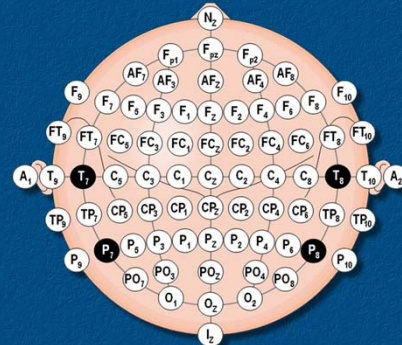


Montage, Review, and Analysis of High Density EEG

Terrence D. Lagerlund, M.D., Ph.D.



Modified Combinatorial Nomenclature



CP120846-18

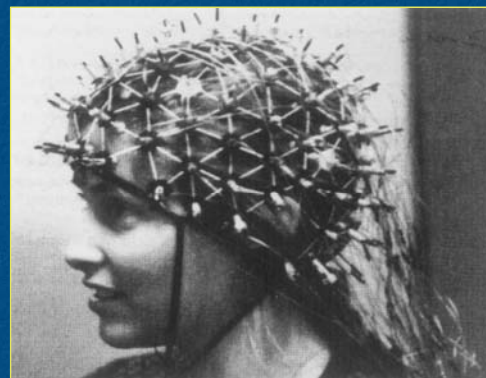
Disclosure

Relevant financial relationships

- None

Off-label/investigational uses

- None



Standard vs. High Density EEG

- | Standard EEG (10-20) | High Density EEG (10-10) |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <ul style="list-style-type: none"> • Accuracy limited by large interelectrode spacing (6-7 cm for 10-20 system placement) • May provide too low spatial resolution to determine localization and even lateralization of seizure generators (e.g., in medial frontal lobe epilepsy) | <ul style="list-style-type: none"> • Use of higher density electrode arrays (for example, 10-10 system) improves spatial resolution • Improved spatial resolution may allow better localization of seizure generators for epilepsy surgery |

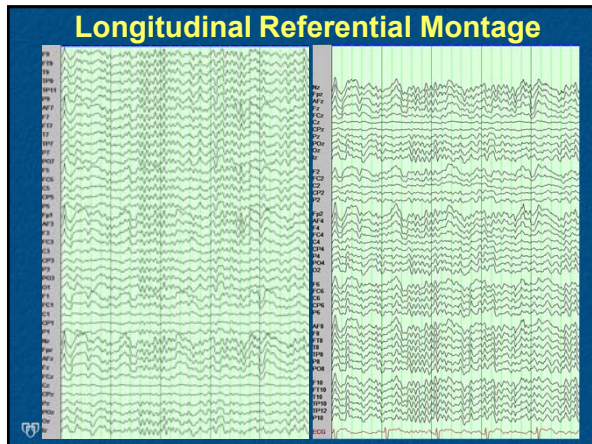


High Density Montages

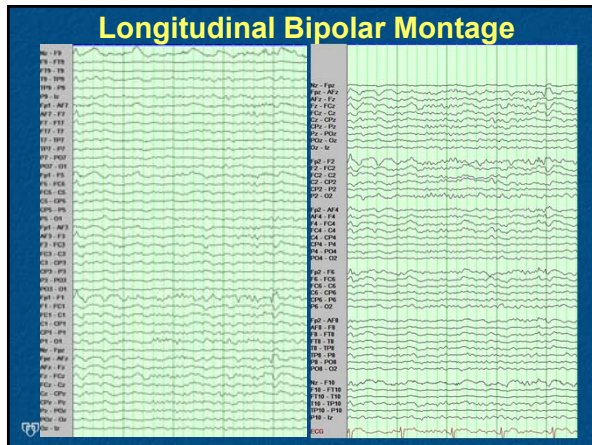
- Referential montages
 - Used as input for amplifier (often with Cz or CPz reference).
 - Also can use average ear or average mastoid reference.
- Bipolar montages
 - Longitudinal bipolar
 - Transverse bipolar



