



Integrating QEEG and Precision Medicine in Complex Mental Health Care

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2026 AAPB Scientific Meeting

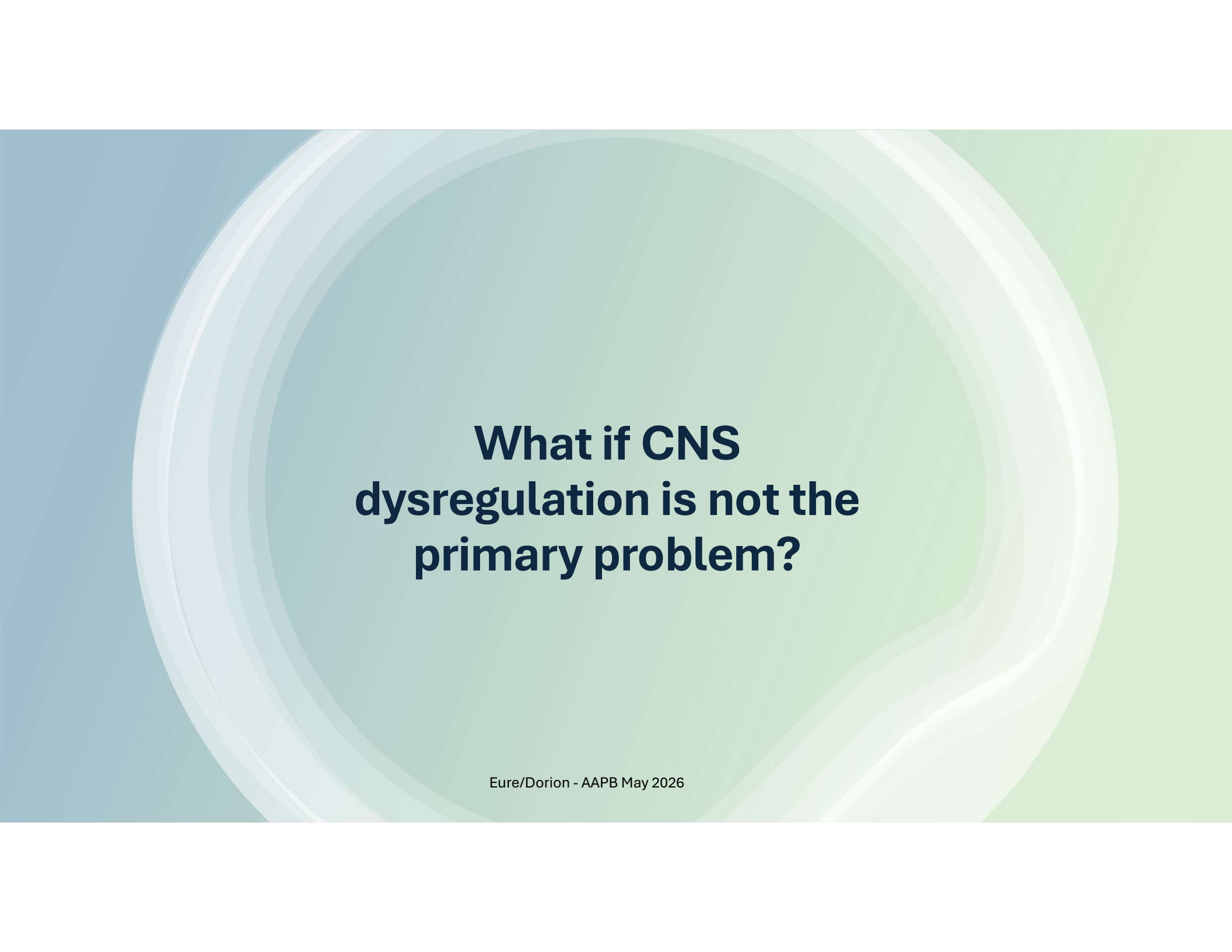
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Framing the Clinical Problem

- Complex & chronic cases
- Plateaued progress
- Complicated QEEG findings

“This should be working...”





**What if CNS
dysregulation is not the
primary problem?**

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Today's Take- aways

When to proceed

When to retest

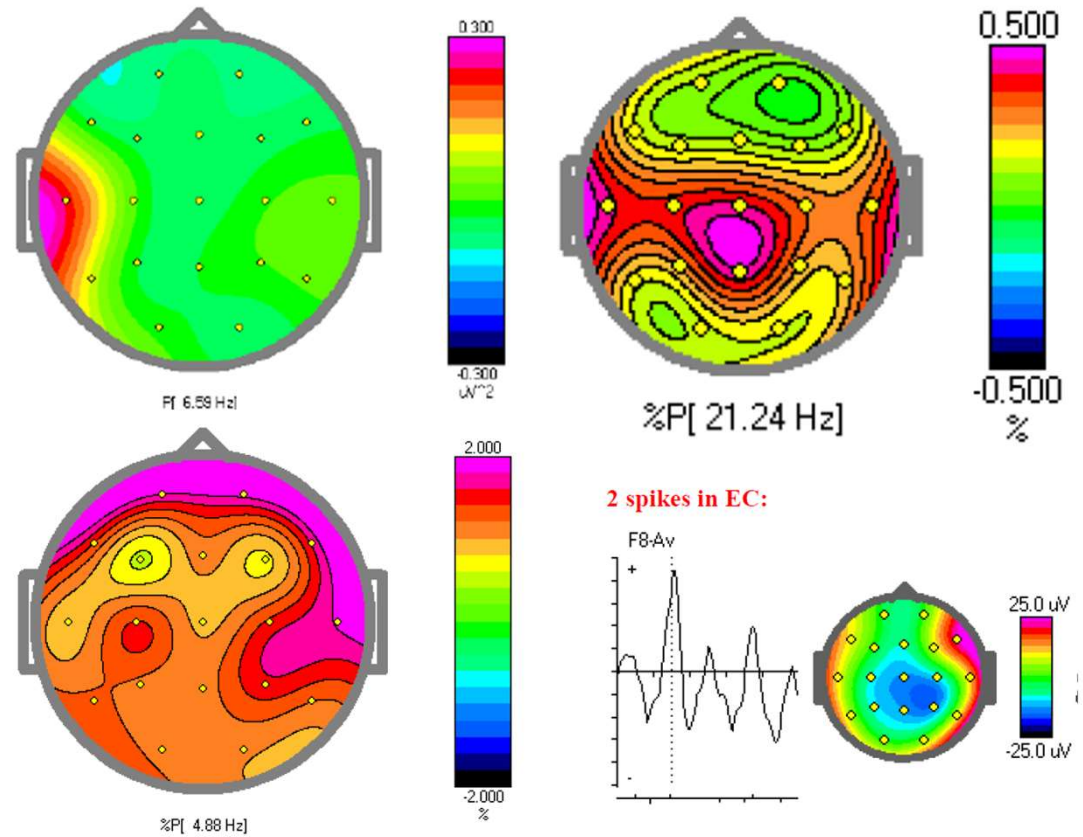
When to refer

How to collaborate

QEEG as Guide

EEG Phenotypes That May Warrant Medical Referral

- Diffuse slowing
- Focal Findings
- Spindling excessive beta
- Instability



Swatzyna, R. J., Morrow, L. M., Collins, D. M., Barr, E. A., Roark, A. J., & Turner, R. P. (2024). **Evidentiary significance of routine EEG in refractory cases: A paradigm shift in psychiatry.** *Clinical EEG and Neuroscience*, 56(5), 446–456.



Diffuse Slowing

Reflects **global cortical dysregulation**.

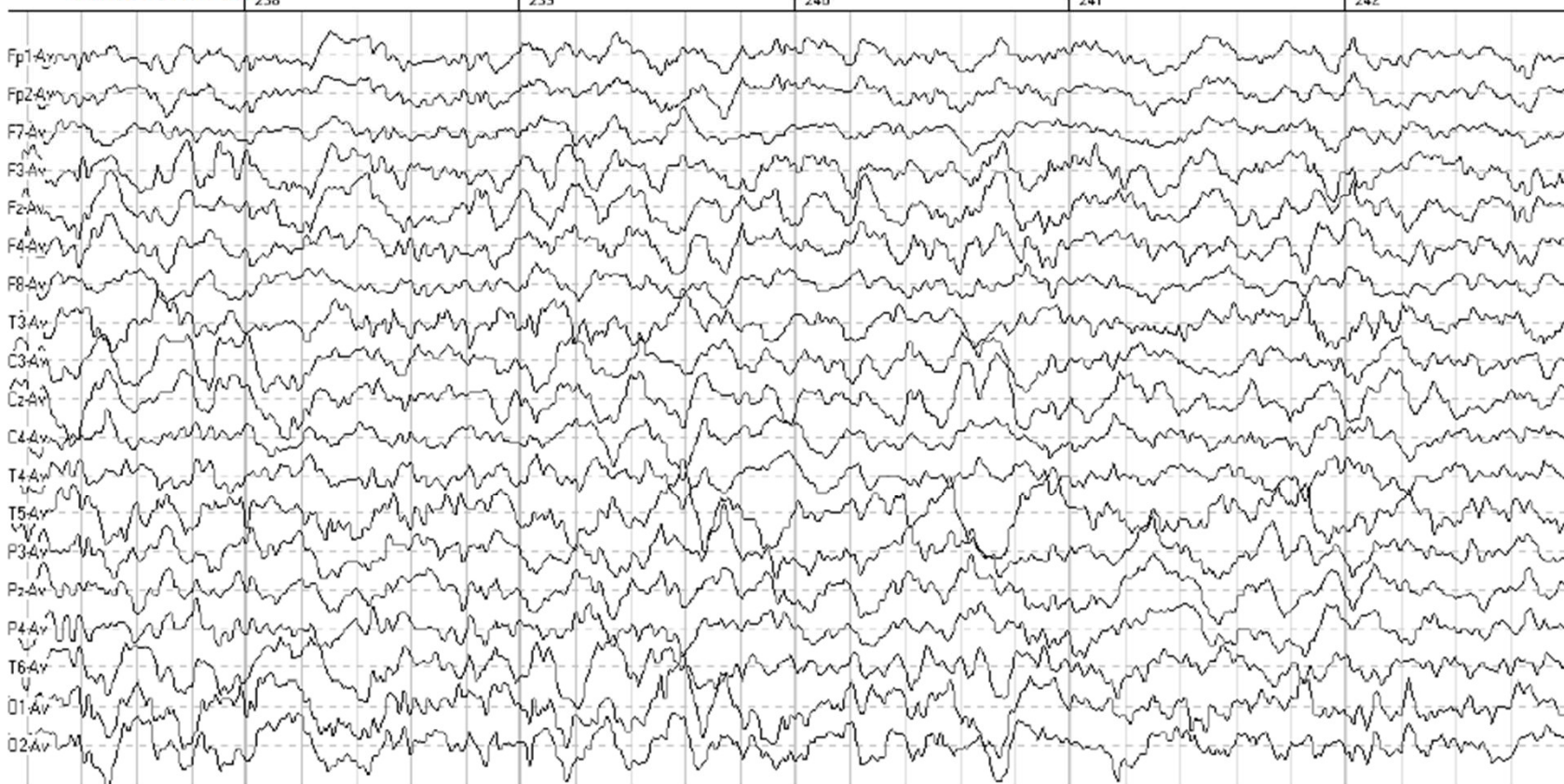
Some of the many causes include:

- Mitochondrial dysfunction
- Metabolic disturbance
- Anoxia
- Toxic exposure
- Infection
- Diffuse brain injury
- **Encephalopathy can only be identified/diagnosed by a neurologist or a neurophysiologist.**

Niedermeyer, E. (2003). **The clinical relevance of EEG interpretation.** *Clinical Electroencephalography*, 34(3), 93–98.

Diffuse Slowing - Case Example ('SC') - Eyes Open Surface EEG

Scale: 70 mcV/cm, speed - 30mm/sec, time constant - 0.3 sec, low frequency filter - 50 Hz; a notch filter - 45-75 & 105-135 Hz. Vertical and horizontal eye movement artifact correction was done by means of Independent Component Analysis (ICA)



Diffuse Slowing - Case Example ('SC')



%P[4.88 Hz]

QEEG Findings

- Lower voltage background alpha (6–10 Hz)
- Excess slow-wave activity
- Elevated theta/beta ratio
- Temporal slow involvement
- Diffuse disturbance of cortical function

Diffuse Slowing - Case Example ('JJ') - Eyes Open Surface EEG 1



The Brain Doesn't Have to Choose Just One!

✓ Diffuse slowing

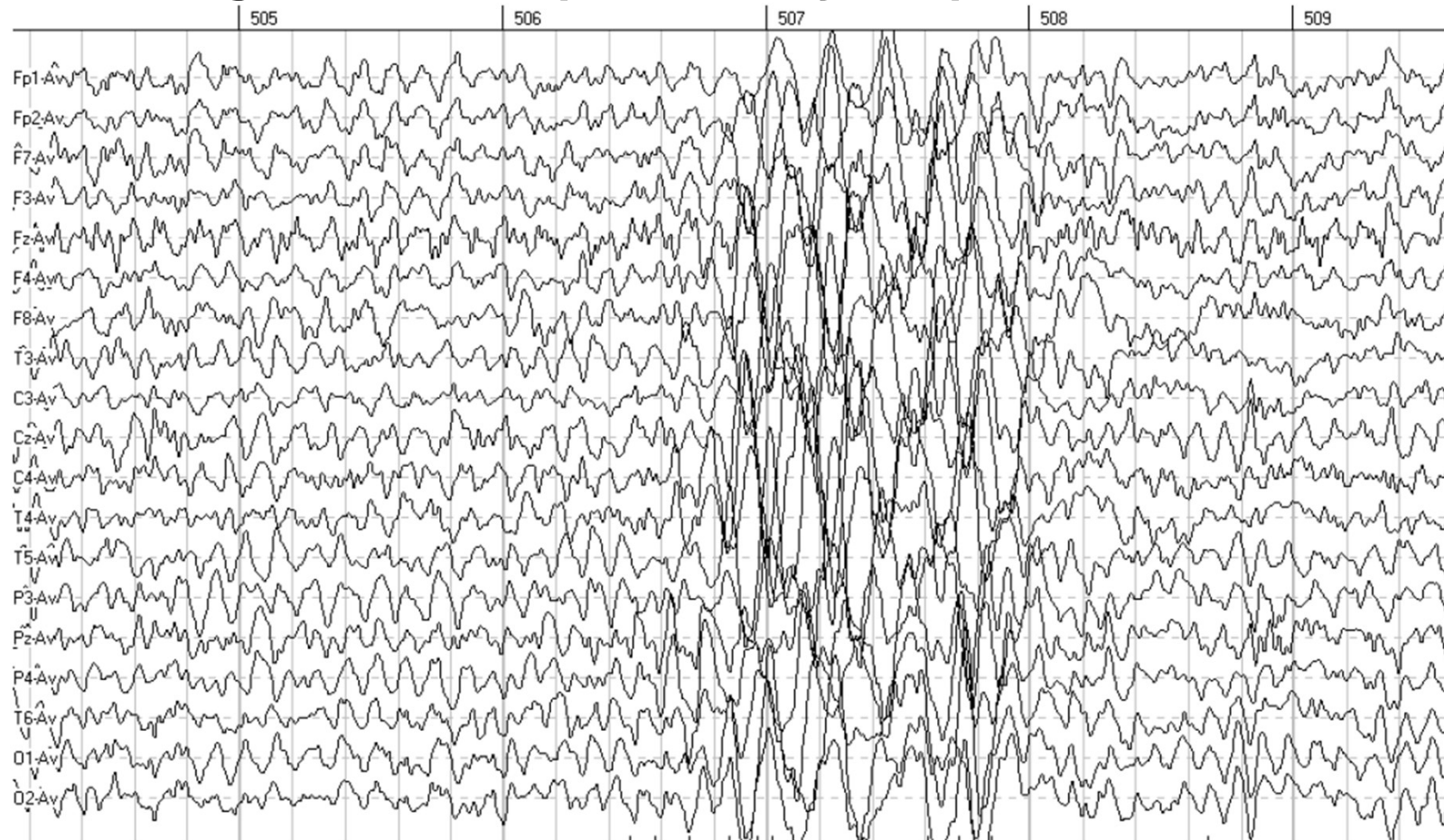
- Focal Findings

✓ Spindling excessive
beta

✓ Instability

Johnstone, J., Gunkelman, J., & Lunt, J. (2005). **Clinical database development: Characterization of EEG phenotypes.** *Clinical EEG and Neuroscience*, 36(2), 99–107.

Diffuse Slowing - Case Example ('JJ') - Eyes Open Surface EEG 2



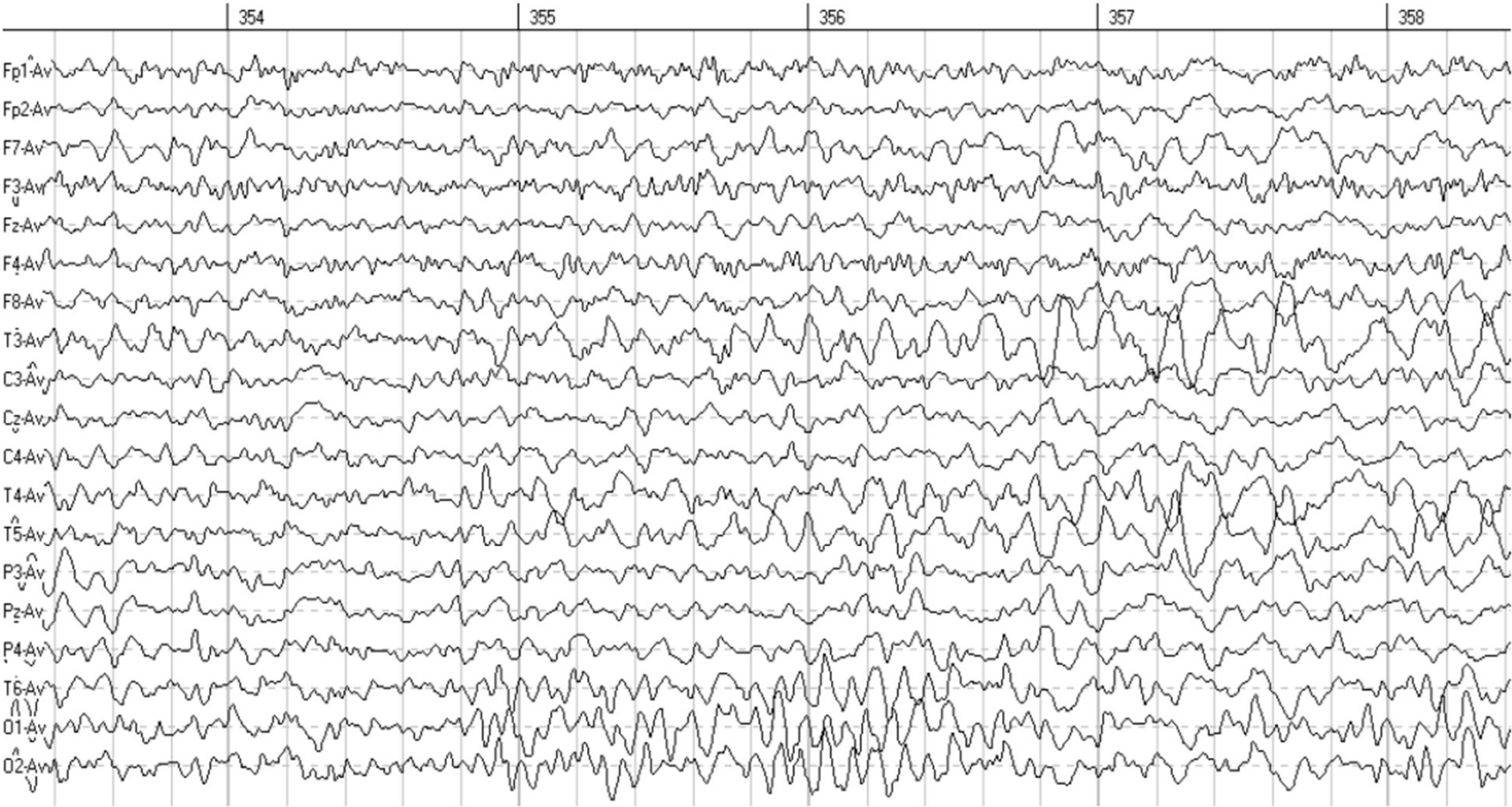
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Focal Slowing

Focal slowing is particularly important because it is *not inconsistent with* **localized brain dysfunction**.

