

APPENDIX N

Table 1.

Summary of significant effects of follow-up analyses of Coping Style (Cop) × Valence (Val) × Interference (Int) mixed ANOVAs on the performance measures during the Stroop Interference Task.

<u>Measure</u>	<u>Interaction</u>	<u>Main Effect</u>	<u>Follow-up Analyses</u>		
		<u>Level (effect)</u>	<u>Level</u>	<u>Significance</u>	<u>Explanation</u>
<u>Reaction Time</u>					
Total		Valence $F(1,45) = 8.95$ $p < .004$.	Neg>neu
Non-Targets		Valence $F(1, 45) = 6.76$ $p < .013$			Neg>neu
Color Interference				ns.	
Word Interference		Valence $F(1, 45) = 23.49$ $p < .0001$			
Target Errors				ns.	
<u>Total</u>					
Non-Targets					
Color Interference		Coping Style $F(2, 45) = 2.54$ $p < .020$		$t(27) = 2.20$ $p < .037$	Rep > high
Word Interference		Valence $F(1, 45) = 29.67$ $p < .0001$			Neg>neu
Target					

Table 2.

A comparison of multiple heart rate and blood pressure samplings across conditions. The effect of multiple samplings was not the same across conditions or types of measurements suggesting a potential confound.

Measurement	Conditions	Interactions	Main Effects
Heart Rate	Baseline		Multiple Measure $F(1, 44) = 3.68, p < .062$
	Stroop Task (neu, neg) Hand Immersion Task (tep, cold)		
Diastolic Blood Pressure	Baseline		
	Stroop Task (neu, neg) Hand Immersion Task (tep, cold)	Multiple Measure(2) \times Condition(2) $F(1, 44) = 4.75, p < .035$	Multiple Measure $F(1, 44) = 34.87, p < .0001$ Condition $F(1, 44) = 26.45, p < .0001$
Systolic Blood Pressure	Baseline		
	Stroop Task (neu, neg) Hand Immersion Task	Multiple Measure(2) \times Condition(2) $F(1, 44) = 7.56, p < .009$	Multiple Measure $F(1, 44) = 11.38, p < .002$ Multiple Measure $F(1, 44) = 26.93, p < .0001$
	Hand Immersion Task (tep, cold)		Condition $F(1, 44) = 39.82, p < .0001$

Table 3.

A summary of significant interactions and follow-up analyses for heart rate and blood pressure data.

<u>Measure</u>	<u>Conditions</u>	<u>Interaction</u>	<u>Main Effect</u>	<u>Follow-up Analyses</u>		
			Level (effect)	Level	Significance	Explanation
<u>Heart Rate</u>	Baseline			ns.		
	Stroop Interference Task			ns.		
	Hand Immersion Task			ns.		
<u>Diastolic Blood Pressure</u>	Baseline		Coping Style $F(2, 46) = 4.10$ $p < .05$	Baseline	$t(32) = 3.38$ $p < .002$	Low > hi
					$t(32) = 2.48$ $p < .019$	Rep > hi
	Stroop Interference Task		Coping Style $F(2, 45) = 5.94$ $p < .01$	Neutral	$t(31) = 2.29$ $p < .029$	Low > hi
				Negative	$t(28) = 3.23$ $p < .003$	Rep > hi
Hand Immersion Task		Coping Style $F(1, 45) = 2.95$ $p < .065$	Cool	$t(32) = 2.20$ $p < .035$	Low > hi	
<u>Systolic Blood Pressure</u>	Baseline		Water $F(1, 45) = 40.61$ $p < .0001$	ns.		
	Stroop Interference Task			Negative	$t(32) = 2.37$ $p < .024$	Low > hi
	Hand Immersion Task					

Table 4.

Summary of significant effects and follow-up analyses of Coping Style (Cop) × Hemisphere (Hem) × Anticipation (Ant) mixed ANOVAs on EEG mean log μ V magnitude for each frequency band.

<u>Hz Band</u>	<u>Region</u>	<u>Interactions</u>	<u>Main Effect</u>	<u>Follow-up analyses</u>		
			<u>Level (effect)</u>	<u>Level</u>	<u>Significance</u>	<u>Explanation</u>
<u>Theta</u> <u>3.5 - 7.45 Hz</u>	Medial Frontal		Ant $F(1, 44) = 5.50$ $p < .023$			Cool > cold
	Lateral Frontal		Ant $F(1, 44) = 5.16$ $p < .028$			Cool > cold
	Central		Ant $F(1, 44) = 20.04$ $p < .0001$			Cool > cold
	Parietal		Ant $F(1, 44) = 26.44$ $p < .0001$			Cool > cold
			Hem $F(1, 44) = 3.51$ $p < .068$			Left > right
	Anterior Temporal		Ant $F(1, 44) = 13.39$ $p < .001$			Cool > cold
	Posterior Temporal		Ant $F(1, 44) = 19.73$ $p < .0001$			Cool > cold
	Occipital		Ant $F(1, 44) = 25.81$ $p < .0001$			Cool > cold
<u>Low Theta</u> <u>3.5 - 5.45 Hz</u>	Medial Frontal		Ant $F(1, 44) = 5.17$ $p < .028$			Cool > cold
	Central		Ant $F(1, 44) = 23.71$ $p < .0001$			Cool > cold
	Parietal		Ant $F(1, 44) = 27.60$ $p < .0001$			Cool > cold
			Hem $F(1, 44) = 4.30$ $p < .044$			Left > right
	Anterior Temporal		Ant $F(1, 44) = 14.09$ $p < .001$			Cool > cold
	Posterior Temporal		Ant $F(1, 44) = 24.50$ $p < .0001$			Cool > cold

<u>Hz Band</u>	<u>Region</u>	<u>Interactions</u>	<u>Main Effect</u>	<u>Follow-up analyses</u>			
			<u>Level (effect)</u>	<u>Level</u>	<u>Significance</u>	<u>Explanation</u>	
<u>High Theta</u> <u>5.5 - 7.45 Hz</u>	Occipital		Ant $F(1, 44) = 26.81$ $p < .0001$			Cool > cold	
	Medial Frontal		Ant $F(1, 44) = 4.81$ $p < .034$			Cool > cold	
	Lateral Frontal		Ant $F(1, 44) = 6.24$ $p < .016$			Cool > cold	
	Central	Ant × Hem $F(1, 44) = 4.29$ $p < .044$	Ant $F(1, 44) = 10.09$ $p < .003$			Cool > cold	
	Parietal		Cop × Ant × Hem $F(2, 44) = 4.29$ $p < .020$		Low, left	$t(17) = 2.19$ $p < .045$	Cool > cold
					High	$F(1, 13) = 7.85$ $p < .020$	Cool > cold
					Rep, tep	$t(14) = 2.19$ $p < .05$	Left > right
					Rep, left	$t(14) = 2.47$ $p < .03$	Cool > cold
			Ant × Hem $F(1, 44) = 4.06$ $p < .050$	Ant $F(1, 44) = 12.67$ $p < .001$			Cool > cold
	Anterior Temporal		Ant $F(1, 44) = 9.93$ $p < .003$			Cool > cold	
Posterior Temporal	Ant × Hem $F(1, 44) = 4.13$ $p < .048$	Ant $F(1, 44) = 10.96$ $p < .002$			Cool > cold		
Occipital		Ant $F(1, 44) = 16.13$ $p < .0001$			Cool > cold		
<u>Alpha</u> <u>7.5 - 13.45 Hz</u>	Central		Ant $F(1, 44) = 15.60$ $p < .0001$			Cool > cold	
	Parietal	Ant × Hem $F(1, 44) = 4.67$ $p < .036$	Ant $F(1, 44) = 5.70$ $p < .021$	Right	ns.	Cool ≅ cold	
				Left	$t(46) = 2.81$ $p < .007$	Cool > cold	
			Hem $F(1, 44) = 20.81$ $p < .0001$			Left > right	
	Anterior Temporal	Ant × Hem $F(1, 44) = 5.44$ $p < .024$	Ant $F(1, 44) = 4.77$ $p < .034$	Right	ns.	Cool ≅ cold	
				Left	$t(46) = 3.10$ $p < .003$	Cool > cold	
		Hem $F(1, 44) = 3.98$ $p < .052$			Left > right		

<u>Hz Band</u>	<u>Region</u>	<u>Interactions</u>	<u>Main Effect</u>		<u>Follow-up analyses</u>			
			<u>Level (effect)</u>	<u>Level</u>	<u>Significance</u>	<u>Explanation</u>		
<u>Low Alpha</u> <u>(7.5 – 8.45 Hz)</u>	Occipital	Cop × Ant × Hem F(2, 44) = 3.02 p < .059				ns.	Rep ≅ low ≅ hi	
						ns.	Rep ≅ low ≅ hi	
	Lateral Frontal	Cop × Hem F(2, 44) = 3.00 p < .060	Ant F(1, 44) = 4.85 p < .033			Coping	ns.	Rep ≅ low ≅ hi
							ns.	
	Central	Ant × Hem F(1, 44) = 6.91 p < .012	Ant F(1, 44) = 15.03 p < .0001					Cool > cold
	Parietal	Ant × Hem F(1, 44) = 7.34 p < .010	Ant F(1, 44) = 10.26 p < .003					Cool > cold
	Anterior Temporal	Ant × Hem F(1, 44) = 11.66 p < .001	Ant F(1, 44) = 14.63 p < .0001			Right	ns.	Cool ≅ cold
						Left	t(46) = 5.38 p < .0001	Cool > cold
	Posterior Temporal		Ant F(1, 44) = 8.53 p < .005					Cool > cold
	Occipital		Ant F(1, 44) = 10.11 p < .003					Cool > cold
<u>Mid Alpha</u> <u>9.5 - 11.45 Hz</u>	Medial Frontal	Cop × Ant × Hem F(2, 44) = 4.41 p < .018	Ant F(1, 44) = 3.90 p < .055			Right	ns.	Cool ≅ cold
						Left	t(46) = 2.04 p < .047	Cool > cold
					Coping	ns.	Rep ≅ low ≅ hi	
Central			Ant F(1, 44) = 13.16 p < .001				Cool > cold	
			Hem F(1, 44) = 19.70 p < .0001				Left > right	
Parietal	Ant × Hem F(1, 44) = 3.70 p < .062	Ant F(1, 44) = 7.39 p < .009					Cool > cold	

<u>Hz Band</u>	<u>Region</u>	<u>Interactions</u>	<u>Main Effect</u>	<u>Follow-up analyses</u>			
			<u>Level (effect)</u>	<u>Level</u>	<u>Significance</u>	<u>Explanation</u>	
<u>High Alpha</u> 11.5 - 13.45 Hz	Anterior Temporal	Ant × Hem F(1, 44) = 3.54 p < .066	Hem F(1, 44) = 4.24 p < .045	Cool	t(47) = 2.69 p < .010	Left > right	
				Cold	ns	Left ≅ right	
			Ant F(1, 44) = 5.10 p < .029	Right	ns.	Cool ≅ cold	
				Left	t(46) = 2.67 p < .010	Cool > cold	
	Posterior Temporal		Hem F(1, 44) = 4.48 p < .040	Cool	t(47) = 2.53 p < .015	Left > right	
				Cold	ns	Left ≅ right	
			Ant F(1, 44) = 3.64 p < .063			Cool > cold	
	Occipital		Ant F(1, 44) = 5.99 p < .018			Cool > cold	
	Central		Ant F(1, 44) = 5.03 p < .030			Cool > cold	
	Parietal	Cop × Ant × Hem F(2, 44) = 3.85 p < .029	Hem F(1, 44) = 17.60 p < .0001				Left > right
				Low, cool	t(17) = 2.25 p < .05.	Left > right	
					ns.	Rep ≅ low ≅ hi	
				ns.	Rep ≅ low ≅ hi		
Posterior Temporal	Cop × Ant × Hem F(2, 44) = 4.60 p < .015						
Occipital	Cop × Ant × Hem F(2, 44) = 4.67 p < .014						
<u>Beta</u> 13.5 - 19.45 Hz	Central		Ant F(1, 44) = 5.27 p < .027			Cool > cold	
			Ant F(1, 44) = 6.65 p < .013			Cool ≅ cold	
Posterior Temporal			Ant F(1, 44) = 5.43 p < .024			Cold > cool	
Occipital			Hem F(1, 44) = 3.64 p < .063			Left > right	
<u>Beta 13</u> 13.5 - 16.45 Hz	Lateral Frontal	Ant × Cop × Hem F(2, 44) = 8.56 p < .0001		ns.			

