

In Progress . . . I Hope: From Pediatrics to Psychoanalysis to . . .

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Psychoanalysis must be an idiosyncratic matter. That means that the encounter between the patient and the analyst is carried out through the personal character of both participants. But there is something more. Historical and cultural patterns are also most influential. The present and the past social context where the psychoanalytic bipersonal meeting occurs is a significant factor in the evanescent constitution and the constant movement between the ego of the analyst and the ego of the patient. Therefore, in this radical view only Freud would fulfill a Freudian encounter. We, as probable post-Freudians, must be permanently searching for personal, idiosyncratic ways in the clinical work. Brazilian psychoanalysts face the challenge to treat their patients in a *Brazilian way*. To understand Brazilian people and the way psychoanalysis may develop in this land, we must know that Brazilians' lived experience is frequently blended by irony, paradox, and the fleeting character of the human life. Words—a pragmatic perspective of Brazilian words in action—are essential for the task. Interrogative psychoanalytic dialogues are my main topic of research.

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EVERYBODY KNOWS ABOUT THE MYTH OF PROCRUSTES. HE LIVED near the city of Eleusis and there he started his criminal career. He would force his victims to lie down in his terrible bed. If the victim was too short, the giant would stretch him. If the victim was too long, he would cut him off. In any case, Procrustes's bed would establish "the" measure, the law. Fortunately, Theseus put an end to this obsession: he made the giant undergo the same "normalizing" treatment. A way of looking at this myth is: Theseus imposed his own "bed" to Procrustes, closing a vicious circle from which escape was impossible. There will always be a master's bed where the impotent other needs to lie. Procrustes's obsession—and Theseus's solution—is a lesson to take into consideration in all matters of life, including psychoanalysis.

Psychoanalysts may in some ways be "Procrustes." We are so narcissistic that it is difficult to allow the patient to have a "free" space. We all carry stories internally such as those of Procrustes, Narcissus, and other giants. They become barriers we have to face in everyday life, particularly in psychoanalysis. To face and even attenuate this problem, I would like to invite you to express your views about my work. I hope you will see this invitation as an anti-Procrustean present the way I see myself, and feel free to offer their comments, which could help to put my ideas into perspective. It could also be a way to contemplate William James's view that "whenever two people meet there are really six people present. There is each man as he sees himself, each man as the other person sees him, and each man as he really is" (quoted from Gabbard, 2000). Since "who we really are" is essentially unconscious, psychoanalytic encounters will be a search throughout interchanges between the first two James's topics: the view the psychoanalyst has of himself in confrontation to the patient's view. I must emphasize the fragility of the ego's reconnaissance of himself. The consequence for clinical psychoanalysis of this awareness would be not take the ego as an evidence, but as a supposition.

Ego productions are, therefore, under suspicion. How do I know who is speaking when I speak? According to James's point of view, it is difficult to find out which of the ego versions is actually in action at a given time, and also which one corresponds to the main actor sometime later. "One part of me is permanent/The other suddenly reveals itself" is a verse of Ferreira Gullar, a Brazilian contemporary poet who tells us of the constant movements and uncertainties of the ego, its numerous false connections and misjudgments. "Movement" of

the ego is one of the reasons I intend to work in this text in a “several-hand” manner, using eventual convergencies/divergencies expressed by the readers.

Now, let me introduce some idiosyncratic aspects of Brazil and of Latin America. First, as my country and its people might be unknown to you, I will acquaint you with a few Brazilian authors and intellectuals that I hope will be of interest to you. Second, I will present the context in which Brazilian psychoanalysis has developed, since I believe this is crucial for the understanding of my professional life. And finally, I will focus on some theoretical and clinical ideas I have been working on for the past 30 years.

In addition, I discuss colleagues’ views that were shared with me *ad libitum*. I expect that the final result will provide you with a sharper vision of a Brazilian psychoanalyst at his work in progress (I hope).

The first writer, Millôr Fernandes, has been working in the fields of philosophy, political criticism, theater, literature, cartoons, haiku poems, and translations of literary masterpieces by Shakespeare, for example. Fernandes offers us a critical position toward everything and everybody including himself as well as any kind of established institution. All this is undertaken in a *Brazilian way* (a concept that I will explain later). I believe that all Brazilian psychotherapists should read Fernandes’ writings. In one of them, he says that “every man when born is original but at death is a copy” (Fernandes, 1994, p. 8). Keeping this in mind might help psychoanalysts do their best work. When I talk with a patient, am I repeating what other significant people said? Can I—or you—be Freudian? What does it mean to think that I am Freudian or Kleinian or Lacanian? Isn’t it a kind of plagiarism?

