

The message of psychosomatic diseases

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Kant, Schopenhauer and Helmholtz brought to Europe a tradition of critical psychology, which, as its starting point, questions the idea of faultless perception and focuses on how the image of the world is formed through illusion and misunderstanding. These men were accompanied by Sigmund Freud, whose interest centered primarily on psychopathology. This era was followed by a long period shaken by political, historical, and cultural crises that brought new, fashionable ideas that indefinitely stopped many developmental trends with fruitful beginnings. Central European cultural heritage was replaced by Anglo-Saxon cultural influences. The heritage of Kant and Helmholtz was forgotten, and Freud's thinking was pulled from its roots and given a strongly technological and practical emphasis. Simplified orthodoxy with stringent positivism ruled the scientific thinking of the 1950s and 1960s. Meanings, qualities, experiences, psychosomatics, and psychoanalysis were temporarily cast into the trashbin of science. Today cognitive theory holds a strong position in psychology, and the research interests of those who practice it vary a great deal. They extend in many directions and have brought research in the history of psychological ideas back to life. This research is rapidly altering many distorted and ossified views.

Key terms development, history, psychiatry.

When we look at human knowledge and at the changes in it, which we call advances, we can see the interaction between our world view and new insights. The world view is the viewpoint which guides the direction of our thoughts, the framework within which we attempt to build our understanding and which enables us to differentiate between things we consider important from those which we do not. Innovations, new scientific discoveries, and new perceptions change our world view, and we start out on the road to which it points. It becomes not only a question of the accumulation of wisdom, but also a question of changes in viewpoints, as old wisdom is forgotten and new thoughts take its place.

One can observe the same phenomenon in psychosomatics. During the past 50 years the position of psychosomatics and the contents of psychosomatic knowledge have already changed several times. Some 40 years ago psychosomatics was considered the ramblings of untrustworthy eccentrics. Today, the psychosomatic viewpoint is generally accepted in medicine, and it is included in the basic training of all physicians. Along with these changes our concept of the human being has also changed. The order of significant and insignificant things

is different from the old order. The boundaries between biological, psychological, and social viewpoints have rather become more fuzzy than differentiated. Even the need to speak about specific psychosomatic medicine is fading away.

A brief outline of the history of psychosomatics

During the past several decades we have become accustomed to two approaches to psychosomatics—namely, through the knowledge that natural science offers and the ways and means of psychology, which studies personal experiences and meanings. A hundred years ago the quantities of natural science and the qualities of psychology appeared side by side without any conflict. This way of thinking was called dual aspect monism. It was initiated by Immanuel Kant, who permanently disproved Aristotle's view that perception is a faultless image of reality. Kant's main work "Critique of Pure Reason" from 1781 (1) started a lasting and final revolution in our

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conception of the human mind and perception. Into the epistemology of European philosophy, stepped a constantly active perceptor, who himself creates the contents of what he perceives. Kant's intention was to show that we cannot perceive reality, "das Ding an sich", but merely reflections of reality. These reflections derive from universal a priori ways of seeing the world.

Philosophers after Kant were intrigued by the question of a priori. This initiated, among others, a romantic school, according to which each individual creates his own completely subjective world (2). Schopenhauer (3) supported the a priori view, based on the functioning of the brain.

The study of the history of ideas has revealed that some views that have become self-evident during the last few decades are merely corruptions of original ideas in a manner that has been detrimental to the development of thinking. Helmholtz (1821—1894) was one of the great names of his time in physiology, and the founder of the psychophysiology of perception. In the eyes of posterity his picture is distorted; he is seen as purely physiologically oriented and as a representative of research hostile to psychology. We have forgotten that, for Helmholtz, Kant's philosophy was a similar foundation for thinking, as information processing is to many cognitive researchers. Another widespread misunderstanding concerns Freud's position in the scientific world of his own time. He has been characterized as a disputed lonely genius, who stayed aloof of the scientific thinking of his time. As a matter of fact, Freud admired Helmholtz, and Freud, in his psychology, extends Helmholtz's perceptual psychology toward internal perceptions (4).

