

## Pleasure and pain in sexual addiction: vicissitudes of masochism<sup>1</sup>

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**Abstract:** Sexual addiction can be defined as a psychopathological condition in which sex is sought in an uncontrollable, unrestrained manner, despite the emotional, social, and professional harm caused to the addict's daily life. After the frenzy, excitement, and adrenaline rush experienced in indulging in their own urgent and eager impulses, sexual addicts find themselves incapable to manage their sexual performances, being consumed by feelings of emptiness, failure, and despair. The issue of sexual pleasure "beyond the pleasure principle," combined with the issue of psychic pain, leads us to a more rigorous questioning about the dimension of masochism in subjective life and its relation with the destructive states of psychosexuality. In this article, based on the perspective of psychoanalysis, we seek to examine the close relation between self-destruction and libidinal satisfaction in the phenomena that are characteristic of the condition in question.

**Keywords:** sexual addiction, masochism, compulsion, libido, psychoanalysis.

In this article, we will define sexual addiction as the compulsive resort to sexual activity. It is a psychopathological condition in which sex is sought in an unrestrained manner (Estellon, 2014; Goodman, 1992). Sexual addicts, unable to manage their sexual impulses, can be led to self-destruction. Endless hours in sexual encounter applications; frenetic and immoderate sexual harassment against known and anonymous people; nights spent without sleep, with insatiable consumption of pornography; progressively higher financial spending with prostitution and other similar services; diverse and constant negligence as to professional, family and social commitments; obsessive thoughts in relation to the pursuit of diverse sexual situations; sex practiced often without caution and protection; continuous masturbation, often in inappropriate environments; propensity to risk situations, occasionally causing bodily injury and even fatal dangers, etc.

After the usual and understandable frenzy of sexual pursuit, comes the fear, morbid feelings of decay, exhaustion, despair, and helplessness. Despite the lack of epidemiological studies, the condition is estimated to affect 3% to 6% of the general adult population of the United States, approximately 17 million North American men and women (Estellon, 2014; Karila et al., 2014). These figures may be considered, at least, very significant. This type of compulsion would have greater impact on males,

since 80% of the subjects treated for sexual addiction are men (Estellon, 2014).

In Brazil, growth was found in the number of sexual addict support groups, such as the Dependentes de Amor e Sexo Anônimos<sup>2</sup> (Dasa) brotherhood, subdivided into several units in different regions of the country, five of them only in the state of Rio de Janeiro (Ferreira, 2013). It is basically a recovery program based on the Twelve Steps, the pioneering model of the Alcoholics Anonymous based on weekly meetings of mutual help among people suffering from emotional and/or sexual addiction.

In São Paulo, the Pathological Sex Treatment Outpatient Clinic<sup>3</sup> has operated since 1994 exclusively for cases of sexual compulsion, as part of the Program for Guidance and Assistance to Addicts (Proad) of the Federal University of São Paulo (Silveira, Vieira, Palomo & Silveira, 2000). Additionally, it can be said that the demand for psychotherapeutic treatment for sexual addicts has grown significantly, despite the lack of rigorously organized studies on the subject (Estellon, 2014; Ferreira, 2013).

In the field of Psychoanalysis, Joyce McDougall (1978/1992, 1995/1997), a pioneer in studies on sexual compulsion since the late 1970s, often merged her subject with the issue of sexual perversion through interrelation with the concepts of "neonecessity" (addictive sexuality)

2 Member of the international treatment program Sex and Love Addicts Anonymous.

3 Another outpatient clinic specializing in the treatment of these cases is the Outpatient Clinic for Excessive Sexual Impulse and Prevention of Negative Outcomes Associated with Sexual Behavior (Aisep), part of the Impulse Disorders Outpatient Clinic (Pro-Amity) located at the Institute of Psychiatry (IPq) of the University Hospital (HC) of the University of São Paulo School of Medicine (FMUSP).

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and “neosexuality” (deviant or perverse sexuality). Later, in the early 2000s, Vincent Estellon (2002, 2005) focused on the issue of sex experienced as situation of addiction, situating it in the sphere of narcissistic pathologies and/or borderline states.

Despite the advances in the study on sexual addiction, some issues remain obscure. Among them, it is of interest to us the close relations between self-destruction and libidinal satisfaction, pain and pleasure, death drive and libido, which are often characteristic of such condition. Here, sexual pleasure “beyond the pleasure principle” combines with psychic pain, taking us to the center, by definition, of the masochistic experience.

Founded on Freudian theory, the psychoanalytic concept of masochism refers essentially to the achievement of pleasure in the experience of pain (Freud, 1924/2007). This concept involves intricate constellation of fantasies, feelings, ideations, and behaviors characterized by pain, suffering, guilt, humiliation, or failure, subjectively experienced by the subject in singular and diverse manners, which seem excessive and, somewhat, self-induced (Glucksman, 2015; Maleson, 1984). These painful events would to a higher or lower degree be associated with obtaining some form of pleasure.

In the case of sex addicts, while the relief to their tensions and desires is pursued immoderately, through recurrent, deep engagement in the sphere of sexual enjoyment, the substrate of such hedonist excesses and extremes is such psychic malaise. Their deep engagement in the sphere of a deadly *jouissance* occurs in distinct manners in the most diverse cases. Our objective, therefore, is to advance the understanding of the relation between sexuality and destructiveness, prototypical of sexual addiction, developing the hypothesis that there would be a masochistic dimension involved in its dynamics.

