My Very Own NDE: a Skeptical Look

An inside look at a strange phenomenon.

Introduction
Near-death experiences are among the most sensational of paranormal claims. They imply that, close to the moment of dying, some people gain a privileged glimpse into what follows. The content of these near-death experiences strongly suggests that we each possess a spirit quite separate from our physical selves. Often — not always — people report that they float away from their bodies and look down upon them. In some cases they are drawn down a dark tunnel, into a light place. They may be greeted by friends or relatives, or some entity who asks them to account for their lives. Then, often sadly, they find they must return to their bodies.

Raymond Moody, in 1975, published a book describing the near-death experiences of fifty people. His 'ideal' near-death experience had all the elements mentioned above. Moody's work met with a good deal of skepticism, but other research seems to corroborate his findings.

For example, Schoonmaker (1979) found that 60% of the 2,300 cases he studied reported near-death experiences similar to those of Moody.

The view that near-death experiences are telling us something about the hereafter obviously depends upon the similarity of the reports. If everyone has similar near-death experiences, there might be a case for believing that they are reporting something important. However, European researchers Knolbauch, Schmied and Schnettler (2001: 17-18) argue that this is not so:

Whereas Moody mentioned 15 elements, Michael Schröter-Kunhardt (1993) found 11; Sabom (1982) identified ten elements, as did George Gallup and William Proctor (1982); and Ring (1980) found NDEs to be comprised of five phases.

Knoblauch, Schmied and Schnettler carried out a large-scale survey of near-death experiences in Germany. They found that, in many cases, the experiences differed from the ones described by Moody and the
others. They also found that there were marked cultural differences, with East Germans reporting different experiences from West Germans. This certainly raises questions about the whole nature of the reports.

Skeptic Susan Blackmore (1991) has worked to explain such cases in terms of the brain trying to make sense of what is happening, and the beginning of the process of death.

Because the brain has no information, it is forced to use its own memories. Endomorphs may be released, leading to feelings of well-being. Increasing noise in the nerves of the visual cortex may give the impression of moving down a tunnel. Skeptics Schick and Vaughan (2002) review a range of theories and conclude:

*On balance ... it would appear that Blackmore's theory provides the best explanation of the near-death experience.* Schick and Vaughan (p293)

In this paper, you will hear about a skeptic's near death experience. It is quite different from the classical ones but, in its own way, may be just as interesting. I certainly found it so!

**Preliminaries**

The facts are very simple. Late in March 2001 I was having tea with my family. Nothing seemed amiss. Then, slowly, a crushing pain developed in my abdomen, just below the level of the ribs. I became concerned, as the pain relentlessly increased until it felt as though my organs were being crushed inside. We hustled the children off to bed, and I crumpled up, screaming, on our back deck.

After various complications I ended up in hospital¹. I was diagnosed as having acute pancreatitis, quite a nasty disease². For three and a half weeks I lay in intensive care, kept in a coma by morphine and midazolam. I fed and breathed through tubes up my nose, and assorted monitors were attached to me. A nurse watched me all the time, and there were always doctors in attendance.

Was I close to death at this time? Definitely. Once, while my wife was visiting, all the monitor readings began to decline. Nurses and doctors converged, and my wife was banned for thirty minutes until they had brought me back. Perhaps I grazed death at other times too, when my wife was not present. The doctors could not give my wife much reassurance at this time; they told her she would simply have to wait and see what happened. But here is the strange thing. While I lay, apparently inert, in intensive care, I dreamed — oh, how I dreamed! In normal life, I forget my dreams quickly, but these were different.

Years after my illness, the dreams are as vivid and detailed as real memories. I did amazing things in my dreams. I visited Germany, Britain, Russia and the USA. I wrote an expose of a worldwide health scam, fought a legal case over my adopted children and taught on Griffith University's Sunshine Coast campus³. So vivid were these dreams that later on I had to discuss some with my wife, to sort out what had happened and what had not.

Most memorable of all, though, I dreamed about my own mortality. I remember that my wife was in my dream. She showed me a book I had written. I could not remember any of the contents, but apparently it was very profound, and dealt with death⁴. For some reason, it had also been turned into a video.

