

Differences in Adolescent Cortex Related to Age and Sex: Initial Findings from the National Consortium on Alcohol & NeuroDevelopment in Adolescence

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NCANDA FUNDING: NIAAA, NIDA, NIMH, NICHD



FINANCIAL INTEREST DISCLOSURES

Adolf Pfefferbaum, M.D.

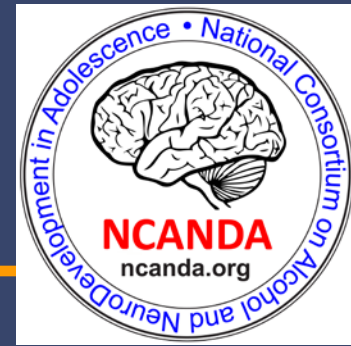
Salary and research support:



Center for Health Sciences



**National Institute
on Alcohol Abuse
and Alcoholism**



Differences in Adolescent Cortex Related to Age and Sex: Initial Findings from the National Consortium on Alcohol & NeuroDevelopment in Adolescence

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Life span and excessive alcohol consumption

Prenatal Fetal Alcohol Syndrome

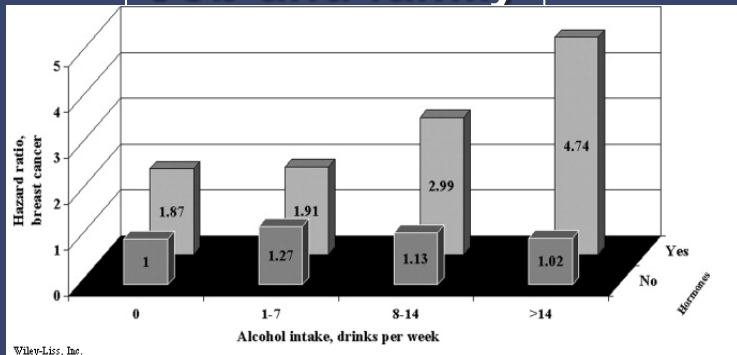


Photo courtesy of
Teresa Kellerman

Teenage and Young Adulthood Binge drinking Drunk driving Unsafe sex

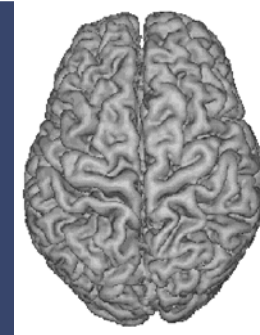


Adulthood Hypertension Breast cancer Liver disease Job and family

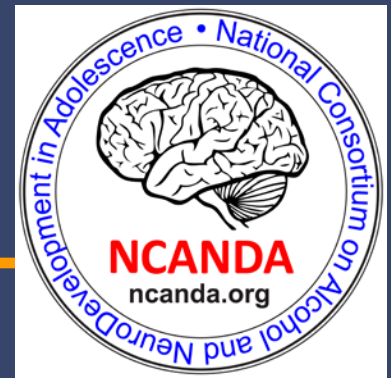


Wiley-Liss, Inc.
Nielsen et al, IntJCancer, 2007.

Maturity Brain damage Cognitive impairment



NCANDA MRI

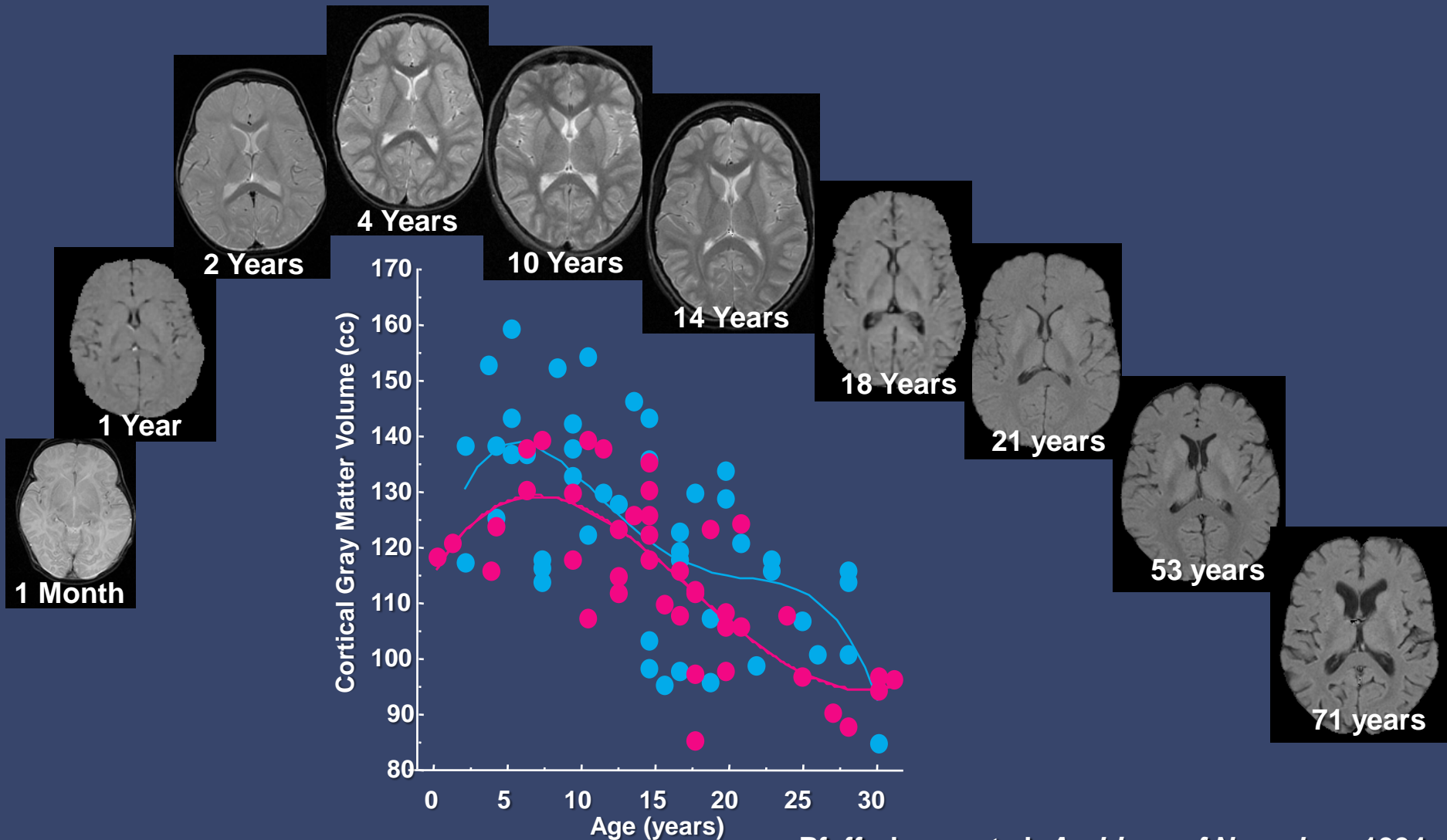


- ◆ Age
- ◆ Headsize / Supratentorial Volume
- ◆ Sex
- ◆ Ethnicity
- ◆ Prior Alcohol Exposure

Human Brain Growth after Birth

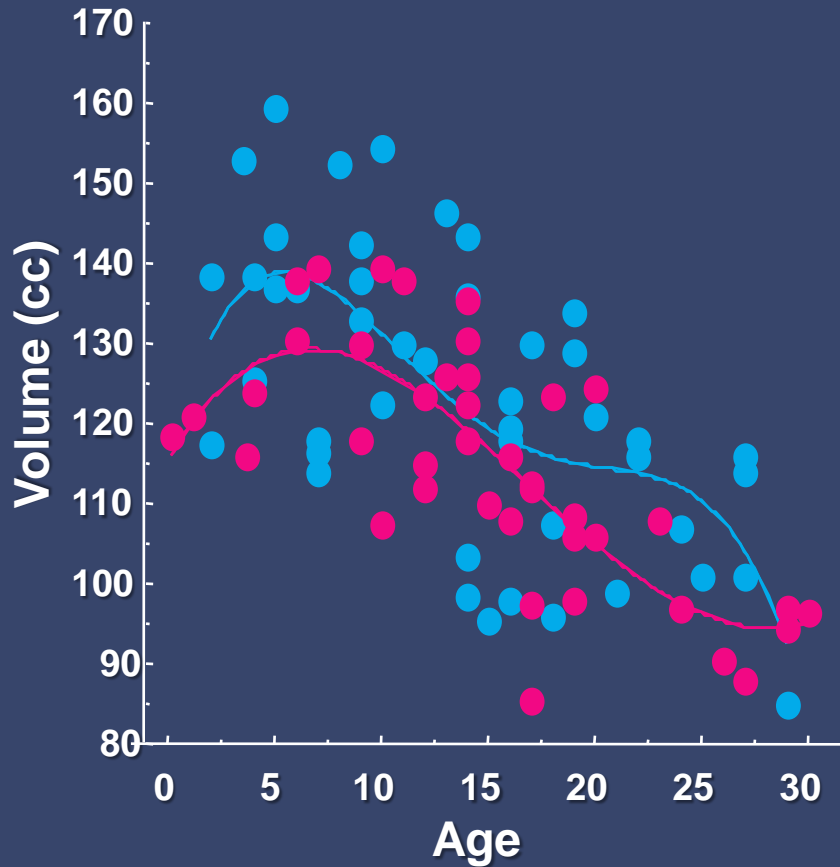
- ◆ Brain weight increases fourfold from birth to about 10 years of age
- ◆ Gray matter, white matter, and CSF volumes expand but at different rates in different regions of brain

Rise and Fall of Cortical Gray Matter Volume

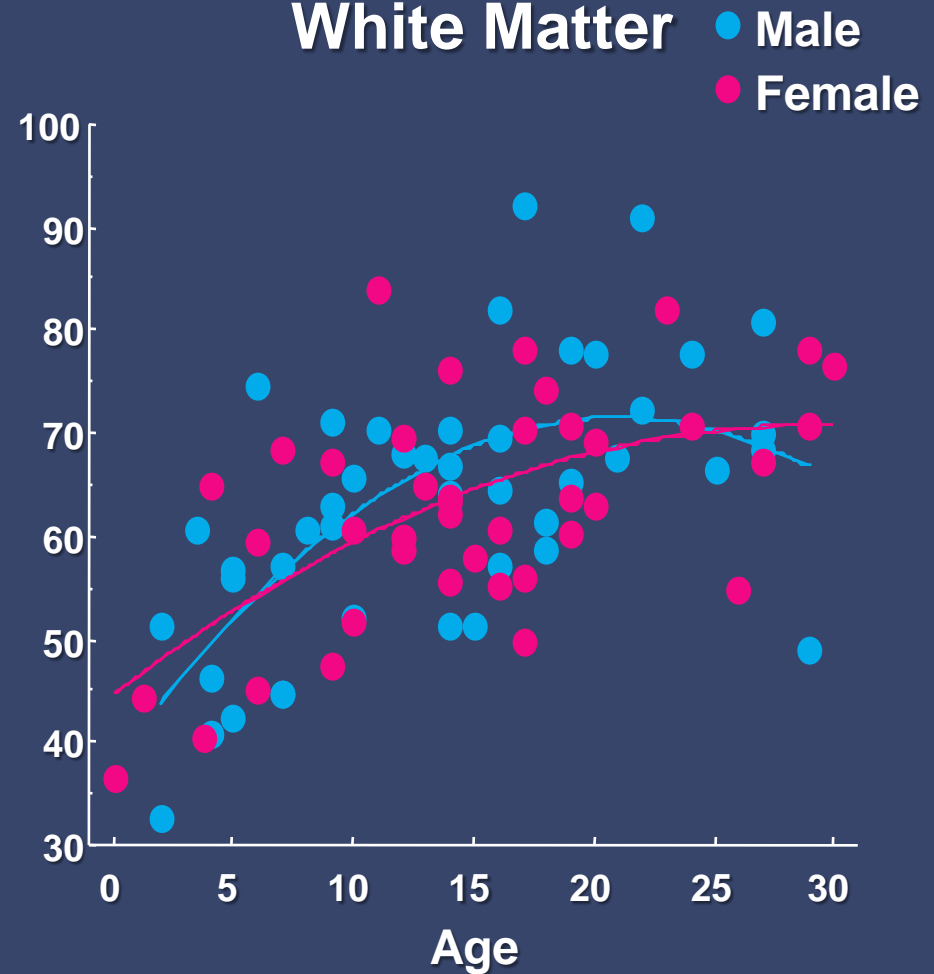


Cortical Tissue Volumes

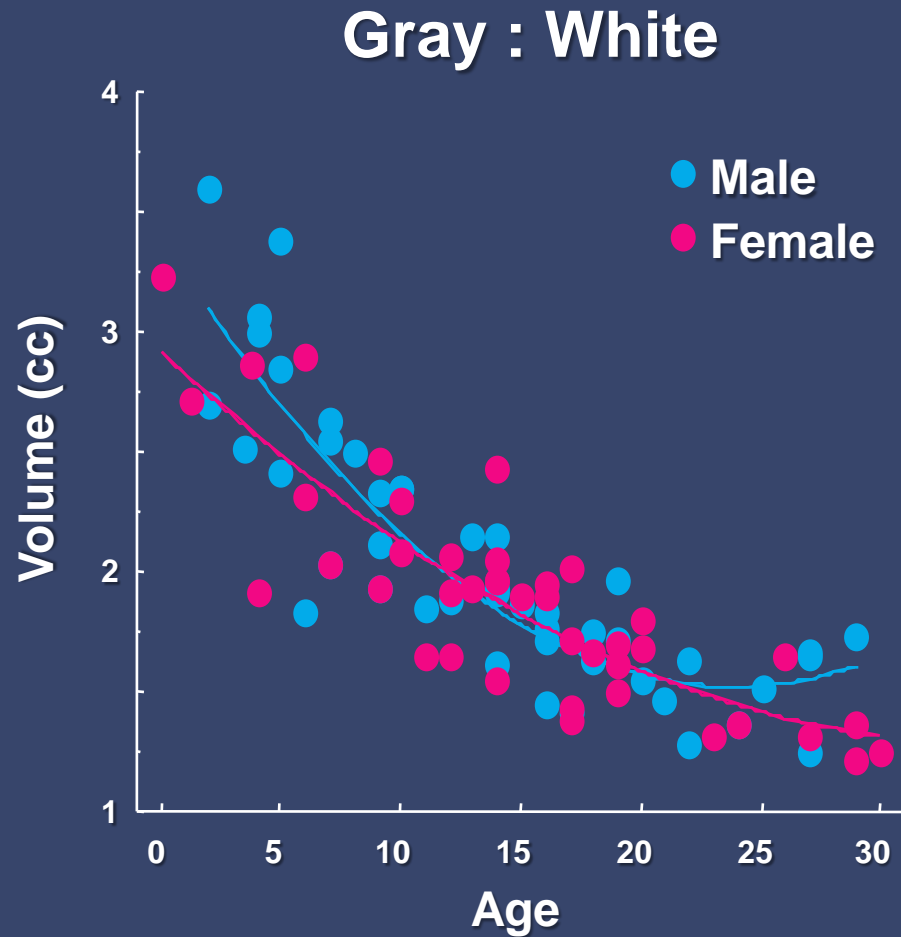
Gray Matter



White Matter



Gray to White Matter Ratio



Development of Cortex

Age Differences in PET Local Glucose Metabolism

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HARRY T. CHUGANI

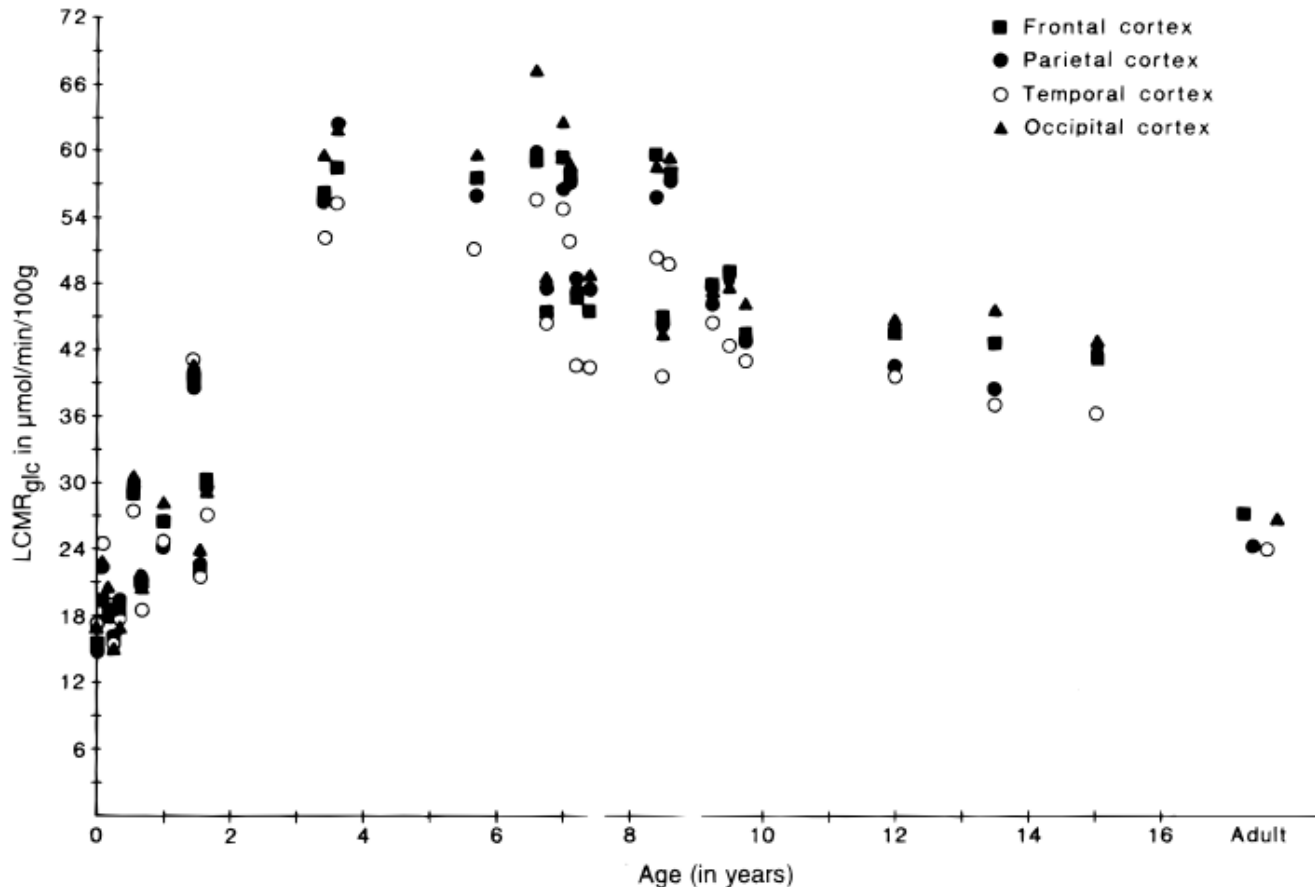
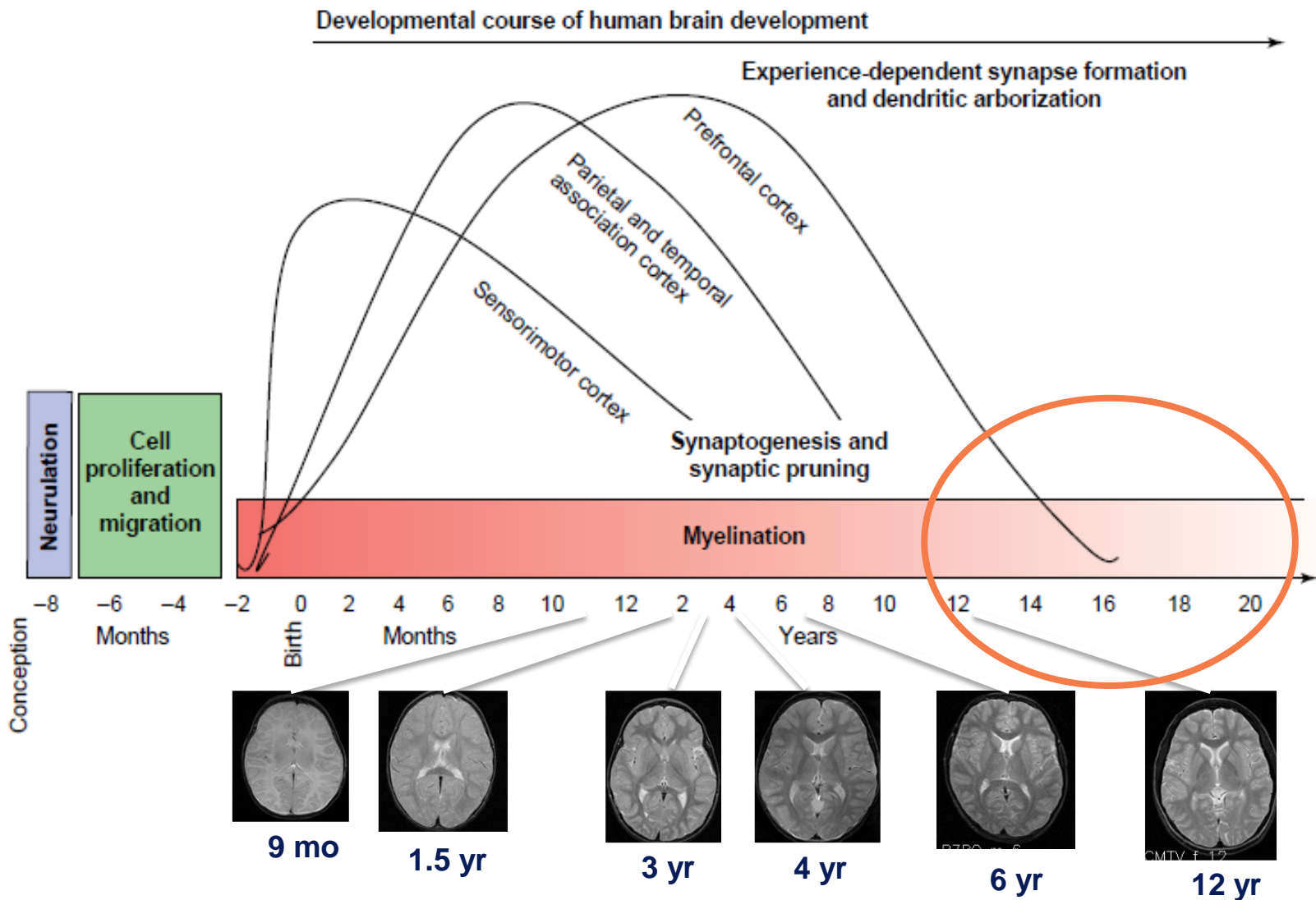


FIG. 4. Absolute values of LCMRglc in cerebral cortex plotted as a function of age in normal infants and children, and corresponding values in seven normal young adults.

