

below'; the impact of trauma on the hypothalamic–pituitary–adrenal axis and its embodiment in the nervous and endocrine systems; and how, given adverse developmental and interpersonal circumstances, this complex mind–body system can founder, producing the phenomena of mental illness.

Ramus is no doubt right to suggest that intensive psychoanalysis is an inappropriate first-line treatment for autism, but to base his widespread condemnation on this aberration is to mistake the part for the whole. From a psychoanalytic perspective the latter error might be a manifestation of 'paranoid schizoid', rather than 'depressive position' thinking, of pre-mentalising rather than mentalising mode. Admittedly, this letter could equally be seen as a last-ditch defense of a dearly held good object. Both viewpoints no doubt have fascinating, if as yet undiscovered, brain correlates.

- 1 Ramus F. What's the point of neuropsychology? *Br J Psychiatry* 2013; **203**: 170–1.
- 2 Strathearn L, Fonagy P, Amico J, Montague PR. Adult attachment predicts maternal brain and oxytocin response to infant cues. *Neuropsychopharmacology* 2009; **34**: 2655–66.
- 3 Coan J, Schaeffer H, Davidson R. Lending a Hand: social regulation of the neuronal response to threat. *Psychol Sci* 2006; **17**: 1032–9.
- 4 Carhart-Harris R, Mayberg H, Malizia A, Nutt D. Mourning and melancholia revisited: correspondences between principles of Freudian metapsychology and empirical findings of neuropsychiatry. *Ann Gen Psychiatry* 2008; **7**: 9–42.
- 5 Holmes J. An attachment model of depression: integrating findings from the mood disorder laboratory. *Psychiatry* 2013; **76**: 68–86.

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It is hard to know with whom Ramus<sup>1</sup> is most angry. Is it the esteemed neuroscientists (Damasio, Friston, Kandel, LeDoux), whom he considers to have lent credence to psychoanalysis? Or is it the neuropsychologists (largely engaged via only one position paper by Panksepp and Solms and an article co-authored by Carhart-Harris), who represent to him another attempt to 'rehabilitate' Freud? Or is it the French psychoanalysts, who, he argues, harm patients and hold back 'evidence-based psychiatry'? Or is it Freud himself, whose ideas Ramus regards as both unoriginal – Plato and Pierre Janet said it all before – and malignant?

The historian of psychoanalysis John Forrester would not be surprised by Ramus's mode of critique. Forrester noted in the late 20th century that the 'classic manoeuvre' by those opposing Freud is to argue that 'if what he says is right, he stole it from somewhere else [...] On the other hand, if what he says is wrong, it belongs entirely to him and it is we who are the fools if we believe it.'<sup>2</sup> Ramus's scattergun attack on neuropsychology should, indeed, be seen as the latest skirmish in the interminable Freud Wars.

But what Ramus's attack on neuropsychology obscures – by interpreting neuropsychology as, ultimately, an attempt simply to 'rehabilitate' Freud – is what is arguably most interesting about it (at least from my perspective as a historian of science and psychiatry). For although neuropsychology situates itself in proximity to Freudian psychoanalysis, it is a distinct project.<sup>3</sup> It differs in several of its scientific methods, terminologies and objects; the canon on which it draws; and some of its modes of clinical treatment.<sup>4</sup> And consider Solms and Panksepp, whom Ramus, like many, takes to be the central architects of neuropsychology. There is something both fascinating and unexpected about a neuropsychologist and psychoanalyst (Solms) joining forces with an affective neuroscientist (Panksepp) whose research career has been built on electrical stimulation studies

involving non-human animals (which vocalise, but do not talk; cf. psychoanalysis as 'the talking cure'). Their partnership is built on their separate and conjoined challenge to dominant models of the emotions in cognitive and affective neuroscience<sup>5,6</sup> – and affect, indeed, forms one of the main lines of neuropsychological research. Both would virulently disagree with Ramus's claim that the ideas they attribute to neuropsychology 'are already mainstream within cognitive, social and affective psychology and neuroscience'.

