

The psychoanalytic voyage of a breast-cancer patient

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Abstract

The author points out the importance of Psychic reality in breast cancer patients and the fact that psychological support is essential, though many times neglected, to these patients.

A case is presented, in which the patient takes a psychoanalytic voyage, revealing her fears, analysing her way to see cancer, death and life.

Key-words: *Psychic reality; Breast cancer; Psychological support.*

INTRODUCTION

I have been interested for a number of years in the role of the psychosoma in the psychoanalytic situation and I should like to explore with you today the role that the psychoanalyst may play in exploring the conscious anxieties and the unconscious fantasies of breast cancer patients, and to discuss the extent to which psychological treatment may augment the success of the medical and physiological care of the cancer patient.

My experience in this area is based on a number of breast cancer patients who have come to me for psychotherapy, including three patients who were in full analysis for a number of years. It is a notable fact that, considering the number of people in the population who suffer from cancer, relatively few cancer patients seek the aid of psychoanalysis or psychiatry. This may suggest a reluctance on the part of cancer patients to undertake psychotherapeutic treatment. Those who have come to me for treatment were usually motivated by having read books or papers of mine on psychosomatic issues (though not specifically on cancer).

It is evident that the mutilating treatments imposed by breast cancer (radiation, chemotherapy, mastectomy, breast reconstruction) will invariably arouse considerable psychological distress in the affected woman: this includes the loss of her feeling of bodily integrity, disturbance in her self image and her sense of subjective identity as well as perturbation in her feeling of sexual identity. With the loss of the breast the essential symbol of femininity is felt to be destroyed. As one of my analysands expressed it, during our preliminary interviews in

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which she recounted that she had suffered both mastectomy and hysterectomy, "I am no longer a real woman. Am I still a person?". To the threat of death are therefore added feelings of confusion in relation to others as well as anxious feelings concerning sexual and love relations.

Thus, in addition to disturbance in one's sense of subjective identity, the patient often feels that her sexual life is in jeopardy. The loss of her breast will have inevitable repercussions on her relationship to husband or lover and may affect sexual desire on the part of either the afflicted patient or her partner. Bygone fears and inhibitions around sexual and love relationships therefore tend to resurface following a mastectomy. It is understandable that the life partner too will experience considerable anguish when faced with her illness and mutilation – and at the same time the shadow of death tends to be aroused in the partner as well. These combined factors may well mitigate against the sexual pleasure of the couple.

Furthermore, the loss of the breast tends to reactivate other losses in the patient's past-separations, abandonments, deaths and the pain of mourning. Artificial breast reconstruction, while avoiding the horror of what these patients often refer to as a "hole" in their bodies, does not efface the mutilation that has taken place.

In addition, cure is never definitive since no satisfactory explanation of the cause of cancer has yet been discovered. Thus the afflicted patient can never assume that the "cause" has

been eradicated. The oncologist also cannot state with certainty that the cancer will not recur. One further source of psychic pain lies in the fact that the lost breast is often experienced by the patient as the price she had to pay to obtain a so-called "cure". Sometimes patients readily accept that other organs (uterus, ovaries) be removed preventively, as though this too were a sacrificial offering to a terrible divinity.

When the patient is a mother, her breast cancer complicates her family life, for her children are inevitably anxious and frightened for their mother's life and the mother is equally anxious to avoid traumatizing her children, and will frequently try to hide her own fear and pain from them.

An important aspect of psychoanalytic work that I have often observed with breast cancer patients is the revelation of the nature of their tie to their own mothers. This is frequently discovered to be a highly disturbed relationship. Since cancer is envisioned as a deathlike enemy in the interior of one's own body, perhaps it is more readily equated with a fantasised "internal mother" who is attacking her daughter from the inside.

Certain experienced and competent cancerologists, while they are well aware of the patient's physical pain and deal admirably with the medical and surgical problems to be solved, are reported by their patients to have appeared relatively unaware of the immense psychic pain that the women are experiencing. A small

number, on the contrary, show interest in cooperating with the psychoanalytic therapists who are working with breast cancer patients. It is of course obvious that the psychoanalyst cannot cure the patient's cancer, but by exploring and putting into words the nature of the projections for which the cancer becomes the focus, as well as the unconscious tendency of many cancer patients to give in to death, there is much evidence to support the contention that when the patient is helped both somatically and psychically, her chances of survival are notably increased.

In the words of Harold Searles (speaking of therapy with cancer patients): "the therapist may well become the one person in the patient's life who dares to bridge the isolation that is shutting the patient off from the world of people and making the patient feel non-human".

I should like now to illustrate some of the above themes with a clinical vignette:

Sorel Liebermann rang me in June 1994, saying she had seen me a couple times six years ago and that I had directed her to a male therapist since we had both concluded that she might feel more comfortable with a man in view of what appeared to be a highly ambivalent relationship with her mother. She announced on the phone that she had already terminated her analysis with Dr. A but was in a state of overwhelming anxiety and was most insistent that she now needed

to see me. I remembered her distinctly and recalled my impression of an intelligent young woman suffering from hypochondriacal concerns of almost psychotic proportions. As I listened to her pleading for an appointment I was also aware of feeling vaguely guilty for not having accepted her in analysis six years ago. Perhaps too, I was touched by her having kept a helpful image of me during these years. She also asked on the phone if she might talk to me in English since she felt more "at home" in this language than in French.

