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Lake of Lotus

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The Skills in Chanting of Mantra Sounds to be
Adjusted & Changed in Accordance With the
"Characteristics of One's Habitual Tendencies,
Features of Karmas, Orientations of Aspirations,
and Degrees of Mental Concentrations"

The Four Kinds of Inconceivable Forces of the
Universe

How to Make the Best Arrangements on "Lead-
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for Patients and Dying Persons

How to Prevent Wrong Decisions by Patients in
Hurting Themselves

How to Help the Patients to "Live More
Positively" and to Avoid Pointless Traumas



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香港大嶼山寶蓮禪寺之天壇大佛

English Version

Series of Talks on 'Science, Life and Death, Reincarnation' - (2)

Would "Consciousness" Still Exist After Death?

Would You Like to Know the Frontier of Scientific Research?

English Advertisement for Book Signing Ceremony

Dudjom Buddhist Association

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The Profound Abstruseness of Life and Death: The Meaning of Near-Death Experiences (34)

How to Make the Best Arrangements on "Leading Out of Pain and Guiding in Peacefulness" for Patients and Dying Persons

How to Prevent Wrong Decisions by Patients in Hurting Themselves

How to Help the Patients to "Live More Positively" and to Avoid Pointless Traumas

by Vajra Master Pema Lhadren,

translated by Simon S.H. Tang

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The Application of Wisdom: The Wisdom in Directing One's Dharma Practice (34)

The Skills in Chanting of Mantra Sounds to be Adjusted & Changed in Accordance With the "Characteristics of One's Habitual Tendencies, Features of Karmas, Orientation of Aspirations, and Degree of Mental Concentration"

The Four Kinds of Inconceivable Forces of the Universe

by Vajra Master Pema Lhadren,

translated by Fong Wei

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"Everything Comes from the Mind" (6)

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Organized by the Dudjom Buddhist
Association International Limited



A project funded by
Love Ideas ♥ HK



Co-organized by the Life Enlightenment
Charity Foundation Limited

of The Li Ka Shing Foundation

Would Consciousness Still Exist After Death?

Would You Like to Know the Frontier of Scientific Research?

Don't Miss This Great Opportunity to Attend the Most Authoritative Keynote Speeches

Ever to be Given in Hong Kong History

Series of Talks on 'Science, Life and Death, Reincarnation' (2): Near-Death Experiences

**Due to Limited Seats Available, Don't Miss This Rare Opportunity
& Reserve Your Seats A.S.A.P. !**

Date: 9th October, 2011 (Sunday)

Time: 2:00PM - 6:00PM

Keynote Speakers & Topics:

1. **Dr. Peter B C Fenwick** – Are Mind and Brain the Same? Can the Near-Death Experiences Help Us to Resolve this Question?

2. **Dr. Pim van Lommel** – Nonlocal Consciousness: A Concept Based on Scientific Studies on Near-Death Experiences

3. **Professor Erlendur Haraldsson** – Belief in "Life after Death" and Reincarnation, with Arguments For and Against Such an Afterlife

Venue: Meeting Room N101 (Expo Drive Entrance), Hong Kong Convention and Exhibition Centre, 1 Expo Drive, Wanchai, Hong Kong.

Fees: HK\$50; An additional fee of HK\$30 for those requiring professional simultaneous interpretation services with headphones (services available for English to be translated into Cantonese and Putonghua)

Application Form:

Name _____ Tel: _____ Email: _____

Address: _____

I would like to order _____ ticket(s) at HK\$50 each, and/or _____ ticket(s) at HK\$80 each

(HK\$80 ticket includes professional simultaneous interpretation service with headphone)

Total amount HK\$ _____, Directly Deposit / Cash / Cheque _____

For Official Use Only

Registration No.: _____ Ticket No. A _____, B _____

Payment Methods:

- 1) **Cheque Mailing:** Please fill in the application form with the total amount in a crossed cheque payable to "Dudjom Buddhist Association International Limited", and send them directly to our address at: **4/F, Federal Centre, 77 Sheung On Street, Chaiwan, Hong Kong**; OR
- 2) **Direct Deposit:** Directly deposit the total amount to the bank account of "Dudjom Buddhist Association International Limited" at Hong Kong Bank: Hong Kong Dollar Saving A/C No: 579-2-006529. After which, please send the deposit slip together with the filled-in application form by post to our address, or fax them to (852) 3157-1144.

Ticket(s) and receipt(s) will be sent back to you (via your full address) by post.

Please call us for enquiry at (852) 2558-3680, or email to info@dudjomba.org.hk

You can also download the Application Form from our website at <http://www.dudjomba.org.hk>, or call us to fax you the Application Form. After you have filled in the form, please send it back to us, together with the necessary amount, by either fax or mail. Thank you very much!

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Would “Consciousness” Still Exist After Death?

Series of Talks on ‘Science, Life and Death, Reincarnation’ (2): Near-Death Experiences

Our Association has held the first session on the Series of Talks on ‘Science, Life and Death, Reincarnation’- (1) in 2010 which was very popular and well received, resulting in many people having difficulties in trying to get tickets. This year we are most glad and thankful to have received the sponsorship from the Love Ideas ♥ HK Campaign of The Li Ka Shing Foundation, and thus we are now able to invite three world-renowned professionals and scholars to come to Hong Kong in sharing their top-notch frontier medical and scientific research findings, by exploring the key areas on the relationship between the human brain and the “consciousness”, as well as by investigating into whether or not the “consciousness” still continues to exist after death, and so on. In this way, it is hoped that these authoritative keynote speeches will enlighten us, those who are living in this modern world, to have a better understanding and analysis of the interrelationships between ‘Science, Life and Death, Reincarnation’.

These authoritative keynote speeches will cover such major topics as “Near-Death Experiences, Out-of-Body Experiences and Death-bed Visions” which may scientifically point out the possibility of ‘life after death’. Information concerning those various topics is now quite readily available in various media for those who are interested; yet, it is quite difficult for one to judge upon the correctness and authoritativeness of those information. It is, indeed, a rare opportunity for one to be able to listen in person to such authoritative keynote speeches on these topics that will be presented by three top-notch scientific and medical experts and authorities in their respective fields. Such an event is believed to be the first of its kind ever to be held in the history of Hong Kong; as such, it will be even rarer for the general public to be able to listen to such distinguished guests and their speeches in an open forum. Hence, we sincerely hope that you can take this great opportunity and do not miss this rare occasion.

The speeches will discuss the following issues:

- When the function of the brain stops, is it possible that the “consciousness” still continues to be active? If so, what does it mean?
- While the “consciousness” remains active even when the function of the brain stops, then what is it that is being active? Is this what common people usually called it as the “Soul”?

- Is the Eastern folklore of “An Apparition Coming Out of a Living Person” having a similar meaning to the Western definition of the “Out-of-Body Experience” ? Is it real? And if so, what does it mean?
- “Death-bed Vision” are some kind of visions that dying patients may see, and normally these are the scenes when they see their passed away relatives. Are those visions of relatives simply “Apparitions”? Or whether they are just hallucinations of those dying patients?

All these related questions and their puzzling issues will be introduced and answered by these three experienced researchers and experts who are of the highest caliber of international standing and authority, together with professional simultaneous interpretations to be available from English to both Cantonese and Putonghua for the audiences.

- Can science unveil the profound mystery of “Life and Death”?
- What kind of evidence does the scientific community have in reference to the issue of “Life and Death”?
- Can scientific research on “consciousness” at the moment of “clinical death” prove the existence of “life after death”?
- Among the different research findings and analyses on such topics as “Near-Death Experiences”, “Out-of-Body Experiences”, and “Death-bed Visions”, do they have enough evidence for the proof?
- As for the various case studies on “Reincarnations” and “Past Life Memories”, can these be used as part of the scientific evidence for the proof on the existence of “life after death”?
- If you are interested to know more about the answers to these questions, then you should not miss this rare occasion!

Our association have already invited three world-renowned and authoritative professionals and scholars to come to Hong Kong and deliver important keynote speeches on these areas of concern.

Synopsis of Keynote Speakers & Topics:

1. Dr. Peter B C Fenwick

BA (Cantab), MBBChir (Cantab), FRCPsych



Dr. Fenwick has a wide area of professional expertise which covers psychiatry, neuropsychiatry, neurology and neurosurgery, head, brain and spinal cord disease and injury, sleep disorder and especially epilepsy. He has had a special interest in the relationship between brain function and the mind, and with longstanding and intensive research in this area.

Dr. Fenwick had held many key positions in several medical and academic institutions. He had been Consultant Neuropsychiatrist at the Maudsley Hospital which he ran for 20 years, Senior Lecturer at the Institute of Psychiatry, Consultant Neuropsychiatrist at the Radcliffe Infirmary, Oxford and Senior Lecturer at the Institute of Psychiatry, Kings College, London.

Currently, his is the Honorary Clinical Consultant neurophysiologist at Broadmoor Hospital, UK and Honorary Senior Lecturer at the Institute of Psychiatry, University of Southampton, UK. In the past ten years, he has spent several months per year in a research laboratory for the study of Magnetoencephalography in Japan. He also involves in large hospice projects in UK, Holland and Japan. He is the Chairman of the Scientific and Medical Network, as well as the Chairman of the Research Committee, Integral Medical Foundation.

Dr. Fenwick has longstanding research in the areas of "near-death experiences and the dying process". He has studied over 300 cases and has strong expertise knowledge in this special area. He has published over 240 academic papers and 6 books of special topics. He is considered as the major authority in clinical research on "Near-Death Experiences" (NDEs) in the United Kingdom.

