

PARKER BIO

MAY 2018

Dr. Charles Parker is on a mission to address psychiatric treatment failure by democratizing advanced brain and mind information through lessons for our increasingly curious, concerned, and informed global citizenry. An enlightened public will significantly improve treatment outcomes as they challenge misinformation and conjecture.



Experience Matters

- Host at CoreBrain Journal, >200K Downloads, 97 Countries
- Best Selling Author
- Neuroscience Consultant, Child, Adolescent and Adult Psychiatrist at <http://CorePsych.com/evaluation>
- National Speaker & Consultant with several medical Fortune 500 companies for more than 20 years
- Three different psychiatric board certifications
- Registry as Authorized User with the Nuclear Regulatory Commission for SPECT Brain Imaging: 2003
- More than 45 years of active clinical psychiatric practice
- Functional medicine consultant and speaker for 14 years
- Parker is opinionated and articulate about the urgency for informed change. <http://corebrainjournal.com/about>
- CV: <http://corebrainjournal.com/cv>
- Interviews - Media: <http://www.corebrainjournal.com/core>

This Galileo Mind Moment

Mind care must now address compelling discoveries from laboratories, advanced technology, and new tools that remain underappreciated on the streets of global Anytown. The standard care of mind diagnosis by misinformed and insubstantial appearances is woefully outdated and contributes to pervasive psychiatric treatment failure. New technology changes the mind science game. The sun doesn't rotate around Rome, but without the technology of a telescope, it looks like it does. Denial of brain function reality distorts possibilities for informed recovery globally.

Why Now - Overview

Public dissatisfaction with psychiatric/medical care is pandemic, and almost everyone thinks that our only mind care resources are assessments through behavioral appearances followed by psychiatric medication assumptions based upon those reductionistic, oversimplified opinions that overlook advances in mind science. Critical thinking experts agree: <http://corebrainjournal.com/critical>

Why Now – Specifics: Inadequate Diagnosis

Outdated superficial behavioral labels, speculation, and misinformation are out. Hard data, mind science, and accurate biomedical measures are in – but not yet assimilated into the current standard of care.

If an eight grader can correctly identify a psychiatric diagnosis, then everyone is, by default, board certified in psychiatry. Too many physicians at *every* level of subspecialization, including psychiatrists, write for medications without any regular training updates on the commonplace, easily available basics of mind care, from drug interactions to more informed biomedical assessment tools.

Inaccuracy encourages stigma with the entire mind care process – now witnessed on national political scale.

Why Now – Specifics: Ineffective Treatment

These inadequate, often capricious diagnostic endeavors not only often miss the mark, but they also encourage mind-treatment approaches too often characterized by whimsy, denial, and caprice. The ubiquitous intervention strategy today for treatment failure is more medications, different drugs - with a pervasive inability to identify comorbid contributory biomedical conditions.

Why - Mind Science Example: More Than “ADHD”

The most compelling example of diagnostic imprecision and inadequacy is Attention Deficit Disorder.

- The human cognitive brain is far more complicated than the superficiality of hyperactive or inattentive appearances.
- Almost every person suffering today with ADHD is treated using those insufficient conclusions while practitioners miss fundamental questions of brain function and cognition/thinking.
- The global standard of care today involves the remarkable process of treating the most evident and pervasive thinking problems *without* thinking about thinking.
- Nuances of context and changing realities found in measuring Dynamic Executive Function [the mother of ADHD] remain left behind while seeking a categorically limited, fixed, reductionistic diagnosis that continues to occur in the context of dynamic biomedical reality with various conditions at different times.
- These striking, functional inadequacies of the current system leave thousands untreated, mistreated and disappointed with psychiatric care. It bears repeating: this is a global problem.
- Cognition, cognitive balance, and cognitive synchrony in the context of changing reality serve as the basis of our evolution as an animal species.

- Cognitive markers always arise for self-management in skill sets, efficiency, and leadership. Executive function, self-management, involves excellent cognitive timing in the face of changing reality.
- If these glaring examples of diagnostic and treatment inadequacy continue to take place regarding the ubiquity of executive function, then consider the pervasive developmental arrest associated with diagnoses such as depression, anxiety, and mood disorder.
- These widespread maladaptive trends do encourage entropic consequences for humankind.

What & How: CoreBrain Journal Guest Examples Include:

- Daniel Schmachtenberger – Actionable neuroscience for improved mind interventions at Neurohacker:
<http://corebrainjournal.com/084>
- Dr. William Walsh – Methylation measures for more predictable, biomedically measured treatments:
<http://corebrainjournal.com/025>
- Dr. Lawrence Afrin – Mast Cell Activation Syndrome issues serve as a marker for immune system challenges:
<http://corebrainjournal.com/028>
- For Veterans and their families – Expert commentary from international experts on trauma, combat stress, TBI -
<http://corebrainjournal.com/vets>

What & How: Parker’s YouTube Channel:

- Over 90 Teaching Videos: <http://youtube.com/drcharlesparker>

What & How: Parker’s Recent Book:

- *New ADHD Medication Rules – Brain Science & Common Sense* – Global Amazon Link: <http://geni.us/adhd>
- *New Rules* documents specific strategies to encourage an improved, more scientific diagnostic and treatment structures for the informed use of ADHD medications.
- *New Rules* serves as a gateway to understand and actively correct the international challenge of misdiagnosis and mistreatment for ADHD/Executive Function challenges.
- The current standard of care encourages medications for thinking without thinking about, or targeting, thinking.
- *New Rules* serves as an important signpost for the biomedical changes now taking place globally with outdated diagnostic and treatment protocols.

Team Connections

- How: COO Tiffany Isaacson – tisaacson@corebrainjournal.com
- Professional Guest at CoreBrain Journal:
<http://corebrainjournal.com/guest>