A graduate of the prestigious École Normale Supérieure and a highly qualified professor of philosophy with a PhD in psychology, Didier Anzieu (1923–1999) was a full member of the French Psychoanalytical Association; he was in fact one of its co-founders and became a vice-president of the Association. His psychoanalytic thinking was both highly original and fundamental: he was strongly supportive of research with an epistemological approach to both psychic containers and their contents, developing and applying Freudian concepts and techniques in a whole variety of clinical fields.

With his university background, he was deeply involved in the training of clinical psychologists, creating in 1966 a post-graduate diploma in projective techniques at the Sorbonne. He received the Sigourney Award in 1992.

He was instrumental in transforming Jacob Moreno's psychodrama technique into a truly psychoanalytic one, and he founded the Centre of French Studies for Training and Active Research in Psychology (CEFRAP). He was the editor of two series with the publisher Dunod: 'Inconscient et culture' (with René Kaès) and 'Psychismes'.


Catherine Chabert wrote a concise biography of Didier Anzieu for the 'Psychanalystes d'aujourd'hui' series (PUF, 1996).
In what follows, I base my thinking upon two general principles. One specifically Freudian: every psychical function develops by supporting itself upon a bodily function whose workings it transposes on to the mental plane. Jean Laplanche (1970) recommends that the concept of analisis be reserved for the support the sexual drives find in the organic functions of self-preservation, but I want to give it a broader interpretation. The psychical apparatus develops through successive stages of breaking with its biological bases, breaks which on the one hand make it possible to escape from biological laws and, on the other, make it necessary to look for an analytic relationship of every psychical to a bodily function. The second principle, also known to Freud, is Jacksonian: the development of the nervous system in the course of evolution exhibits a peculiarity not met within other organic systems, namely that the organ which develops last and is the one nearest the surface, the cortex, tends to take over the management of the system, bringing the other neurological subsystems under its overall control. This is also the case with the conscious Ego, which within the psychical apparatus tends to occupy the surface that is in contact with the outside world and to control the functioning of the apparatus. We know also that the skin (the body’s surface) and the brain (the surface of the nervous system) derive from the same embryonic structure, the ectoderm.

For a psychoanalyst like myself, the skin is of crucial importance, providing the psychical apparatus with representations of both the nature of the Ego and of its principal functions. This observation fits, in turn, into the framework of the general theory of evolution. The difference between man and the other mammals does not simply lie in the greater size and complexity of the human brain. The skin also loses its hardness and its covering of fur. Body hair hardly remains except on the cranium, where it serves as a further layer of protection for the brain, and around the orifices of the face and trunk, where it adds to the sensibility, and indeed sensuality, of these areas. As Imre Hermann has shown (1930), the infant’s clinging drive towards his mother becomes more difficult to satisfy in the human, condemning the representatives of that species to early and prolonged bouts of intense anxiety over the loss of protection or lack of a support object, and to a state of what some regard as ‘original distress’. To compensate for this, the attachment drive in the human infant assumes an importance all the greater for the fact that childhood is proportionately longer in humans than in other species. This drive has as its object the identification in the mother, and subsequently in the family group which takes over from her, of signals – including smiles, gentleness of contact, physical warmth of embrace, diversity of sounds, solidity with which the child is carried, how it is rocked, availability of feeding, attention, the presence of others. All these provide clues to external reality and how it is to be dealt with, as well as indications of the effects experienced by the baby’s partners, especially in response to its own affects. Here we are no longer concerned with the satisfaction of vital needs of self-preservation (food, breathing, sleep), on which the sexual and aggressive desires will come to constitute themselves analytically, but with communication, pre-verbal and infra-linguistic, on which linguistic exchange will in due course come to be supported.

The two registers often operate simultaneously: the baby’s feeding, for example, provides an opportunity for tactile, visual, auditory and olfactory communication. And it is known that if the vital needs are satisfied in a way that is systematically short of these sensory and affective exchanges, it may lead to ‘hospitalism’ or autism. It is also known that, as the baby grows, greater energies are devoted both by it and by those around it to communication for its own sake, independent of any activities directed towards self-preservation. The original form of communication, both in reality and even more intensely in fantasy, is direct, unmediated, from skin to skin.

In The Ego and the Id (1923b), Freud shows that it is not only defence mechanisms and character traits which derive from bodily activities, either as a direct result of these or by their transformation, but that the same is true of the psychical agencies. The psychical drives which constitute the Id derive from biological instincts; what Freud came to call the Super-Ego ‘has acoustic roots’, and the Ego is initially formed on the basis of the experience of touch. It seems to me that we need to add to this account the existence of a more archaic, perhaps even original, topology in which the subject is aware of the existence of the Ego, a Self that corresponds to the auditory and olfactory envelope, a Self alongside which an Ego differentiates itself on the basis of tactile experience, a Self on to whose exterior all the stimuli, whether exogenous or endogenous, are projected. The secondary topology (the Id, the Ego with its appendage the ideal Ego, and the Super-Ego paired with the ideal Ego) comes into being when the visual envelope – particularly under the influence of the primary prohibition on touching – takes the place of the tactile envelope in providing the Ego with essential support, when things-presentations (mainly visual) become associated in the developing pre-conscious with word-presentations (provided by the acquisition of language) and the subject learns to differentiate between Ego and Super-Ego on the one hand, and between external stimulation and the excitation of the drives on the other.

