

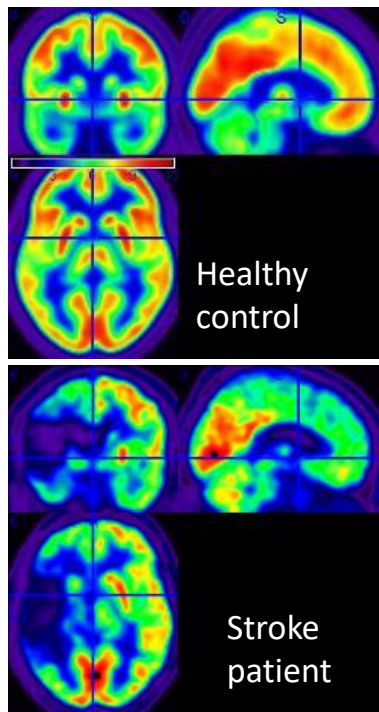
# SPM Maps of Relative Hypometabolism and Relatively Preserved Brain Regions

CSG PET workshop

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GIGA-Consciousness  
University Hospital & University of Liège



# Voxel-level PET image analysis

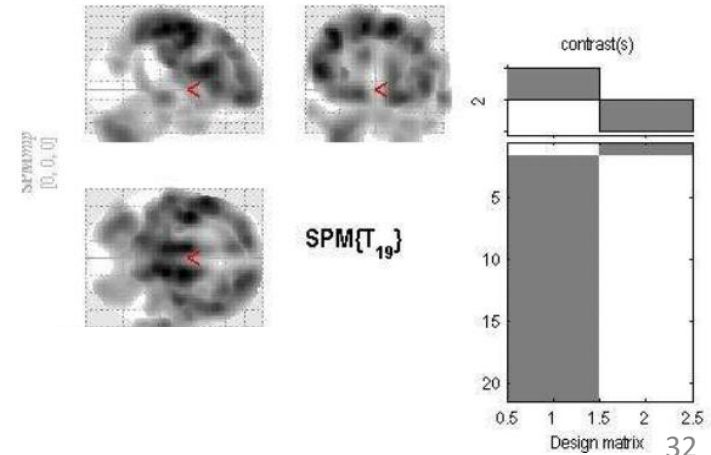
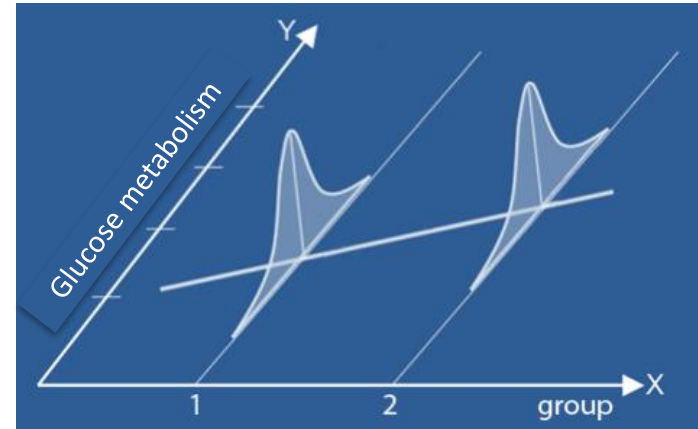


- ▶ 1) Spatial Registration, Normalization (or Warping) and Smoothing → to put all the different images in the same “space”, crucial for statistical comparisons
- ▶ 2) Creation of a Parametric Image (SUVRs, DVRs, BP...) → to put all the different images in the same «scale»
- ▶ 3) Statistical Model → to statistically compare images

# Outline



- Compare our patient to a reference group of healthy controls (**two-sample t-test**)
- **Voxel wise** (mass-univariate: independent statistical tests for every single voxel)
- Obtain a **statistical parametric map**, showing areas where there is a significant difference between patient and healthy controls (decreased or increased metabolism)

