

Encounter with the Coronavirus : we, analysts, are mortal : 10<sup>th</sup> May 2020 : Nelson Feldman

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Julia Evans' notes at the end

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## Encounter with the Coronavirus: we, analysts, are mortal

On the 7<sup>th</sup> of March, I went full of enthusiasm to Barcelona to a TyA conference (Addiction and Alcoholism), thrilled to present a clinical case with the friends of the local group, at the local head-quarters of the Lacanian School of Psychoanalysis (ELP). I knew the infection was starting to spread in Europe but, according to press reports, neither Barcelona nor Catalonia had been particularly exposed to the virus in early March. The organizers had kept the meeting on the ELP premises because it did not normally involve more than 50 people. However, the clinical conversation scheduled for the afternoon with more participants had been cancelled by the Clinical Section – only two days earlier.

That Saturday, the 7<sup>th</sup> of March, Barcelona was oblivious to the risk of infection: the bars and restaurants were full, the streets and Las Ramblas too. The Barcelona football club played at Camp Nou against Real Sociedad and, on Sunday the 8<sup>th</sup> of March, thousands of women were on the streets for the 8M demonstration. On the plane from Switzerland, I had been the only one wearing a mask. Spain had not yet grasped the dimension of the pandemic.

When I returned to Switzerland on Wednesday March 11, I did not feel well: fever, very intense fatigue, cough, general malaise, diarrhea. I cancelled all my afternoon appointments and, taking advantage of a trip to the hospital to pick up some masks for my office, I asked if I could take a test at the new Covid-19 screening centre. I spent an uncomfortable night at home where I had already isolated myself to protect my family. On Thursday morning, I received the results over the phone: “You have tested positive for Coronavirus. You must remain in solitary confinement for at least ten days, until the symptoms disappear. Take Dafalgan four times a day. I warned everyone I’d been in contact with, starting with my own family, as well as my colleagues and a few patients, who also had to self-isolate.

That week was a very difficult ordeal, isolated in a poorly lit room, with a fever of 38.5° which did not go down despite the medication. Fortunately my family were there to support me and left me drinks and meals outside the door, but I had no appetite and I had to force myself to drink so as not to get dehydrated. I could use the toilet, but I had to disinfect each time. To be able to sleep, I listened to classical music, sweating profusely.

I felt like I was transforming into a suffering body and reducing myself to it. Some feelings and memories reminded me of my condition. Sometimes I felt overwhelmed and confused. I was trying to reassure the members of my family who saw me going masked to the toilet, themselves masked for their protection ... Are we having a nightmare? What if it doesn't get better? What would I do?

A week later, things had still not got any better, even if my GP told me, over the phone, that I was fighting the virus very well ... I had trouble breathing and I felt short of breath every time I took a few steps. After noticing that I had coughed blood, I called the department where the cantonal doctor who had given me my isolation instructions worked. A colleague then advised me to go to the A&E department of the regional hospital near my home. My son drove me there and I was quickly taken care of by a very competent clinical team who measured the oxygen levels in my blood and performed the necessary examinations: a CT scan showed bilateral coronavirus pneumonia.

After all this, I stayed a week in the hospital, in a ward occupied by people with Covid-19, supported by a medical team and very competent nurses, to whom I owe the fact that I was discharged in a much better condition on the 25<sup>th</sup> of March.

There were some difficult moments, especially for a few nights, as the fever didn't respond to the medication and I felt confused and weak; going to the toilet two meters away was a major ordeal for me, as well as continuing to drink. I sometimes thought: What if it all ends here in this tiny room with a view of the sink? Does life hang by such a slender thread? What does it depend on?

Lacan told Louvain that: "Death belongs to the dimension of faith. You are right to believe you're going to die, of course – it keeps you going. If you didn't believe in it, could you bear the life you have?" (1) From this I understand that death helps us to bear life through what it brings home to us. In fact, in hospital, feeling very dejected and having finally had enough of it all, I came to say to myself: "If it ends like this, well then, it ends like this!" But shortly after this, the nurse came to check my vital signs and told me that *in a few days all this will be a bad memory*.