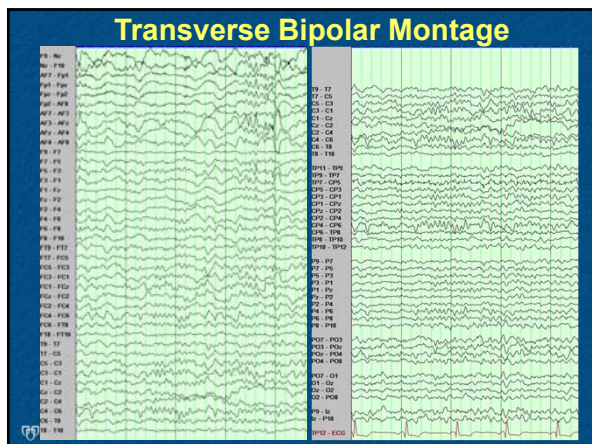
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- ### Localization by Conventional EEG
- Requires no special equipment (readily available)
 - Requires no models or assumptions about data, generators, or volume conducting medium
 - Instrumental, external interference, and physiologic artifacts are relatively easy to recognize



- ### Localization by Processed EEG/MEG
- Requires special equipment (computer software or MEG unit)
 - May require models or assumptions about data, generators, or volume conducting medium
 - Instrumental, external interference, and physiologic artifacts may be difficult to recognize after processing

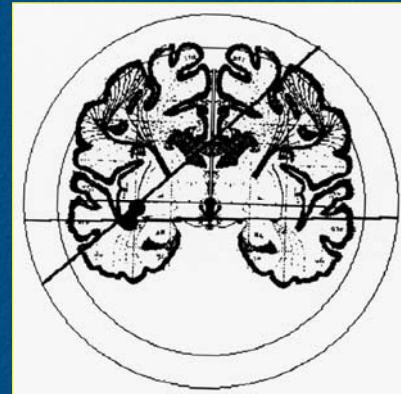


- ### Localization by Conventional EEG
- Spatial distributions of waveforms or features difficult to visualize in time-series displays
 - Interpretation may be confused by reference electrode activity
 - Accuracy limited by smearing of potentials by volume conducting medium (especially skull)
 - Risks to patient are associated with recording from invasive intracranial electrodes and such electrodes only sample brain areas in the immediate vicinity

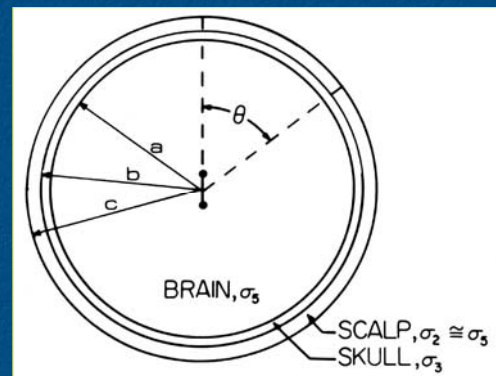
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Localization by Processed EEG

- Topographic displays make distribution of waveforms or features easier to visualize
- Reference-independent methods eliminate active reference problems
- Processing may reduce smearing of potentials by volume conductor, enhancing spatial resolution
- Cortical projection methods estimate cortical potentials without placing electrodes intracranially

