CME / CE Activity Detail Page

IMMH 2026 - Enduring - Masters Events

Activity Date: October 15, 2026 - October 15, 2029
Activity Type: Enduring
CE: up to 45.25 total credits

JA-PARS Activity ID: 203768482
ACPE UAN - Pharmacists: JA4008385-9999-26-116-H99-P
ACPE UAN - Pharmacy Technicians: JA4008385-9999-26-116-H99-T

This activity offers 45.25 CE credit(s) for:

1. Physicians (*AMA PRA Category 1 Credit™*)
2. Nurses (ANCC NCPD)
3. Pharmacists (ACPE CPE)
4. Physician Assistants (AAPA Category 1)
5. Social Workers (ASWB-ACE)
6. Psychologists (APA CE)
7. Dietitians (CDR CPEUs)
8. Dentists (ADA-CERP CE)
9. Athletic Trainers (BOC CEUs)
10. Interprofessional Continuing Education (IPCE)
11. Other*

*All other attendees will receive an *AMA PRA Category 1 Credit™* participation certificate

This activity was planned by, and for, the interprofessional healthcare team.

FACULTY:

See the faculty in the disclosure section.

INSTRUCTIONS FOR LEARNING

This enduring activity allows mental health and allied healthcare professionals to explore the latest scientific evidence and clinical advances in integrative mental healthcare, with emphasis on whole-person approaches to the prevention, assessment, and treatment of mental health conditions. Content is delivered through recorded presentations, evidence-based lectures, case discussions, and panel discussions, allowing learners to engage with the material at their own pace. It spans the biological, psychological, social, and environmental factors that influence mental health, including nutrition and metabolic health, inflammation and the gut-brain connection, trauma, neurodevelopment and neurodegeneration, and lifestyle and functional approaches to care. This is a self-paced, enduring activity. To claim credit, learners must complete the content and the post-activity evaluation. Throughout this activity, learners will strengthen their ability to critically evaluate emerging evidence and integrate it into personalized, evidence-informed mental healthcare.

STATEMENT OF NEED

Mental health conditions are increasingly prevalent and complex, and many people continue to experience limited improvement from conventional approaches alone. A growing body of research is expanding understanding of the biological, psychological, social, and environmental factors that influence mental health, including nutrition, metabolism, inflammation, hormones, the gut-brain connection, trauma, neurodevelopment, neurodegeneration, and lifestyle. A practice gap exists between this rapidly developing evidence base and its application in routine clinical practice. Many healthcare professionals have limited formal training in these areas and may not consistently evaluate emerging research critically or translate it into safe, practical assessment and treatment approaches. As a result, opportunities to incorporate evidence-informed, whole-person approaches may be overlooked, leading to an over-reliance on symptom management rather than addressing the broader factors that shape mental health outcomes.

LEARNING OBJECTIVES BY SESSION:

An Introduction to the Internal Family Systems (IFS) Model - 1.25 CE - Dick Schwartz

After participating in this activity, learners will be able to:

1. Identify the core theory and principles of IFS as they apply to trauma, severe diagnoses, and other mental health presentations.
2. Describe how an IFS-informed lens can complement clinical decision-making, including with complex or treatment-resistant patients.
3. Recognise IFS as an internal attachment model, in which the Self serves as a secure inner attachment figure for a person's parts.
4. Develop an awareness of their own parts and how those parts shape the clinical or therapeutic encounter.

Mitochondrial Function, Mental Wellbeing and Hormones: A Vital Connection - 1 CE - Felice Gersh

After participating in this activity, learners will be able to:

1. Explain how changes in estradiol and progesterone can influence mitochondrial function and mental wellbeing in women.
2. Identify common mood, cognitive, and stress-related symptoms in menopause that may be linked to altered mitochondrial function.
3. Evaluate integrative strategies that may support mitochondrial function and mental wellbeing in midlife and menopausal women.

Beyond Medication: Integrative Strategies for Safely and Effectively Reducing or Eliminating Psychotropics - 1 CE - Leslie Korn

After participating in this activity, learners will be able to:

1. Identify the medical, psychological, developmental, cultural, and lifestyle factors to assess before initiating psychotropic medication reduction.
2. Apply trauma-informed, developmentally aware, and culturally responsive strategies to support clients safely and collaboratively throughout the tapering process.

3. Integrate targeted nutrition, mind-body practices, sleep optimization, and psychotherapy to reduce withdrawal-related distress, promote safety, and support long-term emotional resilience.

