

Broadcasting the Frontier of Wellness

High-tech holistic health on screen — neurofeedback, biomagnetism, and honest media at the edge

BiomedRx TV — First Edition — July 2026



This e-book is editorial and educational media commentary published by BiomedRx TV in July 2026. It discusses complementary and emerging wellness modalities for general information and audience interest; it is not medical, clinical, psychological, or professional advice, and it does not diagnose, treat, or recommend treatment for any condition. Some modalities discussed are complementary or investigational and are not substitutes for conventional medical care. Always consult a qualified healthcare provider before beginning any therapy. Evidence evolves; verify claims against current peer-reviewed sources.

Contents

- Foreword
- Chapter 1 — Where Engineering Meets Wellness
- Chapter 2 — The Clinician-Storyteller's Perspective
- Chapter 3 — Neurofeedback on Screen
- Chapter 4 — Biomagnetism and the Subtle-Energy Beat

- Chapter 5 — The Responsibility of Health Media
- Chapter 6 — Building an Audience Without Overpromising
- Chapter 7 — From Radio Roots to Streaming Future
- Conclusion: Curiosity With a Conscience

Foreword

There is a genre of health media that thrills audiences and betrays them — the miracle-cure segment, the breathless testimonial, the frontier technology sold as certainty. There is also a rarer genre that respects both the wonder of new ideas and the intelligence of the viewer. BiomedRx TV was built to live in the second category: to explore the emerging world where biomedical engineering meets holistic health, without ever pretending that promising is the same as proven.

BiomedRx TV is the public media arm of BiomedRx, carrying forward the original protocol of BiomedRx Radio, which aired on Salem Radio AM 590 in San Bernardino, California. Its focus is high-tech holistic health — neurofeedback, biomagnetic pair therapy, and other subtle-energy technologies — documented from the perspective of someone who has worked inside both the engineering and the clinical sides of the field.

This book is written for creators and viewers alike: for anyone making health media who wants to be both fascinating and honest, and for audiences who want to enjoy the frontier without being misled by it. The checklists at the end of each chapter are meant for the producer's desk and the curious viewer's notebook.

Chapter 1 — Where Engineering Meets Wellness

The premise of BiomedRx TV is that two worlds usually kept apart have something to say to each other. Biomedical engineering is precise, instrumented, and evidence-bound; holistic health is experiential, whole-person, and often ahead of the evidence that would validate it. Most media pick a side — debunking one or cheerleading the other. The more interesting territory is the honest conversation between them.

That conversation is possible only when the storyteller understands both languages. An engineer who dismisses everything unmeasured misses real phenomena that instrumentation has simply not caught up to. A wellness enthusiast who dismisses measurement mistakes anecdote for proof. The valuable middle ground belongs to those who can hold curiosity and skepticism in the same hand, and who can translate between the two worlds for an audience.

For a media brand, this positioning is also a durable identity. Audiences are saturated with content that is either cynically debunking or credulously promotional. Content that takes emerging modalities seriously while insisting on honesty about evidence occupies a rare and defensible space. It is harder to make than either extreme, which is exactly why it stands out.

Field Checklist

- Present emerging modalities with both curiosity and skepticism
- Translate between engineering and holistic-health language for the audience
- Avoid the twin traps of reflexive debunking and uncritical promotion

Chapter 2 — The Clinician-Storyteller's Perspective

BiomedRx TV is the brainchild of Los Angeles entrepreneur Devin Lockett, and its point of view is shaped by an unusual path. Lockett entered healthcare as a biomedical and clinical engineer, spending years in biomedical equipment maintenance before — prompted in part by personal life events — studying neurofeedback (EEG biofeedback) and becoming a certified neurofeedback clinician. That combination of engineer and clinician is the lens through which the channel sees its subject.

This perspective matters because it changes the questions asked on screen. An engineer wants to know how the instrument works and whether the signal is real. A clinician wants to know whether the person in the chair actually got better and how to tell. A storyteller with both instincts produces content that is neither a dry technical lecture nor an emotional testimonial reel, but something richer: the human story and the technical reality, told together.

