

OHBM 2022 Poster MT1052

Convergent brain alterations in insomnia disorder: A revisited neuroimaging meta-analysis





Gerion M. Reimann¹, Vincent Küppers^{1,2}, Julia Camilleri^{1,3}, Felix Hoffstaedter^{1,3}, Robert Langner^{1,3}, Angela R. Laird⁴, Peter T. Fox^{5,6}, Kai Spiegelhalder⁷, Simon B. Eickhoff^{1,3}, Masoud Tahmasian^{1,3}

¹Institute of Neuroscience und Medicine, Brain and Behaviour (INM-7), Research Centre Jülich, Jülich, Germany.; ²Department of Nuclear Medicine, Faculty of Medicine and University Hospital Cologne, University of Cologne, Cologne, Germany; ³Institute for Systems Neuroscience, Medical Faculty, Heinrich Heine University Düsseldorf, Düsseldorf, Germany.; ⁴Department of Physics, Florida International University, Miami, FL, USA; ⁵Research Imaging Institute, University of Texas Health Science Center, San Antonio, TX, USA; ⁶South Texas Veterans Health Care System, San Antonio, TX, USA; ⁷Department of Psychiatry and Psychotherapy, Faculty of Medicine, Medical Center-University of Freiburg, Freiburg, Germany.

Emotion - Negative - Fear

Cognition - Reasoning

Emotion - Positive - Reward/Gain

Likelihood ratio

Introduction & Motivation

- Insomnia disorder (ID) is one of the most common sleep disorders [1].
- Previous meta-analysis (Masoud et al. 2018) showed no region of convergence [2].
- Revision of previous meta-analysis to test whether an increase of sample size yields convergence
- The meta-analysis followed the current best-practice guidelines for neuroimaging meta-analyses [3,4] and the PRISMA statement [5].
- The meta-analysis was preregistered at PROSPERO (CRD42021291597).
- We performed a coordinate-based meta-analysis (CBMA) in form of an activation likelihood estimation (ALE) analysis.
- The function of the found cluster of convergence was investigated by functional decoding
- We examined the connectivity patterns of the found cluster by meta-analytic co-activation modeling (MAMC) and restingstate functional connectivity (RSFC) analysis

Activation Likelihood Estimation

To identify potential brain area(s) that show convergent regional abnormality across the existing literature, the analyses were performed using the revised version of ALE.

