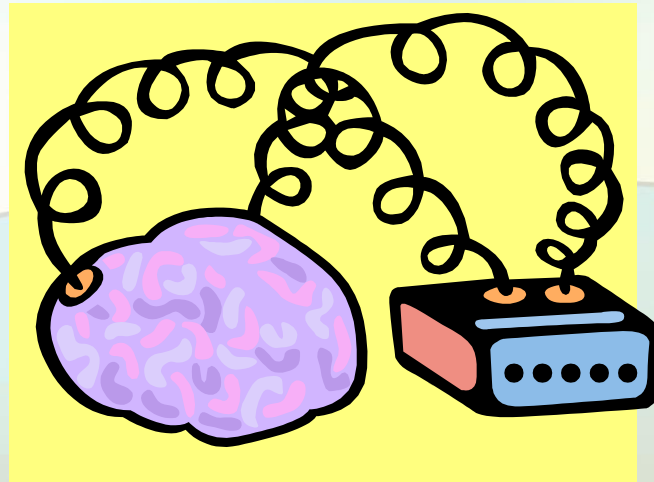


# NEUROFEEDBACK



**An Effective Intervention for  
Emotional & Behavioral Issues**

Presented by  
**Donna Creasy**

LPC, LMFT

Board Certified in Neurofeedback  
Associate Fellow, BCIA

with assistance from **Lynn Gibbons,**  
**Resident in Counseling**  
Board Certified in Neurofeedback

# DISCLOSURES

- I am retired (mostly) from Prince William Community Services but have an on-going relationship regarding oversight of neurofeedback services.
- I am a trainer for the BCIA Neurofeedback "Boot Camp" through Stress Therapy Solutions.
- My retirement mission is to spread the word about NFB and to help health care professionals incorporate it into their practices.

# Questions...

- What is neurofeedback?
- How does it work?
- What's it good for? How can it help youth with serious problems?
- What are the COSTS?
  - Equipment
  - Training
- What does it take to get certified?
- How can I get NFB mentoring?



# **What is neurofeedback?**

**SEARCH INSIDE!™**

"A fascinating overview of the brain's history and its emergence as a complex, integrated system for a range of conditions."—*Science*

# A SYMPHONY *in the* BRAIN

THE EVOLUTION OF  
THE NEW BRAIN VOLUME  
INTERFERENCE

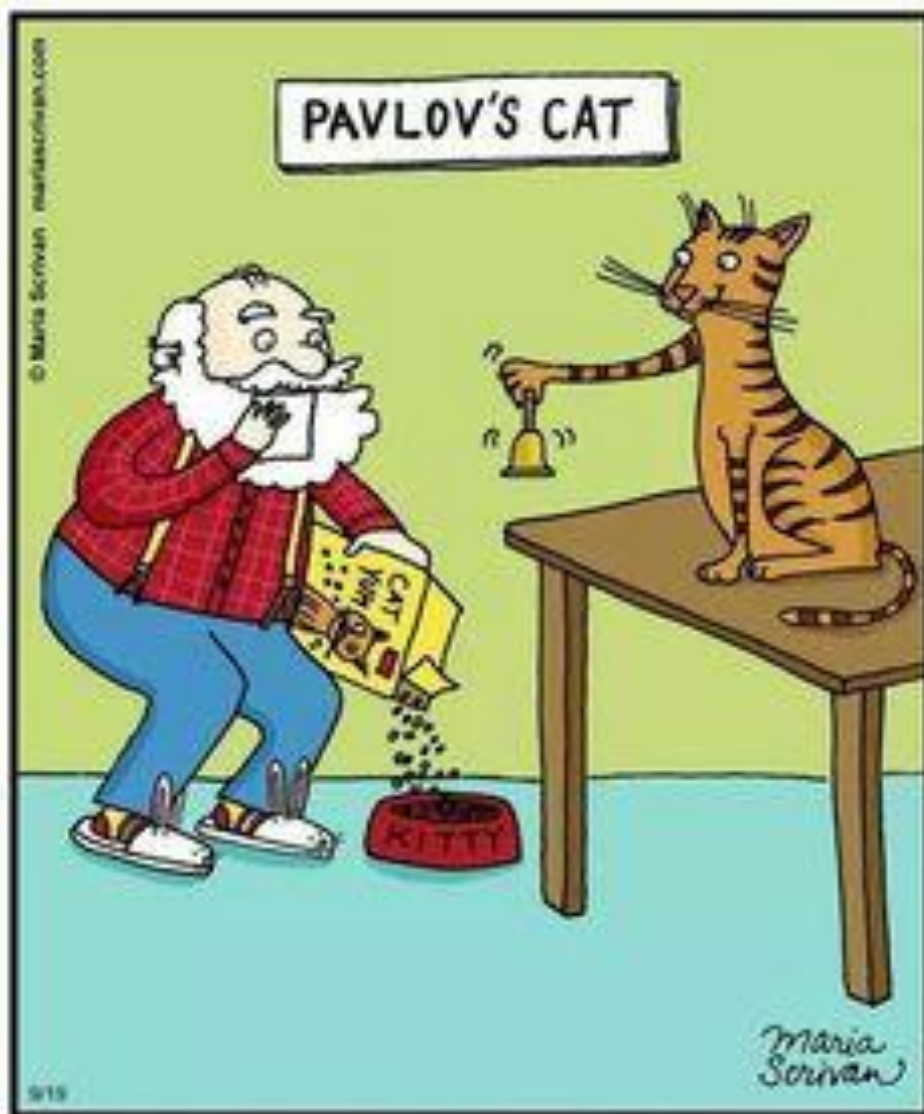
JIM ROBBINS



# NFB Research began in the 1960s

- Barry Stermann (UCLA) trained cats to increase SMR rhythms (calm focus) in their brains using operant conditioning.
- Published in Brain Research, 1967







# Test pilot research



**Critical: able to shift quickly  
between calm focus & concentrated  
problem-solving**

# Concentration/Relaxation Cycle

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TEST PILOT.



# NASA Study re: rocket fuel effects



- Studied seizure activity in cats exposed to rocket fuel.
- Some cats were seizure-resistant! They were cats from the earlier experiment, trained to produce SMR.

**Sterman wondered...** Would NFB help humans with seizure disorders?

Yes! His research showed a decrease in severity & frequency of seizures with SMR training. NFB is medically approved for treating epilepsy today.

ADHD symptoms also improved - which led to studies in the 1970s using NFB for ADHD , notably by Joel Lubar at Univ of Tennessee

# So what happened?

*“Almost all of behaviorism was abandoned in favor of pharmaceuticals in the 1970s, and biofeedback is barely a blip on the radar screen of modern medicine.”*      *Jim Robbins, author*

Barry Stermann's work  
demonstrated the  
**plasticity** of the brain  
(lifelong capacity for growth & renewal)

*This concept was revolutionary, a  
whole new paradigm!*

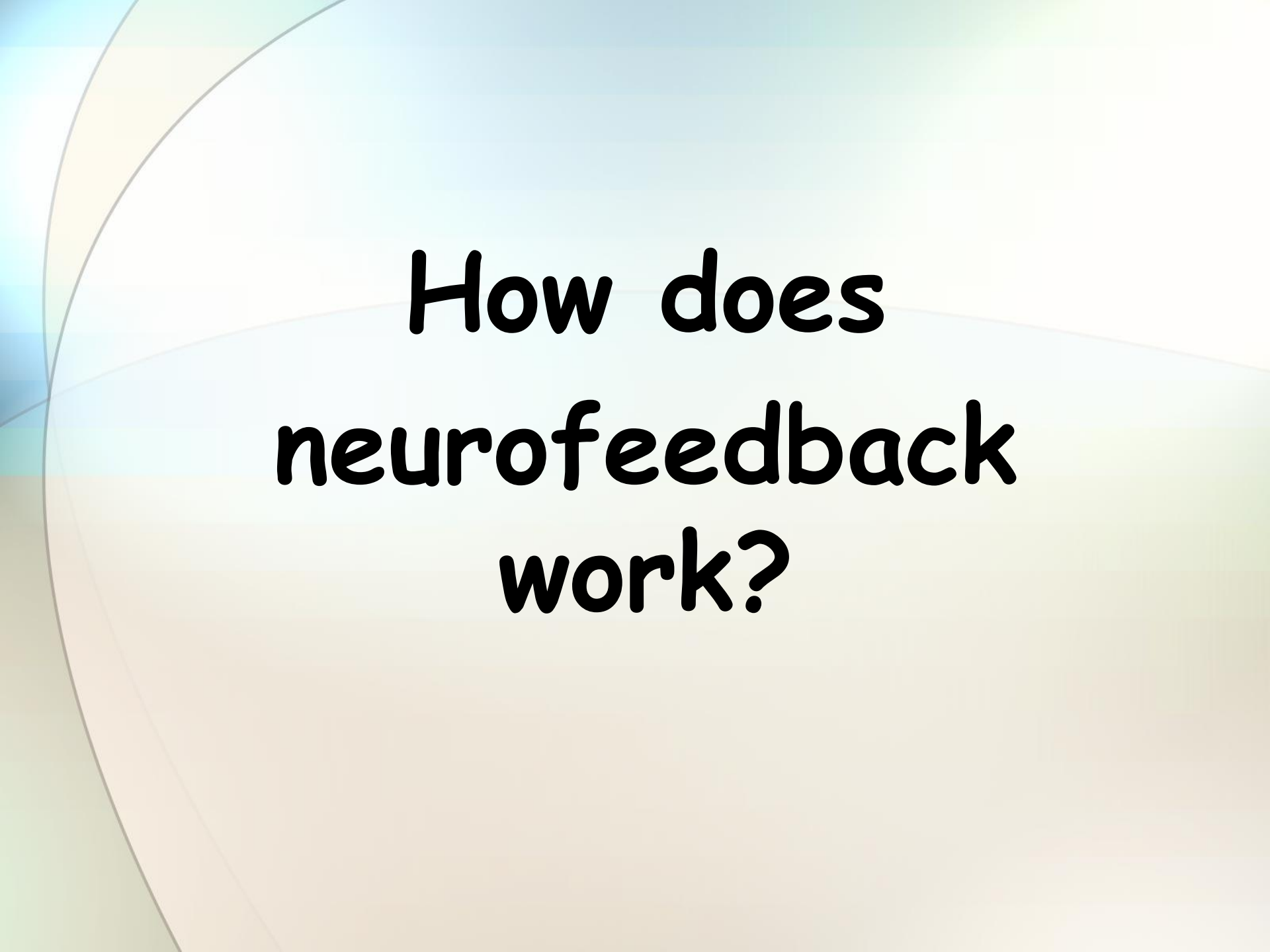


# But it dropped off the map. Why?

- Came out of psychology instead of the medical world
- Suffered from bad reputation earned by biofeedback among scientists because of wildly speculative claims
- Conflict among the pioneers
- Cost of equipment & computer capability in early decades

# *Neurofeedback is also called...*

- EEG Biofeedback
- Brain training
- Neurotherapy
- Neuro-training
- Attention training
- Peak performance training



**How does  
neurofeedback  
work?**

# BIOFEEDBACK

Using information about how the body is working to change what's going on



Biofeedback was popular in the 70's for managing anxiety.

The client got sound tones for rewards when his GSR (Galvanic Skin Response) reflected lower stress levels.

# Every day forms of biofeedback



You have to have  
**accurate** feedback, of course!





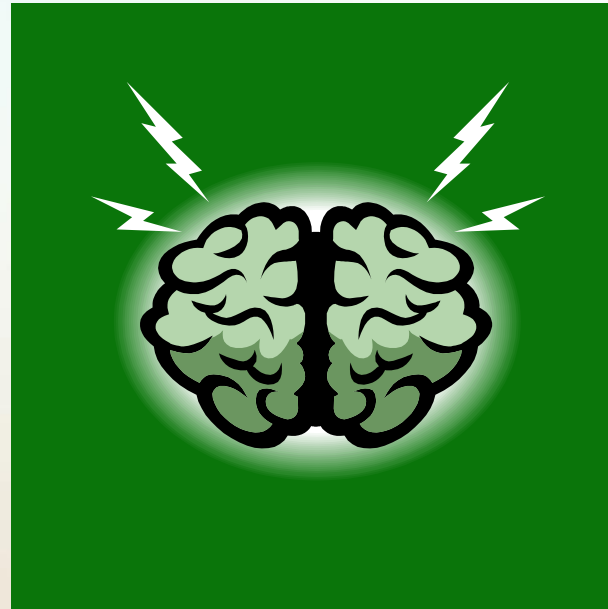
**Brain training is...  
exercising the brain-  
a mental workout.  
Technically, it's  
considered  
operant conditioning.**



*We now know our brains  
are much more “plastic”  
than we used to think.*

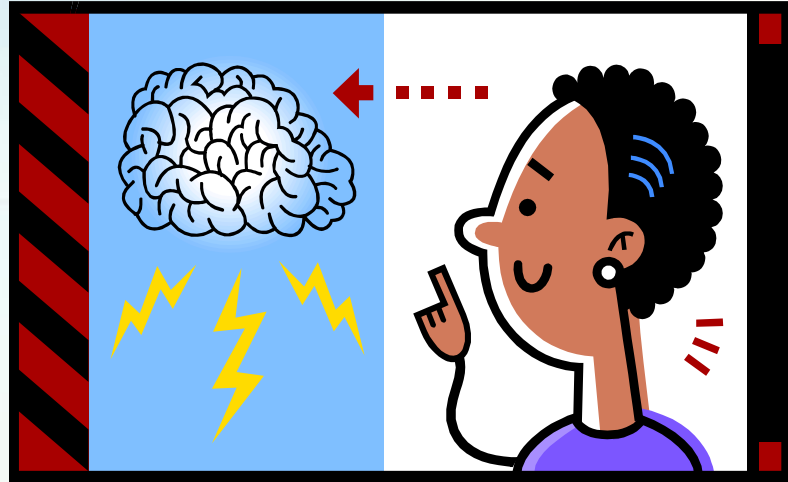
Our brains can

- learn,
- change,
- improve,
- heal...

