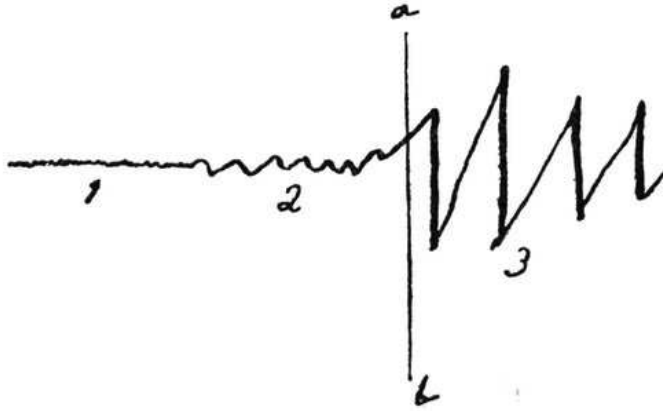


“Collected Papers on”
ANALYTICAL
PSYCHOLOGY

“Included Glossary of Jungian Terms”

“Collected Papers on”
ANALYTICAL
PSYCHOLOGY

“Included Glossary of Jungian Terms”



Carl Gustav
JUNG

Translator & Editor:

Constance E. Long

ILLUSTRATED &
PUBLISHED BY
E-KİTAP PROJESİ & CHEAPEST BOOKS



www.cheapestbooks.com



www.facebook.com/EKitapProjesi

Copyright, 2018 by e-Kitap Projesi

Istanbul

ISBN: 978-625-6004-02-3



© All rights reserved. No part of this book shall be reproduced or transmitted in any form or by any means, electronic or mechanical, including photocopy, recording or by any information or retrieval system, without written permission from the publisher.

Carl Gustav Jung

* * *

COLLECTED PAPERS

ON

ANALYTICAL PSYCHOLOGY

BY

C. G. JUNG, M.D., LL.D.,

FORMERLY OF THE UNIVERSITY OF ZÜRICH.

AUTHORISED TRANSLATION & EDITED BY

DR. CONSTANCE E. LONG,

MEDICAL OFFICER, EDUCATION BOARD; MEMBER AD-
VISORY COMMITTEE INSURANCE ACT;
EX-PRESIDENT ASSOCIATION OF REGISTERED MEDICAL
WOMEN, ETC.

LONDON

1920

[All rights reserved]

Contents (Numbered)

EDITOR'S PREFACE TO SECOND EDITION	24
AUTHOR'S PREFACE TO SECOND EDITION	27
AUTHOR'S PREFACE TO FIRST EDITION	32
CHAPTER I: ON THE PSYCHOLOGY AND PATHOLOGY OF SO-CALLED OCCULT PHENOMENA.....	36
Case of Somnambulism in a Person with Neuropathic Inheritance (Spiritualistic Medium).	49
Development of the Somnambulatory Personalities.	63
Automatisms.	81
The Change in Character.	94
Relation to the Hysterical Attack.....	102
Relationship to the Unconscious Personality.	108
Course.....	109
The Unconscious Additional Creative Work.....	111
CHAPTER II: THE ASSOCIATION METHOD	119
Lecture I.....	119
Lecture II: THE FAMILIAL CONSTELLATIONS.....	152
Lecture III: EXPERIENCES CONCERNING THE PSYCHIC LIFE OF THE CHILD	167
CHAPTER III: THE SIGNIFICANCE OF THE FATHER IN THE DESTINY OF THE INDIVIDUAL	190
CHAPTER IV: A CONTRIBUTION TO THE PSYCHOLOGY OF RUMOUR.....	208
Aural Witnesses.	210
Hearsay Evidence.	215
Epicrisis.....	219
CHAPTER V: ON THE SIGNIFICANCE OF NUMBER-DREAMS.....	222
CHAPTER VI: A CRITICISM OF BLEULER'S "THEORY OF SCHIZOPHRENIC NEGATIVISM"	232
CHAPTER VII: PSYCHOANALYSIS	238
CHAPTER VIII: ON PSYCHOANALYSIS.....	256
CHAPTER IX: ON SOME CRUCIAL POINTS IN PSYCHOANALYSIS	265

CHAPTER X: ON THE IMPORTANCE OF THE UNCONSCIOUS IN PSYCHOPATHOLOGY.....	304
CHAPTER XI: A CONTRIBUTION TO THE STUDY OF PSYCHOLOGICAL TYPES	312
CHAPTER XII: THE PSYCHOLOGY OF DREAMS.....	323
CHAPTER XIII: THE CONTENT OF THE PSYCHOSES	335
Introduction	335
Part I	337
Part II.....	358
FOREWORD TO CHAPTER XIV	373
CHAPTER XIV: THE PSYCHOLOGY OF THE UNCONSCIOUS PROCESSES	375
I.—The Beginnings of Psychoanalysis	375
II.—The Sexual Theory.....	387
III.—The other Viewpoint: the Will to Power.....	400
IV.—The Two Types of Psychology.....	409
V.—The Personal and the Impersonal Unconscious.....	425
VI.—The Synthetic or Constructive Method	433
VII.—Analytical (Causal-reductive) Interpretation.....	435
VIII.—The Synthetic (Constructive) Interpretation.....	437
IX.—The Dominants of the Super-Personal Unconscious.....	442
X.—The Development of the Types of Introversion and Extroversion in the Analytical Process.....	452
XI.—General Remarks on the Therapy.....	456
Conclusion.....	458
CHAPTER XV: THE CONCEPTION OF THE UNCONSCIOUS	459
I.—The Distinction between the Personal and the Impersonal Unconscious	459
II—The Consequences of the Assimilation of the Unconscious.....	463
III.—The Individual as an Excerpt of the Collective Psyche.....	469
IV.—The Endeavours to free the Individuality from the Collective Psyche.....	472
V.—Leading Principles for the Treatment of Collective Identity.....	476
Summary.....	485
Glossary of Jungian Terms.....	487

Table of Contents (Detailed)

CHAPTER I

On the Psychology and Pathology of so-called Occult Phenomena.

Difficulty of demarcation in borderline cases between epilepsy, hysteria, and mental deficiency—Somnambulism an hysterical manifestation—A case of spontaneous somnambulism, with some characters of protracted hysterical delirium—Other cases quoted—Charcot's classification of somnambulism—Naef's and Azam's cases of periodic amnesia—Proust's and Boileau's wandering-impulse cases—William James' case of Rev. Ansel Bourne—Other examples showing changes in consciousness—Hypnagogic hallucinations—Neurasthenic mental deficiency, Bleuler's case—Summing up of Miss Elsie K.'s case—Need of further scientific investigation in the field of psychological peculiarities.

Case of Somnambulism in a Person with Neuropathic Inheritance (Spiritualistic Medium)

History of case—Accidental discovery of her mediumistic powers—Her somnambulatory attacks, "*attitudes passionelles*," catalepsy, tachypnoea, trance speeches, etc.—Ecstasies—Her conviction of the reality of her visions—Her dreams, hypnagogic and hypnopompic visions—The elevation of her somnambulatory character—Mental thought transference—S. W.'s double life—Psychographic communications—Description of séances—The Prophets of Prevorst—Automatic writing—The two grandfathers—Appearance of other somnambulatory personalities.

Development of the Somnambulatory Personalities

The psychograph and spiritualistic wonders—The grandfather the medium's "guide" or "control"—Ulrich von Gerbenstein—The somnambulatory personalities have access to the medium's memory—Ivenes—S. W.'s amnesia for her ecstasies—Later séances—Her journeys on the other side—Oracular sayings—Conventi—Ivenes' dignity and superiority to her "guides"—Her previous incarnations—Her race-motherhood.

Mystic Science and Mystic System of Powers

Her growing wilful deception—The waking state—Her peculiarities—Instability—Hysterical tendencies—Misreading—Errors of dispersion of attention discussed.

Semi-Somnambulism

Automatisms

Table movements—Unconscious motor phenomena—Verbal suggestion and auto-suggestion—The experimenter's participation—The medium's unconscious response—Thought-reading—Table-tilting experiment, illustrated—Experiments with beginners—Myers' experiments in automatic writing—Janet's conversation with Lucie's subconsciousness—Example of the way the subconscious personality is constructed—Hallucinations appear with deepening hypnosis; some contributing factors—Comparison between dream symbols and appearance of somnambulant personalities—Extension of the unconscious sphere—The somnambulant's thinking is in plastic images, which are made objective in hallucinations—Why visual and not auditory hallucinations occur—Origin of hypnagogic hallucinations—Those of Jeanne d'Arc and others.

The Change in Character

Noticeable in S. W.'s case, also in Mary Reynolds'—Association with amnesic disturbances—Influence of puberty in our case—S. W.'s systematic anaesthesia—Ivenes not so much a case of double consciousness as one in which she dreams herself into a higher ideal state—Similar pathological dreaming found in the lives of saints—Mechanism of hysterical identification—S. W.'s dreams break out explosively—Their origin and meaning, and their subjective roots.

Relation to the Hysterical Attack

In considering the origin of attack, two moments, viz. irruption of hypnosis, and the psychic stimulation, must be taken into account—In susceptible subjects relatively small stimuli suffice to bring about somnambulism—Our case approaches to hysterical lethargy—The automatisms transform lethargy into hypnosis—Her ego-consciousness is identical in all states—Secondary somnambulant personalities split off from the primary unconscious personality—All group themselves under two types, the gay-hilarious, and serio-religious—The automatic speaking occurs—This facilitates the study of the subconscious personalities—Their share of the consciousness—The irruption of the hypnosis is complicated by an hysterical attack—The automatism arising in the motor area plays the part of hypnotist—When the hypnotism flows over into the visual sphere the hysterical attack occurs—Grandfathers I. and II.—Hysterical dissociations belong to the superficial layers of the ego-complex—There are layers beyond the reach of dissociation—Effect of the hysterical attack.

