

DREAMS

IN SICKNESS AND IN HEALTH

MEREDITH SABINI

Have you ever had a dream about a physical condition, oncoming illness, or psychosomatic symptom? We do dream about our bodies, though not as often as one would think we might, considering that we live in our bodies day and night. But perhaps we don't recognize

“somatic dreams” because the symbol system that the dreaming mind uses to portray the vegetative and organic aspects of our existence has not yet been worked out. We are pretty good at elucidating the metaphors of our psychological selves in dreams, but the biological, interpersonal, and cultural dimensions of dreaming have received significantly less study.

This subject came to life for me in the 1970s when I began having dreams during analysis that concerned my psychogenic allergies. Intrigued by this phenomenon, I went to the local university's medical library and unearthed publications on dreams about organic and psychosomatic conditions of all kinds. It turned out that this topic was well recognized and written about in the 1940s and 50s, and there was more openness to the value of dreams for diagnostic information as well as to the psychosomatic perspective than there has been in recent decades.



Henry Sultan, Eight and a Half Graces (Triptych, acrylic on muslin and board, 45"x74", 1997)

Much of the research that had been done was in the Standard Social Science Model (SSSM): a patient population was chosen and their dreams collected and compared with a so-called control group; dreams of, say, asthmatics or epileptics were compared with subjects who did not have those conditions. The results were sometimes interesting in a general way, but it was rare that this approach resulted in any dreams specifically about the somatic condition itself.

I began asking people informally, when I knew they had some physical condition or illness, if they'd ever dreamed about it. The results were surprising: many had. I set about keeping track of these in a more systematic way. I also came across a reference Jung made to having analyzed 41 dreams that forecast grave illness or death. Two cases were sent to him by physicians asking for a differential diagnosis: was the illness

mainly organic or psychogenic? One was a case of periventricular epilepsy, the other, neuromuscular degeneration; dreams were sent along with the medical workup. At the Tavistock Lectures given to a medical audience in London in 1935, Jung described how he'd arrived at the

diagnosis that both cases were organic. When questioned further about the use of dreams for diagnostic purposes, Jung hedged, saying, “It is not possible to describe to you briefly the criteria by which I judge such dreams. . . . These things are really obscure.” (Published as *Analytical Psychology: Its Theory and Practice*; pp. 72–73).

The dreams I was having were not especially obscure, and some, in fact, referred directly to the confluence of psyche and soma in the etiology of my allergies. So I decided to pursue collecting dreams about illness and bodily conditions in order to find out, as specifically as possible, how the dreaming mind tends to symbolize bodily functions and stages of illness. Knowing this was exploratory research, I designed it to focus directly on the dreams rather than limit it to a given syndrome or patient population. My methodology was simply

to ask people who had visible, known symptoms or a diagnosed condition if they had any dreams related to these. The dreamers would know if they had the flu or migraines or Parkinson's; they would also know if the symptoms of their condition appeared in the manifest content of a dream. Later, I broadened this to include dreams that coincided with the onset of illness and dreams that referred to illness in advance of its manifestation. Based on a collection of 60 dreams, I published several articles in the early 1980s; there are now over 250 dreams in this collection.

The questions with which I approached the dreams were: In what way is a bodily condition represented? Who in the dream has the condition, if other than the dreamer? How might the severity of a condition be indicated? Were any psychodynamics involved? Was any treatment suggested, any prognosis? Rather than using available templates from content research and superimposing them over the dreams, a method that has serious drawbacks, I elected to let the dreams themselves show me the themes and categories. And they did.

It was from a long sequence of dreams that took place throughout ten years of Jungian analysis that I came to understand just how precise, detailed, and insightful dreams about our bodily conditions can be. I had had atopy since childhood—a combination of hay fever, eczema, and dermatitis—and though this was not the reason for my starting analysis, it became one of the focal points. Were those allergy-related dreams to be written up sequentially, they would give a coherent and meaningful account of the ups and downs, highs and lows, of a healing process. I will tell just a few selected dreams that demarcate specific stages in the healing process as it unfolded.