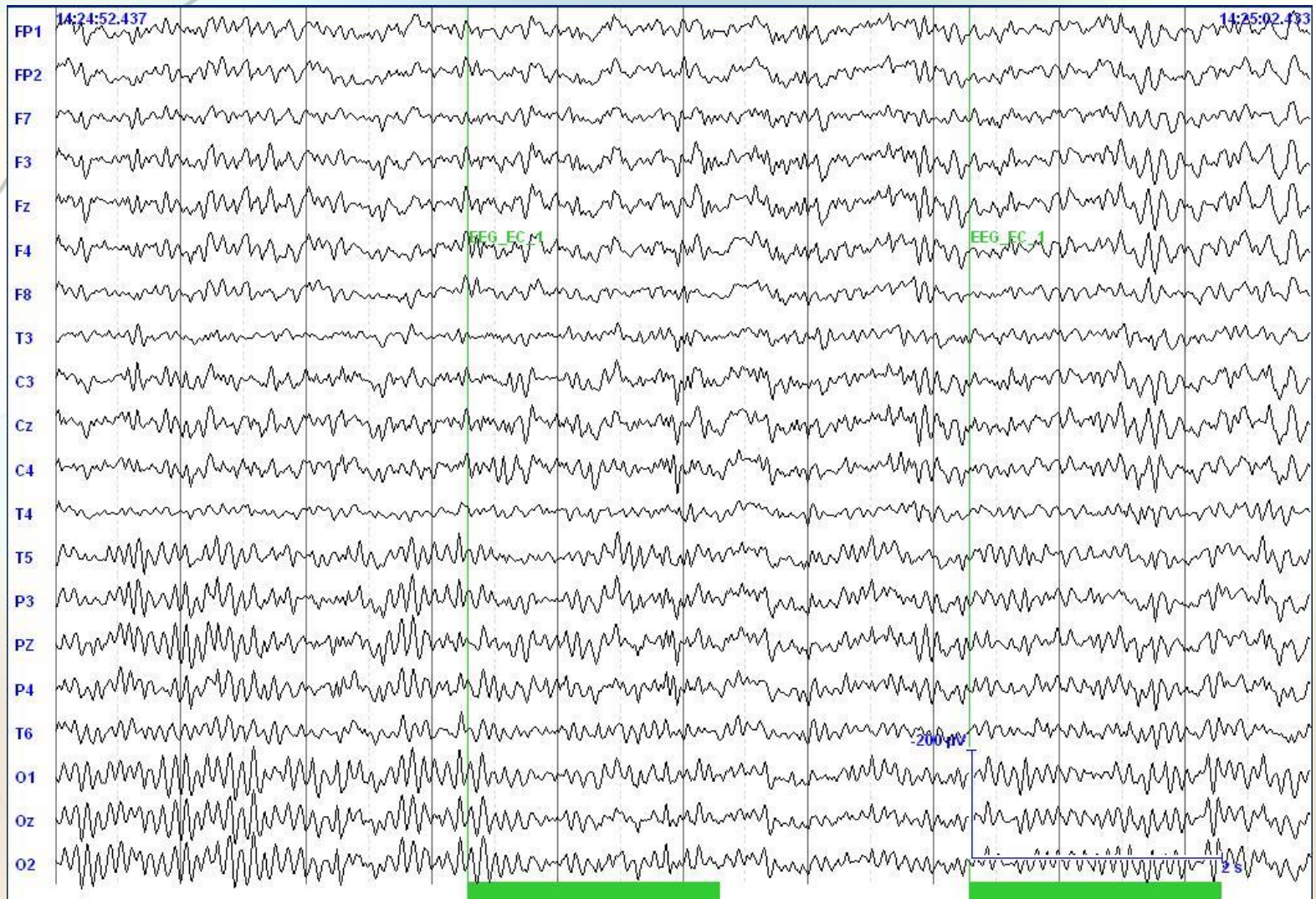


# THE BIG

## IDEA:

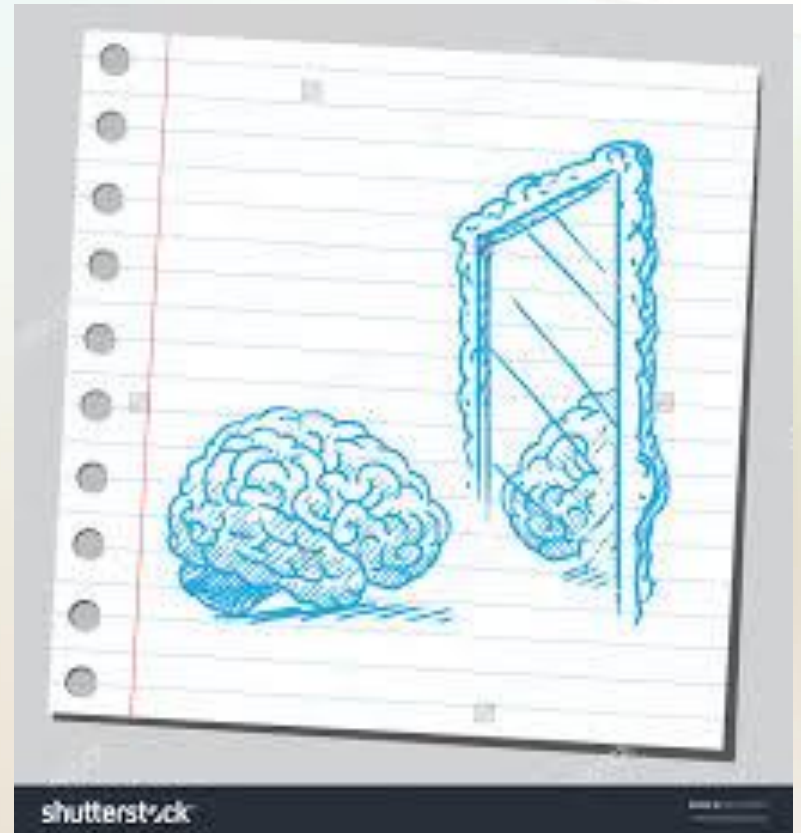


When you have information **what**  
**your brain waves are doing**, your  
brain can use that information **to**  
**change how it works.**



You can train  
this 22

Neurofeedback  
is like holding a  
mirror up to  
the brain...





**Training your brain is a lot  
like training your dog!**





## **ISSUES:**

- Communication
- Behavior management - rewards > effective

We do the same thing with the brain - the software tells the client when the brain is doing what we want it to do.

The brain likes rewards - does more of what generates them.



Your brain uses  
about 20-30%  
of your body's  
basic energy -  
and about 20%  
of your oxygen.

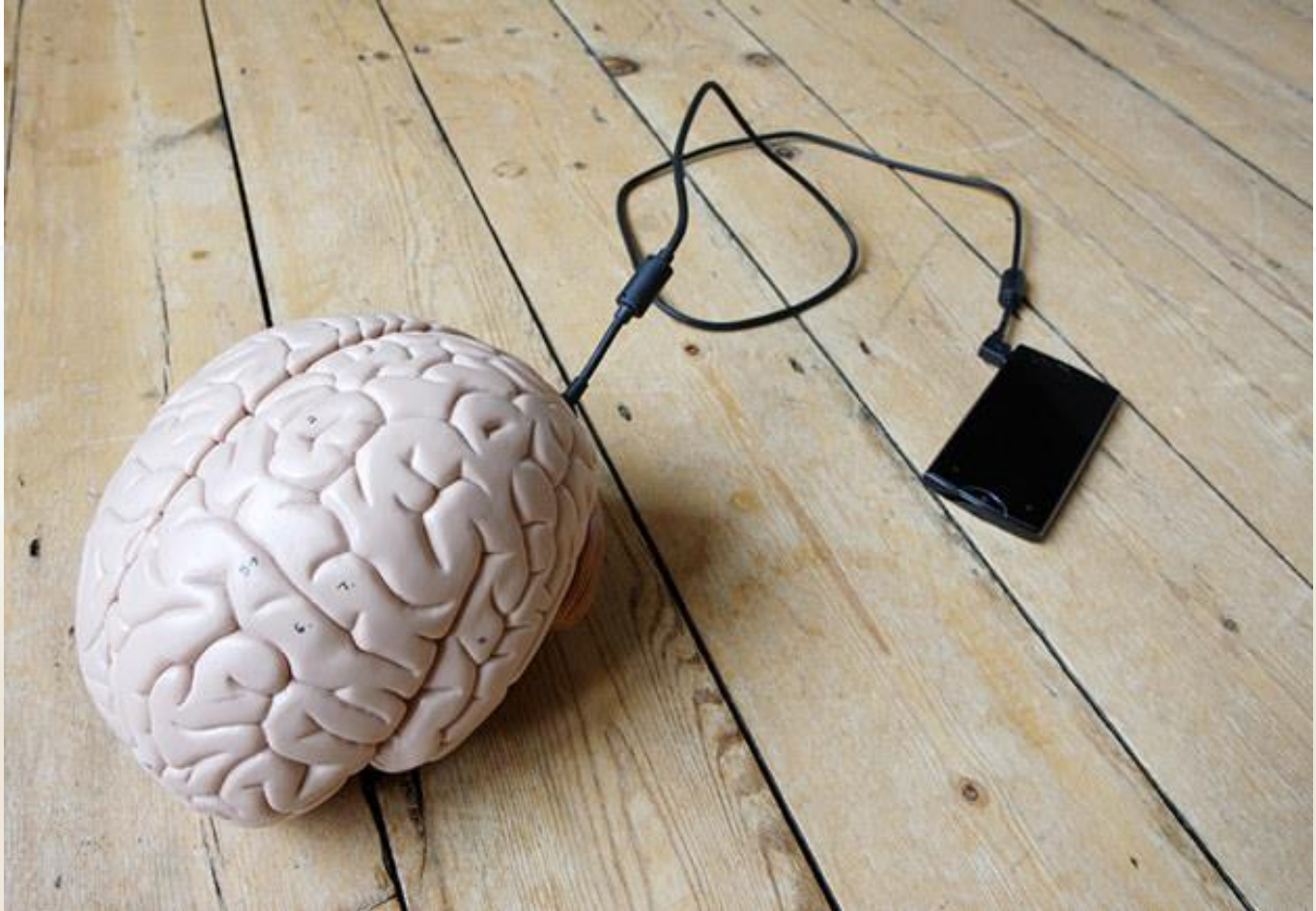


A human brain makes enough  
electricity to light



a 30-watt light bulb!

# Update on brain energy





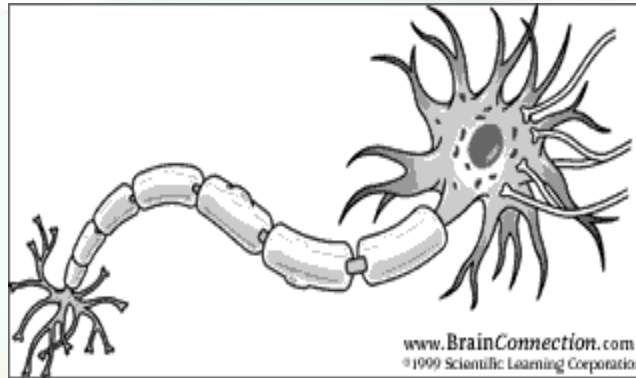


By age 20-25,  
we have 100  
billion neurons...

**After that, we  
start to LOSE  
brain cells.**

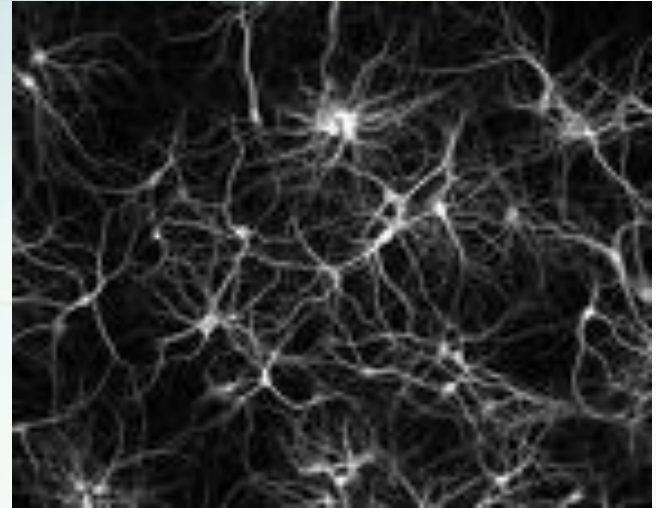


As many as 10,000 brain cells  
die every day after age 20.



Fortunately, those  
100,000,000,000 neurons are a  
generous supply!

Every neuron  
is connected to  
other neurons -

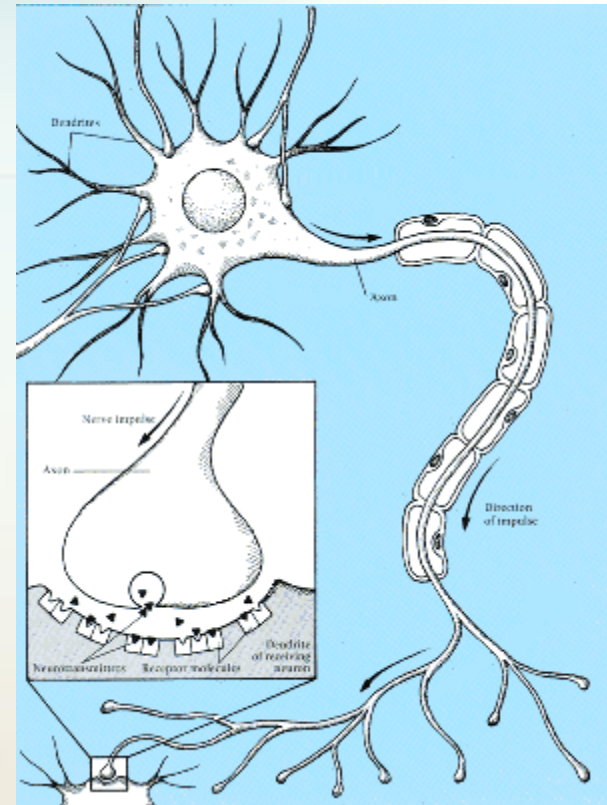
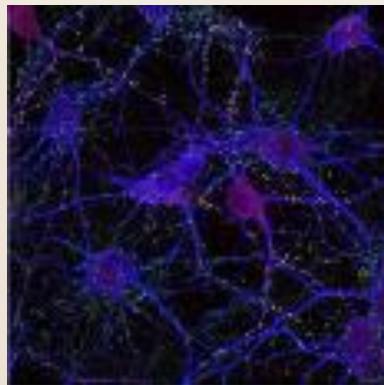


