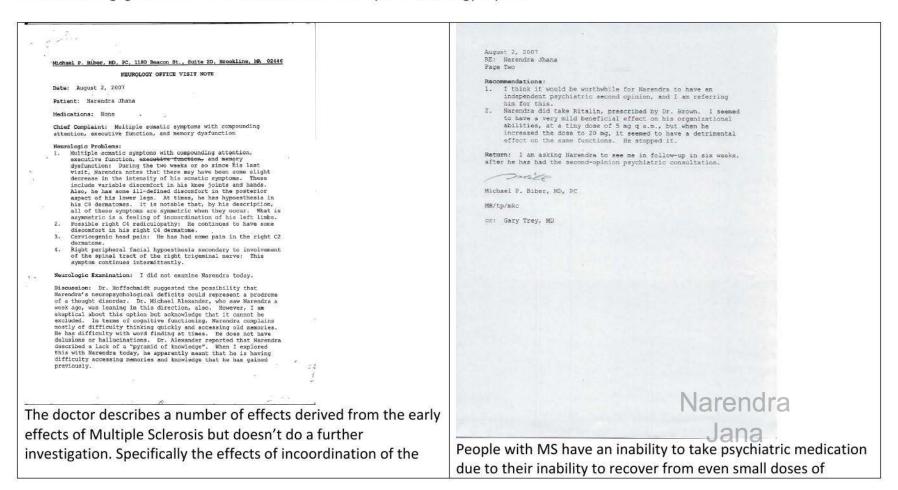
2007 and 2008 Neurology

- Boston and Brookline Massachusetts
 - Dr. Michael Biber

Narenthe ethology of the case is neurological but the condition is mistreated under psychiatry not only to ineffectiveness (no medication produced any effect in the condition) but also in causing further neurological damage by mistreatment:

There were no medications given that limited the progression of neuroinflammation or neurodegeneration created by the condition. Thus it was negligence from 2007 as is demonstrated by this neurology report:



left limbs and the C4 and C2 (cervical) dermatomes are effected indicating that the cervical column was inflamed.

The doctor does indicate the headache that becomes prevalent by December of 2008 which is the effect of a large T1 inflammatory lesion that isn't medically imaged until 2008.

> Michael P. Biber, MD, PC, 1180 Beacon St., Suite 2D, Brookline, MA 02445 NEUROLOGY OFFICE VISIT NOTE

Date: January 24, 2008

Patient: Narendra Jana

Medications: None

Chief Complaint: Multiple somatic symptoms with compounding attention, executive function, and memory problems

 Multiple somatic symptoms with compounding attention, executive function, and memory problems: There has really been no striking change in Narendra's condition since I last saw him in August 2007. Today, he brought in a list of problems that been occurring. These have included tremors of his hands when he is doing repetitive activity, such as typing; loss of mental focus; difficulty registering things that he wants to remember; absentmindedness; persistence of light after-images when he sees bright lights; and a feeling of being detached from his environment. He, at times, spends too much time sleeping during the day. He is discouraged but says that he is not depressed. He did lose a substantial amount of weight, but his weight may be somewhat more stable recently. Marendra's October 17, 2007 EBG wax normal. At my suggestion, Narendra did see Dr. Russell Vasile at BIDMC, who then referred him to Dr. Richard Falzone at McLean Hospital. Narendra saw him twice but then, in part because his family moved to Bolton, MA, he stopped seeing Dr. Falzone but then did see Dr. Deborah Rosene, a psychologist in Watertown. He has seen her four times.

Possible right C4 radiculopathy Cervicogenic head pain: He continues to have some pain in the right side of his head. Sometimes there is also left-sided pain, but it is less than the right-sided discomfort.

4. Right peripheral facial hypoesthesia secondary to involvement of the spinal tract of the right trigeminal nerve

Neurologic Examination: I did not examine Narendra today.

Recommendations:

I am asking Narendra to give me a release so I can speak with Dr. Falzone and possibly Dr. Vasile about his condition.

I do not know whether Narendra has underlying depression. am not convinced that he does. However, I do believe that there is an underlying major psychologic contribution to his somatic symptoms.

He again describes the physiological effects of a condition that effects a person's spinal column. Tremors and C4 radiculopathy that becomes progressive cervical neurodegeneration.

stimulants due to neuroinflammation. Medications for relapse remitting MS would have been useful in this instance. But the diagnostics were never done.

> January 24, 2008 RE: Narendra Jana Page Two

> Return: Six weeks

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MB/tp/mkc

cc: Gary Trey, MD

Narendra Jana