

The Reasons of Madness

Jean-Max Gaudillière

These notes are inspired by two experiences and their convergence.¹ First a clinical experience that led Françoise Davoine and myself to work over more than twenty-five years as psychoanalysts in the psychiatric hospital with patients diagnosed as mad, psychotic, schizophrenic, etc. The other experience interrogates, year on year,² these clinical issues from the work of other clinicians, and also philosophers or writers of literature and poetry, who in their fields come across lessons relating to madness.

I shall begin with a brief incursion into the merciless clarity of the transferential space that is always opened straightaway by madness in its particular dynamic. One day the doctor who was head of the department asked me to contact a chronic patient, as we say – which there means in fact outside time and so ‘achronic’. He was poorly. Indeed for some weeks he had withdrawn into his room, was hardly taking food any more and was neglecting his body, which was covered in the excrement that he was no longer controlling. I turned up at the end of his bed and announced my name and position in the hospital, which he had clearly known for quite a while. His reply, emphasized by his feverish eyes and unanswerable tone of voice, immediately took my bogus identity card down a peg: ‘And *I* am a coded guy of the anti-past’, was all he let out.

Unless I file away this enigmatic, pregnant utterance, which raises all kinds of questions, in the cupboard of a diagnosis of some sort, those points of language, code, definition of time and even negation are meant for my attention: since then I have tried not to minimize those issues, which are of course scientific in the strictest sense of the word, in that they bring us back without further ado to the ‘vertex’ (as Bion³ would say) of causality whose coordinates seem to be self-evident anywhere for articulating the requirements for rationality in the field of knowledge.

As regards madness, however, things are perhaps not so immediately reducible to the canon that is accepted as a presumption for all possible scientific discourse – particularly the medical. In the *Blue Book*⁴ and other thoughts Ludwig Wittgenstein helps us to frame the problem more clearly:

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It seems at first sight that that which gives to thinking its peculiar character is that it is a train of mental states, and it seems that what is queer and difficult to understand about thinking is the processes which happen in the medium of the mind, processes possible only in this medium. . . . We are tempted to say, 'the mechanism of the mind must be of a most peculiar kind to be able to do what the mind does'. But here we are making two mistakes. For what struck us as being queer about thought and thinking was not at all that it had curious effects which we were not yet able to explain (*causally*). Our problem in other words, was not a scientific one, but a muddle felt as a problem. (p. 5)

Here, clearly set out, is the root of most of the questions concerning madness and the rationalities that try to deal with it, whether we are in the area of the hard sciences (such as neurobiology), that of the soft sciences such as psychoanalysis and sociology among others, or lost in the 'no-science land' with the disciplines of the social management of madness such as types of chemical, electric, and even yet again surgical, intervention, that have simply handed over these premises of rigour to the modelled, goal-oriented world of technical expertise.

So we shall continue to listen to Ludwig Wittgenstein:

Supposing we tried to construct a mind-model as a result of psychological investigations, a model which, as we should say, would explain the action of the mind. This model would be part of a psychological theory, in the way in which a mechanical model of the ether can be part of a theory of electricity. . . . We may find that such a mind-model would have to be very complicated and intricate, in order to explain the observed mental activities, and on this ground, we might call the mind a queer link of medium. But this aspect of the mind does not interest us. The problems which it may set are psychological problems and the method of their solution is that of natural science. (*ibid.*, p. 6)

Immediately afterwards, Wittgenstein reaches the heart of the problem of rationality to which the patient in the psychiatric hospital directs us so commandingly, when he evokes its fundamental parameter,:

Now if it is not the causal connection which we are concerned with, then, the activities of the mind lie open before us. And when we are worried about the nature of thinking, the puzzlement which we wrongly interpret to be one about the nature of a medium is a puzzlement caused by the mystifying use of our language.

Only then are we on a firm enough footing to be able to tackle the problem at hand:

This kind of mistake recurs again and again in philosophy; e.g. when we are puzzled about the nature of time, when time seems to us a *queer thing*. We are most strongly tempted to think that here are things hidden, something we can see from the outside, but which we can't look into. And yet nothing of the sort is the case. It is not new facts about time which we want to know. All the facts that concern us lie open before us. But it is the use of the substantive 'time' which mystifies us. If we look into the grammar of that word, we shall feel that it is no less astounding that man should have conceived of a deity of time than it would be to conceive of a deity of negation or disjunction.