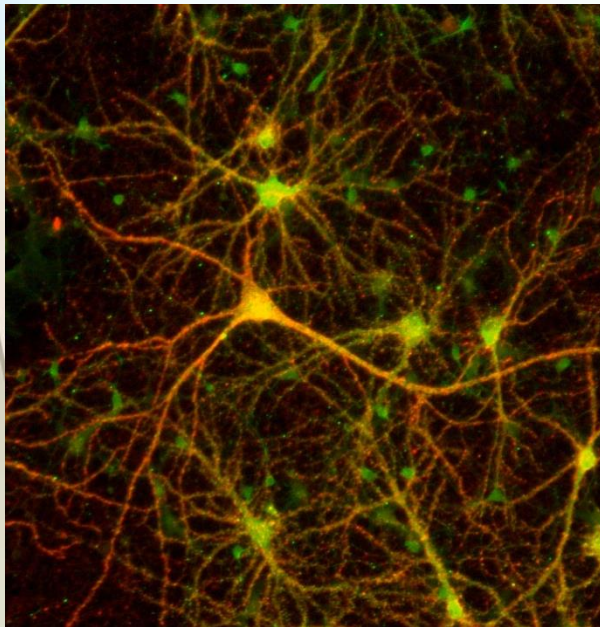
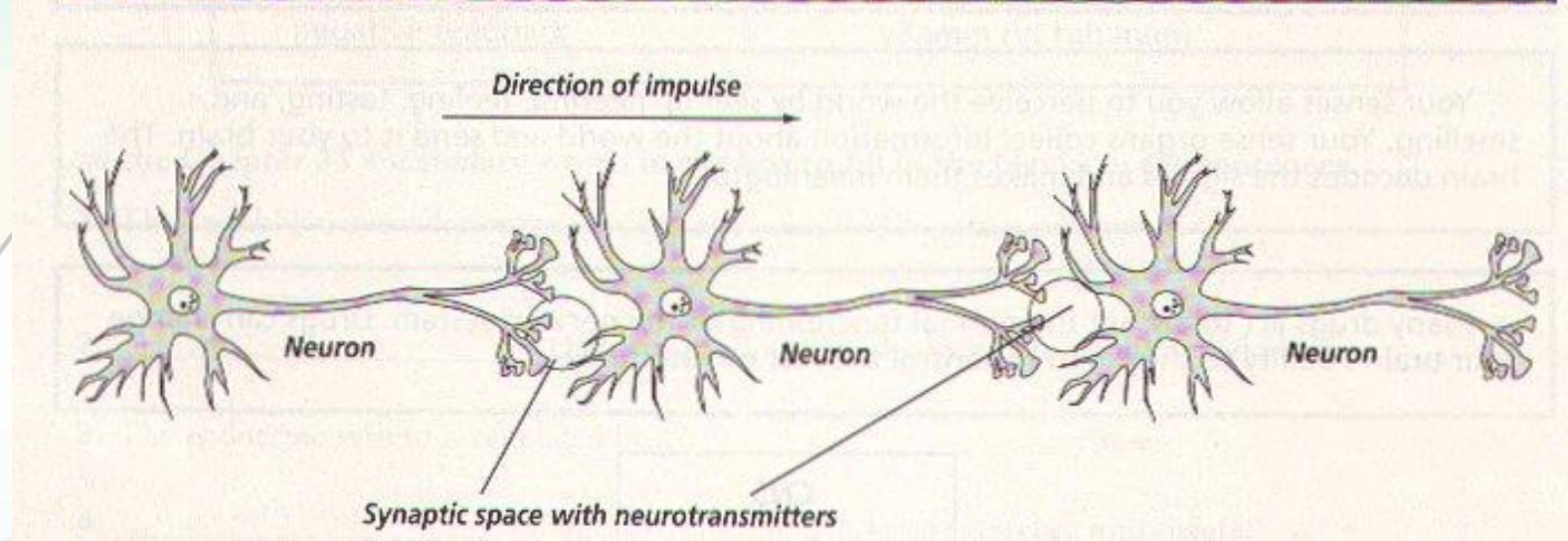
we have an estimated  
1,000,000,000,000,000

(a million billion)

connections in our brain!

Brain cells  
produce  
electrical  
signals that  
affect the  
brain's  
chemistry.

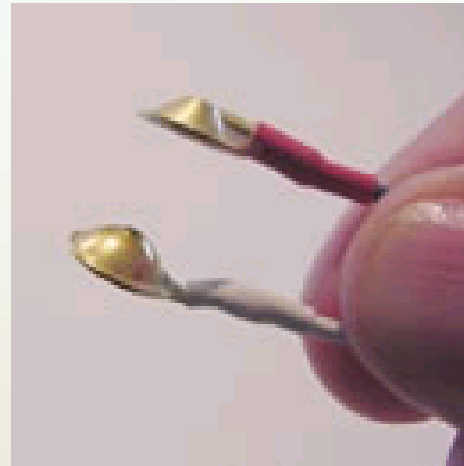




The electricity reflects normal cell activity as information is transferred from cell to cell.



We can detect this electrical activity using sensors (electrodes) placed on the scalp.





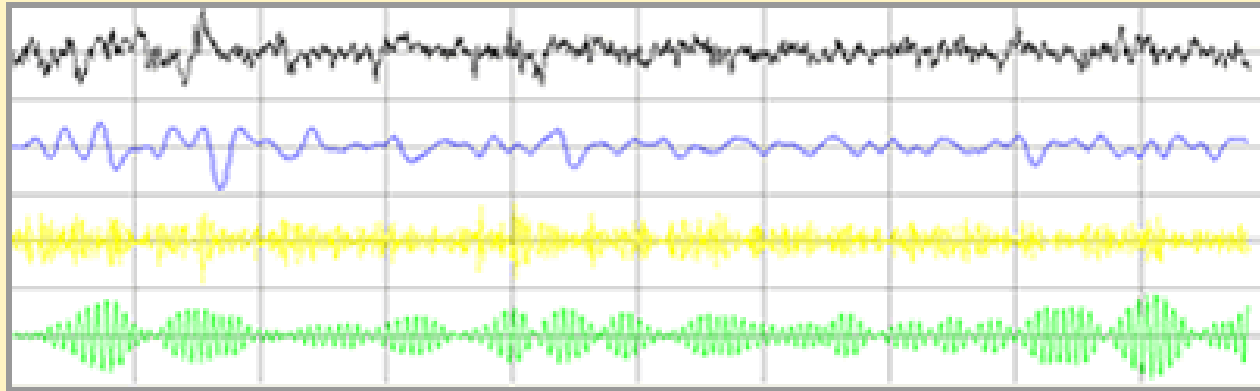
These electrodes pick up information about brain activity --

similar to the way stethoscopes pick up information about our hearts and lungs.



In both situations,  
**SENSORS** are gathering data.

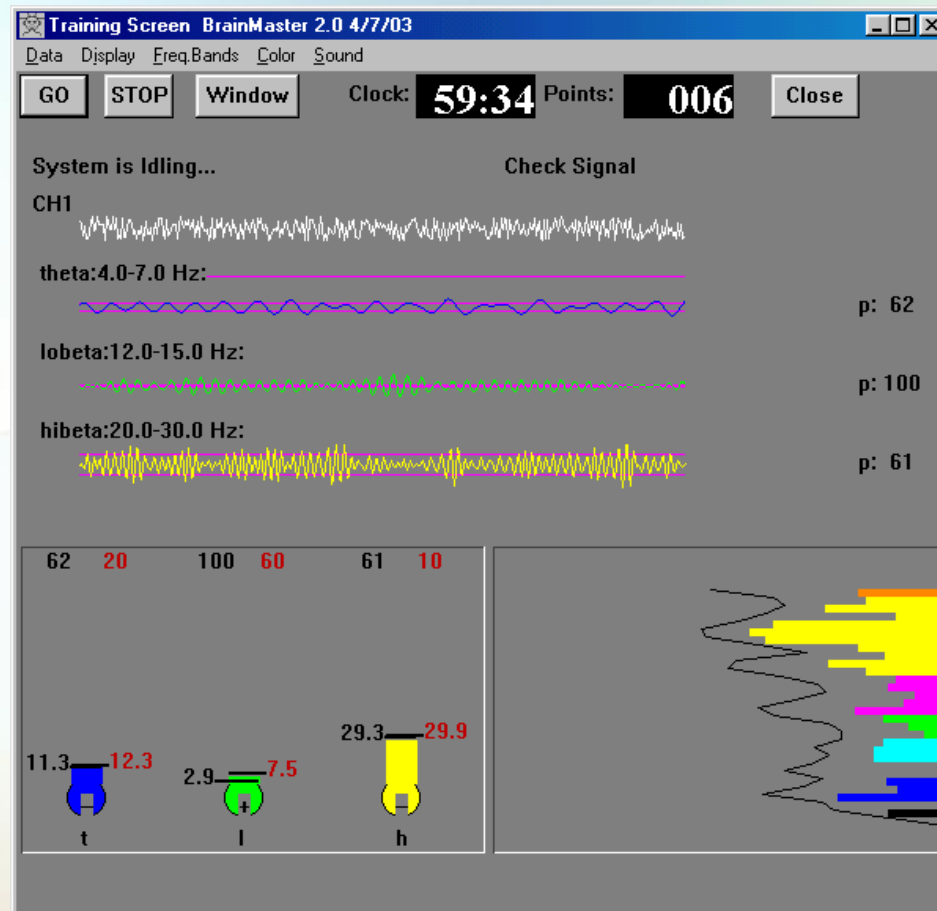




The signal is **VERY** tiny,  
measured in microvolts - about  
1 millionth of a volt.

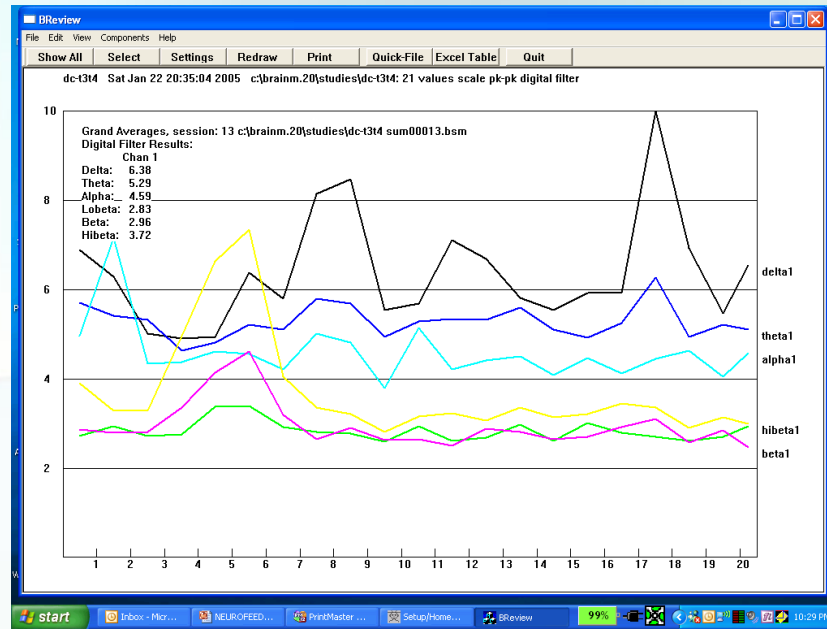
This electrical signal is then magnified by an amplifier, which is then fed through a computer.





BrainMaster training screen

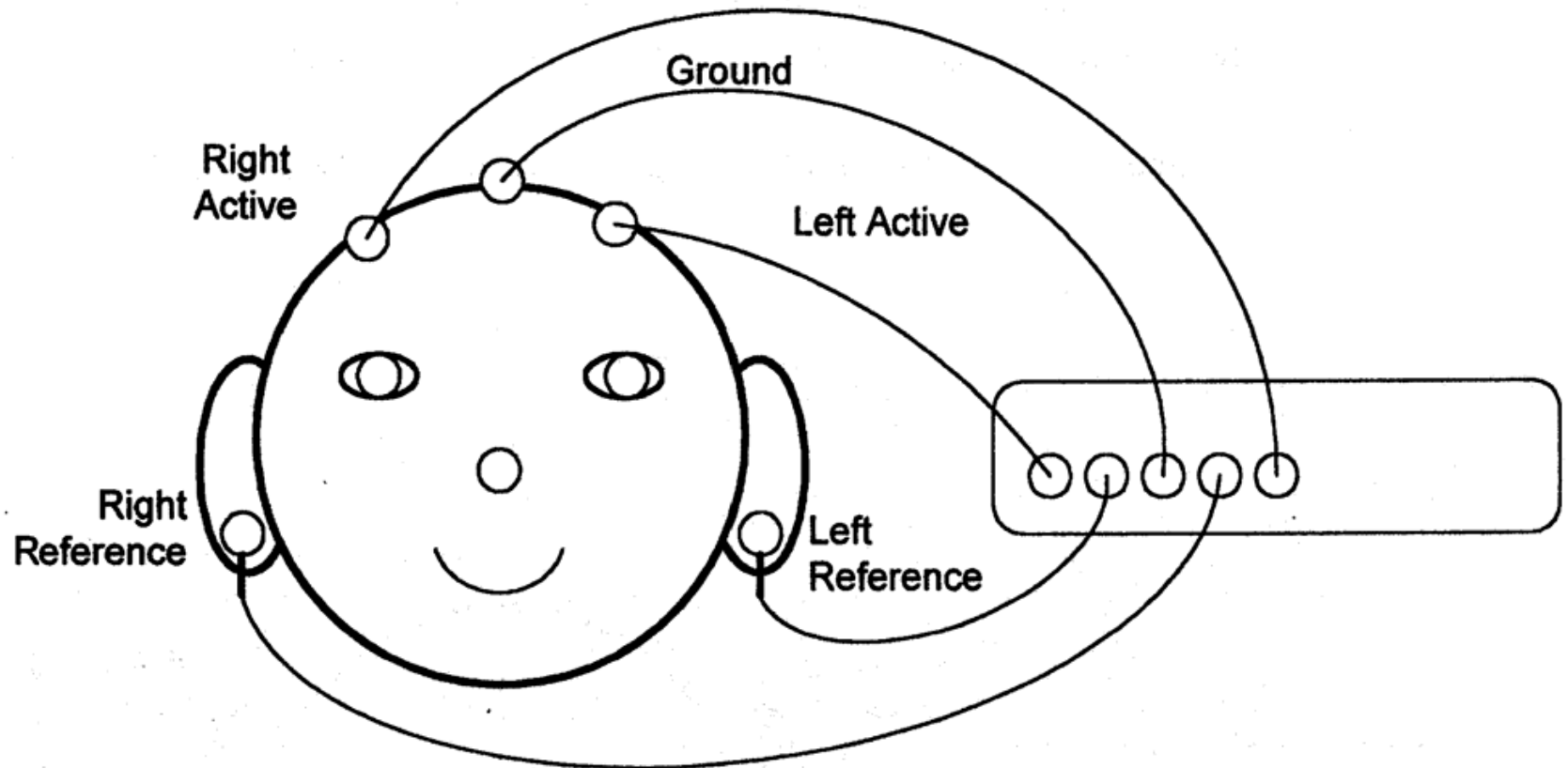
Special computer software can filter out the various brain wave frequencies & provide this information in a usable form.

