emotion rather than from an absence of emotion altogether. Such people were first noticed by psychoanalysts puzzled by a class of patients who were untreatable by that method because they reported no feelings, no fantasies, and colorless dreams—in short, no inner emotional life to talk about at all.⁹ The clinical features that mark alexithymics include having difficulty describing feelings—their own or anyone else's—and a sharply limited emotional vocabulary.¹⁰ What's more, they have trouble discriminating among emotions as well as between emotion and bodily sensation, so that they might tell of having butterflies in the stomach, palpitations, sweating, and dizziness—but they would not know they are feeling anxious.

"They give the impression of being different, alien beings, having come from an entirely different world, living in the midst of a society which is dominated by feelings," is the description given by Dr. Peter Sifneos, the Harvard psychiatrist who in 1972 coined the term alexithymia. 11 Alexithymics rarely cry, for example, but if they do their tears are copious. Still, they are bewildered if asked what the tears are all about. One patient with alexithymia was so upset after seeing a movie about a woman with eight children who was dying of cancer that she cried herself to sleep. When her therapist suggested that perhaps she was upset because the movie reminded her of her own mother, who was in actuality dying of cancer, the woman sat motionless, bewildered and silent. When her therapist then asked her how she felt at that moment, she said she felt "awful," but couldn't clarify her feelings beyond that. And, she added, from time to time she found herself crying, but never knew exactly what she was crying about.12

And that is the nub of the problem. It is not that alexithymics never feel, but that they are unable to know—and especially unable to put into words—precisely what their feelings are. They are utterly lacking in the fundamental skill of emotional intelligence, self-awareness—knowing what we are feeling as emotions roil within us. Alexithymics belie the common-sense notion that it is perfectly self-evident what we are feeling: they haven't a clue. When something—or more likely, someone—does move them to feeling, they find the experience baffling and overwhelming, something to avoid at all costs. Feelings come to them, when they come at all, as a befuddling bundle of distress; as the patient who cried at the movie put it, they feel "awful," but can't say exactly which *kind* of awful it is they feel.

This basic confusion about feelings often seems to lead them to

complain of vague medical problems when they are actually experiencing emotional distress—a phenomenon known in psychiatry as *somaticizing*, mistaking an emotional ache for a physical one (and different from a psychosomatic disease, in which emotional problems cause genuine medical ones). Indeed, much of the psychiatric interest in alexithymics is in weeding them out from among those who come to doctors seeking help, for they are prone to lengthy—and fruitless—pursuit of a medical diagnosis and treatment for what is actually an emotional problem.

While no one can as yet say for sure what causes alexithymia, Dr. Sifneos proposes a disconnection between the limbic system and the neocortex, particularly its verbal centers, which fits well with what we are learning about the emotional brain. Patients with severe seizures who had that connection surgically severed to relieve their symptoms, notes Sifneos, became emotionally flat, like people with alexithymia, unable to put their feelings into words and suddenly devoid of fantasy life. In short, though the circuits of the emotional brain may react with feelings, the neocortex is not able to sort out these feelings and add the nuance of language to them. As Henry Roth observed in his novel *Call It Sleep* about this power of language, "If you could put words to what you felt, it was yours." The corollary, of course, is the alexithymic's dilemma: having no words for feelings means not making the feelings your own.

IN PRAISE OF GUT FEELING

Elliot's tumor, growing just behind his forehead, was the size of a small orange; surgery removed it completely. Although the surgery was declared a success, afterward people who knew him well said that Elliot was no longer Elliot—he had undergone a drastic personality change. Once a successful corporate lawyer, Elliot could no longer hold a job. His wife left him. Squandering his savings in fruitless investments, he was reduced to living in a spare bedroom at his brother's home.

There was a puzzling pattern to Elliot's problem. Intellectually he was as bright as ever, but he used his time terribly, getting lost in minor details; he seemed to have lost all sense of priority. Reprimands made no difference; he was fired from a succession of legal jobs. Though extensive intellectual tests found nothing wrong with Elliot's

mental faculties, he went to see a neurologist anyway, hoping that discovery of a neurological problem might get him the disability benefits to which he felt he was entitled. Otherwise the conclusion seemed to be that he was just a malingerer.

