

AI Analysis Report on Brain Functionality

Client name

Sex

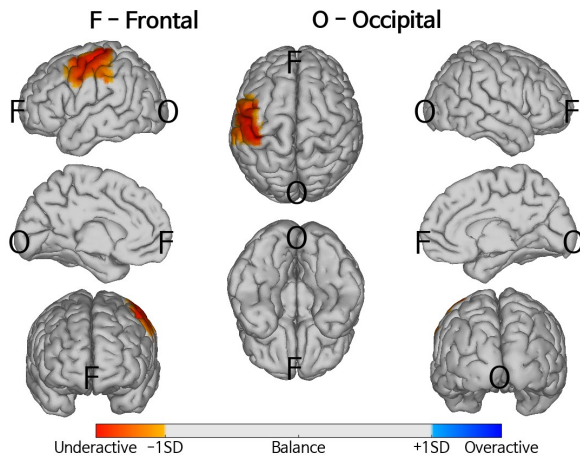
Date of Birth(age)

EEG acquisition date

Female 1965

2024.11.02 (UTC)

1 Brain Activity Analysis - Brain source image



Understanding 3D brainwave analysis

Advances in computer analysis of EEG(brainwave) signals allow precise mapping of functional performance on the cerebral cortex. 3D brainwave analysis highlights the functional, rather than the structural, status of key brain areas, offering special insights into cortical dysfunction or compensatory activity.

This brain map highlights areas where the balance between slow (theta, 4-8Hz) waves and fast (beta, 15-20Hz) waves differs from that expected based on age and sex-matched normal healthy population. Red indicates lower-than-expected levels of function while blue indicates higher- than-expected levels.

2 Brain Activity Analysis - Mapping Brain Area to Functions

Brain Lobe	Functions	Left	Right
Frontal	Voluntary movement, High-level cognitive function	41.5%ile Balanced	37.1%ile Balanced
Temporal	Auditory processing, memory encoding	55.1%ile Balanced	37.0%ile Balanced
Parietal	Sensory processing & integration, Learning	29.9%ile Balanced	37.0%ile Balanced
Occipital	Visual perception	60.8%ile Balanced	58.3%ile Balanced

*Scores are standardized. The bottom 16%ile of normal values are equivalent to 1 standard deviations below the average.

Analyzing Brain Function by Hemisphere

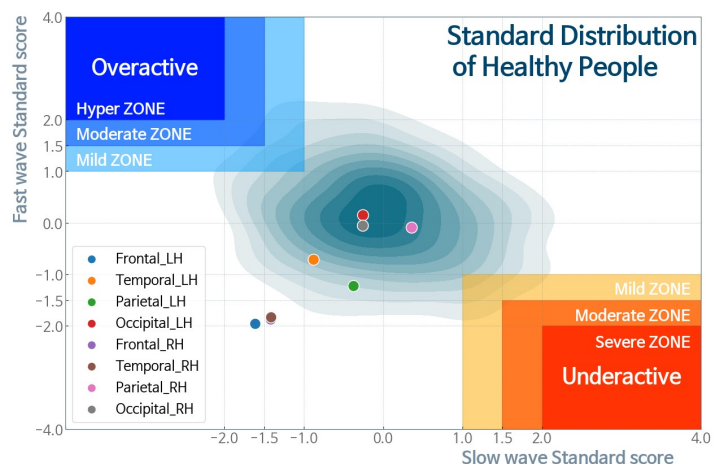
Each lobe function score is calculated by theta to beta ratio and standardized comparing to same age/sex normative reference DB. Taking 50 as the average, scores below 50 indicate relatively lower functioning, while scores above 50 indicate relatively higher functioning. Suppressed score could be caused by drowsiness, dopamine deficiency, concussion, neurodegeneration (e.g., Alzheimer's or Parkinson's disease), infarction or ischemic injury.

3 Findings on brain aging EEG analysis

Standardized Brain Function Score 44.6

The score of 44.6 on this EEG analysis indicates average brainwave patterns when compared to average healthy people in of the same sex in your age range.