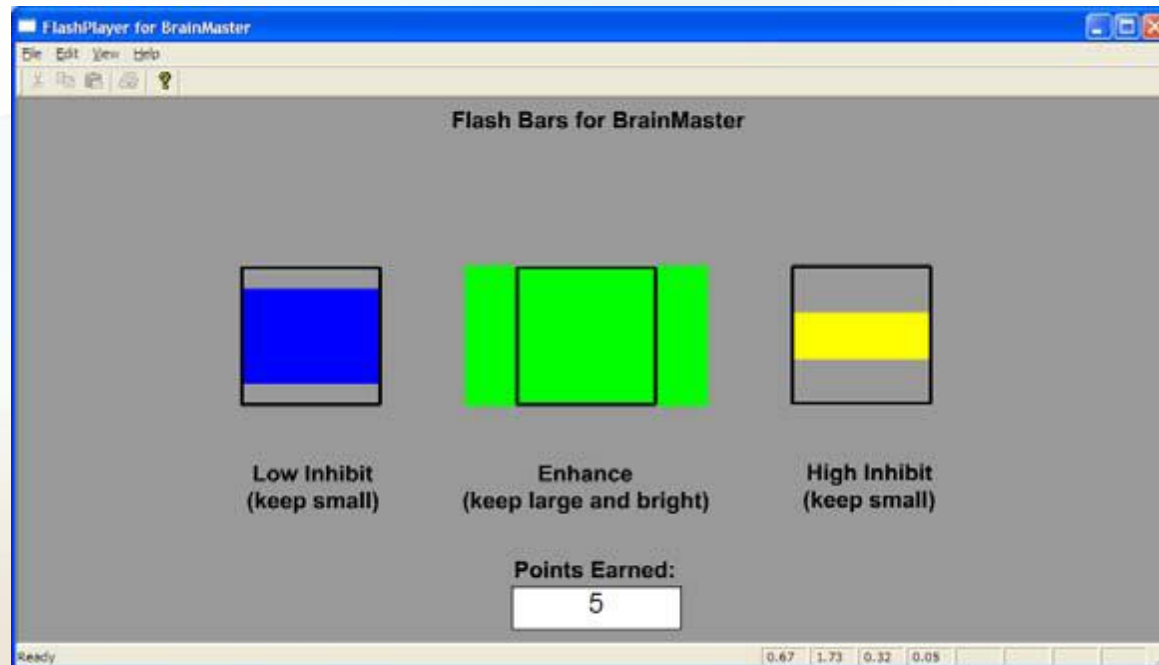


BrainMaster review screen

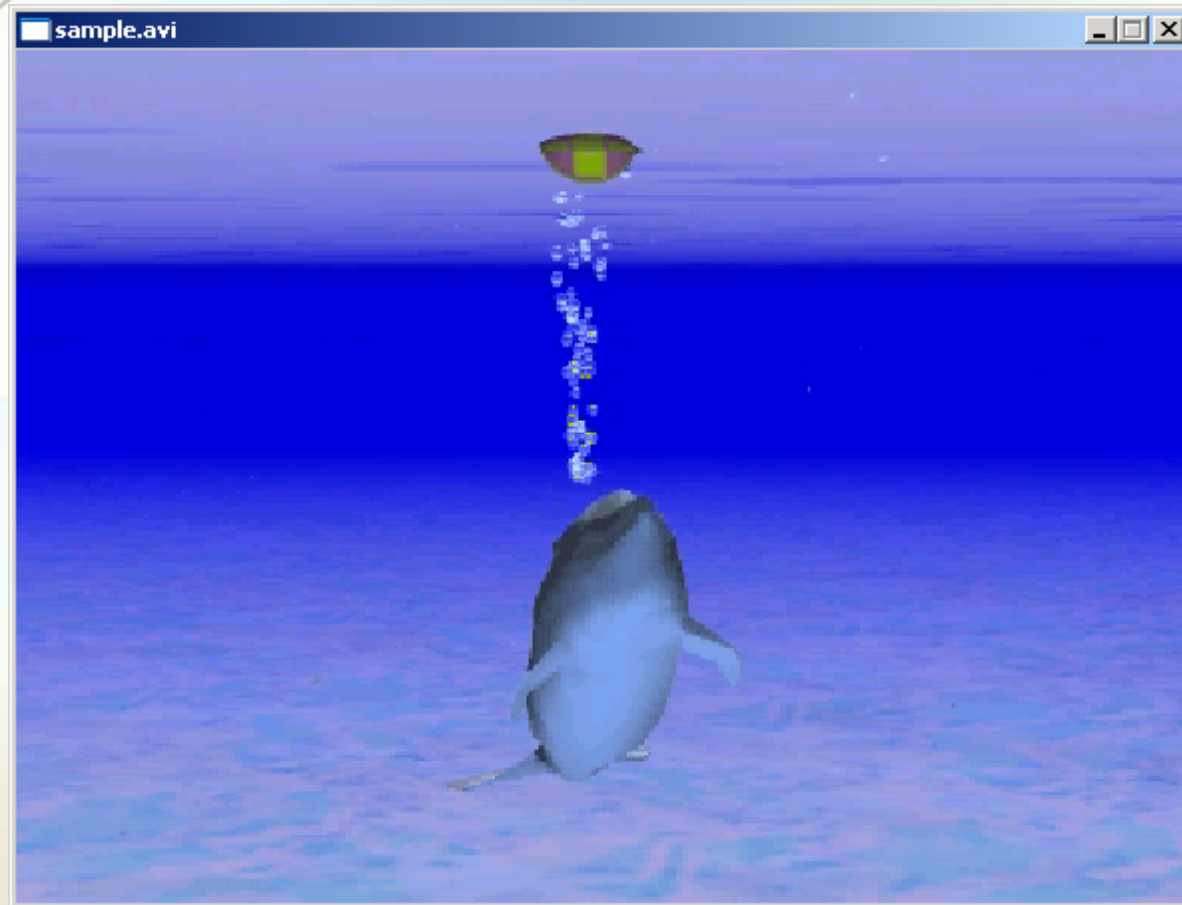
The patterns of brain wave activity vary, depending on where on the brain we are looking, and what kinds of things we are doing. In different mental states, different types of brain waves dominate.

# Setting Up the Training









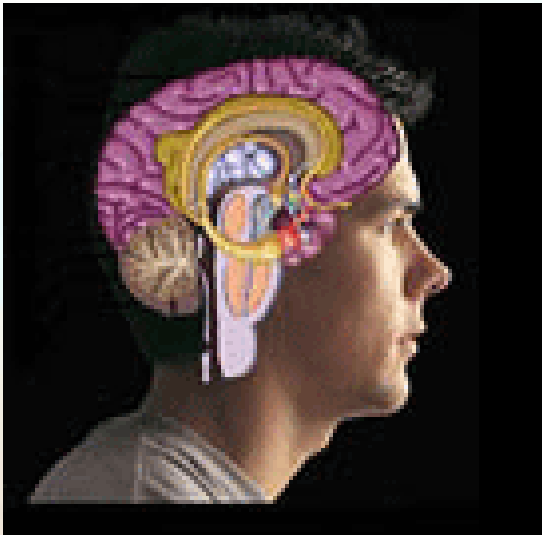
Using video for feedback: screen stays bright while brain is “on track,” goes dark when not meeting criteria. Allows for using DVDs!

**What's  
neurofeedback  
good for?**

# Current Clinical Uses

- ADHD
- Seizure disorders
- Alcoholism/substance abuse
- Traumatic brain injury
- PTSD
- Anxiety
- Depression
- Chronic Fatigue Syndrome
- Fibromyalgia
- Chronic Pain
- OCD
- Tourette's Syndrome
- Sleep disorders
- Autism
- Asperger's
- Bipolar disorder
- Schizophrenia
- Reactive attachment disorder
- Peak Performance
- Age related memory loss
- Parkinson's
- Migraines
- PMS

# Normal Brain



- Good balance of brain waves
- Ability to shift easily from one brain state to another

# Dysfunctional Brain



## May have

- too much of some frequencies over others
- unstable frequencies
- an impaired ability to shift from one mental state to another.

With all of these  
problems the real  
problem is the  
brain's impaired  
ability to regulate  
itself.



# UNDER-AROUSAL

is the problem with disorders like depression and ADHD.

# OVER-AROUSAL

is the problem with anxiety disorders (includes panic attacks, PTSD, agoraphobia, etc.)

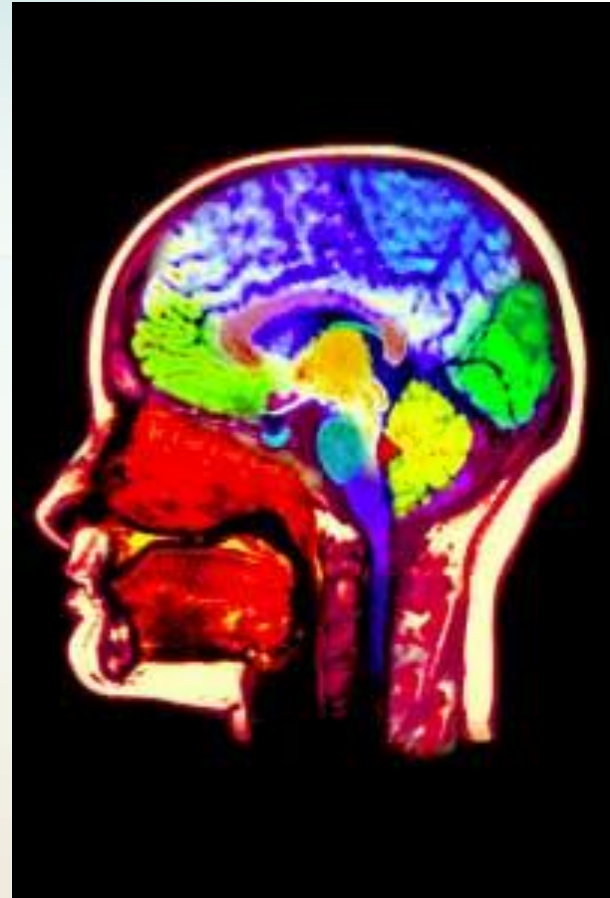
# INSTABILITY

is the problem with bipolar disorder, seizure disorders, migraines.

Neurofeedback  
works by helping  
to restore

-- or create --

a better balance  
of waves & activity  
in various parts  
of the brain.



# Measuring BRAIN WAVES

- **Microvolts** ( $\mu\text{V}$ ) = Amplitude/Height of the wave **(HOW MUCH?)**
- **Hertz** (Hz) = Frequency/Speed of the wave per second **(HOW FAST?)**

# FREQUENCY

- The speed of electrical undulations, measured in hertz (hz). [cycles per second]
- The frequency defines the brainwave bandwidth:
  - Delta, Theta, Alpha = Slow
  - SMR, Beta, High Beta = Fast
  - Gamma = "binding" frequency



# AMPLITUDE

- The power of the electrical impulse, measured in microvolts. ( $\mu\text{V}$ )
- Like **volume** is to sound
- Slower waves have higher amplitudes.
- It takes the brain a lot of energy to produce the faster waves, so amplitudes tend to be lower.

# *FREQUENCY BANDWIDTHS*

- Single frequencies organized into discreet groups - delta, theta, alpha, etc.
- Each bandwidth is associated with specific characteristics.

**Just as white light can get divided into colors by a prism or for a rainbow, an EEG can be divided into separate frequencies**

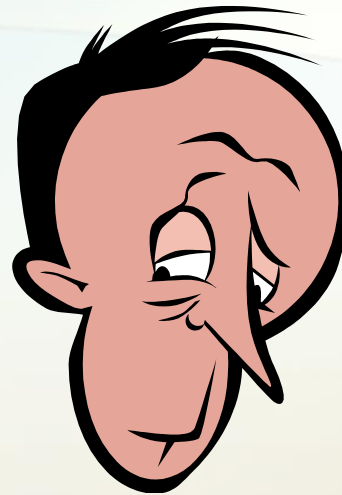


# *DELTA* $\delta$

- 0.5-3 Hz (cycles or waves per second)
- Sleep State
- Regenerative State
- Complex problem solving
- Consciousness completely internalized
- Transcendental states
- Dominant wave form in infants up to 6 months old
  - **40% of the EEG in infants**
  - **<5% of the EEG in a “normal” adult**

# High Amplitudes of Delta

- Learning Disabilities
  - “Sleepy Brains”
- Brain Injuries
- Eye Blinks and Eye Movement Artifact
- Possibly dissociation (trauma history)



# THETA $\Theta$

- 4-7 Hz (cycles or waves per second)
- Trance State
- Intuitive, Creative
- Internal Focus
- Thoughts in theta are visual and/or emotional



# High Amplitudes of Theta

- Learning Disabilities
  - Foggy Brains
  - Filtering Problems (ADHD)
  - Processing Problems (ADD)
- Slow Reaction Time
- Lack of Oxygen and Blood Flow
- Depression
- Anxiety

# ALPHA $\alpha$

- 8-12 Hz
- Alertness
- Peacefulness
- Readiness
- Meditation
- Alpha Peak Frequency



# High Amplitude *Alpha*

- High Frontal Alpha
  - Daydreamers
  - ADD/ADHD
  - Depression
  - Traumatic Brain Injuries
  - Marijuana Use



# SENSORIMOTOR RHYTHM (SMR or lobeta)

- 12-15 Hz
- Relaxed yet focused
- Stillness: Calm Mental State
- Reflecting-before-acting
- Sleep Spindles (12-14 Hz)



# BETA $\beta$

- 15-22 Hz
- Thinking
- Focused
- Sustained Attention
- Problem-Solving
- Externally Oriented



