

Uncovering the saliency of local topological features for Alzheimer's disease characterisation

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DBSSE

ETH zürich

Alzheimer's disease:

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- Nearly 40 million people live with AD

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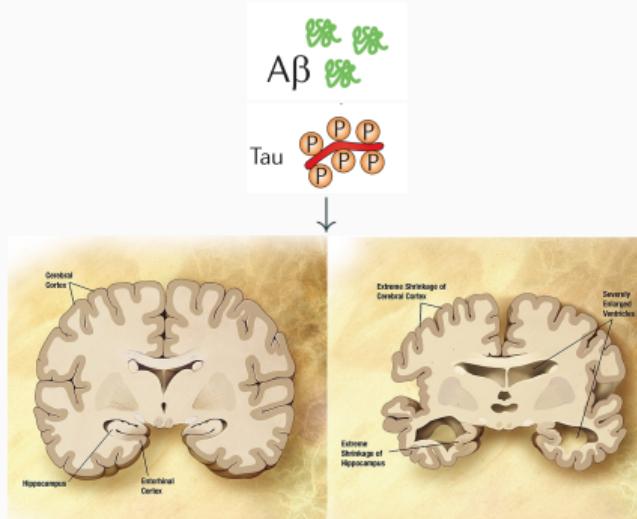
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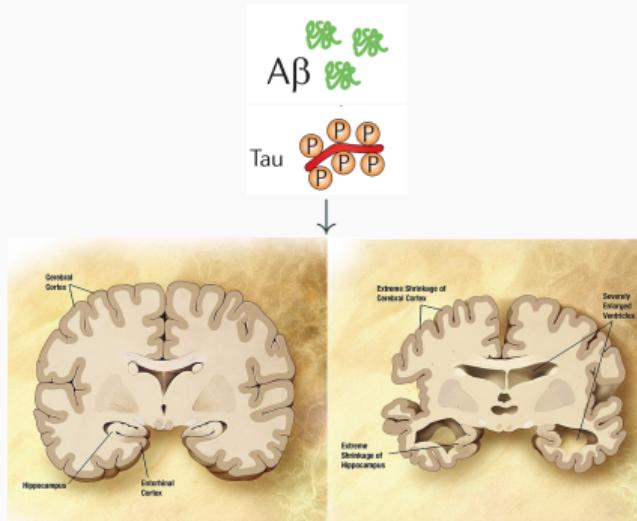


Images adapted from Ittner et al and Wikipedia

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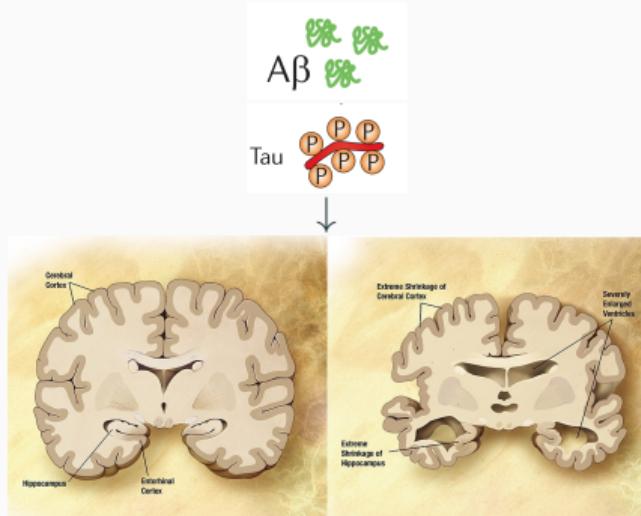
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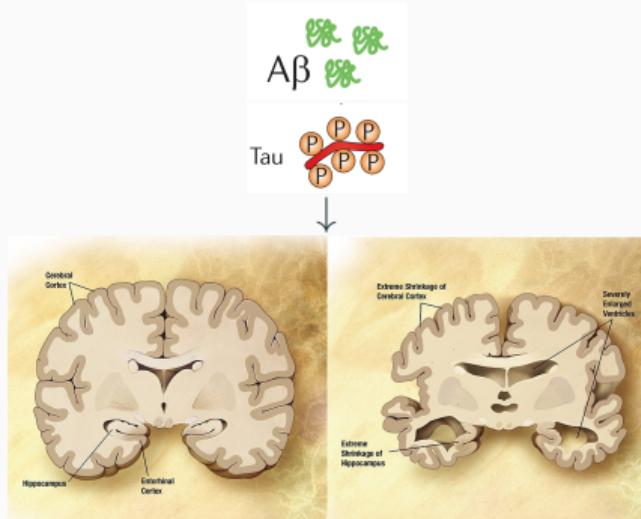
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- Concerned with “properties of a geometric object that are preserved under **continuous deformations**, such as [...] crumpling.”

