

Language, prejudice, and the aims of hermeneutic phenomenology: terminological reflections on “mania”

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Summary

In this paper I examine the ways in which our language and terminology predetermine how we approach, investigate and conceptualise mental illness. I address this issue from the standpoint of hermeneutic phenomenology, and my primary object of investigation is the phenomenon referred to as “mania”. Drawing on resources from classical phenomenology, I show how phenomenologists attempt to overcome their latent presuppositions and prejudices in order to approach “the matters themselves”. In other words, phenomenologists are committed to the idea that in our everyday, natural attitude, we take for granted a number of prejudices and presuppositions that predetermine how we conceive of and understand what we experience. In order to properly approach the phenomena themselves, we need to find ways of neutralising our presuppositions and prejudices in order to develop new (and hopefully more accurate) accounts of the phenomena under investigation. One of the most popular examples of such an attempt at neutralisation is what Edmund Husserl calls the epoché, which is the practice of bracketing out or suspending presuppositions. However, later phenomenologists developed alternative approaches. Martin Heidegger, for instance, engaged in etymological analyses to discover latent meanings in our language and terminology. Hans-Georg Gadamer also engaged in historical analyses of how our traditions sediment into latent prejudices. After discussing the various ways in which phenomenologists have attempted to neutralise presuppositions and prejudices prior to engaging in their inves-

tigations, I apply some of these principles and methods to the domain of psychopathology, and discuss some of the prejudices inherent in contemporary discussions of the phenomenon of mania. I examine recent attempts to link the phenomenon that we today refer to as “mania” with the ancient Greek concept of “μανία” (mania), and argue that the practice of linking contemporary and historical concepts can be detrimental to attempts at reclassifying disorders. In addition, I consider the implications of the shift in terminology from “manic depressive illness” to “bipolar disorder” – especially how conceiving of mania as one of two “poles” predetermines its description by both clinicians and patients. Finally, I address the implications of the headings under which mania and bipolar disorder are discussed within diagnostic manuals. For example, I discuss the removal of the headings of affective and mood disorders in the DSM-5, and the explicit decision by the authors to place bipolar disorder between depressive disorders and schizophrenia. What I aim to accomplish in this paper is not so much a phenomenological investigation of mania as it is a pre-phenomenological investigation. In other words, I offer a preparatory investigation of the phenomenon (or phenomena) referred to as “mania” in contemporary discourse, with the intention of laying the groundwork for further phenomenological and psychological research.

Key words

Phenomenology • Hermeneutics • Prejudice • Mania • Nosology

Introduction

What is “mania”? What is its relationship to moods? Is it itself a kind of mood? Or is it perhaps a change in the way that we have moods? Should it be understood as the polar opposite of depression, or is the relation between these two phenomena more subtle and complex? These are some of the guiding questions that must be asked before engaging in a phenomenological investigation of mania. One of the basic tenets of phenomenology is that we cannot elucidate a phenomenon until we have asked after it in the right way.

In light of this introduction, I should make clear what the aims of this essay are, and what they are not. I do not offer

a *psychological* phenomenology of mania, understood as a rich and systematic description of what it is like, or what it feels like, to be manic. Instead, I offer a *philosophical* phenomenology of mania or, to be more precise, a pre-phenomenological investigation of what we refer to as “mania”. While philosophical phenomenology is typically understood as an account of the essential characteristics of human subjectivity, existence, or being in the world, there is an important preparatory stage to any phenomenological investigation. This preparatory stage can be conducted in various manners, but is generally concerned with the suspension of latent prejudices that threaten to lead a phenomenological investigation down the wrong path.

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When applied to the domain of psychopathology – and specifically to the phenomenon referred to as “mania” – such an investigation is concerned with unearthing and making explicit the latent presuppositions and prejudices of researchers and clinicians, as well as mental health service users and the general public. By unearthing and making explicit such presuppositions, one is better able to uncover and engage with the phenomenon of mania itself, rather than engaging with the preconceived notions that cover over the phenomenon in question.