- Possible causes include:
 - Traumatic brain injury
 - Stroke
 - Tumor
 - Inflammation
 - White matter disturbance
 - Need for referral for further brain imaging to determine the nature of the finding

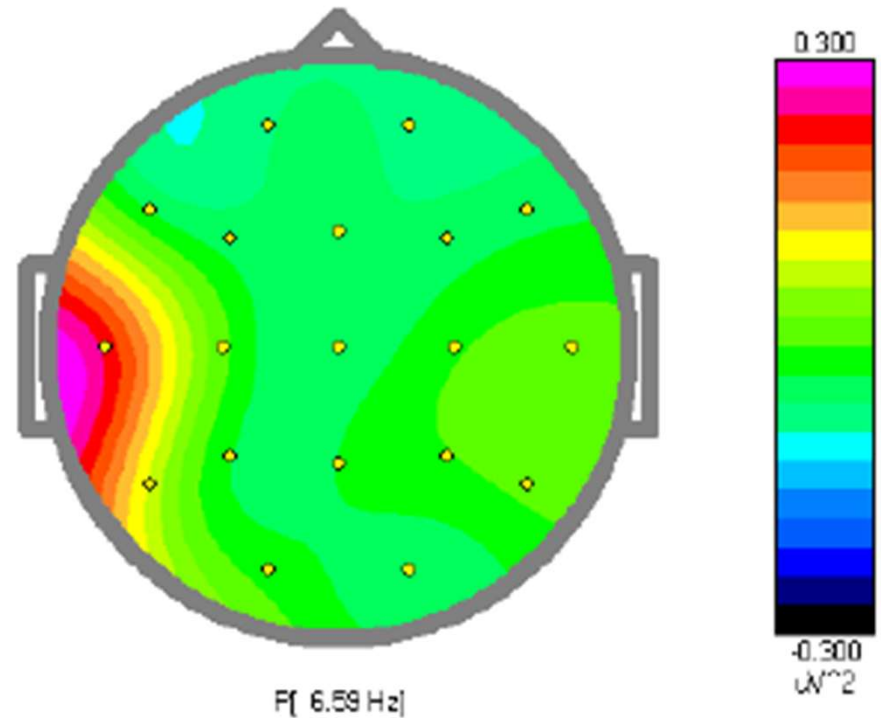
Focal Slowing - Case Example 'LD'



Focal Slowing - Case Example 'LD'

QEEG Findings

- Slow rhythmic theta activity in the left temporal lobe
- Elevated alpha peak frequency (11–12 Hz)
- Frontal alpha elevation and hypercoherence



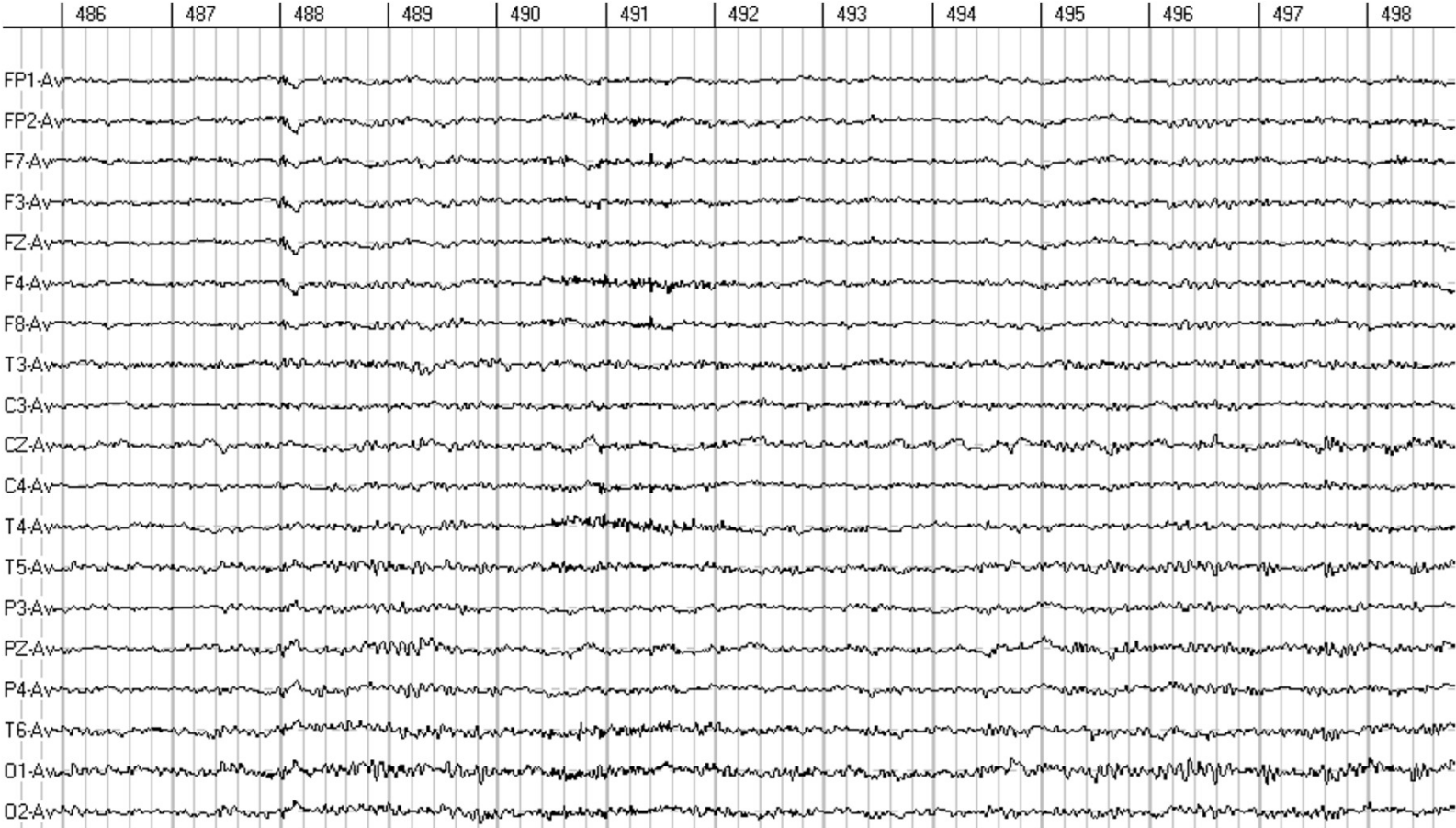
Excess Beta Spindling

Excess beta with spindle morphology may indicate **cortical hyperexcitability or irritability.**

- Psychological/physiological trauma activating neuroimmune system = neuroinflammation
- Toxic/metabolic states
- Seizure vulnerability
- Supersedes DSM Dx categories
- Medication Effects

Morrow, L. M., Barr, E. A., Grossi, E., Pillai, V. K., Kight, K. A., Wright, E. B., Turner, R. P., & Swatzyna, R. J. (2025). **Identifying neuroinflammation: The diagnostic potential of spindling excessive beta in the EEG.** *Clinical EEG and Neuroscience.*

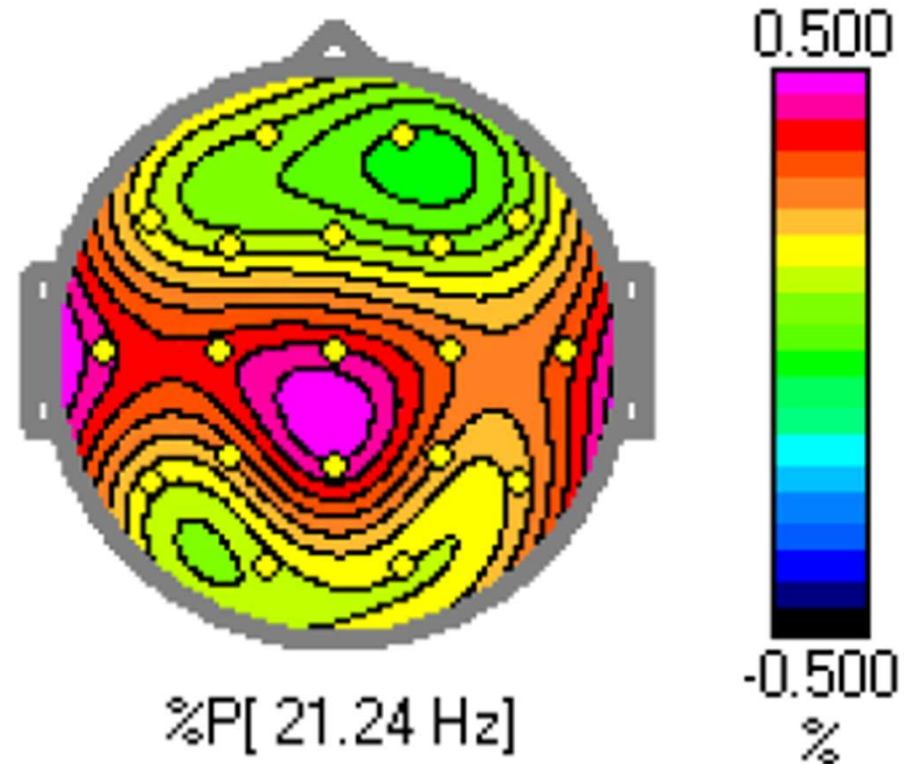
Excess Beta Spindling - Case Example 'KS'



Excess Beta Spindling - Case Example 'KS'

