

TOXICOMANIA: DRUGS, SUBJECT AND PSYCHOANALYSIS¹

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ABSTRACT: Based on a review of the literature as a research method, this paper aims to point out the paths traditionally traveled to deal with the problematic of drug consumption - so harmful and present today - as well as the paths that can be explored from psychoanalysis. We will analyze the terms commonly related to drug consumption, so that we can distinguish the characteristics that lead psychoanalysts to assume the term toxicomania and not any other, emphasizing the subject-drug relationship. We will treat their relationship with clinical structures - neurosis, psychosis and perversion - with the malaise highlighted by Freud and with the Lacanian concept of jouissance, aiming to expose the psychoanalytic reading of toxicomania. Based on the results of the research, we conclude that psychoanalysis can contribute in an incisive way to the treatment of drug addicts, since this reference sees beyond the drug addict, a subject, and proposes to operate with him.

KEYWORDS: Toxicomania. Psychoanalysis. Malaise. Enjoyment.

RESUMO: *A partir de uma revisão da literatura como método de pesquisa, este trabalho pretende apontar os caminhos tradicionalmente percorridos para tratar a problemática do consumo de drogas – tão lesivo e presente na atualidade – assim como os caminhos que podem ser explorados a partir da psicanálise. Analisaremos os termos comumente relacionados ao consumo de drogas, para que possamos distinguir as características que levam os psicanalistas a assumirem o termo toxicomania e não outro qualquer, enfatizando a relação sujeito-droga. Trataremos da sua relação com as estruturas clínicas – neurose, psicose e perversão – com o mal-estar destacado por Freud e com o conceito laciano de gozo, objetivando expor a leitura psicanalítica da toxicomania. Com base nos resultados da pesquisa, concluímos que a psicanálise pode contribuir de forma incisiva no tratamento dos toxicômanos, uma vez que este referencial enxerga para além do toxicômano, um sujeito, e se propõe a operar junto a ele.*

PALAVRAS-CHAVE: Toxicomania. Psicanálise. Mal-estar. Gozo.

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RESUMEN: *A partir de una revisión de literatura como método de investigación, este trabajo tiene como objetivo señalar los caminos tradicionalmente recorridos para abordar el problema del consumo de drogas, tan dañino y presente en la actualidad, así como las formas que se pueden explorar desde el psicoanálisis. Analizaremos los términos comúnmente relacionados con el uso de drogas, de manera que podamos distinguir las características que llevan a los psicoanalistas a asumir el término toxicomanía y no cualquier otro, poniendo énfasis en la relación sujeto-droga. Abordaremos su relación con las estructuras clínicas - neurosis, psicosis y perversión- con el malestar destacado por Freud y con el concepto lacaniano del goce, con el objetivo de exponer la lectura psicoanalítica de la toxicomanía. Con base en los resultados de la investigación, concluimos que el psicoanálisis puede hacer un aporte incisivo al tratamiento de los adictos a las drogas, ya que este marco mira más allá del adicto, un sujeto, y se propone operar con él.*

PALABRAS CLAVE: *Toxicomanía. Psicoanálisis. Malestar. Goce.*

Introduction

This paper is based on a review of the literature concerning the topic of drug addiction, through the bias of psychoanalysis. It aims to point out the paths traditionally taken to deal with the problem of drug consumption – so harmful and so present today – as well as the paths that can be explored from psychoanalysis.

At first, we will briefly present the understanding that psychoanalysis has on the research topic. This conception differs from the scientific method in that it highlights the position of the unconscious subject in clinical dynamics and its consequent importance in the practice of research privileged in this work.

We will analyze the terms commonly related to drug use so that we can distinguish the characteristics that lead psychoanalysts to assume the term *toxicomania* and not any other. We will continue to present the phenomenon of toxicomania, placing it in the field of psychoanalysis and emphasizing the subject-drug relationship.

Then, we will point out the aspect chosen to approach toxicomania within the theoretical foundations of psychoanalysis. We will deal with the structural issues of this phenomenon in the reading of several authors. Its relationship with clinical structures – neurosis, psychosis and perversion – with Freudian malaise, and with the Lacanian concept of jouissance.

