

MOXO NEWS

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The importance of getting diagnosed & treated for ADHD especially now in times of Covid19.

Early diagnosis of ADHD which has been cited important in many papers but has become even of more important now. Early detection and treatment are highly correlated with reduced risk of contracting Covid19 and with reducing the severity of if Covid19 is contracted.

cont'd p.2

Israel has been lucky, with its highly computerised HMOs and their well-organized regional medical records, the vaccination process proceeded with alacrity and uncharacteristic efficiency resulting in the country quickly heading back to pre Covid19 era normalcy.

Considering Israel's population of 9.2 Million, the numbers tell us quite a story. Based on Corona worldometer's data Israel positioning in Covid19 cases per 1 million is 16th in the world[1]. Although Israel's population is small and young (the median age is 30), Israelis contracted the disease in higher proportion than most countries with a much larger and older population. While Covid19 is most dangerous for the elderly we also see highly alarming data when looking at the ADHD population segments.

On May 8th 2021, Dr Eugene Merzon, MD a certified ADHD Diagnostician and the head of department of managed and digital care of Leumit health service in Israel spoke at the 8th world congress of ADHD. Dr Merzon, stating that a high percentage of the ADHD patients were testing positive for Covid19. He postulated that ADHD patients may find it harder to comply with rules and social distancing, increasing their risk of contracting the disease. He added that wearing masks is more challenging for people with sensory difficulties.

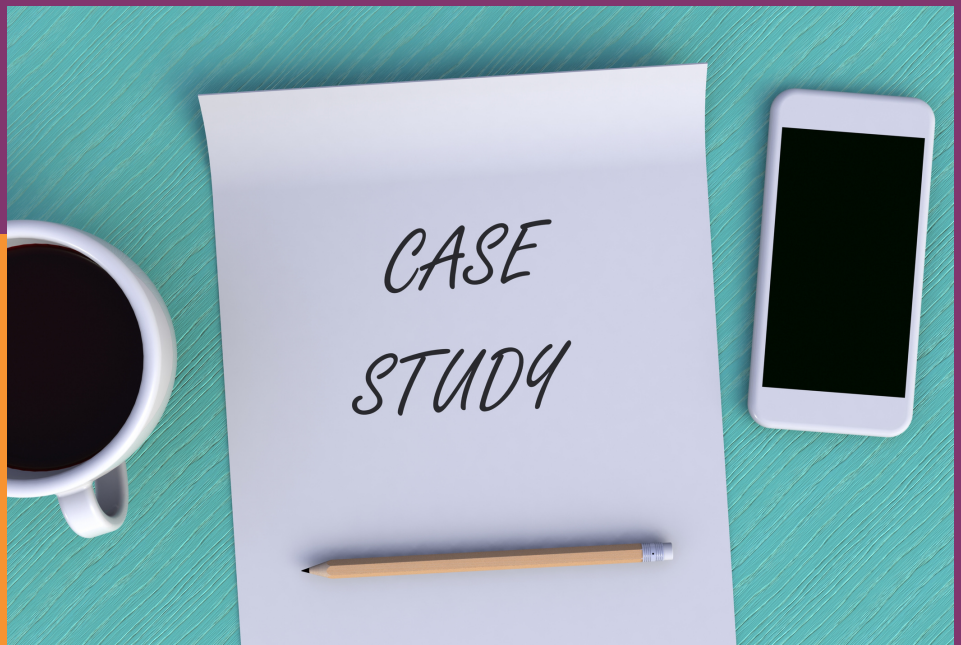
Dr Merzon together with Dr Iris Manor and their colleagues conducted a study of ADHD as a risk factor for infections with COVID-19, in which they stated that of 1,416 people testing positive for Covid19 they found mainly younger males of lower SEC background with significantly low propensities of comorbidities but higher proportions of ADHD. Their findings were that 16.22% (230) of the diagnosed with Covid19 had ADHD[2], while of those testing negative for Covid19 only 11.65% tested were ADHD patients.

For Full article



[1] <https://www.worldometers.info/>

[2] <https://pubmed.ncbi.nlm.nih.gov/32697120/>



In every newsletter we will present our interpretation of a submitted report.

we invite clinicians to submit interesting reports to us for interpretation - each new letters we will pick one and present it. Others can be found in our website.

Case Study:

Sluggish cognitive tempo submitted by Dr. Sarah Hermeti of the Cognetica Clinic - Israel

MOXO expert Interpretation: Clinical Case

Short forms used: A – Attentive, B – Timeliness, H – Hyperactivity, I – Impulsivity

Keywords: false positive, attentional compensation mechanism, sluggish cognitive tempo, cognitive function, visual distractors.

