

Masud and Mr. Khan

by

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“Character is fate”- Heraclitus

Abstract

Masud Khan (1924-1989)-- high-born, brilliant, beautiful, beloved— “had it all” and threw it away. Drawing from Khan’s unpublished diaries and from Hopkins’ (2006) definitive biography, I shall chronicle Khan’s addiction to alcohol, which from mid-life increasingly structured his existence and eventually destroyed him. Stevenson’s *Dr. Jekyll and Mr Hyde*, offers an archetypal story of multiple selves in conflict with parallels to Khan’s life and the lives of addicts in general. Addiction-- setting the stage for psychoanalysis, turning ordinary lives into tragedies, ordinary human suffering into pathologic suffering-- is, in many regards, the neurosis of our age.

Introduction

How is it that people’s lives so often take the shapes of classic tales? Does the biology of mankind allow for just so many paths of being? Have *Homo sapiens*, like *Hymenoptera*, evolved as an extended social mechanism composed of just so many canonical parts, a biological clockwork of these and only these cogs of character? Is life, then, like a game of chess, with these pieces and these moves only, relentlessly unfolding into history? Are the classic tales-- the Hamlets, Fausts and Orestias— like chess problems, like theorems of the human game? In the tangles that their characters weave, do we witness the limits of our own freedom and fate? Freud’s insistence on the universality of the Oedipal complex certainly illustrates such a belief.

After more than 30 years of literary study, Christopher Booker concluded that all of Western storytelling-- every fable, movie, soap opera and all the rest-- can be sorted into only seven basic plots¹. Others have lumped them even more coarsely: “man-against-nature,” giving rise to the hero-tales, and “man-against-himself,” yielding the others. One noted American author² condensed them even further: for him, everything was just “man-against.” Aristotle’s analysis of poetics in general and drama in particular presents a wonderfully succinct anatomy of narrative, along with the aesthetic factors that render stories more or less satisfying to an audience— aspects of plot, character, diction, setting, and so on³.

¹ Booker, 2004.

² [[was it Miller/Mailer/Hemingway?]]

³ Aristotle, *Poetics*.

My own sense is that narratives appeal to us because we see ourselves in them. From the profusion of stories that our imagination brings forth, cultural selection favors the few that epitomize the struggles of us all. Time winnows away the extraneous and the inapt, and the classic tales remain because they evince the deepest kernels of truth, the most fitting caricatures of us all. Perhaps not every life must take an Oedipal course; but perhaps it seemed so to Freud because his own had the makings of that story and therefore felt inevitably steered by that dynamic. Had he had a proper analysis, perhaps he could have seen beyond the blinders of himself, and the whole history of psychoanalysis might have taken a very different course—or never come into existence at all.

My own sense, too, is that we are all, like Freud, too much in-and-of these processes to be able to observe them with anything like objectivity. For that we need one another, and we need the life-maps that literature and history provide for us. I raise these issues because the story that I am here to discuss concerns a man who consciously identified himself with one literary archetype (Shakespeare's King Lear) while living-out the story of another. He was a grand man with an epic-proportioned life, whose tragic mistakes led to his own downfall as inexorably as those of Oedipus or Macbeth. His story illuminates particularly well how addiction introduces the elements of tragedy into a life: how it divides the soul against itself, how an ill-chosen solution to problems becomes a diabolical force that can overwhelm even an extraordinary human life and force it to a banal and tragic denouement.

Sketch of Khan's Life

In response to my request for a "micro-life" of Khan, his latest biographer, Linda Hopkins, provided me with the following four paragraphs.