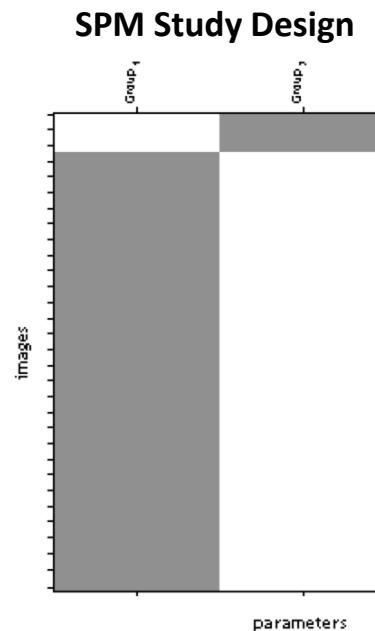


# Design Specification: two sample t-test



- Employs GLM, providing the residuals are normally distributed, **GLM:  $Y = X\beta + \epsilon$**
- **In the case of a two-sample t-test:**

$$\begin{array}{c} Y = \\ \left( \begin{array}{c} Y_1 \\ Y_1 \\ Y_1 \\ Y_1 \\ Y_1 \\ Y_2 \\ Y_2 \\ Y_2 \\ Y_2 \\ Y_2 \end{array} \right) \\ \text{Voxel value} \end{array} = \begin{array}{c} X \\ \left( \begin{array}{cc} 1 & 0 \\ 1 & 0 \\ 1 & 0 \\ 1 & 0 \\ 1 & 0 \\ 0 & 1 \\ 0 & 1 \\ 0 & 1 \\ 0 & 1 \\ 0 & 1 \end{array} \right) \\ \begin{array}{c} G1 \quad G2 \end{array} \end{array} \begin{array}{c} \beta \\ \left( \begin{array}{c} \beta_1 \\ \beta_2 \end{array} \right) \\ \text{Parameters} \end{array} + \epsilon$$



# Comparison with healthy controls



DATASET

## FDG-PET/CT data of healthy volunteers and patients with disorders of consciousness

Annen, J.; Sala, A.; Bonin, E.A.C.; Sanz, L.R.D.; Barra, A.; Cecconi, B.; Vitello, M.; Szymkowicz, E.; Cardone, P.; Bernard, C.; Martial, C.; Laureys, S.; Gosseries, O.; Thibaut, A.

Download Dataset

Data-descriptor

[https://object.cscs.ch/v1/AUTH\\_25b4e28a742d4987a7b6f84c0c36512e/hbp-d000052\\_FDG-PET-in-HC-and-DoC/EBRAINS-DataDescriptor\\_FDG-PET-in-HC-and-DoC.pdf](https://object.cscs.ch/v1/AUTH_25b4e28a742d4987a7b6f84c0c36512e/hbp-d000052_FDG-PET-in-HC-and-DoC/EBRAINS-DataDescriptor_FDG-PET-in-HC-and-DoC.pdf)

DOI: 10.25493/7TXP-WCF

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Custodians: Laureys, Steven

This dataset contains the cerebral 18F-Fluorodeoxyglucose PET-CT scans of 33 healthy volunteers and 2 patients with disorder of consciousness. The data of the healthy volunteers has been normalized to MNI space and smoothed, and can be used as control group for assessing regions with relative preserved or reduced glucose uptake in patients with disorders of consciousness after severe brain injury. The toolbox to do the analysis, based on SPM, is shared as well. Two datasets also contain the raw DICOM images of 2 patients with severe brain injury as example. For the interpretation of the glucose uptake maps and standardized uptake values we refer the user to the [EBRAINS Collab](#)

Annen, J. and Sala, A. contributed equally  
Gosseries, O. and Thibaut, A. contributed equa

### Modality:

- radiology
- multimodal approach
- anatomical approach

Preparation: In vivo

### Methods:

- Positron emission
- tomography/computed tomography (PET/CT)

### Keywords:

- glucose uptake

### Scanner

Gemini TF PET-CT scanner  
(Philips Medical Systems)

<https://search.kg.ebrain.s.eu/instances/Dataset/68a61eab-7ba9-47cf-be78-b9add64bb2f>

