

## Historical Article

# Freud's friend Fliess

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### Abstract

Fliess, an ENT surgeon, was Freud's closest friend and confidant. They both believed that sexual problems were the chief cause of neurosis. Fliess postulated that reflex nasal neurosis was based on the important physiological connection between the nose and the genitals. He described specific genital spots located on the nasal inferior turbinate. Fliess' second preoccupation was with vital periodicities. He believed that the symptoms of his reflex nasal neurosis followed regular 28-day cycles as does menstruation. He further proposed a male 23-day menstrual cycle, that he centred specifically on the nasal turbinate. Clearly, Fliess' fanciful theories of neurosis based on the turbinates have never held any scientific validity and are presented for their curiosity. This eccentric rhinolaryngologist, however, exerted a profound influence on Freud's conception of human development, that is often undervalued.

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### Freud's alter ego

In 1887, Sigmund Freud met Wilhelm Fliess, an Ear Nose and Throat surgeon from Berlin who was visiting Vienna for postgraduate studies. From that day onwards they became close friends, and between the years of 1894 and 1900 Fliess was possibly the only person with whom Freud could share and discuss his new insights into the origins of mental illness. Fliess shared many of Freud's views on the importance of sexuality; for example both men believed that practices such as masturbation, coitus interruptus and the use of a condom were the principal causes of neurosis. The two friends differed, however, on a very fundamental point that was eventually to drive them apart. As Freud's interest in neurosis developed, he became increasingly convinced that the causes were principally psychological. Fliess, on the other hand, was fundamentally a surgeon and was only interested in physical causes. This fact only became clear to Freud many years later. Nevertheless, their initial collaboration and communication exerted an influence upon Freud's theories that is often undervalued and misunderstood.<sup>1</sup>

During the 1890s Fliess was gathering a massive body of (what he considered) scientific research, in an effort to provide evidence for three unusual ideas. The first of these was a new and rather complicated concept that Fliess believed to be a 'reflex neurosis'

emanating from the nose. Fliess postulated a special physiological connection between the nose and the genitalia, an association he centred on certain 'genital spots' located on the nasal turbinate.<sup>2</sup> Both men believed that sexual perversions, in particular masturbation, played a key role in the causation of neurotic illnesses. They also believed that displacements occurred in such illnesses.<sup>1</sup> Freud had coined the term displacement with respect to psychological illness. He believed that by shifting one's concern from the real problem, one could siphon off any anxiety by obliterating any connection with the true source of one's worries. Thus Freud believed in a psychological basis for displacement. Fliess, on the other hand, believed that the displacement was a result of the conflict shifting anatomically from the genitals to the nose. He further suggested that the only way to deal with such a problem then was to intervene physically by operating on the nose. Fliess asserted that the actual genital spots on the turbinate bone could be treated surgically: mild cases could be cocaineized, intermediate cases cauterized with hot wires and serious masturbators, who had developed hypertrophic rhinitis, were treated with a turbinectomy.<sup>1</sup> He believed so strongly in the naso-genital link that he also held that these methods would also ease a number of gynaecological disorders including the pain of labour! It has been suggested, however, that the systemic absorption of the cocaine alone

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would be capable of alleviating labour pain rather than any direct effect of the cocaine on the genital spots.<sup>3</sup>

Fliess' evidence for this nasal-genital connection was based on a number of factors. He had observed visible swelling of the turbinate bone during menstruation; the occurrence of nose bleeding was more prevalent during pregnancy and menstruation, and the fact that applying cocaine to the nose was capable of inducing abortions.<sup>4</sup> He further believed that the primary symptoms of the nasal reflex were dysmenorrhoea, painful childbirth and stomach disorders. Perhaps Fliess' unorthodox concepts encouraged Freud to believe they contained an unrecognized truth. Freud was so impressed with his friend's bizarre idea that he wrote in one of his letters, 'Imagine if one were a physician trained like you able to investigate the genitals and the nose simultaneously: the riddle of neurosis should be immediately solved!'<sup>1</sup>

