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**SEEING THINGS ... DIFFERENTLY,  
OR, HALLUCINATING THE POSTMODERN**

From thermodynamics and rocket technology to the deep web, Thomas Pynchon's novels and stories have often juxtaposed science and technology with unusual, not to say downright implausible happenings. This is perhaps the result of a fascination with contorting scientific knowledge into strange applications, whether as metaphors for social mores or to see how far its logics can be pushed toward the breaking point, but it is assuredly grounded in the relationship between the human and the technological and how American society deals with its contemporary technological environment. For example, *Bleeding Edge* explores the growth of the internet and the dot-com boom, *Vineland* focuses on television and film, and *Gravity's Rainbow* deals with the V2 rocket program. Obviously, such reductive statements omit the complexities of Pynchon's inclusions of and allusions to competing paradigms and conspiracy theories, but in each case what is foregrounded is how individuals understand and relate to the world.

As such, it is possible to assert that Pynchon's fictions have always been involved in representing and articulating "states of mind." Such states might differ across his fictions in terms of their setting and context, but whether concerned with the 1893 Chicago World's Fair (*Against the Day*), the 9/11 attacks (*Bleeding Edge*), California at various points (*The Crying of Lot 49*, *Vineland*, *Inherent Vice*), World War Two and its aftermath (*V*, *Gravity's Rainbow*), or even colonial America (*Mason & Dixon*), Pynchon's works are invariably concerned with seeing things "differently" than established histories might otherwise imply and, moreover, foregrounding the relativism and partiality of any individual perspective or overly simplified way of perceiving the world. His protagonists search for answers to make sense of their experiences as they are cast adrift from meaning; in the case of Slothrop from *Gravity's Rainbow*, he is literally lost as he disappears from the narrative part way through.

Within this framework, a recurrent trope of Pynchon's fictions is negative psychological responses to the environment (paranoia, uncertainty, emotional and epistemological insecurity) as a result of a failure to rec-

oncile individual experiences with something defined as normal or normative. Pynchon's characters neither grow nor find answers, but this is precisely the point: they accumulate data, clues, and/or experiences, but no single answer suffices to define everything, and no individual's answer corresponds to any other's. As a result of this, one of the disciplines/discourses most often referenced in his fictions is psychiatry, for even when not directly connected to the narrative arc, psychological and psychiatric terminology and characters are nonetheless present and serve to lead the reader to the perception that reality is contested, not a given, and that perception is not straightforwardly schematic.

More specifically, this article examines the ways in which perceptions of hallucinations—as psychiatric symptoms—have been represented in Pynchon's works and, more importantly, how they have augmented and shifted the territory upon which distinctions between hallucination and reality are founded. Within his work is a suspicion of the modes of psychiatric classifications and an attendant concern with the problems of control in the creation of such classifications, and we see this as broadly emblematic of a particular perspective evident within postmodern literature and theory. In this interpretation, Jean-François Lyotard's much-vaunted "incredulity toward metanarratives" is foreshadowed within Pynchon's *oeuvre* as a suspicion towards those who would describe and define reality at the expense of other worldviews (xxiv).<sup>1</sup> After a brief examination of how theorists such as Fredric Jameson and Jean Baudrillard have represented postmodern society, this essay moves on to explore the problems of binary-based psychiatric definitions of hallucinations. What is of interest here is the manner in which postmodern fiction, vis-à-vis Pynchon, mobilizes elements of psychiatry and previously deemed pathological experiences to illuminate the postmodern condition more generally, and similarly how this appropriation occurs in postmodern literary and cultural theory.

### POSTMODERN REALITY

The question of what reality is and how we understand it has been fashionably foregrounded in critical theory for some time now. Ontology as a philosophical concern may have been a question of philosophy since its origins, but each new theory posits an ontological problem, placing a filter upon the ways in which the world is perceived. Today's critics and commentators deal with a plethora of techniques to unmask ideological concerns within their objects of study, with each theory presupposing its own axiomatic account of what reality is, and somewhere along the way

the notion of reality as a stable, objective entity became outmoded, leaving a deconstructed world with no inherent meaning outside of an interpretative free-for-all.

Postmodernism may merely have been the latest incarnation of this radical questioning of the world and what reality means, but it has had a significant impact across a broad array of fields and discourses, and some of its primary commentators, such as Lyotard, Baudrillard, and Jameson, have moved the debate into an area more properly reserved for the psychological and psychiatric disciplines. Such disciplines obviously have concerns about postmodernism—not least, for example, in their mobilization of postmodern theory to inform clinical thinking about madness and its treatment, as seen in the burgeoning sub-discipline of post-psychiatry (see, for instance, Bracken and Thomas). In many respects this is a natural symbiosis, for postmodernism seems to ally itself with the forces of irrationality, asserting that scientific materialism (as seen in biomedical discourses on psychiatry) is merely one discourse among many, and that despite psychiatry's demonstrable ability to replicate results and build a coherent model of the world, it is merely another form of ideological control manifesting an outmoded Enlightenment rationality. For many postmodernists, scientific discourse is merely another metanarrative to be incredulous towards (to paraphrase Lyotard); for many working in the sciences, the metaphorization of science smacks of illogical thinking and a return to some kind of ill-thought-through cultural backlash against progress.

