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The Death of a Twin: Mourning and Anniversary Reactions. Fragments of 10 Years of Self-Analysis

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Whether out of diffidence or awe few analysts have followed the example of Freud and reported on their own self-analysis either as process or as a source of data (Kramer, 1959); (Ticho, 1967). This paper is such a contribution. It concerns the self-analysis of anniversary dreams and parapraxes which occurred over the 10-year period following the sudden and unexpected death of the author's identical twin brother (1963–73) and as he approached and lived through his own 58th year (10 December 1971 to 9 December 1972), the age of his father at the time of his sudden death in 1928. Particular attention is devoted to the striking instances in which dreams or symptomatic behaviour occurred on anniversaries of which the author was unaware at the time but recognized later. Opportunity is also taken to discuss the psychoanalytic literature on twins in the light of the author's personal experience as a twin, particularly the unique aspects of the object relationships and of the mourning processes following the death of one twin.

An important motivation for the study was the writer's long-standing interest in the relationship between anniversaries, the giving up–given up complex and the onset or exacerbation of illness (Schmale, 1958), (1972); (Engel & Schmale, 1967). These touch on the concepts of the timelessness of the unconscious (Freud, 1915), the unconscious sense of time and mechanisms whereby anniversaries reactivate old repressed and unresolved conflicts (Hilgard, 1953); (Pollock, 1970), (1971a), (1971b), (1972); (Mintz, 1971).

This study did not come about through design. Actually the idea was prompted by a particularly striking dream in 1969 that vividly documented the unconscious memory of an anniversary relevant to my brother's death of which I had otherwise remained oblivious. I immediately wrote down the dream and associations and then reconstructed from memory as best I could the intervening events surrounding and following my brother's death six years earlier. Thereafter I kept a written record of all incidents pertaining to dates and anniversaries, first only in relation to my brother's death and later to my father's death as well, as I began to realize that I was also reacting to approaching the age at which he had died.

The critical reader will appreciate that the decision to develop a research project out of these personal experiences in itself constitutes a potential source of error, for to be able to produce interesting anniversary dreams might thereafter have become a motive for dreaming. While that may be, it is also a fact that as part of my continuing effort at self-analysis since completing my analysis in 1951 I had made it a practice to attempt to analyse my dreams and parapraxes if they were disturbing, if I were troubled, or if they seemed particularly striking. Indeed, it seems plausible that I would in any event have so handled the dreams and other incidents reported in this paper. I had so done with all of the events herein reported that had occurred between 1963 and 1969. Unfortunately I did not make notes at the time, and so must now rely on memory. The innovation in 1969 was that I began to keep written notes.

Other obvious sources of error concern omissions and the natural restraint that would be exercised in respect of sensitive areas involving other persons. Many dreams were glossed over, forgotten or simply did not arouse my interest. Further, associations were probably more controlled than free, especially since I was always conscious of the fact that I might

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some day make the material public. And most important are the motives which led me to want to write the paper, some of which will no doubt be more transparent to the reader than to me.

Personal data in this paper will be presented in two sections, first that which bears directly on the deaths and the anniversaries, then that which more particularly concerns our relationships and development as twins.

ANNIVERSARY REACTIONS

Sudden and unexpected death: father, 1928; twin, 1963

The incidents reported here all relate to the sudden death of my twin brother on 10 July 1963 and to the age of my father at the time of his death, 12 December 1928. He too had died suddenly at the age of 58, two days before his 59th birthday (14 December 1928) and two days after our 15th birthday (10 December 1928). His was my first encounter with death and I remember the occasion vividly. The time of his death was indelibly recorded in my mind, 10.40 a.m., and I recall intense depersonalization and derealization for several hours thereafter. A significant residue was a nemesis concept, the idea that I too would not survive beyond my 58th year (**Chapman, 1959**).

The death of my twin brother at the age of 49 came without warning and was a profound shock. Our relationship had been close, intense, but extremely rivalrous. We were virtually indistinguishable, so much so that even our parents often confused us (**Fig. 1**). Except for a four-year older brother we were in childhood constant and exclusive companions, virtually disdaining other friends until the age of 12 and even thereafter for years shared friends rather than each having personal friends of his own. During childhood we went to extraordinary lengths to regulate and control expression of physical aggression toward each other, the net effect of which was equivalent aggression, not non-aggression. In social relations we enjoyed a high degree of complementarity, I in general being the more active. Only in dating did we maintain complete independence, agreeing from the outset never to date each other's girl, a rule strictly adhered to. Actually this became the device enabling me to disengage, for I began to go steady by 21 and was married by 24, whereas he remained a bachelor for another five years. Educationally and professionally we pursued virtually identical careers, attending the same college, medical school and internship, only going our separate ways at the age of 27 (1941) when he went to Yale in biochemistry and I to the Peter Bent Brigham Hospital in medicine. At the time of his death in 1963 Frank was Professor of Medicine at Duke where he had established and directed the Division of Endocrinology. He personally, as well as the Division, achieved an international reputation. The intense rivalry which had marked our earlier lives was in adulthood expressed in terms of our respective professional careers, but by the time of his death we were both sufficiently successful in our own fields that the need for constant display of overt competition had largely disappeared. Indeed a few months before his death, at our last meeting, we had for the first time discussed the possibility of collaborating on a book.

The news of his fatal heart attack on 10 July 1963 came as a profound shock. On that day my family and I happened to be visiting my older brother in Boston. I had a reaction of stunned disbelief, followed by tears some 20 minutes later. Within a few hours we were on a plane to Durham. On the flight I experienced left chest pain. A number of vivid dreams occurred in relation to the funeral, the details of which are now forgotten, but all were marked by a profound confusion between myself and my brother.

Upon return to Rochester a week later, I at once submitted to a physical examination which demonstrated that I too had evidence of coronary disease as indicated by radiological signs of calcification of the coronary arteries, but there was no evidence that the chest pain on the plane had represented a myocardial infarction. I assume it was a conversion symptom. Nonetheless, the idea became firmly fixed in my mind that I would soon suffer a heart attack.

The prediction fulfilled: myocardial infarct, 9 June 1964

The year following his death was marked by profound mourning but not so intense as to interfere significantly with my family or professional

life. As time passed I found myself increasingly entertaining the magical notion that if the myocardial infarction did not occur by 10 July 1964, the first anniversary of his death, I would survive. I was fully aware of the irrational nature of this idea, but nonetheless found it impossible to dispel. On 9 June 1964 the long anticipated event occurred, just one day short of 11 months of my brother's death! The circumstances preceding the myocardial infarction were notable. One week earlier, on 2 June, I was the speaker at the annual banquet of the graduating class of the medical school. For the occasion I had prepared a humorous talk on clinical observation which included projecting photographs of my brother and myself at various ages from infancy. I knew this would be entertaining, for the students had always so much enjoyed my twin stories and two years earlier Frank had lectured to my class, a fine opportunity to observe the interplay between us. We were so identical in appearance that under such circumstances it was common for the audience to laugh as soon as the unfamiliar Engel began to speak, so uncanny was the resemblance of voice and mannerisms as well as of physical appearance. This class was no exception. Why I had prepared such material for this occasion is not clear; I can only conjecture that I was in some way attempting to carry on the work of mourning. As an exercise in the fine points of clinical observation I was emphasizing our identity yet calling on the audience to distinguish between us. I seemed determined to accentuate the humorous aspects of our relationship and avoid dealing with the sadness of the loss. I was vaguely aware of an uneasiness as to whether this was appropriate for the occasion, even though by tradition the dinner was informal and attended mainly by students, most of whom were in their cups well before the speaker of the evening got to his feet. I was therefore much taken aback to find upon my arrival that this was to be a formal occasion, attended by the Dean and a large number of faculty, at which the newly appointed President of the University was also to be present. My first thought was that my intended remarks were far too personal and quite inappropriate for the occasion. Suddenly I felt acutely anxious, the first genuine anxiety attack I had had for many years. Intense anxiety persisted throughout the dinner right up to the point when I got to my feet to speak, when it abruptly subsided. It was typical stage-fright as I occasionally had experienced in my younger (preanalysed) years. Actually the introductory remarks were greeted with all the amusement that I had anticipated and the evening ended with all in high spirits. However, upon arriving home late in the evening I found some unpleasant news. Some difficult problems had arisen involving a person who, it happens, was in my mind closely identified with my twin and my son and it devolved upon me to meet with him to attempt some resolution. We arranged that he come to Rochester the evening of 9 June 1964. It was a meeting I was not looking forward to. In retrospect, I realize that I kept myself unusually busy that entire week, and especially that day, and avoided thinking about the unwished for confrontation. But the meeting never took place. At 3.30 p.m. the coronary attack began!