In my view, the work of a psychoanalyst is so attached to his or her way of being that strictly speaking only Freud could be Freudian. This does not mean that we cannot share some concepts about the unconscious, transference, and the like. The difference is to be found in the idiosyncratic way each psychoanalyst uses it at work. Freud warned us that his analytic method was structured to conform to his own personality. He also stressed the need for every analyst to adapt the practice of psychoanalysis to his or her peculiar way of being. Then to say “I” is almost entirely a slip (Silva, 2004). When I say “I,” no one knows whom or what I am talking about. The only way to approximate ourselves to a “true” version of the “I” is through looking at the other, in a kind of

mirror—a talking and evanescent mirror—always trying to be more and more veracious. This attempt provides the possibility of cure and a bridge to transference.

The Brazilian Way

It is difficult to explain in English the Brazilian way of being. Many of you might think of Brazil as limited to the Amazon forest where people live with a naive happiness. They are partially right. This is a young country whose economy and political stability are emerging. Several of our oldest institutions are still relatively young. However, in contrast to the abject poverty in which many live, some of our institutions rival those found in developed countries. The Universidade de São Paulo, for instance, is currently one of 30 universities listed in the Index of Scientific Information (ISI), which ranks intellectual production worldwide. This is only one example; there are many areas in which Brazilians excel. However, we admit that we are a peripheral country in many ways and that we are a nation of many contradictions and inequalities.

On the other hand, living south of the Equator has its bewildering side: García Márquez (1982), in his lecture at the Swedish Academy on the occasion of the Nobel prize award, spoke about Latin America. He told the audience an anecdote about a Peruvian general who ordered a state funeral for his own leg, which he had lost in a battle! Such things create an atmosphere of surprise and curiosity, which are the components of the free thinking so necessary for writers, poets, and psychoanalysts. He then said that his way of writing—“fantastic realism”—is proper and “real” in these latitudes.

Brazil has produced a roster of writers, poets, and psychoanalysts who are mostly unknown to the American public. Machado de Assis (1839–1908), our greatest novelist, in *Quincas Borba* (1891) has captured the fictive nature of our imperial politics at the end of the 17th century. He shows an ironic and allegorical approach to the colonization of Brazil by the Europeans:

Imagine a field of potatoes and two starving tribes. There are only enough potatoes to feed one of the tribes, who will then get the strength to cross the mountain and reach the other slope,

where there are potatoes in abundance. But, if the two tribes peacefully divide up the potatoes from the field, they won't derive sufficient nourishment and will die of starvation. Peace, in this case, is destruction; war is preservation. One of the tribes will exterminate the other and collect the spoils. This explains the joy of victory, anthems, cheers, public recompense, and all other results of warlike action. If the nature of war were different, those demonstrations would never take place, for the real reason that man only commemorates and loves what he finds pleasant and advantageous, and for the reasonable motive that no person can colonize an action that actually destroys him. To the conquered, hate or compassion; to the victor, the potatoes.

It is amusing the way Machado de Assis chooses to express the victory. In Portuguese, the word *potato* has a lot of connotations. In the excerpt, the last phrase contains the paradox of winning potatoes or a false victory, indicating a stupid war, a war for nothing.

Machado de Assis is also ironic with regards to the European culture and philosophy: one of his characters, Quincas Borba, was a philosopher who called his dog Quincas Borba, a duplicity that leads to confusion about who is talking—the philosopher or the dog?

To help you understand the idiosyncratic way Brazilians see the world, I will also introduce a few contemporary Brazilian and South American intellectuals who combine creativity, originality, kindness, and warm irony. Brazilians have a special talent for transforming tragedy into comedy. Millôr Fernandes's work, cited earlier, is a paradigm of the Brazilian way of thinking and being. In his *Bíblia do Caos* ("Bible of Chaos," 1994) we find some witty passages, such as, "Deliver me from justice—from the malefactors I rather deliver myself," "Why is it that God promises rewards only to the just? Because the unjust fend for themselves," "In today's Brazil, a nightmare is better than waking-up," "I thought I would die before hearing this, but the other day a psychoanalyst told me, with a psychoanalyst's face: money is a phallus symbol."

