THE RECOVERY - STRESS STATE



Flotation Therapy

Flotation-REST: Restricted Environmental Stimulation Technique

REST environments drastically reduce environmental stimulus

- Light minimization (low level LED if desired for comfort)
- Sound minimization (relaxing 'spa music' if desired)

RECOVER

- *Temperature*: Water and ambient air = skin temperature
- **GRAVITY** minimization: >900 pounds of Epsom salt for complete flotation







Flotation Therapy - Mechanisms

http://time.com/floating/



Central effects of floatation therapy explored using functional neuroimaging



Justin S. Feinstein

Laureate Institute for Brain Research, USA E-mail address: jfeinstein@libr.net.





Flotation Therapy - Mechanisms

Central effects of floatation therapy explored using functional neuroimaging



Justin S. Feinstein

Laureate Institute for Brain Research, USA E-mail address: jfeinstein@libr.net. **Methods:** 40 healthy participants underwent a baseline fMRI brain scan prior to being randomized into one of two conditions: floatation therapy or an active comparison condition. Each condition had participants float supine for 90 min on three separate occasions. Immediately following the 3rd float session, participants underwent a second brain scan. During each brain scan, four separate tasks were conducted and analyses assessed for Group X Time interactions (p < .05) during resting state functional connectivity, interoceptive attention, as well as emotion and reward processing.

Results: In relation to the active comparison condition, floatation therapy significantly increased subjective levels of serenity and relaxation while decreasing feelings of stress and anxiety. Moreover, rather than depriving the senses, it was found that floatation therapy significantly enhanced interoceptive sensations, especially for the heartbeat and the breath. The degree of internal sensory enhancement experienced while floating was highly correlated with activation in the insular cortices during a visceral interoceptive attention task.

Conclusions: Floatation therapy appears to increase interoceptive awareness and subjective relaxation, while decreasing both stress and anxiety. These preliminary fMRI results suggest that the internal sensory enhancement experienced while floating is related to activation changes in the insular cortices. Future work aims to explore whether these neural changes are evident in clinical populations with anxiety.



Eliciting the Relaxation Response With the Help of Flotation–REST (Restricted Environmental Stimulation Technique) in Patients With Stress-Related Ailments

Sven Å. Bood, Ulf Sundequist, Anette Kjellgren, and Torsten Norlander *Karlstad University*

This study aimed to investigate long-term effects of the flotation-REST (restricted environmental stimulation technique) 4 months after treatment. Seventy patients, 54 women and 16 men, participated, diagnosed as having stress-related pain. Twenty-six participants had also the diagnosis of burnout depression. Participants were randomly assigned in equal numbers to either a control group or a flotation-REST group and participated in a total of 12 flotation–REST or control sessions. Results indicated that pain areas, stress, anxiety, and depression decreased, whereas sleep quality, optimism, and prolactin increased. Positive effects generally maintained 4 months after treatment, but prolactin returned to initial levels. It was concluded that flotation tank therapy is an effective method for the treatment of stress- related pain.

RECOVER

	m (Optimism) B	efore and After Group (Contro	s) for Sleep Qua Control or Flota ol, Flotation–RE sed, Depressed)	ation Treatment	(Time 1-2)
	Con	trol	Flotation-REST Tim		Time
Variable	Nondepressed	Depressed	Nondepressed	Depressed	Before & After
Sleep 1	51.89 (26.27)	61.27 (16.88)	46.71 (24.23)	34.00 (15.92)	49.28 (23.47)
Sleep 2	56.53 (22.79)	55.53 (21.43)	59.04 (22.65)#	42.82 (30.7)#	55.00 (23.86)
Optimism 1	21.89 (4.05)	23.07 (4.53)	20.63 (3.97)	16.73 (5.53)	20.88 (4.75)
Optimism 2	22.42 (4.54)	22.13 (4.36)	21.88 (4.12)#	19.09 (5.03)#	21.64 (4.49)

 Table 3. Means and (Standard Deviations) for Stress, Energy, Anxiety, Depression Before and After Control or Flotation Treatment (Time 1–2) With Regard to Group (Control, Flotation–REST) and Diagnosis (Nondepressed, Depressed)