<u>Hz Band</u>	<u>Region</u>	<u>Interactions</u>	<u>Main Effect</u>	<u>Follow-up analyses</u>		
			<u>Level (effect)</u>	<u>Level</u>	<u>Significance</u>	<u>Explanation</u>
<u>Beta 16</u> <u>16.5 - 19.45 Hz</u>	Medial	Ant × Cop × Hem $F(2, 44) = 3.14$ $p < .053$	Ant			Cool > cold
	Frontal		$F(1, 44) = 5.14$ $p < .028$		ns.	Rep \cong low \cong hi
	Central		Ant $F(1, 44) = 11.96$ $p < .001$			Cool > cold
			Hem $F(1, 44) = 13.97$ $p < .001$			Left > right
	Anterior Temporal		Ant $F(1, 44) = 3.49$ $p < .068$			Cool \cong cold
Occipital	Ant × Hem $F(1, 44) = 4.21$ $p < .010$	Ant $F(1, 44) = 4.10$ $p < .049$	Right	$t(46) = 3.02$ $p < .004$	Cold > cool	
			Left	ns	Cool \cong cold	

Table 5.

Summary of significant effects and follow-up analyses of Coping Style (Cop) × Hemisphere (Hem) × Valence (Val) mixed ANOVAs on EEG mean log μ V magnitude for each frequency band.

<u>Hz Band</u>	<u>Region</u>	<u>Interactions</u>	<u>Main Effect</u>	<u>Follow-up analyses</u>			
			<u>Level (effect)</u>	<u>Level</u>	<u>Significance</u>	<u>Explanation</u>	
<u>Alpha</u> <u>8.5-13.45 Hz</u>	Medial Frontal	Cop × Val × Hem F(2, 46) = 3.09 p < .055	Hem (right, left) F(1, 46) = 5.60 p < .022	Rep, neu	t(14) = 2.35 p < .05	Right > left	
	Central					Right > left	
<u>Mid Alpha</u> <u>9.5-11.45 Hz</u>	Lateral Frontal	Cop × Val × Hem F(2, 46) = 5.30 p < .008	Hem(left, right) F(1, 46) = 4.04 p < .050			Right > left	
				Right, neutral	t(32) = 2.81 p < .01	Rep > low	
	Anterior Temporal	Cop × Val × Hem F(2, 46) = 3.22 p < .049	Val (neu, neg) F(1, 46) = 5.47 p < .024			Neg > neu	
				High, right	t(14) = 3.88 p < .002	Neg > neu	
		Central		Hem(right, left) F(1, 46) = 5.66 p < .022			Right > left
		Parietal		Val (neu, neg) F(1, 46) = 3.97 p < .052			Neg > neu
<u>Hi Alpha</u> <u>11.5-13.45 Hz</u>	Anterior Temporal	Cop × Val × Hem F(2, 46) = 3.13 p < .053	Val (neu, neg) F(1, 46) = 5.07 p < .029	Right	ns.	Neu \equiv neg	
				Left	t(48) = 2.06 p < .045	Neg > neu	
				Coping	ns.	Rep \equiv low \equiv hi	
	Medial Frontal	Cop × Val × Hem F(2, 46) = 3.56 p < .040	Hem(left, right) F(1, 46) = 3.90 p < .054	Neutral	t(48) = 2.05 p < .046	Right > left	
				Negative	ns.	Right \equiv left	
			Right, neutral	t(28) = 1.93 p < .065	Rep > Highs		

<u>Hz Band</u>	<u>Region</u>	<u>Interactions</u>	<u>Main Effect</u>	<u>Follow-up analyses</u>		
			<u>Level (effect)</u>	<u>Level</u>	<u>Significance</u>	<u>Explanation</u>
<u>Beta</u> <u>13.5-19.45 Hz</u>	Lateral	Cop × Val × Hem F(2, 46) = 3.36 p < .044	Hem(left, right) F(1, 46) = 4.48 p < .040			Right > Left
	Frontal			Right, neu	t(32) = 2.12 p < .05	Rep > low
				Right, neg	t(32) = 2.27 p < .05	Rep > low
	Anterior Temporal		Val (neu, neg) F(1, 46) = 6.18 p < .017			Neu > neg
<u>Beta 13</u> <u>13.5-16.45 Hz</u>	Lateral	Cop × Val × Hem F(2, 46) = 8.56 p < .0001		Right, neu	t(32) = 2.57 p < .05	Rep > low
	Frontal			Right, neu	t(28) = 1.96 p < .06	Rep > high
	Parietal		Val (neu, neg) F(1, 46) = 6.17 p < .017			Neg > neu
<u>Beta 16</u> <u>16.5-19.45 Hz</u>	Anterior Temporal	Cop × Val × Hem F(2, 46) = 2.85 p < .068	Val (neu, neg) F(1, 46) = 6.60 p < .014			Neu > neg
				Coping	ns.	Rep ≅ low ≅ hi
	Parietal		Val(neu, neg) F(1, 46) = 7.23 p < .010			Neg > neu
<u>Delta</u>	Anterior Frontal		Hem(left, right) F(1, 46) = 5.99 p < .018			Neu ≅ neg
<u>Theta</u> <u>3.5-7.45 Hz</u>	Occipital		Hem(left, right) F(1, 46) = 10.08 p < .003			Right > left
	Medial Frontal		Hem(left, right) F(1, 46) = 6.65 p < .013			Right left
	Parietal		Hem(left, right) F(1, 46) = 5.08 p < .029			Left > Right
<u>Hi Theta</u> <u>5.5-7.45 Hz</u>	Occipital		Hem × Cop F(2, 46) = 2.96 p < .062		ns.	Right ≅ left
				Coping	ns.	Rep ≅ low ≅ hi
	Frontal		Hem(left, right) F(1, 46) = 5.00 p < .030			Right left
	Parietal		Hem(left, right) F(1, 46) = 5.01 p < .030			Right > left

Table 6.

Summary of the significant effects and follow-up analyses of the mixed ANOVAs designed to test Heller's (1993) Theory of the correlation between right parietal activity and arousal during the Stroop Interference Task.

<u>Hz Band</u>	<u>Region</u>	<u>Interactions</u>	<u>Main Effect</u>	<u>Follow-up analyses</u>		
			<u>Level (effect)</u>	<u>Level</u>	<u>Significance</u>	<u>Explanation</u>
<u>Mid Alpha</u>	Right Parietal		Valence (neu, neg) $F(1, 46) = 4.70$ $p < .035$			Neg > neu
<u>Beta 16</u>			Valence (neutral, neg) $F(1, 46) = 8.00$ $p < .007$			Neg > neu
<u>Beta</u>			Valence (neu, neg) $F(1, 46) = 6.72$ $p < .013$			Neg > neu

Table 7.

Summary of significant effects and follow-up analyses of Coping Style (Cop) × Water Condition (Water) × Hemisphere (Hem) mixed ANOVAs of mean log μ V for each frequency band.

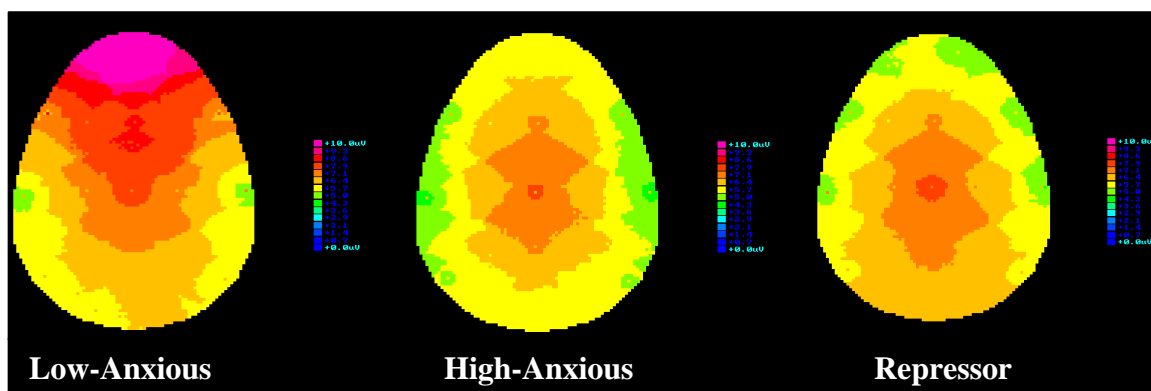
<u>Hz Band</u>	<u>Region</u>	<u>Interactions</u>	<u>Main Effect</u>	<u>Follow-up analyses</u>		
			<u>Level (effect)</u>	<u>Level</u>	<u>Significance</u>	<u>Explanation</u>
<u>Delta</u> <u>2.0-3.45 Hz</u>	Central		Hem $F(1, 45) = 7.18$ $p < .010$			Left > right
<u>Theta</u> <u>3.5-7.45 Hz</u>	Medial, Lateral Frontal	Cop × Water $F(2, 45) = 4.12$ $p < .023$			ns.	
	Central	Cop × Water $F(2, 45) = 4.58$ $p < .016$		Cool, left	$t(27) = 1.99$ $p < .056$	Rep > hi
	Parietal	Cop × Water $F(2, 45) = 4.26$ $p < .020$	Hem $F(1, 45) = 6.73$ $p < .013$			Left > right
<u>Low Theta</u> <u>3.5-5.45 Hz</u>	Lateral Frontal	Cop × Water $F(2, 45) = 4.74$ $p < .014$		Cool Left	$t(27) = 2.03$ $p < .053$	Hi > rep
	Central	Cop × Water $F(2, 45) = 5.30$ $p < .009$	Water (tep, cold) $F(1, 45) = 3.68$ $p < .061$			Left > right
				Cool, Left	$t(27) = 2.14$ $p < .042$	Hi > rep
					$t(32) = 2.09$ $p < .045$	Low > rep
				Cool, right	$t(27) = 1.97$ $p < .059$	Rep > high
					$t(32) = 1.91$ $p < .066$	Rep > low
Parietal	Cop × Water $F(2, 45) = 4.93$ $p < .012$		Water (tep, cold) $F(1, 45) = 4.86$ $p < .033$ Left > Right	Cool, right Cold, Left Cool	ns. ns.	Left \equiv right Left \equiv right
<u>Hi Theta</u> <u>5.5-7.45 Hz</u>	Medial Frontal	Cop × Water $F(2, 45) = 3.24$ $p < .049$		Cool, right	$t(32) = 2.29$ $p < .029$	Low > rep
				Cool, Left	$t(32) = 2.23$ $p < .033$	Low > rep