Collected Papers on Analytical Psychology

Relationship to the Unconscious Personality

The serio-religious and the gay-hilarious explained by the anamnesis—Two halves of S. W.'s character—She is conscious of the painful contrast—She seeks a middle way—Her aspirations bring her to the puberty dream of the ideal Ivenes—The repressed ideas begin an autonomous existence—This corroborates Freud's disclosures concerning dreams—The relation of the somnambulant ego-complex and the waking consciousness.

Course

The progress of this affection reached its maximum in 4-8 weeks—Thenceforth a decline in the plasticity of the phenomena—All degrees of somnambulism were observable—Her manifest character improved—Similar improvements seen in certain cases of double consciousness—Conception that this phenomenon has a teleological meaning for the future personality—As seen in Jeanne d'Arc and Mary Reynolds II.

The Unconscious Additional Creative Work

S. W. shows primary susceptibility of the unconscious—Binet affirms the susceptibility of the hysteric is fifty times greater than that of normal—Cryptomnesia, a second additional creation—Cryptomnesic picture may enter consciousness intra-physically—Unconscious plagiarism explained—Zarathustra example—Glossolalia—Helen Smith's Martian language—The names in Ivenes' mystic system show rudimentary glossolalia—The Cryptomnesic picture may enter consciousness as a hallucination—Or arrive at consciousness by motor automatism—By automatisms regions formerly sealed are made accessible—Hypermnnesia—Thought-reading a prototype for extraordinary intuitive knowledge of somnambulists and some normal persons—Association-concordance—Possibility that concept and feeling are not always clearly separated in the unconscious—S. W.'s mentality must be regarded as extraordinary.

CHAPTER II

The Association Method

Lecture I.—Formula for test—Disturbances of reaction as complex indicators—Discovery of a culprit by means of test—Disturbances of reaction show emotional rather

Carl Gustav Jung

than intellectual causes—Principal types—Value of the experiment in dealing with neurotics.

Lecture II.—Familiar Constellations

Dr. Fürst's researches—Effect of environment and education on reactions—Effect of parental discord on children—Unconscious tendency to repetition of parental mistakes—Case of pathological association-concordance between mother and daughter—Neurosis, a counter-argument against the personality with which the patient is most nearly concerned—How to free the individual from unconscious attachments to the milieu.

Lecture III.—Experiences concerning the Psychic Life of the Child

Importance of emotional processes in children—Little Anna's questions—Arrival of the baby brother—Anna's embarrassment and hostility—Introversion of the child—Of the adolescent—Her pathological interest in the Messina earthquake—The meaning of her fear—Anna's theories of birth—Meaning of her questions—Her father tells her something of origin of her little brother—Her fears now subside—The unconscious meaning of the child's wish to sit up late—Anna's equivalent to the "lumpf-theory" of little Hans—The stork-theory again—Author's remarks on the sexual enlightenment of the child.

CHAPTER III

The Significance of the Father in the Destiny of the Individual

Psychosexual relationship of child to father—Fürst's experiments quoted—The association experiment typical for man's psychological life—Adaptation to father—Father-complex productive of neurosis—Father-complex in man with masochistic and homosexual trends—Peasant woman "her father's favourite," tragic effect of the unconscious constellation—Case of eight-year-old boy with enuresis—Enuresis a sexual surrogate—Importance of infantile sexuality in life—Hence necessity for psychoanalytic investigation—The Jewish religion and the father-complex—Parental power guides the child like a higher controlling fate—The conflict for the development of the individual—Father-complex in Book of Tobias.

Collected Papers on Analytical Psychology

CHAPTER IV

A Contribution to the Psychology of Rumour

Investigation of a rumour in a girls' school—The rumour arose from a dream—Teacher's suspicions—Was the rumour an invention and not, as alleged, the recital of a dream?—Interpolations in dreams—Collection of evidence—Duplication of persons an expression of their significance both in dreams and in dementia præcox—The additions and interpolations represent intensive unconscious participation—Hearsay evidence—Remarks.

Epicrisis

The dream is analysed by rumour—Psychoanalysis explains the construction of rumour—The dream gives the watchword for the unconscious—It brings to expression the ready-prepared sexual complexes—Marie X.'s unsatisfactory conduct brought her under reproof—Her indignation and repressed feelings lead to the dream—She uses this as an instrument of revenge against the teacher—More investigation needed in the field of rumour.

CHAPTER V

On the Significance of Number-Dreams

Symbolism of numbers has acquired fresh interest from Freud's investigations—Example of number dream of middle-aged man—How the number originates—A second dream also contains a number—Analysis—The wife's dream "Luke 137"—This dream is an example of cryptomnesia.

CHAPTER VI

A Criticism of Bleuler's "Theory of Schizophrenic Negativism"

Bleuler's concept of ambivalency and ambitendency—Every tendency balanced by its opposite—Schizophrenic negativism—Bleuler's summary of its causes—The painfulness of the complex necessitates a censorship of its expression—Thought disturbance the result of a complex—Thought pressure due to schizophrenic introversion—Resistance springs from peculiar sexual development—Schizophrenia shows a preponderance of introversion mechanisms—The value of the complex theory concept.

CHAPTER VII

Psychoanalysis

Doctors know too little of psychology, and psychologists of medicine—Strong prejudice aroused by Freud's conception of the importance of the sexual moment—The commoner prejudices discussed—Psychoanalysis not a method of suggestion or reasoning—The unconscious content is reached *via* the conscious—Case of neurotic man with ergophobia for professional work—Case of neurotic woman who wants another child—Resistances against the analyst—Dream analysis the efficacious instrument of analysis—The scientist's fear of superstition—The genesis of dreams—Dream material is collected according to scientific method—The rite of baptism analysed—When the unconscious material fails, use the conscious—The physician's own complexes a hindrance—Interpretations of Viennese School too one-sided—Sexual phantasies both realistic and symbolic—The dream the subliminal picture of the individual's present psychology—Symbolism a process of comprehension by analogy—Analysis helps the neurotic to exchange his unconscious conflict for the real conflict of life.

CHAPTER VIII

On Psychoanalysis

Difficulties of public discussion—Competence to form an opinion presupposes a knowledge of the fundamental literature—The abandoned trauma theory—Fixation—The importance of the infantile past—Analysis discloses existence of innumerable unconscious phantasies—Œdipus complex—Fixation discussed—The critical moment for the outbreak of the neurosis—Predisposition—Author's energetic view point—Application of the libido to the obstacle—Repression—Neurosis an act of adaptation that has failed—The energetic view does not alter the technique of analysis—Analysis re-establishes the connection between the conscious and unconscious—Is a constructive task of great importance.

CHAPTER IX

On Some Crucial Points in Psychoanalysis

Letter I.—Loÿ

The dream a means of re-establishing the moral equipoise—The dreamer finds therein the material for reconstruction—Methods discussed—The part played by "faith in the doctor"—Abreaction.

Letter II.—Jung

For the patient any method that works is good, though some more valuable than others—The doctor must choose what commends itself to his scientific conscience—Why the author gave up the use of hypnotism—Three cases quoted—Breuer and Freud's method a great advance in psychic treatment—Evolution of author's views—Importance of conception that behind the neurosis lies a moral conflict—Divergence from Freud's sexual theory of neurosis—The doctor's responsibility for the cleanliness of his own hands—Necessity that the psychoanalyst should be analysed—He is successful in so far as he has succeeded in his own moral development.

Letter III.—Loÿ

Opportunism *v.* scientific honour—Psychoanalysis no more than hypnotism gets rid of "transference"—Cases of enuresis nocturna, and of washing-mania treated by hypnosis—On what grounds should such useful treatment be dispensed with?—The difficulty of finding a rational solution for the moral conflict—The doctor's dilemma of the two consciences.

Letter IV.—Jung

Author's standpoint that of the scientist, not practical physician—The analyst works in spite of the transference—Psychoanalysis not the only way—Sometimes less efficacious than any known method—Cases must be selected—For the author and his patients it is the best way—The real solution of the moral conflict comes from within, and then only because the patient has been brought to a new standpoint.

Letter. V.—Loÿ

"What is truth?"—Parable of the prism—All man attains is relative truth—Fanaticism is the enemy to science—Psychoanalysis a method of dealing with basic motives of the human soul—Must not each case be treated individually?—Morals are above all relative.

Letter VI.—Jung

Definition of psychoanalysis—Technique—So-called chance is the law—Rules well-nigh impossible—The patients' unconscious is the analysts' best confederate—Questions of morality and education find solutions for themselves in later stages of analysis.

Letter VII.—Loÿ

Contradictions in psychoanalytic literature—Should the doctor canalise the patient's libido?—Does he not indirectly suggest dreams to patient?

Letter VIII.—Jung

Different view-points in psychoanalysis—*Vide* Freud's causality and Adler's finality—Discussion of meaning of transference—The meaning of "line of least resistance"—Man as a herd-animal—Rich endowment with social sense—Should take pleasure in life—Error as necessary to progress as truth—Patient must be trained in independence—Analyst is caught in his own net if he makes hard-and-fast rules—Through the analyst's suggestion only the outer form, never the content, is determined—The patient may mislead the doctor, but this is disadvantageous and delays him.

Letter IX.—Loÿ

The line of least resistance is a compromise with all necessities—The analyst as accoucheur—The neurotic's faith in authority—Altruism innate in man—He advances in response to his own law.

Letter X.—Jung

Transference is the central problem of analysis—It may be positive or negative—Projection of infantile phantasies on the doctor—Biological "duties"—The psyche does not only react, but gives its individual reply—We have an actual sexual problem to-day—Evidences thereof—We have no real sexual morality, only a legal attitude—Our moral views are too undifferentiated—The neurotic is ill not because he has lost his faith in morality, but because he has not found the new authority in himself.

Collected Papers on Analytical Psychology

CHAPTER X

On the Importance of the Unconscious in Psychopathology

Content of the unconscious—Defined as sum of all psychical processes below the threshold of consciousness—Answer to question how does the unconscious behave in neurosis found in its effect on normal consciousness—Example of a merchant—Compensating function of the unconscious—Symptomatic acts—Nebuchadnezzar's dream discussed—Intuitive ideas, and insane manifestations both emanate from the unconscious—Eccentricities pre-exist a breakdown—In mental disorder unconscious processes break-through into consciousness and disturb equilibrium—True also in fanaticism—Pathological compensation in case of paranoia—Unconscious processes have to struggle against resistances in the conscious mind—Distortion—In morbid conditions the function of the unconscious is one of compensation.

