

“A Time to Be Reborn” – A Case Report

Anna Galati

Limassol, Cyprus

Keywords: Pre- and Perinatal Experiences; Patterns of Reactions and Defence Mechanisms; Womb Substitutes; Symbolism of Marriage; Psychological Rebirth

Abstract: Case M, a divorced woman with two children, started Autopsychognosia, a therapeutic approach that uses psychedelic drugs, at the age of twenty. The presenting problem then was depersonalization. The first two years she had had Autopsychognosia sessions approximately once a month. After that she had on average two sessions every two years to further her self knowledge. Case M describes the revivals and realizations she had during therapy. She also relates the emotional, psychosomatic, behavioural patterns and defence mechanisms she had in marriage, during separation and after separation to the ones she had had as an embryo in the womb, during birth and after birth. She realized that marriage was a womb substitute and married life symbolized the womb life. Separation symbolized the expulsion-birth and adjustment to life after separation symbolized adjustment to life after birth. The knowledge acquired through Autopsychognosia has helped Case M to understand and change the rigid, repetitive and pain-inflicting patterns she had developed since her fetal life and after birth to more flexible and healthier ones. In this way she feels she has been reborn to a new life she deserves to live more happily. The subjective revivals and realizations of Case M raise some important theoretical and therapeutic issues and questions that need to be further investigated and explored.

Zusammenfassung: *“Zeit für eine Wiedergeburt und einen Neuanfang” – Ein Fallbericht.* Frau M. war geschieden und hatte zwei Kinder. Sie begann mit Autopsychognosia, einem therapeutischen Vorgehen mit Verwendung von psychedelischen Substanzen, im Alter von 20 Jahren. Das Leitsymptom war damals ein Entfremdungszustand. In den ersten zwei Jahren hatte sie ungefähr jeden Monat eine Autopsychognosia-Sitzung. Danach hatte sie im Durchschnitt zwei Sitzungen alle zwei Jahre, um ihr Selbstbewußtsein weiter zu fördern. Frau M. beschreibt die Erinnerungen und Einsichten während der Therapie. Sie bezieht ihre Gefühle, Körperzustände, Verhaltensmuster und Abwehrmechanismen in der Ehe, während der Trennung und nach der Trennung auf Erfahrungen als Embryo im Mutterleib, während und nach der Geburt. Sie verstand, daß die Ehe ein Mutterleibersatz war, und das Eheleben das Leben im Mutterleib symbolisierte. Die Trennung symbolisierte die Ausstoßungserfahrung der Geburt, und die Anpassung an das Leben nach der Trennung symbolisiert die Anpassung an das Leben nach der Geburt. Die durch die Autopsychognosia erreichten Einsichten halfen Frau M., die rigiden, repetitiven und schmerzlichen Verhaltensmuster, die sie während ihres fötalen Lebens und nach der Geburt entwickelt hatte, zu verstehen und zu flexibleren und gesünderen Verhaltensweisen zu entwickeln. In

Correspondence to: Anna Galati, Psychologist M.Sc., Psychotherapist, 20 Nafpliou Street, Flat 22, 3025 Limassol, Cyprus, Telephon +357 (5) 353066, Telefax +357 (5) 345568

diesem Sinne fühlt sie, daß sie für ein neues Leben wiedergeboren ist, in dem sie glücklicher sein darf. Die persönlichen Wiederbelebungen von frühen Erfahrungen und die Einsichten von Frau M. werfen wichtige theoretische und praktisch-therapeutische Fragen auf, die weiterer Erforschung bedürfen.

Introduction

The psychotherapeutic use of psychedelic drugs like LSD, psilocybin, ketamine and others began in 1950 and different therapeutic approaches have been developed since then (Sandison and Whitelaw 1957; Hoffer and Osmond 1967; Grof 1980, 1988; Kafkalides 1975, 1980, 1987). The word *psychedelic* derives from the Greek words *psyche* (soul) and *delo* (to manifest). A psychedelic drug is a drug whose intake by the human body may bring about the manifestation or exteriorization of the unconscious.

