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Getting Our Bearings

Jargon -- we use it every day. And even if Lacan warned against it, we continue to understand too quickly. Sometimes I surprise myself, or I hear said around me, «He is hallucinated, that subject,» because the subject in question is agitated and talks to himself a little. Or, about someone else, «He uses signifiers in a rigid way.» Understood as «rigidity of the signifier,» there isn't anything left for us to do but conclude psychosis. Or again, one party says, «There's metaphor, so he isn't psychotic,» while the other party says, «There isn't any metaphor in his discourse, he must be psychotic!»

I propose a new tour through Seminar III to clarify these different terms. When one says of a subject that he is hallucinated, this often covers three different phenomena: transitivity, mental automatism, and verbal hallucination.

Transitivity

This phenomenon, fundamental and observable amongst very young children, consists of «the fact that one child, who has beaten another, might say -- the other beat me. It's not that he is lying -- he is the other, literally.»¹ When it appears later on, it is a sign of an imaginary distortion and indicates to us that the subject in question is very likely of psychotic structure. It is not, as with the other two phenomena cited above, an elementary phenomenon, but a serious indication of psychotic structure.

With Lacan's schema L, one sees that this is played out on the imaginary axis (o --> o'). What must be situated at the level of the ego (at o) is attributed to the other (at o'). For example, a young adult said of

the intervenant who performed the admissions interviews, «It was her who asked me to come to Courtil.» His request to come to Courtil returns to the intervenant performing the admission. From the point of view of subjective attribution, it is the inverse of imaginary identification where the subject takes on something coming from the other, an image of the other, so as to make it his own.² In transitivity, the subject attributes to the other what comes from himself. It is the opposite trajectory from that of identification.

Mental automatism

We owe the concept of mental automatism to the sharpness of Dr. de Clerambault. It covers all the phenomena of automatic thoughts: intuitions, echo thoughts, nonsense, etc. Clerambault distinguishes them clearly from auditory hallucinations: mental automatism is anideatic, that is to say, without an idea that organizes the speech, while hallucinations are «objectified, individualized and thematic.»

Mental automatism is a phenomenon in which normal thought becomes emancipated, becomes foreign to the subject. He loses control of it. Nevertheless it remains his, he doesn't attribute it to another. Subjects having mental automatism often present a light, euphoric excitement. So when this young adult, excited, walks around talking to himself, vituperating or even screaming, is he hallucinating or suffering mental automatism? Is it a dialogue with an Other, to which our ears are deaf, or a monologue attesting to his own thoughts out of control, automatic?

Verbal hallucination

Verbal hallucination, this voice that falls out, is «outer-repressed,» addresses itself to the psychotic subject, renders him crazy, alienated, foreign to himself, for an Other has been introduced in the most private sphere. But this message that he receives in a cruel enough manner, is only his own message, his own reality, which comes back to him in a direct way in the contents of what this voice addresses to him, rather than coming back to him in inverted form as in the deduction the neurotic subject might make of his statement: «You are my woman», thus «I am your man.» When the patient in Seminar III hears «Sow» after having said, «I just came back from the butchers,» it is her own reality that she hears in the real. I cite Lacan:

That other to whom she is speaking, she says to him about herself -- I, the sow, have just been to the butcher's, I am already disjointed, a fragmented body, *membra disjecta*, delusional, and my world is fragmenting, like me.³

This period punctuating the affirmation «He’s hallucinated» sometimes comes too quickly -- this is what I wanted to modulate in distinguishing transitivity, mental automatism and hallucination -- this period, then, even if the affirmation is right, isn’t enough. What do these voices say? What is the message expressed?

I have organized these three terms in a little table:

		nature	attribution
hallucination	signifier	S ----> other	
mental automatism	signifier	S --/--> other	
transitivity	imaginary	S ----> other	

Rigidity of signifying or dialectic inertia

These two terms, rigidity of signifying and dialectic inertia, which, while they don’t completely cover the same field, are close, are often used when, for a subject, the diagnosis is not decided, but one suspects psychosis.

Lacan specified in Seminar III that it concerns a seed of dialectic inertia for the psychotic subject and not his whole discourse. At a moment in his dialogue with the other, in his explanation of himself, there is a knot which Lacan describes thus:

inaccessible, inert, stagnant in relation to all dialectic [...] always repeating itself with the same question mark that it bears, without ever having brought him any response, any attempt to integrate it in a dialogue. The phenomenon is closed to all dialectic composition.

On the contrary, what one sometimes hears -- and perhaps too often among ourselves -- under these terms of rigidity of signifying only comes down to a sort of preeminence of metonymy. A subject seems to be rigid in his passages from one signifier to another. In any case, he is in the signifying metonymy. This never demonstrates psychosis. Rigidity of signifying is only a phenomenon -- in the phenomenological sense of the term -- and the entire diagnostic interest consists in distinguishing what

comes from neurosis, which is to say the dialectic, from what comes of psychosis as dialectic inertia.

The localization of a rigidity of signifying is not enough to make a diagnosis. It is a trans-structural phenomenon. It remains to find the position of the subject as regards this rigidity. This is what defines the term dialectic inertia for psychosis according to Lacan, being that the subject is caught in what, in the discourse, it is impossible to make dialectic. Dialectic inertia is a clinical marker which allows us to make a diagnosis of psychosis if we don't confuse it with rigidity of signifying!

Metaphor and metonymy

The use of metaphor and metonymy must be distinguished from a false structural partitioning that consists of confounding metaphor with neurosis and metonymy with psychosis. From the point of view of the symptom, hysteria is rather on the side of the metaphor and obsessional neurosis on the side of metonymy, but for both the symptom is always a metaphor and it is desire that is metonymic. What distinguishes psychosis, then, is not this usage of metaphor and metonymy, but the level of this usage by the subject. Indeed, while Lacan says of Schreber that he is entirely in metonymy, he doesn't generalize this remark to all psychotics. The psychotic is not inaccessible to metaphor -- Rousseau and Artaud attest to it. He has only failed one metaphor, the primordial metaphor, that of the Name-of-the-father.

Getting our bearings with these classic markers permits us to see more clearly. But Lacan did not content himself with them to approach psychosis. We still must read and decipher his last seminars on the question.

¹ Jacques Lacan. *The Seminar of Jacques Lacan, Book III: the psychoses(1955-1956)*. Ed. Jacques-Alain Miller, trans. R. Grigg, Norton: NY, 1993; p. 39.

² Alexander Stevens. «Deux destins pour le sujet.» *Les Feuilletts du Courtil #2*: May, 1990; p. 27.

³ Jacques Lacan. *Seminar III: The Psychoses*. Op. cit.; p. 52.