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Suppléance by the Symptom: A Case of Anorexia

Summary:

This is a case of hysteria in which the anorexic symptom has a specific function: it separates the patient from maternal *jouissance*. It thus takes on the Name of the Father for the subject. This is an important consideration in treatment.

The feminine Oedipal structure as Freud discerned it in his young hysteric patients in the first half of the twentieth century has taught us that the question “what is a woman?” is first posed by a girl to her mother. Later, upon finding that the maternal response has only misled her, she chooses to pose the question to her father, as if, in the course of her searching, she had the presentiment that an appeal to the father’s desire was likelier to enlighten her as to what awaits her as a woman than the connection she maintains with her mother, privileged as this is. Whether Dora or the case of the young female homosexual, these patients showed Freud—well before he was able to properly gauge the measure of the problematic—that an Oedipal girl chooses to avail herself of the father, of his desiring gaze, lacking that, of the signs of his desire, in order to “turn into” a woman. The fact is that if she models herself on the mother, her femininity risks finding itself at an impasse. Since the mother was the first big Other, the Other of the primordial demand, the relation of a girl to her mother always remains contaminated by the question of the satisfaction of maternal *jouissance*, regardless of whether the girl chooses to devote herself to it or defend herself from it.

It is only in his late texts elaborating feminine sexuality (1925–1932) that Freud succeeds in theorizing the particulars of the feminine Oedipus complex. He was thus led—none too soon—to recognize the full importance, in the life of a woman, of the trace of that first love for the mother, which she felt as a little girl. “Many phenomena of female sexual life which were not properly understood before can be fully explained by reference to this phase [of exclusive attachment to the mother],” writes Freud (1931b) in “Female Sexuality.”

Following Freud’s elaboration of this point, we realize that he never confuses this remainder of attachment to the mother, through which a girl can remain fixed to autoerotic modes of *jouissance* that are at times very archaic, with that which would constitute the essence of feminine *jouissance*. On the contrary, he demonstrates clearly that the archaic attachment would act as a handicap on the girl’s femininity. Indeed, Freud (1931b, p. 239) writes, “[t]he transition to the father-object is accomplished with the help of the passive trends in so far as they have escaped the catastrophe. The path to the development of femininity now lies open to the girl, to the extent to which it is not restricted by the remains of the pre-Oedipus attachment to her mother which she has surmounted.”

These remainders, if their roots go deep into the phallic omnipotence characterizing the mother–daughter relation, can only form an obstacle to femininity as such. But also, because the originary mother-love has ended in a “catastrophe” for the girl—that of maternal castration—these remainders belong to a site both

devastated and devastating, trapping she who loves inside an infernal love where the relation feeds principally on the culpability of the subject and on the infinite reproaches and accusations directed at that “prehistoric, unforgettable” Other, “which will never find its equal,” (Masson, 1985, letter no. 52) and is thus maintained, for better or worse, in its original omnipotence.

This is why Freud (1931b) attests that “[t]he turning away from her mother is an extremely important step in the course of a little girl’s development” (p. 239). This led him further to confirm that access to femininity is not to be had on the part of the girl except insofar as, exiting her captivity in maternal desire and the autoerotic jouissance that that implies, she turns to the father—which additionally implies a partial renunciation of an infantile jouissance of the masturbatory type in favor of another relation to jouissance, one more specifically feminine. Hence for Freud, the girl does not become a woman except by way of the father; the transfer of the girl’s phallic demand from the mother to the father thereby marks her passage to femininity. From then on, the question “what is a woman?” could not be posed except outside the maternal sphere.

The conditions of this exit from the maternal, which already present a structural problem, frequently require us, living in modern occidental societies dominated by the discourse of science and in which the forms of the family have changed irreversibly, to search for new modalities. The appeal to the father is no longer a given; whereas in the traditional Oedipal sequence the father is taken first as love object and later as identifying pole, other strategies will now enable the adolescent to dare to be unfaithful to the mother.

