

RESEARCH

Reflections on the Context of Near-Death Experiences

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Abstract—Near-death experiences (NDEs) constitute a particular type of experience that occurs in near-death states and is familiar to many. Yet, there are other kinds of lesser-known experiences reported from near-death states that appear to form an interconnected continuum with NDEs. Because the relations between these different experiences have not received much attention in the more recent literature, this paper presents an introductory overview on them. The topics discussed include cases of unexplained body changes during near-death states, reciprocally confirmed out-of-body experiences and crisis apparitions, deathbed visions, (shared) NDEs and (shared) dreams, correspondences between the contents of NDEs, cases of the reincarnation type, and communications received via mediums; mists or shapes leaving the body of the dying, unexplained music heard at deathbeds, the re-emergence of mental clarity shortly before death in persons with mental disorders, and unusual memories of little children.

Keywords: Near-death experiences (NDEs)—deathbed visions (DBVs)—cases of the reincarnation type (CORTs)—apparitions—terminal lucidity—mediumship

Introduction

Near-death experiences (NDEs) represent an experience that occurs in near-death states or in states suggestive of impending death. Since the landmark publication by Raymond Moody (1975), these experiences have gained much attention from both the public and scholars. Still, there are other kinds of lesser-known experiences and phenomena reported from near-death states which indicate that NDEs form an interconnected continuum with them (Nahm, 2010a). Other authors have previously discussed some of these relations (e.g., Alvarado, 2006, Ellwood, 2001, Fenwick & Fenwick, 2008, Howarth & Kellehear, 2001, Kelly, Greyson, & Kelly, 2007, Moody, 2010, van Lommel, 2010). However, these publications cover only a part of the available material. In this paper, I delineate an integrative and systematic overview on a variety of different death-related occurrences with a specific focus on expounding the

possible connections between them. Among the phenomena and experiences I will subsequently discuss are: Cases of unexplained bodily changes during near-death states, implications of reciprocally confirmed out-of-body experiences (OBEs) and crisis apparitions, deathbed visions (DBVs), possible relations between (shared) NDEs and (shared) dreams, possible formal interconnections of NDEs with mediumship, correspondences between the contents of NDEs, communications received via mediums, and cases of the reincarnation type (CORTs); mists or shapes leaving the body of the dying, unexplained music heard at deathbeds, the re-emergence of mental clarity shortly before death in persons who were previously dull or in states of severe psychiatric or neurologic disorder, and unusual memories of little children to which they are not supposed to have had access.

Throughout this paper, I will not restrict myself to particularly well-documented cases or scientifically approved phenomena, but will simply rely on reports given by presumably trustworthy persons who claim to have experienced, observed, or investigated these phenomena. In doing so, I follow Frederic Myers (1903) by including samples “of small groups of cases, which I admit to be anomalous and non-evidential [. . .] yet which certainly should not be lost, filling, as they do, in all their grotesqueness, a niche in our series [of experiences] otherwise as yet vacant” (Myers, 1903, vol. 2:20). Thus, I will not discuss frequently heard explanations for the experiences presented such as hallucinations, delusions, distorted memories, cryptomnesia, errors, or fraud, although I am aware that they exist and might account for a good part of the cases. I will also not highlight the existing differences between the different kinds of experiences described in the following, but focus on the similarities. The reason for this is that the above-mentioned alternative explanatory models for some of the discussed experiences are readily available and conceivable, whereas integrative approaches aimed at elaborating possible relations between these experiences when taken at face value have only rarely been put forward. But just in case these reports are accurate and generally correspond to how the events had really happened, and thus are authentic and evidential in the sense of Ian Stevenson (1971), I consider outlining such an approach important. In this context, it might be of relevance that until today, there are no neurobiological or psychological models that could account for the full phenomenology of NDEs (Carter, 2010, Holden, Greyson, & James, 2009, van Lommel, 2010). That said, I beg the reader to bear in mind that I am not intending to propose a strict theory in terms of scientific standards. Rather, similar to a previous paper (Nahm, 2009a), I aim at widening the view on NDEs and at inspiring researchers to conduct future investigations, and, perhaps, to develop theories on NDEs that recognize their potential relationship with several other curious phenomena and experiences long reported in parapsychology.

Unexplained Bodily Changes in Near-Death States

The literature on NDEs contains several case reports of unexplained bodily changes which have occurred during or shortly after being in near-death states. Often, these changes are tantamount to healings (Brayne, Lovelace, & Fenwick, 2008, Fenwick & Fenwick, 1996, Geley, 1927, Grey, 1985, Long & Perry, 2010, Morse & Perry, 1992, Pasricha, 2008, Ring & Valarino, 2000, Sartori, 2008, Sartori, Badham, & Fenwick, 2006, Schubert, 1850, Splittgerber, 1881). This intriguing aspect of NDEs has so far received little attention and is also not discussed in the recently published summary of 30 years of NDE research (Holden, Greyson, & James, 2009). Apart from the significance of such cases for those who experience them, they are of importance for evaluating the question if all phenomena featured in NDEs can be explained solely in brain physiological terms. Cases of unexplained healing might also be related to cases of miraculous healings such as those reported from Lourdes. Many of those who were healed at Lourdes have described a sudden painful shock, accompanied by a sense of dying and a period of unconsciousness (Gerloff, 1959). Others have also reported a sense of unawareness of what was going on in the physical world or of being transported to other locations beyond themselves (Cranston, 1988). Such cases might be linked to other instances of remarkable recoveries and spontaneous remissions that are difficult to account for with current medical theories (Gibson, 1994, Hirshberg & Barasch, 1995), or to cases in which the NDEr was expected to retain mental disabilities due to prolonged oxygen deprivation of the brain, but was revived to a normal mental state (e.g., Roud, 1990). But unexplained bodily changes in near-death states do not only consist of positive amendments or healings. In studies of NDEs in India, between 25 and 47 percent of the near-death experiencers (NDErs) reported the development of residual marks on their bodies upon regaining consciousness (Pasricha, 1993, 1995, 2008, Pasricha & Stevenson, 1986). They claimed that these body marks correspond to events they had experienced during their NDEs such as being touched and branded by Yama or other inhabitants of the afterlife realm. Pasricha (1995) speculated that the residual marks on the bodies of NDErs might be induced in a similar manner to those of stigmatics, i.e. “due to autosuggestion or intense concentration on the event, on [the] part of the subjects” (p. 85). This might be a possibility, but the psychophysiology involved in the autosuggestive generation of bodily marks is so far not understood. Bodily changes that are difficult to interpret from a modern medical perspective have also been reported in the context of hypnosis and dissociative identity disorder (Kelly, 2007), or apparent maternal impressions on the developing child in the womb (Pagenstecher, 1928, 1929, Stevenson, 1997:104–175). They also include placebo/nocebo-effects and other examples of mental influence on physiological processes (Kelly, 2007). With