Helmholtz's famous model of a psychological illusion is based on an astoundingly simple perception. When we apply strong pressure on our right eye, we experience an optical phenomenon with our left eye. Helmholtz's explanation was that the optical phenomenon was a recollection of a previous strong optical stimulus, and he called this illusion an unconscious misinference in which the familiar past is mixed with the unfamiliar present (5). The experiencing of the perception does not provide knowledge on the character of the stimulus, but only on its existence. Helmholtz considers himself a follower of Kant, and he was of the opinion that he had particularized Kant's view of the a priori. It was now replaced by memory.

The intersection of post-Kantian philosophy and empirical physiological research offered the Viennese school of psychology a starting point for constructing a model of thought, perception, and memory. The thinking of that period was characterized by dual aspect monism. It contained the proposition already presented by Kant (ie, that scientific knowledge of reality is constructed upon quantities only, but that knowledge of experiences concerning meanings is qualitative). This view did not

undervalue psychological qualitative knowledge, but made it possible to move on both sides without conflict.

Helmholtz and his followers did belittle the romantic post-Kantian philosophy, which considered experiences merely as dreams, but they definitely did not underestimate the decisive play of role meanings in the coming into being of perceptual experiences. The signs of qualitative differences were memories based on experience, and with this view the foundation was created for scientific psychology.

The influence of Kant, Schopenhauer, and Helmholtz had brought into Europe a tradition of critical psychology, which, as its starting point, questions the idea of faultless perception and focuses on how the image of the world is formed through illusion and misunderstanding (6). They were accompanied by Sigmund Freud, whose interest centered primarily on psychopathology. Kant's unknown outer reality is, in Freud's thinking, expanded to the unknown inner reality (7, 8). Human development is a slow expansion of the world picture toward a consciousness of one's own limits, which always takes place through practical experience, guided by failure, which is constantly threatened to come to a halt due to ostensible truths.

Other trends in the study of experiences

As a way of thinking, dual aspect monism has fallen into disuse. We have also forgotten that, during the end of the 19th century, dual aspect monism was accepted as scientifically valid. It dealt without conflict with both personal meanings (qualities) and physiological empirical quantities (9).

This was followed by a long period shaken by many political, historical, and cultural crises. The world of science became muddled and penetrated by new fashionable ideas, which for a long time stopped many developmental trends with fruitful beginnings.

Some of these new ideas had, as their goal, to remain completely within the framework of the quantitative method of natural science, and they belittled personal meanings because they were difficult to generalize. "Unifying Science" was a popular concept in the 1950s within the philosophy of science. It represented strict positivism, a kind of scientific fundamentalism, and its program was to create a scientific concept of the world which could be reached through a unified theory of natural science.

Meanwhile, new trends, which were in opposition with positivism and called for a different scientific purity, developed, such as Husserl's phenomenological philosophy, which was constructed upon a world of pure meanings that would not allow within their sphere any-

thing that could be quantified. This development led to a kind of state of war, which was characterized by a severe split into two parts within the science of psychology. The quantities of natural science and of psychological meanings became enemies, instead of points of view that complement each other. In these circumstances psychosomatics became homeless, and it searched for support from many directions, such as social psychiatry, practical clinical medicine, physiological laboratories, and the application of psychological tests.

Toward a new integration

Dual aspect monism lived on as Helmholtz's inheritance as a part of established medical thinking until the beginning of the 20th century. The First World War scattered a great part of the Central European cultural heritage, which was replaced by Anglo-Saxon cultural influences. The heritage of Kant and Helmholtz was forgotten in the libraries, and Freud's thinking was pulled from its roots and acquired a strongly technological practical emphasis. Simplified orthodoxy with stringent positivism ruled the dominant scientific thinking of the 1950s and 1960s. Meanings, qualities, experiences, psychosomatics and psychoanalysis were temporarily cast into the trashbin of science.

Even this phase was temporary. Today cognitive theory holds a strong position in psychology. It is "im-pure", consisting of many heterogenic ingredients, containing various cognitive theories, linguistics, philosophy, research in artificial intelligence, neurophysiology, computer science, and so on. It is far from monolithic positivism, and the research interests of those who practice it vary a great deal. They extend in many directions and have brought back to life research in the history of psychological ideas, which is rapidly altering many distorted and ossified views.