Control		Flotation-REST		Time	
Variable	Nondepressed	Depressed	Nondepressed	Depressed	Before & After
Stress 1	2.04 (0.87)	2.14 (1.10)	2.19 (1.01)	2.83 (0.85)	2.24 (0.98)
Stress 2	1.94 (0.95)	2.03 (0.71)	1.51 (0.99)#	1.95 (1.15)#	1.80 (0.97)*
Energy 1	3.30 (1.02)	3.12 (1.20)	3.11 (0.81)	2.77 (0.96)	3.11 (0.98)
Energy 2	3.11 (0.99)	3.23 (0.87)	3.15 (0.78)	2.83 (0.64)	3.10 (0.83)
Anxiety 1	7.74 (3.48)	6.80 (2.98)	7.00 (3.62)	10.91 (3.65)	7.78 (3.67)
Anxiety 2	7.26 (4.20)	8.73 (7.52)	5.48 (3.27)#	7.18 (3.63)#	6.93 (4.82)
Depress 1	3.79 (3.34)	5.13 (3.16)	4.08 (2.89)	10.09 (4.99)	5.19 (4.04)
Depress 2	3.47 (3.01)	5.47 (4.84)	3.24 (2.67)#	6.18 (3.43)#	4.24 (3.57)*

Note. Significant effects for Time (p < .05) are indicated in the After conditions with *. Significant interaction effect for Time × Group (p < 0.05) is indicated in the Flotation–REST and After conditions with #.

Float therapy **significantly reduced pain, stress, anxiety, depression**. Increased Optimism, sleep. **Results maintained after 4 months** with no additional treatments with 48% reduction in pain, 23% increase in optimism



Flotation Therapy - Health and Wellness

Methods: Sixty-five participants (14 men and 51 women) who were all part of a cooperative-health project initiated by their individual companies, were randomized to either a wait-list control group or a flotation tank treatment group where they participated in a seven weeks flotation program with a total of twelve flotation sessions. Questionnaires measuring psychological and physiological variables such as stress and energy, depression and anxiety, optimism, pain, stress, sleep quality, mindfulness, and degree of altered states of consciousness were used. Data were analysed by two-way mixed MANOVA and repeated measures ANOVA.

Results: Stress, depression, anxiety, and worst pain were significantly decreased whereas optimism and sleep quality significantly increased for the flotation-REST group. No significant results for the control group were seen. There was also a significant correlation between mindfulness in daily life and degree of altered states of consciousness during the relaxation in the flotation tank.

Conclusions: It was concluded that flotation-REST has beneficial effects on relatively healthy participants.

Variable	Before	After	Difference
SE Stress control	1.84 (1.15)	1.89 (1.04)	+ 0.05 n.s
SE Stress floating	1.86 (1.07)	0.95 (0.84	- 0.91 **
SE Energy control	3.44 (0.70)	2.63 (0.96)	- 0.81 n.s
SE Energy floating	3.14 (0.66)	2.46 (1.02)	- 0.74 n.s
HADS Anxiety control	7.03 (3.46)	6.96 (3.52)	- 0.07 n.s
HADS Anxiety floating	7.92 (4.61)	4.28 (3.61)	- 3.64 **
HADS Depression control	4.00 (3.41)	4.30 (2.58)	+ 0.30 n.s
HADS Depression floating	4.42 (3.47)	2.25 (2.53)	- 2.17 **
LOT optimism control	20.96 (5.05)	20.93 (5.76)	- 0.03 n.s
LOT optimism floating	19.81 (5.29)	23.28 (4.26)	+ 3.47 **
SQ Sleep Quality control	25.22 (9.98)	25.33 (8.87)	+ 0.11 n.s
SQ Sleep Quality floating	23.72 (7.55)	29.69 (8.44)	+ 5.97 **

Table 1 Means (and Standard deviations) for the

Table 2 Means (and Standard deviations) for the pair	ı.
variables before and after the treatment period	

