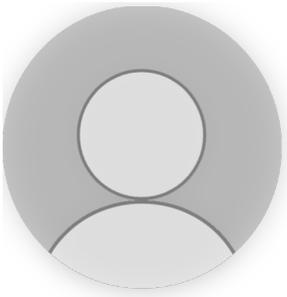


มหาวิทยาลัยมหิดล
คณะแพทยศาสตร์
ศิริราชพยาบาล

Basic EEG for neurology residents “Normal Awake EEG”

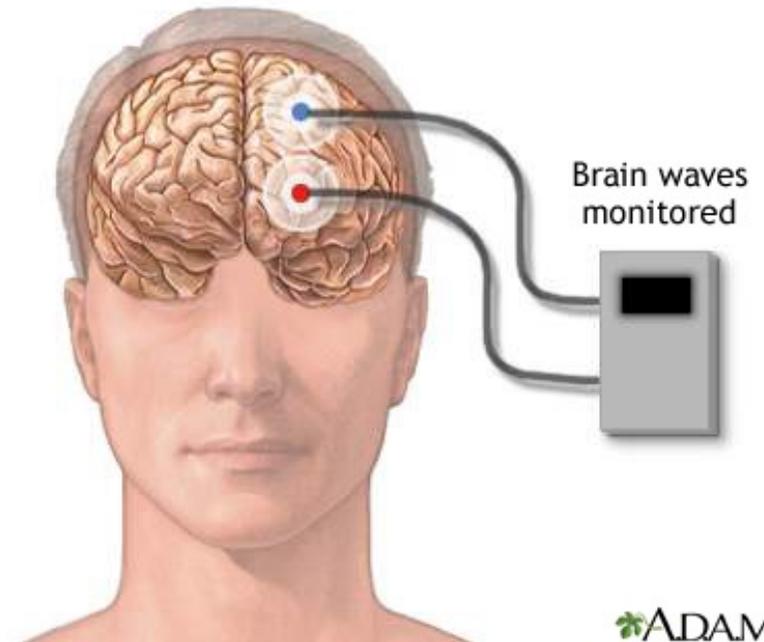
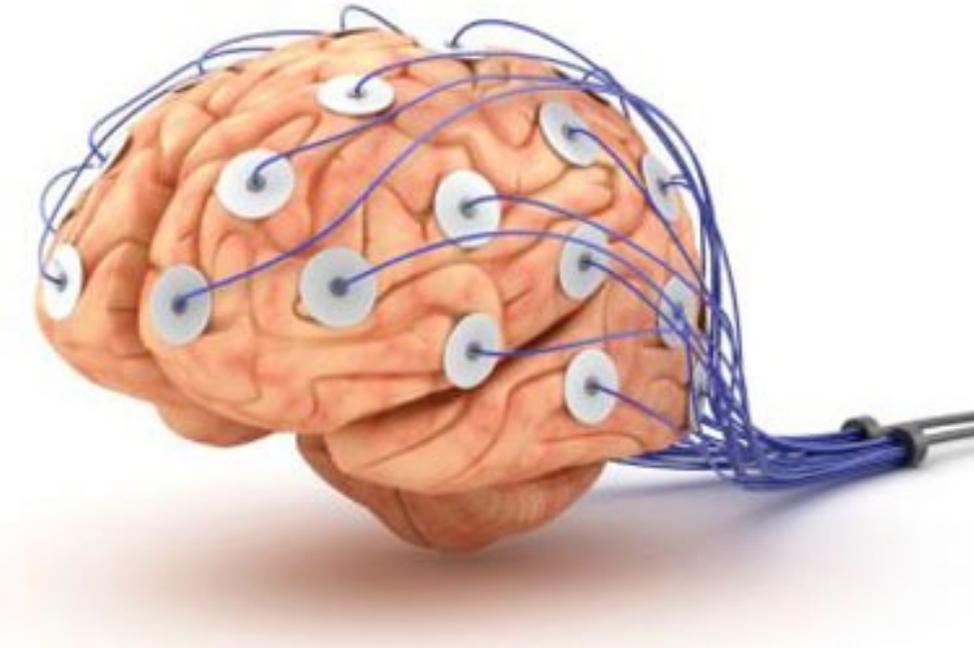


Mahidol University
Faculty of Medicine
Siriraj Hospital



What is EEG?

- Electrical activity of the brain that is recorded from electrodes placed on the scalp

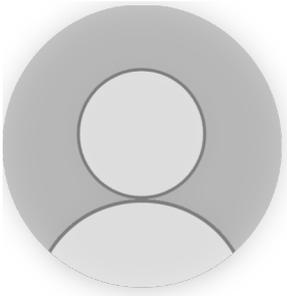


ADAM.

Est. 1888



Mahidol University
Faculty of Medicine
Siriraj Hospital



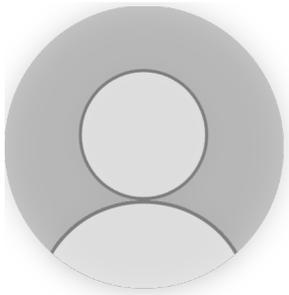
Origin of EEG

- Summation of inhibitory postsynaptic potentials (IPSPs) and excitatory postsynaptic potentials (EPSPs) from pyramidal neurons
- More than 100,000 neurons
- Not action potential

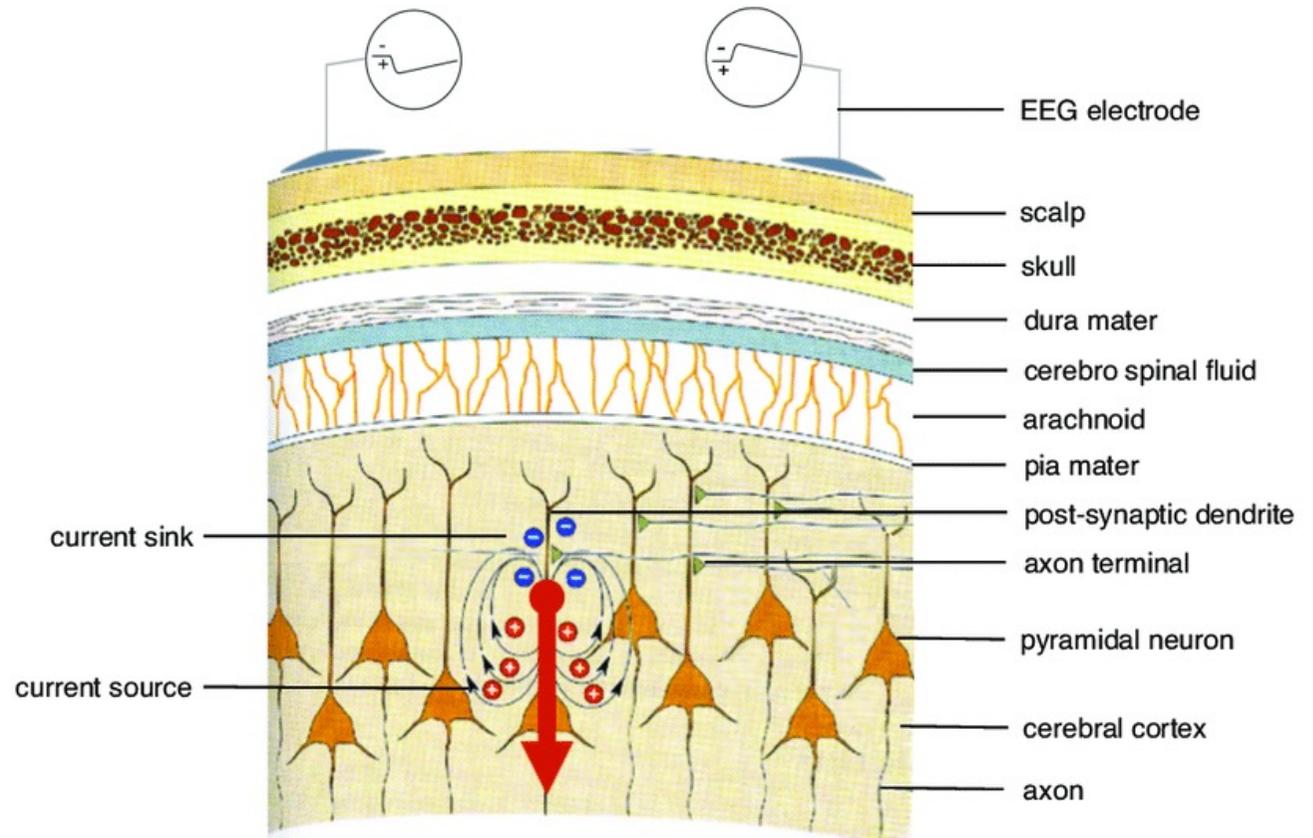
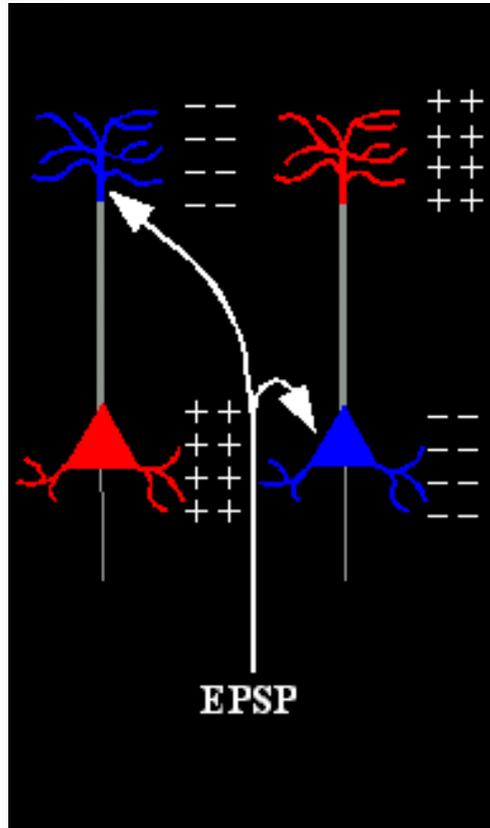


