

Narcissus: from the myth to analysis

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The aim of this paper is to reflect on the complexities we encounter when analysing people with narcissistic problems, and to put forward some considerations about the impasses that are not infrequent in these cases. Reading the myth along Freudian lines, taking it as a narrative which finds itself echoed in individual structural pathologies, I will take my starting point from the story of Narcissus in order to investigate the subject which is the focus of this study.

To do this, I will also present some material from the treatment of a patient tormented by the thought of growing old and dying, and endlessly seeking flattery and appreciation in the conviction of being able to control the objects' response and arresting the passage of time.

In the light of the elements which emerged during treatment, the second part of the paper will set out some clinical and theoretical reflections on the «Illness of Ideality» (Chasseguet Smirgel, 1976).

THE MYTH OF NARCISSUS

In the *Metamorphoses*, Ovid describes Narcissus as a young man of such beauty that every human creature who encounters him becomes entranced by him.

As is well known, one day he comes across a pond of clear water and, as soon as he sees his own reflected face, he falls hopelessly in love with it, believing it to be another person.

He experiences himself as ageless and for as long as he admires himself in that unmoving mirror, he perceives himself in all his youth and immune to the passing of the years. In despair at being unable to join with his own image, he weeps, but his tears make ripples on the surface of the water, so that Narcissus seems himself changing and the perfection of his own face disappearing. Unable to bear the fact that time can wither his face, he throws himself into the pool and dies, later being transformed into a flower.

Some versions of the myth leave us to presuppose other reasons for this aversion to growing old: for example, the fact that in Narcissus's family there were no boundaries (between the generations and between the members themselves), Narcissus having been born from an incestuous coupling between the river God Cephisus and his own

daughter the nymph Liriope. If we follow Ovid's version of the story, it seems that Narcissus had no model to show him how to cope with the changing of the seasons: «his father... was immortal – and in addition he deprived him of a grandfather because he had conceived the infant with his own daughter» (Quinodoz, 2008, 182).

We should add that this myth portrays a type of psychological suffering with which we are now confronted more and more in our practice. New «maladies of the soul» (Kristeva, 1993) which are the distinguishing feature of our present epoch in that they are characterised by a flight from representation and symbolisation, and are typified by the reduction of the internal and affective worlds to a desert. Indeed both seem to be clouded by an irresistible drive for external perfection and the resulting investment in their own outward image, accompanied by the need to be constantly the centre of attention.

The favour enjoyed today by the narcissist is encouraged by a culture which, legitimising the aversion to depth, further consolidates his paradigm and *modus vivendi*.

CLINICAL MATERIAL

Tino, an only child, is a forty-five year old who wants analysis because he is suffering from a sense of emptiness and experiencing an indescribable malaise and fragility, even though he is a well-established manager with a glittering social life. He often responds angrily to trivial challenges as if they were personal affronts, but has to conceal such reactions and to put on a front of self-sufficiency and superiority. He describes his mother, a well-known university lecturer greatly admired by the patient, as someone «ambitious and mechanical», absorbed by her own career,¹ who had exposed her son from an early age to sudden and traumatic separations («when she wasn't looking at me, I thought I wasn't there...!»), and made it clear that she had very high expectations of him, first educational and then professional. For his part, Tino commits himself determinedly to ever higher goals, even though achieving them is never enough to overcome a persistent habit of self-criticism which tends to generate a chronic dissatisfaction.

He remembers his father as an insecure man, often absent and with a propensity for promiscuity with younger partners. The patient in turn puts on a show of behaviour which on the surface imitates his father, devoting himself to brief, disengaged adventures in which his chief preoccupation is to produce astounding sexual performances. In essence, his internal solidity appears to depend on other people's admiration and the need for everything to revolve around him.

¹ Here I think it is appropriate to note C. Parat's (1999) comment about the strong investment in work made, sometimes at the highest level, by many women at the present time. According to the Author, in these cases the «rival» for the child would be represented by a narcissistic object, and the outcast would feel dramatically ousted from this newly constituted primal scene.

