

THE PATHS TO THE FORMATION OF SYMPTOMS

LADIES AND GENTLEMEN, — For laymen the symptoms constitute the essence of a disease and its cure consists in the removal of the symptoms. Physicians attach importance to distinguishing the symptoms from the disease and declare that getting rid of the symptoms does not amount to curing the disease. But the only tangible thing left of the disease after the symptoms have been got rid of is the capacity to form new symptoms. For that reason we will for the moment adopt the layman's position and assume that to unravel the symptoms means the same thing as to understand the disease.

Symptoms — and of course we are dealing now with psychical (or psychogenic) symptoms and psychical illness — are acts detrimental, or at least useless, to the subject's life as a whole, often complained of by him as unwelcome and bringing unpleasure or suffering to him. The main damage they do resides in the mental expenditure which they themselves involve and in the further expenditure that becomes necessary for fighting against them. Where there is an extensive formation of symptoms, these two sorts of expenditure can result in an extraordinary impoverishment of the subject in regard to the mental energy available to him and so in paralysing him for all the important tasks of life. Since this outcome depends mainly on the *quantity* of the energy which is thus absorbed, you will easily see that 'being ill' is in its essence a practical concept. But if you take up a theoretical point of view and disregard this matter of quantity, you may quite well say that we are *all* ill — that is, neurotic — since the preconditions for the formation of symptoms can also be observed in normal people.

We already know that neurotic symptoms are the outcome

of a conflict which arises over a new method of satisfying the libido [p. 394]. The two forces which have fallen out meet once again in the symptom and are reconciled, as it were, by the compromise of the symptom that has been constructed. It is for that reason, too, that the symptom is so resistant: it is supported from both sides. We also know that one of the two partners to the conflict is the unsatisfied libido which has been repulsed by reality and must now seek for other paths to its satisfaction. If reality remains relentless even though the libido is ready to take another object in place of the one that has been refused to it, then it will finally be compelled to take the path of regression and strive to find satisfaction either in one of the organizations which it has already outgrown or from one of the objects which it has earlier abandoned. The libido is lured into the path of regression by the fixation which it has left behind it at these points in its development.

The path to perversion branches off sharply from that to neurosis. If these regressions rouse no objection from the ego, no neurosis will come about either; and the libido will arrive at some real, even though no longer normal, satisfaction. But if the ego, which has under its control not only consciousness but also the approaches to motor innervation and accordingly to the realization of mental desires, does not agree with these regressions, conflict will follow. The libido is, as it were, cut off and must try to escape in some direction where, in accordance with the requirements of the pleasure principle, it can find a discharge for its cathexis of energy. It must withdraw from the ego. An escape of this kind is offered it by the fixations on the path of its development which it has now entered on regressively — fixations from which the ego had protected itself in the past by repressions. By cathecting these repressed positions as it flows backward, the libido has withdrawn from the ego and its laws, and has at the same time renounced all the education it has acquired under the ego's influence. It was docile so long as satisfaction beckoned to it; but under the double pressure of external and internal frustration it becomes

refractory, and recalls earlier and better times. Such is the libido's fundamentally unchangeable character. The ideas to which it now transfers its energy as a cathexis belong to the system of the unconscious and are subject to the processes which are possible there, particularly to condensation and displacement. In this way conditions are established which completely resemble those in dream-construction. The dream proper, which has been completed in the unconscious and is the fulfilment of an unconscious wishful phantasy, is brought up against a portion of (pre) conscious activity which exercises the office of censorship and which, when it has been indemnified, permits the formation of the manifest dream as a compromise. In the same way, what represents¹ the libido in the unconscious has to reckon with the power of the preconscious ego. The opposition which had been raised against it in the ego pursues it as an 'anticathexis'² and compels it to choose a form of expression which can at the same time become an expression of the opposition itself. Thus the symptom emerges as a many-times-distorted derivative of the unconscious libidinal wish-fulfilment, an ingeniously chosen piece of ambiguity with two meanings in complete mutual contradiction. In this last respect, however, there is a distinction between the construction of a dream and of a symptom. For in dream-formation the preconscious purpose is merely concerned to preserve sleep, to allow nothing that would disturb it to make its way into consciousness; it does not insist upon calling out sharply 'No! on the contrary!' to the unconscious wishful impulse. It can afford to be more tolerant because the situation of someone sleeping is less perilous. The state of sleep in itself bars any outlet into reality.

