





Report Description

Personal & Clinical Data

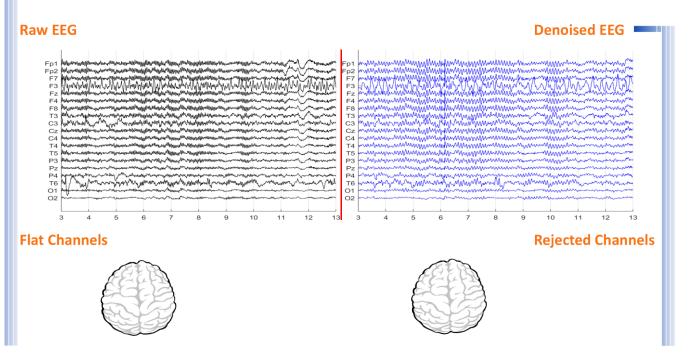
Name	Mojtaba Mirsalehi	Date of Recording	06-Oct-2024		
Date of Birth - Age	17-Sep-1994 - 30.05	Gender	Male		
Handedness(R/L)	Right	Source of Referral	Dr AtefeSafavi		
Initial Diagnosis	Initial assessment				
Current Medication	Medication Free				

Dr AtefeSafavi



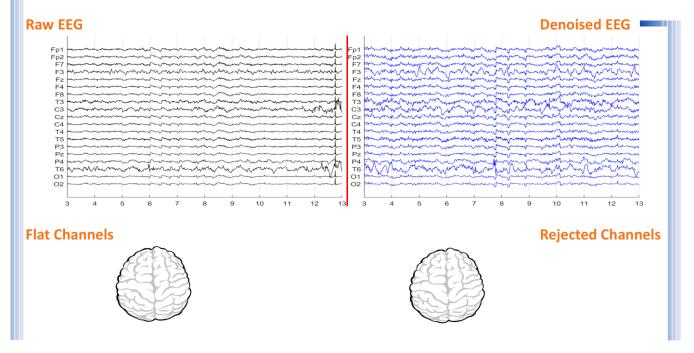


Denoising Information (EC)



Number of Eye and Muscle Elements			Low Artifact Percentage			
Eye	1	Muscle	0			
Total Artifact Percentage			High Artifact Percentage			
0			0			
EEG Quali	ty	bad		Total Recording Time Remaining 237.18 sec		

Denoising Information (EO)



Number of Eye and Muscle Elements		Low Artifact Percentage			
Eye	0	Muscle	2		
Total Artifact Percentage		High Artifact Percentage			
			0		
EEG Quality		bad		Total Recording Time Remaining 229.52 se	





Pathological assessment for mood disorders

Compare to Mood Disorders Database

















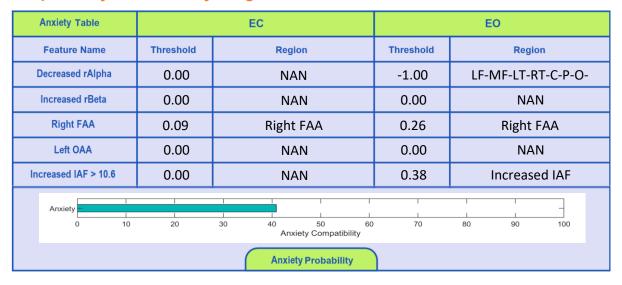




EEG Compatibility with Depression Diagnosis

Depression Table		EC	EO		
Feature Name	Threshold Region		Threshold	Region	
Increased Global rAlpha	0.50	global	0.00	NAN	
Increased global rTheta	0.00	NAN	0.00	NAN	
Decreased rDelta	-1.00	RF	0.00	NAN	
Increased rBeta	0.00	NAN	0.00	NAN	
Left FAA	0.00	NAN	0.00	NAN	
Right OAA	0.38	Right OAA	0.01	Right OAA	
Decreased Coherence (D, T)	-0.50	Decreased Coherence	-0.50	Decreased Coherence	
Increased Coherence (A, B)	2.00	Increased Coherence	0.00	NAN	
depression 0 11	0 20	30 40 50 6 Depression Compatibility		80 90 100	
Depression Probability					

