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## VISUAL HALLUCINATION OF THE SELF\*

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From remote times philosophers have been struck by a most unusual phenomenon which until recently remained unexplained and almost unbelievable: the vision of one's double, the visual hallucination of the self. This experience is a sensation the patient has of seeing his body image as reflected in a mirror.

As you know, this strange phenomenon has been interpreted in many different ways and has also brought forth many literary works, particularly in Germany during the Romantic period of the eighteenth and nineteenth centuries. Thanks to the knowledge we have acquired about our body image and its distortions through diseases, deep research work on this phenomenon has become possible. That is why I have chosen the visual hallucination of the self, or autoscopy, as the theme of this lecture.

Let me first remind you of the meaning to be given to this word "hallucination." For the founder of psychiatry, Esquirol, hallucination means a perception without object. Any man who believes he can see his own image appear in front of him when there is no mirror to reflect it is therefore subject to a visual hallucination of an autoscopic character. A great number of strange and quaint features go to make up this phenomenon of autoscopy.

### "With the Eyes of the Mind"

First, the suddenness with which it appears. The vision comes unexpectedly while the patient is wide awake, more often when he is lost in thought or when he is drowsy. This was the case with Goethe, who wrote just after he had left his fiancée: "I saw myself, not with the eyes of the body, but with the eyes of the mind," and he added: "When I shook my head at the sight of this delusion it disappeared."

A young girl, a case of Selliers', had been walking in Paris at dusk in a dreamy state, when she suddenly saw in front of her her own image. Another young girl, also a case of Selliers', who seemed quite normal although there were slight signs of hysteria, one evening saw her own image as though in a looking-glass. "I would even have drawn back," she said, "if I had not realized that there was no mirror."

There is also the case of a young girl who was sitting lost in thought, half dreaming, near a lamp-lit table,

and who suddenly saw her own image appear several times in front of her.

An Austrian author who has done remarkable work on autoscopy relates that one evening, as he was walking home half-asleep, he saw in a window the appearance of a man of his own age looking at him. He wondered whose this expressionless face watching him could be, and gradually he became convinced it might be himself. Indeed, he felt that he was emotionally linked to this strange apparition.

### Source of the Hallucination

It is somewhat remarkable that, although the state of sleepiness seems to be specially favourable to the autoscopic hallucination, the state of authentic dream is only exceptionally the source of this phenomenon. Yet some workers noted that sometimes this autoscopic image came into the moving pattern of the dream. A peculiar fact is that the dreamer's image comes to his mind with a deep feeling of sadness or with deadly anxiety. I remember reading in some old book that a man had been frightened during his sleep because he had seen near his bed the double of himself, in agony.

I recently received the confession of a man, seriously ill, who was visited during several nights by the image of his double. This offered mainly a back view, wearing black, ill-fitting clothes. This double seemed depressed and obviously under deep mental stress. And the dreamer thought: "There you are. Yes, it is you. How broken down, wretched, and miserable you are! Death awaits you."

On another occasion our patient had the impression that his body had split in two and that this double was lying very close beside him in a state of imminent death. Soon afterwards the dreamer had the impression that his double was dead, already in its coffin awaiting the funeral. When the undertakers came to take it away the patient screamed, "Not yet!" and woke up in a state of deep distressing fright.

### Its Form

While autoscopic hallucinations often come more readily to patients when they are in a state of drowsiness, these visions also appear to subjects whose minds are wide awake, so that we possess a great number of detailed records of this form of hallucination. Usually the image seen is very clear but not vivid in colour. When the subject attempts to get near it the image draws

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back or fades away after having performed movements similar to those of the original.

Sometimes the hallucinatory image appears very thin, as if it were a projection on a screen; at other times, on the contrary, it would seem to be made of a jelly-like or glass-like substance, so that the patient can see everything around him through this ghostly illusion, which would be impossible if the image were real. This is not a constant rule, and often the phantom seems to be made of an opaque substance, not transparent to the eye.