In other words this abstraction – time, which belongs to our standard imaginary dimensions to the extent that it no longer seems to be so, except when it causes a problem – must be treated with the same care, in the scientific use we make of it, as the best articulated logical categories.

Let us go back to the clinical experience: first to the reply from the patient who seems clearly at death's door, and also to the psychologists' and psychiatrists' observations. Either I in fact decide to pay no attention to the statement set out in theoretical terms 'coded guy of the anti-past': I have social support for that; anyhow he is crazy as his presence here proves, no one understands what he says, in any case it makes no sense, and I assume I am dealing with mental confusion as a semiological feature. Or else I accept the 'language game' suggested to me and from that moment I can only position myself in it as *subject*: respond to it, and take responsibility for my position, by saying 'I'.

Which sometimes does not prevent the most objectivizing discourse in psychiatric observation from performing an imperceptible u-turn back to its default position, the one that describes symptoms (and not their presumed cause). Especially if they take into account the two or three previous generations following one another, psychiatrists presenting cases mention a veritable phenomenon of 'time stopping': some obstacle comes and objectively prevents the next generation joining the line. The same observers, who will then imagine they are theoreticians or even experts in causality, will give this the name 'repetition', for example. 'And that's why your daughter won't speak.' More cautiously but at the same time leaving the question open, Freud speaks in certain cases of an 'undeniable complicity of chance'. This halt in time used in the past to produce psychiatric curiosities who would wander endlessly around the hospital: a look, a child's face, frozen since when in the body of an ageless creature; infectious epidemic diseases that had no effect on organisms which seemed in fact to inhabit another dimension.

Paradoxes crowd in upon one another: in the here-and-now of interviews an omnipresent false present reduces to the same level the three dimensions of time to which rationality as identified with causality has accustomed us without our even realizing it. Then this instantaneous space can command the therapist's attention, or simply the patient's this time, as a cause *that is being asked to explain* a disastrous event that took place 50 or 60 years before he was born.

Yet again could 'there's always a cause!'⁵ be a motto, a slogan for our human sciences? Looking for the past *beneath* an element outside of time, or sense *beneath* non-sense. Above all it is a sign that there has been a deliberate change of paradigm, for instance in trying to prove the neurones that produce meaning are malfunctioning and perhaps making them, along with some others, incapable of doing any damage, that is, incapable in particular of functioning as mechanical agents of speech. If we cannot position ourselves as subject in the language game triggered by madness, let's cut the phone wires! These paradoxes, dead ends and short-circuits force us then, not without some apprehension, to ask the question: what if rationality here was not equivalent to the field of causality?

Let us go back to those notations: they all refer, in various styles, to a crucial challenge to the dimension of time. Not to an epiphenomenon that would be reducible in the end, after further analysis, to the generality of the cause-effect sequence, but

to a zone, an open field of research where that dimension does not function within the rules of its normal grammar. The logical consequence occurs, immediately and shockingly, in that one would first look for the error in a badly constructed or trick syllogism: 'if the arrow of time does not function in its normal, scientifically generalized movement, then in this field the principle of causality cannot be strictly evoked.'

In the same text Ludwig Wittgenstein teases out our new difficulty as follows.

Now what makes it difficult for us to take this line of investigation is our craving for generality. . . . Our craving for generality has another main source, our preoccupation with the method of science. I mean the method of reducing the explanation of natural phenomena to the smallest possible number of primitive natural laws, and, in mathematics, of unifying the treatment of different topics by using generalizations. Philosophers constantly see the method of science before their eyes, and are irresistibly tempted to ask and answer questions in the way science does. This tendency is the real source of metaphysics, and leads the philosopher into complete darkness. I want to say here that it can never be our job to reduce anything to anything, or to explain anything. Philosophy really is purely descriptive. (Think of such questions as 'Are there sense data?' and ask: What method is there of determining this?) (*ibid.*, pp. 17–18)

Beyond this coruscating irony, but of course not supplying an automatic, generalized solution to this troublesome problem, Ludwig Wittgenstein nevertheless points to the only possible rigorous field in the areas I am discussing here, and the manuals intended for young researchers in the human sciences would do well to take note of it: 'Instead of "craving for generality", I could also have said "the contemptuous attitude towards the particular case".'