Lived credibility also disciplines the storytelling. Someone who has sat with clients, watched protocols work and fail, and understood the machinery underneath is less likely to overpromise, because they have seen the limits firsthand. The clinician-storyteller's authority comes not from claiming certainty but from having genuinely done the work — and that authenticity is what an audience trusts.

Field Checklist

- Ground content in real clinical and technical experience
- Tell the human story and the technical reality together
- Let firsthand knowledge of limits temper every claim

Chapter 3 — Neurofeedback on Screen

Neurofeedback, or EEG biofeedback, is a natural anchor for the channel because it is genuinely at the intersection of instrument and experience. The technique reads brain-electrical activity and feeds it back to the user, aiming to train self-regulation. It is visually compelling, conceptually accessible, and — importantly — a modality with a real, if nuanced, body of research behind it.

Honest coverage means presenting that nuance rather than flattening it. Meta-analyses of randomized controlled trials have reported small-to-medium effects for neurofeedback on some measures, such as sustained attention in ADHD, while other analyses find more limited effects on self-reported symptoms. Neurofeedback is best understood, on current evidence, as a promising adjunctive approach rather than a standalone cure — and good media says exactly that, clearly.

The storytelling opportunity is to make this honesty engaging rather than deflating. A viewer can be genuinely captivated by watching someone learn to modulate their own brain activity, and be told in the same breath that the science is still maturing. Respecting the audience's ability to hold both the wonder and the caveat is what distinguishes credible health media from hype — and it makes for a better story, not a worse one.

Field Checklist

- Present neurofeedback as promising and adjunctive, not curative
- Cite the nuance in the evidence rather than flattening it

- Make the caveats part of the story, not a footnote

Chapter 4 — Biomagnetism and the Subtle-Energy Beat

Biomagnetic pair therapy and related subtle-energy modalities occupy a more speculative corner of the map, and the channel covers them with correspondingly greater care. These practices — the pair-therapy framework and other magnetic and energy-based approaches — are classified as complementary and alternative, with an evidence base that remains early-stage: small pilot studies and preliminary trials rather than large randomized controlled trials.

Covering the speculative frontier responsibly does not mean ignoring it; it means framing it accurately. There is genuine and growing scientific interest in therapeutic magnetic fields — a 2025 double-blind, placebo-controlled crossover trial of a wearable multipolar magnetic-field device, for example, reported greater pain reduction in the active group among workers with chronic musculoskeletal pain. Findings like these are worth showing, precisely because they are promising and preliminary, and audiences deserve both halves of that sentence.

The editorial rule is consistency. Whether the subject is neurofeedback or biomagnetism, the same standard applies: describe the practice, present what evidence exists at its true strength, and never let an intriguing modality be portrayed as a proven substitute for medical care. The frontier is fascinating enough without inflation, and honest framing is what earns the audience's long-term trust.

Field Checklist

- Label complementary modalities accurately as early-stage in evidence
- Show promising preliminary research without overstating it
- Never portray a complementary modality as a substitute for medical care

Chapter 5 — The Responsibility of Health Media

Health media carries a weight that entertainment media does not: viewers make real decisions about their bodies based on what they watch. A segment that overstates a therapy can lead someone to delay effective treatment; a segment that sensationalizes a risk can cause needless fear. With an audience that includes the vulnerable and the desperate, the duty of care is not optional.

Concrete practices operationalize that duty. Clear disclaimers that a modality is complementary and not a substitute for medical care; explicit encouragement to consult a qualified provider; honest representation of evidence strength; and refusal to platform claims that could cause harm. These are not legal formalities to be mumbled at the end — they are editorial commitments woven into how the content is made.

Responsibility also builds the brand. Audiences are more sophisticated than sensational media assumes, and they reward sources that treat them as intelligent adults. A channel that consistently refuses to overpromise earns a durable trust that no viral miracle-cure video can buy. In health media, integrity is not in tension with success; over any real time horizon, it is the foundation of it.