The Brain Medicine Revolution - Healing Brains Beyond Silos - 1 CE - James Maskell

After participating in this activity, learners will be able to:

1. Discover new models for understanding the health of the brain and the key drivers of dysfunction
2. The key studies revealing how relationships drive health habits that drive coherence of biological networks that support brain health
3. See examples of successful, new, peer-led relational healing from across medicine and mens work

Medicine for All People: Dance, Neuroscience, and Embodied Mental Health - 1 CE - Geeta Maker-Clark

After participating in this activity, learners will be able to:

1. Describe the neurobiological and psychological mechanisms through which dance and rhythmic movement may support mood, cognition, stress regulation, and social connection.
2. Evaluate the current evidence for dance-based interventions in the prevention and management of mental health and neurodegenerative conditions.
3. Experience and integrate simple embodied practices that support mental, emotional, and social well-being.

Decoding Brain Longevity: Why the Brain is the Missing Link in Longevity, Mental Health, and Chronic Disease - 1 CE - Eboni Cornish

After participating in this activity, learners will be able to:

1. Explain the brain's central role in longevity by identifying how brain health influences metabolic function, hormonal regulation, immune balance, behavior, and overall healthspan.
2. Recognize shared biological pathways linking mental health and chronic disease, including neuroinflammation, gut-brain dysfunction, chronic stress, environmental exposures, and metabolic dysfunction.
3. Apply a brain-centered, root-cause framework to clinical care to identify modifiable contributors to cognitive decline, psychiatric symptoms, and chronic

illness and develop strategies that support long-term brain and whole-body resilience.

GABA and Restoring Vagal Tone - 1 CE - Peter Bongiorno

After participating in this activity, learners will be able to:

1. Learn about the GABA molecule (structure and function) and how it is produced naturally in the body.
2. Review the anatomy and physiology of the vagus nerve and its relationship to GABA and the gut.
3. Learn which natural lifestyle, food, and supplemental supports can naturally raise GABA and support the healthiest vagal tone.

Food Therapy: An Overlooked Resource - 1 CE - Luis Mojica

After participating in this activity, learners will be able to:

1. You will be able to categorize foods based on their stimulating, depressing, or balancing effects.
2. You will learn a simple framework for accessing the underlying emotions beneath cravings.
3. You will learn how to read a glucose monitor so you can measure food-induced stress.

Slowing the Biology of Ageing: Tales of telomeres, trauma, and joy - 1 CE - Elissa Epel

After participating in this activity, learners will be able to:

1. Describe key mechanisms underlying biological ageing and rejuvenation, including the roles of telomere biology, epigenetic ageing, and mitochondrial function.
2. Explain how chronic stress, trauma, and positive emotions can influence mental and physical health, and the evidence linking psychological states with these biological pathways.
3. Identify evidence-informed practices that may support resilience, cellular health, and healthy ageing, while recognizing the limits of the applied interventions so far.

Reframing Mental Illness: NLRP3 and the Systems Biology of Neuroinflammation - 1 CE - Dr. Bob Rountree

After participating in this activity, learners will be able to:

1. Describe the role of the NLRP3 inflammasome in sensing cellular danger signals and regulating neuroinflammatory responses.
2. Explain how chronic neuroinflammation may contribute to the pathophysiology of mood disorders and neurodegenerative disease.
3. Identify lifestyle and nutraceutical interventions, including nutritional ketosis, that may help modulate NLRP3-related inflammatory signalling as a practical strategy for supporting emotional and cognitive health.

Shifting Out of Criticism and Control: Using IFS to Cultivate Self-Led Relationships with Food and the Body - 1.25 CE - Jeanne Catanzaro

After participating in this activity, learners will be able to:

1. Identify two IFS-informed interventions that facilitate access to Self-energy.
2. Name three protective strategies common to clients with disordered eating and eating disorders.
3. Identify two ways provider bias related to food and bodies can shape clinical decision-making, treatment bias, and therapeutic alliance in psychotherapy and healthcare settings.

Psychedelics in Clinical Practice Panel - 1.25 CE - Dick Schwartz, Robin Carhart-Harris, Will Van Derveer, Dimitri Perivoliotis (Moderator: Kirkland Newman)

After participating in this activity, learners will be able to:

1. Compare different therapeutic models and clinical perspectives relating to the use of psychedelics in mental health care.
2. Discuss key clinical considerations and patient safety issues associated with psychedelic-assisted approaches.
3. Evaluate how current scientific research may inform the clinical application of psychedelics in mental health care.
4. Evaluate the opportunities and challenges associated with integrating psychedelic-assisted therapies into contemporary mental health practice.

