





# QEEG Clinical Report BrainLens V0.4

## Report Description

### Personal & Clinical Data

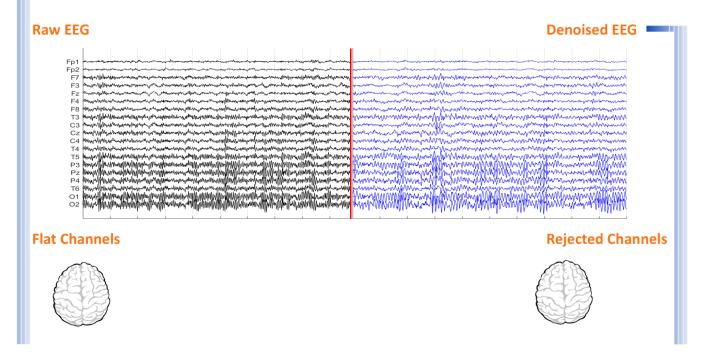
Name	Zahra Ebrahimtousi	Date of Recording	27-May-2024		
Date of Birth - Age	21-Mar-1957 - 67.18	Gender	Female		
Handedness(R/L)	Right	Source of Referral	Dr Masjedi		
Initial Diagnosis	Memory problems, Anxiety				
Current Medication	Medication free				

Dr Masjedi





### Denoising Information (EC)



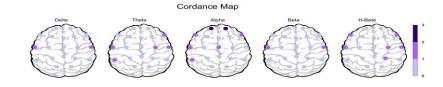
Number of Eye and Muscle Elements				Low Artifact Percentage			
Eye	2	Muscle	0	0			
Total Artifact Percentage				High Artifact Percentage			
0				0			
EEG Quali	ity	bad		Total Recording Time Remaining	377.44 sec		





### Pathological assessment for mood disorders

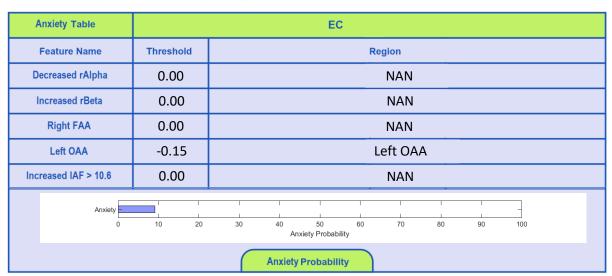
#### **Compare to Mood Disorders Database**



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

Depression Table		EC					
Feature Name	Threshold	Region					
Increased Global rAlpha	0.50	global					
Increased global rTheta	1.00	global					
Decreased rDelta	-0.50 RF-MF-LT-C-P-O-						
Increased rBeta	0.00	NAN					
Left FAA	-0.09	Left FAA					
Right OAA	0.00	NAN					
Decreased Coherence (D, T)	-0.50	Decreased Coherence (D,T)					
Increased Coherence (A, B)	1.00	Increased Coherence (A,B)					
depression 0	10 20	30 40 50 60 70 80 90 100  Depression Probability					
Depression Probability							

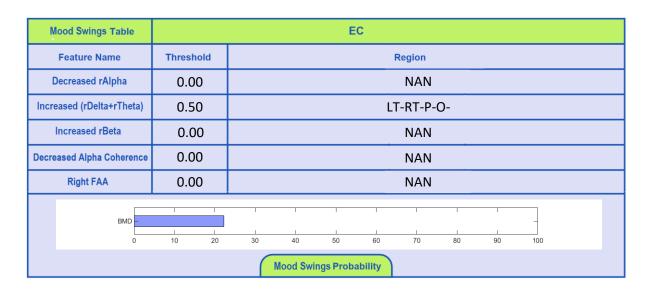
### **EEG Compatibility with Anxiety Diagnosis**





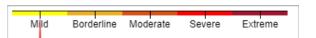


#### **EEG Compatibility with Mood Swings Diagnosis\***



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

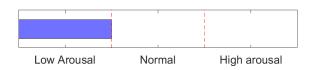
### **Depression Severity**



### Anxiety Severity



### Arousal Level Detection

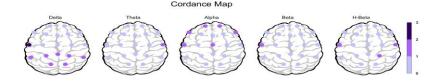






### Pathological assessment for Dementia

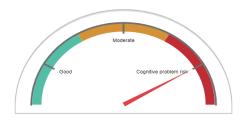
### **Compare to Dementia Database**



### **Dementia Probability**

	Dementia Table	EC						
	Feature Name	Threshold	Region					
	Increased rDelta	0.00	NAN					
	Increased rTheta	2.00	LF-RF-MF-LT-RT-C-P-O-					
	Decreased rAlpha	0.00	NAN					
	Decreased rBeta	-0.50	LF-RF-MF-LT-RT-C-P-O-					
lr	ncreased T/A Ratio	0.50	LT-P-					
Ir	ncreased D/A Ratio	0.00	NAN					
Decrea	sed (D+T+A+B) Coherence	-0.50	Decreased global Coherence					
	dementia	10 20	30 40 50 60 70 80 90 100  Dementia Probability					
	Dementia Probability							