MOXO DCPT DIAGNOSIS

CASE STUDY CURTOESY OF DR. SARAH HERMETI, ISRAEL

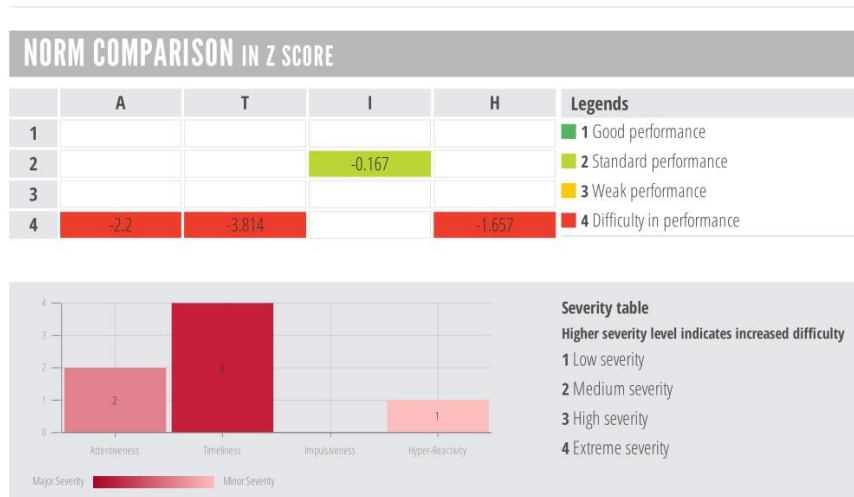
BACKGROUND:

Patient age: 41, came for a diagnosis pertaining to attentional difficulties.

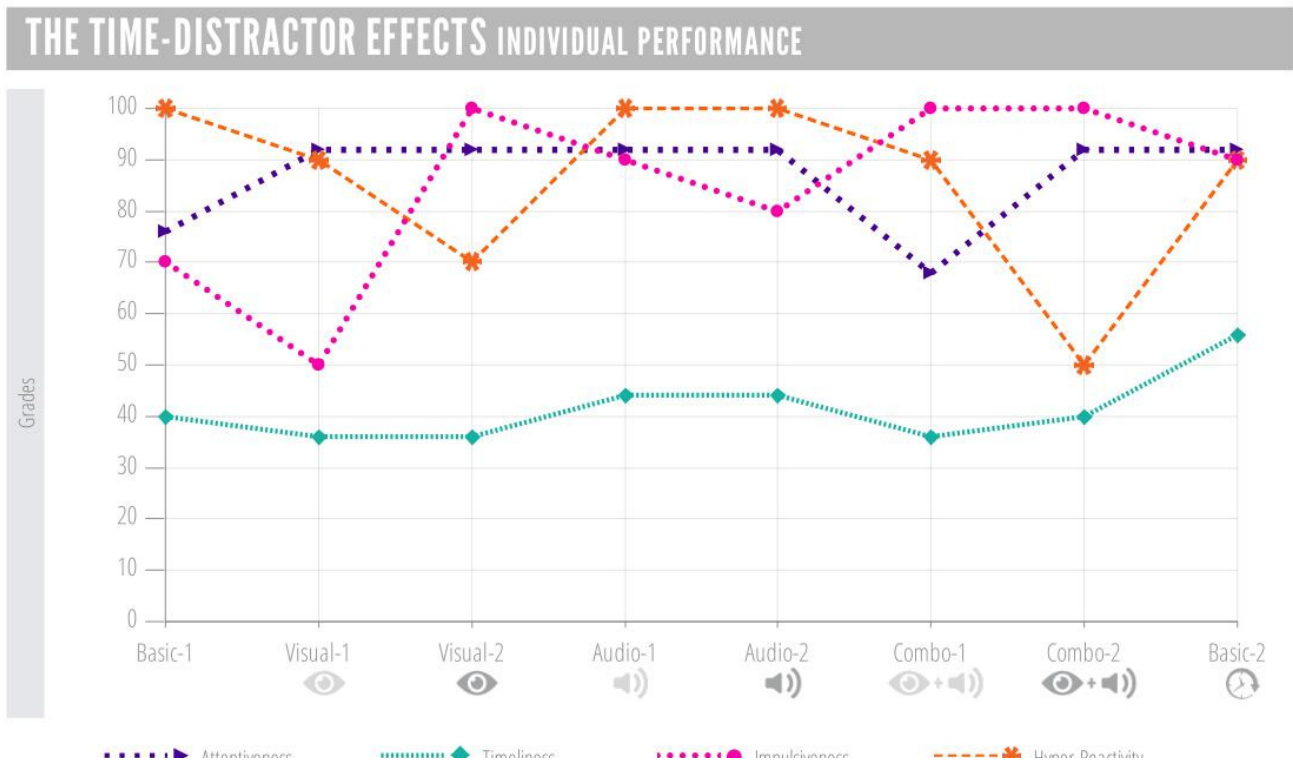
SCREENING:

When observing the Norms Comparative Chart, we notice severe attentional difficulties. These difficulties are displayed in three red indices (A, T & H). As a rule, the more red indices displayed the higher the propensity that severe attentional disorders will be displayed, moreover when we see a coupling of abnormal results in indices H / I together with those of A / T, the chances of this being a false positive are low.