The analysis, which is ongoing, takes place three times a week. The sessions are mostly summaries of his working day, given that, lacking contact with his own most authentic Self, he is unable to articulate his own story and emotions in an engaged manner. The frenetic rhythm he stamps on his existence gives me the impression of being faced with someone moving in an eternal present, cultivating the myth of everlasting youth in order to exorcise the always looming spectre of death, which the narcissist consider the ultimate injury. The analysis is often like an airport he is passing through to listen to my interventions as if they were «service announcements», in other words «information» about him, discussions about timetables, cancelled sessions, etc. The analyst is limited to a highly pragmatic role like the one the patient has attributed to his father: a figure in the background equivalent to the background noise of announcements in airports giving anonymous information to passengers. On another level, therapy seems to happen for Tino in that timelessness so particular to large terminals, which are virtually crossed by the time zones of all the possible destinations of the scheduled flights, and the analyst is the object of an idealising and aggressive rivalry, because he is imagined as living in a privileged area characterised by a magical suspension of the seasons.

He is very careful in his interactions with me to allow no pauses which might enable him to stop and think: overall, his behaviour is mostly detached, aimed at making me feel like an extension of him, as he had probably felt with his mother when he was a child.

In interpreting the attitude of superiority aimed at asserting his dominance, and experiencing a feeling of uselessness and irritation, I realised that I was responding countertransferentially to his narcissism, perhaps giving my statements too much emphasis on their relevance to his internal world and by implication to the importance of my analytic role.

I will now refer to a dream he recounted to me in the third year of therapy, which formed the start of a long process of elaboration. We are in the second session of the week. Tino is at the top of a very tall skyscraper from which he is enjoying a vast panorama of the landscape:

«It was all beneath me, clearly in view!» he exclaims, «and the outside walls were made of clear glass which perfectly reflected what was around them». He was very afraid of «hurtling down, maybe because of some crack they'd left when they put up the building», but he was able to wake up in time.

In his associations, Tino tells me that the day before, following the appearance of some vague physical troubles, he had been struck with terror at the idea that he could suddenly become ill and start quickly ageing, even dying. And he adds, «No!... But why should have to put up with this?... when I've always been healthy... until now!»

He also manifests the fear that the analysis could weaken him and put him in contact with «ordinary goings on, the things that happen to people you pass on the street every day», he says in a tone both mocking and anxious.

I interpreted that with the dream he wanted both to communicate to me what he might have experienced in perceiving the collapse of a superhuman image of himself, and to criticise me since my emphasis on introspection had been taken by him as lack of support for how he was really feeling. From what I knew of his history, I thought he might be repeating, in his relationship with me, the void experienced with a preoccupied father rather than with a mother who abandoned him or was emotionally distant when absorbed in her own scientific and professional interests.

I also considered that he was implicitly asking me to modulate my interventions towards respecting his vision of the world, and to regard his grandiose organisation as scaffolding which for the moment was essential to support him.

In the next session the patient talks again about the dream, which has remained very vivid inside him and in need of being further told and understood. As he was re-evoking the loneliness and fear of falling that he experienced, I remember that along with a psychosomatic unease characterised by the impression that I was walking along the edge of a precipice, a fragment of *The Tartar Steppe* (Buzzati, 1945) came into my mind. I had a very clear memory of the book, having recently reread it. Its protagonist, Lieutenant Drogo, lives walled up in a fortress on the edge of the world, illusorily protected by his isolation and inflexible military organisation from the affairs of the common people. Time has been extracted from this fortress and metaphorically projected onto the horizon where it constitutes, like the mysterious enemy army of the story, a vague, suspended, menacing entity.

Like Drogo, Tino is barricaded into a parallel world, immobile but reassuring, without a history and untouched by the present. Omnipotence is the invisible thread which supports and binds together this internal garrison: it in other words, the conviction of being able to last forever as long as no change is experienced. In the fragment in question, the author describes how time, despite the attempts to keep it at bay and under control, succeeds little by little in opening a way through the defensive bulwark in which the protagonist had been enrolled for long years.

I thought of using these pages of the novel as a moment to «review and revise our concept of who we are, and rehearse where we are going» (Cartwright, Lamberg, 1992): in other words, to help me live in the first person what it feels like to be falling into the void of a psychic and relational desert, and to treat these sensations in the face of which I had perhaps been working predominantly on the level of secondary process.