One would say that such a strange phenomenon must seem unbelievable and even unthinkable to a reasoning mind. In fact, how can one admit that a subject apparently capable of judgment and self-criticism can come to believe such a vision to be a reality?

Here I must say that all those who have been victims of autoscopia have not always been immediately convinced of the reality of the image which appeared in front of them. Some, before believing in it, hesitated, and even criticized the authenticity of the vision, but in the end it became almost compelling.

This shows, to my mind, that it is an error to want to set up a barrier between the hallucinations which are questioned and admitted to be illusions of the senses, or a hallucinosis, and, on the other hand, the hallucinations which are not criticized and which would be the only real hallucinations for some authors.

#### Close Connexion between Image and Subject

There is one phenomenon on which I want to enlarge because it seems to be peculiar to autoscopic hallucinations. Never, in fact, do we find it in other sensory hallucinations. It is that the subject not only believes he can see his own image as if it were reflected in a mirror but also has the knowledge that in this image there is a part of himself: he feels connected to this image by spiritual and material links. The life filling it is his own life; indeed, he has the illusion that he lives in this image, which thinks and feels like himself.

No one has given a better description of this intimate relationship between the image and its original than the poet Alfred de Musset in "La Nuit de Décembre":

"Partout où j'ai voulu dormir,  
Partout où j'ai voulu mourir,  
Partout où j'ai touché la terre,  
Sur ma route est venu s'asseoir  
Un étranger vêtu de noir  
Qui me ressemblait comme un frère."

The intimate relationship between the original and the vision is so close that some authors maintain that the most important fact is not the visual hallucination but the notion of "belonging" or of material and spiritual dependence between the image and its object. Therefore the delusive figure, the double, feels, thinks, acts in a manner similar to that of the subject himself and sometimes talks to him in a language which is his own language, although, as is the case in dreams, the words expressed are not perceived by the ear but guessed more than heard. And yet I have found in the psychiatric literature the case of a subject who was able at will to make his own image appear in front of his eyes, as though in a mirror; it would make the same movements and say words that he would hear and that he knew before they were uttered. But this patient had auditory hallucinations and transferred them to the autoscopic image.

Wigan, in the last century, refers to a similar case in which the subject could summon his own body image, which would laugh as he laughed.

#### Anxiety

While the state of drowsiness facilitates the onset of autoscopic hallucination, there is another condition often seen at the source of the phenomenon—it is anxiety. For instance, the following case published by Parioli shows the importance of the affective state in autoscopia.

A young woman, apparently free from all worry, was working one evening in a large room divided in two by a curtain. Suddenly she thought she could hear one of her children getting restless in his bed; she drew the curtain and went into the other room, where she saw her own image bending over her child's bed, dressed in clothes she had not worn for some time. "The face of this phantom was turned towards me," she said, "and was excessively sad." In trying to explain the cause of this peculiar phenomenon, certainly capable of causing anxiety, this woman remembered that three months before she had lost a child whose body had been placed on this same bed and that she was then dressed in the clothes worn now by the apparition.

I could mention many more similar cases. There is the story of that unfortunate doctor with an incurable disease. One day in the passage of a house he was entering for the first time he saw his own image. This happened several times afterwards, and the doctor noted the strange fact that on each occasion the hallucinatory image made the same gestures as himself and at the same moment.

While in most cases the phenomenon of autoscopia is an occasional occurrence, there are nevertheless cases whose characteristic is the prolonged duration of the frequent repetition of the body image. And one can easily guess that persistence of the double of oneself is enough to disturb a person's mind and also to stimulate the imagination of writers.

The problem of the double must therefore be approached both through literature and through medical pathology.

#### The "Double" in Literature

The phenomenon of the double as we find it in literature has long been considered to be a purely intellectual notion or the result of imagination. But in fact all we know to-day shows that nothing is created that has not been more or less deeply felt.

