

Why psychoanalysis failed to embrace dialectics: Pathways for progressive change through implicit psychotherapy - Part II

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SUMMARY

This paper, the second of a two-part essay, delves into the implicit and immediate factors within psychotherapy, positioning estrangement from oneself and to the environment as a core psychopathological issue. Implicit Psychotherapy, as proposed and outlined in this paper is the technical aspect of Dialectical Dynamic Therapy (DDT), which itself is rooted in the Dialectical Discourse. Aiming for the most profound “healing” possible, this approach directly engages the symbolic network of the mind to minimize resistance to change. The individual obstacle in this process is highlighted as escape from oneself driven by traumatic memories. The subtle and encrypted communication between patient and therapist serves to protect both the individual’s unique essence and the purity of the therapeutic process from the external symbolic impositions, which is the second obstacle in treatment. Finally, this approach facilitates the Hegelian process sublation (Aufhebung) of the power dilemma which is inherently linked to trauma. The essay explores a novel “digital brain” model of mind, and the internal moderation concept, highlighting their potential contributions to machine learning applications which would serve for exploration of the opportunities embedded in Implicit Psychotherapy. The development of a Symbol Relations Theory remains as the next theoretical task following this essay which would complete the full set basic knowledge which the proposed psychotherapy approach is to be grounded upon.

Key Words: Implicit psychotherapy, symbol relations, encryption, dynamic, dialectic

Dedicated to my late wife, Psychiatrist İlknur Özütemiz-Şar, MD, with heartfelt gratitude, love, and respect

A t-shirt mocking psychotherapists humorously claimed: “We treat problems you aren’t aware of, in ways you don’t understand”. This sentiment echoes the remark made by one of the author’s young patients: “If I caught what you are trying to do with me, I would resist!” Reflecting on such dynamics, the author’s extensive clinical experience with a large number of patients previously deemed resistant to treatment has led to practice psychotherapy in a rather subtle, understated way. Unfortunately, this style clashes with principles of marketing, as illustrated by a refund request, claiming that the author hadn’t conducted a proper session, but merely engaged in a one-hour conversation! Indeed, clients often expect concrete interventions, yet more nuanced methods may not always appear tangible.

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What is overlooked in this exchange is the psychotherapist’s role as an advocate for the patient, rather than simply functioning as a service provider attending to a customer (M. Şar, JD, personal communication, September, 2018). The very act of seeking psychotherapy establishes an implicit proxy relationship with the clinician that ethically justifies the therapeutic intervention, regardless of how overt or subtle it may be. At times, this relationship requires the psychotherapist even to challenge the patient’s will, particularly to prevent overt or covert self-destructive behavior, as well as to disrupt the evolutionary given algorithmic persistence inherent to any (dis-)order itself. French psychiatrist and psychoanalyst Jacques Lacan even suggested that the desire of change is to be expected from psychotherapist but not from patient. This sentiment was exemplified by an incident, where the older sister of a patient, perhaps misinformed about the session, angrily called the author and demanded: “Why didn’t you say what my brother expected to hear?”



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A more critical concern is that a fully declared treatment plan can resemble a rigid contract, traditionally more appropriate for a legal context. Cloaked under the guise of transparency, such agreement would eliminate the flexibility (“Spielraum”, playground) necessary for meaningful interaction between the two parties, potentially reducing the relationship to a struggle for control. This dynamic would ultimately lead to a therapeutic breakdown. Drawing the terminology introduced in the first part of this two-part essay, which is rooted in Hegelian dialectics (1), this battle cannot be won by the master (psychotherapist), as their fate lies at the hands of the slave (patient). However, while the slave might emerge as the overt winner in this dynamic, they paradoxically become the covert loser, mirroring a Pyrrhic Victory, as their own fate remains dependent on the psychotherapist.

Thus, in psychotherapy, to challenge the sentiment from Swedish group ABBA's 1980 hit, it is not true that “The Winner Takes It All”. Setting aside legal theory and concerns about a romantic affair, insights from quantum physics offer a clearer explanation for the harm excessive control may cause. In quantum mechanics, outcomes are probabilistic rather than deterministic, with systems existing in superposition of possibilities until measured. Moreover, much like the Schrödinger's cat, the observer and the observed are inextricably linked, in this case, the relationship operates in a bilateral manner.

The supremacy of spontaneity: How to pursue an “organic” style

Spanish painter Salvador Dali succinctly expressed the value of originality, when he said: “The first man to compare the cheeks of a young woman to a rose was obviously a poet; the first to repeat it was possibly an idiot”. Spontaneity—acting or responding in a natural, unplanned, and unfiltered manner—can be a powerful tool in therapeutic settings. The most profound therapeutic changes often come from those moments when both the psychotherapist and client are most present, unguarded, and responsive to the unfolding dynamics of the session. (2,3). Spontaneous actions or reactions can

be seen as more authentic, as they arise without the constraints of overthinking or excessive self-monitoring. This authenticity can help build trust and rapport between the psychotherapist and the patient. Many therapeutic techniques aim to break habitual thought and behavior patterns, with spontaneity serving as a means to disrupt these patterns. As an example from the psychoanalytic tradition pointing in this direction, Wilfred Bion's concept of working “without memory or desire” also emphasizes the psychotherapist's openness and receptivity during sessions. Bion advocated entering each session without preconceptions, expectations, or attachment to prior sessions or desired outcomes. This approach is expected to allow the psychotherapist to remain fully present, and responsive to the patient's needs as they emerge in real time (4).

