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GAPS, MIRACLES, AND GHOSTS

Introduction to *Volume II*

by Carlo Bonomi

...Imagine, I obtained a scene about the circumcision of a girl. The cutting off of a piece of the labium minor (which is even shorter today), sucking up the blood, after which the child was given a piece of the skin to eat ...

[Denk dir, dass ich eine Szene von Mädchenbescheidung bekommen habe. Abschneiden eines Stückes von einem Kleinem Labium (das heute noch kürzer ist), Aufsaugen des Blutes, wonach das Kind das Stückchen Hut zu essen bekommen ...]

Sigmund Freud to Wilhelm Fliess, January 24, 1897

Gaps

In the chronicles of psychoanalysis – its historical emergence, its taking root in social discourse, and its transmission – 1910 was a glorious year, the year when the International Psychoanalytic Association was established. In this alternative narrative of the foundation of psychoanalysis, 1910 was a crucial year because Freud’s second analysis of Emma Eckstein was shipwrecked and, shortly after, Sándor Ferenczi became the “uncanny double” of Freud, the heir of what Freud was unable to integrate in his mind.

Emma Eckstein, born in 1865, was the most important female patient Freud treated between 1894 and 1897. In Volume I we learned that she underwent circumcision in a period when female genital mutilations were not categorized as a trauma. This event, unformulated as trauma, became

inscribed in the founding dream of psychoanalysis, the dream of Irma's injection, Freud's dream on the night of July 23-24 of 1895. In this second volume we excavate further how this unformulated trauma determined essential aspects of Freud's self-analysis, oriented his biological speculations, and was transmitted to his closest followers, Ferenczi in particular.

Sándor Ferenczi was born in Miskolcz, Hungary, in 1873.¹ He studied medicine and neurology, and both a liberal social orientation and a progressive outlook came to deeply influence his medical views. Ferenczi first met Freud in 1908, and immediately became friend, confidant, and collaborator. This privileged position was lost only when, shortly before his premature death in 1933, Ferenczi's psychoanalytic thinking and practice began to develop along lines which diverged from those in current acceptance.

Numerous books have been written and published on Ferenczi's last contributions and most original works during the past few years.² The Ferenczi that I have chosen as my privileged interlocutor is however someone who has not yet found his own voice, someone who, being deeply identified with Freud, adopted his language, dreamed his dreams, entered into his nightmares as well. Exploring this communion, we will focus on the continuity between Freud and Ferenczi, linking Ferenczi's technical and theoretical reorganization of psychoanalysis with his incorporation and working through of Freud's split. Ferenczi was not just Freud's "uncanny double" (Aron and Starr, 2015, p. 160), but also a *wise*

¹ He was the eighth of 12 children born to Baruk and Rosa, who were both Jewish. The families of both parents originally hailed from Poland. His father, who was born Baruk Fränkel, decided to resettle in Hungary during his teen years. Baruk owned and operated a bookstore and was a committed supporter of the nationalist and liberal cause. As such, he decided to magyarize his family name from Fränkel to Ferenczi in 1879. Ferenczi's father died nine years later, in 1888, the year Sándor turned fifteen. After graduating from medical school in Vienna, Ferenczi moved to Budapest where he began to work as a general practitioner and neurologist at the hospice for the poor, a place where prostitutes and society's outcasts were treated.

² Among these we can cite Borgogno (1999, 2011), Dupont (2015), Falzeder (2015), Haynal (1988, 2002), Harris & Kuchuck (2015), Jimenez Avello (2013), Lugrin (2012), Mészáros (2008), Rachman (1997, 2003), Rachman & Kett (2015), Rudnystky (2002, 2011), Sabourin (2011), Sklar (2011) and Szekacs-Weisz & Keve (2012a, 2012b).

baby who “worked through for Freud what Freud could not consider in his own mind” (Bollas, 2011, p. xvi), all in an effort to fill the gap in the psyche from which the psychoanalytic cosmos had sprung.

This gap is inscribed in the founding dream of psychoanalysis, Freud’s dream of Irma’s injection. More precisely, it found a representation in the horrendous hole glimpsed in Irma’s oral cavity. Besides pointing to Freud’s own irretrievable trauma, this representation contained material which derived from the treatment and analysis of Emma Eckstein, the operation on her nose by Fliess, for instance. In my reconstruction and reading, Irma’s oral cavity managed to condense also Emma’s circumcision trauma, something which tapped into too many disagreeable and painful memories for Freud. Thanks to the extraordinary capacity for synthesis of the unconscious psyche, these many layers were condensed in the element that triggered and unleashed the founding dream of psychoanalysis, the disgusting odor of “amyl”. Many scholars found that this word evokes the name of Freud’s mother (Amalia). In the opening volume I also proposed that we read this element as a signifier, a transcript for “*milah*”, the Hebrew word for “cut”.

The same “cut” also came both to encode and to inform the final dream of Freud’s self-analysis, his dream of self-dissection of the pelvis. In that dream, sometime in May of 1899, Freud, the father of psychoanalysis, is split in two: the emotional component in Freud is brutally injured and insensitive, indeed dead, with the intellectual part of his psyche allowing him to observe himself coldly from the outside as both spectator and scientist. Freud’s closest pupils were deeply affected by this representation of a trauma encysted in the very foundation of our discipline. Indeed, the cut and split featured in the closing dream of Freud’s self-analysis is the central element of this book, which would have fateful and wide-ranging consequences.

Freud’s self-dissection dream brought into representation a split that transcended his biography and would have a profound impact on the vocation and meaning of psychoanalysis itself. Freud’s

greatness unquestionably rests with having given birth to a public space where unresolved traumas could be deposited for future exploration. By making large pieces of his self-analysis public through *The Interpretation of Dreams* and other works, Freud did transform this space into a place of possible transmission affirming the idea that “children may perhaps achieve” what their fathers failed to do (Freud, 1900, p. 455).