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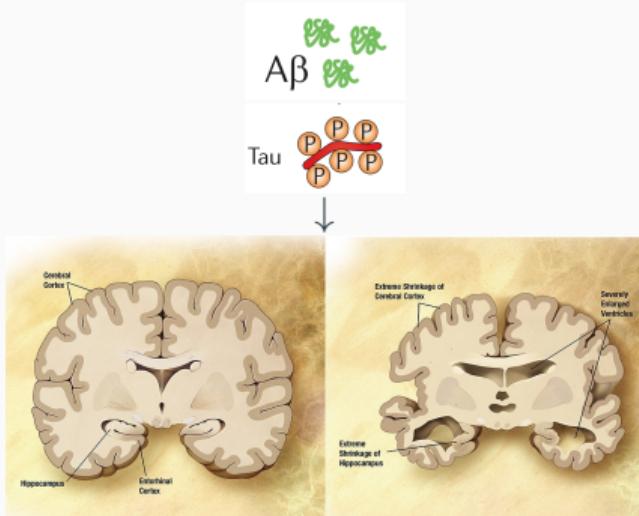
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- Recently, *persistent homology* has emerged as a way to quantify the shape of data.

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Topology:

- Concerned with “properties of a geometric object that are preserved under **continuous deformations**, such as [...] crumpling.”
- Recently, *persistent homology* has emerged as a way to quantify the shape of data.
- **How can we apply persistent homology to quantify changes in shape due to Alzheimer's disease?**

Topology in AD - Research Avenues

1. Classification

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1. **Classification**
2. Subtype identification

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3. Progression & forecasting

Determining the patch of interest

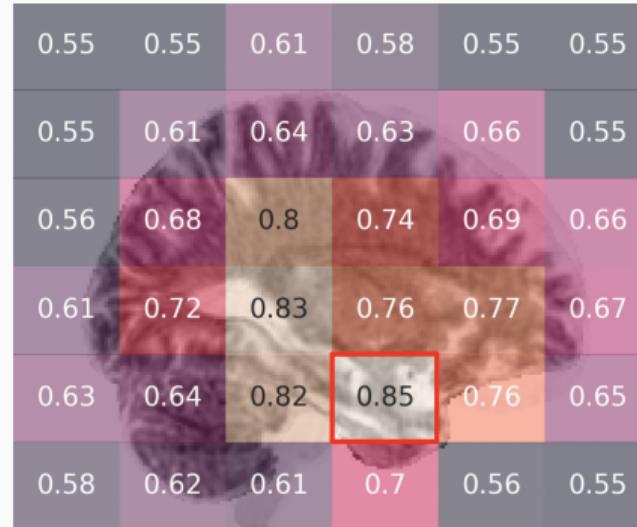


Figure 2: The patch with the highest accuracy was selected. Results from Brüningk, Sarah C et al
<https://arxiv.org/abs/2011.06531>

Obtaining topological features from sMRI data

- We use the T1-weighting value (fat ≈ 1 ; water ≈ 0) to compute topological features
- Filtration of point clouds:

Figure 3: Point cloud filtration. Adapted from giotto-ai.github.io/gtda-docs/

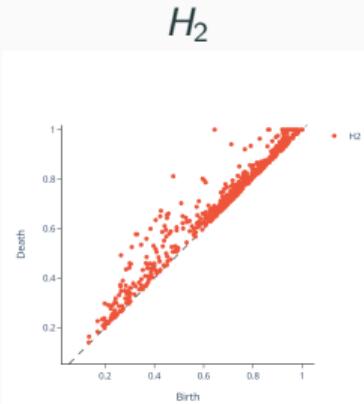
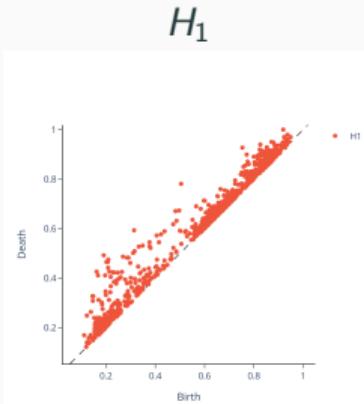
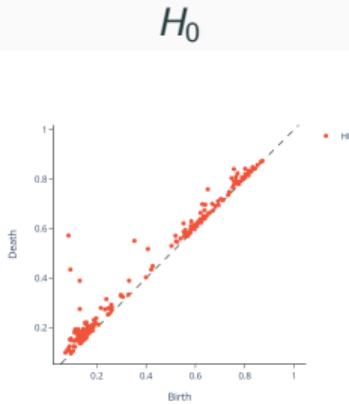
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- We use the T1-weighting value (fat ≈ 1 ; water ≈ 0) to compute topological features
- Filtration of cubical complexes to examine the connected components, cycles, and voids.

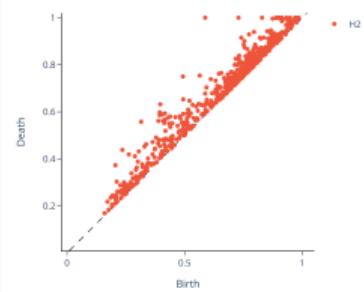
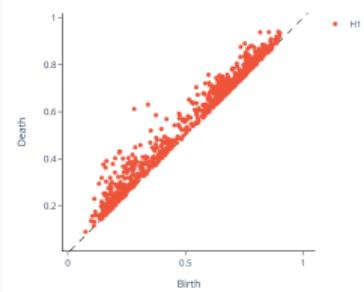
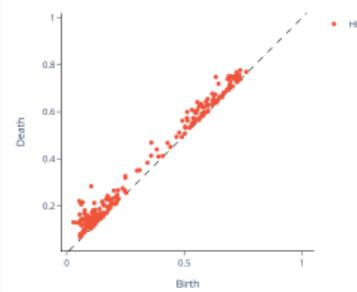
Figure 4: Cubical complex filtration. Adapted from Bastian Rieck <https://youtu.be/4mBcwy1t0J4>