Jameson and Baudrillard are not immune to claims, despite their general distaste of what might be termed the postmodern condition. Jameson's terminology of the schizophrenic postmodern subject and Baudrillard's hallucinatory hyperreal both de-pathologize schizophrenia in many respects, to offer a metaphor for a wider cultural experience of fragmentation and dissolution. Jameson's thinking deserves here to be quoted at length:

If, indeed, the subject has lost its capacity actively to extend its pro-tensions and re-tensions across the temporal manifold and to organize its past and future into coherent experience, it becomes difficult enough to see how the cultural productions of such a subject could result in anything but "heaps of fragments" and in a practice of the randomly heterogeneous and fragmentary and the aleatory.... I have found Lacan's account of schizophrenia useful here not because I have any way of knowing whether it has clinical accuracy but chiefly because—as description rather than diagnosis—it

seems to me to offer a suggestive aesthetic model.... Lacan describes schizophrenia as a breakdown in the signifying chain, that is, the interlocking syntagmatic series of signifiers which constitutes an utterance or a meaning.... When the links of the signifying chain snap, then we have *schizophrenia in the form of a rubble of distinct and unrelated signifiers*. The connection between *this kind of linguistic malfunction and the psyche of the schizophrenic* may then be grasped by way of a twofold proposition: first, that personal identity is itself the effect of a certain temporal unification of past and future with one's present: and, second, that such active temporal unification is itself a function of language, or better still of the sentence, as it moves along its hermeneutic circle through time. *If we are unable to unify the past, present, and future of the sentence, then we are similarly unable to unify the past, present, and future of our own biographical experience or psychic life. With the breakdown of the signifying chain, therefore, the schizophrenic is reduced to an experience of pure material signifiers*, or, in other words, a series of pure and unrelated presents in time. (Jameson 25–26; our emphases)

The schizophrenic state is precisely that which Jameson finds in postmodernism, or the “cultural logic of late capitalism”: flat affect and an existence with no depth or meaning. Similarly, Baudrillard's definition of the hyperreal resorts to a similar sense of loss, in terms of society's inability to discover what is real. For Baudrillard, the hyperreal is the condition of a society which has moved so far into the realms of signs that it has left behind the reality upon which they were based, their referents: “It is no longer a question of imitation, nor of reduplication, nor even of parody. It is rather a question of substituting signs of the real for the real itself.... A hyperreal henceforth sheltered from the imaginary, and from any distinction between the real and the imaginary” (4). Baudrillard, like Jameson, utilizes linguistic terminology in his description, but rather than asserting that the signifying chain is broken, argues that “signs of the real” have come to replace reality itself; we are lost in the process of signification without any recourse to a reality outside of them. This, for Baudrillard, nevertheless has the same effect, for within our hyperreal existence, “illusion is no longer possible, because the real is no longer possible” (38). Baudrillard further asserts that the “unreal is no longer that of a dream or of fantasy, of a beyond or within, it is that of a *hallucinatory resemblance of the real with itself*” (142). The previously dreamlike unreal is not only existent in the postmodern age but bears a “hallucinatory resemblance”

to the real. The unreal—with hallucinations in mind, shall we say—is no longer externalized or localized inside the mind. It exists as an integral part of the hyperreal in which hallucinations of the real, thus far deemed clinically to be unreal, are indistinguishable from the real, which is in itself hallucinated. Hallucinations, in Baudrillardian hyperreality, are not clinical indicators but are integral to the “schizophrenic vertigo” that is the general cultural experience of the late twentieth century (152).

