MELVILLE, NEW YORK, May 5, 2015 - FONAR Corporation (NASDAQ-FONR), The Inventor of MR Scanning™, announces the publication of a new book entitled “The Craniocervical Syndrome and MRI”. It has been published by S. Karger, AG based in Basel, Switzerland (see www.karger.com/Book/Home/261956). Karger is a 125-year-old company, an academic publisher of scientific and medical journals and books.

The 94-page, seven chapter monograph examines the impact of rapid advances in MRI that are transforming the treatment of patients suffering from the craniocervical syndrome (CCS). It is written by leading international experts in the field to provide practitioners with a better understanding of the subtle anatomy and MRI appearances at the craniocervical junction, along with insight into the clinical significance of cerebrospinal fluid (CSF) flow measurements and its potential role in generating the devastating impairments of the neurodegenerative diseases: Alzheimer’s (5.1 million)\(^1\), childhood and adult Autism (3.0 million)\(^1\), Parkinson’s (1.0 million)\(^1\), Multiple Sclerosis (250,000-350,000)\(^1\) and Amyotrophic Lateral Sclerosis (ALS) (30,000)\(^1\). It calls attention to the revolutionary importance of FONAR’s new UPRIGHT® MRI imaging technology and the prospect of significantly relieving the suffering of the above totaled 9.38 million patients afflicted with these disorders. For the first time in medical history it is providing the revelation of UPRIGHT® real time in-vivo movies and quantification of the cerebrospinal fluid (CSF) as it flows against gravity in and out of the UPRIGHT® brain. It further underscores that imaging CSF flow in the UPRIGHT® position and quantifying its flow UPRIGHT® is critical since we now know that CSF flow into the brain in the UPRIGHT® position is only very nearly half what it is in the recumbent position (Table 4, pg. 83 – “The Craniocervical Syndrome and MRI” S. Karger 2015).

### Table 4: Change of CSF Inflow With Position in Normal Examinees

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<th>Peak INFLOW (cc/sec)</th>
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<th>Peak INFLOW Velocity (cm/sec)</th>
<th>Peak INFLOW Velocity (cm/sec)</th>
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<tbody>
<tr>
<td>1</td>
<td>1.023</td>
<td>1.935</td>
<td>0.4</td>
<td>0.715</td>
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<tr>
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<td>% Difference Up/Rec</td>
<td>% Difference Up/Rec</td>
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<td>53%</td>
<td>56%</td>
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The MRI scanner itself, invented by FONAR’s founders, has enabled, for the first time in medical history, real time in-vivo visualization of the CSF as it flows in and out of the brain. Moreover, the FONAR UPRIGHT® MRI has enabled the visualization of this vital life-sustaining neurologic fluid as it flows in and out of the live brain against gravity. The result is the new and very real prospect of surmounting the devastations of the neurodegenerative diseases.

As pointed out in the text (pg. 90), we envision the prospect of providing a major rescue to patients suffering from the devastating impairments of these neurodegenerative disorders: Alzheimer’s (5.1 million)\(^1\), childhood and adult Autism (3.0 million)\(^1\), Parkinson’s (1.0 million)\(^1\), Multiple Sclerosis (250,000 to 350,000)\(^1\), and Amyotrophic Lateral Sclerosis (ALS) (30,000)\(^1\). We envision the prospect of overcoming these syndromes in part or in full by repairing the bio-mechanical disruptions in the neck which we believe to be responsible for them, namely the obstruction of flow of this vital physiologic fluid, CSF. We perceive the prospect of overcoming them, or significantly relieving them, with the MRI images provided by the FONAR UPRIGHT® MRI, as very real.

At present their etiology is generally unknown, e.g. as reported by Degnan and Levy in the *American Journal of Neuroradiology* “the absence of a clear identifiable etiology for a clinical syndrome characterized by elevated ICP\(^2\) exists in nearly 90% of cases” (*AJNR* 2011 32: 1986-1993). As a result, these syndromes exhibiting unexplainable ICP elevation have been designated by the acronym IIH, *Idiopathic Intracranial Hypertension*.

Our findings with the FONAR UPRIGHT® MRI unveiling the obstructions of CSF flow we believe responsible for them (R.V. Damadian and D. Chu “The Possible Role of Cranio-Cervical Trauma and Abnormal CSF Hydrodynamics in the Genesis of Multiple Sclerosis” *Physiol. Chem. Phys. & Med. NMR* 2011, 41:1-17) suggest the possibility that *Idiopathic Intracranial Hypertension* (IIH) is no longer *Idiopathic*. We believe the likelihood is high that they are the result of bio-mechanical obstructions of CSF flow in and out of the brain.

The surgical management of patients with damage to the ligaments at the cranio-cervical junction and the role of cervical spinal trauma in neurodegenerative diseases as well as CSF flow obstruction are also discussed. This publication is valuable reading for practitioners in the fields of radiology, neurosurgery, neurology, pain management, orthopaedic surgery as well as for chiropractors and osteopaths.