You see, then, that the libido's escape under conditions of conflict is made possible by the presence of fixations. The regressive cathexis of these fixations leads to the circumvention

1. [I.e. the representative in psychical terms of the libido regarded as something somatic.]

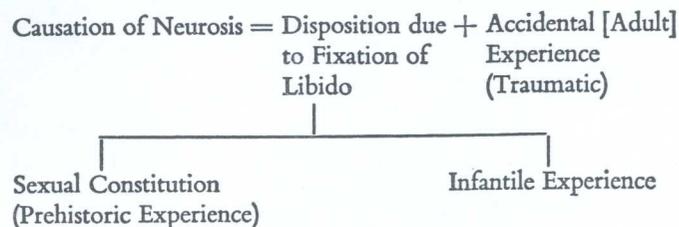
2. [That is, a force acting in a sense contrary to the primary instinctual energy.]

of the repression and to a discharge (or satisfaction) of the libido, subject to the conditions of a compromise being observed. By the roundabout path *viâ* the unconscious and the old fixations, the libido finally succeeds in forcing its way through to real satisfaction – though to one which is extremely restricted and scarcely recognizable as such. Let me add two comments to this conclusion. First, I should like you to notice how closely here the libido and the unconscious on one side and the ego, consciousness and reality on the other are shown to be inter-linked, although to begin with they did not belong together at all. And secondly, I must ask you to bear in mind that everything I have said about this and what is still to follow relates only to the formation of symptoms in the neurosis of hysteria.

Where, then, does the libido find the fixations which it requires in order to break through the repressions? In the activities and experiences of infantile sexuality, in the abandoned component trends, in the objects of childhood which have been given up. It is to them, accordingly, that the libido returns. The significance of this period of childhood is twofold: on the one hand, during it the instinctual trends which the child has inherited with his innate disposition first become manifest, and secondly, others of his instincts are for the first time awakened and made active by external impressions and accidental experiences. There is no doubt, I think, that we are justified in making this twofold division. The manifestation of the innate disposition is indeed not open to any critical doubts, but analytic experience actually compels us to assume that purely chance experiences in childhood are able to leave fixations of the libido behind them. Nor do I see any theoretical difficulty in this. Constitutional dispositions are also undoubtedly after-effects of experiences by ancestors in the past; they too were once acquired. Without such acquisition there would be no heredity. And is it conceivable that acquisition such as this, leading to inheritance, would come to an end precisely with the generation we are considering? The significance of infantile

experiences should not be totally neglected, as people like doing, in comparison with the experiences of the subject's ancestors and of his own maturity; on the contrary, they call for particular consideration. They are all the more momentous because they occur in times of incomplete development and are for that very reason liable to have traumatic effects. The studies on developmental mechanics by Roux¹ and others have shown that the prick of a needle into an embryonic germinal layer in the act of cell-division results in a severe disturbance of development. The same injury inflicted on a larval or fully grown animal would do no damage.

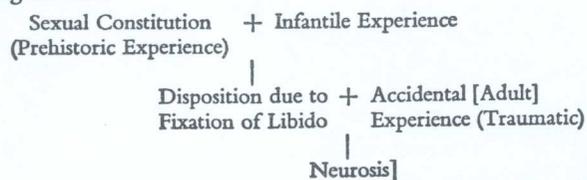
Thus fixation of the libido in the adult, which we introduced into the aetiological equation of neurosis as representing the constitutional factor [p. 391], now falls, for our purposes, into two further parts: the inherited constitution and the disposition acquired in early childhood. As we all know, a diagram is certain of a sympathetic reception from students. So I will summarize the position diagrammatically:²



The hereditary sexual constitution presents us with a great

1. [Wilhelm Roux (1850-1924) was one of the founders of experimental embryology.]

2. [Readers may find this diagram easier to follow in the form of a genealogical tree:



variety of dispositions, according as one component instinct or another, alone or in combination with others, is inherited in particular strength. The sexual constitution forms once again, together with the factor of infantile experience, a 'complemental series' exactly similar to the one we first came to know between disposition and the accidental experience of the adult [p. 392]. In both of them we find the same extreme cases and the same relations between the two factors concerned. And here the question suggests itself of whether the most striking kinds of libidinal regressions – those to earlier stages of the sexual organization – may not be predominantly determined by the hereditary constitutional factor. But it is best to postpone answering this question till we have been able to take a wider range of forms of neurotic illness into account.

