

“I urge everyone to read this....”—RAYMOND A. MOODY, PhD, MD

# My Life After Dying



How 9 Minutes in Heaven  
Taught Me How to Live on Earth



George G. Ritchie, Jr., MD,  
author of *Return from Tomorrow*

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by George G. Ritchie

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# Foreword

by Ian Stevenson, M.D.

George Ritchie's request that I introduce this book has made me ask myself what my credentials for writing its foreword are. I have only two, but they are perhaps important for the present purpose. First, I have known George Ritchie for thirty years in several different contexts: as a person who had the experience of being pronounced dead and reviving; as a psychiatric resident training under me; as a colleague psychiatrist; and as a friend for whom I have great respect and affection. My other qualification for introducing this book is that experiences like George Ritchie's when he was near death have been one of my major research interests for more than thirty years.

George Ritchie was in fact one of the first persons with such experiences whom I interviewed when I was beginning to investigate experiences like his. In that connection, I met him first in February, 1962. Since then I have often heard him talk about his experience and have read at least three different accounts of it that he himself has written at separate times. I am therefore in a position to testify that the reports of his experience have not varied in their essentials over the thirty-year period during which I have known him. Understandably, some accounts give details that others omit; they were and are, after all, presented to different audiences. There has, however, been no embellishment whatever of George Ritchie's memory of his experiences. I think it important to emphasize the stability of his narration, because so many persons mistakenly believe that accounts of extraordinary experiences always become exaggerated with the passage of time.

During the several decades of my investigations of these experiences, I have interviewed perhaps 100 persons who have had experiences of the same general type as George Ritchie's, and I have probably read written or published accounts of at least 100 other such experiences. George Ritchie's is one of the most detailed narratives of these experiences known to me. He had an unusually rich one, not only because of his seeming flight to Vicksburg, Mississippi, from Camp Barkeley, Texas, but even more because of his panoramic memory and the remarkable revelations facilitated by the Person he believes is Jesus Christ.

I have a particular interest in the changes that most persons who come close to death and survive say that their experiences have made in their behavior and in their attitude toward death. It is difficult to believe that a single experience, lasting only a few minutes, could radically transform a personality that had seemingly been fixed for many years, and yet it is even more difficult to discredit the assertions by so many patently honest persons that this has indeed happened to them.

George Ritchie tells his readers about the profound change that he underwent as a result of his experience. As I mentioned, he believes that he had a personal meeting with Jesus Christ. More than that, however, he believes that we all have a capacity for a similar experience of Christ within us. We can appeal to Him, and He may answer our petitions. The appeal and the response may extend to seemingly miraculous healings, of which George Ritchie gives us several impressive examples in this book.

Yet we must qualify for the response through our faith in Jesus and through our conduct. Not for George Ritchie is the teaching of many churches that mere conformity to a doctrine and associated rituals will suffice to bring us the assistance of Christ. He does believe that Jesus' death nullifies our sins, but if He only came to do this, He could have done this in one day. Rather, he spent three years living his life as an example we must follow—however difficult this may seem—if we are to nullify the effects of our sins on ourselves and others. Fortunately, as we stumble along, we can be sure of the assistance of an infinitely loving God. George Ritchie wants to help us believe, as he does, not in a forgiving

God—because that presupposes a judgmental God—but in one of inexhaustible and ever-available love.

It is impossible for most of us to read the teachings of Jesus as described in the four Gospels and other books of the New Testament without thinking that He set standards for our conduct that seem unattainably high. When I labor to remove a few of my own deficiencies, I almost envy George Ritchie the experience he had which, in a few minutes, carried him to a faith and a level of moral superiority that nearly all of us lack. George Ritchie is aware of the great advantage he has had over most of us in being pronounced dead. He does not wish this to happen to any of us, his readers! What he does hope is that others may benefit from reading about his experience. If the experience itself can be marvelously transforming, reading about it can greatly help those of us who do not have the experience. And speaking for myself I know that every time I have listened to George Ritchie narrate his experience, I have felt a surge in my too-feeble wish to make myself a better person. If the readers of this book benefit as much from reading it as I have benefitted from knowing and listening to George Ritchie, they will live a better life and in doing so come to fear death less or not at all.

# Introduction

The background knowledge for this book came from four major sources of experiences in life.

The first experiences came as the result of the love, the correct and mistaken concepts, and the discipline I received from my family.

The second was an experience that I went through at twenty years of age when I was serving in the U.S. Army and was pronounced dead. This occurred in December, 1943, while I was confined in the Camp Barkeley Station Hospital with a diagnosis of double lobar pneumonia. Because of the unusual nature and the profound impact of this experience upon my own mental and spiritual growth and its implications for all of us, I have gone into ample detail in chapters one through four to describe what happened and the circumstances under which it happened.

