



Violent Acting in the Context of a Cryptic Fantasmatic in the Framework of a Paranoïaque Personality on the Background of Psychorigid and Sensitive Personality with Loneliness's Feeling

Scharbach Hugues*

Paris's University past Head of psychiatric Service in CHU, Doctor in Psychology (LYON II) National Forensic Expert Hon, France

***Corresponding author:** Scharbach Hugues, Paris's University past Head of psychiatric Service in C.H.U., Doctor in Psychology (LYON II) National Forensic Expert Hon, France

Received:  July 20, 2021

Published:  July 28, 2021

Abstract

A retired man, 63 years old, single, only child, living in his mother's apartment -hospitalized during the time of acting - having worked as monitor, instructor, manager in vacation or summer camps for young's and, even, as seller, injured his next-door neighbor a psychiatrist but, with whom he has no link, no engagement in a therapeutic relation-in the face with a bottle [1] shard -after having waited for his arrival for one morning. In fact, he commits its act in the frame of a psychic psychotic disturbance. During the time of the forensic examination, he appears calm, even relevant during the time of the legal expertise but, when approaching the facts, expresses a distortion of the approach to reality, in its conceptualization [2]. Perhaps in a psychic state aggravated by a context of loneliness, he had presented an autitive and somatized hallucinatory activity with persecutory thematic, persuaded that this practitioner-who moreover practises in association with a colleague- shouted insults to him when he went on his balcony which entailed, in particular, impression of modification of his feeling close to rapture, to inner, intime psychotic enjoyment. The term paranoïaque/paranoid has no't been used [3], because it could compromise the acceptance of an entry into psychotherapy already difficult to implement. Notably, if it were brought to the knowledge of the subject

Keywords: Psychiatrist; Therapeutical Relation; Impression; Psychotic Enjoyment; Psychotherapy; Stuffing

Introduction

Violent acting against a neighbor -psychiatrist but not engaged in a therapeutical relation - context of loneliness in these 63 years old, retired, having had a rather [4] chequered career as a monitor or manager of vacations or summer camps. Violent acting consisting in stuffing the face with a shard of bottle in the framework of hallucinatory activity with persecutory thematic [5].

Resume

A retired man, 63 years old, single, only son, living in his mother's apartment - hospitalized during the time of the act - having had a broken professional course online, mainly as a supervisor and monitor then , director of a summer camp for young people [6] and even a time as a salesman, knocked one morning - after waiting for him, his next door neighbor: a psychiatrist, who also worked with a colleague - with a shard of a bottle. play. In fact, he had committed his act in a context of serious psychological disturbance. During the

expert psychiatric examination, he appears calm, oriented, without mental deficit but, when approaching the facts, there is clearly a distortion of reality and in the modes of conceptualization [7]. His loneliness, his isolation has perhaps worsened a hallucinatory activity both auditory and somatic, with a persecutory theme. He remains convinced that this practitioner, lapped insults against him, when he was on his balcony [8], in particular degrading but erogenous, with modification of his existential feeling, to the point of feeling a kind of rapture, of psychotic enjoyment. with distortion of the state of consciousness to the point of falling asleep. The term paranoid was not used because, if it had been brought to his attention, it could have further compromised the entry - already conceived as difficult, uncertain - into the process of psychotherapy.

The Current Environmental and social context

Before to expose the peculiarities of the different life sequences of John, it seems important to recall the recent aspects of the

influence concerning what could be named the exposome of a lot of persons in these troubled times spanning several months affected by worrying morbidity, without underestimating, of course, the genetics aspects. COVID 19 Disease [9], determined by an emergent coronavirus characterized in terms of form, of appearance by its crown and, on the other hand, by its transmission from certain animals to human (the 7^o including 2003 SRAS-CoV and 2012 MERS-CoV) caused serious physical troubles involving great physiologic distress requiring hospitalizations and already the death of 4 million humans. It is also responsible for intrinsic psychic disorders but also related to the need for implementation of precaution, limiting the autonomy of individuals [10]. This contagious viral disease has also modified the rhythms, both diurnal and vesperal of each one, notably aggravating in the elderly and those not included in a professional activity or without active affectation or social commitment, for example retired. The worst took place for those placed in boarding or retirement homes. Generally, people have decreased their social interactions on their own to avoid vectorial modes giving rise to contagion by airborne droplets or skin contact. This for two years, without forgetting to mention the risks linked to variant-type mutation. Impacts on mental health, psychopathological repercussions have been described: anxious, depressed and even post-traumatic stress disorders symptomatology but never psychotic effects. At least, in a direct relationship but possibly by ricochet [11]. Thus, if John's mother, who supported him, and his associates, during visits from friends, which she received, had not been outsourced from the common home by her hospitalization, the personality disorders of John would not have worsened to the point of determining a decompensation leading to persecutory ruminations against a background of morbid primitive phantasm. It is in this context, that his hallucinatory eavesdropping, when he was going to relax on the balcony had led him in a register of delusional mentalization - to conceive this premeditated violent acting out [12].