So have we made progress on the requirements of rationality for research into madness? Yes, if we can accept the oxymoron audaciously used by Plato in the *Phaedrus*: Socrates talks (244e) about the *orthôs mainomenoi*, those who *are right to be crazy*,⁶ because he considers madness has a cardinal function, and a social one: by using a symptom that affects one of its members, it can lift the curses that for too long have descended on a whole lineage.

Yet again it is a kind of grammar of the use of the word madness that Plato shows us here, shockingly enough for us to have taken it on board relatively little. In fact it is the clinical experience that we are talking about, and the theoretical and practical conditions within which the therapist can operate there.

1. The phenomenon of time standing still *does exist*: in my view this particular feature correlates with the impossibility of inscribing a catastrophe in what is passed down from generation to generation, the process that creates history. In Lacanian terms, which are useful and particularly easy to handle, there is no possible signifier at this point: no signifier, no other to reply. And so we are right to claim a particular property for this field of research: insofar as there is no signifier, the dimension of time has no material for existing in the exchange between people.

2. Thus we must *ipso facto* suspend at this point the generality of the principle of causality, which becomes literally senseless when the arrow of time is not pointing, cannot be pointing, from the past towards the future. And then we must say firmly

that any project that tries to intervene in madness by importing the principle of causality by force, is attempting above all to deny its essential logical (Wittgenstein would say grammatical) quest, that is, its very existence as a human activity. With the possibly totalitarian consequences that may themselves in the end become more generalized.

What we have gained in 'humanity' by including madness among the 'mental illnesses' is thus immediately lost in rigour when we combine it with the obsession with explaining them on the basis of an assumed lesion, the touchstone of the medical reasoning formulated by Claude Bernard. But even though lesions observable in the brain clinic can give rise to disturbances that may sometimes be compared with certain psychiatric symptoms, the reverse has no scientific validity and may even open the way to practices in so-called treatment that are almost crazy: Sir John Eccles,⁷ a Nobel laureate, spoke amusingly of a *delayed materialism* held to by those who still say there must of necessity be a lesion, in the brain, the neurones, the synapses, etc., but one that is too small, too hidden for it to have been brought to light yet. But that one day, in ten years, in ten centuries, it will definitely be seen.

Here we are in a discourse whose parameters are quite heterogeneous, but one that at any event would like to cure madness by making it disappear. The same Claude Bernard used to define *health as the organs' silence*: we have indeed invented all kinds of ways of stopping speech from speaking and imposing silence on that organ as well, a silence that is elsewhere a criterion of health. And that means in particular that we can experiment and sell legal or illegal drugs that in this case have irreversible effects as observable lesions. But those effects have the advantage of simply excluding madness: excluding it in particular from social science research, which is precisely its relevant field, by reducing the matter to a quantitative problem of managing the flow of people, of users, as we *rationaly* say nowadays. Users of madness, or users of medication that today is almost forced on people.

3. The third prior condition on these shifting sands: nevertheless, attempting to make madness and the mad serve an ideology, in order to denounce the authorities and get group support, where it is a question of producing human freedom, is not a more secure rationality. The arguments of philosophers or historians who are keen on these attempts, and the practices they influence, sometimes do not even meet standards of accuracy or especially the most humble ethics of a subject whose crazy work is a response to the need to produce a reliable otherness, where every criterion of reliability has disappeared.

4. This particular dynamic may also be described on the basis of the transferenceal features at work at these points, these moments of madness. Their target (and I am simply quoting Plato⁸ here) is the impossible inscription of socio-historical catastrophes that affect a whole lineage. Their target and not their cause. The before and after are no longer coordinated in a measurable succession, nor are the categories of internal and external, I and other, individual and collective. Careful examination of the interferences produced and recorded in this field, and particularly their implementation if addressed to the principal actor in the research, that is, the crazy person, are a more rational approach to these criteria, whose close interrogation is also an issue of knowledge.

Now we are in a position to define a challenging research field in all rationality, but a rationality untainted by causality: it is the one that is initiated by madness in search of the authentication of a fact or a series of facts. And this puts objectivity in its place and avoids having to invent a new theory when we are faced with each new case, like the sociologist mocked by Henri Poincaré in *Science et méthode*:⁹

The *Sociologist* is more embarrassed (*than the Physicist, the Biologist, or the Astronomer*). The elements, which for him are people, are themselves too dissimilar, too variable, too capricious, too complex in a word; so the story does not begin anew; how then should one choose the interesting fact that is the one to start things off again; the method is precisely the choice of facts, so one must first concern oneself with inventing a method, and many have been thought up, because none of them stood out; each sociologist's theory proposes a new method that the new doctor in any case takes care not to apply, so that sociology is the science that has the most methods and the fewest results. (Poincaré, *op.cit.*, p. 20)

Personally I would say the same about the so-called sciences of madness: leaving aside commercial results and ideological uses, we need to be able to figure out the rationality of a field that represents, by construction if I can put it that way, the zero degree of objectivity.

