



Cases of Schizophrenia in The Master and Margarita Zina Gimpelevich

In the following essay, Gimpelevich examines Bulgakov's use of schizophrenia as a literary device in The Master and Margarita. Published in Germano-Slavica IX, no. 1-2 (1995-1996): 65-77.

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Sigmund Freud, the famous German psychologist, often attributed his discoveries in psychoanalysis to great literary works and their authors.¹ His sources ranged from folklore and drama to Shakespeare, and from Dostoevsky to Thomas Mann and Romain Rolland. At the present time psychoanalysis continues its interaction with literature, often using it as its working ground. ***The Master and Margarita*** by Mikhail Bulgakov is considered in the present study as a typical case of such interaction because it contains so many instances of mental disorder. In the novel almost all cases of mental disease are either generally labeled as schizophrenia or have its typical features. Matt Oja also has noticed the significant role of schizophrenia for the plot of ***The Master and Margarita***. In his paper given for the Bulgakov Centenary symposium in Nottingham, 1991, he argues that the Master is just a splinter personality within Ivan Bezdomnyi's mind.² As much as this argument could be applicable to one part of the plot, it does not cover the whole actuality of the phenomenon of schizophrenia in the novel. Riita Pittman continues to develop the idea of "splinter personalities" in her most interesting book with the self-explanatory title of *The Writer's Divided Self in Bulgakov's ***The Master and Margarita****.³ Her criticism is written under the influence of Freud's former student, Carl Jung. Possibly as a result of this influence, despite some remarkable insights, a balance in reporting the literary fact and literary object is not always present in this study. Pittman also raised a classical question about the relationship of art and neurosis that proved to be rhetorical since an answer can be reached neither clinically nor theoretically. Pittman's work, however, despite its validity on several matters, one of which is a comparison of Bulgakov's treatment of madness with those of Dostoevsky, Gogol, Pasternak, Siniavsky and Aitmatov, does not present either clinically or critically a clarification of what the phenomenon of schizophrenia actually is.

The present study attempts to analyze Bulgakov's broad use of schizophrenia as a literary device. At the same time we will try to examine the history of the term as well as to find out what this word means in contemporary psychology. In addition, in order to connect the literary text with psychological data it is useful to learn what causes schizophrenia in the novel. While doing so, we will try to comprehend why there are so many incidents of mental disorder in the novel and to explore the paths followed by its characters from the subconscious to the conscious. Such an approach is encouraged by a statement from *Literature and Psychoanalysis*: "We have learned both epistemologically and clinically that all views are coloured by psychology and by personal history."⁴

Bulgakov's personal history, literary views and medical training are in complete concordance with the theme of schizophrenia in his literary work. Keeping this in mind one may even speculate that the author used schizophrenia as a literary device in order to look for the cause or starting point of mental disease while working on ***The Master and Margarita***. This idea does not contradict the fact of Bulgakov's own mental problems by the end of his life. In his article, "Creative Writers and Day-Dreaming," Freud also raised a similar question that at the end of his article becomes resolved in a writer's personal history:

*& from what sources that strange being, the creative writer, draws his material, and how he manages to make such an impression on us with it and to arouse in us emotions of which, perhaps, we had not even thought ourselves capable?*⁵

In 1909, Bulgakov started his medical studies, which he successfully completed in 1916 despite all the social upheavals of that time. Bulgakov's specialization was venereal disease, but he also studied psychiatry as part of his general medical training. Most certainly, it was Emil Kraepelin's *Compendium of Psychiatry*, a compulsory book for medical students of the period, which shaped Bulgakov's knowledge of the subject.⁶ Kraepelin did not speculate much about the causes of schizophrenia. Although his assumption was that the cause was physiological, Kraepelin neither insisted on it nor went further than a simple description of his point. The major elements of Kraepelin's classification of schizophrenia were modified by his followers and are still used in contemporary psychology. We find them in *Abnormal Current Perspectives* as the eight major symptoms of schizophrenia. There are four "fundamental" symptoms (also called "A" symptoms) and four secondary symptoms:

*1. Association--the patient shows evidence of a thought disorder, usually by the way she or he uses language; 2. Affect--the patient's emotional responses are blunted or inappropriate; 3. Ambivalence--the patient is indecisive and unable to carry on normal goal-directed activities; 4. Autism--the patient is withdrawn and self-absorbed. The secondary four are: 1. Hallucinations; 2. Paranoid thinking; 3. Grandiosity; 4. Hostility and belligerency.*⁷

These characteristics of schizophrenia become a part of the narration from the very beginning of Bulgakov's novel, when the first two protagonists, an editor and a poet, are introduced. The first two symptoms of both the fundamental and secondary groups are experienced by Mikhail Berlioz. Those symptoms are sudden fear and, as a consequence of it, thought disorder. Berlioz's emotional responses become blunted and then are followed by hallucinations and paranoia. While Berlioz tries to find natural explanations for the supernatural, it is not only the reader but he himself who is not convinced by them: "'The devil!' exclaimed the editor. 'Do you know, Ivan, the heat nearly gave me a stroke just then! I even saw something like a hallucination &' He tried to smile but his eyes were still blinking with fear and his hands trembled."⁸ Despite the fact that it is easy to apply the eight given characteristics to the literary text, there are still a number of uncertainties brought up by the term schizophrenia. The most common explanation of it tells us that "Schizophrenia is the label given to a group of psychoses marked by severe distortion of thought, perception, and affect, by bizarre behavior, and by social withdrawal."⁹ The word itself means "split mind." Freud finds this condition to be drawn from depersonalization: "Depersonalization leads us on to the extraordinary condition of "double conscience", which is more correctly described as "split personality."¹⁰

Jeshua, a Christ-figure in Bulgakov's novel, has never been labeled as schizophrenic in critical writing. Pontius Pilate, however, calls Jeshua mad a number of times in the novel and even tries to save him under this pretext. There are some signs of depersonalization, however, when Pontius Pilate experiences Jeshua's powers. A question which Jeshua asks Pontius Pilate about his own state of mind is rhetorical since there is nothing in the behavior of Jeshua that might correspond to such a split: "'Do I look weak in the head? &' "Oh, no, you do not," replied the Procurator quietly, and smiled an ominous smile."¹¹

The history of psychological disorders teaches us that every society has a special, often cautious attitude toward a person with psychological abnormalities. Civilized society often makes allowances for crimes committed by a person with psychotic disorders. In Old Russia a mad person (*iurodivyi*, or "God's fool") was believed to possess the divine gift of prophecy. It is interesting to note that Pilate was going to grant freedom to Jeshua on exactly that basis. His good intentions are never realized since another social power, the state, did not allow him to violate the tradition of obedience. This, in its turn, according to Bulgakov's ironic interpretation, also causes Pilate's temporary personality split. He experiences tremendous fear, hallucinations, hears voices and proclaims aloud a prophecy about his own immortality. The experience leaves Pilate in great anxiety. In the end, he labels Jeshua a "mad criminal" both to justify the unjust decision he is about to make to himself and because he fears the reprimands of his own society. Pilate also attempts to transfer the responsibility for Jeshua's execution to the Jewish authorities, appealing to them with the familiar argument: Jeshua is nothing but a poor, mad philosopher.¹² After he fails, temporary madness visits Pilate again but this time for a much shorter period.

The concept of the "mad criminal," however, strays into the next chapter where Berlioz and the poet Bezdomyi have their encounter with the foreign "professor," Woland. From their point of view this "professor" is absolutely mad, and indeed, seven of the eight symptoms could be applied to the professor who happens to be the devil himself. For example, the text illustrates thought disorder in the way Woland uses the Russian language (a number of times he moves from very pure to broken Russian): "'Oh, yes! I can easily confirm it!" rejoined the professor with great confidence, lapsing into his foreign accent and mysteriously beckoning the two friends closer. They bent towards him from both sides and he began, this time without a trace of his accent which seemed to come and go without rhyme or reason."¹³ His emotional responses are blunted or inappropriate. From time to time he demonstrates withdrawal and self-absorption. It is also worthwhile to notice that the writers somehow attributed to Woland a German origin:

"Where am I staying? Nowhere. &" answered the mad German, staring moodily around Patriarch's Ponds with his green eye.