Metabolism, Mitochondria and Types of Stress - 1.25 CE - Elissa Epel, Robert Lustig

After participating in this activity, learners will be able to:

1. Explain the role of mitochondrial function, ATP production, and reactive oxygen species (ROS) in neuronal health and neuropsychiatric disease.
2. Describe how stress, sleep deprivation, environmental toxins/obesogens, and dietary factors may contribute to mitochondrial dysfunction, oxidative stress, and altered neuronal energy metabolism.
3. Discuss the potential relationship between mitochondrial dysfunction, energy diversion, oxidative stress, and cognitive or neuropsychiatric outcomes, including the role of nutritional and lifestyle factors.

How Psychedelics Work: Illuminating the Hidden Mind - 1 CE - Robin Carhart-Harris

After participating in this activity, learners will be able to:

1. Realise the role of the serotonin 2A receptor in the action of classic psychedelics.
2. Review the context dependency of responses to psychedelics.
3. Compare the action of psilocybin with that of conventional antidepressants.

Ayurveda and Personalized Medicine: The Power of Self-Care for Prevention and Longevity - 1 CE - Judith Pentz

After participating in this activity, learners will be able to:

1. Explain the foundational Ayurvedic principles of Dinacharya (daily self-care) and their relevance to personalized medicine.
2. Identify evidence-based Ayurvedic practices that promote prevention, resilience, and longevity.
3. Integrate simple, accessible Ayurvedic self-care tools into clinical practice or personal routines to enhance well-being and reduce burnout.

Sentinel Trauma: Why Survival States Persist After Threat is Gone - 1 CE - Stephen Porges

After participating in this activity, learners will be able to:

1. Define sentinel trauma and distinguish it from complex/developmental trauma, emphasizing single-trial autonomic imprinting versus cumulative relational threat exposure.
2. Describe the proposed time course from an acute autonomic signature of distress (mobilization/shutdown/oscillation) to a hardened autonomic imprint characterized by altered baseline, reactivity, and recovery.
3. Explain the role of neuroception and social neuropeptides (especially oxytocin and vasopressin) as mediators that may stabilize threat/safety learning and shape relational expectations after sentinel events.
4. Apply a Polyvagal-informed intervention logic to design strategies that signal safety, accessibility, and trust via co-regulation and state-shifting approaches that support autonomic flexibility and recovery.

The Addicted Brain & How to Break Free: Nutritional Treatment of Addiction - 1 CE - Hyla Cass

After participating in this activity, learners will be able to:

1. Understand how blood sugar, hormones, and neurotransmitters drive addiction.
2. Learn which laboratory tests identify the underlying biochemical imbalances.
3. Discover how targeted vitamins, minerals, and amino acids can correct those imbalances.
4. Learn how to use supplements adjunctively to support lowering doses of medications and discontinuation.

Improving Sleep as a Pathway to Mental Health: A Transdiagnostic Approach - 1 CE - Allison Harvey

After participating in this activity, learners will be able to:

1. Recognize the bidirectional relationship between sleep and circadian disturbances and mental health, including their impact on emotional regulation, cognition, physical health, and high-risk behaviors.
2. Identify common overlapping sleep and circadian problems across mental health presentations and explain the rationale for using a transdiagnostic approach rather than treating sleep disorders in isolation.

3. Describe key components of the Transdiagnostic Sleep and Circadian Intervention (TSC), including CBT-I, Interpersonal and Social Rhythm Therapy, chronotherapy, and Motivational Interviewing, and their application to clinical practice.

The Role of Psychotherapy in Psychedelic-Assisted Treatment: A New Model of PTSD Care - 1 CE - Dimitri Perivoliotis

After participating in this activity, learners will be able to:

1. Describe the need for new models of PTSD treatment and the rationale for integrating psychedelics with evidence-based psychotherapy models for the treatment of PTSD.
2. Summarize current research examining the combination of manualized psychotherapies, including Cognitive Processing Therapy and Prolonged Exposure, with psychedelic medicines.
3. Discuss opportunities and challenges in implementing psychotherapy-based models of psychedelic treatment in clinical practice and future research.

Functional Medicine for Obsessive Compulsive Disorder - 1 CE - Dr. James Greenblatt

After participating in this activity, learners will be able to:

1. Participants will learn about inositol's role in OCD treatment.
2. Participants will learn about serotonin synthesis and 5-HTP.
3. Participants will learn how NAC affects serotonin.

The Cell Safety State: A New Model for Brain Health + Mental Wellness - 1 CE - Dr. Ilene Naomi Rusk

After participating in this activity, learners will be able to:

1. Identify the pillars of brain health and describe how each operates as a modifiable input for Alzheimer's risk reduction and nervous system regulation.
2. Distinguish between the states of the nervous system within the integrative vagal network.
3. Explain the upside of stress for Alzheimer's prevention and psychological health.

