THE CONCEPTION OF REGRESSION IN PSYCHOLOGICAL MEDICINE.

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REGRESSION is a term used in modern psychology, particularly in the teachings of Jung, of Zurich, to describe a mode of reaction to the environment. It implies backward movement, not in space, but in time. It is the psychological opposite of that forward striving movement of life that is essential to the proper growth of individuality. In the neurotic we constantly encounter the process of regression.

The conception depends upon an energetic view of the human psyche. There is a constant moving forwards or backwards of the psychic stream in accordance with the aspect that reality wears. If reality is favourable the stream flows forwards; if reality is unfavourable the stream flows backwards. In what way it flows backwards will be discussed in a later passage. Immediately the stream begins to flow backwards intrapsychic tension occurs, caused by the accumulation of dammed-back psychic energy. It is this accumulation which makes possible a strong effort later on to overcome the obstruction in reality. Jung has compared it with the drawing back before a leap. This kind of regression is normal and is constantly taking place. Regression, however, may go beyond normal limits and become pathological. In such cases a limit of elasticity, variable in different types, has been passed and spontaneous recovery is improbable. A neurosis results.

Janet's Views of Regression.

The question of regression can first be considered from the point of view held by Janet with regard to the neuroses. He approaches the subject from the biological aspect. He conceives of function as having a superior and an inferior mode of expression. The superior expression of function is connected with proper adaptation to present circumstances. The inferior expression of function is connected with a mode of adaptation that is ineffective. In all of us two possible ways of behaving exist, one superior and the other inferior, and Janet considers that in the neuroses:—

"In place of these superior operations there are developed physical, mental, and, above all, emotional disturbances. This is only the tendency to replace the superior operations by an exaggeration of certain inferior operations, and especially by gross visceral disturbances."

In Jung's phrase, "the archaic replaces the recent function which has failed." From this point of view, therefore, the neurotic system is an anachronism in the life of the individual. It is the revival or reanimation of a mode of adaptation that has no longer a general human validity. Claparède, in discussing the definition of hysteria uses the phrase "tendance à la réversion."

Views of Hughlings Jackson: Organic Regression.

The idea of the higher and lower aspects of function was taught by Hughlings Jackson. He was never weary of insisting upon the view that lesions of the brain were to be regarded from the negative and the positive side. The actual destruction of nervous tissue constitutes the negative factor. The release of other parts of the nervous system from the control of the area destroyed constitutes the positive factor. In speaking of insanity he urged that disease of the brain is only responsible for the negative mental element.

"Disease of the highest centres producing loss of its function or destroying it answers to the negative mental element in a case of insanity; whilst the activity of the lower intact ranges answers to the positive mental element. The loss of function or destruction of the highest range of the highest centres is not only a loss, but is also a taking off of control from the lower ranges; the 'taking off' of the higher is a 'letting go' of the lower. The disease may be said to be 'constructively accountable' for the over-activity of the lower ranges, for had not disease destroyed the highest range, that highest range would have continued to control the lower ranges."

We are not, therefore, to consider the clinical picture of organic nervous disease from the standpoint of what is destroyed, but from what remains. What remains is now over-active. The fact that the schoolmaster is away will lead to uproar in the class-room. The uproar corresponds to

the symptoms, or the positive side; the absence of the schoolmaster corresponds to the destructive lesion or negative factor.

It is possible to consider the theory of Hughlings Jackson from the physical and from the psychological standpoint. In the physical sense he conceives of neurological levels whose highest ranges are cortical. As these are destroyed from above downwards lower levels are released and become dominant. This can be looked upon as regression in terms of space. It is *organic regression*, occurring in the physical instrument or brain. Owing to the release and over-functioning of lower levels, we witness the re-animation of reactions that belong to the evolutionary past. For example, reflex activities are released and postures are assumed that reveal the history of the organism in a phylogenetic sense. It is a process of uncovering the past, and is historical regression. We live on the topmost levels of an ancient structure, and we are normal so long as we retain this position. But we must not conceive of the structure as finished, but as ever growing.

Psychological Regression.

It is only a step from the conception of organic regression to that of psychological regression. In place of looking for an organic lesion in the brain as the cause we must fix our eyes upon the situation in reality to which the individual is incapable of adapting himself normally and from which he begins to retreat. If the superior functions of adaptation are in abeyance, then we must expect the appearance of an inferior mode of adaptation. The ranges of superior adaptation are abandoned, and there is a reanimation of inferior ranges. The psychic energy that should have functioned through the highest ranges regresses and energises a psychological system that is inferior.