Variable	Control group	Flotation-REST group
VAS Worst pain before	64.76 (25.14)	64.29 (28.12)
VAS worst pain after	55.15 (28.97)	39.70 (32.11)
VAS normal pain before	30.28 (21.92)	27.32 (20.12)
VAS normal pain after	25.68 (17.15)	15.00 (17.17)

RESEARCH ARTICLE

Beneficial effects of treatment with sensory isolation in flotation-tank as a preventive health-care intervention – a randomized controlled pilot trial

Open Access

Anette Kjellgren^{1,2*} and Jessica Westman¹

WVURockefeller NeuroscienceInstitute

** = significant effect, p < 0.001; n.s = non significant effect.



Flotation Therapy - Motor Control

Enhancing Perceptual-Motor Accuracy Through Flotation REST

Peter Suedfeld, Drew E. Collier, and Bruce D.G. Hartnett University of British Columbia

Table 1

Baseline and Postsession Performance (in mm)

	Baseline		Postsession		% change	
Group	м	SD	м	SD	in accuracy	
I	106	26	108	30	- 1.9	
R	93	16	82	25	+ 11.5	
RI	85	28	75	28	+ 13.3	
С	86	23	87	25	- 0.5	

Note. Scores represent distance from bull's-eye; therefore, lower scores (but higher percentage *changes*) indicate higher accuracy.

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Previous studies using flotation Restricted Environmental Stimulation Technique (REST) to enhance motor performance have focused on relatively gross arm and leg movements and have combined the technique with a variety of imaginal practice and relaxation training procedures. This study independently varied REST and an imaginal training and relaxation script to improve accuracy among novice, intermediate, and expert darts players. **REST by itself and REST combined with the script were equally effective in enhancing performance** (M change about -12%). The imagery script alone and a notreatment control condition resulted in no change on test-retest measures. The results indicate that in the area of perceptual-motor coordination, REST is not merely a potentiator of other techniques, but a useful and efficient unimodal intervention, which takes a short time and does not require further rehearsal or repetition.



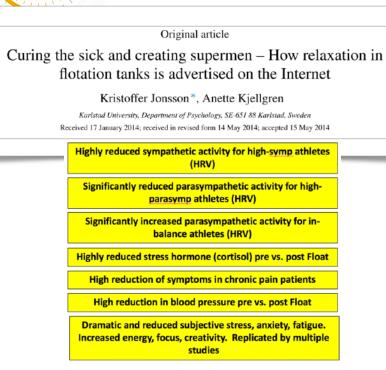
Effects of Relaxation Associated with Brief Restricted Environmental Stimulation Therapy (REST) on Plasma Cortisol, ACTH, and LH

John W. Turner, Jr., and Thomas H. Fine Medical College of Ohio

Restricted Environmental Stimulation Therapy (REST), which involves placing an individual into an environment of severely reduced stimulation for brief periods, has been subjectively reported to produce deep relaxation. The present study determines the effects of REST-assisted relaxation on plasma cortisol, ACTH, and luteinizing hormone (LH). These parameters were also measured in a group exposed to a similar relaxation paradigm, but without REST (non-REST). Each subject experienced two baseline sessions (1 and 2), four REST (or non-REST) relaxation sessions (3, 4, 5, 6), and two follow-up sessions (7 and 8). Pre- and postsession plasma hormone levels were measured in sessions 1, 2, 5, and 8. Both REST and non-REST subjects reported that the experience was relaxing. During the treatment period (session 5) preto postsession changes in cortisol and A CTH, but not in LH, were significantly greater for the REST group than for the non-REST group. Plasma cortisol level also decreased across sessions in the REST group, with levels in sessions 5 and 8 significantly lower than the baseline (sessions I and 2). Non-Rest subjects showed no change in plasma cortisol across sessions. No significant change in plasma ACTH or LH occurred across sessions in the REST or non-REST groups, although ACTH showed a decreasing trend. These data demonstrate that repeated brief RESTassisted relaxation produces a relaxation state associated with specific decreases in pituitary-adrenal axis activity.



