

I orient myself through touching at distance: A case of a frequent out-of-body experienter

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This paper presents a case of anomalous perception, mainly in the form of out-of-body experiences (OBEs), of a healthy individual. The individual has been experiencing massive out-of-body experiences, spontaneously or at will, on a daily basis, since birth, which is more than 45 years.

The paper further presents some characteristics of phenomenology as well as semiology of OBEs of the above mentioned subject based on anecdotal as well as first hand evidence.

Keywords: *Out of body experience; near-death experience; altered consciousness; anomalous perception.*

Introduction

THE PAPER aims to describe individual OBEs and OBE-triggered anomalous perception of a white male who reports experiencing out-of-body-accounts in the waking/active state, under full consciousness, occurring both spontaneously and at will. The subject, who is a close family member, for the purpose of the paper, is called the experienter (EXP). He is a healthy individual whose anomalous perception is not linked to any pathological or neurological states such as epilepsy, other ictal states or any brain damage. EXP can be standing, sitting, walking, working at a computer, driving a vehicle, etc., while experiencing a clear sense of separation from the body, enhanced reality, or sensation of his self/consciousness travelling long distances away from his real physical body. There are not many scientific studies examining OBEs in the healthy population. This decreases the possibility of examining the nature of spontaneous OBEs. I have been observing and studying EXP's anomalous perception in the form of different exceptional experiences for over 29 years. Thus, the paper presents my own observations of different accounts of EXP anomalous experiences, triggered mainly by his OBEs. I have been

documenting the accounts in my diary for the past 25 years. Part of the diary, pertaining to accounts of EXP's premonitions, has been notarised by a notary. It is further important to state that the paper presents observations which are subjective in their nature. It is also important to notice that the paper documents only OBEs that happened during conscious, waking, or active state, as opposed to OBEs occurring in deep sleep, under hypnosis or triggered by artificial agents such as drugs, meditation, virtual or psycho-nautic settings.

Introduction to OBEs

The available literature on out-of-body experiences uses many definitions to describe this phenomenon. Irwin described OBEs as a state of the experienter during which 'the centre of consciousness appears, to the experienter, to temporarily occupy a position which is spatially remote from his/her body' (Irwin, 1985). Blackmore (2002) suggested OBEs are an experience in which the experienter 'seems to perceive the world from a location outside his physical body'. A study conducted by Messier and Smith (2014) described the OBE as an experience which is based on both visual as well as somaesthetic

perception in which the physical body, seen from a third person description, is illusory. People experiencing OBEs report that the experience itself feels very real while it is happening (Blanke et al., 2006). The literature reporting on the phenomenon of OBEs agrees on a number of features which usually accompany the phenomenon.

The main features include the following elements: (a) sensory perception of floating (Monroe, 1971), (b) a profound feeling of being outside of the body (Messier & Smith, 2014), and (c) a subjective meaningfulness and enhanced reality (Anzellotti et al., 2011). As to the most probable cause behind OBE elicitation, the existing literature mainly implicates a disruption in the processing of multisensory integration (Blanke et al., 2004). Other studies describe OBEs as part of the so-called autoscopic phenomena. For example, Brugger and Regard (1997) proposed to classify autoscopic phenomena based on phenomenology. Their study suggested six different modes of autoscopic phenomena which include the sensed presence, heautoscopy proper, autoscopic hallucinations, the out-of-body experience, and two forms of autoscopic phenomena which the authors distinguished as inner and negative. Some researchers opined that in order to differentiate between different autoscopic phenomena it is important to investigate, during research, more specific questions pertaining to the autoscopic experiences such as the ability to see your own body, the differences in visuospatial perspective of seeing your own body, as well as the intensity of disembodiment, if any (Blanke & Mohr, 2005).

Introduction to EXP's accounts of anomalous perception

Based on the anecdotal accounts of EXP, he has been experiencing fully conscious, fully waking OBEs since the onset of his memory. 'I have had OBEs since I can remember. I remember leaving my body as a toddler. I remember being in my mother's uterus.' (Sellers, 2015). EXP further claims he went through the so-called conscious birth.

Based on my 25+ years of direct observa-

tion and studying of EXP's OBEs, I came to the conclusion that his OBEs trigger other extraordinary experiences in the form of anomalous perception. Thus, apart from OBEs, EXP experiences the following:

- subtle energies around individuals;
- clairvoyance;
- retrocognition, precognition;
- direct vibrational cognition in the form of a heightened and unusual sensory perception;
- telepathy in the form of animal communication, communication with the deceased, toddlers, newborns, as well as babies in prenatal stage;
- remote viewing;
- visionary experiences;
- mystical experiences (states of unitive consciousness);
- non-human intelligence (NHI) contact modalities (formerly known as alien contacts);
- retrieving information from walls, doors, wood and trees, pieces of furniture, stones, crystals, and plants (basically anything that is organic in nature);
- sense of presence, NDE like experiences, hearing sounds, time and space distortions, floating, aphasia, alexia and inefability, synesthesia;
- other anomalous sensory experiences such such as tactile, olfactory and gustatory.