The drug as an object of consumption is approached by the authors referenced from a Lacanian perspective. The concept of *gadget* will be indicated in its relationship with the interference of scientific knowledge in the world. Such interference will be presented as

responsible for making possible the insertion of the drug in the field of *jouissance*. Thus, it will be introduced the surplus-enjoyment function, referring to toxicomania.

Freudian references will be mentioned in the work ‘Civilization and Its Discontents’, in which Freud states that the purpose and ambition of every human being, as his own actions denounce, is to be happy and remain so. He formulates that:

What we call happiness in the strictest sense comes from the (preferably sudden) satisfaction of needs dammed to a high degree, being by its nature possible only as an episodic manifestation (FREUD, 1930, p. 49, our translation).

Happiness is experienced in less frequent circumstances than we would like due to the obstacles that society, with its laws, raises to the fulfillment of our desires. On the other hand, unhappiness and suffering are experienced much more easily. In the face of this dynamic: on the one hand aiming at happiness, on the other, trying to avoid suffering, drug consumption presents itself as an alternative, a palliative measure in the face of uneasiness, as Freud called it.

Finally, we will indicate the possible contributions that psychoanalysis, as a field of knowledge, can bring in confronting the current and devastating picture of drug abuse.

The research

Before we explore the subject of this work, it is important to allude to the question of research in psychoanalysis. This question presents itself as a singularity of psychoanalytic knowledge in comparison with scientific knowledge.

Research in psychoanalysis has its own specific characteristics that differentiate it from the scientific method. Elia (2000) indicates that the reasons for this differentiation are based on the relationships that psychoanalysis maintains with science. According to him, psychoanalysis would have been derived from science, however, without reducing itself to it. Having operated a discursive rupture in which the notion of subject is the elementary key. Concerning this, the author states

[...] that psychoanalysis is not simply one more ‘knowledge’, among others, to be included in the list of what, from an old discussion with epistemological airs, would be the sciences (of ‘nature’ or of ‘culture’) or the field of the so-called non-scientific knowledges... For us, and following Lacan, who demonstrated it, psychoanalysis constitutes a knowledge entirely derived but not integral to the scientific field, since it results from an

operation of 'subversion' of that field by the subject's bias [...] (ELIA, 2000, p. 21, our translation).

The subject upon which science operates is described by the author as without any quality, a subject supposed by the signifier, via which science treats the real by the symbolic. However, this subject is not included in all scientific processes. The subject is ejected from its operative field so that it, science, can constitute itself as a conceptual and mathematical knowledge about the empirical real. Thus, this knowledge supposes a subject, but does not put it into question, does not operate upon it.

However, the author refers to Lacan when affirming that, deriving from science, psychoanalysis also operates with a subject without qualities, therefore, this can only be the subject of science. However, by including this subject in the full extent of its field of experience via the unconscious, psychoanalysis promotes a subversion, removing it from the condition of exclusion proper to the subject of science. Thus, the subject of psychoanalysis can only be included as the subject of the unconscious (ELIA, 2000).

Regarding the subject of the unconscious, Elia tells us that it is not a historical, empirical subject, composed of psychological, social, political and ideological characteristics. He will state that: "As such, it is without attributes, and it is a question, in the analytical experience, of reconstructing the ways in which it has symptomatically constructed the immense forest of values, identifications, traces of social, political or ideological pertinence, psychological aspects, etc." (ELIA, 2000, p. 26, our translation).

The author states that the method is what characterizes the proper way of conceiving and doing research in psychoanalysis. As presented above, one of the main differences that research in psychoanalysis involves is the inclusion of the subject in all processes, such as in theoretical knowledge, clinical practice, research activity, etc.

From this perspective, it is concluded that all research in psychoanalysis will inevitably be a clinical research (ELIA, 2000).

The inherent relation with the unconscious is a fundamental dimension that research possesses in analytical practice (ELIA, 2000). Thus, the author points out that:

all research in psychoanalysis is clinical because, radically and structurally, it implies that the researcher-analyst undertakes its research from the place defined in the analytic device as the place of the analyst... (ELIA, 2000, p. 23, our translation).

A place that must be of listening and of cause for the subject, assuming the analytic act and the analyst's desire (ELIA, 2000).

Thus, there is no dialogue about “field of research” in psychoanalysis, since this presupposes the existence of other research modalities that would not be “field” but “theoretical”. What exists is a “field of research”, the unconscious, in which the subject is included. “Therefore, the clinic, as a form of access to the subject of the unconscious, is always the field of research” (ELIA, 2000, p. 23, our translation). Following on from this understanding!

