

[Treating Shell Shock – re-conceptualising what worked : 12th March 2021 \(Zoom Intercartel Meeting\) : Julia Evans](#) or [here http://www.lacanianworks.net/?p=12905](http://www.lacanianworks.net/?p=12905)

*Presented at an Intercartel Meeting on the 12<sup>th</sup> March 2021 via Zoom with René Raggenbass, New Lacanian School's Cartel Co-ordinator, as discussant – Points raised are in an endnote. Available at [www.LacanianWorksExchange.net](http://www.LacanianWorksExchange.net) /authors a-z or authors by date or it follows **These cartels are working towards the NLS Congress, Ghent & Zoom, 22 & 23 May 2021 : Bodily Effects of Language***  
The NLS Congress Website is <https://www.nlscongress2021.com/congress>  
Other texts on cartels [here http://www.lacanianworks.net/?cat=650](http://www.lacanianworks.net/?cat=650)

### **Treating Shell Shock – re-conceptualising what worked : 12<sup>th</sup> March 2021 (Zoom Intercartel Meeting) : Julia Evans**

To set the scene - some quotes.

From Freud, 1929<sup>i</sup> “the two urges, the one towards personal happiness and the other towards union with other human beings, must struggle with each other in every individual; ... [this] is a dispute within the economics of the libido, ... and it does admit of an eventual accommodation in the individual,”

Lacan, 20<sup>th</sup> March 1973, Gallagher's translation.<sup>ii</sup> “This affinity of small *a* to this envelope is the connection, .... where ... the real is distinguished.”

Further Freud stated 1915 that war has cut the common bonds between contending people so the men are forced back to a place where bonds do not exist<sup>iii</sup>.

Examining cases of shell shock published by Charles Myers (1915)<sup>iv</sup> & William Brown (1918)<sup>v</sup> who use Breuer & Freud's work, *Studies on Hysteria*<sup>vi</sup> as their basis. Terms such as conversion symptoms, repression, abreaction, cathartic, suggestion & counter-suggestion and disassociation of consciousness are used.

What causes shell shock?

According to Myers' neatly tabulated chart, in Case 1 Shells bursting about him when hooked on barbed wire, Case 2 Shell blowing the trench in & in Case 3 Shell blew him off a wall. The mostly body symptoms are then sorted by hearing, smell, taste, other sensations, volitional movements, defaecation, micturition, memory & vision. Case 3's vision was impaired - distant vision was affected and objects/typeface become blurred after time. After 4 days of treatment, mainly suggestion and encouragement, his sight improved – there are charts showing this.

What Brown calls a ‘dissociation of consciousness’ occurs. The connection holding the subject and his body together was ripped away, so bonds are not in place.

What was working in the treatment?

Brown working near the battlefield, states that most ‘light’ cases came under his care in 48 hours and 70% of them were returned to the line after an average of a fortnight's treatment and rest in hospital. By early intervention he was able to prevent further bodily symptoms from developing.

Quote : Essential Factors in Causation and Treatment,

It is important that the patient should have the benefit of a thorough examination of his nervous system at the earliest possible moment after the shock of the shell explosion. The incipient functional symptoms from which he is suffering make him fear, vaguely or definitely, that he has sustained some organic injury of the nervous system. This fear encourages the further development of such symptoms. It and its effects can be brought to an end by the reassuring remarks of the neurologist, after he has completed his examination. But those remarks must be repeated and forced upon the patient's notice. Especially is it the note of certainty in the doctor's voice which carries conviction. By one means or another the patient must be completely convinced of the truth of the doctor's explanation of his symptoms, and of the promise that they will quickly disappear. This conviction must pass beyond the stage of mere intellectual awareness and acceptance, and acquire the dynamism of strong emotion. Enthusiastic expectation of a rapid recovery is another essential condition of success, just as it was an earlier apprehension which was responsible for the development of the symptoms.

... But the *origin* (Brown's italics) of the symptoms (tremors, difficulties of speech and locomotion, profuse sweating, headaches, diminution or loss of various forms of sensation, &c.) is to be found in the intense emotion of fear caused by the shell explosion, of which they are the objective physical manifestations. ... the factors which are of very much greater efficacy and importance in bringing about a *permanent* cure are : (1) persuasion, whereby the patient is rationally convinced of the true nature of his symptoms ; and (2) the sthenic emotions of confidence, conviction, and expectation, which have a unifying effect upon the mind, and counteract the disintegrating effect of mechanical suggestion. (Brown)

So to summarise, an intense emotion of fear, or perhaps l'Angoisse – primal anxiety, presents itself after events outside the soldier's envelope or experience. This fear encourages body symptoms to emerge. The treatment involves a physical examination as soon as possible, and then reassuring remarks must be repeated and forced upon the patient. The Doctor's voice must carry a note of certainty with conviction and strong emotion –so this is not working at the level of an intellectual understanding or meaning. Something else is being stamped in – the image that a full recovery of his body will be made. It is possible that William Brown was operating as a partner. The symptoms directly interpret fear. The condition has no narrative until one is stamped in. It may not be traditional analysis but is Brown working directly with body symptoms? So the function of the physician, is to link them back in. To put back the initial bond using emotion and body language.