My reaction to the attack was one of great relief. I not only escaped the unpleasant meeting, I no longer had to anticipate the heart attack; the other shoe had fallen, so to speak. I was in my office at the time, at once recognized the diagnosis, called my physician and within 30 minutes was comfortably in a hospital bed medicated with demerol. I felt serene and tranquil, the waiting was finally over. A number of dreams occurred over the next several days, again involving confusion between my brother and myself, but I recall no details. A revealing episode occurred five or six days later. While listening to a radio performance of *Hamlet* I suddenly thought I had gained a remarkable new insight into the play. Hamlet's uncle had not actually slain his brother; that was only Hamlet's fantasy! I was astonished that I had never appreciated this 'fact' before and I felt exhilarated by the discovery. I excitedly conveyed this information to whoever came into my room, all of whom were sufficiently respectful of my defences, or ignorant of the play, to display keen interest. I had someone bring me in a copy of the play and of course quickly discovered my error. I had no difficulty in recognizing its implications in terms of my relationship to my brother. I was not responsible

¹ An example of the gallows humour that exemplified our rivalry over the years may provide the reader with some feeling for the quality of our ambivalence. In 1957 Frank was honoured as the Eastman Lecturer at the University of Rochester. At the dinner in his honour someone noted that he was declining high cholesterol, high saturated fat items and solicited his opinion. This led to an extended serious discussion culminating in someone asking how anyone could ever evaluate outcome. With a grin he gestured toward me and said triumphantly, 'Hha, I have a control litter-mate; we'll see who gets the coronary first!' I responded, 'Yes, indeed, but you forget I have been analysed, you have not!' After his death the outcome of the 'experiment' often came to mind.

for his death after all!¹ I left the hospital on 1 July 1964 and after a couple of months' convalescence at home gradually returned to a full schedule.

The fifth anniversary of the death: the first dream

Over the succeeding years I became less and less preoccupied with anticipation of the significant anniversaries, especially our joint birthday (10 December) and his death (10 July). Yet a number of incidents occurred which served to keep alive the conflicts for myself, as well as for others, that I, not he, had survived. One involved the Frank Engel Society which his colleagues at Duke had established in his honour. In 1965, invited to present a paper, I was introduced as 'Dr Frank Engel, brother of our late beloved colleague, Frank'. The chairman was astonished when the slip was called to his attention. On the same visit to Duke I was several times greeted as Frank in the hospital corridors by persons momentarily repressing his death. Such mistakes by his acquaintances had of course been commonplace before his death and always a source of amusement for me. Often I never bothered to correct the error, simply returning the greeting as if I were Frank. But after his death such mistakes were painful to me. Hence all the more remarkable was such an occurrence at a meeting of the American College of Physicians in 1968 where I responded to 'Hi, Frank' without a second thought. Only a few minutes later did I realize with amazement that I had been greeted as Frank and yet felt no surprise. But the setting was important. Frank was a prominent member of the College; I was not a member. The occasion for my attendance at that meeting was to receive an award, the perfect setting to play out our rivalry. Clearly my wish that he could share (and be put down) by my success was intense enough that for the moment at least I accepted the stranger's error as if Frank were indeed still alive. These incidents also document how even after his death I continued to receive from the outside reinforcement of our fused identities. I will return to this later.

As June 1968 came to an end I did not have consciously in mind that the fifth anniversary (10 July) of his death was soon at hand until the following dream occurred:

Dream 1. I had returned to Cincinnati (where I had been on the faculty from 1942–46) to give a lecture. I was late and could not find my way even though I was very familiar with the hospital. There seemed to have been new construction so that I kept encountering obstacles to the familiar routes. The fruitless search seemed interminable but eventually I got to the lecture room only to discover that I had forgotten my slides and manuscript. The feelings in the dream were of anxiety and urgency, my legs were weak and I had difficulty in seeing. I awakened feeling most uneasy but then abruptly relieved to recall that a few months earlier I had in fact given a lecture in Cincinnati and it had been a great success.

This was a typical examination dream which I had come to associate with the anticipation of some unpleasant task ahead and to which I usually responded with an attempt at analysis. As I roused myself I could think of nothing relevant. Then gradually, with no little surprise, I realized that I had not thought at all about the approaching anniversary of my brother's death, 10 July. But the dream had occurred on 1 July, not 10 July. Searching my mind in vain, I could find no significance in 1 July; I recalled nothing. As I sat on the bedside puzzling over the date I caught sight of a dusty notebook on the lower shelf of a table across the room. I immediately felt drawn to examine it and was surprised to discover that it was the 1964 appointment book in which I had kept a record of medications and visitors following the coronary. The condition of the book indicated that it had not been touched for years. With mounting curiosity I turned to 1 July to discover that to be the date of my discharge from the hospital in 1964! The

significance of the dream then immediately became clear—the unpleasant fact I had to face was the guilt I felt that I had returned home alive, my brother had not! The dream characteristically condensed the pain of guilt and loss over his death and the triumph of my own survival. But noteworthy was the faithful recording of the date 1 July as the stimulus for the dream. Up to that time I do not remember ever consciously thinking of 1 July as a meaningful anniversary. Yet clearly 1 July had been recorded in my mind.

The fifth anniversary of the coronary: the second dream

The next episode, also a dream, occurs a year later in 1969.

Dream 2. I meet a colleague who tells me that he is going to take a position at Yale. It seems that I too am going to Yale. He then informs me that Gene Ferris will be there as well. I become very exhilarated, for Gene and I had worked together in a most productive and harmonious fashion years ago in Cincinnati. I exclaim, 'That's great! That's marvellous! We'll be able to do the study of ACTH and growth hormone responses to viewing the Aberfan film.' Then all of a sudden I remember that Gene is dead. I become sad and agitated and try to point out this fact to my colleague who looks at me with a rather condescending smile, as though I am making a foolish error. 'Don't you remember?' I say. I try to recall the date of his death, it seems like it was 1950 or 56. I walk away from the scene with another colleague to whom I am trying to explain this situation but he assumes a therapeutic guise, as if I am suffering some kind of delusion. I awaken feeling depressed.