The following week I opened the door of my waiting room to a very slim woman in her early forties, elegantly dressed in a well-cut trouser suit; I noticed that she had beautiful black curly hair which surprised me since I remembered her differently. Here is a brief account of our interview.

SL: When I first came to see you I was always afraid of falling ill. Do you remember? You sent me to Dr. A who was wonderfully kind and helped me a lot with my marriage problems. But most of my sessions turned around my constant terror of illness – I had tests for tuberculosis, syphilis, AIDS and many examinations for different forms of cancer. I had no reason to believe that I could have contracted any of these illnesses and of course the tests were always negative, but the anguish never left me – particularly the fear of cancer. As the years went by Dr. A told me he thought my conviction that I had cancer was a fantasy that I had to use to hurt myself. Dr. A has now moved

away from Paris, so we agreed to terminate our work but he advised me to continue – and suggested that it might be helpful to work with a woman. (There was a short pause during which Sorel gazed at me in an almost accusatory way before continuing). Well anyway, the bad news is that now I do have cancer! A breast cancer of a very vicious kind. After endless treatments with radiation "they" finally decided to remove my right breast – but the cancer continues to spread. I've had massive doses of chemotherapy since then, to prevent further metastases. And what this does to me is unbearable. I cannot face myself as I stare into my mirror every morning. (Sorel's eyes filled with tears as she slowly removed the black curly wig – revealing total baldness. I felt close to tears myself as I tried to identify with what it must mean to Sorel, not only to face the fear of death but also to face her reflection in the mirror every morning with a missing breast and not a strand of hair). Sorel continued:

SL: In a couple of months I must go into a sterile room for 3 weeks while they remove my bone marrow and sterilize it. I'm more terrified of this project than I was of the mastectomy ... I wish it were all over with! (This sounded almost like a death wish and I began to feel afraid for her).

JM: Over with – that is?

SL: Well I'm going to die aren't I?

JM: Everyone's going to die, but it's as though you're already giving in to death.

SL: It's the idea of this sterile room

where people can only talk to me through glass walls that's so horrible. I can't bear to think of it. Perhaps I shall die before that. (I was very moved by Sorel's story but at the same time astonished that, although she was extremely tense, she seemed to show little determination to fight for her life. I asked her what help she was seeking from me and she said "Well this sterile room – I can't face it". She then broke off suddenly and said "Do you think I'm going to die?". I told her that I could not predict such an event).

SL: But I always knew I would die of cancer. You see I've been thinking about it for more than twenty-five years. I was so terrified of dying of cancer, that of course it was bound to happen.

JM: The fact that you were always afraid of cancer may have very little to do with your present illness.

SL: You don't think I caused it?

JM: It could be a rather omnipotent way of thinking if we believed that everything we imagine is bound to come true.

SL: Then why have I always been so convinced that I would die this way? (Long pause). I'm worrying about how my children will get on without me.

JM: You speak as though you have decided that you will die of this cancer. What have your doctors told you?

SL: Oh, I leave everything in the hands of Dr. D. He insists that he has had great success with sterilizing the bone marrow.

(I noted that here again she spoke as though everything were out of her

own hands – as though she must accept her death through cancer as an inevitable fate. I once more felt an upsurge of immense concern for Sorel and although I had very little available time decided that I would do whatever I could to help her. Towards the end of our first interview Sorel asked if she might see me everyday. I explained that within the next month I would try to arrange 4 sessions a week on a regular basis and meanwhile gave her two appointments for the coming week).

SL: I'm so relieved you can see me – but what shall I do without your help during the 3 weeks in the sterile room?

JM: (I replied calmly). We will continue our sessions by telephone.

SL: Oh, that changes everything!

During our next two interviews I learned something of Sorel's background. She was born in Vienna to a well-to-do Jewish family who fled from Austria during the holocaust and settled in France. Sorel, along with her two year's younger sister and four year's younger brother were, as she put it, "Brought up by a team of housemaids" ... "My mother stayed in bed until late everyday. We had to file by and wish her good morning. Once out of bed she was always busy with social events and very occupied with her appearance. She never once gave us a meal or shared a meal with us at home. As for my father he thought only of his business and even at home he was constantly hidden behind his newspaper".

I commented that she must have felt rather lonely for parental support

and she replied, "Well I suppose it wasn't a very happy family life, but I didn't question it – although that may have had something to do with my getting married so young".

At the next session Sorel gave me an account of her first marriage when she was 17, to a man who was apparently brutal, both physically and verbally, with her. Her family was disparaging about Sorel's choice of husband but it seems that neither parent tried to dissuade her or discover the reasons for her precipitation into marriage. Here is an abbreviated account of the session:

SL: Michael only married me for my money; I realized that later. During the first weeks of our marriage he suddenly burst out with: "I must tell you that you're going to die of cancer – just like my mother did". Of course I believed him immediately – I'd always known that death was just around the corner but I didn't know how I would die – he had named it for me!

Sorel found the courage to leave this man after some five years of unhappiness and some years later she married Stanley Liebermann, the "right person" – somebody the family approved of from every point of view. Stanley is a successful business man and directs an important national enterprise in France but, like her father, is rarely present. Sorel added that even though they were a peaceful and civilized couple Stanley seemed unaware of her existence as a person – at least until the cancer was diagnosed. She added, almost as though it were an after-thought, that

Stanley also suffered from severe sexual impotence. The couple has two children and Sorel tries to be a more adequate mother than her own mother – but she mentioned in passing that she did not breast feed either of her children because the idea aroused feelings of disgust in her.