"What! & But & where are you going to live?"

"In your flat," the lunatic suddenly replied casually and winked."¹⁴

All of the four secondary symptoms (hallucinations, paranoid thinking, grandiosity, hostility and belligerence) are in the descriptions connected either with the behavior of Woland or of his companions of the moment, Bezdomyi and Berlioz. Ironically, it is Berlioz who diagnoses "the professor" as "crazy":

*"That explains it all," thought Berlioz perplexedly. "He's some mad German who's just arrived or else he is suddenly gone out of his mind here at Patriarch's. What an extraordinary business!" This really seemed to account for everything--the mysterious breakfast with the philosopher Kant, the idiotic ramblings about sunflower-seed oil and Anna, the prediction about Berlioz's head being cut off and all the rest: the professor was a lunatic.*¹⁵

The word "lunatic" and its synonyms appear twelve times in one and a half pages in connection with Woland. The thought that Woland is losing his mind is presented by Bezdomnyi early in the first chapter: "Have you, citizen, ever had to spend any time in a mental hospital?"¹⁶ This evokes a prophecy from Woland about Bezdomnyi's destiny, although at the time this prophecy sounds like bewilderment:

*"Yes, I have, I have, and more than once!" he exclaimed laughing, though the stare that he gave the poet was mirthless. "Where haven't I been! My only regret is that I didn't stay long enough to ask the professor what schizophrenia was. But you are going to find that out from him yourself, Ivan Nikolaevich!"*¹⁷

Woland's diagnoses, as the reader learns, are always correct. The first sign of Ivan's madness has an extremely realistic explanation. It starts with a temporary disturbance of Ivan's motor behavior, one of the most common symptoms of the disease. After Bezdomnyi returns to his senses, the narrator immediately informs the reader that Ivan's behavior is abnormal and labels him insane. The narrator also mentions ironically that Ivan considers himself normal and that it is Woland who is abnormal. At the moment of real madness, however, Bezdomnyi's behavior changes completely: "Nobody knows what came over Ivan, but before letting himself out by the back staircase he stole one of the candles and the little paper icon."¹⁸ Next in the development of his case comes the passing hint about Ivan's state of "mental confusion." Bezdomnyi, who could be an exemplary case for any scientific book on schizophrenia, repeatedly demonstrates the major symptoms of the disease in rapid progression. The disease is first diagnosed by a doctor on duty in a psychiatric clinic and then confirmed by Stravinsky, the chief of this clinic, who explains to Ivan the essence of the problem in layman's terms.

Stravinsky is the second protagonist (after Jeshua) who, despite his episodic appearances in the novel, is as powerful a figure in the Moscow chapters as Jeshua is in the Jerusalem sections of the novel. Stravinsky enjoys the complete trust of his staff and patients. Even Ivan, who is very suspicious of everyone in the clinic, has confidence in the psychiatrist: "'He's clever," thought Ivan, "I must admit there are a few bright ones among the intellectuals &'"¹⁹ Stravinsky is also responsible for the split in Bezdomnyi's will-power: "At this point something odd happened to Ivan Nikolaevich. His will-power seemed to crumple."²⁰ Here the reader finds the substitution of "mind" for "will-power" in Bulgakov's consideration of schizophrenia. That notion alone is very important in the philosophy of the novel since it concerns Jeshua's major statement on the subject. According to Afranii (Pilate's secret agent) and to Levi Matthew (Jeshua's follower): "His (Jeshua's) only words were that he regarded cowardice as one of the worst human sins."²¹ Cowardice can be described as a split in will-power or the phenomenon when the will-power of one person is suppressed by other people or by circumstances. In *The Master and Margarita* this split of will-power reveals Bulgakov's use of schizophrenia more as a literary device or a philosophical symbol than as an examination of an actual medical case.

