

Improving reliability, replicability and interpretability of neuroimaging research – bridging neuroimaging and underlying biology

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November 7th, 2019

HELMHOLTZ

RESEARCH FOR GRAND CHALLENGES



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Function and dysfunction

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25 PhD
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Outline

1. **Reproducibility crisis: Why do we need to think more about our neuroimaging analysis methods**
2. **What are some of the reasons for this crisis**
3. **How can we do better**

WHY DO WE NEED TO THINK MORE ABOUT OUR METHODS?

Why do we need to think more about our methods?

No Support for Historical Candidate Gene or Candidate Gene-by-Interaction Hypotheses for Major Depression Across Multiple Large Samples

Richard Border, M.A., Emma C. Johnson, Ph.D., Luke M. Evans, Ph.D., Andrew Smolen, Ph.D., Noah Berley, Patrick F. Sullivan, M.D., Matthew C. Keller, Ph.D.

Objective: Interest in candidate gene and candidate gene-by-environment interaction hypotheses regarding major depressive disorder remains strong despite controversy surrounding the validity of previous findings. In response to this controversy, the present investigation empirically identified 18 candidate genes for depression that have been studied 10 or more times and examined evidence for their relevance to depression phenotypes.

Methods: Utilizing data from large population-based and case-control samples (Ns ranging from 62,138 to 443,264 across subsamples), the authors conducted a series of pre-registered analyses examining candidate gene polymorphism main effects, polymorphism-by-environment interactions, and gene-level effects across a number of operational definitions of depression (e.g., lifetime diagnosis, current severity, episode recurrence) and environmental moderators (e.g., sexual or physical abuse during childhood, socioeconomic adversity).

Results: No clear evidence was found for any candidate gene polymorphism associations with depression phenotypes or any polymorphism-by-environment moderator effects. As a set, depression candidate genes were no more associated with depression phenotypes than noncandidate genes. The authors demonstrate that phenotypic measurement error is unlikely to account for these null findings.

Conclusions: The study results do not support previous depression candidate gene findings, in which large genetic effects are frequently reported in samples orders of magnitude smaller than those examined here. Instead, the results suggest that early hypotheses about depression candidate genes were incorrect and that the large number of associations reported in the depression candidate gene literature are likely to be false positives.

AJP in Advance (doi: 10.1176/appi.ajp.2019.18070881)

ARTICLES

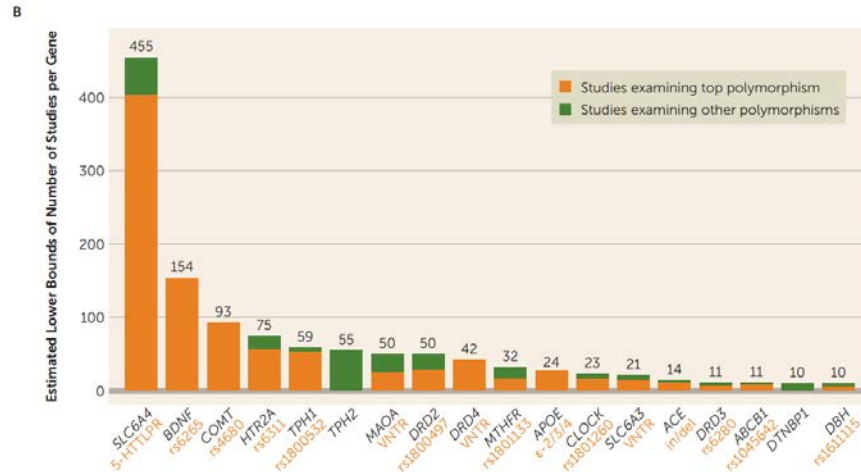
nature
neuroscience

5-HTTLPR polymorphism impacts human cingulate-amygdala interactions: a genetic susceptibility mechanism for depression

Lukas Pezawas^{1,3}, Andreas Meyer-Lindenberg^{1,3}, Emily M. Drabant¹, Beth A. Verchinski¹, Karen E. Munoz¹, Bhaskar S. Kolachana¹, Michael F. Egan¹, Venkata S. Mattay¹, Ahmad R. Hariri² & Daniel R. Weinberger¹

Carriers of the short allele of a functional 5' promoter polymorphism of the serotonin transporter gene have increased anxiety-related temperamental traits, increased amygdala reactivity and elevated risk of depression. Here, we used multimodal neuroimaging in a large sample of healthy human subjects to elucidate neural mechanisms underlying this complex genetic association. Morphometrical analyses showed reduced gray matter volume in short-allele carriers in limbic regions critical for processing of negative emotion, particularly perigenual cingulate and amygdala. Functional analysis of those regions during perceptual processing of fearful stimuli demonstrated tight coupling as a feedback circuit implicated in the extinction of negative affect. Short-allele carriers showed relative uncoupling of this circuit. Furthermore, the magnitude of coupling inversely predicted almost 30% of variation in temperamental anxiety. These genotype-related alterations in anatomy and function of an amygdala-cingulate feedback circuit critical for emotion regulation implicate a developmental, systems-level mechanism underlying normal emotional reactivity and genetic susceptibility for depression.

publishing Group <http://www.nature.com/natureneuroscience>



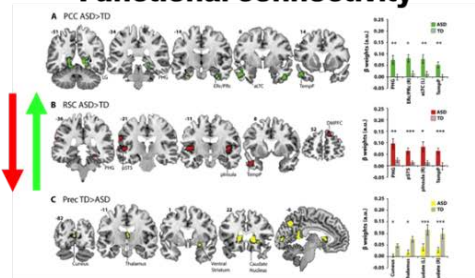
"This isn't just an explorer coming back from the Orient and claiming there are unicorns there. It's the explorer describing the life cycle of unicorns, what unicorns eat, all the different subspecies of unicorn, which cuts of unicorn meat are tastiest, and a blow-by-blow account of a wrestling match between unicorns and Bigfoot." by Scott Alexander

<https://slatestarcodex.com/2019/05/07/5-httlpr-a-pointed-review/>

Why do we need to think more about our methods?

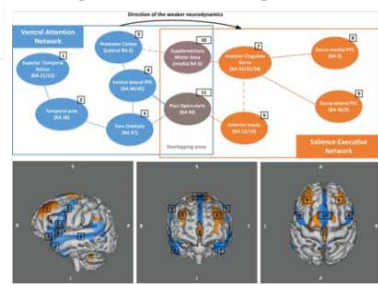
Increases, decreases and a mixture of both is reported in the literature

Functional connectivity



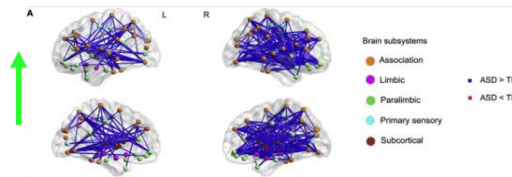
Lynch et al., 2013, Biol. Psychiatry

Temporal neurodynamics



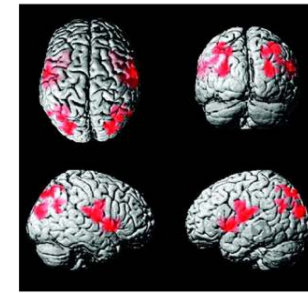
Bernas et al. 2018, Brain and Behavior

Wavelet-based functional connectivity



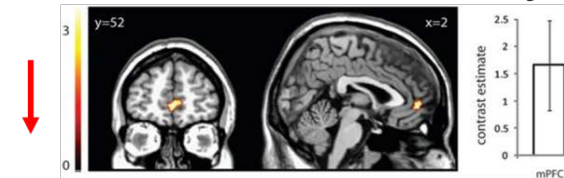
Supekar et al. 2013, Cell Reports

Interhemispheric connectivity



Anderson et al. 2011, Cerebral Cortex

ICA based functional connectivity



Von dem Hagen et al. 2012, Soc Cogn Affect Neuroscience

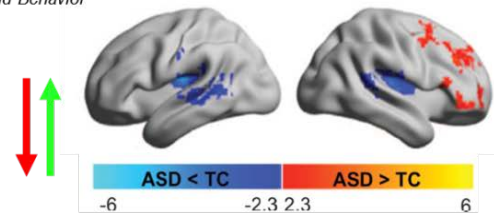
Differences in:

- Sample size
- Demographics (age, sex)
- Diagnostic and other inclusion/exclusion criteria
- Pre-processing methodology
- Statistical analyses
- Medication effects
- Motion

Decreased in ASD

Increased in ASD

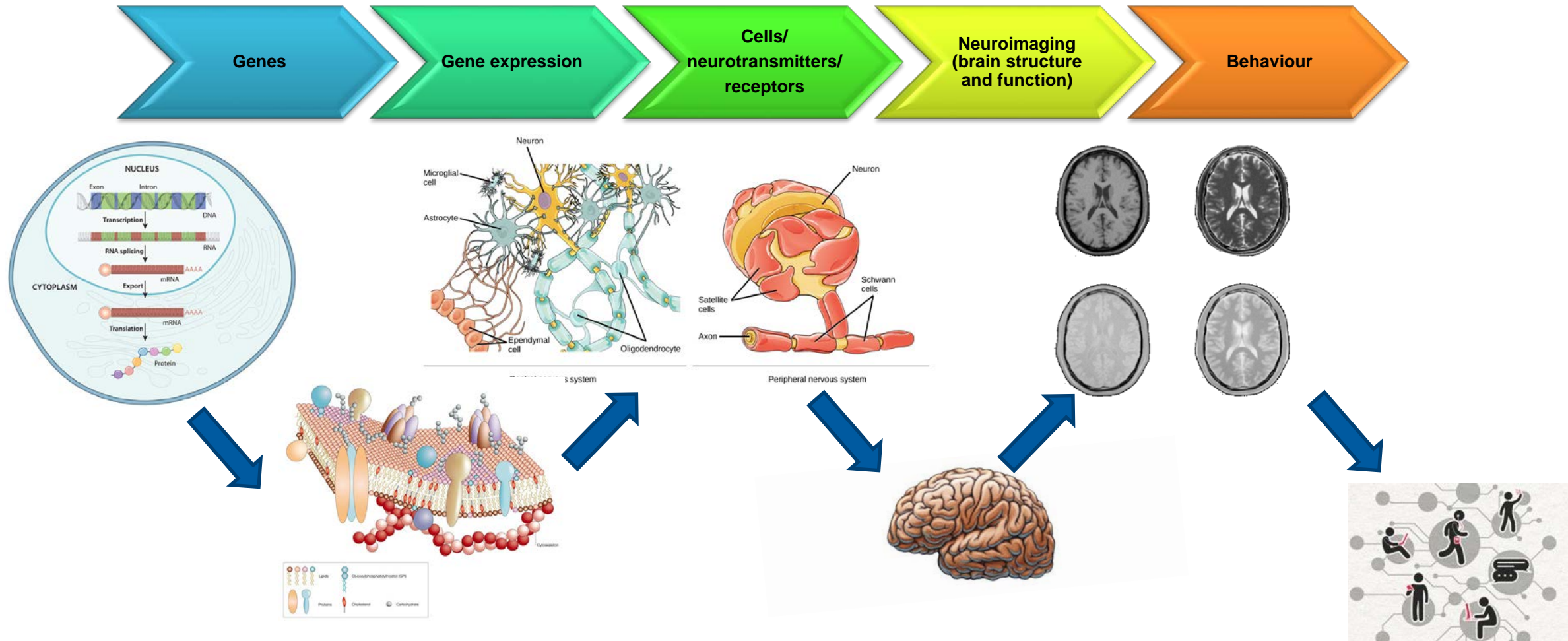
Degree centrality



Di Martino et al., 2013, Mol. Psychiatry

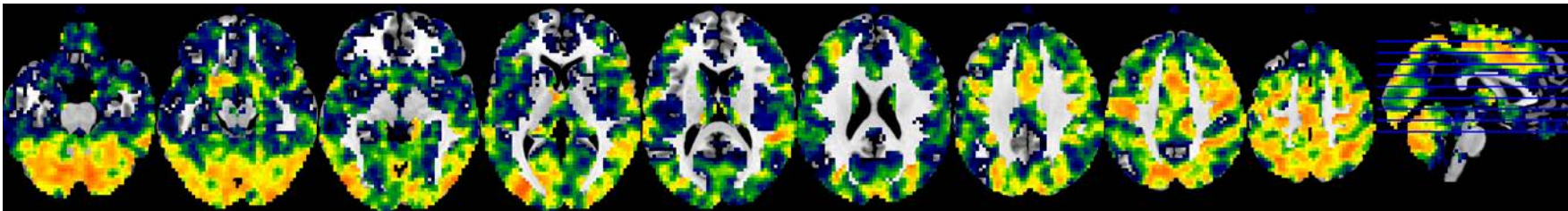
WHAT ARE THE LIMITATIONS OF FUNCTIONAL NEUROIMAGING TOOLS?

