

**NEW RETURN OF TRAUMA IN PSYCHOANALYSIS TODAY: BEYOND MALAISE?**

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**Abstract:** After a long latency period, the trauma returned in Freud, entwined with narcissism and the death drive, culminating in the idea of an inescapable “*malaise* in civilization”. We are witnessing a new return of the traumatic in psychoanalysis, as this is confronted again to the demonic face of psyche, this turn by the increase of figures of excess and trauma, borderline subjective configurations especially striking nowadays. This paper searches to advance in the understanding of such clinical and theoretical movement, with an emphasis on the problem of *malaise*, its singularity today.

**Keywords:** trauma; borderline states; contemporary world; *malaise*.

**Resumo: Novo retorno do traumático na psicanálise hoje: além do mal-estar?**

Após longo período de latência, o traumático retornou em Freud entrecruzado com o narcisismo e a pulsão de morte, culminando na ideia de um incontornável “mal-estar na civilização”. Assistimos hoje a um novo retorno do traumático na psicanálise, vendo-se esta confrontada, novamente, à face demoníaca do psiquismo, desta vez, pelo incremento de figuras do excesso e do trauma, configurações subjetivas limites especialmente marcantes na atualidade. Este artigo busca avançar na compreensão desse movimento, de natureza clínica e teórica, com ênfase no problema do mal-estar, sua singularidade hoje.

**Palavras-chave:** trauma; estados limites; contemporaneidade; mal-estar.

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The central perspective of this article is the deepening of the problem of trauma, considering its role and incidence in contemporary subjectivity and culture and its articulation with the dimension of narcissism and otherness. I start from a very relevant question in the psychoanalytical debate today: Would the new subjective configurations, those that show themselves more remarkably today, require the construction of new theoretical models in the field of psychoanalysis? In my view, in order to grasp the singularity of such clinical situations whose forms of suffering, of a traumatic basis, very often are extreme, in the first place, it is necessary to deepen certain propositions of Freud's work.

Therefore, for a clear understanding of the traumatic dimension and its main destinies in the contemporary clinic, it's necessary to retake the unavoidable tools Freud proposed since the theoretical and clinical turning point operated in his work, systematized in 1920 (FREUD, 1920/1996) with the postulation of the death drive. In response to eminently clinical demand, Freud advanced towards the preparation of this revolutionary conceptual contribution which, in a spiraling process, came to give a new meaning to ideas previously sown since the years 1910. And, with regard to the whole of theory, the introduction of the concept of narcissism (FREUD, 1914/1996) with its significant implications in the whole of the theoretical building of psychoanalysis, constitutes one of the most important contributions, soil from which, as is known, a new conception of the psychical conflict will germinate, considering, in effect, its many unfoldings.

A truly consistent investigation of the problem of subjective configurations nowadays, closely linked to those of trauma, drive excess/narcissistic fragility, requires to put "to work" Freud's formulations, particularly those that integrate the aforementioned second period of his work. For such a purpose, it is a matter of revisiting, with due rigor, starting from an analytical, effectively interpretive reading – as, for example, carried out in several articles of the collection *Excesso e trauma em Freud: algumas figuras* (CARDOSO, 2017) – the deep twist involved in the construction of this second time of the Freudian legacy. It is necessary to repeat, but in order to try to elaborate – it could be said to work through – what was already presented as a theoretical tool to realize the foundations of some clinical phenomena that surpass the model of neurosis, this one anchored in repression. It was precisely the borderline situations that, as a clinical imposition, led Freud, in the psychoanalytic context of the time, to carry out a theoretical revolution towards the confrontation of the "uncanny" in psychic life, a bias distinct from that which speaks to us of the action of a "foreign body" inside.

The death drive, postulated as a drive for excellence, as opposed to the multifaceted life drives, and then the construction of the second topography (Freud, 1923/1996), showing due appreciation for the complexity of the psyche, and still for the revisited theory of anxiety (FREUD, 1926/1996) – this one starting also from the insistence of trauma and helplessness in the clinical sphere – were profound changes made through the confrontation with paradigms inhabited by the dimension of "extreme". At that time Freud's theory was challenged by repetition-compulsion responses which pointed to the dominance of something beyond the pleasure principle.

Here certainly is at stake the interrogation that Freud and his interlocutors made in the face of the uncanny, whether of psychosis or of other psychic states, understood *a posteriori* as narcissistic at the time of the introduction of this concept. It should also be noted the profound consequence that this concept had in the understanding of the ego's functioning in its borderline relation with the other agencies and of the human subjectivity in front of the otherness, from the points of view of pathology and normal life.

