

BY MACHLA ABRAMOVITZ

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AS SCIENTISTS CONTINUE TO PUT FORTH THEO
EXPERIENCES, THERE ARE STILL MA

A large, three-dimensional red 'NO' sign is positioned on a metal bridge railing. The sign is highly reflective and casts a shadow onto the railing. The background features a clear blue sky with scattered white clouds. The railing itself is made of metal and has a wooden deck below it.

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**ORIES ABOUT NEAR-DEATH AND OUT-OF-BODY
NY THINGS THEY CANNOT EXPLAIN**



TINA GAISIN was only 36 when she had a heart attack and was pronounced clinically dead. The day before, the Toronto mother of four had undergone surgery for ovarian cancer. The next day, she was taken out of bed and told to sit on a chair. It was shortly afterwards that Tina felt herself “pop out of her body” and fly through a long tunnel. She remembers seeing a bright white light and emerging into a garden.

“It was beautiful,” she recalls, its memory as vivid today as it was 12 years ago. “The flowers were vibrant but difficult to describe, as they were colors I had never seen before or since. Their fragrance was pungently sweet, reminiscent of hibiscus and roses. There was music vibrating, a sound both calming and unfamiliar. I was facing an arbor, green and thick, over six feet tall, through which there was a gateway. Behind it I could hear activity and voices, but I couldn’t make out what was being said. My entrance was blocked by my two grandmothers, both of whom meant the world to me and who had passed away earlier that year. One was dressed in her favorite color, purple; the other in blue. They looked calm and beautiful. ‘It’s not your turn yet,’ they seemed to be telling me. Then they hugged and kissed me. I knew I was loved and felt worthy of that love.”

Within moments, Tina found herself hovering near the ceiling of her hospital room, watching her doctor and nurses resuscitate her body and call her name. Like many who have experienced what Dr. Raymond A. Moody—in his 1975 book, *Life After Life*—called a near-death experience (NDE), Tina did not want to return to her body. The place she had been was sunny, warm and filled with love, but she had been told that she still had important work to do. Intuitively, she knew that work concerned her children.

“I came to realize that every time I underwent

surgery, there was something in my life that needed fixing,” the four-time cancer survivor says. “I was raised Conservadox. Although I wasn’t strictly *shomer Shabbos*, I kept kosher. My near-death experience showed me that G-d expected more. I knew I needed to go with my heart and follow in Hashem’s ways and do what was best for my children. I divorced my husband, disassociated myself from toxic people in my life, and changed my job. I wouldn’t have had the courage to do that if not for that experience. Three years ago, I met some wonderful Lubavitcher *chasidim* who were warm, caring and accepting. By moving into their neighborhood I came home, geographically and spiritually.”

Tina is a great believer in the power of prayer, as she has seen it work in her own life. She is no longer afraid to die. “People ask me, given all my health issues, how I can maintain such a positive attitude,” she says. “True, what I’ve gone through was very hard. But I know there’s a purpose to it all.”

Unlike the warmth and luminosity that marked Tina’s near-death experience, Alon Anava’s was intensely dark. It was Shabbos morning, the first day of Pesach 2002. The taxi he was in was furiously racing through the streets of Manhattan, carrying its two passengers to the emergency room, when the then 27-year-old Alon collapsed, having inadvertently consumed a cocktail of recreational drugs hours before.

“I knew that something was seriously wrong,” he begins, “that I was going to die. Suddenly, I called out ‘*Shema Yisrael*.’ I didn’t know where the words came from; they were foreign to me. Then everything froze. I felt myself floating, peaceful. It was amazing. Time was nonexistent. I saw my parents mourning but I wasn’t afraid. *Alon is dead*, I told myself. *Is this how it ends?*”

“I watched my body falling against my friend’s

but felt disconnected from it. As I was pulled higher and higher I merged into his consciousness and could scan every detail of his life up until that moment in time. (I would later confirm these details.) I thought his every thought, felt his every pain. I began to panic.

