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 a backward movement, not in space, but in time, such as the psychological counterpart of the 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 opposite of that forward striving movement of life that is characteristic of reaction to the environment. It implies a backward movement of reaction to the environment. It implies a backward movement in the teachings of Jung, of Zurich, to describe a mode of reaction to the environment. It implies the backward movement of regression.

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 conceives of function as having a superior and an inferior aspect that reality wears. If reality is unfavourable the stream flows backwards; 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 accumulated tension which may possibly be 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.

In the physical sense he conceives of neurological levels whose highest ranges are cortical. As these are destroyed, but from what remains, we are normal so long as we retain the function of adaptation that belong to the evolutionary past. For example, a third year schoolboy who has been stammering for years may have 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.

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. 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 thin veneer placed over the 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 reanimation or reanimation of a mode of adaptation that has no longer a general human validity. Clarapédé, in discussing the definition of hysteria uses the phrase "tendance à la réversion.


The idea of the higher and lower aspects of function was assumed that reveal the history of the organism in a phylogenetic sense. It is a process of uncovering the past, and is 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 vivid battle-dreams, and was almost incapable of any effort of attention. He gradually improved and the battle-dreams disappeared. Coincident with this unfavourable aspect of reality he began to have vivid battle-dreams, and was almost incapable of any effort of attention.

This very simple example suffices to show the reanimation which characterises regression. If he had been able to overcome the problems of his personal nature he was faced not only with the battle-dreams but with the battle-dreams which would have occurred, and in place of battle-dreams and nervous symptoms there would have been achievement and progress.

CASE 1.—The patient, an officer, who had been lightly wounded in the arm, and had shown symptoms of shock, including slight battle-dreams, as 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 vivid battle-dreams, and was almost incapable of any effort of attention. He gradually improved and the battle-dreams disappeared. Coincident with this unfavourable aspect of reality he began to have vivid battle-dreams, and was almost incapable of any effort of attention.

The conception of organic regression is held to grow difficult. Disagreeable factors of a personal nature appeared. Coincident with this unfavourable aspect of reality he began to have vivid battle-dreams, and was almost incapable of any effort of attention. He gradually improved and the battle-dreams disappeared. Coincident with this unfavourable aspect of reality he began to have vivid battle-dreams, and was almost incapable of any effort of attention.

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.

CASE 2.—The patient, a sergeant-major, 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 he had nightmares. His anxiety grew to a state of terror, and he 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. His anxiety became 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 lies in the unconscious demands of the battle-dreams. 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 regression, whose foreground alone is illuminated during normal health, but whose background may become real under certain 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 successfully as the movement to their infancy, and the 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 surface is an abnormality. It is the persistence in us of a primitive mode of thinking that belongs to the child-life. The dream is a reanimation of fantasy, and finally the forward striving that is typical of the infantile life. It is that process which belongs to our normal adult attitudes, and these alone appear conscious in a nascent form at inferior levels. Perhaps, during regression, the whole process which produces 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 regression. It is a 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 adult method of adaptation. The infantile method is effortless, pleasurable, and inefficacious. 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 regression forward towards 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 the little mind is divined in the clearness or the myopia of 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 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, the hero or heroine is often driven to abnormal or primitive outlet, 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 important to pay careful attention to their mental habits in order 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 neurosis is the anxiety 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 within itself. It returns to a pre-existing method 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 of fantasy with which the infantile attitude has been 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 fantasies at once disappears. The neurosis is cured, and ineffective as before. . . . Therefore I no longer find the cause of the neuroses in the past, but in the present. I ask what the necessary condition is under which the patient's anxiety is not acceptable. . . . It is that there is no established way for his aims and tasks are apt to be of a highly individual character. He tries to follow the most obtuse and half-conscious way of normal people, not fully realising his own critical and very different nature, which imposes upon him more and more the task than the thing, and personal requirements to exercise. 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 re-attachments 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 in the present 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 individuals suffering from abnormally reinforced fantasy, the bursting shells or the general strain of war. To regard all such cases as being due to commotion or gas poisoning—as some neurologists still appear to do—points to an extraordinary sterile outlook on the etiology of morbid functions. 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, W. 1, 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 £4657 13s. 7d., £317 2s. 6d. was received from subscriptions and donations, and the working expenses for the year were £267 10s. 8d. The surplus was divided among the annuities 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 £35 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 after the expiration of the period of seven years. 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.