

Consciousness

Mette Mouritsen MD*

Psychotherapist and Mindfulness Instructor

***Corresponding author:** Mette Mouritsen, MD specialised in general medicine, psychotherapist, and mindfulness instructor.
E-mail: bevidstmedicin@gmail.com.

Citation: Mouritsen M (2016) Consciousness. J Neurol Exp Neural Sci 2016: JNENS-110. DOI: 10.29011/JNNS-110.100010

Received Date: 14 November, 2016; **Accepted Date:** 22 December, 2016; **Published Date:** 29 December, 2016

Illumination of the Concept Consciousness

We doctors are mainly dealing with consciousness as a process that is being more or less unconscious aware and awake, but rarely as a noun in the form of a consciousness. Maybe it's because we have been schooled in scientific materialism, so that we primarily believe in and relate to the physical world and all that can be seen, measured and weighed. So we do when we describe different levels of consciousness, understood as a human who is unconscious and gradually wakes up. Consciousness is more than a process it is also a state of being, and this state is an individual experience and thus it is difficult to relate to as an external observer.

And this is how we doctors are trained as scientific observers. The medical journals are still characterized by the conviction that the subject (the doctor) can look objectively at the object (patient), and thus we may forget that nothing is objective a part from the experience, which is present in the moment for the person experiencing it. Several researchers including Niels Bohr have claimed that the object, the experiment, cannot be separated from, the subject, the observer. They influence mutually each other's experiences. A person from the outside will never fully be able to describe another person's experience, as his own sensations are part of his observations. A description will always be coloured by the observer's imagination and perceptive organs. So when we allow ourselves to be objects for subjectivity, we are risking being judged by the observer's values and concepts of "normality".

Only as one unit we will be and experience the same reality.

In addition there is a large unexplored world of formlessness, formless energy and formless forces as gravity, magnetism and love. However we accept these formless energies, and the latter even without proving its existence, we simply know from our own experience that love exist and make us feel good.

So, what is consciousness, I have obviously not a full answer, but the last six years I have spent much time in exploring, understanding and explaining it after I had a sudden shift in consciousness. I have also read and listened to different scientists and

philosophers who do not have a common understanding of consciousness yet they can agree on it as a formless energy.

The latest statement I've heard is that consciousness is a formless energy triggered by neuronal activity in the brain, and that it is the brain, which produces consciousness. I think this is far from an adequate description, since each cell has consciousness, it knows which type of cell it is, and which group of cell it belongs to and is reproduced into when it is replaced, and it knows its limitations, unless it becomes a limitless cancer cell. The brain doesn't tell the skin cell to be and act as a skin cell. The skin cell knows. Remember that our cells are constantly renewed throughout the body. Even in the brain there is a central area, where nerve cells are renewed, and fortunately it turns into a nerve cell again and not a muscle cell. And fortunately the cells stop growing and replicate in the healthy body, so when the liver cells regenerate the liver undertakes its proper form size and space and leaves space for the other organs in the body, which are in a similar process of replicating and renewing. It is an indescribable intelligence and an indescribable overview, this greater awareness exhibits in the regulation of the human body from single cell level to the entire body. The brain is in this context an organ, which collects and coordinates sensations from the body but also information's captured from outside the body. The brain creates a momentary image, which allows us to communicate our sensations, but when the brain is dead along with the rest of the body this ability to communicate our sensations disappears. But the consciousness of the lived experience still exists, however in a different form which I will return to.

The following three sentences is an attempt to illuminate the concept of consciousness:

- Consciousness is energy, which can undertake all forms.
- Consciousness is a state in a process
- Consciousness is an omnipresent awareness of our own and our common existence.

I will elaborate on this with specific examples throughout the book. As a final appetizer I will introduce you to memory anaesthesia

Memory Anaesthesia and Consciousness

Memory anaesthesia is a term doctor's use for people who wake up after general anaesthesia, and tell about the surprising and frightening experiences they had during surgery. There is an interesting and valuable qualitative study commissioned by some Danish psychologists, which I refer to in my reference list. This study I will use initially to illuminate the body consciousness as an entity, since it can bring an understanding of our higher consciousness as the observer of our bodily sensations.