"I ascended even higher, my vision extending further. I gazed into the window of a high-rise building. It was as if I registered every thought of every person occupying that space: their happiness, their sadness, all in a single moment. As the cab drove onto the bridge, the underlying design of the universe was revealed to me. There were letters within letters and numbers within numbers, like numerical codes.

"A filter had been lifted, giving me access to a more real world. In a split second I knew there was a Creator, and I was filled with such deep remorse for a life wasted and abused, devoid of G-d.

"Then the terrain abruptly changed. I suddenly found myself within the grasp of an enormous being that seemed to epitomize blackness. 'You are mine,' it said. Time stretched, as billions of years spread before me. The higher I rose, the more intense was my pain, not a physical pain but one born of anguish and despair. I knew it was payback for sins I had committed against myself and others, manifesting now as avenging angels of my own creation.

"Was this to be my eternity? Only G-d could save me. I cried out to Him. A tiny spark of light emerged out of this intense blackness, growing stronger and stronger until it was a radiant, white triangular-shaped light that emitted no heat. Soon it encompassed the entire space. I knew that G-d was behind that light and I was filled with shame and awe. Just as suddenly, I was immersed in a well of Divine knowledge that was impossible to contain. Such regret! Instantaneously, I found myself in another domain. A courtroom of sorts, the souls of all Jews gathered to bear witness against me. I felt exposed. Every act I had committed, every thought I'd had throughout my 27-year existence was there for all to see. I had no defense. I saw the spiritual blackness I had created and knew I had not only let myself down but all Jews.

"I was then offered a choice: to return to the grip of that black being, or come back to this world to live as a religious Jew. I was warned that there would be no second chance. The moment I signed the contract to return, I opened my eyes and heard my friend screaming, 'You were dead!' I would never be the same person again."

Tina's and Alon's experiences are not unique. It is estimated that more than 25 million people worldwide, representing all religions and cultures, have had a near-death experience in the past 50 years. As of 2001, almost 600 people a day have reported experiencing one in the US alone. What, though, are these experiences: hallucinations, or glimpses into the hereafter?

Judaism is unequivocal in its belief in an afterlife and the immortality of the soul. Jewish mystical writings further expound upon these subjects. Some see near-death experiences as transcendent soul experiences. Shortly after Dr. Moody's book came out, Rav Chaim David Halevy, Sephardic Chief Rabbi of Tel Aviv and Jaffa, published a discussion of near-death experiences in light of traditional Torah sources, in his *sefer Asei Lecha Rav*. Citing the *Tanach*, *Talmud*, *Zohar* and the writings of Rav Eliyahu Dessler, he explained that the patterns Moody noted—a resounding buzz at the time of death, a dark tunnel, a loving, white light, life review, seeing one's body from a distance, the soul being greeted by deceased relatives or friends, encountering the *Shechinah* in some form

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"THEN WILL THE EYES OF THE BLIND BE OPENED"

Susan was sitting at her kitchen table when she suddenly had a massive heart attack. She felt her consciousness leave her body, and then saw the sink stacked with dirty dishes her husband hadn't washed. When she mentioned it to him later, he was not so much embarrassed as stunned: Susan should not have been able to see the dishes because she is virtually blind. In fact, though, she is only one of 31 visually-impaired people (14 congenitally blind) reporting such experiences who were interviewed by researchers Kenneth Ring and Sharon Cooper.

Such cases challenge scientists.

One English psychologist, Susan Blackmore, has proposed the "dying brain" theory, hypothesizing that near-death experiences are due to anoxia, the absence of oxygen. In this view, the sudden decrease of blood to the brain during the dying process blocks the neural receptors controlling memory and sight, thus accounting for the bright light and the illusion of a tunnel.

"But if that were the case," says neuroscientist Mario Beauregard, "all cardiac arrest survivors would have them, whereas only 18 percent of them do. Another problem is that many people have reported near-death experiences when they weren't terminally ill and would have had normal levels of oxygen in their brains. Also, when oxygen levels markedly decrease, patients... become highly confused and agitated and remember little."