My roommate, behind a yellow curtain, was older and had suffered lung damage from the same virus. He was receiving oxygen because he was unable to retain sufficient levels of it in his blood. We accompanied each other in our own way, each with our own noises and sighs. I could hear his difficulties breathing, his coughs and groans. At night, when I could hear him struggling, I worried that I might not hear any noise at all.

A week later, after better results from a check-up and two days without fever, the doctor announced that my stay in hospital would come to an end the following day. How lucky I was to have been treated so well at the Nyon regional hospital and how lucky that it was there, despite the new regime of health care management! Back at home, things were difficult at first. Though I was getting better and better, I had to attend to the end of my pneumonia and be mindful of my family. I had to cancel all of my consultations for at least a month.

With hindsight, I blame myself for having agreed to participate in the colloquium in Barcelona and for having underestimated the risks to which I had opened myself and my family. For their part, could the organizers have better assessed the risks of going ahead with the study day and evening, where many colleagues, including Argentines and Italians, were present in a confined room? I later learned that some of them had also developed symptoms in the days that followed. Neither Catalonia nor Spain had yet sounded the alarm that weekend, despite the numerous cases of infection in Madrid and the Basque Country. Travelers were not wearing a mask – a denial that would last another week.

We must learn to recognize and accept this new reality of the pandemic that is playing out around us today. Of course, this complicates analytical work, which draws its strength from meeting in person and highlights the importance of the body in the analytical session. But this global virus is having an affect on our practice. New forms of internet meetings will make it possible to invent how to combat isolation during the lockdown and to find a way of talking to each other as analysts [*entre analystes*]. It is also up to us to invent new ways to maintain a place and a link with our analysands in this strange period.

The symposia, congresses and meetings planned for the coming months have currently been cancelled, as they constitute a risk for the transmission of the virus rather than an opportunity for the transmission of psychoanalysis. I salute the courageous decision of Bernard Seynhaeve and the New Lacanian School (NLS), over which he presides, for the cancellation of our congress in Ghent in June, due to the pandemic in Europe.

And we have to remember that, yes, all analysts are mortal. Death is responsible for reminding us of our existence because sometimes life hangs by a thread, the thread of desire, always unsatisfied, “a golden thread of enjoyment” (2), and this thread loops around the real of life.

I extend my goodwill and good wishes to colleagues – in Spain, Italy, France, England and particularly the United States – who are going through difficult times. I thank my family and many colleagues and friends for their support and their messages in difficult moments and on my return home. Links that matter.

*Translated by Philip Dravers*

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1. « Jacques Lacan: Conférence à Louvain » (1972), text established by J.-A. Miller and J. Lacan, *La Cause du désir*, No. 96, 2017, pp. 7-30. To view a clip from this lecture: [click here](#).  
[<https://drive.google.com/file/d/1wrw0eGUzRmF4t5BiVJFIWpOYEiI5rFNV/view?usp=sharing> ]
  2. *Ibid.*

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By [Nelson Feldman](#) [<http://www.thelacanianreviews.com/author/lro-team/> ] | May 10th, 2020|[LRO](#) [<http://www.thelacanianreviews.com/category/lro/> ]

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## **Julia Evans' notes**

Lacan told Louvain that: “Death belongs to the dimension of faith. You are right to believe you’re going to die, of course – it keeps you going. If you didn’t believe in it, could you bear the life you have?” (1) Notes & Information [The Death is from the field of the Mad : 13th October 1972 \(Louvain\) : Jacques Lacan](#) or [here](#) <http://www.lacanianworks.net/?p=12522> : Download bilingual copy [https://www.freud2lacan.com/docs/La\\_mort\\_est\\_du\\_domaine\\_de\\_la\\_foi-bilingual.pdf](https://www.freud2lacan.com/docs/La_mort_est_du_domaine_de_la_foi-bilingual.pdf)

