

# The Kidneys

An excerpt from

THE HEALING POWER OF ILLNESS by Thorwald Dethlefsen & Rudiger Dahlke MD

Within the human body the kidneys represent the realm of partnership. Kidney pains and diseases always appear when we are engaged in conflicts with our partners. What is meant by 'partnership' here, though, is not just sexuality, but the fundamental way in which we approach our fellow human beings. Our particular approach to other people can be seen at its clearest within a partnership, but it applies just as much to anybody else with whom we come into contact. In order to gain a better understanding of the relationship between the kidneys and the general subject of partnership, it may be useful at this point to start by taking a look at the psychological background to any relationship.

The very polarity of our consciousness means that we are not aware of our own wholeness, but only ever identify ourselves with one particular aspect of our nature. This aspect we call the 'I'. The missing aspect is our shadow, and this, by definition, we are unaware of. Humanity's path is the path towards greater awareness. We are constantly forced to make conscious those aspects of the shadow of which we were previously unaware and to integrate them into our

I-identification. This learning process can only come to an end when we finally attain total consciousness — when, in a word, we are 'whole'. This oneness encompasses the whole of polarity within its undividedness, and not least masculinity and femininity.

The perfect human being is androgynous — in other words, has fused both his or her masculine and feminine aspects into a psychological unity (the so-called 'Alchemical Wedding'). Androgyny is not to be confused with hermaphroditism, however. Clearly, androgyny applies only on the psychological level: the body itself retains its gender. But the consciousness no longer identifies itself with it (rather as an infant also has a physical gender without identifying itself with it). The goal of androgyny finds its outward expression not only in celibacy, but also (in a man, at least) in the robes of a priest or monk. 'Being a man implies identifying oneself with the masculine pole of the psyche, as a result of which the feminine aspect automatically slips into the shadows; 'being a woman', similarly, implies identifying oneself with the feminine psychological pole, as a result of which it is the masculine pole that is consigned to a shadow existence. It is our task to make ourselves aware of our shadow. But we can only do this via the medium of projection. We have to seek out and find what we are lacking via the outer world, even though it is really inside us all the time.

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To start with, of course, this sounds paradoxical — and perhaps it is for that reason that it is so seldom understood. Yet all knowledge demands at its very outset the division of subject from object. The eye, for example, is perfectly capable of seeing, but has no hope of ever seeing itself — it can only do so via the medium of projection onto a reflecting surface. This is the only way in which we can ever know ourselves: as human beings we are in the self-same boat. A man can only become aware of the feminine aspect of his psyche (C. G. Jung called it the anima) by projecting it onto a physical woman. The same applies to a woman, but in reverse. We can imagine the shadow as being composed of layers. There are very deep layers which evoke dread in us, and of which we are therefore terrified; and there are other layers that lie closer to the surface, only waiting to be worked on and made conscious. If I now meet somebody who is living out for real some aspect which in me lies in this uppermost part of the shadow, I fall in love with that person. But the words 'that person' apply not merely to the actual human being 'out there', but also to the 'inner person' represented by the relevant aspect of my own shadow, for both are ultimately one and the same.

In the last resort, then, whatever it is that we like or hate about another person always lies within ourselves. We speak of 'love' when somebody else reflects an area of our own shadow that we are keen to get to know better; but we call it 'hate' when somebody reflects a very deep level of our shadow that we are at present totally unwilling to encounter inwardly. We find the other sex attractive because it represents something that we are lacking. Yet at the same time we are often afraid of it because it is a 'something' of which we are unconscious. The encounter with a partner is an encounter with the unknown aspect of our inner psyche. Once we are fully aware of this mechanism via which the various aspects of our shadows are reflected in others, we can start to see all our problems of relationship in a new light. All the difficulties

that we have with our partners are in fact difficulties with ourselves.