Mahidol University
Faculty of Medicine
Siriraj Hospital





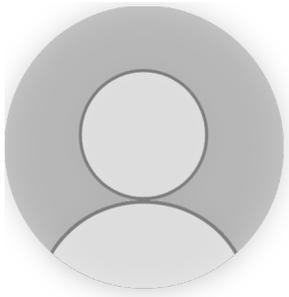
Recording EEG



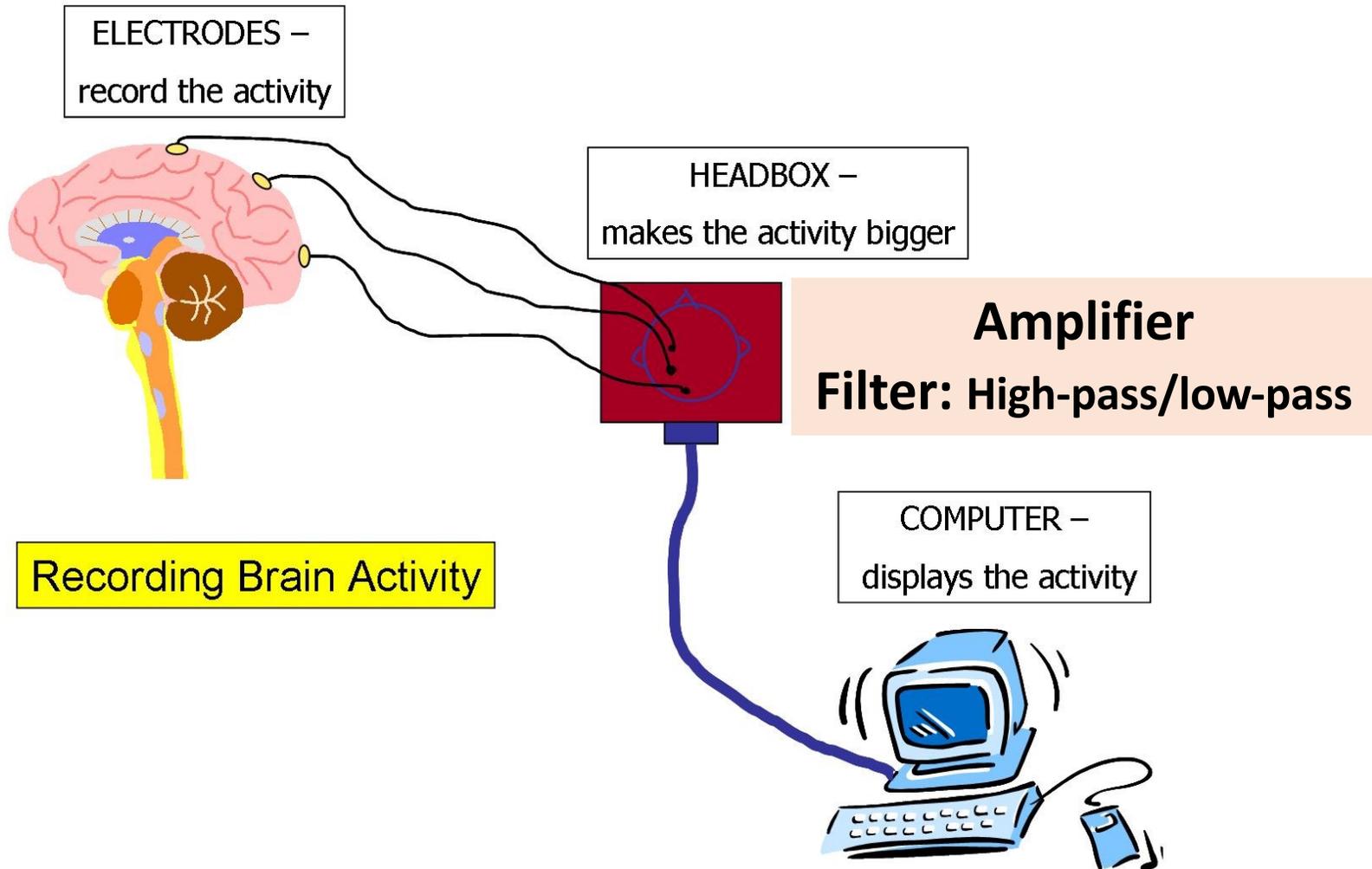
Est. 1888



Mahidol University
Faculty of Medicine
Siriraj Hospital



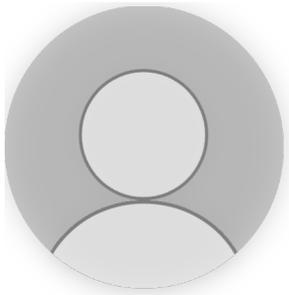
Recording EEG



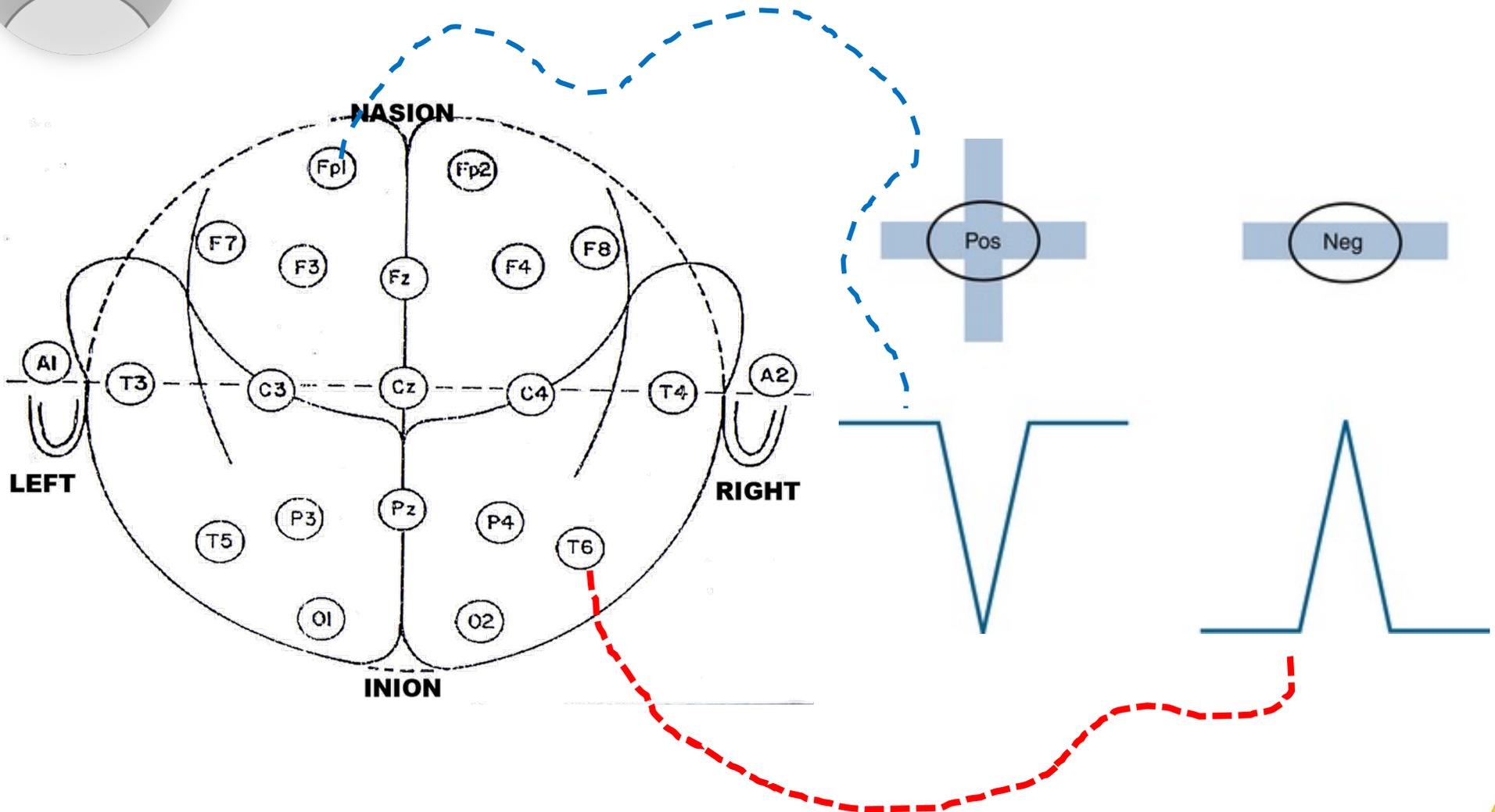
Est. 1888



Mahidol University
Faculty of Medicine
Siriraj Hospital



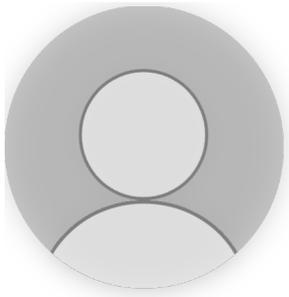
Recording EEG



Est. 1888

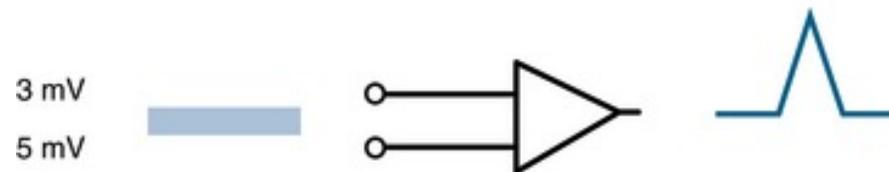


Mahidol University
Faculty of Medicine
Siriraj Hospital

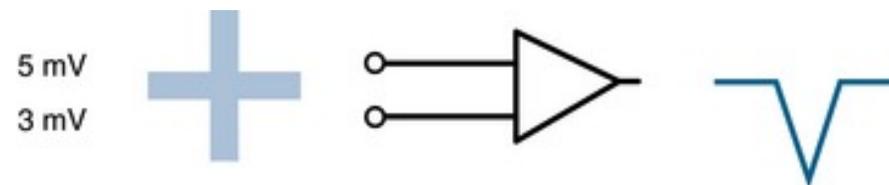


Output from amplifier

- Difference between input 1 and input 2
- If input 1 is more negative than input 2 → the pen will deflect up



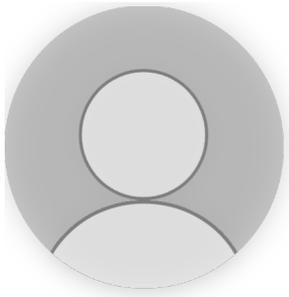
- If input 1 is more positive than input 2 → the pen will deflect down



Est. 1888

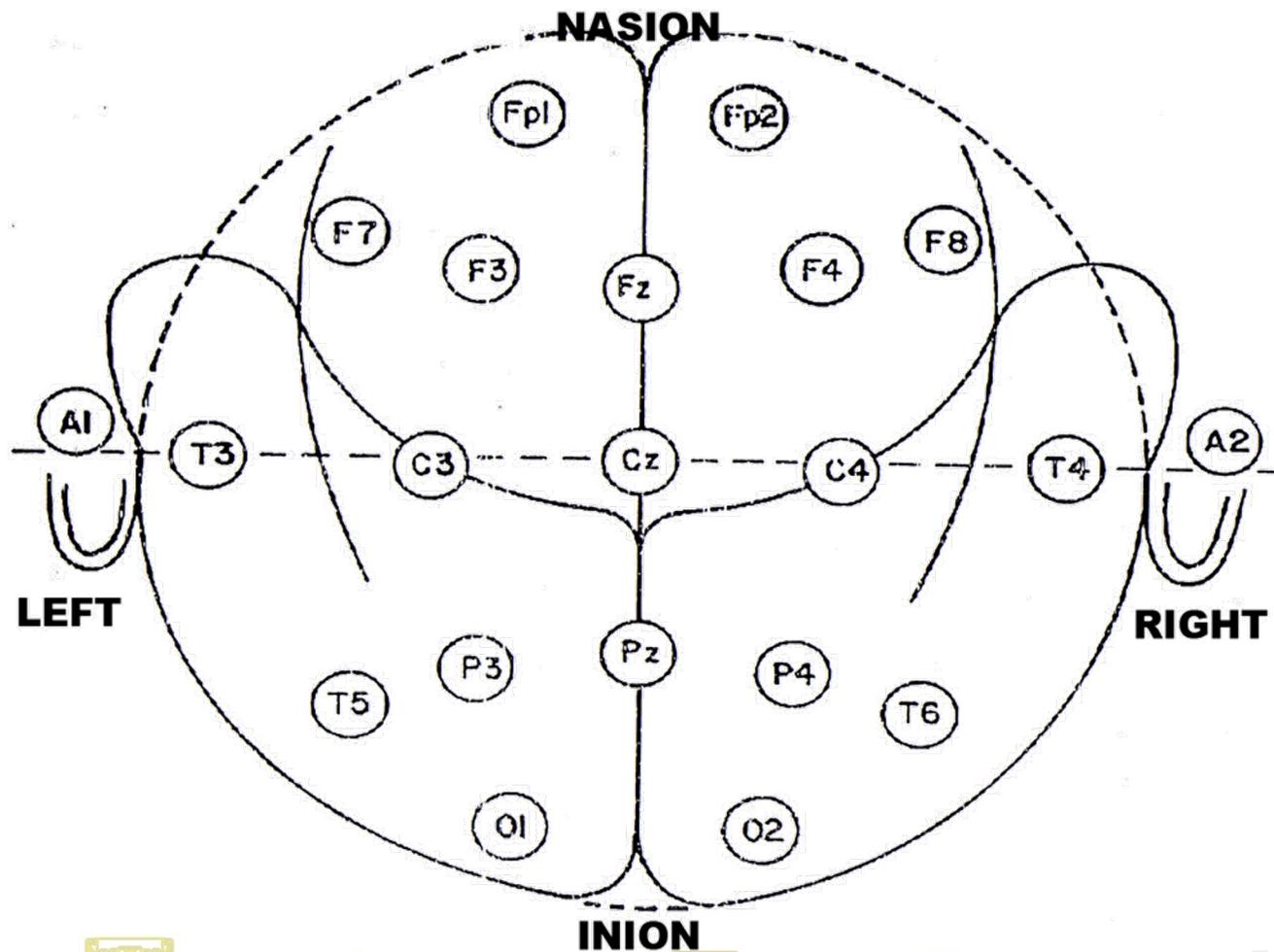


Mahidol University
Faculty of Medicine
Siriraj Hospital



Electrode placement

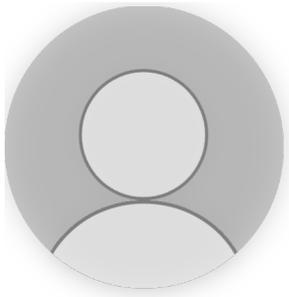
International 10-20 system



Est. 1888



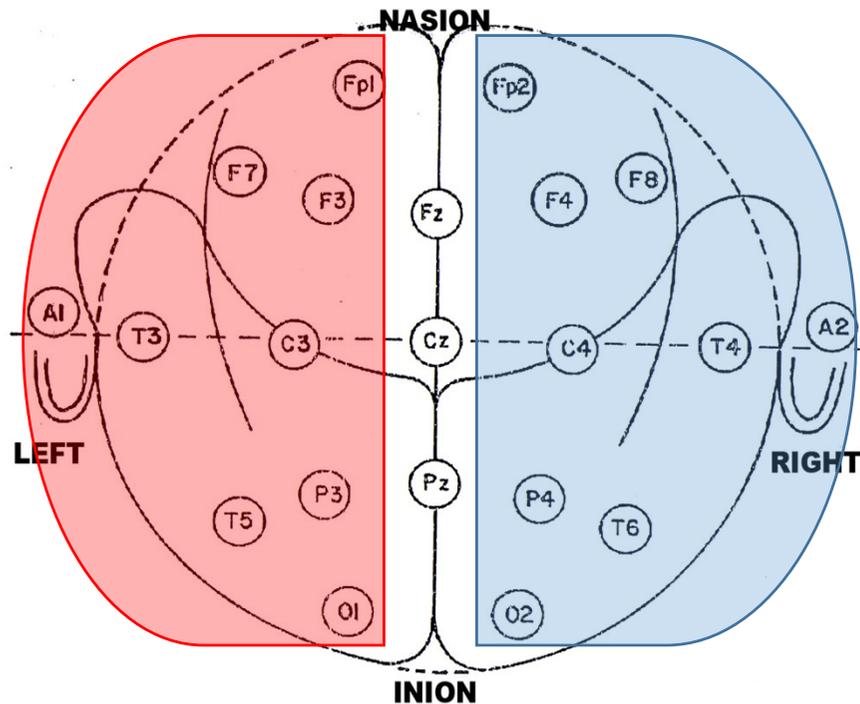
Mahidol University
Faculty of Medicine
Siriraj Hospital