It is remarkable that the solutions adopted by these young women consist less in salvaging a figure of the father—a religious solution—whom they have learned from the earliest age to do without, the name of the father having already been destituted, but in inventing the possibility of metaphor that they make use of symptomatically.

So our contemporary clinical practice shows us that a symptom is frequently called upon, in adolescence, to (supple) for the failure of the paternal metaphor, all the while keeping at a distance that remnant of the maternal demand that still attacks the subject. Notably, many cases of anorexia perform this function and are to be taken thus in the context of the cure. At other times it will be a psychosomatic symptom, equally spectacular and equally capable, if aggravated, of putting the life of the patient in danger. On yet further occasions it is a symptom that renders the patient incapable of living, as for the young woman who could not stop “falling,” fainting in public.[1] I will furthermore recall one young woman’s striking solution, silently invoking, with each spoken phrase, the name of her father, but in the way of an insult.

All of these symptoms work, either as appeals to the father or as solutions by *suppléance*[2], to interrogate that point in the structure where the paternal function is lacking. This is why the patients cling so stubbornly to the symptom, and why, from this point of view, they are right to do so.

If the analyst does not recognize that the symptom has first and foremost this function of *suppléance* he risks accepting a merely therapeutic aim. All the more so as the symptom here often occupies center stage in a spectacular manner, refusing to take its place in the patient’s discourse, in such a way that it is difficult for the analyst not to pay it more attention than to an “ordinary” symptom. The question always arises whether the patient is signifying something to the Other by manipulating it, or whether we are dealing with an autoerotic jouissance that does not address itself to the Other. In each case, it is the analyst’s desire that comes off the worse, obliging him to abandon his reserve; whence the importance, too, of not settling for the diagnosis of hysteria.

I first encounter Ella at age eighteen. The transparency she displays contrasts with the model beauty of her face. She slumps her shoulders, her anorexic body hidden beneath the unisex uniform of jeans and oversized sweater. She speaks rapidly, in bursts, leaving the ends of her sentences incomplete, suspended over an almost palpable void in which her thoughts seem to disintegrate.

In the first session she says nothing about her anorexia. This is, incidentally, not the reason for her coming. She has sought an analyst in order to authorize herself to leave the rigid and infantilizing “regime” of schooling in which she has progressed—brilliantly, it must be said. The stress generated by her prestigious studies quickly exhausts her; she no longer sees either the necessity or the purpose of them. She has no desire for a career, but would like something else... what? Perhaps “another life,” a “real life,” one not always already tainted with boredom.

Of her life until now, she says, “there’s nothing to say.” No defining event; all is smooth, as smooth as she herself appears to be... with the exception of her manner of speaking, as she repetitively stumbles over words. I will soon learn that everything in her life has always found a practically perfect solution, without remainder or regret, thanks to the unfailing understanding and infinite goodness of a very attentive mother.

She speaks of this mother, whom she loves tenderly and who holds an important place in her life—she has never taken a decision without consulting her—as of a close friend: she is independent, tolerant, open, and most importantly, has never failed her. This is the reason for her anxiety; she might disappoint her by announcing her intention to continue with a less prestigious course of study.

In the course of analysis it would come to light that “pursuing a prestigious course of study” was Ella’s way of compensating for her mother’s inferiority complex vis-à-vis her own sister, who seemed to her to have succeeded better in both social and private life. From this we can deduce the position that Ella had chosen to adopt with respect to the mother, whose complete attentiveness made it impossible to reproach her for anything: she had resolved to restore to her what was supposed to be lacking, to give her what she is thought not to have: that success, the object of sisterly rivalry between her mother and aunt, in turn with regard to *their* own mother. Hence what has motivated Ella from the earliest age, without her knowing it, is, it seems, the need constantly to support and to make whole this mother who, however, appears so perfect and faultless.

Nonetheless her life history will reveal some important events. I very soon learn that her parents have been separated since she was four years old. She has no memory of her father “at home”; it is as if they had always been separated. She sees him regularly, at the weekly ritual of a family dinner, during which she feels relaxed and can eat “freely.”