Applying Internal Family Systems for Intimate Relationships - 1.25 CE - Dick Schwartz

After participating in this activity, learners will be able to:

1. Describe the foundational assumptions and clinical rationale of the Internal Family Systems model as applied to intimate relationships.
2. Identify the protective and vulnerable parts that commonly drive conflict, disconnection, and reduced emotional safety between partners.
3. Demonstrate at least one IFS-informed intervention designed to support Self-led communication, empathy, and relational repair in couples.

Integrative Approaches to Disordered Eating Panel - 1.25 CE - James Greenblatt, Luis Mojica, Jeanne Catanzaro, Christina Bjorndal (Moderator: Kirkland Newman)

After participating in this activity, learners will be able to:

1. Compare a range of integrative approaches to understanding and supporting eating disorders and disordered eating.
2. Describe how nutrition, nutrient status, nervous-system regulation, trauma, and body image may influence patterns of disordered eating.
3. Identify practical, compassionate strategies that may support patients in developing a healthier relationship with food and their bodies.

Neuropsychiatric Inflammation As Seen Through the Lens of DAMPS & PAMPS - 1 CE - Neil Nathan

After participating in this activity, learners will be able to:

1. To understand the different kinds of inflammation that different medical conditions engender.
2. To understand specific testing that can clarify what kind of inflammation we are dealing with, to provide more effective treatment.
3. To review the details of common medical conditions that create neuropsychiatric symptoms from the perspective of inflammation so that we can create a more comprehensive treatment plan.

From Cell Danger to Cellular Resilience: Identifying and Removing the Contributors that Keep Pediatric Mental Health Stuck - 1 CE - Elisa Song

After participating in this activity, learners will be able to:

1. Explain how the cell danger response, mitochondrial polarization, and autonomic nervous system regulation influence the persistence and resolution of pediatric neuropsychiatric symptoms.
2. Identify five major modifiable inputs that can prevent completion of the healing cycle: metabolic endotoxemia, nutritional insufficiency, autonomic dysregulation, mast cell activation (with resulting neuroinflammation), and persistent infectious or toxicant exposure — and the clinical clues and first-line testing that detect each.
3. Develop a prioritized, clinically actionable evaluation and treatment strategy to remove ongoing danger signals, restore vagal and mitochondrial function, and promote cellular resilience in children with complex or treatment-resistant mental health presentations.

The Inflamed Mind: Mast Cells, Emotion, and What Healing Requires - 1 CE - Kelly McCann

Upon completion, participants will be able to:

1. Describe the neuroimmune mechanisms by which MCAS contributes to neuropsychiatric symptoms.
2. Identify clinical presentations where MCAS should be considered in a psychiatric differential.
3. Summarize the evidence base for somatic, expressive, and neurolinguistic approaches in this population.
4. Apply a whole-person integrative framework to patients with complex, treatment-resistant presentations.

Why Treatment Hits a Ceiling in Pediatric Mental Health: The Missing Nervous System Variable - 1 CE - Roseann Capanna-Hodge

After participating in this activity, learners will be able to:

1. Identify clinical signs of nervous system dysregulation in children and adolescents and distinguish patterns of dysregulation across emotional, behavioral, attentional, and executive functioning domains.
2. Explain how chronic nervous system dysregulation can affect a child's capacity for emotional regulation, attention, learning, behavior, and engagement with therapeutic interventions.
3. Apply practical nervous system regulation strategies within multidisciplinary care to support treatment engagement, functional improvement, and more durable clinical outcomes.

The Biology of Becoming: How Infection, Toxicity, and Brain Network Dysfunction Can Disrupt Development—and How We Restore Capacity - 1.25 CE - Chris Winfrey

After participating in this activity, learners will be able to:

1. Explain how biological disturbances may influence development by altering neural capacities required for attention, regulation, relationship, initiation, action, and learning.
2. Describe how infection, environmental exposures, inflammation, metabolic dysfunction, vascular factors, and autonomic dysregulation may converge on large-scale brain-network function and contribute to overlapping neuropsychiatric presentations.
3. Apply a network-based clinical framework incorporating history, functional assessment, qEEG, and other appropriate physiological or neuroimaging measures to evaluate impaired capacities and functional brain states.
4. Discuss how biological treatment, autonomic regulation, neuromodulation, and developmental rehabilitation can be integrated to restore capacity and support renewed functional and developmental engagement.

Immune Resilience: The Future of Longevity - 1.25 CE - Dr. Jill Carnahan

After participating in this activity, learners will be able to:

1. Describe the roles of mitochondrial function, the Cell Danger Response, and immune signaling in the development of chronic inflammatory disease and accelerated aging.
2. Recognize how environmental toxicants, persistent infections, mast cell activation, and post-viral syndromes contribute to chronic immune dysregulation and impaired immune resilience.
3. Apply evidence-informed precision medicine strategies to identify underlying drivers of immune dysfunction and develop individualized interventions that support immune resilience, healthy aging, and longevity.

