





## QEEG Clinical Report BrainLens V0.4

## Report Description

## Personal & Clinical Data

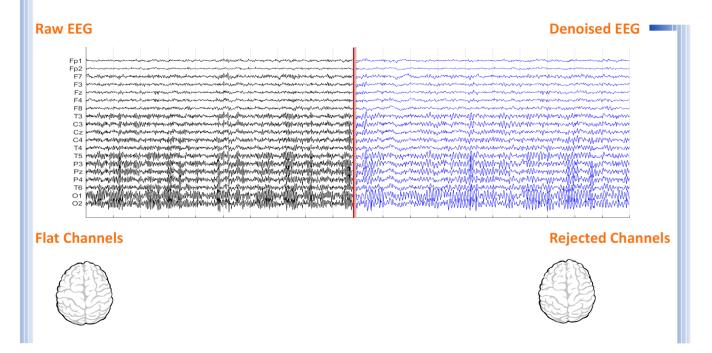
Name	Hossein Ebrahimtousi	Date of Recording	19-Feb-2024				
Date of Birth - Age	21-Mar-1989 - 34.91	Gender	Male				
Handedness(R/L)	Right	Source of Referral	Dr Masjedi				
Initial Diagnosis	Back pain						
Current Medication	Medication Free						

Dr Masjedi





## Denoising Information (EC)



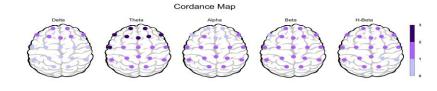
Number of Eye and Muscle Elements				Low Artifact Percentage				
Eye	0	Muscle 0		0				
Total Artifact Percentage		High Artifact Percentage						
()								
EEG Quality bad		<b>Total Recording Time Remaining</b> 221.30 sec						





## Pathological assessment for mood disorders

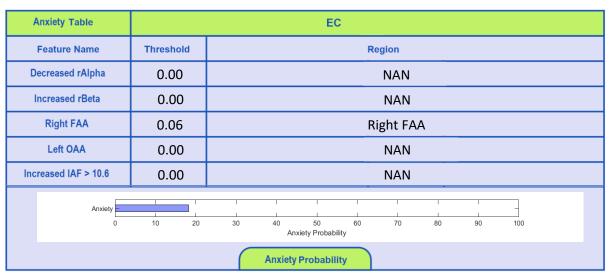
#### **Compare to Mood Disorders Database**



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

Depression Table		EC							
Feature Name	Threshold	Region							
Increased Global rAlpha	0.50	global							
Increased global rTheta	0.50	global							
Decreased rDelta	-0.50	P-O-							
Increased rBeta	0.00	NAN							
Left FAA	0.00	NAN							
Right OAA	0.21	Right OAA							
Decreased Coherence (D, T)	-0.50	Decreased Coherence (D,T)							
Increased Coherence (A, B)	0.50	Increased Coherence (A,B)							
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 \***

Мо	ood Swings Table	EC									
F	eature Name	Threshold		Region							
De	ecreased rAlpha	0.00		NAN							
Increa	sed (rDelta+rTheta)	1.00		LF-LT-RT-C-							
ln	ncreased rBeta	0.00	NAN								
Decreas	sed Alpha Coherence	-0.50	Decreased Alpha Coherence								
	Right FAA	0.06	Right FAA								
	BMD 0	1 1 1 1 1 1 1 20	30	1 40	50	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



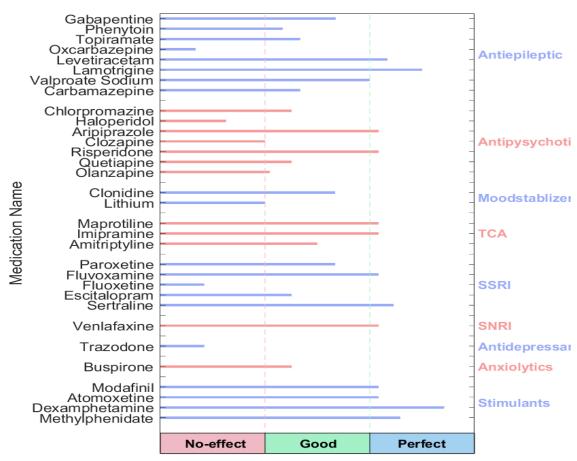
### Arousal Level Detection







#### QEEG based predicting medication response



## **Explanation**



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.



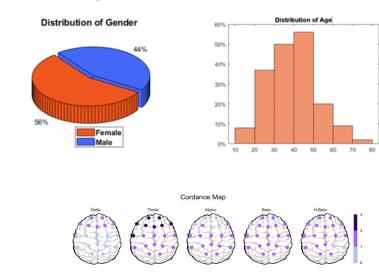


#### rTMS Response Prediction

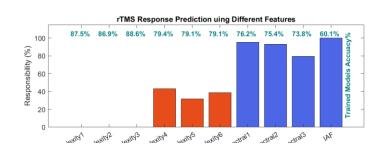
#### Network Performance

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

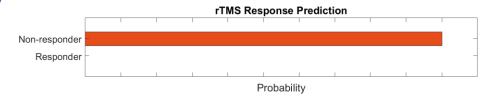
#### Participants Information



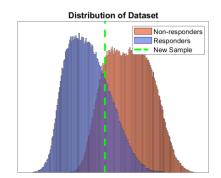
#### Features Information



#### Responsibility



#### Data Distribution



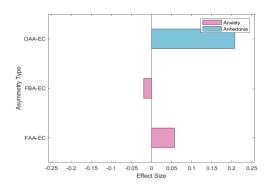
#### About Predicting rTMS Response

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.

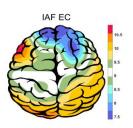




## Alpha Asymmetry(AA)



## IAF(EC)

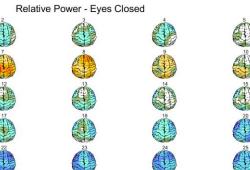


Eye Close IAF= 09.25

## Absolute Power-Eye Closed (EC) 🌮

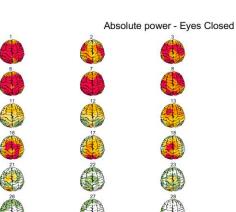


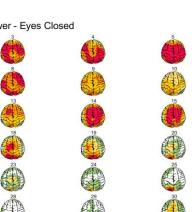






## Relative Power-Eye Closed (EC) 🌮





# TBI Probability 20%

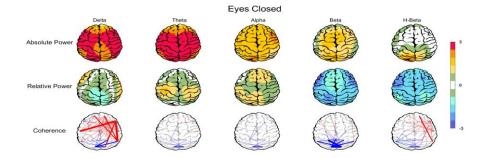
80%

TBI Probability

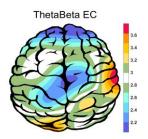


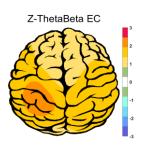


## Z Score Summary Information (EC)

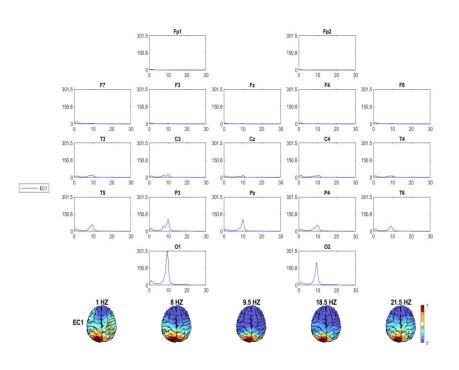


## E.C.T/B Ratio ( Raw- Z Score)





## EEG Spectra



## Arousal Level

