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Mémoire

Qu'apporte le « *psychisch-somatisch* » de Heinroth à la métapsychologie freudienne ?

What does the « psychisch-somatisch » from Heinroth bring to Freudian metapsychology?

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RÉSUMÉ

Le concept de psychosomatique est attribué à un psychiatre allemand, Heinroth. Dans les périodiques et les chapitres d'ouvrages francophones, il apparaît des méconnaissances que notre article tente de lever : méconnaissance sur le milieu théorique d'où survient le concept, méconnaissance sur les débats qui ont présidé à la naissance de ce concept, et méconnaissance des débats théoriques que cette idée a provoquée dans tout le XIX^e siècle allemand (notamment avec l'idée de somato-psychique). En exhumant ces méconnaissances et en appui d'une traduction sérieuse, nous replaçons l'idée de Heinroth au centre de ces débats et suivons un fil rouge, vitaliste, qui ouvre une nouvelle perspective aux précautions rhétoriques prises par Freud, en raison de ces débats contradictoires antérieurs, dans son modèle freudien des pulsions. Ainsi, le débat ouvert par Heinroth a pu rester moderne et contemporain. En outre, notre traduction proposée du chapitre d'ouvrage en langue allemande révèle que l'idée de la psychosomatique, originellement, s'articule avec l'insomnie maniaque.

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ABSTRACT

The concept of psychosomatic illness is attributed to a German psychiatrist, Johann Christian August Heinroth (1773–1843). In many journals, reviews and chapters in the French literature, there are a number of misunderstandings that this article attempts to clarify and dispel. We consider that these misunderstandings result from a lack of familiarity with the theoretical environment in which this concept emerged, the discussions that this concept provoked throughout the nineteenth century, and the influence this idea has had on Freudian metapsychology. Heinroth's idea emerged in the years of the prolongation of the theory of vitalism (Georg Ernst Stahl). Stahl, a German medical doctor, discussed the theory of anatomy and the geometric representation of the body (cf. Descartes' theory of Human). Stahl published physiology (physiology meaning the study of soul) to explain the essentials of human development. In remarking on the aging of the organs from infancy to adulthood, he considered that their associated transformations come from the soul. In this way, Stahl proposed that, with an excitation (in German, 'Reiz'), the soul can have an influence on the organ. At the same time Marie François Xavier Bichat, a French surgeon, a vitalist, predicted death starting from the identification of an anatomical morbidity, or lesion. He invented anatomical pathology. The findings of Stahl then Bichat created the conditions for an epistemological revolution in the knowledge of medicine. The mechanistic tradition (geometric and anatomic) had to evolve and integrate certain aspects of this new knowledge. Vitalism provoked an epistemological revolution. Heinroth, a well-known psychiatrist, utilised this new theory to distinguish symptomatic pathology (mania) from the organic ailments ("idiopathic cerebral madness")

