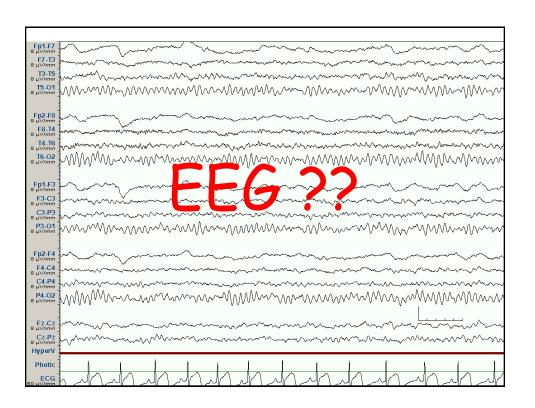
Normal EEG in children

EEG workshop 20/7/53

Sorawit Viravan



What is EEG?

- Electroencephalogram
- Detect brain wave by scalp electrodes
- Summation of postsynaptic potentials (EPSP & IPSP) → brain waves

EEG

- Electrode placement
- Montage
- EEG activity

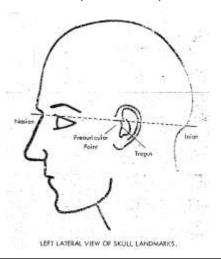
Electrode placement

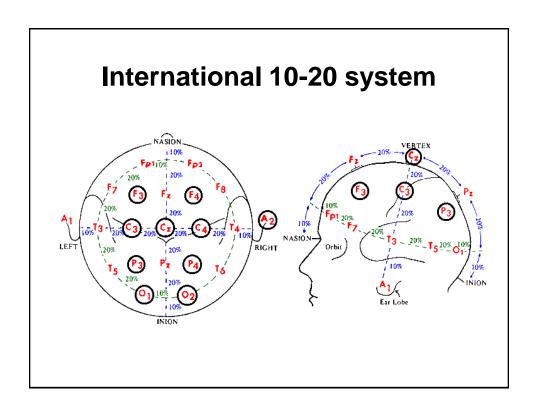
- International 10-20 system
 - Minimum 21 electrodes
 - Odd-numbered electrodes are placed on the left side of the head, and even-numbered electrodes are placed on the right side of the head
 - Specific letters designate the anatomical area; for example "F" means frontal

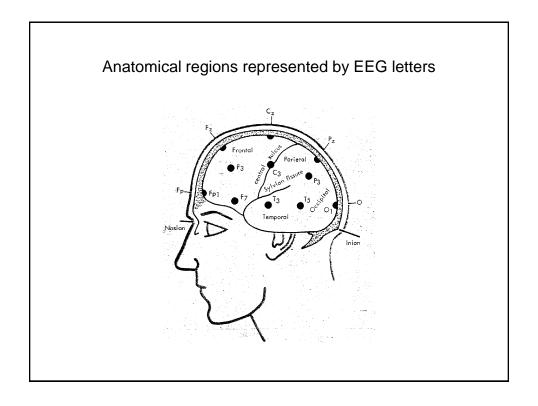
International 10 -20 system -

4 landmarks are used

nasion (point between forehead and nose) & inion (bump – lowest point of skull at back of head) & 2 pre auricular points









Common Montage types

The difference in voltage between two electrodes

• Bipolar:

Each channel represents difference between 2 adjacent electrodes

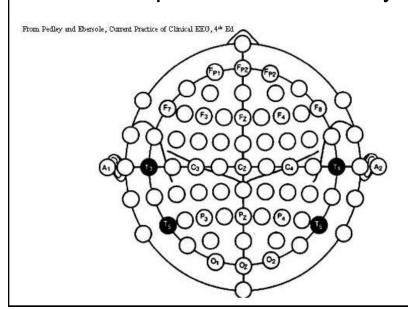
- AP bipolar
- Coronal / transverse bipolar

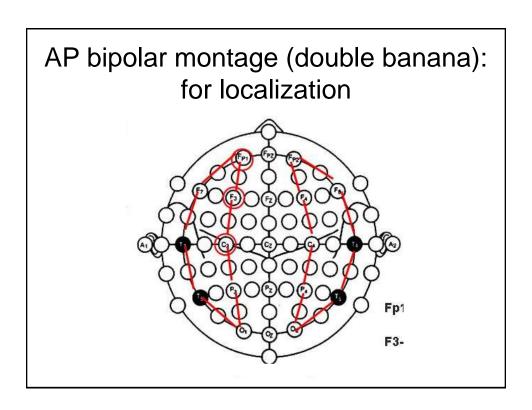
• Referential:

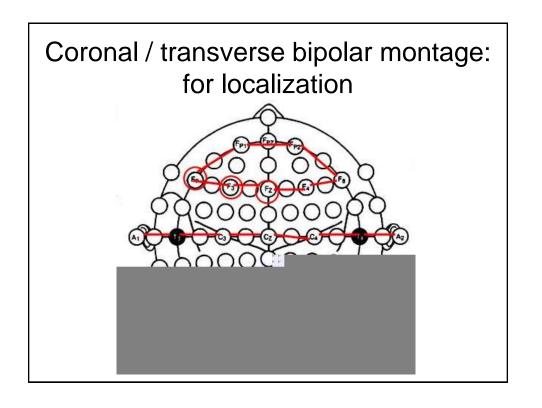
Each channel represents the difference between a certain electrode and the designated reference position

- ipsilateral ear
- average
- midline, etc.

