Identification and Validation of a CCEP-Derived Computational Marker of the Epileptogenic Zone

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Introduction

Medically Refractory Epilepsy

 Medically refractory epilepsy affects 20M globally and accounts for 80% of \$16B total epilepsy spend.

Standard of Care & Innovation

- SOC is surgical removal of the epileptogenic zone (EZ). EZ localization is a challenge, with surgery success ranging from 30-70%.
- Actively measured CCEP data is novel compared to current passive localization (EEG, MRI). Computational EZ localization is also novel.
- Current EZ localization focuses on individual channels. CCEPs allow for understanding and analysis of the broader epileptogenic network.

Methods

Cortico-Cortical Evoked Potentials (CCEPs) actively measure neuronal connections through single pulse electrical stimulation (SPES) [1,2].

- We extracted node-based features from the CCEP waveform.
- We computed network features from the broader CCEP network.
- We trained a suite of machine learning models to localize the EZ.

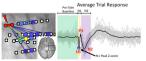


Figure 1.Left: CCEP Electodes Implants Right: Typical CCEP Response [3]

Data

This CCEP data consists of 40 patients and was collected and processed from the JHU Department of Neurology.

Results

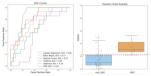


Figure :

Left: ROC Curves for 6 ML models. Random Forest AUC = 0.87. Right: Random Forest Model Boxplot, showing clear separation between non-EZ (blue) and EZ (orange). Sensitivity = 0.92, Specificity = 0.75



Figure 3.

Unsuccessful Surgical Outcome. Clinicians struggled with localization. Our model predictions differed from clinical prediction, perhaps indicating the true EZ. (green = clinically-predicted, red = model-predicted)

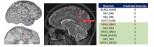


Figure -

Unsuccessful Surgical Outcome. Clinicians identified lesion of interest but were not able to resect (red circle). Model predicted all key areas of interest. (right, green = clinically-predicted, bold = model-predicted)

Conclusion

- CCEPs have been used to map regions of brains, but they have never been used for EZ localization.
- We show that CCEP-based modeling (Random Forest model) can be a promising tool to aid passive EEG / MRI EZ localization methods.
- AUC = 0.87, Sensitivity = 0.92, Specificity = 0.75. Boxplot shows that the RF can differentiate between EZ (orange) and non-EZ (blue).
- Limitations include EZ overestimation in ground truth labels, sparse sampling networks, and inter-patient variability.
- These can be overcome by increasing sample size and standardizing CCEP measurement guidelines.

References

[1] (Bitto, J. 40710). Exercited Structure Mapping VM Starse-EGD Structures. Journal of clear surruphysiology of reliabilitation of the Antennes Interworks/supping Structures (SS) (1): 51-14.
[2] Haasak M, J. Sanka R, Haltamantes R, Noose E, Theatagenes R, Panz Z, Olimora T, Horingey K, Byagman W, and Karo DD, Maccanitat of the Antennes of the obstacle and patient in surgement of a start or 2019. Ascendaria of the out-of-and evolution in the obstacle and and anti-start factor clear starts international starts and an obstacle and starts in the plantes MA. All starts Const. R 1, King J. (2): 2019. Openhanderia clamber of nodes plantes in a starts of antipation of antipatient in the obstacle plantes and antipatient in the obstacle plantes in the anness internation of applications of antipatient in the obstacle plantes in the international starts and plantes in the obstacle and antipatient in the obstacle and plantes in the international starts and plantes in the obstacle and antipatient in the obstacle and plantes in the international starts and plantes in the obstacle and plantesplantes maintain international starts and antipatient in the international starts and plantes in the obstacle and plantesplantes maintain import region Hamas theiro mapping. 2013; e173–418.