Clinical Manifestations of Early Traumatic Imprints

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Abstract: By one extended and another short case-study Wilheim illustrates the effectiveness of her theory in the psychoanalytic process. At first she gives an abstract of some essential assumptions of her theory: the basic matrix which contains the imprints done by means of the cellular memory, acting out as the expression of earliest traumatic experiences, and the transformation of cellular memory into memories which is made possible during the psychoanalytic treatment. Patient A, after years of silence interrupted by outbreaks of understanding and gratitude comes to find out by himself that his fidelity to his mother’s destroying forces hindered him from communication, he felt an unbearable pain whenever he was about to feel an atonement with his analyst, as if semen and egg were forbidden to come together in a happy union. With patient B the intensive feeling of tragedy led to an early understanding of the loss of a twin. The ways of re-editing and working through early traumatization may differ in time.


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My presentation will mainly consist of clinical material with which I intend to illustrate some of the situations mentioned in the theoretical proposals stated by me in papers published in the past.

I shall briefly summarize some of them, mainly those around which turn the clinical situations I selected to present today:

– In the utmost depths of our minds, lays a basic matrix which contains the imprints, done by means of a cellular memory, of the whole process of our biological experience, from preconception to birth – that is, since the formation of each one of our two basic germinative cells – sperm and egg – up to the moment of birth.

– From this basic matrix derives the raw material of the unconscious phantasies.

– Thus phantasies are memories. They correspond to the psychical representations of the imprints of the early sense impressions, which are stored as raw material for thought, into which they will later be transformed when a mental apparatus, sufficiently developed, will be available.

Going further down to some more details on the constitution of this basic matrix, which will be pertinent to the first of the two clinical situations that I shall present, I wish to stress that the very earliest imprints of the basic matrix, refer to the experience of the two germinative cells: (a) what each of them undergoes since its respective origin up to the moment of their mating; (b) the “relationship” established between the two cells, before, during and after this encounter; (c) the vicissitudes and torments undergone by the now “couple” – the concept – submitted to a violent struggle for life just after its first “birth”, because of the destructive attacks from its first environment, giving rise to “feelings” (sensations) of panic, threat of being destroyed, aborted.

In fact, physiological destructive substances produced by the mother’s body, are activated in order to eliminate this new life that has just been created, which now represents a foreign body, that the mother’s immunological system seeks to reject or expel.

Thus the moment of mating, of fusion and fulfillment may be experienced as joy for life being created; but it may also be felt – mostly on the sperm’s cellular memory side – as a moment of torture and destruction, in which he loses his previous identity: he loses his tail, his head swells four times its original size and then opens up to deliver its genetic code to the egg. Depending on the sort of imprints that will prevail, this moment may stand for the place of a basic human trauma: the trauma of conception. If such is the case, the prevailing imprint will contain the message that the coming together of the two cells has the meaning of something that should not have been, a dangerous experience to be forever avoided; heterosexual mating as something dangerous, castrating, annihilating; something that causes great pain.
The place and moment of conception may in these cases also stand for being the place of origin of a feeling of guilt, both to the sperm’s cellular memory – for having forsaken his kins in the field of death – and to the egg’s cellular memory – for having “left its mother’s home”, for having “married a stranger”, for having dared face the unknown adventure of starting a new life on its own.

Among other things, this place may become the place of origin of autistic encapsulation.

Now, in order to help you to better understand how I was led to the visualization of what I just presented to you, I shall briefly introduce you to the path I followed.

In the mid seventies, the ideas of the English psychoanalyst Dr. Wilfred Bion, were starting to be known in Brazil. From 1973 onward, he himself visited Brazil once a year, for lectures and seminars, until 1978. Thus, I had the opportunity to share some of Dr. Bion’s experience through supervisions, clinical seminars, lectures and in 1979, through a short-time individual analysis with him in Los Angeles. These contacts with Bion and his ideas changed my whole approach to the understanding of the psychoanalytical experience and session. I started looking at it as an encounter of two minds, following the biological model of conception, whose outcome was meant to be the discovery of the unknown.