Electrode placement

International 10-20 system

- Minimum 21 electrodes



- **Odd-numbered: LEFT side**

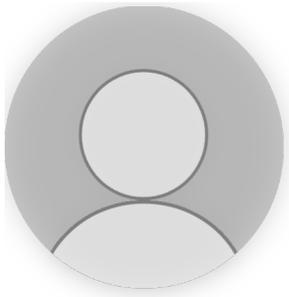
- **Even-numbered: RIGHT side**

- Specific letters designate the anatomical area; for example “F” means frontal

Est. 1888



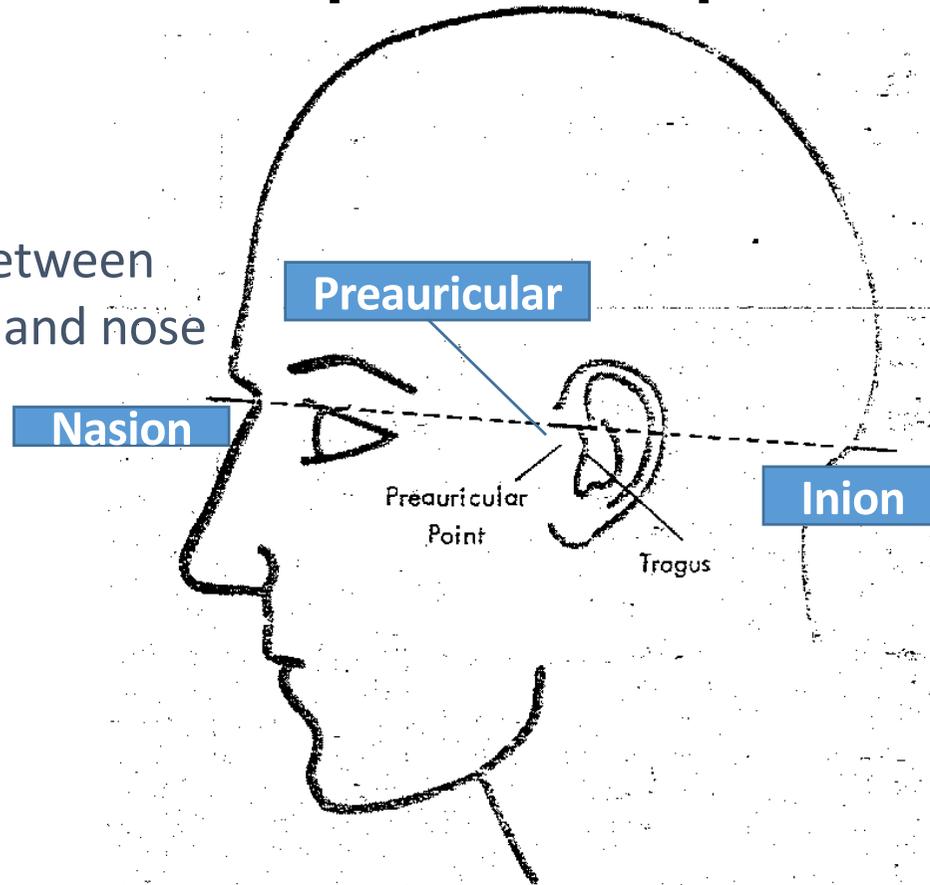
Mahidol University
Faculty of Medicine
Siriraj Hospital



International 10 -20 system

4 landmarks are used
nasion & inion
& 2 **pre auricular points**

point between
forehead and nose



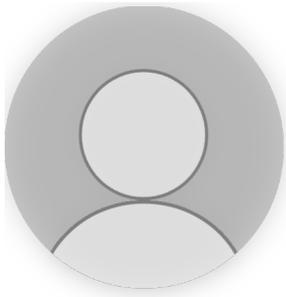
Bump
lowest point of skull
at back of head

LEFT LATERAL VIEW OF SKULL LANDMARKS.

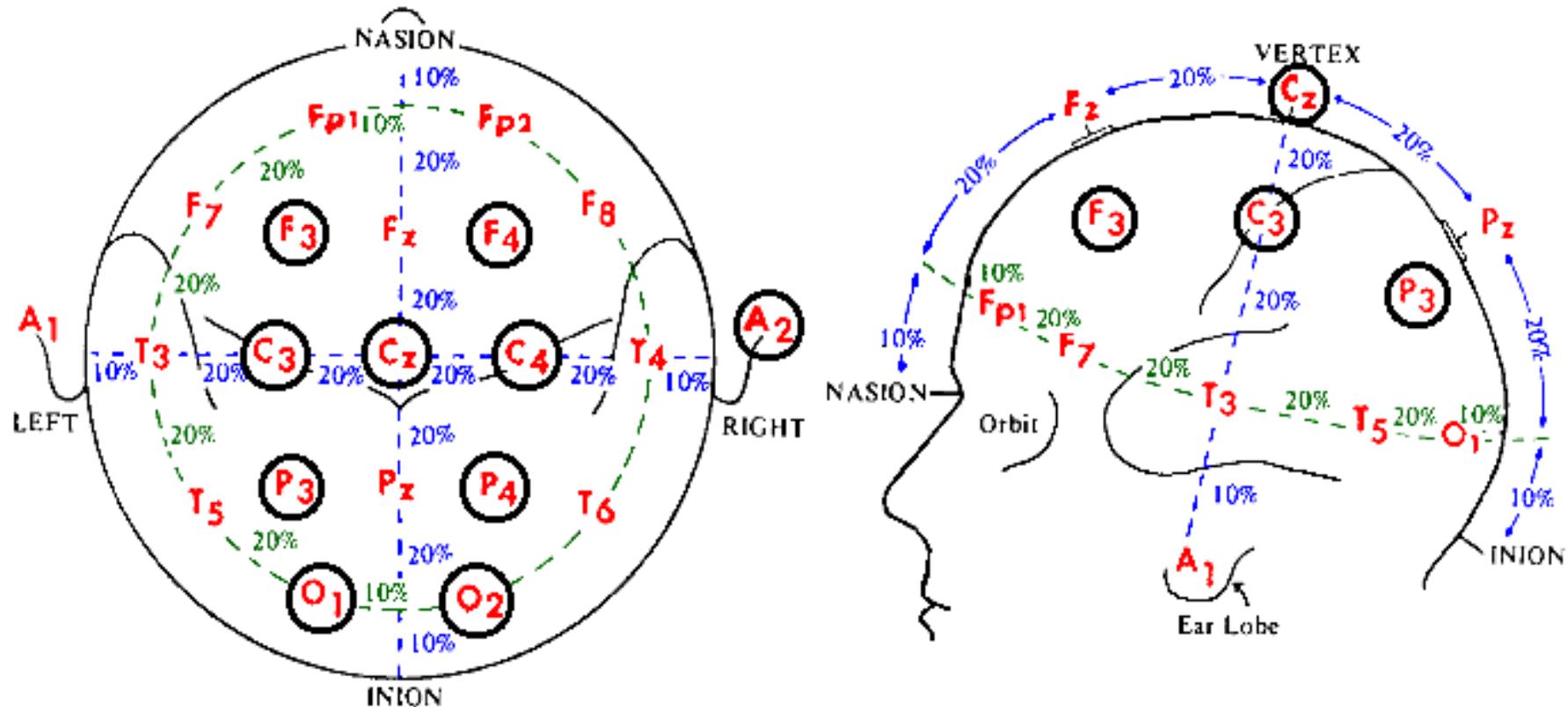
Est. 1888



Mahidol University
Faculty of Medicine
Siriraj Hospital



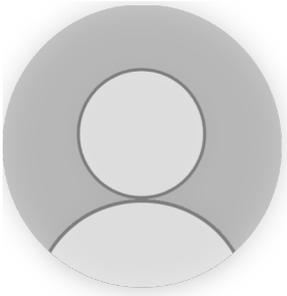
International 10-20 system



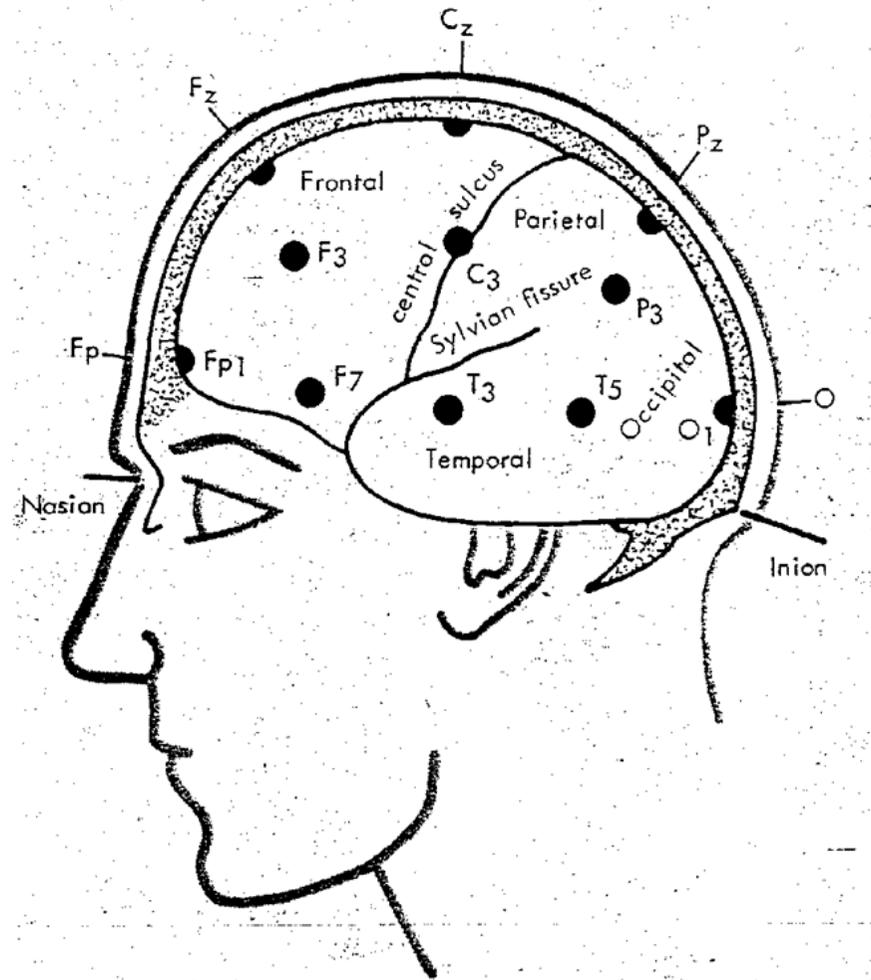
Est. 1888



Mahidol University
Faculty of Medicine
Siriraj Hospital



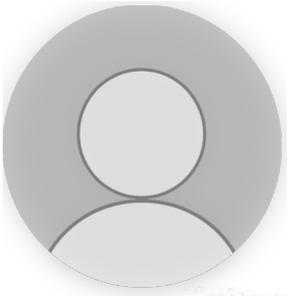
Anatomical regions represented by EEG letters



Est. 1888

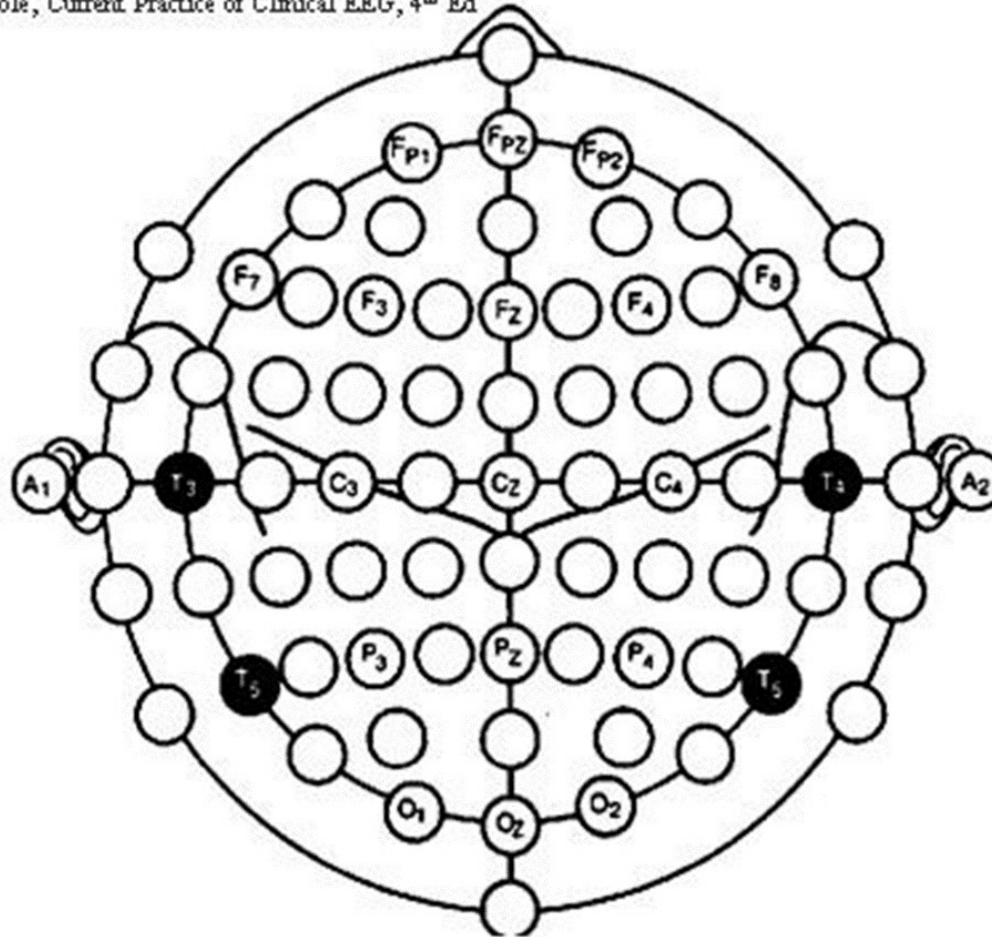


Mahidol University
Faculty of Medicine
Siriraj Hospital



Electrode placement: 10-20 system

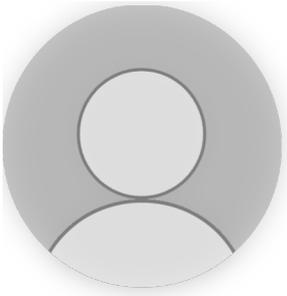
From Pedley and Ebersole, Current Practice of Clinical EEG, 4th Ed



