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The Walking Dead: Neurology and the Limits of Psychoanalysis

[Melanie Doherty \(bio\)](#)A Review of Catherine Malabou, *The New Wounded*. Bronx: Fordham UP, 2012.

In *The New Wounded*, Catherine Malabou seeks to reconcile advances in neurology and a material understanding of the brain with traditional psychoanalysis. In order to lay the groundwork for a potential revision of psychoanalysis, Malabou suggests that contemporary psychoanalytic subjects have emerged—"the new wounded"—who exhibit different behaviors than those in the traditional Freudian clinic. She explores the limits of historicity, narrative, meaning, and signification in the psychic lives of these new subjects. What new terms does the contemporary psychoanalytic clinic require in order to be effective? Malabou notes the explanatory power of contemporary neuroscience, and offers the reader a neologism: "cerebrality," a term she then uses to suggest a new etiology of psychic trauma that accords explanatory power to the events of the brain itself. Freud's concepts of sexual etiology, Malabou states, have in part been replaced by the brain and "cerebral events" as "the privileged site of the constitution of affects" (3). "In the same way that Freud upheld the distinction between 'sex' and 'sexuality,'" she states, "it has become necessary today to postulate a distinction between 'brain' and 'cerebrality'" (2). This is to say that just as Freud posited a sexual etiology of neuroses, we must also find ways to articulate a "specific historicity whereby the cerebral event coincides with the psychic event" (2). By defining the term "cerebrality" and applying it throughout her study, Malabou seeks to move beyond the stalemate between neurology and psychoanalysis.

Rather than focus on temporalizing events that the subject can stitch into a narrative of the past, Malabou notes that there are events that sever all connections to the subject's past and thereby lead to a disappearance of the self altogether. Malabou first cites examples of patients who have suffered brain lesions, degenerative diseases such as Alzheimer's, or violent head traumas, such as the classic case of Phineas Gage, a Vermont railroad worker who suffered an accident that forced an iron rod into his brain. The damage to Gage's prefrontal lobe fundamentally changed his personality. He became a different person, unfamiliar to friends and family. Malabou points out that such individuals may well exist outside the reach of psychoanalysis, but she nevertheless draws connections between them and the contemporary analysand. Like these subjects, who have lost their own historicity due to organic brain damage, the new wounded—such as victims of sexual assault, terrorist attacks, or modern warfare—also become emotionally cool and disaffected, and undergo the loss of their histories due to an aleatory traumatic encounter. Instead of relying on Freud's accounts of regression and his insistence on a return to originary traumas, Malabou dwells on these patients who instead irreversibly lose their narrative of self. She notes Freud's difficulty with fully articulating the death drive, and asks: "Isn't it precisely by accepting such events, which no longer fall under the jurisdiction of sexuality, that psychoanalysis can finally put itself in a position to flesh out the death drive, the beyond of the pleasure principle, and a new regime of events?" (210). Malabou argues that contemporary psychoanalysis must find tactics for dealing with those patients who have become fundamentally incapable of traditional transference and for whom their own psychic wounds do not have a clear narrative logic. The "subject supposed to know" does not carry the same weight if the analysand is cool, indifferent, and does not seek the love of the analyst: "A deserted, emotionally disaffected, indifferent psyche is not or is no longer capable of transference" (214). Rather than a loss of meaning, signification, or history, the new wounded have, in a sense, undergone a radical loss of self. Malabou examines traumatic

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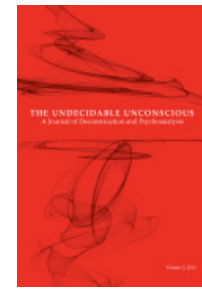
events that cause neurological changes in the brain, events that are so intense and ultimately asignifying that they create a rupture with the subject's own past and undermine all temporal and narrative continuity. She examines such neurological damage in part through the lens of negative plasticity.

For Malabou, then, traditional Freudian psychoanalysis does not sufficiently account for the idea that an identity can be wholly transformed by a traumatic event. She accordingly revisits the three main concepts of plasticity outlined in her 2008 book, *What Should We Do with Our Brain?* Plasticity, for Malabou, involves the capacity to receive form, the power to give form, and, less expectedly, the possibility of the "explosion" of every form, as in "plastic explosives" (17). This final aspect of plasticity becomes one of her organizing questions in *The New Wounded*: how can we think a negative or destructive plasticity, a radical negation of form in the psyche, and what are the implications of such a negative plasticity? Malabou writes that "There is, in Freud, no form to the negation of form" (166). Rather, Freud posits a continuous return to a "self-regulated originary plasticity" (166). That is, Freud insists on a deep narrative of self and a sexual etiology that repeats itself even in light of the most aleatory traumatic events in life. Contemporary neurology, she writes, has also avoided negative plasticity as an organizing concept. Malabou examines this limitation of neurology and notes that *The Oxford Companion to the Mind* takes a clear stance: "a massive and disorganized malfunction associated with extensive injury would not be referred to as plasticity" (181). But why not? Why is there not a better account of an identity radically transformed by destructive events?

