Unraveling Brain Weaknesses in Learning Disorders Combining Multimodal Imaging and Machine Learning



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DSM-5 (Diagnostic and Statistical Manual of Mental Disorders, fifth edition 2013)



Intellectual Disability

Communication Disorders

Attention-Deficit Hyperactivity Disorder

Autism Spectrum Disorders

Specific Learning Disorders

Motor Disorders

Heterogeneous conditions characterized by developmental deficits in a variety of domains: social, cognition, motor, language.

DSM-5 (Diagnostic and Statistical Manual of Mental Disorders, fifth edition 2013)



- Tic Disorders

DSM-5 (Diagnostic and Statistical Manual of Mental Disorders, fifth edition 2013)



- Tic Disorders

Major Explanatory Theories

Developmental Dyslexia

- Phonological Theory

impairment in the representation, storage and/or retrieval of speech sounds, then affecting grapheme-phoneme correspondences

Language network

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Schoffelen et al. PNAS 2017
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- Cerebellar Theory

cerebellum is dysfunctional, affecting articulation (then deficient phonological representations) and capacity to automatize (affecting graphemephoneme correspondences)



Major Explanatory Theories

Developmental Coordination Disorder

- Internal Modeling Deficit Theory difficulty representing predictive models of action



S1

PPC

Major Explanatory Theories

Developmental Dyslexia & Developmental Coordination Disorder

- Procedural Learning Deficit Theory

impairments of the procedural learning system, which subserves the learning of new, and the control of established, sensorimotor and cognitive skills, rules and habits



Major Explanatory Theories

Developmental Dyslexia & Developmental Coordination Disorder

- Procedural Learning Deficit Theory



Major Explanatory Theories

Developmental Dyslexia & Developmental Coordination Disorder

- Procedural Learning Deficit Theory

- would explain deficits in a range of motor and perceptual skills in DCD children as well as secondary motor symptoms in DD children
- may also explain difficulties in DD children to acquire rule-based procedures that govern language ('the mental grammar'), including aspects of phonology

A number of issues

Developmental Dyslexia & Developmental Coordination Disorder

- difficult to validate or invalidate these hypotheses for a number of reasons:

disorders often studied independently neuroimaging standards not always respected multimodal brain imaging data poorly exploited varying diagnostic/exclusion criteria (overlap between DD and DCD) small sample size

The DYSTAC-MAP Project

Aix-Marseille Université (LNC, PSYCLE, CHU Timone-Enfants) Université de Toulouse (ToNIC, CHU de Toulouse-Enfants)							
TYP children n=42 ←	DD children n=45	DCD childr n=20 [8-12 yo.]	en	COM children n=29	NF1 children n=38		
Siemens Magnetom Skyra 3.0 T MRI scanner, 32-channel head coilPhilips Achieva dStream 3.0 T MRI scanner, 32-channel head coilRs-fMRI (EPI sequence, 3mm iso.)Diffusion-weighted (2 mm iso, 34 dir.)T1-weighted (MPRAGE, 1mm iso)Fluid attenuated inversion recovery + neuropsychological (memory, attention) and motor control assessment							
GM/WM volu seed-to-v	mes, correlation (voxels), fALFF, FA	local, global, , MD,		Univariate (GLM) (SVM, MKL	and multivariate) modeling		



T1w MRI images

- sample-specific tissue probability maps (Cerebr-o-Matic toolbox)
 spatial normalization and segmentation in grey matter, white matter and cerebrospinal fluid (CAT toolbox)
- GM/WM volumes corrected for total intracranial volume

rs-fMRI images

- realignment & unwarp, slicetiming correction, spatial normalization, outliers detection, smoothing (SPM & ART toolboxes)
 aCompCor denoising (CONN
- toolbox)

- fraction of amplitude of low frequency fluctuations (fALFF) -> local activity at rest
- local correlation -> local coherence
- global correlation -> network centrality



└--> GMv, WMv, fALFF, l_corr, g_corr

GENERAL LINEAR MODEL

Contrast treatment: at least one pathological group different from the
 typically developing group (TIV, sex, centre of acquisition and age as nuisance variables) -> a set of "pathological areas" (feature selection)