The third source comes as a result of the training and discipline received in the U.S. Army, in medical school, and in the hospital training necessary to develop both as a family physician and as a psychiatrist.

Finally, the last source came from my patients and youth, who have allowed me to act as their leader, physician and counselor, and have helped me learn from them and their life experiences.

The ideas, results and conclusions gathered from these happenings in my life are being passed on to you, the reader of this book. When you first look at the table of contents, you might leap to the conclusion that it should have been divided into three books. As you read the book, I believe you will realize that in order

to understand the conclusions which I have drawn in the last part, it is necessary for you to be aware of the events of my life recorded in the first two parts.

May this book lead to a better understanding of the nature and love of the Creator of life and some of the things I believe He would have us learn from living on this plane of existence, which we call earth.

Since this book contains information which has been a part of my patients' case histories, the names and backgrounds have been changed to protect their anonymity. Only a scant part of each case history is used to demonstrate a basic truth or principle. The reader should not arrive at the conclusion that therapy is of a short duration or is easy for either the patient or therapist.

I freely admit to harboring severe apprehensions over some of the teachings that are being passed out, in the name of Jesus, the Christ, over the radio, television and too many of our country's fundamental pulpits. I am just as critical of some of our modernist interpretation of the scriptures which would deride the miracles Jesus performed and cause us to believe they can all be explained away by some natural means.

I believe God definitely exists and He is super-naturally natural, as well as naturally super-natural. It is my further impression that He has created an extremely orderly universe which operates as a result of definite laws and principles. If we do not make a strenuous effort to understand these, we break ourselves upon them. It is my further conclusion that throughout history God has sent many great religious leaders, philosophers, scientists, and teachers to help us to come to know these laws. I feel the greatest leader is the one we know as Jesus from our Christian Bible and the one whom I met in Camp Barkeley, Texas. I further believe God is still communicating His truths to us in many ways today and I hope after you have read this book, you will feel the same way.

People began to learn about my "near death experience" from my speaking in churches and various other organizations, through my first book and the *Guidepost* magazine article (both entitled "Return From Tomorrow") and reference to me by such writers as Raymond Moody, M.D., in his book *Life After Life* and Kenneth

Ring, Ph.D., in his book *Life at Death*. As a result of all these, a lot of these people began to think I was a very special or very blessed person. I have consistently said to them that I thought the experience happened to me either because I was possibly more spiritually dense than most people, or because the Christ used me and trusted me to share the experience with others.

I do know that ever since the experience, I have carried a terrific sense of urgency to share it with the lonely, discouraged and dis-eased people such as alcoholics, drug addicts and the social out-cast. I have shared what I have learned from this and other training experiences with my patients and audiences, the knowledge that a God of love loves us regardless of our race, creed, or color. I have received many letters and have had patients say that my sharing my experiences with them has either saved them from committing suicide or completely turned their lives around because it gave them a much better understanding of God's love and plan for their lives. I realize I have had to inject much of my own personal history into this book, but I do so because I hope the reader will come to realize, if God can put up with a "knucklehead" like myself, then He certainly can love and forgive others.

One other point I would like for my readers to recall—life is too complicated to be reduced to the simplicity which most people want to make of it. This is especially true when it comes to understanding the cause of disease. More often the cause of disease is not "either or" but "both and." This is especially true when it comes to the understanding of psychophysiological conditions such as cancer and most of our mental disturbances.



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REVIEW OF  
THE DEATH  
EXPERIENCE

## Chapter 1

# Heading Toward the Beginning or the End?

September, 1943

What twenty-year-old would believe that he would be pronounced dead before the end of the year? Sure, this sort of thing could happen to others, but the human mind's ability to use massive denial is so powerful that I believed when I took out my GI insurance I was guaranteed my three score and ten years. Some very shocking circumstances changed my mind.

In September, 1941, I entered the University of Richmond just outside of Richmond, Virginia, to study pre-medicine. I expected to graduate in 1945, enter the Medical College of Virginia, and receive my degree as a Doctor of Medicine in 1949. After my hospital training, I would go into practice either in my own hometown of Richmond, Virginia, or possibly with my uncle-in-law Dr. John A. Coleman, who was a family physician in Plant City, Florida. I loved and admired Dr. Coleman. In fact, the interest he had shown in me as a child and teenager was one reason I had decided to study medicine. The other reason was my desire to help the disabled, for I had grown up with a wonderful, spirited grandfather who, ever since I had known him, had been crippled with severe rheumatoid arthritis.

