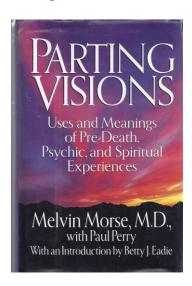
Parting Visions: Uses and Meaning of Pre-Death, Psychic and Spiritual Experiences

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### **CHAPTER ONE**

In this light my spirit suddenly saw through all it knew God, who he is, and how he is and what his will is.

#### Jackob Boehme

"You have got to tell all the old people so that they won' be afraid to die!"
I nearly choked with emotions as the little boy before me spoke these words. I remembered when I first saw him. His name was Chris. It had been four years earlier when his limp body was brought to the hospital by helicopter. He had nearly drowned after his father lost control of the sedan he was driving and plunged over a bridge and into the freezing waters of a river near Seattle. His brother and mother were in the car too. All were dazed by the impact and stunned by the horror of sinking in the dark waters.

The impact had knocked the father unconscious. The mother was left to find a way out of the rapidly filling automobile. She unfastened her seatbelt and kicked at the passenger window. Nothing happened. Then, as she told me later, "I felt an indescribable sensation go through my body, and as this happened, I was given the physical strength to kick out the window." She did this despite three compression fractures sustained during impact.

Chris's mom, Patti, swam out through the passenger window, got to the surface, and grabbed the ski rack that was attached to the top of their car. Somehow, Chris's six-year-old brother, Johnny was almost out of reach before Patti was able to grab him and push him to the top of their car, which was about a foot underwater. The father and little Chris remained trapped inside. For a terrifying moment Chris struggled as the water enveloped him. Then he lost consciousness and "went to heaven." He was submerged in the icy water for almost fifteen minutes. As we spoke in the living room of his house, he told me again in his childlike way what that voyage was like.

"When I died, I went into a huge noodle," said Chris, who was four years old when the accident happened. "It wasn't like a spiral noodle, but it was very straight, like a tunnel. When I told my mom about nearly dying, I told her it was a noodle, but now I am thinking that it must have been a tunnel, because it had a rainbow in it, and I don't think a noodle has a rainbow.



"I was being pushed along by a wind, and I could kind of float. I saw two small tunnels in front of me. One of them was animal heaven and the other one was the human heaven. First I went into the animal heaven. There were lots of flowers and there was a bee. The bee was talking to me and we were both smelling flowers. The bee was very nice and brought me bread and honey because I was really hungry.

"Then I went to human heaven. I saw my grandmother [who had died years earlier]. Then I saw heaven. Human heaven was beautiful. It was like a castle, but not one of those grungy old places. This was not a golden castle, it was just a regular old castle. As I looked at heaven, I heard music. The music was very loud and it stuck in my head. I started looking around at it, and then all of a sudden I was in the hospital. Just like that I woke up, and there were nurses standing around me. It was just that easy."

I laughed when he got to the "easy" part. As I reviewed his case history, I could see that keeping him alive wasn't easy at all. He had been underwater over ten minutes until Dennis Johnson, a carpenter who had witnessed the accident, dove repeatedly to the sunken car and pulled the young boy from the backseat. He then towed Chris to shore and revived him with mouth-to-mouth resuscitation. "I know he was dead when I reached shore," said Johnson. "He wasn't breathing, but I had to try to bring him back to life anyway." This selfless act of heroism won

Johnson a Carnegie Medal for Heroism and a Washington State Patrol Award of Merit, an honor usually reserved for state troopers. Chris was then airlifted to the nearest hospital, where further heroics were required to keep him alive.

Chris's father was the last one to be pulled from the car. He was airlifted to Harborview Hospital, where extensive efforts were made to resuscitate him. He died despite the efforts.

Now, four years later, Chris was sitting in the living room of his home casually playing what sounded like avant-garde jazz on a portable keyboard. His mother said he had shown little interest in music before the accident, but afterward she had to buy him a keyboard so that he could play the hauntingly beautiful tune he had heard while traveling through the "huge noodle."

I had been invited to hear Chris's story. An acquaintance of Chris's mom was familiar with my work in near-death studies and thought that I would be interested in talking to her son about his experience at the threshold of death. Even though I have heard hundreds of children describe their near-death experiences, chills ran up my spine as I listened to Chris play the music of his experience. I taped the piece that Chris played and later had a professor of music listen to it. He said it sounded like an advanced piece of jazz being played by a child who had not yet developed the hand-eye coordination necessary to read music and play it. It sounded nothing like the kind of music I would associate with church or death.

