Chapter XI The Manic Defence [1935]

IN MY OWN particular case a widening understanding of Mrs Klein's concept at present named 'The Manic Defence' has coincided with a gradual deepening of my appreciation of inner reality. Three or four years ago I was contrasting 'fantasy' and 'reality', which led my non-psycho-analytic friends to tell me that I was using the word fantasy in a way that was different from the ordinary use of the term. I replied to their objections that the misuse was inevitable; for (as in the psycho-analyst's use of the word anxiety) the invention of a new word would have been less easily justified than the treatment of an already existing word with a splash of paint.

Gradually, however, I find I am using the word fantasy more in its normal sense, and I have come to compare external reality not so much with fantasy as with an inner reality.

In a way this point that I am making is a quibble, since if there be sufficient respect for 'fantasy', conscious and unconscious, then a changeover to the use of the term 'inner reality' requires no effort. Yet there may be some for whom, as for me, the change in terminology involves a deepening of belief in inner reality. 2

The connection between this preliminary and the title of my paper 'The Manic Defence' is that it is a part of one's own manic defence to be unable to give full significance to inner reality. There are fluctuations in one's ability to respect inner reality that are related to depressive anxiety in oneself. The effect is that on certain days in one's analytic practice a patient who employs chiefly manic defences will present material which defies interpretation at the time; yet the notes of that hour's associations may make quite understandable reading the following day.

The new understanding invites one to restate the 'Flight to Reality' (Searl, 1929), as a flight from internal reality rather than from fantasy. Internal reality is to be itself described in fantasy terms; yet it is not synonymous with fantasy since it is used to denote the fantasy that is personal and organized, and related historically to the physical experiences, excitements, pleasures, and pains of infancy. Fantasy is part of the individual's effort to deal with inner reality. It can be said that fantasy and day-dreams are omnipotent manipulations of external reality. Omnipotent control of reality implies fantasy about reality. The individual gets to external reality through the omnipotent fantasies elaborated in the effort to get away from inner reality.

In the last paragraph of her paper ('The Flight to Reality', 1929) Miss Searl writes: '…in danger (the child) wants to keep the ideally loving and loved parents always with it, with no fear of separation; at the same time it wants to destroy in hate the unkind strict parents who leave it exposed to the awful dangers of unsatisfied libidinal tensions. That is, in omnipotent fantasy it eats up both loving and strict parents…'.

I feel that what is omitted here is recognition of the relation to the objects which are felt to be inside. It would seem that what we meet with is not merely afantasy of incorporation of good and bad parents; we meet with the fact of which the child is largely unconscious that, for the same reasons that have been operative in the child's relation to the external parents, sadistic attacks are going on inside the child, attacks against the good or mutually loving parents (because by beinghappy together they frustrate), attacks against the parents made bad by hate, defence against the bad objects that now threaten the ego too, and also attempts to save the good from the bad, and to use the bad to counteract the bad; and so on.

Omnipotent fantasies are not so much the inner reality itself as a defence against the acceptance of it. One finds in this defence a flight to omnipotent fantasy, and flight from some fantasies to other fantasies, and in this sequence a flight to external reality. This is why I think one cannot compare and contrast fantasy and reality. In the ordinary extrovert book of adventure we often see how the author made a flight to day-dreaming in childhood, and then later made use of external reality in this
same flight. He is not conscious of the inner depressive anxiety from which he has fled. He has led a life full of incident and adventure, and this may be accurately told. But the impression left on the reader is of a relatively shallow personality, for this very reason, that the author adventurer has had to base his life on the denial of personal internal reality. One turns with relief from such writers to others who can tolerate depressive anxiety and doubt.

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1 I would now use the term ‘fantasying’ (1957).

It is possible to trace the lessening of manic defence in the behaviour and in the fantasies of a patient during his analysis. As the depressive anxieties become less as the result of analysis, and the belief in good internal objects increases, manic defence becomes less intense and less necessary, and so less in evidence.