Topic of Talk: Are Mind and Brain the Same? Can the Near-Death Experiences Help Us to Resolve this Question?

Anecdotal accounts suggest that during Near-Death Experiences (NDEs), many experiencers say they leave their body and become aware of what is going on around them, or even 'travel' to other rooms in the hospital, and report other events there. A number of studies have set out

to investigate this using cards or numbers placed in such a position that they could be seen by someone leaving their body. These studies will be described. In order to take this further, the **AWARE project** was launched at the UN in 2008 by Dr. Sam Parnia and his team. The aim of the project is to understand what happens at the onset of death and to see if there is evidence for mind and brain being separate. It is now well known that 10% of people with cardiac arrest have NDE experiences, and a third of these may have Out-of-Body Experiences (OBEs).

During cardiac arrest OBEs, the brain is non-functional, so it is important to verify that these experiences do occur at that time. If this is true, then it suggests that our mind is independent of the brain and this would have widespread implications for neuroscience. The **AWARE project** sets out to test whether these reported experiences are indeed veridical.

Cards containing information have been put up near the ceiling in resuscitation areas in hospitals in the UK, France, Austria and in the USA. Over 60 cards are put up in each hospital, so it is hoped that a cardiac arrest out of body experience will occur in one of the areas where there are cards. Each subject with a cardiac arrest will be interviewed to find out whether they had an OBE and if they did, to describe what happened. Each subject will be given a questionnaire to decide on the nature of their NDE and they will be asked about their OBE, particularly in relation to anything they may have seen. Data from this will be analyzed. Because of the importance of the program, information about the results will not be given until the study is complete. However, the study has necessitated a reformulation of the way that we measure cerebral activity during cardiac arrest, and an examination of cerebral processes during the acute cerebral anoxia of the arrest. This study raises questions about the nature of consciousness and examples of wider states of consciousness will be given. Brain mechanisms which may be involved, and how these lead to different models of consciousness which go beyond those of purely mechanistic brain function will be explored..

Many individuals report that after having an NDE they either become healers or are themselves healed. The evidence for this will also be reviewed.

2. Dr. Pim van Lommel



Dr. van Lommel graduated from the Medical School of Utrecht University, Netherlands. In 1976, he became a cardiologist and worked in the Rijnstate Hospital for 26 years. He has extensively published many professional papers on cardiology.

Due to his work, he has come across many patients who survived a cardiac arrest informing him about their “near-death experiences”. This had taken his attention and so he became interested in the subject. In 1986, he started studying “near-death experiences” in patients who survived a cardiac arrest. He has studied over 500 cases.

In 1988, he co-founded the Merkawah Foundation, IANDS (the International Association of Near-Death Studies) in the Netherlands. In 2001, Dr. van Lommel and others published their Dutch study in the reputable medical journal **The Lancet**. In addition, he has authored chapters in several books about “near-death experiences” and also published articles about the subject. In 2007, he published his book in Dutch **‘Eindeeloos Bewustzijn’ (Endless Consciousness)** in the Netherlands. This book was a bestseller, and within one year over 120,000 copies were sold. Thereafter, the book has been translated into English and French.

In the past several years, Dr. van Lommel has been invited to give talks on the topics of “near-death experiences” and the relationship between brain function and the mind all over the world. In 2005, he was granted the ‘Bruce Greyson Research Award’ on behalf of the IANDS. And in September 2006, the President of India, Dr. A.P.J. Abdul Kalam, awarded him the ‘Life Time Achievement Award’ at the World Congress on Clinical and Preventive Cardiology in New Delhi, for the recognition of his great contributions.

Topic of Talk: Nonlocal Consciousness: A Concept Based on Scientific Studies on Near-Death Experiences

‘To study the abnormal is the best way of understanding the normal’

.... by William James

According to our current medical concepts, it is not possible to experience consciousness during a cardiac arrest, when circulation and breathing have ceased. But during the period of unconsciousness due to a life-threatening crisis like cardiac arrest patients may report the paradoxical occurrence of enhanced consciousness during the period of a non-functioning brain. Recently several theories have been proposed to explain such a so-called Near-Death Experience (NDE). The challenge to find a common explanation for the cause and content of an NDE is complicated by the fact that an NDE can be experienced during various circumstances, such as during severe injury of the brain as in cardiac arrest to continuum when the brain seems to function normally. In four prospective studies with

a total of 562 survivors of cardiac arrest between 11% and 18% of the patients reported an NDE, and in these studies it could not be shown that physiological, psychological, pharmacological or demographic factors could explain the cause and content of these experiences.

Since the publication of several prospective studies on NDE in survivors of cardiac arrest, with strikingly similar results and conclusions, the phenomenon of the NDE can no longer be scientifically ignored. It is an authentic experience which cannot be simply reduced to imagination, fear of death, hallucination, psychosis, the use of drugs, or oxygen deficiency, and people appear to be permanently changed by an NDE during a cardiac arrest of only some minutes duration. The current materialistic view of the relationship between the brain and consciousness held by most physicians, philosophers and psychologists seems to be too restricted for a proper understanding of this phenomenon. So it is indeed a scientific challenge to discuss new hypotheses that could explain the possibility to have clear and enhanced consciousness with memories, with self-identity, with cognition, with emotion, with the possibility of perception out and above the lifeless body, to explain the reported interconnectedness with the consciousness of other persons and of deceased relatives, to explain the possibility to experience instantaneously and simultaneously (non-locality) a review and a preview of someone’s life in a dimension without our conventional body-linked concept of time and space, where all past, present and future events exist, and even to explain the experience of the conscious return into the body.

Based on these recent prospective NDE studies, as well as on recent new insights in the neurophysiology during cardiac arrest and in a normal functioning brain, and in combination with concepts from quantum mechanics, one has to come to the inevitable conclusion that consciousness can not be localized in a special time nor place. This is called nonlocality. There are good reasons to assume that our consciousness does not always coincide with the functioning of our brain: enhanced consciousness can sometimes be experienced separately from the body. I have come to the conclusion that most likely the brain must have a facilitating and not a producing function to experience consciousness. In this view there is no beginning nor will there ever be an end to our consciousness.

It looks as if a single unusual finding that cannot be explained through widely accepted concepts and ideas is capable of bringing about a fundamental change in science. By making a scientific case for consciousness as a nonlocal and thus ubiquitous phenomenon, this view can contribute to new ideas about the relationship between consciousness and the brain, because it questions the purely materialistic paradigm in science. Moreover, a near-death experience appears also to be an intimately personal rediscovery of

age-old, cross-cultural knowledge, seemingly forgotten by modern society. In other times and places such experiences were often known under different names, such as visions or mystical, religious or enlightenment experiences. Among the diverse understandings of death, one constant across all times and cultures, except our own, has been a sense that **the personal essence, commonly called the soul, has an existence independent of the physical body. Recent research on NDE seems to be a source of new insights into the possibility of a continuity of our consciousness after physical death.**

3. Professor Erlendur Haraldsson



Professor Haraldsson studied philosophy at the University of Edinburgh, Scotland and the University of Freiburg, Germany. He furthered his study in psychology and obtained a Diploma in Psychology from the University of Munich, Germany, and a Ph.D. in psychology from the University of Freiburg respectively. During the interim period, he held an internship in Clinical Psychology at the Department of Psychiatry, University of Virginia, USA.

He had been teaching at the Department of Psychology at the University of Iceland for over a quarter of a century. He has been a visiting professor at the University of Virginia, Adjunct Research Faculty Member at the Institute of Transpersonal Psychology, California, USA, and Research Professor at the Institut für Grenzgebiete der Psychologie und Psychohygiene, Freiburg, Germany.

Professor Haraldsson has a wide range of research interests, including **psychic experiences** and folk-beliefs, miracle makers, **death-bed visions, apparitions**, contacts with the dead, and so on. His study on reincarnation is especially famous worldwide, and is considered one of the pioneers of western scholars in this special field. He has been researching in places like Sri Lanka, India and Lebanon for studies of children who claimed that they could recall memories of their previous lives. **The cases studied are over 100 and more than 100 academic papers and five books of special topics have been published.** He is a world-class authority in contemporary research study on the cases of reincarnation.

Professor Haraldsson had been in longstanding research collaborations with Professor Ian Stevenson of the Medical School, University of Virginia, USA, and with Dr. Karlis Osis, a world-class leading psychologist. The book '**At the Hour of Death**' (authored by Drs. Haraldsson and Osis) is a rare book on death-bed visions, which **has been translated into 12 languages.** Over the years, Professor Haraldsson has been invited across the world to give **over one hundred academic talks** which are highly appreciated by his fellow colleagues, as well as by the general public.

Topic of Talk: Belief in "Life after Death" and Reincarnation, with Arguments For and Against Such an Afterlife

Views about life after death and reincarnation vary widely; extinctionists believe that death is the end of human existence; agnostics that it is impossible to know if life continues after death; immortalists that after death we live in an afterworld forever; reincarnationists that we are born again into a physical body. How widespread are these beliefs? Surveys show inter-national and inter-religious differences but not necessarily in line with the dogmas of the dominant religion of each country.

What are the main empirical arguments for and against survival? **The dominant scientific views consciousness as completely dependant on the condition of the brain.** Research in some areas indicate that this view needs revision:

- **Death-bed visions** are sometimes observed near the time when people die indicating contact with a post-death reality.
- **Near-death experiences** have been brought into focus with several studies conducted in university hospitals.
- **Encounters with the dead** are reported by every fourth person in Europe.
- **Reincarnation memories.** Many cases by young children have been verified. Some children have phobias and birthmarks which they relate to how they died in the previous life.
- **Mediumistic communications,** particularly in the 19th and early 20th century, revealed highly interesting findings.