## Psychic pain and sexual pleasure

The uncontrollable embracement of different sexual practices shows in its base severe harm to the psychic dynamics of addicted subjects, dramatically affecting the spheres of their affective, social, professional, and family life and, even, their general medical condition. In failing to abstain from the addictive conduct, individuals often put themselves in risk situations, such as being deliberately exposed to serious sexually transmitted diseases and other circumstances involving serious threats to their physical and psychic integrity. In this context, as stated by Estellon (2014) in his work *Les sex-addicts*, clinical and scientific advances on sexual addiction are of interest to the fields of Sociology, Anthropology, Epidemiology, and Public Health, especially with regard to their repercussions as to prevention and/or spread of the human immunodeficiency virus (HIV).

In medicine, the condition of sexual addiction was described by Aviel Goodman (1990, 1992, 1998),

psychiatrist of psychoanalytic orientation, who proposed considering it a “behavioral addiction.” According to the author, this addiction refers to a pattern of sexual behavior characterized mainly by (1) loss of control and (2) continuation despite harmful consequences (Goodman, 1992). This idea of behavioral addiction gives special attention to subjectivity because, in the description of symptoms, subjects themselves recognize the problematic behavior that continually they try to dominate without success (Estellon, 2014). They realize their capture by a process that eludes and imprisons them.

What draws our attention in “addictive sexuality” is the massive dialectics between pain and pleasure, emblematic, in our view, of the phenomena in question. Estellon (2012, 2014) points out that, in the interval between the pursuit of the desired sexual situation and the execution of the act, the sex addict may enjoy certain benefits: well-being, manic excitement, narcissistic assurance, feeling of pleasure. However, after the sexual act is consummated, it is not uncommon that the subject is consumed by growing malaise.

The nosological description of sexual addiction proposed by Reed and Blaine (1988) exposes well the dialectics mentioned, subdivided into four distinct phases: (1) phase of obsession, in which, in response to existential difficulties, subjects are entirely absorbed by sexual concerns and thoughts; (2) phase of ritualization, in which addicts indulge in certain “rituals” for the pursuit of sexual activity, for example, using applications (Tinder, Grindr, etc.) and/or attending certain nightclubs, meeting venues, or places deemed conducive to acquisition of sexual partners and/or practices (cruising, prostitution, internet searches, public restrooms, etc.); (3) phase of “sexual action” itself, in which sex addicts live directly the sensory experience of sex, thus obtaining certain doses or levels of pleasure, satisfaction, and relief; and (4) phase of desperation, in which, after the experience of appeasement, they are consumed by the feeling of helplessness in managing their sexual impulses, faced with the impossibility of controlling their compulsive conducts (Estellon, 2014).

As a result, in these situations, transitional and temporary pleasure associated with sexual activity ends up being source of psychic pain. The addiction is established by a gradual process that involves numerous steps: experimentation; occasional or festive use; regular use, but still not exceeding the threshold of loss of control, etc. (Estellon, 2012, 2014). Somewhere along the way, the sexual impulse becomes an eager requirement, being stronger than reason and thought.

As proposed by Estellon (2012, 2014), adverse reactions involved in the addictive cycle would range according to the uniqueness of each individual’s psychic structure, some with more neurotic characteristics (feelings of guilt, self-repulsion, shame), others with more narcissistic, borderline characteristics (abyssal emptiness, melancholy, deep hopelessness). Despite

some similarities to obsessional neurosis, such as invasive presence of sexual obsessions and prevalence of compulsive system, sexual addiction would be a predominantly borderline condition. Unlike obsessive subjects, sex addicts actually advance to the act itself, they do not remain immersed in thoughts and fantasies. If obsessive subjects show serious inhibitions in the sphere of action, sexual addicts cannot curb their advances to action.

Adopting a pluralist perspective, which coordinates the pulsional model (intrasubjective) and the objectal model (intersubjective), Estellon (2014) seeks to investigate the mechanisms of defense in the base of sexual addiction. The propositions of the author approach the notion of “manic defense,” introduced by Melanie Klein (1935/1996, 1940/1996) decades prior, in her studies of the depressive states in severe neuroses, borderline states, among other psychopathological conditions. Manic defense is the intrapsychic attitude in which individuals avoid, deny or attempt to reverse the dependence they feel in relation to their primary and fundamental objects (Segal, 1988). According to Klein, objectal dependence becomes a clearly perceptible experience in the depressive position and, because of this, it fosters intense reactions of the ego: affective ambivalence, fear of loss, grief, longing, and guilt. “It is against all this experience that the organization of manic defense is directed” (Segal, 1988, p. 83, our translation). Subjects, consequently, assume a triumphantly disdainful posture regarding the animic reality (Schmid-Kitsis, 2005). The purpose of their combative effort is to avoid the confrontation to their vulnerability in relation to objects, internal and external.

In that exact direction, Estellon (2014) states that, in the psychic dynamics of sex-addicts, the psychic conflict would be externalized through less complex defensive strategies, such as: (1) the *splitting*<sup>4</sup> between feelings and sexual conducts, whose main objective is to prevent affective ambivalence and depressive suffering – consequently, sexual partners tend to not be affectively invested; (2) in a complementary manner, it is established the mechanism of *denial*<sup>5</sup>, which excludes from consciousness certain representations and affections that are irreconcilable with the ideal

ego, maintaining them isolated and counterinvested – losses, grief, separations, everything that could undermine the psychic life for being contradictory or painful is “discarded,” excluded by the ego, and upon losing contact with their affections, sex addicts become hostages of their impulses; (3) the *idealization* of inaccessible objects and/or situations, parallel to the extreme devaluation of these same objects, when reality, disappointments, and frustrations are imposed in a non-negotiable manner; (4) *omnipotence*, in which subjects easily discard and deinvest not only their sexual objects, but disregard rules, social standards, and the other codes of good conduct in their insatiable pursuit of sexual activity (Estellon, 2012, 2014).

