



QEEG Clinical Report

BrainLens V0.4



Report Description

Personal & Clinical Data

Name	Abbas Shamkli	Date of Recording	2025-07-19
Date of Birth - Age	2001-11-30 - 23.8	Gender	Male
Handedness(R/L)	Right	Source of Referral	Dr Dinarvand
Initial Diagnosis	Drug Abuse-Sound in the Ear-Tinnitus		
Current Medication	Clonazepam		

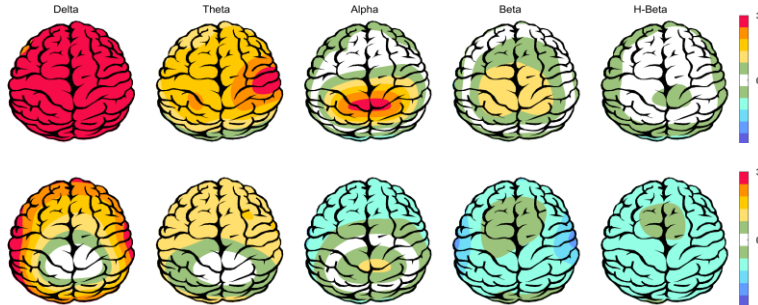
Dr Dinarvand

Summary Report

EEG Quality



Z-score Information



Compatibility with Depression



Compatibility with Mood Swing



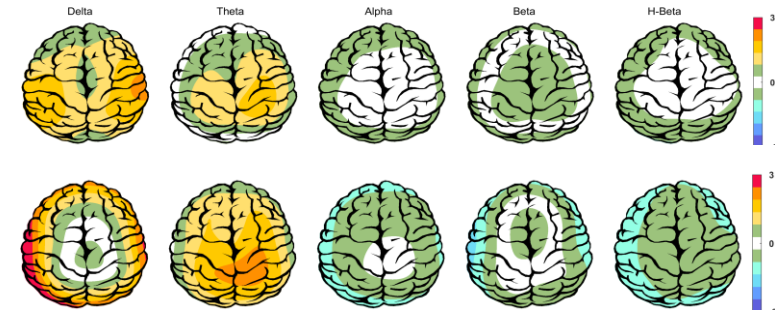
Arousal Level



APF

Posterior APF-EC= 10.00

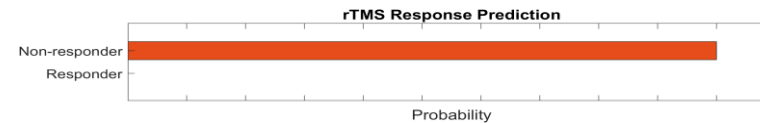
Posterior APF-EO= 10.50



Compatibility with Anxiety



TMS Responsibility



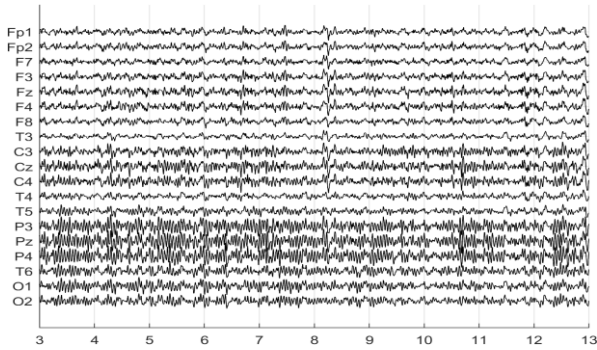
Cognitive Performance



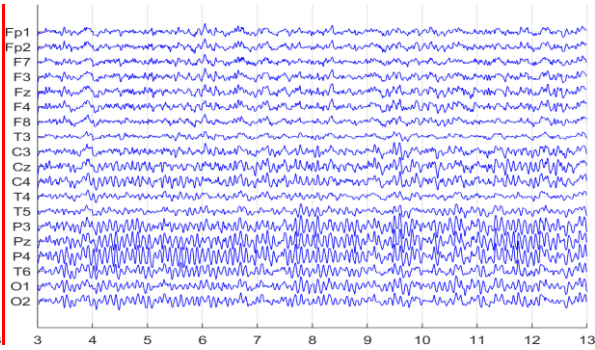
To investigate QEEG-based predicting medication response, please refer to the Report.

