

to threaten me with eating me up and later with all kinds of other ill-treatment—all of which was merely an expression of affection.

Permanent marks have been left by this oral phase of sexuality upon the usages of language. People commonly speak for instance, of an 'appetizing' love-object, and describe persons they are fond of as 'sweet'. It will be remembered, too, that our little patient would only eat sweet things. In dreams sweet things and sweetmeats stand regularly for caresses or sexual gratifications.

It appears, moreover, that there is an anxiety belonging to this phase (only, of course, where some disturbance has arisen) which manifests itself as a fear of death and may be attached to anything that is pointed out to the child as being suitable for the purpose. With our patient it was employed to induce him to overcome his loss of appetite and indeed to overcompensate for it. A possible origin of this disturbance of his appetite will be found, if we bear in mind (basing ourselves on the hypothesis that we have so often discussed) that his observation of copulation at the age of one and a half, which produced so many deferred effects, certainly occurred before the time of these difficulties in his eating. So we may perhaps suppose that it accelerated the processes of sexual maturing and consequently did in fact also produce *immediate* effects, though these were insignificant in appearance.

I am of course aware that it is possible to explain the symptoms of this period (the wolf anxiety and the disturbance of appetite) in another and simpler manner, without any reference to sexuality or to a pregenital stage of its organization. Those who like to neglect the indications of neurosis and the interconnections between events will prefer this other explanation, and I shall not be able to prevent their doing so. It is hard to discover any cogent evidence in regard to these beginnings of sexual life except by such roundabout paths as I have indicated.

In the scene with Grusha (at the age of two and a half) we see the little boy at the beginning of a development which, except perhaps for its prematureness, deserves to be considered normal; thus we find in it identification with his father, and urethral erotism representing masculinity. It was also completely under the sway of the primal scene. We have hitherto regarded

his identification with his father as being narcissistic; but if we take the content of the primal scene into account we cannot deny that it had already reached the stage of genital organization. His male genital organ had begun to play its part and it continued to do so under the influence of his seduction by his sister.

But his seduction gives the impression not merely of having encouraged his sexual development but of having, to an even greater extent, disturbed and diverted it. It offered him a passive sexual aim, which was ultimately incompatible with the action of his male genital organ. At the first external obstacle, the threat of castration from his Nanya, his genital organization, half-hearted as it still was, broke down (at the age of three and a half¹) and regressed to the stage which had preceded it, namely to that of the sadistic-anal organization, which he might otherwise have passed through, perhaps, with as slight indications as other children.

The sadistic-anal organization can easily be regarded as a continuation and development of the oral one. The violent muscular activity, directed upon the object, by which it is characterized, is to be explained as an action preparatory to eating. The eating then ceases to be a sexual aim, and the preparatory action becomes a sufficient aim in itself. The essential novelty, as compared with the previous stage, is that the receptive passive function becomes disengaged from the oral zone and attached to the anal zone. In this connection we can hardly fail to think of biological parallels or of the theory that the pregenital organizations in man should be regarded as vestiges of conditions which have been permanently retained in several classes of animals. The building up of the instinct for research out of its various components is another characteristic feature of this stage of development.

The boy's anal erotism was not particularly noticeable. Under the influence of his sadism the affectionate significance of faeces gave place to an aggressive one. A part was played in the transformation of his sadism into masochism by a sense of guilt, the presence of which points to developmental processes in spheres other than the sexual one.

His seduction continued to make its influence felt, by maintaining the passivity of his sexual aim. It transformed his sadism

¹ [In the editions before 1924 this read 'three and three quarters'.]

to a great extent into the masochism which was its passive counterpart. But it is questionable whether the seduction can be made entirely responsible for this characteristic of passivity, for the child's reaction to his observation of intercourse at the age of one and a half was already preponderantly a passive one. His sympathetic sexual excitement expressed itself by his passing a stool, though it is true that in this behaviour an active element is also to be distinguished. Side by side with the masochism which dominated his sexual impulses and also found expression in phantasies, his sadism, too, persisted and was directed against small animals. His sexual researches had set in from the time of the seduction and had been concerned, in essence, with two problems: the origin of children and the possibility of losing the genitals. These researches wove themselves into the manifestations of his instinctual impulses, and directed his sadistic propensities on to small animals as being representatives of small children.

