The Needle in the Ego Era: A History

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Abstract

This article considers transgressive self-injection among substance abusers as a historical phenomenon and 'needle fixation,' a contested concept in psychological and addiction literature. It suggests that the movement of the intravenous drug use from medical contexts to self-enjoyment, or what Lacan would call 'jouissance' occurs over the 'ego era of history.' The medical instrument of the needle, its union with the vein of the user and its appropriation by and integration with the self of the user reflects a historical movement, where the self and subjectivity, has taken centre stage. It is from this context that needle fixation as a form of what Lacan would call "jouissance" emerges.

Keywords

Needle Fixation, Jouissance, Ego Era, Transgression, Transgressive Jouissance

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The Ego Era begins in the 17th century and it's not done yet.

Brennan, 1993

The Needle in the Ego Era

In this paper, I consider non-medical self-injection as a practice that has emerged in the modern era. It was at the turn of the twentieth century that the regulation of the administration of drugs such as morphine and cocaine was passed from the medical establishment to the law (Latimer & Goldberg, 1981). In what follows, I will consider the appropriation of the needle from the medical establishment by the transgressive ego of the self-injector as the historical context in which the concept and problem of 'needle fixation' has emerged. I claim that Brennan's (1993) theory of history, based on Lacan's notion of the ego, can adequately describe the development of transgressive non-medical self-injection as a social and criminal problem. This has implications for public pedagogies, as the transgressive learning and knowledge associated with the history of needle use and public discourse, where it has primarily emerged in non-institutional environments, constitutes learning drawn from experience, that is often labelled deviant by society and criminalised by the law. This particular history of the development of a branch of addiction experience and study, has emerged and continues to evolve outside conventional educational contexts. Through this study, we might gain knowledge of how transgressive practices, such as intravenous drug use, can emerge in transgressive subcultures and then the pedagogical value of community treatments for substance use, and the knowledges that substance users hold in their life experience.

The history of non-medical self-injection occurs along the timeline of Lacan's ego era. The reaction to Pates and McBride's (2005) paper on needle fixation is not entirely unlike the reaction of the medical establishment to Freud's recommendation of self-injection of cocaine. This also resonates in Samuel Pepys reaction to Christopher Wren's experiment of killing a dog with morphine in 1656, while discovering the existence of the bloodstream using what he called a 'syringe', even though, as McBride, Pates and Arnold note, the syringe was yet to be invented. Wren injected and killed the dog with a 'crude device consisting of a quill and a bladder' (McBride, Pates & Arnold 2005). Doctor Phillips in the 1800s 'personally discontinued' the recommendation of self-injection. This episode in the history of self-injection reveals the emergence of moral panic that continues to re-emerge in contemporary times as the ego moves from the wings onto centre-stage, fuelled by the 'attraction of technology'. The recurring response of the non-addict to the addict's behaviour is indicative of both the fixation of the addict on the needle and the moral panic reaction (Latimer & Goldberg 1981).

When Freud wrote his controversial papers on the use of cocaine, he did so under the guise and protection of medical authority (Byck, 1975). Contained in the documents are countless descriptions of self-injection and recommendations of injected cocaine as a cure for various ailments from localized areas of pain to mental anguish and, in the case of his friend Fleischl-Marxov, a suggested cure for a chronic morphine habit. Freud's 'cure' of injected cocaine killed Marxov. Loose (2002) has recently, or in the last couple of decades, suggested this event contributed significantly to what he calls a relative 'silence' of psychoanalysis on the subject of addiction. *Cocaine Papers* contains specific reference to Freud's recommendations for cocaine use. Freud lived and worked in a period of history I would classify as the birth of prohibition, which began around the turn of the twentieth century. The death of Marxov can be seen as a moment in history in which the ego moves from the wings to centre stage, when medical experimentation

becomes the harmful self-administration of enjoyment, which obviously has a connection with masturbation, as observed by Loose (2002) in relation to addiction and myself with regard to self-injection.

The work of McBride, Pates and Arnold (2007) in *Injecting Illicit Drugs*, as distinct from their work on 'needle fixation' and McBride's historical account, reveal a phenomenon that began with the assumption that the body was the property of the medical establishment. Self-injection was recommended by medical practitioners with the underlying assumption that the vein would be consciously avoided (McBride, Pates & Arnold 2005, p.43). This assumption proved incorrect when heroin and cocaine addicts from Cairo discovered the vein. However, McBride, Pates and Arnold refer to Doctor George Jones who began 'hitting veins by accident', while in *Flowers in the Blood*, Latimer and Goldberg (1981) somewhat controversially suggest that the practice of self-injection had potentially been going on for more than a century prior.