The associations to the dream come quickly. It was my brother who had gone to Yale, not I, and it was he as an endocrinologist, not Gene Ferris, who would have been able to help me with a problem involving growth hormone and ACTH. Gene Ferris had been a close friend and scientific collaborator in Cincinnati (1942–46) whose sudden death in 1957 had shocked me. I had spoken to the medical students at Cincinnati on the tenth anniversary of his death. (Actually referred to in Dream 1.) Clearly the dream once again alluded to the fact that my brother had died and I had survived. At that point in my associations to the dream I realized that the dream had occurred on 9 June 1969, the fifth anniversary of my own coronary! In my mind this was a very important anniversary for, ever since the original attack, I kept in mind the statistical fact that men who survive a myocardial infarct without complications for five years thereafter enjoy the same life expectancy as do men of the same age who did not have a coronary. Hence I had been looking forward to 9 June 1969, the fifth anniversary, as a date to celebrate. How was it then that that critical date had not been in mind in the preceding weeks. Indeed, I felt astonishment that morning when the date 9 June popped into my mind. The long-awaited day had arrived and yet I awakened totally oblivious of it. Why? The answer was simple. Two and a half months earlier, in April, while attending the meeting of the American Psychosomatic Society in Cincinnati, I had suffered a minor attack of coronary insufficiency. That was enough to eliminate me from the magic circle of those statistically restored to normal life expectancy, to immortality, at least in my own mind. Consciously I had eliminated the date from my mind; unconsciously in the dream I restored my brother (self) to life, only once again to take it away.

A number of other associations are pertinent. The fusion of our identities and the yearning for reunion are clear in two items in the dream. I am going to Yale, whereas in reality it was Frank who went to Yale (in 1941); and I will be able to collaborate with Gene Ferris (who had never been at Yale) on endocrine problems. But Frank was the endocrine specialist and it would have been he who could have helped with the endocrine aspects of our research. The Aberfan film, a documentary on the grief responses of the survivors of a disaster in which more than a hundred children lost their lives, had a profound emotional impact and we were using it to study the endocrine responses to sadness so provoked. Even after a dozen viewings it still moved me to tears! In the dream I will overcome this painful reaction of unresolved grief by being reunited with Frank. We will collaborate. The reader will recall that at our final meeting in March 1963 before his death—which in fact took place at the 25th *reunion* of our medical school class—Frank and I had discussed collaborating on a book which would have in effect combined his endocrinological

and my psychological insights. The thwarting of this hope was one of the more anguishing consequences of his death.

In the dream we measure growth hormone and ACTH whereas in fact the actual research involved growth hormone and cortisol. This error is significant because in 1953 I thought I had adduced evidence that ACTH produced EEG changes in the adrenalectomized subject, that is, an extra-adrenal effect. But Frank properly persuaded me from publishing this because we had not adequately controlled for impurities in the commercial preparation of ACTH. However, at our final meeting in March 1963 he excitedly informed me that he had successfully proven the existence of extra-adrenal effects of ACTH. Then and there we made plans to repeat together the EEG study, now with proper controls. Several feelings are thus condensed in ACTH. There is my triumph to learn that I, not he, was after all the first to discover the extra-adrenal effects of ACTH and my resentment that he had cheated me of my scientific priority. This exactly paralleled my childhood resentment that he was the first, i.e. the oldest, whereas in fact I liked to fantasize that we had been mixed up at birth and I really was the first born. Thus ACTH symbolizes my pleasure at reunion (rebirth) in that we would finally collaborate. These are themes important to the psychology of twinning and will be discussed further.

Gene Ferris symbolizes the similarity of opposites, also a twin theme. Ten years older than I, we had enjoyed an extremely close and fruitful relationship. I frequently commented how unusual this was, for our backgrounds were so very different; he, the product of an old Mississippi plantation family; I, the son of a Jewish immigrant, born and raised in Manhattan. We had begun in a father-son relationship but quickly evolved a more complementary sibling relationship, thus providing in the dream work a link between my father's death, my brother's death and concern about my own death. As we shall see, the linking of the deaths of my twin and my father in Dream 2 will anticipate other anniversary phenomena.²

More anniversaries

The significant anniversaries of 1970 came and went without any occurrences worthy of note and I thought that perhaps at last the work of mourning was complete. But events of 1971 and 1972 were to suggest a continuity between haunting thoughts of my own death and the deaths of loved ones in the past.

On 1 May 1971 my wife accompanied me to a meeting in Atlantic City which also coincided with the annual meeting of the American Society for Clinical Investigation, an organization of which both Frank and I had been members since the 1940s and which always met in Atlantic City the first week of May. For many years, beginning even before our election to membership, we reserved this meeting for an annual reunion. Following his death I never again returned to Atlantic City until this occasion in May 1971. With considerable nostalgia I found myself reconstructing with my wife the scenes and circumstances of the many past reunions with Frank. In the midst of this remembrance of things past I was greeted by an old acquaintance who happened also to have known my brothers very well, particularly my older brother who was a fellow faculty member at the same medical school. After the usual exchange he commented, 'I had dinner with your brother a couple of weeks ago.' Without a second thought I asked, 'Oh, really, which one?' An astonishing error, for even had Frank been alive I knew full well that this man and my older brother were closely associated and saw each other relatively frequently. I was instantly aware of the error and for a few seconds again experienced a sense of depersonalization.

The coincidence of once again being invited to be the speaker to the graduating class on 1 June 1971 recalled how an identical occasion exactly seven years earlier (2 June 1964) had been followed a week later by a myocardial infarct. But the week passed uneventfully and the anticipation of the coming anniversary actually slipped completely out of my mind. But on the afternoon of 9 June, while supervising a Fellow in my office I abruptly became

² Dr George Pollock called attention to the significance of the initials, G.F., Gene Ferris, George Frank, with George coming first.

extremely fatigued, so much so that I felt like discontinuing the session. I had planned to begin a week's vacation on 18 June, but on the spur of the moment I resolved to begin my vacation at the end of that hour, a most uncharacteristic behaviour for me. My spirits promptly lightened, I slept well that night and the next morning (10 June) at breakfast the thought popped into my mind that the seventh anniversary (9 June) of my heart attack had come and gone and I hadn't even thought of it! Then suddenly I realized that the abrupt development of fatigue in the midst of the supervisory session the day before had occurred at 3.30 p.m., the exact time of the onset of the coronary attack in 1964.

Figure 1

April 1928: The author and his twin brother, aged 14



Figure 2

April 1928: The author's twin brother, aged 14



Figure 3a

April 1972: The author, aged 58



Figure 3b
April 1928: The author's father, aged 58



Age 58—the year of nemesis: the third dream

10 December 1971 was my 58th birthday.³ On that day I thought to myself, 'Next December 10th (1972) you will be 59. That will be the year to worry about; father was 59 when he died.' But the attentive reader will recall that my father died in his *58th* year, two days *before* his 59th birthday. My father's birth date (14 December 1869) and his death date (12 December 1928) had always been and continued to be very clear in my mind, yet curiously there now was no question in my mind that he had died two days before his 60th birthday! Thus I ushered in my 'nemesis' year by repressing the significance of age 58 even though that number had been in my mind all of those 43 years. Also more and more during that year thoughts of my father came to mind, a decided change from preceding years. He would be pleased with how this son had turned out. I became aware of subtle evidences of identification, a striking confirmation of which occurred in April 1972. My wife took a candid Polaroid shot of me in London (Fig. 3a). The photograph seemed uncannily familiar, as if I had such a picture taken before and I commented on it at the time. Upon returning home a few weeks later I discovered a

photograph that I had taken of my father when *he* was 58 (Fig. 3b). The reader will be struck by the resemblance. I had taken that photograph in April 1928 and for many years thereafter had carried it in my wallet. It became for me the definitive picture of my father. Was there an anniversary significance in my assuming this pose—incidentally an uncharacteristic pose for me—in the April of my 58th year? Careful search of old photographs yielded only one other such photograph and that was taken on the same April day in 1928. It is a picture of Frank! (Fig. 2.) I know an identical one of me existed which had been in Frank's possession. A third photo, also from the same April day, shows the two of us together (Fig. 1). Thus, recorded in photographs are my father, my twin and myself in identical poses, a pose that I replicate 44 years later. The question arises, had I unconsciously begun to fuse the images of my father and my twin? Indeed, had he in my unconscious become my twin? I shall return to this theme later in the discussion of twinning.