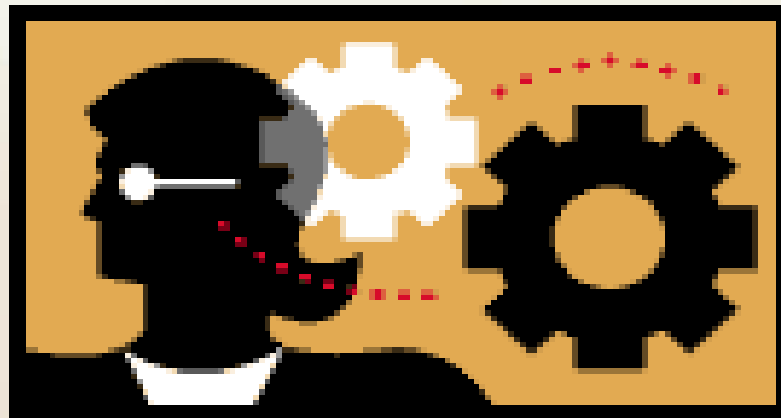
# High Amplitude *Beta* 15-22 Hz

- Left under-activation = Depression
- Right over-activation = Anxiety
- Anxiety Disorders
- Obsessive Compulsive Disorder
- Sleep Disorders
- Bruxism



# High Beta

- 23-35 Hz
- Hypervigilance
- Very fast cognitive processing



# High Amplitude *High Beta*

- Irritability
- Hypervigilance
- Overthinking
- Ruminations
- Obsessive Compulsive D/O



# GAMMA $\gamma$

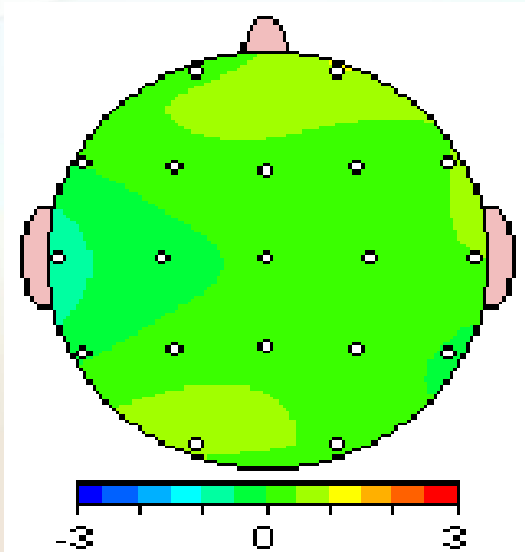
- 35-42 Hz (definition varies according to source)
- "The Binding Rhythm"
  - Important to learning by bringing together different aspects of an object into a single precept.
- Associated with transcendent experiences
- Found throughout the scalp rather than one discrete location

# DEPRESSION

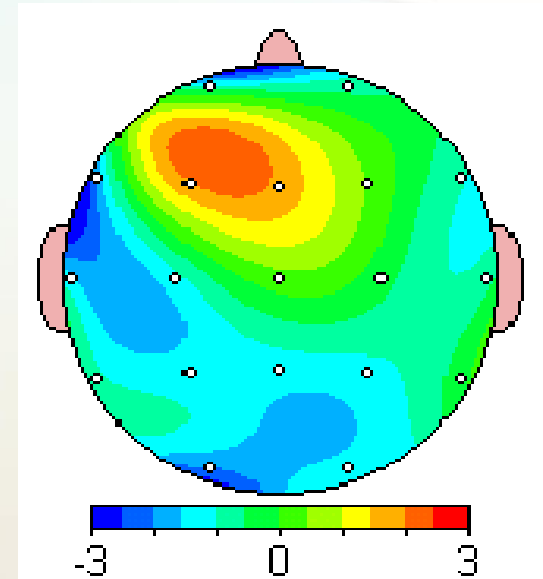


# Patterns of Slow Alpha (8-10 hz)

## NORMAL

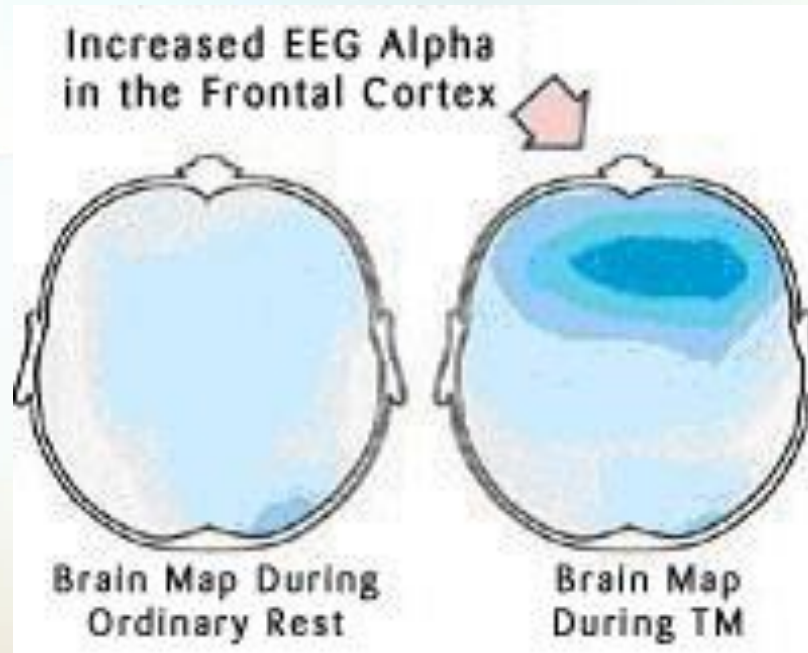


## DEPRESSION



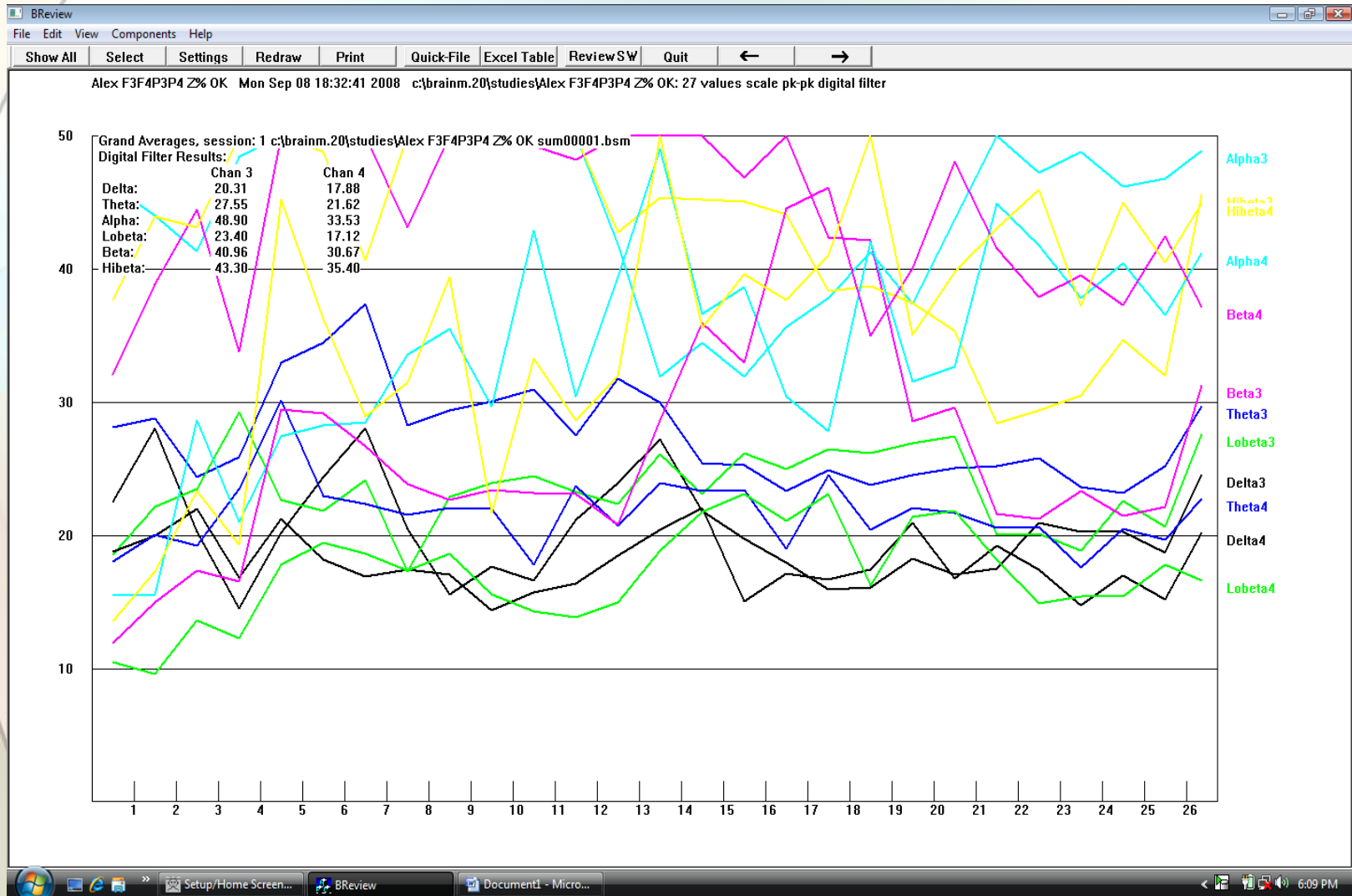
From Cory Hammond, Ph.D., [www.isnr.org](http://www.isnr.org)

# Meditation & Alpha



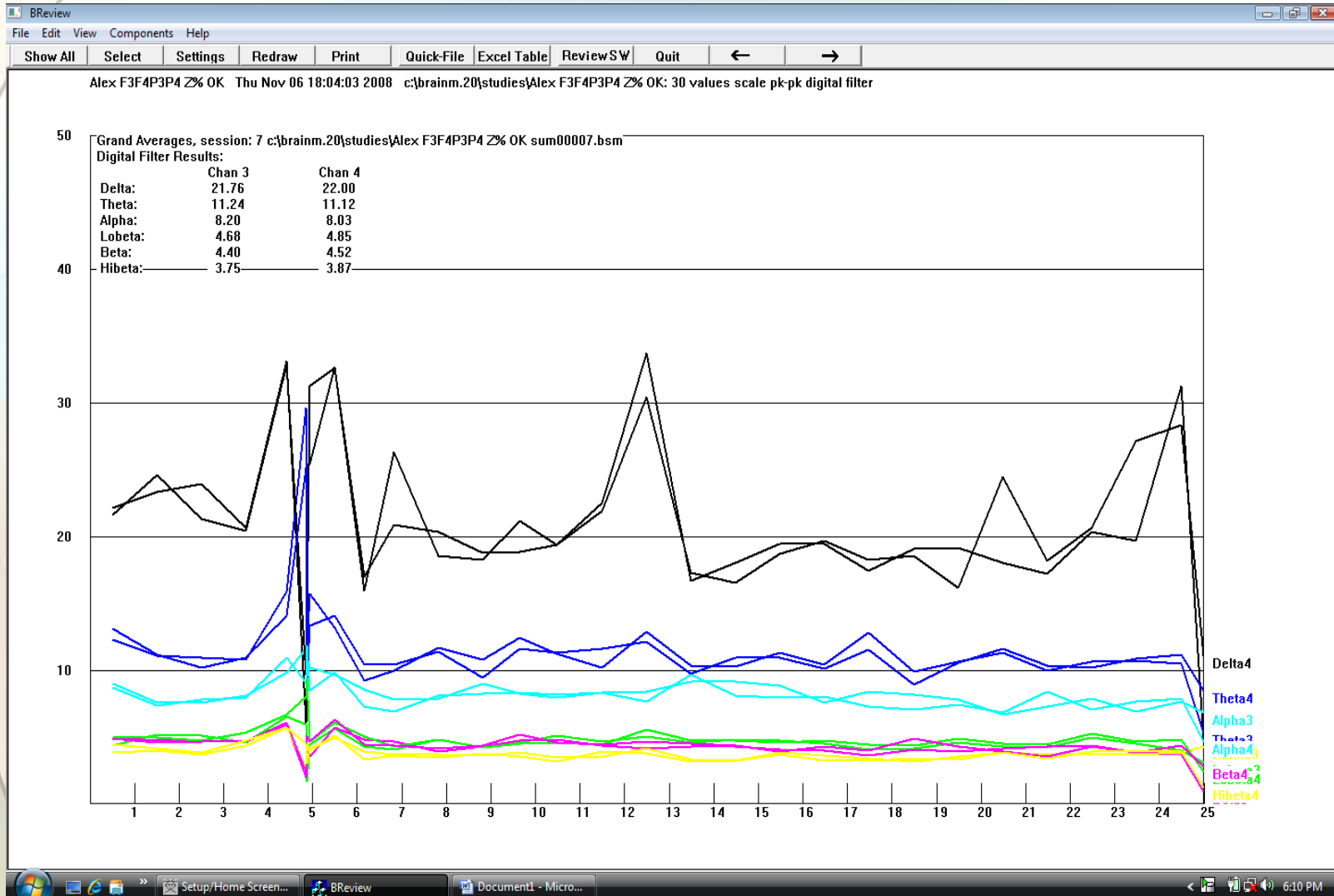


# Alex's Parietal Lobes - #1



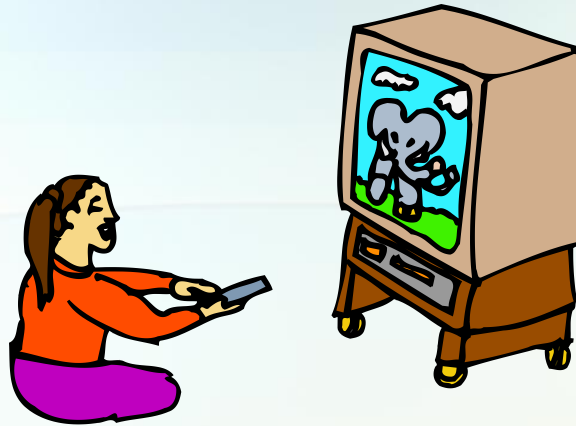
# Alex's Parietal Lobes - #7

## (z-score training)



# Attention Deficit Disorder

The brain produces fast beta waves when the person is actively mentally involved in a language-based task ...



...and slower theta waves when involved in an image-based processing task, like a video game.