On the other hand, such “practice-based evidence” (5) does not imply that the clinician navigates uncharted waters without any tools or equipment. The author, while driving through the narrow and winding roads of magnificent Istanbul, a decentralized historical city, with their guest North American psychiatrist, psychoanalyst, and hypnotherapist Rick Kluft, remarked in bitter-sweet frustration: “Every day, when driving, I find myself on a new street”. Though the guest did not respond verbally, their meaningful smile revealed the wisdom of an experienced psychotherapist! The essence of this idea was echoed by one of fresh psychiatry residents of the author during supervision, though from an opposing perspective. The young physician offered advice to a patient who metaphorically complained of “repeatedly ending up in a familiar destination despite taking a fresh route each time” by suggesting, “try to discover a fresh destination each time by taking familiar routes!” (U.D.Erarslan, MD, personal communication, September, 2024).

Swedish regisseur Ingmar Bergman eloquently emphasized the importance of bypassing the intellect to directly engage the imagination and feelings of a person while describing film's ability to immerse viewers in a natural and instinctive experience. He stated (6): “When we experience a film, we consciously prime ourselves for illusion. Putting aside will and intellect, we make way for it in our imagination. The sequence of pictures plays direct-

ly on our feelings. Music works in the same fashion; I would say that there is no art form that has so much common with film as music. Both affect our emotions directly, not via the intellect. And film is mainly rhythm; it is inhalation and exhalation in continuous sequence”.

In psychotherapy, maintenance of this illusion requires being both serious and playful. Indeed, humor operates in a double manner, creating impact by juxtaposing intellect with emotion, leading to moments of surprise and cognitive dissonance with an almost bodily felt relaxation, release, and relief. An adolescent, who appreciated the author's risky macabre humor, referred to it as a “trauma joke”, kind of dangerous endeavor if not handled with care. Spontaneity, while powerful, can be unpredictable, posing challenges for both the psychotherapist and the patient including transition to a laissez-faire, laissez-passer approach. It demands a high level of skill and confidence from the psychotherapist to navigate uncharted waters effectively. If not carefully managed, spontaneous actions or statements might be misinterpreted, leading to confusion. Thus, the well-intended spontaneity requires to be completed by goal-directedness, a topic to be elaborated upon in later sections of this essay.

Honoring Marx and Kafka: A paradigm shift

Karl Marx and Franz Kafka shared the common ground while writing on the estrangement of the individual, perhaps foreseeing the core psychosocial characteristic of the forthcoming era: “The Century of Self” (7). In one of their parodies, Turkish comedian Cem Yılmaz impersonates an American criminal defense attorney addressing a jury, declaring, “This person you see before you, is not who you think you know!” The approach of the author to their psychiatric patients is similar! The author posits that estrangement from oneself and/or one's environment is central to a large spectrum of psychopathology, particularly those rooted in developmental trauma. Such adversities often begin in early life, potentially as early as the prenatal period, or may even be transgenerational (8). This early imprint of psychopathology can become indistinguishable from the person's essence, lead-

ing individuals to unknowingly identify with their acquired deviation. Reflecting this idea emerging from a different starting point, a late Turkish psychiatrist once shared a seemingly spiritual insight, which in fact, emphasizing the distinction between nature and nurture, stating, “The soul/psyche cannot become ill; it's the mind that falls sick” (A. Songar, personal communication, November, 1989).

A cartoon humorously captures a woman who responds to the compliment “I like your personality” with “thank you, it's a disorder!” Distinguishing between one's inherent constitution and acquired deviations may be impossible if the latter occur early in life, as observed in patients who often lack meta-awareness of the trauma-related aspect of their dysfunction. Making them aware of their hidden dividedness, if conducted in a safe environment, can lead to an empowering “Aha-Erlebnis”-an insight that is both intellectually and emotionally felt. This recognition, the first step of DDT, is akin to repairing a broken DNA strand shown with the opening of the cell membrane. This symbolizes a one time paradigm shift, also in the eyes of the patient, which enhances their receptivity. This intervention alleviates the patient's feelings of shame and guilt about their condition fostering a collaborative dynamic with the psychotherapist. The reframing of the dis-order as an entity of external origin and examining it from a detached perspective, allows the patient to explore their challenges freely, without self-judgement. Paradoxically, this shift in perspective brings the patient closer to their authentic self, rather than enabling an escape from it. What an allegory of nature, that recent studies on bipolar disorder document a special impairment in the repair of broken DNA rather than an inherent shortfall itself ! (9).

“The Great(est) Looser”: Traumatic narcissism and escape from oneself

British rock group Queen's “Bohemian Rhapsody” (from the 1975 album “A Night at the Opera”) portrays a post-traumatic scenario culminating in dissociative psychosis, poignantly yet paradoxically encapsulated by the line: “No escape from reality”. Failure to take ownership of or personalize (assim-

ilate, in Jean Piaget's terminology) reality, if not resulting in amnesia, to a sense of "not me". This is reflected in the timely "egofugal" motto of the 2001 Istanbul Art Biennial (Ş. Eczacıbaşı, B. Pharm., personal communication, February, 2000), and is well-articulated in a New York Times column written by a philosopher who, co-incidentally, also happens to be a boxing trainer (10). Kierkegaard's philosophy suggests that denying oneself leads to despair, while accepting oneself often results in depression. Depression often emerges in post-integrative stages of psychotherapy, as the individual confronts the weight of their reconciled self and past.

The internal world not only mirrors external reality but also compensatory responses to suboptimal stimuli (11) such as developmental trauma caused by unreliable caregiving. This can foster omnipotent self-aspects aimed at maintaining control and need for self-sufficiency, a hallmark of traumatic narcissism (12). These inner entities act as buffers against vulnerabilities like rejection sensitivity. Rather than being imported from the outside world, they are created through the self-modification of itself (13). The appearance of strength created by a ghetto-like closed system (13,14) of buffer entities masks an underlying weakness in the self which differs from true self-sufficiency. The façade of coherence, while functionally adaptive, places a significant burden on the individual to sustain a consistent narrative about reality and self-identity. In conditions when this façade is threatened, discontinuities may become manifest. Dividing the external world may be utilized as a way of coping which is usually considered as a clue of BPD. The effort to maintain interpersonal relationships despite underlying fragmentation can result in rejection sensitivity and fears of abandonment.