This article is structured in four parts. First, I briefly distinguish psychological from philosophical phenomenology in order to better situate my own project within the interdisciplinary field of phenomenological psychopathology. Second, I explain how phenomenologists prepare their investigations by attending to latent prejudices that might predetermine their accounts in problematic ways. Third, I offer an illustration of how phenomenologists attend to such presuppositions by briefly describing some of the ways that Heidegger and Sartre attend to linguistic prejudices prior to engaging in their phenomenological investigations. Fourth, I apply some of these methods to the phenomenon (or phenomena) referred to as “mania” in contemporary psychiatric discourse. I discuss some of the prejudices that predetermine how we conceptualize and approach mania, with the intention of laying the groundwork for phenomenological investigations of manic subjectivity.

Two senses of phenomenology

Before we can properly engage in a phenomenological or a pre-phenomenological investigation of mania, we need to clarify what phenomenology is. There are many ways that we might distinguish among different kinds of phenomenology. However, the distinction most central to this article is between *philosophical* phenomenology and *psychological* phenomenology^a – by which I refer to phenomenology as practiced throughout the human and social sciences, including the medical sciences. Both kinds of phenomenology are used to approach human consciousness and subjectivity, and both approach it in a manner that is qualitative rather than quantitative. Where they differ is in their methods and aims.

Psychological phenomenology typically consists of qualitative studies of lived experience gathered through first-person reports, structured and semi-structured inter-

views, or questionnaires. The aim of such studies is to give a rich descriptive account of “what it is like” to have a certain kind of experience; such as what it is like to be a single mother in the United States, or what it is like to be a cancer survivor. The psychological phenomenologist will take up her qualitative data and engage in a thematic interpretation, looking for primary themes that run through most, if not all, of the reports supplied by her study participants.

Philosophical phenomenology, by contrast, is comprised of a number of methodological tools – including the *epoché*, the reduction, and imaginative variation. These tools are used to delineate essential features of human subjectivity such as affectivity, understanding, temporality, selfhood, and intersubjectivity. Many contemporary phenomenological studies of schizophrenia, for example, focus on the ways that selfhood, typically understood as an essential feature of human subjectivity, can become disrupted or disordered²⁻⁴. In order to properly account for such disruptions, phenomenologists differentiate among various levels of selfhood, pinpointing the level at which the disruption occurs. In addition, they might investigate the implications of this disruption of selfhood for other features and aspects of consciousness, including intersubjective relations, perception, and affectivity.

In spite of these differences between psychological and philosophical phenomenology, the two are not altogether unrelated. Their relationship can be clarified by attending to the distinction between *evidence* and *subject matter* in each discipline. In the case of psychological phenomenology, the subject matter is what it is like to have a certain kind of experience. The evidence, on the other hand, is found in the data derived from first-person reports, interviews, and so on. By contrast, the subject matter of philosophical phenomenology consists of the essential features of human existence, subjectivity, or consciousness. The evidence used in philosophical phenomenology sometimes consists of first-person reports of lived experience, but might also consist of thematic accounts of what it is like to have certain kinds of experiences, such as those produced by qualitative researchers. In other words, the *subject matter* of psychological phenomenology can play the role of *evidence* in philosophical phenomenology.

It is important to keep these distinctions in mind, especially in light of the interdisciplinary nature of phenomenological psychopathology, which often incorporates both psychological and philosophical phenomenology

^a There is also a form of phenomenology that is sometimes referred to as “phenomenological psychology.” This is typically characterized as a philosophical phenomenology that is nonetheless consistent with naturalism and the sciences of the mind (rather than being consistent with transcendental philosophy). Because this kind of phenomenology is not particularly relevant to the current investigation (and risks unnecessary confusion with psychological phenomenology) I will not discuss it further within the context of this essay. For further reading on this subject, see Husserl’s *Phenomenological Psychology*¹.

(and sometimes a bit too fluidly). The particular aims of this essay fall into the latter camp, being more of a philosophical than a psychological investigation into the phenomenon of mania. In addition, it can be referred to as a pre-phenomenological investigation, insofar as its primary aim is to *prepare* for a proper investigation into the phenomenon of mania. However, these kinds of preparatory investigations have always made up a core component of philosophical phenomenological research.