It should be possible to link the lessening of omnipotent manipulation and of control and of devaluation to normality, and to a degree of manic defence that is employed by all in everyday life. For instance, one is at a music-hall and on to the stage come the dancers, trained to liveliness. One can say that here is the primal scene, here is exhibitionism, here is anal control, here is masochistic submission to discipline, here is a defiance of the super-ego. Sooner or later one adds: here is LIFE. Might it not be that the main point of the performance is a denial of deadness, a defence against depressive ‘death inside’ ideas, the sexualization being secondary.

What about such things as the wireless that is left on interminably? What about living in a town like London with its noise that never ceases, and lights that are never extinguished? Each illustrates the reassurance through reality against death inside, and a use of manic defence that can be normal.

Again, in order to account for the existence of the Court and Personal column of our newspapers we must postulate a general need for reassurance against ideas of illness and death in the Royal Family and among the aristocracy; such reassurance can be given by reliable publication of facts. But there is no possible reassurance against the destruction and disorganization of the corresponding figures in the inner reality. Of ‘God Save the King’ it is not enough to say that we want to save the King from the unconscious hate we bear him. We might say that in unconscious fantasy we do kill him, and we wish to save him from our fantasy, but this strains the word fantasy. I prefer to say that in our inner reality the internalized father is all the time being killed, robbed, and burnt and cut up, and we welcome the personalization of this internalized father by a real man whom we can help to save. Court mourning is a compulsory order which pays a tribute to the normality of mourning. In manic defence mourning cannot be experienced.

In these Court and Personal columns the movements of the aristocracy are reported and predicted, and here can be seen in thin disguise the omnipotent control of personages who stand for internal objects.

The truth is, one can scarcely discuss in the abstract whether such devices are a normal reassurance through reality or an abnormal manic defence; one candidly discuss, however, the use of the defence that we meet with in the course of the analysis of a patient.

In manic defence a relationship with the external object is used in the attempt to decrease the tension in inner reality. But it is characteristic of the manic defence that the individual is unable fully to believe in the liveliness that denies deadness, since he does not believe in his own capacity for object love; for making good is only real when the destruction is acknowledged.

It might be that some of our difficulty in agreeing on a term for what is at present called the manic defence is directly to do with the nature of the manic defence itself. One cannot help noting that the word ‘depression’ is not only used but used quite accurately in popular speech. Is it not possible to see in this the introspection that goes with depression? The fact that there is no popular term for the manic defence could be linked with the lack of self-criticism that goes with it clinically. By the very nature of the manic defence we should expect to be unable to get to know it directly through introspection, at the moment when that defence is operative.

It is just when we are depressed that we feel depressed. It is just when we are manic-defensive that we are least likely to feel as if we are defending against depression. At such times we are more likely to
feel elated, happy, busy, excited, humorous, omniscient, ‘full of life’, and at the same time we are less interested than usual in serious things and in the awfulness of hate, destruction, and killing.

I do not wish to maintain that in the analyses of the past the deepest unconscious fantasies, which (following Freud) I am here calling ‘inner reality’, have not been reached. In learning the psychoanalytic technique we are taught to interpret within the transference. Full analysis of the transference gives analysis of the inner reality. But an understanding of the latter is necessary for a clear understanding of the transference.

**Characteristics of the Manic Defence**

I now come to a rather closer examination of the nature of the manic defence. Its characteristics are omnipotent manipulation or control and contemptuous devaluation; it is organized in respect of the anxieties belonging to depression, which is the mood that results from the coexistence of love and greed and hate in the relations between the internal objects.

The manic defence shows in several different but interrelated ways, namely:

Denial of inner reality.

Flight to external reality from inner reality.

Holding the people of the inner reality in ‘suspended animation’.

Denial of the *sensations* of depression—namely the heaviness, the sadness—by specifically opposite sensations, lightness, humorousness, etc.

The employment of almost any opposites in the reassurance against death, chaos, mystery, etc., ideas that belong to the *fantasy content* of the depressive position.

