FROM THE EDITOR

Advances in the Use of Biofeedback and Neurofeedback with Post Traumatic Stress Disorder, Part I

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The cover of this special issue shows the logo of the “Wounded Warriors Battalion-East,” a unit consisting of injured US Marines and US Navy corpsmen, who designed this logo themselves to express that in their recovery they are now, as the Latin motto conveys, “still in the fight.” Our thanks to the US Marine Corps for permission to utilize this logo and to photographer Lucian Reed for the use of the photo.

In this historical moment, our world is overflowing with trauma and suffering, yet the supply of effective treatments and of trained trauma professionals is woefully inadequate. The strife in Gaza has just stopped, and the anguish of children and families there will last for years. Returning soldiers from Afghanistan and Iraq are suffering post traumatic stress disorder (PTSD) in such numbers that the Veterans’ Administration cannot keep up, and the civilian populations in both countries continue to suffer from new trauma. Wars and terrorism in Israel, Lebanon, Africa, and Asia create a never ending supply of new trauma victims. There is always an abundant supply of abused children, rape victims, survivors of auto accidents, house fires, hurricanes, and numerous other disasters. Increasingly we also recognize the presence of trauma in those who suffer serious illnesses, such as cancer—the trauma of the illness and of the treatments.

The Spring and Summer 2009 issues of Biofeedback Magazine will feature articles about the use of biofeedback and neurofeedback for PTSD. We have been flooded with articles narrating innovative uses of biofeedback for combat veterans, victims of trauma and torture, and emergency services personnel. Rather than reject any of these excellent manuscripts, we will devote two issues to the challenge of alleviating the suffering of PTSD.

Professional Issues

Sebastian Striefel opens this special issue with a discussion of ethical dimensions in the treatment of post traumatic stress disorder. The ethical challenges in this area include providing an adequate diagnosis of both PTSD and the several conditions that are frequently co-morbid with PTSD, recommending appropriate therapies, for which there is a good rationale and research support, and informing the client of available treatment options.

Next, Fred Shaffer and Judy Crawford provide a Biofeedback Certification Institute of America tribute to “educators who have made a difference” in improving the credibility of biofeedback practitioners, protecting the welfare of biofeedback consumers, and advancing the biofeedback field.

Special Issue Articles: Advances in the Use of Biofeedback and Neurofeedback with Post Traumatic Stress Disorder, Part I

The special issue on PTSD opens with a report from Carmen Russoniello and his team on the Wounded Warriors program, serving combat veterans of the US Marine Corps as well as Navy medical Corpsmen. The Wounded Warriors program applies an optimal performance approach, as well as both heart rate variability biofeedback and neurofeedback with victims of both traumatic brain injury and PTSD.

Next, Jeffrey Pyne and Richard Gevirtz describe four research projects currently in progress with support of the Office of Naval Research, the Veterans Administration, or the Department of Defense. These projects are exploring the use of psychophysiological approaches and virtual reality in the assessment and treatment of PTSD in the US military.

Siegfried and Susan Othmer describe a project called Homecoming for Veterans, which has organized a network of neurofeedback practitioners to provide free services for returning veterans. The Othmer approach combines a new low frequency neurofeedback training with traditional Alpha-Theta training, following Peniston.

Finally, John Carmichael describes his clinical approach to the assessment and treatment of military and police personnel with PTSD, utilizing psychophysiological and psychological tools. He identifies unique traits of individuals employed in military and police work, as well as the cumulative impact of duty related trauma.

Feature Article

Jan Van Dixhoorn of the Netherlands began a three part series on his “whole body breathing approach” in the summer 2008 special issue on respiration, and continues that series here. He emphasized increasing the individual’s awareness...
of psychophysiological patterns, in order to improve internal self-regulation. In this final article, he proposes a process model, in which breath training, muscle relaxation, and lifestyle changes are customized for each patient. He illustrates this model with the case of a motor vehicle accident victim with whiplash and cardiovascular problems.

Because color images play an increasingly central role in the fields of neurofeedback and biofeedback, selected figures from these articles, which require color for clear understanding, will now be posted on the AAPB website, along with the articles, at http://www.aabp.org/magazine.html.

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**Proposals and Abstracts**

Authors are invited to submit manuscripts on any topic in applied psychophysiology and biofeedback. Articles are welcome presently for special issues on Psychophysiological Approaches to Post Traumatic Stress Disorder (PTSD), Part II, scheduled for Summer 2009, and Advances in the Assessment and Treatment of Traumatic Brain Injury (TBI) for Fall 2009. Both of these special issue topics are timely because of the numerous returnees from the Iraq and Afghan conflicts suffering from PTSD or TBI or too often from both disorders. Articles are also welcome for the Winter 2009 issue which will be dedicated to Biofeedback Applications in Medical Settings. Proposals and Abstracts are also invited for additional topics for future special issues of Biofeedback.