Many are the writers, novelists, philosophers, or poets who have used the image of the double in their work. First comes Aristotle, the greatest philosopher of ancient Greece, who tells the story of a man who could not go for a walk without seeing his own image coming towards him. Wigan and Michea give similar examples of subjects permanently followed by their shadows or doubles. I have already mentioned de Musset.

The double is also used in *Tales of Hoffmann* (story of the lost reflection, for example), *The Classical Stories of Chamisso* (Peter Schlemyl), Hans Andersen's *Tales*, *Hesperus* (Jean Paul Richter), *Le Dissipateur* (Ferdinand Raimund), *Notturmo* (Gabriele d'Annunzio), *The Portrait of Dorian Gray* (Oscar Wilde); also in the *Tales* of Edgar Allan Poe (especially the singular one of William Wilson), Steinbeck's *Great Valley*, and more recently Robert Hichens.

All these authors have introduced the character of "the double" to give more colour to the tales and to

stimulate the reader's imagination by showing him the strangeness of life and the complexity of the human mind.

Of all the writers who have mentioned the double in the adventures of their imaginary characters, that genius of a novelist Dostoevsky is undoubtedly the one who has offered the most complete description of it. The image of the double is already outlined in works such as *The Idiot* and *The Brothers Karamazov*; but probably Dostoevsky had been particularly haunted by this phenomenon, as he devotes to it a very illuminating tale, the title of which is none other than *The Double*. He tells the following story.

A man called Goliadkine, a meticulous clerk, one morning made some extravagant purchases, and talked to people in involved sentences, with a feeling that everybody was spying on him.

One evening this man goes into a ballroom uninvited. The party is celebrating the engagement of the daughter of a Councillor of State. He acts in a most eccentric manner, and a group of people question his behaviour. At about midnight he departs hurriedly. We find him again wandering in deserted streets. The weather is foul. When nearing the Israilowsky bridge Goliadkine has the feeling of someone following him, watching him, and whispering to him in a staccato voice. Fighting through wind and snow-storm, Goliadkine meets a man he believes he knows. He looks at him, then suddenly sets off after him. This man is going towards Goliadkine's house, enters it, sits on the bed, and welcomes Goliadkine. Then begins the drama. Staring wide-eyed and with his hair standing on end, Goliadkine is scared and shakes with terror, for there is no possible doubt that the stranger is himself. Another Goliadkine is sitting there facing him.

Next morning our hero goes to his office, and there, working at his desk, is his double, the other Goliadkine. "It was really myself," said Goliadkine: "same size, same build, same baldness. In everything he corresponded completely to myself."

Goliadkine's mind is greatly disturbed. How can one understand these happenings, this splitting of one's outward appearance? All this is incomprehensible to him, and he wonders if it is not a dream.

This state of uneasiness is obvious to his colleagues, who press him with questions, and remark that he has changed, that he looks ill. One of them reminds him that this phenomenon of the double is well known: "The same thing happened to one of my aunts," he said, "but when she saw herself in front of her double she died"—a strange manner of comforting the unhappy Goliadkine.

In spite of all his efforts to shake off this vision, Goliadkine cannot rid himself of his double. This other self will not leave him alone. It copies exactly all his movements; it bends down when he bends down, walks when he walks. Yet sometimes the double contradicts him or laughs at the real Goliadkine.

Then comes the phase of persecution. Revolt and hatred come to Goliadkine, at the same time anxiety at the thought that the double might harm him and even use poison to kill him.

After numerous extraordinary adventures our hero's mental agitation increases to the point that one day, going to a reception to which he had not been invited, he believes he can see a thousand Goliadkines appear in front of him, move oddly about, and surround him. The police are called, while the double whispers, "It is the doctor." He then faints. In the conveyance taking him to an asylum the attendant tells him: "Don't worry any more; from now on you will be kept by the State."

I have given you some details of this tale of Dostoevsky's because in the story we are shown what happens in real life. Goliadkine's adventure is a true

story. What do we find in it? That a neat methodical man is suddenly taken with megalomania and makes absurd purchases, partly realizing that he is not quite himself and that he does it under the impulse of a power foreign to his personality. While undergoing a medical examination he gets confused and wonders why he is at the doctor's. Then come the extraordinary adventures with the double, then degradation in dementia.