On 17 October 1972 the following dream occurs:

Dream 3. I am taking an examination. It is an oral examination held in a conference room with a number of examiners seated around the table. I am asked, 'What is the paleothallium?' I have no idea, but I smile to myself and then say, 'I do not know what it is but I know where to look it up. That's good enough.' I then look around the table and say, 'I'll bet most of you don't know either.' Several of the examiners nod in agreement and smile.

I awaken feeling triumphant and with gay laughter report the dream to my wife. My first association is that the dream is the exact opposite of my typical examination dream. I am not facing some unpleasant prospect but something favourable. I associate the examination

³ During the presentation at the University of Rochester I misspoke, saying 'December 10th, 1971, was my 98th birthday'. I was immediately convulsed with uncontrollable laughter in which the audience wholeheartedly joined. Tears rolled down my cheeks. When I finally regained composure, which seemed several minutes but was probably less, I made the obvious interpretation that the slip expressed my wish to live to a ripe old age, or better still, forever. However, a perceptive medical student, Mr Anthony Lehman, recognized a much more subtle and significant implication. 98, he pointed out, is twice 49, our age when my brother died! By doubling his life span I shall live his life for him and enjoy the twinship for both of us. What a triumph! What a marvellous joke! No wonder the uncontrollable laughter and tears.

scene in the dream to the oral examination I took to obtain my internship in 1937, which was a triumph in that I ranked first among the several hundred candidates; Frank was second. An incident occurred at that examination which I often recount with amusement. I was extremely apprehensive when I entered the room to face my examiners but immediately felt relieved when I realized I could answer with ease the first question posed. But my confidence was quickly undermined as I became aware that one of the examiners was shaking his head apparently in disapproval. (In the dream heads shake in assent.) He had known me as a youngster and I thought he was trying to help. Disaster seemed imminent until I was able to regain composure by indulging in an outrageously narcissistic fantasy; his head shake was not meant to convey disapproval, but awe, 'I never heard such a superb answer!' When I finished, he did indeed pronounce my response to be excellent and only then did I realize that his head motion was a tremor. I felt relief and triumph, as I did in the dream.

No other productive associations came to me but the euphoric mood persisted all day and from time to time I thought of the dream with enjoyment. But later in the day it suddenly popped into my mind that my father was not 59 when he died, but 58! I was astonished and bewildered at how I could possibly have made such an error. It then occurred to me that rather than having a whole year to look forward to apprehensively I had already safely traversed 10 months of the fateful 58th year. I then understood the sense of triumph. In the examination 35 years ago I knew the answer was correct even though one examiner had seemed to be telling me I was wrong. In the dream I felt I did not have to know everything, it was sufficient to know where to look it up. Further, I had my elders (the examiners) acknowledge they could do no better. For reasons that I did not understand at the time, the danger of age 58 had abruptly lessened. At least the repression was lifted and I became able to recognize that it was the 58th and not the 59th year that I had for so long feared.

There are no further notes recorded for October 1972, but as I wrote this in July 1973 the reason for the lifting of the repression suddenly became clear. Beginning in September 1972, I had begun to have some ominous symptoms, a gradual but progressive development of weakness, fatigue, slight exertional breathlessness, and episodes of paroxysmal tachycardia. A periodic complaint of many years, bleeding from haemorrhoids, had recurred, but I paid it no heed since it had in the past never led to anaemia. Yet despite these symptoms the possibility of being anaemic never crossed my mind and I did not consult my physician! But on 2 November he happened to see me at a meeting and called my attention to pallor. I proved to be sufficiently anaemic from chronic blood loss and iron depletion to require immediate hospitalization and two units of packed red cells. Within two weeks I felt remarkably better and was astonished to realize how much I had allowed my health to deteriorate without taking action.

With this information the full motivation for the dream becomes clearer. I had been denying the seriousness of my developing illness, symptoms of which in fact were threatening to undermine the repression of my fears for the age of 58. The dream work effected a compromise. In the manifest dream I say triumphantly that I do not have to know, I will survive anyway. My association is to an examination in which an examiner's apparent disapproval proved not to mean what it seemed to, it was based on a misinterpretation of a head tremor and I emerged triumphant, the first; my brother was second. Once again the theme of who comes first appears; to outdo my twin meant to achieve my own individuality, to be the favoured one, and in the dream to escape death. Later that day I made another compromise. I was able to lift the repression from age 58 by rationalizing that I had already safely traversed the first 10 months of that perilous year; only two more months to go and I would have made it! But the rationalization protected me from recognizing that I was seriously ill.

Following treatment, my health was fully restored and the crucial anniversaries, my (our) 59th birthday on 10 December 1972, the 44th anniversary of my father's death on 12 December and his birthday on 14 December all passed without noteworthy incident. So too did the

10th anniversary of Frank's death, the closing date of this study.

The tenth anniversary of my coronary attack, 9 June 1974

June 9 was a Sunday and I was meeting that morning in my study at home with a younger colleague to try to resolve a conflict between us which had developed during the preceding week. In the course of the discussion I found myself referring to the coronary episode in 1964 and how it had modified my role in the Medical-Psychiatric Liaison Group of which I had been the founder and the director since 1946. Abruptly came into my mind the realization that the 10th anniversary must be close at hand. I checked my calendar watch which read 'Sun. 10'. I exclaimed with surprise that once again I had completely forgotten the anniversary date. No sooner having said so, I felt confused. For it was my twin's coronary that was on the 10th (July), mine was on the 9th (June). I concluded that the 10th anniversary had been the day before, Saturday. My colleague said I was mistaken, 'Today is the 9th'. But I insisted he was wrong, referring him to my calendar watch again and also to a mechanical calendar on my desk which I adjust every day. He did not press the issue further. No satisfactory explanation for my not remembering the anniversary came to mind at the time.

Later, on the evening of the same day, at a social gathering for the staff at my house, my young colleague again approached me about the error, 'You were wrong this morning about the date. Today is the 9th, not the 10th.' I again disputed him with my calendar watch but this time he referred me to a wall calendar which proved him correct. I then realized that I must have known full well it was the 9th, for the staff party had long been scheduled for Sunday, 9 June. Evidently I had not only repressed the anniversary significance of the date, I must also unconsciously have advanced the date on my calendar watch, simply done by depressing the stem, as well as adjusted the mechanical desk calendar on the basis of the calendar watch. It was not unusual for me to forget to change the desk calendar, so that to find it two (or even more) days behind the date on my watch would not have surprised me.

But why had I resisted recognizing the anniversary date, even when called to my attention? The explanation suddenly came into mind on Monday, a day later. It involved the reason for the meeting with my colleague that Sunday morning. For the preceding week he and I had been in a conflict about an administrative matter. On Saturday evening, 8 June, about 9.30 p.m. he phoned to ask whether he could not come over to try to resolve the matter the following morning, before the staff party. I acceded to his request without questioning this need for urgency. No sooner did I hang up the phone when I felt annoyed with myself for agreeing so readily and annoyed with him for intruding on my Sunday. Besides, all week I had been wishing that someone else would handle the matter and I not be bothered any longer with the chores that go with being director of an academic unit. My sleep that night was restless, with unremembered dreams, which surprised me because I still did not think the matter justified losing any sleep over. Yet obviously something had been stirred up. The explanation came to me late on Monday when I suddenly recollected the circumstances under which the myocardial infarction had occurred 10 years earlier. The reader will recall that the attack occurred a few hours before an unwanted confrontation with a younger man whom I unconsciously identified with my twin and my son. The two situations were remarkably similar, for my colleague also is identified with both my son and my twin, as many associations clearly document. By repressing the date and changing the calendar watch 10 years later I successfully dissociated the confrontation with my young colleague from the 10th anniversary and thereby magically spared myself another coronary!