I also learned during these initial interviews that Sorel suffered from many dirt and germ phobias, as well as a multitude of food phobias (in fact there are many common foods that she has never tasted in her life). In addition, whatever she eats makes her feel sick; she vomits after almost every meal and has done so ever since she was a small child.

One further disquieting factor was that having obtained a university degree in the Arts Faculty, Sorel seemed never to have felt the urge to engage in any professional work, though she found immense pleasure in reading informative books. Apart from her concern for her two children, reading and running her household efficiently, her preoccupation with death seemed to occupy a major place in her thoughts.

In addition to her fear of dying, Sorel's array of somatopsychic symptoms (cyclic vomiting, anorexia, food phobias, obsessional type washing rituals, physical rather than psychological reactions to fantasies of dirt, disease and toxic substances, etc.) made me want to understand more about her hidden fantasy life and any possible link with the fantasies around her cancer history. I took the initiative of discussing Sorel's prog-

nosis with one of the treating doctors whom I knew and he said that in his opinion she couldn't count on another six months of life. Along with this alarming prediction, Sorel's own preoccupation with dying and death made me want to help her and, hopefully, draw her into the side of life.

In the few sessions prior to the dreaded bone-marrow transplant we were able to uncover a memory of her having been sent alone to a clinic in Switzerland at the age of three in order to "gain weight". She recalled the terrifying loneliness she experienced at that time in a foreign land where people spoke a foreign language and I proposed that it must have felt like being incarcerated in a "sterile" atmosphere and unable to communicate with the outside world except through a "glass wall". My linking this memory to the frightening prospect of the sterilized room had a considerable impact in mitigating Sorel's terror of the marrow transplant. As the time drew near for her to go into the cancer clinic I acted in a way that I would not normally do, by encouraging her to plan how best to prepare herself for the three weeks of solitude in her glass cell ... the books, paper, pencils and music that she might take with her, and so on. It occurred to me that I was behaving like the mother of a school child – in fact in much the same way that I used to help my own children make preparations before going to "holiday camp". I realized too that Sorel was less able to care for herself in this way than my children had been and I reflected on the fact that

her own mother had apparently been unable to take this kind of interest in Sorel's welfare. As a result of Sorel's and my combined efforts, her overwhelming fear of the sterile room became manageable. As she left my consulting room on her way to the hospital clinic she said:

SL: So – we won't see each other for 3 weeks... may I... er... may I give you a kiss? (I gave her a big hug and she kissed me on both cheeks, saying "Thank you").

You may survive – but not live:

During her stay in the Cancer Clinic we continued our sessions by telephone with Sorel carefully noting down her dreams, thoughts and fantasies, as I had suggested. One important idea that emerged during this period was that Sorel was able, for the first time, to formulate her conviction that she was an unwanted baby and that even as a very small child she did everything in her power not to draw attention to herself, for fear of what she interpreted as her mother's death wishes toward her. I said: "In other words you believed you could survive on condition that you did not truly live". "Yes that's exactly so! As a little girl I always tried to pass unnoticed; I was very careful not to talk loudly or act in too lively a fashion". "So the "sterilization" began very early?" I commented. From there on we both began to study Sorel's way of stifling any positive emotions or any libidinally-tinged activities. "I thought it was wrong to feel too much liveliness about anything", she concluded.

The homosexual bond:

In the months that followed Sorel brought a number of dreams with manifest homosexual content which enabled us to explore any awareness of homosexual wishes to women friends in her life and eventually to discover that she invested me as the mother from whom she should receive the confirmation of her value not only as a person but also as a woman. At one session Sorel seemed unwilling to leave the consulting room and then said, "I want to tell you that I love you" – I have never in my life said "I love you" to another human being. At the following day's session Sorel referred to her parting words and her concern that this might imply sexual fantasies towards me. This led us to discussing the connection as well as the difference between erotic feelings and love feelings. Sorel then realized that she had never experienced sexual desire coupled with feelings of love for anyone, man or woman, but that the dreams we had analyzed during her weeks in the sterile cage, in which I had interpreted her tiny-girl wishes to possess the mother – analyst's sexual secrets and contents and thus become a woman, had enabled her to accept that it was permissible to have love feelings without fear of being rejected or fear of the accompanying erotic fantasies. In sum, it became clear that Sorel had failed to integrate the primary homosexuality of every little girl towards her mother; on the contrary, she had felt rejected and disliked by her mother and totally ignored by her father.

Cancer as destiny:

The second predominating theme during the first year of our analytic voyage was Sorel's conviction that she herself had "caused" her cancer and must therefore accept its death-like connotation. I was able to show her that she did not appear to regard her cancer as an illness but as a destiny over which she had no control. On one occasion she said "Oh, but that's absolutely true I don't have cancer – I am cancer!".

Extensive exploration of her belief that she had not been desired and her enduring feelings of guilt over being alive allowed me to propose that she believed she should have died – but instead she went on living and therefore felt she had committed a crime. This idea struck her with considerable force as she recalled that she had experienced, throughout her childhood, deep feelings of guilt for some unknown crime. (This aspect of Sorel's psychic suffering reminded me of the work of Piera Aulagnier on the factors that contribute to psychotic psychic structure and the individual's conviction of having lived when the parents, consciously or unconsciously, wished the child to be non-existent – which Aulagnier referred to as "the crime of *lèse-Thanatos*". This also brings to mind my concept of "psychosomatosis" as being closely linked to psychosis even though there are few outward signs of similarity between the two structures).