Each score for each brain area is plotted in the graph. The shaded contour lines represent peers, matched to your age and sex. The farther each colored dot is from the center of the contours, the more your brain function differs from that of your peers. Dots in the upper left indicate a higher-than-normal function for an area of your brain. Dots in the lower right indicate lower- than-normal function.



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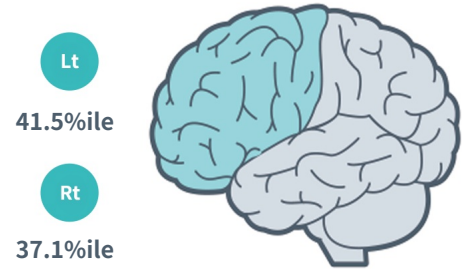
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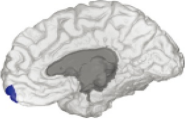

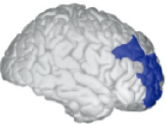
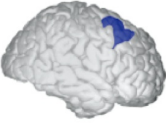
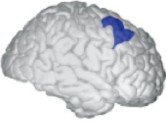
Advanced 3D brainwave analysis on frontal lobe

The frontal lobe is a region responsible for [high-level executive functions](#) such as attention, working memory, cognition, deduction, planning, and problem-solving.

It also controls and manages the amount of information received from other regions of the brain. The primary motor cortex (F10) located in the frontal lobe is responsible for managing voluntary movement. Observed symptoms from functional decline are fragmentation and lack of logic in a person's movement and action, decrease in focus, and difficulty controlling impulses.

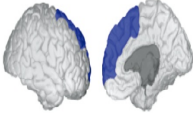

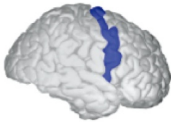
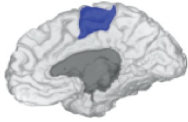
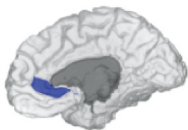
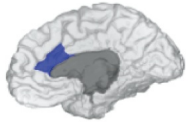
This advanced analysis displays each segment of the frontal lobe and evaluates the healthiness and functionality according to the subject's age-sex matched norm data in relative values. The measurement suggests a relative declination in the functional performance as the numbers get lower.



Frontal lobe ROI		Related functions and symptoms	Lt	Rt
F1 Frontal Pole		Key functions <ul style="list-style-type: none">- Plan and organize for action. Predict outcomes based on current events.- Monitor and evaluate the outcomes.- Maintain or transition attention.		
		Observed symptoms from functional decline <ul style="list-style-type: none">- Difficulties in planning and making decisions.- Tendency to repeat similar mistakes.	20.6%ile	17.5%ile
F2 Pars Opercularis		Key functions <ul style="list-style-type: none">- F3 (Pars Orbitalis): Construct sentences for communication.		
F3 Pars Orbitalis		<ul style="list-style-type: none">- F4 (Pars Triangularis): Generate intentional dialogue.		
F4 Pars Triangularis		<ul style="list-style-type: none">- F2 (Par Opercularis): Transmit motor signals to the motor area o vocalize composed sentences.	32.3%ile	39.1%ile
F5 Rostral Middle Frontal		Observed symptoms from functional decline <ul style="list-style-type: none">- Functional decline in the left side (Broca's area) leads to difficulties in the expression of words.	74.9%ile	24.5%ile
		<ul style="list-style-type: none">- Functional decline in the right side leads to difficulties in the expression of intentions.	71.7%ile	25.9%ile
F6 Caudal Middle Frontal		Key functions <ul style="list-style-type: none">- Responsible for working memory, concentration, execution, and emotional control.- Left hemisphere is responsible for: planning, evaluating, focusing, problem-solving, controlling emotional impulse, storing episodic memory.- Right hemisphere is responsible for: contextual, creative, and metaphorical thoughts, spatial memory.	25.3%ile	27.6%ile
F6 Caudal Middle Frontal		Observed symptoms from functional decline <ul style="list-style-type: none">- Poor concentration and executive function.- Poor working memory.- Left side: Poor regulation and control of emotions/impulses, poor episodic memory.- Right side: Struggling to understand context and lowered metaphorical thoughts.	13.7%ile	39.4%ile
		<ul style="list-style-type: none">- Poor spatial memory.		

