

# Frontal midline theta predicts diagnosis style in a medical similarity judgement task

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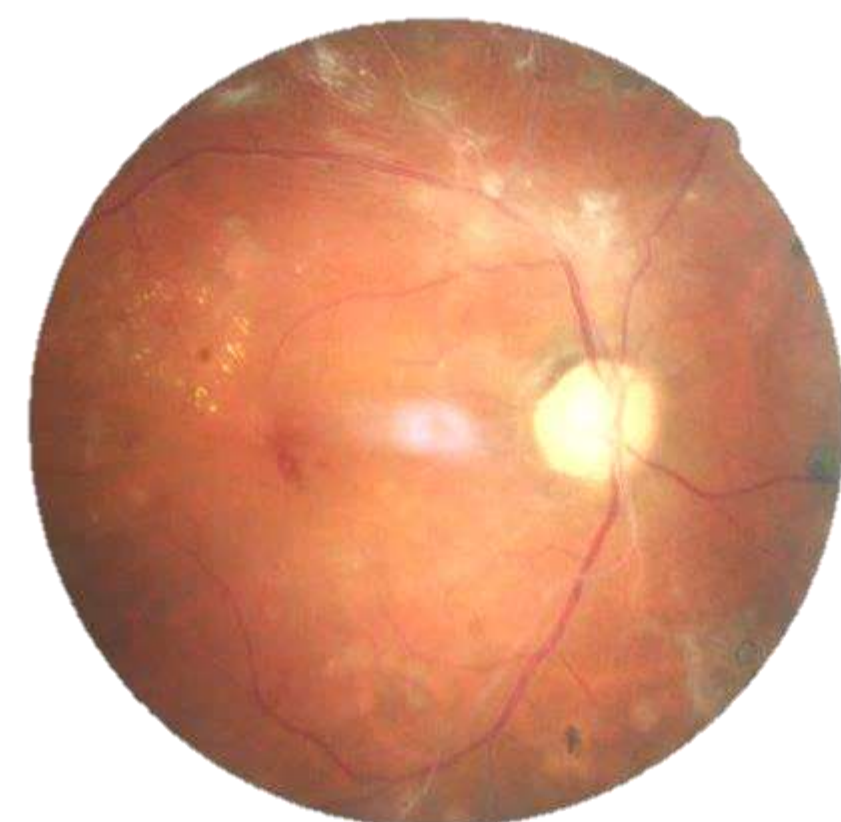
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## INTRODUCTION