Accordingly, Estellon (2015) uses the term “melancholic sexuality” to refer to the condition. Thus, the character of melancholy present in the determinations of sexual addiction is emphasized, which is manifested through a generalized disbelief. Sexual addicts would not believe in the benefits of a monogamous relationship and would not believe in themselves. They would deem themselves unable to achieve affective fulfillment, even if that skepticism cannot be verbalized, put into words. Sexuality is then used as a defense strategy against an annihilating internal aridity. Sex ends up being sought in a manic, frantic manner. In the base of these hedonistic excesses would be the desperate attempt to protect oneself from a latent melancholy, rigorously rooted. Consumed by narcissistic weaknesses and affective needs, sexual addicts would use the body of others to get numb and forget they do not believe in anything.

Roussillon (2004a, 2004b), in proposing a differentiation between “pleasure-discharge” and subjective satisfaction, illuminates the paradox that is imposed in this panorama. The alienating forms of dependency would be associated with the forms of pleasure without sharing, without emotional sharing between two people. Forms that would not be equivalent to a subjective satisfaction. André (2013) points out that, even when sleeping with multiple partners, sex addicts feel isolated, alienated. They end up suffering from severe helplessness and loneliness. In this impasse, sexual pleasure and psychic pain overlap, sexual enjoyment is no longer only vector of pleasure, coming to serve simultaneously as expression of extreme subjective suffering.

It can be said with Estellon (2015) that sexual addiction is a manic, countermelancholic solution, in opposition to the fear of loss and the passivity in the face of the desiring movements of the other, being, in the limit, a melancholic and masochistic movement. Although the author does not develop this proposition nor addresses directly the relation between masochism and sexual addiction, we think that in this association lies a sort of master key to the understanding of sexual addiction, especially the tortuous set of relations between sexual pleasure and psychic pain that is characteristic of the condition. While sexual addicts indulge in diverse

4 It is worth noting that denial (*Verleugnung*) and splitting are two elementary and complementary defense mechanisms proposed by Freud (1927/2007), predominantly in his theorization about perversions and psychosis. However, in the context of contemporary psychoanalysis, both mechanisms serve as paradigms for the investigation of other non-neurotic sufferings (Estellon, 2014). The first refers to the individual’s refusal to recognize the reality of a traumatizing perception. In studies on fetishism, prioritized model of perversions, the subject would perpetuate “a childish attitude by making coexist two irreconcilable positions: the denial and the recognition of female castration” – prototype of a division in the essence of the ego (Laplanche & Pontalis, 1967/1982, p. 436). Denial, therefore, establishes a splitting of the ego, promoting the coexistence of two conflicting and incongruous attitudes in this psychic instance: one that rejects a perception of external reality and another one that recognizes this same perception.

5 See previous note.

extremes of pleasure and sexual enjoyment, such indulgence would have masochistic suffering as driving force and substrate.

### **Masochism and its general levels of comprehension**

In an effort of delimitation, Maleson (1984) tried to map the restricted and broad definitions of masochism in psychoanalytic theory and the place of sexual arousal in this complicated and varied spectrum of phenomena. To that end, he distinguished three general levels of comprehension of the concept: descriptive, theoretical, and dynamic. In a broad and purely descriptive sense, the term masochism is applied to specific manifestations of sexual perversion and overtly nonsexual pathologies, as well as to a wide range of more circumscribed thoughts, attitudes, and actions that, except for some significant element of psychic and/or physical suffering, show few similarities between them.

On a theoretical level, related to Freudian metapsychology, masochism in the first topic is understood as expression of partial sexual pulsions or, more specifically, as one of the destinations of sadistic pulsions, which would assume a passive form (Freud, 1905/1996, 1915/2004). In the second topic, the operation of death drive and the female propensities for pain are interrelated.

Finally, at the dynamic level, the term masochism suggests or emphasizes different processes, for example: the harshness of the superego in relation to the ego; intra-psychic conflicts as to the impetus to aggression; regressions and/or sadistic-anal fixations; tendency for retention of objects derived from early deprivations; female traits; desires or fantasies of spanking and erotic violations, whether conscious or unconscious. These different levels of theoretical abstraction can lead to connotations distant from one another that result in variation of the perception and interpretation of clinical data (Maleson, 1984).

In Freudian theory, the concept of masochism appeared with very restricted sense, in the context of exploitation of infantile sexuality, pre-genital. It referred to the sexual excitement associated with physical or psychic pain, by means of phenomena in which the sexual act combined pain and pleasure for a subject that experienced them passively. Satisfaction was conditioned on the pain imposed by some sexual object (Freud, 1905/1996). In addition, from the perspective of the first theory of drives, masochism designates one of the partial drives of sexuality. These appear, for the most part, in pairs of opposites. Among these pairs, Freud (1905/1996) mentions the drive to cruelty in its active and passive forms, corresponding to sadism and masochism, respectively.

Freud advanced some steps in "A child is being beaten," text of 1919. The central subject is the

fantasy in which a child is being beaten or observes another being beaten by some parental figure. This construction would relate to a desire to be beaten by the father, developing under the impact of incestuous Oedipal love (Freud, 1919/1996; Maleson, 1984). Usually unconscious, it would require reconstruction work in analysis. Because of guilt, repression, and regression to anal pre-genital organization, an erotic desire would suffer drastic retaliation, transforming into desire of spanking. Here, masochism is presented as unconscious psychic constellation, resulting from certain confluence of forces, and not only as latent or manifest perverse phenomenon.

