CIVILISATION OF THE IMAGE AND NEW SYMPTOMS : THE FONCTION OF THE GAZE

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1. *Acknowledgements*

Good evening everyone. It is a great pleasure for me to be here with you in Dublin. I would like to thank my colleagues at ICLO very much for their invitation, and its chair Caroline Heanue for contacting me and organising this weekend of work together. This is the second time I have come to Dublin invited by ICLO. The first was in 2016, and at that time I gave a lecture entitled 'Body and Language in Eating Disorders'. I return now after 8 years, and a lot has happened in the meantime. We have recently overcome the pandemic from COVID 19, but we have entered a global political scenario of great tensions, after the Russian invasion of Ukraine and the more recent re-explosion of the Israeli-Palestinian conflict in the Gaza Strip. The disharmonious structure of the world seems to accentuate its manifestations in collective life at this historical juncture, awakening Europe and Europeans in particular from the dream of perpetual peace produced after several decades of absence of conflict in its territories. As psychoanalysts, we cannot but be interested in these conflicts taking place on Europe's doorstep and potentially involving the main forces of world geopolitics. It is Freud who invites us not to recoil from the unease in the civilisation in which we live, and to try to read between the lines of what is happening around us. Lacan goes in the same direction when he invites us to live up to the subjectivity of the age in which we live.

At the same time, we must not forget that what psychoanalysts have to say with respect to the great questions of their era finds its main grounding in the discourses that take place in the places where we welcome the word of our analysands. It is from this listening to their word that we, as psychoanalysts, can draw on specific ground to advance a clinical reading of the situation we are living. The lecture I am proposing to you tonight might seem very distant from the clamour of the theatres of war we have mentioned. In reality, we will try to show how in human experience and in the clinic, where the imaginary dominates without making room for another dimension capable of operating as a limit, we must prepare ourselves for a destructive emergence of the real. We will try to show this principle at work in this lecture, which we have entitled ‘Civilisation of the image and new symptoms: the function of the gaze’. This is what we find in our clinical experience with individual patients, but on an amplified scale, since, as Freud teaches us, individual psychology has always been social psychology, the same principle can apply to the functioning of collective psychology. It is also what Jacques-Alain Miller taught us a few years ago when re-reading Freud, when he introduced the formula 'Freudian field year zero'.

We will try to develop this perspective, having in mind the theme around which the Congress of the New Lacanian School *Clinic of the Gaze* will revolve in a month's time. Indeed, we will try to interrogate the function of the gaze in those symptomatic solutions of contemporaneity that for some decades we have wanted to define as new forms of the symptom, and that we have recently proposed to rename as pathologies of excess (Cosenza, 2022). Compared to our 2016 conference, we will therefore not limit ourselves to the framework of eating disorders, but refer to a broader spectrum of solutions that includes them within it. But we will take anorexia nervosa as a paradigmatic reference, due to its particularly pervasive relationship with the dimension of body image.

1. *The Contemporary Age as a Civilisation of the Image and Hypercontrol*

The first point we would like to develop, as a gateway to our discourse on the function of the gaze, concerns a central aspect of the social discourse in which we live: the status of the image in contemporary capitalist society. It is no coincidence that one of the definitions of contemporary capitalism in sociology is precisely, alongside its definition as a consumer society, its status as a civilisation of the image. Indeed, contemporary capitalism places at the centre of its social functioning the imperative to consume, to be consumers; but at the same time it finds in the scopic field of narcissistic identification with a socially available sign its most powerful vehicle of orientation towards the realisation of the individual as consumer. Getting rid of the limits constituted by the anchorage to the father and the bourgeois morality of 19th-century origin, contemporary

capitalism has deployed its limitless dimension since after the Second World War, replacing interdiction as a factor of social regulation with the drive to jouissance. Lacan in '70 in 'Radiophony' showed us the underlying dynamic in a double simultaneous movement: the degradation of the signifier and the symbolic function on the one hand; the rise to the social zenith of the object a on the other (Lacan, 2001, p. 414). Lacan also offered us, in a lecture given in Milan in '72, the mathema of the capitalist's discourse, with which he showed us the ideological structure of this discourse, that is, its presentation to his reading as a false discourse or pseudo-discourse (Lacan, 1978, pp. 20-51).