<u>Hz Band</u>	<u>Region</u>	<u>Interactions</u>	<u>Main Effect</u>	<u>Follow-up analyses</u>		
			<u>Level (effect)</u>	<u>Level</u>	<u>Significance</u>	<u>Explanation</u>
<u>Alpha</u> <u>7.5-13.45 Hz</u>	Central	Cop × Water $F(2, 45) = 3.73$ $p < .032$		Cold, left	$t(27) = 2.06$ $p < .05$	Rep > high
	Parietal	Cop × Water $F(2, 45) = 3.45$ $p < .040$	Hem $F(1, 45) = 6.22$ $p < .016$	Cool	$t(47) = 2.78$ $p < .009$	Left > right
				Cold	ns.	
	Central			Left, cool	$p < .061$	Rep>Low>Hi
			Hem $F(1, 45) = 48.82$ $p < .0001$			Left > right
	Parietal		Hem $F(1, 45) = 4.25$ $p < .045$			Left > right
<u>Low Alpha</u> <u>7.5-8.45 Hz</u>	Central	Water × Hem $F(2, 45) = 4.87$ $p < .032$	Hem $F(1, 45) = 14.29$ $p < .0001$	Cool	$t(47) = 4.06$ $p < .0001$	Left > right
				Cold	ns.	Left ≅ right
	Parietal	Cop × Water $F(2, 45) = 2.93$ $p < .064$		Right, cool	$t(27) = 1.98$ $p < .058$	Hi > rep
				Left, cool	$t(27) = 2.22$ $p < .035$	Hi > rep
				Cool	$t(47) = 2.18$ $p < .034$	Left > right
				Cold	ns.	Left ≅ right
<u>Mid Alpha</u> <u>9.5-11.45 Hz</u>	Central		Hem $F(1, 45) = 47.18$ $p < .0001$			Left > right
				Left, cool	$p < .038$	Hi > ep
				Right, cool	$p < .057$	Hi > rep
	Parietal		Hem $F(1, 45) = 6.30$ $p < .016$			Left > right
				P3, Tep	$p < .018$	Hi > rep
				P4, Tep	$p < .027$	Hi > rep
<u>Hi Alpha</u> <u>11.5-13.45 Hz</u>	Central		Hem $F(1, 45) = 24.71$ $p < .0001$			Left > right

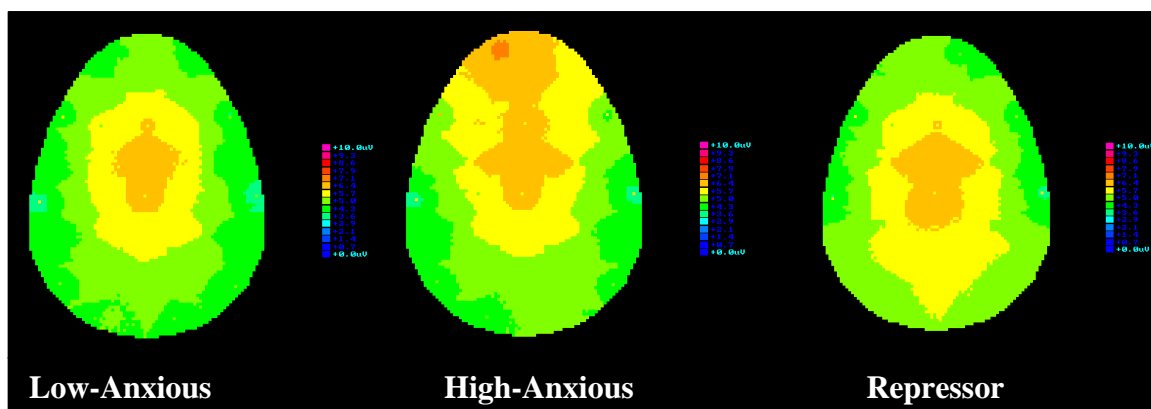
<u>Hz Band</u>	<u>Region</u>	<u>Interactions</u>	<u>Main Effect</u>	<u>Follow-up analyses</u>		
			<u>Level (effect)</u>	<u>Level</u>	<u>Significance</u>	<u>Explanation</u>
<u>Beta</u> <u>13.5-19.45 Hz</u>	Central		Hem $F(1, 45) = 23.11$ $p < .0001$			Left > right
<u>Beta 16</u> <u>16.5-19.45 Hz</u>	Central		Hem $F(1, 45) = 28.55$ $p < .0001$			Left > right
	Parietal		Hem $F(1, 45) = 3.74$ $p < .059$			Left > right

APPENDIX O

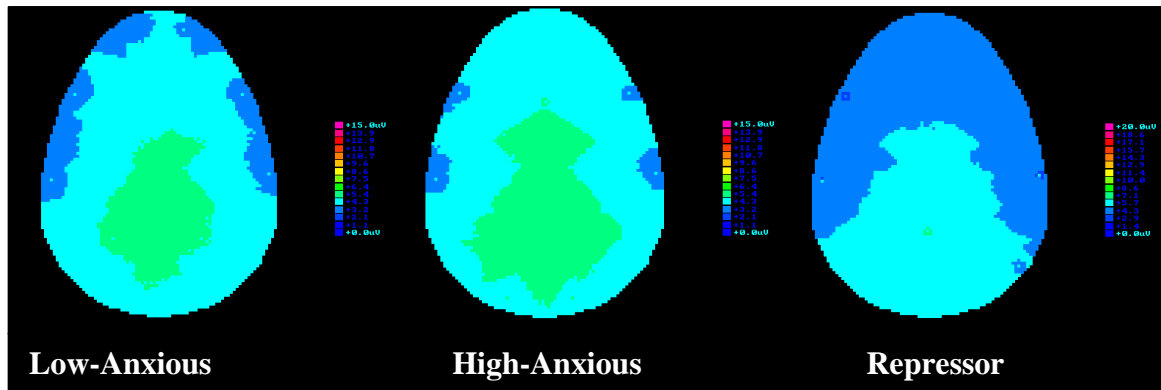
Figure 1. Topographic Maps of EEG Dynamics During the Neutral Condition of the Stroop Interference Task



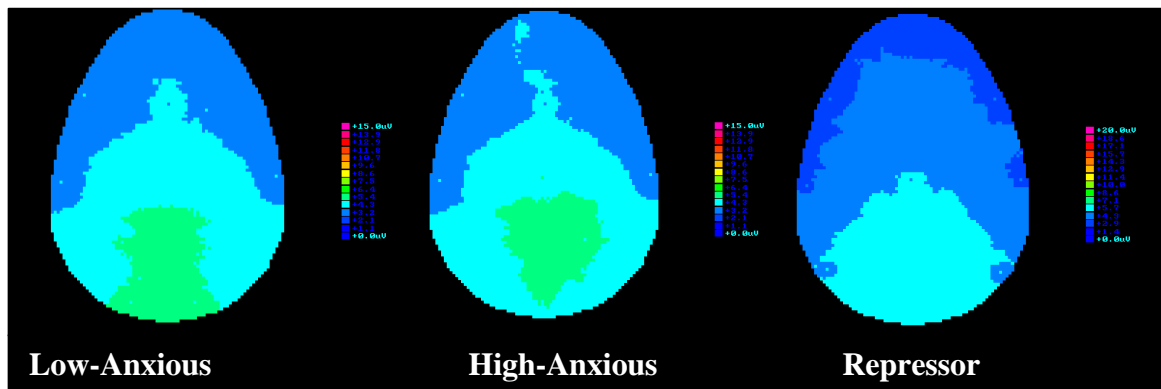
Low Theta Activity (3.5 - 5.45 Hz) During the Neutral Condition of the Stroop Interference Task in Low-Anxious, High-Anxious, and Repressor Individuals



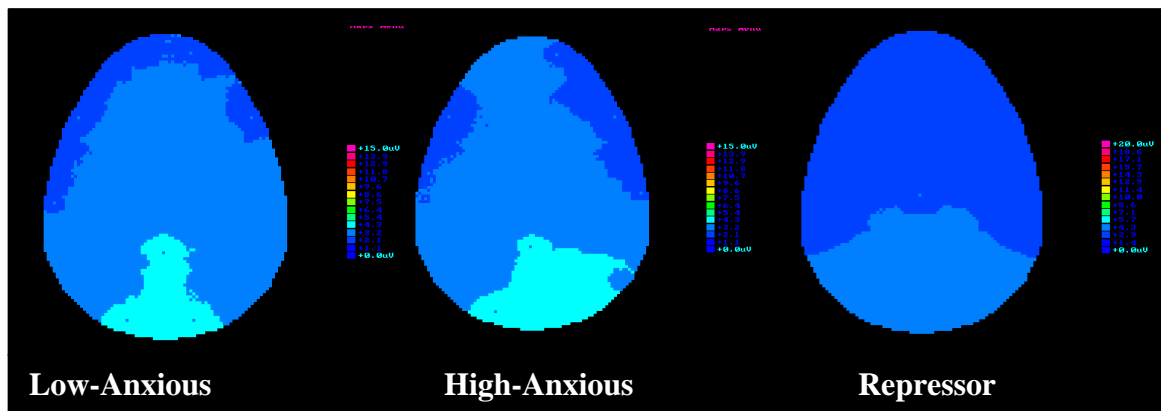
High Theta Activity (5.5 - 7.45 Hz) During the Neutral Condition of the Stroop Interference Task in Low-Anxious, High-Anxious, and Repressor Individuals



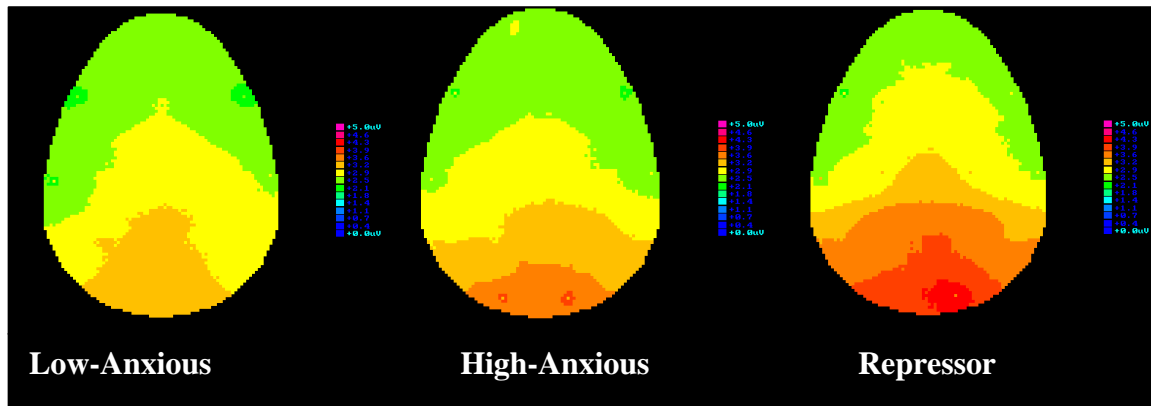
Low Alpha Activity (7.5 - 8.45 Hz) During the Neutral Condition of the Stroop Interference Task in Low-Anxious, High-Anxious, and Repressor Individuals



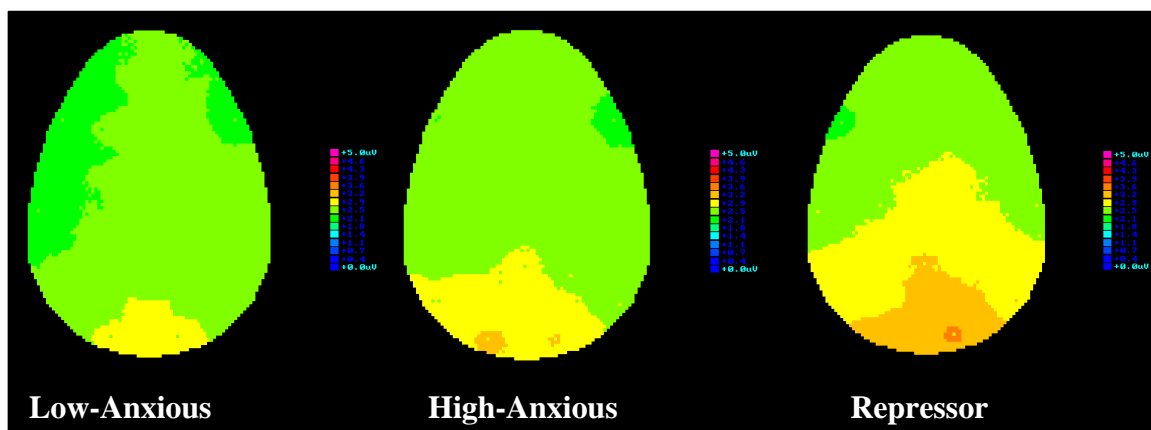
Mid-alpha Activity (9.5 - 11.45 Hz) During the Neutral Condition of the Stroop Interference Task in Low-Anxious, High-Anxious, and Repressor Individuals



