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BLACK SUN

DEPRESSION AND MELANCHOLIA

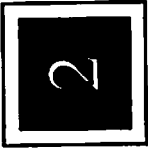
*Translated by Leon S. Roudiez*



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tation and a silence as empty as they are fulfilled. In the midst of its lethal ocean/ the melancholy woman is the dead one that has always been abandoned within herself and can never kill outside herself (see chapter 3). Modest, silent, without verbal or desiring bonds with others, she wastes away by striking moral and physic blows against herself, which, nevertheless, do not give her sufficient pleasures. Until the fatal blow—the definitive nuptials of the Dead Woman with the Same, whom she did not kill.

One cannot overemphasize the tremendous psychic, intellectual, and affective effort a woman must make in order to find the other sex as erotic object. In his philogonic musings, Freud often admires the intellectual accomplishment of the man who has been (or when he is) deprived of women (through glaciation or tyranny on the part of the father of the primal horde, etc.). If the discovery of her invisible vagina already imposes upon woman a tremendous sensory, speculative, and intellectual effort, shifting to the symbolic order *at the same time* as to a sexual object of a sex other than that of the primary maternal object represents a gigantic elaboration in which a woman cathezes a psychic potential greater than what is demanded of the male sex. When this process is favorably carried out, it is evidenced by the precocious awakening of girls, their intellectual performances often more brilliant during the school years, and their continuing female maturity. Nevertheless, it has its price in the constant tendency to extol the problematic mourning for the lost object . . . not so fully lost, and it remains, throbbing, in the "crypt" of feminine ease and maturity. Unless a massive introjection of the ideal succeeds, at the same time, in satisfying narcissism with its negative side *and* the longing to be present in the arena where the world's power is at stake.



## Life and Death of Speech

Let us keep in mind the speech of the depressed—repetitive and monotonous. Faced with the impossibility of concatenating, they utter sentences that are interrupted, exhausted, come to a standstill. Even phrases they cannot formulate. A repetitive rhythm, a monotonous melody emerge and dominate the broken logical sequences, changing them into recurring, obsessive litanies. Finally, when that frugal musicality becomes exhausted in its turn, or simply does not succeed in becoming established on account of the pressure of silence, the melancholy person appears to stop cognizing as well as uttering, sinking into the blankness of asymbolia or the excess of an unorderable cognitive chaos.

*The Shattered Concatenation: A Biological Hypothesis*

Inconsolable sadness often conceals a real predisposition for despair. It is perhaps biological in part: too much speed or too much slowing down of neural flow unquestionably depends on given chemical substances that are present in each one of us in varying degrees.<sup>1</sup>

It has been medically attested that the succession of emotions, gestures, actions, or words considered normal because statistically prevalent becomes hampered during depression. The rhythm of overall behavior is shattered, there is neither time nor place for acts and sequences to be carried out. If in the nondepressive state one has the ability to concatenate, depressive persons, in contrast, riveted to their pain, no longer concatenate and, consequently, neither act nor speak.

#### "Psychomotor Retardation": Two Models

There are many who have emphasized the psychomotor, affective, and ideational retardation that is characteristic of the melancholy/depressive state.<sup>2</sup> Even psychomotor agitation and delirious mania or more generally the depressive mood appear to be indissociable from simple retardation.<sup>3</sup> Language retardation partakes of the same pattern: speech delivery is slow, silences are long and frequent, rhythms slacken, intonations become monotonous, and the very syntactic structures—without evidencing disturbances and disorders such as can be observed in schizophrenics—are often characterized by nonrecoverable elisions (objects or verbs that are omitted and cannot be restored on the basis of the context).

Many models have been suggested in order to think out the processes underlying the depressive retardation state. One of them "learned helplessness," is based on the following observation: when all escape routes are blocked, animals as well as men learn to withdraw rather than flee or fight. The retardation or inactivity, which one might call depressive, would thus constitute a learned defense reaction to a dead-end situation and unavoidable shocks. Tricyclic antidepressants apparently restore the ability to

flee, and this leads one to assume that learned inactivity is linked to noradrenergic depletion or cholinergic hyperactivity.

According to another model, all behavior would be governed by an autostimulation system, based on reward, that would condition the inception of responses. One ends up with the notion of "positive or negative intensification systems" and, assuming that the latter would be disturbed during the depressive state, one studies the structures and transmitters that are involved. One succeeds in putting forward a dual explanation for the disturbance. Since the intensification structure, the telencephalon's median network, having a noradrenergic transmission role, is responsible for the response, the depressive retardation and withdrawal would be caused by its dysfunctioning. In similar fashion, a hyperfunctioning of the prefrontal "punishment" systems with a cholinergic transmission role would be the source of anxiety.<sup>4</sup> The role of the *locus coeruleus* of the telencephalon's median network would be essential to noradrenergic autostimulation and transmission. In experiments involving the suppression of a response in expectation of punishment, serotonin, in contrast, would increase. Antidepressive treatment would then call for a noradrenergic increase and a serotonergic decrease.

The *locus coeruleus'* essential role is emphasized by many as being

a relay center for an "alarm" system inducing "normal" fear or anxiety. . . . The LC receives innervations directly from pain pathways throughout the body, and the LC shows sustained responses to repeated presentations of "noxious" stimuli even in anesthetized animals. . . . In addition, there are pathways to and from the cerebral cortex which provide feed-back loops that

explain the apparent influence that the *meaning or relevance of a stimulus* may exercise on the response. These same feed-back loops provide access to areas that may underlie *the cognitive experience of the emotional state (or states)*.<sup>5</sup>

*Language as "Stimulation" and Reinforcement"*

At the current stage of attempts to think out the two channels—psychic and biological—of affects, it is again possible to formulate the question of language's central importance to human beings.

Within the experience of separation without resolution, or unavoidable shocks, or again pursuits without result, and unlike animals whose only recourse is in behavior, the child can find a fighting or fleeing solution in psychic representation and in language. The child imagines, thinks out, utters the flight or the fight and a full intermediate gamut as well, and this can be a deterrent from withdrawal into inactivity or playing dead, wounded by irreparable frustrations or harms. Nevertheless, for this nondepressive solution to the melancholy dilemma, *flight/fight: learned helplessness*, to be worked out, the child needs a *solid implication* in the symbolic and imaginary code, which, then and only then, becomes stimulation and reinforcement. In that case, responses to a given action are generated, and they are also implicitly symbolic, oriented by language or within the working of language alone. If, on the contrary, the symbolic dimension proves to be insufficient, subjects find themselves back at the dead-end of a helplessness leading to inaction and death. In other words, language in its heterogeneity (primary and secondary processes, ideational and emotional carrier of desire, hatred, conflicts) is a powerful factor that, through un-

known mediations, has an activating (as well as, conversely, an inhibiting) effect on neurobiological networks. Within that perspective, several points are still unclear.