regard to NDEs, it remains especially curious that somebody should develop bodily marks in correspondence with memories of a subjective impression experienced during a state of apparent lifelessness and unconsciousness. Although it seems that unexplained bodily changes can be triggered or accompanied by extraordinary dreams (Duffin, 2009, Stevenson, 1997:77f) and can perhaps even be purposefully induced in lucid dreams (Waggoner, 2009), it remains puzzling that such changes can also be attributed to experiences made during conditions of severe brain malfunction. In this regard, these bodily marks might be related to the birthmarks and birth defects in CORTs that correspond to characteristics of the previous personalities or the circumstances of their death (Stevenson, 1997). Figuratively speaking, these birthmarks develop in concordance with impressions or memories that re-manifest after a much longer period of unconsciousness and organic lifelessness. However, the field of unexplained healings and body changes represents a largely neglected field of research and much remains speculative today. Nevertheless, it is a highly fascinating and also important area to study, and it certainly warrants careful future investigations.

Reciprocally Confirmed OBEs During Near-Death States

Another potentially fruitful source for tracing different branches of phenomena related to NDEs are reciprocally confirmed OBEs experienced in near-death states (ND-OBEs). These reciprocally confirmed ND-OBEs can be regarded as a subcategory of *apparently nonphysical veridical perceptions* (AVPs) (Holden, 2007). Yet, they are rarely discussed in the newer NDE literature. In typical cases, a person in a near-death state claims to have visited family members at a distance whom he or she was intensely wishing to see. This visit was often accomplished by means of an OBE. Later, these family members confirm that they had perceived a corresponding impression of this person at the time in question (e.g., Lee, 1875, vol. 2:64, Myers, 1903, vol. 1: 687, Morse & Perry, 1995:22, or the case collection in Barrett, 1926:81–95; other examples are included for example in Flammarion, 1900/1905:78,87). Starting from reciprocally confirmed ND-OBEs, there are four different branches that seem to connect NDEs to other death-related experiences.

1) Because reciprocally confirmed ND-OBEs can likewise be regarded as reciprocal and veridical *crisis apparitions* (Gurney, Myers, & Podmore, 1886), they open the door to link NDEs to different synchronistic end-of-life experiences (ELEs, Fenwick, Lovelace, & Brayne, 2007) that are frequently reported at times when somebody dies at a distance, beginning with non-reciprocal veridical crisis apparitions. An early case illustrating this latter kind of crisis apparition was published by Justinus Kerner (1831): An apparition of a woman entered the room of her daughter and unexpectedly informed her that

she had died. The apparition of the mother furthermore instructed the daughter to perform a specific task. When speaking to those who had been present at the deathbed of the mother the next day, the daughter learned that the dying woman was very concerned with this particular task and had also instructed a caretaker to urge her daughter to perform it. This case is not strictly reciprocal, because the mother had not reported having visited her daughter (for similar cases, see for example, Stead, 1897:137, Flammarion, 1900/1905:51,85,225). From such cases, there is a continuous and gradual path to the less-detailed, one-sided synchronistic ELEs which involve anomalous visual or acoustic experiences, dreams, bodily sensations, or physical phenomena occurring around the time a loved one dies at a distance.

2) If reciprocally confirmed ND-OBEs are regarded as crisis apparitions, they do not only interrelate the variety of synchronistic crisis-related events around the time somebody dies to NDEs, but also allow for establishing a link to similar experiences that occur at later times to the bereaved. In fact, the traditional definition of crisis apparitions of the dying as a subcategory of “phantasms of the living” (Gurney, Myers, & Podmore, 1886) was artificially restricted to apparitions that occurred no later than 12 hours after the death of the person in question (p. xix). Nevertheless, it has long been known that practically indistinguishable apparitions occur also more than 12 hours after death (Flammarion, 1923, Hart & collaborators, 1956, Mattiesen, 1936–1939). In the newer literature, these encounters are described as “After-Death Communications” (Guggenheim & Guggenheim, 1995, LaGrand, 1997), “After-Death Contacts” (Wright, 2002), or “Afterlife Encounters” (Arcangel, 2005). In these cases, the overall mode of appearing seems identical to crisis apparitions of the living or dying, although the motivations to appear and the messages conveyed seem different: Crisis apparitions tend to inform the perceiver predominantly about the crisis or of death itself, whereas apparitions of the longer-deceased convey more often messages of their own well-being, or of hope and encouragement for the bereaved (Flammarion, 1923, Guggenheim & Guggenheim, 1995). Additionally, the latter kind of apparitions is often encountered by the perceiver in an especially meaningful or critical moment of their life. This feature might again connect them to the apparitions typically seen by dying persons at their deathbeds, the DBVs. Apart from occurring in an especially meaningful moment in life, afterlife encounters and DBVs share a number of other common features: (a) As in afterlife encounters, DBVs often convey comforting messages; (b) As in afterlife encounters, the apparitions seen in DBVs are those of deceased individuals; (c) Many apparitions seen in afterlife encounters and DBVs share features of typical apparitions of the deceased, including emanations of light; (d) Most ordinary apparitions, afterlife encounters, and DBVs are perceived subjectively by only one person.