The individual accounts of OBEs as experienced by EXP differ substantially from most OBE accounts presented in current literature. They differ mainly in the following features: the frequency of the OBEs occurrence; the amount of time spent in an out-of-body state, and the ability of the conscious self, after separation from the physical body, to view and inspect different situations, locations, settings and places independently of the physical body. The frequency of the OBEs occurrence as experienced by EXP is very high compared to OBE cases reported both in the healthy population as well as in pathological cases, which usually only

last for a short period of time. EXP reports OBE at least once a day for the duration of a couple of minutes to many hours of the standard physical time flow as experienced by a healthy physical body.

Interestingly, EXP's exceptional experiences do not include mediation-related experiences due to the fact that he never tried to meditate. He tries to keep himself grounded as much as possible due to the reason that his OBEs are mostly triggered spontaneously, they are massive, occurring every day and cannot be controlled. Moreover, EXP is able to experience different modes of anomalous perception overlapping and combining with each other. Thus, EXP may be experiencing different modalities of anomalous perception happening at the same time. Next, we will inspect some of them.

Sense of presence

One of the poorly understood experiences frequently associated with anomalous perception such as OBEs, is sense of presence. Sense of presence can be described as the feeling of someone being near you, when in fact there's no one there.

According to Persinger (2001), as well as Persinger and Makarec (1986), the sense of presence may be related to the disturbance of the temporal lobe associated with a specific type of neural activity within the lobe.

Persinger (2001) further maintains that people suffering from mild brain injuries have frequent paranormal episodes in the form of mystical accounts such as the feeling of a presence. Devinsky and Lai (2008) in their study described individuals suffering from temporal lobe epilepsy who encountered religious or spiritual experiences between, during, or after seizures.

Experiencing sense of presence was further implicated in the electric stimulation of the left temporoparietal junction (Arzy et al., 2006). Brugger and Regard (1997) posit that sense of presence should be classified as autoscopic phenomena. Experiencing the sense of presence was

further reported in the CAPS study (Bell et al., 2006). The Temporal Lobe category of the survey included a question on whether participants have ever sensed the presence of another being, despite being unable to see any evidence. Interestingly, this question was taken from a Makarec and Persinger study (1986), which aimed at studying temporal lobe disturbances. The study, among others, revealed that people with temporal lobe disturbances often report sensing the presence of another being. Moreover, Persinger and Healey (2002), in their study, showed the sensed presence phenomenon can also be induced by applying a magnetic field over the temporal lobe. Braithwaite et al. (2011) similarly confirmed that the subjects participating in the CAPS study experienced disturbances attributed to the temporal lobe, such as distortion of time, or a feeling of sensed presence. Moreover, the study showed that the group of out-of-body experiencers (OBErs) reported significantly higher temporal lobe instability compared to the group of non-OBErs.

This seems to be consistent with EXP's reports which described instances of increased spirituality and mysticism, including the sense of presence, during his out-of-body states. EXP regularly experienced not only the presence of a person which was not physically visible but also sensing the presence of an overwhelming force, which, according to him, usually came from an unexplained source in the form of sensory auditory hallucinations, distortions in form/size/shape, as well as sensory flooding.

Feeling the presence of both energy and/or guides/helpers is a common experience for OBErs. A series of interesting out-of-body experience questionnaires were administered by Twemlow et al. (1982). His study revealed interesting information on sensing energy or guides during the OBEs of the respondents. The study reported over 50 per cent of the OBErs (total of 339) felt a sense of energy during their OBEs and more than 20 per cent felt the presence of guides or helpers. Twemlow's study further reported

that participants were oftentimes aware of the presence of non-physical beings during their OBEs. Some of them felt that the beings were people close to them, who had died. This is in line with EXP's OBEs accounts during which he was able to perceive information from the deceased, and entities of different natures as well as spirits, at the level of exchange of instant thoughts (telepathy).

