

Shrink Rap Radio #266 June 7th, 2011 "More on Hynogogia"

David Van Nuys, Ph.d. "Dr. Dave" interviews Jerry Trumbule

**Introduction:** Well, surprise everyone. I'm putting out this episode in just 2 days after the previous one. So you should think of it as a special treat and consequently I'll leave out my usual announcements, commentary, and reading of the email. Instead, we'll get right back to my conversation with my long-time friend, Jerry Trumbule about his adventures in the land of hynogogic phenomena.

**Dr. Dave:** Jerry Trumbule, welcome back to Shrink Rap Radio.

**Trumbule:** Hey, Dr. Dave, it's good to hear from you again.

**Dr. Dave:** Well, you are back, what can I say, you're back by great public demand and acclaim. (laughs)

**Trumbule:** (laughs) Okay.

**Dr. Dave:** Yeah, I've gotten a bunch of emails getting on my case saying, "bring back Jerry Trumbule" and . .

**Trumbule:** . . .wow

**Dr. Dave:** Yeah, and I note that you didn't get to finish all your thoughts on I guess what you came to call 'hynogogia'.

**Trumbule:** Yes. Indeed, in fact, listeners may recall that we started off talking about quantum consciousness.

**Dr. Dave:** Right.

**Trumbule:** And the Hammeroff theories and so on and so forth and then we kind of segued into dreaming and hynogogia, that mental state between wakefulness and dreaming and I had a bunch of thoughts because I have been practicing that for years and kind of wanted to espouse my particular version of that phenomenon and we never quite got around to it so perhaps this is the time, huh?

**Dr. Dave:** Yeah, yeah. Maybe you could start off just by very briefly recapping how you

go, how you personally go into that state in case we have some listeners who are just joining us for the first time and didn't hear the earlier interview and then you can just go wherever you want from there.

**Trumbule:** Yeah, in fact that's exactly my plan. I'd like to actually step back a little bit from dreaming and say a few things about sleep in general because I've noticed in the popular press, especially at the Huffington Post, that they are putting up all this stuff about sleep deprivation and most people aren't getting enough sleep and I think that's very true but they don't seem to have gotten down to what I consider to be some essentials. First of all, I wanted to mention a little experiment from years ago when I was living outdoors. When I left the University of Toronto, and came to Denver, there was a period of three months when we didn't have a house. We were living out of my van and traveling around the country trying to find a place where we were going to live.

**Dr. Dave:** That was before we talked about homeless people but . . .

**Trumbule:** . . .yeah, that's right . . .

**Dr. Dave:** . . . you might have fit (laughs)

**Trumbule:** Yeah, I was homeless in a sense and after a lot of going to California, and Oregon, and Colorado, we eventually picked Colorado. And we set ourselves up at a campground here locally and I from living outdoors, I learned that the sun is the critical element in that mixture because I couldn't stay awake after the sun went down. So about 9 o'clock at night, I would be so tired that I just had to go to sleep and then I would wake up when the sun came up. And that was my natural circadian rhythm taking control. And I realized that part of the problem is we have all these electric buzzers, I call them buzzers because they operate at 60 cycles and the lightbulb of course is the big one. I have radio, TV, Internet, cable, whatever you want to talk about, it's an electric buzzer that keeps us awake and makes us think that we have more important things to do than sleep. Some how, sleep gets relegated to a category of catch as catch can and we don't, we stay up til midnight, one o'clock in the morning thinking we're, it's really important that we watch the last episode of this TV series and actually, it's not important at all. And we're putting off a critically important sleep that controls so much of lives that we have no idea. I mean, for example, the immune system seems to be put at risk when we don't get enough sleep. I don't know that anybody's really tracked down why it works that way. At any rate, so as a nation, we're all sleep deprived. I used to notice that with my granddaughter was 10 years old. As soon as she would get into the car, after a couple of miles, she would fall asleep. And then she would sleep the whole time we were driving and I realized that she was at 10 years old, she was sleep deprived. And I think this is a bad state of affairs. And so I would admonish listeners to take their sleep time as critically important.

**Dr. Dave:** That's an . . .

**Trumbule:** . . . and . . .

**Dr. Dave:** . . . interesting perspective that I haven't heard articulated quite so forcefully as you've just put it and it also reminds me of an earlier interview on sleep where we talked about also being dark deprived, that it's hard to find true, deep, darkness in our country these days.

**Trumbule:** Exactly. I call it ready kilowatts stalks the land.

**Dr. Dave:** (laughs) Right.

**Trumbule:** Everywhere you go there's these street lights lighting everything up to keep crime at bay and I don't think it really works but it's just a reason for spending more money on electricity. So we got a bunch of sleep deprived people setting alarm clocks and that's another thing I want to honk on a little bit. Alarm clocks should be banned. I'll say more about that later but the part of sleep that doesn't get discussed in the these popular venues is the 90 minute sleep cycle; actually it's a cycle that runs 24 hours a day whether you're sleeping or not. And it becomes very important when your sleeping and I want to say a few words about that 90 minute cycle. Just to mention that when you're not asleep, approximately every 90 minutes, you'll feel a wave of drowsiness. In fact, I remember as a young man, when driving long distances, I could feel this 90 minute cycle affecting me and for males especially, apparently young males, you may experience what shall we say, an erection every 90 minutes. Do you remember that . . . ?

**Dr. Dave:** No, I do not remember that. (laughs)

**Trumbule:** Well, it's part of this 90 minute cycle. Anyway, its cycling along, whatever you're doing, your attentiveness or drowsiness waxes and wanes during this 90 minute cycle. Okay, now it's dark and it's time to go to sleep. If you learn to appreciate your own 90 minute cycle, you'll know when to go to bed. It's not an arbitrary time. In fact, you mentioned this concept of 'catching the wave'.

