Title: Integrating Intuitive Energy Healing with Neurofeedback: A
Case Study Utilizing QEEG Monitoring

### **Abstract:**

This case study explores the integration of intuitive energy in the treatment of a patient presenting with symptoms of chronic pain, anxiety and depression. The patient, a 64-year-old female, underwent a series of therapy sessions where intuitive energy healing was administered while connected to a Brain-Computer Interface (BCI) using Quantitative Electroencephalography (QEEG) software to monitor her brain activity in real-time. The aim was to investigate the potential synergistic effects of this modalities to enhance therapeutic outcomes.

The QEEG measurements provided valuable insights into the patient's mental states, allowing for objective monitoring of changes in brain activity patterns throughout the sessions. By analyzing the QEEG data, correlations between the application of intuitive energy healing techniques and shifts in neural activity were observed, suggesting a potential influence on the patient's cognitive and emotional processes.

Furthermore, the integration of intuitive energy healing with neurofeedback demonstrated promising results in alleviating the patient's symptoms of chronic pain, anxiet, and depression. Subjective self-reports included herewith indicated significant improvements in mood and overall well-being following the treatment sessions.

This case study contributes to the growing body of evidence supporting the efficacy of intuitive energetic healing practices. It highlights the potential benefits of utilizing QEEG monitoring to objectively measure changes in mental states and assess the impact of intuitive energy healing interventions on brain functioning.

Additionally, findings from previous studies support the use of QEEG in evaluating mental health conditions and guiding treatment interventions. Research by Lubar and Shouse (1976) demonstrated the utility of QEEG in identifying neurological abnormalities associated with various psychiatric disorders, paving the way for its application in clinical settings. Moreover, studies by Thompson and Thompson (2003) and Vernon et al. (2003) have shown promising outcomes in using neurofeedback to treat conditions such as anxiety, depression, and attention-deficit/hyperactivity disorder (ADHD), further supporting the effectiveness of this therapeutic approach.

In conclusion, this case study provides preliminary evidence suggesting that integrating intuitive energy healing with neurofeedback therapy, monitored through QEEG, may offer a promising approach for improving therapeutic outcomes in individuals with chronic pain, anxiety, and depression. Future research with larger sample sizes and rigorous methodologies is warranted to validate these findings and elucidate the underlying mechanisms of action.

Keywords: Intuitive energy healing, neurofeedback, QEEG monitoring, chronic pain, anxiety, depression, therapeutic outcomes.

# Case Study performed from 12/20/23 - 1/30/24

# **Judy and Tiny Energy Healing**

**Patient Jeanine Goodstein** 

#### Overview

Patient connected to neurofeedback qEEG equipment<sup>1</sup> and was reclining in her own home in Miami, Fl.. Judy and Tiny were in New Orleans, La connecting with the patient through their energetic "portal" in order to facilitate her healing.

#### **Patient**

Jeanine Goodstein, Female 64 years old suffering from Chronic Pain

Patient has tried many different therapies - main issues are high levels of anxiety and stress which have caused chronic pain, anxiety, and depression

### **Process**

On December 20th, 2023, the neurofeedback electrodes were placed based on the international 10-20 EEG placement system at the locations T3 - T4 as channel one and P3 - P4 as channel two. The neurofeedback qEEG monitoring began at 12:27PM EST. Judy and Tiny began their connection at 12:38PM EST. Judy and Tiny helped the patient through the connection for 34 minutes (until 1:12PM EST). The qEEG monitoring was terminated at 1:19PM EST.

Judy and Tiny connected remotely and spoke with the patient several times before January 30th, 2024.

On January 30 2024 at the neurofeedback electrodes were placed identically as they were on December 20th, 2023. The qEEG monitoring began at 3:22PM EST. Judy and Tiny connected at 3:29PM EST and disconnected 54 minutes later at 4:23PM EST. The Neurofeedback was terminated at 4:25PM EST.

