Discussion of Brenner: Reflections on Psychoanalysis

Dr. Stephen M. Sonnenberg, M.D.

Brenner begins with a discussion of why psychoanalysis is a science. He informs us that the fact that it deals with the nonmaterial world does not distinguish it from other branches of science, and explains that the fact that its theories are inferences does not distinguish it from other branches of science. His assertion at this point is clear; though while not apparently controversial, he has not actually proven to my satisfaction, that psychoanalysis is a science.

Having "established" that psychoanalysis is a science, Brenner tells us that it must conform to the rules of science. These are that it follow the rules of logical discourse, not depend on magical or miraculous explanations, not contradict known facts, and employ parsimony in explaining the phenomena within its domain. His position is again clear, and again not apparently controversial, but as we shall see, this part of his argument will later be used in a way the unsuspecting reader may not, at this point, expect. That notwithstanding, an imaginary reader may be more than willing to go along with Brenner at this point in the essay.

Brenner next reminds us of the principles that psychoanalysts agree constitute a psychoanalytic perspective. This is a section on consensus. The principles include the existence of conscious and unconscious mental activity, psychic causality, and psychological development. He adds that the ideas he espouses about infantile sexuality and conflict are not accepted by all analysts, but that to him these are principles of a valid psychoanalytic perspective. It is at this point that this paper becomes more problematic. For what we don't yet know is that Brenner will show us, as the essay unfolds, that his ideas about infantile sexuality and conflict conform to the requirements of a science, and all other theories do not. He has constructed an argument that will leave no room for competing perspectives. As I will show in my discussion, as a technique of debate this is useful, but it does not allow for an appreciation of how various psychoanalytic perspectives add to the analyst's understanding of the human condition.

To return to Brenner's essay, he next tells the reader that he will look for support for conflict theory from nonanalytic sources of evidence. He chooses religious "myth and belief," though at one point in the paper he tells us that other nonanalytic sources would bear him out. He asserts that the Judeo-Christian-Muslim belief system supports the idea that incestuous and parricidal wishes cause conflict in adult life. He examines the metaphor of that belief system to make his point.

He then informs us that since nonanalytic data support conflict theory he concludes that conflict theory is valid. He goes on to suggest that any psychoanalytic theory that "ignores or plays down" conflict theory is not scientifically acceptable, because "it is not the best conclusion that can be reached on the basis of the available evidence." He fails at this point to address a related point, that the available evidence may lead a scientist to decide that no conclusion is now warranted.

Brenner realizes at this point that he needs to further support his assertions, so he broadens his argument. He indicates to us that he views the theories of Klein and Lacan as invalid, because these are theories that incorrectly assume the existence of language dependent mental functioning either before birth or before the acquisition of speech. These theories, therefore, should be discarded: They cannot qualify as scientifically valid. As the paper goes on he includes self psychology and interpersonal psychology as invalid theories, and in fact declares all theories other than conflict theory invalid, all for the same reason. Brenner has the reader in a box: How can the reader espouse a theory which isn't scientifically valid? So how can the reader not conclude that infantile sexuality and conflict theory is the only valid psychoanalytic theory, when it is the best theory, the only theory that is "scientific" and can be validated "scientifically" on the basis of the available evidence?

It seems to this discussant that Brenner has at this point done us a disservice, because by employing his line of argument he deprives us of examining psychoanalytic theory using a different set of considerations. Might we not want to consider that many of the ideas of Klein, Kohut, Sullivan, and others are important hypotheses that require integration into a unified hypothetical framework for determining over time a scientifically acceptable psychoanalytic theory of human development and clinical technique? Might we not want to consider that these integrated hypotheticals can be elevated to the status of a unified theory when and if scientific methods are developed which allow for their further validation? Might we not also want to consider that the theory of infantile sexuality and conflict should be reduced to an integrated
hypothetical requiring further testing? Certainly, nothing Brenner has written convinces this reader that his ideas have been sufficiently examined to bear the designation of theory, which requires, though he doesn't say this, sufficient and convincing available evidence.