Ideally neuroimaging provides a link between biology and behaviour

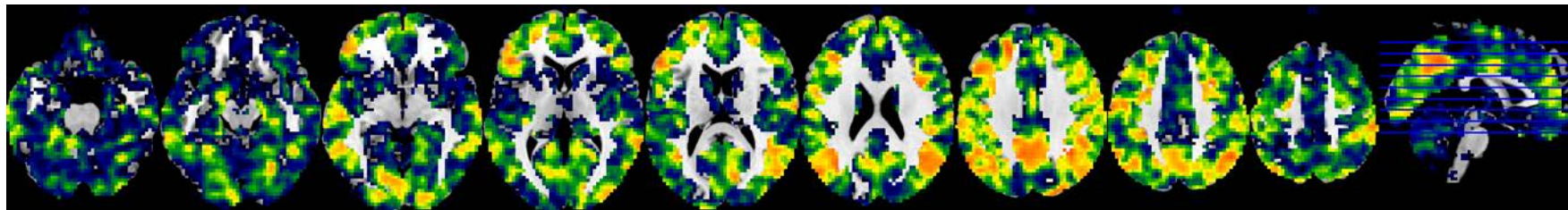


Reliability of fMRI is strongly dependent on the task and spatial location

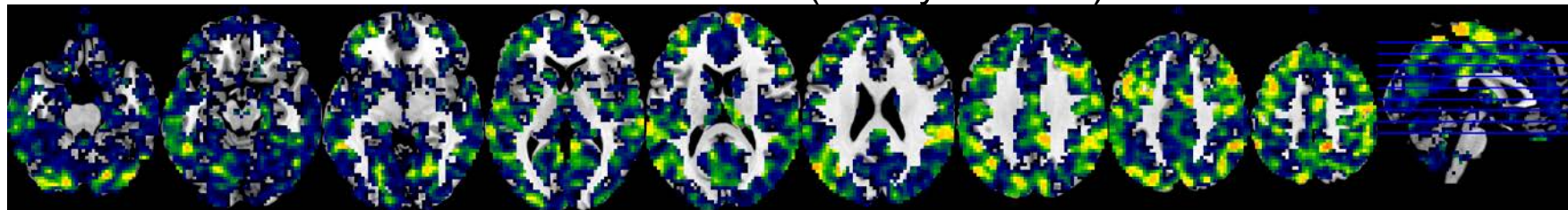
MID (reward task)



Nback (working memory)



ToM (theory of mind)



ICC(intra-class correlation coefficient)



ICC criteria (Cicchetti, Domenic V. 1994):

Less than 0.40—poor.

Between 0.40 and 0.59—fair.

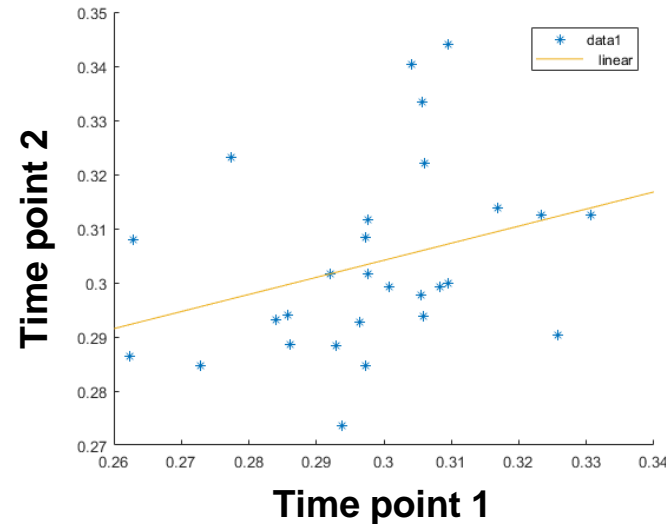
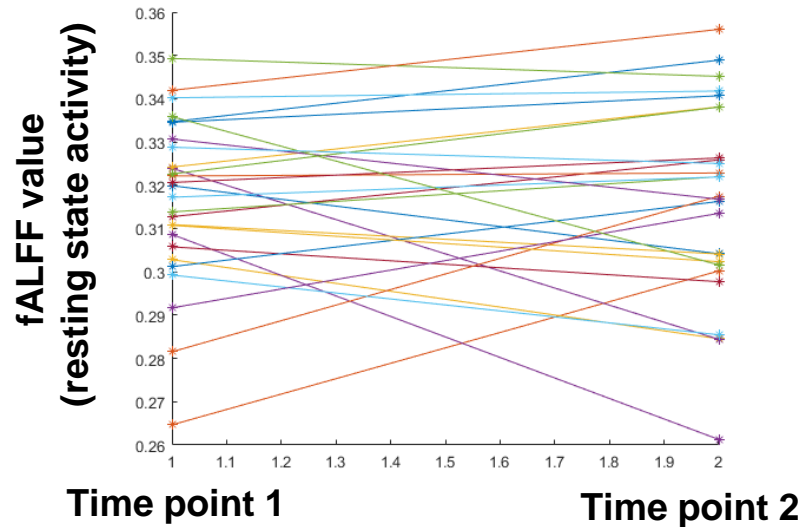
Between 0.60 and 0.74—good.

Between 0.75 and 1.00—excellent.

ICC – Intra-class correlation coefficient

Generally rather low to fair reliability of region- and voxel-wise fMRI and rsfMRI analyses

Exemplary atlas region: ICC(reliability)=0.31



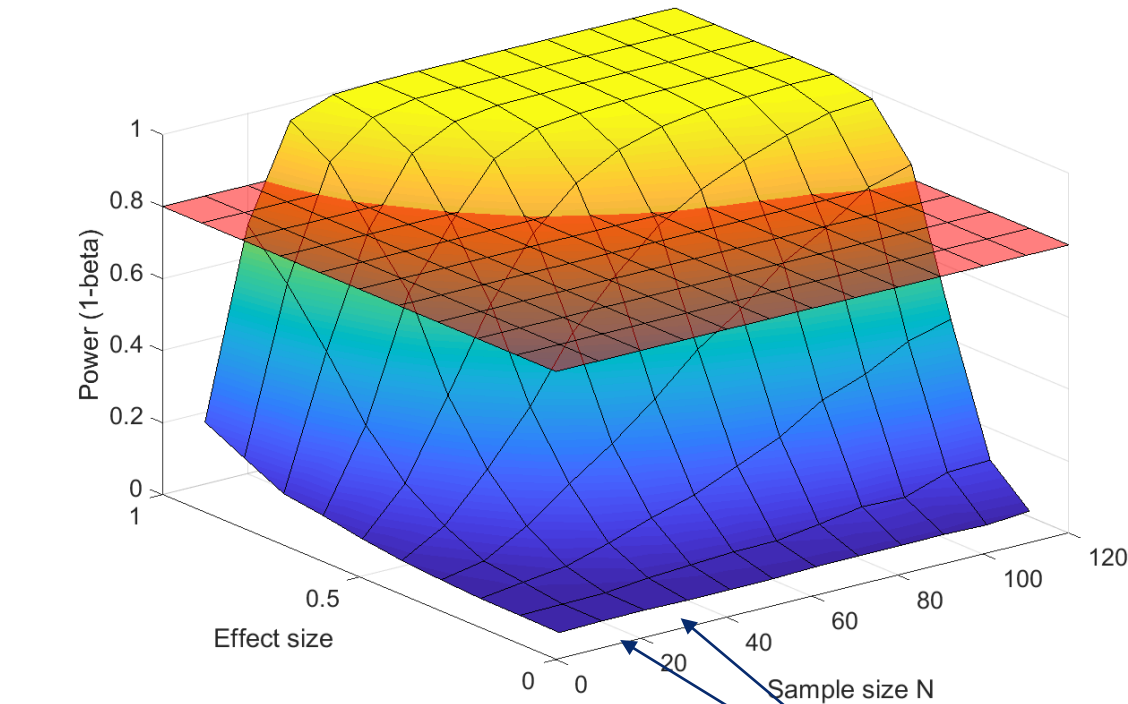
MID: Monetary Incentive Delay
ToM: Theory of Mind
FM: Emotional Face Matching
(f)ALFF: (fractional) Amplitude of low frequency fluctuations
ReHo: Regional Homogeneity
DC: Degree centrality
EC: Eigenvector centrality
CBF: Cerebral Blood Flow

Domain	Measure	Region-wise ICC Visit 1 to visit 2 median [P_5 – P_{95}]
tb-fMRI	MID	0.70 [–0.00–0.88]
	N-back	0.38 [–0.09–0.68]
	ToM	0.42 [–0.09–0.69]
	FM	0.38 [–0.15–0.71]
rs-fMRI	Encoding	0.30 [–0.19–0.58]
	Recall	0.23 [–0.84–0.77]
	Recognition	0.48 [0.03–0.72]
	Go/no-go	–0.16 [–0.74–0.36]
	ALFF	0.72 [0.27–0.86]
	fALFF	0.57 [0.17–0.75]
	ReHo	0.58 [0.21–0.78]
	DC	0.44 [–0.04–0.71]
	EC	0.36 [–0.15–0.67]
	Hurst	0.45 [0.18–0.64]
ASL	CBF	0.83 [0.42–0.91]

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Between 0.40 and 0.59—fair.
Between 0.60 and 0.74—good.
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ICC – Intra-class correlation coefficient

Why large sample sizes are needed

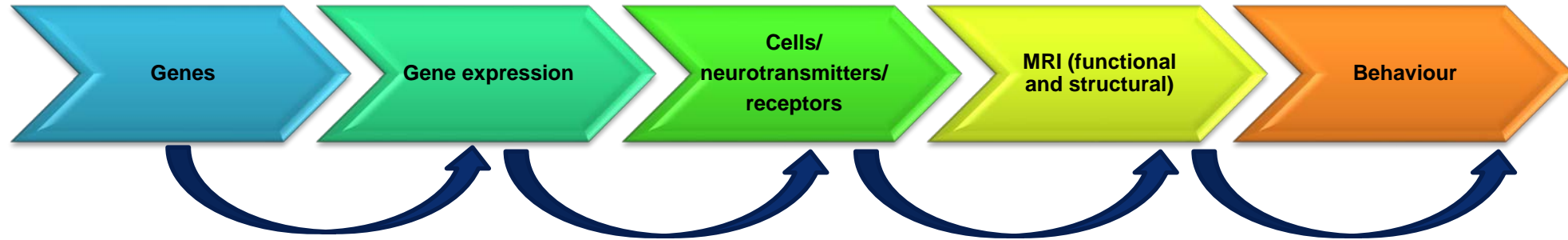
“Typical” size neuroimaging studies can only detect extremely large effects



Power at $p < .001$ uncorrected

Typical fMRI study has about 15-30 participants

We need to better understand sources of biological variability



Limitations

A large proportion of variance in transcription is explained by environment or by epistatic interactions

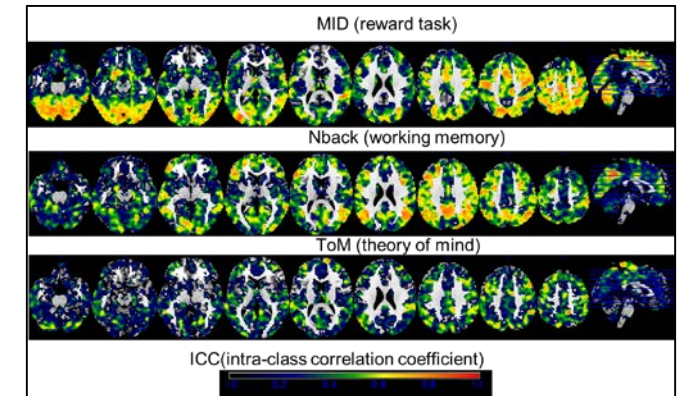
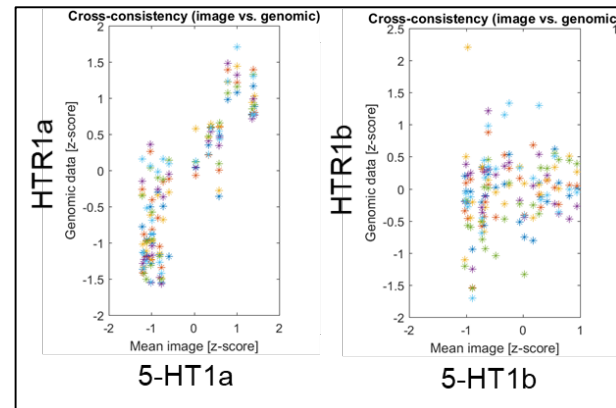
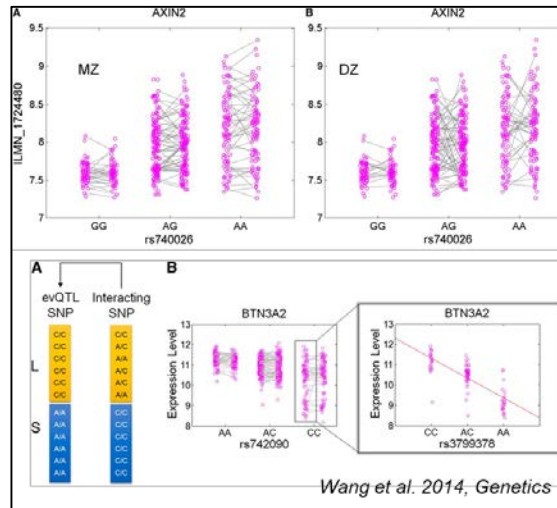
a) mRNA expression often poorly correlates with respective receptor expression

b) Large variability in gene expression is observed for some genes across individuals

a) Functional MRI measures are only sensitive to some aspects of underlying activity

b) Some neurotransmitter changes do not result in changes in functional activity

Low reliability of regional functional MRI measures adds a lot of noise to the data