Research in these areas, using scientific, empirical methods, have resulted in empirical arguments suggesting life after death.

In the latter part of the lecture, a newly researched and well documented case will be presented. It took place in Copenhagen and Reykjavik and has close resemblance to a famous older case from Sweden.

Tickets Will Be Available at the "Hong Kong Book Fair" Booth No.3G-F35

Book Signing Ceremony

After the

Series of Talks on 'Science, Life and Death, Reincarnation' (2) : Near-Death Experiences

The Dudjom Buddhist Association International ("Association") has held the first session on the Series of Talks on 'Science, Life and Death, Reincarnation' (1) in 2010 which was very popular and well received, resulting in many people having difficulties in trying to get tickets. This year we are most glad and thankful to have received the [sponsorship from the "Love Ideas ♥ HK" Campaign of the Li Ka Shing Foundation](#), and thus we are now able to invite three world-renowned professionals and scholars to come to Hong Kong in [sharing their top-notch frontier medical and scientific research findings](#), by exploring the [key areas on the relationship between the human brain and the "consciousness"](#), as well as by [investigating into whether or not the "consciousness" still continues to exist after death](#), and so on. In this way, it is hoped that these authoritative keynote speeches will enlighten us, those who are living in this modern world, to have a better understanding and

analysis of the interrelationships between 'Science, Life and Death, Reincarnation'.

All three speakers have plenty of publications in articles and books. Their books have either been the bestseller of the year or translated into numerous languages. Two of the speakers have recommended one of their books and so we would like to take this opportunity to hold a [book signing ceremony](#) after the Talk. Copies of the book will be [available in advance](#). Audience can place orders for the book(s) through us when they purchase the tickets for the Talk. The books will be distributed at the lecture venue upon the showing of the "book purchase receipts".

Date: 9 October 2011 (Sunday)

Talk: 2:00 PM -- 6:00 PM

Book Signing Ceremony: 6:00 PM

Venue: Meeting Room N101 (Expo Drive Entrance), Hong Kong Convention and Exhibition Centre, 1 Expo Drive, Wanchai, Hong Kong.

Fees for the Talk: HK\$50; Additional fee of HK\$30 for those who require professional services of Simultaneous Interpretation ([available for English to be translated into either Cantonese or Putonghua](#))

Fee for the Book Signing Ceremony: Free; but for those who would like to obtain autographed copies of their books, they should order the book through the Association.

(Only Limited Copies of Books Are Available, So First-Come-First-Served)

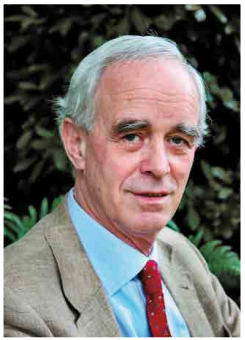


BOOK SIGNING (1)

Consciousness Beyond Life : The Science of the Near Death Experience, Harper Collins, 2011

Author: Dr. Pim van Lommel.

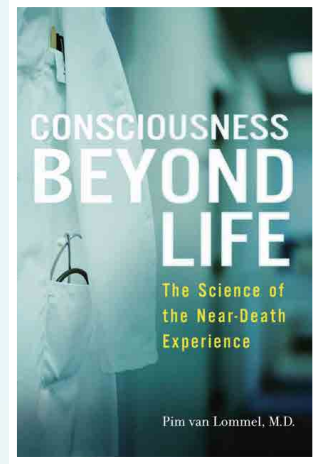
Price: HK\$150.00



As a cardiologist, the author was struck by the number of his patients who claimed to have near-death experiences as a result of their heart attacks. **As a scientist, this was difficult for him to accept: would it be scientifically irresponsible for him to ignore the evidence of these reports?** He then decided to design a research study to investigate into the phenomena under the controlled environment of **a cluster of hospitals with a team of medically trained staff.**

For more than twenty years, he systematically studied such near-death experiences in a large number of patients who survived the cardiac arrest. In 2001, he published the study on near-death experience in the **renowned medical journal "Lancet"**. The article caused an internationally sensation as it was the **first scientifically vigorous study of this phenomena.** This book, now available first time in English, offers an in-depth presentation of the results and theories.

The book provides scientific evidence that the near-death phenomenon is an authentic and profound experience. Most patients' personalities **undergo a permanent change.** In the author's opinion, **the current views** on the relationship between the brain the consciousness held by most physicians, philosophers, and psychologists **are too narrow** for a proper understanding of the phenomenon. The author shows that our consciousness does not always coincide with brain functions and that, significantly, **consciousness can even be experienced separate from the body.** The book was originally published in Dutch that has been sold for over 125,000 copies in Europe.

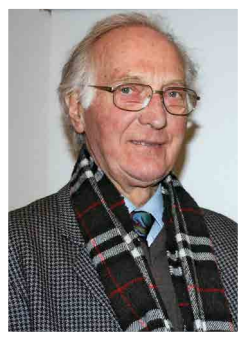


BOOK SIGNING (2)

At the Hour of Death: A New Look at Evidence for Life After Death, 3rd Edition, Hastings House, 1997

Authors: Dr. K. Osis and Prof. E. Haraldsson

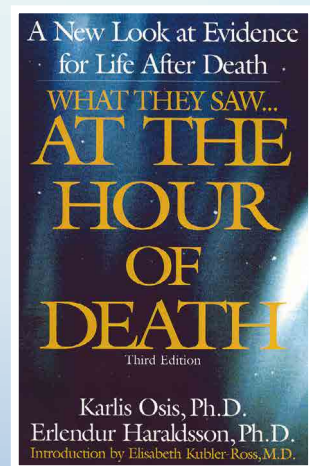
Price: HK\$160.00



"At the Hour of Death" is a book that is different from many others that deal with near-death experiences. It **directly approaches the possibility of life after death on the basis of a scientific evaluation of a substantial quantity of data.**

The authors have convincingly demonstrated the argument that **the support we need when facing death.** As the end draws near, the deceased may **require social warmth and understanding, a spiritual outlook, or pharmaceutical alleviation of pain, and comfort.** Knowledge of what happens when one is dying, what to expect, and what we may reasonably hope for **form a vital part of such support.** This book might be handy for those who are facing death, as well as for those who counsel the terminally ill and bereaved.

The value of this book is its **detailed information**, not philosophy. It carries out the subjective feeling of the experiencers that death is a mystery that is real and unavoidable. The despair and sorrow engendered by the approach of death shake us out of superficialities and may **invigorate the heart to feel its deepest roots of existence.**



Book Order Form:

Name: _____ Tel: _____ Email: _____

Address: _____

I would like to order _____ book(s) of the “**Consciousness Beyond Life**” at HK\$150 each, and/or
_____ book(s) of the “**At The Hour of Death**” at HK\$160 each.

Total amount HK\$ _____, Directly deposit / Cash / Cheque _____

For Official Use Only

Registration No.: _____ Book Order No.: A _____, B _____

Payment Methods:

- 1) **Cheque Mailing:** Please fill in the application form with the total amount in a crossed cheque payable to “Dudjom Buddhist Association International Limited”, and send them directly to our address at: 4/F, Federal Centre, 77 Sheung On Street, Chaiwan, Hong Kong; OR
- 2) **Direct Deposit:** Directly deposit the total amount to the bank account of “Dudjom Buddhist Association International Limited” at Hong Kong Bank: Hong Kong Dollar Saving A/C No: 579-2-006529. After which, please send the deposit slip together with the filled-in application form by post to our address, or fax them to (852) 3157-1144.

Confirmation Letter and Receipt of Book(s) ordered will be sent back to you (via your full address) by post. Please bring along this Confirmation Letter to receive the ordered books during the Book Signing Ceremony. We will not entertain those people who are only ordering for books, but without going to the Talk and the Book Signing Ceremony. Thank you for your kind attention on this matter!

**Please call us for enquiry at (852) 2558-3680,
or email to info@dudjomba.org.hk**

You can also download the Application Form from our website at <http://www.dudjomba.org.hk>, or call us to fax you the Application Form. After you have filled in the form, please send it back to us, together with the necessary amount, by either fax or mail. Thank you very much!

The Meaning of Near-Death Experiences (34)

By Vajra Master Pema Lhadren
Translated by Simon S.H. Tang



**How to Make the Best Arrangements on “Leading Out of Pain and Guiding in Peacefulness”
for Patients and Dying Persons**

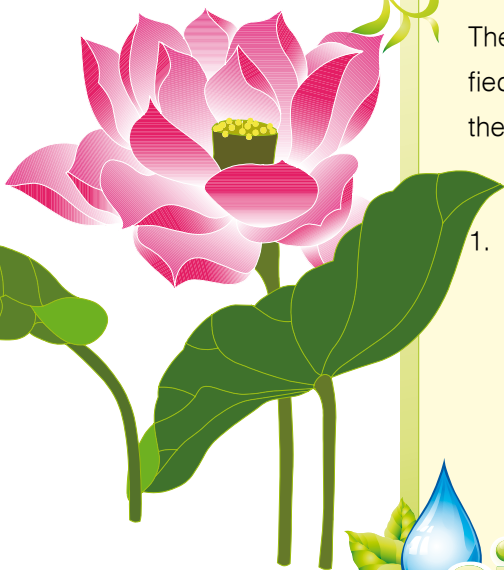
How to Prevent Wrong Decisions by Patients in Hurting Themselves

How to Help the Patients to “Live More Positively” and to Avoid Pointless Traumas

Excerpt of Last Chapter: Various Reasons on the Formation of Different Scenes at the “Moment of Death”

The “scenes at the moment of death” can be roughly classified in the following categories in accord with the varieties of the “main causes” and “auxiliary conditions”:

1. The “Separation of the Four Elements” – the “main cause” (the internal “consciousness” and “sub-consciousness”, including all kinds of memories) conjoins with the “auxiliary conditions” (the ‘Separation of the Four Elements’ in the external circumstances) in forming the “scenes at the moment of death” (please refer to the articles on “The Meaning of Near-death Experiences” in Issues 8 and 20 of the “Lake of Lotus”).





