The impact of Neuroinflammation and what to do about it

Rob Coben, PhD, Anne Ward-Stevens, PhD Integrated Brain Health

Outline

- Inflammation and chronic inflammation
- Neuroinflammation
- The special case of COVID-19
- How chronic inflammation leads to symptoms
- Interventions
- Diet/Nutrition, Photobiomodulation, Neurofeedback
- Case examples

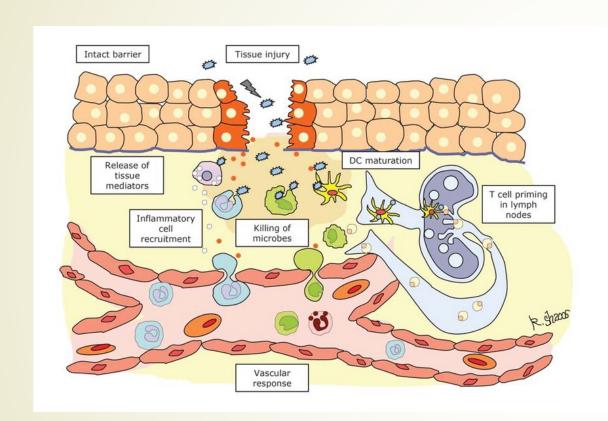
Materials that are included in this course may include interventions and modalities that are beyond the authorized practice of mental health professionals. As a licensed professional, you are responsible for reviewing the scope of practice, including activities that are defined in law as beyond the boundaries of practice in accordance with and in compliance with your professional standards.

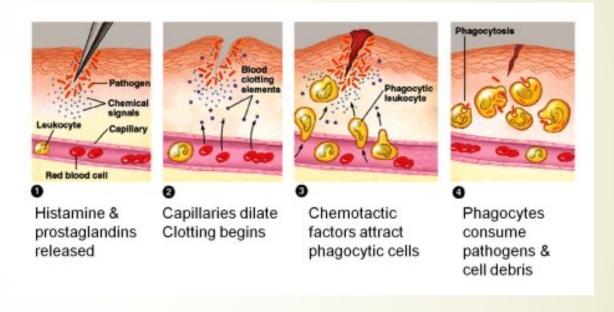
What is inflammation?

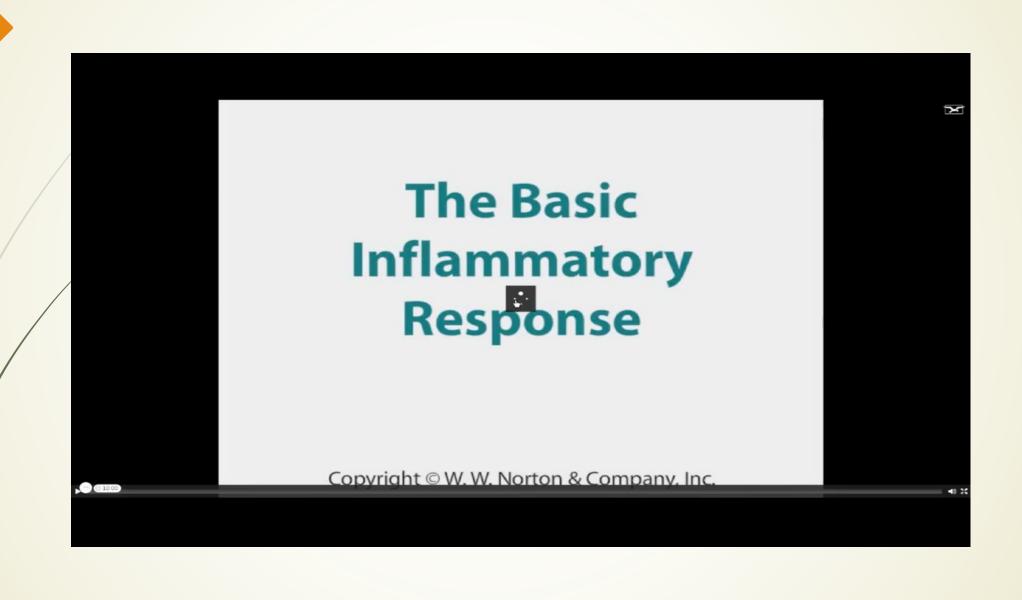
- Your bodies natural response to protect itself from harm.
- Think of cutting your finger and what happens swelling, from blood cell accumulation and healing results.
- Your immune system dispatches an army of white blood cells to surround and protect the area, creating redness and swelling.
- The same is true for bacteria or viruses.
- This would also be true to physical injuries, chemical and radiation exposure.
- Signs of inflammation include redness, heat, swelling, pain and/or loss of function.
- Your body then responds by feeling ill, exhaustion and fever. This occurs because your immune system is active and requires more energy to be successful.
- There are also changes in the blood including an increased number of immune system cells.

How does your immune system respond?

- When inflammation occurs, immune system cells get activated.
- These include hormones of bradykinin and histamine leading to blood vessel dilation (more blood gets there) leading to the area turning red and feeling hot.
- These hormones irritate nerves sending pain signals to the brain (protective response).
- Immune cells can then pass out of blood vessels so that they can reach the inflamed tissue.
- Mucous membranes also release more fluid which can flush viruses away.







How does acute inflammation lead to chronic inflammation?

- Chronic inflammation happens when the immune response lingers leaving your body in a state of alert.
- Over time this will have a negative impact on your tissues and organs.
- Common symptoms of chronic inflammation include fatigue, fever, mouth sores, rashes, abdominal pain and chest pain.
- Causes may include untreated causes of acute inflammation (infection, injury), autoimmune disorder, long term exposure the chemicals or pollutants.
- Other causes may include smoking, obesity, alcohol and chronic stress.
- Foods that increase inflammation include sugar and high fructose corn syrup, refined carbohydrates, fried foods, trans fats, vegetable oils, red meat and processed meat.

Major Causes of Chronic Inflammation

Poor diet

Advanced glycation end products (AGEs) due to elevated blood sugar

Insulin resistance

Mitochondrial dysfunction

Oxidized lipoproteins (such as low-density lipoprotein, LDL)

Lack of exercise

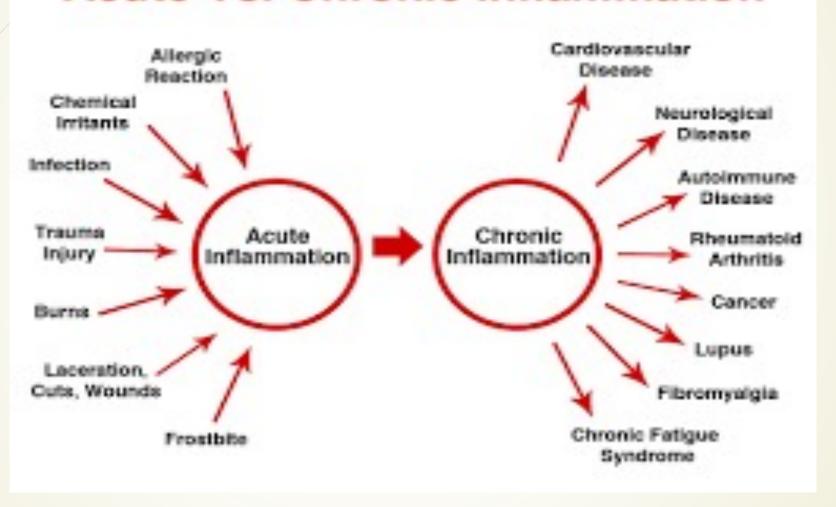
Inadequate sleep

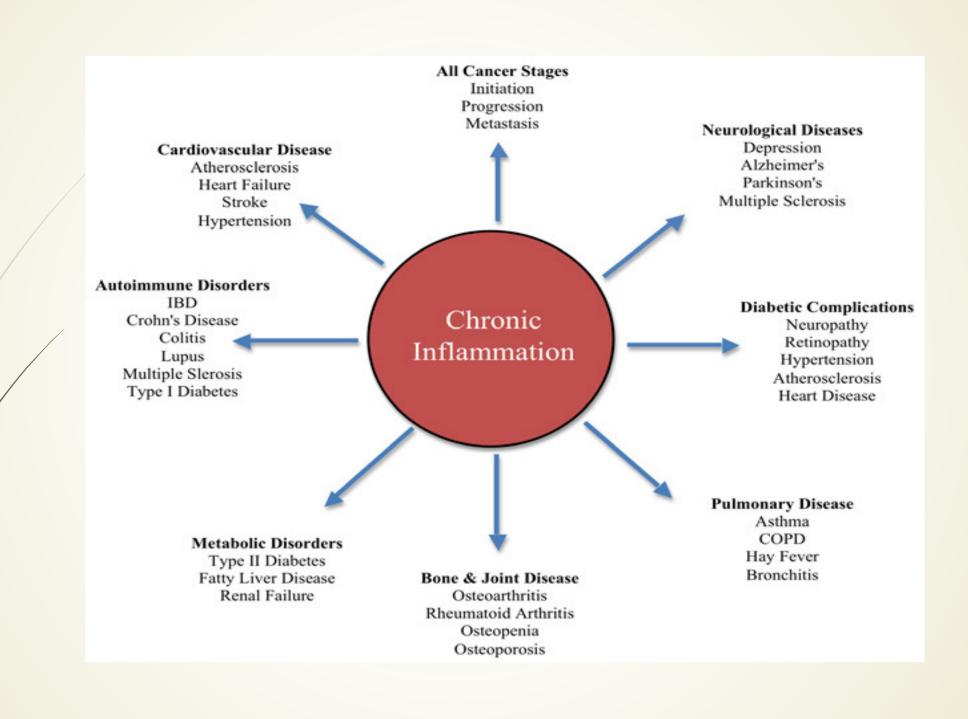
Smoking

Excess stress

Environmental factors (i.e. pollution)

