# A Missing Data Method for Deconfounding in Neuroimaging Studies

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#### Joint work

#### Preprint:

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### Motion quality control causes massive data loss

- Motion in the scanner produces artifacts (Power et al., 2012).
- Lenient criteria: < 5 min data after removing frames with > 3 mm or 3° from previous frame (Fassbender et al., 2017).
- Strict criteria: mean framewise displacement > .2 mm or < 5 min data after excluding FD > .25 mm (Ciric et al., 2017).

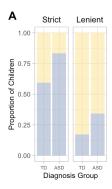


Figure: QC removes 60% and 83% of TD and ASD, respectively, under strict and 16% and 30% under lenient.

# The problem: motion exclusion criteria in functional MRI causes sampling bias

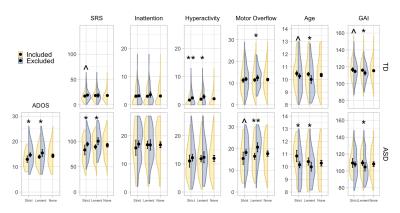


Figure: During quality control, more severe cases of autism are excluded. FDR-adjusted p value: \*\* <0.05; \*<0.1; ^<0.2.

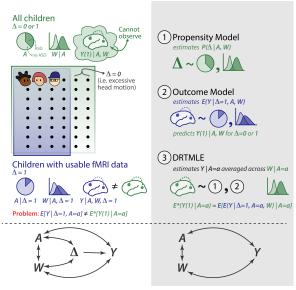
## Confounding

• Y(1) is the counterfactual that a participant's scan is usable. Define associational parameter:

$$\psi^* = E^*[Y(1)|A = 1] - E^*[Y(1)|A = 0]$$
$$= E^* \{E^* (Y(1)|A = 1, W)|A = 1\}$$
$$- E^* \{E^* (Y(1)|A = 0, W)|A = 0\}$$

- $\psi_{naive} = E[Y|\Delta = 1, A = 1] E[Y|\Delta = 1, A = 0].$
- Define confounding:  $\psi_{naive} \neq \psi^*$ .
- Confounding bias and selection bias: concepts overlap (Lash et al., 2021); see (Hernan and Robins, 2020) p. 80 for detailed discussion.
- Key: lack of exchangeability between usable and unusable data.
- Bias can arise when  $\Delta \leftrightarrow W$ ,  $W \leftrightarrow Y$ . Then  $E^*[Y(1)|A=1] \neq E[Y|\Delta=1,A=1]$

## Graphical overview



## Target Parameter and Identifiability Assumptions

• Define our target parameter, the deconfounded group difference:

$$\psi = E\{E(Y \mid \Delta = 1, A = 1, W) \mid A = 1\}$$
$$-E\{E(Y \mid \Delta = 1, A = 0, W) \mid A = 0\}.$$

- Identifiability assumptions:  $\psi^* = \psi$  if
  - (A1.1) Mean exchangeability (conditional randomization): for  $a = 0, 1, E^*\{Y(1) \mid A = a, W\} = E^*\{Y(1) \mid \Delta = 1, A = a, W\}.$
  - (A1.2) Positivity: for a = 0, 1 and all possible w,  $P(\Delta = 1 \mid A = a, W = w) > 0$ .
  - (A1.3) Causal Consistency: for all i such that  $\Delta_i = 1$ ,  $Y_i(1) = Y_i$ .

## IPWE and G-computation

- Inverse probability weighted estimator:
  - Fit propensity model:  $P(\Delta_i|A_i,W_i)$ .
  - Use ensemble of machine learning methods (van der Laan et al., 2007).
  - Propensity model predicting probability of inclusion to upweight usable data with small probabilities of inclusion:

$$\hat{\psi}_{IPWE} = \mathbb{E}_{n,A_i=1} \left( \frac{\Delta_i}{\hat{p}_i} Y_i \right) - \mathbb{E}_{n,A_i=0} \left( \frac{\Delta_i}{\hat{p}_i} Y_i \right).$$

- G-Computation estimator:
  - Fit outcome model:

$$\{Y_i|(\Delta_i=1)\} = f(A_i, W_i) + \epsilon_i.$$

• Predict values for both  $\Delta_i = 0$  and  $\Delta_i = 1$ :

$$\hat{\psi}_{GComp} = \mathbb{E}_{n,A_i=1}\hat{Y}_i - \mathbb{E}_{n,A_i=0}\hat{Y}_i.$$



## Doubly robust targeted minimum loss based estimation

- Benkeser et al. (2017) developed a doubly robust targeted minimum loss-based estimator: if at least one of the two regressions is consistently estimated, both  $\hat{\psi}$  and its SE are consistently estimated.
  - Fit propensity model.
  - 2 Fit outcome model.
  - **3** Apply DRTMLE to propensities and predicted outcomes. Involves a special iterative logistic regression.

