

# Report Description

# Personal & Clinical Data

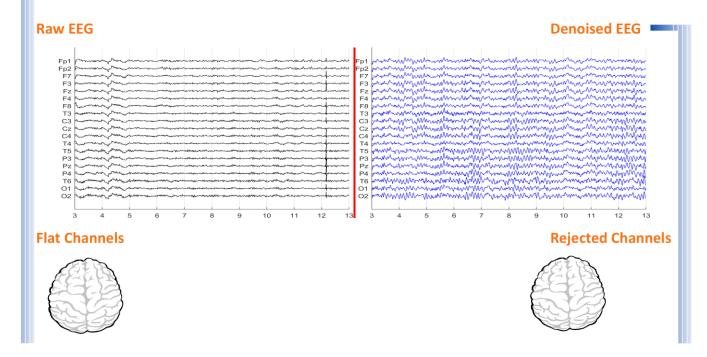
Name	Melika Khodayari	Date of Recording	02-Oct-2024				
Date of Birth - Age	14-May-2005 - 19.38	Gender	Female				
Handedness(R/L)	Right	Source of Referral	Dr Mohammadhasani				
Initial Diagnosis	ADHD-Anxiety						
Current Medication	Medication Free						

Dr Mohammadhasani





# Denoising Information (EC)



Number of Eye and Muscle Elements		Low Artifact Percentage						
Eye	3	Muscle	1	0				
Total Artifact Percentage		High Artifact Percentage						
		0						
EEG Quality good		Total Recording Time Remaining	488.57 sec					





## Pathological assessment for mood disorders

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







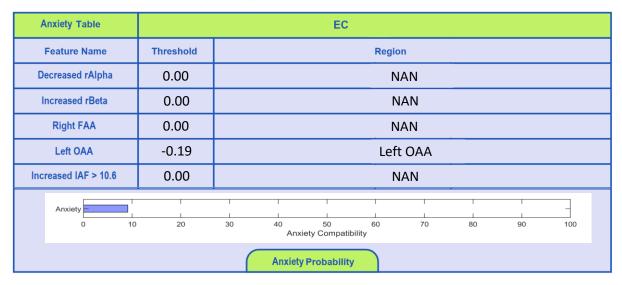




### **EEG Compatibility with Depression Diagnosis**

Depression Table		EC							
Feature Name	Threshold	Region							
Increased Global rAlpha	0.00		NAN						
Increased global rTheta	0.00		NAN						
Decreased rDelta	-0.50	С							
Increased rBeta	0.00		NAN						
Left FAA	-0.05	Left FAA							
Right OAA	0.00	NAN							
Decreased Coherence (D, T)	0.00	NAN							
Increased Coherence (A, B)	0.00	Increased Coherence (A,B)							
depression 0	1 1 1 1 1 1 1 1 1 1 1 2 0	30 40 De	     50   pression Com	l 60 patibility	70	80	90	100	
Depression Probability									

## **EEG Compatibility with Anxiety Diagnosis**







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

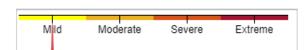
Mood Swings Table	EC									
Feature Name	Threshold	Region								
Decreased rAlpha	0.00	NAN								
Increased (rDelta+rTheta)	0.50	RT-O-								
Increased rBeta	0.00		NAN							
Decreased Alpha Coherence	0.00	NAN								
Right FAA	0.00		NAN							
BMD 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	20	30	40 Mood S	50 Swing Comp	60 atibility	1 70	I 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).