Research indicates that vulnerable type of narcissism, unlike grandiose narcissism, is linked to pre-occupied attachment but not to other types of childhood trauma or dissociation (12). Like in grandiose (compensatory) narcissism, vulnerable status requires reliance on self-objects to sustain fantasies of perfection (15). When a secure relationship fails, it can lead to depression and a defensive cycle of grandiose narcissism, maintained by dissociation (12). This state often manifests as

"honorable estrangement" or "dignified resentment" which may progress into nihilism, hopelessness, and loss of vitality. Such individuals may appear resigned to life, having "sifted their flour and hung up the sifter", as a Turkish proverb states. However, this resignation differs from peaceful acceptance of a Zen master, as it arises from disillusionment rather than spiritual fulfillment.

The statement of one of the author's early patients with schizophrenia, describing a self-centered existence, resonated with Dali's "The Great Masturbator": "I lived an earthly life that began and ended with myself". In "The Sickness Unto Death" (16), Kierkegaard emphasized the relational nature of human existence, whether with others or oneself, which is vital for meaning making (17). A narcissistically constructed inner world serves as a coping to reconcile the gap between the imagined (ideal) and actual self, often relying on compensatory grandiosity and folie à deux with selfobjects to momentarily bridge the personal discontinuities. As Erikson (18, p.157) observed: "It is as if the culture had made a man over-advertise himself and so identify with his own advertisement". This inner tension, inherently traumatic and threatens self-esteem, aligns with dissociation. Research shows a positive correlation between grandiose narcissism, depression, and dissociation scores, despite the negative correlations between grandiosity and depression itself (12).

The coexistence of grandiosity and depression, enabled by the trance-logic (19) that aligns opposite realities without conflict, does not create a discord in a dissociated inner (and outer) world. This split is sustained through a vicious cycle between traumatic narcissism and dissociative depression, forming a perpetuum mobile (12). While economically impossible to sustain unless fed from outside, this dynamic serves as a powerful symbol of humanity's relentless pursuit of the unattainable, resonating with Lacan's Imaginary.

Knowing and not knowing: Escape from reality

Dissociation, as a discontinuity of mental functions, including consciousness and memory, involves "unknown known". This is a term derived from for-

mer US Defense Secretary Donald Rumsfeld's statement about decision-making under uncertainty during Gulf crisis ("unknown unknown" as an alternative to "known known"), later reinterpreted by Slavoj Žižek (20). This concept illustrates how the information relegated to "parallel-distinct structures" (21) remains inaccessible unless addressed within a secure and supportive environment. The tension between "known" and "unknown" reflects an epistemological challenge, aptly captured in the title of a psychoanalytical journal's epilogue on dissociation (22): "The formidable human need to 'not know'". Žižek, again, humorously illustrates this, with a joke: A man believes that he is a kernel of corn, and goes to a psychiatrist who, after several treatments, finally convinces him otherwise. He leaves the office relieved, until he runs into a chicken on the street. He turns and runs back, terrified of being eaten and asks the psychiatrist what he should do. The psychiatrist replies, "But why are you afraid? You know you aren't a kernel of corn!" The man replies, "Yes, but does the chicken know?"

Hegel argued that self-consciousness is the purest form of knowing oneself. Once you know yourself, only then you can attribute qualities to yourself. As you find out about the world around you, the objects in the environment can also contain qualities that you first learned by becoming aware of yourself. This widens the scope of the individual's perception. On the other hand, both internal and social processes often operate to keep us unaware (23). One reason for this lack of self-disclosure is the interconnectedness of the external and internal disclosure. As Freyd and Birrell (23, p.116) state, "To the extent that it is not safe to disclose externally, it is not safe to know, or disclose internally, to oneself." This internal struggle between "knowing and not knowing", as an escape from oneself and/or reality, disrupts the experience of self-identity, including one's relationship with their own body.

Russian philosopher Mikhail Bakhtin (1895–1975) stated that meaning was created through dialogue. As the main carrier of the dialogue, language, for Bakhtin, is inherently relational and dynamic, constantly shaped by its social and historical context (24). To explain this, he created concepts such as heteroglossia (coexistence of multiple perspectives-

voices- within a single text each reflecting a different social or ideological position), carnivalesque (a space where traditional hierarchies and norms are temporarily subverted, allowing freedom, creativity, and the inversion of power structures), and chronotope (the way time and space are represented in narrative, shaping how stories are told and experienced). Focusing on novel and literature, Bakhtin's ideas have not been transferred to the psychotherapeutic practice.

Encryption in psychotherapy (G. Ayas, MD, personal communication, September, 2024) refers to the creation of shared symbolism between patient and psychotherapist, ensuring security and safeguarding the therapeutic space from external intrusions. The encrypted symbolism in psychotherapy is, however, just the opposite of Lacan's Symbolic which is composed of daily reality as adjusted to common needs of the community. The latter is akin to Erikson's concept of actuality representing the reality acknowledged by a significant portion of the community, in contrast of Lacan's elusive Real which signifies a concealed dimension of reality that can only be approached indirectly through psychotherapy. This safeguarding allows the Psychological Selves (25) of both partners to connect securely, mirroring the mathematics of romantic love observed in truly intimate relationships. Such a secure bond enables individuals to experience themselves as unique (occupying the center of the Lacanian Borromean knot)- a fundamental condition for feeling truly alive, as emphasized by Carl Gustav Jung.