As our work proceeded Sorel began to piece together many memories in which she felt obliged to destroy

any thought, feeling or activity that might betray a guilty wish to be – and to feel – truly alive. By "playing dead" she hoped to conform to what she felt was expected of her. She had created – in Winnicott's terms – a perfect "false self", while remaining unaware of the fact that she didn't ever feel quite real. Towards the end of our first year of work she was constantly amazed to discover that she did not know who she really was nor what she really desired for herself, and that her continuing psychoanalytic adventure must be devoted to discovering her true identity.

The "toxic" mother:

I shall now summarize briefly Sorel's history of eating and vomiting.

SL: My mother says she breast-fed me according to the rules: Nanny brought "the baby" at the required hour and took "it" away when feeding time was up. (I was reminded at this point of Winnicott's statement that a baby's primary need is not food but to be fed by someone who loves feeding him). As she grew to be a toddler Sorel remembers that she and her sister ate their meals with Nanny, a rather severe and rigid woman.

SL: Although I always felt sick on the supposedly healthy food we were given – I would not have dared to vomit in Nanny's presence. I had to hide to do that. But on Nanny's day off Mother regularly took us to the coffee shop to eat and I always vomited immediately afterwards in her presence.

Then when Sorel reached school

age she was allowed to eat with the cook. Orders were that Sorel was to have a bowl of porridge and a soft-boiled egg every morning before leaving for school. Sorel remembered "Cook" as a warm, loving woman, and although Sorel had no pleasure in eating this monotonous breakfast, she looked forward to the moment of affectionate warmth with Cook – and during those years the vomiting ceased. Nowever, her anorexia, the continual sensation of feeling sick to her stomach and the vomiting all returned when Cook left the household.

When I pointed out to Sorel that her anorexia and her cyclic vomiting resembled a *somatic* expression of a *psychic* wish to eject anything connected with the image of her mother as someone who rejected her very existence, Sorel slowly came round to expressing the idea that her mother had been a poisonous influence throughout her life and that this was the reason she ate so little – and had to vomit up whatever she did manage to eat. It was during our exploration of the fantasy of "mother as a toxic substance" that her present-day vomiting ceased.

A play-space is created:

In the months that followed, Sorel became aware that she never allowed herself to imagine anything that was not "real" as she put it. In other words, not only her emotional life but also her fantasy-life was severely restricted. In an attempt to break through Sorel's alexithymic shell and create a play-space for her feelings and fantasies, I asked her one day if she

could make an image of her cancer – its form, its colour or its movement – and to my surprise she said, "I can see it! It rises up like a black witch – and then (she put out her hands as though to ward off a dangerous vision), Oh! she's running all over the place like poisonous black glue". I said "Could you draw it?" "No. I'm unable to draw but maybe I could write what I'm imagining." She added "You know I have a computer but I've never touched it. I didn't know what I would use it for." I encouraged her to learn to use it and try writing down any thoughts that came into her mind.

Following on the fantasy of the black witch and Sorel's feeling of terror at this vision, we uncovered other fantasies that led us to establish that, behind her conforming exterior, Sorel had been an angry as well as a very depressed little girl. She had given up, almost from infancy, any idea that life could be enjoyed; anything libidinally tinged, any spontaneous joy in living, had to be eliminated.

Sorel was immensely stimulated by our attempts to put into words her early childhood feelings, and became acutely aware of her lifelong attempts to "freeze" her emotions. The only allowed affects were those of panic in face of her constant preoccupation with death. As she put it herself, "I was not aware of wanting to live – all my efforts were directed to avoiding death."

Among my active attempts to encourage Sorel to invest her life with meaning was my asking her why, in her large Paris home, she had no "work

space" of her own; she thereupon set about arranging to create such a space and subsequently told her husband and children that they were not to break into her privacy unless invited, since she "needed time to think".

Some weeks later, during the summer vacation Sorel, sent me a series of faxes of the notes she was writing on her computer.

I shall now let Sorel recount in her own words the reconstruction she made of her babyhood one year after our psychoanalytic voyage began. Out of the profusion of pages she sent me I have selected certain passages to illustrate the on-going psychoanalytic process. (I should add that Sorel spontaneously gave me permission to use her notes "In any way that might be helpful to other analysts dealing with patients with breast cancer.").

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The child of cancer

I was a very small baby, lying in my bed and suffering – oh! so much. Nobody wanted this little baby who was always crying and crying. "We do not want you" they said, "We do not look at you, we just let you suffer. We do not *love* you, but we feed you because we are decent people". But love, no love for this little baby. Nobody looked into the eyes of this baby or held her gaze. The baby's eyes fell into empty holes. And so the fear became a black mass, invading every pore of the little baby. And the black mass was *always there*, never leaving

the baby for a single moment. She was a bad baby that had to be punished. When she was learning to walk they noticed that the bad baby had developed a strange limb (JM: Note, this was a misprint for "limp" which we were able to analyze some weeks later as referring to her fantasy that if she had been a boy she might have been more acceptable to her mother). Therefore the little girl was put into a cast at this very young age. Poor little baby girl – now she cannot move anymore. But the baby is convinced that she deserves punishment and from this moment on she is frightened to move. She wants to be punished and at the same time wants everybody to notice it because of this strange limb ("limp") with no medical reason. She feels totally miserable and afraid, and the black mass is always there, a mass of black fear that never leaves her and paralyzes her completely. Now the little girl has to fight death from everywhere around her. If she is not terribly careful she will die. There is nobody to care for her, only the black mass. She is even afraid to eat because the food comes from the enemy and food becomes the enemy. She vomits up all her food because it is poisoned. She is so totally alone that she must look after herself, but infants do not know how to do this. They just wait for the pain, the misery and the fear to go away. These are all part of the black mass that is invading every centimeter of the baby's body – and slowly it becomes a crab – a cancer – except that the baby has no name for it. She has never been

taught how to trust her feelings and all she can do is to keep on swimming in a black hole invaded by a black mass. *The baby is in great great pain.*