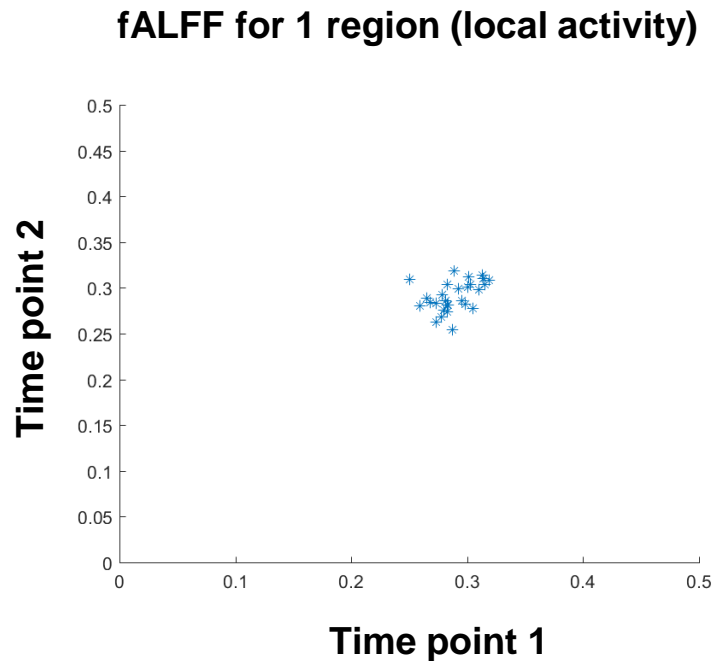


Correlations between gene expression and imaging: between $r=0$ and 0.7
Genetic auto-correlation: HTR1a: $r=0.88$, HTR1b: $r=0.16$

How can one address these limitations

- Technological advancement
- **Study design**
- **Statistical analyses**

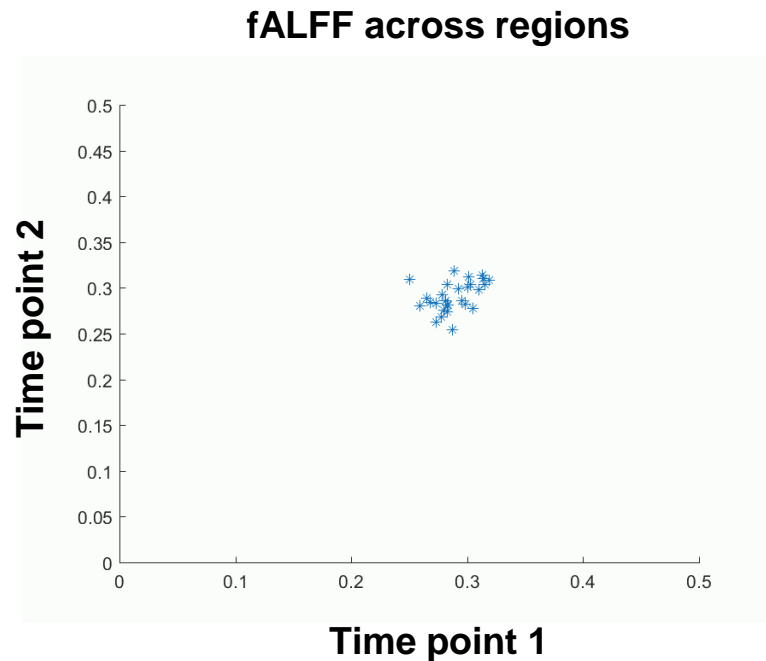
Within region reliability is rather moderate for most functional MRI measures



		Visit 1 to visit 2 median [P_5 – P_{95}]
		Between ICC
tb-fMRI	MID	0.70 [–0.00–0.88]
	N-back	0.38 [–0.09–0.68]
	ToM	0.42 [–0.09–0.69]
	FM	0.38 [–0.15–0.71]
	Encoding	0.30 [–0.19–0.58]
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 ICC – Intra-class correlation coefficient

Spatial reliability across regions is consistently higher than the reliability within each region for task-based fMRI and rsfMRI



		Visit 1 to visit 2 median [P_5 – P_{95}]	Visit 1 to visit 2 median [P_5 – P_{95}]
		Between ICC	Within ICC
tb-fMRI	MID	0.70 [–0.00–0.88]	0.79 [–0.32–0.93]
	N-back	0.38 [–0.09–0.68]	0.81 [0.61–0.94]
	ToM	0.42 [–0.09–0.69]	0.58 [–0.10–0.83]
	FM	0.38 [–0.15–0.71]	0.80 [0.63–0.93]
	Encoding	0.30 [–0.19–0.58]	0.73 [0.47–0.94]
	Recall	0.23 [–0.84–0.77]	0.72 [0.25–0.89]
rs-fMRI	Recognition	0.48 [0.03–0.72]	0.72 [0.48–0.86]
	Go/no-go	–0.16 [–0.74–0.36]	0.24 [–1.11–0.66]
	ALFF	0.72 [0.27–0.86]	0.96 [0.73–0.98]
	fALFF	0.57 [0.17–0.75]	0.98 [0.95–0.99]
	ReHo	0.58 [0.21–0.78]	0.96 [0.86–0.98]
	DC	0.44 [–0.04–0.71]	0.89 [0.62–0.95]
ASL	EC	0.36 [–0.15–0.67]	0.65 [0.19–0.92]
	Hurst	0.45 [0.18–0.64]	0.92 [0.77–0.96]
	CBF	0.83 [0.42–0.91]	0.96 [0.91–0.98]

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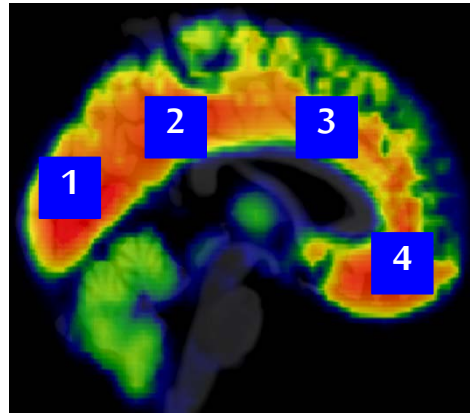
ICC – Intra-class correlation coefficient

IS MORE RELIABLE ALSO MORE MEANINGFUL?

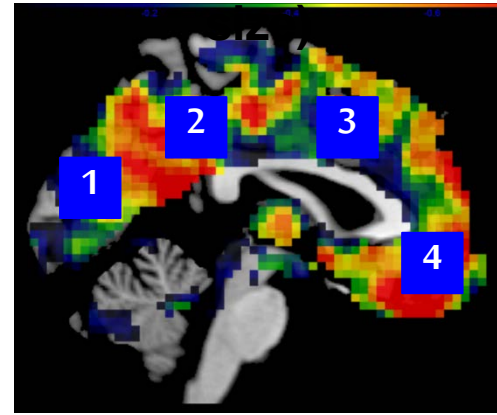
Pharmacodynamic mapping of drug receptor profiles using Cerebral Blood Flow – Illustration of the concept

Correlating spatial profiles of receptor densities and drug effects

Receptor density



Drug effect (Effect



Correlations

Overview of datasets used for the different questions

CBF change data for 7 compounds with known mechanism of action:
Risperidone
Olanzapine
Haloperidol
Ketamine
Midazolam
Methylphenidate
Escitalopram

All double-blind, placebo-controlled, randomized, fully counterbalanced three-period cross-over studies

In vivo receptor estimates
GABA _A
DAT

13 Ex vivo receptor density estimates (1)
AMPA
NMDA
Kainate
GABA _A
m1
m2
Nicotinic $\alpha 2\beta 4$
$\alpha 1$
$\alpha 2$
5-HT 1a
5-HT 2
D1
D2



Affinities for Risperidone, Olanzapine and Haloperidol (2)

Underlying CBF activity estimates based on independent cohort

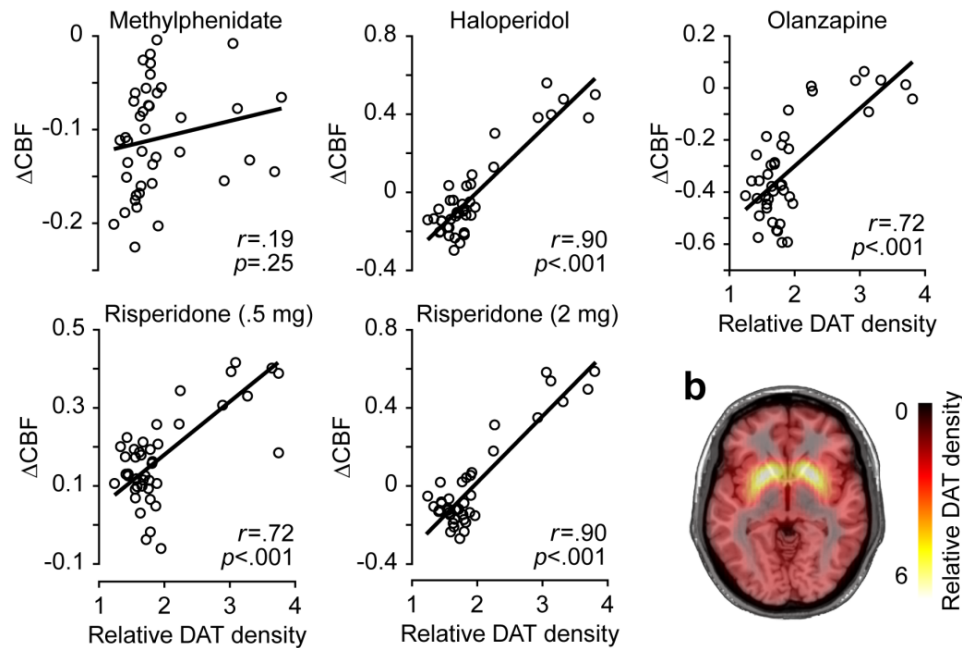
- 1) Palomero-Gallagher N, Amunts K, Zilles K (2015): Transmitter Receptor Distribution in the Human Brain. *Brain Mapp Encycl Ref*. Elsevier, pp 261–275.
- 2) Bymaster FP, Calligaro DO, Falcone JF, Marsh RD, Moore NA, Tye NC, *et al.* (1996): Radioreceptor binding profile of the atypical antipsychotic olanzapine. *Neuropsychopharmacology*. 14: 87–96.

Predictions based on pharmacological properties

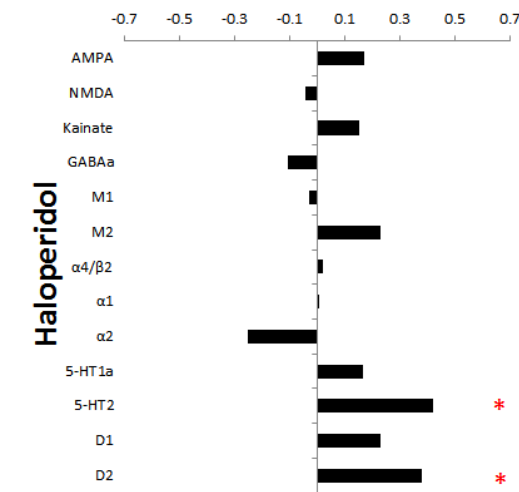
1. Higher underlying receptor density should be associated with stronger pharmacodynamic effects
2. Higher underlying activity should be associated with stronger pharmacodynamic effects
3. Higher affinity to a specific neurotransmitter should be associated with a stronger link between receptor densities and pharmacodynamic changes
4. Compounds with an indirect mechanism of action (i.e. allosteric modulators or uptake inhibitors) should have a stronger link to activity as compared to density

Spatial patterns of CBF alterations are predictive of the underlying mechanism of action of respective compounds

Correlations with in vivo receptor density estimates (dopaminegic compounds)