With the publication of "Beyond the pleasure principle" (1920), Freud proposed a new pulsional dualism, based on the contrast between life drive (Eros) and death drive (Thanatos). Thus, some fundamental principles of his thought were deeply redefined. Death drive is introduced as a detachment force, which would break the bonds established by Eros – set that gathers previously propounded drives, those of sexual and self-conservation nature (Freud, 1920/2006). Later, in the 1924 essay, "The economic problem of masochism" (Freud, 1924/2007), he revised and deepened the metapsychology of masochism, consistently with the second theory of drives and the second topic, creating certain conceptual consistency between its varied and complex clinical forms (Maleson, 1984).

Masochism, in his revision, is presented in three forms: (1) erogenous masochism, a contingency of sexual arousal, expression of a portion of death drive not directed to the external world or to the external object, which remains fixed libidinally within the organism, being directed to the subject; (2) female masochism, expression of the feminine essence, associated with a position of passivity in the face of the sexual object; and (3) moral masochism, norm or rule of behavior in which the relation with the sphere of Eros weakens and the death drive, after having been directed to external objects, is violently redirected to the subject itself, acting against oneself (Freud, 1924/2007).

These developments complemented previous propositions. Sadism and masochism in 1924 are no longer mentioned as expressions of partial sexual drive. From the conceptual point of view, they are now understood as products of an originary fusion between libido and death drive, being related to different psychic instances: id, ego, and superego (Freud, 1924/2007; Maleson, 1984). The complicated profusion of relations between these instances and their pulsional properties would produce the sadistic or masochistic behavior. In moral masochism, for example, the masochism centered on the egoic system would seek punishment, sometimes by the superego, sometimes by external parental powers.

The erogenous and primary masochism, understood as the capacity to derive sexual pleasure from pain, prototype for all other forms of masochism, would be based on an originary fusion between libido and death drive, irreducible to further transpositions (Freud, 1924/2007).

After a major portion of the destructive pulsion was transposed to the outside, towards external objects, an internal residue would have remained, fixating to the libido, becoming an integral part of it and taking the subject itself as an object of satisfaction and/or discharge. This differs from secondary masochism, defined as reintroduction of sadism — that is, a redirection of the aggressiveness aimed at the object against the individual him/herself —, which occurs regularly because of the cultural repression of destructive pulsional components, mostly prevented from being directed to the outside and discharged on external reality (Freud, 1924/2007; Maleson, 1984). Of the secondary and posterior forms of masochism, *moral* masochism is not only imposed as an emblematic example, but constitutes the form that interests us predominantly in a deep analysis of sexual addiction.

This is because moral masochism is not exactly referred to the perverse arrangement of sexual life *stricto sensu*, it is not a passive and pleasant position in the face of the pain inflicted by a sexual partner/object (being subjugated, humiliated, tied up, or whipped in certain practices), but, rather, to modes of existing, relating, behaving that, notwithstanding the resulting emotional and psychic harm, are closely interrelated to a libidinal satisfaction. It can be said that, despite any parallels with the perverse arrangement of sexual life, sexual addiction is unique and is not to be confused with masochistic perversion. However, our hypothesis is that, in its phenomena, it would have a masochistic dimension, with the masochism involved there being of secondary, moral order, and not strictly erogenous, primary.

The most extreme and pathological form of moral masochism is recognized through an unconscious feeling of guilt, which comes to be transfigured into eager “need for punishment,” whose most significant effect is the intense opposition by the subject to the possibilities of “curing the disease,” according to Freud’s own words (1924/2007, p. 111). This would involve an intense summation of forces that rebel against the cure, hindering, among other things, the success or even the subject’s compliance with the psychoanalytic treatment, leading to the prominent notion of negative therapeutic reaction (Freud, 1924/2007). One way or another, subjects would repeatedly put themselves in painful situations, being moved by an unnamable and destructive force.

Considering that psychic elements like the suffering, the pain, the failure and the self-punishment are determining aspects of moral masochism, their relationship to the field of sexuality is not immediately clear, accessible, objective. However, it is important to note that, according to the Freudian theoretical framework, both the moral forms and the overtly perverse forms of masochism would have sexual components and would be derivations of the erogenous and primordial masochism (Freud, 1924/ 2007; Maleson, 1984).

In moral masochism, in its subjective dimension, there would be a direct “re-sexualization” of the

Oedipus complex as follows: (1) an unconscious feeling of guilt comes to be transfigured into pronounced and unconscious need for punishment on the part of the ego in relation to some parental power; (2) the moral, until then “desexualized” after the supposed resolution of the Oedipus — i.e., after the abandonment of direct sexual goals —, would become once again “sexualized,” leading to intense regression to the sphere of child Oedipal experiences (Freud, 1924/2007; Maleson, 1984).

According to Catherine Chabert (2014), it would be precisely the moral masochism that would take to the front of the scene in borderline conditions. Its pathological forms are expressed by means of a “need for punishment” that coerces and imprisons the ego, leading the subject to act in a self-punishing and self-destructive manner. Desires, felt as evil, impure forces, would constitute a source of drastic retaliation, translated into the dimension of disqualification and lack of self-esteem, which impose sacrificial conducts aimed to the body and psyche in their capacity to seduce and experience pleasure. The subject, in different ways, would seek avidly the state of psychic abandonment, neglect, and helplessness.

Based on the panorama presented, we propose that moral masochism constitutes, therefore, a category of singular importance for the understanding of sexual addiction. Its phenomena, tied to the logic of trauma and compulsion to repetition, show with such accuracy the following paradox: the pleasure desperately sought in these cases is inseparable from the drive to pain and self-destruction.