► GLM





falff







Nemmi, Cignetti et al. *in progress*



Machine learning framework



Machine learning framework



Machine learning framework



+

Support Vector Machine

Find the optimal hyperplane separating the data, that is the one which presents the largest margin

$$f(x_i) = \langle w, x_i \rangle + b$$

$$\langle w, x_i \rangle + b = 0$$

How? by solving the optimization problem

$$\begin{cases} \min_{w} \frac{1}{2} \|w\|^2 \\ \langle w, x_i \rangle + b \ge 1 \end{cases}$$
 Primal formulation



$$f(x_i) = \sum_{i=1}^{n} \alpha_i K(x, x_i) + b$$
 Dual formulation



SUPPORT VECTOR CLASSIFICATION

sklearn.svm.LinearSVC: multiclass (one vs all), stratified 10-fold cross-validation, 10 repetitions -> 100 folds sklearn.feature_selection.SelectFromModel: selects only the 'most important' features (clusters) and then fits again balanced accuracy (the average of sensitivity and specificity) 1000 permutations of the training labels

GENERALIZED LEAST SQUARES MODEL

if model significant for clusters selected more than 66 times out of 100

learn

R-package 'nlme': assessed group (DD, DCD, COM), cluster, and group x cluster interaction effects

SVM



All functional indices, either combined or not, led to a performance significantly different from chance level, while structural indices did not

► GLS



DD are different from DCD and COM wrt connectivity





► GLS





Cerebellar Parcellation Estimated by Intrinsic Functional Connectivity



Striatal Parcellation Estimated by Intrinsic Functional Connectivity



Winner-takes-all algorithm that associated each voxel in the cerebellum and striatum with a cortical network

Yeo et al. J Neurophysiol 2011 ; Buckner et al. J Neurophysiol 2011 ; Choi et al. J Neurophysiol 2012

► DATA PROCESSING

 Pre-processing: 1/ realignment & unwarp, 2/ slice-timing correction, 3/ direct normalization to functional MNI space, 4/ detection of functional outliers (motion threshold > 0.9 mm ; global signal z-value threshold > 5), 5/ smoothing (8-mm kernel) Denoising: aCompCor
 (5 PCAs for WM and CSF
 each), confound
 regression (12
 realignment parameters
 and outliers),
 detrending, band-pass
 filtering (.008-.09 Hz)

Seed-based approach:

functional connectivity (correlation) between seeds and every location in the brain



Cignetti et al. submitted eLife

► DATA PROCESSING

14 connectivity maps per subject







Better segregation of cortico-cerebellar networks than cortico-striatal networks



Cignetti et al. submitted eLife

Multivariate_Multiple kernel learning (MKL)



Includes subset of features, and enables evaluating which features have predictive information

Only some kernels have non-null contribution d_m to the final decision function (sparse solution)

Schrouff et al. Neuroinform 2013, 2018





Multivariate_Multiple kernel learning (MKL)

4-class problem (TYP, DD, DCD, COM) into 6 (4(4-1)/2)) binary learning problems

class binarization one vs. one

Model MKL	Balanced Accuracy (%)	True Positives / Total Positives	True Negatives / Total Negatives	AUC _{ROC}
[TYP] vs. [DD]	46.43 (p=0.72)	19/42	20/42	0.5
[TYP] vs. [DCD]	62.50 (<i>p</i> = 0.12)	13/20	12/20	0.66
[TYP] vs. [COM]	68.97 (<i>p</i> = 0.01)	21/29	19/29	0.67
[DD] vs. [DCD]	50 (p=0.53)	11/20	9/20	0.51
[DD] vs. [COM]	51.72 (p=0.44)	14/29	14/29	0.49
[DCD] vs. [COM]	50 (p=0.54)	10/20	10/20	0.48
[TYP] vs. [DCD-COM]	64.29 (<i>p</i> = 0.02)	28/42	26/42	0.70
[TYP] vs. [DD-COM]	52.38 (p=0.41)	24/42	20/42	0.58

Distinction between TYP and COM that remains unchanged when mixing COM with DCD only → BRAIN ABNORMALITIES AS A RESULT OF DCD PHENOTYPE

Cignetti et al. submitted eLife

Multivariate_Multiple kernel learning (MKL)

Model MKL [TYP] vs. [DCD-COM]			Model MKL [TYP] vs. [COM]			
ROI#	d _m contribution (%)	Expected Ranking	ROI#	d _m contribution (%)	Expected Ranking	
cereb7	32.2299	13.9286	cereb7	48.5085	14	
cereb4	25.2479	12.9762	cereb4	17.4247	12.2308	
stria6	20.5977	12	stria6	14.9683	12.0385	
cereb2	15.3609	11.0714	cereb1	8.6784	10.3846	
cereb3	4.9949	9.6905	stria7	6.7463	10.2308	
cereb6	1.0060	3.6905	cereb3	2.9550	5.7692	
stria4	0.3156	2.3571	stria4	0.4655	1.8846	
stria7	0.1627	1.6190	cereb2	0.2533	0.7308	
stria5	0.0844	0.4048	cereb5	0	0	
cereb1	0	0	cereb6	0	0	
cereb5	0	0	stria1	0	0	
stria1	0	0	stria2	0	0	
stria2	0	0	stria3	0	0	
stria3	0	0	stria5	0	0	

Kernels that contributed the most to the decision function included default-mode and sensorimotor corticocerebellar and frontoparietal corticostriatal iFC maps

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To sum up ...