**Dr. Dave:** Yes. Yes.

**Trumbule:** To get in sync with your natural cycle and since we've been talking about this, I've been paying a lot more attention to my own habits. And I've discovered that my bedtime is 10:30.

**Dr. Dave:** Um hmm.

**Trumbule:** And I've started going to bed regularly at 10:30 and I've started keeping more accurate dream journal. And by the way, I don't mind waking up at night. Some people seem to believe that a good night's sleep is like 8 hours solid of non-waking. But it's actually 5 90 minute cycles. And EEG records show that the first cycle is mostly slow wave sleep then there's a little bit of REM sleep which I think we should just call dreamsleep. I know it's not a hundred percent correlation but let's just call it dreamsleep. And then there is a sleep wakefulness there and most people if they are videotaped while they're sleeping, it just shows people turning over .

**Dr. Dave:** Yeah.

**Trumbule:** Assuming a new position and then getting back into slow wave sleep again. Okay, then you are on your second one which would start at midnight, and that's also slow wave sleep predominating over REM sleep, maybe a little bit more REM sleep. But it's also just a 5 or 10 minute REM sleep period. The third one would start at 1:30 and the fourth one at 3:00 o'clock in the morning. Now they say, don't have a clock by your bed. Well, I think that's a mistake too cause I during these-- I've learned to actually wake up during these in between these cycles and I'd look at the clock and it's precisely 3 o'clock in the morning.

**Dr. Dave:** Yep.

**Trumbule:** Or 1:30, or whatever the cycle time is and I'm just going, okay, now I'm in for round three or round four. Well, by the time you get to round four, the percentage of REM sleep starts to increase dramatically and then round five, which for me starts at 4:30, is what I call the feature film.

**Dr. Dave:** (laughs) Right.

**Trumbule:** Because it's a 90 minute pretty much unbroken stint of REM sleep. And I look forward to that, oh boy, it's 4:30, time for the feature film. (laughs)

**Dr. Dave:** (laughs)

**Trumbule:** And then at 6:00, I wake up, I don't have an alarm clock, and because I've really satisfied my need for sleep and for dreaming, I'm fully refreshed and I just wake up automatically. Now, I know people have jobs and get penalized for showing up late, but probably waking up at 6:00 is good enough for most people unless they're farmers and have to get up at 4:00 in the morning or something. But I would highly recommend people try to wean themselves off of their alarm clock because I think interrupting a cycle is probably detrimental to your health. And whether or not it's slow wave or REM sleep, your not accumulating whatever it is that is provided by sleep.

**Dr. Dave:** . . . I've always been amazed by our internal clock and the fact that I mostly don't need an alarm clock even when I've needed to get up for an appointment or something at a certain time and I haven't always been brave enough to forgo the alarm clock but all I have to do is know I have to wake up at a certain time and some part of my brain is tracking that and I just seem to wake up at the appointed time.

**Trumbule:** Yeah, in fact, if I ever set an alarm clock which I do occasionally, I invariably I wake up a half an hour before the alarm clock does, , ,

**Dr. Dave:** . . . right . . .

**Trumbule:** . . . in anticipation of being awakened by the alarm clock. So anyway, so now we've established that you need 7 1/2 hours not 8 or -- and this idea that some people get by with 6 or even less, I think that's totally bogus. Edison is said to be one of these people. But we know that Edison was a cokehead. He was doing cocaine.

**Dr. Dave:** Really.

**Trumbule:** Yeah. Just Google that . . .

**Dr. Dave:** . . .(laughs)

**Trumbule:** . . . Edison on cocaine . . .

**Dr. Dave:** (laughs some more)

**Trumbule:** He couldn't sleep. And then he supposedly took all these naps during the day, he was constantly nodding out . . .(with laughs)

**Dr. Dave:** (laughs some more)

**Trumbule:** And at any rate, there have been a lot of people like that. They say, oh, he only needs 4 hours of sleep and I don't think that's true. At any rate, another concept that I want to mention is this idea of a reservoir or a pool. We know that we need sleep and we know that we need dream sleep although I think that's a contradiction and I'll get to that in a minute. But so we have to constantly replenish these pools. So we don't know why. I remember when I first started studying sleep, back in the '60's, I was amazed that nothing was known. Here we are, 1/3 of our day, 24 hours, is spent in this state that we hardly know anything about. And if you think about sleep from an evolutionary point of view, most organisms have a period of quietude or whatever you want to call it where they kind of turn off for awhile. And then in mammals it gets more regularized and so you got to believe given that it takes up 1/3 of our

time, that there is something critically important going on there. And we do know that if people are chronically sleep deprived, they start showing symptoms. In fact, there's been these radio DJs that are going to stay up all week or something around the clock. They eventually become psychotic.

**Dr. Dave:** (laughs)

**Trumbule:** . . .and . . .

**Dr. Dave:** . . .if they didn't start out that way . . .

**Trumbule:** . . .yeah, if they weren't already. But I actually had an experience when I was very young in my teens where I was getting maybe 3 or 4 hours of sleep a night because my girlfriend was visiting and she was in Virginia and I got off at work at 9 o'clock at night and then drove to her place and made out or whatever we were doing . . .