I was deeply absorbed in the spiritual concert that was taking place.

Suddenly Chris stopped.

"I have to ask you a question," he said with the sophistication of someone ten years older. "How do I know that what happened was real? How do I know that I really went to heaven? How do I know that I wasn't just making it all up?"

# REAL, NOT FANTASY

I had focused on that very question myself for ten years. From the day that I heard my first near-death experience and a little girl patted me on the hand and confidently told me, "You'll see, Dr. Morse, heaven is fun," I have sought to answer the very question that Chris was asking me.

I looked around the living room as everyone waited patiently for my response. Even with the years of research I have done on this topic, this is a difficult question for me to answer. I cleared my throat and smiled nervously at Chris.

"Chris, what happened to you is as real as it gets."

# DIFFERENT EXPERIENCE, SAME QUESTION

"Dr. Morse, how do I know that what happened to me was real?"

This time the question didn't come from Chris but from his mother, Patti. She had asked me to come into the kitchen so that she could tell me in private what happened to her on that horrible night.

She began by saying that neither she nor her husband were religious people. They did not attend church, never prayed, and in fact did not believe in God. "My husband was a physicist and I was just a carefree ski instructor," she said. "We had a strong sense of family values, and were deeply in love, but never discussed spiritual matters."

On the night of this accident they were returning from the mountains, where Patti had been giving ski lessons to the children of a Seattle Seahawks football player. Her husband was driving too fast for the road conditions. Patti was telling him to slow down when he lost control and skidded off the bridge.

"After we hit the bottom of the river, I knew we had to get out. I unfastened my safety belt and kicked at the passenger window.

"After I broke the passenger window with my feet, I came to the surface of the water, gasping for air, and grabbed the ski rack. Out of the corner of my eye, I saw my six-year-old son, Johnny, floating down the river. I was barely able to reach him. I realized he wasn't breathing so shook him with my free hand. Once I knew he was breathing again, I pushed him to the top of our car, and pulled myself up after him. I could feel the strong current of the river so I braced myself against the ski rack to keep us on the roof of the car, while holding Johnny's head out of the water, so that he could breathe.

"I started screaming for help, louder than I have ever screamed in my life. After several very long minutes, I saw the beam of a tiny flashlight, coming from downstream. Shortly thereafter, a man appeared, jumped in the water, and swam out to us. I started screaming about my baby being trapped in the car, and the man dove underwater several times, before coming to the surface with Chris."

Patti paused for a moment and then told me something she had not mentioned to any of the reporters who had interviewed her: "When I reached the surface of the water, I sensed that my husband was sitting on the rocks, watching the rescue below. It was eleven at night, pitch-dark and freezing cold, but there he was, sitting on the rocks." Her husband seemed perfectly content to sit passively while others dove to save his son and himself. Patti became furious with her husband. "I was as angry as I have ever been with him," she said. "I began to scream at him, and when I did that, he disappeared."

Intellectually Patti felt that her husband was not on that rock. She knew that he was underwater, where rescuers were desperately trying to save him. Still the sensation was so intense that she will swear to this day that her husband had been sitting right there, watching the proceedings.

Soon after the accident, other visions began taking place. The first of these consisted of a number of intimate encounters with her deceased husband, when Patti was sleeping. However, she distinguished the things she experienced during these vivid encounters as different from her

normal dream state." It happened as I was waking up, but it was not a dream," she said. "it was too real to be a dream! I didn't want it to happen. It just happened."

In addition to this, Patti also claimed to have actually seen her deceased husband, at least two other times. On one of these occasions, she was wide awake, and sitting in her living room. She looked up and there he was, sitting on the couch. "He looked very normal. He was not transparent and he was wearing regular clothing."

At first she denied that these visions were anything but "a crazy widow thing." Then, about three weeks after the accident, Chris told her and his grandma about his experience of going to see his dead grandmother through the "huge noodle" and hearing the heavenly music. The listened in mute amazement as he told what had happened when he almost drowned. The effect on Patti was immediate.

"Suddenly it all came together for me," she said. "Before hearing his story I could only sleep for a few minutes without waking up in fear and terror. After hearing Chris's story I slept six hours and awoke fully rested."

"Why?" I asked.