*Denial of Inner Reality.* I have already referred to this in accounting for my own delay in recognizing the deepest unconscious fantasies. Clinically we see not so much the denial as the elation that is related to the denial, or a sense of unreality about external reality, or unconcern about serious things.

There is a type of partial recognition of internal reality that is worth mentioning in this setting. One may meet with an astoundingly deep recognition of certain aspects of internal reality in people who nevertheless do not acknowledge that the people who inhabit them are a part of themselves. An artist feels as if a picture was painted by someone acting from inside him, or a preacher feels as if God speaks through him. Many who live normal and valuable lives do not feel they are responsible for the best that is in them. They are proud and happy to be the agent of a loved and admired person, or of God, but they deny their parenthood of the internalized object. I think more has been written about bad internalized objects similarly disowned than about the denial of good internal forces and objects.

There is a practical point here, for in the analysis of the most satisfactory type of religious patient it is helpful to work with the patient as if on an agreed basis of recognition of internal reality, and to let the recognition of the personal origin of the patient’s God come automatically as a result of the lessening of anxiety due to the analysis of the depressive position. It is necessarily dangerous for the analyst to have it in his mind that the patient’s God is a ‘fantasy object’. The use of that word would make the patient feel as if the analyst were undervaluing the good object, which he is not really doing. I think something similar would apply to the analysis of an artist in regard to the source of his inspiration, and also the analysis of the inner people and imaginary companions to whom our patients are able to introduce us.

*Flight to External Reality from Internal Reality.* There are several clinical types of this. There is the patient who makes external reality express the fantasies. There is the patient who day-dreams, omnipotently manipulating reality, but knowing it is a manipulation. There is the patient who exploits every possible physical aspect of sexuality and sensuality. There is the patient who exploits the internal bodily sensations. Of the last two, the former, the compulsive masturbator, abates psychic tension by the use of the satisfaction to be got from auto-erotic activity and from compulsory heterosexual or homosexual experiences, and the latter, the hypochondriac, comes to tolerate psychic tension by denial of fantasy content.
Suspended Animation. In this aspect of the defence, in which the patient controls the internalized parents, keeping them between life and death, the dangerous internal reality (with its threatened good objects, its bad objects and bits of objects, and its dangerous persecutors) is to some extent acknowledged (unconsciously) and is being dealt with. The defence is unsatisfactory because omnipotent control of the bad internalized parents also stops all good relationships, and the patient feels dead inside and sees the world as a colourless place. My second case illustrates this.

Denial of Certain Aspects of the Feelings of Depression

Use of Opposites in Reassurance. These two can be taken together. To illustrate my meaning, I give a series of opposites commonly exploited in their omnipotent fantasies and in omnipotently controlled external reality by patients who are in a state of manic defence. Some are more commonly employed in the service of gaining reassurance through external reality, so that omnipotence and devaluation are relatively little in evidence.

| Empty        | ..  | Filling                        |
| Dead         | ..  | Alive, growing                |
| Still        | ..  | Moving                        |
| Grey         | ..  | Coloured                      |
| Dark         | ..  | Light, luminous               |
| Unchanging   | ..  | Altering constantly           |
| Slow         | ..  | Fast                          |
| Inside       | ..  | Outside                       |
| Heavy        | ..  | Light                         |
| Sinking      | ..  | Rising                        |
| Low down     | ..  | High up                       |
| Sad          | ..  | Making laugh, happy           |
| Depressed    | ..  | Light-headed, on top of the world |
| Serious      | ..  | Comic                         |
| Separated    | ..  | Joined                        |
| Separating   | ..  | Being joined                  |
| Formless     | ..  | Formed, proportioned          |
| Chaos        | ..  | Order                         |
| Discord      | ..  | Harmony                       |
| Failure      | ..  | Success                       |
| In bits      | ..  | Integrated                    |
| Unknown and mysterious | ..  | Known and understood          |

Here the key words are dead and alive—moving—growing.
**Depressive—Ascensive**

I wish to dwell for a few minutes on one of these defences which specially interests me.