Although Ivan Bezdomnyi's mental illness is the most detailed in the novel, in which this character opens and closes the cycle of the disease, he yields the most important position to the main protagonist of the novel, the master himself. As in all other occasions of mental disorder in *The Master and Margarita*, the master's sickness is not inherited but acquired from an initial shock. The actual cause of the disease, i.e., the initial shock, varies with the experience of the individual character. Like Ivanushka, the master may exemplify a very special kind of mental condition. When the master first appears and tells Ivanushka his story he seems to be a completely sane person. His speech is clear and highly intelligent (remembering language as the most important factor and indicator of schizophrenia). The master's shock comes not from an encounter with fantastic or supernatural powers, but from his conflict with the social system. The Soviet literary society of the time finds his novel about Christ socially and politically unacceptable. As a result, the secret police intervene to protect society.

The master's problem is also more universal than anyone else's in the novel. Approaching his situation from the currently fashionable humanistic-existential perspective of modern psychiatry (that is evidently post-Bulgakov), we will see many parallels. The reader does not learn much

about the way Stravinsky treats the master. There is, however, a hint that the professor is applying elements of the humanistic approach: "'I am incurable," said the visitor calmly. "Even though Stravinsky says that he will send me back to normal life, I don't believe him. He's a humane man and he only wants to comfort me."²² The humanistic-existential model applied to schizophrenia was popularized by the British existential psychiatrist Ronald D. Laing.²³ He views schizophrenia as a type of mimicry or set of subconscious rules by which an individual is trying to live his inner life as independently as possible from society. These rules are obviously in complete contradiction to society's rules. In his early writings, Laing accepted more traditional views on the causes of schizophrenia based on the idea that the sickness is a result of combined pressure from both society and family. His later views are revolutionary indeed. Laing claims that society's set of values is no more valid than the individual's and that the right of society to suppress a person's true feelings and to adopt a false self will produce only trivial and distorted values for that individual.

We have no indication of any family pressures in the master's case, since even his marriage did not leave any memories. As mentioned earlier, the reader does not know Stravinsky's methods. They are spelled out rather more in Ivan's case and therefore can be at least partially applied to the master since the history of the disease is given there in detail. After the master's unfortunate encounter with the Soviet literary world, he declares that his life is over: "'When I emerged into the world clutching my novel, my life came to an end." whispered the master. He hung his head and for a long while wagged the black cap with the embroidered yellow "M".²⁴ Here the first symptom of the master's disease appears; his speech has lost its clarity: "He went on with his story but it grew more disappointed and Ivan could only gather that his visitor had suffered some disaster."²⁵

Nevertheless, despite the master's incoherence, he still shares the narration of the novel. Thus the reader learns that the first impression which the literati make on the master is that they are all abnormal and lunatics to different degrees. The reader, perhaps, will feel akin to the master when he talks about his editor:

The editor, of course, the editor! Oh, yes, he read it. He looked at me as if I had a swollen face, avoided my eyes and even giggled with embarrassment. He had smudged and creased the typescript quite unnecessarily. He asked me questions which I thought were insane. He said nothing about the substance of the novel but asked me who I was and where I came from, had I been writing for long, why had nothing been heard of me before and finally struck me as the most idiotic question of all--who had given me the idea of writing a novel on such a curious subject?²⁶