Freud was so convinced by his friend's theories that he referred Emma Eckstein, his somewhat celebrated 'first analytic' patient, to Berlin to see Fliess. Poor Emma's exact complaints are not clearly recorded, although it has been suggested that she suffered from menstrual problems. In Freud's copy of Fliess's book, *The Causal Connection between the Nose and the Sexual Organs*,<sup>4</sup> there is a marked passage that reads, 'Women who masturbate are generally dysmenorrhoeal. They can finally be cured by an operation on the nose, if they truly give up this bad practice'. It is thought that Freud marked this passage because he believed it described Emma, who was apparently very much concerned with the dangers of masturbation. Fliess believed an operation on Emma's nose was the only way of curing her and on the 21st February 1895 he spotted a suspicious area and performed a turbinectomy.<sup>1</sup>

In the ensuing weeks Emma returned to Vienna but suffered a series of massive epistaxes. Eventually when these haemorrhages did not abate, Freud called in a Viennese nose and throat surgeon to examine her. To his amazement the rhinologist removed over half a metre of gauze from her nose, which had been left in the cavity by Fliess two weeks earlier! The removal of this packing almost caused poor Emma to exsanguinate, and Freud fainted, needing to be revived by a glass of brandy. If this were not enough, she then went on to develop osteomyelitis of her right maxilla, which led to gross facial mutilation.<sup>1</sup>

Both Freud and Fliess reacted to these terrible post-operative sequelae in different but surprising ways. Freud did not blame his friend Fliess for Emma's suffering. His eventual conclusion was that Emma had always 'been a bleeder' and that her haemorrhages were hysterical in nature, probably the result of her sexual longing. Neither did Fliess himself take any responsibility for the fact that Emma Eckstein was now permanently disfigured. According to him, this totally abnormal response to a surgical procedure was not, of course, a result of his own incompetence but to her biorhythmicity.

### Biorhythmicity and bisexuality

This brings us to Fliess' second major preoccupation – that regular vital periodicities are manifest in all physiological processes. In a public paper called *The Relations Between the Nose and the Female Sexual Organs*,<sup>5</sup> Fliess attempted to show that the symptoms of his nasal reflex neurosis, as well as attacks of migraine, nasal bleeding and indeed all other symptoms of dysmenorrhoea follow a regular 28-day cycle, like menstruation itself. Furthermore, Fliess not only postulated a 28-day female cycle, but went on to propose that a second 23-day male cycle also existed. He considered that this 23-day cycle was the male equivalent of the female period and moreover that just as the female cycle was dependent on the ovaries, the male cycle was centred specifically in the nasal turbinate bone.<sup>5</sup> He claimed both periods were present in both sexes and it was this last chain that formed the foundations of Fliess' third crucial scientific insight – the essential bisexuality of all human beings.<sup>6</sup> It is interesting to note that Fliess himself was rumoured as being homosexual, and Freud admitted to being attracted to him.<sup>7</sup>

By 1906, Fliess had published his major work<sup>8</sup> encompassing all these three themes, sex and the nose, periodicity and bisexuality; he had managed to confirm his theories (to his own satisfaction) by the extensive use of mathematical formulae. He utilized complicated higher multiples mainly employing the number 28 for the female period and 23 for the male. Using his calculations he believed he could predict the length of someone's life, the interval between a woman's childbirth and the onset and duration of major episodes of disease and even the date of someone's death.<sup>6</sup> However, he did not use only the numbers themselves, but their sum (51), and their difference (5). He also considered related numbers such as 23 squared, 28 squared, and so forth. In Switzerland in the 1960s a modification of this system of biorhythms proved to be a popular notion. However, in the modern Swiss system there are three major cycles, in addition to the 28 day 'physical' cycle, and the 23 day 'emotional' one, they added a third 33 day 'intellectual' cycle (33 being 28+5; 23 remember is 28-5)!<sup>9</sup>

### Support from America

Surprising as it may seem, Fliess was not alone in suspecting a physiological connection between the nose and the female sexual organs. Many rhinologists, around the turn of the century, in particular John Nolan Mackenzie, a laryngologist from Johns Hopkins Hospital, Baltimore had also claimed medical evidence for a nasogenital link.<sup>10</sup> His theory was essentially similar to the one presented independently by Fliess.<sup>6</sup>

Mackenzie presented his discoveries under six major headings:

- 1) Nasal tissue does indeed appear to swell on a regular basis during menstruation.
- 2) Nasal bleeding is found not only in pregnancy and menstruation but also in male puberty.

