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A new imaginary



HAVING A BODY: SOME CLINICAL CONSEQUENCES OF LACAN'S LATE TEACHING¹

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ABSTRACT

In Lacan's late teaching, we find a change of perspective for psychoanalytic clinical practice. This new perspective implies a reconsideration of the imaginary register and of the symptom based on the writing of the Borromean knot. This work seeks to explore some references that we find in the later Lacan, which are essential to think about the new perspective and the clinical consequences that can be drawn from them.

KEYWORDS

Body image | Symptom | Out-of-body *Jouissance* | *Jouissance* in the body

INTRODUCTION

The invitation to contribute an article to this LAPSO's issue, entitled "A New Imaginary," was particularly interesting for me. On the one hand, it shows our community's growing interest in the reformulations of the imaginary register that we find in Lacan's late teaching. On the other hand, it allows me to present some ideas from the work I have been doing with my EOL colleagues, which became part of a series of three EOL School nights in 2017. These were entitled "Sinthome and Body Image - On Clinical Cases" and have been recently published. There, we tried to place ourselves in a new perspective of psychoanalytic clinical practice, based on the reconsideration of the imaginary dimension by the later Lacan. As Jacques-Alain Miller pointed out a few years ago, if we follow Lacan in his late teaching it is not only for a decoding pleasure, but because there we will find aspects that can provide clinical guidance and also allow us to reconsider the efficacy of our practice (Miller, 2014).

In fact, what we have observed for a long time now is that the people who come to our practice are those suffering from what is not working for them, but who can be said to be unanalyzable because they do not see fit to let the unconscious decode their symptoms. But demand insists and is directed to us; it leads us to reconsider, following our training and education, ideas which we thought were the very foundation of our practice. It is precisely at that point where Lacan opened a new horizon with his latest notion of symptom. This is a horizon to explore over and over again so that an orientation can be built with it.

Now, when we listen to some of these cases, from the first interviews, we find the suffering caused by the impossibility of sustaining a consistent body image.

A young man suffers a severe inhibition every time he is faced with a scene where something he is interested in is at stake. As it is a lifelong difficulty, he describes it as an insurmountable barrier

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which immerses him into a deep sense of devitalization. Although the inhibition is already a defense against that which might be implied by a step toward the hole of foreclosure, it is but a fragile solution because it always leads him to question the meaning of his life. When the details of those scenes are examined, one can find out what it is that does not work for him: he cannot construct an image of himself with which to enter those scenes. Everything that he can imagine in advance fails, as he cannot “feel” that he has a body to deal with these situations at that moment. A girl says that she wants to be a boy. More specifically, she wants to have a superhero’s body as soon as she sees it on TV. The fundamental disruption for the girl appears in relation to her body. It is a body marked by a certain deficiency at birth. From that moment on, she has enormous difficulty in building a body and, particularly, sustaining a stable body image. The girl presents a series of phenomena characteristic of a loose imaginary which cannot be knotted: from not being able to walk in her early years to not being able to locate her own image in a mirror, as well as permanent splitting effects of her image. In this case, wanting to be a boy appears as an attempt to solve her difficulties in relation to her body image.

A young woman has succeeded in an artistic activity, as a result of hyper-rigid routines to which she subjects herself on a daily basis. It is a resource which she discovered as a child and which allowed her to sustain herself within the family disorder where she lived. Although we can locate this resource as a substitution, its unrestricted nature constantly pushes her to a difficult edge, with a risk of passage to the act. In this case, her body image is constantly threatened by the excess of routines on which she does not seem to be able to set a limit.

As we can see, these are all subjects who, in their singularity, show us from the outset their difficulties in building a consistent body image. Body imaginaries which are not knotted, which get loose, which fall; in other words, they are subjects who cannot “feel” that they have a body. Starting to concern ourselves with these patients’ symptoms, such as difficulties, failures, and disruptions related to body-image building, leads us to a number of complex questions of enormous clinical importance: How can the body image be sustained beyond the Ideal subsidiary resort to the Name of the Father? How is it possible “to have a body” in the sense which this expression takes in Lacan? What is the relationship between “having a body” and the symptom as a body event? These questions relate to Lacan’s late teaching, where a new perspective opens for psychoanalytic clinical practice.