While looking round for a word that might describe the total of defences against the depressive position I met the word ‘ascensive’. Dr J. M. Taylor suggested it to me as one opposite of depressive, and it is better than the word buoyant which is familiar as an opposite of depressed in Stock Exchange reports.

It seems to me that this word, ascensive, can be usefully employed in drawing attention to the defence against an aspect of depression which is implied in such terms as ‘heaviness of heart’, ‘depth of despair’, ‘that sinking feeling’, etc.

One has only to think of the words ‘grave’, ‘gravity’, ‘gravitation’, and of the words ‘light’, ‘levity’, ‘levitation'; each of these words has double meaning. Gravity denotes seriousness, but is also used to describe a physical force. Levity denotes devaluation and joking as well as lack of physical heaviness. In children's play I have always found that balloons, aeroplanes and magic carpets include a manic defence significance, sometimes specifically and sometimes incidentally. Also light-headedness is a common symptom of an impending depressive phase, being a defence against heaviness, the head as if filled with gas, tending to raise the patient above his troubles. In this connection it is interesting to note that in laughter we show ourselves and our fellows that we have plenty of air, and to spare, whereas in sighing and sobbing we demonstrate a relative lack of it by our rationed in-breathing attempts.

The word ascensive brings into the foreground the significance of the Ascension in the Christian religion. I think that I should once have described the Crucifixion and Resurrection as a symbolic castration with subsequent erection in spite of corporeal insult. If I had offered this explanation to a Christian, I should have met with protest not only on account of the general disallowal of unconscious sexual symbolism; at least part of the resultant indignation would have been justified by my having left out the depressive-ascensive significance of the myth. Each year the Christian tastes the depths of sadness, despair, hopelessness, in the Good Friday experiences. The average Christian cannot hold the depression so long, and so he goes over into a manic phase on Easter Sunday. The Ascension marks recovery from depression.

Many find sadness near enough at hand without the help of religion and can even tolerate being sad without the support that shared experience affords, but it has sometimes struck me, when I have heard people in analysis jeering at religion, that they are showing a manic defence in so far as they fail to recognize sadness, guilt, and worthlessness and the value of reaching to this which belongs to personal inner or psychic reality.

**Manic Defence and Symbolism**

The subject that I have chosen is certainly one capable of very wide treatment. A matter that interests me very much is the theoretical relation between

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1 cf. elation.

2 This idea has been expressed by Brierley (1951, Chapter 6).

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Manic defence phenomena and symbolism. For instance, rising has a phallic, that is to say, erection significance, as is obvious, but this is not the same as its ascensive or contra-depressive significance. Balloons are employed in fantasies and games as symbolic of the mother's body or breasts, of the flatus pregnancy, flatus erection, flatus; they are also employed as contra-depressive symbols. In regard to feelings they are contra-depressive, whatever the object they displace.

Falling has a sexual, or a passive-masochistic significance; it also has a depressive significance; and so on.

A woman may envy a man, desire to be a man, hate being a woman, because being herself liable to depressive anxiety she has come to identify man with erection and so with the ascensive manic defence.

These and other relations between manic defences and sexual symbolism must be left for later study.
Clinical Examples

It would be easy to give relevant details from this or any week's material, of each of the ten patients who are at present under my care.

I have selected four case fragments. The first two patients are of the asocial type, the third is a severe obsessional, and the fourth a depressive.

The first, Billy, is five years old and has been with me for four terms. When he came to me at three and a half he was restless, interested chiefly in money and ice-creams, and acquisitive to a degree without being able to enjoy what he had acquired. He had started to steal money, and I think that without analysis he would have been a delinquent, especially as he has to live in a home in which he is the only child of estranged parents. His behaviour in the early stages of the analysis was consistent with a diagnosis: 'asocial, potential delinquent.'

I quote three games, chosen at random and yet I think fairly, to illustrate the changes that have occurred during analysis. There was an interval of some months between the first and second stage and between the second and third.

