

Physical Signs in Reincarnation Cases

The best-studied physical signs in reincarnation cases are birthmarks that match fatal wounds, but physical correspondences between a case subject and a deceased person may be expressed in many other ways as well. Some signs reflect the manner in which the previous person died; others are related to aspects of his or her core identity. These phenomena go beyond chance coincidence and may best be interpreted as the action of a reincarnating mind on its new body.

Overview of Physical Signs in Reincarnation Cases

The subject of a reincarnation case may be identified with a deceased previous person not only through his memories and [behaviours](#) but also on the basis of various types of physical abnormalities. The most common and best studied of these abnormalities are [birthmarks](#) corresponding to the death of the previous person. Not all birthmarks match fatal wounds, however; almost anything of significance to a person may provide a model for a birthmark or birth defect,^{[1](#)} and some birthmarks reflect [marks intentionally made](#) on the body of a dying or deceased person for the purpose of tracking him or her into the next life.

This article is concerned with physical signs other than birthmarks that link a case subject to a deceased person. Among these are defects of the body's limbs and head, anomalies of the skin and internal diseases that reflect the circumstances of the previous person's death. Other physical signs are related to aspects of the previous person's core identity. Signs of the latter sort are especially prominent when there is a difference of sex or ethnicity between the previous person and the case subject. There may also be physical differences between the members of monozygotic twin pairs, in line with the deceased persons with whom the children identify.

There is less information on physical signs other than birthmarks not because these phenomena are uncommon, but because, apart from major birth defects, they have been relatively little studied. [Ian Stevenson](#), the pioneer of reincarnation research, only came to realize their significance gradually.^{[2](#)} Most of what is known on this topic comes from his 1997 book, *Reincarnation and Biology*, although other investigators have contributed examples as well. This article does not attempt an exhaustive inventory of the types of physical signs in reincarnation cases, but merely to give a sense of their nature and variety.

Physical Signs Related to the Death of the Previous Person

Defects of the Feet, Arms and Head

Stevenson describes several examples of birth defects related to illnesses, accidents and murders in *Reincarnation and Biology*. He and his colleagues have

reported other cases in journal papers.³ Although not as common as birthmarks in commemorating fatal wounds, birth defects also occur in reincarnation cases.

Stevenson and his colleagues studied a great number of cases with major birth defects in Burma. Not uncommonly, the same child has several deformities. Ma Myint Thein was born with missing or badly deformed fingers on both hands, as well as a linear birthmark on her neck and a second birthmark on her back in the area of her left kidney. These deformities were presumed to derive from a previous life, but her family had no idea who she had been until after she began to have memories about it at the age of five or six. Thereafter the previous family was traced and she was identified as a man who had been murdered some months before her birth. The man had been attacked while riding his bicycle. The fingers of both his hands had been sliced off, some removed completely and others left dangling. His throat had been cut and he had been stabbed in the lower back, in the area of his left kidney.⁴

Birth defects may be correlated with accidents and illness as well as murders. A Burmese girl, Ma Khin Mar Htoo, was born with a missing lower leg and deformed hands. When she was three, she began to identify herself as a hawker at a railway station who was walking along some normally unused tracks when she was struck from behind and run over by a train. The accident severed her legs from her body and damaged her hands.⁵ Augustine Nwachi Severe, a Nigerian Igbo, was born with an extreme defect of his left foot. He was identified as the reincarnation of his paternal grandfather, who died after his left foot had developed gangrene.⁶

The head as well as the extremities may be involved in birth defects related to reincarnation. Süleyman Çapar, an ethnic Turk, was born with a soft indentation in his skull. When he was old enough to talk, he gave enough information for his parents to identify him with a man who had died after being hit on the head by a shovel.⁷ At birth Semih Tutuşmuş, a Turkish Alevi, was born with severe defect of right ear, which was much reduced in size. He recalled having been a man whose right ear had been shot in a hunting accident.⁸ A Burmese boy, Maung Htoo, who was born with a cleft lip and cleft palate, recalled having been a man who had died from leprosy which had affected his face and mouth.⁹

