REPORT · NESA WORLD® XSIGNAL® · We modulate the autonomic nervous system. Everything else follows.

XSIGNAL® IN NEUROLOGY

What non-invasive neuromodulation is exceptionally effective for

Chronic and neuropathic pain
Localised neuropathic pain, post-herpetic neuralgia, pain after nerve damage. Course: 20-30 sessions.

Trigeminal and facial neuralgia
Severe facial pain. Goal: pain relief + reduction of medication. Long-term course 3-12 months.

Headache and migraine
Migraine, tension and cluster headaches. Modulation of ANS and cortical hyperactivation.

Radiculopathies
Cervical and lumbosacral radiculopathy. Improvement with nerve root involvement.

Multiple Sclerosis (MS)
Improved quality of life, fatigue, spasticity and sleep in MS patients.

Parkinson's disease
Improvement of motor function, sleep, ANS balance and overall wellbeing.

Post-stroke
Neuroplasticity, motor recovery, pain and sleep regulation in rehabilitation phase.

Traumatic Brain Injury (TBI)
Cognitive and autonomic regulation in patients with acquired brain injury.

Post-COVID neuro-vegetative syndrome
Chronic fatigue, brain fog, sleep disturbance, dysautonomia, POTS.

Neurosurgical recovery
Pre-operative preparation and post-operative recovery after spinal surgery.

Why XSignal® works in this discipline

1.5 µA - below sensation threshold, above effect threshold. **· Systems approach** - we regulate ANS, not symptoms. **· No side effects** - safe from age 6+. **· Combinable** with medications and other therapies. **· 50+ publications** - solid clinical evidence.

50+	30+	14+	1.5 µA	15+
scientific publications	treatment protocols	neurological indications	below-threshold intensity	years of clinical use

Scientific evidence: *MS - sleep, pain, bladder (RCT) · Post-traumatic cervicalgia (RCT) · Post-COVID dysautonomia in women · New frontier in sleep disorders (RCT)*

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For demos, training or clinical pilots - get in touch.