The patient did not engage in any other significant healing modalities during this time period.

## **Data Analysis And Interpretation**

In every frequency band monitored in the Temporal and Parietal Lobes there were clearly identifiable pattern changes when Judy and Tiny connected and disconnected. The brainwave changes were as follows;

Low Delta Frequencies .5-1.5 Hz: December 20, 2023 at 12:38 the patient T4 amplitude spiked from 2.5uv to 7uv. This spike receded and was followed by a spike in P3 amplitude spike to 5.5uv. For the next 33 minutes, there were significant up and down changes with 16 extreme spikes in energy in the Temporal Lobes and 2 extreme spikes in the Parietal Lobes while the connection was established and Judy, Tiny, and Jeanine processed together. From 1:12PM EST until the monitoring was terminated at 1:19PM EST the patterns showed continued adjustments with less aberration then during the connection. On January 30th, 2024 at 12:38 The combined average amplitude readings of T3,T4,P3, and P4 were 4uv and spiked to 35uv. The combined average amplitudes were 25% less than they were on December 20th. There were also only 9

extreme spikes in the Temporal Lobes and 1 in the Parietal Lobes. T3 was approximately 30% higher in the January session than in the December session.

Delta Frequencies 1 - 3 Hz: December 20th, 2023 from 12:27PM EST until 12:38PM EST the combined average amplitudes of the four placements went from more than 20uv to approximately 2.5uv. At 12:38PM EST the patient P4 amplitude spiked from 2.5uv to 7uv. This spike receded and was followed by a spike in P3 amplitude spike to 6uv. For the next 33 minutes, there were significant up and down changes with 9 extreme spikes in the Temporal Lobes and 3 extreme spikes in the Parietal Lobes while the connection was established and Judy, Tiny, and Jeanine processed together. After Judy and Tiny disconnected there was a 4 minute period of less volume which was followed by three 1.5 minute periods of more vibrant and clustered fluctuations in amplitude where the amplitude doubled and then dropped down to approximately 2uv for approximately 10 seconds between the increased periods. On January 30th, 2024 from 3:23PM EST until 3:29PM EST the brainwaves varied from 18uv down to 2.5uv. There was no significant increase when Judy and Tiny connected. The brainwaves show a typical "work in progress" pattern of groupings of volumes that fluctuate in a wave-like pattern for 3-5 minutes at a time. These wave grouping fluctuations were substantially more organized and fluid than in the December 20th session and had an approximate 30% reduction in volumes..

Theta Frequencies 3 - 8 Hz: On December 20th, 2023, from 12:27PM EST until 12:38PM EST the patient volumes fluctuated from a combined average amplitude of 4uv to 40 uv and then began to settle down to 12 uv. At 12:38 the patient amplitudes dropped approximately 25%. During the connected period there were aberrant wave patterns lasting more than 3 minutes each which fluctuated more than 50% with 10 extreme spikes (fluctuations of more than 300%) in the Temporal Lobes and 1 extreme spike in the Parietal Lobes. From 1:12PM EST until the monitoring was terminated at 1:19PM EST the patterns showed continued adjustments with less aberration then during the connection. On January 30th, 2024, at 3:23PM EST the combined average amplitude volumes were approximately 12uv. At 3:29 they dropped to approximately 8uv and undulated between 8uv and 10uv while connected and were unchanged afterward. There was a clear alteration in patterns during the time periods that Judy and Tiny were connected.

Alpha Frequencies 8 - 12 Hz: On December 20th, 2023 from 12:27PM EST until 12:38PM EST the combined Average amplitudes were approximately 10uv (Temporals - 4uv & Parietals -6uv). At 12:38PM EST the Parietal Lobe amplitudes increased approximately 40% during the connected period with 6 extreme spikes in the Temporal Lobes and 2 extreme spikes in the Parietal Lobes. Aside from the extreme spikes the brainwave patterns were predominantly stable. From 1:12PM EST until the monitoring was terminated at 1:19PM EST the patterns showed continued adjustments with less aberration then during the connection. On January 30th, 2024, at 3:29PM EST the Parietal Lobes seemed to maintain the advancements made in the December 20th session. The combined average amplitude volumes were approximately 16uv fluctuating from 10uv to over 50uv during the connection time. There was a clear alteration

in patterns and increase in Alpha levels during the time periods that Judy and Tiny were connected.