Antonio Damasio, the neurologist Elliot consulted, was struck by one element missing from Elliot's mental repertoire: though nothing was wrong with his logic, memory, attention, or any other cognitive ability, Elliot was virtually oblivious to his feelings about what had happened to him. 13 Most strikingly, Elliot could narrate the tragic events of his life with complete dispassion, as though he were an onlooker to the losses and failures of his past—without a note of regret or sadness, frustration or anger at life's unfairness. His own tragedy brought him no pain; Damasio felt more upset by Elliot's story than did Elliot himself.

The source of this emotional unawareness, Damasio concluded, was the removal, along with the brain tumor, of part of Elliot's prefrontal lobes. In effect, the surgery had severed ties between the lower centers of the emotional brain, especially the amygdala and related circuits, and the thinking abilities of the neocortex. Elliot's thinking had become computerlike, able to make every step in the calculus of a decision, but unable to assign *values* to differing possibilities. Every option was neutral. And that overly dispassionate reasoning, suspected Damasio, was the core of Elliot's problem: too little awareness of his own feelings about things made Elliot's reasoning faulty.

The handicap showed up even in mundane decisions. When Damasio tried to choose a time and date for the next appointment with Elliot, the result was a muddle of indecisiveness: Elliot could find arguments for and against every date and time that Damasio proposed, but could not choose among them. At the rational level, there were perfectly good reasons for objecting to or accepting virtually every possible time for the appointment. But Elliot lacked any sense of how *he felt* about any of the times. Lacking that awareness of his own feelings, he had no preferences at all.

One lesson from Elliot's indecisiveness is the crucial role of feeling in navigating the endless stream of life's personal decisions. While strong feelings can create havoc in reasoning, the *lack* of awareness of feeling can also be ruinous, especially in weighing the decisions on which our destiny largely depends: what career to pursue, whether to stay with a secure job or switch to one that is riskier but more

interesting, whom to date or marry, where to live, which apartment to rent or house to buy—and on and on through life. Such decisions cannot be made well through sheer rationality; they require gut feeling, and the emotional wisdom garnered through past experiences. Formal logic alone can never work as the basis for deciding whom to marry or trust or even what job to take; these are realms where reason without feeling is blind.

The intuitive signals that guide us in these moments come in the form of limbic-driven surges from the viscera that Damasio calls "somatic markers"—literally, gut feelings. The somatic marker is a kind of automatic alarm, typically calling attention to a potential danger from a given course of action. More often than not these markers steer us *away* from some choice that experience warns us against, though they can also alert us to a golden opportunity. We usually do not, at that moment, recall what specific experiences formed this negative feeling; all we need is the signal that a given potential course of action could be disastrous. Whenever such a gut feeling rises up, we can immediately drop or pursue that avenue of consideration with greater confidence, and so pare down our array of choices to a more manageable decision matrix. The key to sounder personal decision-making, in short: being attuned to our feelings.

PLUMBING THE UNCONSCIOUS

Elliot's emotional vacuity suggests that there may be a spectrum of people's ability to sense their emotions as they have them. By the logic of neuroscience, if the absence of a neural circuit leads to a deficit in an ability, then the relative strength or weakness of that same circuit in people whose brains are intact should lead to comparable levels of competence in that same ability. In terms of the role of prefrontal circuits in emotional attunement, this suggests that for neurological reasons some of us may more easily detect the stirring of fear or joy than do others, and so be more emotionally self-aware.

It may be that a talent for psychological introspection hinges on this same circuitry. Some of us are naturally more attuned to the emotional mind's special symbolic modes: metaphor and simile, along with poetry, song, and fable, are all cast in the language of the heart. So too are dreams and myths, in which loose associations determine

the flow of narrative, abiding by the logic of the emotional mind. Those who have a natural attunement to their own heart's voice—the language of emotion—are sure to be more adept at articulating its messages, whether as a novelist, songwriter, or psychotherapist. This inner attunement should make them more gifted in giving voice to the "wisdom of the unconscious"—the felt meanings of our dreams and fantasies, the symbols that embody our deepest wishes.

Self-awareness is fundamental to psychological insight; this is the faculty that much of psychotherapy means to strengthen. Indeed, Howard Gardner's model for intrapsychic intelligence is Sigmund Freud, the great mapper of the psyche's secret dynamics. As Freud made clear, much of emotional life is unconscious; feelings that stir within us do not always cross the threshold into awareness. Empirical verification of this psychological axiom comes, for instance, from experiments on unconscious emotions, such as the remarkable finding that people form definite likings for things they do not even realize they have seen before. Any emotion can be—and often is—unconscious.