Let us not fool ourselves: the question of the survival of madness as a human practice is inseparably linked to freedom-producing spaces, where totalitarian social systems (on whatever level) are trying above all to eradicate facts, relegate them to non-existence. With regard to the practice of research, initiated or indicated first by the symptom in its social diversity, and carried out therapeutically in the 'one-to-one laboratory' (in Harry Stack Sullivan's¹⁰ phrase), it is in the interference between two worlds, in acknowledging and naming it, that the fertility of this field's production resides. As Henri Poincaré also writes:

Each time two worlds, which are generally strangers to one another, happen to react one on the other, the laws of this reaction cannot but be very complex, and furthermore a very small change in the initial condition of these two worlds would have been enough for the reaction not to take place. (*ibid.*, p. 68, *Le hasard*)

We should add that if it has happened, as is indicated not by introspection but the combined observation system of two fellow researchers, this interfering reaction is henceforth part of the facts to be studied in the field of the experience: it even initiates the simple possibility of it.

You may ask what use there is in acknowledging and naming all this complexity in confrontations that encounter above all urgency and suffering, As far as we are concerned, is it about adding to technical progress in direct interventions on the human mechanism, or with the aim, apparently more nobly, to make man better and to induce ataractic forgetting of past or present catastrophes? If I decided to say that clinically our way of talking with madness (and not only about madness) produces observable therapeutic effects, there would be someone waiting to pounce on me for going back to all-powerful causality; which would not trouble me in the least since the work of analysis is at these points above all a matter of starting time off again, producing a *new signifier* (the phrase is Lacan's at the end of his life) where all otherness had been destroyed.

But I would rather conclude here by quoting Poincaré (whom Wittgenstein seems to have read closely) for the last time. In 1907 the mathematician had the effrontery to address these brief words to the conquering Americans as well as even more hard-bitten ideologues.

As for me, do I need to say it, I could not be satisfied with either one ideal or the other: I would not want either that greedy, blinkered plutocracy or that virtuous, mediocre democracy, which would be concerned solely to turn the other cheek and where there would live wise but incurious, people who would avoid excesses and so not die of disease but certainly of boredom. But that is a question of taste and it is not that point I wish to discuss.

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February 2003. And so, back in France, I reread this text, enlightened by the reaction of our African colleagues.

Indeed the discussion that followed this paper in Porto-Novo means that we can develop those thoughts here. The participants included students researching in philosophy, doctors, ethnologists, biologists or traditional practitioners. And some of them were identified with several of these disciplines.

1. Based on the clinical episode described at the beginning, the reasoning that defines the field of research into madness, insofar as it suspends the discursive causal chain – because of the interruption at some point of the signifying chain – quickly raised, as part of our dialogue, practical and theoretical questions familiar to all these specialists in the area. In fact it was an intervention by the analyst, situated later in the conversations with that patient, which interested them, compared with their own approaches: it had to do with the point of the interference where the analyst positioned himself in relation to the evocation of the troubled period of the Second World War.

The patient's father had been affected by the uncertainties of those years, whereas the analyst was born in 1943, after his own father had escaped the year before from the camp where he had been imprisoned, having been captured at the front. All that happened about 15 years before the 'coded guy of the anti-past' was born and occurred in a way in our national 'anti-past'.

As we see, here it is not about developing a causal rationality for that patient's madness, a rationality external to his presumed delusional confusion, but about finding, in the interwoven chances of our encounter, a door to enter into the field.

It is true that language assumes particular flexibility on these occasions. The force of that man's utterance, at the beginning of our first significant conversation by his hospital bed, allows us to glimpse the fact that ways of speaking – as well as ways of writing – may 'lend themselves' to such circumstances: thus people used to say of a fabric that it would 'lend itself' (*se prêter*), meaning mould itself naturally to the body that it was to clothe because of its texture, which was itself the result of the centuries-old experience of spinners and weavers.