Denoising Information (EC)

Raw EEG



Denoised EEG



Flat Channels



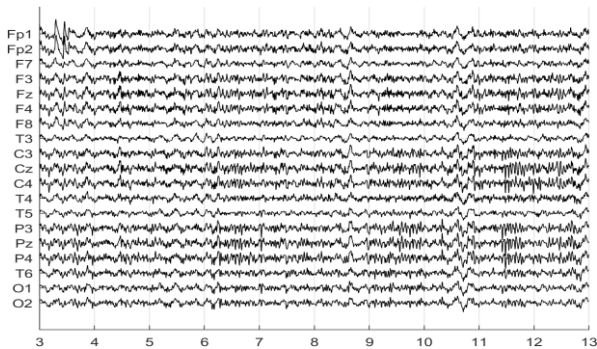
Rejected Channels



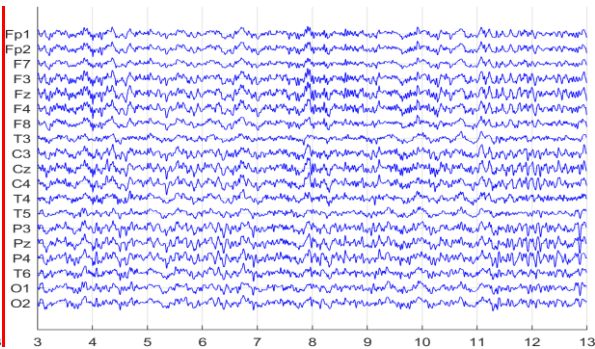
Number of Eye and Muscle Elements				Low Artifact Percentage	
Eye	0	Muscle	0		
Total Artifact Percentage				High Artifact Percentage	
EEG Quality		good		Total Recording Time Remaining	
				246.20 sec	

Denoising Information (EO)

Raw EEG



Denoised EEG



Flat Channels



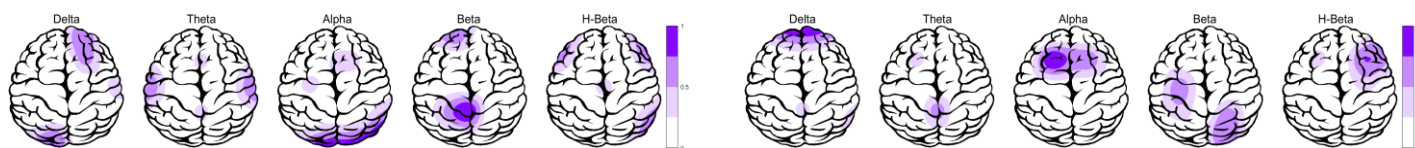
Rejected Channels



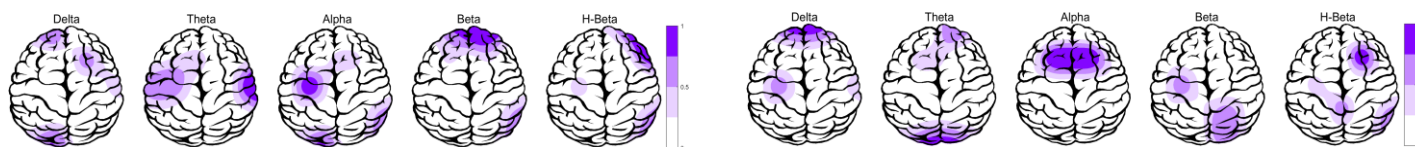
Number of Eye and Muscle Elements				Low Artifact Percentage	
Eye	3	Muscle	0		
Total Artifact Percentage				High Artifact Percentage	
EEG Quality		good		Total Recording Time Remaining	
				243.90 sec	