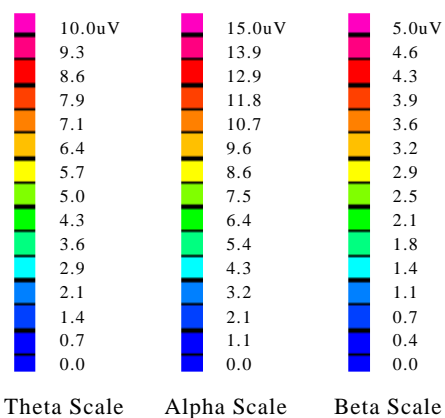
High Alpha Activity (11.5 - 12.45 Hz) During the Neutral Condition of the Stroop Interference Task in Low-Anxious, High-Anxious, and Repressor Individuals



Beta 13 Activity (13.5 - 15.45 Hz) During the Neutral Condition of the Stroop Interference Task in Low-Anxious, High-Anxious, and Repressor Individuals

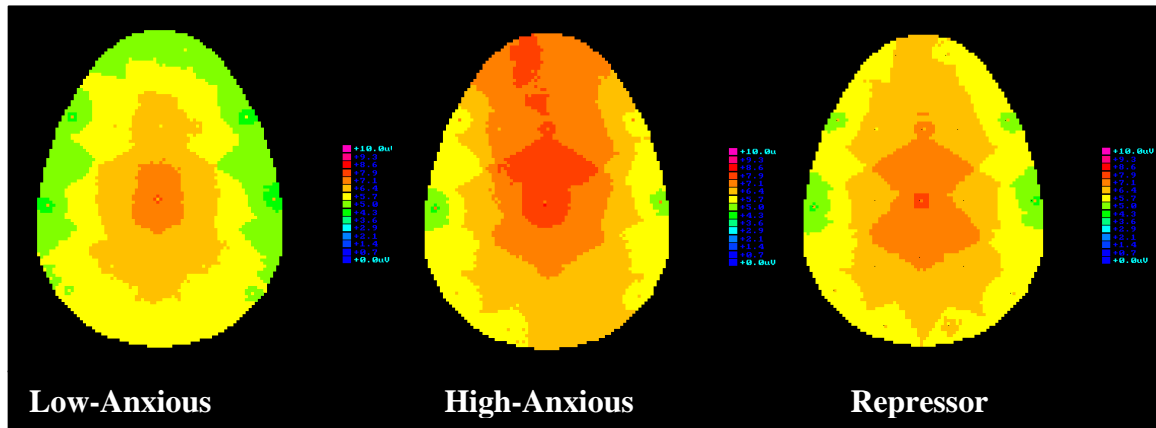


Beta 16 Activity (15.5 - 19.45 Hz) During the Neutral Condition of the Stroop Interference Task in Low-Anxious, High-Anxious, and Repressor Individuals

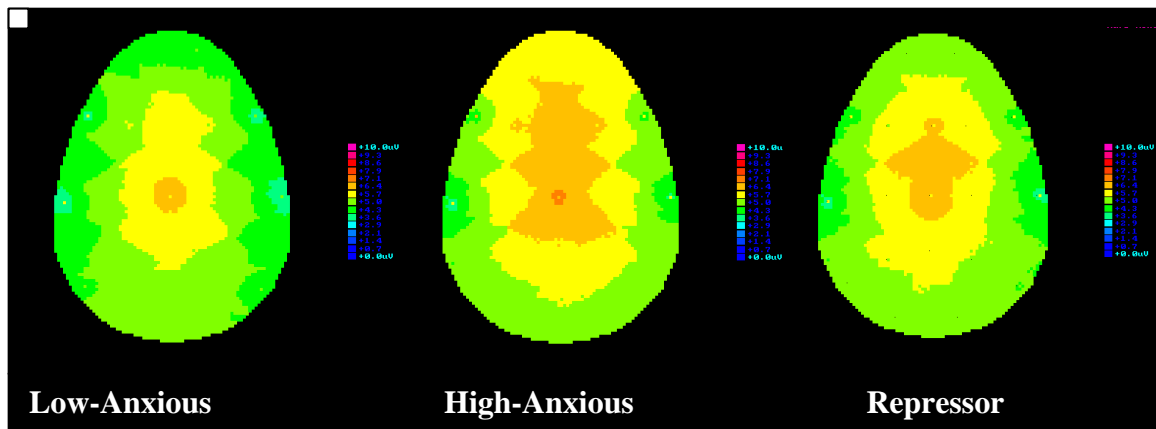


Mean Magnitude Scales for each of the Hz bands.

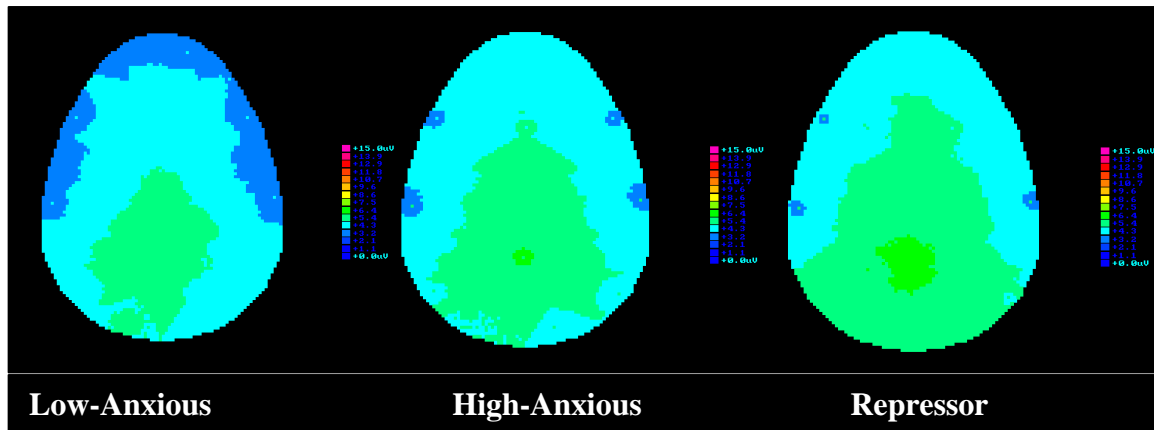
Figure 2. Topographic Maps of EEG Dynamics During the Negative Condition of the Stroop Interference Task



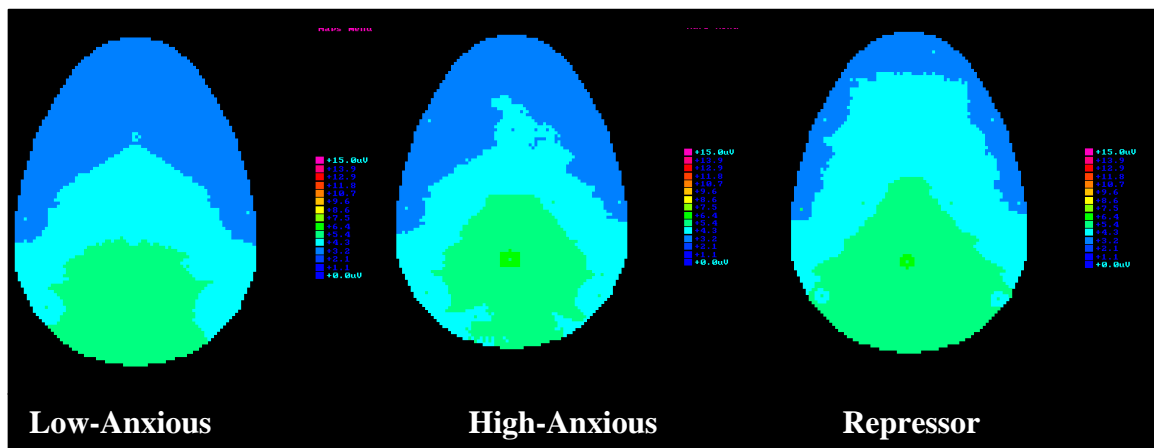
Low Theta Activity (3.5 - 5.45 Hz) During the Negative Condition of the Stroop Interference Task in Low-Anxious, High-Anxious, and Repressor Individuals



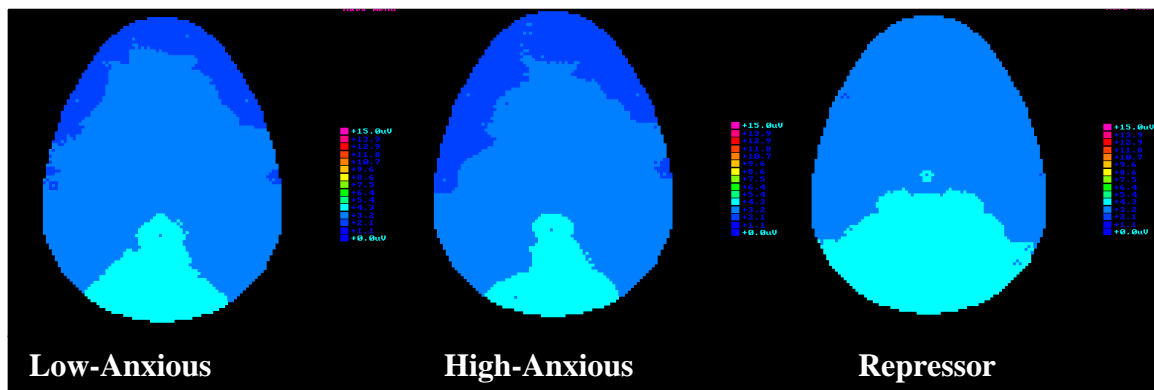
High Theta Activity (5.5 - 7.45 Hz) During the Negative Condition of the Stroop Interference Task in Low-Anxious, High-Anxious, and Repressor Individuals



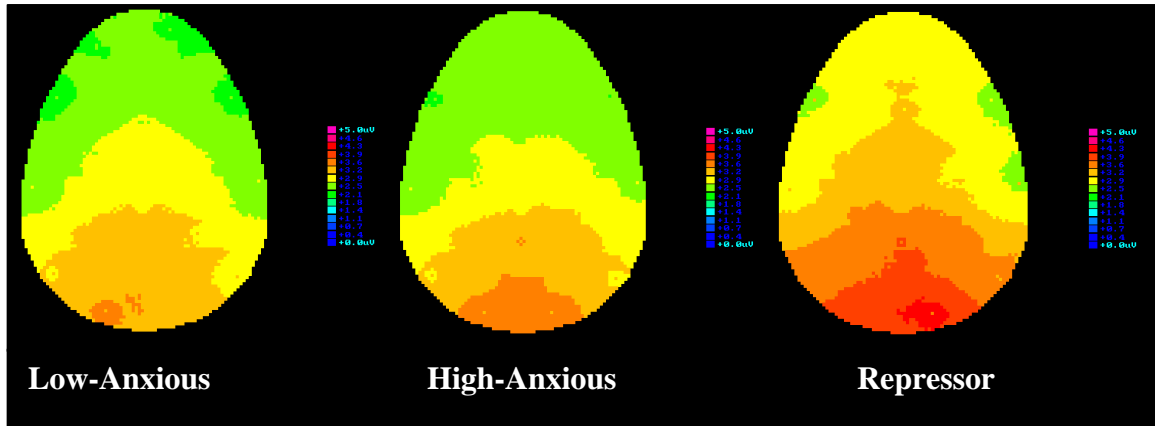
Low Alpha Activity (7.5 - 8.45 Hz) During the Negative Condition of the Stroop Interference Task in Low-Anxious, High-Anxious, and Repressor Individuals



