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SOME THEORETICAL AND SOME PRACTICAL ASPECTS OF PSYCHANALYSIS*

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Is psychanalysis in part or in whole a form of mysticism or semi-mysticism? The affirmative of this question is strongly resented by most psychanalysts.

I may fail to apply academic logic to my consideration of psychanalysis, neglecting references to secundum quid, tertium quid and ambiguous middle. With regard to the last, both the defenders and the opponents of psychanalysis not infrequently have shown weakness and confusion both fore and aft as well as in the middle. Let us first see what the psychanalysts say of each other.

One of the first to challenge the hypothesis of Freud as savoring of mysticism was Jung.¹ “It must be admitted,” says Jung, “that Freud’s school makes use of the conception of libido which passes beyond the bounds of its primary definition. Indeed this must produce the impression that one is working with a mystical principle.”

Jung, who thus challenged Freud, shows himself at times to be a disciple of the occult. Witness, for example, the manner in which he uses the symbolism of numbers. The use of numbers in symbolism by the psychanalysts naturally recalls those followers of occultism who are known as numerists or vibrationists, of whom it is sufficient to say that to the numbers from one to nine very special significance is given. Number one, for example, has a vibration from the sun; number two from the moon; number three has a larger ray of symbolic significance besides the psychanalysts’ directly phallic interpretation; five has the strongest psychic vibration.

While Jung has seen fit to call Freud a mystic, on the other hand, Ernest Jones,² a close follower of Freud, says of Jung’s conception of the unconscious that it is founded on pseudosophy irreconcilable

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with science. Jones holds that Jung’s views are characterized by a repudiation of determinism. He puts Freud with Huxley and Darwin and, briefly stated, calls Jung a religious mystic.

The faulty, fantastic or mystic character of psychanalysis is emphasized by certain prenatal references in its literature. Ferenczi, for example, mentions one case in which he had partial or temporary success with hypnosis which he believed revealed a so-called mother complex, but later, by the use of psychanalysis, a father complex was also revealed. He says, regarding this case, that there was “at the bottom a symptom of unconscious phantasies connected with infantile ponderings on the menstruation and gravidity time periods with his mother, and amongst others on the idea of his own situation in the womb and at birth.”

One might recall the “tunnel-window case” in which a ploughed field comes into view, recorded by Freud and cited by Maeder and others.

The symbolic interpretation, according to Freud, is that of the intra-uterine fetus spying on his parents in the act of coitus.

In the same category with these assumptions of Ferenczi and Freud belongs Clark’s libido conception of the origin of epilepsy with its infantile and prenatal references.

I do not know from anything I have read whether Adler has accused other advocates of psychanalysis, or has been accused himself, of mysticism. It looks, however, as if his special theory of organ inferiority and psychic compensation—he being a sexual psychanalyst—has been developed as a sort of defensive reaction against being considered a mystic himself. At first sight his theory is somewhat appealing to those who tend to look for organic causes, but after well presenting his case in a series of most instructive arguments and illustrations, he with one sweep accedes to the sexual causation and interpretation of various forms of neuroses and insanities. He confirms this interpretation of his position by bringing into the discussion what is so much

beloved by psychanalysts, the one legged, one handed, one eyed, dumb and lame hero myths of occult literature in whose deeds of blood and sexuality, as in his patients, he sees psychic compensation for physical inferiority.

In MacCurdy’s pamphlet on the “Ethical Aspects of Psychoanalysis,” we see here again what appears to be a defense against accusations of the possible mystic or at least illogical position of psychoanalysis. MacCurdy says that “considering the trifling degree of correlation as yet established between structural alteration and brain function, these investigators are in the position of men, so convinced that all water comes from the clouds that they will not think of damming the river in a flood.”

Is it true that the correlations which have been established during the last fifty years between structural alteration and brain function are so trifling, after all, in the light of what we have learned through anatomy, morphology, physiology and clinicopathology, regarding the cerebral representation of motion, sensation, tonicity and speech, and even of emotion and concrete conceptual and abstract thinking? Are these not worth more than all the purely psychic speculation regarding mental phenomena?

It will be recalled by those who have read the book of Kempf that this psychanalyst may be said to harp on one or two strings throughout his entire volume of nearly 800 pages. The reader is reminded through chapter after chapter of the strivings of segments against the ego. The impression is conveyed that with regard to such questions as emotion, sexuality, and the like, the personality is entirely dominated by the segmental visceral system. The author makes use of the excellent experimental researches of Cannon but in considerable part at least misapplies them. To such an extent is this done that one almost gets the impression that for Kempf the mind is resident in the spinovisceral segments of the nervous system. It is a sort of recurrence, as someone has said, to the so-called abdominal brain idea of personality.

The ego assumed in Kempf’s work is a rather mystical being. The author seems to deny anything like a mind or soul or indeed an active controlling brain, and uses a sort of verbal or assumed ego to help him out of many manifest difficulties.

Kempf, more than he intends, seems to make an autonomic segmental subdivision of our organisms the controlling power. He gives

us no clear idea of what he means by consciousness and seems to believe that it is in some way the expression of the entire personality of the individual—whatever that means. He would have us think with our muscles, control with our glands and viscera, and would make almost all psychotic diseases simply a struggle between affective cravings of segments and the hypothetical ego. All this is very fine, but, after all, does it get us anywhere in the final shakedown of theories relating to mind and matter?

Being a freudian, Kempf, of course, lays tremendous stress on the sexual elements in the analysis of cases. All through his book he brings out illustrations wherever he can of some boy or girl or woman or man having struggled with sexual tendencies which have more or less conquered his ego, or with which his ego has been struggling.

One can easily award a certain amount of credit to Kempf for collecting a large number of cases from St. Elizabeth’s Hospital and other sources which illustrate the fact that sex or sexual ideas are often prominent in the minds of the insane, but this proves little or nothing in substantiation of his main position. Over and over again it is evident, although he speaks at times of evolution and that sort of thing, that the highly developed or highly involved human brain plays only a secondary part in the pathogenesis of the psychoses or neuroses with which he is dealing. Like most freudians he is suggestionally fascinated with his views of psychology and psychiatry. Sex is glaringly exhibited to him on every psychiatric canvas. In the book there is an extraordinary disregard of all the neuro-anatomic, neurophysiologic and neuropathologic work on the brain which has been done in the last half century.

I cannot refrain from making brief allusion to the pictures with which Kempf illustrates his volume, or rather to the legends by which he has described these illustrations. These legends furnish another example of the manner in which the psychanalyst reads into any subject the ideas which for the time being are dominating his mentality. The manner in which in one of the interpolated pictures a chasm is made to symbolize the vagina, its bordering cliffs the thighs, the foliage in the background, pubertal hair, a shadowy stream for which a boat containing a standing figure in white is heading, the amniotic fluid and all the rest are indications of the way in which the advocates of psychanalysis can be made to misuse what purports to be sexual symbolism. I cannot take the space to refer at any length to the manner in which Kempf and others have seen fit without warrant to read into paintings and statuary and much else their own ideas as to symbolism. If Michael Angelo or some of the other great worthies in
art could be summoned from the astral plane to which they have been
ascribed by another mystic cult, they would indeed be amazed at the
meanings, never dreamed of by them, which have been given to the
details of some of their great works.

Sherrington has clearly shown that an animal whose cord has been
completely transected, will definitely respond with emotions like rage
and fear although the animal may not exhibit some of the local
phenomena of such emotions. I have seen many cases of high cervical
lesions, a few complete in one or in all spinal systems, in which the
power to respond to emotion both psychically and by facial and ocular
expression was retained.

Observations on certain cases of paralysis agitans and pseudo-
paralysis agitans are interesting in connection with this question of
the abolition of emotional expression with which at least in some
instances goes also a reduction in emotivity. I have reported a number
of cases in which emotional expression and emotion itself were disturbed
as the result of a lesion of the cerebral portion of the cerebro-spino-
autonomic nervous system.

Without the concept of the unconscious, recent psychanalysis would
have nothing on which to stand. To define or explain consciousness is
by no means easy. Even so great a psychologist as William James when
lecturing on the stream of consciousness, tells us that he is not
prepared to give an answer to the problem on the explanatory level;
in other words, he declines to define the term and confines himself to
the descriptive or analytic level.

The term "awareness," sometimes used in the definition of con-
sciousness, is not much more explanatory than the word consciousness
itself.

Let us turn for a moment to the views of three different writers
on psychanalysis. At the joint meeting of three British societies con-
cerned with psychologic questions, a symposium was held, during which
was discussed the rather cryptic question "Why Is the 'Unconscious'
Unconscious?" Those presenting leading papers in this symposium
were Maurice Nicoll, W. H. R. Rivers and Ernest Jones.11

Nicoll, a disciple of Jung, largely confines himself to a presentation
of the views of this psychanalyst. In much of his paper he concerns
himself with what he terms the "collective unconscious" by which he
seems to mean the "accumulated ancestral unconscious" of a person,

10. James, William: Talks to Teachers on Psychology; and to Students on
11. Nicoll, Maurice; Rivers, W. H. R., and Jones, Ernest: Why Is the
not simply for a few generations, but the unconscious of our thousands and hundreds of thousands of ancestors during a million years. To him the unconscious is not a personal but an impersonal matter. After all, this is only another and not very satisfactory way of stating the great question of heredity. One may inherit traits, trends, tendencies, capacities or incapacities, but never an isolated memory or thought.

Rivers, who follows Nicoll, disagrees not only with him but also with his own successor, Ernest Jones. The chief tenor of the contribution of Rivers seems to be that what is repressed within the unconscious is chiefly that part of the instinctive which is not useful to the developing personality of the individual. His view in brief is utilitarian. He makes use of the well-known illustration of the larva and butterfly and also of the views of Head and his collaborators, of whom Rivers was one, regarding protopathic and epicritic sensibility.

Ernest Jones assails the point of view of both Nicoll (Jung) and Rivers. He considers neither of them tenable and attacks Jung’s idea of the unconscious with a big stick in a way to which I have already referred in discussing mysticism. Jones is a hedonist and accepts the pleasure-pain theory in explaining sexual repression in the “unconscious.”

In another article, Ernest Jones discusses what is meant by the unconscious. He first speaks of what he terms the mental theory meaning that of no mentation occurring, as when a patient is unconscious from a knockout blow. This is the sense in which some psychologists use the term. The second theory of the unconscious to which he refers is what he terms the limbo theory, which makes the unconscious a lumber room for all sorts of forgotten or discarded memories. The third form of the unconscious Jones calls the scientific view by which he means the freudian theory. After all, this freudian view of the unconscious is also a limbo hypothesis, the one point being that the sexual psychanalysts only refer matters sexual to their limbo.

