On "Telepathic Dreams?": an Unpublished Paper By Robert J. Stoller
Elizabeth Lloyd Mayer
*J Am Psychoanal Assoc* 2001 49: 629
DOI: 10.1177/00030651010490021201

The online version of this article can be found at:
http://apa.sagepub.com/content/49/2/629

Published by:
SAGE
http://www.sagepublications.com

On behalf of:
American Psychoanalytic Association

Additional services and information for *Journal of the American Psychoanalytic Association* can be found at:

Email Alerts: http://apa.sagepub.com/cgi/alerts

Subscriptions: http://apa.sagepub.com/subscriptions

Reprints: http://www.sagepub.com/journalsReprints.nav

Permissions: http://www.sagepub.com/journalsPermissions.nav

Citations: http://apa.sagepub.com/content/49/2/629.refs.html
ON "TELEPATHIC DREAMS?":
AN UNPUBLISHED PAPER BY
ROBERT J. STOLLER

In 1973 Robert Stoller wrote a paper on a series of dreams—his own and his patients’—that he reluctantly found himself calling "telepathic." He never submitted the paper for publication, though he returned to the topic of unconscious communication and telepathy with increasing fascination in the years before his death. Publication of Stoller’s paper seems particularly opportune just now. In it he pleads for open-minded examination of data, however alien to current scientific belief those data seem. In the past, despite numerous published reports of possibly telepathic experiences in analysis, their investigation remained relatively one-sided, since a technical posture of anonymity with patients constrained analysts from revealing that a communication struck them as telepathic. This has limited what analysts have been able to learn about the information actually exchanged, how it was exchanged, and whether the communication was experienced as uncanny by the patient. Recent attention to the intersubjective nature of the analytic situation has led to a deemphasis of anonymity, opening freer dialogue that may facilitate the rigorous investigation Stoller calls for. Such investigation may further analytic understanding of unconscious mental function and communication in the clinical setting, and lend perspective to the growing body of carefully controlled experimental research on anomalous mental phenomena.

*The progress of science implies not only the accumulation of knowledge, but its organization, its unification, and this involves the periodic invention of new syntheses, coordinating existing knowledge, and of new hypotheses which give us methods of approaching the unknown.*

—GEORGE SARTON

In 1997, Carol Gilligan and I initiated an ongoing discussion group at the American Psychoanalytic Association’s Midwinter Meetings; it was called “Intuition, Unconscious Communication, and ‘Thought
Transference.’” Some of its most interesting developments have been quite unexpected. One came from Carole Morgan, who called following one meeting to tell me she had often discussed the topic of unconscious communication with Robert Stoller.1 He had been both her mentor and a valued colleague. She told me she had a paper of his I might like to see, titled “Telepathic Dreams?” He never submitted it for publication but had, several years prior to his sudden death, returned to thinking about it, increasingly convinced that further exploration of unconscious communication would be the preeminent frontier for psychoanalysis. He wrote the paper in 1973.

It was very much a draft. As soon as he wrote it, Stoller apparently gave it to Ralph Greenson to read. While Greenson was much impressed by it (indeed, “shaken” and “permanently affected,” as the following text describes), Greenson purportedly told Stoller that if he valued his career as a young and reputable psychoanalyst he would, at least for the moment, put it away and not try to publish it. Stoller followed Greenson’s advice and filed the paper for some years. According to Morgan, as Stoller’s interest turned more and more to the topic of unconscious communication, he finally went back to the paper, which he discussed with Morgan at some length. She sent me the original typescript, which Stoller had given her. With the permission of his wife, Sybil Stoller, that paper is reproduced here. The original typescript had a few handwritten emendations by Stoller that are included in this text; marginal comments made by Greenson are reproduced in footnotes

1Robert J. Stoller, M.D. (1924–1991) was the author of eleven books and over 115 psychoanalytic articles. He did pioneering work in the study of gender identity and sexual excitement while teaching at UCLA and the Los Angeles Psychoanalytic Institute. He introduced the distinction between sex and gender to psychoanalysis, a distinction now taken as basic. His early papers on primary femininity are classics in the study of female development. His later investigations of transsexuals, transvestites, and pornography were controversial but remain at the center of psychoanalytic discussions of sexuality. He was widely known as a brilliant clinician and supervisor. His interests were far-ranging and led him repeatedly to challenge what he saw as received wisdom or use of jargon, particularly psychoanalytic jargon. He was an outspoken advocate for bringing fresh and vitalizing perspectives to bear on psychoanalysis by considering relevant findings from other fields.

Training and Supervising Analyst, San Francisco Psychoanalytic Institute; Associate Clinical Professor of Psychology, University of California at Berkeley and of Psychiatry, University of California Medical Center, San Francisco; Project Advisor of the Princeton Engineering Anomalies Research Laboratory; Research Fellow of the International Consciousness Research Laboratories, Princeton.

Submitted for publication June 6, 1998.
preceded by my initials (ELM). I have added a few additional notes bearing my initials to clarify Stoller’s original text as needed.

Cautiously, and with real trepidation about the kind of company he is keeping by interesting himself in telepathy, Stoller’s primary focus in this paper is to issue a plea for open-minded examination of data, even data that have “as yet no respectable explanation.” So he presents dream after apparently telepathic dream, acknowledging that he is uneasy about how alien to his scientific beliefs they seem. At one point he expresses concern that his experiences may turn out to reflect something simply wrong with him. But, as he also notes, “If, someday, it is found that such experiences reflect an ordinary enough function of human psychology, it will seem quaint that I was uneasy.”

In the end, he leaves us with many more questions than answers. His primary intention is to stimulate a process of what he calls responsible data collecting concerning apparently anomalous, possibly telepathic experiences.