"Because of Chris's experience I believe that my husband was letting me know that he was okay," she said. "Not that he was going to live, but that it was okay that he had died."

Was Patti's visionary experience "real"? She didn't wait for me to answer that question. Her son's near-death experience answered that question for her. When Chris told his mother about his experience, she accepted the visions of her husband as real events, not made-up dreams. In short, Chris's experience validated her own. She now believes in God and an afterlife, just as she accepts her husband's message to her that "everything is going to be all right," vague and nonspecific though that message might seem to an outside observer.

"My experience was as real as the one Chris had," said Patti. "And they have both given us such peace. How could I ever deny that they are real?" Although she remains both confused and comforted by the various encounters involving her deceased husband, she has now grieved in a healthy manner. She feels strongly that her husband was telling her to live and love life rather than to dwell on the reasons for his premature death.

"We lost a lot in that accident," said Patti. "But the visions gave us depth, meaning, and the strength to carry on."

### LIFE-CHANGING VISIONS

Patti's experience was similar to dozens of cases I have heard over the years. As I searched for near-death experiences to study, I would be approached by people who had had visions like Patti's, experiences that rocked them to their spiritual core and changed the very foundation of their life.

Since I was interested in visionary encounters, I would always listen to their stories and record them for further use, but I saw little connection between these visions and the field in which I was most interested at the time - the near-death experiences of little children.

Still these visions were interesting, productive, and sometimes quite intense. For example I was invited to speak about near-death experiences to a national meeting of critical-care nurses. Nurses are the perfect audience for this topic since they are far closer to patients than most doctors and therefore are more likely to talk about spiritual matters. Because of their proximity to patients, I wanted to make sure these nurses knew that visions are a normal part of the dying process and should be cherished, not feared. It was simple message that sprang easily from the research I had done with children over the previous ten years.

After the talk one of the nurses was quite agitated. As I stood in the lobby talking to other nurses, I could see this woman bearing down on me through the crowd. She had an intensity in her eyes that made me think of an angry mother about to collar her badly behaved son. She came straight across the room, weaving around some of her fellow nurses and pushing others aside without uttering so much as "excuse me." She was heading for me, there was no doubt about that. I could feel my pulse rate climbing and my palms beginning to perspire. I knew that I had some explaining to do, I just didn't know about what.

"I read all of your papers in the medical journals," she stated. "How do you know these kids aren't just having a reaction to morphine or Valium?"

I calmly explained that I had researched patients who had been given large amounts of morphine and found that none of them had anything resembling a near-death experience.

"Okay, then, how do you know these kids just didn't invent the experience?" she demanded. "You know, critical-care patients sometimes tell amazing stories about monsters chasing them with needles. Maybe they are just making the whole thing up so that they can be on a talk show with the famous Dr. Morse."

The only thing that kept me from becoming angry at this point was the hurt that I saw in this woman's eyes. Although she seemed extremely angry, she was actually on the verge of tears as she spoke.

"The stories they tell aren't monster stories," I said. "They are amazingly consistent experiences that involve similar elements. And beside, I talked to most of these kids before I was the Dr. Morse of talk-show fame."

By this point in our conversation the nurse was shaking, and I could tell that something was genuinely bothering her. I led her to a bench and sat down with her. "What's wrong?" I asked. "Why is this so important to you?"

Tears sprang to her eyes as she told her story. When her daughter was fourteen, she came down with leukemia. The two vowed to fight this horrible illness with all the heart they could muster. During the next two years the girl was in the hospital for more than twenty weeks. "While other

kids her age were worrying about dressing for the prom or how they looked in jeans, my daughter was wearing a wig and throwing up all day," said the nurse.

After her third relapse the oncologist took the mother aside and told her that her daughter was not going to live longer than a few more weeks.

"I wanted to have as much quality of time with her as I could," the nurse told me. "In my heart I knew it was hopeless. The best gift I could give her would be to let her die in peace."

Unfortunately that didn't happen. As the daughter began to die, a team of doctors with life-support equipment began gathering in the room. The mother knew that any kind of life support was futile, as were any attempts at resuscitation. As a critical-care nurse she knew that her daughter was dying. Yet as a mother she found it impossible to tell the doctors to let the little girl die.

For several hours the doctors put lines into her arteries and tubes into her nose. When her heart stopped, they put paddles on her chest and shocked it back to life. When the mother gasped at what they were doing to her daughter, one of the assisting nurses escorted her into the hall and told her to wait there. "Finally, when it was all over, they let me come back into the room," she said. "The entire resuscitation team streamed out with their heads hanging down because they had failed to keep her alive. They closed the door behind them, and I was left alone in the room with my daughter's body."