A friend of mine, Donaldo Schüler, recently translated Joyce's *Finnegans Wake* (1939) into Portuguese, which must have been quite an adventure. He also prepared a special edition for children of the same book. Does the reader remember Joyce's word with 101 letters to tell us the Finn's fall of the stair?

*rumdanbufhgtmungtonjhymdrongndrtoytmdkgcmsloptuemntro
dtrughtlfncchothsjentuppilgmnewqkartusngmtnsfporntdpltnsw
elrbmundbltmysdfnrtpofnflformfrnwlgummcnbyndrtlmgndfil*

It is almost impossible to translate Joyce, but this kind of “impossible” work carried out by Schüler was done with passion, dedication, and joy in a typical Brazilian way—*jeito brasileiro*, as we say.

Luis Fernando Verissimo, a writer from the South, created a character in his book *Analista de Bagé* (“The Psychoanalyst from Bagé,” 1997) whose “technical” resources are both “Freudian” and extremely idiosyncratic. The psychoanalyst from Bagé is a gaúcho born in the heroic Southern border of the country (Bagé) and his methods seem to resemble at the same time “Freudianism” and Gauchismo (a symbol of the macho man), an “impossible” combination. Verissimos’ creation is much more than a funny cartoon. It is a paradigm showing that it is possible to import valuable knowledge and recreate it—instead of only repeating it. The *Analista de Bagé* claims he is an orthodox Freudian but uses, for instance, a peculiar technical strategy for neuroticism: the *joelhaço* (“knee punch”) directed to the testicles of the “patient.” The patient is “forced” to have an insight and to abandon his inhibitions. Beyond the “absurd” situation, Verissimo shows that a Southern Brazilian psychoanalyst can have an original, proper, and idiosyncratic way while maintaining “Freudian principles.” Through this literary tool, one can express the necessity of facing the constant re-creation (renovation) of ourselves as persons and, consequently, as psychoanalysts. It can also help us to show that assimilation, creation, and re-creation of concepts is an interminable task—the interminable psychoanalyst, to paraphrase Freud.

Psychoanalysis in this latitude is touched by our way of being and seeing the world.

Brazilian Psychoanalysis

At the time of this writing, Brazil had 180 million souls, a gross internal product of U.S. \$493 billion (ranked as the 15th country, but representing less than 1% of the worldwide gross internal product), and a per capita income of U.S. \$2,789 (which puts my country in 78th place). These figures point to a high level of social inequality.

To give you an idea of Brazilian social and political conditions, consider the following:

1. Our geographical position below the Equator, our large and varied country (largely tropical, but temperate in the southern part even with some snow in the harshest winters).
2. The first part of our history (which totals 500 years, starting as a colony of Portugal) and the recent history of dictatorship (from the 1960s to the 1980s).
3. Our emergence as a quasi-industrialized nation (among the 15 more developed countries in the world).
4. Our tremendous social inequalities (with most of our people living in poverty).
5. Our brave men from the northern part (the *Nordestino*) of the country surviving in the arid *sertão* hinterland.
6. Our brave men from the southern part (the *Gaúcho*) of the country with their passion for horses and battles.
7. The existence of diversified political and religious beliefs.
8. Our fascination with foreign people—perhaps a “cultural torti-collis”—their wealth, power, knowledge, and supposed wisdom.

The question I ask myself is: Are we able to produce some original psychoanalytic thinking in the face of these peculiar conditions? Can we really contribute to progress in the psychoanalytic field or is our destiny to repeat Freud and other foreigners forever and adopt all ideas that reach us from abroad? The dilemma here is: We believe that we have little to say to the powerful North. At the same time, we are tempted to invent Brazilian versions of Freudian thought. Results of the attempts to solve this dilemma have been timid until now. Probably what is lacking in Brazilian psychoanalysis is the belief that deeply exploring our own “backyard” is a way to find original contributions.

Themes I Love

Pediatrics—The First Step

The first station on my journey to psychoanalysis was pediatrics. It was the pediatrics of the 1960s, which had an exclusively somatic

approach to the child. My first professional crisis emerged when I realized that the “official” pediatrics conceals a wide dominion of interpersonal relationships with the power to lead to suffering by the child. If children are exposed to good emotional conditions, they will be healthier. Such an obvious assertion was novel 40 years ago. That the pediatrician should also see adults in his office—an emergent “family pediatrics”—was then a disturbing idea. Pediatricians such as Harrington (1965), and I (1972) were beginning to work in this direction. Winnicott was then almost unknown to Brazilian pediatricians.