Emma Eckstein’s attempt at filling her gap

Freud defined trauma from the very beginning as a psychic reaction that failed to take place.³ He then introduced the idea of a “gap in the psyche” in a draft written during the 1895 Christmas season, subtitled this “A Christmas Fairy Tale,” and sent it to Fliess on the first day of January of 1896 (the day when Christians observed the feast of the circumcision of Christ). Describing the psychic effect of an early sexual shock, Freud wrote:

The raising of tension at the primary experience of unpleasure is so great that the ego does not resist it and forms no psychical symptom ... This first stage of hysteria may be described as ‘fright hysteria’; its primary symptom is the *manifestation of fright* accompanied by a *gap* in the psyche [*psychischer Lücke*]. (*SE I*, p. 228; see also Masson, 1985, p. 169)

It was just shortly after, in March 1896, that Freud coined the term “psycho-analysis” (Freud, 1896b, p. 162). Then, in April, Freud explained the purpose of the psychoanalytic method as aiming to fill the gaps in a person’s psyche. In “The etiology of hysteria”, after describing how traumatic memories of sexual experiences in childhood resurfaced during the course of the treatment, he wrote:

³ Freud initially assumed that distressing events aroused affects which required discharging if the internal organization of the psyche was to be preserved. Should this self-preserving reaction fail to occur, however, Freud then felt that the psyche experienced a trauma (Breuer & Freud, 1893, p. 11; Freud, 1893b, pp. 36-37). Freud’s initial hypothesis was that the emotional reaction produced by the distressing experience remained “encapsulated” within the individual’s psyche. Freud’s interventions, which aimed at both investigation and cure, thus sought to facilitate its “abreaction”, thereby “causing an unaccomplished reaction to be completed” (Freud, 1893b, p. 39).

It is exactly like putting together a child's picture-puzzle: after many attempts, we become absolutely certain in the end which piece belongs in the empty gap [*freigelassene Lücke*]; for only that one piece fills out the picture and at the same time allows its irregular edges to be fitted into the edges of the other pieces in such a manner as to leave no free space and to entail no overlapping. (Freud, 1896c, p. 204)

The elements in question were “scenes” accompanied by powerful emotional reactions, scenes entailing “violent sensations” and shame. Freud initially traced these scenes to actual traumatic memories but after Emma Eckstein reproduced in analysis a scene featuring her circumcision, in January 1897, he changed his mind.

In the second half of the 19th century doctors had led a vigorous campaign against women and children who masturbated. As I reconstructed it, Emma Eckstein had been circumcised as a child in an attempt to cure her of the habit of masturbation. That she was born in Vienna in 1865 suggests her likely treatment by Ludwig Fleischmann, the director of the first pediatrics department established at the Vienna General Hospital, and a frontman in the crusade against masturbation in babies.

In 1904, seven years after that analytic moment, Emma Eckstein published a 38 page booklet entitled “*Die Sexualfrage in der Erziehung des Kindes*” [The Question of Sexuality in the Rearing of Children].⁴ She was apparently still struggling to make sense of her circumcision trauma. During the course of her research she turned to Freud for help, asking him to help her find material on the topic of her essay. In a letter card dated October 11, 1902, Freud wrote her to say:

Here is one of the books you asked for. Hirschprung is cited incorrectly, i.e.: in *Berl. Klin. Woch[enschrift]* 1866, volume 38. The article is not found there or in any other volume [*Band*] [of that journal]. I was also unable to find Behrend in the *Jahrbuch f. Kinder-heilkunde (für Kinderkrankheiten)* does not exist, as far as I know) [*für Kinderkrankheiten giebt es meines*

⁴ I thank Aleksandar Dimitrijevic for having provided me with a copy of Emma Eckstein’s 1904 book. Emma Eckstein had already published in 1900 a short article, titled “Eine wichtige Erziehungsfrage [An important child-raising question].”

Wissens nicht]). Salzmann will require a more precise indication to help him find it. Revise and do not be discouraged.⁵

Behrend's article was published in the *Journal für Kinderkrankheiten*, the first German journal devoted to pediatrics. Behrend, who served as co-editor of the journal, was one of the pediatricians who had introduced the practice of medical circumcision (of foreskin in boys and labia in girls), excision (of the clitoris) and the cauterization (of the vagina) to treat masturbation in children in German speaking countries.⁶

Emma Eckstein did not find Behrend's article, but she did find one by Ludwig Fleischmann (1878), which she quoted repeatedly, together with Rohlender's monumental monograph on masturbation, published in 1899, and other articles by important pediatricians, Jacobi and Henoch among them. At the outset of her text she appears completely aligned with the views of these authorities in emphasizing the damages of masturbation to both body and mind. Quoting two clinical observations by Fleischmann, she strongly opposed the "wrong idea" that masturbation was not a great danger to children. The best proof in this regards was the scarcely known fact "that masturbation is found already in babies [Säuglingsalter], that children with less than one year can endure violent fits of masturbation and their dangerous consequences" (Eckstein, 1904, p. 9). She cited Fleischman (1878),

⁵ My translation. This was one of 14 communications Freud wrote to Emma Eckstein between 1895 and 1906 which were donated by Albert Hirst (Emma's nephew) to the Library of Congress in Washington, DC (Sigmund Freud's papers, Supplemental File, 1765-1998, Box 61. Library of Congress, Manuscript division). I thank Mario Beria for having provided me with copies of this material. These 14 communications by Freud were mentioned by Masson (1984). Now they are readable online at <http://www.freud-edition.net/briefe/freud-sigmund/eckstein-emma>.

⁶ Emma Eckstein had apparently asked Freud for a copy or information on Friedrich Jacob Behrend's article from 1860 "*Über die Reizung der Geschlechtstheile, besonders über Onanie bei ganz kleinen Kindern, und die dagegen anzuwendenden Mittel*" [On the stimulation of the sexual parts, particularly concerning onanism in small children and the means of battling against it]. I quoted extensively from Behrend's article in Volume I of this study (p. 28). Freud apparently searched for Behrend's article in the wrong place, in the *Jahrbuch für Kinderheilkunde*, a journal initially published in Vienna by local pediatricians; the journal appeared in print from 1857 to 1931. Freud's reply to her that the *Journal für Kinderkrankheiten* did not exist is rather astonishing given the fact that Freud had worked within pediatric circles for years

who claimed that in such cases the bad habit could be treated by a “cauterization of the labia or of the entrance of the vagina” (p. 49) or with mechanical devices aimed at preventing self-stimulation (see Volume I, p. 29). She herself emphasized the fact that the methods of struggling against this evil depended first of all upon the age of the child. With children under two years, she recommended mechanic devices (bandages, light ties, and similar) to prevent exciting movements of the body (p. 15). After conceding that these methods were no longer effective with grown up children, her discourse then turns into an awkward attempt at reconciling the urge to contrast the bad habit with a need not to hurt the sensitivity of the child with frightening punishments. “Psychical influence and physical hindrance,” she wrote, “have to go hand in hand” (p. 16), since “the punished child feels alone and easily driven to search for oblivion and compensation for the withdrawn love in masturbation” (p. 17). “If you want to liberate the child from this dangerous habit,” she concluded, “you have to make an effort to reward the child with love” (p. 18). One year later, in 1905, Freud published his *Three Essays on the Theory of Sexuality*, the second essay bearing the title “Infantile sexuality”.