In my article of 1974 on the Skin Ego, I assigned it three functions: as a containing, unifying envelope for the Self, as a protective barrier for the psyche; and as a filter of exchanges and a surface of inscription for the first traces, a function which makes representation possible. To these three functions, there correspond three representations: the sack, the screen and the sieve. The work of Pascue (1971), ‘Le bouclier de Persée’ [The shield of Perseus], has led me to consider a fourth function, that as a mirror of reality.
The nine functions of the skin ego

I shall now undertake to establish a more systematic parallel between the functions of the skin and those of the Ego, by attempting to state precisely for each the way in which the organic and the psychical correspond, the types of anxiety connected with the pathology of each function and the forms of disturbance of the Skin Ego revealed by clinical practice. The order I shall follow does not obey any rigorous principle of classification, nor do I claim to provide an exhaustive list of these functions. The list, in fact, remains open.

(1) In the same way that the skin functions as a support for the skeleton and the muscles, the Skin Ego fulfills a function of maintaining the psyche. The biological function is performed by what Winnicott calls 'holding', i.e. by the way the mother supports the baby's body. The psychical function develops through the interiorization of this maternal holding. The Skin Ego is a part of the mother - particularly her hands - which has been interiorized and which maintains the psyche in a functional state, at least during waking life, just as the mother maintains the baby's body in a state of unity and solidity. The baby's capacity to maintain itself physically by itself conditions its access to the sitting position, and subsequently to walking and standing. External support from the mother's body leads the baby to learn to support itself internally upon its spinal column, as a solid backbone that allows it to stand upright. One of the anticipatory nuclei of the Ego consists in the sensation/image of an inner maternal, or more generally parental, phallus; this provides the mental space in the process of formation with a first axis, of the order of verticity and of the struggle against gravity, and lays the ground for the experience of having a mental life of one's own. It is by leaning against this axis that the Ego can put into operation the most archaic defence mechanisms, such as splitting and projective identification. But it can only lean upon this support with complete security if it is certain of having in its own body zones of close and stable contact with the skin, muscles and palms of the mother (and of those in its earliest environment) and, on the periphery of its psyche, a reciprocal encirclement (what Sami-Ali, 1974, calls 'mutual inclusion') by the psyche of its mother.

Blaise Pascal, who lost his mother at an early age, developed the theory in physics, then later in psychology and religious apologistics, of the abhorrence of the inner void, long attributed to Nature: the lack of the support object which the psyche needs it to find its centre of gravity. Francis Bacon depicts in his paintings deliquescent bodies whose skin and clothing provide them with a superficial unity, but which lack that spinal axis which is the support of body and thought; they are skins filled with a substance more liquid than solid, corresponding quite closely in this to the alcoholic's body image.1

1 See my two monographs, 'De l'horreur du vide à sa pensée: Pascal' and 'Le peau, la mère et le miroir dans les tableaux de Francis Bacon', reprinted in Anzieu (1981).

The daughter apparently awakened in the middle of the night seeing snakes everywhere, including the very floor on which she was walking. She ran to her mother's bedroom and mounted her mother with her back to the mother's abdomen. This was the only place where she could find relief. Although the mother, not the child, was the patient, her associations to the event soon established that she had identified with her child. She was the little girl who wished to lie down on top of me in order to get the 'backing', protection and 'rearing' which she felt deprived of by her own parents.

(Grotstein, 1981, p. 79)2

The second position, with the child stretched out resting the front of its body against the back of the person serving as supporting object, provides the child concerned with the feeling that the most precious and fragile part of its body, its abdomen, is protected by a screen, the original protective shield which the other body now constitutes. This practice generally begins with one or other of the child's parents (or indeed with both); it may continue for quite a long time with a brother or sister with whom the child shares a bed. (Until his

2 I should like to thank Annick Maufras du Chatellier for bringing this passage to my attention.
psychoanalysis with Bion, Samuel Beckett could overcome the anguish of insomnia only by falling asleep lying against the body of his elder brother. One of my female patients, brought up by violent and quarrelling parents, found inner security this way right up to the prepubertal period, by sleeping against the body of her younger sister with whom she shared a bed. The one who was most afraid would ‘be the chair’ (their private expression) to receive and squeeze up against the reassuring body of the other. During one whole phase of her analysis, this patient’s transference implicitly invited me in turn to ‘be the chair’: she wanted me to alternate with her in giving her free associations, confessing my thoughts and feelings, my anxieties; she offered to put her body against mine, not understanding why I refused to let her come and sit on my knee. I had first to analyse as a defensive sexualization the hysterical seduction in which she clothed her demand; then we were able to work out the anxiety she felt over the loss of the background object.