Is the symbolic breakdown one notices in depressed persons one component among others of a psychomotor retardation, which is clinically observable, or does it appear among its essential prerequisites? Is it conditioned by a dysfunction of the neuronal and endocrinal network that underlies (but in what fashion?) psychic representations and, particularly, word representations, and also the channels that link them to hypothalamic nuclei? Or still is it an inadequacy of symbolic impact that would be due merely to the family and social environment?

Without excluding the first hypothesis, the psychoanalyst will be concerned with shedding light on the second. We shall thus ask ourselves what *mechanisms erase symbolic impact* within the subject, who nevertheless has achieved an adequate symbolic ability, often apparently consonant with social norms, remarkably effective at times. I shall try, by means of the cure's dynamics and a specific economy of interpretation, to give its optimal power back to the imaginary and symbolic dimension of the heterogeneous set constituted by the speaking body. That will lead me to consider the problem of the depressed's *denial of the signifier* and also the role of primary processes in depressive as well as in interpretative speech as "imaginary and symbolic graft" through the agency of primary processes. Finally, I shall ponder the importance of *narcissistic recognition* and *idealization* for the purpose of facilitating, in the patient, an anchoring of the symbolic dimension, and this often amounts to a new acquisition of communication as parameter of desire and conflict, and even hatred.

To mention one last time the problem of "biological

limit," which I shall henceforth put aside, I shall posit that the register of psychic and, particularly, linguistic representation is neurologically transferred to the physiological occurrences of the brain, in the last instance through the hypothalamus' multiple networks. (The hypothalamic nuclei are connected to the cerebral cortex whose functioning underlies *meaning*—but how?—and also to the limbic lobe of the brain stem whose functioning underlies *affects*.) At present we don't know *how* this transfer takes place, but clinical experience allows us to think that it does *actually* take place (for instance, one will recall the exciting or sedative, "opiate," effect of certain words). Finally, numerous illnesses—and depressions—whose origins can be traced to neurophysiological disturbances triggered by symbolic breakdowns remain set in registers that cannot be affected by language. The facilitating effect of antidepressants is then required in order to reconstitute a minimal neurophysiological base upon which psychotherapeutic work can begin, analyzing symbolic deficiencies and knots and reconstituting a new symbol system.

#### *Other Possible Transfers Between Meaning and Cerebral Functioning*

Interruptions in linguistic sequentiality and even more so their replacement with suprasegmental operations (rhythms, melodies) in depressive discourse can be interpreted as deficiencies in the left hemisphere, which controls linguistic generation, leading to domination—temporary as it may be—by the right hemisphere, which controls affects and emotions as well as their "primary," "musical," non-linguistic inscriptions.<sup>6</sup> Moreover, to those observations should be added the model of a dual cerebral functioning: neuronal, electrical or wired, and digital; and also endo-

crinal, humoral, fluctuating, and analogical.<sup>7</sup> Certain chemical substances in the brain, even certain neurotransmitters, seem to operate in dual fashion—sometimes "neuronal," sometimes "endocrinal." Eventually, and in view of this cerebral duality where passions mainly find their anchoring in the humoral, it is possible to speak of a "fluctuating central state." If one grants that language, within its own register, must also translate that "fluctuating state," it follows that one must locate, in language functioning, those levels that seem closer to the "neuronal brain" (such as grammatical and logical sequentiality) and those that seem closer to the "glandular brain" (the supra-segmental components of discourse). One might thus be able to think out the "symbolic disposition" of signifiacnce in relation to the left hemisphere and the neuronal brain, and the "semiotic disposition" in relation to the right hemisphere and the glandular brain.

And yet there is nothing today that allows one to set up any relation whatsoever—aside from a leap—between the biological substratum and the level of *representations*, be they tonal or syntactic, emotional or cognitive, semiotic or symbolic. Nevertheless one should not ignore the possible ways of linking the two levels, attempting to provoke reverberations, aleatory and unpredictable to be sure, between the one and the other and, with all the more reason, modifications of the one by the other.

To conclude, if a dysfunction of noradrenalin and serotonin or of their reception hampers the synapses' conductivity and *can* condition the depressive state, the role of those few synapses, within the star-like structure of the brain, cannot be absolute.<sup>8</sup> Such inadequacy may be compensated for by other chemical phenomena and also by other external actions (symbolic ones included) on the brain, which adapts to them through biological modifica-

tions. Indeed, the experience of the relationship to the other, its violence or its delights, eventually puts its imprint on this biological terrain and completes the well-known picture of depressive behavior. Without refusing chemical action in the fight against melancholia, analysts have (or will have) at their disposal a wide range of verbalizations concerning that state and going beyond it. While remaining heedful of such interferences, they will confine themselves to the specific changes of depressive discourse as well as to the construction of their own consequent interpretative words.

The psychoanalysts' confrontation with depression thus leads them to ponder the position of the subject with respect to meaning as well as the heterogeneous dimensions of language that are liable to different psychic imprints; the latter, on account of such diversity, would have an increased number of access paths to the multiple aspects of cerebral functioning and hence to the organism's activity. Finally, seen from that standpoint, the imaginative experience will come to light both as evidence of a person's struggle against the symbolic abdication that is germane to depression, and as a range of means likely to enrich interpretative discourse.

*The Psychoanalytic Leap: To Concatenate and Transpose*

From the analyst's point of view, the possibility of concatenating signifiers (words or actions) appears to depend upon going through mourning for an archaic and indispensable object—and on the related emotions as well. Mourning for the Thing—such a possibility comes out of transposing; beyond loss and on an imaginary or symbolic level, the imprints of an interchange with the other articulated according to a certain order.

Relieved of the primal object, semiotic imprints are first organized in *series*, according to primary processes (displacement and condensation), then in phrases and sentences, according to the secondary processes of grammar and logic. There is agreement in all branches of linguistics today in recognizing that discourse is *dialogue*: its organization, rhythmic and intonational as well as syntactical, requires two speakers in order to be completed. To that fundamental precondition, which already implies the necessary separation between one subject and another, the following fact must nevertheless be added: verbal sequences turn up only if a trans-position is substituted for a more or less symbiotic primal object, this trans-position being a true reconstitution that retroactively gives form and meaning to the mirage of the primal Thing. That critical task of *transposition* consists of two facets: the mourning gone through for the object (and in its shadow the mourning for the archaic Thing), and the subject's acceptance of a set of signs (signifying precisely because of the absence of object) only thus open to serial organization. Evidence for this can be found in the child's acquisition of language, when that intrepid wanderer leaves the crib to meet the mother in the realm of representations. Depressed persons also provide evidence, contrariwise, when they give up signifying and submerge in the silence of pain or the spasm of tears that celebrates reunion with the Thing.