I supposed that I had been required to «fall» with Tino and to show myself ready to face with him the conflict with the unknown force on the horizon: that is – starting from the here and now of the session linked to the Bastiani fortress in the story, to approach

and tolerate his anxiety about the uncertainty of the future, and ultimately about the prospect of the end of life.

Working to embody in my words and tone of voice what I was undergoing (I will come back to this point later), I intervened in a spontaneous manner to share Tino's sadness for the breaking up of an illusion of having an infinite number of seasons at his disposal, and his mourning for the transience of the body and the brevity of human existence. I now quote material from a significant episode from that session.

Analyst: «I wonder if you aren't convinced that I, as an analyst, can live inside a fortress... protected from ageing and death... almost as if the clock magically slowed down or even stopped for me in this room... for my use and benefit... So it's as if you were afraid of not being understood by me, and being alone in your panic about the end... You've told me that when you were a child you thought of your father as someone remote and your mother as someone indifferent, a kind of inaccessible deity... bound up in her own affairs... even in the moments when you had been frightened by something... I have the feeling that you are asking me really to feel together with you the unpredictability of chance, of life itself... Impotence in the face of an unexpected misfortune... in the face of what happens without our wanting it to... Like living in a skyscraper that is supposedly safe and yet could fall down without any warning... and now we feel vertigo and the fear of dying... and the certainties inside us reach a peak... But I think that you are also asking me to be alive... alive here with you... and not to collapse, not to lose my passion for building links and for loving life, even if doesn't last forever... when we know that in fact it ends».

After a long silence, the patient tells me, in a new, pleasingly lively tone:

«I'm remembering when I was little, how an aunt I was very attached to, came to our house while my mother was away... at the University... I didn't want to get up in the morning, and so she brought me my breakfast in bed on a tray whose surface was a mirror... and she talked to me... I paid her full attention... and then I jumped out of bed and ran happily out into the courtyard where my friends were».

So, in a light tone intended to open up a space for fantasy, I interpret that my attention and my listening may enable him, as happened with his aunt, to get out of the bed he's lying on and find, in the world «outside», something to give him hope and strength.

ON NARCISSISM

I will now set out, again in the context of the myth, some considerations on narcissism with particular reference to an orientation to which I feel in harmony and which I

made use of in my analysis of Tino. Of course, this does not rule out the possibility of other models having heuristic fertility and efficacy on the theoretical and clinical level.²

The observational vertex I intend to propose (and will briefly summarise here) draws on what Winnicott indicated about how the child sees himself and learns to know himself and to live as a unique being by means of the mother's face, by how she accepts and understands him, and by what he personifies for her, as if the two of them were «living mirrors which co-develop in a mutually autopoietic process» (De Toffoli, 2011, 592).

A healthy narcissistic relationship with the primary object which draws sustenance from its return gaze in which to be mirrored, satisfying the need to perceive its presence and guarantee a feeling of safety. The mother's face would therefore be the baby's first emotional mirror, because through the identification with the image she has of him, the subject develops a source of satisfaction and unification, internalising the perception of the mother's benign eyes, her smile and her voice, as a good experience and an indispensable premise for going on to achieve the necessary individuation.

A caregiver with the task of guaranteeing continuity of life and reality for the human infant (Winnicott, 1971), allowing him moments of illusion in the various fluctuating stages of growth, starting with the transition from intrauterine to neonatal life, as Winnicott (1958) says of primary maternal preoccupation.

The dynamic of these exchanges contains the pleasure of reciprocal knowledge, providing the human infant with the awareness of his own importance and unity as the foundation for the subsequent construction of his identity on these bases.

But clinical practice shows us that there is a gaze detached from the infant's needs which, like an unpolished mirror, does not reflect him. And we also know that the same gaze can become probing and hypercritical, or that it can be the mother herself who seeks a one-directional reflection to confirm her own existence.

So, the unfolding of such troubled relationships is not based on a participatory configuration, but is the harbinger of a «mortification», indicating «that kind of suffering which accompanies a trauma suffered without the possibility of reacting to it» (Goretti, 2005, 28). It can be intuited from this that autarky and megalomania in such relationships are the result of defensive and compensatory operations against desperation and rejection, both suffered in a state of extreme *Hilflosigkeit*.