**Dr. Dave:** (laughs)

**Trumbule:** . . .and then I had to drive back and it was usually about 2, 3 o'clock in the morning then I had to get up and go back to work. And that went on for a number of days and I experienced something that I had read about now but at the time it was totally bizarre. I was driving along on a back road and I didn't fall asleep. Suddenly, what I was seeing turned into a completely different scene. It was a jungle scene and I knew I was driving and I knew enough to slowly put on the brakes and stop but what I was seeing was an intrusion of a dream that was forcing me, against my will, to get some of this dream time. That is where the psychosis comes in. I think if people are REM deprived over long periods of time, they start having intrusive dreams. That there is such a demand for this reservoir of dreamsleep that it the body forces us into it if we don't get it. Now, I don't know why or how or what that need is and I don't really have a lot to say about that. It's obviously chemical in nature and so on and so forth. I also would like to propose that we settle this issue of REM vs dream. There are reports of dreams occurring in non-REM sleep and I'm sure that's possibly true. But I think we should just call it dream time. I don't even think it's a form of sleep because our brain is fully awake, our body is paralyzed, literally, and we're in this dream state but I don't think it's sleep. How could it be sleep if the brain is fully awake? At any rate, starting with that as a . . .

**Dr. Dave:** . . . some people have called it paradoxical sleep in fact.

**Trumbule:** Yeah, that fits in with my idea that . . .

**Dr. Dave:** Yeah.

**Trumbule:** It's something else . . .

**Dr. Dave:** . . .yeah, yeah.

**Trumbule:** And so now, let's switch to a conversation about getting into that state without going to sleep and that's then called waking induced lucid dreaming and the other form is sleep induced lucid dreaming. The name lucid dreaming is as good as any as far as I'm concerned and refers to the fact that you are having a dream and in the dream, you are aware that you are dreaming. And wonderful things can result if you get to this state. So what I'd like to do is hopefully, briefly, describe what I do to do to get into this state. By the way, since we started talking about this stuff, I've been online quite a bit researching sleep and lucid dreaming and everything. I had no idea that there was such a huge body of literature out there and I would recommend that any beginner just Google lucid dreaming and start working your way through it and you'll find YouTube movies, and all kinds of resources that you can check out to inform yourself. Some of them are kind of crazy, some of them are obviously trying to sell you something; you don't need a DVD or CD or a special thing to put over your eyes and pulsate, you don't need any of that stuff. What you need is some time that you can set aside to try this. You can do it at night when you're in bed but it's so hard because you are so used to falling right into your first slow wave cycle although I also contend that and people --I think there's certainly no agreement about this -- but I contend that every sleep session starts out with a bit of REM sleep. I notice this in rats but by the way when I used to do a lot of EEG recording with rats. When they first went to sleep, they went into a little tiny REM period. And I noticed that in myself. At any rate, so doing it at night is possible but difficult. What I recommend is -- and this is great if you are retired, it's harder to do if you're working fulltime or if you have demand of a family-- but set aside a time in the afternoon where you can experiment with this and where you are not necessarily so sleep deprived that you're going to fall right to sleep. Also, don't get in your bed. I use my recliner and there is a couple of reasons for that. For one, getting in bed is like preparation for doing your normal going into slow wave sleep whereas getting into your recliner, kind of prevents that in some ways because you can't assume the position you normally get into whatever it is, lying on your side, on your back. Most people I guess sleep on their side. I read one thing that said men should sleep on their right side and women should sleep on their left side.

**Dr. Dave:** Hum.

**Trumbule:** And it has to do with some form of yoga, I don't know anything about it. I've been told that sleeping on your right side is best because it doesn't compress your heart.

**Dr. Dave:** That's interesting because I've noticed that to fall asleep, typically I seem to have to sleep on my right side. But I'm flying on the airplane, I need to lean against the right hand

window and sleep fine.

**Trumbule:** Uh hmm.

**Dr. Dave:** Left hand window doesn't work at all.

**Trumbule:** Yeah. Well, I think that's a combination of things. What we have learned to do as well as maybe perhaps some natural inclination to avoid the idea that if you're sleeping on your left side, you're kind of squeezing your heart chamber down a little bit. That seems to be reasonable to me. Anyway, so if you're in your recliner, you're not able to get into that position. Okay, now so you're in your recliner, its quiet, it should be fairly dark in the room, doesn't have to be completely black out but fairly dark, and then comes the hard part. And that is paying attention. I believe the attention mechanism whatever the heck that is, is critically important in all of this and in fact, one of your previous doctor's was talking about this, what was his name? Raymond I think. Is that right?

**Dr. Dave:** It's not ringing a bell but I know its a thread that run . . .

**Trumbule:** . . .I'm sorry . . .

**Dr. Dave:** . . . the number of the interviews and it was what. . .

**Trumbule:** . . .yeah . . .

**Dr. Dave:** . . .my doctoral dissertation was about and I was looking at my doctoral dissertation just before getting on with you to see if there was anything to bring in here.

**Trumbule:** Yeah, this guy's Rubin Naiman.

**Dr. Dave:** Oh yeah. Yeah, that was the sleep guy.

**Trumbule:** Yeah, and it was number 256. I would recommend people go back and listen to that. Although he kind of doesn't really lock in on the 90 minute cycle idea. You mention it and he kind of dismisses it. I think it's critically important. Anyway, he had some very interesting ideas and with regard to categories and attention mechanism. Now you're in your recliner, you've closed your eyes but you have not stopped looking and that's a critical part. You're still looking into the void. What do you see? Well, what I see is just a homogenous field kind of a velvety purple with maybe some green in it. And you just have to keep looking at that. And it's boring. There is nothing going on. So you'd think. So you're looking at that. Inevitably our mind will wander, the monkey brain will start chattering and you'll start thinking about other things and then you have to bring yourself back to looking into the void.