Prejudice, history, and sedimentation

The phenomenological preoccupation with prejudices began with Edmund Husserl’s attempt to suspend or bracket his own metaphysical (and especially naturalistic and scientific) prejudices about the nature of the mind or human subjectivity. He achieved this by developing what he called the *epoché*⁵. While his concept of the *epoché* developed and transformed throughout his philosophical career, it can be characterized as a shift from the natural attitude (in which we take our metaphysical prejudices for granted) to the phenomenological attitude (in which we critically reflect upon the constitutive features that must be in place in order for our world to appear to us in the ways that it does). This change in attitude is also characterized by a shift away from a concern with *things* (broadly construed), and toward a concern with essential features of the phenomena on question.

In spite of the centrality of the *epoché* in Husserl’s works, it was not directly adopted by his successors, including Martin Heidegger, Hans-Georg Gadamer, Jean-Paul Sartre, and Maurice Merleau-Ponty. Nonetheless, each of these phenomenologists retained a general concern with and critical attitude toward prejudices – especially with how prejudices threaten to lead phenomenological and scientific investigations down the wrong track.

The post-Husserlian tradition that most clearly concerns itself with prejudices is hermeneutic phenomenology (or philosophical hermeneutics) as developed by Heidegger and Gadamer. While all phenomenologists study how the lived world is opened and made available up to us, hermeneutic phenomenologists are particularly interested in how our openness to the world is predetermined in particular ways. To put it another way, all phenomenologists are interested in the conditions for meaning in general; hermeneutic phenomenologists, however, are also inter-

ested in historical, cultural, and linguistic conditions for particular kinds of meaning^b. While conditions for meaning in general are typically referred to as transcendental, ontological, or existential structures, conditions for particular meanings are simply referred to as prejudices^c.

In everyday discourse, we typically understand prejudices as *negative* biases, or preconceived notions about particular people or cultures. While this sense is included in the hermeneutic notion of prejudice, the hermeneutic concept is both broader and deeper than the everyday sense of the term. Prejudices, according to hermeneutic phenomenologists, are not inherently negative. Gadamer, for example, defines prejudices as the “biases of our openness to the world”¹¹. The world is always opened up and made available to us through our prejudices, and it would be impossible to have any experience without them. While some prejudices certainly come with negative consequences – either for ourselves or for others – many prejudices are normatively neutral, or even positive.

A simple and straightforward example of prejudice is found in Merleau-Ponty’s discussion of a child who, entranced by a candle flame, reaches out and touches it¹². After burning his finger, the flame (and fire in general) has a different sense and appearance for the child – and this change lingers, perhaps for a lifetime. The once entrancing candle flame becomes repellant. In this case, there is good reason for the candle flame to be repellant, but this does not make the child’s newfound relation to the flame any less prejudicial.

A more complex account of the origin of prejudices is found in Young’s essay, “Throwing Like a Girl: A Phenomenology of Feminine Body Comportment, Motility, and Spatiality”¹³. In this essay, Young recounts Straus’s phenomenological and psychological study of feminine body comportment, including how girls and women comport themselves when playing sports. After considering a number of biological reasons for the differences in bodily comportment between girls and boys, Straus concludes that anatomy cannot account for the differences in comportment. Instead, he argues that there must be some feminine essence¹⁴.

Criticizing Straus, Young argues that his essentialist explanation is inadequate, and offers an alternative account involving the passing down of certain norms and values that govern the constitution of feminine behavior

^b This statement requires further clarification. It can be argued that the phenomenological study of prejudices already took full form in Husserl’s genetic and generative work^{6,7} in which he studied how our life-world offered new possibilities for scientific investigations in light of our inherited conceptual backgrounds and understandings. While I do not disagree with this claim, the hermeneutic turn of Heidegger and Gadamer is still more closely related to the project I am engaging in, if only for its explicit concern with language.