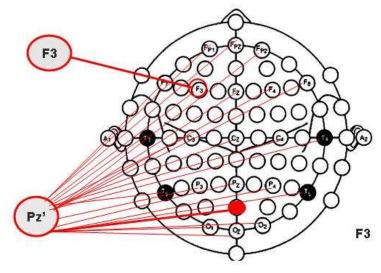
Electrode placement: 10-20 system





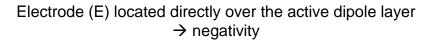


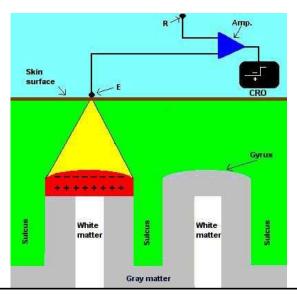
Referential montage: for amplitude measurement



Brain wave

- EPSP causes depolarization in pyramidal cell of the cerebral cortex gyrus
- Any change in difference of electrical potential between two recording electrodes
- Sequence of waves → activity





EEG activity

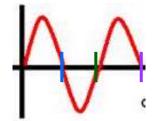
- Waveform
- Frequency
- Amplitude
- Polarity
- Timing

Wave form

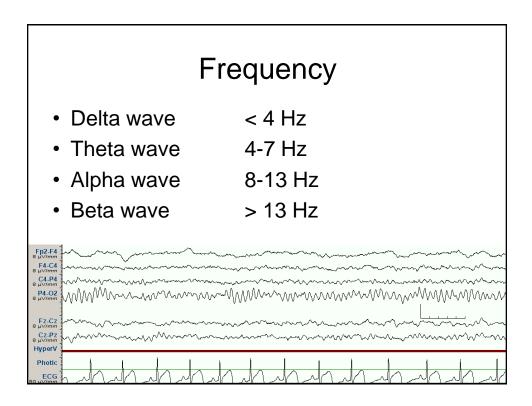
- Spike
 - Sharply contoured, duration 20-70 msec
- Sharp wave
 - Sharply contoured, duration 70-200 msec
- Sharp transient
 - Sharply contoured waveform
- Other morphology
 - spindles, arciform, saw-tooth

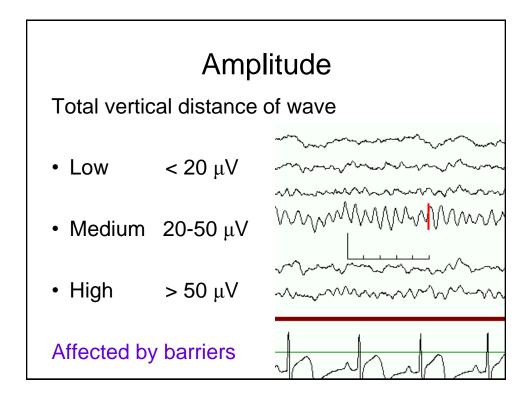
Wave form

- Monophasic wave
 - Single deflection: up or down
- Diphasic wave
 - 2 components on opposite sides



- Polyphasic wave
 - 2 or more components of different direction





Distribution

- · Generalized / diffuse
- Lateralized
- Focal / localized

Timing

- Synchronous
- Bilaterally synchronous
- Asynchronous
- Independent

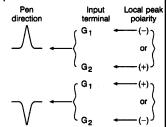
Polarity

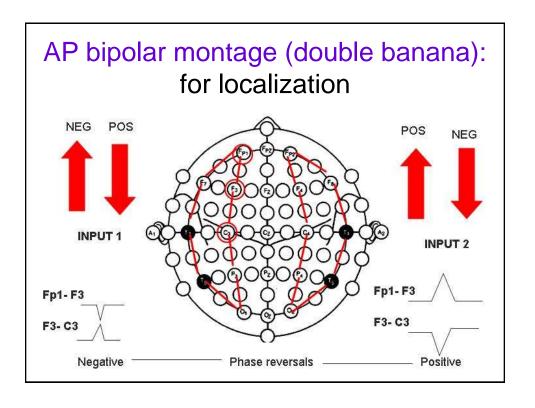
Bipolar (input 1 – Input 2)

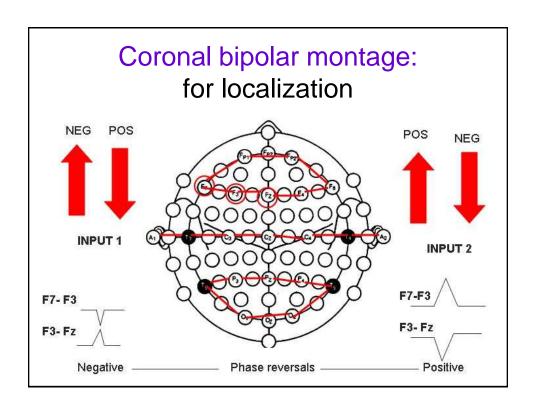
- · Upward pen deflection
 - when input 1 is more negative than input 2
 - when input 2 is more positive than input 1
- Downward deflection
 - when input 1 is more positive than input 2
 - when input 2 is more negative than input 1

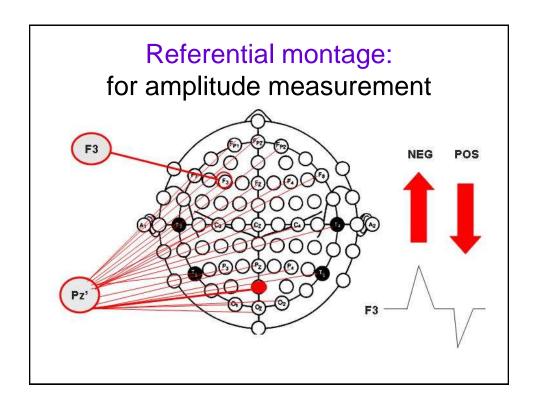
Referencial (Input 1 – Ref)