In order to investigate these dynamics, I propose to interrogate the myth of Narcissus, dwelling in a diachronic sequence on some of the story's symbolic high points. It seems to me that it outlines two distinct modes of experiencing primitive links.

In the first I suggest that we imagine a fusion of the young man with what is concealed beyond his own idealised image: that is to say, with water as equivalent of the mother (who would be the true cause of enchantment). And at the centre of the story I

² See for example Kohut (1971), Chasseguet Smirgel (1976), Kernberg (1984) and Rosenfeld (1986).

would identify a state of oceanic bliss, hypothetically accessible to the absolute narcissism of the unborn child (Freud, 1914) in the liquid intrauterine environment, or in those profoundly regressive situations where the relationship with the mother's face, and with all that it signifies and conveys, is played out in a dimension of non-time and undifferentiation.

The second mode takes us back, in my opinion, to the period in which the human infant has to face experiences of separation, discontinuity, and a painful encounter with otherness, following the caesura of birth. But because the turbulences undergone at the start of life are often repeated in those which occur over the course of development, every experience of loss in relation to the object, probably renews from time to time the primitive and intolerable experience of outrage and «shameful failure» (Freud, 1920) on the narcissistic front, nullifying the myth of a glorious and immortal Ego.

Narcissus is a tragic hero suspended between a period in which he thought he was his own and his mother's ideal, and the subsequent temptation to regain the primal unity through a malignant return to the foetal state which flees the reality principle and leads to death, insofar as it suppresses the impulse to individuation and growth: a coveted and terrible Nirvana aimed at anaesthetising pain, but also at abolishing the life's tensions.

In the light of these operations, we should take account of a peculiar fact about what happens in the processes of separation³ in which a child (like Narcissus) seems not to «recover» from the wound of *le temps perdu* because he is deprived of a potential space between the subjective object and the external object: a child left alone, waiting in vane for some reciprocation, a reflecting gaze, some containment by the primal matrix vanishing in the sluggish ripples of the pool.

In this imaginative speculation of mine, the object (because of an actual deficiency or a limitless need for love on the part of the subject, or from a mixture of both causes) appears inaccessible and rejecting, and is replaced by a creature which has the likeness of a deformed and repellent double which occupies the site of the negative hallucination of the mother (Green, 1985).⁴

It is appropriate here to recall that in patients with a *Illness of Ideality*, we detect the presence of *Ideal Ego* (in place of an *Ego Ideal*) not much differentiated from a severe *Superego* which condemns the *Ego* in a «delusion of (mainly moral) inferiority» (Freud, 1915, 246). The subject hates himself for not being other than he is. I do not

³ About the crucial phase of detachment at birth Winnicott (1967) writes some very significant comments when he prefaces his paper on «The Location of Cultural Experience» with a line by Tagore: «On the seashore of endless worlds, children play». These words seem to evoke places and states without time, presumably at the dawn of life, in a ludic cycle between sleep and waking aimed at mastering the trauma created by the primary separation.

⁴ As in a painting by Giovanni Segantini, *Vanity*, in which a girl looks for an image of herself in a pool of water so that she can regain her timeless beauty, and instead of her reflection sees a monstrous and terrifying serpent.

have space here to explore the functioning of such an instance,⁵ considered by Green (1985) «at its worst» as the most tyrannical agent of oppression.

I will limit myself here to briefly observing how, in cases of pathological narcissism, the Ideal Ego is characterised by a contradictory profile. In fact, it offers itself on the one hand as a powerful and tenacious magnet which flatters and hypnotises the Ego, animating its conviction of being superior like an Olympian god, and of being able to do without dependence on objects. But on the other hand, the Ideal Ego, having colonised the Ego itself, making an immortal destiny sparkle in front of it like a two-headed Janus turns its pitiless gaze against the subject, showing him his meagreness before such goals, and drowning him in unachievable diktats of perfection. And clinical practice tells us that the wider the gulf between the subject and these objectives, and the consequent feeling of inferiority he experiences, the greater will be his fundamentalism, an expression of death narcissism (Rosenfeld, 1987; Kaës, 2012) intolerant of differences. In this case there seems to be a confluence, a complex interweaving, of the grandiose projection of the Self in debt to its own infantile megalomania, with the internalising of an object incapable of accepting the «daytime child» (Vegetti Finzi, 1990), the child in his individuality, an object with whom he identifies, becoming the target and victim of its hatred.