Emma Eckstein’s second analysis

In 1909 Emma Eckstein started a second analysis with Freud. In an unpublished manuscript, Albert Hirst (her nephew and Freud’s analysand as well) indicates that her second analysis had already started when Hirst began his treatment with Freud in the fall of 1909. Hirst’s own analysis ended a year later, in the summer of 1910.⁷

⁷ Albert Hirst was born in 1887 and wrote his account of his experience of analysis (“Analysed and Reeducated by Freud Himself,” undated manuscript) when he was more than 80 years old. Hirst’s manuscript, 38 pages long, was donated by him to the Library of Congress in Washington along with the letters and postcards Freud wrote to Emma Eckstein. I thank Mario Beira for having provided me with copies of this material. Hirst’s manuscript contains a chapter entitled “Aunt Emma”. His text reveals him committing a few mistakes; he states, for instance, that he began analysis with Freud sometime during the fall of 1910, confusing the beginning of his treatment with its end. Hirst, who lived in Prague with his family, desired to return to Vienna to resume his analysis with Freud in the fall

Hirst informs us that his aunt enjoyed a more or less normal life as a result of her initial analysis with Freud. She, he reports, enjoyed bicycling, a popular sport at the time, and successfully ran her mother's house after her two sisters married. Sometime in 1909, however, she relapsed. Hirst suggests that the relapse occurred after the man she loved decided to marry another woman.⁸ Emma Eckstein soon grew worse, her old difficulties and problems with walking returned and she "spent all her days on her couch, never left her room, not even for meals". Hirst reports that Freud began to visit her at her home to treat her *pro bono*— neither she nor her mother "could at that time afford his fee". At this time she informed her nephew that she and Freud, his analyst then, were in disagreement on a number of things:

[Freud] considered her case a recurrence of her old neurosis, while she insisted that it was nothing of the kind, not a mental but a physical condition.

Once she told me that Freud was simply vain and opinionated. That was a remarkable statement to take to me, a current patient of Freud ... I answered her:

"He may be well as vain and conceited as you say he is, but still I do not understand his position. If he is so vain he could readily say: 'You once had a neurosis. I cured you of that. That you now have a physical sickness is outside my field'."

I told this conversation to Emma's sister Therese and to Freud. Both thought that my answer was keen. But Emma brushed it aside with a brief: "You do not understand him." (p. 7)

Two important events took place during this period. Emma Eckstein appears to have attempted to commit suicide by overdosing with her sleeping pills. It was Hirst who informed Freud of the suicide

of 1910. His father, however, vetoed his plans. Hirst decided to move to the United States a year later, arriving in New York on November of 1911, where he became a successful lawyer.

⁸ Hirst wrote: "I have the notion that she was all her life in love with a certain Vienna architect, and that her relapse came after he got married, or after she became convinced in some other way that her love was hopeless." (p. 7)

attempt. The second featured an intervention by Dora Telecky, a physician personally known to Freud, to visit her friend Emma:

She [Dr Telecky] claimed suddenly to have discovered an abscess near to Emma's navel, and drained it. Dora claimed that she had found the source of Emma's illness and had cured it. She thus confirmed Emma in her rejection of Freud's diagnosis as recurrence of her old neurosis.

When I told Freud the next day he was furious. He took Dora's diagnosis as a fake. That to him was a matter of course. He called it a highly unprofessional interference with a patient under another doctor's care. He immediately withdrew from the case, saying:

"That is Emma's end. Now she will never get well."

He was right. Emma was up and about for a short time, but soon returned to her couch on which she had lived so long. She survived as a hopeless invalid for another ten years. (p. 8)

Referring anonymously to Emma Eckstein's case history in "Analysis terminable and interminable," Freud (1937a) noted that her hope for happiness in love and marriage had vanished. He then traced her relapse back to an outburst of masochistic fantasies and impulses which her first analysis "had only incompletely resolved" (p. 222). According to Freud, the return of Emma Eckstein's illness and symptoms had "sprung from the same source as her first one". She experienced profuse bleedings which forced her to undergo a gynecological examination; a myoma was then found which made it necessary for her to undergo "a complete hysterectomy". Apparently she was operated on by an outstanding Viennese gynecologist for abscesses in her uterus and reached out to Freud for help when stomach pains following her surgery grew worse.

Putting together the accounts offered by Hirst, Telecky, and Freud, the chronology of Emma Eckstein's relapse would be as follows: 1) heartbreak; 2) enactment of masochistic impulses (hysterectomy); 3) second analysis with Freud; 4) incision and drainage of a fresh abscess on the site of her operation by Dr. Telecky; 5) takes to her couch and becomes an invalid.

We do not know whether Emma Eckstein had undergone a similar surgical procedure before she first came to Freud for treatment, sometime around the end of 1894 by my estimation. In Volume 1, I presented the suspicion that this was indeed the case. Freud himself reported in 1937 that Emma Eckstein's hysteria "had defied many kinds of treatment" (p. 222). We know that she developed a traumatophilia, engaging in self-mutilating behavior (cutting) as a girl. It therefore seems possible that she had experienced other kinds of treatments as a young woman, before landing on Freud's couch. Her resistance to these treatments might perhaps explain why, in February of 1895, Freud allowed her to endure a new kind of treatment invented by Fliess: an operation on the nose.

Emma Eckstein's second analysis with Freud features a compelling incident which repeated the event of the psycho-surgery she experienced at the hand of Fliess, except that it was now Dora Telecky who performed the surgery, a new incision which helped to temporarily free her from her pain. Telecky indicated that Freud then became furious about her surgical intervention, screaming at her: "Do you believe that hysterical pain can be cured by the knife?" (see Ludwig, 1957, p. 115).

The similarities between these two situations in Emma Eckstein's life are so uncanny that we can well imagine Freud hurling those same words at Fliess after he botched the nasal surgery by leaving a large piece of gauze in her nasal cavity. The words Freud yelled at Telecky may thus be easily interpreted as an emergence of those he failed to express to Fliess in 1895 after the surgical debacle, an event which not only featured a repetition of her childhood surgery (her circumcision), but also informed the founding dream of psychoanalysis, Freud's dream of Irma's injection.

The background of the Palermo incident

Freud appears to have been profoundly committed to Emma Eckstein's second analysis, and reacted to her return to treatment in dreams of Wilhelm Fliess, his former friend from Berlin. Freud

also would be deeply disturbed by the abrupt end of Emma's second analysis. It was at this point that he stumbled upon President Schreber's *Memoires*. Analyzing Schreber's delusional system may have served a dual intent: to master his feelings about Emma Eckstein and to dissolve his old transference to Fliess. Ferenczi was a personal witness to this process, and was directly involved when he and Freud tried to work together to interpret President Schreber's delusional system. As we know, their "collaboration" abruptly failed, in the infamous "Palermo incident".