Our relationship with our unconscious is always ambivalent — it excites us, and yet we are all afraid of it. Our relationships with our partners are normally just as ambivalent. We love them and hate them; we are determined to possess them totally and intent on getting rid of them; we find them wonderful and dreadful. In all the activities and squabbles that go to make up a relationship, we are always working on our own shadows. That is why contrary types so often come together. Opposites attract each other, as everybody knows, and yet people persist in wondering aloud 'why those two ever came together, seeing that they are so incompatible'. In fact, however, the greater the contrast, the more suited they actually are, for each lives out the other's shadow or — more to the point — each leaves the other to do that living out for him or her instead. Partnerships between two very similar people are admittedly less risky and more cosy, but by and large they contribute very little to the development of either party; it is only the participants' own, conscious aspects that get reflected in each other — a situation that is ultimately both bland and boring. Both parties find each other 'wonderful' and project their common shadow onto the rest of the world around them, which they then do their common utmost to avoid. It is only the friction in a relationship that is fruitful, for it is only by working on our shadow in and through the other person that we eventually come closer to ourselves. At which point it should become obvious that the goal of this work is nothing less than our own wholeness.

Ideally, the end of a partnership should see two individuals who have both become whole in themselves, or who at least — if we are to be less idealistic — have become more whole as a result of illuminating the unconscious aspects of their own souls and integrating them into their respective consciousnesses. That end is not fulfilled by the typical pair of cooing doves who insist that they 'cannot live without each other'. Such assertions merely reveal that those involved are, out of sheer convenience (one could say cowardice), merely using each other to live out their shadows for them, without making any attempt to work on their own projections or take them back again onto their own shoulders. In such cases (and they are the vast majority!) neither partner allows the other to develop any further because this would throw into question their established roles. If either subsequently undergoes psychotherapy, the partner quite often complains about the changes that have occurred ... ('But we only wanted the symptom to go away!')

A partnership has only attained its goal when neither needs the other any more. Only in this event has the promise of 'eternal love' actually been taken seriously. Love is an act of consciousness that involves opening up the frontiers of our awareness to the object of our love with a view to total union. But this has only happened if we have absorbed into our soul everything that the partner represents or (to put it another way) if we have withdrawn our projections and reunited ourselves with them. At which point the other person has become free of his or her role as a projection-screen — free either of attraction or of repulsion for us — and so love has become eternal (that is, independent of time) since it has become realised within our own soul. Such considerations, though, always tend to frighten people who are firmly bound by their projections to the physical world. They attach their love to the formal manifestation, rather than to the psychological content. With such an attitude, the impermanence of earthly things becomes a threat, whereupon those involved live in hopes of meeting their 'loved ones' again in the Beyond. But this is to overlook the fact that the 'Beyond' is actually here all the time. The Beyond is simply the realm that lies beyond the world of forms. Everything visible is merely a metaphor: why should things be any different where people are concerned?

Our life's aim is to make the visible world superfluous — and that goes for our partner too. Problems only arise when two people 'use' their relationship in different ways — with the one working on his or her projections and reabsorbing them again, while the other remains firmly stuck in the world of projection. This eventually leads to the point when the one becomes independent of the other, while the other's heart is fit to break. If, on the other hand, both parties remain stuck with their projections, we have a case of love 'till death do us part' — and thereafter great grief because the other half isn't there any more. Happy are those who grasp the fact that the only thing that cannot be taken from them is what they have realised in themselves. Love's aim is nothing if not oneness. All the while it is still directed towards external objects it has not yet attained its goal.

It is important for us to understand clearly the inner structure of a partnership if we are to follow the analogical relationship between it and what goes on in the kidneys. We find in the body both single organs (such as the stomach, the liver, the pancreas and the spleen) and organs arranged in pairs (such as the lungs, the testicles, the ovaries and the kidneys). If we consider the paired organs, it is noticeable that they all have some link with the themes of contact and partnership. Thus, the lungs represent the sphere of informal contact and communication whereas, as genital organs, the

testicles and ovaries represent sexuality. At the same time the kidneys correspond to partnership, to intimate human relationships. Moreover, these three areas also correspond to the three ancient Greek terms for love — *philia* (friendship), *eros* (sexual love) and *agape* (gradual self-unification with all things).