## Data Analysis

- Resting-state fMRI scans from Kennedy Krieger Institute (either 5:20 or 6:45 seconds in length) collected from 2007-2020.
- 137 ASD children without an intellectual disability and 348 typically developing.
- Use the lenient criteria.
- 96 ASD and 292 TD pass lenient criteria.

#### $\Delta \leftrightarrow W$

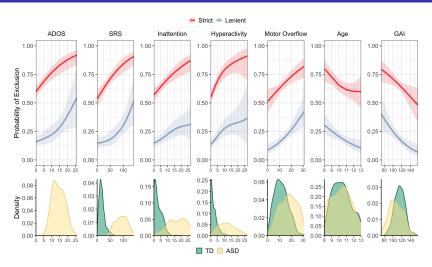


Figure: Behavioral variables are related to the probability that data are excluded.

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## Data Analysis: Functional Connectivity

- Group ICA with 30 components, extract subject-specific time courses, calculate partial correlations reproducing pipeline from Lombardo et al. (2019).
- Retained 18 signal components, resulting in 153 edges.
- For each edge, fit a linear model: Fisher transformed partial correlation ~ diagnosis and controlling for variables that are not balanced between ASD and TD but should be (motion variables, sex, race, SES).
- Use adjusted residuals: Add diagnosis effect back into residuals.
- Naive approach with t-statistic is then approximately equal to p-value from a linear model controlling for motion, sex, race, SES (similar to Di Martino et al. 2014).

#### $W \leftrightarrow Y$

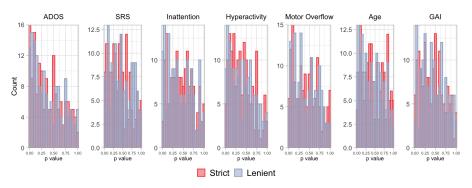


Figure: P values for generalized additive models of the relationship between edgewise functional connectivity (153 edges) in participants with usable rs-fMRI data. Blue: lenient criteria. Red: strict criteria.

## Data Analysis

SuperLearner with 10-fold CV for propensity and outcome models: SL.earth, SL.glmnet, SL.gam, SL.glm, SL.ranger, SL.ridge, SL.step, SL.step.interaction, SL.svm, SL.xgboost.

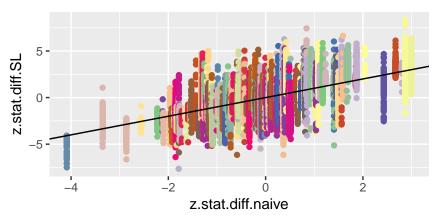


Figure: Used average z-statistic from 400 seeds.

#### Results

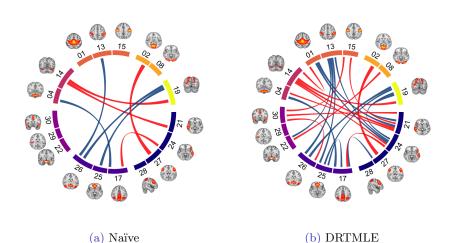


Figure: Z-stats of ASD-TD difference in partial correlations. Thresholded at FDR=0.20. Blue: ASD>TD. Naïve (left): 8 edges, DRTMLE (right): 25 edges.

### Results, cont.

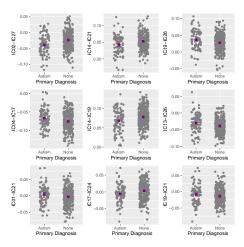


Figure: The changes in the means were small, but this drove the large differences in significance. Red: Naive. Transparent blue: DRTMLE.

#### Discussion and limitations

- Participant exclusion due to motion quality control creates sampling biases.
- We use DRTMLE to estimate the deconfounded group difference in a large study of autism spectrum disorder.
- More extensive differences between ASD and TD using DRTMLE.
- Limitations: only addressed missing outcome. Dataset also missing covariate values.
- Limitations: possible issues with smaller sample sizes. Develop permutation tests.
- Extend method for covariates we want to be balanced between groups (e.g., motion, age, sex, SES) versus those we want to differ (autism severity).
- Additional info: github.com/thebrisklab
- Thank you!

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