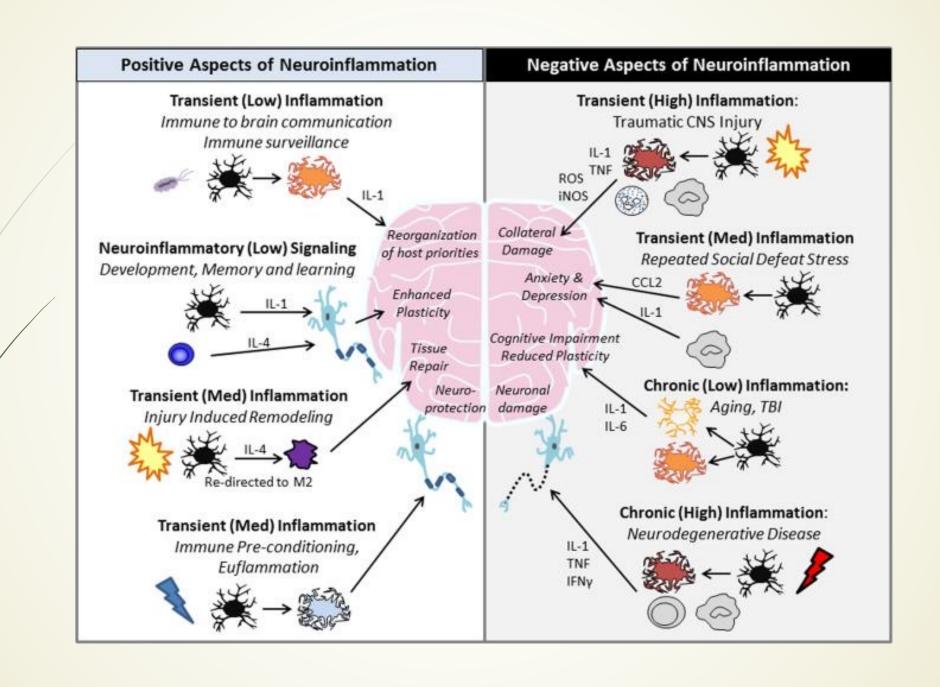
Acute Vs. Chronic Inflammation

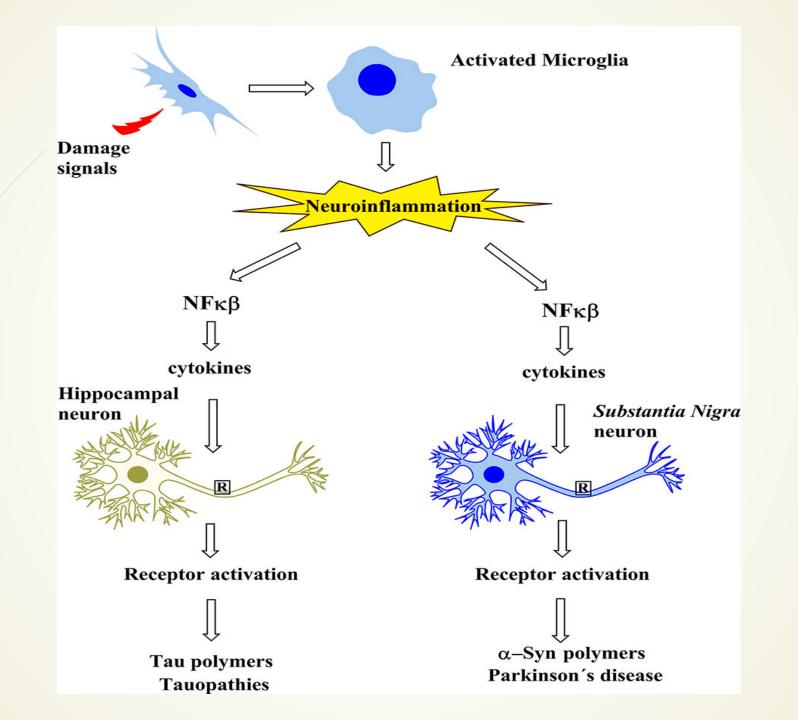


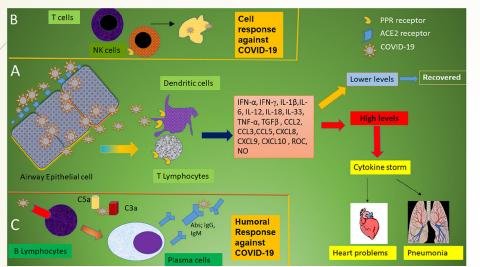


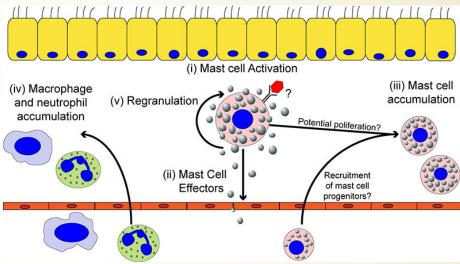
Neuroinflammation and it's disorders

- Neuroinflammation is an inflammatory response in the brain or spinal cord.
- This is commonly seen in traumatic injuries.
- Chronic stress leads to neuroinflammation which increases the likelihood of increasing stress responses.
- Aging and brain decay also kick off an immune response and inflammatory process. If this is not adressed it can worsen the effects of aging.
- Microglia are critical in modulating neuroinflammatory responses.
- There is an intimate relationship between the brain, spinal cord and immune system.









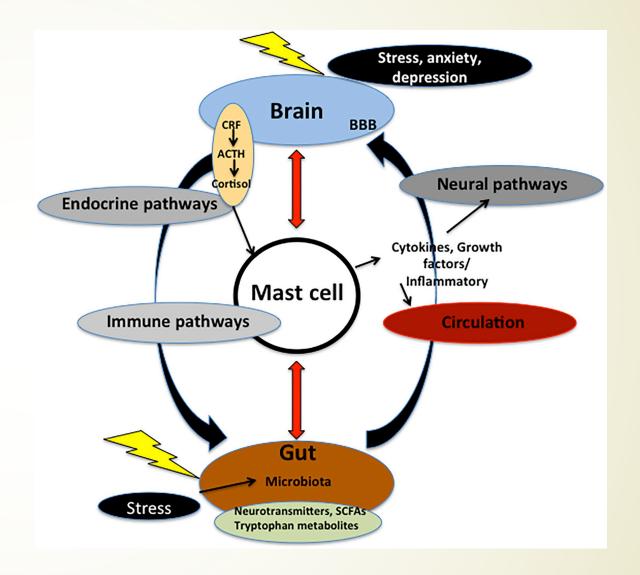
COVID-19 Inflammatory Response

COVID-19 Inflammatory Response

- Intensive complications in those that are older and have chronic disease states – more severe inflammatory responses.
- Those with heightened inflammatory levels can have uncontrolled inflammation leading to a cytokine storm.
- The COVID-19 infection, of course, leads to an increase in inflammation to attack the virus. It commonly infects the lower respiratory tract via attachment to S proteins and ACE2 receptors (in epithelial cells).
- Organs rich in these cells are susceptible including the kidney, gut and brain.
- This invasion makes clearing out the virus very challenging and can lead to severe or prolonged symptoms.

Mast Cell Activation Syndrome

- Mast cells respond to infection and help clear out invading agents.
- With the cytokine storm over production of mast cells can occur leading to hyperinflammation.
- It is estimated that MCAS occurs in about 15% of the population.
- This may be especially salient for "long haulers" and their prolonged recoveries.



Anti-inflammatory intervention

- Treat the gut with anti-inflammatory agents
- Enhance immune system functioning.
- Work on brain pathways.
- Reduce stress, anxiety, depression.
- Resolve endocrine pathways.
- Enhance blood circulation.

Personal COVID-19 Timeline

Acute COVID-19 infection (1/11/2021)

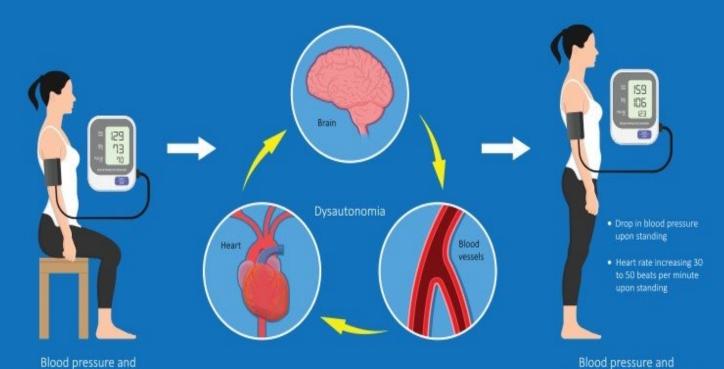
Acute Illness
Duration and
Symptoms (fever,
chills, fatigue)

Transition into long hauling/POTS symptoms (two weeks for cute sxs to resolve)

Developing long hauler POTS symptoms

- As the fever broke, I continued to have excessive fatigue and just felt unwell.
- I started getting light headedness and dizzy spells upon standing.
- Resting heart rate shot up to 85 (was 55).
- Upon standing and traversing a flight of stairs my heart rate would go up to above 130 bpm.
- Had one episode of passing out upon standing.
- Started becoming very concerned with distress and anxiety symptoms.