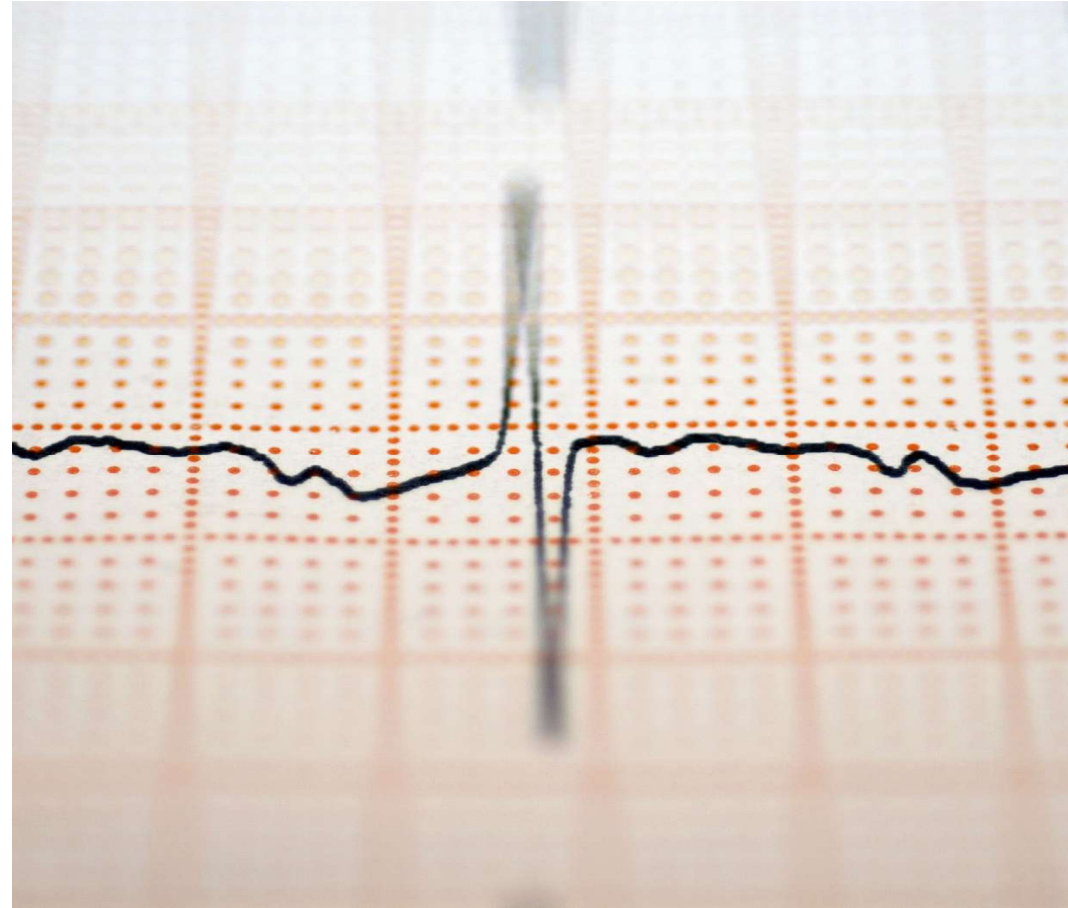
QEEG Findings

- Background alpha 8-13 Hz, alpha peak at 11.5 Hz
- Slower changes at vertex
- Generalized beta activity in the 18–22 Hz range
- Spindling Excessive Beta



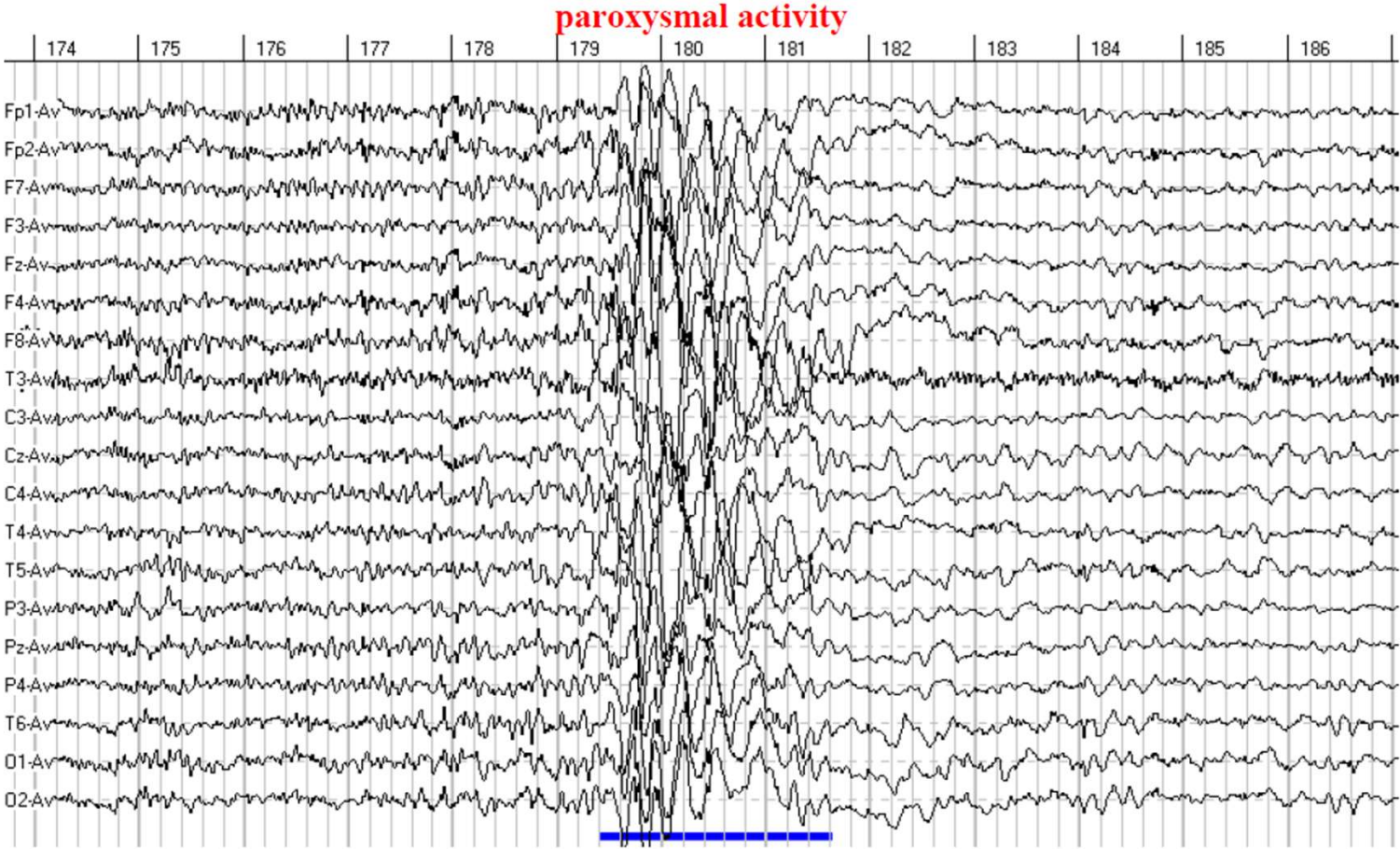
Instability in the EEG

- Spikes
- Sharp waves
- Spike-wave complexes
- Intermittent rhythmic discharges
- Isolated epileptiform discharges/paroxysms
- **Can only be identified/diagnosed by a neurologist or a neurophysiologist.**



Swatzyna, R. J., Arns, M., Tarnow, J. D., Turner, R. P., Barr, E., MacInerney, E. K., Hoffman, A. M., & Boutros, N. N. (2022). **Isolated epileptiform activity in children and adolescents: Prevalence, relevance, and implications for treatment.** *European Child & Adolescent Psychiatry*, 31(4), 545–552

Paroxysmal Activity - Case Example 'MG'



Spike Activity - Case Example 'LE'

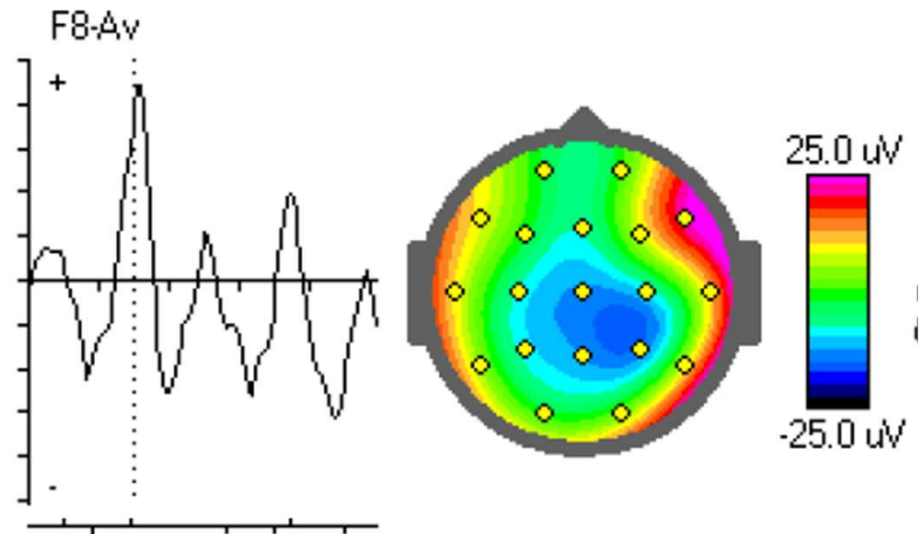


Spike Activity - Case Example 'LE'

- **QEEG Findings**

- Background alpha 8-13 Hz with peak at 10.5 Hz
- Transient spikes with sharper and slower changes right temporally and frontally

2 spikes in EC:



Swatzyna, R. J., Tarnow, J. D., Proler, M. L., Roark, A. J., MacInerney, E. K., & Kozlowski, G. P. (2017). **Retrospective analysis of nonepileptic patients with isolated epileptiform discharges treated with anticonvulsants.** *Clinical EEG and Neuroscience*, 48(5), 322–326.