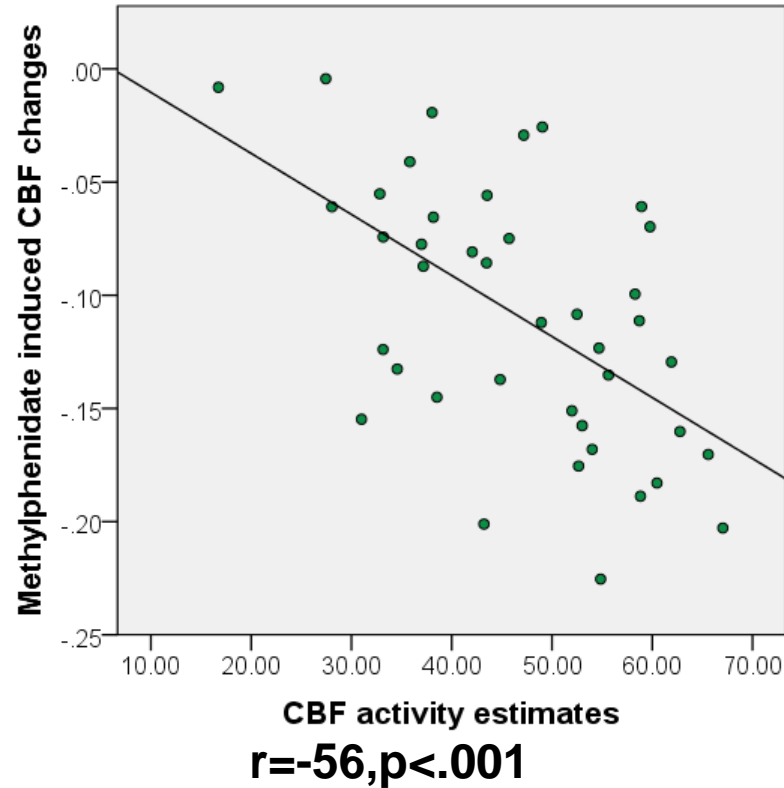


Correlational profiles with ex vivo receptor density estimates



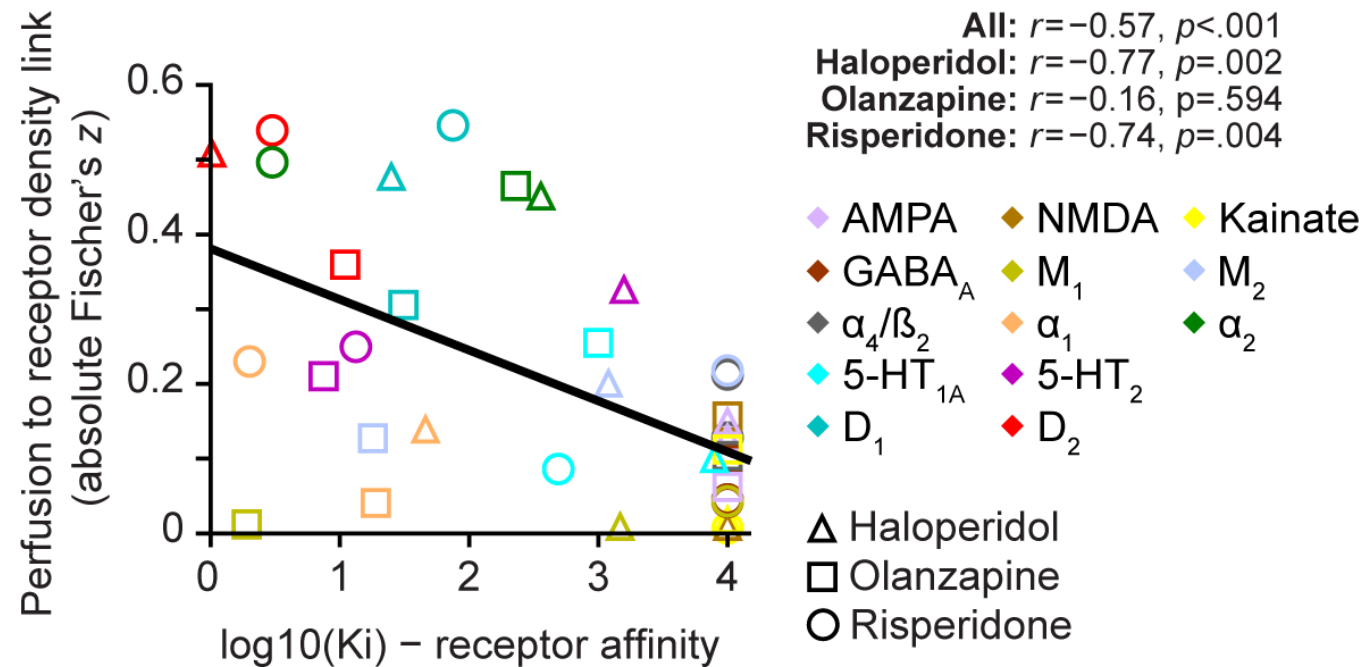
* $p < .05$
These profiles align well with underlying affinity to the respective receptor systems (highest affinity to D2, 5-HT₂)

Results – correlations with activity

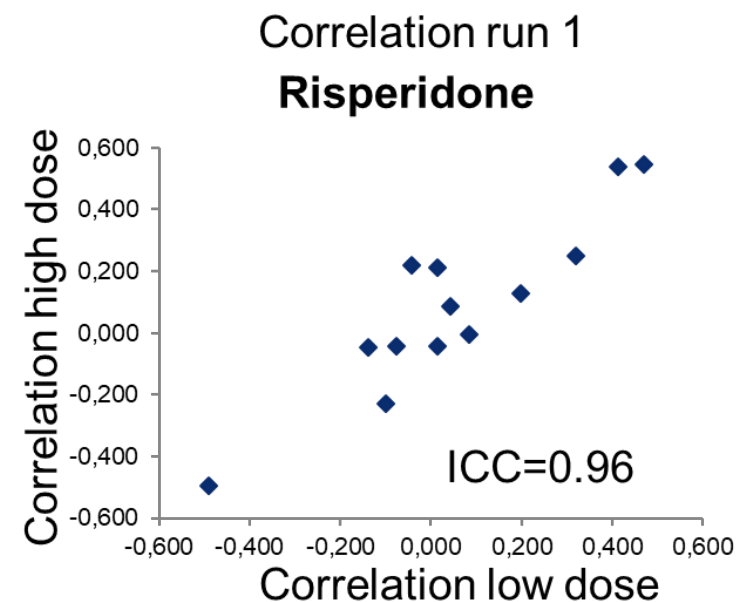
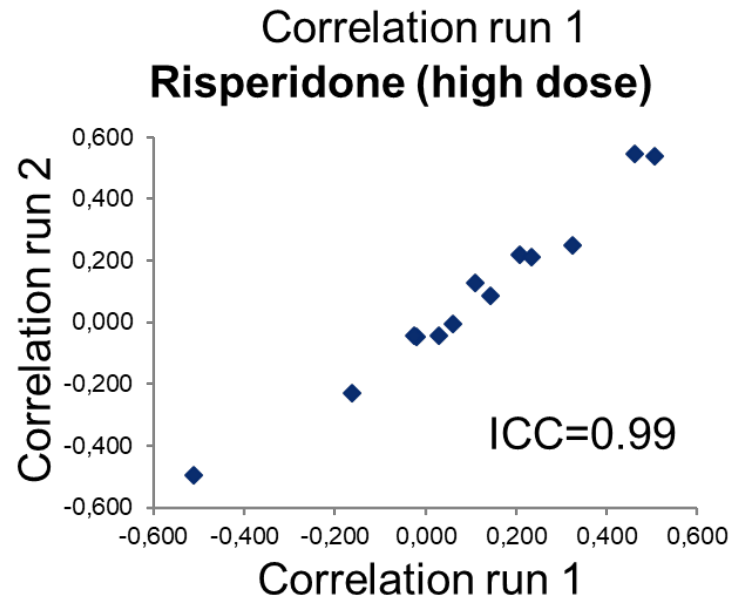
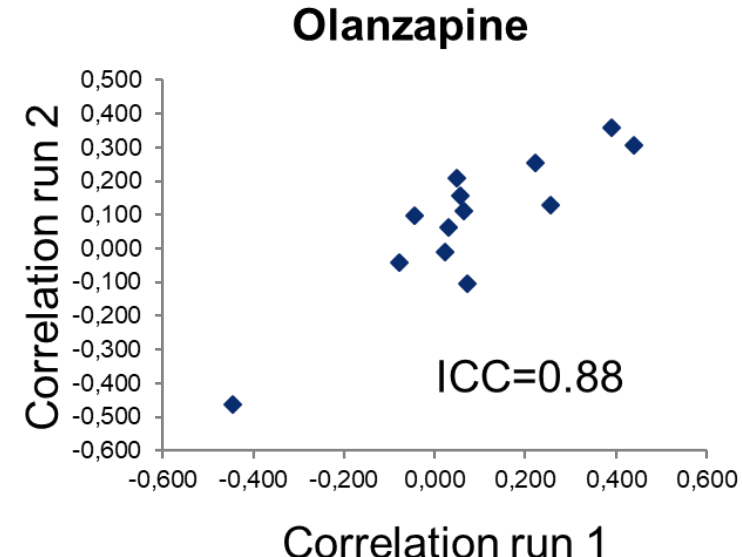
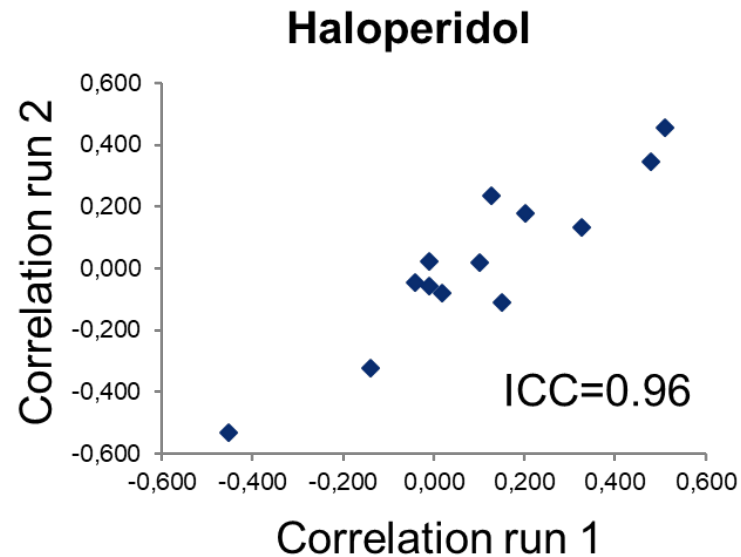


Compound	Correlation with activity (r;p)
Escitalopram	$r = -0.3; p = 0.055$
Haloperidol	$r = -0.52; p < 0.001$
Methylphenidate	$r = -0.56; p < 0.001$
Olanzapine	$r = -0.62; p < 0.001$
Risperidone (low dose)	$r = -0.34; p = 0.028$
Risperidone (high dose)	$r = -0.57; p < 0.001$
Ketamine	$r = 0.02; p = 0.913$
Midazolam	$r = -0.48; p = 0.002$

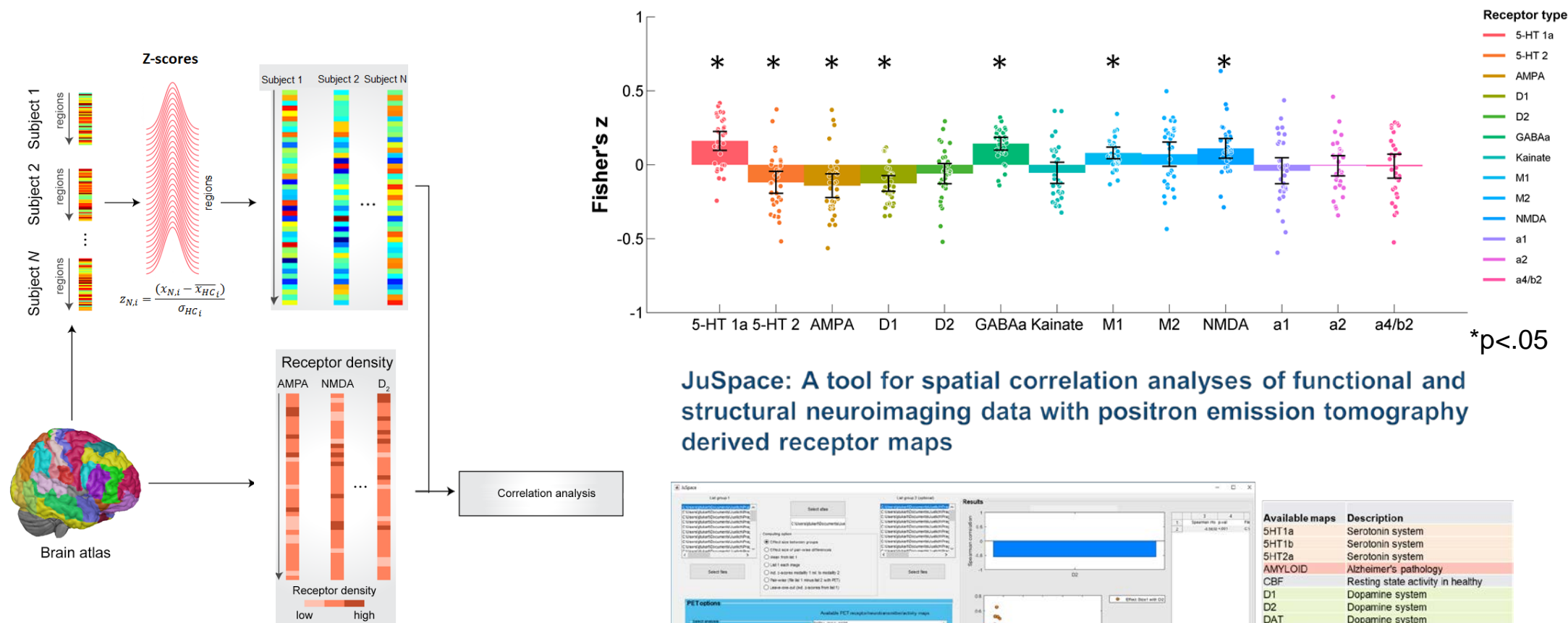
Results – correlations between receptor density profiles and drug affinities



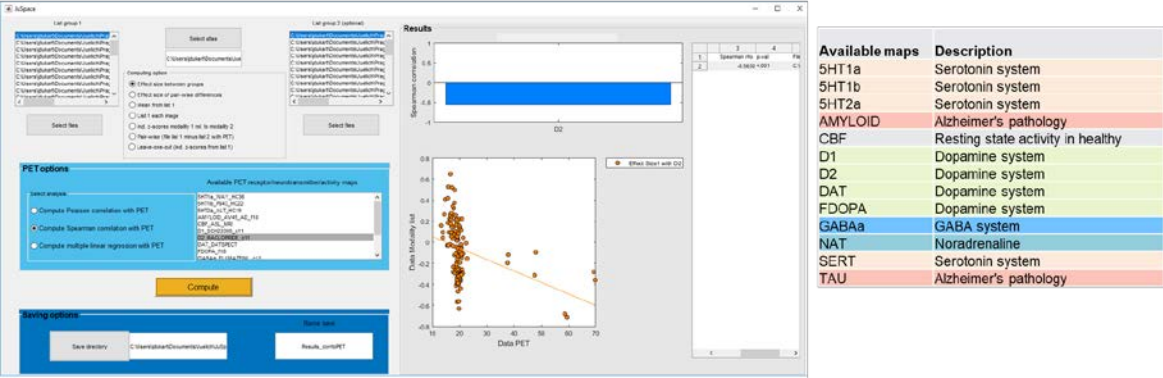
Results – excellent test retest reliability