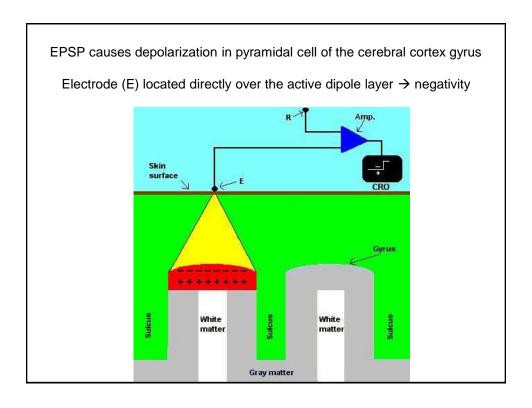
- negative is up and positive is down

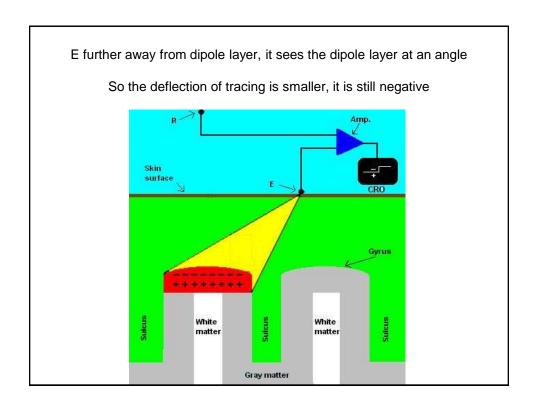


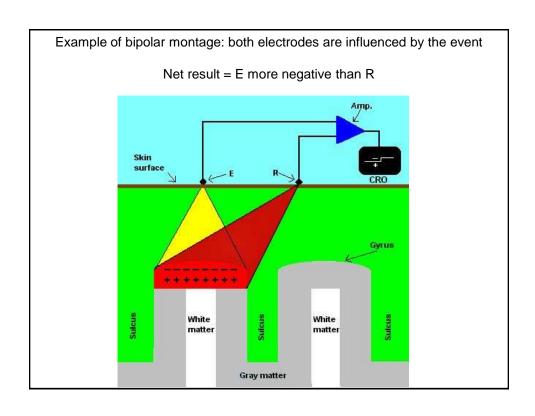


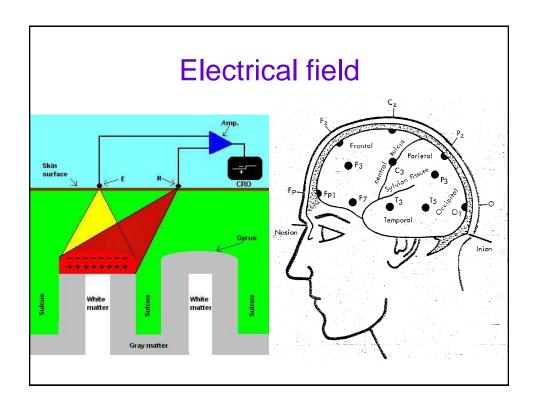


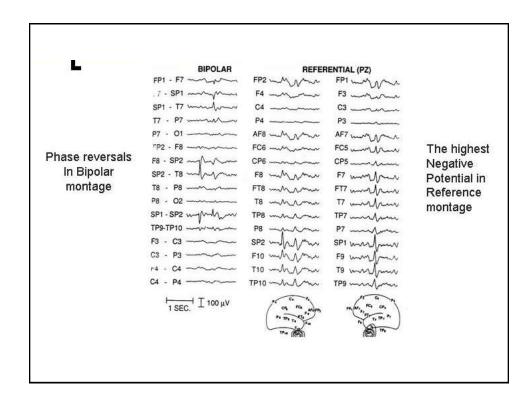












EEG in children

- Newborn EEG (0-28 days in full term baby)
- EEG of children age 1 month adolescent

EEG in newborn

- Post conceptional age
- Duration at least 60 minutes
- Awake / Active sleep / Quiet sleep
- Continuity / Synchrony
- Symmetry / Reactivity
- Normal specific EEG pattern

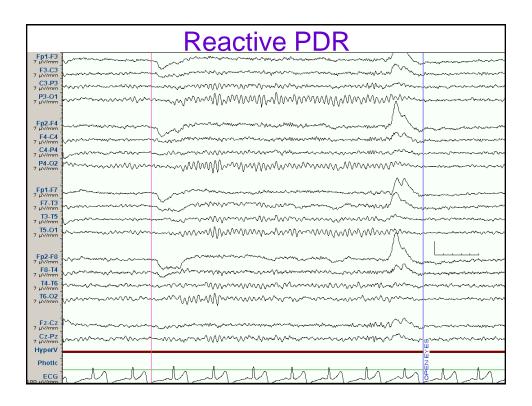
Pediatric EEG

Awake

- Posterior dominant rhythm (PDR)
- Posterior slow wave of youth (PSWY)
- Mu rhythm
- Beta activity
- Lambda wave
- Eye movement
- Artifact

PDR

- · Alert, eye-closed, in rest state
- First seen at 3 months of age
- Maximum posterior head region
- Reactivity
 - Attenuation with eye opening, + anxiety



PDR

- Higher amplitude over right hemisphere (< 50% difference)
 due to asymmetric skull thickness
- Amplitude ~ 50-100 uV
- Decreasing amplitude with increasing age due to increased bone density of the skull