Usually when you close your eyes, you're used to turning off your looking mechanism whatever that is and in fact, if you open the eyelids of a sleeping person, you see their eyes are crossed which is kind of strange but at any rate, don't cross your eyes. Keep looking, looking, looking, looking; try to be sensitive to any subtle changes that you might see. You might see a swirling, you might see a different color, maybe it'll slowly change into more dark green or more towards red or whatever. You may also see a flash of light occasionally, a little pin point. Now, what I believe is that you're in a condition where you are looking for visual input and you're not getting any. Something similar happened to me one time when I was in an experimental chamber working on setting up some experiments and there was loud, white noise in the chamber. And what I discovered was that within minutes, I would start hearing voices. And I think this is analogous because I think you're expecting visual input, you're not getting any and your brain in the absence of input, it doesn't seem to like that state so it starts inventing its own. And I think that's what will ease you into this lucid dreaming state. So anyway, you're looking around, nothing happening, maybe you start to see swirling. Now at that point, it may help to imagine what it is that you want to see. I've had the most success imaging a particular person's face. We already know that there are areas of the brain devoted to face recognition and faces are very important to us. So an easy way to start is to try to call up a particular person's face. You can also try to call up anything else; a car, a toaster. Yesterday I was trying to call up a piece of bread, just to experiment. I thought of toaster and I thought, no that's too commonplace I think I'll try a piece of bread. (laughs)

**Dr. Dave:** (laughs)

**Trumbule:** It may be more difficult so I suggest starting out with a face. Okay, so there's still swirling around; perhaps by now you're starting to see something more than the homogenous state. You can see distinct patterns of some kind swirling about and then perhaps an indistinct face. Now the strange thing about it is that every time I do a face, I'm always slightly surprised that when the face does appear, it's not like a mug shot. It's not looking right at me. It might be looking at the opposite direction. It might be the back of the person's head. It might be something; a medium shot rather than a close-up or whatever but eventually, in my case, I'm usually able to conjure that person up. And as I begin to recognize their face, it's suddenly snaps into clarity. And I mean clarity, I'm not talking about fuzzy, I'm talking about sharp focus.

**Dr. Dave:** Wow.

**Trumbule:** And there they are. And there *you* are. And at first and you said something about this in the past about being so surprised that it wakes you up.

**Dr. Dave:** Yeah. That's been my pitfall.

**Trumbule:** And I've seen that in the literature by the way. People talk about that. And so maybe that will jar you out of your reverie or maybe not but you want to keep trying to stick with it. And that's the other thing; persistence pays off. And give it more than 5 minutes. Give it a half and hour at least. And if you don't fall asleep, and if you don't have any hypnagogic affect, well, give up and try it again and once again, people who write about this, suggests that persistence is the biggest part of all of it. And I happen to agree. I kind of fell into it accidentally but it doesn't work every time for me. I have another theory and that back to the pool reservoir of REM sleep vs pool of slow wave sleep, it's seems to --and I've tried to verify this -- once I started getting really regular, good sleep, it seemed to be harder to get into the lucid dreaming state from wakefulness. And I thought, that's interesting, maybe the REM reservoir is completely filled up and it doesn't need anymore and it's harder for me to get there. After a few days of testing that theory, I had an experience where I came back from a film shoot late at night and when I got in bed and started my little reverie, boy, the whole scene was blowing up. I mean, it wasn't some homogenous screen, it was just all kinds of stuff happening. Also I think I've mentioned in the past that whatever drugs you may have taken including caffeine and nicotine as well as THC or anything else, for me, makes a difference in what I see when I close my eyes. If that scene could be externalized onto a little LCD, it would be like a fantastic drug test. Op, he's been smoking pot (laughs) . .

**Dr. Dave:** (laughs)

**Trumbule:** Oh, too much caffeine, you're not going to, and especially alcohol. Back when I used to drink alcohol before going to bed, I inevitably would see black and white --what shall I call them? -- shooters, streams, flashes, lightening, practically like lightening going back and forth. And also I want to talk about briefly about doing this when you're sick and when you have a fever. I've tried that recently and strangely enough when I had a fever, every time I tried to go into this state, I saw this little square logo.

**Dr. Dave:** Oh no. (laughs)

**Trumbule:** I think I mentioned it before. It was kind of like the (laughs) Shrink Rap Radio logo.

**Dr. Dave:** (laughs) Oh, good, good!

**Trumbule:** But it wasn't really that. It was like a little sign. It had symbols on it, I couldn't tell what they meant but it was like, oh, you're sick. Don't go any further, you don't need to try . . .

**Dr. Dave:** . . . ah, ha . .

**Trumbule:** . . . when there's --. And I don't know that was a -- it happened 2 or 3 times and it was always this same little symbol. But I can't imagine that's it's really something very real. Anyway, back to your experiment. Let's say you're now seeing faces. You thought about your old girlfriend and there she is in person and so you should imagine you are talking to her. And what do you know, she will talk back. And she will start saying things that you may not want to hear or maybe you do want to hear, I don't know. And then if you're get into it, the scene will enlarge and it'll take up your whole visual field and you'll be in the dream. What happens from thereon-- it can go a number of different ways. I notice in the literature that people talk about lucid dreaming as a learned skill. And that you have to keep practicing and you get better and better at it and you learn something. Just yesterday, I came up with the idea that it's not really any different than from normal dreaming. It's just that in a normal dream, you're conditioned to be a silent observer. You're having a dream, it's not a lucid dream, you're just having a regular dream. And all kinds of stuff is happening. You're in the dream to the extent that you're observing it, but you're not trying to control it, you're not exerting yourself, maybe you're not even talking, you're not saying anything, you're just a silent observer. And I think that's the normal situation for dreaming. What I think is different about lucid dreaming is that you've made a conscious decision to stop being silent and to express yourself, to say something or to express a desire. I'd like to fly and then you start flying. In the past maybe you've had episodes of flying in a dream, but you never said, I want to fly, you just found yourself flying accidentally.