If we had to say in a simplified way what this falsity of capitalist discourse consists of, we could perhaps express it in a formula: the denial of the dimension of the impossible. On this denial can rest the ideology of the self-determination of the individual as *causa sui*, the heart of contemporary neo-liberal ideology, in which the individual is in a continuous relationship of lossless recycling with the object of enjoyment. For Freud and Lacan there can be no social bond, no discourse without loss, without a point of internal impossibility: without castration there is no effective bond characterised by separation. It is this cornerstone discovered by psychoanalysis, which capitalist discourse tries in every way to deny, designing a world in which everything is possible for the individual.

Now, one of the main ways through which this denial of the impossible is realised is offered, in contemporary capitalism, precisely by the pervasive function of the image. This pervasiveness has also met the condition of its recent unfolding as a result of the development of the mass media, in their most classic version in particular with the mass diffusion of television and advertising; but in a much more amplified way in recent decades through the new media and the net. It is not the media themselves that are the cause of this pervasive relationship, but they provide the technical potential for their unlimited use, which can lead fragile subjects astray.

The other side of this pervasive dimension of the image in the contemporary world is given by the fact, emphasised by many authors in the tradition of biopolitical studies, from Foucault to Agamben, that the contemporary world tends increasingly to organise itself as a system of integral and scientific control of bodies, which passes through the ways of organising places and the technological apparatuses that we all have at our disposal, but which we do not control, on the contrary, we are controlled by them. Several authors point out how there has been an acceleration in this direction with the entry into the third millennium. A clear testimony of this is the extension of the criminological paradigm - well exemplified in the image of the prison panopticon valorised by Bentham and elevated to a paradigm by Foucault - to the control systems of human movements in air travel with the verification of fingerprints and faces with metal detectors after 9/11, as Agamben has pointed out (Agamben, 2003). Contemporary capitalism thus presents itself at once as a civilisation of the pervasive image, and as a system characterised by a hypercontrol over individuals that passes through the technological gadgets they use on a daily basis.

What space of movement remains for the contemporary subject, caught in the grip of segregation to a pre-constituted social identity and the hypercontrol of his actions and decisions by the technological gadgets at his disposal to communicate? In a 2010 text, *L'oeil absolu*, Gerard Wajcman explores this condition of hypervisibility that seems to characterise the contemporary life of individuals, which has never been so prominent in previous eras (Wajcman, 2010). Right from the title, his book highlights the degree of contemporary radicalisation that the regime of the visible exerts, through the instruments of technological-social control, in contemporary life. But what status can we then attribute today to the function of the gaze, in this condition of hypertrophy of the eye and the visible in which we are immersed?

Lacan distances himself from all postmodern authors who read the contemporary condition as a process of integral reduction to the semblance. He enforces from the beginning of his journey to the end Freud's thesis of a structural Spaltung of the subject, the irreducible division between the unconscious and the ego, between the real and the semblant. It is the real, and not the law of the father, what acts as a limit, as a point of impossibility, to the semblant. In this respect, one of his theses that we find in the second lecture of his '75-'76 seminar *The Sinthome* is that the subject is always divided (Lacan, 2016, p. 20). This principle applies beyond the question of structural diagnosis : the structural modalities of the subjective division may change, but not the fact that the subject is divided. We can take this thesis of Lacan's by declining it to the question we are interested in, and try to argue that the split between the eye and the gaze is structural, even where - as

in the new symptoms and anorexia nervosa - the subject encounters extreme difficulty in losing the gaze, surrendering it to the Other.

2. *Capitalist discourse, new symptoms and puberty*

From this perspective, we can now move on to consider the so-called new forms of the symptom - drug addiction, anorexia-bulimia, pathological addictions to technological objects,. -, in order to try to clarify their relationship with the pubertal transition and the drive issue involved. This is in fact an important junction, even if only considering the fact that these symptomatic solutions, whose difference from the classical Freudian symptom we have in the past also stressed here in Dublin (Cosenza, 2020, pp. 8-33), for the most part, emerge between the pubertal passage and the time of adolescence. It is therefore a question of clarifying why, in contemporary capitalist societies, young people find in these non-metaphorical symptomatic solutions, not oriented towards the Other and deprived of enigma but loaded with massive jouissance, an increasingly frequent anchorage. All this appears to us to be consistent with the structural characteristics of contemporary capitalist discourse as a system in which symbolic regulation is degraded, and the amplification of narcissistic and compulsive solutions is consequently radicalised, particularly in young people.