Anomalies of the Skin

A Burmese girl, Ma Khin Nyein, recalled two previous lives, in the earlier of which she was a monk who was deep in meditation when his monastery caught fire. Both the intermediate previous person and Khin Nyein suffered from severe ichthyosis (a condition of scaly skin) which she attributed to the monk's having burned to death. Khin Nyein was distantly related to the intermediate previous person but not to the monk who had died in the fire.¹⁰

In a similar case, a Burmese boy Maung Yin Maung recalled the life of a man who died in fiery plane crash. At birth his skin was unusually red and covered by small vesicles, from some of which a fluid oozed. After about a month, these vesicles healed, then his skin 'shed flakes', became entirely normal, and remained so.¹¹

Internal Diseases

Talid Sowaïd of Lebanon recalled the life of a man who was shot through the tongue. He was late to start talking and then had trouble articulating certain sounds, especially those that required raising the tongue to the roof of the mouth.¹² Patrick Christianson, an American boy who remembered being a policeman who died after being shot in the chest, had significant congenital heart disease.¹³ A Brazilian girl, Marta Lorenz, who recalled the life of a woman who died of pulmonary tuberculosis, was plagued with upper respiratory infections.¹⁴

Physical Signs related to Post-Mortem Events

Physical signs may relate to events that occurred after death, as well as to those that preceded death and caused it. Stevenson investigated three cases of cadaveric rigidity, which may occur when death is gradual and accompanied by emotional trauma, as in drowning. In each of the three cases, children assumed a contorted posture that characterized the previous body when it was discovered.¹⁵

A more extreme example of birth defects related to post-mortem events is the Nigerian Igbo case of Cordelia Ekouroume. A medicine man whose sister had been threatened with death dispatched the offender by witchcraft. The woman later died of natural causes and was reborn in her brother's family (as identified by an oracle), but died again after a year. Enraged that she had not lived longer after what he had done for her, the man chopped the fingers and toes off the child's corpse and hung them, along with some 'medicines', in a bag in the rafters of his house. The medicine man also bound the corpse's legs together, to prevent the girl's spirit from walking. This ritual was intended to banish her from his family. For eleven years his action had the desired effect, but a new wife unacquainted with these events cut down the bag, breaking the spell, and her next child (she had already delivered three healthy babies) was born with several malformed digits (both fingers and toes) and with a deep constriction ring on the lower left leg, where the corpse had been bound.¹⁶

Physical Signs Related to the Previous Person's Core Identity

Facial and Other Personal Features

Many cases include physical signs that are related not to events at or after death, but to elements of what may be regarded as the previous person's core identity. Norman Despers, a Tlingit boy with poor eyesight, recalled the life of his grandfather, who had been blind for the last four years of his life.¹⁷ Alexandrina Samona, an Italian girl, had an asymmetrical face and suffered from hyperemia of (increased blood flow to) the left eye and seborrhea (inflammation) of the right ear, just like her deceased sister.¹⁸ American Cruz Moscinski had a cleft chin resembling the cleft chin of his father's best friend, who had killed himself shortly before his birth.¹⁹

Similarities in facial features are common, but not as universal as they are sometimes imagined to be. Stevenson devoted a chapter of *Reincarnation and Biology* to 'the face as a type of birthmark or birth defect'. He emphasized that facial

similarities are not always present and when they are one must consider whether genetic factors could account for them. The more significant facial features are those that reflect wounds or diseases that impacted the previous person's face; those that are uncharacteristic of the subject's nationality or ethnicity, but are congruent with the nationality or ethnicity of the previous person; and those that express differences between monozygotic twins.