PDR

Frequency in Children

3-4 months: 4 Hz

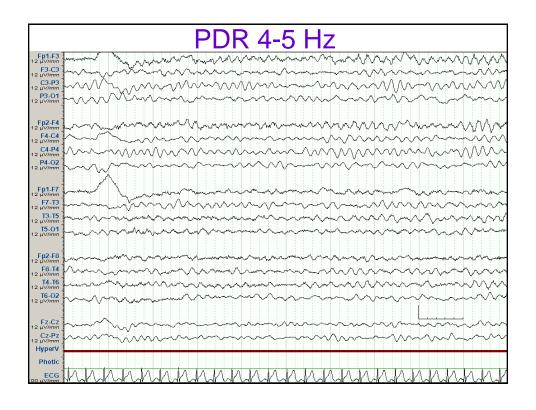
12 months: 5-6 Hz

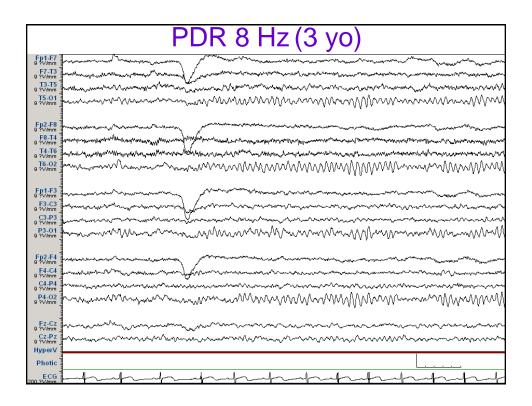
2 years: 7 Hz

3 years: 8 Hz

9 years: 9 Hz

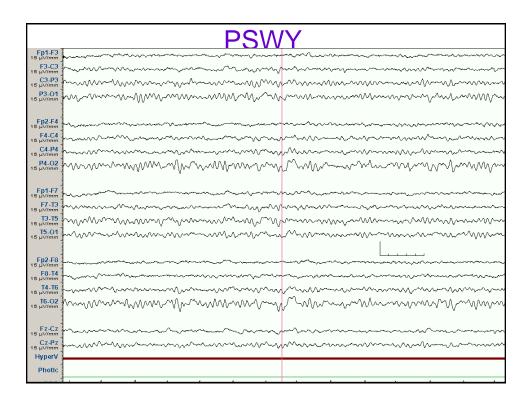
15 years: 10 Hz





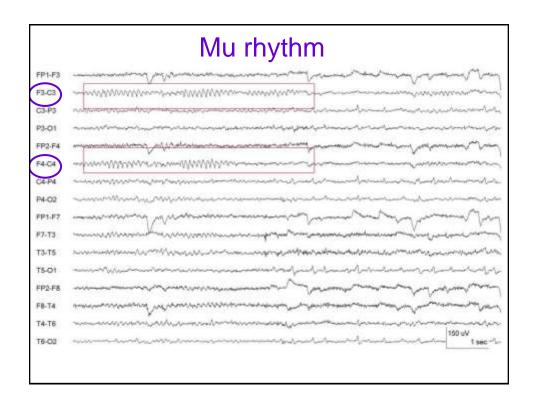
PSWY

- Slow activity intermixed with PDR
- Moderate voltage (<120% of normal alpha rhythm voltage)
- May be asymmetry
- Best seen in 8-14 years
- Block with eye opening
- Disappear with the alpha rhythm during drowsiness and light sleep



Mu

- central arch-like rhythm of alpha frequency (usually 8-10 Hz)
- May be related to the functions of the sensorimotor cortex at rest
- Best seen between 8-16 years
- Asymmetrical
- Blocked unilaterally with movement of the contralateral extremity
- · Not blocked by eye opening



Beta

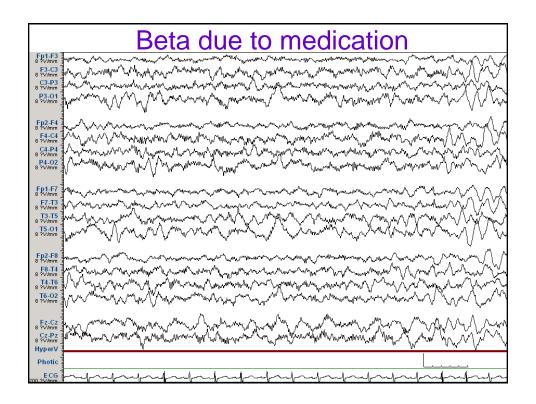
- Frequencies more than 13 Hz
- Amplitude < 20 uV, usually < 10 uV
- Three band

18-25 Hz band (common)

14-16 Hz band (less common)

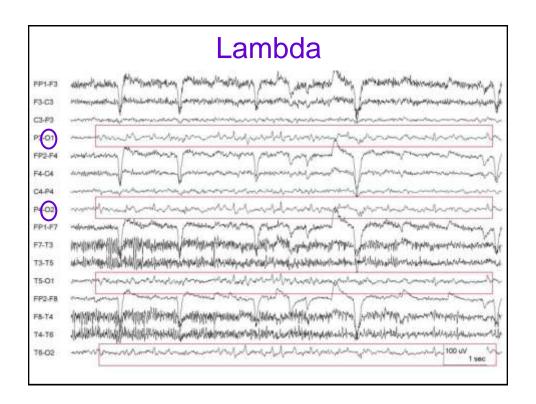
35-40 Hz band (rare)

- Increased by
 - Drugs eg. barbiturate, benzodiazepine, chloral hydrate (18-25 Hz > 14-16 Hz)



Lambda wave

- · Surface positive, check mark-like wave
- Occipital region
- · During eye opening
- Visually scanning at complex picture (ceiling, TV etc.) with saccadic eye movement
- Best seen in 2-15 years
- May be asymmetrical



Eye movement (EM)

Vertical EM (Fp1, Fp2)

- · Eye opening
- Eye closure
- Eye blinking

Horizontal EM (F7, F8)

