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Response to Margaret Wilkinson

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lt is a great pleasure to respond to Margaret Wilkinson's very moving, engaging, and timely paper.

Margaret Wilkinson shows us how a working knowledge of the neurobiology of dreaming can enrich clinical work. Her clear thinking does not interfere with emotional empathy, and so she offers us a more differentiated and integrated approach to the timing and nature of the analyst's comments, questions, and interpretations. Her relationship to the research, in short, opens up analytic imagination rather than limiting it.

With deftly chosen examples, she calls our attention to the affective content of dreams and the affective interchange between analyst and patient as a dream is discussed. In the six million pound house dream vignette, we see engagement, curiosity, excitement, and a stepping back from heightened enthusiasm when the patient adds, 'I don't know about the horses'. Then the analyst brings up her own association, relating it to their work together, and the patient responds with feeling and reclaims and interprets the horses as her passions. Here we see the way an empathic resonance between the analytic pair fosters symbol formation and, with it, the anticipation of a more passionate engagement in life. There are initiatory and cultural aspects to this dream, but these are not commented upon nor interpreted. It's the patient's affective life that wants to come more fully into the treatment. She is already objective and abstract, and at this time objective comments from her analyst would risk wounding her emerging hope-and fear-that her emotional life can come alive.

Wilkinson gives us another case example showing the emergence of memory when warded off affects evoked by drearns are metabolized by the analytic pair. The patient's dreams (and perhaps those of the analyst?) develop into a series. She reminds us that the focus is not on reconstructing the past, and yet that can be a bi-product of the work on affect. This brings up an interesdng issue in the treatment of early trauma-the patient's wish to know what happened can be at odds with the healing that comes from a careful and sensitive exploration of dream affect. She then reminds us that dreams are undistorted *inner* reality. This vignette also suggests an important area for future research, namely, the mechanisms of cognitive amnesia and its lifting as affects are

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processed. How might the brains of trauma vlctlms light up differently at different points in the treatment? Here Margaret Wilkinson reminds us that early trauma may decrease the size of the *corpus collosum,* which is the primary pathway for interhemispheric communication, and she suggests that analysis might reverse this effect. This is a hypothesis that is potentially testable.

She also notes that dreams can be communicated through image rather than words and that it may be necessary for some patients to use this approach. As dreams are primarily visual and somatic, as weil as auditory, we might ask about what is lost as the patient brings a dream into consciousness and translates its vivid imagery into words, images, movement, or another form of creative expression. On the other hand, what is gained by this translation of the dream experience into forms that we can reflect upon using the very parts of the forebrain that are silenced during dreaming?

Wilkinson's focus on dreams is especiaUy welcome, given the diminishing interest in dreams among psychoanalysts and quite a few Jungians, who favour attending to process as seen during the analytic session and interpretations that focus almost exdusively on the affective relationship between the analyst and the patient. Tue dinical relevance of dreams within developmental paradigms has received inadequate attention, possibly because Freudians have been hampered by a wrongly conceived theory and method for dream interpretation. A contemporary example of dream-neglect is the Freudian psychoanalyst Allan Schore's (1994, 2003 a, 2003 b) awe-inspiring three-volume, 1ooo pages, interdisciplinary synthesis of work from attachment studies, psychoanalysis, developmental neurobiology, and neuro-imaging studies of brain activity. Dreams are mentioned in passing in the first volume, not mentioned at all in the second, and in the third, *Affect Regulation and the Repair of the Seif* (2003b), I could find references to dreams in only three sentences, none of which refers to their clinical application.

Other psychoanalysts, however, are trying to resurrect Freud's dream theories with claims that new findings in neurobiology support both his structural theory and his theory of the wish-fulfilment function of dreaming. One of the most active proponents is Mark Solms, who is the Chair of Neuropsychology at the University of Cape Town, the Director of the Center for Neuro-Psychoanalysis of the New York Psychoanalytic Institute, a consultant to the Anna Freud Centre in London, and the author and editor of a number of scholarly books (1997, 2oooa&b, 2005, Solms & Turnbull 2002). In a May 2004 article in *Scientific American,* entitled 'Freud returns', Dr. Solms cites cognitive neuropsychology research that demonstrates the phenomena of repression and unconscious processing. More controversially, he asserts that Freud's 'pleasure principle' is receiving new validation from the studies of brain lesions, as well as studies of the confabulations in Korsakoff's syndrome patients (p. 86). He also states that the brain structures corresponding to Freud's structural theory are now known. This is illustrated with a diagram showing a mid-saggital section of the brain, locating the *id* in the brain stem, the *ego* in the entire posterior cortex and cerebellum, repressed contents in the ventral frontal cortex, and the

superego in the dorsal frontal cortext! Dr. Solms' article is followed by a response from J. Allan Hobson of Harvard Medical School, entitled, 'Freud returns? Like a bad dream.' Hobson has written at length about findings from neurobiology that discredit Freud's 'pleasure principle', as weil as Freud's theories of censorship and disguised content in dreams (Hobson 2003). He asks, 'Without disguise and censorship, what is left of Freud's dream theory? Not much-only that instinctual drives could impel dream formation.... In dreams, what you see is what you get. Dream content is emotionally salient on its face, and the close attention of dreamers and their therapists is all that is needed to see the feelings they represent' (2004, p. 89).