This was the first dream, which came within a few months of beginning analysis:

I am telling my analyst how my symptoms reappear at certain points in

analysis. I mention my idea of relating allergy to the dreams of my car being in water, paralleling my feeling flooded with allergy. I am upset, crying.

There is already an observing dream ego keeping track of when symptoms arise, so they can be linked to the analytic work. The dream offers a motif or symbol for the allergy experience: the car-in-water; I would later discover that other researchers had noted this particular motif in dreams of those with asthma and allergy.

A year later, a dream gives more information about the psychosomatic background of the allergies. It also shows the resistance to treatment:

My mother asks me to help a young man she knows who has just returned from Viet Nam and has lots of physical troubles, some of which could be psychosomatic. I talk with him. He is uneducated and undeveloped. I mention that the symptoms he has can be psychosomatic, but he gets upset and shows me a fist in anger. I feel badly, realizing I've jumped too far ahead. I tell him I've found it a relief to know if an illness is psychosomatic, but if he doesn't feel that way, we won't talk about it. I ask to know more about his problems.

This dream introduced some curious elements. It is a war veteran who has symptoms, and I am apparently his doctor; I think the condition is psychosomatic but he won't consider that. Whose resistance is this and why do the symptoms belong to this man? These are the sort of intriguing issues that will arise as psyche and soma enter into a dialogue. Suffice it to say that the dream is hinting that the symptoms may have their origin in a "battle."

A year later, a dream shows me as the patient and the psychosomatic approach tolerable, even efficacious:

I am with the allergist and nurses. I say that my allergies are going away now, perhaps 10 percent with each shot. I knew they would, and I cry tears of relief and pleasure. I tell them that I

had these shots once before when I was young, but only now, when the psychological aspects are separated out, can they help.

It was around this time that I came to realize that my allergies contained central parts of my life history: they had begun when my mother remarried, when I was four, and took me away from my grandparents' house to live with her and her new husband, an arrangement I was "allergic" to. My skin and nose were expressing the emotions of grief at the loss and irritation at the new family situation that, at four, I could not express. The dream contains an important truth: that bodily symptoms cannot be treated medically as long as the body is holding an important story. Once that story can be told and the accompanying emotions felt, the symptoms may be amenable to treatment.

True healing is not a simple matter of catharsis, of purging painful feelings so they are no longer present. It's a matter of integrating the experiences that were involved, and this can take quite some time. In fact, my allergies did not go away 10 percent with each shot, though they lessened; the psyche circled around the issues, the allergies ebbed and flowed, and so did the dreams. Two years later, a short dream gave me the advice I needed to stay with the lengthy healing process: The dream was a statement *that if I can be connected to the spirit behind the somatic problems, I wouldn't be bothered by the symptoms. So I am told.*

This dream implies that the symptoms are the surface of a larger dynamic, the tip of an iceberg, whose magnitude I am trying to fathom. What would the "spirit behind the problems" be? In part, it would be the life context that brought the symptoms about; it would also be the healing that is going on at various levels. One might say that it is the faith something is happening. This dream invited me to look further, look deeper; the dream itself seemed to come with the voice of wisdom.

The Purely Organic

I'd like to offer examples of dreams that pertain to conditions that are primarily organic in origin. The first comes from Jack Dreyfus, founder of the Dreyfus Fund. At midlife, he found himself plagued by symptoms of depression, which were not alleviated by prescription medications or psychotherapy. He also had occasional outbursts of excessive anger, and noticed a strange tingling in his mouth, along with a metallic taste. One night, he dreamed that he "felt somehow electrically frozen into immobility." The dream led to a discussion with his physician about whether there could be abnormal electrical activity in his brain. In view of Dreyfus' symptom picture, the physician wondered if he had a form of epilepsy. This diagnosis was confirmed and he was treated successfully with Dilantin.