In the process of my psychanalytic reading I tallied new terms until they had reached four score or nearly this figure and by no means exhausted the subject. A voluminous terminology is often a sign of weakness rather than of strength in a science or art. A somewhat extensive terminology is of course necessary in some of the more exact sciences like botany or physics.

In psychiatry in particular—largely because of the uncertainty of our facts and theories—classification and classifying terms have been sadly misused. The tendency is sometimes shown by men who are fond of going into minutiae, to take the insanities with well established symptoms, lesions or psychic phenomena, and divide and subdivide

them until perhaps, as in the case of one of our late colleagues, we are presented with a classification which has as many varieties and subvarieties as Heinz’s well-known collection of pickles.

In psychanalysis this tendency to division and subdivision, to the invention of new terms or the application of old terms to new uses has been carried to excess. A long list of the terms thus introduced into psychanalysis could readily be made—in fact, has been made. Each new investigator is not happy until he has invented at least a few new terms.

In the first place, we have the already considered necessary terms, consciousness and the unconscious, but various other terms have been added to these, such as preconscious, the foreconscious, the subconscious and the coconscious.

Starting with varieties of consciousness, we are then confronted with libido, fixation, repression, sublimation, regression, compensation and overcompensation, reaction, conversion, constellation and many other terms. The use or misuse of these terms needs continuously to be kept in mind in reading the contributions on psychanalysis; nor is this use consistent with different authorities. In the case of libido, for instance, Freud gave it a meaning which closely associated it with sexual instinct or desire, but Jung tells us it should have a more general energetic significance, with which statement the freudians later have more or less coincided. Sexual trauma becomes sexual phantasy or sexual experience.

A few terms have particularly appealed to me as of dubious utility, such as narcissism, constellation and complexes, in all their extraordinary array. We all know the meaning of constellation as applied in astronomy, but its transfer to the domain of psychanalysis is one of the rhetorical methods of exploiting the subject. By constellation seems to be meant a group of related ideas. Why not then be satisfied with calling them a group of ideas, without invading the domain of the astronomer?

The term narcissism, introduced by Havelock Ellis, and speedily adopted by Freud, is another rather pleasant word which derives its meaning through the pretty myth of the youth Narcissus whose admiration of his own image reflected in the pool led to his eventual destruction. Around this word has been made to evolve a series of ideas relating to self-love and especially to libidinous self-love.

The method with which Socrates—at least as represented by Plato—perforated the terminologic bladders of the ancient sophists, letting out their hot air and obnoxious gasses, might equally be used in attacking the terminology of these modern freudian sophists. It could be readily
shown that the large use of terms by the latter is in not a few instances defensive, serving to get them over hard places.\textsuperscript{13}

Of all the terms which have been invented and amplified, that of complex is perhaps the most striking. It was, I believe, originally applied by Jung and his immediate followers to extricate themselves from the difficulties which arise in the consideration of ideas in the unconscious supposed to have emotional or instinctive associations. Freud, ever on the alert for new philologic weapons, after a little resistance, adopted the term complex, until now the freudians in common with those of other psychanalytic schools revel in complexes—hidden, anal, oral, castration, and finally the root or nuclear complex which has its exemplification in the Oedipus complex. The Oedipus complex and the Electra complex, especially the former, are the favorites of the psychanalyst.

Some psychanalytic writers, like Jelliffe, for instance, tell us that this Oedipus complex can be used as a sort of psychic measuring unit or foot rule. We must look, according to the Oedipus hypothesis, for some phase of the relations which the child bears to his parent of the same or of the opposite sex, of the son to the mother or father, of the daughter to the father or mother, or of the sister to the brother. Paramount in the hypothesis is the idea that these relations are in some way of a libidinous or incestuous character.

Freud, Rank, Ernest Jones, Jelliffe and others work this story of Oedipus to an extraordinary degree. Given an ancient mythologic story, a tragedy, old or more recent, a novel like Defoe's "Moll Flanders" which seems to have been rather neglected by the psychanalysts, a painting or a piece of sculpture, the psychanalyst is able to read into or out of any or all of these his preconceived hypothesis.

13. Since the delivery of this address in June, an article has appeared in the December to March number of the Journal of Abnormal Psychology, on "Education and Freudism," by George Humphrey, which I did not see until August of this year. In this article the author ably discusses the subject of terminology more fully than I did in my address, the difference being partly due to the fact that I had to confine my paper within certain time limits. Humphrey shows clearly the manner in which terms have been given an exaggerated importance and just as clearly states what I had in mind and briefly expressed, that the terms used in psychanalysis are often paraded as if they were actual entities instead of more probably helps to the exposition of false psychic hypotheses. Humphrey is particularly clear with regard to the use of such words as conflict, projection, interjection, and the like, so attractive to the exponents of freudianism. These terms, he holds—and I agree with him—are given utterly unjustifiable valuation, and much of what they are supposed to illustrate can be readily explained on the principle of the conditioned reflex.
One of the first of these efforts was that of Ernest Jones to discover the Oedipus complex in the drama of Hamlet, a task in which I think he was not altogether successful, as was pointed out by Lloyd.\(^\text{14}\)

Jelliffe\(^\text{15}\) tells the story of a patient with various evidences of inherited and acquired imperfections and derelictions to whose complex the psychanalyst could not obtain a clue until at last he learned of a monotonous breakfast in which his patient had indulged for fifteen years, consisting of waffles and maple syrup and sausages, rather small. A further inquiry into the patient’s dietary revealed the fact that for years he had lived chiefly on milk, potatoes and meats. The application of the Oedipus complex to this breakfast and to the generally restricted dietary of this dissolute young man, if not mystic, at least may be regarded as far fetched and fantastic. The milk brings him in Oedipusian relations with his mother’s breast and nipples. The sausages are symbolic of the phallus and even the waffle iron is made to symbolize a pig’s tits and thus play its part in carrying out the interpretation. It does not seem to me necessary to comment on this supposed illustration of the Oedipus complex, and I will leave my auditors to decide for themselves as to the good sense or nonsense of the illustration.

The study of Sophocles’ tragedy is rather enlightening with regard to the extensive use of the Oedipus complex in psychoanalysis. In the first place, because of the prophecy of Phoebus that the son of Laius and Jocasta would murder his father and marry his mother, his parents when he was only a few days old handed him over to a messenger, who was to take him with his limbs gyved and expose him to die in some desert place. It is to be observed that he had probably never been suckled by his mother at all. In the second place, Oedipus, whose life was saved through the kindness of a shepherd and who was adopted by the king of another country, was brought up with the idea that his adopted father and mother were his real parents. Later he became a conquering hero. On one occasion, meeting by chance his father on the highway, he slew him in resentment for what was done by the king’s herald and was attempted to be done by the king. He had no knowledge that he had killed his own father. Still later he married his own mother Jocasta, the widow of the king. In other words, both the murder and the incest were accidental and had absolutely no relation to the infantile and juvenile experiences of Oedipus. It is true that the

story has in it both incest and murder, so dear to the hearts of the psychanalysts, but it is utterly lacking in the main elements of the freudian idea of infantile sexuality and the child-father and child-mother complex.

Under the lead of Freud, the symbolism of dreams has apparently become the chief support of direct psychanalysis, which without dream analysis would probably have soon fallen to the ground.

In profound slumber it is probable that we do not dream any more than we do in what might be termed the knockout unconsciousness which results from a blow. The dreams which can be studied directly in our waking hours, or which can be reproduced by special processes as by hypnosis and deep abstraction, represent what occurs in the predormitial, postdormitial or intradormitial states, that is, in states preceding or following sleep, or in a period of shallow slumber.

A few well known or elemental facts regarding dreams may here be recalled, namely, that they are dependent on experiences recent or remote; that they may be in their content either contemporaneous, retrospective or prospective. They are usually initiated by recent and often very recent experiences. Once initiated, the dream fantasies, through free associations may carry back in time and expand more or less indefinitely. The prospective or anticipatory content of dreams, as Peterson 16 has pointed out, has been largely neglected by psychanalysts in general, in spite of the fact that wish fulfilment plays so large a part in the freudian dream theory.

I have analyzed, or at least have studied, many dreams, not only those which I have experienced myself, but also those of others. In this study I have particularly made an effort to inquire into the dreams of persons of different types and ages. A few dreams are not only frankly sexual, but they may be both retrospectively and prospectively of this description, this fact depending largely on the contemporaneous existence of sexual ideas, tendencies and even experiences of the dreamer. Dreams as to hunger and thirst usually have their initiation in recent or contemporary sense experiences of the individual, or in the verbal or written recital of others.

My views also are entirely in accord with Peterson in statements like those which follow:

The currents of dream consciousness would seem to be a kind of reflection of the currents of alert consciousness, a moonlit underworld of daily common life, with wider horizons as to past and future.

It would seem as though sex and hunger play a secondary part in the behavior of mankind in general. Survival and reproduction are necessary to man's advance as conqueror of his environment, but the goal of his ultimate consummatory reaction is the encompassing by his brain and mind of the planet and the stars.

The "stars" and "planet" thus metaphorically referred to include matters intelligent, intellectual and cultural.

It is the manifest content of dreams which chiefly concerns the dreamer and should chiefly concern the analyst. Symbolic meaning may sometimes be found in this manifest content, and its vagueness may be cleared away and its limits expanded by processes of hypnosis or abstraction or perhaps by appropriate methods of psychanalysis. I do not, however, believe in the "latent dream thought" theory of Freud. To my mind it is mainly an invention of the analyst to enable him to escape from his difficulties in proving his sexual theory. The so-called latent content is in the mind of the analyst and not in that of the dreamer.

The analyst reads much into dreams by direct analysis, by suggestion and by other processes. This statement is, I know, denied by advocates of psychanalysis, but the briefest consideration will show that it has in it much of force and truth. The patient, and especially the private patient, as a rule comes to the office of the psychanalyst fully aware that the doctor is a believer in a sexual theory. The patient is in a state of mind to be led and directed and cannot fully escape from the mesh. The analyst more than the patient is the victim of a powerful autosuggestion which compels him in spite of himself to search for sexual reactions, and to read these into his analytic process.

My mind has been impressed with these ideas as to suggestion by reading many of the published accounts, usually imperfectly presented, of the cases of direct and dream analyses.

These accounts of examples of psychanalysis are usually brief, but brief or lengthy one can often find in them evidences of suggestion, persuasion and domination. In one of the latest articles on psychanalysis which I have read, the doctor, first using the method of word association and supplementing this with suggestion, persuasion and bulldozing, was able to obtain an unusually distasteful story of sexual desires and experiences from an unfortunate young woman.