Brain Development after Birth

Heterochronicity of Structural Modeling



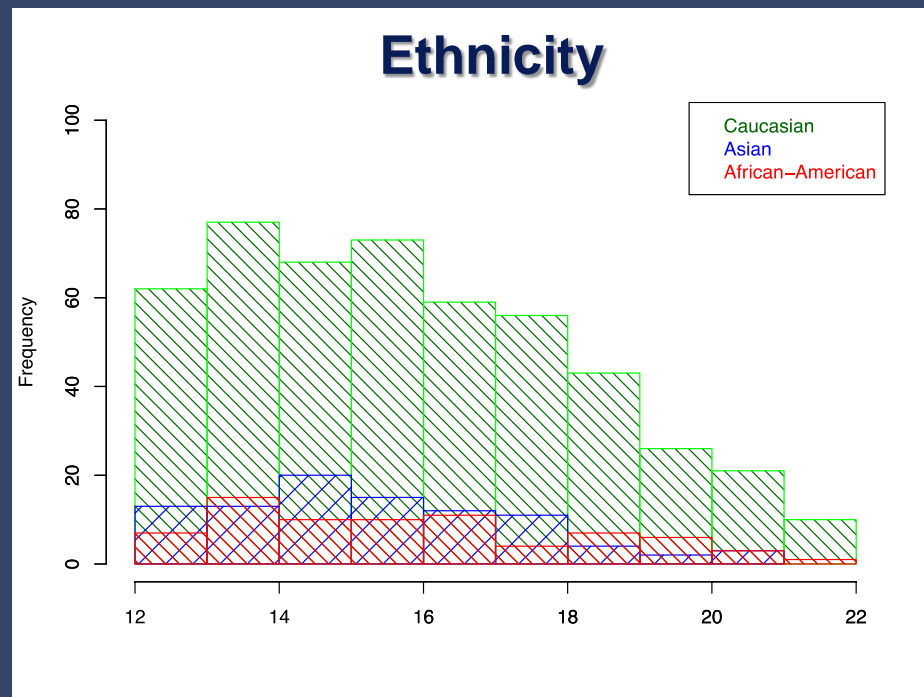
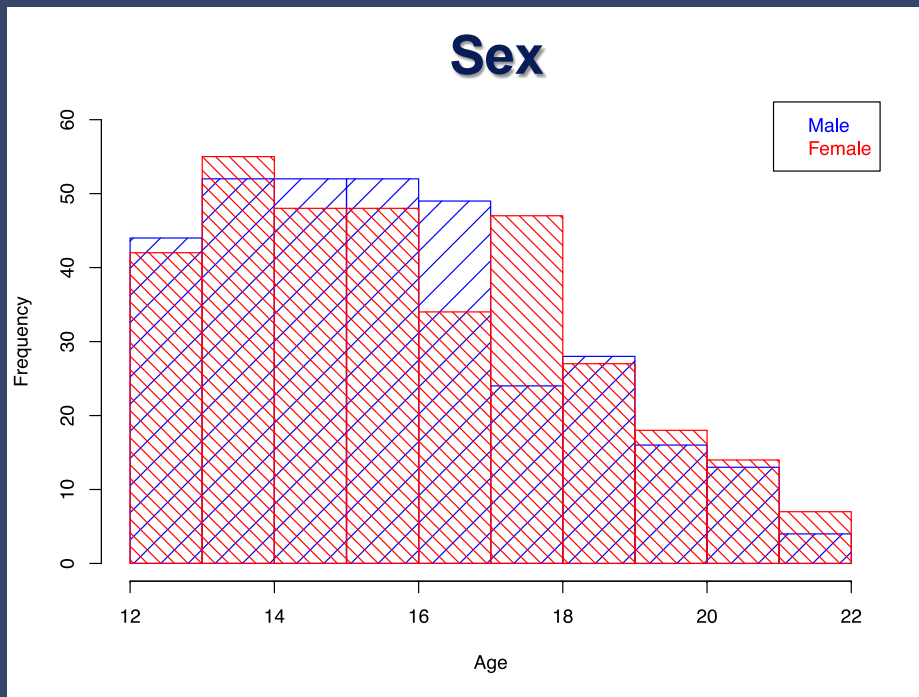
NCANDA

Prospective Study



- ◆ National Consortium on Alcohol and NeuroDevelopment in Adolescence (NCANDA)
- ◆ 5 U.S. recruitment sites
- ◆ 647 no/low drinking
 - 334 male, 340 female
- ◆ 134 exceeded criteria
- ◆ Age 12-14, 15-17, 18-21 years
- ◆ **Baseline** + annual visits
 - Clinical interview
 - Neuropsychological testing
 - 3T MRI, DTI, resting state-fMRI

NCANDA Sample



Basic NCANDA MRI Protocol

Localizer: 3-Plane Fast Gradient Recalled Echo

(TR=5, TE=1.5, Thick=5.0, Loc=150, FOV=240, xy_matrix=256x128)

T1-weighted structural acquisition: 3D Sagittal IRprep SPGR*

(TR=7, TE=3, TI=640, Thick=1.2, Loc=150, FOV=240, xy_matrix=256x256, Resolution=.9375x.9375x1.2 mm)

T2-weighted structural acquisition: 3D Sagittal Fast Spin-Echo *

(TR=2500, Effective TE=80, ETL=100, Thick=1.2, Loc=150, FOV=240, xy_matrix=256x256, Resolution=.9375x.9375x1.2 mm, Fat Sat=on)

Diffusion Tensor acquisition: 2D Axial Spin Echo Echo-Planar - b=0/1000, 60 directions**

(TR=10,000, TE=85, Thick=2.5, Loc=65, FOV=240, xy_matrix=96x96, Phase = A/P, Partial k-space (48/64), Acceleration=2, Resolution=2.5x2.5x2.5 mm, Fat Sat=on)

Resting state fMRI: 2D Axial Gradient-Recalled Echo-Planar - 275 TRs=10 min.

(TR=2200ms, TE=30ms, Flip angle=79°, Thick=5 mm, Loc=32, FOV=240, xy_matrix=64x64, Phase = A/P, Resolution=3.75x3.75x5 mm, Fat Sat=on, Respiration and pulse recorded)

Field Map (for Resting state fMRI B0 inhomogeneity correction): 2D Axial Gradient-Recalled Echo (GRE)

(TR=460 ms, TE=3 and 5 ms, Thick=2.5 mm, Loc=65, FOV=240, xy_matrix=96x96, Resolution=2.5x2.5x2.5 mm, Save Real, Imaginary and Magnitude data)

* Prospective motion correction with replacement of up 10% of excitations exceeding a variance threshold.

** DTI acquisition will include an additional b=0 image with the echo-planar readout in the opposite direction for B0 inhomogeneity correction without a field map and across-site common 60 gradient direction table.

Sagittal acquisition will extend from ear to ear, top of the scalp and inferior below bottom of cerebellum - locating the superior/inferior midpoint at the top of the corpus callosum usually is adequate.

Axial slice order will be from inferior to superior (I/S). Axial acquisitions must begin at least one slice below the bottom of the cerebellum and extend to or above the top of the scalp.]

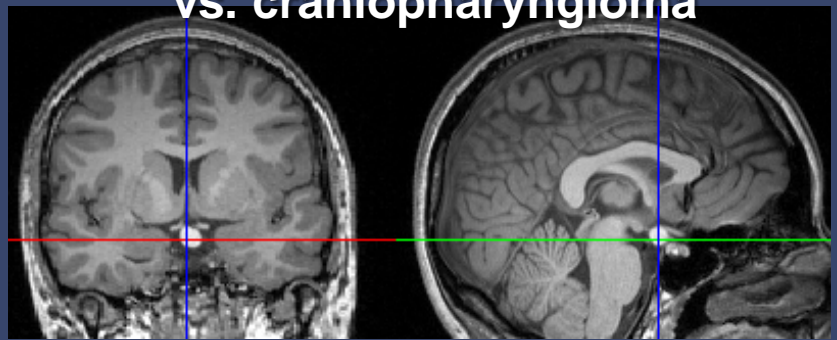
Anomalies Identified on Clinical Readings in 95 Adolescents*

- 24 mega cisterna magna
 - 15 subarachnoid cysts (primarily temporal and frontal)
 - 12 pineal cysts
 - 11 white matter anomalies (primarily corpus cysts)
 - 6 tonsillar ectopias
 - 5 very prominent perivascular spaces
 - 5 gray matter heterotopias
 - 4 pituitary masses (primarily cysts)
 - 4 abnormally large or asymmetrical lateral ventricles
 - 4 cavum septum pellucidum
 - 3 developmental venous anomalies (DVA)
 - 1 severe cranio-cervical junction stenosis (10/30 mm)
 - 1 *right parietal cortical mass (3 cm)
 - 1 *bilateral tonsillar herniation, medullary distortion (Chiari 1 malformation)
- *excluded from NCANDA cohort

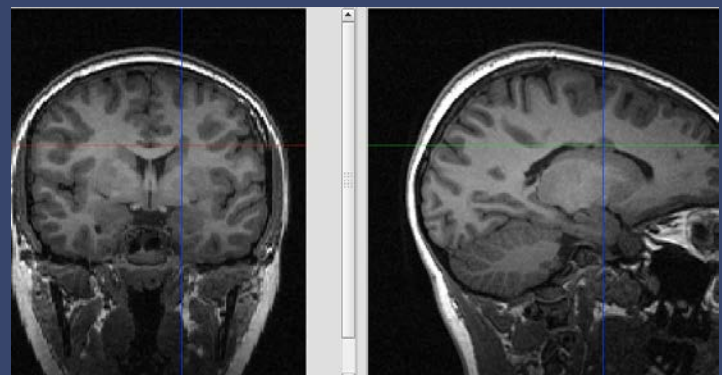
95/833 adolescents = 11.4%
23 excluded from parcellation
*2 excluded from the study

Anomalies Identified on Clinical Readings

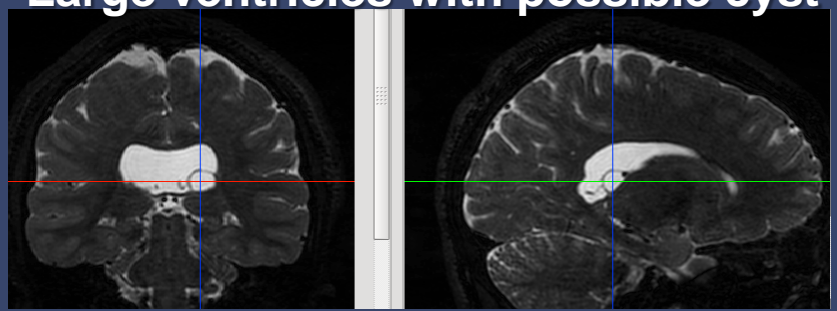
Probable congenital Rathke's cleft cyst vs. craniopharyngioma



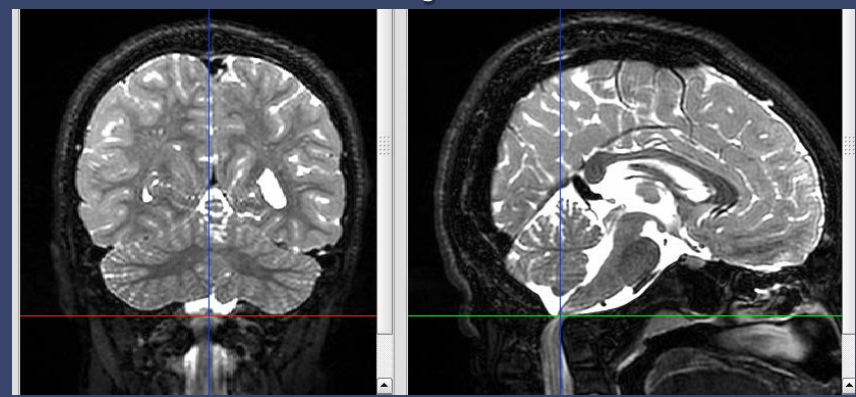
Subependymal heterotopia



Large ventricles with possible cyst

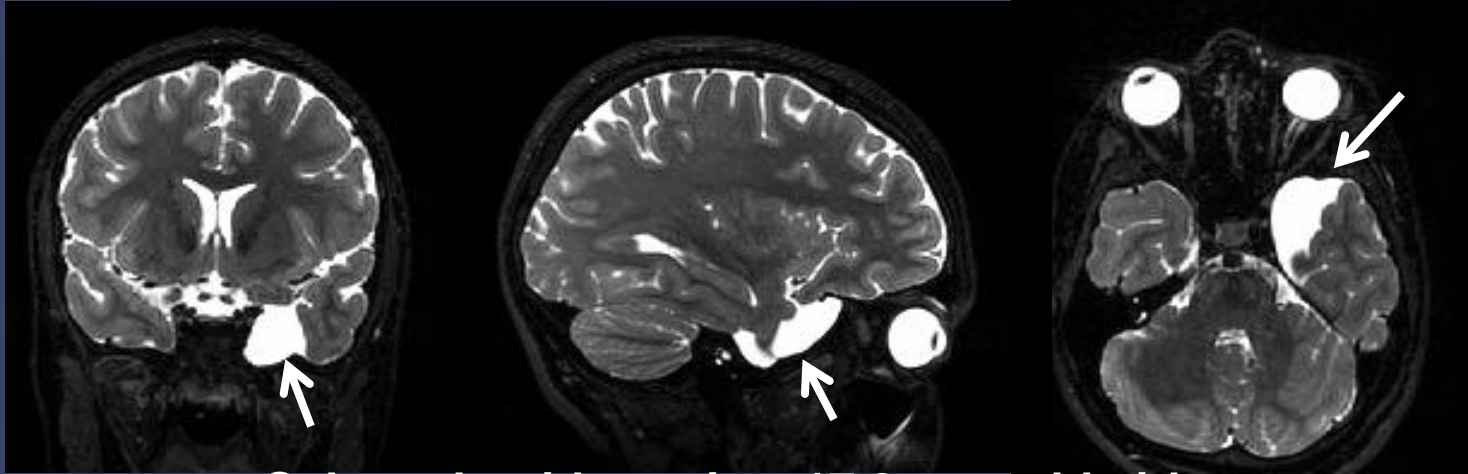


Cranio-cervical junction stenosis

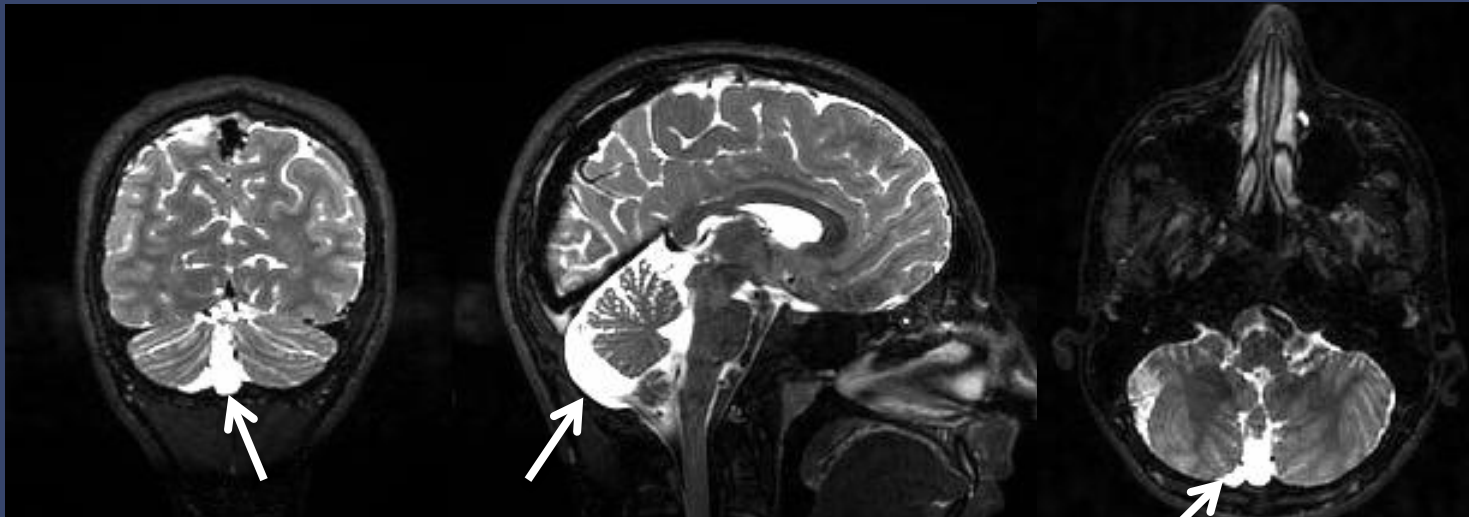


Anomalies Identified on Clinical Readings

Some Precluding Automated Quantification



Subarachnoid cyst in a 17.0 year old girl

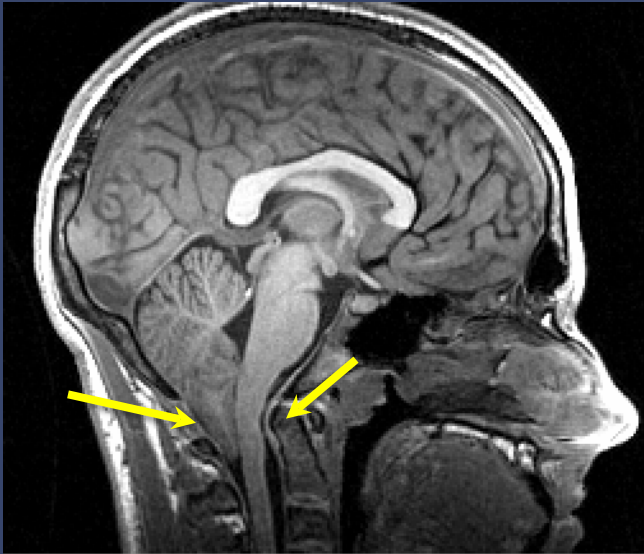


Mega cisterna magna in a 15.5 year old boy

Abnormalities on Clinical Readings

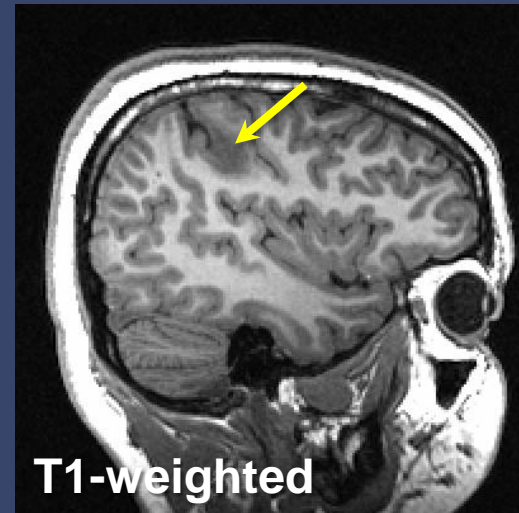
Excluded from Further Study

Chiari 1 malformation

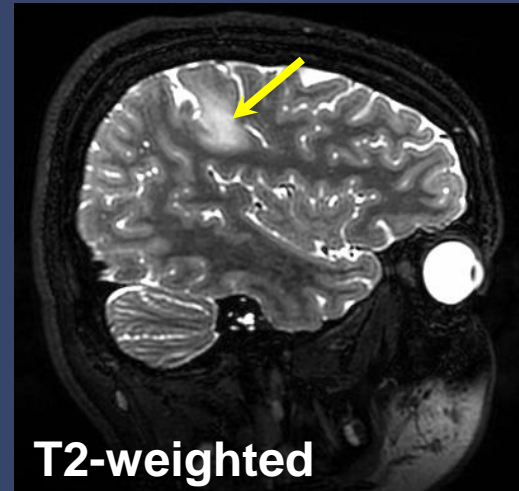


bilateral tonsillar herniation
with medullary distortion

right parietal cortical mass



T1-weighted



T2-weighted

NCANDA Data Analysis Team



Torsten Rohlfing, Ph.D.