Est. 1888



Mahidol University
Faculty of Medicine
Siriraj Hospital



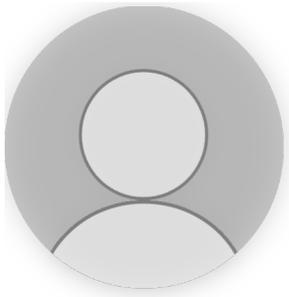
Montage

- Referential montages
- Bipolar (Differential) montages



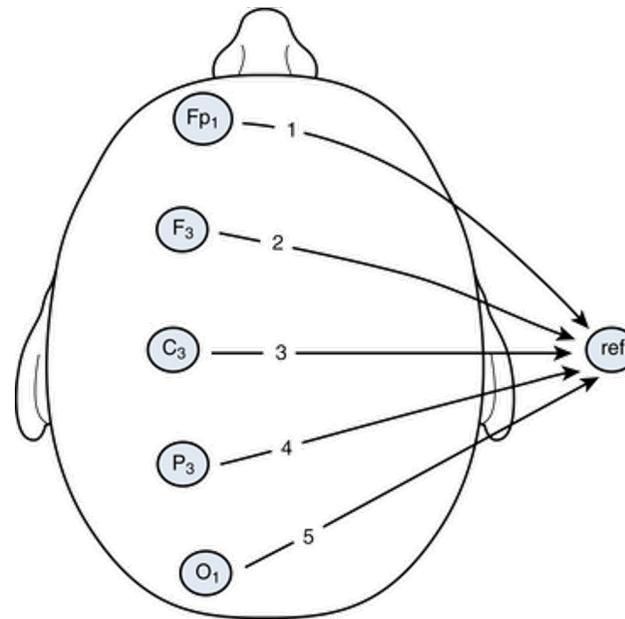
Mahidol University
Faculty of Medicine
Siriraj Hospital





Referential montages

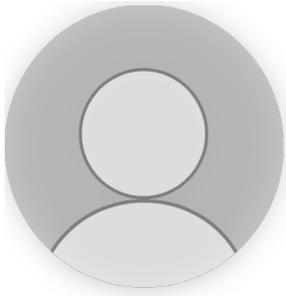
- Common reference electrode connected to input2
- Reference electrode need to be carefully chosen



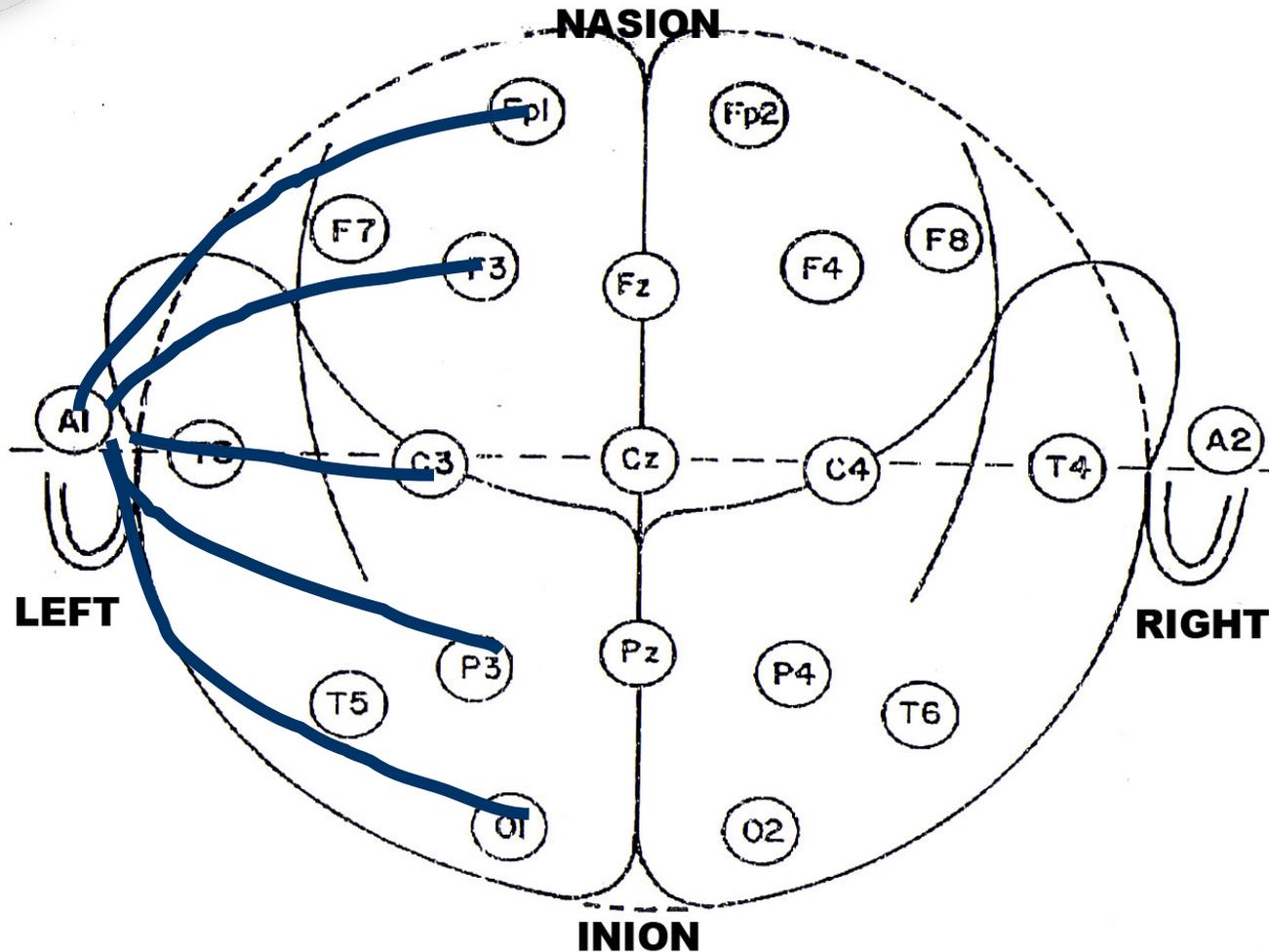
Est. 1888



Mahidol University
Faculty of Medicine
Siriraj Hospital



Referential montages

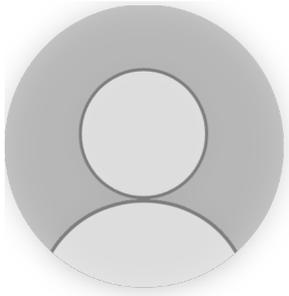


Fp1	-A1
F3	-A1
C3	-A1
P3	-A1
O1	-A1

Est. 1888



Mahidol University
Faculty of Medicine
Siriraj Hospital

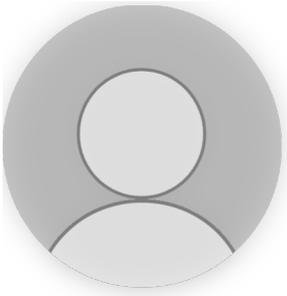


Bipolar montages

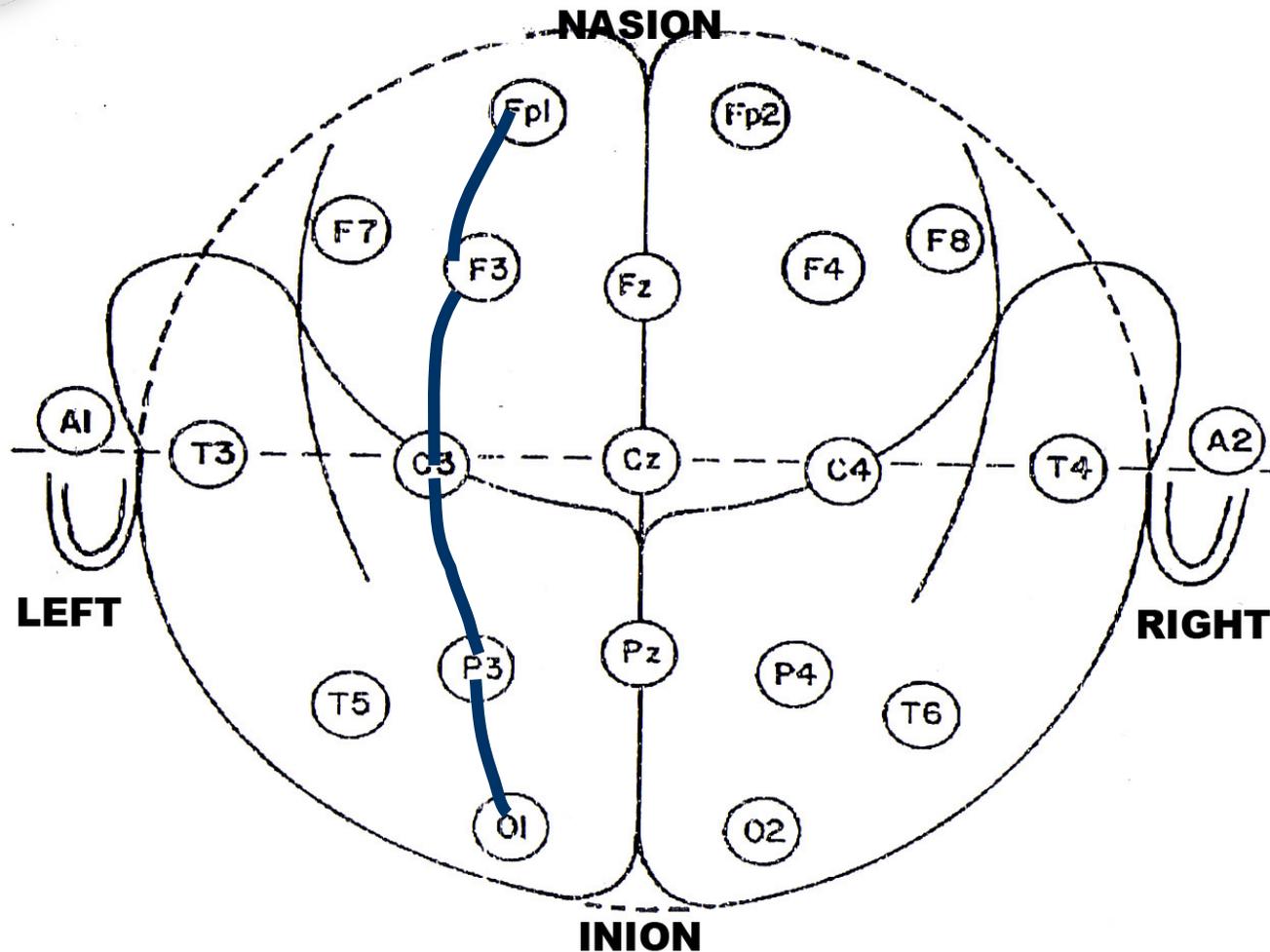
- Input 1 and 2 both connect to active electrodes
- Links serial pairs of electrodes in straight longitudinal or coronal lines



Mahidol University
Faculty of Medicine
Siriraj Hospital



Bipolar montages

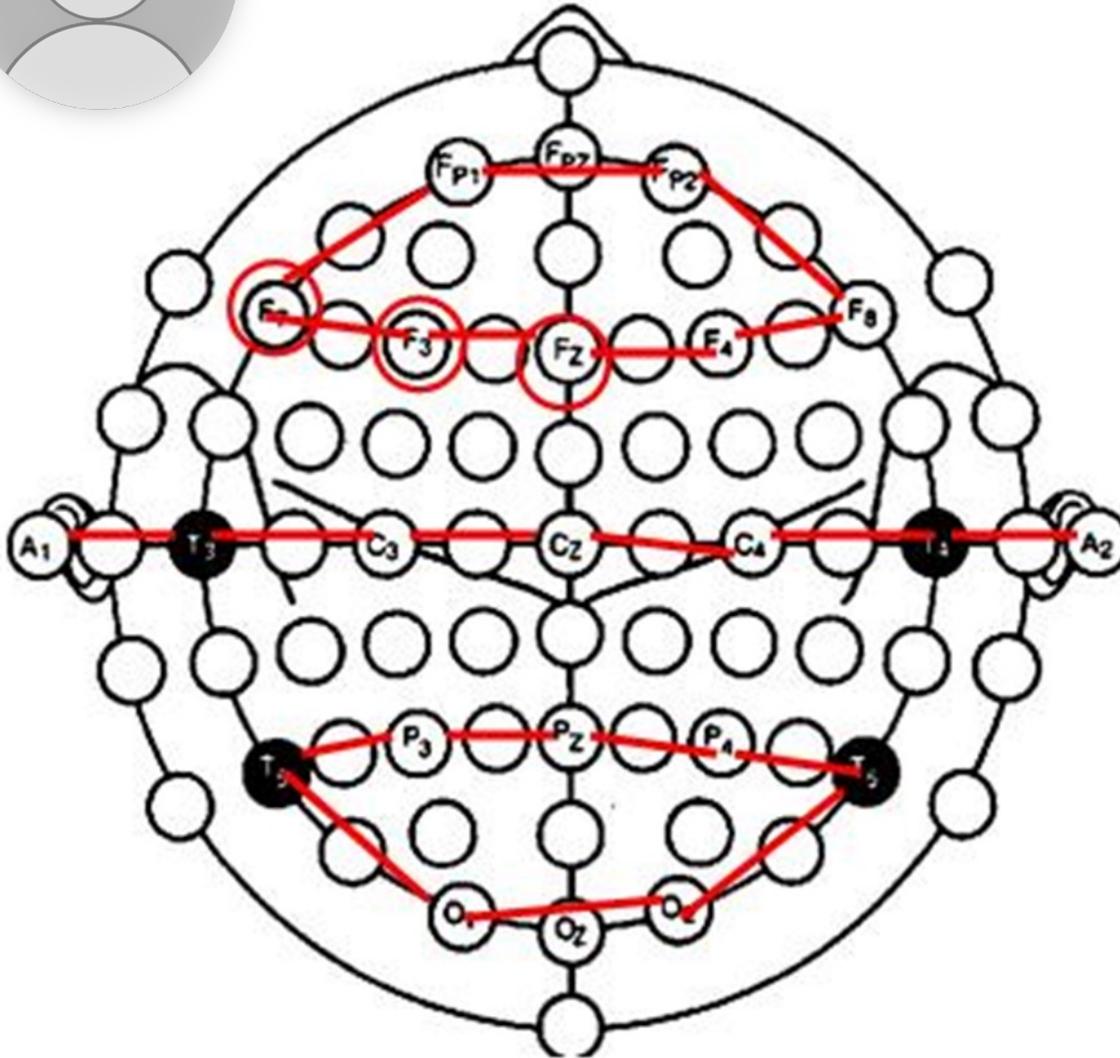
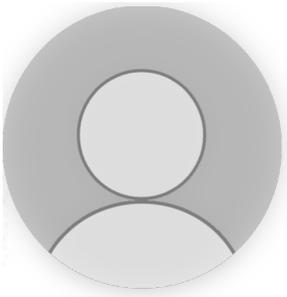