- Build transition slide

- Break

Precision Medicine



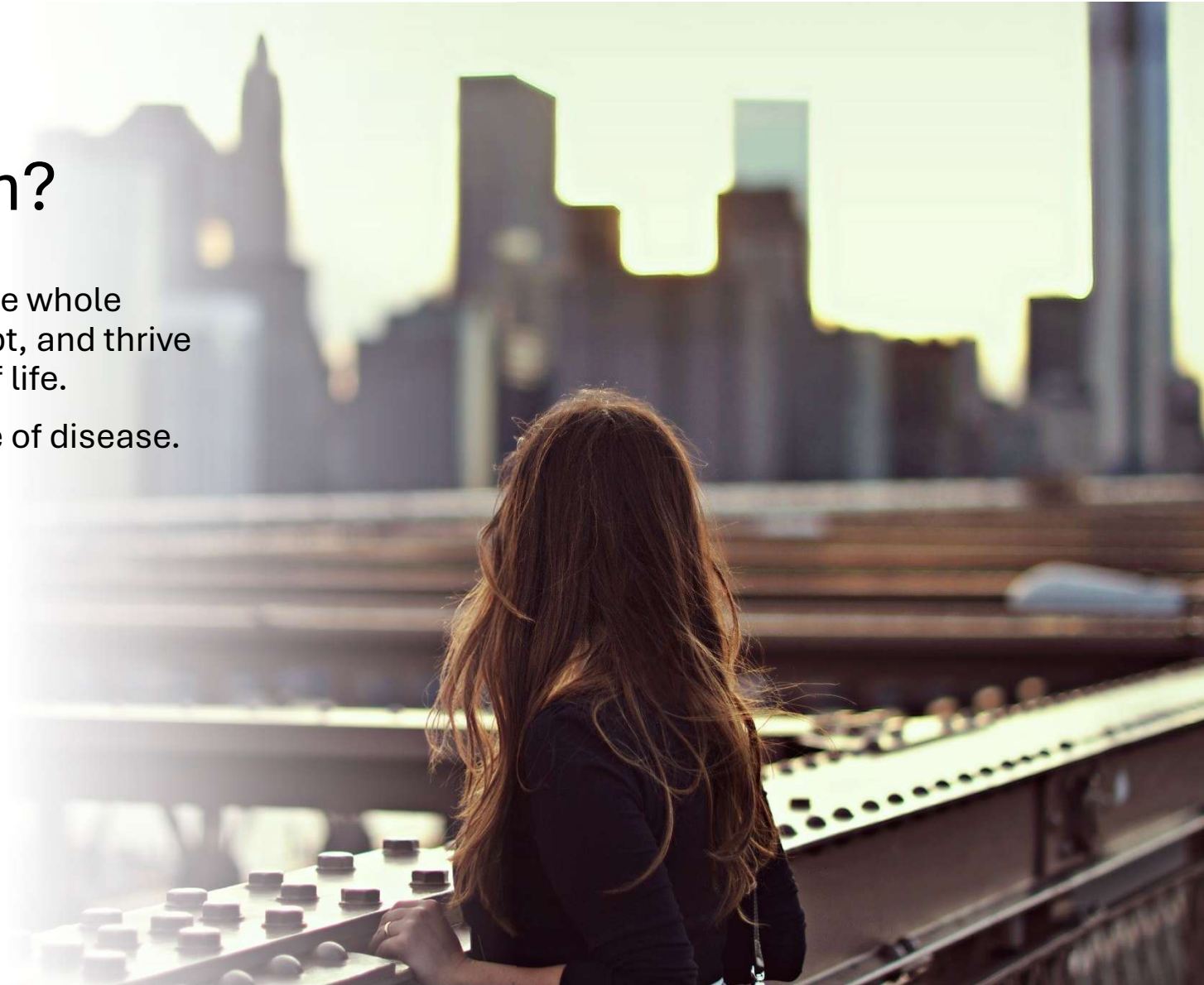
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What is Health?

What is Health?

- Health is the ability of the whole person to function, adapt, and thrive across all dimensions of life.
- It is not just the absence of disease.
- Health is dynamic.



The 5 Facets™ of 21st Century Health



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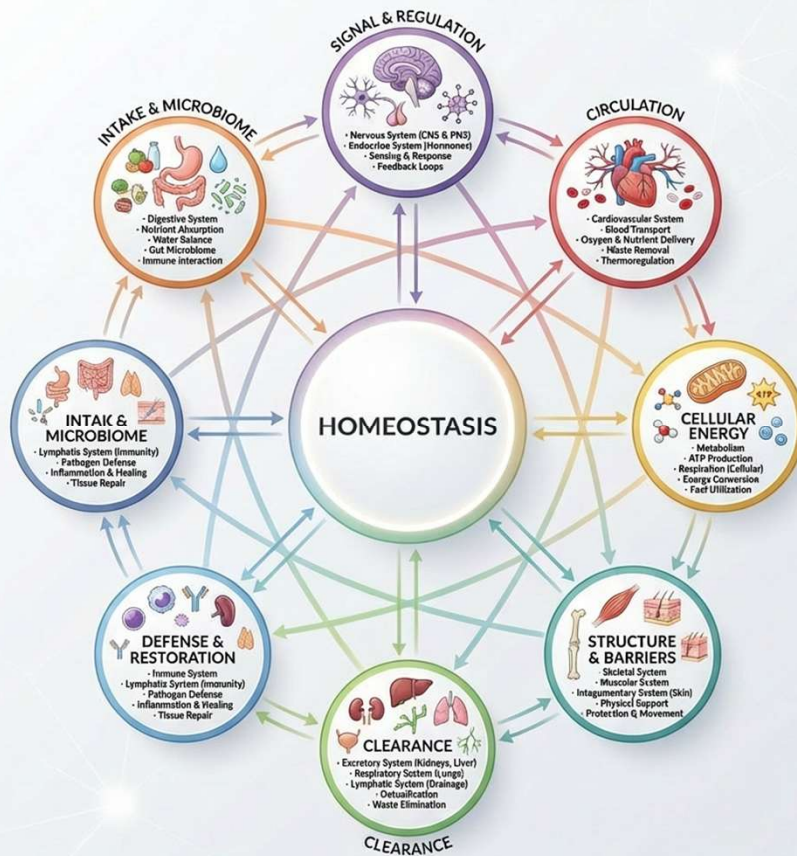


Mental & Emotional Health

The ability to regulate thoughts, emotions, and stress responses in ways that support clarity, resilience, and healthy behavior.

THE HUMAN BODY AS AN INTEGRATED SYSTEM

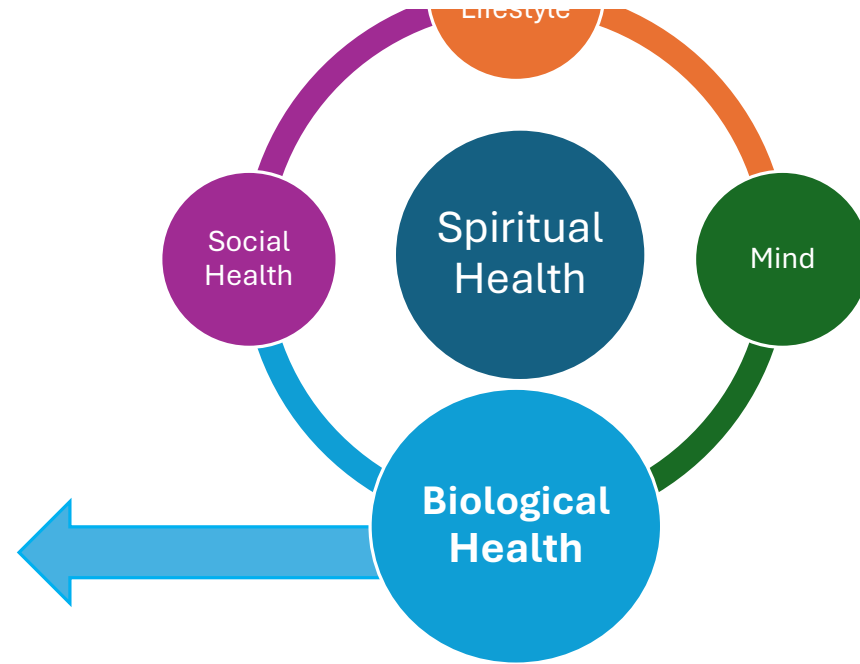
A 21st-Century Health Science Curriculum: Exploring Interconnection, Homeostasis, and Holistic Well-being.



This integrated model illustrates that the human body operates not as a collection of isolated parts, but as a dynamic, unified network. Each system continuously interacts and communicates with every other system to maintain Homeostasis – the state of balance essential for life, adaptability, and overall health. Understanding this interconnectedness is key to a holistic approach to well-being.