### **Masochistic pleasure: a pleasure “beyond the pleasure principle”**

Evaluating the interrelation between masochism and death drive, Laplanche (1970/1985) states that the *tournant* of 1920 came to further complexify the issue of masochism in Freudian theory. The masochistic potential would exist in any human being, always about to awaken and reinforce some form of suffering. However, “the subject is only a masochist while it enjoys there where it suffers, and not while it suffers here to enjoy there, according to an arithmetic or algebra of pleasures” (Laplanche, 1970/1985, p. 107). Accordingly, the questioning about the predominance of the pleasure principle in the course of psychic processes is the key factor for the introduction of a new theoretical perspective, which is not restricted to the paradigm of neurosis and repression (that which is pleasure for one instance would be displeasure to another).

The central question of suffering would have as underlying dimension the pain experience — understood here as psychic disturbance resulting from effraction, rupture of internal protective barriers by the influx of non-associated energy (Freud, 1920/2006; Laplanche, 1970/1985). In this sense, masochistic phenomena would not conform with the classic postulate of propensity to obtain

pleasure and avoid displeasure, since they would signal a pleasure that would belong to another order of operation.

The pleasure principle is redefined in 1920 as “a tendency that serves a function, to make the psychic apparatus entirely free from excitement, or to keep the amount of excitement constant, or, also, to keep it as low as possible” (Freud, 1920/2006, p. 180). This position – which Freud claimed to have been crucial to the postulation of the death drive – is one of the most difficult that are contained in the text of 1920, as it puts in equivalency three very different processes: (1) reducing; (2) maintaining constant; and (3) extinguishing completely the load of excitement. Of these three, the only one that would really justify the postulation of the death drive would be that which refers to the total reduction of the excitatory load (Klier, 2016). That is because if the tendency of the pleasure principle were to make the psyche entirely free of stimulations, what would be the sense of evoking a “beyond” this principle?

This ambiguity will be resolved precisely in “The economic problem of masochism” (Freud, 1924/2007). In the text of 1924, Freud examines in greater depth the relationship between the pleasure principle and the drives to life and death, relationship whose confusion of purpose was evident in 1920. He attributes to the pleasure principle an important function: to protect not only the psychic life, but the organic life in general, by aiming at homeostasis and constancy. Thus, he could hardly make it fully consistent with the Nirvana principle – principle of reduction of excitations to level zero, proposed by Barbara Low –, mentioned in the text of 1920 as equivalent to the pleasure principle (Freud, 1920/2006, 1924/2007; Klier, 2016).

Therefore, Freud (1924/2007) undoes the absolute equivalence between pleasure and tension reduction, emphasizing the fact that the accumulation of excitement could be felt as pleasurable in the psyche, as well as the reduction of tension could be felt as unpleasurable. Pleasure and displeasure would depend not only on a quantitative factor, but also on a *qualitative* aspect – which, in turn, he recognizes the difficulty in delimiting.

If the pleasure principle aims at a qualitative regulation, and not just quantitative, of excitement loads, this would not be primary in psychic functioning, but secondary in relation to the Nirvana principle – more elementary, associated with death drives. Freud attributes to libido, energy substrate of sexual drive, the driving force for the transformation of the Nirvana principle into pleasure principle, since the latter would be, in a way, a complexification of the first (Freud, 1924/2007).

A third principle, that of reality, would express the requirements of external reality, ensuring the possibility to postpone the unloading of excitations and temporary acceptance of the tension generated by displeasure. Despite their different purposes, none of the three principles would a priori deprive the others of power. They operate at the same time, according to an intricate game of forces, proportions, and interrelations (Freud, 1924/2007).

Emphasizing the notions of pleasure and satisfaction, Laplanche (1970/1985) proposes the following perspective, shown after the presentation of the death drive: “pleasure seems to split into two directions: on the one hand, the enjoyment, in the sense at the same time of unrestrained pleasure and lust; on the other hand, satisfaction that is situated in the order of the appeasement of vital tensions” (p. 108). Therefore, enjoyment would refer to a mode of pleasure (unloading, appeasement) that would disregard homeostasis, constancy. A pleasure “beyond the pleasure principle”, governed by the logic of the Nirvana principle, which would ignore the limits related to the maintenance of life (physical and psychic).

The author then distinguishes two levels, dimensions of a quantitative scale that would range from “pleasure (functional) – displeasure (functional)” to “lust and/or enjoyment.” The phenomena of psychic life would be situated at different points in this series. Erogenous and primary masochism, prototype for all other forms of masochism, would be closer to the second end of the scale. Thus, the enigma of masochistic pleasure would reside in the fact that, while it is corollary of an association between libido and death drive – an absorption of the latter by the first, this association often appears closer to the territory of excess, of excitatory inflows, of rupture of protecting internal barriers. A mode of pleasure whose potential, ultimately, is only fully achieved in the experience of pain.

Considering that, we will resume the discussion on moral masochism and its relation with sexual addiction, in order to advance our examination on the specificity of the masochistic dimension in the psychic dynamics of sexual addicts.

## **Oedipus complex and masochism: new perspectives**

According to Chagnon (2006), with the increased appearance of borderline states in clinical practice, new theoretical paradigms were imposed for psychoanalysis such as pain, moral suffering, melancholy, “malaise” of excesses, and paradoxical anguish of intrusion and abandonment. In detriment to the issues associated with the Oedipal desire, the focus on the “primary,” on narcissistic traumas, redirected the treatment of borderline cases toward care and repair. Theoretical perspectives on the subject, in this context, would assume “the risk of finding themselves ‘desexualized’, a trend (International?) which many French analysts will oppose” (Chagnon, 2006, p. 48, our translation).