Grotstein reports another significant type of example: ‘Frequently I have heard dreams from analytic patients in which they were driving a car from the back seat. The associations to these dreams almost invariably led to a notion of having a defective backing and consequently, difficulty with autonomy’ (1981, p. 79). Grotstein even proposes a pun here: ‘the object behind can also be felt to be underneath; it therefore becomes the paradigm for the commonly used word, understanding’ (p. 80).

(2) To the skin as covering for the entire surface of the body, and into which all the external sense organs are inserted, corresponds the containing function of the Skin Ego. This function is set in train primarily by maternal ‘handling’. The sensation/image of the skin as sac is awakened, in the very young infant, by the attention to its bodily needs it receives from its mother. The Skin Ego as a mental representation emerges from the interplay between the mother’s body and the child’s, as well as from the responses the mother makes to the baby’s sensations and emotions. These responses encompass both gesture and the voice, for the sound envelope is now added to the tactile, and they are circular in character, the echolalias and echopraxes of the one imitating those of the other, allowing the infant progressively to feel these sensations and emotions for itself without feeling undermined by them. Keé (1979) distinguishes two aspects of this function: the container [contenir], properly so called, is still, stable, and forms a passive receptacle where the baby may store its sensations/images/affects, which in this way are neutralized and preserved. The container [contenir] corresponds to the active aspect, according to Bion . . . to maternal reverie, or to projective identification, the exercise of the alpha function which elaborates, transforms and restores to the child his sensations/images/affects in a representable form.

Just as the skin envelops the whole of the body, the Skin Ego aspires to envelop the whole of the psychical apparatus, an ambition which proves subsequently to have been overweening, but which is necessary at the outset. At that stage, the Skin Ego is imaginarily represented as an outer shell, the

instructual Id as an inner kernel, the two terms each having need of the other. The Skin Ego cannot function as a container unless it has drives to contain, to localize in bodily sources, and later to differentiate. The drive is only experienced as urge, as motive force, if it encounters limits, specific points of insertion in mental space at which it can deploy itself, and if its source is projected into areas of the body which are particularly open to stimulation. This complementarity of shell and kernel is at the root of the sense of the continuity of the Self.

The failure of this containing function of the Skin Ego results in two forms of anxiety. An instinctual excitation that is diffuse, constant, scattered, non-localizable, non-identifiable, unquenchable results when the psychical topography consists of a kernel without a shell; the individual seeks a substitute shell in physical pain or psychical anxiety: he wraps himself in suffering. In the second case, the envelope exists, but its continuity is broken into by holes. This Skin Ego is a colander: thoughts and memories are only with difficulty retained; they leak away (cf. above the case of Eleanore [1985c, p. 66]). It is a case of considerable anxiety to have an interior which empties itself, especially of the aggression required for any kind of self-assertion. These psychic holes may find support from the skin’s own pores; the case study of Gethsemane given below ([1985b, pp. 178–187] shows a patient who perspires during sessions and who thereby unleashes on his psychoanalyst a foul aggression which he cannot hold back nor work over, so long as his unconscious representation of a colander-like Skin Ego has not been interpreted.

(3) The surface layer of the epidermis protects the sensitive layer beneath (where the free nerve-endings and the Meissner corpuscles for touch are located) and shields the organism in general against physical attack, some forms of radiation and an excess of stimuli. As early as his ‘Project for a Scientific Psychology’ ([1950 [1895]), Freud had acknowledged that the Ego fulfills a parallel function as a protective shield against stimulation [Reizschutz]. In his ‘Note upon the “Mystic Writing Pad” ’ ([1925a), he states clearly that the Ego (like the epidermis, though Freud does not make this point) possesses a dual-layered structure. In the ‘Project’ of 1895, Freud also hints that the mother serves as an auxiliary ‘protective shield’ for the baby and does so – I would add – until the baby’s growing Ego finds sufficient support upon its own skin to take over that function for itself. In general, we may say that the Skin Ego is a structure potentially present from birth and that it is realized as the relationship between the baby and its primary environment unfolds; the remote origins of the structure seem to go back to the first appearance of living organisms.

Excesses and deficiencies in the protective shield produce very varied figurative representations. Frances Tustin (1972) has described the two body images which pertain to primary and secondary autism respectively: the ‘amoeboid’ Ego, when none of the functions of the Skin Ego – of support, containment or protective shielding – have been acquired and when the double layer has not begun to take form, and the ‘crustacean’ Ego, in which a rigid shell replaces the
The paranoid anxiety that something is intruding into the psyche takes two forms: (a) they are stealing my thoughts (persecution complex); (b) they are putting thoughts into my head (influencing machine). In these cases, the protective-shield and container functions do distinctly exist, but they are inadequate.