There are those who argue that near-death experiences and out-of-body experiences are hallucinations produced when the brain's right temporal lobe is electrically stimulated. A Canadian neuroscientist named Michael Persinger has similarly proposed that out-of-body experiences, religious experiences and mystical visions are caused by seizures in

that part of the brain. Some have suggested that there is a "G-d spot" in the brain that accesses these kinds of experiences.

"There is no 'G-d spot,'" Beauregard insists. "Although epileptic seizures frequently occur in this region, it is very rare for patients to report elements that resemble a religious or spiritual experience. Our research has demonstrated that many parts of the brain are activated during religious experiences, not just the temporal lobe."

In 2002, Swiss neuroscientist Dr. Olaf Blanke published a study in *Nature* that raised this again. The editors proclaimed that the location responsible for producing out-of-body experiences had been found.

But as Dr. Beauregard explains it, "By stimulating that particular part of the brain they induced a mixture of hallucinations and delusions, but there was perceptual distortion... Typical out-of-body experiences, by contrast, involve a verifiable perception of events, such as the person's own resuscitation or traffic accident and the surroundings in which the events took place."

There is the "REM (Rapid Eye Movement) intrusion into wakefulness" theory, proposed by University of Kentucky neurologist Dr. Kenneth Nelson. Decreases in blood to the brain can bring on a state between sleep and wakefulness that produces out-of-body sensations and vivid narratives. Pleasure centers are stimulated, perhaps producing the feelings of peace and wholeness reported during these experiences. This might explain consciousness when the brain is seemingly not functioning. "The sleep/wake switch is in the brain stem, which helps control the body's most basic functions and stays active for longer than the higher brain in cardiac arrest," he explains.

REM intrusion, however, can be rebutted

on many levels. It cannot occur when a person is comatose, under the influence of barbiturates, anesthetized or blind. The experience is also different from classic near-death experiences and out-of-body experiences. There are no life reviews, the hallucinations are not meaningful, and the person wakes knowing it was a dream.

There are also those who simply attribute near-death experiences to memory tricks and biases. Some suggest the experiences' power lies only in their interpretation, since they are influenced by cultural, personal and religious histories. Others counter this by pointing out that atheists, in contrast to their stated beliefs, and very young children interpret these experiences similarly.

How near-death experiences can happen at all when the brain is unconscious? Well, some claim that they don't; they occur either prior to or as the brain is reviving, triggered by a decrease in consciousness. What appears to take place in a considerable span of time may in fact be only seconds. This theory, though, doesn't apply to OBEs, particularly those induced by cardiac arrests, whose timing can be verified. There are numerous recorded cases of people describing entire defibrillation processes from start to finish, in their correct sequence, as well as objects found or events occurring outside their immediate surroundings, for instance on a different hospital floor or even miles away – and all while they are clinically dead. Then, there are those who experience vivid NDEs when they merely believe they are going to die (anticipate an accident about to happen), but don't. Similarly, there is the shared-death experience (SDE) where a healthy, loved one accompanies the dying individual through the tunnel, sees his life review and other facets of his NDE. The latter two occur when there is no decrease in consciousness.

As far as Tina Gaisin is concerned, she doesn't need confirmation of what she believes. "The world I was exposed to was much more vivid and alive than the one I am living today. It was not a dream."

and being embraced by its all-consuming love—are very much in keeping with what these sources say about the soul's journey into the afterlife. Rav Chaim Chanun, in his *Otzros Acharis Hayamim*, further elaborates on the giving of a *din v'cheshebon* after death that closely resembles Alon's experience, a process that every *neshamah* undergoes, according to Chazal.