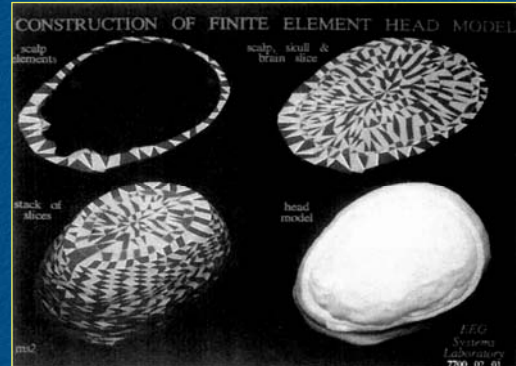


Digitizing electrode positions



Types of Head Models Used for EEG/MEG

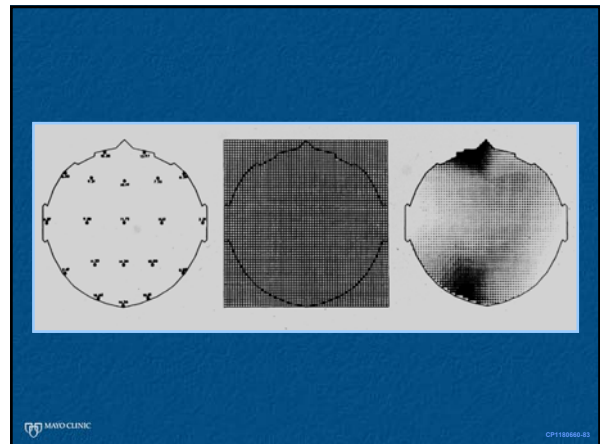
- Homogeneous Sphere Model (CIT, some dipole localization methods)
- Three-concentric sphere model (spatial deconvolution, spherical harmonic expansion, most dipole localization methods)
- Finite element model based on MRI images (deblurring method, some dipole localization methods)



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Model Independent Methods

- No assumptions about generator number, type, or configuration
- Topographic display methods show EEG scalp potential distribution after interpolation (rely on visual interpretation alone)
- Laplacian methods show scalp radial current density which is related to underlying generators
- Cortical projection methods estimate cortical surface potentials



Topographic Displays

Generate a “picture” of the distribution of electrical activity over the head

Since potentials at points other than those occupied by electrodes are **not known**, need to interpolate the available EEG data to intermediate points on the head

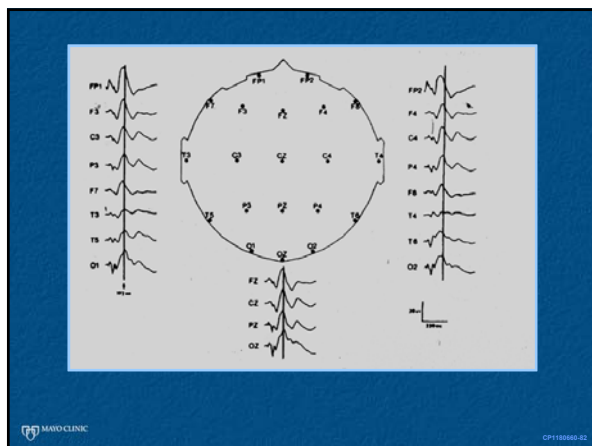
Types of Topographic Display

Classified by domain

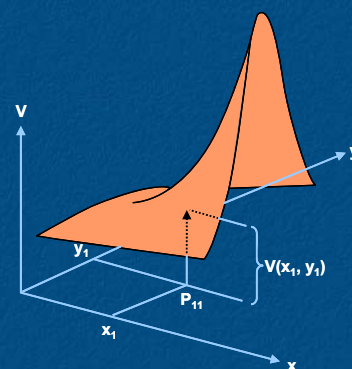
- Time domain (“snap shot” of potential distribution at one instant of time)
- Frequency domain (shows distribution of power in a given range or band of frequencies)

Classified by display method

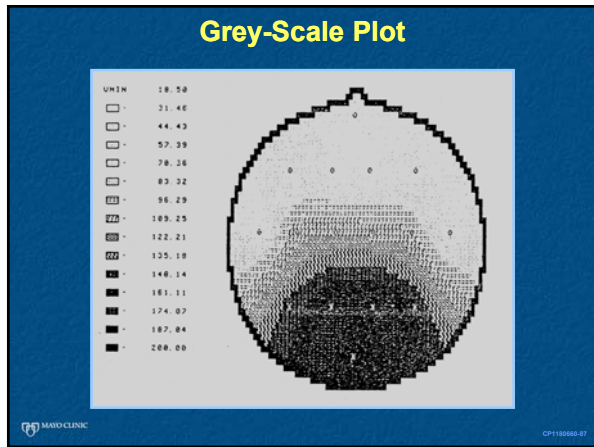
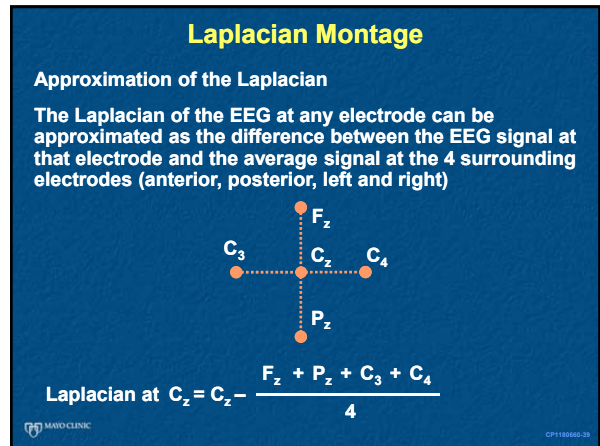
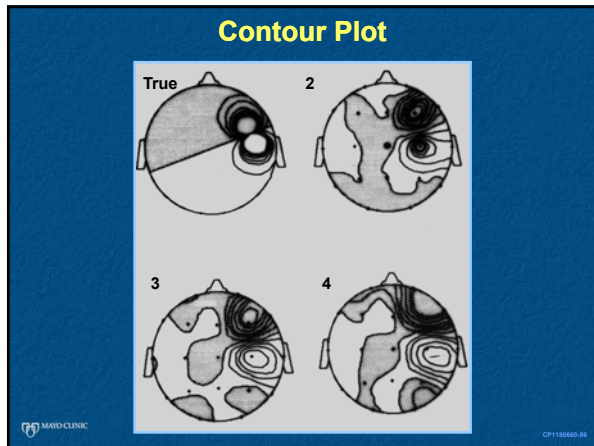
- 3-dimensional plots
- Contour plots
- Grey scale intensity plots
- Color plots



