

Introduction to  
AFNI+SUMA+FATCAT,  
Part III

DTI+tractography for data exploration and  
complementing functional connectivity

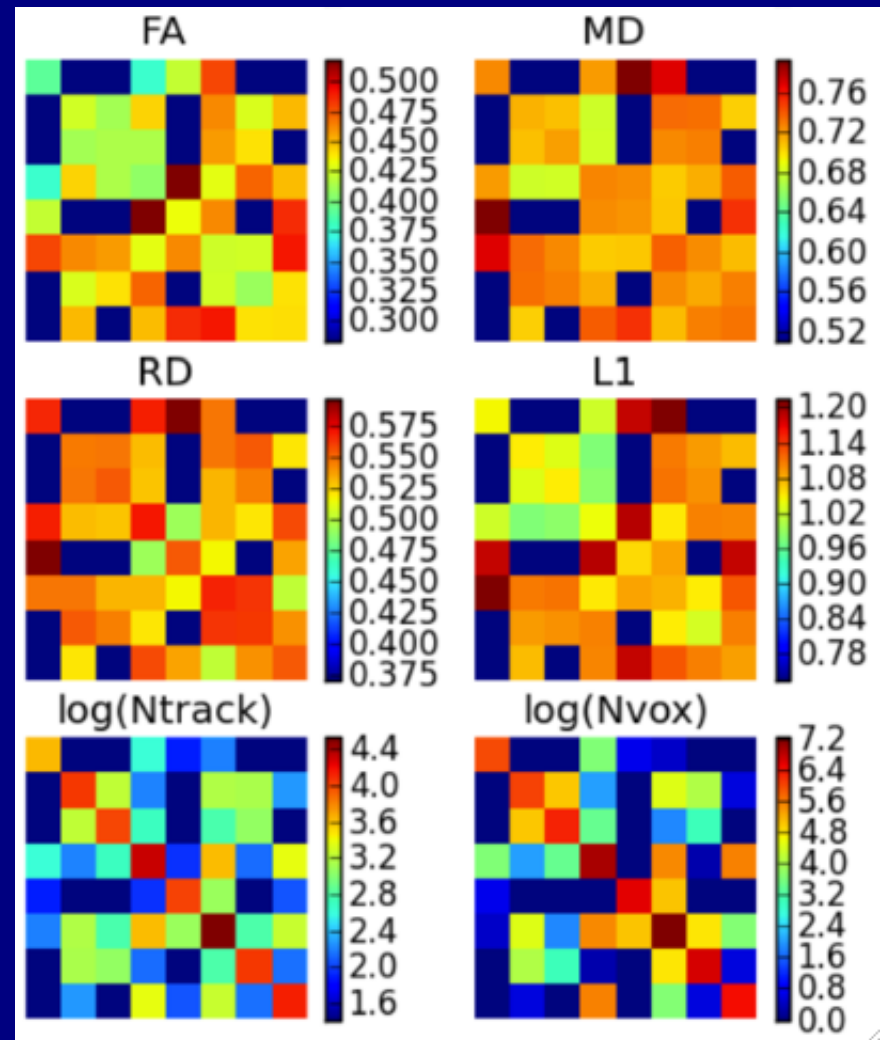
Combining MRI results (SC matrices)  
with non-MRI data (e.g., age, test scores,  
characteristics, etc.) for group analysis

# WM (ROI) Quantities

For connected pairs of GM ROIs in a network, have an average WM property (or can map to T1, PD...) →

Have produced sets of localized structural/anatomical quantities for comparison with functional values or behavioral scores, genetics, etc.

Can use for group or individual comparisons/regressions.



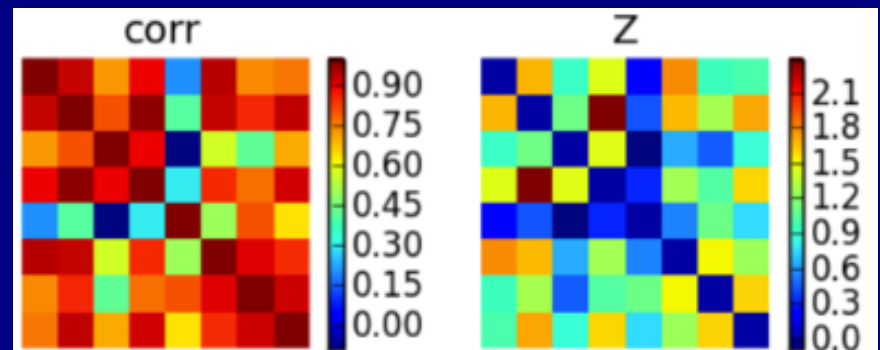
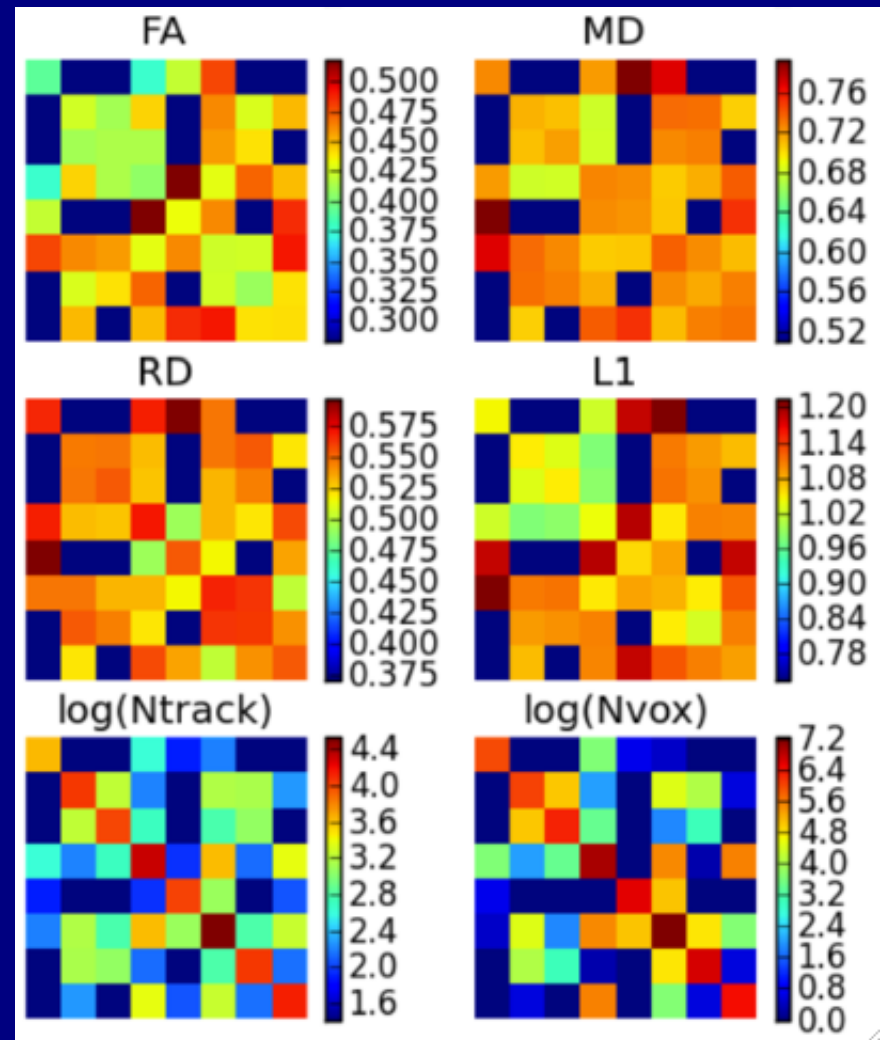
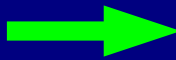
# WM (ROI) Quantities

For connected pairs of GM ROIs in a network, have an average WM property (or can map to T1, PD...) →

Have produced sets of localized structural/anatomical quantities for comparison with functional values or behavioral scores, genetics, etc.

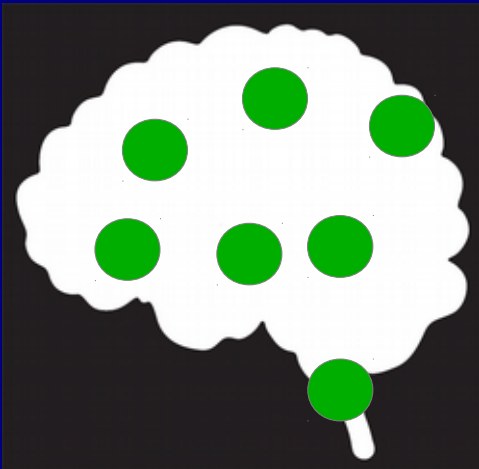
Can use for group or individual comparisons/regressions.