We have now carried our account down to about the time of the boy's fourth birthday, and it was at that point that the dream brought into deferred operation his observation of intercourse at the age of one and a half. It is not possible for us completely to grasp or adequately to describe what now ensued. The activation of the picture, which, thanks to the advance in his intellectual development, he was now able to understand, operated not only like a fresh event, but like a new trauma, like an interference from outside analogous to the seduction. The genital organization which had been broken off was re-established at a single blow; but the advance that was achieved in the dream could not be maintained. On the contrary, there came about, by means of a process that can only be equated with a repression, a repudiation of the new element and its replacement by a phobia.

Thus the sadistic-anal organization continued to exist during the phase of the animal phobia which now set in, only it suffered an admixture of anxiety-phenomena. The child persisted in his sadistic as well as in his masochistic activities, but he reacted with anxiety to a portion of them; the conversion of his sadism into its opposite probably made further progress.

The analysis of the anxiety-dream shows us that the repression was connected with his recognition of the existence of castration. The new element was rejected because its acceptance

would have cost him his penis. Closer consideration leads us to some such conclusion as the following. What was repressed was the homosexual attitude understood in the genital sense, an attitude which had been formed under the influence of this recognition of castration. But that attitude was retained as regards the unconscious and set up as a dissociated and deeper stratum. The motive force of the repression seems to have been the narcissistic masculinity which attached to the boy's genitals, and which had come into a long-prepared conflict with the passivity of his homosexual sexual aim. The repression was thus a result of his masculinity.

One might be tempted at this point to introduce a slight alteration into psycho-analytic theory. It would seem palpably obvious that the repression and the formation of the neurosis must have originated out of the conflict between masculine and feminine tendencies, that is out of bisexuality. This view of the situation, however, is incomplete. Of the two conflicting sexual impulses one was ego-syntonic, while the other offended the boy's narcissistic interest; it was on *that* account that the latter underwent repression. So that in this case, too, it was the ego that put the repression into operation, for the benefit of one of the sexual tendencies. In other cases there is no such conflict between masculinity and femininity; there is only a single sexual tendency present, which seeks for acceptance, but offends against certain forces of the ego and is consequently repelled. Indeed, conflicts between sexuality and the *moral* ego trends are far more common than such as take place within the sphere of sexuality; but a moral conflict of this kind is lacking in our present case. To insist that bisexuality is the motive force leading to repression is to take too narrow a view; whereas if we assert the same of the conflict between the ego and the sexual tendencies (that is, the libido) we shall have covered all possible cases.

The theory of the 'masculine protest', as it has been developed by Adler, is faced by the difficulty that repression by no means always takes the side of masculinity against femininity; there are quite large classes of cases in which it is masculinity that has to submit to repression by the ego.

Moreover, a juster appreciation of the process of repression in our present case would lead us to deny that narcissistic masculinity was the sole motive force. The homosexual attitude which

came into being during the dream was of such overwhelming intensity that the little boy's ego found itself unable to cope with it and so defended itself against it by the process of repression.¹ The narcissistic masculinity which attached to his genitals, being opposed to the homosexual attitude, was drawn in, in order to assist the ego in carrying out the task. Merely to avoid misunderstandings, I will add that all narcissistic impulses operate from the ego and have their permanent seat in the ego, and that repressions are directed against libidinal object-cathexes.²

Let us now leave the process of repression, though we have perhaps not succeeded in dealing with it exhaustively, and let us turn to the boy's state when he awoke from the dream. If it had really been his masculinity that had triumphed over his homosexuality (or femininity) during the dream-process, then we should necessarily find that the dominant trend was an active sexual trend of a character already explicitly masculine. But there is no question of this having happened. The essentials of the sexual organization had not been changed; the sadistic-anal phase persisted, and remained the dominant one. The triumph of his masculinity was shown only in this: that thenceforward he reacted with anxiety to the passive sexual aims of the dominant organization—aims which were masochistic but not feminine. We are not confronted by a triumphant masculine sexual trend, but only by a passive one and a struggle against it.