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Frontal lobe ROI		Related functions and symptoms		Lt	Rt
F7 Superior Frontal 	Key functions <ul style="list-style-type: none"> - Responsible for higher cognition related to working memory. - Simulation and planning of sophisticated and complex body control. - The left hemisphere is responsible for working memory. - The right hemisphere analyzes and processes spatial information. Observed symptoms from functional decline <ul style="list-style-type: none"> - Difficulties in the execution of complex movements. - Left side: Relatively poor working memory. - Right side: Spatial processing difficulties. 			46.3%ile	45.4%ile
F8 Medial Orbitofrontal 	Key functions <ul style="list-style-type: none"> - Reinforced in situations related to rewards, contributes to positive decision making. - Responsible for self-control, emotional regulation, and social behaviors. Observed symptoms from functional decline <ul style="list-style-type: none"> - Desensitized to rewards. - Difficulties in making decisions related to a positive thinking. 			41.8%ile	34.0%ile
F9 Lateral Orbitofrontal 	Key functions <ul style="list-style-type: none"> - Activated for situations concerning punishment, controls negative decision making. - Responsible for self-control, emotional, and social behavior regulations. Observed symptoms from functional decline <ul style="list-style-type: none"> - Desensitized to punishments. - Difficulties in controlling decisions through negative thinking. 			43.1%ile	33.1%ile
F10 Precentral 	Key functions <ul style="list-style-type: none"> - Primary motor cortex. Voluntary movement by established sequence. Observed symptoms from functional decline <ul style="list-style-type: none"> - Declined voluntary motor control of the contralateral side. 			13.3%ile	30.3%ile
F11 Paracentral 	Key functions <ul style="list-style-type: none"> - Responsible for lower body movements along with the precentral motor cortex. - Voluntary control of defecation and urination. - Planning of voluntary and spontaneous sequential movements. Observed symptoms from functional decline <ul style="list-style-type: none"> - Difficult voluntary control of defecation or urination. - Difficult voluntary control of low extremity. 			56.9%ile	55.3%ile
F12 Rostral Anterior Cingulate 	Key functions <ul style="list-style-type: none"> - A region related to emotions such as empathy, attention, monitoring, and emotional control. - Also connected to the autonomic nervous system, regulating blood pressure and heart rate responses to stressors. Observed symptoms from functional decline <ul style="list-style-type: none"> - Difficulties in controlling/sympathizing with others' emotions. - Difficult in controlling stress response. 			35.1%ile	39.9%ile
F13 Caudal Anterior Cingulate 	Key functions <ul style="list-style-type: none"> - A region related to cognitive function, which includes attention and motor control. - Detects errors from inconsistency and controls automatic reflexes. - Also connected to the autonomic nervous system, regulating blood pressure and heart rate responses to stressors. Observed symptoms from functional decline <ul style="list-style-type: none"> - Decreased attention and cognitive function. - Difficult in controlling stress response. 			63.6%ile	70.0%ile

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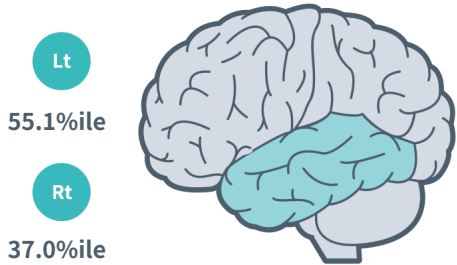
Advanced 3D brainwave analysis on the temporal lobe

The temporal lobe is mainly responsible for [auditory processing, memory encoding](#).

It also contributes to facial recognition, object recognition, and temporal awareness. The limbic system in the temporal lobe controls the expression of emotion and storing memories. Observed symptoms from functional decline include memory loss and a wide range of cognitive impairment diseases.

When the temporal lobe is damaged/declined, a person may show symptoms such as delusion, auditory hallucination. This advanced analysis displays each segment of temporal lobes and evaluates the healthiness and functionality according to the subject's age-sex matched norm data in relative values.

The measurement suggests a relative declination in the functional performance as the numbers get lower.