I then observed surprising and curious situations: while I would offer my mind to be used as an available mental space to contain the mind of the analysand, in order to help him process his concealed “unknown”, I started noticing that: (a) the analysand would either start acting destructively towards this space and function put at his disposal, instead of keeping his communication at the level of free association as I had been taught to expect him to do, or (b) he would behave in a treacherous way, misleading me by producing false material to be “interpreted”, or (c) he would withdraw into an ‘autistic’ protective shield, or (d) he would turn against any positive gain from our psychoanalytical work and attack it destructively.

I was puzzled.

The available psychoanalytical theories were of little help to really understand and handle such situations in order to achieve psychic change. My supervisors offered me worn out Kleinian or Bionian theoretical notions referring to greed, envy or an urge to destroy. Such interpretations would not produce any real effect or mental change. I realized their ineffectiveness to undo the psychopathological patterns. They were merely descriptive.

I felt an urge to reach beyond the surface. I wanted to understand what was it that produced such destructive mental movements?. I wanted to understand the origin of envy, of the psychotic part of the mind, of the attacks on linking, of the perverse part of the personality. I wondered why would a mind avoid mating with another mind. What sort of pain was feared and avoided? Why would a mind suddenly retreat and hide beneath a sort of protective shield? Where did it come from? What was its origin?

I had at my disposal years of listening to Bion’s contributions communicated through metaphors. It was a matter of deciphering the metaphors. And so I tried to do.
Eventually I came to realize, through clinical observation and also by deciphering my personal insights, that the mind was reediting, when brought into contact with another mind, the experience of the biological conception of that particular individual – the circumstances of the getting together of the two germinative cells – and that the impediments that arose for the achievement of the psychoanalytical encounter were difficulties which reproduced some traumatic event that had occurred and been experienced at the moment of conception, having been imprinted – by means of a cellular memory – on the unconscious matrix of that mind.

I realized that the psychoanalytical setting and encounter favoured the appearance of patterns of behaviour – that were once biological, and were now but mental – registered on deep protomental furrows, which would emerge in the here-and-now of the psychoanalytical experience, because they are imprints of traumatic, hence not-digested, experiences that had established points of trauma which turned out impeditive for the development of normal mental growth.

I therefore realized that the psychopathological patterns which I was facing in my psychoanalytical practice when the two of us – analysand and me – came together to accomplish something [psychoanalysis] must have originated much beyond the time and place to which the current theories would attribute their origin. They were manifestations of something very early and very primitive, belonging to the prenatal period of that existence.

I then put forward the hypothesis that the destructive performance in which my patient’s mind would occasionally engage, was a way of telling me about things that had happened to him, and were imprinted on his unconscious mind, since a time where there was no access to verbal speech nor verbal thought. I realized that the patient was telling me, through this acted out language of communication, of some terrible experience that had happened to him at the very beginning of his biological existence: somewhere on the way from preconception to birth.

I also realized that this sort of “acting out” could be looked upon as a “Rosetta Stone” of early primitive imprints and could thus mean a precious and valuable source of information. It could represent an important tool for grasping the meaning of communications about very early life-threatening experiences that had been registered only on a sensorial level. They represented a knowledge that the mind did not “know” about. They were there, imprinted on its basic unconscious matrix, passing valuable informations concerning something very threatening that had once happened to that self, which now the self felt an urge to “know about”, in order to be able to transform in into thoughts and thus deal with it mentally, working it through. Otherwise it would go on reappearing, repeating compulsively its auto or hetero destructiveness.

Through deciphering my counter-transferential feelings and reactions aroused either by the patient’s projective identifications or some other dissociative mental process, I realized that in the here-and-now of the analytical encounter to me would sometimes be assigned the role of the patient’s once endangered, suffering or victimized self: either as sperm, or concept, embryo or fetus.

