

# ***Surveying the Analytic Field***

## **Hysteria today**

Anouchka Grose, Karnac, 2016

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*Reviewed by Derek Hook*

As Patricia Gherovici (2017) has recently noted, the histories of psychoanalysis and hysteria are intimately connected. Both demonstrate that there is no natural object for the drive; both are testimony to the fact that there is no pre-given “normal” model of sexuality. The imperative to reiterate these two fundamentally Freudian principles is particularly urgent today in an era of trans-gender/sexuality, in time when psychoanalysis is more than ever be called upon to demonstrate its relevance. Hence, the urgency of attending to what hysteria might be, and what diverse forms hysteria might take in today’s world.

Anouchka Grose’s impressive collection of essays – published by Karnac under the imprint of London’s Centre for Freudian Analysis and Research – provides an instructive means of comparing varying definitions and descriptions of hysteria in contemporary clinical work.

Grose’s opening chapter, which provides a wonderfully succinct overview of historical conceptualizations of hysteria, notes the opprobrium that has been targeted on the diagnostic notion of hysteria by feminism, before asserting that

in the Lacanian clinic, a diagnosis of hysteria is anything but an affront. Dissatisfaction is the motor for desire, and desire drives existence. Hysterics specialise at using dissatisfaction to keep desire spinning, acting against atrophy and ossification. Far from trying to get them to stop fussing and get back in line, one might encourage them to take their questioning further, to us it in their lives and work, and even to attempt to enjoy it (Grose, p. xxx).

Hence Lacan’s terminological choice in the 1970’s when he spoke about the need to “hystericize” neurotic analysands, stressing in this way the importance within clinical work of confronting incongruities and questioning what analysands claim to know about themselves and their history. So,

Far from portraying hysterics as people who foolishly manufacture symptoms in a doomed attempt to buck the system, they are...seen [in Lacanian psychoanalysis] as people who refuse easy answers, resisting commonplace idiocies put forward in the form of accepted laws and norms. They use their dissatisfactions and discomforts as a means to interrogate the Other, to make it say something back...In this sense the hysteric can be seen as a seeker after truth (Grose, p. xxix).

Hysteria, notes Grose, has disappeared from the *Diagnostic and Statistical Manual of Mental Disorders* by 1980, only to be replaced by the categories of “conversion disorder” and “histrionic personality disorder”. Leonardo Rodriguez takes up this argument, pointing to the hysterical phenomena that persist in the DSM under a diversity of headings: “Anxiety disorders”; “Dissociate disorders”; “Somatic symptom and related disorders”; “Sexual dysfunctions” and so on.

Rodriquez warns against the tendency to simply equate or conversion symptoms with hysteria. Almost anyone is capable of developing a conversion symptom, he notes, going on to specify that

We diagnose a patient as a hysteric of the conversion type if the conversion symptom is the dominant symptom, that is, if the conversion symptom...is what holds the patient together, providing neurotic stability and an unconscious form of personal identity (Rodriguez, pp. 10-11).

It is, by contrast, forms of *anxiety hysteria* that are more likely to present at today’s clinic. As Rodriquez rightly notes, a great number of patients today “suffer from social inhibitions, incipient or ill-defined phobias, and episodes of anxiety with detrimental physiological concomitants” (p. 15). Rodriquez goes on to set conversion symptoms apart from more generalized psychosomatic symptoms. Conversion symptoms, he points out, are *metaphoric* in nature; metaphoric substitutions are not present in psychosomatic symptoms, which, furthermore, “correspond to a direct, sealed link between unconscious conflicts and the affected organs” (p. 16).

A further distinction follows, between conversion symptoms and “pure” states of anxiety, which, as Rodriquez, emphasizes, are still hysterical in the sense of being open to “becoming affected by the signifiers that the running of human life normally present[s] to the subject” (p. 18). In each of these cases – hysteria manifesting in conversion symptoms, psychosomatic complaints or varying forms of anxiety – the body remains the battlefield of subjective conflicts.

In her account of the apparent disappearance of hysteria into new diagnostic categories (such as that of anorexia, borderline personality), Anne Worthington reminds us of Freud’s concerns, in his early work on hysteria lay with

the reconstruction of...patients' histories, which gave access to a knowledge about desire, a desire so strongly prohibited by the patients' own desires about what was acceptable, whether socially or according to their ideas about who they were, that it has been repressed only to emerge in bodily symptoms (p. 36)

The existential question that distinguishes hysteria from other neuroses may today be less 'Am I man or a woman?' (Lacan's favoured formulation) than: 'Am I straight or bisexual?' or even, 'Am I gay, or queer, or homosexual?' There are of course differing cultural contexts within which hysteria emerges – Worthington's analysis of queer identity and politics as a site for "the articulation... of hysteria today" (p. 49) provides an a case in point – despite that a series of crucial clinical continuities remains in place:

Hysteria today, then, is perhaps not quite so different from the hysteria of yesterday: the somatic symptoms are messages, expressions of something repressed, questions addressed to the Other; it is associated with sex and sexuality, feminine sexuality; and the inherent bisexuality of the neurotic manifests itself in the hysteric's speech, dreams, and identifications (p. 40).

In a somewhat cryptic, yet nevertheless compelling account, Vincent Dachy speaks of "the hysterical arrangement" in which an effort is made "to keep and maintain the traumatic encounter with an enjoyment that poses the question of desiring within the realm of love" (p. 57). The hysterical subject does not want to be desired as an object (for, as Dachy stresses, their body, their looks, their money, status, etc.), "but wants to be desired as and for "oneself"...wants to be desired for the same reasons as those of being loved – but still wants to feel desired sexually" (p. 57). The apparent structural impossibility of such a demand is nicely underlined by Dachy: "enjoyment, love and desire do not constitute a simple and automatic, "natural" continuum!" (p. 57).

