

## Negative Hallucination as the Representation of the Unrepresentable<sup>1</sup>

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### Abstract

Negative hallucination is a decisive term for André Green since he used it in order to develop all the other concepts and clinical situations which he highlighted in his work of the negative. Negative hallucination is not a pathological phenomenon but a psychic structure which does not refer to an actual perception but to the representation of the object's absence. Accordingly, as Green writes, 'it is not the absence of representation as is suggested by the absence of the image in the mirror, but the *representation of the absence of representation*'. This means that negative hallucination refers to an unreal and fantasmatic construction, a box of blankness, full of thin air, or in other words to a phantasy and, as Green says, a 'neoreality' (191). In this paper we will focus on this clinical construction and we will try to see how negative hallucination as the blankness per se can represent the negative, the untold, the always latent. Then we will trace the origins of negativity as coming from the maternal mourning, i.e. her untold lament. In order to do this we will trace André Green's work on the negative [1] and some fragments from his theory on the dead mother [2]. Last but not least, we will focus on negative hallucination as a spatiotemporal structure which takes place in subject's life and shows particular characteristics that are related to D.W. Winnicott's 'transitional space'.

**Keywords:** *Negative Hallucination; Representation; Unrepresentable*

Negative hallucination refers to a special phenomenon that often takes place both in everyday life and clinical practice. It signifies absence in a very virtual and explicit way and alludes to an untold affect and, therefore, to an unusual experience colored by negative feelings. It has been first detected by Sigmund Freud and Sándor Ferenczi, as part of the psychotic spectrum, and then it has been mainly studied by André Green especially in "The work of the negative" [1]. This paper will mainly concentrate on Green's assertions on negative hallucination as an independent phenomenon or outcome of the negative drive and will especially focus on negative hallucination's paradox of representing the unrepresentable loss.

In the first part of this paper, emphasis will be laid on the theoretical background of negative hallucination and on its clinical and theoretical definition. For these purposes, a clinical example by Christopher Bollas will be used at the beginning of the discussion. Later, in the second part, we will deal with the origins of the phenomenon in regards with the mother's psychic structure. In particular, the paradoxes of the dead mother will be discussed, as well as, the way they channel into the subject's psyche. In the third part, the interest will be focused on the defensive mechanisms the subject adopts in order to deal with the dead mother and negative hallucination will be seen as the subject's affective representation in order to cope with her dilemma. In the fourth part, negative hallucination will be examined as an independent negative space or experience and in the fifth part we will see how this state goes hand in hand with the dynamics of the negative force. In all, this paper will embark on composing an overall view of this multifaceted phenomenon, by especially implying its associative links with both the subject's psychogenetic environment and the theory of the drives.

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### Negative hallucination: a theoretical background

As Antonio was telling me the details of a story and the tale unfolded and deepened, he gradually became less communicative. Although he initially seemed talkative, composed and alert, he suddenly transformed into a mute, distraught and lifeless looking self. It was as if “something had come over him”, as he said. His face turned into drawn and expressionless. He was like a figure out of Walking Dead films. When I asked him what he was thinking, this ordinary question, I threw him momentarily back into his lively self. It felt like a resistance of a peculiar kind, as if he had suddenly overcome by something [3].

In this vignette, Christopher Bollas portrays the case of Antonio who suffers by an odd but quite frequent phenomenon in life and in the consulting room. This phenomenon refers to negative hallucination and describes a moment of blankness which can be seen in states of psychic agnosia, when “the memory is failing” and “the mind’s gone blank”, or when, during analysis, the narrative stops without the production of any associations. It also refers to the state of *blank psychosis* in which mental functioning is empty or “paralyzed” (see Donnet & Green, 1973). Negative hallucination is also related to blank sleep, a sleep empty of representations but full of emotion. However, although negative hallucination refers to blankness, it does form a representation, and, as we will see below, it refers to this very lack of representation which exists in its very presence.