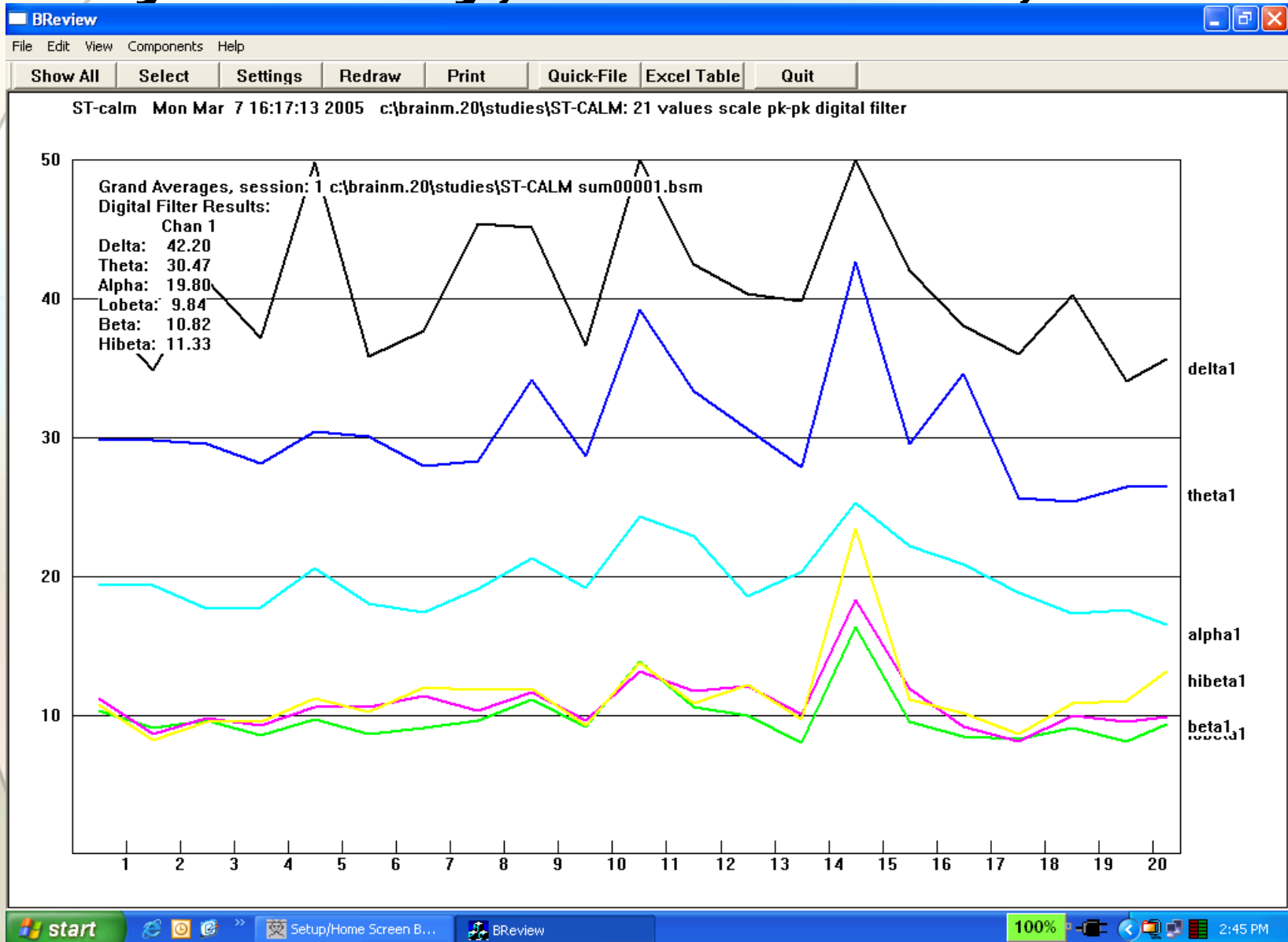
For under-powered brains a fast-wave task like school work ends up causing the brain to start into beta...

— then collapse into slow drowsy waves.



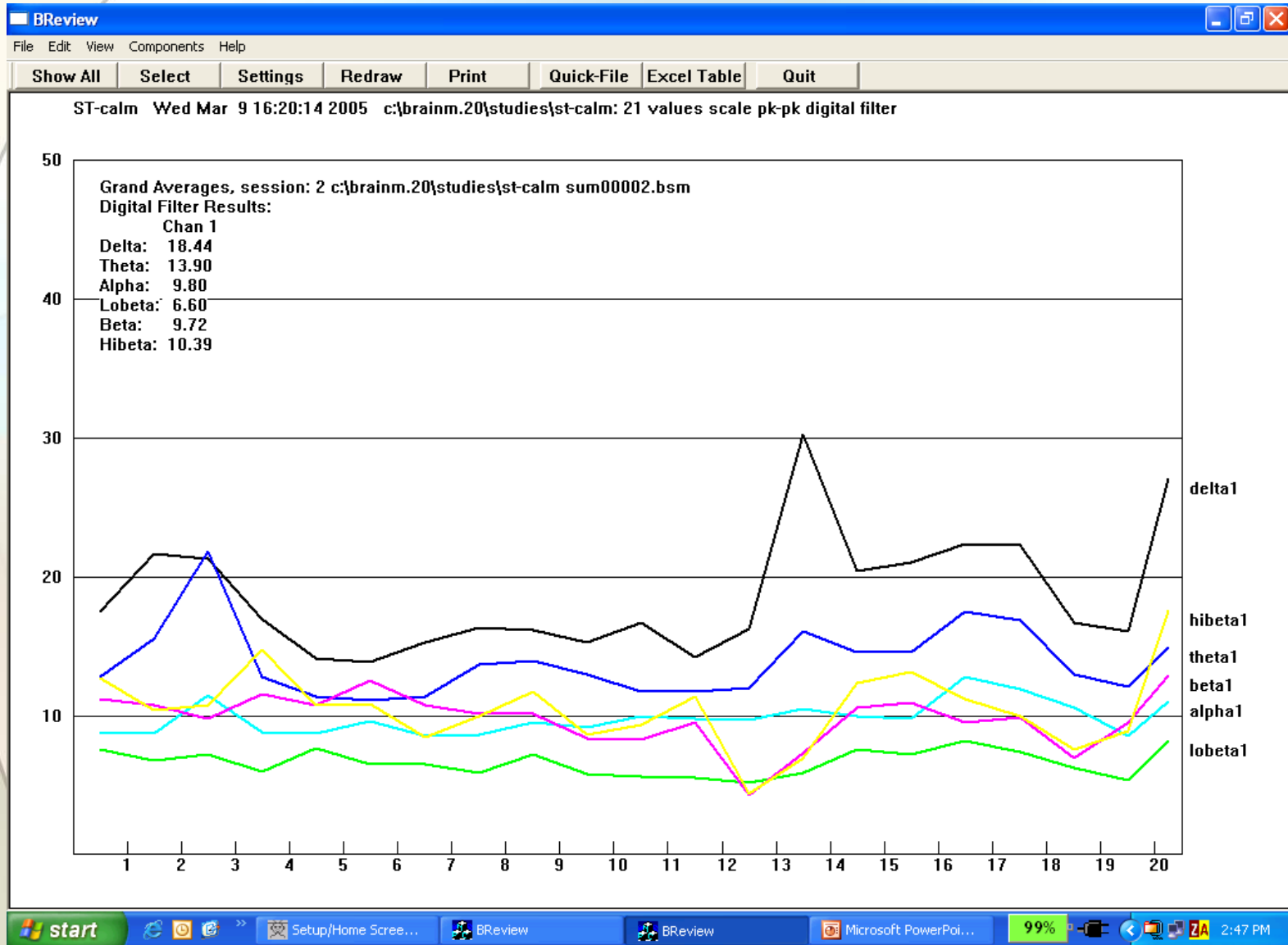
Stimulant meds can stimulate the brain-- until the meds wear off.

# 8 yr old boy, severe ADHD, tics

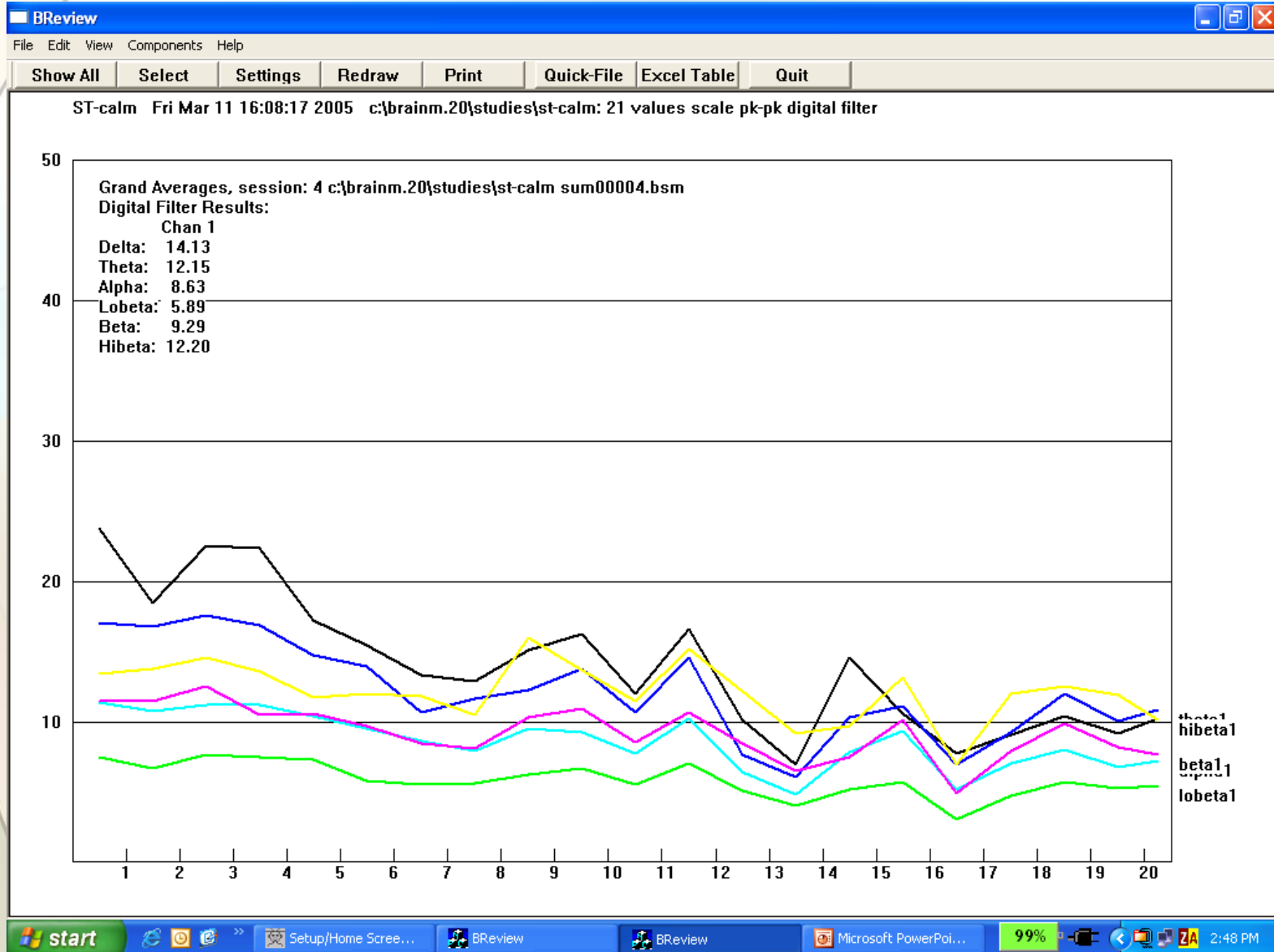


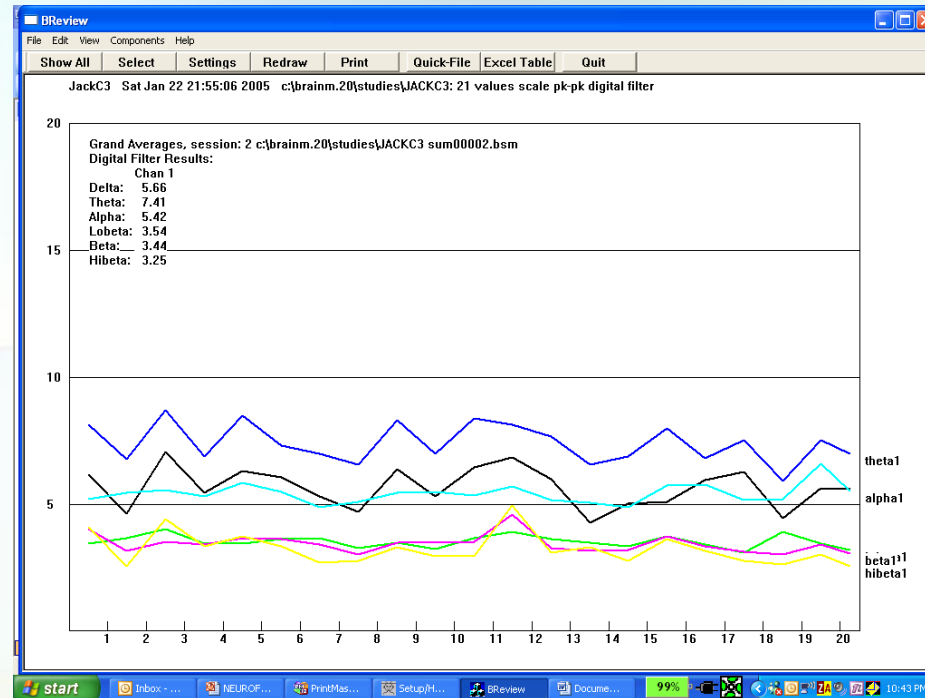


# Session #2

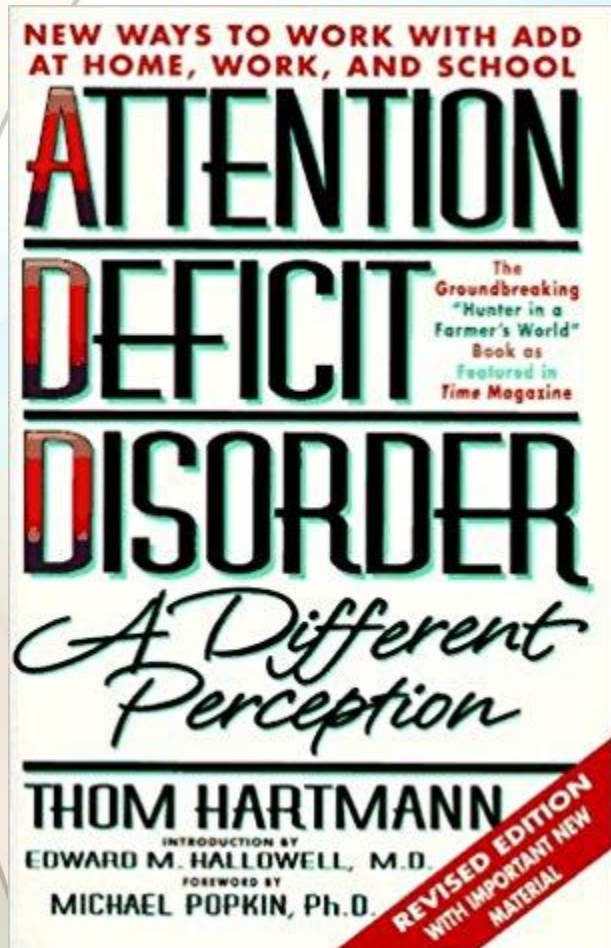


# Session #4





**NF works by re-training the brain to produce the beta waves on its own – and many people continue to improve after the training ends!**



However, is  
ADHD a  
**disability**  
- or just a  
**different kind**  
**of normal?**  
(Or both?)

