





# QEEG Clinical Report BrainLens V0.4

## Report Description

## Personal & Clinical Data

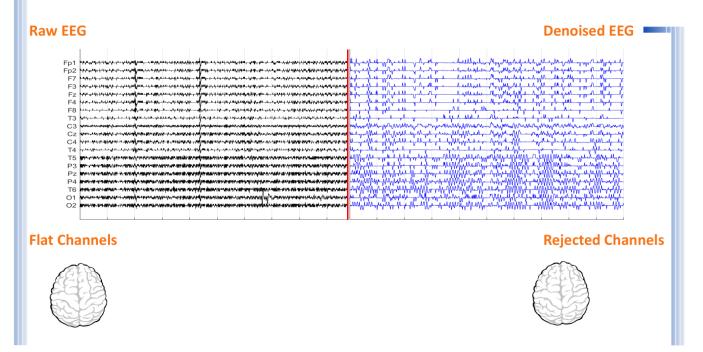
Name	Amirhossein Rahmani	Date of Recording	30-Jul-2024				
Date of Birth - Age	17-Dec-2005 - 18.62	Gender	Male				
Handedness(R/L)	Right	Source of Referral	Ms Mazandarani				
Initial Diagnosis	OCD						
Current Medication	Sertraline, Biperidine, Quetiapine, Propranolol, Primozide, Aripiprazolee						

Ms Mazandarani





## Denoising Information (EC)



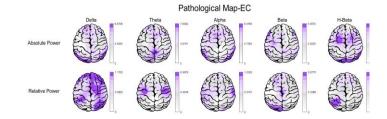
Number of Eye and Muscle Elements			Low Artifact Percentage					
Eye	1 Muscle 0		0	()				
Total Artifact Percentage			High Artifact Percentage					
0								
EEG Quality good			<b>Total Recording Time Remaining</b> 172.17 sec					





## Pathological assessment for mood disorders

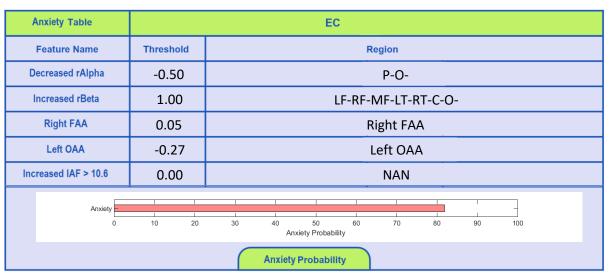
#### **Compare to Mood Disorders Database**



#### **EEG Compatibility with Depression Diagnosis**

Depression Table		EC							
Feature Name	Threshold	Threshold Region							
Increased Global rAlpha	0.00	NAN							
Increased global rTheta	0.00	0.00 NAN							
Decreased rDelta	-0.50	O RF-LT-RT-							
Increased rBeta	1.00	LF-RF-MF-LT-RT-C-O-							
Left FAA	0.00	NAN							
Right OAA	0.00	NAN							
Decreased Coherence (D, T)	-0.50	Decreased Coherence (D,T)							
Increased Coherence (A, B)	0.00	NAN							
depression 0	10 20	30 40 50 60 70 80 90 100  Depression Probability							
Depression Probability									

## **EEG Compatibility with Anxiety Diagnosis**





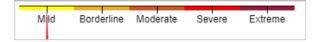


### **EEG Compatibility with Mood Swings Diagnosis \***

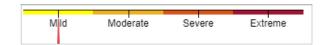
M	ood Swings Table	EC										
	Feature Name	Threshold	Threshold Region									
D	ecreased rAlpha	-0.50	-0.50 P-O-									
Incre	eased (rDelta+rTheta)	0.00	NAN									
	Increased rBeta	1.00		LF-RF-MF-LT-RT-C-O-								
Decre	ased Alpha Coherence	-0.50	Decreased Alpha Coherence									
	Right FAA	0.05	Right FAA									
	BMD	1 1	30	1 40	50	1 60	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).