The method employed in direct psychanalysis and in that of dreams is a stimulus not only to the imagination of the patient, but also to fabrication. In reading one of Jung's accounts of the analysis of a precocious girl of 11, this appeared to me quite evident. It would not be too much to say that this child had the time of her life in the dozen or more interviews with her doctor.
Only a word or two can be said with regard to phallic or sexual symbolism although this subject might easily be made one for a lengthy essay. Drawing from the stories of savage life, from folklore, from myths, from early historic writings, from paintings, sculpture and architecture, from the slang of the bowery, the workshop and the farm, from almost anything in heaven above, or the earth beneath or the waters under the earth, phallic or sexual symbols have been indefinitely multiplied. Everything elongated or capable of standing, from a banana, a snake, a cane or an umbrella, to a church steeple or the Eiffel Tower, has been described as the symbol of the phallus; and every sort of an inclosure from a work-box or a basket to a cave or chasm or cairn has been found to be a symbol of the female genital organ. It is little wonder indeed that the analyst is able to read into his examination a phallic or sexual interpretation.

Although not in France, I had during the last half dozen years some opportunities to study cases of so-called shell shock, and I had much larger opportunities of dealing with these questions in consultation with neurologic colleagues who held positions in neuropsychiatric hospitals both in France and in this country, and during both the active period of conflict and the time which has elapsed since the armistice in the fall of 1918.

To the literature of functional neuroses and insanities resulting or apparently resulting from the war, I have given much attention. As is well known, I wrote the introduction to Southard’s treatise of almost a thousand pages on shell shock and neuropsychiatry. In my study of this work I read the histories of almost all the nearly 600 cases which it contains. So little attention is paid in the reports of these cases to freudism, jungism and adlerism and other psychanalytic schools that psychanalysis of the sexual variety seems to have been regarded as negligible.

MacCurdy, although himself a psychanalyst, in his “War Neuroses” pays little attention to psychanalytic problems.

Rivers, in his preface to MacCurdy’s book, says that this author when considering the simplicity of the war neuroses as compared with those of civil practice, rightly ascribes this to the fact that the war neuroses depend essentially on the coming into play of the relatively simple instinct of self-preservation, while the neuroses of civil life largely hinge on factors connected with the far more complicated set of instinct associated with sex. MacCurdy agrees with other observers.

that sexual factors take a comparatively small place in the production of the war neuroses, but he believes that those who have shown a lack of adaptability to the experiences dependent on sex are also liable to fail in their adaptability to the stress of warfare.

The fact remains, however, that the war neuroses in their symptomatology, diagnosis and prognosis bear a close resemblance to those observed in civil practice. They are perhaps more acute and at times more severe, but they exhibit the same phenomena physically and mentally as the functional neuroses—anxiety neuroses, hysteria and compulsion neuroses—for which Freud and his followers claim that psychanalysis is the effectual treatment. The patients in the cases detailed by MacCurdy seem to have been cured chiefly by methods of powerful suggestion, rest and physical treatment, measures chiefly employed by neurologists and alienists before the entrance of psychanalysis into medical practice.

If these war neuroses, thousands on thousands in number, were developed chiefly through fear often intensified by previous fatigue, and could be speedily cured by methods not of a psychanalytic nature, why may not the milder cases with which we have always been familiar be similarly cured? Col. Robert Armstrong-Jones and Colonel Springthorpe, in a discussion before the British Medico-Psychological Association, took a strong position against the influence of sexual factors either in the etiology or in the treatment of the many cases of war neuroses which came under their observation and supervision. These gentlemen, like others who have written on this subject, show distinctly that the instinct of self-interest or self-preservation rather than any sexual experience or conditions was the great factor in producing this war neurosis which had at its base, in the vast majority of cases, fright or terror. Psychanalysis was tried in some of the cases reported by Colonel Armstrong-Jones and failed, the cases afterward being successfully treated at the Queens Square Hospital. Why waste weeks, months and years with a method of treatment not more useful than our old-fashioned methods of rest, isolation, physical rebuilding, associated with suggestion, persuasion and the personal domination of the patient by the physician?

Ernest Jones in one of his papers on war shock and psychanalysis attempts a defense of the psychanalytic views as expounded by Freud and his followers. This shrewd dialectician is not at his best in this article throughout which he seems to beg the question. Like MacCurdy, he argues that a neurosis of war can be traced in the first place to lack of adjustment or lack of adaptation plus the more immediate exciting causes of fear of exposure, and then of mutilation and death, and then
of distress connected with the methods of life in the trenches. He does not pay sufficient attention to the subject of fatigue, to which MacCurdy gives proper consideration. He makes a feeble effort to relate war shock to sexual phenomena, but frankly admits that he was not able to do this to any considerable extent. He shows what every student of war psychanalysis knows, that the sexual element in the causation of the neuroses is overvalued.

Reference is made in the article by Jones to the question of the traumatic neuroses in times of peace, to the consideration of which he tells us, little attention has been paid by psychoanalysts. I have had a large experience with these traumatic neuroses, having seen scores and perhaps hundreds of these cases, many of which have come to trial in courts of law, and in the study and treatment of which psychanalysis has rarely been used.

Not being a psychoanalyst of the freudian or any other school, I can hardly be expected to discuss the benefits which come to the patient and the community from psychanalysis. One might as well be expected to treat of the benefits to nervous and mental cases derived from “mutilation therapy,” as I am inclined to call the forms of physical treatment which have at their basis the mutilation, destruction or removal of various portions of the body, such as the teeth, tonsils, ovaries, sections of the intestines, etc. It is of course to the advocates of psychanalysis that I must leave the enumeration of its beneficial effects.

It is my belief, however, that the propaganda for psychanalysis has been of considerable benefit to physicians and psychologists in that it has directed their attention to the more minute and profound study of sex, and, as Jung would say, to other energetic phenomena, although the study of sex problems has never been neglected entirely by the really able exponents of neuropsychiatry.

Some neurologists and alienists have perhaps shown a tendency to push aside or dodge sexual investigation, but I do not believe that this is true of the best practitioners in this department of medicine. They have steered a middle course between the tendency to include and to avoid sex problems, occasionally, perhaps because of their peculiarities of temperament and social development, tending to neglect the difficulties of the sexual situation.

With regard to the evils and dangers of psychanalysis: These are in the first place of a general character, although this term is not really as clarifying as it should be. They are the same evils as those which are inflicted on the profession and the community by the too intense concentration on mystic or semimystic subjects, such as spiritism, Christian science, divine healing, cencererism, evangelical healing and
the therapy of shrines, like Lourdes, Knock and Sté. Anne de Beaupré. I do not hesitate to say that great evils have come to pass from the propaganda favoring these so-called forms of cure.

To my mind it is the same evil which may come and which has come from the active propaganda of psychanalytic teachings. I do not here refer to that which has been so often expressed as the moral injury to the community, but my belief is simply that which I think every rational physician is likely to hold, that much of evil and danger may come from the advocacy and practice of any irrational form of treatment.

Like every one interested in the subject of psychanalysis, whether believing in it or not, I have given much attention to the study of the question of “transference” and the “transference neuroses.” It has been defined as a feeling of acknowledged sympathy from the patient to the physician, this sympathy eventually in the course of a so-called successful analysis taking on a distinctly libidinous coloring. Almost every writer on the subject of psychanalysis, like Freud and Jelliffe, seem to recognize and discourse on the evils and dangers of “transference.” The broad statement which Freud makes in connection with his discussion of this subject, namely, that “if the patient has fallen in love with the physician, there might seem to be three courses open. A permanent, legitimate relationship might come to pass, though this would be unusual. Or physician and patient should at once separate and give up the work which they had begun. The third course might not seem incompatible with the success of the treatment, namely, a temporary illegitimate love relationship.”

All three of these courses are disavowed by Freud and his followers for reasons so apparent that one need not here recall them, but the very suggestion of the first and third of these possibilities is sufficient to challenge the safety of such a method of medical practice. I have known of some instances in which such dangers were realized in a serious way after the process of transference had taken place, and of course the psychanalysts themselves have acknowledged the occurrence of such untoward results. Knowing as I do that the anxiety, hysterical and compulsion neuroses can be cured in a less dangerous and less objectionable way, why should we subject our unfortunate patients to this procedure?

In conclusion I might say that I believe psychanalysis, especially the freudian or sexual variety, is tending toward the discard and in another generation will have lost its hold on the profession and the community.
A CRITIQUE OF PSYCHANALYSIS*

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I have no sympathy with the argument of ridicule which Dr. Mills has used so effectively, but, as I believe, for the moment only, and to the apparent delight of a large portion of this audience. I cannot help thinking that if Dr. Mills had confined himself more closely to the text of his prepared paper, which I had his kind permission to read in advance, his criticisms of the freudian psychology would be taken more seriously and would carry greater weight. For a serious argument of reductio ad absurdum is legitimate.

It is difficult to discuss the freudian psychology without first defining accurately what we are discussing. Otherwise we shall be discussing different things, as is commonly the case. Psychoanalysis means three different things:

1. It is a method of examination of the mind for the purpose of determining what factors may be at work as determinants of any given clinical condition.
2. It is a body of doctrine.
3. It is a method of therapeutics.

When we say that we agree or disagree with, that we accept or reject, psychoanalysis, we must clearly understand which of these three categories we are speaking of. Let us, then, consider them separately.

PSYCHANALYSIS AS A METHOD

Psychoanalysis as method of examination of the mind by the technic of so-called “free-associations”: This means simply the recovery of associated memories, of memories of past mental experiences and of behavior awakened in successive associations. Having recovered the associated memories, that is, the thoughts, wishes, behavioristic episodes and other episodes antecedent to the mental condition we are investigating, those are selected or accepted as having a causal relation to the phenomena to be explained which logically would determine these phenomena if they continued to act as subconscious proc-

* A contribution to the discussion of the paper by Dr. Charles K. Mills on “Some Theoretical and Some Practical Aspects of Psychoanalysis,” read at the Forty-Seventh Annual Meeting of the American Neurological Association, Atlantic City, June, 1921.
esses and if, in consequence of conflict, they made use of certain postulated mental mechanisms by which they became transformed and disguised, as "compromise formations."

This method of "free associations" is of unquestionable value for the purpose of digging into the mind and is a distinct addition to our diagnostic technic. It has, however, its limitations and its fallacies. It cannot from its very nature, for reasons I will presently give, be relied on in itself, and particularly to the exclusion of other methods, to give exact results and therefore to permit conclusions which are unquestionable. It undoubtedly, as a method of applied psychology, gives instructive insight into the mind when conservatively and intelligently employed and permits shrewd guesses as to the causal factor for which search is made. It is one mode of attack, and sometimes the only mode at our disposal, but needs to be supplemented by other methods, particularly when the problem is to determine fundamental principles and mental mechanisms. Even for a physical examination of the body there is scarcely a single technical method that can be relied on to give absolutely reliable diagnostic conclusions: auscultation, percussion, the thermometer, the clinical symptoms, all supplement one another for the purpose of diagnosis, and the findings of each require to be interpreted. Even a positive or negative Wassermann reaction is not absolutely diagnostic of the presence or absence of syphilis. If errors attend the diagnostic technic in physical conditions and the findings of each and all methods require interpretation, how much more must this be the case with any technical method that attempts to analyze the numerous and subtle factors involved in mental motives and behavior?

