

## THE DRAW TO OVERWHELM: CONSENT, RISK, AND THE RETRANSLATION OF ENIGMA

The concept of affirmative consent presumes a subject who is fully transparent to herself and who can anticipate the precise effects of her assent. This essay proposes *limit consent*, a concept that offers us different ways to think about the *sexual*—and about the analytic encounter. Limit consent involves a more nuanced negotiation of limits and becomes possible when the subject makes herself passible (Lyotard 1988) to an other—a condition that is neither active nor passive. Processes described in depth here suggest that passibility has ties to the rousing of infantile sexuality (Freud) and to the subject's normative perversity (Laplanche). When the psychic economy of the infantile sexual is followed to its apex, a particular kind of state is produced that I call *overwhelm*—a word that is used here as a noun. Overwhelm is a state of dysregulation that can be confused with, but is not the same as, repetition compulsion. Overwhelm entails risk, and under some circumstances it may open up space toward significant psychic transformations. A detailed clinical example illustrates how overwhelm may make itself known in the clinical encounter, and how it can infiltrate the transference/countertransference. Specific technical suggestions are made regarding analytic work with overwhelm.

Keywords: overwhelm, limit consent, consent, passibility, risk, infantile sexuality, *sexual*, more and more, suffering pleasure, sadomasochism, perversion, SM

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The author thanks Jonathan House, Ann Pellegrini, and Dominique Scarfone for thoughtful attention to earlier drafts, and Gayle Salamon for erudite discussion of earlier versions at Second Story and the 2018 meetings of APA Division 39 (Psychoanalysis). Much of the clinical material in Part III has appeared in *Sexualities: Contemporary Psychoanalytic Perspectives*, ed. A. Lemma and P. Lynch (Routledge, 2015) and in the Greek journal *Oedipus*, vol. 14, pp. 117–132 (2015). Here it is presented in a different theoretical frame and used toward articulating the concept of *overwhelm*. Submitted for publication July 18, 2017.

. . . there subsists in us a silent, elusive, ungraspable part. In the region of words, of discourse, this part is neglected . . . usually escapes us . . . language is [therefore] dispossessed, can say nothing . . . [language] is limited to stealing these states from attention.

—GEORGES BATAILLE (1954, p. 14; emphasis added)

A colleague, whom I will call Imani, is playing with her four-year-old daughter, Lumi.<sup>1</sup> “Be the monster!” Lumi instructs her. Instantly transforming herself into an imposing ogre, Imani leaps forward. She snatches Lumi. “I will eat you!” she growls menacingly. Lumi squirms from within Imani’s firm grip, squealing with delight. She fights back, giggling in abandon. Then suddenly, she yells “Stop!” Imani stops. They look at each other; a moment passes. “*Again!*” Lumi commands. Imani starts over. Again she grabs, again the scary monster, again ominous and frightening. Lumi is laughing. “Stop!” she commands anew. Imani stops. They rehearse this scenario for a bit. A few repetitions later Lumi looks unsatisfied. Then, a solution! “We’ll play a *different* game,” she announces. “I tell you to be the monster; you grab and scare me; I say stop; but this time”—she punctuates each word—“*You! Don’t! Stop!*” “I don’t?” Imani hesitates. “No,” Lumi replies confidently, “you go *on and on, more and more.*” “What if it gets too much?” Imani asks anxiously. The little girl, however, seems utterly disinterested in this adult question of safety and careful calibration. The question of safe limits does not appear to worry her: “You *have* to not stop, or else it won’t work!” she says impatiently. “Don’t worry, let’s just go *on and on, more and more.*”

I take this playful exchange to discuss the links between consent and the psychic economy of the *sexual*, a Laplanchean term that in its original French is a neologism. In English it is italicized to highlight its distinctiveness from sexuality per se. I will explain this concept in greater depth later on, but for now suffice it to say that “the *sexual* is multiple, polymorphous. The fundamental discovery of Freud, it is. . . . the object of psychoanalysis” (House 2017, p. 796). I will also explore states of productive dysregulation that I call *overwhelm*,<sup>2</sup> in the action of retranslating enigma. The essay is organized in three parts.

<sup>1</sup>While we usually rely on data from analytic treatments, observations from everyday life also serve as helpful springboards for theorizing mental phenomena; Freud’s description of the reel game and his theorizing of fort/da (1920) is a paradigmatic example of this.

<sup>2</sup>I am pointedly using *overwhelm* as a noun, in distinction from its more common use as a verb and from its adjectival form, as when we describe something as “overwhelming.”

Part I explores the psychic topography of consent, a concept garnering much needed attention through the visibility of the #MeToo movement. The notion of *affirmative consent* understands consent as issuing from a subject who is fully transparent to herself and who, in thinking consciously and deciding rationally, can anticipate the probable effects of her assent. Affirmative consent foregrounds clear communication to avoid misunderstandings and to foster mutually satisfying experiences in adult sexual encounters. I introduce a different type of consent negotiation that adds more complexity. *Limit consent* does not center on (re)producing an experience of satisfaction but instead works to facilitate novelty and surprise. In contrast to its affirmative counterpart, it hinges not on respecting limits but on transgressing them. *Limit consent* runs on nonlinear time, blurs the divide between active and passive, and comes dangerously close to the line of something going wrong. Why play with fire at all? Because, I'll propose, *limit consent* enables the pursuit of the states of overwhelm that I discuss in the next section.

Part II shares the analytic sensibilities of Muriel Dimen (1999, 2003) and Ruth Stein (1998, 2006, 2008) regarding the compelling power of sexuality and its transformative potential; it heeds Stein's plea (2008) that we rehabilitate the notion of excess in sexual experience. In this section I argue for the conceptual and clinical utility of the psychic territory I call *overwhelm*, brought about when escalating excitations are pushed to the limit. Overwhelm is a dysregulated state that is not in the purview of the repetition compulsion. Neither is it necessarily self-destructive, though it does court risk. Overwhelm differs from dysregulations that issue from a history of parental misattunement (Lyons-Ruth 1999, 2006), overstimulation, or trauma (hereafter, to distinguish them from overwhelm, *malignant dysregulations*). Unlike malignant dysregulation, overwhelm is a driven state that mostly issues from within an attuned dyad. While its phenomenology of surplus excitement makes it appear similar to malignant dysregulations or to traumatic overstimulation, it's best understood in terms of the economic regime of infantile sexuality. Overwhelm is an extreme state that can bring about ego shattering, a radical unbinding of the ego that unravels previous translations that may be at an impasse, to make room for new ones. Overwhelm can be reached through varied pathways and requires considerable, effortful repetitions. Sexuality, I suggest, especially sexuality in its transgressive and perverse renditions, may be ideally equipped to incite overwhelm.

Throughout the paper, I use the term *perverse* not as a marker of pathological sexuality but in its original analytic meaning, to denote sexuality that is polymorphous, has exchangeable objects, is fragmenting, and is not organized reproductively or heterogenitally (Freud 1905; Van Haute and Westerink 2016). In the clinical section, I will place the term in the context of attempts made in some queer communities to resignify and empower variant sexual practices, and will discuss there my reasons for retaining it despite the term's fraught and problematic history.

In Part III I offer a clinical illustration and discuss technical issues in work with overwhelm. I describe a patient's transgressive sexual experience, the state of overwhelm it produced, and how that led to a radical unbinding—a state that I theorize in relation to Bersani's notion of ego shattering (1986). I discuss how her overwhelm infiltrated the counter-transference, stimulating the analyst's infantile sexual, and producing an enactment. The work around this material led to a transformation in domains previously untouched by the analysis.