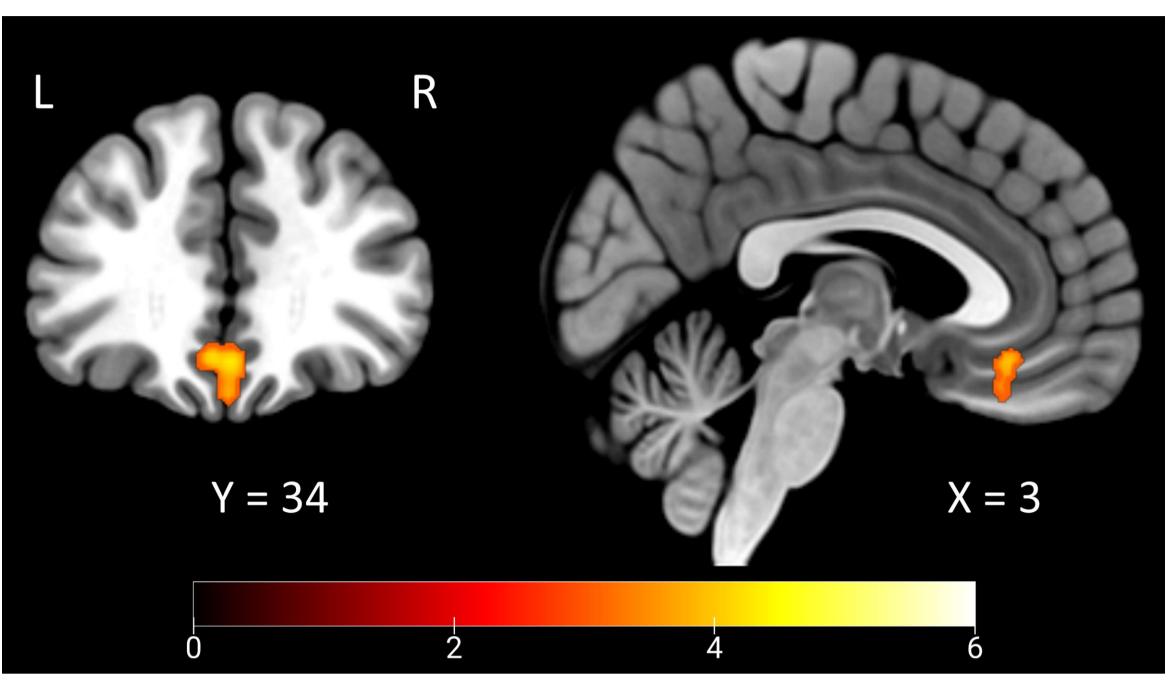


Figure 2: Convergent findings of the analysis on all 26 experiments. Abnormality in the subgenual anterior cingulate cortex (sgACC) (0/34/-14; 139 voxels) (p < 0.05, cFWE corrected). The coordinates are in MNI space.

