

FOUR INVERSIONS OF THE SOUL

Terror, Depression, Rage, and Lust as Lateralised Collapses of the Autonomic Architecture

A Multi-Level Analysis Through the Integrated Framework

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Abstract

Four common affective states — terror (PTSD), depression, rage, and lust — are analysed as four distinct inversions of a single autonomic architecture through seven levels of the integrated Neurological Qabalah–polyvagal framework. Terror is the right-lateralised noradrenergic flood: the Courage circuit overwhelmed, the right Yesod circuit driving sensory-mediated visual-spatial re-experiencing. Depression is the left-lateralised monoamine drought: the Silence circuit collapsed, the subgenual ACC actively suppressing brainstem output, the left Yesod circuit sustaining verbal-narrative rumination. Rage is the bilateral catecholamine firestorm: both hidden paths flooding simultaneously, both executive pillars down, a bilateral projection of hostile attribution. Lust is the dopaminergic progressive dimming: the Silence circuit's tonic governance overwhelmed by ascending reward-system dopamine, Chesed's relational engagement redirected to objectification, the ACC gradually dimmed across a temporal window that closes as arousal intensifies. Four inversions. One architecture. Each recruiting different dimensions of the hidden paths' bilateral subcortical regulatory infrastructure, each requiring a different lateralised and temporally calibrated contemplative corrective.

A note on polyvagal theory (2026). This paper uses the ventral / sympathetic / dorsal vocabulary of polyvagal theory, whose specific neuroanatomical and evolutionary premises have been formally contested since it was written (Grossman et al., *Clinical Neuropsychiatry*, 2026, with Porges's rebuttal). The contested claims are the phylogenetic hierarchy and the dorsal-motor-nucleus mechanism; the three autonomic states themselves are well-documented clinical realities, and it is on those states — together with the lateralised mechanisms detailed below — that this paper's argument rests. See *The Three Kingdoms of the Autonomic Soul*, III.4.

I. The Analytical Framework

The companion papers in this series have established an integrated framework combining the Neurological Qabalah, polyvagal theory, the observation principle, and the lateralised executive architecture. This paper applies all seven levels of that framework to four conditions, demonstrating that each represents a distinct inversion of the same architecture.

The seven levels are: (1) the hidden paths — the bilateral subcortical autonomic regulatory systems; (2) the ACC/Tiphareth — the cortical gatekeeper; (3) the polyvagal hierarchy — the three autonomic kingdoms and neuroception; (4) the lateralised executive — Geburah (proactive-analytical) and Chesed (reactive-contextual); (5) the lateralised regulatory signatures — the specific TMS-confirmed functional differences between left and right DLPFC governance; (6) the observation principle — the relationship between projected and observed processing; and (7) the cathartic corrective — the specific contemplative intervention each inversion requires.

II. The Lateralised Foundation: Two Circuits Within Yesod

Yesod is bilateral. The left and right amygdalae connect with distinct regions mainly within the ipsilateral hemisphere (Baeken et al., 2014). The right amygdala specialises in sensory-mediated, automatic, visual threat detection, connecting preferentially with the right DLPFC, right insula, and right posterior cortex. The left amygdala specialises in cognitive, verbal, sustained emotional processing, connecting preferentially with the vmPFC. The left hippocampus stores verbal-episodic memory; the right hippocampus stores spatial-scene memory (Bonner-Jackson et al., 2016; Klur et al., 2023).

The left Yesod circuit (Hod → left hippocampus → left amygdala → vmPFC) is governed by the Silence hidden path. The right Yesod circuit (Netzach → right hippocampus → right amygdala → right DLPFC/insula) is governed by the Courage hidden path. Each inversion recruits these bilateral circuits in a distinct pattern.