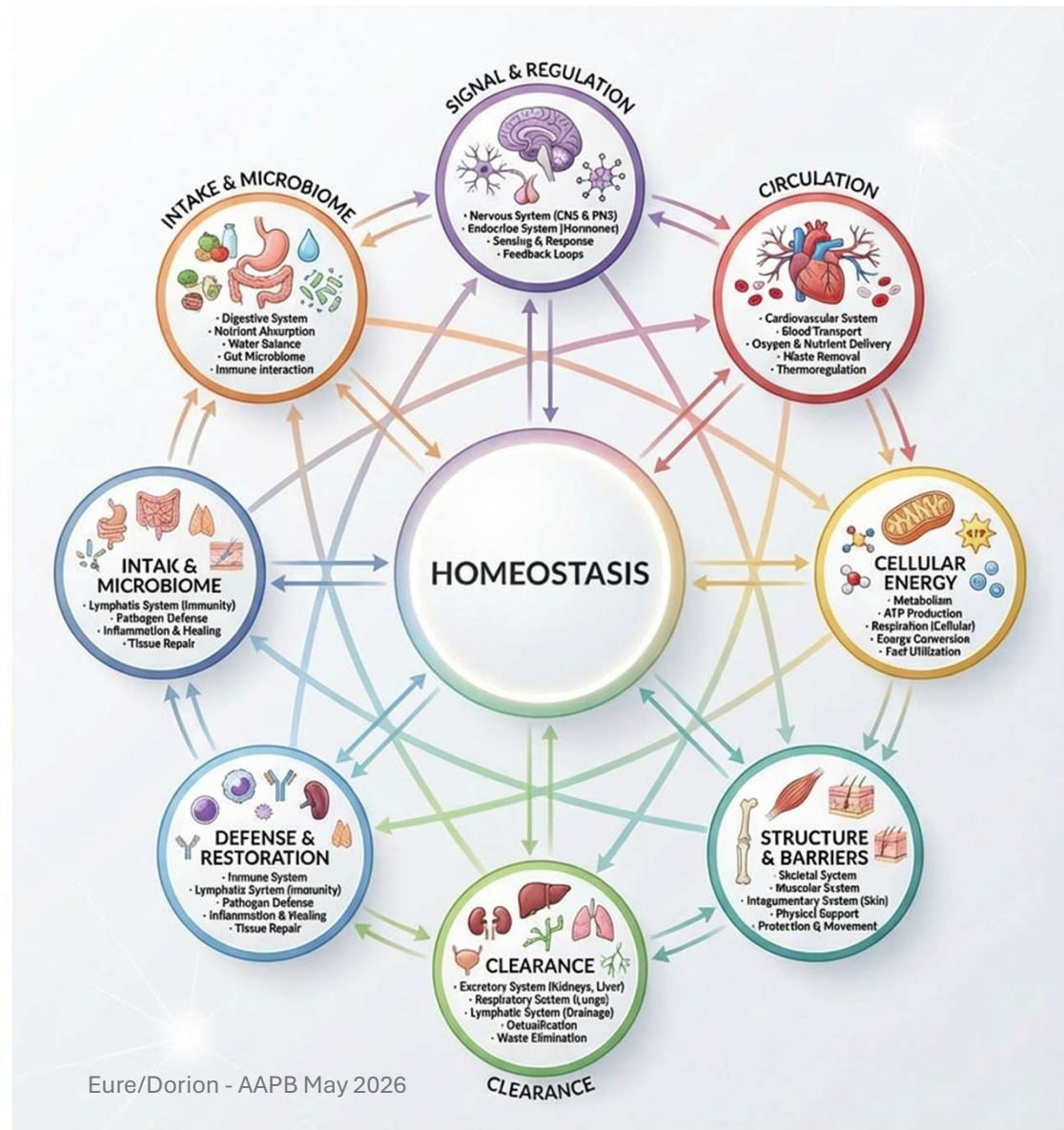
Health Sciences for the 21st Century Thinker™

Designed for 21st-Century Health Sciences Education. © Tisa (Disquisitiones) Nicole, All Rights Reserved.



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Health is an interconnected system



Biological Health – 7 Domains

1. Cellular Energy Systems
2. Signal & Regulation Network
3. Circulation & Distribution Network
4. Structural & Barrier Systems
5. Defense & Restoration Systems
6. Transformation & Clearance Systems
7. Intake & Microbiome

19th and 20th Century Thinking

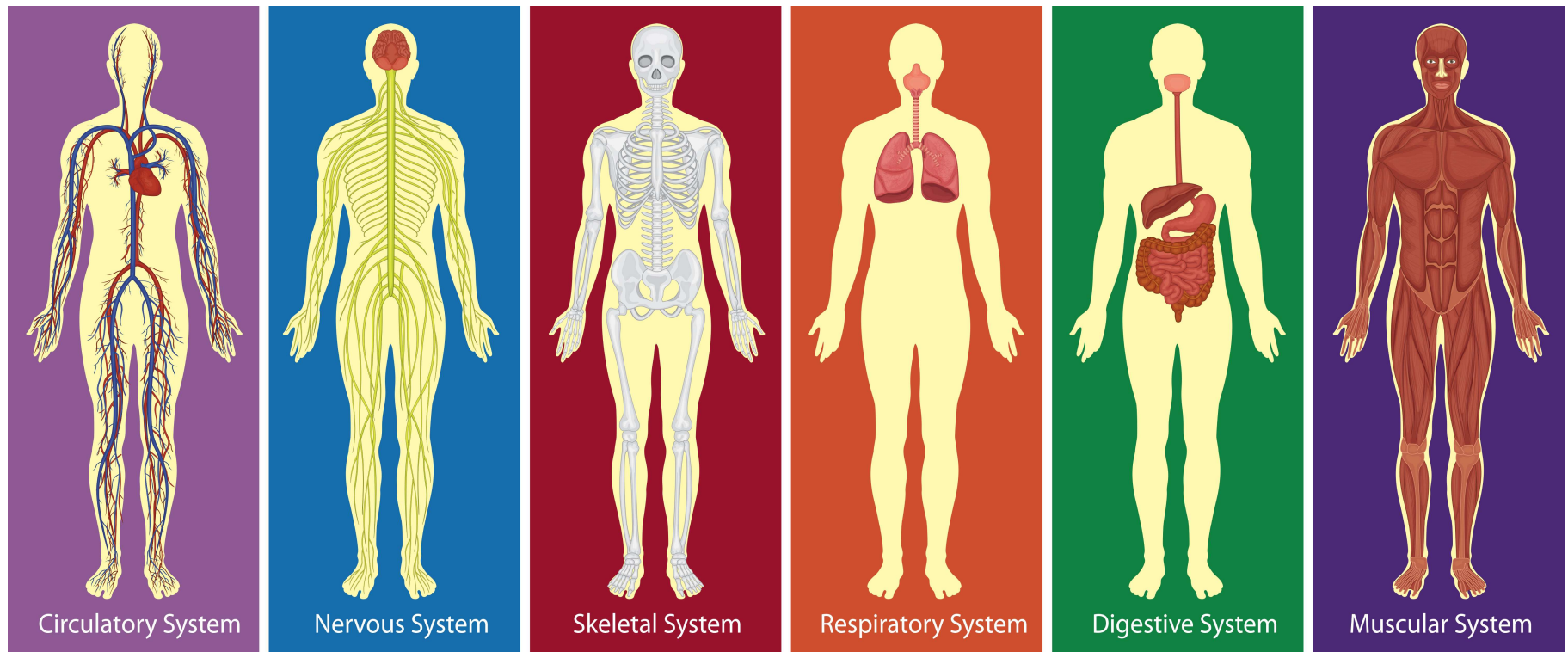
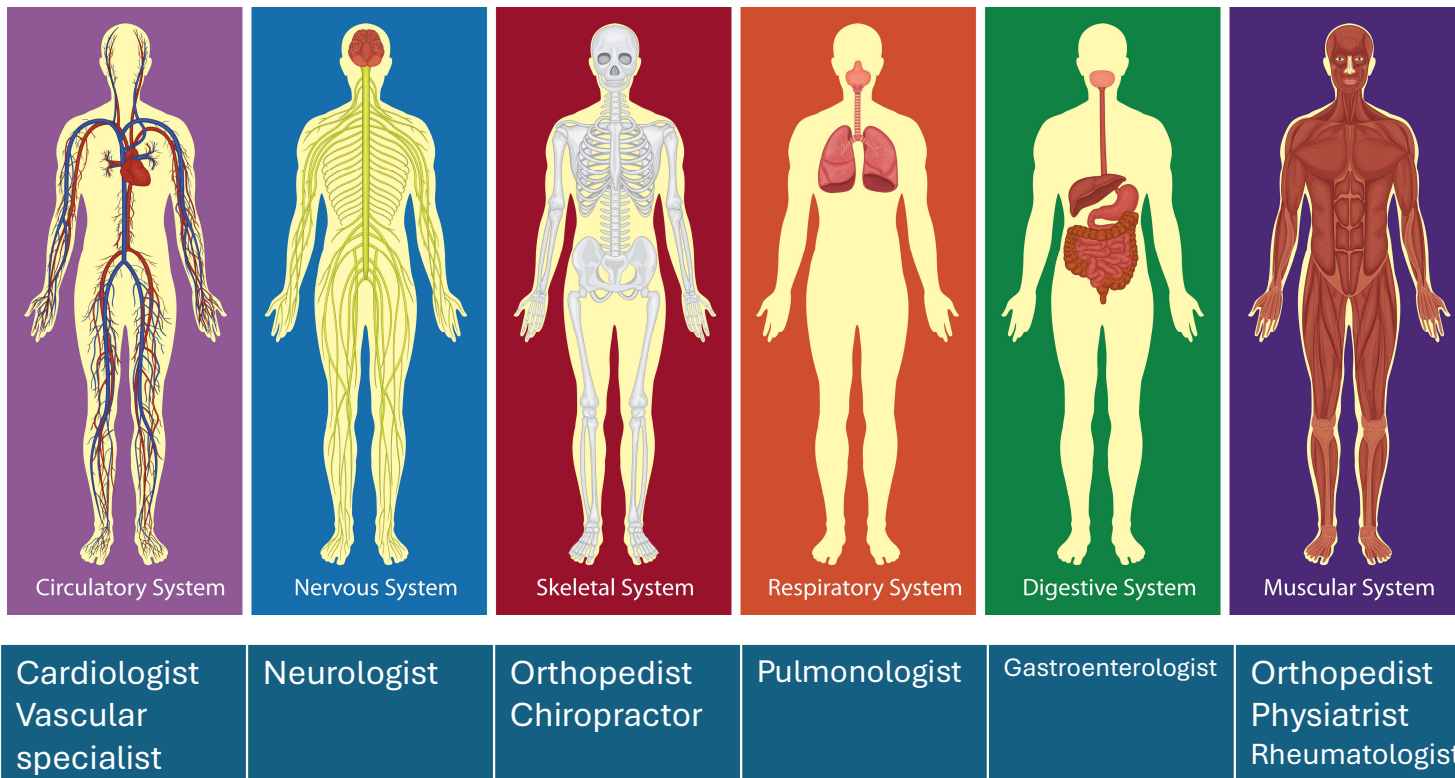


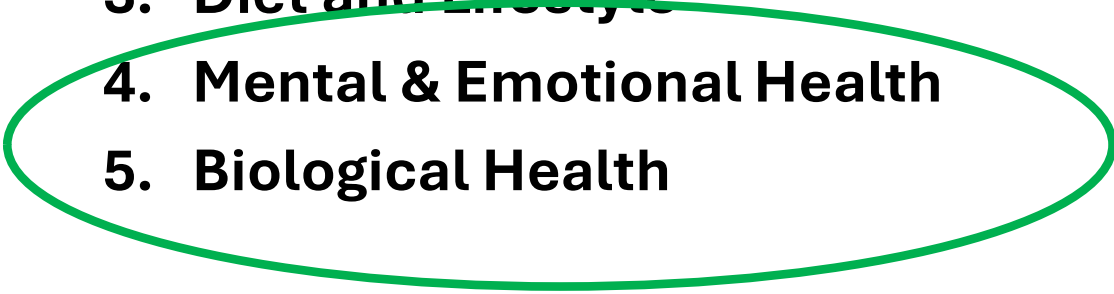
Image Credit: <https://www.livescience.com/37009-human-body.html>

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19th and 20th Century Thinking leads to...