NCANDA Data Analysis Team



Kilian Pohl, Ph.D.



Nolan Nichols, Ph.D.

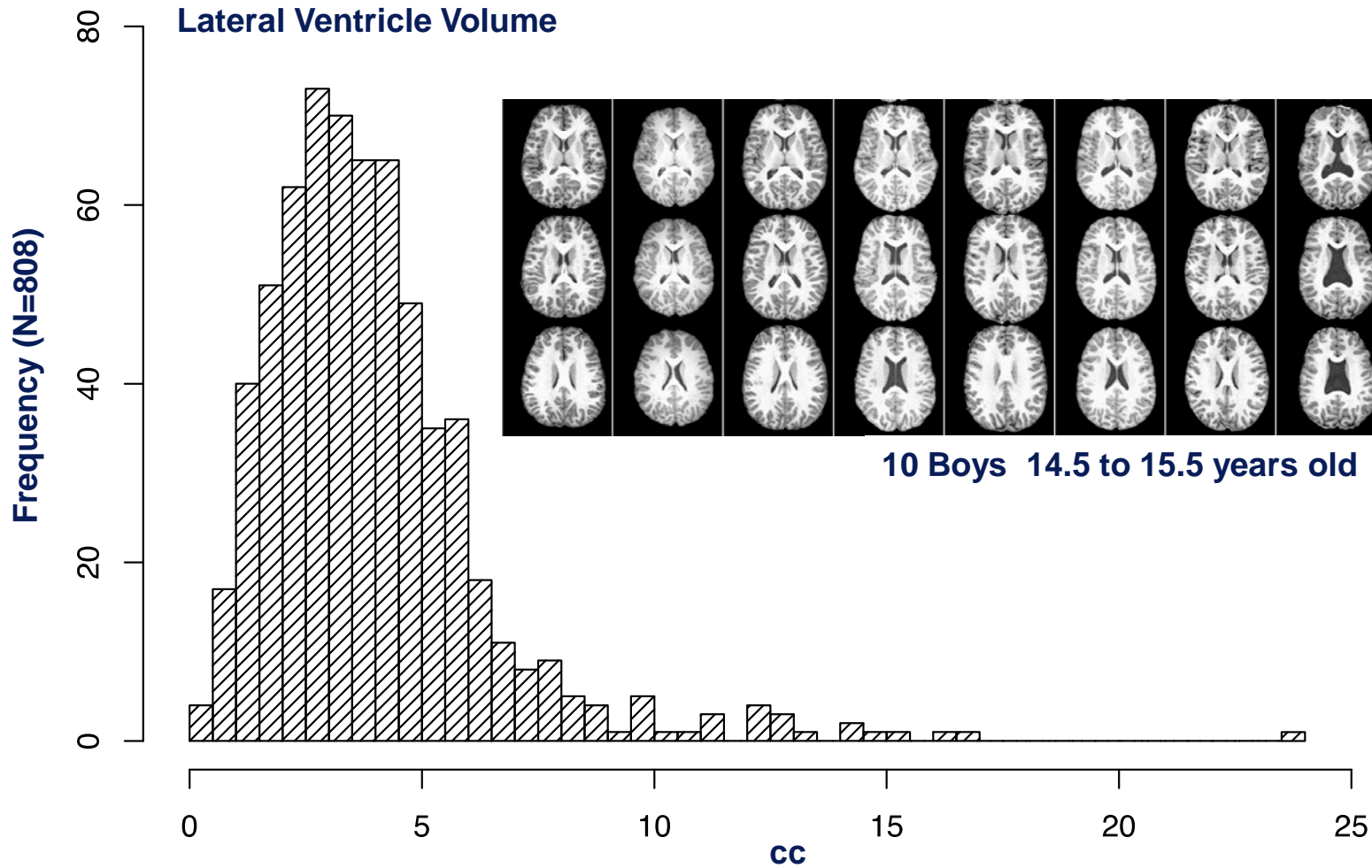


Dongjin Kwon, Ph.D.



Yong Zheng, Ph.D.

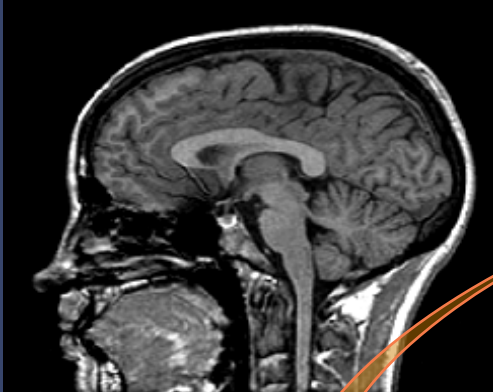
Lateral Ventricle Volume



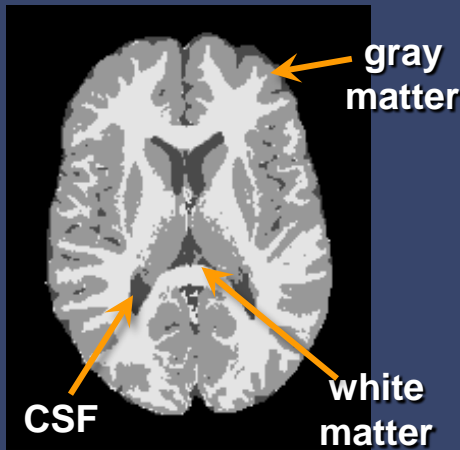
Structural MRI

Quantitative Measures of Regional Brain Tissue

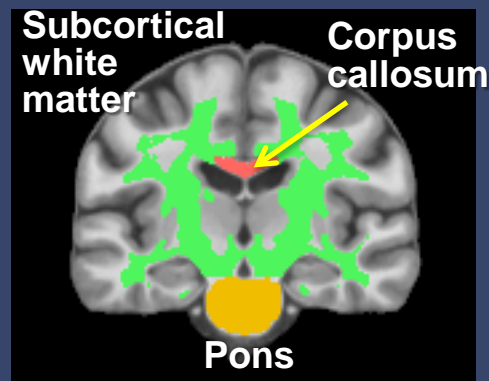
Structural MRI



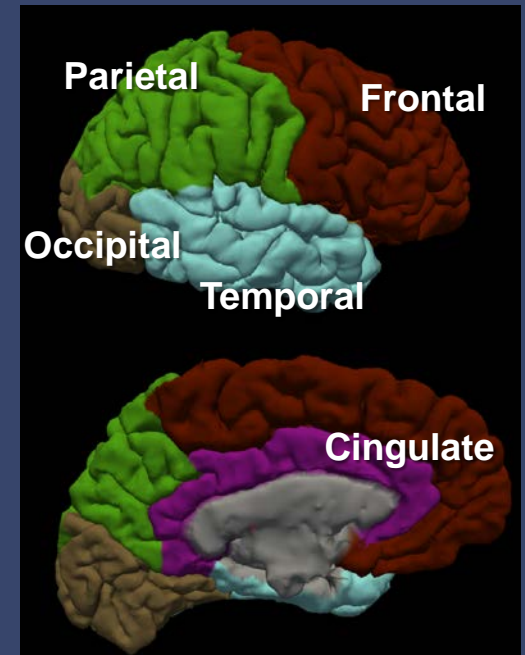
◆ Tissue Segmentation



SRI24 White Matter Regions



FreeSurfer Gray Matter Regions



Structural MRI

FreeSurfer Cortical Lobar Volume, Surface & Thickness

Frontal

Superior Frontal
Rostral and Caudal Middle Frontal
Pars Opercularis, Pars Triangularis, and Pars Orbitalis
Lateral and Medial Orbitofrontal
Precentral
Paracentral
Frontal Pole

Temporal

Superior, Middle, and Inferior Temporal
Banks of the Superior Temporal Sulcus
Fusiform
Transverse Temporal
Entorhinal
Temporal Pole
Parahippocampal

Insula

Parietal

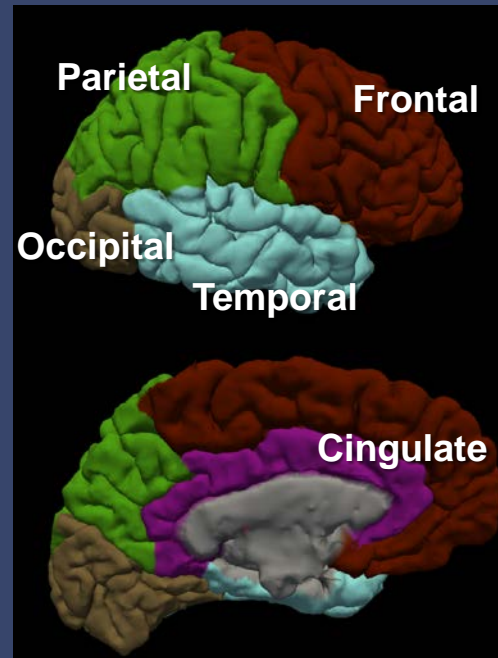
Superior Parietal
Inferior Parietal
Supramarginal
Postcentral
Precuneus

Occipital

Lateral Occipital
Lingual
Cuneus
Pericalcarine

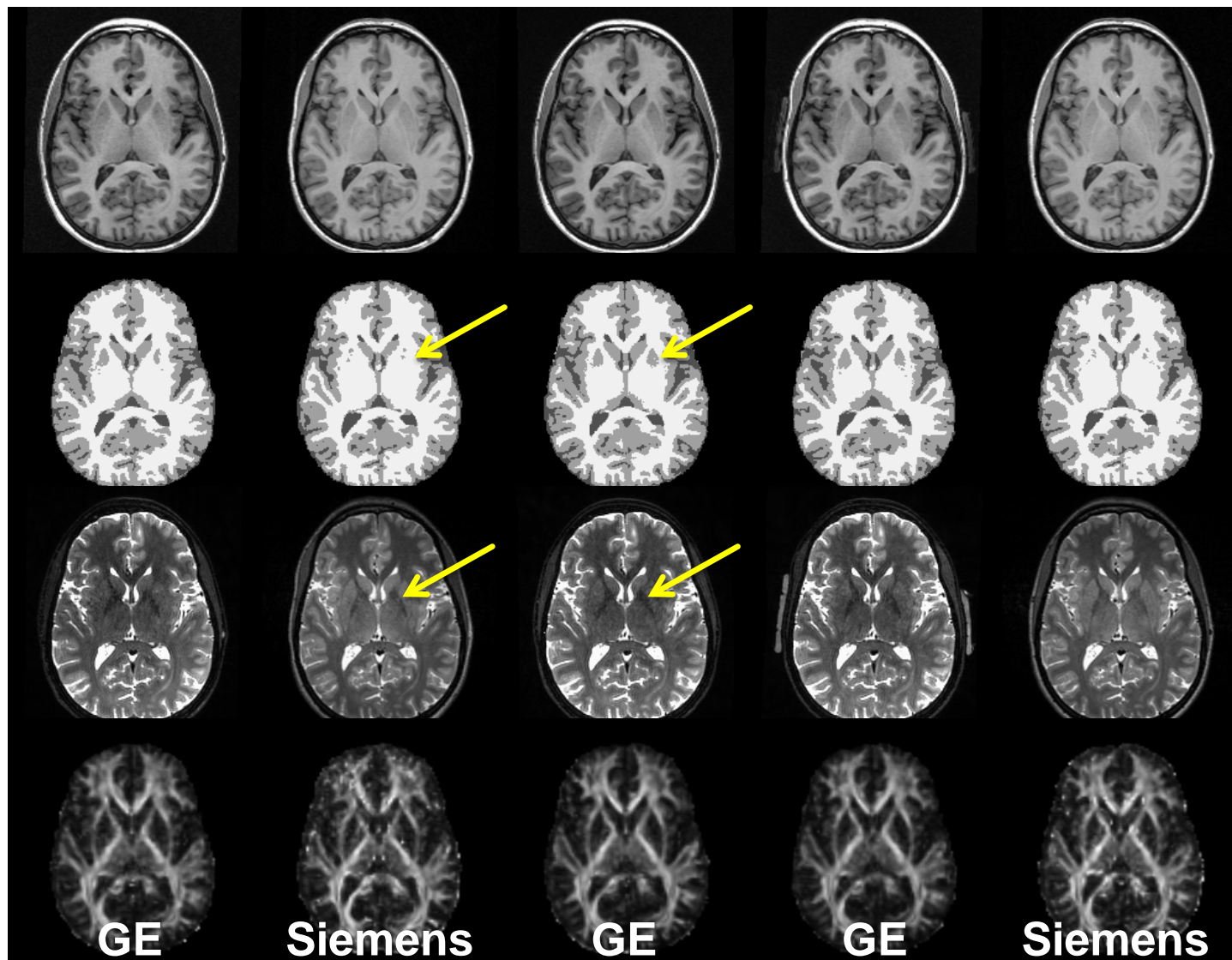
Cingulate

Rostral Anterior (Frontal)
Caudal Anterior (Frontal)
Posterior (Parietal)
Isthmus (Parietal)



Human Phantom across Site/Scanner

Harmonization Across 3 GE Sites and 2 Siemens Sites



NCANDA MRI



Brain region \sim age + covariates (sex, ethnicity, SES, etc)

General Additive Model (GAM)

Linear:

$$brain_i \sim \mathbb{R}_0 + \mathbb{R}_1 age_i + \mathbb{R}_2 mfg_i + \mathbb{R}_3 ses_i + \mathbb{R}_4 ethnicity_i + \mathbb{R}_5 sex_i + \sum_i$$

Non-linear:

$$brain_i \sim S_0(age_i) + \mathbb{R}_1 mfg_i + \mathbb{R}_2 ses_i + \mathbb{R}_3 ethnicity_i + \mathbb{R}_4 sex_i + \sum_i$$

Cross-platform Harmonization done with GAM

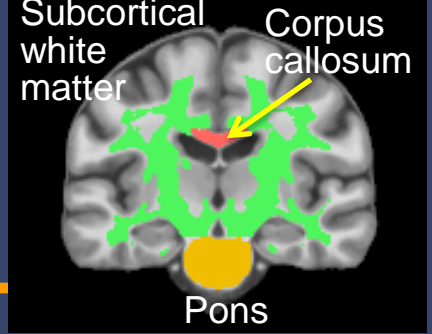
NCANDA MRI



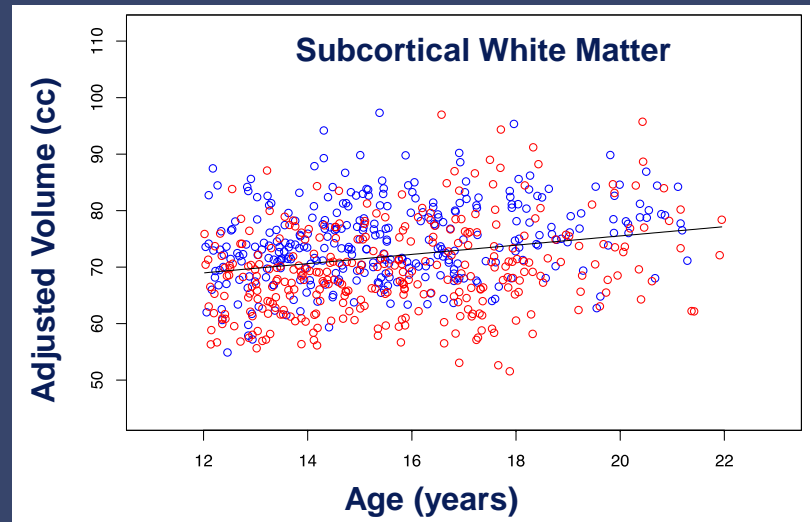
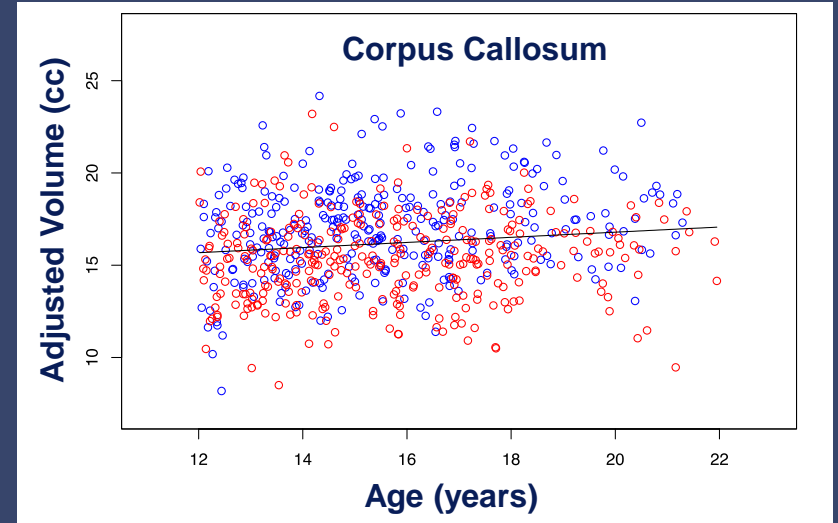
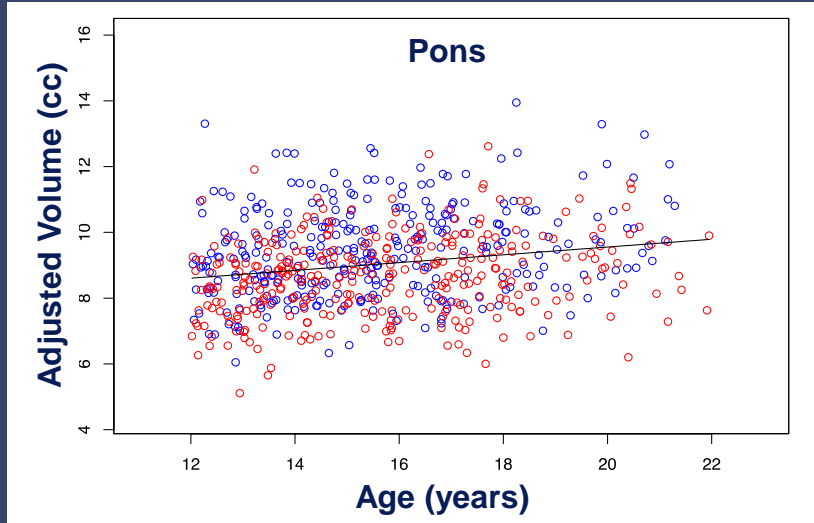
- ◆ Age
- ◆ Headsize / Supratentorial Volume
- ◆ Sex
- ◆ Ethnicity
- ◆ Prior Alcohol Exposure