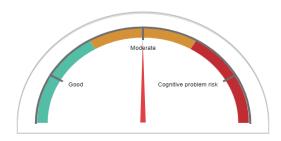
## **Depression Severity**



## **Anxiety Severity**



## Cognitive Functions



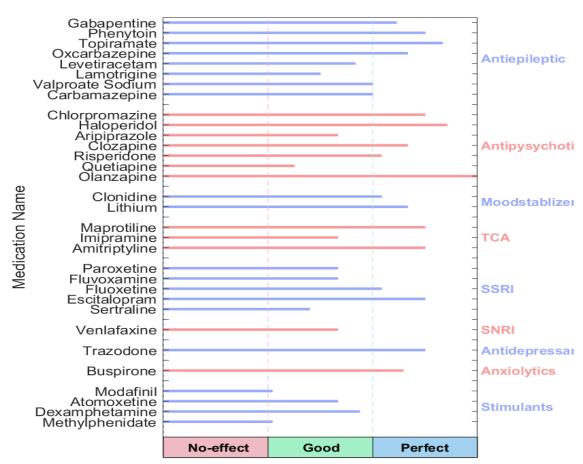
## Arousal Level Detection







### 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.

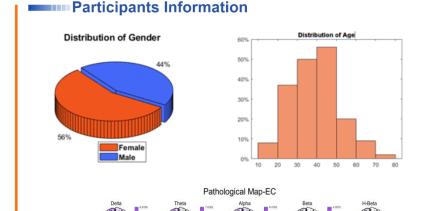




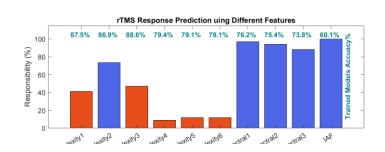
#### rTMS Response Prediction

#### Network Performance

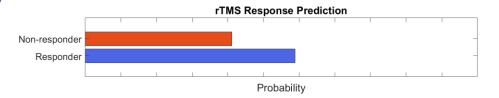
Accuracy: 92.1% Sensitivity: 89.13% Specificity: 97.47%



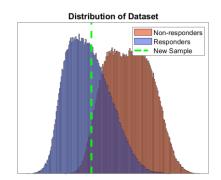
#### Features Information



#### Responsibility



#### Data Distribution



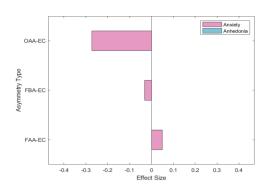
#### About Predicting rTMS Response

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.

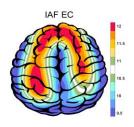




## Alpha Asymmetry(AA)



## IAF(EC)

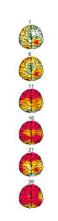


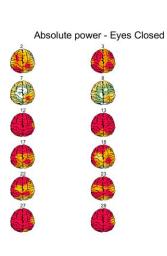
Frontal APF= 12.00

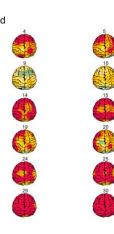
**Posterior APF= 09.50** 

## Absolute Power-Eye Closed (EC) 🌮









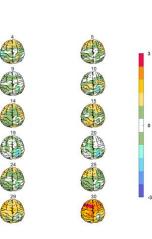
## Relative Power-Eye Closed (EC) 🌮







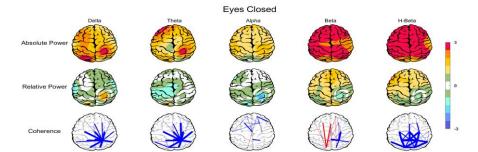




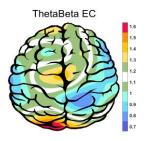


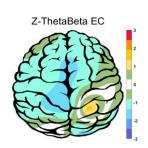


## Z Score Summary Information (EC)

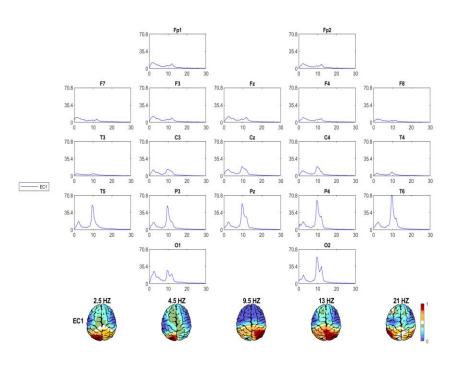


## E.C.T/B Ratio ( Raw- Z Score)





## EEG Spectra



## Arousal Level

