





QEEG Clinical Report BrainLens V0.4

Report Description

Personal & Clinical Data

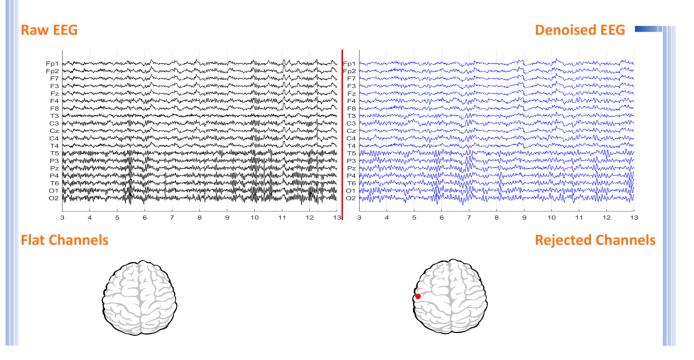
Name	Zahra Ehsanirad	Date of Recording	08-Oct-2024	
Date of Birth - Age	06-Aug-2009 - 15.17	Gender	Female	
Handedness(R/L)	Right	Source of Referral	Reyhan Clinic-Dr Javadifar	
Initial Diagnosis	ADHD-Depression-OCD			
Current Medication	Medication Free			

Reyhan Clinic-Dr Javadifar



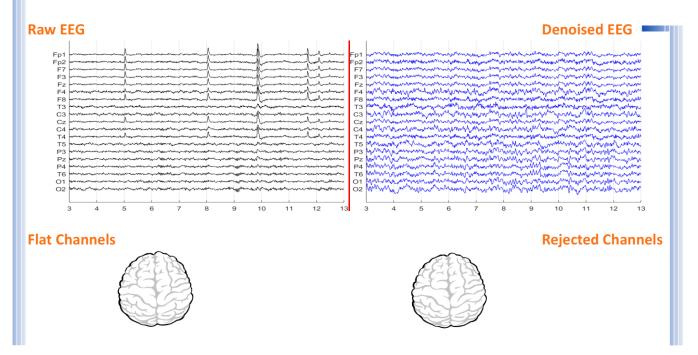


Denoising Information (EC)



Number of Eye and Muscle Elements		Low Artifact Percentage				
Eye	0	Muscle	0			
Total Artifact Percentage		High Artifact Percentage				
		0				
EEG Quality		good		Total Recording Time Remaining	240.50 sec	

Denoising Information (EO)



Number of Eye and Muscle Elements		Low Artifact Percentage			
Eye	0	Muscle	0		
Total Artifact Percentage		High Artifact Percentage			
				0	
EEG Quality		good		Total Recording Time Remaining 232.66 sec	





Pathological assessment for ADHD

Compare to ADHD Database

















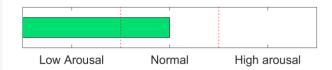




EEG Compatibility with ADHD Diagnosis

ADHD Table	EC		EO		
Feature Name	Threshold	Region	Threshold	Region	
Increased rDelta	0.00	NAN	0.50	global	
Increased rTheta	0.00	NAN	0.00	NAN	
Increased rAlpha	0.50	global	0.00	NAN	
Increased rBeta	0.00	NAN	0.00	NAN	
Decreased SMR	-0.50	global	-1.00	global	
Increased T/B Ratio	0.00	NAN	1.00	Fz and Cz	
ADHD 0 10 20 30 40 50 60 70 80 90 100 ADHD Compatibility					
ADHD Probability					

Arousal Level Detection



ADHD Clustering

1. Same inattentive and hyperactive prevalence. Well respond to stimulants.

^{*} If there is Paroxymal epileptic discharge in EEG data, this case needs sufficient sleep and should avoid high carbohydrate intake. You can consider anticonvulsant medications.

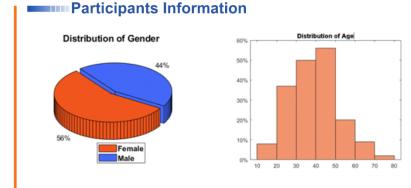




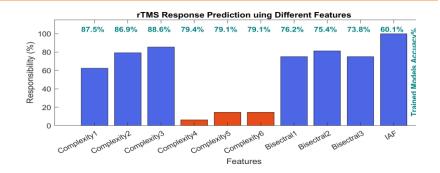
rTMS Response Prediction

Network Performance

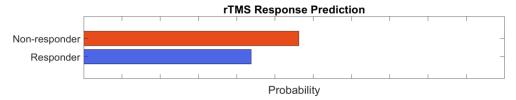
Accuracy: 92.1% Sensitivity: 89.13% Specificity: 97.47%



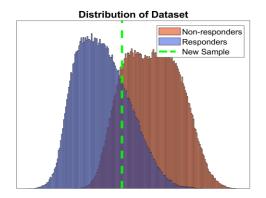
Features Information



Responsibility



Data Distribution



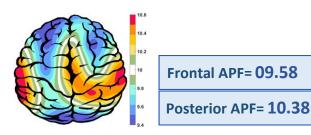
About Predicting rTMS Response

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.