But in some cases, ordinary apparitions, afterlife encounters, and also DBVs are perceived collectively by two or more witnesses (Bozzano, 1947, Barrett, 1926). The interpretation of DBVs as a subcategory of afterlife encounters was assumed for example by Emil Mattiesen (1936–1939, vol. 1:78–101) who discussed apparitions with respect to the circumstances of their appearance, their behavior, and their motivation for appearing to the percipient. This interpretation of DBVs shifts the focus away from regarding them as mere hallucinations of the dying brain. In fact, distinguished brain physiological or psychological models for explaining (collective) DBVs have not yet been put forward by mainstream scientists. And, similar to NDEs, several findings indicate that this might not be a very promising approach (e.g., Osis & Haraldsson, 1997). In addition, there are reports of DBVs in which the percipient died a couple of weeks after he or she had experienced the DBV (e.g., Kelly, Greyson, & Kelly, 2007:410). This curiosity might represent another indication that DBVs may not be tied to the neurophysiology of a dying brain. Rather, DBVs might be of a similarly unpredictable and possibly autonomous origin as other apparitions or afterlife encounters—which are generally encountered during conditions of normal brain functioning and optimum oxygen supply. With the suggestion to interpret DBVs as a specific kind of afterlife encounter, the circle leading to NDEs is almost closed again. Both types of experience, DBVs and NDEs, share many common features. Sometimes, it even seems difficult to tell if a terminally ill person has experienced a DBV or an NDE (Nahm, 2009b, Osis & Haraldsson, 1997), and Giovetti (2007) has reported a case in which an NDE was immediately followed by a DBV. The same woman, a grandmother of the dying man, played a crucial role in both the NDE and the DBV.

3) Moreover, it is a general rule that, perhaps apart from the displayed motivation to appear to the percipient and the message conveyed, apparitions of living, dying, and deceased individuals share basically the same features (Hart & collaborators, 1956, Mattiesen, 1936–1939). It is of importance that reciprocally confirmed cases which involve only living individuals can be verified by both parties concerned. Because some apparitions of reciprocally confirmed OBEs among the living were purposefully induced by an agent who intended to manifest as an apparition to the perceiver, they provide evidence that the perception of apparitions can be caused by an agent external to the conscious and subconscious layers of the psyche of the percipient. Given the different lines of evidence that point to a continuity among apparitions of the living, the dying, and the deceased, we might then regard it as a logically plausible supposition that apparitions of the deceased also can be caused by agents outside the psyche of the percipient. That would imply in the first place a causation by the deceased themselves.

4) In addition, crisis apparitions including reciprocally confirmed ND-

OBEs establish an important link to interpreting a very common feature of NDEs and DBVs: There are many reports of persons in near-death states who claim having met *deceased* family members or friends during NDEs and DBVs (Barrett, 1926, Betty, 2006, Osis & Haraldsson, 1997). These claims are often regarded as hallucinatory fulfillments of personal expectations. Still, it is not clear why dying persons should long predominantly to meet with already deceased family members instead of longing to see those who are living, but who are not able to come for a last visit to say goodbye. In fact, it seems that in those cases in which a dying person intensively longed to see an absent living family member, *the dying preferably appear to these living persons, not vice versa*. The literature on crisis apparitions (including reciprocally confirmed ND-OBEs and dreams) contains many examples supporting this proposition (see for example the case references listed in the sections on ND-OBEs above).

However, encounters with persons still alive are also reported in DBV and NDE accounts. They amounted to 18 percent of an American sample of DBVs containing 187 cases in which information on this feature was available, compared with 66 percent of reports comprising encounters with the deceased (Osis & Haraldsson, 1977). In NDEs, Bruce Greyson (2010) reported that out of 665 NDE accounts, four percent included an encounter with a living person, whereas 21 percent reported meeting a deceased person. Sometimes, encounters with the living during DBVs are regarded as hallucinations, e.g., due to brain malfunction or the fulfilment of wishful thinking, whereas visions of the deceased are considered of more autonomous and veridical origin (Osis & Haraldsson, 1997). However, I know only a few published DBV accounts that comprise seeing or sensing living persons. It seems, all of them are reciprocally confirmed cases and warrant closer examination. For example, a very sick man has reported seeing his daughter, who stated she had succeeded in projecting herself briefly into his room after she had sensed that his health was deteriorating (Hill, 1917:17). In a second case, a dying father has reported seeing an image of his living son, and the son has reported seeing the face of the dying father at the same time (Barrett, 1926:87). In another case, a dying and largely unconscious man seemed to imagine that his absent living brother was with him. This brother had a strange presentiment of the former's death, and at one point noticed that his clock had stopped. After he had reset it, he heard distinct words in his brother's voice being spoken in his room, which, as it was later confirmed, had in fact been his last words. The brother had died at the time the clock had stopped (Johnson, 1898–1899:245). Couldn't it have been possible that the dying brother had, at least partly, extended his senses or his mind to the living brother in a kind of ND-OBE or clairvoyance, without the latter noticing it? Such examples indicate that it might be premature to classify all DBVs in which encounters with the living were reported as wishful

hallucinations of the dying, even when the dying had intensively longed to see these persons. It might as well be worthwhile to determine the activities and the state of consciousness of the living individuals during the time of their appearing, because many of them might have been sleeping, drowsy, ill, or in a similar passive and dimmed state, just like it is reported from other apparitions or communications by the living outside the context of dying (Nahm, 2010b).

Moreover, there are numerous cases on record in which the dying erroneously *thought* they had seen apparitions of living persons—but the individuals in question had in fact died already (Greyson, 2010, Kelly, Greyson, & Kelly, 2007). In addition, patients in near-death states often see visions of persons entirely unknown to them, a finding difficult to explain along the lines of wishful thinking (Osís & Haraldsson, 1997). And sometimes, such unknown persons were identified retrospectively by the descriptions of the NDErs or even from photographs as deceased relatives (Badham & Badham, 1982, Fenwick & Fenwick, 1996, Gibbs, 2005, Kelly, Greyson, & Kelly, 2007, Rawlings, 1978, Sartori, 2008, van Lommel, 2010). Unknown apparitions who were later recognized from photographs as deceased relatives are also reported from DBVs (Callanan, 2009). If such accounts can be trusted and if contradictory DBV and NDE reports are not massively withheld from publication, these findings would additionally support the notion that persons in near-death states do not simply hallucinate what they would like to see, but that their visions of the deceased possess a certain degree of objectivity and autonomy.