Our discussion group at meetings of the American Psychoanalytic Association, “Intuition, Unconscious Communication, and ‘Thought Transference,’” has much the same intention. It seems clear from reports of its many participants that a number of analysts have had experiences similar to Stoller’s, but have been reluctant to go public with them. Perhaps publication of Stoller’s paper will not only encourage analysts in the responsible data collecting he advocates, but also encourage a greater degree of comfort in making such data publicly available for scientific scrutiny. If there is anything real and meaningful in these reports, the first step toward grasping their scientific import is for them to be open for public discussion and wider general consideration.

In the meantime, we are far from understanding the nature of such experiences. Given the current psychoanalytic climate, however, it does strike me that we may be at a point where we can start to study them with greater freedom than in the past. If so, that’s important. It may help remove us from the realm of the occult and the parapsychological, enabling us instead to ask whether we are simply being confronted with one more realm of ordinary human psychology, a realm that appears anomalous because its implications cannot at present be adequately integrated into familiar psychological and scientific models.

Analytic considerations of possibly telepathic experiences have appeared sporadically ever since Freud—and, as is by now well known, Freud repeatedly corresponded with colleagues (Ferenczi and Jung in

It is notable that almost never in those papers has the reporting analyst revealed to a patient the fact that some communication between the two of them has struck the analyst as telepathic. This poses, I believe, a real problem, not only in pursuing the question of whether something telepathic may have occurred, but for understanding exactly what sort of communicative process may in fact have occurred. If “telepathy” involves some form of communication currently considered anomalous, it is only through meticulous investigation of the communicative process itself that we will be able to understand what may or may not have been anomalous. And if only one party to the communication is considering its nature, our ability to learn about what it entailed will necessarily be limited. In previous psychoanalytic reports of possibly telepathic communications, though the manifest and latent contents of those communications may have been usefully understood in terms of personal meanings to the patient, collaborative investigation concerning the question of telepathy itself has been ruled out.

That’s where we may be freer these days. Many analysts now feel increased comfort disclosing aspects of their personal reactions to patients, including reactions concerning explicit ways in which something a patient says has an impact on the analyst. Reaching some collaborative understanding of how those reactions may be relevant to the analysis is viewed as a legitimate and necessary part of the analytic process (Jacobs 1991; Ehrenberg 1992; Hoffman 1992; Gerson 1996; Renik 1996; Frank 1997; Stolorow and Atwood 1997; Cooper 1998; Mitchell 1998; Spence 1998).

This trend may have significant implications for opening up our investigation of possibly telepathic experiences between analysts and
patients. It may place us in a position to study previously unexplored nuances of how both patient and analyst experience their communications along a number of relevant dimensions—for example, through mutual examination of precisely what information was actually exchanged and by what means; through joint investigation of each party’s state of mind in the purportedly telepathic moment; and through mutual reflection on how each experiences his or her degree of affective attunement.

We have also been paying increasing attention to how analysands read and interpret the analyst, with the notion that what our analysands have to say about us may directly reflect who we are in the analytic relationship, not just elements of their transferences to us (Hoffman 1983; Aron 1991; Greenberg 1991; Renik 1995; Slavin, Rahmani, and Pollack 1998). We have increasingly opened the territory of what patients know about their analysts as legitimate analytic terrain, thereby expanding our ability to examine all aspects of what patients know, anomalous or apparently telepathic knowing included. We are less likely now than in the past to feel that analytic progress depends on our remaining anonymous to our patients. As our need for anonymity relaxes, we may feel less constrained about confirming or disconfirming what patients think they know about us, which gives us greater freedom to find out more concerning exactly what and how they actually know. In fact, if we abandon anonymity as an ideal, we may find ourselves surprised by the extent to which patients respond by actually expanding what they have to tell us—especially about ourselves. It is my guess that patients have tended to fuel our need for anonymity by restricting what they have told us to emphasize precisely the transference-driven fantasies we have expected to hear. To that extent, current shifts in clinical theory may allow us not only to explore more fully how patients know what they know, but to access in greater detail what it is they do know.

In a number of ways, then, I anticipate that our growing focus on what has been called the intersubjective nature of the analytic relationship will open up our investigations, leading us to a better understanding not only of conventional intersubjective reality, but also of the less conventional, certainly equally intersubjective, sphere of “telepathy” and other possibly anomalous perceptions. The issue here is not the overall merit of an intersubjective clinical theory as against its alternatives. The point is simply that the articulation of intersubjectivity
Elizabeth Lloyd Mayer

has promoted an atmosphere of greater technical flexibility that may facilitate the joint investigation of any communication.

Finally, to provide greater context for Stoller’s paper, it is worth noting that significant experimental research has accumulated in recent years to suggest that telepathy—or remote perception, to use its more contemporary designation—may constitute a real and scientifically verifiable phenomenon (Puthoff and Targ 1976; Puthoff, Targ, and May 1981; Jahn and Dunne 1987; Schlitz and Honorton 1992; Delanoy et al. 1993, 1994; Morris et al. 1993; Bem and Honorton, 1994; Puthoff 1996; Targ 1996; Utts 1996; Nelson et al. 1996; Radin 1997; for discussions with specific relevance to psychoanalysis, see also Mayer 1996a,b, 1999, 2000a, in press; Lazar 2001). This empirical research bears directly on the question of how one mind comes to know another. Getting to know the mind of another is precisely the business of the psychoanalyst. While experimental studies have made significant progress in digitizing the data of remote perception—such that replication, validation, and other criteria of objective science have not only been achieved but have led to some very impressive experimental results—the digitizing of data that makes for good objective science inevitably limits the nature of the data that can be represented. In particular, there are limits to how meaningfully the complexity of human relationships can be digitized.