In what sense is it *inferior*? If we really do believe in the evolution of the body, then we must also believe in the evolution of the mind. Judging from the clinical picture of organic regression alone, we might expect this inferiority to have some reference to past attitudes which have been left behind. In other words, we might expect an ontogenetic regression, and a reanimation of modes of adaptation that belong to the period of childhood or infancy. This does not mean that pure functional regression, unaccompanied by organic lesion, can only proceed backwards along the path of the personal history of the individual, and never implicate the deeper racial history. I believe there is a psychological atavism that can be reached by a regressive adaptation to life which can be very deep and go below human levels. In such cases the superior functions are never called into use and the adaptations are very circumscribed, and various animal characteristics begin to appear in the body.

I may be allowed at this point to give some simple illustrations of the moving backwards of the psychic stream with the consequent reanimation of the past.

CASE 1.—The patient, an officer, who had been lightly wounded in the arm, and had shown symptoms of shock, including slight battle-dreams, was engaged for some months in administrative work connected with a munition factory. During this period he had no battle-dreams and enjoyed a fair degree of health. His work, however, began to grow difficult. Disagreeable factors of a personal nature appeared. Coincident with this unfavourable aspect of reality he began to have battle-dreams again, and other symptoms reappeared.

This very simple example suffices to show the reanimation which characterises regression. If he had been able to overcome the problems with which he was faced no backward movement of the psychic stream would have occurred, and in place of battle-dreams and nervous symptoms there would have been achievement and progress.

CASE 2.—The patient had developed symptoms of profound shock (regression) on the battlefield. He had a bad stammer, tremor, and vivid battle-dreams, and was almost incapable of any effort of attention. He gradually improved and the battle-dreams disappeared. Three days before his medical board his stammer got worse and the battle-dreams reappeared. The reason of this was not difficult to trace. He had been offered a special post which he desired, and everything in the immediate future depended on the decision of the medical board. Reality had become uncertain and doubtful, and slight regression had taken place.

In the above two cases it will be seen that a slight retreat from reality caused the revival of emotional experiences which belonged to the recent past. The cause of this retreat we must seek for in the problem which was present in reality. The careful consideration, therefore, of such very simple cases as these suggests that some neurotic symptoms may find their *primary* explanation in factors other than those of purely physical disturbance.

The Teaching of Jung.

In place of Janet's conception of superior and inferior modes of function, Jung has developed the Freudian idea of adult and infantile attitudes. The life of the individual is a psychic progression, whose foreground alone is illuminated during normal health, but whose background may become re-lit under abnormal conditions. This retracing of the territory of personal development constitutes psychological regression, and when it occurs there is a revival, to a greater or less extent, of past or infantile attitudes towards life.

Attitudes that do not belong to adult life appear, and just as the little child is uncivilised in his outlook, so do these attitudes which begin to emerge from the background of the mind seem uncivilised. They are primitive attitudes. In normal people these attitudes are unconscious in the sense that they lie beneath consciousness. Their appearance on the conscious stage causes embarrassment. Under normal circumstances psychic energy, in its passage upwards from the inferior to the superior psychological levels, appears in consciousness as normal impulse. It passes, as it were, through successive stencils or patterns, through successive differentiations, the superior patterns being those that belong to our normal adult attitudes, and these alone being conscious. In regression the inferior (infantile) patterns are reoccupied and psychic energy becomes conscious in a *nascent* form at inferior levels. Perhaps, then, various imperative ideas and phobias that disturb the conscious life of neurotics may be due to the premature birth of thought in consciousness caused by regression. For their cure we must endeavour to discover the factors in reality that keep up the regression.

Psychological Differences between Child and Adult.

This is essentially the teaching of Jung. Attention must now be turned to one of the most remarkable psychological differences that exist between child or infantile life and adult life. It concerns the content of consciousness.

There is a mode of thinking, which Bleuler calls autistic, that is typical of the infantile life. It is that process which is free from effort and is known as day-dreaming or fantasy. It is the process used by the child to overcome reality. The child lives in a great world of fantasy, in which all that is lacking in reality is compensated for by fairy creations of the mind. This mode of adaptation, which was first emphasised by Freud, is in absolute opposition to the mode of adaptation in the adult. The infantile method is effortless, pleasurable, and ineffectual. The adult method is full of striving and suffering, but it is effective. It is between these two great methods of adaptation that the psychic life of every individual continually swings. In regression, therefore, we must expect to find an exuberance of fantasy, for pathological regression means a return to the infantile attitude, and the infantile attitude towards life is one of fantasy.