Files (247)

Related publications (4)

Subjects (2)

Name	Species	Sex	Age	Age category	Weight	Strain	Genotype	Samples
DoC (n = 2)	Homo sapiens	<ul style="list-style-type: none"><li>Female</li><li>Male</li></ul>	-	Adult	-	-	-	-
healthy (n = 33)	Homo sapiens	<ul style="list-style-type: none"><li>Female</li><li>Male</li></ul>	19 - 70 years	Adult	-	-	-	-

# Comparison with healthy controls

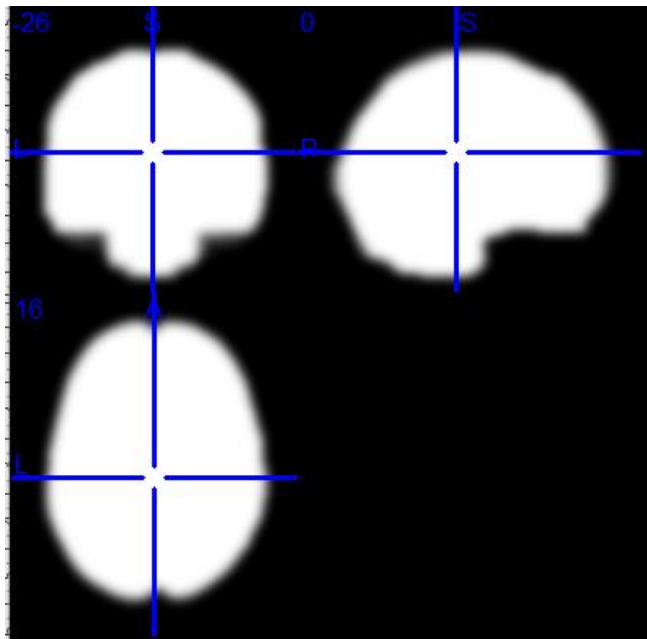


Dataset	Subjects, N	Population	Age Range (y)	Tracer	Data Access
<a href="#">ADNI</a>	1958	HC, SMC, MCI, ADD	55-98	FDG, Florbetapir, Florbetaben, Flortaucipir	Simple application
<a href="#">ADNI-ARG</a>	56	HC, MCI, ADD		FDG, PiB	Simple application
<a href="#">AIV0</a>	4339	HC, PD, obesity, schizophrenia, depression, other	18-90	FDG, H2O, PiB, Flutemetamol, DOPA, NNC112, Reclopride, FLB457, CFT, WAY-100635, MADAM, Carfentanil, PK11195, PBR28	Detailed application (incl. approval through ethical committee)
<a href="#">ALFA+ Study</a>	361	HC, SCC - enriched for AD risk factors	45-65	Flutemetamol	Detailed application
<a href="#">Alzheimer's Disease Repository without Borders (ARWIBO)</a>	60	HC, SSC, MCI, ADD FTLD, PD, major depression	48-85	FDG	Detailed application
<a href="#">APOE E4 Arizona Dose Programme</a>	447	HC - enriched for AD risk factors	20 - 87	FDG, PIB, Florbetapir, Flortaucipir,	Detailed application
<a href="#">Associazione Italiana Medicina Nucleare (AIMN)</a>	155	HC	22-84	FDG	Simple application
<a href="#">Centro Nacional de Investigaciones Cardiovasculares (CNIC)</a>	547	Asymptomatic middle-aged participants with evidence of subclinical atherosclerosis	41-58	FDG	Detailed application
<a href="#">DIAN (observational study)</a>	556	HC, MCI, ADD (autosomal dominant)	18-69	FDG, PiB	Detailed application
<a href="#">DIAN-TU</a>	249	HC, MCI, ADD (autosomal dominant)	21-72	FDG, PIB, Florbetapir, Flortaucipir	Detailed application
<a href="#">European Alzheimer's Disease Consortium (EADC)</a>	1114	HC, SCC, MCI, pseudo-dementia, ADD, FTLD	41-91	FDG, Florbetapir, Florbetaben, Flutemetamol	Other (available to all EADC centers contributing a minimum dataset of relevant data)
<a href="#">Harvard Aging Brain Study (HABS)</a>	290	HC	62-90	FDG, PiB, Flortaucipir	Detailed application
<a href="#">Hôpitaux Universitaires de Genève (HUG)</a>	603	HC, SCD, MCI, Dementia	28-92	FDG, florbetapir, flutemetamol, flortaucipir	Detailed application
<a href="#">International Consortium for Brain Mapping (ICBM)</a>	28	HC, MCI, ADD	29-92	FDG	Detailed application
<a href="#">J-ADNI</a>	344	HC, MCI, ADD	60-85	FDG, PiB, BF227	Detailed application
<a href="#">KBASE</a>	643	HC, MCI, ADD	25-90	FDG, PiB, Flortaucipir	Detailed application
<a href="#">Knight ADRC</a>	1142	HC, MCI, ADD	34-100	FDG, PIB, Florbetapir, Flortaucipir	Detailed application
<a href="#">Mayo Clinical Study of Aging</a>	2245	HC, MCI, dementia	30-90+	FDG, PiB, Flortaucipir	Detailed Application
<a href="#">Monash rsPET-MR</a>	27	HC	18-21	FDG	Freely available
<a href="#">Monash vis-fPET-fMRI</a>	10	HC	18-48	FDG	Freely available
<a href="#">OASIS-3</a>	777	HC, SCC, MCI, ADD	42-95	FDG, PiB, Florbetapir	Simple application
<a href="#">The Incidence of Cognitive Impairment in Cohorts with Longitudinal Evaluation-PD (ICICLE-PD)</a>	99	HC, PD, PD-MCI	54-91	FDG	Detailed application
<a href="#">University Medical Centre - Ljubljana</a>	159	HC, SCC, MCI, ADD	49-89	FDG, Florbetaben	Other (bilateral agreement)