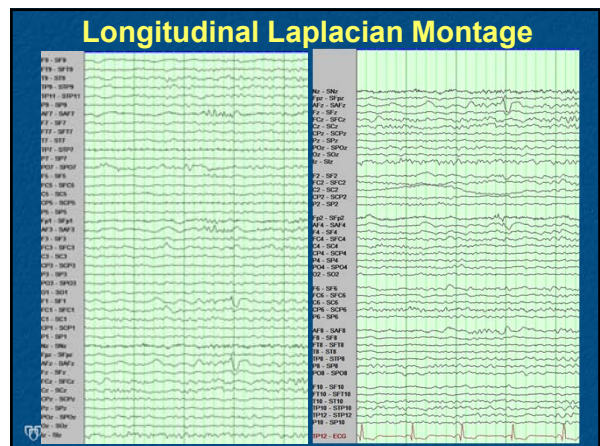
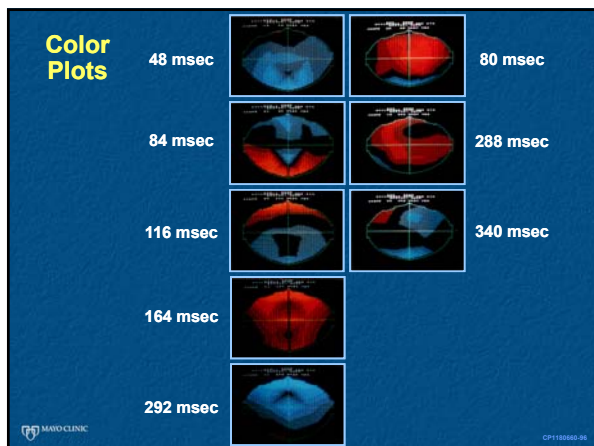
3-Dimensional Plot



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- ### Methods for Calculating Laplacian
- Nearest neighbor inverse distance weighted (Taylor's series)
 - Rectangular surface splines
 - Rectangular 3-D splines projected onto spherical surface
 - Rectangular 3-D splines projected onto elliptical surface
 - Spherical surface splines
 - Spherical harmonic expansion
- MAYO CLINIC CP1100560-08



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Estimation of Cortical Activity

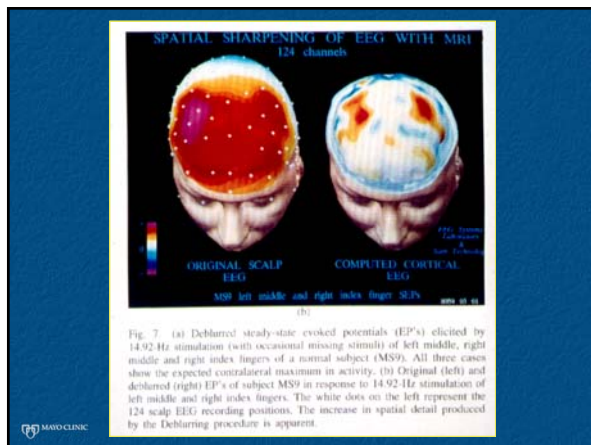
- The “inverse problem” does not have a unique solution; the “inward continuation problem” does
- Can uniquely calculate the potential at all points on a surface inside the head (e.g., cortical surface) from the scalp surface potential, if no intervening generators exist
- Does not require knowledge of location or number of generators, only knowledge of electrical properties of intervening tissues

