**BOOK REVIEW**

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The Truth in the Light: An Investigation of Over 300 Near-Death Experiences, by Peter Fenwick and Elizabeth Fenwick.  

*The Truth in the Light* will probably be classed as a popular rather than an academic book; but do not dismiss it for that reason. Peter Fenwick is a very distinguished English neuropsychiatrist and, amongst many other honors, is President of British branch of the International Association for Near-Death Studies (IANDS—UK). Both he and his wife Elizabeth have an enviable clarity of expression and are able to write with that disarming simplicity that comes from a real mastery of the subject. They have provided a book that is exactly the right one to give to any intelligent inquirer who wants to know what the near-death experience (NDE) is and what the brain scientists make of it, and who ought to be asking many of the critical questions about it that the Fenwicks address. And experts on the NDE, such as subscribers to this Journal, will come across many insights that will help set their own thoughts in motion.

Nearly all the cases the Fenwicks quote were obtained by invitation after television or radio programs, or press articles. Over 350 “moving and sincere personal testimonies” were obtained in this way, mainly from southeast England, with a scattering from the rest of the United Kingdom. American readers will, of course, have to translate references to items and institutions like *Marks and Spencers*, *Aga cookers*, the *RAF*, the *Samaritans*, *Macmillan nurses*, and *sixth-formers doing their A levels*; but they should have no real difficulty in this.

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The database from which they are taken is thus a self-selected sample, so the statistics the Fenwicks quote need to be taken as illustrative rather than scientific. But Fenwick knows the literature and can be trusted to tell us whether a case he quotes is typical or not—and it is important to quote those that are not, because they may prevent us from making sweeping generalizations about all NDEs falling into one pattern, or from failing to see similarities between the NDE and other, better-understood, neurophysiological or neuropsychiatric phenomena.

The bibliography is a disappointment. Beginners need to be given a short list of books with comments on them. Serious researchers need a full bibliography (and page references in the text) so that they can check up on details. Neither will be served by an incomplete and unannotated list of about three dozen assorted books and articles. But that is a niggle. Let it be said at once that this book is a delight. It is as though we are looking over Fenwick's shoulder as he examines all these accounts that have come to him, as he uses his professional expertise to understand what might be going on, and as, time and time again, the straightforward medical explanation fails to cover all the data and he has to admit that the NDE is something very strange indeed, and raises all sorts of philosophical and metaphysical questions that are not the normal province of the medical fraternity.

Fenwick acknowledges that much of the imagery of the near-death world is psychologically constructed: "The near-death world [is] a psychological world without any reality in physical space" (p. 154); "the 'realm' to which people travel is something created entirely by their minds, and will be different for everyone" (p. 159); "the visual imagery [of the NDE] is largely a product of the individual and is very personal" (p. 170). The "barrier" is a psychological construct indicating that the person undergoing the experience has all but reached a point of no return. There are certainly such things as childhood NDEs, but when they are recounted from memory by adults, they are interpreted in the light of an adult's rather than a child's understanding (p. 181). The "feeling of the presence of Christ" in an NDE needs to be distinguished from "the image which the perceiving brain creates to fit it, which is simply drawn from the picture-bank of memory" (p. 63); the idea of death as a "journey" is a cultural belief (p. 109); the picture of a Paradise garden is a culturally-influenced myth (p. 78).

All this means that there will be differences between British and American NDEs (pp. 166–8). The "life review" is more common in America. American cases seem to have a "much more complex 'storyline'" and are more authoritarian about what the experiencer is required
to do on return to this earth. (Incidentally, in reference to the Fenwicks' discussion on pp. 167ff., Betty Eadie is a Mormon, not an evangelical Christian.) Even the difference between "hellish" and pleasant NDEs may depend (p. 168) more on the overall feeling-tone of the experience than on any specific details of what seems to be being perceived.

So far, few surprises; but it is when Fenwick applies his professional knowledge as a brain specialist to the NDE accounts that the reader begins to realize that not everything is plain sailing. Is the experience the result of drugs or medication? or of the random firing of neuronal circuits? or of cerebral anoxia? or hypercapnia? or the release of endorphins? Each of these explanations is initially promising, but each eventually runs up against insuperable difficulties, although there are times when it has to be acknowledged that further research is needed before we can be certain. So, how can we have memory during a period of unconsciousness? How can a disordered brain produce orderly images? How can random firing produce coherent imagery? There is something here that a mechanistic appeal to brain circuitry or chemistry can not encompass.

It might be easier to validate the NDE as evidence of something objective if, for instance, we were able to show that people having an out-of-body experience (OBE) actually saw what they were physically unable to see. Fenwick acknowledges (p. 258), with Susan Blackmore (1993), that there is as yet no firm evidence for this, although experiments with which he is associated are being set up to see whether it is the case. Claims that the NDE can lead to increased psychic sensitivity (pp. 141–150) also rest upon very slender data. Most post-NDE premonitions are very generalized and are little more than a conviction that there will be "work" to be done, or a destiny to be accomplished, on return to this earth.

A clue comes when we realize that the right temporal brain lobe is unusually active during these and similar experiences. The right hemisphere, we know, is more emotional and less verbal and logical than the left. So let us run the gamut of possible explanations. Once more, they fail to be completely satisfying to a neuropsychiatrist. NDEs are not hallucinations, or dreams, or dissociation, all of which have different manifestations.

In the end, the Fenwicks have to confess that the closest parallel to the NDE lies in mystical experience. Work such as that done by the Alister Hardy Religious Experience Research Unit at Oxford has shown that mystical or religious experience is far more common than we at first supposed and that the majority of the human race seems capable of
undergoing it. But, once more, that does not close the argument. If the NDE is a mystical experience, how is it that it happens to a disordered brain in a state of extreme trauma? Are we being led to suppose that mystical experience has an objective counterpart in what we might term “transcendental reality” (p. 24) and is not simply a mental state? Could it possibly be that the brain and the mind are separable and that the NDE “originates outside the human brain even if it is mediated through it” (p. 236), so that the brain can be thought of as something that transmits, rather than creates, experience? Are we, perhaps, being led to admit that the NDE is real evidence for that of which it is prima facie evidence—that is, the existence of the human soul and its survival of physical death? Or is it the case that “we should just accept and value these experiences for what they are, experiences which are enormously meaningful and powerful to those who have them” (p. 266), but which have no ultimate meaning?

There is mention of the relevance of parapsychological data to the question of survival, but it is very scrappily treated (and, please, it is “Ganzfeld,” not “Gansfield” on page 255). Here, the book seems to tail off. “We do not like to believe that an experience which makes a powerful emotional impact might be essentially meaningless” (p. 266). True enough; and as we come to the end of this volume, we hope that its authors might give us some help towards discovering this meaning. But, just as the really important questions are being broached, we are left to answer them for ourselves rather than be told what Peter and Elizabeth Fenwick themselves think we ought to believe.

But perhaps that is exactly right. Fenwick has given unstintingly of his professional knowledge. He has shown us what questions he can ask, which ones he can answer, and which ones lie outside his professional expertise. If we want to go on from there and make up our own minds as to what the NDE “really” is, he has enabled us to do so without denying the data or their implications. And for that we are deeply grateful.

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