Al in Epilepsy: 2024 Source Localization

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- Faculty @ UTHouston since 2014
- NIH-funded neuroimaging laboratory





Role of Epilepsy Surgery

- 1/900 kids have medically refractory epilepsy; they wait until Adult epilepsy conference to be presented?
- Goals of presurgical evaluation:
 - Is patient a "good candidate" for resection?
 - localize or at least lateralize the Epileptogenic Zone (EZ)
 - Identify functional areas and proximity to EZ
 - determine need/location of invasive monitoring (iEEG, SEEG)
- Goals of resection:
 - Seizure freedom or reduction in seizure burden
 - Spare eloquent cortex as much as possible
 - Disrupt/reverse developmental arrest or regression, to improve long-term developmental outcome





Pediatric Epileptologists

Jeremy Lankford, MD





Gretchen Von Allmen, MD

Michael Watkins, MD PhD



Shelley Varnado, MD

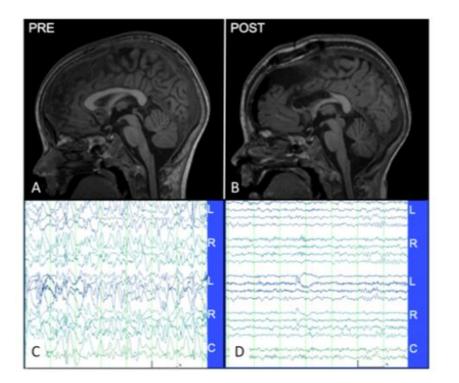


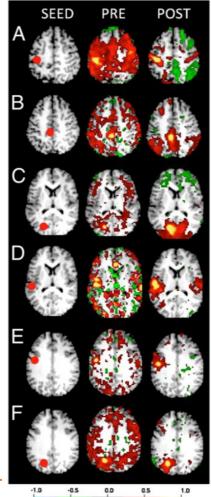
Indira Kommuru, MD





Epilepsy is a disorder of Brain Networks









Pizoli/Shah, et al, PNAS, 2011

Resting state signal latency predicts laterality in pediatric medically refractory temporal lobe epilepsy

Manish N. Shah¹ • Anish Mitra³ • Manu S. Goyal³ • Abraham Z. Snyder^{3,4} • Jing Zhang¹ • Joshua S. Shimony³ • David D. Limbrick² • Marcus E. Raichle^{3,4,5,6} • Matthew D. Smyth²

A GROUP B LEFT -0.05 0.05 C RIGHT seconds



2018



Role of Resting State MRI Temporal Latency in Refractory Pediatric Extratemporal Epilepsy Lateralization

Manish N. Shah, MD,^{1*} Ryan D. Nguyen, BS,¹ Ludovic P. Pao, BS,¹ Liang Zhu, PhD,² Travis S. CreveCoeur, BS,³ Anish Mitra, PhD,⁴ and Matthew D. Smyth, MD³

FIGURE 1: Two exemplary lesionectomy case preoperative latency analysis images qualitatively compared with postoperative structural MRI. Patient #8 underwent a left superior frontal lesion resection. Patient #31 underwent a left frontal polar resection. Type I error $\alpha_c = 0.001$ cutoff was used in both patient latency images. Blue voxels are significantly early and red voxels are significantly late.

Lesionectomy rsMRI Latency Analysis (a) Preop Latency Z-score Map (b) Postop Structural MRI Patient #8 Patient #31



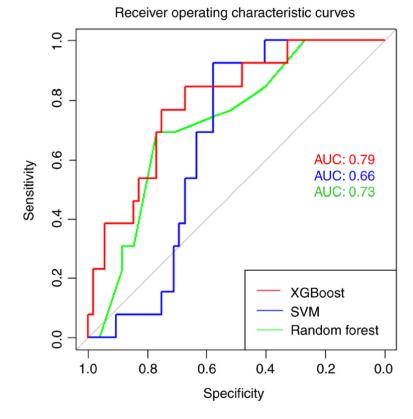


2018

Al Classifier Comparison (2021)

A comparison of machine learning classifiers for pediatric epilepsy using resting-state functional MRI latency data