I - Persistent homology

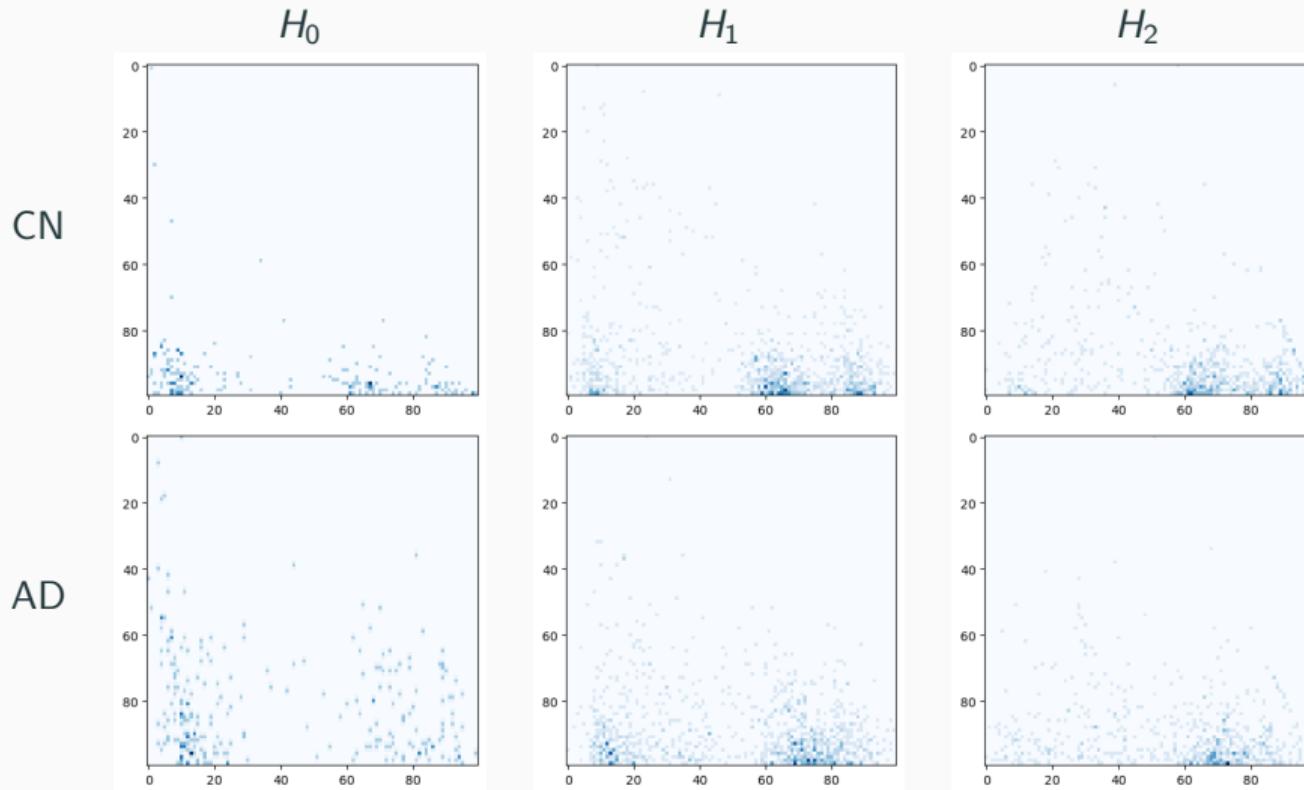
CN



AD



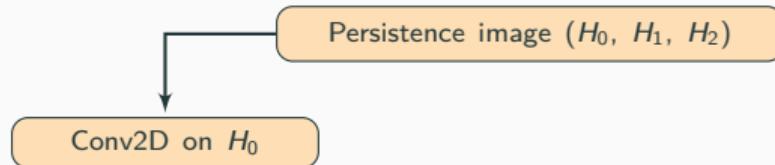
I - Classification - Persistence Images



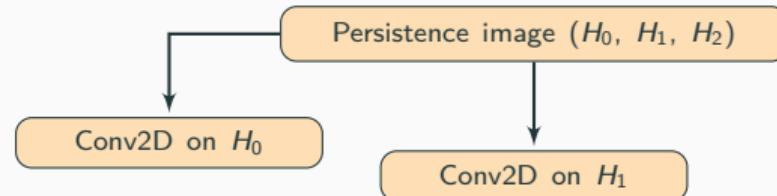
I - Classification - Network architecture

Persistence image (H_0, H_1, H_2)

