

WORKSHOP SCHEDULE

Date	Duration	Room	Registration Code	Presenter	Title
14-02-06	full day	1	14-01	Lynda & Michael Thompson	Neurofeedback (+ Biofeedback) fundamentals for assessment and training (part 1 of a 2-day workshop)
14-02-06	full day	2	14-02	Gabriel Sella	When should I add sEMG to my clinical practice? (part 1 of a 2-day workshop)
14-02-06	full day	3	14-03	Stephen Sideroff & Bill Scott	Alpha-theta training for addictions
14-02-06	full day	4	14-04	Ernesto Korenman	Hemo-encephalo-graphy (HEG) biofeedback (part 1 of a 2-day workshop)
14-02-06	full day	5	14-05	Frank Andrasik, Licia Grazzi & Susanne Usai	Biofeedback and related treatments for recurrent headache disorders
14-02-06	full day	6	14-06	Erik Peper	Breathing for mind-body balance: biofeedback training to reduce symptoms of asthma, menopause (hot flashes), hypertension, and pain
14-02-06	full day	7	14-07	Richard Gevirtz	Biofeedback in cardiac rehabilitation; New frontiers using HRV-feedback (<i>Morning session</i>) Biofeedback protocols for the treatment of IBS and RAP (<i>Afternoon session</i>)
14-02-06	full day	8	14-08	Alexandra Martin German language	Klinische Anwendugen von Biofeedback: Psychosomatische Beschwerden, Chronischer Schmerz, Medizinisch unklare körperliche Beschwerden und Angststörungen
15-02-05	full day	1	15-01	Lynda & Michael Thompson	Neurofeedback (+ Biofeedback) fundamentals for assessment and training (part 2 of a 2-day workshop)
15-02-05	full day	2	15-02	Gabriel Sella	When should I add sEMG to my clinical practice? (part 2 of a 2-day workshop)
15-02-05	full day	3	15-03	Stephen Sideroff	Resilience as a model for enhancing biofeedback results and the management of stress
15-02-05	full day	4	15-04	Ernesto Korenman	Hemo-encephalo-graphy (HEG) biofeedback (part 2 of a 2-day workshop)
15-02-05	full day	5	15-05	Frank Andrasik & Wolf-Dieter Gerber	Biofeedback and related treatments for recurrent headache disorders (advanced workshop)
15-02-05	full day	6	15-06	Erik Peper	Healthy computing: prevent discomfort at the worksite with biofeedback
15-02-05	full day	7	15-07	Daniel Hamiel	After D. Servan Schreiber: the integration of body, cognition, attention and emotion in a psychotherapy for anxiety and depression
15-02-05	full day	8	15-08	Barbara Timmer German language	Biofeedbacktherapie in der Behandlung von psychischen und psychosomatischen Störungen: Ein integrativer Ansatz
15-02-05	evening		SP		Scientific Program

16-02-05	full day		SP		Scientific Program
17-02-05	full day	1	17-01	M. Barry Sterman	QEEG guided neurotherapy using comodulation treatment (part 1 of a 2-day workshop)
17-02-05	full day	2	17-02	Bernard Brucker	Successful biofeedback applications for restoring functions in patients with central nervous system damage: implications from the neuro and behavioral sciences (part 1 of a 2-day workshop)
17-02-05	full day	3	17-03	Lynda Kirk	<i>Sherlock Holmes and the case at "Function Junction"</i> An integrative feedback therapy model for getting good outcomes in any practice (part 1 of a 2-day workshop)
17-02-05	full day	4	17-04	Daniel Hamiel	Biofeedback and self-regulation in the class setting: concept and tools
17-02-05	full day	5	17-05	Wolf-Dieter Gerber German language	Das MIPAS Kopfschmerzseminar
17-02-05	full day	6	17-06	Monika Fuhs	Optimizing children's chances for personal growth and success Resilience, performance and health – supporting the power of the future with advanced biofeedback skills
17-02-05	full day	7	17-07	Howard Glazer	Pelvic floor muscle sEMG in the diagnosis and treatment of lower urogenital tract pain disorders (part 1 of a 2-day workshop)
18-02-05	full day	1	18-01	M. Barry Sterman	QEEG guided neurotherapy using comodulation treatment (part 2 of a 2-day workshop)
18-02-05	full day	2	18-02	Bernard Brucker	Successful biofeedback applications for restoring functions in patients with central nervous system damage: implications from the neuro and behavioral sciences (part 2 of a 2-day workshop)
18-02-05	full day	3	18-03	Lynda Kirk	<i>Sherlock Holmes and the case at "Function Junction"</i> An integrative feedback therapy model for getting good outcomes in any practice (part 2 of a 2-day workshop)
18-02-05	full day	4	18-04	Lothar Niepoth German language	Bio- und Neurofeedback bei Schlafstörungen
18-02-05	full day	5	18-05	Richard Gevirtz	Management of chronic pain: psychophysiological treatment models
18-02-05	full day	6	18-06	Arnon Rolnick	Integrating psychophysiology with psychotherapy
18-02-05	full day	7	18-07	Howard Glazer	Pelvic floor muscle sEMG in the diagnosis and treatment of lower urogenital tract pain disorders (part 2 of a 2-day workshop)

Half-day Workshops on Friday, February 17 and Saturday, February 18, 2006

17-02-05	half day morning	9	17-09A	Samuel Brown English language	Focused Vibration Training - FVT®
17-02-05	half day morning	10	17-10A	Knut Berndorfer German (or English) language	A practical guide for Alpha-theta training
17-02-05	half day afternoon	9	17-09B	Lutz Mussgay & Anke Reineke German language	Biofeedback of Heart Rate Variability in hypertension: Theoretical aspects and practical application
17-02-05	half day afternoon	10	17-10B	Ingrid Pirker-Binder German (or English) language	Biofeedback in pain management and psychotherapy (n.V. Frankl) for children in a private practice
18-02-05	half day morning	10	18-10A	Ursula-Katharina Heller German language	Biofeedback: fixe standards oder jedes mal neue Herausforderung
18-02-05	half day afternoon	9	18-09B	Gerhard Strauss-Blasche German (or English) language	Respiratorisches Biofeedback

ABSTRACTS WORKSHOPS

IMPORTANT NOTE:

The workshops are described in the language in which the workshop will be given.