Modern science, however, is skeptical about assigning other-worldly meanings to these phenomena. Due to the rise of recorded near-death experiences, thanks to improved resuscitation techniques (10-15 percent of those in cardiac arrest are revived, and of those, approximately 15 percent report having had a near-death experience), interest in the subject has soared. Neuroscientists, cardiologists and psychologists are intrigued about what these experiences might teach us about the dying process—death is no longer seen as occurring in a moment but as a process that is reversible for a certain amount of time, now standing at about an hour—as well as mind and consciousness and their relationship to the brain. Nevertheless, those who maintain that near-death experiences are brain-induced hallucinations find themselves facing a paradox. Université de Montreal neuroscientist, researcher and author of *Brain Wars*, Dr. Mario Beauregard, explains:

“During a cardiac arrest, breathing stops and blood flow and oxygen uptake in the brain are interrupted. When this happens, the EEG [that measures brain activity] is flat-lined within 10-20 seconds and brainstem reflexes disappear. The person is then considered clinically dead. Because the brain structures mediating... perception and memory are severely impaired, such patients would be expected to have no clear and lucid mental experiences that would be remembered. And yet, 10-20 percent of survivors do have such memories.”

Many hypotheses explaining the scientific causes behind near-death experiences have been posited. To date, none has been verified and each is rebutted by researchers of near-death experiences. Accordingly, some neuroscientists, cardiologists and others are now expanding the traditional scientific framework and considering theories that possibly verge upon the mystical.

Former Harvard Medical School Professor Dr. Eban Alexander would have been one of the first to dismiss near-death experiences as nothing more than the last gasp of a dying brain brought on by sudden, diminished oxygen or the release of endomorphins. How tiny gray cells could generate thoughts and feelings in general, let alone such vibrant, meaningful experiences while the person is unconscious—well, it would

UNLIKE THE WARMTH AND LUMINOSITY THAT MARKED TINA'S NEAR-DEATH EXPERIENCE, ALON ANAVA'S WAS INTENSELY DARK.

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only be a matter of time for scientists to figure that out.

Then on November 10, 2008, the 58-year-old neurosurgeon was rushed to Virginia's Lynchburg General Hospital with an extremely rare case of *E. coli* bacterial meningitis, an illness that attacks the neocortex, the part of the brain responsible for memory, language, emotion, sight and hearing, awareness and logic. "The more primitive parts of my brain...functioned for all or most of my time in coma. But when it came to the part of my brain that every single brain scientist will tell you is responsible for the human side of me; well, that part was gone. I could see it on the scans [later]," he writes.

Despite this and against all odds (he was given only a 3 percent chance of recovery), he snapped back to consciousness after being comatose for a week. Not only was he not brain-impaired, but he related having a near-death experience that was astonishingly rich in detail, logical, and psychologically deeply meaningful to him. It was

also highly spiritual; the last thing this former nonbeliever remembers thinking before catapulting into his near-death experience was, "G-d, save me!"

Medically, none of this should have happened. "I quickly began to realize that mine was a technically near-impeccable near-death experience, perhaps one of the most convincing cases in modern history. What really mattered was the sheer, flat-out impossibility of arguing from a medical standpoint that it was all fantasy."

The experience was so life-changing that he wrote a book about it, *Proof of Heaven: A Neurosurgeon's Journey into the Afterlife*, which made *The New York Times*' best-seller list and created quite a stir in the medical community. In the book, Alexander addresses nine scientific hypotheses explaining his experience, including the "reboot" theory—his near-death experience occurred as consciousness was being restored—and argues how each falls short. Alexander now firmly believes that there is more to human consciousness than electrical and chemical neurons charging through the brain. "My experience showed me that the death of the body and the brain are not the end of consciousness; that human experience continues beyond the grave. More important, it continues under the gaze of a G-d Who loves and cares about each one of us and about where the universe and all the beings within it are ultimately going." He now prays and meditates daily.

Alexander's dramatic transformation doesn't surprise registered nurse Janet Schwaninger. While carrying out an independent study on this subject, she interviewed numerous people reporting similar experiences. In 1991, the clinical cardiovascular coordinator at the Barnes-Jewish Hospital in St. Louis, Missouri took her research proposal to the dean of the Washington University Human Studies Committee, and admits being slightly surprised

**DR. WEISS, WHO HAS THE
DISTINCTION OF HAVING BEEN
RAV ELAZAR SHACH'S, ZT"L,
CARDIOLOGIST, BELIEVES
THESE EXPERIENCES ARE
TOTALLY CONSISTENT WITH
OUR BELIEF IN OLAM HABA.**

when it was accepted. "I thought they would be skeptical about the worthiness of what I was trying to do," she says. Instead, the proposal was taken very seriously. It helped, she says, that she joined efforts with cardiologist Dr. Alan Weiss, professor of medicine at Washington University Medical School. Both of them had worked at the hospital for over a dozen years.