NCANDA Cohort

Baseline MRI by Age and Sex

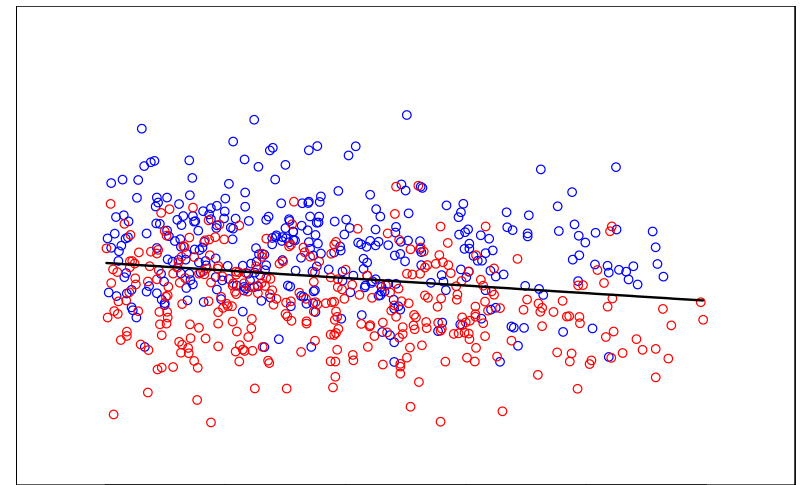
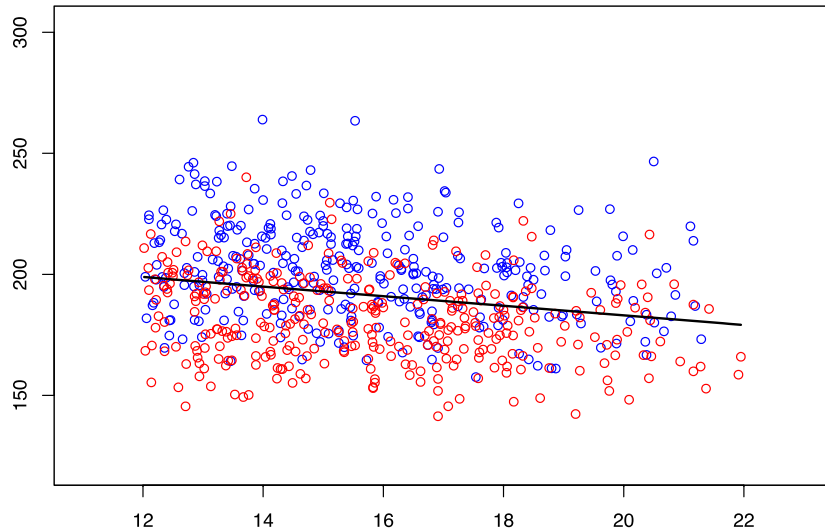
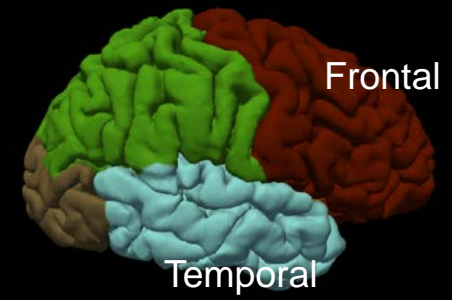


Regional White Matter Volumes



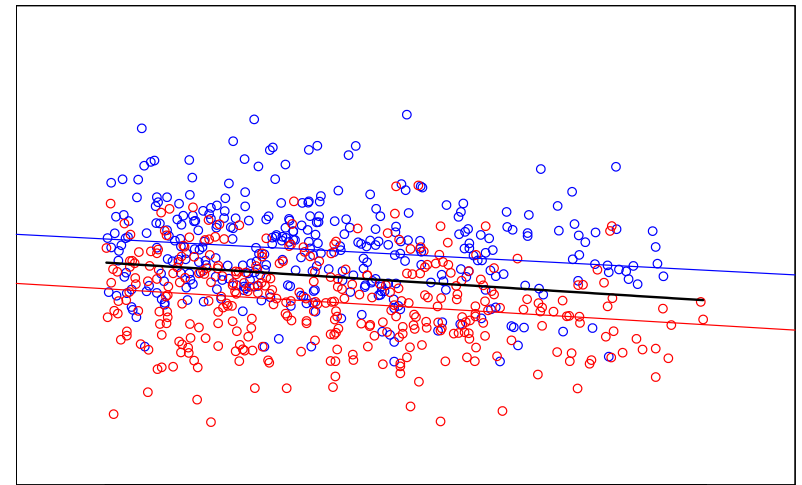
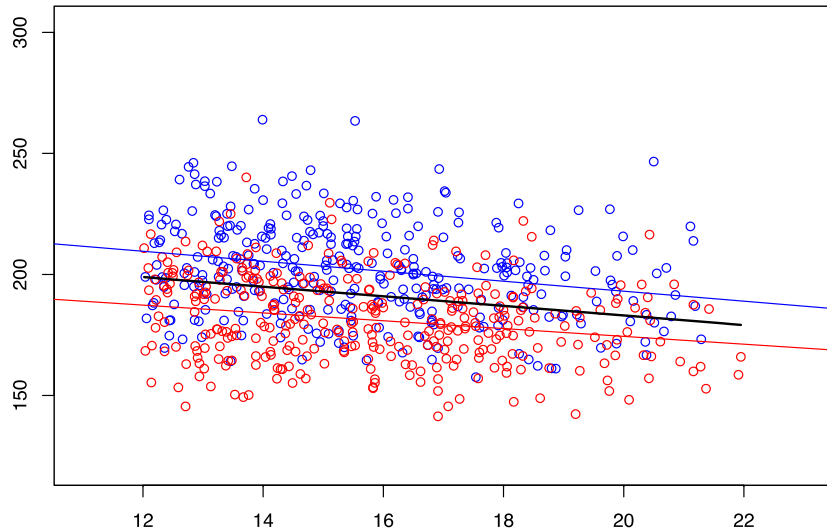
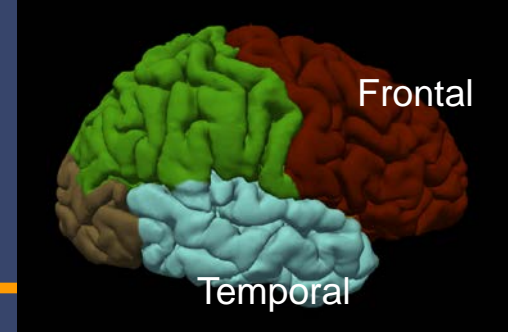
NCANDA Cohort

Baseline MRI by Age and Sex



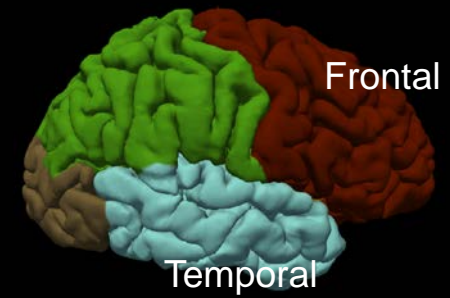
NCANDA Cohort

Baseline MRI by Age and Sex

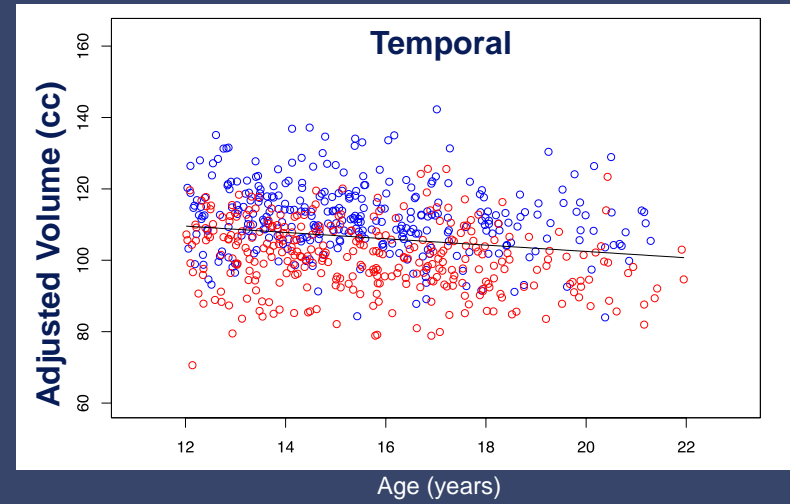
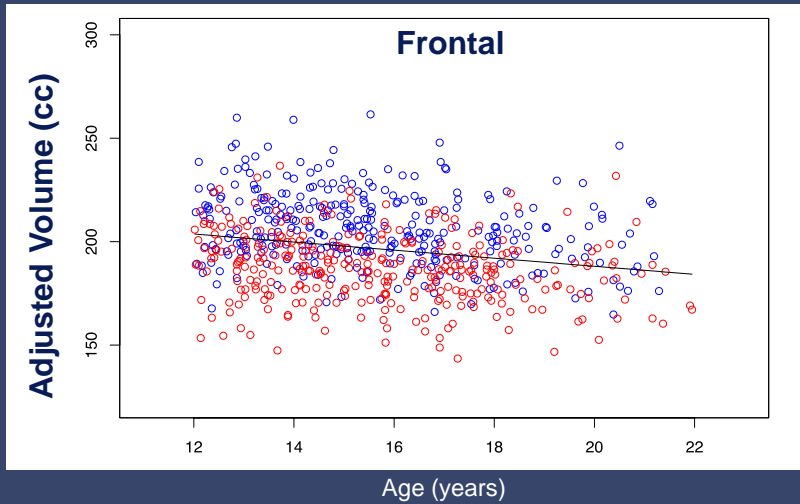


NCANDA Cohort

Baseline MRI by Age and Sex

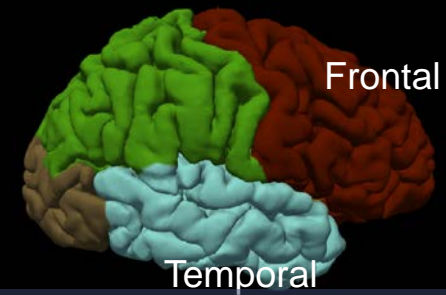


Regional Cortical Volumes

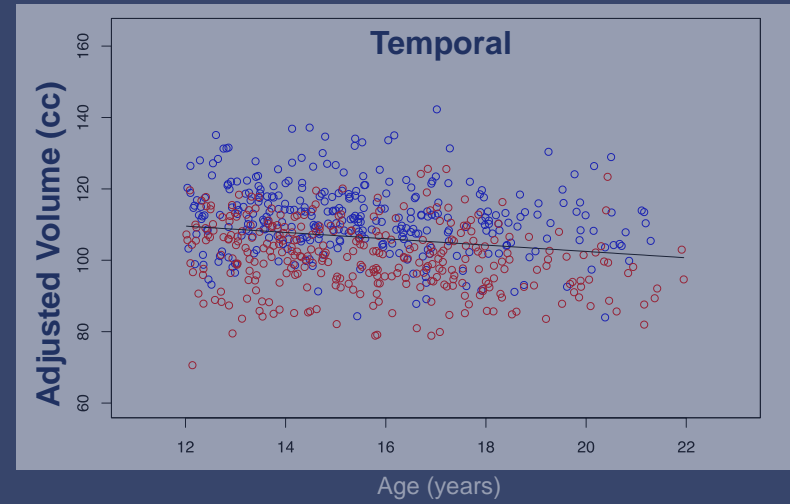
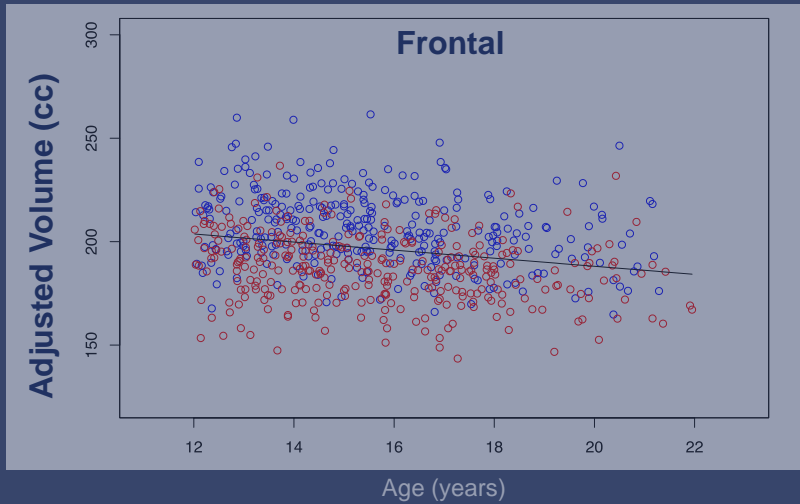


NCANDA Cohort

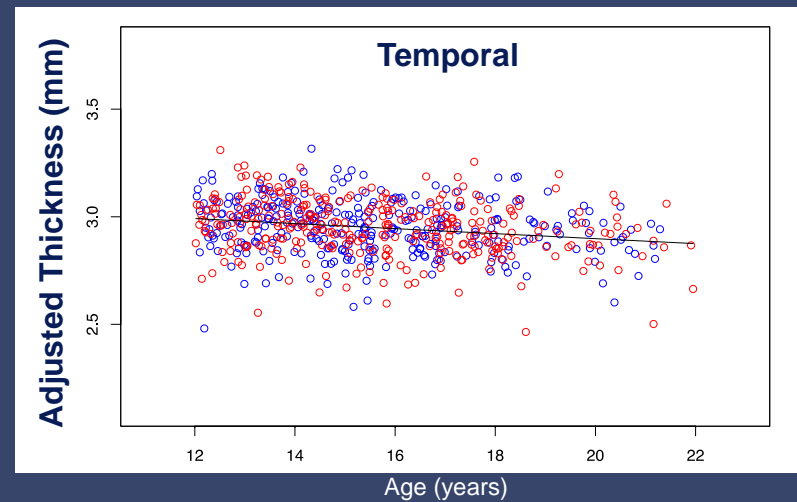
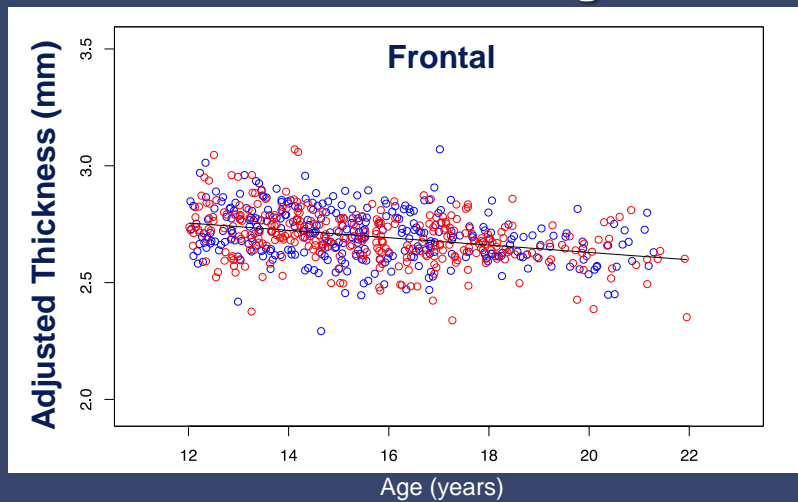
Baseline MRI by Age and Sex



Regional Cortical Volumes

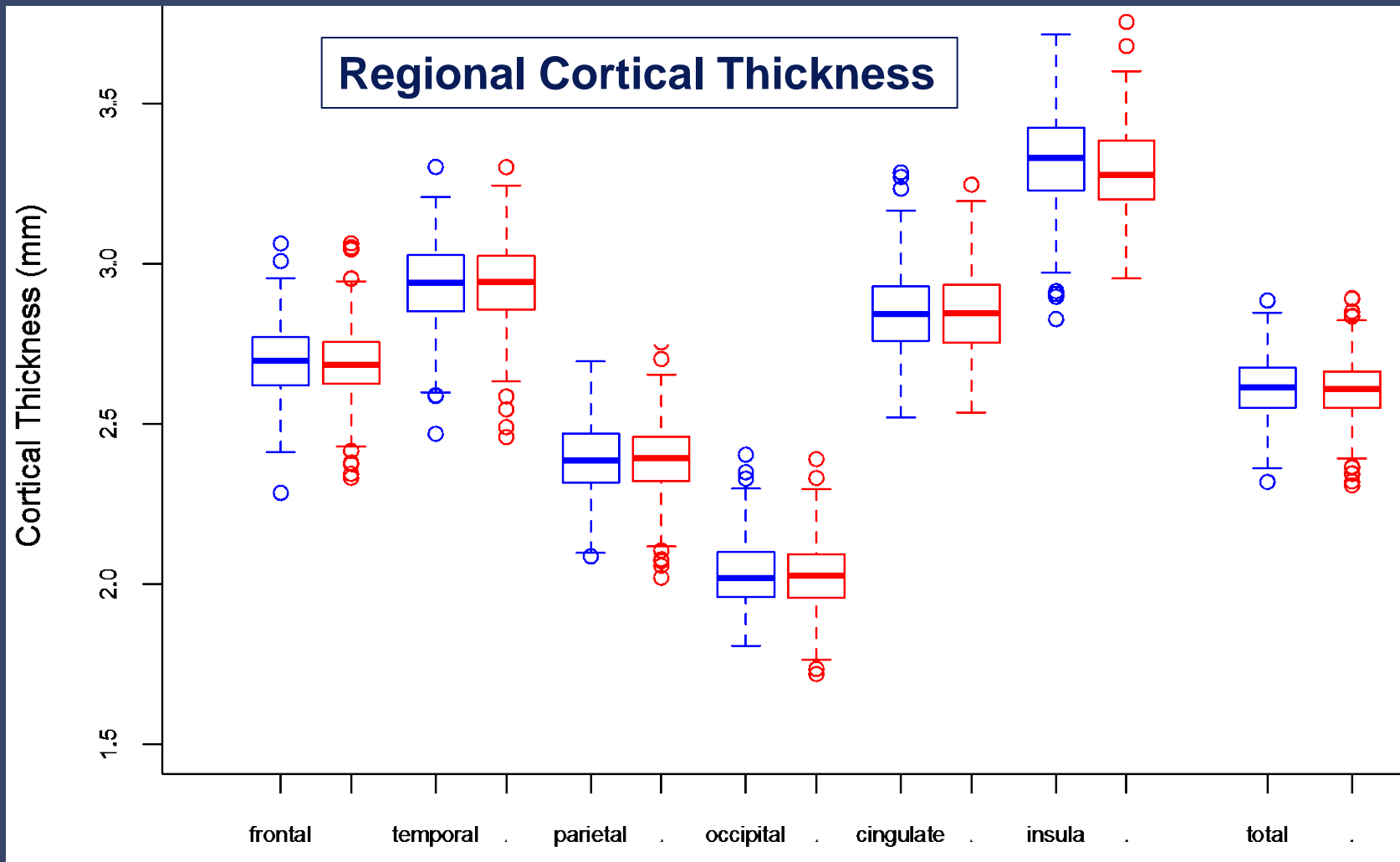
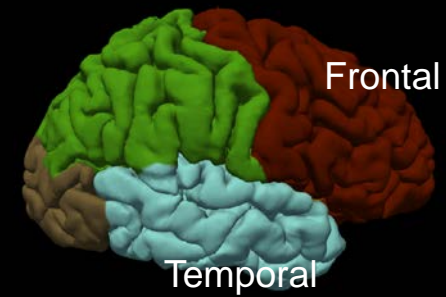