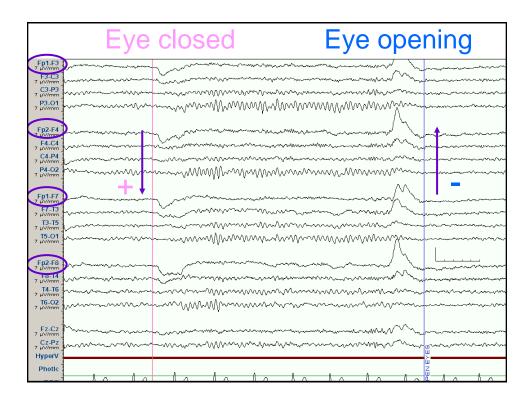
- To the left
- To the right

Eye movement (EM)

- Cornea → positivity
- Retina → negativity
- Nearest electrode of the direction of EM will pick up positivity, the opposite electrode will pick up negativity

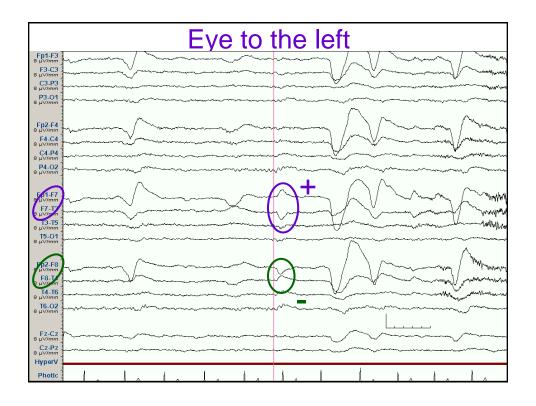
Vertical EM

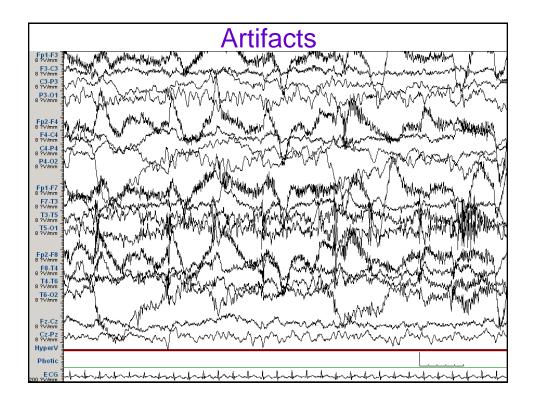
- Eye closure (relatively eyes go up)
 - → Fp1 and Fp2 pick up positivity
 - → downward deflection at Fp1-F7, Fp2-F8
- Eye opening (relatively eyes go down)
 - → Fp1 and Fp2 pick up negativity
 - → upward deflection at Fp1-F7, Fp2-F8



Horizontal EM

- Eye turn to the left
 - → F7 pick up positivity, F8 pick up negativity
 - → positive phase reversal at F7 (Hole)
 - → negative phase reversal at F8
- Eye turn to the right
 - → F8 pick up positivity, F7 pick up negativity
 - → positive phase reversal at F8 (Hole)
 - → negative phase reversal at F7





Sleep

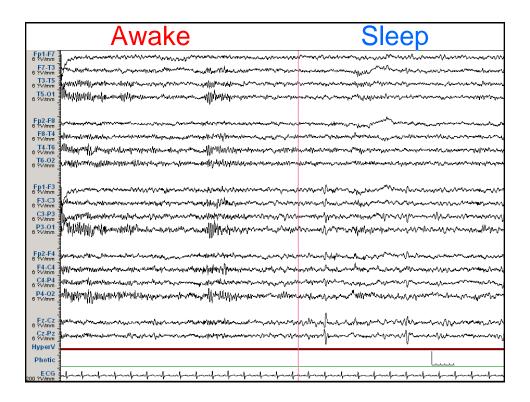
Non-REM sleep

- Stage 1 (drowsiness)
- Stage 2
- Stage 3 & 4

REM sleep

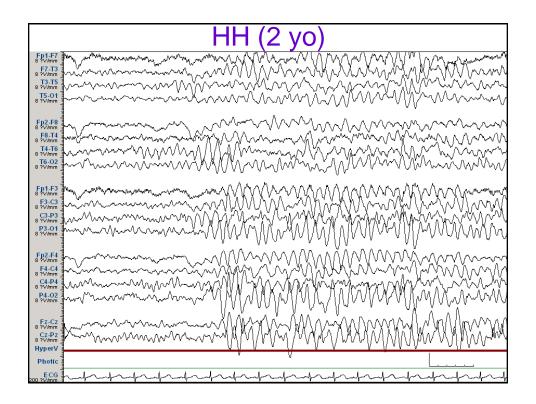
Stage 1

- Alpha drop out
- Hypnagogic hypersynchrony
- POSTs
- Beta activity
- Vertex wave



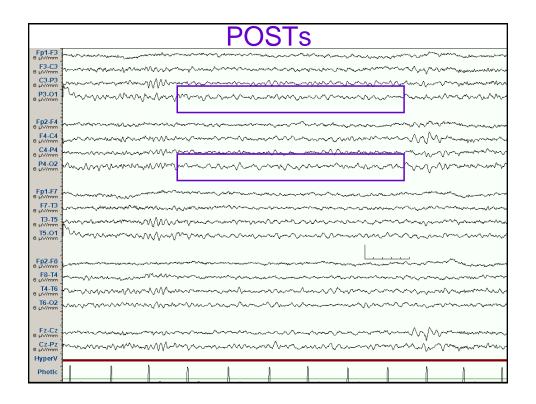
Hypnagogic hypersynchrony

- Burst of generalized high voltage 3-5 Hz
- · Maximum fronto-central
- Awake → sleep
- · Begin 6 months
- Best seen 1-5 years
- Rare after 11-12 years
- Hypnapompic: sleep → awake