But two questions remain to be answered. Was there something overdetermined about the conflict with my young colleague? The facts are that we had agreed amicably on a solution on Tuesday (4 June) and then abruptly and unilaterally I reversed the decision and so informed him on 7 June. It matters not whether that

⁴ Since the manuscript had not yet gone to press I am able to add another significant anniversary experience.

decision was right or wrong or even that another senior colleague had agreed with the reversal, the inevitable outcome was renewal of the conflict more bitterly than ever. It seems difficult to escape the conclusion that the repetition compulsion was again at work. By provoking a conflict I would re-enact the circumstances surrounding the coronary ten years earlier but this time magically surmount them.

The second question concerns why my colleague did not press the issue of the error in dates in the morning but waited to confront me with the calendar later in the evening in the more relaxed atmosphere of the staff party. The explanation he offered was that he was concerned lest I become upset to discover the error, especially in light of the circumstances of the meeting. The more relaxed social event later in the day seemed a more appropriate opportunity. Besides, he confided, some months earlier his father had suffered a myocardial infarction; it had occurred the day after father and son had had their first major confrontation! Clearly my young colleague and I were unconsciously acting out with each other our respective generational conflicts.

THE PSYCHOLOGY OF TWINS

The mourning and anniversary phenomena recounted here obviously are not unique to twins. Yet the distinctive features of twinning clearly introduce features which may illuminate certain aspects of these phenomena, especially the pronounced tendency toward persistent confusion of identities in the unconscious.

Separation, individuation and identity formation in twins

The psychoanalytic literature on twins, while relatively limited in scope, is nonetheless remarkably consistent (Arlow, 1961); (Burlingham, 1949); (Burlingham & Barron, 1963); (Gifford et al., 1966); (Glenn, 1966); (Joseph, 1959), (1961); (Joseph & Tabor, 1961); (Leonard, 1961); (Lidz, 1961). What is more, my personal experience as a twin is consistent with what others have written.

A central developmental issue for twins concerns the fact that separation and individuation must ultimately involve the twin as well as the mother. Indeed, there is indication that the intimacy and intensity of the interaction between the twins may actually accelerate the separation from the mother (Leonard, 1961), only to be replaced by a prolonged symbiosis between the twins, whose separation and individuation from each other may be consequently long delayed. Joseph & Tabor (1961) called this the 'twinning reaction' which 'consists of (1) mutual interidentification and (2) part fusion of the self representation and the object representation of the other member of the pair'. Through much of my childhood, even well into adolescence, our parents referred to us collectively as 'the twins' while often misidentifying us as individuals. We were dressed alike, provided with identical possessions and from earliest infancy certainly spent far more time interacting with each other than with any other person, including mother. Obviously the primary separation and individuation from mother is beyond recall, but my earliest memory may be revealing. I see myself standing up holding on to the seat of a chair as my father attempts slowly to pull it away to encourage me to stand by myself. The rest of the family are encouraging me. Evidently my twin had already succeeded in standing alone. Many years later, during my analysis, my mother documented that the episode had indeed occurred at about the age of one year. I was becoming upset because my twin was toddling away from me and I could not follow, a phenomenon that Burlingham (1949) also observed among twins. I suggest now that to be able to keep physically close to my twin was important in mitigating the trauma of separations from parents. But at the same time this accentuated the wish and advantage to be as much like my twin as possible. Thus attachment needs and attachment behaviour, in Bowlby's (1969) sense, to an increasing degree became a positive force to intensify intertwin relations and through this the duality of the twin unit became solidified. We became 'the twins', a unit separated from the others. I emphasize the positive aspects of the unity, rather than 'coexistence' as a compromise to be worked out, as Lidz suggests (1961). As early as the age of two or three I vividly recall our success in enticing our four-year older brother close enough to the bars of the playpen so that we could seize him by the

hair, screaming helplessly like Gulliver in the hands of the Lilliputians. Patently the advantages of fusing our strengths and functioning as a unit long outweighed the opposite need to establish individual identities, important as that was. However, as Arlow's cases indicate, the importance of the duality probably varies from twin pair to twin pair, depending in part on the extent to which the mother emphasizes or minimizes the similarity or deals with the twins as a pair (1961).

Many consequences ensued for us from this prolonged struggle between unification and individuation, the most important of which were on the one hand diffuseness of ego boundaries, on the other complementarity. The latter constituted a developmental process encouraging in each of us the emergence of ego capacities that would complement each other and enhance the effective operation of the twin unit in relation to outsiders. The persistence well into adult life, even to date, of vagueness of boundaries between our self and object representations has already been illustrated in the earlier part of this paper. As children we were retarded in language development and social communication. Like many twins, we enjoyed a private language, remnants of which persisted well into latency period (Leonard, 1961). We never addressed each other by our proper names. Rather, until I got married, we both addressed each other by the same name, 'Oth'. The derivation of 'Oth' is relevant to understanding the process of individuation. As early as the age of two we began to address each other as 'Other Man'. Over the years this became shortened to 'Othie' and finally to the more curt 'Oth'. This shared appellation constituted an elegant compromise, for it simultaneously differentiated self from the other while maintaining the dual twin identity distinct from the rest of the world. Burlingham (1952) reports a twin named Bill who at two and a half years called his brother 'other one Bill'. I will come back again to the important narcissistic gain derived from the dual twin identity.

Our pronounced physical similarity has already been cited, and to this day I cannot with confidence differentiate childhood photographs. An uncanny phenomenon, which only began to fade since my twin's death, occurred regularly when viewing myself from behind in a double mirror, as when trying on a suit in a clothing store. Invariably I saw Frank! When young, it *was* Frank; later I felt uneasy and usually laughed, so uncanny was the experience. But since I practically never saw myself, but commonly saw Frank from behind, this should not be surprising.

Confusion of childhood memories persists to date. We both told numerous twin stories but those who had heard such tales independently from both of us reported the stories to be identical, but roles sometimes were reversed. We were never able to resolve such discrepancies. Other analysts cite similar occurrences (Joseph & Tabor, 1961); (Glenn, 1966). Our habits and tastes also remained remarkably similar, so that independently—and occasionally virtually simultaneously—we purchased similar if not identical items of clothing or makes of car.