Then the toddler becomes a little girl, still closed off and frightened of everything around her. And she gets a baby sister, a lovely, smiling, fat little sister who captures everybody's heart. So now the tiny space the little girl had is lost – she falls ill and gets thinner and thinner and although she is so little she is sent to a horrible, horrible place, away from her family surroundings. A frightening sterilized space in Switzerland.

Then the black fear becomes even stronger – like macadam, with a life of its own. Black glue invades every pore of the little girl's body and mind. The frightened baby changed outwardly, became a little girl, a big girl, a woman, a mother, but inside she was still the little baby Sorel invaded by black glue; she trusted nobody and nobody could help her... Sorel screamed and fell asleep. Nobody, nobody wanted her, only the black mass which totally absorbed her *fear and terror* – but as yet it had no name".

Cancer becomes an illness:

During the summer vacation I allowed Sorel to continue sessions by telephone to the extent that this was possible for both of us. After her return many sessions were spent on imagining how she experienced her bodily self and one day I said to her:

JM: You talk of yourself as though you were a disembodied mind.

SL: I knew I had a body but I never

actually owned it – and in fact I know realize that I did everything I could to forget its existence.

JM: It seems you can only have a body on condition that it suffers and threatens you with death through cancer. (In view of the fact that Sorel continued to talk as though she was in no way responsible for caring for her cancer I added): "Do you own this cancer or does it belong to someone else?"

SL: (After a long silence) "It's strange to hear you say that. I haven't got cancer – *I am* cancer. Like you once said I have always regarded my cancer as a destiny, not an illness".

JM: And yet you were a strong baby with a strong will to survive.

SL: It's strange but I've never thought of myself as a survivor only a drop-out that deserved to die.

Shortly after this session Sorel brought me the following notes with the title:

Cancer: an illness

"For many, many years, I was Cancer: for that was the name I gave to my fear. When I was a child, I was just afraid; I was born afraid and I never, in my whole life, stopped being afraid. Afraid of what? of death. Death seemed possible at any moment because I carried it inside me – visible only to myself, but with a total certainty that it was there...Every day of my life was spent fighting death because I was not supposed to live. Fighting death took up all my energy and my will to live – a perma-

ment combat against the total invading poison – my mother, my cancer.

My cancer is my mother. She eats me up *alive* and infests my whole body with her venom... Fighting death was my attempt to get away from her grip: she was never with me, and yet, by not being there when I most needed a mother, she was able to do so much harm. She became the ultimate poison, terrifying but invisible... I must get this Cancer-mother out of my system and body, out of my mind and soul.

When I married for the first time, I married another Cancer-parent; he cursed me and named my terror. I did not deserve better than cancer. (I just noticed that I wrote "I do not" instead of "I did not". Yet now I feel I do not deserve the cancer anymore).

I must have been, at birth, a strong baby with strong desires which then were transformed into the battle with death. From the time I was an infant and was forced to deny and "kill" my drives, I had already started to kill myself. Death had invaded me and never left me until now. Now I do not need death anymore. I have confidence that I will be cured in a physical and a mental sense. *My treatment will work!* I am not a disease, I have a disease, and death can leave me now because I can let go of death.

But still there is so much work to do with choice (Oh, a Freudian slip, I meant to write "Joyce"). Joyce gave me the possibility to choose life. Without

her I would never have been able to cross this terrible suffering and arrive at the locked doors which slowly, slowly can now be opened".

The "untouchable" child:

Before giving further extracts from Sorel's story as she has told it, I shall recount briefly the course of our second year of work. At this point the new chemotherapy treatment appeared to have vanquished the danger of metastases to the second breast and to other bodily organs. But to Sorel's and my dismay there was now an irruption of skin cancer over the radiated area of the mastectomy. This led to Sorel's remembering that she thought she must be dirty and disgusting because her mother never touched her.

Our analysis of these fantasies gave new significance to many of her phobo-obsessional fears of being dirty, or eating what she called "contaminated" or "unhealthy" food. The appearance of the tiny skin cancers also plunged her back into a depressed attitude of giving into death. She faxed the following pages during a weekend break:

"All my life I felt so guilty and so terribly dirty (I'm obsessed with the idea that I or my home could be dirty). My body, even as a child, felt dirty and unwanted, contaminated by my mother – and the dirty child that had to be held at a distance...

I never allowed myself to possess my body. It was so unpleasant, unloved and without grace, and what was even worse, it was dangerous

because it was not *me*, but an enemy. I had to avoid by every means of being aware of it, feeling the black disgusting glue inside it. ...Sorel died when she was still little and from the moment she died she could not feel anything anymore, only fear and desperation. She lived in a devastated land full of dead people. And from that moment on, she lost all hope that she might have a right to live".