When we are faced by a problem in reality and regress from it we begin to form a fantasy concerning it. The energy that should go outwards towards the overcoming of the problem turns inwards and develops a fantasy system. This is not necessarily pathological, provided that the energy does not track too far inwards. It is the method whereby the inventor invents. It is the great "mechanism" of creation. All creative work springs out of fantasy. There is first of all the initial regression from reality, then the reanimation of fantasy, and finally the forward striving that accompanies the attempt to shape the fantasy so that it may take form in reality. This is the view of fantasy put forward by Jung. Jung does not see eye to eye with Freud in this matter. Freud regards the fantasy as the sexual wish fulfilment. Jung sees in the fantasy all that is valuable to the next step in development that the individual is about to take.

Dreams.

The dream is a mode of thinking that bears little relationship to reality, and it therefore resembles closely that kind of thinking which belongs to the child-life. The dream is a variety of fantasy. It is the persistence in us of a primitive method of thinking that as adults we have abandoned. In Freud's phrase, dreams are "a piece of the childish soul in us." It will therefore be seen that when we are dealing with a neurosis which has been caused by a regression of

psychic energy from a task in reality, with the consequent reanimation of some infantile attitude, the dreams of the patient will be of value, because they will contain those fantasies which have replaced the effort of achievement that was demanded by reality. *They will contain the germ of the solution of the problem, not in terms of adult thinking, but in terms of infantile or primitive thinking.* In classical drama, whenever matters became too deep and dreadful for the help of mortals, a god descended to save the situation. We can think of the fantasy as the *deus ex machina*. It is for this reason that recent workers in the field of psychological medicine have thought it as important to pay careful attention to their patients' mental content as to take their blood pressure or to examine their reflexes.

Jung's Conception of Cause of Neurosis.

Jung's teaching about neuroses concerns itself intimately with the conception of psychological regression. "The psychological trouble in neurosis, and neurosis itself, can be considered as an act of adaptation that has failed." The failure is due to some insurmountable obstacle in reality which causes the storing up of psychic energy which, in place of being employed in the increased effort, regresses and so returns to a former and more primitive way of adaptation. Thus Jung regards the disturbances of nutrition which are so frequently met with in neurotic conditions as evidence that regression has taken place and that there has been a reanimation, and therefore abnormal emphasis, of those functions with which the infant is almost exclusively concerned, and which in adults should be automatic. Or regression may take another path and revive that attitude towards life which the child has towards its parents.

"Take away the obstacle in the path of life and this whole system of infantile fantasies at once breaks down and becomes again as inactive and ineffective as before. Therefore I no longer find the cause of the neurosis in the past, but in the present. I ask what the necessary task is which the patient will not accomplish. For the neurotic there is no established way, for his aims and tasks are apt to be of a highly individual character. He tries to follow the more or less uncontrolled and half-conscious way of normal people, not fully realising his own critical and very different nature, which imposes upon him more effort than the normal person is required to exert.

There are neurotics who have shown their increased sensitiveness and their resistance against adaptation in the very first weeks of life, in their difficulty in taking the mother's breast and in their exaggerated nervous reactions. For this portion of a neurotic predisposition it will always be impossible to find a psychological etiology, for it is anterior to all psychology. But this predisposition—you may call it 'congenital sensitiveness' or by what name you like—is the cause of the first resistances against adaptation. In such case, the way of adaptation being blocked, the biological energy we call *libido* does not find its appropriate outlet or activity, and therefore replaces an up-to-date and suitable form of adaptation by an abnormal or primitive one."

There is to-day an enormous number of cases, scattered all through the country, illustrating the various aspects of psychological regression. These are to be found amongst those individuals suffering from shock caused either by bursting shells or the general strain of war. To regard all such cases as being due to commotio or gas poisoning—as some neurologists still appear to do—points to an extraordinarily sterile outlook on the etiology of morbid function. In these cases regression is of varying degree, from the most slight to the most extreme. In general we find no longer an adult man, with an adult mode of adaptation to life, but a person who shows a greater or less degree of infantility, together with that abnormally reinforced fantasy or dream-life—or both—that is typical of psychological regression.

SOCIETY FOR RELIEF OF WIDOWS AND ORPHANS OF MEDICAL MEN.—The annual general meeting of this society was held at 11, Chandos-street, Cavendish-square, on May 29th, Sir Alfred Pearce Gould, the President, being in the chair. The accounts for the year showed the invested funds of the society to amount to £143,550. The income from investments amounted to £4557 18s. 7d., £317 2s. was received from subscriptions and donations, and the working expenses for the year were £267 10s. The sum of £4292 10s. was distributed among the annuitants of the charity—namely, 48 widows and 7 orphans. At the present time the widow of a member who has an income of £100 per annum or under receives a grant of about £80 per annum, and each orphan up to the age of 16 receives £43 per annum. There are, however, two special funds which enable the directors to continue the grants to orphans after the age of 16. Further particulars of the society may be obtained on application to the secretary at the offices of the society, 11, Chandos-street, Cavendish-square, W.1.