Temporal lobe ROI		Related functions and symptoms	Lt	Rt
T1 Temporal Pole		Key functions <ul style="list-style-type: none">- A region for perceiving others' feelings or intentions. It also relates to moral behavior.- The left side is responsible to process the meaning of words.- The right side is responsible for response to auditory stimuli.		
		Observed symptoms from functional decline <ul style="list-style-type: none">- Poor social relationships.- The Left side: Difficult to process meaning of the words.- The right side: Difficult to respond to auditory stimuli.	40.1%ile	32.0%ile
T2 Superior Temporal		Key functions <ul style="list-style-type: none">- Responsible for auditory perception and signal processing, which enables the understanding of speech as language.		
		Observed symptoms from functional decline <ul style="list-style-type: none">- May result in tinnitus.- Deterioration of the left side (Wernicke's area) results in poor understanding of language and difficulties in speaking according to the context.- Deterioration of the right side results in difficulties in understanding the meaning or context or words.	54.7%ile	24.6%ile
T3 Middle Temporal		Key functions <ul style="list-style-type: none">- Perceives visual and auditory information and processes language.- The left side is responsible for semantic processing.- The right side is responsible for integrating the tunes and rhythms of a language.		
		Observed symptoms from functional decline <ul style="list-style-type: none">- Fails to integrate received visual and auditory information, causing difficulties in verbal comprehension.- Deterioration of the left side: difficulties in processing the meaning of the speech.- Deterioration of the right side: difficulties in the integration of the tunes and rhythms of speech.	58.7%ile	30.9%ile
T4 Inferior Temporal		Key functions <ul style="list-style-type: none">- Involved in high-level processing of visual information such as objects, places, faces, colors, letters, and characters.- The left hemisphere is responsible for semantic processing.- The right hemisphere is responsible for instantaneous information storage and retrieval from working memory.		
		Observed symptoms from functional decline <ul style="list-style-type: none">- Deterioration of the left hemisphere: Difficulties in semantic processing. Difficulties in comprehension of objects.- Deterioration of the right hemisphere: Difficulties in melody integration. Difficulties locating objects.	59.0%ile	32.9%ile

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Temporal lobe ROI	Related functions and symptoms	Lt	Rt
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T5 Transverse Temporal



Key functions

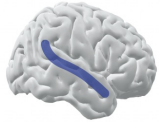
- Primary auditory cortex. the auditory stimulus entered through the ear is transmitted to the lateral temporal lobe for analysis of loudness.

Observed symptoms from functional decline

- Unable to hear clearly, resulting in communication difficulties.
- Possible hearing loss for severe cases.

48.1%ile 28.3%ile

T6 Banks of Superior Temporal Sulcus



Key functions

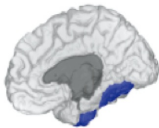
- Responsible for general lingual function.
- A region highly involved with theory of mind, gestures, face, and voice. Recognizes other people's feelings or intentions.

Observed symptoms from functional decline

- Unable to recognize faces or voices.
- Lingual dysfunction.
- Autism in severe cases.

54.9%ile 42.8%ile

T7 Fusiform



Key functions

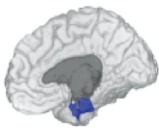
- Responsible for facial recognition.
- Involved in the analysis of others' emotions based on their facial gestures.
- The left side identifies individual faces.
- The right side identifies individual emotions behind the faces.

Observed symptoms from functional decline

- Deterioration of the left side: poor recognition of faces.
- Deterioration of the right side: poor comprehension of facial expression of emotions.

60.8%ile 48.0%ile

T8 Entorhinal



Key functions

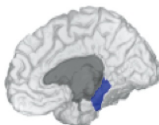
- It is essential to combine spatial information (where) in the hippocampus and temporal information (when) in the entorhinal cortex for episodic memory.
- The entorhinal cortex is crucial for memory consolidation and retrieval and acts as a hub for various cognitive networks.
- The left side is responsible for verbal memory.
- The right side is responsible for visual memory.

Observed symptoms from functional decline

- Poor episodic memory.
- Deterioration of the left side: Difficult to recall words and sentences.
- Deterioration of the right side: Difficult to recall visual information such as location, shape, and pattern.