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Linear Dipole Analysis Methods

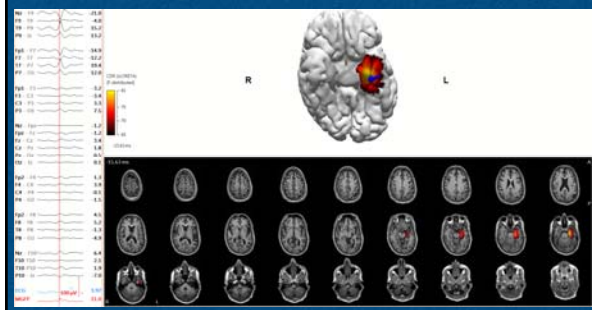
- Assume a large set of dipoles with known locations; find strength of each source to best match actual recorded scalp EEG or MEG by linear regression techniques
- Can fill entire brain volume with dipoles, or can use MRI to determine cortical surface and constrain dipoles to this surface
- Involve forming linear combinations of multiple channels of EEG/MEG data at each instant of time
- May display dipole strengths in time-series or topographic format, or mapped on MRI image slices or rendered cortical surface

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sLORETA Map of Averaged Left Temporal Interictal Spikes



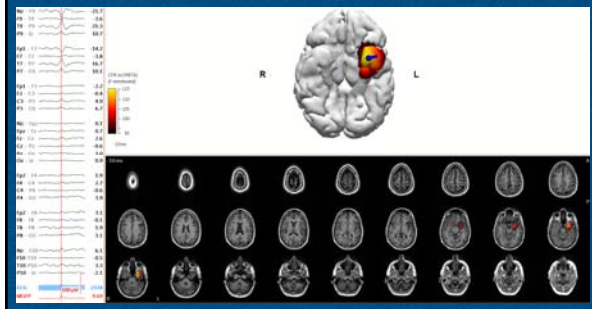
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Model Dependent Methods

- Attempt to solve the Inverse Problem: find the intracranial sources generating a known distribution of scalp potentials or magnetic fields
- The general Inverse Problem has no unique solution
- Most approaches assume that EEG or MEG is generated by intracranial dipoles
- This assumption most useful for small generators, e.g. generators of certain evoked potential peaks, or of epileptic spikes
- Many generators are not small, but involve widespread cortical areas
- Nonlinear methods very sensitive to initial estimates of dipole locations; also computationally demanding