Robert Burns, the great Scottish poet, wrote: “Man proposes but oft-times God disposes,” and this certainly turned out to be my case, though I doubt God’s will had anything to do with it. Rather, it was Mr. Hitler and the Japanese attack on Pearl Harbor that were to radically change my schedule.

My first hint of the change came when my father, who was too old to be drafted, accepted a commission as a major in the army. He was in charge of fuel for the U.S. Army camps and would help plan for the storage of fuel for the D-Day invasion of Normandy.

Dad, who was one of the two top experts in the United States on coal utilization, worked for the Chesapeake & Ohio Railroad. The railroad sent him, their top fuel service engineer, as a consultant to any other railroad or large company that was having trouble with the utilization of coal.

After Pearl Harbor, most pre-med students began to go to summer school, in addition to the regular classes, in order to complete as much education as possible before being called into service. By 1943, I had completed most of my courses for a Bachelor of Science degree. Because I could no longer feel comfortable sitting in college studying when I knew it was a matter of months before my dad would be sent overseas, I volunteered from inactive army reserve for active duty. I was soon called to active duty and told to report to Camp Lee, Virginia.

After a stay there of two weeks, I was loaded on a train and sent to Camp Barkeley, Texas. It is situated in the Texas panhandle and is the only place I have ever been where I could march in mud up to my ankles and still have dust blowing in my face.

I had almost completed basic training when I was told to report to the top sergeant at regimental headquarters. No one told me why, and I began to wonder if I was facing some sort of court martial. These fears didn’t abate when I went into headquarters and saw three other soldiers waiting. The top sergeant told me to take a seat and wait until I was called into the room behind the closed doors that he nodded toward. In fact, my fears mounted even higher when a major stuck his head out of the door and called my name. As soon as I went through the door I automatically snapped to attention because I had never seen that much high army brass in

one room. They ranked all the way from the major to a major general. Now I was sure I was in deep trouble. Certainly I had bitched and griped like the rest of the GIs going through basic training, but I hadn't gone AWOL or cussed out any noncoms or officers, and I couldn't think of anything I had done that would deserve a general court-martial, which this must be, to have all this brass here.

Then the questions began. The officers asked me about things I had accomplished as a teenager, what I had done in college and in college sports. They were even interested in what fraternity I belonged to. They were most interested in why I had volunteered for active duty. Then they told me that I was dismissed but that I was to report back to them the next morning at 10:00.

During the rest of the day my buddies gave me a hard time. They wanted to know where I had been. When I told them I had been called before regimental headquarters, the rumors really began to fly as they can only in the army.

The next morning, when I was called into the room again, I was immediately given the order, "Stand at ease." The major general walked up to me, stuck out his hand and said, "Congratulations, soldier, you have been picked under the Army Specialized Training Program to continue your studies of medicine. As soon as your basic training is complete, you will be sent back to your own home town to the Medical College of Virginia to continue the study of medicine."

I thanked them abundantly, snapped to attention, and gave him the best salute I knew. He returned the salute and I was dismissed. As I left, the top sergeant congratulated me and promised I would receive my orders so that I would have them in adequate time to reach the medical college a good time before the actual classes began.

During the next two weeks my spirits soared, as did my dreams. I was going to be one of the youngest men ever to graduate from the Medical College of Virginia. I wanted to help people, but I dreamed, too, of having a cottage at the beach and owning a Cadillac before I was thirty-five.

My dad had already been sent overseas, but I would be home in time for Christmas and would get to see my stepmother, sisters,

brother, and all of my aunts and uncles. This too was very important to me because, during the three months I had been gone, I had missed them greatly.

Ten days before basic was completed, the unexpected happened. A young shavetail second lieutenant who was giving us a lecture on the firing range made the entire company sit at attention for five minutes because two soldiers were talking. The temperature was five degrees above zero. As a result of this, at least five percent of our company ended up in the station hospital with upper respiratory infections.

I was one of that five percent. One week later I was still in the hospital and the regimental sergeant, true to his word, had sent me my orders two days before. They read as follows: "You have your rail tickets enclosed for the train leaving Abilene at 0400 December 20, 1943. A jeep will pick you up at the front door of your ward at 0320 and carry you to the Abilene Station. You should arrive in Richmond in adequate time to report to the Commandant at the Medical College by 1430 on the afternoon of December 22, 1943. You shall be billeted in your own home."