A bit later I will learn of other events, serious ones that have marked out her life. And yet none seems to have taken on the value of a psychological event, none has constituted a trauma from which she might preserve the trace of something suffered.

First of all, she will mention, in the course of talking about something else, that she had an abortion before she was fifteen. When I draw her attention to the remarkable character of this event, she replies that it “went very well for her” thanks to the understanding and the efficacious intervention of her mother. It passed, that is to say, without apparent trauma. It had started because of a schoolmate who regularly spent the night with her, in her room, as they had done since childhood. They would remain good friends, the boy never knowing what happened. It seems that for the mother, her daughter’s precocious pregnancy was above all a question of purely physiological functioning, to be dealt with as such. And so it was dealt with, as always, with “the best” for Ella in mind—with the consequence that she was deprived of responsibility for her action.

In both cases, the parents’ separation and the abortion, my intervention consisted in insisting that these events were important ones in the life of a girl, later an emerging young woman. And there was no doubt that this first intervention by the analyst constituted a rupture in the flimsy framing of her life, beginning to fashion it as a story. This was opposed to the desire of the mother, a desire to protect her daughter, to spare her any trauma and ensure that “nothing” would ever make her suffer. All in all, a natural desire on the part of a mother which it would be wrong to judge, but which, in a situation in which she is her daughter’s sole recourse and support, had the effect of denying Ella the authority to live her own life.

My intervention led Ella to speak of a third event that she can now designate as “serious”: the anorexia. This has lasted for three years without becoming life-threatening. It began during a trip abroad.[3] This was the first time she had left home alone. On the pretext of language study she had been sent overseas during the long school vacation that followed the abortion, in order to give her something else to think about. There she met a young man, a foreigner like herself (from yet a third continent), with whom she had a brief affair. She says this was her first real lover. It was at this time that, thinking herself too heavy, she decided to lose weight. Her father, greeting her upon her return, without recognizing what had occurred, congratulated her on her figure. This was a proof for her that a father has no function that is useful in the life of a girl.

When I took the occasion of her having discreetly mentioned it to ask, just as discreetly, how it was between her and him, she remarked cheerfully: “my father—that’s insignificant [in French *insignifiant*—=“*un signifiant*”, ‘one signifier’] “I see him when I want to, there’s no problem,” before adding that at the weekly dinners she takes with him and his new family, she can eat “freely,” thus necessitating all the more privation during the rest of the week.

Nevertheless, my question about her father was sufficient for her to produce a dream. And this first dream of the transference is indeed of a resolutely Oedipal nature. In the first part she is eating lunch with her father at a restaurant. While she eats without inhibition, she catches him looking at the other women in the vicinity. Thereupon he proposes to make her a gift of some clothes. Since this is usually her mother’s area of concern, she finds it slightly strange. She seems to herself to be a girl.

In the second part she has regained her actual age, and is with her father in the clothing store. She picks out a sweater and a “rather feminine” skirt, she says, which she tries on in front of him, without using a fitting room, as if she were still a girl. At the sight of her bared breasts, he remarks: “at your age you don’t do that anymore.”

The magic of the dream shows us here the father, who just yesterday was “insignificant,” propelled onto the scene of desire as privileged partner of her *fantasme*. If she is surprised by the dream, she associates it with a thought that came to her at the end of the previous session. From the doorway, she asked herself “what good is a father?” The dream is an answer to the question. The second part of the dream is a representation of her Oedipal *fantasme*: a scene of seduction in which she “makes herself seen” by the father, an attempt at a presentation of her femininity, and a paternal injunction. As for the first part, let us say that its associations will hinge on sexual trauma, on the basis of a characteristic she discerns in the paternal desire and that causes her to grant this “insignificant” father the stature of the “father of the tribe.” This likewise confirms that she can indeed eat in peace when the father is there. He is a “father-shelter.” There remains the riddle of his *jouissance*, transmitted by the gaze.