EEG Compatibility with Anxiety Diagnosis







EEG Compatibility with Mood Swings Diagnosis*

Mood Swings Table	EC		EO	
Feature Name	Threshold	Region	Threshold	Region
Decreased rAlpha	0.00	NAN	-1.00	LF-MF-LT-RT-C-P-O-
Increased (rDelta+rTheta)	0.50	0	1.00	LF-MF-RT-P-O-
Increased rBeta	0.00	NAN	0.00	NAN
Decreased Alpha Coherence	-0.50	Decreased Alpha	-0.50	Decreased Alpha
Right FAA	0.09	Right FAA	0.26	Right FAA
BMD 0 10	20	30 40 50 60 Mood Swing Compatibility	70	80 90 100
Mood Swings Probability				

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

Arousal Level Detection







Pathological assessment for adult ADHD

Compare to Adult ADHD Database

















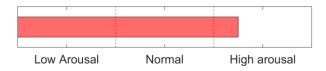




Cognitive Functions



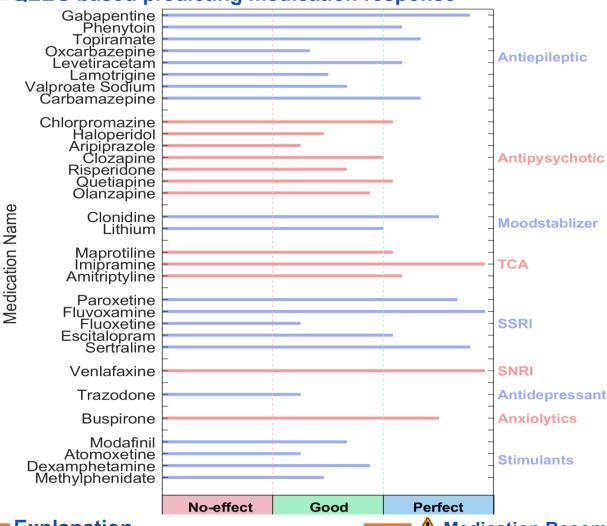
Arousal Level Detection







■QEEG based predicting medication response



Explanation

Medication Recommendation

These two tables can be considered the most important finding that can be extracted from QEEG. To prepare this list, the NPCIndex Article Review Team has studied, categorized, and extracted algorithms from many authoritative published articles on predict medication response and Pharmaco EEG studies. These articles are published between 1970 and 2021. The findings extracted from this set include 85 different factors in the raw band domains, spectrum, power, coherence, and loreta that have not been segregated to avoid complexity, and their results are shown in these diagrams. One can review details in NPCIndex.com .

These two charts, calculate response probability to various medications, according only to QEEG indicators. Blue charts favor drug response and red charts favor drug resistance. The longer the bar, the more evidence there is in the articles. Only drugs listed in the articles are listed. These tables present the indicators reviewed in the QEEG studies and are not a substitute for physician selection.



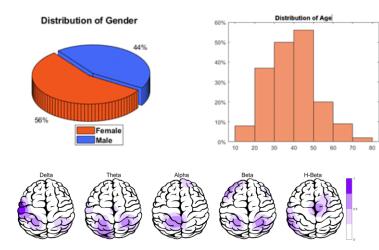


rTMS Response Prediction

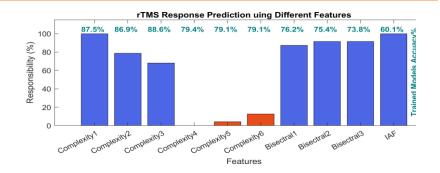
Network Performance

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

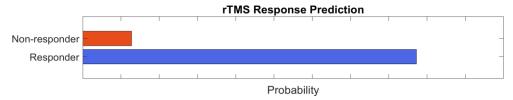
Participants Information



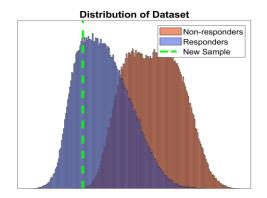
Features Information



Responsibility



Data Distribution



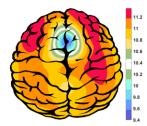
About Predicting rTMS Response

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.





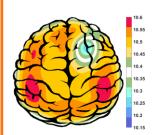
APF(EO)



Frontal APF= 11.08

Posterior APF= 10.88

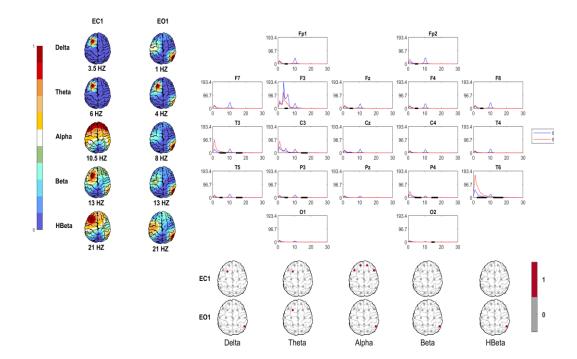
APF(EC)