^c There is also another layer of phenomenological research that is typically referred to as modes. While I cannot offer a detailed account of modes in the space of this essay, I have offered accounts of modes in a number of other articles⁸⁻¹⁰.

and comportment. In this way, Young's account addresses prejudice in a double sense. First, she is critical of Straus's own prejudices that predetermine the kinds of answers he is willing to consider. Second, her alternative answer is to take seriously the role that cultural prejudices themselves play in governing our behavior and comportment.

Another term phenomenologists typically use when discussing the historical passing down of prejudices is "sedimentation." While we are constantly affected by cultural milieus and life events, some of the meaning-laden features of these milieus become fixed, constitutive features of our lived world, predetermining the kinds of meaning that will manifest for us. As Merleau-Ponty says,

Were it possible to unfold at each moment all of the presuppositions in what I call my "reason" or my "ideas," then I would always be discovering experiences that have not been made explicit, weighty contributions of the past and of the present, and an entire "sedimented history" that does not merely concern the genesis of my thought, but that determines its sense¹².

In this regard, "sedimentation" in phenomenology and hermeneutics has an analogous meaning to "sedimentation" in the Earth sciences. In the same way that a body of water carries along particles, the temporal and historical flow of human life carries along an array of meanings and meaningful events. And just as some of these particles deposit and become sediment that reshapes the landscape, some of the meaning-laden events in our life sediment into prejudices that reshape the form of our lived world. It is important to stress that while the term "sedimentation" brings to mind a sense of reification, this does not mean that what has sedimented is in any way inert. As Merleau-Ponty says, "this word 'sedimentation' must not trick us: this contracted knowledge is not an inert mass at the foundation of our consciousness"¹². Instead, the meanings and prejudices that have sedimented into our lived world orient us in particular ways, predetermining the kinds of sense and meaning that will be made available to us.

While the meaningfulness of life experiences in general can sediment into the prejudices of our lived world, one of the primary avenues for passing down such prejudices is through language. As Gadamer argues, language and discourse are always situated within an historical and cultural milieu. Our terms do not retain their meanings after migrating from one cultural milieu to another. Because their meaning is always situated or contextual, changes in context necessitate changes in meaning.

This insight has important implications for the study of historical concepts, including the study of historical notions of mental illness. However, before engaging in an investigation of the ways our language and terminology

prejudice the study of mania, it can be helpful to look at classical studies in phenomenology.

Two studies of prejudice: "subjectivity" and "imagination"

In order to illustrate how and why phenomenologists attend to linguistic prejudices, I here briefly address two examples. The first is Heidegger's bracketing of the term "subjectivity." The second is Sartre's concern with the presuppositions built into the term "imagination."

"Subjectivity" is often referenced as the subject matter of phenomenology. However, even this central term of phenomenology is not immune to the uncritical passing down of prejudice. In taking ourselves to be studying human subjectivity, we predetermine our approach to this phenomenon in at least three ways. First, the reference to "subjectivity" immediately brings up a subject-object dualism, which might be further qualified as a mind-body dualism. Second, it can bring with it the sense of being unscientific. Insofar as the aims of the natural sciences are to study *objective* phenomena, a study of the *subjective* is immediately characterized as an investigation that does not meet the standards of rigor inherent in these sciences. Third, the term carries with it a sense of singularity, or individuality. It presumes an isolated ego as the starting point of our investigations, which means that we will be required to give an argument for how this ego is capable of coming into contact with the world and with other egos.

While many psychological and even philosophical accounts of human existence presuppose the legitimacy of starting from an isolated ego, phenomenologists are typically critical of such a starting point. Husserl, for instance, shifted over the course of his career from privileging subjectivity to privileging intersubjectivity. Heidegger, for his part, was eminently critical of the prejudices that inhere in the terms "subjectivity" and "consciousness." He largely excluded these terms from his work, instead preferring the terms "being-in-the-world" or "*Dasein*" (which translates simply to "being-there")¹⁵. His reason for excluding the term "subjectivity" from his philosophical vocabulary was not that his subject matter was something other than subjectivity. Rather, he excluded the term because his ability to accurately characterize the phenomenon we attempt to refer to by the term "subjectivity" is jeopardized by the use of this term (for the reasons listed above).