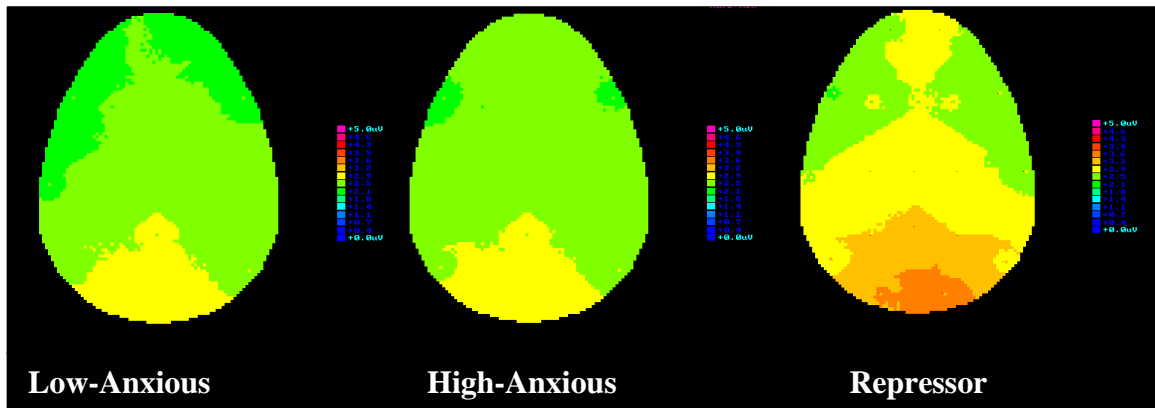
Mid-alpha Activity (9.5 - 11.45 Hz) During the Negative Condition of the Stroop Interference Task in Low-Anxious, High-Anxious, and Repressor Individuals



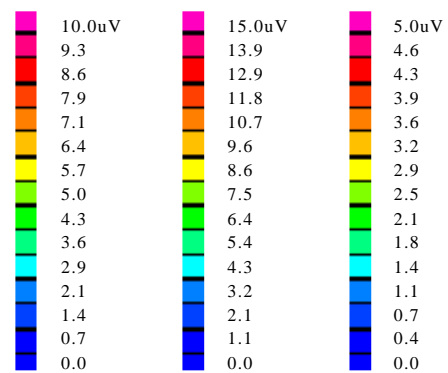
High Alpha Activity (11.5 - 12.45 Hz) During the Negative Condition of the Stroop Interference Task in Low-Anxious, High-Anxious, and Repressor Individuals



Beta 13 Activity (13.5 - 15.45 Hz) During the Negative Condition of the Stroop Interference Task in Low-Anxious, High-Anxious, and Repressor Individuals



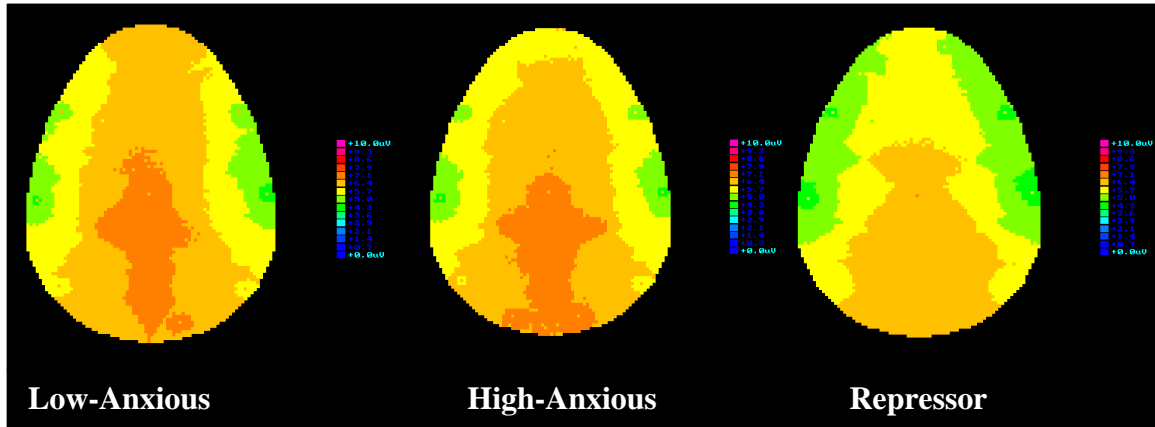
Beta 16 Activity (15.5 - 19.45 Hz) During the Negative Condition of the Stroop Interference Task in Low-Anxious, High-Anxious, and Repressor Individuals



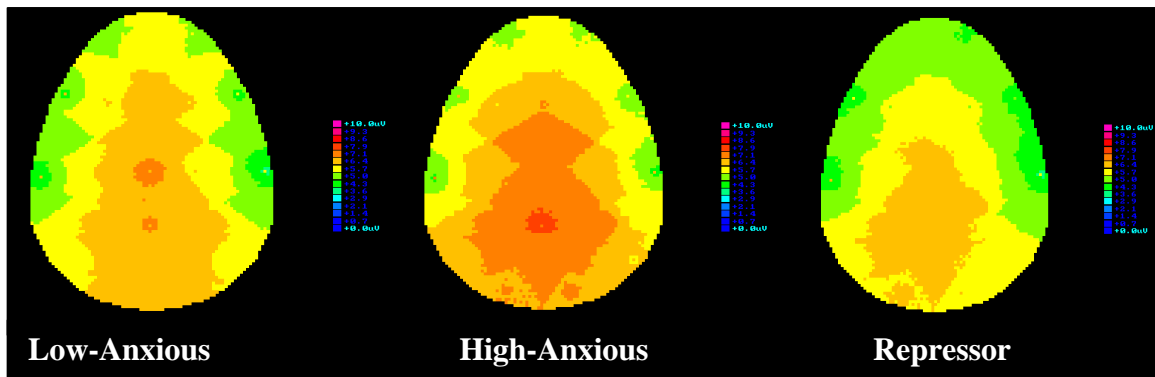
Theta Scale Alpha Scale Beta Scale

Mean Magnitude Scales for each of the Hz bands.

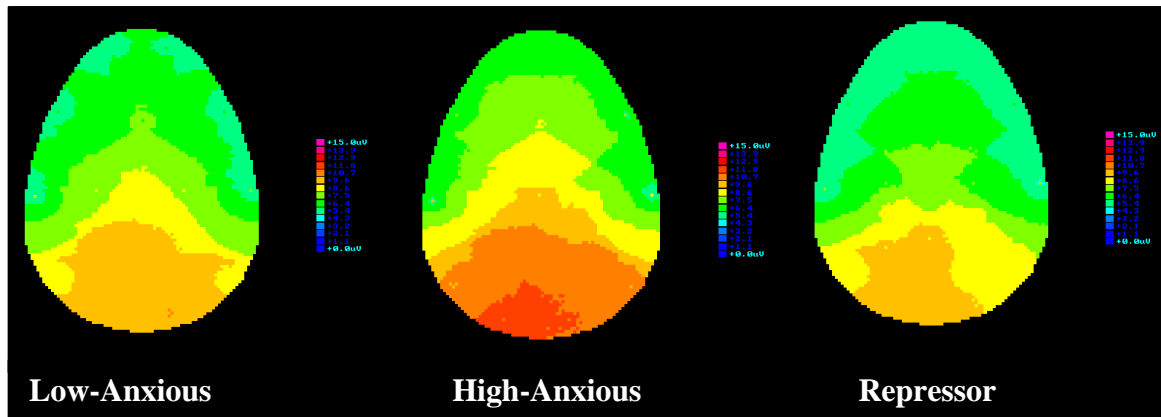
Figure 3. Topographic Maps of EEG Dynamics During the Cool Condition of the Hand Immersion



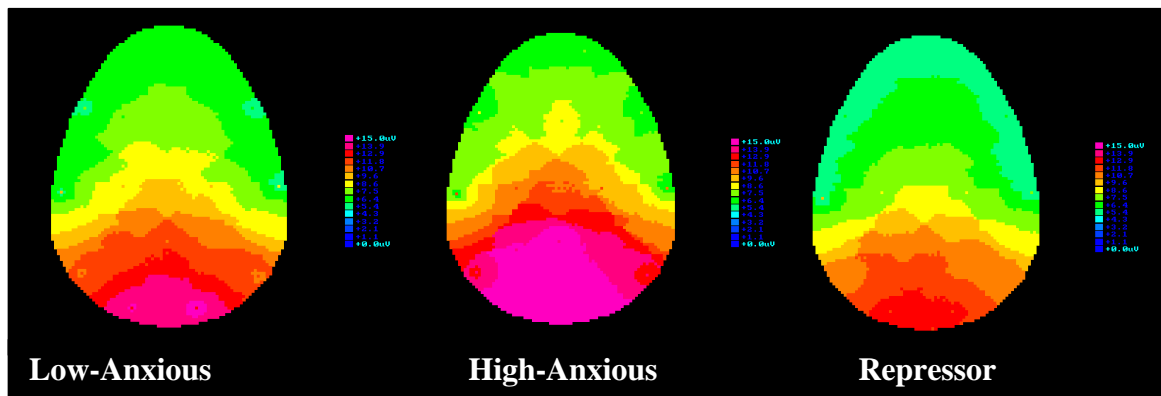
Low Theta Activity (3.5 - 5.45 Hz) During the Cool Condition of the Hand Immersion Task in Low-Anxious, High-Anxious, and Repressor Individuals



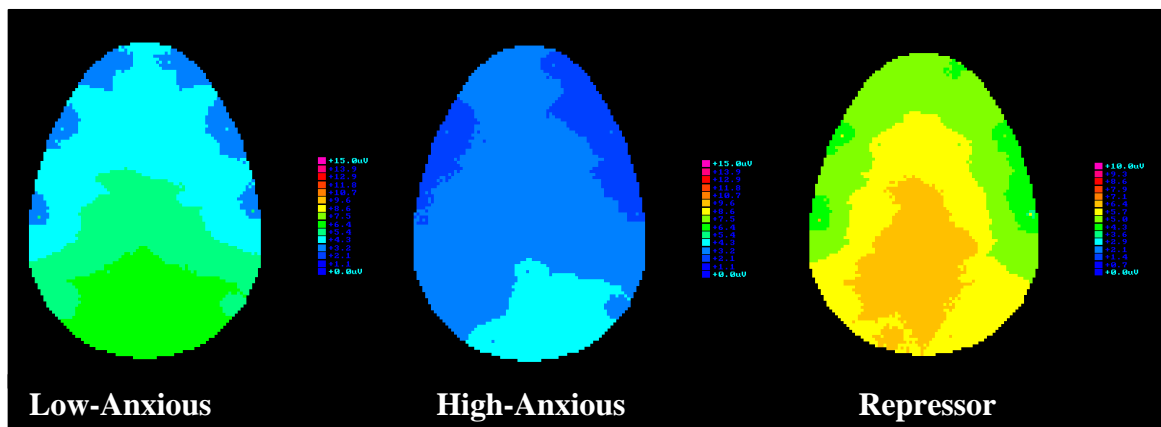
High Theta Activity (5.5 - 7.45 Hz) During the Cool Condition of the Hand Immersion Task in Low-Anxious, High-Anxious, and Repressor Individuals



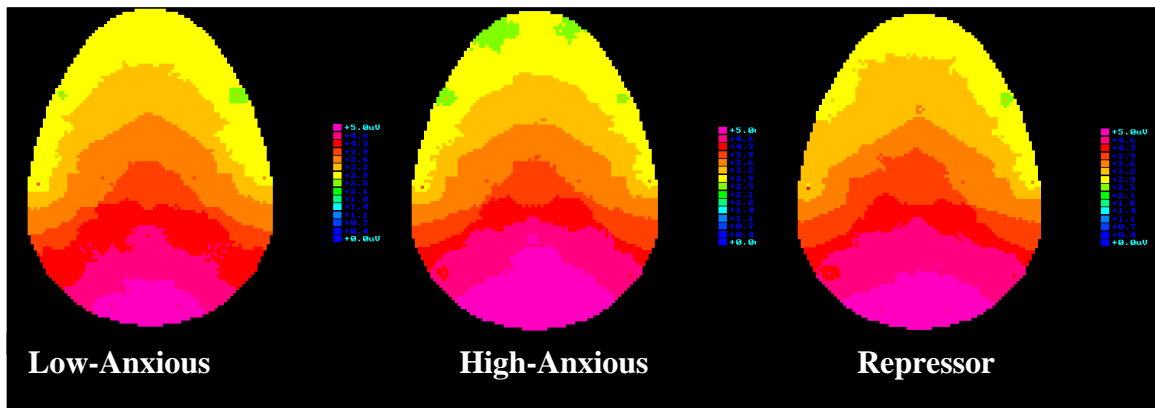
Low Alpha Activity (7.5 - 8.45 Hz) During the Cool Condition of the Hand Immersion Task in Low-Anxious, High-Anxious, and Repressor Individuals



