



Hypno-death-experiences: Death experiences during hypnotic life regressions

Luciano Pederzoli^a, Eugenia De Stefano^b, and Patrizio Tressoldi^b

^aEvanLab, Firenze, Italy; ^bDipartimento di Psicologia Generale, Science of Consciousness Research Group, Università di Padova, Padova, Italy

ABSTRACT

In this study we analyzed retrospectively a database of 44 alleged death experiences between incarnations, as reported by 36 participants during hypnotic life regression sessions with the same hypnotist. The descriptions of these experiences were evaluated using the Italian version of the Near-Death Experience Scale. A large part of the reported experiences were categorized as "Affective", with a majority reported as: "Feeling a sense of joy" and "Seeing and being enveloped by a bright light", as well as in the "Transcendental" category, with all experiences showing a similar frequency. Regarding the "Paranormal" category, the most often reported experience is that of: "The feeling of being separated from one's physical body".

With respect to the total score, 18% fell within the range commonly used to identify true near-death-experiences. The death experiences undergone during the hypnotic life regressions contain very similar characteristics to those reported in classic near-death-experiences. Whether these experiences were actually lived or were, instead, accounts of events previously learned through conventional means, remains an open question.

Introduction



The use of hypnosis to relive past lives is still a controversial technique, usually used to help resolve distress or psychopathological issues. Furthermore, whether past life experiences are real or purely a result of the beliefs and expectations of those under hypnosis, or even of the hypnotist, is still under debate (Lucchetti, Santos Camargo, Lucchetti, Schwartz, & Nasri, 2013; Pyun & Kim, 2009; Spanos, Menary, Gabora, DuBreuil, & Bridget, 1991). The greatest difficulty is in being able to verify the reliability of the information given by the experiencer, although this was possible in the case described by Tarazi (1990).

If, however, it is possible to induce experiences of past lives, it should also be possible to relive the birth and death events of those lives. To our knowledge, only Schenk (1999) and Ohkado & Greyson, (2018) have documented some of these death experiences. Schenk (1999) described a series of clinical cases to


which the technique of lucid dreaming was applied in order to relive previous lives.

In another study, Ohkado & Greyson, (2018), conducted an international online survey related to near-death experiences (NDE). Among the participants who completed the survey, 23 reported a "death" experience under past-life hypnotic life regression sessions and were requested to describe it with both the Greyson (1983) NDE scale and The Life Changes Inventory – revised (Greyson & Ring, 2014).

In this study, we got the chance to analyze retrospectively a complete database of death experiences of previous lives induced via hypnotic regression for research (rather than therapeutic) purposes. With this quite rare opportunity, we carried out a detailed analysis of deaths using the same Greyson (1983) NDE scale used by Ohkado & Greyson, (2018). This scale is usually used to evaluate experiences reported by people after a recovery from a medical condition where their vital functions have been seriously compromised, for example, during cardiac arrest or a serious brain

CONTACT Patrizio Tressoldi  patrizio.tressoldi@unipd.it  Dipartimento di Psicologia Generale, Science of Consciousness Research Group, Università di Padova, Padova, Italy.

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infection, resulting in loss of consciousness (Charland-Verville et al., 2014; Facco & Agrillo, 2012).

This scale, recently analyzed according to the Rasch model by Lange, Greyson, & Houran (2004), consists of 16 questions related to four categories of experiences, respectively called: “Cognitive”, “Affective”, “Paranormal”, and “Transcendental”. For each question – for example: “Did scenes from the future come to you?” – the answer is given a score as follows: 0 = negative; 1 = “Yes, relative to my personal future”; 2 = “Yes, relative to the world’s future”, and so on to a maximum of 32 points.

Methods

Participants

The participants were 14 males and 22 females ranging in age from 25 to 64 years old with an average of 49.6 years. Their socio-cultural background, which encompasses their level of education and their type of employment, ranged from middle to high. None of the participants were taking psychoactive drugs before and during hypnosis.

Their recruitment was on a voluntary basis through word-of-mouth from people who knew that the hypnotist was specialized in life regression hypnosis.

The hypnotist (LP) was an adult male aged 72 years with more than two decades of experimental hypnosis experience (Pederzoli et al., 2016; Tressoldi et al., 2015).