Let us dwell now on the fact that analytic research shows the libido of neurotics tied to their infantile sexual experiences. It thus lends these the appearance of an enormous importance for the life and illness of human beings. They retain this importance undiminished so far as the work of therapeutics is concerned. But if we turn away from that task we can nevertheless easily see that there is a danger here of a misunderstanding which might mislead us into basing our view of life too one-sidedly on the neurotic situation. We must after all subtract from the importance of infantile experiences the fact that the libido has returned to them *regressively*, after being driven out of its later positions. In that case the contrary conclusion becomes very tempting – that these libidinal experiences had no importance at all at the time they occurred but only acquired it regressively. You will recall that we have already considered a similar alternative in our discussion of the Oedipus complex [p. 379 f.].

Once again we shall not find it hard to reach a decision. The assertion that the libidinal cathexis (and therefore the pathogenic significance) of the infantile experiences has been largely intensified by the regression of the libido is undoubtedly correct, but it would lead to error if we were to regard it alone

as decisive. Other considerations must be allowed weight as well.

In the first place observation shows,¹ in a manner that excludes all doubt, that the infantile experiences have an importance of their own and give evidence of it already in childhood. Children too have their neuroses, in which the factor of displacement backwards in time is necessarily very much reduced or is even completely absent, since the onset of the illness follows the traumatic experiences immediately. The study of these infantile neuroses protects us from more than one dangerous misunderstanding of the neuroses of adults, just as the dreams of children gave us the key to an understanding of adult dreams.¹ Children's neuroses are very common, much commoner than is supposed. They are often overlooked, regarded as signs of a bad or naughty child, often, too, kept under by the nursery authorities; but they can always be easily recognized in retrospect. They usually appear in the form of *anxiety hysteria*. We shall learn on a later occasion what that means [p. 448 f. below]. If a neurosis breaks out in later life, analysis regularly reveals it as a direct continuation of the infantile illness which may have emerged as no more than a veiled hint. As I have said, however, there are cases in which these signs of neurosis in childhood proceed uninterruptedly into a lifelong illness. We have been able to analyse a few examples of these children's neuroses in childhood itself – when they were actually present;² but far more often we have had to be content with someone who has fallen ill in adult life enabling us to obtain a deferred insight into his childhood neurosis. In such cases we must not fail to make certain corrections and take certain precautions.

In the second place, we must reflect that it would be inconceivable for the libido to regress so regularly to the period

1. [See Lecture 8. Freud was no doubt thinking here of his analysis of the 'Wolf Man' (1918b), which he had already completed though it was not yet published.]

2. [Cf. the case history of 'Little Hans' (1909b).]

of childhood unless there were something there to exercise an attraction on it. The fixation which we have supposed to be present at particular points in the course of development can only have a meaning if we regard it as consisting in the retention of a certain quota of libidinal energy. And finally I may point out to you that between the intensity and pathogenic importance of infantile and of later experiences a complementary relationship exists similar to the series we have already discussed. There are cases in which the whole weight of causation falls on the sexual experiences of childhood, cases in which those impressions exert a definitely traumatic effect and call for no other support than can be afforded them by an average sexual constitution and the fact of its incomplete development. Alongside of these cases there are others in which the whole accent lies on the later conflicts and the emphasis we find in the analysis laid on the impressions of childhood appears entirely as the work of regression. Thus we have extremes of 'developmental inhibition' and 'regression' and between them every degree of co-operation between the two factors.

These facts have a certain interest from the point of view of education, which plans the prevention of neuroses by intervening at an early stage in children's sexual development. So long as one focuses attention principally on infantile sexual experiences, one must suppose that one has done everything for the prophylaxis of nervous illnesses by taking care that the child's development is delayed and that it is spared experiences of the sort. We already know, however, that the preconditions for the causation of neuroses are complex and cannot be influenced in general if we take account of only a single factor. Strict protection of the young loses value because it is powerless against the constitutional factor. Besides, it is more difficult to carry out than educationists imagine and it brings with it two fresh dangers which must not be underestimated: the fact that it may achieve too much – that it may encourage an excess of sexual repression, with damaging results, and the fact that it may send the child out into life without any defence against the onrush

of sexual demands that is to be looked for at puberty.¹ Thus it remains extremely doubtful how far prophylaxis in childhood can be carried with advantage and whether an altered attitude to the immediate situation may not offer a better angle of approach for the prevention of neuroses.