The history of non-medical, transgressive self-injection lends itself to Brennan's (1993) use of Lacan to create a theory of history. The ego of the addict has emerged from the shadows to appropriate the medical instrument of the needle and absorbed it into a body of jouissance. The development of the problem of needle fixation and the enjoyment of self-injection indicates that the body of the user has reinvented this medical procedure as a form of enjoyment.

As the ego era and prohibition of injectable drugs progressed, substances such as morphine and cocaine were criminalized, although heroin remained legal and available for some time. However, the nature of the discourse representing injection underwent a serious transformation. A more stark comparison can barely be imagined than that between some of the narratives in *Cocaine Papers*, written in the latter part of the nineteenth century, and Burroughs' (1953) *Junky* from the 1950s, which pre-empted the rebellion of the sixties. By the time Burroughs self-injected heroin and morphine in the same way Freud had self-injected cocaine, the needle was a powerful symbol of transgression. Freud's experiments were frowned upon by colleagues and, although cocaine was not illegal at the time, *Cocaine Papers* notes the 'resistance' of the medical establishment. In Burroughs' account, the needle, or evidence of its use, becomes a method of policing. 'The Drug Addicts' Law', in which law enforcers, whom Burroughs calls the cops, check addicts' arms for needle-marks and arrest them for being a drug addict. Their only crime is evidence of self-injection, illuminating the real nature of such a 'crime.' These addicts were not arrested for possession or use of a prohibited substance but for having used the needle as a form of self-enjoyment.

Whilst the articulation of the law and its development overtly claims to be founded on concern over 'substance' such as, for example, the treaty between Britain and China signed in 1905 and labelled the 'accords on opium', the enforcement of such laws, it seems, is based on 'mechanism' and moral panic (Latimer & Goldberg 1981, p.223). This represents the fear of extinction self-injection elicits in the collective. The reaction of the law to self-injection is to forbid it in an effort, according to Goode's (2007) moral panic, to alleviate the 'threat'. Whilst, for example, Latimer and Goldberg explain the nature of this threat as founded in the substance, I concur with McBride, Pates and Arnold (2007) who imply that the 'threat', articulated in these historical examples, is in the mechanism of injection and the misuse of the medical instrument of the needle for the purpose of enjoyment.

> Before the nineteen twenties, this practice [intravenous/self-injection] was unknown despite the knowledge among medical practitioners…[and] may have been an accidental discovery that spread among heroin users (McBride, Pates & Arnold 2007, p.6).

The example from Burroughs, where the body of the addict was policed for needle-marks, illustrates the way in which a medical procedure, injection, became a method of detecting and

prosecuting the crime of drug-use. The power of policing addiction was transferred from the authority of the medical profession to the authority of the law. The fact that the law began policing the process of self-injection (the 'mechanism') under the guise of the banned substance, reveals an underlying discomfort or a 'moral panic' reaction that is not so much focused on the substance as the enjoyment of administration. The law, it seems, was not enforcing protection of its citizens from a dangerous chemical substance - itself a 'moral panic reaction'- but a practice of self-enjoyment, a kind of sublimated masturbation.

Latimer and Goldberg (1981) observe that the 'narcotic laws' in the United States began with subtle racial overtones. This is significant for locating both the needle-fixator and the moral panic in a social context involving an 'us' and 'them' dichotomy that exists in the background of contemporary treatment approaches. Led by Dr. Hamilton Wright, the authors observe that he 'had nothing against snide racial slurs if they won converts to the anti-drug campaign he was waging in 1910' (Latimer & Goldberg 1981, p.217). There was an unquestioned idea that the oriental, Aboriginal and African American races the globe over were somehow more susceptible to 'the evil of drink … and opium' (Latimer & Goldberg 1981, p. 220). Reverend Wilbur Crafts, a prominent missionary in the Orient, chimed into the debate 'lobbying in Washington for endorsement of an international temperance measure to outlaw liquor and opium among the child races'(Latimer & Goldberg 1981). The mingling of the obscure jouissance of the black man and 'the addict' has contributed to shaping the social identity of 'the junky' (Galioto, 2010). This, coupled with the injections of dogs and 'malefactors', contributes to a prevailing discourse of power relations that accompanies the history of addiction and the law.