TUESDAY, FEBRUARY 14th, 2006

Neurofeedback (+ Biofeedback) fundamentals for assessment and training (part 1 of a 2-day workshop)

Lynda Thompson, Ph.D. & Michael Thompson, MD

Course Description

In the first day, this workshop will cover the fundamentals of assessment (EEG profile and a quick stress response profile). The Biograph-Infiniti program will be used for both demonstrations (when and how to do 19 channel assessments will be discussed). EEG and autonomic nervous system profiles differ according to symptoms, such as ADHD, learning disabilities, movement disorders (Tourette's, Parkinson's), autistic spectrum disorders (especially Asperger's syndrome), seizure disorders, anxiety, and mood disorders. These variables also differ when an athlete or business executive is performing optimally compared to when they are performing below their potential.

During the second day the focus will be on how to use the distinct EEG and psychophysiological patterns in order to design a training and coaching programme to meet specific client goals. This will include athletic and executive goals to optimize performance in addition to the goals of clients who have specific difficulties. For example, distinct EEG patterns are observed in various disorders, including movement disorders, panic and anxiety disorders, and head injuries. In Asperger's syndrome these differences correspond to sensory and motor aprosodias, in ADHD the EEG shows high theta/beta ratios and, in many adults with ADHD, hi-beta/SMR ratios. Diagnostic challenges will be mentioned; for example, ADHD referrals may actually fit Asperger's criteria and, in both groups, there may occasionally be an undiagnosed seizure disorder. The overall goal of this workshop is therefore to teach participants how they can carry out assessments using both single and two channel assessments with the Infiniti and touch upon 19 channel assessments with SKIL, Neuroguide and LOREA analyses. The assessments lead to a discussion of how to plan customized intervention strategies for clients using the highly flexible Biograph-Infiniti equipment to do one and two channel EEG training combined with 5 to 6 channel biofeedback.

Course Objectives

Participants will: (1) *Knowledge*: learn the fundamentals which underlie EEG biofeedback (learning theory and neurophysiology) and biofeedback of other modalities: skin conduction (EDR), peripheral temperature, respiration, heart rate (RSA) and EMG; (2.) *Assessment*: be able to recognize characteristic EEG patterns which may be observed in a number of disorders and apply knowledge of proper EEG procedures (electrode placement, impedance, recognizing and handling artifacts), in addition to learning how to assess the psychophysiological patterns that reflect stress; (3.) *Intervention*: develop a rational intervention based on this assessment data, which combines elements of neurofeedback, biofeedback and cognitive strategies for an individualized mind-body training programme.

When should I add sEMG to my clinical practice? (part 1 of a 2-day workshop)

Gabriel Sella, MD, MPH, MSc., Ph.D.

sEMG is an objective modality that is very useful in muscular investigation for a variety of symptoms and for treatment of these symptoms. The clinician can utilize the modality with ease in the office after learning the basics, including useful protocols. The investigation helps **tremendously** the diagnostic process. The sEMG/Biofeedback treatment can be utilized in combination with other modalities or by itself to treat muscular related symptoms. The modality can be used in the fields of clinical psychology, physical medicine &

rehabilitation, occupational medicine/ergonomics and sports medicine. The investigative arm can reveal objectively and quantitatively normal versus abnormal muscular behavior in a variety of conditions when the testing is conducted within a framework of documented protocols. The sEMG/Biofeedback is a neuromuscular rehabilitation/re-education modality that follows after the investigation in order to normalize and optimize muscular function and behavior. Clinicians from a variety of fields can learn and utilize successfully this objective office/clinical based modality. The presenter has written a number of textbooks aimed at the understanding of the muscles, myofascial complex and neuromuscular complex involved in abnormal muscular behavior and at the understanding of the applicability of sEMG to the investigation and treatment of muscular conditions.

Alpha-theta training for addictions

Stephen Sideroff, Ph.D. and William Scott, B.A.

This all day workshop will integrate EEG biofeedback into addiction treatment models. The workshop will include a review of alpha-theta EEG biofeedback basics including how it works, most common effects, mechanisms of alpha-theta training (idling cortex, the witness state) and the most common experiences of the training. We will also review the results of our controlled research in this area (paper in press: Am. J. of Drug and Alcohol Abuse). The workshop will go into methodology details including electrode location, reward and inhibit frequencies, how to develop individualized visualization scripts and client orientation and how to conduct a session. The workshop will also include how to recognize progress, trouble shoot problems along with hands on demonstrations of an entire alpha theta session. We will also cover the use of Alpha-theta training for anxiety.

Hemo-encephalo-graphy (HEG) biofeedback

Ernesto Korenman, Ph.D.

HEG (hemo-encephalo-graphy) biofeedback is an effective and drugless treatment for many conditions involving the brain's frontal lobe activation. HEG represents a simple and non-intrusive way of both monitoring and training cerebral function without the inconvenience of electrode preparation which other neurofeedback methods generally require. What's more, HEG has high compliance by clients and patients since the training occurs while watching any DVD video of choice!

HEG is being used increasingly by professionals ...

in biofeedback practices and learning centers to treat and improve behavior, mood and attention disorders related to frontal cortex functioning: *attention and concentration difficulties, ADD/ADHD, poor memory, mood disorders, and anger issues, autistic disorders, Asperger's syndrome*

in medical practices to treat and improve conditions associated with frontal cortex hypo-perfusion: *migraine headache, epilepsy, schizophrenia, memory loss associated with ageing, senile dementia*

What is HEG?

When a specific area of the brain is activated to perform a task related to that particular region, the perfusion of blood to that area increases in order to bring oxygen, glucose and other basic nutrients needed to sustain such a change.

This activation is always accompanied by a clear increase in cell metabolism required to take from those nutrients the energy needed by the cells involved. The above changes can be indirectly measured in various ways: for instance, by measuring the emission of a specific band of infrared that radiates into the environment from brain tissue below the skull (as in passive infrared (pIR) HEG) or by measuring the color of the blood as reflected by the relative amount of oxy- and deoxy-hemoglobin in blood (as in near infrared (nIR) HEG).

In this course you will study the physiology underlying such measurements, the technology behind the instrumentation used to monitor brain activation in this way and the methodology applied to teach individuals to self-regulate this activity through biofeedback.

What is HEG Biofeedback?

HEG biofeedback is a neurofeedback modality based on the intentional control of the brain hemodynamic and metabolic responses through biofeedback principles.

Both types of HEG, (nIR and pIR), represent practical and effortless ways of measuring brain activation in a totally non-intrusive fashion. These techniques involve the use of special infrared optical biosensors. Unlike EEG based neurofeedback, no electrodes are involved, no electrode preparation is required and no electromagnetic noise issues related to recording the EEG play any role. In summary, these techniques are very simple to apply.

How did HEG Biofeedback come about?