As the American psychiatrist Hilde Bruch, a pioneer in the dynamic psychotherapy of anorexia, pointed out in her 1970s pamphlet *The golden cage* (Bruch, 1978), the centrality of the image of the woman's thin body in the mass media communication circuit proper to contemporary capitalism was not without consequences for the many girls in American colleges and universities who, since the late 1960s, began to identify in an almost contagious way with anorexia and to embody its symptoms in their bodies. This is clearly not an answer to the enigma of anorexia that can satisfy us, taking into account what Lacan has come to say about it, as I have tried to argue in my book *A Lacanian Reading of Anorexia*, finally available in English. However, Hilde Bruch's consideration has an element of truth regarding anorexia as a social symptom and its diffusion in particular among girls: structurally fragile subjects, in puberty in particular, are more exposed, in the absence of a solid symbolic anchorage, to finding a point of identity stabilisation in a specular identification with a socially existing and valued sign in which to recognise themselves. The adhesive, narcissistic-specular identification with the image of a woman's thin body is thus a possible option particularly for girls living in our society, who have also found sites to refer to on the web for at least twenty years, that are devoted to the cult of anorexia.

It is, however, a stabilisation that is by no means without consequences for the young people who resort to it. Indeed, the structural task of adolescence seems to enter into a fundamental short-circuit with respect to the dominant orientation in capitalist discourse. This task classically consists, as Freud and Lacan have shown, in the search for the partner as the object that causes desire in the world, outside the family, and which the young person brings into play with the drive emergence that opens up in puberty. This task finds the way to its realisation in the condition of a loss. What the young man discovers in fact, at a certain point in his experience of erotic implication in relation to his partner, is that behind the veil that covers the mystery of sex, Lacan tells us, there is nothing (Lacan, 2001, p. 562). The experience of the encounter with the absence of sexual intercourse (but more generally the experience of the absence of guarantee in the Other to make one's own fundamental choices) is the traumatic outcome that awaits the boy and girl who manage to reach the end of their itinerary in the field of sexual initiation. What capitalist discourse, on the contrary, predisposes is first and foremost a circuit for the functioning of jouissance in which what is expunged and denigrated, with respect to the structure of the discursive bond, is the dimension of the impossible. In capitalist discourse, anything is possible: loss is merely the condition for the continuous recycling of commodity-objects that intervene to continually saturate and close any lack of the subject. Put another way, the orientation of the capitalist discourse is, despite an ideology founded on the self-determination of the individual, fundamentally anti-separative, while the need proper to adolescence aims to produce as a result a separation from the Other that allows the subject to give a more autonomous orientation to its own existence. This antinomy is at the heart of the experience of young people in the contemporary world, and forces us to reinterpret the reference coordinates at play in the pubertal transition for today's adolescents.

3. *From Oedipus to Narcissus. Function of the image in the new symptoms*

An initial structural effect of the decline of the Other, in the field of youthful experience, is given by an amplified centrality of the imaginary-specular dimension, by a self-centredness of the young person's ego as an instance called upon to safeguard a mastery over their own body and life. The juvenile pathologies of excess show this trait in a striking manner: the rejection of the Other, of symbolic castration, of Oedipus, of loss that characterises them by structure is accompanied by an additional libidinal investment that concerns the registers of the imaginary and the real. Faced with the impasses of experience, with the traumatic dimension at stake in eros and in destructiveness, the subject does not respond by deploying the power of the word and the force of symbolisation. Rather, it resorts, remaining ensnared, to the power of image capture. He supposes that his problem, for example in love, is rooted in a deficit of image, of his way of presenting himself in the eyes of the other, and thus elaborates a response that goes in the direction of an orthopaedisation of his own image, which brings him closer to resembling a certain ideal. It is a solution that we find in the spirit of the times of a society that has not by chance been defined as characterised by a culture of narcissism (Lasch C., 2018).