Let us now go back to the symptoms. They create a substitute, then, for the frustrated satisfaction by means of a regression of the libido to earlier times, with which a return to earlier developmental stages of object-choice or of the organization is inseparably bound up. We discovered some time ago that neurotics are anchored somewhere in their past;² we know now that it is at a period of their past in which their libido did not lack satisfaction, in which they were happy. They search about in the history of their life till they find a period of that sort, even if they have to go back as far as the time when they were infants in arms – as they remember it or as they imagine it from later hints. In some way the symptom repeats this early infantile kind of satisfaction, distorted by the censorship arising from the conflict, turned as a rule to a feeling of suffering, and mingled with elements from the precipitating cause of the illness. The kind of satisfaction which the symptom brings has much that is strange about it.

We may disregard the fact that it is unrecognizable to the subject, who, on the contrary, feels the alleged satisfaction as suffering and complains of it. This transformation is a function of the psychical conflict under pressure of which the symptom had to be formed. What was once a satisfaction to the subject is, indeed, bound to arouse his resistance or his disgust to-day. We are familiar with a trivial but instructive model of this change of mind. The same child who once eagerly sucked the milk from his mother's breast is likely a few years later to display a strong dislike to drinking milk, which his upbringing

1. [Freud elaborated this difficulty in Lecture 34 of the *New Introductory Lectures* (1933a), pp. 184–5.]

2. [See for instance the beginning of Lecture 18, p. 313 above.]

has difficulties in overcoming. This dislike increases to disgust if a skin forms on the milk or the drink containing it. We cannot exclude the possibility, perhaps, that the skin conjures up a memory of the mother's breast, once so ardently desired. Between the two situations, however, there lies the experience of weaning, with its traumatic effects.

It is something else besides that makes symptoms seem strange to us and incomprehensible as a means of libidinal satisfaction. They do not remind us in the very least of anything from which we are in the habit of normally expecting satisfaction. Usually they disregard objects and in so doing abandon their relation to external reality. We can see that this is a consequence of turning away from the reality principle and of returning to the pleasure principle. But it is also a return to a kind of extended auto-erotism, of the sort that offered the sexual instinct its first satisfactions. In place of a change in the external world these substitute a change in the subject's own body: they set an internal act in place of an external one, an adaptation in place of an action – once again, something that corresponds, phylogenetically, to a highly significant regression. We shall only understand this in connection with something new that we have still to learn from the analytic researches into the formation of symptoms. We must further remember that the same processes belonging to the unconscious play a part in the formation of symptoms as in the formation of dreams – namely, condensation and displacement. A symptom, like a dream, represents something as fulfilled: a satisfaction in the infantile manner. But by means of extreme condensation that satisfaction can be compressed into a single sensation or innervation, and by means of extreme displacement it can be restricted to one small detail of the entire libidinal complex. It is not to be wondered at if we, too, often have difficulty in recognizing in a symptom the libidinal satisfaction whose presence we suspect and which is invariably confirmed.

I have warned you that we still have something new to learn;

it is indeed something surprising and perplexing. By means of analysis, as you know, starting from the symptoms, we arrive at a knowledge of the infantile experiences to which the libido is fixated and out of which the symptoms are made. Well, the surprise lies in the fact that these scenes from infancy are not always true. Indeed, they are not true in the majority of cases, and in a few of them they are the direct opposite of the historical truth. As you will see, this discovery is calculated more than any other to discredit either analysis, which has led to this result, or the patients, on whose statements the analysis and our whole understanding of the neuroses are founded. But there is something else remarkably perplexing about it. If the infantile experiences brought to light by analysis were invariably real, we should feel that we were standing on firm ground; if they were regularly falsified and revealed as inventions, as phantasies of the patient, we should be obliged to abandon this shaky ground and look for salvation elsewhere. But neither of these things is the case: the position can be shown to be that the childhood experiences constructed or remembered in analysis are sometimes indisputably false and sometimes equally certainly correct, and in most cases compounded of truth and falsehood. Sometimes, then, symptoms represent events which really took place and to which we may attribute an influence on the fixation of the libido, and sometimes they represent phantasies of the patient's which are not, of course, suited to playing an aetiological role. It is difficult to find one's way about in this. We can make a first start, perhaps, with a similar discovery - namely, that the isolated childhood memories that people have possessed consciously from time immemorial and before there was any such thing as analysis [p. 236 above] may equally be falsified or at least may combine truth and falsehood in plenty. In their case there is seldom any difficulty in showing their incorrectness; so we at least have the reassurance of knowing that the responsibility for this unexpected disappointment lies, not with analysis, but in some way with the patients.