Diabetic retinopathy features<sup>1</sup>

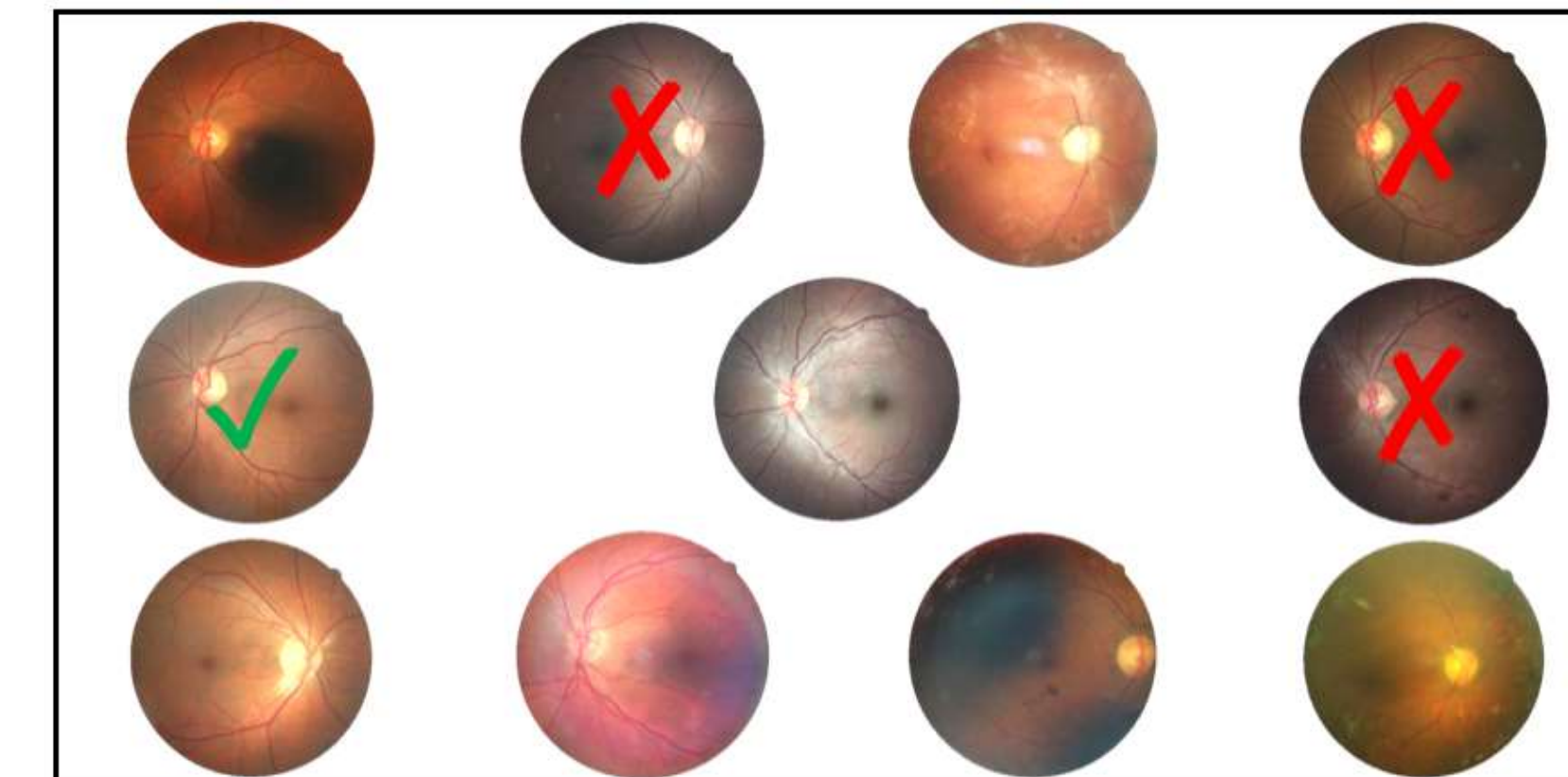
- Diabetic retinopathy is diagnosed via the examination of images
- Severity scale: none, mild, moderate, severe, proliferative
- Early-career MDs report low confidence in diagnosing diabetic retinopathy<sup>2</sup>. *Why?*

Rule-based  
learning  
(severity scale)

Implicit  
categorization  
(perceptual space)



## METHODS



Decision: Until response  
Pre-feedback: 400-600 ms  
Feedback: 1000 ms  
50 ms (Continue until correct)