In the transition from a society structured oedipally on the law of the father and the prohibition of sexual jouissance to a society built around the centrality of the object that causes jouissance, it is not surprising that young people are less interested in the sexual act and more interested in narcissistic jouissance. It is not, as is sometimes said a little hastily, an overcoming of the psychoanalytic paradigm of the centrality of the sexual drive, but rather a restructuring of the libidinal economy proper to the dominant social discourse in contemporary capitalism, which finds in the scopic, voyeuristic and exhibitionistic jouissance, already well articulated by Freud in the *Three Essays*, a pivotal point of its functioning. Freud showed the picture in the narrow clinical setting of 'sexual aberrations', the title with which he presented the first of his *Three Essays* devoted to sexual perversions. Today we can grasp, after Lacan's lesson, which shows us the passage of perversion from a transgressive condition to a conservative operation, the generalised deployment of voyeuristic-exhibitionistic jouissance as a normal condition in today's society virtualised by the media and the web, in which perversion is normalised to such an extent that it has long since elided and disappeared as a diagnostic category from psychiatry and psychopathology manuals. A fate perhaps also near to the other major conceptual category of the clinic that has also become synonymous with a structuring trait of contemporary society, namely narcissism. We would not be at all surprised if in one of the future editions of the DSM the reference to narcissistic personality disorder were to be downgraded and in time dropped. It would be like an acknowledgement of the normalisation of narcissistic enjoyment as a pervasive factor in the lives of speaking beings in our 21st century society.

This narcissistic orientation becomes extreme and is radicalised in pathologies of excess, particularly where the superegoic ideal is organised around the duty to adhere in an adhesive form to a certain ideal assumed uncritically as a point of identification without remainder, as happens in anorexia nervosa. A point of identification that in reality opens up to a without-boundary, to a bad infinity into which the subject irresistibly plummets. A good clinical example was offered to us by an anorexic patient whom I have been following for some years, Rosita, and who has recently obtained a certain stabilisation which allows her to get her menstrual cycle back without however losing a certain control over the thinness of her body. However, one point that remains stainless in her discourse, despite the work she has done so far and although she is otherwise an entirely reasonable person and far from lacking in reflective capacity, is the ideal of a flat stomach as an unquestionable obsession. It is the imaginary pivot around which she builds and organises her daily rituals concerning her body and her life. Her daily appointment with the mirror in her bathroom, when she gets up in the morning and when she prepares to go to bed in the evening, includes this crucial moment of verification in which each time her body returns to her, through her gaze, a different image from the ideal one. And this happens every time, beyond the quantitative verdict that her other daily instrument of torment, the scale, returns. For her, the verdict of the gaze is measureless, beyond the principle of reality. Although she has come to realise that this ideal is unattainable in its perfection - it is an ideal that in its radicality is never fully realised, and in any case never permanently, and is not achieved through weight loss -, it continues to be her last word when she finds herself talking about her body. The ideal of a flat stomach presents itself as an out-of-the-blue certainty, an unbreakable S1 to which the subject is nailed as if to a point of narcissistic fixation from which he cannot be detached in any way. Beyond this point outside-discourse fixation, Rosita's life today flows seemingly normally, between her relationship with her boyfriend, her family, her friends and her work.

The disconnection from the Other, the rejection of the Other, is thus sustained on the one hand, in the clinic of contemporary adolescence, primarily thanks to a swelling of libidinal investment in the direction of a narcissism not regulated by symbolic law. On the imaginary side of the ideal ego, rather than on the symbolic side of the ego ideal, which in this area of the clinic does not find a way to take root solidly in the life of the subject.

3. The rejection of the couch in the clinic of anorexia

I would start now precisely from a gateway offered to me by the incipit of the topic of the next NLS Congress written by its president Daniel Roy. I'll retake for this a perspective worked in my conference for the London Society *Anorexia and the gaze* last November towards the next NLS's Congress, and more recently relaunched with the colleagues of Ukraine Initiative..

