

Dreams and Prophecy: The Mantic Interpretation on Psychotherapy

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ABSTRACT

The mantic and prophetic dream interpretation is an ancient practice that has been applied in different contexts and at different historical times. With Freud's psychoanalytic proposal to interpret patients' dreams, the meaning of dream content and experience becomes a central element of the psychotherapeutic process. Freud obviously had an enormous cultural knowledge of ancient texts and ancient practices. The incubation technique in Freud's psychotherapeutic proposal was considered an innovative psychological strategy for understanding the patient's thoughts and feelings, but little attention was paid to the mantic quality that had distinguished the incubation process and dream interpretation for many centuries and across several civilizations. In recent decades, the mantic meaning of dreams has been considered useful within the ethnopsychiatric approach to restore the patient's ability to develop a new perspective in relation to a traumatic situation. In this article I will try to explain the use of mantic dream interpretation during the psychotherapeutic process.

KEYWORDS: mantic dreams; prophecy; psychotherapy; ethnopsychiatry; dream-interpretation; trauma

1 INTRODUCTION

One of the oldest divinatory practices is to interpret the signs in a dream. When men began to imagine something, he also began to create and consequently to interpret something that seemed mysterious and unknown to him. Dreams belong to this dimension of the unknown.

Recent research in neuroscience attempts to explain the dream experience as a consequence of several cognitive processes, one of which is a particular brain dynamic in which neurotransmitters and biochemical elements interact. From this interaction, the brain generates bizarre episodes that are difficult to relate to the dreamer's real life (Hobson, 2002). In other dreams, you can easily identify with a "realistic style" and understand that the dream is a reformulation of something you have experienced in your life.

Normally, we can define two levels of consciousness: when we are awake and when we are asleep (Oppenheim, 1956). These two levels of consciousness influence each other. Our life experiences, attitudes, and decisions can be changed according to this interaction between the waking and dreaming experiences. It has happened to all of us that we wake up disturbed from a nightmare or dream about a certain situation that distresses us. The impressions we experience during a dream are powerful enough to affect our emotional state and behavior. A dream can be enough to solve a problem, create music or simply warn us about someone or something.

The dream code is translated into scenes, symbols, sensations, and feelings that reflect our past, present, and future (Nathan, 2011). This statement could be irrefutable, yet the mantic quality of the dream seems to be an unusual and aberrant element. Dreams as a revelation of the future can be considered an archaic method or even superstition: How can we scientifically explain the possibility of a mantic quality of dreams?

For our ancestors, who lived in a time when cosmic vision and "earthly matter" were not so far apart, it was obvious that the dream presented itself as a kind of doorway, a passage between the human and the non-human worlds (Hillman, 1979). Going through this door, one can visit other worlds or receive important messages or nocturnal visitors from the underworld that tell us how to cure an illness, how to behave in an important situation, or how to solve a certain problem.

2 DREAMS AND THERAPY

Human beings, in general, sleep almost a quarter of life. The importance of dreams is therefore undeniable. Over the years, researchers have worked to find an answer to the function of dreams. Freud (1997) argued that dreams should "purge" the preconscious daytime residue through a masking process of our desires and urges. This process would help the dreamer integrate his or her life experiences. In order to understand what experience this content refers to, the dream represents a kind of symbolic code that has a psychological meaning that can be understood and interpreted. Interpretation has the main function of transforming the manifest content of the dream into a latent content. The interpreter searches for a meaning through a process of decoding a sequence of images, scenes and signs in order to understand to which life experience the dream refers. Freud emphasizes that the dream is not merely unconscious material, but a form of thought presented in a dream-like form. This form may represent ways to satisfy a desire (repressed or removed) or to resolve conflicts. Chalfen (1964) underlines an existential feature and uses an interpretive approach based on the patient's feelings. The author proposes a model based on the free associations to the dreamer's life experience. It is important that the patient reveals his emotions and ideas about his dream without being manipulated in any way. Kaplan (1973) suggests a rational perspective to support that unconscious material

can be shared by members of a group. A similar concept is found in the analytic approach, which is based on an archetypal model and symbolic interpretation (Jung, 1961; von Franz, 1988). For the neurophysiologist Jouvet (1997), the main function of a dream is the regeneration of a person's identity. According to the ethnopsychiatric method proposed by Tobie Nathan (2011), the interpreter can make the dream work in the real world. Therefore, the interpretation is not only a narrative, but can be a precise action that can contribute to the healing process of the patient. In the ethnopsychiatric method, the psychotherapist must collect the somatic stimuli, the thoughts and ideas that remain from the dream. In psychology, it is considered that the dream is a "special form of thinking" that is developed during sleep.