The errors liable to result from the method of "free-associations" are due: (1) to the necessity of depending on interpretations and inferences to connect an antecedent experience with a present phenomenon and, for the purpose of interpretation, of postulating very debatable mental mechanisms to account for the determination by a selected antecedent experience of a present symptom or phenomenon. (2) to the fact that by the use of interpretations very different antecedent experiences can be found to be the logical causal factors of the phenomenon in question.

When in interpreting a given phenomenon, as for example, to take the stock phenomenon, a dream, we have to apply one or more of various theoretical mechanisms, such as conflict, repression, displacement compromise, disguise (to avoid a hypothetical censor), inversion, transposition, regression, projection, introjection, transference,
dramatization, condensation, sublimation, fixation, compensation, etc. —when we have to do more or less of all this in order to connect an antecedent experience logically with the dream or other phenomenon under investigation, it is obvious—at least so it appears to me—that the method falls far short of having that exactness which scientific procedure requires, and becomes a source of a large number of possible errors.

It is impossible for a method of this kind to be reliable and it must give different results according to the intellectual points of view of the interpreters and their differing personal evaluations of the data. But, curiously enough, it is by this very method that the conceptual mechanisms, doctrines and postulated principles of mental activity adopted by psychoanalysis, have been "proved."

Having thus been proved by "free-associations," these postulates are then in turn employed to prove as determinants the selected associations in the psychanalysis of a given case. This seems to me, as my mind works, very much like a very vicious circle.

Here I am led to point out that in the evaluation of psychoanalysis as a method we must distinguish between its use to determine the laws and mechanisms of the mind and its use in applied psychology to discover the particular origin and causes of the psychologic phenomena in particular cases. For the former purpose it is, for reasons I have mentioned, inadequate and unreliable, just as digging holes in the ground is a very inadequate method for determining the principles of geology. But just as digging holes is a very useful method for a mining engineer to employ to determine whether a gold bearing geologic formation is continued deep down in the bowels of the earth, according to geologic principles established by other methods, so digging into the mind by psychoanalysis is a method of great value to obtain information regarding what is contained or going on therein. It is a method of applied science rather than of science itself. In the hands of unbiased and experienced clinicians it is capable of giving valuable results provided those results are not dependent on interpretation through hypothetical concepts and doctrines, themselves of a questionable nature. Too often the results reached are only of a greater or less degree of probability or even possibility.

But I would insist that to demonstrate the mechanisms and processes of the mind and the psychologic principles underlying its phenomena, including in the latter its aberrations, such as phobias, compulsions, hallucinations, delusions, affective conditions, stupors, amnesias, deliria, etc., and the phenomena of conflict in general, we
need more exact methods, comparable at least to those employed in physiologic research and adequate to give relatively exact results.

In illustration of this point I may be permitted to cite an article by a whole-hearted psychanalyst whose manuscript I have had an opportunity to read in advance of publication. The author criticizes, and justly as I think, the psychanalysts for not having analyzed more adequately the repressing force in conflicts and having confined their attention almost exclusively to that which is repressed. He then proceeds by the method of free associations to analyze the former and arrives at the generalization that the repressing force is a wish to please the mother or father and this wish is also a sexual one. So that the conflict is between two sexual wishes and the symptoms are a compromise between them! This seems to be going some. The poor "censor" must indeed have a hard time of it!

**PSYCHANALYSIS AS A BODY OF DOCTRINE**

We come now to psychanalysis as a body of doctrine. We have to deal with the concepts which have been reached by the method of free associations and postulated as fundamental principles.

Let me say at the outset that there are two principles which, in my judgment, must be accepted as contributions of the highest importance to our knowledge, and for these we are indebted to the genius of Freud. One of these is the doctrine or the theory of repression and the other is that of conflict. They are intimately related, for it is through conflict that repression is induced. Before speaking of these I feel called on to say a few words about the subconscious, for this underlies and is the basis not only of the doctrines of psychanalysis but of the theories of psychopathology of every modern school of research. The theory of the subconscious is not novel, nor was it originated by Freud, though that seems to be the impression of many writers on psychanalysis. As a philosophical concept of the unconscious, of which I will later speak, it dates back as far as Leibnitz and Kant, and, later, Schelling, Herbart and Hartmann, the last having evolved it into a biologic and metaphysical system. Freud converted it into a debatable doctrine peculiar to psychanalysis. It remained for Pierre Janet, in France, and Edmund Gurney, in England, to take it out of the field of philosophical speculation and demonstrate by the inductive method its concrete reality as mental processes underlying certain psychologic phenomena. This real pioneer work, in 1886-1887, laid the basis, by the use of experimental methods, for every theory of modern psychopathology that makes use of subconscious processes. It
was comparable in the field of psychology to the demonstration of radio-activity by physicists as intra-atomic processes essential for the explanation of certain physical phenomena. In using the word “demonstration” it must not be lost sight of, however, that both radio-activity and subconscious processes are logically only theories, though as theories they have attained the highest probability of truth.

Dissociation with the formation of subconscious processes that, motivated by their own emotional impulsive force, take on autonomous activity and induce psychologic and physiologic phenomena, had been demonstrated previously, as I have said, by Pierre Janet and Edmund Gurney, working independently, and their conclusions were confirmed (1889 to 1890) by Alfred Binet, William James, Max Dessoir and myself. But later Freud with Breuer (1891) discovered and applied the principle and mechanism of repression to explain the dissociation in the psychoneuroses. This although only a particular application of the dynamic principle was a marked advance. It is Freud’s great contribution to our knowledge of the psychoneuroses. Its importance can scarcely be exaggerated. Nevertheless, it must not be forgotten that dissociation may be effected by simple failure of normal inhibition without repression from conflict, though this is not recognized by psychanalysts.

The motivation, however, of the succeeding subconscious processes became another problem, and the debatable doctrine of the repressed sexual wish, and particularly of an infantile sexual wish, was insisted on by Freud as furnishing an almost universal motive, or urge, impelling these processes to fulfil a sexual aim.

Without further discussion of this wearisome question, I want to point out only that the valuable theory of repression does not require the acceptance of the doctrine of the sexual nature of the conflict and of the repressed subconscious processes. That is an entirely different problem. It is to Freud’s credit, too, that the basis of his investigation was the search for the “Why.” No complete solution of the problem of repression, dissociation and subconscious activity and no complete understanding of the resulting phenomena can be attained without answering the question of the “Why.” How and That are inadequate explanations. But while the freudian psychology has been most stimulating in directing a search for the “Why,” its own answer was and is, in my judgment, radically wrong and has had a most baneful influence.

Repression, as I have said, necessarily implies and requires conflict. The recognition of mental conflicts and their disturbing effects on the individual is as old as literature itself, but we are indebted to
Freud for the recognition of them as factors in the mechanism of repression and the important part they play in the maladjustment of the individual to the environment and the induction of the psychoneuroses. This does not mean, however, that we must necessarily accept the universally sexual nature of the conflict, or the very special mechanisms postulated through which it is conceived that the subconscious process fulfils its aim, or the symptoms are compromise-formations. After recognizing and giving due credit for the theories of repression and conflict, I must think that the greater part of the remainder of the doctrines of psychanalysis are not only unsubstantiated, but cannot be reconciled with a large body of facts which have been gained by other methods of research and which must be taken into consideration. Furthermore, nearly all the facts which have been advanced as the result of psychanalytic methods are open to other interpretations than those which the fundamental doctrines of psychanalysis postulate.

It is, of course, impossible in the time at my disposal to consider all these debatable concepts, but I may take one or two of them as examples.

Let us take the concept of the “unconscious,” as used in the freudian sense. According to the true freudian psychology, a marked distinction is made between two classes of unconscious processes, namely, the preconscious, or thoughts which once were in the domain of consciousness and which can be recalled by the ordinary mechanisms of memory; and the unconscious proper which is not only considered to be inaccessible to direct introspection, but also to be essentially different in kind from the processes of the foreconscious. To reach the unconscious proper requires technical methods of procedure, such as psychanalysis. The unconscious also has marked characteristics which distinguish it from the preconscious, and it alone induces the phenomena of the psychoneuroses.

Before speaking of this I would point out that this division and distinction of subconscious processes is not only not confirmed by other methods of research, but also is distinctly contradicted by the findings so reached. Such a distinction and classification is therefore purely arbitrary and dogmatic. Although it is essential to the pure psychanalytic psychology, I think it can be clearly shown that subconscious (that is, unconscious) processes that cannot possibly be revealed, except through special technical procedure, have been antecedently conscious (that is, preconscious) and induce conflicts and symptoms of the characteristic classical kind. It is true that some latter day psychanalysts have given up this classification of the unconscious: neverthe-
less, we have been told over and over again that it has been “proved” by psychoanalysis and is still held by Freud in his most recent publications.

As to the character of the unconscious proper of Freud, it has been stated axiomatically by an earnest group of students in Europe and America that unconscious processes are of a specific kind, have a specific origin, have specific characteristics and exhibit a specific behavior. According to this theory, the unconscious embraces only processes that:

1. Have been repressed from or kept out of consciousness because intolerable by reason of their immoral, unsocialistic and other characteristics;
2. That for the most part never have entered awareness and therefore have been unconsciously and automatically kept apart;
3. That are essentially of infantile origin and nature, the splitting of the mind into conscious and unconscious regions “having taken place in the earliest part of childhood life, probably in the first year”;
4. That involve the crude primitive instincts;
5. That are predominately sexual in character; and
6. As they, necessarily, like all processes, are dynamic, that they are sexual wishes.

To quote the exact words of one of the leading and most qualified expounders of this school, “the unconscious is a region of the mind, the content of which is characterized by the attributes of being repressed, conative, instinctive, infantile, unreasoning and predominately sexual.”

I have no intention, least of all desire, to enter into any disputatious discussion of this theory. I want only to indicate the point of view from which I approach this problem and to record my dissent from any such limited theory of the subconscious. Without denying that some subconscious processes may have these characteristics (reserving an exception, as the lawyers say, to the extreme infantile origin postulated), to hold that all, or that subconscious processes generally, are of the character stated is to take a far too narrow view of the phenomena. One may say, if one likes, that he will call unconscious only those which have the characteristics mentioned and so arbitrarily define the subconscious. But that does not alter the fact that there are vast numbers of processes that are subconscious and that have not any of the six characteristics contained in the definition and particularly of repressed sexual wishes, or even of having been repressed at all, and that these take part in conflicts and repression with resulting phenomena. The statement contained in the theory is simply not true. One might as well define men (qua men) as criminals, or even as
sexual criminals, repressed in jail, and disregard all other men who are not criminals and not in prison.