Pathological assessment for mood disorders and adult ADHD

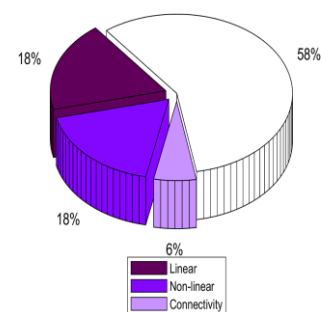
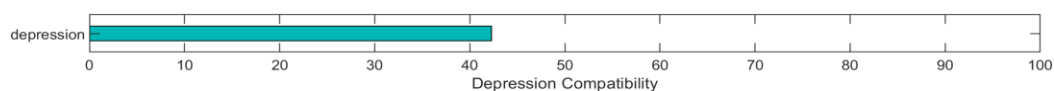
Compare to Mood Disorders Database



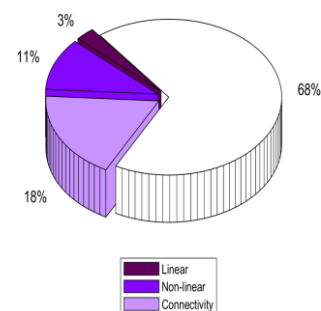
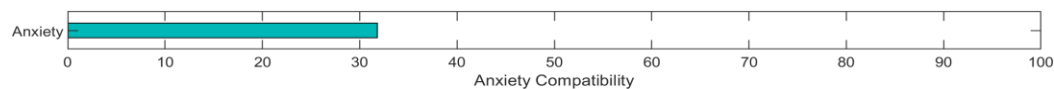
Compare to Adult ADHD Database



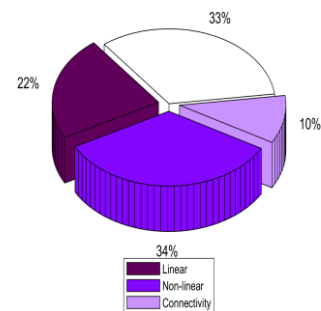
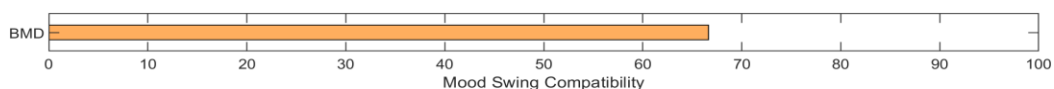
EEG Compatibility with Depression Diagnosis



EEG Compatibility with Anxiety Diagnosis

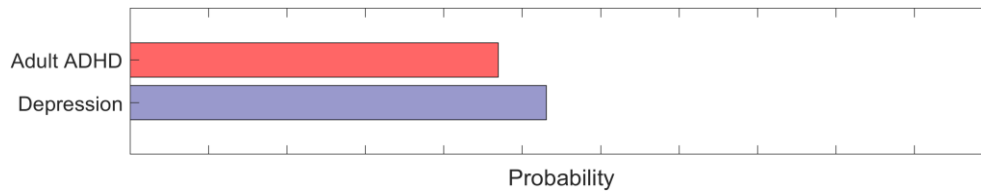


EEG Compatibility with Mood Swing Diagnosis *



* This index can only be investigated if there are symptoms of mood swings (R/O BMD or R/O mood swings).