It is important to note that none of these latent prejudices that inhere in the term "subjectivity" necessarily result in inaccurate portrayals of human existence. Rather, the phenomenologist's worry is that insofar as we remain unaware of such prejudices and allow them to uncritically seep into our phenomenological accounts of hu-

man existence, we always risk the repetition and further sedimentation of unjustified – and possibly inaccurate – portrayals of the phenomenon in question. Such a risk is something that phenomenologists are fundamentally opposed to, and they engage in a variety of methods developed for the purpose of unearthing, making explicit, and ultimately suspending or neutralizing such prejudices.

Another illustration of a phenomenologically preparatory investigation is found in Sartre’s book, *The Imaginary*¹⁶. Here, Sartre offers a detailed phenomenological and psychological study of imagination, images, and perception, with the aim of elucidating imagination in ways that extend far beyond standard philosophical and psychological portrayals of this phenomenon. However, as he makes clear in the opening chapter, a phenomenologist cannot simply jump into his investigation of imagination unprepared. To do so would be decidedly unphenomenological, risking the reiteration of latent, sedimented prejudices about imagination, perception, and subjectivity in general. If the goal of phenomenology is to bring us closer to “the matters themselves,” then such an unprepared investigation could hardly be called phenomenological, insofar as it promises to find in the phenomenon nothing more than what the investigator himself has already put into it.

Sartre opens his book by reflecting not on the phenomenon of imagination, but on what has been said of imagination and how the concept has been developed and repeated. As he says,

It is necessary to repeat here what has been known since Descartes: a reflective consciousness delivers us absolutely certain data; someone who, in an act of reflection, becomes conscious of ‘having an image’ cannot be mistaken. Undoubtedly there have been psychologists who affirm that we cannot, in the limiting case, distinguish an intense image from a weak perception¹⁶.

In short, imagination has been characterized – in both philosophy and psychology – as a degraded or diminished perception. It is simply a perception that has lost its vibrancy and is less distinct.

These characterizations are easily arrived at, repeated, and accepted because they are built into the very terminology employed in our investigations. By claiming that we are investigating “imagination” or a “mental image” we predetermine our account as one of a relation of consciousness to its object. An image, after all, is always an image of something. Images refer to whatever it is they are images of. If we uncritically take up these prejudices, then we necessarily approach imagination as “a certain way in which the object appears to consciousness, or, if one prefers, a certain way in which consciousness presents to itself an object”¹⁶. In other words, imagination

will be approached as a pseudo-perception, essentially involving an intentional relation between a subject and an object. What Sartre is trying to make clear is that this account of imagination is an assumption built upon tacit prejudices, rather than the outcome of a philosophically sound reflection on the phenomenon itself. And, until we become aware of these prejudices, we have little hope of discovering in imagination anything but what our prejudices have already placed there.

With this illustration of hermeneutic investigations we can begin to apply these tools to the domain of psychopathology, and specifically to the phenomenon or phenomena that we refer to as “mania.”

Mania: a preparatory investigation

Why do we require a hermeneutics of mania? It seems, after all, that we already have a substantial literature on descriptive accounts of mania from the ancient Greek physicians, to Kraepelin¹⁷, to the symptomatology provided in the DSM-5¹⁸. As I argue, however, it is precisely these kinds of accounts that we need to regard with a healthy skepticism, analyzing not only the descriptions of symptoms, but also the prejudices behind these descriptions. I here focus on three points of terminology and their prejudicial implications relevant to the production of a phenomenology of mania. First, I address the identification of today’s “mania” as described in the DSM-5 with “μανία” [mania] as discussed in ancient Greek medical texts. Second, I consider the implications of the shift in terminology from “manic depressive illness” to “bipolar disorder.” Third, I examine how the headings under which mania is discussed – such as “affective disorders” and “mood disorders” – predetermine the kinds of features we attend to in our investigations.