Chabert (1999, 2000, 2003, 2014) was one of the authors who opposed it, investigating the masochistic forms assumed by the Oedipus – which, in the panorama of borderline operations, assumes a more excitatory and destabilizing content than “structuring,” so to speak. If in the Anglo-Saxon and North American literatures the pre-genital model tends to be predominant, even though not exclusive, it is necessary to bear in mind that

the Oedipus complex is also active and must be treated specifically in accordance with the psychopathological organization in force. Similarly, Estellon (2017) calls attention to the risk of stumbling upon a simplistic and one-dimensional logic that restricts neurotic sufferings to castration anxiety, and borderline issues to identity anxieties. The clinician should work with the dialectic between different, sometimes contradictory positions – but, ultimately, complementary.

Extremely consistent with Freud's categories, Chabert (1999, 2000, 2003, 2014) proposes that moral masochism is the form specifically assumed by the borderline as the struggle against object loss anxiety requires massive counterinvestment as to incestuous and guilty objectal mobilizations from the Oedipus. The Oedipal hatred, associated with insufficient repression of desire and difficulties in processing affective ambivalence, can take two possible ways, through the return against oneself: masochism and/or melancholy (Chabert, 1999, 2000; Chagnon, 2006).

In the chronology of the Freudian work, as noted by Chabert (2003), the study "Mourning and melancholia" (Freud, 1917 [1915]/1996), written in 1915, precedes the text about masochism of 1924. The symptomatic description of melancholia proposed in 1915 presents surprising similarities to that of moral masochism years later: painful humor, lack of interest in the external world, loss of capacity to love, affective inhibition. These elements are characteristic of a mode of being that would "operate" against the ego. Chabert (2003) questions, therefore, if it would not be an analogous procedure involved in moral masochism, in which the relation with the object is reduced to a narcissistic movement, in which suffering is sought by oneself. The hatred directed to the object is turned against its substitute, the very ego of the subject, debasing it and making it suffer, deriving from such suffering a sadistic satisfaction.

It is not difficult to observe that the regressive movements of sexual addiction would be somehow associated with the melancholic processes, however, manifests under a "masochistic" guise. The unrestrained "hunting" for sexual situations would constitute an attempt to inject life and spirit into a subject in deep melancholic suffering. The color of life and relationships remains without force, without vigor, which seems to be bypassed only temporarily, when the addict indulges in the "adrenaline rush" and in the excitement of the prospect of achieving some desired sexual situation.

Estellon (2012), emphasizing the melancholic dimension of the addictive sexuality, indicates that, as a counterpoint to the internal affective aridity, it is introduced the aspect of the "extreme," in which the sexual pursuit assumes radical and dangerous character. Addiction renders the subject unable to be satisfied with usual practices and experiences, leading to the pursuit of more intense, keen, poignant sensations. Sex addicts, without realizing it, start to test the limits of external reality blindly, recklessly and irrationally. They

deliberately expose themselves to sexually transmitted diseases and other risk situations. Furthermore, they feel consumed by anguish and agony after the cessation of performances. In our opinion, this way of operating between pain and pleasure would be a derivation of moral masochism, incessantly updated in these cases, engendered not only by singular forms of melancholy, but, first and foremost, by the precariousness of structuring and integration of Oedipal experiences<sup>6</sup>.

## Sexual addiction and the vicissitudes of moral masochism

In borderline cases, the good/bad splitting would determine the Oedipal condition, avoiding the effective establishment of the affective ambivalence between love and hatred, this remaining to a large extent inaccessible. Estellon (2017) brings us to the concept of "blank psychosis", proposed by Donnet and Green (1973), interrelated with the states of emptiness that haunt the narcissistic anxieties, as well as with the difficulty of introducing the ambivalence.

In the blank psychosis of Donnet and Green (1973), the subject cannot effectively develop an internal space of solicitude, comfort and appropriation of the object: the capacity to be alone in the absence of the other, or to "forget" the other in their presence. The obsession that the dependence implies would be strangely linked to the failure of the creation of a structuring internal space of loneliness (Donnet & Green, 1973; Estellon, 2017). The thought appears emptied, denoting significant fissures in the sphere of fantasies and creativity. Consequently, psychic malaises tend not to manifest subjectively, but through somatic exclusion, as in the case of psychosomatic illnesses, or by means of an exclusion by act, as in compulsions, addictions, and other passages to action. This expulsion ends up producing a state of blank of thought, internal representative emptiness.

Chabert (1999) proposes that the violence of the negative movements (the blank of thought, the feelings of vital lack, emptiness) and the weak resistance of the positive (the creation of a space of representative creativity) would make impossible the establishment of a commitment between both, causing imbalance in the fragile defensive arsenal of the borderline. The exclusion of conflict, by a radical splitting, is the most effective safeguard solution, although extremely expensive.

Accordingly, the author highlights that masochism has an essential place in the symbolic plane, something demonstrated by Freud in the text "A child is being beaten" (1919/1996). The interrelation of masochistic

6 The subject of the singularity of the Oedipus complex in the determinations of sexual addiction was explored in greater detail in the doctoral thesis of the first author of this article, titled *Sexual addiction: a combat against Eros?* (Klier, 2017), conducted in the Graduate Program in Psychoanalytic Theory at the Federal University of Rio de Janeiro (UFRJ), under advisor Prof. Dr. Marta Rezende Cardoso.

fantasy and the Oedipus is evident: perverse tendencies are part of psychosexual development processes, both the structuring and the de-structuring. In the Freudian conception, the fantasy of the child being beaten is presented usually in three phases, and only one of them remains unconscious.