Dream interpretation according to the ethnopsychiatric method proposes to begin the analysis of the dream by asking the patient for his impressions and free associations to images, sensations, words, characters, and actions, or to dramatize the dream in order to understand the affinity between the scene depicted and the scene experienced in real life. Dream dramatization occurs whenever there is an impasse, either because the dream is vague and the patient cannot remember further details, or because it is difficult to achieve an association between the life story and the dreamed scene. In these circumstances, the patient is asked to dramatize the scene so that we can understand the connection between the life events and the dream.

In psychotherapy, the dream indicates the transformation and development of the patient's suffering. It can therefore serve as a diagnostic tool to understand how the patient is doing. The fears, worries and psychological suffering are highlighted in a dream. Nobody dreams about something he is not worried about.

Nathan (2011) explains that the logical sense of a dream arises from an idea. It is important to note that a dream narrative is always a personal experience. The dream can be defined as a form of virtual reality in which the images and figures usually have a therapeutic function because they show a new path. The dream represents a problem-solving formula. Nathan states that this is the reason why, even if most psychological theories deny the predictive capacity of the dream, the interpretation will eventually work as a prediction (Nathan, 2011).

A dream interpretation always has a divinatory function, for it is primarily directed to the future; it is directed to the past only when it reveals a hidden event, a rupture, a transgression, or a traumatic event (Nathan, 2011). In the ethnopsychiatric method, the dream is always a transformation of images into words, it is a masquerade that links the divinatory function to our destiny (Sala, 2013). This, moreover, is not a new idea, it is a common feature from Mesopotamia to the Roman and Greek emperors (Artemidorus Daldianus; Oppenheim, 1956; Wickkiser, 2008), and from Freud to the contemporary Tobie Nathan. The idea that we can give a patient the ability to imagine the future, using the divinatory function and the idea of destiny, presupposes that a positive interpretation can be an input to accomplish a transformation and restore the possibility to rebuild an idea of the future. This ability to imagine a positive future is impaired in most cases of severe suffering and trauma. In this procedure, the psychotherapist must collect the dream material that can be used to create a positive prophecy. In a normal state, it is difficult for the dreamer to remember a complete dream experience or event, but in trauma patients the problem may be a complete inability to sleep and dream or/and the patient repeatedly recalls the traumatic event in a symbolic or realistic form.

In the case of trauma or psychological distress, it is how you tell a story that may or may not enhance a patient's recovery process. Patients come to therapy because there are compelling themselves to live the wrong novel. However, creating a prophecy is a complex process. The psychotherapist must make logical sense of a magical operation, explain the images that "populate" the dreamer's mind, and convince him or her to be the protagonist of the prophecy he or she has dreamed. In this procedure, the psychotherapist must also have a thorough

knowledge of the dream model, the cultural background and the particular characteristics of the dreamer (Nathan, 2010/2012).

2.1 Time and consciousness: present, past and future

Over the past decade, researchers have been trying to understand the relationship between time and consciousness. Time is crucial to memory because it establishes a chronology that helps define scenes in a sequential framework, thus giving logical meaning to events. In dreams, memory is fragmented. To reconstruct the dream novel, it is important to remember the different dream scenes and images that composes the dream.

Macduffie and Mashour (2010) explain that there is a unique state of consciousness that encompasses three temporal dimensions: experiencing the present, processing the past, and preparing for the future. The three dimensions of time - past, present, and future - cannot be easily separated. During the dream, we can assist to a kind of modeling process in which the three temporal dimensions are interconnected. When we wake up, we organize our thoughts along an internal timeline. During this process, we move through the present and often make associations in our memory that plan future actions. The neural system is engaged in this process: remembering the past and imagining the future (Schacter, Addis and Buckner, 2007). The thoughts associated with the future are recombinations of perceptions of previously experienced events. Some authors suggest that the ability to construct an episodic hypothesis for the future is an adaptive advantage (Friston and Kiebel, 2009). Revonsuo (2000) explains how dreams can be a preparation for future consciousness. The author suggests that dreaming is a mechanism to better cope with life-threatening events. It is a form of phylogenetic memory: dreaming as an evolutionary process where our ancestors can transmit a memory to us for survival. This idea is consistent with the psychogenealogy hypothesis: our tendency to repeat the actions of our ancestors because we have embodied a genealogical memory and internalized thoughts, actions that we share with them. It has also been proposed that our memory is only an epiphenomenon of our ability to project (Suddendorf & Corballis, 2007). This may explain why, in most cases, a patient affected by trauma or mental distress is unable to easily plan or positively envision the future.