The reading of Dniel Roy struck me at several points, stimulating me in writing this talk for you. The first important consideration that Daniel highlights is that in psychoanalysis, ever since Freud, the isolation of the gaze has been sanctioned by a cut. This cut is what classically distinguishes, at least in the treatment of a neurotic subject, the time of preliminaries from the actual initiation of an analysis: the analyst's decision of the transition from face-to-face to the couch. With this cut, which occurs in the transition from patient to analysand, the subject in analysis experiences the loss of the support of the analyst's gaze, which "...is situated outside the analysand's field of vision" (Roy, 2023). It is precisely because of this cut that, Roy again reminds us, "...the gaze emerges as a separated object, separated from the exchange of the specular relation" (ibid.).

With respect to this very important affirmation that Daniel Roy makes to us, it seems to me essential to point out how, in my experience but also more generally as far as detectable in the literature, the clinic of anorexia tends to present itself, with exceptions, as a clinic in which the patient is refractory to the transition to the couch. There are quite a few cases in which I have encountered an unwillingness to make this transition, even in anorexic subjects who turned out to be neurotic in the course of treatment. Today's talk provides me, thanks in part to Daniel Roy's argument, with an opportunity to try to read why such a refusal of the transition to the couch is so unwelcome in many cases of anorexia. And I am not talking about those cases in which, as is often true, the patient refuses to engage in work, rejecting the therapeutic link from the outset, and making it impossible to initiate treatment. I am talking about those cases of anorexia in which the subject involves themself in treatment, but has difficulty losing the analyst's gaze, tending to remain in treatment in the face-to-face dimension. I also recall some situations in which, after a few sessions on the couch, the analysand asked to be allowed to return to the face-to-face. Not for all cases of anorexia is this true, of course. There are neurotic subjects with anorexia who can sustain this transition, although often with some initial effort. There are other cases for whom this transition, after a long preliminary, becomes possible. But for many others, this loss of the gaze object turns out to be highly problematic if not impossible, and face-to-face presents itself not as a preliminary, but as the condition that makes a treatment sustainable.

This problem that the clinic of anorexia presents to us is not all that surprising in the light of what Lacan could tell us about it, and years later Miller. Rejection of the passage to the couch is in tune with the rejection of unconscious knowledge in its dimension of horror, which Lacan refers to the last time he tells us about anorexia in Seminar XXI (Lacan, Seminar XXI, lesson of the 9 of April 1974, unpublished). But it is equally in tune with what Miller pointed out when he placed anorexia as a paradigmatic position, among contemporary symptoms, of the rejection of the great Other, first and foremost in its primordial form of the nurturing Other (Miller, Laurent, 2005, pp. 378-79).

These preliminary considerations can serve us as an initial framing of the question of the gaze in anorexia, and they interrogate both the function of the gaze as a drive object in anorexia and the function it can have in the initiation and conduct of analytic treatment. We might say then that, to begin with, that the clinic of anorexia tends to present itself, to the experience of the psychoanalyst, as a clinic of the denial of the loss of the gaze. Perhaps it falls among those few exceptions Daniel Roy refers to ("a few exceptions") in which the clinic of the gaze in psychoanalysis presents itself more as a clinic of too much of the gaze, of the excess of the gaze that the subject does not want to know how to give up. To use a formula from the young Lacan's *Family Complexes*, we could say that what characterises the position of anorexia nervosa is a "refusal of weaning" (Lacan, 2001, p. 32) that affects not only the oral object, but significantly also the gaze object. The

anorexic subject does not want to lose the gaze of the Other, nor do they want to surrender their own gaze to the Other. What can we say then, in anorexia, of what Lacan in Seminar XI calls the split between eye and gaze? Another question: we know that anorexia is a trans-structural solution, and that one can come to it for different reasons and can perform heterogeneous functions from subject to subject. Can we then think of a differential clinic of anorexia from the function of the gaze object and the different ways in which it can present itself in the analytic experience? Finally, how can the analyst introduce the function of the cut that opens and sustains the analytic work if the anorexic subject is so refractory to the loss of the gaze? We will try to answer these questions, but we will return to them at the end, not before we have introduced other essential aspects at play in the clinic of anorexia, in the perspective that Lacan opened for us.