The relatively low T result may also point to difficulties in cognitive function and to sluggish cognitive tempo, we would recommend to further investigation to this, especially if the patients complain about such difficulties.



When observing the Patient Performance Chart, we can see that when exposed to a heavy load of visual distractors, the patient's performance is substantially affected, in the manifestation of hyper-reactive tendencies. In fact, the chart depicts an attentional compensation mechanism.



Legends

Test level	Distractor modality	Distractor load	
Basic-1	None	None	Baseline stage
Visual-1	Visual	Minor	Performance under visual distractors
Visual-2	Visual	Major	
Audio-1	Auditory	Minor	Performance under auditory distractors
Audio-2	Auditory	Major	
Combo-1	Visual & Auditory	Minor	Performance under high cognitive load
Combo-2	Visual & Auditory	Major	
Basic-2	None	None	Performance over time

When the A index is low, the Hyper-reactive behavior increases – seen as a reduced score in the H index in the chart. The patient is (concisely or subconsciously) using strategies such as doodling, leg bouncing, head movements or other to achieve high attentiveness levels. The way we can observe this in the chart, is that when index A index began on a low score (75) and in the H index was high (100), the patient became more hyper-reactive H index reduced to a 90 score, while the A index increased to a 90 score and remained there. The hyperactivity slowly stopped (meaning returned to its previous level).

The moment it became difficult for the patient to maintain a high attentive level (see phase 6 in the test) hyper-reactive behavior reappeared which was followed with a rise in index A back to a 90 score. Another clue that this is not a case of distraction, is in the I index scores, the patients' performance improved when exposed to situations of high loads of distraction (phases 2,6 and 7 of the MOXO™ d-CPT).

SUMMARY:

We clearly see a patient that is having attentional difficulties, and there is a high probability that this a case of an attentional disorder, therefore there is need to utilize additional tools to substantiate the diagnosis.

The patient is probably aware to their difficulties and is utilizing compensation mechanisms to maintain high attention.

We recommended to praise the patient for using these tools and suggest more tools to assist them.

WE INVITE CLINICIANS TO SUBMIT INTERESTING REPORTS TO US FOR INTERPRETATION. WE POST ONE SELECTED CASE STUDY IN EACH NEW LETTER. THE OTHERS CAN BE FOUND IN OUR WEBSITE.





AGORA

MOXO Expert Community

Neurotech Solution is proud to announce the official launching of the AGORA MOXO community of experts

We place a lot of importance on MOXO's clinical community, by furthering and deepening our scope through clinical researches, or through investigating special clinical cases our clinicians share with the assistance of the scientific board.

We understand the importance of knowledge sharing and have therefore established AGORA – this is an experts community led by the AGORA scientific board with the aim of bringing minds together to further research, diagnostic techniques and treatment methodology of attentional difficulties.

Meet The AGORA Scientific Board



Dr. Sam Goldstein
USA



Prof. Baris Topcular
Turkey



Dr. Itai Berger
Israel



Prof. César Soutullo
MD, PhD, USA

Save the Date:

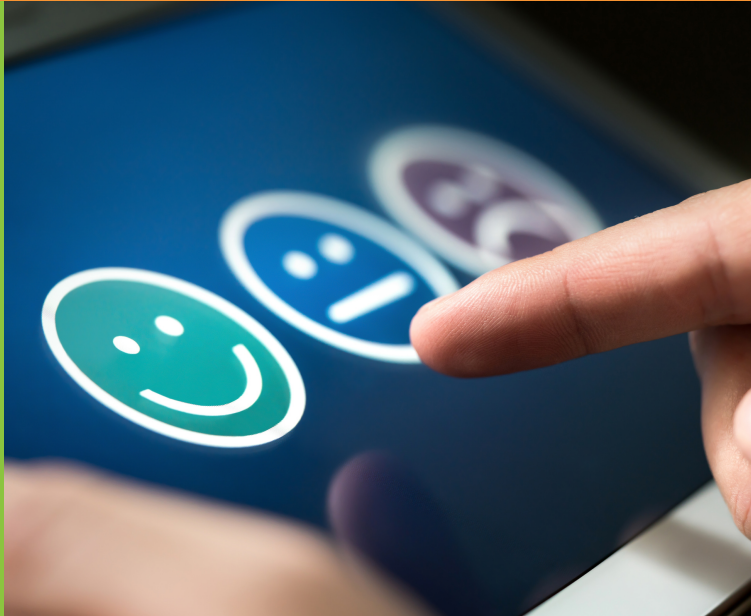
20.10.21

The 1st International AGORA Symposium

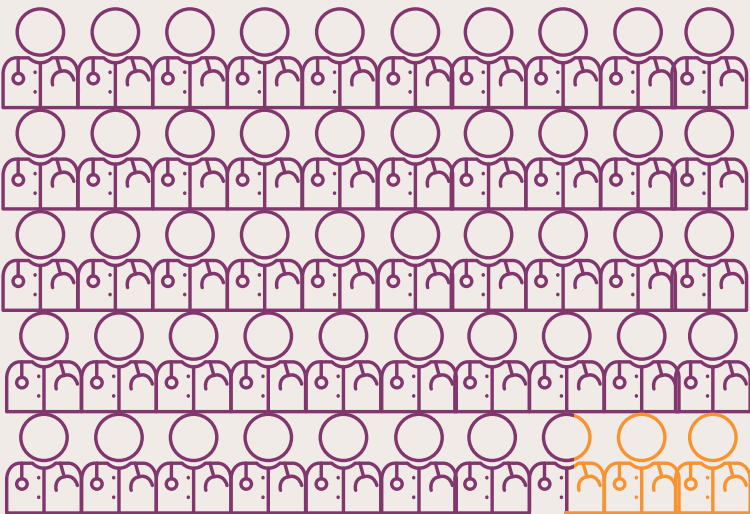
**Challenges in the Evaluation & Management of
Attentional Disorders in females**



Neurotech Solutions invited all clinicians to take part in a Customer Satisfaction Survey. We thank all of you who took part and are working on implementing requests as best we can - Curious to see the results?



MOXO d-CPT™ Customer Satisfaction Survey Results



95.1% of our Clinicians **would recommend MOXO d-CPT™ to their colleagues or friends.**

Clinicians choice of 3 favorite MOXO features



2. Our clinicians selected the **Gamified** feature to be one of biggest value adder of the MOXO



1. Our clinicians selected the **visual and auditory distractors** feature to be the biggest value adding feature of the MOXO d-CPT™

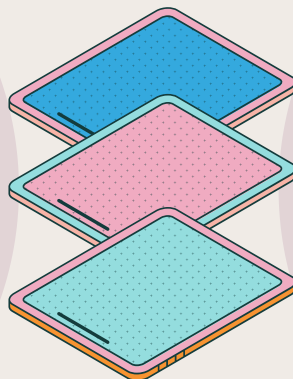
3. The CPT being **Good Value for money** was chosen to be the 3rd greatest feature of the MOXO d-CPT™

How easy is it to use MOXO dCPT™?

The MOXO system is easy to use

We work hard at translating our system & keeping it easy to use.

Its working - **78.78%** of our clinicians selected this to be our leading feature



The reports are easy to comprehend

We offer 3 basic reports

75.31% of our clinician selected our **easy to use reports** as one of our greatest feature!

Did you know that **MOXO HOME d-CPT™** is available to use at the convenience of your home.
All you need is: A PC with speakers, a quiet room & Internet connection



70% of our clinicians have been using MOXO home during the last year.

The best features they choose for the home test were
Ease of use & Ease of explaining the test to patients

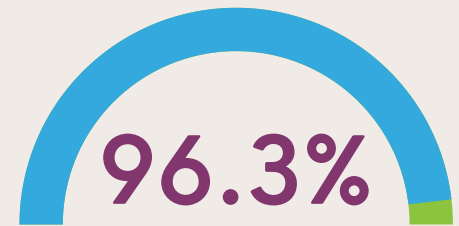
**96.3% of our clinicians said they were:
highly satisfied with MOXO overall!!**



We firmly believe that your platform has a lot of potential, and for us it has meant a radical change in patient management ”



**Prof. Dr. Alfonso Amado Puentes, MD, PhD,
Child Neurologist, Spain Dec-2020**



94% of our clinicians - Do not or rarely come across technical problems
72.8% said that all their issues were solved with 24 hours.



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Save the Date:

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The 1st International AGORA Symposium

Challenges in the Evaluation & Management of Attentional Disorders in females



"I would like to thank you for the work you have done in creating the **MOXO** testing system. I use it mainly with adults and it provides very important detail and insight into the presence or absence of ADHD symptoms. It also reveals specific information on sub-characteristics of the ADHD presentation.

Jim Chapman

Psychologist
Oct-2020
Newcastle New South Wales,
Australia



"I'm finding MOXO a useful component to my assessment in conjunction with other data. Some of my patients find a continuous performance task to be frustrating and stressful. The behavioural observations help me understand how they handle frustration"

Ari S. Yares, PhD., NCSP.

Potomac, MD, USA.
Feb-2021