Applying these approach to individual resting state (i.e. fALFF) data from Parkinson's patients



JuSpace: A tool for spatial correlation analyses of functional and structural neuroimaging data with positron emission tomography derived receptor maps



fALFF – fractional Amplitude of Low Frequency Fluctuations

INCREASING REPLICABILITY – EXAMPLE OF AUTISM

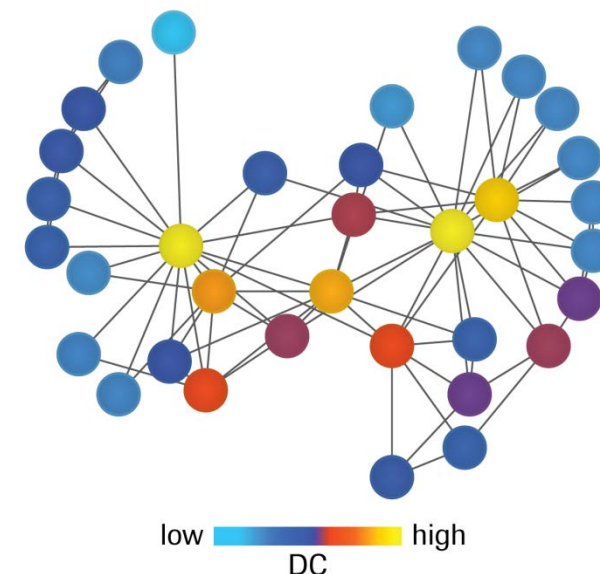
Objective: to test for replicability of ASD resting state connectivity alterations across several cohorts using the same methodology

	Exploration dataset			Validation datasets								
	EU-AIMS LEAP			ABIDE I			ABIDE II			InFoR		
	ASD	TD	Stats (test value, df, p-value)	ASD	TD	Stats (test value, df, p-value)	ASD	TD	Stats (test value, df, p-value)	ASD	TD	Stats (test value, df, p-value)
N	202	192	-	299	376	-	306	391	-	34	25	-
Male/female	142/60	124/68	1.5,1,2 26	268/31	313/63	5.7,1,0 17	262/44	263/127	30.4,1, <.001	26/8	19/6	0.0,1, 967
Age±SD	17.5±5.3	17.4±5.7	0.1,392, .915	17.5±7.7	17.7±7.8	-.3,673, .776	14.0±6.8	13.6±6.2	.8,695, .428	29.5±8.9	30.6±8.3	.5,57, 638
Child/Adol/Adult	35/76/91	43/71/78	1.7,2,4 34	69/118/112	85/147/144	.1,2,97 4	147/85/74	234/77/80	10.3,2, .006	0/0/34	0/0/25	-
IQ (mean±SD, N)	106±14.9	109±12.6	2.1,392, .033	106.3±16.0	112.0±12.1	5.3,673, <.001	107.0±16.0	115.7±12.5	8.0,695, <.001	104.3±18.7	108.6±17.5	.9,54, 392
DSM IV diag (none/ ASD/ Asperger/ PDD-NOS)	-	-	-	16/204/60/16	-	-	121/55/78/52	-	-	-	-	-
On medication (N)	54	2	-	61	1	-	81	17	-	-	-	-
ADOS total (mean±SD, N)	10.1±4.9, 170	-	-	11.9±3.7, 259	1.3±1.4, 30	15.4, 287, <.001	10±3.7, 167	1.8±1.7, 38	13.4, 203, <.001	-	-	-

TD: typically developing healthy controls

Holiga S, Hipp JF, Chatham CH, ... & Dukart J. (2019). Patients with autism spectrum disorders display reproducible functional connectivity alterations. *Science Translational Medicine*

Same pre-processing and analysis pipeline for all data



Degree centrality = Sum($r > \text{prespecified threshold}^*$)

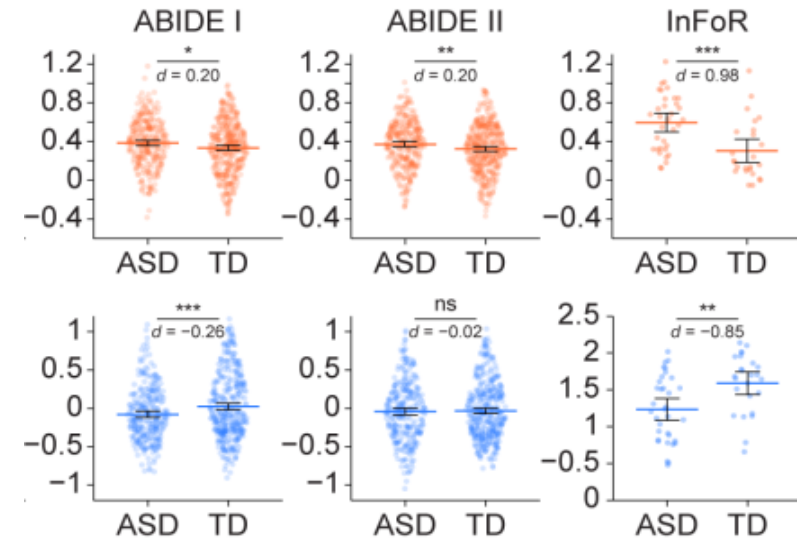
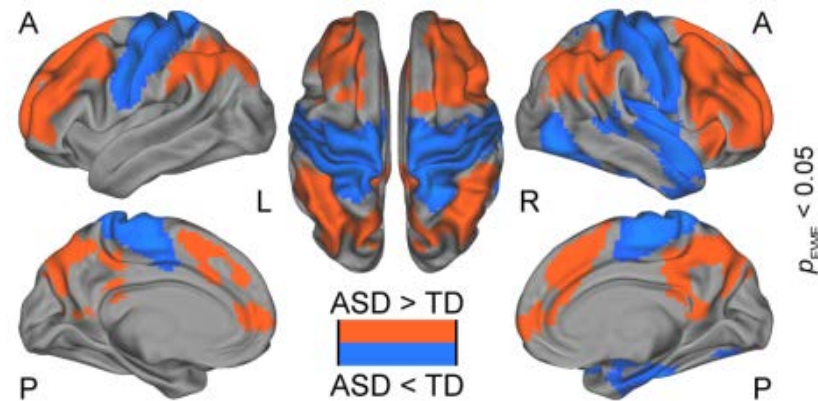
* $r > 0.25$ based on previous literature for degree centrality

Computed using the REST toolbox

Outcomes of the degree centrality analysis

Increases are replicated in all four cohorts and decreases in three out of four

Significant DC alteration in EU-AIMS

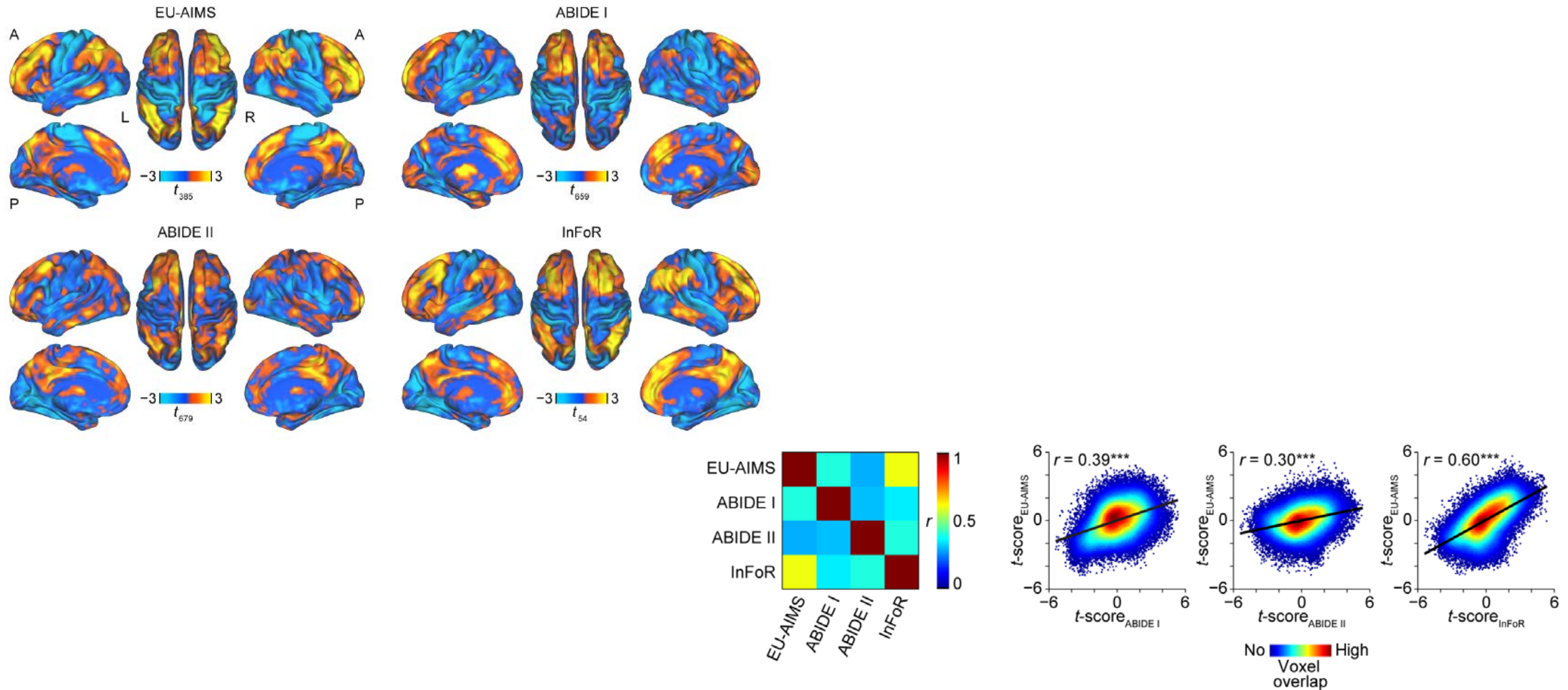


* $p < .05$, ** $p < .01$, *** $p < .001$

Holiga S, Hipp JF, Chatham CH, ... & Dukart J. (2019). Patients with autism spectrum disorders display reproducible functional connectivity alterations. *Science Translational Medicine*

Outcomes of the degree centrality analysis

Consistent spatial alteration patterns are observed across all four cohorts



Conclusions

- Replication in independent datasets is an important first step for increasing the overall replicability of neuroimaging research
- Spatial profile analyses and correlations with PET, gene expression data may provide a way forward to increase reliability of some neuroimaging modalities
- Novel tools allow to answer all of the necessary questions to establish more reliable, interpretable and replicable links between genetics, imaging and behaviour



THANK YOU FOR YOUR ATTENTION!

Many thanks to:

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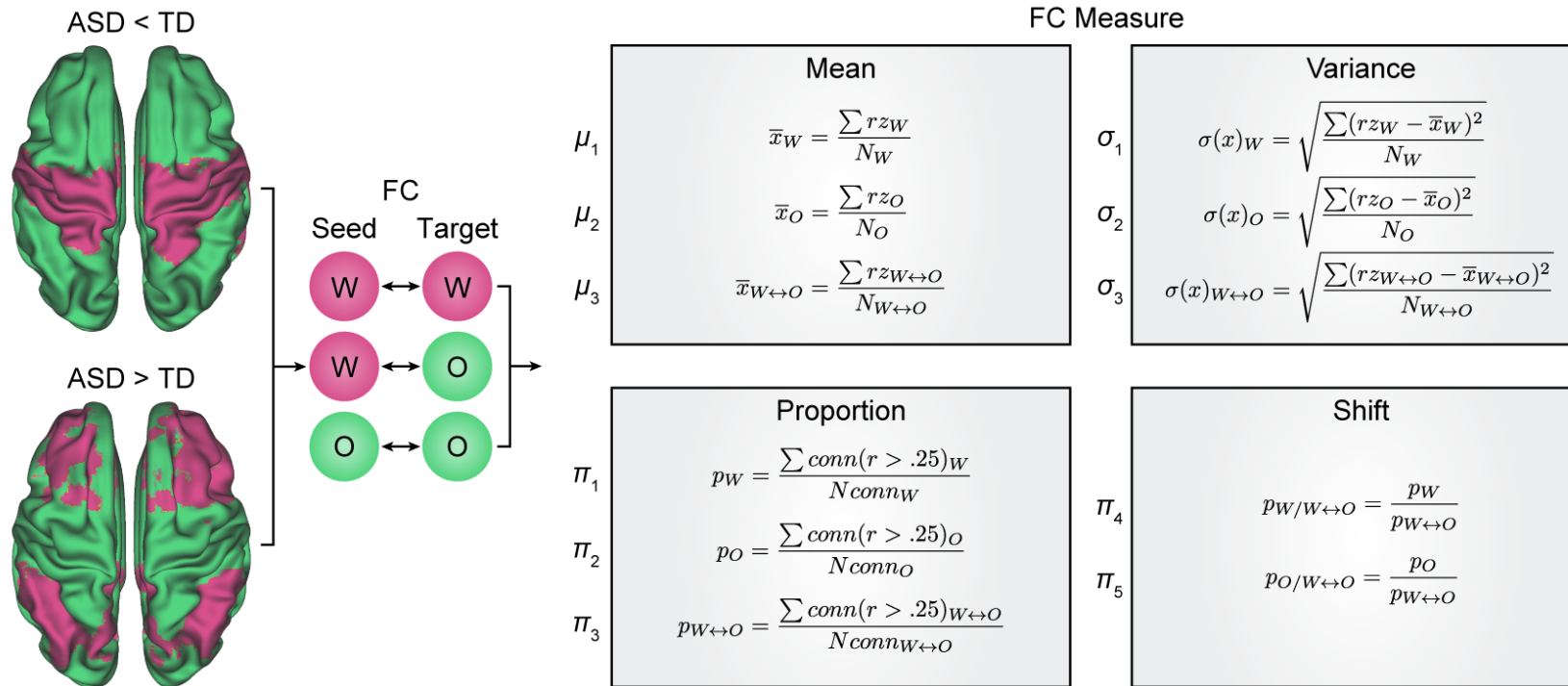
Josselin Houenou
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Myriam Ly-Le Moal
Jan Buitelaar

