E DREAM AS A MEANS OF UNEARTHING THE GENESIS OF PSY

MEYER SOLOMON, MD., CHICAGO

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ANALYSIS OF A SINGLE DREAM AS A MEANS OF UNEARTHING THE GENESIS OF
PSYCHOPATHIC AFFECTIONS
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THOSE of us who have devoted a certain amount of our time and energy to the study of dreams have early come to realize the value of a dream as a starting–point in the analysis of certain mental states, particularly those of an abnormal character.

Frequently, in the hopeless tangle of symptoms, complaints and disconnected facts in the history as originally obtained, especially in old-standing cases, one does not really know just where to begin, what to start with in the first efforts to struggle with the problem of the ultimate genesis and evolution of the condition which is presented to him at the particular moment. Of course, by a careful review of the patient's past life history, gone over by persistent questioning and cross-examination, one can begin with the family history and step by step trace the history of the patient from earliest childhood or infancy through the various stages and phases of activity and development up to the very moment of examination. This may at times appear quite dull, quite uninteresting and entirely unnecessary to certain patients. For this reason and also for many other reasons, which I shall not enumerate at this point it is at times well to resort to dream analysis. And in analyzing dreams it is well to remember a fact, with which I believe all psychoanalysts will agree, namely, that by a most thorough and far-reaching analysis of a SINGLE DREAM, we can, by following out to the ultimate ends the various clues which are given us and the various by-paths which offer themselves to us in the course of the analysis we can, I repeat, should we be so inclined, root up the entire life history of the dreamer. This may not be necessary in all cases. But, at any rate, if we desired so to do for scientific purposes, we could arrive at such results. In such an analysis we would, of course, first take up, individually, every portion and every element of every portion of the dream, and by means of each such lesser or greater element of the dream, we could arrive at a mass of material, a wealth of information concerning the past experiential, emotional, mental and moral life of the individual whose dream we were at the moment analyzing. In fact, one could ferret out the full life history in great detail, thus obtaining a complete autobiography leading far down into the depths of the dreamer's mental life and into the inner world of his own. With the material so obtained one could truly reconstruct the complete life history, piecemeal, until the wonderful and inspiring structure of the mental world of the dreamer would be reared, reaching far back to early childhood and perhaps even to infancy, extending so far forward as to give us a prophecy, based on the dreamer's dynamic trends and emotional trends and leanings, of the probable future, stretching forth its tentacles in all directions, and, uncovering the psychic underworld in its every part, holding up before our eyes the naked mind, in its length, its breadth and its thickness.

I am not referring here particularly to the employment of the method of hypnosis, especially as practiced by Prince, or to Freud's so-called free association (which is frequently really forced association) or Jung's word association methods. I am speaking only of analysis of the dream by ordinary conversation and introspection, in the normal waking state. Of course, were the latter method supplemented by these other methods, the results would be so much the more complete and far-reaching. I may mention, specifically, that the employment of

Freud's free association method would be helpful here in gathering information because, when employing this method, one practically forces the one being analyzed to think by analogy and by comparison, insisting that he tell you what a certain word or name or scene or experience or what not reminds him of, what it resembles, what he can compare it to, no matter how remote its connection, no matter how unrelated, how far–fetched or how silly the association may appear in his own eyes in other words, we demand that he co–operate by suspending critical selection and judgment. Although, as I say, Freud's, Jung's, Prince's and other methods may be advantageously employed, still, it seems to me, although I cannot yet state this in final or positive terms, that, at least in most cases, such an unravelment and resurrection of the past life history can be obtained by an analysis of the dream conducted in the ordinary, waking state, and the usual conversational mode of history–taking and daily oral intercourse.

It needs no repetition or elaboration to convince psychoanalysts (I use the term "psychoanalyst" in the broad, unrestricted sense of the word, including the supporters of all possible schools or standpoints or methods in psychoanalysis or mental analysis, and not limiting it to Freud's psychoanalysis) of the essential and fundamental truth of this statement. I shall, therefore, not unnecessarily lengthen this paper by endeavoring to bring forth complete evidence of the truth of this assertion.

