

## PSYCHIATRY AND MUSIC

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There is a close connection between psychiatry and music. Listening in psychiatry, like listening to music, implies above all a rigorous abstention from the world of “facts and reason”.

We quote the words that a schizophrenic patient addressed to his psychiatrist. They relate a talk with a psychiatrist to listening to music.

The patient says: «I would like you to speak a language that is incomprehensible to me. [...] When I don't understand the sense of your words, I can hear their music and your silences, which are my creative food».

The close analogy between the type of listening the psychiatrist must use and listening to music is underlined by this apparently enigmatic parable told by Wilfred Bion, a psychiatrist and psychoanalyst. Bion (1973) writes: «A patient once told me that if I stopped talking and listened to him playing the piano, he would be able to teach me something. But there was nothing he could communicate to me, because my mind was closed, and blocked off by all the prejudices of a very limited human activity: speaking».

This obliges to restate the importance of psychiatric knowledge, which is impregnated with an almost religious respect for differentness, a differentness which can unfold and reveal itself only in abstinence and listening.

This text ponders on the relationship between music and psychiatry in research whose aim is the absolute value of listening.

Having to do with the extreme manifestations of psychosis means placing oneself in an unwonted and paradoxical position with respect to the other, an anthropological area which lies between the *unspeakableness* of psychopathological experience and the responsible, strenuous exercise of listening to this *unspeakableness*.

The psychotic patient can be seen as the sender of a signal which seeks a receiver, not so much because he has to send him a message, but because he seeks a listener able to give his signal the dignity of a message. Such a point of view underlines the more “maieutic” rather than “investigative” function of the act of listening. This listening does not seek to unveil hidden meanings, but to be part of a free production of sense.

In posing this question, the psychiatrist introduces a non-speculative tone and underlines the ethical aspect: what he is doing in his work is listening, with rigorous and responsible attention. *Safeguarding, looking after and letting be* are the principles of this act of listening which demands an attitude of abstention and waiting. As Cristina Campo writes, «it is up to us only to wait in the patient desert, feeding on honey and locusts».

It is what Keats defines, in one of his letters, «[...] Negative Capacity or Mystical Capacity. That is, that capacity a man possesses to exercise the faculty of patience, to abstain while preserving trust, to persevere with faith, through uncertainties and doubts, without giving in to a frantic desire to search for facts and reasons» (J. Keats, “Letter to George and Thomas Keats”, 1817).

Each clinical history must be taken, above all, as a “text” to listen to while waiting for something to happen, for the “text” to unleash in some way, like music, its latent meanings and reveal its world plan. It must be a kind of listening that preserves the words of the speaker, offering room for its unspeakableness, while safeguarding its oblique “truth”.

In order to think – Heidegger repeatedly stresses – we must allow things to come towards us. The question is not one of constructing experience, but letting it be: we must find a “place” in which things come about without their being betrayed by the words beforehand.

Real listening is able to interpret words without exhausting them, respecting them as a permanent reserve. A rejection of total

clarification tends, above all, to safeguard the differentness of a “history”, and look after the dark, shadowy truth hidden within, while being fully aware that a blinding light tends to level over and make everything the same. In the excess of light projected by a despotic, all-absorbing use of reason, the subject meets none other than himself: all differentness fades like a mirage.

Only by renouncing and withdrawing from all claims to possession can one come close to that *unspeakable differentness* which is the true aim of listening. The need for this withdrawal reminds us of Isaac Luria’s cabalistic doctrine according to which only an act of contraction, self-limitation on the part of God can allow the differentness in creation to exist. In the same way, renouncing the intrusive, unmasking truth of words means giving the other person the chance to be. Thus differentness, in the shade of amazement, silence and listening, can unfold and be revealed.

But, as soon as we try to delve deeper into the sense abstention, patience and silence take on for psychiatric listening, we come up, once again, against some surprising pages by Wilfred R. Bion.

«It took me a long time – writes Bion – to convince myself that it was necessary to shed memory and desire, and even longer to understand the misleading effect that trying to understand at all costs has on observation. Such a need is an example of intrusion [...]. As I became more and more able to silence my prejudices, I realised that I was able to see the evidence that was there. When my ears became more used to silence, small sounds became easier to hear. I learnt to consider the importance of silence in order to listen to the “weakest sounds”. It works. And I began to listen to sounds that I would once have been unable to hear [...] I [also] remembered an analogy that Freud used when he wrote that he had to blind himself artificially in order to be able to point a faint beam of light onto a very dark situation» (1981, pp. 55, 65).

Thus, «instead of trying to provide a brilliant, intelligent, informed illumination to clarify obscure problems, I suggest using a “reduction of light”, a “penetrating ray of darkness”, the exact opposite of a lighthouse [...]» (1973, pp. 36-37). We could speak of a “*penetrating ray of silence*” to revive the analogy between listening in psychiatry and listening to music.

Because listening in psychiatry has to come about through the rhythm and colour of the silences which are woven between the words.

Like saying that listening in psychiatry – and certainly not only in psychiatry – comes about through the music of silence.

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