That both commentators resort to ideas of schizophrenia and hallucination is interesting, and there is obviously an amount of cross-contamination going on here, as critics within a field tend to bounce off each other’s perceptions and engage in similar practices, but what becomes evident are the ways in which—protestations to the contrary—they are in effect *diagnosing* the cultural milieu of postmodernism with schizophrenia.<sup>2</sup> Without making generalized assertions about a society that is itself (and always has been) heterogeneous to a greater or lesser extent, it is worth briefly summarizing the diagnostic psychiatric approach to schizophrenia with the postmodern condition in mind, and which has not changed significantly between the fourth and fifth editions of the *Diagnostic and Statistical Manual of Mental Disorders* (generally referred to as *DSM-IV* and *DSM-V*): “disorganized speech,” “hallucinations,” “delusions,” “grossly disorganized or catatonic behaviour,” and the broad spectrum “negative symptoms.” We see in the disorganized speech criteria Jameson’s appropriation of Lacan, but Baudrillard’s definition of the hyperreal is perhaps more properly an element of the hallucinations criteria, in the sense that the perception of unreality he discusses originates in the strange uncanny doubling of reality taking on its own appearance, without actually being real. One would be, quite literally, seeing things that aren’t there while believing that they were, and it is the lot of a postmodern, hyperreal society to do precisely that—to come to have a delusion, a belief in the reality of the illusion of the real that has replaced and removed the real itself.

## PSYCHIATRY & HALLUCINATIONS

How did psychiatry reach its current conclusions on the abnormality and unreality of hallucinations? Richard P. Bentall provides an excellent introduction into the evolution of the syndromes comprising the *psychoses*.<sup>3</sup> The origin of classification began with Emil Kraepelin in 1887, who stated in his *Textbook of Psychiatry*:

Judging from our experience in internal medicine it is fair to assume that similar disease processes will produce identical symptom pictures, identical pathological anatomy and an identical aetiology. If, therefore, we possessed a comprehensive knowledge of any of these three fields—pathological anatomy, symptomatology, or aetiology—we would at once have a uniform and standard classification of mental diseases. (qtd. in Bentall 12)

Kraepelin attempted to classify disorders of mental processes, terming psychotic disorder under the umbrella phrase *Dementia Praecox*. *Dementia Praecox*, as Bentall states, was characterized by “irreversible deterioration” of cognitive and social functioning and consisted of delusions of persecution or grandiosity, inappropriate or absent emotional responses, “stereotyped behavior,” for example catatonic posturing, problems with attention, and crucially, hallucinations—primarily auditory or tactile (15). The term schizophrenia did not come into classificatory existence until Bleuler, writing around 1911, who attempted to unify the disorder with four key features, listed by Bentall as the “four As”—loosening of associations, ambivalence, autism, and inappropriate affect (23–24). Karl Jaspers followed Bleuler in distinguishing between psychoses, defined by “ununderstandability” (meaning that observers cannot relate to the beliefs of the psychotic individual), and neuroses, explainable through psychological analysis. For Jaspers, the distinction was clearly between “two apparently irreconcilable methods of comprehending mental symptoms: *understanding* and *explaining*” (Bentall 28). Finally, Kurt Schneider founded the keystones that hold fast to current diagnosis of psychotic disorders. Schneider was one of the first documented clinicians to assert that the form of a given symptom was more important diagnostically than the content—thus creating the foundation of contemporary psychiatry, designating the patient as a collection of symptoms rather than a unique person with diverse experiences. Schneider, again as documented by Bentall among others, famously developed a theorem of schizophrenia consisting of what he termed first rank symptoms: “all forms of hallucination, delusion, or passivity experience” (Bentall 31).<sup>4</sup> Schneiderian first rank symptoms remain one of the primary diagnostic indicators of the psychotic illness schizophrenia.

Despite these attempts to simplify psychoses into clinical categories, the diagnostic criteria for the large variety of psychoses which now exist, including various forms of schizophrenia, are vast. As Assen Jablensky asserts, even the most recent, vastly extended editions of the World Health

Organization's *International Classification of Diseases (ICD-10)* and the *DSM-IV* (replaced in 2013 with the *DSM-V*) are unable to confidently and cohesively classify or even account for the non-schizophrenic psychotic disorders. He concludes that neither "DSM-IV nor ICD-10 provides, presently, adequate diagnostic criteria and classification for this group of disorders," after detailed exploration of a range of these type of acute, often reactive, and transient psychotic disorders (330).

What links these existent but debated syndromes, as well as the schizophrenic disorders and affective psychoses, is the potential presence of hallucinations. Hallucinations are clinically differentiated from illusions and misperceptions. Sims et al., in *The New Oxford Textbook of Psychiatry* (situating these occurrences firmly within a neurobiological framework), write first on perception:

Perception is a complex process which is not restricted to the screening of physical signals by sense organs but implies the processing of these data to represent reality. Ideas from structuralism, constructivism, and the philosophy of mind have influenced psychiatric concepts of perception and the constitution of reality ... recently the distinction between sensory screening and interpretative mentation has been confirmed by neurocognitive research. (56)