To *transpose* corresponds to the Greek *metapherein*, to transport; language is, from the start, a translation, but on a level that is heterogeneous to the one where affective loss, renunciation, or the break takes place. If I did not agree to lose mother, I could neither imagine nor name her. The psychotic child is acquainted with that drama: such a child, being ignorant of metaphor, is an incompe-

tent translator. As for the discourse of the depressed, it is the "normal" surface of a psychotic risk: the sadness that overwhelms us, the retardation that paralyzes us are also a shield—sometimes the last one—against madness.

Would the fate of the speaking being consist in ceaselessly transposing, always further beyond or more to the side, such a transposition of series or sentences testifying to our ability to work out a fundamental mourning and successive mournings? Our gift of speech, of situating ourselves in time for an other, could exist nowhere except beyond an abyss. Speaking beings, from their ability to endure in time up to their enthusiastic, learned, or simply amusing constructions, demand a break, a renunciation, an uncase at their foundations.

The negation of that fundamental loss opens up the realm of signs for us, but the mourning is often incomplete. It drives out negation and revives the memory of signs by drawing them out of their signifying neutrality. It loads them with affects, and this results in making them ambiguous, repetitive or simply alliterative, musical or sometimes nonsensical. At that point, translation—our fate as speaking beings—stops its vertiginous course toward metalanguages or foreign languages, which are like many sign systems distant from the site of the pain. It seeks to become alien to itself in order to discover, in the mother tongue, a "total word, new, foreign to the language" (Malarmé), for the purpose of capturing the unnameable. The excess of affect has thus no other means of coming to the fore than to produce new languages—strange concatenations, idiolects, poetics. Until the weight of the primal Thing prevails, and all translatability become impossible. Melancholia then ends up in asymbolia, in loss of meaning: if I am no longer capable of translating or metaphorphizing, I become silent and I die.

*The Denial of Negation*

Listen again for a few moments to depressive speech, repetitive, monotonous, or empty of meaning, inaudible even for the speaker before he or she sinks into mutism. You will note that, with melancholy persons, meaning appears to be arbitrary, or else it is elaborated with the help of much knowledge and will to mastery, but seems secondary, frozen, somewhat removed from the head and body of the person who is speaking. Or else it is from the very beginning evasive, uncertain, deficient, quasi mutistic: "one" speaks to you already convinced that the words are wrong and therefore "one" speaks carelessly, "one" speaks without believing in it.

Meaning, however, is arbitrary; linguistics asserts it for all verbal signs and for all discourse. Is not the signifier LAF completely unmotivated with respect to the meaning of "laugh," and also, and above all, with respect to the act of laughing, its physical production, its intrapsychic and interreactional value? Here is the evidence: I call the same meaning and act *rire* in French, *smeyatsya* in Russian, and so forth. Now every "normal" speaker learns to take that artifice seriously, to cathect it or forget it.

Signs are arbitrary because language starts with a negation (*Verneinung*) of loss, along with the depression occasioned by mourning. "I have lost an essential object that happens to be, in the final analysis, my mother," is what the speaking being seems to be saying. "But no, I have found her again in signs, or rather since I consent to lose her I have not lost her (that is the negation), I can recover her in language."

Depressed persons, on the contrary, *disavow the negation*: they cancel it out, suspend it, and nostalgically fall



back on the real object (the Thing) of their loss, which is just what they do not manage to lose, to which they remain painfully riveted. The *denial* (*Verleugnung*) of *negation* would thus be the exercise of an impossible mourning, the setting up of a fundamental sadness and an artificial, unbelievable language, cut out of the painful background that is not accessible to any signifier and that intonation alone, intermittently, succeeds in inflecting.

*What Should Be Understood by Denial and Negation?*

I shall call *denial* the rejection of the signifier as well as semiotic representatives of drives and affects. *Negation* will be understood as the intellectual process that leads the repressed to representation on the condition of denying it and, on that account, shares in the signifier's advent.

According to Freud, *denial* or *disavowal* (*Verleugnung*) refers to the psychic reality he deemed to be within the realm of perception. Such a denial would be common in children but becomes the starting point of a psychosis with adults since it focuses on external reality.<sup>9</sup> Ultimately, however, denial finds its prototype in denial of castration and becomes specific as it sets up fetishism.<sup>10</sup>

My broadening the scope of Freud's *Verleugnung* doesn't alter its function of effecting a splitting in the subject: on the one hand it denies archaic representations of traumatic perceptions; on the other it symbolically acknowledges their impact and tries to draw the conclusions.

Nonetheless, my conception modifies the object of the denial. Denial focuses on the *intrapyschic* (*semiotic and symbolic*) inscription of the want, be it fundamentally an object want or later eroticized as woman's castration. In other words, denial focuses on signifiers liable to inscribe semiotic traces and transpose them in order to produce meaning in the subject for another subject.

It will be noted that the disavowed value of the depressive signifier translates an impossibility to give up the object and is often accompanied by the fantasy of a phallic mother. Fetishism appears as a solution to depression and its denial of the signifier; with fetishists, fantasy and acting out replace the denial of psychic pain (of pain's psychic representatives) following upon the loss of biopsychic balance due to object loss.

The denial of the signifier is shored up by a denial of the father's function, which is precisely to guarantee the establishment of the signifier. Maintained in his function of ideal father or imaginary father, the depressive's father is deprived of phallic power, now attributed to the mother. Attractive or seductive, fragile and engaging, such a father holds the subject within suffering but does not allow the possibility of a way out by means of idealizing the symbolic. When this takes place, idealization relies on the maternal father and follows the path to sublimation.

*Negation* (*Verneinung*), whose ambiguities Freud maintains and emphasizes in his essay *Die Verneinung*,<sup>11</sup> is a process that inserts an aspect of desire and unconscious idea into consciousness. "The outcome of this is a kind of intellectual acceptance of the repressed, while at the same time what is essential to the repression persists." "With the help of the symbol of negation, thinking frees itself from the restrictions of repression. . . ." "Thus the content of a repressed image or idea can make its way into consciousness, on condition that it is *negated*." This psychic process, which can be observed in patients' defenses against their unconscious desires ("no, I don't love him or her" would signify an acknowledgment of that love in a precisely denied fashion), would be the same as the one that produces the logical and linguistic symbol.