## **TWO TIMES OF TRAUMA'S LATENCY AND ITS RETURN INTO THEORY**

The model of the second drive dualism is inseparable from the resurgence of the issue of trauma in Freud's theory, and has remained silent since the "abandonment" of the theory of seduction. The return of the traumatic in the Freudian work, a kind of "breakthrough of the repressed" that occurs in the period 1910-1920, is based on absolutely different foundations from those that, at another time, formed theorization about the etiology of transference neuroses, as Cardoso (2011) has advanced. After lingering for a long time

in a state of latency in theory, the trauma will then make a noisy return into it. Fortes, for example, notes that Freud enters the central question of 1920 with a reflection based on trauma. "The use of the trauma model has demonstrated that the drive is traumatic, the death drive consisting in the very traumatic impact caused by the drive excess" (FORTES, 2012, p.94). It is possible to perceive that this theorization results from a true movement of a theoretical-clinical *a posteriori*.

The nodal element of this period, its climax, is the emergence of the death drive, irreducible, as it is known, to the field of representation and of the pleasure principle. Within this field, the traumatic neuroses are strongly emphasized, in their radical difference to the transference neuroses, the basis of Freud's research up to then. His gaze was directed to a perspective of human subjectivity, individual and group, in which, as he brilliantly explored, a functioning "beyond the pleasure principle", the repetition in its demonic aspect being its most expressive clinical figure.

It is to this same demonic aspect that we are confronted again today, and even more exuberantly than to that which triggered, or rather demanded, the aforementioned twist in Freud's thinking in the years 1910-1920, by the increase of configurations with a traumatic base, before neurosis. Such increase is appointed by important authors in the current debate on the subject – and for the sake of illustration, I mention here only some of them and their works: Green (1999; 2002; 2011), André (1999; 2013), René Roussillon (1999; 2001; 2008), Chabert (1999; 1999a).

We have accompanied a considerable expansion of the space granted to research and discussion on borderline states, on identity-narcissistic sufferings, according to Roussillon's denomination (1999). This movement followed a period of relative silence, that is, a second latency time of the problems of trauma and "extreme" in psychoanalysis, now in a post-Freudian context. This occurred in theoretical production, but due to the predominance of a certain profile in clinical demand. However, long before this return of trauma, we were offered Ferenczi's (1999) masterful contribution on trauma and the handling of technique in "difficult cases", as he called them. That is, his work constitutes an undeniable exception in this time of "silence" to which I have just referred. Perhaps this is practically one of the only exceptions, if not the only truly significant one, within the dominant tendency I have pointed out, of some neutralization of the trauma in the clinic of "extreme" (POMMIER, 2008), and which has thus remained until relatively recently, in spite of the strong presence of these issues in the final period of the Freudian work. In this period, the model of neurosis insists, the one that guided, as early as 1930, the reflection on "*malaise* in civilization" (FREUD, 1930/1996), even if mixed with the contribution of the death drive, beyond the pleasure principle. In any case, the irreconcilable *malaise* to which Freud refers concerns primarily the question of drive renunciation, of the limits to sexuality and destructiveness, revisiting, to a large extent, what had been theorized from the clinic of the neurosis.

This second period of silence, of "repression" of trauma in psychoanalytic theory, was broken a few decades ago by the expressive increase in the clinical practice of cases other than the neuroses. This has imposed a strong demand on psychoanalysis for a renewed theorization of the metapsychological, psychopathological, and clinical elements at play here, especially everything that concerns, once again, the dimension of trauma, its foundations and vicissitudes. It was in this theoretical environment and, within a determined socio-cultural context, proper to this day, that this exploitation of the trauma came again to impose in view of its undeniable importance in determining certain modes of suffering. Here I mention the psychic sufferings of an eminently narcissistic character, which speak to us of the prevalence of a psychic pain over the experience of suffering. These are borderline states, based on a problem of the psychic borders, which interrogate us, among innumerable other aspects, about the narcissistic damages implied in the subjective history, damages to the feeling of self (CARDOSO; GARCIA, 2010; ESTELLON, 2014; 2014a).

As a central element in the proposal I made earlier in this text to "make work" Freud's contributions in order to unfold them in a new psychopathological and clinical soil, considering their organic articulation with the peculiarities of a certain historical context, it behooves in this point to punctuate the narrow relationship

between trauma and narcissism. The issue of trauma cannot be analyzed apart from its correlation with the structuring of ego space, with the problem of narcissistic constitution and functioning, thus raising a question about the quality of delimitation and the maintenance of ego boundaries in clinical situations. In turn, these aspects can only be conceived from the assumption that the intensity of the force may eventually violate these boundaries. And it should be added that these boundaries cannot be conceived outside the scope of the self/other relationship within which the intrapsychic and intersubjective registers are involved at one and the same time. Neither can they be analyzed outside the boundaries between the body space and the psychic space.