After a little reflection we shall easily understand what it is

about this state of things that perplexes us so much. It is the low valuation of reality, the neglect of the distinction between it and phantasy. We are tempted to feel offended at the patient's having taken up our time with invented stories. Reality seems to us something worlds apart from invention, and we set a very different value on it. Moreover the patient, too, looks at things in this light in his normal thinking. When he brings up the material which leads from behind his symptoms to the wishful situations modelled on his infantile experiences, we are in doubt to begin with whether we are dealing with reality or phantasies. Later, we are enabled by certain indications to come to a decision and we are faced by the task of conveying it to the patient. This, however, invariably gives rise to difficulties. If we begin by telling him straight away that he is now engaged in bringing to light the phantasies with which he has disguised the history of his childhood (just as every nation disguises its forgotten prehistory by constructing legends), we observe that his interest in pursuing the subject further suddenly diminishes in an undesirable fashion. He too wants to experience realities and despises everything that is merely 'imaginary'. If, however, we leave him, till this piece of work is finished, in the belief that we are occupied in investigating the real events of his childhood, we run the risk of his later on accusing us of being mistaken and laughing at us for our apparent credulity. It will be a long time before he can take in our proposal that we should equate phantasy and reality and not bother to begin with whether the childhood experiences under examination are the one or the other. Yet this is clearly the only correct attitude to adopt towards these mental productions. They too possess a reality of a sort. It remains a fact that the patient has created these phantasies for himself, and this fact is of scarcely less importance for his neurosis than if he had really experienced what the phantasies contain. The phantasies possess *psychical* as contrasted with *material* reality, and we gradually learn to understand that *in the world of the neuroses it is psychical reality which is the decisive kind.*

Among the occurrences which recur again and again in the youthful history of neurotics – which are scarcely ever absent – there are a few of particular importance, which also deserve on that account, I think, to be brought into greater prominence than the rest. As specimens of this class I will enumerate these: observation of parental intercourse, seduction by an adult and threat of being castrated. It would be a mistake to suppose that they are never characterized by material reality; on the contrary, this is often established incontestably through inquiries from older members of the patient's family. It is by no means a rare thing, for instance, for a little boy, who is beginning to play with his penis in a naughty way and is not yet aware that one must conceal such activities, to be threatened by a parent or nurse with having his penis or his sinful hand cut off. Parents will often admit this when they are asked, since they think they have done something useful in making such a threat; a number of people have a correct conscious memory of such a threat, especially if it was made at a somewhat later period. If the threat is delivered by the mother or some other female she usually shifts its performance on to the father – or the doctor. In *Struwwelpeter*, the famous work of the Frankfurt paediatrician Hoffmann (which owes its popularity precisely to an understanding of the sexual and other complexes of childhood), you will find castration softened into a cutting-off of the thumbs as a punishment for obstinate sucking. But it is highly improbable that children are threatened with castration as often as it appears in the analyses of neurotics. We shall be satisfied by realizing that the child puts a threat of this kind together in his imagination on the basis of hints, helped out by a knowledge that auto-erotic satisfaction is forbidden and under the impression of his discovery of the female genitals. [Cf. p. 359 above.] Nor is it only in proletarian families that it is perfectly possible for a child, while he is not yet credited with possessing an understanding or a memory, to be a witness of the sexual act between his parents or other grown-up people; and the possibility cannot be rejected that he will be able to understand

and react to the impression *in retrospect*. If, however, the intercourse is described with the most minute details, which would be difficult to observe, or if, as happens most frequently, it turns out to have been intercourse from behind, *more ferarum* [in the manner of animals], there can be no remaining doubt that the phantasy is based on an observation of intercourse between animals (such as dogs) and that its motive was the child's unsatisfied scopophilia during puberty. The extreme achievement on these lines is a phantasy of observing parental intercourse while one is still an unborn baby in the womb. Phantasies of being seduced are of particular interest, because so often they are not phantasies but real memories. Fortunately, however, they are nevertheless not real as often as seemed at first to be shown by the findings of analysis. Seduction by an older child or by one of the same age is even more frequent than by an adult; and if in the case of girls who produce such an event in the story of their childhood their father figures fairly regularly as the seducer, there can be no doubt either of the imaginary nature of the accusation or of the motive that has led to it.¹ A phantasy of being seduced when no seduction has occurred is usually employed by a child to screen the auto-erotic period of his sexual activity. He spares himself shame about masturbation by retrospectively phantasing a desired object into these earliest times. You must not suppose, however, that sexual abuse of a child by its nearest male relatives belongs entirely to the realm of phantasy. Most analysts will have treated cases in which such events were real and could be unimpeachably established; but even so they related to the later years of childhood and had been transposed into earlier times.

