





# QEEG Clinical Report BrainLens V0.4

# Report Description

# Personal & Clinical Data

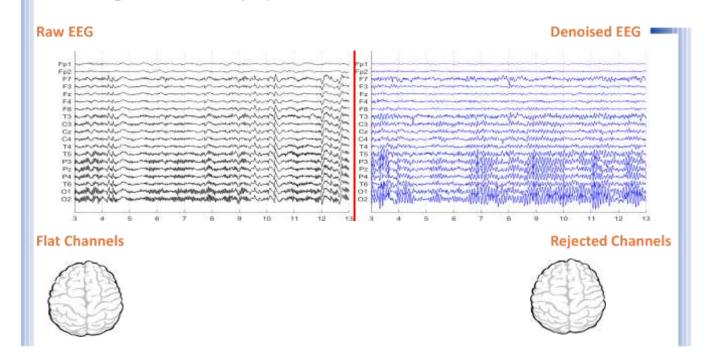
Name	Fateme Khorasani	Date of Recording	25-Sep-2024					
Date of Birth - Age	21-Mar-2005 - 19.51	Gender	Female					
Handedness(R/L)	Right	Source of Referral	Dr Masjedi					
Initial Diagnosis	Anxiety-Dementia-Headache							
Current Medication	Medication Free							

Dr Masjedi





# Denoising Information (EC)



Number of Eye and Muscle Elements		Low Artifact Percentage						
Eye	4	Muscle	0	0				
Total Artifact Percentage		High Artifact Percentage						
0		0						
EEG Quali	ty	bad		Total Recording Time Remaining	337.20 sec			





### Pathological assessment for mood disorders

#### Compare to Mood Disorders Database







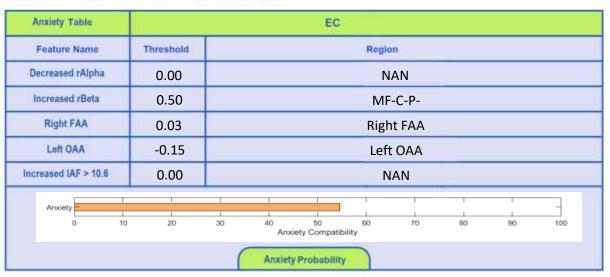




#### **EEG Compatibility with Depression Diagnosis**

Depression Table	EC										
Feature Name	Threshold	Threshold Region									
Increased Global rAlpha	0.50	global									
Increased global rTheta	0.00		NAN								
Decreased rDelta	-0.50		MF-P-O-								
Increased rBeta	0.50		MF-C-P-								
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				1 '	-	-	-	-	-		
0 1	0 20	30	40 Depres	50 sion Compa	60 tibility	70	80	90	100		
		(	Depression	Probabili	ty						

# **EEG Compatibility with Anxiety Diagnosis**







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

Mood Swings Table		EC								
Feature Name	Threshold	Threshold Region								
Decreased rAlpha	0.00	0.00 NAN								
Increased (rDelta+rTheta)	0.00	0.00 NAN								
Increased rBeta	0.50	0.50 MF-C-P-								
Decreased Alpha Coherence	-0.50	-0.50 Decreased Alpha Coherence								
Right FAA	0.03		Right FAA							
BMD 0 10	20	30	40 Mood S	50 Swing Compa	60 atibility	70	80	90	100	
			Mood Sv	vings Proba	bility					

\* 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



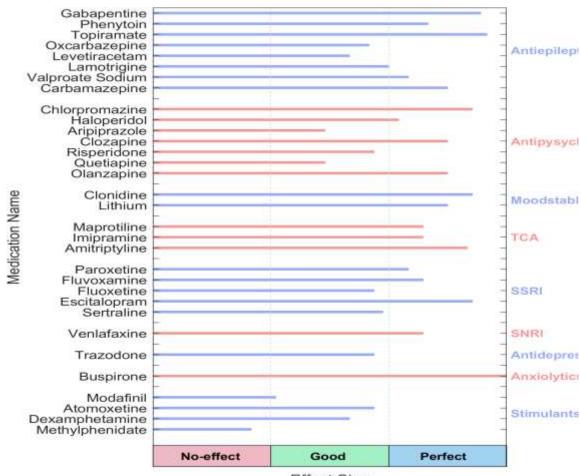
#### Arousal Level Detection







### QEEG based predicting medication response



Effect Size

### Explanation



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.