Reading the first references to hypnosis and hysteria, or *The Psychopathology of Everyday Life* [4], one might deduce that Sigmund Freud did not theorize negative hallucination as an independent archaic mechanism, but only investigated it in terms of repression, by constituting a state that rejects reality and involves not thought but perception. In fact, according to the *International Journal of Psychoanalysis* (Thomson Gale, Open library, 2005), Freud, in “Delusions and Dreams in Jensen’s ‘Gradiva’” [5] describes a figure who having repressed the totality of his love life, suffers from a propensity to negative hallucination that paves the way for hysterical delusions. These delusions – that can take the form of hysterical terror, as he described – can erase live impressions and then produce “gaps in the psyche” as the origin of a psychosis. However, later in 1924 Freud generalized the phenomenon by arguing that in many cases when an unbearable reality cannot be perceived, a delusion appears to close the perceptual breach.

Besides, Sándor Ferenczi [6] developed the idea that negative hallucination forms the first phase of psychosis and refers to the narcissistic defense against the traumatic influx of excitations, while the second phase alludes to the compensatory production of positive hallucinations. For him, negative hallucination produces a gap in reality or a vague impression of unreality and can take the forms of hesitation, blankness or mental stupor which precede the psychotic delusions.

From 1977 to 1994, André Green reexamined negative hallucination and gave it an important place in theory and clinical practice. Following Freud and Ferenczi, he maintained their formulation that negative hallucination describes the moments when the psyche withdraws from reality when the latter is over-traumatic. However, he did not perceive negative hallucination as a pathological phenomenon, but as a state that can take place everywhere in life. In particular, he suggested that negative hallucination is part of the negative force. In psychoanalysis, the negative, as has thoroughly been described by Green, refers to the integral part of the death drive and forms a decompositional force which deconstructs the subject’s foundation and impregnates the subject’s relations with conflict. It carries a latent and traumatic state which works as an “organized disorganisation” throughout life, as Green proposes (1993 [1999]: 61) [1].

Many British thinkers (e.g. Winnicott, Bion) [7] opposed to this idea and supported that the negative cannot be represented and instead that every lack is registered in the psyche as a bad experience. However, the phenomenon of negative hallucination proved that a bad experience cannot be excluded from the psychic map but on the contrary – and because of its “badness” – it can be represented. Therefore, negative hallucination constitutes a framework for experience so that we can perceive absence as absence and not just as an unexperienced nothing. It forms the representation of an accident, an incident of loss of consciousness and shock.

Furthermore, following Green's assertions, although negative hallucination is carried out against perception, it is accompanied by conflictual drives and affects. In particular, as Green explains (*Ibid.*: 194), negative hallucination emerges from the collision of the anti-theoretical drives of the inside and the outside; the repressed excitations, which come from unconscious representations, can reach the pre-conscious and influence it, especially when the latter is not sufficiently constructed. In the case that the unconscious force is very strong, the pre-conscious might be flooded by the unconscious immersions. If, at the same time, something analogous happens in the outer side of the pre-conscious, then a strong force will be exercised from the external perceptive source. As a result, the forces from internality and externality will be confused.

Green illustrates the conflictual forces with the analogy of the meeting-crash between two trains without brakes, going at full speed on the same rails, which lack of any signs or lights. The two trains are the repressed unconscious representation and the conscious perception respectively, which overwhelm the precarious link between the pre-conscious representations. In front of the danger of this collision, which depicts the disintegration of the ego, negative hallucination will take place and will play the role of the defense in order to avert the collision by cutting off the perception. It will form a blank space, a "white surface" which will guarantee that the catastrophic crash is avoided (*Ibid.*: 278).

This is the point when negative hallucination proves to be also helpful in life. It provides a gap, a breath, a small pause during life which will preserve the psyche from toxic conflicts. It forms a 'hiatus', a 'decussation' (*Ibid.*: 209), as Green says, that works as a protecting bubble around the ego. It equips the subject with the non-verbal signals that something is going wrong and thus gives the subject the opportunity to consider the gaps and to fill them in. In fact, for Green it is also called as "a neoreality" of emptiness (*Ibid.*: 191) and it, therefore, describes this sense of emptiness, which, on the one hand, is real and conscious (a "reality") and, on the other, it refers to an imaginary construction ("neo-") that has been re-invented by the subject as a mechanism of defense in order to preserve the equilibrium of the organism.