All the substances that are absorbed by the body eventually finish up in the blood. It is the kidneys' job to act as a central filtration plant. For this they need to be able to recognise which substances are beneficial to the organism and can be put to good use, and which are waste products and toxins that need to be excreted. For this onerous task the kidneys have at their disposal various mechanisms, which in the light of their physiological complexity we propose to simplify here into two basic functions. The first stage of the filtering process works along the lines of a mechanical sieve, with particles above a certain size being retained. The pores of this sieve are of exactly the right size to hold back the smallest protein-molecule (albumen). The second, much more complicated stage is based on a mixture of osmosis and the contraflow principle. In its essentials, osmosis is based on a balancing act between the pressures and concentrations of two fluids on either side of a semi-permeable membrane. In the process the contraflow principle sees to it that these two different, concentrated fluids are repeatedly passed next to each other, with the result that if necessary the kidneys can excrete highly concentrated urine (morning urine, for example). It is the ultimate aim of this osmotic balancing act to ensure that the body is able to retain the vital salts on which (among other things) the acid/alkaline balance depends.

The layman is for the most part totally unaware of the literally vital importance to us of this acid/alkaline balance, which is expressed numerically in terms of pH values. Thus, all biochemical reactions (energy-production and protein-synthesis, for example) depend to within very narrow limits on the preservation of a given pH value. The blood, in particular, maintains a level at the exact mid-point between alkaline and acid, between yin and yang. In the same way, every partnership amounts to an attempt to bring both poles — both masculine (yang, acid) and feminine (yin, alkaline) — into harmonious equilibrium. Just as the kidneys see to it that the balance between acid and alkaline is guaranteed, so a partnership similarly sees to it that we work towards fulfilling our wholeness through a relationship whereby another person lives out our shadow for us. In this way the 'other' (or 'better') 'half makes up via his or her very essence for whatever we ourselves are lacking.

The biggest danger in any relationship, meanwhile, is the conviction that all

problematic or disturbing forms of behaviour are the other person's 'pigeon' and have nothing to do with us. In such cases we are simply getting bogged down in our own projections and failing to recognise the necessity and value of working on our own shadow area — as reflected in our partner — as a means of becoming more aware and so of contributing to our own growth and maturation. Should this error manifest itself in bodily form, the kidneys go on to allow vital substances such as proteins and salts to pass through its filter-systems, thus losing to the environment components that are important for the body's own development (as in the case of glomerulonephritis, for example). In the process the kidneys show the self-same inability to recognise their own in the matter of vital substances as the psyche does in refusing to recognise its own in the matter of important problems and in consequently leaving it all to the other person. Just as we each need to recognise ourselves in our partners, so the kidneys similarly need to be able to recognise those 'foreign' substances from outside that are vital for getting to grips with things and so developing further. Just how strong a link there is between the kidneys and the subject of partnership and sociability is something that can also be seen quite easily from certain customs of everyday life. On almost every occasion when people get together to establish contacts, drinking plays a vital part. And no wonder, for drinking stimulates the 'contact organs' that are the kidneys, and thus also our ability to make contact. The moment we start clinking our brimming glasses and beer-mugs together, that contact soon becomes closer still. Via the medium of the glass-clinking we can happily flirt with each other without giving offence. Even the change from polite, distant forms of address to their more familiar, 'chummy' counterparts is nearly always linked with some kind of drinking ritual, with the drink acting as a kind of libation to fraternisation. In fact any establishment of human contact without some kind of communal drinking is all but inconceivable. Whether at a party, a social get-together or a folk-festival, people universally use drink to give them the 'Dutch courage' to make approaches to each other. All the more suspiciously, then, do such circles regard those who decline to join in the drinking; for those who drink nothing (or little) are showing that they do not want to excite their contact organs — that they wish to keep their distance. On such occasions, meanwhile, people distinctly prefer strongly diuretic drinks that stimulate the kidneys particularly sharply, such as coffee, tea and alcohol. (Straight after the social drinking, moreover, comes the equally significant activity of smoking. Smoking stimulates those other contact-organs of ours that are the lungs. It is common knowledge that people generally smoke far more in company than they do when they are alone.)