Depression and Adult ADHD Diagnosis Probabiliy



Cognitive Functions Aassessment

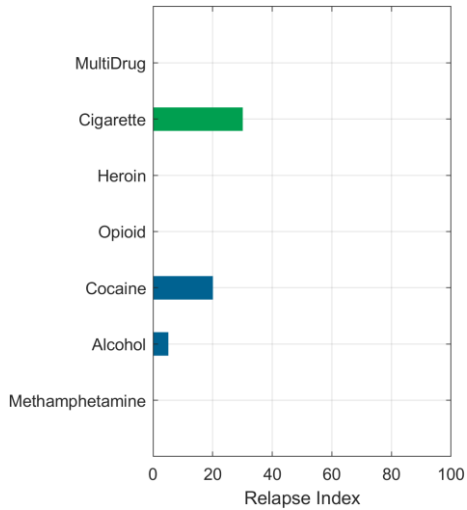


Arousal Level Detection

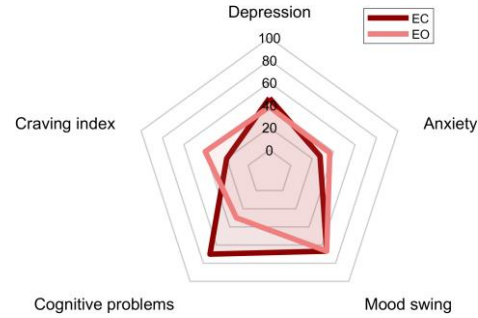


Pathological Assessment for Substance Abuse

Relapse Index

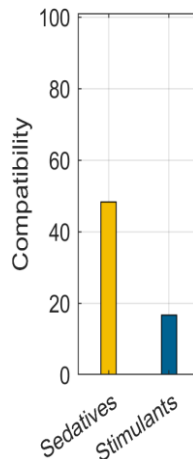
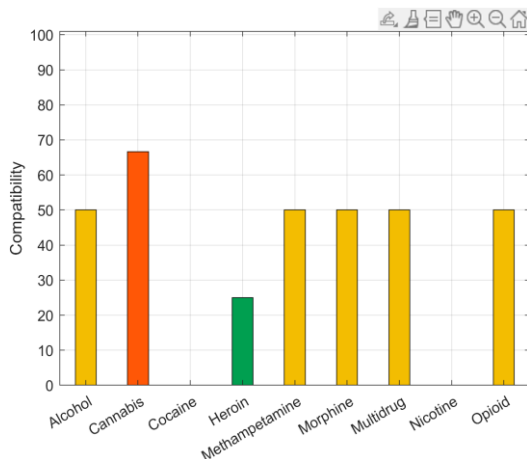


Comorbid Symptoms



The **Relapse graph** shows the relapse index based on a combination of EEG neuromarkers. If the type of substance your patient uses is included in this chart, you can read its relapse rate. **The condition for using this chart is that the patient consumes each substance specified in the chart.** If your patient does not consume each of the substances specified in the chart, the index shown is not valid.

Substance Abuse Compatibility

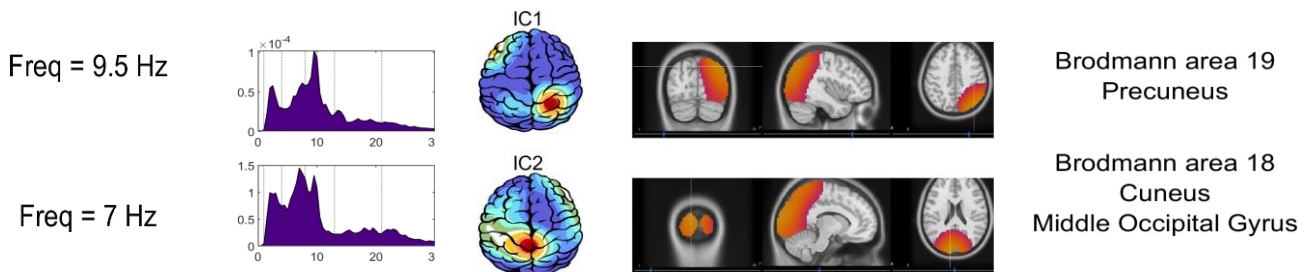


The **Compatibility graph** shows the compatibility of the patient's EEG neuromarkers and the alternations that the specific substance causes in the EEG. In other words, this chart indicates that your patient has how percentage of validated neuromarkers due to the use of specific substances.

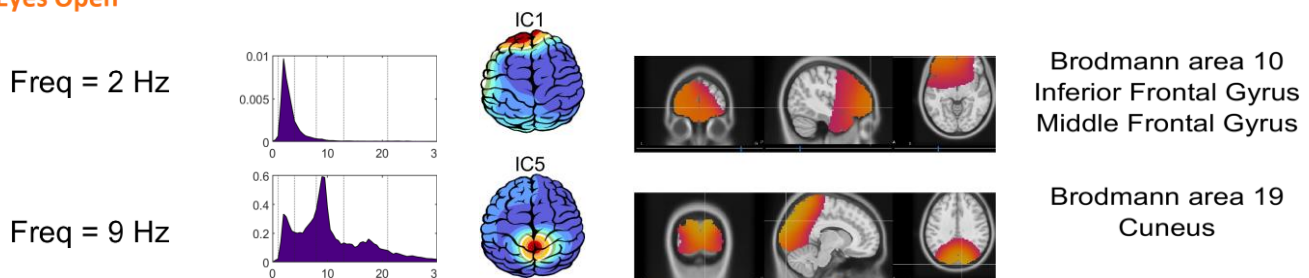
Using this chart, you can figure out how substances have affected EEG and if multiple drugs were used, which one has the most dominant effect. **If your patient does not consume each of the substances specified in the chart, the index shown is not valid.**