III. The Flood: Terror and PTSD

III.1 — Hidden Paths: Right-Lateralised Noradrenergic Flood

The locus coeruleus is chronically hyperreactive, producing exaggerated phasic noradrenergic surges through the MFB to the prefrontal cortex (Naegeli et al., 2018). The Courage circuit is chronically overloaded: each trauma-associated cue triggers an ascending noradrenergic wave through the right-hemisphere circuit (right amygdala → right hippocampal spatial-scene replay → Netzach's visual-spatial display). The Silence circuit is secondarily compromised: chronic stress disrupts the tonic serotonergic-dopaminergic baseline.

III.2 — ACC/Tiphareth: Overwhelmed Gatekeeper

The dorsal ACC is hyperactivated in a narrow threat-detection band while the vmPFC is chronically hypoactive (Patel et al., 2012). Fear extinction is impaired because the vmPFC cannot generate the inhibitory extinction memory. The vicious cycle: the flood disables the regulator, the regulator cannot stop the flood.

III.3 — Polyvagal: Sympathetic Lock (Escape-Directed)

The polyvagal state is locked in sympathetic dominance with escape-directed motor output — freeze or flight. The vagal brake is chronically disengaged. Neuroception is faulty: safe environments are read as dangerous. The ventral vagal system cannot re-engage because the sympathetic override has not been resolved.

III.4 — Lateralised Executive: Chesed Dysregulated, Geburah Overwhelmed

The right DLPFC (Chesed) is engaged but locked in chronic reactivity to projected threats rather than providing flexible acceptance. The left DLPFC (Geburah) is overwhelmed by the ascending noradrenergic flood — the analytical governance that would identify the projected threat as a memory is disabled. Verbal acknowledgement of safety ('I know I am safe') remains locked in Hod, which has no descending brainstem access.

III.5 — Regulatory Signatures: Chesed's Deactivation Attenuated

During safe periods, right DLPFC stimulation significantly deactivates downstream threat-processing regions. During threat, this deactivation is attenuated (Balderston et al., 2024). Excitatory rTMS (10 Hz) of the right DLPFC increases anxiety (Balderston et al., 2020). Chesed's problem is not underpowering but overactivity in the wrong mode. The left DLPFC's tonic regulatory relationship with BA25 and the LC is secondarily disrupted: the thermostat knocked offline by the flood.

III.6 — Observation Principle: The Projected Threat

The traumatic memory is projected through the right-hemisphere visual-emotional system: the right hippocampus constructs the spatial scene, the right amygdala tags it with sensory-mediated fear, and Netzach's visual-spatial cortex displays it as present-tense reality. The observation principle: recognise the projection as self-generated ('this is a memory my mind is projecting, not a present event'), and the reconsolidation window opens, the emotional tagging shifts, the autonomic activation subsides.

III.7 — Cathartic Corrective: Calming the Flood

The three-practice sequence: interoceptive detection of the ascending flood's physiological fingerprint (Practice One through Netzach); acceptance-based holding maintaining the ACC's evaluative field during the flood (Practice Two through Chesed/Tiphareth); observation and recognition of the traumatic projection (Practice Three). The Courage path calms as the right amygdala's drive diminishes because the projection driving it has been resolved.

Terror is the right-lateralised flood. The ascending lanes are overloaded. The gatekeeper is overwhelmed. The right pillar is dysregulated, the left disabled. The projected threat disguises its source. The corrective calms the flood by extending the watchtower's sight.

IV. The Drought: Depression

IV.1 — Hidden Paths: Left-Lateralised Monoamine Collapse

The SEEKING system's motivational circuit is hypoactive. All three monoamine systems are implicated — dopamine, norepinephrine, and serotonin — but the signature deficit is the dopaminergic SEEKING drive's collapse. The Silence circuit is the primary site of dysfunction: the tonic serotonergic-dopaminergic thermostat has lost its set-point. Deep brain stimulation of the MFB produces rapid antidepressant effects (Schlaepfer et al., 2013), confirming the infrastructure is intact but underactive.