At first glance this definition of perception appears to acknowledge the idea of a subjective reality—after receiving sensory perceptions, they are interpreted to construct a reality. As individuals automatically perceive and process all of the time, reality is formed by a continual progression of reception, processing, and construction. Where, however, is the boundary drawn between normal and abnormal perception? In *Symptoms in the Mind*, Sims expands on the definition of perception to differentiate between sense perception, imagery, and fantasy—for example, the multiplicity of levels of consciousness involved in daydreaming forms a "highly complex experience which we have when direct perception is mixed with the interpretation of these perceptions: intrusion of associated memories; fantasies; evanescent sights, sounds and smells" (92). These perceptions become abnormal under two categories: "*sensory distortions*, where a real perceptual object is perceived distorted, and *false perceptions*, where a new perception occurs which may or may not be in response to an external stimulus" (93). Misperceptions come under the category of sensory distortions, while illusions and hallucinations fall under the heading of false perceptions. Illusions differ from hallucinations in the sense that they are

“based on a percept of a real object or event, which is misinterpreted, usually in accordance with a mood or special theme” (Sims et al. 57). Illusions are different from daydreams, misperceptions and so-called functional hallucinations, and occur in the normal population frequently and without pathologization (Sims 96–97).

In contrast to illusions, hallucinations are to be understood as, to quote the most oft-cited definition, a “perception without an object (within a realistic philosophical framework) or as the appearance of an individual thing in the world without any corresponding material event (within a Kantian framework)” (Sims et al. 57; Sims 98).<sup>5</sup> Sims goes on to identify three primary etiological theories of hallucinations, all of which are qualified by neurological experiments involving, among other things, sensory deprivation and the neural pathways in the temporal and occipital regions of the brain:

- 1) overstimulation affecting different levels of information processing;
- 2) failure of inhibition of mental functions;
- 3) distortion of the processing of sensory information at the interpretive level. (Sims et al. 58)

Sims et al. continue:

The role in the production of hallucinations of the post-sensory interpretation and evaluation of stimuli is uncertain. In these terms hallucinations are a sort of deception, but this is not a sufficient description of their nature. Recent neurophysiological hypotheses and findings from neuroimaging studies have suggested that there is an “inner censorship” which deals with the ambiguities of perception by setting hierarchies of contingencies. (58)

The interpretation and evaluation of stimuli after the sensory perception is a psychological process rather than a biological one.

Psychological models place hallucinations at the center of a person’s *experience* rather than designating them as merely some form of neurological short circuit. These models are perhaps more applicable to the postmodern existence explored by postmodern authors than the potentially reductive neurological and biological models. Bentall explores a number of psychological theories regarding hallucinations. Firstly, drawing on John Strauss’s work, he asserts that “hallucinations exist on a continuum

with normal mental imagery” (353). This assertion is fundamental to the studies he then examines. With specific focus on the most commonly found type of hallucination, Bentall argues that, given the evidence suggesting that a considerable number of the general population have been found to experience auditory hallucinations, the key to developing a psychological model of hallucinations could lie in three main areas.<sup>6</sup> First, Bentall acknowledges that “patients’ beliefs about their voices may influence how they are experienced”; hence, if the voices are positive and unobtrusive, patients are more likely not to feel they are pathological or seek help (Bentall 355–56). Second, he maintains that contrary to clinical definitions of hallucinations, which fundamentally rely on the perception-without-stimulus assumption, external stimuli—particularly lack of, in terms of sensory deprivation—have a significant effect on the intensity and duration of hallucinatory experiences (357–58). Third, he recognizes that stressful events, in particular bereavement, can induce hallucinatory experiences in previously well people (358–60). These three factors lead Bentall to conclude that there may be a degree of *self-induction* to the hallucinatory experience, at the level of inner speech and source monitoring (our ability to differentiate between interior thoughts and feelings and the exterior world around us). Bentall’s model suggests that when there are dysfunctions in source monitoring, hallucinations can occur at varying levels along the scope of experience—“hallucinations arise from an error of judgment rather than an error of perception.... hallucinating can be explained in terms of the same kinds of mental processes that affect normal perceptual judgments” (367). In comparison with the biochemical model described above, here it is an individual’s processing and evaluational skills that are crucial to hallucinatory experience, rather than a neurochemical misfire.

The depathologized idea that hallucinatory experiences exist on a continuum is particularly relevant to the idea of a postmodern psychosis, evoked in postmodern fiction and cultural theory, which suggests that previously pathological distinctions between real (absence of psychosis) and unreal (psychosis) are now less clear than we initially perceived. Bentall states that in western societies, “where scientific materialism prevails, the need to distinguish between what is ‘real’ and what is ‘imaginary’ seems self-evident, whereas, in less materialistic cultures, this distinction is less important” (356). Bentall sounds almost like a postmodernist here, suggesting that the models of hallucinations *contra* reality are not objectively true but rather products of a particular cultural mindset.