Freud was undoubtedly familiar with information which Niederland would eventually bring forward (1951, 1959a, 1959b, and 1984) that Schreber's father, a medical doctor whom his son later in his delusion transformed into God, was an important protagonist in the active crusade against masturbation of the 19th century. Schreber's father believed that the "evil" of masturbation made boys not only "stupid and dumb" but "*lebensmüde*" (suicidal), rendering them "overly disposed to sickness, vulnerable to countless diseases of the lower abdomen" as well as "diseases of the nervous system [*Nervenkrankheiten*]". He also believed that it rendered boys "impotent" and "sterile" (Niederland, 1959b, p. 390). To save the children of the world, including his own son, he devised methods and instruments to keep them from masturbating.

Thus Schreber's father was a doctor who vigorously struggled against the "insidious plague" using practices similar to those in common use at the time of Freud's pediatric training. This phenomenon reached its apex during the middle of the 19th century. Daniel Paul Schreber (born in 1842) and Emma Eckstein (born in 1865) were each subject to the "great fear" of masturbation. As Freud wrote Ferenczi on October 6 of 1910: "What would you think if old Dr. Schreber had worked 'miracles' as a physician? But was otherwise a tyrant at home who 'shouted' at his son and understood him as little as the 'lower God' understood our paranoiac?" To Jung, Freud wrote on October 31, 1910: "The castration complex is only too evident. Don't forget that Schreber's father was—a doctor. As such,

he performed miraclesthe absurd miracles that are performed on him [Schreber] are a bitter satire on his father's medical art.”

There is another element which sheds light into Freud’s replacement of Emma Eckstein with Schreber in the summer of 1910. Let us recall that the destruction of the internal organs and putrefaction of the abdomen (Freud, 1911, p. 17) which Schreber described became the starting point of his peculiar symptoms, his transformation into a sexually abused female and a figure who, like Christ, willingly accepted his martyrdom in order to save mankind. Emma Eckstein, in her turn, carried a surname, (Eckstein: cornerstone), which was symbolic of Jesus Christ as the “head of the corner” or “chief corner” of the Judeo/Christian building. In “Analysis terminable and interminable”, Freud (1937a) moreover neatly summarized her state of mind during the final phase of her last analysis:

She fell in love with her surgeon, wallowed in masochistic phantasies about the fearful changes in her inside – phantasies with which she concealed her romance – and proved inaccessible to a further attempt at analysis. (p. 222)

Although Freud’s description might seem over the top, my sense is that the “masochistic phantasies about the fearful changes in her inside” were the same that had surfaced in Freud’s founding dream when, looking down to examine Irma’s throat, he was unable to tolerate what he saw, and recoiled. Freud’s words illustrate the depth of Emma Eckstein’s trauma.

As children, both Eckstein and Schreber had been victims of a treatment now recognizable as tactless and cruel. But at the time, it was considered the expression of a responsible attitude towards children, in contrast to a regrettable tendency to ignore the damages of masturbation. For his part, Freud did abhor these methods, and his attitude towards masturbation was liberal. For instance, Albert Hirst was very grateful to Freud for helping to calm his anguish and accept his autoerotic practices. Yet Freud did not take a clear public position on this issue, and, in Schreber’s case, he failed to discuss the

possible social and traumatic sources of his symptoms and illness. Just why Freud behaved in this way is not easy to answer, but this was a key point of friction with Ferenczi.

As Aron and Starr (2015) noted, Ferenczi encouraged Freud on March of 1910 to consider the possible role of social factors in the formation and appearance of psychological symptoms.⁹ Freud's response, emphasizing the need at all cost of avoiding a hostile attack on society,¹⁰ suggests that he never fully recovered from the icy reception he received in Vienna in 1896 when he decided to criticize society aggressively by highlighting the high frequency of child abuse and its malignant effects on children (Pines, 1989).

Ferenczi: Freud's "uncanny double"?

This is the background of the famous Palermo incident. Freud and Ferenczi decided to vacation in Italy together in September of 1910 with Freud proposing that they join forces to work on an interpretation of President Schreber's *memoirs*. Freud, however, proceeded with dictation rather than engaging Ferenczi in dialogue during their working vacation. When Ferenczi suddenly "rebelled" by objecting, Freud accused him of neurotic behavior, then proceeded to work on Schreber on his own. Recalling the episode in a letter to Groddeck years later, on Christmas of 1921, Ferenczi wrote: "I was left out in the cold [by Freud] – bitter feelings constricted my throat". Ferenczi's words remind us of the central scene in Freud's Irma dream, of Irma blaming Freud for the pains in her throat, stomach,

⁹ Freud was working on "The future prospects of psycho-analytic therapy" at the time, a paper which he planned to present at the Nuremberg congress scheduled to take place during the last two days of that month. It was during the Nuremberg congress that the IPA, as a result of Ferenczi's own urgings, was established (Meszaros, 2015, p. 27). In a letter dated March 22 (1910), a week before the congress, Ferenczi wrote the following to Freud: "in our analyses we investigate the real conditions in the various levels of society, cleansed of all hypocrisy and conventionalism, just as they are mirrored in the individual".

¹⁰ "Society," said Freud, "is bound to offer us resistance, for we adopt a critical attitude towards it; we point out to it that it itself plays a great part in causing neuroses. Just as we make an individual our enemy by uncovering what is repressed in him, so society cannot respond with sympathy to a relentless exposure of its injurious effects and deficiencies." (1910b, p. 147)

and abdomen. This, it seems to me, was the precise moment when Ferenczi transformed into “Irma”, taking into himself the material that Freud had failed to integrate.

Ferenczi referred to the Palermo incident on several more occasions when assessing his relationship to Freud. This episode remained particularly painful to him given that his “ideal of truth” had been an early product of Freud’s own influence and teaching. As Ferenczi noted in a communication to Freud on October 3 of 1910, a month after Palermo, he deeply wished for “absolute mutual openness” between them, expecting “to see thoughts and speech liberated from the compulsion of unnecessary inhibitions in the relations of psychoanalytic-minded men”, only to then be “forced back into the infantile role” as a result of Freud’s response.