Heart rate in sitting position

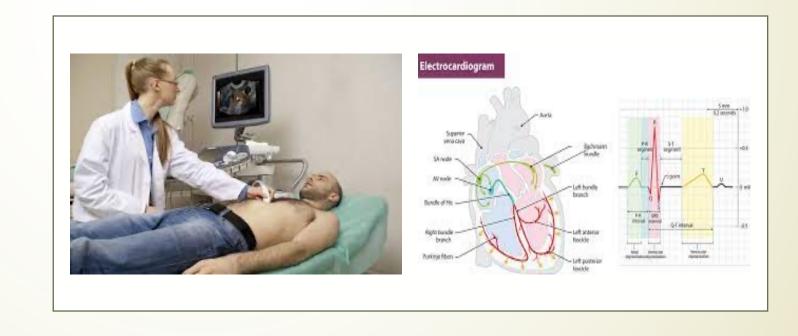
Blood pressure and Heart rate in standing position

Symptoms of POTS

- Dizziness or light-headedness
- Shaking and sweating
- Weakness and fatigue
- Shortness of breath
- Chest pain
- Fainting
- Heart palpitations
- Headaches
- Poor sleep

Medical tests

- Routine physical exam was normal.
- Blood pressure was a little high but not excessive.
- EKG was negative.
- Echocardiogram was normal.



Interventions (self-designed program)

- FB group for long haulers with lots of good info.
- Sleep at least 7 hours per night.
- Rest when needed.
- Hydration (at least 80 ounces of water and electrolytes per day).
- No caffeine.
- No alcohol.
- Low sugar, anti-inflammatory diet.
- Low stress environment.

Supplements, vitamins

- Vitamin C
- Vitamin D3
- Zinc
- Quercetin
- N-Acetyl Cysteine
- Nicotinamide Adenine Dinucleotide+
- ATP Fuel

Supplement Facts Serving Size 5 Capsules Servings Per Container 30

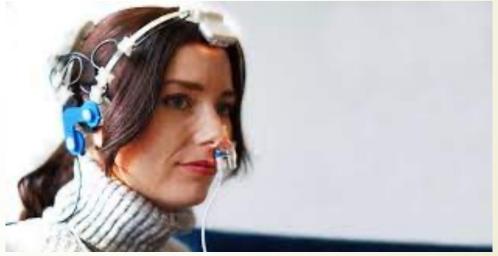
Amount Per Serving	% Daily V	alue**
Vitamin E (as d-alpha tocopheryl acid succinate)	17 mg	110%
Calcium (from Mitochondrial Pro Regulator™ Blend)	137 mg	11%
Phosphorus (from Mitochondrial Pro Regulator™ Blend)	37 mg	3%
Magnesium (from Mitochondrial Pro Regulator™ Blend)	41 mg	10%
NT Factor® Proprietary Blend: NT Factor Lipids® (Pat.No. Fructo-oligosaccharides, Rice Bran Extract, Opti MSM®, Bromelain, Su Inositol, L-Arginine, L-Glycine, Taurine, Alpha Lipoic Acid, Garlic, Spiru Bifidobacterium bifidum, Leeks Stem powder, Lactobacillus acidophil Blackstrap Molasses, Boron.	ulfur,Pantethine Ilina, Beet Root	9,
Mitochondrial Pro Regulator TM Opti MSM®, Calcium (as calcium citrate, dicalcium phospha calcium pyruvate), Phosphorus (as dicalcium phosphate), Magnesium (as magnesium malate)	432 mg	†
Krebs Cycle Glucose Absorb™ Alpha ketoglutaric acid, L-Tyrosine	180mg	†
RN Fatty Acid Metabolizer™ Carnipure® L-Carnitine L-tartrate, Pantethine (a Coenzyr	141mg ne A Precurso	t or)
Krebs Energy Foundation™ Coenzyme Q10 and stabilized NaDH	35mg	†
 Percent Daily Values are based on a 2,000 calorie diet. Daily Value not established. 		

Biofeedback/Heart Rate Variability/Photobiomodulation

- HRV Elite heart rate variability
- Polar 10 heart rate monitor
- Vielight gamma photobiomodulation
- Infrared light stimulation shown to decrease inflammation and enhance brain cell growth at the level of the mitochondria

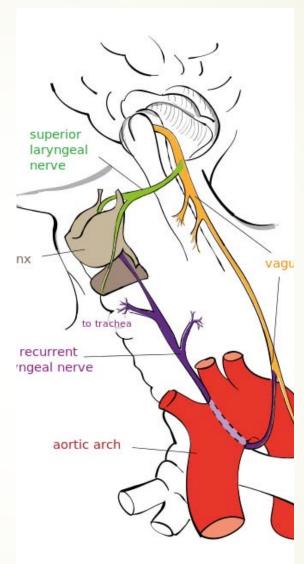






Vagus nerve infrared stimulation

- Infrared light stimulation targeted towards the vagal nerve and lower brain centers
- Nasal stimulator targets limbic system functions
- Headset at base of neck and topo of head to target deeper centers near the hypothalamus, brain stem and vagus





Exercise: the final frontier

- About 3 weeks into my illness I started trying to walk for exercise.
- Guided by MD and PT and cautioned to take it slow and stop if my heart rate gets too high or too low.
- High heart rate at start with dramatic decreases in heart rate while exerting myself over time and up hills.
- Heart rate ranging from 135 to 55 (90-100 typical).



Walking

- Over the next 3 weeks walked daily no matter how I felt...
- Walked at slower paces over shorter distances.
- Only increased distance when heart rate did not drop dramatically.
- Over time was able to get over 1, 2 and 3 miles.
- Elevated heart rates but over time rapid changes diminished somewhat but not completely.
- After 3 weeks of walking and 6 weeks since illness I was able to resume jogging.

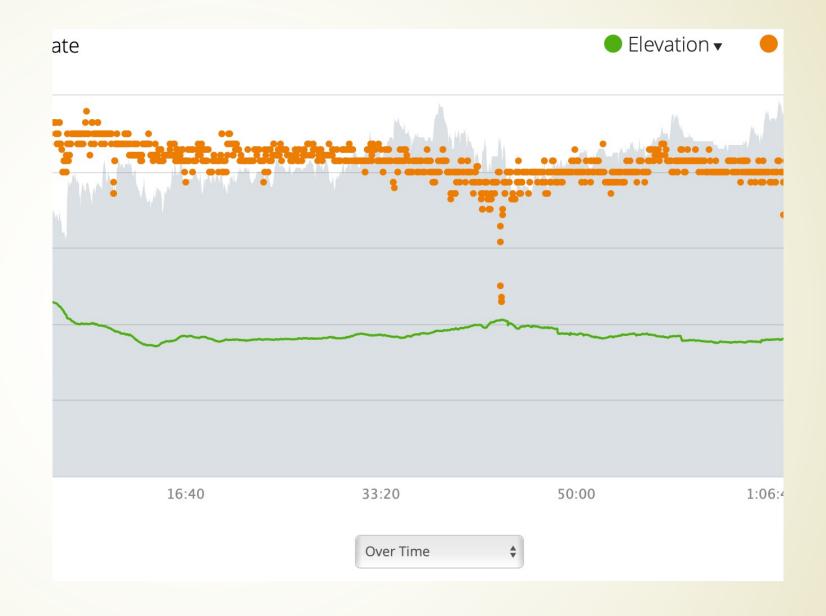
Running (praise the lord!)

- Six weeks in able to run over 4 miles again but with increasing excessive heart rate.
- Heart rate increasing as trying to keep it at moderate ranges (zones 2-3).
- Dramatic rises and dips in heart rate.
- Continued to run shorter distances and slower paces to gradually build up tolerance.
- This occurred for up to 9 weeks after illness beginning.



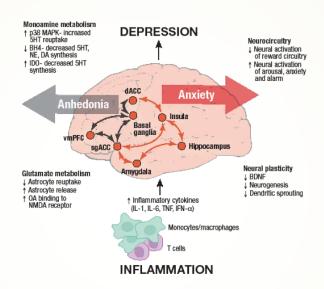
Return to normal running

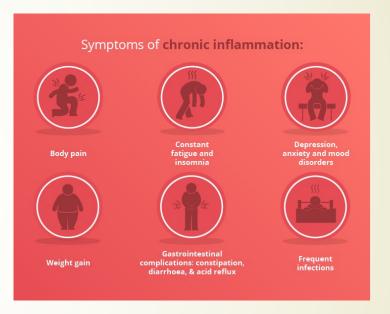
- First fever 1/11/2021
- Running with normal heart rate and no dramatic fluctuations (matching to cadence).
- This occurred for the first time with a longer run (8 miles) on 3/20/2021.
- Continued training and ran an ultramarathon on 5/29/2021.