Similarities between OBEs and NDEs

A couple of OBE/NDE researchers suggested that EXP's limbic as well as reticular activating system be investigated due to his lengthy OBEs (Sellers, 2015). Instances of individuals that reported staying out of their physical body for a longer period of time are mostly connected to NDEs. A recent study on NDE memories showed that individuals who experienced a NDE reported NDE memories as real events, with a high emotional content when compared to real or imagined memories (Brédart, Charland-Verville, Dehon, Ledoux, Thonnard et al., 2013). This is similar to EXP's out-of-body accounts which suggested that they were 'extremely real, with extremely vivid settings, highly intensified emotional perception, as well as intensified sensory input.' Near-death-experiences compared to OBEs mostly occur in life-threatening situations or when dying, so the individuals experiencing NDEs are expected to be in other than the waking/active state or fully conscious as is the case of most of EXP's OBEs. However, one study presented a case of a male, who underwent an NDE under normal, non-life-threatening conditions. (Facco, 2012). Thus, the study implied that one does not have to be dying in order to experience a NDE.

OBEs as well as NDEs are often associated with each other due to the fact in general, an OBE is a part of every NDE. In a study conducted in 2007, 76 per cent of NDE experiencers suggested they also experienced an OBE as they reported they clearly existed outside their physical bodies after they left it (Nelson et al., 2007). Although a majority of near-death-experiencers report

the tunnel experience, such an experience could also be a part of an OBE, which in turn is not necessarily part of a NDE as reported by EXP. According to him, he regularly travels through tunnels as part of his OBEs. Research on NDEs conducted by Ring (1980) suggested that out of 102 who reported being near to death, a quarter would experience the tunnel journey.

When taking the Greyson (1983) NDE questionnaire EXP replied 'yes' to all 16 final NDE scale items.

Hearing sounds during OBEs

Hearing unusual or distorted sounds, voices and other auditory phenomena, is a frequent characteristic of not only OBEs, but also NDEs, and other forms of anomalous perception, including hearing voice phenomenon and visionary experiences.

During his OBEs, EXP frequently hears the following sounds:

- sounds similar to buzzing bees, or flies;
- a deep droning sound, similar to the sound of singing the Indian Ohm mantra;
- sounds similar to rattling, wheezing, ticking, or a powerful roar;
- the sound of bells or sounds of metal objects colliding with each other.

This seems to correspond with the Twemlow et al. study (1982), which implied buzzing, as well as roaring sounds as the most frequent sounds heard during OBEs of the respondents. More specifically, in the section on the nature of OBEs, 71 respondents (out of 339 total) reported hearing noises in the early stages of their OBEs, while the most common noises were buzzing, roaring, music, or singing. Participants in Greyson's preliminary NDE questionnaire similarly reported hearing 'meaningful sounds' during NDEs (Greyson, 1983). Furthermore, participants in Bell et al.'s (2006) study aimed at studying anomalous perception within the healthy population similarly reported hearing noises or sounds when there was nothing to explain them.

Time distortion, bright light, and the self

Another frequent element of out-of-body states experienced by EXP is time distortion. EXP reported that during his OBEs he oftentimes experienced severe time distortions to the degree he felt time did not exist at all. This seems to be in line with a study on meditation which showed that mindfulness meditation induced feelings of timelessness as well as spacelessness in the subjects of the study (Berkovich-Ohana et al., 2013). Persinger (1974) in his study likewise linked paranormal and extraordinary experiences with distortions in physical time. Berkovich-Ohana et al. (2013) interestingly suggested there is a connection between right temporoparietal junction (TPJ) and the distinct sensations of time and space distortion experienced by certain subjects.

According to EXP, sometimes when he walks or performs regular activities during the day, suddenly, he spontaneously finds himself out of body and at a different spatial location than his physical body which enables him to move through time and perceive situations and happenings both from the future and the past.

Furthermore, upon leaving the body, EXP oftentimes perceives the surroundings as if 'bathing in a bright light'. Interestingly, seeing a bright light is a feature that commonly happens during the episodes of the NDEs (Facco, 2012; Greyson, 1983; Thonnard et al., 2013; Moody, 1975). When out of body, EXP further perceives colors that he is not able to see when in the physical body: 'These are new shades of colours which I am only able to perceive during OBEs'. Moreover, based on EXPs firsthand accounts, the environment he perceives with his senses during OBEs appears in brighter colors than what is considered normal under a regular state of consciousness that is when physically in the body.

Next, during his OBEs, EXP perceives a clear separation between his self and the physical body which feels as a disembodiment experienced in varying intensities. This does

not mean however, that during his OBEs EXP has to see his own physical body from an outside elevated position. Moreover, EXP sometimes experiences feelings of being located at two places at the same time. This seems to be in line with the the feelings experienced by a research subject in the study conducted by Anzellotti et al. (2011). Next, EXP reported that when out of body his self is able to talk to the deceased and entities of different natures as well as spirits. This seems to be in line with Hoepnter et al. (2013) study which described anomalous perception of five subjects who experienced ictal autoscopic phenomena. Some of the subjects who reported OBEs and other autoscopic phenomena reported seeing past or future scenes, encountering mystical beings, seeing spirits and the deceased, and visiting worlds that had otherworldly settings (Hoepner et al., 2013). This seems to be in line with other OBEs who reported encountering supernatural settings during their OBEs (Irwin, 1985). Interestingly, Persinger and Valliant (1985) in their study aimed at research into disturbances in the temporal lobe pertaining to the healthy population, as opposed to the pathological population, suggested that mystical and paranormal experiences similar to the ones described above are caused by temporal lobe disturbances within the healthy population. This is further in line with Persinger's (1984) study which suggested that mystical or paranormal experience might be connected to temporal lobe transient electrical foci.