POSTs

- Positive occipital sharp transients of sleep
- 4-5 Hz, checkmark-like, isolated or in trains
- Esp. daytime nap, arousal → return to sleep
- Commonly asymmetry
- Age 4-50 years
- Best seen 15-35 years

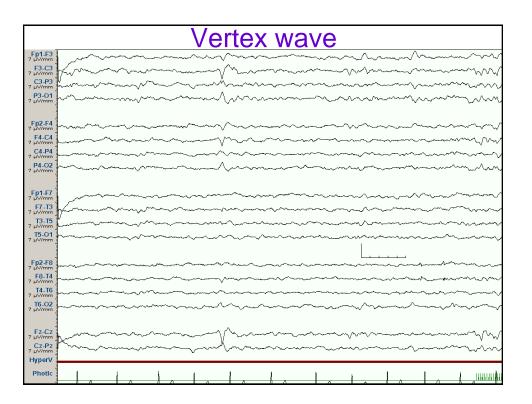


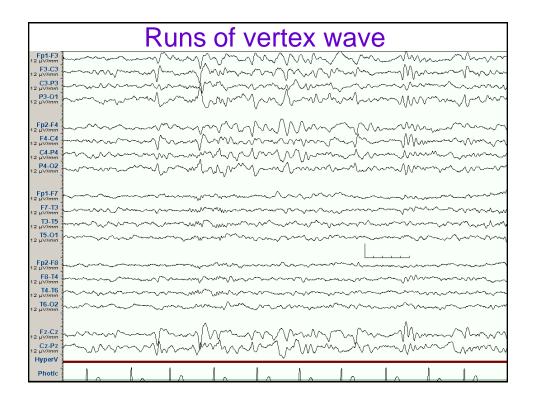
Beta activity

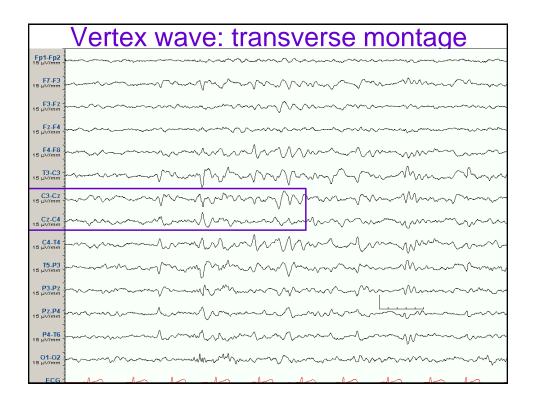
- 18-25 Hz, low voltage
- Maximum central region
- Begin 5-6 months
- Best seen 12-18 months
- Rare after 3 years

Vertex wave

- Sharp transient maximum Cz (vertex)
- Begin 8 weeks post term
- Age 1-4 years; spiky and high amplitude
- Runs of vertex





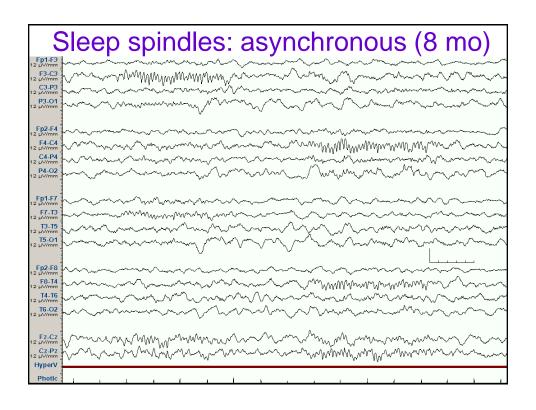


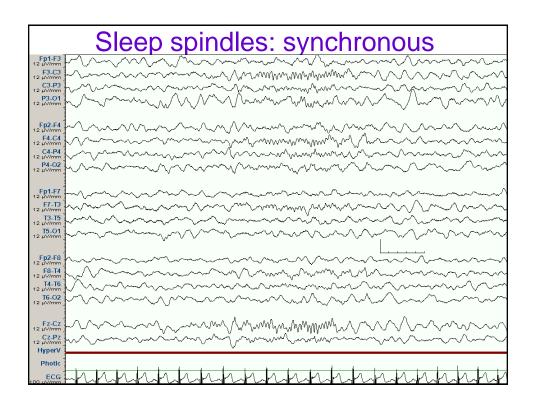
Stage 2

- Sleep spindles
- K-complex
- Delta wave
- (Vertex, POSTs)

Sleep spindles

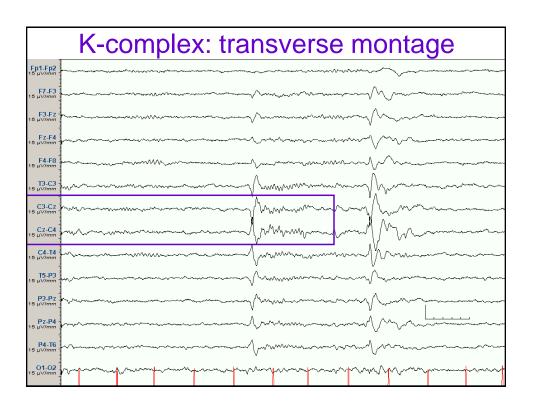
- 11-14 Hz
- Maximum central, frontal (Cz, C3C4, F3F4)
- 2-5 seconds duration, may be spiky
- · Lack of fusiform shape as in adult
- Begin 6-8 weeks post term; asynchronous but symmetrical
- Age 2 years; synchronous

