**IDEE FIXE**

A compilation

*In the early days of psychiatry in Europe terms in languages such as French and German commonly evolved. The term* ***“Idee Fixe****” is one such expression which has fallen from use except in the psychiatric references, generally now substituted by the term “Fixed Delusion”.*

*It is now recognized that there is a spectrum of delusional disorders, which range from mild and barely interfere with one’s life to a truly disabling intrusion by an obsessive train of thought or intransigent idea. This latter manifestation is generally not amenable to mainstream treatment and in fact “talking” therapy can be counterindicated as it can serve to reinforce the delusion, although sometimes its intensity may be loosely managed with the use of medication for Obsessive Compulsive Disorder. The condition might coexist with a number of other mental disorders, such as schizophrenia, or stand remarkably alone, existing in an otherwise seemingly stable individual.*

*DK writes extensively on the subject of obsession and the makes a number of references to the particularly intractable problem posed by “idée fixe”. The entries in italics are mine, either to provide commentary or to underscore an entry.*

Medical Dictionary

Main Entry: **idée fixe**  
Pronunciation: (")E-"dA-'fEks  
Function: *noun*  
Inflected Form: *plural* **idées fixes** /-'fEks(-&z)/   
**:** a usually delusional idea that dominates the whole mental life during a prolonged period (as in certain mental disorders) called also *fixed idea*

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(TWM 162)

2. The Safety of the One Who Thus Creates

It might be said here with emphasis, even if it is a recognized truism, that people are frequently slain (in the occult and therefore in the more important sense) by their own thought-forms. Thought creation, through concentration and meditation, is a potently dangerous matter. This must never be forgotten. There are forms of thought, unencumbered by much desire matter, which, failing to pass downward, poison the man on mental levels. This they do in two ways:

*1. By growing so potent on the mental plane that the man falls a victim to the thing he has created. This is the* ***"idée fixe"*** *of the psychiatrist; the obsession which drives to lunacy; the one-pointed line of thought which eventually terrorises its creator.*

*2. By multiplying so fast that the mental aura of the man becomes like unto a thick and dense cloud, through [Page 163] which the light of the soul must fail to penetrate, and through which the love of human beings, the lovely and beautiful and comforting activities of nature and of life in the three worlds equally fail to pierce. The man is smothered, is suffocated by his own thought-forms, and succumbs to the miasma which he himself has engendered.*

Or again, there are lines of thought which draw forth from the emotional body a reaction of a poisonous nature. A certain line of thought is followed by a human being in relation to his brethren. It breeds hatred, jealousy and envy, and works through into manifestation in such a manner that it produces those physical plane activities which cause the death of their creator. This may be literal as in the case of murder, which is in many cases the result of crystallised intent, or it may result in disease. Pure thought, right motive and loving desire are the true correctives of disease, and where the desire for these (which does animate many) is raised to constructive thinking there will be the gradual elimination of disease. As yet, though many desire, few think. Let it never be forgotten that the Great Ones do not look for those who only desire and aspire. They look for those who blend with their desire the determination to learn to use their mental bodies and become creators, and who will work constructively towards these ends.

Thus it will be seen why, in all systems of true occult training, the emphasis is laid on right thinking, loving desire, and pure, clean living. Only thus can the creative work be carried forward with safety, and only thus can the thought-form pass downward into objectivity, and be a constructive agent on the plane of human existence.

***These next three passages consider the major mental illnesses, schizophrenia and depression and mania, which may appear as a “unipolar” event, presentinga picture, in this case depression or a “bipolar” (formerly labled “manic depression”, event, featuring a switching from depression to mania.***

***Here, DK considers the presence of an idée fixe within the context of these other conditions:***

**(EH 315)** What is dementia praecox? ***(schizophrenia***) Does the phenomenon evidence a family group tradition? Is there any clue in the fact that it first manifests itself in early adolescence? Is the general practitioner correct in placing it in the category of hopeless cases? These and similar questions are constantly asked by students and practitioners of healing.

These forms of physical diseases which come under the general head of insanities are far more abstruse than is generally [Page 316] realised. From the standpoint of the esotericist, they fall into the following relatively simple categories:

1. Those where the difficulty is due to the breaking down of the brain tissue. Far more of these are definitely syphilitic in origin than is generally admitted, and I would remind you that, occultly speaking, that would naturally be the case, for the physical sex organs are a lower correspondence of the negative-positive relation existing in the brain between the two head centres and the pituitary and pineal glands.

2. Those where the difficulty is due to the overstimulation of the brain cells by some forms of energy which overbalance other forms and produce certain serious forms of insanity.

3. Those where there is no real physical difficulty, no lesions or diseased tissues, but simply a loose connection between the etheric body and the dense physical vehicle. Then obsession or possession can occur. Such cases are frequently (I might say, usually) regarded by the orthodox psychiatrist and medical man as forms of insanity; yet they are not truly so. If the afflicted person can be put again "in possession of himself" by some understanding psychologist, and this is entirely possible, then the trouble is ended. There is a pronounced tendency among the most forward-looking psychologists today, to handle these cases on the hypothesis which I have posited, and that is a definite improvement.