2. The “Endorphins Inside the Brain” – the “main cause” (the internal “consciousness” and “sub-consciousness”) conjoins with the “auxiliary conditions” (the “endorphins inside the brain” of the external circumstances) in forming the “scenes at the moment of death” (please refer to the article on “The Meaning of Near-death Experiences” in Issue 21 of the “Lake of Lotus”).

3. The “Karmic Forces” – the “main cause” (the internal “consciousness” and “sub-consciousness”) conjoins with the “auxiliary conditions” (the “karmic forces” of the external circumstances) in forming the “scenes at the moment of death”. This can be further classified into the following two kinds:

i. **Wholesome Ones** – arising from: (a) virtuous retributions (please refer to the article on “The Meaning of Near-death Experiences” in Issue 21 of the “Lake of Lotus”); and (b) the efforts of one’s Dharma practice (the main theme of this article in this issue).

ii. **Unwholesome Ones** – arising from: (a) vicious retributions; and (b) the forces of karmic creditors in seeking compensations on one’s karmic debts.

According to the records of different surveys, most of the dying people had seen the following scenes:

1. **Protectors or avengers:** (i) **good ones** – saw kith and kin who had passed away, unknown protectors, deities or Buddhas coming to fetch for oneself

(ii) **bad ones** – being besieged by a crowd of ferocious persons or beasts, and going along in company with groups of people who looked confused.

2. **Strange places:** (i) **good ones** – saw pavilions, balconies, buildings, flower fields, rivers, light zones, towns or cities.

(ii) **bad ones** – saw wilderness, forests, darkness, caverns, hells.

3. **Messy Issues that cannot be recalled clearly.**

How would the Buddhist point of view comment on these phenomena? According to the Buddhist teachings, it was said that rebirth would take place within forty-nine days after a person has passed away, then why would a dying person see the kith and kin **who had passed away long time ago** still coming to fetch for him or her? Why had not the kith and kin taken rebirths after so many years posthumously? Are the appearances of these deceased persons merely the illusions of the person who is going to die? Or were they really true? Are there any other reasons? Are those strange places the destinations where they are going to be reborn into? Under what circumstances would the normal rebirth of a dying person be negatively encumbered? Is there any way to help a deceased person to avert sufferings and elevate to a better place of rebirth?

Human beings have four kinds of conditions of consciousness (please refer to the article “The Wisdom in Directing One’s Dharma Practice” in Issue 26 of the “Lake of Lotus”) as follows:



1. **Beta β waves** – the “conscious condition” of daily living;
2. **Alpha α waves** – the relaxed “consciousness condition”, such as in entering into the elementary stage of ‘visualization”, or at the first stage of “mental concentration”; or the condition when the “spiritual body” is **slowly separating** from the “physical body”;
3. **Theta θ waves** – the peaceful “conscious condition” of having entered into higher levels of “visualization”, or at the deeper levels of “mental concentration”;
4. **Delta δ waves** – slow “conscious condition” of not having any dreams, and in a stage of slow-wave deep sleep.



In fact, how does the arising of the different stages in approaching death and its “transformation of consciousness” affect the thoughts and behaviors of dying

patients? What are their relationships with the “scenes at the moment of death”? How should the family and kin and kith who take care of the dying patients respond to the “transformation of consciousness” and change of “scenes at the moment of death” for guiding the emotions and spiritual direction of the dying patients? Could the “transformation of consciousness” and the change of “scenes at the moment of death” be complementary to each other? Furthermore, the “**disintegration of the Four Elements**” of the physical body **also affects** the “transformation of consciousness”, as well as on the change of the “scenes at the moment of death”. Hence, how should one support and provide guidance to a dying patient in order to **reduce or resolve** the predicament from these problems?



What is the Ultimate Assistance in the First Stage of Approaching Death?

The care-givers, kin and kith and professional counselors should perform the following steps when a dying person is **approaching the “first stage of death”**:



1. **Accepting and Understanding**
2. **Listening and Observing**
3. **Analyzing and Adopting**
4. **Leading Out and Guiding In**
5. **Accompanying with Unspoken Consensus**

The key points of application and their importance on the issues of “Accepting and Understanding” and “Listening and Observing” had been clearly highlighted in the case studies of the previous chapters (please refer to the articles on “The Meaning of Near-death Experiences” in Issues 29-30 of the “Lake of Lotus”), as well as on the issue of “Analyzing and Adopting” by the dying persons (please refer to the article on “The Meaning of Near-death Experiences” in Issue 31 of the “Lake of Lotus”) have been clearly explained. Yet, even when these are done hundred percent, there are still many obscurations. In order

that both the care-giving family members and the dying patients do not have remorse which will be too late to repent later on, but only **ultimate offering in farewell with a “heart-to-heart connection and having no trace of regret”**, the above-mentioned third to fifth steps should be included in the issues that must be done when a dying patient is **approaching the “first stage of death”**.



have tremendous negative impacts upon the seriously-ill, or the dying, person.

Seriously-ill persons, such as terminal cancer patients, usually face the threat of death. Psychologically it is unbearable to them. Physically, they are frail, lack of appetite, malnourished, and short of protein. Edema is developed onto the whole body due to poor blood circulation.

There are at least two parts to the issue of “Analyzing and Adopting”. The first part of “Analyzing and Adopting” is to be **directed by a dying patient**, while the second part of “Analyzing and Adopting” is to be **directed by the care-givers, kin and kith and professional counselors** have already been discussed in the last two chapters (please refer to the articles on “The Meaning of Near-death Experiences” in Issues 32 and 33 of the “Lake of Lotus”). Now we are going to discuss the fourth step on “Leading Out and Guiding In”.

How to Make the Best Arrangements on Leading Out of Pain and Guiding in Peacefulness for Patients and Dying Persons

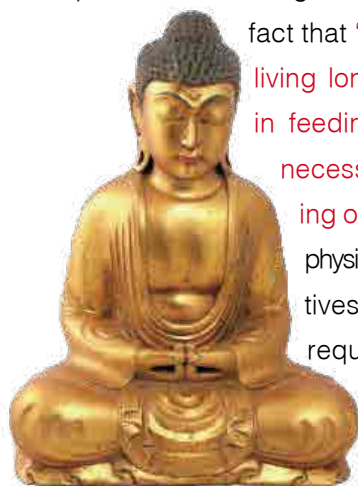
Care-givers and kith and kin who are responsible for provision of care, especially Chinese people, always consider “it is fortunate to have an opportunity of dining”. When they find the patient or dying person gets frailer and frailer day by day, under the emotional torment of being unwilling to let go and self-reproof, they always think of giving the most nutritional soup or the patient’s favorite dishes to them. They push hard on the patient or dying person in exhortation of taking the food. Usually the patient or dying person would try hard to swallow the nutritional food as **it is ungracious not to accept the kindness and to disappoint the family with hospitable wishes.**

However, the fact is that since digestion of the seriously ill patients or dying persons is very poor in health, so they would become too full and uncomfortable if they over dined. Consequently, they might even be eating less and less. Eventually, even when nasogastric intubation is applied, due to poor digestion of the patient, it is not feasible to carry out feeding and as a result, one has to administer intravenous drip which is commonly known to be nutritional injection. Besides high protein, rest of the supplies is merely glucose water at large. **These were taken to be nutritional supplies for the improvement of one’s physical strength, however, would turn out to be a burden to the terminal cancer patients.**

In order to provide good caring for the patients or the dying persons, care-givers, kith and kin would generally endeavor their utmost to give the best things of what they suppose to have for the patients. However, would the best things that they are supposed to have are really suitable for the patients or the dying persons? **Improper caring could specially**



Therefore, care-givers and kith and kin who are responsible for caring of the patient must realize the



fact that “eating more does not mean living longer, while having success in feeding into the body does not necessarily result in proper egesting out”. Feedbacks of some of the

physicians indicated that many relatives of the patients frequently request them to administer intravenous drip to the dying terminal cancer patients for supply of nutrition

and water. Relatives hope that the patients would depart in the condition of being fed. A fed ghost is better than a hungry ghost.

Under such circumstances, the patients would be subject to unnecessary pains. Since the nutrition supplemented via intravenous drip could not be absorbed, and so the excess water might cause increase of secretion in the respiratory tract, inability in urination, worsening in pleural effusion or ascites. As such, the nurses also have a hard time to locate a vein for syringing.

Intravenous drip would certainly improve the patients' condition of the consciousness but at the same time, patients' sensation of pain would also be enhanced. Moreover, it would be more difficult in treatment of the corpses in the future. For instance, it is usually discovered that water would infiltrate through the pores gradually after the patient's death because of excess storage of water due to unnecessary over injection while alive.