Wright's (1909) insistence upon stamping out the opium problem, which he attributed to the Chinese and Arabs, merely resulted in replacing addicts' use of morphine and opium with heroin, which remained legal and easily accessible. However, the United States 'Harrison Act' (1914) raised awareness of the problem of addiction by moving toward prohibition and in turn transformed a bodily jouissance for which the appropriate authority had been medical practitioners, into a jouissance of transgression, or a criminal act, accounted for by law. The 'Harrison Act' (Terry 1915) was significant in terms of my discussion of needle fixation because its focus was particular to *injectable* drugs and began the global push to criminalize non-medical use of morphine and eventually cocaine and heroin. This did nothing to end the problem of self-injection but merely transferred the prevailing authority from the medical profession to the lawmakers and enforcers, and probably encouraged the user toward the intravenous route as availability of drugs became scarce. It is in the body's journey from ownership by the medical profession to ownership by the law that the character of 'the junky' is born.

The recent legal concept of 'status offending' is relevant here. Whilst 'status offending' is a term used to refer to laws specifically to youths, *Junky* reveals new prohibitionist laws were specifically directed at addicts. The above observation of 'Wright's insistence' is an example of status offending according to race. Police checking the arms of citizens for needle-marks is evidence of how the status offending of drug use was detected amongst needle-using addicts. The status offending of the addict originates from their being, their identity and is comparable to the treatment of the juvenile by the law (Maxson & Klein 1997). By extension, the very act of writing *Junky* is a status offence committed by Burroughs as an addict in the context of the creation of discourse of transgression that openly defies the law.

The distinction between transgressive jouissance and the jouissance of transgression is significant in understanding 'the discourse of transgressive jouissance' in relation to *Junky*. Over the course of history, it seems that the discourse describing non-medical self-injection has shifted from scientific description to the realm of transgression. The transgressive jouissance of injecting

cocaine documented by Freud in *Cocaine Papers* almost inexplicably becomes the jouissance of transgression in *Junky*. I say almost inexplicably because I believe it can be explained using Lacan's 'fledgling theory of history' expounded by Brennan (1993). We can consider the ego to have entered from the wings and taken centre stage in the period between the publication of *Cocaine Papers* and *Junky*.

The Discourse of Transgressive Jouissance

Transgressive jouissance refers to an enjoyment that is transgressive only in relation to a law that prohibits such an enjoyment. For example, Freud's cocaine use is not a transgressive jouissance while Burroughs' is, and our understanding of these activities and their impact on the body and what they mean is in direct relation to the law. Whereas the jouissance of transgression is the enjoyment of 'trampling Sacred laws … under foot', transgressive jouissance is dependent on the law for its quality of rebellion (Lacan 1959, p. 200). Burroughs' deliberate defiance of the law and his engagement with the 'criminal' element is indicative of transgression while Freud's use of a medical procedure to administer self-enjoyment is transgressive. When I refer to *Junky* as 'the discourse of transgressive jouissance', I am noting the union of Lacan's two distinct concepts of transgressive jouissance and the jouissance of transgression, a union that occurs in the social reception of the text. Thus, it is the discourse that is transgressive.

Loose (2002) connects *Cocaine Papers* and *Junky*, calling them 'the phenomenology of addiction' but, in a veiled reference to Burroughs (1953) *Junky*, he says 'the jouissance of transgression is part of the symptomaticity of the jouissance of addiction' (p.258). He is careful not to label Freud a drug addict and yet freely refers to Burroughs as such, under the pen name William Lee. The use of a pseudonym shows the cultural appropriation of the addict's body and the failure on the part of all concerned, perhaps including Burroughs himself, to distinguish between the body and the text. Thus the 'discourse of transgressive jouissance' is transgressive because it represents a body of jouissance in relation to a law that prohibits the jouissance of drug use. However, the jouissance of transgression is well and truly present in Burroughs. The text begins with a reference to 'a hard-working thief', 'a bad character' and 'an army discharge', so his drug use through the needle is a further manifestation of his innate defiance of the law or criminality. Whilst this defiance is abscent in Freud, both seemingly represent 'the phenomenology of addiction' according to Loose.