As a matter of fact, this conclusion or generalization applies not alone to dreams but to any single element in the objective or subjective world which may be seized upon as the initial stimulus and from which, as a starting–point, association of ideas, in ordinary conversation or aided by any of the more or less experimental or artificial but valuable methods heretofore mentioned, may be begun and continued ad libitum or even ad infinitum, under the tactful guidance and judgment of the investigator. For example, if I may be permitted to tread upon the dangerous path of near–sensationalism or extremism, I may mention that were I to take even so common, so widely used, and so relatively insignificant a word as the definite article "the" as the initial stimulus, and have one of my fellowmen or fellow–women (whose full co–operation, it is assumed, I have previously obtained) give me one or more free or random word associations, and thereafter, with these newly acquired elements, continued to forge my way into the thickly wooded and unexplored recesses of the unknown and mysterious forest of the mind, I doubt not but that I should achieve the same results as if I had started upon my journey with a dream. If this be true, and I firmly believe that it is, in the case of that universally used and apparently inconsequential word "the," to which the normal person can be expected to have such a large number of associations, of varying degrees of intimacy or remoteness, how much truer is it when we have such a definite mental fact or mental state as a dream as the starting–point of our hunting expedition?

The dream gives us something tangible to start with, something near at home to the dreamer or patient, something interesting and amusing to him, something baffling and so frequently unintelligible to him, and, as a consequence, a more conscientious, earnest and wholehearted co-operation can be obtained from the person whose mental life is being investigated. Here is something vivid to him, something of personal interest to him. And so we can look to him to lend us his aid in better spirit and in fuller measure than might otherwise be obtainable.

I have been referring in my previous remarks, for the most part, to unravelment of the normal individual's life history. But my remarks are equally applicable to a mentally disturbed individual's life history and to the genesis of abnormal psychic states, particularly those to be met with in the neuroses and psychoneuroses.

So true is the generalization, indeed the truism or dictum here laid down, that, in only the psychoanalyst knows how many instances, by the analysis of a single, even the very first dream, one can arrive at the rock-bottom depth of the trouble at hand yes, at the very genesis of the condition. It is not my intention in this paper to report such cases in full detail, since the presentation of even a single such case would be too lengthy for publication in an ordinary medical or other journal, and in many instances might well go to make a good-sized book, a real autobiography of more or less interest, if not to the average reader, at least to the psychoanalyst and to the person who has undergone the psychoanalysis. Without attempting to present an elaborate history or complete analysis, but rather merely to call attention to the truth of the general problem which is being discussed in this paper, I

shall, however, mention a few definite illustrations of this sort.

A man of sixty was brought to my dispensary clinic by his wife (I say "brought" and not "accompanied" by his wife, advisedly). She accompanied him into my examining room. He had an almost complete aphonia, spoke hoarsely and in a whisper and presented all the signs of abductor laryngeal paralysis; added to which there was a partial hemiplegia of the right side involving the upper and lower extremities, but not the face or any of the cranial nerves other than that supplying the right laryngeal abductor. I shall not give any other points in the history except that this paralysis was of four months' duration, there was some resistance to movements at the elbow and knee, but Babinski and other indications of a central organic lesion were absent. The results of the rest of the physical examination need not be mentioned except that the patient presented evidences of arteriosclerosis. The patient was of dull mentality, meek humble and subservient; he was much below par mentally (I did not put him through any special intelligence tests), had little information to offer, constantly resorted to "I don't know" as a reply, and could co-operate but little. I did, however, obtain the important bit of information that seventeen years ago he had had an almost complete aphonia of several weeks' duration and that one day, while on board ship, he became seasick, vomited, became frightened, went to his room, and suddenly his voice returned to him. So sudden was the transformation that many of his fellow-passengers insisted that he had been deceiving them and had purposely simulated the condition he had previously presented. The case was one of hysteria, the patient presenting at the time of my examination signs of abductor laryngeal paralysis (laryngological examination disclosed a right-sided abductor palsy) and right-sided partial hemiplegia.