That may be where the psychoanalytic situation comes in. As psychoanalysts, we are immersed not only in studying how one mind comes to know another, but we do that within the very particular context of a human relationship, given all its intensity and vicissitudes. As a result, I believe that the psychoanalytic situation may be peculiarly suited to investigating those aspects of remote perception that experimental research has failed adequately to address. The science of psychoanalysis allows us to generate hypotheses about how two people perceive each other and learn to relate in the clinical situation. Our principal concern is with step-by-step elucidation of the ways in which an intensely intimate relationship with another person permits the development of both self-knowledge and knowledge of the other. That being the case, the psychoanalytic situation may permit us to look systematically at precisely those variables that objective science, by its nature, cannot adequately capture—things like empathy, affective attunement, and other forms of human connectedness—in terms of their possible relation to anomalous forms of human perception.
Stoller’s paper gives us a place to start. Perhaps, as he suggests, “it is time to take a look.”

THE TEXT OF ROBERT J. STOLLER’S “TELEPATHIC DREAMS?”

Although these experiences began in 1960, I have hesitated ever since to report them, they having as yet no respectable explanation. I am not intrigued with the subject of telepathy nor a devotee of that literature, usually feeling the reports I chance upon to be foolish or fraud. Having finally decided to present these data, I shall not like having directed at me the sort of derogatory thoughts I often have when others broach the subject. But the data—seemingly telepathic dreams—appear more than coincidental; perhaps it is time to take a look.

To minimize premature speculation, I shall restrict this report to meager but accurate descriptions; it is too early for theory or explanations. Responsible data collecting is a good start, however; there must be other analysts with similar experiences. Yet, even though understanding of this subject is still minimal, richer descriptions of what is going on during each analytic hour will be omitted. Even omitted are the patient’s complete dream, associations, or the state of the analysis at the moment. Were we to look closer for explanations, this expanded material should be necessary, but without a preconceived notion of what is significant, how does one know what to leave out? I have resolved this by leaving out almost everything, except that part of a patient’s dream that seems to have drawn its elements from the immediately preceding events in my life. With material as odd as what follows, the reader is at the sort of disadvantage we all experience when confronted with alleged seers, psychics, and the rest of that mostly disreputable crew who inhabit this strange land—not to mention the many delusional eccentrics who also claim telepathic and like powers.

The possibility that I am lying might also be in the mind of some readers; the absence of corroborating data hardly establishes a strong scientific position. In fact, the only witnesses I can call, besides my notes written or dictated at the end of hours, are—and in only one instance—two analytic colleagues. While there is a small, at times exciting, analytic and psychiatric literature on telepathic dreams, including good experimental work, I choose not even to review that here, in order that the focus can be on data alone. In looking to others
for protection, I cannot even ask Freud’s writings to sanction these ideas, but must only present the findings and let the reader judge.

**Clinical Material**

So far as I know, this is how it began. I was doing supervisory work as a candidate with Dr. Ralph R. Greenson; we got along well. I found myself most impressed with Greenson’s deep understanding of my patient and his capacity, far beyond mine, to read her unconscious processes despite my being with her daily. (He had first referred me the patient, a relative of friends of his.)

I sketch in these few details in order to suggest to the reader what was powerfully present in the supervision—an intense relationship on my part. At this time, 1960, our relationship was warm, but I kept a respectful distance.

In keeping with that distance, it had always been my style to greet Greenson with no more than a “hello.” One day, however, I followed this with “How are you?” and would not have even noticed having done so had he not in fact answered in a nonperfunctory manner. My conscious experience at the moment I asked—and my only memory still today—is that I did not even notice asking after his health, having no greater reason to think about it. He, however, answered, “I am all right now, but we had a terrible experience over the weekend. Saturday night, Danny had a motorcycle accident in the San Francisco area and was almost killed. He had never been on a motorcycle before, and was just trying it out when he lost control and was smashed up and taken to the hospital. He has a compound comminuted fracture of the left leg, but it looks like he will be okay. I only hope that he will be able to start medical school on time.” Danny is his son, whom I had known somewhat since he was sixteen.2

I was astonished, having just had an experience that never happened before in my life (and has never happened again). On the previous Saturday night / Sunday morning [the session with Greenson was on the subsequent Thursday], I had the following dream—unlike

2ELM: Here Greenson has written a marginal comment suggesting that Stoller add a footnote to the paragraph as follows: “Later, Dr. Greenson told me I turned white—i.e., guilt, fear—re [Danny].” In the next section of the paper, Stoller describes his frank wish to be Greenson’s son himself. Presumably, in the face of an accident that seriously injured Greenson’s actual son, the guilt and fear mobilized by Stoller’s wish to replace Danny was what Greenson thought he observed in Stoller’s turning white.
any I have ever had in my life before or since, unlike in its theme and its details, although using in its manifest content an environment with which I had once been familiar. Here is my dream: I am back again in the emergency area of the San Francisco hospital where I had worked in the forties as a medical student and intern. The appearance of the emergency area is as undistorted as I would remember it years later, if awake. They bring in a medical student; he has just received a compound comminuted fracture of the left leg, so they announce.

On Monday morning, during my own analytic hour, I reported the dream and had only meager associations, mostly to the emergency area and the intense medical and surgical experiences I had had there (nothing about Greenson, his family, or our relationship); there had been plenty of motorcycle accident cases brought in, but never a medical student. My analyst, a close friend of Greenson’s, made no comment. I wish to underline that I had received no information about the accident during the twenty-four hours between the dream and reporting it in my own analysis, or from Monday to my supervisory hour on Thursday.3,4

3The usual argument at this point is that I heard of the accident some time Sunday, that I repressed the knowledge, and that I then shifted the memory of when the dream occurred back to Saturday, but really dreamed it a night later. Such things occur; how does one prove the same did not with me? Or perhaps my wife also repressed hearing about it (for, had I been told, she would surely have known as well) and then shared my mistaken story?