Functional Problems Source Detection

Eyes Closed



Eyes Open

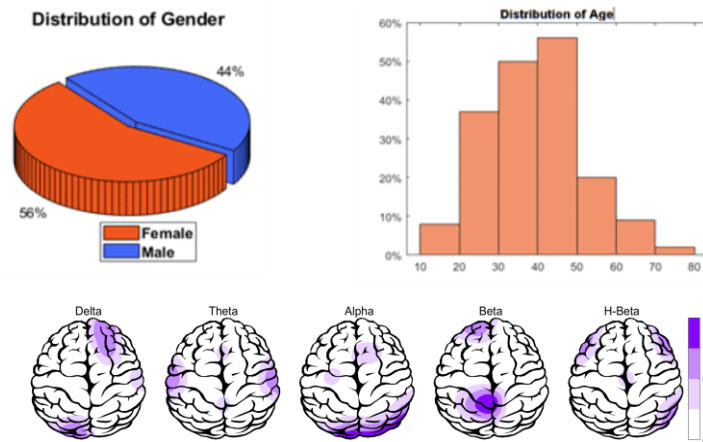


rTMS Response Prediction

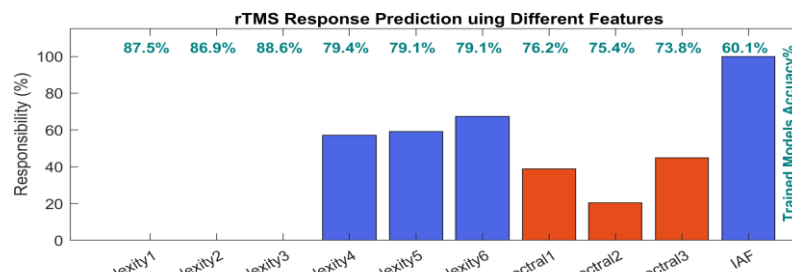
Network Performance

Accuracy: 92.1%
Sensitivity: 89.13%
Specificity: 97.47%

Participants Information



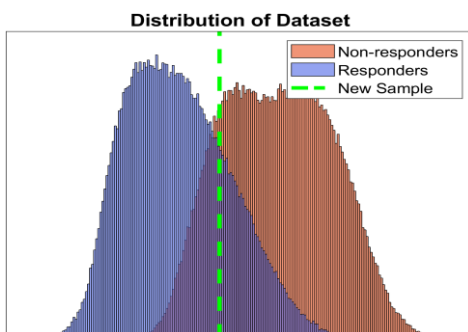
Features Information



Responsibility



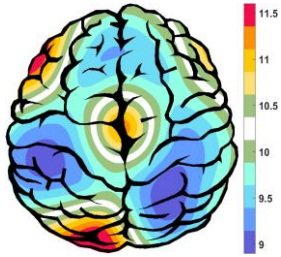
Data Distribution



About Predicting rTMS Response

This index was obtained based on machine learning approaches and by examining the QEEG biomarkers of more than 470 cases treated with rTMS. The cases were diagnosed with depression (with and without comorbidity) and all were medication free. By examining more than 40 biomarkers capable of predicting response to rTMS treatment in previous studies and with data analysis, finally 10 biomarkers including bispectral and nonlinear features entered the machine learning process. The final chart can distinguish between RTMS responsive and resistant cases with 92.1% accuracy. This difference rate is much higher than the average response to treatment of 44%, in the selection of patients with clinical criteria, and is an important finding in the direction of personalized treatment for rTMS.