Shared NDEs and Shared Dreams

As noted in the previous section about unexplained bodily changes, dreams and NDEs seem related in that experiences made in both states can result in organic alterations. Shared or mutual dreams might provide a means for better understanding NDEs in a more general sense (for examples of shared dreams, shared lucid dreams, and a comprehensive literature compilation on shared dreams, see Magallón, 1997). According to Raymond Moody, the initiator of modern NDE research, “dozens upon dozens of first-rate individuals” present at the bedside of a dying loved one have reported to him that in a kind of shared NDE, they had lifted out of their own bodies, accompanied the dying upward toward a beautiful and loving light, and experienced the same emotions described by the NDErs themselves (Moody, 1999:4). Just recently, Moody (2010) has published examples of these reports. Such cases have also been described by others (e.g., Hardy, 1979, Morse & Perry, 1992, 1995, Fenwick & Fenwick, 1996, van Lommel, 2010). Shared NDEs could also be regarded as shared ND-OBEs—with the addition that they include mutual experiences of later stages of NDEs featuring more transcendental aspects. Given these parallels, it seems that NDEs and (lucid) dreams are experiences that can be shared with

other living persons in a sort of nonphysical or mental space. In this context, it is of interest that a large proportion of spontaneous psychic experiences are reported from dreams, with death and dying constituting predominant themes (Van de Castle, 2009), and that many of these ostensibly paranormal dreams are characterized by a vividness or an intensity missing in most ordinary dreams (Stevenson, 1971). Correspondingly, the literature on afterlife encounters is in agreement that dreams are a major source for ostensible encounters with the deceased. Some afterlife encounters even seem to involve OBE-states wherein the experiencer is suddenly lifted out of his or her body, floats upward through a tunnel with a bright light at its end, and meets with the recently deceased loved one (Guggenheim & Guggenheim, 1995, van Lommel, 2010)—features familiar from the just-described shared NDEs. Thus, with special regard to such afterlife encounters and shared NDEs, it is justifiable from a theoretical perspective to assume that the faculty to glimpse into a transcendental afterlife realm does *not* depend on the condition of being (almost) dead, but on entering an appropriate state of consciousness. The sometimes-heard assertion that NDErs cannot glimpse into the afterlife realms because they never die but always revive becomes futile in this light. Thus, although I do not disregard the existing differences between (lucid) dreams and NDEs, the existent parallels between both experiences suggest that some of their characteristics might indeed share a related foundation.

Formal Correspondences among NDEs, Mediumship, and CORTs

NDEs also provide a link to mediumship. For example, Giovetti (1999) has described a case in which an NDEr reported having met a woman named Mara during his NDE. She offered him the choice to stay or to return to life. The NDEr decided to return. Later, it turned out that Mara was also a regular communicator of a spiritistic circle and that she had independently given a corresponding account of her meeting with the NDEr during a sitting. A similar case was related by Mattiesen (1936–1939, vol. 2:236). In other interesting cases concerning ostensible mediumistic communications from living but unresponsive patients reported by Daumer (1867, vol. 1:170) and Schiller (1923), the patients acting as alleged communicators did not regain consciousness and died. In the case related by Daumer (1867), the personality continued to communicate from the assumed afterlife and referred to his visit at the circle during the time of his unconsciousness. However, there are many more cases of mediumistic communications that were allegedly transmitted by living agents, at least 80. Although some of them seem to be generated only by the medium's own subconscious wishful thinking (Flournoy, 1899), a considerable number of reciprocally confirmed cases do exist. Many of the reciprocal cases occurred during times when the living agents were drowsy,

dreaming, or purposefully attempting the respective communication (for a brief review on mediumistic communications by living agents, see Nahm, 2010b). Similarly, there are a few reciprocally confirmed cases in which the contents of DBVs corresponded to communications received through mediums at another location. Here, the visions and occurrences at deathbeds were independently described, commented on, or even announced by communicators speaking through the mediums (Bozzano, 1947, Mattiesen, 1936–1939).

Moreover, there are at least 14 CORTs, i.e. cases in which young children claim to remember previous lives, in which the birth of the child who later claimed to remember a previous life was allegedly announced via preceding mediumistic communications (Hassler, 2011, Muller, 1970, Playfair, 1975, 2006, Stevenson, 1997). Usually, the purported previous personalities related this announcement in person through the mediums. In the plain spiritualistic context apart from CORTs, appropriate birth predictions related through mediums have often been reported (e.g., Roy, 2008).

Correspondences among the Contents of NDEs, Mediumistic Communications, and CORTs

Among others, Braude (2003) has argued that even if evidence for veridical ND-OBEs or AVPs could be established, they could not be regarded as evidence for prolonged bodily survival. The human mind might leave the body at death intact, but might disintegrate shortly after. Still, apart from some lines of argumentation already sketched, there are at least two other ways in which ND-OBEs and NDEs in general might be linked to testimonies directly concerning prolonged afterlife states.

1) A link from particularly Western NDEs leads to the contents of the descriptions of dying and the afterlife received through mediums. Many of the mediumistic communicators, the alleged deceased, have given descriptions of what they had experienced during and after dying. Bozzano (1930), Mattiesen (1936–1939), and Crookall (1967, 1974) have outlined correspondences that these descriptions share with narratives of NDEs. These correspondences include leaving the physical body, feeling free from all pain, seeing the deathbed scenery including the mourners, passing a darkness or tunnel, seeing deceased relatives, friends, or angelic beings, living in beautiful light-flooded landscapes, and experiencing a life review. Several of these communicators have related their descriptions of dying through some of the most intensively studied mediums, such as Mrs. Piper, Mrs. Leonard, and Mrs. Willett. The many descriptions of dying related by more popular mediums and in popular books also share the same basic features (Crookall, 1974). It might be possible that many of these authors were simply experiencing or reporting what they had expected because of their familiarity with spiritualistic concepts of dying

and the afterworld. However, in some cases the medium seemed unaware of traditional spiritualistic concepts and still related corresponding descriptions of the dying process (Landmann, 1954). Moreover, some communicators of mediums gave veridical descriptions of events that happened at their deathbeds although none of the sitters was present at this deathbed or knew about these events (Bozzano, 1947, Mattiesen, 1936–1939). From here, it might be only a little step to the many reports of mediumistic communications, afterlife encounters, apparitions, or hauntings in which the purported deceased agent displayed continued knowledge about what was happening in the physical world since he or she had died (Mattiesen, 1936–1939).