Mohammed Masud Raza Khan was born in 1924 in the Punjab area of pre-partition British India, now Pakistan. It was a wealthy military family, and he was the second of three children born to his Muslim father's fourth wife. Although he had an older brother and seven older half-brothers, he was sole heir to his father's estate, which he managed throughout his years of living in London. In British India, Khan received an MA in Literature at the University of the Punjab in Lahore, where he wrote a dissertation on James Joyce. He came to London in 1946 for the purpose of getting a doctoral degree in Literature at Oxford, but he also wanted and needed a personal analysis. John Bowlby misinterpreted his letter inquiring about how to arrange a personal analysis with Edward Glover and thought he was applying for training. Since Glover was no longer a member of the British Society, Bowlby referred him to Ella Sharpe after accepting

him into the training program.

Khan's emigration to the West occurred one year prior to the violent partition of India into the primarily Hindu nation of India and Muslim Pakistan, and he stayed in London until his death in 1989. He started his analytic training at the very young age of 22, he qualified as an associate member in 1950, at age 26, as a child analyst two years later, and as a training and supervising analyst in 1959, at age 35. Khan's first two analysts, Ella Freeman Sharpe and John Rickman, both died of heart attacks while he was in treatment.

(1946-1947) and (1947-1951). Khan then went for analysis to D.W. Winnicott, who also had heart problems, but this time the analysis lasted 15 years (1951-1966). Khan had the time and the money to get the very best of training: his supervisors included Clifford Scott, Marion Milner, Melanie Klein, Anna Freud and Winnicott (for child analysis). He ended his analysis with Winnicott in 1966, but the two men continued an editorial collaboration all the way up to Winnicott's death in 1971. In 1959, Khan married Svetlana Beriosova, a leading ballerina with the Royal Ballet, who introduced him to a social world of the best artists of that era, a world Khan loved. (In the 60s, he was a close friend of Julie Andrews, Mike Nichols, Michael Redgrave and Rudolf Nureyev.) Beriosova and Khan divorced without children in 1974, and neither would re-marry.

Khan's health and life circumstances deteriorated rapidly after Winnicott's death in 1971 and after his divorce. In 1976 he was diagnosed with terminal lung cancer, with a prognosis for survival of 3-6 months. Surprisingly, he lived for 13 more years, despite a recurrence of the cancer, and the eventual cause of his death would be related to alcoholism, not cancer. .. Khans' career is marred by a late history of misbehavior that involved socialization with analysts, including sexual relationships, and anti-Semitism. In the 70s, he lost his status of training analyst and then, just prior to his death, he was expelled from the British Society.

Aside from his dramatic life, Khan made major contributions to psychoanalysis, even though he is often not given credit for his contributions. For those unfamiliar with psychoanalytic history: Donald Woods Winnicott (1896-1971) was one of the greatest of the British analysts in the Independent tradition (i.e., not primarily a follower of Melanie Klein or Anna Freud, group that works with severe pathology and looks to maternal contribution to pathology). He is the thinker behind many ideas you take for granted, including transitional objects, good enough mother and discussed here, True Self/False Self. Masud Khan was Winnicott's chief disciple. Despite his problems, he is remembered as the man who best understood Winnicott, as editor of Winnicott's papers, and as the author of some of the most interesting and clear clinical papers ever written showing how Winnicott's ideas can be applied to analytic work with adults. His writing is of such

high quality that some people believe he is is the best analytic writer ever, a man who “wrote like an angel.”⁴

Khan's Story of Addiction

Most clinicians are familiar with the stigmata of addiction: a background of *family history*, an early phase of *initiation*, progression to *dependency*, lengthy periods of *struggle* and *deterioration*. Recovery is the exception, most cases ending in jails, institutions and death. Through this clinical lens, Khan's story takes on a less romantic, woefully familiar cast.