**3dNetCorr**: correlation matrices  
Of average time series in ROIs  
(e.g., uninflated GM ROIs from 3dROIMaker)



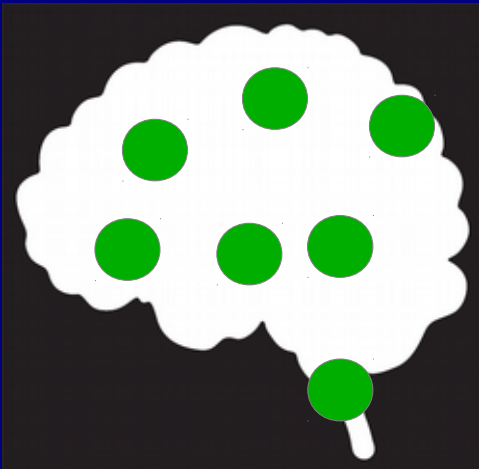
# Group Analysis Steps

1) Place network targets

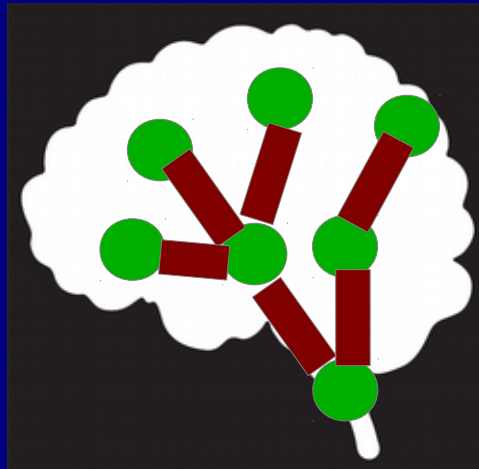


# Group Analysis Steps

1) Place network targets

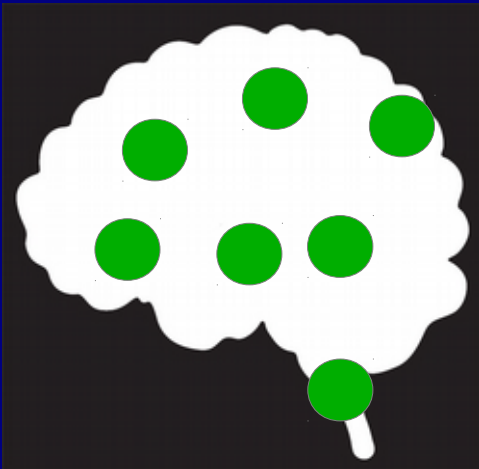


2) Probabilistic tracking

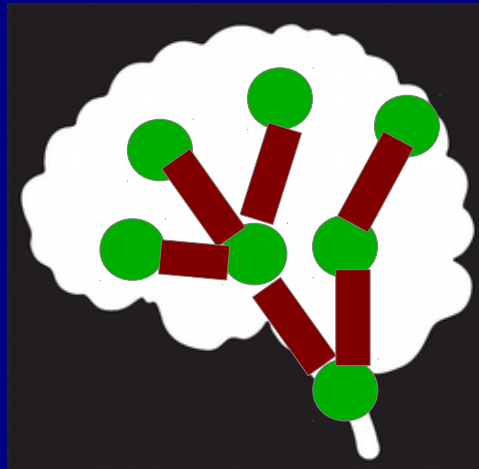


# Group Analysis Steps

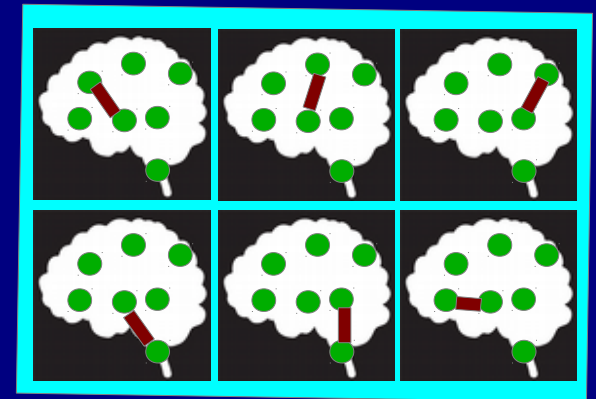
1) Place network targets



2) Probabilistic tracking

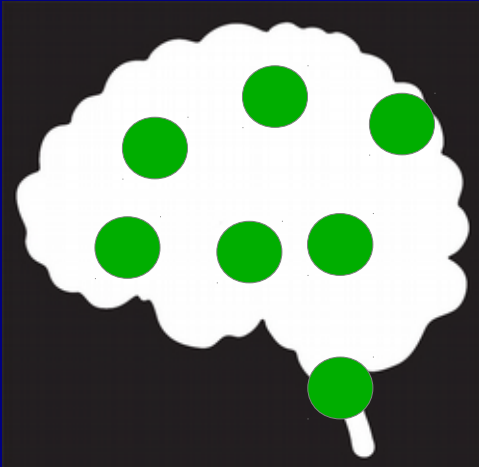


3) set of WM ROIs  $\rightarrow$  set of simultaneous measures

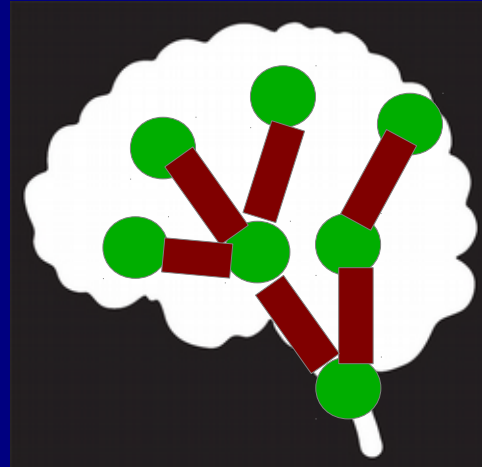


# Group Analysis Steps

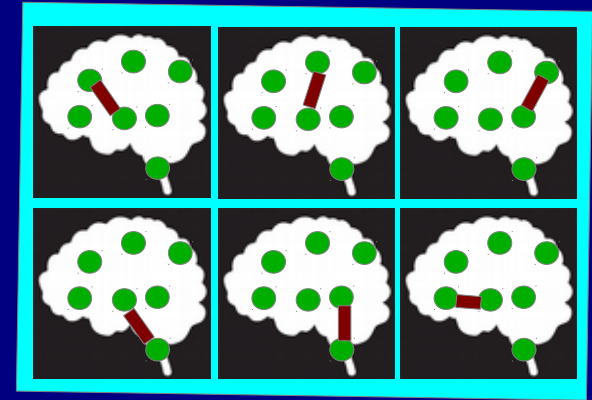
1) Place network targets



2) Probabilistic tracking



3) set of WM ROIs → set of simultaneous measures



4) Multivariate model

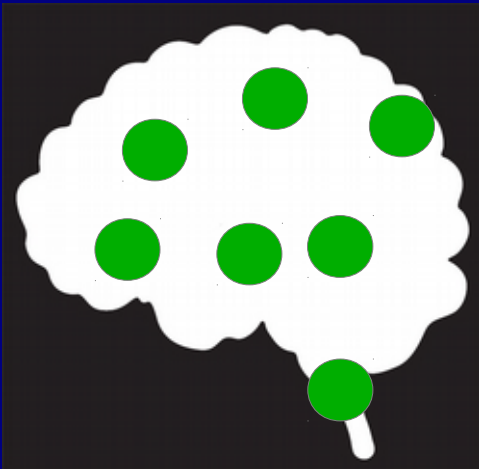
- $\{FA_1, FA_2, FA_3, \dots\}$
- alc
- infant age
- infant sex
- maternal age
- maternal cig/day

➔ AFNI's 3dMVM, written by G. Chen

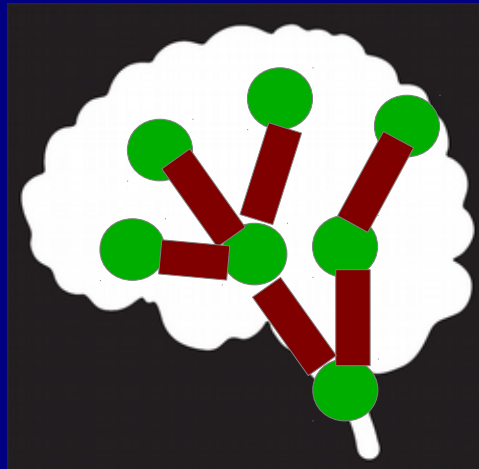


# Group Analysis Steps

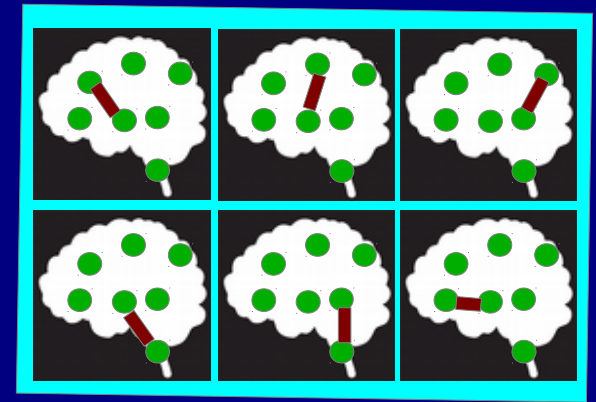
1) Place network targets



2) Probabilistic tracking



3) set of WM ROIs → set of simultaneous measures

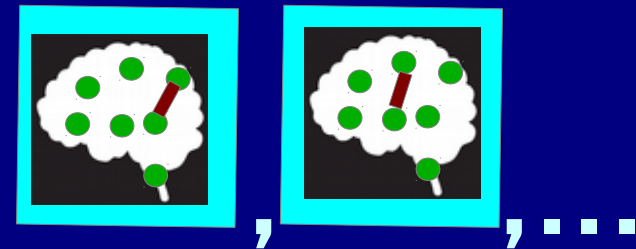


4) Multivariate model

- $\{FA_1, FA_2, FA_3, \dots\}$
- alc
- infant age
- infant sex
- maternal age
- maternal cig/day

5) Follow-up GLM for each WM ROI

- FA
- alc
- infant age
- infant sex
- maternal age
- maternal cig/day



➔ AFNI's 3dMVM, written by G. Chen

# Group Analysis Steps

## fat\_mvm\_prep.py

- + make a data table combining:
  - a CSV file of subject data with
  - a set of \*.grid<sup>1</sup> files from 3dTrackID;
- + automatically selects tracked connections found across all groups (future version may have LME modeling that allows missing data)

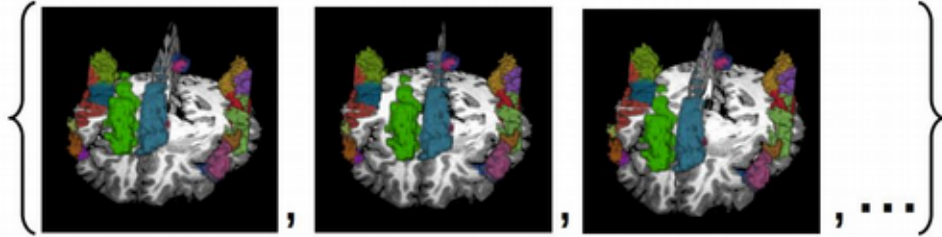
## fat\_mvm\_scripter.py

- + define a statistical model of variables from CSV file + DTI data
- + build a 3dMVM script to test the model using entire networks, and
- + construct follow-up GLTs to investigate individual regions.

