Lucidity Letter

Vol. 3, No. 4
December, 1984

Dr. Jayne Gackenbach, Department of Psychology
University of Northern Iowa, Cedar Falls, Iowa

The Lucidagogic Effect of Medical Residency On-Call Nights on Dreaming

Kenneth L. Moss
Wayne State University

During hospital on—call nights over the course of my medical residency I have found an increase in the frequency of lucid dreams. The time span of this experiment includes twelve months of a medical residency (July, 1983 — June, 198k) and the first three months of a psychiatry residency (July, 198k — September, 1984). These on— call nights occurred at the frequence of 1—3 times a week and covered a working period between 5:00 pm — 8:00 am. From about 1:00 am to 8:00 am I would attempt to sleep, however, this would be frequently interrupted by telephone calls or more serious problems that required an on—site visit. As a result of these factors I would have a disrupted sleep ranging in accumulated time of 0—k hours with interruptions ranging between a few minutes to hours. Lucid dreams typically occurred in the early morning hours during a sleep period of at .least 20 minutes which was preceded by a period of wakefulness of at least 20 minutes from the last sleep period. The3e periods of wakefulness (lucid intervals) were characterized by the need for alert activity, decision making and potentially emotional situations. Although I have been a lucid dreamer over the last five years and frequently study the subject during the day I made no effort to induce lucid dreams during on—call nights. I was in fact preoccupied with other issues and viewed the lucid intervals as undesirable interruptions. Hence, the primary immediate lucidagogic factor was a preceding alertful period of wakefulness.

On those nights in which I attained at least 20 minutes of sleep successful induction (at least of one lucid dream following a lucid interval) occurred 39 out of 64 nights (60.9%). This compares with a 35.9% for non—experimental nights. Furthermore, by selecting on—call nights that I received at least 3.5 hours of sleep the induction rate was 81.8% (18/22). There was not dramatic increase in the total number of lucid dreams occurring on a given successful induction night. In tact the total number of non— lucid dreams was decreased. Those nights following on—call nights had an induction rate roughly equal to that of regular nights. There was no apparent increase in the quality of the lucid dreams occurring during the experimental nights.

These results once again confirm the ability of an alertful period of wakefulness in the sleep cycle to increase the frequency of lucid dreams in a preexistent lucid dreamer even if specific induction techniques are not attempted providing a certain minimal amount of sleep is attained. This may encourage lucid dreamers to take advantage of possible adverse conditions which involve sleep cycle disruptions.

Taken in part from: Moss, K.L., 1980-1984 Dream—Research Journals. Unpublished.

Original source: *Lucidity Letter Back Issues*, Vol. 3, No. 4, December, 1984, page 99.