Although negative hallucination does not include perceptual or verbal representations, it does not portray the absence of representation, as suggested by the absence of the image in the mirror, but the *representation of the absence of representation*. This means that it refers to a state of great emotional intensity which is though depicted as *a box of blankness*, full of thin air. In fact, in Bollas' clinical case, although talkative, Antonio suddenly transforms himself into mute and expressionless, by thus creating an unreal and fantasmatic construction, which emerges from a trauma that is difficult to be defined and uttered. Therefore, negative hallucination refers to an absence in presence. It depicts a moment of blankness within real time. This is a moment of an actual break from reality and perception. This is a state when the mind stops and empties from representations.

### Negative hallucination: the representation of the mute maternal trauma

Due to its peculiarity and in order its status to be further clarified, it would be interesting negative hallucination to be framed within a psychogenetic background. In particular, the reason why these moments of stagnation occur is unknown to the subject. As Green points out, they refer to a latent incident of loss that took place at some point in the subject's history: *the psychic loss of the object*. This object-loss though does not refer to the normal departure of the mother, but to a bizarre loss which is depicted in the "*dead mother*" complex. The dead mother complex does not signify the physical loss of the mother. Namely, it does not refer to her literal death or absence. Besides it does not allude to the universal loss of the mother due to normal distractions (the father, the work, etc.) during development. Instead, the dead mother complex expresses "a *metaphor*, independent of the bereavement of a real object" (Green 1983 [2001]: 176, my emphasis) [2], and paradoxically is related to the loss of the mother in presence. In other words, this is a mother who is psychically absent although physically present.

In particular, the subject's loss has been established by a mother who is physically close to her child, but "her heart is not in it", who is "silent although talkative" (*Ibid.*: 179). Moreover, unlike other mothers who sometimes get sad and moody, the dead mother conveys a more dramatic state of sadness. She refuses her own moods, killing off contact with the processes of inner life and remains perpetually in "hibernation". Thus, she becomes psychically distant; namely she does not hold her child and has taken with her the major portion of her love and tenderness, so that the child is left blank and empty of representations. Thus, as Green says, the mother is felt as absent and her departure leaves the unoccupied state, the "carte blanche", or the *representation of her absence*.

However, the dead mother was not always sad. She had once been a source of vitality to her child, but because of a trauma suffered while the child was still young, she withdraws her interest and love from the child by brutally transforming herself into a toneless figure. According to Green, the trauma she suffered from does not refer to an extraordinary disaster, but to more frequent events, such as the death of a child in infancy or a miscarriage, which is very common. It might also be her awareness that her partner is cheating on her, or because she has lost her own father or mother. Although all these traumas have not made her entirely depressed, they have cathected her into a permanent state of a mute mourning: a mourning for a shock that she had rationalized but that had not been articulated in its greatness. So the mother develops an unrepresentable trauma which latently permeates her relationship with the child, as well. This unrepresentable trauma is expressed by her as an enigma. It is as if she suffers by an unnamed and enigmatic sorrow, a sorrow which is not explicitly expressed and thus there is a shadow around her behavior.

Paradoxically enough, though, this trauma is not obvious in the mother's actual relationship with the child, since the former remains very preoccupied and active with latter. This means that, although the mother appears psychically distant and traumatized, in real terms she is over-controlling, over-protective and anxious with her child: "Dead and present, but present nonetheless", writes Green (*Ibid.*: 192). Besides, as Jed Sekoff writes, the dead mother is "a misnomer", not for the exaggeration of the term, but because "dead" does not fully capture her power [8]. She could more accurately be described as not only "undead" but also as "compressing", "entrapping", or even "bad" in a Kleinian vocabulary, rather than lifeless (*Ibid.*: 121).

However, the dead mother is present not on a deep but only on a superficial level in her child's life. She appears as being dependent to him/ her, not though as a personal attachment, but as an addiction that she deeply resented: "A heroin addict does not love heroin. The fact that he will kill to get it does not mean he loves it or feels any kind of affection for it", says Thomas H Ogden [9]. The same stands for the dead mother complex in which the child is used by the mother more as an addictive drug, rather than as a person with separate needs. This is why the subject feels that his/her mother is "immune to human vulnerabilities" and, therefore, unable of providing care but, but with an urgent need to be saved.