This monograph is a result from the momentum that has continued after a medical scientific symposium called ‘The Cranio-Cervical Syndrome (CCS): The Vulnerability of the Human Neck and Its Impact on Cerebrospinal Fluid (CSF) Flow,’ was held in New York City on April 6, 2013 and hosted by FONAR. The symposium featured seven distinguished medical experts who collectively addressed the pandemic needs of the millions of patients (including 1.2 million whiplash injuries annually in the U.S.) who currently have no reprieve from their symptoms for the lack of an adequate diagnosis and effective treatment. Six of these speakers are lead authors in the monograph.
Accordingly, the editors of the book, Professor Francis W. Smith, MD (Medserena Upright MRI Centre, London, UK) and Jay S. Dworkin, Ph.D. (Senior Physicist, FONAR Corporation) organized contributions from the six of the symposium speakers who agreed to contribute chapters to the monograph based on their well-received presentations.

Raymond Damadian, MD, president and founder of FONAR, and David Chu, Ph.D. contributed a chapter entitled "The Possible Role of Craniocervical Trauma and Abnormal Cerebrospinal Fluid Hydrodynamics in the Genesis of Multiple Sclerosis and the Craniocervical Syndrome." Their published abstract states: "The importance of visualizing and measuring cerebrospinal fluid (CSF) flow dynamics of patients in the upright position is described. Recent observations from the FONAR UPRIGHT® Weight-Bearing Multi-Position™ MRI that are likely to provide a new understanding of the origin of neurodegenerative diseases, such as multiple sclerosis, are discussed. The vulnerability of the human neck and its impact on CSF flow throughout the brain and spine is also linked to properly identifying the craniocervical syndrome given its plethora of symptoms.

"In addition, there is a chapter contributed to the monograph by radiologists Pascal Niggemann (Mannheim), C.C. Pieper and D.R. Hadizadeh (University of Bonn) entitled "Positional Venous Magnetic Resonance Angiography."

The first chapter is by editor and radiologist Francis W. Smith entitled "Upright Magnetic Resonance Imaging of the Craniocervical Junction."

In addition, Neurosurgeon Joel I. Franck, (Panama City, FL) and P Perrin contributed "The Cranial Cervical Syndrome Defined: New Hope for Post Whiplash Migraine Headache Patients – Cervical Digital Motion X-Ray, FONAR UPRIGHT® Weight-Bearing Multi-Position™ MRI and Minimally Invasive C1–C2 Transarticular Lag Screw Fixation Fusion."

Neurosurgeon Joseph Maroon (Vice-Chairman, Department of Neurosurgery, University of Pittsburgh Medical Center), J Bost, A Amos, R Winkelmann, C Mathyssek, provided "Concussion Update: Immunoexcitotoxicity, the Common Etiology of Postconcussion Syndrome, Chronic Traumatic Encephalopathy and Posttraumatic Stress Disorder."

Radiologist William G. Bradley, (Chairman, Department of Radiolgy, University of California at San Diego); contributed "Cerebrospinal Fluid Physiology and Its Role in Neurologic Disease."

Scott Rosa, DC and JW Baird, DC provided "The Craniocervical Junction: Observations regarding the Relationship Between Misalignment, Obstruction of Cerebrospinal Fluid Flow, Cerebellar Tonsillar Ectopia, and Image-Guided Correction."
Visit www.fonar.com for more information on the monograph. It may be purchased online at S. Garger for USD$96.00. Please visit www.karger.com/Book/Home/261956.

1 Current published estimates of the number of patients in the U.S. afflicted with the syndrome
2 Intracranial Pressure: “elevated ICP”, a common characteristic of the neuro-degenerative disorders

About FONAR

FONAR (NASDAQ:FONR), Melville, NY, The Inventor of MR Scanning™, was incorporated in 1978, and is the first, oldest and most experienced MRI company in the industry. FONAR introduced the world’s first commercial MRI in 1980, and went public in 1981. FONAR’s stellar product is the UPRIGHT® MRI (also known as the Stand-Up® MRI), the only whole-body MRI that performs Position™ imaging (pMRI™) and scans patients in numerous weight-bearing positions, i.e. standing, sitting, in flexion and extension, as well as the conventional lie-down position. The FONAR UPRIGHT® MRI often sees the patient’s problem that other scanners cannot because they are lie-down and "weightless" only scanners. The patient-friendly UPRIGHT® MRI has a near-zero claustrophobic rejection rate by patients. As a FONAR customer states, “If the patient is claustrophobic in this scanner, they’ll be claustrophobic in my parking lot.” Approximately 85% of patients are scanned sitting while they watch a 42” flat screen TV. FONAR is headquartered on Long Island, New York.

UPRIGHT® and STAND-UP® are registered trademarks and The Inventor of MR Scanning™, Full Range of Motion™, Multi-Position™, Upright Radiology™, The Proof is in the Picture™, True Flow™, pMRI™, Spondylography™, Dynamic™, Spondylometry™, CSP™, and Landscape™, are trademarks of FONAR® Corporation.

This release may include forward-looking statements from the company that may or may not materialize. Additional information on factors that could potentially affect the company's financial results may be found in the company’s filings with the Securities and Exchange Commission.