Thus, the care-givers and kith and kin must have some medical knowledge and at the same time, they have to be rational such that they would be able to truly maximize the effect of “leading out the pain from the patients and the dying persons, while guiding

them in serenity”. The followings are a few facets that need to be noted:

1. Collection of relevant information centering on the real benefits of the patients – One should collect relevant information about the physiological and psychological changes at the end stage with respect to the diseases from the professionals or information centers as soon as possible for a way of proper caring and comforting for the patients could be followed. For instances, physicians, patients' associations, auxiliary hospital departments, social workers and etc are sources of information. One should not casually take the hearsays serious, and neither should one submit to demands of the patients. One must seek for professional advices to attain balance between conflicts and crashes. All decisions should be centered on the real and genuine interests of the patients. “Leading in professional information, while guiding out innocent damages”.

2. Take care of one's body and mind for confrontation with the long-lasting difficulties in the future – One should seek for reliable support to the belief for taking good care of one's body. In order to have adequate strength so that one would have good conditions of both body and mind to take care of the patient, care-givers and kith and kin must learn to take care of themselves first. One should not overlook to take care of oneself due to worries about the patient. Overlooking of caring about one's own self would not only weaken the ability of taking care of the patient but also add the remorse to the patient. Thus, care-givers and kith and kin should know that once they have endeavored the utmost then they would not have any fur-



ther regret. The care-givers should not allow themselves collapse before the patient does. "Leading in the health of both body and mind, while guiding out negligence and depression".

How to Prevent Wrong Decisions by Patients in Hurting Themselves

3. Allow the patients to realize the actual conditions for better cooperation in arrangements – Most of the time, patients do not know exactly their own conditions. One of the main reasons is that once the patients realize the seriousness of the disease, they might have emotional reactions which can be classified into several stages. In general, they would go through the six stages of "shock, denial, anger, grief, bargain and acceptance". They might even appear to be easily upset (like a child), not resigned to, not letting go, fear, despair, apathy and etc.

Care-givers and kith and kin should pay attention to the mood of the patients. Patients still in the stages of "shock, denial, anger, depression or bargain" would have their focus on the tangle of emotion so the issues of seeking for appropriate "medical treatments and funeral arrangements" might have been overlooked. They would focus themselves on miracle cases. Anybody who provides medical treatments such that the patient "could survive like a miracle" would attract them to wholly devoting their hopes to it, regardless of whether this is the truth or not. They might even endeavor all their resources on it, and thus might have missed some of the opportunities for effective medical treatments. Consequently, the symptoms

progress to an unmanageable situation. The pain of worsened symptoms accelerate the fall of death.

For instance, there has been a case about a cancer patient who had



heard of miracles through praying together with the religious brethren/ fraternity. He then refused to have surgical excision of the tumor. After totally immersing in the joy of praying with confidence for a pleasant period of half a year, the patient truly believed that if one is in a mood of activeness and joy, miracles could be made possible to cure the cancer. Nevertheless, after half a year, cancer cells metastasized to numerous sites without reservation. The patient experienced the pain of unmanageable symptoms and his life also rapidly came to an end. Moreover, the aftermaths, such as funeral arrangement, could not be organized in a timely manner. The deceased was forced to depart with a heap of regrets. There are plenty of such cases about lapsing of critical moments for medical treatment. Most of the time, the patient and kith and kin do not know the patient's condition, which leads to a fault that cannot be remedied.

There are also patients who are more positive and optimistic. They might be in the moods of "positive emotional response, a will to fight back, courage, calm, hopefulness, confrontation, leading a more positive life, seeking for the meaning of life, preparing for or handing over issues about the aftermath, surrendering to one's destiny", and so on. In short, no matter whatsoever emotional response that the





patient might have, it is “normal”. **Don’t anticipate that the patient would be confined to a stereotype of response for emotional relief** because the response of each person differs from each other.

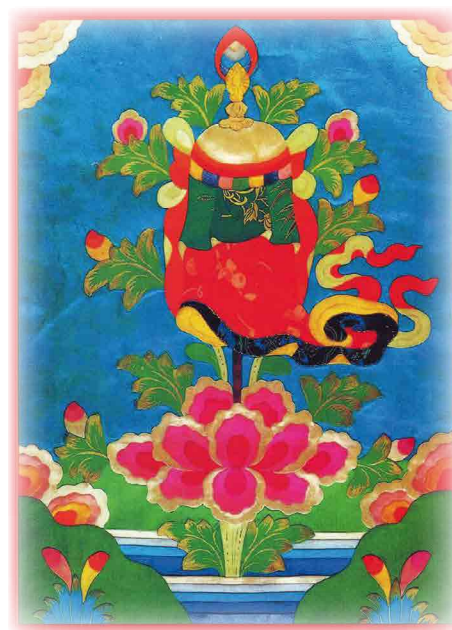
What the care-givers and kith and kin need to do is to seek for advice from the relevant professionals or experienced people in accord with the emotional stage of the patient. The “objective” is to let the patient **correctly realize** his own condition so that he would be able to **“precisely master his future situations at an appropriate timing, appropriate circumstances and appropriate conditions”**. When the worst outcome is anticipated, one would then be able to finely map out the **best and most thorough** arrangement. **“Conquer the fear of death and you are put into possession of your own life”**.

Correct **“realization”** is the best way of confrontation, and it is also most likely to discover a method of **“best arrangement”**. The responsibility of care-givers and kith and kin is to **assist** the patient to be able to have a **rational** attitude to **correctly “realize”** one’s own condition. The patient is already fatigue in both aspects of body and mind and the **most unfortunate** situation is that the patient is surrounded by more confused and frailer care-givers and kith and kin. Therefore, as the care-givers and kin and kith, they must take care of the condition of the body and mind first before taking actions so to avoid further chaos, otherwise it

would add to the weight of the already heavy burden of the patient. It might even lead the patient to make a regrettable decision. **“Leading in rational realization, while guiding out wrong decisions”**.

How to Help the Patients to “Live More Positively” and to Avoid Pointless Traumas

4. **Help the patients to live more positively and to avoid pointless traumas** – Disclosure of the patient’s condition is a piece of art and it needs to take utmost cautious attitude in handling. More deadly is the disease more cautiously should one make a plan for disclosure of the illness. Once the patient is diagnosed of cancer, one of the following four situations may occur: It is, indeed, the first time in the history of Hong Kong that such a large scale event on the topic on “Scientific Evidence on Near-Death Experiences – A General Discussion of Life and Death” will be explored and open to the general public. It is an unprecedented event on the dissemination of **high-level knowledge** on the topic of “Life and Death” and has never happened before, such that it is **most fortunate for our Hong Kong people** to have such a rare opportunity to **broaden their vision and horizon** on “Life and Death”.



(a) **Sealing off the patient's conditions:** some family members may ask the medical staff not to mention anything about cancer and deceive the patient as some other kind of disease. For instance, stomach cancer might be said to be stomach upset; or liver cancer is said to be fatty liver or cirrhosis. The patient would be kept completely in the dark.



(b) **Partly know the situation, yet partly with suspicion:** occurrence of symptoms due to illness and the need for medical tests. For instances, loss of weight, appearance of tumor, purple spot on the skin (**purpura**). Furthermore, procedures such as biopsy for pathological examination, bone marrow puncture and etc may be employed. All those would make the patient being suspicious about being contracted with cancer. Nevertheless, family members and medical staff do not tell the patient the truth.

(c) **Avoiding discussion:** Everyone might have known the fact, but all people concern that the others would feel hurt, so avoid discussing about the patient's condition. Family members worry that the patient cannot stand the impact, then result in suicide or abandonment of hope, and so on. And the patient worries that the family members feel hurt. As such, everyone keeps it in heart and burdens the sorrow solely.

(d) **Disclosing the patient's condition:** patient, family members, medical staff openly face the fact of cancer and discuss about all sorts of issues about the sickness and treatment. Moreover, everyone would share the feelings and thoughts.

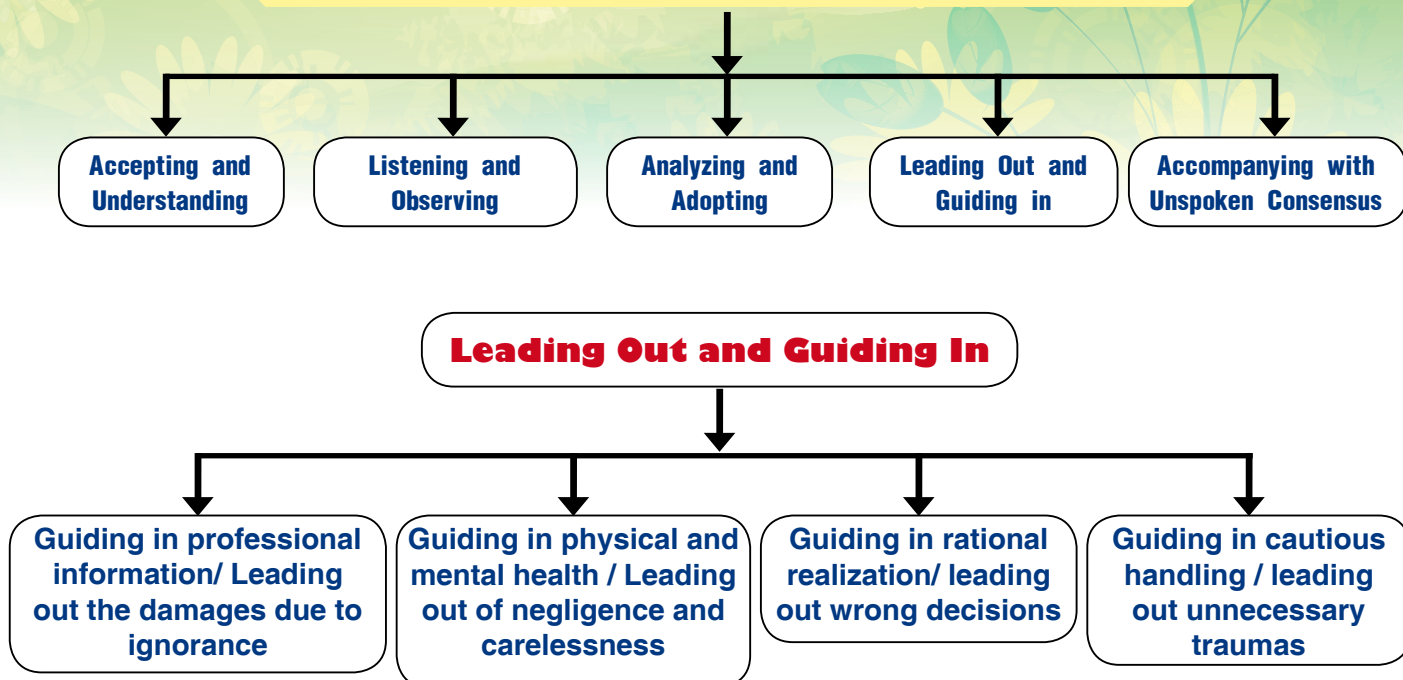
Care-givers and kith and kin must realize how deep the patient knows about the condition and in turn, in accordance with various sorts of conditions of the patient, a plan of disclosure of detailed