And so this conception of the subconscious is not true, not only because it is not confirmed by other methods of research at our disposition but, as I have said, it is contradicted by the findings of the latter.

The fallacy which has led to the theory is, to my way of thinking, as I have already said, due to the inexact and inadequate methods of research of which I have spoken. This doctrine of the subconscious can only be accepted by those who have not had a long training in the technic of the methods of psychologic investigation other than those of so-called “free associations” and who have not a familiarity through actual experience with all the facts as revealed. The validity of the freudian doctrine of the unconscious is of the utmost importance because on it hang all the laws and the prophets.

Let us take the doctrine of the “libido,” which has been one of the fundamentals of psychanalysis, although there is a tendency today on the part of some psychanalysts either to modify it or to discard it entirely, notwithstanding that it has been supposed to have been indisputably “proved.” The doctrine of the libido postulates a concept of a free energy, sexual in character, derived from the primitive sexual instinct, capable of transference from one set of processes to another, and which in its urge motivates and determines through various very special mechanisms psychoneurotic symptoms and other mental and bodily phenomena. Such a libido, sexual in character however much it may be camouflaged by philosophical considerations, is the source of all energy in the individual, though it may be “sublimated” beyond recognition in the higher moral, social, ethical and esthetic ideals and activities.

This conception of the libido entirely disregards the theories of the instincts and the data on which they are based as advanced by biologists and psychologists who are occupied in investigations in other fields of research.

The instincts and instinctive processes and the behavior to which they give rise have been the object of study to earnest students of human and animal behavior, and their investigations have presented important results. There is by no means, it is true, an agreement of interpretation, but the theories advanced are impressive and must be taken into consideration.

All this work is entirely ignored by the freudian school of psychanalysts and until recently by all psychanalysts; and yet some of the interpretations of instinctive processes derived from such studies offer
explanations of human behavior which are entitled at least to con-
sideration. None of these theories may be true but one or more of
them offer explanations which are as probable and adequate as that
represented by the libido.

What shall we say, for instance, to the theory of McDougall, which
has engaged the earnest attention of psychologists and which finds in
the urge of many instincts the motive forces which determine normal
behavior, a theory by which the phenomena of conflicts can be readily
explained? This theory, as well as others, is fully as dynamic as that
of the freudian concept.

And if I may be permitted to strike a personal note without injecting
into this discussion theories I have long advocated, I would re-
fer to my own observations and experimental studies of conflicts and their result-
ings phenomena, carried on for twenty years and more by other
and, I believe, more exact and reliable methods than that of “free-
association,” although the latter has been freely made use of as a
supplementary control. These studies have led to conceptions of
motivating forces and mechanisms which wholly contradict the philo-
sophical doctrines of the “libido” and give very different interpreta-
tions of the phenomena of conflict.

The freudian concept, it is true, makes use of the primitive instincts,
but in a subordinate way, and makes the libido of the sexual instinct
the predominant motivating force. The psychologic and biologic con-
cepts, on the other hand, give to each one of them its just and equal
part in the determination of mental and bodily behavior.

Again, take the doctrine of symbolisms. That symbolisms occur
as mental phenomena no one questions, but the universality of specific
symbolisms occurring in all minds, in all places, and in all ages, is,
to my way of thinking, an extravagance which passes the bounds of
inductive science. The postulation of a symbolism may be necessary
to explain the connection between a mental phenomenon and some
selected antecedent experience in order to interpret the latter as the
causal factor, in accordance with one or other freudian doctrine; but
it does not follow that the causal factor may not be some other equally
well demonstrated one utilizing some much simpler mechanism. As a
matter of fact, I believe that when such phenomena can be submitted
to other technical methods of investigation, it will be found that in
the great majority of cases we can find evidences of subconscious
processes which are subject to an entirely different interpretation than
that requiring a symbolism.

So I might run through the various doctrines, concepts, or hypoth-
eses, call them what you will, of psychanalysis, and I believe that
evidence could be presented that would equally well support other interpretations than those which make up the body of doctrine maintained by psychoanalysis.

Similarly, one might run through the various mechanisms which have been postulated in explanation of amnesia, misspelling, misswriting, misspeaking; of misplacement, inversion, projection, introjection, transposition, etc.; and through the theories of compromise, disguise, regression, and so on, and if one should do this, I think it could be shown that although there may be a certain aspect of truth in each of them in certain specific instances, the use of them as universal formulas to be applied in every instance, not only is a fallacious method but leads to conclusions which are not confirmed by the findings by other methods of research. Amnesia, for instance, may at times be due to the repression of an intolerable memory, or by a wish to forget or some other wish; yet at other times, and probably in the great majority of instances, it is brought about by entirely different mechanisms. Thus it may be due, not to repression in the freudian sense, but rather to a neutral condition of disinterest and perhaps still more often to inhibition by another interest of greater intensity, although both are motivated by palatable aims. In other cases forces using still other mechanisms, which I cannot go into, have brought about the amnesia. But in truth the problem of amnesia is subordinate to the fundamental problem of why we remember at all.

Summing up this analytical criticism, I would say that the great majority and general body of freudian doctrines reached by this method of free-association have not only not been confirmed by other and more exact methods of research, but have also been contradicted by the results so reached.

The failure of the psychanalytic method is due to the fact that the findings require and depend on too elaborate, intricate, and, however ingenious, debatable interpretations, which themselves depend on debatable theoretical mechanisms and forces, and the method itself is not only inexact and inadequate but open to artefacts of the most subtle kind, particularly in the selection of the data. The conception of the subconscious and the theoretical structure built upon it approaches more nearly a philosophy than a science, and with philosophy we are not concerned.

**PSYCHANALYSIS AS A METHOD OF THERAPEUTICS**

Time will not permit me to more than touch on psychoanalysis as a method of therapeutics. That cures may be effected by this method may be admitted as by any method of mental therapeutics whether of
Christian science, faith, suggestion, amulets, charms, reeducation or what not. Successful therapeutics is no proof of the truth of the concepts accepted as articles of belief. Disbelieving, as I do, the fundamental concepts of the freudian psychology, I believe the orthodox method of psychanalysis as practiced by the out-and-outers, is distinctly wrong in principle and meretricious in practice, using the latter adjective in its strict etymologic sense. In too many cases it is degrading to the personality, produces harmful results and is indefensible. Reeducation I advocate, but not of the freudian kind.

THE INFLUENCE OF THE FREUDIAN PSYCHOLOGY ON PSYCHOLOGIC AND PSYCHIATRIC THOUGHT

After having thus criticized the psychanalytic method and the validity of the doctrines, it would be ungenerous not to bear a well deserved tribute to the influence of the psychanalytic school on contemporaneous thought. I regret that the time at my disposal will not permit me to do full justice to this aspect of the subject. There can be no question that Freud, supported by a large group of enthusiastic followers, has compelled the attention of psychologists and physicians and forced them to take heed. Previously scant attention or courtesy was paid to any researches in dynamic or subconscious processes. No better evidence of the change can be adduced than this very discussion—the presentation of the topic of psychanalysis by a distinguished neurologist as the leading subject on the program of this Association today. Time was when any paper on the functional or dynamic interpretation of the psychoneuroses and allied problems was practically taboo in this society of neurologists and psychiatrists, as I can bear witness from personal experience. The older members will remember this uncultured attitude of mind. It was a resentment of new doctrines, of functional conceptions as opposed to the traditional organic conceptions—a Will to Disbelieve. The experience with the psychoneuroses in the great war has been the greatest factor in breaking down this prejudiced attitude. For, as I believe I am right in saying, there is a unanimity of agreement on the part of those who were engaged in the study and treatment of the war neuroses and psychoses, whether in England, France or America, that their pathology is to be found in dynamic, functional motivations and mechanisms and not in organic defects. This point of view and this conception are not novel, but the psychanalysts compelled attention when it was previously refused and forced the study from the point of view of the freudian psychology.

This, to my mind, is the great gain for which we must be thankful to Freud—the acceptance of the dynamic approach and the dynamic
conception of aberrations of the normal personality however manifested. It is the search for the "Why" which is the final step in dynamic pathology. Undoubtedly there is at present a tendency to go too far in the search for functional causes and mechanisms and to overlook the conditions of organic disease. Sometimes one would think that there is no such thing as organic disease to consider. We must keep at least one foot on the ground and not soar all the time, or too high.

While the war forced the dynamic point of view on a reluctant profession, it has also given the coup de grace to many of the freudian concepts and in particular to the sexual wish as the universal determinant of the psychoneuroses. In other words, the freudian doctrine of the "Why"—of the libido and the unconscious sexual wish—broke down as a result of general experience with the war neuroses. Nevertheless, the main and important point is that neurologists and psychiatrists, while far from being in agreement as to the particular causal factors, mechanisms and processes that produce the symptomatic phenomena of the psychoneuroses, generally recognize that the explanation of the latter is to be found in the conflicting instinctive attitudes, strivings, impulses and reactions of human personality.

But what shall be said, on the one hand, of the mental processes of those who, motivated by the Will to Disbelieve, have steadfastly refused even to listen to any such explanations or weigh the evidence on which they are based; and, on the other hand, of those who, motivated by the Will to Believe, regardless of the canons of logic, of conflicting facts and inadequate methods of research, untrained in scientific methods of precision and without a comprehensive background of knowledge of the great store of psychologic phenomena accumulated by experimental psychology, have accepted as proved the excathedra dicta of a psychanalytic master and become devout, faithful believers in doctrines which have never at best been more than working hypotheses, if not mere philosophical speculations based on selected data? In these two types of mind we have a psychologic phenomenon equaling in interest those involved in the problems of the psychoneuroses.