Nietzsche's provocative metaphor, "Supposing truth is a woman, what then?" might be replied: "Then it must be seduced" (R.Düren, MD, personal communication, December, 2024). Blending Nietzsche's metaphor and a nuanced perspective on gendered dynamics, this statement suggests that truth, like a woman, must be approached with delicacy, respect, and an understanding of its nuanced nature. That means, truth should not be forcefully possessed but instead "attracted" through an intentional relational process. To be "won over," truth needs a relationship—one of respect, dialogue, and mutual engagement—rather than a unilateral imposition. Traditional philosophers, with their dogmatic and imperialistic quest to possess truth

fail to elicit genuine responses from it. Instead, to offer an answer, truth requires not injury or coercion but reverence, care, and partnership-qualities akin to a valued relationship. In this context, encryption as a metaphor suggests the balance between openness and concealment, where protection does not negate value but enhances it.

Internal world and external reality: A continual back and forth

Rumi (1207-1273) is quoted to have said: “I have lived on the lip of insanity, wanting to know reasons, knocking on a door. It opens. I have been knocking from the inside”. This aphorism resonates with Australian psychiatrist Russell Meares’ legacy (26), who, in his paper titled “A Psyche for Psychiatry”, references Karl Jaspers’ 1913 observation: «All life reveals itself as a continuous interchange between an inner and an outer world» (General Psychopathology, p.12). Meares builds on this idea, asserting: “Out of this interchange arises the third thing, the experience of myself”. He further states: “Unless psychiatric institutions of teaching and research restore to the experiences of ‘inner’ life the value given to them before the shift in Western consciousness which occurred round 1913, we are in danger of developing and propagating a discipline which is, in a fundamental way, lifeless.” A patient, following the author’s comment on the merits of establishing (emotional and behavioral) control “from within” (of the person), remembered Rumi’s statement in a way that articulated the core principle of Implicit Psychotherapy even more explicitly than the abovementioned original: “I have been trying to open the door from outside, it turns out that it opens from inside”.

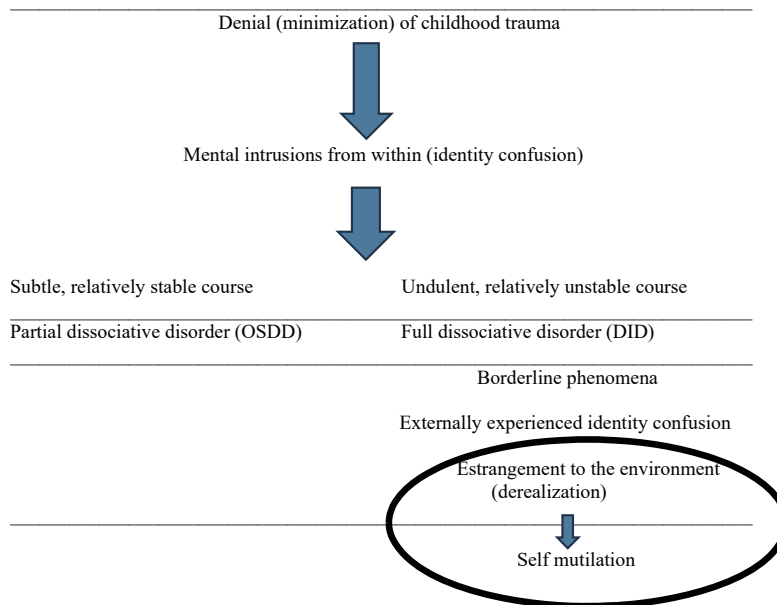
A comparison of two iconic 20th century science fiction films, Tarkovsky’s “Solaris” (1972) and Kubrick’s “2001: A Space Odyssey” (1968), reveals contrasting visions during the Cold War era, characterized by the ideological rivalry between USA and USSR. Both films treat space as an existential frontier. Kubrick’s work is more outwardly focused, emphasizing human progress and the larger cosmic questions. It presents a future defined by technology and artificial intelligence (AI), embodied by HAL 9000, reflecting humanity’s dependence on

machines and the potential unpredictability of AI which goes out of control. In contrast, Tarkovsky’s work examines into the internal, emotional crisis of the psychologist cosmonaut Kris Kelvin, emphasizing human vulnerability, guilt, and memory. The alien planet Solaris conjures physical manifestations of the cosmonauts’ dissociated memories, particularly Kelvin’s suicidally (because of his lack of love) deceased wife, Hari, who bodily (live in physical form) reappears in the spaceship as a consequence of his unresolved feelings. Kelvin’s journey through space serves as a metaphor for his inner process, focusing on self-confrontation than on exploration.

A study conducted on young adults in Turkey (27-30) revealed significant insights into the relationship between traumatic memories, self-detachment, and the shifting boundaries between the internal world and external reality, as vividly fictionalized in cosmonaut Kris Kelvin’s “space odyssey” in Solaris. Denial or minimization of childhood trauma (often coupled with idealization of the perpetrator, particularly in cases involving close proximity) was found to predict mental intrusions from within, representing what may be described as “the return of the dissociated”. Descriptively, this manifests as identity confusion leading to non-psychotic Schneiderian experiences, particularly of the passive influence type, in which one feels their sense of agency is compromised, as if being puppeteered or controlled by an internal power (master), reducing the self to a dependent entity (slave). In the study, internally experienced identity disturbance emerged as a shared feature across both BPD and dissociative disorders (DD), suggesting a common ground in this spectrum of psychopathology. In contrast, externally experienced identity disturbances, such as being perceived as a different person, exhibiting sudden anger, or having imaginary companions were more strongly associated with BPD often accompanied by detachment from external reality (derealization) (29).