Furthermore, the dead mother's domination proves to have a great impact on the operations of child's the thinking process, since she leaves for him/her no room for representations. In other words, she does not disappear normally by leaving enough space for the child to activate his/her own thinking-process, to understand that she has left and then to proceed to the construction of his/her own symbolic representations. On the contrary, she occupies all his/her psychic space and she totally identifies with him/her without letting him/her representing the normal and reasonable loss of the mother.

This is the environment where negative hallucination emerges. In negative hallucination, the subject remains motionless because of the hypercathexis on the paradoxical dead mother. The mother's energy has been massively gathered in his/her psyche by providing him/ her with two antithetical messages regarding her presence- absence. In other words, the child wonders: is she present or is she absent? It is as if she has activated two trains coming from different directions: on the one hand, she presses him/her from the inside by transferring her sadness, compact and unmetabolized, into his/her psyche. So he/she inherits an inner lack, or her "weak psychic immune system", if someone could argue. On the other hand, she presses him/her from the outside with her dominant presence. So he/she is confronting an outer pressure that his/her inner space is not steady enough to tolerate. Therefore, a psychic collision is unavoidable.

### The subject's response: decathexis and identification

Within the state of the dead mother complex, in which the mother conveys all these contradictory messages, the subject is experiencing the catastrophe of losing the maternal love and even the threat of the loss of the mother herself, due to her deep mourning and their subsequent lack of emotional contact. In order, therefore, to preserve his/her psyche, the subject invokes a defensive process and organizes his/her ego by following a movement with two antithetical aspects: 'the *decathexis* of the maternal object and the unconscious *identification* with the dead mother' (Green, 1983: 178, my emphasis) [2].

### Decathexis

Decathexis is both affective and representative and constitutes the psychic murder of the object of love, accomplished without hatred by the subject. In fact, the subject fights through different methods among which agitation, insomnia and nocturnal terrors and finally he/she succeeds in disinvesting the mother. He/she eliminates the object momentarily and creates his/her own space in which the conflictual object is put "outside of the ego", as Green says (1993: 266) [1]. In fact, as shown in Bollas' case, Antonio becomes less communicative and shows "a resistance of a peculiar kind"; he dissociates from the analyst for a moment and proceeds to the constant unbinding of the relational links.

In fact, decathexis leaves the subject cathected into a negative state. As Green says, 'cathexis is what makes your life continuous, good or bad, but still meaningful [...], it means that you have a permanent flow of energy that you put in all the activities'. However, decathexis refers to the halt of every effort, to the rejection of every action, to the withdrawal of energy from an idea or an object. Moreover, decathexis from the maternal imago, as Martin S Bergmann [10] writes, does not refer to its repression. The mechanism of repression bars access from the unconscious to the conscious, but what has been repressed remains alive and seeks to return from repression. Thus, in repression the subject remains inwardly alive.

By contrast, in decathexis, although the object has been withdrawn from consciousness, the subject is still inwardly dead, or a "Walking Dead", as in Antonio's case. This is why Green supports that decathexis is the product of the death drive: "Because of the power of the death instinct, ego cathexes are reduced to naught and negative narcissism becomes a force which decathects ego libido, without returning it to the object". When this happens, "the ego becomes as disinterested in itself as in the object, leaving only a yearning to vanish: to be drawn towards death and Nothingness" [11]. Therefore, in decathexis the subject enters in a state of negativity in which he/she ardently seeks the non-desire for the Other and the return to the quiescent state, the non-existence and the non-being. In real terms, this is detected in the agnosia-states we mentioned earlier, i.e. when 'the mind has gone blank' or 'when the memory is failing'.

### Identification

The entire decathexis of the maternal object would be devastating for the subject since it would cause the object's complete destruction and the subject's lifelong self-exile from the maternal land. So, paradoxically enough, in order to overcompensate for the loss and without knowing it, the subject *identifies* with the object. He/she establishes a *reactive symmetry* with it and in the end he/she succeeds to possess it not by becoming like it but by becoming the object *itself*. Hence, he/she internalizes the mother and, by maintaining her "perpetually embalmed", he/she becomes haunted by her presence (Green, 1986: 162) [11].