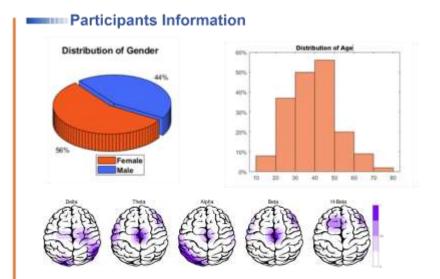




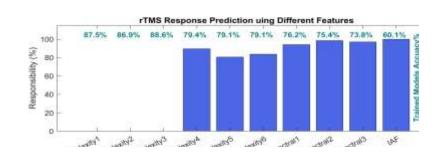
#### rTMS Response Prediction

#### Network Performance

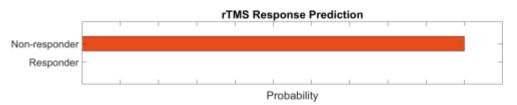
Accuracy: 92.1% Sensitivity: 89.13% Specificity: 97.47%



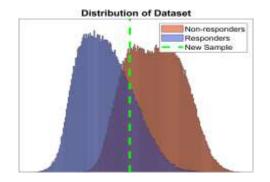
#### Features Information







#### Data Distribution



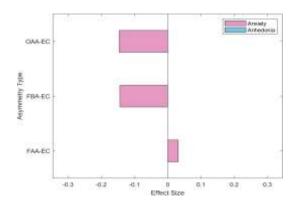
#### About Predicting rTMS Response

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.

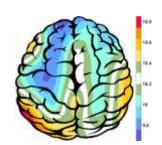




### Alpha Asymmetry(AA)



### APF(EC)



Frontal APF= 09.92

Posterior APF= 10.38

### 🚃 Absolute Power-Eye Closed (EC) 🐠











































### TBI Severity



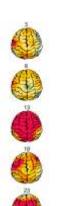
### ====Relative Power-Eye Closed (EC) 🠠





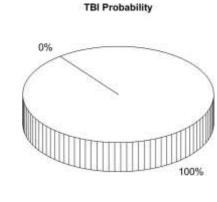










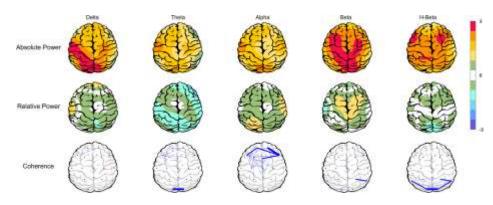


TBI Probability

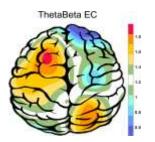


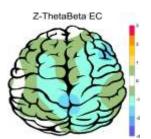


### Z Score Summary Information (EC)

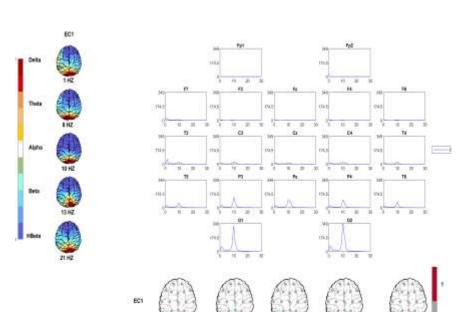


### E.C.T/B Ratio ( Raw- Z Score)





### EEG Spectra



### Arousal Level