In Éric Laurent's 2003 text *Relieve Anxiety?*<sup>vii</sup> he states : p9 There are cases however, in which the anxiety cannot be anchored either by the symptom, or the construction of the fantasy. .... This is a perfectly constituted elementary phenomenon. On p14, 'in this case, the acute anxiety is appeased because it is the analyst who is found at the place of a partner-symptom, and this permits the subject to collect herself around a renewed narcissistic identification.'

This is what William Brown seems to be describing with his use of emotion to overcome fear and disassociation.

Final thought : Are these conditions being replicated with Covid restrictions on social bonds in place?

[Julia Evans http://www.lacanianworks.net/?p=12365](http://www.lacanianworks.net/?p=12365) March 2021

**Our discussant's (René Raggenbass) intervention**

René raised questions : What is working in the treatment? The proportion who get better – why? What is the role of the voice? The following passage was suggested as putting structure around these questions. The quote given by Jacques-Alain Miller from Lacan, Seminar XXI : 19<sup>th</sup> February 1974, does seem to summarise how Myers & Brown are constructing and using their interpretations.

[The Unconscious and the Speaking Body : Paris : 17th April 2014 : Jacques-Alain Miller or here http://www.lacanianworks.net/?p=11959](http://www.lacanianworks.net/?p=11959)

An interpretation is not a fragment of construction bearing on an isolated element of repression, as Freud thought it was. It is not the flight of fancy of a knowledge. Nor is it a truth-effect that is immediately absorbed back into the succession of lies. An interpretation is an *act of saying* that targets the speaking body and does so in order to produce an event, in order to provoke a gut- reaction, said Lacan[35]. This is something that can't be anticipated, but which is verified retroactively, for the jouissance-effect is incalculable. All that analysis can do is to accord to the pulsation of the speaking body in order to insinuate itself into the symptom. When one analyses the unconscious, the meaning of interpretation is the truth. When one analyses the speaking body, the meaning of interpretation is jouissance. This displacement from truth to jouissance sets the measure of what analytic practice is becoming in the era of the *parlêtre*.

35 Lacan, J., Lesson of 19 February 1974, Le séminaire XXI, Les non-dupes errent, 1973-1974, unpublished. [Seminar XXI : 19<sup>th</sup> February 1974 : Availability [Seminar XXI: 1973-1974: Les non-dupes errent : begins 13th November 1973 : Jacques Lacan or here http://www.lacanianworks.net/?p=807](http://www.lacanianworks.net/?p=807)]

*This text was presented at an Intercartel Meeting on the 12<sup>th</sup> March 2021 via Zoom with René Raggenbass, New Lacanian School's Cartel Co-ordinator, as discussant.*

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*INTERCARTEL MEETINGS between Cartel 1 & 3.*

*Both cartels are registered with the New Lacanian School, see <http://www.amp-nls.org/page/gb/24/cartels>*

*The cartel on 'Being a body & having a body' & the other cartel on 'Bodily Effects of Language' are meeting, on Zoom, to exchange on*

*- Saturday 12<sup>th</sup> December 2020, when 6 cartelisands presented and the other cartel commented. Text presented at this meeting is [Present without a body – absence, lack, & loss in the work of a cartel : 12th December 2020 \(Zoom Intercartel Meeting\) : Ganesh Anantharaman](http://www.lacanianworks.net/?p=12852) See [here http://www.lacanianworks.net/?p=12852](http://www.lacanianworks.net/?p=12852)*

*- Saturday 13<sup>th</sup> March 2021. The discussant was René Raggenbass, the NLS cartel delegate, with members of the other cartel.*

*Future discussants, the other NLS delegate for cartels, Saturday 10<sup>th</sup> July 2021 at 12:00 London time*

*Cartel 1 - Being a body & having a body*

*[Julia Evans http://www.lacanianworks.net/?p=12365](http://www.lacanianworks.net/?p=12365) (plus-un) Sandwich, Kent & London, UK, Topic Cutting as interpretation on a/the body.*

[Ganesh Anantharaman, http://www.lacanianworks.net/?cat=740](http://www.lacanianworks.net/?cat=740), Chennai, India,

Topic *Jouissance & body event?*

Lorena Rivero de Beer, Liverpool, UK. Topic *Zazen & the embodiment of emptiness - symptom/body event.*

Marcin Zaremba, London, UK Topic *Treating anorexia as a body event.*

*The Other Cartel : Cartel 3 - Bodily Effects of Language*

Nicolas Duchenne (plus-un), Rotherhithe, London, UK Topic *The real father is an effect of language*