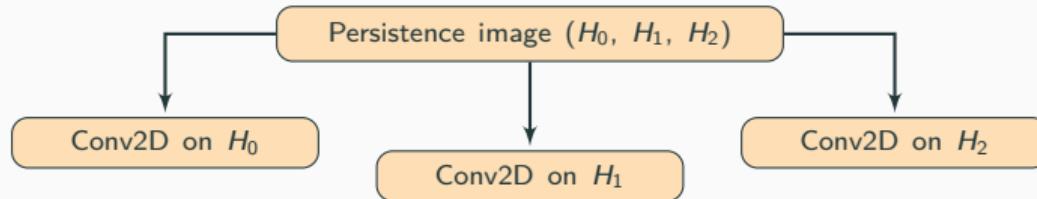
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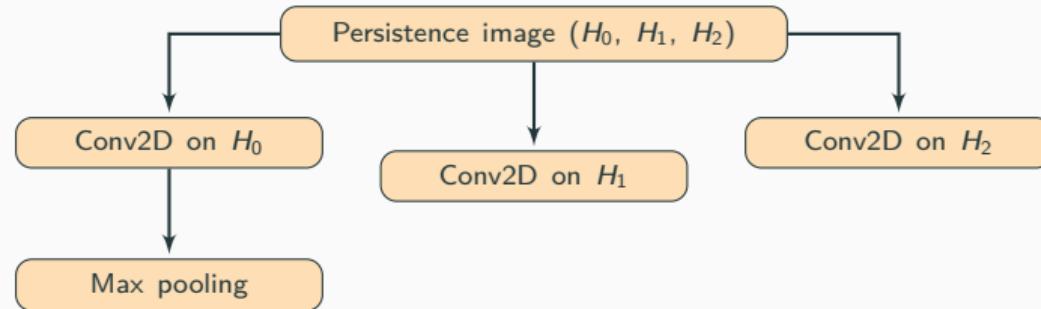
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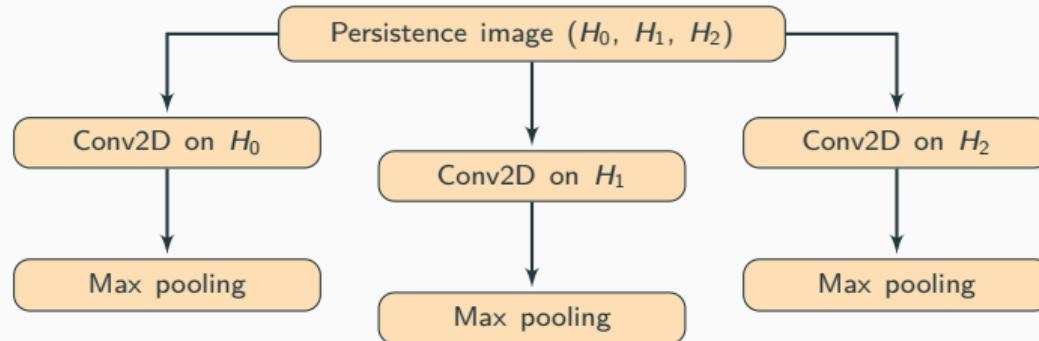