A central question for understanding the neurobiological mechanisms that characterize the dream experience is: when do we dream? This question is very important in explaining a common belief in different traditional cultural systems. As Nathan (2011) points out, the dreams that are made in the morning are those that relate to the future, instead dreams that are made during deep sleep, in the first part of the night are related to daily life experiences and life events.

From the early studies of Nathaniel Kleitman, who became famous for discovering REM sleep, it seems obvious that dreams occur during this specific phase (Lavie, 1996). However, more recent studies have shown that dreams can also occur during N- REM sleep, just as REM sleep can occur without dreams (Solms, 2000). REM sleep occurs predominantly in the morning, instead NREM sleep is associated with heavy sleep (Cavallero, Cicogna, Natale, Occhionero & Zito, 1992). The fact that REM occurs mainly in the morning may explain why the dreamer can easily remember and report the REM dream experience compared to N- REM (Baylor & Cavallero, 2001). In addition, REM dreams are more bizarre and have more emotional elements (Scarone et al. 2008; Suzuki et al. 2004). The NREM dream report instead shows more episodic memory content (Baylor & Cavallero, 2001), which could explain why our brain produces more content about our ordinary life and life events in the first part of sleep. According to Llewellyn (2016, p.11) “Dream bizarreness may be an aspect of the prospective coding process rather than a concrete signal of things to come. A prospective code, generated in REM dreaming, may identify a personally salient, non-obvious probabilistic pattern in past events

and portray that pattern in an unconscious, sensorimotor image which, if mobilized as a predictive code in wake, supports cognition in wake through rapidly co-ordinating sensory input with appropriate action". However, I believe that it is precisely this prospective coding and the probabilistic pattern that can explain the predictive factor of a mantic dream, if we consider that the three dimensions of time are interconnected and work together to model our consciousness. So, it is possible to collect a sign in a dream that reveals the future events.

The neurochemical environment of REM sleep benefits the dreaming experience as the prefrontal cortex is deactivated, which decreases the insight, judgment, self-awareness processes and working memory function (Muzur, Pace-Schott & Hobson, 2002; Voss, Holzmann, Tuin & Hobson, 2009; Perry, Ashton, & Young, 2002). Emotional stimulation is also increased during REM sleep, as the amygdala and paralimbic cortex are appropriately activated. Finally, there is a great tendency to create fantasy material, as the visual spatial imagination area of the brain - the parietal operculum - is activated during this phase of sleep (Macduffie & Mashour, 2010).

There are some exceptions to this neural process. The dreamer may in some cases be aware of the fact that he is dreaming. The most famous phenomenon is the case of lucid dreaming, in which the dreamer is not only aware that he or she is dreaming but is also able to manipulate the dream experience (Stumbrys, Erlacher, Johnson & Schredl, 2014). This is important for this research because in some cases, after an induction training with the patient, one of the solutions for finding a mantic positive effect of a dream experience could be the creation of an artificial environment following the lucid dream procedure. In this case, the spontaneous experience would be eliminated, and the psychotherapist would have to be able to put the patient in hypnotic state during the induction exercises.

3 MANTIC DREAM AND PROPHECY

Dreams are the door to the house of the Lord of the Dead, says Hillman (1979). What exists beyond the dead is a mystery to us. If it is true that we go to the underworld every night, or at least we can say that we go to an unknown space and time, then this evidence can also be used to develop the idea of predestination and prophecy in a positive sense. This means trying to find a functional narrative based on a dream interpretation in order to solve a trauma or a psychological suffering. For this reason, the interpretation cannot be created by the dreamer himself (von Franz, 1988). Patients suffering from any kind of mental distress are not able to develop a positive theory about any aspect of their life.

The same evidence can be applied to experts. We all have theories about ourselves or about what is happening in our lives. When we interpret our own dream, we will introduce into the dream characteristics, additional elements, ideas and thoughts that might deviate from the main theme of a particular dream. A dream interpreter is needed to determine whether the dream is substantial or meaningless in its appearance and, consequently, how it can be interpreted and translated for the dreamer. When the psychotherapist gives an interpretation, he gives the patient a new input, a new thought in relation to his dream, and thus he already changes the patient's mind. Even if his interpretation is rejected. The interpretation itself always has an impact on the patient's future.