Furthermore, as Green clarifies, the subject does not identify with the mother as such (positive identification) but with the "hole left (from her) by decathexis" (negative identification). This means that he/she does not necessarily become a dead parent himself by acquiring a positive identification stance but that he/she is identified with *affect* left by the mother; her sadness and emptiness (the "hole") reflects on him/her and he/she becomes sad and empty as well. Moreover, with the word "hole", Green "positivises" absence. He says that this hole or "hiatus" does not refer to a simple void, but it becomes "the substratum for what is real", "the only real thing" [12]. As a patient says "All I've got is what I have not got". This means that the gap becomes real, more real than the existing objects that are around. Therefore, absence becomes tangible and acquires a form.

**Affective representation**

Following Green’s theorem, negative hallucination forms a phenomenon that materializes the twofold processes of decaethesis-identification into a specific representation. In particular, on the one hand, the subject decaethes the mother and does not verbalize the hypercaethesis on her absence. On the other hand, he/she cannot negate the *affect* of this hypercaethesis, and, in fact, this affect is so overwhelming that it perpetuates his/her inability to think in verbal representations. At this point the subject remains detached from any idea or verbal thought and therefore he/she inevitably directs towards ideographic representations. Negative hallucination composes this kind of ideographic representation and, in particular, of an *affective representation*; it reactivates a preverbal state of thought in which the object and its absence are not perceived as conscious facts, but only as a *nostalgic atmosphere* and experience. This is why Antonio talks about “something that had come over him”. He experiences a vague and general sensation that cannot be uttered but only affectively represented and experienced. This is a negatively colored affect that takes the form of an enigma, an un-explained state which is not pleasant, but rather unpleasant and sad.

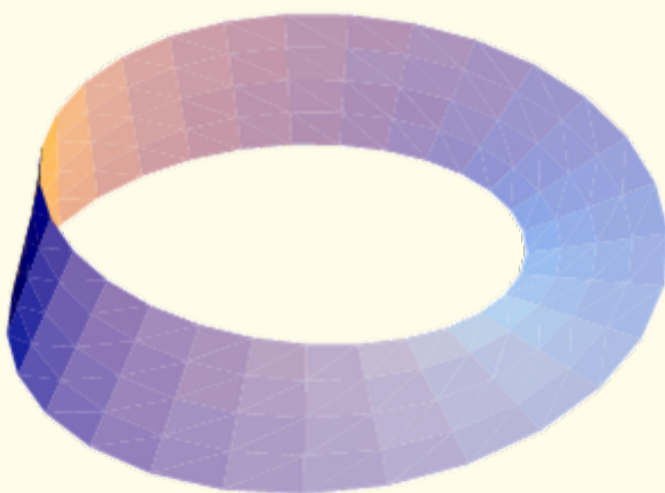
**The construction of a negative space**

Since negative hallucination forms an experience and a representation of an affective kind, it could also be proposed that it composes a psychic structure with *independent features*. In order this structure to be understood it could be studied in relation to Donald W. Winnicott’s “transitional space”<sup>2</sup>. This assumption is not random, since Green was remarkably influenced by Winnicott and especially by his perception of phantasy as a particular *space*. Specifically, Winnicott implied that phantasy, on the one, hand refers to a chronological phase that took place at one point in the past. On the other hand, though, he implied that phantasy is also an “*area*” and namely a compact state or space, which takes place periodically in life. In *Playing and Reality* (1971), Winnicott spoke about “an intermediate area of experiencing, to which inner reality and external life both contribute”. For him this space works during the “interval time” after the maternal absence when the child builds up some functional personal patterns in order to overcome the mother’s loss. Schematically this state could be seen as an imaginary *space*, a ‘*spatiotemporal construction*’ that works as a comforter for the subject to deal with the pain of separation.

Following Winnicott’s paradigm, Green also spoke about negative hallucination with topographical terms and suggested that it refers to a phantasmatic construction “established [within] the boundaries of an empty space” (Green, 2001: 87, my emphasis) [2], or that it composes a “screen”, a “surface”, a “framing structure” (Green, 1999: 278 & 1983: 193) [1,2] within the psyche. It could be said so that negative hallucination forms a “psychic locality”, a spatial territory familiar to Winnicott’s transitional space. With its illusory coating, it protects the subject from the inner and outer vibrations, when reality is psychically hostile and creates a compact moment of experience.