And when we get to patients’ dreams, it will be said that the patients were secretly spying on me (especially on weekends or trips away from Los Angeles), either directly or through mutual acquaintances. Or that I, beyond my awareness, communicated the information that appeared in their dreams. Or that I told them of these coincidences and thus alerted them to my surprise. For me simply to declare these are not the case is unsatisfactory. And to mobilize convincing data would require showing what happened when patients did discover bits and pieces of my life and how actively and visibly they handled these in dreams, associations, and affects. As to a challenge that I unconsciously communicated the data or repressed knowledge of doing so, how can that ever be denied? It is the perfect philosophic theory: untestable, irrefutable.

4ELM: Ralph Greenson’s son Danny went on to become a training and supervising analyst at the San Francisco Psychoanalytic Institute. I called him after reading Stoller’s paper to ask about his memory of these events. He recalls hearing about Stoller’s dream from his father in precisely the terms Stoller describes here. He added that his father had always held to a staunchly scientific worldview, and was vociferous in his antipathy for anything he viewed as mystical or uncanny—“interest in the uncanny went completely against his grain.” However, Danny recalls that his father was deeply impressed—indeed, shaken—by Stoller’s dream and had been convinced it represented an inexplicably telepathic occurrence, something that couldn’t be explained away. Years later, in telling his father about another incident that included a dream which seemed inexplicable except in terms of a possibly telepathic perception, Danny recalls that his father was not only accepting of the possibility of
It seems that at times a telepathic “ability” takes over and that this quirk was started in my then filial relationship with Greenson. It started with him, and, for the present, it has stopped, also in part because of my relationship with him. In the fall of 1970, I had had enough of it and “just” turned it off. The pace had increased; Patient #4 had had several such dreams in a few weeks, and I was recounting them to Greenson with my usual enthusiasm. I suddenly felt fed up with it and told myself that was enough. Since then, except for a couple of “possibles” with a patient not reported herein, there have been only two more with Patient #4 (reported below as Dreams 12 and 13, which occurred just a year apart).

Patient #1

1. A few months after the dream of the medical student in the motorcycle accident, my patient whose analysis Greenson was supervising had the following dream:
There was a party going on at somebody’s home. There was a big crowd of people milling around in a large room, which instead of having a wall had one whole side made of glass. An older man whom I do not know but who was very kindly was there. He walked by me carrying some large object and suddenly smashed through the glass. I was terribly frightened that he was hurt, and yet in some strange manner he was not. There was glass all around.

The dream, reported on Monday, was dreamed Saturday night / Sunday morning. That evening, I had been at a party held for a political candidate. A crowd of people were in the living room of the home where the party was given, and after the speaker finished, chairs were being moved out the sliding glass doors that made up one wall of the room. I had carried chairs several times through the open door when someone closed it. Because of the back lighting, the glass was invisible, and I, carrying a chair, had crashed through. Although glass fell all over, I was scarcely scratched.

2. (Monday):

A man explained to me a new invention. It is a new way to build and market homes. What he showed me was a big, central concrete pole. On this could be hung individual rooms that one could buy at the store, in any number and in any style.

The previous day, a friend had visited from San Francisco and told me of a conversation with an architect who was trying to market a new idea: one would build a central concrete core upon which could be hung prefabricated rooms of any size and number.

3. Some months later, when my new home was being constructed (and there is no reason to believe that the patient knew I was having a home built), she dreamed (Monday):

I am walking through a house that is under construction. I walk from one end to the other; I get to the part that is to be the bathroom. And I walked into the bathroom and saw that they were building a sunken bath. Someone had put an initial in the still soft cement.

The day before, walking through the unfinished house, I discovered that the sunken bath, put in the day before, had been mildly vandalized, with an initial tracked in the hardening terrazzo.
Patient #2

1. (Monday):

There is some kind of event, like a ceremony, going on, with lots of important people, but it is also like a funeral. There are a number of limousines parked on the road. They are in front of a big, new building. Off in the distance are mountains.

This dream took place over a weekend when I had been away to attend the dedication of a community center, to be named after my father-in-law, who had died three years before. The event took place in Salt Lake City, a city with mountains in the background. The limousines had in fact lined up, first for the funeral three years before, and now for the honorific ceremony.9

Patient #3

1. (Friday):

I was pulling a toy wagon with a bottle of chemicals—acid. I spilled some on my hand, and it burned. I looked for snow to rub on it and make it feel better. (This does not follow a weekend or other pause in analysis.)10

The day before, my son burned his hand on some chemicals in a toy set. He says the first thing he did was to get some cold water to soothe it. Then, at the dinner table, as we sat talking about it, someone raised the question whether the proper way to treat a burn would be not to put the hand in water, but to freeze it.

Patient #4

1. (Monday):

I am at the beach. There are large waves. Everyone is watching. There is a pier. I am carrying a surfboard and around it is wrapped a towel, and it looks like it is in [sic] a boy. . . .

9ELM: Greenson has noted in the margin his suggestion to Stoller that Stoller omit reports of Patient #2, Patient #3, and Dreams 4, 5, 8, 9, and 10 of Patient #4. Apparently Greenson found them less convincing than the other dreams in suggesting the possibility of telepathy and thought the paper would be more effective if Stoller limited his examples to only the most compelling ones.

10ELM: Later in this paper, Stoller notes that most of the dreams he is reporting occurred during or after a separation or missed hour. Presumably, that is why he makes a point here of noting that there has been no break. See also Patient #4, Dream 2.
She recalls another dream:

We are at a beach; there are a number of beach houses; they are very close, one on top of the next. They are small, and it is a unique place.