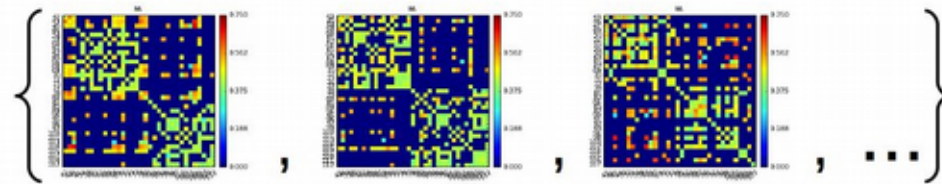
<sup>1</sup>Also works with \*.netcc files from 3dNetCorr.

# Group Analysis: Summary

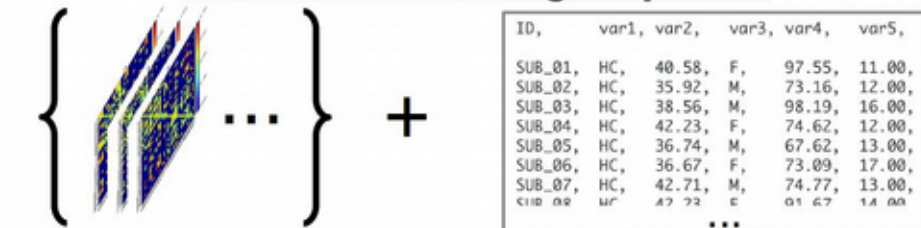
## A. $N$ networks of FMRI/DTI ROIs



## B. $N$ functional/structural matrices



## C. Combined MRI + group data



## D. User-defined model(s)

```
'measure1 ~ var1 + var2 + var3*var4 + ...'
'measure2 ~ var1 + var2 + var3*var4 + ...'
...
```

## E. Network-level statistics for each model

ANOVA table of  $\chi^2$ , DF, and p-value:

```
# RESULTS: ANOVA table - FA
5 # Number of effects
# Chisq DF Pr(>Chisq)
4.9457216 1 2.615532e-02 # var1
0.8453055 1 3.578838e-01 # var2
0.6640459 1 4.151352e-01 # var3
0.8097606 1 3.681910e-01 # var4
2.1255675 1 1.448591e-01 # var3:var4
```

## F. Set of ROI statistics for each model

Post hoc table of value, t-stat, DF and 2-sided p:

```
# RESULTS: Post hoc tests - FA
54 # Number of tests
# value t-stat DF 2-sided-P
-0.0044778181 -0.62834967 14 5.398911e-01 # 001_002-var1(+HC-IL)
-0.0002940607 -0.23287694 14 8.192272e-01 # 001_002-var2
0.0011186177 2.13603173 14 5.082097e-02 # 001_002-var3(+F-M)-var4
-0.0069573895 -1.12411575 14 2.798695e-01 # 001_002-var3(+F-M)
0.0004507261 1.54181323 14 1.454148e-01 # 001_002-var4
0.0130966286 1.51536073 14 1.519300e-01 # 003_004-var1(+HC-IL)
0.0010852927 0.70869270 14 4.901486e-01 # 003_004-var2
```

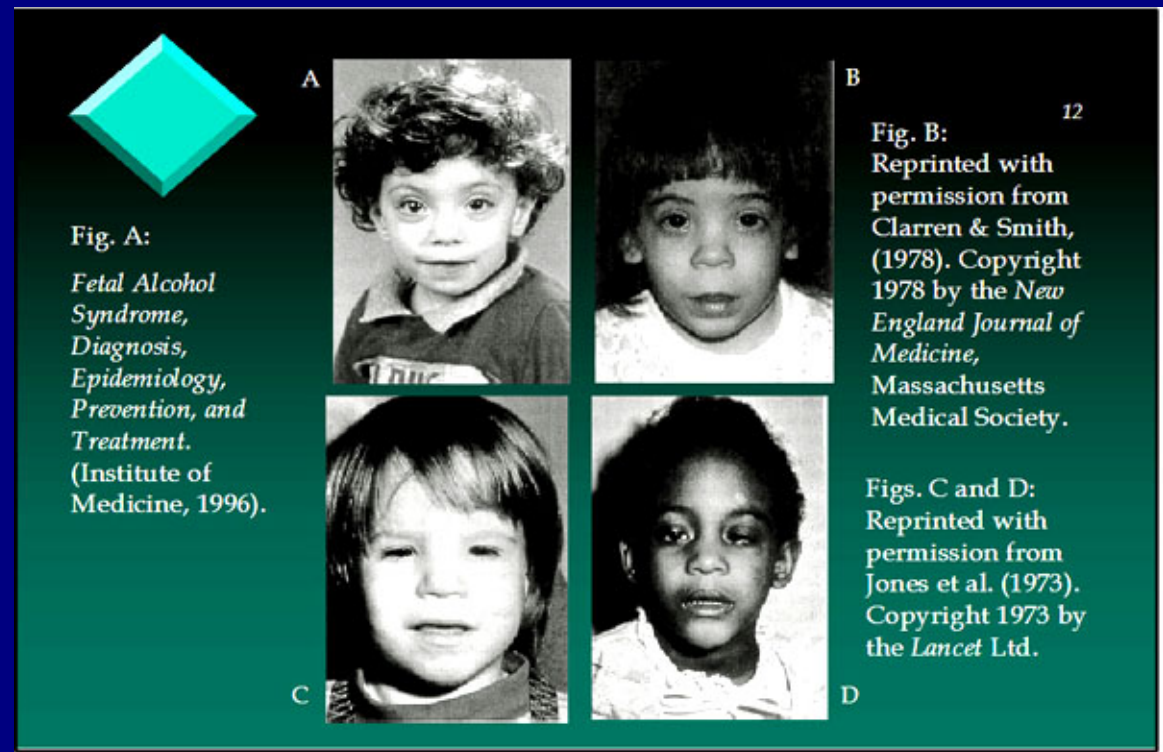
Example:  
Group analysis with tracking output  
using multivariate statistics

from study:

*A DTI-Based Tractography Study of Effects  
on Brain Structure Associated with  
Prenatal Alcohol Exposure in Newborns,*  
*Taylor, Jacobson, van der Kouwe, Molteno, Chen,  
Wintermark, Alhamud, Jacobson, Meintjes (2015)*

# Prenatal alcohol exposure (PAE)

- Alcohol is a teratogen, disrupting healthy embryonic and fetal development.
  - leads to various **Fetal Alcohol Spectrum Disorders (FASD)**
- FASD occurs in children whose pregnant mothers binge drank
  - e.g.,  $\geq 4$  drinks/occasion and/or  $\geq 14$  drinks/wk
- Results in *poor*:
  - academic performance
  - language/math skills
  - impulse control
  - abstract reasoning
  - memory, attention and facial and skeletal dysmorphology



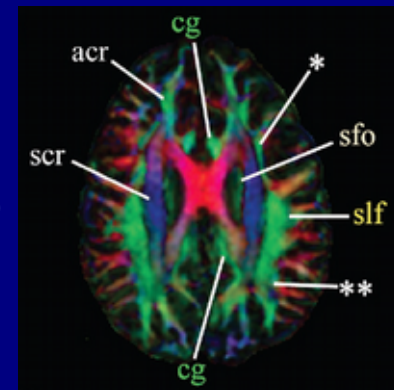
# Goals of this study

*To:*

- 1) Use neuroimaging to compare structural brain development in newborns with PAE to that of HC newborns.
- 2) Quantitatively examine WM properties across the brain
- 3) Relate changes in (localized) WM properties with PAE, controlling for several confounding effects  
→ examine several, and see which is/are (most) significant

Tools: diffusion tensor imaging (DTI) + tractography

- A) delineate similar WM ROIs across all subjects
- B) quantify structural properties (FA, MD, T1, ...)
- C) statistical modeling for comparisons  
- *at whole brain, network and ROI levels*



