

# Revolutionize DMDD: *Neurological Hypothesis*

- DMDD is characterized by **abnormal electrical activity in the amygdala + lack of dopamine in the frontal lobe.**
- These conditions can be **treated with specific medications**
- **Anticonvulsants** (target abnormal activity in amygdala)
- **Amantadine** (or other agents that increase dopamine in frontal lobe)
- We call it “brain-based treatment”

# Revolutionize DMDD: *A Call to Action*

- **We exist** to ensure that more families can realize the goal of stability without losing years to ineffective treatment, or worse, never finding it at all.
- We share data and experiences, promote research, and educate communities in order to **bring peace to the lives of as many children and families with DMDD as possible.**
- It takes, on average, **17 years** for medical evidence to fully inform practice standards. Our children **can't wait that long.**

# Revolutionize DMDD: *The Road to Hope*

Hundreds of families have traveled a difficult, but strikingly similar path:

- **Failed attempts with antipsychotics**, and/or endure damaging side effects as well as the debilitating mental, physical and social impacts of living with **unmanaged DMDD**
- Found that many have had success using the **brain-based treatment** (previously referred to as “The Matthews' Protocol”)
- Succeeded in **convincing a provider** to try something different, despite a lack of rigorous scientific studies in any treatment for DMDD
- Experienced **transformational improvement**
- Asked “**Why don't more people know about this? Why was it so hard to get here?**”

\*see Testimonials for more information