The *similarity judgement task*

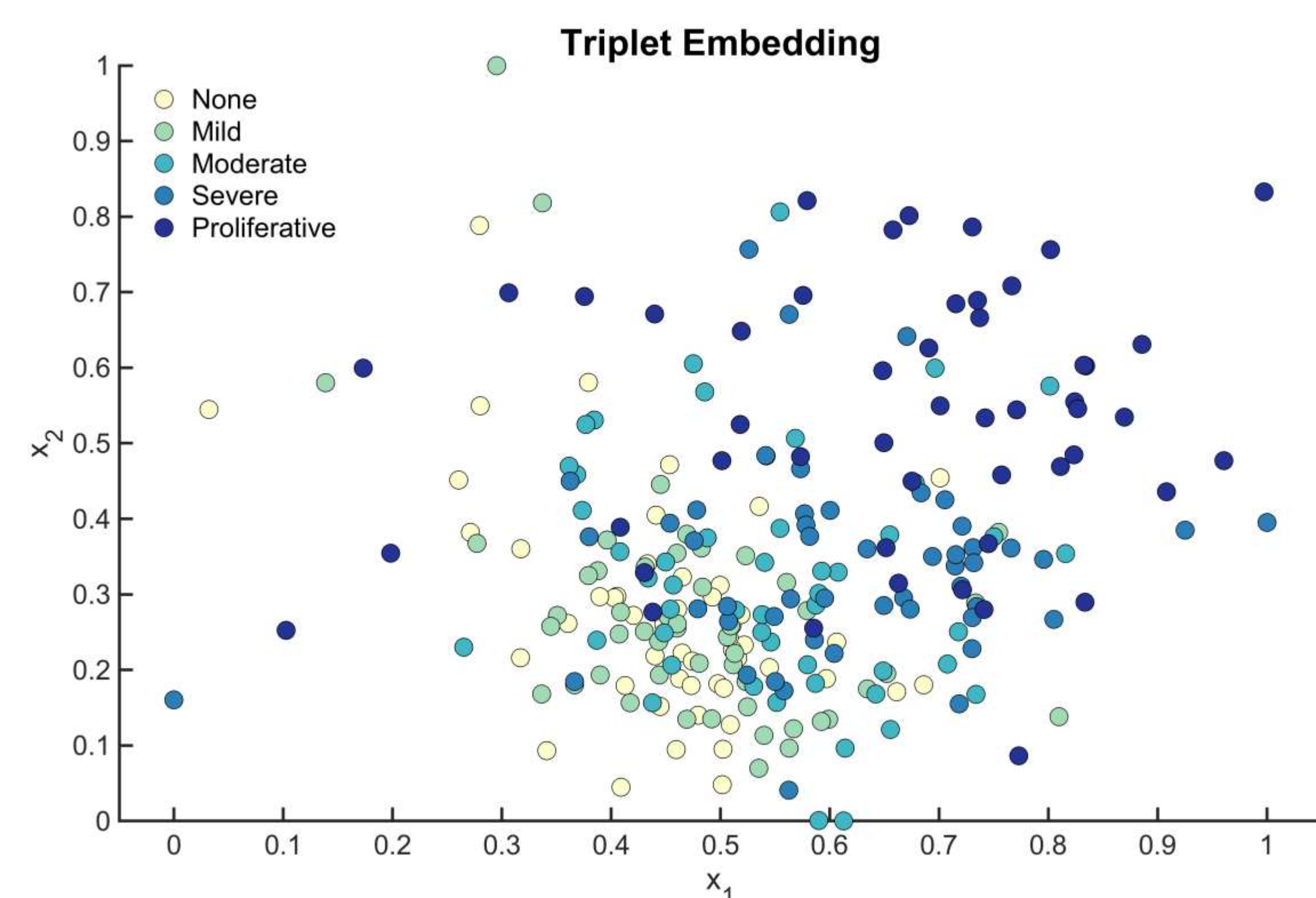
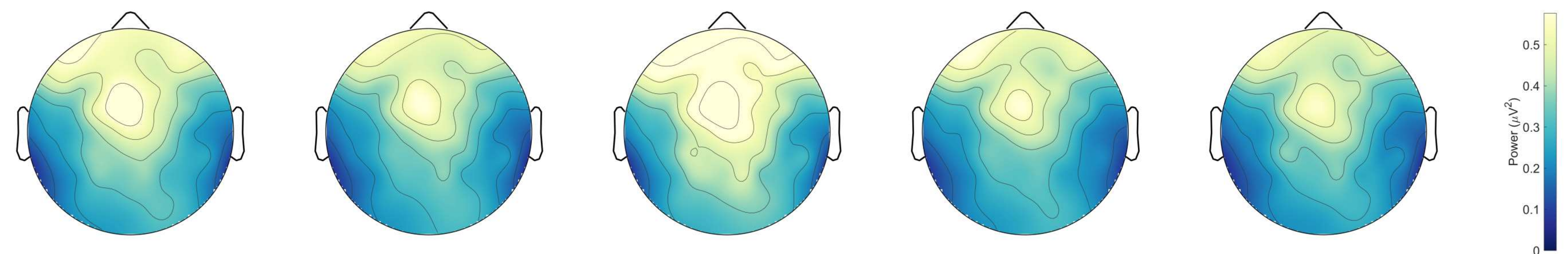