This question from one supposedly creative personality to another might seem strange, but we should keep in mind that the master and the editor live their lives by different rules. The master's rules originate in his inner life while the editor's are based on the demands of the establishment. If one is to follow Laing's assumption that even a trained psychiatrist does not necessarily present a more valid set of norms (since he or she only represents the current values of a troubled society), it is possible to apply this idea to the master's situation. From this point of view, the master is absolutely sane and the editor is not. Despite this attractive line of thought, the reader who follows the narrator sees further symptoms that offer conventional proof of the master's schizophrenia. In fact, the master is the only personage in the novel who clearly exhibits the four "A" symptoms as well as the four secondary ones. In the master's case the disease starts with the secondary ones and progresses to the "A" symptoms. First he has uncontrolled fear, then hallucinations and paranoia. Instead of grandiosity, he feels diminished, and then hostility leads to thought disorder; his use of language changes, his emotional responses are blunted and often inappropriate. The master becomes unable to carry on normal activities. When he appears in front of Woland and his retinue, withdrawn and self-absorbed, he is the personification of the disease:

A dark green cloth stretched from the window-sill to the floor and down it walked Ivan's night visitor, the man who called himself the master. He was wearing his hospital clothes--dressing gown, slippers and the black cap from which he was never parted. His unshaven face twitched in a grimace, he squinted with fear at the candle flames and a flood of moonlight boiled around him.²⁷

A few minutes later the master's state of mind becomes even more troubled. He is anxious and terrified thinking that he is hallucinating again. It is evident that the master is the only protagonist whose insanity is not colored or accompanied by comical elements. Although this protagonist shows some exaggerated romantic feelings, he also demonstrates a connection with the old question about the mental health of the artist. As Lionel Trilling has pointed out, the "abnormality" of a poet, i.e., the fact that his mind works in a different way from that of any other intellectual, has not been

questioned since the Romantic movement began. Trilling also discusses Charles Lamb's and Bernard Shaw's understanding on this matter. In accordance with Lamb and Shaw, Trilling notes the following:

*In recent years the connection between art and mental illness has been formulated not only by those who are openly or covertly hostile to art, but also and more significantly by those who are more intensely partisan to it. The latter willingly and even eagerly accepts the idea that the artist is mentally ill and goes on to make his illness a condition of his power to tell the truth.*²⁸

A famous Soviet psychiatrist once proclaimed: "It pays in our society to be crazy."²⁹ Although we need not take his words literally, there is something in this short credo that helps to explain Bulgakov's characters. It also shows that society, while repressing the individual, repays him through its acceptance of the disease. The reader would not doubt why, in Bulgakov's novel, creative personalities like the master, Ivan or even Berlioz are chosen to manifest the sickness of society through the medium of insanity. A question that requires more thorough examination is why secondary protagonists, like the poet Riukhin or the director of the theater, Stepa Likhodeev, Nikifor and many others are also affected by temporary insanity. At first glance, these protagonists, all pure philistines, should be in complete accordance with society since they are not affected by its injustices. On the other hand, according to the novelist, they appear to be people as susceptible as the artist, the master.

The main difference in all the cases of temporary mental disorder in ***The Master and Margarita*** may be found in the following. The master's illness has a direct connection with society while in most other instances the disorders are directly or indirectly connected with coming face-to-face with a supernatural power. The poet Riukhin is an exception since his temporary illness occurs as a reflection of Ivan Bezdomnyi's. In Riukhin's situation, Bulgakov shows the development of a more general neurotic state rather than a mental disorder. Riukhin is also chosen to deliver a statement of what the loss of mind means for a human being:

Riukhin was in a state of depression. It was obvious that his visit to the asylum had affected him deeply. He tried to think what it was that was disturbing him. Was it the corridor with its blue lamps, which had lodged so firmly in his memory? Was it thought that the worst misfortune in the world was to lose one's reason? Yes, it was that, of course--but that after all was a generalization, it applied to everybody &³⁰

In this small episode the role of the subconscious in bringing about the loss of reality is revealed to the reader. This loss never happens to Riukhin completely because he finds an escape in choosing not to remember the truth.