Freud tried to explain himself to Ferenczi in an often cited but scarcely understood letter which I quoted in Volume 1. Circling back to it again, we can see that the present context renders the logic of Freud’s communication much more transparent. Freud’s letter to Ferenczi on October 6, 1910, said in part:

Not only have you noticed that I no longer have any need for that full opening of my personality, but you have also understood it and correctly returned to its traumatic cause. Why did you thus make a point of it? This need has been extinguished in me since Fliess’s case, with the overcoming of which you just saw me occupied. A piece of homosexual investment has been withdrawn and utilized for the enlargement of my own ego. I have succeeded where the paranoiac fails. . . . My dreams at the time were, as I indicated to you, entirely concerned with the Fliess matter, with which, owing to the nature of the thing, it was difficult to get you to sympathize.

The Palermo incident featured a primal fight scene and a disagreement between Ferenczi and Freud which both “foreshadowed and shaped Ferenczi’s [future] personal analysis with Freud as well as their theoretical and technical divergences” (Aron and Starr, 2015, p. 153). Commenting on the clash of polarities at the heart of the Palermo incident, Aron and Starr (2015) proposed that it be viewed as a

reenactment of Freud's relation to Fliess, except in reverse. It was Freud who this time responded in paranoid fashion by placing Ferenczi in the position of a hysteric, a maneuver which then transformed Ferenczi into Freud's "uncanny double" (p. 160).

With Freud's preoccupation with Fliess precipitated by the dramatic termination of Emma Eckstein's second analysis, this also was the moment when unconscious aspects of Freud's unresolved relation to her were absorbed by Ferenczi. The same constellation resurfaced 25 years later in "Analysis terminable and interminable", as Freud (1937a) discussed cases which threw light on what analysis was and was not able to achieve. The two cases Freud selected were precisely those of Ferenczi and Emma Eckstein, each his former patient. In Freud's manuscript we also find Emma Eckstein's unformulated genital trauma returning in the idea of the "repudiation of femininity" as the proposed "bedrock" upon which psychoanalysis rested, an ultimate biological factor that Freud thought analysis was simply unable to penetrate and resolve (p. 252).

Miracles

Niederland recognized that the physical manipulations Schreber experienced at the hands of his father early on reappeared in his delusions as "divine miracles" God performed on his body. Niederland based his conclusion on Freud's statements regarding the kernel of truth in the mental productions of psychotic patients and Waelder's (1951) understanding of paranoia as involving a "return" of that which is "denied". It could simply be said that "miracles" are "gaps" in reverse.

Such a reversal squares with Emma Eckstein's own case history. The "divine miracle" in her case was the replacement of her genital cut with the somatic hallucination of a penis. The same reversal informs Freud's dream of Irma's injection, with the horrible gap magically filled by the vision of the trimethylamin formula, announcing the birth of psychoanalysis, Freud's new "solution". In Volume I we deduced this visual hallucination to be an acoustic conflation of the words *brith milah* [Hebrew for

circumcision] and *three-amen*, with Freud's plan to replace religion with science. Psychoanalysis, like Schreber's delusional system, was his attempt to expose the logic behind "miracles". My years of research and immersion have brought me to believe that this is what stood behind and informed Freud's triumphal pronouncement to Ferenczi that he had succeeded where paranoiacs failed: he had fathered psychoanalysis instead of falling into madness.

Of undoubted further significance is the striking parallel between psychoanalysis and a delusional system. Using Freud's own formulation (1924c) it could be said that Emma Eckstein's genital mutilation became a lost piece of reality replaced by a psychotic delusion. Freud (1937b) himself once compared psychoanalytic constructions to psychotic delusions, and on one occasion even defined psychoanalysis as "a product of delusion" which had succeeded in becoming "a valuable part of reality" (1925a, p. 52). Thus the system Freud developed involves the re-creation of a piece of reality that had been disavowed. Emma Eckstein's trauma reverberates throughout the entirety of Freud's work and, in particular, through the significance of the Phallus within the conceptual system he created. In the perspective that I am now advocating, the (transcendental) Phallus is the product of a hallucinatory replacement of a traumatic piece of reality which has been denied.

The first reference to the Phallus in Freud's work appeared in the same letter Freud wrote to Fliess to report Emma Eckstein's circumcision scene. In that communication Freud first introduced the image of "the great Lord Penis [*der große Herr Penis*]" (Masson, 1985, p. 227). The sharp contrast and deep continuity between these two elements inspired me to develop a re-construction of the Freudian system titled: "From genital mutilation to the phallus cult" (Bonomi, 2006) proposing that Emma Eckstein's trauma was not only disavowed but remodeled, and fashioned by Freud into an object of secret veneration by analyst and analysand alike.

It could also be argued that Emma Eckstein's hallucination of a penis was incorporated into the Freudian system as a relic, that is to say, as an object of worship reminiscent of the devotion to anatomical body parts in ancient healing cults or even to the veneration of saints who were horribly mutilated during the Middle Ages. In all these cases, a violent amputation and dismemberment usually stood at the origin of the cult (Morehouse, 2012). A relic thereby becomes a shared or collective fetish and the Phallus, as central pillar of the Freudian system, thus affirms what Freud himself (1927a) observed about fetishes, namely, that they are erected as a memorial and a substitute for the concrete "horror of castration" (p.154).

Ghosts

If Emma Eckstein's trauma, relived repeatedly over her lifetime through cutting and compliance, were accorded its proper place in the development of Freud's thought, our understanding of the origins of psychoanalysis would be vastly different. The reality of the genital mutilation she experienced during her childhood, however, has been neither acknowledged nor consensually validated. On the contrary, it has been suppressed, denied, and written out of history by psychoanalytic scholars, including the present and past directors of the Freud Archives.

Left out of the first edition of Freud's letters to Fliess (Bonaparte, Freud, Kris, 1950), the scene describing Emma's circumcision and vaginal mutilation was first published by Max Schur (1966) in an important article commenting on Freud's dream of Irma's injection. Yet even Schur (1966) explained the genital cut as a product of Emma's "fantasy" life (p. 114). This expunged, from his mind and ours, what Freud reported to Fliess regarding Emma's circumcision scene. The emotional drama of her circumcision event was again displaced upward in the direction of Fliess's nasal operation on Emma Eckstein in February of 1895.

The cut Emma Eckstein suffered as a child was “disappeared” by the psychoanalytic community for the next three decades. I am not aware of anyone who has reflected on her trauma and its conscious and unconscious impact on Freud. Academic historians of psychoanalysis have not fared any better. When the complete edition of Freud’s letters to Fliess was finally published in 1985, Freud’s passage describing the cut on Emma Eckstein’s genitals was available for the first time yet even then it was overlooked and remained disappeared.

This scotomization is impressive precisely because this collective response has meant that the subject of actual trauma has remained taboo within our field. When Ferenczi attempted to bring trauma back into the center of discussion his work was resoundingly rejected collectively by the psychoanalytic community, and he was ostracized. The barbaric practice of castration procedures performed on women and girls to prevent masturbation and to punish sexual enjoyment, routine during the years when Freud worked as a young physician in Vienna, long remained unremarked upon, with the notable exception of Marie Bonaparte in 1948, followed by René Spitz.