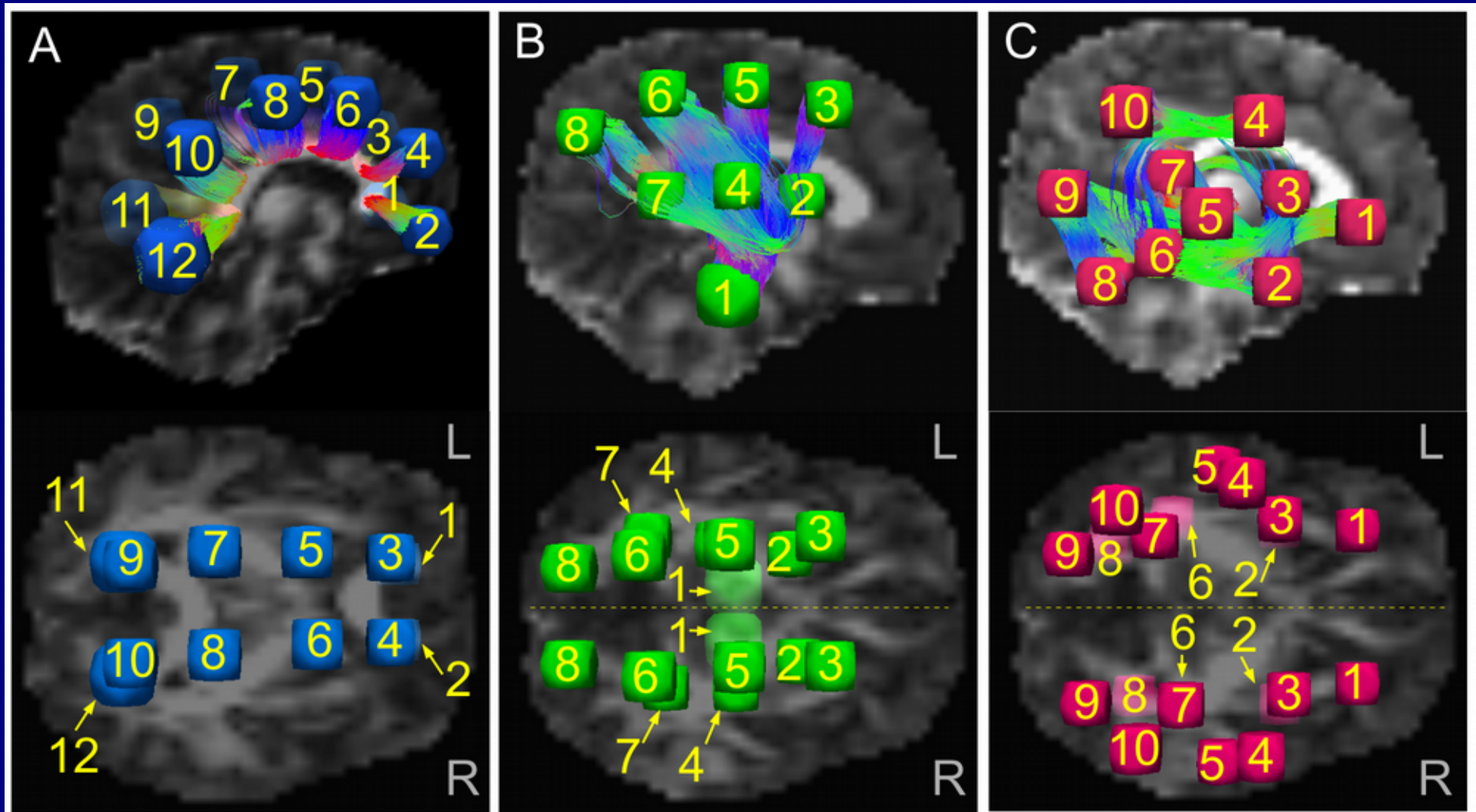
# Setting up DTI-tractography

Location of targets for tractography: 5 WM networks.

CC and Cor. Rad.  
(CCCR)

Projection  
(L/R-PROJ)

Association  
(L/R-ASSOC)



## II) Results: network level

The questions:

- 1) which WM networks are affected by PAE?
- 2) which parameters show effects most strongly?

Answer using:

- (for each network) a multivariate GLM for
  - set of DTI parameters
  - alcohol (frequency: binge/wk)
  - infant age (wks since conception)
  - infant sex (M/F)
  - maternal age (yrs)
  - maternal cigarette smoking (cig/day).



# II) Results: network level

The questions:

- 1) which WM networks are affected by PAE?
- 2) which parameters show effects most strongly?

Parameters showing at least trends ( $p < 0.1$ ) →

← Networks

Network	FA				MD				AD				PD			
	var.	$\beta_{med}$	$F(df_N, df_D)$	$p$	var.	$\beta_{med}$	$F(df_N, df_D)$	$p$	var.	$\beta_{med}$	$F(df_N, df_D)$	$p$	var.	$\beta_{med}$	$F(df_N, df_D)$	$p$
CCCR					alc	-0.70	8.6 (1, 14)	0.011*	alc	-0.72	14.0 (1, 14)	0.002**	cig	0.47	3.5 (1, 14)	0.083
					mat_age	0.56	5.5 (1, 14)	0.034*	mat_age	0.53	6.3 (1, 14)	0.025*				
L-PROJ	cig	0.12	4.2 (11, 4)	0.091	alc	-0.41	3.9 (10, 140)	0.000***	alc	-0.52	4.1 (10, 140)	0.000***	cig	0.52	4.0 (1, 14)	0.066
					mat_age	0.37	4.4 (1, 14)	0.056	mat_age	0.44	6.5 (1, 14)	0.023*				
R-PROJ					alc	-0.41	1.9 (12, 168)	0.035*	alc	-0.45	2.7 (12, 168)	0.002**	cig	0.48	3.4 (1, 14)	0.085
	age	0.33	8.6 (13, 2)	0.109	age	-0.41	5.8 (1, 14)	0.031*	age	-0.39	5.3 (1, 14)	0.038*				
	mat_age	-0.16	9.2 (13, 2)	0.103	sex	-0.20	4.3 (1, 14)	0.056	sex	-0.39	5.9 (1, 14)	0.029*				
L-ASSOC					alc	-0.65	6.0 (7, 8)	0.011*	alc	-0.66	8.1 (1, 14)	0.013*	cig	0.49	3.6 (1, 14)	0.080
									age	-0.16	2.5 (6, 84)	0.030*				
					mat_age	0.44	3.8 (1, 14)	0.071	mat_age	0.43	4.7 (1, 14)	0.048*				
R-ASSOC	alc	0.23	1.8 (7, 98)	0.090	alc	-0.62	10.2 (1, 14)	0.007**	alc	-0.67	14.1 (1, 14)	0.002**	cig	0.5	3.5 (1, 14)	0.082
									cig	-0.29	3.9 (1, 14)	0.068				

\*  $p < 0.05$ ; \*\*  $p < 0.01$ ; \*\*\*  $p < 0.001$ .

# II) Results: network level

The questions:

- 1) which WM networks are affected by PAE?
- 2) which parameters show effects most strongly?

Parameters showing at least trends ( $p < 0.1$ ) →

← Networks

Network	FA				MD				AD				PD			
	var.	$\beta_{med}$	$F(df_N, df_D)$	$p$	var.	$\beta_{med}$	$F(df_N, df_D)$	$p$	var.	$\beta_{med}$	$F(df_N, df_D)$	$p$	var.	$\beta_{med}$	$F(df_N, df_D)$	$p$
<b>CCCR</b>					alc	-0.70	8.6 (1, 14)	0.011*	alc	-0.72	14.0 (1, 14)	0.002**	cig	0.47	3.5 (1, 14)	0.083
<b>L-PROJ</b>					mat_age	0.56	5.5 (1, 14)	0.034*	mat_age	0.53	6.3 (1, 14)	0.025*				
	cig	0.12	4.2 (11, 4)	0.091	alc	-0.41	3.9 (10, 140)	0.000***	alc	-0.52	4.1 (10, 140)	0.000***	cig	0.52	4.0 (1, 14)	0.066
<b>R-PROJ</b>					mat_age	0.37	4.4 (1, 14)	0.056	mat_age	0.44	6.5 (1, 14)	0.023*				
	alc				alc	-0.41	1.9 (12, 168)	0.035*	alc	-0.45	2.7 (12, 168)	0.002**	cig	0.48	3.4 (1, 14)	0.085
<b>L-ASSOC</b>	age	0.33	8.6 (13, 2)	0.109	age	-0.41	5.8 (1, 14)	0.031*	age	-0.39	5.3 (1, 14)	0.038*				
	sex				sex	-0.20	4.3 (1, 14)	0.056	sex	-0.39	5.9 (1, 14)	0.029*				
<b>R-ASSOC</b>	mat_age	-0.16	9.2 (13, 2)	0.103	alc	-0.65	6.0 (7, 8)	0.011*	alc	-0.66	8.1 (1, 14)	0.013*	cig	0.49	3.6 (1, 14)	0.080
					mat_age	0.44	3.8 (1, 14)	0.071	mat_age	0.43	4.7 (1, 14)	0.048*				
	alc	0.23	1.8 (7, 98)	0.090	alc	-0.62	10.2 (1, 14)	0.007**	alc	-0.67	14.1 (1, 14)	0.002**	cig	0.5	3.5 (1, 14)	0.082
									cig	-0.29	3.9 (1, 14)	0.068				

\*  $p < 0.05$ ; \*\*  $p < 0.01$ ; \*\*\*  $p < 0.001$ .

→ Statistically significant alcohol exposure associations in ~every WM network

# II) Results: network level

The questions:

- 1) which WM networks are affected by PAE?
- 2) which parameters show effects most strongly?