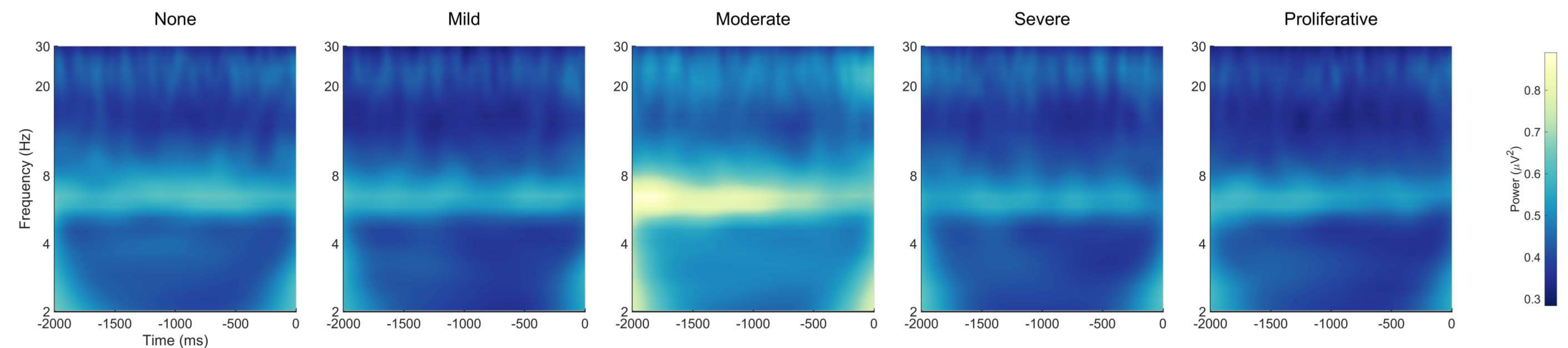
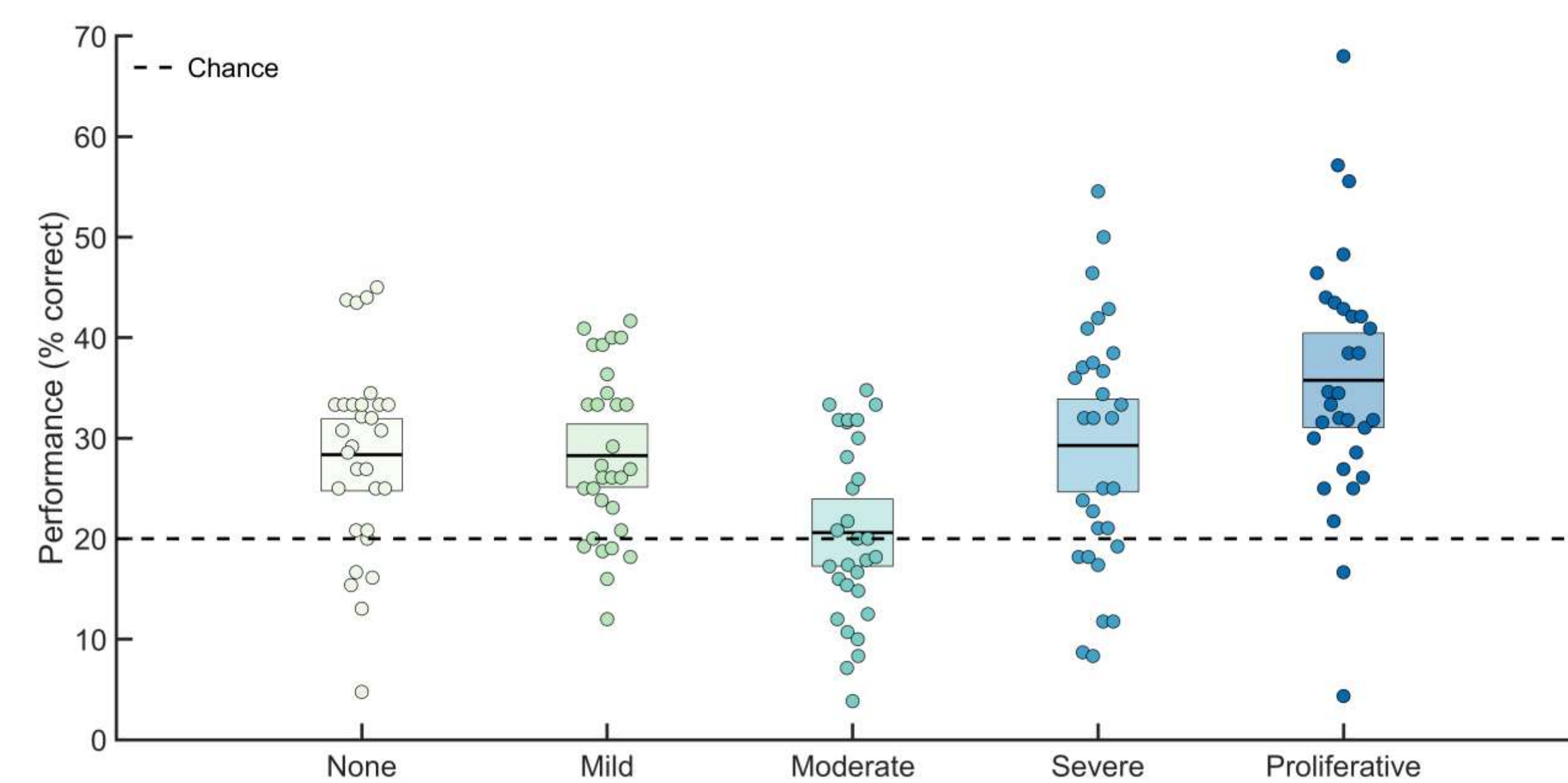
**Accuracy** (did the diagnosis match?)