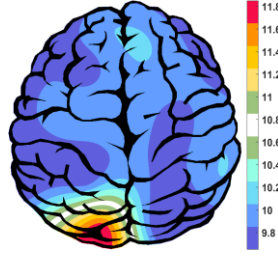
APF(EO)



Frontal APF= 09.50

Posterior APF= 10.50

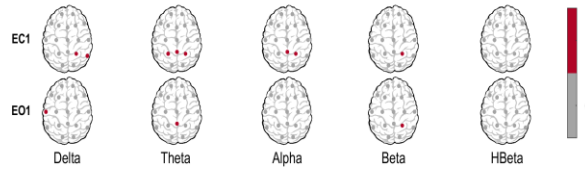
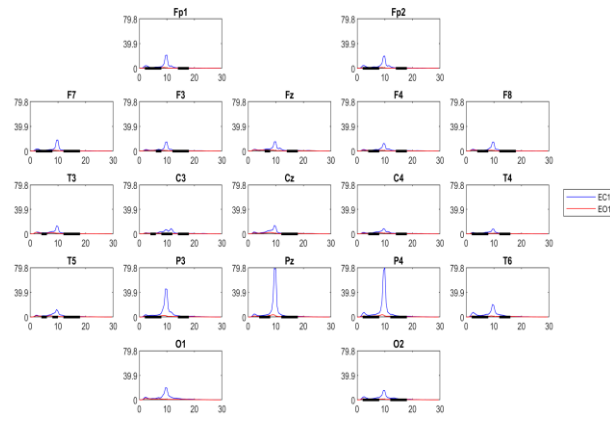
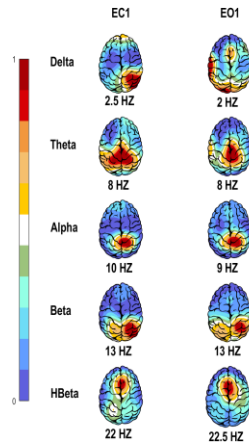
APF(EC)



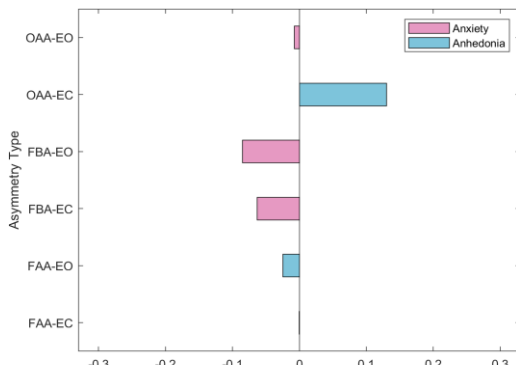
Frontal APF= 09.92

Posterior APF= 10.00

EEG Spectra



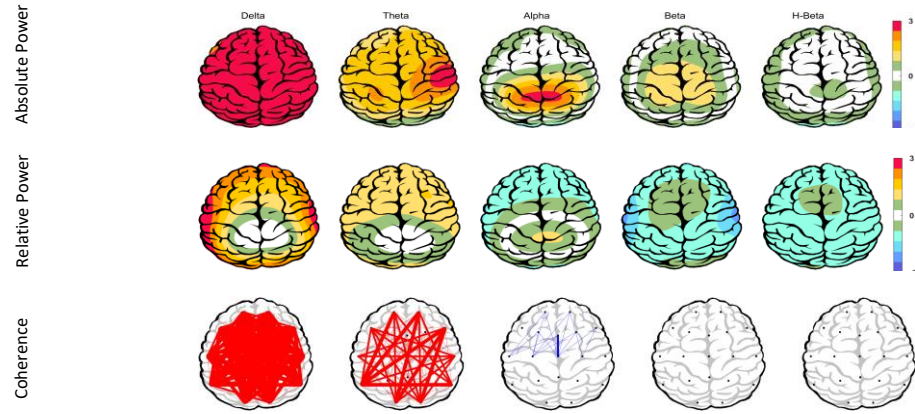
Alpha Asymmetry(AA)