Returning to John Cutting's definition of hallucination cited above, which consists of seeing hallucinations as *perceptual* abnormalities, a problem of regarding patients' evaluations of their perceptual experiences as real/unreal is identified by Sims et al.: "Although some hallucinating patients mistake a hallucinatory perception for a realistic one, others can differentiate them; there is an 'as if' quality even when patients assert that they perceive real objects or events" (57). In order to formulate a definition of hallucination that accounts for patients' abilities to differentiate between the unreality of their hallucinations and the reality of actual perceptions, Sims et al. draw on further definitions.<sup>7</sup> In Sims's own text, briefly examining the psychological models proposed by Bentall, he asserts that one of the "simplest facts about hallucinations is often one of the most difficult to comprehend. That is, to the patient, what the doctor calls a hallucination is a *normal sensory experience*. Subjectively, therefore, a hallucination is indistinguishable from a normal percept" (Sims 98). Hallucinations are experienced in the same manner as any other sensory perception, and what differs is the individual's ability to discriminate between a so-called real percept and a hallucinatory one.

For those patients who do not differentiate their experiences as unreal, how can it be argued unequivocally that their hallucinations are not real? They are absolutely existent to that person at that time, despite some differentiation by individuals. As we have already seen, in postmodern cultural theory, the term reality, even the existence of any definable real, has become contentious, and Baudrillard in particular questions the status and nature of reality in the postmodern age, using hitherto purely psychiatric terminology and concepts as cultural critique. As a result, it is to some degree no longer possible to assert that there is a collective, correct, objective reality, nor to distinguish between a hallucinatory experience and a real one. A more accurate phraseology with reference to the (un)reality of hallucinations in the postmodern age could be the inclusive, non-hierarchical categories of shared perceptions and individual perceptions. Through the common clinical use of the term *false perceptions* in relation to hallucinations, the binaries of real/unreal, true/false, existent/absent, are immediately evoked as fixed and correct. In postmodern fiction and cultural theory, such binaries are deconstructed and exposed as part of a hierarchical power system that exists in order to maintain the capitalist status quo, and hallucinations form a core component of how this manifests within Pynchon's works. In such works, hallucinations are no longer clinical indicators of psychotic illness but existent and integral parts

of postmodern life and obviously do not manifest the discrete hallucinatory modalities described by psychiatrists.

### PYNCHON AND PARANOIA

Brian McHale's *Postmodernist Fiction* asserts that postmodernism is primarily an ontological category of literature, in the sense that, where modernist texts were epistemological (focused on knowledge), postmodern texts foreground a concern with what reality is. As if to prove McHale's point, at least in theory, postmodern literature abounds with examples of potentially psychotic characters, those who are delusional or hallucinate, or those who cannot determine any form of absolute meaning. Despite the problems of delineating between modernism and postmodernism in this manner, this concern with the ontological within postmodern fiction seems merited, particularly in relation to Pynchon's fictions. Indeed, Pynchon's characters, especially in his earlier works, are emblematic of, if not responsible for, this trend.<sup>8</sup> For example, Oedipa Maas, the protagonist of *The Crying of Lot 49*, is unable to distinguish between reality and fantasy; Slothrop, in *Gravity's Rainbow*, is unsure who is controlling his responses to the world; and in *V*, Herbert Stencil is never quite sure who, or indeed what, the mysterious "V" is meant to be despite his ongoing search.

However, another trend exists within Pynchon's works, concerned not with those who are unsure of reality, but with those who ostensibly determine it. A recurrent feature of much of his early fiction is the role that psychiatrists and psychologists have in determining what is perceived to be real and normal, as opposed to what is considered to be unreal or abnormal, and which manifests itself in later works as an explicit engagement with psychiatric definitions. As such, psychiatry and psychiatrists are characterized, even caricatured, in his works as being concerned with defining what reality is, believing that they are capable of codifying and controlling the world, even if they are often proved wrong. Given the prevalence of mind-altering substances and mind-controlling doctors in Pynchon's work, it is unsurprising that he is credited by the *Oxford English Dictionary* with the first literary mention of psychiatrists as "shrinks" in *The Crying of Lot 49*, a signal perhaps of the contempt in which he holds their tendency to reduce human experience to a set of symptoms.