I can well imagine the difficulties that the reader must find in the sharp distinction (unfamiliar but essential) which I have drawn between 'active' and 'masculine' and between 'passive' and 'feminine'. I shall therefore not hesitate to repeat myself. The state of affairs, then, after the dream, may be described as follows. The sexual trends had been split up; in the unconscious the stage of the genital organization had been reached, and a

¹ [Freud had insisted from very early times, e.g. in Section 6 of Part I of his 'Project for a Scientific Psychology' (1950a [1895]), on the traumatic effects of excessive excitation. In Chapter II of *Inhibitions, Symptoms and Anxiety* (1926d), he writes: 'It is highly probable that the immediate precipitating causes of primal repressions are quantitative factors such as an excessive degree of excitation and the breaking through of the protective shield against stimuli.']

² [Adler's theory of repression is considered by Freud in greater detail in the last part of his paper on beating-phantasies (1919e), below p. 201 ff.]

very intense homosexuality set up; on the top of this (virtually in the conscious) there persisted the earlier sadistic and predominantly masochistic sexual current; the ego had on the whole changed its attitude towards sexuality, for it now repudiated sexuality and rejected the dominant masochistic aims with anxiety, just as it had reacted to the deeper homosexual aims with the formation of a phobia. Thus the result of the dream was not so much the triumph of a masculine current, as a reaction against a feminine and passive one. It would be very forced to ascribe the quality of masculinity to this reaction. The truth is that the ego has no sexual currents, but only an interest in its own self-protection and in the preservation of its narcissism.

Let us now consider the phobia. It came into existence on the level of the genital organization, and shows us the relatively simple mechanism of an anxiety-hysteria. The ego, by developing anxiety, was protecting itself against what it regarded as an overwhelming danger, namely, homosexual satisfaction. But the process of repression left behind it a trace which cannot be overlooked. The object to which the dangerous sexual aim had been attached had to have its place taken in consciousness by another one. What became conscious was fear not of the *father* but of the *wolf*. Nor did the process stop at the formation of a phobia with a single content. A considerable time afterwards the wolf was replaced by the lion [p. 39]. Simultaneously with sadistic impulses against small animals there was a phobia directed towards them, in their capacity of representatives of the boy's rivals, the possible small children. The origin of the butterfly phobia is of especial interest. It was like a repetition of the mechanism that produced the wolf phobia in the dream. Owing to a chance stimulus an old experience, the scene with Grusha, was activated; her threat of castration thus produced deferred effects, though at the time it was uttered it had made no impression.¹

¹ The Grusha scene was, as I have said, a spontaneous product of the patient's memory, and no construction or stimulation by the physician played any part in evoking it. The gaps in it were filled up by the analysis in a fashion which must be regarded as unexceptionable, if any value at all is attached to the analytic method of work. The only possible rationalistic explanation of the phobia would be the following. There is nothing extraordinary, it might be said, in a child that was inclined to be nervous having had an anxiety attack in connection with

It may truly be said that the anxiety that was concerned in the formation of these phobias was a fear of castration. This statement involves no contradiction of the view that the anxiety originated from the repression of homosexual libido. Both modes of expression refer to the same process: namely, the withdrawal of libido by the ego from the homosexual wishful impulse, the libido having then become converted into free anxiety and subsequently bound in phobias.¹ The first method of statement merely mentions in addition the motive by which the ego was actuated.

If we look into the matter more closely we shall see that our patient's first illness (leaving the disturbance of appetite out of account) is not exhausted when we have extracted the phobia from it. It must be regarded as a true hysteria showing not merely anxiety-symptoms but also phenomena of conversion. A portion of the homosexual impulse was retained by the organ concerned in it; from that time forward, and equally during his adult life, his bowel behaved like a hysterically affected organ. The unconscious repressed homosexuality withdrew into his bowel. It was precisely this trait of hysteria which was of such great service in helping to clear up his later illness.

We must now summon up our courage to attack the still more complicated structure of the obsessional neurosis. Let us once more bear the situation in mind: a dominant masochistic a yellow-striped butterfly, probably as a result of some inherited tendency to anxiety. (See Stanley Hall, 'A Synthetic Genetic Study of Fear', 1914.) In ignorance of the true causation of his fear, this explanation would proceed, the patient looked about for something in his childhood to which he could connect it; he made use of the chance similarity of names and the recurrence of the stripes as a ground for the construction of an imaginary adventure with the nursery-maid whom he still remembered. When, however, we observe that the trivial details of this event (which, according to this view, was in itself an innocent one)—the scrubbing, the pail and the broom—had enough power over the patient's later life to determine his object-choice permanently and compulsively, then the butterfly phobia seems to have acquired an inexplicable importance. The state of things on this hypothesis is thus seen to be at least as remarkable as on mine, and any advantage that might be claimed for a rationalistic reading of the scene has melted away. The Grusha scene is of particular value to us, since in relation to it we can prepare our judgement upon the less certain primal scene.