Thus, through this new way of looking at the analysand-analyst interaction in the analytical process, a new light could be thrown on the meaning of the negative therapeutic reactions in psychoanalysis. The disruptive mental movements and attacks on analysis, on the analytical link, on its products or achievements,
could be looked upon as reeditions of very early prenatal traumatic experiences imprinted by the concept or fetus, feeling threatened of being annihilated, aborted or destroyed. All these being situations that the patient is unable to communicate through verbal free association, as classical psychoanalysis would consider proper – because his mind does not “know” about them. The only language he can employ to convey such early experiences, is acting them out in the transference.

And now I shall illustrate with clinical material how these theoretical concepts take shape in the process of an analysis. I shall start with the clinical material selected from my analytic experience with a male patient, aged 45, to whom I shall refer as “A”. I see A. five times a week.

By the end of his first year of analysis, many years ago, the patient found out (ou, realized) that he was making big progress, that he was having a good analysis and that he was receiving good help from me. This acknowledgment came home to him through remarks made by people who had daily contact with him, mainly in his work; they commented on overt changes in his performance and behaviour, and would ask him for the name of the analyst with whom he was having analysis.

As soon as he got aware of this, he shut up, stopped progressing, changed to worse, hid the good results, and from then on started acting towards me in a very perverse manner. All his gains were gone.

Since then we have been struggling with progress/destruction of progress, whenever it was reached. Gains/ destruction of gains.

It took me many years before I found out about the prenatal basic matrixes pattern. Since then, it has enabled me to identify in his analytical performance – in the here and now of the transference – some bit of his prenatal history, from pre-conception to birth. Our analytical couple was reediting some of the sperm’s traumatic experience, as it had been imprinted by his cellular memory.

In this presentation I shall focus on the clinical material selected from sessions of the last five months.

In an August session, he tells a dream: he was at a banquet and was eating a very special and tasty dish. He was surrounded by people eager to know the name of the dish because they wanted to have the same. He doesn’t mind revealing its name.

The dream was understood as the ‘banquet’ standing for his analysis and the ‘special and tasty dish’, for the analytical food he has been receiving, ‘special’ because of the particularities of this analysis in which we have been exploring the mysteries of his origins, the process of his creation and of his coming to be (fishes and aquarium).

He then tells a second dream. In the dream, somebody had stolen a part of the motor of his car. A girl whose name – in the dream – was Andrea Ségati (in Portuguese “Cêga-te” means “blind yourself”).

[Comment: At the end of the previous day’s session, he had said that it was a pity that as a baby he did not have a mother like I was being to him: somebody able to understand his feelings and naming them to him thus helping him to understand himself and introducing him to his own self].

I then refer to what he had said at the end of the previous session, adding that it might seem to him that the reference he had done to me as the ideal mother and expressing his regrets for my not having been his real mother, might have sounded to him as an act of treason towards his mother; a betrayal of his pact with her against his growth. So, who stole from him the benefits of his analysis, causing impediments to his good mental functioning, was a part of him which wanted to keep him blind, wanted him to remain without understanding or perception, a part of him which was compromised with his mother, who did not admit to be betrayed.
In order to expand on this dream and its associations I use the model of the egg (ovum) as a cell of the mother’s body, which is reluctant to marry a stranger – the sperm – who carries a different genetic code, which means a very dangerous affair [in the previous day’s session he had said, referring to his mother: “I have the same genes as she has; yours are different”].

Concluding, I suggest that his present experience evoked in him something of his first original experience.

After a series of sessions in which he keeps silent, I tell him that I understand his silence as a negative reaction brought up by the sessions in which he had gained understanding and perception (insight). And I add, expanding on this, referring to the model of his own biological conception which, I suggested, was reediting itself in the here-and-now: after having been conceived by the sperm penetrating into the egg, the new concept was attacked by its mother’s physiology, which included her immune system. This goes on repeating itself every time something similar happens again, like the fact that he had conceived/understood something new.

This was followed by an outburst of gratitude which he communicates at next day’s session: it had taken hold of him the evening before while watching a film on TV; the film dealt with issues referring to the search for the ‘dawn of creation’. He realized that the last period of his analysis had been dealing with facts that had happened at the dawn of his being created and these facts have been reproducing as mental facts all throughout his life.