(nIR) HEG Biofeedback was developed in 1994 by Dr. Hershel Toomim, who discovered that he could measure and teach persons to control the amount of oxygenated blood flowing in the prefrontal regions using infrared spectroscopy technologies. Hershel discovered that individuals can learn to achieve this self-regulating skill applying biofeedback principles and hence called this technique Hemo (*blood*) encephalography. Dr Toomim developed his own equipment. He has been applying his method and technology for the treatment of various conditions involving regional cerebral blood hypo-perfusion and has been teaching, reporting and publishing the clinical results using his HEG approach since then.

(pIR) HEG was developed in parallel by Dr. Jeff Carmen in 1998. He is considered the second *father* of HEG biofeedback. Jeff also developed his own equipment and methodology. He focused his R&D and clinical practice on developing an effective way to train his patients frontal lobe activation. He has been using his system mainly to treat patients suffering from various conditions related to disrupted frontal lobe activity. Jeff has shown that training a person suffering from migraines to increase frontal lobe infrared emissions with his equipment and methodology inhibits the pain. He has recently published a broad clinical study presenting the fruit of many years of clinical work documenting a high degree of success using HEG biofeedback to treat various types of migraine. All this basic research and the treatment methodology will be covered to detail in this workshop.

Who should take this 'HEG Biofeedback' Workshop?

Psychologists, Clinicians, Occupational Therapists

Therapists interested in enhancing their neurofeedback practice with this modality. Of special interest is the use of these techniques to train frontal lobe activation and a drugless approach to migraine treatment.

Educators, School Psychologists, Special Needs Teachers

HEG biofeedback for children and adults suffering from inattentive conditions and impulse control disorders including ADHD/ADD.

Corporate and Sport Trainers, Performance Coaches, Group Facilitators

Individuals and trainers working in corporations and other institutions can apply these methodologies to improve behavioral and mental performance. For instance, to help individuals to overcome depressive states, improve concentration & creativity and nurture a positive and confident approach towards day to day tasks. This type of training is particularly useful to achieve peak performance in sports.

Workshop Content

The workshop covers the theoretical and practical aspects of this novel neurofeedback modality, including scientific background, technology and instrumentation, methodology and protocols. There will be plenty of practical demonstrations.

Biofeedback and related treatments for recurrent headache disorders

Frank Andrasik, Ph.D., Licia Grazzi, MD, & Susanna Usai, MD

This workshop focuses on a number of issues pertinent to assessing and treating recurrent primary headache disorders. Assessment issues will focus on recent revisions to the International Classification of Headache Disorders-II, varied ways to assess both process and outcome of biofeedback and related treatments, and a summary of key points in the recently proposed guidelines for conducting behavioral clinical trials prepared by the American Headache Society. Topics addressed pertinent to treatment include the following: a brief review of the history and development of the most common behavioral treatment approaches (EMG and temperature biofeedback-assisted relaxation (EMG, relaxation therapy itself, and cognitive behavior therapy); a detailed examination of the evidence base for these behavioral approaches, including consideration of efficacy (and their strengths and weaknesses) and meta-analytic reviews; discussion of various alternative approaches (other than the 1 to 1, in office, 50-minute hour approach) for delivering treatments (limited contact, group administration, administration by paraprofessionals, mass communication, and web-based); discussion of certain headache types that have been shown to be particularly difficult to treat (medication overuse headache, cluster headache, posttraumatic headache, menstrual migraine, chronic daily headache, and headache associated with comorbidities); special considerations when applying these treatments to children; and a brief review of lesser studied, but more specific biofeedback approaches to headache management, including neurotherapy and blood flow (both intra- and extra-cranial). **Intended Audience:** This workshop is appropriate for those with beginning to intermediate knowledge of headache and its treatment.

Breathing for mind-body balance: biofeedback training to reduce symptoms of asthma, menopause (hot flashes), hypertension, and pain

Erik Peper, Ph.D.

The workshop focuses upon assessing and teaching breathing patterns to reduce discomfort and promote health. It includes strain gauge, RSA, sEMG, incentive spirometry, touch, imagery and cognitive strategies to monitor and teach appropriate breathing patterns and discriminate dysfunctional and functional patterns. Learn to recognize subtle dysfunctional breathing patterns such as thoracic breathing, breath holding, gasping, reverse breathing, excessive thoracic tension and hyperventilation that may contribute to illness development and maintenance. Learn specific functional breathing patterns such as diaphragmatic breathing, breathing to stressors, slower exhalation, and enhanced RSA to restore homeostasis and interrupt the escalating cycle of panic, fear and pain. The workshop includes self-practices, physiological monitoring and demonstrations to experience the powerful effect how breathing can be used to evoke and more importantly decrease symptoms and enhance health and homeostasis. The workshop outlines specific practices and protocols to reduce asthma symptoms, hypertension, pain, and hot flashes associated with menopause.

Biofeedback in cardiac rehabilitation; New frontiers using Heart Rate Variability biofeedback – Morning session

Richard Gevirtz, Ph.D.

Despite advances in prevention and treatment of Cardiac Disease, deaths from all cardiovascular causes still remains the number 1 killer in industrialized countries. Cardiac rehabilitation has, for the most part, remained stuck in the modalities of diet, exercise and medication management. Behavioral interventions have been shown to add to improved mortality and morbidity as an independent component, but has been slow to be adopted. A new variant in rehab, Heart Rate Variability (HRV) biofeedback offers a number of advantages over traditional stress management approaches. In this workshop, we will cover the basics of HRV from a cardiological perspective and demonstrate the HRV feedback technique called Resonant Frequency Training. This will be applied to Coronary Artery Disease (CAD), Congestive Heart Failure (CHF), and some arrhythmias. The participant should be able to apply the protocol in their particular treatment setting.

Biofeedback protocols for the treatment of IBS and RAP – Afternoon session

Richard Gevirtz, Ph.D.

Irritable Bowel syndrome (IBS) and Recurrent Abdominal Pain (RAP) are functional syndromes commonly found in general medical practice. They represent a challenge to primary physicians and gastroenterologists since no obvious pathophysiology is evident and few medication options exist. Although behavioral interventions (CBT, Hypnosis, Biofeedback-Relaxation) have been shown to be efficacious in controlled trials, patients are often reluctant to follow through on referrals because of the “all in your head” stigma associated with psychological therapies. Biofeedback has a distinct advantage in this regard and enjoys high acceptability and credibility ratings among most patients. In this workshop, we will first discuss modern conceptual models of IBS and RAP that emphasize the autonomic mediation of the gut. Based on these models, a comprehensive treatment model will be presented based on HRV biofeedback and a number of other treatment components. This protocol has been successfully used in a large San Diego HMO for many years with high rates of symptom remission. A primer of HRV will be included as a background to the treatment protocol. An attempt will be made to orient participants to their present equipment in this regard. Participants should come away with the ability to initiate this protocol in their treatment setting.