¹ [Freud's subsequent change of view on the relation between repression and anxiety is explained in his *Inhibitions, Symptoms and Anxiety* (1926d), especially in Chapter IV and Chapter XI, A (b).]

sexual current and a repressed homosexual one, and an ego deep in hysterical repudiation of them. What processes transformed this condition into one of obsessional neurosis?

The transformation did not occur spontaneously, through internal development, but through an outside influence. Its visible effect was that the patient's relation to his father, which stood in the foreground, and which had so far found expression in the wolf phobia, was now manifested in obsessional piety. I cannot refrain from pointing out that the course of events in this part of the patient's history affords an unmistakable confirmation of an assertion which I made in *Totem and Taboo* upon the relation of the totem animal to the deity.¹ I there decided in favour of the view that the idea of God was not a development from the totem, but replaced it after arising independently from a root common to both ideas. The totem, I maintained, was the first father-surrogate, and the god was a later one, in which the father had regained his human shape. And we find the same thing with our patient. In his wolf phobia he had gone through the stage of the totemic father-surrogate; but that stage was now broken off, and, as a result of new relations between him and his father, was replaced by a phase of religious piety.

The influence that provoked this transformation was the acquaintance which he obtained through his mother's agency with the doctrines of religion and with the Bible story. This educational measure had the desired effect. The sadistic-masochistic sexual organization came slowly to an end, the wolf phobia quickly vanished, and, instead of sexuality being repudiated with anxiety, a higher method of suppressing it made its appearance. Piety became the dominant force in the child's life. These victories, however, were not won without struggles, of which his blasphemous thoughts were an indication, and of which the establishment of an obsessive exaggeration of religious ceremonial was the result.

Apart from these pathological phenomena, it may be said that in the present case religion achieved all the aims for the sake of which it is included in the education of the individual. It put a restraint on his sexual impulses by affording them a sublimation and a safe mooring; it lowered the importance of his family relationships, and thus protected him from the threat of isolation by giving him access to the great community of man-

Totem and Taboo (1912-13), *Standard Ed.*, 13, 148.

kind. The untamed and fear-ridden child became social, well-behaved, and amenable to education.

The chief motive force of the influence which religion had on him was his identification with the figure of Christ, which came particularly easily to him owing to the accident of the date of his birth. Along this path his extravagant love of his father, which had made the repression necessary, found its way at length to an ideal sublimation. As Christ, he could love his father, who was now called God, with a fervour which had sought in vain to discharge itself so long as his father had been a mortal. The means by which he could bear witness to this love were laid down by religion, and they were not haunted by that sense of guilt from which his individual feelings of love could not set themselves free. In this way it was still possible for him to drain off his deepest sexual current, which had already been precipitated in the form of unconscious homosexuality; and at the same time his more superficial masochistic impulsion found an incomparable sublimation, without much renunciation, in the story of the Passion of Christ, who, at the behest of his divine Father and in his honour, had let himself be ill-treated and sacrificed. So it was that religion did its work for the hard-pressed child—by the combination which it afforded the believer of satisfaction, of sublimation, of diversion from sensual processes to purely spiritual ones, and of access to social relationships.¹

The opposition which he at first offered to religion had three different points of origin. To begin with, there was, in general, his characteristic (which we have seen exemplified already) of fending off all novelties. Any position of the libido which he had once taken up was obstinately defended by him from fear of what he would lose by giving it up and from distrust of the probability of a complete substitute being afforded by the new position that was in view. This is an important and fundamental psychological peculiarity, which I described in my *Three Essays on the Theory of Sexuality* (1905*d*) as a susceptibility to 'fixation'.² Under the name of psychical 'inertia' Jung has attempted to erect it into the principal cause of all the failures of neurotics. I think he is wrong in this; for this factor has a far more general

¹ [The value of religion to the individual is further discussed in *The Future of an Illusion* (1927*c*).]