For the next two visits the wife accompanied, or rather, brought the patient to the clinic and I could get but little information and consequently progressed but little. I asked him, in her presence, to come alone the next time which he did. The description of the onset of the attack, which was furnished me on his previous visits, proved the hysterical nature of the condition: he had suddenly been attacked by nausea and vomiting, fell to the floor, lay there, more or less unconscious (as he described it) for five or ten or more minutes, was assisted to his feet, went to his bed with practically no assistance, a few hours later found that he could speak little more than above a whisper, and in another few hours or more his right side became weak and failed him. He had insisted that the onset came on suddenly. He had denied any quarrels or trouble at home. Nothing could be obtained from him as to his thoughts just prior to the attack or as to any special emotional shocks.

On his fourth visit I asked him to tell me any dream he had had recently and which had made an impression upon him. He could give me no aid. Nothing came to mind. I asked him if he had dreamed the night before, and he told me he had had a dream the afternoon of the preceding day, during an afternoon nap. Here is the dream: He found himself struggling with a tremendous snake, the upper part of which was in human form, the features being very hazy and not at all recalled. The snake was vigorously endeavoring to enwrap itself about him and to strangle him, and he was desperately and fiercely struggling to defend himself against it and to free himself from it and yet he could not fight it off. In desperation and in fear he cried aloud for help. This was the end of the dream, for, at this point, members of his family came rushing toward him to inquire what was wrong with him, and due partly to shock and his own activity in the dream, and partly perhaps to the noise of the footsteps and of the conversation of those who came running toward him to inquire into the cause of his distressful cries, he awoke.

The thoughts and reveries just preceding the dream and the thoughts and experiences during the morning preceding the dream, although the true inciters of the dream, and although concerned with the central figure (his wife) in this little drama, need not be detailed since the dream has a wider and more deeply arising significance.

I could not learn definitely from him whether the series of associated thoughts turned first from his wife to his troubles with her, to her attitude toward him, and then to her resemblance in this respect (her nagging, pestering persistence and actual persecution of him) to a snake which is endeavoring to enwrap itself about him, to strangle him, to withdraw from him his very life's blood, etc. This may or may not have been the line of associations just preceding the dream.

He had no idea as to what the dream meant. Using free association, in ordinary face-to-face conversation, I asked him what "snake" reminded him of. The association came in a moment. He smiled, became embarrassed, said it was foolish of him to tell me this, but it reminded him of his wife. He had always looked upon his wife as a snake in human form. He had frequently called her "snake" because of her conduct toward him. She had wound herself about his life in snake-like fashion.

And then came the story of their troubles. This was his second wife. She was fifteen years his junior. He was meek, feeble, of weak will-power, without initiative. She was domineering. Although his wife never told him so openly and in so many words, he felt convinced that the trouble had begun more or less because his wife's sexual libido was not satisfied in her sexual relations with him. He admits that she is a passionate woman, her sexual libido was of such strength that he, much older than she, and not too strong physically, could but little gratify her. The first complaints and the sole trouble which appeared on the surface were financial he barely made a living and she complained thereat continually, bitterly and tyrannically. It seems that her complaint in this direction was justified. It is difficult to determine just what role her lack of sexual gratification played whether it only acted as stirring up the embers of dissatisfaction (with his weekly earnings) which already existed, or whether it was the basic factor, led to her dissatisfaction with her matrimonial choice, and caused her to seek some more or less valid cause for complaint, in that way permitting her, more or less consciously, to transfer her dissatisfaction and discontent from the lack of sexual gratification to the hard pressed financial condition (which perhaps she might, for that matter, have been willing to endure, did she but obtain the full gratification of her sexual craving). At any rate, both of these factors played their role in causing domestic disagreement, one factor being openly acknowledged as the cause by his wife, the other factor never mentioned by her, but believed by him to be an important accessory, if not the main, fundamental and primary source of the trouble. His wife, using his poor earning capacity as a weapon, and with the demand for "more money" as her battle-cry, carried on a campaign of complaint, grumbling, nagging, fault-finding, insult and abuse, but little short of persecution, making conditions wretched and miserable at home. Things at length became quite unbearable to him so much so that, feeble in willpower and lacking in initiative as he was and is, he was compelled to leave home and live with his aunt, since his wife had practically deserted him. Although she had sold out the furniture and the rest of the furnishings of the home, and had pocketed the money thus received, she repeatedly called at his aunt's home for no other purpose than to force him to pay her sums of money for her weekly maintenance. On each such visit she would act the tyrant, would storm and rage furiously, would subject him to stinging rebukes and deliver biting tongue-lashings, causing him in consequence to be much upset and nervous the rest of the day. The very morning on which he had had the attack, which was followed by his present trouble (partial aphonia and partial hemiplegia) his wife had paid him one of these unusually stormy and noisy, and, to say the least, unwelcome visits. She had carried the attack to such a point that our patient became so emotionally upset (he is a harmless, emotional, kindly, unassuming and indifferent sort of old fellow) that he suddenly was attacked with nausea and vomiting, and, frightened, fell to the floor, with the consequences above detailed. I need not go further into the history and analysis of this case, but the story thus far elicited is more than sufficient to show that here we have a specific instance in which, by the analysis of a single dream, we have arrived at the genesis of an hysterical paralytic syndrome of four months' duration. The analysis took but a few minutes. It may be mentioned, in parentheses, that a full knowledge of the cause of the condition did not lead to a disappearance of the palsy. In other words, as we all know, knowledge per se does not lead to action or to the assertion or development of the will-power. I may say, also, that the events here related were not suppressed or repressed, for, as soon as the question of his wife was taken up, the patient admitted that it was she who was the real cause of his present conditions, and he thereupon detailed the story above related. He assured me that he had always been fully aware that it was she who had brought about his present condition, although, of course, he did not know whether he had had an hysterical, apoplectic or other sort of attack. In fact he believed his condition was permanent and incurable especially since he had been treated at various neurological clinics for many weeks past without the slightest improvement or progress.