Giuseppe Covelli, Amsterdam, Netherlands Topic *The body at the place where a word should have been spoken*

Owen Hewitson <http://www.lacanianworks.net/?cat=742>, East London, UK, Topic *Idioms of Distress - Appeal, Nomination, and Other Ways to Say*

Greg Hynds <http://www.lacanianworks.net/?cat=739>, North London, UK, Topic *Subject and body*

Josephine Rostron <http://www.lacanianworks.net/?cat=741> North West London, UK Topic *An elaboration of the presence of the body in the psychic structure*

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<sup>i</sup> Civilization and its Discontents : 1929 : Sigmund Freud : SE XXI :

Available bilingual at [www.Freud2Lacan.com](http://www.Freud2Lacan.com) : See [here https://freud2lacan.b-cdn.net/Civilization and Its Discontents.pdf](https://freud2lacan.b-cdn.net/Civilization_and_Its_Discontents.pdf) : SE XXI p141 . . Quote : Just as a planet revolves around a

central body as well as rotating on its own axis, so the human individual takes part in the course of development of mankind at the same time as he pursues his own path in life. But to our dull eyes the play of forces in the heavens seems fixed in a never-changing order; in the field of organic life we can still see how the forces contend with one another, and how the effects of the conflict are continually changing. So, also, the two urges, the one towards personal happiness and the other towards union with other human beings, must struggle with each other in every individual; and so, also, the two processes of individual and of cultural development must stand in hostile opposition to each other and mutually dispute the ground. But this struggle between the individual and society is not a derivative of the contradiction-probably an irreconcilable one-between the primal instincts of Eros and death. It is a dispute within the economics of the libido, comparable to the contest concerning the distribution of libido between ego and objects; and it does admit of an eventual accommodation in the individual, as, it may be hoped, it will also do in the future of civilization, however much that civilization may oppress the life of the individual to-day.

<sup>ii</sup> Seminar XX Seminar XX : 20th March 1973 pIX 5 of Cormac Gallagher - The translation from unedited tapes differs significantly for this session & 10<sup>th</sup> April 1973 to JAM edited version : See [Seminar XX : Encore 1972 – 1973 \(from 21st November 1972\) : Jacques Lacan](#) or [here http://www.lacanianworks.net/?p=222](http://www.lacanianworks.net/?p=222)

This affinity of small *a* to this envelope is the connection, it must be said, one of these major connections that has been advanced by psychoanalysis, and which, for us, is the point of suspicion that it essentially introduces. This is where what we come to say about the real is distinguished. For this real, if you take it as I believed I should in the course of time, a time which is also that of my experience, the real can only be inscribed from an impasse of formalisation. And that is why I believed I could sketch out the model of it, from mathematical formalisation in so far as it is the most advanced elaboration that we have managed to produce, the most advanced elaboration of significance (significance). Of a significance which in short – I am talking about mathematical formalisation – one can say that it runs counter to meaning. I almost said in the opposite direction. The it means nothing about mathematics, is what is said in our time by philosophers of mathematics, even when they are themselves mathematicians. I sufficiently underlined the Russell's Principia

<sup>iii</sup> Thoughts on War and Death : 1915 : Sigmund Freud SE XIV p267 : SE XIV 292– 3 : Published [www.Freud2Lacan.com](http://www.Freud2Lacan.com) : available [here https://freud2lacan.b-cdn.net/Freud - Thoughts on War and Death.pdf](https://freud2lacan.b-cdn.net/Freud_-_Thoughts_on_War_and_Death.pdf)

<sup>iv</sup> [A contribution to the study of shell shock, Being an account of three cases of loss of memory, vision, smell, and taste, Admitted into the Duchess of Westminster War Hospital, Le Touquet : 15th February 1915 : Charles S. Myers](#) or [here http://www.lacanianworks.net/?p=12860](http://www.lacanianworks.net/?p=12860)

<sup>v</sup> [The treatment of cases of shell shock in an advanced neurological centre : 29th May 1918 : William Brown](#) or [here http://www.lacanianworks.net/?p=12859](http://www.lacanianworks.net/?p=12859)

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<sup>vi</sup> Josef Breuer & Sigmund Freud: Studies on Hysteria: 1893-1895, SE II  
Published at Richard G. Klein's site, [www.Freud2Lacan.com](http://www.Freud2Lacan.com) & available [here](https://freud2lacan.b-cdn.net/Studies_on_Hysteria.pdf) [https://freud2lacan.b-cdn.net/Studies\\_on\\_Hysteria.pdf](https://freud2lacan.b-cdn.net/Studies_on_Hysteria.pdf) with notes on the case studies.

<sup>vii</sup> Eric Laurent Relieve Anxiety? Mental Online 13. See [Relieve Anxiety? : December 2003 : Éric Laurent](#) or [here](http://www.lacanianworks.net/?p=12155) <http://www.lacanianworks.net/?p=12155>