Floating and separation of consciousness

Another feature of OBEs reported not only by EXP but numerous other researchers studying the topic of OBES is floating (Blanke 2002; Fang & Yan, 2014; Moody, 1975; Monroe, 1971; Bos et al., 2016). Blanke (2002) in his study reported on an epileptic patient who described the onset of vestibular challenges such as feelings of floating close to the ceiling after electrical stimulation of her angular gyrus in temporo parietal junc-

tion. EXP frequently described 'feelings of floating above his body near the ceiling' and having difficulties getting back into his physical body during his OBEs.

It may be revealing to take a look at neural correlates of EXP during his OBEs to examine what triggers EXP's feelings of floating above his body, given the fact that he represents the healthy population and his sensations of clear separation from his physical body are not caused by any outside agents such as drug or alcohol intoxication, hypnosis, etc. According to the research conducted by Alvarado, Cardeña, and Zingrone (2000) OBEs happen mostly in states of rest or relaxation as opposed to active states. On the contrary, EXP 'leaves the body' frequently and spontaneously when in an active state rather than a state of resting or being in a supine position. This also seems to be in contrast with Blanke and Bunning (2005) who suggested that OBEs were mostly experienced in a supine position. Experiences similar to floating were further reported by CAPS study aimed measurement of anomalous perception within the healthy population (Bell et al., 2006). The participants of the CAPS study, in the category on temporal lobe disturbance, reported a feeling of being uplifted, as if driving or rolling over a road while sitting quietly.

Another common feature experienced by OBEs, is separation of consciousness. There are numerous reports of individuals, belonging to both the non-pathological as well as pathological population who experienced their consciousness separated from their body. Specifically, Braithwaite et al.'s study (2011) reported that 6 out of 17 OBEs either saw their own body separated from the physical body, or another form of body representation during their OBEs. Moreover, all five patients suffering from ictal autoscopy studied in Hoepner et al.'s study (2013), reported experiencing separation from their physical bodies while experiencing ictal autoscopy phenomena. All five responded yes to the following ques-

tion: 'Did you feel separated from your body?' (Note that the question was originally taken from the Greyson NDE scale.) Separation from body, as well as detachment from surroundings, was further reported by Greyson (1983) in his NDE scale study. In addition, Twemlow et al. (1982) reported that more than half of the OBE experiencers (over 60 per cent of OBEs out of the total of 339 respondents) in the study were aware of an out-of-body figure similar to a physical body, or felt their own out-of-body figure in the same environment as their physical body.

Synesthesia, aphasia, agnosia, alexia

Furthermore, the semiology of some of EXP's OBEs reveals features similar to features of aphasia, dyslexia, dyspraxia, agnosia (spatial and visual), as well as alexia.

Specifically, sometimes during his OBEs, EXP experiences challenges in verbal expressions as well as problems with spoken and written English which is his mother tongue. He reported that during some of his OBEs he perceived cognitive thoughts in the form of symbols, geometric forms or different shapes. When he tried to interpret them into words, he was not able to speak the words out. He further reported difficulty to spell correctly, read correctly, or express himself in words when out-of-body. Furthermore, during his OBEs, EXP often writes from right to left, speaks in reverse (as in reverse speech), or reads texts in an upside down position. This seems to be in line with Blanke, Landis, Spinelli and Seeck (2004) study, which aimed at studying autoscopy including OBEs in pathological population, specifically neurological subjects. The study revealed that some of the subjects would indeed show symptoms of aphasia, agnosia, apraxia, accompanied by verbal fluency impairment as well as challenges in oral and written comprehension.

EXP further perceives surroundings through 180 degree inversion during his OBEs. The 180 degree inversion in extrapersonal visual space was also reported by neurological patients in the study aimed at

studying OBEs and autoscapy conducted by Blanke et al. (2004).

During his OBEs, EXP also experiences synesthesia or linking of senses. Synesthesia is defined as a condition during which a unimodal sensory event is perceived by an experiencer in multimodal perceptual experiences (Palmeri et al., 2002). Bor, Clayton, Rothen, Seth, Schwartzman (2014) defines synesthesia as a condition where perception of one class triggers separated perceptions of other perceptual classes.