The mother sat there for quite some time in silence with her daughter's body. Then something shocking happened. The daughter sat up and looked her mother right in the eye? "She was alive, I know she was," said the mother. "She squeezed my hand and said, 'Don't worry, Mom, I'll be okay now.""

She apologized to me for coming on so strong, but for the ten months since her daughter died, the nurse had dismissed this final visitation as being some sort of grief-induced hallucination.

I wasn't out of my mind with grief," she told me. "I know what I saw as a nurse. But hearing your lecture, I realized my daughter could have come back for just a few seconds to give me that message. After hearing about near-death experiences I will never think about her death in the same way again."

# INTRIGUING ENCOUNTERS

When I first heard this story I was skeptical. But intriguing stories like these kept popping up with great regularity. Sometimes the visions happened during periods of serious physical crisis, whereas at other times they happened during periods of personal crisis.

One such event happened to a doctor in San Francisco. She worked in the emergency room of a hospital on the bad side of the city. On a day-to-day basis she dealt with the worst society has to offer, from drug addicts with blood infections to children being beaten by their parents. Her life

was so steeped in misery that she fell into a deep state of spiritual crisis in which she found herself unable to believe in God.

This loss of belief was very much on her mind on this particular day when she went hiking in the Sierras. The beauty of nature was so overwhelming that she felt as though she had to pray for the return of her faith. As she came upon a clearing, she fell to her knees and prayed from her heart. "Let me know that you exist. I must have a sign, or I will go crazy, I will lose my reason to live."

At that point another person rounded a bend in the trail and approached her. This was no ordinary hiker, this was a woman dressed entirely in white. She stopped in front of my friend and spoke her name. "Go with God," she said, and then went on her way.

My friend's reaction was certainly different from what mine would have been. My belief in God would have been firmly reinstated. Unfortunately for my friend her reaction was one of disbelief. She received no comfort at all from her vision and is still seeking answers to her spiritual questions. When she came to me with her story, her question was similar to the one Chris asked me: "Do you think that was really an angel, or do you think I just imagine the entire episode?"

I understand her feelings. After all, she lives in a society that would probably treat Jesus Christ, Martin Luther, and Muhammad with mind-numbing psychiatric drugs. Because of her medical training she could not trust a vision that affirmed the existence of a God who can communicate with us.

As I began to study the scientific literature on the subject of visions, I found it puzzling that we do not immediately accept and understand the significance of these events. I have found that death-related visions, for instance, are the most common paranormal events in our lives. So common are these visions that more than 10 percent of the population has had such a vision. The majority of parents whose children have died have visions of that child within a year of the death. These visions often bring about a lessening of grief for the parent. Despite the frequency of such visions most psychologists and grief counselors consider these experiences to be meaningless hallucinations. Many even go so far as to tell their patients that their visions mean nothing.

I think much of this is due to the language used to describe death-related visions. There are simply no adequate words in medical use to put a positive light on visionary experiences. As a result their power and meaning to people are misidentified.

The way in which this happens is illustrated quite well in the work of W. Dewi Rees, a physician who practiced in Wales in the 1950s. In 1971, he published research in the British Medical Journal dealing with visionary encounters of widow and widowers in a specific area of Wales. He reported that not only did the great majority of this study population have post-death contact with their dead spouses but some of these contacts extended over a period of twenty years. In addition young widowed people had visionary contact with the dead nearly as often as old people.

He concluded that the experiences were more common in people whose marriages were happy and in marriages with children. Rather than being disturbed by these encounters with the dead, the subjects were quite happy to have the company of their dead spouse. He even went on to point out that those who have such experiences are less likely to die in the year after the spouse's death than those who do not have them.

Even though Dr. Rees attributed obvious benefit to these visitations, he repeatedly described them as "hallucinations," a psychiatric term that implies pathology. It is precisely because we in medicine cannot help thinking of these events as hallucinations - abnormal functions of the mind - that many people consider themselves mentally ill for having visions. We don't even have words other than hallucination in the language of medicine to describe these experiences. That is why Chris's mother first referred to her experience as a "crazy widow thing."