The fear of losing the object fulfilling the role of auxiliary protective shield is most often encountered when the child’s upbringing has been entrusted to the mother’s own mother (i.e. the maternal grandmother) and when she has taken care of him with such perfection, both qualitative and quantitative, that he has not experienced the possibility or necessity of achieving self-support. Dependence on drugs may then seem to be a solution, to create a barrier of fog or smoke between the Ego and external stimuli.

Support for the protective shield may be sought from the dermis, if the epidermis proves deficient: this is Esther Bick’s ‘muscular second skin’ or Wilhelm Reich’s ‘character armour’.

The membrane of the organic cells protects the individuality of the cell by distinguishing the foreign bodies to which it refuses entry from the similar or complementary substances to which it grants admission or association. The human skin presents a considerable range of differences as regards grain, colour, texture and smell. These may be narcissistically, or even socially, overvalued. They allow one to identify others as objects of attachment and love and to assert oneself as an individual having one’s own skin. In a similar fashion, the Skin Ego performs a function of individuating the Self, thus giving the Self a sense of its own uniqueness. The anxiety produced by the ‘Uncanny’ which Freud described in his paper of 1919 is connected with a threat to the individuality of the Self through a weakening of its sense of boundaries.

In schizophrenia, the whole of external reality (which is imperfectly distinguished from internal reality) is considered dangerous to assimilate, and loss of the sense of reality enables the subject to preserve at any price a sense of the oneness of the Self.

The skin is a surface containing pockets and cavities where the sense organs, apart from those of touch (which are contained in the epidermis itself), are located. The Skin Ego is a psychical surface which connects up sensations of various sorts and makes them stand out as figures against the original background formed by the tactile envelope: this is the Skin Ego’s function of intersensoriality, which leads to the creation of a ‘common sense’ (the sensorio commune of medieval philosophy) whose basic reference is always to the sense of touch. A defect in this function gives rise to the anxiety of the body being fragmented, or more precisely of it being dismantled (Meltzer, 1975) – that is, of an anarchic, independent functioning of the various sense organs. I shall demonstrate below the crucial role played by the prohibition upon touching in the transition from the containing tactile envelope to the intersensorial space which lays the ground for symbol formation. In neuro-physiological reality, the coordination of information from the different sense organs is carried out in the encephalon; intersensoriality is therefore a function of the central nervous system, or, to take a more general view, of the ectoderm (from which both the skin and the central nervous system develop at the same moment). In psychical reality, by contrast, such a role is unknown, and there is an imaginative representation of the skin as a background, an original surface upon which sensory interconnections are deployed.

The baby’s skin is the object of libidinal cathexis on the part of the mother. Feeding and attention are accompanied by skin contact of a generally pleasurable nature, which prepares for auto-eroticism and sets up skin pleasure as a background for sexual pleasures. The latter are localized in certain erogenous zones and in certain orifices (protruberances and cavities) where the surface layer of epidermis is thinner than elsewhere and where direct contact with nuns produces an increased level of excitation. The Skin Ego fulfills the function of providing a surface for supporting sexual excitation, a surface upon which, in cases of normal development, erogenous zones may be localized, the difference between the sexes recognized and their complementarity sought. The exercise of this function may be sufficient in itself, the Skin Ego drawing libidinal cathexis over its entire surface and becoming a complete envelope of sexual excitation. (This configuration underlies what is doubtless the most abhorrent infantile sexual theory, which sees sexuality as entirely restricted to pleasures of skin contact, and pregnancy as resulting merely from embracing and kissing.) Lacking an adequate means of discharge, the envelope of erogenous excitation may be transformed into an envelope of anxiety.

If the cathexis of the skin is more narcissistic than libidinal, the envelope of excitation may be replaced by a gleaming narcissistic envelope, supposedly rendering its owner invulnerable, immortal and heroic.

If sexual excitation is not sustained, the individual will not feel sufficiently secure, on attaining adulthood, to engage in a complete sexual relationship leading to mutual genital satisfaction.

If the sexual protruberances and orifices become the site of algogenic rather than erogenous experience, it may reinforce the imaginary representation of a Skin Ego with holes, increase the level of persecution anxiety and create an inclination towards sexual perversions aimed at converting pain into pleasure.