Thus, having BPD, DD, or both may represent multiple faces of the same coin. The presence of identity disturbance, whether experienced externally, internally, or both, constitutes “Pathway 1” of post-traumatic coping typically associated with a

Table 1: Subtle and undulent courses as post-traumatic pathways of coping

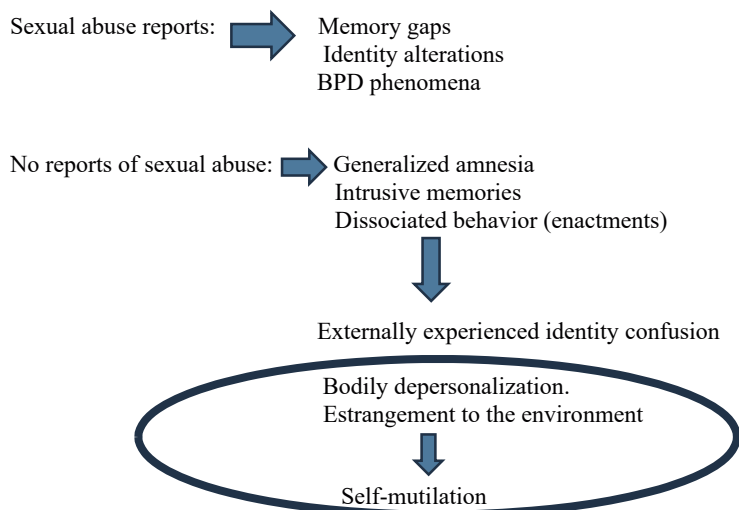


diagnosis of DID, BPD, or both. In contrast to these highly expressive conditions, bodily self-detachment is more often linked to subtler forms of DD, forming “Pathway 2”, which does not cover identity disturbance. This duality between expressivity and non-expressivity mirrors but not limited to the distinction between undermodulation and overmodulation of emotions in PTSD, a differentiation increasingly supported by neurobiological research (31). While this understanding of overmodulation and undermodulation informed the inclusion of the dissociative subtype of PTSD in DSM-5, its clinical characterization, centered on depersonalization and derealization, has narrowed the concept of dissociation to that of emotional overmodulation. This framing risks becoming tautological, as it focuses primarily on the negative symptoms of dissociation, thereby excluding its positive or intrusive manifestations. The latter include dissociative hallucinations, sudden surges of “orphan” emotions (i.e. those without an explicit origin) , and sensory-motor phenomena such as psychogenic non-epileptic seizures, now often referred to as functional neurological symptoms, as though they were merely accidental malfunctions of the central nervous system, rather than complex expressions of unresolved psychological trauma (32).

The body: Intimate outsider or extimate partner ?

Why did Kafka’s Gregor Samsa wake up one morn-

ing as an insect? This is precisely the right moment to explore the body’s role in the often silent process (Pathway 2) of coping with trauma-related mental content. The aforementioned study on a college population in Turkey (27-30) revealed intricate connections between childhood trauma, memory, self-identity, and the environment, with the body (itself and/or its image) playing a central role in this dynamics best described as the embodied experience. Reported childhood sexual abuse was associated with memory gaps, identity alterations, and BPD traits which are phenomena reflecting a struggle with conscious mental content. In contrast, the absence of such reports, possibly representing a temporarily successful escape for those who were nonetheless to trauma, was linked to intrusive memories, dissociated behavior, and generalized amnesia which, under stress, may culminate in a nervous breakdown marked by self-destructive behavior and (re)-enactments related to past trauma. While the former pattern aligns with the undermodulated coping style (often seen in florid BPD/DID presentations), the latter represents an overmodulated style, wherein previously inaccessible memories emerge intrusively in individuals teetering on the edge of trauma-related enactment (the return of the dissociated). Notably, this escape-based pattern was closely tied to bodily self-detachment, detachment from external reality, and externally experienced identity disturbance, suggesting that, in some cases, the body becomes both a vehicle for survival and a silent witness to trauma,

Table 2: Reported sexual abuse and absence of sexual abuse reports: Indirect clues of memory impairment and its correlates

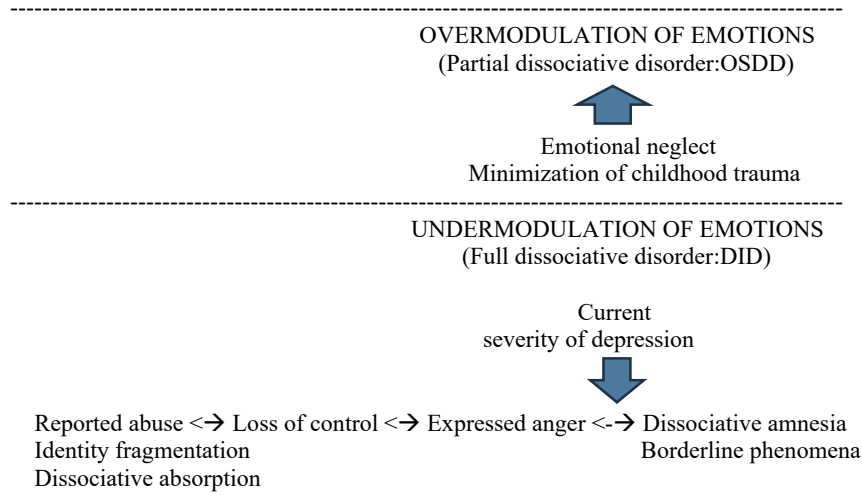
encoding that the conscious mind cannot bear to hold. The opposite or positive version is shown as persistent somatic symptoms representing calm before the storm, the latter with the potential of a systemic chaos emotionally or, in a worse case scenario affecting bodily health (33).