The only impression we gain is that these events of childhood are somehow demanded as a necessity, that they are among the essential elements of a neurosis. If they have occurred in reality, so much to the good; but if they have been withheld by reality,

1. [Freud has more to say on this subject in Lecture 33 in the *New Introductory Lectures* (1933a), p. 154.]

they are put together from hints and supplemented by phantasy. The outcome is the same, and up to the present we have not succeeded in pointing to any difference in the consequences, whether phantasy or reality has had the greater share in these events of childhood. Here we simply have once again one of the complementary relations that I have so often mentioned; moreover it is the strangest of all we have met with. Whence comes the need for these phantasies and the material for them? There can be no doubt that their sources lie in the instincts; but it has still to be explained why the same phantasies with the same content are created on every occasion. I am prepared with an answer which I know will seem daring to you. I believe these *primal phantasies*, as I should like to call them, and no doubt a few others as well, are a phylogenetic endowment. In them the individual reaches beyond his own experience into primaevial experience at points where his own experience has been too rudimentary. It seems to me quite possible that all the things that are told to us today in analysis as phantasy – the seduction of children, the inflaming of sexual excitement by observing parental intercourse, the threat of castration (or rather castration itself) – were once real occurrences in the primaevial times of the human family, and that children in their phantasies are simply filling in the gaps in individual truth with prehistoric truth. I have repeatedly been led to suspect that the psychology of the neuroses has stored up in it more of the antiquities of human development than any other source.¹

The things I have just been discussing, Gentlemen, compel me to enter more closely into the origin and significance of the mental activity which is described as 'phantasy' [or 'imagination'].² As you are aware, it enjoys a universally high reputa-

1. [This discussion of 'primal phantasies' and the possibility of their being inherited was based to a considerable extent on Freud's findings in his 'Wolf Man' case history (1918b).]

2. [Freud's main earlier discussions of phantasy will be found in 'Creative Writers and Day-Dreaming' (1908e) and 'Hysterical Phantasies and their Relation to Bisexuality' (1908a).]

tion, without its position in mental life having become clear. I have the following remarks to make about it. The human ego is, as you know, slowly educated by the pressure of external necessity to appreciate reality and obey the reality principle; in the course of this process it is obliged to renounce, temporarily or permanently, a variety of the objects and aims at which its striving for pleasure, and not only for sexual pleasure, is directed. But men have always found it hard to renounce pleasure; they cannot bring themselves to do it without some kind of compensation. They have therefore retained a mental activity in which all these abandoned sources of pleasure and methods of achieving pleasure are granted a further existence – a form of existence in which they are left free from the claims of reality and of what we call 'reality-testing'.¹ Every desire takes before long the form of picturing its own fulfilment; there is no doubt that dwelling upon imaginary wish-fulfilments brings satisfaction with it, although it does not interfere with a knowledge that what is concerned is not real. Thus in the activity of phantasy human beings continue to enjoy the freedom from external compulsion which they have long since renounced in reality. They have contrived to alternate between remaining an animal of pleasure and being once more a creature of reason. Indeed, they cannot subsist on the scanty satisfaction which they can extort from reality. 'We simply cannot do without auxiliary constructions', as Theodor Fontane once said.² The creation of the mental realm of phantasy finds a perfect parallel in the establishment of 'reservations' or 'nature reserves' in places where the requirements of agriculture, communications and industry threaten to bring about changes in the original face of the earth which will quickly make it unrecognizable. A nature reserve preserves its original state which everywhere else has to our regret been sacrificed to necessity. Everything, including what is useless and even what is noxious, can grow and proliferate there as it pleases. The

1. [I.e. the process of judging whether things are real or not.]

2. [In his novel *Effi Briest* (1895).]

mental realm of phantasy is just such a reservation withdrawn from the reality principle.