Another element of the father complex will quickly be perceived. We know that distancing herself from her mother by going abroad on her own allowed her to enter into an “adult” sexuality (this is the term she uses to distinguish her sexuality as woman from that which preceded it, the sexuality “of a child,” which ends with the abortion). It is in this foreign land that she has her first experience as lover—but, let us note, *with a foreigner*. For it turns out that the foreigner is also her father. Her father is in fact from a country other than France (we could say, in a way, from another continent); he immigrated, alone, as a teenager. She drew attention early on to the fact that all the lovers she has had since have shared this same characteristic: they are all “foreigners” whom, most often, she has met in foreign places. Being foreign appears as a condition a man must meet in order to enter into her object choice. Adult sexuality, therefore, becomes a possibility for her by her leaving the mother country and entering a foreign country, or the country of the foreigner, which is the condition of the paternal trait. This confirms the thoroughly Oedipal use she makes of this father, at first deemed “insignificant.”

Nonetheless, the version of “her story” that she begins to construct for herself at the same time as she offers it to the analyst will induce her to put two elements in relation to each other for the first time, elements

which, until now, had nothing to do with each other in her view: the abortion and the anorexia. Is not the latter a way of erasing the traces of the former, even of erasing all trace of that femininity which appeared with the prospect of maternity? Is not this the implicit meaning of her symptom?

No matter that the eruption of meaning that occurs at this moment and appears to her as truth is still far from the truth of her symptom. The important thing is that by bringing together these two events that had previously been disjoint, she has authorized herself to find a meaning in what happens to her and to recognize, there, the place of a suffering subject, a subject that manages to express itself in the symptom. Now that her unconscious is no longer perfectly smooth and without roughness, her relation to time is accordingly altered.

She now feels a need to speak to me about the *jouissance*—so intimate, yet so enigmatic to her—that she takes from depriving herself of food. The anorexia comes into the analytic foreground.

I will not go into the highly obsessional alimentary rituals of this young woman, who was, in fact, a gourmand: making hierarchies of foods, incessantly designing menus that would be “possible” on the basis of a calculation of the ensuing weight gain, weighing herself before and after each meal. Suffice to say they were at one and the same time the apparent cause and the solution of a psychological “unease” that preoccupied her almost without respite.

Later, she will confide to me that she felt some *chagrin* at not having been able to interest me more in the surprising and occasionally dangerous circumvolutions on which her anorexia took her. There she thought she might succeed in captivating the analyst, not so much to catch me out—not, at least, at that time of the analysis—as to put a seal on the same well-meaning complicity between myself and her that characterized the relation she had had to her mother, but from which she was beginning to distance herself.

It is known and has often been remarked that anorexics quickly come to understand the fascination they hold for those around them and the advantage to be gained. In the case of Ella, the obsessive character of the privation was far more striking than the tendency to manipulate her world.

All the clinical literature on anorexia insists on the energy expended in order to hinder all sexual identification, by erasing the signs of femininity that mark the body, and on the *jouissance* derived from thus mastering the body, enclosing it within a masochistic autoerotic *jouissance*. And this holds true in many cases.

But in the case of Ella, the symptom presented itself on the contrary as the condition of possibility of her sexual relation with the foreign man. If desire presupposes lack, the path to desire passed, for her, by way of the privation of nourishment, that is, by the creation of a lack where, previously, maternal solicitude had filled all need. It is thus a hysterical desire, to eat “nothing,” in an alienating relation to the maternal demand. From this point of view, anorexia is a symptom that assures the subject of a desire that nothing will ever be able to fill or sate.

In the cure, this is verified by the strange way in which she uses the expression “to be eaten” (*à manger*). Until the appearance of the symptom she had the reputation of being a gourmand and of eating well. As a child, then, she ate whatever there was some “to be eaten” on her plate, and to general satisfaction, serving as an example to her best friend who still picked at her food. Today she still feels a duty to eat everything she is given “to be eaten,” from whence the necessity to prepare her own food so that her privation can overcome the imperative to eat, though without getting rid of it. If eating is the way by which her drives obey the command of the Other at the risk of her finding herself identified with what is the Other’s “to be eaten,” the introduction of privation into this circuit is a way of not being fully trapped in it. The privation of nourishment, though it draws upon the alimentation that governs this mode of relating to the Other, is at the same time an attempt to break with it, to cause a separation between the subject of the demand and the maternal Other’s demand. We could say that anorexia, by pushing to an extreme the privation of food,

signals the subject's refusal to feed this alienation by which the jouissance of the Other is satisfied.