It is now commonplace in psychological and psychiatric discourse to invoke the 2,500-year history of “μανία.” As David Healy points out, such invocations are often presented in the opening lines of journal articles and textbooks on bipolar disorder and mood disorders¹⁹. These discussions add a sense of legitimacy to the disorder and its constitutive manic as well as depressive episodes (depression being similarly linked with the ancient Greek accounts of melancholia). In a time when each iteration of the DSM seems to shower us with an array of new disorders, many remain skeptical of the reality of these psychiatric constructs. In light of this, it is of paramount importance that one be able to establish the *reality* of the psychiatric construct upon which one stakes a career (not to mention one’s financial success, as in the case of the psychopharmaceutical industry). While many of these disorders have histories dating back mere decades (if even that), bipolar disorder seems to establish itself as

a phenomenon that has been with us for millennia. By pointing back to “μανία” in the ancient Greek texts, one aims to establish an all-important legitimacy to this pathological way of being.

But this history of mania, taken at face value, threatens to predetermine our approach to this phenomenon in ways that are eminently problematic. As Healy points out, in order to effectively establish the purity of the 2,500-year lineage from “μανία” to “mania,” our historical accounts are often forced to walk the line between fact and fiction. As he explains, one of the primary anecdotes referred to in the course of establishing the lineage of “mania” is typically trimmed of most of the features that conflict with contemporary diagnostic criteria. In the standard rendering of the quotation, a woman is said to suffer from insomnia, loss of appetite, thirst, nausea, raving, dysthymia, and incoherent speech. To the contemporary reader, the only symptoms that might be seen as out of place in a manic episode are thirst and nausea. However, there are a number of other symptoms that are left out of the standard quotation, including a high fever, profuse sweating, severe pain, dark urine, and increased menstrual flow¹⁹. When all of these symptoms are discussed together, we see the apparently manic symptoms cast in a different light. The likelihood of Hippocrates’ patient undergoing what we would today call a manic episode is decidedly eroded.

Similar “histories” are found in contemporary work on the writings of Aretaeus of Cappadocia. For example, Angst and Marneros, in their brief discussion of the history of bipolar disorder, admit that “mania” in the ancient Greek context is a difficult concept to pin down. The term is found not only in the work of physicians such as Hippocrates and Aretaeus, but also in religious and mythological writings, as well as works of philosophy. However, even while admitting the profound heterogeneity of what this term refers to, Angst and Marneros state,

Some authors have claimed that the concept of mania and melancholia as described by Hippocrates, Aretaeus, and other ancient Greek physicians is different from the modern concepts, but this is not correct. Rather, the classical concepts of melancholia and mania were broader than modern concepts (they included melancholia or mania, mixed states, schizoaffective disorders, some types of schizophrenia and some types of acute organic psychoses and ‘atypical’ psychoses)²⁰.

While it may not be incorrect to claim that these early concepts are *broader* than the contemporary concepts discussed under the same label, the additional claim that the concepts are not thereby *different* is problematic. It seems that if the ancient concepts of mania and melancholia do in fact include what we today refer to as schiz-

oaffective disorders, schizophrenia, and so on, then they are the conceptual forerunners of these contemporary disorders as well. However, one would be hard pressed to find an article arguing that the contemporary concept of schizophrenia has been with us for 2,500 years because it appears similar to some of the descriptions found in ancient Greek medical texts on “μανία.” In contrast, what makes the lineage from “μανία” to “mania” believable is, more than anything, the shared term. In the absence of this term, it is unlikely that one could get away with offering such pseudo-histories with the intent of establishing the legitimacy of the contemporary concept of “mania.” The production of such histories threatens not only our understanding of the ancient Greek concepts of mental disorder, but also our ability to properly develop and articulate our contemporary concepts. If we believe that we can draw a more or less clear line of descent from “μανία” to “mania,” we allow the contemporary concept to sediment even further; we forget that today’s mania is itself an artifact, a construct developed within a particular scientific and cultural milieu. This is not to say that when we use the term “mania” we are not referring to a real form of suffering, and perhaps even to a phenomenon with neurobiological underpinnings. Rather, what we risk in the continual affirmation of these histories and the uncritical forgetting that follows from them is the reification of our contemporary constructs. When we become content with an unquestioned (and unquestionable) classification of disorders, we fail to engage in the critical reflection necessary for a successful reclassification.