This outburst of gratitude was once more followed by a withdrawal.

A week later, another dream whose meaning led me to understand that he felt that he was being pulled by me out of his autistic encapsulation.

He feels enchanted with this insight and understanding and with the hypothesis I offer him of a protective shield which he created immediately after conceiving/after having been conceived, in order to protect himself from the mother’s destructive secretions, meant to destroy and eliminate him: as a newly born concept, he produced some self-protective substance in which he “wrapped” himself, creating an impenetrable crust on the egg’s membrane surface which would not let in these corrosive substances.

He answers: “I then use to feel a reaction, as if ‘auto-immune’, as if I had lupus. It produces a pain which makes me shut-in, a blocking of an autistic type. In the past I used to cheat you or lie to you in order to protect myself, a sort of camouflage to avoid true contact.”

After another series of silent sessions, A. comes out of his silence.

After commenting on how my receptive attitude, waiting patiently without pressing him, for him to feel ready to establish contact again, he tells of how this attitude helped him to get rid of a terrible feeling of being chewed: “I realized that I was not in a grinding meat machine. This phantasy of being grinded like meat, makes me feel caught in a vicious circle, which imprisons me.”

I tell him that I understand that he had re-experienced in our mating encounter the sensations of the sperm (he/patient) feeling that he was being tortured by the egg (me/analyst).

After listening to me, he says: “I remembered a fragment of a dream . . . when you mentioned the head; in the dream there was a head, separated from the body; it was inside a sort of plastic bag and the head was being beaten, maltreated, kicked. The relief started yesterday in the session . . . a super-ego which forces, crushes, squeezes . . . and I felt here that I could remain, without being pressed. Every time in the past when I here entered here into intimate contact with you, having pleasure, enjoying the intimacy, I would feel this pain, this suffering, which would start immediately afterwards.”

I say that this was the first time that we were able to follow it bit by bit.

He says: “What is important is that this time this could be focused upon. It is an important experience: to realize that such a thing is possible, feasible. It created the condition
to make me be able to stand it; we were able to stand it all. In the past I used to cheat you in order to sneak away . . . ”

I mention the importance of “naming”.

He says: “It is much more important than naming. Naming hurts. For he who has this trauma, naming is scalping . . . We were just able to remain closely together.”

Recurrently, along his analysis, there have been moments when A. struggled to speak, to produce associations and communicate.

Some time after the beginning of his analysis, I once said to him that his staccato way of communicating made me think of a man who, in sexual intercourse, would withhold ejaculation because he was avaricious of what he’s got and also resenting of giving his sperm to a female mate out of jealousy of her making use of it to create a new life.

The patient presently has a grown-up daughter, aged 30, conceived when he was a young boy of about 14 by a mate who at the time was around 16, working as girl servant in his parents’ home.

When the girl started labour , she was taken to the hospital by A’s parents, who believed it was a crisis of appendicitis. They were startled when the doctor informed them that she was about to have a baby.

A. married his daughter’s mother only a couple of years ago, having legally legitimized his daughter some time before.

The daughter, now a young woman of thirty, is a medical doctor practicing psychiatry in another town of the state of São Paulo. For many years she underwent analysis with a woman analyst, but instead of flourishing she would get worse, became very aggressive towards her parents and finally, after an attempt at suicide by taking pills, her parents advised her to quit that analysis.

For years there was no reference whatsoever to the daughter’s analysis.

Then, a month or so ago, the patient refers a dream. In the dream, the woman who was once analyst to his daughter, appears. On referring to her, A. says: “My daughter’s analyst . . .” I inquire: “Your daughter’s analyst or your daughter’s previous analyst?” A. then explains that his daughter had reassumed her analysis with this same analyst some time ago, and it became obvious that he had carefully concealed the fact from me.

The fact that he had avoided to mention it in his analysis, was in itself revealing that he felt that he had done something he himself did not approve of.