2) The second link discussed in this section concerns the ostensible memories of the children who claim to remember a previous life. Sometimes, they report a considerable amount of correct information about the life of the previous personality that they can hardly have come to know by means of normal perception or communication (Stevenson, 2001). In the present context, it is of relevance that several children of different cultural contexts gave additional descriptions about how they had spent the intermission period between the two lives. Often, these descriptions start with the claim that they had left the body of the previous personality when dying, then perceived the scenery from above. Some children also stated that persons in the vicinity of the lifeless body were not able to see or hear them, although they tried hard to contact them from the OBE-state. Some also described correctly what had happened with the dead body of the previous personality, for example by providing veridical information concerning events at the funeral (Hassler, 2011, Stevenson, 1997, Tucker, 2006). Thus, these children report features familiar from NDE reports and descriptions of death and the afterlife related by mediums, or even from the highly controversial literature on hypnotic past life regression (e.g., Whitton & Fisher, 1986). Some of the children have reported prolonged states of discarnate existence in this physical world, for example living in a tree and observing the persons passing it, including their future parents (e.g., Veer Singh in Stevenson, 1975, Bongkuch Promsin in Stevenson, 1983, Ma Khin Mar Htoo in Stevenson, 1997). Others have reported entering a transcendental afterlife realm after having left their physical bodies. This realm contains several features likewise familiar from NDE accounts, such as meeting deceased friends, relatives, superior mystical beings, and, occasionally, experiencing a life review, and even passing through a tunnel into a light (Hassler, 2011, Playfair, 2006, Rawat & Rivas, 2005, Stevenson, 2001). For example, Shanti Devi, an Indian girl born in Delhi in 1926, talked of experiencing a “profound darkness” when she died in her purported previous life, followed by a dazzling light, entering a beautiful garden, meeting men in robes, and experiencing a life review (Rawat & Rivas, 2005). In general, the accounts of intermission periods

in CORTs seem to follow the different cultural patterns (Hassler, 2011, Sharma & Tucker, 2004) also reported from NDEs (Kellehear, 2009). For example, in typical Asian intermission period depictions and Asian NDEs the protagonists will not describe encountering a brilliant light at the end of a tunnel. In this regard, the case of Shanti Devi is atypical. Asian people will usually also not experience a panoramic life review. Rather, they describe their lives being judged by a man or a religious figure, as in the testimony of Shanti Devi. In several CORTs including Shanti Devi's case, the children have also claimed that they were sent back to earth on behalf of an otherworld inhabitant, a familiar feature also present in NDEs. But, of course, they ended up in the body of the newborn child—not in their previous body like in NDEs. Interestingly, there are also a few accounts in which NDErs have described trying to enter the body of a newborn baby or a child who had apparently just died, but gave up on it and returned to their own body again (Brownell, 1981, Shroder, 1999). There are corresponding intermission period descriptions in CORTs in which the children described competing with others for becoming born (e.g., Bobby Hodges in Tucker, 2006), being drawn into the body of a living newborn baby (Ven. Chaokhun Rajsutharjan in Stevenson, 1983), or having “taken over” an apparently lifeless body of an infant (Jasbir Singh in Stevenson, 1974). The latter two cases concern previous personalities who were apparently reborn into the bodies of already existing children and could thus be better classified as cases of the possession type. They might provide a link to other cases of the possession type without intermission period memories such as the cases of Sudhakar Misra (Pasricha, 1990) and Sumitra Singh (Stevenson, Pasricha, & McClean-Rice, 1989). The above-mentioned cases make it difficult to draw a distinct line between the reincarnation and possession types of cases. In fact, Stevenson (1997) has pointed out that it seems only a matter of personal preference whether one regards CORTs in which the previous personality had died during the gestation of the child who remembered the life of this personality after birth as examples of the possession or of the reincarnation type (p. 1142).

The evidentiality of the descriptions of the transcendental afterlife experiences between two lives is difficult to determine. Nevertheless, it is noteworthy that the children who gave accounts of intermission periods between two lives made significantly more verified statements about the life of the previous personality than did other children without such intermission period memories. They also remembered the mode of death of the previous personality significantly better and gave significantly more names of persons supposedly playing a role in their previous life (Sharma & Tucker, 2004). Thus, Sharma and Tucker (2004) conclude that “their reports of events from the intermission period seem to be part of a pattern of a stronger memory for items preceding their current lives” (p. 116). Similar to NDEs, there are even a few cases in

which a child claimed to have met with a deceased person in the intermission period and provided verifiable details about this person that the child could have hardly learned by normal means (Banerjee, 1979, Tucker, 2006). Moreover, certain memories of alleged experiences in the interim existence appear to be sometimes confirmed by respective testimonies from the physical plane. For example, the child may claim to have appeared to the future mother as an apparition in an idiosyncratic way, and the mother may remember seeing a corresponding apparition at the time in question (e.g., Maung Yin Maung or Ven. Chaokhun Rajsuthajarn in Stevenson, 1983). Or, the children may talk of having sent a dream to their future mother or of visiting people by “coming down” from the afterlife realm. The persons in question may remember dreams with corresponding content—experiences that apparently constitute a peculiar kind of shared dreams (e.g., the cases of Ma Par, Maung Zaw Thein Lwin, and Pratima Saxena in Stevenson, 1997, or the case of Ven. Sayadaw U Sobhana in Stevenson, 1983). But the more typical non-reciprocal CORT announcing dreams are sometimes quite remarkable. Here, the future parents dream, sometimes repeatedly, of a deceased personality who states his or her wish to be born to them. Later, the subsequently born child talks of a life that corresponds to the life of the personality who had appeared in these dreams, and the child may also display bodily characteristics or birthmarks that correspond to the features of the previous personality (e.g., Necip Ünlütaskiran in Stevenson, 1997). Dreams in which the birth of a child is announced are also part of shamanistic lore (Müller, 2006) and many other traditional belief systems, and are likewise reported in contemporary Western non-reincarnationist contexts (Carman & Carman, 1999). Similar to announcing dreams in CORTs, NDErs sometimes report having encountered a child during their NDE who announced that he or she will be born to the NDEr later in their life (Atwater, 1994, Carman & Carman, 1999). It may also be mentioned in the present context that there are several NDE accounts that seem to include displays of events pertaining to previous lives of the NDEr (e.g., Atwater, 1994, Messner, 1978, Muller, 1970, van Lommel, 2010), although it is difficult to evaluate these reports. However, at least once an NDEr was allegedly able to verify details of the lives of two previous personalities he had remembered during his NDE when he searched for the locations he had seen in his NDE (von Jankovich, 1993).