I deem negativity to be coextensive with the speaking being's psychic activity. Its various dispositions, such as

negation, denial, and repudiation (which can produce or modify repression, resistance, defense, or censorship), distinct as one might be from another, influence and condition one another. There is no "symbolic gift" without splitting, and verbal ability is potentially a bearer of fetishism (if only that of symbols themselves) and psychosis (even when remitted).

Nevertheless, the various psychic structures are diversely dominated by the negativity process. If *repudiation* (*Verwerfung*) were to prevail over negation the symbolic framework would collapse and erase reality itself: that is the pattern of psychosis. The melancholy person who can go as far as repudiation (melancholy psychosis) is, during the illness' mild development, characterized by the prevalence of *denial* over *negation*. The semiotic foundations (affect and drive representatives of loss and castration) underlying linguistic signs are denied, and the intrapsychic value of the latter for creating sense for the subject is consequently annihilated. The result is that traumatic memories (the loss of a loved relative during childhood, some other, more recent wound) are not repressed but constantly evoked as the *denial* of *negation* prevents the work of repression, at least of its representative part. As a consequence, that evocation, that representation of the repressed does not lead to the loss' symbolic *elaboration*, for signs are unable to pick up the intrapsychic primary inscriptions of the loss and to dispose of it through that very elaboration; on the contrary, they keep turning it over, helplessly. Depressed people know that their moods determine them thoroughly but do not allow such moods to pass into their speech. They know they suffer because they are separated from their narcissistic motherly coating but ceaselessly maintain their omnipotence over a hell that is not to be lost. They know their mothers have no penis

but at the same time they have it displayed not only in daydreams but in their "liberated," "shameless" speech, neutral in fact, and in competition, often a death-bearing one, with that phallic power.

At the level of the sign, splitting separates the *signifier* from the *referent* as well as from the drive-related (semiotic) *inscriptions* and devalorizes all three.

At the narcissistic level splitting maintains the omnipotence at the same time as the destructiveness and the anguish of annihilation.

At the level of oedipal desire it wavers between the fear of castration and the fantasy of phallic omnipotence for the other as for the self.

Everywhere denial effects splittings and *devalorizes* representations and behaviors as well.

Unlike what happens with psychotics, however, those who are depressed maintain a paternal signifier that is disowned, weakened, ambiguous, devalorized, but nevertheless persistent until asymbolia shows up. Until they are wrapped up in that shroud and both father and subject are carried away into the solitude of mutism, depressed persons do not forget how to use signs. They keep them, but the signs seem absurd, delayed, ready to be extinguished, because of the splitting that affects them. For instead of bonding the affect caused by loss, the depressed sign disowns the affect as well as the signifier, thus admitting that the depressed subject has remained prisoner of the nonlost object (the Thing).

#### *The Affective Perverseness of the Depressed*

If the *denial* of the *signifier* with depressed persons reminds one of the process of perversion, two remarks seem necessary.

First, in depression, denial has a greater power than perverse denial and affects *subjective identity* itself, not only the *sexual identity* called into question by inversion (homosexuality) or perversion (fetishism, exhibitionism, etc.). Denial annihilates even the introjections of depressive persons and leaves them with the feeling of being worthless, "empty." By belittling and destroying themselves, they exhaust any possibility of an object, and this is also a roundabout way of preserving it . . . elsewhere, untouchable. The only traces of object constancy that depressive people maintain are in affects. The affect is the partial object of depressive persons; it is their "perversion," in the sense of a drug that allows them to insure a narcissistic homeostasis by means of a nonverbal, unnameable (hence untouchable and omnipotent) hold over a nonobjectal Thing. Thus the depressive affect—and its verbalization in analyses and also in works of art—is the perverse display of depressed persons, their ambiguous source of pleasure that fills a void and evicts death, protecting the subject from suicide as well as from psychotic attack.

In similar fashion, the various perversions appear, from this standpoint, as the other facet of depressive denial. Both depression and perversion, according to Melanie Klein, avoid elaborating the "depressive position."<sup>12</sup> Nevertheless, inversions and perversions seem borne by a denial that doesn't affect subjective identity while disturbing sexual identity and allowing for the creation (comparable to a fictional production) of a narcissistic libidinal homeostasis through recourse to autoeroticism, homosexuality, fetishism, exhibitionism, and so forth. Such acts and relations with partial objects preserve the subject and its object from total destruction and provide, with narcissistic homeostasis, a vitality that thwarts Thanatos. Depression is thus bracketed but at the cost of a dependency on perverse

theater, often experienced as atrocious; on that stage one sees a parade of omnipotent relations and objects that prevent a confrontation with castration and shield from the pain of pre-oedipal separation. The weakness of the fantasy that is supplanted by acting out bears witness to the continuousness of the denial of the signifier at the level of mental operations in perversions. That feature is at one with the symbolic weakness as experienced by depressive persons as well as manic excitement through acts that become wild only if they are deemed insignificant.

The alternation of perverse and depressive behavior within the neurotic realm of the melancholy/depressive set is frequent. It points to the articulation of the two structures in a same operation (that of denial) having varied intensities bearing on different elements of the subjective structure. Perverse denial has not affected autoeroticism and narcissism. The latter can therefore be mobilized to oppose emptiness and hatred. Depressive denial, on the other hand, affects even the possibilities of a *representation of narcissistic coherence*, hence depriving the subject of its autoerotic exultation, of its "jubilatory assumption." At that point there remains only the masochistic domination of narcissistic folds by a mediationless superego who condemns the affect to remain without object, even a partial one, and display itself to consciousness only as widowed, plunged into mourning, full of pain. Such affective pain, resulting from denial, is *meaning without signification*, but it is used as a shield against death. When that shield also gives way, what remains as the only possible concatenation or act is the act of severance, of un-concatenation, which imposes the non-meaning of death; this constitutes a *challenge* to the others thus rediscovered as rejects or a narcissistic *strengthening* of the subject that one acknowledges (because the fateful act has been carried out) as

having always been outside the parental symbolic pact, that is, located where denial (be it parental or its own) had pinned it.

Thus the denial of negation that was seen to be central to the avoidance of the "depressive position" with depressed persons does not necessarily endow that affection with a perverse coloring. The depressed are nonconscious perverts; it is even to their advantage to be nonconscious, for their taking action, which no symbolization appears to satisfy, can be so paroxysmal. True, the delights of suffering can lead to a morose suffering not unfamiliar to monks and that Dostoyevsky, closer to us in time, has exalted.