I had shown these orders to the nurses and doctors on the ward. They were a great bunch and all of them were pulling for me. The medical officer in charge of the ward said that if my temperature was down to normal by December 19, there would be no doubt about my catching that train.

On the morning of the nineteenth my temperature was normal and I was transferred to the recuperation ward. The next morning at 0320, I was to be discharged when the jeep driver came to get me. The night nurse was so nice she even lent me her personal alarm clock.

I continued a hacking cough throughout the day. At supper the guy sitting on the next bed asked me if I would be interested in taking in a movie at the hospital theater with him. I had agreed if we could catch the 7:00 p.m. show so that I could be back and into bed by 9:30 p.m. I was going to have to be up by 3:00 a.m. to be dressed and ready when the jeep driver came to take me into Abilene.

When I returned from the show, I felt a little warm and thought I might be running a fever, but I wasn't about to tell anyone on the staff for fear they would put me back into the ward I had just left. This would knock me out of my chances to go to medical school. I had learned enough in basic training as a medical and surgical technician to know that aspirin and APC tablets would reduce fever, so I told the ward boy that I had a slight headache and asked him to give me six aspirin and three APC tablets so that I would be able to control the headache during my train ride. He gave them to me and I took two aspirin and an APC tablet.

While I was there, I also picked up my GI boots, my army overcoat, and my duffel bag, that had been sent over from my company when the orders had been delivered. I placed all of these at the foot of my bed so that I would know where they were and not make a lot of noise and awake the rest of the soldiers when I got up in the middle of the night. I set the alarm clock for 3:00 a.m., climbed into bed and went right to sleep.

I awoke later because of coughing, and turned on the bedside light. It was 1:00 a.m., and I was even more feverish than when I had gone to bed, so I took two more aspirin and my second APC tablet. At 2:00 a.m. I awoke again feeling like I was on fire. I took my last three tablets.

Because I was coughing up so much material and spitting it into a sputum cup on the bedside table, I couldn't go back to sleep. Finally, after what seemed like an eternity because I felt so bad, I turned on the bedside light to see if it wasn't time for the alarm to go off. It was 2:50 a.m. But what really caught my attention was the sputum cup being full of blood.

Thoroughly frightened, I jumped out of bed, went into the ward boy's office and asked him for a thermometer to take my temperature. A minute later, when I took the thermometer out of my mouth and showed it to him, it registered 106 degrees. He bolted out of the ward and in two minutes was back with the nurse. She took my temperature, read it, then said to the ward boy, "Get the captain in charge of the three wards."

When he came in, he looked at me, put his stethoscope on my chest and told me to breathe through my mouth. A moment later

he shouted to the ward boy, "Call for an ambulance to take this soldier to the x-ray section."

While waiting for the ambulance, the doctor called the captain of the x-ray department and told him that he was sending me over and wanted pictures of my chest and the reading on them stat.

"What about me catching my train?" I shouted.

"Forget your train. You are not going anywhere tonight but inside this hospital compound. It will be a long time before you take a train anywhere."

The ambulance men put me on the stretcher, covered me with blankets and carried me out. During the ambulance ride I did all I could to fight back tears. A grown man wasn't supposed to cry --- much less a soldier. The chance to be with my family for Christmas had vanished. Was the opportunity to enter medical school also evaporating? I felt so sick, so depressed, that I could hardly keep my senses.

The next thing I realized was that an army captain was standing over me and my stretcher, which had been placed on this x-ray table in front of the x-ray machine.

"Do you think you can stand long enough, soldier, for us to get a picture of your chest?"

"Certainly, Sir."

I got up and walked to the machine.

"Raise your arms over your head and lean forward against that panel. Take a deep breath and hold it."

I heard the machine make a funny whirling sound and the click that followed. Then everything began to go dark.

Faintly I heard the captain shout to the nurse and the ambulance driver.

"Grab him."

## Chapter 2

# Preamble

Since I collapsed in front of the x-ray machine at approximately 3:10 a.m. on December 20, 1943, and remained unconscious until the morning of December 24, 1943, what is recorded here has been related to me by other people.

The doctor in charge of the medical ward to which I was carried was Donald G. Francy, M.D. The nurse assigned to my case was First Lieutenant Retta Irvine. Statements by both of these attendants were sent to Mrs. Catherine Marshall when she was writing her book, *To Live Again*. Mrs. Marshall and I tried to locate the other attendants on the case but because thirteen years had elapsed and I couldn't remember their names, we were unable to locate the ward attendant or the medical officer who pronounced me dead. Nevertheless, she included my story in the chapter, "Is There Life after Death?"

