

Psychotherapy Guidebook

# MEDICAL ORGONOMY

Elsworth F. Baker

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# Medical Orgonomy

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## DEFINITION

Orgonomy is the science of the functional laws of cosmic orgone energy that comprises all natural phenomena, from living things to the universe itself. Medical Orgonomy is the part that deals with the functioning of man and the illnesses he suffers from.

## HISTORY

This science was developed by Wilhelm Reich, M.D., who was born in Galicia, a part of the Austro-Hungarian Empire, on March 24, 1897, and who died in 1957. Reich was Freud's most important pupil and, when he was still in his twenties, had already made many important discoveries in the understanding and treatment of the neuroses. He insisted that Medical Orgonomy was the logical extension of Freud's clinical findings. For a long time Reich considered this work to be within the realm of psychoanalysis even after Freud, who at first admired Reich's ability and fresh ideas, could follow him no further and became upset over some of his findings and theories. Reich's technique became more active than the usual Freudian

psychoanalysis, emphasizing and keeping in the forefront the negative transference and also describing the attitudes and expressions of the patient rather than using the typical analytic free association. He could thus mobilize more emotional response and produce faster cures. He called his technique Character Analysis, since he was analyzing character rather than dealing with symptoms.

Studying patients who were cured and those who were not successfully treated, he found consistently that those who recovered had developed a satisfactory sexual life while the failures remained unsatisfied sexually or quickly reverted to their previous unsatisfying sexual life. He postulated that to cure a patient, libido stasis must be overcome and further prevented by adequate sexual outlet. Reich therefore set about to ascertain just what was an adequate sexual outlet. He found that sexual activity in itself did not guarantee this but gratification in the sexual act did. Reich called the capacity for gratification "orgastic potency." Here the act ended with total convulsions of the body followed by complete relaxation and a tender, grateful attitude toward the partner. This meant that the libido must be more than a psychic concept, as Freud postulated; it must be a real energy. Reich called it "orgone energy," from organism. It is built up in the organism by the intake of food, fluid, and air and is also absorbed directly through the skin. It is discharged by activity, excretion, emotional expression, the process of thinking, and by conversion into body heat that radiates to the environment. Also it is used up

in growth. In the usual course of events, more energy is built up than is discharged. Thus, to maintain a stable energy level, excess energy must be discharged at more or less regular intervals. This is the function of the orgasmic convulsion. This must not be confused with what is popularly called “an orgasm,” meaning that the man has had an ejaculation and the woman a clitoral climax. These produce only incomplete satisfaction. Reich determined that a person who develops truly adequate sexual release cannot maintain a neurosis. Neuroses exist only on repressed excess energy or stasis. Reich thus developed a concept of health based on energy metabolism of charge and discharge which he called “sex economy.”

He noted, however, that in our society the child is not permitted to function naturally. Starting from birth, the environment that greets the newborn is mostly unfriendly; it is cold compared to the warm uterus. The baby is treated roughly, it is separated from the mother whom it continues to need for warmth and contact, placed on regimented feedings, subjected to early toilet training, and blocked from any sexual pleasure. The barrage of forbidden activities require the child to hold back his feelings and expressions, which is accomplished by holding his breath and tightening the muscles of his body until finally he goes through life with restricted breathing and a rigid body. Reich called this the “armor.” The permissive upbringing popular in the last decade or two amounts to parental abdication of any role in guiding or disciplining and produces intense anxiety in the child; it can

result in even more damage than when inhibition is inflicted.

The armor binds energy, removing it from normal functioning. It interferes with the free flow of energy through the organism and especially to the pelvis and genitals so that it cannot be discharged adequately, if at all, through sexual activity. This is the somatic side of repression. In this Reich disagreed with Freud. Reich felt that society was wrong in imposing these restrictions on the individual, believing him to be capable of self-regulation if allowed to grow up naturally, while Freud felt the restrictions were necessary to avoid a chaotic society. However, with such restrictions the individual becomes erectively impotent, premature, anesthetic, or otherwise lacking full sexual pleasure. Reich termed this “orgastic impotence” and found that the majority of both male and female individuals suffered from this condition. Energy, therefore, continues to build up, producing stasis and eventually overflows in the form of neurotic symptoms.

Reich began working on the muscular armor as well as on the character. He called this “character analytic vegetotherapy.” It was even more effective than character analysis alone. This technique produced many vegetative reactions in the organism, such as blanching of the skin, sweating, pallor, blushing, etc., manifestations of the vegetative nervous system that was being affected in therapy. Investigation led to his formulation of the basic antithesis of vegetative functioning. Excitation of the sympathetic nervous system



causes muscle contraction, felt as anxiety, while excitation of the parasympathetic nervous system produces expansion which is felt as pleasure. To overcome the contraction, which causes the armor, anxiety has to be faced and overcome.

As emotions eventually came to mean the manifestations of a tangible bio-energy and character as specific blockings of that flow of energy, Reich found that it was possible to change character directly by freeing bio-energy rather than indirectly through the use of psychological techniques. The latter was not ignored, but its importance depended on the particular case. He now called his technique “medical orgone therapy.”

Through reactions of the body during the process of dissolving the armor, Reich discovered that the body was functionally divided into seven muscular segments, each of which reacted as a unit and was to a certain degree independent of the other segments. The seven segments are the ocular, oral, cervical, thoracic, diaphragmatic, abdominal, and pelvic. They are usually freed in that order except that the chest is most often mobilized first so that it can be used to build up energy in the organism and provide additional inner push to help in both revealing and removing other blocks. Any one segment may fail to respond completely until further segments are freed.