The John's Biographical Story

His childhood and his adolescence times were not so happy or smooth as he first indicates literally but altered by profound parental affective changes. The feeling during the first years is very important, as wrote Melanie KLEIN. The emotional structuration of personality is acquired from the age of one year and the Oedipal complex, which is organizing the drive passionate modes may be situated between 3 and 4 years... John's parents were separated for good, when he was only one year old, and he was only to see his father again fleetingly. That one was starting another family and four children were to be born with whom he was to have no contact. He indicates that he was brought up by his mother alone, until remarriage when he was 17 years old. He added that he gets along well with his stepfather, but he must say that the maternal grandparents contributed a lot to his education when he was young. His pedagogic course must have been enough difficult, and, for instance, he got no facilities in learning English despite great efforts and an orientation to a private college. He could not obtain a certificate of second degree and nor follow up in a notarial formation. After

a reshaped professional career, even not very stimulating, not prolonged by permanent interests in everyday life, John had found accommodation with his mother, but her hospitalization sent him back to loneliness, a face-to-face encounter with himself unattractive and, even, he had evolved restructuring of his psyche. Many contemporaries of John, in their sixties, seventies and face with loneliness's condition, were able to decompensate psychically and mentally but also physiologically somatically through lack of action and referral to an existential passivity [13].

Psychoanalytic Discussion

The JOHN's psychic vulnerability arises from an early narcissistic injury, linked to intra-familial inter-relation - particularly during the emotional and affective exchange with his mother - and after with one's environment. Identifications have not been established assured in a certain way. Because of their failure, the maturing evolution of his personality, in the sense of a dynamic development facilitating his insertion, both during the period of latency and during adolescence, could not be established in a positive way. Entry into young adulthood may have been difficult and his activity with children in the context of summer camps may have reflected both regret and a tendency to renounce the demands of social adult. In his description of his stages of adult life, we do not observe the existence of a dynamic development, an easy existential adaptation, an enriching emotional life's conditions, nor any real potential for creativity. We note, in this regard, that he has not been able to lead a stable professional life, his social integration being rather mediocre, disjointed, nor any real potential creativity. His affective life seems to have been rather poor and he does not mention a worry about having wanted to start a family. Such was not the case, in this psychopathological register of President of a judicial Chamber D.P. SCHREIBER, which represents the paradigmatic case of paranoid-paranoiac delirium highlighted in the Five Psychoanalyses by S. FREUD [13]. If DP SCHREIBER was able to reach a high career's position as magistrate to the Court of DRESDE, that was not the case concerning John, who was often searching a work, even in his preferred field in the young's summer camps. Furthermore, the fact that the first one was greatly disappointed to get not the possibility to obtain descendants is to take in consideration, The impact of that part of negative event of his life may have been sufficiently to be disturbing for him, at a psychic level, including the narcissistic aspect. John does not seem preoccupied about the creation of a family and to get a posterity. The aspects related to his sentimental, affective, emotional life will be evoked without any significant resonance. While in his delusion, the President thought to be persecuted by God, John develops a delusion of persecution towards the representative of a certain authority of behavioral and social norms, also guarantor of logical reasoning. His delirious activity, fed by sensory and somesthetic hallucinations is triggered, while he is somehow a little bit outside the framework of the home, this, of course, against a background of sensitivity but, also, of existential dissatisfaction [1]. The intervention of mechanisms of primitive defense against a fantasy-fantasmization of passive homosexuality is obvious. On his balcony, he became beat, on

his balkony -symbolically loaded-he becomes beat, close to the enjoyment. He evoked a kind of feeling of derealization, of a loss of markers of the temporo-spatial senses and a proximity of falling asleep or rather of lethargy. We can't overlook here the conceptual contribution of Melanie KLEIN, for who a delirium is underpinned by a fantasy of persecution of bad aspects of partial objects. At this level, the imaginary illusion of degrading insults of the sexual lexicon takes all its sense and the value of unconsciously desired (auto)-punishment/chastisement is obvious.