Toxicomania, the signifier

Assuming the term toxicomania, and not some other, as chemical dependency or drug addiction, is not a random and meaningless choice.

As we can find in the research carried out by Queiroz *et al.* (2019), chemical dependency is understood as a mental and behavioral disorder, as we find in the definitions of manuals such as CID-10, and DSM-V. Although this term is the most widely used, it should be emphasized that it can generate an understanding that prioritizes the physiological factor in which a chemical substance causes dependency, feeding the conception of a disease for which the drug object is responsible. The problem present in this conception is also highlighted by the authors:

On the one hand, for a treatment to be possible, the chemical dependent needs to be aware that it has a chronic disease and, therefore, the need for treatment. On the other hand, there is the difficulty of holding the chemical dependent morally responsible for acts committed under the influence of a psychoactive substance, since it is the bearer of a chronic illness (QUEIROZ *et al.*, 2019, p. 02, our translation).

Drug addiction has, in its etymological root, a character of submission to an owner, being understood as a slavery relationship between the subject and the object, be it a drug or any other object (QUEIROZ *et al.*, 2019). “Drug addiction has been approached through two dominant perspectives in Brazil: health – in which the drug addict is a patient – and juridical – in which is a criminal” (QUEIROZ *et al.*, 2019, p. 05, our translation).

Dealing with this phenomenon, psychoanalysis will be interested in its most radical level, which has been classified as toxicomania, “[...] the term toxicomania comes from the discourse given by psychiatry, which, in the middle of the 19th century, began to consider it as a specific clinical category, related to impulsive inclination and manic acts” (SANTIAGO, 2000 *apud* CARLOS; TÓTOLI, 2017, p. 126, our translation).

It can be said that toxicomania refers to the possibility of finding complete satisfaction using a certain psychoactive substance and then freeing oneself from any suffering, whether physical or psychic, that afflicts the drug addict.

The relationship between the addict and the object-substance imposes itself on the symbolic relationship between the subject and the Other, and it is precisely this that gives the subject an illusion of being complete, of being realized without the intervention of the symbolic Other (MARCOS; TÓTOLI, 2017, p. 130, our translation).

According to Queiroz *et al.* (2019), The use of this term also denotes an exclusive relationship between the subject and the drug, which also leads to a relationship of slavery and a consequent deterioration of social relations. “Thus, drug addiction carries a search for relief for a certain uneasiness; however, it encloses a prisoner in the relation with the drug” (QUEIROZ *et al.*, 2019, p. 05).

We find in *Civilization and its Discontents*, references that justify this search, Freud (1930, p. 48, our translation) states there that: “Life, as we find it, is too hard for us; it gives us many sufferings, disappointments and impossible tasks. In order to bear it, we cannot do without palliative measures”. It is then that toxicomania would enter, as one of these measures.

Such measures are configured as exits to the malaise, they are means to extract some pleasure from life. Drugs, toxic substances that act in the body, altering its chemistry, are pointed out by Freud (1930) as one of the most interesting methods to avoid suffering.

According to Freud (1930), suffering, as a sensation, only exists to the extent that it is felt, and this only occurs as a result of certain ways in which the organism is regulated. This characteristic is what gives the chemical intoxication method a prominent place among palliative measures, since they directly influence the organism, causing an insensitivity to suffering. About this the author highlights that:

The coarsest, although also the most effective, of these methods of influence is the chemical: intoxication. I do not believe that anyone fully understands its mechanism; it is a fact, however, that there are foreign substances, which, when present in the blood or in the tissues, provoke in us, directly, pleasurable sensations, also altering so much the conditions which direct our sensibility, that we become incapable of receiving unpleasant impulses (FREUD, 1930, p. 50, our translation).

Freud (1930, p. 50, our translation) further points out that “The service provided by intoxicating vehicles in the struggle for happiness and in the removal of misfortune is so

highly appreciated as a benefit, that both individuals and peoples have granted them a permanent place in the economy of their libido”.

Such vehicles are responsible both for an instantaneous production of pleasure, and for a certain independence from the outside world, since with the assistance of this “shock absorber of worries” – a term used by Freud (1930) – it becomes possible to get away from the pressure of reality, either on any occasion, seeking refuge in a world of our own, where it is possible to feel better.