IV.2 — ACC/Tiphareth: The Sun Turned Cold

The subgenual ACC (BA25) is chronically hyperactive — not evaluating but actively suppressing. BA25's direct descending projections to the dorsal raphe, VTA, and LC suppress the brainstem's monoamine output. Overactivation of BA25 induces an 'aversive lens' characterised by blunted reward processing and heightened threat reactivity. Chronic DBS of BA25 produces sustained remission (Mayberg et al., 2005). The vicious cycle of depression: BA25 hyperactivity → descending suppression → monoamine deficit → motivational collapse → further BA25 hyperactivity.

IV.3 — Polyvagal: Dorsal Vagal Collapse

Depression's most severe presentations map onto the dorsal vagal state — immobilisation, withdrawal, metabolic conservation. The system has collapsed below even the sympathetic level. The vmPFC's direct projections to the dorsal motor nucleus of the vagus (McKens et al., 2025) may drive the visceral shutdown alongside the brainstem suppression. The ventral vagal system is not prevented from activating by sympathetic override but bypassed by a system that has

retreated to a phylogenetic level beneath its jurisdiction.

IV.4 — Lateralised Executive: Geburah Collapsed, Chesed's Aversive Lens

Left DLPFC (Geburah) hypoactivity with right DLPFC (Chesed) relative hyperactivity. Geburah's proactive analytical governance is underpowered — the verbal-analytical discrimination that would identify depressive narratives as cognitive distortions is weakened. Chesed's broad contextual holding, without Geburah's counterbalance, sustains the negatively valenced perceptual field: mercy without severity is capture.

IV.5 — Regulatory Signatures: Geburah's Unique Tonic Relationship

Left DLPFC rTMS induces significant dopamine release in the ipsilateral subgenual ACC — no changes follow right DLPFC stimulation (Ko et al., 2008). Left DLPFC stimulation produces LC connectivity changes correlating with clinical improvement (Baeken et al., 2024). BA25 sits at the hinge between Tiphareth and Yesod: when Geburah's tonic governance collapses, BA25 is freed to suppress the brainstem. Chesed cannot compensate — reactive deactivating governance does not restart what has collapsed.

IV.6 — Observation Principle: The Projected Emptiness

The DMN generates a continuous stream of negatively valenced self-referential content — rumination, self-criticism, hopelessness narratives. This content is projected: the person experiences 'I am worthless' rather than 'my DMN is generating a negatively biased narrative.' CBT's efficacy works through the observation principle: identifying cognitive distortions as self-generated projections rather than accurate assessment.

IV.7 — Cathartic Corrective: Rebuilding From the Ground

Depression typically requires pharmacological intervention as a prerequisite because the infrastructure the cathartic work relies on is compromised at every level. The contemplative corrective begins with interoceptive body awareness (reconnecting the dissociated body), proceeds through acceptance-based holding (navigating the sympathetic activation that emerges as dorsal vagal withdrawal resolves), and eventually addresses the DMN's negatively biased projections. The sequence is slower, more scaffolded, and the practitioner must use a compromised ACC to evaluate the output of a compromised ACC.

The contemplative equivalent of left DLPFC TMS is structured counting meditation — sustained, sequential, verbally-structured engagement with the brainstem respiratory centres — directly exercising Geburah's tonic regulatory style through the descending prefrontal pathways.

Depression is the left-lateralised drought. The ascending lanes are emptied. The gatekeeper has turned cold. The left pillar has collapsed, the right sustains the aversive lens. The projected emptiness disguises itself as accurate assessment. The corrective rebuilds from the ground.

V. The Firestorm: Rage

V.1 — Hidden Paths: Bilateral Catecholamine Flood

Rage is the only common affective state that floods both hidden paths simultaneously. The noradrenergic system surges phasically (Courage's circuit overloaded, the same mechanism as PTSD's fear cascade) AND the dopaminergic system surges acutely (Silence's circuit overwhelmed, the VTA's reward-aggression output spiking alongside the LC's noradrenergic flood). Both monoamine systems flood the executive through both ascending lanes at once. The inverted-U is blown off both ends simultaneously.