**Dr. Dave:** Yeah, you might say that in one case that the dream is having you and in the other one, where you are a more active participant, you're having the dream.

**Trumbule:** Exactly. That's a good way to put it. I like that. So normally, you're just a passive--okay, the dream is having you and all kinds of weird stuff is happening and you're going like wow, I mean you're not even reflecting on it, it's just going on. In a lucid dream, you are consciously deciding to do this or that, go here or there, change the scene. I've had a situation I think I mentioned before where some people were talking and I was viewing them from above and it was kind of like a film director and I was going, well, this is totally boring so I said cut!

**Dr. Dave:** (laughs)

**Trumbule:** And they all stopped and looked up and I said, you know, this is a boring conversation. Could we liven it up by talking about and I mentioned something else, and they said okay. And they went on with their conversation, now they were discussing something I found interesting.

**Dr. Dave:** Now, let me check in with you here because what I've read about this would suggest that yes you can have some control and at the same time, there are autonomous things

that are going on and unfolding that you didn't necessarily control. So, for example, you gave the example of your girlfriend who might come up in this lucid dream might say things that you are interested in hearing or might say things that you didn't want to hear.

**Trumbule:** That's an amazing part of all of this. Two aspects of it: one the other players seem to have wills of their own. They're not robots. They're not just waiting for your instructions. They're going along doing their thing. And saying whatever the hell they want to say whether you like it or not. (laughs)

**Dr. Dave:** (laughs)

**Trumbule:** Now you can say or might scream out cut!--I don't want to see that, I don't want to go there, I want to be in a different place, you might leave that scene and go to another. But I'm always amazed at how complete the other individuals are. They have personalities, they maybe like they used to be, they may be different. I've spent a lot of time communicating with dead people and often they're dead. I remember my father used to come back in my dreams and I would say, hey Dad, how you doin'. And he seemed weird and kind of I don't know how to describe it, he just, he wasn't his old self. And then I would say to myself, 'oh, that's right, you're dead. I can't expect to much out of you because you're dead.' Still he wasn't a zombie but and he would talk but he was always a little bit less lively than he had been in real life. And by the way, I haven't really spent a lot of time asking these people about the future or trying to test who they actually were. If they looked liked the person I just assumed that they were the person. I have had people come back and be dead, people come back and be partly rotted away. And that's kind of hard to take.

**Dr. Dave:** Yeah, that sounds scary.

**Trumbule:** It is. Some of this can be scary and I should mention my good friend and partner who years ago I was telling her all about this and 'god, this is really exciting' and she's into Native American shamanism and there's a lot of similar stuff there and she said, oh, yeah, I'll try it. And so I explained to her what I'm talking about now. The next day she came back and said, "I'm never going to do that again." And I said, 'why?' She said "oh, it was way too scary." I said 'what happened?' She said, "well, I started in just like you said." And then she said, "it was like I was being projected; it wasn't like I was flying, it was like I was zooming in the dark." And by the way, other people report this as a transitional state; a feeling of falling, or if you're feeling rapid acceleration. Some people report a vibration that vibrates their whole body. But she said "once I went into it, it was so scary because I didn't think I could come back. And I immediately woke up and I don't want to try that anymore."

**Dr. Dave:** Um humm

**Trumbule:** And I said, well you're just inside your head, you're not --but then I thought well, you know, maybe this could be a doorway into madness. Who was to say? Certainly not me. I kind of use it as a playful adventure. Although one time I did --I was in a lucid dream and I said, I wonder if I can conjure up something frightening. And instantaneously almost before I finished that thought, something frightening was about 2 inches from my face and it scared the hell out of me. It caused me to have a visceral reaction so much that it woke me up. And I said, well I guess I don't need to try that anymore.

**Dr. Dave:** Yeah, really.

**Trumbule:** Or you could try some versions of that. Things that may have been bothering you or you don't have to want to see a monster in your face but there may be some limits to this for some people. And by the way I should reinforce the fact that I am not an expert by any means. I'm merely a practitioner and I just telling you about my personal experiences and I am not even going so far as to recommend this to everyone. I do think it's a lot of fun and I have a lot of fun with it. And for my like I said, its a feature film deal because even though I am talking now about the waking while waking lucid dream. The sleep induced lucid dream usually the feature film I've kind of transitioned into lucid dreaming almost all the time. I thought I'm having my normal 90 minute feature film. I'm in there trying to exert some control over it. Sometimes I just let it go. I don't need, I don't feel a need to control it. Sometimes it --how did you put it dream is having me --

**Dr. Dave:** Yeah.

**Trumbule:** And so my having the dream and I just let it go at that. But I've also discovered that's it's pretty easy to transition. I don't do the looking at my hands thing, or looking at the ground. A lot of people have these different methodologies that they recommend for getting into the state. I can't say that I'm always aware that I'm dreaming when I'm dreaming but when I want to become aware, it doesn't seem to involve any special trick for me. So a lot of times I'll have a lucid dream without any special desire to go into a lucid dream. I'll just be dreaming and Ill just say, I think I want to fly or I want to go over here. In fact, you and I both explored Second Life.

**Dr. Dave:** Right. The online virtual reality game.

**Trumbule:** Yeah. And truthfully, I think that's really close to the dream state. You can fly, you can control your environment, you can jump from here to there, there are other weird people roaming around doing weird things, you can be as weird as you want . . .

