophilic instinct plays a part, its relation to thought-processes makes it particularly well adapted to attract the energy which is vainly endeavouring to make its way forward into action, and divert it into the sphere of thought, where there is a possibility of its obtaining pleasurable satisfaction of another sort. In this way, with the help of the epistemophilic instinct, the substitutive act may in its turn be replaced by preparatory acts of thought. But procrastination in *action* is soon replaced by lingering over *thoughts*, and eventually the whole process, together with all its peculiarities, is transferred into the new sphere, just as in America an entire house will sometimes be shifted from one site to another.

¹ The very high average of intellectual capacity among obsessional patients is probably also connected with this fact.

I may now venture, upon the basis of the preceding discussion, to determine the psychological characteristic, so long sought after, which lends to the products of an obsessional neurosis their 'obsessive' or compulsive quality. A thought-process is obsessive or compulsive when, in consequence of an inhibition (due to a conflict of opposing impulses) at the motor end of the psychical system, it is undertaken with an expenditure of energy which (as regards both quality and quantity) is normally reserved for actions alone; or, in other words, *an obsessive or compulsive thought is one whose function it is to represent an act regressively*. No one, I think, will question my assumption that processes of thought are ordinarily conducted (on grounds of economy) with smaller displacements of energy, probably at a higher level, than are acts intended to bring about discharge or to modify the external world.

The obsessive thought which has forced its way into consciousness with such excessive violence has next to be secured against the efforts made by conscious thought to resolve it. As we already know, this protection is afforded by the *distortion* which the obsessive thought has undergone before becoming conscious. But this is not the only means employed. In addition, each separate obsessional idea is almost invariably removed from the situation in which it originated and in which, in spite of its distortion, it would be most easily comprehensible. With this end in view, in the first place *an interval of time is inserted* between the pathogenic situation and the obsession that arises from it, so as to lead astray any conscious investigation of its causal connections, and in the second place the content of the obsession is taken out of its particular setting by being *generalized*. Our patient's 'obsession for understanding' is an example of this (p. 2150). But perhaps a better one is afforded by another patient. This was a woman who prohibited herself from wearing any sort of personal adornment, though the exciting cause of the prohibition related only to one particular piece of jewellery: she had envied her mother the possession of it and had had hopes that one day she would inherit it. Finally, if we care to distinguish verbal distortion from distortion of content, there is yet another means by which the obsession is protected against conscious attempts at solution. And that is the choice of an indefinite or ambiguous wording. After being misunderstood, the wording may find its way into the patient's 'deliria', and whatever further processes of development or substitution his obsession undergoes will then be based upon the misunderstanding and not upon the proper sense of the text. Observation will show, however, that the deliria constantly tend to form new connections with that part of the matter and wording of the obsession which is not present in consciousness.

I should like to go back once more to the instinctual life of obsessional neurotics and add one more remark upon it. It turned out that our patient, besides all his other characteristics, was a *renifleur*. By his own account, when he was a child he had recognized every one by their smell, like a dog; and even when he was grown up he was more susceptible to sensations of smell than most people.¹ I have met with the same characteristic in other neurotics, both in hysterical and in obsessional patients, and I have come to recognize that a tendency to taking pleasure in smell, which has become extinct since childhood, may play a part in the genesis of neurosis.² And here I should like to raise the general question whether the atrophy of the sense of smell (which was an inevitable result of man's assumption of an erect posture) and the consequent organic repression of his pleasure in smell may not have had a considerable share in the origin of his susceptibility to nervous disease. This would afford us some explanation of why, with the advance of civilization, it is precisely the sexual life that must fall a victim to repression. For we have long known the intimate connection in the animal organization between the sexual instinct and the function of the olfactory organ.

¹ I may add that in his childhood he had been subject to strong coprophilic propensities. In this connection his anal erotism has already been noticed (p. 2166).

² For instance, in certain forms of fetishism.

In bringing this paper to a close I may express a hope that, though my communication is incomplete in every sense, it may at least stimulate other workers to throw more light upon the obsessional neurosis by a deeper investigation of the subject. What is characteristic of this neurosis - what differentiates it from hysteria - is not, in my opinion, to be found in instinctual life but in the psychological field. I cannot take leave of my patient without putting on paper my impression that he had, as it were, disintegrated into three personalities: into one unconscious personality, that is to say, and into two preconscious ones between which his consciousness could oscillate. His unconscious comprised those of his impulses which had been suppressed at an early age and which might be described as passionate and evil impulses. In his normal state he was kind, cheerful, and sensible - an enlightened and superior kind of person - while in his third psychological organization he paid homage to superstition and asceticism. Thus he was able to have two different creeds and two different outlooks upon life. This second preconscious personality comprised chiefly the reaction-formations against his repressed wishes, and it was easy to foresee that it would have swallowed up the normal personality if the illness had lasted much longer. I have at present an opportunity of studying a lady suffering severely from obsessional acts. She has become similarly disintegrated into an easy-going and lively personality and into an exceedingly gloomy and ascetic one. She puts forward the first of them as her official ego, while in fact she is dominated by the second. Both of these psychical organizations have access to her consciousness, but behind her ascetic personality may be discerned the unconscious part of her being - quite unknown to her and composed of ancient and long-repressed wishful impulses.¹

¹ (*Footnote added 1923:*) The patient's mental health was restored to him by the analysis which I have reported upon in these pages. Like so many other young men of value and promise, he perished in the Great War.