V.2 — ACC/Tiphareth: Dual Assault

The ACC is overwhelmed from both directions: the noradrenergic flood disabling its evaluative function while the dopaminergic surge drives aggressive approach behaviour that bypasses evaluation entirely. Both alpha-1 adrenergic AND excessive D1 dopamine receptors are engaged, opening potassium channels on dendritic spines through two independent intracellular cascades. Rage produces the most complete prefrontal shutdown of any common affective state because the gatekeeper is hit from both flanks.

V.3 — Polyvagal: Sympathetic Dominance (Attack-Directed)

The same sympathetic tier as PTSD but with opposite motor output. PTSD's sympathetic activation is escape-directed (away from threat). Rage's is attack-directed (toward the target). The dopaminergic component provides the directed quality: Panksepp's RAGE system involves the medial hypothalamus and PAG, and the VTA's approach-motivation dopamine converts sympathetic mobilisation from flight to fight. Fear says 'get away.' Rage says 'destroy.'

V.4 — Lateralised Executive: Both Pillars Down

Unlike PTSD (right pillar dysregulated, left overwhelmed) or depression (left collapsed, right captured), rage knocks both pillars offline simultaneously. Geburah's proactive analytical governance — evaluating whether the response is proportionate or justified — is disabled. Chesed's reactive contextual governance — holding the situation in broad awareness — is equally disabled. Neither pillar functions. The person acts without any executive governance, driven entirely by basal ganglia motor habits and the hypothalamic-PAG aggressive drive.

This is why rage produces moral failures the person later cannot comprehend. In PTSD, at least Chesed is partially functional. In depression, at least Chesed sustains some contextual processing. In rage, the executive is completely dark. Responsibility lies not in the moment of rage but in the practices undertaken before the moment that determine how resilient both pillars are to being overwhelmed.

V.5 — Regulatory Signatures: Dual Corrective Required

Rage requires both lateralised correctives simultaneously because both circuits are flooding. The Silence corrective (restoring Geburah's tonic analytical governance) AND the Courage corrective (restoring Chesed's reactive contextual holding) must both be engaged. Neither the left DLPFC's proactive framework nor the right DLPFC's reactive flexibility can be restored in isolation — both must come back online together.

V.6 — Observation Principle: The Projected Villain

Rage's projection is attribution — the construction of hostile intent in another person. Unlike PTSD's projected threat (sensory, visual, 'otherness') or depression's projected emptiness (verbal, narrative, self-referential), rage's projection is bilateral: the left Yesod circuit constructs the verbal narrative of injustice ('they did this deliberately, they must be punished') while the right Yesod circuit provides the sensory-emotional intensity ('I can see the enemy, I can feel the danger'). This is why rage feels both analytically justified and viscerally overwhelming at the same time — both limbic circuits are contributing to a unified projection of hostile attribution.

V.7 — Cathartic Corrective: Prevention Over Intervention

Rage is the most difficult state for the cathartic work because once both pillars are down, the contemplative corrective faces a nearly impossible task. The ascending flood arrives so fast and disables both circuits so completely that the only practical corrective is prophylactic: building bilateral regulatory resilience through sustained practice so that the dual flood's threshold is raised high enough for the ACC to detect the ascending surge in its early phases. The person who has built sufficient bilateral capacity can catch the rage at its onset — detecting the physiological fingerprint of the dual ascending surge ('my heart is racing AND my verbal machinery is constructing a narrative of injustice') — and engage the cathartic work before both pillars go dark. Once the flood crests, the only option is to wait for autoinhibitory feedback and neurochemical clearance.

Rage is the bilateral firestorm. Both ascending lanes flood simultaneously. Both pillars are down. The projected villain feels both analytically justified and viscerally overwhelming because both Yesod circuits are contributing. The corrective is primarily prophylactic: building bilateral resilience before the storm so that the early warning can be caught.