Were we to follow up this history we could unearth the full life history of this patient, including the genesis of his early attack of aphonia. But I deem this unnecessary and inadvisable in this paper, as mentioned previously.

Here, then, we have a definite case in which by the analysis of a single and incidentally the first dream we have arrived at the genesis of the psychoneurotic disorder.

From this same standpoint I have studied another case, a married woman of twenty-nine, with marked neurasthenic and hysterical symptoms (including astasia-abasia, anesthesias, palpitation of the heart, throbbing sensations in the stomach and a great many other symptoms). This case I studied for upwards of four months, with almost daily visits to the hospital where she was being cared for. I made quite an intensive study of her dream life and of her past life history, and I find that had I taken the very first dream which I obtained from her and conducted a thorough analysis with this dream as my first mile-post, I would have arrived at a full genesis of the condition, which was of ten years' duration. In this case, also, I must repeat, there was no indication of repression, the patient having always understood very well the origin and cause of her condition. Here, too, we find that the knowledge alone did not lead to her recovery. This case I shall report in detail at a later date.

In this connection, I cannot keep from reciting the dream of a young girl of twelve which I had the good fortune to study. She came to me complaining about her throat. There was something dry, "a sticking" in her throat. She did not know what it was. Would I look at her throat? I found nothing abnormal, and was about to dismiss her when I observed that her hands were bluish. I felt them. They were cold. I thought at once of probable heart disease. I was soon informed that she had heart disease. She had been told so by other doctors. This proved to be the case, as I learned on examining her.

Being keenly interested in this subject of dreams, I wondered whether, if she were subject to periods of cardiac decompensation of varying degree, she did not have dreams of a terrifying nature (about burglars, robbery and the like), because of embarrassment of breathing during sleep, resulting from her cardiac insufficiency and consequent circulatory and respiratory disturbance. I asked her whether she had been dreaming much of late. She told me she had had a dream the preceding night. What was it? I inquired.

She had dreamed that she had died. Her mother had put her in a coffin, carried her to the cemetery and then proceeded to bury her. Her mother had first forced something into her mouth (it seemed to be a whitish powder), and then lowered her into the grave and filled the grave with dirt. That is all that she could remember.

I shall not enter into a complete analysis or interpretation of this dream. There is no doubt, however, to every psychoanalyst who has devoted his attention to dreams, that the analysis of such a dream should prove most interesting. It is also apparent that by taking up the various elements of the dream and following them untiringly along the various trails and ramifications which lead on in various directions, one could unmask the entire life history of this twelve–year–old girl.