Brenner now goes on to discuss the definition of a psychoanalytic datum or fact. He concludes, in the spirit of what he has suggested earlier, that all psychoanalytic data are inferences, conjectures, best guesses, sense impressions, and reflections of bias. He circles back to his central idea, that one cannot consider as valid any observation that rests on a theory that complex mental functioning occurs in a brain which hasn't the capacity for complex “word dependent thoughts.” And he reiterates his belief in the essence of what constitutes psychoanalysis: There is recognition of conscious and unconscious thought, psychic causality, sequential development, and conflict based on infantile sexuality. He has disarmed us by reminding us that our knowledge is all inferential, and then asserts that only his theory has any chance to be scientifically valid. He has taken from us the counterargument that the inferences he draws are not convincing. He has taken this objection from us because inference is all we have, and his is the best given the available evidence.

Brenner next suggests that clinical observation cannot be used to resolve the debate regarding correct theory, because the clinician will inevitably be biased in interpreting clinical data, as opposed to nonanalytic data, in keeping with his or her theoretical predisposition. At this point Brenner has discarded theories other than his own, and takes from us the tool of clinical observation and debate to investigate hypotheses or theories. To reiterate, then, he has not convincingly shown this reader that his theory is correct; he has failed to consider that preoedipal and oedipal development, preverbal and postverbal developmental experience require integration into a new hypothetical framework for psychoanalysis. Yet now we cannot use clinical experience to argue back, because Brenner has effectively closed off discussion along clinical lines.

As Brenner nears the end of his contribution he finally tells us that if sufficient evidence is lacking there should be no decision as to a correct theory of psychoanalysis. By this time his theory, of course, has been tightly and logically argued, and though he failed to convince this reader of the correctness of his position by demonstrating flaws in the thinking of others, or by the use of nonanalytic data, many will not be able to integrate this belated statement concerning sufficiency. No doubt he would disagree, but I think that the conclusion one can draw from what he has said is that no theory is as yet validated, all are in question.

As I near the end of my discussion I would like to offer a reprise in the form of a personal recollection. In 1982 I published “A Transcultural Observation of Posttraumatic Stress Disorder” in a psychiatric journal (Sonnenberg, 1982). In that paper I argued that Hamlet suffered from posttraumatic stress disorder. I did not offer a more traditional psychoanalytic interpretation, based on infantile sexuality and conflict theory. I am sure that my interpretation reflected observer bias, because at that time I was involved in an applied psychoanalytic research project, investigating the nature of psychic trauma in veterans of the Vietnam War. Despite that, I would have agreed that a psychoanalytic theory of causality of the psychopathology in the “case” in question required integration of the role of the person's early life experience with that of his later life experience. (Here, by the way, Brenner's elimination of theories that antedate the development of speech would not apply.) But I mention this experience to illustrate more than that point. As I recall my experience with my essay I find that it highlights for me several basic errors in Brenner's paper. As noted, he fails to recognize the limitations in his argument supporting infantile sexuality as the only acceptable psychoanalytic theory. He fails to recognize the need to propose an integrated hypothesis which includes aspects of oedipal and other formulations. He fails to recognize that the study of nonanalytic data can support other theoretical perspectives. He fails to recognize that observer bias can influence the interpretation of nonanalytic data. He fails to recognize that observation and discussion of clinical material, in an atmosphere of creative hypothesis building, is essential in developing research strategies for the future.

In the end, to me Brenner's essay suggests that a new, integrated hypothetical framework for the further development of psychoanalytic theory is necessary. This must be accompanied by a new research agenda. Brenner's interest in neuroscience is inspiring, yet he does not seem to appreciate that in the future methods of neuroscientific research may emerge that will allow more sophisticated scientific study and understanding of the influence of preverbal experience on verbal experience. Such a possibility is not magical thinking.
In an essay to be published in this Journal, I and my colleague Donna Kline propose a set of principles, which might serve as a foundation for investigating the validity of psychoanalytic theory, using clinical material (Kline and Sonnenberg, in press). The foundation stones are: (1) There sometimes exists a powerful wish for self-knowledge and self-knowledge can lead to change; (2) that analysands often experience the analyst as having characteristics of important people from his or her past; (3) that some mental activity takes place out of the immediate reach of consciousness; and (4) that present actions often repeat patterns of events (with related feelings) that occurred in the past. I wish to suggest here that when using this set of seemingly simple principles as a starting point, clinical and nonclinical (applied analytic) data can be studied and integrated to create a new picture of what is valid in psychoanalytic theory. This picture can be integrated with the work of researchers in human development and neuroscience to enhance that theory, over time.

References