To understand the specificities of 'neuropsychology' – in relation to as well as in contradistinction from psychoanalysis – requires, at the very least, reading the peer-reviewed journal *Neuropsychology* (not referenced by Ramus), which is the central locus for scientific and clinical data, disputation and model-building among neuropsychological researchers and clinicians, as well as their interlocutors. For Ramus, such efforts would be unnecessary. His consummate lack of doubt as regards what (the heterogeneous practices of) psychoanalysis and neuropsychology are and do, as well as '[w]hat is needed' for any proper 'rehabilitation' of psychoanalysis, ensure that for him any further enquiry would be otiose. His scientific and moral certainty is both remarkable and dismaying.

- 1 Ramus F. What's the point of neuropsychology? *Br J Psychiatry* 2013; **203**: 170–1.
- 2 Forrester J. *Dispatches from the Freud Wars: Psychoanalysis and its Passions*. Harvard University Press, 1997.
- 3 Papoulias C, Callard F. The rehabilitation of the drive in neuropsychology: from sexuality to self-preservation. In *Freud's Referenzen [Freud References]* (eds C Kirchoff, G Scharbert): 189–215. Kulturverlag Kadmos, 2012.
- 4 Fotopoulou A, Pfaff D, Conway MA (eds). *From the Couch to the Lab: Trends in Psychodynamic Neuroscience*. Oxford University Press, 2012.
- 5 Panksepp J. *Affective Neuroscience: The Foundations of Human and Animal Emotions*. Oxford University Press, 1998.
- 6 Solms M, Nersessian E. Freud's theory of affect: questions for neuroscience. *Neuropsychology* 1999; **1**: 5–14.

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**Author's reply:** I would like to thank Callard, Holmes and Solms for taking the time to discuss my previous paper.<sup>1</sup> I actually find little in their commentaries that is not already addressed in the target article. I will therefore focus on a few points.

According to Callard, my first point reflects 'the "classic manoeuvre" by those opposing Freud', that 'is to argue that if what he says is right, he stole it from somewhere else'. In my view, whether the manoeuvre is 'classic' matters little compared with whether it is well founded. Whether broadly accepted Freudian ideas about the existence of unconscious processing, unconscious motives, conflicts between desires, reason and society's constraints, etc. were Freud's 'discovery' or originated from earlier thinkers is simply an empirical matter that can be decided by checking the works of Janet, Galton, Charcot, Krafft-Ebing, Schopenhauer, Nietzsche and others. And whether his more original contributions to these ideas (e.g. the Oedipus complex) have any validity is also an empirical matter.

Holmes provides a nice illustration to my second point. The studies by Strathearn *et al*<sup>2</sup> and Coan *et al*<sup>3</sup> are perfectly well understood using mainstream psychological concepts such as attachment, which have nothing to do with psychoanalysis. It is indeed ironical that, although John Bowlby was trained as a psychoanalyst, he found psychoanalytical concepts so inadequate to explain his observations that he had to develop an entirely

independent theoretical framework for attachment, based on up-to-date knowledge in ethology and the various areas of cognitive science, and that turned out to be rejected by the psychoanalytic community of the time.<sup>4</sup> It is of course perfectly fine for contemporary psychoanalysts to now admit the errors of their predecessors and embrace attachment theory. However, adding another layer of psychoanalytical concepts to an already functioning theory would really need to increase explanatory power in order to remain parsimonious. Merely finding ‘consistencies’, as Carhart-Harris *et al*<sup>5</sup> attempt to do in their review, adds little. It is also fine, as Solms proposes, to attempt to ‘finish the job’ and test hypotheses inspired from Freud’s writings. What matters is whether these hypotheses are better empirically supported than competing ones, not whether they seem ‘coherent’ or ‘intellectually satisfying’ to some.

Finally, I entirely agree with Holmes and Solms that the French psychoanalytically inspired treatment of autism does not by itself justify rejecting psychoanalysis as a whole. This was indeed not meant as a definitive condemnation, but rather as an illustration of the unfortunate side-effects of uncritical Freudism (and Lacanism, for that matter). It remains troubling, though,

that despite neuropsychologists’ admirable ambitions, when one takes a worldwide perspective, psychoanalysis seems to be the main factor of resistance against evidence-based psychology and psychiatry.

- 1 Ramus F. What’s the point of neuropsychology? *Br J Psychiatry* 2013; **203**: 170–1.
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- 3 Coan J, Schaeffer H, Davidson R. Lending a hand: social regulation of the neuronal response to threat. *Psychol Sci* 2006; **17**: 1032–9.
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