In addition to the implications of this fabricated history of mania, we also have to attend to more recent terminological shifts in how we refer to the disorder to which mania belongs. It is today all too easy to forget that the term “bipolar disorder” only rose to prominence in the past few decades, replacing earlier concepts such as “manic depressive insanity,” “manic-depressive reaction,” and “manic depression.” This shift seems innocuous enough, but we must be attentive to how a shift in terminology (especially when the history of this shift is forgotten) can tacitly reshape the conceptual landscape of the phenomenon in question.

In the particular case of the shift to “bipolar disorder,” it is worth considering how we today conceive of the relationship between depressive and manic episodes, and how this conception has changed along with our terminology. When we today refer to “bipolar disorder,” we are immediately presented with a picture of a disorder comprised of two opposing extremes; depression and mania are polar opposites. As portrayed in the latest editions of the DSM, depression is characterized by a mood of sadness, despair, or guilt, while mania is characterized by euphoria (or in some cases irritability). In other words, depression and ma-

nia are themselves conceived of as contrasting moods, or at least as contrasting sets of moods.

While this conception of the relationship between mania and depression as polar opposite mood states may be accurate, the use of the term “bipolar disorder” already predisposes researchers and clinicians toward this conception. Earlier terms such as “manic-depressive illness” – while incorporating a sense of these two pathological ways of being as fundamentally related – are somewhat less restrictive as to the nature of this relationship.

By examining competing models of this disorder, we can gain a better sense of how our terminology allows us to take for granted the relationship between depression and mania. For example, in the 1960s, around the same time that a few researchers^{21 22} began to develop the bipolarity model that would replace the looser conception of manic-depressive illness, two alternative models were developed and put forward. These models are referred to as the “continuum model” and the “triangular model.”

On the continuum model, depression and mania are not conceptualized as opposing phenomena with euthymia or mental health in the middle. Rather, mania is understood as a more severe reaction than depression. The continuum, then, is between euthymia and mania, with depression standing in the middle. By construing the relationship between depression and mania in this manner, the continuum model is supposed to overcome paradoxical depictions of mixed states. Rather than having to explain why features of two opposing phenomena can manifest at the same time, this model simply accommodates mixed states by positing that the movement from euthymia to mania (and vice versa) passes through depression^{23 24}.

The triangular model, in contrast, posits each of these three states – depression, mania, and euthymia – as positioned on separate corners of a triangle. One can thereby move between euthymia and depression without moving through mania, between euthymia and mania without moving through depression, and between depression and mania without moving through euthymia. This again offers a less paradoxical depiction of mixed states, while not necessarily characterizing depression and mania as polar opposites²⁵.

I am not here arguing that the conception of the relationship between depression and mania that is built into the term “bipolar disorder” is necessarily inaccurate. In addition, I am not arguing that the continuum or triangular models more accurately portray the relationship between depression and mania. Rather, the point I wish to stress is that the use of the term “bipolar disorder” prejudices the development and clarification of our concepts of mania and depression. By maintaining an explicit awareness

of the presuppositions built into this term, we can more accurately attend to the phenomena of depression and mania, as well as the relation that holds between them.

In cases where a term has inbuilt prejudices that might cover over important features of a phenomenon, it is sometimes useful to put the term out of use (at least temporarily) by employing a term that does not include such prejudices. As discussed above, Heidegger did this with his use of the term “*Dasein*” rather than “subjectivity,” in spite of the fact that the object of his investigation was what many philosophers would have uncritically referred to as the subject. Psychiatrists might do something similar (if less radical) by simply going back to terms such as “manic-depressive illness.” Such terms, while retaining presuppositions regarding the intimate relationship between depression and mania, at least leave the nature of this relationship open to further inquiry in ways that “bipolar disorder” does not.