VI. The Dimming: Lust

VI.1 — Hidden Paths: Dopaminergic Progressive Overwhelm

Lust is predominantly dopaminergic. The VTA's SEEKING system surges through the MFB to the nucleus accumbens and prefrontal cortex, mediating intense motivational wanting that is neurochemically dissociable from hedonic liking (Robinson and Berridge, 1993). The Silence circuit is primarily overwhelmed: Geburah's tonic governance of the dopaminergic system through its unique regulatory relationship with the VTA and subgenual ACC is overridden by the supraphysiological dopamine signal. The Courage circuit is secondarily involved: sexual arousal involves significant noradrenergic sympathetic activation, and the right amygdala's sensory-mediated processing contributes the visual-spatial-embodied quality of desire through Netzach's visual-emotional system.

VI.2 — ACC/Tiphareth: The Gradual Dimming

Lust is unique in its temporal profile. Fear and rage overwhelm the ACC in seconds. Lust is progressive: prefrontal activity decreases as sexual arousal increases (Beauregard et al., 2001). At moderate arousal, the ACC remains functional — the person can evaluate, exercise moral judgement, and choose to disengage. As arousal intensifies, the ACC progressively loses evaluative capacity until a threshold is crossed and prefrontal governance is functionally absent. Attempted voluntary inhibition of sexual desire activates the medial prefrontal cortex and cingulate cortex with corresponding downregulation of subcortical activity — this is BA25 and the vmPFC's governance still functional at moderate arousal levels.

VI.3 — Polyvagal: Sympathetic Mobilisation (Approach-Directed) With Ventral Vagal

Loss

Lust's polyvagal state is sympathetic mobilisation with approach-directed motor output — a third motor programme distinct from PTSD's escape and rage's attack. In healthy sexuality, the ventral vagal social engagement system (eye contact, facial expression, vocal prosody) co-activates with sympathetic arousal — Porges's 'play' circuit where mobilisation occurs within the safety of social engagement. In compulsive or addictive sexual behaviour, this ventral vagal dimension is progressively lost: the social engagement quality drops away, connection to the other person diminishes, and the behaviour becomes purely sympathetic-drive-dominated. Mobilisation without engagement. Wanting without relating.

VI.4 — Lateralised Executive: Geburah Dimmed, Chesed Objectifying

Geburah (left DLPFC) is progressively dimmed as arousal intensifies. The proactive governance that would apply the moral standard ('this is appropriate,' 'these are the consequences') is dissolved by the dopaminergic flood. The moral standard is not overridden by a competing judgement but dissolved by the neurochemical flood that disables the organ of judgement itself.

Chesed (right DLPFC) is not overwhelmed but redirected. The right DLPFC's contextual, holistic, relational processing — which in its healthy state holds the other person in broad awareness as a whole subject — narrows under the dopaminergic reward drive to focused objectifying attention on desired features. Chesed's broad mercy contracts to narrow focus. The other person is perceived through the reward system's lens as an object rather than held in contextual awareness as a subject. Rage replaces mercy with hostility. Lust replaces mercy with objectification.

VI.5 — Regulatory Signatures: The Window of Diminishing Governance

Left DLPFC TMS enhances cognitive control over appetitive stimuli — the same mechanism that makes it effective in depression and addiction treatment: restoring Geburah's tonic governance over the reward-approach system. In lust, the Silence circuit's tonic regulatory capacity is the primary therapeutic target — but unlike depression (where Silence must be rebuilt from collapse), in lust Silence must be strengthened to withstand the ascending dopaminergic surge. The right DLPFC's reactive detection of the autonomic shift — the sympathetic arousal, the loss of ventral vagal social engagement, the narrowing of attention to objectification — serves as an early warning system.