"For a child, to create it's image, it needs the adult's image of it when it is still a baby; nobody ever gave me this image and therefore I never created an image for myself. I am so *angry*: how could they destroy me like that? I must have been angry all my life – but that was not allowed. The desperate child turned the anger against herself because she felt so guilty, because she chose survival over death."

"I am very afraid, and I feel my old fear invading me once more; will this invisible death in me kill me? I cannot see it but I can feel it crying through my body. I want so much to live; will it be possible?"

I have just come back from seeing Joyce, and I have made a very important decision – nobody else is going to touch baby-Sorel. As Joyce put it, I'm now ready to be my own good mother to this baby part in me."

The revelation of automutilation:

Perhaps because of Sorel's new-found decision to care for the baby-Sorel within her we were at last able

to explore that part of Sorel which was in complicity with her illness, and willing to give in to death as though this were the only acceptable reality. As the sessions went by I learned for the first time that from the age of 17 Sorel had constantly squeezed and pummelled her breasts until they bled, to see if there were any lumps or unusual secretions. For the first time in her life she now questions what was behind these attacks, and allows me to see the extent of this bodily aggression – also for the first time. Up till now I had believed that she made only normal routine checks for breast cancer. I drew Sorel's attention to her unacknowledged intent to mutilate her body throughout her adult life.

SL: It's a tremendous discovery for me too! I always took it for granted. And now I must also ask myself why was I was so happy to have my uterus removed – feeling that this was a fortunate necessity. I hadn't the slightest trace of anxiety or sadness about the hysterectomy.

JM: Another willing mutilation?

SL: Yes – I didn't even consider the other options – same pattern as when I tortured my breasts.

JM: What were you trying to get rid of?

SL: I always hated everything about me that looked feminine. I had to be terribly thin – the slightest roundness was hideous to me. At the same time I always dressed well – nothing fancy, or frilly – but I was always very well groomed. Good quality but always an understatement ... Evenings out I always wore a tuxedo with a silk shirt.

JM: So you had to remove – or attack – any outward signs of femininity?

SL: I see now that I was determined to destroy anything symbolic of femininity – periods, childbearing, sexuality... it all had to be attacked. (This was strangely reminiscent of the communications of women who seek transsexual reassignment but I did not communicate this thought to Sorel).

JM: What do you think was so frightening about femininity?

SL: I was always ashamed of being a girl. I don't think I ever accepted it. I began to use make-up years after other girls. And for years, refused to wear a bra. (Pause) What does this have to do with my cancer?

JM: Is cancer another way of attacking your womanhood?

SL: Yes – what was I trying to hide?

JM: And from whom?

SL: Oh! My father. I was always so anxious and ashamed around him. I think I was afraid of his attraction to me... I was so embarrassed to be alone with him... I already had a son, and I felt ashamed because he now knew that this meant I had had sexual relations – that he might notice I was a woman.

JM: It would have been better to be a son?

SL: I don't know – he was totally uninterested in my brother as well. But in any case I don't understand why I was so embarrassed – he was the most unsexiest of fathers. I was always very interested in sex – at least in books.

JM: So maybe you were more afraid of your sexual interest in your father than of his in you?

SL: I wasn't interested in having sexual relations – only in reading about them. Males as such frightened me – as though I were afraid of being destroyed by male violence.

JM: Perhaps you had fantasies of this kind about your parent's sexual relationship?

SL: In any case my father would never have abused his daughters. He was too law-abiding, too Jewish, to contemplate anything like that. Besides, when I come to think of it, he was never physically violent, but verbally abusive-yes! Like a thunders-torm. (Long pause) I always refuse to think about my parents being in bed together.

JM: Might you have been afraid of violent fantasies about their lovemaking?

SL: Like what?

JM: Well you were remembering your father's violence – and you have often mentioned that in the mornings your mother appeared too weak, too tired to get out of bed. Perhaps you felt she had been violently attacked by your father?

SL: For sure I would never have allowed myself to reach such fantasies. When I think of the 3 of us – we all have problem with our sexual identities. But that doesn't sufficiently explain why I attacked my body so badly.

JM: Might you be attacking someone else's body through your own?

SL: Yes! My mother's! I wanted to be different from her in every way.

JM: To attack her breasts?

SL: Yes of course! She fed me with toxins – every mouthful given in indifference – or hate? Who knows?

JM: And destroy her uterus?

SL: Huh, those other babies? I must have hated her body and I never wished to resemble her in any way. My mother is round and kind of plump – I would rather die than look like her: all my things must match, must look pared down, strict – like a young boy.

My interpretations led Sorel to resume these sessions in the following way:

"What does it mean that I attacked my body (the left breast, which also represents the heart) the way I did? It was an attempt to squeeze the mother out of it. Breast means mother and mother for me was malignant. I am sure this disease had to come – It was for me the only way to recognize and handle the poison, and, since there is no shortcut in analysis, I have had to relive all the pain, misery and suffering that has darkened my whole life. I had to see what this poison in me looked like in order to deal with it and finally to be able to destroy it and throw it out of my system.

It is not a coincidence that my disease is so strange – it is psychic reality transformed into real reality. I needed this last terrible depression to be able to smash *cancer*".

(I noted that Sorel is not yet ready to discover herself as a fantasized baby-killer, perhaps because her wish to protect her own baby self has be-

come very important at this point in her analysis). Her notes continue:

"This brings me to the most important part of my analysis – I now know, deep inside myself, that I have waited for this cancer and that I wanted it! I know this as clearly as if it were a fact from my past that had been told to me. That I belonged to death was an unquestionable reality for me, a reality transmitted by my mother, and which therefore could not be put in doubt. From the moment I was born she handed me over to anti-life. Soon there was nothing left of the lively little baby, only a sick, cancerous, dummy called Sorel. I accepted *cancer* by becoming it, but I am also convinced that I do not need *cancer* any more, that this is a totally perverse image of a human being, created by a sick mind.