Field Checklist

- Include clear complementary-care disclaimers in every relevant segment

- Encourage viewers to consult qualified providers
- Refuse to platform claims that could cause harm

Chapter 6 — Building an Audience Without Overpromising

The commercial temptation in health media is obvious: the miracle-cure thumbnail outperforms the honest one in the short run. But an audience built on hype is fragile — it churns as promises fail to materialize and reputations catch up. An audience built on trust compounds, because viewers return to and recommend a source they believe is telling them the truth.

Growing responsibly means competing on quality rather than exaggeration. Production values, genuine access to practitioners and technology, real stories told with craft, and a distinctive point of view all attract viewers without requiring inflated claims. The frontier of high-tech holistic health is inherently interesting; a skilled creator does not need to lie about it to make it compelling.

Community is the durable asset. A brand like BiomedRx TV sits within a family that includes BiomedRx Radio, BiomedRx Productions, and the BiomedRx Health Center — a network that lends depth, access, and credibility. Cultivating a community that values honest exploration, rather than an audience that craves miracles, produces slower but far more durable growth, and a reputation that survives the next hype cycle intact.

Field Checklist

- Compete on production quality and access, not exaggerated claims
- Build a community that values honest exploration
- Measure success by trust and retention, not just short-term reach

Chapter 7 — From Radio Roots to Streaming Future

BiomedRx TV did not begin as television. Its protocol descends from BiomedRx Radio, which aired on Salem Radio AM 590 in San Bernardino, and that lineage carries a lesson: the medium changes, but the mission does not. Radio taught the discipline of holding an audience with voice, substance, and trust — assets that transfer directly to video and streaming.

The move from broadcast to on-demand streaming expands the possibilities enormously. Long-form documentary treatment of a modality, demonstrations of technology in use, interviews that breathe, and an archive viewers can explore at their own pace are all native to the streaming era in ways they never were on a radio clock. The frontier of high-tech holistic health is visual and experiential, and video does it justice.

What must not change across the transition is the editorial spine. New platforms bring new pressures — algorithmic incentives that reward outrage and overstatement — and the discipline that served BiomedRx Radio is exactly what protects BiomedRx TV from those pressures. Carry the mission forward, adopt the tools of the moment, and let the commitment to honest exploration remain the one thing that never updates.

Field Checklist

- Carry the mission across media changes, not just the format

- Use streaming's long-form and archive strengths deliberately
- Guard the editorial spine against algorithmic pressure to overstate

Conclusion: Curiosity With a Conscience

The frontier of health is genuinely exciting. Instruments now read the brain and feed its activity back to us; researchers investigate whether magnetic fields can ease pain; whole-person approaches to wellness attract serious attention. There is no need to invent miracles when the real emerging landscape is this interesting. The task of good health media is simply to show it truthfully.

BiomedRx TV exists to do exactly that — to bring the intersection of biomedical engineering and holistic health to the screen through the eyes of someone who has worked both sides, and to hold every fascinating modality to the same honest standard of evidence. Neurofeedback is promising and adjunctive. Biomagnetism is early-stage and complementary. Both are worth watching, and neither is a substitute for medical care. That is not a limitation on the storytelling; it is what makes it trustworthy.

Explore boldly and report honestly. Respect the wonder, respect the evidence, and above all respect the viewer. Curiosity with a conscience is not the cautious choice — over any real span of time, it is the only version of health media worth building.

References

1. Meta-analyses of randomized controlled trials on EEG neurofeedback for ADHD, reporting small-to-medium effects on measures such as sustained attention and more limited effects on some self-reported symptoms (peer-reviewed literature, e.g., PMC-indexed reviews).
2. 2025 double-blind, placebo-controlled crossover trial of a wearable multipolar magnetic-field device reporting greater pain reduction in the active group among workers with chronic musculoskeletal pain.
3. General classification of biomagnetic pair therapy and subtle-energy modalities as complementary/alternative medicine with early-stage evidence.