### **PART I. LIMIT CONSENT: RISK, NONLINEAR TIME, AND THE BLURRING OF ACTIVE VS. PASSIVE**

Lumi and Imani's play depicts a rather ordinary, albeit complex, scene of adult-child play.<sup>3</sup> In the first segment ("be the monster," "stop," "start again") a negotiation occurs that directs the game and that makes the starting and stopping explicit. Imani follows Lumi's instructions. The interaction proceeds well. Insofar as she scripts it, Lumi decides what it looks like, how far it goes, and when it stops. Imani, though, is not merely following Lumi's directions. For the play to work as it should, she has to be inventive and imaginative in how she renders them. And, as is true of all good play, what ensues is both real and not real. Insofar as Imani has to perform her growls and grabs monstrously enough for Lumi to be at least startled, even somewhat scared, the play is real. But it is also not real, as Imani becomes a monster, and stops being one, on command. This exchange is enacted with delicate attunement and is thus in the sphere of playful, well-regulated interaction. It has a rhythm and emotional pace

<sup>3</sup>The following reflections do not bear on the particular dynamics of this dyad or either individual. Part III explores in depth how such scenes interplay with personal history and unconscious forces.

that rouses. But it does not tip into malignant “too-muchness” (Benjamin and Atlas 2015, p. 42), that overstimulated state of damaging overexcitement. It is exciting, but manageably so.

The play, however, turns a corner when Lumi asks Imani to violate her limits going forward. This new directive requires Imani to override Lumi’s will in a *future moment* when Lumi *will* be asking her to stop. Temporally speaking, the new game is nonlinear: Lumi is preemptively authorizing Imani to disregard her command to stop, which Lumi anticipates she *will* make, and which she directs Imani *now* to ignore *later*. This is, in part, what makes it risky. How can Imani be sure that Lumi will still want her prospective “no” to be superseded when she pronounces it? How will she know the precise point at which Lumi’s softer “stop” will crystallize into a hard one if words will not act as ballast?

The paradoxical semantics of these complex negotiations—I am asking you to take my “no” to not mean “no” and to not stop at your “no” either, so that by trespassing them both you may take us into a state of *more and more*—involves relinquishing the ordinary ways boundaries are patrolled in everyday life. Such relinquishment courts a state of receptivity that can easily be mistaken for masochistic passivity. I say “mistaken” because Lumi’s receptivity is not equivalent to, and should not be confused with, passivity. There are marked differences between being susceptible to the other and capitulating to the other’s will.<sup>4</sup> Lyotard (1988) has coined the term *passibility* (in French, *passibilité*) to express this crucial distinction. Passibility is not opposed to activity; it is, rather, a state “by which alone we are fit to receive and, as a result, to modify and do, and perhaps even to enjoy” (p. 117). In psychoanalytic terms, passibility is akin to the radical receptivity that Ghent (1990) described as surrender and that he carefully distinguished from masochism and submission. For Ghent, submission is so different from resignation to passivity that it can be thought of as a “defensive mutant of surrender” (p. 111). Submission is heavy, it weighs one down, while surrender cannot be demanded or exacted by the other but occurs spontaneously. Surrender involves a giving of oneself over *to* the other, it is a sort of transfer of power; and it comes about under

<sup>4</sup>Queer of color critique offers many helpful conceptual tools with which to think these distinctions, including suggestions by Cruz (2016), Musser (2014), Nash (2014), Rodriguez (2014), Scott (2010), and Stockton (2006). My suggestions here are broadly informed by these works but take an analytically informed direction.

the aegis of “facilitative circumstances” (p. 111). Surrender yields states where one is besieged, dispossessed of oneself, subject *to* the other.<sup>5</sup>

From Imani’s angle, complying with Lumi’s request is not simple. So much can go wrong, largely because agreeing with Lumi’s new directions will court a certain kind of edge. One of the tricky elements is that, if Imani plays along, she could go too far, traumatizing Lumi, and herself in the bargain. It is precisely because Imani understands this risk that she hesitates. How, then, to go forward? To privilege Lumi’s temporally scrambled request—Lumi is telling Imani now what she will want later—Imani would have to enact a strange version of mindful attention where obeying the new game’s rules means that Imani will act in violation of Lumi’s order to stop. To do that, Imani will have to suspend her own, conscious preference to “play it safe.” On a less conscious level, to effect this deliberate crossing of limits, the mother will have to bear the rousing of something internal inside her which will in turn fuel her “forcing” Lumi. Imani, that is, will not just be “innocently” playing along. This is crucial because, as I’ll discuss in Part II, the force roused is linked to the mother’s infantile sexuality, to her own sadomasochism, “the most common and the most significant of all the perversions” (Freud 1905, p. 157). This force subtends all psychosexuality, and while it is not necessarily destructive, it is a force that can get out of hand. The risk entailed is, we might say, ordinary, and yet, depending on how it’s handled, it can usher in the precarity of pain or trauma. I describe it as ordinary not to minimize its dangers but to de-dramatize it in the sense that Lauren Berlant uses the term de-dramatization “not to deny [the] drama[*tic element*] but to address it tenderly” (Berlant and Edelman 2014, p. 14). As she writes, we only partially “understand what we are doing when we take up a position . . . that bring[s us closer] . . . to becoming undone” (p.14).

Imani’s normative sadomasochism will, of course, have to be balanced against Imani’s concern for Lumi’s well-being. Accordingly, to agree to this new game, Imani will have to assume two kinds of risk; on the more conscious level, she will have to agree to push past her worry that she may upset or even hurt Lumi. Less consciously, she has to be willing to tolerate a largely sadistic unconscious desire in her, a desire that is not pathological but common to all of us. It is her normative sadism that

<sup>5</sup>For this concept in relation to Levinas, see Scarfone 2015b.

will ultimately drive the push past Lumi's "no." Neither Imani nor Lumi knows what comes next. That, in fact, may be exactly the point.

In the game's original version, the dyad operated along the lines of affirmative consent: clear, precise, and consciously unambivalent communication that aimed to yield a desired outcome by outlining what was and was not permitted. Affirmative consent, and its medical counterpart informed consent, have emerged from long histories of boundary crossings and abusive practices in personal relationships—and medical contexts. Both are tasked with protecting those with diminished power (Faden and Beauchamp 1986) by emphasizing open sharing of information, communicative clarity, and the setting and respecting of limits (Archard 1995; Haag 1999). The importance of affirmative consent has come to the fore as U.S. culture watches the unfolding torrent of sexual abuse allegations brought forth by the #MeToo movement.

The affirmative consent model, while necessary, is insufficiently nuanced. Discourse on affirmative consent and informed consent presumes individuals with distinct centers of subjectivity who inform, negotiate, and reach agreements to minimize misunderstandings and manage expectations (Haag 1999; Hinshelwood 2004) but do not admit the complexities of unconscious factors.<sup>6</sup> Further, this discourse does not sufficiently account for the various types of consent negotiation (Butler 2011; Fischel 2016, 2019; Fischel and O'Connell 2015). In Lumi's new game, for instance, neither her consent to be trespassed nor the consent solicited of Imani are of the affirmative sort. They differ in several ways: the stopping point is not explicit; the communication has some built-in vagueness; the game has no precise aim; if the game is to proceed, Imani has both to embrace the sadistic impulses animated in her and to keep the same impulses in check.

Thus, Imani's participation paradoxically requires a tentative surrender *to* Lumi, to Lumi's desire, and to the unknowability of what's coming next. Lumi, too, is setting up the conditions of a surrender—though as a child she is less aware of that. Imani's and Lumi's consent, we might say, involves a mutual, though asymmetrical, letting go. What they are implicitly agreeing to in this negotiation is to be subjected to something unknown (Butler 2011), to being vulnerable and to being surprised. Why does Lumi

<sup>6</sup>For more in-depth discussion see DePereira, Messina, and Sansalone 2012; Gentile 2015; Saketopoulou 2011.

make this strange request? One possibility—though we can't know for sure—is that, sated with the repetition, she wants to experience something new, something that will lead her into what she describes as *more and more*. We need a different concept for this type of consent, one that, unlike affirmative consent, is predicated not on setting and observing limits, but on initiating and responding to an invitation to transgress them. To mark how closely such consent approaches the limit, I call it *limit consent*.