Éric Laurent (2014) notes that the limit of the body as consistency is, precisely, developed in Lacan’s late teaching, where what holds the *parlêtre* together is not the symbolic, but the body as imaginary consistency. If it is the body as imaginary consistency what holds the *parlêtre* together, it seems to be a good path in the direction of the notion of *sinthome*.

Exploring that path is what I propose in this text, based on the consideration of some steps in Lacan’s late teaching, without losing sight of the possibility of drawing a few clinical consequences from it. These are the first steps in a work of elaboration where everything is still to be done.

THE IMAGINARY IN ITS LIMITING FUNCTION

If we return to Laurent’s reference cited above, we can see that Lacan not only locates the body as the imaginary consistency that holds the *parlêtre* together, but also assigns a limiting function to it. First, we should recognize the surprise that such formulation causes! Following Lacan’s teaching itself, the imaginary was always an obstacle, ignorance, a veil, etc., for us. We never thought about it as a limiting function, a function which was always attributed to the symbolic order. Thinking about the imaginary as performing a limiting function implies a strong reconsideration of this register.

We find the beginning of this reconsideration on the first pages of Lacan’s *Seminar 21*. Firstly, decidedly supported by the Borromean knot, he tells us: “the imaginary is as important as the

other dimensions” (Lacan, 1973-1974). That is, at the level of the real of the Borromean knot as a structure, the three registers are strictly equivalent. Secondly, he notes that “the imaginary is always an intuition of what is to be symbolized” (Lacan, 1973-1974). It should be made clear that, at this point in Lacan’s teaching, the symbolic of the knot is not language, the symbolic order, but the pure phonation effects of *lalangue*. Effects of the meaningless swarm of signifiers which have a limitless nature in their own functioning. Then, what does the imaginary sense?

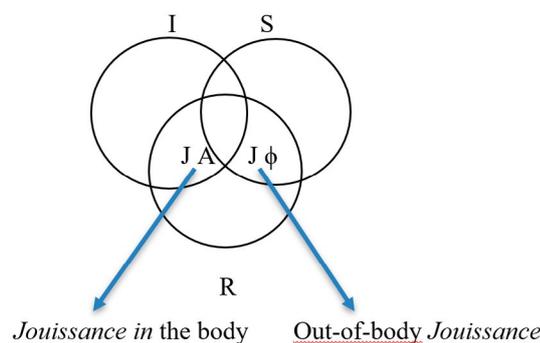
It senses... that which can be chewed and digested of that maddening symbolic which has no limits whatsoever in itself and which cannot be tolerated. We have to stop the symbolic-real very quickly. This is done by knotting the imaginary to it. Based on this idea, everything we have thought of as a symbolic limit, as the Name of the Father and its metaphor, as castration, as phallic signification, as language and as discourse, moves toward the efficacy of the imaginary intuition. Symbolic parasitization can possibly be elaborated by something capable of knotting the body image. (Indart et al., 2018, p.10)

Then, it could be stated that at the Borromean knot level, the imaginary may or may not be knotted, but if it is, it works as a limit for the intrusion of the symbolic. That the possibility of putting the parasitization effects of *lalangue* in order—as well as setting a limit on them—stems from a characteristic of the imaginary is already an indication of a change of perspective from which consequences for the orientation of clinical practice can be drawn.

THE REAL OF THE IMAGINARY. JOUISSANCES

The second step that I consider important to note can be found in Lacan’s (1974 [2015]) *The Third*. This writing can be regarded as a kind of founding text of his late teaching and, in that sense, a turning point regarding his elaborations about the notion of symptom.

