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## WHAT DOES THE BRAIN MAPPING TELL THE PSYCHIATRIST IN DAILY PRACTISE?

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In order for the brain mapping to be useful for the psychiatrist in daily practice, it should reveal a Z Score Mapping which would allow the clinician to make a comparison with the normal age group. The brain mapping should also reveal a regional interconnectivity map. Production of the brain mapping is also a crucial point: it should imitate the reading of a standard EEG. Frequency analysis should be favored since other analysis methods may be out of a standard clinician's comfort zone.

One significant area where brain mapping is expected to bring revolutionary advances is the diagnosis of psychiatric disorders. 4 major patterns have been detected in 4 major psychiatric syndromes: Alpha wave increase in the frontal lobe is significant in depression. Generalized increase of beta waves in anxiety disorders may be informative for the clinician. An increase in delta and theta waves is seen in dementia. An intermixed increase of slow, very slow and fast waves is valuable as a diagnostic tool for schizophrenia.

Brain mapping may be an improvement on DSM diagnosis since it has the potential to enable the psychiatrist to identify the pathological electrophysiological activities in a psychiatric disorder. (McLoughlin et al., 2014; Miller, 2010). Studies of the biomarker trait of brain mapping in various psychiatric disorders has been promising so far. Significant progress have been made in disorders such as depression (Eyre et al., 2015; Leaver et al., 2015) , autism (Jann et al., 2015) and schizophrenia. (Taylor & Macdonald, 2012; Gur et al., 2002; Turetsky et al., 2007)

Regional connectivity put forward by statistical methods may reveal patterns that have genetic correlations. These potential endophenotypes will allow the psychiatrist to devise personalized treatment plans. (Moseley et al., 2015; Gardner et al., 2014; Di Martino et al., 2014) For instance, whole brain functional connectivity changes in children with Autism Spectrum Disorders and their

healthy siblings point to the fact that brain mapping is one promising approach to detect endophenotypes of psychiatric disorders. (Moseley et al., 2015)

Using a test dose and observing the effect of a drug via brain mapping may predict the success of a treatment modality. (Arns & Olbrich, 2014; Mucci et al., 2006; Saletu et al., 2006) Bioavailability of a drug is made up of components such as crossing the blood brain barrier, binding its receptor and causing the desired effect. Brain mapping and test dose studies together can give the clinician an accurate idea of the bioavailability of a drug. Previous studies indicate that changes in EEG waves and brain morphometry may be used as predictors of clinical response to interventions against ADHD (Arns & Olbrich, 2014), depression (Wade et al., 2015; Arns & Olbrich, 2014).

Finally, brain mapping may evolve into an objective method for the monitoring of psychiatric patients. The psychiatrist could observe the prognosis of a disorder in an evidence based fashion by using brain mapping at regular intervals.

In conclusion, brain mapping has implications for the diagnosis of psychiatric disorders, the detection of endophenotypes, predicting clinical response to the rapeutic interventions and the monitoring of psychiatric patients. Further research is necessary to better determine the potentials of brain mapping and make full use of brain mapping in the aforementioned areas of daily practice.

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