On this totalising and «eugenic» level the daytime child would represent the neglected and undesired counterpart of the «night-time child» (*ibid.*).

The latter would be the product of a fantasy of self-generation and would be invested with the mother's narcissistic need for a perfect child in whom to be mirrored ad infinitum, and perhaps for this reason neither sexed nor living (Green, 1985).

THE ANALYST'S EMOTIONAL PARTICIPATION

I would like to dwell now on some distinctive features of Tino's analysis, placing the emphasis specifically on the complex unfolding of the relational dynamics. I shall begin by saying that a relevant problem which I encountered in this treatment was that of making contact and analysing anxiety and mental pain deriving presumably from fault lines (the «cracks» in the skyscraper) produced in the primitive dual mother-child unity (De Cesarei, 2010). Winnicott (1962) taught us that the fear of «falling forever» and disappearing into nothingness would be attributable to disturbances in the early holding environment: a collapse, a loss of Self, which has already happened but not yet been experience on a psychic level.

A suffering cut off behind a thick psychic wall made of indifference which has banished Tino to a position where he has had to give up «having the bruised place rubbed» as Tolstoy says about the human propensity, when we are in a bad state, to seek relief

⁵ For an in-depth survey of this topic, see Mancia, 1979.

from those who are like us, to seek a cure or consolation in a bond. The need for an object to help us is replaced by a self-idealising tendency aimed defensively at not acknowledging dependency, and at attacking both the analyst, making him feel worthless, and that part of the self which is in search of support, since it is judged to be shamefully weak.

I do not mean to underestimate the importance of work on containment and the significance of these massive negative transference currents which are, I believe, connected to traumatic experiences in Tino's early history. But in my clinical work with him, I understood that interpreting all this was insufficient for getting close to and investigating those suffering aspects of the patient which I mentioned as being split off and hidden behind the mask of aggression, and which – as we have seen – it was my responsibility to let myself be «touched» by *first of all*. Like a «painful and paining twin» (Grotstein, 2009, 94) or *alter ego* who, in his own turn, by giving voice to and elaborating the somatic sensation (for example, physical discomfort felt in the session), «touches» what is unknowable about the other.

My cunning plan was to do some self-analysis later on and thereby restore an asymmetry which would allow me to find a distance between the projective identification exercised by the patient and my own participatory identification, in order to achieve a partly shared process of transformation thanks to my dual role of co-protagonist and witness.

This is a complicated subject to address because, if we reflect on it, we need to be aware both of the limits of our involvement and of the analysand's tolerance of his anxieties in the session, and also of the opposite possibility, that we offer ourselves as a perfect model (always available to receive and accommodate unconditionally any of the analysand's emotions), prompting him to diminish his own capacity for living life (Brenmann, 1978).

In order to show Tino that I was feeling together with him, and to broaden creatively the spectrum of analytic exploration, I chose to give more prominence to the vocal component of my speech, believing that this would be the sign of a living discourse, as Green maintains, and the demonstration of how we become engaged on the personal level. Intonation, inflections, volume and timbre, pauses, gaps, rhythm, musical modulations and song (Meltzer, 1967) are important if we are «to give things to words», in the sense of rendering them «endowed with substance» (Bolognini, 2008, 52) and with «near-physical impact» (McLaughlin, 1995; Quinodoz, D., 2002). On this plane, the evocative part of words (their «faded magic» [Freud, 1890]) can be likened to an archaic mirror of sound («a complex derivative of the face that reflects» [Winnicott, 1971]), vital and «nourishing» like the tray in Tino's memory.

The melodic lines present in language (which would reach down to the roots of the sound-universe of the primitive mother-infant relationship [Schenquermann, 1987]) would be suitable within a situation with straightforward affective valences for

exchanging states of being (Eigen, 2001) by means of a direct contact which arouses a consonant experience in the other.