Limit consent has an interpersonal syntax that does not entail the assertion of one's sovereign boundaries but, rather, centers on surrendering *to* an other. This surrender can enable a new experience. Such a move into unknown territory risks injury. But if injury occurs in limit consent, it is inadvertent<sup>7</sup>; it results from infantile sexual urges that have gone too far, gone beyond play, with neither party knowing it until after the fact. That is, the injury is realized only *après coup*. Limit consent necessarily involves straddling the murky line along which something may go seriously awry. It could go awry because Imani does not "read" Lumi well; because Lumi may be unable to signal; or, more important, because she is unable to know when, on balance, she *really* wants Imani to stop; or because Imani's infantile sexuality takes over, becoming too inflamed and resulting in Imani's losing control.

Imagine a related but different scene in which two adults agree to enact a play-rape scenario. The person in Lumi's position, the "bottom," appears powerless since she hands over to the other the power to determine the stopping point. As the authorized arbiter of limits, the person in Imani's position, the "top," may be seen as the person *with* power. Obviously, a sexual scene of this sort derives its frisson and erotic charge precisely from this top-bottom power differential. But, for several reasons, we would not be correct to view this encounter as one in which power is totally split—with one person having it and the other person not. The top's authority is granted—and can be revoked—by the bottom.<sup>8</sup> Further, the idea of the top being in control overlooks the top's vulnerability: in consenting to act as the top, she has engaged the bottom's invitation

<sup>7</sup>In affirmative consent, injury may involve a more explicit disregard of the other's stated limits.

<sup>8</sup>Hegel (1807) made this argument in his exploration of the Master/slave (Lord/bondsman) dialectic. See Benjamin (1988) for an analytically informed explication, and Salamon (2016) for a cogent and incisive critique of Benjamin's work.

for her to move past her own limits. She also has to assume the risk and the responsibility of safeguarding the other, thereby accepting the possibility that she may fail. The top makes herself passible to the bottom and to the bottom's desire and in so doing must wrestle with the evocation of her normative perversity. That is, to enact the rape play, she will have to engage with the rousing of her sadomasochism but try to keep it in balance. At the same time, the popular opinion that since the bottom conceives of and directs the play she is ultimately the one in control (Deleuze 1989), is not correct either. Put otherwise, thinking of matters of control in limit consent as dichotomous (one has it or one doesn't) obscures the kaleidoscope of receptivity/activity, as well as the vulnerability, trust, and asymmetrical responsibility that make limit consent possible in the first place. Dichotomous power is more in the purview of affirmative or informed consent.

#### **Consent in the Psychoanalytic Situation**

Of note are some parallels to the analytic role and to the patient's anticipatory, largely implicit authorizing of the analyst to push limits.<sup>9</sup> The patient cannot fully appreciate what it is that she is consenting to when entering treatment (Furlong 2005; Gentile 2015) or as she begins to recount dreams, emotions, physical sensations, and more. It is only *as a result* of the analysis that she may better appreciate the affective and mnemonic currents that will have been stirred by the treatment, what the transference will have brought, and what traumatic eruptions will have dominated. The patient's original consent in that respect is in large measure naive.

In different ways, the analyst too is unaware of what she is consenting to when starting a treatment (Dailey 2014; Saketopoulou 2011, 2015; Saks and Golshan 2013). That is, though the analyst is equipped with theoretical and experiential knowledge gained from other analyses—including her own—regarding the intensities an analysis can awaken, she does not know how these will manifest in any particular treatment. Neither can she anticipate how she will become unconsciously entangled

<sup>9</sup>This parallel deserves a paper of its own. Here I only explore how I think it may relate to limit consent. Also, while I emphasize the parallels, there are important differences that should be mentioned: in the earlier example, the patient is an adult, while Lumi is a child; the cognitive capacity, embodied experiences, and psychic makeup of an adult create landscapes vastly different from the child's relating to a parental figure; and so on.

with her patient; or how her exposure to her analysand will kindle her own infantile sexual. Analysts are better aware of these constraints than most patients, and we somewhat more knowingly step into the unknowns of consent in beginning new analytic treatments. But we are not fully aware of what our consent means either.

The analyst makes the offer of analysis (Laplanche 2006; Morris 2016) sensitive to the constraints in the patient's consent. The analyst also "accepts" a different set of constraints, ones relating to the patient's originally stated limits regarding her consent to the analysis. Imagine a patient who seeks treatment to address relationship problems but declares that she does not want to discuss her history of sexual abuse. The analyst accepts this condition, but proceeds in the hope that as the analytic work progresses this limit may shift, making exploration possible. The hope that time will erode stated limits is good, standard analytic practice. In some cases, it would be poor technique to even intimate to the patient that limits may shift in the course of the work.<sup>10</sup>

This is a simple but illustrative example of why psychoanalytic work may not fall under the purview of informed consent as understood in the medical profession: "the informed exercise of choice, and [the ability] to evaluate the options available and the risks attendant upon each" (Saks and Golshan 2013, p. 6). In some respects, it may make sense to think of psychoanalytic treatments as proceeding along the lines of limit consent. The analyst's decision making is implicitly authorized by the patient; the skilled analyst registers her patient's limits—both those explicitly stated and those discerned through the analysand's refusals, symptoms, and defenses—and makes judgments regarding when to persist and when to ease up. Of course, the analyst's best judgment is not a guarantor of good outcome; no technical fiat can ensure that (Greenberg 1986). But if, as analysts, we let up when we feel the pushback of the patient's discomfort, the work would remain stagnant. If we don't, we have to bear our discomfort in evoking painful affects and memories in the patient. And we cannot anticipate what will be evoked in us and with what strength. Things can (and sometimes do) go off the rails. The analyst is "working with highly explosive forces," a risk, Freud (1915) insisted, that should not deter us (p. 170). The risk must be engaged, tolerated, even dared. In

<sup>10</sup>For an in-depth discussion of the ethics of what the analyst can and must disclose at the beginning of a treatment without compromising its scaffolding, see Saks and Golshan 2013.

those high-octane moments the analyst must resist the impulse to recoil and decide whether she will persist *despite* knowing that things could go awry.<sup>11</sup> The analyst must take risks. However judiciously the decision is made, however, if things go awry the patient may be traumatized, or the treatment may even end prematurely. These are considerable vulnerabilities for both parties. The vulnerability of the patient is the more important here and more obvious. But there are vulnerabilities for the analyst as well. It is never easy for the analyst if the patient feels hurt or leaves treatment. The analyst is also vulnerable, though in different ways; *this* is the asymmetrical responsibility I alluded to above. And, to briefly return to Imani, remember that it is actually Imani and not Lumi who worries about things becoming “too much.” It is, ultimately, Imani’s responsibility, as it is the analyst’s and not Lumi’s, or the analysand’s, to safeguard Lumi’s well-being. And it is her job—Imani’s and the analyst’s—to manage whatever gets agitated in her own self.

#### **Preconditions of Limit Consent**

But what about safety and trust? It might appear that I am arguing that these have no role to play in limit consent. On the contrary, I believe they are the conditions of possibility for limit consent to come into play in the first place. Lumi, we may assume, is able to ask to have her prospective “no” trespassed *because* Imani has proven herself trustworthy up to that point. Imani is an attuned, lively adult with whom ruptures get repaired well and easily. In the earlier version of the game, she has respected all of Lumi’s limits. These are crucial preconditions for Lumi’s desire to be pushed to the limit and into this peculiar and unpredictable unsafety. In that sense, although both affirmative and limit consent hinge on being negotiated within the protective envelopments of safe relationships, the work that safety does in each case is very different. In affirmative consent, safety’s promissory note is that the top will respect the bottom’s expressed limits. In limit consent, the relative safety of the relationship is what puts in place the “facilitative circumstances” that Ghent (1999, p. 111) described as enabling one to surrender to an other. That does not guarantee the safety of what happens next; the earlier experience of safety is merely what allows the two parties to take the risk. This

<sup>11</sup>For a clinical example, see Hansbury 2017.

pushing of limits surely comes with high stakes. Limit consent invites liability; it carries risk. Affirmative consent aims at eliminating both.