To conclude this section about parallels in dying and afterlife descriptions provided in the contexts of NDEs, mediumship, and CORTs, I would like to mention another peculiar feature that appears common to all three sources. All are in agreement that when two or more persons are severely injured or die at the same time at the same location, the apparently self-conscious shapes leaving the lifeless bodies can perceive each other and communicate with each other. There are only a few respective accounts available today. For possible examples

of CORTs see Tucker (2006, a car accident) or Banerjee (1979, two children who died on the same day in an epidemic), for mediumistic communications see Stead (1922, the sinking of the *Titanic*), and for an example regarding NDEs see Sabom (1982, a Vietnam soldier injured in combat). In another example of NDEs reported by Gibson (1999), the 40 members of a firefighting unit were met with an unexpected change of wind on a mountain slope with the fire raging below them. Struggling to breathe, one by one they collapsed and rose above their physical bodies, perceiving the others hovering above their bodies and even communicating with each other. Unfortunately, only one member of this unit was interviewed. Despite the dearth of such cases, the importance of them should be noted. Perhaps they could be specifically sought for in NDE research. If such reports could be independently corroborated by different participants of the same experience, they would provide a strong argument in favor of the possibility of intersubjective experiences during apparently disembodied states of being. The belief that those who leave their physical body—be it during life or after death—are capable of seeing other disembodied spirits is part of ancient traditions in many cultures of the world (Cuevas, 2003, Eliade, 1974, Sheils, 1978).

The Work of Robert Crookall (1890–1981)

In this section of the article, I present in more detail certain aspects of Robert Crookall's largely neglected work on NDEs. Derived from his comparative analyses of the testimonies of NDErs ("pseudo-dead"), OBErs ("astral projectors"), bystanders at deathbeds, and purported mediumistic communications from deceased individuals, he has proposed a model describing the subsequent experiences during the process of dying and of entering into the afterlife realm. Following is a summary of important features of Crookall's model (derived from Crookall, 1967, 1974, 1978).

1) The dying send out a telepathic "call" to loved ones who have passed on before, either consciously or instinctively and unconsciously. These deceased individuals will then aid and instruct the dying throughout their transition. It seems Crookall should have added that this call might also reach living loved ones, this time causing (reciprocally confirmed) crisis apparitions and other synchronistic death-related phenomena.

2) The dying feel vibrations, noises in the head, dizziness, etc.

3) They may experience a blackout or a sensation of darkness, and leave the physical body chiefly via the head in an upward direction. Then, they are capable of seeing their physical body from above, the mourners at the deathbed, etc.

4) This leaving of the physical body is sometimes perceived by observers at deathbeds. Then, a cloud-like mass, a fog, or a mist is seen to leave the

physical body chiefly via the head and to collect above the body, ideally forming a luminous replica of it. Typically, this luminous “double” would hover horizontally above the recumbent body, being attached to it by an “astral cord.”

5) In general, the surviving essence of the deceased is ovoid or shapeless, but assumes the shape of the physical body due to respective conscious or subconscious impressions of remaining mental images.

6) The dying often feel well, painless, peaceful, and alert after their consciousness has slipped out of the body.

7) They might experience travelling through darkness or a tunnel with a bright light at the end, and enter a light-flooded beautiful afterlife landscape inhabited by the deceased and superior beings.

8) They experience a review of their past life.

9) During all these experiences, the physical body and its double may still be connected by the “astral cord.” Only when this cord is broken is the return to the physical body rendered impossible and the person has factually died.

This model bears numerous similarities with the model of features contained in NDEs proposed by Moody (1975). However, there are also differences, especially concerning the many secondary details not included in the sketch of Crookall’s model presented above. A more obvious dissimilarity is the paucity of references to the “astral cord” in most other publications on OBEs and NDEs. In a survey of the literature on OBEs, Alvarado (2000) found that only seven percent of OBEs reported something like a cord-like connection to their physical body. In a cross-cultural study, members of only one out of 67 non-Western cultures in which the belief in OBEs was established expressed the belief that the physical body is linked by a cord to the “double” during their separation (Sheils, 1978). It seems that the connecting cord is more rarely observed than is sometimes assumed, and is by no means a necessary and universal feature of OBEs and NDEs. Still, it is of interest that the cord *has* been reported under different circumstances by a variety of observers of different cultures, many of whom were unfamiliar with spiritualistic concepts regarding OBEs and the dying process (for a Muslim NDE containing a description of a luminous cord, see Giovetti, 2007). Such divergent findings stress the significance of systematic studies into the phenomenology of OBEs and NDEs.

Fogs, Mists, or Lights Emanating from the Body of the Dying

Confirming Crookall’s findings, Moody (1999) stated that “lots of doctors and nurses have described to me how they perceived patients’ spirits leaving their bodies at the point of death” (p. 5), and he has described only some of these cases (Moody, 2010). In a literature survey covering roughly the last 200 years, I found 142 case references that were related by 124 different witnesses, excluding general claims that did not contain concrete case examples and cases

