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September 2013 Article of the Month

This month's article selection is by Chaplain John Ehman,
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[*Editor's Note: This article was featured when it was first available ahead-of-print.*]

Khanna, S. and Greyson, B. "**Near-death experiences and spiritual well-being.**" *Journal of Religion and Health* 53, no. 6 (December 2014): 1605-1615

SUMMARY and COMMENT: Stories of Near Death Experiences (NDEs) are relatively common for chaplains, but what research may be paired with that anecdotal experience? Our article this month is co-authored by one of the leading medical scholars of NDEs, [Bruce Greyson](#), and Surbhi Khanna, a Psychiatry Resident at the University of Virginia Health System. They note that studies indicate perhaps 17% of critically ill patients have the experiences, but "many patients are reluctant to acknowledge them due to lack of acceptance and social support" [p. 1606]. Chaplains, as among the few with whom patients may venture discussion of NDEs, should find the insights from research useful in contextualizing the phenomenon.

Khanna and Greyson summarize "profound and transforming" effects of NDEs:

They may lead to value and life changes similar to those reported following spiritual awakening, including enduring self-transformation and self-transcendence, and are not associated with prior religious affiliation or religiosity, nor are they typical of those resulting from traumatic experience.... A recent review of research into the characteristic changes following NDEs found the most commonly reported to be loss of fear of death; strengthened belief in life after death; feeling specially favored by God; a new sense of purpose or mission; heightened self-esteem; increased compassion and love for others; lessened concern for material gain, recognition, or status; greater desire to serve others; increased ability to express feelings; greater appreciation of, and zest for, life; increased focus on the present; deeper religious faith or heightened spirituality; search for knowledge; and greater appreciation for nature... [p. 1606]

Moreover, "one of the most significant changes following an NDE is spiritual growth, often involving a more loving attitude, knowledge of God, and inner peace" [p. 1606]. However, "the specific construct of *spiritual well-being* has not yet been investigated in persons reporting NDEs" [p. 1607; italics added], and so the present study seeks to explore that particular relationship.

"Participants were 224 individuals who had previously contacted the authors to share their accounts of their experiences when they had come close to death" [p. 1607]. They were assessed by a mailed battery that included two well established measures: the Spiritual Well-Being Scale (Paloutzian and Ellison) and the Near

Death Experience Scale (Greyson). The NDE Scale was used in two ways: first, to assess whether the individual did indeed have an NDE, thereby dividing participants into an NDE group (203 = 91%) and a comparison group of "non-experiencers" (21 = 9%); and second, to assess the *depth* of the experience of those in the NDE group as "subtle," "deep," or "profound," [--see pp. 1608-1609].

Among the findings:

In general, the data from this study suggest that NDEs are associated with an increased sense of spiritual well-being, and that the "deeper" the NDE, the more profound this effect becomes. [pp. 1611-1612] ...[T]he depth of NDE was associated with higher scores on the SWBS and on both the religious and existential well-being subscales. [p. 1613] ...As individuals go deeper into their NDEs, they report a stronger level of connection with their inner being or "spiritual self," as well as with the world around them. These connections impact NDErs' entire outlook toward life and often impel them on a journey to find the same harmonious, peaceful, and serene feeling. These changes may explain NDErs' higher scores on the SWBS compared to respondents who had come close to death without NDEs. [p. 1613]

Also:

SWBS scores among our sample of NDErs tended to be comparable to those of religious samples in other studies. [p. 1612] ...The comparably high scores among NDErs suggest either that prior religiosity facilitates NDEs or that NDEs are transformative experiences that alter experiencers on a spiritual level. [p. 1613]

The authors consider their data in light of other studies and conclude:

The data from this study support previous research suggesting that NDEs may be considered a form of, or vehicle for, spiritual awakening. We suggest that a causal link between NDEs and spiritual well-being may cautiously be proposed as the best fit for the cumulative data so far. However, the retrospective design of almost all the supportive research obliges us to regard that causal interpretation as a hypothesis still to be tested by prospective study. [p. 1613]

Khanna and Greyson are models of scientific caution about making generalizations from a single study's findings. They are quick to point out that "our confidence in and interpretation of these findings must be tempered by certain weaknesses inherent in a retrospective study of this type" [p. 1612], including the fact that their sample was self-selected. Their challenge for future studies to be prospective may be one that research chaplains could be in a position to explore.