CHAPTER XI

A Contribution to the Study of Psychological Types

Striking contrast between hysteria and dementia præcox—Extroversion and Introversion—Repression—Hysterical transference and repression the mechanism of extroversion—Depreciation of the external world the mechanism of introversion—The nervous temperament pre-exists the illness—Examples of the two types from literature—James's Tough and Tender-minded—Warringer's Sympathy and Abstraction—Schiller's Naïf and Sentimental—Nietzsche's Apollien and Dionysian—Gross's Weakness and Reinforcement of Consecutive Function—Freud and Adler's Causalism and Finality—The fundamental need for further study of the two types.

CHAPTER XII

The Psychology of Dreams

Psychic structure of dream contrasted with that of conscious thought—Why a dream seems meaningless—Freud's empirical evidence—Technique, analysis of a dream—The causal and teleological view of the dream—A typical dream with mythological content—Compensating function of dreams—Phallic symbols.

CHAPTER XIII

The Content of the Psychoses

Discussion of psychological *v.* physical origin of mental disease—Mediæval conception of madness as work of evil spirits—Development of materialistic idea that diseases of the mind are diseases of the brain—Psychiatrists have come to regard function as accessory to the organ—Analysis of patients entering Burgholzi Asylum—A quarter only show lesions of the brain—The psychiatry of the future must advance by way of psychology—Cases of dementia præcox illustrating recent methods in psychiatry—The development of the outbreak at a moment of great emotion—Delusions determined by deficiencies in the patient's personality—Difficulties of investigation—Temporary remission of mental symptoms proves that reason survives in spite of preoccupation with diseased thoughts—Case of dementia præcox, showing exceeding richness of phantasy formations, and the continuity of ideas.

Part II.

Freud's case of paranoid dementia—(Schreber case)—Two ways of regarding Goethe's "Faust"—Retrospective and prospective understanding—The scientific mind thinks causally—This is but one half of comprehension—Pathological and mythological formations, both structures of the imagination—Flournoy's case—Misunderstanding of author's analysis of it—Adaptations only possible to the introverted type by means of a world-philosophy—The extroverted type always arrives at a general theory subsequently—Psychasthenia is the neurosis of introversion, hysteria of extroversion—These diseases typify the general attitude of the types to the phenomena of the external world—The extreme difference in type a great obstacle to common understanding—The general result of the constructive method is a subjective view, not a scientific theory.

CHAPTER XIV

Foreword to New Edition

Adler's views more fully discussed—The psychological events of the war force the problems of the unconscious on society—The psychology of individuals corresponds to the psychology of nations.

Collected Papers on Analytical Psychology

The Psychology of the Unconscious Processes

I. The Beginning of Psychoanalysis

The evolution of psychology—How little it has had to offer to the psychiatrist till Freud's discoveries—The origin and reception of psychoanalysis—The prejudiced attitude of certain physicians—Freud's view that his best work arouses greatest resistances—The Nancy School—Breuer's first case—"The talking cure"—The English "shock theory"—Followed by the trauma theory—Discussion of predisposition—Author's case of hysteria following fright from horses—The pathogenic importance of the hidden erotic conflict.

II. The Sexual Theory

Humanity evolves its own restrictions on sexuality for the sake of the advance of civilisation—The presence of a grave sexual problem testifies to the need of more differentiated conceptions—The erotic conflict largely unconscious—Neurosis represents the unsuccessful attempt of the individual to solve the problem in his own case—To understand the idea of the dream as a wish-fulfilment the manifest and latent content must be taken in review—The nature of unconscious wishes—Dream analysis leads to the deepest recesses of the unconscious—The analyst compared to the accoucheur—The highest development of the individual is sometimes in complete conflict with the herd-morality—Psychoanalysis provides the patient with a philosophy of life founded upon insight—Man has within himself the essence of morals—Both the moral and immoral man must accept the corrective of the unconscious—Our sexual morality too undifferentiated—Freud's sexual theory right to a point but too one-sided.

III. The Other Viewpoint: the Will to Power

The superman—Nietzsche's failure to justify his theories by his life—His view also too one-sided—Adler's theory of neurosis founded upon the principle of power—Case of hysteria discussed from the standpoint of unconscious motivation.

IV. The Two Types of Psychology

Thinking the natural adaptive function for introvert, feeling for the extrovert—The sexual theory promulgated from the standpoint of feeling, the power theory from that of thought—Criticism of both theories indispensable—Symptoms of neurosis are aims at a new synthesis of life—Definition of positive value as energy in a useful form—In neurosis energy is located in an infe-

Carl Gustav Jung

rior form—Sublimation a transference of sexual energy to another sphere—Destiny often frustrates purely rational sublimations—Rationalism, the world-war an example of its breakdown—So-called "disposable energy"—Case of American business-man—The types have different problems—The feelings of the introvert relatively conventional and undifferentiated—The thinking of the extrovert colourless and dry—The types apt to marry, but not to understand one another—The theories of the types led to a new theory of psychogenic disturbances—Neurosis postulates the existence of an unconscious conflict—New theory declares it to lie between the natural conscious function and the repressed undifferentiated co-function—Repressed feelings of introvert projected as vague physical symptoms—Repressed thought of extrovert projected as hysterical symptoms—In analysis the libido liberated from the unconscious phantasies is projected on to the physician—It finds its way into the transference, which in turn is dissolved—The new channel for the libido is already found.

V. The Personal and the Impersonal Unconscious

Transference a projection of unconscious contents on to the physician—Contents of the unconscious at first personal, later impersonal—Primordial images—A differentiation of the unconscious contents necessary—The deepest layers are now designated impersonal, absolute, collective, or super-personal—The libido now liberated in analysis sinks down into the unconscious, reviving original "thought-feelings"—Example in Mayer's idea of conservation of energy—The world-wide existence of the primordial images—The concept of God—Enantiodromia, the world-war an example of this—In analysis the pairs of opposites are torn asunder—This necessitates that patients learn to differentiate between the ego and non-ego.

VI. The Synthetic or Constructive Method

The transcendental function, a new way of regarding the psychological materials as a bridge between the two sides of the psyche—Example of method of synthesis of symbols of absolute unconscious—Dream of the crab.

VII. Analytical (Causal-reductive) Interpretation

The unconscious homosexual tendencies—The causal-reductive method does not strictly follow the patient's own associations—It does not interpret the dream as subjective phenomenon—Interpretation on both objective and subjective planes necessary.

VIII. The Synthetic (Constructive) Interpretation

Homosexuality in this case an unconscious defence against acceptance of "more dangerous" tendencies—Fascination an unconscious compulsion—"Identifications" have power so long as they remain unconscious—Union of subjective and objective view of dream gives its full meaning.

IX. The Dominants of the Super-personal Unconscious

Projection in relation to transference—Projection of certain attributes not explicable on the ground of personal contents, but must be referred to the super-personal—Collective unconscious is sediment of all the experience of the universe throughout time—Certain features that have become prominent, *e.g.* gods and demons, are called "dominants" and have a character of universal psychological truth—These dominants become conscious as projections, explaining infatuations, incompatibilities, unconscious conflicts, etc.—The "magical demon" is the most primitive concept of God—Analysis traces home these projections to the non-ego—Fear belongs to the dominants of the collective unconscious—The next step is the detachment of these projections from the objects of consciousness—This liberates energy for further progress—The transcendental function—The hero-myth symbolises this differentiation of ego from non-ego.

X. The Development of the Types of Introversion and Extroversion

The types apprehend life by opposite methods—All psychic images have two sides, one directed towards the object, the other towards the soul (idea)—The feelings of the introvert are under repression, the thoughts of the extrovert—Analytical development of the unconscious brings out the secondary function in each type—The pairs of opposites being thus demonstrated need for synthesis arises—This is a compensatory process leading to enrichment of the individual.

XI. General Remarks on the Therapy

The unconscious is a source of danger when the individual is not at one with it—It also creates harmonious prospective combinations which can be an effective source of wisdom for the individual—The use of the phantasies in conjunction with conscious elaboration is the transcendental function—Not every individual passes through all the stages described—For some the end of analysis is reached when the cure is achieved—Others are under a moral necessity to reach a full psychological development.

Conclusion

CHAPTER XV

The Concept of the Unconscious

I. The Distinction between the Personal and Impersonal Unconscious.

Development of concepts—Removal of repression does not empty the unconscious—Repression is a special phenomenon—The unconscious contains not only repressed material, but subliminal sense-impressions which have never reached consciousness—It is constantly busied with new phantasy formation—Patients are urged to retain their hold on repressed materials that analysis has brought into consciousness—Prolonged analysis reveals contents other than those of a personal nature—Necessity to differentiate a layer called the "personal" unconscious whose materials originate in the personal past—Their omission from consciousness constitutes a defect or neglect—The moral reaction against this neglect shows they could become conscious if sufficient trouble were taken—The gradual transference of the personal unconscious contents into consciousness extends the periphery of consciousness.

II. The Consequences of Assimilation of the Unconscious

First result is increased self-consciousness—May lead to a sense of God-Almightiness in one type, or to overwhelming self-depreciation in the other—A result of ascribing to oneself qualities or vices that do not belong individually but collectively—The collective psyche divided into collective mind and collective soul—The collective contains the "parties inférieures" of Janet; the conscious and personal unconscious contains the "parties supérieures"—Incorporation of the impersonal unconscious leads to a dissolution of the pairs of opposites—As seen in neurotic, who combines megalomania and sense of inferiority in extreme degree—Primitive man possesses the collective vices and virtues in an undifferentiated way—Mental conflict only begins with conscious personal development—Desire to be good brings about repression of the bad—Collective view-point, though necessary, is dangerous to individuality—Collective psyche is the result of psychological differentiation of the gregarious instincts—Dangers of identification with collective psyche—Recognition of the different psychology of the types a safeguard, promoting a proper respect for individuality of the opposite type—Individuation hampered by man's suggestibility and tendency to imitation.