Parameters showing at least trends ( $p < 0.1$ ) →

← Networks

Network	FA				MD				AD				PD			
	var.	$\beta_{med}$	$F(df_N, df_D)$	$p$	var.	$\beta_{med}$	$F(df_N, df_D)$	$p$	var.	$\beta_{med}$	$F(df_N, df_D)$	$p$	var.	$\beta_{med}$	$F(df_N, df_D)$	$p$
CCCR					alc	-0.70	8.6 (1, 14)	0.011*	alc	-0.72	14.0 (1, 14)	0.002**	cig	0.47	3.5 (1, 14)	0.083
					mat_age	0.56	5.5 (1, 14)	0.034*	mat_age	0.53	6.3 (1, 14)	0.025*				
L-PROJ	cig	0.12	4.2 (11, 4)	0.091	alc	-0.41	3.9 (10, 140)	0.000***	alc	-0.52	4.1 (10, 140)	0.000***	cig	0.52	4.0 (1, 14)	0.066
					mat_age	0.37	4.4 (1, 14)	0.056	mat_age	0.44	6.5 (1, 14)	0.023*				
R-PROJ					alc	-0.41	1.9 (12, 168)	0.035*	alc	-0.45	2.7 (12, 168)	0.002**	cig	0.48	3.4 (1, 14)	0.085
	age	0.33	8.6 (13, 2)	0.109	age	-0.41	5.8 (1, 14)	0.031*	age	-0.39	5.3 (1, 14)	0.038*				
	mat_age	-0.16	9.2 (13, 2)	0.103	sex	-0.20	4.3 (1, 14)	0.056	sex	-0.39	5.9 (1, 14)	0.029*				
L-ASSOC					alc	-0.65	6.0 (7, 8)	0.011*	alc	-0.66	8.1 (1, 14)	0.013*	cig	0.49	3.6 (1, 14)	0.080
					mat_age	0.44	3.8 (1, 14)	0.071	age	-0.16	2.5 (6, 84)	0.030*				
									mat_age	0.43	4.7 (1, 14)	0.048*				
R-ASSOC	alc	0.23	1.8 (7, 98)	0.090	alc	-0.62	10.2 (1, 14)	0.007**	alc	-0.67	14.1 (1, 14)	0.002**	cig	0.5	3.5 (1, 14)	0.082
									cig	-0.29	3.9 (1, 14)	0.068				

\*  $p < 0.05$ ; \*\*  $p < 0.01$ ; \*\*\*  $p < 0.001$ .

→ Increased alcohol exposure:  
decreased AD  
(and decreased MD)



# III) Results: ROI level

The question:

1) where are most significant AD-alcohol relations in each network?

Answer using:

- (for each ROI) a GLM for
  - single DTI parameter
  - alcohol (frequency: binge/wk)
  - infant age (wks since conception)
  - infant sex (M/F)
  - maternal age (yrs)
  - maternal cigarette smoking (cig/day).

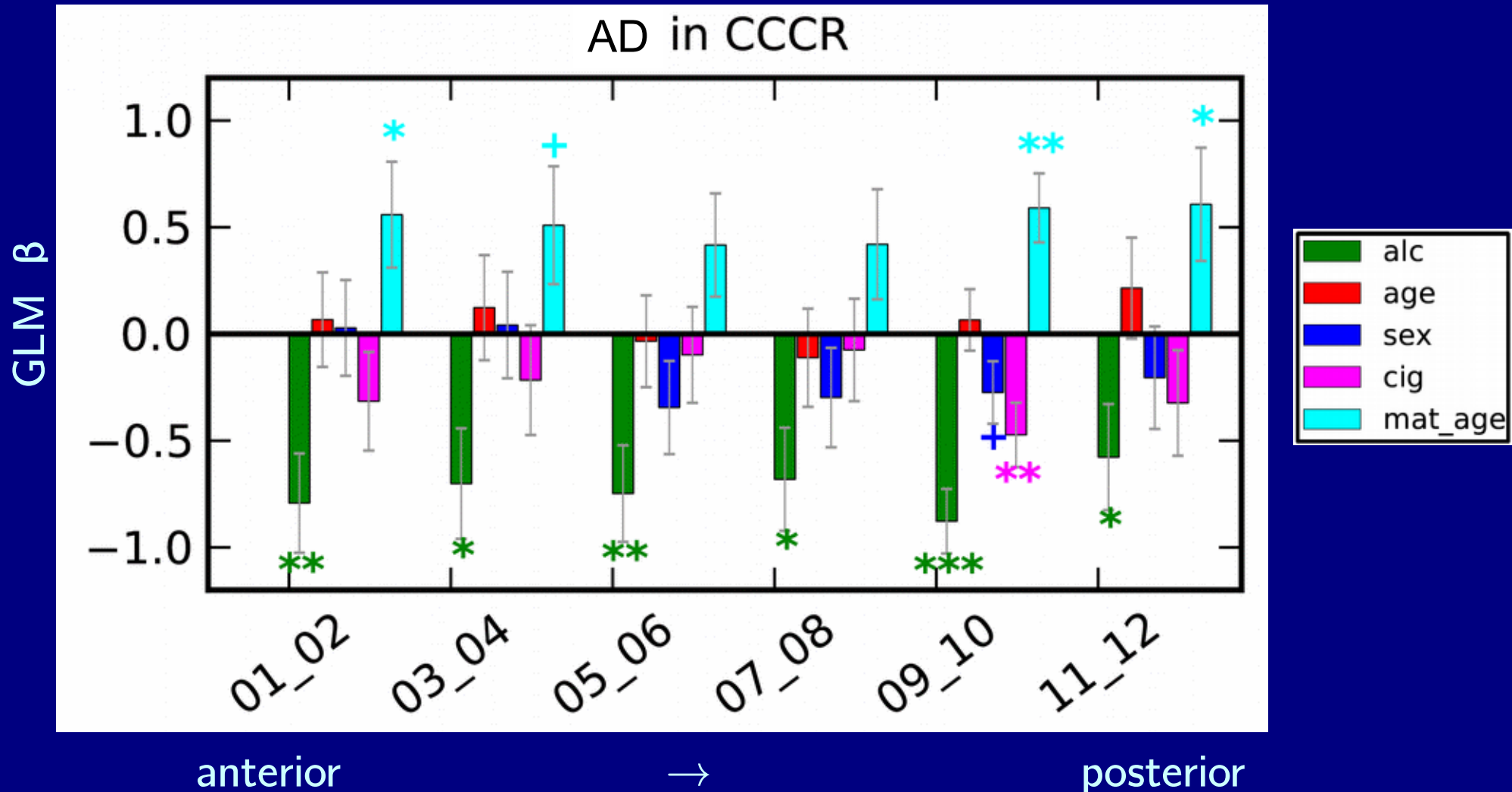
	alc
	age
	sex
	cig
	mat_age

# III) Results: ROI level

The question:

1) where are most significant AD-alcohol relations in each network?

Transcallosal (CC and corona radiata)

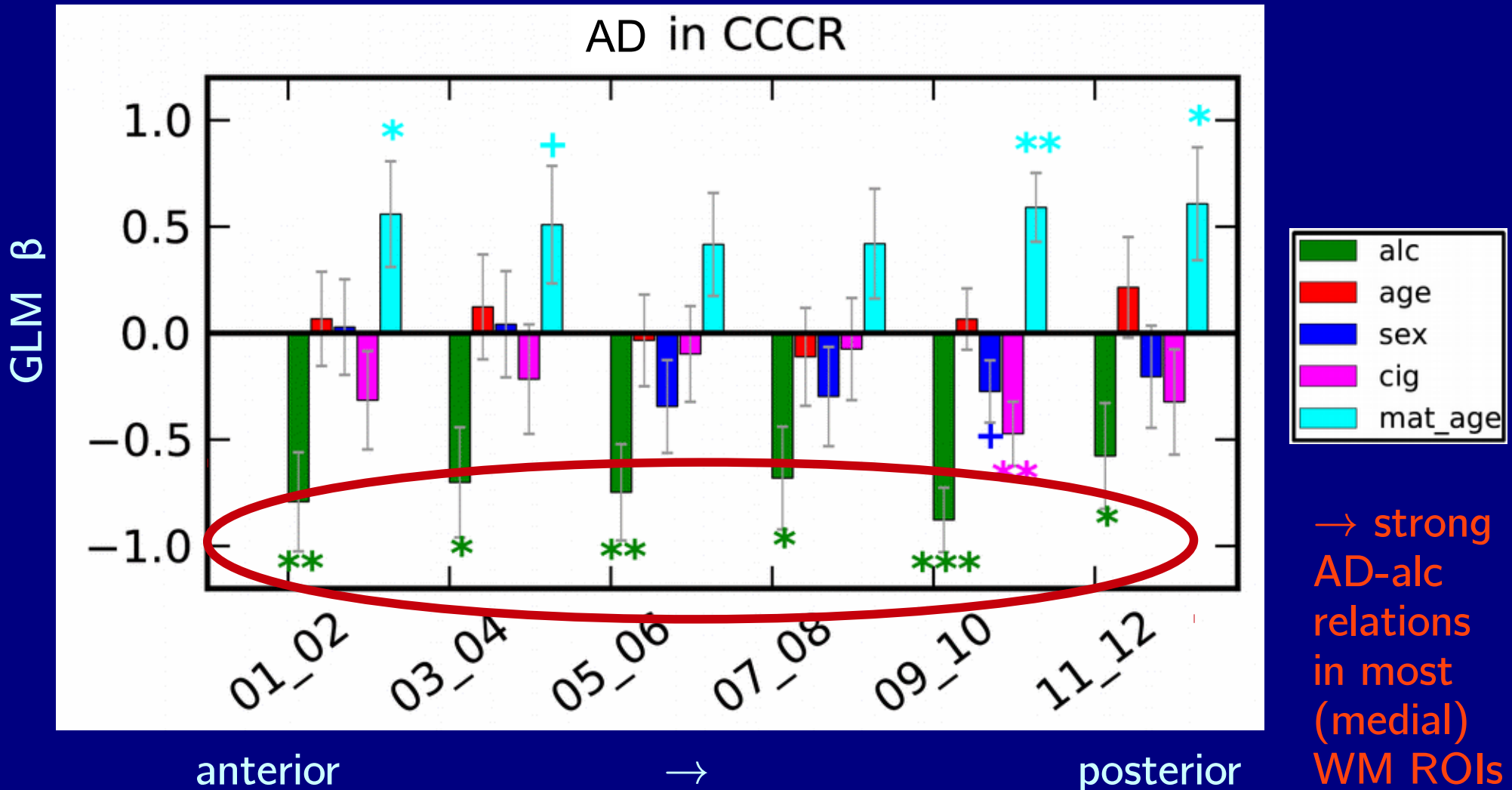


# III) Results: ROI level

The question:

1) where are most significant AD-alcohol relations in each network?