² [*Standard Ed.*, 7, 242–3.]

application and plays an important part in the lives of the non-neurotic as well. Great mobility or sluggishness of libidinal cathexes (as well as of other kinds of energetic cathexes) are special characteristics which attach to many normal people and by no means to all neurotics, and which have hitherto not been brought into relation with other qualities. They are, as it were, like prime numbers, not further divisible. We only know one thing about them, and that is that mobility of the mental cathexes is a quality which shows striking diminution with the advance of age. This has given us one of the indications of the limits within which psycho-analytic treatment is effective. There are some people, however, who retain this mental plasticity far beyond the usual age-limit, and others who lose it very prematurely. If the latter are neurotics, we make the unwelcome discovery that it is impossible to undo developments in them which, in apparently similar circumstances, have been easily dealt with in other people. So that in considering the conversion of psychical energy no less than of physical, we must make use of the concept of an *entropy*, which opposes the undoing of what has already occurred.¹

A second point of attack was afforded by the circumstance that religious doctrine is itself based upon a by no means unambiguous relation to God the Father, and in fact bears the stamp of the ambivalent attitude which presided over its origin. The patient's own ambivalence, which he possessed in a high degree of development, helped him to detect the same feature in religion, and he brought to bear on that feature those acute powers of criticism whose presence could not fail to astonish us in a child of four and a half.

But there was a third factor at work, which was certainly the most important of all, and to the operation of which we must ascribe the pathological products of his struggle against religion. The truth was that the mental current which impelled him to turn to men as sexual objects and which should have been

¹ [Entropy is the force which, according to the Second Law of Thermodynamics, tends to make certain physical changes irreversible.—The topic of 'psychical inertia' was discussed by Freud at the end of his paper on 'A Case of Paranoia Running Counter to the Psycho-Analytic Theory of the Disease' (1915f). Though this was published earlier than the present case history, it was probably written later. An Editor's footnote at the end of that paper gives a number of references to other passages in which Freud considered the same topic.]

sublimated by religion was no longer free; a portion of it was cut off by repression and so withdrawn from the possibility of sublimation and tied to its original sexual aim. In virtue of this state of things, the repressed portion kept making efforts to forge its way through to the sublimated portion or to drag down the latter to itself. The first ruminations which he wove round the figure of Christ already involved the question whether that sublime son could also fulfil the sexual relationship to his father which the patient had retained in his unconscious. The only result of his repudiation of these efforts was the production of apparently blasphemous obsessive thoughts, in which his physical affection for God asserted itself in the form of a debasement. A violent defensive struggle against these compromises then inevitably led to an obsessive exaggeration of all the activities which are prescribed for giving expression to piety and a pure love of God. Religion won in the end, but its instinctual foundations proved themselves to be incomparably stronger than the durability of the products of their sublimation. As soon as the course of events presented him with a new father-surrogate, who threw his weight into the scale against religion, it was dropped and replaced by something else. Let us further bear in mind, as an interesting complication, that his piety originated under the influence of women (his mother and his nurse), while it was a masculine influence that set him free from it.

The origin of this obsessional neurosis on the basis of the sadistic-anal organization confirms on the whole what I have said elsewhere on the predisposition to obsessional neurosis (1913i). The previous existence, however, of a severe hysteria in the present case makes it more obscure in this respect.

I will conclude my survey of the patient's sexual development by giving some brief glimpses of its later vicissitudes. During the years of puberty a markedly sensual, masculine current, with a sexual aim suitable to the genital organization, made its appearance in him; it must be regarded as normal, and its history occupied the period up to the time of his later illness. It was connected directly with the Grusha scene, from which it borrowed its characteristic feature—a compulsive falling in love that came on and passed off by sudden fits. This current had to struggle against the inhibitions that were derived from his infantile neurosis. There had been a violent revulsion in the direction of women, and he had thus won his way to complete