# All attention problems are not ADHD!

## Other possible causes:

- Stress
- Trauma
- Attachment disruption
- Anxiety
- OCD
- Depression
- Learning disabilities
- Poor sleep
- Poor diet
- Lack of exercise
- Substance abuse



# ACE Study

## Adverse Childhood Experiences

- Kaiser Permanente & CDC
- Original study 1995-1997 in southern CA
- Over 17,000 participants = one of the largest studies ever of long term effects of childhood abuse & neglect





# ACE study asked about...

1. Emotional abuse
2. Physical abuse
3. Sexual abuse
4. Violence in home
5. Substance abuse in home
6. Serious mental illness in household
7. Parental separation/divorce
8. Household member in prison
9. Emotional neglect
10. Physical neglect



# Results?

33%  
no ACEs

51%  
1-3 ACEs

16%  
4-10 ACEs

---

## SMOKING

1 in 16

1 in 9

1 in 6

## IV DRUG USE

1 in 480

1 in 43

1 in 30

33%  
no ACEs

51%  
1-3 ACEs

16%  
4-10 ACEs

---

1 in 69

**ALCOHOLISM**  
1 in 9

1 in 6

1 in 14

**HEART DISEASE**  
1 in 7

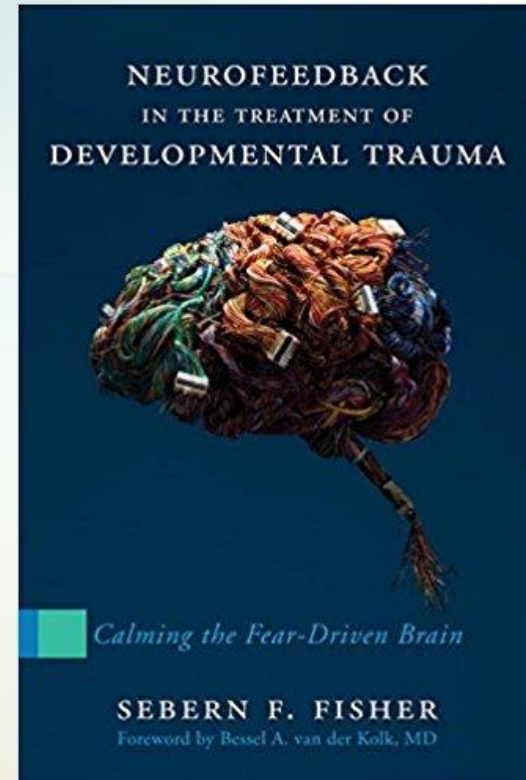
1 in 6

1 in 96

**SUICIDE ATTEMPTS**  
1 in 10

1 in 5

Early childhood trauma  
is never as predictive  
of treatment failure  
as the absence of a  
mother [physically  
and/or emotionally].



# We learn affect regulation early in life (= right hemisphere development)



Depends on maternal attunement to the  
affective needs of the baby

Lack of synchronicity → abnormal rhythms of  
brain, mind and body.

(Bessel van der Kolk, MD)



The core trauma may not be assaults (however terrible) but the absence of the mother, physically or emotionally, to prevent, address, or repair it. (Sebern Fisher)

FEAR is the  
pre-eminent  
emotion in all  
psychopathology,  
and has the  
potential to  
highjack all other  
states of mind.

Sebern Fisher





The child who  
feels **motherless**  
& **uncontained**  
lives in a central  
nervous system  
**frozen in fear...**





**"Without the felt experience of the self-regulated mother, the baby is so overtaken by fear for her survival (and perhaps for mother's too) that she has no capacity to organize a felt, coherent sense of self and other." (Allan Schore)**

# The good enough mother figure



- Protects child from effects of severe trauma.
- **Validates the child's experience** and **helps child recover and develop resiliency.**
- Makes the difference between **experiencing a traumatic event** and **becoming traumatized.**
-

# Why therapy alone is unlikely to work...

Effective therapy requires:

- Relationship with therapist that matters
- A sense of self and of others
- Some level of affect regulation

Likely to be missing in developmental  
trauma

# Why neurofeedback can make a difference

- **Helps develop affect regulation** - essentially **"rewiring"** the brain, especially the right hemisphere
- **Affect regulation** makes it possible to develop a **sense of self**

# Changing Brain Rhythms

The brain's **ability to learn and change** lies primarily in its electrical properties  
- **how it fires.**



The brain organizes itself rhythmically in brainwave frequencies...this is where brain plasticity resides.

**We can access those rhythms through NFB!**

# Deep States Training (trauma/substance abuse)

# Alpha-Theta Protocol

- Uses combination of water sounds (babbling brook & ocean surf) to reflect dominant alpha or theta
- Informational training (rather than operant conditioning) - not trying to do anything



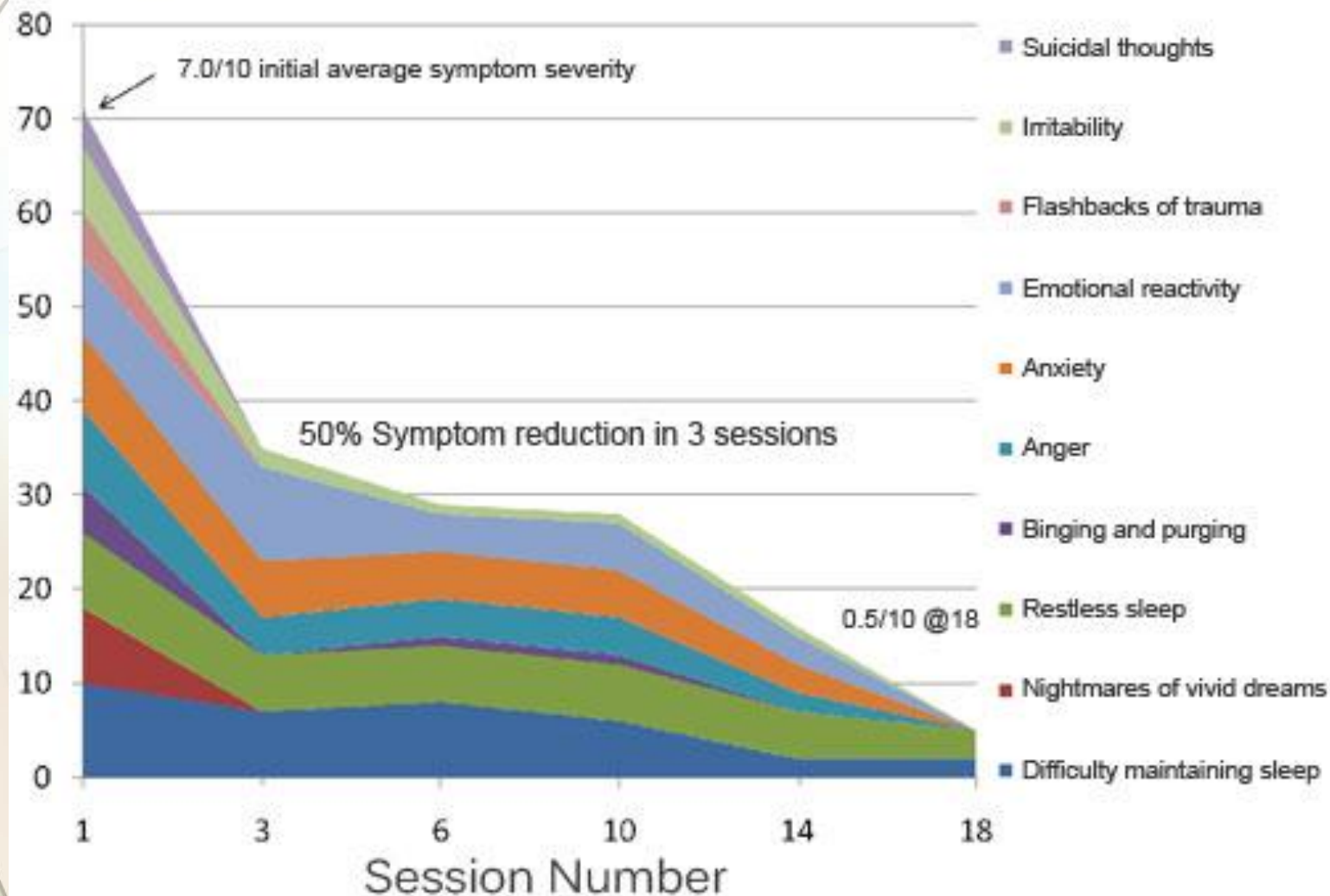
Lulls the brain down to 7 hz (theta),  
where visualizations & memory recall  
may occur - but without triggering the  
brain's alarm system

Trauma can get reprocessed without  
the emotional content.

(described as witnessing rather than re-experiencing)

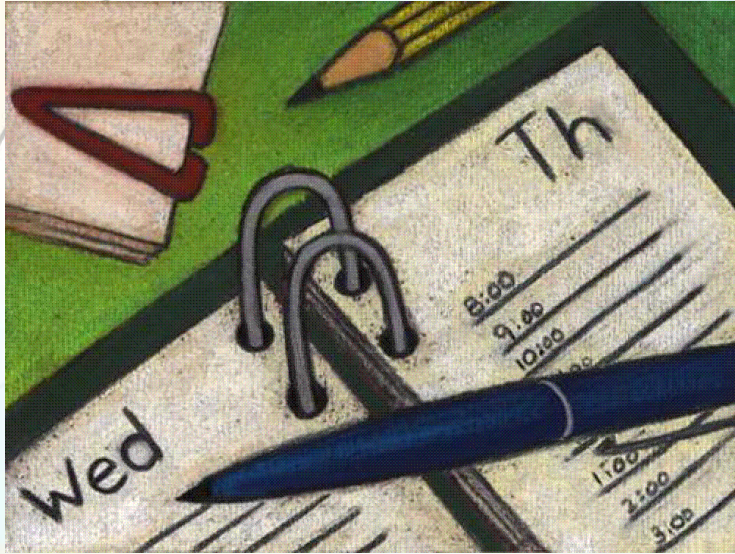
Also useful for guided imagery -  
powerful way to image how one  
wants to be in particular  
situations in future

### Symptom Severity Trend over first 18 Sessions



Non-clinical applications of NFB  
include...

- Creativity
- Insight
- Performance
- Heightened awareness



**How long is the  
treatment?**

**Typical training is  
2-3 times a week, for  
30-60 minutes.**



**Usually the effects are gradual,**



**although they can sometimes  
be more immediate.**



**For many conditions,**

**20-40 sessions**

**will provide nearly  
permanent relief.**

# Z-Score Training

- Focuses on reducing variances from the norm (standard deviations)
- Special software **assesses the current brainwave activity,** compares the data to a normative data base, & **develops the appropriate training protocol.**

# Live Z Scores –4 channels (248 targets)

Training/Control Screen - BrainMaster 3.0.7

GO

STOP

Window

Clock:

39:37

Points:

000

Close

System is Idling...