When I was a boy I read in an essay by the French critic Sainte Beuve a sentence which has always stuck in my memory and which I like to think has influenced for good my mental tendencies. The subject of the essay was a modern miracle called the "Holy Thorn." The sentence ran something like this: "Some people see in this miracle a special intervention of Providence; but I can see in it only the humiliation of the human mind."
DISCUSSION ON PSYCHANALYSIS

Dr. Sidney I. Schwab of St. Louis said that there was one aspect of the subject with which he was somewhat familiar and that was the contact which psychanalysis had in the treatment of the war neuroses in the place where they happened, from the time that America entered the war until after the armistice was declared. An opportunity was given to him to test out as much of the psychanalytic procedures as could be carried out under conditions of actual service. From his personal experiences he was led to believe that much of Dr. Mills' objection to it as a therapeutic principle of general application in the neuroses was true. Dr. Schwab approached this testing without the least prejudice against the freudian psychology but rather much inclined to favor it. The war neuroses had proved the ineffectiveness of the psychanalytic method of treatment based on the assumption of its sexual etiology. In literally thousands of cases the etiologic factors had nothing to do with the instinct of sex but had a great deal to do with a more powerful instinct—that of self preservation. He stated that the experience with the war neuroses contributed this fact and there could be no denial of its importance in any discussion of the psychanalytic procedure or of the freudian psychology as applied to the neuroses.

On the other hand, a good deal of the freudian mechanism was absolutely proved to be a definite and crystallized thing in the building up, development and organization of the neuroses.

Dr. Schwab believed that these two things were well worth discussion and debate. That which the experience with the war neuroses has shown to be valuable and true should become the property of every farseeing neuro-psychiatrist. The things that this experience had proved to be untrue should be discarded with all their nomenclature and with all their intricate and mystic complexity.

Dr. John T. MacCurdy of New York said that he was afraid that if the audience expected any gladiatorial exhibition from him it would be doomed to disappointment.

In following what Dr. Mills had said he endeavored to separate the various elements, and found there were perhaps three things that were to be considered. The first was definite argument, all of which was directed against psychanalytic theory in its different schools. As to that Dr. MacCurdy admitted that there was not a single objection which was not an echo, usually in different terms, but nevertheless an echo of difficulties that he himself had met in assimilating the various theories that had been put out by Freud and his followers. It was perhaps not unnatural that Dr. Mills had arrived at somewhat different conclusions than himself, considering the variance of their sympathies.

He refused to enter into the minutiae of these different points as that would take, literally, many hours and briefer discussion would be futile.

The second element was that Dr. Mills expressed certain personal opinions on which Dr. MacCurdy made no comment. He felt responsible for his own opinions and would not presume to criticize another person's opinions which were not based on an argument.

The third and most important element seemed to the speaker to be the general drift and implication of the paper, which was that psychanalysis was a rather ridiculous system of therapy or of psychopathologic theory. It was
so full of logical errors as to be absolutely useless, and presumably therefore should be thrown into the discard. In fact, Dr. Mills finished with a statement that he believed that the psychanalytic movement would run its course and another generation would know it no more.

Dr. MacCurdy reminded the audience that he agreed in essence with many of the criticisms directed against psychanalysis but considered it important to realize the situation with which we are faced. The word, psychanalysis, which fifteen years ago was almost unknown, is today on every one's lips. The commoner terms of psychanalysis had become words of common speech. Patients went to physicians throwing technical terms at their heads. Psychanalysis was allegedly being practiced by laymen, and it seemed impossible to prevent this. If the majority of the medical profession viewed this spread of psychanalysis with horror, it was nothing compared to the frenzy into which it threw the more conservative men who were really interested in psychanalysis.

He thought it would be profitable to consider the actual factors that had possibly gone into the making of this situation. The first one should be recognized frankly. Psychanalysis held most of its popularity in and outside of the profession through what might be termed a pornographic lure. This was an expression not merely of the innate and perennial human interest in sex, but was also part of the general wave of unrest which culminated in the World War. There were, however, a good many evidences of people kicking over the traces of convention for some years before the war began. When psychanalysis appeared it provided a lovely pseudoscientific justification for allying ourselves with the brutes. The argument was, "We must not deny our kinship with the brutes, psychologically, any more than we do anatomically and physiologically. Therefore, if we have these instincts, we are false to ourselves if we do not express them, and express them openly"—an argument which was based, of course, on the fundamental fallacy of lack of recognition of the fact that there was such a thing as human specialization, which involved a definite inhibition of many of these instinctive tendencies in so far as they might be directly expressed.

The second factor dealt with the mystical tendency which Dr. Mills had so emphasized, which was probably much commoner than was realized. It attracted a great many people to psychanalysis.

A third factor, of minor importance, that had something to do with its adoption as a fad, was that it provided a vocabulary with which to slang our friends. A few years ago one could not call his companion a thief or liar without causing some disturbance, but now one could talk about his complexes—a very convenient thing for a good many people. There was a large amount of this meretricious practice in the so-called Greenwich Village type of psychanalysis.

The fourth and most important factor to be considered was the actual achievement and scientific basis of psychanalysis. When Freud's psychology appeared there was a hiatus in our general biologic conception of man; Darwin and his followers had worked out his anatomic and physiologic evolution, but no one had done anything effective in studying man's psychologic relationship to the rest of animal creation and his mental specializations. Now psychanalysis, in Dr. MacCurdy's opinion, represented an attempt (he wished to stress the word "attempt") in that direction, and in so far as that attempt was sincere, in so far as it had been productive of results, there was a sound scientific basis for psychanalytic work.
He wished to raise the question of the exact medical status of psychanalysis in this connection. What did it offer as a method of therapy? As Freud and all psychanalysts had said, it was not a panacea for all psychologic ills. He thought it might be well for him to say what he considered to be the requisite for a successful analysis. The first thing is that the patient should have sufficient intelligence to grasp properly abstract ideas. The second thing was that this intelligence should have been directed, or was capable of being directed, to the pathologic nature of the symptoms and behavior of the patient. One could not cure a patient of something that he did not know he had. The third thing was that there should be a really potent desire to be well and to change the deleterious tendencies recognized by the patient. If those three qualifications were possessed, or could be fostered in a patient, he believed that such an individual could be cured and cured completely by psychanalytic procedure.

Then an important thing to consider was the "psychanalyst" himself. There were now many people calling themselves psychanalysts who were entitled to use the term because there was no copyright on it and there was no legislation in this matter, no licensing. What made a good psychanalyst? In the first place, he should be a medical man. Dr. MacCurdy doubted that he had ever had a single interview with a patient in which he did not quite consciously make use of his definitely medical education, and he did not see how that could be dispensed with. The second point was that the analyst should have a thorough psychiatric training. If one traced the scandalous stories one heard of ill-treatment in analysis (Dr. MacCurdy excluded the work of irregular practitioners, but referred to that of good ethical medical men), it would be found in practically all cases that the patient making the complaints was suffering from a definite mental disease. The analyst lacking psychiatric training had not recognized this fact, through ignorance, had talked of transference to his patient who had translated it into ideas of definite persecution at the hands of the analyst.

Dr. Daniel J. McCarthy of Philadelphia said that he was not prepared to accept the vague interpretations of symbols and symbolism of the psychanalysts as facts, or even near facts, that one could scientifically, safely and continuously reason from to scientifically accurate conclusions. The objection to applying the freudian method to a study of the neuroses, the psychoses and psychoneuroses, is that psychanalysis, as practiced, does not lend itself to criticism by the same rules that apply to laboratory investigation in chemistry, pathology or bacteriology. What scientific workers have a right to demand is that theory should be based on facts, and the facts firmly established, dissociated from theory. Therapeutic results are no criterion of the accuracy of a theory. So much of suggestion, of autosuggestion, of the influence of the personality of the operator, creeps in, that we can no longer tell in the final analysis how important a part each plays. If such were true, Christian science or osteopathy could well point to cures to bolster up the accuracy of the theory. If in the study of a mooted point like symbolism, instead of isolated, interesting cases, a study of one thousand, or ten thousand cases of an isolated disease, like praecox, could give some uniformity of result of the dream content and its symbolization, this would approach a fact and would carry conviction. And so with the other mooted points in reference to the psychanalytic theory.

Assuming that the study of the war neuroses demonstrated that the sexual basis of all the neuroses was wrong, this did not mean that the psychanalytic
theory had no value, but that it had quite as much value with only a relative percentage of cases of sex origin. The fundamental principles of repression and complex formation and conflict remained as a valuable method of study and treatment of these and other cases.

It was early demonstrated that the Ehrlich side chain theory was scientifically incorrect. Ehrlich promptly admitted this. Notwithstanding this, there never was a principle enunciated, not even excepting the Darwin theory, that did more to stimulate and activate scientific work than the Ehrlich theory. The theory, though wrong, was a tremendous stimulus to immunology and therapeutics, to an understanding of infectious processes.

The same can well be said of the freudian theory. Nothing has done more in our time to stimulate a study of the psychoses and psychoneuroses than this theory. Right or wrong, it has awakened a new interest in psychiatry and functional neurology; it has infused a new life into dying subjects. Apart from this, the great value of the freudian theory was to change psychology from an academic discussion of threshold sensations, time reactions, word associations and a philosophic discussion of the component parts of the mind to a real live study of the determination of conduct and its disorders. In medicine, it has taught us the value of properly taken histories of our patients, of the application of psychology to the interpretation of the influence of sex and sex matters in the life history of the individual. Those who have stood adamant against this theory must indeed be blind if they have not seen in their daily work many examples of the freudian mechanisms at play in the amnesias and hysterical disorders of conduct. Dr. McCarthy said that he did not see how any one who studied the psychoneuroses in private practice, in institutions and during the war could have avoided recognizing that a fairly definite percentage of cases belonged without question to the freudian conception of the psychoses and psychoneuroses; the physician who did not see this disregarded what was evident to any intelligent individual.

It appeared to him that there was an intermediate group of cases in which the sexual influence was a definite influence, but in which other physical and visceral or other psychogenic factors were at play.

There is a fairly large group of cases in which physical factors, focal infections or reactive endocrine disturbances are the cause of mental dissociation and disease, in which the sexual factor is of little or no significance.

If in studying these cases and in analyzing and classifying them, a physician or institution closed the mind to the value of the psychanalytic method and theory, a valuable aid to the approach and treatment of a very wide group of cases was lost. It did not mean that this was the only method of approach or treatment of the psychoneuroses. While Dr. Schwab, at La Fauche, used the freudian method of analysis and based his treatment on the theory of conflict at the Neurological Institute at Vichy, the treatment of the psychoneuroses was based on the principles laid down in the Mitchell school, i. e., the treatment of the human machine as a whole, giving due weight to psychogenic factors, but the various physical and visceral factors were never neglected and the reinforcement of the will, suggestion, and reeducation were employed as a therapeutic agent. The application of the principles of pathologic psychology was used from a somewhat different angle than that employed at La Fauche. Dr. McCarthy said that he thought the younger men in both groups could testify as to the efficacy of both methods.

Dr. McCarthy thought that the freudian mechanisms were not going to pass away like many of the fads of medicine of the past, but that they would
become in the future a much more important, if better balanced, part of neurology and psychiatry; that the younger group of men growing up into this atmosphere could not help but be imbued with the freudian terminology and its mechanisms and pathologic mental states.