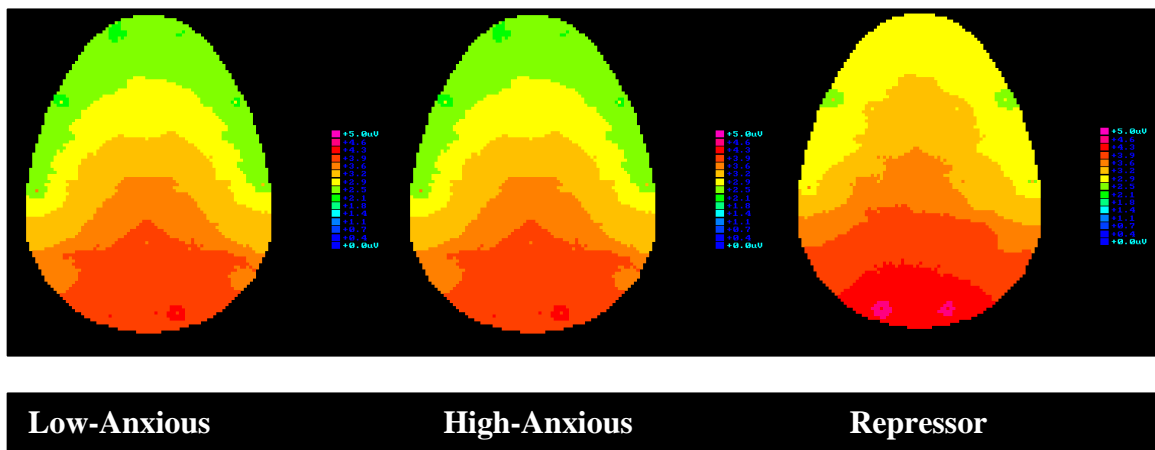
Mid-alpha Activity (9.4 - 11.45 Hz) During the Cool Condition of the Hand Immersion Task in Low-Anxious, High-Anxious, and Repressor Individuals



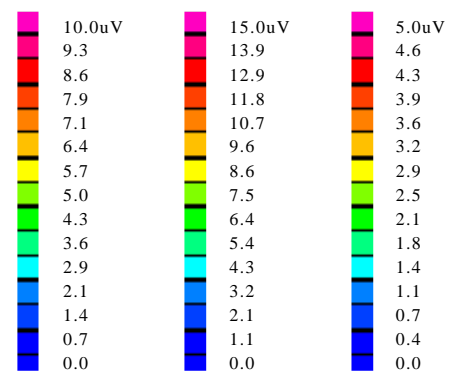
High Alpha Activity (11.5 - 12.45 Hz) During the Cool Condition of the Hand Immersion Task in Low-Anxious, High-Anxious, and Repressor Individuals



Beta 13 Activity (13.5 - 15.45 Hz) During the Cool Condition of the Hand Immersion Task in Low-Anxious, High-Anxious, and Repressor Individuals



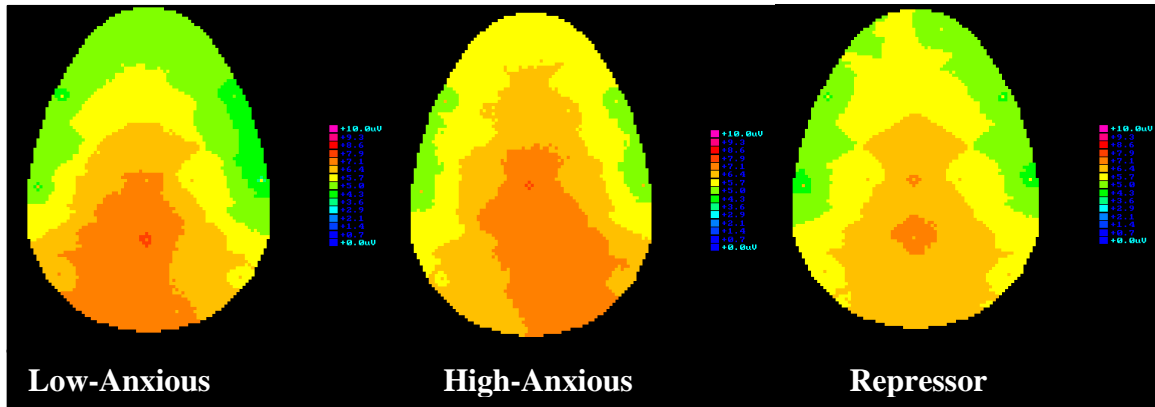
Beta 16 Activity (15.5 - 19.45 Hz) During the Cool Condition of the Hand Immersion Task in Low-Anxious, High-Anxious, and Repressor Individuals



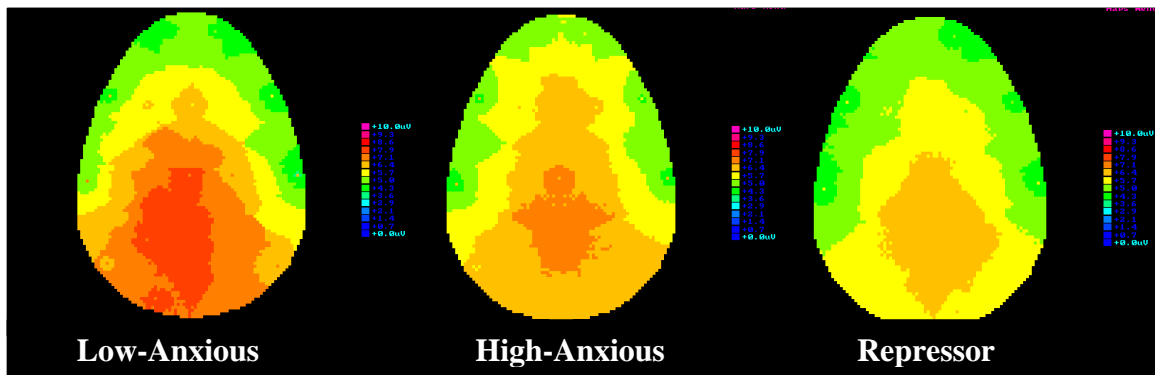
Theta Scale Alpha Scale Beta Scale

Mean Magnitude Scales for each of the Hz bands.

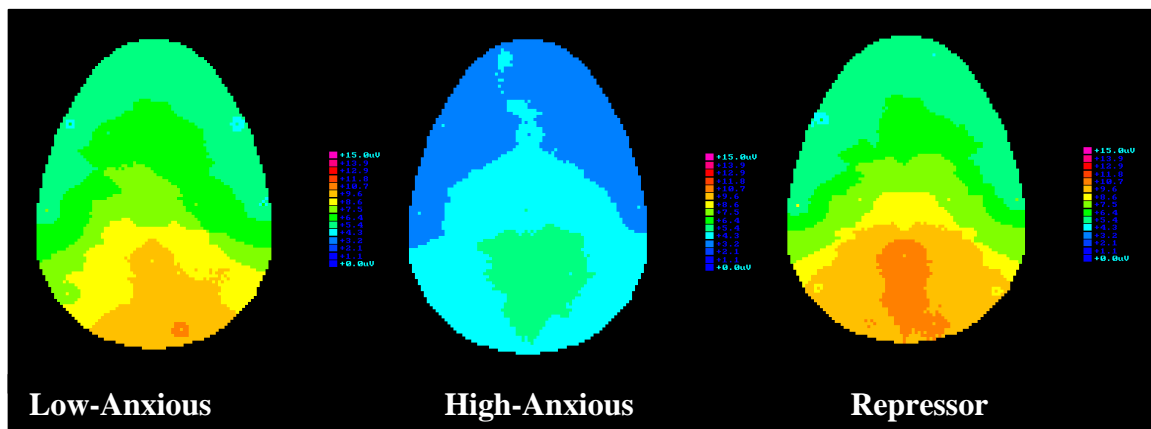
Figure 4. Topographic Maps of EEG Dynamics During the Cold Condition of the Hand Immersion Task



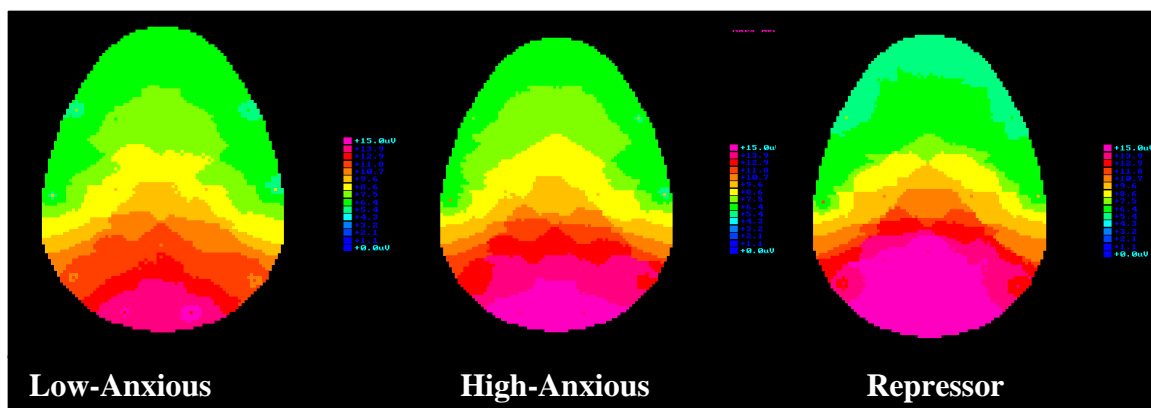
Low Theta Activity (3.5 - 5.45 Hz) During the Cold Condition of the Hand Immersion Task in Low-Anxious, High-Anxious, and Repressor Individuals



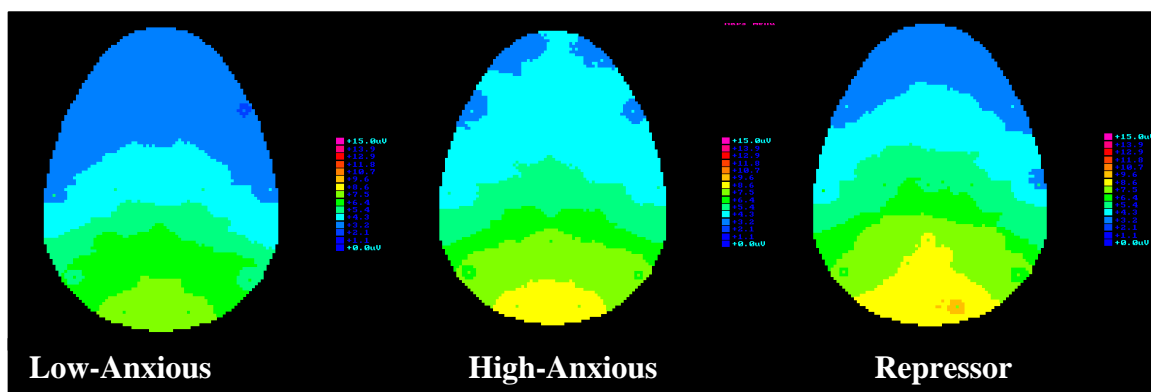
High Theta Activity (5.5 - 7.45 Hz) During the Cold Condition of the Hand Immersion Task in Low-Anxious, High-Anxious, and Repressor Individuals