III. The Individual as an Excerpt of the Collective Psyche

The personal unconscious contains repressed materials capable of becoming conscious—By also incorporating the impersonal contents the state of God-Almightiness is brought about—The "persona" a mask for the collective psyche—Development of God-Almightiness, physical concomitants—Dissolution of the persona results in release of phantasy—Analogy with mental derangement—Difference consists in that the unconscious is at first deliberately brought into consciousness by consent, and later that it is recognised as having psychic validity only.

IV. Endeavours to free the Individuality from the Collective Psyche

(i) *The Regressive Restoration of the Persona*—Three ways open, (a) Regressive application of a reductive theory; (b) application of God-Almightiness as a "virile protest;" (c) recognition of the primitive archaic collective psychology in man—Temptation to solve the difficulty by forgetting one has an unconscious—This does not work—The unconscious cannot be deprived of libido, nor its activity stilled for any length of time.

(ii) *Identification with the Collective Psyche*—God-Almightiness developed into a system—Identification increases feeling for life or sense of power, according to the type—This, mystically understood, is the "yearning for the mother" of the hero-myth, or the "incest-wish" of Freud—It is the collective psyche that has to be overcome—Identification with the collective psyche is a failure because being lost in it, a bearable or satisfactory life is impossible.

V. Leading Principles for the Treatment of Collective Psyche

Neither regressive restoration of the persona, nor identification with collective psyche solves the problem—Psychology will have to admit a plurality of principles—Only the collective part of individual psychology can be the subject of scientific study—What belongs to the psychology of the individual requires its own text-book—The persona must be strictly separated from the concept of the individual—What is individual is the remnant which can never be merged into the collective—Analysis of the persona transfers greater value on to the individuality, increasing its conflict with collectivity—The persona is identical with a one-sided attitude, being a typical attitude in which thought or feeling or intuition dominates, causing relative repression of the other functions—Dissolution of persona indispensable to individuation—The more individual a person is the more he assimilates and develops those attributes that are the basis of a collective concept of human nature—Unifying function be-

Carl Gustav Jung

tween the conscious and unconscious, between the collective and individual is found in the phantasies—Phantasy the creative soil for everything that has brought development to humanity—Phantasy not to be taken literally but hermeneutically—Hermeneutics adds analogies to those already given—Hermeneutical interpretation indicates the means of synthesis of the individual, provided as soon as the symbolic outlines of the path are understood they are followed up—Co-operation and honest endeavour essential to cure—The moral factor determines the cure—"Life-lines" have a short and ephemeral value—Dreams are compensatory to conscious thinking—Watch must be kept for dreams indicative of causes of error—Hence the patient must remain in contact with the unconscious—End of analysis reached when enough psychological insight and mastery of technique is acquired to enable individual to follow his ever-changing life-line, and to retain hold on the libido currents which give conscious support to his individuality.

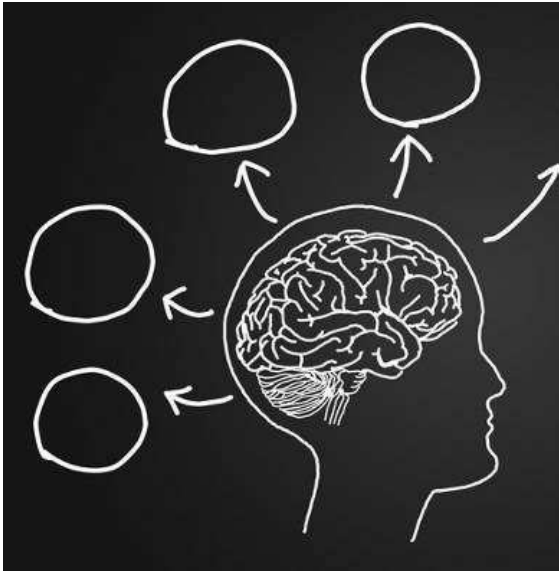
Summary

Glossary of Jungian Terms

EDITOR'S PREFACE TO SECOND EDITION

It is an acknowledged fact that we perceive errors in the work of others more readily than in our own.

—Leonardo da Vinci



The following papers have been gathered together from various sources, and are now available for the first time to English readers. The subject of psychoanalysis is much in evidence, and is likely to occupy still more attention in the near future, as the psychological content of the psychoses and neuroses is more generally appreciated and understood. It is of importance, therefore, that the fundamental writings of both the Viennese and Zürich Schools should be accessible for study. Several of Freud's works have already been translated into English. Dr. Jung's "Wandlungen und Symbole der Libido" was published in America in 1916 under the title of "The Psychology of the Unconscious." That work, read in conjunction with these papers, offers a fairly com-

plete picture of the scientific and philosophic standpoint of the leader of the Zürich School. It is the task of the future to judge and expand the findings of both schools, and to work at the development of the new psychology, which is still in its infancy.

It will be a relief to many students of the unconscious to see it in another aspect than that of "a wild beast couched, waiting its hour to spring." Some readers have gathered that view of it from the writings of the Viennese School, a view which is at most that dangerous thing "a half-truth."

In the papers appearing for the first time in this edition (Chapters XIV. and XV.), Dr. Jung develops his ideas of introversion and extroversion, a contribution of the first importance to psychology. He agrees with Freud in regarding the neuroses to be the result of repression, but differs in his view as to the origin of repression. He finds this to lie not in sexuality *per se*, but rather in man's natural tendency to adapt to the demands of life one-sidedly, according to his type of mentality. The born extrovert adapts by means of feeling, thought being under repression and relatively infantile. The introvert's natural adaptation is by means of thought; feeling being more or less repressed remains undeveloped. In either type the neglected co-function is behind the adapted function. This inequality operating in the unconscious, brings about a conflict, which in certain subjects amounts to a neurosis, and in others produces a limitation of individual development. This view shifts the interpretation of repression on to a much more comprehensive basis than that of sexuality, although there can scarcely be a repression that does not include this instinct on account of its deep and far-reaching importance in man.

There is no doubt that some even scientific persons have a certain fear of whither the study of the unconscious may lead. These fearful persons should be reminded that they possess an unconscious in spite of themselves, and that they share it in common with every human being. It is an extension of the individual. To study it is to deepen the self. All new discoveries have at one stage been called dangerous, and all new philosophies have been deemed heresies. It is as though we would

Collected Papers on Analytical Psychology

once more consign radium to its dust-heaps, lest some day the new radiancy should over-power mankind. Indeed this particular thing has proved at once most dangerous and most precious. Man must learn to use his treasure, and in using it to *submit to its own laws*, which can only become known when it is handled and investigated.

Those who read this book with the attention it requires, will find they gain an impression of many new truths. The second edition is issued towards the end of the third year of the Great European war, at a time when much we have valued and held sacred is in the melting-pot. But we believe that out of the crucible new forms will arise. The study of psychoanalysis produces something of the effect of a war in the psyche; indeed, we need to make conscious this war in the inner things of the mind and soul if we would be delivered in the future from war in the external world. There is a parallelism between individual and international neurosis. In the pain of the upheaval, one recognises the birth-pangs of newer, and let us hope, truer thought, and more natural adaptations. We need a renewal of our philosophy of life to replace much that has perished in the general cataclysm, and it is because I see in the analytical psychology, which grows out of a scientific study of the unconscious, the germs of such a new construction, that I have gathered the following essays together. The translation is the work of various hands, the names of the different translators being given in a footnote at the beginning of each essay; for the editing I am responsible. The essays are, as far as possible, printed in chronological order, and those readers who are sufficiently interested will be able to discern in them the gradual development of Dr. Jung's present position in psychoanalysis.

CONSTANCE E. LONG.

2, Harley Place, W. *June, 1917.*

Collected Papers on Analytical Psychology

until it has either been confirmed, modified, or else abandoned. If it has been confirmed, I publish it as a general view-point, without giving the empirical material. I only introduce the material amassed in the course of my practice in the form of example or illustration. I therefore beg the reader not to consider the views I present as mere fabrications of my brain. They are, as a matter of fact, the results of extensive experience and ripe reflection.

These additions will enable the reader of the second edition to become familiar with the recent views of the Zürich School.

As regards the criticism encountered by the first edition of this work, I was pleased to find my writings were received with much more open-mindedness among English critics than was the case in Germany, where they are met with the silence born of contempt. I am particularly grateful to Dr. Agnes Savill for an exceptionally understanding criticism in the *Medical Press*. My thanks are also due to Dr. T. W. Mitchell for an exhaustive review in the *Proceedings of the Society for Psychical Research*. This critic takes exception to my heresy respecting causality. He considers that I am entering upon a perilous, because unscientific, course, when I question the sole validity of the causal view-point in psychology. I sympathise with him, but in my opinion the nature of the human mind compels us to take the final point of view. For it cannot be disputed that, psychologically speaking, we are living and working, day by day, according to the principle of directed aim or purpose, as well as that of causality. A psychological theory must necessarily adapt itself to this fact. What is plainly directed towards a goal cannot be given an exclusively causalistic explanation, otherwise we should be led to the conclusion expressed in Moleschott's famous enunciation: "Man is, what he eats." We must always bear the fact in mind that *causality is a point of view*. It affirms the inevitable and immutable relation of a series of events: a-b-d-z. Since this relation is fixed, and according to the view-point must necessarily be so, looked at logically the order may also be reversed. *Finality is also a view-point*, that is justified empirically solely by the existence of series of events, wherein the causal connection is indeed evident, *but the meaning of which only becomes intelligible as*

producing final effect. Ordinary daily life furnishes the best instances of this. The causal explanation must be mechanistic, if we are not to postulate a metaphysical entity as first cause. For instance, if we adopt Freud's sexual theory and assign primary importance psychologically to the function of the genital glands, the brain is viewed as an appendage of the genital glands. If we approach the Viennese idea of sexuality with all its vague omnipotence, and trace it in a strictly scientific manner down to its psychological basis, we shall arrive at the first cause, according to which psychic life is for the most, or the most important part, tension and relaxation of the genital glands. If we assume for the moment that this mechanistic explanation be "true," it would be the sort of truth which is exceptionally tiresome and rigidly limited in scope. A similar statement would be that the genital glands cannot function without adequate *nourishment*, with its inference that sexuality is an appendage-function of nutrition! The truth contained in this is really an important chapter in the biology of lower forms of life.