The best-known productions of phantasy are the so-called 'day-dreams', which we have already come across [p. 127], imagined satisfactions of ambitious, megalomaniac, erotic wishes, which flourish all the more exuberantly the more reality counsels modesty and restraint. The essence of the happiness of phantasy – making the obtaining of pleasure free once more from the assent of reality – is shown in them unmistakably. We know that such day-dreams are the nucleus and prototype of night-dreams. A night-dream is at bottom nothing other than a day-dream that has been made utilizable owing to the liberation of the instinctual impulses at night, and that has been distorted by the form assumed by mental activity at night. We have already become familiar with the idea that even a day-dream is not necessarily conscious – that there are unconscious day-dreams, as well [p. 415]. Such unconscious day-dreams are thus the source not only of night-dreams but also of neurotic symptoms.

The importance of the part played by phantasy in the formation of symptoms will be made clear to you by what I have to tell you. I have explained [p. 405] how in the case of frustration the libido cathects regressively the positions which it has given up but to which some quotas of it have remained adhering. I shall not withdraw this or correct it, but I have to insert a connecting link. How does the libido find its way to these points of fixation? All the objects and trends which the libido has given up have not yet been given up in every sense. They or their derivatives are still retained with a certain intensity in phantasies. Thus the libido need only withdraw on to phantasies in order to find the path open to every repressed fixation. These phantasies have enjoyed a certain amount of toleration: they have not come into conflict with the ego, however sharp the contrasts between them may have been, so long as a particular condition is observed. This condition is of a *quantitative* nature and it is now upset by the backward flow of libido on to

the phantasies. As a result of this surplus, the energetic cathexis of the phantasies is so much increased that they begin to raise claims, that they develop a pressure in the direction of becoming realized. But this makes a conflict between them and the ego inevitable. Whether they were previously preconscious or conscious, they are now subjected to repression from the direction of the ego and are at the mercy of attraction from the direction of the unconscious. From what are now unconscious phantasies the libido travels back to their origins in the unconscious – to its own points of fixation.

The libido's retreat to phantasy is an intermediate stage on the path to the formation of symptoms and it seems to call for a special name. C. G. Jung coined the very appropriate one of 'introversion', but then most inexpediently gave it another meaning as well.¹ We will continue to take it that introversion denotes the turning away of the libido from the possibilities of real satisfaction and the hypercathexis² of phantasies which have hitherto been tolerated as innocent. An introvert is not yet a neurotic, but he is in an unstable situation: he is sure to develop symptoms at the next shift of forces, unless he finds some other outlets for his dammed-up libido. The unreal character of neurotic satisfaction and the neglect of the distinction between phantasy and reality are on the other hand already determined by the fact of lingering at the stage of introversion.

You will no doubt have observed that in these last discussions I have introduced a fresh factor into the structure of the aetiological chain – namely the quantity, the magnitude, of the energies concerned. We have still to take this factor into account everywhere. A purely qualitative analysis of the aetiological determinants is not enough. Or, to put it another way, a merely *dynamic* view of these mental processes is insufficient; an *economic* line of approach is also needed. We must tell ourselves

1. [Jung, who introduced the term in 1910, at one stage applied it exclusively to dementia praecox. (Cf. Jung, 1911–12).]

2. [I.e. charging with an extra amount of psychical energy.]

that the conflict between two trends does not break out till certain intensities of cathexis have been reached, even though the determinants for it have long been present so far as their subject-matter is concerned. In the same way, the pathogenic significance of the constitutional factors must be weighed according to how much *more* of one component instinct than of another is present in the inherited disposition. It may even be supposed that the disposition of all human beings is qualitatively alike and that they differ only owing to these quantitative conditions. The quantitative factor is no less decisive as regards capacity to resist neurotic illness. It is a matter of *what quota* of unemployed libido a person is able to hold in suspension and of *how large a fraction* of his libido he is able to divert from sexual to sublimated aims. The ultimate aim of mental activity, which may be described qualitatively as an endeavour to obtain pleasure and avoid unpleasure, emerges, looked at from the economic point of view, as the task of mastering the amounts of excitation (mass of stimuli) operating in the mental apparatus and of keeping down their accumulation which creates unpleasure.¹