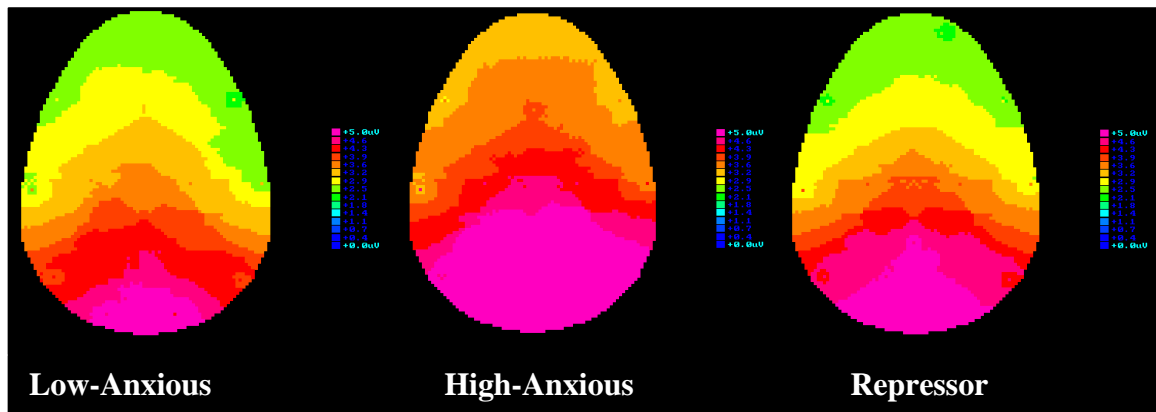
Low Alpha Activity (7.5 - 8.45 Hz) During the Cold Condition of the Hand Immersion Task in Low-Anxious, High-Anxious, and Repressor Individuals



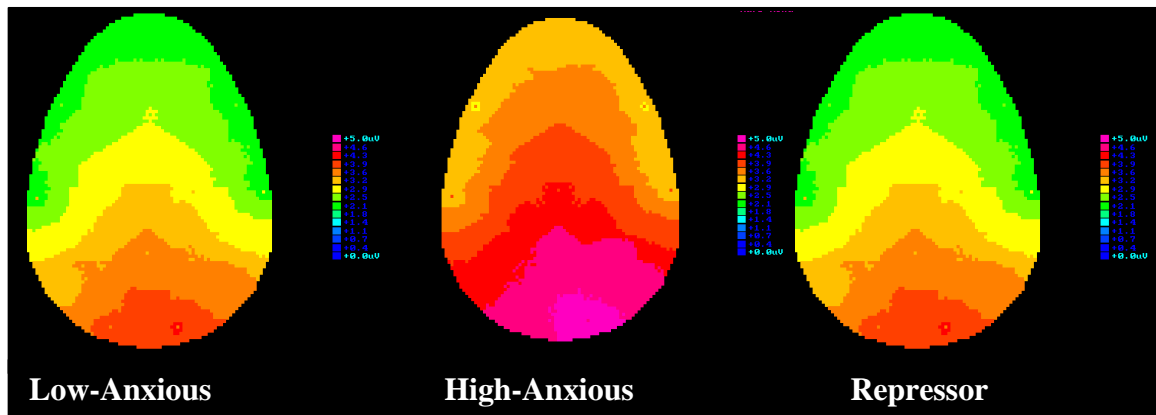
Mid-alpha Activity (9.5 - 11.45 Hz) During the Cold Condition of the Hand Immersion Task in Low-Anxious, High-Anxious, and Repressor Individuals



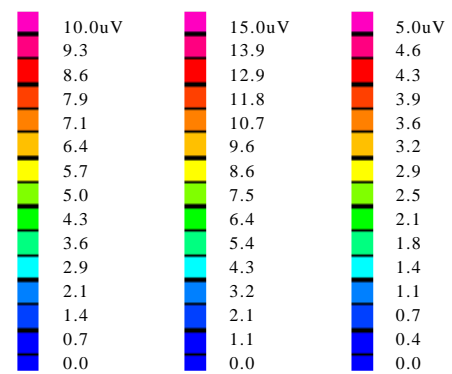
High Alpha Activity (11.5 - 12.45 Hz) During the Cold Condition of the Hand Immersion Task in Low-Anxious, High-Anxious, and Repressor Individuals



Beta 13 Activity (13.5 - 15.45 Hz) During the Cold Condition of the Hand Immersion Task in Low-Anxious, High-Anxious, and Repressor Individuals



Beta 16 Activity (15.5 - 19.45 Hz) During the Cold Condition of the Hand Immersion Task in Low-Anxious, High-Anxious, and Repressor Individuals



Theta Scale Alpha Scale Beta Scale

Mean Magnitude Scales for each of the Hz bands.

CURRICULUM VITAE

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E-mail: vendemia@mindspring.com

EDUCATION

- B.S.** Virginia Polytechnic Institute and State University, Blacksburg, VA. (May 1992) Psychology.
- Senior Thesis:** *The effect of light on unilateral stroke patients in a dichotic listening task.* David W. Harrison, Ph.D., supervising professor.
- M.A.** Hollins College, Hollins, VA. (May 1993) Experimental Psychology.
- Master's Thesis:** *Wandering behavior as a function of season and time of day.* George J. Ledger, Ph.D., major professor.
- Ph.D.** Virginia Polytechnic Institute and State University, Blacksburg, Virginia. (May 4, 1999). Experimental Psychology (Emphasis on Cognitive Neuroscience).
- Dissertation:** *Repressors vs. low- and high- anxious coping styles: EEG, heart rate, and blood pressure differences during cognitive and cold pain stressors.* Helen J. Crawford, Ph.D., major professor.

OTHER EDUCATION

- Ψ fMRI Workshop at Cognitive Neuroscience Society (1997, Boston, Massachusetts)
- Ψ C++ Programming (1 semester, Virginia Western College)
- Ψ Excel Training, Power Point Training (Veteran's Medical Center, Salem, Virginia)

HONORS

- Ψ Psi Chi National Honor Society in Psychology
- Ψ Outstanding Rating (July 1994). Department of Veteran's Affairs Medical Center, Salem VA.
- Ψ Dean's List (fall 1989 - spring 1993)
- Ψ 1992 Award for Achievement in Research, Psychology Department, Virginia Polytechnic Institute and State University

APPOINTMENTS AND POSITIONS

- 8/98-present** Temporary Instructor Cognitive/Experimental Program, University of Georgia. Currently teaching courses at the undergraduate and graduate levels in the areas of Sensation/Perception, Cognition, and Advanced General Psychology, Introductory Psychology, Honors Introductory Psychology. Supervisor: Jim Brown, Ph.D.
- 1/98-5/98** Coordinator of Applications to the Graduate Psychology Program, Virginia Polytechnic Institute and State University. Maintained a computer database of all demographic and scholastic information for applicants to the graduate psychology program, generated weekly status reports of applicants for each specialty area within psychology, communicated with all levels of faculty and staff regarding status of applicants, answered all queries regarding applicant standing. Supervisor: Jack Finney, Ph.D.
- 5/97-12/97** Graduate Research Assistant, Neurocognition Laboratory, Virginia Polytechnic Institute and State University. Senior Paid Research Assistant on a grant-sponsored joint study (P.I.: Helen Crawford) between Virginia Polytechnic Institute and State University and the University of Virginia investigating functional Magnetic Resonance Imaging (fMRI) correlates of pain and non-pain conditions during different levels of attention, as modified by individual differences in attentional processes. As the project coordinator, duties included overall coordinating of daily activities, planning and execution of all research projects, conducting cold pressor training, and supervision of undergraduate assistants receiving field study course credit for their participation. Other duties included working with the UVA team during recording and analyses of fMRI data, and maintaining ongoing education involving analysis of fMRI data. Supervisor: Helen J. Crawford, Ph.D.
- 5/97-8/97** Lab Coordinator, Psychophysiological Laboratory, Virginia Polytechnic Institute and State University. Responsibilities included redesign of lab space, development of lab guidelines, repair and maintenance on 10 psychophysiological recording stations, identification of damaged equipment including, but not limited to. EEG caps, leads, cords, bioamplifiers, computer cards and development of a new menu system for data handling. Requirements included familiarity with the following software and software driven systems: Windows 95, Windows 3.x, Neuroscan 3.0 & 4.0 EEG/ERP workstation, Lexicor Neurosearch-24 EEG/ERP workstation, Vision Lab, LC Technologies Eyegaze software, A-Codas and Dos 3.0, 5.0. Supervisor: Jack Finney, Ph.D.
- 8/95 - 5-97** Instructor, Virginia Polytechnic Institute and State University. Responsibilities included design of course syllabus; selection of textbooks and other course material; design, lectures, administration and grading of exams for classes of 60 - 90 students. Courses taught: Research Methods, Psychology of Learning and Psychology of Personality. Supervisors: Jack Finney, Ph.D. and Helen Crawford, Ph.D.
- 8/94 - 5/95** Neurocognition Laboratory, Virginia Polytechnic Institute and State University. Paid research assistant on a NASA Langley Research Center grant involving the EEG descriptors of attentional performance in low and high sustained attention subjects performing computer simulated pilot decision making tasks under varying workload. Responsibilities included developing running the experimental paradigm, recording EEG data, screening EEG data for artifacts and preparing manuscripts. Position required complete familiarity with the Neurosearch-24 bioamplifiers and the Lexicor Recording System. Supervisor: Helen J. Crawford, Ph.D.
- 1/94 - 5/94** Neurocognition Laboratory, Virginia Polytechnic Institute and State University. Paid research assistant on an NIH grant involving the EEG and SEP correlates of pain control in adults with chronic low back pain and matched control subjects. Operated Grass amplifiers and recording system and a Lexicor Neurosearch-24 EEG machine. Joint study with the Brain Center, Radford University, (Director: Karl Pribram). Supervisor: Helen J. Crawford, Ph.D.

- 6/95 - 9/96** Research Assistant, Endocrine Section, Department of Veteran's Affairs Medical Center, Salem, VA. Responsibilities included coordinating and participating as a co-investigator in a study investigating the endocrine concomitants of cigarette smoking and smoking cessation in chronic smokers and matched controls. Supervisor: Kim Ragsdale, Ph.D.
- 1/92 - 5/97** Student Trainee, Department of Psychology, Department of Veteran's Affairs Medical Center, Salem, Virginia. Clinical responsibilities included program design and selection of therapeutic techniques to be used in the Smoking Cessation Program. Specific duties related to the Smoking Program included screening and scheduling of patients, formulating individual treatment plans, consulting with staff physicians on individual cases to arrange for prescriptions of Nicotine Replacement Patch and design and maintenance of the Smoking Cessation Instruction Manual for use in the clinic. Additional clinical responsibilities included the yearly psychological evaluation of spinal cord patients. Research responsibilities included the formation and design of research projects and consultation with all levels of staff in regard to ongoing projects, assisting with statistical analysis on ongoing research projects and auditing medical research projects for the Human Subjects Committee. Supervisors: James J. Lanter, Ph.D. and Jerome Gilmore, Ph.D.
- 8/93 - 12/93** Graduate Teaching Assistant, Introductory Psychology Discussion Leader. Responsible for discussion classes of about fifty students each. Led discussions on basic psychological topics. Supervisor: Mike Casey, M.S.
- 1/93 - 5/93** Guest Lecturer, Department of Psychology, Hollins College, Hollins, VA. Senior Level Seminar on Physiological Psychology. Supervisor: George Ledger, Ph.D.
- 10/90 - 12/91** Volunteer Research Student, Department of Veteran's Affairs Medical Center, Salem, VA. Responsibilities included screening elderly patients using the Mini-Mental Status for a study involving altered rates of positron emission across pseudo-depressive, alcohol related and Alzheimer's type dementias. Additional responsibilities included coordinating and participating as a researcher in an experiment involving the effects of bright light exposure on accuracy and response time during a dichotic listening study in unilateral stroke patients. Supervisors: James Lanter, Ph.D. and David Harrison, Ph.D.