If in the first phase the child imagines another one being beaten, the approximate meaning of this conjecture would be the exclusivity of the love of the father, since it is another child suffering retaliation. However, this incestuous love would succumb later to such feeling of guilt, promoting, in the second phase, a reversal of the sadistic triumph: now it is the very child that is author of the fantasy being beaten. The sadism of the first step is converted into masochism in the second, denoting severe punishment. The desire to be punished by the father would appear as a regressive deformation of the unconscious desire of having a passive sexual relation with the same. In its deepest sense, it is equivalent to one of the contingencies of the Oedipal crossing, being expressed in higher or lower degree according to the singularity of each individual.

This phase that condenses incestuous pleasure and punishment would be the most important, but also the most serious as to the consequences that it can engender (Freud, 1919/1996). Its content, however, is not interrelated with a real experience, as it would not refer to a memory or recollection, but, rather, to a construction in analysis. It usually remains unconscious.

Chabert (2000) questions what would happen when the classic development of fantasy is not produced, being replaced by a different sequence. The author perceives the evocation, in certain analysis, of scenes arranged according to the principles of the second phase described by Freud (the child, at the same time protagonist and author of the fantasy, is being beaten by the father) and that, on the other hand, they do not fit the psychic status attributed to them in the theory of neurosis. These are not repressed scenes and, therefore, would not be unconscious in the classic sense of the term. They could hardly be considered as a product of the analysis. "These scenes are immediately imposed as real situations, as conscious obsessions or even, more seriously, as more or less compulsive acts" (Chabert, 2000, p. 114, our translation).

Therefore, the fundamental hypothesis of Chabert (1999) is as follows: in some borderline patients, the fantasy of beating is insufficiently repressed, reappearing in the form of repetition in iterative masochistic situations. These are regularly put into action, for example, in severe eating disorders and self-destructive behaviors. The borderline would express in external reality severely self-punishing tendencies that would involve some form of obtainment of pleasure. By means of bodily or compulsive suffering, something of the order of desire would remain excluded from the associative network of representations. The subject would thus suffer through its own body or its own actions (or the consequences of its actions), and

not exactly through a relationship established with the other, whether in external reality, or in fantasy or thought.

Chabert (1999, 2014) does not disregard the fact that the idea of insufficiency of repression would have been developed by Freud precisely through the concept of moral masochism. In this, the relation with sexuality is apparently subsided, mitigated (Freud, 1924/2007). The sexual object is less important than the suffering that is derived from adverse circumstances. However, the libidinal sphere is only apparently subtracted, because it continues to be fully active in self-punishment. There is a "re-sexualization" of child experiences: the temptation of committing the "sin" is accompanied by the need for punishment, for an atonement by Destiny, the latter possibly understood as greater and supreme expression of a parental power (Freud, 1924/2007; Chabert, 1999).

If, in normal conditions, the Oedipus complex succumbs to repression, becoming peculiar unconscious grouping of representations and desires, in moral masochism this process is extensively precarious. The subject would act on external reality that which could not be integrated in the internal reality, either by representative work or by repression (Klier, 2017). Being established predominantly outside the sphere of an unconscious guilt – that in neurotic structuring finds discursive pathways, especially through remorse – in the borderline, these punishing forces have much more to do with a system in which the interdicted are not truly internalized, the fragility of the psychic floodgates not authorizing the superego to engage in a civilizatory process. It would be almost the reverse that is imposed, because it is the savagery that is superimposed and floods the superego (Chabert, 2014; Freud, 1923/2007).

The tangle of excitations to which the Oedipus fails to provide containment would invade precisely the psychic space, because its potential expressions are governed by weak and floating boundaries. The pulsional overload would push the subject to the passage to action, being powerful in its sanctions: due to incestuous valence, sexuality would take another direction, chaotic and unrestricted, the violence taking over the psyche, colonizing the superego in the same way as the other instances. The subject would become at the same time judge and victim of itself, in the sense that there would be no consistent internal reference to a third that interdicts, agent that establishes the law, bound to the paternal function. This shows in an exuberant manner the perverse and timeless character of child sexuality: the suffering or pain that the subject unadvisedly imposes to itself in "claiming" itself to be its only master, omnipotent and exhibitionist (Chabert, 2014).

In psychopathological situations, much of the moral consciousness, resulting from the process of internalization of the interdiction, would be lost in benefit of the moral masochism that is triggered. It is important to emphasize, according to Chabert (1999), the external character of the moral and of the superego in masochism



involved that is clearly interrelated with the failure of the mechanisms of internalization. This collapse reflects in the difficulties of treating the affective ambivalence and the integration of hate.

In the absence of well-established internal limits, the subject would desperately need to test the limits of external reality, putting itself in situations through which pain and sexual pleasure reach maximum intensity, sexuality assuming more than ever extreme, destructive, and masochistic character. In this context, the need for punishment, expressed in successive performances and not through discursive ways, comes, finally, as a point of interruption, *coup d'arrêt*, extreme resource for braking, whose violence is equivalent to the overflowing intensity of the incestuous impulses (Chabert, 2014). Repeatedly entering harmful and possibly deadly circumstances, sexual addicts would be, in some ways, exercising in act an attempt of self regulation, of restricting the unbridled enjoyment.

In this context, Freud said (1924/2007) that, to get the parental couple's representative that punishes and limits, masochists "must do inappropriate things and work against their own benefit, destroy the prospects that open to them in the real world and eventually annihilate their own real existence" (p. 114). Moral masochism would present as remarkable evidence of the existence of a pulsional fusion. On the one hand, its danger derives from the presence of the death drive in its origin, of the portions that escaped from being directed out and, on the other hand, it also represents an erotic component, the process of self-destruction of the subject being inevitably subjugated to a libidinal satisfaction.