Indeed most of us think of visions as "crazy widow things," fantasies of the mind brought about by derangements of brain chemistry. This belief persists despite the fact that every systematic study on death-related visions shows that they occur primarily in times of good physical and mental health and are rarely associated with fevers, medications, or dementia. Still the theory persists among scientists that these visions are simply the projections of a disordered mind.

# AN EARLY CASE STUDY

Although deathbed visions can be found in the literature and lore of all ages, they were rarely mentioned in the scientific literature until the late 1920s, when they were studied by Sir William Barrett, a physics professor at the Royal College of Science, in Dublin.

He would never have considered examining such a topic had it not been for an experience told to him by his wife, an obstetrical surgeon. On the night of January 12, 1924, she arrived home from the hospital eager to tell her husband about a case she had had that day.

She had been called into the operating room to deliver the child of a woman named Doris (her last name was withheld from the written account). Although the child was born healthy, Doris was dying from a hemorrhage. As the doctors waited helplessly next to the dying woman, she began to see things. As Lady Barrett tells it,

Suddenly she looked eagerly towards part of the room, a radiant smile illuminating her whole countenance. "Oh lovely, lovely," she said. I asked, "What is lovely? "What I see," she replied in low, intense tones. "What do you see?" "Lovely brightness - wonderful beings." It is difficult to describe the sense of reality conveyed by her intense absorption in the vision. Then - seeming to focus her attention more intently on one place for a moment - she exclaimed, almost with a kind of joyous cry, "Why, it's Father! Oh, he's so glad I'm coming; he is so glad. It would be perfect if only W. [her husband] would come too."

Her baby was brought for her to see. She looked at it with interest and then said, "Do you think I ought to stay for baby's sake?" Then, turning toward the vision again, she said, "I can't - I can't stay; if you could see what I do, you would know I can't stay."

Although the story thus far was compelling, skeptics could still argue that it was nothing more than a hallucination due to lack of blood or triggered by fear of death. Indeed Sir William Barrett may have made that very point to his wife. Then he heard the rest of the story. It seems that the sister of Doris, Vida, had died only three weeks earlier. Since Doris was in such delicate condition, the death of her beloved sister was kept a secret from her. That is why the final part of her deathbed vision was so amazing to Barrett.

She spoke to her father, saying, "I am coming," turning at the same time to look at me, saying, "Oh, he is so near." On looking at the same place again, she said with a rather puzzled expression, "He has Vida with him," turning again to me saying, "Vida is with him." Then she said, "You do want me, Dad; I am coming."

This story was so inspirational to Barrett that he undertook a systematic study of deathbed visions. His was the first scientific study to conclude that the mind of the dying patient is often clear and rational. He also reported a number of cases in which medical personnel or relatives present shared the dying patient's vision.

The work of Sir William Barrett did not contribute to the theory that these visions were a form of wish fulfillment. In fact the deathbed vision often did not portray the type of afterlife the dying expected. For example Barrett reported several children who were disappointed to see angels with no wings. In one such case he described a dying girl who sat up suddenly in her bed and said, "Angels, I see angels." Then the girl was puzzled. "Why aren't they wearing wings?" If deathbed visions were simply a fantasy of the mind, says Barrett, why did this little girl see something different from her expectations?

### JESUS WITH A HAT

I have documented similar cases that make the same point about wish fulfillment. In one such case a little girl who'd had a near-death experience said she say Jesus. When I asked her what he looked like, she drew a picture of a man sitting on a log and wearing a red hat. He looked more like Santa Claus than Jesus. Yet hanging in her room was the classic picture of Jesus with long blond hair, a white robe, and Anglo-Saxon features. Had her vision been one of wish fulfillment, my guess is that she would have seen the version of Jesus that hangs over her bed.

### ANGELS OF LIGHT

In my own research I found angels to be an integral part of visions of all kinds. At least 50 percent of the children in my studies see "guardian angels" as part of their near-death experience. I have also found that guardian angels lend their help at other times of crisis, when a person needs answers to bolster his or her flagging spirit. Such experiences have been described by saints and religious leaders throughout history. In the Islamic religion, for instance, the Prophet Muhammad tells of being visited by three angels, who cleanse him. An angel spared Abraham's son from sacrifice, and one also spared Daniel from the lion's den. Saint Paul the Apostle spoke frequently in the Bible of coming in contact with angels. He also witnessed angels interacting with others. In one instance he claimed to have observed the souls of dead men being accompanied by angels, who protected them on their rise to heaven.