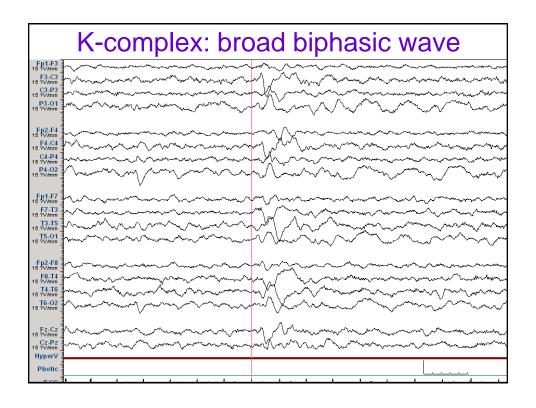




K-complex

- 1. Vertex + spindles
- Biphasic high amplitude slow wave
 0.5 seconds duration
- Maximum Cz (vertex)
- Begin 5 months



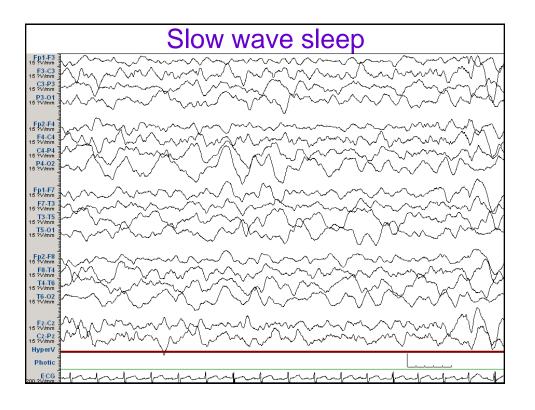


Stage 3 & 4

- Delta activity
- (Sleep spindles)

Delta activity

- 20-50% → stage III
- > 50% → stage IV



REM

- Sleep onset in newborn until 2.5 months, then NREM onset
- Rapid eye movement
- Relatively absent EMG
- Intermixed delta/theta, saw tooth appearance
- Rarely seen in routine pediatric EEG

Arousal

- Brief arousal period from sleep
- · Abrupt change of the background
- Biphasic slow wave: begin 3 mo
- 4-5 Hz: begin 7 mo
- 8-10 Hz: adolescent
- Usually 4-5 seconds or longer

Activation

- Eye opening & eye closure
- Photic stimulation
- Hyperventilation

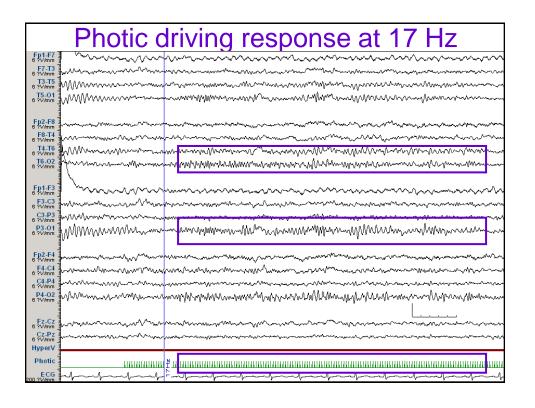
Photic stimulation

Done in dimly lit room, 30 cm away from eyes Frequency 1-30 Hz

- Visual evoked response
- Photo myogenic response
- Photic driving response

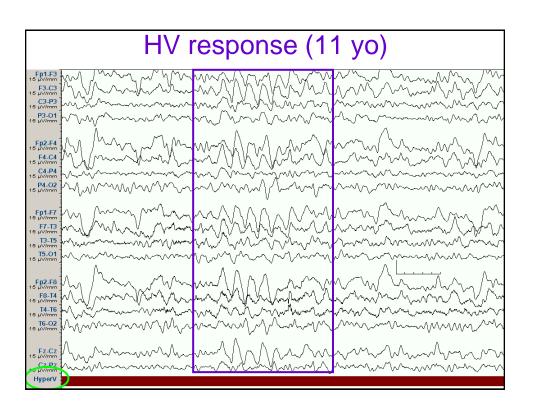
Photic driving response

- Usually > 3 Hz
- Posterior head region
- Related to stimulus frequency
- Asymmetry is not associated with structural brain disease in the absence of other abnormalities



Hyperventilation test

- · Duration 3 minutes; adequate
- Normal response: build up of diffuse, synchronous high voltage delta activity
- More prominent posteriorly in age < 8 yrs
- Change usually resolve within 60 seconds



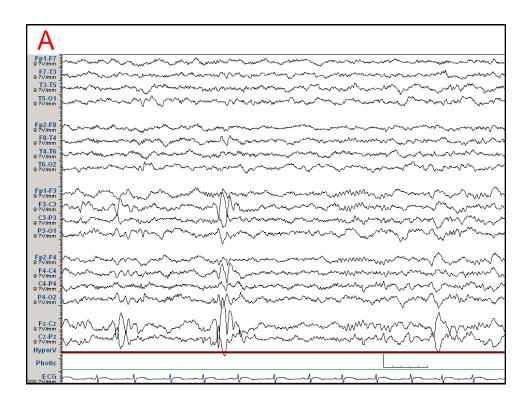
Reading EEG

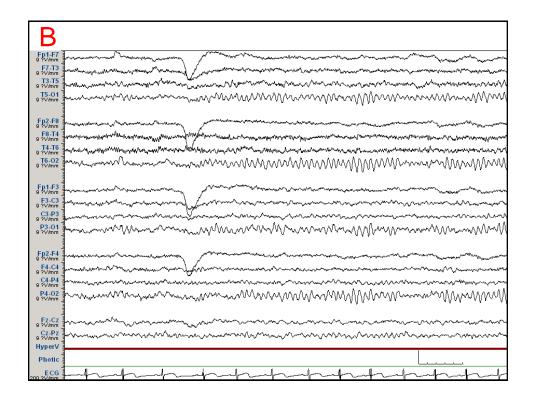
- Age of the patient
- Type of EEG montage
- State of the patient
- What is normal EEG?
- Which is not EEG (not from the brain)?
- Know polarity (upward deflection is negative on referential montage)