Might it be possible, at the risk of overinterpretation, that identity alteration serves as a coping mechanism to shield against the awareness of traumatic memories? Additionally, might bodily self-detachment reflect the psychological burden of not re-membering such an experience? Supporting this speculation, research indicates that reported childhood sexual abuse is associated with cognitive-emotional self-detachment and perceptual detachment, but not with bodily self-detachment (29). Could the body be perceived as an external entity, separate from the internal world, contributing to its perception as an enemy (34) onto which “evil” is projected, potentially betraying the individual through hidden threats like a disease (35)? Alternatively, is the body viewed as one’s most vulnerable commodity or asset, fragile to not only against disease but also physical assaults, in contrast to the internal world perceived as the “little town of (positive) possibilities”, referencing a Turkish advertisement motto? It seems this is where Descartes’ concept of mind-body dualism takes root (!), a perspective that ultimately gives rise to the dissociative notion of the “ghost in the machine” described by British philosopher Gilbert Ryle.

In a study on psychosomatic patients suffering from pain, childhood emotional neglect predicted somatic dissociation (36). In these patients, childhood abuse (rather than neglect) predicted cognitive-emotional dissociation which correlated with the severity of depression. The latter, in turn, predicted expressed anger, which was associated with loss of control, BPD traits, and dissociative amnesia. Loss of control was also related to childhood abuse reports, identity fragmentation, and dissociative absorption. This pattern indicated undermodulation of emotions during crises, often triggered by the release of previously overmodulated anger, possibly triggered by traumatic reminiscences. The abovementioned college study (29) found that such florid conditions, usually accompanied by BPD and DID phenomena, were predicted by higher childhood trauma total scores and reports of abuse, while emotional neglect and denial of childhood trauma predicted relatively subtle (partial) dissociative disorders. Overlap between these patterns was common, though. Both over- and undermodulated states shared dissociative amnesia as a central factor, emphasizing the critical role of post-traumatic memory processing in shaping of clinical symptoms.

The aforementioned college population study in Turkey (27-30) also documented that emotional and physical neglect led to bodily self-detachment and detachment from external reality, both of which have been shown to significantly correlate with self-mutilation. Interestingly, this pattern of

Table 3: Post-traumatic pathways: Subtle (relatively-stable) and florid (undulent) courses in context of memory and identity



disowning the body was associated with dissociative amnesia but not with other (cognitive-emotional) dissociation measures. Both bodily dissociation and estrangement to the environment seem to be the consequence of overmodulation (restriction) of emotions leading to a subtle or suppressed clinical condition.

In his presentation “Television” (37, p. 6), Lacan emphasized the body’s associative role in a detached internal world, stating: “In fact the subject of the unconscious is only in touch with the soul via the body”. Lacan argued, language is the medium through which this connection occurs, which explains why psychogenic somatic symptoms align more with cultural stress idioms rather than the body’s anatomy. In a similar linguistic context, Jean Laplanche proposed that psychic life is structured through translation but not just repression (4). He argued, from infancy on, children encounter enigmatic messages from adults—especially from caregivers—that are beyond their ability to fully comprehend. These internalized messages remain incompletely understood or translated. Laplanche’s theory shifts the focus from repression to the intersubjective origins of the “unconscious” which highlights the infantile origin of dissociation including inter-generational transmission of trauma (8). This notion is similar to Donald Stern’s concept of “unformulated experience” which is not repressed because it has never been fully felt (38) or “Lost in Translation” to echo the title of Sofia Coppola’s 2023 romantic comedy-drama film.

The author suggests that, even sexuality, as an embodied form of communication, can become functionally disrupted when used to address an individual’s inner psychological detachment. This usually occurs in real life through the interference of trauma-related and gendered power dynamics (39), akin to the master-slave conflict discussed in the first paper of this two-part essay (1). In Bob Fosse’s “All That Jazz” (1979), the final scene depicts a meta-physical fusion between the protagonist and his deceased wife as he nears death, symbolizing the departure from the body. This scene closely mirrors the experience of fusion between detached personality states within a dissociated individual, where distinct entities often resist, perceiving this integration as a form of dying, i.e. a threat to their imagined separate existence also bodily. Because of the similar enigmatic situation, a real “fusion” between deeply intimate partners may only occur in the death of one, as it is the body that indicates separateness between two individuals! Thus, passionately intimate partners do not part after death, as captured in the Celine Dion song “Immortality” (1997) featuring The Bee Gees: “We don’t say goodbye!”

“How Deep is Your Love?”: Ideology everywhere !

In contrast to the plea of the 1977 Bee Gees ballad, which questions security and authentic connection within a relationship, Andy Warhol is said to have remarked: “I am a deeply superficial person”. In “Beyond Good and Evil”, Nietzsche offered a sharp observation on the illusion of depth: “When

one wants to appear deep and mysterious, one puts on a dark and unintelligible expression. People believe that where there is fog, there must be depth.” Indeed, underlying realities may sometimes be more apparent at the surface while apparently deep endeavours may build the surface hiding a truth! This is precisely the point, where ideology snakes in and must be critically examined. Ideology operates most powerfully when it presents itself as natural, unquestioned, or simply the way things are, a surface so seemsless and familiar that one no longer think to look beneath it.

For instance, philosopher Slavoj Žižek (40) explores the hidden ideology embedded even in functional forms and objects. As an example, he humorously compares the mechanics of three different bowl shapes, linking restroom architecture to national character while overlooking but the most spontaneous option: the *a la Turca* toilet! Namely, in typical German toilet, there is a plateau where the “product” lands before disappearing with the flush, allowing time for inspection to think about what has been done. In the French toilet, the hole is positioned on the back so that the output disappears as quickly as possible. The Anglo-Saxon toilet basin, however, is full of water, so that the product freely floats, finding its “value” in the “market” ! In contrast, with the *a la Turca* toilet, you first take a stable position on a solid ground and relax at the same time, then aim for the hole (if you want it to disappear), and let the product fall. The focus is on reaching or not reaching the goal. Not only the individual to be healed, but the psychotherapist also benefits from an appropriate blend of the four existential stands mentioned above while conducting their professional task.