4. Those wherein certain hereditary forms of mental imbalance occur. These forms of imbalance are caused by happenings in other lives and are in the nature of punishment or retributive karma. To bring this about, the soul deliberately chooses for a physical vehicle that form which will have in it certain inherited taints, driven [Page 317] thereto by the Lords of Karma when the soul is unable to grip its vehicle—as is the case in the unevolved; or with purpose and intent, when the body can be under soul direction because highly evolved. I am not listing these different forms of insanity or imbalance under the various headings, as the theme is too complicated, and often there are several predisposing factors, and often only indications of trouble which may never come to anything serious. I am only giving the categories, leaving to the research scholar the task of eventually listing symptoms and assigning due cause, after much experimental work. That time is only just arriving.

5. Those in which the mind is unduly fixed and static and controls the brain so unreasonably that there seems only one point of view, one attitude to life, and no fluidity and capability of adjustment. Such individuals may suffer, for instance, from what is called **idée fixe**, or they may be completely the victim of some obsessing mental thought. Such mental obsessions can range all the way from a mild fanaticism to religious mania, with its accompanying characteristics of sadism, ruthlessness and general morbidity.

Dementia praecox comes under the first and the fourth groupings and is a blend, usually, of the factors descriptive of both. It is inherited in every case and, if not apparently physically so, is then based on inherited astral conditions, which in their turn aid in determining the physical condition. It is syphilitic in origin (often carried over from another life) and is, in this particular life, quite incurable.

Its sexual basis is demonstrated by the fact that it manifests itself in early adolescence. The patient can, however, be greatly helped, in the early stages, if the symptoms are duly recognised and his thought life directed, and the [Page 318] dynamic effectiveness of new interests is employed. A spiritual motivation and like interests can sometimes retard the development of the disease; where this is the case and the matter is handled from early life onwards, the worst climaxes can be obviated. To the extent that the patient intelligently tries to help himself, and is protected also by the intelligent care of the physician, he can offset the trouble a great deal, and particularly as far as its repetition in another life is concerned.

Many of these problems are intrinsically tied up with the past, and until the laws which govern rebirth are given to the world it is difficult for me even to explain the processes governing physical inheritance, karmic results, and also what is called retributive karma. The recognition of the subtler forms of disease, and the aid of the psychologist in collaboration with orthodox medicine (which undoubtedly has its place, as, for instance, in the administration of glandular correctives), plus right hygienic handling from childhood onward, will accomplish much and gradually stamp out the mental and brain diseases which are today so numerous and so distressing.

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**(EH 338)**

On Problems of Melancholia (***depression*)**

These problems of melancholia are difficult to place and are due to a wide variety of causes. I will list them here, and the list may at some time serve you.

1. A sense of frustration, a thwarted wish-life, or a recognition of a basic life failure.

2. A sense of dramatics, and a desire to figure importantly on the little stage of a person's life. This can often be quite unrealised and have a truly subconscious origin, or it can be a carefully cultivated habit or attitude.

3. A devitalised condition, largely of an etheric nature, which robs life of all joy and desire and presents always a sense of futility. Many women passing through the menopause experience this.

4. A certain form of breakdown in the cells found in a particular area of the brain.

5. Based on fear of insanity and of death—a baseless fear which has never materialised but which does constitute an **idée fixe**, so that the person is the victim of a well developed thoughtform.

6. A tuning-in, through oversensitivity, on the suffering and massed pain of the world. Disciples can be temporarily overcome by this.

7. This condition is very seldom brought about by any form of obsession such as "an earthbound entity or a living vampire-like person." A very few such cases have been known, but they are too rare to be considered a factor.

8. Sometimes a person tunes in on a state of massed melancholia, such as can be found in our sanitariums or asylums. The condition has then nothing really to do with him, but being sensitive, he identifies himself with those who are suffering from acute melancholia.

9. Melancholia, as a symptom of disease (not of brain disease) is also fairly frequent and will disappear when the disease is under proper treatment.

A person may be suffering from a combination of such causes, as for instance a combination, let us say of the causes in 1, 2, 6.