Therefore, the proposal to talk about Anorexia and the gaze seemed to me an excellent opportunity to think of this work of ours today also as a small contribution to the upcoming NLS congress, starting from the prominence that the gaze takes, as is well known and as we will try to show, in the clinic of anorexia. This does not mean that we will only talk about the relationship between the anorexic subject and the gaze, but it does mean that we will make the gaze the main thread of this meeting of ours.

4.. *The difficult of losing the gaze in anorexia*

4.1.From the object nothing to the gaze. And indeed, the jouissance of nothingness, the rejection of jouissance that turns, when anorexia crystallises, into jouissance of rejection, finds at the level of the gaze a privileged gateway. We were talking about the difficulty one encounters, in many cases of anorexia, in losing the gaze of the Other, of moving from face-to-face with the analyst's gaze to the couch. This is not generalisable of course, and depends not only on the structure but also on when a subject is in treatment. What presents itself as impossible in the early days may turn out to be sustainable for the subject at a certain point in the treatment: the analyst's gaze may be lost in order to move in the analysis to a relationship with the unconscious that is less conditioned by the mirror dimension. We also know that analysis can take place even without the transition to the couch, and that, as Miller reminds us in the interview on *L'objet du siècle*, the object invented by Freud is not the couch but the analyst, who operates in relation to the analysand's discourse (Favoreau, 1999).

4..2.The dual status of the gaze in anorexia. But what makes the gaze a crucial dimension in the clinic of anorexia? We can grasp it if we take into account the dual status that Lacan assigns to it, particularly in Seminars X and XI. On the one hand, the gaze is presented, along with the voice, as a privileged pathway that allows the subject the traumatic and constitutive encounter with the desire of the Other. On this point, Lacan, in his teaching, distills the status of the gaze by taking into account what emerges in Freud, in the *Three Essays on Sexual Theory* and beyond, but also by building on the rich literary tradition of the troubadour lyric of courtly love, the Dolce Stil Novo, Dante and Petrarch, and Shakespeare, in which the function of the gaze as a pathway through which desire manifests itself is highlighted. On the other Side, Lacan illuminates another dimension of the gaze that highlights its destructive, toxic dimension, animated by the death drive: that dimension whereby the eye presents itself as an evil eye (Lacan, 2018, pp. 115-19), of which Lacan recalls the splendid example of Saint Augustin of the older brother's grim gaze on his infant brother sucking at his mother's breast. What we find mostly in mental anorexia is that, first and foremost, the subject does not find its own place in the desire of the Other.

All the manoeuvring that the anorexic enacts toward family members is aimed at opening a gap in this desire that will allow them to find a place in it: opening a lack in the Other is the movement that Lacan describes to us as peculiar to the anorexic child in Seminar XI: their eating nothing is at once aimed at producing a repercussion on the desire of the Other, a rectification by the way of anxiety. At the same time, however, the anorexic experience of the gaze of the Other is the experience of encountering an evil eye: what I encounter is the rejection of the Other, the «no» from the Other. This is what happens regularly in the experience of the mirror and the distorted perception of the body image: the enjoyment of the evil eye invades the mirror field, poisoning the subject's encounter with their own image each time. The anorexic reveals something of the structure of the gaze as an evil eye.

4.3.The gaze beyond egosyntony. This aspect of the gaze as an evil eye that is so radicalised in the anorexic experience has led me in recent years to a partial revision of my reading of anorexia, which can be found in my latest books *The Food and the Unconscious* in 2018 and *Clinic of Excess* in 2022. Indeed, we find in

relation, to this dimension of the gaze, something that contradicts the egosyntonic bias that for many years we have placed at the center of our reading of anorexia. At the level of the gaze, the anorexic experiences a radically egodystonic encounter, one that shows itself blatantly with respect to their own body image. This body becomes a stain, or as our Argentinian colleague Nieves Soria effectively said, anorexia presents itself as the body in anamorphosis (Soria, 2000, p. 96), the embodiment of the skeleton and death on the horizon. The subject, however, always sees something too much in the image of their body; the mirror relationship with the image is poisoned by an excess of jouissance to which the subject has become nailed. It therefore seemed to us more responsive to the real of the clinic to highlight, rather than egosyntony, the dimension of excess jouissance that takes in the subject on the path of deprivation and the drift of limitlessness.