Stepa Likhodeev's situation in the novel is more typical than Riukhin's. It begins with a direct encounter with the supernatural. As in Riukhin's case, Stepa's illness is accompanied by a temporary loss of memory. Just as Berlioz questioned his own sanity a few chapters earlier, Likhodeev now asks himself: ""What in God's name & ?" He thought. "Am I going out of my mind?""³¹ Several passages later Likhodeev confirms to himself an observation about losing his mind: ""This must be what it's like to go mad &" he thought, clutching the doorpost."³² In actual fact he does not lose his mind since a temporary loss of consciousness saves him from mental illness. Moreover, within the society to which he belongs and whose values and rules he personifies, Stepan Likhodeev is the sanest person. His insanity is apparent only in connection with the world of the supernatural. This world, the world of the fantastic, obviously has different rules. In Bulgakov's novel, as if to confirm R. D. Laing's theories, these rules are used to question the state of normality of every individual character. Nikanor Bosoi, manager of the building, is one of the protagonists treated in Stravinsky's psychiatric clinic. Like Likhodeev before him, Nikanor receives his primary shock from the meeting with, as he puts it himself, "the Evil Spirit." Differing from Likhodeev in terms of a low level of education, he also fits very well into Moscow society of the 1930s--he is a typical Soviet citizen.

There are two cases of collective madness in the novel: both are related to the supernatural, and the first case appears in chapter twelve. Although the fantastic is almost overwhelmed by the comic elements in this chapter, its essence is the set of rules by which the supernatural evaluates relationships between people and society. The reader sees it in the Devil's conclusion before discovering that the whole episode is arranged as a learning experience for Woland:

"Well, now," replied the magician reflectively. "They are people like any others. They are over-fond of money, but then they always were & Humankind loves money, no matter if it's made of leather, paper, bronze or gold. They are thoughtless, of course & but then they sometimes feel compassion too & they are ordinary people, in fact they remind me very much of their predecessors, except that the housing shortage has soured them &"³³

Although comic elements almost completely mask the second incident of collective madness in the novel, it is the supernatural characters that never cease to ridicule society. In less than three pages the reader has a lesson on the absurdity of the Soviet bureaucratic system.

Almost all the participants in the story end up in Stravinsky's clinic, learning for themselves the meaning of the word "schizophrenia." Like most of the characters who are affected by the interference of the supernatural, they come back to their senses as soon as the rules of the supernatural world no longer apply to them. This is a probable answer to the question of why so many philistines in the novel are struck by mental illness. As different as each case is (and due to the size of this study we do not examine all the cases), they have the same tendency, namely to reveal the essence of society by applying the rules of another, completely different world to its members. And surely the reaction that seems to be normal in one situation is schizoid in another. The master's case confirms this assumption. He is the one whose mental illness lasts the longest in terms of both time and society's attitudes towards him. He is also the one who looks absolutely normal when the rules of the supernatural world are applied to him. The master and Ivan Bezdomnyi at some point choose and then abandon the truth, and this choice decides their destiny. Exposing the opposition in the concepts of truth and memory is the root of the literary device through which Bulgakov demonstrates mental disorder in his literary characters. In so doing he reveals the moment of the transformation of the subconscious into the conscious. This opposition continues the novel's key question that was first posed by Pontius Pilate to Jeshua: "What is truth?" Pilate is punished by eternal memory, which means that he is continually reminded of his failure to recognize that the truth was standing in front of him in the person of Jeshua.

The application of DSM to the novel proves medically correct not only in the master's case, but in all the others as well.³⁴ This reference book tells us that schizophrenia (i. e., core schizophrenia) is an incurable disease. The reader will remember that the master confirms to Ivan the incurability of their cases. According to DSM, symptoms evidenced by a biological imbalance can be chemically treated and controlled, but the illness itself cannot be eliminated. As if to confirm this rule, after his release from the hospital, Ivan is compelled to take medication until the end of his days. Connecting both sources of the present study, Bulgakov's *The Master and Margarita* and various textbooks on modern psychology, one cannot help but listen to an ardent critic of both Kraepelin and Laing, Thomas Szasz. This psychiatrist believes that *dementia praecox* was "invented" by Kraepelin and Bleuler and later "legitimized" by Laing. According to Szasz, the phenomenon of schizophrenia does not really exist as a common or complete agent, but is a unique condition for each patient who is diagnosed with it.³⁵ This argument, however, does not eliminate the concept of schizophrenia that continues to occupy significant territory in both literature and psychiatry. On the contrary, it confirms its multifaceted character and uniqueness. In this respect, Laing's ideas are even more applicable to Bulgakov's due to two factors. First of all, Bulgakov, like Laing after him, evaluates society as a setting and often a cause for schizophrenia. Secondly, Laing in his studies does not reject the uniqueness of each case, but rather reinforces this opinion.³⁶