Fp1	-F3
F3	-C3
C3	-P3
P3	-O1

Est. 1888



Mahidol University
Faculty of Medicine
Siriraj Hospital

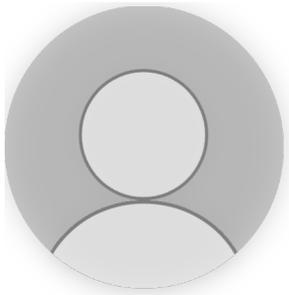


**Coronal /
transverse
bipolar
montage:**

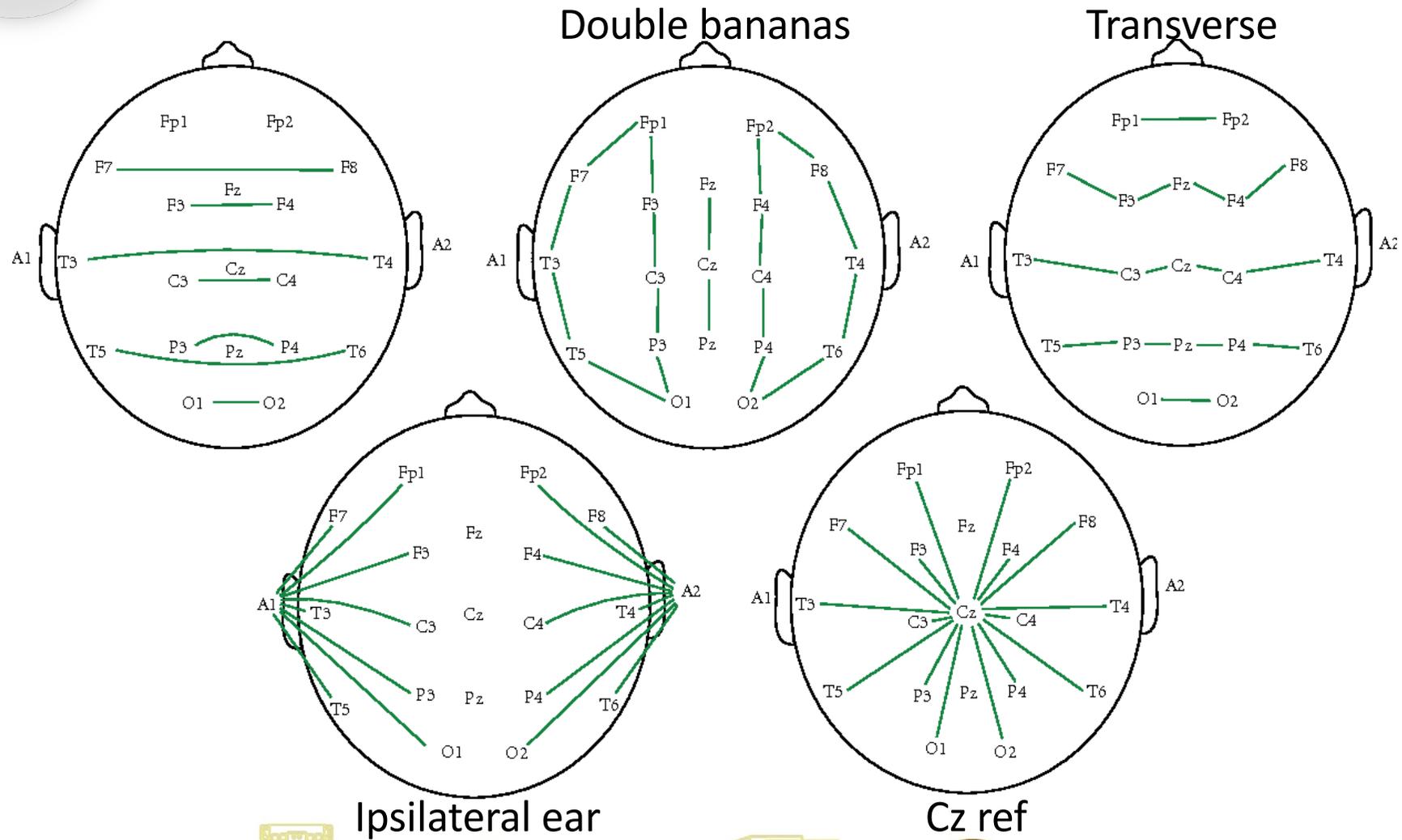
Est. 1888



Mahidol University
Faculty of Medicine
Siriraj Hospital



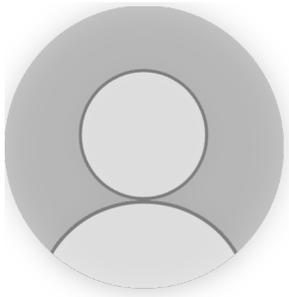
Common EEG montages



Est. 1888



Mahidol University
Faculty of Medicine
Siriraj Hospital



Bipolar montages

Advantage

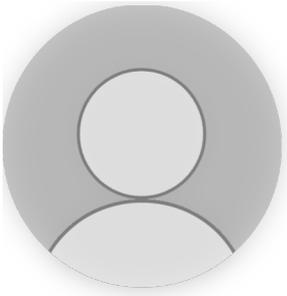
- Eliminating the problem from contaminated reference
- Less artifacts

Disadvantage

- Possibility of signal cancellation



Mahidol University
Faculty of Medicine
Siriraj Hospital

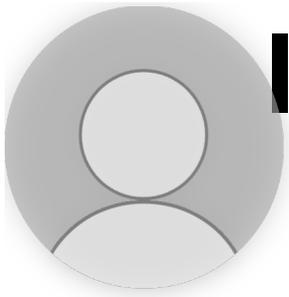


Routine EEG

- Note state of consciousness
- Mental activation
- Photic stimulation
- Hyperventilation
- Other stimulation: Tactile, pain, noise, etc. if indicated



Mahidol University
Faculty of Medicine
Siriraj Hospital



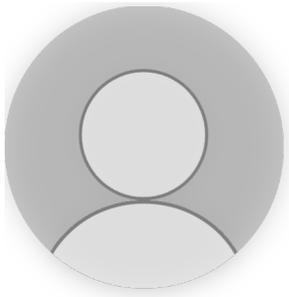
Information needed for EEG interpretation

- Age
- State of consciousness



Mahidol University
Faculty of Medicine
Siriraj Hospital



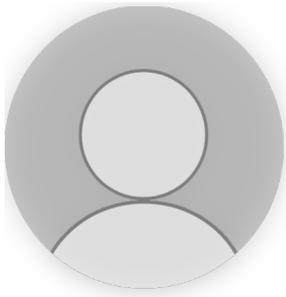


Description & terminology of EEG activities



Mahidol University
Faculty of Medicine
Siriraj Hospital





What are on EEG records?

Normal physiologic rhythm

Abnormal physiologic rhythm

- Epileptiform discharges (ED)
- Nonepileptiform discharges

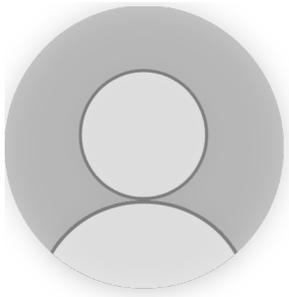
Artifacts

- Physiologic artifacts
- Nonphysiologic artifacts

Est. 1888



Mahidol University
Faculty of Medicine
Siriraj Hospital



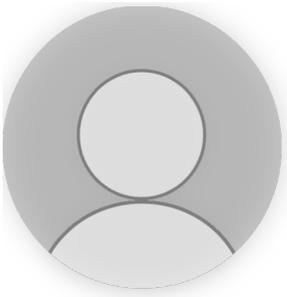
Description & terminology

- Wave form
- Interhemispheric coherence: symmetry, synchrony
- Repetition
- Frequency
- Amplitude
- Symmetry
- Distribution/location
- Occurrence
- Reactivity



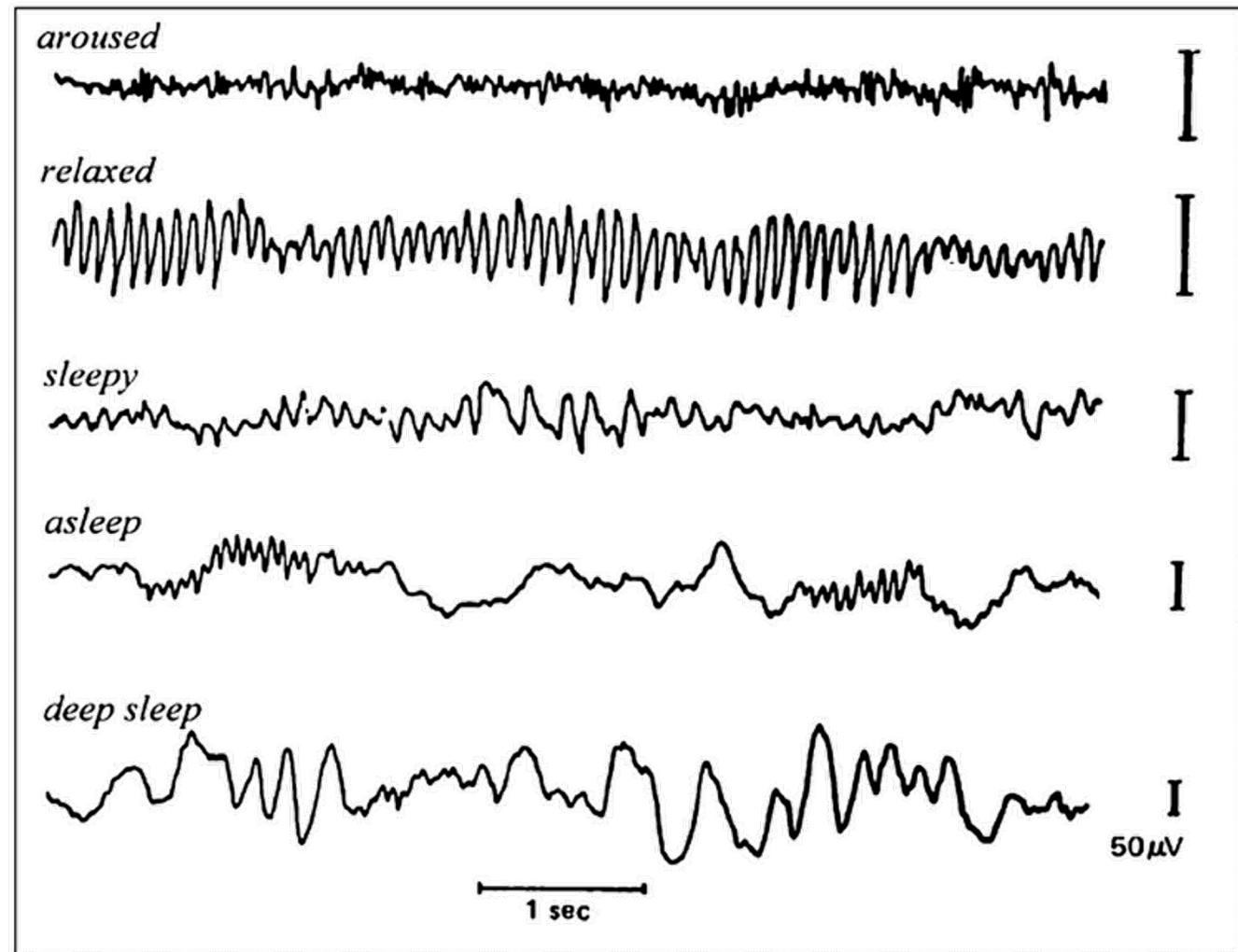
Mahidol University
Faculty of Medicine
Siriraj Hospital





