

PILOT STUDY PROPOSAL: SPECT SCANS OF VIEWERS WHILE ACTIVELY REMOTE VIEWING

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Objective: We propose to perform SPECT scans on three remote viewers while they are actively viewing a remote target. Each viewer would serve as his or her own control. Additionally, each viewer would also be scanned while resting and while performing a concentration task.

Significance: Controlled remote viewing is the perception of persons, places and events without input from the ordinary senses or rearrangement of memories. The term “controlled” indicates that this is a process with an orderly protocol making it amenable to scientific investigation. It is a type of non-local perception.

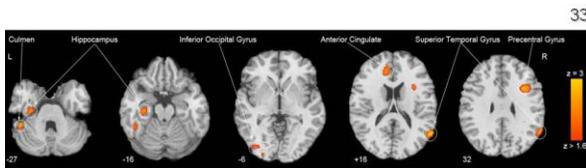
- Non-local perceptions are the vividly real perceptions of other places and realities, such as mystical experiences, angel encounters, past life perceptions and interactions of a transcendent nature with a “god” or “the Universe.” Near death experiences are the best studied non-local perceptions(1,2). They are the spiritual events that occur to persons at the point of death. They are presently well established in the medical and scientific literature. Bruce Greyson MD, Professor Emeritus of Psychiatry at the University of Virginia has stated that a “head on collision with our current (materialistic) neuro-scientific paradigm and the evidence of near death experiences is inescapable” (3).
- Controlled remote viewing is the one non-local perception that can be readily objectively validated, as the “target” exists somewhere on this Earth. After the viewing, it can be easily established if the viewers’ perceptions are accurate. It is an assumption, but a scientifically reasonable one, that if the brain processes that underlie controlled remote viewing can be identified, they would be similar to the brain processes of other non-local perceptions.
- In fact, studying controlled remote viewing with SPECT scans may well document that human beings have a “god spot” which permits them to access an all informational timeless space-less domain. Theoretical physicists have had a mathematical model of such a domain for over 75 years as the core basis of reality (quantum physics).

Background: We are not aware of any previous neuro-imaging studies of controlled remote viewing.

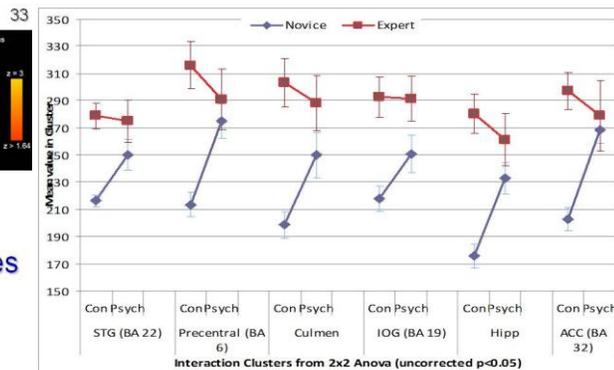
- Remote viewing has been scientifically validated for over 30 years with an extensive scientific literature supporting it. Little research has been done on neurobiological mechanisms. It has been used operationally by the various United States Intelligence services continually since 1984. Governmental remote viewers have earned every non-combat Service Award from the U.S. Government including several from the U.S. Secret Service for intelligence contributions (4,5).
- There is over 100 years of research documenting that humans have a specific area in the brain, the right temporal lobe, hippocampus, and closely related structures linked to spiritual and mystical experiences. Wilder Penfield demonstrated that on direct stimulation of areas in the right temporal lobe, patients would exclaim “oh God, I am leaving my body” or “I’m half in and

half out” (6). Daniel Amen has extensive SPECT research documenting the neurobiological “hardware to the Soul” (7). Melvin Morse, a pioneer near death researcher (8) has similarly proposed that the right temporal lobe is our “god spot” permitting a greater communication with an informational reality (9).

- Recently, Newberg and Peres did SPECT scan studies on the non-local perceptions of mediums who also use automatic writing. Automatic writing is an important part of controlled remote viewing. He studied 10 mediums, using tests of writing complexity as a control. During the medium sessions, subjects had the perceptions of being out of their physical body and merging with a transcendent spiritual Universe (10).



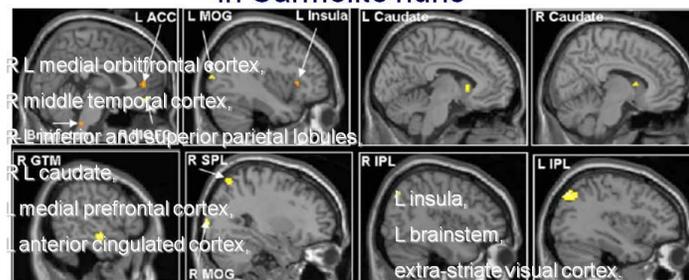
During psychography, the experienced mediums showed significant rCBF changes that are consistent with the notion of non-conscious writing and their claims of an “intangible source” planning the written content.



Rendering of results from 2x2 Repeated Measures Anova with SPM5 showing the main effect of group (experts vs novices) and condition (psych vs con). The results are at uncorrected $p < 0.05$ except the main effect of group which is uncorr at $p < 0.001$.

In addition, SPECT studies have been done on meditation in Carmelite Nuns.

Neural correlates of a mystical experience in Carmelite nuns



These results suggest that mystical experiences are mediated by **several brain regions and systems**.

Beauregard M, Paquette V. Neural correlates of a mystical experience in Carmelite nuns. *Neurosci Lett*. 2006;405(3):186-90.