Autopsychognosia, a therapeutic method that uses psychedelic drugs, was developed by Dr. Athanasios Kafkalides. The term Autopsychognosia is derived from the Greek words *eautos* (self), *psyche* (soul) and *gnosis* (knowledge). The aim of Autopsychognosia is to help the person become acquainted with herself and her environment as much as possible.

During Autopsychognosia sessions the person may relive with strong emotional and physical synchronization her life in the womb, her expulsion-birth, various postnatal experiences and others (Kafkalides 1975, 1980, 1987; Galati 1991; Janus 1991). She may also make during and after the sessions, various emotional-intellectual realizations about the content of the unconscious and the motives of her behaviour. Autopsychognosia is a subjective process since the revival of past experiences and the person's interpretations and conclusions about her behaviour is a subjective reality for her.

Case M will be presented in order to show how the knowledge acquired through Autopsychognosia over a long period of time, has helped this person to understand and change the rigid, repetitive and pain-inflicting patterns she had developed since her fetal life and after birth, to more flexible and healthier ones. Case M feels that in this way she has been reborn to a new life she deserves to live more happily.

History of Case M

Case M, a divorced woman aged 34, has two daughters 10 and 8 years old. She is in the teaching profession the last seven years.

Case M was born in a low income family which had faced many problems and difficulties throughout the years. There were four daughters in the family and she was the third in line. She was an intelligent child but very shy and submissive. During adolescence she had suffered from anxiety depression. Her school performance deteriorated and she became gradually more introverted and socially withdrawn. At the age of 15 she sought psychiatric help. She was given only pharmaceutical treatment.

At the age of 18, after secondary school, she had her first love relationship which was emotionally very intense and traumatic. At the age of 19 this relationship ended, and a few months later her father died suddenly. She experienced then acute depersonalization. A few months later she started therapy. For two years she had Autopsychognosia sessions approximately once a month with free communication sessions in between. After that she had on average two Autopsychognosia sessions every two years to further her self knowledge.

In the meantime she studied abroad and she got married at the age of 23. She had two daughters. In this marriage she gradually became unhappy and she suffered from depression and psychosomatic symptoms. She separated at the age of 32 and at present she is coping very well with her life.

Autopsychognosia of Case M – Revivals and Realizations

First Stage of Therapy

When Case M started Autopsychognosia she was in a state of acute depersonalization, almost totally inactive and socially withdrawn. Therapy lasted for two years with approximately one Autopsychognosia session each month and with free communication sessions in between.

During and in between the sessions she was able, for the first time, to mourn and grieve her father’s death and the end of her love relationship. She also came in touch with, and expressed various emotions, needs, fantasies, conflicts and others.

Case M writes about her therapy:

“During therapy I felt I was discovering a new world, the world of the unconscious, which contained many unbelievable things. This was very frightening, painful and exciting for me. I re-experienced painful and unwanted emotions like hate for my parents because they excluded me from their relationship, rejection in the womb of my mother because I was a girl and others. I discovered forbidden sexual desires for my father and other men which were making me feel frightened, ashamed and guilty. I became aware of unacceptable thoughts and fantasies like wishing my mother to be dead instead of my father. I discovered unbearable conflicts like feeling a woman but wishing I was a man because this was what the womb mother wanted.

During therapy I also realized that in everyday life I was using many ways to protect myself from all these. I was repressing my sexual desires for my father, I was denying his death, I was identifying with men in order to escape from my own painful female existence, I was projecting my hate for my mother onto other people . . . and many others”.

Case M realized that all these defence mechanisms helped her live in a “non-existence” state which was a strange but less painful experience than the “real existence” state. She writes “If I don’t exist, the emotionally rejecting and dangerous environment doesn’t exist either, or at least it can’t hurt me. This is the only way I know to survive”. Depersonalization was thus protecting her from extreme suffering.