Wave form

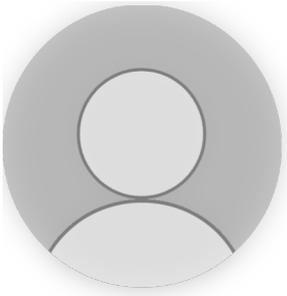
- Non-ED
 - Regular
 - Sinusoidal



Est. 1888

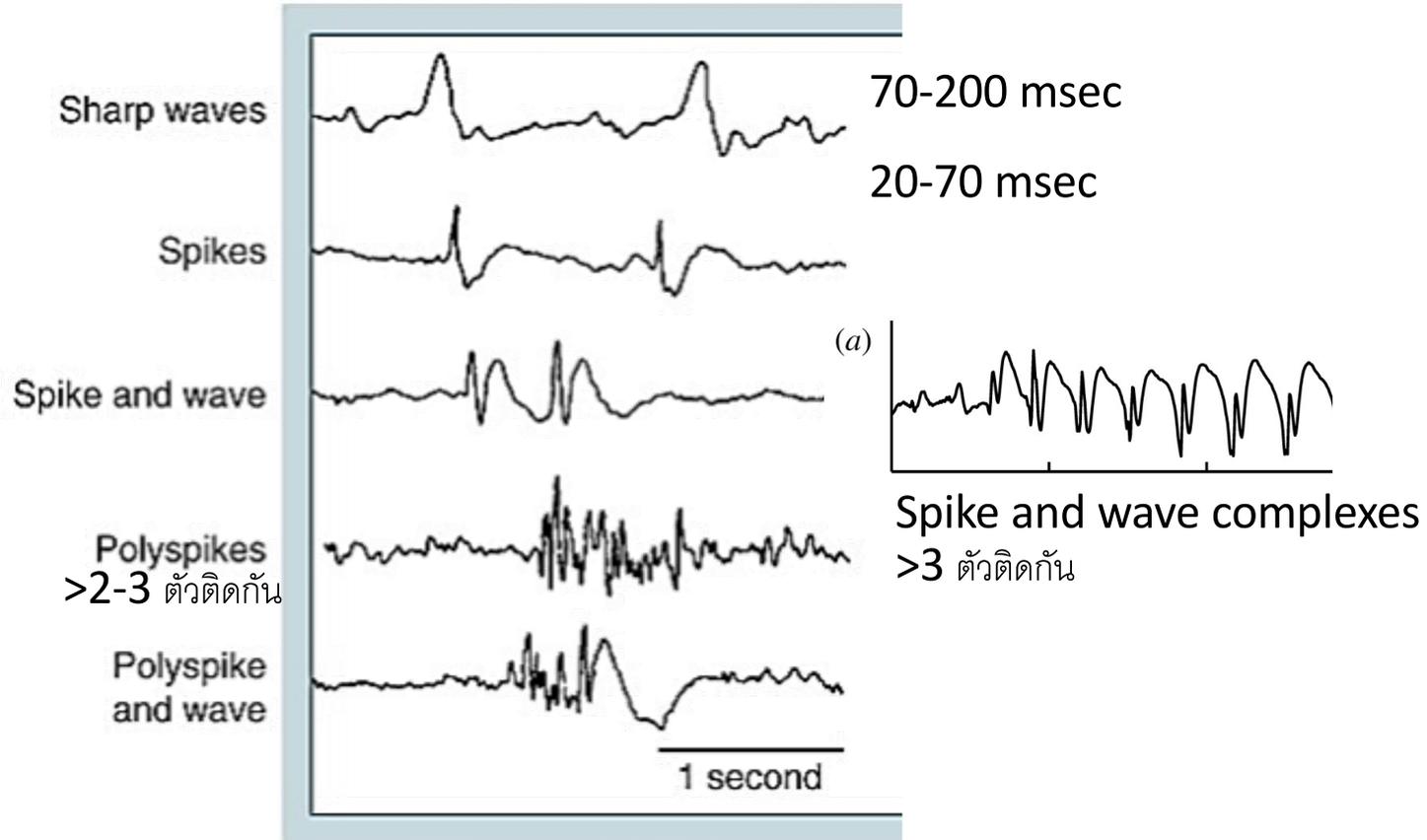


Mahidol University
Faculty of Medicine
Siriraj Hospital



Wave form

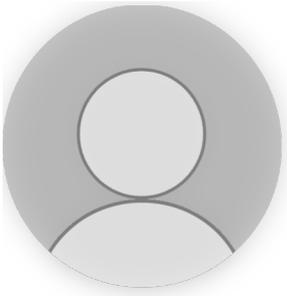
- Epileptiform



Est. 1888



Mahidol University
Faculty of Medicine
Siriraj Hospital



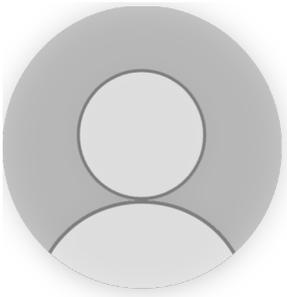
Repetition

- Rhythmic (regular): sinusoidal
- Non-rhythmic (irregular): polymorphic



Mahidol University
Faculty of Medicine
Siriraj Hospital

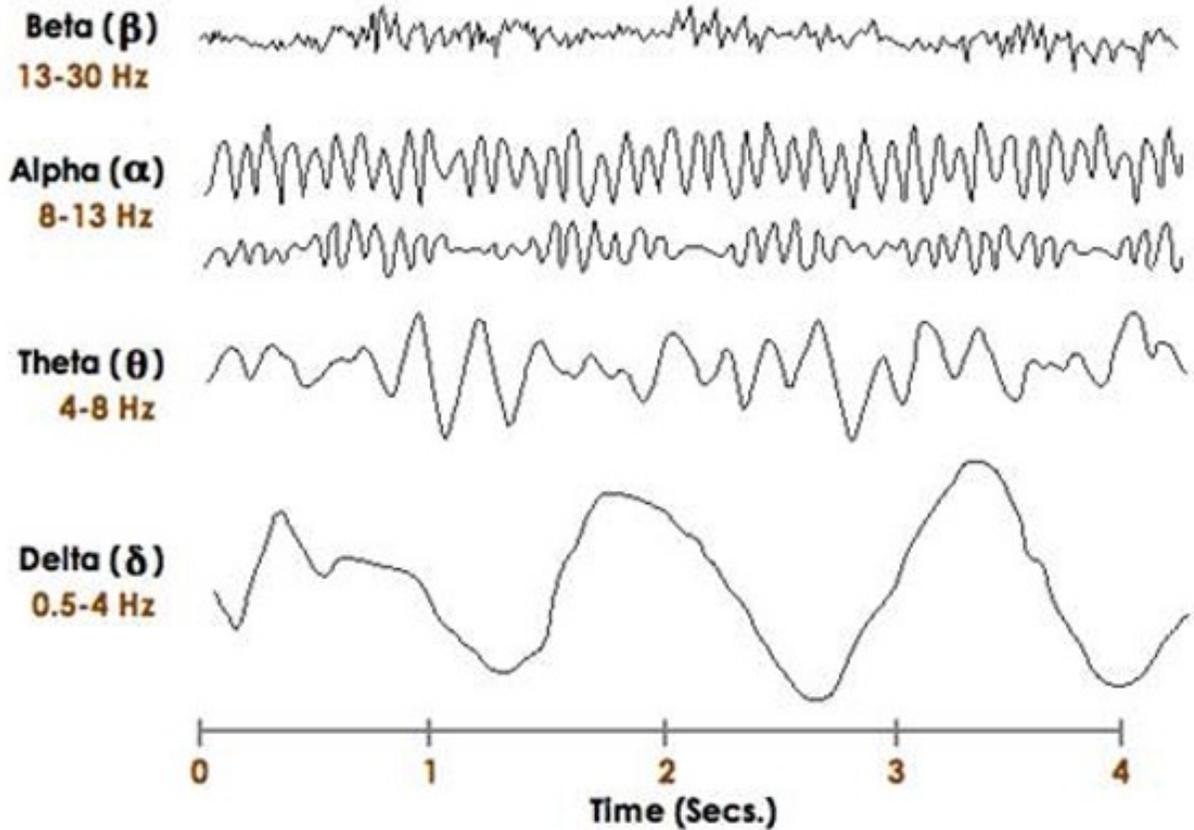




Frequency

- Delta: <4 Hz
- Theta: 4-<8 Hz
- **Alpha: 8-<13 Hz**
- Beta: >13 Hz

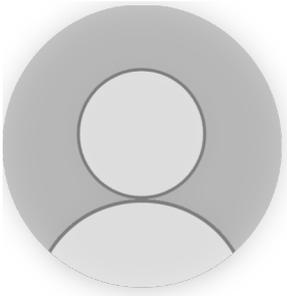
- Slow → <8Hz
- Fast → >13 Hz



Est. 1888



Mahidol University
Faculty of Medicine
Siriraj Hospital



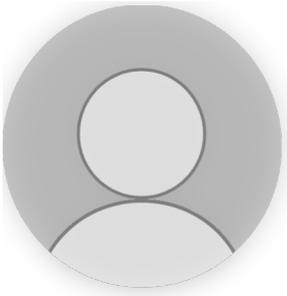
Amplitude

- Low: $<20 \mu\text{V}$
- Medium or moderate: $20\text{-}50 \mu\text{V}$
- High: $>50 \mu\text{V}$



Mahidol University
Faculty of Medicine
Siriraj Hospital





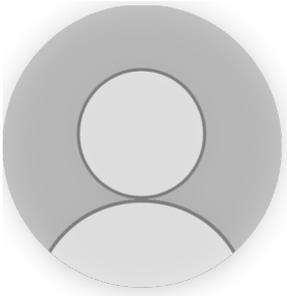
Distribution

- Widespread, diffuse or generalized
- Lateralized (hemisphere)
- Focal (lobe)



Mahidol University
Faculty of Medicine
Siriraj Hospital





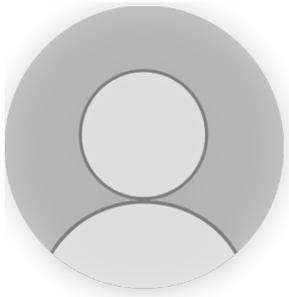
Occurrence

- Intermittent or occasionally
 - <70-80%
- Continuous or persistence
 - >80%



Mahidol University
Faculty of Medicine
Siriraj Hospital



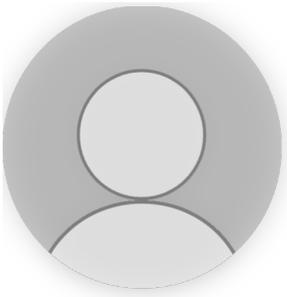


Normal awake EEG



Mahidol University
Faculty of Medicine
Siriraj Hospital





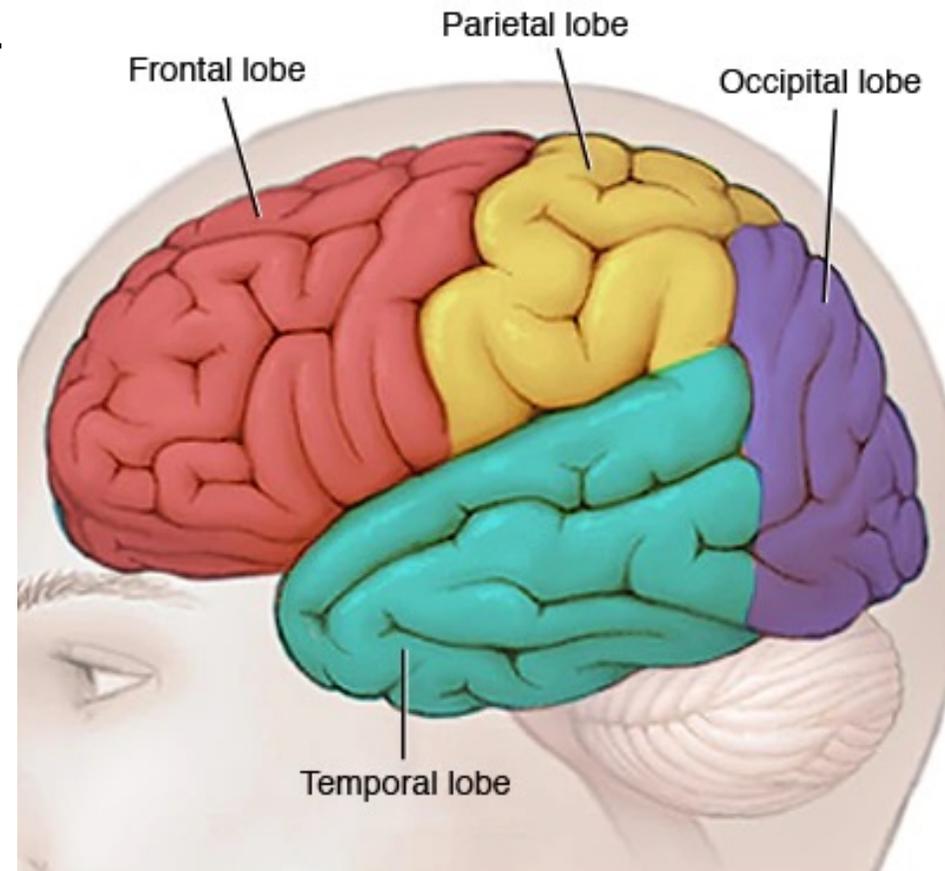
Normal awake EEG

State of consciousness

- Awake EEG
- Sleep EEG

Location

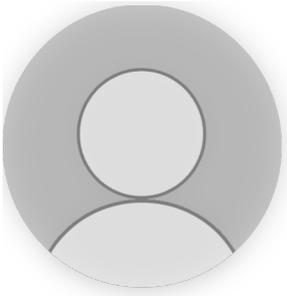
- Different rhythm



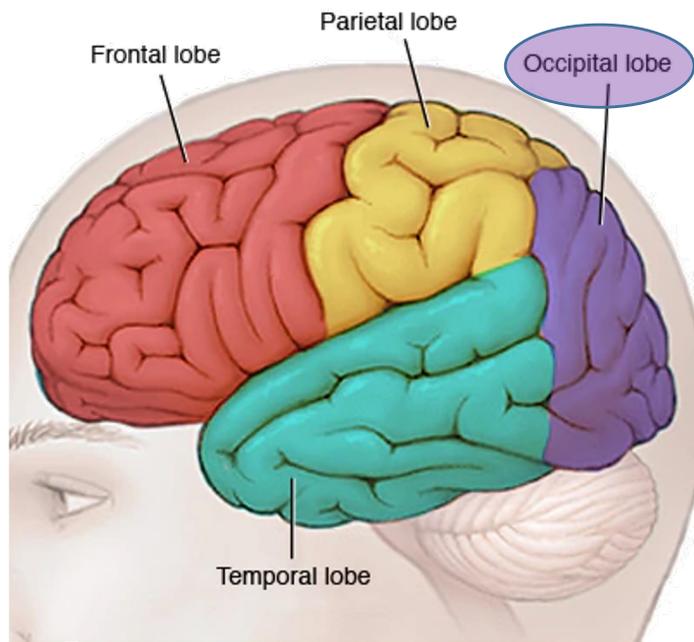
© MAYO FOUNDATION FOR MEDICAL EDUCATION AND RESEARCH. ALL RIGHTS RESERVED.