As a second element of analysis, in direct continuity with the former, narcissism carries in its core the dimension of otherness. The question of narcissism cannot then be understood exclusively in its reference to the field of the self, since it concerns the frontier relationship between the self and the other, and particularly the spaces between these two poles. This opens up a way of deepening the model of narcissism through the fertile and complex notion of limits in psychoanalysis, which must be worked under multiple perspectives, including the limits of representation: traumatic marks indicate what escapes linking, representation, and also repression, thus transgressing the limits of neurosis, whose central operation is repression.

The borderline states, studied and debated by a wide range of authors in current psychoanalysis, which, relying on Freud, seek to unravel the clinical figures that largely characterize today's clinic – these are states seated predominantly in the use of defenses of archaic and elemental character, coming before repression. In these clinical states, transgressed by the traumatic drive force, the subject's ego summons, as a last defense, an extreme resource of psychic survival, the somatic body or, by way of acting, the body in its motor sphere. The question of the summoning of the body, examined from the self/body relationship and its relevance in the psychic constitution and functioning has been expressively analyzed in current literature in the area of psychoanalysis, as can be seen in the contributions of Fernandes (2011), Estellon (2014a) and Coblence (2010). This last reference brings an in-depth study of the theme, which served as the main source in the presentations and debates in the in French-Language Congress of the IPA, held in 2010, resulting in a special issue of the *Revue Française de Psychanalyse*, entitled *Between Psyche and Soma*.

From this point on, my reflection leads me to elaborate the following questions: How could these clinical situations have being thought of in articulation with the issue of “*malaise*” in civilization, as elaborated by Freud? Would not the return of trauma, in its second period – which has come to impose itself in today's psychoanalytic clinic and theory – come from another level of subjective experience and of “*malaise*”?

### **"SYMBOLIC MISERY": THE ABSENCE OF MALAISE AS AN IMPERATIVE**

To account for the trauma, from an excessive drive influx in its topography, the ego triggers borderline-type defenses, often through the summoning of the categories of body and acting. There is, in this case, a regression to the regime of the sensory, to an economy of perception, under the regime of excitation/discharge, of excitation/sensation. These are defenses that reveal the presence of a real short-circuit in the processes of psychic elaboration. It is known that thought processes require the postponement of satisfaction, which presupposes the constitution of ego boundaries that are not excessively porous but at the same time do not appear crystallized.

According to François Richard (2012) there would be a *symbolic misery*, expressed in the trend that today reveals itself as striking in defensive responses that occur by way of short-circuits, without retention. This would make it impossible for the subjects to have an effective experience of satisfaction. The author complements that psychoanalysis today is facing clinical situations that can be considered as pathologies *in* exteriority or, on the other side, pathologies *of* interiority. In the manifest borderline cases, the psychic interiority would be, to a certain extent, unknown, since it is expelled into outside reality. In the case of neurosis, there is an intrapsychic drive conflict, which is significantly based on the oedipal conflict. In the said

pathologies "in exteriority" there is intertwining between the drive conflict and a lack of knowledge of the interiority.

In borderline states, there is the impossibility of a work of mourning, a matter of great importance in the reflection I present here: the issue of time. In this regime of permanent self-excitation, one tries to escape the transforming action of time. The subject gets frozen in the time of the trauma, time of the present. The issue of trauma is inextricably linked to the issue of memory, and in the clinical situations on which a traumatic dimension resides; it is a memory without remembering, without story. On this topic, Sylvie Le Poulichet (2006; 2010) says that the marks, traumatic enclaves, are "holes" in time where events did not constitute their text, or else lost it. When the work of mourning is impossible, time does not solve... One of the characteristics in these subjective configurations is the difficulty of the self to get to inhabit the body, to take possession of its story.

Many authors have favored the pre-Oedipal range in their research on the problem of borderline states. But how can we think of this range without taking into account its necessary and close articulation with the Oedipus complex? What would be the impediments of this range in these pathologies, with their precarious and elementary defenses, considering the weight that the temporality of the archaic has in them? Richard (2011) invites us to think of a kind of "symbolic misery" proper to these cases, to point out precisely certain obstacles that take place in them in the Oedipus crossing.