**Dr. Dave:** . . . yeah . . .

**Trumbule:** . . .you can change your avatar to anything you want. So it's kind of similar to that in a way. Although I don't think it involves some kind of REM state. I just think it's interesting that its kind of like a online version of a lucid dream. At any rate, back to the practical experience and now you're wandering around in your dream sometimes just let it go, it unfolds on its own. Sometimes your intent on doing something; as people in the literature see all kinds of accounts of people flying and changing the whole scene; now I want to be on Mars, or now I want to be in Africa or whatever. And you can try those things out. When I'm in a dream, I'm not very radical. It seems like things I try out are not really radically experimental. I just don't seem to be drawn to that. I'm more interested in talking to people, listening to what they have to say, and what they're up to and I've had a number of these experiences. I don't know how useful it is to recount some of them but let's see, I've got some, I do keep a dream log and . . .

**Dr. Dave:** . . .so are you contrasting the ones that occur when you're in dreamsleep to the ones that are in the afternoon in your easy chair, that you are more experimental, more adventurous in the easy chair, than the sleep time dreams?

**Trumbule:** I can't say that I've really noticed a difference.

**Dr. Dave:** Oh, okay.

**Trumbule:** In fact, now that you've mentioned that, maybe I should set an agenda for the wakeful transition into, maybe I should say okay, today I'm going to be exploring different body shapes for myself, I'm going to be really huge, I'm going to be a giant, stalking across the land.

**Dr. Dave:** Well, I keep wondering about healing and what might be accomplished in terms of working on one's body, one's illnesses, if it were possible to go in very vividly experience the internal world and have that somehow impact, if you were able to visualize an area of concern in your body and somehow try to effect those processes.

**Trumbule:** Yeah. in fact it brings me to another point. Your Waggoner . . .

**Dr. Dave:** . . .yes . . .

**Trumbule:** . . . Lucid Dreaming number 189. He goes into his description of five stages because he's actually on a mission to try to uncover the inner self the psyche or whatever you want to call it. I haven't really gone that far into it, in fact his five stages I guess I would say I'm still on stage one. I hate to admit it but I'm still playing around in the sandbox.

**Dr. Dave:** Yeah, yeah.

**Trumbule:** I'm using it for entertainment and fun. Now once again, I went back and listened to that one I was going, like maybe I'm just lazy and I should start going to stage two and three and four. He eventually gets to the white light which he relates to the Buddhist practices. And I don't know if I don't have any desire to go there or maybe there's something in there that I don't want to find out or what it is but I've been disinclined to try to use it as the so-called door to the unconscious.

**Dr. Dave:** Or the door to enlightenment or spiritual . . .

**Trumbule:** . . .yeah . .

**Dr. Dave:** . . .or advancement

**Trumbule:** Yeah, because I'm not sure I believe in spiritual advancement.

**Dr. Dave:** Well, yeah.

**Trumbule:** (laughs) But I don't know, maybe I'm just lazy. And listening to his discussion gave me a little incentive to maybe to try to check some of that out further. How to move on to stage two, I even didn't write down the stages so I can't mention them but he does see it as making progress towards true enlightenment.

**Dr. Dave:** Yeah, in the Zen literature, they talk about because what you're talking about sounds a lot like meditation, when you talk about fixing your attention on something and in this case you're fixing your attention on the visual channel which is probably different than a lot of meditation except there's these meditations where people focus on a mandala or some other kind of visual pattern so I actually that's in there too. In the Japanese Zen tradition, as I understand it, they teach people that hey, you're going to have visions, your going to have these intrusive images are going to come in but they do look at them as intrusions rather than in other words, their message would be, don't get distracted by the sandbox. That's not where the real payoff is. You need to go beyond the sandbox and not get distracted by that. So that is one view, that's another view.

**Trumbule:** Yeah, and I can relate to that it's just that I haven't chosen to go down that path. And speaking of intrusions, there is something else I wanted to mention. In my own experience again, let's go back to where I'm starting to see images in the swirling, velvet cave that I'm staring into: occasionally I'll get a full blown image from some place else that just takes over. It's kind of like picture in picture on the TV, you know?

**Dr. Dave:** Yeah.

**Trumbule:** I remember recently I had one where suddenly there was a scene, a detailed, crisp scene. I was looking down from above and a child was playing on a picnic blanket. And I remember being totally amazed at my brain's ability to conjure up a scene that was complete at every detail down to the pattern on the blanket, the blades of grass, the leaves on the trees, everything was complete and finished and in sharp focus. Well, sometimes that happens to me when I'm in the midst of this swirling image. I think those are coming from two different places in the brain. Normally, visual input from the eyes and by the way, I would encourage listeners to take a look at the brain online that shows the eyeballs because the eyeballs are made out of brain material and they are just these stalks coming out of the brain with an eyeball at the end of the stalk.

**Dr. Dave:** Right.

**Trumbule:** And it's so weird looking you're going like, okay I see how that works.

**Dr. Dave:** (laughs)

**Trumbule:** This is a direct connection . . .

**Dr. Dave:** . . . yeah . . .

**Trumbule:** . . .from the outside world visually into my brain but the path of that and once again Hammeroff talks about this back in his quantum consciousness, there are a number of branches in the path. Part of it goes back to the visual cortex which is in the back of the brain but other parts go to other parts of the brain first. And the visual cortex takes a couple of milliseconds to actually get online. Sometimes I think these images are coming from my quote minds eye unquote rather than from my visual input from the cave. And they seem to be able to intrude, I seem to be able to reject them and make them go away or sometimes they take over completely. And it has nothing to do with what I was trying to pull up in my hynogic state. It just like boom, here's a whole new thing that you're looking at . . .