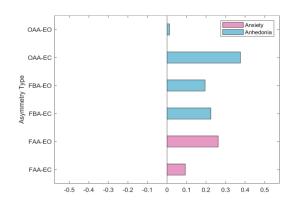
Frontal APF= 10.42

Posterior APF= 10.50

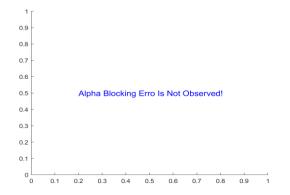
EEG Spectra



Alpha Asymmetry(AA)



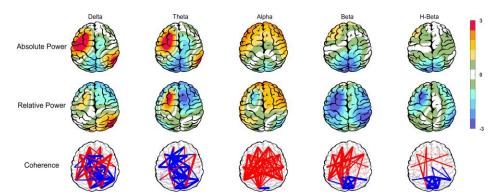
Alpha Blocking



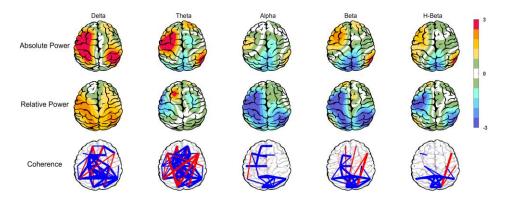




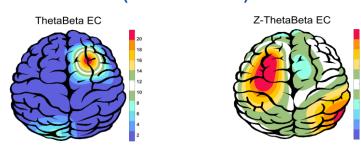
Z Score Summary Information (EC)



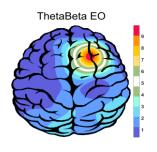
Z Score Summary Information (EO)

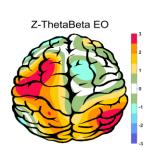


E.C.T/B Ratio (Raw- Z Score)

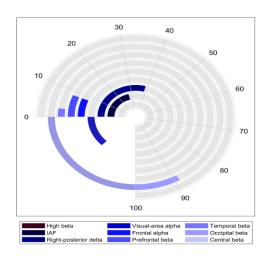


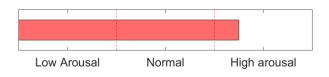
E.O.T/B Ratio (Raw- Z Score)





Arousal Level

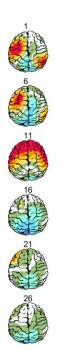


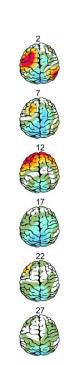


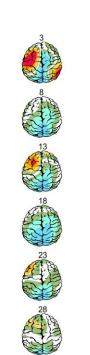


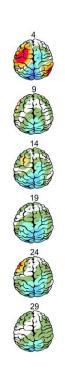


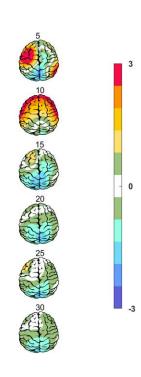
Absolute Power-Eye Closed (EC) 🌮





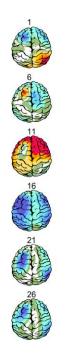


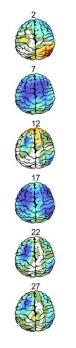


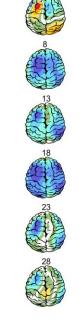


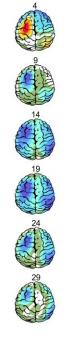
Relative Power-Eye Closed (EC) 🥟

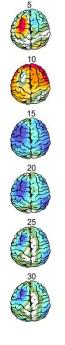










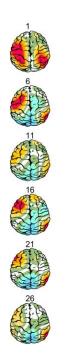


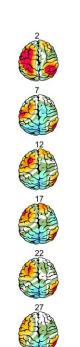


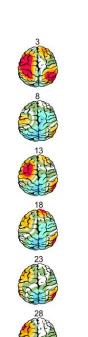


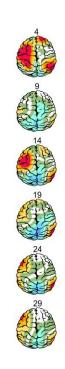
Absolute Power-Eye Open (EO) 📀

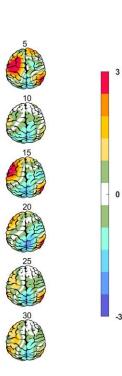












Relative Power-Eye Open (EO)