reported in the hagiography from saints and mystics (e.g., Görres, 1836–1842). With regard to NDEs, I found only two cases in which a light was reported surrounding the NDEr. In the first case (Jaffé, 1962), a bright radiance was observed around the head of Carl Gustav Jung during his NDE. In the second case (Sabom, 1998), a bright light surrounded the head, the shoulders, and the chest of an NDEr, although it seemed not clear whether the light emanated from the body or originated from an external source. The latter group of phenomena represents another intriguing set of spontaneous experiences reported by bystanders at deathbeds, but space prohibits discussing them in this article. With regard to luminous phenomena originating from the body of the dying, there appear to be two related kinds of phenomena: (1) The mentioned mists, fogs, or luminous clouds leaving the body (113 case reports), and (2) luminous halos, radiances, or flame-like protuberances emanating predominantly from the head of the dying (29 case reports). Both types of phenomena continue to be described up to the present (Fenwick & Fenwick, 2008, McAdams, 1984, Moody, 2010, O'Connor, 2003, Randall, 2009) and were sometimes reported in combination (Monk, 1922, Tweedale, 1925). Of the 142 cases in my collection, 45 cases were reported by persons said to be mediums or psychics. All these 45 cases pertain to the first category of phenomena, the mists or shapes leaving a dying body. The 29 cases in which only a luminosity around the head was described were all reported by people not recognized to be psychic. In the first category, visions of the formation of a fully developed “double” above the deathbed as postulated by Crookall were reported 58 times. Other case reports refer to only brief glimpses of something leaving the body via the head or the abdomen, or even from the feet (Fenwick & Fenwick, 2008). Many cases of the first category were also reported by apparent non-psychics who at times gave descriptions of luminous phenomena that lasted for several hours and were witnessed collectively by up to 11 persons. The descriptions related by the witnesses were not always entirely congruent and indicated selective or divergent perception of the phenomena (e.g., Monk, 1922, McAdams, 1984). The phenomenological variations in the 142 case descriptions including the collective cases in which divergent observations of the same event were reported could indicate a difference in the ability to perceive these phenomena among the observers, divergent memories of identical observations, differing degrees of autosuggestion, differences in the dying process itself, or combinations of these factors. It might even be possible to photograph or film such kinds of luminous phenomena (Alvarado, 1987). A successful documentation would point to an at least partly objective component of these lights. Yet, the field of observations of luminous phenomena at deathbeds is an almost untouched issue. But, like many of the other death-related experiences I have already touched on, it seems well worth studying.

Concluding this section about luminous phenomena emanating from physical bodies, I'd like to mention that in personal communication a midwife has informed me that she had on two occasions seen a bright light shining around the body of a newborn baby. Except for one reference (Losey, 2007), I have so far not been able to find other examples of this phenomenon in the literature. Nevertheless, I should not be surprised if many of the paranormal phenomena reported from near-death states would also be reported sometimes from near-birth states—just as announcing dreams and announcing apparitions seem to be mirrored by afterlife encounters via dreams and apparitions.

Unexplained Death-Related Music

An experience similar to the perception of unexplained luminous phenomena observed by bystanders at deathbeds is the perception of unexplained music around the time somebody dies. Authors such as Perty (1861:470–472), Bozzano (1943/1982), and Rogo (1970/2005a, 1972/2005b) have collected cases in which bystanders at deathbeds have reported hearing inexplicable music of celestial quality. In a literature survey, I have found 47 cases in which persons attending to dying persons claimed to have heard such music on the day they died, or the day before. These experiences seem to be rarer than luminous deathbed phenomena, but in five cases the music and something leaving the body were perceived simultaneously. However, the ability to perceive this mystifying death-related music seems less related to psychic abilities compared with the perception of mists or shapes leaving the dying body. All 47 cases involved apparently non-psychic persons, although on two occasions a medium was among those who had heard the music. In total, 31 collective perceptions of music at deathbeds were reported. And, comparable to DBVs and NDEs in the blind (Lerma, 2007, Moody, 2010, Kessler, 2010, Ring & Cooper, 1999), there is one case indicating that a deaf man in a near-death state was able to “hear” the celestial music that was also heard by his caregivers (Podmore, 1889–1890). An intriguing aspect of these experiences is that the descriptions of the music often seem identical to the descriptions of the ineffable celestial music reported from OBEs, NDEs, DBVs, afterlife encounters, or the music described by purported communicators from the afterlife speaking through mediums (Bozzano, 1943/1982, Rogo, 1970/2005a, 1972/2005b, Moody, 2010). In that sense, unexplained celestial music heard at deathbeds might represent one more clue indicating that some kinds of genuine paranormal phenomena occur in near-death states, and thus during NDEs. Although the documentation standard of most of the reported cases is low, it seems likely that these death-related musical experiences represent another intriguing topic that has slipped the attention of most parapsychologists and NDE researchers alike.

Terminal Lucidity

Another peculiar phenomenon reported from near-death states can be described as terminal lucidity. In such cases, drowsy, weak, confused, or unresponsive patients start to regain mental clarity shortly before they die. This observation has frequently been reported with DBVs. As soon as the dying see these visions, they can suddenly become fully alert and lucid; sometimes, they will sit straight up in their bed and display a bodily strength they lacked during the preceding days or months (Barrett, 1926, Bozzano, 1947, Kelly, Greyson, & Kelly, 2007). Terminal lucidity cases of special interest concern patients with severe psychiatric or neurologic disorders who became lucid again shortly before dying (Nahm, 2009b, Nahm & Greyson, 2009, Nahm et al., 2011). At present, I am aware of 85 published cases of this sort. They include patients with brain tumors, dementia, and Alzheimer's disease, strokes, meningitis, schizophrenia, and many cases without proper medical diagnoses. Several other cases were related to me in personal communication. The most perplexing incidents are those in which the mental disorder was caused by diseases resulting in the degeneration or destruction of the patient's brain structure such as Alzheimer's disease, brain tumors, or strokes. Should these observations be substantiated in future investigations, they would pose serious problems for the mainstream model of consciousness and memory processing. Here, the human mind is regarded as the simple byproduct of the interaction of firing neurons. But similar to NDEs, one might be inclined to ask: How do cognition and memory processing work under conditions of severe brain malfunction, or even severe degeneration of the required neuroanatomical brain structures? The unexpected lucidity displayed by some patients could also be related to the extraordinary mental clarity often reported from NDEs and, as mentioned, to the lucid moments during DBVs. Guy Lyon Playfair reported a case of a DBV that highlights this possible relation (email correspondence, 22 December 2009). In this case, a dementia patient experienced a DBV the day before she died. In that vision, she saw and recognized deceased family members, namely a brother and a sister who were long dead. The vision was so real to the woman that she asked her caregiver in a surprisingly clear manner for three cups of tea. Yet, for at least one year, she had not been able to recognize the family members who lived with her in the same house. Moody (2010:15) has described a similar case involving an elderly man with Alzheimer's disease who was out of touch with reality for two months. On the day he died, he suddenly sat up in his bed, and held a clear and normal conversation with "Hugh," looking upward with bright eyes. It turned out later that this Hugh was a brother of his who had just died of a sudden fatal heart attack about that time, which was unknown to everybody present.