In contrast to Freud's transgressive jouissance, Burroughs' crime is the crime of a criminal, the jouissance of transgression. The existence of texts such as *Junky*, the 'trampling' of 'sacred laws' and the underground activity of transgressive non-medical self-injection, an activity associated with addiction which Loose identifies as having an unconscious cause, suggests a subtle historical movement to an era of the id. Brennan's sense of Lacan's history locates non-medical self-injection in the ego era. However, the history of the needle, the powerful unconscious lure that creates the crime of its jouissance in relation to a law that prohibits jouissance and mounting moral panic all appear to have unconscious origins in the notion of 'fixation'. This suggests that whilst the bulk of the population may be temporally located in the ego era of history, the presence of the id in various social or 'anti-social' environments is evident in the realm of transgression. Self-injection represents one such transgression, where the id, not the ego, is the driving force behind this cultural behaviour.

> What is important is the coming together of two principles: that of introducing a substance into the body and the mechanisms by which the syringe acts as a pump (McBride, Pates & Arnold 2007).

When the body becomes the context for the location of injection, the 'crime' of jouissance has already been committed by this emphasis on the body. Historically speaking, it is the ego remaking

the world in its own image and in Burroughs this is direct challenge to authority of the Law. In both Freud and Burroughs, there is an alienation of the self from the body and, in Burroughs, the appropriation of the body by the state. Historically speaking, this appropriation of the body, first by the medical establishment and then by the law, represents a key motivator for the user to reclaim the body and self-determine through needle use and self-injection.

Avoidance of the vein was considered best practice, even though Hunter's invention of the needle in 1858 was said to have 'improved' on Wood's syringe by 'adding a pointed needle with a laternal opening' (McBride, Pates & Arnold 2007, p.53). The needle then was groomed for a union with the vein, although this practice was forbidden then by the medical establishment. The movement of authority from the medical establishment to law enforcement represents an institutional confusion between a transgressive jouissance of the body and the jouissance of transgression. This confusion persists to the present day. Over the course of time and in a multitude of contexts, the three elements present at the injection site, 'body' 'substance' and 'mechanism', are joined by jouissance and crime (McBride, Pates & Arnold 2007).

Freud's description of the 'young doctor' with what contemporary discourse classes as a 'needle fixation' or 'the compulsion to inject' certainly suggests that union with the vein was common practice long before it was recognized as such. For 'skin-popping' or injecting under the skin as opposed to puncturing the vein was the only recognized practice. What is apparent in the descriptions of the historical development of non-medical self-injection is the imposition of limits on needle use from the medical establishment. The transgression of those limits by an evolving body of jouissance which in turn is subsequently linked to prohibition of the substance allows the law to react against the transgressive body. The phenomenon of 'moral panic' in relation to self-injection finds its earliest murmurings in the historical development of the needle, its appropriation by the evolving body of jouissance and the reaction of medicine and the law to this appropriation through the criminalization of desire.

Lacan (1953) makes this observation of Freud:

> In one place he doesn't disguise the fact that those jouissances that are forbidden by conventional morality are nevertheless perfectly accessible and acceptable by some people who live in certain conditions (p.200).

The 'conventional morality' in relation to needle-use seems somehow to assume the body is the property of science and medicine. The advent of the historical ego era has seen a challenge to this 'conventional morality' and the authority that governs the body. That is, an authority Lacan observes Freud has the privilege to question. When the body becomes the context for the medical procedure of injection and jouissance becomes its end, the prevalence of the ego creates moral panic in the other. This is partly the product of medicine losing its authority over the body and the practice of injection. McBride, Pates and Arnold note that the practice of self-injecting began with doctors giving needles and medicine to patients so they could self-administer. This sense of self-administration in the context of the law as the dominant ruling authority criminalizes 'body' and 'mechanism', the needle and its user, as well as substance. In response to this 'criminalization' of the 'body', the 'mechanism' becomes the visible sign to law enforcers of defiance of the law, while prohibition in the earlier medical context drove the desiring body and its activities underground.

I started this paper speculating on the comparison between Freud's writings on cocaine in *Cocaine Papers* and Burroughs' *Junky*. In the Introduction, I stated that this paper would concern itself with the history of non-medical self-injection, locating the development of the problem in the context of crime in Lacan's 'ego era'. I argue that Wren's (1665) experiment of injecting morphine into the hind legs of a dog and Hunter's 'attractively technological' invention of the needle was

appropriated by the transgressive ego and absorbed into an evolving body of jouissance. Over the course of 'Lacan's fledgling theory of history', the attraction of technology becomes fertile ground for the expression of unconscious drives, a 'libidinal encounter' with the parental other finding expression in the process of self-injection. The 'knowledge in the real' of which Rik Loose (2002) speaks is the reason why Dr Clifford in 1886 'personally discontinued' the recommendation of self-injection.