- 3) The turbinate of the nose is a structure that is the anatomical analogue of the erectile tissue of the penis.
- 4) The association of the nasal tissue with the genitalia explains why some individuals experience nasal disturbances (nose bleeding, sneezing and simple occlusion) during moments of sexual excitation.
- 5) There is a reciprocal association in which genito-urinary problems are associated with 'affections of the nasal passages'. Mackenzie unfortunately could find 'no authentic cases in literature in support of this latter hypothesis'.
- 6) The evolutionary link between olfaction and sexual excitation in lower animals also exists in humans.

### Sea squirts

A similar evolutionary hypothesis had been put forward some 20 years earlier by the biologist and ardent Darwinian, Ernst Haeckel. He had posited a theory of 'erotic chemotropism' in which chemically-based sex stimulants affecting taste and smell were phylogenetically the primal source of all sexual attraction in nature.<sup>11</sup> It is interesting that Freud was clearly aware of this evolutionary context from which Fliess' theory had developed: in Freud's copy of Haeckel's book, the primal smell theory of sex had been especially marked in the margin.<sup>6</sup> Even as late as 1914, almost 20 years after the formulation of Fliess' theories, they were still being discussed. One particular experiment provoking much debate involved rabbits that had their turbinate bone removed. It was claimed that as consequence of the operation the rabbits failed to generate their genital organs.<sup>12</sup>

Fliess' other theory of vital periodicities was also popular in the 1900s.<sup>6</sup> In the mid-1860s Russian's leading embryologist, Alexander Kovalesky, had discovered an ascidian (or sea squirt), that possessed a rudimentary notochord and was thus proposed as being related to the most primitive form of all true vertebrates.<sup>13</sup> These ascidians followed lunar and tidal rhythms, and passed through a complete cycle of tidal changes in a fortnight.<sup>13</sup> Charles Darwin and Ernst Haeckel seized upon Kovalesky's discoveries as corroboration of their evolutionary theories, and the ascidian rhythmicity together with their purported evolutionary relation to human mammals provided support for Fliess' vital periodicity theory. Since he believed that two sexual periods were present throughout life (and certainly from birth), it necessarily follows that vital periodicity implies the existence of infantile sexuality. Fliess boldly asserted that childhood epistaxes were an expression of this sexual 'thrusting' (he also maintained these nose bleeds rigidly followed periodic (28- or 23-day) cycles.<sup>5</sup>

These remarkable sea squirts were also the subject of another much discussed evolutionary problem, which was also Fliess' third major scientific interest, bisexuality in man. The ascidian was a hermaphrodite. This notion of bisexuality had already begun to

attract considerable discussion from various physicians of the time.<sup>6</sup> One such man was Richard von Kraft-Ebbing who presented the case of a history of a woman who underwent a spontaneous sexual transformation at the age of 30. It was recorded that in June 1891 this female suddenly grew a full beard, developed hair on her chest, and experienced a drastic voice change from that of a 'soprano' to a 'lieutenant.'<sup>14</sup>

### Conclusion

Considering that Fliess believed that man was descended from a bisexual, lunar tidal-dependent, tidal organism, whose libido was originally triggered by chemotropisms, it is far easier to understand why and how his three ideas developed.

Whatever the context of his theories, they managed to exert an influence on Freud that was unparalleled. The notion of bisexuality was inherent in Freud's psychoanalytic conception of human development. Furthermore, Freud owes a debt to Fliess for his views on spontaneous infantile sexuality, which Freud later embraced and indeed was crucial in his own formation of the id.<sup>6</sup>

The scientific relevance of Fliess' now defunct nasal theories is no less important today than it was when he and Mackenzie began to publicise the physiological relation between the nose and the genitals in the 1880s and 1890s.<sup>6</sup> Some rhinologists still believe that nasal tissue is sensitive to hormonal influence and responds to sexual stimulus. It is only Fliess' more ambitious and peculiar theory of 'nasal reflex neurosis', in particular the tidal rhythm of a male period centred on the turbinate bone, together with his method of therapeutic treatment that has eventually proved ephemeral. As for poor old Emma Eckstein who experienced the tragic reality of Fliess' faith in hot wires and genital spots, sadly, history does not record whether or not it stopped her masturbating.

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