The physiological beginnings of an emotion typically occur before a person is consciously aware of the feeling itself. For example, when people who fear snakes are shown pictures of snakes, sensors on their skin will detect sweat breaking out, a sign of anxiety, though they say they do not feel any fear. The sweat shows up in such people even when the picture of a snake is presented so rapidly that they have no conscious idea of what, exactly, they just saw, let alone that they are beginning to get anxious. As such preconscious emotional stirrings continue to build, they eventually become strong enough to break into awareness. Thus there are two levels of emotion, conscious and unconscious. The moment of an emotion coming into awareness marks its registering as such in the frontal cortex.¹⁴

Emotions that simmer beneath the threshold of awareness can have a powerful impact on how we perceive and react, even though we have no idea they are at work. Take someone who is annoyed by a rude encounter early in the day, and then is peevish for hours afterward, taking affront where none is intended and snapping at people for no real reason. He may well be oblivious to his continuing irritability and will be surprised if someone calls attention to it, though it stews just out of his awareness and dictates his curt replies. But once that reaction is brought into awareness—once it registers in the cortex—he can evaluate things anew, decide to shrug off the

feelings left earlier in the day, and change his outlook and mood. In this way emotional self-awareness is the building block of the next fundamental of emotional intelligence: being able to shake off a bad mood.

Passion's Slaves

Thou hast been ...

A man that Fortune's buffets and rewards

Has taken with equal thanks Give me that man

That is not passion's slave, and I will wear him

In my heart's core, aye, in my heart of hearts

As I do thee....

—HAMLET TO HIS FRIEND HORATIO

A sense of self-mastery, of being able to withstand the emotional storms that the buffeting of Fortune brings rather than being "passion's slave," has been praised as a virtue since the time of Plato. The ancient Greek word for it was sophrosyne, "care and intelligence in conducting one's life; a tempered balance and wisdom," as Page DuBois, a Greek scholar, translates it. The Romans and the early Christian church called it temperantia, temperance, the restraining of emotional excess. The goal is balance, not emotional suppression: every feeling has its value and significance. A life without passion would be a dull wasteland of neutrality, cut off and isolated from the richness of life itself. But, as Aristotle observed, what is wanted is appropriate emotion, feeling proportionate to circumstance. When emotions are too muted they create dullness and distance; when out of control, too extreme and persistent, they become pathological, as in immobilizing depression, overwhelming anxiety, raging anger, manic agitation.

Indeed, keeping our distressing emotions in check is the key to emotional well-being; extremes—emotions that wax too intensely or for too long-undermine our stability. Of course, it is not that we should feel only one kind of emotion; being happy all the time somehow suggests the blandness of those smiley-face badges that had a faddish moment in the 1970s. There is much to be said for the constructive contribution of suffering to creative and spiritual life; suffering can temper the soul.

Downs as well as ups spice life, but need to be in balance. In the calculus of the heart it is the ratio of positive to negative emotions that determines the sense of well-being—at least that is the verdict from studies of mood in which hundreds of men and women have carried beepers that reminded them at random times to record their emotions at that moment.¹ It is not that people need to avoid unpleasant feelings to feel content, but rather that stormy feelings not go unchecked, displacing all pleasant moods. People who have strong episodes of anger or depression can still feel a sense of well-being if they have a countervailing set of equally joyous or happy times. These studies also affirm the independence of emotional from academic intelligence, finding little or no relationship between grades or IQ and people's emotional well-being.

Just as there is a steady murmur of background thoughts in the mind, there is a constant emotional hum; beep someone at six A.M. or seven P.M. and he will always be in some mood or other. Of course, on any two mornings someone can have very different moods; but when people's moods are averaged over weeks or months, they tend to reflect that person's overall sense of well-being. It turns out that for most people, extremely intense feelings are relatively rare; most of us fall into the gray middle range, with mild bumps in our emotional roller coaster.

Still, managing our emotions is something of a full-time job: much of what we do—especially in our free time—is an attempt to manage mood. Everything from reading a novel or watching television to the activities and companions we choose can be a way to make ourselves feel better. The art of soothing ourselves is a fundamental life skill; some psychoanalytic thinkers, such as John Bowlby and D. W. Winnicott, see this as one of the most essential of all psychic tools. The theory holds that emotionally sound infants learn to soothe themselves by treating themselves as their caretakers have treated them, leaving them less vulnerable to the upheavals of the emotional brain.