This crisis took me to psychoanalysis where I discovered that psychoanalysts have a different way of seeing and talking to children. This discovery made me move, with my family, to Buenos Aires where we stayed for seven years. Buenos Aires, the largest city of Argentina, was then an important center of psychoanalysis. A few European psychoanalysts had immigrated to Buenos Aires in the 1940s and a boom occurred in the 1960s. Melanie Klein’s thoughts were then mainstream. Southern Brazil was especially influenced by Argentinean psychoanalysis until the early 1990s. Then a shift occurred toward a plurality of authors.

One bridge that led me into psychoanalysis was my doctoral thesis, “Progeria—Premature Aging in Children—A Ten-Year Follow-Up Study of Two Twin Brothers.” It was a shift of direction from pediatrics to psychoanalysis. The study started with medical and biological approaches to this extremely rare disease (no more than 100 cases have been reported so far worldwide) (Sousa et al., 1971). However, serial observations of the boys and their families using the Kleinian paradigm to interpret their play, drawings, and dialogues led to a psychoanalytic approach to the disease. The most astonishing finding was that the boys could be considered mentally healthy despite their severe physical handicaps. They reported having fantasies common to most children; they dreamed of growing up and having a family, and they had the same conflicts and anxieties as their brothers. Of course, their peculiar physical aspect (they were bald and very short, and their skin looked aged) combined with the curiosity they generated was an extra source of anxiety and suffering. In their intimacy, they appeared to be spontaneous and often happy. They both died at the age of 18 by myocardial infarction, a common cause of death for those suffering from this disease.

Another essential step from pediatrics to psychoanalysis was my own analysis, which was carried out by Angel Garma, a Spanish colleague that pioneered psychoanalysis in South America.

The 1970s were a difficult time in Argentina and many other South American countries as dictatorships spread to the area. Nevertheless, it was a period of arduous work and close friendships. My two daughters grew up in Buenos Aires and immersed themselves in the intense cultural life that flourished in spite of the military rule. The decision to go back to Brazil was a difficult one, but the dispute over the Falkland Islands and personal matters precipitated our return.

Psychoanalysis—The Second Step

Upon our return to Pelotas, Southern Brazil, in the beginning of 1982, I resumed my work at the Catholic University of Pelotas. I also started to turn into reality an old dream of mine that I shared with a friend and colleague (Sergio Abuchaim, M.D.) to create an International Psychoanalytic Association (IPA) psychoanalytic study group with the plurality and freedom of thought we had found at the Argentinean Psychoanalytic Association.

Starting a psychoanalytic study group in a small and relatively isolated city in the Brazilian South was an exercise of “patience and self-denial,” both of which are recommended by Freud for the clinical work. Perseverance, confidence, and the friendship of several colleagues from the Uruguayan Psychoanalytic Association and the Brazilian Psychoanalytic Society of Rio de Janeiro were behind the success of the task.

Almost 20 years later—in 2004, at the New Orleans International Congress—the Pelotas Psychoanalytic Society became a member of the International Psychoanalytic Association. At the same time, my experience with patients and seeing their suffering inspired me to search for new ways of treating mental illness. Research on the clinical encounter was a leading theme throughout my life. In the following paragraphs I will summarize the concepts, thoughts, and questions regarding the clinical encounter I have been most interested in.

Doing Psychoanalytic Things with Words

Psychoanalysts agree that they are doing things when they talk to the patient. They follow Austin's (1962) theory of speech acts, which points that words have different forces that produce different effects both in the speaker and in the listener. Classically, we have (a) a locutionary act, as the usual sense of saying something, (b) an illocutionary act, as an act carried out *in* saying something (commanding, stating), and (c) a perlocutionary act, as some consequences upon behavior, thoughts, feelings of the listener or of the speaker.

Now I'll discuss some themes related to words in action in psychoanalysis.