Klinische Anwendungen von Biofeedback: Psychosomatische Beschwerden, Chronischer Schmerz (z.B. Rückenschmerz und Kopfschmerz), Medizinisch unklare körperliche Beschwerden und Angststörungen – German language

Alexandra Martin, Ph.D.

Es hat sich gezeigt, dass Biofeedback für viele Patienten mit psychosomatischen Beschwerden oder chronischen Schmerzstörungen ein sehr sinnvolles therapeutisches Instrument darstellt, das eine hohe Glaubwürdigkeit besitzt. Bei manchen Beschwerden, wie z.B. Kopfschmerzen vom Spannungstyp, ist Biofeedback als

Monotherapie denkbar, bei anderen der Indikationsbereiche ist eine Kombination mit verhaltensorientierten und kognitiven Methoden sinnvoll.

In den Biofeedback-Protokollen wird in Abhängigkeit von der Eingangsdagnostik und dem Störungsbild v.a. mit EMG-, Temperatur-, EDA-, Atem-Feedback gearbeitet (z.T. kombiniert im Rahmen von Multikanalmessungen).

Eine Verbesserung der Symptomatik im Rahmen des Trainings geht einher mit einem Anstieg der Selbstwirksamkeits-Überzeugung. Dies ist gerade bei chronischen Beschwerden bedeutsam. Biofeedback-gestützte Stress-Provokationstests und andere Verhaltensexperimente zeigen den Patienten mit einem organmedizinisch geprägten Krankheitsverständnis oftmals zum ersten Mal, wie sensibel ihr Körper auf verschiedene Einflussfaktoren reagiert. Ein erweitertes Krankheitsmodell lässt die wenig erklärbaren Beschwerden nachvollziehbarer und weniger bedrohlich erscheinen.

Im Workshop werden diese Biofeedbackmethoden gezeigt und die Möglichkeit gegeben, diese selbst anzuwenden. Ein Überblick zur Wirksamkeit von Biofeedback bei diesen Beschwerden wird gegeben. Außerdem sind die Teilnehmer eingeladen, klinische Fallbeispiele vorzustellen, um das therapeutische Vorgehen zu diskutieren.

WEDNESDAY, FEBRUARY 15th, 2006

Neurofeedback (+ Biofeedback) fundamentals for assessment and training (part 2 of a 2-day workshop)

Lynda Thompson, Ph.D. & Michael Thompson, MD

Abstract: see Tuesday, February 14th, 2006.

When should I add sEMG to my clinical practice? (part 2 of a 2-day workshop)

Gabriel Sella, MD, MPH, MSc., Ph.D.

Abstract: see Tuesday, February 14th, 2006.

Resilience as a model for enhancing biofeedback results and the management of stress

Stephen Sideroff, Ph.D.

This workshop will address three main issues: the client's innate resistance to lowering or managing arousal levels, development of a resilience model to enhance the effectiveness of biofeedback and the management of stress, and specific biofeedback protocols to improve functioning along nine dimensions of resilience.

The workshop will present a new nine components model of resilience, as a motivationally unidirectional construct to address stress and organismic imbalance and better overcome patient resistance and compliance issues and to maximize psychophysiological learning. It will introduce a new resilience questionnaire that can be self scored resulting in an assessment profile, categorized under three areas: organismic balance (physiological, emotional and cognitive), relationship (with self, with another and with something greater) and process (presence, flexibility and power). The workshop will develop how each relates to the stress response and autonomic activation and how each can be enhanced through a comprehensive biofeedback program that strengthens each of the nine components. The workshop will link each component to appropriate peripheral and EEG biofeedback protocols for their enhancement.

Hemo-encephalo-graphy (HEG) biofeedback

Ernesto Korenman, Ph.D.

Abstract: see Tuesday, February 14th, 2006.

Biofeedback and related treatments for recurrent headache disorders (advanced workshop)

Frank Andrasik, Ph.D. & Wolf-Dieter Gerber, Ph.D.

Advanced workshop on this topic.

Healthy computing: prevent discomfort at the worksite with biofeedback

Erik Peper, Ph.D., San Francisco State University

In this interactive workshop you will learn and practice specific, pragmatic techniques to assess and prevent and reverse computer-related disorders (e.g., repetitive strain injuries, upper extremity musculoskeletal disorders). These disorders, which annually cost businesses approximately \$7 billion in treatment and lost work time, and can result in life-long disabling pain for untrained workers yet can be prevented with basic training using biofeedback. Learn a systems perspective utilizing applied psychophysiology for assessment, training, prevention and implementation of employee safety programs at the work site that include ergonomics, work style and stress

management strategies. Work shop topics include basic ergonomic principles; healthy work styles; standardized psychophysiological assessment with sEMG, SCR, Temp and respiration at the computer workstation; biofeedback training for ergonomic assessment and recommendations; and an outline for a seven-session Healthy Computing intervention and prevention program. Specific biofeedback assessment and training interventions will be demonstrated. Questions and answers will focus on applying the techniques to individual situations as well as other professions, such as bus drivers, postal workers, and bank tellers.

After D. Servan Schreiber: the integration of body, cognition, attention and emotion in a psychotherapy for anxiety and depression

Daniel Hamiel, Ph.D.

Dr. David Servan Schreiber is a psychiatrist and neurologist at the school of Medicine at the University of Pittsburgh. In his book "Healing without Freud or Prozac" he calls for a therapy that will be based on the human being's natural way to heal himself. In his book he presents a very impressive scientific backup to his view. In this workshop we will discuss 4 aspects of the natural way of healing as the base of a psychotherapy for anxiety and depression: 1. The use of Heart Rate Variability biofeedback or balancing the autonomic nervous system to overcome the gap between the cortex and the emotional brain. 2. The use of very simple cognitive behavioral techniques. 3. Short emotional intervention. 4. Mindfulness – learning to control attention. The author will present a protocol that fits this concept and demonstrate the integrated techniques in details.

Biofeedbacktherapie in der Behandlung von psychischen und psychosomatischen Störungen: Ein integrativer Ansatz – *German language*

Barbara Timmer, Ph.D.