Physical Signs in Sex-Change Cases

Girls who remember having been boys or men may be of relatively large stature and in other ways have a more masculine appearance than other girls.²⁰ Dulcina Karasek, a Brazilian girl, said she had been a married man before. She gave her name then as Zeca, the nickname of a distant relative on her father's side. Dulcina preferred to wear boy's clothes to the clothes of girls and when she mounted horses, she did it as men rather than women would. She was relatively short, as Zeca had been, but was very muscular and at puberty 'grew a great deal of hair, especially on her arms, legs and upper lip, where she had a noticeable mustache'. Her breasts were unusually small and so was her pelvic outlet, so much so that a doctor advised that she would not be able to deliver a baby in the normal way.²¹

Stevenson does not say whether Dulcina's menarche was delayed, but it is late for many girl subjects of sex-change cases. In Burma, the average age at menarche is 13.2 years, but among seven Burmese cases where girls remembered having been boys or men, the average age was fifteen years.²²

Physical Signs in Inter-Religious and Inter-Ethnic Cases

Cases in which the previous person and the subject who recalls his life come from different religious or ethnic backgrounds may have physical as well as behavioural features. Some Hindu boys who recall having been Muslims are born without foreskins – a significant birth defect, since circumcision is a Muslim practice, but not a Hindu one.²³

Burmese who recall having been Indians have darker complexions than do most Burmese.²⁴ A group of Burmese children who remembered having been Japanese soldiers during World War II were judged by Japanese raters to have Japanese facial characteristics.²⁵ Burmese children who claim to have been Englishmen or Americans are often larger physically than other children, have eyes of the Caucasian shape, blue irises, blond hair and a relatively light skin tone; some are virtual if not actual albinos.²⁶

Ma Win Myint never said anything about a previous life, but she looked strikingly like a deceased British friend of her mother, Paul Taylor. Taylor had lived in Burma for years but had died in London of cancer of the tongue. In his last years, he had complained of sore throats and before his death his throat became considerably enlarged. Taylor's complexion was unusually red. He had a sharp nose, freckles and blond hair; he was colour-blind. When Win Myint was born, she was noticed to have an unusually reddish complexion. She developed freckles on her nose, which was more pointed than is common for the Burmese. In childhood she had an

abnormally thick neck and suffered from persistent sore throats. Like Taylor, she was colour-blind.[27](#)

Physical Differences between Monozygotic Twins

Equally striking are physical differences between monozygotic (identical) twins. [Gillian and Jennifer Pollock](#) closely resembled each other when young but as they grew older, their faces came to be distinctly different, more like the faces of the deceased sisters with whom they were identified. There were other differences also. Only Jennifer had birthmarks. One matched a scar that her sister Jacqueline had had, the result of an accident when she was three (two years before her death) and another was a mole on her waist where Jacqueline had had a mole. Gillian for her part had a peculiar splay-footed gait in which she resembled her sister Joanne but not Jennifer or Jacqueline.[28](#)

The monozygotic Sri Lankan twins Indika and Kakshappa Ishwara weighed the same at birth but their faces were different and Indika quickly became taller than Kakshappa. In addition, Indika (but not Kakshappa) had a nasal polyp at the site the person whose life he recalled had had a tracheal tube inserted in the week before his death.[29](#)

Accounting for Physical Signs in Reincarnation Cases

Heredity

Heredity must be considered a possibility for the birth defects in some cases but is not plausible when there is no genetic relationship between the previous person and the subject. Nevertheless, Stevenson considered the role heredity might play in the expression of albinism, which should not show up unless both parents were heterogeneous for the trait. Parents who by chance produced an albino child might then shape his behaviours and otherwise impose upon him a European identity. However, Stevenson also noted evidence inconsistent with this hypothesis, such as that all his Burmese albinos had eyes of the Caucasian rather than Mongolian form, and yet there is no known linkage between albinism and eye form.[30](#)

Chance Correspondence

Reincarnation sceptic Leonard Angel argues that many apparent correspondences between the birthmarks on a case subject and the wounds or marks on a deceased person are due to backward reasoning on Stevenson's part. That is, Stevenson starts with the birthmark and infers what might have caused it, without sufficient independent evidence of such a cause. He then, according to Angel, plays up the correlations to make them seem more meaningful than they are. In other instances, Angel claims, the evidence for a close fit between the locations of a wound or scar on a deceased person and a birthmark or birth defect on the case subject is not as strong as Stevenson presents it as being.[31](#)