Regional Cortical Thickness



NCANDA Cohort

Baseline MRI by Age and Sex

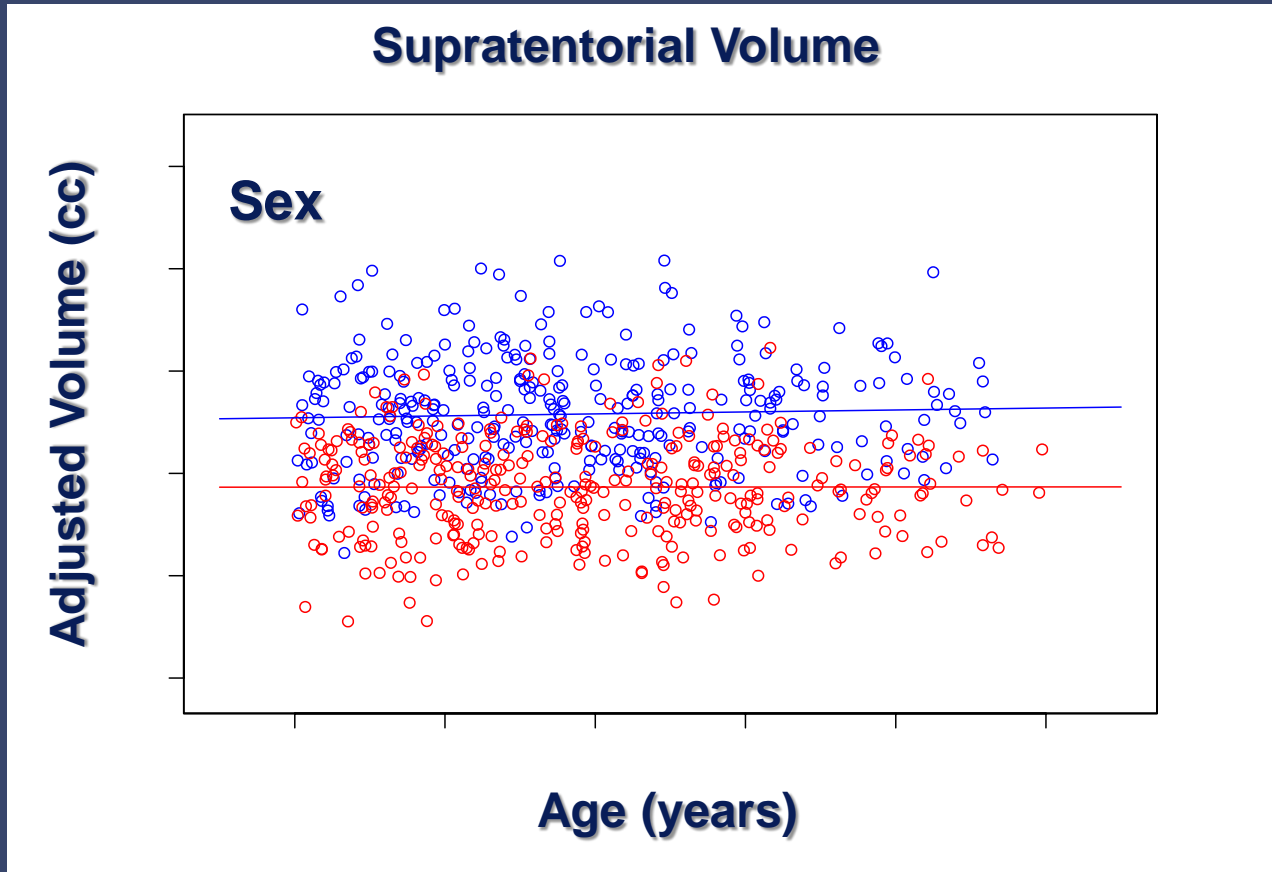
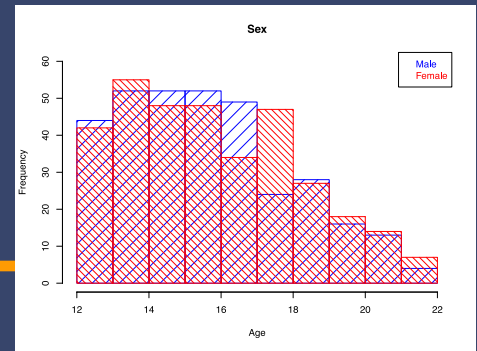


NCANDA MRI

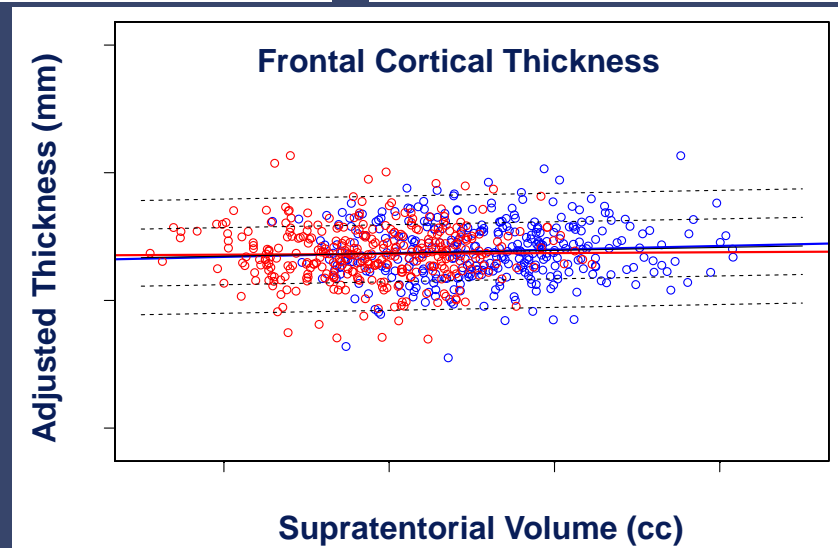
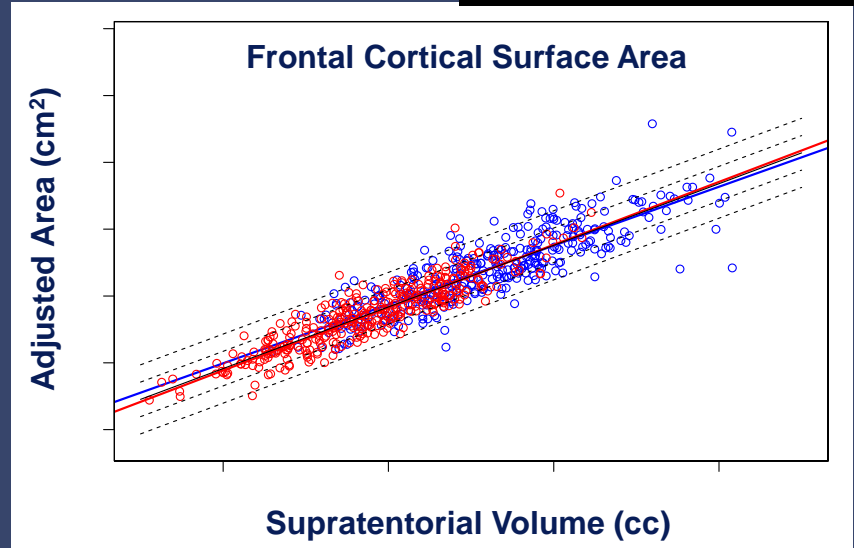
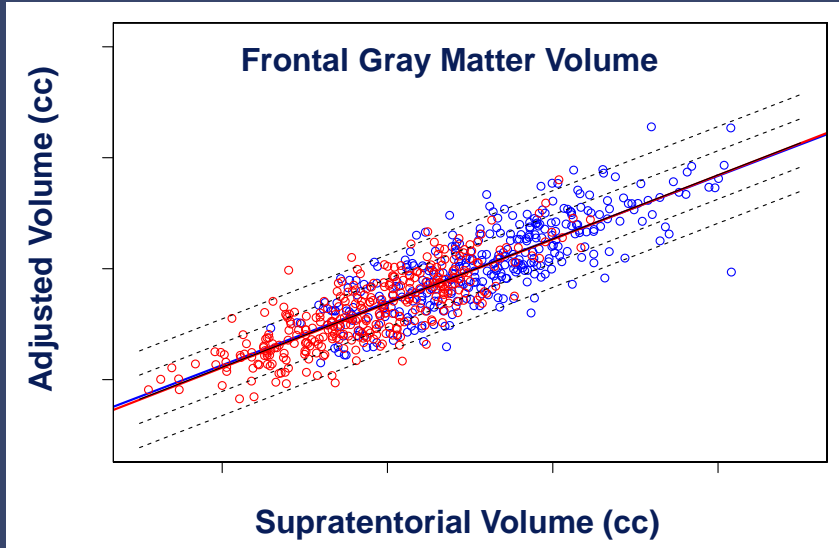
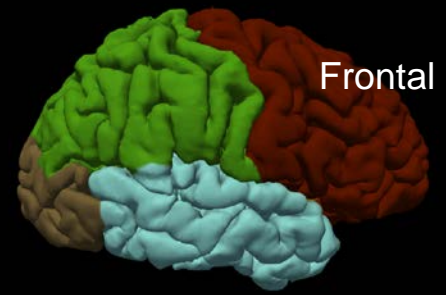


- ◆ Age
- ◆ Headsize / Supratentorial Volume
- ◆ Sex
- ◆ Ethnicity
- ◆ Prior Alcohol Exposure

Sex Differences in Brain Size



Size Metrics and Supratentorial Volume



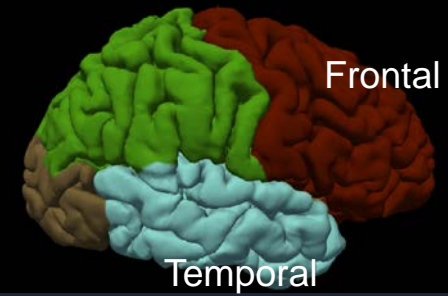
NCANDA MRI



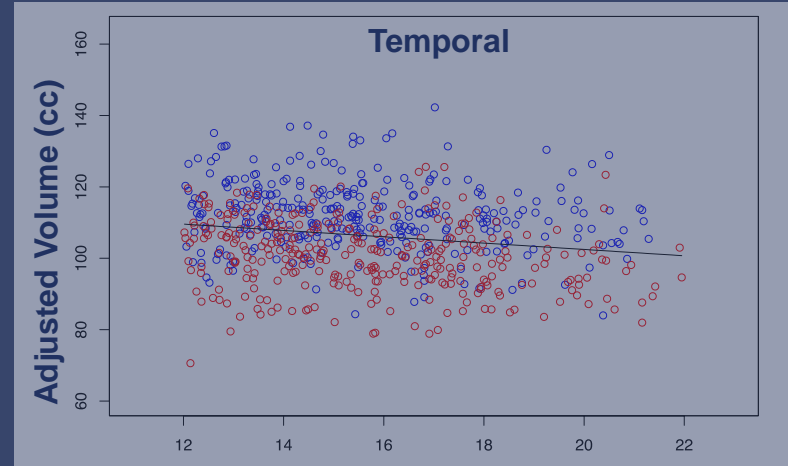
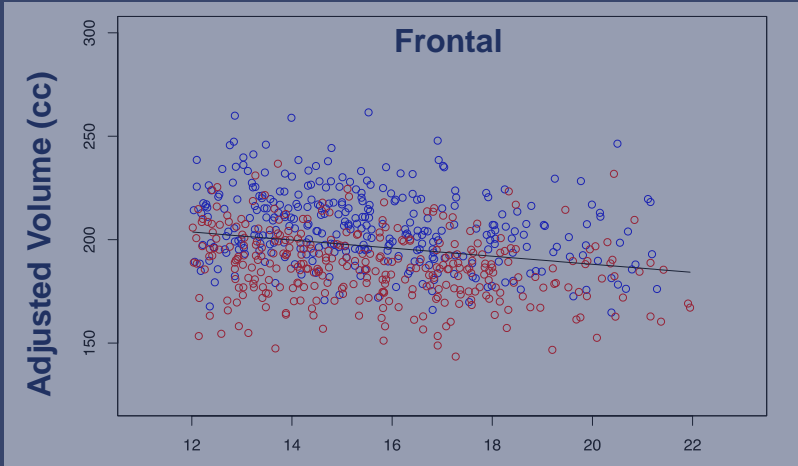
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NCANDA Cohort

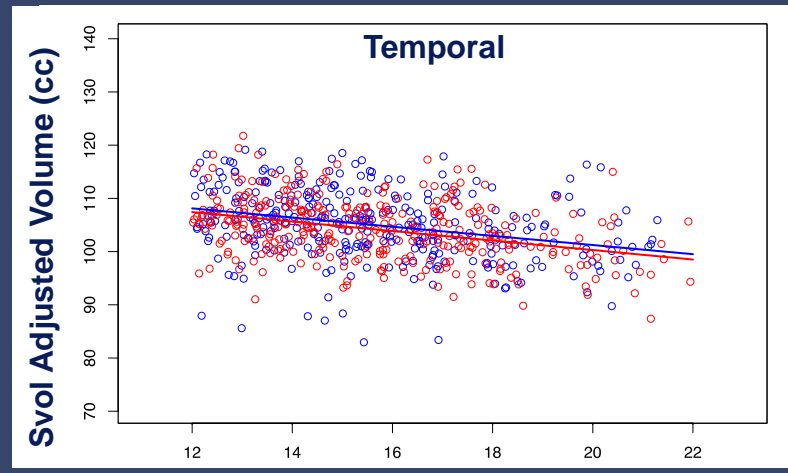
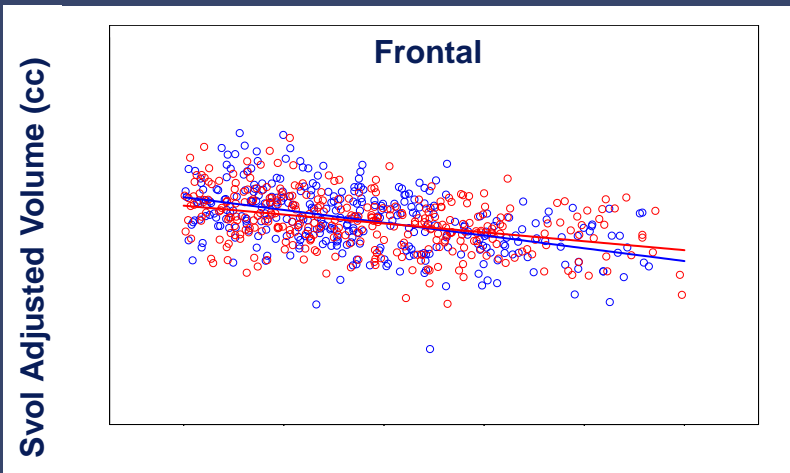
Baseline MRI by Age and Sex



Regional Cortical Volumes



Supratentorial Volume - Adjusted Regional Cortical Volumes



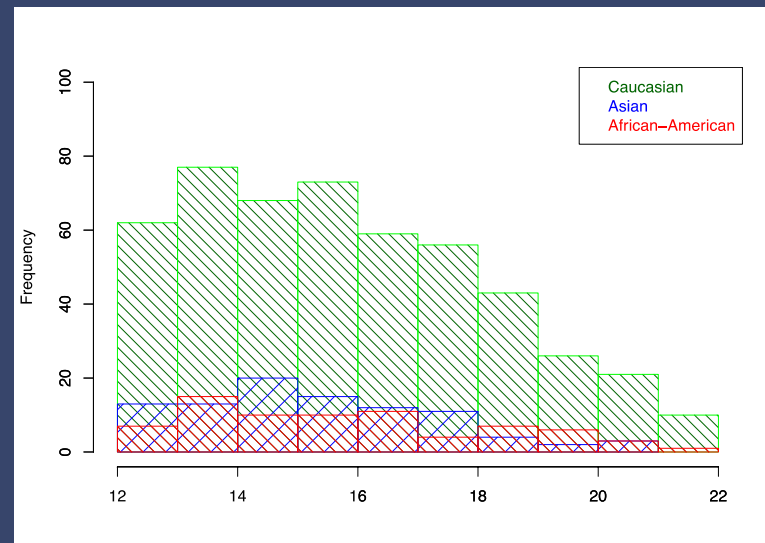
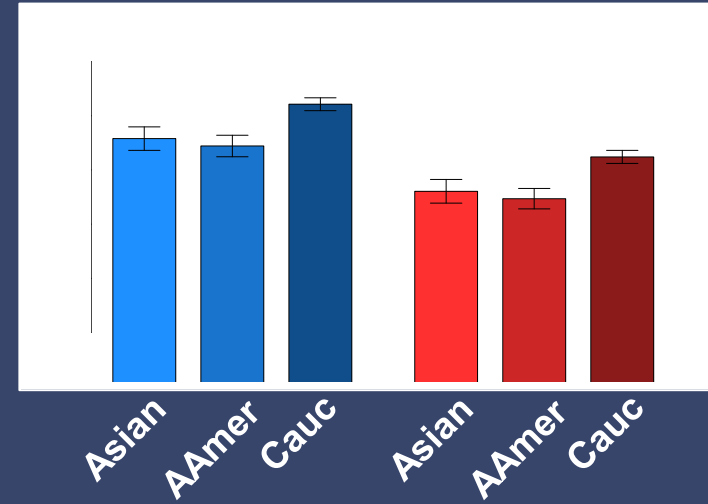
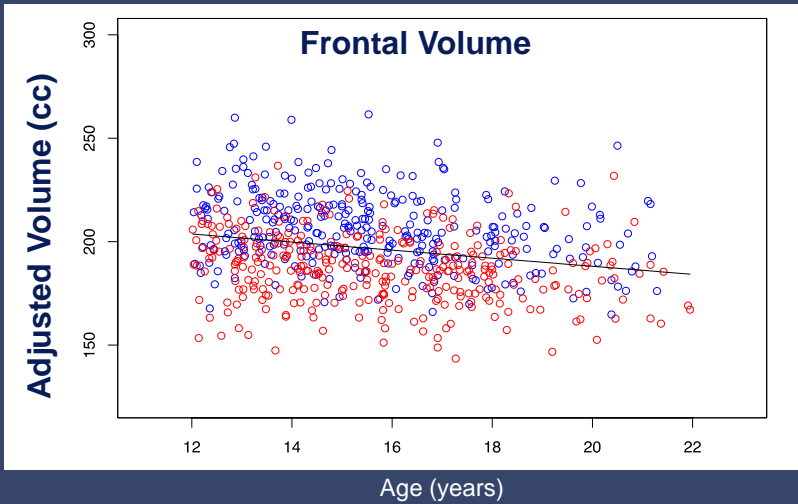
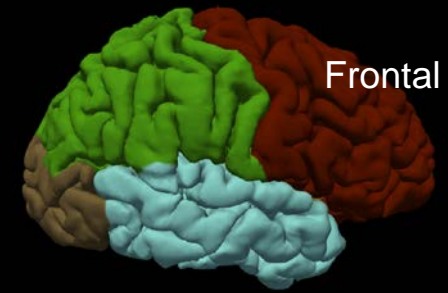
NCANDA MRI



- ◆ Age
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Frontal Cortex

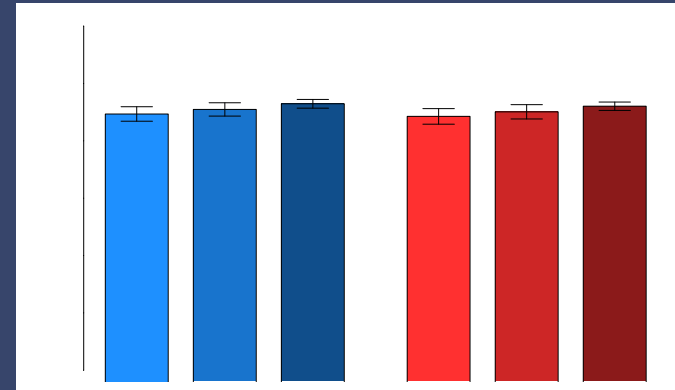
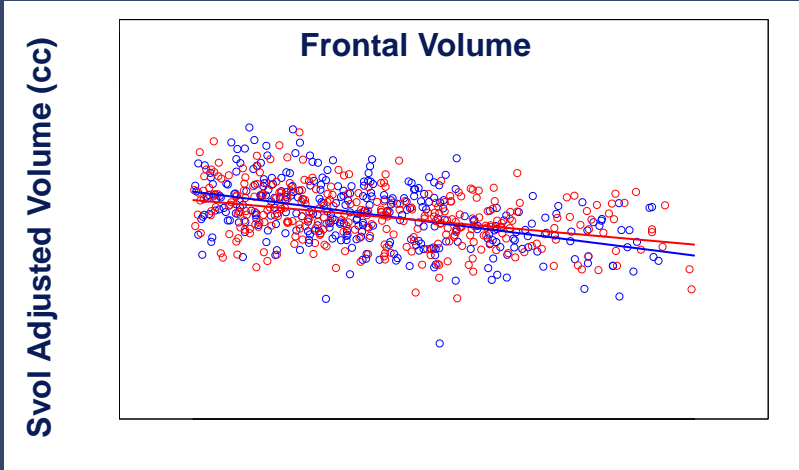
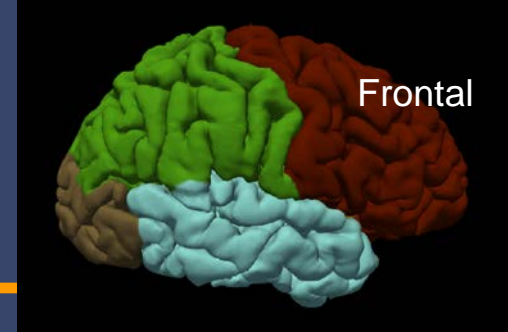
Baseline MRI by Age, Sex, Ethnicity