On Questions

In the past years there has been a growing interest in the psychodynamics of questions and their potential capacity for psychic change. In a series of papers and communications (Sousa, 1997, 1998a, b, 1999; Sousa et al., 2000a, b, c, d, e, f, 2001a, b, 2002, 2003), I argued that questioning is a reliable tool in the psychoanalytic dialogue and that several colleagues use questions in psychoanalytic sessions even though they are not interested in the formal study of questions. We are now working on some ideas on the philosophical edge of questioning that seems to have clinical relevance to psychoanalytic treatments.

I with colleagues (Sousa et al., 2003) argued that psychoanalytic dialogues are Socratic. Maieutic, from Greek *maieutikos*, of midwifery, was a form of dialogue introduced by Socrates to clarify the ideas of others. Two phases are described: (1) "refutation" (*élenchos*) operates as the *pars destruens* of the method, through which Socrates induced his listener to recognize his own ignorance. Formulating sequential questions especially directed to contradictions, obscurities, and lack of meaning, Socrates exhorted the interlocutor to find new definitions of the theme being debated. (2) This would be the way of reaching the part of the dialogue when his interlocutor would think of himself as ignorant. Socrates stressed that ignorance had an effect over the soul that stimulates purification and truth. Helping truth to come to light depended on Maieutic, the final moment of dialectics,

completing the Socratic spiritual obstetric art (Reale and Antiseri, 1990).

The Socratic method could become an important part of the Freudian method. Since questioning is probably more significant than is usually recognized, therapeutic dialogues need to be constantly evaluated as speech acts. In practical terms, the evaluation occurs often throughout implicit questions such as, “Did the other listen to what I said?” “How did I explain it?” “What did the other understand?” “What are the other’s reactions or nonreactions to my person?” “How did I respond to it?” “Is it time to talk?” “Or to be silent?” “Or to rest from inquiring?” “Or to be active in inquiring?” (Sousa et al., 2003).

Erotetic Logic

Focusing on the interface of psychoanalysis and erotetic logic (the logic of questions) we find that questions are relevant interventions both in lay and psychoanalytic dialogues. The question “What is a question?” seems to be almost totally ignored by both psychoanalysts and logicians. The dialogical structure of ordinary talk is reinforced by meaningful questions and correspondent sensitive answers. In psychoanalytic talk the free-associative model reinforce a monologue-like form of communication. We will all possibly agree that the psychoanalytic process may be seen as a dynamic process that activates monologue-like and dialogical structures throughout intrapsychic and intersubjective experiences.

Anything we say or write is always a question regarding something, and we are always aiming at answering this question, although we may realize this fact—questions do exist—only in an *après coup*. Language is a kind of response to this and, as such, a kind of rationality in treating them, that is, an effort to reach a solution, if this is present in the act of communication. Interrogatives provide a linguistic model of rationality and simultaneously an outline of a possible deep structure of discourse. In linguistic research it is observable that interrogation may appear in an interrogative sentence, but it is not only present in this form of communication. We all remember some examples of interrogative sentences where affirmation, although disguised, constitutes the structural core of the interrogation. This kind of question does not demand an answer,

but it is still an interrogation, in a rhetorical or argumentative way. It is remarkable that an explicit interrogation may suggest hidden conclusions without openly saying so. Therefore, any question generates the necessity to think not only about the answer but also about the question itself (Meyer, 1981).

Reality is never perceived as a closed totality. Each time we want to explore reality we need to choose what is our interest among all co-existing possibilities. This is the only way to assess it. Interrogations may be seen in this context as a “knowledge operator” that allows us to arrive at the final propositions to be externalized.

One of the fundamental properties of interrogation we want to stress is that an interrogative sentence may function as an expression of command (“Would you please keep quiet?”) and also as an affirmation (“Who does not know that interest separates us whereas intelligence bring us together?”). This perspective points out that the linguistic comprehension of interrogation is beyond an exclusive theory of syntax. To ask means to perform different linguistic acts with the objective of achieving a certain task: “to ask is questioning” (“interroger, c’est questionner”) (Apostel, 1981, p. 23). As a speech act, a question involves different forms of action: (a) it is an interpersonal act that may influence all the persons involved in the dialogue (a model of “dual” interrogation); (b) it involves an effort to change something (e.g., to bring forth a response); (c) it implies a reciprocate adaptation of different and independent systems, that is, the interlocutors involved; (d) it has deducible presuppositions linked to certain assertions as true utterances.