contents of the condition would be made. The information of reference to the patients are as follows:

- (i) **Patterns of character**
- (ii) **Background of knowledge**
- (iii) **Past crisis intervention and experience in painful frustration**
- (iv) **Philosophy of life and belief**
- (v) **Number of support systems for backup**

Taking such a cautious approach is to make the sick person to "live more positively", and not to be hurt unnecessarily. **"Leading in cautious attitude of settling issues, while guiding out pointless traumas"**. Since disclosure of patients' condition is a kind of art, and so a cautious approach should be taken. As such, what is the most appropriate way of planning for disclosure of the condition? This would be discussed in the area of "accompanying with unspoken consensus". This will be shared in the next issue of the "Lake of Lotus".....(To be Continued) 🗝️

Things that Care-givers Must Do in the First Stage When the Patient is Approaching Death



[Remarks:

1. The newly-released book on “The Meanings of Near-Death Experiences (1)” – has been published. Its contents include the articles on “The Meanings of the Near-Death Experiences” from Issues 1 to 10 of the “Lake of Lotus”.
2. The newly-released book on “The Meanings of Near-Death Experiences (2) – The Key Points at the Moment of Death and the Essential Revelations of the Tibetan Book of the Dead” has been published. Its contents include the articles on “The Meaning of the Near-Death Experiences” from Issues 11 to 20 of the “Lake of Lotus”.
3. The newly-released book on “The Meaning of Near-Death Experiences (3) – The Various Ways of Realization and Rescue of Dying Kith and Kin” has been published. Its contents include the articles on “The Meaning of Near-Death Experiences” from Issues 21 to 30 of the “Lake of Lotus”.]

The Wisdom in Directing One's Dharma Practice (34)

By Vajra Master Pema Lhadren
Translated by Byron K.K. Yiu



- **The Skills of Chanting Need to be Adjusted & Changed in Accordance With the “Characteristics of One’s Habitual Tendencies, Features of Karmas, Orientations of Aspirations, and Degrees of Mental Concentrations”**
- **The Four Kinds of Inconceivable Forces of the Universe**

Excerpt of Last Issue

For the general populace, and even up to the great Dharma practitioners, their objectives of Dharma practice should be more or less of the following types:

1. **Praying for worldly desires** – For example: to seek for oneself and one’s own relatives to have “longevity, recovery from illness, success in one’s career, good marriage, wealth increase, averting disasters and relief from sufferings, as well as reunion with those deceased loved ones”. Also, there are those who hope to get the “ease of heart and security at the present life”, etc.; or for “fame, wealth, respect” in order to study Buddhism; as well as for those who put in efforts to practice the Dharma.
2. **Rebirth in the good realms** – For example: to hope and pray for rebirth in the heavenly realm, or in the human realm, and not to fall into the evil realms (of animals, hungry ghosts and hells).



to the articles on “The Meaning of Near-Death Experiences” in Issues 4 & 5 of the “Lake of Lotus”).

What are the methods that one can choose in order to achieve these four types of objectives? What will be their effects? What are the **critical key points** that one should pay attention to when judging upon and in choosing those methods of Dharma practice? Regardless of what kinds of religions, the practice methods can be broadly divided into the following types:

3. **Liberation from the tractions of the “cycle of karmic existence”** – to hope and pray for the **freedom** in deciding for oneself as to whether one would be reborn into the six realms (of heavens, asuras, humans, animals, hungry ghosts and hells), or whether to remain in the highest level of the “Realm of Form”, such as the “Akanistha” (the “Heaven at the End-of-Form-Realm”), which is beyond the control of the tractions. (Please refer to the explanations on the “Three Realms” in the article on the “Profound Abstruseness of Life and Death: The Meaning of Near-Death Experiences” in Issue 17 of the “Lake of Lotus”).
4. **Attainment of Buddhahood** – The recovery of one’s “Primordial Nature” and the originally possessed and boundless capabilities, which are free from any bondages and to remain in the “Dharma Realm”. (The “Nature of the Mind”, also known as the “Buddha Nature”, or the “Primordial Nature”, refers to the **original** possession of that most crystal clarity of **awareness**. Please refer

1. **Prayers** – Including confessions, repentance of one’s conducts, and in the making of aspirations and wishes;
2. **Recitations** – mantras, Buddhas’ Holy Names, or sutras;
3. **Visualizations** – themes include the formulae for different types of “meditation”, or even the making use of the internal functions of one’s body for coordination.

Irrespective of which types of practice methods, it must include the training of one’s “mental strength”. Otherwise, it would not be able to produce any effects. One of the important points for judging which of the practice methods are the most effective ones is the **degree of influence** that these can have on one’s “mental strength”? What percentage will they constitute?

The previous five chapters have clearly explained the effects and mysteries that the sound has produced upon people (Please refer to the articles on the

“Wisdom in Directing One’s Dharma Practices” of Issues 24, 25, 26, 27 and 28 of the “Lake of Lotus”). The part on the rationale for the “resonance” and “operations of particles” is one of the functions on the recitation of mantras. Since the sound of mantra does not necessarily have to be words that could be translated or understood, particularly those mantra which are meant for the following purposes:

1. linkage or condensation;
2. cutting off the linkage or condensation;
3. taming and shattering.

The previous few chapters (in particular please refer to the article on the “Wisdom in Directing One’s Dharma Practice” in Issue 26 of the “Lake of Lotus”) have mentioned that the merits of having received the “relevant teachings” in the recitation of mantras are remarkable and vast. As to its abstruseness, apart from relating to its rationale on “resonance” and the “motions among the particles”, it is also very much related to the different high or low levels of the “Right Concentrations” (or “Samadhis” in Sanskrit). According to Bodhisattva Maitreya’s classification, in Volume 45 of the “Yogacaryabhumisastra”, “Dharanis” are divided into the following kinds:

- (1) **Dharma** Dharani – the successful symptom for the receiving of the “relevant trainings” in the proper recitation on this type of “mantras” is that one would be able to remember the words and sentences of the various Sutras in one’s numerous lifetimes (please refer to the article on the “Wisdom in Directing One’s Dharma Practice” in Issue 26 of the “Lake of Lotus”).

- (2) **Meaning** Dharani – the successful symptom for the receiving of the “relevant trainings” in the proper recitation on this type of “mantras” is that one would be able to remember the meanings of the Sutras in one’s numerous lifetimes (please refer to the article on the “Wisdom in Directing One’s Dharma Practice” in Issue 26 of the “Lake of Lotus”).

- (3) **Mantra** Dharani – the successful symptom for the receiving of the “relevant trainings” in the proper recitation on this type of “mantras” is that, through one’s “meditational power”, one would be able to experience the special effects of the “mantras”, and would thus be able to help other sentient beings to remove all kinds of calamities and illnesses (please refer to the article on the “Wisdom in Directing One’s Dharma Practice” in Issue 27 of the “Lake of Lotus”).

- (4) **Endurance** Dharani – the successful symptom for the receiving of the “relevant trainings” in the proper recitation on this type of “mantras” is that one would be able to know the true existence of, and the real meanings behind, the various Dharmas, as well as the ability without losing



them (please refer to the article on the “Wisdom in Directing One’s Dharma Practice” in Issue 28 of the “Lake of Lotus”).

The Skills of Chanting Need to be Adjusted & Changed in Accordance With the “Characteristics of One’s Habitual Tendencies, Features of Karmas, Orientations of Aspirations, and Degrees of Mental Concentrations”

Are there any differences in the recitations of “Mantras, Buddhas’ Holy Names, or the Sutras”? Which of them would have greater strength? What kind of benefits will they have? What are the effects to be produced in the practice methods of reciting “Mantras, Buddhas’ Holy Names, or the Sutras”? To what degrees and levels do these practice methods influence one’s “mental strength”? What is the highest objective that can be achieved? In the articles of **Issues No. 24 to No. 32** of the “Lake of the Lotus”, detailed descriptions on the respective benefits and wonderful merits that can be attained from the recitation of “Mantras, Buddhas’ Holy Names, or the Sutras” have already been mentioned. In the article of **Issue No.33** of the “Lake of Lotus”, a comprehensive account covering the **special features on the various kinds of merits** in the recitation of “Mantras, Buddhas’ Holy Names, or the Sutras”, as well as the descriptions on the various **functions and meritorious actions** to be achieved through their applications, has been given.