- SPECT scans of controlled remote viewers could be compared to such prior studies. If similar, they would be of significance, as there is an objective correlation to the experience. In turn, this

could shed light on whether or not there is an objective reality to mediumistic and meditation experiences.

Hypothesis:

- Control group will show significantly elevated activity, specifically right temporal lobe activity in the CRV scan when compared to resting and concentration scans.
- Predictions:
 - IN ALL GROUPS SPECT scan imaging will show:
 - 1. Hyper-perfusion of the right temporal lobe during CRV
 - 2. Hyper-perfusion of the right side of Limbic Structure
 - 3. Hypo-perfusion of the left orbital prefrontal cortex
 - 4. Hypo-perfusion of the left Basal Ganglia
- Significance of study/Future Research:
 - Teaching this protocol to the general public will increase the potential for universal awareness and connection (part of the global coherence initiative).

Participants:

- Beginner – no known exposure to CRV.
- Intermediate – less than one year practicing various CRV techniques.
- Advanced – more than one year practicing and study CRV theory and applications.
 - All volunteer – no compensation – will receive a copy of their SPECT scan.
 - Study will select all same gender, ethnicity and close age range.
- Study conducted after Human Subjects Review Board concludes participants will not be harmed. Consent form will be obtained from each participant.

Method:

- Obtain SPECT scan images from three participants: A Resting Scan, a Concentration Scan (while performing the Conner's Continuous Performance Task – which is largely a more locally focused and left brain oriented) and a CRV Scan (while performing stage 5/6 of the CRV protocol – which is more universally focused and right brain oriented).
- Each SPECT scan will be conducted on a separate day.
- Each participant will have the same monitor, target number and target for the CRV scan.
- Study results of the of pilot study, will determine if additional participants will tested in order to generalize the findings to the population sample (the general public).
 - Confidence interval will be high.
 - Independent Variable = Levels of CRV experience.
 - Dependant Variables = Elevated Right Brain/Right Temporal Lobe Activity & decreased Left Prefrontal Cortex & Left Basal Ganglia activity.
 - Confounding variables will be identified.
 - Study will use a Rational scale of measurement, consistent with the standard scale of measurement used at the Amen Clinic Inc. for evaluating brain activity levels.
 - Study will use the 3x3x3 ANOVA statistics test to analyze the data.

- Study will use a 3x3 factorial design.

	Resting (R)	Concentration (C)	CRV Activity (CRV)
Control			
Novice CRV			
Expert CRV			

Study Procedures:

- Exact procedure is used for all groups
 - Participant fatigue will be controlled by using the same time of day for each scan.
- Supplementary Empirical Research
 - The God Spot – “Hardware of the Soul”.
 - CRV
 - SPECT Scanning
 - Conner’s Continuous Performance Task
- The brain SPECT studies will be performed in the following manner. The patient will be placed in a dimly lit, quiet room. Intravenous access will be obtained via small gauge butterfly. The patient will remain quiet for several minutes with their eyes open to allow their mental state to equilibrate to the environment. For the baseline resting study, 99m Tc hexamethylpropylene amine oxime, HMPAO (Ceretek), will be injected after the initial equilibration period. For the concentration study, after the initial equilibration period the patient started the Conner’s Continuous Performance Task, a 15-minute computerized test of attention. Three minutes into performing the task HMPAO will be injected. The patient then completes the task. For the CRV study, after the initial equilibration period the patient will start the CRV protocol, a 30-minute exercise of sensory attention. 10 minutes into performing the CRV protocol HMPAO will be injected. The patient will then complete the task. A tomographic brain study will be performed approximately 30 minutes later using a high resolution Picker Prism 3000 gamma camera with fan beam collimators. Data will be acquired in 128 X 128 matrices. One hundred twenty images

with 3 degrees separation spanning 360 degrees rotation will be obtained. The data will be prefiltered using a low pass filter with a high cutoff. Attenuation correction will be performed using a linear method. Coronal, sagittal and transaxial tomographs will be reconstructed with a slice thickness of approximately 9 mm. The transaxial tomographs will be parallel to the orbitalmeatal line. The tomographs will be displayed using a standardized linear color scale. The studies will be read by visual inspection in all three planes and in 3 dimensional surface brain maps (looking at the most active 45% of brain activity) and 3-dimensional active brain maps (comparing average activity with the most active 15% of brain activity). All of the brain areas listed in the attached table will be rated on a scale of 0 (normal activity) to 4 (+) increased or 4(-) decreased activity. Only abnormal areas are reported.

References:

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10. Peres, J, Newburg D: Presentation at US Medical Spiritist Conference George Washington University School of Medicine, July 11, 2011

Narrative Hypothesis:

- SPECT Scan imaging will illustrate hyper-perfusion (increased activity – blood flow) of the right temporal lobe (commonly known as the “God Spot”) while performing Controlled Remote Viewing (CRV). Secondary brain responses during CRV will include: hypo-perfusion (decreased activity – blood flow) of the prefrontal cortex (responsible for judgment, analysis of information & formal concrete operations), hyper-perfusion (increased activity – blood flow) of the Limbic Structure (regulation of mood and emotion) and hypo-perfusion (decreased activity – blood flow) of the Basal Ganglia (responsible for worry, concern and anxiousness). Additionally, this study will demonstrate that the control group performing the basic CRV protocol; will show elevated right brain and right temporal lobe activity in the CRV scan, compared to the resting and concentration scan. Teaching this protocol to the general public, will increase the potential for universal awareness and connection (a scientific approach to experiencing the nonlocal holographic self experience) and will augment the global coherence initiative.