The de-medicalization and criminalization of the body and its activities in relation to self-injection merely reveal the fact that the body has never been our 'own'. The practice of self-injection is an attempt to reclaim ownership of a body that is considered to be the property of medicine and the state. The medical profession and the state forbid the practice of illegal drug use, while the body in its interaction with the needle emerges as the primary act of rebellion against these authorities. As a consequence of this new context of rebellion for injection, the regulated and moderated use of the needle monopolised by the medical profession is replaced with an unregulated criminal context for the body and the administration of enjoyment.

Gatrell (1984), in an exploration of crime and the law titled *Theft and Violence in England 1834-1914*, speaks of the selection of crimes and criminals in the expression of 'changing public, police and judicial attitudes.'

> The latitude left to control agencies to select crime and thus 'create' criminals may indeed at this level be disconcertingly wide (p.248).

Gatrell speaks of a law that 'may indeed be highly unstable, irregular and even whimsical'. He describes 'control reactions' to new offences like the checking of needle-user's arms for evidence of self-injected illegal drugs in Burroughs. This seems have a relationship with Lacan's (1953) idea of a 'path cleared' and my general discussion of how non-medical self-injection became linked to crime (p. 195). The law plays a role in crime because the act of forbidding a particular activity, such as the self-injection of particular substances, becomes an act of rebellion, a transgression in relation to the law. I have noted Reverend Wilbur Crafts and the 'racist slurs' to illustrate the moral panic inherent in this control reaction to drug use. Sharpe (1983) observes that:

> Considerable powers of social control, ultimately enforceable through the Law Courts, were invested in the parish clergy.

Thus, the power of Crafts' propaganda in the progressive transformation of the body of jouissance into a body of crime cannot be understated. The 'unstable', 'irregular', 'whimsical' 'control reactions' of the law to the newly moralized body fuel and react to the 'moral panic' response it produces. This contributes to the emergence of the body of jouissance as contextualized in Lacan's ego era. When Lacan talks about Antigone and the notion of 'transgressive jouissance', he speaks of a 'crime that goes beyond the natural order of things' (Lacan 1992). Gatrell notes the creation of criminals by the law. The development of drug use as a 'crime' and evidence of self-injection as a means of proving such a crime is pertinent to Gatrell's observation.

The history of non-medical self-injection, as told by McBride and Latimer and Goldberg, is littered with an array of strange and interesting characters. As already mentioned, there is Christopher Wren and his controversial experiment of 'killing a dog' as it is described by Samuel Pepys (McBride, Pates & Arnold 2007). There is Charles Hunter and his 'attractively technological' invention of the needle. McBride, Pates and Arnold also refer to women in the nineteenth century using the needle to scent the body so that it becomes a tool for the administration of perfume. All the while, there are the cases of moral panic in the background, like Wilbur Crafts, his insulations of 'evil' in relation to opium, and legal interventions like the Narcotics Laws of 1906. There is

Freud and his recommendation of cocaine injections followed by a denial of such a recommendation (Byck 1975).

Finally, there is Burroughs (1953) and his reference to the 'Drug Addict's law' by which addicts were identified and arrested according to needle-marks, which provided the evidence of transgressive self-injection. I will address these moments of moral panic separately as this work progresses, but my point here is that the needle has been slowly, and surely, delivered from the objectivity of science into the transgression of the human subject over the course of Lacan's ego era.

In response to this emergence of the ego, the reaction of the neighbour situate this has been as if the neighbour's body is 'breaking into pieces'. The reaction of the neighbour to the process of self-injecting coincides with a steadily building moral panic, a reaction that suggests the addict's body somehow represents a threat to the existence of the other. In Lacan's words, self-injection is the 'breaking into pieces of the neighbour's body'. The transgressive use of the needle creates the possibility where the addict may 'not need to alter the external world to satisfy some great need' (Loose 2002). However, 'moral panic' over drug use has always existed and explains why the issue has emerged in recent discourse about addiction. The emergence of the ego has seen the addict or needle-fixator criminalized and easier to detect as demonstrated in Burroughs then pitied in the sickness of the figure of Alice in the 1972 classic exploration into addiction, *Go Ask Alice* (Sparks 1972).