Although persons with dementia may be able to remember or hallucinate long-familiar individuals such as sisters and brothers better than those who played a role in the more recent past, the visions and conversations of these two persons represent a peculiar act of cognition and responsivity, given their previously deranged mental state. If dementia patients can suddenly recognize close living family members during terminal lucidity, others might well recognize deceased family members during DBVs or NDEs, perhaps due to entering a comparable stage of the process of loosening ties with the obstructive physical brain matter. In fact, it is a long-standing claim in spiritualism that many mental disorders are reversed or healed in the discarnate state. The already-mentioned reports of mediumistic communications with unresponsive, mentally disturbed, or dementia patients might support such a notion (Daumer, 1867, Mattiesen, 1936–1939, Monteith, 1921, Nahm, 2010b, Schiller, 1923). Some therapists even attempt to establish mediumistic communications with nonresponsive patients to help them regain an increased ability to communicate, or to help them to let go and die—allegedly, with some success (Sonnenschmidt, 2002). With regard to dreams in which nonresponsive persons play a role, there is an account of a five-year-old boy suffering from a malignant brain tumor who had already spent three weeks in a coma (Morse & Perry, 1990:65). His family members were constantly present at his bed and prayed for him. At the end of the third week, the boy appeared to the pastor of the family's church in an unusually vivid dream. He urged the priest to tell his parents that his time to die had come and that they should stop praying. The parents agreed and told their boy that it would be okay if he would go now. Suddenly, the boy regained his consciousness. He thanked his family for letting him go and predicted that he would soon be dying. He died the next day. A similar case was reported by Lerma (2007). Generally, it seems not uncommon that patients who had been in a deep coma suddenly become alert again shortly before they die to say goodbye to loved ones at their bedside (Fenwick, Lovelace & Brayne, 2010). Perplexing as such reports may be, they offer lines of future inquiry which might prove to be valuable especially for those who work with dementia or otherwise nonresponsive patients, for their families, and of course for the patients themselves.

Unusual Memories of Infants

The phenomenology of NDEs and, perhaps, terminal lucidity in patients who suffer from degenerative brain diseases pose difficulties for current neurobiological models of the mind and memory processing. The same applies to infants who seem to recall memories of things they should not be able to recall. Regarding CORTs, it is in my opinion reasonable to assume that several

of these children possess knowledge that they cannot have obtained through normal means of perception and communication. Still, it remains obscure how the knowledge about the previous personality's life can be remembered at all—especially when assuming that all personal memory is somehow stored in one's brain. In CORTs, some children may also talk of events occurring about the time of or during their birth (e.g., Ven. Chaokhun Rajsuthajarn in Stevenson, 1983, Bobby Hodges in Tucker, 2006). An intriguing case is represented by Pratomwan Inthanu (Stevenson, 1983). This woman remembered the life of a previous personality who died at the age of only three months. She gave several veridical statements about the short life of this baby, and stated that the process of birth into her present life had frightened her. Such cases seem to link CORTs to other contexts in which persons claimed to remember their birth or to experiences they had had when they were only a few days or months old. For instance, psychologist David Chamberlain (1988) has investigated cases of children who claim to remember their birth. Similar to CORTs, these children start speaking about their experiences at the age of two or three years. Sometimes, they seem to give veridical descriptions of details of the birth process and of complications that were never discussed in the family. Obstetrician David Cheek has reported similar cases in which hypnotically regressed persons gave veridical descriptions of specific incidents during pregnancy (Cheek, 1992). The parallels between memories of pre- and perinatal experiences and of NDEs have been detailed by Jenny Wade (1998). Chamberlain (1988) also reported the account of a scientist who claimed to remember leaving the baby's body when he had a sensation of dying during his birth. He remembered hovering above the scenery until the baby's body was pushed through the birth channel—apparently, he described an ND-OBE. Similarly, there are several NDE accounts that date back to the first days or months of life (Cornillier, 1927, Fenwick & Fenwick, 1996, Ring & Valarino, 2000, Serdahely, 1995, Serdahely & Walker, 1990, Sutherland, 1995, Walker, Serdahely & Bechtel, 1991). Usually, the children who claim to remember such NDEs begin to talk about them a few years later. They may tell about leaving their bodies, seeing it and the immediate surroundings from above, travelling through tunnels toward a light, or about meeting mystical figures—features that correspond to NDEs of adult Westerners. Thus, Fenwick and Fenwick (1996) speculated that such experiences indicate that NDEs do “not depend on the maturation and development of the brain” (p. 264). In support of this suggestion, it should furthermore be noted that many adult NDErs also report no less puzzling accounts of witnessing their own birth or events of their earliest childhood when experiencing their life review (e.g., van Lommel, 2010). The supposition that NDEs do not depend on the state of the organic organization of the brain would offer an explanatory model to account for the enigma of

why NDEs can be so remarkably similar under a variety of brain physiological conditions, ranging from mere fear of dying during conditions of optimal brain functioning to total anoxia and cessation of all brain activity for a prolonged time. Thinking along these lines might also lead to a better understanding of terminal lucidity, DBVs, and, in addition, to a better understanding of the enigmas associated with memory processing in general (Braude, 2006, Gauld, 2007).

Concluding Remarks

I have aimed at demonstrating how NDEs could be related to a variety of peculiar experiences and how connecting the dots might enable us to draw firmer conclusions about the nature of NDEs and human consciousness—if only after performing future investigations into the different subtopics. Because dying can be regarded the most deeply mysterious of the events likely to befall the living, it seems not unreasonable to strive for a better understanding of what precisely is going on during this process, and perhaps even after it. Except for psychologically and sociologically driven fears to address the taboo of dying, there is no reason why it should not be possible to study this neglected field of research by applying current scientific methods used in brain physiology, neurology, palliative care, grief research, developmental biology, psychology, or in parapsychology. Although it must be admitted that we seem far from this prospect at present, I hope that this paper might serve as a reminder that NDEs are not isolated oddities occurring at initial stages of the cessation of vital body functions, and that assessing the different experiences described might contribute to a better understanding of NDEs and the process of dying, and, perhaps, to a better understanding of the nature of the human mind.

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