When Freud opens the horizon of infantile sexuality, this is inseparably connected with the issue of the Oedipus complex, although only later he will really insist on it. But in the third of the *Three Essays on Sexuality* (1905/1996), in indicating the requirement of detachment of parental figures after puberty, as a reaction against the infantile complex, it is perceived that this detachment is never fully achievable, much less in the case of neurosis, where there would be some failure in that regard.

Chabert (1999) points out that this task presents a difficulty of another order in the borderline states, from different determinations. Among them, the author refers to the problem of loss and its elaboration, a central problem in adolescence. This elaboration can be especially difficult in this passage from childhood to adulthood, a subjective experience of psychic work where the *a posteriori* of the Oedipus complex takes place, under new conditions (openness to an effective genital sexual life). The internalization of the interdicts is vital in the process of subjectivation and is precarious in the borderline states, which, along with other factors, leads to the mentioned tendency to exteriorization. In these cases, there seems to be significant difficulty in repressing incestuous fantasies whose result is a massive counterinvestment of incestuous impulses, a source of extreme anxiety. "Within the original fantasies, and more precisely of those that rely on the primary scene, the subject assigns himself a place in the scene when he should be excluded from it and be led to the infantile position of impotence" (CHABERT, 1999, p. 103. My translation).

According to the author's position, in these cases the inability to admit the position of exclusion is observed because of the passivity it implies and also because of the anxiety of abandonment it causes. The porous boundaries between self and other unfold in this difficulty in the subject to stay sufficiently away from the incestuous phantasm, encompassing the child in the primary scene. This aspect is linked to the dimension of ego narcissistic fragility, aggravated since the entrance of the father figure, when the ego remains fixed to the archaic level as one moves to another level in psychic life.

The entry into this order must allow the access of psychic functioning to the processes of symbolization, enabling the elaboration of pre-genital fantasies of the primary scene, offering a structuring scene to the ambivalence of love and hate. In borderline states, the castration anxiety seems to be confused with that of fragmentation. The Oedipus complex is always present, always current, but without having been structured as such. Internal symbolic misery is a particular subjective configuration having significant presence today. These questions, concerning the peculiarity and archaism of the Oedipus in borderline states were thoroughly investigated in Ney Klier Padilha Netto's (2017) doctoral thesis dedicated to the subject of sexual compulsions,

a work reading of which can contribute to clarify several points here concerning the assumption of a state of symbolic misery that, according to Richard (2011; 2012) constitutes an important feature in the subjective configurations that mark the present of the clinic.

We see that the opening and deepening of the discussion of borderline states, with their significant presence nowadays, has broadened the horizon of theoretical and also clinical debate, launching and deepening ideas, in particular the notion of limit. It must be realized that this notion refers not only to the individual register. Its exploration is likely to throw light on the understanding of the collective experience, from a psychoanalytic point of view, if we take into account the many aspects at stake, which refer to human subjectivity, cultural formations and the establishment of social bonds.

I draw attention here to the fact that it was precisely this same movement Freud operated a few years after conceptualizing narcissism in 1914, at the turning of his theory of the ego. With the new tools in mind, later revolutionized by the postulate of "beyond the pleasure principle", Freud then produces *Group psychology and ego analysis* (1921), a text in which he transits, with extreme rigor and artistry, between the two plans, the individual and the collective. By exploring group formations, his work reaches a new level of understanding of individual subjective life, through, for example, the improvement and systematization of the notion of identification. I further add that the theme of the Oedipus Complex is visibly enriched thereafter, a subject which in itself unquestionably summons the interrelationship between these plans, but, of course, considering the teaching of Freud in the manner in which it is able to promote these articulations, with the care of not reducing them to each other, let alone juxtaposing them.

Taking into account the necessary articulation between subjectivity and culture and the weight of trauma in the new subjective configurations, an issue unfolds from the abovementioned: would we have passed from "*malaise*" to "beyond *malaise*", thus marking acute and prevalent the contemporary subjective configurations? Through the deepening I have tried to do with relevant and significant themes present today in psychoanalysis – about the singularity of subjective configurations and their sufferings in contemporary times – I wonder if these new forms of "*malaise*" would not really be situated beyond this life experience.

Birman punctuates:

There are no more doubts about the changes in the forms of *malaise* in the contemporary world. Everyone agrees. There is, in fact, a transformation in the forms of *malaise*, which is recognized by psychiatric and psychoanalytic discourse. However, the divergences do exist (BIRMAN, 2006, p. 173).

Nevertheless, the author adds that these divergences concern the interpretation of these changes, as to what would ground them, rather than to the recognition of their existence. Psychoanalytic knowledge is called upon to investigate these questions, and has been somewhat surprised by transformations whose profound significance and whose implications still require reflection.