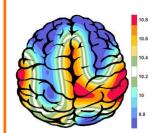




APF(EO)



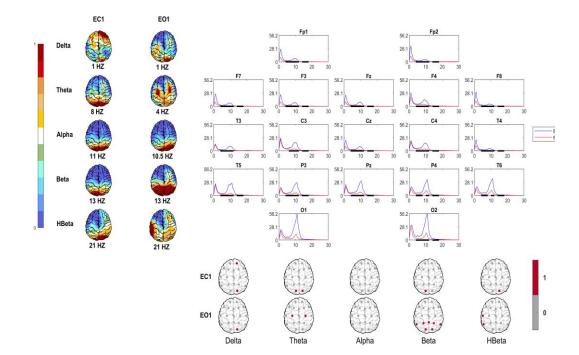
APF(EC)



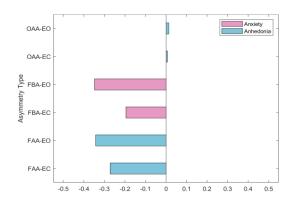
Frontal APF= 09.75

Posterior APF= 10.75

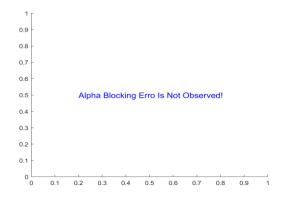
EEG Spectra



Alpha Asymmetry(AA)



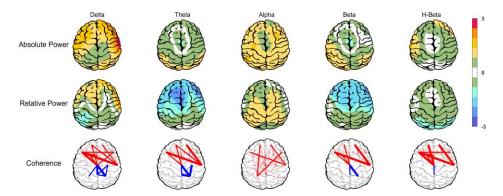
Alpha Blocking



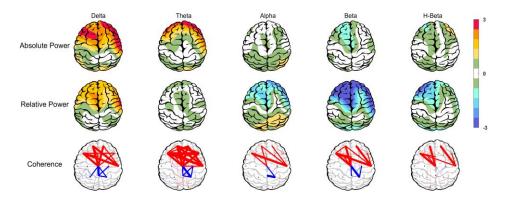




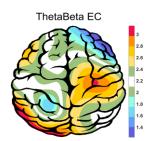
Z Score Summary Information (EC)

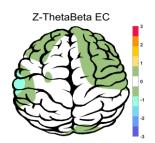


Z Score Summary Information (EO)

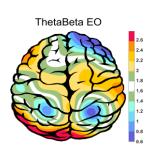


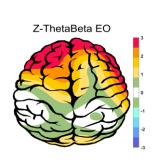
E.C.T/B Ratio (Raw- Z Score)



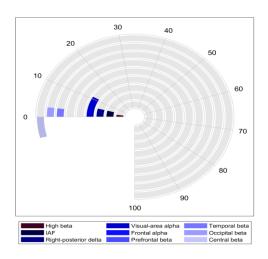


E.O.T/B Ratio (Raw- Z Score)





Arousal Level



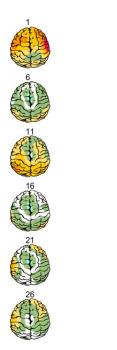


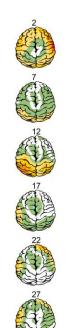


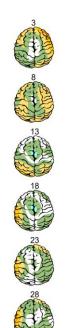


Absolute Power-Eye Closed (EC) 🌮

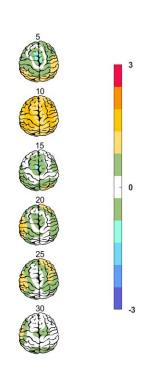






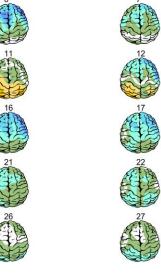


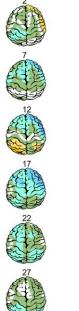


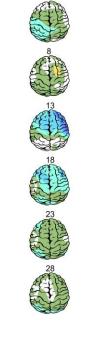


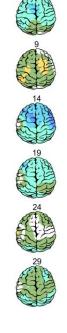
Relative Power-Eye Closed (EC) ớ

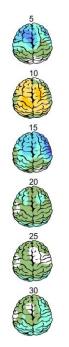










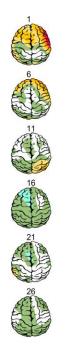


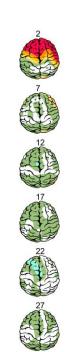


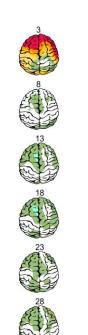


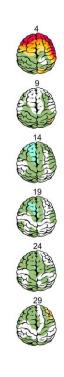
Absolute Power-Eye Open (EO) 📀

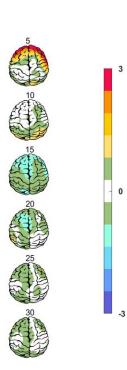












Relative Power-Eye Open (EO)