The skin’s function as a surface receiving permanent stimulation of the sensorimotor tonus from external excitations has its counterpart in the Skin Ego’s function of libidinal recharging of the psychical functioning, the maintenance of internal energetic tension and its unequal distribution among the psychical subsystems (cf. the ‘contact-barriers’ in Freud’s ‘Project’ of 1895). The failure of this function produces one of two types of antagonistic anxiety: anxiety that the mental apparatus will explode under the pressure of an overload of excitation (e.g. an epileptic fit; cf. Beauchene, 1980), or Nirvana anxiety, i.e. that one might fulfill the desire of reducing tension to zero.
(8) The skin, together with the tactile sense organs it contains (touched, pain, heat-cold, dermatotopic sensitivity), provides direct information about the external world, which is then matched up in the 'common sense' with auditory and visual information, etc. The Skin Ego fulfills a function of registering tactile sensory traces, what Piera Aulagnier (1975) sees as a pictogrammatic function and what Pasche (1971) describes as the 'Shield of Perseus', sending back a mirror-image of reality. The function is reinforced by the mothering environment to the extent that it fulfills its role of 'object-presenting' (Winnicott, 1962) for the infant. This Skin Ego function develops upon a dual base, biological and social. Biologically, it is upon the skin that a first picture of reality is registered. Socially, an individual's membership of a social group is shown by incisions, scarifications, skin-painting, tattooing, by his make-up and hair-style, and by his clothes, which are another aspect of the same thing. The Skin Ego is the original parchment which preserves, like a palimpsest, the erased, scratched-out, written-over first outlines of an 'original' pre-verbal writing made up of traces upon the skin.

A first form of anxiety related to this function is that of having the surface of one's body marked by shameful and indelible inscriptions emanating from the Super-Ego: rashes, eczema, Bettelheim's 'symbolic wounds' (1954), the infernal machine of Kafka's 'In the Penal Settlement' (1914-19) which inscribes in Gothic letters on the skin of the condemned man the article of the code he has transgressed, until he dies from it. The inverse form of anxiety concerns either the danger of inscriptions being effaced through overloading or the loss of the capacity to retain traces, e.g. in sleep. The film-skin which allows dreams to unfold reacts in this case by providing the psychical apparatus with the visual image of a Skin Ego restored to its function as a sensitive surface.

(9) All the preceding functions are in the service of the attachment and subsequently the libidinal drive. Is there not a negative function of the Skin Ego, an anti-function so to speak, in the service of Thanatos, having as its goal the self-destruction of the skin and the Ego? Progress in immunology, prompted by the resistance of the organism to organ transplants, provides a lead here as far as living organisms are concerned. As well as confirming that no two human beings are identical (except in the case of identical twins), the incompatibilities between donors of organs and their recipients have enabled us to grasp the importance of the molecular markers of the biological personality; the greater the similarity of these markers in donor and recipient, the more likely the transplant is to succeed (Jean Hamburger, transplant surgeon). The similarities result from the existence of a plurality of different groups of white corpuscles, from which it appears that it is not merely the corpuscles that are marked, but the personality in its entirety (Jean Dausset, immunologist).

Biologists, without knowing they were doing so, have had recourse to terms analogous to those - such as the Self and the Not-Me [Non-Moi] - which some of Freud's successors devised to complete the second topology of the psychical apparatus. In a great number of illnesses, the system of immunological defence can be activated indiscriminately to attack one of the body's own organs as if it were a foreign transplant. These are the so-called auto-immune phenomena, which means, etymologically, that the living organism directs the immunological or immune reaction against itself. The cellular arm is designed to reject foreign tissue - what biologists call the 'non-Self' - but it is sometimes so blind as to attack the 'Self', though it respects it totally when it is healthy: this results in auto-immune illnesses which are often very serious.

As an analyst, I am struck by the analogy between the auto-immune reaction on the one hand and, on the other, the turning of drives against oneself, the negative therapeutic reaction, as well as attacks on linking in general and against psychical contents in particular. I note also in passing that the distinction between the familiar and the strange or foreign (Spitz), or between the ego and non-ego (or, as Winnicott has it, 'me and not-me'), has biological roots at the level of the cell itself, and I would hazard the hypothesis that the skin as the envelope of the body constitutes the intermediate reality between the membrane of the cell (which collects, sorts and transmits information as to the character, whether foreign or not, of ions) and the psychical interface constituted by the Pept.-Cs. system of the Ego.