Chronic inflammation and neuropsychological disorders

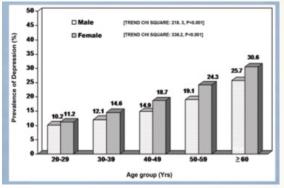
- Depression
- Anxiety
- Memory Disorders
- Cognitive Disorders
- Dementia
- Traumatic Brain Injury

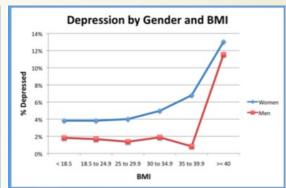


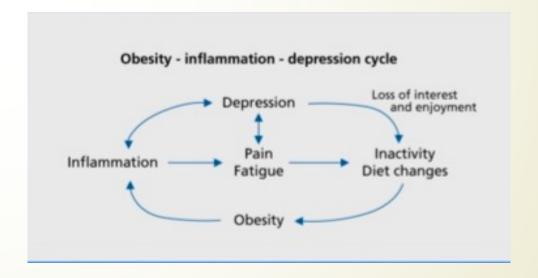


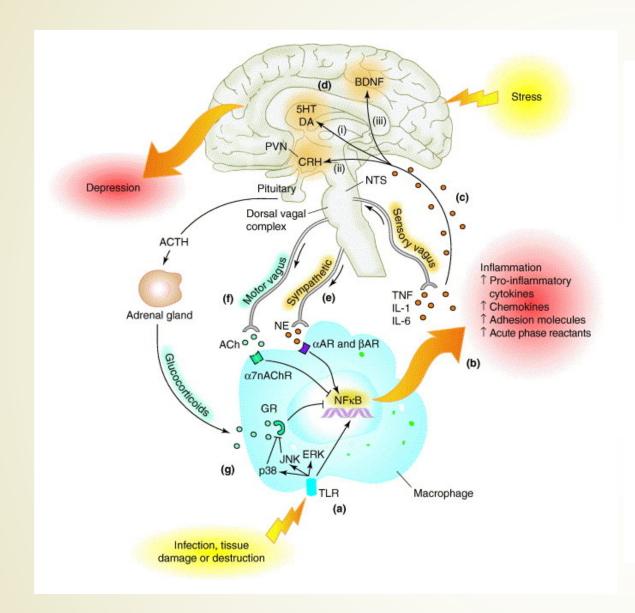
Depression

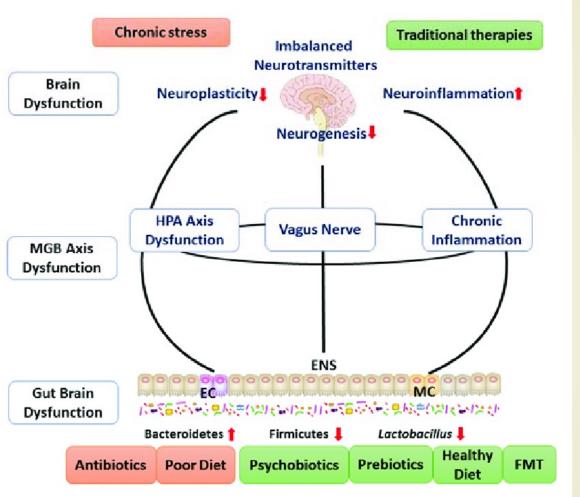
- Rates of depression increase with age.
- Risk of becoming overweight and obese increase dramatically with age.
- Aging and obesity are both associated with chronic inflammation.
- This is associated with inactivity, dietary changes, loss of interest, pain and fatigue.











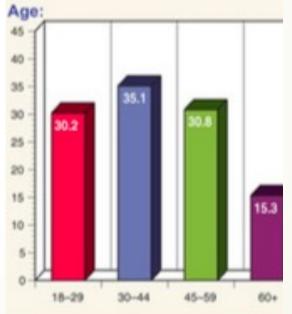
Anxiety

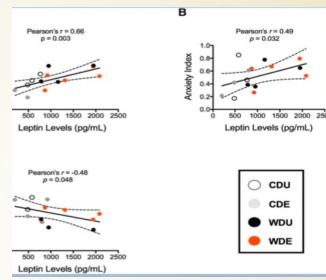
- Anxiety is common over all ages but especially 30-60.
- It is more common in women.
- High fat diet (saturated fat, trans fats) leads to anxiety in animal models.
- Removal of fat inducing cells relieves anxiety.

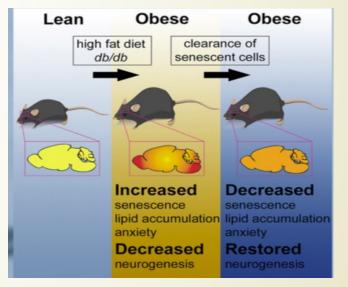
Demographics (for lifetime prevalence)⁵

Sex: Women are 60% more likely than men to experience an anxiety disorder over their lifetime

Race: Non-Hispanic blacks are 20% le likely, and Hispanics are 30% less like than non-Hispanic whites to experience anxiety disorder during their lifetime







Anxiety

- Often related to multiple health concerns and habits.
- Related to physical organ dysfunction often related to dietary and lifestyle choices.
- Chronic inflammation is a constant in all of these conditions.

POSSIBLE ROOT CAUSES OF

Blood sugar

roller coaster





Constant stressful situations



Chronic inflammation



Caffeine sensitivity



Hormonal imbalance and thyroid problems



Food sensitivities



Sleep deprivation



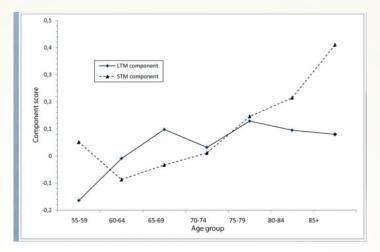
Gut dysfunction

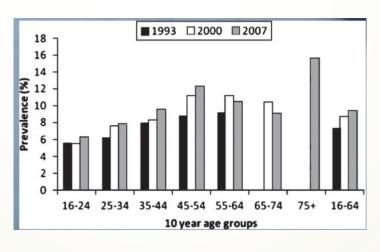


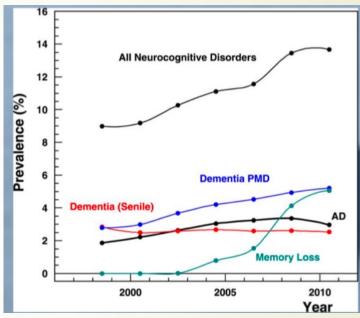
Micronutrient deficiencies

Memory Disorders

- Memory problems increase with age.
- Long term memory gets especially worse around the age of 75.
- Memory disorders have been increasing in prevalence at every age group over the last two decades.
- This is especially true for memory loss and multi infarct dementia.

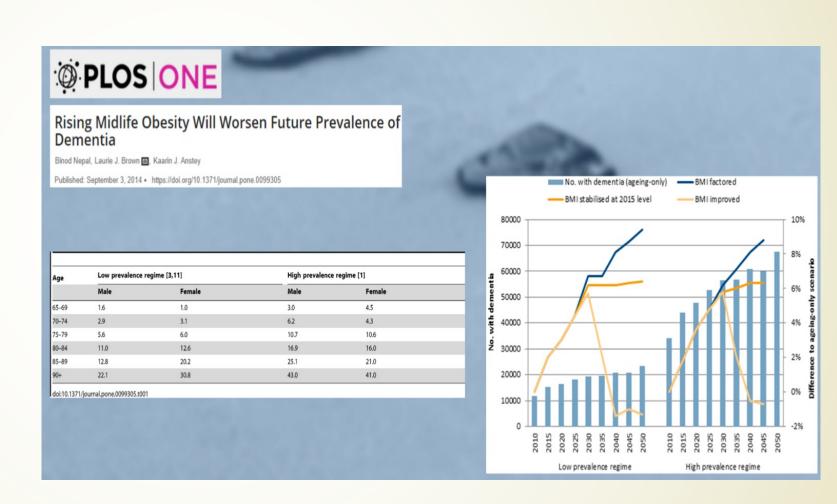






BMI and Dementia

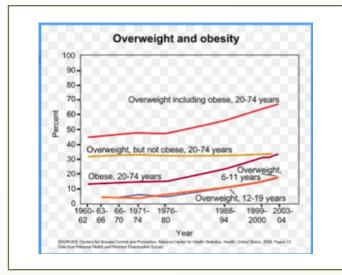
- As BMI continues to rise with age so does the risk of dementia.
- At higher BMI levels the prevalence almost doubles.
- In fact, if you stabilize someone's BMI (dietary intervention) their risk of dementia stabilizes.
- If you lower their BMI their risk of dementia also goes down substantially.

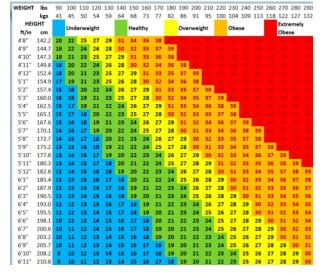


BMI (Body Mass Index)

- BMI is simply a number based on your height and weight.
- That number is then used to tell you if you have a healthy weight for your height or if you are overweight or obese.
- It is very easy to calculate and there are even online calculators for this.
- A BMI of 25 or higher means you are overweight and 30 or above obese.
- Over the last 50 years the rates of overweight and obese people have risen dramatically. It is now at 70% of the US population.