-Family history: Despite the Islamic interdiction against substance abuse, I have met many an alcoholic and drug addict of Muslim extraction. Khan's own mother was addicted to opium, and upon his father's death he inherited responsibility for maintaining her supply of drugs⁵. Regardless of one's drug-of-choice, addiction is a heavily heritable tendency, which finds its expression through the opportunities that character and culture provide. Khan's father was literally a feudal lord, who commanded multiple estates and thousands of peasants. He made his own laws and broke whichever ones he chose. Khan idolized his father as much as he feared him and longed for his approval. At age 19, the youngest of several sons, Khan was singled out to inherit his father's realm, even though tradition would have bestowed it upon an elder brother. It is not hard to imagine how all of this drama might have helped to shape Khan's shaky identity, his simultaneous imperiousness and feelings of imposture (a complex highly prevalent among alcoholics, and referred-to among those in recovery as “King Baby”). In England, Khan transferred his expectations of special treatment to his relations with the institutions and authorities of his new land, where he still sometimes referred to himself hyperbolically as “Prince.” He was arrogant, secretive and deceitful throughout his life. He behaved as though he made his own rules, and drank to hide from the results. When forced to face the consequences, rather than grow up he wallowed in self-pity and justification. He was brilliant, but arrogant and childish in the extreme: “King Baby” deluxe.

-Initiation: How and when Masud started drinking is unclear to me. Social drinking was very much a part of adult life in Europe, especially within the sophisticated, artistic crowds to whom he gravitated. Alcohol was a part of his life long before it became an obvious problem. For better *and* worse, Masud's course of addiction involved a fairly long incubation period—“for better” because it allowed him to accomplish much that he aspired to, leaving us so much the richer ; “for worse” because addiction and its defenses gradually tangled themselves so tightly into the fabric of his life, that he was never able to pull himself free.

⁴ Hopkins, personal communication, 8/10/08

⁵ Hopkins, *False Self*, p6.

In dramaturgical hindsight, Khan's relationship with Svetlana marks the season of change in the course of his addiction. He entered that relationship deploring her drinking; he left it drinking deplorably himself. As in a tragic drama, their relationship represents his "showdown with fate." Confronted with his own weakness, he might have seen himself in her, possibly gotten help for her before it was too late, and definitely sought help for himself. Perhaps he could have humbled himself enough to really get honest with Winnicott or someone else? Instead the couple propped each other up in mutual denial until it was too late. The alcoholism that he and she supported in each other eventually killed their relationship. There was not enough of Svetlana left to have a relationship with; and Masud's own soul was sufficiently eroded that he could not make use of the lesson that her demise offered him.

Arrogance- literally, not asking for help- forms the catalyst for many downfalls in addiction. Masud continued to use alcohol for its effects. He claimed that it helped him to think clearly, to write, to socialize, to enjoy other people as well as himself..."only in alcoholised states can I tolerate the otherness of others cluttering my space. Dry, I am very severely private with my person, space and time."⁶ Dry, he was also helplessly out of balance, and plagued by nameless terrors. That is to say, he suffered serious symptoms of alcohol withdrawal, which he refused to recognize for what they were and instead confronted as mysterious ailments requiring treatment with more booze. When he could string together a few days dry, he typically would report to his diary feeling reborn to clarity and balance. His descriptions of the medicinal properties of alcohol are the most numerous and varied that I have ever encountered. They represent his tangled rationale for continuing to drink long past the expiration of any choice that he truly had in the matter.

-Dependency Khan continued to drink (and smoke) despite the most convincingly adverse effects of both habits on his health, his social life and his own mind. In the most dramatic way possible his demise illustrates how addiction replaces relationships. With the incomplete exception of Svetlana, he never allowed himself an intimate partnership with another human being. "Incomplete" because, even their intimacy was mediated (and ultimately destroyed) by alcohol. "No one ever knew me," he tells his diary. The diary overflows with fitful pledges and failures to stay "dry." In June, 1975, coming out of a binge, he is baffled: "How I have traumatised my body this weekend. A bizarre malice towards the Self in this. Strange how little one was taught to love oneself." Yet through that summer and throughout the fall and winter that followed he alternately binged and pledged to give up drinking for good. "Alcohol has collapsed my hands and I feel ill today. Must stop boozing!"⁷ A harrowing, soul-sickening account.