A Time magazine poll showed that 69 percent of Americans believe in the existence of angels. I have found many people who will readily admit that visionary experiences involving angels have made the world comprehensible to them and have given them the spiritual strength to press on.

One such account comes from a woman whose daughter was ill with leukemia. The girl was lucid when she became excited and began pointing to the end of her bed. The mother reported:

I asked her what she saw, and she said that there was boy at the end of the bed. She was not frightened by this boy. She was really quite glad to see him. Over the next couple of days she carried on conversations with him and was glad to have him there. With everything that was going on, it was almost as though this little boy that only she could see was stability for her. I think he was an angel.

In another instance a twelve-year girl tried to commit suicide by shooting herself in the face with a shotgun. She was nearly successful and was since operated on several times to reverse the damage done by the blast.

She reported that as she lay in her bedroom dying, a "seven-foot man" came in and told her that she would be all right. She could tell "by the way he held himself" that she had done something wrong in attempting suicide. "But he stayed with me all day until I got out of the first surgery," she said. "I haven't seen him since then, but I know he is still around me all the time."

Angels are reported under a variety of circumstances. Another account comes from Dr. Frank Oski, a professor of pediatrics under whom I trained at John Hopkins University. Oski is not a new-age guru. Rather he is a demanding pediatrician with an encyclopedic knowledge of medicine who insisted that his students come to the hospital having read the latest medical-journal articles. Yet to my great surprise Dr. Oski has been touched by the same mystical light described by people down through the ages who have had visions, including near-death experiences.

As a medical student Oski was enthusiastic about the potential of modern medicine, but frustrated by the fact that children die of congenital defects that are beyond anyone's control. One night he went to bed pondering the fate of a dying patient. Although he was doing his best, the child was not improving. He felt powerless to help and went to sleep wondering why this child had to die.

About an hour after falling asleep Oski was awakened by a bright light, one that shone in his room like a private sun. Oski could make out the form of a woman in the glow of the intense light. She had wings on her back and was approximately twenty years old.

In a quiet and reassuring voice the woman explained to the speechless Oski why it was that children had to die.

"The angel (I don't know what else to call her) said that life is an endless cycle of improvements and that humans are not perfect yet. She said that most people have this secret revealed to them when they die, but that handicapped children often know this and endure their problems without

complaining because they know that their burdens will pass. Some of these children, she said, have even been given the challenge of teaching the rest of us how to love.

"'It stretches our own humanity to love a child who is less than perfect,' said the angel. 'And that is an important lesson for us."'

Oski has been courageous enough to talk freely about his experience. He has even written about it for a major pediatric journal. In that article he wrote, "I will make no attempt to convince you as to the reality of my story. But I would merely ask that you keep an open mind on the mysteries of life which occur to you on a daily basis."

# SHARED VISIONS

Although they seem vividly real, visions like Oski's could be dismissed as being just vivid dreams and nothing more. I might be inclined to dismiss some of these experiences as dreams, too, if it were not for the similarity of these experiences to visions that happen to people who are clearly awake.

The reality of these visions becomes more convincing when they happen to a number of people at the same time.

I call these shared visions. I have heard a number of these and verified most of them. Perhaps the most amazing of these visions is the case of Olga Gearhardt, of San Diego, California.

Olga is the matriarch of a large and tight-knit family that includes four children, several grandchildren, and a number of relatives in California, Arizona, and New Mexico. In 1988 a virus attacked Olga's heart and destroyed much of the muscle. Her heart became so weak that it could no longer beat effectively. The only chance she had for survival was a heart transplant.

Olga was put on the transplant-recipient list at the University of California Medical Center. People who are on this list must be in constant contact with the hospital where the transplant will be done. If a heart becomes available that matches their blood type, it must be implanted within hours of the donor's death for the transplant to be effective. Olgas' entire family was notified of this fact, and they all promised to lend moral support by being there at the hospital during her surgery. Early in 1989 Olga received the call from the hospital that a matching heart had been found. As she and her husband left for the hospital, her children started a telephone chain that notified family members in three states that the transplant was about to begin. In a matter of hours the waiting room of the hospital was overloaded with Olga's family. The only member of the family not at the hospital was Olga's son-in-law. Although he loved his mother-in-law, he had a phobia about hospitals and preferred to await the news at home.

