

Giovanna: Why Me?

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At the age of fifty, Giovanna unexpectedly discovers that she has lung cancer.

This event seems to be the very „first” unexpected one of her life, a life that she considered to have always been „normal” and regular, where she had devoted herself to take care of her family of origin and later, of her husband.

Giovanna was born in a small town, and is the eldest of four sisters. Her mother, not very affectionate, delegated to her a series of responsibilities concerning the house and the care of her sisters, since she was very young. Her father, a frail man and submissive to his wife, died of a heart attack when Giovanna was twenty-two and the family had moved to Rome for a few months.

Giovanna attends the faculty of law, but six months before her father’s death she was having a difficult period and a sort of inhibition, which probably had been triggered by the failure of an exam. Her mother, however, does not tolerate the emotional blockage of her daughter, who still „tries”, somehow and by herself, to overcome her problems, with rather disappointing results. The situation got even worse after her father’s death: it was absolutely necessary to make a choice. The bank where Giovanna’s father had been employed offers her a job, and this could allow her to help financially her family. For this reason, and also because of her mother’s insistence, Giovanna left school and was hired by the bank.

Later, Giovanna marries a man who she tells being rather anaffective and despotic. They will not have any children.

Giovanna starts therapy after being convinced to do so by a friend of hers. She is a polite and kind woman; she has a calm tone and she uses a language that is never improper. During my long clinical experience I found exactly the same way of relating with the vast majority of patients developing serious organic diseases. In each of those people I was able to find a series of recurrent crucial knots.

- Adherence to the dimension of the identity: Giovanna’s subjective listening seems to be oriented towards a dimension of „obedience” towards her mother, from whom she seems unable to differentiate; the subjectivity Giovanna expresses with her words seems something which is very distant, while the desire seems condemned to fragment until it disappears completely.
- A normal life: Giovanna tells of a life without great suffering, but a more attentive listening allows to grasp „dissonances”. In the analytic listening the relationships with her parents and sisters are described as lacking in warmth and from Giovanna’s words it emerges how she had always felt basically ignored, not really considered, as a subject. All her family members are described as very focused on themselves and not really able to communicate.
- Because of her very “altruistic” modalities, Giovanna tends to take on many burdens that, as Professor Claudio Modigliani explains, have “ancestrally” crushed her ability to fight to achieve her own goals, as well as vital and creative achievements.

- An obvious resignation: four years before getting sick, Giovanna's mother died and after a short time she starts having problems in the bank where she was working, until she is being fired. All these vicissitudes do not cause any reaction of discontent in Giovanna. Meanwhile, also her husband's company went bankrupt, and he started drinking and even to be violent with her.

In this regard it is appropriate to remark the thought of Professor Modigliani, who considers psychosomatic illness as the result of a profound unconscious conflict destroyed by a relentless Superego.

Starting from the statement that the etiopathogenesis of cancer is trifactorial (genetic causes, environmental causes and psychic dimensions), Modigliani formulates the hypothesis of a correlation between regression and cancer development. In fact, he believes there would be a regression scale that develops along a continuum in which neoplastic diseases are located at the point of the most archaic regression, closer to the somatic field.

Paradoxically, he points out that the person with cancer can derive an advantage, we could say secondary, from what happens in his/her body. The body tries to speak even though it actually cannot, yet it is able, however, to give an alarm that maybe can be heard and taken into consideration, and if there are any symptoms, a cure can be attempted.

The speaking body also refers to the thought of Lacan

About the psychosomatic phenomenon, Lacan speaks of intra-organic and autoerotic libido investments, that would be made on the organ instead on the object, and places it within the psychoanalytic experience of the body that Lacan thinks to be crossed by the signifier, therefore, a speaking body taken in the performance.

So the question of the body is no longer just biological, but instinctual, which raises the question of how to move beyond the satisfaction of need, the question of dealing with what lies beyond the pleasure principle. Lacan states that in psychosomatic phenomena there is a link with language, but it is an outside subjectivation because, as in psychoses, the paternal metaphor has failed. Thus, there is a freezing of the significant chain, an absence of the interval between S1 and S2, so that the subject remains a prisoner of this lack of separation, which prevents access to metaphor and desire.

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Thus, there is a freezing of the significant chain; the psychosomatic phenomenon marks the incapacity of defensive alienation of the subject that fails to escape from what is unbearable (unlike the neurotic symptom, that uses the mechanism of a significant substitution).

With these theoretical elements, as a reference point, in Giovanna we can identify some crucial knots which are recurrent in serious psychosomatic patients:

- The question of the dialectical relationship with the Other
- The inability to consider oneself as a subject
- Resistance to change
- Dependence on the Other.

These are just a few points that, based on my analytical listening, appear to be significantly recurrent in patients suffering from serious organic diseases.

Giovanna's dreams

During a session Giovanna reports a dream in which she meets an invalid, legless man in a narrow corridor, perhaps in the analyst's office. He smiles at her and she recognizes him: he is a priest close to her family when she was a child. From the associations it emerges

how the usual way of being condescending and calm may have contributed to „cutting off Giovanna’s legs”, preventing her to face the hurdles she had experienced in her life in a practical way. Furthermore, the question of ambiguity towards the analytical path also appears: the analytic space can represent the possibility of making a change, but how is it possible to do this, „without legs?”

This theme continues and evolves into a later dream, in which Giovanna was jogging, an activity she practiced before her illness. In the dream she cannot stretch her legs properly, while she is running. To this she associates the difficulty she was experiencing at that time, regarding the work in the analysis, because the analyst’s observations somehow undermined her confidence. Giovanna associates the work of the analysis to that of training the legs doing jogging; she wants to learn to use her legs again.

She says: otherwise, how can I do it?

It seems significant that Giovanna also began to think about her mental health. This new attitude is certainly not an absolute guarantee of physical and mental “health”, but it is certainly an indispensable element, without which one cannot really enter into such a delicate therapeutic work.

It is in fact necessary that every patient can gradually gain confidence in therapeutic and analytical work; this will form the basis for the construction of a new way of being that will allow the patient to take possession of those tools of listening and analysis of himself/herself and of the reality that will allow him/her to be able to make the choice of changing his/her own life, thus recognizing the legitimate right to listen to his/her own subjective desire.

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