It is the hysteric's attempt to use *love* as a means of containing the traumatic encounter with enjoyment that particularly fascinates Dachy:

As the traumatic disruptive enjoyment is too much to deal with, love...is called to make it passable. Love attenuates the shock of the traumatism, gives it a limit. By seeking the protection of the powers of love...desiring can be upheld as un-realised, and the re-encounter of the problematic enjoyment kept at bay (p. 57).

Part of what is compelling about this account is that it foregrounds how a traditionally masculine dilemma – how to both love and enjoy the sexual object – is also fundamentally hysterical.

Darian Leader continues the study of careful diagnostic distinctions apparent in Rodriquez's chapter, by insisting not on the content of clinical symptoms, but on the *place* they occupy for their sufferers, and by drawing attention to what they give voice

to. Any number of culturally available symptom types might be utilized as a means of articulating the hysteric's discontent. Contrary to how the term is often invoked, there can be no cross-cultural or trans-historical definition of hysteria:

Hysteria by definition is constantly updating its symptom pictures. Presenting symptoms will change with culture...A robust diagnosis will be predicated not on surface symptomology but on how the subject speaks about their symptom, the position it occupies, and what we can learn about its construction (p. 28).

Leader's chapter is concerned with three particular areas where diagnoses of hysteria and psychosis are sometimes confused, namely questions concerning Other minds, the Other woman, and the Other body. The psychotic subject, like the hysteric, may spend much of their life in the unbearable situation of not knowing who they are for the Other. This puzzle of Other minds can often be separated in its psychotic from its hysterical in the following terms:

What sees on the surface to be a...stoking the desire of the Other, of creating...unsatisfied desires...turns out [for the psychotic] to be a way of creating...distance... The Other must be kept at an artificial distance which the subject has created...for the hysteric, such refusals serve to perpetuate the question of their value for the Other...The relation to the Other here aims at a point of desire, of lack, which the subject identifies with (Leader, pp. 29-30).

The hysteric's identification with the lack, furthermore is generally situated in the father. The role of paternity thus makes for a useful differential diagnostic feature in hysteria and psychosis. Whereas the Name-of-the-Father is famously foreclosed for Lacan in the structure of psychosis – something about the father does not work here – the trace of the father, and the lacking father, is typically operative in hysteria.

Leader's conclusion makes for an important consideration in any differential diagnosis of hysteria:

The hysteric is not the only subject allowed to pose a question about their sexual identity, just as the hysteric is not the only one with a sensitivity to the desire of the Other or a claim to use the body as a space for conversion. It is less the presence of these motifs that truly characterizes hysteria than the nature of the space in which they are elaborated (p. 33)

If the medium of this space is lack, Leader continues – opting here for a topological formulation – and if this lack is one within which elements of identification are operating, “we are probably with hysteria” (p. 33).

Hysteria Today has obviously been prepared as a text primarily for clinicians, and its focus on differential issues is certainly one of its strengths. It would have been useful, perhaps, if more on Lacan's later theory of the four discourses might have been

introduced, thus opening up a link to social and political theory. This being said, Colette Soler's contribution to the volume does usefully foreground a series of Lacanian formulations regards hysteria that connect his early to his later work:

Clinically speaking, the key phenomenon of hysteria is.... a systematic lack of satisfaction, that is, a lack that is cultivated.... This has given rise to a series of different interpretations: first it was the manifestation of a desire to desire, then it was necessary to keep *jouissance* unsatisfied so that desire can be sustained. But any desire is always linked to a modality of *jouissance* (pp. 91-92).

Particularly helpful here is how Soler reformulates the idea of a hysterical desire for an unsatisfied desire in terms of the later Lacan's attention to *jouissance*. There are a series of motifs – signatures of *jouissance*, as we might put it – that point us to how hysteria is most likely to manifest today: the *jouissance* of being deprived; the idea of “the body on strike”, and “identification with the *jouissance* of the castrated master” (Soler, pp. 91-92). Bearing these clinical indications in mind gives one little doubt about the persistence of hysteria in today's world.

## References

Gherovici, P. (2017). *Transgender Psychoanalysis*. London & New York: Routledge.

**Derek Hook** is a scholar and a practitioner of psychoanalysis with expertise in the area of critical psychology and psychosocial studies. His research interests essentially converge on the theme of 'the psychic life of power', and his publications tend to take up either psychoanalytic, postcolonial or discourse analytic perspectives on facets of contemporary post-apartheid South Africa. His lecturing over recent years has reflected this diverse set of interests; he has offered classes and seminars on: Frantz Fanon and formations of (post)colonial racism; Steve Biko and Black Consciousness; Freud's mass psychology; discourse analysis and psychoanalysis as critical reading methodologies; Slavoj Žižek and the role of fantasy and *jouissance* in ideology. Derek is currently completing a book exploring the psychosocial dimensions of Lacanian psychoanalysis, tentatively entitled 'Five Moments in Lacan'. His most recent work has taken a biographical turn. It aims to explore, via various psychosocial perspective and the techniques of narrative non-fiction, what the life of Robert Mangaliso Sobukwe, the great Pan-Africanist intellectual and opponent of apartheid, means for today's South Africa.