RNS (M=49.75 SD=11.62; t(3)=-2.01, p = 0.069). No significant differences were evident on seizure worry, energy/fatigue, medication effects, and social functioning domains of QoLiE-31 before and after RNS treatment. Conclusions: These pilot study results suggest low levels of depression with this population post-RNS implantation. Additionally, there is preliminary evidence to suggest improved patient-rated cognitive functioning and overall quality of life. While this is a small study population, the results have important implications for patients with intractable epilepsy, even with those form who surgical resection may not be possible. Future studies with large enough samples to examine moderating and mediating factors to mood and quality of life changes post-RNS will be important.

Categories: Neurostimulation/Neuromodulation

**Keyword 1:** neurostimulation

Keyword 2: epilepsy / seizure disorders -

surgical treatment

Keyword 3: mood disorders

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## 76 More Than One Way to Skin a Cortex: A Meta-Analysis Comparing Neuroimaging and Personality Testing

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**Objective:** Neuroimaging is commonly used in medicine to identify neuropathology and is widely considered to be a reliable and valid diagnostic modality. Personality testing is commonly used to identify psychopathology but is generally perceived to have less clinical efficacy than neuroimaging. The purpose of the current study was to compare the clinical efficacy of personality tests to neuroimaging using meta-analysis.

Participants and Methods: Multiple databases were searched for original research utilizing either personality tests or neuroimaging. The search interval covered articles published within the last 10 years. Studies were selected based on the criteria of having a clinical group and a healthy control sample with a reported diagnostic outcome. For this meta-analysis, neuroimaging studies focusing on diagnostic utility for Alzheimer's dementia were included. Personality testing studies were included if they broadly reported a clinical outcome, due to fewer studies in this area. Studies were coded using a complex multi-comparison, outcome, and subgroup schema, and were analyzed under random-effects modeling.

Results: Out of the 240 studies identified for the personality domain, 13 were selected for the meta-analysis. Out of 6522 studies identified for the neuroimaging domain, 21 studies were selected for the meta-analysis. Results indicated a significant difference between the neuroimaging and personality testing effect sizes. Specifically, neuroimaging [Hedge's g = -1.623, 95%CI = -1.973 to -1.273, p<.001] yielded a greater effect size in comparison to the personality tests effect size [Hedge's q = -0.658, 95% CI = -0.751 to -0.565, p<.001]. The effect size for clinical utility of neuroimaging was close to double that of the effect for personality tests

**Conclusions:** Findings from this meta-analysis showed a significant difference in the effect sizes obtained from neuroimaging studies compared to the studies of personality tests. While both neuroimaging and personality testing demonstrated meaningful clinical utility, neuroimaging studied had a larger effect size.

Categories: Other Keyword 1: personality

diagnostic utility.

**Keyword 2:** neuroimaging: functional **Correspondence:** Paola Asencio-Ortiz The

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77 Comparing the Performance of Videoconference and In-Person Neuropsychological Test Administration