In the earliest stage, before the first of the three games, one could scarcely describe his activities as games—at best there had been wild attacks on pirates.

In the first game he stands at the mouth of a cannon, which I let off. He is carried high up and swiftly over the continents to Africa. On his way he knocks down various people with a stick—and in Africa he deals from above with natives who are occupied in various ways—sending them from the tops of trees to the bottoms of wells, and cutting off the head of the chief.

In an hour in which this game was dominant he was tremendously excited, and I was not surprised when after the end of the hour, in letting himself down from my room on the second floor in the lift, he went to the basement—the well of the lift—in error, and became terrified. I had on that day followed him (secretly) because of his exalted condition, and so was able to help him out of his difficulty; he was immensely reassured by finding I had appreciated his abnormal state and so had been at hand when he was in distress.

This hour followed a scene at home with his mother which, of course, was largely brought about by his own ambivalence that was becoming open. It also marked the climax of his so-called ‘manic’ behaviour and was related in time to the analysis of the depressive position and to the arrival of the feeling of sadness and hopelessness. With the arrival of sadness, the restitution of constructive play first became possible.

The game which reminded me of the one I have just described concerned a series of journeys in an aeroplane. This was after an interval of some months. We again fly to Africa, and we expect enemies. We look down on the world and laugh at its insignificance. But a feature of the trip is a most amazing set of safety precautions. We have two books of instructions on how to fly an aeroplane or a seaplane. We have two engines as well as a helicopter plane in case the engines fail—also a parachute each. We have an under-carriage with wheels but also a couple of floats in case we accidentally come down on water. We have a good store of food and also a bag of gold in case we run short of food or spare parts. In many other ways, too, we insure ourselves against a failure of our attempt to get above our troubles.

In this, the second game, an obsessional mechanism was clearly used, and the persecutors were raised in status, being aeroplanes of another country, capable of becoming allied aeroplanes in a war with a third country. (This was shown in further games.) Devaluation was decreased, and omnipotence lessened; but the beingabove was not only to be explained along the lines of our being in a position to drop faeces on to those below—it retained an ascensive or contra-depressive feel.

To compare with these two games I give a still later game.

We build a ship and set out for a pirate land. In this game (of which I give the main details only) we forget our aim, as it is a very beautiful day. We lie about basking in the sun on deck and enjoying companionship in a happy unselfconscious way. From time to time we dive into the sea and swim about lazily. There are some sharks and crocodiles, which occasionally remind us rudely of their persecuting quality, but the boy has a gun that shoots even under the water, so that we are not much worried.

We take on board a little girl whom we save from drowning and we make for her a switchback for her doll. The captain gives some trouble. Every now and again the engines stop and after a search it is
found that the captain has put muck into the works. What a captain! He takes out the muck and we go on again, enjoying the benevolence of the sunshine and water.

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A comparison of this play fragment with the other two games shows a lessening in persecution anxiety (the pirates having in the past given constant and serious trouble), a becoming good of bad objects (the sea used to be teeming with crocodiles and almost entirely bad), a belief in goodness and kindness (the sunshine and general holiday feeling), a linking up of fantasy and physical experiences (the gun that can shoot under water), the manageable quality of the captain's treachery which he himself makes good (removal of the muck from the engines), the new object relations (especially shown in the new inclusion of a good object in the shape of a little girl, saved from the sea and made happy with well-controlled ups and downs), and also a lessening of obsessional over-insurance against risk. Devaluation is not a feature of the game.

The manic defence comes in to the extent that dangers are forgotten, but the fact that there is some increase in the goodness of the internal objects makes the manic defence less strong and brings about the other changes. There is manic defence in that he deals with danger in a manic way, shooting at persecutors inside the body (under the water), nevertheless a stronger relation to external reality is seen, for instance, in the relation of the shooting under water to passing water in the bath.

I play the role of imaginary brother, but also of a mother.