Transcallosal (CC and corona radiata)

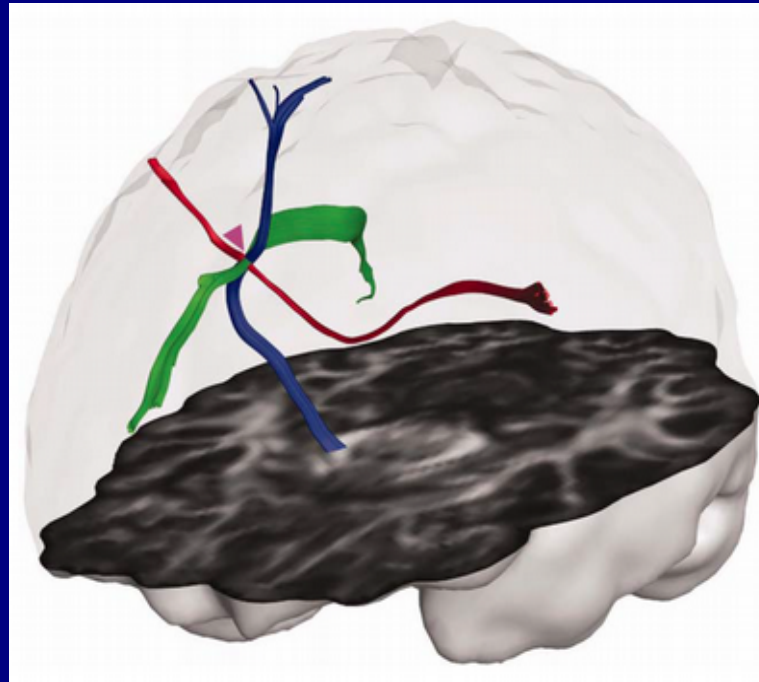


FATCAT addenda:  
1) *HARDI tracking*

# Higher order models

DTI tractography:

- + susceptible to false negatives, difficulty with long range tracts (noise/error accumulation)
- + Major diffusion can be average of multiple paths
- + Voxels can have low FA from several WM paths, false ending
- + Can't resolve complex underlying architecture
  - Jeurissen et al. (2012, HBM): 60-90% of WM voxels estimated to have multiple fibers

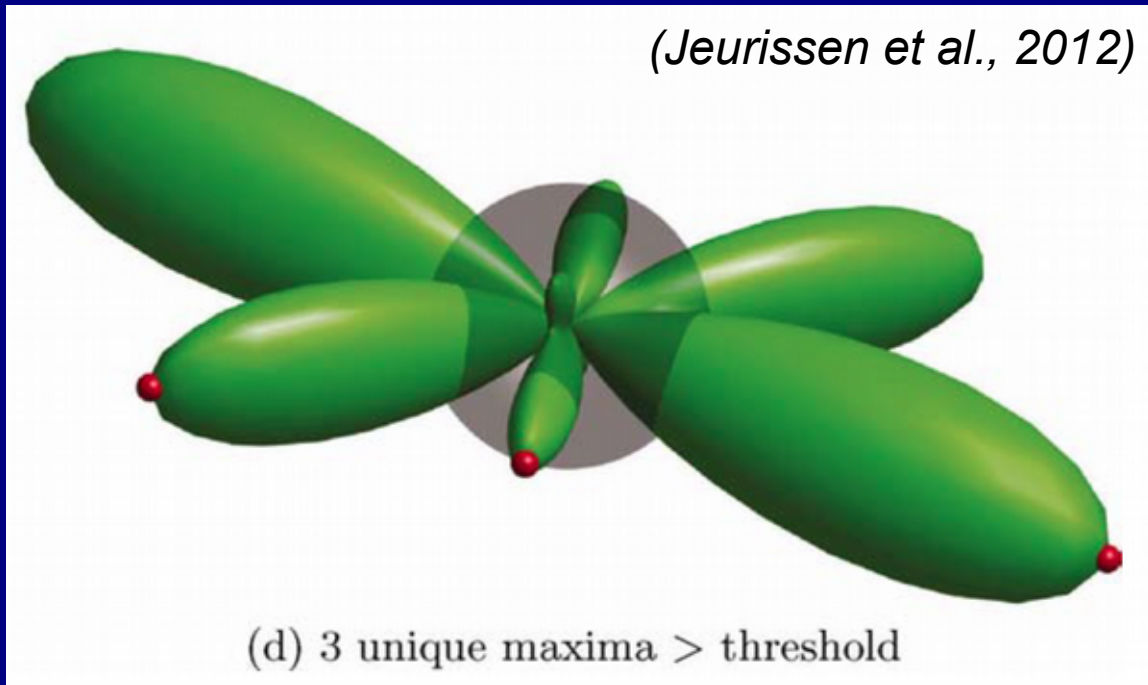


*(Jeurissen et al., 2012)*



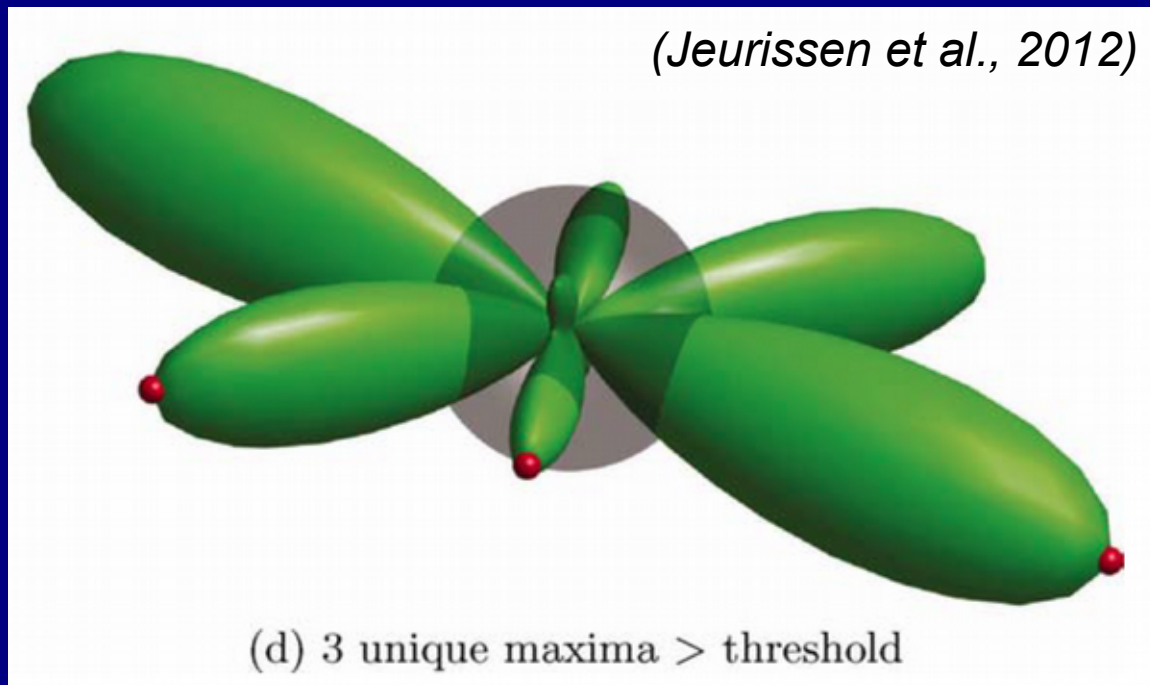
# HARDI

- + High Angular Resolution Diffusion Imaging:
  - DSI, ODF, Qball, FOD...
  - model multiple fiber bundle directions per voxel
  - generally need more scan time and acquisitions and computational power, much higher b-values
  - still can't resolve intravoxel tract behavior (which of multiple paths?)
  - higher DW  $\rightarrow$  lower signal, so susceptible to noise