AI or EI? The New Era of Treatable Neurodegenerative Diseases - 1 CE - Dale Bredesen, Judy Benjamin

After participating in this activity, learners will be able to:

1. Learn a unified theory of neurodegenerative diseases and how to apply the concepts to treat each neurodegenerative disease uniquely.
2. Learn what procedures have been most important to achieving best outcomes in the treatment of cognitive decline.
3. Learn what new tests and treatments are on the horizon, and which hold the most promise.

The Crucial Role of the Brain Gut Microbiome System in Healthy Aging - 1 CE - Emeran Mayer

After participating in this activity, learners will be able to:

1. To understand the role of gut hormones (including GLP1, Glucagon and GIP) in the treatment of obesity, metabolic syndrome and several brain disorders.
2. To learn about the role of the gut-based immune system in widespread chronic immune activation, including the brain.
3. To learn about the role of the gut microbiome in modulating inflammatory and endocrine signaling from the gut to the brain.

The Metabolic Brain: How Cardiometabolic Dysfunction Shapes Mental Health - 1 CE - Dr. Yousef Elyaman

At the conclusion of this presentation, participants will be able to:

1. Explain the relationship between cardiometabolic dysfunction and mental health by describing the roles of insulin resistance, inflammation, mitochondrial dysfunction, and vascular health in brain function.
2. Identify common clinical signs, laboratory markers, and risk factors that may indicate metabolic contributors to mood disorders, cognitive symptoms, and impaired mental resilience.
3. Apply a systems-based clinical framework to evaluate and address cardiometabolic factors that influence mental health outcomes.

Lyme & Alzheimer's Disease: The Infection/Amyloid/P-Tau Connection & Role of All 16 MSIDS Factors in Dementia - 1 CE - Richard Horowitz

After participating in this activity, learners will be able to:

1. Learn how to use the 16-point MSIDS model in evaluating potential underlying factors affecting the course of AD.
2. Understand effective testing strategies to test for Lyme and associated co-infections, as well as other MSIDS abnormalities, and review the potential use of inflammatory biomarkers in AD.
3. Learn cutting-edge treatment strategies for CLD/PTLDS, including dapsone combination therapy

Treatment-Resistant Until It Wasn't: A Metabolic Psychiatry Panel - 1.25 CE - Matt Baszucki, Hannah Warren Lauren Kennedy-West, Matt Bernstein, PhD (Moderator)

After participating in this activity, learners will be able to:

Summarize the mechanistic rationale and current clinical evidence — including its methodological limitations — for ketogenic and metabolic therapies in serious mental illness.

Describe the lived experience of recovery and supervised psychiatric deprescribing, including adherence demands, shared decision-making, and the dimensions of personal recovery (connectedness, hope, identity, meaning, empowerment) conveyed through first-person narratives.

Apply principles of contact-based and narrative education to integrate lived-experience perspectives into clinical practice, while critically appraising the difference between illustrative recovery stories and efficacy evidence.

Reversing Cognitive Decline: Groundbreaking Results from the Evanthea Randomized Controlled Trial of Precision Medicine in Alzheimer's Disease + Q&A Panel on Neurodegeneration - 1.25 CE - Kat Toups (panel: Dale Bredesen, Richard Horowitz, Judy Benjamin), Kirkland Newman (Moderator)

After participating in this activity, learners will be able to:

1. Identify potential contributors to cognitive decline that may be modifiable.
2. Describe the multimodal interventions used in the Evanthea Trial, including dietary and lifestyle modifications.
3. Discuss the cognitive outcomes observed in the Evanthea Trial.

Trauma, the Body, and the Restoration of Self - 1.25 CE - Bessel van der Kolk, Licia Sky

After participating in this activity, learners will be able to:

1. Describe how trauma can affect bodily awareness, emotional processing, and the continuity of a person's sense of self.
2. Explain how recognizing and responding to bodily signals and emotional information can contribute to the restoration of connection, agency, and self-relationship.
3. Identify principles of trauma-sensitive embodied exploration, including pacing, curiosity, and participant choice, through a brief guided experience.

Trauma Across Context: Biological Adaptations to Stress - 1 CE - Wendy D'Andrea, Marlen Gonzalez, Mike Niconchuk

By the end of this session, participants will be able to:

1. Explain many of the core neurobiological mechanisms underlying stress and trauma responses, including autonomic nervous system patterns and their role in survival adaptations across contexts.
2. Identify how developmental timing, cultural environment, and systemic adversity shape individual differences in trauma-related biological adaptation.
3. Consider various intervention frameworks for working with trauma-informed biological regulation that honor both physiological reality and contextual meaning-making.