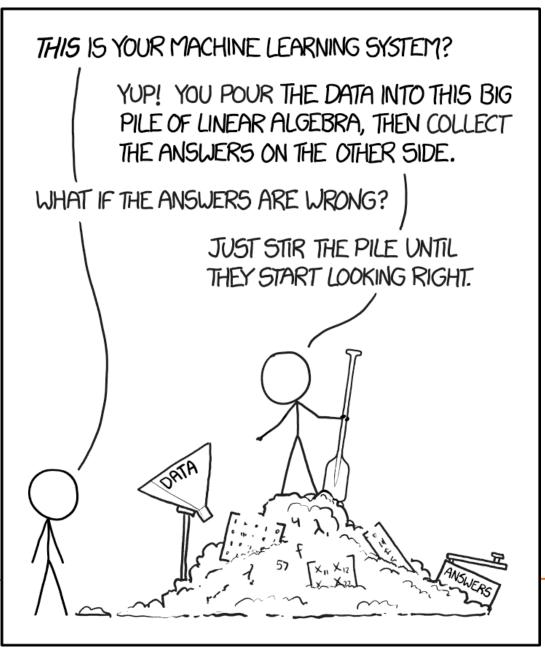
RYAN D. NGUYEN¹, MATTHEW D. SMYTH², LIANG ZHU³, LUDOVIC P. PAO¹, SHANNON K. SWISHER¹, EMMETT H. KENNADY¹, ANISH MITRA⁴, RAJAN P. PATEL⁵, JEREMY E. LANKFORD⁶, GRETCHEN VON ALLMEN⁶, MICHAEL W. WATKINS⁶, MICHAEL E. FUNKE⁶ and MANISH N. SHAH¹







GIGO (XKCD)

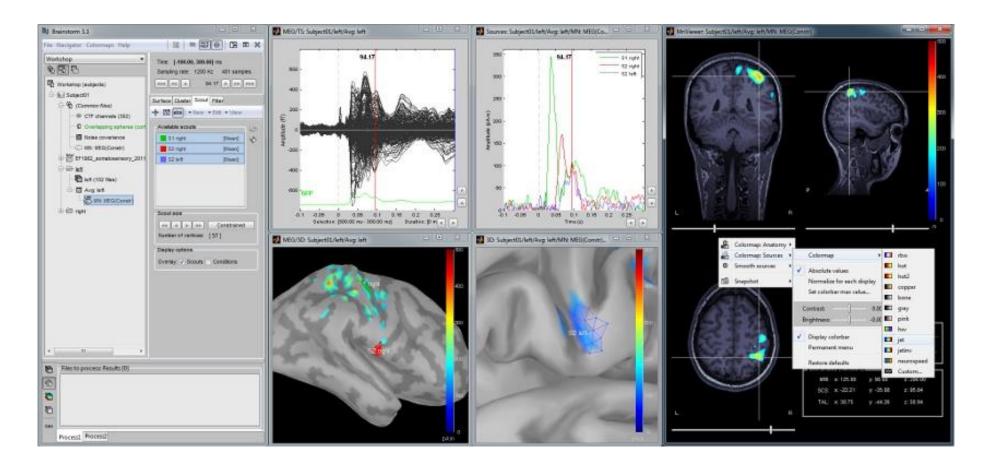






Tadel F, Baillet S, Mosher JC, Pantazis D, Leahy RM (2011) Brainstorm: A User-Friendly Application for MEG/EEG Analysis Computational Intelligence and Neuroscience, vol. 2011, ID 879716

Source Localization with Brainstorm







Analysis Overview

Data Importing

- 1) Import subject anatomy
- 2) Align MEG data with anatomy
- 3) Extract epileptic MEG activity

Source Localization

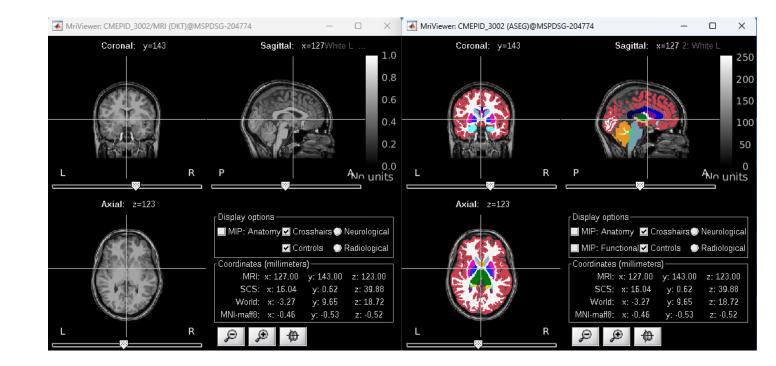
- 1) Generate head model from subject anatomy
 - 2) Compute sources
 - 3) Model sources as dipoles





Data Import: Subject Anatomy

 Load Freesurfer segmentations into Brainstorm.