Accordingly, it may be possible that EXP's synesthesia is manifested when one of his sensory input links with the other during his OBEs. When EXP listens to music or hears sounds, he sees colors as well as geometrical forms attached to it. EXP further sees forms for words; each syllable has a form to him as well as color. According to Palmeri et al. (2002), perception of synesthetic colors experienced by some individuals may be connected to possible neural locus of synesthetic binding within the visual processing system.

When listening to music, EXP can further see different shapes and geometric patterns the individual notes generate. Each note, as well as each alphabetical letter, has its own vibration and thus its own unique shape or form. EXP claims that he perceives colors to have their own sounds or notes. They have their own temperature too. EXP is able to feel whether a color is cold or warm. During his OBEs different colors merge together to create different tunes or songs. Furthermore, EXP can hear, see, smell, taste, and feel vibrations. Vibrations of joy and love compared to vibrations of anger and hatred have different scents and completely different tastes.

Similarities between glossolalia and OBEs

It is worth noting that some of the phenomenology and semiology similar to that described in the studies of glossolalia by Lynn et al. (2011), Newberg et al. (2006), Persinger (1984), and Kavan (2004) was also experienced by EXP during his OBEs. Newberg et al.'s (2006) study reported that

during glossolalia, the subject experienced a feeling as if some unidentifiable force had taken over him and tried to influence his thoughts and actions. Interestingly, this is highly similar to descriptions reported by EXP. He reported that during his OBEs sometimes he feels as if his physical body was under control of some force causing him to lose control not only of his body but also his self. Newberg et al.'s (2006) study further revealed that during glossolalia the subject experienced a lack of control over his self. This is in line with EXP's accounts. He reported that sometimes during onsets of OBEs, he loses control of his self and despite the fact that he wants to, he is not able to stop the upcoming OBE. He further reported that sometimes during his OBEs he felt as if some unidentified force literally forced him out of his physical body disregarding his self and dragged him to different times and places, often of unearthly origin. The experience of self was studied by Heydrich et al. (2010) who identified basic elements playing a key role in creating and sustaining bodily self-consciousness. The most important elements are self-identification, first-person perspective, and self-location. Interestingly, Ionta et al. (2011) suggested manipulation of the sense of self-location, which is linked to self-identification, may trigger OBEs.

CAPS

EXP was presented with the Cardiff Anomalous Perception Scale (CAPS) to assess the level and intensity of his anomalous perception. According to a study conducted by Bell et al. (2006), CAPS is a new form of measurement of anomalous perception available for the healthy population. It contains 32 items classified into nine selection categories pertaining to the following anomalous experiences: (1) changed intensity of sensory perception, (2) non-shared sensory experience, (3) distortions in sensory experience, (4) perception of an unexplained source in the form of sensory experience, (5) verbally based hallucinations, (6) form/size/shape/distortions, (7) perceiving thoughts out loud

and hearing thoughts as an echo, (8) the so-called sensory flooding, and finally (9) temporal lobe challenges (Bell et al., 2006).

Some of the OBE phenomenology EXP reported is similar to the phenomenology of exceptional experiences described by participants of the CAPS study. For instance, when asked about sensory flooding, participants reported experiencing sensations happening all at once as well as an inability to tell one sensation from another (Bell et al., 2006). Similarly, EXP reported, 'I can smell, taste, touch, and hear objects at distance. I feel all senses linked and I am able to perceive them all at once.' EXP also reported experiencing 'chemosensation', a strange olfactory as well as gustatory sensation, 'out of the blue.' This too corresponds to the results drawn from CAPS, which revealed chemosensation to be one of the three main components analysed by the CAPS in the participants of the healthy population.

For better orientation, the 32 CAPS questions presented to EXP and the corresponding replies are below.

Q: Do you ever notice that sounds are much louder than they normally would be?
A: Yes

Q: Do you ever smell everyday odors and think that they are unusually strong?
A: Yes

Q: Do you ever find that your skin is more sensitive to touch? To heat or the cold?
A: Yes

Q: Do you ever think that food or drink tastes much stronger than it normally would?
A: Yes

Q: Do you ever notice lights or colors seem brighter or more intense than usual?
A: Yes

Q: Do you ever experience smells or odors that people next to you seem unaware of?
A: Yes

Q: Do you ever see things that other people cannot?
A: Yes

Q: Do you ever hear sounds or music that people near you don't hear?
A: Yes

Q: Do you ever experience unusual burning sensations or other strange feelings in or on your body?
A: Yes

Q: Do you ever find that sounds are distorted in strange or unusual ways?
A: Yes

Q: Do you ever find that common smells sometimes seem unusually different?
A: Yes

Q: Do you ever think that everyday things look abnormal to you?
A: Yes

Q: Do you ever notice that food or drink seems to have an unusual taste?
A: Yes

Q: Do you ever see shapes, lights, or colors even though there is nothing really there?
A: Yes

Q: Do you ever hear noises or sounds when there is nothing around to explain them?
A: Yes

Q: Do you ever detect smells which don't seem to come from your surroundings?
A: Yes

Q: Do you ever experience unexplained tastes in your mouth?
A: Yes

Q: Have you ever heard two or more unexplained voices talking with each other?
A: Yes

Q: Do you ever have the sensation that your body, or a part of it, is changing or has changed shape?

