



Original article

From mouth to nose: Psychic effects of bariatric surgery procedures[☆]

De la bouche au nez : les effets psychiques des techniques de chirurgie bariatrique

Matthieu Mencia-Huerta (Psychologue, doctorant contractuel à l'ED 450, recherches en psychanalyse et psychopathologie, membre du laboratoire C.R.P.M.S, chercheur associé C.R.I)^{a,b,c,*}, Cristina Lindenmeyer (Psychanalyste, maître de conférence, habilitée à diriger des recherches à l'UFR des études psychanalytiques, membre du laboratoire C.R.P.M.S, chercheuse en délégation au C.N.R.S)^{a,d}

^a Université Paris-Diderot, Paris 7, 5, rue Thomas-Mann, 75013 Paris, France

^b Équipe BADO, UMR 1149, Inserm, ERL CNRS 8252, département B.C.M.P.P, 16, rue Henri-Huchard, 75018 Paris, France

^c Service de chirurgie générale et digestive, hôpital Bichat-Claude-Bernard, 46, rue Henri-Huchard, 75018 Paris, France

^d CNRS, institut des sciences de la communication ISCC, 20, rue Berbier-du-Mets, 75013 Paris, France

Abstract

Objectives. – This study aimed to investigate the new practices of bariatric surgery in the clinical treatment of obesity, since the effects produced by these procedures are organically enigmatic, sometimes problematic, and may cause treatment failure. Thus, in many operated patients, the psychosensory changes following surgery, such as olfactory and taste mutations (from “pleasure” to “displeasure”), show that these technical transformations of the body cause organic, and also psychic reorganizations. These disturbances in instinctual organization and in libidinal investments, underpinned by profound bodily changes, seem to originate from the re-contextualisation of the mechanism of “organic” repression in the patient. Derived from clinical practice, this forgotten Freudian concept raises points of interest for the theoretical understanding and improvement of the psychic management of patients with obesity undergoing bariatric surgery.

[☆] To quote this article please use the French version: Mencia-Huerta M, Lindenmeyer C. De la bouche au nez : les effets psychiques des techniques de chirurgie bariatrique. *Evol psychiatr* 2018;83(2): pages (paper version) ou URL [date of publication]. (electronic version).

* Corresponding author at: Université Paris-Diderot, Paris 7, 5, rue Thomas-Mann, 75013 Paris, France.

E-mail address: matthieu.mencia@orange.fr (M. Mencia-Huerta).

<https://doi.org/10.1016/j.evopsy.2018.02.004>

0014-3855/© 2018 Elsevier Masson SAS. All rights reserved.

Method. – The patients investigated were treated with bariatric surgery, including *Sleeve gastrectomy* or *Roux-en-Y Bypass*. They were asked to comment on their experience of bariatric surgery and on the impact of the body changes on their eating behaviours, their relationship with the body and with others.

Results. – In most of the patients, bariatric surgery brought about olfactory and taste changes. These psychosensory changes seem to attest to a re-contextualisation of the process of “organic” repression and to a restructuring of the associated instinctual organization. In these patients, cutting into the reality of the body appears to have an impact on “organic” repression, which is reshaped, re-contextualised and reinforced for most of the operated subjects. Consequently, the representations that, before surgery, brought the subject organic, psychic, auto-erotic pleasure appear to be repressed from the field of consciousness because the conditions underpinning access to this erotic pleasure have been altered. Therefore objects, in particular food items, which are bound by association to these repressed representations, could be consciously perceived by the operated subject as vectors of displeasure. These objects, previously providing erogenous pleasure, will thus become sources of disgust and repulsion following the bodily changes.

Discussion. – The olfactory and gustatory modifications in the perceptions of food observed after bariatric surgery underline the impact of this procedure on the psychic life of these patients. Behind the “disgusting” foods now pushed away could lie what was repressed when the “organic” repression was re-contextualised. These selective psychosensory changes and the dietary relationships affected by these changes seem to be regularly linked by the patients themselves to certain aspects of their personal and intimate history, including memories or representations of events in which infantile sexuality was confronted with the pitfalls of relationships with others. The verbalization of these screen-memories, appearing after these selective perceptive changes and resulting from the re-contextualisation of “organic” repression, could thus open a new path of access to the elaboration of unconscious subjective truths, which may be linked to the elaboration of the symptom construction of obesity.

Conclusion. – This study underlines the importance of the notion of “organic” repression to approach these psycho-sensory changes after bariatric surgery and to understand the psychic reorganization leading to changes in eating behaviours. It is important to consider the impact on the process of “organic” repression of the specific elements present in the symptomatic construction of obesity (orality, body image, family structure), according to their different modes of expression for each subject, following surgical modification of the body. In addition, it is important to understand the forms originally taken on by “organic” repression, before its reshaping or re-contextualisation by the effects of bariatric surgery, in the light of the specificity of the symptom construction of each subject. These two pre- and post-operative steps are essential in the understanding of the psychic elements leading to therapeutic failure in the surgical treatment of obesity, in order to improve quality of care and to limit relapses.

© 2018 Elsevier Masson SAS. All rights reserved.

Keywords: Obesity; Repression; Olfaction; Eating disorders; Bariatric surgery; Screen-memory; Drive

Résumé

Objectifs. – Il s’agit, dans cet article, d’interroger les nouvelles pratiques de chirurgie bariatrique dans la clinique de l’obésité puisque les effets qu’elles produisent peuvent s’avérer mystérieux sur le plan organique, parfois problématiques jusqu’à mettre en échec la démarche thérapeutique initiale. Chez une majorité de patients opérés, l’apparition de modifications olfactives et gustatives à la suite de l’intervention met en lumière le fait que la transformation du corps réel par la chirurgie provoque des effets de remaniements non seulement organiques mais aussi psychiques. Ce bouleversement de l’organisation pulsionnelle et des investissements libidinaux, soutenu par les modifications corporelles, prendrait sa source dans l’actualisation du mécanisme du refoulement « organique » chez le patient opéré. Convoqué par la clinique, ce concept freudien oublié permettrait de tirer des pistes de réflexion pour la compréhension théorique et l’amélioration de la prise en charge psychique des sujets en situation d’obésité et opérés d’une chirurgie bariatrique.

Méthode. – Les patients rencontrés ont été opérés d’une chirurgie bariatrique, de type *Sleeve gastrectomie* ou de type *Bypass gastrique*. Il a été proposé aux patients de parler de leur expérience de la chirurgie bariatrique

Download English Version:

<https://daneshyari.com/en/article/7266506>

Download Persian Version:

<https://daneshyari.com/article/7266506>

[Daneshyari.com](https://daneshyari.com)