



Near-Death Experiences (NDE)

NDEs: OBE's Much Scarier Cousin



Near-death experiences (NDEs) are related to the out-of-body experience but involve a violent or traumatic event where the participant is perceived to be near death or actually dead. General estimates of occurrence range from 6 to 7% of population, whereas others estimate 10 to 15%.

General Features of the NDE

An overwhelming feeling of peace or well-being, including freedom from pain

- Described frequently as emotional detachment. Sometimes happiness or joy. Some sadness loneliness or fear, but transitory noted as the most common feature.

Impression of being located outside one's body

- No feeling associated with separation from the body, typically noticed by seeing the body outside oneself. Can see oneself and room and reporting details (debated if paranormal).

Floating or drifting through darkness, sometimes described as a tunnel

- Either realm of complete darkness or (minority) described as tunnel of light. The tunnel was found more common from executives and professionals.

Becoming aware of a golden light

- Generally golden, sometimes blinding, generally having a magnetic or assuring quality

Encountering and possibly communicating with a presence (deified figure, body of light)

- Cosmic being, angel, or religious figure, mostly perceived intuitively.
- Communication often involves staying or returning, sometimes commanding return.
- Sometimes perceived as guide or escort.
- Three studies show a presence is NOT associated with prior religious beliefs.

Rapid succession of visual images of one's past



- Life review is associated with 25% in general with NDE. May be in series, highlights, or all at once.
- Some few are placed within events, emphasizing those they have hurt.
- Some few report fantasies about death, funeral and future if dead.

Experiencing another world of beauty

- Between 20 and 54% occurrence, contact with beautiful nature and vivid colors, diffuse lighting sometimes music. Not concurrent, typically with prototypical view of Christian heaven with some rare exceptions.
- More common with females in one study.
- Meeting relatives or other spirits that you communicate with.
- Friends and relatives sometimes met, usually advised to return. Presence of boundary line present. If line crossed, no return is possible.

Research has shown that NDEs typically have a strong psychological effect on the individual. These effects include:

1. Sense of life purpose
2. Appreciation of life and living life to fullest
3. Self-worth increased
4. Tolerant, compassionate attitude to others
5. Increased religiosity in a universal spiritual sense
6. Decreased materialism and competitiveness
7. Conviction in life after death
8. Less fear of death
9. Anti-suicide attitude
10. Family disruption due to changes in NDE participant's change in attitudes and beliefs

The Negative NDE



Although negative NDEs (NDEs with aversive or scary content) occur, they are less frequently reported. Characteristics of negative NDEs are similar to regular NDEs, but with some exceptions. These types of NDEs are generally described as aversive, and three general types have been classified:

1. A hellish experience meeting an aversive entity or being
2. A nothingness where the individual is taunted by voices claiming life was never real, associated



with poor anesthesia

3. A positive experience, but where the individual is gripped with extreme fear of end of life

Additional Characteristics of the Negative NDE

1. Tend to parallel positive, common characteristics of NDEs, but the experience is negative instead. For instance, sometimes the tunnel is perceived to go downward instead of upward
2. Condemnation of deeds common with negative NDE
3. Realm visited described as barren, desolate, having a lake of fire, or the like. Reporting of demons and negative entities. Reports being “spared” when brought back to life.

Psychological and Sociological Relationships to NDES

Oddly, what common sense tells us about predictors of NDEs are not necessarily the case. For instance:

1. NDEs are not related to general demographics (age, sex, race, etc.)
2. NDEs are not related to measures of religiosity or religious belief.
3. No relationship has been found between NDES and intelligence, extraversion, neuroticism and trait anxiety, psychopathology, hysterical tendencies, danger seeking and adaptation.
4. A positive relationship between absorption and fantasy proneness has been found, similar to those who experience OBEs.

Consciousness after Death?

The research and debate over whether NDEs are evidence of life after death is currently inconclusive. Too many variables have yet to be controlled, and it is very difficult to conduct ethical studies that revolve around a participant dying.

Paranormal Perception

The concept of NDEs representing consciousness after death, or as proof of survival, is very limited, and suffers from several confounds. Several individual accounts of people reporting information after an NDE that may have been obtained during the NDE (i.e., paranormal perception) have been reported. However, these accounts are not airtight, and some conflicting information remains. The AWARE study by Parnia in 2014 looked at 140 participants who had an NDE, yet for this research, none of the participants were able to identify specific targets, pictures, or symbols after the NDE took place.

The Neurobiological Approach

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Several scientific problems exist in effectively or conclusively explaining the NDE experience. Namely:

1. Clinical death is very hard to prove with regular hospital equipment during a resuscitation. Whereas the heart may stop beating, neurological activity in the brain has not necessarily ceased. Even the use of electroencephalograms (EEG) do not measure brain activity deep in the brain. Thus, being brain dead by EEG standards does not necessarily prove clinical brain death. Case in point, in a study by Borjigin et al., (2013), where rats were implanted with electrodes that measure deep brain activity, approximately 20 seconds of intense cognitive activity was recorded after the EEG had registered the brain as clinically dead. This burst of cognitive activity (which was above the activity produced by waking consciousness) occurred



right before actual clinical brain death.

2. Data collections for NDEs occur after the patient is conscious, leading to potential contamination of both the report and information they may have obtained while conscious, causing them to believe that they obtained the information while having an NDE.

In essence, brain-monitoring technology and the sheer difficulty of ethically studying death have created a lack of scientific information about NDEs origin as paranormal or as brain generated. Although valiant efforts have been made (e.g., the AWARE study), there is a considerable need for further research in this area. However, as it stands, data cannot conclusively support either explanation (paranormal or neurobiological) for near-death experiences.

General References:

Watt (2016)

Irwin & Watt (2007)