Clinically Billy has changed to a much more normal child. At school he is learning well, and enjoying his relation to other children and to the teachers. At home he is not quite normal; he still demands money and is liable to be noisy and especially to have moments of unreasonable behaviour just as dinner is starting. But he has a delightful personality, a developing understanding of the difficulties of his parents, who remain cool towards each other. The mother is very ill herself, depressive and a drug-addict.

David (aged eight), another asocial child, came to me at the beginning of this term as an alternative to being expelled from school on account of 'sex and lavatory obsession' and some vaguely defined actions in regard to certain boys and girls. He is the only child of a talented but depressive father who sometimes lies in bed for several days for no clear reason, and of a mother who is—as she herself recognizes—highly neurotic as well as worried about the real home situation. The mother gives me excellent support.

Like most delinquent children, David is immediately liked for a short period by everyone with whom he does not come too much in contact. Actually, since the treatment started, there have been no unpleasant happenings outside, but I am told that he is tiring to have in one's company for long, needing and asking to be kept occupied. His knowledge of the facts of external reality is remarkable, though typical of the delinquent.

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In an early hour he said to me: 'I hope I am not tiring you.' And this, coupled with my having been told by the parents of his always tiring them out, and also with my experience of a similar case (treated before I understood much about inner reality), led me to be prepared for an exhausting case.

Once, when I was describing the treatment of a delinquent child at a seminar, Dr Ernest Jones remarked that a practical point arose out of the case, namely: is it impossible to avoid getting exhausted in dealing with a delinquent? For, if so, there was a serious limitation to treatment of such cases. At that time, however, a delinquent child had been treated by Dr Schmideberg without too serious difficulty in the management of the analysis, so that I feel that what Dr Jones had in his mind at that time was that it was my technique that was at fault.1

The aim to tire me out soon asserted itself but before this a good deal of analysis had been possible. Chiefly, the little toys had enabled David to give me and himself a wealth of fantasy, and in great detail.2

After a few days David fled from the anxieties belonging to deep fantasies to an interest in the world outside, the streets as seen from the window, and in the world outside my door—especially the lift. The inside of the room had become his own inside, and if he were to deal with me and the contents of my room (father and mother, witches, ghosts, persecutors, etc.) he had to have the means to control them. First he had to tire them out, as he feared he could not control them—and I felt that in this he showed some distrust of omnipotence. I had proof at this stage of a suicidal impulse. Along with the need to tire me out, there developed a desire to save me from exhaustion, so that as a slave driver he
took immense care that his slave should not become exhausted. He provided me with compulsory rest periods.

Soon it became clear that it was he who was becoming exhausted, and the problem of the analyst becoming tired was gradually solved by the interpretations in regard to his own exhaustion in the control of the internalized parents who were exhausting each other as well as him.

I was fortunate enough to have him in my room at 11 a.m. on Armistice Day. The matter of Armistice Day observance interested him vastly; it was not so much that his father had fought in the war as that he had already developed (before analysis and in relation to the analysis) an interest in the streets and the traffic, as providing a not hopelessly uncontrollable sample of inner reality.

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1 I now see that there was a very real problem implicit in Dr Jones's remark, and I have developed the theme. (See Chapter XXII).

2 Mrs Klein's introduction of the use of a few very small toys was a brilliant plan, because these toys give the child support in regard to contemptuous devaluation and make omnipotent mastery almost a fact. The child is able to express deep fantasies by means of the little toys at the outset of a treatment and so to start with some belief in his own inner reality.

He came full of the pleasure of buying a poppy from a lady, and at 11 o'clock he was interested in every detail of the street events. Then came the long awaited two minutes' silence. It was a particularly complete silence in my neighbourhood, and he was absolutely delighted. 'Isn't it lovely!' For two minutes in his life he felt as if he was not tired, as he need not tire out the parents, since there had come along an omnipotent control imposed from outside and accepted as real by all.

Of interest was his fantasy that during the silence the ladies went on selling flowers;1 the only permitted activity; a more manic, internal omnipotence would have stopped everything (the good included).