5 Facets & Neurofeedback

1. **Spiritual health**
 2. **Social Health**
 3. **Diet and Lifestyle**
 4. **Mental & Emotional Health**
 5. **Biological Health**
- 

The Brain is Mitochondria-Dense

- The brain is only 2% of body mass
- It demands 20% of resting oxygen for ATP production



What Disrupts Mitochondria

- Toxins!
 - Mold/mycotoxins
 - Pesticides
 - Heavy metals
- Chronic infections
- Autoimmune activation
- Metabolic dysfunction
- Medication effects
- Nutrient imbalances (sub optimal, deficiencies)



How Toxins Cause Damage



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Facts About Toxins

- There's a lot!
- CHARGE Study
 - “Childhood Autism Risks from Genetics and the Environment”
 - Neurological susceptibility to environmental toxins

How Toxins Cause Damage

Metals

Specific mechanisms of pathogenesis for metals not fully understood

- Oxidative stress
- Excitotoxicity
- Mitochondrial dysfunction

Pesticides

Neurotransmission interference

Leads to:

- Oxidative stress
- Neuroinflammation
- Mitochondrial dysfunction

Mycotoxins

They cross the BBB!

Microglial activation

- Oxidative stress
- Glutamate excitotoxicity
- Mitochondrial dysfunction

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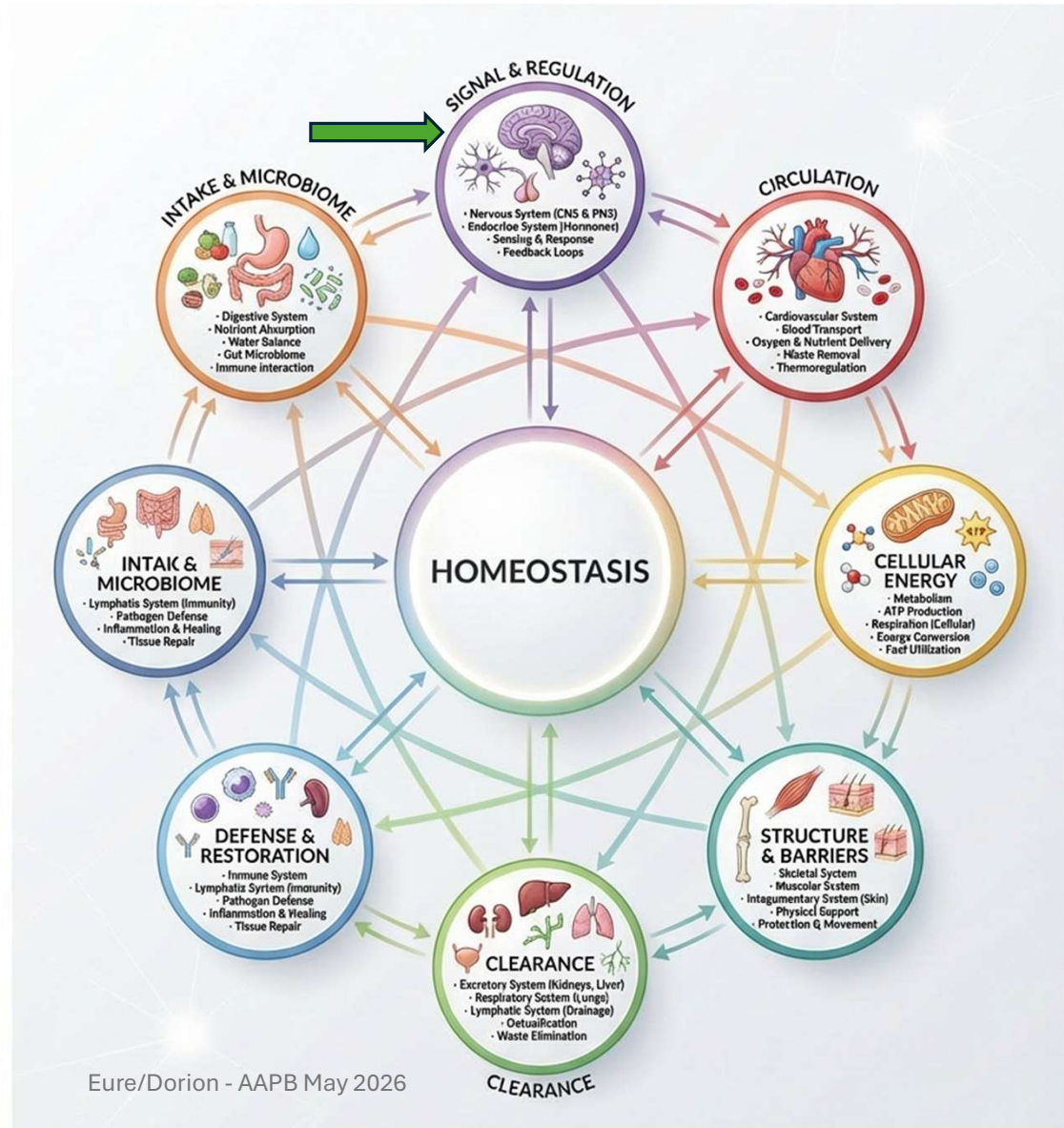
- Oxidative stress
- Mitochondrial dysfunction
 - Neurological irritation

Neuroinflammation & QEEG

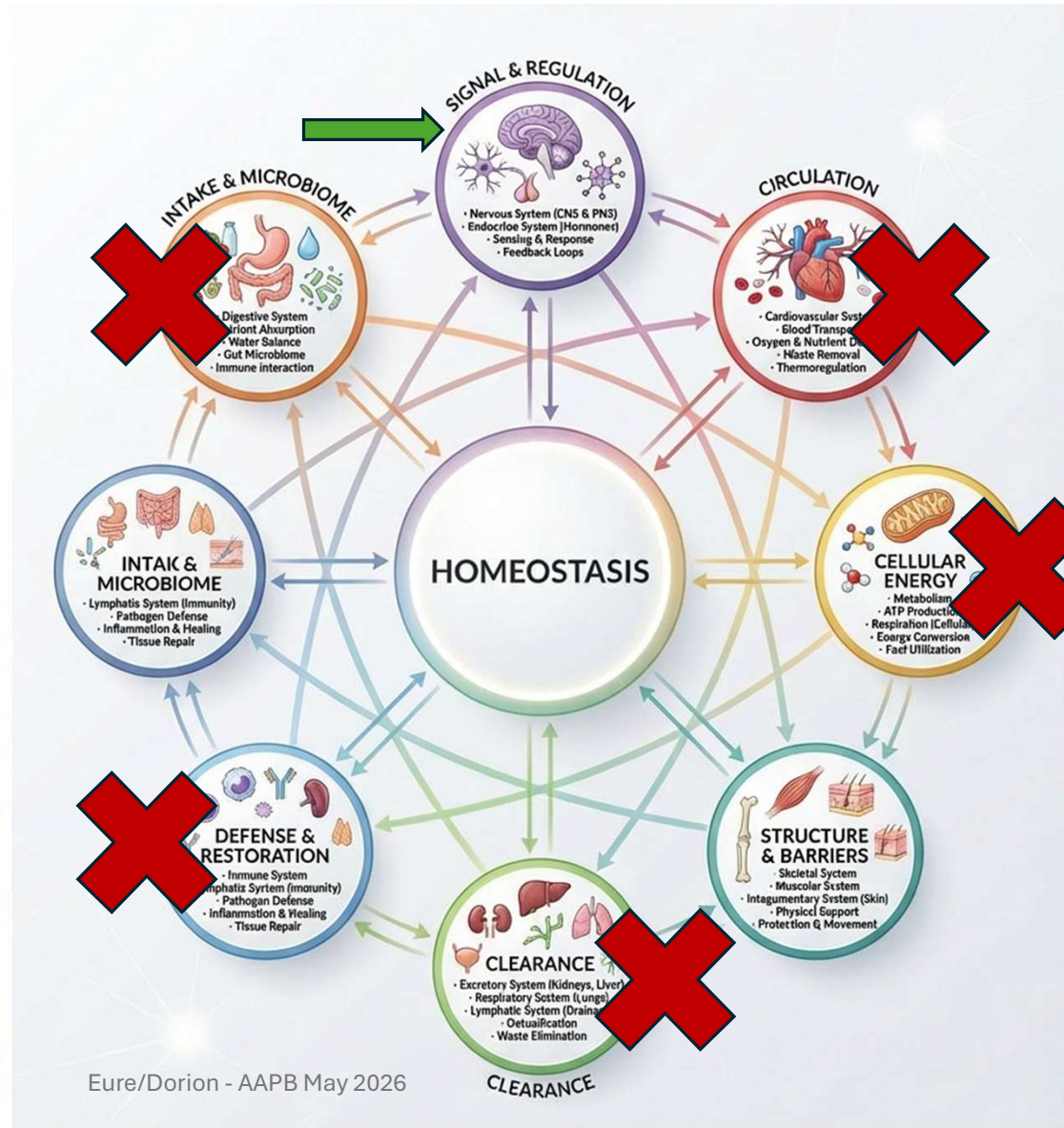
Toxins, chronic infections, gut dysbiosis...