Spitz (1952), responding to Bonaparte, initiated a vast research project resulting in a comprehensive bibliography on the topic.¹¹ Spitz’s survey of this literature is what spurred Niederland (1959a, 1959b) to discover that Schreber’s father, an important and respected physician, had actively crusaded against masturbation in children. Niederland (1968) then also found that Dr. Flechsig, Rector Magnificus of Leipzig University and a person whom Schreber felt had been persecuting him, had engaged in the practice of castrating women as a therapeutic procedure against nervous and psychological ailments.

¹¹ Significantly, Spitz (1952) decided to make his bibliographic research public because, as he explained, knowledge of the sadistic methods which were being used to repress masturbation had failed to enter the psychoanalytic world.

These findings notwithstanding, the brutal realities of castration as a treatment of choice for hysteric women during the 19th century has remained invisible, utterly absent from psychoanalytic discourse.

Dismayingly, the Freud revisionists fared no better. Frank Sulloway (1979) demonstrated that Freud's ideas replicated those already aired within new evolutionary paradigms. However, he missed the connection of an abstract, scientific interest in childhood sexuality to the increasingly sadistic dimension of repression against the practice of masturbation. Masson (1986), two years after publishing his sensationalistic account of Freud's abandonment of the seduction theory, took steps to collect, translate, and publish a series of original psychiatric works on the surgical repression of sexuality in women and children, but without exploring any connection between this "Dark Science" and the birth of psychoanalysis.

This was the situation during the 1980s at the dawn of my interest in the birth and origins of psychoanalysis just as the role of actual trauma was beginning to re-enter social awareness and psychoanalytic discourse. The idea that "castration" involved a real event was still unthinkable. At a time when "symbolic castration" was a key concept in psychoanalysis, my interest in the theme of real castration is worth explaining.

The first volume of the Freud-Ferenczi correspondence was published in French in 1992. I was at once puzzled by the "antimetaphoric" character of Ferenczi's dream on Christmas, 1912. Ferenczi's dream featured the image of a terribly mutilated small penis being served on a saucer, a sort of totemic meal. Reflecting on Ferenczi's "holy communion" and sensing that this was a meta-dream about the very "language" of psychoanalysis, I began to entertain the fantasy that Freud's entire psychoanalytic project could have been built upon a single catastrophic event related to a real, actual event of castration. This fantasy was so at odds with everything consensually accepted at the time about the origins of psychoanalysis that it seemed bizarre, if not actually crazy. I soon grasped, however, that this

possibly catastrophic event had been creatively transformed by Ferenczi in his *Thalassa* into a new founding myth. Ferenczi's Christmas dream was a confirmation, a sign of that transformation as the recipient of what Freud had failed to integrate in his own psyche. At that moment, I began my search for the seminal catastrophic event.

I decided to pay a visit to Professor Gerhard Fichtner, director of the Institute of History of Medicine at the University of Tübingen at the time, to discuss my "fantasy" and ideas. He listened and presented me with articles and books on the castration of women and the circumcision of children which had been published during the second half of the 19th century. Not familiar with this literature, I was greatly surprised by its contents. How was it possible, I thought to myself, that this cruel medical scenario had been so completely ignored by historians of psychoanalysis? Did not this shed new light on Freud's "discovery" of childhood sexuality as an attempt to overturn the cruelty toward the sexual behavior of children?

Reflecting on psychoanalysis as part of a wider social process to address the mitigation of "punishments," I then pursued archival research in Berlin. This was 1992. First off, I found that Freud's pediatric studies in the city in 1886 had been misrepresented in the literature in various ways¹². I presented my findings before a sophisticated audience a year later, in 1993, in a paper titled "Why have we ignored Freud the pediatrician?" (Bonomi, 1994a), with the thesis that Freud must have been deeply affected by medical attempts to cure masturbation in children and hysteria in women by performing surgical castration on their sexual organs, a common practice at the time. My purpose was not to challenge the psychoanalytic system *per se* but simply to invite scholars into reconsidering a chapter within the history of medicine which had been overlooked and which remained disconnected from the

¹² For instance, no references to Freud's pediatric training can be found in the "Finding Aid" which staff members at the Sigmund Freud's Archives at the Library of Congress in Washington have assembled.

origins of psychoanalysis. Beyond this, it also felt vital to raise awareness of the gap in our collective memory as psychoanalysts.¹³

During the next two decades I gave lectures and published papers on the connection between actual castration and the birth of psychoanalysis. Despite the welcoming and positive responses elicited by my presentations, the contents of my arguments have seemingly not been absorbed. What makes it so difficult to acknowledge that Emma Eckstein was circumcised during her childhood? What keeps her “cut” disappeared?

I must confess that on occasion I have strongly questioned the validity of my position. Further, I have entertained doubts about my construction and interpretation of both Emma Eckstein’s case history and Freud’s treatment. Was Schur correct to claim that the circumcision scene Freud described to Fliess had never actually taken place? Was Schur correct that the entire event was merely a product of her fantasy? Was my knowledge of German so insufficient that I misunderstood, misread the original contents of Freud’s communication and description to Fliess? Indeed, was it possible that the patient whose scene Freud described in his letter might perhaps be someone other than Emma Eckstein?

Such recurrent doubts were so powerful that I postponed writing this study for twenty years, and experienced a panic attack when the first volume was ready to be sent to the publisher. A vague memory crept into my mind that Professor Fichtner had once written or told me that the patient whom Freud described was not Emma. Eckstein I decided to write Albrecht Hirschmüller to ask him if he could recall whether Fichtner had ever made such a statement. Hirschmüller assured me that the

¹³ An important supportive exchange took place following my 1993 presentation at the conference “One hundred years of Psychoanalysis”. On this occasion Albrecht Hirschmüller confided that in his Ph.D. dissertation on Freud’s medical education, he had failed to investigate what Freud had learned from his study with Baginsky in Berlin. Although this had been commented upon during his defense of the dissertation, he further confided that he had never gone back to pursue the matter.

female patient whose circumcision scene Freud described in his letter to Fliess was indeed Emma Eckstein. My doubts faded again.