Finally, he points out that it is in the latter property that intoxicating substances assume their capacity to cause damage, demonstrating their danger. In Freudian terms, “they are responsible, in certain circumstances, for the waste of a large share of energy that could be used for the improvement of human destiny” (FREUD, 1930, p. 50, our translation).

As can be observed, depending on how the issue is approached, a dichotomy between drug and subject can be promoted, in which the responsibility for consumption can be isolated in each of those involved. Opposed to this, a perspective that values the interaction between both, considering particular aspects of each subject and the properties of the drug is what particularly interests this research, since these aspects are important, since they influence the direction of the treatment that will be adopted.

Of the three terms cited, drug addiction and toxicomania are those that present this perspective and therefore value the subject's relationship with the drug. However, they have differences, as Pereira (2008, p. 05, our translation) tells us:

There is a certain consensus regarding the difference between drug users and drug addicts. The user is the one who introduces the drug into a series of objects, making it just another object of consumption (beer, cigarette, coffee, medicine, etc.). “The drug addict, in another way, uses the drug as an exclusive object that impedes any other social bond, establishing an exclusive relationship with it.”

Thus, there is a possible correlation between the drug user and the drug addict, the user being a drug addict, who introduces drug consumption among other consumption objects, but can maintain social bonds, even if in a fragile way.

The use of the term additions, with its wide range and spectrum, in relation to the objects of consumption, denotes the core of the many pathologies of the act, such as gambling, food, the Internet, as well as other additive practices and their compulsions (FARIA, 2016, p. 55, our translation).

The user is the one who can consume the drug on a regular or sporadic way, using it both to obtain pleasure and to relieve itself in moments of distress. However, the substance

does not become the main reason for the subject's life. Therefore, it does not present the compulsive dimension that is characteristic of drug addicts (ALBERTI *et al.*, 2003).

The use of drugs presents itself as a way out of the malaise, the subject resorts to the substance when something constitutes intolerable and cannot be symbolized (ALBERTI *et al.*, 2003).

Therefore, one should not stick to the drug object. When starting from the psychoanalytic point of view, especially under Lacanian orientation, it is fundamental that the singular relationship that each subject establishes with it be prioritized, always trying to locate the function that the drug occupies in the psychic economy of each subject. Betting on the significant toxicomania makes this orientation worthwhile, where the subject is always responsible for its way of life (FARIA, 2016).

As Alberti *et al.* (2003, p. 19, our translation) corroborates “[...] what guides drug use is related to the clinical structure that is given in the uniqueness of each subject”.

Toxicomania then presents itself as the effect of a discourse, as it breaks with the current medical model, in which there seems to be no subject in question (MARCOS; TÓTOLI, 2017). “The drug addict is then, for psychoanalysis, an identifying signifier of the subject. To situate toxicomania in the field of psychoanalysis is to admit the existence of a well characterized phenomenon, without, however, characterizing it as a concept” (MARCOS; TÓTOLI, 2017, p. 129, our translation). This is because, for psychoanalysis, the subject-drug relationship matters more than any conceptualization of this phenomenon (MARCOS; TÓTOLI, 2017). According to Marcos and Tótolí (2017, p. 129, our translation):

In order to approach the concept of toxicomania, from psychoanalysis, as the effect of a discourse, it is essential to explain how the subject relates to the Other in order to then understand the position of the drug addicts subject in relation to this Other.

It is concluded, then, that all forms of intoxication can be considered a non-symptomatic response, the mark of a subject who tries to annul its primordial division, ignoring everything that comes from the unconscious (MARCOS; TÓTOLI, 2017).

What structure?

Now that we have placed toxicomania in the field of psychoanalysis, we can move on to the structural issues surrounding this phenomenon. According to what Alberti *et al.* (2003) confirmed in a study, in the last fifteen years, toxicomania has been approached basically by

two aspects of psychoanalytic knowledge. The first characterizes this phenomenon exclusively as a clinical type of perversion and the other considers it susceptible to present itself in any of the three clinical structures envisaged by psychoanalysis.