Motivated Super-Psi

Braude combines the chance explanation with motivated super-psi (extreme ESP) in order to explain how case subjects come to know about the previous persons whose marks they coincidentally bear. After they see the birthmarks on a newborn, members of its family reach out via psi to find a deceased person with bodily features matching those marks, acquire information about that life and pass it on psychically to the child, shaping his behaviors in the process; or alternatively, a member of the previous person's family psychically locates a child with the appropriate birthmarks, then transfers data about the previous person mentally to him or her.³² Parents are motivated to use their psi in this way in order to assuage their guilt over having given birth to a child with the defects in question, Braude suggests.³³

Maternal Impression

Maternal impression is the influence of a mother's thoughts and feelings on her baby in utero, a possibility for which there is some evidence.³⁴ Parapsychologist Jürgen Keil suggests that birthmarks and other congenital abnormalities connected to a deceased person could be explained by maternal impression. In cases in which the previous person was a stranger, the mother could have become aware of the injuries that served a model for the impression by ESP in a dream she did not recall.³⁵

Transmission via a Subtle Body

Stevenson proposed that memories, behaviours and form were conveyed from one life to another via a 'psychophore', his version of a subtle or astral body. Physical impressions carried on the psychophore would help shape an embryo or fetus through a field effect when the psychophore moved into 'topical alignment' with it.³⁶

Direct Action by a Reincarnating Mind

Stevenson also presented evidence that the mind can influence its body directly. Reincarnation researcher [James Matlock](#) points out that if this is so, there is no need for a psychophore to explain the appearance of birthmarks and birth defects. A reincarnating mind might use [psychokinesis](#) to alter its body's chemistry, tissues or genome in order to produce the observed effects, according to its self-image.³⁷

James G Matlock

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Endnotes

Footnotes

- [1](#). See Stevenson (1997) and Matlock (2019).

- [2.](#) Stevenson (1997), 1867.
- [3.](#) Stevenson (1997); Pasricha (1998); Pasricha, Keil, Tucker & Stevenson (2005).
- [4.](#) Stevenson (1997), 1200-15.
- [5.](#) Stevenson (1997), 1236-50.
- [6.](#) Stevenson (1997), 1335-39.
- [7.](#) Stevenson (1997), 1429-42.
- [8.](#) Stevenson (1997), 1382-403.
- [9.](#) Stevenson (1997), 1466-75.
- [10.](#) Stevenson (1997), vol. 2, 1706-15.
- [11.](#) Stevenson (1983), 292.
- [12.](#) Stevenson (1997) vol. 1, 380-81.
- [13.](#) Tucker (2005), 51-55, and Tucker (2013), chap. 1; see also Pasricha, Keil, Tucker, & Stevenson (2005), 379-81, under the initials DG.
- [14.](#) Stevenson (1974), 183-203.
- [15.](#) Stevenson (1997), vol. 2, 1884-90.
- [16.](#) Stevenson (1997), vol. 2, 1634-40.
- [17.](#) Stevenson (1974), 245-48.
- [18.](#) Lancelin (1922, 312-3; Stevenson (2003).
- [19.](#) Haraldsson & Matlock (2016), 248-52.
- [20.](#) Stevenson (1997), pp. 1873-81.
- [21.](#) Stevenson (1997), 1880.
- [22.](#) Stevenson (1997), 1663.
- [23.](#) Pasricha (1998), 287-88; Stevenson (1997), vo. 2, 1622-23.
- [24.](#) Stevenson (1997), 1745-47.
- [25.](#) Ohkado (2014); see also Stevenson (1997), vol. 2, 1913-15.
- [26.](#) Stevenson (1997) vol. 2, 1757-846.
- [27.](#) Stevenson (1997), vol. 2., 1752-57.
- [28.](#) Stevenson (1997), vol. 2, 1893, 2045, 2053-56.
- [29.](#) Stevenson (1997), vol. 2, 1995-97.
- [30.](#) Stevenson (1997), 1855.
- [31.](#) Angel (2002).
- [32.](#) Braude (2003), 181.
- [33.](#) Braude (2003), 221.
- [34.](#) Stevenson (1992).
- [35.](#) Keil (2010), 82.
- [36.](#) Stevenson (1997), vol. 2, 2086-88.
- [37.](#) Matlock (2019).