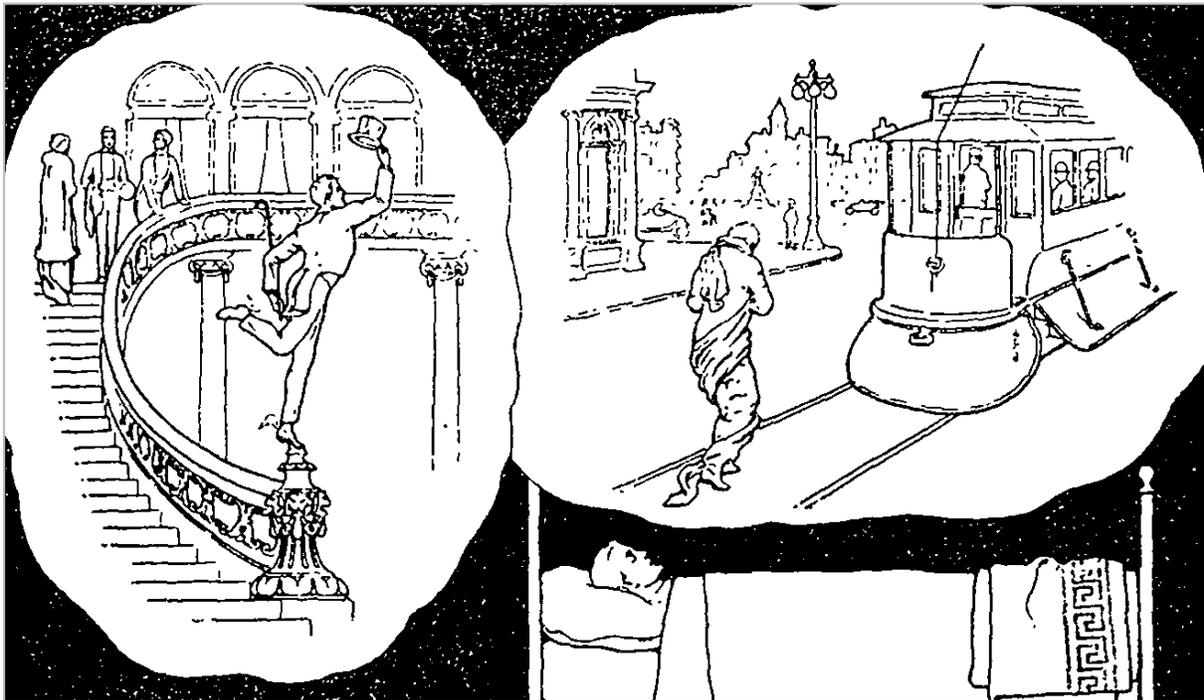


DREAMING AND ENCOUNTERS WITH THE ALTERNATE SELF (PART III)

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ARTIST'S RENDERING OF TWO DREAMSCAPES FROM SUBJECT'S NARRATIVE. DRAWING ON LEFT SHOWS SUBJECT POSING ON A PEDESTAL AT BOTTOM OF STAIRCASE; DRAWING ON RIGHT SHOWS SAME SUBJECT, WRAPPED IN BLANKET, ATTEMPTING TO BOARD A DEPARTING ELECTRIC TROLLEY CAR. NOTE FOLDED BLANKET PLACED AT FOOT OF SUBJECT'S BED. (FIG. 1)

*"Oh, hasten! – Oh, let us not linger!
Oh, fly! – Let us fly!— For we must.'
In terror she spoke, letting sink her
Wings until they trailed in the dust...I replied: 'This is nothing but
dreaming...'"*

—Edgar Allen Poe¹

Unstructured attempts to find meaning in personal recollections of dreams risk wandering into the weeds of subjective interpretations and guesswork according to early twentieth century psychologist, Lydiard Horton.² His Dream Analysis Record (DAR) published in 1913 was presented as a systematic approach for objectively analyzing dream narratives.³

DATA COLLECTION METHODS

The DAR contained the following empirically derived categories that reportedly could assess a dreamscape or mental performance space associated with REM sleep: (a) identities of the characters; (b) the characters' emotions, abilities and body language; (c) setting or location; (d) stage properties (such as unique make-up or costumes); and (e) situational variables (such as the weather). These categories were identified by reviewing DARs from 200 test subjects recruited by Horton. Subjects were asked to assign recollections of specific events in a dream to the appropriate category and then use free association within each category to link their waking life activities to these events.³

The DAR was based on the Dewey Decimal Classification employed by many librarians since 1876 to categorize and arrange book acquisitions on shelves.³⁻⁴ The case summary below illustrates how the DAR was used to explain a subject's recollection of watching himself levitate during a sleep-wake transition.⁵



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CASE SUMMARY

Dream Narrative: A male subject of unstated age and no reported history of disordered sleep described an experience of limited levitation. Subject recalled a sense of relaxation before going to bed; sleep latency was unremarkable. However, shortly before loss of consciousness, he described floating to the top of a staircase handrail in an elegant opera house. He remained on the handrail, balanced on one foot while dressed in a tuxedo (*see Fig 1*). Three, well-attired individuals faced the subject and conversed at the top of the staircase. Subject reported feelings of frustration. This dreamscape abruptly shifted to a largely deserted, city street corner where the subject attempted to board a departing trolley. A heavy blanket wrapped around the subject severely restricted his movements. Two seated passengers and a standing conductor were visible in the trolley. Across the street, an isolated character stood next to a street lamp. In the background, outlines of motor vehicles appeared against the city's skyline. Subject reported feelings of embarrassment.

Categorical Assessment and Inventory: The subject was the main character in the initial dreamscape. He acknowledged emotional distress associated with an inability to detach his foot from the handrail. The setting was indoors. Subject was appropriately dressed for the situation described. He recalled small wings attached to his feet that initially enabled him to levitate; people seemed to stare; their faces were indistinct.

In the second dreamscape, the subject was again the main character who acknowledged emotional distress. The setting was a public street-corner. Subject's attire was inconsistent with how passengers on the trolley were dressed. He recalled that no one interacted with him; again, faces of the minor characters lacked detail.

Association and Analysis: The subject linked his restricted movements to the presence of heavy clothing draped across his feet. Tactile sensations from the clothing apparently were elaborated into a storyline where the subject achieved only partial levitation during a state of hypnagogia or drowsiness. The same sensations evidently prevented him from reaching and boarding the trolley.

CONCLUSIONS

In keeping with Horton's parsimonious position on the analysis of dreams; personal, familial and social developments in this subject's life were not considered in the final analysis. More interpretive approaches would seek information about significant events in a subject's life before attempting to attribute meaning to a dream.

Lastly, because sleep medicine was in its infancy, the DAR was administered indiscriminately to subjects reporting ideations associated with sleep-onset REM periods (SOREMPs) as well as to subjects reporting NREM ideations associated with wake-stage N1 transitions known as hypnagogic hallucinations (HHs). It is worth noting that complex nocturnal visual hallucinations (CNVHs), which present in various neurologic disorders, are also associated with vivid imagery. Narratives collected following SOREMPs may not be comparable to narratives resulting from HHs or CNVHs due to differences in the etiology of these conditions.⁶ Clearly, further investigation of sleep related hallucinations are needed to reach a better understanding of floating and flying imagery associated with recollections of out-of-body experiences.

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