masculinity. From that time forward he retained women as his sexual object; but he did not enjoy this possession, for a powerful, and now entirely unconscious, inclination towards men, in which were united all the forces of the earlier phases of his development, was constantly drawing him away from his female objects and compelling him in the intervals to exaggerate his dependence upon women. He kept complaining during the treatment that he could not bear having to do with women, and all our labours were directed towards disclosing to him his unconscious relation to men. The whole situation might be summarized in the shape of a formula. His childhood had been marked by a wavering between activity and passivity, his puberty by a struggle for masculinity, and the period after he had fallen ill by a fight for the object of his masculine desires. The precipitating cause of his neurosis was not one of the types of onset which I have been able to put together as special cases of 'frustration,'¹ and it thus draws attention to a gap in that classification. He broke down after an organic affection of the genitals had revived his fear of castration, shattered his narcissism, and compelled him to abandon his hope of being personally favoured by destiny. He fell ill, therefore, as the result of a *narcissistic* 'frustration'. This excessive strength of his narcissism was in complete harmony with the other indications of an inhibited sexual development: with the fact that so few of his psychical trends were concentrated in his heterosexual object-choice, in spite of all its energy, and that his homosexual attitude, standing so much nearer to narcissism, persisted in him as an unconscious force with such very great tenacity. Naturally, where disturbances like these are present, psycho-analytic treatment cannot bring about any instantaneous revolution or put matters upon a level with a normal development: it can only get rid of the obstacles and clear the path, so that the influences of life may be able to further development along better lines.

I shall now bring together some peculiarities of the patient's mentality which were revealed by the psycho-analytic treatment but were not further elucidated and were accordingly not susceptible to direct influence. Such were his tenacity of fixation, which has already been discussed, his extraordinary propensity to ambivalence, and (as a third trait in a constitution which deserves the name of archaic) his power of maintaining

¹ 'Types of Onset of Neurosis' (1912c).

simultaneously the most various and contradictory libidinal cathexes, all of them capable of functioning side by side. His constant wavering between these (a characteristic which for a long time seemed to block the way to recovery and progress in the treatment) dominated the clinical picture during his adult illness, which I have scarcely been able to touch upon in these pages. This was undoubtedly a trait belonging to the general character of the unconscious, which in his case had persisted into processes that had become conscious. But it showed itself only in the products of affective impulses; in the region of pure logic he betrayed, on the contrary, a peculiar skill in unearthing contradictions and inconsistencies. So it was that his mental life impressed one in much the same way as the religion of Ancient Egypt, which is so unintelligible to us because it preserves the earlier stages of its development side by side with the end-products, retains the most ancient gods and their attributes along with the most modern ones, and thus, as it were, spreads out upon a two-dimensional surface what other instances of evolution show us in the solid.

I have now come to the end of what I had to say about this case. There remain two problems, of the many that it raises, which seem to me to deserve special emphasis. The first relates to the phylogenetically inherited schemata, which, like the categories of philosophy, are concerned with the business of 'placing' the impressions derived from actual experience. I am inclined to take the view that they are precipitates from the history of human civilization. The Oedipus complex, which comprises a child's relation to his parents, is one of them—is, in fact, the best known member of the class. Wherever experiences fail to fit in with the hereditary schema, they become remodelled in the imagination—a process which might very profitably be followed out in detail. It is precisely such cases that are calculated to convince us of the independent existence of the schema. We are often able to see the schema triumphing over the experience of the individual; as when in our present case the boy's father became the castrator and the menace of his infantile sexuality in spite of what was in other respects an inverted Oedipus complex. A similar process is at work where a nurse comes to play the mother's part or where the two become fused together. The contradictions between experience and the

schema seem to supply the conflicts of childhood with an abundance of material.

The second problem is not far removed from the first, but it is incomparably more important. If one considers the behaviour of the four-year-old child towards the re-activated primal scene,¹ or even if one thinks of the far simpler reactions of the one-and-a-half-year-old child when the scene was actually experienced, it is hard to dismiss the view that some sort of hardly definable knowledge, something, as it were, preparatory to an understanding, was at work in the child at the time.² We can form no conception of what this may have consisted in; we have nothing at our disposal but the single analogy—and it is an excellent one—of the far-reaching *instinctive*³ knowledge of animals.

If human beings too possessed an instinctive endowment such as this, it would not be surprising that it should be very particularly concerned with the processes of sexual life, even though it could not be by any means confined to them. This instinctive factor would then be the nucleus of the unconscious, a primitive kind of mental activity, which would later be dethroned and overlaid by human reason, when that faculty came to be acquired, but which in some people, perhaps in every one, would retain the power of drawing down to it the higher mental processes. Repression would be the return to this instinctive stage, and man would thus be paying for his great new acquisition with his liability to neurosis, and would be bearing witness by the possibility of the neuroses to the existence of those earlier, instinct-like, preliminary stages. The significance of the traumas of early childhood would lie in their contributing material to this unconscious which would save it from being worn away by the subsequent course of development.