Specialists in psychosomatic illness have described how, in the structure of allergies, the signs of safety and danger are inverted: familiarity, instead of being seen as protective and reassuring, is avoided as bad, and strangeness, instead of being seen as troubling (as in Freud's 'unheimlich [uncanny]'), is regarded as attractive: hence the paradoxical reaction of the allergy sufferer and also of the drug addict, who avoid what can do them good but are fascinated by what is harmful to them. The fact that the structure of allergy takes the form of an alternation between asthma and eczema allows us to specify the nature of the Skin Ego involved. Originally, what is at issue is need to compensate for the inability of the skin. Skin Ego properly to delimit an inner psychical sphere of a certain volume, i.e. to pass from a two- to a three-dimensional representation of the psychical apparatus (cf. Houzel, 1985). The two afflictions correspond to the two possible avenues of approach to the surface of that sphere: either from the inside or from the outside. Asthma is an attempt to experience from within the envelope which constitutes the bodily Ego: the sufferer fills himself with air to the point where he experiences from inside the boundaries of his body and confirms the expanded limits of his Self; to preserve this sensation of the Self as a blown-up air, he holds his breath, at the risk of arresting the rhythm of normal respiratory interaction with the environment and of suffocating. The case study of Pandora below (1985d, p. 116) illustrates this. Eczema is an attempt to feel the corporeal surface of the Self from the outside, in the painful lacerations of the skin, its roughness to the touch and its embarrassing disfigurement, and yet also to feel that surface as an envelope of warmth and diffuse erogenous excitations.
In psychosis, and especially in schizophrenia, the paradox which we see in allergies reaches paroxysm. The mental functioning is dominated by what Paul Wiener (1983) has called the anti-physiological reaction. Confidence in the natural functioning of the organism is either destroyed or has never been acquired. What is natural is experienced as artificial; the living is treated as mechanical; what is good for life and in life is felt to represent mortal danger. Such a paradoxical mental functioning alters, through a circular reaction, the perception of the body's functioning, and its paradoxical nature is thus further reinforced. The underlying paradoxical configuration of the Skin Ego has produced here a failure to master certain fundamental distinctions: between waking and sleeping, dream and reality, animate and inanimate. The case study of Eurydice (D. Anzieu, 1982) provides a limited example of this in a patient who, though not psychotic, feels a threat of mental confusion. The re-establishment of confidence in a natural and felicitous functioning of the organism (on condition that it finds in its environment a sufficient response to its needs) is one of the psychoanalytic's essential tasks with such patients, though it is an arduous and repetitive one, given the patient's unconscious efforts to paralyse the analyst by trapping him in a paradoxical transference (cf. Anzieu, 1975) and dragging him down into the patient's own failure.

Unconscious attacks against the psychical container, which are perhaps based anachronistically upon phenomena of organic auto-immunity, seem to me to originate in parts of the Self that are fused with representatives of the self-destructive instinct inherent in the Id; transported to the periphery of the Self, these parts have become encysted in the surface layer which is the Skin Ego, where they eat into its continuity, destroy its cohesiveness and impair its functions by reversing the goals of those functions. The imaginary skin which covers the Ego thus becomes a poisoned tunic, suffocating, burning, disintegrating. We might therefore speak in this case of a toxic function of the Skin Ego.

This list of nine psychical functions of the Ego, which are homologous to biological functions of the skin, is, to my mind, neither immutable nor exhaustive. It provides a grid, open to further elaboration and improvement, against which facts can be tested and which should prove an aid to clinical observation, psychopathological diagnosis, the conduct of psychotherapy and the technique of psychoanalytic interpretation.

To be even more systematic, we may add to this list a number of skin functions not so far mentioned, and with which yet other functions of the Ego may be aligned:

- The storage function (e.g. of fats) can be compared with the function of memory, though the latter arises in the pre-conscious zone of the psychical apparatus and Freud insists that it does not belong to the 'surface' of that apparatus, which is characterized by the Perception-Consciousness system.
- The function of production (e.g. of hair, nails) may be compared with the production of defence mechanisms by the zone (which is also preconscious, if not indeed unconscious) of the Ego.
- The function of emission (e.g. of sweat and pheromones) may be compared with the preceding function, projection in fact constituting one of the most archaic of the Ego's defence mechanisms; but this should be articulated with the particular topological configuration I have described as the colander-Skin Ego (cf. the case studies of Eleanor and Gethsemene).

One might also compare, if not certain functions of the Skin Ego then at least certain of its tendencies, with the structural (as opposed to the functional) characteristics of the skin. For example, the fact that the skin has the largest surface and the greatest weight of any of the bodily organs has its counterpart in the Ego's claim to envelop the totality of the psychical apparatus and to weigh heaviest in its functioning. Similarly, the tendency towards interlocking of outer and inner layers in the Skin Ego as in the psychical envelopes (sensory, muscular, rhythmic) appears not unrelated to the intertwining of the layers making up the epidermis, dermis and hypoderm. The complexity of the Ego and the multiplicity of its functions could also be seen as analogous to the numerous important differences of structure and function existing between one point on the skin and another (e.g. the density of the different types of glands, sensory corpuscles, etc.).

A case of perverse masochism

Case study: Monsieur M.

The somewhat exceptional case of Monsieur M., reported by Michel de M'Uzan (1972) before the appearance of my first article on the Skin Ego (1974), does not seem a suitable one for psychoanalytic treatment, and I have only discussed it on two occasions with my colleague. From the perspective provided by the nine functions of the Skin Ego I can now reinterpret the case retrospectively, by showing the impairment of almost all the functions of the Skin Ego (my list of which is thereby indirectly validated) in serious cases of masochism, and the necessity each masochistic subject finds to have recourse to perverse practices to re-establish these functions.

For Monsieur M., who is not by mere chance a radio engineer, the function of supporting the body is artificially ensured by bits of metal and glass inserted everywhere under the skin (this, then, is not a muscular but a metallic second
skin) — in particular, needles in the testicles and penis, by two steel rings placed respectively at the tip of the member and at the root of the scrotum, and by having thongs cut out of the skin on his back to allow him to be suspended on butcher's hooks while he is sodomized by a sadist (a realization of the myth of the hanged god, mentioned above [1985a, p. 49], in connection with the Greek myth of Marsyas).  