The mere fact that Bulgakov attributed such importance to schizophrenia in *The Master and Margarita* demonstrates his interest in the phenomenon. A supposition that he also may have been looking for the cause of the disease from a mere physician's point of view cannot be proved since he stopped practising medicine as early as 1919. The idea that schizophrenia was used in the novel as a psychological background for a literary device is not only appealing but seems to be an appropriate conclusion to all that is written above. After all, the major philosophical, moral and psychological questions in the novel are raised through this literary device. These questions are: What is truth? Where lies the border between the subconscious and the conscious? What is the role of memory in an individual's set of values? Bulgakov raised these questions, but like Chekhov, he never gives a clear answer, allowing every reader to find one for himself. From this point of view we may consider Bulgakov's "search" for the cause of schizophrenia. Undoubtedly, for him it was the initial shock which a person experiences under unusual circumstances. Despite the major contradiction between Bulgakov and modern psychology about the role of initial shock in the development of schizophrenia, the reader is aware of the fact that Bulgakov's protagonists experience all the major signs of the disease. Remembering that any kind of shock could be a starting point for other ailments, e.g. heart disease, one should probably not deny its role in the case of a mental disorder like schizophrenia. Furthermore, following most psychiatrists, starting

with Kraepelin and continuing to the present day, Bulgakov also notes the role of predisposition to this disease (for example, he recognizes this illness as genetic). The master spells out to Ivanushka the connection between a certain background and an initial shock that is supposed to form the conditions of schizophrenia:

"We must look the facts in the face." The visitor turned his face towards the moon as it raced through a cloud. "Both you and I are mad, there is no point in denying it. He gave you a shock and it sent you mad, because you were temperamentally liable to react in that way."³⁷

The cause of schizophrenia has not yet been found, and here lies the major difference between modern science and Bulgakov's "clinic." Some doctors believe that it is a genetic illness; others, that it is due to environmental factors or, possibly, a virus. In general, doctors exclude initial shock--the starting point of all cases of schizophrenia in the novel. In Bulgakov's time, questions like environmental factors or viral origins of the disease had never been discussed. They first started to be considered with Dr. Laing's generation. There is no doubt that due to this, the course of Bulgakov's treatment of schizophrenia in his literary work took a different direction from that of some findings of modern psychology and medical practice. However, all of his "patients" are clearly recognized by the symptoms they exhibit.

Along with many others, Bulgakov's novel brought about the notion of the acceptance of the sickness by depicting the disease from the most realistic angles, both literary and psychological. ***The Master and Margarita*** shows psychologically and imaginatively how thin the line between normal and abnormal behaviour is, and how powerful society rules create this line.

By taking advantage of contemporary psychological data we singled out the use of schizophrenia as a literary device in ***The Master and Margarita***, hopefully bringing closer together the ideas of literary criticism and psychoanalysis. Lionel Trilling has attributed to Freud the following statement that I could not find despite all my toiling through The Standard Edition of Freud:

& at his seventieth birthday celebration, he disclaimed the right to be called the discoverer of the unconscious, saying that whatever he may have done for the systematic understanding of the unconscious, the credit for its discovery properly belonged to the literary masters.³⁸

With this appealing phrase I should conclude the study. Finally, I would like to express a hope that because of its rich materials, this novel might inspire medical research into the causes of schizophrenia and help to discover the missing elements of this disease.