It is not easy to provide an account of what happens in a session at this level of interaction since we obviously have no *ad hoc* musical stave available on which to transcribe the «notes» underlying our vocabulary: in other words, the multiply nuanced vocal tones contained in our interpretations. However, I will try to sketch out a picture that may show what I have in mind by making extended use of the concept of «listening to listening» (Faimberg, 1996).

Going back to the vignette at the end of the section on Clinical Material, I formulate the hypothesis that through his remembering Tino may have «reinterpreted» (*ibid.*), in accordance with his identification with the analyst, not only the analyst's propositional communications but *also* the melodic matrix underlying them.

And listening to the patient's associations following my intervention, I was in a position to translate into a verbal idiom what I had conveyed to him non-verbally: that is to say, I could convert what had happened in the transference into spoken words and thereby move in the direction of meaning and its expression.

CONTINUATION OF THE ANALYSIS

A salient element of the psychic work with Tino consisted in the elaboration of those functions of the setting related to the formal and normative conditions laid down in it. In this context, for example, the role played by the temporal boundaries which divide one session from another was quite unlike the harmony of the sound-universe I illustrated earlier, promoting a gap and, at times, an embryonic encounter with a third figure like a paternal object for Tino to acknowledge as a guide to go ahead of him.

Over time I began to notice the appearance of a faint libidinal component thanks to which the patient was able to establish an alliance with me, whereby he could start a slow process of self-observation, pushing himself beyond a superficial examination of his own internal world.

As the analysis progressed, it became clearer to Tino that much of his unhappiness derived from a self-destructive submission to the imperatives of a lofty, cruel part of himself which continually urged him to denigrate the inescapable biological laws that command us all, but which also trapped him in a lethal crystallisation of his existence. I remember him making the paradoxical exclamation, «But if I'm not to die... I can have a living death...!»

From what I have been able to reconstruct, the patient seems to be identified with an imposing construction comparable to a mother held to be superior but also detached and cold, like the building in the dream, one who idealised herself and her child, urging him «upwards» (the shining walls of the dream skyscraper) and compelling him to live under a regime laden with promise that was hard to fulfil. At last there came the

moment when she withdrew, abruptly letting Tino «fall» from her mind: that is, narcissistically disinvesting in him too quickly, as if she loved another child, the perfect one, and creating the conditions for a vertiginous panic (Perelberg, 2004): a child with too much invested in him by the maternal gaze, but then with too little.

FINAL COMMENTS

By looking at the analysis of a single patient (Hinshelwood, 2013), I have focused on him in detail, without claiming to offer an exhaustive explanatory framework, but with the intention of using the material to present my ideas and stimulate the readers'.

Having reached this stage in the discussion, picking up again the topic presented at the start of this paper, we can ask ourselves how much psychological work we are able to accomplish on the «narcissistic fortress», a rigid but also fragile fortress like the dream skyscraper, which seems to correspond to a mental functioning characterised by an equally rigid but also untrustworthy binary thinking which operates according to a symmetrical duality (omnipotence/impotence, eternity/death, etc.) responsible for preventing continuity in relationships and duration in the arc of life.

In other words, I am raising a question about what risks of an impasse there are in Tino's analysis and, in a wider sense, for patients with disturbances of a narcissistic type, while observing the broad individual spectrum on which this pathology manifests itself (Rosenfeld, 1987).

I will now address this problem, briefly recapitulating some factors that determine a difficulty with changes and psychological growth, then going on to reflect on what can contribute to bringing about transformations:

- Whatever constriction of his own limits has long been perceived by the patient, especially in the first years of treatment, as a sort of death on both concrete and psychological levels (understood as a narcissistic collapse): «Defining myself is like disappearing . . .» in Tino's words. Conversely, the endless self-repetition would ensure a megalomaniac guarantee of eternity thanks to the fusion with the primary object, since emergence into the world is equivalent to the matrix of time.

- A further consideration concerns the agonising contradiction of this arrangement: Tino remains bound, as in a pact with the devil, to an object which immobilises the Ego which wants to live and be separate.

- A third point concerns the analyst's inner dimension. In my experience, I have noticed that the patient does not only want to know how I might deal inside myself with the unknown represented by the parts he keeps in the shadows, or how I might bear his still uncertain ability to be «other» than his mother, accompanied ambivalently by the need to maintain the *status quo*.