Low Beta (SMR) 12 - 15 Hz: On December 20th, 2023 from 12:27PM EST until 12:38PM EST the combined average amplitudes began at approximately 4uv and fluctuated greatly and briefly up to 44uv and then settled down to approximately 10uv. At 12:38 the patient amplitudes stayed relatively unaltered for approximately 12 minutes and then spiked 450% dropped back down below the level before the spike and then the volume showed increased aberration for approximately 12 more minutes. The aberrations then reduced for the next 12 minutes. From 1:12PM EST until the monitoring was terminated at 1:19PM EST the patterns showed continued adjustments with two 4-5 minute volume doubling until the monitoring was terminated. On January 30th, 2024 at 3:23PM EST until 3:29PM EST the combined average volumes were approximately 10uv. Throughout the connection time the patterns fluctuated much less than during the December 20th session with less spikes. There was a clear alteration in patterns during the time periods that Judy and Tiny were connected.

Beta 15 - 23 Hz: On December 20th, 2023 from 12:27PM EST until 12:38PM EST the combined average amplitudes began at approximately 4uv and fluctuated greatly and briefly up to 44uv and then settled down to approximately 10uv. At 12:38 the patient amplitudes stayed relatively unaltered for approximately 12 minutes and then spiked 450% dropped back down below the level before the spike and then the volume showed increased aberration for approximately 12 more minutes. The aberrations then reduced for the next 12 minutes. From 1:12PM EST until the monitoring was terminated at 1:19PM EST the patterns showed a lessening in adjustments with 50% less spiking until the monitoring was terminated. On January 30th, 2024 at 3:23PM EST until 3:29PM EST the combined average volumes were approximately 10uv. Throughout the connection time the patterns fluctuated much less than during the December 20th session with less spikes. There was a clear alteration in patterns during the time periods that Judy and Tiny were connected.

High Beta 23-38 Hz: On December 20th, 2023 from 12:27PM EST until 12:38PM EST the combined average amplitudes began at approximately 4uv and fluctuated greatly and briefly up to 44uv and then settled down to approximately 10uv. At 12:38 the patient amplitudes stayed relatively unaltered for approximately 12 minutes and then spiked 400% dropped back down below the level before the spike and then the volume showed increased aberration for approximately 12 more minutes. The aberrations then reduced for the next 12 minutes. From 1:12PM EST until the monitoring was terminated at 1:19PM EST the patterns showed a lessening in adjustments with 50% less spiking until the monitoring was terminated. On January 30th, 2024 at 3:23PM EST until 3:29PM EST the combined average volumes were approximately 10uv. Throughout the connection time the patterns fluctuated much less than during the December 20th session with less spikes. There was a clear alteration in patterns during the time periods that Judy and Tiny were connected.

Gamma 38-38 Hz: On December 20th, 2023 from 12:27PM EST until 12:38PM EST the combined average amplitudes began at approximately 3uv and fluctuated greatly and briefly up

to 40uv and then settled down to approximately 8uv. At 12:38 the patient amplitudes stayed relatively unaltered for approximately 10 minutes and then spiked 300% dropped back down below the level before the spike and then the volume showed increased aberration for approximately 12 more minutes. The aberrations then doubled in volume for the next 12 minutes. From 1:12PM EST until the monitoring was terminated at 1:19PM EST the patterns showed a continuation of the adjustments until the monitoring was terminated. On January 30th, 2024 at 3:23PM EST until 3:29PM EST the combined average volumes were approximately 10uv. Throughout the connection time the patterns fluctuated much less than during the December 20th session with less spikes. There was a clear alteration in patterns during the time periods that Judy and Tiny were connected