Those of us who drink a lot are showing that they want contact; but their danger lies in getting stuck on the level of substitute gratifications.

Kidney stones occur as the result of the deposition and crystallisation of certain substances that are present in the urine in excessive quantities (for example uric acid, calcium phosphate and calcium oxalate). In addition to the various environmental conditions that are responsible, the risk of stone-formation correlates strongly with the amount of liquid drunk; large quantities of liquid lower the concentration of these substances and raise their solubility. If a stone nevertheless forms, this interrupts the flow and can lead to an attack of colic. Colic is a perfectly sensible attempt on the part of the body to expel the stony obstruction through peristaltic movements of the ureter. This extremely painful process can be compared to a birth. The colic pain leads to extreme agitation and a strong urge to squirm about. Indeed, if the body's own colic fails to shift the stone, doctors themselves ask patients to jump around on their own account in a further attempt to get the stone moving again. In addition, the treatment attempts to hasten the 'birth' of the stone mainly through relaxation, warm applications and plenty of fluids.

The correspondences on the psychological level are easy to see. The obstructing stone consists of substances that in fact ought to have been excreted, since they have nothing more to contribute to the body's development. The stone thus corresponds to a whole host of themes of which the patient ought long since to have let go in the light of their inapplicability to his or her further development. 'Hanging on regardless' to unimportant themes — to 'water' that should long since have been allowed to flow 'under the bridge' — merely obstructs the flow and produces a blockage. The symptomatology of colic then forces the very movement that the patient was so keen to prevent by hanging on, and the doctor demands of the patient exactly the right thing — that he or she should jump around.

Only a leap out of the old can set our development in motion again and free us from all our superannuated clutter (the stone).

Statistics reveal that men suffer more frequently from kidney stones than women. The themes of harmony and partnership are more difficult for men to come to terms with than for women, who are by nature more in tune with such principles. For women, by contrast, aggressive self-assertion is a bigger problem, for this is a principle that comes more naturally to men. (This shows up statistically in the already mentioned higher frequency of gallstones in women.) The therapeutic measures applied to kidney colic meanwhile outline particularly well the principles that are useful in solving problems of harmony and relationship: warmth as an expression of devotion and love, relaxation of the constricted channels as signs of self-opening and self-broadening, and finally the administration of liquids to bring everything back into motion and flux again.

#### Fibrosis of the Kidney and the Artificial Kidney

The end of the road is reached when all the kidneys' functions finally pack up totally and a machine — the artificial kidney — has to take over the vital tasks of blood-purification. At this point it is the 'perfect machine' that takes over the role of partner, in the light of patients' unreadiness to use living partners to get to grips with their problems. If no partner has proved sufficiently perfect or dependable, or the desire for freedom and independence has proved too overwhelming, patients go on to find in the artificial kidney a partner that is both ideal and perfect, in that it does everything asked of it faithfully and dependably without making any personal demands or imposing its own needs. By the same token, though, patients are also totally dependent on it. At least three times a week they have to rendezvous with it in hospital or — in the event that they can afford a machine of their own — must sleep night after night faithfully by its side. They can never stray far from it, and possibly learn in this way that there is really no such thing as a perfect partner — so long as we are still not complete in ourselves, that is.

#### **KIDNEY DISEASE**

If something is 'going to your kidneys', address yourself to the following questions:

1. What problems am I having in the area of my current partnership?
2. Do I have a tendency to get stuck with my own projections, and thus to regard my partner's problems as his or hers alone?
3. Am I neglecting to recognise myself in all my partner's quirks of behaviour?
4. Am I clinging on to old problems and so stopping the flow of my own further development?
5. What forward leap is my kidney stone really trying to encourage me to take?