# Masking

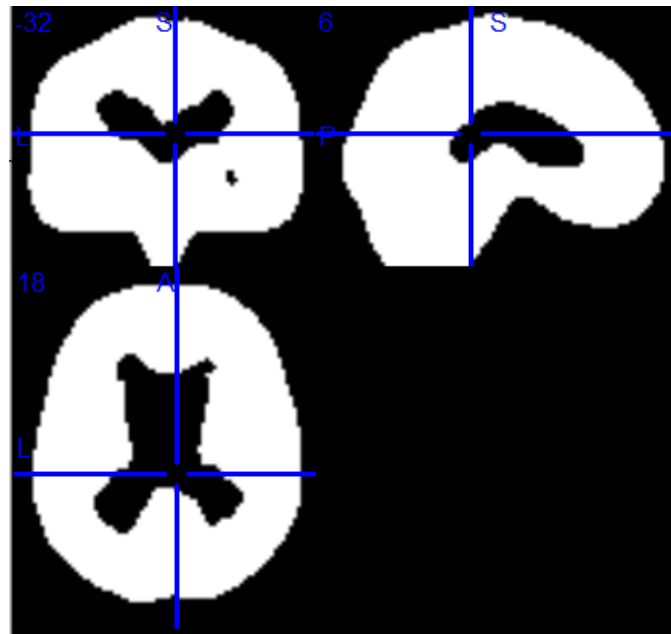


## Explicit Mask



- Brain mask is provided by the experimenter (default brain mask provided in SPM fieldmap toolbox used in our case)

## Relative Mask



- Creates mask based on intensity values of the image
- Usual threshold set to **0.8** (exclude the voxels with intensity **>80%** of the mean global value, computed after excluding image voxels  $< \text{mean global value}/8$ )

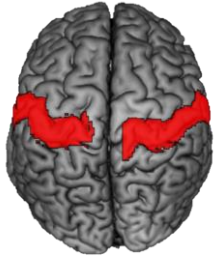
# Scaling



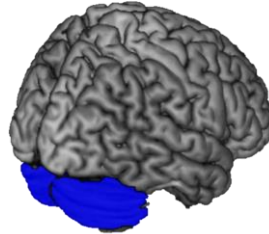
A reference region should be:

- Spared by the disease of interest
- Devoid of tracer specific uptake

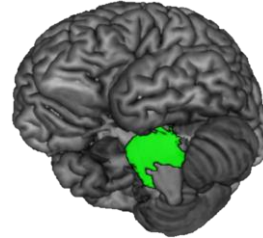
=> The delivery of the tracer in this region is similar across patients and healthy controls



Somatosensory  
Cortex



Whole Cerebellum  
(or only CER GM)

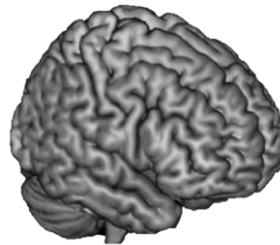


PONS

This allows us to compute a standardized uptake value ratio (comparable across subjects) that can be used for further analysis

*Courtesy of Leonardo Iaccarino, PhD, UCSF*

SPM standard approach considers a “Global Mean”, which computes an average value from all the GM cortical regions.

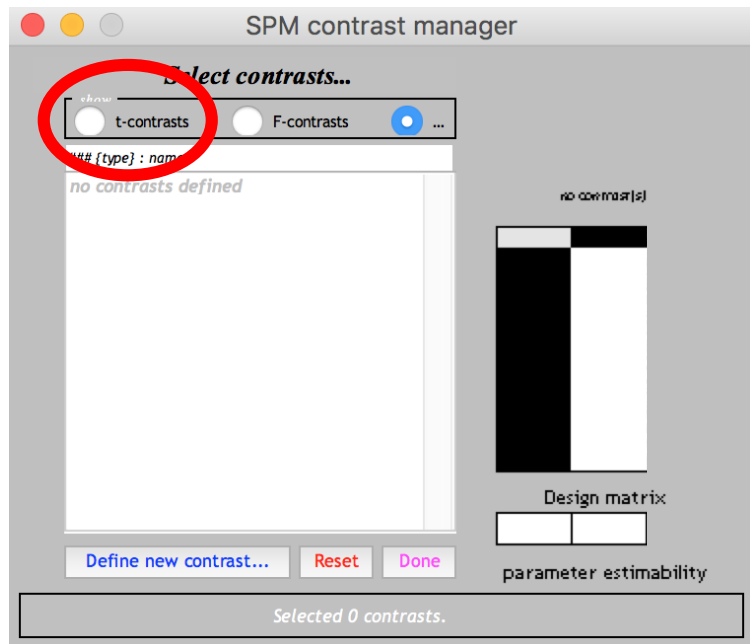


Each image (patient and controls) is scaled to its global mean; this provides a relative, NOT absolute measure of metabolism!

When comparing patient and controls we then obtain a relative measure of decreases and increases

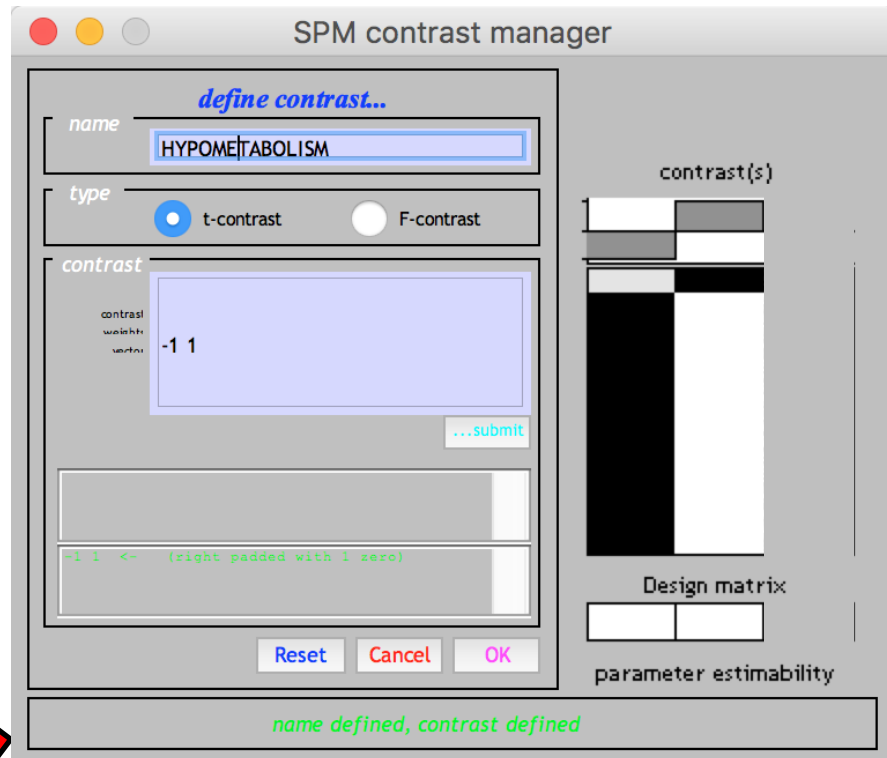
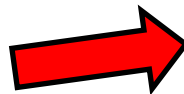