But if we wish to work in a really psychological way, we shall want to know the *meaning* of psychological phenomena. After learning the kinds of steel the various parts of a locomotive are made of, and from what ironworks and mines they come, we do not really know anything about the locomotive's *function*, that is to say, its *meaning*. But "function" as conceived by modern science is by no means solely a causal concept; it is especially a final or "teleological" one. For it is utterly impossible to consider the soul from the causal view-point only; we are obliged to consider it also from the final point of view. As Dr. Mitchell also points out, it is impossible for us to think of the causal determination conjointly with a final connection. That would be an obvious contradiction. But our theory of cognition does not need to remain on a pre-Kantian level. It is well known that Kant showed very clearly that the mechanistic and the teleological view-points are not *constituent* (objective) principles, in some degree qualities of the object, but that they are purely *regulative* (subjective) principles of thought, and as such they are not mutually inconsistent. I can, for example, easily conceive the following thesis and antithesis:—

Collected Papers on Analytical Psychology

Thesis: Everything came into existence according to mechanistic laws.

Antithesis: Some things did not come into existence according to mechanistic laws only.

Kant says to this: Reason cannot prove either of these principles, because *a priori* purely empirical laws of nature cannot give us a determinative principle regarding the potentiality of things.

As a matter of fact, modern physics has necessarily been converted from the idea of pure mechanism to the final concept of the conservation of energy, because the mechanistic explanation only recognises reversible processes, whereas the actual truth is that the process of nature is irreversible. This fact led to the concept of an energy that tends towards relief of tension, and therewith also towards a definite final state.

Obviously, I consider both these points of view necessary, the causal as well as the final, but would at the same time lay stress upon the fact that since Kant's time we have come to know that the two view-points are not antagonistic if they are regarded as regulative principles of thought, and not as constituent principles of the process of nature itself.

When speaking of the reviews, I must also mention those that seem to me beside the mark. I was once more struck by the fact that certain critics cannot distinguish between the theoretical explanation given by the author, and the phantastic ideas provided by the patient. One of my critics makes this confusion when discussing "Number Dreams." The associations to the quotation from the Bible in Chapter V. are, as every attentive reader must readily perceive, not arbitrary explanations of my own, but a cryptomnesic conglomeration emanating, not from my brain at all, but from that of the patient. Surely it is not difficult to perceive upon reflection that this conglomeration of numbers corresponds exactly to that unconscious psychological function from which proceeded all the mysticism of numbers, Pythagoric, Kabbalistic, and so forth, existent from untold ages.

Carl Gustav Jung

I am grateful to my serious reviewers, and should like here to also express my thanks to Mrs. Harold F. McCormick for her generous help in the production of this book.

C. G. JUNG.

June, 1917.

AUTHOR'S PREFACE TO FIRST EDITION

This volume contains a selection of articles and pamphlets on analytical psychology written at intervals during the past fourteen years. These years have seen the development of a new discipline, and as is usual in such a case, have involved many changes of view-point, of concept, and of formulation.

It is not my intention to give a presentation of the fundamental concepts of analytical psychology in this book; it throws some light, however, on a certain line of development which is especially characteristic of the Zürich School of psychoanalysis.

As is well known, the merit of the discovery of the new analytical method of general psychology belongs to Professor Freud of Vienna. His original view-points had to undergo many essential modifications, some of them owing to the work done at Zürich, in spite of the fact that he himself is far from agreeing with the standpoint of this school.

I am unable to explain fully the fundamental differences between the two schools, but would indicate the following points: The Vienna School takes the standpoint of an exclusive sexualistic conception, while that of the Zürich School is symbolistic. The Vienna School interprets the psychological symbol semiotically, as a sign or token of certain primitive psychosexual processes. Its method is analytical and causal.

The Zürich School recognises the scientific feasibility of such a conception, but denies its exclusive validity, for it does not interpret the psychological symbol semiotically only, but also symbolistically, that is, it attributes a positive value to the symbol.

The value does not depend merely on historical causes; its chief importance lies in the fact that it has a meaning for the actual present, and

for the future, in their psychological aspects. For to the Zürich School the symbol is not merely a sign of something repressed and concealed, but is at the same time an attempt to comprehend and to point out the way of the further psychological development of the individual. Thus we add a prospective import to the retrospective value of the symbol.

The method of the Zürich School is therefore not only analytical and causal, but also synthetic and prospective, in recognition that the human mind is characterised by "causæ" and also by "fines" (aims). The latter fact needs particular emphasis, because there are two types of psychology, the one following the principle of hedonism, and the other following the principle of power. Scientific materialism is pertinent to the former type, and the philosophy of Nietzsche to the latter. The principle of the Freudian theory is hedonism, while that of Adler (one of Freud's earliest personal pupils) is founded upon the principle of power.

The Zürich School, recognising the existence of these two types (also remarked by the late Professor William James), considers that the views of Freud and Adler are one-sided, and only valid within the limits of their corresponding type. Both principles exist within every individual, but not in equal proportions.

Thus, it is obvious that each psychological symbol has two aspects, and should be interpreted according to the two principles. Freud and Adler interpret in the analytical and causal way, reducing to the infantile and primitive. Thus with Freud the conception of the "aim" is the fulfilment of desire, with Adler it is the usurpation of power. Both authors take the standpoint in their practical analytical work which brings to view only infantile and gross egoistic aims.

The Zürich School is convinced of the fact that within the limits of a diseased mental attitude the psychology is such as Freud and Adler describe. It is, indeed, just on account of such impossible and childish psychology that the individual is in a state of inward dissociation and hence neurotic. The Zürich School, therefore, in agreement with them so far, also reduces the psychological symbol (the phantasy products of the patient) to the fundamental infantile hedonism, or to the infantile

desire for power. But Freud and Adler content themselves with the result of mere reduction, according to their scientific biologism and naturalism.

But here a very important question arises. Can man obey the fundamental and primitive impulses of his nature without gravely injuring himself or his fellow beings? He cannot assert either his sexual desire or his desire for power unlimitedly, and the limits are moreover very restricted. The Zürich School has in view also the final result of analysis, and regards the fundamental thoughts and impulses of the unconscious, as symbols, indicative of a definite line of future development. We must admit there is, however, *no scientific justification* for such a procedure, because our present-day science is based as a whole upon causality. But causality is only one principle, and psychology essentially cannot be exhausted by causal methods only, because the mind lives by aims as well. Besides this disputable philosophical argument, we have another of much greater value in favour of our hypothesis, namely, that of *vital necessity*. It is impossible to live according to the intimations of infantile hedonism, or according to a childish desire for power. If these are to be retained they must be taken symbolically. Out of the symbolic application of infantile trends, an attitude evolves which may be termed philosophic or religious, and these terms characterise sufficiently the lines of further development of the individual. The individual is not only an established and unchangeable complex of psychological facts, but also an extremely changeable entity. By exclusive reduction to causes, the primitive trends of a personality are reinforced; this is only helpful when at the same time these primitive tendencies are balanced by recognition of their symbolic value. Analysis and reduction lead to causal truth; this by itself does not help living, but brings about resignation and hopelessness. On the other hand, the recognition of the intrinsic value of a symbol leads to constructive truth and helps us to live. It induces hopefulness and furthers the possibility of future development.

The functional importance of the symbol is clearly shown in the history of civilisation. For thousands of years the religious symbol proved a most efficacious means in the moral education of mankind. Only a

Carl Gustav Jung

prejudiced mind could deny such an obvious fact. Concrete values cannot take the place of the symbol; only new and more efficient symbols can be substituted for those that are antiquated and outworn, such as have lost their efficacy through the progress of intellectual analysis and understanding. The further development of mankind can only be brought about by means of symbols which represent something far in advance of himself, and whose intellectual meanings cannot yet be grasped entirely. The individual unconscious produces such symbols, and they are of the greatest possible value in the moral development of the personality.

Man almost invariably has philosophic and religious views of the meaning of the world and of his own life. There are some who are proud to have none. These are exceptions outside the common path of mankind; they miss an important function which has proved itself to be indispensable to the human mind.

In such cases we find in the unconscious, instead of modern symbolism, an antiquated archaic view of the world and of life. If a requisite psychological function is not represented in the sphere of consciousness, it exists in the unconscious in the form of an archaic or embryonic prototype.

This brief *résumé* may show what the reader cannot find in this collection of papers. The essays are stations on the way of the more general views developed above.

C. G. JUNG.

Zürich,
. January, 1916.

ANALYTICAL PSYCHOLOGY

CHAPTER I: ON THE PSYCHOLOGY AND PATHOLOGY OF SO-CALLED OCCULT PHENOMENA

In that wide field of psychopathic deficiency where Science has demarcated the diseases of epilepsy, hysteria and neurasthenia, we meet scattered observations concerning certain rare states of consciousness as to whose meaning authors are not yet agreed. These observations spring up sporadically in the literature on narcolepsy, lethargy, *automatisme ambulatoire*, periodic amnesia, double consciousness, somnambulism, pathological dreamy states, pathological lying, etc.

These states are sometimes attributed to epilepsy, sometimes to hysteria, sometimes to exhaustion of the nervous system, or neurasthenia, sometimes they are allowed all the dignity of a disease *sui generis*. Patients occasionally work through a whole graduated scale of diagnoses, from epilepsy, through hysteria, up to simulation. In practice, on the one hand, these conditions can only be separated with great difficulty from the so-called neuroses, sometimes even are indistinguishable from them; on the other, certain features in the region of pathological deficiency present more than a mere analogical relationship not only with phenomena of normal psychology, but also with the psychology of the supernormal, of genius. Various as are the individual phenomena in this region, there is certainly no case that cannot be connected by some intermediate example with the other typical cases. This relationship in the pictures presented by hysteria and epilepsy is very close. Recently the view has even been maintained that there is no clean-cut frontier

between epilepsy and hysteria, and that a difference is only to be noted in extreme cases. Steffens says, for example—"We are forced to the conclusion that in essence hysteria and epilepsy are not fundamentally different, that the cause of the disease is the same, but is manifest in a diverse form, in different intensity and permanence."