Late that evening her chest was opened and the transplant was performed successfully. At two-fifteen A.M. she developed unexpected complications, and the new heart would not beat properly. As the medical personnel became alarmed, the heart suddenly stopped beating altogether. It took several hours of resuscitation before the heart finally began functioning properly. Meanwhile the family in the waiting room was told nothing about these complications,

and most of them were asleep. About six in the morning the family was told that the operation was a success but that she had almost died when the new heart failed.

Olga's daughter immediately called her husband to tell him the good news. "I know she's okay," he said. "She already told me herself."

He had awakened at two-fifteen to see his mother-in-law standing at the foot of his bed. It was as though she was standing right there, he said. Thinking she had not had surgery and had somehow come to his house instead, he sat up and asked her how she was.

I am fine, I'm going to be all right," she said. "there is nothing for any of you to worry about." Then she disappeared.

The vision didn't frighten the son-in-law, but he did get out of bed and write down the time she appeared to him and exactly what was said.

When the family went in to see her, Olga began talking about the "the strange dream" that took place during surgery. She said she had left her body and watched the doctors work on her for a few minutes. Then she went into the waiting room, where she saw her family. Frustrated by her inability to communicate with them, she decided to travel to her daughter's home, about thirty miles away, and connect with her son-in-law.

She told them that she was sure she had stood at the foot of her son-in-law's bed and told him that everything was going to be all right.

There is no way to dismiss this story as a hallucination or as a phenomenon of a chemically imbalanced brain. One could accuse Olga and her family of fraud, but my co-author and I have devoted considerable time to investigating this story, interviewing several members of the family. We have found no discrepancies in any of their stories and no motive to invent such a story.

The only explanation is this: During the time this woman was on a heart-lung machine because her new heart was not functioning properly, she was able to leave her body and communicate with her son-in-law, who was in bed more than thirty miles away.

A story similar to Olga's is documented by a doctor at the Enarby Vancouver General Hospital, in Vancouver, British Columbia.

He tells of two young cancer patients who had spent time together in the hospital's oncology ward. The two girls - Sandra and Chrissy - were together for several weeks as the doctors tried chemotherapy treatments to stop the cancers that plagued them. Finally Sandra was sent home to die, hundreds of miles away from Chrissy. The children had no contact with each other, nor did the families.

Months later Sandra became so ill that she sank into a deep coma. After a few hours she regained consciousness with a relieved look on her face. "Mommy, I went to heaven, and Chrissy came to

help me," she said. "She told me I shouldn't be afraid because she was there to help me in heaven." After this vision Sandra had no fear of her impending death. She described heaven as a place of beautiful white light and said that she would be glad to have a fried like Chrissy there with her.

It wasn't until days after Sandra had died that her mother and father discovered that Chrissy had died several weeks before their daughter. For the parents of both children Sandra's deathbed vision was a relief. They now felt that the two girls were together in heaven.

We tend all too often to trivialize these experiences by calling them dreams and fantasies caused by some kind of mental derangement. I frequently receive phone calls at home from my fellow physicians who encounter these experiences and are puzzled by them. Sometimes they are experiences that have happened to patients, and other times they are deeply personal.

One physician told me a sad story in which she felt her spirit being drawn together with that of her dying son. She said they entered a heavenly place together and then she let the boy go. Now she draws tremendous comfort from this experience and feels that she has firsthand knowledge that her son is in a "heavenly world." Nevertheless she has been reluctant to go public with her story. As she put it, "Mel, when they start burning witches again, I want them to come for you first." By this she meant that we often have irrational fear and prejudice of anything that is of a spiritual nature. Challenging such fears can be damaging to one's career. Yet for me the very reason I became a physician seemed to be at stake. My role as a physician is to understand the complete human being, and frankly there is no deeper expression of humanity than spiritual experience.

With my interest in the visionary experience piqued, I realized that my responsibility was to examine visionary experiences scientifically in order to help forge a new understanding of the divine.

I began by examining dozens of cases my research team had collected. We looked at a wide variety of visionary experiences, from near-death experiences and deathbed visions to vivid dreams and spontaneous experiences of mystical light. It soon became clear to me that the near-death experience that happened to Chris when he almost drowned was very similar to the visionary experience of Dr. Oski.

If we could show that there is a common thread that runs throughout all these visions, I thought, then we would be able to shine light on the source of mysticism, one of mankind's greatest mysteries.

END OF CHAPTER ONE

**Parting Visions** 

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