-Deterioration: Along with such futile efforts to control his drinking, Khan noted that alcohol's effects on him had lost predictability. "Alcohol poisons me instantly now and that changes my whole personality and

⁶ Khan, *Workbook (WB)*, 1 November 1975.

⁷ *WB* 15 June 1975.

leads me to absurd excesses and dangerous antics”⁸. He experienced “terror relieved only by alcohol” and thus justified continuing to drink. “I am drinking again. That can’t be helped”⁹. Yet even he noted that his personality changed when he drank. He could not sleep or eat. He became paranoid, aggressive, grandiose, self-destructive. He rationalized drinking as a result of “acute phobic dread,” “I cannot tolerate intimacy”¹⁰ etc. He rationalized the most humiliating incidents as unconscious, neurotic expressions, completely overlooking the fact that they almost certainly never would have happened had he not been drinking at the time. (It is a commonplace among alcoholics and addicts that, “I didn’t get into trouble every time I was high, but I was high every time I got into trouble.”)

Khan’s denial, minimization and rationalization outstripped his appreciation of the grim reality time and time again. Instead of hangovers and complications of alcoholism, he reported innumerable “mystery ailments.” “This feels like flu to me more than appendicitis,” he told his diary, adding that even his doctor “is not sure.” Later he reported that his doctor attributed his illness to “the one bout of drinking,” when it was surely clear to them both that he had been killing himself for years with alcohol. About his ability to control his decline, Khan lied even to himself, writing in his diary, “Kicked the bottle alright” one week, then losing himself in a binge the next. He blamed a drinking bout on the porter in his building, who he believed was plotting against him. He assured himself that he needed alcohol to counterbalance other tendencies in his character. He bought liquor planning not to use it, to prove that he had power over drinking. “That is choice and refusal.” Of course, he downed it all. Even to his diary he confided inconsistent accounts of when he was and wasn’t dry¹¹.

As he progressed into alcoholism, Khan increasingly put drinking before other vital activities. By Christmas, 1975, he avoided a trip to Paris on this account, and got drunk at home and later humiliated himself at a friend’s party instead. In 1977 he avoided a trip to South America on similar grounds. Like the prudent alcoholic who, knowing he can’t safely drink and drive, gives the car away, Khan feared his own behavior around others when drunk, so he preserved his dignity by refusing company, even while suffering a crushing loneliness. “Alone,” he wrote, “lives are merely existences sustained by artifices. The human individual needs the others...”¹² In December of 1975, Khan wrote: “Drunk myself to a phobic cypher.”...“I who know others so well, know myself so very little.” “But about one thing I am severely determined. From today no alcohol.”¹³ The next day goes to a party, “already fairly poisoned by alcohol.” One day later, “Yes, from today I stop this alcoholic carnage!” In his diaries we see through the next few months a pathetic criss-cross of resolutions and failures, laced with rationalizations and lies. Three years later, in a nursing home, he noted to himself, “the grouse [i.e., whiskey] has landed me here to dry myself out...Now I really shan’t drink. “ A year and a half later, complications of alcoholism finally killed him.

⁸ *WB* 28 December 1975.

⁹ Hopkins p254.

¹⁰ *loc cit*

¹¹ e.g., *WB*, Oct-Dec, 1975.

¹² *WB* July, 1975

Story of Dr. Jekyll and Mr. Hyde

At least consciously, Robert Louis Stevenson's little classic of 1886 was not meant to be about addiction. It was a potboiler quickly composed on a theme much in vogue at the time: polypsychism, the multiplicity of the self. Still, the story from first to last is the quintessential fable of addiction. It shows us something of how a drama of multiple selves can play itself out in cases of addiction, and how addiction can be seen as the neurosis of our time.¹⁴ Just as Freud showed us, in hysteria, a yearning and terror over the sexual connection, Stevenson shows us how addicts suffer conflicts over a more broadly spiritual connection. Their failure to join with others corresponds with a failure to find peace among the selves within them. The external "solutions" with which they try to replace relatedness, turn on them and ultimately destroy them.