Evidently, psychiatrists in Pynchon's work are farcical if not dangerous, and often both. In works such as *Lot 49* and *Gravity's Rainbow*, the psychological disciplines are targeted by Pynchon precisely because they assert control over an individual's sense-perceptions. Dr. Hilarius in *Lot*

49 conducts drug trials on his patients involving LSD and, as he tells Oedipa, “with the LSD, we’re finding, the distinction [between reality and madness] begins to vanish.” Hilarius chooses “to remain in relative paranoia,” his persecutory delusions stemming from his persecution of Jews in Buchenwald, whom he used in “experimentally-induced insanity” (94, 95). In the later *Gravity’s Rainbow*, the representatives of psychiatry are the Pavlovians, who are trying to control the world through conditioning. As Pynchon phrases it,

Pavlov believed that the ideal, the end we all struggle toward in science, is the true mechanical explanation. He was realistic enough not to expect it in his lifetime. Or in several lifetimes more. But his hope was for a long chain of better and better approximations. His faith ultimately lay in a pure physiological basis for the life of the psyche. No effect without cause, and a clear train of linkages. (89)

This definition is provided by one such Pavlovian with “faith” in a “pure physiological basis for the life of the psyche,” Pointsman, who is later explicitly described in terms of control:

He is the pointsman. He is called that because he throws the lever that changes the points.... The pointsman has made sure we’ll go there. He hardly has any work at all. The lever is very smooth, and easy to push.... That is because he knows just where the points and the lever are. He is the only kind of man who puts in very little work and makes big things happen, all over the world. (644–65)

Pynchon’s suspicion of the level of power/control that Pointsman possesses reveals why the concept of paranoia has been dealt with extensively in criticism of his work over the last forty years; through conditioning and control such characters act ostensibly as fulcrums within the text, determining other characters’ actions. However, as Leo Bersani notes in “Pynchon, Paranoia, and Literature,” “All the paranoid thinking in [*Gravity’s Rainbow*] is probably justified, and therefore—at least in the traditional sense of the term—really not paranoid at all” (101): it’s not paranoia if They are really out to get you.<sup>9</sup> This indeterminate They, for Pynchon, is always concerned with power and control, and psychiatrists always work on Their side, leading the reader to question whether paranoia, delusions, and hallucinations might in fact be a measure of social control: “I mean what They and Their hired psychiatrists call ‘delusional systems.’ Needless to say, ‘delu-

sions' are always officially defined. We do not have to worry about questions of real or unreal. They only talk out of expediency. It's the *system* that matters" (*Gravity's Rainbow* 638). This system that Pynchon criticizes leads us back to postmodern theory in the sense that he evinces a concern with what Lyotard calls metanarratives: totalizing definitions of the world that assert their own validity at the expense of any other understandings. For Lyotard, this can refer to religion, politics, or any other mode of thinking that brooks no argument. Psychiatry can obviously be perceived as one such system precisely because of the ways in which individuals can be considered unresponsive to treatment or a difficult patient, or even called in denial over disagreements with the practitioner's view of the situation.

What Lyotard says can be interpreted in a more particular manner, however, for "incredulity toward metanarratives" can be interpreted as a suspicion toward sources (xxiv). That is, one can see in Lyotard, in his concerns of representing "the unrepresentable in presentation itself," a suspicion toward totalitarian worldviews and a vaunting of the hallucinatory experience (81). In Pynchon's work, the classic example of this suspicion is Oedipa's inability to determine the truth of the Tristero conspiracy. Throughout the text, she searches for evidence of some hidden organization working against the established US postal service. She sees their symbol, a muted post horn, in the most unlikely places, but by the end of the text she remains unsure:

She had heard all about excluded middles; they were bad shit, to be avoided; and how had it ever happened here, with the chances so good for diversity? For it was now like walking among matrices of a great digital computer, the zeroes and ones twinned above, hanging like balanced mobiles right and left, ahead, think, maybe endless. Behind the hieroglyphic streets there would either be a transcendent meaning, or only the earth. In the songs ... was either some fraction of the truth's numinous beauty ... or only a power spectrum.... Ones and zeroes. So did the couples arrange themselves.... Another mode of meaning behind the obvious, or none. Either Oedipa in the orbiting of a true paranoia, or a real Tristero. (*Crying* 181–82)

Is Oedipa seeing things that aren't there? Is she paranoid about the control that Pierce Inverarity, whose estate led to these discoveries, has over the world? Oedipa is forced to question every event and person she experiences and encounters, unable to believe in their theories or the signs she

has to point her in various directions, such signs existing as only empty, misleading simulacra.