As we have seen, the design of the brain means that we very often have little or no control over *when* we are swept by emotion, nor over *what* emotion it will be. But we can have some say in *how long* an emotion will last. The issue arises not with garden-variety sadness, worry, or anger; normally such moods pass with time and patience. But when these emotions are of great intensity and linger past an

appropriate point, they shade over into their distressing extremes—chronic anxiety, uncontrollable rage, depression. And, at their most severe and intractable, medication, psychotherapy, or both may be needed to lift them.

In these times, one sign of the capacity for emotional self-regulation may be recognizing when chronic agitation of the emotional brain is too strong to be overcome without pharmacologic help. For example, two thirds of those who suffer from manic-depression have never been treated for the disorder. But lithium or newer medications can thwart the characteristic cycle of paralyzing depression alternating with manic episodes that mix chaotic elation and grandiosity with irritation and rage. One problem with manic-depression is that while people are in the throes of mania they often feel so overly confident that they see no need for help of any kind despite the disastrous decisions they are making. In such severe emotional disorders psychiatric medication offers a tool for managing life better.

But when it comes to vanquishing the more usual range of bad moods, we are left to our own devices. Unfortunately, those devices are not always effective—at least such is the conclusion reached by Diane Tice, a psychologist at Case Western Reserve University, who asked more than four hundred men and women about the strategies they used to escape foul moods, and how successful those tactics were for them.²

Not everyone agrees with the philosophical premise that bad moods should be changed; there are, Tice found, "mood purists," the 5 percent or so of people who said they never try to change a mood since, in their view, all emotions are "natural" and should be experienced just as they present themselves, no matter how dispiriting. And then there were those who regularly sought to get into unpleasant moods for pragmatic reasons: physicians who needed to be somber to give patients bad news; social activists who nurtured their outrage at injustice so as to be more effective in battling it; even a young man who told of working up his anger to help his little brother with playground bullies. And some people were positively Machiavellian about manipulating moods—witness the bill collectors who purposely worked themselves into a rage in order to be all the firmer with deadbeats.³ But these rare purposive cultivations of unpleasantness aside, most everyone complained of being at the mercy of their moods. People's track records at shaking bad moods were decidedly mixed.

THE ANATOMY OF RAGE

Say someone in another car cuts dangerously close to you as you are driving on the freeway. If your reflexive thought is "That son of a bitch!" it matters immensely for the trajectory of rage whether that thought is followed by more thoughts of outrage and revenge: "He could have hit me! That bastard—I can't let him get away with that!" Your knuckles whiten as you tighten your hold on the steering wheel, a surrogate for strangling his throat. Your body mobilizes to fight, not run—leaving you trembling, beads of sweat on your forehead, your heart pounding, the muscles in your face locked in a scowl. You want to kill the guy. Then, should a car behind you honk because you have slowed down after the close call, you are apt to explode in rage at that driver too. Such is the stuff of hypertension, reckless driving, even freeway shootings.

Contrast that sequence of building rage with a more charitable line of thought toward the driver who cut you off: "Maybe he didn't see me, or maybe he had some good reason for driving so carelessly, such as a medical emergency." That line of possibility tempers anger with mercy, or at least an open mind, short-circuiting the buildup of rage. The problem, as Aristotle's challenge to have only *appropriate* anger reminds us, is that more often than not our anger surges out of control. Benjamin Franklin put it well: "Anger is never without a reason, but seldom a good one."

There are, of course, different kinds of anger. The amygdala may well be a main source of the sudden spark of rage we feel at the driver whose carelessness endangers us. But the other end of the emotional circuitry, the neocortex, most likely foments more calculated angers, such as cool-headed revenge or outrage at unfairness or injustice. Such thoughtful angers are those most likely, as Franklin put it, to "have good reasons" or seem to.

Of all the moods that people want to escape, rage seems to be the most intransigent; Tice found anger is the mood people are worst at controlling. Indeed, anger is the most seductive of the negative emotions; the self-righteous inner monologue that propels it along fills the mind with the most convincing arguments for venting rage. Unlike sadness, anger is energizing, even exhilarating. Anger's seductive, persuasive power may in itself explain why some views about it are so common: that anger is uncontrollable, or that, at any rate, it *should not* be controlled, and that venting anger in "catharsis" is all to the