We'll address with the aspect that considers toxicomania a phenomenon likely to occur both in psychosis and neurosis and perversion. Alberti *et al.* (2003) affirm that, for the psychoanalytic clinic, a phenomenon can never determine the structure. The relationships that each subject will establish with the drug will always be unique means of dealing with malaise, displeasure, in short, castration. The authors also state:

the importance of preliminary interviews in deciphering the clinical structure of drug users, which will be fundamental to the analysis process. The important thing is to stick to the subject's discourse, to be able to listen to him, and not to establish the rule that every drug addict is perverse. Being a drug addict, by itself, does not say anything about the subject. (ALBERTI *et al.*, 2003, p. 18, our translation).

Identifying the process of singularization - and the way each subject inscribes itself in psychic structures, regardless of whether there is drug consumption - is only possible through a structural examination made from the relationship of this process with castration. Neurosis, psychosis and perversion are the structures that arise as responses to the enigma of castration (ALBERTI *et al.*, 2003).

In view of this orientation, Alberti *et al.* (2003, p. 24, our translation) raise the possibility of toxicomania to be characterized as a neurotic symptom. They state that:

The Freudian conception of a subject of the unconscious, tormented by sex, death and interdiction, was replaced by the psychological conception of a depressive individual, who rejects the unconscious, avoiding conflict.

Thus, this individual would be a kind of current version of the hysterical, which would resort to drugs seeking the ideal of total happiness, capable of appeasing the unease felt (ALBERTI *et al.*, 2003). The authors Marcos and Tótolí (2017, p. 136, our translation) declare that:

It is important to point out that the recourse to drugs, independent of the psychic structure, refers to the position of the subject in relation to the Other and to enjoyment, but the function of the drug object differs in each structure, since the jouissance extracted from the object is not the same.

There would then be a differentiation in the way the drug is perceived in the dynamics of each structure. In the words of the authors:

In neurosis, the drug can promote a rupture with phallic enjoyment, without the forclusion of the Name-of-the-Father, allowing the subject to experience a new type of enjoyment, a cynical enjoyment that rejects the Other, who refuses to metaphorize the body's own enjoyment. It is a way of diverting the desire of the Other, from the castration of the Other, through a short circuit. In psychosis, however, the drug does not promote this rupture with phallic enjoyment, as it is given beforehand, since there is already forclusion (MARCOS; TÓTOLI, 2017, p. 136, our translation).

In perversion, according to Alberti *et al.* (2003) the drug would serve as a defense instrument against a possible psychosis, since perversion would form before a neurotic structuring. The authors indicate:

Thus, the drug addicts exit would consist in the renunciation of primitive libidinizations through the drug or fetish. Fetishistic exit, which would conserve reality rates in all domains except for the fetish, for the perverse, or the drug, for the drug addicts (ALBERTI *et al.*, 2003, p. 17, our translations).

Enjoyment

Santiago (2001, p. 31, our translation) brings us the Lacanian conception of the ethical dimension of enjoyment, hypothesis by which he approaches toxicomania, which would be a direct consequence of the materialization of the real effect of science on the body. For him, “to approach toxicomania from the ethical point of view of enjoyment of the body, as Lacan suggests in Psychoanalysis and Medicine, certainly leads to conceiving it as a particular mode of satisfaction, distinct from biological dependence”.

The concept of enjoyment is related to the law and can be a relationship of challenge, submission or disdain (LEMOS, 2004).

As Almeida (2010, p. 72, our translation) points out “The use of the concept of enjoyment is rooted in Seminar 7 – The Ethics of Psychoanalysis (LACAN, 1988), in which it is defined as short and exciting satisfaction of a drive”.

This satisfaction demands a price, in this sense the author will say that “the exercise of enjoyment encompasses something of the order of a symbolic debt” (ALMEIDA, 2010, p. 73, our translation). The guilt is what reveals this debt in the imaginary register. The transgression opposes the prohibition, however, it implies the recognition of the law.

The absolute enjoyment, without limits, is mythical and belongs to the death drive. The only enjoyment that is accessible to us is integrated with the phallic signifier, which represents the inexistence of the sexual relation that bars the enjoyment (ALMEIDA, 2010).

The author appeals to Lacan when he states that desire “is not only the sexual and imaginary representation of a loss, but a way found by the subject of identifying with the loss. Enjoyment appears as that which is supposed to fill that lack” (ALMEIDA, 2010, p. 77, our translation).