The vicissitudes of aggression between twins is a complex issue. My twin and I elaborated a complex system of equivalent but tempered aggressive behaviour controlled by regulations which we also agreed to deviate from by a small degree. Pinching, poking, squeezing knuckles, damaging possessions, whether by 'accident' or intent, justified exactly equivalent retaliation but we could never agree on what was 'exactly equivalent'. In this manner was libidized extended and frequent aggressive play which only rarely got out of hand. From an early age I believe this contributed to the process of establishing boundaries, yet the libidization must simultaneously have had the reverse effect of diffusing boundaries. At the same time there was intense rivalry for the attention of our parents and older brother. Though both parents attempted to be (and I now believe really were) even-handed, I nonetheless long nursed the notion that my mother gave priority to Frank because he was the older (by five minutes!). The importance for me to be 'the first' has already been discussed. Since I never could succeed in reversing this sequence I ultimately, in adolescence, arrived at the compromise solution of exploiting the advantage of being 'the youngest'. Thus I could boast that I was the youngest in my high school, college and medical school classes, the youngest intern, the youngest assistant professor, and so

on, and look with contempt on my twin, who, though 'older', had not achieved any earlier than I. Thus the struggle for individual attention from others was used in the service of individuation. In this regard our older brother probably played the most significant role, for he made no pretence of being even-handed. On the contrary, when he realized that he could not cope with us as a unit, he inaugurated a quite successful policy of aligning himself first with one and then with the other. Under such circumstances our carefully monitored nonaggression pact broke down completely and the excluded twin either submitted passively (more often Frank) or engaged in violent attacks on the others (more often I). Though such exclusion was painful at the time I suspect it contributed importantly to the ultimate success in achieving individual identities.

The narcissistic advantage of being a twin is a major factor that is intuitively appreciated by the non-twin who envies twins their constant companionship—which he imagines to be totally without ambivalence—and for the advantage they enjoy in being able to deceive others. It includes not only the use each twin makes of the other as a source of narcissistic supply (**Joseph & Tabor, 1961**) but also the narcissistic gain derived from the twin unit itself. Such narcissism constitutes a powerful force working against achieving separateness, especially since the necessity for twins to separate from each other does not have the added impetus of the Oedipus conflict, so important for the ultimate separation of child from the parent. On the other hand, struggle against homosexual bonds may play a corresponding role in inducing the separation of like-sex twins. However, for twins the evolving oedipal conflict may also serve to intensify the tendency to exploit the narcissistic advantages of twinship and thereby further counteract the drive toward separateness. Others have pointed out how this may also interfere with the successful resolution of the Oedipus complex in twins (**Joseph, 1961**). In our case the narcissistic gain of being twins was reinforced early in childhood from the attention directed to us as twins by strangers as well as by family and, later on, by the extraordinary power we felt in our ability to deceive others—parents, teachers and peers. The envy of playmates was obvious. Some have suggested that the twin, by virtue of feeling incomplete, may display the psychology of the 'exception' (**Freud, 1916**); (**Glenn, 1966**). But twins, as a duo, may also exhibit the quality of being unique or special (**Joseph & Tabor, 1961**); (**Leonard, 1961**). When together we invariably attracted attention; when separate we could at will provoke mystification. Non-twins may find it difficult to appreciate the omnipotence inherent in this ability to influence the behaviour of others, especially one's elders. Its perpetuation as a reservoir of narcissistic gain was evident in our pleasure in telling twin stories and later on, as our rivalry attenuated, in recounting or sharing each other's achievements. In many respects one obvious consequence of my brother's death was the loss of this source of narcissistic supply. Not only did the input cease, but for years thereafter I could no longer enjoy recounting twin stories.

Other writers have commented on the corruptibility of the superego in twins as one possible outgrowth of twins' ability to 'pass the buck', and hence escape punishment (**Joseph & Tabor, 1961**). Certainly the gratifications derived from the readiness with which twins can confuse, if not deliberately outwit, others is a powerful temptation, especially when taken in conjunction with the wish to outshine the other twin. In our own case—as I believe is true with other twin pairs—these tendencies were to some extent dampened by the inclination of the outraged victim, when in doubt, to retaliate indiscriminately against both.

Grief after death of a twin in mid-life

Death of a twin, even after the degree of separation and independence usually achieved by mid-life, nonetheless has special implications because of the unique developmental features of twinning. Three features in particular may influence the character of the grief response: the enduring diffuseness of the ego boundaries between self and object representations, the narcissistic gains of twinship, and the delicate balance of the defences against aggression. While many other variables undoubtedly operate these three factors must differentiate the grief experienced upon loss of a twin from that upon loss of a sibling. Siblings typically begin social relations with peers early and hence move more

easily into less interdependent and more overtly rivalrous relationships than do twins. Their bonds are further loosened when they marry and raise their own families. Twin bonds are more lasting; some even make marriages based on twin object choice, even marrying twins. Though we were involved with our own families and professional careers in different cities and saw each other only once or twice a year, the drive to sustain the old duality was everpresent. For years we carried on a voluminous correspondence and of course we exploited our twinship at every opportunity. It seems likely that the uniqueness of the twin relationship is never fully overcome.

Vagueness of ego boundaries was a recurring and pronounced experience during the first days of grief and periodically thereafter. This was evident in dreams which were characterized by an extraordinary sense of confusion as to who was who and which had died. What was striking was the extent to which this was experienced as real confusion, a struggle to separate myself from my dead twin, from which often I would awaken with a feeling of surprise and relief. Depersonalization experiences date from my very first physical separation from Frank, at the age of 11, when we were housed in different cabins at a weekend outing. They were most pronounced during the first two or three days after his death, and as cited earlier occurred several times thereafter on occasion when I momentarily fantasied him once again alive. The chest pain experienced during the flight to Durham on the day of his death probably was a conversion manifestation.

The diffuseness of ego boundaries of twins and the narcissistic gains of the dual unit suggest that mourning for a twin may involve as much, if not more, a narcissistic than an object loss. This is especially likely to be the case where the unique role of being a twin had been exploited throughout life, even more so when both twins achieve equivalent success, for rivalry is attenuated and narcissistic enjoyment of each other's achievements becomes possible. Once successful, to be mistaken for Frank no longer constituted a threat to my individuality. I could enjoy the double pleasure of being mistaken for the well-known Dr Frank Engel and then identifying myself as Dr George Engel. The childhood games were played out to the very end; I could even pass as an endocrinologist with an exceptional knowledge of behaviour! Death ended the steady input of twin-associated gratifications; indeed, for a period they turned to ashes. The relatively unambivalent attitude of his close friends and colleagues became decidedly ambivalent to the extent that I was now the wrong Engel. An example was my introduction as Frank at the Frank Engel Society two years after his death. I lost all pleasure in any longer recounting twin stories. Thus, to no longer be a twin was in itself a loss, albeit a narcissistic loss. I am very aware that the preparation of this paper constitutes an effort to compensate for this loss.

The disruption by death of the carefully regulated aggression between twins has many vicissitudes. I have already described the elaborate measures we utilized to regulate aggression between us, enough to maintain boundaries, but not so much as to threaten the bonds between us. The dreams already reported and the confusion about Hamlet amply document the strength of my latent death wishes and yet these represent only a small fraction of the material bearing on the unleashing of these aggressive drives. It seems plausible that the shifting identities so common in the dreams also constituted another effort to cope with aggression. The psychic task of tempering self- and twin-directed aggression during the mourning period is formidable. Arlow (1961) reports a twin whose dead twin remained alive within him, an 'internalized Dybuk (that) caused him intense suffering. As long as he experienced such suffering, he was able to maintain denial of his brother's death.' To this I would add, and through fusion of self and object to feel himself still alive.

ANNIVERSARIES, THE UNCONSCIOUS SENSE OF TIME AND IMMORTALITY

Mintz differentiates two types of anniversary reactions. In one there is a conscious awareness of an event or date which produces a specific ego response which is associatively linked to a specific earlier repressed, unresolved conflict. The resulting anniversary reaction is a 'reproduction of an adaptation to that conflict on a specific date'. In the second type of anniversary

reaction there is no specific current conscious stimulus. Rather the stimulus is unconscious and the reproduction of the conflict depends on the presence of an unconscious sense of time (1971). He as well as Pollock links the ego's unconscious sense of time intimately with conflicts over death. 'The nature of the anniversary reaction, whether in dreams, symptoms, or behaviour, may reflect ego and superego responses to that conflict' (1971).