The following dream focuses less on the symptomatology than on a treatment plan. The dream is from the well-known physician and psychiatrist Judith Orloff and appears in her autobiographical book, *Second Sight*. For six months, she had been suffering from recurring severe sinus infections; neither antibiotics nor drainage of the sinuses was effective, and her physician wanted to do painful x-rays and an MRI. The night before the scheduled x-rays, she had this dream:

I am lying in a medical office on a flat wooden table, my body covered by a cotton sheet. I feel at peace. There are a number of thin silver needles inserted about an eighth of an inch into my skin, over various parts of my head and sinuses. In the next room I can see my mother smiling, looking youthful and healthy, giving me the go-ahead signal with her hands. Relieved by her presence, I know I'm in the right place. An acupuncturist stands beside me, assuring me that these treatments will make me feel better.

Although she knew about acupuncture and had thought it might help, she was concerned it would take a large time commitment, and had opted instead for

the more conventional route of antibiotics. It was because of this dream, how succinct and precise it was, and the positive presence of her mother in it (who was also a physician), that Orloff cancelled the tests and went to a highly recommended acupuncturist. The treatment took three months and was successful. Orloff comments, "The feelings of well-being are easily recognizable signs of healing that we can look for in our dreams. There is a healing instinct within us that can manifest itself in our dreams. I believe that my recovery began in this dream." (p. 23) Her book has other examples of dreams related to illness and healing, and I recommend it to readers.

A fascinating instance of a dream that tried to convey diagnostic information to both the patient and his doctor comes from *A Leg to Stand On* by the famous neurologist and author, Oliver Sacks. It chronicles the fall he took over a mountainside while hiking in England; though no bones were broken, his right quadriceps was torn off and there was significant nerve damage, which went undetected for some time. Sacks tried to convey to his physician that something was wrong with the leg beside the torn quad, but his concern was dismissed; even when physical therapy failed to get the leg working, the medical doctor in charge overlooked the problem. Sacks then had a dream "of peculiar horror" that seemed to him literal and undream-like:

I am on the mountain again, struggling to move my leg and stand up . . . the leg was sewn up, I could see the row of tiny neat stitches. I think, "I'm ready to go!" But the leg wouldn't budge . . . not so much as the stirring of a single muscle fiber. I felt the muscle—it felt soft and pulpy, without tone or life. "Heavens above! There's something the matter—quite dreadfully the matter. The muscle's been denervated . . . the nerve supply's gone." The leg lay motionless and inert, as if dead.

Though he became more vociferous about the problem with his leg, Sacks, curiously, never told anyone the dream itself, though it actually contains the

diagnosis: denervation. In subsequent weeks, as he goes through physical therapy to no effect, his dreams become very plain in their depiction of his condition: he dreams that though the cast is solid, his leg is plastic or chalk or stone; that his cast is not solid but friable like sand; that the cast is hollow, no leg inside. Only when the medical staff entered his room and found his leg has fallen off the bed, and Sacks has no sense of this, was the denervation recognized.

These dreams that relate to existing organic conditions have certain features in common. The dreamers are observers but otherwise not active in the dreams. Much of what takes place is just as it would be in waking life. The dreams are rather plain; they lack narrative storyline, unusual or fabulous elements, and are "just so." This cluster of features is one of the main characteristics of the dreams in my collection that pertain to organic conditions: they have an objective quality.

Illness Dreams—With a Story

Now let's turn to dreams related to existing somatic conditions that do have a narrative storyline and show the dreamer to be involved in the genesis of the symptoms. The first comes from a man who wrote to tell me about the unusual parallel between a dream, his marital situation, and the onset of an illness. For some time, he and his wife had had a love-hate relationship; four nights before the following dream, he had a fight with her in which he felt "overcome by an intense fiery anger." That night, he dreamed:

I am sitting in church with others and see my wife walk across the street into a building. Suddenly the building bursts into flames. We realize she is gone forever, and cry.

The next day, he came down with a bad case of influenza including a high fever, which required medical attention. We can say that the high fever, his emotional rage, and the building on fire are all of a piece. The visible behavior, the psychological heat, the physical heat, and the dream fire all signify a core theme in

this man's life; none causes the other but rather they all belong to the same psychodynamic constellation.