That morning my condition continued to deteriorate. When the ward enlisted man made his rounds, he could find no vital signs. He quickly summoned the officer of the day, but this medical officer could detect no evidence of respiration, blood pressure or cardiac impulse. He pronounced me dead, and ordered the attendant to prepare my body for the morgue.

The ward boy had to finish his medication rounds before he could carry out the doctor's orders. Then he came back to the little isolation room to which I had been brought. Because I was the



same age as he, and because he was having trouble accepting the pronouncement of death on someone as young, the ward boy went back to the officer of the day and told him he thought he had seen my chest move. He asked the medical officer if he wouldn't make up a hypo of adrenalin to have ready to give to me. The medical officer did this and followed the attendant back into my room.

The doctor again checked me for vital signs and found none. When the officer was about to tell the attendant to go ahead and prep me for the morgue this young attendant asked the doctor to please give me the hypo to be sure. Though the doctor was sure of his diagnosis of death, he could see that this young man was having a hard time dealing with my death. For the ward boy's benefit, he plunged the hypo directly into my heart. To his surprise my heart started beating. It was four more days and nights before I regained consciousness.

The doctor knew for a certainty that it had been 8 to 9 minutes between the two times I had been pronounced dead. I'm sure, as an M.D. myself, the doctor must have become very worried, since no one was sure how long my vital signs had been absent. For then, as now, doctors knew the chance of brain damage after five minutes without oxygen to the brain was profound. This is why Dr. Francy said this in his notarized statement, "*I, speaking for myself, feel sure that his virtual call from death and return to vigorous health has to be explained in terms of other than natural means.*"

Lieutenant Retta Irvine, in her notarized note, says, "*Although fourteen years have elapsed and some of the details are not quite clear, I remember that this patient was pronounced dead at two different times by the medical officer who was on duty, yet after he was given an injection into the heart muscle the patient revived and in due time regained his health. During his convalescence Private Ritchie asked me how near dead he had been. When I told him what had happened he said that he thought that he had been dead. Although he did not go into detail he told me that he had an experience that would probably change his life. Even though this experience was most unusual, I did not doubt this man's sincerity either then or now.*"

There is one other bit of evidence which is extremely important. In the next chapter, I relate that I left my human body and

traveled to a city beside a large river before I realized no one could see me. I came down in front of a white, rectangular all-night cafe. There was a front door, flanked by large windows. In one window was a Pabst Blue Ribbon Beer neon sign.

Ten months later, while driving through Vicksburg, Mississippi, on the way from Cincinnati, Ohio to New Orleans, Louisiana, I recognized this same building. The color of the building and the neon sign were the same. The topographical location on the land as it related to the Mississippi River was the same. This removed any possibility of my experience being a delusion or a dream as so many of the skeptics wanted to believe.

Before my turn for the worse began, on the morning of December 19, as soon as I had been sent to the recuperation ward, I telegraphed my stepmother so she would be able to meet me in Richmond, Virginia.

On the 21st, when my stepmother found I was not on the train on which I was due to arrive, she became very worried. When she still had not heard anything from me by the morning of the 22nd, she called the Berkeley Station Hospital. After a great deal of trouble the hospital operator located the new ward where I had been placed and got the head nurse on the telephone. When Mother asked why I was still there in the hospital, she was told that I had relapsed into pneumonia, was in critical condition and not expected to live.

The nurse asked Mother if it was possible for her to come to the hospital since my condition was possibly terminal. All of this was an extreme shock to her. Mother told the nurse my father, Major Ritchie, was in England and she could not come because she had two small children, my half-brother Henry who was nine and my half-sister Bruce who was only six and a half and was in bed with viral pneumonia. (My older sister, Mary Jane, had already married and was not living in Richmond.) After suggesting my mother notify the commandant at the Medical College of Virginia as to what had happened, she took Mother's phone number in case they had to reach her.

Seven weeks later when I finally arrived in Richmond and she met me at the station, she was somewhat prepared for how I

looked as a result of her phone call to Texas, but not totally. When I entered the hospital with the upper respiratory infection, I was finishing my basic training and was in excellent physical condition. I was six feet two inches tall and weighed 175 pounds. The first time the nurse weighed me a week after my return to consciousness, I weighed 107 pounds.

The doctor who was in charge of my case stated emphatically there was no way that he would sign my discharge until my weight reached 135 pounds. When they were sure there was no brain damage, one of the medical staff called the Medical College of Virginia and found they were saving my place. During the next five weeks, the nurses and ward men fed me more milk shakes, fruit juices, snacks and extra helpings at meals than I had ever had. They were a terrific group and did everything they could to help me gain weight.