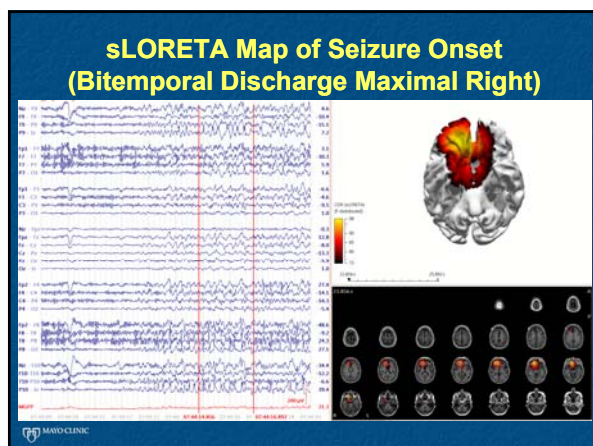
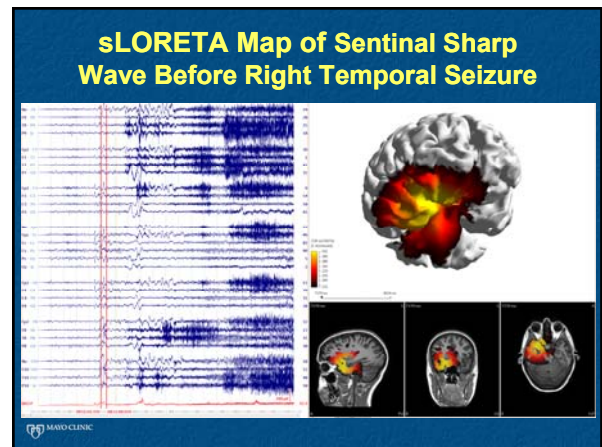
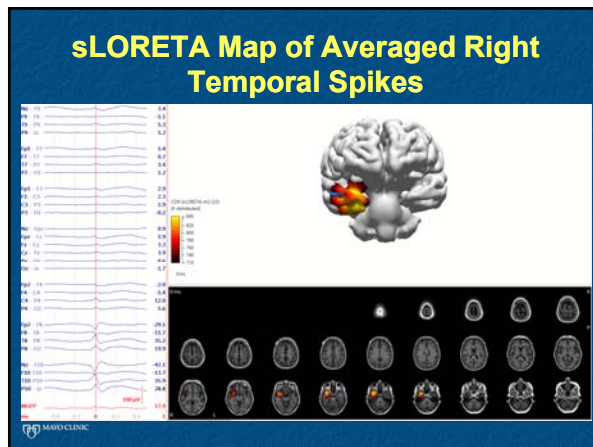
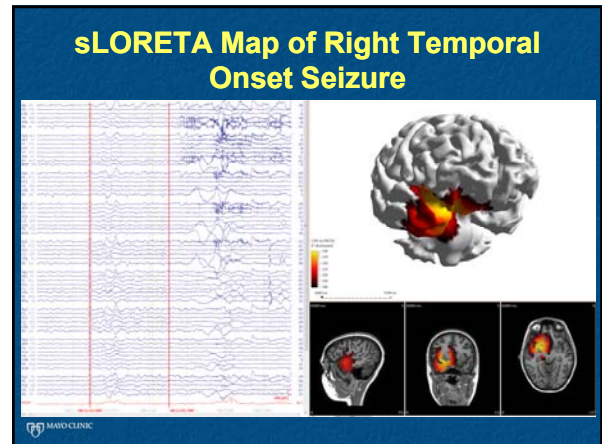
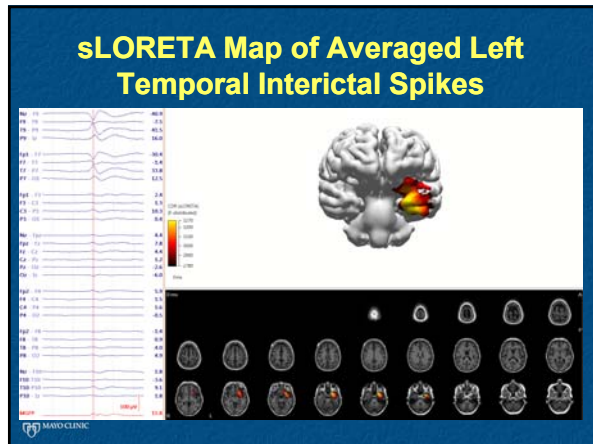
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sLORETA Map of Averaged Left Temporal Interictal Spikes