The whole series of these events allow us to conclude that Goliadkine was showing signs of an organic psychopathy. In the same way Guy de Maupassant was also visited by the apparition of his double, was subject to persecutions and hallucinations, and, finally, became insane. And in Kafka's famous novel *The Trial* we find the hero in a very similar state.

### A Personal Case

For many years I have personally followed the case of a young girl who had a vision of her double nearly every night. This is how this phenomenon occurred. After she had gone to bed she felt as though she was subject to a spell and went into a kind of trance, during which she could be examined, because she was in an irreversible state, quite different from sleep.

Very often her body halved itself, and she then had her earthly body, which remained in the bed, and her astral body. This latter was savagely wrenched from her and taken into the astral sphere, but she could feel it and see it in the grip of Satan. The Devil would torture it in a thousand frightful ways, would shoot at it with a gun, would throw it into a bush of thorns, surround it with snakes, and finally—and this was the most horrible of all, because she was a good and pious girl—he would inflict upon it sexual outrages.

The division of her physical and mental personality was a torture to her, and in her trance she would implore Satan to give her back her double, to "redouble" her. When this double was given back to her, she said she had an unpleasant feeling of a dead skin being held against an open wound.

What is very instructive is the fact that this young patient had had epidemic encephalitis a few years before this phenomenon of the double began to appear.

Facts of this kind show that the vision of the double is not a romantic or fanciful invention but a pathological reality.

### Diseases which Can Produce the Phenomenon

I could tell you of a number of cases which show the autoscopic vision of the double in many different diseases of the central nervous system.

First, in epilepsy. As Hughlings Jackson and his disciple, Kinnier Wilson, used to say, epilepsy is surely the disease which teaches most to the neurologist as well as to the psychiatrist. Lemaître, Charles Féré, Griesinger, Meyer, Hagen, among others, have published numbers of cases of epileptics who were visited during their fits by apparitions of their double. Let us note that the vision is witnessed sometimes by the patient himself who has not completely lost consciousness, sometimes by others present during the patient's fit. His behaviour during the paroxysms, his language, leave no doubt about the fact that it is himself he is seeing. An odd fact is that for the same patient the vision appears always in the same manner and with the same shape. Let us add that sometimes the subject gives to his double his own sensations. Thus a patient of Féré's used to shout during the twilight period after the fit, "Give him a cigarette. Light it; the poor man has no right hand. Rub his hand; his fingers are pricking."

He was himself at the time subject to post-paroxysmal paralysis of the right side.

In a patient of Nasse's, this is how things happened: a light seemed to surround the patient, then out of it appeared a shape similar to himself and dressed like himself. It went across from right to left in the visual field, then disappeared.

In other cases the apparition of the double comes after a hallucination of another kind. Thus, in a case published by Monet the patient first had nausea, then the double appeared in front of him.

Infectious diseases, and especially typhus, seem also apt to produce this strange splitting of personality. I recently saw a young woman who was taken, the day after her wedding, with acute mental confusion and agitation. This patient thought she could see hands and faces on the wall of the room. When she was quieter she had the feeling that someone was standing behind her chair. She turned round and saw a young woman in the white dress she had worn the previous day, and she realized that this strange visitor was herself.

One of my colleagues was going to hospital one morning. He was tired and shivery. Suddenly he saw before him a man walking with difficulty. He realized he knew this man. It was himself. When he reached the hospital the vision vanished. (Sivadon.)

This phenomenon of the double can be produced by many other diseases of the brain besides epilepsy. It appears in general paralysis, in encephalitis, in encephalosis of schizophrenia, in focal lesions of the brain, in post-traumatic disorders; but what I want to lay stress upon is the fact that the apparition of the double should make one seriously suspect the incidence of a disease.