I wish, however, to direct the reader's attention to only one aspect of this dream the death of the dreamer. She denied that she feared death or that she thought of death because of her heart disease or from any other cause. I next inquired: "Do you wish or have you ever wished you were dead?" The reaction of the girl was immediate and intense. She stood frightened, embarrassed; her eyelids twitched convulsively in rapid succession, her face gradually assumed a suppressed crying expression, tears came to her eyes, they soon flowed freely and rolled down her cheeks; she sobbed, and, through her tears, she uttered, almost inarticulately, the one word, "Yes." A convulsive, inspiratory grunt, a bashful, receding, turning away of the head and body, a raising of the hands to cover her face and hide her tears, and hasty, running steps to get away, while murmuring audibly "Let me go away," followed rapidly one upon the other. I gently seized her hand, calmed and reassured her. And, through sobs and tears, in almost inaudible tones, in starts and spurts, and reluctantly replying to questions which were forced upon her, producing replies which were literally drawn from her against her will, she told me this little story: A little boy cousin of hers, three years her junior, had begun school two years or so later than she, and yet, in spite of this handicap, this little relative had outstripped her in school, he being now in a higher grade than she herself was. She would not be so much concerned or worried about this not–to–be–proud–of performance, had not the boy's mother that week visited her home and there, in the presence of other people, talked considerably

about her boy's progress in school, his rapid advance as compared with that of our little dreamer, her relative stupidity and backwardness. And so this boy's mother had continued for some time in the same strain. This caused our little girl to feel much embarrassed in fact, ashamed and mortified. She had felt that way for several days past, it had made her cry, had made her feel miserable and unhappy; so much so that she had wished she were dead. I shall not continue this analysis further. But it is plainly seen that here too, by a single dream, we have come upon life–experiences, viewpoints and mental material which affords us efficient and sufficient weapons to boldly attack the fortress of her full life history, her mental qualities, her trends, her psychic depth, her mental makeup in its entirety, in its every dimension.

It is interesting to note that on the morning following the experience which I had with this child, she came to see me a second time, and, on my examining her throat, it presented the typical picture of bilateral tonsillitis, the final result of the initial sticking sensation in her throat, which she had experienced the day before. After taking a culture from her throat as a matter of routine to exclude a possible diphtheria, the patient, greatly disturbed because of her newly–discovered trouble, burst forth into bitter tears, and, still sobbing, rushed abruptly from the room.

A week later, when I saw her again, she had regained her emotional equilibrium and we reviewed her dream and its analysis without any special signs of emotional disturbance.

Very interesting, also, was my experience about a week following this when, casually reciting this little girl's dream, its significance and her conduct, to an old lady whom I know very well, I found that she too was presenting all the signs of emotional upset, for, as I proceeded with my recital, tears gradually came to her eyes, her face assumed a suppressed crying expression, she tried to smile through her tears, and finally, unable to control her emotions, she broke out into a free and unrestrained weeping spell, following which I learned from her that the recital of this girl's condition, her dream and its meaning, recalled to her mind her darling daughter, a noble girl of sixteen years of age, who had died some fifteen years ago, after a long period of incapacitation and a miserable existence brought on by tonsillitis, chorea, rheumatism and, finally, heart disease, with all the extreme signs and symptoms of broken cardiac and renal compensation. Here, then, I had touched another complex, which, if followed up, would lead me into the innermost depths and recesses of this old lady's soul–life, into the holiest of holies of her mental life.

The writer will be pardoned for not here giving fuller histories, or for not carrying out the analyses to their ultimate goals, or for not giving the interpretations of the two dreams presented. That was not the primary object of this communication.

I wish, in conclusion, to repeat that through the conscientious and most far-reaching analysis of a single dream, or, in fact, of a single element of a dream or a single element or stimulus in the objective or subjective world, one may, at least not infrequently, unearth the full life history of normal or abnormal individuals, and the genesis and evolution of psychopathic affections.

The reader may justly inquire why the analyst should resort to dream analysis instead of taking the history of the case in the usual way. In all cases the patient should be permitted to tell her story in her own way. This method of procedure, with cross questioning, may and should indeed be sufficient to unravel the case for us in most cases. But if we find that we have not gained the confidence of the patient and have not that condition of being en rapport with the patient which is essential for progress and success in the analysis, one may resort to dream analysis, not so much for the purpose of following the royal road to what the Freudian school calls "the unconscious," but rather with the object of obtaining the confidence of the patient and of having something definite to start with.