The analytic work shows that Ella had borrowed this trait, paradoxically, from her mother. She had always known her mother to be following some diet or other; as a girl she had not been allowed to have cakes or sweets in order that her mother would not be tempted to eat them herself. To deprive herself of food is, hence, a jouissance she shares with her mother and by which she can at any moment find herself in her and *as* her. But it is also a trait that she had drawn out of the problematic of her mother with regard to her own mother, the maternal grandmother of my patient, a truly emblematic figure of the nourishing mother, considered authoritative and all-powerful, if aging. Going on a diet is the way in which Ella's mother orchestrated her refusal to yield to the overstuffed delicacies prepared for her by a culinary expert mother; moreover it is the way she found of making herself not all to her mother.

Ella's symptom built itself upon this maternal trait extracted from the problematic of the separation of her mother from her own mother, now pushed to its extreme limit—anorexia. The passage to the limits (indeed, beyond) characteristic of anorexia is necessary in order for her to appropriate the maternal trait and utilize it for herself. There where she cannot help but forego the father, not being able to use him, she makes use of the maternal reference, which entails paying the superegoic price of the resulting culpability. And this is why here anorexia—with death its ultimate aim—is the price to pay for having dared to be a woman for a man, having dared to be unfaithful to the mother. At the same time, the symptom is that which permits the structure to hold at the point where, falling in love with a man, she first posed the question of her femininity. In this regard, it is a “symptom-*suppléance*,” a milestone marking the limit beyond which the father's metaphor does not cease to not inscribe itself, leaving her defenseless, threatened with disappearance, embodied in the maternal belly as something “to be eaten”—but for the barrier of anorexia.

And this is why it is better not to disturb this symptom, not to try to eradicate it. For, like any symptom, the more one attacks it the more it builds defenses, thus affixing the patient to the deadly jouissance it fulfills.

For Ella, the symptom subsided “without her noticing.” One day she realized that her preoccupation with food had ceased to possess her and that she had begun eating “normally, or just about.” For the cure, it was a question of something else: the object-gaze. She now remembers that superegoic, persecutory gaze trained on her whenever it was time to eat, and which obliged her to eat all there was “to be eaten.” It had disappeared, she could not say when or how. Nonetheless one can suppose that its decline had begun with the first dream of the analysis, with which she had risked the first advance onto the scene of her Oedipal fantasy.

At this point, we add, the analysis was far from over.

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Bibliography:

Freud, S. (1931b) “Feminine Sexuality”, *SE*, 21, pp. 225-243.

Masson, J.M. (1985), ed., *The Complete Letters of Sigmund Freud to Wilhelm Fliess, 1887-1904* (Cambridge MA: Belknap Press).

Pickmann, C.-N. (1997) “Féminisme et féminité: vers une hystérie sans maître?”, *La Clinique Lacanienne*, 2. Reissued 2000.

Notes:

[1] The case is described in: Pickmann (1997).

[2] *Suppléance* is a concept invented by Lacan initially to speak about experiences in the clinic of psychosis, in which the subject, although lacking the paternal metaphor creates an alternative solution, which is valid only for himself, which serves to uphold the psychic structure. However, it is notable that the paternal metaphor never overcomes the enigma of the desire of the Other. There is a gap that remains unsymbolizable. In a second stage of his teaching, Lacan extends this concept of *suppléance* to any clinical structure. In the case reported, it is a symptom of anorexia, which serves for the patient as the Name of the Father.

[3] It should be highlighted that cases of anorexia arising on the occasion of a first trip in the parents' absence are very frequent.

Bio:

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