She then describes two of the houses; after noting the first, she says that the other is a white frame house with green foliage. Later in the hour, still having associations to the dream, she recalls having read *Lysistrata* some time in the past, and how the men covered their erect penises, which makes her think of the surfboard with the part of it that is covered.

She had this dream shortly after my return from Christmas vacation. An outstanding feature of that vacation was the problem of transporting my sons’ surfboards. Before embarking, the boys devised a makeshift system for protecting the skag, a rudder that protrudes from the board’s bottom. To prevent it from being broken in transport, they built cardboard boxes in which to hold the boards, with a special, complicated box-like business for the skags. For all their preparations, we still had a number of crises related to the boards.

The white frame house with the green foliage at the beach matches a house we own, in an area called the Malibu Colony. A distinctive feature of the Colony is that the houses are mostly small, packed very close to each other, “one on top of the next”—and, as is well known in Southern California, the Colony, because of its movie people, could well be described as “unique.” The patient has never been there and did not know I had a house there.11

A few days before the patient had this dream, my wife began reading *Lysistrata*, and on the evening the patient had the dream, my wife read to me a part of the play in which the men were “priapic” (she had asked what the word meant).12

11As footnoted earlier, neither here nor at other points shall I give the evidence—it would have to be culled from fragments of associations, discussions, and dreams of hundreds of hours—why I believe the patient did not know some fact. For instance, might she not have secretly spied to find where the beach house is and then visited without ever informing me? Possibly, though contrary to everything else that has happened in the years of the analysis. Or might she not have followed me on vacation and seen the surfboard coverings? Most unlikely. Or might she not have talked with someone who knows our family? She lives thirty miles away and in a social milieu without contiguity with ours or our children’s, but nothing can be disproved; anything might be coincidence or contrived.

12ELM: “priapic”: of or relating to Priapus, the Greek and Roman god of procreation; phallic; referring to a persistent erection of the penis.
2. (Friday, no break in time from the previous hour):

The patient dreamed that her husband brought home from the office a new television set, amazing in that it had a “wraparound picture: 360 degrees.”

The day before, I saw again a patient who had been in psychotherapy years before. He said that he had just invented a new projection system for television and movies, which can produce a “wraparound picture of 360 degrees.” When he was telling me, I was fascinated, because he has always been most ingenious with optical systems, and this time, I hoped, he would have a grand success.

3. (Monday):

The patient dreamed of a photograph of a man holding the photograph of a still larger man, who is supposed to be physically ideal because he was flexing all of his muscles, “all over, at once, and you could see all of the muscles, but especially he was flexing his hand back.” As she says this, she actually twists her own hand back into a very strange and unnatural position. In the dream, the man’s face is grinning or grimacing, as if he was using all his muscles. This part of the dream was in very sharp focus, she said.

The previous night, I had been at a concert to hear the violinist Spivakossky. Before the concert began, I was stopped by a friend who said that he was always astonished on seeing how Spivakossky contorts his hands; it doesn’t seem possible how he can play under these circumstances—and then my friend showed how the artist flexes his hand, especially his bowing, but also his fingering hand, pushing it back in such a way that one is amazed that the violinist can even work his hands. And as I later watched the concert, this was evident; it was as if he had a neurological disease. Both my wife and I could not help but comment on it at the time; it was very much in focus in our minds. Accompanying his playing, the artist’s face was contorted with grimacing—often a grinning grimace.

4. (Monday):

... a man kissed me, and when he did so, all the teeth on one side of my mouth came out, right to the ridge, broken off, but the root was still there. I ran out because I needed a dentist for the emergency...
I had been away for the weekend and, on returning, one of my sons said that he had been surfing and had knocked out a tooth, which was broken off to the root. The root was showing, and so he had gone to the dentist for the emergency. This dream, however, may not exemplify the possibility of telepathy, for the patient had the dream on Friday night / Saturday morning. Although the accident happened Friday afternoon, I did not learn of it until my return on Sunday afternoon.

5. (Monday):

I had a bucket of clams. I was with a friend. There was something lodged in one of the shells. It might have been a tennis ball. . . . Then I was with my friend again, with the bucket of clams, and was thinking this object—it might have been a tennis ball—maybe it was bait. A man handed me a rock, which was lighter than I expected and had a lot of mineral deposits on it. He said, “It’s worth a cool million.” Each white spot was a pearl which had receded into the rock. And if you shook it, it would rattle a bit. . . .

As usual, this dream occurred on a weekend. The day before the patient’s dream, I was at the beach and picked up shells. There were several kinds lying about, clamshells too plain to examine and others, prettier. In two of the latter, a tiny round pebble was lodged. On shaking these, I found the inclusions a bit loose and yet too tightly fixed for removal without a knife. At the same time, I picked up a stone, a conglomerate primarily black but streaked with light-colored stone, so catching my attention that I thought it pretty enough to bring to my office. (I have never done this before or since.)

6. (Monday):

I asked a doctor if Jesus was in irons when he walked on the water, and this doctor said very wisely, “Not really.” (Her first association was to recall that, while still not fully awake, she had wondered if Jesus was in a sailboat or not because of the term “in irons,” a sailing term for a situation in which she has often been, in which she feels inept.)

Once again this is a weekend dream; over this weekend, I had two, perhaps related, experiences. The first was that I was reworking the introduction to a book, finishing on Friday but thinking of it all weekend. There was only one remaining uncertainty: I was uneasy about using a joke, feeling it was perhaps stylistically inappropriate and expressed irritation I had toward certain analytic pomposities more clearly than I was sure was safe. This joke, about a conversation between Moses and
St. Peter (as I had been told it), was part of the introduction from its first draft, many months before. In the intervening months, my colleague, Hanna Fenichel, had pointed out that she thought the joke was about Moses and Jesus, since it was Jesus who walked on water. Not only had Dr. Fenichel been my analyst, but a crucial and happy piece of insight in my own analysis had been a dream set off the first time I heard this joke. And so my struggle whether to include the joke in a sober introduction was highly overdetermined.