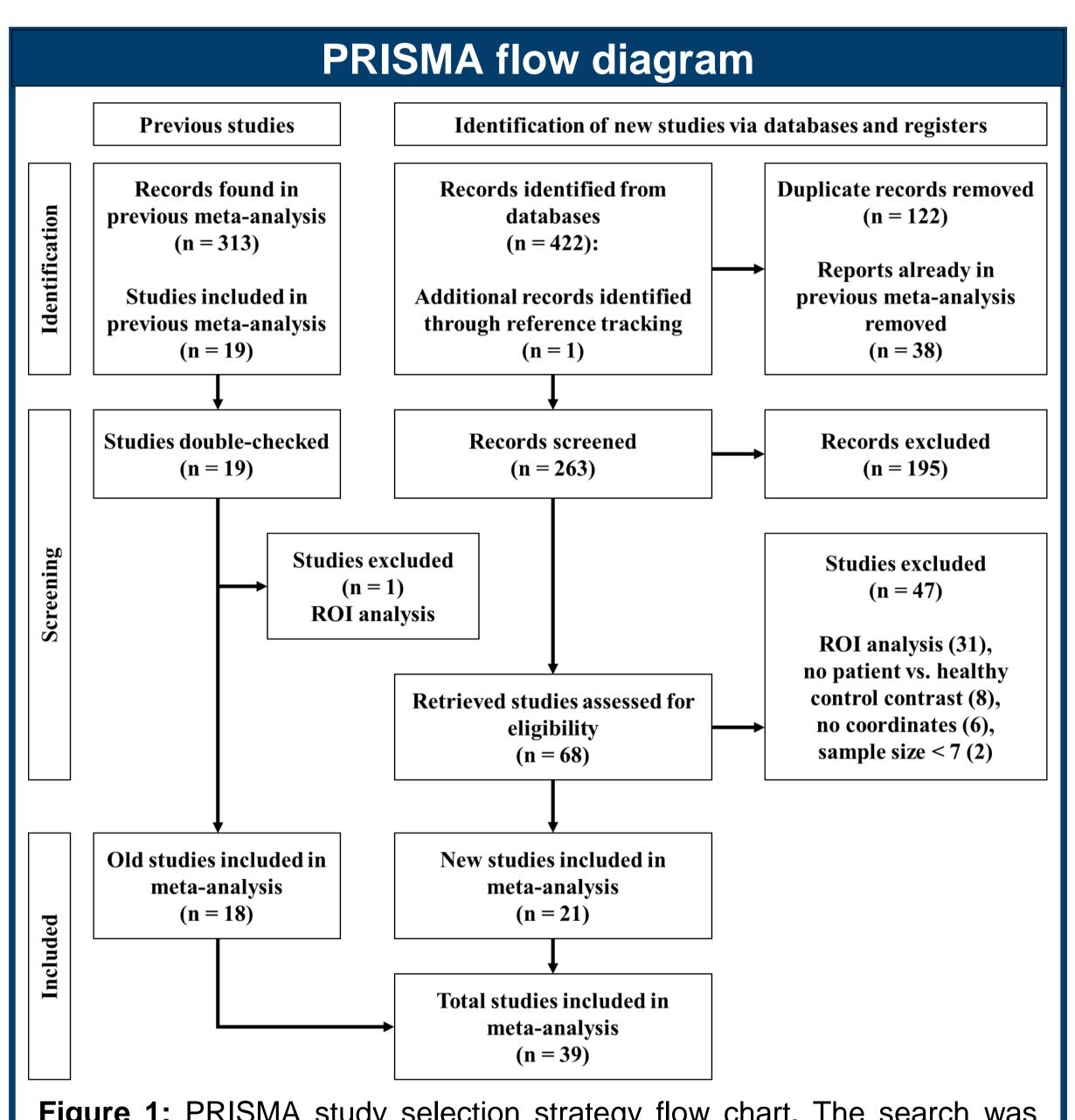


Figure 1: PRISMA study selection strategy flow chart. The search was conducted in October 2021.

Functional Decoding

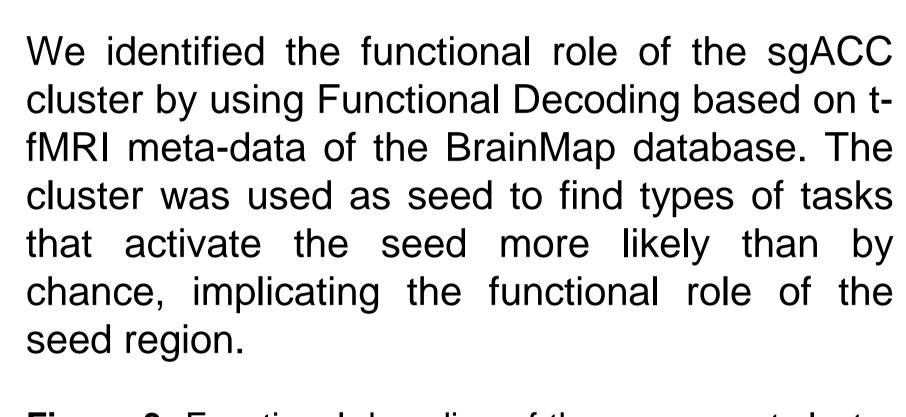


Figure 3: Functional decoding of the convergent cluster in the subgenual anterior cingulate cortex (p < 0.05, FDR corrected).

Search, selection and included studies

- **Databases**: PubMed, Web of Science and BrainMap up to October 2021
 - Inclusion criteria:
 - 1. "Insomnia patient vs healthy control" contrast
 - 2. VBM, PET, rs-fMRI, t-fMRI analysis
 - 3. Whole brain analysis
 - 4. Group size > 6
 - 5. Reported coordinates of significant differences

Table 1: Summary of the included studies with number of studies, experiments, participants, foci, and portion of modalities. Shown are the original meta-analysis of 2018 and the revision of 2022.

		Included studies	Experiment number		Healthy control	
2018	313	19	19	404	395	115
2022	576	39	26	909	969	252

Connectivity Patterns

- A) Task-based functional connectivity (FC) of the found cluster was obtained by performing an MACM on t-fMRI experiments of the BrainMap database. An ALE was conducted on t-fMRI experiments, that activated the seed regions, to find convergence over all their foci, including foci outside the seed, so that robustly coactivated regions can be identified.
- B) Task-free FC was acquired by applying RSFC on 192 healthy adults of the eNKI dataset, with the cluster of convergence as seed.
- C) Both resulting connectivity maps were overlapped to find robust FC of the seed.