My view is that both components were involved in the anniversary reactions reported in this paper. There can be no question that the passage of time was, at an unconscious and sometimes a conscious level, associated with ideas of death. To that extent the unconscious sense of time may have been hypercatheted. But my unawareness of the anniversary dates, despite reminders all around me, at the time of the dreams and symptomatic behaviour is more readily explained by repression than by the influence of an unconscious sense of time.

The critical anniversaries related to the deaths of my father and my twin. The dreams and other occurrences clearly reflected my concern about my own death or, more accurately, my concern somehow to ward off my own death. Even the decision to make this a 10-year study might be viewed in such a context. My father's death when I was 15 had planted the seed of a nemesis complex in the form of the occasional fleeting thought that I would not live longer than he had (Chapman, 1959). It was my brother's death at age 49 which gave immediacy to the old idea. Indeed, I resented myself, so to speak; I would die within the year. Certainly keeping track of time and dates came to assume the centre of attention, unconsciously when not consciously. But this was not altogether uncharacteristic, for I had always been an accurate timekeeper, concerned to be punctual and not to waste time. Further, the fact of being a twin, of sharing time through the extended and repeated contemporaneity and simultaneity of shared life experiences, multiplied the occasions suitable for anniversary responses to his death. Once again the issue of separateness and unity was joined. But upon his death, to be separate was to live, to be joined was to die. The battleground was in the unconscious where boundaries between self and twin representations were fluid and where time and numbers were used in symbolic and magical, not in chronological and metric senses. In the unconscious time repeats itself rather than moving inexorably on. And to be a twin is also to be simultaneous in time. The reader will recall how important for my struggle to achieve a separate identity became the question of which of us was born first.

In this psychodynamic situation calendar time became the outside stimulus ever ready to reawaken the mortal life and death struggle, the linkage between external time and the unconscious time sense. And here we see the interplay of ego and superego forces. The significant calendar dates either did not become conscious or were repressed as their time approached. But the dreams demonstrate that in fact the dates had been clearly recorded in my mind. Indeed, the very fact of taking note of and analysing those particular dreams, out of the countless dreams that must have occurred over these many years, in itself suggests that an awareness of the significant dates lurked in the preconscious. Probably it was this dim awareness of the anniversary which commended these particular dreams to my attention in the first place.⁵ But what was the danger of acknowledging the date and therefore the anniversary? Here the spectre of death converges from both sides. Death meant reunion, that is, re-establishment of the longed-for and valued dyad, the twin unit. But death also meant to suffer retribution for my own fratricidal impulses, as the Hamlet error revealed. The first implies immortality, the second obliteration. In the ACTH dream I anticipate great scientific achievements to result from the reunion (immortality), only then to have to acknowledge that death had obliterated that prospect. My clinging to the statistical report of normal life expectancy for those who remained well for five years after a coronary was certainly nothing but a thinly disguised wish to live forever.

Clearly, as others have emphasized, such

⁵ This is a point made by Dr Murray Lewis in his discussion of a preliminary version of this paper presented before the Western New York Psychoanalytic Society, Rochester, New York, 2 December 1971.

preoccupation with time bespeaks a preoccupation with death (Bonaparte, 1940); (Pollock, 1970), (1971a), (1971b), (1972). Hence it is not surprising with such a buildup that the nemesis concept of my 58th year should become intensified and require the defensive manoeuvres demonstrated in the transposition of the fatal age from 58 to 59. But another important process was also at work. When I reached my father's age at the time of his death, in the primary process language of the unconscious he and I became twins. I put forth as evidence the photographs, both taken at age 58, and the uncanny feeling when I first looked at my own photograph in London. Thus we see how the unconscious wish to be reunited with my twin combined with the long dormant nemesis complex to reactivate the unconscious struggle over whether I was to live or to die. The defensive displacement of the fatal age from 58 to 59 easily drew support from two other historical facts. First was that in fact my father had survived all but the last two days of his 58th year; he died on 12 December, two days before his 59th birthday. Thus it became easy to think of him as 59. But also, his death occurred two days after my (our) 15th birthday (10 December). Thus not only were our birthdays close together, that is we were almost twins, but also the issue of which of us (my father or I) passed his birthday two days after and which two days before his death could easily become confused. And so it did, for during that period when I was thinking that he died in his 59th year I had it in my mind that I was only 14 when he died. Evidently I had transposed the birthdays in relation to his death date. In sum, the unconscious wish to re-establish my twinship simultaneously provided material for both sides of the conflict. My father and I had become twins and I could use the confusion of identities to effect a defensive transformation of dates.

The sense of pleasure, even triumph, experienced during and after Dream 3, the successful examination dream which anticipated acceptance of age 58, may also be seen as reflecting a feeling of harmony between ego and superego. For the moment at least I had successfully placated my archaic superego by falling back on the narcissistic gratification of reunion with my twin (father), thereby sharing his fate with pleasure.

ANNIVERSARY REACTIONS, THE GIVING UP–GIVEN UP COMPLEX, ILLNESS AND THE DURATION OF GRIEVING

The sequence of events as I approached the last few months of my 58th year (1972) reveals an erosion of defences, but it is difficult to be sure in what order these changes occurred. The reader will recall that in September an old complaint of bleeding haemorrhoids had recurred and soon thereafter manifestations of anaemia developed but were ignored or rationalized. I responded by reducing my workload, walking more slowly, taking the elevator rather than the stairs, but I did not consult my physician. Dream 3 occurred in the midst of this period (17 October) but it was not until 4 November that the magnitude of the problem was finally recognized. Thereafter my health improved markedly and, as the critical anniversary weeks of December came and went, I remained entirely well.

Dream 3 heralded a shift in the defensive pattern. The nemesis threat of age 58 broke through into consciousness, but with the reassuring thought that I had already safely traversed the first 10 months. This shift served to reinforce the denial of illness and establish harmony between ego and superego as indicated by the intense pleasure I felt in and after Dream 3. But other questions must be raised. At one level I clearly knew I was ill and even fleetingly entertained various ominous diagnoses. More important was my reluctance to communicate to others any concern about my health. Actually my attitude could better be described as secretly fatalistic. This suggests that the illness itself was being used in the service of the unconscious life–death conflict implicit in the nemesis complex. This relative lack of concern, the fatalistic acceptance of illness in autumn 1972, was in fact reminiscent of my response to the myocardial infarction in June 1964. The illness, so to speak, had once again provided confirmation of my unconscious fantasies, the acceptance if not indeed pleasure in the fate I had prescribed for myself—or more accurately, for us, that is the recreation of the twin unit in death.

One final question cannot be answered but must be raised. Was the recurrence of bleeding, and the complications that ensued, in any way precipitated or contributed to by the psychological state I found myself in autumn 1972 as I approached the fateful December anniversary? For unconsciously I knew perfectly well that this, and not the next year, was the 'year of decision'. Such a proposition fits well with Schmale's (1972) formulation of the giving up—given up complex. Schmale points out that there are many milestones in life which require a shift in one's expectations of others and goals for oneself.

The giving up part of the complex constitutes the inability of the individual to let go or give up wished for gratifications which have been lost (helplessness) or to give up self-selected goals or ambitions which are unachievable (hopelessness). The *given up* part of the complex indicates the resolution phase which follows the recognition and tolerance of the loss of gratification and a final recognition that the old wished for gratification is not to be achieved.