Žižek links these designs to Hegel’s interpretation as expressions of three different existential attitudes: reflective thoroughness, revolutionary hastiness, and utilitarian pragmatism, respectively. Politically, this triad can be seen as German conservatism, French revolutionary radicalism, and English liberalism, each reflecting a different approach to dealing with excremental excess: Ambiguous contemplative fascination; a desire to get rid of it quickly; and pragmatic disposal (40). This framework would gain additional depth by incorporating the Turkish “decisive intervention-

ism” existentially, and arbitrary checks and balances politically, alongside a contagious lack of a structured distance (M.E. Akdemir, MD, personal communication, September, 2024) in relation to excremental excess. This is why Turkish “knowing” is rooted in authentic (self-) experience and doing rather than looking from a distance (except the preparation phase before -but not after- action), which becomes an obstacle when attempting to adopt the “Western” style of communication in “scientific” pursuits.

The author recalls a German mathematics teacher at a Turkish high school in Istanbul. The teacher once responded to the pupils’ complaints about the difficult exam questions, which didn’t seem to align what he had taught in class and required considerable thought just to achieve partial credit, by saying: “What is the point of asking what I’ve already taught?” Of course, he was also reluctant to accept shortcut solutions commonly employed in Turkish multiple choice exams with a large number of questions at a time, where speed and accuracy are essential. The rather “organic” concept of hitting (or, alternatively, missing) the target after securing a natural, grounded, and relaxed position, without relying on technical add-ons, resonated with the performance of Yusuf Dikeç, the Turkish Olympic shooter, whose presence at the 2024 Paris Games became a social media phenomenon worldwide.

Hitting the target: “Instant” psychotherapy

The profound entanglement of the body with the inner world, where intimacy, death, and dissociation converge, finds an unexpected analogue in certain therapeutic processes: The phenomenon of sudden transformation. Where lasting change after chronic psychopathology is often credited to sustained therapeutic efforts, there are moments when profound shifts occur almost instantaneously. What a pleasure it would be that an intervention led to immediate resolution (41)! Remarkably, the utopia of such instant psychotherapy may become at times a reality, even without any tangible intervention by the psychotherapist! (J.Osmanli, medical student, personal communication, February, 2025).

Notable initiatives aimed at reducing the treatment

duration have been Habib Davanloo's (Intensive) Short-Term Dynamic Therapy (ISTDT) (42) and Gottfried Fischer's Multidimensional Psychodynamic Trauma Therapy (MPTT). The latter is designed for psycho-traumatic conditions (11), where around 10 sessions can effectively prevent long-term trauma-related disorders. Similarly, Francine Shapiro's (43) Eye Movement Desensitization and Re-Processing (EMDR) demonstrates lasting improvements in PTSD, even post-treatment, unlike pharmacotherapy, whose effects may diminish after discontinuation (44). The success of these approaches is not a merely technical issue. It is rooted in a robust philosophical ground. EMDR, for example, relies on the dialectical interplay of first-person perspectives which are forced to interact. As a historical irony, short-term psychotherapy emerged as an innovation during WWII military psychiatry, when both medical staff and soldiers were forced to navigate the edge of an abyss.

At Salpêtrière, an observer once remarked to the chief physician: "Dr. Charcot, what you say does not fit the theory". The "Docteur" famously replied: "Theory is good, but it doesn't prevent things from existing!" Richard Kluft (45) expands on this statement with a counterpoint: "Things are good, but they do not prevent theory from existing". The interplay between theory and practice reflects the essence of "ideology" often defined, March, et al. as a set of beliefs or philosophies held for reasons beyond pure knowledge. In the realm of healing profession, a more precise description of ideology even be more accurate: "Having to practice where theoretical understanding is not complete" (E. Özalp, MA, personal communication, February, 2025). Psychotherapists' preferences for "slow" or "fast" action (46), or the "depth" of their approach often reflect their ideological stance, shaped by broader philosophical, theoretical, cultural, or geographical perspectives on change and healing. Thus, far from being confined to politics, ideology can also influence clinicians' attitudes and choice of methods! Acknowledging its universal presence, rather than ignoring it, is essential to maintaining "neutrality" in psychotherapy.

A Turkish proverb says: "The doctor comes to a patient's door who is destined to heal". The

author's ethical interpretation reverses it: "The patient who is destined to heal comes to a doctor's door". These recoveries, marked by sudden but lasting improvements, are neither coincidental nor mere placebo effects (47). They also cannot be reduced to a transient "flight into health" (19), as many such patients actively choose to consolidate their recovery by "staying where they are" echoing the grounded perseverance found in the lyrics of American country music giant Willie Nelson. These individuals typically require minimal post-recovery support to sustain their mental wellbeing.

This style also reveals its limitations, particularly concerning the protective role of a "synton", a term inspired by Lacan to describe a symptom that serves as a stabilizing mechanism, significantly influencing the pace and outcome of treatment. For example, dissociation, described as a "functional dysfunction" (48), may paradoxically foster resilience by deferring immediate emotional responses and enabling temporary adaptation to overwhelming challenges. This perspective is poignantly embodied in the case of one of the author's early patients, a middle-aged man suffering from a persistent "functional" (dissociative) neurological symptom affecting his gait. Upon recovery, the patient insightfully reflected: "While I was seeking a cure for my suffering, (it turned out that) my suffering was the cure for me". Nassim Nicholas Taleb's (49) concept of "antifragility", not only withstand stress but actually improve because of it, offers a compelling intellectual parallel, highlighting how adversity can sometimes become a catalyst of growth and resilience.