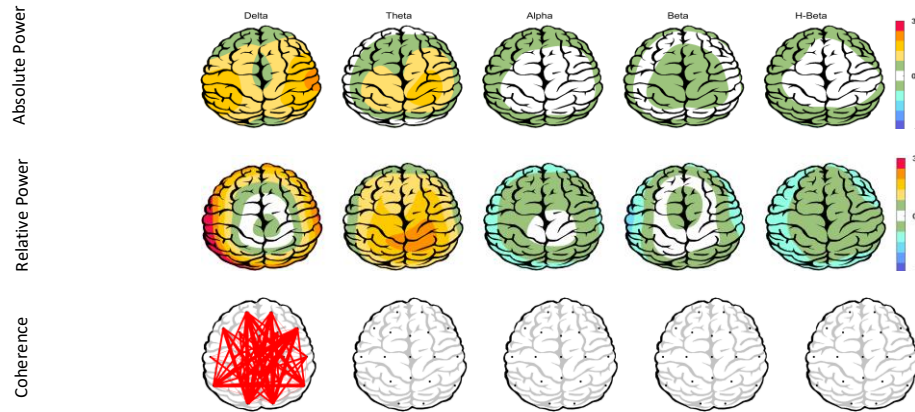
Alpha Blocking



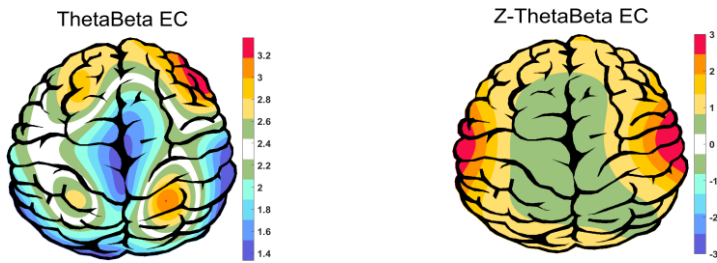
Z Score Summary Information (EC)



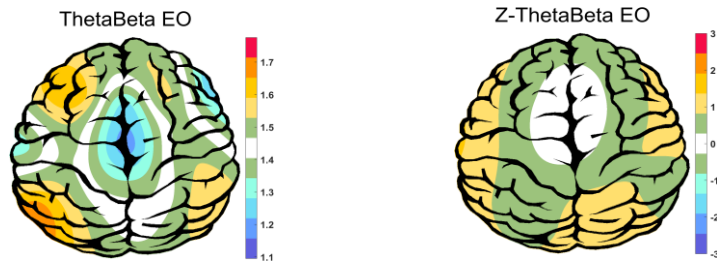
Z Score Summary Information (EO)



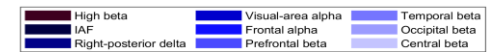
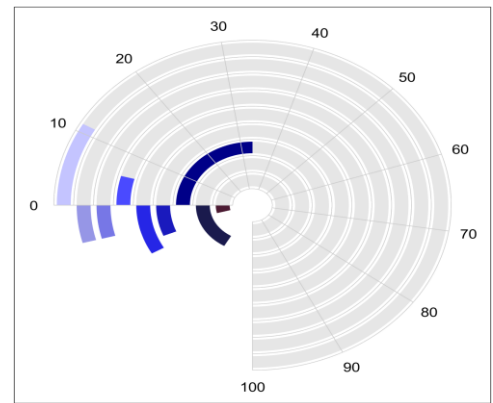
E.C.T/B Ratio (Raw- Z Score)



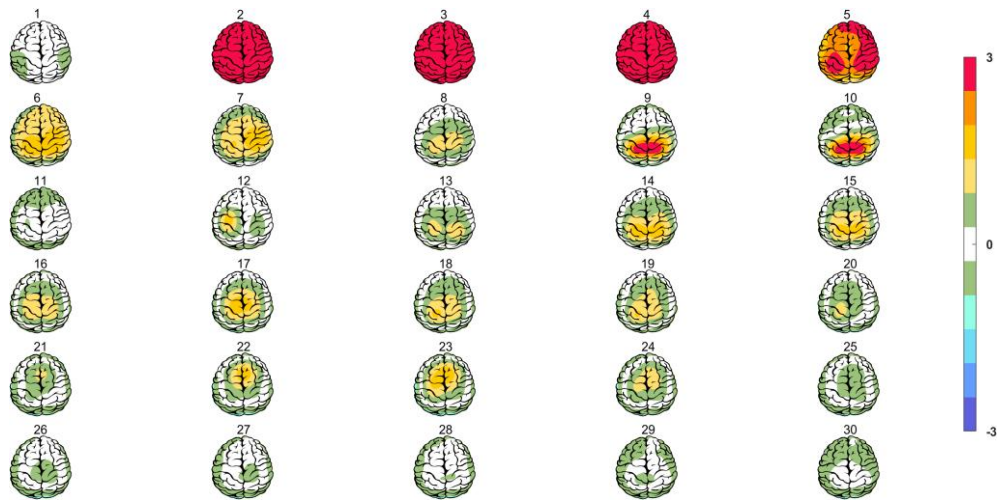
E.O.T/B Ratio (Raw- Z Score)