**Triplets** (data of the form *A* is more similar to *B* than *C*)<sup>3</sup>

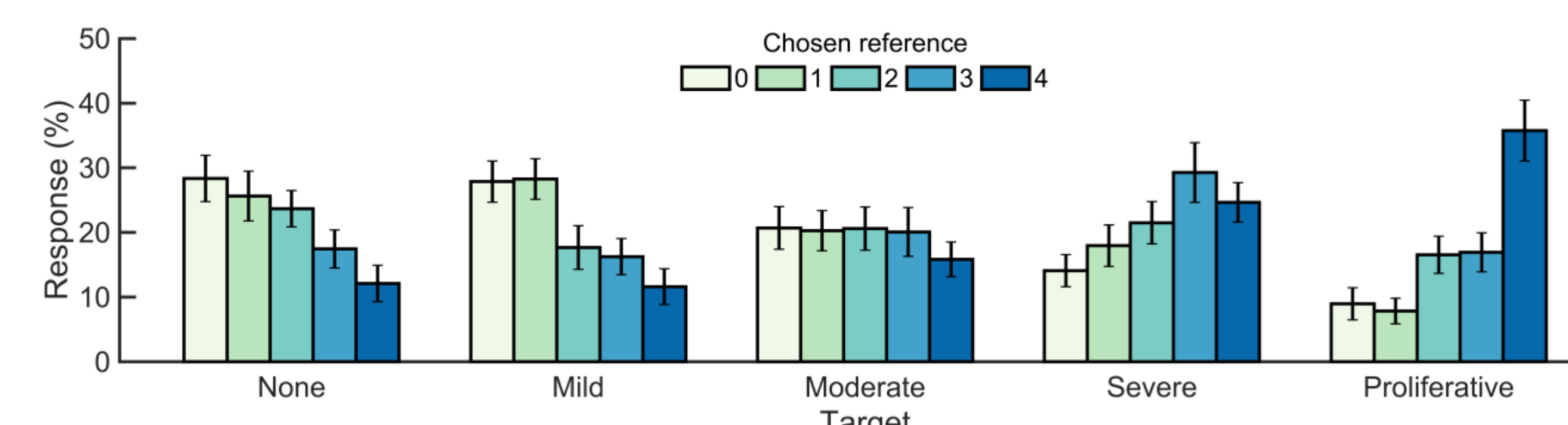
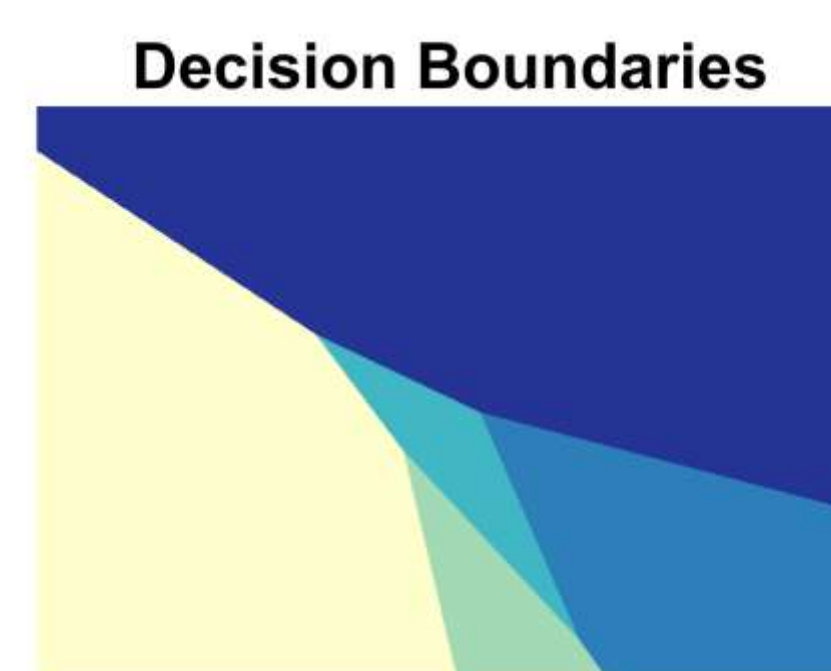
**Frontal midline theta** (EEG measure of cognitive control)<sup>4</sup>

Images and diagnoses from [www.kaggle.com/c/diabetic-retinopathy-detection](http://www.kaggle.com/c/diabetic-retinopathy-detection)  
N = 31, 8 M, 5 LH, Mean Age: 22.0, 95% CI [19.5, 24.5]

## RESULTS



LDA



## Conclusions

- Retinopathy diagnosis is challenging due to *perceptual overlap*
- Perceptual overlap is accompanied by enhanced cognitive control (as indexed by FMT)
- Next step: task optimization<sup>5</sup>

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