Analysis of the depressive position and of the manic defence has lessened his feverish pleasure in the analysis. Moments of intense tiredness, sadness, and hopelessness have come along, and he has shown indirect evidence of guilt feelings. He has had a few weeks with games in which I have had to become very frightened, and alternatively guilty, and in which I have the most terrible nightmares. This week he has even played at being frightened himself, and today he really was afraid of something. He illustrated to me his resistance by getting me to teach him diving, which in fact he refuses to learn, and I have to say: ‘Here you are wasting my time! How can I teach you to dive if you can't stand? I am very angry with you’—and so on and so on. All this becomes a tremendous joke, and he makes me laugh heartily and is then very pleased. But he is now aware that all this joking is part of the defence against the depressive position, and at present especially against guilt feelings; at the same time the defence is gradually being analysed.

How can he dive into the inside of the body,2 the inner reality, unless he can stand, be sure he is alive, understand what he will find inside?

David's case illustrates the ego's danger from the bad inner objects, the boy fearing lest he will be emptied and exhausted by the inner parents who constantly empty each other.

David shows the flight from inner reality to the interest in the surface of his body, and in his surface feelings, and from these to an interest in the bodies and feelings of other children.

The progress of his analysis also illustrates the importance of an understanding of the mechanism of the omnipotent control of the internal objects, and of the relation of denial of tiredness, anxiety, and guilt feelings to denial of inner reality.

Charlotte (aged 30) has been with me in analysis for two months. She is clinically a depressive, with suicidal fears, but also with some enjoyment both of work and of outside activities.

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1 This was his idea, not in fact true.

2 Now I would be adding the idea of his meeting the mother's depression by diving into her inner world (1957).
Early in the analysis she reported a stock dream: she comes to a railway station where there is a train, but the train never starts.

Last week she dreamed a dream twice in one night. I must leave out much detail, but the gist was that in each she was going up and down the corridor of a train, looking for a carriage with a whole side unoccupied, so that she could lie down and sleep during the journey. A Mrs So and So, a woman she is fond of (and who compares with me in that she fusses over the patient, but who hastens to prescribe for piles while I do nothing to treat them), was telling her to find a place to wash.

In the first dream she found the compartment with a side unoccupied, and in the second she found the washing place. In each dream the train started. It was this last casual remark which reminded me of the stock dream. The piles, which had become a clinical feature at this time, draw attention, obviously, to anal excitement and fantasy, and one is not surprised to find travelling featured in the dreams. In this hour the patient described how she had walked across the park in heavy shoes, which helped her to work off her feelings, also how she had played with her nephew who had made her do gymnastic exercises on the floor.

I could point to my role of mother in the transference, with the patient's indirectly expressed urge to dirty me and kick and trample on my body, and so on, but I feel I should have missed something very important if I had not pointed out the significance of the lessening in manic defence and the new dangers inherent in the change. The train that never started to travel over the lines was a picture of the omnipotently controlled parents, parents held in suspended animation; Joan Riviere's words, ‘the stranglehold of the manic defence’, describe the clinical condition that the patient at that time feared. The starting of the trains indicated the lessening of this control of the internalized parents, and gave warning of the dangers inherent in this, and of the need for new defences should the advance in this direction outrun the ego development that the analysis was bringing about. There had been recent material and interpretations in regard to the taking in of me and of my room, etc.

In simple language, trains which start to move are liable to accidents.

The search for the washing place, in this setting, was probably connected with the development of the obsessional technique, and all that that means in regard to the ability to tolerate the depressive position and to acknowledge object love and dependence.

In the next hour the patient felt responsible for the kick marks on my door and the dirty marks on the furniture, and wanted to wash them off.

Mathilda (aged 39) has been in analysis four years. Clinically she was a severe obsessional. In analysis she has been a depressive with marked suicidal fears. She has been psychologically an ill person since very early childhood, no happy period being remembered at all. At four she could not be left at day school, and from about this time till late childhood her life was dominated by fear of being sick.

The word ‘end’ could not be mentioned in any context in the analysis, and the whole analysis could be almost described as an analysis of its end.1

Just now the first real contacts are being made, anal interest and desire have just arrived, having been deeply repressed.