47.1%ile 40.3%ile

T9 Parahippocampal



Key functions

- It is essential to register and recall spatial information (where) in the hippocampus for episodic memory.
- The left side is responsible for non-spatial information such as objects and people.
- The right side is responsible for spatial information such as the venue, location, relationship between locations and direction.

Observed symptoms from functional decline

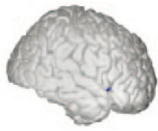
- Poor memory recall.
- Deterioration of the left side: Difficult to recall non-spatial information such as objects and people.
- Deterioration of the right side: Difficult to recall spatial information such as the venue, location, relationship between locations, and direction.

69.3%ile 57.0%ile

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T10 Insula



Key functions

- Involved in the control of internal sensations, hand-eye coordination, swallowing, and gastrointestinal motility.
- A region that participates in various homeostatic functions related to survival, such as taste, interoception, and autonomic control.
- Involved in recognition and understanding of internal and external situations, which enables self-awareness and social interaction.

57.6%ile 33.1%ile

Observed symptoms from functional decline

- Poor control of emotions.
- Possible autonomic dysfunction.
- A very slight touch may feel like a great pain.
- Painful sensation when touching something cold or hot.

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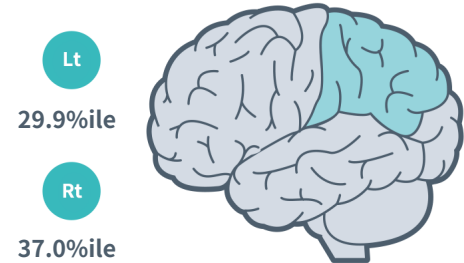
Advanced 3D brainwave analysis on the parietal lobe

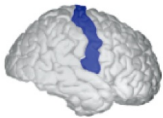
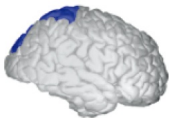
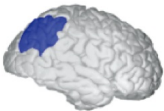

The parietal lobe is mainly responsible for integrating general information received in the brain.

The parietal lobe is also able to perform a self-assessment about the current body condition. Decline in the function can lead to apraxia, aphasia, agnosia, or amusia. The person may also display a lack of emotion and be unable to sympathize with others.

This advanced analysis displays each segment of parietal lobes and evaluates the healthiness and functionality according to the subject's age-sex matched norm data in relative values.

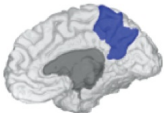
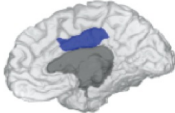
The measurement suggests a relative decline in the functional performance as the numbers get lower.



Parietal lobe ROI	Related functions and symptoms	Lt	Rt
P1 Postcentral 	Key functions <ul style="list-style-type: none">- Processes somatosensory signals coming from all areas of the body. Observed symptoms from functional decline <ul style="list-style-type: none">- Numb to pain.- Poor recognition of three-dimensional shapes.- Numb limbs.	14.1%ile	27.2%ile
P2 Superior Parietal 	Key functions <ul style="list-style-type: none">- Plays an important role in the integration of sensory input and motor movements, through recognition and maintenance of the body's current movement.- The left side is responsible for writing letters within the given space.- The right side is responsible for spatiotemporal processing. Observed symptoms from functional decline <ul style="list-style-type: none">- Difficulties in sensory perception and translating it to movements.- The left side: Difficult to write letters in a line.- The right side: Poor awareness of spatial information and directional movement.	26.4%ile	30.2%ile
P3 Inferior Parietal 	Key functions <ul style="list-style-type: none">- Receives sensory information and processes actions, through the use of various cognitive functions including attention, language, and behavior processing.- The left side is responsible for language-related functions such as generating and reading sentences or numeric comprehension.- The right side is responsible for spatiotemporal processing through visual information. Observed symptoms from functional decline <ul style="list-style-type: none">- The left side: Difficult to process numbers and read text.- The right side: Difficult to perform assembling tasks such as drawing or assembling toy blocks (constructional apraxia).	19.7%ile	25.0%ile
P4 Supramarginal 	Key functions <ul style="list-style-type: none">- Interprets touch sensation, perceives body position in space.- The left side is responsible for word selection and language processing.- The right side is responsible for empathizing with others' emotions. Observed symptoms from functional decline <ul style="list-style-type: none">- Poor spatial perception.- The left side: Difficulty selecting appropriate words.- The right side: Difficulty understanding others' emotions.	11.5%ile	23.7%ile