Flotation Therapy - Health and Wellness



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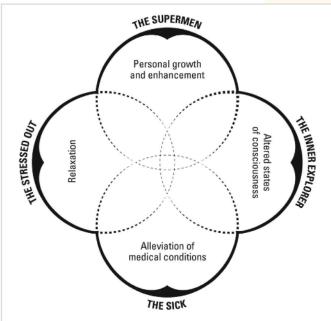
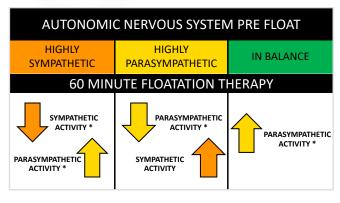


Fig. 1. Figure illustrating how the advertisement seemed to target four different interest groups, each corresponding to a theme that resulted from the data analysis. In addition the figure shows that the themes overlap, indicating that the described effects within a certain theme might benefit effects described in the other themes. This highlighting floating as a holistic treatment affecting different physiological and psychological mechanisms. RECOVER

Flotation Therapy - Study: ANS Balance



High Sympathetic Going in? Massive Reduction in 60 minutes

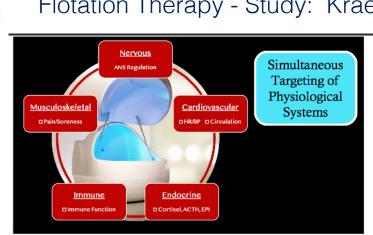
Avg_pre	Avg_post	%change	Pvalues
9.58±16.62	11.82±16.47	23.382	0.359
3.1±1.07	4.84±1.44	56.129	0.000
4.57±1.86	5.95±1.41	30.197	0.000
3.53±1.1	4.5±1.11	27.479	0.000
5.21±1.66	5.62±1.74	7.869	0.116
167.48±4.1	169.15±3.71	0.997	0.000
110.39±22.64	110.87±23.09	0.435	0.627
138.43±4.73	138.23±4.98	-0.144	0.630
219.03±91.84	215.34±90.33	-1.685	0.569
3.6±1.54	3.53±1.56	-1.944	0.597
4.49±1.16	4.55±1.1	1.336	0.528
0.17±0.05	0.26±0.1	52.941	0.000
53.31±12.08	38.09±13.34	-28.550	0.000
266.91±234.52	130±178.93	-51.294	0.001
2.27±1	2.08±0.8	-8.370	0.217
0.01±0.01	0.03±0.02	200.000	0.000
36.97±11.15	61.46±24.82	66.243	0.000
40.87±19.08	67.54±31.35	65.256	0.000
31.91±14.63	53.13±24.85	66.500	0.000
472.94±372.28	1611.1±1770.98	240.656	0.000
2.54±3.28	2.29±4.14	-9.843	0.684
184.16±174.56	687.81±1182.57	273.485	0.002
42.79±21.08	46.21±22.26	7.993	0.336
206.44±168.32	768.75±959.22	272.384	0.000
57.21±21.08	53.79±22.26	-5.978	0.336
	9.58±16.62 3.1±1.07 4.57±1.86 3.53±1.1 5.21±1.66 167.48±4.1 110.38±22.64 138.43±4.73 219.03±91.84 3.6±1.54 4.49±1.16 0.17±0.05 53.31±12.08 266.91±234.52 2.27±1 0.01±0.01 36.97±11.15 40.87±19.08 31.91±14.63 472.94±372.28 2.54±3.28 42.79±21.08	9.58±16.62 11.82±16.47 3.1±1.07 4.84±1.44 4.57±1.86 5.95±1.41 3.53±1.1 4.5±1.11 5.21±1.86 5.62±1.74 107.48±4.1 169.15±3.71 110.39±22.64 110.87±23.09 138.43±4.73 138.23±4.98 219.03±91.84 215.54±90.33 3.6±1.54 3.53±1.56 4.49±1.16 4.55±1.1 0.17±0.05 0.26±0.1 0.17±0.05 0.26±0.1 266.91±234.52 130±178.93 2.27±1 2.08±0.8 0.01±0.01 0.03±0.02 36.97±11.15 61.46±24.82 40.87±19.08 67.54±31.36 31.91±14.63 53.13±24.85 472.94±372.28 1611.1±1770.98 2.54±3.28 2.29±4.14 184.16±174.56 687.81±1182.57 42.79±21.08 46.21±22.66	$\begin{array}{cccccccccccccccccccccccccccccccccccc$