The main reasons for their wanting a life regression hypnosis were: déjà vu in places never seen before; recurring dreams relative to events and people (usually of the past) not linked to the current life, but recognized as part of one’s heritage. None of the participants reported a pathological medical or psychological condition.

Procedure

Audio recordings were made of all hypnotic life regression sessions and each participant, via informed consent, authorized the anonymous handling of these data and agreed to be hypnotized in order to try to relive past lives and their associated births and deaths.

This informed consent was approved by the EvanLab ethical committee and was prepared according to the Declaration of Helsinki of the World Medical Association.

Only one session was obtained from 36 participants, while 8 participants contributed two sessions each, for a total of 44 death experiences.

When participants reported their death, the hypnotist simply asked them to describe what was going on during and after this event (e.g. “Now look at what happens after your death, describe everything you feel and what happens”), giving continuous emotional support in case of distress and prompting them to continue the description of this experience until they ended it because of a new incarnation.

We emphasize that this database was not created to analyze “true” relived death experiences of participants, but as a generic reference to document what was reported during these life regression sessions given the possibility that these are solely products of the imagination, aided by hypnotic suggestion. This has limited investigations into possible changes related to death emotions and the interpretation and long-term effects of these experiences, as will be better explained in the discussion.

Segments containing death experiences between incarnations were extracted from each audio recording and these contents were then transcribed and grouped according to events, to enable separate evaluations. If a particular participant reported multiple death experiences in one or subsequent sessions, these were identified as a “new death”.

Each event from these experiences was then independently assessed by two judges (EDS and PT) using an adaptation of the items of the Italian version of the NDE Scale (Pistoia et al., 2018), after having agreed on the criteria by analyzing together the first two death experiences. The adaptation simply consisted of using each of the scale’s 16 questions as simple descriptions of the experience. For example, the question “Did you feel joy?” was changed to “The sensation of joy was felt”, and the phrase “Did you see future events?” instead became “Events from the future appeared”.

Each judge assigned a number corresponding to the NDE scale question for every event in each death experience, followed by a score of 0, 1 or 2 depending on the quality of the experience. For example, if the statement “I leave my body” was marked as 12_2, it corresponded to item 12 of the NDE scale (i.e. “Did you feel separated from your physical body?”) and a score of 2 corresponded to: “Yes, I obviously left my body and was aware of existing outside of it”. If the phrase “I’m rising; I’m a hologram; I am in a bright, green space” was marked as 13_1, it corresponded to item 13 of the NDE scale (i.e. “Did it seem like you had entered a supernatural world?”) and the score of 1 corresponded to “Yes, an unfamiliar, alien place”.

After the judges’ independent evaluation of all the experiences, they were subsequently compared by one

of the authors (PT) to identify any inconsistencies and/or omissions so as to obtain a final version agreed on by both judges. The final version is available at <https://doi.org/10.6484/m9figshare.7392323.v2>

Results

The percentage of events assigned to the same question of the NDE scale by the two judges irrespective of their score was 85.9% (116/135). The percentage of events assigned to the same question of the NDE scale and with an identical score was 67.4% (91/135).

All differences with respect to the classification of experiences referred to items 5 and 6, corresponding respectively to the questions: “Did you feel a sense of peace or fulfillment?” and “Did you feel joy?”, and to items 14 and 15, corresponding respectively to: “Did you seem to be in contact with a being or mystical

presence?” and “Did you see the spirits of deceased people or religious figures?”.

Types of experiences

The frequency and corresponding percentage of the type of experiences obtained from 44 descriptions of deaths analyzed are shown in Table 1 and in Figure 1.

Comments

From the data shown in the Table and Figure 1, it is clear that most of the reported experiences fall in the “Affective” category, with a predominance corresponding to items 6 (“Felt a sensation of joy”) and 8 (“Saw or felt enveloped by a bright light”), or in the “Transcendental” category, with the same frequency of experiences corresponding to: “It was like entering a supernatural world” – “There seemed to be contact with a mystical being or presence” – “Deceased people or religious figures were present” – “A boundary or point of no return was reached.”.

With respect to the ‘Paranormal’ category, the most often reported experience is that relative to: “There was the sensation of separation from the physical body”, whereas the others (“Senses were more alive than usual”; “There was awareness of what was happening elsewhere”; “Scenes from the future appeared”) either were not referred to at all or were mentioned in less than 3% of cases.