Internal moderation and the digital brain

A quote often attributed either to Steven Covey or Viktor E. Frankl says: "Between stimulus and response there is a space. In that space is our power to choose our response. In our response lies our growth and our freedom." In the author's view, the "on-off" dynamic observed both in symptomatology and treatment response can be best explained by an internal moderation system, one that processes perceived distress as input and generates an appropriate output response, either activating or deactivating, depending on the context. Considering the

still to-be-discovered mysteries of decision-making processes, the author has consistently opposed the concept of impulsivity that implies humans are driven by potentially uncontrollable forces reminding Sigmund Freud's famous statement: "Where id is and there ego be" (50). This perspective neglects the positive and regulative aspects of impulsivity, which allow decisive and swift interventions, when appropriately directed. This is the human mind's "internal moderation" function (51), much like the role of the host mediating a debate.

As a psychobiological self-regulation capacity, internal moderation is hypothesized to mirror the electrochemical functioning of synaptic transmission, operating with a "digital" system with on/off dynamics (52). However, in line with the author's model of simultaneous processing through "parallel-distinct structures" (21), this binary switch mechanism opens the possibility for three concurrent modalities: on (excitatory), off (inhibitory), and dual (ambivalent) modes. Preliminary data suggest that the dual modality represents the current severity of psychopathology as a state measure, independent of the primary diagnosis (52). The simultaneous elevation of three modes often indicates heightened inner tension with the potential for a (self-) destructive enactment (e.g. suicide attempt, self-mutilation, or assaultive behavior) for temporarily relief. A discrepancy between on and off modes, however, does not necessarily mean an imbalance. Simultaneously outlying low scores in all three modes, on the other hand, may indicate "calm before the storm", rather than reflecting the peaceful inner world of a Tibetan Lama! (33).

The on-off (binary) nature of synaptic transmission introduces a digital-like quality to brain function (A. Songar, MD, personal communication, November, 1989). However, this system can also produce graded, analogous responses giving the impression of hybrid functioning. In a similar vein, Daniel Kahneman's distinction between slow and fast thinking systems (46) and Stephen Porges' polyvagal theory (53) emphasize alternative pathways in the human mind and body that support survival. The concept of "emerging property", originating from Aristoteles, refers to characteristics, behavior, or outcomes that arise from complex interactions of system components, producing a

function that cannot be explained by examining the components alone. This principle, central to systems thinking, illustrates that "the whole is greater than the sum of its parts" and helps how the brain turns digital processes into analogous outputs. Who knows, if depression and mania in so called "bi-polar" disorder might, at a fundamental level, be the two faces of the same coin as suggested by psychoanalyst Melanie Klein (54), potentially linked to a disturbed internal moderator that regulates the switching between these states.

In the era of the digital brain and artificial intelligence (AI), multidimensional aspects of internal and external communication require to be re-evaluated. Implicit Psychotherapy, as proposed by the author, emphasizes subtle, indirect interventions gently touching critical junctions in the patient's mind, but not all at a time! This aspect has to rely on a yet-to-be-fully-explored "Symbol Relations Theory" (M. Kemaloğlu, MD, personal communication, March, 1983). Unlike signs with fixed meanings, symbols serve as knots and hubs between contrasting signifiers, enabling a deeper "editing" of mind, soul, and body. For instance, white can signify both burial shroud and bridging gown, while black can indicate both nobility and grief. While symbolism was deeply included in Carl Gustav Jung's work (55), it has largely fallen out of mainstream psychotherapy, possibly due to its probabilistic rather than deterministic predictability. To address uncertainties, interim assessments of outcome may be a solution. Moreover, resembling the principles of the quantum physics, these assessments themselves, can stabilize the progress as well, if the patient and the psychotherapist agree on a neutral evaluation method. These methods should be relational and grounded in a dialogue between the clinician and the patient as depicted earlier (1).

CONCLUSION

Implicit Psychotherapy serves as the core communicative technique in DDT akin to "free association" in psychoanalysis. Without its ideological foundation, it risks misuse like any "scientific" knowledge. The Dialectical (Healer's) Discourse provides the philosophical grounding and the responsibility remains central to therapeutic prac-

tice. Implicit Psychotherapy is essential for implementing DDT, as it frees the necessary space for Dialectical Discourse. In this framework, the “unconscious” is to be replaced by the concept of “parallel-distinct structures”, echoing psychiatrist Hagop Akiskal’s approach to the term “borderline” when used the title of a personality disorder : “An adjective in search of a noun” (56).

In the context of a new model of mind, the interplay between the Internal Moderator, the Sociological and Psychological Selves, and the Natural Self (which provides life energy) alongside “free-floating” emotions available to these entities renders the structural hypothesis of psychoanalysis redundant. The Traumatic (Symptomatic) Self (51), with its “resistances”, serves as a carrier of clinical symptoms while “crying for help”. It paradoxically acts as a rescuer within a detached internal world by building temporary bridges between dispersed entities. This is the cast which the clinician must engage with!

The notion of transference and counter-transference are deemed irrelevant, and sometimes counterproductive, in DDT. Their use threatens the experience of genuineness emerging in “encrypted” communication essential to this therapeutic approach. Spontaneous generation of “passwords” for each interaction ensures encryption to let the Sociological Selves of both psychotherapist and patient bypassed to allow their Psychological Selves to engage directly. Far from being passive, Implicit Psychotherapy is akin to “psycho-surgery”, as one of the author’s patients termed it, in its precision and invasiveness. Being an interventional approach, Implicit Psychotherapy may range from virtuosity to a less ambitious execution, depending on the psychotherapist’s skills. It may be considered as “gold” that may need to be mixed with “copper” to adapt to the context.

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