- Immune activation
- Mitochondrial dysfunction
- Neuroinflammation
- Altered EEG patterns

Neurofeedback Area of Focus



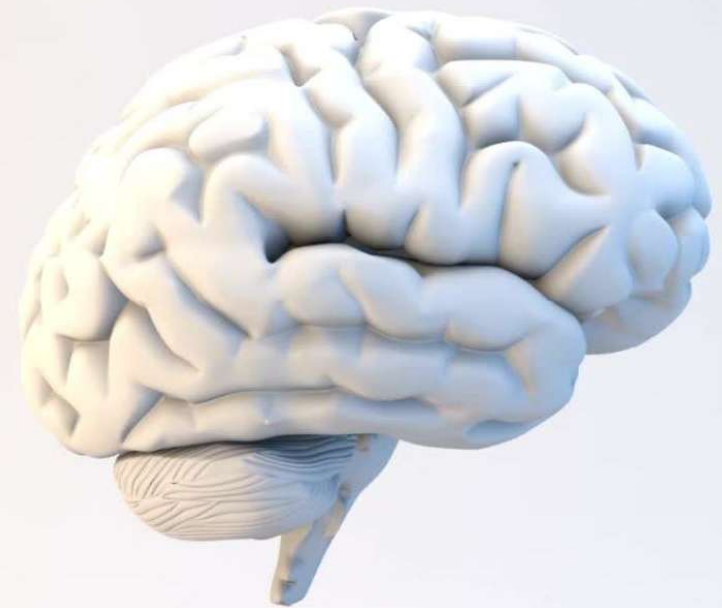
Why Neurofeedback May Plateau



Break

Infections & Our Nervous System

- Lyme & tick-borne infections



Neurological Symptoms

All tick-borne infections may present with: Fatigue, headache, chills, fever, malaise

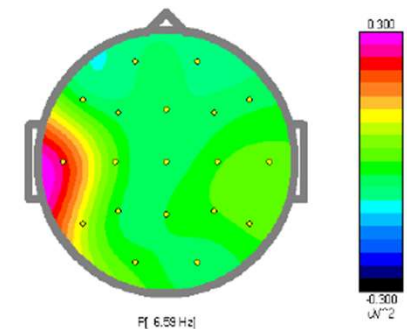
Neuro Lyme
<ul style="list-style-type: none">• Cognitive dysfunction• Neuropathy• Cranial nerve dysfunction• Mood & psychiatric changes• Sleep disturbances• Autonomic dysfunction• Movement and motor abnormalities• Sensory hypersensitivity

Who may this be?

List 4 cases from Jessica's section with their primary symptoms.

Neurological Tick-Borne Infections

Neuro Lyme	LD's Symptoms
<ul style="list-style-type: none"> • Cognitive dysfunction • Neuropathy • Cranial nerve dysfunction: • Mood & psychiatric changes • Sleep disturbances • Autonomic dysfunction • Movement and motor abnormalities • Sensory hypersensitivity 	<ul style="list-style-type: none"> • Hypersomnia and sleep disturbance • ADD-type distractibility and attention difficulties • Generalized anxiety • Depression and obsessive-compulsive features • Learning and auditory processing difficulties • Memory dysfunction • Longstanding fatigue and joint pain • Hormonal imbalances



Neurological Tick-Borne Infections



Image by PhotoAuthor is licensed under CCYSA.

Manage the infection(s) and see what remains

Co-Management of Tick-Borne Infections

Pause neurofeedback or continue with lots of education?

Mold & Our Nervous System

- Mycotoxins

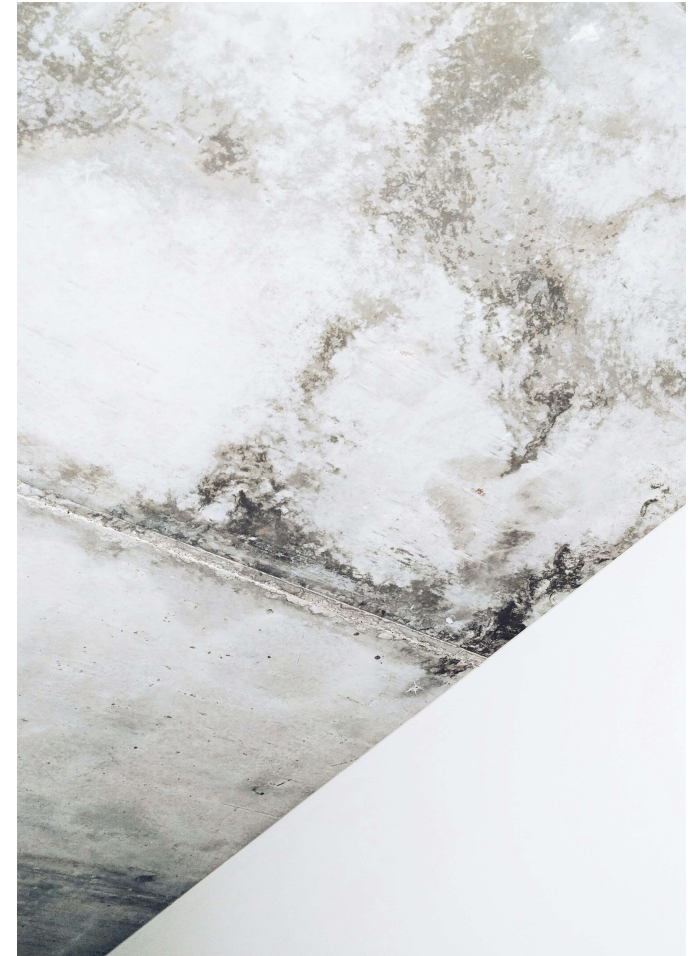


Photo by Olena Shmahalo on Unsplash

Mold Illness Symptoms

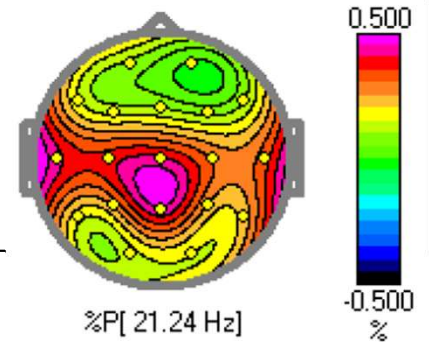
Mold
<ul style="list-style-type: none">• Fatigue• EENT (current or past) issues• Asthma (current or past)• Headaches• Weakness• Pain – especially "ice pick" like<ul style="list-style-type: none">• Muscle aches and cramps (hint hint bad PMS)• Sensory hypersensitivity• Numbing and tingling• Digestive issues

Who may this be?

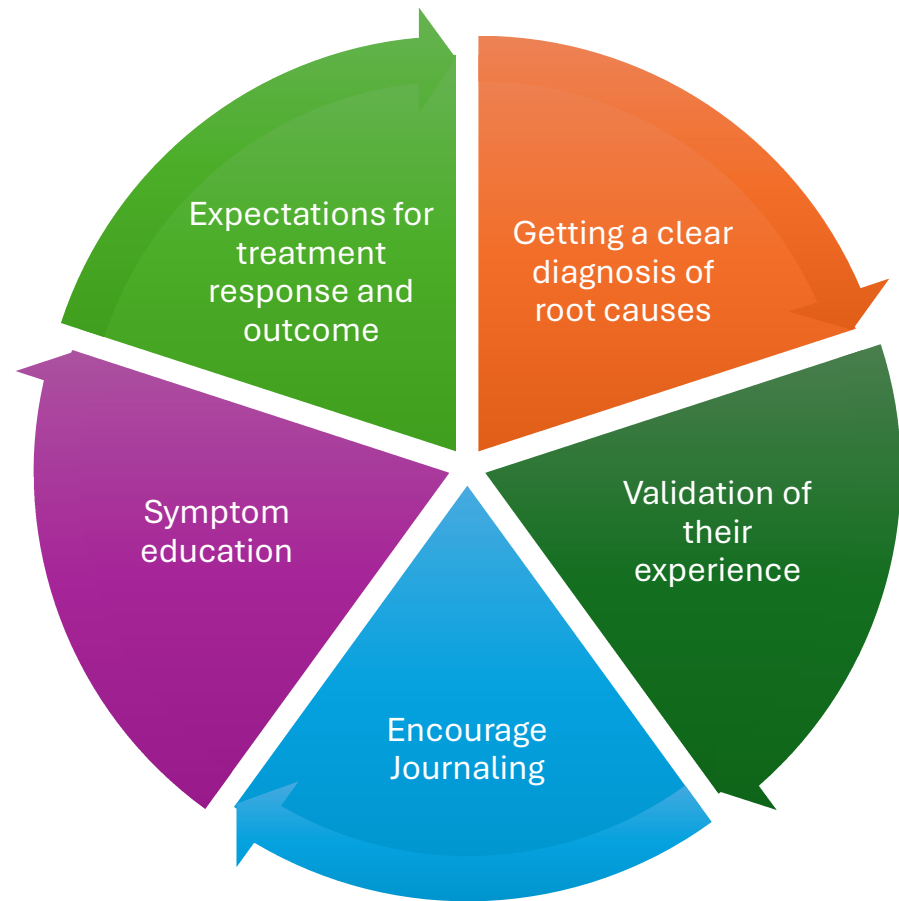
List 4 cases from Jessica's section with their primary symptoms.

Mold

Mold	KS's Symptoms
<ul style="list-style-type: none"> • Fatigue • EENT (current or past) issues • Asthma (current or past) • Headaches • Weakness • Pain – especially "ice pick" like <ul style="list-style-type: none"> • Muscle aches and cramps (hint hint bad PMS) • Sensory hypersensitivity • Numbing and tingling • Digestive issues 	<ul style="list-style-type: none"> • Chronic fatigue • Head pressure and headaches • Brain fog and cognitive slowing • Sensitivity to environmental chemicals and mold exposure



How to Empower our Complex Patients?



Thank you and contact info

- Teaser for September 4 part