VI.6 — Observation Principle: The Projected Ideal

Lust's projection is idealisation — the construction of the desired object as irresistible, the answer to the SEEKING system's motivational question. The DMN constructs the image from right hippocampal spatial-scene memory (the visual configuration) and left hippocampal episodic-verbal memory (the narrative of desire), projected through Netzach's visual-spatial display. The image arrives with the phenomenological force of necessity. Source attribution ('my DMN is constructing this image from memory fragments and reward-system tagging') and proportionality assessment ('this sense of urgent necessity is a dopaminergic signal, not a biological emergency') weaken the projection's compulsive authority.

VI.7 — Cathartic Corrective: Catching the Window

Lust uniquely provides a temporal window for intervention. Rage closes the window in seconds. PTSD's window is closed by the flashback's sudden onset. Depression's window is chronically narrowed. But lust's progressive dimming of the ACC provides a diminishing but real window

during which the contemplative work can be deployed: interoceptive detection of the ascending dopaminergic surge in its early phases; Geburah's tonic analytical engagement ('what are the consequences? is this consistent with my values?'); Chesed's reactive contextual awareness ('am I still seeing this person as a person?'). Each successful deployment strengthens the regulatory connections neuroplastically, raising the threshold and widening the window for subsequent encounters.

Lust is the dopaminergic dimming. The Silence circuit is overwhelmed by ascending reward-system dopamine. Chesed's relational engagement is redirected to objectification. The ACC is gradually dimmed across a window that closes as arousal intensifies. The projected ideal disguises itself as necessity. The corrective catches the window before the threshold is crossed.

VII. The Four Inversions: A Comparative Architecture

The four inversions distribute across the architecture with precise structural specificity:

Hidden paths: terror floods the right circuit (noradrenergic). Depression empties the left circuit (monoamine drought). Rage floods both circuits simultaneously (bilateral catecholamine). Lust progressively overwhelms the left circuit's dopaminergic governance (ascending reward-system surge).

ACC/Tiphareth: in terror, the gatekeeper is overwhelmed. In depression, the gatekeeper has turned cold. In rage, the gatekeeper is hit from both flanks. In lust, the gatekeeper is gradually dimmed.

Polyvagal: terror is the sympathetic kingdom, escape-directed. Depression is the dorsal vagal kingdom, withdrawn. Rage is the sympathetic kingdom, attack-directed. Lust is the sympathetic kingdom, approach-directed, with progressive loss of ventral vagal social engagement.

Lateralised executive: terror dysregulates the right pillar and overwhelms the left. Depression collapses the left pillar and captures the right in the aversive lens. Rage knocks both pillars offline simultaneously. Lust dims the left pillar and redirects the right from relational to objectifying.

Observation principle: terror projects threat. Depression projects emptiness. Rage projects a villain. Lust projects an ideal. Each projection disguises its source. Each is transformed by recognition.

Temporal profile: terror's onset is sudden (the flashback). Depression's onset is chronic (weeks to months). Rage's onset is explosive (seconds). Lust's onset is progressive (minutes, with a window of diminishing governance).

Cathartic corrective: terror requires calming the right-lateralised flood. Depression requires rebuilding the left-lateralised thermostat. Rage requires prophylactic bilateral resilience. Lust requires catching the temporal window before the threshold is crossed.

Four inversions. One architecture. The flood (terror), the drought (depression), the firestorm (rage), and the dimming (lust). Each recruits different dimensions of the hidden paths' bilateral subcortical regulatory infrastructure. Each disables the executive governance in a different lateralised pattern. Each produces a different projected content that disguises its source. Each requires a different temporally calibrated contemplative corrective. But the destination is the same: the restoration of the system's optimal operating state — the delicious cycle, the ventral vagal kingdom, Tiphareth governing with both severity and mercy, the rivers flowing outward from Eden as governance rather than flooding inward from the periphery as capture. The flood must be calmed. The drought must be watered. The firestorm must be prevented. The dimming must be caught. All four roads lead home.

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