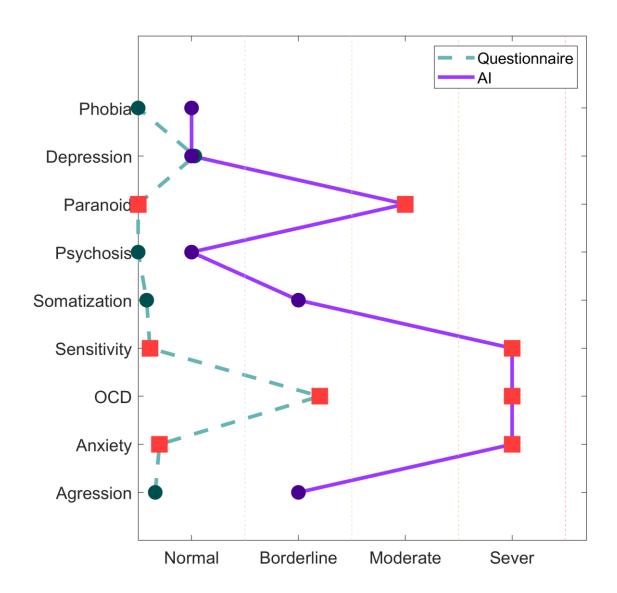
### **Cognitive Impairment Severity**







#### **AI-Driven Psychometric Symptoms Assessing**



#### **Explanation**

Note

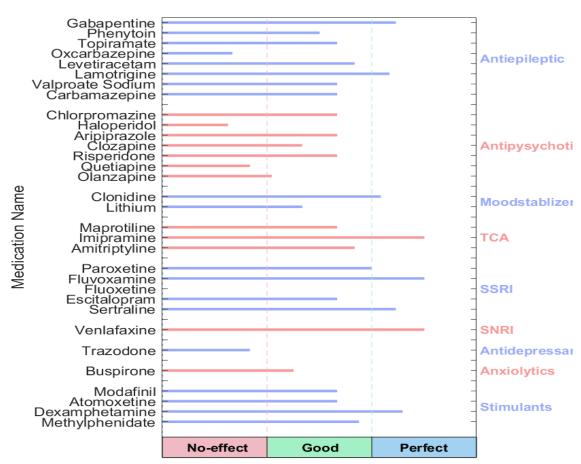
The above diagram illustrates the psychometric symptoms based on the SCL90 questionnaire of the subject (green line) and AI (purple line). Combination of non-linear EEG markers have been used to estimate these symptoms using AI. All the AI algorithms used in these analysis have an accuracy more than 97.60%, a sensitivity more than 97.54%, and a specificity more than 97.58%.

If a red square marker appears in the symptom, it means there is a remarkable difference between the subject's questionnaire score and AI estimate. In the other words, the subject's questionnaire score is in the normal to borderline area, but the AI estimate is in the moderate to extreme area or vice versa.





### 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.



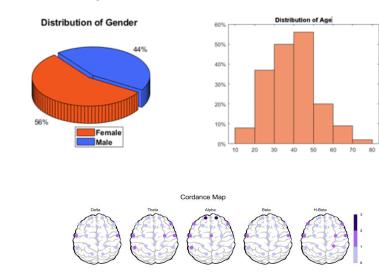


#### rTMS Response Prediction

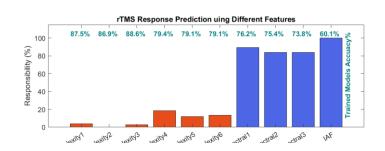
#### Network Performance

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

#### Participants Information



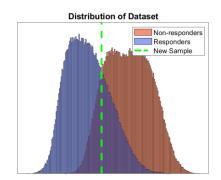
#### Features Information



#### Responsibility



#### Data Distribution



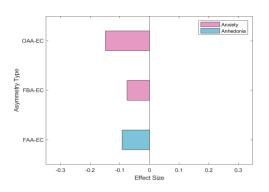
#### About Predicting rTMS Response

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.

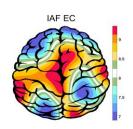




### Alpha Asymmetry(AA)



### IAF(EC)



Eye Close IAF= 09.25

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



Relative Power - Eyes Closed















### TBI Severity

0	1	2	3	4	5	16	7	8	9	10
-										













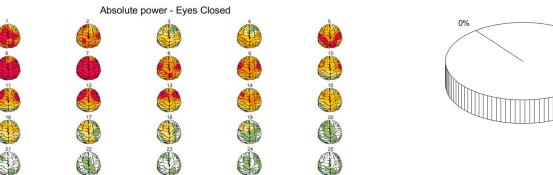


### 🚃 Relative Power-Eye Closed (EC) 🌮





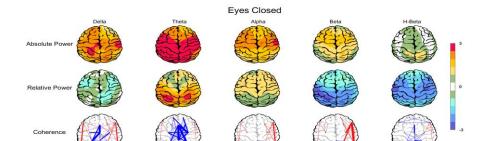
**TBI Probability** 



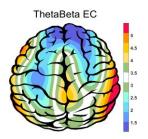


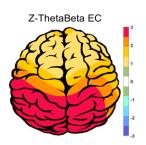


### Z Score Summary Information (EC)

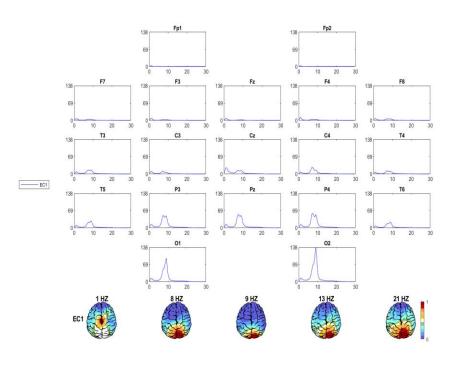


### E.C.T/B Ratio ( Raw- Z Score)





### EEG Spectra



### Arousal Level