# HARDI

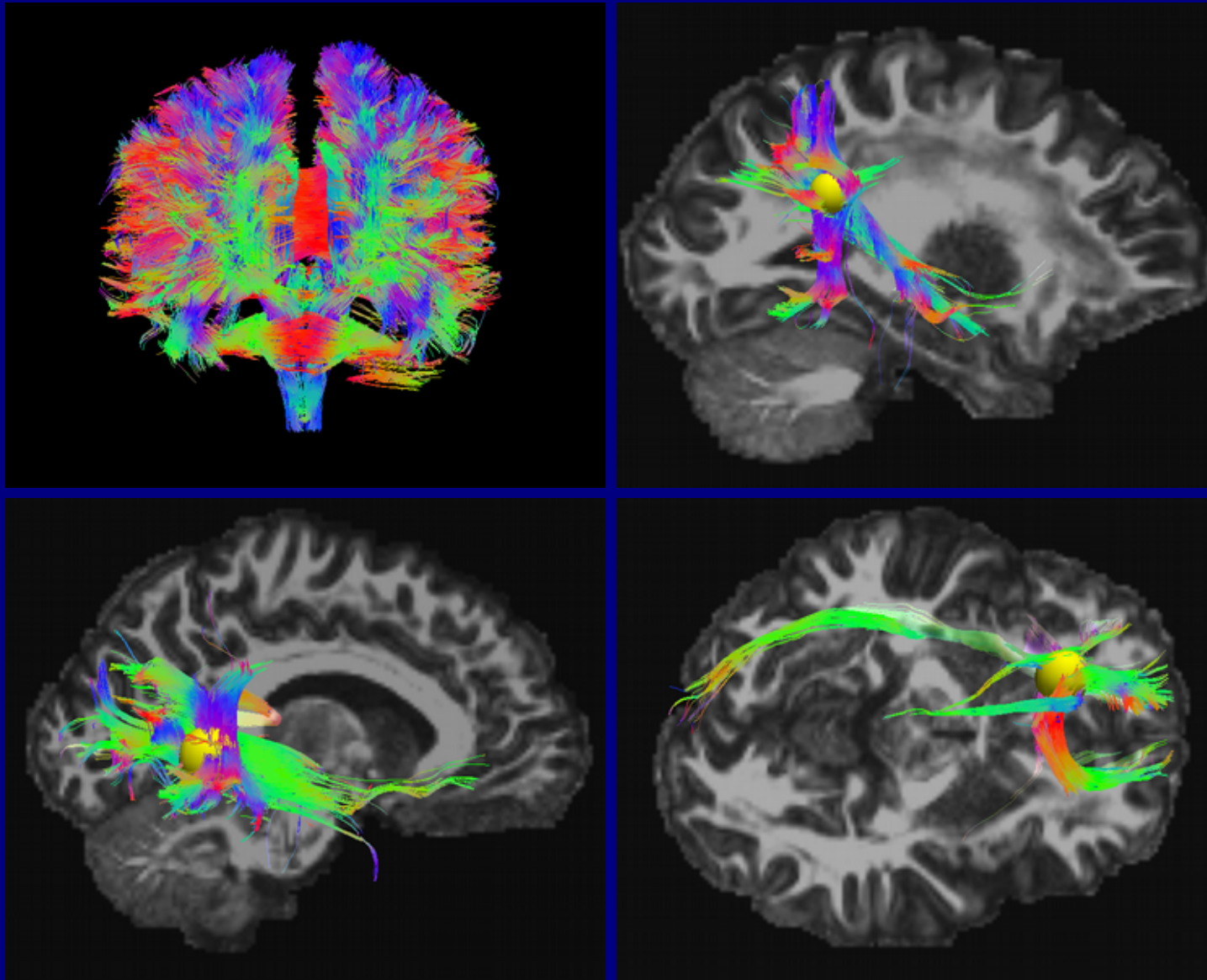
- + High Angular Resolution Diffusion Imaging:
  - DSI, ODF, Qball, FOD...
  - model multiple fiber bundle directions per voxel
  - generally need more scan time and acquisitions and computational power, much higher b-values
  - still can't resolve intravoxel tract behavior (which of multiple paths?)
  - higher DW  $\rightarrow$  lower signal, so susceptible to noise



FATCAT can now track through HARDI data  
 $\rightarrow$  HARDI reconstruction done outside AFNI (e.g., DSI-Studio, Diffusion Toolkit, ...), and outputs tracked in FATCAT.

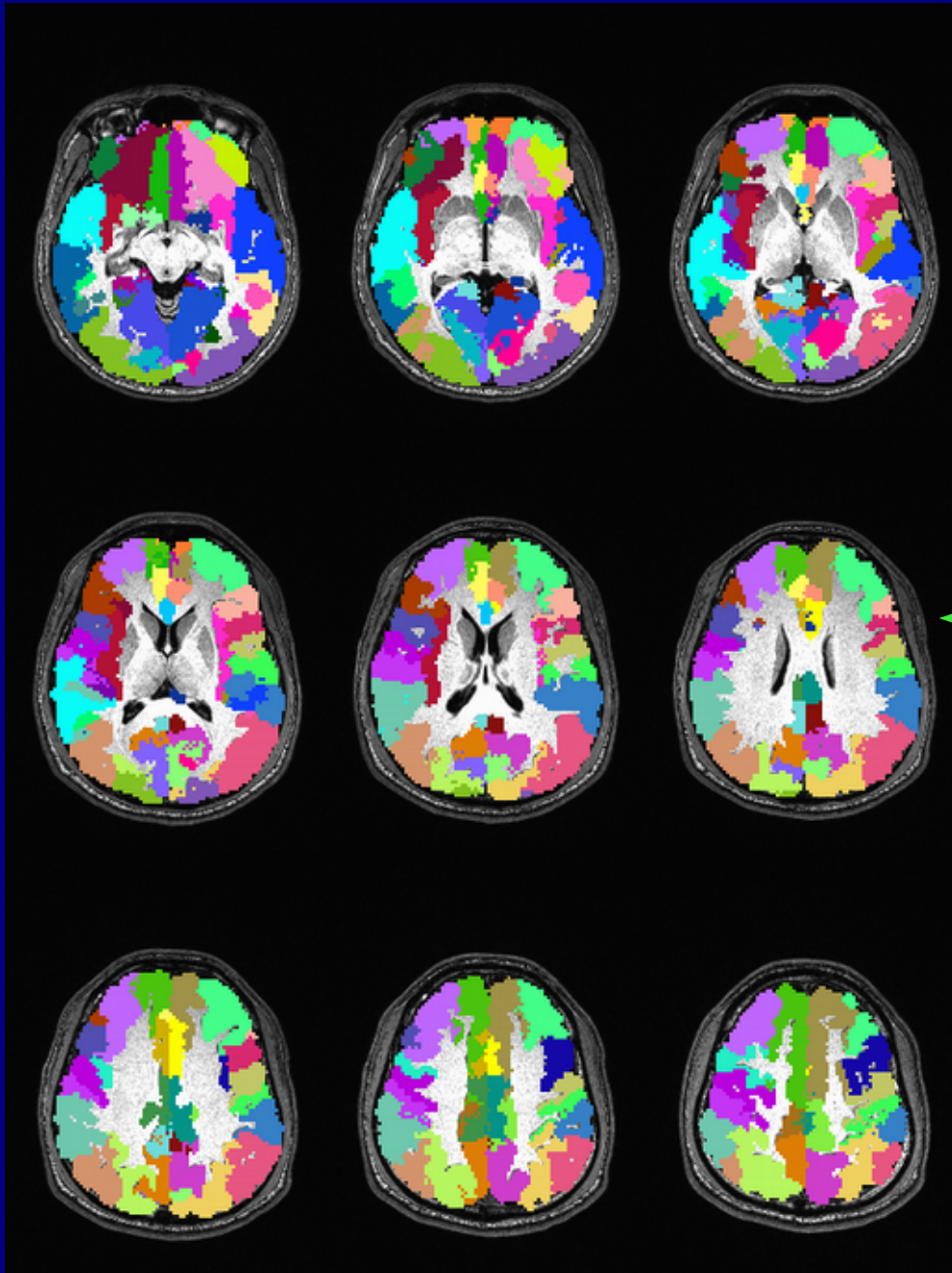
# Example: 3dTrackID on HARDI data

*Ex: Human Connectome Project subject, 288 grads,  
HARDI reconstructed with GQI in DSI-Studio.*



FATCAT addenda:  
2) *'Connectome'-type tracking*

# “Connectome”: parcellation of GM



Example (script available in FATCAT\_DEMO):

+ FreeSurfer parcellation into >112 ROIs.

+ Selected 80 cortical GM ROIs.

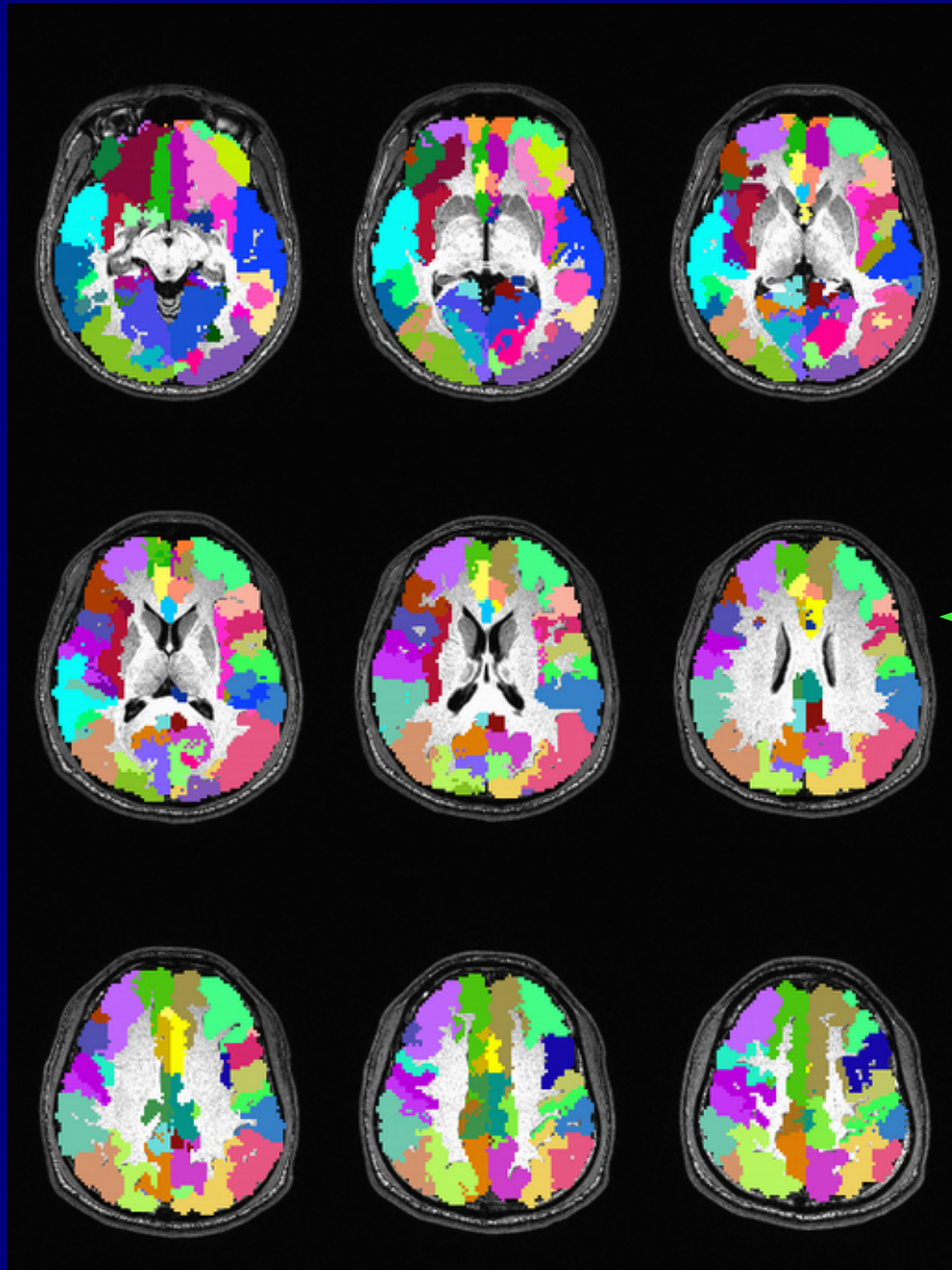
+ Used 3dROIMaker to inflate

← by 1 voxel, up to  $FA > 0.2$ .