At the beginning of the hour that I propose to describe, taken from this week's work, she tried to make me laugh, and laughed herself at the thought that by the attitude of my hands I was holding back my water with them. With this patient, as with others, I found that this effort to laugh and to make me laugh, was a sign of depressive anxiety, and a patient may show great relief at one's quick recognition of this interpretation, even bursting into tears instead of going on laughing and being funny. The patient now produced what is called a Polyfoto of herself. Her mother wanted a photo of her and she had felt that if 48 small photos were taken (as by this method) one or two might be found to be good. Also this method corresponds to a hope of putting together the bits of breast, of the parents, of oneself.2 I was asked to choose which I liked best and also to look over all the 48. She intended to give me one. The idea was that I was to do something outside the analysis, and when, instead of falling into the trap (a few days before she had given me warning of such traps), I started analysing the situation, she felt hopeless, said she would not give a photo to anyone, and that she would commit suicide. We had had a good deal on the subject of looking as giving life, and I was to be seduced into a denial of her deadness by looking and seeing.

If I did not take, she felt injured, which linked up with her extreme anxiety in connection with the fantasy of having refused mother's breast (causing mother to feel bad, or injured) as opposed to
feeling angry at being frustrated by mother. The end of each analytic hour was liable to feel to her like an angry refusal of analysis against which she defended herself by stressing the analyst's frustrating powers.

The interpretations brought to light the fact that she felt analysis as a weapon in my hands, and also that *she felt it more real for me to see her photo* (a 48th of her) than for me to see her herself. The analytic situation (which she has spent four years proclaiming to be the only reality for her) now seemed to her for the first time to be unreal, or at least a narcissistic

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1 This patient was able to leave analysis after ten years of regular treatment.
2 I would now see much more in this incident, but I think I would act as I did then.

relationship, a relationship to the analyst that is valuable to her chiefly for her own relief, a taking without giving, a relationship with her own internal objects. She remembered that a day or two before she had suddenly thought, 'how awful to be really oneself, how terribly lonely'.

To be oneself means containing a relation between father and mother. If they are loving and are happy together, they rouse greed and hate in the lonely one; and, if they are bad, robbed, cruel, fighting, they are so because of the anger of the lonely one, anger rooted in the past.

This analysis has been a long one, partly because for the first two years of it I did not understand the depressive position; indeed, not till the last year did I have the feeling that the analysis was really going well.

I have quoted Mathilda chiefly to illustrate the feeling of unreality that accompanies the denial of inner reality in manic defence. The Polyfoto incident was an invitation to me to get caught up in her manic defence instead of understanding her deadness, non-existence, lack of feeling real.

**Summary**

I have chosen to present certain aspects of the manic defence and of its relations to the depressive position. In doing so I have invited discussion on the term inner reality, and its meaning as compared with the meaning of the terms fantasy and external reality.

My own increased understanding of manic defence and increased recognition of inner reality have made a great difference to my psycho-analytic practice.

I hope that my case material has given some indication of the way in which the manic defence is in one way or another a mechanism that is commonly employed and that has to be constantly in the analyst's mind, like any other defence mechanism.

It is not enough to say that certain cases show manic defence, since in every case the depressive position is reached sooner or later, and some defence against it can always be expected. And, in any case, the analysis of the end of an analysis (which may start at the beginning) includes the analysis of the depressive position.

It is possible for a good analysis to be incomplete because the end has come without itself being fully analysed; or it is possible for an analysis to be a prolonged one, partly because the end, and the successful outcome itself, become tolerable to a patient only when they have been analysed, that is, after the completion of analysis of the depressive position, and of the defences that may be employed against it, including the manic defence.

The term manic defence is intended to cover a person's capacity to deny the depressive anxiety that is inherent in emotional development, anxiety that belongs to the capacity of the individual to feel guilt, and also to acknowledge responsibility for instinctual experiences, and for the aggression in the fantasy that goes with instinctual experiences.