

Restoring Life to the Treatment of Madness

History Beyond Trauma

By Francoise Davoine and Jean-Max Gaudilliere

Susan Fairfield (Trans.)

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Review by Pam Leck

In their work, *History Beyond Trauma*, Francoise Davoine and Jean-Max Gaudilliere, professors at the prestigious Ecole des Hautes Etudes en Sciences Sociales in Paris, breathe life back into the treatment of madness. Rather than offer a new theory of madness, they present a hermeneutic reading of their clinical experience, paying particular attention to the development and use of transference. Their respect for their own as well as their patients' experience allows them to write about aspects of the therapeutic endeavor beyond the scope of scientific research. "Our daily experience has taught us that the only rigorous path leading to meaningful results is first established by the patient. It is from him that theoretical discoveries emerge." (p. 24)

The first half of *History Beyond Trauma* describes the field of knowledge that serves as background for the authors' analytic work with severely traumatized patients. With advanced degrees in the classics, doctorates in sociology, and analytic training that included attendance at Lacan's lectures, Davoine and Gaudilliere take the reader on an elaborate and rich journey through the history and treatment of madness. This contextualization of their work includes the ideas of Wittgenstein, Lacan, Damasio, and Descartes, as well as numerous cultural references from Japanese koans to the *Illiad*, *Don Quixote* to the works of Rabelais. Cultural references enrich and layer the text throughout reminding us that madness is an essential thread of the fabric of humanity and history.

Davoine and Gaudilliere conceptualize madness as a social phenomenon intimately connected to the traumas of war. Madness is a "... form of social link in an extreme situation. . . People said to be crazy, in the ordinary sense of the term, show us what it was necessary to do in order to survive." (p. xxii) The patient in treatment may not be the direct victim of trauma, but may instead be carrying an unspeakable encounter handed down through

generations. Davoine and Gaudilliere take their conceptualization a step farther, contending that every patient and analyst is inevitably affected by war and that this fact is essential to the treatment.

That remote wars of the past affect us all may be surprising to the American reader. The American Dream has always been to move into the future, leaving the past behind, or at least on other shores. *History Beyond Trauma* forces us to ask what the consequences have been in the face of this denial and avoidance. America has been built by people who have emigrated from other places, often because of conflicts in their homelands. Leaving behind conflicts fought on distant shores does not insure that the impact of those conflicts is not to be felt by future generations. Davoine and Gaudilliere understand madness in relationship to encounters with the Real, the uncanny, the unspeakable; encounters all too frequent on the battlefield; encounters often frozen in time, unspoken, and hence handed down silently through the generations.

In the second half, Davoine and Gaudilliere focus more specifically on four principles that guide their work. These are the Salmon Principles, developed in 1917 from Thomas Salmon's work as a wartime psychiatrist. The Salmon Principles (proximity, immediacy, expectancy and simplicity) speak to the structure of the therapy, the attunement of patient and analyst that is required for the work of discovering the meaning of any particular patient's symptoms. The effect of war on combatants has been studied at length from the shell shock neurosis of World War I to the posttraumatic stress disorder of Vietnam Vets and victims of September 11th. Davoine and Gaudilliere offer a unique conceptualization of war's role in the development of madness in general. War does not only result in neurosis in the soldier, but also impacts the human race more pervasively.

There is a decidedly European feel to this work because the text is bathed in history in a way that is foreign to most Americans. One could argue that current treatments of trauma, whether "exposure therapy" or pharmacologic intervention, so focused on excising the madness out of the patient, deny the patient the support of the past, of their human ancestry, their place in the larger scope of things that could remind them they are not alone.

For all of the complexity of *History Beyond Trauma*, Davoine and Gaudilliere use vivid case material to elucidate their ideas. Their examples get right to the point and defy the need for explanation. For example, in describing the principle of expectancy as the analyst's affirmation of the patient's madness that creates a hope for life when life has been banished

from the horizon, they quote Gilda (a patient who appears throughout the book) after 5 years of analysis. “Without feeling anything, I’d turned into my own executioner. A certain scent of childhood in psychosis this week propelled me back to my first years. My parents weren’t able to be of any help to me since, after the war, they too had lost all feeling. This sense arose as though from an electrical outlet connected to you, the analyst. Right at the beginning, you told me, ‘Yes, it’s possible to get out of madness.’ You assured me that my craziness was a search, remember?” (p.21)

At a time in America when madness is treated by medications and brief, manualized, empirically-validated approaches, *History Beyond Trauma* offers another way to conceptualize trauma that is enriched by a deeper understanding of our common human destiny. Davoine and Gaudilliere insist that the scientific road is not the only path to cure. Madness is about all of us not just a select few. We are all impacted by the horrors of humanity, even if we ourselves never experience the battlefield.