The serendipities of poetry sensitize us to these efforts of language. It is also made

to bend, extend, telescope, mould at surprising points that cannot always be analysed in terms of classical rhetoric. For example certain images that rise up in these cases in fact contain forms irreducible to metaphor.¹¹

W. R. Bion, as a psychoanalyst and writer, excels at involving us in such experiments with language. His style often appears close to that patient's mode of address in the hospital when he talks about 'thoughts without a thinker',¹² which are seeking a 'thinker' in order to be thought. In fact, like the great sportsman he also was, he is encouraging us to make the uses of language as flexible as humanly possible so that, for instance, we can give space at the right moment to the interference that then obviously becomes the *subject* of the utterance.

2. Our African colleagues, like the Sioux we also spoke with long ago on the South Dakota plains, explained to us that such potentially constructive interferences also had a place for them on the margins of recognized institutions. Thus as 'medicine men' they might be able to intervene with a patient from their tribe in the context of white people's hospitals and at the express request of the doctor, who could ring one of them in certain specific cases. These 'medicine men', who were far removed from any New Age syncretism, might very well go as patients to the same hospital, with appendicitis or a heart problem for instance.

But if language carries within itself ways of making its own limits more flexible, the same is not true of institutions. Indeed they cannot remain in a discourse that gives room to facts outside of causality. Thus, as far as madness is concerned, the clinical research, falling back on the absolute primacy of neuro-biological research,¹³ is attempting to organize, by persuasion or force, the return of the curious beast within the universal fold of organicist medical discourse.

It is true that it can be proved that what madness says – or does – is inseparable from neurological implications. Without doubt the same locations in the brain are involved as the ones that are observable *in vivo* today when we speak, listen, see, etc. Nevertheless the logical implications that rigorously determine the field of madness take precedence over observation when the latter is necessarily and deliberately positioned outside that field. And here rationality reduced to an exclusive norm experiences, even neurologically, a veritable short-circuit. Because it cannot organize *from outside* the correction of messages distorted by the presumed illness, and diagnosed as confused or simply senseless, reason chemically and surgically breaks the transmission circuits, both internal *and* external. Lobotomy, which in its time earned the Nobel Prize for medicine for the Portuguese scientist Egas Moniz (1949: for his discovery of brain arteriography and his work on the neurosurgery of the brain/leucotomy) has no other logical justification, any more than chemical interventions into neurotransmitters have. Of course they have social consequences and indeed social objectives: excluding from the circuit of speech such irreconcilable utterances. But the brutality of the 'therapeutic' acts, as well as the crude nature of the statistical judgements that legitimate them after the event, do not come close to the precision of the work of madness. It is not my purpose here to launch aesthetically into a new *Praise of Folly*,¹⁴ but to develop a coherent and feasible practice that accepts its own rigour, and to authenticate it.

3. So what kind of knowledge are we heading towards based on these premises? It seems that experimental science and philosophy have a common interest in the definition of the exercise of critical thought. In 1766 Emmanuel Kant, who was opposing Swedenborg's delusional ideas, wrote in his *Dreams of a Visionary*:

Other than that it seems to conform more to reasonable thinking to take one's principles of explanation from the material of experience than to lose oneself in the dizzying notions of a half poetic half reasoning reason, this last party gives an excuse for mockery, which, whether it is well or ill founded, has the power, more than any other means, to hold back insubstantial research. For the intention to carry out serious interpretations of the visions of 'fantasts'¹⁵ is enough to awaken mischievous suspicions, and the philosophy that lets itself be discovered in such bad company arouses mistrust. I have probably not contested the presence of false perception in these apparitions; and I have even seen it not as a probable cause making one imagine one is communicating with spirits, but a natural consequence of this communication; but is there any madness that cannot be reconciled with a philosophy without foundation? Thus I do not blame the reader at all if, instead of seeing visionaries as the half-citizens of the other world, he quite simply dismisses them as candidates for the asylum and in so doing frees himself from any further research.