This, then, is what I wanted to tell you about the formation of symptoms in the neuroses. But I must not fail to lay emphasis expressly once again on the fact that everything I have said here applies only to the formation of symptoms in hysteria. Even in obsessional neurosis there is much – apart from fundamentals, which remain unaltered – that will be found different. The anticathexes opposing the demands of the instincts (which we have already spoken of in the case of hysteria as well [p. 406]) become prominent in obsessional neurosis and dominate the clinical picture in the form of what are known as ‘reaction-

1. [Here Freud appears to be equating the ‘pleasure principle’ and ‘the principle of constancy’, though in the earlier passage above (p. 402 f.), where this subject is touched on, there is a hint at a doubt about this. At a later date he drew a clear distinction between the two: see ‘The Economic Problem of Masochism’ (1924c).]

formations’. We discover similar and even more far-reaching divergences in the other neuroses, where our researches into the mechanisms of symptom-formation are not yet concluded at any point.

Before I let you go to-day, however, I should like to direct your attention a little longer to a side of the life of phantasy which deserves the most general interest. For there is a path that leads back from phantasy to reality – the path, that is, of art. An artist is once more in rudiments an introvert, not far removed from neurosis. He is oppressed by excessively powerful instinctual needs. He desires to win honour, power, wealth, fame and the love of women; but he lacks the means for achieving these satisfactions. Consequently, like any other unsatisfied man, he turns away from reality and transfers all his interest, and his libido too, to the wishful constructions of his life of phantasy, whence the path might lead to neurosis. There must be, no doubt, a convergence of all kinds of things if this is not to be the complete outcome of his development; it is well known, indeed, how often artists in particular suffer from a partial inhibition of their efficiency owing to neurosis. Their constitution probably includes a strong capacity for sublimation and a certain degree of laxity in the repressions which are decisive for a conflict. An artist, however, finds a path back to reality in the following manner. To be sure, he is not the only one who lead a life of phantasy. Access to the half-way region of phantasy is permitted by the universal assent of mankind, and everyone suffering from privation expects to derive alleviation and consolation from it. But for those who are not artists the yield of pleasure to be derived from the sources of phantasy is very limited. The ruthlessness of their repressions forces them to be content with such meagre day-dreams as are allowed to become conscious. A man who is a true artist has more at his disposal. In the first place, he understands how to work over his day-dreams in such a way as to make them lose what is too personal about them and repels strangers, and to make it possible

for others to share in the enjoyment of them. He understands, too, how to tone them down so that they do not easily betray their origin from proscribed sources. Furthermore, he possesses the mysterious power of shaping some particular material until it has become a faithful image of his phantasy; and he knows, moreover, how to link so large a yield of pleasure to this representation of his unconscious phantasy that, for the time being at least, repressions are outweighed and lifted by it. If he is able to accomplish all this, he makes it possible for other people once more to derive consolation and alleviation from their own sources of pleasure in their unconscious which have become inaccessible to them; he earns their gratitude and admiration and he has thus achieved *through* his phantasy what originally he had achieved only *in* his phantasy – honour, power and the love of women.

LECTURE 24

THE COMMON NEUROTIC STATE

LADIES AND GENTLEMEN, – Now that we have disposed of such a difficult piece of work in our last discussions, I propose for a time to leave the subject and turn to you yourselves.

For I am aware that you are dissatisfied. You pictured an 'Introduction to Psychoanalysis' very differently. What you expected to hear were lively examples, not theory. On one occasion, you say, when I told you the parable of 'In the Basement and on the First Floor' [p. 398], you grasped something of the way in which neuroses are caused; the observations should have been real ones, however, and not made-up stories. Or when at the start I described two symptoms to you (not invented ones this time, let us hope) and described their solution and their relation to the patients' lives [p. 300 ff.], the 'sense' of symptoms dawned on you. You hoped I should go on along those lines. But instead I gave you long-winded theories, hard to grasp, which were never complete but were always having something fresh added to them; I worked with concepts which I had not yet explained to you; I went from a descriptive account of things to a dynamic one and from that to what I called an 'economic' one; I made it hard for you to understand how many of the technical terms I used meant the same thing and were merely being interchanged for reasons of euphony; I brought up such far-reaching conceptions as those of the pleasure and reality principles and of phylogenetically inherited endowments; and, far from introducing you to anything, I paraded something before your eyes which constantly grew more and more remote from you.

Why did I not begin my introduction to the theory of neuroses with what you yourselves know of the neurotic state and what has long aroused your interest – with the peculiar characteristics of neurotic people, their incomprehensible