In general, dreams can be translated in at least three ways: 1. interpretation based on an intuitive or deductive understanding of associations; 2. interpretation based on some form of quantitative data, that is, a sign is interpreted based on similar or the same previous signs that have been systematically observed and analyzed; 3. the interpreter may verify the deity's message using magical practices, this practice is especially common in traditional societies.

In a psychotherapeutic treatment, it is important to first understand the meaning that the patient attaches to a symbol: what associations does the patient build? (Nathan, 2011; von Franz, 1988). Only after this clarification can the psychotherapist formulate his interpretive theory. The goal of this form of interpretation is to provide the dreamer-patient with a precise action to take in the real world.

Nowadays, in a society where the connection with the deceased has been completely forgotten, at least in Western cultures, it is essential to begin the procedure with a reminiscence of the family's ancestors, pointing out their strengths and limitations. This is a common procedure when psychotherapists collect the patient's biography. This information is important in understanding which ancestors may be the mantic dream messenger. In most cases, this messenger clearly shows up in the dream and gives a precise information. In other cases, the prophecy is constructed by the psychotherapist together with the patient.

Prophecy is a solution to a problematic situation of the patient. It may emanate from a new thought, a specific action, or a sequence of actions that the dreamer must perform.

Some examples are ordering an offering, a prayer, a vow, a conversation with a certain person, a letter, any action that needs to be performed in real life. These actions cannot be considered as the elixir to solve the problem. They are the beginning of a path that will eventually help the patient to overcome his suffering and build a future. Moreover, it is not always possible to make a positive prophecy. Sometimes, when a terrible nightmare occurs and the bad feeling remains with the patient, this cannot be ignored. In such cases, it is necessary to proceed with a prescription that will dispel the nightmare and the terrible feeling that something bad is going to happen. This prescription can be a small ritual or a prayer if the dreamer is devoted to religion. The idea is to protect the dreamer not from evil, but from his "evil ideas".

4 CASE STUDY

In these case studies I will present three different mantic dreams and analyse the interpretation in favour of the patient.

4.1 The magic dishes

Lucy is a single woman, 45 years old. In the last year, her life, she says, began to go off the rails. Her fiancé leaves her after a 10-year relationship, and just a few months later she loses her job. She is very anxious, discouraged, suffering from depression and insomnia. When she comes to therapy, almost a year has passed during which she has been looking for a job without success. She is struggling to keep her house, as she says, "*It's the only thing I have.*" She recently received a letter from the bank informing her of the repossession proceedings. Lucy cannot remember her dreams because she sleeps 2/3 hours a night and when she is exhausted, she takes a psychotropic drug to sleep. This is a classic case where the patient is completely absorbed in her suffering, which deprives her of the ability to sleep and remember her dreams. Finally, after a long period without dreams, Lucy has a dream to tell:

I was washing the dishes after lunch. I was alone in my mother's kitchen. Suddenly a man comes to the door. I was very angry and began to wash the plates as quickly as possible and throw the dishes to the entrance of the house, where the man looked at me.

I asked her why she was angry; she replied that she absolutely did not want the man to enter the house. It was not clear to me if "the man" stood for her lost fiancé or if it was the bank manager. It was probably both, but I chose to deal with the looming problem of losing her house. Lucy dreamed this dream a day after she received the letter from the bank manager. She was angry and scared because, as she told me at the beginning of the session, the house was

the only thing she had. For me, the dream was a clear message from her future. There was no need to present my interpretation. Lucy understood the meaning of her dream: "*Although it was not a good dream, I wake up with a sense of relief. I feel strong! I know now that no one will take my house away from me!*". Weeks later, she told me that with the help of her mother, she had made an agreement with the bank manager to continue paying for the house with a lower loan.

4.2 The goodbye earrings

Mary is a young widow, 37 years old. Her husband died four years ago. Two years ago she came for psychotherapy. After a long period of mourning, one day she has a dream that warns her that her grief will come to an end:

"I was in a church, alone. I was so sad and crying. I had been in a car accident, with me in the car was my son, he was a boy, blond hair like his father, so beautiful, he was 12 years old. And he died in the car accident and I felt so guilty and so sad. My only son. After my husband now my son... I was in the church, it was the funeral ceremony, I was crying and crying. Suddenly I felt someone was on my back, I turned around and saw my husband with a woman next to him. A beautiful young woman. Oh, I was so sad...how could he show up to our son's funeral with his new girlfriend...?"