It is mainly in its manic phase, characteristic of bipolar forms of depression, that *denial* takes on its full strength and appears in broad daylight. Admittedly, it has always been there, but secretly: as sorrow's underhanded, consoling companion, the denial of negation constructed a dubious meaning and turned dismal language into an unbelievable seeming. It called attention to its existence in the detached speech of depressed persons who have at their disposal a trick they do not know how to handle: beware of still waters and overly obedient children . . . With manic persons, however, denial goes beyond the double repudiation that supports sadness: it walks on stage and becomes the tool that builds a shield against loss. Far from being satisfied with elaborating a false language, denial henceforth erects variegated arrays of substitutive erotic objects; we are familiar with widows' or widowers' erotomania, the orgiastic compensations for narcissistic wounds connected with disease or disability, and so forth. Aesthetic exultance, rising by means of ideal and artifice above ordinary constructions suitable to the standards of natural language and trivialized social code, can partake of this manic activity. If it remains at that level the work will

stand revealed in its falsity—ersatz, imitation, or carbon copy. On the contrary, the work of art that insures the rebirth of its author and its reader or viewer is one that succeeds in integrating the artificial language it puts forward (new style, new composition, surprising imagination) and the unnamed agitations of an omnipotent self that ordinary social and linguistic usage always leave somewhat orphaned or plunged into mourning. Hence such a fiction, if it isn't an antidepressant, is at least a survival, a resurrection . . .

#### *Arbitrary or Empty*

Persons in despair become hyperlucid by nullifying negation. A signifying sequence, necessarily an arbitrary one, will appear to them as heavily, violently arbitrary; they will think it absurd, it will have no meaning. No word, no object in reality will be likely to have a coherent concatenation that will also be suitable to a meaning or referent.

The arbitrary sequence perceived by depressive persons as absurd is coextensive with a loss of reference. The depressed speak of nothing, they have nothing to speak of: glued to the Thing (*Res*), they are without objects. That total and unsignifiable Thing is insignificant—it is a mere Nothing, their Nothing, Death. The chasm that settles in between subject and signifiable objects is translated into the impossibility for concatenations to signify. Such an exile, however, reveals a chasm in the very subject. On the one hand, objects and signifiers, denied to the extent that they are identified with life, assume the value of nonmeaning: language and life have no meaning. On the other hand, on account of splitting, an intense, extravagant value is attributed to the Thing, to Nothing—to the

unsignifiable and to death. Depressed speech, built up with absurd signs, slackened, scattered, checked sequences, conveys the collapse of meaning into the unnameable where it founders, inaccessible and delightful, to the benefit of affective value riveted to the Thing.

Denial of negation deprives the language signifiers of their role of making sense for the subject. While they have a signification in themselves, such signifiers are experienced by the subject as *empty*. That is because they are *not bound* to semiotic imprints (drive-related representatives and affect representations). It follows that such archaic psychic inscriptions, once they are set free, can be used in projective identification as quasi-objects. They give rise to acting out, which replaces language in depressive persons (see chapter 3). The surge of mood, up to the stupor that invades the body, is a return of acting out upon the very subject: such overwhelming mood is an action that is not taken on account of the denial that involves the signifier. Moreover, the feverish defensive activity that shrouds the disconsolate sadness of so many depressed persons, before and up to murder or suicide, is a projection of symbolization remainders; relieved of their meaning through denial, their actions are dealt with as quasi-objects that are expelled outward or turned back upon the self with the greatest indifference of a subject benumbed by denial.

The psychoanalytic hypothesis of the denial of the signifier with depressive persons, which does not exclude resorting to biochemical means to remedy neurological deficiencies, reserves the possibility of reinforcing the subject's cognitive capabilities. By analyzing—that is, by dissolving—the denial mechanism wherein depressive persons are stuck, analytic cure can implement a genuine “graft” of symbolic potential and place at the subject's disposal dual discursive strategies working at the intersec-

tion of affective and linguistic inscriptions, at the intersection of the semiotic and the symbolic. Such strategies are real counterdepressant reserves that the optimal interpretation within analysis places at the disposal of the depressive patient. At the same time, considerable empathy is required between the analyst and the depressed patient. On that basis, vowels, consonants, or syllables may be extracted from the signifying sequence and put together again in line with the overall meaning of the discourse that identification with the patient has allowed the analyst to discover. This is an infra- and translinguistic level that must often be taken into consideration and linked with the “secret” and the unnamed affect of the depressive.

#### *Dead Language and the Thing Buried Alive*

The spectacular collapse of meaning with depressive persons—and, at the limit, the meaning of life—allows us to assume that they experience difficulty integrating the universal signifying sequence, that is, language/In the best of cases, speaking beings and their language are like one: is not speech our “second nature”? In contrast, the speech of the depressed is to them like an alien skin; melancholy persons are foreigners in their maternal tongue. They have lost the meaning—the value—of their mother tongue for want of losing the mother. The dead language they speak, which foreshadows their suicide, conceals a Thing buried alive. The latter, however, will not be translated in order that it not be betrayed; it shall remain walled up within the *crypt* of the inexpressible affect, anally harnessed, with no way out.<sup>13</sup>

*A woman patient, prone to frequent bouts of melancholia, came to our first meeting wearing a brightly colored blouse on*

which the word "house" was printed countless times. She spoke to me of her worries concerning her apartment, her dreams of buildings made of heterogeneous materials, and an African house, the heavenly abode of her childhood, lost by the family under dramatic circumstances. "You are in mourning for a house," I told her.

"A house," she answered, "I don't understand, I don't see what you mean, words fail me!"

Her speech became voluble, brisk, feverish, but tense with cold, abstract excitement. She never ceased using language: "My job as teacher," she said, "forces me to talk continuously, but I explain other people's lives, I'm not involved; and even when I speak of my own, it's as if I spoke of a stranger." The object of her sadness is inscribed in the pain of her skin and her flesh, even in the silk of her tight-fitting blouse. It does not, however, work its way into her mental life, it flees her speech, or rather, Anne's speech has abandoned sorrow and her Thing in order to build up its logic and un-affected, split coherence. As one flees suffering by throwing oneself headlong into a job that is as successful as it is unsatisfactory.

The abyss that, with depressive persons, separates language from affective experience reminds one of a precocious narcissistic trauma. It might have drifted into psychosis, but the superego's protection has in fact stabilized it. A rather unusual intelligence and secondary identification with paternal or symbolic agency have contributed to that stability. Consequently, the depressed are lucid observers, watching day and night over their misfortunes and discomforts, and such an inspective obsession leaves them perpetually dissociated from their affective life during the "normal" times between bouts of melancholia. Just the same, they do give the impression that their symbolic armor hasn't been integrated, their defensive shell

not introjected. Their speech is a mask—a beautiful facade carved out of a "foreign language."