4.4.The toxic dimension of the gaze in anorexia. The operation that the anorexic performs at the level of the gaze traces a formula that Lacan offers us in Seminar XI: circumventing the passage through castration by following the path of deprivation. If the gaze as an object structurally implies castration, since the subject cannot see themselves seen, the anorexic circumvents this structural datum through an operation played out on the register of privation (Lacan, 2018, p. 104): it is they who reject the body image that the other returns to them. There is always something too much in this image for them to assume it as their own. Anorexia itself is an attempt to treat the gaze of the Other as an evil eye, to treat this toxic excess of the gaze by the path of deprivation. The recent Clotilde Leguil's book *L'ère du toxique* is an useful reference on this point Leguil, 2023). But this operation, which can even last a lifetime, is structurally unsuccessful.

4.5.The analyst in the split between eye and gaze. How can the analyst operate with respect to this toxicity of the gaze that invades, in the anorexic experience, the mirror field? I would say that their intervention, whatever the concrete context in which they operate -- the institution or their private practice, the analysis in the classical form with the couch or face-to-face -- consists in operating, at the level of the patient's discourse, as a separating object between the subject and the excess of jouissance that the gaze conveys, opening to the split between eye and gaze. The tychic point of which Lacan speaks is the opportunity, the *chairòs*, not to be missed, the point that can open the subject to a less invasive, and more enigmatic, relationship with the gaze of the Other. I relate a very recent concrete clinical example with a very young girl who began to have problems with anorexia. *First meeting: she exposes to me the difficulty that has exploded with food and the dietary restriction she is implementing. When she manages to lose weight, she feels better and feels she can even meet others, show herself, go to school, go out with boys. But something makes it difficult for her to stay in deprivation, and so she resumes eating in a way that is exaggerated for her. She experiences this drama, but she is keen to say that anorexia is something she does not give up: when she can control herself, everything seems to flourish again. I intervene by saying that, of course, this is not about touching her anorexia. The problem is that, according to what she tells me, anorexia alone is not enough for her to live as she wishes. Something that is not clear makes the anorexic solution not enough for her. It is a matter of working on that.*

When the subject assumes that there is something at the level of the gaze that escapes them, we find the split between the eye and the gaze, and something of the castration presents itself in the framework of the treatment. We see this clearly in cases of neurotic anorexia, in which we can speak, in the transference, of a "clinic of the restitution of the gaze in the field of the Other," and a "clinic of the gaze in the fantasm." In many cases where, to use Daniel Roy's formula, we are dealing with a "clinic of the return of the object gaze onto the body," which we often find in true anorexia, the work is complicated by the fact that the subject has only partially experienced a loss of object. In the analysis, it will be necessary to work so that the extraction of the object from the drive body can be completed, allowing it to construct a more symptomized and singular solution.

It is a different matter for anorexia as a "clinic of the return of the object gaze in the real." In these cases of psychosis with anorexia, we will work to make the gaze of the Other less invasive and persecutory for the subject, introducing interventions aimed at moderating the anorexia and inventing an alternative solution in the light of the subject's discourse, which is less destructive, more inscribed in the social bond and more singular.

4. *Excess and the net: the adolescent between virtuality and jouissance*

I would like to conclude this talk with some considerations that go beyond the anorexia clinic, and which concern the relationship of young people with the Net and the digital world. We opened our lecture by referring to contemporary capitalism as a civilisation of the image, and it is difficult not to pay attention to the fact that today relational life, not only of young people, passes largely through the relationship with a screen, smartphone or computer, and the image that is reflected on it. A heated debate about the status of virtual reality and its effects on the process of personality construction in adolescents has been going on ever since the use of the Internet became a daily reality in young people's lives. Even on this point, the temptation to take an ideological stance on the matter is widespread. Those nostalgic for a reality entirely anchored to the encounter and relationship in presence with bodies in proximity find it hard to see in the virtualisation of experience underway anything other than a process of alienating degeneration of human life, particularly with respect to subjects such as pre-adolescents and adolescents whose structuring is still being defined. In turn, the champions of post-humanity struggle to see the risks within this process of virtualisation, which are obscured by the ideal advent of a future humanity that is still in the process of being defined.