Tino was also interested in knowing how I might conduct myself when faced with my own limits and hence implicitly interested in knowing, in my opinion, how I might cope with my dependency on these, and with their extreme opposite, omnipotence.

As Brenmann (1978) writes, an important step for the development and termination of analysis in the case of narcissistic patients consists in making a careful examination of our own narcissism, both in the patient's projections and in the personal dimension.

This is a substantial crux, given that the latter aspect can take on various configurations and for the reason that what is being postulated is an effort to open up for working through areas of oneself that have been made to resonate by the patient.

In Tino's case, this dimension has lent itself to being investigated, starting with the analyst's mental attitude towards a redemptive-thaumaturgic aspect which was perhaps present in our method as a legacy of the *darkness* of the hypnosis from which it derives (Fornari, 1976).

I am referring to the fantasy of a radical, perfect analysis which, in order to be so, should never really come to an end⁶ and should be conducted by an equally «interminable» analyst (Danon Boileau, 2010).

In fact, the goal of definitively discovering the *caput Nili* of the disturbances would leave the defensive structure fundamentally intact (De Simone, 1994), and would depend on an unconscious collusion with the patient's expectation that the analyst will play a parental role capable of making up for an unsatisfactory natural growth, or of possessing the remedies for psychic pain and death, in a mutual disavowal of limits.

The following dream fragment comes from this period.

He was in London and continually driving in his own car around the enormous roundabout at Elephant and Castle, in a growing state of excitement mixed with a marked unease, since he was unable to decide which of the many exits he should take. But he was suddenly struck by the desire to choose one which led to a new, unknown district for which he felt a blend of attraction and repugnance.

In his associations London is the city he would one day like to move to, while the noun «elephant» contains an assonance with his mother's surname, and the term 'castle' reminded him of a construction he had made as a child out of Lego, divided between pleasure in the game and fear of its coming to an end too quickly. It seemed to me in this dream the patient wanted to express the emotions he feels whenever he loses his belief in his grandiose conviction which authorises him to linger – even in analysis – without a goal in the vortex of infinite possibilities, as if he had identified with a paralysing circular time (which never passes because it always goes back to where it started) based on a tenacious primitive link. Maybe exploring the need to give up this

⁶ The problem of interminability presents itself on the clinical and theoretical levels as highly complex and elaborate (De Simone, 1994). In this paper I am confining myself to examining one of the multiple elements which come together to compose this picture.

mental condition opens the way for the emerging ability to deal with different flow of time, the worldly unidirectional one, bearer of transience and the mourning which accompanies it, but also the depositary of potential for detachment in the service of curiosity and inventiveness.

I would like to add that Tino seemed to be making an important request to be helped to integrate two opportunities: when to give way in the face of reality and when it is appropriate instead to maintain an area of illusion midway between reality and fantasy: a *Zwischenreich*, a halfway realm which enables one to leave the claustrum of binary thinking and allows a linking up with the symbolic.

After the sixth year of treatment it seems quite plausible to trace an oscillation between the set-up which stamped most of the patient's exchanges (the reactions of scorn and anger at situations which put a check on his pretensions to uniqueness and supremacy), and a state oriented towards a different way of putting himself into a relationship with objects, like the start of a cohabitation with a woman of his own age, marked by a sexuality veined with tenderness.

CONCLUSIONS

Despite gaining a greater plasticity in his inner life and weakening the demands for perfection coming from the Ideal Ego, the complexity and severity of the points I have discussed leaves open numerous doubts about the prospects for bringing this analysis to an (adequate) termination, although there is room for a cautious optimism.

It will be a matter of clinical judgement to graduate the search for psychic truth according to the Ego's capacity for tolerating it. It is as if in its deepest aspects, narcissistic suffering contained the uncanny conflict which the process of human evolution entails in the various phases of growth, between wanting to know and not wanting to know about our history and death, between acknowledging and denying our insignificance, between facing *anankê* as a necessary destiny (the «leaves of humanity» as it is expressed in a poem recently quoted by the patient) and rebelling against it. Like Narcissus, aiming to escape any self-awareness by following a dream of eternity.