High ParaSympathetic Going in? Significant Reduction in 60

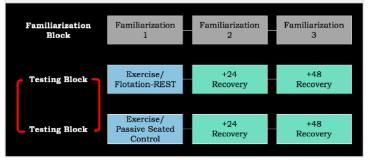
Para minutes				
Ome			0.020	0.419
Stress index	6.06±1.26	5.78±1.17	-4.620	0.5
Fatigue	6.33±0.84	6.39±1.29	0.948	0.886
Adaptation reserves	5.22±0.81	5.5±1.15	5.364	0.439
CNS	6.5±0.86	6.17±1.42	-5.077	0.421
HRat anaerobic threshold	171.12±3.84	171.65±4	0.310	0.518
Aerobic status index	113.67±11.03	110.95±13.93	-2.393	0.263
Anaerobic status index	138.49±5.07	138.5±4.9	0.007	0.985
Metabolic reaction index	203.88±84.84	243.54±135.72	19.453	0.225
MRI grade	3.22±1.59	3.67±1.53	13.975	0.227
Metabolic grade	4.28±1.11	4.43±0.87	3.505	0.554
Vagus	0.47±0.1	0.38±0.11	-19.149	0.002
Sym Reg	21.78±5.26	25.83±8.91	18.595	0.082
Tension index	24.33±9.99	39.44±25.92	62.104	0.018
Aperodic	1.56±0.64	1.7±0.61	8.974	0.408
Aspirate	0.05±0.03	0.04±0.02	-20.000	0.244
SNNN	120.62±29.61	98.71±32.64	-18.164	0.024
SDSD	148.95±52.53	129.06±57.56	-13.353	0.11
RMSSD	117.5±41.43	102.22±45.9	-13.004	0.129
Total Power	5390.03±4019.52	3961.43±2712.84	-26.504	0.142
LAHE	1.5±1.49	1.25±1.13	-16.667	0.566
HF	2185.18±1794.44	1863.88±1300.79	-14.704	0.523
HFn.u.	47.44±16.41	53.28±20.34	12.310	0.256
LF	2606.5±2486.69	1739.14±1689.48	-33.277	0.11
LFn.u.	52.56±16.41	46.72±20.34	-11.111	0.256

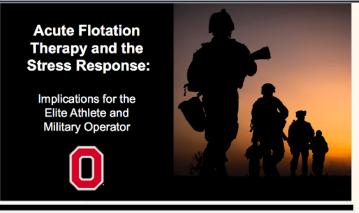
In Balance Going in? Come out in balance, but with a significant Parasympathetic Boost in 60 minutes

24.9% Reduction in blood Cortisol pre/post float (p<0.05)!

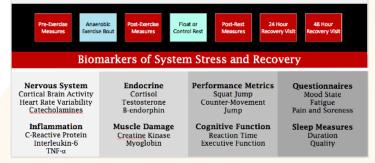


The Effects of Acute Flotation Therapy on Recovery from Intense Anaerobic Exercise





The Effects of Acute Flotation Therapy on Recovery from Intense Anaerobic Exercise



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Flotation Therapy - Study: Kraemer Lab @ Ohio State

RECOVER

Flotation Therapy - Studies at the RNI

Mechanistic Study of Flotation Therapy: From Neural to Blood Biomarkers

Athletes / Military

Flotation Therapy and Effects on Sleep in Elite Performers Individualized Signature of Recovery in Elite Performers Flotation Therapy for Concussion Treatment



Flotation Therapy for Clinical Pain Patients Flotation Therapy for Reduction of Inflammation Biomarkers

Population

Flotation Therapy and Effects on Sleep in General Population Flotation Therapy for Stress Reduction in Executive Health and Medical Students