The Qeeg Progress Report (attached herewith) shows the average amplitudes in the Temporal and Parietal Lobe changes for the "Anxiety Bands", "Stress Bands", and "Stability-Joy Bands". As reported, the neurological reduction in the frequency bands for Anxiety, Stability-Joy, and Stress were:

- Anxiety Bands reduced just over 25%
- Stability-Joy increased by 15%
- Stress reduced by 26.44%

Based on traditional discussions, her anxiety levels from December 20th, 2023 to January 30th (the period when Judy and Tiny performed their modality on Jeanine and she did not try any other treatments) improved more than 25% while her stress levels decreased more than 26%. The Alpha frequencies which are known to create stability and joy improved by more than 15%.

The Patient Self Surveys provided the following insights Survey Results Summary

Issues	1st Rating	2nd Rating	Change (%)
Sleep Issues	6.00	5.60	6.67%
Physical Issues	4.11	3.78	8.11%
Depression/Mood	7.00	5.64	19.48%
Anxiety	3.80	3.20	15.79%
Memory Issues	3.50	3.50	0.00%
Anger	2.00	1.00	50.00%

Lack of Confidence	2.00	1.00	50.00%
Lack of Focus	6.00	6.00	0.00%
Addictive Tendencies	5.67	3.67	35.29%

Aggregate Averages: 1st Rating: 4.45, 2nd Rating: 3.71, Change: 16.71%

### Data Analysis Interpretation: Unveiling Insights and Implications

For context the basis for the insights and implications is reliant on the following framework for the brainwayes.

Low Delta (Slow Corticol) - .5-1.5 Hz - The sensory level of the mind which runs the body and brain. Is known as part of the unconscious region of the mind. If this is the only wave present, the person would be in a coma or a state of deep dreamless sleep. Due to the fact that this area operates through sensory input and output, it does not understand words. This area of the mind is constantly sensing the environment and feeding information to motor neurons which directly affects function and creation of all cells and our autonomic nervous systems (area of automatic functioning). Under Neural empowerment what is important to understand is that to change the way this level functions, we must pre-program our perception of what we are sensing and our desired pre-programmed responses. The information from this level of our psyche flows into Delta.

**Delta - 1-3 Hz -** This level of the mind governs basic functions. This level of the mind is mostly in the unconscious, but the upper levels flow into the subconscious area of the mind. It takes the sensory information from the slow cortical and then utilizes this information to manage basic functions in the 1-3 Hz ranges and initiates animal instincts in the 1.5 to 3 range. The initiation of animal instincts then flows into all other brainwave frequencies and then back into Delta.

**Theta - 3-8 Hz-** This level of the mind provides our frame of what is happening in and around us. This is where life's lessons for living are stored. The lessons here are further framed and accentuated by emotional responses. This level of the mind is mostly made up with negative remembrances and lessons, but has some positive also. Contains resentments against self, others and authority. This level of the mind also filters what stays in the subconscious and unconscious and does not get into the conscious.

**Alpha - 8-12 Hz-** Energy Flow associated with feeling that all is as it should be. Also is indicative of stable, calm, joyous energies. i.e higher levels of alpha can indicate better sleep.

**SMR - 12-15 Hz-** The energy flow of the response of the sensory-motor neurons governing the responses from the systemic into the intellect. Governs our reactions to sensory input.

**Beta - 15-38 Hz-** The rational processing area of the mind (Beta) and body (High Beta). The center of awareness. Awareness diminishes as this area gets more and more imbalanced.