Never Well Since: What Cancer Has Been Trying to Tell Us About Trauma - 1 CE - Nasha Winters

At the end of this session, participants will be able to:

1. Describe the bidirectional relationship between psychological trauma and cancer — how adverse childhood experiences and chronic stress can shape the cancer terrain, and how cancer diagnosis, treatment, and survivorship themselves impose traumatic stress.
2. Explain the biological pathways linking trauma and chronic stress to recognized hallmarks of cancer — including neuroendocrine/HPA-axis and β-adrenergic signaling, catecholamine and catechol-estrogen clearance (e.g., COMT), immune dysregulation, chronic inflammation, and metabolic, epigenetic, and gut-brain changes.
3. Apply a trauma-informed, terrain-based approach to oncology support that complements standard of care — beginning with a fuller, trauma-aware history and nervous-system-oriented strategies (safety, co-regulation, and meaning).

Environment and the Nervous System Panel - 1.25 CE - Bessel van der Kolk, Mike Niconchuk, Licia Sky, Marlen Gonzalez (Moderator: Wendy D'Andrea)

After participating in this activity, learners will be able to:

1. Describe how social, ecological, and environmental factors can influence nervous system regulation, stress biology, and mental health.
2. Discuss the relationships between trauma, embodiment and environmental exposures in shaping mental health outcomes.
3. Identify integrative perspectives and practical considerations that support a more holistic understanding of the environmental drivers of mental health.

Rethinking Addiction: An Integrative Mental Health Panel - 1.25 CE - Dr. Robert Lustig, Dr. Hyla Cass, Dr. Arwen Podesta, Christina Veselak, Kirkland Newman (Moderator)

After participating in this activity, learners will be able to:

1. Describe key neurobiological, psychological and lifestyle factors that contribute to substance and behavioural addictions.
2. Compare a range of integrative approaches to the assessment, treatment and recovery of people experiencing addiction.
3. Identify practical clinical considerations for incorporating metabolic health, stress, trauma and behavioural factors into a more comprehensive approach to addiction care.

The Color-Coded Brain: Insights into Polyphenols, Melatonin, and Glymphatic Dynamics in Neuroprotection and Cognitive Function - 1 CE - Deanna Minich

After participating in this activity, learners will be able to:

1. Describe how plant polyphenols support brain health by influencing oxidative stress, neuroinflammation, and neurotransmission.
2. Explain the roles of melatonin and the glymphatic system in neuroprotection, circadian regulation, and maintenance of brain homeostasis.
3. Identify evidence-informed nutrition and lifestyle strategies that support glymphatic function and cognitive health.

Nature's Medicine: Is Oxytocin the Secret to Love, Health and Longevity? - 1 CE - Sue Carter

After participating in this activity, learners will be able to:

1. Describe oxytocin's role as a neuropeptide involved in social connection, safety, stress regulation, and physiological adaptation.
2. Explain how oxytocin and vasopressin interact with the autonomic nervous system and contribute to stress responses, parenting, and early-life experiences.
3. Discuss the roles of sociostasis and stress-response hormesis in social connection, resilience, adaptation, health, and longevity.

TARGET AUDIENCE

This activity is designed for Psychiatrists, Physicians, Psychologists, Psychotherapists, Counselors, Nurses, Social Workers, Dietitians, and other healthcare professionals involved in the prevention, assessment, and treatment of mental health conditions.

It is particularly relevant for clinicians, researchers, and educators working across integrative and functional medicine, trauma, metabolic health, neurodevelopment, neurodegeneration, and lifestyle medicine who want to strengthen their understanding of evidence-informed, whole-person approaches to mental healthcare.

DISCLOSURE DECLARATION:
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Faculty Disclosures
Allison Harvey has nothing to disclose.
Bessel van der Kolk has nothing to disclose.
Chris Winfrey has nothing to disclose.
Christina Bjorndal has disclosed several financial relationships: Paid Contractor/Consultant for AlphaCell Labs; Author receiving book royalties; Owner of Natural Terrain Naturopathic Clinic.
Christina Veselak has disclosed a financial relationship: Academy for Addiction and Mental Health Nutrition (author of Eating Protein Saves Lives).
Dale Bredesen has disclosed several financial relationships: Consultant for Apollo Health; Consultant for Life Seasons.
Dick Schwartz has nothing to disclose.
Dimitri Perivoliotis has nothing to disclose.
Eboni Cornish has nothing to disclose.
Elisa Song has disclosed several financial relationships: Founder of Healthy Kids Happy Kids; Chief Medical Officer at Tiny Health; Medical Advisor at Neurobiologix; Medical Advisor at Microbiome Labs.
Elissa Epel has disclosed a financial relationship: Oura Health.