The demarcation of hysteria and certain borderline cases of epilepsy from congenital and acquired psychopathic mental deficiency likewise presents the greatest difficulties. The symptoms of one or other disease everywhere invade the neighbouring realm, so violence is done to the facts when they are split off and considered as belonging to one or other realm. The demarcation of psychopathic mental deficiency from the normal is an absolutely impossible task, the difference is everywhere only "more or less." The classification in the region of mental deficiency itself is confronted by the same difficulty. At best, certain classes can be separated off which crystallise round some well-marked nucleus through having peculiarly typical features. Turning away from the two large groups of intellectual and emotional deficiency, there remain those deficiencies coloured pre-eminently by hysteria or epilepsy (epileptoid) or neurasthenia, which are not notably deficiency of the intellect or of feeling. It is essentially in this region, unsusceptible of any absolute classification, that the above-named conditions play their part. As is well known, they can appear as part manifestations of a typical epilepsy or hysteria, or can exist separately in the realm of psychopathic mental deficiency, where their qualifications of epileptic or hysterical are often due to the non-essential accessory features. It is thus the rule to place somnambulism among hysterical diseases, because it is occasionally a phenomenon of severe hysteria, or because mild so-called hysterical symptoms may accompany it. Binet says: "Il n'y a pas une somnambulisme, état nerveux toujours identique à lui-même, il y a des somnambulismes." As one of the manifestations of a severe hysteria, somnambulism is not an unknown phenomenon, but as a pathological entity, as a disease *sui generis*, it must be somewhat rare, to judge by its infrequency in German literature on the subject. So-called spontaneous somnambulism, resting upon a foundation of hysterically-tinged psychopathic deficiency, is not a very common occurrence and it is

Collected Papers on Analytical Psychology

worth while to devote closer study to these cases, for they occasionally present a mass of interesting particulars.

Case of Miss Elise K., aged 40, single; book-keeper in a large business; no hereditary taint, except that it is alleged a brother became slightly nervous after family misfortune and illness. Well educated, of a cheerful, joyous nature, not of a saving disposition, always occupied with some big idea. She was very kind-hearted and gentle, did a great deal both for her parents, who were living in very modest circumstances, and for strangers. Nevertheless she was not happy, because she thought she did not understand herself. She had always enjoyed good health till a few years ago, when she is said to have been treated for dilatation of the stomach and tapeworm. During this illness her hair became rapidly white, later she had typhoid fever. An engagement was terminated by the death of her fiancé from paralysis. She had been very nervous for a year and a half. In the summer of 1897 she went away for change of air and treatment by hydropathy. She herself says that for about a year she has had moments during work when her thoughts seem to stand still, but she does not fall asleep. Nevertheless she makes no mistakes in the accounts at such times. She has often been to the wrong street and then suddenly noticed that she was not in the right place. She has had no giddiness or attacks of fainting. Formerly menstruation occurred regularly every four weeks, and without any pain, but since she has been nervous and overworked it has come every fourteen days. For a long time she has suffered from constant headache. As accountant and book-keeper in a large establishment, the patient has had very strenuous work, which she performs well and conscientiously. In addition to the strenuous character of her work, in the last year she had various new worries. Her brother was suddenly divorced. In addition to her own work, she looked after his housekeeping, nursed him and his child in a serious illness, and so on. To recuperate, she took a journey on the 13th September to see a woman friend in South Germany. The great joy at seeing her friend from whom she had been long separated, and her participation in some festivities, deprived her of her rest. On the 15th, she and her friend drank half a bottle of claret. This was contrary to her usual habit. They then went for a walk in a cemetery, where she

Carl Gustav Jung

began to tear up flowers and to scratch at the graves. She remembered absolutely nothing of this afterwards. On the 16th she remained with her friend without anything of importance happening. On the 17th her friend brought her to Zürich. An acquaintance came with her to the Asylum; on the way she spoke quite sensibly, but was very tired. Outside the Asylum they met three boys, whom she described as the "three dead people she had dug up." She then wanted to go to the neighbouring cemetery, but was persuaded to come to the Asylum.

She is small, delicately formed, slightly anæmic. The heart is slightly enlarged to the left, there are no murmurs, but some reduplication of the sounds, the mitral being markedly accentuated. The liver dulness reaches to the border of the ribs. Patella-reflex is somewhat increased, but otherwise no tendon-reflexes. There is neither anæsthesia, analgesia, nor paralysis. Rough examination of the field of vision with the hands shows no contraction. The patient's hair is a very light yellow-white colour; on the whole she looks her age. She gives her history and tells recent events quite clearly, but has no recollection of what took place in the cemetery at C. or outside the Asylum. During the night of the 17th-18th she spoke to the attendant and declared she saw the whole room full of dead people—looking like skeletons. She was not at all frightened, but was rather surprised that the attendant did not see them too. Once she ran to the window, but was otherwise quiet. The next morning, while still in bed, she saw skeletons, but not in the afternoon. The following night at four o'clock she awoke and heard the dead children in the neighbouring cemetery cry out that they had been buried alive. She wanted to go out to dig them up, but allowed herself to be restrained. Next morning at seven o'clock she was still delirious, but recalled accurately the events in the cemetery at C. and those on approaching the Asylum. She stated that at C. she wanted to dig up the dead children who were calling her. She had only torn up the flowers to free the graves and to be able to get at them. In this state Professor Bleuler explained to her that later on, when in a normal state again, she would remember everything. The patient slept in the morning, afterwards was quite clear, and felt herself relatively well. She did indeed remember the attacks, but maintained a remarkable indifference to-

wards them. The following nights, with the exception of those of the 22nd and the 25th September, she again had slight attacks of delirium, when once more she had to deal with the dead. The details of the attacks differed, however. Twice she saw the dead in her bed, but she did not appear to be afraid of them, she got out of bed frequently, however, because she did not want "to inconvenience the dead"; several times she wanted to leave the room.

After a few nights free from attacks there was a slight one on the 30th Sept., when she called the dead from the window. During the day her mind was clear. On the 3rd of October she saw a whole crowd of skeletons in the drawingroom, as she afterwards related, during full consciousness. Although she doubted the reality of the skeletons, she could not convince herself that it was a hallucination. The following night, between twelve and one o'clock—the earlier attacks were usually about this time—she was obsessed with the idea of dead people for about ten minutes. She sat up in bed, stared at a corner and said: "Well, come!—but they're not all there. Come along! Why don't you come? The room is big enough, there's room for all; when all are there, I'll come too." Then she lay down with the words: "Now they're all there," and fell asleep again. In the morning she had not the slightest recollection of any of these attacks. Very short attacks occurred in the nights of the 4th, 6th, 9th, 13th and 15th of October, between twelve and one o'clock. The last three occurred during the menstrual period. The attendant spoke to her several times, showed her the lighted street-lamps, and trees; but she did not react to this conversation. Since then the attacks have altogether ceased. The patient has complained about a number of troubles which she had had all along. She suffered much from headache the morning after the attacks. She said it was unbearable. Five grains of *Sacch. lactis* promptly alleviated this; then she complained of pains in both fore-arms, which she described as if it were a *teno-synovitis*. She regarded the bulging of the muscles in flexion as a swelling, and asked to be massaged. Nothing could be seen objectively, and no attention being paid to it, the trouble disappeared. She complained exceedingly and for a long time about the thickening of a toenail, even after the thickened part had been removed. Sleep was often

disturbed. She would not give her consent to be hypnotised for the night-attacks. Finally on account of headache and disturbed sleep she agreed to hypnotic treatment. She proved a good subject, and at the first sitting fell into deep sleep with analgesia and amnesia.

In November she was again asked whether she could now remember the attack on the 19th September which it had been suggested that she would recall. It gave her great trouble to recollect it, and in the end she could only state the chief facts, she had forgotten the details.

It should be added that the patient was not superstitious, and in her healthy days had never particularly interested herself in the supernatural. During the whole course of treatment, which ended on the 14th November, great indifference was evinced both to the illness and the cure. Next spring the patient returned for out-patient treatment of the headache, which had come back during the very hard work of these months. Apart from this symptom her condition left nothing to be desired. It was demonstrated that she had no remembrance of the attacks of the previous autumn, not even of those of the 19th September and earlier. On the other hand, in hypnosis she could recount the proceedings in the cemetery and during the nightly disturbances.

By the peculiar hallucination and by its appearance our case recalls the conditions which V. Kraft-Ebing has described as "protracted states of hysterical delirium." He says: "Such conditions of delirium occur in the slighter cases of hysteria. Protracted hysterical delirium is built upon a foundation of temporary exhaustion. Excitement seems to determine an outbreak, and it readily recurs. Most frequently there is persecution-delirium with very violent anxiety, sometimes of a religious or erotic character. Hallucinations of all the senses are not rare, but illusions of sight, smell and feeling are the commonest, and most important. The visual hallucinations are especially visions of animals, pictures of corpses, phantastic processions in which dead persons, devils and ghosts swarm. The illusions of hearing are simply sounds (shrieks, howlings, claps of thunder) or local hallucinations, frequently with a sexual content."

Collected Papers on Analytical Psychology

This patient's visions of corpses, occurring almost always in attacks, recall the states occasionally seen in hystero-epilepsy. There likewise occur specific visions which, in contrast with protracted delirium, are connected with single attacks.

(1) A lady 30 years of age with *grande hystérie* had twilight states in which as a rule she was troubled by terrible hallucinations; she saw her children carried away from her, wild beasts eating them up, and so on. She has amnesia for the content of the individual attacks.

(2) A girl of 17, likewise a semi-hysteric, saw in her attacks the corpse of her dead mother approaching her to draw her to her. Patient has amnesia for the attacks.