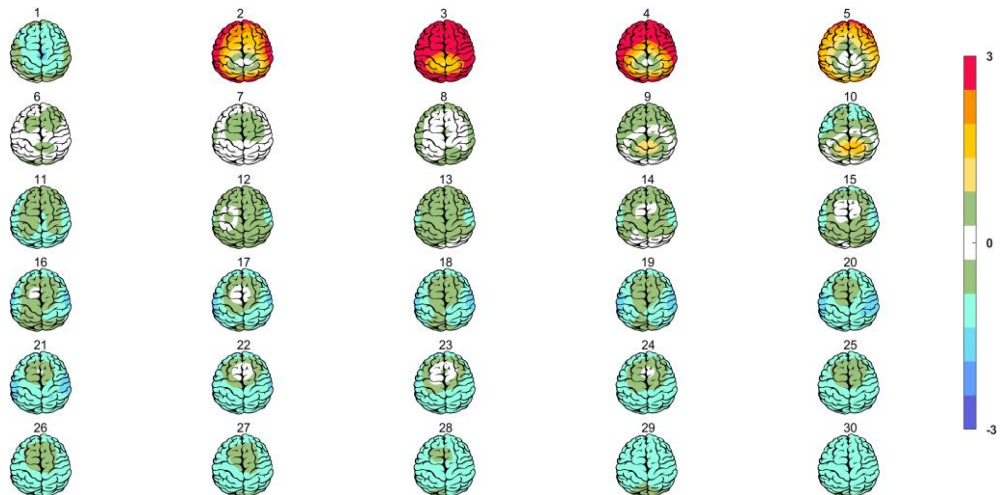
Arousal Level



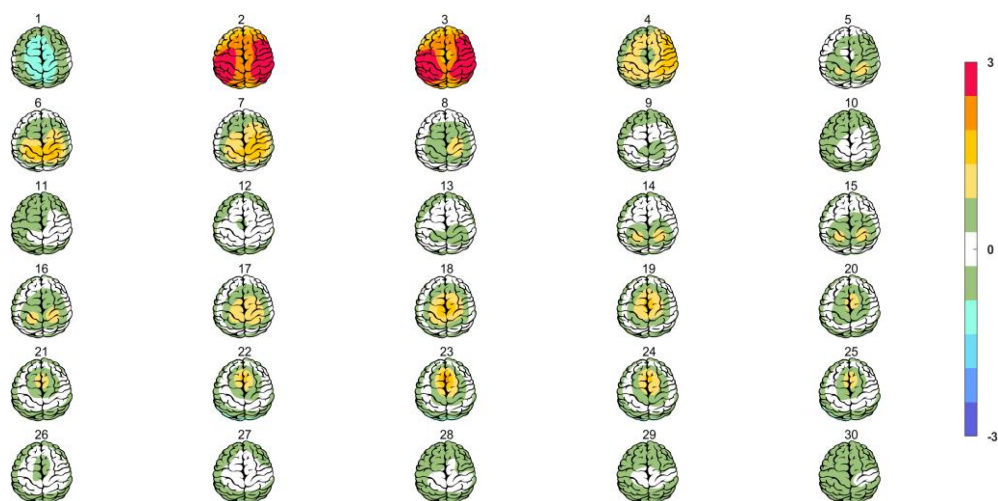
Absolute Power-Eye Closed (EC)



Relative Power-Eye Closed (EC)



Absolute Power-Eye Open (EO)



Relative Power-Eye Open (EO)