Freud stated in *Civilization and its discontents*:

We are threatened with suffering from three directions: from our own body, which is doomed to decay and dissolution, and which cannot even do without pain and anxiety as warning signals; from the external world, which may rage against us with overwhelming and merciless forces of destruction; and finally from our relations to other men (FREUD, 1930/1975, p. 77).

Do I consider that, today, we are dominantly in the face of clinical situations that lie below these modes of suffering, forms of subjectivation that point to a "beyond *malaise*"? These "new" modes of suffering with borderline defensive responses to deal with the traumatic action in the inner world have, in a sense, fostered this new traumatic return in theory – as suggested in the previous topic of this article. All this movement demands rigorous analysis on the role of the constitution and narcissistic functioning of the subject and this re-signification of the issue of "*malaise*" in psychoanalysis. It is a matter of considering the peculiarity of this

lived experience in the contemporary world, especially regarding the radical character of certain defensive responses, those that characterize the borderline states, the identity-narcissistic sufferings.

In 1930, Freud told us of an inevitable "*malaise*", translated by the excess of cultural processes over the individuals, resulting in a process of sense of guilt for the drive renunciation. In his words: "(...) it is very conceivable that the sense of guilt produced by civilization is not perceived as such either, and remains to a large extent unconscious, or appears as a sort of *malaise*, a dissatisfaction, for which people seek other motivations" (FREUD, 1930/1975, p. 135-136).

According to Ghislain Levy (2000; 2010), we would be today beyond or even in the opposite direction from this perspective. The restraint of individual happiness by some plus of civilization would no longer be sought. In the name, for example, of a technical-scientific ideal, what contemporary culture tends to convey is much more the guarantee of a right to happiness, promoting, in a certain way, a reinvention of the pleasure principle. In this case, it is an extreme response to dominance – in the psychic space – beyond the pleasure principle, the latter defense which, with its present character, corresponds to a "domination" of the traumatic excess. This defense is very different from the processes of connection. In tune with my reflection, François Richard interrogates:

The new pathologies of externalization of the intrapsychic conflict, the tendency to the immediate expression of the drive movements and to a generalized nervousness, accompanied by dissatisfaction as much as its inversion in a destructiveness directed against oneself, but also to a great extent against the others, do they define a rupture in the *malaise* in the civilization analyzed by Freud, or a rupture with this *malaise* to which something totally different would have followed? (RICHARD, 2011, page 23. My translation).

In these states, one of the marks is the difficulty of the self inhabiting the body, taking possession of its story. According to Le Poulichet (2010), the outline of the bodily self does not differ here from the break-in it suffered, since there was no adequate delimitation between an outside and an inside. The extended rip in the protective shield causes the energy of the systems attacked by the excitations to remain unlinked. These are experiences of the extreme (etymologically, the outermost), which cannot be recognized as familiar.

From my point of view, we would be faced with a beyond the "*malaise*" whose expression, among many other figures, would be the insistent presence in the subjects of a narcissistic expectation of unlimited character, presupposing a visible ignorance of their suffering, more precisely, of their psychic pain. Levy (2010) adds that, immersed in a culture focused on absolute pleasure, the subject tends to find himself in a situation of deep isolation, loss of uniqueness, as at the same time he is confused with the masses. One observes a movement tending to the regression of what would be the connection to a political community, because it is, in this case, a kind of adhesion to a hypnotized mass, unlike what would be the establishment of social ties. If there is no limit to the drive demands, there is therefore no such bonding – at least this does not take place in an effective way. The drive economy tends to a radical outward discharge, to the immediate evacuation of the drive energy, disturbing within the psyche, implying the loss of the possibility of balance between the drive demands and the cultural processes. Quite rightly, the aforementioned author shows that the intensification of the drive force at stake here occurs at the expense of the organizing repressions of civilization.

The denial of *malaise* operates through, for example, the narcissistic cult of the body. The experience of suffering becomes unthinkable, because it cannot be located in any story, being at the same time inescapable, but as pain. This leads to the assumption of a kind of barbarism situated precisely in the absence of *malaise*, resulting in a compulsion to permanent self-excitement, triggered by the presence of untranslatable elements in the internal world, traumatic marks that did not come to constitute memories. In the impossibility of being represented, these elements are presented, in a continuous present, permanently updated. The activation of this mechanism implies a void of thinking, a "symbolic misery" which, under a traumatic ground, reveals

significant failures in the processes of psychic elaboration, a field in which trauma returns again, but now in a clinical and theoretical soil that visibly goes beyond the issue of *malaise*.

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