

## The Marquise of O—: A ‘True Story’ with a Hole

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«Ça parle », said Lacan. Yet what speaks in analysis, what speaks us, is not the subject’s “true story”, nor a hidden meaning. Something unsayable insists beyond meaning: the symptom. According to Jacques-Alain Miller, the symptom is “the most real thing that psychoanalysis can give us.” He also describes it as “two-faced, with a face of truth and a face of the real.”<sup>1</sup>

Let us turn to a case of fainting. A century before Freud, the German writer Heinrich von Kleist is already staging<sup>2</sup> what Freud would later recognise in hysterics: the symptom — the body marked by the real where something will insist and narration cannot go.

In 1808, Kleist presents his novella *Die Marquise von O...*<sup>3</sup> as “[b]ased on a true incident.”<sup>4</sup> Yet the “true story” is constructed around a gap — that is, a stumble. The Marquise, a young widow and mother, is in residence at the family fortress when it comes under Russian attack: walls breached, soldiers, cannon fire, smoke and panic. A Russian officer rescues her; to the Marquise he seemed “an angel sent from heaven”<sup>5</sup> — he offers her his arm with a courteous address in French, at which point she faints. Then — Kleist adds a dash — the count leaves her with her servants, replaces his hat and returns to the fighting.<sup>6</sup> What happens in the gap marked by that dash is neither reducible to assault nor to desire; it is precisely this undecidability that the text preserves. Later the Marquise discovers she is pregnant, “without knowledge of the cause.”<sup>7</sup> The fainting leaves a blank in time, an amnesia — so that what occurred cannot be known, only registered in the body.

Tormented, the Marquise first turns to the Other — family, suitor, mother — until she stops searching for meaning and answers with an act: a public notice calling the unknown father to come forward. He does — the Russian rescuer, Count F; she marries him despite much inner turmoil. What follows are narrative attempts to close the gap: ruptures, rejection, a formal marriage rather than rediscovered desire. Still, the gap remains as a blank in the timeline and as a structural hole in the story.

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<sup>1</sup> Miller, J.-A., “Reading a Symptom,” *Hurly-Burly*, 6, 2011, pp.143-152.

<sup>2</sup> That is, constructing a narrative scene in which the body performs what cannot be narrated.

<sup>3</sup> Kleist, H. v. *The Marquise of O— and Other Stories*, trans. D. Luke, N. Reeves, New York: Penguin, 2004.

<sup>4</sup> The line Kleist gives under the title reads, in parentheses: “(Based on a true incident (*wahre Begebenheit*), the setting of which has been transposed from the north to the south)”.

<sup>5</sup> *Ibid.*, p. 69.

<sup>6</sup> *Ibid.*, p. 70.

<sup>7</sup> *Ibid.*, p. 68.

Only then something softens, in the Marquise's relation to the gap and to the count. They live what one could call *vergnügt*, cheerfully, with a "whole series of young Russians"<sup>8</sup> born after the first. Once her act is inscribed, what sustains her no longer comes from meaning or narrative, but from a position taken with her symptom, in the real (in that which does not close), not pushed back into story. The symptom remains; life can be resumed and lived — lightly, under a new heading.

At the end of the novella, when Count F asks her about her newfound love for him, the Marquise tells him, half-jokingly, that "...she would not have seen a devil in him then if she had not seen an angel in him at their first meeting."<sup>9</sup> — finally acknowledging what the fainting already knew. In light of the symptom, the telling of the story can end.

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<sup>8</sup> *Ibid.*, p. 113.

<sup>9</sup> *Ibid.*, p. 113.