Many readers have seen films based upon this story. Somewhat fewer, probably, have read the original text. I would wager, though, that nearly all could tell some version of the story. We no longer have to have heard, read or watched the tale itself in order truly to *know* something of its message. It has risen from the hurly-burly of popular literature to take a place in the canon of archetypal tales. We all feel something of ourselves in it. Something about it rings our universal chimes.

Fittingly, Stevenson tells his story of multiple identities from multiple points of view. In his dying testimony, Jekyll scrawls his own version. He had been born into a large fortune, was intellectually gifted, industrious and well-liked by those who helped him to advance in the medical world. His own nature troubled him. He had "impatient gaiety" that might have made many happy, but which he found "hard to reconcile with my imperious desire to carry my head high and wear a more than commonly grave countenance before the public."¹⁵ "Hence it came about that I concealed my pleasures...and hid them with an almost morbid sense of shame."¹⁶ By the time he came of age, "I stood already committed to a profound duplicity of life."¹⁷ Like many a philosopher and psychoanalytic theorist, (like Narcissus himself), he found fascination with these aspects of his nature reflected in the world of human beings in general. His theories converged on the idea "that man is not truly one, but truly two. I say two because the state of my own knowledge does not pass beyond that point. Others will follow, others will outstrip me on the same lines; and I hazard the guess that man will be ultimately known for a mere polity of multifarious, incongruous and independent denizens."¹⁸ In himself he felt the "polar twins" the "moral" and the "evil"

¹³ *WB*, 25 December, 1975.

¹⁴ See also, Mann, (2002).

¹⁵ *loc cit*

¹⁶ *loc cit*

¹⁷ *loc cit*

¹⁸ p79

sides of himself “in the agonized womb of consciousness,” “continuously struggling”¹⁹. He dreamed of liberating them- what early Freudians might have called Id from Ego and Ego from Id. His researches into the material basis of existence led him to develop a drug that “dethroned” the moral aspect of himself and allowed expression of the “lower elements in my soul.”²⁰“Elated, freed, utterly selfish and able to live in the moment”²¹, he stormed into the world “conniving” “infamy.” .Manic denial, some would call this state. For awhile he was able to move in and out of these states at will, but soon he began to lose control. Various of his misdeeds as Hyde tortured his memory when he was Jekyll again. The compartmentalization was incomplete. He could not shake the feeling that he must relinquish Hyde,. “I chose the better part,” he says, was able to spend two months dry as Jekyll, but “began to be tortured with the throes and longings” to be Hyde again. He set up his former colleague Dr. Lanyon to help him in case of temptation. It was during the seemingly inevitable relapse that Hyde murdered a man in a fit of rage. He tried to keep the binge going, ransacking London for the last remaining constituents of his Hyde-keeping potion. When he could find no more he went to Lanyon for the last Jekyll-restoring quaff. Home again, in the dying light of reason, he told his story truly for the first and only time.

Summary: Here is the story of a man who was born to great fortune and privilege, rose to professional heights under the tutelage and protection of well-placed allies. He was intimately close to no one. His private sense of himself was of one deeply divided between his “truer,” animal nature and his “false” public self. Public pride and private shame kept him from sharing all of himself with anyone, eventually leading him to devise a substance that permitted him to express these parts of himself by sequestering them but not integrating them. Unable to contain them within a single personality, and increasingly dependent upon the substance that mediated between them, he lost control and met his own destruction. He asked for help only in parts, never trusting a single person with the whole burden of himself. When he finally tried, it was too late; recovery was beyond reach. He sought liberation and found enslavement. Striving for freedom, he lost control and destroyed himself. This is a story with much correspondence to the typical story of addiction. It has those features and more in common with the story of Masud Khan. It is also the story of every tragic tale, in which conflicts across deep divisions in a person’s character, unless integrated, terrorize their existence and ultimately kill them.