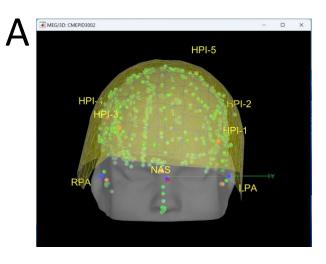


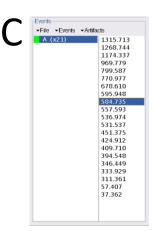


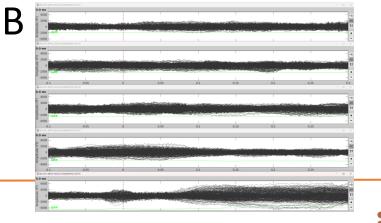


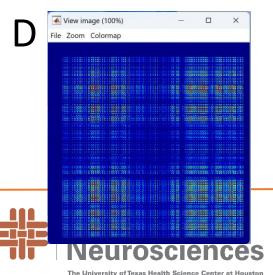
Data Import: MEG Data

- Import & anatomically coregister MEG data.
 - Sensor position (A)
 - Recordings (B)
 - Epileptic spike annotations (C)
 - Use first 10s for noise estimation (D)





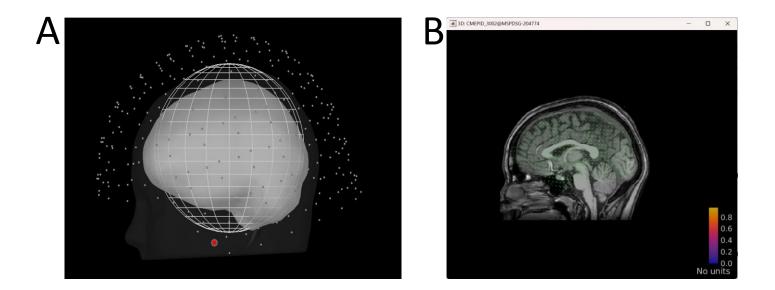






Source Localization: Head Modeling

- Approximate brain, skull, and scalp as series of overlapping spheres. (A)
- Approximate source space as 3D grid of vectors dispersed throughout brain (B)



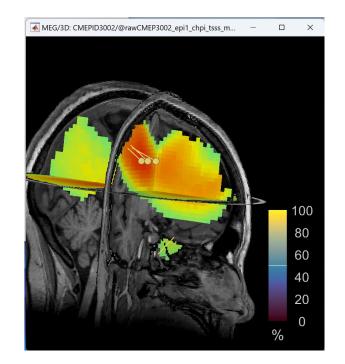




Source Localization: *Source Computation & Dipole Production*

• Evaluate source space for activity during epileptic events.

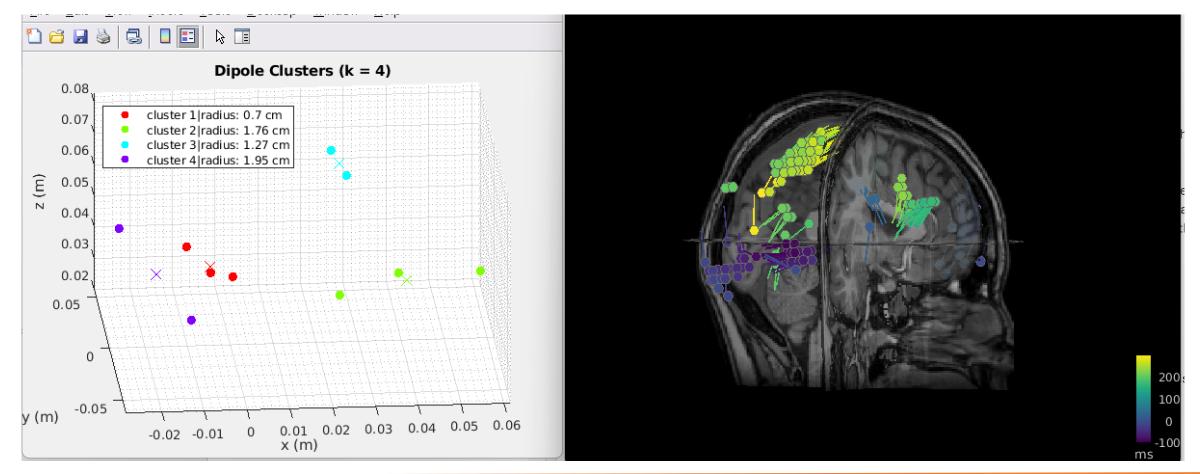
• Estimate dipoles that best fit the source space during epileptic events.







Final Product (spatial and temporal clustering)







Future Directions

- More Sophisticated Clustering
 Al
- More Data
- More Outcomes





Thanks ANT CONGRES

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