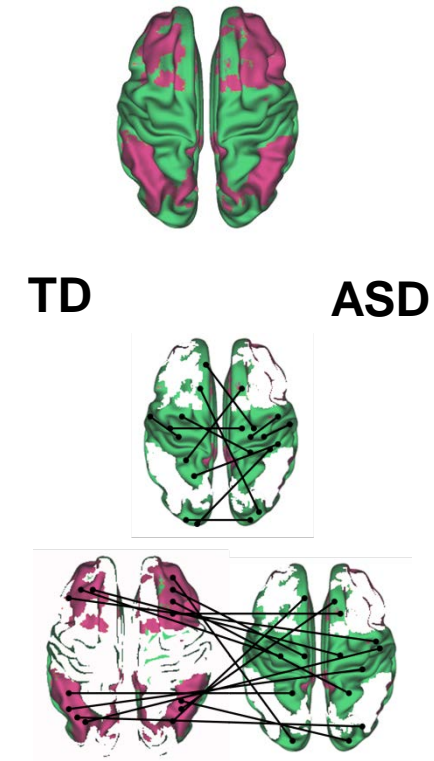
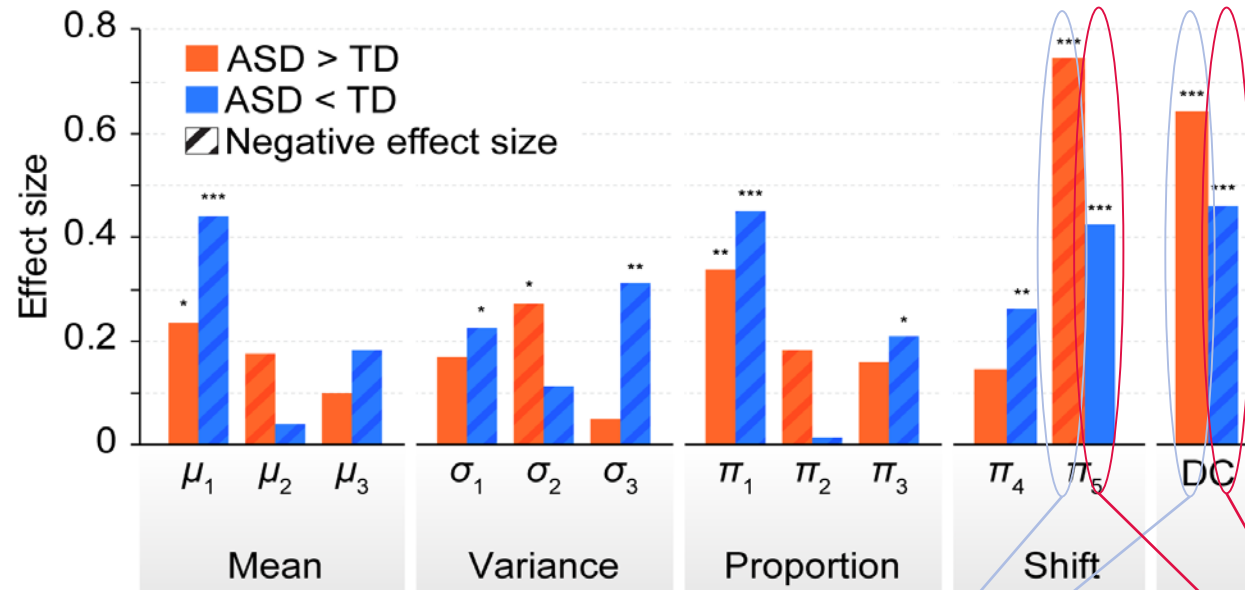
Alexandru Gaman
Isabelle Schei
Marion Leboyer

Are these Degree Centrality differences due to alterations in?

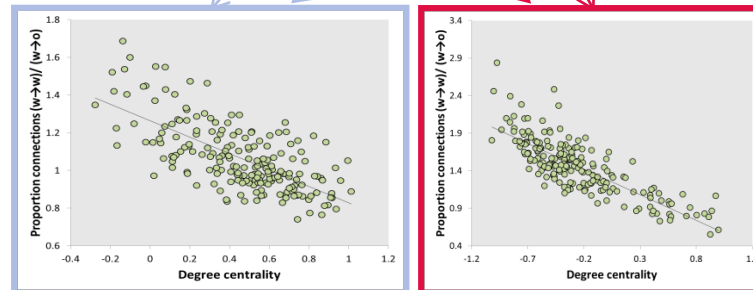
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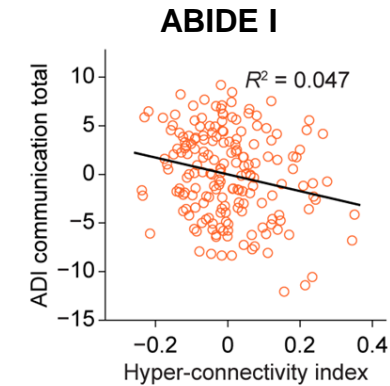
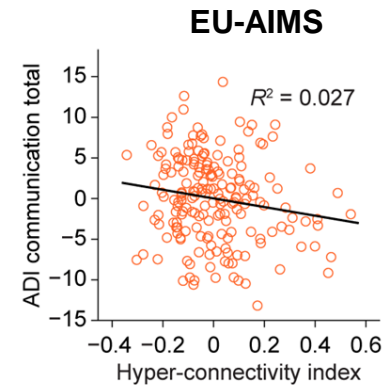


ASSOCIATIONS WITH CLINICAL SCALES

Significant associations of the hyper-connectivity index (increased DC centrality) and social and communication deficits in EU-AIMS and ABIDE I but not in ABIDE II

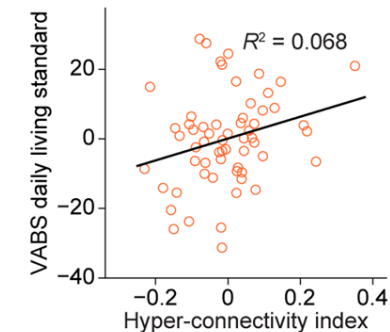
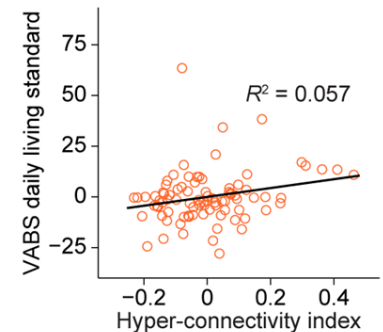
Outcomes of EU-AIMS LEAP general linear model analysis using ASD indices to predict clinical scores

Scale	Hyper-connectivity index	Hypo-connectivity index
ADI social total	F(1,182)=3; p=0.087	F(1,182)=0.8; p=0.385
ADI communication total	F(1,182)=5; p=0.026*	F(1,182)=2.1; p=0.152
ADI RRB	F(1,182)=0.6; p=0.43	F(1,182)=2; p=0.155
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ABIDE II

No significant associations

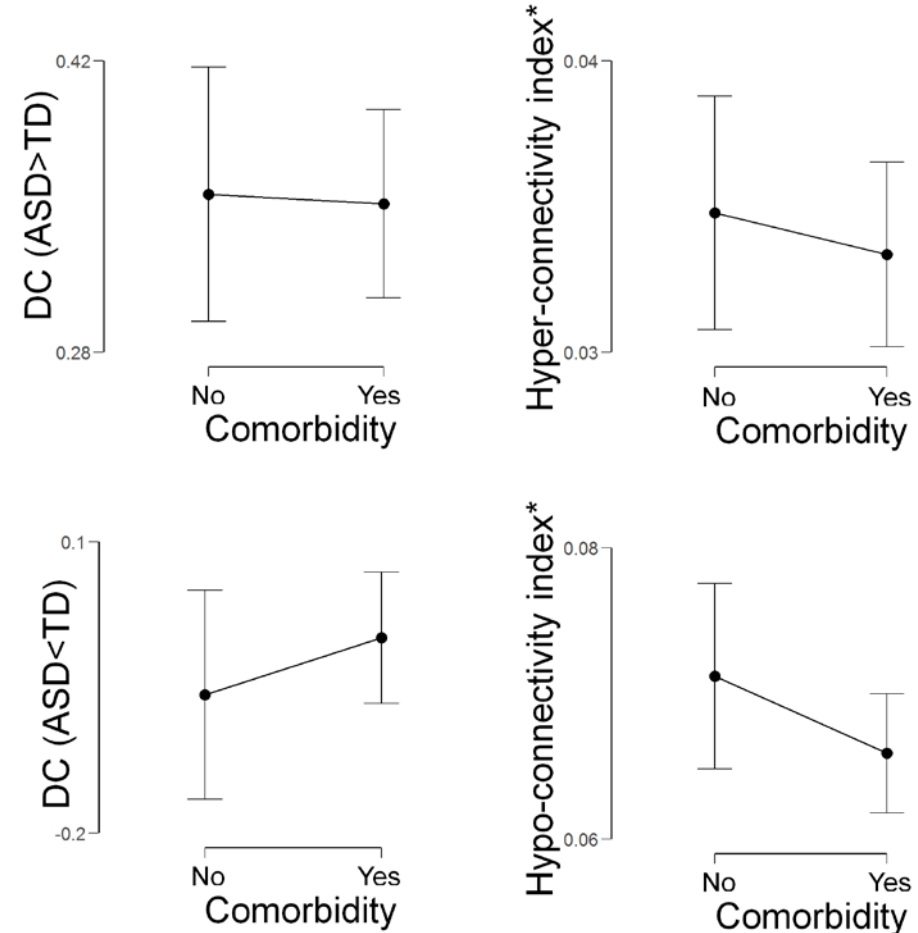


No significant associations

SUMMARY: ASSOCIATIONS WITH DEMOGRAPHIC AND OTHER CONFOUNDING FACTORS

No consistent effects on observed functional connectivity alterations of:

- Age, although some hint on stronger effects in adult ASD in ABIDE I and II
- Medication status (in EU-AIMS but not in the other cohorts DC in ASD patients on medication was closer to TD)
- Motion was significantly different between ASD and TD but did not affect the observed connectivity alterations
- No significant associations with sex
- No significant associations with comorbidity



Results – correlations and multiple linear regression analyses with ex vivo density estimates