Dementia and memory disorders

- Both low (<20) and high (>25) BMI is associated with dementia risk.
- Over 50% are related to poor diet, nutrition and chronic inflammation.
- Dietary intervention has been showed to lead to a 53% reduction in risk, thicker cortical regions, higher glucose metabolism and less beta amyloid proteins.
- Vitamins B (1,3 and 12), E and fatty acids are all critical in this process.

THE LANCET Diabetes & Endocrinology

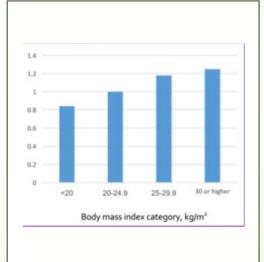


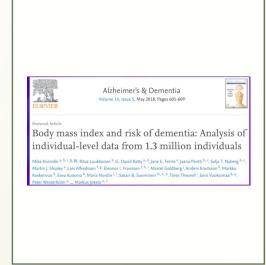
Volume 3, Issue 6, June 2015, Pages 431-436

Article

BMI and risk of dementia in two million people over two decades: a retrospective cohort study

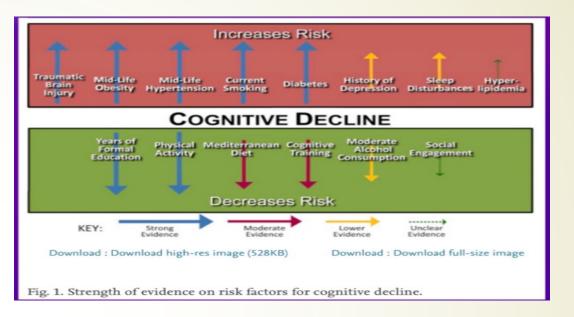
Dr Nawab Qizilbash MRCP ^{a, b, c} A 🖾 John Gregson PhD ^a, Michelle E Johnson MSc ^b, Prof Neil Pearce PhD ^a, Ian Douglas PhD ^a, Kevin Wing MSc ^a, Prof Stephen J W Evans MSc ^a, Prof Stuart J Pocock PhD ^a

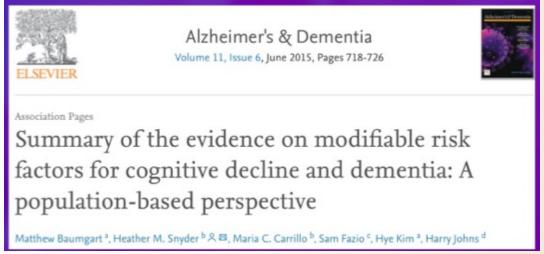




Dementia Risk

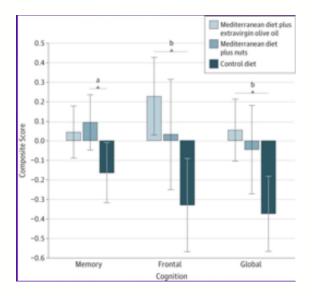
- TBI, Obesity, Hypertension, Smoking, Diabetes, Depression, Sleep problems and Hyperlipidemia all increase your risk for dementia.
- Years of formal education, physical activity, Mediterranean diet, cognitive training, moderate alcohol consumption and social engagement all decrease your risk.





Mediterranean diet

- Avoid sugar, refined grains (carbs), transfats, vegetable oils, processed meat.
- Focus on vegetables, nuts, seeds, legumes, herbs, spices, fish, seafood, extra virgin olive oil, some dairy and red meat infrequently.
- Drink mainly water.



Mediterranean Diet and Age-Related Cognitive Decline

A Randomized Clinical Trial

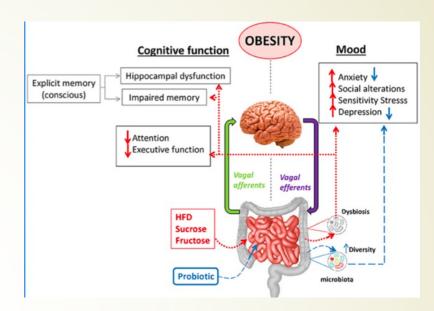
Cinta Valls-Pedret, MSc^{1,2}; Aleix Sala-Vila, DPharm, PhD^{1,2}; Mercè Serra-Mir, RD^{1,2}; et al

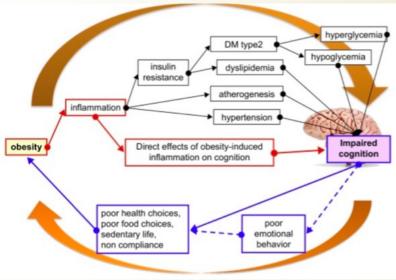
» Author Affiliations | Article Information

JAMA Intern Med. 2015;175(7):1094-1103. doi:10.1001/jamainternmed.2015.1668

Neurocognitive Disorders

- Obesity and chronic inflammation are associated with a whole list of cognitive and emotional disorders.
- Cognition is often impaired in the presence of other inflammatory conditions like diabetes, hypertension, and hyperlipidemia.
- Aspects of emotional regulation, social skills, attention and executive functions, and memory skills can be adversely impacted by these factors.





Traumatic Brain Injury

- Following a brain injury there is a biochemical cascade within the brain.
- It is this cascade that leads to the secondary impact of TBI.
- There is an impact to neuronal cell membranes as a result of the stretching of nerve fibers (axonal shearing).
- This leads to cellular and biochemical changes.
- These biochemical changes interfere with the normal regulation of the flow of potassium and calcium ions and prompt the release of excitatory neurotransmitters that lead to more dysfunction and greater disequilibrium.
- The brain then rapidly depletes its energy stores and is forced into a hypermetabolic state learding to oxidative stress and inflammation.

TBI Intervention

- It stands to reason that the only major way to impact these processes is to alter this biochemical cascade and normalize these processes.
- This means the introduction of stabilizing forces that can alter our internal biochemisty – good nutrition.
- This would include anti-inflammatory agents, antioxidants, vitamins, minerals and balancing of macronutrients (fats, carbs, proteins).
- These are the energy producers of the human body and can dramatically change someone from the inside.
- Positive outcomes were associated with anti-oxidants, bcaa's and polyunsaturated fats (healthy fats).



REVIEW

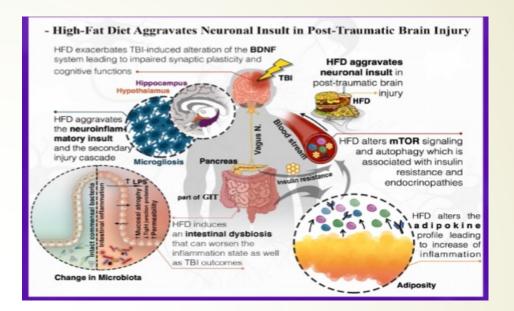
Nutritional interventions to improve neurophysiological impairments following traumatic brain injury: A systematic review

Joshua P. McGeown 🗷, Patria A. Hume, Alice Theadom, Kenneth L. Quarrie, Robert Borotkanics

First published: 26 October 2020 | https://doi.org/10.1002/jnr.24746

Inflammatory agents impair recovery from TBI

- Inflammatory foods, especially high fat diet impairs function in TBI.
- This would include sugary and high fructose corn syrup, trans fats, vegetable iols, refined or simple carbohydrates, processed meat and excessive alcohol.
- Saturated and trans fats are the worst culprit, while monosaturated and polyunsaturated fats are health and anti-inflammatory.



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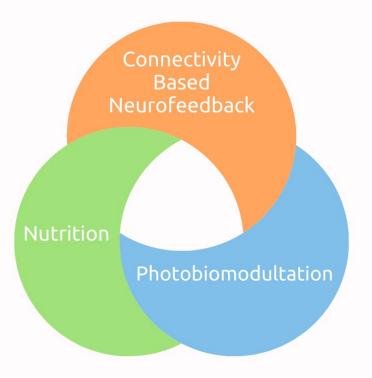
Western diet aggravates neuronal insult in posttraumatic brain injury: Proposed pathways for interplay

Abdullah Shaito ^a, Hiba Hasan ^{b, 1}, Karl John Habashy ^{c, 1}, Walaa Fakih ^{d, 1}, Samar Abdelhady ^e, Fatimah Ahmad ^j, Kazem Zibara ⁸, Ali H. Eid ^{d, h}, Ahmed F. El-Yazbi ^{d, i} ス ^図, Firas H. Kobeissy ^f ス ^図

Head On Program

- Multivariate 4 channel coherence neurofeedback training (QEEG/Connectivity driven)
- Photobiomodulation/ Vielight Gamma
- Nurtitional/Health coaching program
- All can be integrated into your practice and/or done remotely

Head On! Program



Tackling Brain Development, Recovery and Optimization

Head On!

- Originally created as a concussion program.
- Later thought of as interventions that can help with memory decline and dementia.
- We now believe these can all help just about anyone either in isolation or together.
- Effects appear to be additive.