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Parietal lobe ROI		Related functions and symptoms		Lt	Rt
P5	Precuneus		Key functions <ul style="list-style-type: none">- Related to self-image and self-esteem.- The left hemisphere is responsible for episodic memory.- The right hemisphere is responsible for spatiotemporal processing. Observed symptoms from functional decline <ul style="list-style-type: none">- Difficulties in self-insight.- The left side: Difficulty integrating memory and environmental information.- The right side: Difficulties in spatiotemporal processing.	36.2%ile	37.4%ile
P6	Posterior Cingulate		Key functions <ul style="list-style-type: none">- Metacognition (active when relaxed and immersed in your inner thoughts and feelings).- Also Involved in learning, memory, reward, and task participation. Performance of working memory decreases once the posterior cingulate cortex is activated.- The left side is responsible for semantic processing.- The right side is responsible for episodic processing. Observed symptoms from functional decline <ul style="list-style-type: none">- The left side: Poor memory.- The right side: Poor spatial perception.	70.9%ile	78.3%ile

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Advanced 3D brainwave analysis on the occipital lobe

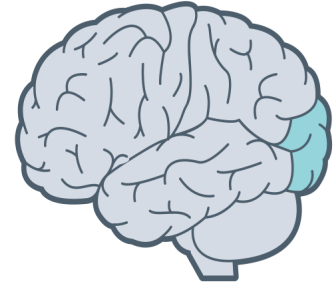
The occipital lobe is mainly responsible for [visual perception](#).

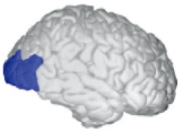
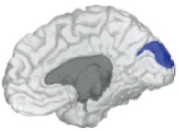
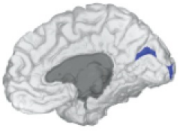
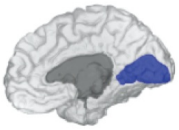
Observed symptoms from functional decline include a person not being able to receive and process information using their eyes although there are no clinical issues with their vision. A seizure related to the occipital lobe may cause a visual hallucination.

This advanced analysis displays each segment of occipital lobes and evaluates the healthiness and functionality according to the subject's age-sex matched norm data in relative values. The measurement suggests a relative declination in the functional performance as the numbers get lower.

Lt
60.8%ile

Rt
58.3%ile



Occipital lobe ROI	Related functions and symptoms	Lt	Rt
01 Lateral Occipital 	Key functions <ul style="list-style-type: none">- Recognition of an object and imagining its shape. Observed symptoms from functional decline <ul style="list-style-type: none">- Poor visual perception.	60.5%ile	56.9%ile
02 Cuneus 	Key functions <ul style="list-style-type: none">- Processes light intensity of an object along with other visuospatial analysis.- Responsible for visuospatial working memory. Observed symptoms from functional decline <ul style="list-style-type: none">- Poor visual perception.- Possible hallucinations in severe cases.	41.2%ile	42.6%ile
03 Pericalcarine 	Key functions <ul style="list-style-type: none">- Responsible for primary processing of visual information.- Able to recognize whether an object is moving or stationary, as well as its shape, color, and texture. Observed symptoms from functional decline <ul style="list-style-type: none">- Poor visual perception.- Poor recognition of the shape and movement of objects.	67.9%ile	62.2%ile
04 Lingual 	Key functions <ul style="list-style-type: none">- Recognize the letters and texts we use.- Responsible for matching visual information with the previously memorized information. It is crucial for the identification and recognition of the word.- Contributes to visualization of a person's dream. Observed symptoms from functional decline <ul style="list-style-type: none">- Difficulties reading text i.e., dyslexia.- Visual snow syndrome.	73.3%ile	71.1%ile

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