In der interdisziplinären Behandlung von psychischen und psychosomatischen Störungen hat Biofeedback in den letzten 10 Jahren nicht zuletzt aufgrund der hohen Patientenakzeptanz zunehmend an Bedeutung gewonnen. In dem Workshop wird dargestellt, wie sich die Biofeedback-Therapie in ein modernes verhaltensmedizinisches Behandlungskonzept integrieren lässt und welche Chancen diese Integration mit sich bringt. Als spezifische Anwendungsbereiche einer integrativen Biofeedbacktherapie werden v.a. chronische Schmerzstörungen, somatoforme Störungen und Tinnitus vorgestellt und diskutiert. Dabei ist die Palette der Anwendungs- und Einsatzmöglichkeiten der Biofeedbacktherapie breit gestreut: Neben der Veränderung symptomrelevanter Reaktionsmuster und Biosignale ermöglicht Biofeedback u.a. eine Einsicht in psychophysiologische Zusammenhänge, eine Stärkung von Selbstkontrolle und Selbstmanagement sowie eine Verbesserung der Körperwahrnehmung. Neben der Vermittlung indikationsspezifischer theoretischer Grundlagen werden verschiedene Interventionsmöglichkeiten von Biofeedback mit einem Multi-Kanal-Biofeedback (peripherphysiologische Parameter) vorgestellt und demonstriert. Neben praktischen Demonstrationen am Biofeedback-Gerät werden Fallbeispiele aus der Praxis eingebracht.

FRIDAY, FEBRUARY 17th, 2006

Full-day Workshops

QEEG guided neurotherapy using comodulation treatment (part 1 of a 2-day workshop)

M. Barry Sterman, Ph.D.

Comodulation analysis of multi-channel QEEG data provides for the evaluation of correlations in spectral magnitude outputs over time between all recorded sites in any selected frequency band, and compares these values with expected values from a normative database. This analysis differs from coherence in its focus on frequency output changes over time regardless of phase, and from power spectral correlation in its avoidance of the corrupting influence of magnitude squaring. Used as an evaluation tool in QEEG studies across various cognitive states it identifies significant disturbances in the coordination among brain regions of temporal outputs in relevant frequency bands. Various reliable patterns of deviation in this coordination have been documented and associated with different clinical disturbances. Guided by the findings in QEEG analysis, abnormal patterns of comodulation can now be addressed with neurofeedback protocols specifically directed to their normalization. This workshop will review the QEEG methods used to evaluate disturbed comodulation and the neurotherapy programs capable of effective intervention.

Successful biofeedback applications for restoring functions in patients with central nervous system damage: implications from the neuro and behavioral sciences (part 1 of a 2-day workshop)

Bernard Brucker, Ph.D., ABPP

Recent discoveries from the Neuro and Behavioral sciences have shown that the central nervous system is capable of long term structural repair after damage. Further, it has been shown that specific behavioral interventions can result in more efficient use of remaining and repaired central nervous system tissue. However, the data from traditional medicine and rehabilitation shows that persons with central nervous system damage after stroke, brain injury, cerebral palsy and spinal cord injury usually have permanent losses of motor function at six months to one year post onset. This workshop will cover the elements of effective Biofeedback procedures for learning voluntary control over surviving and recovering motor neuron cells which is essential in order to restore motor function. These applications have been shown to be highly effective in gaining significant functional improvement which would not otherwise occur, even in patients who are long term since injury or disease and those that have plateaued from other therapeutic interventions.

***Sherlock Holmes and the case at "Function Junction"* An integrative feedback therapy model for getting good outcomes in any practice (part 1 of a 2-day workshop)**

Lynda Kirk, MA

Lynda Kirk, past president of both ISNR and AAPB, and respected long-time bio/neurofeedback practitioner, is the founder and director of one of the United States' most successful, comprehensive bio/neurofeedback clinics, the Austin Biofeedback and Neurofeedback Center.

For twenty-five years, the Austin Biofeedback and Neurofeedback Center has successfully helped thousands of individuals who have arrived at the clinic with a diverse array of conditions ranging from migraines to hypertension to chronic pain and from epilepsy to attention disorders to brain injury. The Center also has a long history providing performance enhancement training for high-level athletes, musicians, and other performers. This workshop presents the rationale for the innovative methodology underlying this clinic's high success rate and reputation. The workshop is organized around four major themes:

- Employing the “Sherlock Holmes Method” – how to sleuth beyond the obvious isolated symptom set in clinical protocol planning.
- Understanding the importance of the “Function Continuum Model” – how to move toward optimal function regardless of the client's starting point on the “Function Continuum”: **Dysfunction → Optimal Function.**
- Using comprehensive adjunctive therapies in bio/neurofeedback training plans – when and how to use such therapies as TFT/EFT, hypnosis, EMDR, neurolinguistics, CBT, RET, etc.
- Challenging and empowering your clients and their psychophysiological systems are keys to effective outcomes. Learn which feedback systems and protocols Lynda uses for specific applications, from EEG to sEMG to TEMP to SCL to HRV to QEEG, to AVS, to CES, etc.

The workshop provides practical as well as conceptual information useful for bio/neurofeedback practitioners **whatever their specialty or clinical focus.** The workshop is organized around specific case studies designed to illustrate the four major themes, with ample small-group practice opportunities and interaction. Lynda is bringing key staffers from her clinic to assist.

Biofeedback and self-regulation in the class setting: concept and tools

Daniel Hamiel, Ph.D.

The author have developed with his colleagues a program and tools aimed at enhancing stress management and peak performance in the class setting. The program and the tools are applicable to all grades and different levels and it designed to be delivered by teachers in the class. The program integrates physiological and cognitive-behavioral techniques into a stress management method. The tools are affective in dealing with daily stressors inside and outside of the class. They are positively oriented to the strength of the children in order to enhance their performances. The theoretical background will be reviewed with an emphasis on practicing the tools. Stress management techniques for children in general will be taught with specific attention to group work, including a demonstration of the techniques with and without biofeedback. The purpose of this workshop is to give the practitioner the ability to actually perform the tools in his own setting, and in general with groups of children.

The workshop is designed for school counselors, educational psychologists, educators and teachers.

Das MIPAS Kopfschmerzseminar – German language

Wolf-Dieter Gerber, Ph.D.

In der ärztlichen Praxis sind akute und besonders chronische Kopfschmerzen ein häufiger Vorstellungsgrund von Patienten. Etwa 30 % aller Patienten in der neurologischen Praxis sind Kopfschmerzpatienten. Aber auch Allgemeinärzte, schmerztherapeutisch tätige Orthopäden, Anästhesisten, Internisten und Gynäkologen sind häufig mit Kopfschmerzproblemen konfrontiert. Insbesondere die Migräne und der Kopfschmerz vom Spannungstyp sind die in der ärztlichen Praxis dominierenden Kopfschmerzkrankungen. In einer Umfrage bei über 5000 Patienten, die an einer Veranstaltung der Deutschen Migräne- und Kopfschmerzgesellschaft teilgenommen hatten, wurden von 90 % der Befragten angegeben, dass sie mit ihren Ärzten nicht zufrieden sind. Mangelnde Informiertheit und Beratung, zu wenig Zeit und eine letztendlich nur auf Medikamente abgestimmte Behandlung wurden als Hauptgründe dafür angegeben, dass Kopfschmerzpatienten häufig von Arzt zu Arzt wechseln, in der Befragung bis zu vier Ärzte pro Jahr.