A: Yes

Q: Do you ever have the sensation that your limbs might not be your own or might not be properly connected to your body?

A: Yes

Q: Do you ever find the appearance of things or people seems to change in a puzzling way, e.g. distorted shapes or sizes or colour?

A: Yes

Q: Do you ever look in the mirror and think that your face seems different from usual?

A: Yes

Q: Do you ever hear voices commenting on what you are thinking or doing?

A: Yes

Q: Do you ever hear voices saying words or sentences when there is no one around that might account for it?

A: Yes

Q: Do you ever find that sensations happen all at once and flood you with information?

A: Yes

Q: Do you ever have difficulty distinguishing one sensation from another?

A: Yes

Q: Do you ever hear your own thoughts repeated or echoed?

A: Yes

Q: Do you ever hear your own thoughts spoken aloud in your head, so that someone near might be able to hear them?

A: Yes

Q: Do you ever sense the presence of another being, despite being unable to see any evidence?

A: Yes

Q: Do you ever have the sensation that your limbs might not be your own or might not be properly connected to your body?

A: Yes

Q: Do you ever have the feeling of being uplifted, as if driving or rolling over a road while sitting quietly?

A: Yes

Q: Do you ever find that your experience of time changes dramatically?

A: Yes

Below are listed specific elements based on descriptions of first-hand accounts of OBEs as experienced by EXP. The phenomenological correlates of individual accounts of OBEs were divided into specific categories based on different types of anomalous perception as experienced by EXP during his OBEs.

Common elements occurring during OBEs as experienced by EXP

Bodily, vestibular, and proprioceptive perception

- presence of a variety of physical sensations such as vibrations of various intensities emanating directly from the inside of EXP's physical body;
- dizziness, brief states of vertigo;
- sensation of body shaking from side to side (the shaking seems to be provoked by buzzing vibrations emanating from within the body);
- sensation of falling into an abyss;
- subtle sensations of floating;
- sharp burning pain/sensation in the sacral region as well as energy centers of the coccyx;
- traveling through a tunnel;
- Note: the vast majority of people who have experienced traveling through a tunnel actually underwent NDE;
- watching own body from an elevated position, usually ceiling or side walls in an enclosed space such as a room;
- seeing own physical body contours (the double, parasomatic body, etheric coun-

terpart) which mostly look transparent, are glowing, or have an intense white colour;

- perceiving consciousness leaving the body or moving away from it in order to visit different places at distance at the speed of thought;
- clear sense of ability of EXP to control their body remotely;
- strong feeling of being taken into another space/time, dimension, remote past, distant future, or an environment substantially different from terrestrial;
- an instant transfer over long distances to different places including what is perceived by EXP as other dimensions, the past, or the future (the transfer takes place instantly at the speed of thought);
- Note: the out-of-body transfer described above is immediate and based solely on the intensity of intentions (desire) of EXP to move elsewhere;
- a clear sense that EXP whose self is projected outside the physical body has the ability to move in space/time, creating a distinct feeling of flying, hovering, jumping, and/or skipping over large distances in space;
- ability to cross or pass through tangible objects such as walls, doors, windows, pieces of furniture, ceilings, buildings, different objects, or even people;
- ability to leave the body under full consciousness while continuing to carry out simple activities such as talking to others, talking on the phone, driving a car, moving around in the physical body, drinking, eating, walking – however there is a clear sense of separation of the physical body and the self;
- ability to touch other inanimate objects and the outside as well as inside of living bio-matter whether mineral, plant, animal, or human;
- ability to move inanimate objects, or affect them otherwise at distance, such as breaking glass at distance without any physical contact between EXP and the object affected.

Visual perception

- visions of bright glare despite the fact that the OBEs oftentimes happen at night and in complete darkness;
- Note: EXP often sees bright vibrant colours or plasma-like shimmering lights accompanied by sounds;
- blurry or double vision;
- distorted vision of the surrounding environment;
- wave-like distorted motion of surrounding objects;
- changes of shapes of surrounding objects in unusual ways;
- 180 degree inversion in perceiving the environment;
- 360-degree vision (the so-called circular vision).