Individual finger prints for each evaluated compound

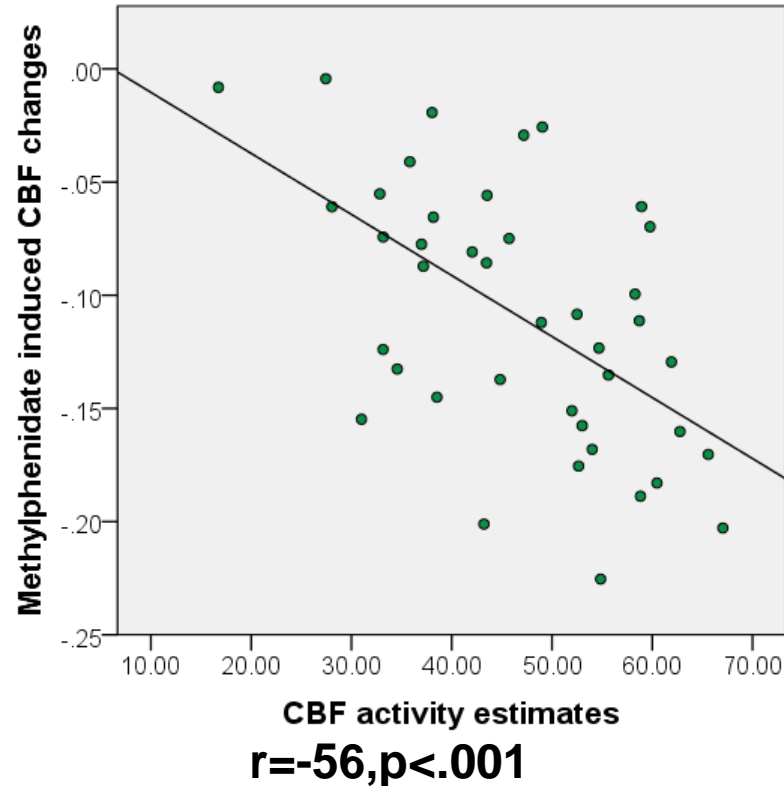
Serotonin reuptake inhibitor

Dopamine and norepinephrine reuptake inhibitor

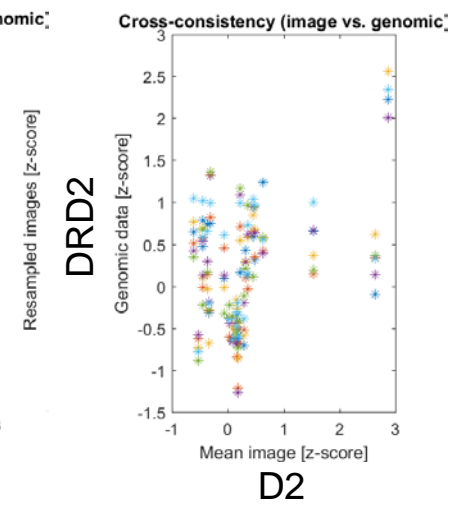
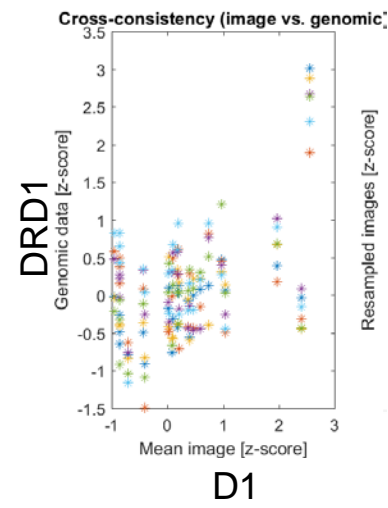
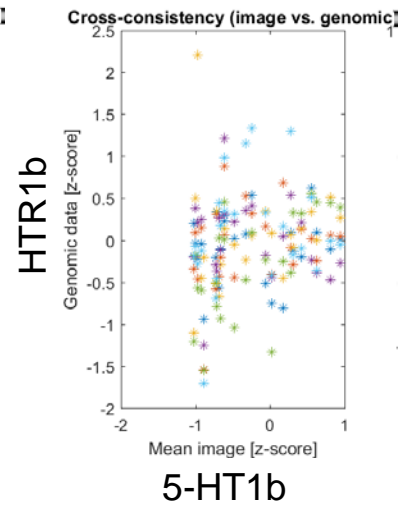
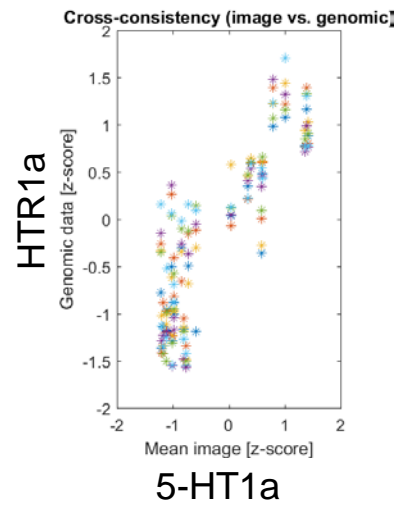
Dopamine antagonist

Red line for Pearson correlation plots indicates significance at an uncorrected two-sided $p < .05$ and yellow star indicates significant Bonferroni corrected findings. For multiple linear regressions a plus indicates a marginally significant ($p < .1$) and red star a significant ($p < .05$) effect of the corresponding regressor

RESULTS – CORRELATIONS WITH ACTIVITY



Compound	Correlation with activity (r;p)
Escitalopram	$r=-0.3; p=0.055$
Haloperidol	$r=-0.52; p<0.001$
Methylphenidate	$r=-0.56; p<0.001$
Olanzapine	$r=-0.62; p<0.001$
Risperidone (low dose)	$r=-0.34; p=0.028$
Risperidone (high dose)	$r=-0.57; p<0.001$
Ketamine	$r=0.02; p=0.913$
Midazolam	$r=-0.48; p=0.002$



Making use of novel tools and resources

Genetics and traits



Gene Atlas is a large database of associations between hundreds of traits and millions of variants using the UK Biobank cohort.

The associations have been computed using 452,264 UK Biobank White British individuals. To avoid having to remove the large amount of related individuals present on the study, the associations have been computed using Mixed Linear Models in a large supercomputer using DISSECT. The objective of the current database is to benefit the research community by making a searchable atlas of genetic associations that help researchers to query associations: results in an easy way, without the need to invest in the high computational costs required to analyze the UK Biobank large cohort.

452264

Individuals

778

Traits

30

Million Variants

This work has been done at the Roslin Institute and MRC-HGU within the Albert Tenesa's group with the contributions of Oriol Canela-Xandri and Konrad Rawlik.

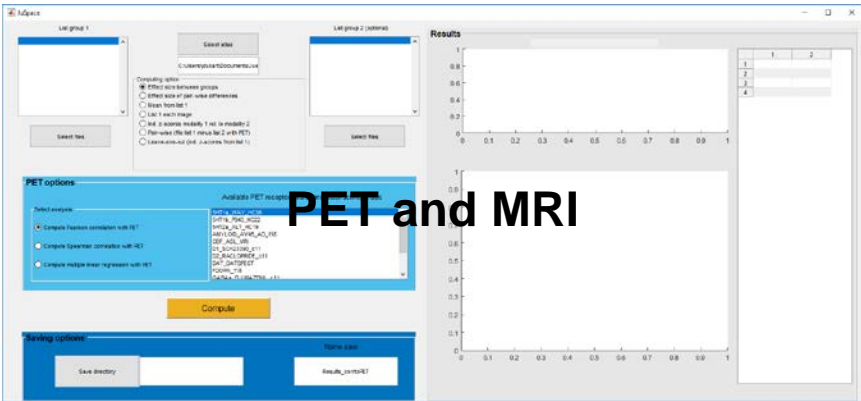
Gene expression



Public neuroimaging databases

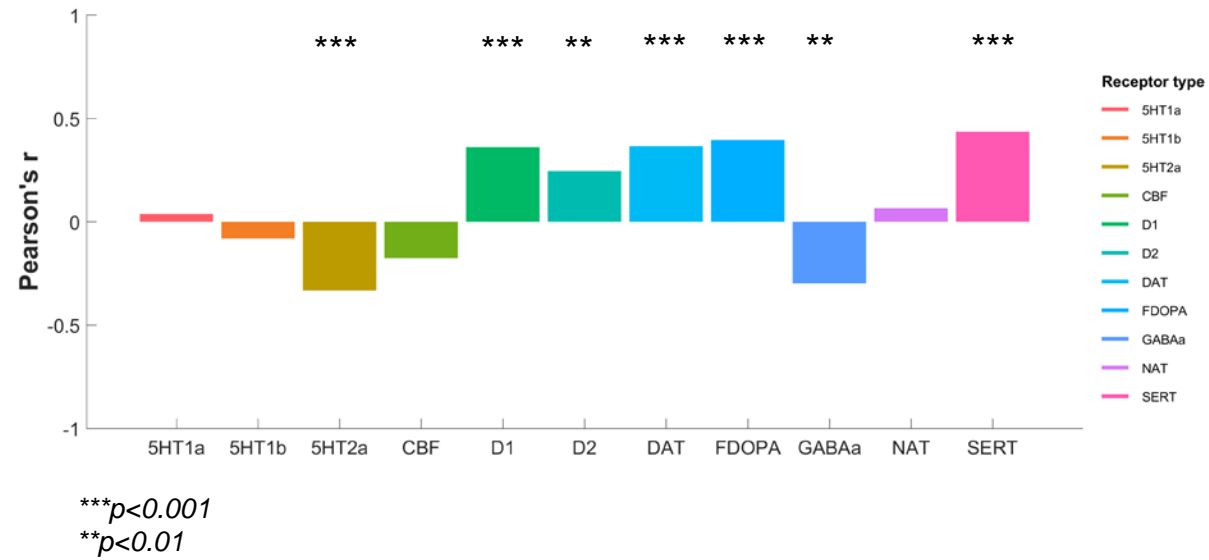


Tools for cross-modal spatial correlations



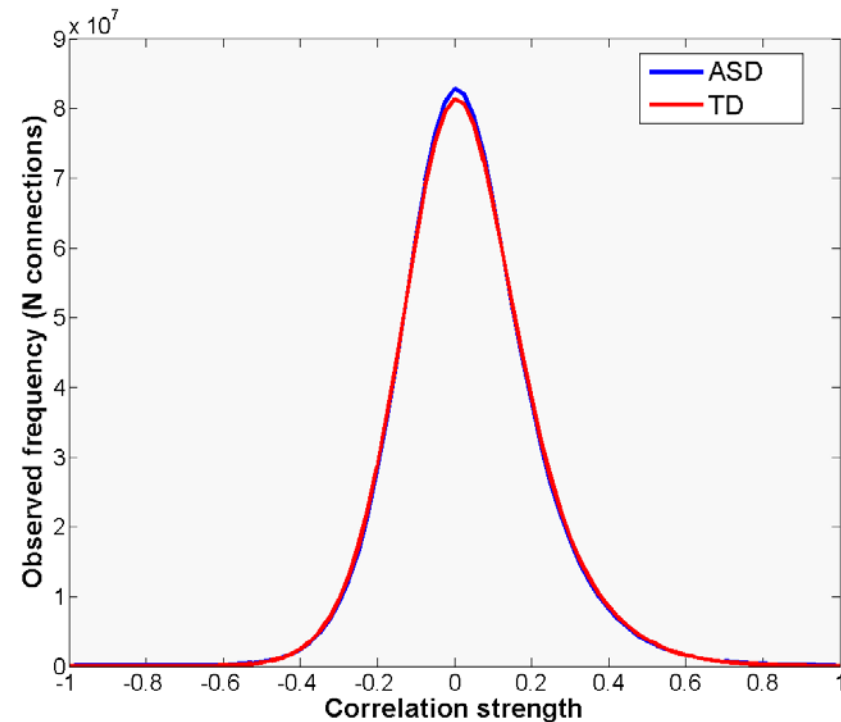
PET and MRI

Dukart et al., in preparation



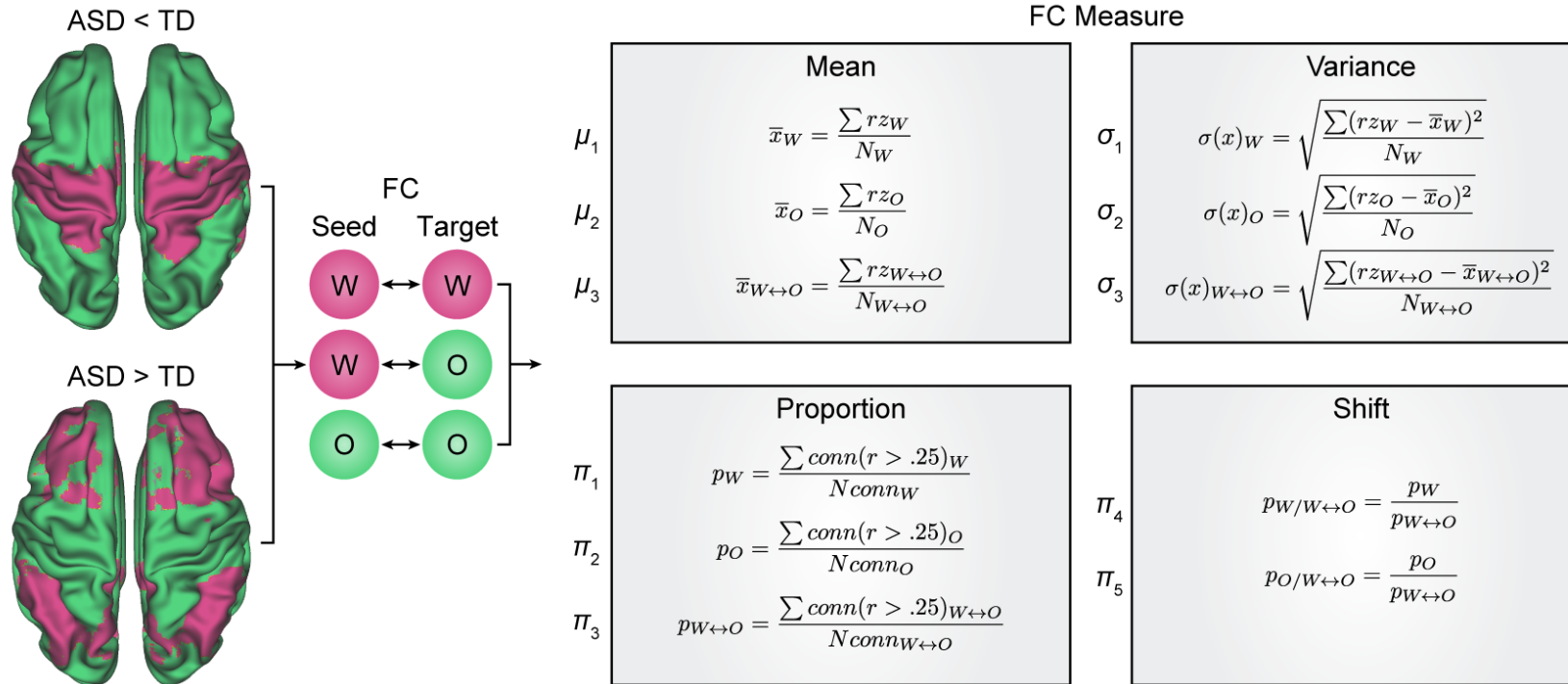
Outcomes of the global functional connectivity evaluation