Conclusion

John showed himself to be poorly compliant during the examination. His attitude of denial as to the causes of his violent acting in a psychopathological context of sensitive and persecutory psychic theme appears certain.

The opening of this act doesn't arouse any guilt and he doesn't express regret, nor empathy for his victim.

Thus, we propose the following answers to the judge's questions:

- a) The subject reveals in him psychotic uncontrolled at the logic level and that happens at the end of a brief hospitalization, receiving no therapy.
- b) Thus, his illusion/hallucinations acoustico-verbal of the persecutory and sensitive register: insults with degrading sexual connotation and somesthetic effects binded to his fantasmatic disposition led to a premeditated violent act, leading him to wait for the arrival of the one, who has to be his victim., is to refer to the C.I.M. 10 nomenclature of psychic disorders used in FRANCE in F 22.0.

These anomalies are related to the behavior of the subject

This person doesn't report an objective feeling of guilt in relation to his act because of his persecutory psychotic disorders and is recouring to primitive regressive mechanisms. He presents a dangerous state with risk of recurrence. He is not accessible to a penal sanction because of the abolition of the discernment

and the control of the acts but, the civil implication is not to underestimated, in particular acceptance of a therapeutical follow-up, his commitment could prove to be precarious. An injunction of care is opportune within the framework of the social-judicial follow-up.

References

1. Scharbach Hugues (2019) Expertises psychiatriques et médicopsychologiques au pénal tomes 1 et 2-2ed: Ed. Alexandre Lacassagne LYON. tome 3, Ed. ESKA PARIS: global pp. 480.
2. Scharbach Hugues (2020) Psychopathologicaal Research by Children, teenagers and Great Adolescents with Dysharmonic Features of the Personality's Spectrum of Entangled Borderline with Dissocial Comportment Leading to Transgressive Acts, sometimes in an Antisocial REGISTER. J Clin & Commun Med 1(4): 95-103.
3. Aubut J (2019) Les agresseurs sexuels. MONTREAL ed. Chevaliere pp. 140.
4. Jonas C (2006) Quelques réflexions sur l'expertises psychiatrique dans le procès penal. Ann Med Psycholog pp. 124-130.
5. Millard F, Du Joreucq J L (2005) Evaluation de la dangerosité du maladee mental psychiaatrique. Annales Médico Psychologiques 163: 846-851.
6. Dubec Michel (2008) Violence pathologique, violence antisociale Ed. ERES pp. 209.
7. Jammé Philippe (1999) De la psychopathologie aux organisations intermédiaires à expression comportementales. Neuro-psychiatrie de l'enfance 43(5): 562-569.
8. Ladame F (2020) Etats-Limites et Adolescence La Psychiatrie de l'enfant. 41: 545-562.
9. Klein Mélanie (1967) La criminalité, In Essais de Psychanalyse PAYOT pp. 307-311.
10. Winnicott D W (1969) La tendance antisociale in De la Pédiatrie à la Psychanalyse, Ed PAYOT pp. 124.
11. Scharbach Hugues (1983) Approche Compréhensive des Etats Limites chez l'adulte et chez l'enfant: Rapport du Congrès de psychiatrie et neurologie de langue française, LXXXI Poitiers, ed. MASSON pp. 238.
12. Scharbach Hugues (1986) Auto-mutilations et auto offenses. ed. PUF coll Nodules pp. 127.
13. Scharbach Hugues (2000) grupos terapeuticos de contos em Psychiatria infantil Infant-Rev. Neuro-Psychiq. Da Inf E Adol, 8: 130-135.

 This work is licensed under Creative Commons Attribution 4.0 License

To Submit Your Article Click Here: [Submit Article](#)

DOI: [10.32474/JCCM.2021.03.000163](https://doi.org/10.32474/JCCM.2021.03.000163)



Journal of Clinical & Community Medicine

Assets of Publishing with us

- Global archiving of articles
- Immediate, unrestricted online access
- Rigorous Peer Review Process
- Authors Retain Copyrights
- Unique DOI for all articles