**Dr. Dave:** . . .yeah . . .

**Trumbule:** . . .something else is going on . . .

**Dr. Dave:** . . . yeah, so of course other people have interpreted this in a different way. Your relating it to your brain into a naturalistic understanding of the world. Other people who've taken it more literally, right and said, wow, these are beings from another dimension who I'm somehow contacting and experiencing. I wanted to throw into our discussion and I don't know if I have ever mentioned them before: Emanuel Swedenborg -- a Swedish --I looked

him up on Wikipedia just before our conversation here -- got turned on to him by a book written by Wilson Van Dusen years ago who was kind of a Swedenborgian. And Emmanuel Swedenborg was--he lived from 1688 to 1772 and he's described as a Swedish scientist, philosopher, theologian, and Christian mystic and he also cultivated this ability as I understand it to enter the hypnogogic world and there he discovered a hierarchy of beings that seem to range all the way from angels and divine presences at the top to demonic ones way down at the bottom. And so he developed a whole theology based on that. Then I'm also remembering John Lilly the dolphin guy . . .

**Trumbule:** . . .oh yeah oh yeah . .

**Dr. Dave:** . . .and people who are not as old as we are may not remember the amazing John Lilly who ventured out so far as he was very much involved in experimenting with sensory deprivation and . . .

**Trumbule:** . . . right . .

**Dr. Dave:** . . . he developed the sensory deprivation tank where he was floating in body temperature water . . .

**Trumbule:** . . . right . . .

**Dr. Dave:** . . .in complete darkness and then he took another step further and started to taking LSD with it . . .

**Trumbule:** . . .right . . .

**Dr. Dave:** . . . and he *also* experienced then beings coming in from other dimensions and so on and then there are the people who are channels. Somehow this must be related to the phenomenon of channeling. And people who have whole books that they've produced that they claim came from some autonomous other source so to me I find it equally amazing whether in fact it's from some other dimensions spiritual or otherwise or its from our brain and there are these autonomous personalities swirling around somewhere in our brain. Either one is pretty mind blowing.

**Trumbule:** Yeah, I totally agree and harkening back to that sensory deprivation, I think that's exactly what this is that you're depriving yourself of visual input while you're awake and your brain starts to invent stuff. And that's the lucid dream. You're not immersed in body temperature water or anything like that but in fact, I wonder if they still have those tanks, I'd be interested in getting one.

**Dr. Dave:** Well, I'll bet there out there somewhere, you'd probably find a used one. (laughs)

**Trumbule:** (laughs) Right, Craigslist!

**Dr. Dave:** I got in one. I have to say that I did have a chance to plunk down some money, there were places that you could go and for 25 bucks or 50 or 100, I don't remember how much it was. You could have an hour experience and I did but I didn't have any fantastic experience and that sort of brings me to another point is that I suspect that this is like other human traits and abilities, this is maybe normally distributed. That some people are going to have a much more easy access to these sorts of altered states than other people will. What do you think about that?

**Trumbule:** I think its probably true. Most everything else distributes on a normal curve so why not this?

**Dr. Dave:** Yeah, yeah.

**Trumbule:** And it may also be related to your past experiences with psychedelics and psychotropic drugs of some kind or another.

**Dr. Dave:** Yeah, and also your cultural experience. If you grew up in a tribal situation where for example, trance is a regular thing used by various ceremonial practices, then I would maybe everyone in that society or most people, are able to access that. We grow up in a society in which the inner world tends to be minimized.

**Trumbule:** Exactly. In fact the Australian aborigines obviously spend a lot of dream time, they call it dream time and they do all kinds of amazing things and including out of body travel. Which I think is part of the same thing. In fact, who was it, oh yeah, I did buy a book, Thomas Yuschak "Advanced Lucid Dreaming: The Power of Supplements". I have to give credit to John Connaway who sent me an email regarding this the whole idea because I made the statement that I didn't know of any drugs that enhanced dreaming. It seems like all normal regular drugs depressed dreaming. And so John turned me on to this whole new idea of taking supplements, natural supplements and for those so inclined, how to induce high-level lucid dreams and out of body experiences, I would recommend his book. I have skimmed it, I haven't gone fully into it. But that didn't stop me from ordering one of these supplements called "Lucid Dreamer". And once again, listeners can Google it and find it. So I set off an order and got some of this stuff. And of course I didn't read the directions . . . (laughs)

**Dr. Dave:** (laughs) yes, right . .

**Trumbule:** . . .which I should have done. But I must say, it had a definite effect. I took one before I went to bed and then that night, I woke up at one of my regular times and I said, wow, that really made a difference. I'm going to have to remember this and I was going like, yeah, it really made a difference. So when I woke up then finally in the morning, I was going like, wow, it really made a difference. What was the difference?

**Dr. Dave:** (laughs)

**Trumbule:** I don't remember. (laughs)

**Dr. Dave:** Right. And I should mention John Connaway is one of our listeners. You didn't quite spell that out.

**Trumbule:** Oh no and in fact he --I hate it when this happens, it always happens to me. You think you're into something new and then you discover its not new at all and other people know a lot more than you do about it and been practicing doing all this stuff . And John was nice enough to relate some of his experiences and what I learned by the way when I did go back and read the instructions, was that I should have taken that pill between cycle 4 and 5. That it kind of jazzes you up a little bit.