Of special interests is the following common feature in each of their personal experiences:

They all experience a lost sense of time: some believe that 5 minutes have elapsed others think several hours. They are in a timeless dimension, as when we dream.

They perceive obviously: Everyone experiences paralysation, as they cannot communicate with either body or speech. In addition, they have different sensory experiences, some hear conversation in the room, other sense touch of their bodies, some have pain, others feel anxiety, panic, guilt, disappointment.

They describe their experience with words like: "Buried alive", "dehumanized" and "perception of reality is changed."

But who is Experiencing all this?

According to medical science: "it should not happen" but it certainly is while they are observing a patient in a death-like state of being. The person seems unconscious. But he is certainly not "un-conscious". His higher consciousness observes and senses what is going on. In a medical perspective it is somewhat incomprehensible, as the machines and the doctor apparently controls the heart, lungs and level of consciousness. These people's painful but valuable experiences, is to me a self created scientific proof of simultaneously existence in different levels of consciousness, which can't be seen measured and controlled.

The person with memory anaesthesia is present in a timeless state of being as the observer, and also in the present room, perceiving with his body while the operation is going on. Like the woman who describes her feeling of disappointment during the procedure: "The doctor had promised that she would not wake up the second time." This was her second memory anaesthesia despite the doctor's great efforts.

So there is awareness at the cellular level as a more or less full-bodied experience, as the persons describe that they experi-

ence feelings, and bodily sensations like pain, touch and paralysis. And then there is the observer, the

witness, their higher consciousness, which observes it all. Naturally they describe it afterward as a feeling of "derealisation" as they were experiencing it while they at the same time were laying "un-consciously" in the room. They experienced two realities at the same time. It was a completely new and frightening experience to them, however it was reality just at another level of consciousness, in another timeless dimension.

Consciousness is with these people's valuable experiences and descriptions, obviously a full-bodied experience at the cellular level and also at a higher level of consciousness. Consciousness is integrated in our body and is also energetically connected with a greater awareness outside of our body. As neither the brain nor the body can observe itself.

These people's descriptions also have strikingly many features in common with people who have had near death experiences, out of body experience and some psychosis. Many of them describe that "the sense of time is ceased", that they have a sense of "derealisation", and that they still sense in different ways, while experiencing this unfamiliar state of being. Without having shared their experiences with each other, they tell about some common features. Experiences, which cannot be explained by conventional medical science, and as science, find it difficult to understand and relate to, these patients may easily get a feeling of being wrong. As one of the memory anaesthesia patients described: "I feel guilt in not being able to take care of myself." Shame and guilt are heavy emotions to carry around. The patients are not "wrong", neither before the operation or after or while they are telling about their experiences. It is about individual variation and sensitivity, which I will return to in a later section.

It is either not the anaesthetic that causes it, because it is fortunately rare that people have these experiences during an operation. And even if it was the form and the amount of anaesthesia, the point of interests is what they are experiencing while they are seemingly un-conscious. As previously described these derealisation experiences are recognizable by many other people in different contexts. It is about understanding the concept consciousness and sensitivity and individual variation. I will return to it all in the following sections. It brings a deeper understanding for our many unique ways of perceiving life, at a given time, both the horror and the beauty.

Let's begin with the brain-organ and our entire conscious body as an entity....

References

1. Article in Danish about "Memory Anaesthesia", Being the Conscious Observer During Anaesthesia.
2. Harvard University Meditation Reduces Stress and Changes your Brain.
3. Unlearning Chronic Pain with Equanimity: Immediate and Lasting Pain Reduction following a Self-Implemented Mindfulness-Based Interoceptive Exposure Task. July 2016.
4. Link to a Website with Several and on-going Researches on Mindfulness.
5. Mindfulness Therapies and Assessment Scales: A Brief Review. International Journal of Psychological studies, Vol 8 nr.1 2016.
6. 18 Publications from University of Massachusetts Medical school, Center for Mindfulness, in Medicine, Health care, and Society, on how mindfulness works.
7. 76 Articles in PubMed about Mindfulness and Prevention of Diseases.