**The railway to death.**

The central image of the book was this. The journey to death is like a spiral railway⁵. We travel down this railway, plunging and turning, on our way to final oblivion. And, as we travel, we can see what lies ahead, on the next turn in the spiral. Then I was on the railway. I was unable to move, only able to look ahead, to see what was going to happen. And I saw death, in many forms. I saw bodies decaying. I saw a field of people who had been massacred — in Russia, I think — and I saw their awareness flickering out, and their bodies merging with the earth. I saw bodies in tanks of preservative, robbed of all consciousness. I knew that soon I would join these dead people.

Strangely, there was no fear at all. I could see what would happen, and after a while I desired it. I wanted the plunging and whirling to stop, and to be at peace like those ahead of me.

Of course, I never reached the end. Other dreams replaced the railway, and finally I woke up, confused. Some neurologists asked me where I was. I replied "London?" — I had been there, in my dream. My wife finally convinced me I was still in Brisbane, and I began the slow route to recovery. It took an operation and two procedures. Eventually I was strong enough to leave hospital.

They discharged me three times, and each time, savage bursts of vomiting brought me back. Finally I left and did not return. The tubes were taken from my abdomen and some of my strength returned. "You will be normal" my surgeon had promised and I am, near enough.

**A skeptical view**

So what would a skeptic make of my near-death experience? It is completely unlike the ones touted in books. There was no tunnel, no light at the far end, no beloved relatives calling me on. I didn't leave my body at all. What does my experience tell me about death? Not much, directly. In the first place, there is no evidence that I was actually near to death when I had the dream. I was unconscious for more than three weeks. The railway dream might have happened at a time when I was far from death, or past the crisis point. There is simply no way to know. Even if the dream happened near to death, there is no reason to think that it gave any particular insight. It is just as plausible that powerful drugs made me feel dizzy, and my half-conscious mind interpreted this as being on a spiral railway.

Indirectly, I learned a good deal. I know that death might strike at any time, and for the sake of those I love I should have a will and other direc-
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tions ready. I also learned that I have good, capable people around me. My colleagues simply shouldered my workload and my supervisor kept the paychecks coming until he learned I had enough sick leave to cover my absence. My wife ran our household, caring for our children and coming to see me every day.

Now that I am cured, I have learned to enjoy each day as it comes, and to leave a positive trace in the world whenever possible. I try hard to do this, because I know one further thing: at some time in the future, I will ride that railway right to its very end.

Notes.
1 The Princess Alexandra Hospital in Brisbane. They have a worldwide reputation in this area of surgery, and certainly saved my life.
2. Oh, all right. The pancreas is a large gland (about a kilo) sitting just above the small intestine and secreting assorted digestive enzymes into it. If the duct blocks, the pancreas swells and bursts, spraying the surrounding organs with digestive fluid. As my surgeon told his students "Inside, this man is one giant burn." Ouch.
3. There isn't one.
4. I've co-edited one book, with Dr Ken Smith (Bridgstock and Smith 1986) and co-authored another with colleagues (Bridgstock et al 1998). I am quite proud of both, but very profound...
5. A spiral like a helix or a cork-screw. Not a flat, widening curve.
6. I tried to thank one of them, and he simply said "Well, you'd do the same for us."

References


The Great Skeptic CD - 2

Three years ago, Australian Skeptics produced The Great Skeptic CD, a compilation of the first 20 years of the Skeptic (1981-2000) plus the text of two books, Skeptical and Creationism: An Australian Perspective, for a total of over 4000 pages of text. This was a world-first for the Skeptical movement and, we believe, it is still the only such electronic compilation available world-wide. It has been by far the best selling item we have produced, both in Australia and overseas, and we have now almost sold out of our original pressing.

Announcement
We are therefore delighted to announce the forthcoming release of The Great Skeptic CD 2. This new CD will not only contain all the content from the original best-seller, but it will also come complete with 12 more issues of the Skeptic (right up to the issue you're reading now), new books on creationism and other skeptical goodies. Technical updates will make searching the over 4500 pages easier than ever.

We hope to release this new CD in time for the next issue of the Skeptic together with a special upgrade offer to owners of the original CD.

Request to CD owners
In any project of such complexity it is inevitable, despite conscientious proof reading by our loyal volun-
teers, that some small errors were overlooked and included in the original CD. We have found some and readers have found others, and they have been corrected in the new product, but there are probably still some in there.

If you have the original Great Skeptic CD and have noticed any typos or other errors, please email your findings to: skeptics@bsdn.com.au or mail them to:
PO Box 268, Roseville 2069, before the end of January 2004, so we can correct them in the new edition.