Mahidol University
Faculty of Medicine
Siriraj Hospital



Posterior dominant background (alpha rhythm)



© MAYO FOUNDATION FOR MEDICAL EDUCATION AND RESEARCH. ALL RIGHTS RESERVED.

- Frequency: 8-13 Hz,
 - 3-4 Hz in newborn, up to 8 Hz by 3-6 yo
- Voltage: depends on age, higher voltage in children
- Waveform: regular, waxing and waning in amplitude
- Occurrence: continuous during awake
- Location: occipital, parietal, posterior temporal, symmetric
- Reactivity: reduced with eye opening



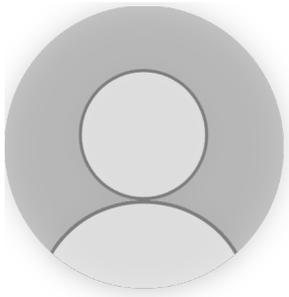
Mahidol University
Faculty of Medicine
Siriraj Hospital



Est. 1888



Mahidol University
Faculty of Medicine
Siriraj Hospital

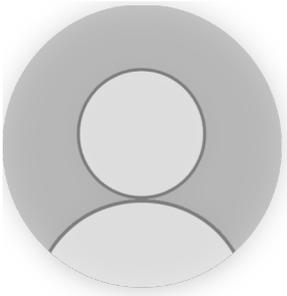


Posterior dominant rhythm: Age dependent

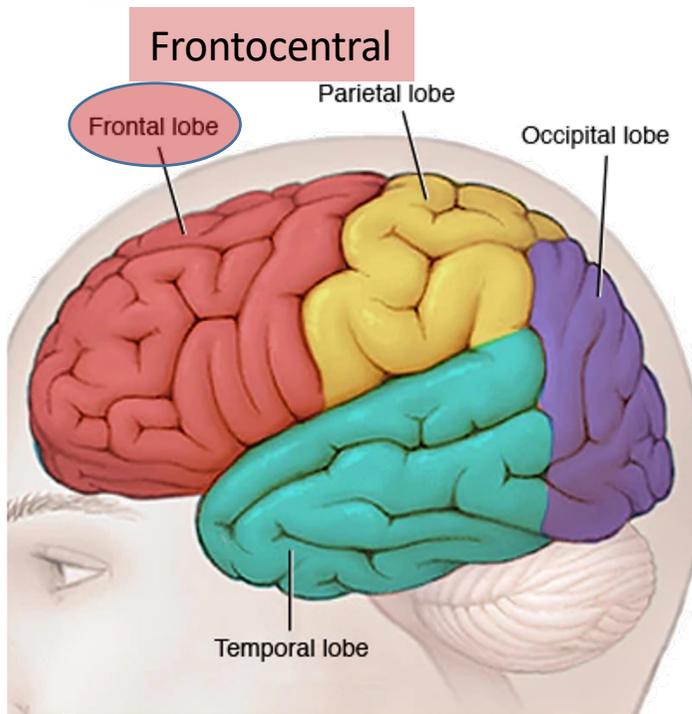
- 4 months 4 Hz
 - 5 months to 1 year 5-6 Hz
 - 3 years 8 Hz (>80% of age group)
 - 9 years 9 Hz
 - 15 years 10 Hz
-
- about 1 Hz different between Rt./Lt. hemisphere
 - $\frac{1}{4}$ of normal, alpha rhythm is poorly visualized
 - Amplitude: Rt > Lt



Mahidol University
Faculty of Medicine
Siriraj Hospital



Frontal Beta rhythm



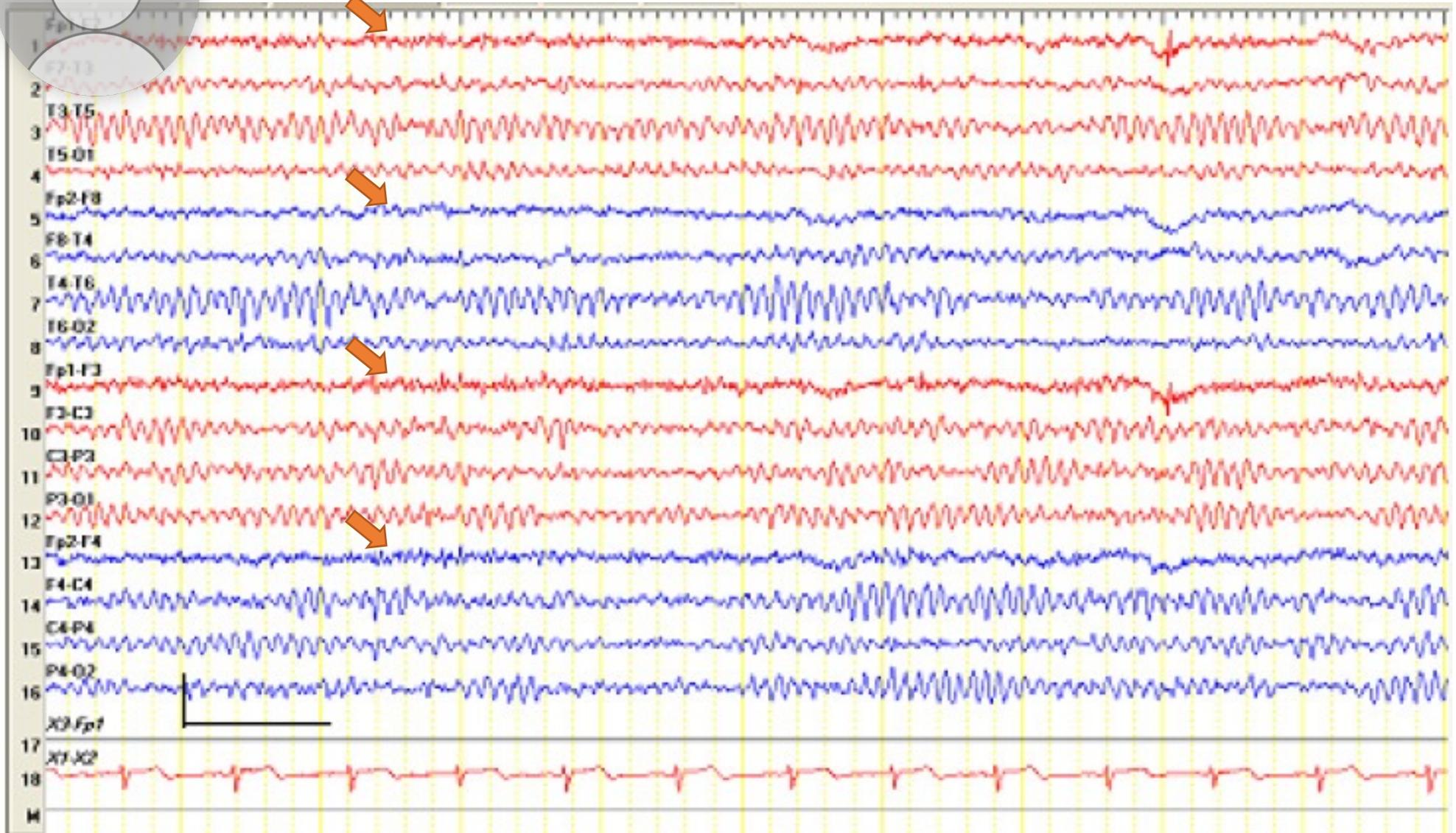
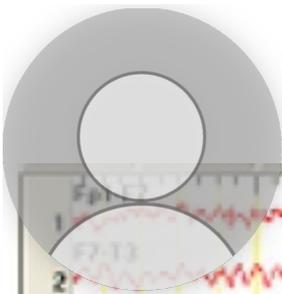
© MAYO FOUNDATION FOR MEDICAL EDUCATION AND RESEARCH. ALL RIGHTS RESERVED.

- Frequency: >13 Hz (common 18-25 Hz)
- Voltage: low voltage, usually < 20 μ V
- Occurrence: irregular but continuous during awake, may be more prominent with drowsiness
- Location: Frontocentral region, symmetric

Est. 1888



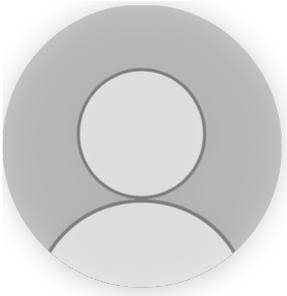
Mahidol University
Faculty of Medicine
Siriraj Hospital



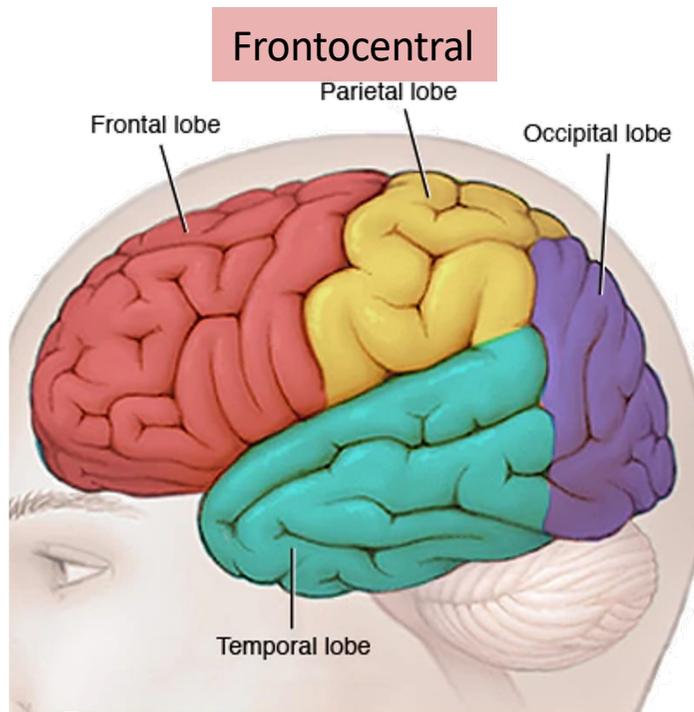
Est. 1888



Mahidol University
Faculty of Medicine
Siriraj Hospital



Mu rhythm

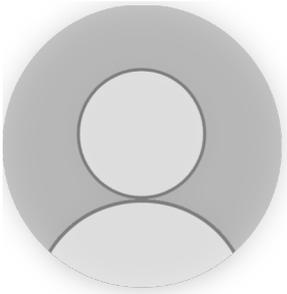


© MAYO FOUNDATION FOR MEDICAL EDUCATION AND RESEARCH. ALL RIGHTS RESERVED.

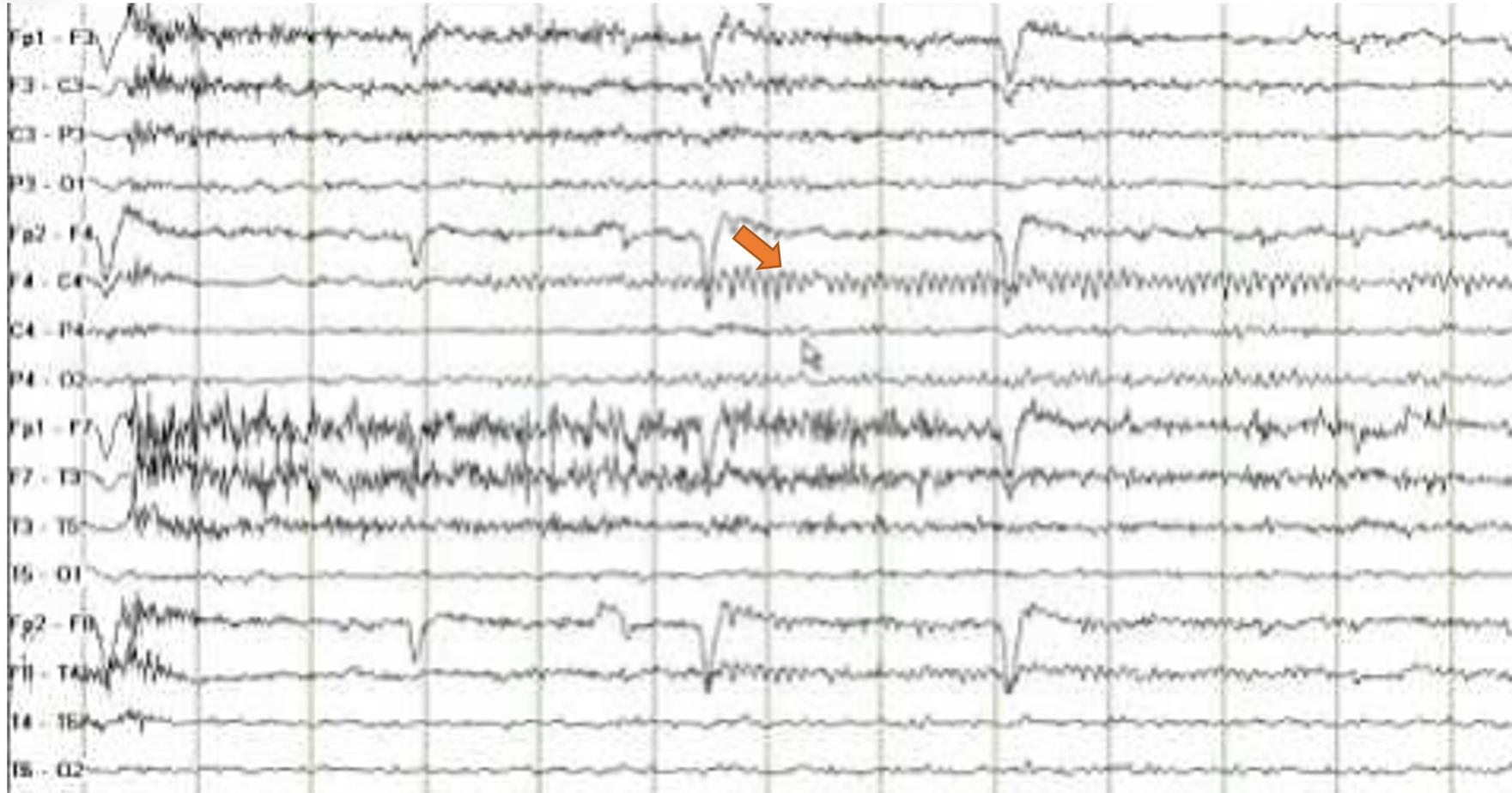
- Resting state of motor neuron
- Frequency: 8-10 Hz
- Voltage: **similar to alpha rhythm**
- Waveform: arch like
- Occurrence: intermittent, 17-19% in young adult, less in elderly or children
- Location: central region
- Reactivity: blocks with movement of contralateral extremity
- Can be unilateral/ asymmetric