Knowledge is undoubtedly a social phenomenon. It is difficult for any of us to believe in something that is not somehow shared and “consensually validated”, to recall an observation Harry S. Sullivan once made. My own research received reinforcement and validation from several quarters. In 1994 I was approached by an elderly, world-renowned psychoanalyst who told me that my research had enabled him to better grasp the meaning of a memory which had remained fresh in his mind for years. When he was three years old, he was caught engaging in a sexual game with a girl the same age. The children were separated, and he was then taken to a doctor and circumcised. He never saw his female playmate again and did not know whether she too had been similarly punished. He suspected, though, that she had. He failed to tell me how this memory was treated or addressed, if at all, in his analysis. When he shared this story I thought: so, it is true! My research had not only affected him but made us witnesses for each other.

Extending this incident to my dialogue with Ferenczi, I can say that I became a witness for him too. Once inseminated by Ferenczi’s Christmas dream, I could see that Ferenczi in his work had directly and indirectly spoken of a split in Freud’s mind. There are numerous entries in Ferenczi’s *Clinical Diary* of reflections on his relationship to Freud. In an entry on May 1, 1932 titled “*Who is crazy, we or the patients? (the children or the adults?)*” (Dupont, 1985, p. 92-94), Ferenczi described Freud as an individual who was psychologically split, as a person who “only analyzes others but not himself,” a mad doctor who projected his own “neurosis or psychosis” and fashioned his “delusions” into theories which “may not be challenged”.

Ferenczi wanted to cure psychoanalysis of its “scientific delusion” (p. 94). Tellingly, the last of Freud’s theories that Ferenczi did manage to challenge was Freud’s “castration theory of femininity”. On May 22, 1932, Ferenczi wrote to Freud:

It will interest you to know that in our group lively debates are going on about the female castration complex and penis envy. I must admit that in my practice these don't play the great role that one had expected theoretically. *What has been your experience?* (emphasis added)

Freud was then actively working on his *New Introductory Lectures on Psycho-Analysis*. To reinforce his thesis that castration was the severest of all traumas, Freud (1933a) cited cases of circumcision performed on “boys” as “a cure or punishment” for masturbation (p. 87). *This was the only explicit reference Freud ever made to a practice he had undoubtedly encountered during his pediatric training in Berlin in 1886.* It required the passage of nearly half a century for Freud to refer to the horrific psychic impact of medically imposed castration. Now, in the *New Introductory Lectures on Psycho-Analysis*, Freud made the bold claim that an “analysis of cases in which circumcision, though not, it is true, castration, has been carried out on boys as a cure or punishment for masturbation” provided his theoretical “conviction” with its “last degree of certainty” (p. 87).

Yet at the same time, we encounter Freud repeating his old argument that women were incapable of experiencing the “fear of being castrated” if only because they had already experienced biological castration. Freud’s insistence served to erase, from his mind and ours, the sadistic procedures (cutting of the labia, extirpation of the clitoris, cauterization and infibulation) commonly performed during his medical training. In particular, Freud overlooked the fact that Emma Eckstein, his principal patient during the foundational years of psychoanalysis, was herself the victim of such a procedure. Rather than acknowledge her genital trauma, Freud instead produced the substitute theory of a “biotrauma”—the theory that women had lost their penis in the course of biological evolution.

Ferenczi, for his part, felt he could not any longer accept the ease with which Freud had managed to sacrifice the “interests of women in favor of male patients,” as he wrote in an entry in his Clinical Diary recorded on August 4, 1932 (Dupont, 1985, p. 187). This was a specific reference to Freud’s assertion that girls had to accept “castration” as an accomplished fact in order to mature into proper females. But, according to Ferenczi, Freud was failing to consider the possibility that masculinity itself might also take hold “for traumatic reasons (primal scene), as a hysteric symptom” (p. 188). Ferenczi saw this failure as part of Freud’s split attitude towards women. He linked Freud’s “castration theory of femininity” to feelings of impotence and humiliation Freud must have experienced as a result of an incestuous (“passionate”) relation he experienced early on with a “sexually demanding” mother. Instead of recalling the traumatic moment of his “castration”, Freud created “*a theory in which the father castrates the son and, moreover, is then revered by the son as a god*”. Over time Ferenczi grew convinced that Freud maintained the traumatic dissociation by adopting “the role of a castrating god” and not allowing himself to be analyzed.

Ferenczi formulated this unique interpretation of Freud’s desire in an entry on August 4, 1932. A month later, on September 2 of 1932 and while on his way to the forthcoming psychoanalytic conference in Wiesbaden, Ferenczi went first to Vienna read to Freud in person the paper he would deliver at the conference. This, of course, was “Confusion of tongues between the adults and the child. The language of tenderness and of passion” (Ferenczi, 1933), which met an icy reception from Freud (Rachman, 1989), and caused “a conflicted response.” This is the paper, Ferenczi’s reformulation of Freud’s theory of trauma, that today is recognized as a milestone in the psychoanalytic understanding and treatment of trauma.

The consequences of this final encounter with Freud were dramatic: Ferenczi lost Freud’s confidence and personal protection and died just eight months later at the age of 59. Freud’s response

itself unleashed a collective reaction from members of the analytic community, resulting in Ferenczi's banishment from the psychoanalytic canon, his work marginalized for more than half a century, until the publication of the *Clinical Diary* in 1985.

This publication, persistently pursued by Judith Dupont despite all obstacles, at last allowed the psychoanalytic community to rediscover and reassess Ferenczi's work. This seemingly new chapter in the history of psychoanalysis is actually a very old one that had been traumatically foreclosed and now is open. The accumulations of the reassessment process are pressing the psychoanalytic community to consider afresh the contradictions and splits embedded and unquestioned within our discipline. Much work remains to be done. Central to this undertaking is Ferenczi's effort to reestablish traumatic memories as the building blocks on which the entire structure of psychoanalysis rests, making audible at last the reverberating echoes of Emma Eckstein's circumcision trauma.

Outline of Volume II

This book is the sediment of an exploration of a *terra incognita*, a journey in which the traveler doesn't know in advance what will be found. It is also a long Odyssey at the end of which we will be back home.

Volume II is divided into three parts: 1. *Theory in Context*, 2. *The Abyss*, 3. *Transmission*.

Part I reviews a series of key questions. The first chapter (*Infantile amnesia*) examines how the mind of the child was viewed prior to Freud based on my original research nearly three decades ago. At the moment of psychiatry's emergence as a separate discipline, scientific consensus held that the mind of the child lacked the inborn disposition for "passions and vices," and that, consequently, "bad impressions" simply failed to register.

This changed radically circa 1860 with the conceptualization of the human body as a place capable of storing memories of experiences and events. A new image of the child took shape within the new general theories on biological evolution, degeneration, and atavism. It was during this period that the struggle against masturbation turned increasingly violent. Freud managed to challenge the idea that sexual assaults on small children were “without effect” with his presentation on the etiology of hysteria in Vienna in 1896 (1896b, p. 164), proposing “sexual shock” as the specific causal factor of hysteria.