Even in philosophy caution seems here too to impose the short-circuit. However, he goes on, not without some humanity:

But if we take everything like this, the way to treat this kind of follower of the spirit world must differ greatly from the one that resulted from previous ideas, and whereas in the past people found it necessary sometimes to *burn* some of them, now we will be happy with *purging* them. Better still, in order to do that, we need not have gone back so far and got the assistance of metaphysics in order to seek out secrets in the fevered brain of deluded enthusiasts.¹⁶

So we should not seek the assistance of metaphysics. But why should we reject the theoretical and practical lessons of people like Faulkner, Pirandello, Kenzaburo Oé, Bion and others? Indeed it is in *the tough reality of fiction*¹⁷ that the transmission of the most sensitive clinic of madness has taken refuge today, the one that *shows the facts* where the logos rejects them and cancels them out.

Personally I propose a unified field of madness that does not let itself be compartmentalized by divisions between disciplines; where the madness of doctors, as well as the madness of writers, philosophers and poets, opens up a working space where a human and social activity with a recorded history longer than most in any civilization is carried on. Indeed, if we do not confuse it with neurological disorders, madness only exists when it lets us know. It stumbles against the catastrophic limits of the social bond, it is the one that gets people shut away, the one that is shown in theatres (or in lecture theatres for the so-called 'patient presentations'), in the novels that appear after all wars, in the memoirs published after all totalitarian regimes.

Trying to understand: W. R. Bion stressed the *arrogance*¹⁸ of such a demand as regards insecure social situations. After watching in silence, sometimes for generations, madness takes centre-stage as both a symptom and a healing process aimed at putting a certain knowledge into circulation together with the techniques needed to approach a knowledge of the Real.¹⁹ This knowledge consists of elements outside the

logos, reason and social exchange, where historical and political disasters in particular have carried away even the foundations of reliable otherness.

The madness/reason pair are in the same situation as those determined partners who broke off their marriage long ago. They both try to make a new life for themselves on their own. But the fundamental bond persists and forces them to recognize it in situations where they do not expect it to. Here we find in our own strategy the issues raised by Paulin Hountondji in his Introduction to the publication of the seminars held around the theme of *Endogenous knowledges*:²⁰ 'And so we have opted to find another word: "endogenous knowledges" seemed the best. The phrase evokes the origin of the knowledge in question by designating it as internal products drawn up from the cultural depths, in contrast to exogenous knowledge imported from elsewhere' (pp. 14–15 'Demarginalizing').

I will borrow from him once more for my conclusion, since the preceding lines are associated first of all with a practice: 'The question of questions is still and always the same one: what is to be done? The interrogations in this book refer to problems of scientific policy and straightforward politics. They arise out of practical concerns and should allow us, beyond the maze of theoretical analysis, to respond to those concerns' (*ibid.*, p. 31).

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Notes

1. I presented the following paper, under the title 'Dans la bouche de la folie, de la raison à la ration', at the 'Encounter between Rationalities' conference which took place in September 2002 in Benin. Paulin Hountondji had asked Françoise Davoine and myself to give expression to the voice of madness in its relation to our practice as psychoanalysts and our research in the human sciences.
Here I have added some thoughts inspired by conversations with the various practitioners, philosophers, mathematicians (in particular those of African origin) which that wonderful conference gave us the opportunity to enjoy freely.
2. The weekly seminar at the Ecole des Hautes Etudes en Sciences Sociales in Paris. Since the late 1970s, under the generic title 'Madness and the Social Link', it has been setting our clinical practice alongside various cultural, medical, fictional and aesthetic approaches in the whole of the field defined by madness.
3. Wilfred R. Bion, *Attention and Interpretation*, Karnac, 1970, p. 21. Chap. 2 'Medicine as a Model', §9: 'The patient talked freely, but his communications are disjointed sentences which would, anywhere but in analysis, be described as "incoherent". Such a term is insufficiently illuminating to lead to psycho-analytical interpretation, but the "vertex" (the "point of view" provided by regarding an analysis as an ordinary conversation) gives me a descriptive term suitable for immediate purpose. As it is not suitable for continuing the psycho-analytical discussion, the term "incoherence" must be observed more critically.'
4. Ludwig Wittgenstein, *The Blue and Brown Books*, New York, Harper Torchbooks, Harper & Row, 1965, pp. 5 *et seq.*
5. Translator's note: An untranslatable pun depending on the existence of two main meanings for the

French verb 'causer': 'to cause' and 'to talk'. '*Cause toujours!*' is a colloquial and ironical expression normally meaning something like 'You don't say!' Here it is pressed into service to indicate an emphasis on causality.