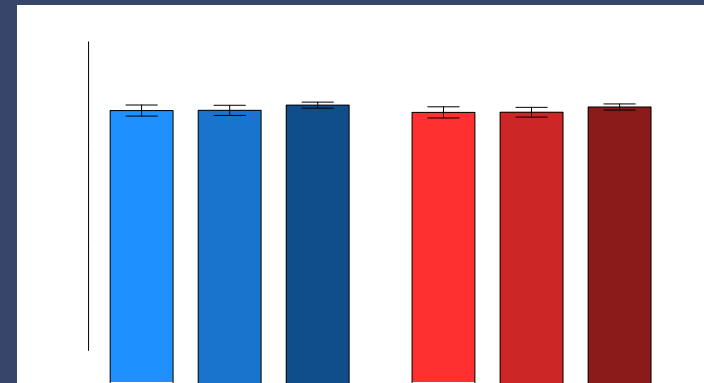
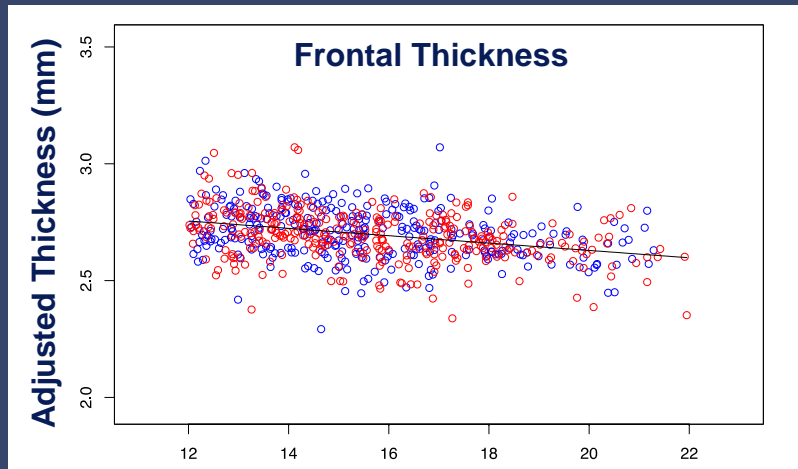
Frontal Cortex

Baseline MRI by Age, Sex, Ethnicity

Adjusted for supratentorial volume

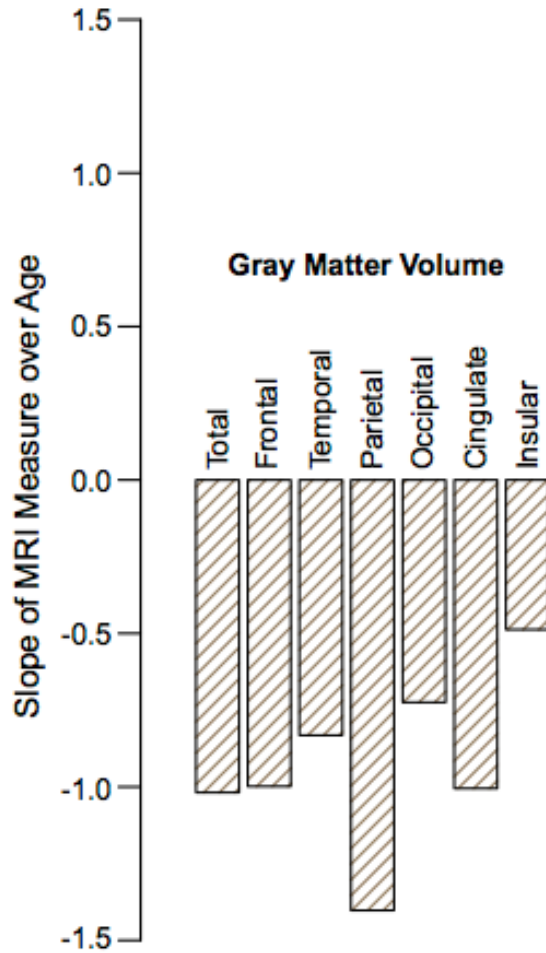


Asian AAmer Cauc Asian AAmer Cauc

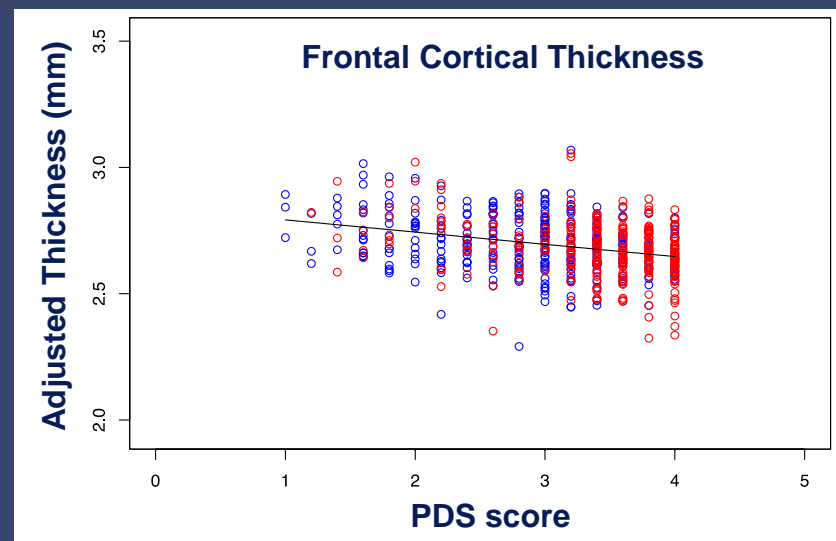
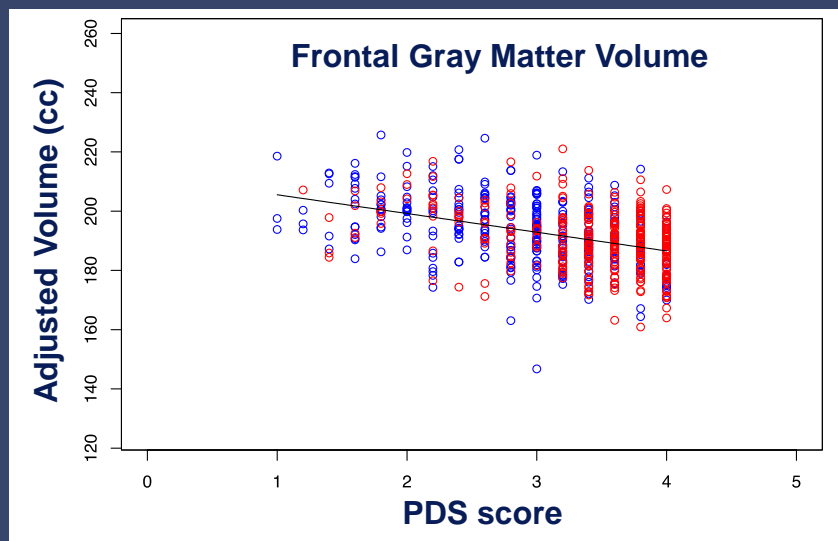
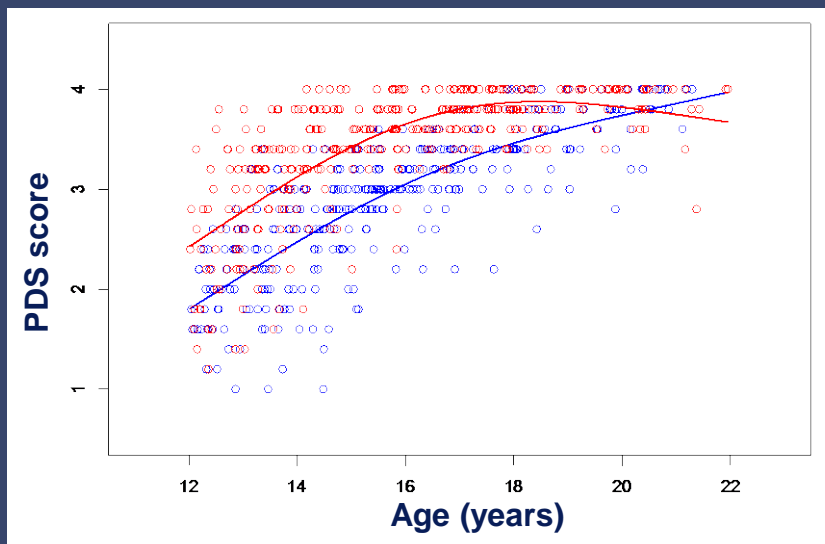
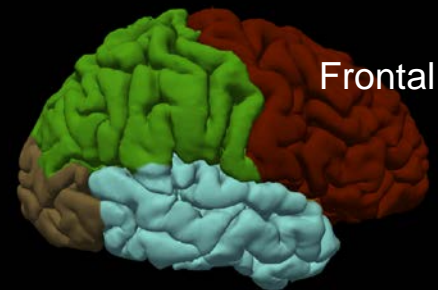


Asian AAmer Cauc Asian AAmer Cauc

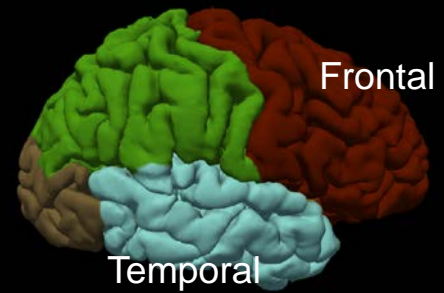
% Difference per Year (N=631)



Pubertal Development



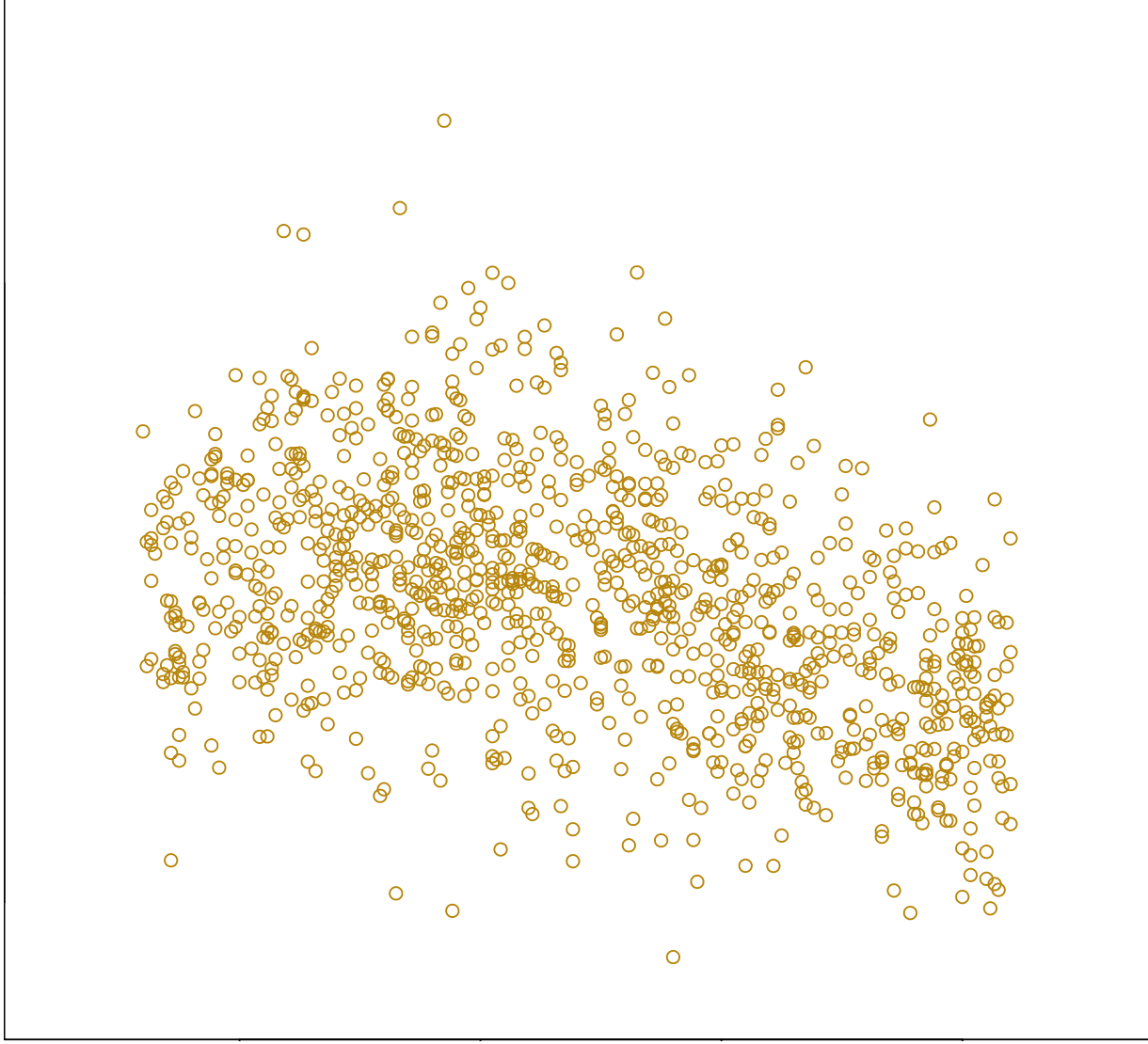
Are the data generalizable?



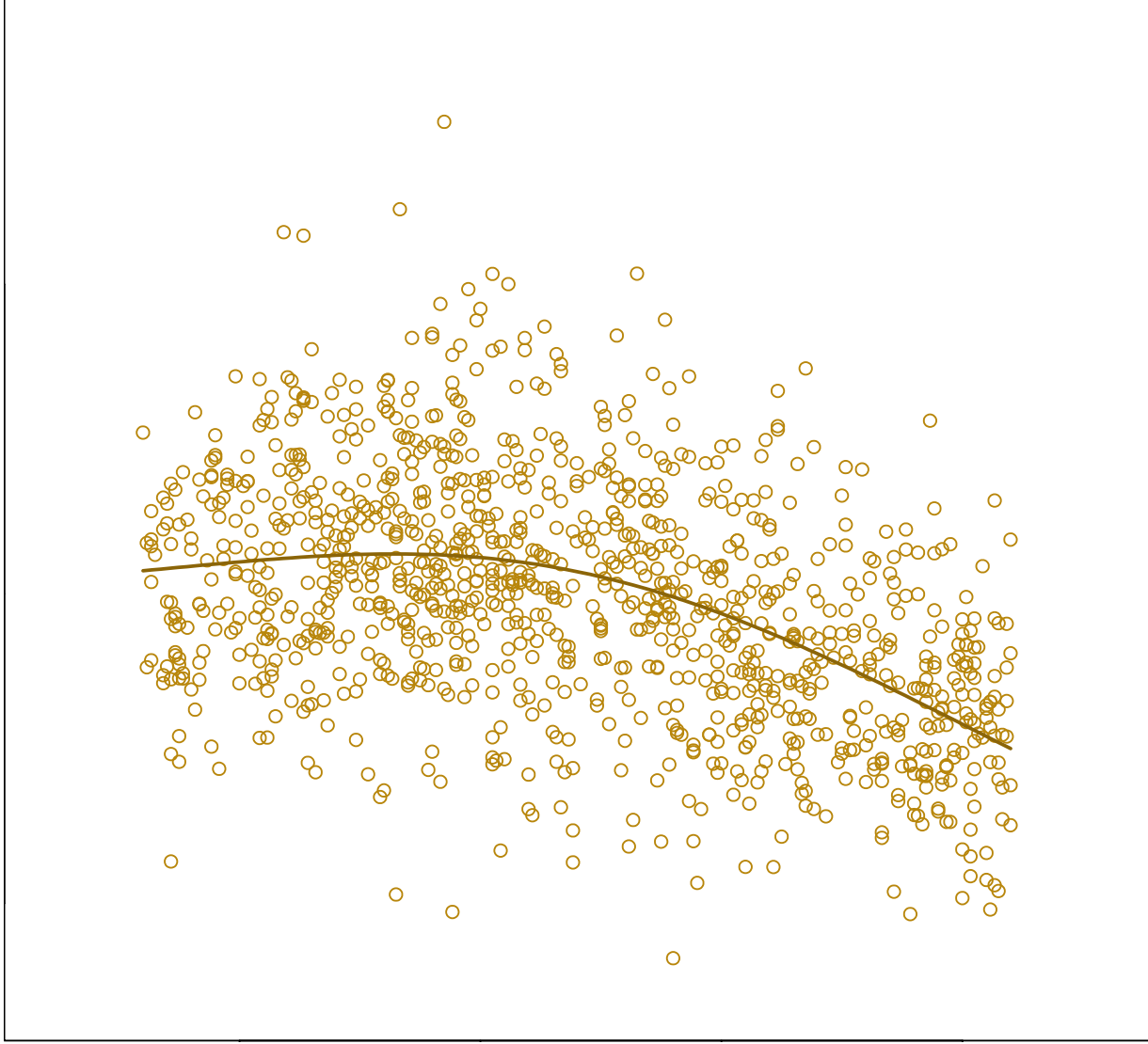
NCANDA and PING Cortical Volume and Thickness

NCANDA: National Consortium on Alcohol & NeuroDevelopment in Adolescence
PING: Pediatric Imaging, Neurocognition, and Genetics

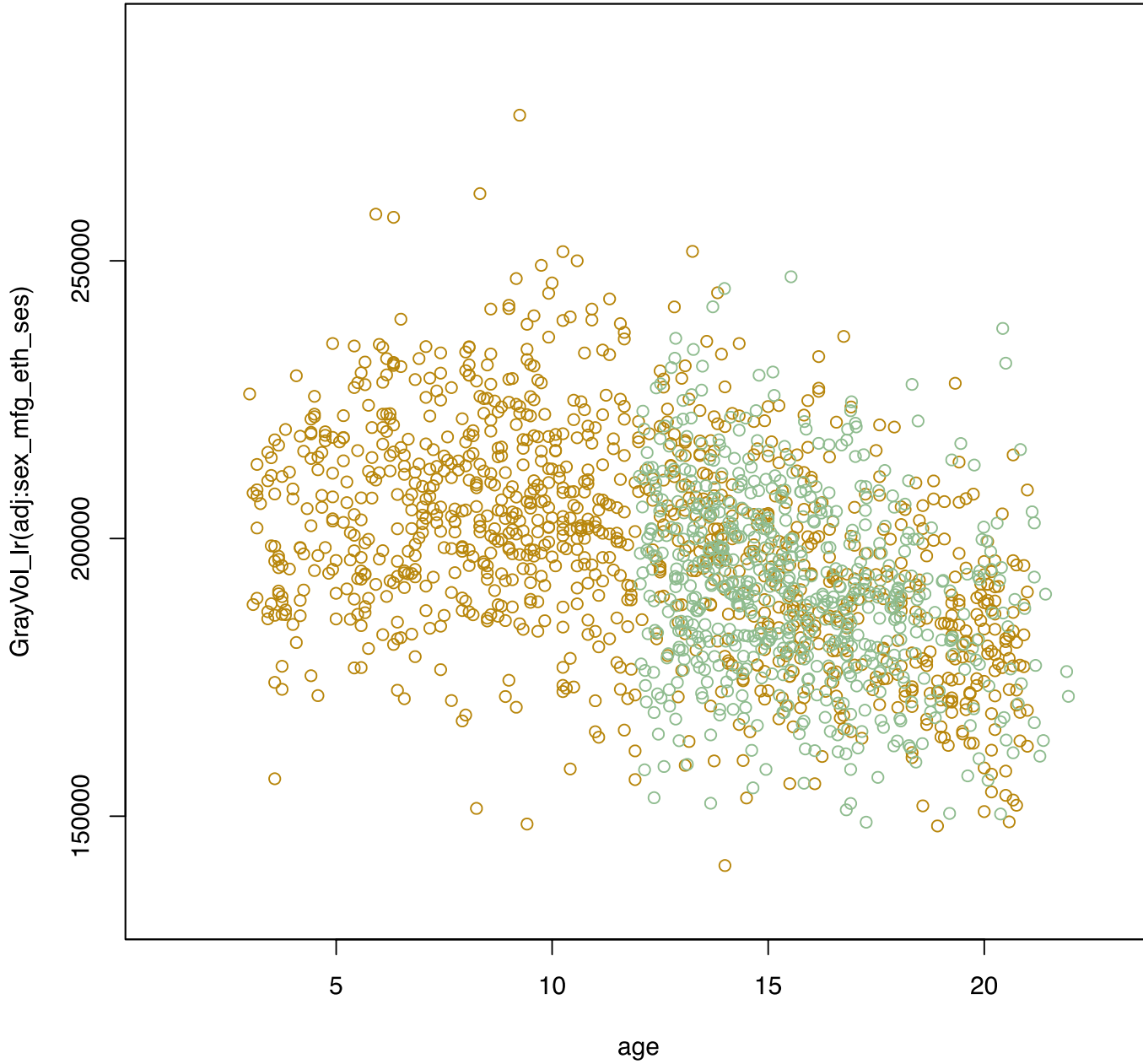
sex_mfg_eth_ses)