The drug addicts would be a subject who refuses to participate in the universalized enjoyment of civilization, phallic enjoyment, the one that reaffirms itself in relationships of power, money and social competition. It remains on the margins of these relations, refusing phallic enjoyment and adhering to a deadly enjoyment. In the words of the author, “In toxicomania, the subject breaks with social relations and marries drugs” (LEMOS, 2004, p. 54, our translation).

The worsening in the context of toxicomania in our society, reveals the triumph of non-metaphorized enjoyment – that which is not governed by the signifier – producer of the “repressed” subject, who became a slave subjugated by its object of enjoyment (LEMOS, 2004).

One of the possible readings states that: “The success of the drug in post-modernity must be conceived in the context of the decline of the father-name, of the sharp decline of the symbolic father. The break-up of the drug addict with phallic enjoyment inevitably refers to the paternal metaphor” (LEMOS, 2004, p. 56, our translation). This decline reveals another, the production of the master signifiers, signifiers that produce the subject. Therefore, with the scarcity of signifiers, the ability to fantasize is limited. Considering that fantasy is responsible for reducing enjoyment, such limitation ends up impelling it, causing an impulse to enjoyment. The substance would then serve a search for completeness, trying to avoid the lack which has become unsustainable (LEMOS, 2004).

Regarding treatment, Lemos (2004) states that the challenges already begin in the transference, where the establishment of a relationship that allows a narcissistic structuring is necessary. The formation of a symbolic triangulation capable of operating as a paternal function is the objective of the treatment. It is necessary to promote a displacement of enjoyment in the real of the drug addicts. Immersing it in fantasistic daydreams, provoking pleasure alternatives, through a cultural order that fulfills the metaphor of symbolic castration.

Therefore, the analyst must operate with the subject in the construction of its fantasies, barring the thrust to the enjoyment (LEMOS, 2004).

The drug object

As Faria (2016) points out, the chemical effects that the drug causes in the body, causing new sensations, altering perception and consciousness, can lead this body to collapse. Death can sometimes be on the horizon and at the limit of the relationship that the drug addict establishes with the substance, because there is a real at stake in this relationship, which cannot be neglected.

According to Lemos (2004, p. 53, our translation): “Drugs act as a new way of responding to suffering. The drug addict is the one who doesn't want to know, who doesn't submit to any interdiction, who subscribes to a more than absolute pleasure”. The promise of absolute happiness is represented for the subject by the object-substance, which is configured as a real substance (MARCOS; TÓTOLI, 2017). Santiago (2001, p. 31) will say that:

If the drug can serve satisfaction, this happens because the latter is open, by its very nature, to every kind of possible outlet. The clinical approach of the drug itself is based on the fact that the pulse can be satisfied with a harmful object to the individual.

Lemos (2004) compares drugs with religion, stating that both would be the effects of child helplessness in the face of the substitution of paternal authority. She will say that the relationship of the contemporary youth with the law is the issue at stake and quotes Freud when he says that the relationship of a person with God depends on his relationship with his father, because God would be the image of a glorified father.

Therefore, the author indicates that one should “investigate the neurotic root of this 'father's anguish'. Part of the root of juvenile delinquency is sitting on this neurotic reminiscence of original helplessness” (LEMOS, 2004, p. 57, our translation). A transformation in the economy of enjoyment would be taking place, since such delinquency, expressed at times in toxicomania, would not only answer as a singular question, but would also be becoming a social phenomenon (LEMOS, 2004).

Santiago (2001, p. 29, our translation) states that: “Today, science provides chemical operators capable of constituting themselves as regulators of the libidinal economy itself, whose sole purpose is to extract satisfaction at body level”. Such operators are configured as objects of science, made so that the subject can enjoy them, producing a real effect that escapes the scientist. This is because science, besides manufacturing them, finds a way to keep the subject's desire attached to these objects (SANTIAGO, 2001).

The emergence of science carries as a crucial aspect, not the fact of having introduced into the world a deeper and broader knowledge, but that of having made emerge, in reality,

things that there were not before, at the level of human perception (SANTIAGO, 2001). Thus, Santiago (2001, p. 27, our translation) states that: “Therefore, the singularity of the Lacanian interpretation of the incidences of science on the body aims, especially, to isolate the real element from these effects”.