Why step out of affirmative consent and into its limit counterpart given the risks involved? Why might Lumi want to leave the earlier, well-regulated game? Why would Imani even consider Lumi's convoluted request when it would be safer to stay within the realm of "no means no"? I suggest that the request to have one's limits overrun and the responsiveness to that request are *both* driven by infantile sexuality's economic tendency to work upward toward more stimulation. The move into the "more and more" of experience can produce states of overwhelm which, as discussed next, may catalyze significant psychic transformations.

## **PART II. OVERWHELM: THE PSYCHIC ECONOMY OF "MORE AND MORE"**

Determined to disabuse his Victorian peers of the notion of sexual normality, Freud famously proposed in *Three Essays* (1905) that the sexual drive is by nature polymorphous and perverse, using the term *perverse* to "enlarge the sexual beyond the limits of the difference between the sexes and beyond sexual reproduction" (Laplanche 2000, p. 19). Irrespective of its cause or derivation, perversity for Freud was the foundation of "infantile sexuality" (the title of the second essay), which gave rise to "the sexual aberrations" (the title of the first),<sup>12</sup> with the remainder of sexuality arriving with "the transformations of puberty" (the title of the third). Perversity, thus, was not a deviation from "normality," but sexuality's very foundation. Freud taught us to expect that the sexual drive will attach to objects opportunistically (i.e., there is no predetermined "right" object); that while it sources from specific body parts (erotogenic zones) it has transferrable potential and can therefore proliferate in unexpected sites (e.g., armpits and navels can be as likely sites as the genitals); that it will be constituted by component instincts (rather than, say, sadism or exhibitionism being the sexualized debris of trauma or overstimulation); and that it will not be teleologically organized (it will not necessarily seek the climactic or reproductive end). Then, seemingly recoiling from his radical ideas (Dimen 1999; Goldner 2003), Freud shifted course to propose

<sup>12</sup>From a rhetorical perspective it can appear paradoxical that Freud started first with the sexual aberrations and theorized their foundations thereafter.

that the irreverent and unobliged character of the infantile sexual acquires in puberty the mature and normative shape of heterogeneity.

But Freud was nothing if not ambivalent about the relationship between the infantile sexuality of the first two essays and the more civilized sexual instinct of the third. In *Three Essays* he struggles with this ambivalence in theorizing sexual tension: on the one hand, “a feeling of tension necessarily involves unpleasure” (p. 209); while on the other, “the tension of sexual excitement . . . is also undoubtedly felt as pleasurable” (p. 209). This contradiction yields two registers in the ontogeny of sexuality: forepleasure, the pleasurable buildup of tension in “perverse” infantile sexuality, begets further pleasure, while in the domain of mature sexuality, accumulated excitations produce *unpleasure*, thereby impelling action to bring about orgasm—hence the term *end-pleasure*. Dimen (1999), Bersani (1986), and George Klein (1961) have noted that the theorizing of fore- and end-pleasures sets up a two-tier system of discrepant economic sexual genres. In the perverse regime, tension continually escalates, while the mature rendition runs on a discharge economy.

#### ***The Two Economic Regimes in Laplanche: Instinct and Drive***

Laplanche did not think of instinct and drive as contradictory regimes or as needing reconciliation. To him, they coexist and work in tandem despite their distinct origins and different economic investments. For him the sexual *instinct* is innate, biological, and adaptational. It aims to bind, works toward synthesis, and incites to actions that quell tension—it is, that is, consistent with orgasmic release. But “when the sexual instinct arrives [in puberty, its] . . . seat [is] already occupied” by the sexual drive (2000, p. 12). The two, henceforth inseparable, will always contain, entail, and partake of each other. Sexuality draws on this commerce between the drive and instinct.

What, though, is the sexual drive for Laplanche? For him it is not innate but epigenetic. It seeks not a moderation of tension but its escalation, even to “the point of complete exhaustion” (2005, p. 13). If not innate, where does it come from? For Laplanche it is constituted through the “intervention of the other” (2002, p. 103). Epigrammatically, the parent’s acts of care surcharge the conscious messages of attachment emitted to the child with the parent’s unconscious sexual conflicts/contaminants. This surcharge slips in like a “stowaway passenger” (Scarfone 2013, p. 550) compromising, as Laplanche puts it, the consciously intended

message. This renders the message enigmatic. The infant is propelled to make meaning of these enigmatic messages by generating, for example, a fantasy (Scarfone 2017). Laplanche called this meaning-making process *translation*. He emphasized, though, that since the excess charge of the parent's original message is unconscious *to the parent*, the infant's translations cannot be—and therefore are not—veridical decodings of it. Translations do not interpret accurately vs. inaccurately; they only attempt to cope with the strain produced by enigma (Scarfone 2015a). Further, this translational process is always incomplete. The message's untranslated residues get repressed, constituting the unconscious, which for Laplanche is also the *sexual*, a term equivalent to infantile sexuality. This untranslated remainder, however, is not in stasis: “‘stuck’ in the envelope of the ego like a splinter in the skin” (Laplanche 1999b, p. 209), it constantly presses for translation, giving rise to the sexual drive.

### **The Taming of the Sexual**

When Freud (1914) introduced the concept of narcissism, Laplanche (2015) argues, he set the stage for a radical shift in the theorizing of sexuality. By suggesting that “the ego unifies the sexual drives . . . adopt[ing] as its own the interest of the self-preservative functions” (p. 169), Freud made the ego, an ego that became homeostatically focused and whose work was to bind, the seat of the sexual drive. Lodging sexuality in this docile terrain meant that Freud's original emphasis on sexuality as “something contrary and hostile to the ego” was diminished (Laplanche 2011, p. 170). Thus, in *Beyond the Pleasure Principle* (1920), when Freud posited Eros as a less fierce concept, “the destructive and destabilizing aspects of sexuality” (Laplanche 2011, p. 170) were further obscured, resulting in the taming and domestication of the *sexual*. Laplanche referred to the fragmenting dimensions of the sexual that were thus excised from the *sexual* as the “demonic sexual.” This excision meant that the demonic sexual would need to be relocated elsewhere: hence the new conceptual space that Freud called the death drive.

Laplanche's reading of Freud's theoretical pivots allows us to see how the assimilation of sexuality under the tranquil and unifying aegis of the ego paved the way to the *sexual's* becoming exclusively nested within object relations and being driven from drive theory—a metapsychological problem widely critiqued (see, e.g., Green 1995; Fonagy 2008; Dimen 2003) and which effectively ousted “the sharpest edge of analysis . . . the

‘plague’, in short, that Freud was to bring over . . . when crossing the Atlantic for the first time in 1909” (Kahn 2018, p. 3). A related yet less noticed consequence is that removal of the “fragmented and fragmenting” order of the *sexual* from sexuality (Laplanche 1999a, p. 168; emphasis added) meant that sexuality could no longer be seen as having ontological claims on aggression. As such, entwinements of pain/suffering and pleasure are understood as pathological or symptomatic, and as requiring a dynamic explanation. To put it differently, if the demonic sexual is not seen as a natural part of the sexual but is, metapsychologically speaking, seen as belonging to the domain of aggressivity, we will need to account dynamically for the special circumstances that bring them together. This would apply independently of whether we view aggression as endogenously derived (the death drive) or exogenously produced (e.g., as a reaction to traumatic events). The usual suspects we turn to for help in explaining the pairing of sexuality with aggression are psychic trauma, early overstimulation, and early object failures in containment (Fonagy et al. 2002). Subsequent analytic theorizing, therefore, particularly regarding excessive and overexcited sexual states, or sexualities that blend pain or humiliation with pleasure, follows one of two trajectories: these phenomena are seen either as inventive or defensive sexualizations of early psychic trauma (Khan 1979; McDougall 1995; Stoller 1975) or as attempts by the psyche to cope with early parental misattunement, overstimulation, or overexcitement (Benjamin 1988; Khan 1979; Meltzer 1973). Ruth Stein (2008) argued against this genealogy of theorizing, noting how we “seem to ‘forget’ or repress how different we are when we are sexual and how great the discrepancy is between sexuality and daily life” (p. 44). To Laplanche, the polarity at work is not between Eros and Death but between “the *sexual drives* of death and the *sexual drives* of life” (2015, p. 170).