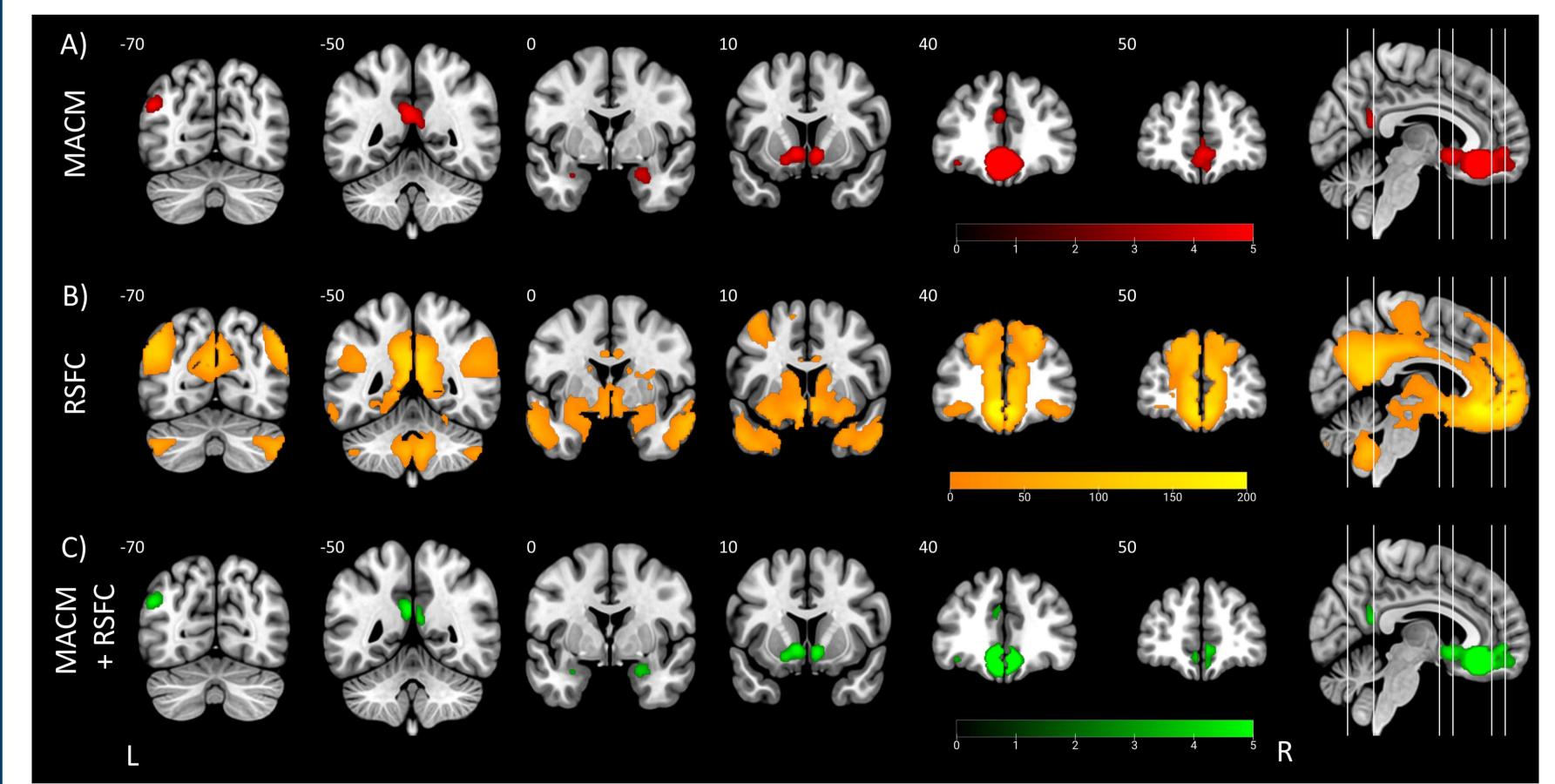


Figure 4: Results of the connectivity analyses of the cluster of found convergence. A) MACM (p < 0.05, cFWE corrected). B) RSFC (p < 0.05, cFWE). C) Conjunction of both analyses. The coordinates are in MNI space.

Conclusion

Convergent structural and functional abnormalities were found in the sgACC in ID patients compared to healthy controls. Moreover, the cluster is associated with emotional processing and reasoning and showed functional connectivity to various regions of the salience and default-mode networks. The sgACC is a promising target for future studies to characterize the pathophysiology of insomnia.

References: [1] Ferrie et al. (2011). Sleep epidemiology--a rapidly growing field. Int J Epidemiol, 40(6):1431–7; [2] Tahmasian et al. (2018). A lack of consistent brain alterations in insomnia disorder: An activation likelihood estimation meta-analysis. Sleep Medicine Reviews, 42:111–8; [3] Müller et al. (2018). Ten simple rules for neuropsychiatric disorders. Hum Brain Mapp, 40(17):5142–54; [5] Page et al. (2021). The PRISMA 2020 statement: an updated guideline for reporting systematic reviews. BMJ, 372:n71.