SUMMARY AND KEYWORDS

Referring to myth as a tale that echoes individual pathological structures and can help us to understand them, the Author utilizes the story of Narcissus to discuss pathological narcissism and to consider the difficulties encountered when we treat patients affected by this pathology. Clinical material is presented from the analysis of a patient with narcissistic problems and anxieties about ageing and death. Clinical and theoretical issues related to narcissism are discussed subsequently, including the analyst's narcissism. Eventually, the Author deals with the analyst's role in the cure and stresses the importance, in his view, of the shared transformations that analyst and patient should undergo.

KEYWORDS: Ageing, analyst's narcissism, death, immortality, interminable analysis, limits, myth, Narcissus, perfection, transformations.

NARCISSE: DU MYTHE À L'ANALYSE. En assumant que le mythe soit un récit qui trouve son écho dans les structures pathologiques individuelles, et qui peut nous aider à les comprendre, l'auteur utilise l'histoire de Narcisse pour discuter du narcissisme pathologique et examiner les difficultés que nous rencontrons dans le traitement analytique des personnes avec de tels problèmes. On rapporte du matériel d'une analyse d'un patient avec des traits narcissiques prolongés et bouleversé par l'idée du vieillissement et de la mort. Ensuite, on discute des questions théoriques et cliniques sur le narcissisme, y comprises celles de l'analyste. D'autres perspectives sont également explorées qui peuvent nous aider à réfléchir sur l'impasse ou les risques d'interminabilité pas du tout rares dans ces cas. Enfin, l'Auteur discute du rôle joué par l'analyste dans le traitement, auquel il faudrait demander un processus de participation transformative.

MOTS-CLÉS: Interminable, immortalité, vieillissement, limites, mythe, mort, narcissisme de l'analyste, Narcisse, perfection, transformations.

NARCISO: DEL MITO AL ANÁLISIS. Se asume el mito como una narración que encuentra su propia eco en las estructuras patológicas individuales y que nos ayuda a comprenderlas. El Autor utiliza la historia de Narciso para debatir sobre el narcisismo patológico y examinar las dificultades que nos encontramos cuando tratamos analíticamente a personas con dichas problemáticas. Se describe el material de análisis de un paciente con amplios rasgos narcisistas y angustiado por la idea de envejecer y por la muerte. A continuación se examinan algunos asuntos clínicos-teóricos sobre el narcisismo, incluido el del analista. Se exploran además algunas perspectivas que pueden ayudarnos a reflexionar sobre el empuje o los riesgos frecuentes de casos interminables. Por último, se discute entorno al papel del analista en el tratamiento, a quien se le exige, según el Autor, un proceso de coparticipación transformadora.

PALABRAS CLAVE: Análisis interminable, envejecimiento, inmortalidad, límites, mito, muerte, narcisismo del analista, Narciso, perfección, transformaciones.

NARZISS: VOM MYTHOS BIS ZUR ANALYSE. Der Mythos wird als eine Narration angenommen, die das eigene Echo in den individuellen pathologischen Strukturen findet und die uns helfen kann, sie zu verstehen. Der Autor verwendet die Geschichte von Narziss, um über den pathologischen Narzissmus zu diskutieren und die Schwierigkeiten zu betrachten, denen wir begegnen, wenn wir Menschen mit solch einer Problematik analytisch behandeln. Es wird Fallmaterial der Analyse eines Patienten mit umfangreichen narzisstischen Zügen dargestellt, der von der Idee des Alterns und des Todes gequält wird. Nachfolgend werden einige theoretisch-klinische, charakteristische Themen über den Narzissmus behandelt, einschließlich des Analytikers selbst. Es werden ferner auch einige Perspektiven erkundet, die uns helfen können, über die mögliche Sackgasse oder die Unendlichkeitsrisiken nachzudenken, die in diesen Fällen nicht selten sind. Schließlich wird die Rolle des Analytikers in der Behandlung erörtert, die, so der Autor, einen Prozess der transformativen Mitbeteiligung erforderlich macht. **Schlüsselwörter:** Altern, Grenzen, Mythen, Narziss, Narzissmus des Analytikers, Perfektion, Tod, Transformation, Unendliche Analyse, Unsterblichkeit.

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Original italian version:
Riv. Psicoanal., 2017, 2, 347-364

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