Dr. George H. Kirby of New York expressed the view that there would be general appreciation of Dr. Mills' suggestion that the time had come to undertake the discussion of the issues of psychoanalysis more on their merits and less on our emotional reaction to them. Dr. Mills in his presentation spoke of psychoanalysis as if it were a fixed system, with settled formulations and a definite technic—a procedure that had been in use sufficiently long for one to draw conclusions as to its real value. Dr. Kirby felt, however, that developments in this country had been far from uniform, both in the theory and practice of psychoanalysis. It was true that the original formulations of Freud had been faithfully followed by a few, but, on the other hand, there had been from the first an independent attitude on the part of many who had declined to be bound by a rigid dogma. It will be found that in practically every center of psychiatric research in this country there has been a notable departure from, or a modification of, the freudian doctrine with the result that the developments of recent years show a marked divergence from the original freudian formulations. The broader psychobiologic conceptions now current in American neuropsychiatry differ not only in form but also in principle from the freudian doctrine. He stated that this had been forcibly emphasized at the last meetings of the American Psycho-Pathological Association.

The speaker did not wish to disparage the constructive value and stimulative influence of the Vienna School—this should be acknowledged by all. But it seemed to him that much of what Dr. Mills found to criticize was already admitted as untenable and to a large extent unessential to the acceptance of the more fundamental principles established through the psychologic, or more precisely the biologic, method of approach to the study of the neuroses and psychoses.

Dr. Kirby said that pansexualism did not need to be dwelt on, as few would maintain that the sex instinct supplied the only dynamic force to be considered in the development of the neuroses and the functional psychoses. One will readily admit that the principle of symbolism uncritically applied opens the way to fanciful interpretations and that it has often occurred; but the fact that this has been done is no reason for doubting its value. In the study of the trends of the psychoses, one will often find that very little interpretation is necessary in order to understand the meaning of the peculiar ideas expressed, as, for instance, in schizophrenia. The Oedipus situation will frequently be found in these cases in almost undisguised form, and it is not necessary to consider the rôle of suggestion as one has to make merely a careful study of the patient's spontaneous utterances; these will often tell the story themselves.

Dr. Kirby discussed one point mentioned by Dr. Mills in his abstract which was not dwelt on particularly in his presentation, namely, that psychoanalysis has proved a failure in psychiatry. From the standpoint of the results of treatment of institutional cases, the assertion may appear to have some justification. He said that few claims had been made as to the cure of constitutional psychoses or functional psychoses through psychologic analysis. On the other hand, the speaker felt that not a single public institution, and few private ones, for mental cases in this country were equipped with facilities and personnel to investigate adequately and treat patients. Nevertheless, several studies have
appeared, chiefly of an experimental kind, which show that even chronic functional psychoses are often greatly improved or that even a social recovery is obtained by a careful psychologic investigation of the case, accompanied, of course, by appropriate efforts at rehabilitation.

Considered from the point of view of a method of study and investigation, Dr. Mills’ statement that psychanalysis was a failure in psychiatry was to the speaker’s mind entirely unjustified. There can be no denial of the fact that the psychologic investigation of the psychoses had thrown a flood of light on the development of mental symptoms in general; their origin and meaning to the patient; their significance in the general clinical picture had pointed to the forces which lie back of the development of the psychosis itself. In other words, this method of study has enabled us to see more clearly that mental disorder is best expressed in terms of a psycho-biologic reaction to life situations; has shown us that mental reactions can never be understood, even those accompanied by organic disease, by studying brain processes as such. We must know the life experiences, the conscious and unconscious conflicts, the aspirations and wishes of the individual and the reactive tendencies of the personality as a whole. The speaker said psychologic analysis contained nothing suggestive of mysticism nor was there anything unscientific about it. It was merely a way of getting at the facts which experience teaches are of fundamental importance in the understanding of abnormal mental states.

Dr. Charles Macfie Campbell of Boston said that from the point of principle he wanted to bring up the subject of the mode of presentation. Dr. Mills, with his large experience, had thought it fitting to use the tone of ridicule. He judged therefore that he considered the whole work, taught by what is widely called the freudian school, so dangerous that any weapon was justifiable. On the other hand, it seemed to Dr. Campbell that the introduction of such an attitude prejudiced the whole subject and made it extremely difficult to carry on a discussion.

Most physicians have known that considerable help can be given to nervous patients by sympathetic talks, and Darwin in his “Life and Letters” told how his father got beneath the physical complaints of women to real disturbing factors of their life.

As to the degree to which examinations are carried, in some cases no doubt after a brief discussion with the patient, difficulties could be discovered which might be easily eliminated by a frank talk. In the concrete case Dr. Campbell wondered whether the principles of the method of attack adopted by Dr. Mills were so fundamentally divergent from those of the psychanalyst, of the pupils of the freudian school. Did he not also try to understand the determinants of the symptoms presented by the patient? Dr. Campbell asked whether Dr. Mills realized that he could not find out all the relevant facts in the first interview. Dr. Campbell asked also whether Dr. Mills accepted the fact that in the determining factors of our life there are few elements more important than the early influences of the home and our relationships to our parents.

Simpler terms might be used, stating that the child has had early antagonism to the restrictions of the father; it might be said that he had an undue emotional dependence on the mother, but if another person chose to use the term “Oedipus complex,” Dr. Campbell thought that he should be allowed to use his own language.
When Dr. Mills said, however, that all of the discussion of the unconscious was nothing more than a reference to what had already been presented much better under the term of heredity, Dr. Campbell wondered if that was not exaggerating the contributions which heredity had made to psychology. To his mind studies on heredity had contributed a modest amount to the knowledge of the complex determinants at work in the psychoses.

Dr. Campbell asked whether there was any psychiatrist studying intensively the deteriorating psychoses, who was not wittingly or unwittingly using the principles emphasized by Jung in his "Psychology of Dementia Praecox," based on the freudian psychology.

Some people are interested in the causes of cancer; others are interested in the treatment of that disease, and so with psychopathology and psychotherapy a person ought not to be abused because he had not made an advance in the field in which he was not working. The value of the contributions to psychology of the freudian theories is not so much along therapeutic lines, as along lines which are going to be of profound influence with regard to education.

Dr. Joseph Collins of New York stated that his qualifications for participation in the discussion were that he had carefully observed the freudian movement for twenty-five years, and for ten years had been an active practitioner of psychanalysis.

He had no intention of attempting to point out in the brief time allotted him how the freudian doctrine was rooted and nurtured in neoplatonism. Any one who wished to learn could do so readily by reading Dunlap’s little book. Neither did he intend to decry the freudians. However, Dr. Collins made the dogmatic statement: the goal of psychanalysis is to expunge the moral faculty in man; its acceptance, as propounded by its founder means abandonment of the ethics and teachings of Christianity, and any one who did not see this was mentally blind or morally oblique.

To the qualifications that the psychanalyst should have, enumerated by Dr. MacCurdy—that he should have both a medical and a psychiatric education—Dr. Collins stated that he also should have an established reputation for honesty and integrity. He should neither have it in his past that he has had to flee his native country for infraction of its laws, nor should he give six weeks' courses of instruction which purport to make psychanalysts of laymen, often lewd laymen.

Dr. Collins was anxious to hear what the members of the American Neurological Association, whose observations and conclusions he had learned to trust, had to say about psychanalysis as a therapeutic agent based either on their experience or on their examinations of its doctrines with their trained minds. He knew what the professed psychanalyst thought about it, but wanted to hear the views of the man who was entitled to be heard. Dr. Collins thought it was a diagnostic or investigative measure of great value, but a therapeutic measure of mean value. It has, however, been a good thing for medicine just as every other recrudescence of neoplatonism has been. Would any one deny today that medicine has not profited by Hahnemannism, or that Christian science had not given a great boost to neurology and psychiatry? Those stately edifices are no more firmly founded in mysticism than the freudian teachings.

Psychanalysis as a pedagogic measure, as a method of investigation, as a penetrating illuminating trend in psychologic research is one thing: to be investigated, to be carefully considered and evaluated and to be utilized. The
origin of the neuroses and the majority of the psychoses in the incest complex is another thing: to be denied, to be despised and to be treated with contempt. If the cause of the neuropsychoses is in some unadmitted sex desire, the way to cure it is to remove the cause, that is, to admit the perversion and gratify it. The freudians dare not say this now, but a few years hence they will say it unless God in his infinite wisdom will send us a new form of mysticism, and we are ready for one as heretofore the visitations have occurred in waves about thirty years apart. When it comes, our appetites for the supernatural will be temporarily satisfied by this more alluring palladium.

Dr. Collins echoed the sentiment of those who disparaged the discussion of this topic from the point of view of levity, from the point of view of ridicule or from the point of view of pornography. He stated that for twenty-five years he had listened to Dr. Mills describe, narrate and discuss papers before the Society but he had never listened to him with greater admiration. He had never been more willing to call him master than after he had listened to his paper. He had shown a grasp of the subject from a theoretic point of view and had put his fingers on the weak spots of the doctrine and of the principles and of the argument, and in a measure of its application, as few men are capable of doing.

In conclusion Dr. Collins stated that no one could injure his amour propre by calling him a psychanalyst, but he did not think to add to his stature by calling himself one.

Dr. Adolf Meyer of Baltimore did not believe that the discussion had added materially to the possibility of clearing up the psychanalytic question—about as little as the interesting book of Mark Twain’s had settled the problem of health cults, although it was an interesting and fascinating product of a man whom we honor, respect and admire very much. He did not think that Mark Twain’s production went very far in making unnecessary the spreading of the Christian science movement and the so-called new thought idea. He felt much the same way about Dr. Mills’ remarkable presentation.

Dr. Meyer said the only way really to approach this problem was to see that we actually turned to that with which psychanalysis dealt—a serious study of dynamic psychology, with actual work rather than production of literature. Up to this date there were in this country no organizations which had given an unequivocal practical support to honest work on dynamic psychobiology; hence, the principal exploitation came through uncritical and flashy literature and wholesale rehearsals in colleges to interest the instructor instead of getting students to do actual work. He thought that as long as the American Medical Association published editorials with so little recognition of the efforts of those who wanted to do serious work in the study of personality and life problems, as long as the financial foundations, which seemed to be the only sources from which money could be obtained for medical research, were adverse even to sincere and critical attacks on this field, just so long would there be trouble from laymen’s exploitation of psychanalysis.