Finally, it is worth examining how we label mania in our diagnostic manuals, and how these labels predetermine how we conceive of their essential features. For example, in the DSM-III, the entry on mania is included under the heading of “affective disorders”²⁶. In the DSM-IV, this heading is changed to “mood disorders”²⁷. However, in the DSM-5 the headings of “affective” and “mood disorders” have been removed; the headings of “bipolar and related disorders” and “depressive disorders” now stand independently of each other, without an overarching label to subsume them¹⁸.

The general headings under which mania and other disordered phenomena are discussed may not be something that researchers and clinicians typically attend to. However, the authors of the DSM-5 explicitly acknowledge that the change in headings is meant to facilitate a reconceptualization of bipolar disorder. The opening line of the section on “bipolar and related disorders” reads as follows:

Bipolar and related disorders are separated from the depressive disorders in DSM-5 and placed between the chapters on schizophrenia spectrum and other psychotic disorders and depressive disorders in recognition of their place as a bridge between the two diagnostic classes in terms of symptomatology, family history, and genetics¹⁸.

Both the removal of the earlier labels of “affective” and “mood disorders” as well as the placement of “bipolar disorder” between “schizophrenia” and “depressive disorders” were the result of explicit decisions made by the authors of the DSM-5 for the sake of facilitating the reconceptualization of these disordered phenomena. This new presentation is meant to tacitly emphasize the links not only between the symptoms of bipolar disorder and the symptoms of depressive disorders, but also the links between bipolar disorders and forms of schizophrenia.

This reshaping of the concept of “bipolar disorder,” as well as the concepts of “mania” and “depression,” may serve to open up or broaden the set of symptoms and relevant phenomena that are attended to in psychiatric and psychological studies. However, it is still worth pointing out that one of the starkest points of contrast between phenomenological psychopathologists and more traditional psychiatric researchers is the relative diversity of phenomena that the former group is willing to attend to and take seriously. While the majority of traditional research on mania is on its emotional and affective features, phenomenological psychopathologists focus on a wide variety of features, many of which are not found in the DSM symptomatology.

For example, Sass and Pienkos have recently argued that self-disturbances are central not only to schizophrenia, but to depression and mania as well^{28 29}. In addition, Fuchs has argued that, in addition to the affective features of mania, manic being in the world includes marked shifts in one’s mode of embodiment, as well as in one’s temporal flow and intersubjectivity³⁰.

However, in spite of contemporary phenomenological psychopathologists’ willingness to attend to novel phenomena – and especially those that continue to be neglected in the DSM symptomatology – they are by no means immune to the effects of prejudice (linguistic and otherwise). To take just one example, in a recent phenomenological study, Fuchs opens his discussion of manic existence or being in the world by stating, “Mania is obviously the antithesis of depression”³⁰. As I have discussed above, the antithetical (or bipolar) relationship between depression and mania is only *obvious* if we forget just how recently we embraced the label of “bipolar disorder.” Similar uncritical adoptions of conceptual prejudice (linguistic and otherwise) can be found throughout the psychiatric, psychological, and phenomenological literature. I have been guilty of this in my own work, often taking for granted the polarity between depression and mania as a starting point for my phenomenological investigations^{8 9}.

Conclusion

The philosophical program of phenomenology has the potential to open our eyes to a complexity and diversity of phenomena that our latent prejudices might otherwise cover over. While phenomenological research has already done much to broaden the horizons within which we conceptualize and understand mental illness, there is much work left to be done. One way that philosophical phenomenology can support psychopathological studies is through its preparatory hermeneutic investigations of the phenomena to be investigated, interrogated, and articulated. Yet it is precisely this aspect of phenomenological research that

has been largely neglected in the contemporary literature. My hope is that this article makes some contribution to this area of research, not only by laying the groundwork for further investigations into mania, but also by convincing others to engage in similar hermeneutic projects that will set the stage for more careful and attentive phenomenological and psychiatric research in the future.

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Conflict of interests

None.

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