In this next example, there is also a parallel between the emotion enacted in waking life and the dream image. This dream contains the implication that the dreamer may have been involved in the genesis of the symptoms. Jungian analyst James Kirsch was asked to see a young woman who was paralyzed in her arms and legs with multiple sclerosis, and to give an opinion. When he asked about her dreams, she told this:

I am trying to kill a big tarantula. I step on it again and again but it seems impossible to kill the animal. At last I succeed in stepping in such a way that its legs are stretched out in complete paralysis.

During the interview, Kirsch learned that she had discovered her husband was having an affair and, rather than respond to this directly and openly, she intentionally suppressed any and all emotion. Kirsch noted that the spider would be a suitable symbol for the autonomic nervous system; and the way the spider was splayed out corresponded to her visible symptoms.

Although it may seem bad news that the dreamer has a role in the etiology of a given condition, it also may leave open the possibility that healing could take place through a change in the dreamer's attitude.

The Coming of Illness

It is well established that dreams can foretell the coming of illness. What my research contributes to this discussion is emphasizing the importance of any figures in a dream that are known to the dreamer and have the same condition; this can have relevance to both diagnosis and prognosis. The first example of this concerns V, an author and writing

teacher in her early 60s and in good health. Not long after her friend B had a bout of breast cancer, V had this dream:

I'm looking at timepieces with B, who has just recovered from breast cancer. I look up at the watchmaker. He says to me, "You'll have it, too, but you'll be alright."

The watchmaker is a classic personification of the hand of destiny, which knows how much time we have in life and weaves our particular fate. It was two years later that V got the diagnosis of uterine cancer, and she was very grateful for the kindness of this figure in letting her know it would not be fatal. There is a hint in the dream that B might not be alright, and in fact she had a second recurrence of cancer, though it was treated successfully.

... perhaps we don't recognize somatic dreams because the symbol system that the dreaming mind uses to portray the vegetative and organic aspects of our existence has not yet been worked out.

The next example was sent to me by a woman who had been in a dream group and in Jungian analysis for several years, and was familiar with the objective dimension in dreams. In November, 1979, she dreamed:

My friend C and I are making soup together. As we were done, she started putting a number of crabs into the pot.

C was a close friend of hers who had died the previous spring of cancer. She told the dream to her analyst, who dismissed it, saying, "You aren't the cancer type." Hoping he was right, she dropped the matter. Then, in February, 1980, she felt a lump in her right breast and, remembering the dream, immediately went to the doctor. The breast was cancerous and was removed within the week. She has lived a long time without a recurrence.

The purpose of her friend being in the dream, then, was not to convey that she too would die, but that she too might get cancer. She would be in the same "hot water" as her friend; the friend added cancer-the-crab to the cook pot, leaving the dreamer "in the soup." It was the shock that she might go the same way as her friend that precipitated prompt action once the lump was detected. What outcome might there have been if she had seen her physician sooner after the dream?

I too had a dream forewarning of an illness, which came about a year in advance of rapidly growing uterine fibroids that required surgery. This was the dream:

Through the living room window, as I look out into the forest area, I see a cloaked figure coming toward me. She moves along several inches above the ground. I am gripped by the intense fear that this is Death come for me. The figure motions with her hand for me to come forward. I do. She lets me know that I will be taken away from life by illness in order to learn more about spirituality and emotional expressiveness.

I was enormously relieved that it was not my time to go. My mother had had fibroid surgery at about the same age that went well, and I felt mine would also. I was struck, though, that this message was delivered via visitation and that I would be taken away from life for a while. The dream gives a meaningful purpose behind the illness and healing process.

Illness as Healer

I'd like to illustrate the theme of illness as a mystery by recounting author Brenda Peterson's fascinating experience with some odd somatic symptoms, her varied modes of tending them, and the

healing dream that eventually came. (The full account of this appears in her book, *Nature and Other Mothers*, Harper Collins, 1992, pp. 31–36).

For a month, Peterson had been plagued by high fevers and strep throat; then, at Thanksgiving, spots broke out on her face, arms, and legs. The ER doctor said it was probably an allergic reaction to antibiotics; her regular physician thought it could be a form of roseola or psoriasis, and gave her unlimited cortisone; and her friends from the South, where she'd grown up, claimed it was "fever rash," a children's disease. For months, Peterson went around looking as if she had chicken pox, as the spots would vanish and then reappear "with their own logic."