Every cell in my body longs for and desires to be awakened, but can I listen? I need now to be a woman and enjoy all aspects of my womanhood. Above all, *I want to live*."

Sorel discovers her "self" and takes her life in hand:

During a weekend break Sorel faxed me the following notes:

I have never truly existed, and therefore I have never lived till now. Nobody can be more than a survivor while feeling a total loss of identity.

I never dared to have a *self*, to be *me*. I just accepted – following the old, old pattern – that I am not allowed to decide if I should have a life.

But something very important is happening in my body now, and I must listen to the message. I must find myself and I must regain confidence that I can be cured.

I have lately learned something very important: Psychic Reality must be separated from Real Reality. I now know that as long as I do not separate out these two realities it is impossible to make decisions on a workable and realistic basis; when fear and psychic trauma are in command they become the only understandable, the only acceptable, reality.

When I think of how many years, in my inner reality, I have carried this lethal mother in me and how I have answered all her demands I realize that I have let her destroy me with my full consent!

Although I learned many things in my first analysis, at the same time I refused to accept this analytical help – I was not ready to let go of my psychic reality, and therefore let go of my suffering. The only thing I had ever known was suffering and I could not imagine living without it. If I did not suffer I did not have the impression that I was alive – that is, what I understood being alive to mean – no real reality, only my psychic reality, filled with terror, monsters and *cancer*. I feel as though I had not lived my life but was ruled by some terrible force, which has pulled me through life by my hair..."My vomiting and my diarrhea represented all the tears that I have never cried. Why was I never ready to let go of this terrible black poison?"

"I have only learned to live in the last 3 months – before that my life was just a survival combat for which I was trained like a good soldier. So why do I need to torture myself again? *What is it that I do not want to see?*

I know very well that there are no short cuts in psychoanalysis – I have to re-live every anguish I ever experienced, and by doing so find relief from it..."

"The agony that is today's message from my body must be decoded. What is it going to tell us? I am only just learning the existence and the depth of my depression.

I tried to vomit out the feelings of unhappiness along with all the people inside who created those feelings in me... feelings to which I had not yet learned to give words.

Joyce showed me today that I use anxiety to mask the feelings of depression, which are unbearable... We chain up our depressive emotions using every possible means to hide them. Our anxiety, though extremely destructive, is a powerful mechanism for masking the unbearable. If we want to be free as human beings, we must tear the veil that is hiding us from our true feelings and look our childhood's sorrow and agony straight into the face... Instead I turned myself into a stone. Yet a human being cannot remain a stone since the negative feelings and frustrated passions locked up in the inner self have such a strong explosive power, that eventually it's impossible to ignore them any longer. If we do not listen to our inner words, we will choke on them.

Joyce, I think you have become the most important person in my life, first because I love you, but second because you are the only person who is able to give me a strong sense of reality. There was never any "real reality" in my life before, everything was totally strange, out of proportion – or dead. I could never before live in reality, it was as if I had not, could not, have seen and been aware of myself, and with it the rest of the world.

I still have so much to learn, I want to be able to look at the world with my eyes wide open and my strength prepared. I know my past – will I get to know my future?

Feelings that are not linked to our inner sense of identity are not ours, merely the phantoms of feelings from the people who possessed us when we were babies. If one has been brought into a world of poisonous black glue and then been dropped into it, it becomes a toxic environment... Identity was impossible – until now I belonged to my mother who had made me an emotional outcast."

Following these revealing sessions I felt we could approach the question of Sorel's giving some thought to what her parents' internal world was like, with the notion that some of her hatred and contempt for her parents might be mitigated and free up her psychic energy for herself. Thus I pointed out to her that she had never told me anything of her parents' past lives – and I learned for the first time

that all members of her mother's family had perished in the Nazi camps and that her father had also lost his younger brother and continued to feel survivor guilt for not having stood by this little brother. We were then able to reconstruct some of her parents' attempts to deal with such tragedy.

SL: But they just deny it – they talked about it once or twice and since then, they act as though it never happened.

JM: But perhaps you are carrying all these dead people within you too?

SL: I'm sure that's so – I think I always felt guilty about that too – as though I have to do the grieving for my parents. My mother just rushes from one social event to another; that's all she has in her mind.

JM: Do you think it might be her way of running away from her pain?

SL: Oh! Maybe. I've never thought of it that way.

Some sessions later Sorel was able to say "You know I criticize my mother a lot, but I don't hate her. Basically she is a kind and good woman. It's just that she never had a chance to grow up – and was unable to be a mother. But why couldn't she look at us?" I suggested that she might have been afraid of passing on the messages of death and felt it better to leave her children in the hands of a Nanny. "Yes. In many ways she's just like a little child. And she came from a poor Polish family – there was no Nanny, and her own mother struggled all her life to look after her family."

Thus Sorel begins to see that her parents' psychic reality was also filled with tragedy and death and is – perhaps for the first time – beginning to forgive them for their shortcomings. This also led to an attempt to see to what extent she herself is solely responsible for her inner psychic world and to realize the extent to which she clings to the images of the bad mother and the neglectful father rather than assume that her inner world is under her own control.