Body and Language as Clinical Instruments

An essential problem in psychoanalysis is the antinomy subject–world or subject–reality relationship. Analysts deal with this issue in their daily tasks. Matte-Blanco (1975) considers this antinomy as the axis of his last monograph, where he sees the term *antinomy* in its ordinary sense, namely, a relationship existing between different elements that are mutually opposed, noncompatible, nontolerant (p. 70).

I share this criterion, considering this contradictory relationship as the basis of exploration, and I would add that the analyst creates instruments and tools that allow exploring such relationships; in other

words, our tools are created so that they may investigate reality as well as our relationship with reality.

For a long time now it has been understood that this is not an immediate or direct relationship, but rather that it is indirectly or, more precisely, only through strategies, that we can build our notion of what is in itself inconceivable reality. Each notion we build is a theory, and “theories decide what we may observe,” as rightfully stated Einstein to Heisenberg (Watzlawick, 1981).

Conversely, some clinical recommendations warn us that we should always operate within the rated capacity of a unit’s design for purposes of preserving its life. In the case of the psychoanalytic tool, we should only work at the maximum operational level. This implies assuming a most particular attitude, where the analyst is located at the extreme corner of a paradox: he or she lives an exploratory struggle to build his tool, but at the same time, while the tool is being built, he or she must distrust its capacity and test it with all the strength in his or her mind. This assumed paradox is the minimum functional condition of the psychoanalytic process. It involves operating with the highest bearable uncertainty level one can deal with, adjusted to any changes that may occur over the session.

In his *Outline of Psychoanalysis* (1938), Freud referred to this issue when he asked what is actually psychic or, in other words, what is essential as a source of experience with reality. His reply is well known. He starts with acknowledging that conscious processes are nonclosed series, incomplete in themselves, and that is therefore necessary to admit that there are processes that take place simultaneously to those that are usually considered psychic (conscious), namely somatic processes. These somatic processes are most likely inferences, articulate assumptions departing from conscious expressions, and this is where psychoanalysis “explains the supposedly somatic concomitant phenomena as being what is *truly psychological* . . . [and] disregards the quality of consciousness . . . which is the second fundamental hypothesis [of psychoanalysis]” (p. 158, italics added). A little later in the same chapter, he states, “The only distinction would be that, with regards to the terminal organs of sensation and feeling, the body itself would take the place of the external world” (p. 162). Thus, it seems that Freud considers that in its experience with reality the psychic apparatus conceives the body as some sort of advanced researcher. In contact with the enigmatic experiences with reality, the body issues messages, which may be only

slightly inferred, assumed, construed, and adds, "In this way, we construct . . . a sequence of conscious events, complementary to the unconscious psychical processes" (p. 159).

Here is where the analyst finds a viable source of inferences through his or her research on somatic concomitants, motivated in the meeting that occurs in the analytic session, and poses them in therapeutic field. Yet, according to Freud (p. 162), this gives origin to an additional difficulty that "is the work of the function of speech, which brings material in the ego into a firm connection with mnemonic residues of visual, but more particularly of auditory perceptions." Under the strength of language, perceptive processes may be strongly motivated from the inside, thus causing these internal processes (ideas, presentations) to also become conscious, which then demands a "reality test" (p. 162) designed to establish a distinction between the inside and the outside, for which we know there is something that may not be changed.

Body and language are designed as a source of experience with reality. Authors generally concur on these issues. Aulagnier (1975), for instance, has posed several useful questions for clinical work: What is the potential and limit of the changes that the psychic apparatus and its presentation ability may impose on reality? Does "unchangeable" in reality mean that it may not be presented or only that it may not be spoken? Are somatic signs the only way to express what may not be spoken? At the same time, the author suggests reverting the direction of questions and questioning the power and limitations of the changes that reality imposes on the psychic apparatus and how the unchangeable in the psychic operation imposes changes on reality.

I am referring to these useful questions only to emphasize my opinion that, given the infinite potential of the experiences created in the analytic field, it is the analyst's duty to assign priority to his or her analytic tool in the field and to take into consideration (as an object of analysis) the effects of such privilege, both on himself or herself and on the patient.

*Overload of Metaphors and Euphemisms:
Effects of the Instrument on the Analyst*

If we have in mind what might be called the "Borgian menace," the analyst could find more easily his way in his clinical work. Facing an

audience of psychoanalysts, J. L. Borges (1979) stated, “Every word is, in fact, a metaphor.” And I would add a “menace,” because his words clearly point to the fact that, since it is impossible for us *not* to metaphorize, we should at least try to do it correctly.