Similarly, Malabou examines Oliver Sacks's insistence on the role of narrative and biography, and the importance of what he calls "neurological novels" in his work. While Malabou acknowledges the "close relation between the metamorphosis of an identity that survives with a wound and the story of this metamorphosis—as if the plasticity of writing supported that of systems; as if writing itself repaired the wound that, as it repairs itself, nourishes writing," she also questions the limits of such an approach. "Sacks," she argues, "displays a confidence in disease that paradoxically but logically upholds his confidence in medicine and therapy themselves. It is significant, in this respect, that Sacks's patients never cease to feel emotions" (187). Here we return to Malabou's original question: what of patients who turn cold, who lose emotional affect, who lose the cohesiveness of their past identities after a severe event? Again she asks, how can we think a "plasticity without remedy?" (188). The suggestion here of a neurological *unwriting* of the subject becomes rich with potential.

In her final chapters, Malabou gives us the strongest arguments for what can be gained by defining "the new wounded." She outlines the concept's importance for the future of not only psychoanalysis, but also philosophy: "Rather than critique cerebrality from a hermeneutic or genealogical viewpoint, wouldn't it be more interesting and more urgent to place the motif of cerebral desertion into relation with that of the disinheritance or deconstruction of subjectivity? Isn't it time that philosophy discover the cerebral psyche as its subject?" (206). She emphasizes that Continental philosophy has rejected the realms of the material at its peril: "I continue to defend the thesis that the only valid philosophical path today lies in the elaboration of a new materialism that would precisely refuse to envisage the least separation, not only between the brain and thought, but also between the brain and the unconscious" (211-212). For Malabou, cerebrality and the related neuronal understanding of the brain must come to hold as strong a place as signification. The shift toward Malabou's negative plasticity, and the need to seriously consider that there is a "beyond" of the "beyond of the pleasure principle," means that contemporary analysts often do not function within the regime of an historic narrative in way that traditional psychoanalysis does.

In her concluding chapter, Malabou connects what she calls the "walking dead"—such as patients suffering from brain lesions or Alzheimer's disease—to victims of geopolitical violence, whom she sees as functioning in a similarly aleatory and devastating way: "This type of transformation unto death, this survival without sublation, is not only visible in cases of severe brain lesions but also [in] the globalized form of trauma—appearing in the aftermath of wars, terrorist attacks, sexual abuse, and all types of oppression or slavery. Today's violence," she insists, "consists in cutting the subject away from its accumulated memories" (213). This connection between organic



Stiegler and the Clinic



The New Wounded: From Neurosis to Brain Damage

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illness and geopolitical trauma becomes one of the most compelling points in her argument, even if it is among the least developed. Malabou claims, "The distinction between organic traumas and political traumas becomes blurred precisely because of the type of event that gives rise to them—a brutal event, without signification, that tends to efface its intentionality in order to appear as a blow inflicted upon any possible hermeneutics in general" (214). She cites the "temporal ruptures" inherent in random violence as creating similarly wounded subjects. However, is she not comparing two disparate types of trauma here, one undeniably organic and the other experiential? One way to understand her claim is to note that the geopolitical traumas in question are not symbolic or signifying events in the traditional Freudian sense, but asignifying traumas that radically reorganize the neuronal brain. As Malabou claims, "It is thus such a materialism, as the basis for a new philosophy of spirit, that determined my definition of cerebrality as an axiological principle entirely articulated in terms of the formation and deformation of neuronal connections" (212). In such a model, what will the connections between psychoanalysis and neurology look like? What becomes of the role of signification after such a violent rupture with the past self? Malabou only begins to hint at such moves in this book, but provides a point from which to launch further work.

As a final thought, Malabou raises the ethical and political implications of subjects who have been so fundamentally altered by violence that for them narratives of an historic self no longer carry therapeutic weight. What happens when the rupture with the past self is so severe that emotional emptiness comes to fill its void and creates patients who no longer experience transference because they "do not want either to know or not to know" (215). "Our inquiry," she claims without hesitation, "revolves around the identification of evil" (213). The new wounded call responsibility itself into question, another provocative idea that she addresses in passing but suggestive ways:

The destructive event that—whether it is of biological or sociopolitical origin—causes irreversible transformations of the emotional brain, and thus of a radical metamorphosis of identity, emerges as a constant existential possibility that threatens each of us at every moment. At every instant, we are all susceptible to becoming *new wounded*, prototypes of ourselves without any essential relation to the past of our identities....
A form of life appears that bids farewell to all the subject's old modes of being.

(213)

The author of the old self is in a sense truly dead. Who or what stands in its place?

In the beginning of *The New Wounded*, Malabou says it was watching her grandmother decline from Alzheimer's disease that motivated her interest in contemporary subjects who remain outside the reach of psychoanalysis. Rather than offering a set of answers pragmatically linking psychoanalysis and neurology, she chooses to outline their limitations and asks us to focus on a further articulation of negative plasticity and the death drive. She does not offer a new therapeutic methodology, but heralds the clinic to come: "To apprehend the new wounded as figures of the death drive which would no longer derive from sexual etiology is...a very fruitful point of departure for a clinic to come—a clinic that, much like neuropsychology, would integrate the conjoined results of Freudianism and neurology" (214).

For Malabou, asignifying violence has the potential to rewire the brain, to create subjects of death for whom the narratives of their past lives bear little relevance to their recovery. The implications for contemporary philosophy, ethics, and politics may be equally dire: our narratives will no longer be relevant if they linger only in the realm of signification and tacitly reject the material.

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