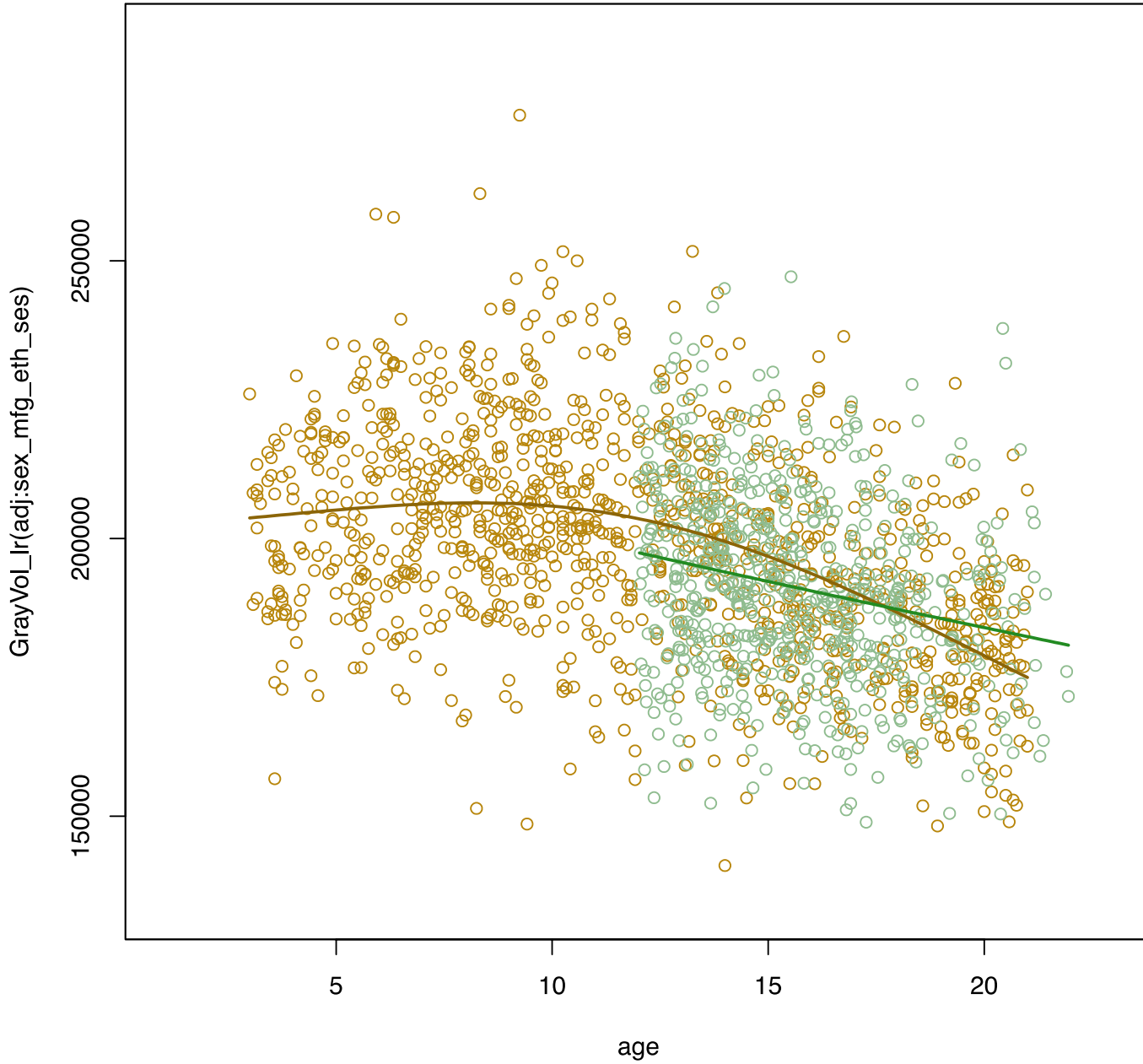
sex_mfg_eth_ses)



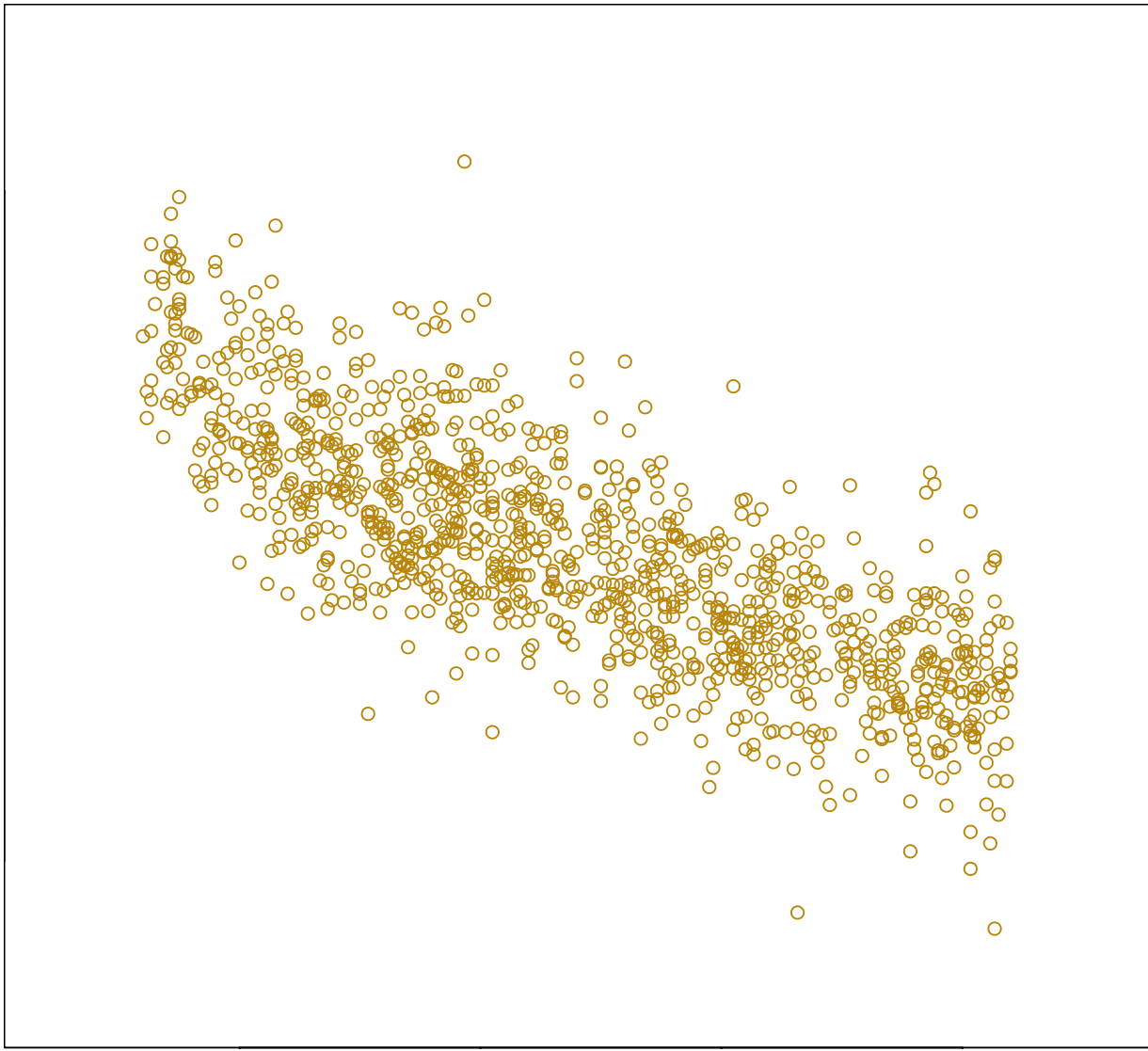
NCANDA_PING:Frontal_Lobe



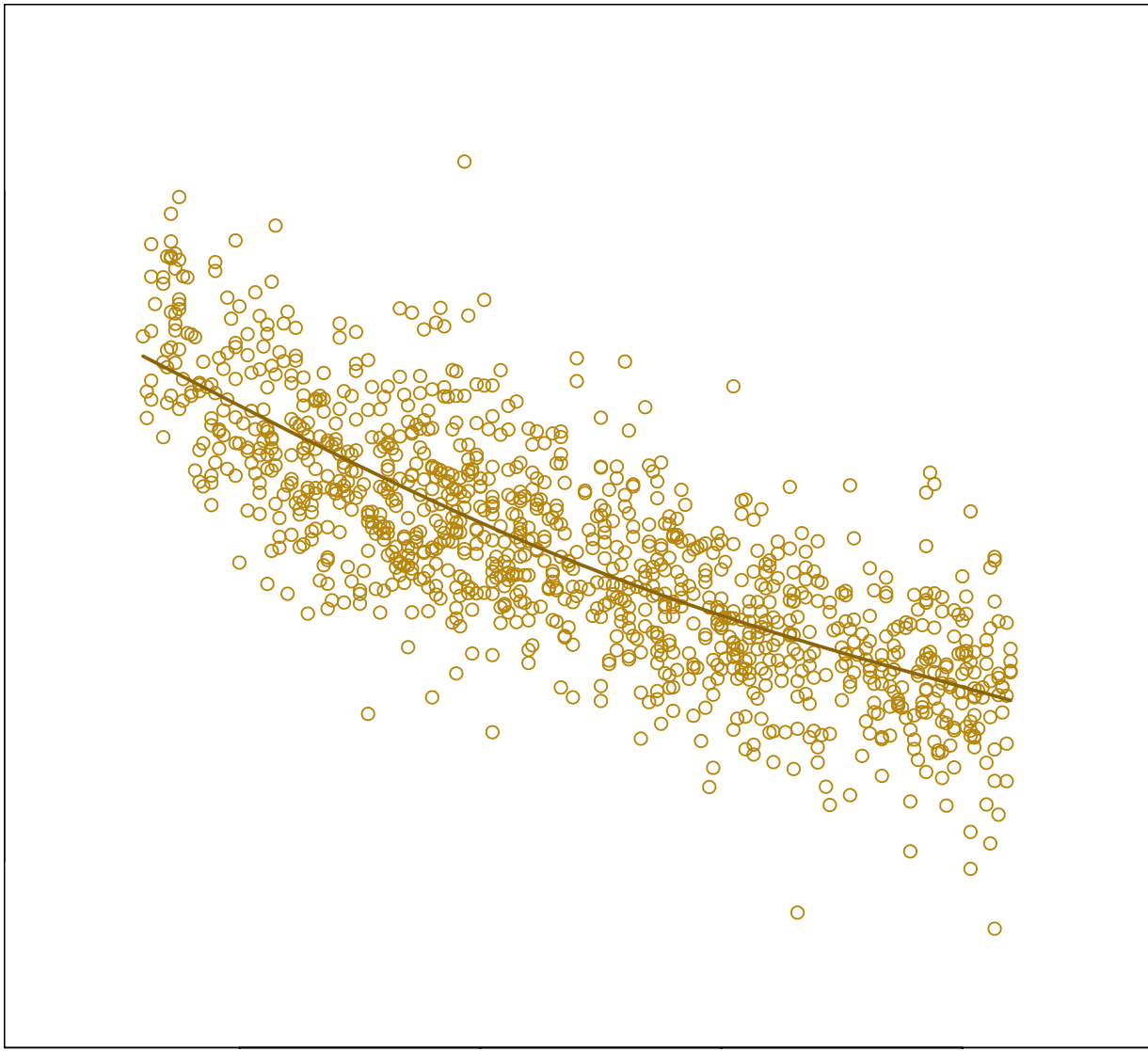
NCANDA_PING:Frontal_Lobe



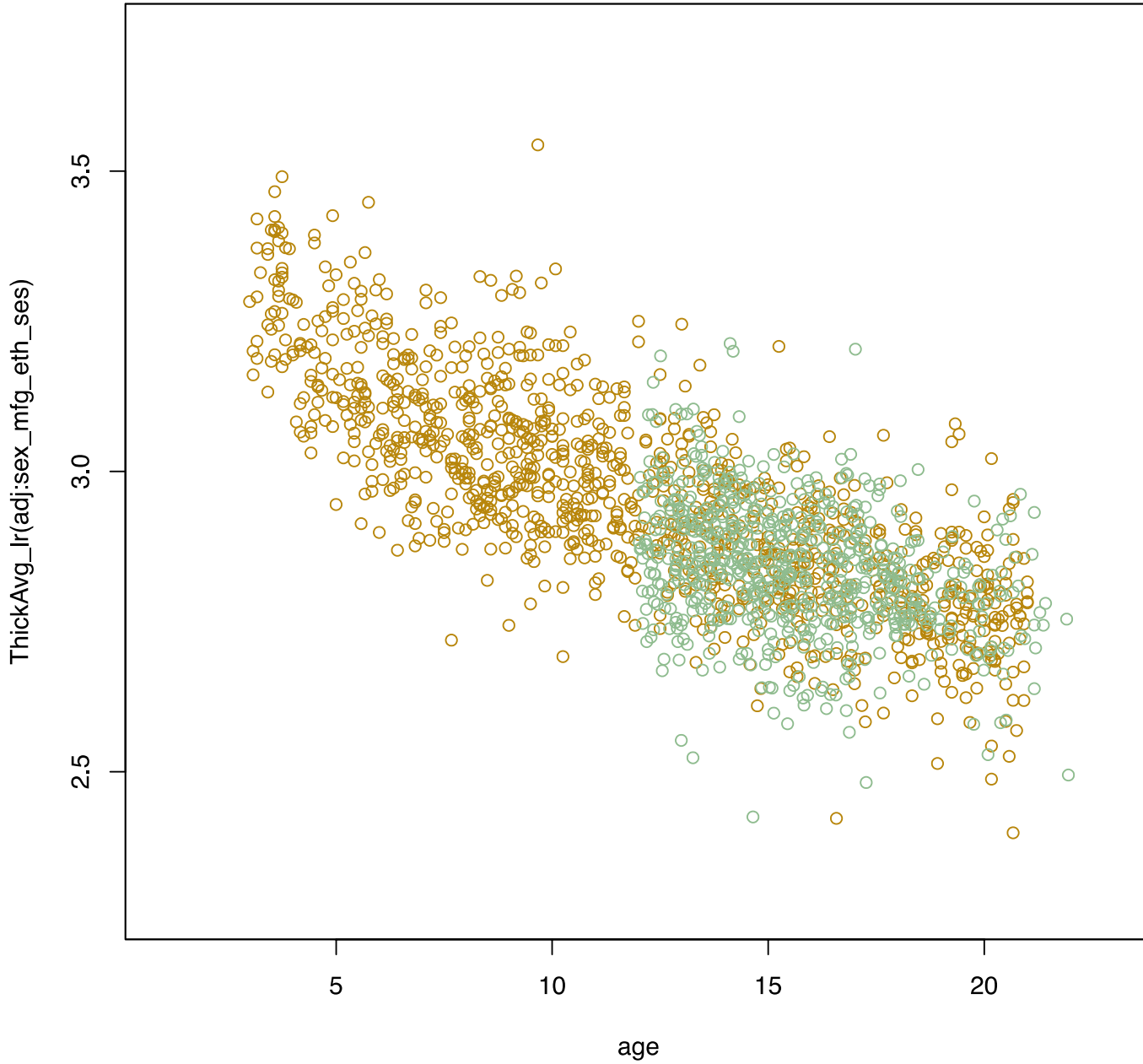
es)



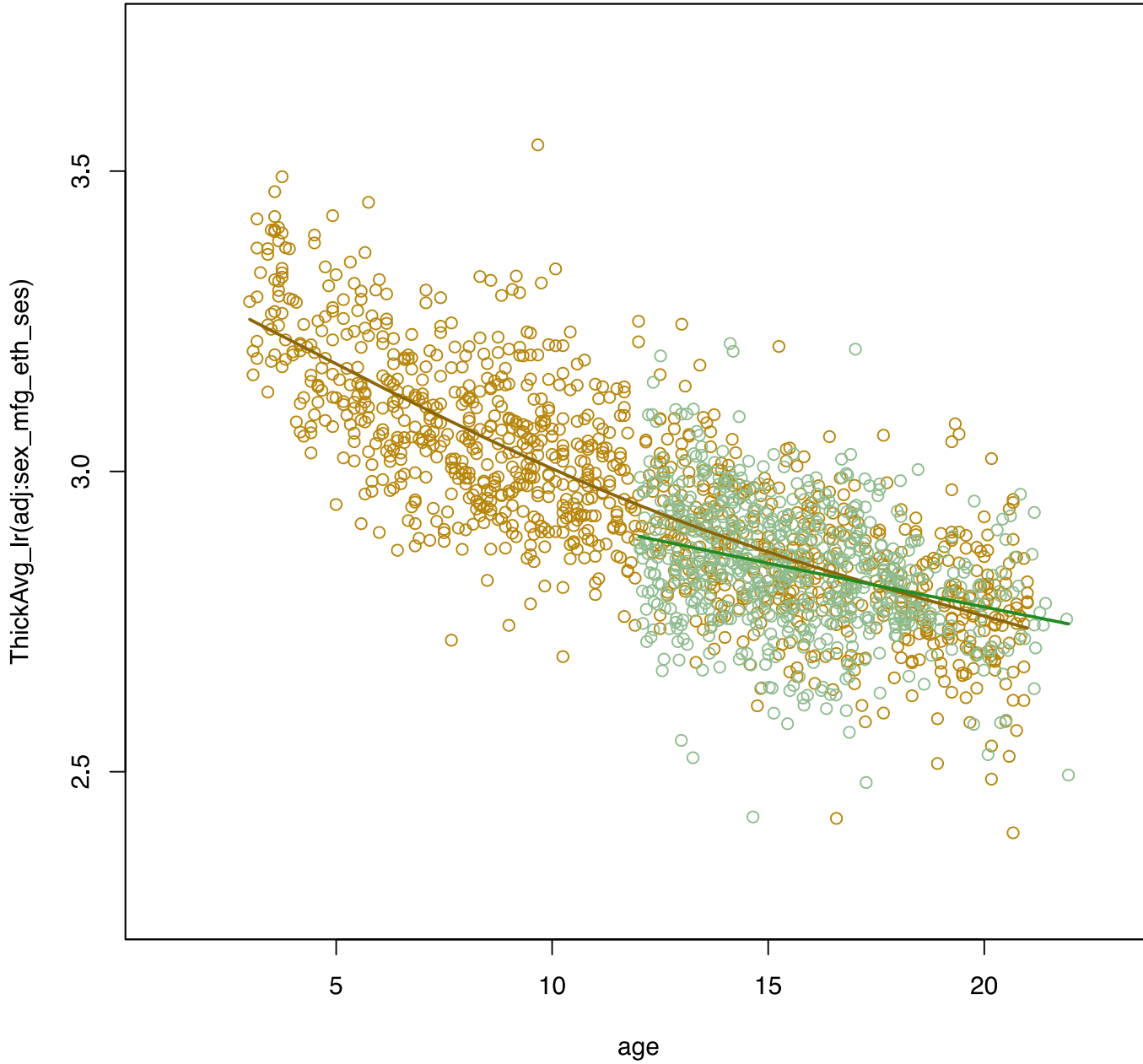
es)