No differences in the overall distribution of correlation coefficients

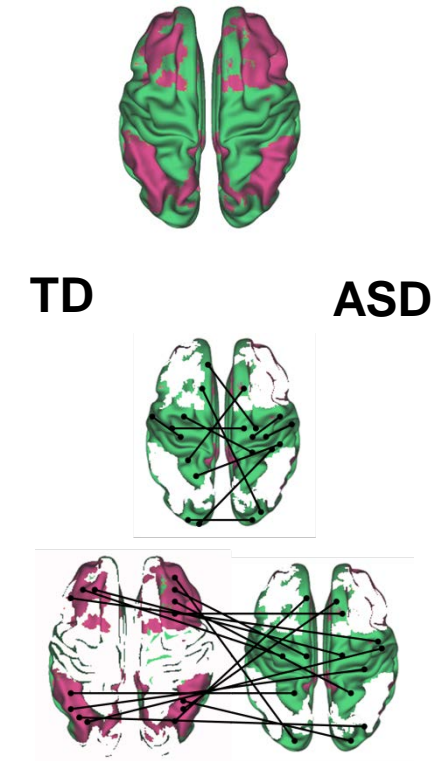
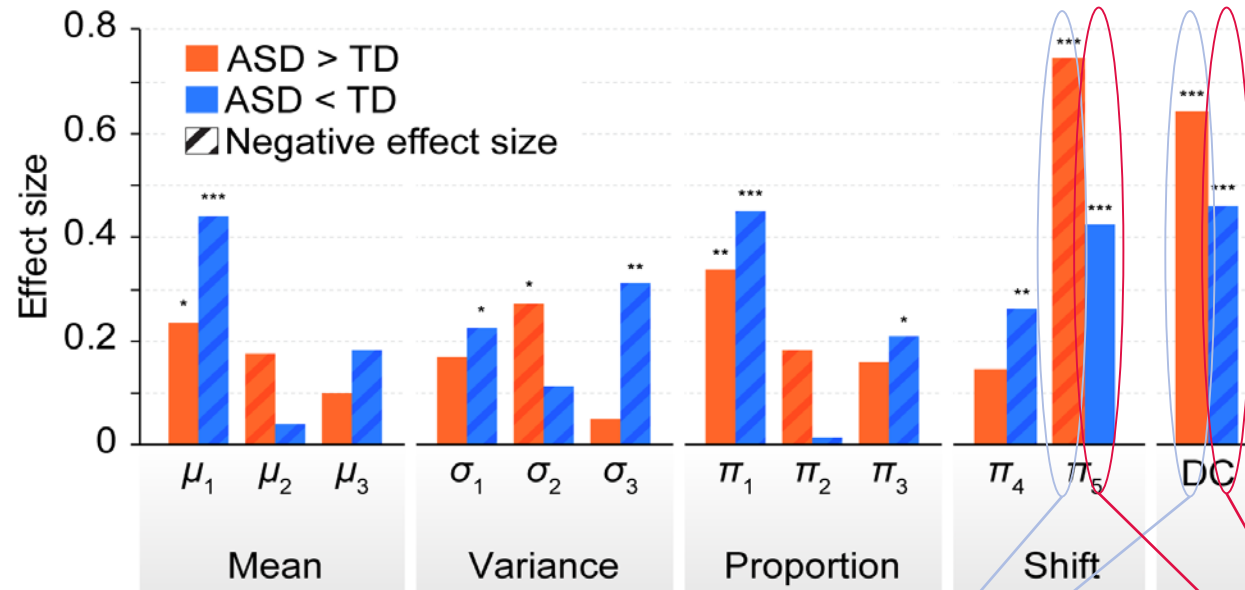


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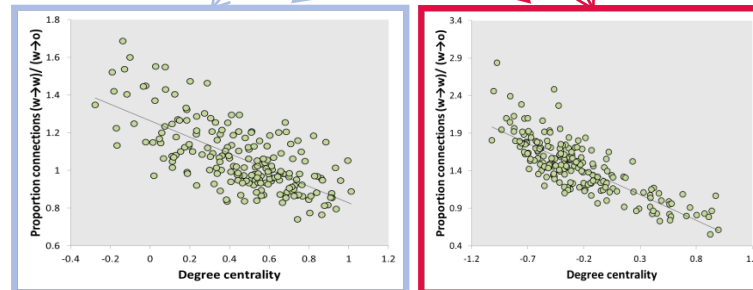
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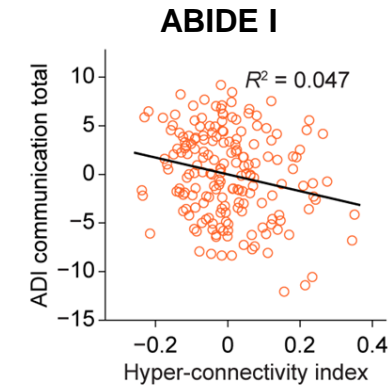
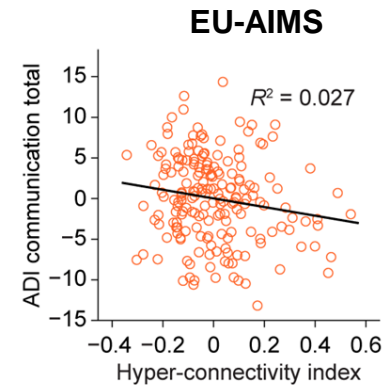


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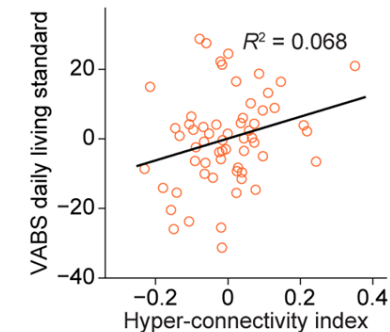
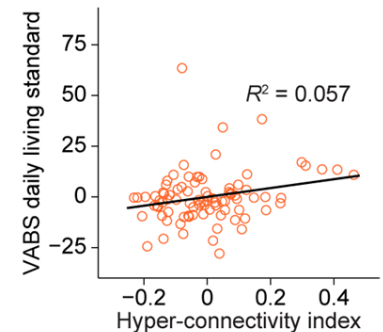
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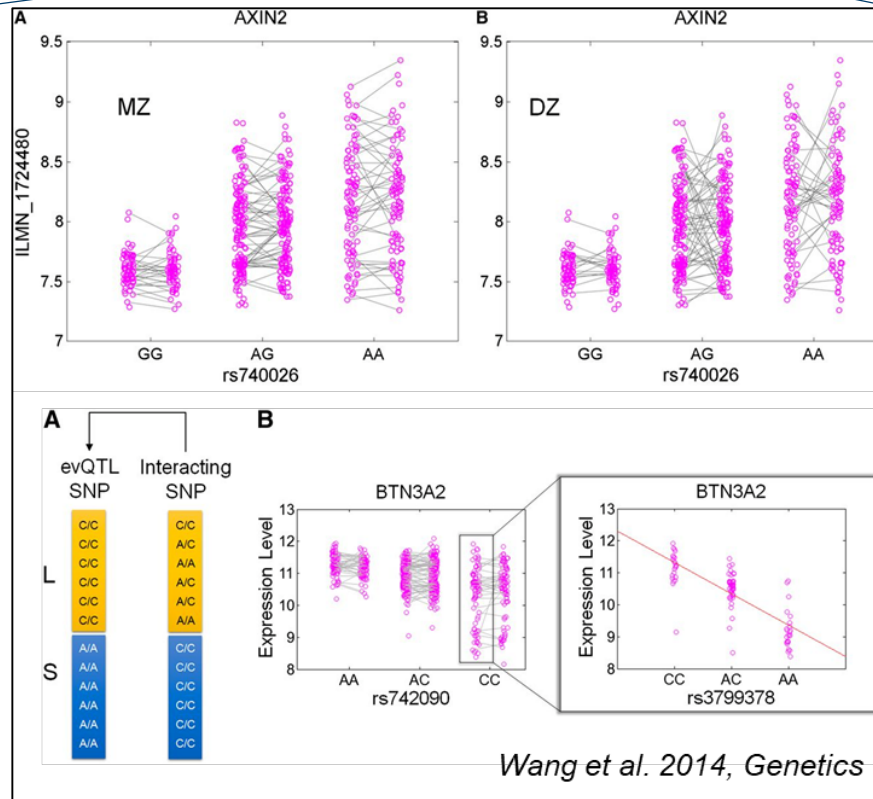
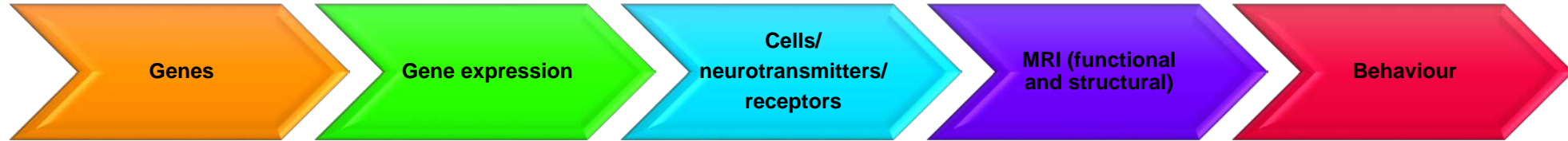
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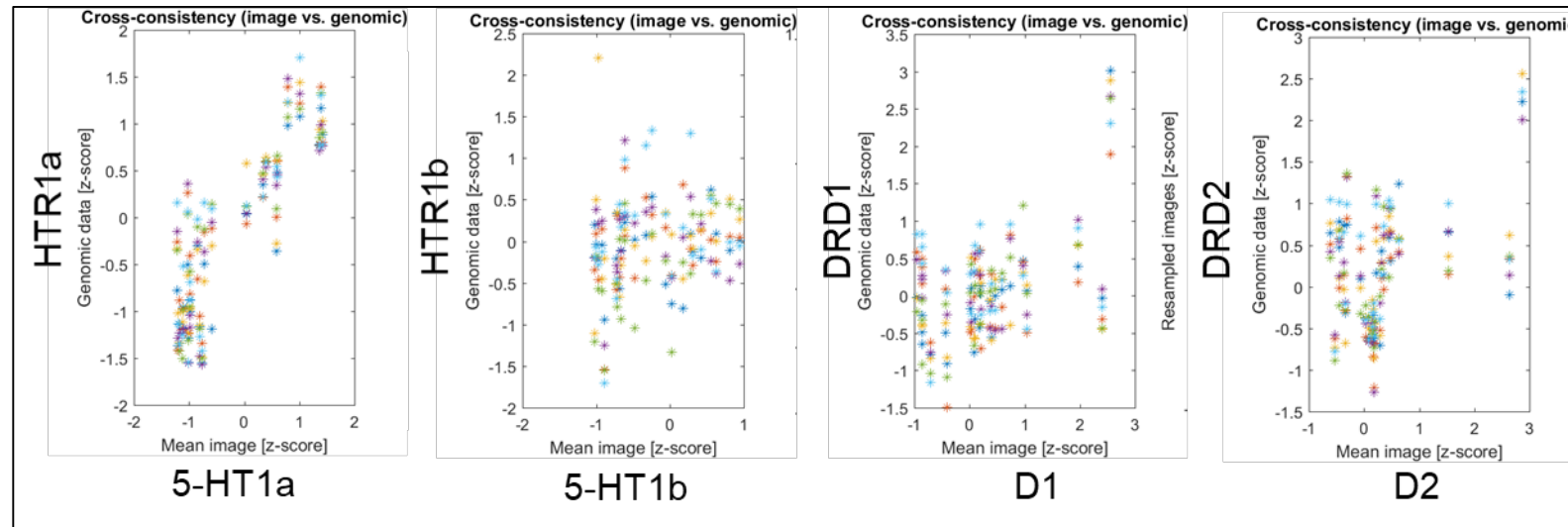
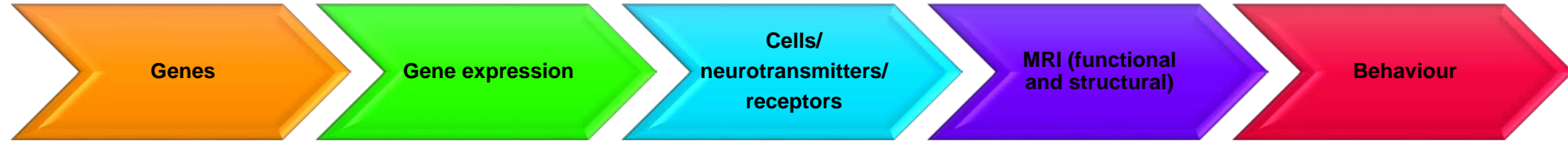


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We need to better understand sources of biological variability



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Correlations between Allen Brain Atlas and group-average in vivo PET receptor maps, unpublished data

Correlations between gene expression and imaging: 0 and 0.7

Genetic auto-correlation:

HTR1a: $r=0.88$

HTR1b: $r=0.16$

D1: $r=0.54$

D2: $r=0.71$

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