Dr. Mills mentioned the “Oedipus complex.” Dr. Meyer said that he had a rather strong feeling against the promiscuous use of that term, but his feelings were softened rather than hardened when he saw it misinterpreted in this sense. Freud found himself stirred to describe a life situation in that way, a life situation which makes an impression on people because it touches certain tendencies and fears which no other description would adequately describe. He used the Oedipus myth and its meaning to the Greek world as an illustration of the potency of incest fears. Dr. Meyer said that this was true of
many psychanalytic terms. Expressions are used which are perhaps bungling and open to misinterpretations, but at least they bring out new facts as to the native tendencies of man. We could not reduce all these concepts to the principles of reflex-physiology of a necessarily narrow and static type. Neither the American Neurological Association nor any other association should close the door to honest attempts to find new terms for new facts. The chief aim should be to see that there were means furnished to study those facts, and that there should be more work, rather than literature and scintillating talk.

Dr. Charles K. Mills, of Philadelphia, in replying to those who discussed and criticized his paper, said that it first must be emphasized that in a presentation of a subject like psychanalysis to a medical association, time did not permit of its thorough and elaborate consideration.

It has been asserted that neurologists, on the one hand, and academic psychologists, on the other, are not fitted to pass judgment on psychanalysis, but if those who are in favor of psychanalysis and who practice it professionally are the only ones who have a right to speak on the subject, its discussion would be altogether one sided and would not tend to the advancement of the truth. A correct judgment may be reached by a careful study of the literature of psychanalysis, by a consideration of what appears to be its fundamental principles and its methods of practice, and by observation of its effects as observed in the profession and the community.

With regard to Dr. Mills' personal experience, he said that the forms of nervous and mental diseases which have received most attention from the psychanalysts have been for many years under his observation and care both in private and hospital practice. All successful neurologists and alienists have been in a broad sense psychanalysts: Charcot, Gowers, Mitchell, Seguin, Janet, Prince and many others who might readily be named have been among those who successfully practiced psychanalysis and psychotherapy in their own way. The results obtained by these men were as good as those which are claimed by the psychanalysts of the present day.

A proper attention to sexual etiology was not overlooked by the men of this class. Every neuropsychiatrist has had much to do with certain varieties of sexual neurasthenia, or sexual anxiety neuroses, the two designations covering much the same class of cases although a separation between them might in some instances be made. In former days as in the present, many of the cases chiefly exploited in freudian literature were improved or were cured, in so far as such cure was possible, by well known physical and nonfreudian methods.

Dr. Mills went early into the field of hypnotism stimulated largely by a knowledge of the work done by Charcot, and Richer at the Salpêtrière, and his experiences in this field should he believed entitle his views to some consideration. Hypnotism and psychanalysis have not a little in common, a fact which has been clearly recognized by such analysts as Ferenczi and even by Freud himself, although the latter discarded hypnotic procedures entirely as he advanced in his study of psychanalysis.

Dr. Prince, Dr. MacCurdy and Dr. Macfie Campbell lay stress—too much stress Dr. Mills thought—on what they asserted was his too great use of

1 At the meeting of the Neurological Association at Atlantic City the time was exhausted before Dr. Mills had the opportunity of replying to those who discussed his paper. The manuscript of these members of the Society has been submitted to him and his remarks in closing the subject are in the main based on this manuscript.
ridicule in attacking freudian psychanalysis. He would simply say that it was not his intention to resort largely to this weapon, sometimes allowable, in pronouncing his views on the subject. It was not to be put entirely to Dr. Mills' account if some of his auditors in some places chose to see a humorous side to the subject, or if you chose, of his manner of presenting it. If not to freudian psychiatrists, at least to many thinking men, some of the interpretations of dreams and direct analysis to be found in psychanalytic literature could not but make the recorders of the data appear to be too credulous and lacking in scientific acumen.

Is it to be held against him if others like himself found something foolish or absurd in the alleged symbolism of the "tunnel window" incident? Could he be seriously criticized because of his allusion to Michael Angelo and others who have been, as he believed, misrepresented by legends to their artistic productions? The manner in which Dr. Mills had spoken of ancient sophists comparing their terminology with that of modern freudian sophists was not, he believed, unjustifiable.

Dr. Mills said that the object of his paper was not simply to ridicule psychanalysis, but rather to give in a series of briefly presented propositions his main reasons for disbelief in recent psychanalysis and especially freudianism. It might be well for him to recall categorically although briefly these propositions. In the first place, he spoke of the tendency to mysticism or semimysticism as evidenced by different psychanalysts and, curiously enough, as regarded by different members of the psychanalytic school in their comments on each other. He also spoke of their undue use of terminology, a subject which has attracted the attention of others both abroad and in this country. The differences among psychanalysts in their interpretation of the unconscious, their incorrect methods of making use of dream analysis, and their unwarranted employment of sexual or phallic symbolisms in both dream and direct analysis were emphasized by him. In pointing out the possible benefits to be derived from psychanalysis, Dr. Mills indicated, although very briefly, the fact that freudian psychanalytic literature had done much to turn the attention of the profession to the importance of the sexual factors in the investigation of psychoneurotics. In speaking of the evils of psychanalysis, Dr. Mills called attention to the general influence of the propaganda on the moral tone or fiber of the profession and the community, and he also spoke of the particular evils which might result from the so-called process of transference, a point to which his critics had given but little attention. With regard to the subject of psychanalysis and the experiences of the recent great war, he was largely in accord with his critics and others although he did not think that psychanalytic writers had given sufficient consideration to the question of the influence of organic factors in the production of war neuroses and psychoses.

The word "dynamic" had been used in the discussion and in psychanalytic literature in a sense which was at times misleading. Every neuropsychiatrist recognizes a dynamic psychology and a dynamic pathology, but the psychanalysts of various schools at times use this term in a way that tends to the inference that there is a dynamism which has no structural machinery back of it. Dr. Prince, in private conversations and to some extent in public discussion, has shown what seems to Dr. Mills to be a decided tendency to disregard organic neurology, as for instance in his impatience to give it any consideration when describing such subjects as hallucinations.
Dr. Prince accords high praise to Freud for the doctrine of repression and conflict, but, after all, is this doctrine of repression and conflict—of course, not now using these terms simply in a Freudian or sexual sense—any more due to Freud than is the doctrine of the unconscious which Prince properly refers to a group of philosophers some of whom long preceded Freud? The idea of repression and conflict permeates psychologic medicine and is exemplified in much that has been written about such a simple subject as worry, which for generations has been so frequently presented as an important etiologic factor in psychoses and psychoneuroses.

With the remarks of Dr. Schwab and Dr. McCarthy Dr. Mills was largely in accord. What had been said by Dr. Schwab regarding his experiences in France during the war coincided with the views of Dr. Mills as expressed in the body of his paper. Dr. McCarthy was a little more generous than Dr. Schwab to recent psychanalysis in the enumeration of his war experiences. Here and there Dr. McCarthy's remarks were somewhat delphic, not clearly favoring either the psychanalysts or their opponents.

Both Dr. McCarthy and Dr. Schwab indicated that in their war psychiatry they used the older so-called "Mitchell method" quite as much as those of psychanalysis.

With regard to the remarks of Dr. MacCurdy, Dr. Mills had little to say in disagreement. Dr. MacCurdy seemed to have recognized what Dr. Mills believed he had recognized, namely, that the sexual aspects of psychanalysis had proved a dangerous lure to many in the community. Dr. Mills believed that three requirements given by Dr. MacCurdy for successful practice of psychanalysis were those which would be requisite for any method of treatment requiring intelligence on the part of the patient.

As to psychanalysis passing into the discard, Dr. Mills thought that this was true with regard to Freudian psychanalysis although it was quite possible that it might to some extent tend to recrudesce as spiritualism, as all other false medical cults had a tendency at times to show their heads again.

With the remarks of Dr. Kirby, Dr. Mills said he would considerably but by no means fully agree. Dr. Kirby intimated that the Freudian standpoint and the theory of pansexualism had been largely abandoned. While this might be true, Dr. Mills felt that so far as his study even of the recent literature of the subject had gone, sexual theories, largely Freudian, still held a prominent place in psychanalysis. Dr. Mills said he did not attend the recent meeting of the American Psycho-Pathological Association, but was glad to hear from the speaker, and also from Dr. Prince and others that the Freudian shackles were being loosened.

With regard to the psychobiologic approach to questions like the nature of the psychoneuroses and neuroses, Dr. Mills said he was certainly in accord as to its value, but simply wished to insist that this psychobiologic approach should not be restricted too much to purely sexual channels.

Time had not permitted him to discuss the question of insanity in its relation to psychanalysis. He believed, however, that the general statement of the preliminary analysis was correct, namely, that psychanalysis had not proved a success in the therapy of mental cases.

Dr. Mills said that he disagreed with Dr. Kirby when the latter said that there was nothing of the mystic element in psychanalysis. Certainly there should be nothing of this kind in genuine healthful psychanalysis, but Dr. Mills believed that he had made clear his point that any thoughtful student of the well-known literature of psychanalysis could not help see in it a ten-
dency to mysticism and he would like again to call attention to what he referred to in the paper as presented, namely, that some of the strongest protagonists of psychanalysis had discovered or believed they had discovered a mystic or semimystic element in the work of their confreres of some other subdivision of the general psychanalytic school.

With reference to the remarks of Dr. C. Macfie Campbell, Dr. Mills said that he undoubtedly in his practice tried to discover the determinists of the symptoms which were presented by his patient. Every practitioner of neuro-psychiatry of any force or standing does this, but he does not and should not lay all or even the greatest stress on the sexual history of his patient unless it became clear in his investigations that it was this which played the chief rôle. As in the reference made by Dr. Campbell to the father of Darwin, it is certainly desirable in studying the affections of nervous women and everybody else to get a sympathetic insight into the causes of their nervousness, but does this mean freudian psychanalysis? One of Dr. Mills’ objections was to the prolonged probing to which patients were often subjected, if he was to judge from the literature of psychanalysis and from conversations both with psychanalysts and their patients. He hardly thought it necessary to take weeks, months and even years to get a sympathetic insight into the nature of a case. He was sure in some instances of which he had knowledge that this prolonged probing had done more harm than good. Dr. Mills thought that Dr. Campbell had misunderstood his allusions to heredity. It was in connection with the views of Jung as emphasized by Nicoll that he had spoken of this subject. These gentlemen seemed to build up out of the unconscious of many generations a pet theory of the unconscious. One does not inherit the unconscious, what one does inherit is traits, trends and tendencies.

Dr. Mills agreed largely with all that Dr. Collins had said except of course his too complimentary remarks about himself. He thought he was right about neoplatonism, which was in a way a corroboration of the views expressed in his paper. He believed also that the too ardent pursuit of sexual psychanalysis certainly tended to undermine ethics and perhaps Christianity.

If Dr. Meyer in his reference to Mark Twain had Dr. Mills in mind he would only say that he thought that Dr. Meyer had been a little hard on this distinguished humorist with whom Dr. Mills said he had no right to be classed.