# Contrasts



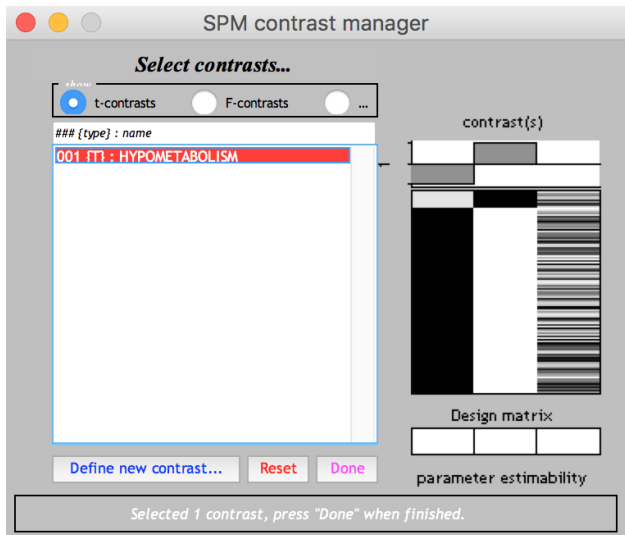
The contrast you specify relates to your question.

Contrast

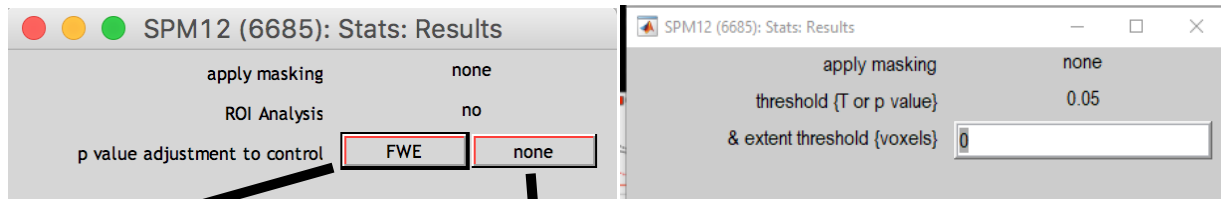




# Results

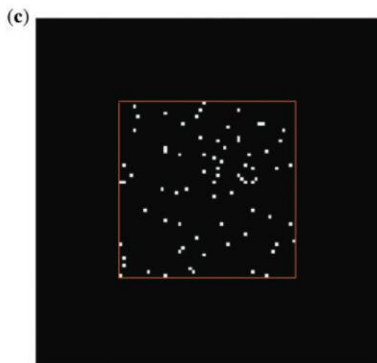


## Statistical adjustments

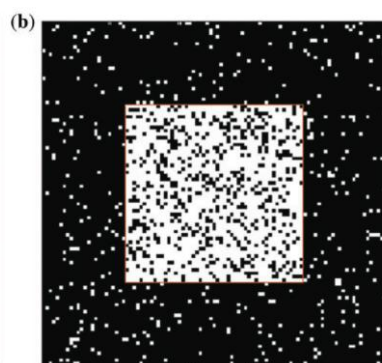


FWE

Uncorrected



Control of Familywise Error Rate

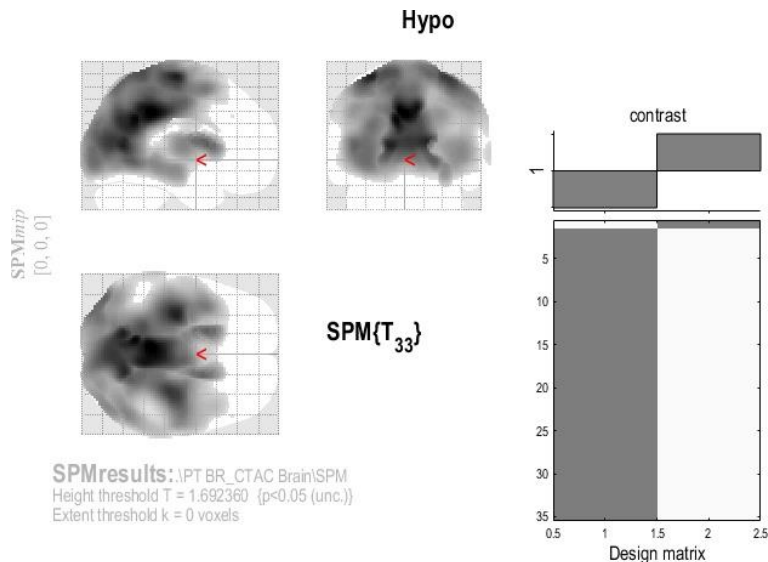
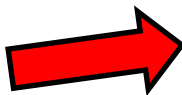


Uncorrected Results

# SPM maps

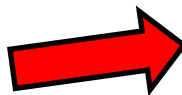


Significant areas



SPMresults: \PT BR\_CTAC Brain\SPM  
 Height threshold T = 1.692360 {p<0.05 (unc.)}  
 Extent threshold k = 0 voxels

Details, t-val and p-val,  
 peak coordinates



Statistics: *p-values adjusted for search volume*

set-level		cluster-level				peak-level				mm mm mm			
<i>p</i>	<i>c</i>	<i>p</i> <sub>FWE-corr</sub>	<i>q</i> <sub>FDR-corr</sub>	<i>k</i> <sub>E</sub>	<i>p</i> <sub>uncorr</sub>	<i>p</i> <sub>FWE-corr</sub>	<i>q</i> <sub>FDR-corr</sub>	<i>T</i>	( <i>Z</i> <sub>≡</sub> )	<i>p</i> <sub>uncorr</sub>			