Schwaninger's interest in near-death experiences was piqued in 1989 when she witnessed the cardiac arrest of a medical colleague. It had taken seven defibrillations to resuscitate him. After regaining consciousness he shocked everyone by describing exactly what had been done to him, insisting that he had watched it happen from the upper corner of the room. Furthermore, he declared, a spiritual entity had been with him the entire time, assuring him that no matter what, everything would be all right. "He had never heard of a near-death experience before," Schwaninger says. "He told us he felt totally conscious and aware even though he knew that medically he was virtually dead."

Even more fascinating was how the experience changed the doctor. "He became a happier person, making significant changes in his personal life and medical practice," she says.

A year later, a transplant patient experienced a profound near-death experience. When he tried discussing it with his doctor, he was ridiculed and told it was a hallucination. It was then that Janet decided to investigate just how common these experiences were. Schwaninger and Weiss's study would take 10 years to complete.

Despite differences in detail and interpretation, the commonalities were striking. Not only were the patterns similar, but that they were communicated at all was significant. "When most people wake up from cardiac arrest they don't even know what time it is, let alone what happened to them while unconscious. Yet those who had a near-death experience will recount their experience immediately and never forget any detail of it," Weiss declares.

Schwaninger was deeply moved by the stories she heard. "Many told me, 'This was no dream. It was more real to me than my normal reality.' Many expressed no fear, panic or trauma, coming away instead with a strong belief in G-d, and knowledge that there is a purpose to their lives. The materialistic viewpoint of science suggests there is no life after death, and that when the physiological activity of the brain stops functioning, consciousness no longer exists. Our research indicates that this is no longer a valid assumption."

Weiss, who has the added distinction of having been Rav Elazar Shach's, *zt"l*, cardiologist, believes that these experiences are totally consistent with our belief in *olam haba*.

In time, Schwaninger was asked to give educational talks in the hospital. And she has never shied away from telling her somewhat skeptical audiences that near-death experiences are not hallucinations, but powerful spiritual experiences that are of significance to health-care professionals. "I've had many people tell me that it helped them recover sooner," she says. This has led to an added sensitivity about how to behave around patients who are unconscious. "They may, in fact, hear and see what is going on."

Schwaninger has come to believe that consciousness exists independently of the brain, and that there is another dimension that can be accessed, even while alive. Weiss, an Orthodox Jew, concurs. He admits, though, that near-death experiences cannot be proven scientifically, since they are essentially spiritual, highly subjective and, as such, not verifiable using standard scientific methodologies.

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Undeterred, researchers are focusing on one particular component of near-death experiences: the out-of-body experience (OBE), when consciousness appears to separate from the body. If out-of-body experiences are proven to be real, then maybe, just maybe, near-death experiences are real as well.

Dr. Sam Parnia, a pulmonologist and author of *What Happens When We Die*, is trying to determine just that. His international "Aware Project," begun in 2008, places objects in hospital ICUs to ascertain whether those reporting out-of-body experiences can identify them; if someone is having a real out-of-body experience, he should be able to see and describe them afterwards. Such a vast study, he believes, can confirm whether out-of-body experiences are or are not hallucinations. This is important in order to improve the outcome for survivors, as well as to shed light on how consciousness and memory can exist in a seemingly nonfunctioning brain. The study is ongoing.

Dr. Beauregard is convinced this project will ultimately confirm the veracity of such experiences. "During the last decade there have been five different studies documenting over 100 cases of... conscious mental activity during a state of cardiac arrest in clinical death," he says.