**Dr. Dave:** Uhhh? That's an interesting idea.

**Trumbule:** Yeah to go into --in my own experience, this is kind of poor man's version. Sometimes if I wake up after cycle 4, it's 4:30 in the morning and I feel like I can't get back to sleep, so I'll just get up and then I inevitably have a cup of coffee and sit down at the computer and then about an hour and a half later, I feel this wave of drowsiness come over me and I go back to sleep and now I have caffeinated dreams and they're kind of fun too because it's like dreaming on coffee.

**Dr. Dave:** Yeah, yeah. Now, you know, we're about to run out of time here and mention one listener and I heard from one or two who sort of call to mind Jung and his thoughts on what he called active imagination.

**Trumbule:** Yeah, what's that about?

**Dr. Dave:** Well, I hadn't made that link but I guess it really does fit and I went to as always I went to Wikipedia . . .

**Trumbule:** . . . right . . .

**Dr. Dave:** . . .and I'll just read a little bit from there: 'active imagination is a concept

developed by Carl Jung between 1913 and 1916. It's a meditation technique wherein the contents of one's own unconscious are translated into images, narrative or personified into separate entities. It can serve as a bridge between the conscious ego and the unconscious and includes working with dreams and the creative self via images, imagination, or fantasy. Jung linked active imagination with the process of alchemy and that both strive for oneness and the interrelatedness from a set of fragmented and disassociated parts.' So so far that kind of fits with everything that we've been saying. It goes on to say 'key to the process of active imagination is the goal of exerting as little influence as possible'. Now that's the difference I suppose.

**Trumbule:** Uh um

**Dr. Dave:** 'Exerting as little influence as possible on mental images as they unfold. For example, for a person recording a spoken visualization of the scene or object from a dream, Jung's approach would ask the practitioner to observe the scene, watch for changes and report them rather than to consciously fill the scene with one's desired changes'.

**Trumbule:** Hmm.

**Dr. Dave:** 'One would then respond genuinely to these changes and report any further changes in the scene. This approach is meant to ensure that the unconscious contents express themselves without overbearing influence from the conscious mind'.

**Trumbule:** Hmm.

**Dr. Dave:** 'At the same time, however, Jung was insistent of some form of participation in active imagination was essential. Quote 'you yourself must enter into the process with your personal reactions as if the drama being enacted before your eyes were real' close quote.

**Trumbule:** Hmm.

**Dr. Dave:** So and it goes on from there . . .

**Trumbule:** . . . hum hmm . .

**Dr. Dave:** . . . people can go to Wikipedia to read more. That it seems accurate based on what I read and of Jung and so on. So it's a good summary.

**Trumbule:** Yeah. Very interesting. In fact I realize you can spend a lifetime studying and researching this whole thing on the Internet and Wikipedia is always the -- which by the way, Wikipedia is the largest endeavor ever undertaken by mankind. It is involved more people

than the building of the pyramids and so on and so forth. But there is so much more to be discussed. I think we've pretty much covered the basics. I did want to mention one thing and that's sleep paralysis. During normal sleep, when you go into a dream, its like there is a switch in the midbrain in some place that gets thrown which paralyzes your body. Now, I think this is probably a protection to keep you from getting up and sleepwalking. And some people have a leaky switch or a leaky valve there . . .

**Dr. Dave:** . . .right . .

**Trumbule:** . . . and so they walk around and stuff. But when you experience this in one of your sessions, it can be kind of scary. One time I was in the recliner and I came out of the dream and couldn't move. And I was going oh, no, I've become a paralyzed person by accident. And it just lasted for maybe 30 seconds . . .

**Dr. Dave:** . . .yeah . .

**Trumbule:** . . . and then I was able to move. But more recently, I had a regular dream and I got into lucid dreaming and then I don't know what it was in the dream that woke me up but I tried to sit up and I was more or less paralyzed although I was finally able to actually sit up in bed but then I fell over. I was going like, oh no, I'm paralyzed and I tried again and was like, it's kind of like in a dream when you're trying to run and you can't really run, it's real slow motion . . .

**Dr. Dave:** . . .yeah . . .

**Trumbule:** . . .kind of stuff. It's kind of like that. After the second little episode there then I fully woke up and I wasn't paralyzed and I was very happy about that. It can be scary if you get into that. And I'm just relating that so that people wont be surprised if that happens. It's not permanent. Don't worry about it.

**Dr. Dave:** Okay. Well, we probably need to wrap it up at this point. This is going to be an ongoing conversation I can tell. (laughs)

**Trumbule:** (laughs) Well, listen, it's always great talking with you Dave and I really, really, admire what you're doing with Shrink Rap Radio. It certainly has keep me in touch with psychology and long time listeners will may recall that I was once working on my Ph.d. and I kind of got blackballed and all that kind of stuff. It serves as my portal into the modern world of psychology. Some of your people that you interview are so interesting that I buy the book or I go and do more research, so I have to commend you on this vast undertaking I mean, what number are you up to by now? 280 something?

**Dr. Dave:** Not quite that high but if you add the Wise Counsel, it's well over 300.

**Trumbule:** Yeah, and I do buy the way now I always check out Wise Counsel as well, It's a little bit straighter in some regards.

**Dr. Dave:** Yeah, deliberately.

**Trumbule:** Nonetheless, it's always very informative and I have to thank you for that, it's been great being a --I've listened to every single one.

**Dr. Dave:** Well, I thank you for that certainly and that really helps to support my whole journey and I am so pleased to be able to share you and our friendship and the way that it enlivens me with our audience so we will definitely be back and better wrap it up at this point.

**Trumbule:** Okay.

**Dr. Dave:** Okay. So thanks a lot.

**Trumbule:** Okay, Dave, thank you. Bye.