Mahidol University
Faculty of Medicine
Siriraj Hospital



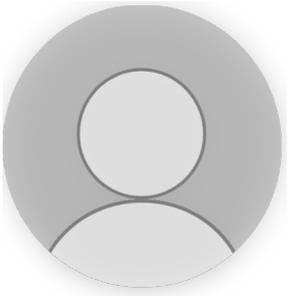
Mu rhythm



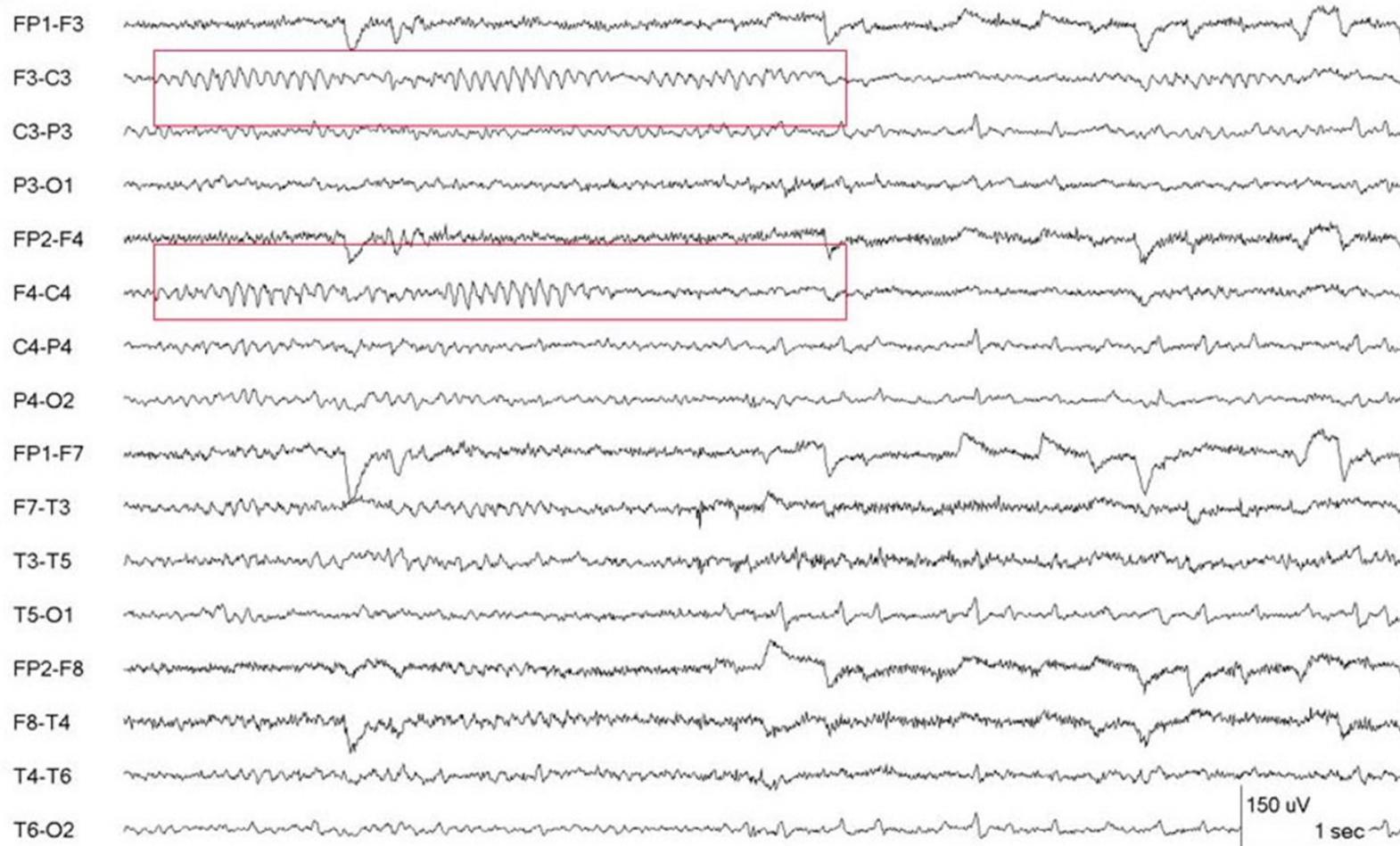
Est. 1888



Mahidol University
Faculty of Medicine
Siriraj Hospital



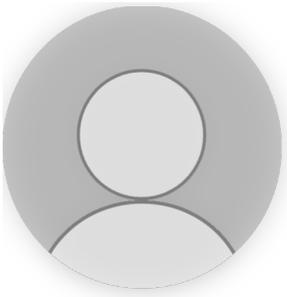
Mu rhythm



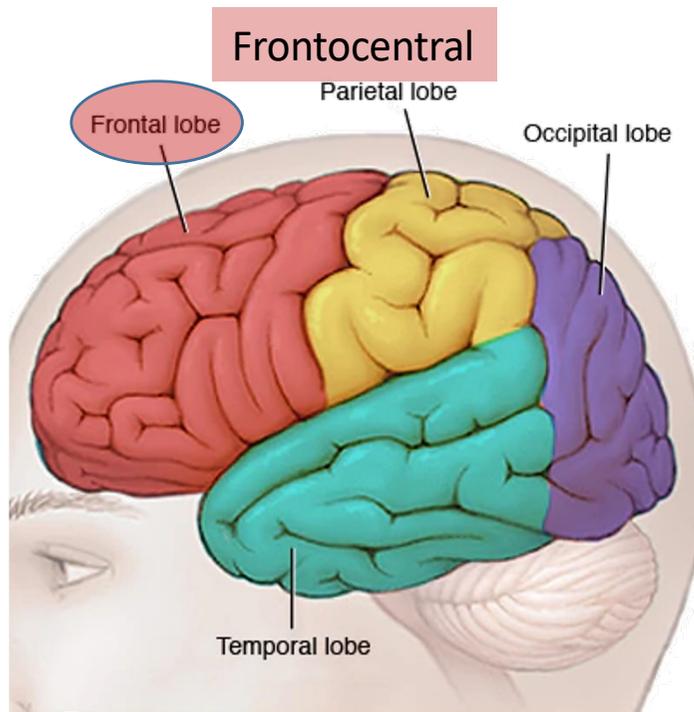
Est. 1888



Mahidol University
Faculty of Medicine
Siriraj Hospital



Theta rhythm



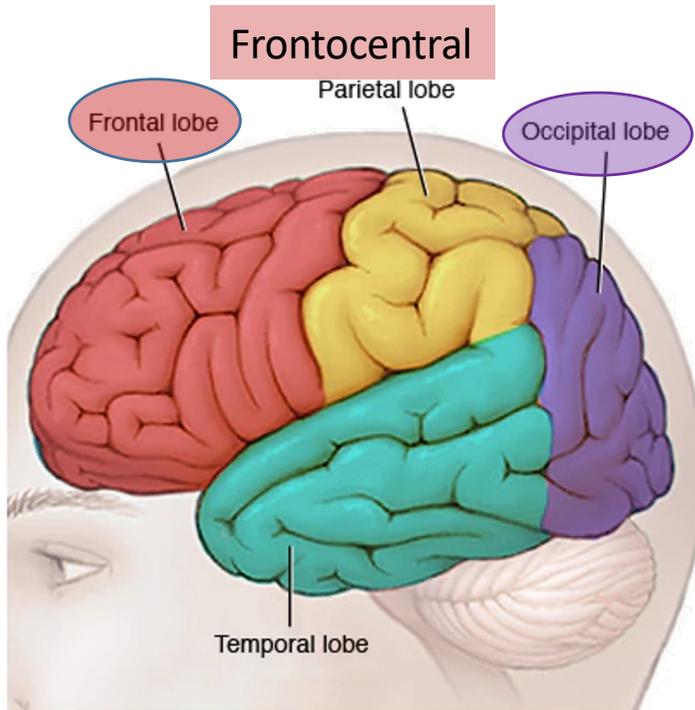
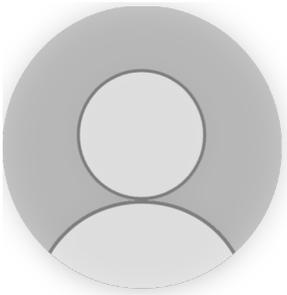
© MAYO FOUNDATION FOR MEDICAL EDUCATION AND RESEARCH. ALL RIGHTS RESERVED.

- Frequency: 4-7 Hz (most commonly 6-7 Hz)
- Voltage: similar to alpha rhythm
- Occurrence: irregular
- Enhance with drowsiness/ light sleep
- Location: Frontal, frontocentral region, symmetric

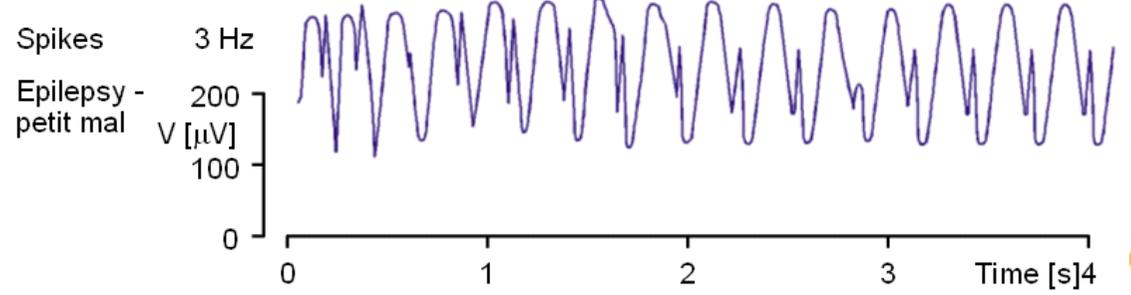
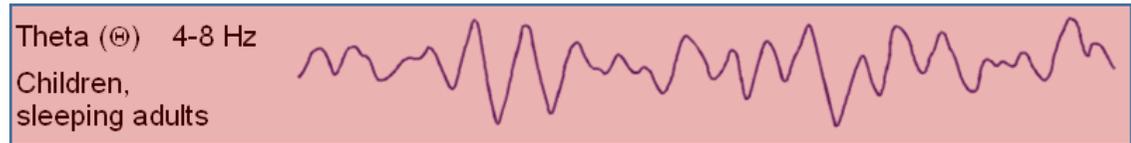
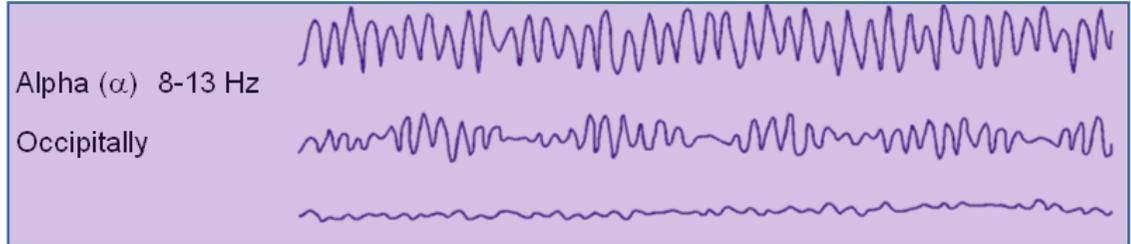
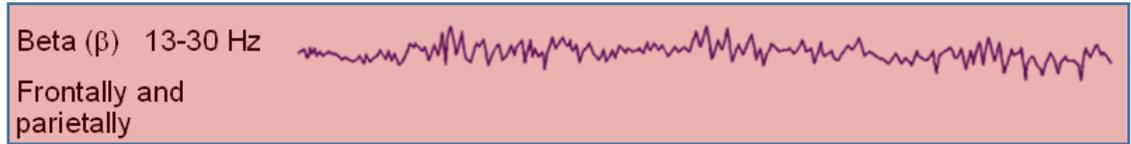
Est. 1888



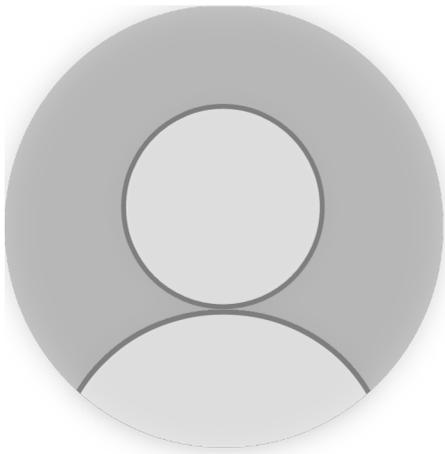
Mahidol University
Faculty of Medicine
Siriraj Hospital



© MAYO FOUNDATION FOR MEDICAL EDUCATION AND RESEARCH. ALL RIGHTS RESERVED.



Mahidol University
Faculty of Medicine
Siriraj Hospital



มหาวิทยาลัยมหิดล
คณะแพทยศาสตร์
ศิริราชพยาบาล

Basic EEG for neurology residents “Normal Awake EEG”



Mahidol University
Faculty of Medicine
Siriraj Hospital