Auf dem Hintergrund der Diskrepanz zwischen den Bedürfnissen der Kopfschmerzpatienten einerseits und den einschränkenden gesetzlichen Rahmenbedingungen von niedergelassenen Ärzten andererseits wird mit dem **Migräne-Patientenseminar MIPAS** ein möglicher Lösungsansatz vorgestellt.

MIPAS ist analog zu anderen Schulungsprogrammen (wie z.B. die Diabetesschulung) eine Patientenschulungskonzeption. Sie soll dem niedergelassenen Arzt ermöglichen, durch eine Zusammenführung von Patienten in kleinen Gruppen (bis zu zehn Patienten) Schulungs- und Trainingsprogramme anzubieten, wobei *die Hilfe zur Selbsthilfe* im Vordergrund steht. Ein besonderer Schwerpunkt einer adäquaten Behandlung von chronischen Kopfschmerzen ist die Schulung und Führung des Patienten. Dies ist nicht in 10minütigen Konsultationen zu leisten. Gerade der chronische Schmerzpatient, bei dem sich die Diagnose ja meist aus einer umfassenden und sorgfältigen Anamnese ergibt, benötigt viel Zeit in der ärztlichen Praxis. Zeit, die der niedergelassene Arzt in der Regel nicht hat und für die er, wenn er sie sich nimmt, nicht adäquat vergütet wird. MIPAS erlaubt dem Arzt, dem

Patienten mehr Zeit zu widmen. Dadurch fühlen sich die Patienten mehr ernst genommen, wobei sie darüber hinaus auch eigene Wege zur Bewältigung ihrer Kopfschmerzproblematik erlernen können. Der Arzt kann in der Gruppe intensiv mit seinen Patienten im Hinblick auf die Bewältigung ihrer Kopfschmerzprobleme arbeiten. Das MIPAS-Programm bezieht sich auf einen Zeitumfang von sechs bis acht Kontakten während eines Quartals. Es ist jederzeit möglich, dass Programm auch über zwei Quartale hinweg anzubieten. Das Programm besteht aus drei Modulen:

- a) einem **Modul Diagnostik**, in dem der betreuende Arzt und die Patienten gemeinsam die jeweiligen diagnostischen Gegebenheiten erarbeiten;
- b) im **Modul Edukation** (Beratung) werden dem Patienten umfassende Informationen über das Krankheitsbild und die Möglichkeit der medikamentösen und nicht medikamentösen Behandlung verdeutlicht;
- c) das **dritte Modul** bezieht sich auf den verhaltensmedizinischen Schwerpunkt, in dem die neueren Techniken der verhaltensmedizinischen Behandlung wie Reizverarbeitungstraining, Schmerz- und Stressbewältigung auf der Grundlage gezielter Übungen angeboten werden soll. Analog zu anderen Patientenschulungsmaßnahmen steht auch beim MIPAS das praktische Üben in der Gruppe gemeinsam mit dem Arzt im Vordergrund.

Es ist allgemein bekannt, dass eine reine Wissensvermittlung für eine adäquate Krankheitsbewältigung, insbesondere auch für die durch die Krankheit bedingten notwendigen Lebensveränderungen nicht möglich sind. Das MIPAS-Programm ist somit ein interaktives Übungs- und Trainingsprogramm, das entsprechende Kenntnisse durch den ärztlichen Seminarleiter voraussetzt. Für die Durchführung von MIPAS sind umfassende Kenntnisse zur Diagnose und Therapie von Kopfschmerzen erforderlich. Da es sich aufgrund der wissenschaftlichen Entwicklung des Programmes als günstig erwiesen hat, homogene Patientengruppe (z.B. Migräne-Patienten) zusammenzustellen, sind insbesondere Kenntnisse zur Migräne-Erkrankung notwendig. Diese Kenntnisse beziehen sich sowohl auf diagnostische und differential-diagnostische Fragestellungen, auf die Ätiologie und Pathogenese sowie die medikamentöse und nichtmedikamentöse (verhaltensmedizinische) Behandlung der Migräne.

Optimizing children's chances for personal growth and success Resilience, performance and health – supporting the power of the future with advanced biofeedback skills

Monika Fuhs, Mag.rer.nat.

Our bodies still react to stress in an archaic way even though the environment has changed dramatically. Survival from an evolutionary perspective depends upon flexibility and ability to adapt – what does it take to become resilient and to grow up with the best possible skills for the future? Beginning in primary school, inability to cope and master the environment is related to lacking self-confidence, excessive reactivity to stress and lowered self-esteem. The workshop teaches biofeedback based self-regulation program for children to reduce common stress related symptoms such as headache, sleeping disorders, learning disabilities, shoulder and neck pain, depression and to optimize children's performance in school. Using biofeedback modulated strategies, the workshop explores how stress is passed from one to the other, and how kids and their parents can learn to adapt/master control over their tasks in a limited time period.

The integrated therapeutic children's biofeedback program will cover:

- The use of biofeedback for assessment and training in children
- Assessment of stress
- Assessment of deficits (learning disabilities, concentration problems...)
- Identification of main stressor (mental, emotional, external)
- Mastering relaxation and regeneration
- Creating individual intervention programs
- How to involve parents into the therapeutic process (how can we get them "into the car" and why it is so necessary)
- How to teach resilience and hardiness to kids
- Cognitive reframing
- AHA experiences and their meaning in the process of change
- Cognitive placebos for kids
- Dealing with pressure and performance anxiety
- The role of nutrition – brain food
- Homework – how to get it done
- Concept of self-control and self-dependency in kids

**Pelvic floor muscle sEMG in the diagnosis and treatment of lower urogenital tract pain disorders
(part 1 of a 2-day workshop)**

Howard Glazer, Ph.D.

This workshop provides a critical overview of how sEMG technology fits into the contemporary range of surgical, behavioral, and a pharmacological therapy for vulvovaginal pain and teaches how to use a standard sEMG evaluation using the Glazer protocol for vulvovaginal pain, within empirically supported guidelines.

On completion of the 2-day workshop, participants will be able to collect data to be used in the development of a database of sEMG values for pelvic floor dysfunctions. The emphasis is on practical skills and clinical decision-making using sEMG. No prior experience in sEMG is required.

FRIDAY, FEBRUARY 17th, 2006

Half-day Workshops

MORNING WORKSHOP

09:00-12:30

Focused Vibration Training - FVT® – English language

Samuel Brown, Ed.M., PT, M.P.T., F.Is.