Pates and McBride's article on needle fixation is titled 'Needle Foucaultion'. Fraser et al. (2005) respond that 'needle fixation' is a 'product of discourse … of both fact and fiction'. The use of the term 'Foucaultion' occurs only in the title of Pates and McBride's article and it is unclear what their intention is in using it. Perhaps it is a reference to the contemporary 'needle-fixator' as Foucault's madman. Or perhaps it is a reference to the Foucault (1976) classic *The History of Sexuality* in which he documents a 'discourse of modern sexual repression.' According to this possibility, the 'Needle Foucaltion' to which Pates and McBride refer is a direct reference to what I am calling the jouissance of the needle, a kind of love that breaks the 'silence' on sexuality and refers to a forbidden form of intercourse with the parental other represented by the process of injection.

Self-injection grew in popularity over the course of Lacan's ego era and the development of a Foucaultian era of sexual repression. The term 'Needle Foucaultion' then might refer to the development of the needle into a metaphor for sexual enjoyment. This development is evident in Freud's practice of self-injection which began as medical experimentation and quickly became a source of enjoyment. It is overt in the world of Burroughs, where he lives on 'junk-time', in 'junk climate' and 'junk conditions' (Burroughs 1953, p. 96). He says this of sex:

> Junk short-circuits sex. The drive to non-sociability comes from the same place as sex comes from so when I have an H or M shooting habit I am non-sociable (Burroughs 1953, p. 96)

Whilst Burroughs here refers overtly to the 'substance', note the subtle reference to mechanism with the term 'shooting habit'. Whilst Burroughs could hardly be said to have exhibited 'sexual repression', the reaction to his activities and writings certainly seems to have. Alice too describes the desire to be tied down and shot up with anything (Sparks 1972).

The sexualisation of the needle has occurred over the course of Lacan's ego era and Foucault's era of sexual repression. This is significant in terms of the development of the notion of 'needle fixation' and the current debate surrounding the use of this term. In the era of the conflicting drives of the ego and sexual repression, the needle has emerged as a part-object of the human psyche, at least according to the testimony of addicts who have experienced and described the sensation of 'needle fixation'. It is also a key detection tool that further stigmatizes the injecting

drug user. Quite naturally, in the ego era and the era of sexual repression, the initial 'concern' among the medical establishment relating to non-medical self-injection had evolved into 'intense concern' by the end of the twentieth century. This concern has been channelled into control of substance use and distribution whilst the problem of the needle and the addict's fixation on it, seemingly the source of a moral panic, has been overlooked

My thesis regarding the notions of 'fixation' and 'needle fixation' is a response to the question raised by Fraser et al. (2005) as to whether 'fixation' is an appropriate term because of its origins in psychoanalysis. Fraser's objections are based on a lack of research in the field of psychoanalysis that allows for the term 'needle fixation'. I claim that it is an appropriate term based on Freud's notion of 'fixation', and Loose's research and his use of Lacan's concept of 'jouissance'. This furthers the historical perspective that reveals a movement of the needle from being the property of the medical establishment in Lacan's 'pre-ego era' to a means of criminal detection under the law in the ego era and its consequent appropriation by the unconscious of the human subject by injecting drug users. This is what Fraser et al. dispute when they say that the term 'needle fixation' is not an appropriate term to describe the attraction of technology. The role of the law in establishing crimes of the body in the context of 'control reactions' is one that has been thrust upon it by a medical establishment that failed to treat the transgressive body of the self-injecting intravenous user. The 'crime' of the needle-fixator is one of reclaiming the body considered the property of medical science and the law. The ability of a law to control the transgressive drives of such a body is limited by the nature of the crime of such a body, a crime of desire.

The expression of what a recent United Nations document called 'intense concern' over the issue of non-medical self-injection indicates a blurring of the boundaries between self and other, a key indicator of Gatson's (2007) sense of 'moral panic.' It is curious that both the blurring of bodily boundaries and the appropriation of the needle, from the medical establishment into the context of criminal behaviour, occurs over the timeline of what Brennan (1993) identifies as Lacan's 'ego era'. This has created a recently identified sensation of 'moral panic' in the non-user. Elsewhere in my work on needle fixation, I explore the notion of moral panic, an idea that emerges from the history and discourses of non-medical self-injection.

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