It has been postulated that somatic disorders for which there are existing somatic predispositions or external pathogens present may be facilitated in their appearance at the time the giving up—given up complex is being experienced. More specifically, the illness may develop in the period when the person is still clinging to the old sources of gratification and has not yet reached and accepted a new position. Such a phase may be fleeting, recurring or prolonged. Thus empirically it has been noted that illnesses occur more frequently at any point of life change, even some ostensibly pleasant or apparently trivial (Schmale, 1972); (Rahe, 1972).

Anniversary reactions and the development of illness on such occasions, especially when occurring years after the original traumatic event in a person who has been functioning well and has maintained good health over those years, indicate that the given up phase, the phase of resolution, may be relative. Persistent unresolved conflicts may remain unconscious and effectively defended against, until reactivated by the stimulus of the anniversary. Here the quality of fate intrudes, for the course of life may otherwise appear to be running smoothly. Then apparently out of the blue the apparently long-abandoned wish or goal reasserts itself, the giving up—given up complex reappears and in that setting illness may ensue. In my own case I suggest that the myocardial infarction on 9 June 1964 occurred at the end of the first year of mourning when delicately balanced defences against giving up were disrupted by the events of the preceding week. By autumn 1972 the work of mourning had been largely but not completely achieved, only to be reactivated by the approaching 44th anniversary of my father's death as the culmination of the nemesis age of 58.

All of this raises the question as to whether certain key losses in life are ever actually completely resolved and to what extent the impact over time of such losses is cumulative. Freud (1908) opined that a loved object is never really relinquished. 'Actually we can never give anything up; we only exchange one thing for another. What appears to be renunciation is really the formation of a substitute or surrogate.' Certainly analysts are familiar with the extent to which apparently fully accepted losses prove during analysis to be far from resolved. Greene (1965) has pointed out that even at a superficial level one cannot make a judgment about the degree of resolution of grief until the end of the second year when the reactions to the important first anniversaries without the deceased, e.g. the first vacation, the first birthday, etc., can be assayed. At such times, and sometimes even over several years, it is not uncommon for at least brief feelings of sadness to recur. Forty-five years have passed since my father's death and feelings of sadness, even on anniversaries, had long since dissipated, perhaps for the last 40 years. Yet during 1972 I found myself more often thinking of him, particularly at times when receiving recognition for my own accomplishments. Feldman (1956) described 'crying at the happy ending' as the reaction to the awareness of what had been missed during the period that culminated in the happy ending; they are tears of sadness, not of joy. In brief, memories of that long distant loss, presumably long since resolved, were reactivated.

Ten years have passed since my twin's death. The question impossible for me now to resolve is whether I was reacting in 1972 to my father's death, to my brother's death, or to a condensation of the two, the twin complex.

CONCLUSION

Caveat lector! Derivative as it is from fragments of self-analysis, everything in this paper must be regarded by the reader as data. Indeed, perhaps the most prudent, and rewarding, attitude for the reader would be to consider the paper as though it were the manifest content of a dream that had already undergone secondary revision in writing. In this sense everything is data, the form and sequence of the presentation, the formulations, the omissions and elisions that the reader will immediately detect, and indeed even the motivation to write the paper in the first place.

REFERENCES

- ARLOW, J. A. 1961 In panel report by E. D. Joseph: The psychology of twins *J. Am. Psychoanal. Assoc.* 9:158-166 [→]
- BONAPARTE, M. 1940 Time and the unconscious *Int. J. Psychoanal.* 21:427-468 [→]
- BOWLBY, J. 1969 Attachment and Loss, vol. 1: Attachment New York: Basic Books. [→]
- BURLINGHAM, D. T. 1949 The relationship of twins to each other *Psychoanal. Study Child* 3-4 [→]
- BURLINGHAM, D. T. 1952 Twins: A Study of Three Pairs of Identical Twins New York: Int. Univ. Press. [→]
- BURLINGHAM, D. T. & BARRON, A. T. 1963 A study of identical twins *Psychoanal. Study Child* 18 [→]
- CHAPMAN, A. H. 1959 The concept of nemesis in psychoneurosis *J. nerv. ment. Dis.* 129 29-34
- ENGEL, G. L. & SCHMALE, A. H. 1967 Psychoanalytic theory of somatic disorder: conversion, specificity and the disease onset situation *J. Am. Psychoanal. Assoc.* 15:344-365 [→]
- FELDMAN, S. S. 1956 Crying at the happy ending *J. Am. Psychoanal. Assoc.* 4:477-485 [→]
- FREUD, S. 1908 Creative writers and day-dreaming *S.E.* 9 [→]
- FREUD, S. 1915 The Unconscious *S.E.* 14 [→]
- FREUD, S. 1916 Some character-types met with in psychoanalytic work *S.E.* 14 [→]
- GIFFORD, S., MURAWSKI, B. J., BRAZELTON, T. B. & YOUNG, G. C. 1966 Differences in individual development within a pair of identical twins *Int. J. Psychoanal.* 47:261-268 [→]
- GLENN, J. 1966 Opposite-sex twins *J. Am. Psychoanal. Assoc.* 14:736-759 [→]
- GREENE, W. A. 1965 Disease response to life stress *J. Am. med. Wm. Ass.* 20 133-140
- HILGARD, J. R. 1953 Anniversary reactions in parents precipitated by children *Psychiatry* 16 73-80
- JOSEPH, E. D. 1959 An unusual fantasy in a twin with an inquiry into the nature of fantasy *Psychoanal. Q.* 28:189-206 [→]
- JOSEPH, E. D. 1961 Panel report: The psychology of twins *J. Am. Psychoanal. Assoc.* 9:158-166 [→]
- JOSEPH, E. D. & TABOR, J. H. 1961 The simultaneous analysis of a pair of identical twins and the twinning reaction *Psychoanal. Study Child* 16 [→]
- KRAMER, M. K. 1959 On the continuation of the analytic process after psychoanalysis (a self-observation) *Int. J. Psychoanal.* 40:17-25 [→]
- LEONARD, M. R. 1961 Problems in identification and ego development in twins *Psychoanal. Study Child* 16 [→]
- LIDZ, T. 1961 In panel report by E. D. Joseph: The psychology of twins *J. Am. Psychoanal. Assoc.* 9:158-166 [→]
- MINTZ, I. 1971 The anniversary reaction: a response to the unconscious sense of time *J. Am. Psychoanal. Assoc.* 19:720-735 [→]
- POLLOCK, G. H. 1970 Anniversary reactions, trauma and mourning *Psychoanal. Q.* 39:347-371 [→]
- POLLOCK, G. H. 1971a Temporal anniversary manifestations: hour, day, holiday *Psychoanal. Q.* 40:123-131 [→]
- POLLOCK, G. H. 1971b On time, death and immortality *Psychoanal. Q.* 40:435-446 [→]
- POLLOCK, G. H. 1972 On time and anniversaries In M. Kanzer (ed.), *The Unconscious Today* New York: Int. Univ. Press.

- RAHE, R. H. 1972 Subjects' recent life changes and their near-future illness susceptibility In Z. J. Lipowski (ed.), *Psychosocial Aspects of Physical Illness* Basle: Karger.
- SCHUSTER, D. B. 1969 A note on grief *Bull. Philadelphia Ass. Psychoanal* 19 87-90
- SCHMALE, A. H. 1958 Relationship of separation and depression to disease. I. A report on a hospitalized medical population *Psychosom. Med* 20 259-277
- SCHMALE, A. H. 1972 Giving up as a final common pathway to changes in health In Z. J. Lipowski (ed.), *Psychosocial Aspects of Physical Illness* Basle: Karger.
- TICHO, G. R. 1967 On self-analysis *Int. J. Psychoanal.* 48:308-318 [→]

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