P7-8 of Anthony Chadwick’s translation : I have been, like that, a little drawn along to note that, on the subject of biology, psychoanalysis finally has not brought along a lot and yet, that’s all it speaks about: life drives then and “I suck you down”, death drives. Well have you heard a little bit about it, yes or no? because without that I’ll pass on, yes or no, is it “yes”, or is it “no”. Ah! You can’t trust all this chatter (applause). Let’s be serious! ... Death is in the domain of faith. You are quite right to believe that you are going to die, of course; it keeps you going. If you don’t believe that, could you bear the life you have? If one wasn’t solidly based on that certainty that it will end, could you bear this tale; nevertheless it’s only an act of faith; to top it all, you are not sure of it. Why wouldn’t there be at least one man or woman who could live for 150 years, but really, it’s there that faith regains its strength. So, in the middle of all that, you know what I am saying there, it’s because I have seen it, there’s one of

my patients (a very long time ago, so she won't hear any of this, without that I wouldn't tell her story) she dreamt one day that existence would spring up always by itself, the Pascalian dream, an infinity of lives succeeding each other with no possible end, she woke up almost mad. She told me; of course I did not find it funny. It's just that, life is something solid, that on which we live precisely. In life, as soon as one starts talking about it, life of course, we are living it, it's not in doubt, we realize it at every moment; often it's a question of thinking it, taking life as a concept; so then, we all take shelter together to get warm with a certain number of little beasts which naturally warm us up, all the more that in so far as our life is concerned, we have no idea at all of what it is. Thank God, that's the word, he has not left us alone! Since the beginning, since Genesis, there have been countless animals. That it is that which makes life seem the most probable, it's what we have in common with the little animals.

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- Death is responsible for reminding us of our existence because sometimes life hangs by a thread, the thread of desire, always unsatisfied, "a golden thread of enjoyment" (2), and this thread loops around the real of life. :

p13 of Anthony Chadwick's translation : See above or [www.Freud2Lacan.net](http://www.Freud2Lacan.net) : Another form of deciphering is what I am putting into play here: another form of deciphering is proposed to us, but the strange thing is that it starts only from another discourse. There is no trace in the beginning of Freud's discourse of a reference to life. It is a question of a discourse, of a discourse about which he teaches, that of the hysteric, and this discourse, what does he find there? Very precisely, a meaning. And this meaning, in relation to what has been evaluated up to then, is different. It is, will I say, "le" or "la"<sup>4</sup>, let's say to clear the way, the thing, it's *jouissance*; but if you put the "thing" in two words with a little hyphen, it's *joui-sens*.<sup>5</sup> Not one of the sayings of those welcome visitors, those beloved – I called the patient in my thesis I was mentioning just now Aimée, she was not a hysteric – not a single saying of those hysterics about whom we cannot determine which thread, golden thread of *jouissance*, guides them; and it is precisely for that that this discourse enunciates desire, and makes this desire in order to leave it unsatisfied. Freud guides us and he has given us, it's true, a new discourse which means, you don't even realize it, that all the ways that we have for approaching feeling, incident, affectuation<sup>6</sup> for something in a certain field, you all (no need for that for you to be in analysis, nor an analyst) you know how to question it in a way for which there is nothing in all of previous literature, even if as such it is done, it bears witness to circling around that.

Footnotes :

TN4 "Chose" is normally feminine in French, but when masculine it can mean "thingymajig" or "odd", "bizarre". Lacan, I think, intends both, although opting expediently for "la chose".

TN5 Lacan elaborates elsewhere that "joui-sens" can be further broken down into *je/oui-sens*, I hear meanings. Another translator offers "enjoyment".

TN6 Transcriber's footnote number 7 questions the word, "l'affectuation", as either a typo, or a Lacanian neologism. I have opted for the latter. I take to be a portmanteau word combining: affectation, affection, and affecting.

Information & availability : [The Case of Aimée, or Self-punitive Paranoia](http://www.lacanianworks.net/?p=113): Jacques Lacan: 1932 or [here http://www.lacanianworks.net/?p=113](http://www.lacanianworks.net/?p=113)