DGB Neo-Psychoanalysis (NP): Re-Working and Re-Vitalizing Freudian Theory and Beyond: Connecting DGBNP with Neurology

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Good morning/afternoon ladies and gentlemen,

My goal in this presentation is to show how psychology and neurology ‘fit together’ and ‘interact together’ which will set up my later discussion of how Freud’s concepts of the ‘id’ and ‘The Oedipal Complex’ -- or at least my mutations of them -- can be interpreted to fit inside a neurological model and an anatomy of the brain that includes The Limbic System, The Temporal Lobe and The Amygdala among other ‘brain parts’ that could or can also be included or classified in this region of the brain -- or neurological/anatomy model of this region of the brain. When we flip back from neurology to psychology, we can classify both the id and The Oedipal Complex as belonging to that part of the mind that Freud called ‘the unconscious’. There are other classifications and sub-classifications that need to be made here that I will come back to when we come back to the essay I have in mind. For now, let us come back to ‘the fitting game’.

Almost everything -- if not everything -- we say, write, and do in life can be classified into some sort of ‘fitting game’. Perhaps (no perhaps) if I am trying on a pair of jeans that I wore 20 years ago, I am playing the ‘not fitting game’. Or an artist who juxtaposes his or her imagination which he or she projects onto his or her canvas -- who deliberately wishes NOT to ‘accurately represent reality’ -- is playing the ‘not fitting game’ -- and now I have opened up a huge and almost endless can of worms because now I have to say that whoever is purposely not telling the truth is playing the ‘not fitting game’ -- purposely trying to create a ‘false manifest reality’ that does not accurately reflect the person’s ‘underlying or latent sense of what is really real’. We see this oftentimes in politics, business -- indeed, anywhere there is a ‘hidden agenda’ or ‘hidden motive’ behind not telling the truth. We see it with advertisers, pleasers, teasers, covert rebels and anarchists, and passive-aggressive personalities...I will stop there but this is the subject matter of my many extrapolations of Freud’s 1938 essay (a year before he died), ‘Splitting of The Ego in The Process of Defense’ (or Offense -- my addition).

At this point, I was planning on giving a quick editorial history of Western Epistemology from David Hume forward...but now I have decided that I will save that for another essay. Or not. Let me sum up Hume and Kant in two sentences. With Hume, it was: ‘If you can’t see it, then it doesn’t exist -- commit it to flames!’ With Kant, it was: ‘You Kant know!’

This brings us to two philosophers who were remarkably similar in their presentations -- and at this point in time, I can only assume that Alfred Korzybski was influenced by Ludwig Wittgenstein even though Korzybski was 10 years older than Wittgenstein (birth dates: 1879/1889).

However, Korzybski’s philosophical treatise (Science and Sanity) on the creation of ‘General Semantics’ was published in 1933 and can be viewed as a much more extensively articulated extrapolation of Wittgenstein’s classic philosophical little gem (70 pages) that laid the groundwork for most of Korzybski’s 806 page monstrosity (I use that word in terms of its size only). Neither I purport to fully understand but some of the essential ideas as I have interpreted them, will be developed below and in future essays. Ideas like ‘the fitting game’, ‘pointing’, ‘silence’, ‘consciousness of abstracting’, the danger of assuming that two different levels of abstraction are the same, the

difference between 'observing', 'inferring' (interpreting), and 'evaluating', 'the map is not the territory' (Korzybski), 'facts are not things' (Wittgenstein), be careful of our generalizations (Wittgenstein and Korzybski), and -- my addition -- the 'brain' pertains primarily to 'neurological activity' whereas 'the mind' pertains primarily to 'thoughts, feelings, and impulse-drives that interact neurologically with 'electrical impulses', 'neuro-transmitters', hormones, endorphins, polypeptides, and the like.

Every time we put up a 'conceptual or theoretical boundary', this 'boundary' is designed to 'contain' and make 'manageable' the particular realm of investigation that we are studying.

So we create the field of 'psychology and psychiatry' and we distinguish it from the field of 'neurology and neuroscience'.

However, as Spinoza used to say, 'Everything in life is connected' and 'arbitrary, conceptual-theoretical boundaries' are not the same as 'phenomenal, life boundaries' if boundaries exist at all. And as soon as 'arbitrary, conceptual-theoretical-paradigm boundaries start to become 'crossed' by 'the continual flow of life' across man-made conceptual-theoretical boundaries, we start to arrive at the need for 'hybrid' or 'dialectically integrative' concept-theories, and/or even paradigms. What we are trying to accomplish here is the maintenance the structural integrity of the interaction between two concepts, theories, and/or paradigms so that, with better and better maps and models, we arrive at better and better 'structurally-dynamic process-oriented, wholistic representations. Within a model of psychological-psychiatric-medical-bio-chemical, neurological representation, we want to get the 'best possible verbal and/or visual picture that we can of what Kant called 'noumenal reality' -- that part of reality that we 'Kant Know' or Don't Know' or Won't Know'.

First of all, we are looking for a 'good enough model'; second we are looking for 'the best possible model of accurate clinical and phenomenal reality (that part of reality that we can observe and experience and interpret) -- that we possibly can. When we say that we are 'theorizing in good faith', well, that means that -- to the best of our possible ability and integrity -- we are trying to prevent our subjective, narcissistic biases from distorting this picture.

This is the subject-area that I am opening up here in my own way, and it involves the 'fitting' of my 'Oedipal-Id' theory into a 'Neurological Model'.

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