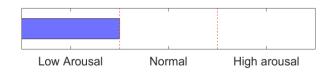
### **Depression Severity**







## Arousal Level Detection







# Pathological assessment for adult ADHD

## **Compare to Adult ADHD Database**







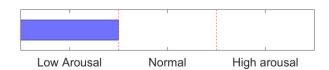




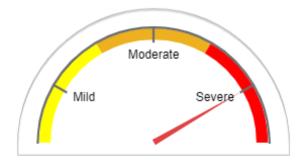
# **Cognitive Functions**



### **Arousal Level Detection**



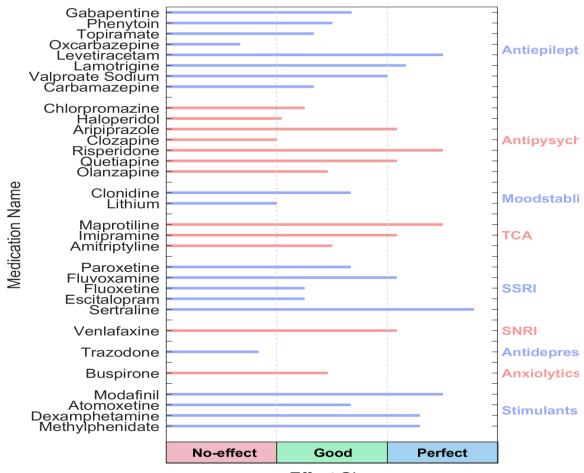
## **Adult ADHD Severity**







### QEEG based predicting medication response



Effect Size

### **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.

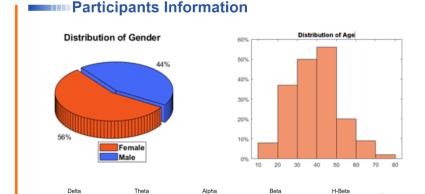




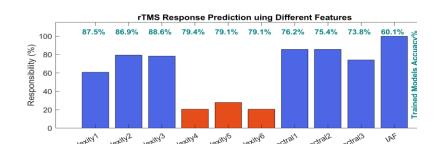
#### rTMS Response Prediction

#### Network Performance

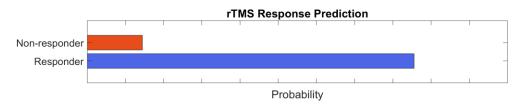
Accuracy: 92.1% Sensitivity: 89.13% Specificity: 97.47%



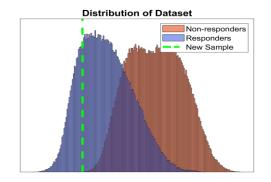
#### Features Information



#### Responsibility



#### Data Distribution



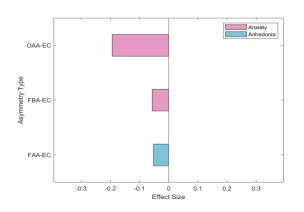
#### About Predicting rTMS Response

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.

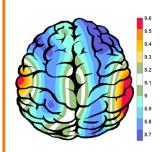




## Alpha Asymmetry(AA)



## APF(EC)

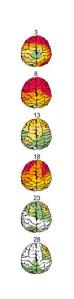


Frontal APF= 08.75

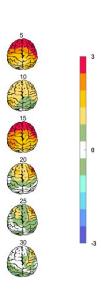
**Posterior APF= 09.25** 

### 📥 Absolute Power-Eye Closed (EC) 🌮

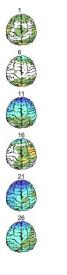


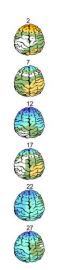


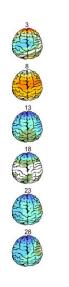


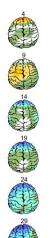


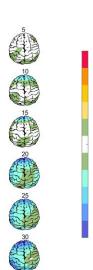
### Relative Power-Eye Closed (EC) 🌮







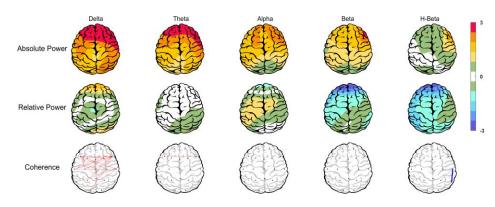




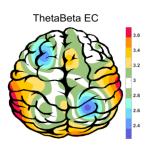


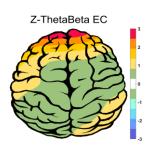


## Z Score Summary Information (EC)

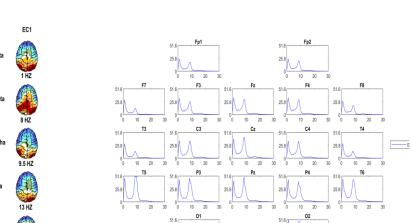


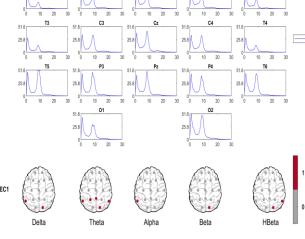
## E.C.T/B Ratio ( Raw- Z Score)





### **EEG** Spectra





### Arousal Level