Lastly, in the “Cognitive” category two experiences were never reported: “Time seemed to move faster” and “There was a sudden understanding of everything”, while the other two (“Thoughts flowed faster”

Table 1. Count and percentage of each type of experience reported by the participants.

Experience type	Counts	% of total
Cognitive		
Accelerated thoughts	1	0.7
Scenes from the past	6	4.4
Affective		
Feeling of peace	4	3.0
Feeling of joy	22	16.3
Sense of harmony with the universe	7	5.2
Bright light	16	11.9
Paranormal		
Extra-sensory experiences	2	1.5
Scenes from the future	3	2.2
Separation from physical body	24	17.8
Transcendental		
Supernatural world	12	8.9
Contact with a mystical presence	13	9.6
Encounters with deceased people	16	11.9
Reaching a boundary	9	6.7

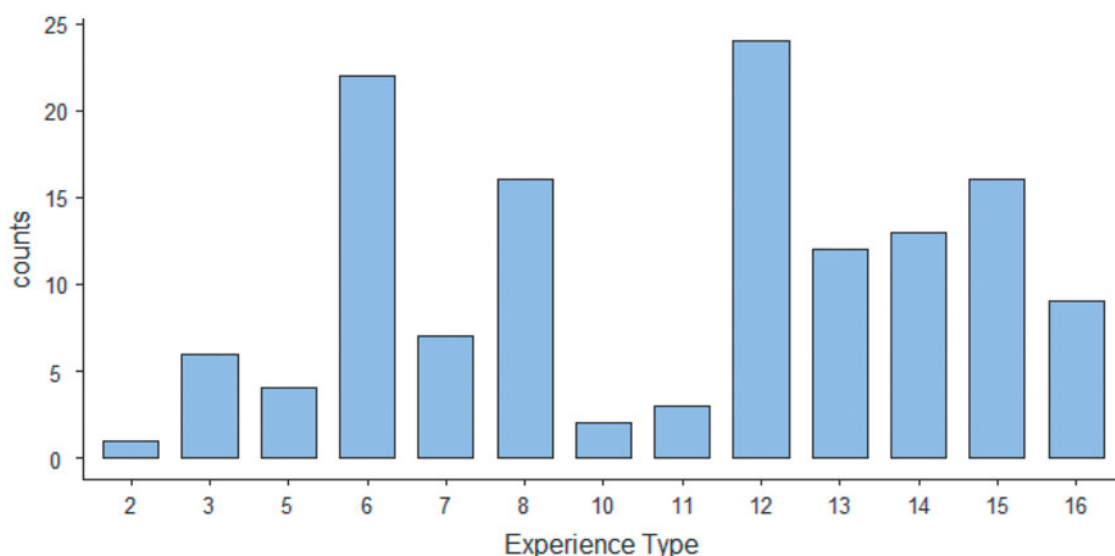


Figure 1. Histogram of type of experience described in the 44 death experiences.

and “There was a flashback of past events”) were referred to with frequencies of 0.7 and 4.4%, respectively.

It is also interesting that the order of the observed frequencies of these experiences conforms with the observed hierarchy reported by Lange, Greyson, & Houran, (2004) in their analysis of the original NDE scale via the Rasch model method. In this study, those who described a true NDE reported, in decreasing order, firstly the affective experiences, then the transcendental ones, and finally the paranormal and cognitive ones, the exception being the experience of feeling separated from one’s physical body.

NDE scale total scores

The Pearson correlation between the total scores given by the two judges to each death experience equals 0.95; 95% confidence intervals: 0.92–0.97, therefore demonstrating excellent agreement. The average total score was 4.7 with a range from 1 to 10. The frequencies and percentages of these scores are presented in Table 2 and in Figure 2 histogram. The percentages and frequencies of the number of death characteristics identified by the two judges in each death experience are shown in Supplementary Table S1 and Figure S1.

Using the conventional 7 total point criterion to identify true NDE, from Table 2 we note that only eight out of 44 experiences (18%) fall in this category.