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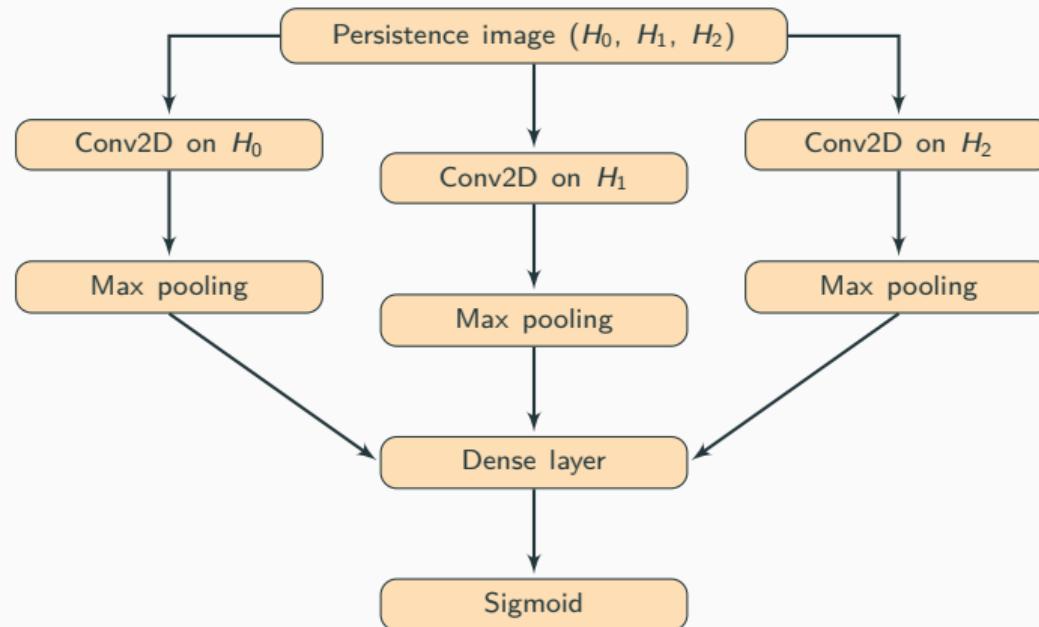
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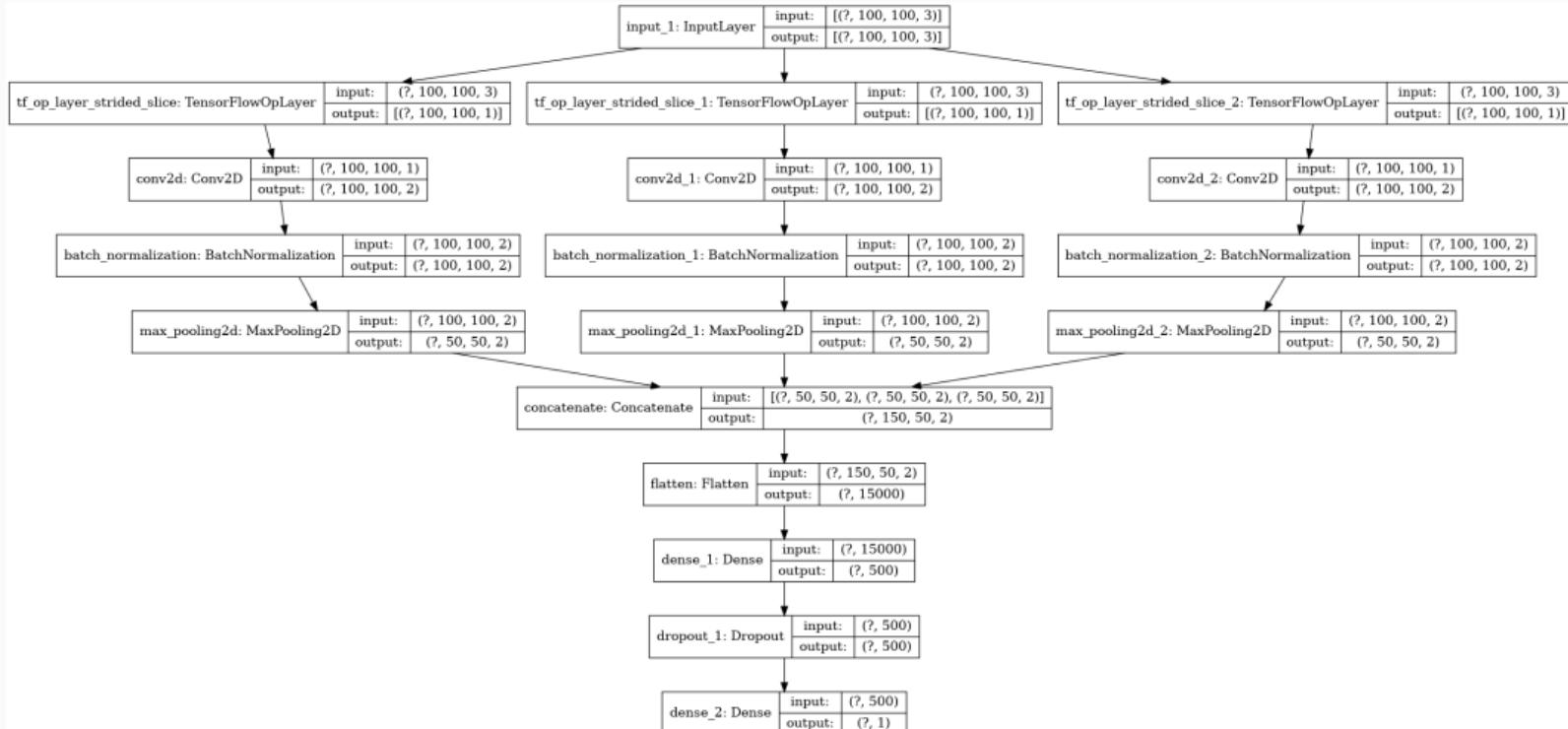
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Methodological considerations