The net is in itself neither good nor bad. It is the use we make of it that, depending on the case, may allow us to make it the route of a discursive treatment of drive excess, which curbs its deadly scope by reducing it to a residue; or on the contrary, it may lead us to make it a factor of viral propagation of the very excess of jouissance that infinites its devastating effects, and thus a potential facilitator of the death drive.

Here again, we feel it is necessary to reposition the question in non-ideological terms, avoiding attributing a value to the 'virtual' in itself, but trying to inscribe it in the subject's discourse, in order to grasp the function it actually plays there. But before entering into the clinical level of case by case, picking up on a point we dealt with earlier, I would say that it is necessary to verify whether the virtual dimension has for the subject the status of a semblant, that is, whether it is structured according to the laws of the signifier that regulate discursive functioning, leaving a place for loss and for the rest for jouissance.

In this case, the virtual, however pervasive it may become in a subject's life (immersing him, for example, in a second life in which he presents himself with another name and in another system of networked relations, as in the famous Second Life programme), is not so pervasive as to elide the real dimension of the impossible as the structural pivot of the social bond. In these cases, the gaze occupies the place of the lost object in the subject's relationship with the scopic-visual field. The condition of the neurotic adolescent with respect to the often pervasive link with the use of technological gadgets seems to respond rather to this kind of condition. The unregulated use of the smartphone or computer, the displacement of one's social life into the digital field, which have now become part of the everyday life of most of us, do not, however, elide the structural difference between the semblance and the real: they are rather ways of dealing with the impossible of loss along the way of the virtual link with others, recovering something, by way of imagination, in this distant, on-screen scenario of a relative jouissance of the field of the scopic-visual object. Truth as a liar, as something that can only be said halfway, as a structure of fiction, which Lacan speaks not only in his last teaching but already in the classic « The perloined Letter » , continues to be operative here in the adolescent's relationship with the virtual world. The subject knows that this second virtual life is not exactly the same as the life he or she encounters once the screen is turned off and he or she regains contact with the social and familiar world around him or her. The virtual 'second life' can become for him a way of responding to what is unsatisfactory or unbearable he encounters in life outside the screen. The dimension of belief continues to preserve its place, which does not elide the space of doubt, without precipitating into certainty. The neurotic subject is nevertheless always, even when moving in the virtual field, oriented by the compass of his own fantasm, which in adolescence is in its crystallising time. This does not mean, however, that he cannot suffer from the alienating effects of a social life carried out mostly at a distance on the web, or of a pervasive immersion in these virtual worlds that the web hosts, and that his life outside the screen cannot be affected or remain affected.

It is another thing, however, to immerse oneself in the net, to spend days surfing the web entirely withdrawn into one's own isolation with no presence relationships, to join virtual communities without limits, or to enter into virtual life programmes, for young people with no symbolic anchorage.

Deprived of an internal orientation compass, in the absence of something that functions as a symbolic anchorage for them, young people may well encounter in the net something capable of capturing and invading them, creating a totalising, limitless bond, to which from that moment on they become pinned, giving rise to a true pathological addiction. In these cases, the risk factor is given by the confluence of the structural fragility of the subject with the ideological effect that can be produced on the virtual dimension in the capitalist discourse: an elision of the real as impossible that makes the dimension of the limit disappear.

In fact, it is not the virtual in itself that is the problem, but its welding with the narcissistic loss of the impossible and the denial of castration that it entails. This condition realises the mirage of a lossless bond, proper to the structure of capitalist discourse that Lacan draws, which fuels the additive solutions of the clinic of excess and the virtual bonds that support them. The deathly euphoria that often characterises the communities of ejouissance we find on the web, unified by the common reference to the symptomatic sign assumed as a totem to be religiously worshipped, feed on this myth of a totalising bond. The identity communitarianism that characterises many of these realities, and which finds its concrete realisation in the websites, differs in its operation according to whether or not it makes room for the real as impossible. While the recognition of this limit allows an anchorage of experience in the virtual dimension to the structure of the social bond, its denial fuels the limitless drift of the psychopathological solution and the mass fanaticism of the intra-communitarian bond, which can take paranoid and persecutory turns with even devastating consequences.

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