Discussion

The main goals of this work were at first to analyze the characteristics of death experiences undergone during hypnotic life regressions and secondly to reflect on their nature, especially with respect to the question: “Are they actual lived experiences, or are they just extracted from knowledge previously acquired from reading about others’ near-death experiences?”

As far as the characteristics are concerned, reading the summaries of the death descriptions (available at <https://doi.org/10.6084/m9.figshare.7392323.v2>), we see that, for the most part, the characteristics reported by the participants are just the same as NDEs, confirming Ohkado & Greyson’s (2018) findings regardless of our items adaptation. Even if, to our knowledge, there are no comparisons of the correlation between the original and the version of using our NDE scale, we think our version was less vulnerable or susceptible to false memories or suggestion

Table 2. Counts and corresponding percentage of the NDE scale total scores.

Total	Counts	% of total
1	2	4.5
2	4	9.1
3	7	15.9
4	10	22.7
5	4	9.1
6	9	20.5
7	4	9.1
8	3	6.8
10	1	2.3

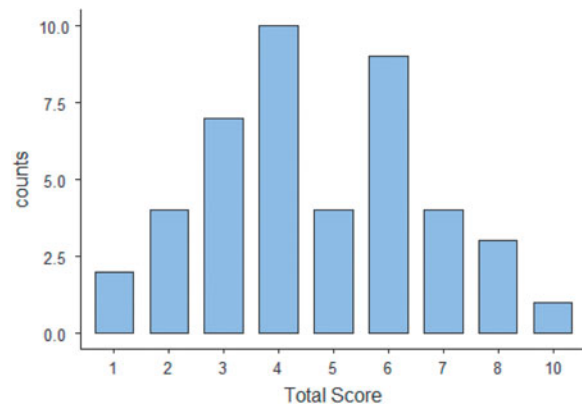


Figure 2. Histogram of distribution of total scores.

from the items in the questionnaire because the participants were free to describe their death experience.

Furthermore, the frequency of experiences conforms to what has been observed from true NDEs, with a preponderance of the Affective ones, followed by Transcendental and the so-called parapsychological and cognitive ones, the predominant one being the experience of being outside the body.

Regarding the total scores, only 18% fall within the accepted level of a true NDE, even though another 20% reported a score very close to this threshold.

We did not observe differences between the sex and the socio-cultural backgrounds of participants.

It is interesting to observe that in the Ohkado & Greyson’s (2018) study, the percentage of participants who scored 7 or higher was 91.3%, probably due to participants’ self-selection and the different use the NDE scale and direct interview versus indirect evaluation of death experience. Perhaps giving participants the scale to complete themselves prompts them to address the presence or absence of each item, whereas participants not given the scale (as in this study) might not think to mention items that they did experience but consider as not worth mentioning.

Finally, with respect to the nature of these experiences and whether real or imagined, there are both favorable and contradictory elements for them being true experiences during the hypnotic life regression

sessions, bearing in mind that true NDEs are always followed by an immediate return to life, whereas deaths relived during life regressions are never followed by an immediate return to life, but potentially only by a consecutive reincarnation.

As elements that could support a true reliving of a past death, as described above, there is the frequency of observed characteristics reported by our participants which conforms with what was observed by Lange et al., (2004), in those who underwent true NDEs.

Furthermore, if participants of our study only reported the information described by others, why were they reported with this particular distribution frequency rather than randomly, or simply repeating all those described in the literature?

However, the following elements cast some doubts about them being true re-experienced deaths. Why do only 18% report a score that is compatible with that of true NDE? And why does a large part of the experiences contain few elements of a true NDE?

Our current position is to defer judgment on this issue until further prospective studies on these experiences are conducted without the limitations of this study and provide us with the information we need to make a decision. However, even if we did not observe any negative effects in our participants, we recommend particular care in order to prevent potential negative after-effects of such experiences.

Among the limitations of this study, there is undoubtedly the lack of assessing the participants' level of NDE knowledge before their hypnotic life regression. Also, it would have been useful to have evaluated the fear of death before and after the relived death experience and its long-term effects, as was done by Ohkado & Greyson, (2018).

Acknowledgments

We thank the reviewers and the editor for their precise and constructive comments that helped us to improve the clarity and quality of our paper. We also thank Cinzia Evangelista-Pannozzo (Melbourne) for the English translation.

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