Notes

There are a good number of overt and oblique associations in *The Master and Margarita* that link the mental diseases in the novel with Germanic names. Although this connection is not the main intention of my study, it is interesting to record them.

Sigmund Freud is traditionally given all the credit for bringing together literary criticism and psychoanalysis. In fact, the authors of the General Introduction to *Literature and Psychoanalysis* (see: 2, p.7) find that starting with Thomas Mann, who "was one of the earliest writers to relate literature to psychoanalysis formally rather than methodologically, but as belonging to the same ambiance," all branches of the contemporary criticism are influenced by Freud. Among many who rethought Freud's ideas they list structuralists, deconstructionists, Marxists, formalists and their theories of literature, the latest French critics, the Saussurean school of linguistics and Derrida, with his idea of all meanings being open-ended. The present study, though it has no direct relation to Freud's theories, is also admittedly nostalgic about and influenced by Freud's earlier thoughts on the writer's double personality.

To my knowledge, this paper is not published yet.

Riita Pitman's *The Writer's Divided Self in Bulgakov's The Master and Margarita* (New York: St. Martin's Press, 1991) 61.

In: General Introduction of *Literature and Psychoanalysis*. Edited by Edith Kurzweil and William Philips (New York: Columbia University Press, 1983) 2.

Sigmund Freud. The Standard Edition of The Complete Works. Vol. 9 (London: The Hogarth Press, 1959) 143.

Emil Kraepelin (1856-1926) is one of the Germanic connections whose influence on Bulgakov can be easily traced. He is called by many "the father of modern psychiatry." One of his first academic positions was in Estonia, a Baltic province of Russia, at the German language University of Dorpat. Although the term schizophrenia was first introduced by his follower, Eugene Bleuler (1857-1939), Kraepelin, who was a great systematizer, offered the classification of the disease that is still used in modern approaches as *dementia praecox* (schizophrenia.) It is interesting to notice that Kraepelin's name appears in Bulgakov's play *Flight* where a soldier called Kraepelin is a source of psychiatric disturbance for General Khludov. The General was hallucinating and the soldier whom he ordered destroyed for a minor irregularity, after death, started to haunt Khludov's weakened mind, causing him his mental sickness.

Abnormal Psychology. Current Perspectives (New York: Random House, 1980) 327.

M. Bulgakov, *The Master and Margarita* (London: Collins Harvill, 1990) 15.

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Bulgakov, 346.

Bulgakov, 172.

Ronald D. Laing is considered by many to be a follower of Marxist-socialist traditions of thought. The reason for that is Laing's firm beliefs in society being the cause of what is called schizophrenia. Laing is also a strong opponent of Kraepelin, who was not interested in the social data of his patients. It is true indeed that Kraepelin, being a follower of the clinical pathology of nineteenth-century medicine, was not much inclined towards environmental and social factors. In this respect, Laing could be considered as an opponent to Kraepelin.

Bulgakov, 117.

Bulgakov, 117.

Bulgakov, 117.

Bulgakov, 323.

Lionel Trilling. "Art and Neurosis" In *Literature and Psychoanalysis*. (New York, Columbia University Press, 1983) 101.

G. Hein. "Social Psychiatric Treatment of Schizophrenia in the Soviet Union," *International Journal of Psychiatry*, 5, November 1968, 346.

Bulgakov, 88.

Bulgakov, 99.

Bulgakov, 100

Bulgakov, 147.

DSM-4 (*Revised Diagnostic Statistical Manual of Personality Disorder*) edited by John Livesley (New York: Guilford Press, 1995).

In his study, *The Sacred Symbol of Psychiatry*, Thomas Szasz is critical of both Kraepelin and Laing, finding them to act as two poles of the same stick.

Already in his early writings, Laing compared the psychological approaches of Keats, Kafka and Shakespeare as if their protagonists were clinical cases.

Bulgakov, 159.

Lionel Trilling, "Art and Neurosis," 102.