#### Literary Genius and Mental Abnormality

No doubt one can object that if so many authors have indulged in a description of the phenomenon one cannot consider them all to be ill or insane. Although I do not want to generalize to excess, let me remind you that all the writers who best described the vision of the double were singularly abnormal. Hoffmann, the son of a hysteric, used to see ghosts, and wake his wife so that she could witness his visions. He was tortured by the thought of death, his mind deteriorated, and he ended in general paralysis.

Guy de Maupassant, when he described his hallucination in *Le Horla*, was already stricken with the same disease. Jean Paul Richter was obsessed by the fear of madness. From his youth he sees his double, and he writes: "I look at him, he looks at me, and both of us hold our ego in horror." Edgar Allan Poe was subject to melancholia, alcoholism, toxicomania. He was unstable, epileptic, and tortured by all sorts of phobias. Dostoevsky was subject to major epileptic fits and to most unexpected changes of temper. What can one say about Alfred de Musset? Everyone knows that he was cyclothymic and subject to toxicomania.

This list, which I could extend, shows well that the greatest literary geniuses can carry in them very great mental abnormalities, yet it is perhaps to these that we owe the most surprising products of man's genius.

#### A Perception without Object

As I have told you, the first cases of autoscopia recorded were a psychological problem that the authors in the last century could not possibly solve. For some,

however, the apparition of the double meant a perturbation of that kind of sensibility by which we perceive with great difficulty the existence and the workings of our body. French psycho-physiologists have given the name of "cenesthesia" to this sensibility. It is only with the works of Henry Head and of Paul Schilder that one can begin to understand the phenomenon of autoscopia.

Henry Head and Gordon Holmes saw that in our sensorimotor structure it was necessary to take into consideration the postural attitudes, because it is to them we owe the knowledge we have of the position of our limbs, without which all voluntary action would be impossible. Making use of this knowledge, Paul Schilder wrote a small but very useful book called *Das Körper Schema*. As a matter of fact, this title was badly chosen, because it is not a body scheme we possess, but more exactly an image of our body. So when Schilder took refuge in the United States he revised his original work and called it in a more justified way "The Image of the Body," or "The Bodily Image."

What is clear from all the investigations relating to the body image is that we possess at the boundary of our consciousness the notion of our physical personality—an idea, in the Greek philosophers' sense, of our body. If this image can disappear or be distorted through various diseases of the nervous system, it can also release itself partly from its material frame to become a hallucination—in other words, a perception without object.

It is not necessary for me to add that the knowledge of autoscopia and its psycho-physiological mechanism has enabled us to understand the meaning of many psychic manifestations which remained mysterious to our predecessors, and that, thanks to clinical data, the inner psychology of a number of writers has been revealed.

Thus we come back to a basic principle to which I am fond of referring—namely, that all progress in our knowledge in psychopathology is also progress in our knowledge of man himself, which is the supreme aim of science.

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A paper in a recent issue of the *Journal of the American Medical Association* (February 3, p. 314) describes the detection of cancer in rural general practice in Ohio by means of regular routine physical examinations carried out by 42 members of the Lorain County Medical Society. Since the scheme began in 1944 a total of 950 presumed healthy women have shown between them 13 malignant conditions (four breast cancers, three of bowel, three of skin, one of the body of the uterus, one leukaemia, and one Hodgkin's disease), and also 255 benign conditions requiring treatment. This involved the making of 1,650 separate examinations. The first annual visit of each patient was the occasion of a complete physical examination, with blood counts and urine tests, and where possible a Kahn test for syphilis and a Papanicolaou cervical smear microscopical examination for malignant cells. If the patient was 35 years or older a second visit was made six months later for a breast and pelvic examination only. The author estimates that the 20,815,000 women over 45 in the United States could all have an annual medical examination if 100,000 physicians each gave an hour a week to the work. He draws attention to the fact that 11 out of the 13 patients in whom malignancy was found in this investigation were over 40 years old, and asserts that 80% of all cancers can be found by inspection and palpation, which means that the general practitioner is the best person to make the initial diagnosis.