Are there any other dimensions that can be compared to the various **functions and meritorious actions** arising from the recitation of “Mantras, Buddhas’

Holy Names, or the Sutras”? For example, what are the differences in the skills for reciting the “Mantras, Buddhas’ Holy Names, or the Sutras”? How long is the time required to be spent in order to give rise to the various effects? Human sounds can arise from the “consciousness” level and the “subconscious” level. Are they useful in one’s Dharma practice?

Sound is a vibration with frequency. If the airflow and muscles of one’s body are blown up to make the vocal cord vibrate, the sound so produced **will have certain impacts on the body**, regardless of whether it has any meaning or not. This **includes the impacts on the spiritual level**. Different degrees of sound would, of course, have different degrees of impact. Therefore, among the Buddhist practice methods, sound has been included as one of the important dimensions for its Dharma practices.



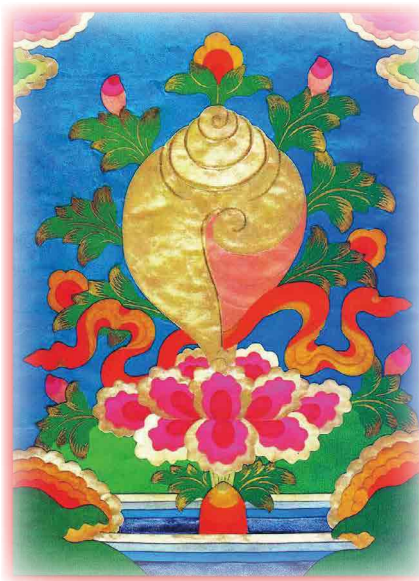
If the sound is longer, there will be more **variables** in its **frequency of vibration**. The air flow so used will also have many more changes which would make different impacts, strong or weak, on different parts of the body, stimulating them from different directions. They will also produce impacts on the **“karmic winds” (the air flows and magnetic fields that are based on one’s own karmas)** at the same time. The more the variables, the longer the time required to produce the effects, simply because **the focal point has been diffused**. Therefore, the shorter





the “Mantras, Buddhas’ Holy Names, or the Sutras”, the faster will be the time needed to produce the necessary effects. The shorter the “Mantras”, the easier they will lead to the “**resonance**” effect because they are more concentrated.

When one recites the “Mantras, Buddhas’ Holy Names, or the Sutras” that are of the same length, the skills of recitations would become one of the major factors that influence the effects. Another major factor is, of course, whether the “**resonant frequency**” of this particular “Mantra, Buddha’s Holy Name, or the Sutra” is suitable for the reciting person, and whether it matches with the “**characteristics of habitual tendencies, features of karmas, orientations of aspirations, degrees of mental concentrations**” of the reciting person, and so on.



If the reciting person understands his own “characteristics of habitual tendencies, features of karmas, orientations of aspirations and degrees of mental concentrations” so well that he **knows how to choose** a “Mantra, Buddha’s Holy Name, or the Sutra” that is **most suitable for himself** to recite, then the skills of recitations will become the only major factor that influences the effects.

Are there, then, any differences in the skills for reciting the “Mantras, Buddhas’ Holy Names, or the Sutras”? Yes, indeed, there are many types of skills

of recitations. In relation to the “**characteristics of habitual tendencies, features of karmas, orientations of aspirations and degrees of mental concentrations**” of different reciting persons, there are different kinds of skills of recitations, among which the **degrees of how in-depth one’s “mental concentration”** (or “**meditational power**”) **can be** (please refer to the articles on “The Wisdom in Directing One’s Dharma Practice” in Issues No. 26, 27 and 28 of the “Lake of Lotus” concerning the relationship between “mental concentration” and the “Mantras”).

Even for the same reciting person, given the fact that his physical states and mental conditions, as well as his “characteristics of habitual tendencies, features of karmas, orientations of aspirations and **degrees of mental concentrations**”, can be so different at different periods of time, and so the skills for

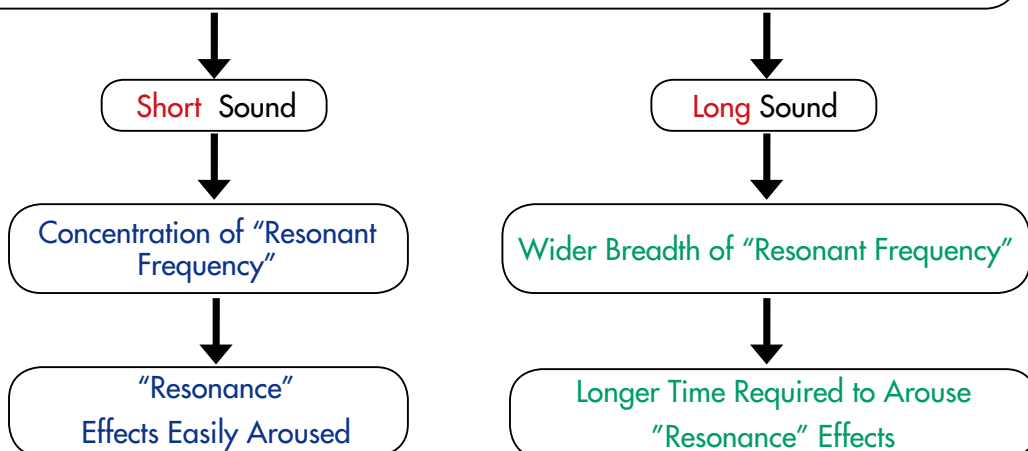
his own recitations will also **need to be adjusted and changed accordingly**.

To know the differences in the skills for reciting the “Mantras, Buddhas’ Holy Names, or the Sutras”, one must first have to understand as to how many types of reciting techniques are there? Whether “**visualization**” **is involved** in any of them? And if so, what are the substances of the “visualization”? Are they **static** or **dynamic**, or whether it is some kind of a “visualization programming”, and so on? All these would have different kinds of handling skills in order to **induce greater and faster effects**. However, these

skills will only be transmitted to qualified disciples who have the affinity. As such, this will not be explained here. It follows that detailed analyses on

the differences in the various skills for reciting the “Mantras, Buddhas’ Holy Names, or the Sutras” will not be given here as well.

Differences in the Lengths of Mantra Sounds



The Four Kinds of Inconceivable Forces of the Universe

In the recitation of “Mantras, Buddhas’ Holy Names, or the Sutras”, the time required to produce the effects will also be affected by the skills of recitations. They are all subject to the same environment, factors, and variables. In order to accurately master the length of time in producing the necessary effects, one must first understand the various factors as mentioned above.

For example, a reciting person with heavy “karmic obscurations”, when comparing with another reciting person of having much lighter “karmic obscurations”, even if they use the same recitation skill in reciting the same “Mantra, Buddha’s Holy Name, or the Sutra”, the time necessary to give rise to the effects will be rather different respectively. This is the influence of one’s “features of karmas” which can trigger the forces from all aspects.

In another example, a reciting person with strong “habitual tendencies”, when comparing with another reciting person of having much weaker “habitual tendencies”, even if they use the same recitation skill in reciting the same “Mantra, Buddha’s Holy

Name, or the Sutra”, the time necessary to give rise to the effects will be rather different respectively. This is the influence of one’s “characteristics of habitual tendencies” under the control of one’s “subconscious”.

In another example, a reciting person having weak “orientations of aspirations”, when comparing with another reciting person of having much stronger “orientations of aspirations”, even if they use the same recitation skill in reciting the same “Mantra, Buddha’s Holy Name, or the Sutra”, the time necessary to give rise to the effects will be rather different respectively. This is the influence of one’s “orientations of aspirations” that can lead to the assistances from all parties.

In another example, a reciting person having poor “degrees of mental concentrations”, when comparing with another reciting person of having much stronger “degrees of mental concentrations”, even if they use the same recitation skill in reciting the same “Mantra,



Buddha's Holy Name, or the Sutra", the time necessary to give rise to the effects will be rather different respectively. This is the influence of one's "degrees of mental concentrations" in its full play on the forces of the Mantras.

Among these four cases, the strong and weak "orientations of aspirations" can sufficiently affect, and make up for, the deficiencies of a reciting person who has heavy "karmic obscurations", strong "habitual tendencies" and poor "degrees of mental concentrations". This is the influence of "the inconceivable strength of aspirations"!

Therefore, those "Gurus" who possess rich experiences in the actual practices of the Holy Dharma, and with the "abilities to teach" at a high standard of Buddhist teachings, can guide those disciples who are having heavy "karmic obscurations", strong "habitual tendencies" and poor "degrees of mental concentrations", so that they can initiate the "appropriate aspirations" relevant to their own "characteristics of habitual tendencies" and "features of karmas". On the conditions of "making up for one's deficiencies" and with the appropriate recitation skills, the time would be speeded up in giving rise to the necessary effects. This is the influential power of a "Guru" in the capacity as the "Main Combined Manifestation of the Three Jewels and the Source of All Forces".

Why is it that these forces are so powerful as to have great impacts upon all sentient beings, including

our efforts in the Dharma practice? As according to the enlightened instructions of the Lord Buddha Shakyamuni that "everything comes from the Mind", and so there are the four kinds of forces of the universe that are most inconceivable, and all of these are related to the strengths and functions of the "Mind". They are namely "the inconceivable forces of karmas, the inconceivable forces of aspirations, the inconceivable forces of the Mantras and the inconceivable forces of mental concentrations". "Inconceivable" means that the power/strength of the force just "cannot be thought of or imagined", and its forcefulness just "cannot be realized through deliberations".