### **Into Overwhelm**

Laplanche (1999a) saw the distinction between the sexual drive and the sexual instinct as “perhaps the most important opposition in psychoanalytic theory” (p. 161). Because he thought that the process of translation can never be exhausted (the definitive meaning of the enigmatic can never be pinned down), the sexual drive is never sated, is always pressing for more. But Laplanche did not explore what psychic states we might expect to encounter if we followed the sexual drive’s appetite through its

dizzying buildup. It is as if, like Freud before him, he became frightened of the revolutionary implication of his ideas, hesitating to explore this particular one any further.

For Freud (1920) the “daemonic force” (p. 35) would be the force of the repetition compulsion. The repetition compulsion takes over in cases of trauma; it is “more primitive, more elementary, more instinctual than the pleasure principle” (p. 23). But the repetition compulsion’s demonic force is not the same as the sexual drive’s normative push to escalation, though the similarity of their energetic pulsions may cause them to be confounded. Remember that Freud’s formulation of the repetition compulsion was predicated on his having already doctored the *sexual* into a more pacified urge, and of having stripped it of its more savage elements. But since Laplanche is critical of such a defanging of sexuality, and because he insists that the sexual drive always includes both binding properties (the sexual drives of life) and unbinding properties (the sexual drives of death), it would be reasonable to assume that he would not see such a state as the province of trauma or self-destructiveness. To put it differently, the sexual drive’s frenzied economy may not always mark the workings of a destructive death drive, and neither would it have to issue from traumatic repetitions. That does not detract, of course, from the fact that a certain risk of harm is inherent in the sexual death drive.

To think about what may take place as the sexual drive reaches into the “more and more” of experience we would need a new concept. This concept would appreciate that assuming that the buildup of excitations always issues from the compulsion to repeat is to treat aggression as always already desexualized, as if its pairing with the sexual is not natural but requires particular circumstances. We would need, that is, a concept that admits of a sexualized aggression that does not arise from the compulsion to repeat. This new concept would also recognize that since the demonic sexual coexists with the sexual life drives, it cannot *de facto* be assumed to be self-destructive. And it would also admit the real risks invited by the demonic aspects of sexuality and the unbinding of the sexual death drives while not forgetting that this is a normative condition that itself involves the life sexual drives as well. Let’s call this psychic space *overwhelm*.

Before proceeding further, I want to clarify the distinctions between overwhelm and two related concepts: too-muchness and excess.

In Benjamin's and Atlas's work (2015), "too-muchness" refers to a traumatizing and overwrought relationship to one's uncontained excitement. It issues from parental failures in containment of excitement or aggression, from the parents' own overstimulated and overstimulating states. Unlike too-muchness, the "more and more" of overwhelm is more likely to arise through limit consent's reliance on the interpersonal conditions of attentiveness, passibility, and surrender. Without these, a move into too-muchness is more likely to produce traumatizing overstimulations which, unlike overwhelm, are not subject to new translations.

In her writings on excess, Stein made room for a sexuality that "is excessive of normal functioning . . . even of containment" (2008, p. 46). This necessary and highly influential intervention encouraged analysts to be more audacious in their thinking about sexuality. In Stein's thinking about excess, however, aggressivity was still seen as existing outside the domain of the sexual. While aggression could become internalized *as* sexuality it was not inherently a property of the *sexual*, it was not built into the sexual drive. Thus, Stein may be seen as running into a problem similar to Freud's, as she ended up having to draw a distinction between good excess and pathological excess. The latter involves a "breach of one's boundaries involving the experience of being flooded or overwhelmed" (p. 62). No doubt malicious intent and purposeful and/or unnegotiated boundary crossings do occur, and when they do they can be injurious and damaging, as Stein rightly explained. But these have to be distinguished from the more nuanced negotiations of limit consent, where one's boundaries may be breached not out of disregard for the other's separateness but through careful negotiations involving the other's wishes, as the discussion of Lumi's game suggests. This is the case with overwhelm.

Overwhelm is not inherently self-destructive, but it does incubate precarity and risk. Even though overwhelm draws not only from the unbinding, eruptive elements of the sexual death drive, it does engage them, and we should therefore expect it to run the risk of crossing into unsafety, where things can go off the rails. This, we might guess, could be why Imani might hesitate to participate in the new game: becoming genuinely engaged in pushing past Lumi's limits would expose Imani—and, of course, Lumi—to the dangers of Imani's normative sadomasochism. This could happen not because of some problematic dynamic in Imani but due to the very nature of the sexual drive.

***The Shattering of the Ego: Radical Unbinding through Overwhelm***

Overwhelm occurs when the sexual drive escalates with negligible interruption or modulation. Excitation stockpiles beyond the pleasure principle, into pleasure that is suffered (Saketopoulou 2014). If this escalating excitation becomes so excessive that it reaches past the brink, overwhelm can threaten the ego's coherence.<sup>13</sup> The literary theorist Leo Bersani (1986) has described this phenomenon as a *shattering* of the ego (1986). The shattering of the ego occurs when a certain threshold of intensity is reached, disturbing psychic continuity by sensations or affective processes "beyond those connected with psychic organization" (Bersani 1987, p. 213). Bersani's notion of shattering shares key features with Laplanche's notion of the ego's unbinding (1999b). In Laplanche's thinking, unbinding "de-translates . . . manifest translations" (1999a, p. 216), unweaving the ego's established meanings and stripping enigma bare. In this intermediate condition of detranslation—that is, before enigma either gets bundled up into a new translation or before it becomes repressed—enigma is untethered to signifiers. The ensuing condition is outside psychic representation. In it, language breaks apart. Experience is no longer communicable.

This is as unmediated as the drive can ever be; in ego shattering, when previous translations come undone, we would be in the presence of the drive. This state is, of course, very short-lived; a state of unbinding quickly and urgently gives way, either producing new translations or yielding to repression. The unstitching of translations, disorganized and disorganizing though it may be, opens up possibilities for the fashioning of new ones. Through this process overwhelm can deliver the subject to states of radical unbinding, disturbing the psyche and "disorganizing accustomed ways of being" (Berlant and Edelman 2014, p. 38). At such moments, what analytic treatment can offer are the conditions for freed-up enigma to become restitched into new translations rather than become repressed. To an analyst, the forging of new translations can be a transformative experience, offering the mobility of novel psychic configurations.

<sup>13</sup>In Part III I explore the technical implication of this point: the analyst's anxiety might spur her to interject questions or interpretations that disrupt the move toward overwhelm. This can also happen not through the analyst's activity but when the analyst dials things back by recoiling too early from difficult material lest it overwhelm the patient.