### The Tone That Calls the Song

Nevertheless, if depressive speech avoids sentential signification, its meaning has not completely run dry. It occasionally hides (as will be seen in the following example) in the tone of the voice, which one must learn to understand in order to decipher the meaning of affect. Research on tonal modulations of depressed speech already does and will in the future teach us a great deal about some depressive persons who, in their discourse, appear unaffected but, on the contrary, maintain a strong, variegated emotionalism concealed in their intonation; or else it teaches us about others, whose "flattening of affect" even reaches the tonal level that stays (at the same time as the sentence sequence that is broken up into "nonrecoverable elisions") monotonous and weighed down with silences.<sup>14</sup>

In the analytic cure, the importance of speech's suprasegmental level (intonation, rhythm) should lead the analyst, on the one hand, to interpret the voice, and on the other, to disarticulate the signifying sequence that has become banal and lifeless—the purpose being to extract the infrasingnifying meaning of depressive discourse that is hidden in fragments of lexical items, in syllables, or in phonic groups yet strangely semanticized.

*During analysis Anne complains of states of despondency, despair, of losing the taste for life; this frequently leads her to withdraw for entire days to her bed, refusing to speak or to eat (anorexia can alternate with bulimia), often ready to swallow a vial of sleeping pills—and yet she has never taken that fateful step. This intellectual woman, perfectly integrated in a team of*

anthropologists, nevertheless always underrates her profession and accomplishments, describing herself as "incompetent," "useless," "unworthy," and so forth. At the very outset of the cure I analyzed the conflictual relationship with her mother and noted that the patient effected a true swallowing of the hated maternal object thus preserved deep within herself and changed into a source of rage against herself and of a feeling of inner emptiness. Nonetheless, I had the impression, or as Freud says, the countertransferential conviction that our verbal exchange led to a rationalization of the symptoms but not to a working through (*Durcharbeitung*). Anne confirmed me in that conviction: "I speak," she would often say, "as if at the edge of words, and I have the feeling of being at the edge of my skin, but the bottom of my sorrow remains unreachable."

I may have interpreted those words as a hysterical refusal of the castrating exchange with me. That interpretation, however, did not seem sufficient, considering the intensity of the depressive complaint and the extent of the silence that either settled in or broke up her speech in "poetic" fashion, making it, at times, undecipherable. I said, "At the edge of words, but at the heart of the voice, for your voice is uneasy when you talk about that incommunicable sadness." This interpretation, whose seductive value one clearly perceives, may have, in the case of a depressive patient, the sense of going through the defensive, empty exterior of the linguistic signifier and looking for mastery (*Bemächtigung*) over the archaic object (the preobject, the Thing) on the level of vocal inscriptions. Now, it so happens that this patient, in the early years of her life, suffered from serious skin diseases and was probably deprived of the contact with her mother's skin and identification with the mother's face in the mirror. I continued: "Since you couldn't touch your mother you hid beneath your skin, 'at the edge of the skin'; and in that hiding place you enclosed your desire and hatred of her in the sound of your voice, since you heard hers from afar."

We are here in the area of primary narcissism where the image of the self is built up and where, precisely, the image of the depressive future does not succeed in knitting itself into verbal representation. That is because the mourning for the object is not accomplished in such a representation. On the contrary, the object is as if buried—and dominated—by jealously kept affects, finally concealed in vocalizations. I believe the analyst can and must, through interpretation, reach that vocal level of discourse without fearing to be intrusive. By giving a meaning to affects that were kept secret on account of the mastery over the archaic preobject, interpretation recognizes that affect as well as the secret language the depressive patient endows it with (in this instance, vocal modulation), thus opening up a channel for it at the level of words and secondary processes. The latter—hence language—considered empty up to this point because cut off from affective and vocal inscriptions, are revitalized and may become a space of desire, that is, of meaning for the subject.

Another example taken from the speech of the same patient will show the extent to which an apparent destruction of the signifying sequence removes it from the denial in which the depressed patient was locked and endows it with the affective inscriptions that she is dying to keep secret. Upon returning from a vacation in Italy, Anne related a dream to me. There was a trial, like [Klaus] Barbie's trial: I handled the prosecution, everyone was convinced. Barbie was found guilty. She felt relieved, as if she herself had been freed of possible torture on the part of some torturer or other, but she wasn't there, she was elsewhere, it all seemed hollow to her, she preferred to sleep, founder, die, never wake up, in a grief-laden dream that nonetheless attracted her irresistibly, "without any image". . . I hearkened to the manic excitement surrounding torture that took hold of Anne in her relationship with her mother and sometimes with her partners in between her depressions. But I also heard, "I am elsewhere, a dream of sweetness and pain without image," and I

thought of her depressive complaint of being ill, of being barren. I said: "On the surface there are torturers [tortionnaires]. Further away, however, or elsewhere, where your sorrow lies, there is perhaps: Torse-io-naître/pas naître [torso-I-to be born/not to be born]."

I broke up the word *tortionnaire* into its component parts—I tortured it, so to speak, I inflicted upon it the violence that I heard buried in the often devitalized, neutral speech of Anne herself. Nevertheless, the torture that I revealed in the full daylight of words came from my collusion with her pain—from what I believe to be my close, tonic, rewarding listening to her unnamed discomforts, those black holes of pain of which Anne knows the affective meaning but not the significance. The torso is undoubtedly her own but is coiled up with her mother's in the passion of unconscious fantasy; two torsos that didn't touch when Anne was a baby and now unwind in a rage of words during the two women's quarrels. She—io—wants to be born through analysis, to give herself another body. But joined without verbal representation to her mother's torso, she cannot name that desire, she does not grasp the significance of that desire. Now, if one does not know the significance of a desire, this means that one is without that very desire. It means one is the prisoner of affect, of the archaic Thing, of the primary inscriptions of affects and emotions. That is precisely where ambivalence holds sway and hatred for the mother-Thing is at once changed into self-depreciation . . . Anne went on to confirm my interpretation: she abandoned the manic problematics of torture and persecution in order to speak of the source of her depression. At that time she was overcome by the fear of being barren and the underlying desire to give birth to a girl: "I dreamt that a little girl came out of my body, the spitting image of my mother, while I have often told you that when I close my eyes I can't bring her face to mind, as if she had died before I was born and carried me along into that death. And now here I am giving birth and it is she who lives again. . . ."