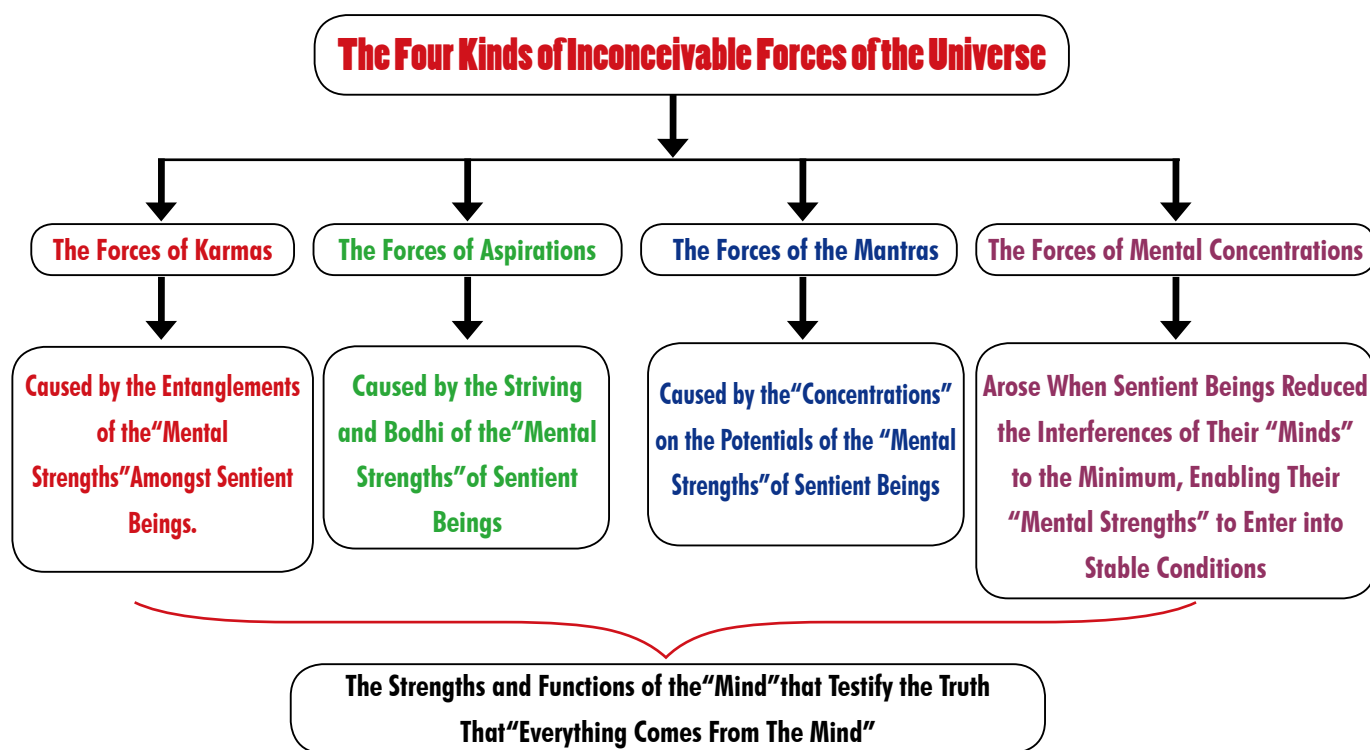
"The forces of karmas" are caused by the entanglements of the "mental strengths" amongst the sentient beings. "The forces of aspirations" are caused by the striving and "Bodhi" ("Bodhi" means "enlightenment") of the "mental strengths" of the sentient beings. "The forces of the Mantras" are caused by the "concentrations" on the potentials of the "mental strengths" of the sentient beings. "The forces of mental concentrations" arose when the sentient beings reduced the interferences of their "Minds" to the minimum, thus enabling their "mental strengths" to enter into stable conditions. All these are, indeed, the strengths and functions of the "Mind". They also testify the truth that "Everything comes from the Mind".

If one can suitably use these "four kinds of forces" with appropriate moderations and levelling in one's Dharma practice, it will be the most sensible way

to apply one's own "wisdom in directing one's Dharma practice". Then, of course, the most suitable guiding persons are those "Gurus" who possess rich experiences in the actual practices of the Holy Dharma, and with the "abilities to teach" at a high standard of Buddhist teachings; but not those so-called "gurus" who only know about superstitions, rituals, boastings, and yet having very low standards of "abilities to teach" the Buddhist teachings.

Human sounds can arise from both of the "consciousness" level and of the "subconscious"

level. And so are they useful in one's practice of the Holy Dharma? As for the origin for the sound of the human body, where does it actually come from? Does it come from one's physical body, or from one's "consciousness"? Does it come from the superficial level of one's "consciousness", or from the deeper level of one's "subconscious"? To what degrees can they render assistances to one's Dharma practice? We will continue to explore and share some of these issues in the next issue of the "Lake of Lotus".....(To be Continued) 🗝️



(Note:

1. The newly released book on "The Wisdom in Directing One's Dharma Practice (1)" has already been published. The content includes the articles on "The Wisdom in Directing One's Dharma Practice" from Issues No. 1 to 10 of the "Lake of Lotus".
2. The newly released book on "The Wisdom in Directing One's Dharma Practice (2) - Seven Methods of Strengthening One's Mind to Counteract Adversities" has already been published. The content includes the articles on "The Wisdom in Directing One's Dharma Practice" from Issues No. 11 to 20 of the "Lake of Lotus".
3. The newly released book on "The Wisdom in Directing One's Dharma Practice (3) - One of the Pivotal Points in Practising the Holy Dharma: The Mysteries and Usage of the Mantras and Sounds" has already been published. The content includes the articles on "The Wisdom in Directing One's Dharma Practice" from Issues No. 21 to 30 of the "Lake of Lotus".

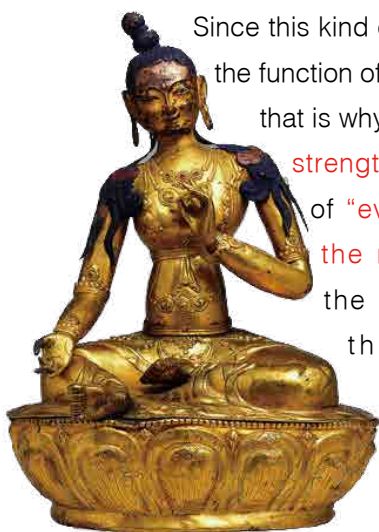
Everything Comes from the Mind (6)

By Vajra Master Pema Lhadren
Translated by Various Disciples



Excerpt of Last Chapter

In order to explain that “everything comes from the mind”, we have to talk about the importance of “mental strength”. Since the “cycle of karmic existence” composes of strong “tractional forces”, which would subject all of us to its bondages, to be drawn into, and under the control of, the tractional forces of the “Law of Cause and Effect”. So, the kind of force we called “mental strength” is the only kind of force that can help us to be released and be liberated from the “cycle of karmic existence”.



Since this kind of force is coming from the function of one's own "mind", and that is why it is called the "mental strength", and is also a sign of "everything comes from the mind". Furthermore, the "tractional forces of the cycle of karmic existence" are, in fact, originated from the combinations and permutations of countless "mental strengths", thus constructing a grand design and blueprint of "everything comes from the mind".

What is the Body of the Bardo ?

The "Bardo" refers to a stage when a life has ended, with its "mind" floating in the space before its commencement of another stage of a new life. At that time, we would habitually use our "mental strength" to form a body. This is called the "Body of Thoughts", or simply as the "Body of the Bardo". Since this is formed due to one's "habitual behaviors", Buddhism calls it as the "habitual tendencies". This "habitual tendencies" would induce certain type of "mental strength" in bringing about the different "functions of tractional forces", and thus formed this "Body of Thoughts". Its material density is very thin and is structurally loosen, and so it is also known as the "Body of the Bardo". As it has not yet been "shaped in any form",



and so one's "mind" would be drawn by one's own "karma", and can thus be reborn at any time in any one of the "six realms". Hence, we call this as the "Body of the Bardo".

What is the Difference Between the Body of the Bardo and the Ghosts ?

What are the "six realms"? It can be divided into the "three upper realms" and the "three lower realms". The "three upper realms" are the realms of "heavenly beings, human beings, and asura". You must have to do some "good deeds" before you can be reborn into these realms. As for the "three lower realms", you must have done some "evil deeds", resulting in producing "negative energies". These "negative energies" would then lead your own downfall into one of the "three lower realms" of the "animals, hungry ghosts, and hell". For example, the "realm of ghosts".



"Ghosts" are sentient beings of another spatial domain. They have been transformed from the "Body of the Bardo" to be reborn as "ghosts". Their body structures are relatively denser, and they belong to those sentient beings who have been reborn with a "fixed form". For those sentient beings with a fixed form, their lives would have to be subjected to the fulfillment of their past "evil karmas" until death, before they can be reborn again into another new life. However, if you are in the state of the "Bardo", there will be many kinds of energies that would make one to change with the different circumstances at any time, and so its nature of "instability" and "impermanence" are particularly strong. Hence, they are known as the "Body of the Bardo". On the contrary, the "ghosts" have already been shaped with a "fixed form", and would thus have to be subjected to the influences of their past karmas for the designated period, before they could be transformed to another form again, unless one has already accumulated very strong power from one's Dharma practice..... (To Be Continued)