Auditory sensations

- presence of different sound effects such as:
- sounds similar to buzzing bees or flies;
- a deep droning sound similar to the sound of singing the Indian Ohm mantra;
- sounds similar to rattling, wheezing, ticking, or a powerful roar;
- the sound of bells or sounds of metal objects colliding with each other;
- inner sounds coming directly from within the body (the sounds are very intense; they seem to be coming directly through EXPs' physical ears from outside, e.g. EXP is able to hear their own breath, heartbeat, fluid motion inside the body, movements of organs inside the body);
- ability to hear people talking at considerable distance or at a location different from the location of the physical body;
- ability to hear through walls.

Sleep paralysis

- body paralysis or an inability to move from the place where the body is located at the time;
- numbness/paralysis of certain body parts, such as an inability to close and/or open the eyes;
- total inertia and inability to control one's own physical body;

Anomalous perception in the form of extrasensory abilities

- extrasensory perception of information drawn from other human beings (including unborn or deceased), animals, trees, and plants at the level of exchange of instant thoughts (telepathy), feelings, and emotions;
- Note: EXP perceives thoughts/feelings/emotions of the above mentioned subjects as if they were his own;
- ability to extract information from inanimate objects providing they are organic in nature such as rocks, minerals, crystals, wood, metal, water, plasma, lights, colors, different shapes of light and sound;
- ability to sense moods of others, examine their states of consciousness, energy flow, and patterning of objects placed in the surrounding area or at distance;
- ability to withdraw meaningful information from other individuals based on tactile, auditory, gustatory, and olfactory sensory perception which EXP perceives as coming from an unidentified source;
- ability to smell different scents such as roses, lilies, cigarette smoke, incense, vanilla, menthol, and other odors even though the objects emitting the fragrance are not present in the area or anywhere near EXP.

Modes of exiting the physical body

- leaving the body in the waking state, while fully conscious, but without intending to do so, unexpectedly;
- leaving the body in the waking state, while fully conscious, and at will;
- leaving the body while standing, sitting, walking, talking, working at the computer, exercising, lying down, or while resting;
- awakening from a deep sleep, semi-sleep, lucid dreaming, hypnopompia, microsleep, or REM microsleep into a state of being outside the physical body at the level of pure consciousness, the self, or a point disembodied from the physical body and existing independently from

the physical body while floating and/or moving in the broader space/time;

- Note: The self is fully aware of its identity and perceives the surrounding environment from the first-person perspective.

Modes of returning back to the physical body

- by own volition;
- automatically being pulled back into the physical body by some unknown force;
- due to fear that EXP will not be able to re-enter his body;
- a slow return to the body while EXP is able to observe the specifics of the return to the body.

Some of the elements demonstrated during EXP's OBEs

- vestibular challenges/attempts to find the right balance between intrapersonal and extrapersonal space when active and walking during OBEs;
- difficulty in articulating/challenges both to oral as well as written fluency in EXP's mother tongue;
- onset of some of the common features found in aphasia, agnosia, alexia, apraxia, dyslexia;
- ability to read and distinguish individual letters through touch and feel;
- spatial orientation through touching at distance;
- ability to feel the shape of objects at distance;
- enhanced multisensory perception (including visual, auditory, tactile, olfactory, as well as gustatory);
- perception of double reality taking place simultaneously (being at two places at the same time);
- ability to perceive information in one indivisible whole (even though the information does not seem to be connected);
- ability to perceive unusual symbols, numbers, geometric images, as well as light patterns of different shapes;
- experiencing synesthesia (linking senses);

- severe time/space distortions;
- strong perception that time does not exist;
- (note: with respect to time flow, going forwards or backwards feels the same to EXP);
- episodes of both precognition as well as retrocognition;
- ability to perceive and experience future life events before they happen to the physical body (the case of retrocausality);
- ability to remote view.

Different modes of OBE occurrence (both in the case of EXP as well as in general)

- spontaneously, naturally, in the waking state, under full consciousness;
- induced at will;
- in an active state such as standing, walking, talking, working on the computer, etc.;
- in a resting state such as sitting or lying down;
- in a lucid state or during the so-called lucid dream (the experiencer is asleep, but aware of the fact that he is dreaming and can navigate the dream);
- during the so-called false awakening;
- as part of NDEs;
- induced by hypnosis/trance/meditation/contemplation;
- during REM intrusion such as hypnagogia, hypnopompia, during sleeping paralysis;
- during autoscopic phenomena such as autoscopia, autoscopic hallucinations, heautoscopy (whether inner or negative), and the Doppelgänger phenomenon;
- OBEs induced by drugs, epilepsy, migraines, cardiac arrests, brain injuries, life threatening;
- situations, sudden shocks, extreme activities such as jogging or exercising;
- induced by out-of-body-like experiences such as body parts distortions created under the virtual reality setting.