¹⁹ p80

²⁰ p81

Impact of Addiction on Khan's Work and Life

Whether Khan himself ever identified explicitly with Stevenson's split and tortured protagonist, ever commented on the tale, or ever even read it, I do not know. His own primary literary identification was with Shakespeare's *King Lear*—a fixation that time will not permit me to explore here today. It is clear, though, that the notion of a divided self figured prominently in Khan's thinking, both personal and public, in his diaries and clinical work, in his own publications, and of course in his well-known renderings of Winnicott's ideas. It is also clear that the dynamics of Khan's addiction transformed his life course into a path resembling that of Jekyll-Hyde's.

Like Freud with his Oedipal fixation and Mosaic ambitions, like Jung with his own version of multiple unintegrated selves, Khan's theories reflect a fascination with what really amounted to his own stumbling-blocks—*integrity of the self*, *intimacy* with others, and the emergence of a True Self into the society of its kind. Khan wrote and spoke tirelessly on these processes, but he himself never accomplished them. "Happiness is the capacity to be able to share oneself with oneself and with others," he wrote²² -- and in the same notebook confessed repeatedly that neither he nor anyone else had ever known *him* truly. Even what he could see of himself relatively clearly, he held closely and refused to share. The honesty and humility necessary to living as a true self eluded him; and so, therefore, did intimacy.

Like Jekyll-Hyde, Khan had a theory of multiple selves that he tried to put into practice. Linda Hopkins summarizes, "Khan the analyst was primarily motivated by an attempt to help his analysands to become aware of their various selves and to establish a dialogue with those selves—not, as in more conservative analysis, to resolve conflict and to strengthen the ego."²³ Within himself, though, Khan was thoroughly perplexed—particularly about his powerlessness over alcohol. Rather than acknowledge this and ask for help, he went the way of many an intellectually gifted alcoholic-- endlessly theorizing about his drinking, rationalizing it, bottle in hand. Like Dr. Jekyll, he kept a diary of his exploits. "In certain company one has to drink!" he wrote. Or, after a brief abstinence, "Am drinking again. That, too can't be helped. So much confused ungraspable stress. " He mistook drinking for the cure to his malaise, when by that time it was surely the principle cause. Four years later, still abusing alcohol, he noted an "epiphanic insight about my heavy drinking. It started when I began to dismay about Svetlana...I lost the capacity to feel deeply for anyone. This void of affectivity in myself I have screened with the haze of alcohol."²⁴ He failed to see that it was while drinking with Svetlana that they both lost their ability to feel anything or care about anyone *because* of their chronic intoxication and erosive dependency upon alcohol in place of other human beings.

²¹ p102

²² *WB*, 24 March 1972.

²³ Hopkins, p73.

²⁴ *WB* June, 1976.

Khan's theories about drinking were not always wrong.: "You need to tolerate pain, not get rid off it," he noted to himself²⁵ He felt that he was "truest" when he was able to present a paper successfully, and saw that he was able to do this "largely due to the fact that I was alone and DRY and hugely facilitated by the endorsing and containing presence of my friends..."²⁶ So, he could see and say that alcohol was his nemesis, and friends his potential saviors; but he lacked the humility and willingness to put this knowledge into action. In addition, as elsewhere in psychoanalysis., understanding is overrated.

The "false self" that Khan habitually presented to the world, whether drunk or sober, was a brilliant mess. He fit to a T the psychological profile of an alcoholic proposed in the literature of Alcoholics Anonymous, "childish, emotionally sensitive and grandiose."²⁷ He threw tantrums, stole, even assaulted people; wove elaborate lies about himself, calling these "truths" more important than the truths of others. He crossed boundaries and broke rules of every kind as if with impunity. He crowed vainly of being "the most creative and powerful mind in psychoanalysis." His grandiosity compensated for feelings of imposture. Despite his brilliance and industry, he felt chronically as if he must prove himself. No amount of outward accomplishment could convince him of his own gifts. Perhaps the imposture of his inheritance weighed on him unconsciously? But psychoanalytic explanations, like Khan's own, are easily made but impossible to prove. In the halls of AA, "egomania with an inferiority complex" is among the commonest self-diagnosed complaints.