During Autopsychognosia sessions she also relived partially, with a lot of resistance, her painful life in the womb and the rejection of her existence and sex by her mother. She writes “My mother didn’t want any children and especially girls.

She wanted a boy. This rejection continued after birth. This is the reason I am suffering all my life”.

Case M also realized she was confused about her sex identity. She writes “I am a woman but I should be a man because this is what the womb mother wanted. I identify with the womb and I’m rejecting myself as a woman too. My family’s and society’s attitudes that ‘women are inferior to men’, ‘women who have or like sex are whores’ intensify the rejection I had felt as a girl. For these reasons I have sexual problems”.

Case M gradually, throughout the years, understood that the anxiety depression she had during adolescence was caused by the sex identity confusion, the suppression of her sexuality and an existential crisis. She also understood that behind her shyness and submissiveness lied the fear that if she was her real self, people would reject her like the womb mother did.

By the end of the first stage of therapy Case M had had a better understanding of herself, depersonalization had diminished and she had become more active and sociable.

Second Stage of Therapy

Case M realized that Autopsychognosia was an ongoing proces and she continued it in order to further her self knowledge and overcome her problems and difficulties. From the age of 22 till the present day she has on average two Autopsychognosia sessions every two years with free communication sessions in between.

During this long period Case M has had many changes and experiences in her life that caused intense emotions and conflicts. The revivals during Autopsychognosia sessions and the profound realizations she had all these years helped her become aware of, understand and change certain rigid, repetitive and pain-inflicting patterns she had developed during her fetal life, at birth and after birth.

Case M realized that one of these patterns was her search for, and attachment to rejecting womb substitutes. This pattern was motivated by the insecurity she was feeling in the outside world and the need to return into the womb and relive her life there. She writes:

“The womb was my first acquaintance with life, my point of reference, and all my life subconsciously I’ve been looking for and relating to people, situations and activities that would satisfy my need to return there. My mother, father, first love relationship, academic achievement, sex, marriage were all womb substitutes. I realized much later, that the choice of my husband was made in order to return to the rejecting womb. My husband was thus identified not only with my father, but also with the womb. Marriage symbolized the womb for me and married life the womb life.

In my marriage there was ‘silent’ communication, a lack of emotional, intellectual and social stimuli and a reversal of roles, that is I became the ‘man’ by taking an active role in the family and my husband became the ‘woman’ by taking a passive role. I felt rejected by him, both as a woman and as a person, as I did by the womb mother. That’s why I didn’t enjoy having sex with him. I also felt insecurity, deprivation, bitterness, anger and hate. In my marriage I was re-experiencing my womb life and I felt I was dying emotionally, intellectually and physically. Dur-

ing these years I suffered a lot and I became depressed. I also developed breast fibrocystic disease and I had severe pains".

Case M discovered that her psychosomatic reactions and symptoms, like the breast fibrocystic disease, were part of another complicated pattern, the defence mechanism system. This system also included depersonalization. She writes:

"In Autopsychognosia sessions during the revivals of my womb life, my birth or any other painful event I was experiencing intense emotions like fear, terror, insecurity, rejection, anger, hate. I was suffering a lot and my body was hurting, it was burning, especially in the breast area. This part of my female existence was also receiving the intense rejection of my sex by the womb mother. I was unable to leave, react, fight back or kill the womb. I was just a dot at the mercy of a colossal superpower. So, all the emotions I could not express and all the action I could not take, were repressed, introjected, turned against myself, somatized. The psychological and physical pain was unbearable and I automatically employed my defences. I numbed my whole existence, my body, especially the breast and I became non-existent. These defences and psychosomatic reactions were activated and intensified whenever I lived a painful experience like my marriage and separation. That's how I developed the breast fibrocystic disease."