These are cases of severe hysteria wherein consciousness rests upon a profound stage of dreaming. The nature of the attack and the stability of the hallucination alone show a certain kinship with our case, which in this respect has numerous analogies with the corresponding states of hysteria. For instance, with those cases where a psychical shock (rape, etc.) was the occasion for the outbreak of hysterical attacks, and where at times the original incident is lived over again, stereotyped in the hallucination. But our case gets its specific mould from the identity of the consciousness in the different attacks. It is an "Etat Second" with its own memory and separated from the waking state by complete amnesia. This differentiates it from the above-mentioned twilight states and links it to the so-called somnambulatory conditions.

Charcot divides the somnambulatory states into two chief classes:—

1. Delirium with well-marked incoordination of representation and action.

2. Delirium with co-ordinated action. This approaches the waking state.

Our case belongs to the latter class.

If by somnambulism be understood a state of systematised partial waking, any critical review of this affection must take account of those exceptional cases of recurrent amnesias which have been observed now

and again. These, apart from nocturnal ambulism, are the simplest conditions of systematised partial waking. Naef's case is certainly the most remarkable in the literature. It deals with a gentleman of 32, with a very bad family history presenting numerous signs of degeneration, partly functional, partly organic. In consequence of over-work at the age of 17 he had a peculiar twilight state with delusions, which lasted some days and was cured with a sudden recovery of memory. Later he was subject to frequent attacks of giddiness and palpitation of the heart and vomiting; but these attacks were never attended by loss of consciousness. At the termination of some feverish illness he suddenly travelled from Australia to Zürich, where he lived for some weeks in careless cheerfulness, and only came to himself when he read in the paper of his sudden disappearance from Australia. He had a total and retrograde amnesia for the several months which included the journey to Australia, his sojourn there and the return journey.

Azam has published a case of periodic amnesia. Albert X., 12-1/2 years old, of hysterical disposition, was several times attacked in the course of a few years by conditions of amnesia in which he forgot reading, writing and arithmetic, even at times his own language, for several weeks at a stretch. The intervals were normal.

Proust has published a case of *Automatisme ambulatoire* with pronounced hysteria which differs from Naef's in the repeated occurrence of the attacks. An educated man, 30 years old, exhibits all the signs of *grande hystérie*; he is very suggestible, has from time to time, under the influence of excitement, attacks of amnesia which last from two days to several weeks. During these states he wanders about, visits relatives, destroys various objects, incurs debts, and has even been convicted of "picking pockets."

Boileau describes a similar case of wandering-impulse. A widow of 22, highly hysterical, became terrified at the prospect of a necessary operation for salpingitis; she left the hospital and fell into a state of somnambulism, from which she awoke three days later with total amnesia. During these three days she had travelled a distance of about 60 kilometres to fetch her child.

Collected Papers on Analytical Psychology

William James has described a case of an "ambulatory sort."

The Rev. Ansel Bourne, an itinerant preacher, 30 years of age, psychopathic, had on a few occasions attacks of loss of consciousness lasting one hour. One day (January 17, 1887) he suddenly disappeared from Greene, after having taken 551 dollars out of the bank. He remained hidden for two months. During this time he had taken a little shop under the name of H. J. Browne in Norriston, Pa., and had carefully attended to all purchases, although he had never done this sort of work before. On March 14, 1887, he suddenly awoke and went back home, and had complete amnesia for the interval.

Mesnet publishes the following case:—

F., 27 years old, sergeant in the African regiment, was wounded in the parietal bone at Bazeilles. Suffered for a year from hemiplegia, which disappeared when the wound healed. During the course of his illness the patient had attacks of somnambulism, with marked limitation of consciousness; all the senses were paralysed, with the exception of taste and a small portion of the visual sense. The movements were co-ordinated, but obstacles in the way of their performance were overcome with difficulty. During the attacks he had an absurd collecting-mania. By various manipulations one could demonstrate a hallucinatory content in his consciousness; for instance, when a stick was put in his hand he would feel himself transported to a battle scene, would place himself on guard, see the enemy approaching, etc.

Guinon and Sophie Waltke made the following experiments on hysterics:—

A blue glass was held in front of the eyes of a female patient during a hysterical attack; she regularly saw the picture of her mother in the blue sky. A red glass showed her a bleeding wound, a yellow one an orange-seller or a lady with a yellow dress.

Mesnet's case reminds one of the cases of occasional attacks of shrinkage of memory.

MacNish communicates a similar case.

An apparently healthy young lady suddenly fell into an abnormally long and deep sleep—it is said without prodromal symptoms. On awaking she had forgotten the words for and the knowledge of the simplest things. She had again to learn to read, write, and count; her progress was rapid in this re-learning. After a second attack she again woke in her normal state, but without recollection of the period when she had forgotten things. These states alternated for more than four years, during which consciousness showed continuity within the two states, but was separated by an amnesia from the consciousness of the normal state.

These selected cases of various forms of changes of consciousness all throw a certain light upon our case. Naef's case presents two hysteriform eclipses of memory, one of which is marked by the appearance of delusions, and the other by its long duration, contraction of the field of consciousness, and desire to wander. The peculiar associated impulses are specially clear in the cases of Proust and Mesnet. In our case the impulsive tearing up of the flowers, the digging up of the graves, form a parallel. The continuity of consciousness which the patient presents in the individual attacks recalls the behaviour of the consciousness in MacNish's case; hence our case may be regarded as a transient phenomenon of alternating consciousness. The dreamlike hallucinatory content of the limited consciousness in our case does not, however, justify an unqualified assignment to this group of *double consciousness*. The hallucinations in the second state show a certain creativeness which seems to be conditioned by the auto-suggestibility of this state. In Mesnet's case we noticed the appearance of hallucinatory processes from simple stimulation of touch. The patient's subconsciousness employs simple perceptions for the automatic construction of complicated scenes which then take possession of the limited consciousness. A somewhat similar view must be taken about our patient's hallucinations; at least, the external conditions which gave rise to the appearance of the hallucinations seem to strengthen our supposition. The walk in the cemetery induces the vision of the skeletons; the meeting with the three boys arouses the hallucination of children buried alive whose voices the patient hears at night-time. She arrived at the cemetery in a

somnambulatory state, which on this occasion was specially intense in consequence of her having taken alcohol. She performed actions almost instinctively about which her subconsciousness nevertheless did receive certain impressions. (The part played here by alcohol must not be underestimated. We know from experience that it does not only act adversely upon these conditions, but, like every other narcotic, it gives rise to a certain increase of suggestibility.) The impressions received in somnambulism subconsciously form independent growths, and finally reach perception as hallucinations. Thus our case closely corresponds to those somnambulatory dream-states which have recently been subjected to a penetrating study in England and France.

These lapses of memory, which at first seem without content, gain a content by means of accidental auto-suggestion, and this content builds itself up automatically to a certain extent. It achieves no further development, probably on account of the improvement now beginning, and finally it disappears altogether as recovery sets in. Binet and Féré have made numerous experiments on the implanting of suggestions in states of partial sleep. They have shown, for example, that when a pencil is put in the anæsthetic hand of a hysteric, letters of great length are written automatically whose contents are unknown to the patient's consciousness. Cutaneous stimuli in anæsthetic regions are sometimes perceived as visual images, or at least as vivid associated visual presentations. These independent transmutations of simple stimuli must be regarded as primary phenomena in the formation of somnambulatory dream-pictures. Analogous manifestations occur in exceptional cases within the sphere of waking consciousness. Goethe, for instance, states that when he sat down, lowered his head and vividly conjured up the image of a flower, he saw it undergoing changes of its own accord, as if entering into new combinations.

In half-waking states these manifestations are relatively frequent in the so-called hypnagogic hallucinations. The automatism which the Goethe example illustrates are differentiated from the truly somnambulatory, inasmuch as the primary presentation is a conscious one in this case; the further development of the automatism is maintained within

the definite limits of the original presentation, that is, within the purely motor or visual region.

If the primary presentation disappears, or if it is never conscious at all, and if the automatic development overlaps neighbouring regions, we lose every possibility of a demarcation between waking automatisms and those of the somnambulic state; this will occur, for instance, if the presentation of a hand plucking the flower gets joined to the perception of the flower or the presentation of the smell of the flower. We can then only differentiate it by the more or less. In one case we then speak of the "waking hallucinations of the normal," in the other, of the dream-vision of the somnambulists. The interpretation of our patient's attacks as hysterical becomes more certain by the demonstration of a probably psychogenic origin of the hallucination. This is confirmed by her troubles, headache and teno-synovitis, which have shown themselves amenable to suggestive treatment. The ætiological factor alone is not sufficient for the diagnosis of hysteria; it might really be expected *a priori* that in the course of a disease which is so suitably treated by rest, as in the treatment of an exhaustion-state, features would be observed here and there which could be interpreted as manifestations of exhaustion. The question arises whether the early lapses and later somnambulic attacks could not be conceived as states of exhaustion, so-called "neurasthenic crises." We know that in the realm of psychopathic mental deficiency there can arise the most diverse epileptoid accidents, whose classification under epilepsy or hysteria is at least doubtful. To quote C. Westphal: "On the basis of numerous observations, I maintain that the so-called epileptoid attacks form one of the most universal and commonest symptoms in the group of diseases which we reckon among the mental diseases and neuropathies; the mere appearance of one or more epileptic or epileptoid attacks is not decisive for its course and prognosis. As mentioned, I have used the concept of epileptoid in the widest sense for the attack itself."

The epileptoid moments of our case are not far to seek; the objection can, however, be raised that the colouring of the whole picture is hysterical in the extreme. Against this, however, it must be stated that eve-

ry somnambulism is not *eo ipso* hysterical. Occasionally states occur in typical epilepsy which to experts seem parallel with somnambulatory states, or which can only be distinguished by the existence of genuine convulsions.

As Diehl shows, in neurasthenic mental deficiency crises also occur which often confuse the diagnosis. A definite presentation-content can even create a stereotyped repetition in the individual crisis. Lately Mörchen has published a case of epileptoid neurasthenic twilight state.