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Melancholia and mania are constituted by Heinroth as symptomatic mental illnesses. Heinroth described insomnia, from the normal to the pathological (manic insomnia). He attempted to demonstrate that mania would come from "Reiz", excitation, and that it concerned a physiological pathology. Heinroth developed a theoretical part and a clinical part of his work. In his clinical work, as he reflected on this manic insomnia, he introduced the concept of 'psychisch-somatisch' to make a clinical connection between an excitation and its effect on the soma. Our commentary on this section of Heinroth's work is concerned to restore the different discussions on mania between vitalist and organicist psychiatry. This article equally reveals the fundamental link psychosomatics was claimed to have with this symptomatic mental illness, mania. Heinroth developed a treatment focussed on the somatic. He avoided the use of narcotics and based his approach on clinical observation oriented to the "Stimmung" (mood) of the soul, and on the "Reiz" (excitation). To perform this treatment, the therapist is able to use his or her influence with the patient "à travers leur organisme corporel" (through their bodily organism). This means specifically that the relation can influence the psychic state of the patient in the case of manic insomnia. At this historical moment in medicine, Stahl's notion of physiology constituted a progress. Medical knowledge was evolving and psychiatric knowledge, concerning symptomatic illness, appeared. Twenty years later, the opposition of Maximilian Jacobi, a member of the somatic school, recognised a certain value in Heinroth's concept of "psychisch-somatisch". In order to discuss Heinroth's idea, Jacobi developed a study on mania. He defended an organicist stance to integrate some vitalist ideas but without a psychic perspective. To support his proposition (and to avoid 'Reiz' and the notion of the soul), he proposed that each organ was independent and could produce an excitation. Jacobi proposed a "somatisch-physiologischen" (a somato-physiologic phenomenon): First soma and then second physiological effect. Jacobi claimed that "...it is meaningful to look for the somatic-physiological conditions which are connected to the appearance of psychic phenomena". Jacobi's mistake is to believe in a strictly organic stance. In trying to sustain his argument, he renounced the notion of the superiority of the brain in mental illness. In his study, his opposition to the vitalists hinges on this point. In this way, any mental illness becomes symptomatic and not cerebral. The scientific revolution produced by Heinroth (and by Etienne-Jean Georget), when they introduced vitalism into the study of mental illness, removed psychiatry from medicine. This theory continued to transform medical epistemology with a huge tension, a crisis, evident in the materialist corpus. One could think that the debates had ended with Wilhem Griesinger (an organicist): "We always have to see ... in the mental illnesses a condition of the brain". The emphasis on psychic phenomena continued in the German school with Karl Wilhem Ideler (or Freidreich, Strümpell), because the difference between symptomatic and cerebral illness was not explained by the somatic theory. In fact, the discussions around the psychic or the somatic stances have persevered well beyond the deaths of Heinroth and Jacobi. They led the German debates in the early twentieth century. The influence of vitalist ideas remained, and Freud was well aware of the debate. Breuer introduced Freud to vitalism in 1892, but Freud resisted this position. He explained to Fliess the nature of his difference from Breuer. In this competitive debate between the vitalist and organicist theses, we notice that Freud quoted Ideler, Strümpell (vitalist) and Griesinger (organicist), in "The Interpretation of Dreams" (1900). Our article shows how Freud and Breuer did not agree about the vitalist theory. Breuer was a resolute vitalist (Hirschmüller, 1978); Freud had a different orientation. At the same time, Kassovitz (1904) defended a theory of evolution, written by Lamarck (1804). Kassovitz was a close friend of Freud since 1886. Jean-Baptiste Lamarck was a dualist scientist. Lamarck had read Stahl (a monist), and was influenced by him, but remained a dualist (soma and soul are different) and managed to integrate the vitalist notions in a physical fashion. The French researcher, Lamarck, is frequently misunderstood. On the one hand, he developed a theory of evolution, following Buffon's principles. On the other hand, he used the concept of "life" (*vie-vital*) and created the concept of "biology", meaning "l'étude de la vie" (the study of life). He modified Stahl's idea and managed to relate the physical to physiology, without the notion of the Soul. The Lamarckian theory of evolution seduced Freud. The vitalist perspective seems present in Freudian metapsychology. Freud used the concept of excitation ("Reiz") in the theory of the Drive. In our view, the vitalist perspective of Heinroth was instrumental in Freud's development of psychoanalysis, especially concerning the first theory of the Drives. Freud borrowed indirectly from Lamarck, influenced by vitalism (Stahl), and directly from the physiology of German psychiatry ("Reiz", etc.). But not only this. In fact, to build the theory of the Drive, Freud borrowed from the vitalist theory and the organicist theory of psychiatry to construct a new thesis. The Drive became "a borderline-concept between the psychic and the somatic". From this point on, psychiatry and psychoanalysis became two separate fields. In this history of the concept of the "psychisch-somatisch", created on the basis of a symptomatic mental illness, mania, there has been a movement of reversion. The "psychisch-somatisch" as originally conceptualised gave up the notion of mental illness to interest itself in somatic illness. In our contemporary modernity it appears as a somatic illness potentially caused by psychic processes; this is an exclusion of the "psychisch-somatisch" from the field of mental illness, and an inclusion, in the somatic field. Our commentary aims to retrace the evolution of the vitalist theory in German psychiatry. We then study its influence up to the theory of the Drive (Freud), noting the scientific revolution provoked by this vitalist theory, and how it signified a progress in knowledge. We wager that it is time to review anew these fundamental debates, which have modernised the psychosomatic field and orientated it towards the somatic field.

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