The weekend was spent at the beach; I was watching sailboats in a race past our house. The point of greatest interest for my wife and I was why the sailboats were all running in a certain direction and then making a right-angled turn to get to a buoy that had to be circled. At the point where they do this, although I know nothing about sailing and had never heard the term “in irons” before, there is a crucial moment when the sailors must flip the sail over; as we watched, we would see everyone on the boat scramble into new positions. In that instant, the boat can hardly move. The patient had told me that “in irons” occurs when one feels inept because “it’s something where you are changing positions in some way, and you get caught between the positions where you should be and where they’re not moving adequately.”

7. (Thursday; the patient had not come in the previous day):

They are building the _____ Shopping Center. My husband and I are watching a man put up sheets of a gray substance like concrete. It’s odd that only one man is doing it. There is a design on the front, knobby things or grooves. On the lower level, there’s grass, dirt, and rocks . . . .

That evening, the wife of a friend with whom my wife and I have been cordial but out of contact for many months unexpectedly called. He is the principal owner of the _____ Shopping Center, which was then being built.

Since the patient was not at the Medical Center (my office) the previous day, she could not have seen the following. A construction job was begun that morning and completely finished by late afternoon; there was no indication the day before that it was to be done. Under normal circumstances, I would not have even seen this minor event, but I happened to be in a conference in a room that faced out upon it. I spent the hour of the conference in extreme boredom, looking out of the window watching the following: there was a concrete wall, the front facade of a medical cyclotron; instead of the wall having a solid,
smooth appearance, it was constructed with many holes in it (apparently related to the function of the heavy machinery—the cyclotron—to be placed within). The holes had a geometrically irregular pattern. Then, this day, one man spent the whole day, alone, putting up, in prefabricated sheets, a gray, concrete sort of material. In reality, as in the dream, grass, dirt, and rocks were at the ground level. Over the months of construction, I was upset to see the workers destroy greenery that had been there, and so that sense of mess was with me as I watched the man at work.

8. (Friday; hour immediately following the previous hour):

There was some porous material, like lava, but it was wet.

The evening she had this dream, I was visiting with Greenson, whom I had not seen for several months, and was describing to him a raft trip through the Grand Canyon. The climax of this adventure, insofar as danger is concerned, occurs when one goes through Lava Falls, where the waves are great and dangerous. As I was telling him this story, I specifically thought that to actually say “Lava Falls,” the only part of the whole run I did mention to him by name, was unnecessary and circumstantial, since he could not know what Lava Falls was; but I was reliving the experience to such an extent that, for my own pleasure, I simply had to mention this by name. I know of no wetter “lava.”

9. (Thursday; the patient did not come in the previous day):

There was a tide pool, a small inlet, and way up above the cliff—lava.

The day before, still thinking of the trip down the Colorado, I had written to a friend reporting on it, especially recounting anecdotes about episodes of my fear as my sons would run risks on the river and the adjoining cliffs. I had written not only about the dangers of Lava Falls, but also of the event when one of my sons, trapped far up on a cliff, beyond rescue, had had to jump into a pool of water below, not knowing how deep the water was. At another point, we pulled into an inlet and hiked up to a waterfall, where the boys jumped off rocks into a pool below while we sat on a cliff above them, watching. On the same day I was writing this letter, there was an article in a national magazine with photographs taken in the Grand Canyon.
Later in this hour, she reports another dream:

. . . a woman said, “My husband and I counted ourselves fortunate. He is in the Music Department at Stanford.” Then we counted our children. There were five. Twins were involved. . . .

The previous day, I received a letter from a colleague to whom I had referred a patient. This patient, whom I had seen in extended evaluation, was very important to me because of a special, delicate relationship I had with her parents. She had decided to go to Stanford University and study in the Music Department, although not a musician.

As to the reference to twins, I have twin boys. (The patient, incidentally, has four children, not five as in the dream.) At this point in her analysis, she had never mentioned whether she thought I had children or not, and so I asked her about this. She did not know if I did, how many, or that I had twins. [ELM: Stoller has here marked the following for deletion: (This patient lives many miles from where I practice and comes from a social milieu—different from most analytic patients in this part of Los Angeles—whose members have no contact with people who might know me.)]

As she went on about the five children and twins, she said that perhaps the twins were in their twenties (older than mine were) and that they were boys (as mine are). She said, “I do not know anyone who does have twins, but I was reading something about chromosomes.” Throughout the previous week, I had been eagerly awaiting a chromosome and blood typing report on a pair of twins; there was great theoretical interest for me, since one of the twins is a transsexual and the other not; if the tests showed the twins were identical, it would help corroborate a theory I was developing.

10. (Friday, no break in time from the previous hour):

In a fragment of a longer dream, the patient describes technical details of the design of a vacuum cleaner—hose, nozzle, tube, and other parts.

The night before, I was reading a Simenon, a crucial part of which concerns an inept foreign agent who sends to his home office a drawing of the vacuum cleaners and their attachments that he sells, the home office believing that these are drawings of some new super-weapon.

11. (Monday):
I was late to a concert at UCLA. . . . I think maybe Mrs. Stoller was there. (This is the first time she has mentioned the words “Mrs. Stoller.”) There were two men in black tie, with doctor’s bags. Maybe they were performers or musicians. I dreamed this Saturday night.

On Saturday night, my wife and I had several of my colleagues—doctors—from UCLA as our guests at a dinner. We were in black tie. Following the dinner, two famous performers—singers who are also entertainers, but not musicians—also in black tie, and backed by an orchestra, put on a great show.