First hand descriptions of EXP's OBEs

Below are presented some of the first hand descriptions of EXP's OBEs:

'When I am out of body, my orientation relies on extrasensory perception solely. I orient myself through touching at distance. This is actually similar to experiencing heightened vibrations of feelings. The energy quantum that leaves my body (or rather extends beyond its physical boundaries) is spread in the area and with the help of feeling based vibrations can describe at distance any person or object observed. It's a principle similar to that of an animal which does not see at night and yet can navigate its body. Vibratory-oscillation energy, which is a part of my body, but is at the same time extended in the broader space/time area, has the ability to cover my vision, touch, taste, hearing, feeling and the sense of smell. My physical eyes, ears, nose, tongue, and skin don't have to be used when I achieve a particular vibratory-oscillation pulse within your body. When out of body, I am being hooked up to a resonance which helps me enter a higher rhythm which has the ability to uncover the world of extrasensory perception for me. One of the most significant factors affecting human perception is human feelings. I am able to reveal information on many scientific topics. However, people do not know how to communicate with me at the level of my mind, which is telepathic. I could teach people a variety of new scientific theories as well as explain them. My problem, however, is that the regular words of our language cannot convey the information I want to cover. This being the case, I am only able to express basic ideas or supporting points on the topic I want to cover. I see all information in one indivisible whole unit via symbols, geometric shapes, colors, and radiation. What I perceive, sometimes cannot sufficiently be expressed in terms of a language. The core ideas on certain topics that I have stored in my body cannot be read by anybody or retrieved in any way. The information and knowledge are not stored in the brain. The information I have downloaded has nothing to do with the brain. It comes from within my body and is stored inside my body. In my spirit. In my inner

being. The regular brain is not the control center as scientists believe to be the truth. When I am here on earth and in my physical body, I have problems with my eyes. I do not read through my eyes. I know it sounds crazy. I am able to read through touching, feelings, emotions and thoughts of other people. I understand and see things through touching at a distance, through taste, smell, and sound. When I write on a computer, I recognize the individual letters through their shape as well as the form of air that is in space. Sometimes, my physical eyes do not work when I am in the body. It is as if they are turned off.'

OBEs and their transformative nature

Research on OBEs suggests that OBEs may have transformative and transcendent potential. De Foe (2012) suggests that OBEs are transformative experiences that can have a significant impact on the individual's well-being. He further suggests that those who experience OBEs should openly talk about them in therapeutic settings. According to Twemlow (1989), OBEs should not be considered pathological or something unusual. Twemlow believes that transpersonal therapists should consider OBEs as transformative experiences holding the potential of spiritual transcendence. Schenk (2006), in his study, examined the potentially healing nature of OBEs. He suggested techniques to artificially trigger OBEs in order to fully utilise their healing potential. Similarly, peak experiences, which include OBEs, as well as NDEs, have been linked to states of high integration, triggering coherent brain functioning, as well as producing states of inner harmony, happiness, and ease of functioning (Harung, 2012). They also reduce anxiety and are associated with lack of fear, which may indicate that peak experiences also impact the amygdala.

Conclusion

In the paper I presented OBEs of a frequent OBEr named EXP (for the purpose of the paper) as observed and written into my

working diary. The OBE accounts were compiled by me over the past 28 years. Where applicable, I further presented first-person descriptions of OBEs delivered by EXP himself. The paper further enlightens on the phenomenology as well as the semiology of OBEs which I consider an integral part of the broader aspect of anomalous perception. I suggest that the OBEs of EXP are special and deserve attention as well as further examination due to their rare nature. They are exceptional as they occur spontaneously or at will, in the waking state, under full consciousness, in an active state since birth. The explanation for the OBE accounts of EXP where no pathological dysfunction was established is not clear. Accordingly, the mechanism based on neural network processing by which this kind of abnormal perception is experienced by EXP would still need to be defined in order to get more light on the nature of OBEs in general. Despite the fact that the mechanism of abnormal perception as experienced by EXP in the reported OBEs is not fully understood, my direct observation as well as analysis based on EXP's first hand reports indicates that visuo-vestibular processes might play an important role. However, more research aimed at the explanation, including neural correlates of EXP's out-of-body states should be conducted in the future.

To conclude, the phenomenology as well as semiology of OBEs experienced by EXP suggest that there are multiple diverse factors contributing to anomalous cognition and perceptual experience processed during OBEs. Unfortunately, science so far lacks a thorough explanation as to what causes spontaneous OBEs, or OBEs that are triggered at will, in some individuals belonging to the healthy population.

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