

## WEEK 6 ANSWER TO QUESTION 4

STEP 6.7 ASK MARK

So here comes the fourth and last question in our last week. And it goes like this: "What about psychosis? It seems that all four properties of the mind are affected in psychosis. Is the mind damaged, malfunctioning, or is it temporarily or permanently lost? Is it possible not only metaphorically to lose one's mind? If so, can it be recovered?"

Well, let's start with the end of the question. Is it possible not only metaphorically but literally to lose one's mind? And if so, can it be recovered?

Oh yes, it's possible to lose one's mind, but in a very concrete sense. The extreme example is in a coma. You go into a coma, you're not there. You, your mind, is not there anymore. Your body's still there, but there's no-- none of the stuff that I've been talking about, those four properties, all of them disappear, at least including subjectivity in the sense that subjectivity only becomes mental once you're capable of feeling like something.

So all of those properties are gone and there's no mind there. When you, please God, recover from your coma, then your mind returns. And if there's no permanent damage that had caused the coma in the first place, then your mind comes back again.

We have the same experience with general anaesthetic. The mind is literally switched off. It's the whole point of a general anaesthetic. And then it comes back again.

And in the most mundane sense, every night when you go to sleep you lose your mind. You're not there anymore, in dreamless sleep. When you dream, your mind comes back, but in a different form.

And it's this different form of dreams as opposed to waking cognition that begins to address the first part of this question which pertains to psychosis. So let me just first of all reiterate, underscore the first point that I'm making, which is that yes, you can lose your mind. But psychosis is not a matter of losing one's mind. Losing one's mind is coma or general anaesthetic or dreamless sleep. That's when the four properties are absent.

In psychosis, all properties of the mind are still present, but in a distorted form. So the subjectivity, the consciousness, the intentionality, and the agency of the psychotic patient are different from that of the non-psychotic person. And analysing how they are different

in each of those four respects is a useful way of thinking about what a psychosis is. But it's not-- the colloquial phrase, you know, "he lost his mind," I don't think applies in a literal sense to psychosis.

And as I said earlier, it's a bit like a dream. In your dreaming sleep, you're there, but you're psychotic. That is to say, you're hallucinating and you're delusional. What does that mean?

Well, first of all, clearly you're a subject. The dream is happening to you. Secondly, the dream is a state of consciousness, so consciousness and subjectivity are present.

Thirdly, there's intentionality in dreams and in psychosis. In fact, in both dreams and psychosis, there's massive activation of that dopaminergic SEEKING system that we've spoken about so much, which is the kind of volitional system par excellence of the mammalian brain. There's every reason in the world to believe that both the dreaming person and the psychotic person are in a motivated state, that their cognitions are directed toward the world, they're about something in the world, and that they're trying to achieve something, but the world as represented-- going back to the consciousness, the world that they represent is not a veridical one. It's one that is more powerfully driven by the omnipotence-- the delusional reality of the psychotic patient comes more from within than from the reality principle, from learning from experience. And in fact, that's one of the cardinal features of a psychosis, that the patient-- that there's a loss not so much of their minds as of their capacity to tolerate reality as it is, as opposed to how they wish to construe it in their psychosis.

And then when it comes to agency, likewise. There are gross disorders of agency in different types of psychosis. This applies in different ways. But there still is an agent there. I agree it's a degraded agent. But as I've said all along, agency admits of degrees.

So the psychotic mind is not lost. But the mind can be lost, as it is, as I've said, in coma, general anaesthetic, and sleep.

The interesting point that I'd like to end with on regard to this last question is how is it possible that after a coma you come back as still in your mind? You know, your mind has been switched off, and then it's back again. What that refers to is two things. The one is that you are still in the same body, and so the feelings which represent you and your vital needs and the instinctual machinery that's evolved over millennia, over aeons of time to deal with those needs, all of that comes back. As your body is still there, so your emotional life, which is in a very oversimplified way the representation of your inner body, of your visceral body, it's you, that's what you are in the emotional dimension of your mind, that comes back with your regaining sentience.

But then there's this other aspect, which is the representational, the cognitive aspect. Everything that you've learnt throughout your lifetime also comes back. And this has to do with the fundamental stuff that cognition is made of, which is memory traces. They are structures. They are permanent things. And whether they are currently activated or not, they are still there in a latent state. And we know this from our everyday-- from everything about our everyday experience.

I am not thinking right now about what I had for breakfast this morning. But ah, now I am. So it wasn't activated a few minutes ago, but now it is activated. It's there in some relatively permanent form. And so this is the corticothalamic aspect of the brain. And unless it's damaged as I say in coma, when the brain is reactivated, then everything that it's internalised will be reactivated again too.

So there we have it. Final four questions brings us to the end of this course about the mind. I hope that you have a much better-- I sincerely, deeply, anxiously hope that you have a much better idea about what we mean by this word "mind," what a mind is. And if you don't yet have an absolutely definitively resolved conceptualisation for yourself of what you mean by "mind" when you use that word, I hope that at least you have a better one than you started with, and that you have begun a process of addressing this question in ways that will continue to prove useful.

That leads to the question that's been asked also so often by you, where do we go to from here? And there may well be other courses that we offer. I must say that there's nothing currently in the works, but there may very well be other courses that we offer within this general area.

But in the interim, what I would like to suggest you do is go to the website of the Neuropsychoanalysis association. The website is www.neuropsa.org.uk. So that's neuro, N-E-U-R-O-P-S-A, that's one word, neuropsa, dot org, O-R-G, dot, U-K, United Kingdom. That website, that's an organisation I've had a lot to do with, all of my closest colleagues belong to that organisation.

And so if you want to learn about events, upcoming events like for example our annual congress this year, being held in Amsterdam in mid-July, upcoming events, very often we have big events for example in New York City. We also have an ongoing group in London and in various cities around the world. So if you want to immerse yourself in this way of thinking and learn from people who think like me within the mental health and mental sciences and neurosciences sphere, that's a good place to start.

OK. Thanks very much until perhaps next time. Bye bye.



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