1.000	4	0.000		62299	0.000	0.000	0.000	11.59	7.27	0.000	-4	-42	38
						0.000	0.000	11.03	7.09	0.000	-10	-54	32
						0.000	0.000	10.64	6.96	0.000	8	-46	42
		1.000		124	0.778	1.000	0.048	2.34	2.24	0.013	72	-32	4
		1.000		1	0.990	1.000	0.156	1.71	1.67	0.047	54	30	34
		1.000		2	0.984	1.000	0.157	1.71	1.67	0.047	-28	-14	-2

table shows 3 local maxima more than 8.0mm apart

Height threshold: T = 1.69, p = 0.049 (1.000)  
 Extent threshold: k = 0 voxels  
 Expected voxels per cluster, <math>\langle c \rangle = 1307.636</math>  
 Expected number of clusters, <math>\langle c \rangle = 18.33</math>  
 FWEp: 5.042, FDRp: 2.325, FWEc: 62299

Degrees of freedom = [1.0, 33.0]  
 FWHM = 22.1 24.2 21.4 mm mm mm; 11.1 12.1 10.7 (voxels)  
 Volume: 1610344 = 201293 voxels = 127.9 resels  
 Voxel size: 2.0 2.0 2.0 mm mm mm; (resel = 1435.20 voxels)