Peterson called and spoke with her sister, a surgical nurse, who reminded her of the day she'd sat on a wasp nest at their grandparent's home. Vergie, their step grandmother, quickly put Brenda in a tub of cool water with comfrey flowers, and ran her hands lightly over the girl's skin, talking to her skin tenderly and coaxing it down from its fear state. Vergie was a knowledgeable beautician who not only did hairdos but gave clients hand and foot massages and prepared the town's corpses for burial; skin was something she knew well, and tended well. As Brenda rested in the cool water, Vergie told her soothing stories. By morning, all the spots from the wasp sting were gone. Remembering this experience, Peterson set up regular massages for herself. She also started gentle yoga exercises, which made her skin feel as if it were expanding, almost breathing.

It was her yoga teacher who told her that skin is the body's largest organ, more important than the heart. Peterson became intrigued by the meanings of skin in a broader sense, and began studying its symbolism: the peel of pomegranate, symbol of immortality; the soft hides our species first wore for warmth; the animal pelts worn in ceremonies for spiritual power. Her illness became a call, and Peterson responded, as if following the trail of bread crumbs into the mysterious forest of mythology. It was about six

months after the onset of the original spots that this healing dream took place:

All around me stood ancient Chinese doctors, men and women, their faces fragile as rice paper, skin luminous as the translucent surface of water when the sun shines on it just so. They were laughing and running their hands up and down my body. I recognized Vergie among them; then I relaxed, resting as they smiled and raised their robed arms. On their sleeves were brilliant symbols and moving pictograms. I lay beneath them, laughing.

When she woke, her fever had broken and the spots were almost gone; she felt a radiant well-being, as if she'd grown a new skin during the night. Some years later, a friend introduced her to the ritual of *jin shin*, an ancient, feminine approach to hands-on healing, and she recognized the parallel with her dream treatment.

Conclusions

Peterson was intensely bothered by her symptoms at first, but she found her way to live with them and care for them. Later, she let the symptom lead her into novel emotional and intellectual territory, so that her condition took on meaning. We never learn whether the medical diagnosis ever clarified, but she did receive a healing—within a dream itself. This was the mystery of the ancient Asklepians: the penitent went through the cleansing and purification rites, then slept in the sanctuary and waited until healing came in a dream. This universal pattern still takes place in the psyche today.

The title of this essay is taken from the traditional wedding vows: "For better, for worse, for richer, for poorer, in sickness and in health, till death do us part." We have a marriage of sorts with our bodies, an arranged one perhaps; and we go through similar phases of appreciating our bodily companion at times, and then, at others, being intensely frustrated with its limitations. It might be useful to imagine the marriage as being between psyche and soma, and consider the ways they interact, conflate, intertwine, and

merge into symptoms. Jung told the Tavistock audience, "Because of the possible unity of the two things, we must expect to find dreams which are more on the physiological side than the psychological, as we have other dreams that are more on the psychological than the physical side." (*Analytical Psychology*, pp. 72–73) British analyst Michael Fordham viewed psyche and soma as two aspects of one unity: "If we follow the idea of the psyche being at all points related to physical processes, we can begin to conceive of the Self as representing a state of wholeness which includes soma and psyche." (*Spring Journal*, 1974, p. 173)

I will close with a dream that came early in my career and offered a guideline for how to evaluate dreams. I have found it to be enormously reliable and relevant to dreams of all kinds:

I am giving a talk to a gathering of mental health professionals on how to assess clients' dreams and watch for trouble signs. As a guide, I tell them that they can evaluate dreams naturalistically. For example, if there is a fire or flood or danger of some sort, they should take it as if it's a picture of the client's situation. They can use judgment as to whether the situation as depicted in the dream is natural and ordinary or whether it is problematic and dangerous.

This was not anything I had thought up but came from the dreaming mind, in one of those rare moments when it tells us something about itself. I hope its wise common sense approach is as useful to others as it has been to me.

Meredith Sabini, Ph.D., founder of The Dream Institute of Northern California in Berkeley, specializes in dream training and consultation.