12. I have been away for over a week. While I was away, the patient had the following dream:

I was crossing hills to get to a shabby part of town. There was a shabby grocery shop there. I left the shop in order to see you, and I was with my boys. I was sloppy. They were sloppy. We were in a room that was sloppy. It was like a hotel room. There was a commotion in the corridor. There were strange-looking boys out there with bits of paper. Some of them had beards. They were arguing and talking with you. I pushed past them. I had to come in here, to get a hairbrush, and as I brushed past you said, “Please!” My mother was around. She was younger, very beat-looking, wearing blue jeans and campaign hat, with sleeves rolled up.

During the week I was away—at the same time the patient had this dream—I was reading only one book, which intrigued me and filled my mind (for it touched on memories important to me): the account of General Stilwell and his relations with the Chinese in World War II. Stilwell insisted on wearing a campaign hat and during this time of his life was almost always a sloppy-looking general. The cover of the book shows him in short sleeves, and the crossing of hills is a constant theme of Stilwell’s Burma Campaign and of the Chinese with whom he attempted liaison. For whatever it is worth, the last part of the dream is: “I pushed my mother away. I thought this was a general thing.”

13. (Monday, after a long weekend):

It was the Santa Barbara Building (she says she knows of no such building), in the Spanish Consulate, on the top floor. I was looking out the windows and could see the whole city. And now it was called the Bob Simmons Building. (She thinks this is either about mattresses—Simmons is the name of a manufacturer—of the sin of simony). . . .
A few weeks before, I had been in London briefly and had visited Masud Khan. Khan’s flat is in the same building as the Spanish Embassy in London and has always seemed to me to be on the top floor; even now I am uncertain if the building is taller. I often stand by the window looking out over the city. This is not a casual glancing; rather, I always have an intense sense of pleasure when doing so, soaking in a joy at seeing London.\(^{13}\) I cannot think of his flat without that view also being in mind. During this visit, he told me he understood that the Editorial Board of the *International* had accepted a paper I had submitted some months before.

Then, on the Friday before the above dream, I had written to Khan that I had not yet heard officially from the *Journal*. The paper to be published was the first I had ever submitted to the *Journal* (others had been published but only as parts of the proceedings of International Congresses). I had decided years before not to allow friendship with Khan to tempt me to submit papers to the *Journal*, but with this paper I had broken that vow. Torn between the desire to ask for help to be sure the paper was indeed accepted and the guilt of even wishing for a favor, I had written to him asking him only to find out what stage of decision had been reached. So, although it was not acted on, temptation was stirring in me over the weekend. My first name being “Bob,” the reader will perhaps wonder whether Bob Simmons–simony might not be an accurate way for a dream to condense this temptation to sin. (Simony: “The buying or selling of a church office or ecclesiastical preferment,” from *Webster’s Third International*.) In her associations, the patient expressed puzzlement about the word simony; she recalled having heard of it in her childhood Catholicism but had no conscious knowledge what it meant.

My main conscious purpose in writing to Khan was to invite him to visit Los Angeles.

*A Non-Dream Experience*

I am not aware of dreaming in this manner, except for the onset of this syndrome with the dream of Greenson’s son. I have probably never been in a waking, real-life situation where something of this sort occurred except the following, which happened last Christmas.

\(^{13}\)intact relief and surprise the war ever ended. [ELM: Presumably it is the joy at seeing London intact after the war to which this incomplete sentence refers.]
My colleague, Dr. Richard Green,14 was in his office, which adjoins mine; we are separated by a wall and each of our offices opens out into a third area, where our secretary works. It is impossible for either of us to see into the other’s office unless we are each either in the secretary’s area or standing at the threshold of our own door. It is a quiet Saturday morning; both our doors are open. He calls out from within his office, while I am sitting in my office at the desk, “I have something for you for Christmas.” Every Christmas he has given me a gift, such as wine. I say, jokingly, “What is it—a shoulder patch?” He walks out of his office and into mine and hands me a shoulder patch. I have not seen one for years, being out of touch with things military, and hadn’t been thinking of shoulder patches that day or for months or years previously. (The shoulder patch I wore for most of World War II was a circle, of blue and gold; the one Dr. Green gave me is a circle of the same size, also blue and gold, though with a large white background.)

My conscious awareness at the moment I said it was that I was instantaneously searching my mind for some trivial remark to disguise a flash of curiosity and the possibility of pleasure. Nothing seemed more unlikely, inanimate, or uninteresting than a shoulder patch, though even [at] that moment I knew there are an infinite number of objects that equally well could have fit the category of being uninteresting. Had there been any way I might have subliminally caught a glance at the shoulder patch, it would explain the incident. But I had not. I had not actually yet seen Dr. Green that morning; although I had heard him come in and shuffle around in his office, I had only called out “hello” and not risen to actually walk out and see him.

**Conclusions**

These are the minimum number of such dreams.15 Perhaps there were others that somehow failed to catch my attention. Also, I may have by now forgotten some, still lost in buried notebooks. Additionally, I have left out several that were a bit less striking in their “coincidences”;

---

14Not only is he also, thus, a Green-son, but being younger, his relationship to me was also filial, as once was mine with Greenson. Greenson is about twelve years older than I; Green, about twelve years younger.

15ELM: Stoller’s reference here is unclear: minimum for what? Perhaps he means that this is the minimum number of dreams on which he expects the reader can start to form an impression. Or, given what follows, perhaps he is stating that this is the minimum number of apparently telepathic dreams he can report without more careful investigation of past notes.
and on occasions, as happens with all analysts, what seemed coincidence beyond explanation was not so at all, as I would later learn or calculate.