Of the field of research on metaphors (see Spence, 1992), I must mention two issues: (a) the way we implement our psychoanalytic understanding of clinical phenomena throughout our theoretical models and (b) the way we wish to convey our experiences to our colleagues. The narrative of clinical experiences with others implicates the increasing use of metaphors and euphemisms. This fact, which is, on one hand, unavoidable during the exchange of ideas, tends, on the other hand, to detour us from the crude reality of the bipersonal experience of clinical work and takes us to overuse metaphors and euphemisms.

Even if metaphor refers to “transportation” and euphemism to something “promissory” or “what sounds good,” we should contemplate the paradox that trying to state the clinical facts locates us both nearer to and further from the clinical experience. This is the particular wealth of the “Borgian menace” for psychoanalysts.

Let us glance at Freud’s work. Our daily term *transference* mitigates the tragic strength of the therapeutic relationship. In the theoretical (metaphoric) field, Freud refers to transference as a *cliché* of past circumstances that are repeated with the analyst. In the clinical field he adds, in a less metaphoric way, “Transference is, above all, a *calamity*” (italics added). It is worth noting that the first expression was “meant to be published,” not the second (it was written in letter 19 to Pfister [Freud, 1963, pp. 35–36]). The most theoretical expression points to the nature of the transference notion but has the disadvantage of setting us apart from the strong features of our experience with the other. I do not think that the issue lies in choosing one or the other, but rather in being careful not to let one overlap the other. *Calamity* is, in fact, an interpretation of clinical events, namely, a metaphor, but it shows more expressive strength than *cliché*.

This brief reference is meant to stress the need to “dismetaphorize” and “diseuphemize” as much as possible our psychoanalytic discourse—to let, instead, the brutal and passionate experience that emerges in the transference to be deeply examined by both patient and analyst. At the same time, to impede the proliferation of “soft” or “velvet-like” psychoanalytic versions, which are always more attractive to our eyes, our ears, and our hearts.

Is Psychoanalytic Training Psychoanalytic?

Fortunately psychoanalysts started to talk with other people. What I mean is that for decades we stood in a societal isolation, talking exclusively with psychoanalytic people. The possibility for critical views was then small. Nowadays our analytic criteria for what happens inside psychoanalytic institutions help us see that (a) candidates are frequently treated in a childish way; (b) training psychoanalyses must have a “tailored” design (not a *prêt-a-porter* perspective). They should, for instance, follow the Freudian recommendation that if the patient is consistently better, the frequency of sessions should be diminished (or augmented in the extreme situations); (c) theoretical studies should be far from Talmudic readings and should stimulate epistemological approaches such as “How has this knowledge been constructed?”; and (d) interdisciplinary approaches for crucial themes such as the unconscious, drives, the other, the self, suffering, and cure.

Words and Poetry in Action

Ai, palavras, ai, palavras,
O words, o words
 que estranha potência, a vossa!
what a strange power you have!
 Ai, palavras, ai, palavras,
O words, o words
 sois de vento, ides no vento,
you are windy, you go with the wind
 . . .
 Ai, palavras, ai, palavras,
O words, o words
 mirai-vos: que sois agora?
look at yourself: what are you now?

This fragment is a free translation of Cecilia Meireles’s (1994) (1901–1964) poem *Das Palavras Aéreas* (“On Air Words”). She was a Brazilian poet who expressed life, suffering, and melancholia in a beautiful way (see Nist, 1962). Her poetry inspires us to reflect on the “talking cure” and the nature of words. When Austin (1962) introduced the idea

of doing things with words, he omitted the poetic field as one of the powerful examples of words in action. In my view, Austin contributions regarding locutionary, illocutionary, and perlocutionary action during talk could be better illustrated through poetry, in the sense that poetry is a manner of reinventing life (and dialogues), and “life is only possible if reinvented” (Meireles, 1994, p. 239) or, as suggested by Manoel de Barros (2003), another contemporary Brazilian poet, “All I do not invent is false.”

