be avoided in order to minimize intellectualization. While he agreed with Ingram's definition of metaphor and linked it to therapeutic movement and growth, he disagreed with the implication that a metaphor may remain fixed through an analysis. It will only "remain unchanged if both the patient and the analyst were to fall in love with it... metaphors do change as patients change and develop." He warned against "intruding metaphors, filling up the space" in an analysis. He stated that this can be avoided through the use of interactive metaphors which derive from the ongoing, back-and-forth contributions of both patient and analyst.

Audience response was rich and reasoned. Edward Clemmens described metaphors as structuring concepts which could be seen as indices of closeness. Milton Berger pointed to their therapeutic utility when more precise descriptions of acts or feelings are too distressing for patients to assimilate. Commenting on Ingram's presentation in the context of discourse theory, Mark Kaminsky addressed the question, "from whose mouth the metaphor emerges." He agreed with Ingram that interpretive metaphors are co-produced by patient and analyst. Kenneth Winarick cautioned that analysts' interpretive metaphors may influence the subjective experience of the patient in a manner similar to that exerted by projective measures that pull in certain directions. Taking issue with Ingram's skepticism, which holds that it is presumptuous to suppose one can truly understand another person, Joyce Lerner stated that the analytic process allows one to work toward that end.

Michael J. Hurewitz, Ph.D.

MALE HOMOSEXUALITY: A CONTEMPORARY PSYCHOANALYTIC PERSPECTIVE
Presenter: Richard Friedman, M.D. Discussant: Sam Slipp, M.D.

Richard Friedman's presentation began with a review of the general intellectual history of analytic theories of homosexuality, from Freud's classical model through the views of more contemporary investigators. He then commented on the impact of the gay affirmative movement within psychoanalysis, described current research into the psychobiological substrate of sexual orientation, and addressed the question of the universality of unconscious bisexuality, especially in the context of the analytic relationship. He stressed that etiological models that construe homosexuality as the result of "developmental derailment, character pathology, and sexual pathology" derive from the study of pathological populations and are therefore not
generalizable to the larger nonpathological groups of gay men and women that exist. Further, such models do not, and could not have, taken into account biological factors associated with homosexual orientation that have only recently been explored.

Friedman's review of the field led him to the position, in line with the gay affirmative and biological theorists, that sufficient evidence has been accumulated to "support the likelihood of primary biological factors shaping and influencing sexual orientation in . . . men." He cited findings supporting this contention emerging from research into concordance rates in mono- and dizygotic twins; from explorations of the effects of prenatal exposure to masculinizing hormones (androgens) on gender-related childhood play patterns associated with adult sexual orientation, as seen in studies of pseudohermaphroditism caused by congenital adrenal hyperplasia; and from animal studies indicating that prenatal androgenization of the brain results in masculinized behavior in the females of a variety of species. Friedman concludes that a major, clear relationship exists between prenatal androgen exposure and childhood play and that such exposure has a "partial, indirect, but nevertheless suspicious and interesting effect on sexual orientation." He elucidated the relationship between childhood play patterns and adult sexuality in both male homosexuals and lesbians, noting that they report much more gender-atypical behavior than do heterosexuals.

Friedman contends that the genetic evidence, the studies of pseudohermaphroditism, cross-cultural research, and animal studies give convincing support to the position that sexual orientation is in large part determined by prenatal biological influences, "probably hormonal, but there is no consensus and no empirical knowledge as to the nature of the mechanisms. I would suggest that diverse mechanisms, leading to subgroups with the same behavior, are most reasonable to assume." A corollary to this conclusion was that "the analytic position that homosexuality is the result of unconscious, internal intrapsychic conflicts is outdated" and no longer tenable.

In the context of clinical psychoanalysis, Friedman cautioned against linking the presence of unresolved oedipal conflicts in gays with the development of a homosexual orientation. He also distinguished "true masochism" in homosexuality from the self-destructive impact of culturally determined "antihomosexual self-representations which are experienced by almost all gays in the course of analysis." Patients manifesting true masochism were said to require long and difficult analyses whereas those within the other group are often successfully treated with less intensive psychotherapy.

Friedman's own research addresses the Freudian notion of universal un-