Dr. Galit Atlas' "Enigma of Desire" will resonate with readers as she draws them into a labyrinthine journey that engages a psychoanalyst and her patients on a course in self-discovery. In her book, the anguish of unfulfilled desire finds itself on center stage, looking for resolution. Selecting specific tales, the analyst retells stories that contain her former patients' attempts at intimacy, initially through the expression of sexuality and eventually through relationships. We are reminded of the power of early attachments between mother and child: their life long course and far reaching consequences.

The title is evocative and is taken from a painting by Salvador Dali, "The Enigma of Desire", which he also subtitled "My Mother, My Mother, My Mother." The themes of maternal longing, family secrets and ghosts not only anchor Dali's art but also present themselves in the lives of her patients (Atlas, 2016, p.2). For example, she writes,

"my investigation of the enigma of desire is held in the intersubjective space between analyst and patient as a bidirectional process between two people with two different psychological systems. I explore levels of communication and the ways we listen to them in treatment, and dive into the nuances of a "dyad is dialogue" (Beebe & Lachmann, 2013), touch layers of experience and existence, and challenge the hierarchal order that psychoanalysis lies within" (Atlas, 2016, p.4)

What makes her perspective interesting is that Dr. Atlas defines the context of the mother-child relationship as intersubjective rather than hierarchical in nature; she shapes the analytic experience as a co-construction between analyst and patient. Atlas challenges the practice of therapy stating that the mother-infant relationship is more than one of 'nurturing and sensuality' (Atlas, 2016, p.2). In observing the relationship between analyst and patient, Dr. Atlas notes that the therapist, in the role of the 'nurturing mother,' avoids or denies the struggle and unspoken presence of 'threatening sexual feelings", leaving the enigmatic in the shadows (Atlas, 2016, p.2). In approaching the analysis as a co-constructed, dialectical process, the patients sexual experiences are understood within the analytic engagement. One wonders if Atlas will explore the role of the mother further, beyond the constraints of gender identity. For example, will she speak to the experiences of a nurturing male analyst?

In the first narrative, Ella is described as a young woman who struggles to be accepted and loved by her mother (Atlas, 2016, p.15). She experiences her mother's emotional dysregulation. Her attempts at self-soothing are part of a larger exploration of sexuality. There is a tear in her relationship with her mother; the absence of the pragmatic expression of attachment has led Ella into conflicts where she is unable to have loving relationships. Ella has confused sex with love and her longing is resolved over the course
of her analysis. Ella sees that using her sexuality was a way to reawaken the early need for maternal love.

In the next vignette, Atlas introduces us to Ben, who is still grief-stricken by the loss of his father and the abandonment of his mother due to her preoccupation with a family friend. Atlas writes,

"with Ben I am constantly reminded of my own childhood struggle with the experience of being "too much".... looking for ways to regulate myself containing my joy, love and excitement as well as my pain and terror..... I used to experience myself as being too much for my mother, and I felt left alone, then and now, which I believe reflects similar fears and feelings on his part." (Atlas, 2016, p.34).

These two analyses, of Ella and Ben, are just two tales, there are many more which illustrate the weaving of theory and early childhood experiences as they re-emerge as ghosts, losses and inexpressible rage or grief in adulthood. These moments are captured in her patients' conflict with identity, sexuality and desire. She writes, "The enigmatic aspects of intersubjectivity, are complex and ambiguous, also much harder to observe or specify. According to Laplanche, enigmatic messages are part of the origin of sexual experience. "Pragmatic aspects of intersubjectivity can usually be observed, and assessed" (Atlas, 2016, p.36). In the therapeutic tales presented here "patients are threatened by any invasion, conscious and unconscious including Enigmatic and Pragmatic messages that the other transmits to them, are afraid of being seduced to feel, attached, trust, and then dropped( Atlas, 2016, p.36). There is a certain outcome for the child experiencing such care. As observed by the analyst, "we are dealing,...not only with feelings of loss, but also with severe feelings of shame, impotence, and anger."(p. 38, Atlas, 2016).