The focus of chapter 2 (the *Rise and fall of the seduction theory*) is on material related to Emma Eckstein’s case history, material which led Freud first to formulate, and only a year later to abandon, his theory of seduction. Chapter 3 (*Primal fantasies, biotrauma, and shock*) presents an explanation and interpretation of Freud’s turn to the “archaic”. Ferenczi was the only member of Freud’s early inner circle to embrace fully Freud’s speculations on the accumulated phylogenic inheritance that informs instinctual life. He not only shared Freud’s understanding of heredity as involving the transmission of archaic happenings but also imagined the phallus, in *Thalassa* (1924), as the living memorial of a primordial catastrophe transmitted without interruption from one generation to the next. Ferenczi’s scientific fairy tale thus became the starting point of his progressive deconstruction of Freud’s phallogocentric system. In the end, Ferenczi would create a new language for the fragmenting consequences of trauma on psychic life.

Contemplating possible reasons for Freud’s decision to discard the impact of trauma, Ferenczi suggested that Freud was “first shaken and then disenchanted” when “the problem of counter-transference opened [up] before him like an abyss” (Dupont, 1985, p. 93). This *Abyss* is explored in part 2 in four chapters which take up the question of Freud’s self-analysis, the very theme **that** has disappeared from many of the studies appearing in the last three decades concerning the origins of psychoanalysis.

The central theme of Part 2 is Freud's incorporation of Emma Eckstein's genital trauma. Chapters 4 (*The fatal needle*) and 5 (*The blood covenant*) explore connections between the scenes Emma Eckstein presented to Freud during analysis with the fantasies and dreams these sparked for Freud during his self-analysis. Chapters 6 and 7 (*The timeless unconscious I and II*) revolve around a key element of Freud's reductionism, the identification of the total ego with the penis. How but in response to Emma Eckstein's genital mutilation could Freud have arrived at envisaging Adonis, the Lord, as a personification of the penis? Soon to follow was his development of interest in a system of thought which informs and stands behind dreams, religious ritual, and myths. This allows us to better understand the impact of Luca Signorelli's cycle of frescoes on the end of the world when Freud encountered them in the summer of 1897. Freud's notorious Signorelli slip met his revival of incestuous fantasies in the summer of 1898. Emma Eckstein's castration, I contend, in Freud's mind was transformed into the paradigmatic punishment meted out against those who dared to violate the incest taboo.

Finally, bringing Part 2 to a close, there is in Chapter 8 (*Necropolis*), Freud's identification of the wish to return to the mother's womb, alongside the terrifying fantasy of being buried alive. This is Freud's final dream during his self-analysis, the dream of self-dissection of the pelvis. The spectacular castration event in that dream, besides pointing to the traumatic event of Freud's "castration" by his "sexually demanding mother" (Ferenczi), featured a mimetic reproduction on Freud's own body of Emma Eckstein's childhood castration event. Freud's early followers were all deeply impressed by the self-dissection dream, soon to be elevated as a symbol of the self-analysis.

The third and final part, *Transmission* explores the interpersonal effects of the self-dissection dream. My claim is that Ferenczi dreamed aspects of this on various occasions, starting with his Christmas dream of a small penis served on a saucer and tray as a totemic meal. This final section

asserts that Ferenczi's dream of a severed penis, as 1912 drew to a close, represented his incorporation of the split off part of Freud's psyche that Freud himself was too frightened to integrate.

I first presented this idea at the 1993 International Sándor Ferenczi Conference in Budapest (Bonomi, 1994a). It was then reformulated in a long article titled "Mute correspondence" and published in 1996 in a special issue of the *International Forum of Psychoanalysis*. Later it reappeared in *Behind the Scene: Freud in Correspondence*, edited with Patrick Mahony and Jan Stenstrom in 1997. The original text (Bonomi, 1996) forms the basis of three chapters: 9 (*Mute correspondence I. Catabasis*), 10 (*Mute correspondence II. Epopteia*), and 11 (*Thalassa*). Chapter 12 (*A blind spot*), examines Freud's thesis that excision (or amputation) of the clitoris served to further "feminize" women by removing this cardinal vestige of masculinity, and considers Freud's relationship with Marie Bonaparte.

Chapter 13 (*Nightmares are real*) explains how Ferenczi was able to transform the conceptual system of Freud, focusing on three points: his reorganization of the fulcrum of psychotherapy, his creation of a new language for trauma, and his mutual analysis with Elisabeth Severn.

Like Marie Bonaparte, Severn was seen as royalty (Marie was of course an actual princess, Severn merely an imaginary one) but it turns out that she, also like Marie, underwent surgical castration. Bonaparte, as we know, submitted herself voluntarily to surgical interventions on her sexual organs while Elisabeth Severn had her ovaries removed against her will. Both women thus were uncanny reincarnations of Emma Eckstein, the keystone patient during Freud's self-analysis preceding the founding of psychoanalysis.

Chapter 14 (*Acropolis*) describes an imaginary meeting between Freud and Ferenczi on the *Acropolis*, based on Freud's last piece of self-analysis (*A disturbance of memory on the Acropolis*), produced three years after the shock of Ferenczi's death in 1933. The chapter brings to an end a

reconstruction of the gap Freud filled with the theory of the transcendental Phallus. Thus Emma Eckstein endured not only a circumcision but an excision (amputation of the clitoris). Psychoanalysis was suddenly born from Freud's automatic reaction to and mimetic reproduction of her traumatic shock. How memory and fantasy are used to fill gaps is also considered. The 15th and final chapter (*Flight into sanity*), reflects on Ferenczi's expulsion from the psychoanalytic establishment. Material in the chapter was previously published in the *International Forum of Psychoanalysis* (Bonomi, 1998), and a longer, more detailed version in the *International Journal of Psychoanalysis* (Bonomi, 1999).

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this manuscript was about to be delivered, Judith called me with congratulations for the first volume. She was really enthusiastic but expressed some reservations about the copy-editing. I immediately sent her the Introduction, and thus began a wonderful collaboration, resulting in the final version of this volume. Judith's way with words and profound knowledge of the contents infused the right speed and rhythm for this long unwieldy text.

Appreciation is expressed for permission to reprint in whole or in part the following works:

Chapter 10, 11, and 12: Bonomi, C. (1996). Mute correspondence. *International Forum of Psychoanalysis*, 5: 165–189.

Chapter 15: Bonomi, C. (1998). Jones's allegation of Ferenczi's mental deterioration: a reassessment. *International Forum of Psychoanalysis*, 7: 201-206.

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