- Abnormalities in function but not in structure in DD and/or DCD learning disorders
 - Complex pattern of altered activity/connectivity including temporal, parietal, frontal, cerebellar and striatal regions



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- Abnormalities in function but not in structure in DD and/or DCD learning disorders
 - Complex pattern of altered activity/connectivity including temporal, parietal, frontal, cerebellar and striatal regions



• A subset of functional cortico-striatal (frontoparietal) and cortico-cerebellar (somatomotor, default-mode) circuits impaired mainly in DCD

Neurofibromatosis type 1 (NF1) is an autosomal dominant genetic disorder. It is one of the most common genetic disorder, with a prevalence of 1 in 3500



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due to the mutation of a gene (neurofibromin 1) on chromosome 17

dysregulates the production of the protein neurofibromin, which is a tumor suppressor (prevent cells from growing and dividing too rapidly or in an uncontrolled way)



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due to the mutation of a gene (neurofibromin 1) on chromosome 17

dysregulates the production of the protein neurofibromin, which is implicated in synaptic plasticity and thus memory and learning



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Brain deficits

(tumor, optic nerve glioma)

Unidentified bright objects

(hyperintensities in T2-weighted, mostly in cerebellum, brain stem, thalamus and basal ganglia)

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(hyperintensities in T2-weighted, mostly in cerebellum, brain stem, thalamus and basal ganglia) 18 out of 38 NF1 children included in the study



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(attention, working memory, phonological processing, visuo-spatial processing, social cognition ...)

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Learning deficits

(mathematics, reading)

Motor deficits

~50% prevalence



Hypothetical links between the different levels of description

Hachon et al. Brain Dev 2011





2D matrix with subjects × voxels dimensions



2D matrix with subjects × voxels dimensions

Variance thresholding: Elimination of the 25% of features with the lowest variance between subjects

Relieff: Select the most relevant features calculating the distance of the intra and interclass cases in feature space (elimination if distance intraclass ≈ distance interclass)

Spatial clustering: contiguous voxels were assigned the same cluster



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Merging of modalities

Subset selection based on correlation





55 (±2) subjects out of 80 Acc. = 0.69 95%CI [0.66–0.70] Spec. = 0.78 95%CI [0.72–0.80] Sens. = 0.61 95%CI [0.57–0.65] p values = .0001– .05, median = 0.01

65 (±2) subjects out of 80 Acc. = 0.82 95%CI [0.80–0.84] Spec. = 0.88 95%CI [0.86–0.90] Sens. = 0.75 95%CI [0.73–0.77] p values = .00001– .00001, median = 0.00001 69 (±1) subjects out of 80 Acc. = 0.86 95%CI [0.85–0.87] Spec. = 0.89 95%CI [0.87–0.90] Sens. = 0.8395%CI [0.80–0.86] p values = .00001-.00001, median = .00001









 $50 (\pm 4)$ subjects $45 (\pm 2)$ subjectsout of 80out of 80Acc. = 0.63Acc. = 0.5695%CI [0.59-0.65]95%CI [0.54-0.58]p values = .01-.3,p values = .05-.7,median = 0.1median = 0.3





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STRUCTURAL MODEL

68 (±2) subjects out of 80

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52 (±3) subjects Acc. = 0.6495%CI [0.62–0.67] Spec. = 0.68 95%CI [0.64–0.72] Sens. = 0.61 95%CI [0.55–0.65] p values = .001-.2,median = 0.03

loca

COMPLETE MODEL

65 (±3) subjects out of 80 Acc. = 0.81 95%CI [0.79–0.84] Spec. = 0.85 95%CI [0.81-0.88] Sens. = 0.7795%CI [0.75-0.80] p values .00001-.00001, median = 0.00001



The MRI signature of NF1 brain pathology is a combination of gray and white matter abnormalities



Diffuse microstructural abnormalities, possibly related to variations in the barriers that restrict the motion of water, such as cell membranes



Neural substrates of motor and learning deficits different in NF1 (structure) and learning disorders (function) ; NF1 cannot serve as a 'genetic model' of learning disorders

Team\$/People

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