Additional narratives address breaks in relationships, reflecting infant re-enactments. Pregnancy is explored as its own developmental milestone, particularly, for the female body. How does one hold a patient's pregnancy and one's own, simultaneously? How does relationship, past and present in the analysis, impact the analytic process? Clinical ruptures, transferences and counter transferences, repairs executed sensitively, within a 'language of tenderness'(Atlas, 2016, p. 77) at varying levels of intensity, some confrontational by necessity, bring about a change in the patient.

One has shifted relating from a defensive position to a transformative one. How does one sit with a patient's woundedness and his/her sense of isolation in which 'imaginings' of being fully engaged in a relationship are relegated to fantasy? Patients, like Leo for example, will push every effort at being known, away, his fear of seduction and abandonment informing his every step. Only the recognition of trauma, its anihilating quality and the capacity to engage in a bidirectional dialogue will allow relief. An analyst's "subjective experience will, potentially, open a way to share the enigmatic and open a new way of relating."( p. 43, Atlas, 2016).
As Dr. Atlas observes, "the analyst's emotional process promotes change and growth for both the patient and the analyst." (P. 44, Atlas, 2016).

Dr. Atlas engages her readers in seeing lives deeply colored by tragic losses, conflicts that pre-existed their arrival, ghosts and the feeling of being understood for that first time. "Recounting psychoanalytic tales, I illustrate both analyst's and patient's desires and the ways these play out in the consulting room." Her work focuses on the "levels of communication that take place in the most intimate setting: between mothers and their babies; between lovers; in the unconscious bond of two people- as in the consulting room, where two people sit alone in one room, looking and listening, breathing and dreaming." (p. 3, Atlas, 2016). Internal dialogue evolved in the early years as a result of relationship with mother or a lack thereof or a disrupted attachment, here, is seen with a long arm, reaching into adulthood.

In exploring the early relationship between infant and mother Atlas draws our attention to psychoanalysis and notes that "if it is the study of subjectivity and intersubjectivity, conscious and unconscious, intrapsychic and interpersonal, then it must also deal with dimensions of the intra- and inter-human that are both Pragmatic and Enigmatic without reducing one to the other." (p. 35, Atlas, 2016).

These tales reflect the shaping of life and it's shift from feared, anticipated, disappointments to the task central to analytic work, seeing both pragmatic, spoken experiences and the enigmatic, unspoken, missed moments that are held in anguish and impact self regulation and relational ability.

This is no ordinary anguish, this loss, a tear in the anticipation of care during infancy and childhood, Dr. Atlas draws on her own and the experiences of her patients complex relationships with their mothers, the losses and at time cross purposes hierarchical disturbances in boundaries. Dr. Atlas finds herself translating their experiences, conscious and unconscious perceptions, the expressed known and the unknown within the bounds of the analytic relationship and outside of it.

It would be challenging enough to capture the analytical experience alone, but to also, simultaneously engage in exploring theoretical developments, from their earliest times to the present in a book that is only 196 pages, is a monumental task. This work is compelling because it challenges us to explore sexuality within the context of mother-child relationships. Dr. Atlas brings a fresh perspective to the role of sexuality, mothering and the sources of adult anguish. Perhaps brief vignettes, describing the early analytic directions in the decades prior to Kohut's contributions on Self Psychology and before Benjamin's articulation of Intersubjectivity, would have been helpful in describing the arc of psychoanalytic theory and process across time. On the other hand, any student of analysis would already have been introduced to many such case illustrations. In the last chapter, the analyst leaves us with a generous sense of her own developmental course. Life has not been easy for Galit Atlas, she too has explored this Enigma of Desire. This is a scholarly work that captures sexuality, longing for intimacy, and belonging, as relationships struggle to re-emerge in adulthood, and do so, successfully, with psychoanalytic midwifery. The Enigma of Desire deserves it's place among the classics in psychoanalytic literature.