In his analytical session, he realizes his feelings of uneasiness and guilt for having let his daughter reassume an analysis he doesn’t agree with, from which he himself had already once talked his daughter out.

After we work through this situation, he realizes that he has a concealed aggressiveness towards his daughter, which has always been there and that his attitude had been an acting-out of his difficulties towards her. He realizes that this aggressiveness had been there since the very beginnings of his daughter’s existence, having already been expressed in his complete denial of the pregnancy as a whole: he did not know that the girl was pregnant. This veiled aggressiveness towards his daughter, he realizes, has been responsible for his difficulties in relating to her.

Some weeks after this analytical revelation, we come to a session at Xmas Eve, in which he gets aware that his previous difficulties towards his daughter were gone.

The here-and-now of the session, brings up a new situation. A. feels a difficulty at conveying things to me: he feels that he gets emptied when giving me associations which I can transform into interpretations, thus creating something new:

A: “If I speak, I feel I am being emptied while you who already have so much, will have more. It is different to give when one has a reserve and is constantly producing . . . ”

I then say, using the model of the sperm donating his contents to the egg:
“When the sperm gives his contents to the egg … it is different if one considers it as a *contribution*, than if one feels that one is being exploited; the sperm is contributing with its genetic load to the creation of a new life; it is his participation in the creation of the concept into which he himself is transformed.”

A. describes how he feels at such moments: “I have to desperately shut the doors because I feel I shall run out of stock, get drained to the last drop and remain empty, without anything at all. (…) It results in something perverse, because against nature. There is something demoniac about it because it is as going against being a link in the chain. (…) I rejoice in what we are discovering, because I am realizing the other side of it, I can see the other side, the pleasure to give. It is like being ‘God’s friend’, to be on God’s side. One has to feel rich enough in order to be able to give. It is more difficult to give without the quality of fecundation.”

At this moment he gets aware that, among other things, he had denied the gestation of his daughter, because he could not bear the fact that he had given away his sperm with which a new life was being created inside the feminine body, while he was excluded from the whole process of creation.

Further on, we came to understand that for him the experience of the moment of conception, had been imprinted as something very painful on the sperm’s side: to give away the genetic code had been felt as being deprived, emptied to death. Thus his hatred against giving, his hatred towards life-creating, because it meant the *destruction* of the sperm.

In the Xmas. Eve session – which symbolically represented his first birth as *concept* – he was able to realize and experience something different for the first time: that his giving away of something of his (words and associations) was related to life and had to do with the new life that in his inner self was now being created.

It enabled him to view the process of conception in a different way than he had seen it until then: it had meant to him the destruction of the sperm; now he was able to feel it as an act of creation of a new life.

At next day’s session he says: “The last session made me experience something I had never experienced before: experiencing conception as something creative, without destructibility.”

I comment that he had gained something new: he had been able to reach the place of creation without destruction, with an element of pleasure. He was inaugurating his possibility of having, or experiencing, a happy mating.

He says: “I experienced the possibility of being able to be in deep communication with you without feeling any suffering or pain.”

After having presented these excerpts from the analysis of A. with which I meant to illustrate the way in which very early imprints, reflecting problems related to the trauma of conception, take shape, impairing mental functioning and behaviour and reflect in analysis, I shall briefly refer another pre-natal traumatic situation, related to the loss of a twin and how it could be grasped in the here-and-now of the analytical process.

The patient B., a woman aged 50, sought me for analysis a couple of months ago, after having had two previous long analytical experiences. When she sought me, she seemed very desperate, and made me feel that I represented her last chance for doing something on behalf of herself.

We had first two initial interviews, then – due to the fact that I had to be absent for a week – we only started to work after that.

Since the very beginning, B. felt that I was able to grasp her and understand her better than she had felt understood ever before. In our third session, a small
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misunderstanding caused her to interrupt analysis, leaving a check with a note instead of coming to next day’s session.

It seemed quite amazing to me that after being so much enchanted with what she was getting and having felt so depressed during my previous week’s absence, to the point of mentioning suicide, she would just drop it all.

