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Narcissism as a (Clinical and Theoretical) Symptom

Abstract: In this paper, under the auspices of the contemporary ontological psychoanalytic perspective, the author re-examines equivalents of primary narcissism, introduces the concept of the self-world, and, based on a clinical vignette at the end of an analysis, views the theory of narcissism itself as a symptom to be analysed.

The initial condition of our existence can only be ontological (Loewald, 1960). This view is consistent with what Freud (1923:31) also argues¹) when he writes that in a primary (developmental) stage, the infant cannot but be subject to a “direct and unmediated identification that takes place before [and beyond] any object relationship”. This is also argued by Spinoza, Heidegger, and many others.

Contemporary psychoanalysis, mainly through the contributions of Bion (1962) and Ogden (2019), brings back the ontological perspective (and primacy) of *experience* (Gadamer, 1960) to the fore: What we *experience* cannot but be primary. And what we *perceive* (Freud, 1915) and *realize* (Bion, 1962) *that we have experienced* cannot but be secondary. Even from the perspective of *Nachträglichkeit*, even under the auspices of the construction and reconstruction of the non-representable (Levine, 2023), the primacy of the experience remains the cornerstone of the present (and the future). Any other position is either dogmatically metaphysical (Kondylis) or postmodern/constructivist (Jameson).

In this sense, something *equivalent to primary narcissism* can only be the initial condition of each of our mental existence (Kohut, 1966; Lamnidis, 2025). We begin our lives in complete connection and rapport with the mother who brought us into the world (Loewald, 1960) – or the caregiver, who ensures our survival, to an absolute degree. But this primary condition is far from being experienced as “dependency”, except in pathological, traumatic circumstances such as *failed dependency* (Hopper, 2003). The primary mental condition of existence can only be experienced by the human infant as a *self-world* (not simply as a *self-object*; Kohut, op cit; 1984) and constitutes a continuation of intrauterine life and, of course, encompasses all the

¹ *Whatever the character's later capacity for resisting the influences of abandoned object-cathexes may turn out to be, the effects of the first identifications made in earliest childhood will be general and lasting. This leads us back to the origin of the ego ideal; for behind it there lies hidden an individual's first and most important identification, his identification with the father in his own personal prehistory. This is apparently not in the first instance the consequence or outcome of an object-cathexis; it is a direct and immediate identification and takes place earlier than any object-cathexis. (Freud, 1923:31).*

necessary elements not only for survival but also for enjoyment. The biblical paradise is one of the possible representations of this self-world of the new-born.

Theories of pathological narcissism deal only with the nachträglich traumatic inscriptions of the remnants of this (pathologically) idealized era. After all, the Id itself consists only of the (anchored) “remnants of the existence of countless (plural) egos” ²(Freud, 1923:38).

The experience and subsequent theorisation of narcissism as a factor hindering mental movement towards objects is nothing more than a description of “mental retreats” (Steiner, 1993), which take the form of narcissistic organizations and are found in clinical settings.

From this perspective, it is difficult for the concept of narcissism to have any meaning other than a psychopathological one. But narcissism has been established, at the level of the social unconscious and culture, as a cultural *counter-cathexis* (Freud, 1915), which allows for the securing of a substitute for the lost (psycho-traumatic memory) of the lost primal (and idealized) era of the self-world, the lost paradise.

In an extensive reference to an analysis that is in its final stages of completion, clinical material will be presented that illustrates what Freud calls the *resurrection* of previous selves, as, in view of the end of analysis, certain mental functions are activated whose previous *developmental failure/ineptitude* leads to what we have come to call (pathological) narcissism.

Narcissism becomes all the more meaningful the more pathological it becomes and organizes the psyche according to the model of a perverse attachment to prematurely-formed objects. This specific form becomes clear in the corresponding theories of Otto Kernberg (1992), who explains how early objectifications get organized as pathological attachments of the ideal ego (superego) to its unbearable/idealized objects. These are clinical situations where the environment of caregiver/mother has *failed to* ensure conditions for a smooth transition from the self-world condition to the condition of adequate subordination and *surrendering* (Benjamin, 2004) to the *third* and the *beginning of reality*, through the availability of the function of *illusion* (Freud, 1911, 1927; Lamnidis, 2023; Winnicott, 1953).

Freud's attempt to introduce the concept of positive narcissism, in the form of primary narcissism, succumbed to Kleinian revisions based (successfully) on the principle of contradiction in termini. Hence, the entire theory of narcissism, based on a symptom that was generalized theoretically, must be fundamentally re-examined.

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² Thus, in the id, which is capable of being inherited, are harboured residues of the existences of countless egos; and, when the ego forms its super-ego out of the id, it may perhaps only be reviving shapes of former egos and be bringing them to resurrection. (Freud, 1923:38).

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