With the new writing of the Borromean knot, as the real of the structure, Lacan can radically differentiate, in the field of *jouissance*, two absolutely different modalities. He distinguishes, on the one hand, a type of *jouissance* that is located at the intersection of the symbolic and the real, which he characterizes as an “out-of-body” *jouissance*, and, on the other hand, another *jouissance* that is located between imaginary and real, whose characteristic is to be a *jouissance* “in” the body.



As we can see, the writing of the Borromean knot not only makes the distinction between these two types of *jouissances* possible, but it also shows what is excluded for each of them. Therefore, the *jouissance* that is articulated between symbolic and real is outside the imaginary, whereas that which results from the articulation of imaginary and real is outside the symbolic.

Lacan names phallic *jouissance* the *jouissance* which is located at the intersection of the symbolic-

real. I think it is important to note here how I understand the expression “phallic *jouissance*” at this point in Lacan’s teaching, since I believe that it is a source of misunderstanding and different interpretations among psychoanalysts. I do not think that it refers to the *jouissance* articulated to the phallic signifier, that is, to the operation of symbolic castration linked to the Name of the Father, but to that which accounts for the effects of the entrance of *lalangue* into the living body. Now, how can we understand that it is an out-of-body *jouissance*? We know that it is a *jouissance* that produces the symbolic, the entrance of *lalangue* into the body, and that it is precisely that effect which constitutes the objects *a* which are located at the edges of the body. In his course *Analytical Subtleties*, Miller refers to the “out-of-body” *jouissance* in these terms:

[...] the signifier affects the body of the *parlêtre* because it fragments the *jouissance* of the body and those pieces are the objects *a*. Then, if we stop at this formula, there is supposed to be a first statute of *jouissance* which I used to call *jouissance* of life and which, due to the fact that this is a speaking body in the human species, its *jouissance* is modified in the form of fragmentation and of condensations in what Freud called erogenous zones, each relative to a type of object. (Miller, 2011, p. 278)

It is a *jouissance* experienced in the erogenous zones and, therefore, it never manages to spread to the rest of the body. It marks a regime of emptiness and excess, of a limitless plus and minus, which in its own functioning, says Lacan, bursts the screen “because it does not come from inside the screen” (Lacan, 1974 [2015], p. 20). If we follow him in *The Third*, where he points out that:

The body at least enters into the economy of *jouissance*—that’s where I left off—through the image of the body. The relationship of man—at least what one calls by that name—with his body, if there is something that emphasizes well that it is imaginary, it’s the significance that the image assumes here. (Lacan, 1974 [2015] p. 20)

It is understood that phallic *jouissance* is “out-of-body” because, precisely, it is a *jouissance* which is outside the imaginary; it is contradictory to sustaining the image of the body.

Now, the novelty which appears in Lacan’s late teaching, although multiple antecedents can be found and reread from it, is that the field of *jouissance* is not reduced to phallic and drive-related *jouissance*. The imaginary dimension also has its real, a different real from the one that articulates the symbolic. It is a *jouissance* which, by definition, is outside of language and is experienced, felt, “in” the body. It is precisely that knotting, the one of a *jouissance* with the imaginary, what gives consistency to the image of the body, since it provides it with a real support. It is because of that *jouissance* “in” the body that the *parlêtre* “feels” that “he/she has a body”. This knotting, which gives a real weight to the image of the body if it occurs, is logically prior to the construction of the Other and the resort to the Ideal which, based on the “optical scheme” in Lacan’s early teaching, was the way in which we could understand how the body imaginary was sustained.

Thinking about what holds the imaginary knotted may be a good path in the direction of Lacan’s late elaborations on the symptom.

BODY EVENTS

The young man who I referred to in the introduction happens to pass by a confrontation scene with a child where he says he felt that he was able to make an image of himself for the first time. What characterizes this scene is that it takes place under minimal symbolic demands; nothing of the order of “taking the floor” is at stake in it. After that situation, and with the resource he obtained there, he begins to feel he can enter other scenes which had been insurmountable for him up to that point. He also points out that he feels he has found something which could mean his cure.