HEAD ON! PROGRAM

CASE STUDY: 85-YEAR-OLD FEMALE

COMPLAINT OF MEMORY ISSUES



Major neurocognitive disorder likely due to Alzheimer's disease.

ASSESSED MENTAL ACUITY



Participated in a battery of neuropsychological tests.

ASSESSED BRAIN ACTIVITY AND CONNECTIVITY



Conducted a qEEG.

EEG-GUIDED BRAIN MAPPING RESULTS



Poor connectivity among a number of brain regions, especially Brodmann's area 40 (multifunctional region that plays a role in language and memory).

TREATMENT PLAN



Neurofeedback and photobiomodulation.

After 2 months of Treatment:
Anecdotal improvement of short-term
memory. Neuropsychological tests
revealed improvements in auditory and
facial recognition, as well as in a number
of executive function measures.

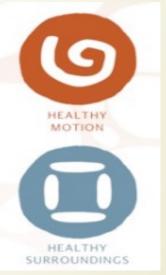
Nutrition/Health Plan

- Focused on learning habits of health including diet/food, hydration, sleep, social support, energy level, movement/fitness, and many others.
- Four pillars of intervention including health coaching, learning healthy habits, nutrition, and social support.







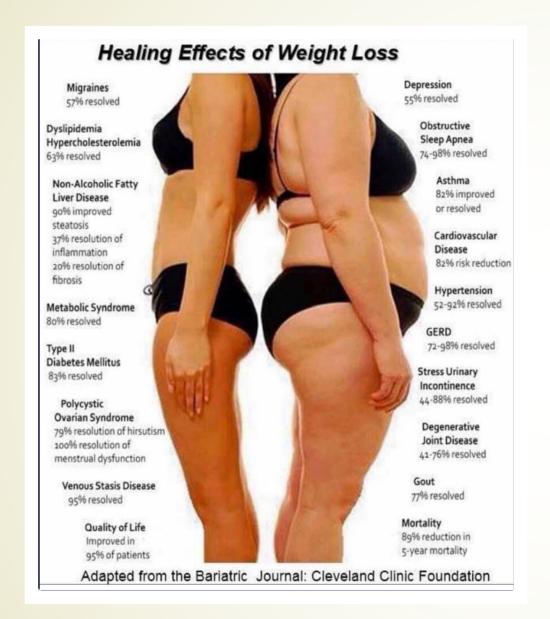


Nutritional Intervention

- Anti-inflammatory, nutrition dense program designed for weight loss and enhanced body and brain functioning.
- Low sugar content meant to stabilize blood sugars.
- Learn to eat multiple times per day (6) in smaller amounts.
- Fat burning, mild ketosis which alleviates oxidative stress.
- Hydration to nourish organs, the brain and remove toxins.
- 26 essential vitamins and minerals to feed the body and brain.
- Protein, vegetables and health fatty acids to fight inflammation and enhance functioning.
- Specific anti-inflammatory agents and probiotics built in.
- Weight loss, gain, fitness or direct treatment of chronic inflammation.

Nutritional breakdown

/	Water soluble vitamins	Fat soluble vitamins	Macrominerals	Trace Minerals	Probiotics/Anti- Inflammatory Agents
/	C, B1,B2, B3, B5, B6 and B12	A, D, E and K	Calcium, Phosphorus, Magnesium, Potassium and Sulfur	Iron, Manganese, Copper, Zinc, Iodine, Selenium	Selenium, Molybdenum, Chromium, Manganese
	Blood flow, heart, energy metabolism, digestion, blood cells and brain functioning.	Immune system, organs, bones, blood and oxygen flow throughout the body.	Bones, muscles, blood pressure and metabolism.	Blood and oxygen flow, cholesterol, immune system, thyroid and reducing inflammation.	Anti- inflammatory, gut health.





Average weighters
Plan® is 12

on the Optimal eight 5 & 1

Longevity and healing

- Insulin signaling
- Sir1/Sir2 activated by calorie restriction and may extend life by 30%
- IGF-1 (insulin growth factor) may prevent disease and extend life
- Decreased T3 and oxidative stress
- Decreased inflammation
- DNA and metabolic repair
- Avoids beta amyloid buildup
- Increased neurotropins and other proteins (exercise)
- Decreasing blood pressure prevents brain aging

Exercise and movement

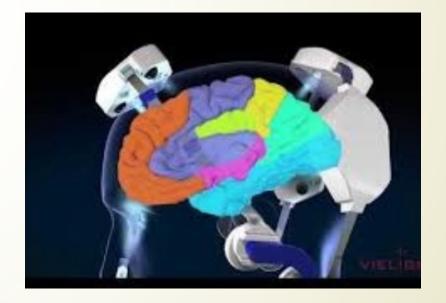
- Maintain a healthy weight.
- Heart disease risk reduced.
- Manage blood sugars.
- Improved mood and mental well-being.
- Helps cognitive functioning.
- Strengthens bones and muscles.
- Reduced cancer risk.
- Improved sexual health.
- You may live longer.
- Required for you bodies and organs to function!



Photobiomodulation

- Infrared light stimulation to enhance brain activity.
- Vielight gamma.
- Diodes over midline frontal, mildline and left and right parietal regions as well as use of a nasal stimulator.
- Stimulates at 810 nm, the frequency shown to penetrate the skull and physiologically augment brain cells and mitochondria functioning.





Cellular impacts

- Direct evidence that infrared light at 810 nm penetrates the skull and is excitatory at the level of the cellular membrane and mitochondria.
- This produces an increase in ATP or the energy of cells and brain cells.

BBA Clin. 2016 Dec; 6: 113-124.

Published online 2016 Oct 1. doi: 10.1016/j.bbacli.2016.09.002

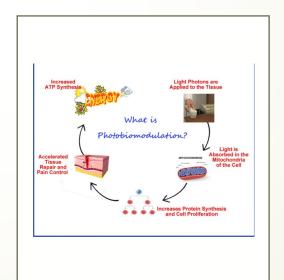
PMCID: PMC5066074

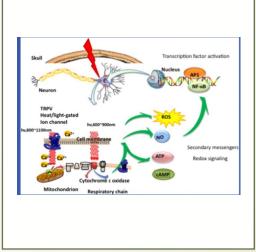
PMID: 27752476

Shining light on the head: Photobiomodulation for brain

disorders

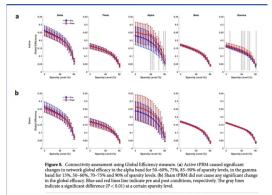
Michael R. Hamblin

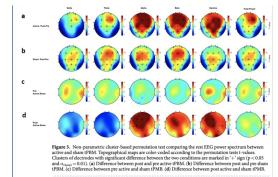


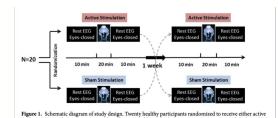


Evidence of brain changes

- 20 subjects underwent sham and active simulation with crossover to each group.
- Enhancements in brain activation and not just in gamma.
- They also showed greater global efficiency or speed of connectivity processing.







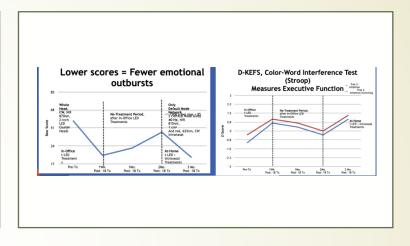
or sham tPBM with a minimum 1-week washout period between the two visits, 10 minutes eve-closed rest EEG

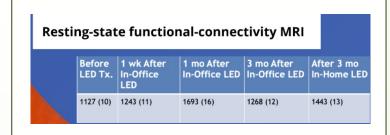
recorded pre and post of each intervention.

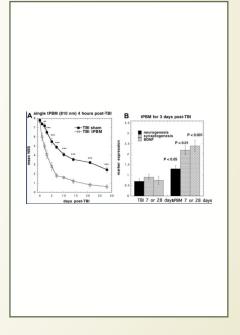
Zomorrodi, R., Loheswaran, G., Pushparaj, A., & Lim, L. (2019). Pulsed near infrared transcranial and intranasal photobiomodulation significantly modulates neural oscillations: a pilot exploratory study. Scientific reports, 9(1), 1-11.