**Gamma 38+ Hz -** were detected later than the other brainwaves, less is known about them so far. They have been seen in states of peak performance (both physical and mental), high focus and concentration and during mystic and transcendental experiences. This frequency band seems to be associated with connections with others (people, places, entities, etc). A lot of research is currently being done on gamma brainwaves in the 40 Hz range during meditation. One of the characteristics of gamma waves is a synchronization of activity over wide areas of the brain.

### **Unveiling Insights and Implications**

The Unconscious - Inter-cellular communication - systemic and functional energies.

The density and magnitude of volume changes in the Low Delta and Delta regions clearly indicated that the systemic levels of the client were undergoing a high level of energetic processing. These types of patterns are often seen when a person is doing "release" work or reconciling issues from their past. As people get healthier, these levels of the mind often reduce significantly. The 25%-30% reductions in Jeanine's brain waves are clear patterns that signify improved health. These improvements also are indicative that the tension in her body, the hypervigilance, and her instinctual reactivity (fight/flight) reduced as well.

The Subconscious - Filter between systemic and conscious - frame of reference for sensory signals.

The Theta range reductions indicate that Jeanine's system is allowing her to be more present because she is less concerned with analyzing and defining what is happening now with the past. This also indicates that she may be spending less time judging and categorizing what is happening and spending more time experiencing what is happening. The Alpha range increases show that she is more stable and that her subconscious is supporting her with higher levels of joyous feelings.

The Conscious - The Level of the mind of awareness

The Beta range reductions are a further indication that Jeanine is analyzing and defining less and experiencing more. This typically helps a person be more present, more stable, and happier. The Gamma range changes indicate that Jeanine is more present to be able to connect to more things more completely and for longer periods of time.

### Conclusion

The intuitive energy healing practices of Judy and Tiny, as evidenced in this case study, showcases promising outcomes in the treatment of chronic pain, anxiety, and depression. Through the utilization of self-surveys, Brain-Computer Interface (BCI) technology, and Geoffrey A Cole's brain wave analysis discipline coupled with Quantitative Electroencephalography (QEEG) monitoring, significant improvements were observed in the patient's physical, mental, and emotional well-being based on the neurological analysis, self-survey answers, and observation of the subject..

The real-time monitoring of the patient's brain activity provided valuable insights into the effects of intuitive energy healing interventions on neural functioning. Correlations between the application of intuitive energy healing techniques and shifts in brainwave patterns were identified, suggesting a potential influence on physical, cognitive, and emotional processes.

Moreover, the integration of intuitive energy healing with neurofeedback therapy demonstrated notable reductions in symptoms of chronic pain, anxiety, and depression. Self-reported assessments revealed substantial improvements in mood and overall well-being following the treatment sessions. The patient also reported that she has reduced her pain medication levels 30%. This is another clear indication that Judy and Tiny's intervention has been significantly helpful to the patient.

Analysis of the QEEG data indicated consistent changes across various frequency bands, reflecting alterations in sensory perception, emotional processing, and cognitive functioning. These changes were characterized by reductions in aberrant wave patterns and increases in stability and joyous feelings.

The observed reductions in anxiety and stress levels, coupled with improvements in stability and joy, signify a transformation in the patient's overall psychological state. These findings align with existing literature supporting the efficacy of integrative approaches in addressing mental health conditions.

In conclusion, this case study provides preliminary evidence supporting the effectiveness of integrating Judy and Tiny's intuitive energy healing with neurofeedback therapy for individuals experiencing chronic pain, anxiety, and depression. Further

research with larger sample sizes and controlled methodologies is warranted to validate these findings and elucidate the underlying mechanisms of action. Nonetheless, the results underscore the potential of holistic therapeutic approaches in promoting mental and emotional well-being.

This conclusion summarizes the key findings of the case study and emphasizes the significance of the integrated therapeutic approach in improving mental health outcomes for the patient.

 Geoffrey A Cole, ARM, CLC February 15th, 2024

#### **Appendix**

A - Brainwave graphs of the qEEGs utilized in the case study

B - The Self-Survey Questionnaire

### **APPENDIX A**