## Final considerations

With regard to the masochistic dimension involved in sexual addiction, this is not a suffering that comes from the sexual object, from a specific plan that involves submission to an other in the exercise of sex, but, rather, from an involuntary and smothering "servitude" to the very imperatives of the drive. Moral masochism would be the link, the conjunction between the pleasure of unloading and the psychic harm resulting from the embracement of

an enjoyment that rejects domestication. A tortuous way of channeling, redirecting the pulsional force, confined to the elementary mechanism of compulsion to repetition, which would not attain the status of psychic processing.

Accordingly, Chabert (2000) questions if the sacrificial effort in self-destructing conducts would not characterize the pursuit of protection against the Oedipal object – simultaneously source of non-integrated love and hate –, acting as a shield to deflect deadly pulsional movements. The characteristic behaviors of moral masochism would be equivalent to a massive movement of counterinvestment of an excessively exciting and dangerous reality.

In sexual addiction, this defensive counterinvestment occurs not only by incessant resort to sex, but also through progressive embracement of situations of extreme risk by subjects, causing serious threat to their physical and psychic integrity (Klier, 2017). Sexual addicts, in provoking, testing the social limits and conventions, would express in external reality that for which symbolic form and figuration could not be found in the internal sphere. It would be precisely in this expression of the "extreme" that would become evident the dimension of moral masochism in the conditions we are examining.

When faced with the blank, emptiness, despair, and serious consequences of their actions, sexual addicts would find, somehow, that which they so masochistically seek: a more consistent reference of interdiction, an anchorage in the rough and wild seas of excitement. In seeking toxic and uncontrolled sex, they would paradoxically also seek potentially structuring brake, limit, and punishment.

The pathology is presented precisely in this acted, childish, and omnipotent dynamics, in which addicts, metaphorically speaking, continuously beat their own heads against the wall, disregarding their sexual objects and, ultimately, disregarding the other, the alterity, and the authority. Moral masochism denotes precisely this strange contingency of sexual pleasure: its achievement is hopelessly bound to a hardship that, in turn, fulfils the function of narcissistic safeguarding of the most primitive and innominable objectal desires.

## O prazer e a dor na adicção sexual: vicissitudes do masoquismo

**Resumo:** A adicção sexual pode ser definida como quadro psicopatológico no qual o sexo é buscado de forma incontrolável, desenfreada, a despeito dos prejuízos emocionais, sociais e profissionais que suscita no cotidiano do adicto. Após o frenesi, a excitação e a adrenalina em ceder aos próprios impulsos urgentes e vorazes, o *sex-addict* percebe-se incapaz de gerenciar suas atuações sexuais, sendo consumido por sentimentos de vazio, fracasso e desespero. A problemática do prazer sexual "além do princípio de prazer", conjugada à dor psíquica, nos conduz a uma interrogação mais rigorosa sobre a dimensão do masoquismo na vida subjetiva e sua relação com os estados destrutivos da psicosexualidade. Neste artigo, fundamentado sob o viés da psicanálise, procuramos examinar a estreita relação entre autodestruição e satisfação libidinal nos fenômenos próprios do quadro em questão.

**Palavras-chave:** adicção sexual, masoquismo, compulsão, libido, psicanálise.

## Plaisir et douleur dans l'addiction sexuelle: les vicissitudes du masochisme

**Résumé :** La dépendance sexuelle peut être définie comme une condition psychopathologique dans laquelle le sexe est cherché de façon incontrôlable, effrénée, malgré les préjudices émotionnels, sociaux et professionnels causés à la vie quotidienne de la dépendante. Après la frénésie, l'excitation et l'adrénaline ressenties en s'adonnant à ses propres impulsions urgentes et voraces, le *sex-addict* se sent incapable de gérer ses performances sexuelles, consumés par des sentiments de vide, d'échec et de désespoir. Le problème du plaisir sexuel « au-delà du principe du plaisir », combiné à celui de la douleur psychique, conduit à un questionnement plus rigoureux sur la dimension du masochisme dans la vie subjective et sa relation avec les états destructeurs de la psychosexualité. Dans cet article, basé sur la perspective de la psychanalyse, on cherche à examiner la relation étroite entre l'autodestruction et la satisfaction libidinale dans les phénomènes caractéristiques de la condition en question.

**Mots-clés:** dépendance sexuelle, masochisme, contrainte, libido, psychanalyse.

## El placer y el dolor en la adicción sexual: las vicisitudes del masoquismo

**Resumen:** La adicción sexual puede ser definida como un cuadro psicopatológico en el cual se busca el sexo de forma incontrolable, desenfadada, a pesar de los perjuicios emocionales, sociales y profesionales provocados en el cotidiano del adicto. Después del frenesí, de la excitación y de la adrenalina en ceder a los impulsos urgentes y voraces, el adicto sexual se percibe incapaz de gestionar sus actuaciones sexuales, siendo consumido por sentimientos de vacío, fracaso y desesperación. La problemática del placer sexual "más allá del principio de placer", combinada a la del dolor psíquico, nos conduce a una interrogación más rigurosa sobre la dimensión del masoquismo en la vida subjetiva y su relación con los estados destructivos de la psicosexualidad. Fundamentado en el sesgo del psicoanálisis, en este artículo nos proponemos analizar la estrecha relación entre la autodestrucción y la satisfacción libidinal en los fenómenos propios del cuadro en cuestión.

**Palabras clave:** adicción sexual, masoquismo, compulsión, libido, psicoanálisis.

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