Mary had no children. The dream announces a change in Mary's grief. In this session we talk about the possibility that her husband might already have a new family in the life beyond the grave. Mary constantly rejects the possibility of remarrying or starting a sentimental life with a new partner. Months later, she dreams another dream:

"I was traveling by car; my husband was driving and I was sitting next to him. It was a sunny summer day. At a certain point, he stops the car on an incline and hands me a gift. It was two ruby earrings... He put them on my ears, one by one, caressing my face. Then I said to him "I will always be by your side", and he kissed me on the forehead".

I suggested my interpretation to Mary: it was a goodbye dream. Mary rejects this interpretation. She does not want to separate herself from the memory of her husband. As she often said during the sessions, dreams are the only place where she can still meet her husband. It is clear to me that the dream also announces that someone is coming into the patient's life. When I connect the two dreams, there is a classic representation of an ending: the funeral and the ruby earring (in many cultures, the ruby is the jewel associated with death and love). Mary's words to her husband also seem to be a way of saying goodbye, just as the kiss on the forehead is a common gesture of blessing. Mary resisted my interpretation. But the prophecy was to come true. This was the last dream she had with her husband, and after a few months she met a person who became her new companion.

4.3 Bloody future

Dorothy is 42 years old and has been trying to get pregnant for about 6 years. Two years ago, she applied for medical help. She has already undergone two artificial inseminations. Both procedures ended in spontaneous abortion. Obviously, this situation has caused the patient great distress. In one of the last sessions Dorothy tells me a disturbing dream:

“I was sitting on the water and blood was running from my mouth and from my vagina. My sister stood peacefully in front of me and looked at me”.

I ask her if she has started a new treatment. She had started the last fertilization treatment. It is quite clear that the dream either represents her anguish and anxiety or contains a mantic prediction. However, this prediction is not positive. For me, a new abortion was about to take place. The scene needs no interpretation. In addition, Dorothy's sister, who can be considered our messenger, consciously chooses not to become a mother. This interpretation should be avoided, of course, because not only does it not help the patient, but it could cause even more suffering or anticipatory stress and anxiety.

Dorothy, however, is horrified after this dream. She says that only her sister can reassure her in the dream. So we talk about her sister and about women who do not want to have children, and at the end of the session I give her a prescription. I explain to her that in various traditional contexts (Jewish, Islamic, Mesopotamian, Egyptian, etc.) the first thing we do when we have a bad dream is to tell a person the dream, as it was believed that this process would purify the dreamer and the dream. I told her that if she wanted to get rid of the dream, she could follow the advice of these traditional practices: Take a pot of water, tell the water the dream and pour the water away.

5 CONCLUSION

The interpretation of a dream as prophecy is not a common procedure and can be used only under certain circumstances. These circumstances are: 1) the patient is at a turning point in the psychotherapeutic process; 2) there is a need to encourage the patient to a new and creative action or thought; 3) the dream representation has a clear mantic meaning and can be transferred to the patient; 4) the patient is obsessed with a dream and cannot overcome the negative effects of the dream.

The mantic interpretation is useful only if the patient is able to accept and work out the interpretation. As we saw in the first case study, it is often the dreamer who first understands the meaning of the dream. Obviously, dreams are a complex subject, and it may happen that in a single dream we consider several situations and different life experiences that overlap in the same image.

Recent neuroscientific studies help us understand how this can happen in our consciousness. The fact that past, present and future are interconnected and can be represented in one and the same dream experience could be the beginning of an interesting field of research to understand some phenomena as prophecies. It can also be important to understand if there is a privileged dream phase where we receive messages from our ancestors or mantic information. This can help us identify which dreams have a predictive meaning or a purifying effect. Besides this question, which can be interesting especially for the technical procedure, this dream interpretation method is about restoring the ability to formulate projections from a previous experience and to formulate a positive prophecy.

The dream has always been a narrative to be deciphered. The problem that a psychotherapist must overcome in interpreting a dream is: what is the right story for my patient? And how should I tell it to him? In Western cultures, the notion of divinity, spirituality and ancestor worship has completely disappeared. Asking a patient to purify himself of a terrible dream, as we saw in the third case study, can be seen as superstition or even incitement to paranoia. However, these ideas only reflect the contemporary thoughts that Western culture has about traditions and ritual practices that not so long ago were a regular way to deal with a problem, even in Western culture.

The dream experience is an enigmatic experience, personally and collectively. This enigmatic quality helps to create and manipulate the idea of predestination, protection, and a sense of community. The concept of predestination can help the patient think about his future and create a possible transformation of a present or past situation that is causing him suffering. The sense of protection and community helps to counteract the sense of loneliness and isolation that characterizes much psychological suffering.

CONFLICT OF INTEREST

“Author declares no conflict of interest.”

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