### **Paths to Overwhelm**

From a behavioral standpoint, we might expect that any human activity commandeered by the *sexual*—any activity, that is, that follows the drive’s frenzied economy to the apogee—may plausibly become a path to overwhelm. Consider, for instance, the range of exploits in which one can become engrossed almost to the point of losing oneself, exploits that chase a rush and which can appear—and at times be—reckless, masochistic, or self-destructive: extreme sports (e.g., skydiving); some performance art (e.g., Marina Abramovic [2008]; Ron Athey’s impactful, if disturbing, performances [Johnson 2013]); the use of psychedelic drugs (e.g., ayahuasca); high-risk/high-voltage sexual practices (e.g., barebacking<sup>14</sup>); purposefully pursued mystical experiences (e.g., silent retreats); ascetic religious practices (e.g., extreme fasting); and other practices that appear extreme and excessive.<sup>15</sup>

A wide range of behaviors can produce overwhelm, provided the infantile sexual surges through them. But perverse and transgressive sexualities may have a privileged relationship to overwhelm. Perverse sexualities are especially likely to be arrogated by the infantile sexual drive because they share with it some constitutive key features: they are embodied, nongenital organizations that involve the body’s excitability; often they are ordered around component instincts; they transgress norms<sup>16</sup>; and they recruit affects like humiliation, shame, and terror. This is not to imply that sexuality and the infantile sexual are the same; on their distinction, Laplanche (2005) was clear and insistent. The infantile sexual is the unrepresented lining that courses through *all* of psychic life (Scarfone 2014), while sexuality has more to do with the wide array of formulated—even if repressed—fantasies, feelings, thoughts, sensations, and the specific behaviors to which they give rise. It is only to say that perverse sexualities are more likely to offer pathways to certain kinds of experience.

<sup>14</sup>The psychic meanings of barebacking, a sexual practice in male gay subcultures that involves the forgoing of condom use (Dean 2009), have been transformed with the wide use of PrEP.

<sup>15</sup>There are interesting links between these states, Foucault’s (1991) and Blanchot’s (1969) notions of “limit experience” (1991), and Bataille’s concept of “inner experience” (1954, 1957). See Miller (1993) and, for a psychoanalytic angle, Saketopoulou (2014).

<sup>16</sup>It should be acknowledged that what is transgressive is highly idiosyncratic, involving a *mélange* of intrapsychic, social, and historical factors (Dimen 2003; Warner 1999).

The clinical material that follows illustrates what these ideas may look like in the analytic situation and offers some technical suggestions in working with overwhelm.

### **PART III. CLINICAL MATERIAL AND TECHNICAL IMPLICATIONS**

Isabela was in her mid-thirties when she started a four-times-weekly analysis. Her professional and social worlds seemed rich and exciting, but what unfurled in our sessions felt private, remote, even vacant. In my office she was overly poised and highly selective in her choice of word. Over time I gleaned “information” about her: she had grown up in a working-class family of color that immigrated to the United States for “a chance at a better life”; her parents had had considerable difficulty adjusting to the new culture; their persistent melancholia and a stifled longing for their homeland saturated her childhood. Isabela had always been transfixed by their magnificent pain and nostalgia, which she thought vibrated on a frequency she could not fully access, share, or understand. Much of this was communicated to me as data, with no deeper meaning. Suffice it to say that the work was protracted, the progress slow and nominal. Against the otherwise mostly affective grays, Isabela’s relationship with her lover, Raven, stood out in technicolor.

Isabela described herself as a pervert. My patient did not use this word with its usual, condemnatory connotations but in keeping with how some queer communities try to reclaim pathologized meanings to articulate sexual and gendered possibilities (e.g., Catherine Opie’s photographic work) or to build communal ties (Clare 2015).<sup>17</sup> Aware of its considerable nosological baggage, I have struggled with adopting this word in my writing (see Saketopoulou 2014). In psychoanalytic discourse perversion is a weighty term with a long and injurious history which targeted homosexuality and unconventional sexualities (Dimen 2003, 2005). Yet I continue to use it<sup>18</sup> because it captures an edge and a phenomenological dimension that more neutral descriptors like “nonnormative sexuality,” “atypical

<sup>17</sup>This follows on the tradition of resignification by which the word “queer” has been reclaimed and repurposed by queer theory scholars (de Lauretis 1991; Halperin 1997). See Edelman (1994) for a critique and a discussion of the assimilationist investments in such moves.

<sup>18</sup>Despite these reasons, I would not feel comfortable retaining it were it not also widely used in queer communities in the resignified way I have mentioned.

sexual practices,” “BDSM,” and “kink” do not. Further, I find phrases like “erotic games” and “sexual play” unhelpful because they leverage the relational arrangements within which transgressive sex occurs to make it palatable: in Kernberg’s work (1995), such sexual acts become acceptable if performed within matrimony’s perimeter; in Celenza’s work (2000) and that of others, they are granted legitimacy if/when enveloped within loving, mutual, and reciprocal relationships. Such theorizing privileges certain normative forms of erotic relationship (heterosexual; sanctioned by the state; long-term) in granting perverse sexuality the status of “benign sexual variation” (Rubin 1984, p. 148). But, more important for my argument, it also requires that affirmative consent drafts the parameters of perverse encounters when limit consent may be a more useful angle in considering perversion’s transgressive elements. Conceptualizing such sexual encounters as “enlivened erotic play” (Weinstein 2007, p. 124) denies them the darker and wilder dimensions of the sexual. For these reasons, I choose to preserve the term *perversion*: it implies transgression and reflects the interdigitation of pain, pleasure, and anguish. In addition, I want to maintain the theoretical ties to a body of work done on perverse sexuality (Chasseguet-Smirgel 1986; de M’Uzan 1974; Khan 1979; McDougall 1995, 2000; Stoller 1975, 1991, 2009) in the hope that there may be some benefit in considering some of this work through the framework of overwhelm.

Perverse sexual encounters are transgressive, inter-embodied processes that earn their coherence over time and with repeated contacts. While the buildup to overwhelm manifests in a singular scene/moment, overwhelm is not episodic in nature. In my clinical work I have observed that long interpersonal processes are required for repeated encounters, which initially are negotiated through affirmative consent, to gather the trust and momentum required to permit the move into negotiating limit consent and to court overwhelm. Clinical accounts that focus on a singular scene make it easy to overlook the complex processes required to build the traction toward overwhelm. And because of the repetition involved in the buildup to limit consent, such sexual encounters can be misconstrued as repetition compulsions, even though compulsive repetitions may not always or necessarily be at work. This was the case with Isabela. She and Raven engaged regularly in elaborately planned and carefully scripted sexual encounters. The move toward pushing Raven’s

(and her own) boundaries happened over a period of time, and required a deep knowing of each other.

A few years into our work, Isabela reported a sexual encounter that had preceded our analytic work. Because of its significance, I will describe it in detail: Isabela led Raven into a dimly lit room. She had her remove her clothing. Placing leather restraints on her wrists, she tied Raven's hands behind her back. She then blindfolded Raven, positioning her back against the wall. Isabela carefully threaded a hypodermic needle through Raven's skin below the collarbone. She proceeded symmetrically with more needles all the way down to her thigh, on both sides of Raven's body. Isabela then removed her clothing. Standing naked across Raven, she similarly pierced her own skin. After she was done, Isabela threaded an elastic thread through the corresponding needles in their bodies. Upon completing this elaborate ritual she removed Raven's blindfold. Raven looked down to take in the intricate bondage. Isabela ordered her to hold her gaze. With their eyes locked, she took a gentle step back, causing the strings to become taut. Stretched, they pulled on their skins, bringing about a painful sensation.

Isabela's skin hurt. She knew the same was true of Raven's. Alert to her lover's body, she wanted the intensity to mount but not get out of hand. She felt confident of the limits of what Raven's body could bear, and she knew well the contours of Raven's emotional life. Her focus was on the tightrope between what would have been too little and what might cause harm. Moving her body further away from Raven's, Isabela began intensifying the pull on the strings. The amplification of the experience combined with the intense eye contact was intoxicating to Isabela. Awash in this dysregulating experiential oversaturation, she felt that she was coming undone, that she was being ripped apart, "broken open" by experience.<sup>19</sup>

Isabela told me she had intended this scene as an offering to Raven, whose body had been subjected to physical violence as a child. The after-effects of Raven's traumatic childhood tormented Raven and strained their romantic relationship. Isabela's threading of her body to her lover's was meant as an inter-embodied recognition of what Raven had suffered, a statement of her commitment to remaining tied to her despite their

<sup>19</sup>Other patients have reported to me (Saketopoulou 2014) and others (Rundel 2015) similar experiences. For hypotheses regarding such states' psychic composition, see Saketopoulou 2015.

struggles. Since trauma had entered Raven through her body, Isabela told me, the offering required a somatic communication unmediated by language. But, notably, Isabela had nothing to say about what this sexual play might have meant *for her*. The encounter produced a deepened level of intimacy between the two women that was sustained over time. In real time, it delivered a surge of high-voltage sensations. Almost in passing, Isabela mentioned that when she had felt broken open she had a strong, albeit fleeting, sensation. I asked about it. She said it felt visceral, incommunicable, embodied. She was concerned about forcing it into words that did not adequately describe it. She settled on its having felt like “a smell and a taste, a burning bitterness, like a burning.”