A colleague suggests that the young artist could be an understudy in a show for which she would

have to change the dance style on which she had been working so far. The encounter with the new style gives her an unprecedented feeling in her life. She feels another body, absolutely different from that subjected to maddening routines and always on the verge of fragmenting. After this experience, she decides to start a change in her artistic career, where more room can be made for the new style and for the body sensation which accompanies it.

Also by chance, the trans girl finds on the television screen the resource which allows her to feel her body image. In her case, this accounts for the fact that the demand for a sex change has nothing to do with questions of object-choice or sexuation, but it is based on the disruptions in her body at the level of the difficulty in sustaining a consistent body imaginary.

In their singularity, the three cases show events which seem to imply a before and after in the existence of these subjects. These are contingencies which become events, as they produce a knot with which another body is assembled, and which consist, descriptively, in the effect of feeling a *jouissance* “in” the body, a *jouissance* that is knotted to their body image. They also testify to how “feeling” that they have a body image stops, albeit momentarily, the parasitization of *lalangue* and its out-of-body *jouissance*, without this being due to the action of any Name of the Father. Now, although the scenes where those “body events” and their effects occur can be located fairly precisely, it is not easy to understand how that happens. Pondering what can be that which ties a knot to the imaginary finds answers in a new notion of symptom which can be found in the later Lacan.

Firstly, in *The Third* Lacan points out that he calls “*symptom* that which comes from the real” (Lacan, 1974 [2015], p. 15). This simple formulation is a novelty whose consequences we may not have weighed completely. Stating that the symptom comes from the real implies distancing himself from Freud and from the Lacan of the return to Freud. In Freud, the symptom was something linked to the repressive action of the father, that is, to a product of the symbolic. The drive-related demand was found in the “no” of the paternal function which promoted repression, and the symptom was the result of a transaction between the drive-related demand and the repressive instance, a formation of commitment. Redefining the symptom as coming from the real separates it from any reference to the Name of the Father and leaves it on the contingency plane.

The second novelty which can be found in that same writing is that the symptom, which comes from the real, “is not reduced to phallic *jouissance*” (Lacan, 1974 [2015], p. 23). This means none other than that the symptom not only articulates the symbolic-real “out-of-body” *jouissance*, but also that other *jouissance*, imaginary-real *jouissance* “in” the body. Having located these two novelties in Lacan’s reformulation on the symptom, I think it is possible to enter, without getting too lost, the definition of the symptom as a “body event” which we find in the writing *Joyce the Symptom* (Lacan, 1976 [2012]). There, Lacan holds that the symptom is an event linked to the body which one “has”, that is, linked to an experience of *jouissance* “in” the body, from which one feels that one has that body. It is precisely in *Joyce* that Lacan can locate the function of the symptom—as a body event—as the resource which allows him to knot his body imaginary. It is the *sinthomatic* certainty of being “the artist,” the event which allowed him to re-knot his body image, the one which fell like a shell. That was for *Joyce* a certainty which gave him a body and allowed him to hold it against the intrusive effects of *lalangue* which he suffered. It is precisely *Joyce*, whom Lacan—not by chance—calls *Joyce the Symptom*, who shows the knotting function of the symptom as a body event.

We arrive, then, at the fact that the symptom, a contingency which comes from the real and which is not reduced to phallic *jouissance*, is what may allow us to keep the imaginary knotted and to “have a body.” A body which, in order to sustain itself, no longer depends on a trait of the Ideal, but on the knotting effect of the symptom. As Éric Laurent (2016) points out, it is about a “having” first, prior to the dialectics of being and having dependent on the field of Other.

It turns out, as noted in the introduction to the text, that an ever-increasing number of people come to our practice suffering from not being able to sustain their bodies because they do not feel them. So, for that clinical practice, albeit not exclusively, in the reconfiguration of the imaginary and of the symptom in its knotting function in Lacan's late teaching, we find a new perspective which opens a horizon for the position of the analyst and the efficacy of his/her practice. A position which is expected to really be beyond the father.

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