One final note about the article: our authors give particular attention to a recently-proposed theory (by Sam Parnia and Josh Young in their 2013 book, *Erasing Death: The Science That Is Rewriting the Boundaries between Life and Death*): namely that "the biology of cardiac arrest is sufficiently different from that of other close brushes with death to justify considering experiences under those two circumstances separately" [p. 1608]. The present study "did not find any difference in SWBS scores" between individuals based upon such a categorization, though Khanna and Greyson are again cautious in drawing conclusions from this finding.

Suggestions for the Use of the Article for Student Discussion:

The analysis in the results section of this month's article may be difficult for non-researchers to follow, but the Introduction and Discussion sections should be accessible to all students. The Introduction, especially, could open a general discussion of Near Death Experiences and a comparison of the broad outline of the research with chaplains' awareness of the phenomenon. Consulting the NDE Scale itself may give a good sense of the defining characteristics of NDEs [--see Related Items of Interest, II, below]. What have students ever heard

from patients along these lines? What do they make of the authors' comment of the reluctance of people to tell of NDEs? Have students heard patients preface disclosures with phrases like, "This probably sounds crazy..."? Do patients seem aware that NDEs are not uncommon? Also, have patients indicated NDEs have been anxiety-relieving or anxiety-causing? Have they been perceived as transformative? What theological dynamics have come up for patients?

Related Items of Interest:

I. We previously looked at studies of Near Death Experiences, including works by Greyson, in our [May 2006 Article-of-the-Month](#). See that for page for earlier references on the subject.

II. This month's study employed the Near Death Experiences Scale. That 16-item measure is online through the International Association for Near Death Studies at <http://iands.org/research/important-research-articles/698-greysen-nde-scale.html>. Note: the scoring information about the scale states only that a score of 7 or greater identifies a Near Death Experience, and there is no mention of the *depth*-indicators used in the present study for assessing "subtle," "deep," or "profound" NDEs.

III. In addition to providing information about the Near Death Experiences Scale, the International Association for Near Death Studies site offers a great deal of information about NDEs. See <http://iands.org>.

IV. Bruce Greyson is Director of the Division of Perceptual Studies at the University of Virginia School of Medicine and Health System. The division's [Perceptual Studies website](#) includes a number of links to information of general interest on NDEs and other related topics.

V. Recent articles about Near Death Experiences include the following. Note the international origins of this scholarship.

Cant, R., Cooper, S., Chung, C. and O'Connor, M. [School of Nursing and Midwifery, Monash University, Clayton, Australia.] "**The divided self: near death experiences of resuscitated patients--a review of literature.**" *International emergency nursing* 20, no. 2 (April 2012): 88-93. [(Abstract:) This paper explores the prevalence of 'near death experience' phenomena associated with a resuscitation event and examines the current state of evidence for causation. Patients' reports of unusual recollections associated with a period of unconsciousness (perceived as approaching death) have fascinated individuals and the medical fraternity. Near death experiences (NDE) are reported in 4-9% of general community members and up to 23% of critical illness patients, although they can occur in healthy individuals who may think they are in peril. One explanation is that paranormal visions that include seeing bright lights, a tunnel and having feelings of peace may be a stage of enlightenment as death approaches. More objective explanations point to neuro-chemical changes in a stressed or dying brain as explanation for nearly all the elements of near death experience. However if this is so, NDE should occur in all patients who are critically ill and near death. In general, patients report positive psychological outcomes after a near death experience. Nurses can support patients during a time of crisis by assisting them and their families to comprehend the experiential event using effective communication and listening skill.]