NCANDA_PING:Frontal_Lobe

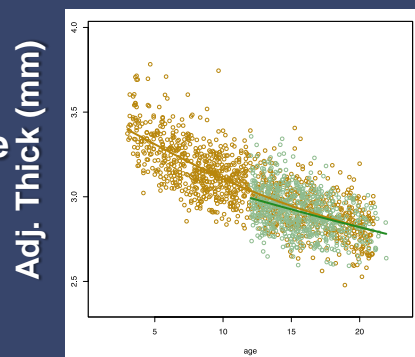
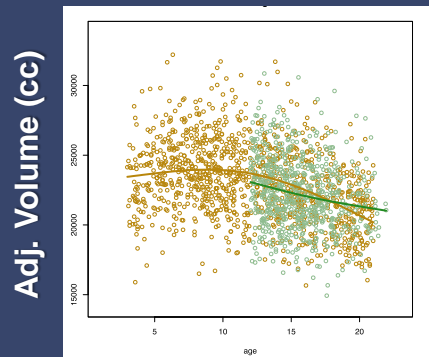
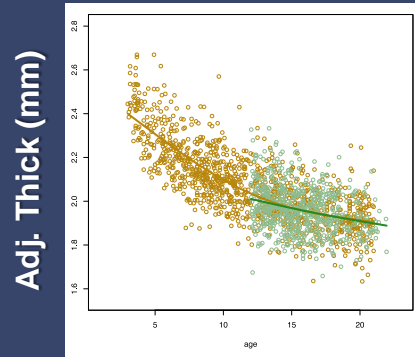
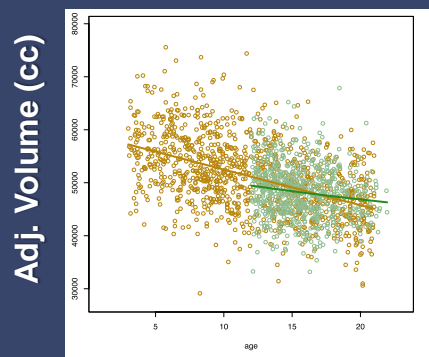
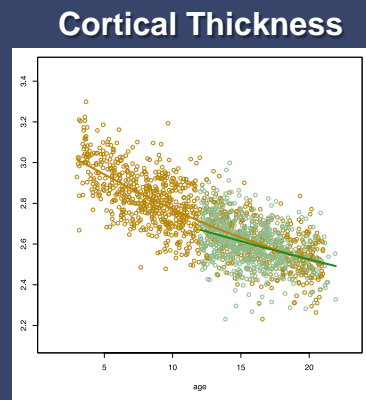
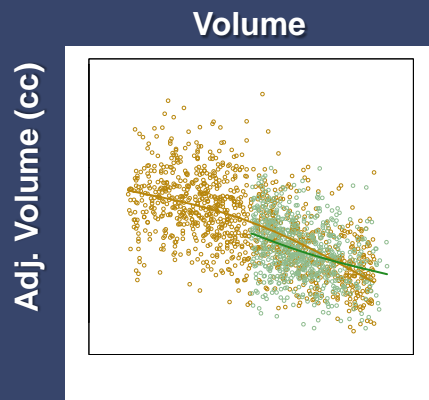
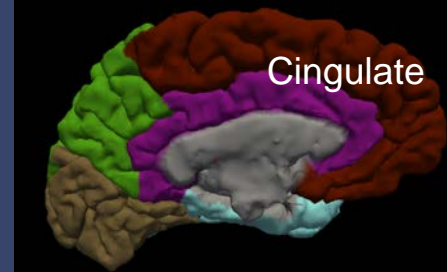
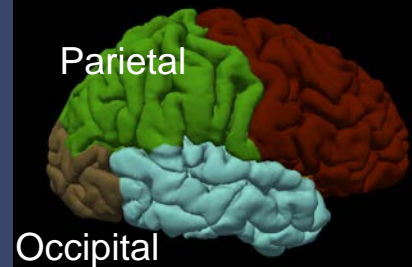


NCANDA_PING:Frontal_Lobe



NCANDA and PING

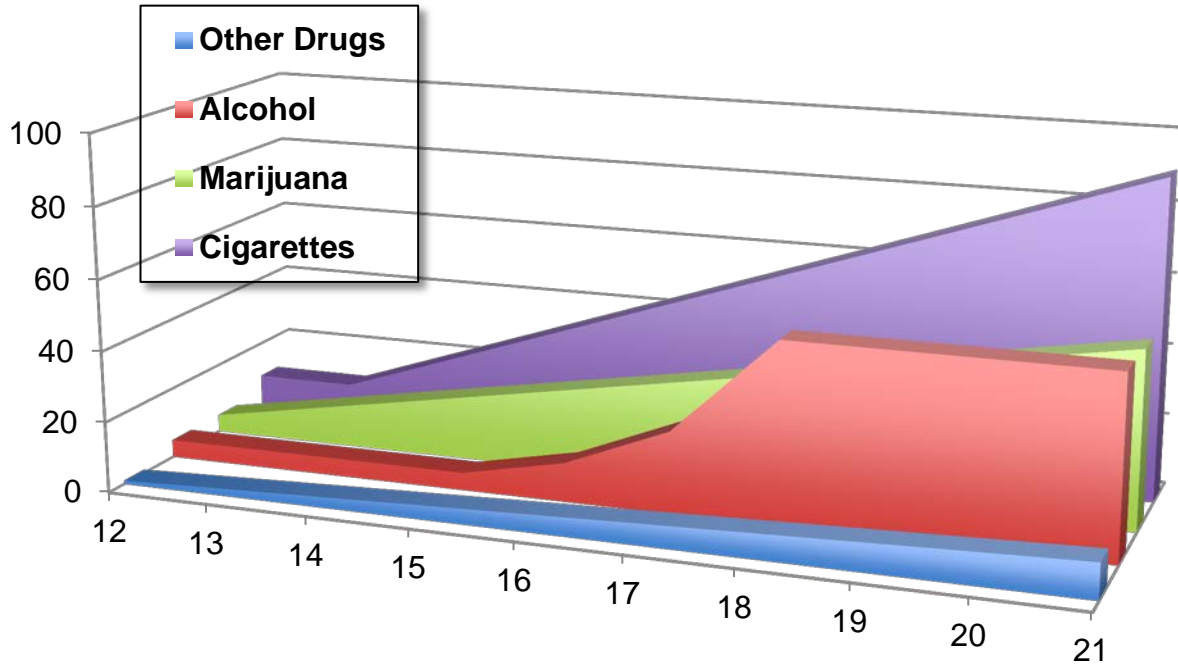
Cortical Volume and Thickness



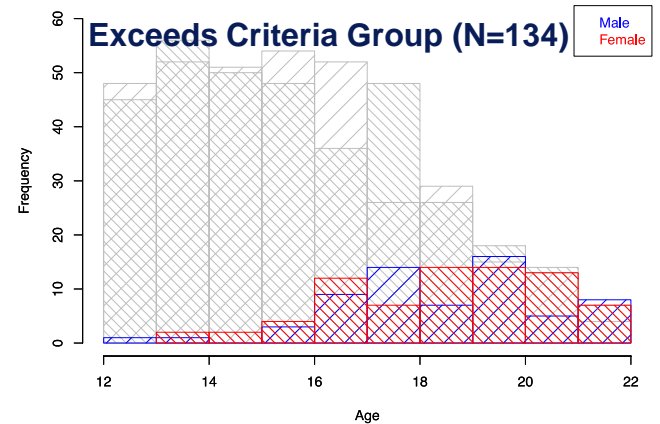
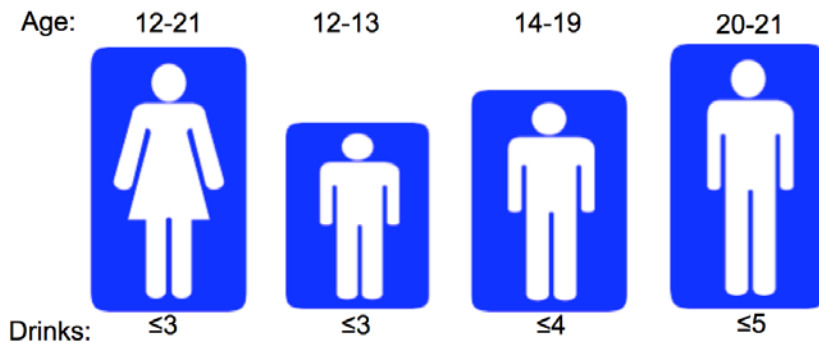
PING
NCANDA

Alcohol and Drug Use Criteria

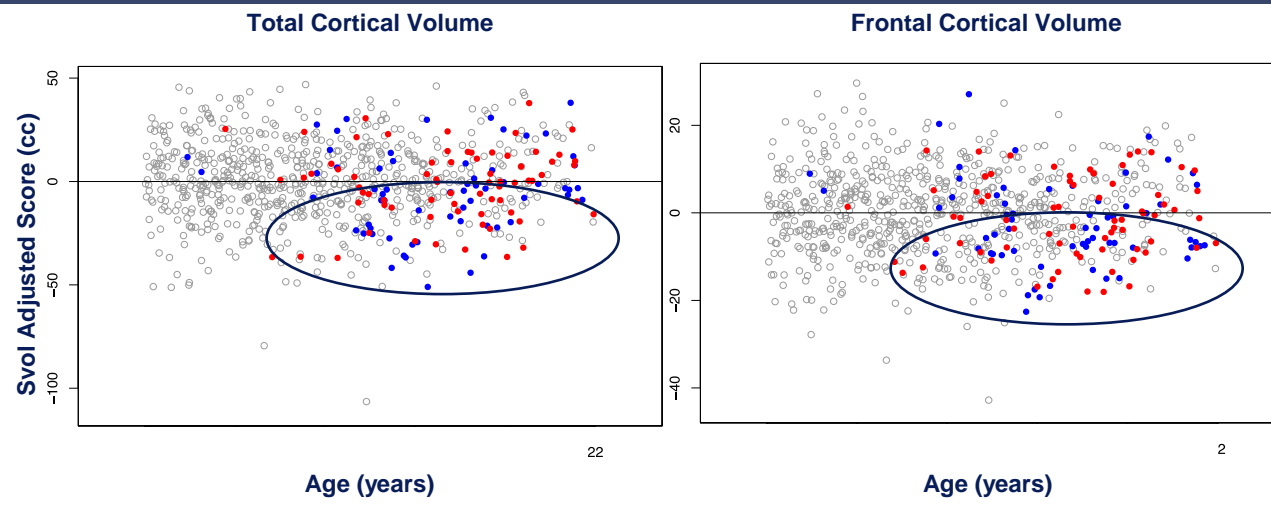
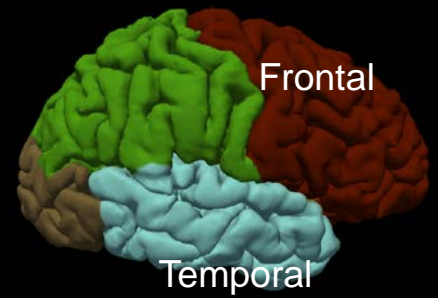
No/low vs. Exceeds



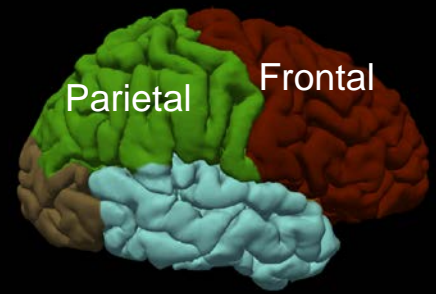
Max Drinks on One Day by Age and Sex



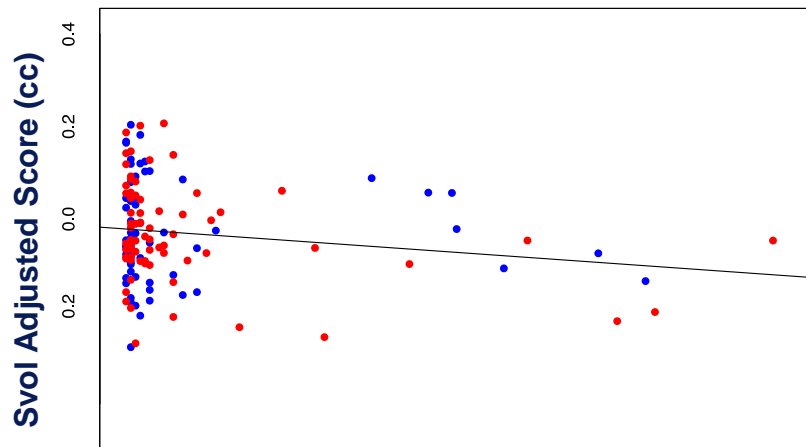
Moderate/high Alcohol Regional Cortical Volumes and Thickness



Binge Drinking and Cortical Thickness

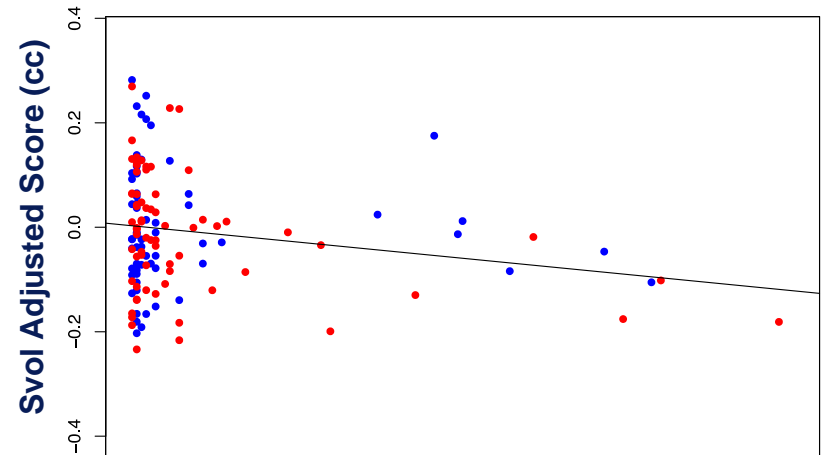


Frontal Cortical Thickness



Binge Episodes in Past Year

Parietal Cortical Thickness



Binge Episodes in Past Year

NCANDA Baseline MRI Findings

- ◆ In 833 with MRIs, clinical readings identified structural anomalies in 95 individuals (11.4%), ~3% precluding automated quantification.
- ◆ Regional volume and surface, but not thickness, measures showed sex and ethnicity effects that were minimized with adjustment for variation in supratentorial volume.
- ◆ NCANDA and PING data showed similar age-related differences in regional cortical volumes and thickness.
- ◆ Relative to no/low drinking youth, moderate/high alcohol drinking youth had smaller and thinner cortices in frontal, temporal, and cingulate regions.
- ◆ Youth who binged had thinner frontal and parietal cortices than no/low drinking youth.

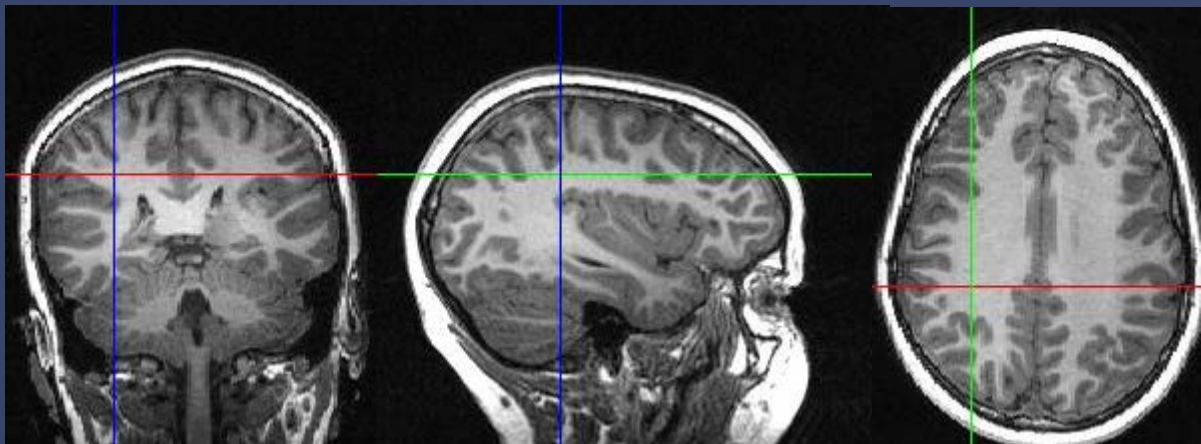
NCANDA Clinical MRI Findings

Baseline

A note of caution

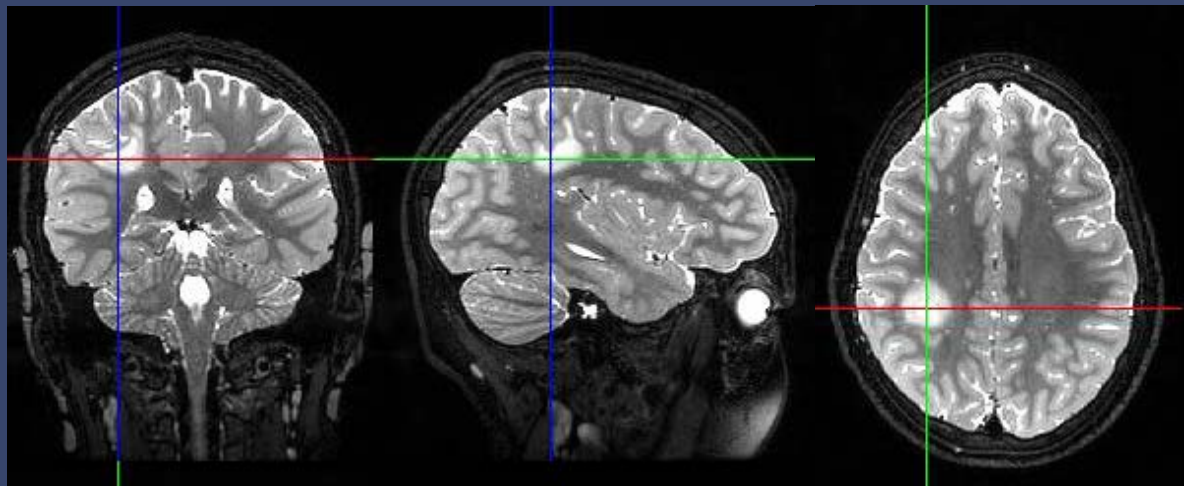
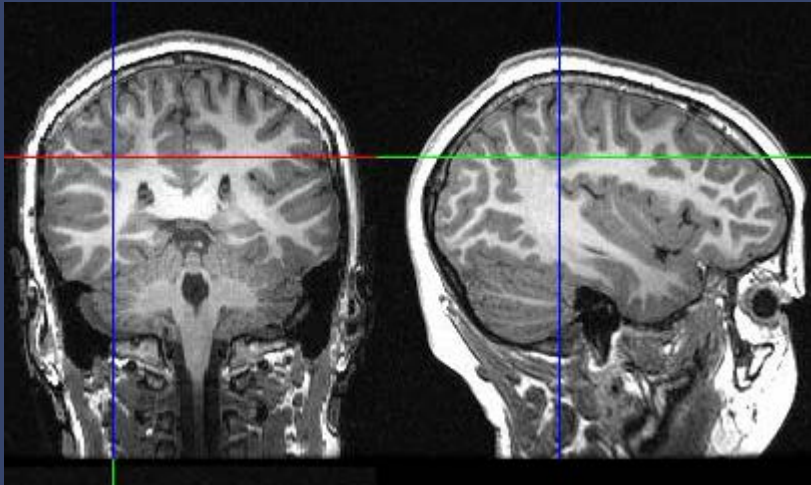
NCANDA Clinical MRI Findings

Baseline



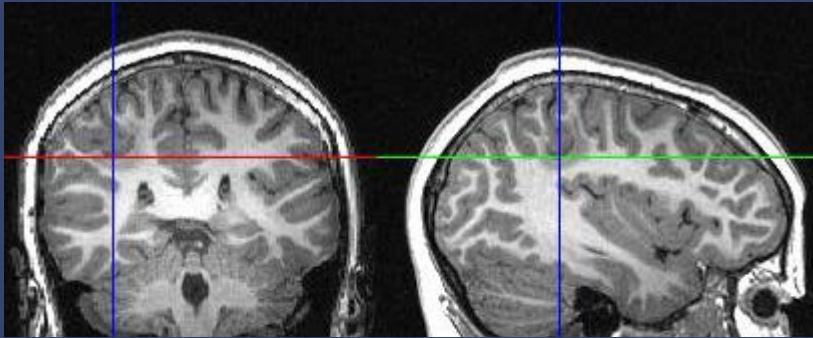
NCANDA Clinical MRI Findings

1-year Followup



NCANDA Clinical MRI Findings

1-year Followup



Even in a group of healthy highly screened participants with normal brain structure at study entry, pathology will emerge in a sample this size.