Check Signal

SITES: F3 F4 (EC)

Abs

Rel

Rat/T

Rat/A

Rat/B

Rat/G

Delta [1.0-4.0]

-0.6

-0.4

-0.1

-0.1

-0.1

-0.1

Theta [4.0-8.0]

-0.6

-0.3

0.0

0.0

0.0

Alpha [8.0-12.5]

-0.6

-0.4

-0.7

-0.7

Beta [12.5-25.5]

0.3

0.8

-1.0

Beta 1 [12.0-15.5]

0.7

1.1

Beta 2 [15.0-18.0]

0.4

0.7

Beta 3 [18.0-25.5]

0.6

0.9

Gamma [25.5-30.5]

0.3

0.7

Delta [1.0-4.0]

-0.7

-0.6

-0.1

-0.1

-0.1

-0.1

Theta [4.0-8.0]

-0.5

-0.4

-0.3

-0.3

-0.3

Alpha [8.0-12.5]

-0.2

-0.0

-1.0

-1.0

Beta [12.5-25.5]

0.7

1.0

-1.1

Beta 1 [12.0-15.5]

0.8

1.0

Beta 2 [15.0-18.0]

0.3

0.5

Beta 3 [18.0-25.5]

0.7

0.9

Gamma [25.5-30.5]

0.2

0.4

SITES: P3 P4 (EC)

Abs

Rel

Rat/T

Rat/A

Rat/B

Rat/G

Delta [1.0-4.0]

-1.1

-0.5

-0.5

-0.5

-0.5

-0.5

Theta [4.0-8.0]

-0.4

0.2

-0.1

-0.1

-0.1

Alpha [8.0-12.5]

-0.6

-0.4

-0.9

-0.9

Beta [12.5-25.5]

0.2

0.8

-1.5

Beta 1 [12.0-15.5]

1.0

1.4

Beta 2 [15.0-18.0]

0.0

0.6

Beta 3 [18.0-25.5]

0.5

1.0

Gamma [25.5-30.5]

0.4

1.0

Delta [1.0-4.0]

-0.9

-0.4

-0.5

-0.5

-0.5

-0.5

Theta [4.0-8.0]

-0.2

0.3

0.1

0.1

0.1

Alpha [8.0-12.5]

-0.8

-0.7

-0.9

-0.9

Beta [12.5-25.5]

0.4

1.0

-1.1

Beta 1 [12.0-15.5]

0.7

1.1

Beta 2 [15.0-18.0]

0.2

0.7

Beta 3 [18.0-25.5]

0.4

0.9

Gamma [25.5-30.5]

0.4

0.9

F3-F4: ASY

COH

PHA

F3-P3: ASY

COH

PHA

F3-P4: ASY

COH

PHA

F4-P3: ASY

COH

PHA

F4-P4: ASY

COH

PHA

P3-P4: ASY

COH

PHA

Delta [1.0-4.0]

0.1

-1.3

1.9

0.3

-0.1

0.6

0.2

-0.3

0.9

0.2

-0.1

0.4

0.1

-0.2

0.8

-0.2

-1.0

1.6

Theta [4.0-8.0]

-0.1

-1.6

2.1

-0.1

0.0

0.6

-0.4

-0.7

0.6

-0.0

-0.1

0.4

-0.3

-0.6

0.8

-0.3

-1.5

1.4

Alpha [8.0-12.5]

-0.6

-2.0

1.8

0.1

-0.5

0.4

0.3

-0.6

0.4

0.6

-0.6

0.4

0.7

-0.6

0.5

0.1

-0.9

1.0

Beta [12.5-25.5]

-0.3

-1.9

0.9

0.1

-0.7

0.5

-0.1

-0.7

0.4

0.4

-0.6

0.5

0.2

-0.3

0.1

-0.2

-1.2

0.7

Beta 1 [12.0-15.5]

-0.1

-0.9

0.8

-0.2

-0.5

0.4

0.0

-0.1

0.6

-0.0

-0.2

0.6

0.2

-0.3

0.6

0.2

-1.1

0.6

Beta 2 [15.0-18.0]

0.1

-1.1

1.1

0.3

0.4

0.0

0.1

-0.2

0.4

0.3

-0.3

0.4

0.1

-0.4

0.3

-0.2

-0.4

0.6

Beta 3 [18.0-25.5]

-0.2

-0.9

1.1

0.1

-0.0

0.6

0.1

-0.1

0.8

0.2

-0.2

0.6

0.3

0.0

0.3

0.1

-0.5

0.4

Gamma [25.5-30.5]

0.1

-1.1

0.8

-0.1

-0.2

0.3

-0.1

-0.4

0.4

-0.1

-0.5

0.6

-0.1

-0.1

0.1

-0.0

-1.0

1.0

$$26 \times 4 + 24 \times 6 = 248 \text{ (104 power, 144 connectivity)}$$

For traditional therapy,  
NFB can make people  
"more available" and  
therapy-ready by quieting  
(or energizing or  
stabilizing) their brains.

# What are the costs?

1. Training

2. Equipment

TRAINING:

What does it take  
to get certified in  
neurofeedback?

# REQUIREMENTS

1. BCIA blueprint workshop (36 hrs)
2. Practical experience (100 sessions + 10 on self)
3. 25 hrs of mentoring
4. Neuroanatomy/neuropsychology
5. Professional license/credential
6. Written exam



# BCIA Training Blueprint

1. Orientation - 4 hrs
2. Basic Neurophysiology & Neuroanatomy - 4 hrs
3. Instrumentation & Electronics - 4 hrs
4. Research Evidence Base for Neurofeedback - 2 hrs
5. Psychopharmacological Considerations - 2 hrs
6. Patient/Client Assessment - 4 hrs
7. Developing Treatment Protocols - 6 hrs
8. Treatment Implementation - 6 hrs
9. Current Trends in Neurofeedback - 2 hrs
10. Ethical & Professional Conduct - 2 hrs

**TOTAL 36 hours**

# Where to get training?

- Must be a BCIA-accredited training
- Stress Therapy Solutions ([www.stresstherapysolutions.com](http://www.stresstherapysolutions.com)) ~\$1240
- Various equipment manufacturers - BCIA website has a list (about the same \$)
- Online training - John Demos & others (~ \$1050)
- Purchase training packages (~\$750)

# EQUIPMENT\*

- Amplifier & cables
- Software
- Sensors
- Supplies (NuPrep, EEG paste)

\*lease-purchase plans available



4-channel Atlantis (can  
also get a 2-channel  
amplifier)

# What's Included in This \$3300 Package?

- 4-channel Atlantis amplifier & cables, carrying case
- Set of 18" Electrodes (5 electrodes per pack) + earclips
- NuPrep Gel & 10/20 Paste
- BrainAvatar 4.0 software
- MultiMedia Player Package (MMP) *[needed for alpha-theta training]*
- 15-month warranty
- Complimentary 1 year Affiliate Membership
- **Z-score software is an add-on - about \$1000**

# 19 channel Discovery amplifier



About \$5,000  
with impedance lid  
(recommended)  
**PLUS** software)

- Can do QEEGs (brain maps)
- Can train many areas at once!

**PLUS a good computer  
(desktop or gaming laptop)**





**Why should you  
consider learning  
neurofeedback?**

1. Better client outcomes - and probably much more quickly
2. Many clients seeking non-Rx alternatives (we are an over-medicated society)
3. Empowering client experience  
- client does the work!

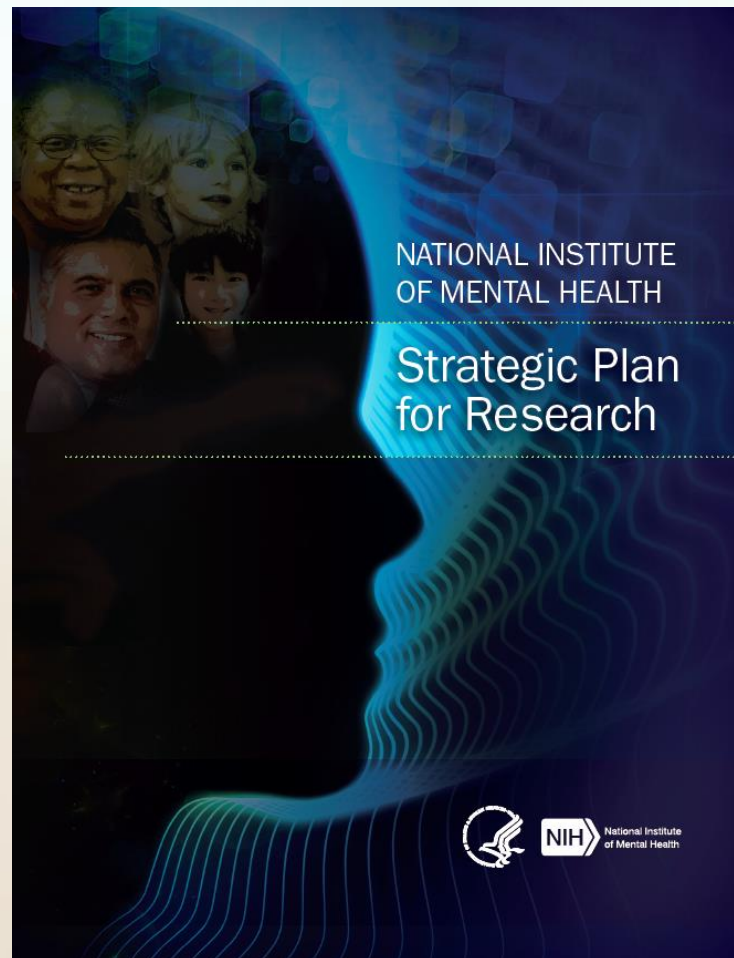
4. Good for therapy-resistant clients

5. Can treat co-occurring disorders concurrently

6. It makes sense!

**"Neurons that fire together wire together" = habit**

NIMH has a growing interest in neuroscience and biomarkers for mental illness in the brain





Science News About the BRAIN Initiative

## **NIH Nearly Doubles Investment in BRAIN Initiative Research (2016)**

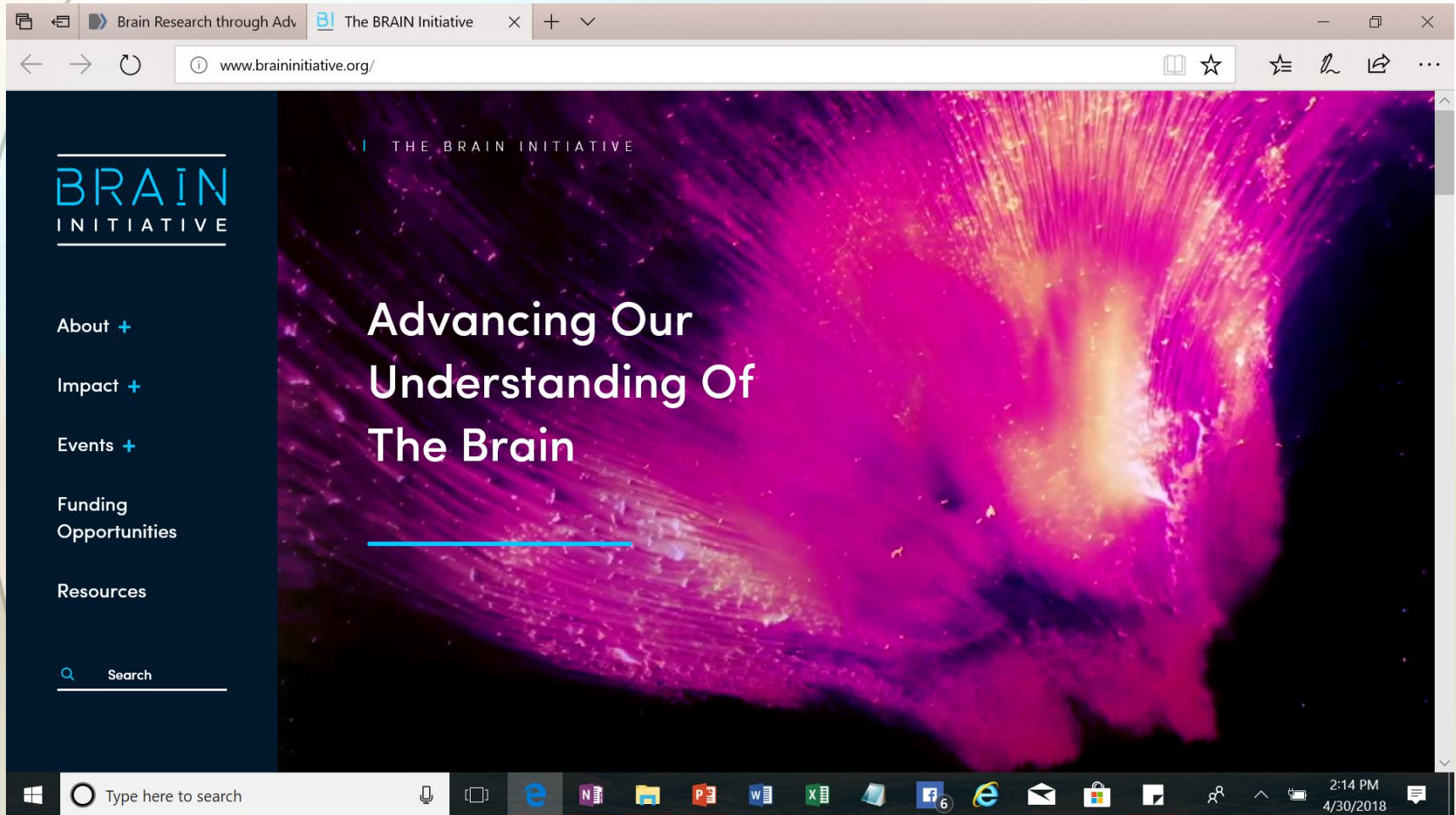
NIH's third round of grants to support the goals of the Brain Research through Advancing Innovative Neurotechnologies (BRAIN) Initiative total just over \$150 million.

[www.isnr.org](http://www.isnr.org) : International Society for Neurofeedback & Research.  
Comprehensive bibliography of neurofeedback research organized by disorder. Journal articles, provider list and other information.

[www.aapb.org](http://www.aapb.org): Association for Applied Psychophysiology & Biofeedback.  
International biofeedback organization.  
Home of BCIA (Biofeedback Certification International Alliance).



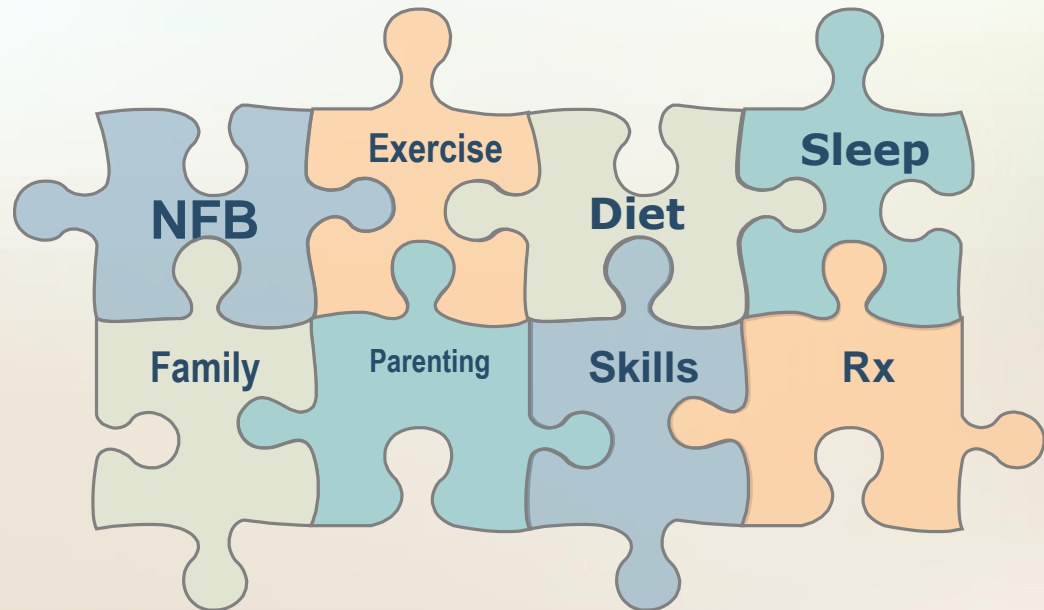
<https://braininitiative.nih.gov/index.htm>





# For best results...

## Include neurofeedback as part of a comprehensive approach





We can't choose our heads, but we can change our brains!

# THE END

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