6. Here I need to substitute my own grammatical construction of certain sentences for the confusions put over by most interpretations of this magnificent, limpid text.
7. John C. Eccles, *How the Self Controls the Brain*, Berlin/Heidelberg/New York, Springer Verlag, 1994.
8. The same paragraph: Plato, *Phaedrus*, 244e.
9. Henri Poincaré, *Science et méthode*, Paris, Editions Kimé, 1999, chap. 1 'Le choix des faits' (first edition Flammarion, 1908). Chapter 1 repeats the preface to the American edition of *La Valeur de la science*: 'The choice of facts', translated and so published first in English by G. B. Halsted, New York, 1907.
10. H. S. Sullivan (1892–1949): his clinical and theoretical work, based on his practice with schizophrenia, prepared American psychiatry to receive Freud's books. With Frieda Fromm-Reichmann, he had a lasting influence on psychiatric and psychoanalytical research in the direction of a rigorous inclusion of psychotic transference. The phrase 'one-to-one laboratory' or 'twosome laboratory' was suggested by him to characterize this type of research. See Helen Swick Perry, *Psychiatrist of America, The Life of Henry Stack Sullivan*, Cambridge, MA, Belknap Press of Harvard University Press, 1982.
11. We can refer here to certain books by the mathematician René Thom who sets out, from his viewpoint, the appearance of forms on the edge of catastrophes. René Thom, *Stabilité structurelle et morphogénèse*, Paris, Interéditions, 1977; and *Paraboles et catastrophes, Entretiens sur les mathématiques, la science et la philosophie*, Paris, Flammarion, 1983.
12. Wilfred R. Bion, *Second Thoughts*, London, Karnac Books, 1984, chap. 10, 'Commentary': 'With my present experience I would lay more stress on the importance of doubting that a thinker is necessary because thoughts exist. For a proper understanding of the situation when attacks on linking are being delivered it is useful to postulate thoughts that have no thinker. I cannot here discuss the problems, but need to formulate them for further investigation, thus: Thoughts exist without a thinker,' p. 165.
13. See for example Eric R. Kandel, 'A new conceptual framework for psychiatry', in *American Journal of Psychiatry*, 1997: 'We are facing the interesting possibility that, since techniques of neuro-imaging are improving, these techniques may be useful not only for diagnosis of various neurotic illnesses but also for following up the progress of psychotherapy.' In 2000 Eric R. Kandel was awarded the Nobel Prize for medicine for his work.
14. Erasmus, *Eloge de la folie (In Praise of Folly)*, first edition, Paris, 1511. The book was reprinted 45 times in Erasmus's lifetime and translated into every language.
15. This is how the philosopher diagnoses those who rely on their fantasies and hallucinations rather than the experience of common sense.
16. Emmanuel Kant, *Rêves d'un visionnaire*, Paris, Librairie Philosophique Vrin, 1967, chap. 3: 'Anti-kabbale. Fragment de philosophie commune, pour faire justice de ce commerce avec le monde des esprits', p. 84.
17. Raymond Devos, 'A plus d'un titre', in *L'Artiste*, Paris, Olivier Orban, 1989, p. 12.
18. W. R. Bion, *Second Thoughts, op. cit.*, chap. 7: 'On Arrogance' (text read at the 20th Congress of the International Psycho-analytical Association, Paris, July–August 1957) § 83: 'In this paper I propose to deal with the appearance, in the material of a certain class of patient, of references to curiosity, arrogance and stupidity which are so dispersed and separated from each other that their relatedness may escape detection. I shall suggest that their appearance should be taken by the analyst as evidence that he is dealing with a psychological disaster. The meaning with which I will invest the term "arrogance" may be indicated by supposing that in the personality where life instincts predominate, pride becomes self-respect, where death instincts predominate, pride becomes arrogance.'

'Their separation from each other and the lack of evidence of any relatedness is evidence that a disaster has occurred. To make clear the connection between those references, I shall rehearse the Oedipus myth from the point of view which makes the sexual crime a peripheral element of the story in which the central crime is the arrogance of Oedipus in vowing to lay bare the truth at no matter what cost.'

19. In Jacques Lacan's meaning: the category of the *Real* is the category of what has no name or image, and which does not stop not writing itself. Madness is both the demonstration of this non-inscription and the attempt to construct the Other to make it possible.
20. *Les Savoirs endogènes. Pistes pour une recherche*, edited by Paulin Hountondji, Codresia, Dakar, 1994 (distribution Karthala, Paris).