However, although readers might dismiss Oedipa as psychotic or drug-addled, perhaps the problem is not within her, but in the world outside. Oedipa wants to learn the truth, but never stops to consider that there may not be a truth to find. In all these “ones and zeroes” that she sees as options, she cannot find the “excluded middles.” Importantly, these excluded middles and ones and zeroes recur in *Gravity’s Rainbow*, in the figure of the psychiatrist Pointsman:

But in the domain of zero to one, not-something to something, Pointsman can only possess the zero and the one. He cannot, like Mexico, survive anyplace in between. Like his master I. P. Pavlov before him, he imagines the cortex of the brain as a mosaic of tiny on/off elements. Some are always in bright excitation, others darkly inhibited. The contours, bright and dark, keep changing. But each point is allowed only the two states: waking or sleep. One or zero. “Summation,” “transition,” “irradiation,” “concentration,” “reciprocal induction”—all Pavlovian brain-mechanics—assumes the presence of these bi-stable points. But to Mexico belongs the domain *between* zero and one—the middle Pointsman has excluded from his persuasion—the probabilities. (55)

Pynchon seems to be arguing that although the chances may once have been “good for diversity,” it is Pointsman and “their” system of delusions that now control how reality works or, at least, is understood. The world has become a binary system of reality/illusion, “We” versus “They,” and the danger the reader faces when they try to “diagnose” Oedipa as psychotic or not, is that they must buy into such a binary system. That is, both Pointsman and Oedipa fall into the same trap, and so too can the reader if they fail to hold their desire for answers in check.<sup>10</sup>

Such a need for answers, and for the lies that such so-called truths perpetuate, abound in Pynchon’s fiction: In *V*, the notion of “sewer stories”—“They just are. Truth or falsity don’t apply”—is indicative of a sense that answers are sometimes irrelevant or at the very least contingent and partial (120). Later on, the narrator tells us that “the same motives which cause us to populate a dream-street also cause us to apply to a rock human qualities like ‘invincibility,’ ‘tenacity,’ ‘perseverance,’ etc. More than metaphor, it is delusion” (325). Strong (psychological) words, indeed. Yet, continuing, he writes,

Living as he does much of the time in the world of metaphor, the poet is always acutely conscious that metaphor has no value apart from its function; that it is a device, an artifice. So that whilst others may look on the laws of physics as legislation ... [his] kind are along with the task of living in a universe of things which simply are and cloaking that innate mindlessness with comfortable and pious metaphor. (V 325–26)

In this binary of art as “comfortable and pious metaphor” versus science as “legislation,” Stencil is an unreliable narrator, and this is not so much a statement of fact, but a statement of attempting to superimpose a sense of facticity over chaos, and links very clearly back to Pynchon’s concern with excluded middles.

The nature of “excluded middles” throughout his fiction is to demonstrate that binary oppositions miss the very real point of experience. They are found, more or less explicitly, throughout his fiction, and generally imbricated in the discourse of psychiatry. For example, in *Against the Day*, hallucinations are mentioned when a character suffering from lapses in memory seeks answers:

It would’ve helped if he could remember, but all he could produce was this peculiar haze. The experts he went to for advice had little to tell him. “Past lives,” some assured him. “Future lives,” said other confident swamis. “Spontaneous Hallucination,” diagnosed the more scientific among them. “Perhaps,” one beaming Oriental suggested, “it was hallucinating you.” (37)

This is a classic Borgesian inversion of what would constitute reality to the individual; hallucinations, here, might not necessarily be the product of an individual inability to comprehend reality, as a somewhat traditionalist viewpoint would have it, but an integral component of that reality itself: it might be the case (although note that it is presented as an option, not a *diktat*) that reality is itself “hallucinating” our perceptions of it.

Another example, from Pynchon’s most recent novel *Bleeding Edge*, again reveals his awareness of psychiatric definitions and his attempts to emphasize their constructedness. Early on in the text, the reader is presented with a flashback by Maxine Tarnow, the protagonist, where she went on a cheap cruise and only later discovered that it was cheap because it was hosting AMBOPEDIA Frolix ’98, “a yearly gathering of the American Borderline Personality Disorder Association” (12). This fictional organiza-

tion has something of an unofficial anthem, Madonna's "Borderline," and visits "literal geographical borderlines, a different one every year" (13, 15):

Shopping tours at Mexican *maquiladora* outlets. Gambling-addiction indulgence at the casinos of Stateline, California. Pennsylvania Dutch pig-outs along the Mason-Dixon line. This year the destination borderline is between Haiti and the Dominican Republic, uneasy with melancholy karma dating back to the days of the Perejil Massacre, little of which has found its way into the brochure. (15–16)

In this section, Pynchon demonstrates a familiarity with the diagnostic criteria at that time, referencing both the *DSM* (a made-up disorder, "Generic Undiagnosed James Bond Syndrome ... hasn't made it into the *DSM* yet, but they're lobbying, maybe the fifth edition") and the *ICD-9* ("the 301 point 83 in the relationship"), and riffs on literal and metaphorical borders (14). This awareness is inflected through consumerism and conflict, and Pynchon knowingly alludes to the fact that borders serve to divide, although they are porous; the fact that he calls the organization the macaronic "ambopedia" (*ambo*- Latin "both", *-pedia* Greek "related to learning") implies that there is knowledge of both sides to be found at the border, and thus borderlines and excluded middles as contested territories are, perhaps, not so far apart as one might think.<sup>11</sup>