Facco, E. and Agrillo, C. [Department of Neurosciences, University of Padova, and the Italian Center for Clinical and Experimental Hypnosis Torino, Italy.] "**Near-death-like experiences without life-threatening conditions or brain disorders: a hypothesis from a case report.**"

Frontiers in Psychology 3 (November 15, 2012): 490. [(Abstract:) Near-death experiences (NDEs) are profound psychic experiences commonly occurring in life-threatening conditions. They include feeling a sense of peace, of seeing a bright light, encountering deceased relatives or religious figures, and of transcending space and time. To explain them, it has been suggested that they stem from brain disorders and/or psychological reactions to approaching death, a sort of wishful thinking in response to the perceived threat. This is a report on a case with most of the features typical of NDEs except that it occurred entirely without any life-threatening conditions. This evidence is theoretically incompatible with either of the above hypotheses, suggesting that a broader interpretation of the phenomenon is needed.]

Thonnard, M., Charland-Verville, V., Bredart, S., Dehon, H., Ledoux, D., Laureys, S. and Vanhauzenhuysse, A. [Coma Science Group, Cyclotron Research Centre and Neurology Department, University Hospital of Liege, Belgium.] "**Characteristics of near-death experiences memories as compared to real and imagined events memories.**" *PLoS ONE* 8, no. 3 (2013): e57620. [(Abstract:) Since the dawn of time, Near-Death Experiences (NDEs) have intrigued and, nowadays, are still not fully explained. Since reports of NDEs are proposed to be imagined events, and since memories of imagined events have, on average, fewer phenomenological characteristics than real events memories, we here compared phenomenological characteristics of NDEs reports with memories of imagined and real events. We included three groups of coma survivors (8 patients with NDE as defined by the Greyson NDE scale, 6 patients without NDE but with memories of their coma, 7 patients without memories of their coma) and a group of 18 age-matched healthy volunteers. Five types of memories were assessed using Memory Characteristics Questionnaire (MCQ--Johnson et al., 1988): target memories (NDE for NDE memory group, coma memory for coma memory group, and first childhood memory for no memory and control groups), old and recent real event memories and old and recent imagined event memories. Since NDEs are known to have high emotional content, participants were requested to choose the most emotionally salient memories for both real and imagined recent and old event memories. Results showed that, in NDE memories group, NDE memories have more characteristics than memories of imagined and real events ($p < 0.02$). NDE memories contain more self-referential and emotional information and have better clarity than memories of coma (all $ps < 0.02$). The present study showed that NDE memories contained more characteristics than real event memories and coma memories. Thus, this suggests that they cannot be considered as imagined event memories. On the contrary, their physiological origins could lead them to be really perceived although not lived in the reality. Further work is needed to better understand this phenomenon.]

van Lommel, P. [Department of Cardiology, Rijnstate Hospital, Arnhem, The Netherlands.] "**Near-death experiences: the experience of the self as real and not as an illusion.**" *Annals of the New York Academy of Sciences* 1234 (October 2011): 19-28. [(Abstract:) Because the publication of several prospective studies on near-death experience (NDE) in survivors of cardiac arrest have shown strikingly similar results and conclusions, the phenomenon of the NDE can no longer be scientifically ignored. The NDE is an authentic experience that cannot be simply reduced to imagination, fear of death, hallucination, psychosis, the use of drugs, or oxygen deficiency. Patients appear to be permanently changed by an NDE during a cardiac arrest of only some minutes' duration. It is a scientific challenge to discuss new hypotheses that could explain the possibility of a clear and enhanced consciousness--with memories, self-identity, cognition, and emotions--during a period of apparent coma. The current materialistic view of the relationship between consciousness and the brain, as held by most physicians, philosophers, and psychologists, seems to be too restricted for a proper understanding of this phenomenon. There are good reasons to assume that our consciousness, with the continuous experience of self, does not always coincide with the functioning of our brain: enhanced or nonlocal consciousness, with unaltered self-identity,

apparently can be experienced independently from the lifeless body. People are convinced that the self they experienced during their NDE is a reality and not an illusion.]

If you have suggestions about the form and/or content of the site, e-mail Chaplain John Ehman (Network Convener) at john.ehman@uphs.upenn.edu .

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