Focused Vibration Training (FTV) is a new revolutionary technology which combines muscle training and musculoskeletal system treatments. The results are short in time, which upgrade the muscles strengthening dramatically on one side and boost up the healing processes on the other. The FVT is based on the exploration by Professor Carmelo Bosco, of the Whole Body Vibration Training concept. He explored the combination of the 3 vibration components (Frequency, Amplitude, and Acceleration) which facilitates the stretch reflex and the Tonic Vibration Reflex –TVR. As soon as the vibration starts, the reflexes facilitate and activate most of the skeletal muscles fibers in thousands, without any physical or mental stress. That unloading feature is of great advantage in rehabilitation aspects, which gives a lot of opportunities to enhance the rehabilitation processes. Professor Bosco also found that every human being has his own muscle frequencies in which it responds optimally to the WBV that can be measured briefly by an EMG test. The FVT concept concentrates on the target muscle with its own frequency to achieve maximum effect at minimum time of training. The Tonic Vibration Reflex is active to the newborns as well as to the seniors which gives us an advantage to help synchronize the seniors' central nervous system and improve their daily living performances too. The training duration is very short, 10 minutes every other day, which make the training convenient and time saving.

Workshop Purpose

To be qualified and experienced by feeling the WBV.

To be qualified in conducting an EMG test while doing WBV, and adequate training to specific muscles or muscle groups, in trained and untrained muscle.

Participants

The FVT is a multidisciplinary method, because of that a multidisciplinary participants can take part as: Medical Doctors, Physical Therapists, Sport Therapists.

A practical guide for Alpha-theta training – German (or English) language

Knut Berndorfer, Dr.rer.nat.

This ½ day workshop will give an introduction in Alpha-theta training. It will discuss the history, the rationale for its efficacy and the different applications in the therapeutic setting and for developing creativity and intuitive knowledge. The main focus will be practical: looking at the principles of theta induction, the technique, running a session, explication of experience and evaluation of data. The practical work will be based on the new Biograph Infiniti software from Thought Technology.

AFTERNOON WORKSHOPS

13:30-17:00

Biofeedback of Heart Rate Variability in Hypertension: Theoretical aspects and practical application – *German language*

Lutz Mussgay, Ph.D. and Anke Reineke, M.Sc.

This course will introduce treatments of hypertension with biofeedback techniques. Based on a model of automatic cardiovascular regulation a rational is provided that describes the theoretical basis of traditional and new approaches. Traditional methods did not come up with a convincing success. However, newer approaches like continuous blood pressure feedback and heart rate variability feedback offer promising alternatives. Further, the course will discuss methods of collecting the data, regarding the set up, protocol and analyses of the results obtained with heart rate variability training. Case studies and the results of a recent study will be introduced for the clarification of the learning mechanism.

Biofeedback in pain management and psychotherapy (n.V. Frankl) for children in a private practice – *German (or English) language*

Ingrid Pirker-Binder, MA rer. Soc.oec; MA phil.; Psych.Therap. (Frankl)

This workshop offers a model how to work with children in a private practice with biofeedback equipment using all variables (breathing, EMG, Heart Rate, SCL, temperature), using the Procomp Infiniti. It is a hands-on workshop and you will get the protocols for 10 sessions.

You will learn how to start and organize training sessions and create special stories supporting relaxation and temperature training. The new stress test using right/left hand skin conductance will be shown. The workshop will give a short overview of learning styles and learning disabilities. New approaches towards imagery and visualization for children and adolescents are discussed.

Working with children and adolescents is not the same as working with adults. Children are beautiful biofeedback learners, but they need a special training according to their age, to their learning styles and fantasy.

The course objectives include (1) how to select and organize training sessions for children and adolescents, (2) how to create special relaxation stories and (3) how to organize the homework and involve the parents.

SATURDAY, FEBRUARY 18th, 2006

Full-day Workshops

QEEG guided neurotherapy using comodulation treatment (part 2 of a 2-day workshop)

M. Barry Sterman, Ph.D.

Abstract: see Friday, February 17th, 2006.

Biofeedback applications for restoring function after central nervous system damage: implications from the neuro and behavioural sciences (part 2 of a 2-day workshop)

Bernard Brucker, Ph.D., ABPP

Abstract: see Friday, February 17th, 2006.

Sherlock Holmes and the case at "Function Junction"

An integrative feedback therapy model for getting good outcomes in any practice (part 1 of a 2-day workshop)

Lynda Kirk, MA

Abstract: see Friday, February 17th, 2006.

Bio- und Neurofeedback bei Schlafstörungen – *German language*

Lothar Niepoth, Dipl. Psych.

Eines der spannendsten Gebiete der Biofeedbackbehandlung ist die Behandlung von Insomnien. Diese nehmen in den letzten Jahren immer mehr zu, zudem haben neuere wissenschaftliche Erkenntnisse eine verbesserte Behandlung dieser Störungen ermöglicht. Andererseits ist ein genaues Wissen um physiologische Grundlagen und Diagnostik nötig. Zusätzlich zur Standardbehandlung bei Insomnien, die in Grundzügen vermittelt wird, wird Biofeedbackbehandlung und EEG-Training bei psychophysiologischen Insomnien vorgestellt und eingeübt, insbesondere soll auf mögliche Schwierigkeiten bei Patienten eingegangen und eine Integration in ein Gesamtbehandlungskonzept ermöglicht werden.

Management of chronic pain: psychophysiological treatment models

Richard Gevirtz, Ph.D.

Chronic pain is a label used to describe a variety of distinct syndromes that are common in medical practice. The failure to distinguish between the syndromes tends to diminish treatment effectiveness. In this workshop, models for Fibromyalgia, Myofascial Pain, and Neuropathic Pain are described. For each an etiological or mediational model is proposed leading to a treatment protocol. Each protocol integrates Biofeedback modalities such as Heart Rate Variability (HRV), sEMG, EDR, and Temperature.

The afternoon session is devoted to practical issues in learning to deliver the protocols above. Hands on work with various equipment and demonstrations will be used to hone clinical skills needed for effective treatment. This includes several handouts that we have used with patients.

Integrating psychophysiology with psychotherapy

Arnold Rolnick, Ph.D.

Various forms of psychotherapy can be successfully integrated with methods based in clinical psychophysiology to enhance the treatment process. To a certain degree, psychotherapists practice some of these methods when they attune themselves to bodily cues which reflect either conscious or unconscious processes in the patient. These non-verbal cues may be as overt as tears and smiles, or as subtle as slight shifts in breathing patterns or muscles tension. To the extent the therapist is aware of these cues he/ she can integrate the information into the treatment approach.