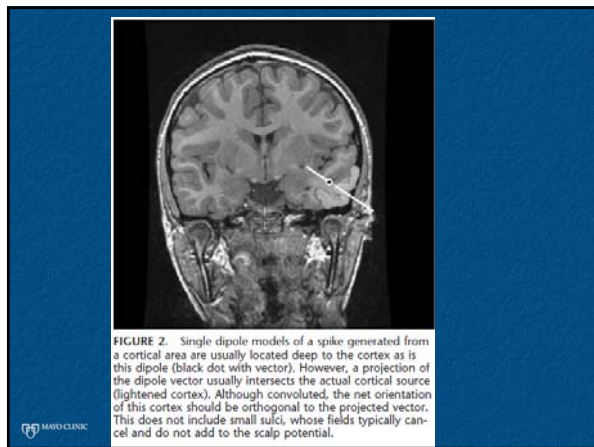
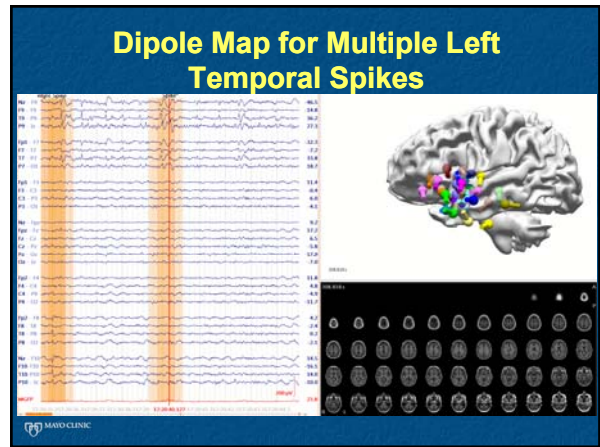
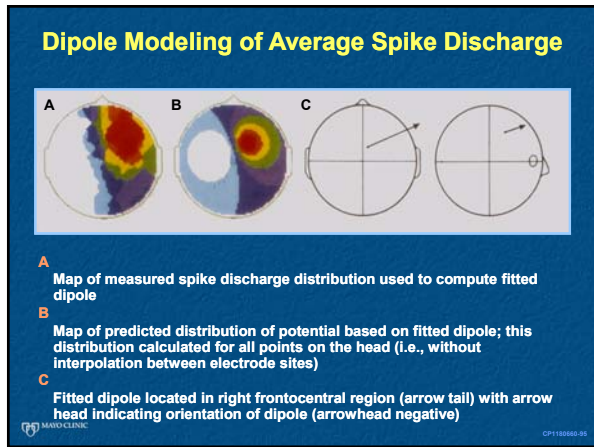
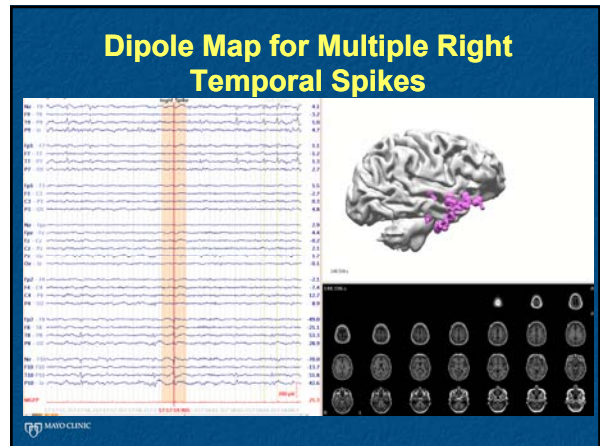
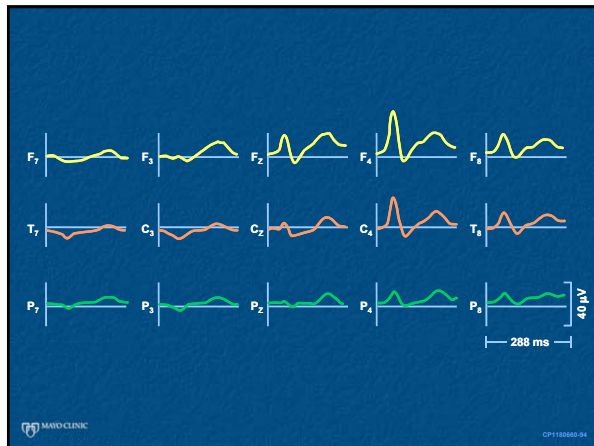
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- ### Nonlinear Dipole Analysis Methods
- One dipole method: tries to find the **location**, **orientation**, and **strength** of 1 dipole which best accounts for the recorded EEG or MEG (requires 6-parameter nonlinear fit to data)
 - Two (or more) dipole method: after finding first best-fit dipole, its contribution to scalp EEG or MEG is subtracted and the residual is fit to a 2nd dipole, etc.
 - Constrained radial/tangential dipole method: assumes two dipoles with fixed orientations but unknown location and strengths (requires 5-parameter nonlinear fit to data)
 - Rotating dipole method: assumes locations of dipoles stay constant during epoch of EEG or MEG and only orientation and strength varies over time (requires 3-parameter nonlinear fit to data)

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