

# Why You NEED a qEEG if Considering Psychiatric Medications

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Are you or someone you know currently taking or even thinking about taking psychiatric medications? If so then you definitely need to read this!

Did you know that currently there are no good lab tests that your doctor can use to know what psychiatric medications may work for you? Often, decisions are made depending on questions asked in the office and based on your intake forms. Occasionally, there may be a questionnaire to fill out that may help narrow your diagnosis, however it doesn't tell us anything about what your unique brain patterns would look like and how you might respond to treatment. The big problem with this is that not everyone's brain presents symptoms the same way. Let me elaborate....for one person what may look like ADHD on paper may present like anxiety to someone else. So you then go in to your provider to describe your symptoms, which meet the criteria for anxiety, but in reality your brain looks like it had ADHD! You then take your anxiety medication and guess what... your symptoms worsen!

This can be even more complex when one person has multiple diagnoses. We all know people with several diagnoses right? Statistically speaking, the more providers you see the more likely you are to end up with more than one label. For example, depression is often accompanied by anxiety. However in a qEEG, or brain map, they look completely opposite. Which means even if a medication helps one set of symptoms, its likely going to aggravate the other.

Wouldn't it be nice to know this information beforehand? Perhaps save time and money guessing which will work. Maybe even rule out if medications would help at all! Or possibly see if your symptoms are not related to your brain patterns altogether, but rather lifestyle issues which require a totally different type of treatment.

Let's go over a couple examples. The first person, we will call her Sally, came to our center after battling years of debilitating anxiety. Sally had even been treated in residential treatment settings her anxiety was so bad. When asked to review her qEEG we were surprised to find that she did not have any patterns of anxiety. Rather, she had patterns commonly seen in patients with ADHD, and lots of them. Those patterns were creating a state of overwhelmedness which she described as anxiety, but which is treated much, much differently. Contrary to previous attempts,

she was put on an ADHD medication and after several days was doing significantly better. To this day she continues to improve, but had she been treated again for her “anxiety” I’m confident she would still be struggling.

Suzie was a woman who suffered from depression her whole life. Suzie had been on many antidepressants and other classes of medications without benefit. After completing her qEEG analysis we expected to find 1 of 2 typical depression patterns. However, much to our surprise we found no patterns of depression at all in her EEG! Everyone who had seen her would agree that clinically, Suzie was depressed. However the cause was external, not a brain problem and therefore no medications would be of benefit. After exploring further it was uncovered that she was experiencing significant trauma in her life that she had never shared, and she is now working through that with therapy and has been tapered off all medications.

We can recall many cases of children with ADHD who have symptoms of ADHD but brain patterns that do not respond well to typical ADHD medications. Knowing this information ahead of time can save years of trial and error as well as needless suffering when a medication causes side effects. Furthermore, we are quickly able to identify who would respond well and treat them promptly.

These stories above are not isolated situations. These are reports we hear every day. By using objective measures in a qEEG, we are able to assess individual’s unique brain patterns with a level of accuracy previously unavailable to mental health professions. Now you may be asking yourself why haven’t you had this done before or why has no one ever mentioned this? Well, it’s likely for two reasons. One, the technology is relatively new and not widely available to do a full qEEG in a clinical setting. Also, because the suggestions made after the qEEG data is gathered is based on our own experiences in our clinical setting based on reviewing thousands of qEEGs, patient charts, and cases. We tirelessly review data and assess who does and who doesn’t respond to various treatments and it’s from this information we are able to narrow down your unique treatment options. We are one of only a small handful of clinics worldwide that are able to use this data in this manner.

Even if you are not currently being treated by our team, we are still able to do a qEEG with you. Afterwards, we send the report to your prescribing physician along with our suggestions or you have the option to meet with one of our prescribers. No referral is needed. If you have any questions please ask to set up a complimentary consult to see if you or someone you know may benefit from qEEG.