In the hour before I was to see Isabela again, I found myself unexpectedly craving Greek coffee and fixed myself a cup. The timing was unusual. This craving is familiar to me but usually occurs after my return to New York from my annual summer trip to Greece, a time when my nostalgia for my country, language, and people reverberates most acutely. Now, though, I barely thought about it. Half an hour later, Isabela entered my office. Immediately, her demeanor changed. Following an unusually long pause on the couch, she asked about the lingering smell she detected in the room. She could not identify it. She struggled for words, and her struggling reminded me of how difficult it had been for her in our last session to describe the fleeting sensory experience when she felt broken open. Then, as she was reaching for language, it was like a hole opened up. It was unexpected, inexplicable. Isabela became distressed. She began to cry. First, quietly. Then things started to accelerate. Quickly, vertiginously, she was weeping. This was unfolding fast, too fast. I didn't know what to think. Isabela, usually measured in her expressions of affect and never before tearful, now tipped into the void. I couldn't keep up. She was now sobbing, obviously pained. The breathing was labored, syncopated. I was at a loss, unsteadied. Her distress upset me. I wanted to ground myself by understanding what just happened. But this was not a moment for “understanding.” To understand would be to treat that moment as if representations were already formed, as if it was inserted in time, in memory, and was signified. Understanding would be about trying to slow down, for my benefit, whatever was occurring. Speaking would interrupt something, though I had no idea what. I wondered if she could bear my silence. Or if *I* could; I, too, was on the carrier wave of whatever was unfolding. It was clear we were outside language in inchoate space,

outside representation. I remained quiet. Slowly, Isabela stopped sobbing. She calmed. We sat quietly, immersed in shared speechlessness trying to absorb what had happened. She left upset, not looking at me, the surge of the experience still crackling in the room. I was not sure she would be coming back.

Before this session, I had heard much and often about my patient's sexual practices, some of which had entailed a certain degree of physical risk. Spontaneously, Isabela would assure me about Raven's and her own physical safety. My sense of Isabela was that she was a careful and responsible person. I was also aware that these encounters involved physical and, importantly, uncharted emotional risks. While I felt confident that Isabela was not self-destructive or reckless, an accident could easily occur. Something could get out of hand, on the physical or the emotional plane. I had sometimes felt the temptation to try to engage her toward learning more about what these behaviors might be trying to enact or work through. I felt the pull to ask questions, to make links. But, at the same time, I did not think this would be a good path. My questions would invite her to order her material before it had a chance to fully form. Thus, I purposely did not ask Isabela about the possible meanings of her sexual interests. This is not to say that I did not think that there was represented material to which we could turn, or that there were no genetic links to be made (some of these felt obvious to me, almost begging interpretation). I felt strongly, though, that such interventions, however "neutral" or reasonable, would foreground more formed psychic elements, diverting an unfolding process of more elusive psychic material, as if I were impatiently fishing out of the water an oyster that is still organizing its process around a grain of sand. Levine (2012) cautions us to not "search for or await the emergence of something organized but *hidden* in the minds of our patients," highlighting that what may be occurring "may not have yet achieved the level of specificity and organization so as to be discernible and hidden; may not be embedded in a network of associated meanings; may not yet have achieved a specific form and may only 'exist' as a spectrum of possibilities that have yet to come into existence" (p. 608).

The analyst's task, Laplanche insists, is not to interpret, synthesize, or make meaning on the patient's behalf. Narrativizing, Laurence Kahn highlights, risks producing a binding that is only mimetic in nature (2018). It is the analysand who should be the hermeneut, who makes meaning, and it is in the interest of the analytic work for the analyst to not bind the

material for the patient (i.e., through interpretation). To take Laplanche a short step further, what this may mean at times is that the analyst must not disrupt the patient's move toward her own unbinding, toward her ego shattering, which can in turn effect the fracturing of encrusted meanings (old translations) which will bring about possibilities for new translations. What this would mean is that the analyst must guard against her fear as the patient's unbinding gathers momentum toward a state of overwhelm. Often our analytic attention is on the patient's possibly going too far and becoming overwhelmed, when it might be better placed on attending to both of our resistances, to our not going far enough for overwhelm to arise at all. Our disciplinary preoccupation with safety can at times reach levels of hagiographic idealization. Safety then becomes dangerous, a danger the costs of which are incalculable. One can measure what went wrong; one cannot measure what never became, what never materialized.

Such a stance is obviously not without risk. With Isabela, I could not be certain that her risk-taking—especially in its emotional dimensions—would turn out well. This challenge reached its zenith when it infiltrated the transference/countertransference in the session I just described. Sitting with Isabela in the room while she was coming undone, both of us accosted by the charge and inexplicability of what was inchoate and beyond our reach, I worried this would be too much for her, that she might end the analysis. And, I hope, I have conveyed that the experience had also been upsetting and unsteady to me.

Isabela started our next session with a memory we had discussed before, though superficially. Her mother, whom she idealized and revered, had raised Isabela and her sister with considerable anxiety that poverty, immigration, and racial otherness would substantially constrain their lives. The anxiety was not unwarranted given the reign of white supremacy, prejudicial views against immigrants, and the limits to dignified access to resources. The mother worked diligently to impart on her children the skills they would need to navigate life in the U.S. Isabela greatly valued these efforts. And it seemed, indeed, that a combination of the mother's attentiveness and pride in her heritage had equipped Isabela well. Her mother's hopes for a good life for her daughters took many forms. One of them became encapsulated in the fantasy that learning how to play the piano, an instrument the mother loved dearly, might place them in the right circles. To pay for private lessons she took a second job involving arduous, painful manual labor that left her body aching and sore.

Isabela remembered the piano lessons in bright detail. Upon walking into the teacher's home, she and her sister would be presented with a cup of coffee, a tradition common in their culture. Isabela experienced the freshly prepared, still scalding hot coffee not as an offering, but as a demand: the lesson would not start until she drank it. Her sister would set the coffee aside until it cooled down. But my patient agonized. Every minute of delay wasted time paid for by her mother's arduous labor. Under the teacher's commanding gaze she would hastily gulp the coffee down. The sensation would make her eyes tear up with pain. I thought of her description: "a smell and a taste, a kind of burning bitterness, like a burning."

Throughout our work, Isabela had always spoken with idealizing admiration about her mother's work ethic and devotion. Closely behind trailed feelings of guilt and fears of being undeserving of her mother's suffering: the struggles of poverty, the losses incurred through immigration, the ecstatic and insurmountable nostalgia, all in the service of a better life for her daughters. These sacrifices accrued a debt that could not be repaid. Isabela would never be good enough. Isabela's complex gender, her queer sexuality, her passion for intellectual work, none of these would be readily legible to, or valued by, her mother. As a queer woman, Isabela would never be able to produce the "good life" her mother labored for, and that added an agonizing layer of failure and insufficiency to her anguish.