At the following session, continuing on the above themes she began to understand to what extent she was responsible for making herself into what she called a "dressmaker's dummy" and for maintaining the split between psychic reality and external reality and between psyche and soma.

SL: I was no body.

JM: No body?

SL: Exactly. Not a real body... I had to look right – so no one would see the black turmoil inside me, but my mind and my body were totally separated from one another. No one was to see that I didn't exist, that there was *no body* – and that inside there was *no body*. Only a surface. And then other people didn't really exist either. Oh! I always did a lot of kind and thoughtful things for others – but not because I was concerned about them, I was only concerned about the way I would appear in their eyes. It never even occurred to me to imagine what they might be feeling or in need of, for themselves. I still do what I believe is the right thing to do, whether I feel it or not.

JM: Your "false-self" image?

SL: Exactly.

During the weekend break Sorel faxed me the following reflections:

"Cutting the umbilical cord is essential to free us from the spirits of the people who had a hold on us when we were the most vulnerable... otherwise we cannot expect to know ourselves and to be in possession of the true person in us. We must accept the anger and the pain of looking into our past – that is the only way to open the gate to a future which is worth living. We do not know our future – we do not know it's destiny nor it's length in time. But if we do not learn to accept our lifelong pain and suffering, if we do not stop to look at these feelings, and find the words to express them and, by listening to them, heal our wounds then there is *no future*. Instead we shall be condemned to always be ghosts, living dead on a scorched earth, where joy and happiness, libido and sensuality are not in command, but only terror and screaming panic. We fear the reality of our imagination, where we keep a private hell – in the drama of the holocaust, the cast of characters dance to a tune we have written – and by keeping this nightmare going we annihilate our capacity for life. When terror, panic and anxiety rule then there is no space left for realizing that the world stretches out beyond these prison walls".

At the following session Sorel said:

SL: So what is this strange disease of mine? From now on, my mind and my body must live together in harmony. It's terribly important for me to become a person in my own right and to make my own decisions – I belong only to myself and no one else can be responsible for me. I cannot spend my life blaming others for my inability to care better for myself.

(She then added):

"Even if I should die of this cancer – at least I shall have lived!"

Just before the summer vacation Sorel learned that the doctor with whom she was in love and who also loved her revealed that their dream of maybe making a life together someday would not come true because he realized that he could never desert his children. Shortly after, the dreaded skin cancers once again made their appearance. (Coincidence? Or irrelevant fact?). Sorel and I kept in touch by fax during the summer vacation, and I received the following letter :

Sorel's last fax: July 1996

D has tried a new treatment hoping it will have some kind of effect on my cancer tumors. It seemed that the area was drying up a bit but now I have the feeling this improvement is not going to last. The big cancer tumors started to bleed again and everyday I am staring at the area to check if there are any new tumors or if the affected zone has spread further. I am totally obsessed with my cancer, It takes up all my energy, all my strength and all my desire.

I do not want to eat at all. I have lost all appetite and my only forces are turned against myself.

I told Joyce that everything has gone very quiet and that I do not feel pain anymore. Well, with discovering a few more skin buttons my feelings exploded again and my head is screaming from the pain. All the psychic agony is back – cancer is going to kill me and my only certainty is death. Oh God I cannot take this panic anymore.

Cancer is again invading my body – wrecking every hope, all my projects, and attacking my innermost core. I am now convinced that I cannot survive *cancer*. My destiny is going to be fulfilled and there is absolutely no chance that I can win this battle. I was always invaded by death and there was never a moment in my life where I had not felt that death was a part of myself – death was the only power that kept me alive. Since my earliest babyhood, since the moment of the first message from my mother, I was drawn towards death. I never had any message from my parents other than disaster, injury and chaos. They never knew or felt how to give values to their children – we were considered as trash – and trash we stayed. How can I feel positively towards my healing if I am convinced I am trash? My doctors have tried every treatment known to them and yet they could not force death out of my body. I have known all along that death inhabits my body and it is go-

ing to stay there until it has won over me.

I do not allow myself any more faith – the only message I ever got was that there was no hope for me or that whatever hope I had would be crushed. For me trust is not possible any more.

One says as long as there is life there is hope – but if there is no life then what remains? I am stabbing myself and ruining the tiny progress that might have been achieved. But I cannot let go of this morbid union with death as it was my only stable liason, my only reliable companion that I could call upon whenever I needed and who would never let me down. The pain of my death – the fear and the panic – the *anxiety* could always be recalled faithfully. So how can I let go of pain and death? They are the only stable and unfailing feelings I have ever known.

Nobody ever cared for me, nor even tried to find out who I was or would love me just because I was me. The reason my parents had children was probably that if they had not had

them they could not even pretend not to be the cadavers they were.

It is not amazing that I am so totally obsessed by death – I was conceived by two people who died many years prior to this act.

The only genuine feeling of love I ever had was for R and he feels the same for me. Before I left for our vacation he said, lovingly, "Go back to bed ma chérie". He phoned me from his holiday place to check how I was and when I told him how miserable I was feeling he said "Please my darling, don't think that way – I'm so far from you right now and can't help you as I want to do. But if you don't feel a little happier let me know and I'll come back immediately to Paris."

I replied immediately to Sorel's last fax and we fixed a day and time for an appointment as soon as I returned to Paris.

Then on returning from my summer vacation I learned, with overwhelming sadness, that Sorel had died two days before my arrival and that it was now my turn to suffer the pain of survivor guilt.