In her discussion of the models offered by Solms and Hobson, it is clear that Wilkinson agrees with Hobson. As noted above, she considers dreams to be undistorted psychic reality, as proposed by Jung, and she cites evidence from recent studies using non-invasive neuro-imaging techniques that allow three-dimensional spatial mapping of metabolic activity in real time. These studies can be more clearly interpreted than research with patients with traumatic or surgical lesions or with a degenerative condition, such as Korsakoff's Syndrome. Nevertheless, we must consider the current findings preliminary: for example, a region of the brain could have the same metabolic rate and yet different circuits within that region may be active. We can anticipate many refinements in the coming years, as the equipment becomes less cumbersome and the resolution techniques in time and space improve and are coupled with more information about circuit properties, local and interregional patterns of activity, and the cellular effects of neurotransmitters with their multiple types of receptors. It can't be lang before someone creates neuro-imaging markers that differentially label neurons according to their receptor type.

Brain imaging could]end crucial validation to the work we do as analysts and perhaps help us to refine our analytic technique. Jung searched for comparative material to test his ideas about the phenomenology of the unconscious, as revealed by dreams, and he found it in alchemy. Perhaps neurobiology provides a different kind of comparison, similar to the way a study of the electrical activity of the muscles of the face helps us to understand the affects underlying facial expressions (cf. Darwin r872h998; Ekman & Rosenberg 1997).

On the other band, it could be tempting to rely too heavily on neurobiology and lose sight of the ***reality of the psyche.*** The San Francisco analyst, Joseph Henderson, said in a 1982 lecture, 'You see, our psychological point of view is not just a rational, scientific procedure but one that evokes the nature of the unconscious and its corresponding imagery' (p. 63). As I understand it, Jung's psychology is a method that relies less on abstract theory or biological models and more on the symbolic function of the psyche and its capacity to represent itself. This may appear radically different from a scientific ***Zeitgeist*** that focuses on the observed and reproducible. In fact, it is not so different, since scientific theories often are often conceived as mental experiments before any data are collected. Roger Shepard of Stanford University, one of the most cited

and honoured of contemporary psychologists, and his colleague, Piet Hut of the Institute of Advanced Study, Princeton University, have suggested:

> Instead of speaking of conscious experience as arising in a brain, we prefer to speak of a brain as arising in conscious experience. From an epistemological standpoint, starting from direct experiences strikes us as more justified. As a first option, we reconsider the 'hard problem' of the relation between conscious experience and the physical world by thus turning that problem upside down. We also consider a second option: turning the hard problem sideways. Rather than starting with the third-person approach used in physics, or the first-person approach of starting with individual conscious experience, we consider starting from an 1-and-you basis, centered around the second-person.
>
> (Hut & Shepard 1996, p. 313)

These ideas broaden the context for our discussion of the analytic dyad and of the inner dialogue between the waking ego and dreams. We are reminded that, according to Jung, the psyche symbolizes itself to consciousness in dreams with an apparently ***self-regulating*** compensation or complementarity. We refer to a ***dialogue*** between the ego and the Self and the process of individuation.

There is no appreciation of the dialogue between consciousness and dreaming in the research literature on dreaming. Most research subjects are undergraduates who are in a laboratory attached to monitoring devices and sleeping rather poorly. In some studies, their dreams are collected and analysed for content to make generalizations about the function of dreaming. Might we see different patterns of neuronal activity in more mature individuals? Margaret Wilkinson's case examples also bring up questions of whether the psychological function of dreams and physiological concomitants of dreaming change over the course of an analysis. We might also ask about patterns of neural processing while a dream is discussed by the analyst and patient. And wouldn't it be interesting to record the patterns of neural activity during dreaming and compare that to the patient's brain patterns as the dream is discussed during the session? And to watch the analyst's brain patterns during that same session?

The questions addressed using the new imaging technology will be of most value if they are informed by a more sophisticated view of dreaming than most researchers have. In fact, I believe Jungians are in a unique position to speak about the nature of dreams, because we have been working with dreams and exploring their psychological reality and phenomenology. Might we consider forming a working group to explore the interface between our knowledge about the phenomenology of dreaming and the neuro-imaging research, with a view to opening up a dialogue with dream researchers?

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