In short, and where we want to conclude this all-too-excluded muddle of Pynchonalia, is with the notion that this is precisely Pynchon's point. Oedipa, like a number of Pynchon's other characters, cannot determine what is true and what is not because she does not know which sources to trust. She is, in a strict sense of the term, "hallucinating" the world around her because she has lost her ability to source-monitor. As stated earlier, "it is our processing and evaluational skills that are crucial to hallucinatory experience, rather than a neurochemical misfire," and this is why Oedipa finds herself in the predicament she does: she cannot trust any of the options laid open to her, and Pynchon endeavors to replicate this, to varying degrees, in the reader's perception of his fictions. Yet her solution to it, searching for meaning in either one or zero, misses the point and indeed compounds the error. Rather, Pynchon perhaps expects us to live with this insecurity and perhaps even relish it, for that means the world is not quotidian, not divided into "We" and "They," and not reducible to a mere "hallucination," to return to the world not believing that there is meaning *behind* it, but *in* it, like the "lightning-struck" of *Gravity's*

*Rainbow*, which should perhaps be read with the DSM characteristics of schizophrenia, and Baudrillard's notion of simulacra, in mind:

It will *look* like the world you left, but it'll be different. Between congruent and identical there seems to be another class of look-alike that only finds the lightning-heads. Another world laid down on the previous one and to all appearances no different, Ha-ha! But the lightning-struck know, all right! Even if they may not *know* they know. (*Gravity's Rainbow* 664)

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## NOTES

<sup>1</sup> Using Pynchon as a cultural lodestone of postmodernism, more particularly an Anglo-American formulation of postmodernism, is of course potentially dangerous, for no one writer could emblemize the array of concerns that are covered by the term "postmodernism." That said, the prevalence of Pynchon on modules on postmodern literature—normally under the guise of his early novella *The Crying of Lot 49*—is indicative of the way in which his blend of cultural ennui, zany humor, and individual confusion in the face of consumerism and competing *weltanschauungen* has become a common perception of post-modern culture.

<sup>2</sup> One might also consider Deleuze and Guattari's two-volume *The Anti-Oedipus: Capitalism and Schizophrenia* in this light, as part of a diagnosis of late capitalist or postmodern society.

<sup>3</sup> Bentall's summary can be found in *Madness Explained* (3–40). For a broader summary of the historical origins of mental illness and psychiatry, see Shorter. Also of interest is Pichot's "The History of Psychiatry as a Medical Speciality," which reveals an inherent insecurity among contemporary psychiatrists that due to the developments of the past 50 years they are losing much of their authority and axial status within the multi-disciplinary teams that now operate to care for psychiatric patients.

<sup>4</sup> Bentall provides a clear table of Schneider's first rank symptoms (table 2.1, 32–33).

<sup>5</sup> This definition originates in Cutting. It is worth noting that Cutting's definition clearly relies upon a pre-existing definition of "realistic" frameworks and what constitutes a "material" event.

<sup>6</sup> See Johns for a detailed analysis of the evidence suggesting that hallucinations occur in non-psychotic persons.

<sup>7</sup> One such definition comes from Werner Janzarick, who according to Sims et al. "defined hallucinations, without associating them with perception at all, as 'free running psychic contents,'" a definition that is woefully non-specific (57).

<sup>8</sup> That is, McHale utilizes Pynchon's fictions to illustrate this tendency, thereby causing something of a tautological double bind to the proposition.

<sup>9</sup> Paranoia is a recurrent theme of Pynchon criticism, but, to qualify this pre-established paradigm, perhaps it is more the case that readers are thereby focusing on the symptom rather than the cause. That is, paranoia is the observable symptom of Pynchon's perception of society. In this sense, he uses the trope of hallucination because it embodies the inherent

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difficulties in source-monitoring and sense perception at play in a character's immediate perception of "reality" that then becomes reflected in their condition of "paranoia."

<sup>10</sup> Duyfhuizen gives a useful example of one reading that inherently links hallucinations to "reader-traps."

<sup>11</sup> Given Pynchon's demonstrated knowledge of the diagnosis, one might wonder at the title of the novel itself, bleeding edge referring to cutting edge technologies that are untried and untested but, equally, to the self-harming behavior that is a core component of the apparent Borderline Personality Disorder diagnosis. But what of the significance of the ship's name, the *Aristide Olt* (a stage name of Bela Lugosi), or the fact that it is a "Hungarian tramp container vessel ... sailing under a Marshallese flag of convenience" (12)?—does this have a related meaning or, like all Pynchon's puns, does it force the reader to question any overly simplistic interpretation?

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