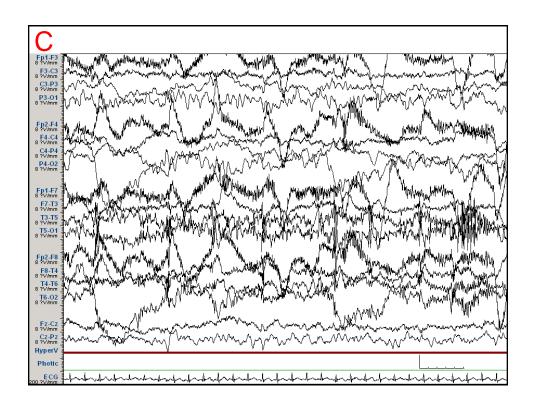
EEG example

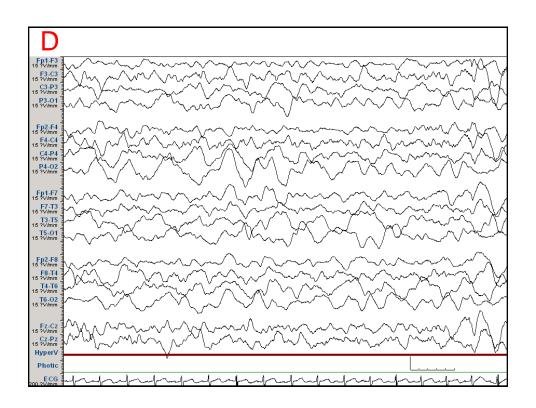
QUIZ?

1. ข้อใดเป็น EEG ของผู้เข้าร่วมประชุมในขณะนี้

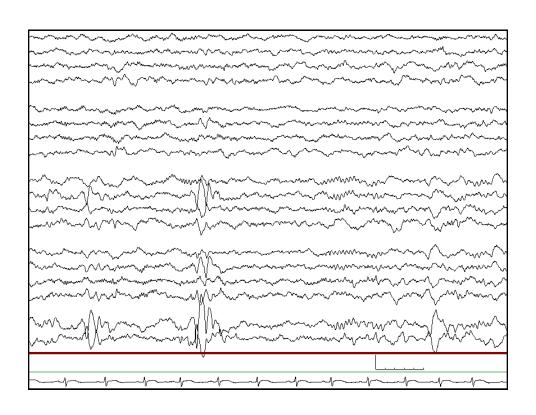






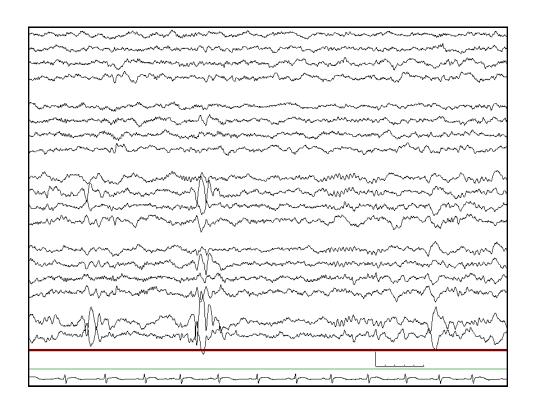


2. จงตอบคำถาม 2 ข้อจาก EEG ต่อไปนี้



2.1) Montage?

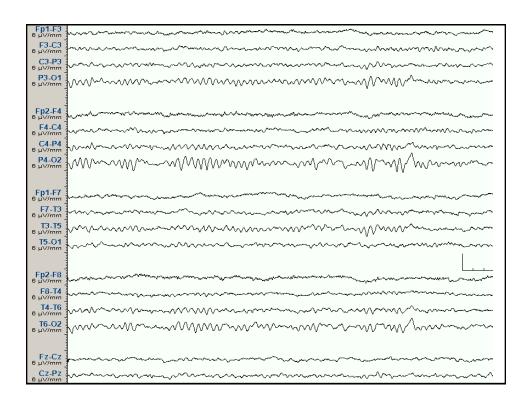
- A. Referential montage
- B. AP bipolar montage
- C. Coronal bipolar montage
- D. Dejavu montage



2.2) patient's state?

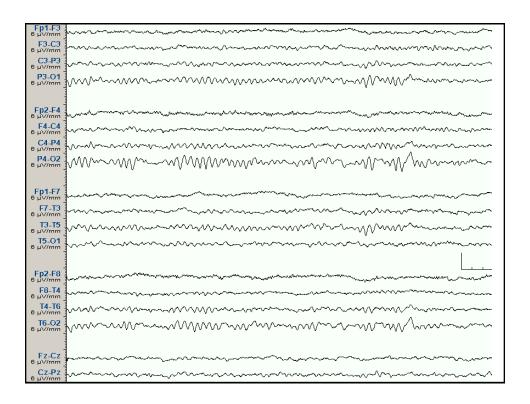
- A. Awake
- B. Drowsy
- C. Sleep stage 2
- D. Sleep stage 3-4
- E. Sleep stage 5

3. จงตอบคำถาม 2 ข้อจาก EEG ต่อไปนี้



3.1) patient's state?

- A. Awake
- B. Drowsy
- C. Sleep stage 2
- D. Sleep stage 3-4
- E. Sleep stage 5



3.2) patient's age?

- A. 2 months
- B. 1 year
- C. 4 years
- D. 9 years
- E. 30 years

Thank you for your attention