Besides finding the whole subject alien to my scientific beliefs, I have also hesitated to write this up because of not knowing if something right or wrong is going on in me. If, someday, it is found that such experiences reflect an ordinary enough function of human psychology, it will seem quaint that I was uneasy. At present, I presume there is a psychic “friction” intermittently at work in me that actualizes these dreams, for, as indicated, I do not see how they can simply be coincidences.

Finally, while refraining from speculation, I have a few protospeculative thoughts. First, in every instance except four (and even these were on Friday, just before separation), the dream occurred during a separation—over a weekend, after an hour was missed, or during a time when I was away for an extended period. Second, the patients had few or no associations to the elements in the dreams that reproduced the actual events in my life. Third, these details were different from any that had shown up in the patients’ dreams before, and they never recurred. (I do not want to emphasize this too heavily, for there are other elements that also surface only once in an analysis. What is unusual is that such was the case in all these “telepathic” elements.) Fourth, nothing of this sort occurred in my life before 1960, and except for my patients’ dreams (and the episode with Dr. Green) nothing like this ever occurs now in my life, so far as I know.

**EPILOGUE**

Stoller’s manuscript ends on this less than conclusive note. It is tantalizing to wonder where he might have taken it next. Interestingly, his observations regarding a possible relationship between episodes of separation and apparently telepathic moments with patients have been reported as well by a number of analysts in our discussion group on unconscious communication. Indeed, quite a few have noted that the patients with whom such experiences tend most frequently to occur are people for whom early childhood experiences of separation and loss appear to have been especially profound or salient.

While numerous speculations concerning the nature of possibly anomalous unconscious communications have been discussed in the
group, they remain highly tentative.\(^{16}\) However, the bank of clinical observations does continue to grow. And while reports offered within the group have been impressive, equally impressive have been the numbers of other analysts who have made efforts to contact me outside the group, eager to discuss experiences of apparently anomalous clinical interactions they have felt unable to talk about with colleagues for fear of appearing credulous or crazy. At the most basic level, those descriptions are expanding our access to potentially informative clinical material: to that extent they are certainly in the spirit of the “responsible data collecting” Stoller advocates in his paper. But they are notable in another way as well. The striking degree to which they have remained purely private experiences, often registered as crucially important by the analyst but taboo as regards public exposure, is of significant concern.

A split between private and public theories about what we do has a variety of destructive consequences for clinical work (Mayer 2001). But in this instance, the most salient fallout may be that such a split robs our official clinical models—the models which we teach and write about, and by which we guide our practices—of data that numbers of analysts privately judge to be crucial in determining how they work. Inevitably, then, we are courting the possibility that our models lack critical explanatory power. That possibility does our patients, as well as ourselves, a real disservice, as we attempt not only to help people but also to learn how we might do it better.

The dubious, frankly antiscientific popular literature on the subject of anomalous mental phenomena continues to proliferate. However, there is also a growing body of carefully controlled experimental research (see especially Radin [1997] and recent issues of the *Journal of Scientific Exploration*). The relation between those studies and phenomena observed in the clinical psychoanalytic situation remains to be elucidated. However, to the extent that psychoanalysts,

\(^{16}\)Particularly emphasized in the group’s discussions have been elaborations regarding possibly relevant implications of attachment and mother-infant attunement research (e.g., the work of Beebe, Fonagy, Lachmann, Sander, Stern, Trefarthen, and Tronick), reports of identical twins who appear to communicate in ways that defy usual constraints across space and time (e.g., the work of Lykken, Morris, Piontelli, and Siegel), the burgeoning literature on what the National Institutes of Health have now officially termed “Distant Mental Influence on Biologic Systems”—more commonly described as distant healing or healing through mental intention or prayer—(e.g., the work of Braud, Byrd, Dossey, Grad, Haraldson, Schlitz, and Targ), and recent neuroscientific experiments on intuition conducted by Norman S. Don at the University of Illinois.
with their distinctive approach to examining unconscious mental functioning and unconscious communication, have access to data that bear on the conversation, both analysts and their data belong squarely inside it.

Shortly after Robert Stoller’s death, Otto Kernberg (1992) offered a summary of Stoller’s contributions, describing his extraordinary career as a psychoanalyst and the many ways he advanced our field. Following a long list of scholarly achievements and crucially influential clinical ideas, Kernberg described how, at a certain point in his research on sexuality, Stoller, tongue only slightly in cheek, offered some suggestions to psychoanalysts, after having been startled to note discrepancies between traditional psychoanalytic assumptions and what he had been observing. This recognition jolted him from a position of passive acceptance of those assumptions. His bewilderment soon gave way to curiosity…. His search for understanding led to his discoveries regarding core gender identity, the differences between male and female sexual development, and the interplay of biological determinism and psychological conflict. He concludes his account (in his book Presentation of Gender) with what he calls a list of “idiosyncratic suggestions” for a program of psychoanalytic investigation:

1. Do what you enjoy.
2. Be very curious (an essential feature of skepticism, which in turn is an essential feature of scientific behavior).
3. Do not have a clear-cut plan.
4. Do not know what your conclusions will be or even where you are heading; do not head.
5. Have patience; then always be impatient.
6. Think it over; let it soak; listen closely to the repetitions; let the discoveries find you.
7. Use whatever techniques for data collecting appeal to you, but never stop psychoanalyzing.
8. Find people more honorably committed to scientific method than yourself and stick them with the grubby work of properly confirming hypotheses.
9. Do not try for a grant if acceptance means you must accomplish what you promised.
10. Since no research anywhere comes to final conclusions, you need not rush. Act as if you will live forever; it will not make any difference to you if that estimate is wrong [p. 25].

As we consider possible implications of the material Stoller has offered us in “Telepathic Dreams?” it strikes me that we could find no better set of guidelines by which to direct our course.
REFERENCES


——— (1947). The dreams of two patients in analysis interpreted as a


Quarterly 16:61–68.