The failures of the containing function of the Skin Ego are not only objectivized in the innumerable scars made by burns and cuts, scattered over the whole surface of his body, but by the planing down of certain excrescences (right breast torn off, little toe of the right foot cut off with a metal saw), by the stopping up of certain cavities (navel filled with molten lead), by the artificial enlargement of certain orifices (the anus, the opening of the penis). The containing function is re-established by the creation over and over of an envelope of suffering, using a great diversity of ingenious and cruel techniques and instruments of torture: the phantasy of the flayed skin must be kept permanently alive in the perverse masochist for him to re-acquire a Skin Ego.

The protective-shield function is abused to the point of no return, where the danger becomes fatal to the organism. Monsieur M. has always pulled back from that point (he has suffered neither serious physical illness nor madness), but his young wife, with whom he shared the discovery of masochistic perversions, was from exhaustion from the tortures she endured. Monsieur M. raises the stakes very high in his death-defying game.

The function of individuation of the Self can only be accomplished through suffering both physical (the tortures) and moral (the humiliations); the systematic introduction of inorganic substances under the skin, the ingestion of repugnant substances (urine, the partner's excrement) reveals the fragility of that function; the distinguishing of his own body from those of others is constantly being put in question.

The function of intersensorytality is doubtless the one that is best respected (which explains how Monsieur M. can be so excellently adjusted both socially and professionally).

The functions of sustaining sexual excitement and of libidinal recharging of the Skin Ego are also preserved and activated, but at the cost of the extreme torments mentioned above. And yet Monsieur M. emerged from these sadomasochistic sessions neither down-hearted nor depressed, nor even simply weary: in fact he was invigorated by them. He reached a sexual climax not in penetrating nor in being penetrated but, initially, by masturbation, and then by the mere spectacle of perverse scenes (e.g., that of his wife subjected to the cruel attentions of a sadist), accompanied by an excitation of the whole of his skin itself subjected to torture. 'The whole surface of my body could be excited by means of pain.' 'Ejaculation occurred at the moment when the pain was at its height... After ejaculation, I felt pain, quite simply' (M'Uzan, 1972/1977, pp. 133–134).

The function of the inscription of signs becomes overactive in the case of Monsieur M. His entire body, apart from his face, is covered with numerous tattoos; e.g., on his buttocks: "The spot for fine pricks"; on the thighs and belly: "Long live masochism" and 'I am a living turd', 'Use me like a woman, you'll love it', etc. (M'Uzan, 1972/1977, p. 127). All these inscriptions are evidence of particular identification with the feminine anatomy, with erotogenization of the whole surface of the skin and an invitation to his partner to find pleasure in the various orifices (mouth, anus) through which he himself achieves no pleasure.

Lastly, the function of the Skin Ego which I have termed toxic (i.e., self-destructive) reaches a paroxysm. The skin becomes the source and the object of destructive processes. But the splitting of the libidinal and death instincts is only fleeting — a situation unlike that in psychoses, where it is permanent. At the moment when his dicing with death comes close to suicide, the partner stops tormenting him, the libido makes its 'spontaneous' recovery and Monsieur M. is able to reach orgasm.

He has at least always had enough psychological flair to choose partners who will not go too far: 'the sadist always climbs down at the last moment', he says (M'Uzan, 1972/1977, p. 137). This is a desire for omnipotence, comments de M'Uzan. I would add: for the perverse masochist, the pursuit of omnipotence in destruction is a precondition for access to a phantasm of erotic omnipotence, necessary to trigger his pleasure. The skin is not indeed completely flayed off, and the functions of the Skin Ego are not irreversibly destroyed. Their recovery in extremis, at the very moment when they are being lost, produces a "spurious assumption" much more intense (because at once physical and mental) than that described by Lacan in the mirror phase, but of which the narcissistic economy is equally self-evident.

I hope to have shown that the well-known defence mechanisms (splitting of the drive, reversal and turning against the self, narcissistic hypercathexis of impaired psychical and organic functions) only function with such efficiency in a Skin Ego which has provisionally acquired the nine fundamental functions, which re-enacts again and again a phantasm of having that skin flayed off and the drama of the loss of almost all those functions, in order the more intensely to enjoy the exaltation of finding them again intact. The phantasm (necessary for the evolution towards psychical autonomy) of having a skin of one's own remains ridden with guilt as a result of the earlier phantasm that to have a skin of one's own one has to take it from another, and that it is even

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4 The satyr Marsyas is a central figure in two stories involving music: in one, he picked up and played the double flute [aulos] that had been abandoned by Athena; in the other, he challenged Apollo to a music contest and lost his hide and his life. In antiquity, literary sources often emphasized the hubris of Marsyas and the justice of his punishment. In the contest between Apollo and Marsyas, the terms stated that the winner could treat the defeated party in any way he wanted. Since the contest was judged by the Muses, Marsyas naturally lost, and he was flayed alive for challenging a god. Apollo then nailed Marsyas' skin to a pine tree, near a lake which was full of the reeds from which the pipes were fashioned. [Eds., this volume]
better to let it be taken by another to give that other pleasure and, ultimately, to get such pleasure for oneself.