Science, Theory, Epistemology

Science. Barthes (1973) in *Le Plaisir du Texte* quoted a Nietzschean thought that all things have an “absolute movement,” and he illustrated that the tree we saw is not the tree we see one moment after. We remain calling it tree (as the same tree) because we stress the *form*. The reason is that our senses are not subtle enough to reach the “absolute movement” or the changing tree. Barthes extended the idea, pointing out that we would be scientific for an absolute lack of subtlety. This is a wonderful critical basement for our narcissistic use of sciences. “Evidence-based all,” the postmodern scientific trend for all things, should be faced with the fact that it is difficult to demonstrate the evidence of evidences, as the Portuguese philosopher Fernando Gil (1996) has recently argued.

Theory. Do you remember Freud’s quotation of Goethe’s *Faust*? “My worthy friend, gray is all theory,/And green alone Life’s golden tree” (Mephistopheles in *Faust*, part I, scene 4). In analogy to the above paragraph, our theoretical flights must be monitored to the “perpetual green of experience” (Freud, 1924, p. 149). Of course, Freud has exalted the value of experience. Today we all agree that there are not theoretical-free experiences and that it is epistemologically difficult to define experience. Subjective-constructive biases are permanent challenges.

Epistemology. How do we know what we think we know? Epistemology is an attempt to understand how we construct knowledge. We must be aware that psychoanalytic theory might produce a feeling of knowing. But the “feeling” is different from actually knowing. A

side-effect of this phenomenon may be premature interpretive actions toward the self or the other.

A related problem are the metaphors “we live by” (Lakoff and Johnson, 1980). In the field of outcomes of psychotherapy, many authors have conducted their research under the belief that psychotherapy sessions are comparable with drug treatment. Some researchers have been pointing to the abuse of the drug metaphor as a strong bias perceived through epistemological analysis. The use of epistemological analysis directed to the critical approach of our knowledge is a new breath for researchers in several fields. In epidemiology—a hard discipline—authors rarely conduct epistemological analysis. Victora et al. (1997) stressed that the construction of suitable epidemiological designs requires the analysis of conceptual frameworks. A complex model—using not only statistical premises, but including social and biological backgrounds—offers more meaningful interpretations of data. Failure to take into account the necessity of epistemological analysis “is common in the epidemiological literature and leads to underestimation of the effects of distal determinants” (Victora et al., 1997, p. 224).

Epistemology focuses on the degrees of certainty and probability of a certain field of knowledge, searching for validation and logical foundation to affirm what we affirm. Epistemology has a variety of objectives: (1) to make the paradigm researchers use to construct observations and theories explicit, (2) to make the internal and relational coherence between theories clear, (3) to determine the levels of assurance of constructs (the problem of certainty and belief), and (4) to examine the mental activity (thinking, language, inference, use of reason, use of a priori and hidden prejudices) used to construct science.

Epistemological analysis should be considered a practical tool in the construction of knowledge. The quality of research and the quality of the findings are constant considerations for researchers.

Final Remarks

Freud had an advantage over us. He did not have “psychoanalysis” before him. He permanently had to invent a new form of encounter with the other—an encounter of love and hate. The difference he introduced into medical encounters was that, in “psychoanalysis” love

and hate should be lived *and thinkable*. This means that love and hate shouldn't be acted out. His task was difficult. For preparing himself he read less of psychology and more of literature, archeology, humanities. In addition, he put himself in "psychoanalysis" with the support of a wide spectrum of correspondents. His challenge was to put Sigmund—his person—in true contact with the other.

Our Freudian inheritance may create an illusion: that "psychoanalysis" is there as a corpus able to be caught and learned. This idea could make us fall under the illusion that we don't have to permanently invent each encounter with the other. An "invention" where the "I"—not the "psychoanalyst"—is the main participant with the other.

These considerations lead to the belief that we should be closer to Freud in the "invention" of ourselves as "analysts."

I hope my invitation to travel throughout psychoanalysis the Brazilian way has led you to a better understanding of the Brazilian culture and the work of a psychoanalyst in that context—and even to enjoy some Brazilian authors.

I believe that a pluralistic and complex approach to human phenomena is crucial to the development of psychoanalysis. The interface of other disciplines with psychoanalysis is challenging and promising. In particular, philosophy, linguistics, and literature have helped me to be emotionally available to the patient. However, neurobiology, computer sciences, and theology are also important fields for future research.

The area I see as the most exciting—and in which I hope my contributions have been the most original—is the one related to the study of questions. Erotetic studies and a Socratic approach to the psychoanalyst–patient relationship continue to interest me.

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