- 4 fold CV, 3 inits. Stratified for age, diagnoses and patients spread over folds.
- Same settings as in Brüningk, Sarah C *et al* <https://arxiv.org/abs/2011.06531>

I - Classification - Performance

| | Local Global | PI | 3D Conv | PI |
|---------------------|-----------------|-----------------|-----------------|-----------------|
| Validation accuracy | | 0.79 ± 0.02 | 0.85 ± 0.06 | 0.76 ± 0.02 |
| Precision | | 0.81 ± 0.04 | 0.87 ± 0.04 | 0.74 ± 0.02 |
| Recall | | 0.81 ± 0.02 | 0.87 ± 0.08 | 0.88 ± 0.08 |
| AUC | | 0.85 ± 0.03 | 0.89 ± 0.05 | 0.78 ± 0.02 |

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Persistent homology produces **highly salient compressed** features for AD characterization.

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Future directions:

- Can persistent homology be used to diagnose **prodromal** forms of AD?

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Future directions:

- Can persistent homology be used to diagnose **prodromal** forms of AD?
- Use a similar approach for **subtype identification**.

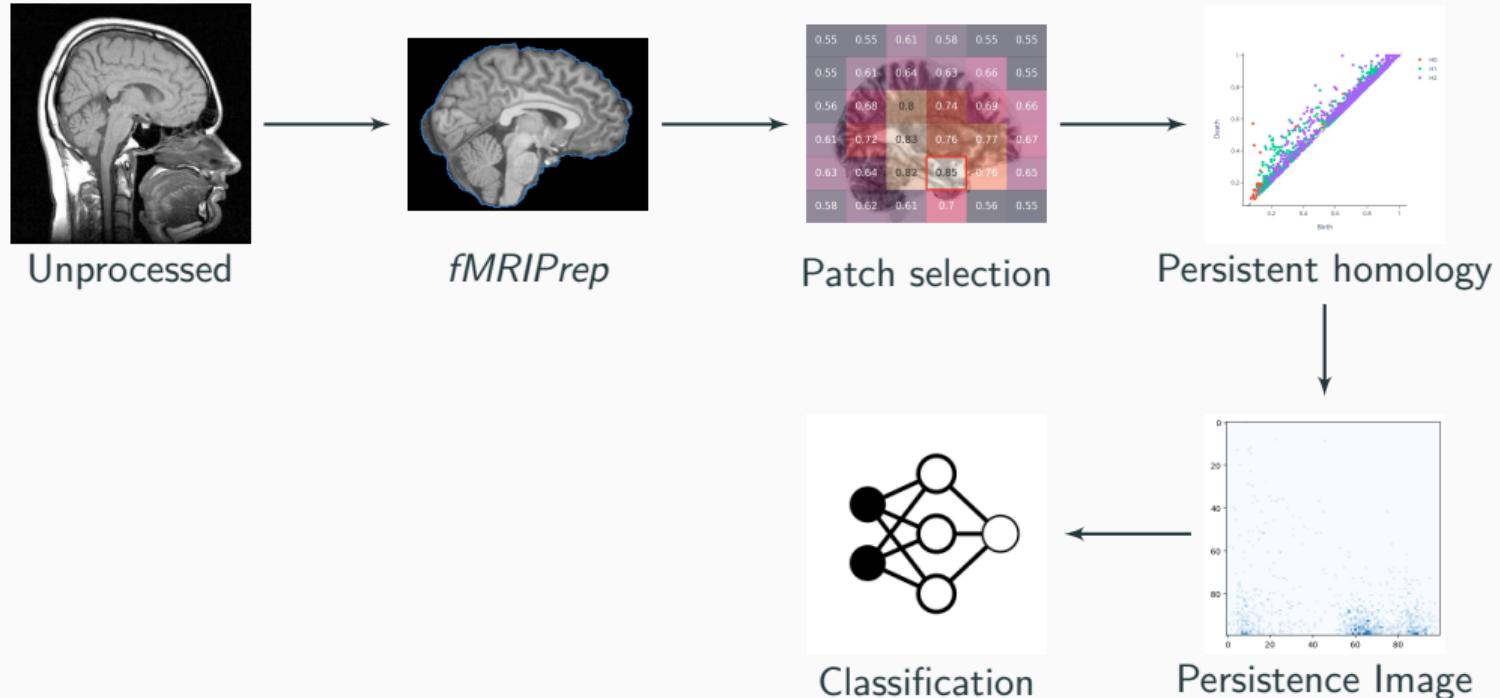
Thanks!

GitHub repository of the project (currently available upon request)

github.com/pjhartout/TDA_ADNI_MLCB

With thanks to Bastian Rieck for the supervision and Sarah Brueningk, Felix Hensel, Catherine Jutzeler, Merel Kuijs and Louis Lukas for insightful discussions, code, and data & Karsten Borgwardt for providing the research setting.

Questions?



Images adapted from Wikimedia, slicer.org, and Sachin Modgekar