**Damp wrapping: the pack, caves**

**The pack**

The pack, a therapeutic technique for treating seriously psychotic patients, derives from the wrapping of patients in damp sheets practised by French psychiatry in the nineteenth century, which has similarities with the African ritual of therapeutic enfouling or with the icy baths of Tibetan monks. The pack was introduced into France in the early 1960s by the American psychiatrist Michael Woodbury, who added to the practice of physically wrapping the patient in sheets the *close encirclement* of him by the group of medical personnel. This addition produces an unexpected confirmation of the hypothesis put forward at the beginning of this work, of the double analysis of the Skin Ego: biological, on the surface of the body; social, upon the presence of a unified circle of attendants, who show concern for the experience the patient is undergoing.

The patient, in his underclothes or naked according to his wish, is wrapped up by the attendants in damp, cold sheets. They begin with his arms and legs, wrapping each separately, then they wrap up the whole body tightly, including the arms and legs, but excluding the head. Immediately afterwards, the patient is covered with a blanket so that he can get warm again fairly quickly. He remains lying down for three-quarters of an hour, free to verbalize his feelings or not, as he wishes (in any case, according to the medical staff who often undergo the pack treatment themselves, the sensations and emotions experienced at the time are so intense and extraordinary that words are hardly adequate to express them). The attendants touch the wrapped-up patient, communicate with him with their eyes or reply to what he has to say; they are eager and anxious to know what is going on inside him. The pack creates such a strong group feeling between attendants and patient that it tends to cause jealousy among the rest of the staff. This I take to be a confirmation of my other hypothesis, that the bodily envelope is one of the unconscious psychic organizing factors in groups (Anzieu, 1981b).

After a relatively short phase of anxiety, owing to the impression of being completely surrounded by cold, the patient feels a sense of omnipotence, of physical and psychic fullness. I understand this as a regression to that original unlimited psychical Self which certain psychoanalysts have hypothesized and which seems to correspond to a dissociation of the psychical from the bodily Ego, as experienced by the participants in a group, by mystics, or even by creative artists (cf. Anzieu, 1980). This sense of well-being does not last, but it becomes more durable with repetition of the ‘pack’ treatment (as with the psychoanalytic model, the complete cure may take years, at a rate of three sessions per week).

The pack provides the patient with a sensation of a double bodily envelope: a thermal envelope (cold, then subsequently warm, as a result of peripheral vasodilation in response to contact with the cold), one which controls the body’s internal temperature; and a tactile envelope (the tight, wet sheets which stick to the whole of the skin). This fleetingly reconstructs the patient’s Ego is separate from others and at the same time continuous with them, which is one of the topographical characteristics of the Skin Ego. In this regard, one practitioner of the pack, Claudie Cachard (1981), speaks of ‘membranes of life’ (cf. also de Loisy, 1981).

The pack can also be used with psychotic children and with deaf and blind children whose only access to significant communication with those around them is by means of touch. The pack offers them a structuring ‘relief envelope’ which can take the place, for a time, of their pathological envelope; thanks to it they are able also to abandon a part of their defences which consist of motor agitation or of making noise, and to feel unified and still. There is, however, an initial resistance to being wrapped up: to attempt to wrap up such children completely creates an extreme panic reaction and an extraordinary degree of violence.

**Three remarks**

The experience of the pack and of caves leads me to make three remarks: firstly, the baby’s body does seem to be programmed to experience a containing envelope; if the adequate sensory materials are lacking, it creates experience nonetheless, with whatever is available: hence the pathologica envelopes consisting of a barrage of incoherent noise and of motor agitation these are there not to allow controlled discharge of instinctual energy, but to enable the organism to adapt for its own survival. Secondly, the paradoxical resistances of people bringing up children are the product of a difference in the level of structuring of their own bodily Egos and those of their children, as well as of the danger they perceive of themselves experiencing a regression which would abolish that difference and produce a state of mental confusion. Thirdly, the therapy of ‘relief envelopes’ (including not only packs and caves, but also massages, bioenergetics and encounter groups) has only a temporary effect: what we see here is simply an extreme case of a phenomenon observable in normal individuals, who need periodically to reconfirm through practical experience their basic sense of having a Skin Ego. It is also an illustration of the need one finds among those suffering from serious deprivation, to develop substitute and compensatory constructs.


*Le corps de l’oeuvre [The body of the work].* Paris: Gallimard.


The ‘Uncanny’. S.E., 17.

*The Ego and the Id. S.E.*, 19.

A Note upon the ‘Mystic Writing Pad’. S.E., 19.

‘Project for a Scientific Psychology’. S.E., 1.


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