LETTERS

Are Out-of-Body Experiences Evidence for Survival?

To the Editor:

As one who is also dissatisfied with the present poor state of the evidence that persons having an out-of-body experience (OBE) or near-death experience (NDE) sometimes show evidence of extrasensory perception, I am glad that Susan Blackmore has raised and discussed this failing in her recent paper in *Anabiosis* (1983). I would like to point out, however, two places in her paper where I believe she may have made a too hasty dismissal of what little evidence we do have.

In her discussion of the Wilmot case, Dr. Blackmore claimed that "we are told all three sides of the coincidence [of Mr. Wilmot's dream, Mr. Tait's apparitional experience, and Mrs. Wilmot's apparent OBE] by none other than Mr. Wilmot himself" (p. 143). This assertion seems to me inaccurate. First of all, in the original report of the case (Sidgwick, 1891), Eleanor Sidgwick published a letter from Mr. Wilmot's sister, testifying that Mr. Tait had mentioned his vision to her the following morning (p. 44). Miss Wilmot further wrote that she had soon afterward spoken to Mr. Wilmot, who then also mentioned his vision to her the following morning (p. 44). Miss Wilmot further wrote that she had soon afterward spoken to Mr. Wilmot, who then also mentioned Mr. Tait's vision to her; she is less sure about whether Mr. Wilmot mentioned his dream to her, although she thought he did. Secondly, it seems to me that Dr. Blackmore is unjustified in stating categorically that "Mrs. Wilmot never reported having had an OBE at all" (p. 144). Mrs. Wilmot (who also provided a letter of testimony, which is now on file at the Society for Psychical Research in London) did not explicitly describe her experience in her letter, although the implication was that she had seen and concurred with her husband's report. Nevertheless, she did state that she "had a very vivid sense all the [next] day of having visited my husband," and she corroborated that (however she did that) she seemed to see the man in the berth above her husband's "as he leaned over, looking at us" (Sidgwick, 1891, p. 44). This case may be the result of faulty testimony or memory, but it is apparently not the result of lack of corroborating testimony.

Dr. Blackmore also criticized the evidence obtained by Michael Sabom that cardiac patients reporting an OBE during an NDE have shown knowledge of events going on while they were ostensibly unconscious. Dr. Sabom questioned 25 "control" cardiac patients and found that their description of resuscitation efforts contained serious errors, unlike those of the NDErs who had reported OBEs. Dr. Blackmore made the good point that the control patients may not have had the auditory or other information available to the NDErs: those who have actually experienced cardiopulmonary resuscitation (CPR), although unconscious, have normal access to information unavailable to persons, even "seasoned cardiac patients" (Sabom, 1982, p. 84), who have not. Nevertheless, Dr. Blackmore seems to have ignored some important details. One patient accurately described the movement of needles on a defibrillator, information presumably not available by auditory or tactile means (Sabom, 1982, p. 101); another patient showed apparent confused left-right orientation in his description of certain procedures, a confusion that would seem unlikely unless the patient had viewed the procedures from a position opposite that of his body (pp. 109-110); and still another patient claimed to have seen, in a distant hospital corridor, three members of his family who had just arrived at the hospital to pay him an unexpected visit (pp. 111-13). A fourth patient, describing events occurring not during CPR but during heart surgery, gave accurate details about the appearance of his heart (pp. 65-66). All of the above examples may in fact have normal explanations, but Dr. Blackmore's brief dismissal of the evidence, solely on the basis of weaknesses in Dr. Sabom's comparison of NDErs with "control" patients, seems to me too superficial.

I thoroughly agree with Dr. Blackmore that we need to expand models for research on OBEs and NDEs beyond the rather simplistic astral projection theory, but I do not agree with the implication in her paper that possible theoretical models are limited to either the astral projection theory or a psychological theory. The OBE, like extrasensory perception and psychokinesis and all human behavior, undeniably follows or reflects certain psychological mechanisms; as she pointed out, that is indeed exciting and useful information to have. What the parapsychologist wants to know further is whether the OBE also exceeds certain psychological and sensory limits. Unless this hypothesis is also built into our models for research, our findings, however exciting, may be incomplete in important respects.

REFERENCES

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- Sabom, M. B. Recollections of Death. New York: Harper and Row, 1982.
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