Traumatic brain injury case studies

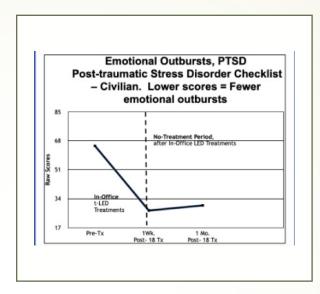
Transcranial, Near-infrared Photobiomodulation to Improve Cognition in Two, Retired Professional Football Players Possibly Developing CTE Poster, International Brain Injury Association (IBIA) Meeting, Toronto, March 2019
M.A. Naeser 1, 2, P.J. Martin 1, 2, M.D. Ho1, M.H. Krengel 1, 2, Y. Bogdanova 1, 3, J.A. Knight 1, A.E. Fedoruk 1, M.R. Hamblin 4, B.B. Koo2

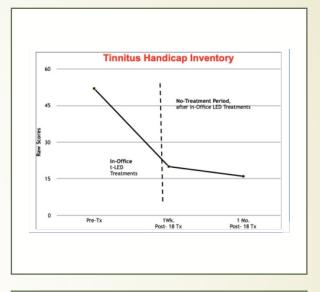


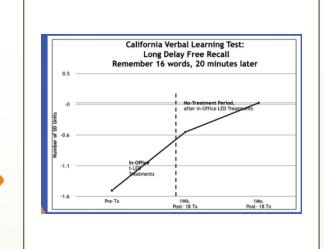


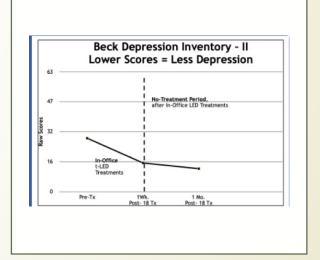


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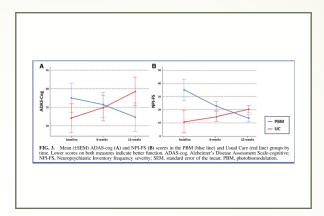


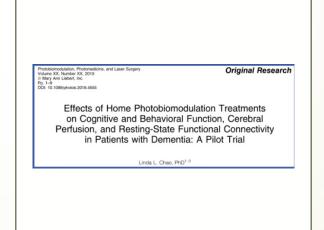






Dementia studies





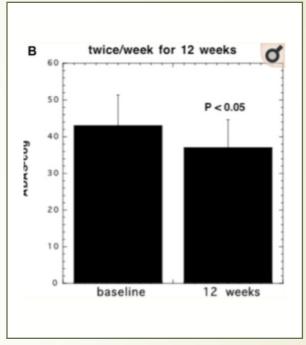
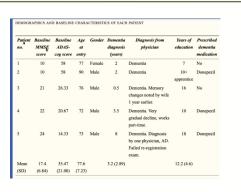


Fig. 5

tPBM for Alzheimer's disease. (A) Nineteen patients were randomized to receive real or sham tPBM (810 nm LED, 24.6 J/cm² at 41 mW/cm²). (B) Significant decline in ADAS-cog (improved cognitive performance) in real but not sham (unpublished data).

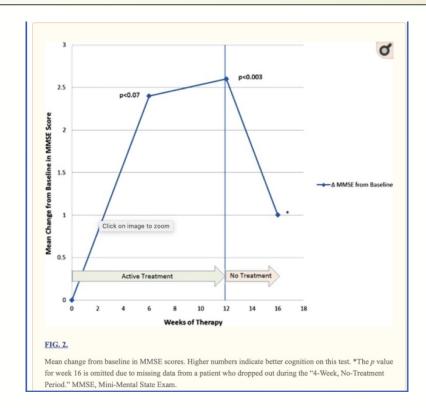


Photomed Laser Surg. 2017 Aug 1; 35(8): 432–441.
Published online 2017 Aug 1. doi: 10.1089/pho.2016.4227

PMCID: PMC5568598 PMID: 28186867

Significant Improvement in Cognition in Mild to Moderately Severe Dementia Cases Treated with Transcranial Plus Intranasal Photobiomodulation: Case Series Report

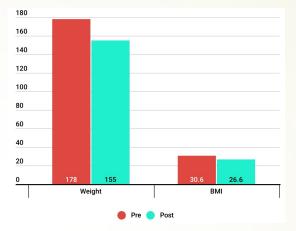
Anita E. Saltmarche, RN, MHSc,[™] Margaret A. Naeser, PhD,^{2,,3} Kai Fai Ho, PhD,⁴ Michael R Hamblin, PhD,^{5,,6} and Lew Lim, PhD, DNM, MBA⁷

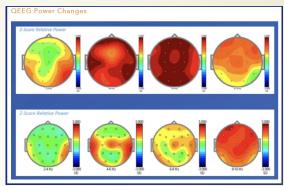


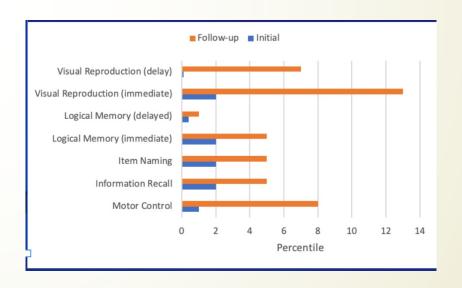
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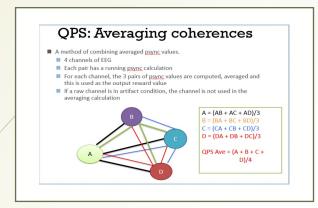
Case Review

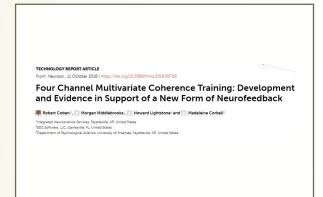
- The patient was a 74-year-old female who presented for evaluation related to memory problems.
- Most likely has Alzheimer's disease.
- Two-month follow-up period.
- Lost 22 lbs with a 4 pt drop in BMI (almost healthy).
- Improvements in memory, naming and motor control.
- Dramatic reductions in theta from the front to back of the brain.

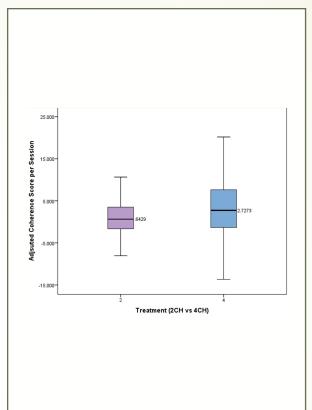


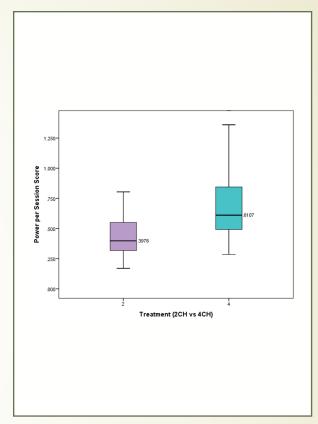












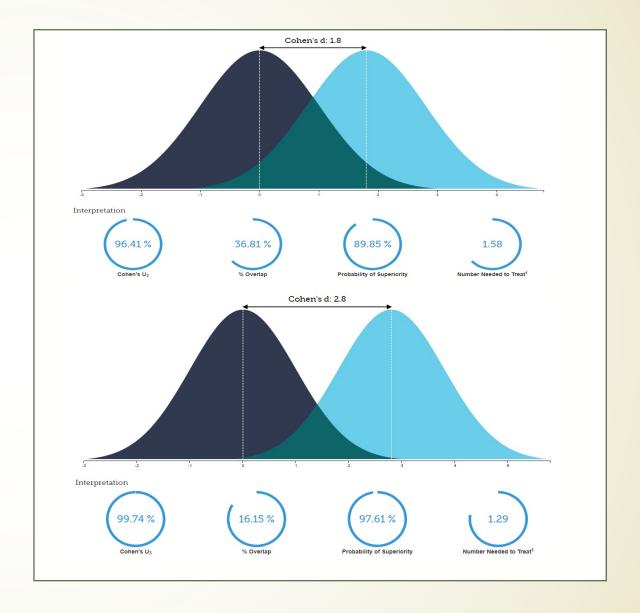
4-Channel Multivariate Coherence Neurofeedback

Efficacy studies in support of 4 channel MVCNF (N = 591)

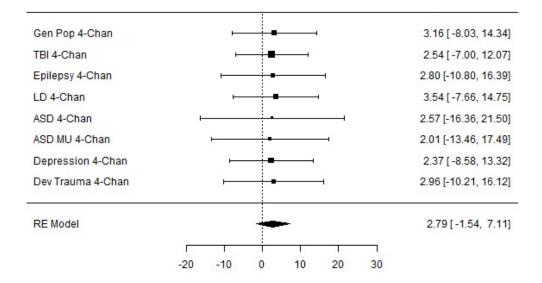
Population	Sample	Design	Findings 1	Findings 2
General Population	N = 174	MVCNF v 2 Ch CNF	MVCNF > 2 Ch CNF	Enhanced coherence and reduced power
Traumatic Brain Injury	N = 20	Compared time since injury in 3 groups	Improvements in symptoms and NP testing	Changes associated with increases in coherence
Epilepsy	N = 52	MVCNF v 2 Ch CNF	MVCNF > 2 Ch CNF	81% reduction in seizures
Learning Disabilities	N = 63	MVCNF v 2 ch CNF v resource room	MVCNF > 2 ChCNF > RR	1.6 year increase in reading
Autism	N = 110	MVCNF v 2 Ch CNF	MVCNF > 2 Ch CNF	98% success rate
Autism MND	N = 78	MVCNF v 2 Ch CNF v Bipolar	MVCNF > 2 ChCNF > Bipolar	Mu suppression with coherence changes
Depression	N = 54	MVCNF Psychotherapy v WLC	MVCNF > both groups	94% success rate, crossover and 2 yr f/u
Developmental Trauma	N = 40	MVCNF v. Psychotherapy	Exp > controls on clinical ratings	Δ in power, sources and connectivity

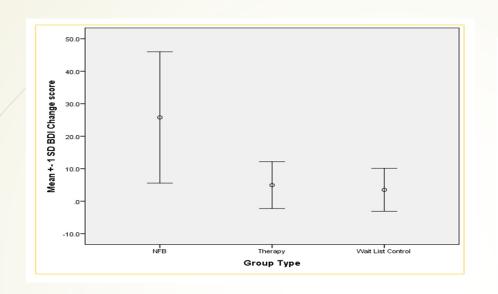
Meta-Analysis

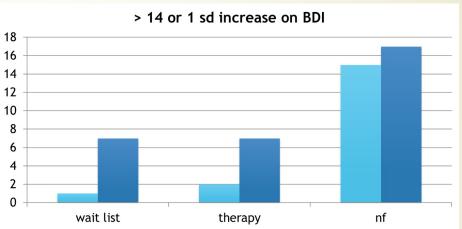
- Clinical changes (ratings, cognitive or other testing): Cohen's d = 1.8
- Measured connectivity changes:Cøhen's d = 2.8
- Anything about 0.6 is a significant effect size.