## TECHNIQUE

The principle of therapy is quite simple, merely to remove the restrictions to the free flow of energy through the body and restore normal functioning. In other words, to remove the armor. In practice it may be extremely difficult and complex. There are three avenues of approach, the importance of each depending on the individual case, although all three are necessary tools in every case. They are:

1. Breathing, which builds up energy and exerts an inner push on the blocks. It may overcome lesser holding and does help reveal and overcome more severe blocking. The patient is asked to breathe fully without forcing and allow himself to develop a rhythm that soon becomes easier and freer.
2. Directly attacking the spastic muscles to free the contraction. The contraction of the skeletal muscles can be worked on directly, the organs and tissues only indirectly. To mobilize the contracted muscles, the therapist must first increase the contraction to a point that cannot be maintained. This is done by direct pressure on the muscle by the thumb or by otherwise irritating it. Of course the muscle will only contract down again unless the emotion (or idea) that is being held back is released and expressed. For this reason groups of muscles that form a functional unit in holding back emotions are worked on together.
3. Maintaining the cooperation of the patient by bringing into the open and overcoming his resistances to therapy and/or the

therapist. This last is extremely important because the patient will in every way endeavor to maintain his immobility and try desperately not to reveal himself. Behind this is intense fear of expansion and movement. When the patient begins to feel his own restrictions and gains sufficient contact with his organism so that he knows that he is holding back and why, he can be very helpful in his therapy. His lack of contact is one of the most difficult problems to overcome. It must be pointed out so that the patient is made aware of it.

Anxiety is the basis for repression and is behind all contraction. The organism is always trying to control anxiety and cure is effected by forcing the patient to tolerate his anxiety and express his forbidden feelings. The most important emotion to elicit is rage, and until this is released he cannot experience the softer feelings of love and longing.

The therapist works from the head down, removing the layers of armoring from superficial to deep. There are three basic layers in every armored individual: 1) the social facade; 2) the secondary or great middle layer where the sum of all the repressions has built up, resulting in destructive forces such as rage, hate, contempt, spite, etc. There are usually many subsidiary layers; 3) the healthy core that expresses itself when all blocking has been removed.

In development the organism is subjected to repeated restrictions of its

natural and even secondary functioning. Each prohibition becomes part of the character through fear of punishment or rejection and is retained in the armor. There is an increase in inner tension that produces harshness and expresses itself as hate. This must again be repressed so only modified expressions, such as contempt or disgust, are allowed to come out.

The second or great middle layer is usually very complex, many sublayers pile one on another until a social adjustment has been reached. This is the social facade. This may be comparatively stable or unstable, depending on the effectiveness of the defenses in the middle layer and the degree of satisfaction the organism can still attain. The social facade contains one or more basic character traits that cause the patient to react the same way to each problem he meets. It becomes the main character defense. Reich called it the "red thread." It must be recognized and understood to properly evaluate the patient. The basic character trait is never dissolved but remains always an integral part of the personality although it may be modified. It may be socially acceptable, such as modesty or reserve, or socially unacceptable, such as dishonesty, cunning, or cheating.

The three layers are dealt with in each segment as they are mobilized until the final core of unitary vegetative functioning is reached. The depth of the layer on which one is working is recognized by the extent to which the organism is involved in the response, and the ability of the patient to function.

If the first four segments are free, one is always working at a deep layer.

When one reaches the pelvis, which is always freed last, the main danger in therapy presents itself. If the pelvis is freed early, as is done in some body-oriented therapies, the individual cannot handle the sexual impulse and either confusion and disintegration follow or else earlier problems, such as sadistic impulses, are carried into the sexual life. One exception is with depressives, where the low energy and great inhibition make early freeing of the pelvis safe. Freeing the pelvis is called the end phase of therapy. It is especially dangerous if the main block has not been dissolved. The end phase begins with the full flow of energy into the pelvis and the totality of the organism begins to function. The danger is in the sudden rise in energy level. Previously the person functioned by binding energy, and since now he no longer can, he may react dangerously to the high level of energy.

At first the patient feels he is right back where he started. Symptoms reappear, sometimes stronger than before. One source of danger is a tenacious block that shows where the danger will occur in the end phase. If the block is in the diaphragm, for example, somatic symptoms and collapse must be watched for. The more tenacious the block, the more trouble can be expected. The main block plus orgasm anxiety that occurs at the end of the end phase may make the situation insoluble. Suicide, psychosis, even murder or other criminal behavior may occur. Organic symptoms may also appear

and require surgery, such as appendicitis, ovarian cyst, fibroids, and even cancer may develop. The organism must develop tolerance to this new functioning and terror give way to pleasure in the accomplished freedom. The final problem is to structuralize the patient's health. He is kept under observation and assisted until he is secure against regressing. This may take one or two years.

Orgastic potency is always the goal but cannot be attained in most cases. However, the majority will attain a satisfactory degree of health and functioning with the overcoming of all major symptoms. Where stasis can be prevented or overcome and the environment adjusted satisfactorily one can expect the patient to continue to improve for years after therapy has been discontinued.

## **APPLICATION**

Orgonomic technique is less dependent than most therapies on verbal communication from the patient and is very effective in attacking the neurotic structure. Thus, it has a very wide application. Besides the usual neuroses, it is especially effective in treating schizophrenia, epilepsy, and the somatic biopathies, such as asthma, gastric ulcer, hypertension, spastic colitis, and many types of headache. However, not every case can be treated and a few can only be made worse. It is important to recognize these cases early and

discontinue therapy.