However, the basic difference from Winnicott’s concept is that negative hallucination does not form a “positive” transitional space, in the way Winnicott used it, since it does not lead to a successful and real mourning process, but on the contrary, it refers to a “negative” transitional space, if someone could say so. This negative transitional space underlines the object’s relations marked by an intolerance of separation and the incapacity for mourning. In other words, negative hallucination does not form a phase which will urge the subject to proceed to life’s progressive movement, but on the contrary, it involves a “pulling-away” process (*Ibid.*: 171). It forms a regressive phase, which works more as a repetitive pattern throughout life, as “a retroactive loop without any action as an outcome” (Green, 1993: 109) [1].

Besides, interestingly enough, Green parallelized negative hallucination with the Möbius strip” (Green, 1983: 87) [2]. The Möbius strip refers to a surface of only one exact size and shape, close to the shape of the cone or the cylinder which can, for example, be created by taking a paper strip and giving it a half-twist, and then joining the ends of the strip together ([13], Figure 1). Like the cylinder, it is not an orientable surface, but rather a *loop*, which is also beautifully depicted in M.C. Escher’s print of the infinite journey of the ants (Figure 2).



**Figure 1:** Möbius strip.



**Figure 2:** “Möbius Strip II” by M.C. Escher.

<sup>2</sup>This assumption/suggestion has been thoroughly elaborated in the author’s PhD thesis ‘The Myth of Persephone as a Representation of the Death Drive’ (Kontou, UCL, 2017)

This loop, for Green, is parallelized with the psychic loop of negative hallucination, which, like the loops in the roller coaster rails, halts the straight course of life. Negative hallucination thus sketches an inner topology which, on the one hand, is non-orientable and awkward, and, on the other, it revives a phantasy of non- action, psychic hibernation and lack. In psychic terms, negative hallucination becomes the representation of symbolic death and, in reality it demonstrates the subject's inability to think, to phantasize and to create.

### The product of the negative force

Following Green's assertions, the fact that negative hallucination expresses an affect together with its regressive nature, provide this representation a not so static but rather a *motor quality*. This mobile quality associates negative hallucination with the drives and especially with the negative force. Particularly, negative hallucination assigns the negative with a meaning, space and content and, therefore, it succeeds in actualizing it. In particular, as seen earlier in this paper, the negative works as a decompositional force throughout life, it deconstructs the subject's foundation and impregnates the latter with conflict. By composing moments of emptiness, negative hallucination indeed does not direct towards the evolution of the life-instincts, but to the subversion of the evolutionary movements in life. It follows the negative's presuppositions and establishes a stopover or a short moment of death in the axis of life, which finally eliminates the subject's capacity to discover and adapt to reality.

Besides, negative hallucination is related with the negative force, in regards with the way the subject establishes his/her intersubjective relationships. In particular, as can be deduced by Green's works, the negative force always and by default presupposes an object. It is inextricably linked with relationships, relational patterns and bonds and it channels into them by "corroding" them. For Green, this "corrosion" is not seen as a destruction-urge in the sense of isolation of the subjects, but as the destruction of the order of their relationships. It refers to the attack on the links and the investment of human relationships with negative vibes. This means that although the relational bonds between the subjects are retained, they are permeated with negativity and indifference. This is actually not destruction, but *deconstruction*. Thus, the subjects remain physically together but psychically distant.

This negative feature is very obvious in negative hallucination, in which although the subject does not cut the physical link with the Other, he/she psychically disengages from the Other by reserving an especially negative bond. For example, in Antonio's case, all these moments of fading take place in the analyst's presence, a fact that, on the one hand, cuts the psychic link between them, but on the other, it keeps them both physically close. The subject therefore deconstructs the order of the relationship with the Other. He/she is psychically absent although physically present, a fact that "damages" the quality of their relationship.

Therefore, someone could presume that in negative hallucination the subject repeats the dead mother paradox. He/she periodically suffers from a feeling of loss which is not physical, but psychical and thus he/she revives an unfinished mourning experience that in the end leaves him/her inwardly empty. Negative hallucination becomes the actual representation of this emptiness. It takes place periodically in life and thus follows the presuppositions of the negative force, by deconstructing perception. Therefore, the frequent feelings of agnosia, nostalgia and their melancholic coating, as well as, empty-headedness and the subject's inability to concentrate, to remember and to feel creative acquire meaning and content.

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