**(EPII, 468) *This section considers a more manic state***

The first of these is the over-activity of the mind in quite a number of cases, which—sometimes with suddenness and sometimes—slowly grasps and sees too much. It becomes aware of too much knowledge. *This produces irregularities in the organisation of the man's life, and interjects so much variation, so much fluidity and so much restlessness that he is forever in a seething turmoil. Throughout it all, he is conscious of himself as the one at the centre, and interprets all the mental activity and contacts, all the fluidity, the constant analysis to which he is prone, and the ceaseless making of plans as indicative not only of mental ability but of real spiritual insight and wisdom. This produces difficult situations for all associated with him, and continues frequently over a long period of time. For as long as this condition lasts, there [Page 469] is little that anyone can do. The constant "permutations of the chitta or mind stuff" and the perpetual "thought form making activity of the mental body" engrosses the man so constantly that nothing else registers in his consciousness. Vast plans, widespread schemes, correlations and correspondences, plus the attempt to impose them on others and to invoke their aid (with consequent criticism if this aid is withheld) for the carrying out of the mass of unrelated ideas occupy him. There is no real effort made to carry these plans and ideas through to completion, for them all remain tentative on the mental plane, in their original vague state. The effort to see more and grasp more and apprehend more of the detail and the inter-relation engrosses all the attention, and there is no energy left to carry even one of them down on to the plane of desire, and thus take the first steps towards the physical materialisation of the visioned plan. If this state of mind continues for too long a period, it produces mental strain, nervous breakdown and sometimes permanent difficulty. The cure, however, is simple.I have illustrated this type of difficulty in terms of the aspirant who, in meditation, comes into touch with the influences of the Hierarchy, and thus is in a position to tap the stream of thought forms created by Them and by Their [Page 470] disciples. But the same type of difficulty will be found among all those who (through discovery of the mental plane and the use of focussed attention) penetrate into that larger world of ideas which are just ready to precipitate on to the concrete levels of mental substance. This accounts for the futility and the apparent arid fruitlessness of many quite intelligent people. They are occupied with so many possibilities that they end by achieving nothing.* One plan carried through, one line of thought developed to its concrete conclusion, one mental process unfolded and presented in consciousness will save the situation, and bring creative usefulness into otherwise negative and futile lives. I use the word "negative" in this place to indicate a negativity in the achievement of results*.*

*(Of particular note) Such a man is, it is needless to say, exceedingly positive in the implications which he attaches to his so-called mental conceptions and ideas as to how it all should be worked out, and is a constant source of dismay to those around him. His friends or co-workers are the butt of his ceaseless criticism, because they do not work out the plan as he believes it should be worked out, or fail to appreciate the flood of ideas with which he is overwhelmed. It should be realised that the man is suffering from a sort of mental fever, with its accompaniments of hallucination, over-activity, and mental irritability. The cure, as I said above, lies in the patient's own hands. It involves earnest application to one chosen plan to prove its effectiveness, using common sense and ordinary good judgment. The light that can be contacted in meditation has revealed a level of mental phenomena and of thought forms with which the man is unaccustomed to deal. Its manifestation and implications and possibilities impress him as so vast that he argues they must be divine and, therefore, essential. Because he is still in the dramatic centre of his own consciousness and still—even if unconsciously—full of [Page 471] mental pride and spiritual ambition, he feels he has great things to do, and that everybody he knows must aid him in doing it, or else reckon themselves as failures.*

**(EPII, 44)**

***In this passage the stimulation caused by uneven integration of ray structure is considered as a cause of idée fixe.***

You will, therefore, have a man who is ambitious for power, but with right motive, because he is truly idealistic; who will fight intelligently to achieve it, but will fight fanatically to bring about these ends because his fourth ray personality and sixth ray astral body will force him to do so, and his first ray body and brain will enable him to put up a strong fight. At the same time, his first ray soul energy is seeking to dominate, and will eventually do so through the medium of third ray mental energy, influencing the first ray brain. The first result of soul influence will be an intensification of every thing in the personality. The trouble will be localised in the mental body or in the brain and can range all the way down from idee fixe and mental crystallisation to insanity (if the stimulation becomes unduly powerful or the heredity is not good.) He can express arrogant success in his chosen field of work, which will make him a dominant and unpleasant person, or he can express the fluidity of the third ray mind which will make him a scheming manipulator or a fighter for immense schemes which can never really materialise. In this analysis I have not considered the tendencies evoked in past lives and lying hidden in the subconscious, or his heredity and environment. I have simply sought to show one thing: that the conflict of energies within a man can produce serious situations. But most of them can be corrected through right understanding.

**(GWP ,29)**

Strongly mental types are subject to illusion. This illusion is in reality a condition wherein the aspirant is being definitely controlled by:

1. A thoughtform of such potency that it does two things:

a. Controls the life activity or output.

b. Tunes the aspirant in on the mass thoughtforms, which are of a similar nature, and which are built by others under the dominance of a similar illusion.

*This, in its worst aspect, produces mental insanity or* ***idée fixe****, but in its least dangerous and normal result produces the fanatic. The fanatic is usually—even if he realises it not—a bewildered man, who has a potent idea of some kind or another, but who finds it quite impossible to integrate it into the world picture; to make those needed, and often divinely directed, compromises which profoundly help humanity; to find the time or place for the realities which are within his natural grasp.*

*2. When a man is highly developed, the mental illusion is built around a definite intuition and this intuition is concretised by the mind until its appearance is so real that the man believes he sees so clearly that which should be done or given to the world that he spends his time endeavouring [Page 30] in a fanatical manner to make others see it too. Thus his life slips away on the wings of illusion and his incarnation is a relatively profitless one. In a few rare cases, this combination of intuition and mental activity produces the genius in some field or another; but then there is no illusion, but clear thinking, coupled with a trained equipment in that particular field or enterprise.*