### Acceleration and Diversity

Nevertheless, the sequence of linguistic representations, dissociated as it might be from drive-related and affective representatives, can assume with depressed persons considerable associative originality, in keeping with the cycles' rapidity. The psychomotor retardation of depressive persons may be accompanied, contrary to appearances of passivity, by an accelerated, creative cognitive process—witness the studies bearing on the very singular and inventive associations made by depressed persons starting from word lists submitted to them.<sup>15</sup> Such hyperactivity with signifiers reveals itself particularly by connecting distant semantic fields and recalls the puns of hypomanics. It is coextensive with the cognitive hyperlucidity of depressed persons, but also with the manic-depressive's inability to decide or to choose.

Lithium treatment, mastered in the sixties by the Danish doctor Hans Jacob Schou, stabilizes the basic mood and also verbal association and, while maintaining, or so it seems, the originality of the creative process, slows it down and makes it less productive.<sup>16</sup> One might thus agree with those who have conducted those experiments and say that lithium interrupts the diversity process and holds the subject within a word's semantic field, ties him to a significance, and perhaps stabilizes him around an object-referent. On the other hand, one could deduce from those experiments (note that they are limited to depressions that respond to lithium treatment) that certain forms of depression are bouts of associative accelerations that destabilize the subject and afford it an escape route away from confrontation with a stable signification or a steady object.



*A Past That Does Not Pass By*

As the time in which we live is the time of our discourse, the alien, retarded, or vanishing speech of melancholy people leads them to live within a skewed time sense. It does not pass by, the before/after notion does not rule it, does not direct it from a past toward a goal. Massive, weighty, doubtless traumatic because laden with too much sorrow or too much joy, a *moment* blocks the horizon of depressive temporality or rather removes any horizon, any perspective. Riveted to the past, regressing to the paradise or inferno of an unsurpassable experience, melancholy persons manifest a strange memory: everything has gone by, they seem to say, but I am faithful to those bygone days, I am nailed down to them, no revolution is possible, there is no future . . . An overinflated, hyperbolic past fills all the dimensions of psychic continuity. Such a fancy for ephemeral memory is also undoubtedly a means for capitalizing on the narcissistic object, of brooding over it within the enclosure of an exitless personal vault. This particularity of melancholy temporization is the essential datum on the basis of which concrete disturbances of nycthemeral rhythm can develop, as well as the precise dependency of bouts of depression on the specific biological rhythm of a given subject.<sup>17</sup>

Let us remember that the idea of viewing depression as dependent on a *time* rather than a *place* goes back to Kant. Considering the specific variant of depression constituted by nostalgia, Kant asserted that nostalgic persons did not desire the place of their youth but their youth itself; their desire is a search for the *time* and not for the *thing* to be recovered.<sup>18</sup> The Freudian notion of *psychic object*, to which depressive persons would be riveted, partakes of the same

concept: the psychic object is a memory event, it belongs to lost time, in the manner of Proust. It is a subjective construct, and as such it falls within the realm of a memory, elusive to be sure and renewed in each current verbalization, that nevertheless is from the start located not within a physic space but within the imaginary and symbolic space of the psychic system. When I say that the object of my grief is less the village, the mother, or the lover that I miss here and now than the blurred representation that I keep and put together in the darkroom of what thus becomes my psychic tomb, this at once locates my ill-being in the imagination. A dweller in truncated time, the depressed person is necessarily a dweller in the imaginary realm.

Such a linguistic and temporal phenomenology discloses, as I have often emphasized, an unfulfilled mourning for the maternal object.

*Projective Identification or Omnipotence*

In order better to account for it, we must come back to the notion of *projective identification* suggested by Melanie Klein. The study of very young children, and also the dynamics of psychosis, leads one to conjecture that the most archaic psychic processes are the projections of the good and bad components of a not-yet self onto an object not yet separated from it, with the aim less of attacking the other than of gaining a hold over it, an omnipotent possession. Such oral and anal omnipotence is perhaps the more intense as certain biopsychological particularities hamper the ideally wished for autonomy of the self (psychomotor difficulties, auditory or visual disorders, various illnesses, etc.). The behavior of mothers and fathers, overprotective and uneasy, who have chosen the child as a

narcissistic artificial limb and keep incorporating that child as a restoring element for the adult psyche intensifies the infant's tendency toward omnipotence.

Now, the semiotic means through which this omnipotence expresses itself is a preverbal semiology—gestural, motor, vocal, olfactory, tactile, auditory. Primary processes govern that expression of archaic domination.

#### Omnipotent Meaning

The subject of a *meaning* is already there, even if the subject of linguistic *signification* has not yet been constructed and awaits the depressive position in order to come into being. The meaning that is already there (one can assume it to be supported by a precocious and tyrannical super-ego) is made up of gestural, acoustic, phonatory rhythms and devices where pleasure is articulated along sensory series that constitute a first differentiation from the Thing, which is exciting as well as threatening, and from autosen-sual confusion. Thus the continuum of the body, which is in the process of becoming "one's own and proper body," is articulated as an organized discontinuity, exercising a precocious and primary mastery, flexible yet powerful, over the erotogenic zones, blended with the preobject, the maternal Thing. What appears on the psychological level as omnipotence is *the power of semiotic rhythms, which convey an intense presence of meaning in a presubject still incapable of signification.*

What we call meaning is the ability of the *infans* to record the signifier of parental desire and include itself therein in his own fashion; he does so by displaying the semiotic abilities he is endowed with at that moment of his development and which allow him a mastery, on the level of primary processes, of a "not yet other" (of the

Thing) included in the erotogenic zones of such a semi-otizing *infans*. Nevertheless, the omnipotent meaning remains a "dead letter" if it is not invested in signification. It will be the task of analytic interpretation to search for depressive meaning in the vault where sadness has locked it up with the mother, and tie it to the signification of objects and desires. Such an interpretation overthrows the omnipotence of meaning and amounts to working through the depressive position that was denied by the subject having a depressive structure.

It will be recalled that separation from the object starts the so-called depressive phase. Upon losing mother and relying on negation, I retrieve her as sign, image, word.<sup>19</sup> Nevertheless, the omnipotent child does not give up the ambiguous delights of the paranoid-schizoid position of a former projective identification during which all psychic impulses were located within an undissociated, fusional other. Or else the child refuses separation and mourning and, instead of tackling the depressive position and language, takes refuge in a passive position, in fact a schizo-paranoid one, dominated by projective identification—the refusal to speak that underlies a number of language retardations is in fact an assertion of omnipotence and thus of primary ascendancy over the object. Or else, still, the child discovers a compromise in *denial* of the negation, which generally leads to working through mourning by establishing a symbolic system (particularly language). The subject then freezes his unpleasant affects like all others and preserves them in a *psychic inside* thus constituted once and for all as distressed and inaccessible. This painful innerness, put together with semiotic markings but not with signs,<sup>20</sup> is the invisible face of Narcissus, the secret source of his tears. The wall of the *denial of negation* then separates the stirrings of the subject from the symbolic makeups

that he nonetheless acquires, often even brilliantly, thanks precisely to the repeated negation. Melancholy persons, with their despondent, secret insides, are potential exiles but also intellectuals capable of dazzling, albeit abstract, constructions. With depressive people, *denial of the negation* is the logical expression of omnipotence. Through their empty speech they assure themselves of an inaccessible (because it is "semiotic" and not "symbolic") ascendancy over an archaic object that thus remains, for themselves and all others, an enigma and a secret.