RE Model			-	-		1.80 [-2.69, 6.29
Dev Trauma 4-Chan		-	-		-	3.05 [-10.11, 16.21
Depression 4-Chan		_	•			1.39 [-9.56, 12.34
ASD MU 4-Chan		-	-		—	2.95 [-12.53, 18.43
ASD 4-Chan	—		-		—	1.08 [-17.86, 20.01
LD 4-Chan		-	-			2.10 [-9.10, 13.31
Epilepsy 4-Chan		-	-		I.	1.09 [-12.51, 14.68
TBI 4-Chan		-	-			1.24 [-8.29, 10.77
Gen Pop 4-Chan		·			_	2.07 [-13.41, 17.54

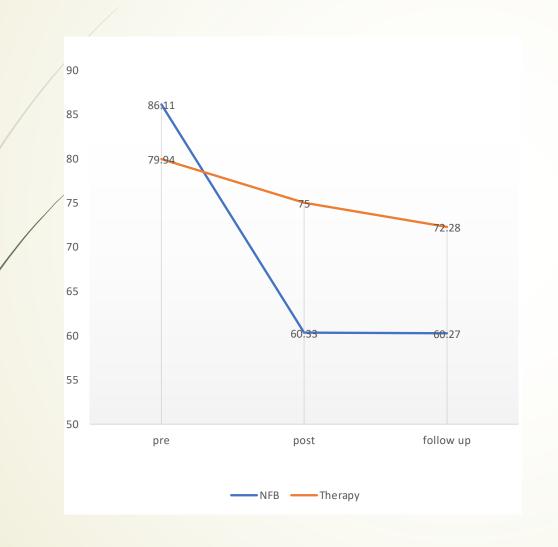


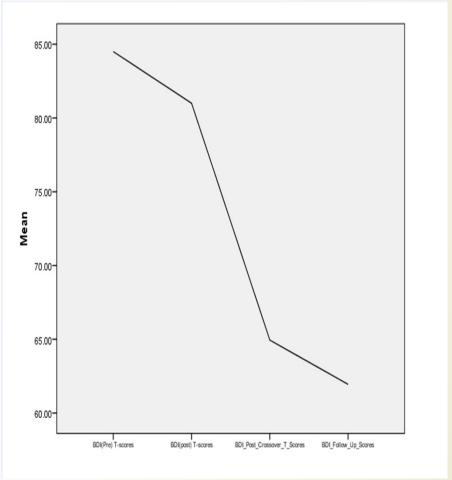




Depression study with 2 year follow-up.

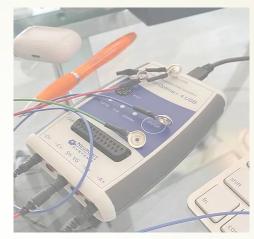
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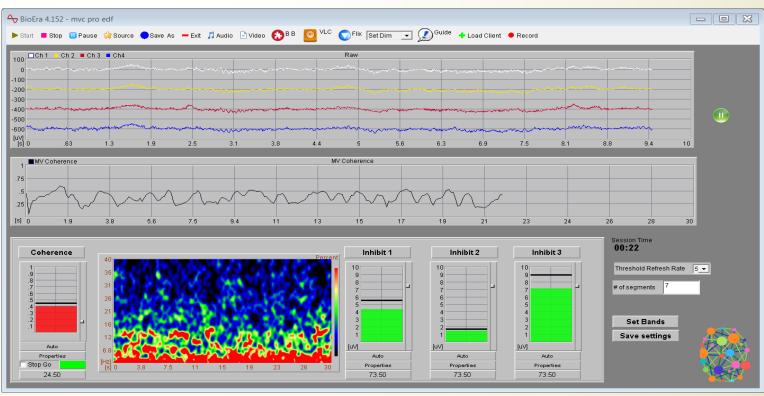


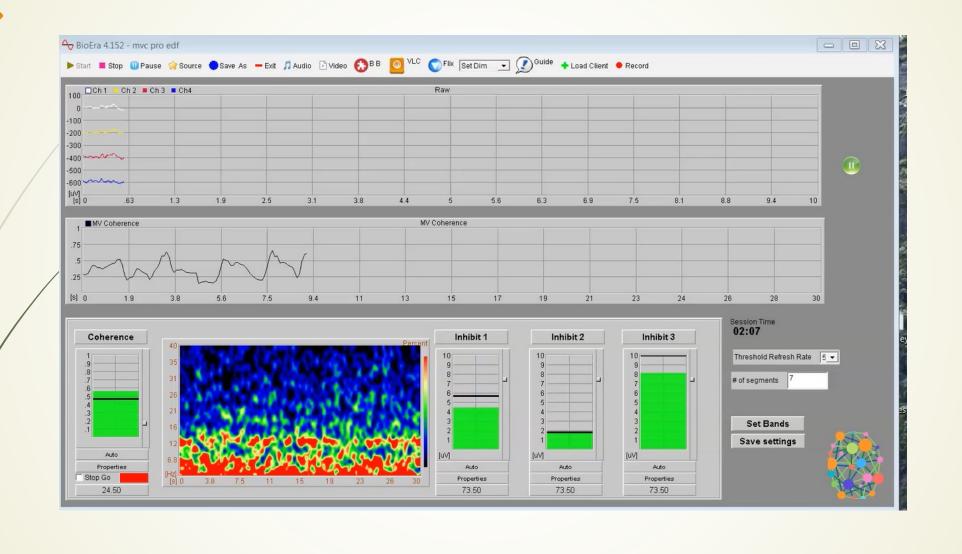


New neurofeedback system for the office or at home.

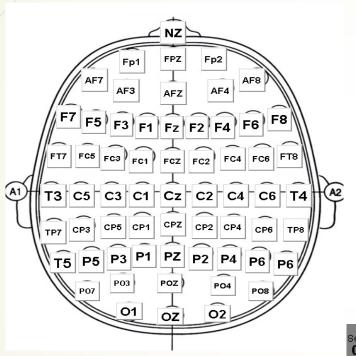
- 4 channel eeg amp with pre-programmed bioera pro software.
- Can run 4 ch mvcmf or single channel training.
- There is both a home and pro/clinic version.
- Easy to learn how to use and affordable.
- No cost per client or for sessions.
- Adjustable settings.

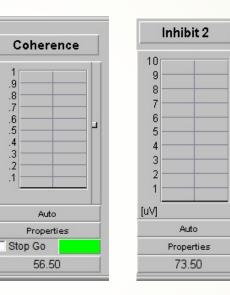


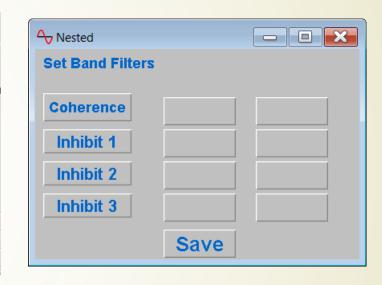




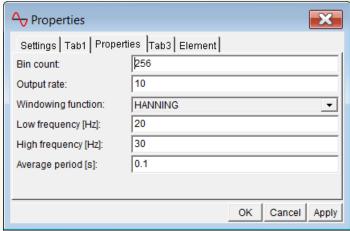
Adjustable settings



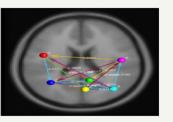




dession Time 05:55	
Threshold Refresh Rate	5_+
# of segments 7	
Set Bands	
Save settings	154



Presented for evaluation related to memory problems, headaches, fatigue and joint pain.



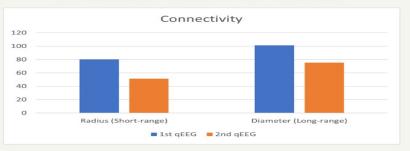
BRAIN MAP INDICATIONS:

- Visuospatial processing, memory and language not functioning properly.
- Poor connectivity, specifically over the regions in the left hemisphere

TREATMENT PLAN

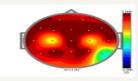


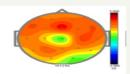
3-MONTH FOLLOW-UP PERIOD



Different regions of the brain communicating more effectively

Dramatic reductions in theta from the front to back of the brain





Anecdotal reports of decreased headaches, fatigue and pain. Improved bone resorption rates.

Thank you! Any questions we can answer?



Integrate Brain Health

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