Because of these studies, many scientists are beginning to see the brain as a kind of receiver or interface for consciousness and memories, sort of like a television set. "If you alter certain electronic components in your TV, the reception will be distorted...but it doesn't mean that the program you're watching is being produced inside the TV set. Under normal circumstances," he continues, "the brain acts as a filter and doesn't allow these near-death experience realities into our consciousness. To have these experiences, something has to be shifted in terms of brain

activity, whether electrical or chemical." And you don't have to almost die to do it. "You can meditate, contemplate, pray... It's possible that you will have intense, spontaneous, spiritual experiences in that kind of state. It happens sometimes," he says.

So is the brain creating the reality, or is reality creating changes in the brain?

"Scientifically, neither position has been confirmed. That's why these studies are so important," concludes Beauregard, who personally believes that near-death experiences are proof of an afterlife and that consciousness exists outside the brain. "The main problem is that mainstream science is a materialist and reductionist enterprise. You cannot explain a phenomenon unless it fits into that framework. Fortunately, that's starting to change."

It is out-of-body experiences like Pam Reynolds's that are contributing toward this change. In 1991, the singer-songwriter suddenly experienced extreme dizziness, loss of speech and immobility in parts of her body. A CAT scan revealed a giant aneurysm at the base of her brain. Her neurologist gave her no chance of surviving. Desperate, she turned to Dr. Robert Spetzler of the Barrow Neurological Institute in Phoenix, Arizona, who agreed to take on her case. He lowered her body temperature to 10°–15° C, shut down all brain activity and drained the blood from her head to starve the aneurysm so it would collapse on its own. For one hour, Pam was clinically dead.

Before the surgery, Pam was anesthetized and lost full consciousness. Her eyes were taped shut; electrodes were attached to measure brain activity in the cerebral cortex, and little devices were inserted to monitor brainstem activity. When Spetzler began cutting into the membrane of the brain, Pam experienced an out-of-body experience. In her own words:



THESE BRAIN STRUCTURES ARE SEVERELY IMPAIRED, YET 10-20 PERCENT OF SURVIVORS DO HAVE SUCH MEMORIES

"I don't remember anything until the sound. It was unpleasant, guttural, like being in a dentist's office. The top of my head was tingling and I felt myself popping out of it. I was looking down at my body, as if I was sitting on the doctor's shoulder. I knew it was my body, but I didn't care. The instrument in his hand looked like the handle of my electric toothbrush...it had little bits that were kept in a case... I remember hearing a female voice saying, 'We have a problem—her arteries are too small.' Then I heard, 'Try the other side.' The voice seemed to come from further down the table."

What Pam saw and heard was later confirmed. Given Pam's physiological state, Spetzler told a BBC documentary, there was no way she could have seen or heard anything. Yet she did.

Pam's out-of-body experience, followed by what she describes as a profound near-death experience, left her more spiritually attuned as well as more empathetic and intuitive. This is not unusual. It is a noted byproduct of these experiences. It is these types of transformations, some researchers argue, that differentiate near-death experiences from hallucinations.

Inspirational speaker and Lubavitcher *chasid* Nomi Freeman is so taken with stories like these that she feels charged to relate that message to as wide an audience as possible. "It's a universal message: There is a G-d and an afterlife, and we are responsible for every action and thought we have," she says.

The Toronto resident was first alerted to the subject 20 years ago when she read an article on near-death experiences. But it was only after reading Dr. Irving Block's book, *G-d, Rationality and Mysticism*, that she felt compelled to speak publicly about it. "The need to act lovingly and compassionately became obvious, not just towards humans but all of G-d's creation," she says.

Nomi takes this message to community Shabbatons, women's groups, camps, and to every venue where she is given a platform. She also posts her lectures online. Her audiences are captivated by the stories—and it is rare when no one approaches her with near-death experiences of their own.

These days, more and more people are courageously sharing these very personal and private experiences. Rachel Noam, a secular Israeli who became observant because of her near-death experience, wrote a book entitled *The View from Above*, recounting her experience; Rebbetzin Basya Barg recently shared her near-death experience with a *chareidi* magazine. Tina Gaisin and Alon Anava well understand this desire. Like many others who have had near-death experiences, they consider them to be a precious gift from G-d, Whose message must be shared. ■

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