Psychosomatics and psychoanalysis

The challenge of understanding is a necessary part of clinical work in psychosomatics. One must understand the client. His or her paralyzed ability to do psychic work must be enlivened, and the psychic metabolism must be activated.

The challenge of understanding was first met by psychoanalysis, with a tradition of psychosomatics that goes back to the 1920s. Since that time psychoanalytical psychosomatics has gone through many phases, which have reflected the psychoanalytical thinking of each period (10, 11). Today the prevailing way of thinking empha-

sizes that unfinished psychic work and the resultant "badly digested" and incomplete contents of the mind predisposes one to somatic disorders.

The functions of the body are disturbed as bodily happenings and functions are set to work with such things that should primarily be dealt with by the mind. As a consequence, psychosomatic symptoms may develop.

The mind is a function, in a certain sense an "organ" that can deal with the complexity of life as a whole. It is beneficial to use and burden it so that the body is not unduly strained. It is better to digest things in one's mind rather than to leave the work to the stomach. It is better to deal with feelings of threat through psychic means than to remain in a constant state of physical struggle and preparedness. Such a thought is completely in opposition with the traditional view, according to which it is beneficial for bodily health to avoid whatever is burdening the mind. The psychosomatic patient has, in fact, used his possibilities to avoid what is disturbing him or her psychically. The inability to recognize one's emotions and to find for them symbolic expressions that can be shared with others has also been called alexithymia. It contains an assumption of a structural characteristic of the central nervous system. However, experience indicates that it is primarily a question of a characteristic that has developed in the scarce interaction and the restricted emotional atmosphere during early childhood.

The psychobiological necessity of approving reciprocity

The researchers of psychological development during early childhood have, during the past 10 to 15 years, gathered research results that unanimously emphasize the fact that human social facilities are an essential part of human biology from birth onwards. Brain research tends to indicate that the infant's sensory synaptic connections in the brain either come into being or remain undeveloped, depending on the sensory stimuli that the infant receives. This tendency towards malleability remains until approximately the third year of life (12). During this time a great number of synaptic facilities are eliminated, and the ones that are left are the ones that have received stimuli from important persons who have a close relationship with the child.

From the time of its birth the infant is equipped for many-sided interaction with the parents. A normal mother is extremely sensitive in understanding the infant's wordless needs. Adequate responses on their part enliven the infant to develop forms of interaction that are bodily, rhythmical, and express the level of emotional tone and agitation.

The significance of visual contact

Visual contact between mother and child has a much greater significance than what was thought earlier (13). The approving, focused eye contact of the mother encourages and pacifies the child, and the lack of the mother's eye contact paralyzes the infant. Experiments have been conducted in which the mother was told not to respond to a young child's attempts to catch the mother's approving and interested gaze. At first the child was baffled for a short while, retreated, but was then prepared to repeat the attempt. If the mother did not respond even during the second time, the child became upset within half a minute. The child lost the ability to coordinate his or her movements, and the onlooker got the impression that the child's whole existence fell apart. In the end the child began to cry pitifully and hopelessly. This seemingly everyday event illustrates something extremely important from the point of view of development. It illustrates the tendency toward paralysis, which, if accentuated, will decisively mold the child's whole later life and his or her relationship with both others and himself.

The search for approving reciprocity, and the paralysis when it fails, will for the moment shatter the whole existence of the child, who loses his or her vitality and becomes helpless and unable to perform. When the paralysis is repeated too often, it makes the search for reciprocity such a threatening experience that it is avoided or shelter is taken from it.

Taking shelter from this threat will lead to a great number of disorders in social intercourse: resigned or violent withdrawal, forced behavior, internal limitations, and later on psychosomatic disorders. The many forms of depression, the tendency to shame, the tormenting of oneself and others during social intercourse, the inability to understand others, and alienation from oneself are features that, together or separately, reflect the consequences of retreating from approving reciprocity. This characterization is extremely simplified, but it may illuminate the ingredients in the predisposition to psychosomatic reactions.

The scientific community has been very slow in accepting the fact that social intercourse that contains ap-

proving reciprocity with one's human environment is a biological necessity. A human being is not born into a vacuum where he or she must grope alone along the way toward functioning meanings and toward knowledge. This progress occurs through the search for answers from a constantly available social environment, which must have the capacity to understand.

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