I am indebted to Professor Bleuler for the report of the following case:—

An educated gentleman of middle age—without epileptic antecedents—had exhausted himself by many years of over-strenuous mental work. Without other prodromal symptoms (such as depression, etc.) he attempted suicide during a holiday; in a peculiar twilight state he suddenly threw himself into the water from a bank, in sight of many persons. He was at once pulled out and retained but a fleeting remembrance of the occurrence.

Bearing these observations in mind, neurasthenia must be allowed to account for a considerable share in the attacks of our patient, Miss E. K. The headaches and the teno-synovitis point to the existence of a relatively mild hysteria, generally latent, but becoming manifest under the influence of exhaustion. The genesis of this peculiar illness explains the relationship which has been described between epilepsy, hysteria and neurasthenia.

Summary.—Miss Elise K. is a psychopathic defective with a tendency to hysteria. Under the influence of nervous exhaustion she suffers from attacks of epileptoid giddiness whose interpretation is uncertain at first sight. Under the influence of an unusually large dose of alcohol the attacks develop into definite somnambulism with hallucinations, which are limited in the same way as dreams to accidental external perceptions. When the nervous exhaustion is cured the hysterical manifestations disappear.

In the region of psychopathic deficiency with hysterical colouring, we encounter numerous phenomena which show, as in this case, symptoms of diverse defined diseases, which cannot be attributed with certainty to any one of them. These phenomena are partially recognised to be independent; for instance, pathological lying, pathological reveries, etc. Many of these states, however, still await thorough scientific investigation; at present they belong more or less to the domain of scientific gossip. Persons with habitual hallucinations, and also the inspired, exhibit these states; they draw the attention of the crowd to themselves, now as poet or artist, now as saviour, prophet or founder of a new sect.

The genesis of the peculiar frame of mind of these persons is for the most part lost in obscurity, for it is only very rarely that one of these remarkable personalities can be subjected to exact observation. In view of the often great historical importance of these persons, it is much to be wished that we had some scientific material which would enable us to gain a closer insight into the psychological development of their peculiarities. Apart from the now practically useless productions of the pneumatological school at the beginning of the nineteenth century, German scientific literature is very poor in this respect; indeed, there seems to be real aversion from investigation in this field. For the facts so far gathered we are indebted almost exclusively to the labours of French and English workers. It seems at least desirable that our literature should be enlarged in this respect. These considerations have induced me to publish some observations which will perhaps help to further our knowledge concerning the relationship of hysterical twilight-states and enlarge the problems of normal psychology.

Case of Somnambulism in a Person with Neuro-pathic Inheritance (Spiritualistic Medium).

The following case was under my observation in the years 1899 and 1900. As I was not in medical attendance upon Miss S. W., a physical examination for hysterical stigmata unfortunately could not be made. I kept a complete diary of the séances, which I filled up after each sitting. The following report is a condensed account from these notes. Out of

Collected Papers on Analytical Psychology

regard for Miss S. W. and her family a few unimportant dates have been altered and a few details omitted from the story, which for the most part is composed of very intimate matters.

Miss S. W., 15½ years old. Reformed Church. The paternal grandfather was highly intelligent, a clergyman with frequent waking hallucinations (generally visions, often whole dramatic scenes with dialogues, etc.). A brother of the grandfather was an imbecile eccentric, who also saw visions. A sister of the grandfather, a peculiar, odd character. The paternal grandmother after some fever in her 20th year (typhoid?) had a trance which lasted three days, from which she did not awake until the crown of her head had been burned by a red-hot iron. During states of excitement later on she had fainting fits which were nearly always followed by a brief somnambulism during which she uttered prophesies. Her father was likewise a peculiar, original personality with bizarre ideas. All three had waking hallucinations (second-sight, forebodings, etc.). A third brother was also eccentric and odd, talented but one-sided. The mother has an inherited mental defect often bordering on psychosis. The sister is a hysteric and visionary and a second sister suffers from "nervous heart attacks." Miss S. W. is slenderly built, skull somewhat rachitic, without pronounced hydrocephalus, face rather pale, eyes dark with a peculiar penetrating look. She has had no serious illnesses. At school she passed for average, showed little interest, was inattentive. As a rule her behaviour was rather reserved, sometimes giving place, however, to exuberant joy and exaltation. Of average intelligence, without special gifts, neither musical nor fond of books, her preference is for handwork—and day dreaming. She was often absent-minded, misread in a peculiar way when reading aloud, instead of the word *Ziege* (goat), for instance, said *Gais*, instead of *Treppe* (stair), *Stege*; this occurred so often that her brothers and sisters laughed at her. There were no other abnormalities; there were no serious hysterical manifestations. Her family were artisans and business people with very limited interests. Books of mystical content were never permitted in the family. Her education was faulty; there were numerous brothers and sisters and thus the education was given indiscriminately, and in addition the children had to suffer a great deal from the inconsequent and vulgar, in-

deed sometimes rough, treatment of their mother. The father, a very busy business man, could not pay much attention to his children, and died when S. W. was not yet grown up. Under these uncomfortable conditions it is no wonder that S. W. felt herself shut in and unhappy. She was often afraid to go home, and preferred to be anywhere rather than there. She was left a great deal with playmates and grew up in this way without much polish. The level of her education is relatively low and her interests correspondingly limited. Her knowledge of literature is also very limited. She knows the common school songs by heart, songs of Schiller and Goethe and a few other poets, as well as fragments from a song book and the psalms. Newspaper stories represent her highest level in prose. Up to the time of her somnambulism she had never read any books of a serious nature. At home and from friends she heard about table-turning and began to take an interest in it. She asked to be allowed to take part in such experiments, and her desire was soon gratified. In July 1899, she took part a few times in table-turnings with some friends and her brothers and sisters, but in joke. It was then discovered that she was an excellent "medium." Some communications of a serious nature arrived which were received with general astonishment. Their pastoral tone was surprising. The spirit said he was the grandfather of the medium. As I was acquainted with the family I was able to take part in these experiments. At the beginning of August, 1899, the first attacks of somnambulism took place in my presence. They took the following course: S. W. became very pale, slowly sank to the ground, or into a chair, shut her eyes, became cataleptic, drew several deep breaths, and began to speak. In this stage she was generally quite relaxed; the reflexes of the lids remained, as did also tactile sensation. She was sensitive to unexpected noises and full of fear, especially in the initial stage.

She did not react when called by name. In somnambulic dialogues she copied in a remarkably clever way her dead relations and acquaintances, with all their peculiarities, so that she made a lasting impression upon unprejudiced persons. She also so closely imitated persons whom she only knew from descriptions that no one could deny her at least considerable talent as an actress. Gradually gestures were added to the

simple speech, which finally led to "*attitudes passionelles*" and complete dramatic scenes. She took up postures of prayer and rapture, with staring eyes, and spoke with impassionate and glowing rhetoric. She then made use exclusively of a literary German which she spoke with an ease and assurance quite contrary to her usual uncertain and embarrassed manner in the waking state. Her movements were free and of a noble grace, depicting most beautifully her varying emotions. Her attitude during these states was always changing and diverse in the different attacks. Now she would lie for ten minutes to two hours on the sofa or the ground, motionless, with closed eyes; now she assumed a half-sitting posture and spoke with changed tone and speech; now she would stand up, going through every possible pantomimic gesture. Her speech was equally diversified and without rule. Now she spoke in the first person, but never for long, generally to prophesy her next attack; now she spoke of herself (and this was the most usual) in the third person. She then acted as some other person, either some dead acquaintance or some chance person, whose part she consistently carried out according to the characteristics she herself conceived. At the end of the ecstasy there usually followed a cataleptic state with *flexibilitas cerea*, which gradually passed over into the waking state. The waxy anæmic pallor which was an almost constant feature of the attacks made one really anxious; it sometimes occurred at the beginning of the attack, but often in the second half only. The pulse was then small but regular and of normal frequency; the breathing gentle, shallow, or almost imperceptible. As already stated, S. W. often predicted her attacks beforehand; just before the attacks she had strange sensations, became excited, rather anxious, and occasionally expressed thoughts of death: "she will probably die in one of these attacks; during the attack her soul only hangs to her body by a thread, so that often the body could scarcely go on living." Once after the cataleptic attack tachypnoea lasting two minutes was observed, with a respiration rate of 100 per minute. At first the attacks occurred spontaneously, afterwards S. W. could provoke them by sitting in a dark corner and covering her face with her hands. Frequently the experiment did not succeed. She had so-called "good" and "bad" days. The question of amnesia after the attacks is un-

Carl Gustav Jung

fortunately very obscure. This much is certain, that after each attack she was quite accurately orientated as to what she had gone through "during the rapture." It is, however, uncertain how much she remembered of the conversations in which she served as medium, and of changes in her surroundings during the attack. It often seemed that she did have a fleeting recollection, for directly after waking she would ask: "Who was here? Wasn't X or Y here? What did he say?" She also showed that she was superficially aware of the content of the conversations. She thus often remarked that the spirits had communicated to her before waking what they had said. But frequently this was not the case. If, at her request, the contents of the trance speeches were repeated to her she was often annoyed about them. She was then often sad and depressed for hours together, especially when any unpleasant indiscretions had occurred. She would then rail against the spirits and assert that next time she would beg her guides to keep such spirits far away. Her indignation was not feigned, for in the waking state she could but poorly control herself and her emotions, so that every mood was at once mirrored in her face. At times she seemed only slightly or not at all aware of the external proceedings during the attack. She seldom noticed when any one left the room or came in. Once she forbade me to enter the room when she was awaiting special communications which she wished to keep secret from me. Nevertheless I went in, and sat down with the three other sitters and listened to everything. Her eyes were open and she spoke to those present without noticing me. She only noticed me when I began to speak, which gave rise to a storm of indignation. She remembered better, but still apparently only in indefinite outlines, the remarks of those taking part which referred to the trance speeches or directly to herself. I could never discover any definite rapport in this connection.

In addition to these great attacks which seemed to follow a certain law in their course, S. W. produced a great number of other automatisms. Premonitions, forebodings, unaccountable moods and rapidly changing fancies were all in the day's work. I never observed simple states of sleep. On the other hand, I soon noticed that in the middle of a lively conversation S. W. became quite confused and spoke without