But now we were able to go beyond Isabela's feelings of guilt about not making good on her mother's sacrifice. Thinking through the coffee ritual, Isabela eventually came to wonder whether her mother's sacrifice was perhaps not as straightforward as she had always thought. Was the mother's own history and her commitment to her exhaustive labor more fraught than Isabela had imagined? Did her pained relationship to class arise only upon moving to the U.S.? These questions did not rush in to replace her sense of her parents' difficulties in immigrating to the States as people of color who had limited resources and little formal education; they only further nuanced her understanding of it. Slowly, Isabela began to speak of memories of how her mother would speak to her; Isabela now located impatience, even exasperation in her tone. The mother's way of disciplining her looked harsher, even condescending at times. Large discrepancies between how Isabela and her older sister were regarded by their mother appeared in my patient's recollections. For the first time

Isabela began to contemplate her mother's relationship to her own mother. More new thoughts emerged. We explored these not as discovered truths or as recovered memories,<sup>20</sup> but as novel translations made by Isabela, as new ways of understanding her life. With time, Isabela started regarding her race, ethnic background, and queer identity more on her own terms. Increasingly, her relationship to her race, heritage, her gender, and her sexuality came to feel as belonging more to her.

### **Working with Overwhelm**

In Isabela's sexual encounter with Raven, the mounting of extreme stimulation incited a state of overwhelm; her description of feeling "being broken open by experience" may thus be seen as the experiential correlate of ego shattering. The ineffable sensation she described (neither smell nor taste) arose in the crevasses opened up by that shattering. To me, this nearly incommunicable sensory morsel was a weakly represented enigmatic bit released through the shattering of her ego, through the unbinding of old translations. But it was only in the *après-coup* of my inadvertent introduction of the smell of the Greek coffee that this sensory bit acted to selectively activate her memory of the piano lessons and the traumatizing coffee ritual.

Some further explanation of this process may help clarify. We have seen how enigma cannot be veridically decoded since it is a response to the parent's sexual unconscious. As such, it has no content per se that might be "uncovered." Enigma is either translated or repressed (Laplanche 1987). Isabela's sensation ("a smell and a taste, a burning bitterness, like a burning") can be thought of as an underdeveloped, rudimentary form that enigma took during the rupture of her ego. For it to become further elaborated, however, it had to borrow a transient form from elsewhere. Where did this form come from? I would say that it came from me and from my own psychic process (on such processes, see Levine 2012). Isabela's recounting of her sexual experience, of her coming undone, and of the vague bitter/hot sensation seems to have agitated something related to my own *sexual*, to have produced a "generative turbulence" (Civitarese 2013) in me that connects to my oddly timed making of the coffee. For

<sup>20</sup>In his paper on screen memories Freud (1899) writes, "it may indeed be questioned whether we have any memories at all from our childhood: memories relating to our childhood may be all that we possess" (p. 322).

me, Greek coffee has an excess of meaning. It is a signifier of a country I have partly lost through immigration. At the time of my work with Isabela, this loss was amplified by the impact of the Greek economic crisis that was precipitously unraveling my country's social fabric in entirely unprecedented ways, causing a true humanitarian crisis.<sup>21</sup> All of this manifestly alarming but highly represented material, I have to assume, was subtended by less represented, more enigmatic matter of my own—the content of which is beyond my scope here.

I do not think, that is, that my urge to make Greek coffee arose through some form of unconscious communication from Isabela and from her memory of the teacher's coffee making. Rather, the signifier of Greek coffee is something that *I* brought to the analytic exchange; it is a production of my own unconscious life. It reflects my own serendipitous and meaningful response to the patient's material. That, in turn, provided a medium through which the proto-form of the enigmatic in Isabela's experience (the burning, bitter/hot sensation) became elaborated, activating her own memory of the coffee offering and the piano lessons. The Greek coffee that I made, that is, derived its meaning from its retroactive effect on my patient's memory.

In the session overwhelm and the ego shattering it produced manifested in the void that opened up between Isabela and me. When overwhelm enters the analytic space, we should expect that both members of the dyad will be in a dysregulated state; that, indeed, was the case in the session I have described. This dysregulation is an indication not that something is going wrong but that something is going on. At such moments, the analyst will feel the press of wanting to bind and make meaning. This should be avoided because it may disrupt the gathering of momentum that may facilitate the unbinding of the ego. But avoiding it will not be easy. The task of not interrupting the gathering of momentum toward a state of overwhelm can be especially pronounced in working with perverse sexual material, when the analyst's own *sexual* may get evoked. With such material the analyst may become fearful, or defensively transfixed in the descriptive poignancy of the sexual scenarios

<sup>21</sup>The crisis culminated in children fainting in schools from hunger; people losing their homes and livelihoods; a surge in the suicide rate; and a disturbing skyrocketing of virulent, nationalist sentiment that elected a neo-Nazi party in parliament. The party, Golden Dawn (Χρυσή Αυγή in Greek, a name, regrettably, that I partly share: Dawn = Αυγή = Avgi) targeted immigrants, setting up blood banks and soup kitchens that exclusively served Greek citizens. At the time, I was brokenhearted by this unfolding disaster and transfixed by news about it.

(Dimen 2001; for an example, see the exchange between Bronksi [2002a,b] and Dimen [2002]). This is not to say that the scenarios enacted may not have elements that can be mined for meaning or that the analyst's conscious responses may not themselves carry useful information/communications (see, e.g., Davies 2003; McDougall 1986, 1995; Parsons 2000). It is only to say that a focus on symbolic meanings, useful as it may be in exploring defensive transformations of *represented* experience, may not be as useful in working with material that is not psychically organized. Shifting the work toward uncovering meaning will disrupt the buildup to the ego's radical unbinding. We may recall here Stein's urge: "patients who are able to harness the excessive in sexuality in liberating ways should be listened to us as analysts with as much receptivity as we can muster, knowing that *however attentively we try to capture that excess, we cannot do so conclusively*" (2008, p. 68; emphasis added).

Working with overwhelm will agitate the patient's and the analyst's *sexual*. In this case, the analyst's enactments (here, the Greek coffee) excited the patient's earlier mnemonic traces in the *après-coup*. Enactments of this sort are akin to acts of figurability (Botella and Botella 2005, 2013; Levine 2012). Taking up these retroactive memories in the analysis with Isabela helped ensure that the enigma that got freed up in the unbinding of the ego did not get repressed, giving it room to become retranslated *by the patient*. Isabela's new translations made more degrees of psychic freedom possible for her, enabling her to thread retranslations with her own meanings. The reassembly of the ego that followed her radical unbinding produced translations of her own making (not furnished by me) that were less tightly coiled around the other's desire, bringing enigma more into her own possession.

A self with greater agency and freedom, one that may answer less to parental phantoms or to cultural mandates,<sup>22</sup> may thus become possible through the work of overwhelm. But it is important to be clear that by speaking of freedom I do not mean to imply some greater access to a "true" self or "real" access to one's interiority. Speaking of access or truth makes little sense because enigma is not about recuperating some primal memory or an unconsciously transmitted historical truth. What becomes available to the patient through this process is always—and only—a new

<sup>22</sup>"Cultural mandates" because Laplanche (2005) tells us that the infant will necessarily borrow from mythosymbolic forms and larger discursive frameworks in order to craft her translations. This is consistent with Aulagnier (1975), an important point I can't explore further here.

translation. New translations are no more definitive or “true” than the earlier, unraveled translations; they are subject to being broken down and to being stitched together just like the earlier ones. What is at stake here is not a “final destination” as far as translation is concerned, but how well a translation works at a particular point in the patient’s life. In that sense, we should assume that the potential for mobility and shape-shifting exists in all translations: no one translation has the final word. To put it differently, the promise of overwhelm is not an authoritative new translation; neither does it offer repair or “liberation.” What materialized in and through Isabela’s ego shattering, my enactment, the recollection it brought forth, and the retranslations that arose in our work does not capture anything with historical accuracy. Isabela did not “discover” the mother’s ambivalence, racial trauma, or class injury—though these may well be there. What Isabela was able to do was *craft* a way for her class, her race, her gender, and her queer sexuality to become more hers, to be less answerable to the meanings and anxieties it generated in the other, bringing them more into her own possession.

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