#### *Sadness Holds Back Hatred*

A symbolic construct acquired in such fashion, a subjectivity erected on that basis can easily collapse when the experience of new separations, or new losses, revives the object of primary denial and upsets the omnipotence that had been preserved at the cost of the denial. The linguistic signifier, which was a seeming, is then swept away by the disturbances like a sea wall by ocean breakers. As primary inscription of the loss that persists beyond denial, the affect swamps the subject. My sadness affect is the ultimate yet *mute* witness to my having, in spite of all, lost the archaic Thing of omnipotent ascendancy. That sadness is the final filter of aggressiveness, the narcissistic restraint of a hatred that is unacknowledged not because of simple moral or superego decency, but because in sadness the self is yet joined with the other, it carries it within, it introjects its own omnipotent projection—and joys in it. Sadness would thus be the negative of omnipotence, the first and primary indication that the other is getting away from me, but that the self, nevertheless, does not put up with being abandoned.

The surge of affect and primary semiotic processes comes

into conflict, in depressive persons, with the linguistic armor (which I have called alien or "secondary"), as well as with symbolic constructs (apprenticeships, ideologies, beliefs). Retardations or accelerations turn up, expressing the rhythm of the normally controlled primary processes and, undoubtedly, biophysiological rhythm. Discourse no longer has the capacity to break and even less so to change that rhythm, but on the contrary allows itself to be changed by affective rhythm to the extent of fading into muteness (through too much retardation, or too much acceleration, making the choice of action impossible). When the struggle between imaginary creation (art, literature) and depression is carried out precisely on that frontier of the symbolic and the biological we see indeed that the narrative or the argument is ruled by primary processes. Rhythms, alliterations, condensations shape the transmission of message and data. That being the case, would *poetry* and, more generally, the style that bears its secret imprint bear witness to a (for the time being) conquered depression?

We are thus led to take at least three parameters into consideration in order to describe psychic and, particularly, depressive modifications: *symbolic processes* (the grammar and logic of discourse) and *semiotic processes* (displacement, condensation, alliterations, vocal and gestural rhythms, etc.) along with the supports constituted by *biophysiological rhythms* of transmission and stimulation. Whatever endogenous factors may condition the latter, and however powerful the pharmacological means of effecting an optimal transmission of nerve stimulation may be, the problem of primary and above all secondary integration of stimulation remains.

It is precisely at this place that psychoanalytic treatment comes in. Identifying pleasure and displeasure in their

minute meanderings—and this at the very heart of the transference position, which replicates the primitive conditions of omnipotence and the simulated separation from the object—remains our only means of access to melancholia, that paradoxical formation of the subject. Paradoxical indeed, for the subject, at the cost of a *negation*, had opened up the doors of the symbolic only to shut them through its *denial*, keeping for himself the unnameable jouissance of an omnipotent affect. There is perhaps a chance, then, for analysis to transform such subjectivation and endow discourse with a modifying power over the fluctuations of primary processes and even bioenergetic transmissions, by favoring a better integration of semiotic agitation within the symbolic fabric.

#### *The Western Fate of Conveyance*

To posit the existence of a primal object, or even of a Thing, which is to be conveyed through and beyond a completed mourning—isn't that the fantasy of a melancholy theoretician?

Certainly the primal object, the "in-itself" that always remains to be conveyed, the ultimate cause of conveyability, exists only for and through discourse and the already constituted subject. Because what is conveyed is already there, the conveyable can be imagined and posited as in excess and incommensurable. Positing the existence of that other language and even of an other of language, indeed of an outside-of-language, is not necessarily setting up a preserve for metaphysics or theology. The postulate corresponds to a psychic requirement that Western metaphysics and theory have had, perhaps, the good luck and audacity to represent. That psychic requirement is certainly not universal; Chinese civilization, for instance, is not a civilization of the conveyability of the thing in itself;

it is rather one of sign repetition and variation, that is to say, of transcription.

The obsession with the primal object, the object to be conveyed, assumes a certain appropriateness (imperfect, to be sure) to be considered possible between the sign and not the referent but the nonverbal experience of the referent in the interaction with the other. I am able to name truly. The Being that extends beyond me—including the being of affect—may decide that its expression is suitable or nearly suitable. The wager of conveyability is also a wager that the primal object can be mastered; in that sense it is an attempt to fight depression (due to an intrusive preobject that I cannot give up) by means of a torrent of signs, which aims precisely at capturing the object of joy, fear, or pain. Metaphysics, and its obsession with conveyability, is a discourse of the pain that is stated and relieved on account of that very statement. It is possible to be unaware of, to deny the primal Thing; it is possible to be unaware of pain to the benefit of signs that are written out or playful, without innerness and without truth. The advantage of those civilizations that operate on the basis of such a model is that they are able to mark the immersion of the subject within the cosmos, its mystical immanence with the world. But, as a Chinese friend recognized, such a culture is without means for facing the onset of pain. Is that lack an advantage or a weakness?

Westerners, on the other hand, are convinced they can convey the mother—they believe *in her*, to be sure, but in order to convey her, that is, to betray her, transpose her, be free of her. Such melancholy persons triumph over the sadness at being separated from the loved object through an unbelievable effort to master signs in order to have them correspond to primal, unnameable, traumatic experiences.

Even more so and finally the belief in conveyability

("mother is nameable, God is nameable") leads to a strongly individualized discourse, avoiding stereotypes and clichés, as well as to the profusion of personal styles. But in that very practice we end up with the perfect *betrayal* of the unique and in-itself Thing (the *Res divina*): if all the fashions of naming it are allowable, does not the Thing posited in itself become dissolved in the thousand and one ways of naming it? The posited conveyability ends up with a multiplicity of possible conveyances. The Western subject, as potential melancholy being, having become a relentless conveyor, ends up a confirmed gambler or potential atheist. The initial belief in conveyance becomes changed into a belief in stylistic performance for which the near side of the text, its other, primal as it might be, is less important than the success of the text itself.

3

*Illustrations of  
Feminine Depression*