Felice Gersh has disclosed several financial relationships: Consultant/Lecturer for Nestlé Health Sciences; Lecturer for Metagenics; Lecturer for Boniva; Lecturer for Mosaic Diagnostics; Educator for L-Nutra.
Geeta Maker-Clark has nothing to disclose.
Hannah Warren has nothing to disclose.
Hyla Cass has disclosed a financial relationship: Partner in Dr. Cass' Hemp Oil/CBD.
Ilene Naomi Rusk has disclosed a financial relationship: The Brain and Behavior Clinic.
James Greenblatt has disclosed several financial relationships: Author receiving royalties for Finally Hopeful and Finally Focused; Speaker for Pure Encapsulations.
James Maskell discloses relationships to Fullscript - Consultant; TruNeura - CoFounder.
Jeanne Catanzaro has nothing to disclose.
Jill Carnahan has nothing to disclose.
Judith E Pentz MD has no relevant financial disclosures.
Judy Benjamin has nothing to disclose.
Kat Toups has disclosed a financial relationship: Advisory Board member at NBX Wellness.
Kelly McCann has nothing to disclose.
Lauren Kennedy-West discloses relationships to SiBio - affiliate, and KetoMojo - affiliate.
Leslie Korn has disclosed several financial relationships: Speaker for PESI; Author receiving royalties from W.W. Norton and Routledge.
Licia Sky has nothing to disclose.
Luis Mojica has nothing to disclose.
Marlen Gonzalez has nothing to disclose.
Matthew Baszucki has nothing to disclose.
Matthew Bernstein discloses relationships to MetabolicWise - Scientific Advisory Board Member; Meru Health - Scientific Advisor; Sila Metabolic Mental Health, Inc - Advisor.
Mike Niconchuk has nothing to disclose.
Nasha Winters has nothing to disclose.
Neil Nathan has nothing to disclose.
Peter Bongiorno has disclosed a financial relationship: Pure Encapsulations.
Richard Horowitz has disclosed several financial relationships: Royalties from St. Martin's Press for Why Can't I Get Better? and How Can I Get Better?; royalties from an upcoming Simon & Schuster book, Ending Chronic Illness; Xymogen stock; Consultant/speaker fees for Precision Medicine Consultants; research fees from the MSIDS Research Foundation.
Robert Lustig has nothing to disclose.
Robert Rountree has disclosed several financial relationships: Speakers' Bureau/Scientific Advisory Board for BWH Labs; Scientific Advisory Board member and stock options with Bevimi; Speakers' Bureau and training advisor for BioTE; Speakers' Bureau for Fullscript; Speakers' Bureau for Gaia Herbs; former Medical Advisor/Speakers' Bureau/SAB member for Thorne (relationship ended); Speakers' Bureau for Vita-Aid Professional Therapeutics.

Robin Carhart-Harris has disclosed several financial relationships: Entropy Neurodynamics; Osmind; Red Light Holland; Otsuka.
Roseann Capanna-Hodge has disclosed several financial relationships: Neurotastic; Neurobiologix.
Stephen Porges has disclosed a financial relationship: Sonocea and Unyte Health.
Wendy D'Andrea has nothing to disclose.
Will Van Derveer has nothing to disclose.
Yousef Elyaman has disclosed several financial relationships: Medical Director/Consultant for HumanN; Consultant for Quest Diagnostics.
Emeran Mayer discloses financial relatioonships as a member of Scientific Advisory Boards for Axial Biotherapeutics, Pendulum, Bloom Science, Melius MMB, APC Ireland, Tiny Health, Salvo, Seed, EatWell, One Bio, Eubiosis
Sue Carter has nothing to disclose.
Deanna Minich has disclosed several relationships: Food & Spirit, LLC - President/CEO & Author of health-related books; Symphony Natural Health - Independent Contractor; Symphony Natural Health - Stock Options; Genexa Health - Stock; Institute for Functional Medicine - Educator; University of Western States - Adjunct Faculty/Educator; Turner Publishing - Book royalties; HarperOne Publishing - Book royalties; Personalized Lifestyle Medicine Institute (PLMI) - Board of Directors & Speaker; Speaker in the natural products industry: Fullscript - Speaker (2026), CellCore - Speaker (2026), Standard Process - Speaker (2026), Biocidin - Speaker (2025), Fodzyme - Speaker (2024)

Planning Committee
Kirkland Newman (Smulders) has nothing to disclose.
Everest Goldstein has nothing to disclose.
Arwen Podesta has disclosed several financial relationships: Advisory Board member for SageSurfer, Otsuka, JAYMAC, Indivior, AbbVie, and Eli Lilly; Affiliate/Collaborator with Psychiatry Redefined; Speakers Bureau member for Alkermes, Indivior, Braeburn, Axsome Therapeutics, Otsuka, and AbbVie, Investor in Molecular World Health.
Josh Friedman has disclosed a financial relationship: Faculty Member at Psychiatry Redefined.
Pamela Mehta, MD, has nothing to disclose.