The processes already afforded to the clinician in the above mentioned intuitive style can be more directly brought to bear in the therapeutic process through the methods of clinical psychophysiology. This integration was initiated in Charcot's clinic in Paris where he pioneered the use of the electrodermal response (EDR) in psychotherapy. Jung also employed the EDR in his psychoanalytic investigations. This emerging field has been called psychophysiological psychotherapy, which Ian Wickram has aptly defined as the "verbal self- exploration in a trusting human relationship conducted in a patient generated low arousal state".

There are numerous advantages of integrating psychophysiology into the treatment process. For example, one could use sensitive indices of emotional responding such as EDR, to monitor the course of verbal therapy. The clinician can use the physiological signals to identify otherwise vague areas of emotional response and to clarify the patient's defensive style. In addition, psychophysiological psychotherapy allows for:

- 1) cultivating low arousal states through biofeedback and relaxation training
- 2) monitoring emotional responsiveness during therapy
- 3) developing ego-mastery and self-regulation
- 4) enhancing body-image
- 5) promoting self-awareness and the dynamics of the psychophysiological relationship
- 6) matching treatment strategies to patient variables
- 7) enhancing the effectiveness of the treatment process.

Integrating the methods of clinical psychophysiology and psychotherapy allows for emergent possibilities in the treatment process. It can facilitate the matching of treatment strategy to the individual cognitive and personality characteristics of the patient. Psychophysiological psychotherapy also establishes a greater understanding of the etiology of and therapy for anxiety and psychophysiological disorders. These techniques are readily integrated into a variety of therapeutic approaches and readily informs these approaches with data which is clinically relevant but otherwise not readily available. In sum, these methods can help optimize and enhance the treatment process.

Structure

The work will take be conducted in two principal ways: (A) practice – in small groups; and (B) Sharing the Experience, including discussion and training – in the plenary.

Objectives

The objective of the Experience is to enable the trainee to experience two roles: that of the patient and that of the therapist.

Experience as patient: we believe that a person can be a therapist in the psycho-physiological field only after having himself experienced the feeling of "being a patient". This is true of a large percentage of the treating professions, but is even more true regarding biofeedback, in which you must teach another person control over the autonomic nervous system – an activity that is difficult to explain cognitively and is principally based on experience and learning. It is important that the future therapist experience the feeling of being connected to the apparatus and the feelings involved in the process. Special attention should be paid to the feelings of "being transparent" to another person "who sees what is happening in the patient's 'guts'". In order to fully experience the process as patient, the trainee must be allowed the feeling of satisfaction at attaining control, as well as the frustration connected with the process of learning to adjust the physiological variables. We shall emphasize the Experience of losing control, necessary for the process of learning control. A large part of the Experience will enable the trainee to use biofeedback as an inner mirror: to learn the psychological processes which cause different physiological reactions.

Experience as therapist: work with biofeedback is not a simple challenge to a therapist. On the one hand, he has to deal with technical paraphernalia such as electrodes, a computer and physiological records; on the other hand he must listen to the emotional processes taking place during the course of the treatment. Therefore, the future therapist must practice a combination of these activities. At the technical level, the trainees will have to become familiar with work with physiological parameters, learning to place the sensors on the patient and to ensure correct recording of the data. The therapist will teach the patient various methods of relaxation and will learn to

use the feedback obtained from the apparatus in order to adapt, adjust and tailor the therapeutic intervention. The principal craft we will be dealing with in the workshop will be the construction of an integrative therapeutic focus: how to help the patient cope with his or her symptoms, while at the same time paying attention to the cognitive and emotional processes which encourage or prevent the occurrence of the symptom.

Process

The workshop will simulate the therapeutic process from start to finish. Each participant will be asked to select a problem on which he/she wishes to work in therapy. The first meetings will deal with psycho-physiological intake, the definition of the therapy, and its presentation to the patient. At this stage, we shall deal with the "curative fantasy" with which the patient comes to biofeedback and with how it is possible to reframe this fantasy as part of the therapeutic process. The following series of meetings will deal with the practice of the autonomous adjustment processes, combined with relaxation methods and guided imaging. We will provide time for questions regarding the therapist's place in the process as well as for special transference processes: not only towards the therapist but also towards the computer and the method. The last stage of the workshop will deal with questions of inclusion: how the ability to control autonomous processes can be implemented outside of the clinic, how to "wean" the patient from the machine. How the therapeutic experience can be broadened from the technical element to the emotional component and how to make the treatment a more complete process.

The participants will work in small groups, with three roles in each group: therapist, patient and audience. These roles will be changed routinely. At the plenary, the audience will report on the treatments they witnessed, the patient will relate his feelings and the therapist will share with the plenary both his work methods and the internal conflicts and doubts he experienced during the process. The instructors will use this process of group training to teach the nuances which characterize biofeedback therapy.

Pelvic floor muscle sEMG in the diagnosis and treatment of lower urogenital tract pain disorders (part 2 of a 2-day workshop)

Howard Glazer, Ph.D.

Abstract: see Friday, February 17th, 2006.

SATURDAY, FEBRUARY 18th, 2006

Half-day Workshops

MORNING WORKSHOP

09:00-12:30

BF: fixe standards oder jedes mal neue Herausforderung – German language

Ursula-Katharina Haller, MTF

- Präsentiert werden Technik und Methodik anhand von Falldarstellungen.
- Einstieg: simulieren eines Ersttermin's mit Anamnese, Elektroden Plazierung, Test, etc.
- Erklärung: 'Arbeitsweise' und 'Philosophie' der Methode des 'erweiterten' respiratorischen Biofeedbacks'
- Falldarstellungen der Gruppe Kinder und Jugendlicher
- Indikationen :
 - Migrain, Tension-ty-p-headache
 - Mischtypen, chronic daily headache
 - Angst, Panik, Hyperventilation (event. Trauma)
 - Relevante Auszüge aus dem Problemkreis Schule
 - Leistung, Leistungsdruck, Mobbing, Teilleistung, ADD, ADHD

Vortrag ergänzt mit Powerpoint Presentation.

AFTERNOON WORKSHOP

13:30-17:00

Respiratorisches Biofeedback – German (or English) language

Gerhard Strauss-Blasche, Ph.D.

Participants will be introduced into the basic principles of respiratory psychophysiology and the present findings and developments relevant for biofeedback. The interplay of breathing patterns, mood and the cardiovascular and autonomic nervous system will be discussed as well as ways to measure respiratory activity. Participants will also learn how to use breathing techniques to enhance well-being, heart rate variability and for the treatment of several disorders.