The psychological and physical suffering, the fear of cancer, the existence of her children, the need to give them a better life and the knowledge acquired through Autopsychognosia gave her the will and the strength to get out of marriage. She found that separation was one of the most painful experiences in her life. There was a fixation to the womb and since marriage symbolized the womb, it was very difficult and painful to get out and cut off the symbolic umbilical cord, that is the strong attachment and bond to it. She realized that separation symbolized emotionally the process of expulsion-birth. She writes:

"During this period I felt I was being pushed out of my marriage by my husband's behaviour in the same way I was being pushed out by the womb. I felt terrified, helpless, insecure, as if I was travelling all alone along an endless dark road in a strange country. The agony, the fear, the psychological and physical pain were so intense that I felt I was going to die. I realized that I was re-experiencing my expulsion-birth and the thought that I managed to survive that when I was a tiny baby gave me the strength to endure this very traumatic experience. My defences were protecting me again as they were during my birth. This time though, I was more aware of what was happening."

After separation Case M had to cope with many problems and difficulties: financial problems, the adjustment to a new house and a new life, the children's emotional problems, negative social reactions, the grief about her marriage. She writes:

"I found myself in a chaos, all alone, frightened and insecure. I also felt rejected and abandoned by some people and I was holding onto my own remaining strength in order to survive. This experience was very frightening and painful both emotionally and physically. I felt I was re-experiencing my adjustment to the new life outside the womb. But eventually my adjustment to my new life after separation was very different from that one after my birth. This time I had the knowledge I acquired through Autopsychognosia all these years and the resources and potentials of an adult. I used all these in order to develop new patterns of living, more

flexible and healthier than the ones I had before. Now I choose more consciously to live, as much as possible, in stimulating conditions and relationships that make me feel acceptance, both as a person and as a woman, love, security, creativity. These positive changes also improved my physical state. In this way I feel I have been reborn to a new life I deserve to live more happily.”

Discussion

The subjective revivals and realizations of Case M raise some important theoretical and therapeutic issues and questions that need to be further investigated and explored. Some of these are:

- a) Human systems and relationships like marriage may be womb substitutes and there might be a universal need for them. A person may relive emotionally in these human systems her prenatal, perinatal and postnatal experiences.
- b) The foundations of the emotional, psychosomatic, behavioural reactions and defence mechanisms are being laid down during fetal life and birth and later life experiences reinforce them or extend their range. Separation, losses, changes and other life experiences reactivate this system of reactions and defence mechanisms.
- c) The emotional-intellectual knowledge acquired through deep psychotherapy like Autopsychognosia can help a person understand and change some of these patterns of reactions and defences and improve her life.

The knowledge gained from research and therapeutic work in this field can be very useful in prevention programs and other theoretical and therapeutic approaches.

References

- Galati A (1991) Dr Kafkalides's Autopsychognosia: The Influence of Prenatal and Perinatal Experiences on the Development of Personality and Mental Disorders. *Int J of Prenatal and Perinatal Studies* 3:267–272
- Grof S (1980) *LSD Psychotherapy*. Hunter House, USA
- Grof S (1988) *The Adventures of Self-Discovery*. State University of New York Press, Albany
- Hoffer A, Osmond H (1967) *The Hallucinogens*. Academic Press, New York
- Janus L (1991) Die frühe Ich-Entwicklung im Spiegel der LSD-Psychotherapie von Athanasios Kafkalides. *Individualpsychologie* 16:111–124
- Kafkalides A (1975) Cases of Sexual Conflicts – Effects on Behaviour. Presented at the VII Panhellenique Congress of Neurologists and Psychiatrists, Athens, November 1975
- Kafkalides A (1980) *The Knowledge of the Womb: Autopsychognosia with Psychedelic Drugs*. Olkos, Athens; English edition 1995
- Kafkalides A (1987) *The Power of the Womb and the Subjective “Truth”*. Free Press, Athens
- Sandison RA, Whitelaw JDA (1957) Further studies in the therapeutic value of lysergic acid diethylamide in mental illness. *Journal of Mental Science* 103:332–343