¹ I may disregard the fact that it was not possible to put this behaviour into words until twenty years afterwards; for all the effects that we traced back to the scene had already been manifested in the form of symptoms, obsessions, etc., in the patient's childhood and long before the analysis. It is also a matter of indifference in this connection whether we choose to regard it as a primal *scene* or as a primal *phantasy*.

² I must once more emphasize the fact that these reflections would be vain if the dream and the neurosis had not themselves occurred in infancy.

³ [The German word used here and in what follows is '*instinktiv*' not '*triebhaft*', which is regularly translated 'instinctual'.]

I am aware that expression has been given in many quarters to thoughts like these, which emphasize the hereditary, phylogenetically acquired factor in mental life. In fact, I am of opinion that people have been far too ready to find room for them and ascribe importance to them in psycho-analysis. I consider that they are only admissible when psycho-analysis strictly observes the correct order of precedence, and, after forcing its way through the strata of what has been acquired by the individual, comes at last upon traces of what has been inherited.¹

¹ (*Footnote added 1923:*) I will once more set out here the chronology of the events mentioned in this case history.

Born on Christmas Day.

$1\frac{1}{2}$ years old: Malaria. Observation of his parents copulating; or observation of them when they were together, into which he later introduced a phantasy of them copulating.

Just before 2½: Scene with Grusha.

$2\frac{1}{2}$: Screen memory of his parents' departure with his sister. This showed him alone with his Nanya and so disowned Grusha and his sister.

Before 3¼: His mother's laments to the doctor.

$3\frac{1}{4}$: Beginning of his seduction by his sister. Soon afterwards the threat of castration from his Nanya.

$3\frac{1}{2}$: The English governess. Beginning of the change in his character.

4: The wolf dream. Origin of the phobia.

$4\frac{1}{2}$: Influence of the Bible story. Appearance of the obsessional symptoms.

Just before 5: Hallucination of the loss of his finger.

5: Departure from the first estate.

After 6: Visit to his sick father [compulsion to breathe out].

8: } Final outbreaks of the obsessional neurosis.
10: }

[17: Breakdown, precipitated by gonorrhoea.]

[23: Beginning of treatment.]

[The dates of the following events are not exactly established:

Between primal scene ($1\frac{1}{2}$) and seduction ($3\frac{1}{4}$): Disturbance of appetite.

Same period: Dumb water-carrier.

Before 4: Possible observation of dogs copulating.

After 4: Anxiety at swallow-tail butterfly.]

It will have been easy to guess from my account that the patient was a Russian. I parted from him, regarding him as cured, a few weeks before the unexpected outbreak of the Great War [1914]; and I did not see him again until the shifting chances of the war had given the Central European Powers access to South Russia. He then came to Vienna and reported that immediately after the end of the treatment

he had been seized with a longing to tear himself free from my influence. After a few months' work, a piece of the transference which had not hitherto been overcome was successfully dealt with. Since then the patient has felt normal and has behaved unexceptionably, in spite of the war having robbed him of his home, his possessions, and all his family relationships. It may be that his very misery, by gratifying his sense of guilt, contributed to the consolidation of his recovery.

[Some further notes on the later history of the case may be of interest. The original course of treatment lasted from February, 1910, to July, 1914. The patient returned to Vienna in the spring of 1919, and Freud treated him again from November, 1919, till February, 1920. In some further remarks on the case, at the beginning of his 'Analysis Terminable and Interminable' (1937c), Freud reports that after this second treatment the patient continued living in Vienna and on the whole maintained his health, though with occasional interruptions. These later episodes were dealt with, on Freud's advice, by one of his pupils, Dr. Ruth Mack Brunswick. She herself reported in detail on this later phase of the treatment, which extended from October, 1926, to February, 1927 (Brunswick, 1928). Her report was reprinted in *The Psycho-Analytic Reader*, edited by R. Fliess (1950), with an added note by Dr. Mack Brunswick (dated September, 1945) giving a short account of the patient's further history up to 1940. A still later report, on his great external difficulties during the Second World War, and his reaction to them, has since been published by Muriel Gardiner (1952). A full account of the case will be found in the second volume of Ernest Jones's biography (1955), pp. 306-12.]