Scientific knowledge, from this interference, not only allows access to the real, but also determines and transforms it, inserting in it objects that, according to the author, are candidates to become remains, residues of civilization. These objects were called *gadgets* by Lacan, expressing the sense of waste that marks its presence in the world (SANTIAGO, 2001). Santiago (2001, p. 28, our translation) tells us that:

These gadgets qualify all kinds of instruments that, since then, are part of human existence, and the strongly utilitarian side of these objects is the factor that makes possible the conceptual approach of science as discourse, therefore, as a device of knowledge that produces social bond.

In this sense, Almeida (2010, p. 74, our translation) states that: “The sense of the utilitarianism of objects of enjoyment, of objects that would belong to others, that is, the right to enjoyment appeals to the question of enjoyment in its relation to one's fellow man, since it situates enjoyment in the field of the other and with the law”.

According to Marcos and Tócoli (2017), the enjoyment experienced in toxicomania is always identical to itself, there being no otherness. All that occurs is the infinite demand for the drug, object of consumption, causing the practice of enjoyment to be reduced to a pulsional practice. The subject enters a vicious circle, always desiring the same Thing, object of desire into which the drug has become.

Lemos (2004) infers that the enjoyment of the addict is a cynical enjoyment, which is inseparable from its own body, not passing through the body of the Other, becoming cynical for enjoying in the absence of this Other. The author formulates that:

In narcissistic totalitarianism, only I can enjoy more of everything and everyone. The drug commodity must be consumed as a gadget, a fashion product. In interpersonal relations, as in economic relations, the consumerist ideal is based on the belief of an object that is always available, that can be acquired without prohibition, in absolute enjoyment (LEMOS, 2004, p. 55, our translation).

Thus, the current image of enjoyment would be devoid of the symbolic. Contemporary cynicism would be stuck to individual enjoyment, with each one wanting to keep his own, without worrying whether it is subversive or not (LEMOS, 2004).

Santiago (2001) concludes that the drug addict's intense adherence to the drug can only be explained by the conception of a body submitted to the action of the signifier and inseparable from enjoyment. It is like an attempt to face the disturbances of the body that some subjects opt for this mode of satisfaction. Therefore, "before the inseparable body of enjoyment, toxicomania could be seen as a particular plus-enjoyment, correlative to a change operated, by science, in the real" (SANTIAGO, 2001, p. 31, our translation).

The function of surplus-enjoyment can be verified with the introduction of the drug in the field of enjoyment, through an excess of satisfaction, in which the object is established as an essential and exclusive partner of the subject. Such function is linked to the capture of the object in the satisfaction of the pulsional, and consequently, to the recovery of the loss (ALMEIDA, 2010).

Final considerations

This research aimed to raise the theoretical foundations of psychoanalysis related to the phenomenon of toxicomania. Answers were sought to questions regarding the applicability of psychoanalysis in this field. For this purpose, the texts selected for this review were of the utmost importance.

It has been verified that the term toxicomania is equivalent, for psychoanalysis, to an identifying signifier for subjects who make drug consumption their palliative measure. It is a measure that they take to deal with the uneasiness inherent in human life. The primacy given to the singular relationship that each subject establishes with the drug object is highlighted. Basic condition to approach toxicomania via psychoanalysis, since, independent of the psychic structure, the drug will have a specific function in each case.

Another important point, to be highlighted, is the direct relationship that the Lacanian concept of enjoyment maintains with toxicomania. Constantly found in the texts referred to, it became evident the importance that such concept has for the understanding of the phenomenon researched. Just as it was evident the need for a deepening in this field, so extensive and so complex.

Finally, it was noted that there is resistance to the work of psychoanalysts in the area of toxicomania. On one hand, these resistances may appear on the part of psychoanalysts, who move away from this area, relegating toxicomania to more behavioral and/or pharmacological approaches.

On the other hand, the drug addicts themselves are not inclined to seek analysis as the first alternative in the search for treatment. Nevertheless, psychoanalysis has much to offer and can contribute incisively to the treatment of the drug addict. For this, it is necessary that constructions be undertaken from psychoanalysis, since this reference sees beyond the addict, a subject, and proposes to operate with it. As Alberti *et al.* (2003, p. 26) conclude, for this to be done, it is necessary “[...] to put this subject to work with all the suffering that he has made equivalent to drugs, which demands the presence of the analyst and his act to bet on desire, unreservedly, intransigently even for the analyst”.

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