About his own divided self, Khan explained to his diary, "...my circumstances of nurture as a child and later my life in London, Europe and America, compelled me to fabricate a phenomenon called Khan who has very little to do with the private, true me, Masud"²⁸ Compelled? Did he really have no choice? Perhaps he *made* no other choice, and, by the time he might have done so, in response to his own or other people's urgings, his well-established addictions had overcome all agency in the matter.

Khan seemed at times to abjure addiction as merely a ploy of his False Self. One schooled in addictions might see the matter differently. No matter how many selves may share it, they have only one body, and that body cannot be only partly addicted. Like Jekyll and Hyde, Khan depended on a substance rather than other human beings. The substance did not integrate, but isolated the parts., holding each at bay while the other pursued its extremes. Khan 's reliance on alcohol began as an immature defense, which (like Hyde) then developed a life of its own, overdriving his own tendencies towards excesses in all spheres. Khan, like Jekyll, sought liberation but found enslavement. He tried to isolate his part-selves so as to give each its freedom, but he foundered on the fact that there is only one physical person per soul-- hence the need for mature personalities to cultivate responsibility in equal measure to the freedoms that we enjoy.

In his diary, Khan wrote, "Some lives are transitional and fail to actualise [sic] fully. Mine could easily be one such"²⁹ Alcoholics and addicts in recovery often speak of the emotional cocoon they entered

²⁵ WB September, 1976

²⁶ WB July, 1975.

²⁷ *12 and 12*, p123.

²⁸ WB 19 March 1976.

²⁹ WB, 12 July 1975.

when they began relying on substances, only to resume years later when they emerge, awkward teens with graying hair. To the extent that addiction took the place of relatedness for Khan, he lost access to the vital catalyst to growth that only “life on life’s terms,” and real relationships with others can provide.

Khan’s theory of analytic process emphasized the need for a “regression to dependency.” In the conduct of his own life, however, for all the regression, Khan seems never to have achieved much human dependency. Even in his best efforts—with Winnicott and Svetlana-- he never relinquished the third-party mediation of alcohol. In the fourth step of AA, sober alcoholics acknowledge, “The primary fact that we fail to recognize is our total inability to form a true partnership with another human being.³⁰” Instead of “true partnerships,” Khan filled his history with the ruins of multiple immature and often inappropriate romantic entanglements. As one recovering alcoholic told me, “Relationships were like drinks: one was never enough, and the next one might just fill that hole.” From his more authentic dependency, upon alcohol, Khan never did progress. As one of his former lovers observed, “He died just as he had lived:-- alone, terrified, lonely and sad.”³¹

Christopher Booker has proposed that, in every tragic tale, the hero passes from a stage of “anticipation”, in which his hopes are turned towards some future gratification, into a “dream stage” in which, committed to a course of action, his dreams seem to unfold, on to a “frustration stage,” in which things begin to go wrong and he keeps digging himself deeper in, until the “nightmare stage” brings the threat of collapse, dead-ending with a stage of “destruction or death wish” when the forces he has set loose upon himself turn and destroy him.³² The stages of addiction run a remarkably similar course, transforming what might have been ordinary human suffering into drama and death, yielding a clinical panoply of patients that in many ways correspond to the neurotics of Freud’s day. For the fictional Jekyll-Hyde, and in his own way for the all-too flesh-and-blood Masud Khan, these stages plot the path along which character enacted fate. The character of the addict and the natural progression of his disease, once under way, distort the life of every alcoholic and addict into a tragedy so inexorable that the few who escape speak of their deliverance as a miracle.

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³⁰ AA, *12 & 12* p53.

³¹ Hopkins, p374.

³² Booker (2004) *passim*.

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