PROFESSIONAL AFFILIATIONS

- Ψ Student member, Society for Psychophysiological Research
- Ψ Student member, American Psychological Association
- Ψ Student member, American Psychological Society
- Ψ Student member, Cognitive Neuroscience Society

RESEARCH PUBLICATIONS

- Coplin^Ψ, J. M., Ragsdale, K. G. (1997). Efficacy of nicotine transdermal program vs. a nicotine fading program: a treatment outcome study. Federal Practitioner, *14*, 46-48, 56.
- Crawford, H. J., Knebel, T., Kaplan, L., Vendemia, J.M.C., Xie, M., Jameson, S. & Pribram, K.H. (1998). Hypnotic analgesia: I. Somatosensory event-related potential changes to noxious stimuli and II. Transfer learning to reduce chronic low back pain. International Journal of Clinical and Experimental Hypnosis, *46*, 92-132.
- Crawford, H.J., Knebel, T. & Vendemia, J.M.C. (1998). The nature of hypnotic analgesia: Neurophysiological foundation and evidence. Contemporary Hypnosis, *15*, 22-23.
- Crawford, H.J., Knebel, T.F., Vendemia, J. M. C., Kaplan, L. & Ratcliff, B. (1995). EEG activation patterns during tracking and decision-making tasks: Differences between low and high sustained adults. Proceedings of the 8th International Symposium on Aviation Psychology, (pp. 886-890). Columbus, OH.
- Crawford, H. J., Knebel, T. F. & Coplin, J. M. (1994). Hypnotic analgesia is no longer a paradox: Neurophysiological and cognitive processes explored. International Journal of Clinical and Experimental Hypnosis, *42*, 478-479.
- Crawford, H. J., Knebel, T., Vendemia, J. M. C., & Horton, J. E. (in press). La naturaleza de la analgesia hipnótica: bases y evidencias neurofisiológicas. Anales de Psicología.

PUBLISHED ABSTRACTS

- Vendemia, J. M. C., Ragsdale, K. G. & Iranmanesh, A. (1995). Activity of the hypothalamic-pituitary-adrenal axis and β -endorphin secretory dynamics in men habituated to cigarette smoking. Psychophysiology, *32*, S81.
- Coplin, J. M., Knebel, T. F. & Crawford, H. J. (1994). Cold pressor pain: EEG topographical pattern differences before and during dips as measured by cognitive variables. Psychophysiology, *31*, s36.
- Downs III, J.H., Crawford, H.J., Plantec, M.B., Horton, J.E., Vendemia, J.M.C., Harrington, G.S., Yung, S. & Shamro, C. (1998). Attention to painful somatosensory TENS stimuli. NeuroImage, *7*, S432.
- Crawford, H.J., Horton, J.E., Hirsch, T.B., Harrington, G.S., Plantec, M.B., Vendemia, J. M. C., Shamro, C., McClain-Furmanski, D., & Downs III, J.H. (1998). Attention and disattention (hypnotic analgesia) to painful somatosensory TENS stimuli differentially affects brain dynamics: a functional magnetic resonance imaging study. International Journal of Psychophysiology, *30*(1-2), 77.
- Crawford, H.J., Horton, J.E., Harrington, G.S., Vendemia, J.M.C., Plantec, M.B., Yung, S., Shamro, C. & Downs III, J.H. (1998). Hypnotic analgesia (disattending pain) impacts neuronal network activation: an fMRI study of noxious somatosensory TENS stimuli. NeuroImage, *7*, s436.
- Lamas, J., Crawford, H.J. & Vendemia, J.M.C. (1997). MMN and auditory event-related potentials during posthypnotically suggested deafness: effect of hypnotizability level. Psychophysiology.
- Crawford, H.J., Knebel, T., Pribram, K.H., Kaplan, L., Vendemia, J.M.C., Xie, M., & L'Hommedieu (1997). Somatosensory event-related potentials and allocation of attention to pain: effects of hypnotic analgesia as moderated by hypnotizability level. International Journal of Psychophysiology, *25*, 72-73.

^Ψ Maiden name

Crawford, H.J., Knebel, T., Kaplan, L., Vendemia, J.M.C., Jamison, S. & Pribram, K.H. (1996). Learning to control experimental pain in the laboratory and its effects on chronic low back pain. International Journal of Clinical and Experimental Hypnosis.

Crawford, H. J., Knebel, T. F., Vendemia, J. M. C., Kaplan, L. & Ratcliff, B. (1995, April). EEG activation patterns during tracking and decision-making tasks: Differences between low and high sustained attention adults. Paper presented at the 8th International Symposium on Aviation Psychology, Columbus, OH.

Crawford, H., J., Knebel, T. & Coplin, J. (1994, October). Hypnotic analgesia is no longer a paradox: Neurophysiological and cognitive processes explored. International Journal of Clinical and Experimental Hypnosis, 42, 478-479.

Crawford, H., J., Knebel, T. F., Coplin, J. M., Scanlon, J. M., Fulkerson, B. & Houzouris, N. G. (1994, October). EEG topographic map differences in high and low sustained-attention adults. Paper presented to the Society for Psychophysiological Research, Atlanta, GA.

MANUSCRIPTS IN PREPARATION

Vendemia, J.M.C., Horton, J. & Crawford, H.J. (manuscript in preparation). Evidence for personality mediated inhibition: physiological reactivity and performance of repressors and non-repressors on an emotional stroop interference Task.

Lamas, J., Crawford, H.J. & Vendemia, J.M.C. (manuscript under editorial review). Processing irrelevant auditory stimuli: Hypnotizability level moderates ERP amplitudes and latencies.

Crawford, H.J., Vendemia, J.M.C. & Knebel, T.F. (manuscript in preparation). Dynamic EEG pattern shifts during attention and hypnotic analgesia: Differences between low and high hypnotizables in their response to cold pressor pain.

PROFESSIONAL PRESENTATIONS

1. Presentations

Vendemia, J.M.C., Horton, J. & Crawford, H.J. (1998, May). Physiological reactivity of repressors and non-repressors on an emotional stroop interference Task. Poster session presented at the 10th Annual Convention of the American Psychological Society, Washington, DC.

Vendemia, J.M.C., Karnasuta, M.A. & Crawford, H.J. (1998, May). Reaction Time and Errors during an Emotionally Valenced Computer Stroop Task. Poster session presented at the 10th Annual Convention of the American Psychological Society, Washington, DC.

Downs III, J.H., Crawford, H.J., Plantec, M.B., Horton, J.E., Vendemia, J.M.C., Vendemia, Harrington, G.C., Yung, S. & Shamro, C. (1998, June). Attention to painful somatosensory TENS stimuli. The Cognitive Neuroscience Society, Toronto, Canada.

Crawford, H.J., Horton, J.E., Harrington, G.C., Vendemia, J.M.C., Plantec, M.B., Jung, S., Shamro, C & Downs III, J.H. (1998, June). Hypnotic analgesia (disattending pain) impacts neuronal network activation: an fMRI study of noxious somatosensory TENS stimuli. The Cognitive Neuroscience Society, Toronto, Canada.

Lamas, J., Crawford, H.J. & Vendemia, J.M.C. (1997, October). MMN and auditory event-related potentials during posthypnotically suggested deafness: Effect of hypnotizability level. Paper presented at the 37th Annual Meeting of the Society for Psychophysiological Research, Cape Cod, MA.

Vendemia, J. M. C., Ragsdale, K. G. & Iranmanesh, A. (1995). Activity of the hypothalamic-pituitary-adrenal axis and -endorphin secretory dynamics in men habituated to cigarette smoking. Poster session presented at the 35th Annual Meeting of the Society for Psychophysiological Research, Toronto, Canada.

- Crawford, H. J., Knebel, T. F., Vendemia, J. M. C., Kaplan, L. & Ratcliff, B. (1995, April). EEG activation patterns during tracking and decision-making tasks: Differences between low and high sustained attention adults. Paper presented at the Eighth International Symposium on Aviation Psychology, Columbus, OH.
- Coplin, J. M., Knebel, T. F. & Crawford, H. J. (1994, October). Cold pressor pain: EEG topographical differences before and during dips as moderated by cognitive variables. Poster session presented at the 34th Annual Meeting of the Society for Psychophysiological Research, Atlanta, GA.
- Crawford, H. J., Knebel, T., Coplin, J., Fulkerson, B., Scanlon, J., Sawyer, J. & Houzouris, N. (1994, October). EEG topographic map differences in high and low sustained-attention adults: tracking tasks. Poster session presented at the 34th Annual Meeting of the Society for Psychophysiological Research, Atlanta, GA.
- Crawford, H. J., Knebel, T. & Coplin, J. (1994, October). Hypnotic analgesia is no longer a paradox: Neurophysiological and cognitive process explored. In A. Tellegen (Chair), Celebrating E. R. "Jack" Hilgard's 90th birthday: On individual differences in hypnotic ability and one individual's difference to the study of hypnosis. Symposium conducted at the 45th Annual Scientific Program of the Society for Clinical and Experimental Hypnosis, San Francisco, CA.
- Coplin, J. M., Lanter, J. J., Ledger, G. J., The quantification of wandering behavior in Alzheimer's patients. Paper presented at the spring Convention of the Virginia Psychological Association, April, 1993.
- Coplin, J. M., Harrison, D. W., Lanter, J. J., The effect of light on unilateral stroke patients in a dichotic listening task: a preliminary report. Paper presented at the spring Convention of the Virginia Psychological Association, April, 1992.
- Bunce, V. L., Coplin, J. M., Harrison, D. W. Child- or adult- directed speech and esteem: effects on performance and arousal in elderly adults. Paper presented at the Third Annual American Psychological Society Convention, June, 1991.

2. Invited Addresses

- Crawford, H. J., Horton, J., Hirsch, T. B., Harrington, G. S., Plantec, M. B., Vendemia, J. M. C., Shamro, C., McClain-Furmanski, D., and Downs III, J. H. (October, 1998). Attention and Disattention (Hypnotic Analgesia) to Painful Somatosensory TENS Stimuli Differentially Affects Brain Dynamics: A Functional Magnetic Resonance Imaging Study. Invited Paper for Symposium on "New Perspectives on Brain Imaging of Human Pain and Pain Control: Symposium in Remembrance of Bonica" (Chair: Andrew Chen). 9th World Congress of Psychophysiology, Sicily, Italy.

3. Refereed Scientific Papers

- Downs III, J. H., Crawford, H. J., Plantec, M. B., Horton, J. E., Vendemia, J. M. C., Harrington, J. S., Yung, S., Shamro, C. (June, 1998). Attention to Painful Somatosensory TENS Stimuli: An fMRI Study. Paper presented at the 4th International Conference on Function Mapping of the Human Brain, Montreal, Canada.
- Crawford, H. J., Horton, J. E., Harrington, G. S., Vendemia, J. M. C., Plantec, M. B., Yung, S., Shamro, C., & Downs III, J. H. (June, 1998). Hypnotic Analgesia (Disattending Pain) Impacts Neuronal Network Activation: An fMRI Study of Noxious Somatosensory TENS Stimuli. Paper presented at the 4th International Conference on Function Mapping of the Human Brain, Montreal, Canada.
- Lamas, J., Crawford, H. J., & Vendemia, J. M. C. (1997, October). MMN and Auditory Event-Related Potentials During Posthypnotically Suggested Deafness: Effect of Hypnotizability Level. Paper presented at the Society for Psychophysiological Research, Cape Cod, MA.
- Crawford, H. J., Knebel, T. F., Kaplan, L., Vendemia, J. M. C., Jamison, S., & Pribram, K. H. (1996, November). Learning to Control Experimental Pain in the Laboratory and its Effects on Chronic Low Back Pain. Paper in symposium "Cognitive and Neurophysiological Aspects of Hypnosis" presented at the Society for Clinical and Experimental Hypnosis, Tampa, FL.
- Crawford, H. J., Knebel, T. F., Pribram, K. H., Kaplan, L., Vendemia, J. M. C., Xie, M., & Hommedieu, C. L. (1996, July). Somatosensory Event-Related Potentials and Allocation of Attention to Pain: Effects of Hypnotic Analgesia as

Moderated by Hypnotizability Level. Invited paper presented in symposium: "Neurophysiological and Attention Aspects of Hypnosis" presented at the 8th World Congress of Psychophysiology, Tampere, Finland.

Crawford, H. J., Knebel, T. F., Kaplan, L., Vendemia, J., Xie, M., & Pribram, K. H. (1996, April). Hypnotically suggested analgesia as moderated by hypnotic susceptibility level: Somatosensory Event-Related Potentials. Paper Presented at the Cognitive Neuroscience Society meeting, San Francisco, CA.