I then decided to call her in order to tell her that this movement of hers which I had observed, seemed to me worth of having an opportunity to be talked about, and so she came to next day’s session.

After my describing this movement of hers – first highly idealizing what she was getting from me, then for a nothing letting it all be dropped and smashed – I tell her that this probably represented a familiar pattern of hers, which she probably repeated often in many other situations of her life. B. confirms this and expands saying that after causing a rupture in a relationship, she would easily resume it “if the other person would take the initiative of an approach.”

Deepening and going forward on this issue, I understood that she would often provoke situations which ended in her breaking situations or relationships.

This led me to consider that this might be an acting-out of some early prenatal imprint of a threat of being aborted. She confirmed this hypothesis, expanding on this matter: she was the first child conceived, her mother being a very hideous woman who hated children and loathed her marriage; when finding herself pregnant, she had searched for an abortion and was intercepted by her husband in the consulting room of the doctor, the husband threatening her that he would kill her if she went on with this intention.

A couple of weeks later, new clinical material brings us on this issue once again. B. was telling me about a supervision she had had the previous day. On her way home she kept to a fantasy that her performance had been quite insatisfactory and that on arriving home she would receive a phone-call from her supervisor telling her that he wouldn’t see her any longer and was going to communicate to the Institute that she could not be promoted.

This negative fantasy with an unhappy end, revealing such a pessimistic disposition, made me consider that it might again have something to do with the imprints of the threats of being aborted.

I pointed this out to her, suggesting that this seemed to be again the manifestation of her “syndrome of being aborted” or of “having been aborted”. I comment on it being so strongly imprinted in her, that it was always ready to appear; she was now preparing to provoke one more abortion of herself.

She asks me why would she be doing this repeatedly.

Starting to answer, I suddenly realized that she had no reason to prove she had been aborted, since in fact she had not been.

At this very moment, it occurs to me that she might have had a twin. Very cautiously, I then forward this hypothesis to her, saying that we had no way of verifying, and so on.

I describe the possibility of there having been another foetus conceived together with her, who had died. And the possibility of her having identified with the dead twin, whose disappearance she had witnessed.

In answer to this, B. asks me to notice the way she was lying on the couch: in fact she was just occupying the left edge of it, leaving an empty space on the
remaining two-thirds. She adds: “I always do this, either lying down or sitting. I always leave room for somebody else, as if always there was somebody missing.”

We take time exploring this issue. I connect it with the issue about “death” which has been haunting her sessions since the beginning, her deep sadness, the terrible feeling of tragedy which was always there, her deep unhappiness, her feeling of not being worth or “deserving”, her references to having two very different personalities.

She adds that she always had the feeling that she was a survivor and that she had some sort of a “mission”. She had never been able to make out what this feeling was about. She was now realizing that this feeling which has always been there – of her having the mission of living a life worth-while-living – was due to the feeling that she had been “spared”; being the “survivor” she had the responsibility of making the most of her life, thus honouring the memory of the dead one who did not have her privilege.

Concluding Remarks

As you can see, it is work in progress. Before I come to an end, I wish to make a brief comment on the analysis of A. This analysis has been going on for many years. After the series of sessions reproduced above, A. reached a level of well-being which he has been able to maintain without the disruptive attacks which had been his pattern along all these years.

This led me to consider that the element responsible for his possibility of keeping his mind integrated, was that the pain which used to produce itself whenever two cores came together, did not produce itself anymore. I am thus led to consider that this pain was responsible for the continuous splittings of his mind.

Could we dare extend this psychodinamical understanding to other splittings of the mind? I will now also allow myself to suggest that the destructive substances with which the mother’s physiology attacks the concept right from its very beginning – that is – as soon as the two germinative cells come together – constitute the origins of the murderous super-ego, whose pressure splits the mind apart. Consequently, the mind keeps itself splitted defensively, in order to avoid the pain (see “Anatomia” (1983) in “Unterwegs zur Geburt”, p. 31)

Once again I here say: this is still work in progress.

References