Content Reviewer
Shafqat Abbas, PharmD, has nothing to disclose.

All relevant financial relationships have been evaluated and mitigated.

Unlabeled Use Disclosure
Faculty of this CME/CE activity may include discussions of products or devices that are not currently labeled for use by the FDA. The faculty have been informed of their responsibility to disclose to the audience if they will be discussing off-label or investigational uses (any uses not approved by the FDA) of products or devices. Pinnacle Conference, LLC, the faculty, planners, and Masters Events do not endorse the use of any product outside of the FDA-labeled indications. Medical professionals should not utilize the procedures, products, or diagnosis techniques discussed during this activity without evaluation of their patient for contraindications or dangers of use.

CREDIT INFORMATION

Jointly Accredited Provider
In support of improving patient care, this activity has been planned and implemented by Masters Events and Pinnacle Conference, LLC. Pinnacle Conference, LLC is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC) to provide continuing education for the healthcare team.

Physicians - ACCME
Pinnacle Conference, LLC, designates this Enduring activity for a maximum of 45.25 *AMA PRA Category 1 Credits™*. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

Note to Nurse Practitioners: Nurse practitioners can apply for *AMA PRA Category 1 Credits™* through the American Academy of Nurse Practitioners (AANP). AANP will accept *AMA PRA Category 1 Credit™* from Jointly Accredited Organizations. Nurse practitioners can also apply for credit through their state boards.

Nurses - ANCC
This activity is designated for 45.25 contact hours.

Pharmacists - ACPE
To receive CPE credit through CPE Monitor, please ensure you have provided your NABP ePID number and DOB appropriately. If you are unsure or would like to confirm, please contact ce@learnatpinnacle.com within 60 days of completing the activity.

Physicians Assistants - AAPA

Pinnacle Conference, LLC has been authorized by the American Academy of Physician Associates (AAPA) to award AAPA Category 1 CME credit for activities planned in accordance with AAPA CME Criteria. This activity is designated for 45.25 AAPA Category 1 CME credits. PAs should only claim credit commensurate with the extent of their participation.

Psychologists - APA

Continuing Education (CE) credits for psychologists are provided through the co-sponsorship of the American Psychological Association (APA) Office of Continuing Education in Psychology (CEP). The APA CEP Office maintains responsibility for the content of the programs.

Athletic Trainers - BOC

Pinnacle Conference, LLC (BOC AP#: JA4008385) is approved by the Board of Certification, Inc. to provide continuing education to Athletic Trainers (ATs). This program is eligible for a maximum of (45.25) Category A hours/CEUs. ATs should claim only those hours actually spent in the educational program.

Registered Dietitians - CDR

Completion of this RD/DTR profession-specific or IPCE activity awards CPEUs (1 IPCE credits = 1 CPEU). If the activity is dietetics-related but not targeted to RDs or DTRs, CPEUs may be claimed which are commensurate with participation in contact hours (1 hour/60 minutes = 1 CPEU). RDs and DTRs are to select activity type 102 in their Activity Logs. Performance Indicator selection is at the learner's discretion.

Social Workers - ASWB

As a Jointly Accredited Organization, Pinnacle Conference, LLC is approved to offer social work continuing education by the Association of Social Work Boards (ASWB) Approved Continuing Education (ACE) program. Organizations, not individual courses, are approved under this program. Regulatory boards are the final authority on courses accepted for continuing education credit. Social workers completing this course receive 45.25 General continuing education credits.

Dentists - ADA-CERP CME

Pinnacle Conference, LLC is an ADA CERP Recognized Provider. ADA CERP is a service of the American Dental Association to assist dental professionals in identifying quality providers of continuing dental education. ADA CERP does not approve or endorse individual courses or instructors, nor does it imply acceptance of credit hours by boards of dentistry. Concerns or complaints about a CE provider may be directed to the provider or to the Commission for Continuing Education Provider Recognition at ADA.org/CERP. Pinnacle Conference, LLC designates this activity for 45.25 hours of continuing education credits.

(IPCE) Interprofessional Continuing Education Credit

This activity was planned by and for the healthcare team, and learners will receive 45.25 Interprofessional Continuing Education (IPCE) credits for learning and change.