(+ *NEW: keep labeltable labels and use them in output.*)

+ '3dTrackID -mode DET' among the regions

# “Connectome”: parcellation of GM



Example (script available in  
FATCAT\_DEMO):

+ FreeSurfer parcellation into  
>112 ROIs.

+ Selected 80 cortical GM ROIs.

+ Used 3dROIMaker to inflate

← by 1 voxel, up to  $FA > 0.2$ .

(+ *NEW: keep labeltable labels  
and use them in output.*)

+ '3dTrackID -mode DET' among  
the regions

and a few seconds later... →

# “Connectome”: tracking

Pnt 0, tract 72, bnd 56



FATCAT addenda:

3) *Processing DWI gradients + volumes  
(including the dreaded  
Gradient Flip monster)*



# 1dDW\_Grad\_o\_Mat

Before most DTI analysis, useful function for:

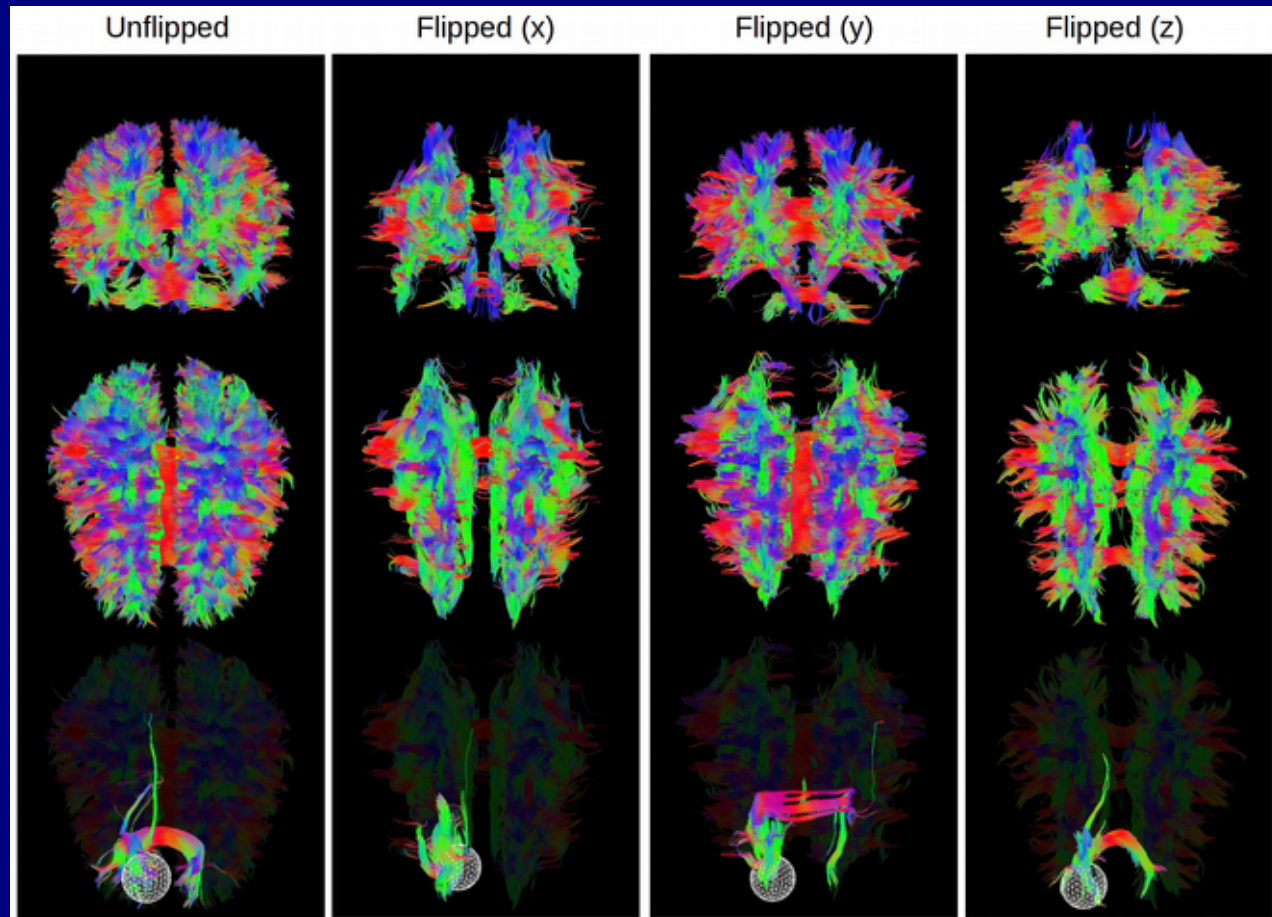
- + converting formats of gradient info
  - e.g., row to column, grad to bmatrix, etc.
- + process DWI grads and volumes in same way
  - average b=0 volumes
  - average repeated sets of DWIs
- + use b-value information in processing
- + insert/remove rows of non-weighted grads
- + and ....

# 1dDW\_Grad\_o\_Mat

- ... flip a gradient component to convert scanner coordinates to those of the analysis package (*I don't know why they don't necessarily match!*)
  - e.g., '-flip\_y' converts each y-component to have opposite sign

## Example cases:

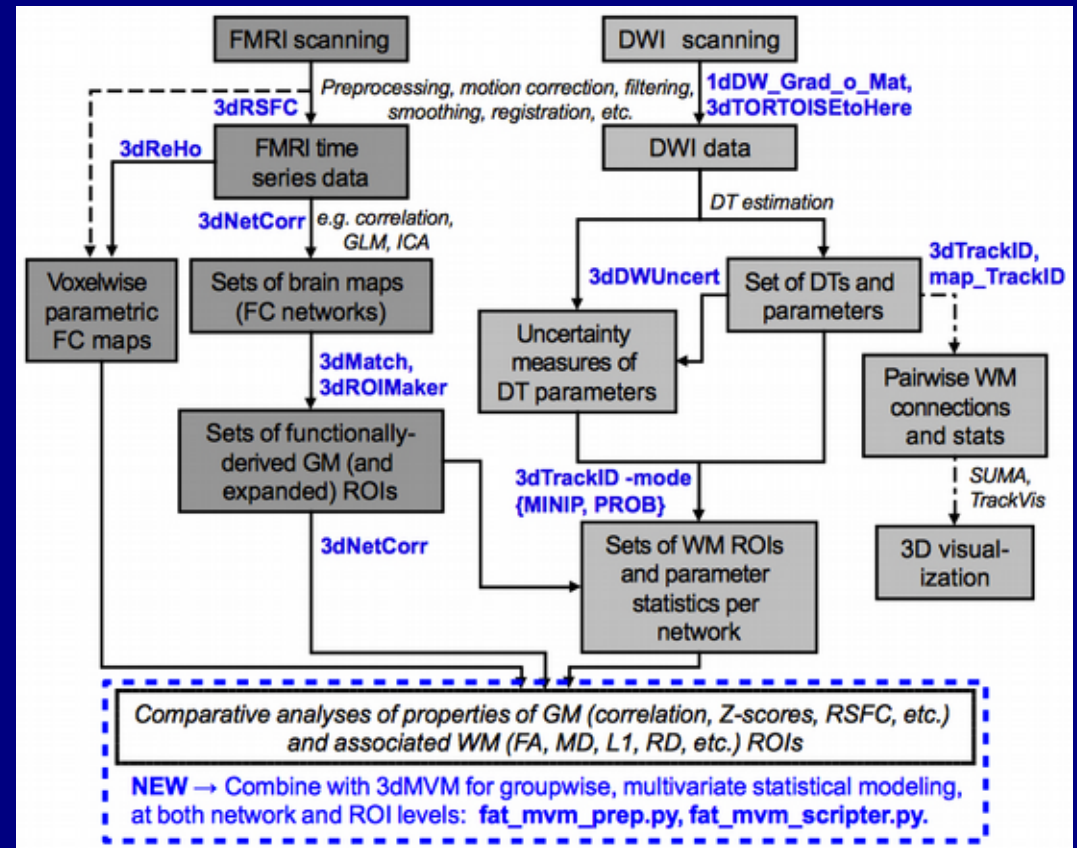
- + note CC structure if x- or z-component has mismatch sign
- + y-flip is least easy to see, but often needed in Siemens scanners, I find (*again, just something to be aware of!*)



# In Summary

We have discussed capabilities and benefits of:

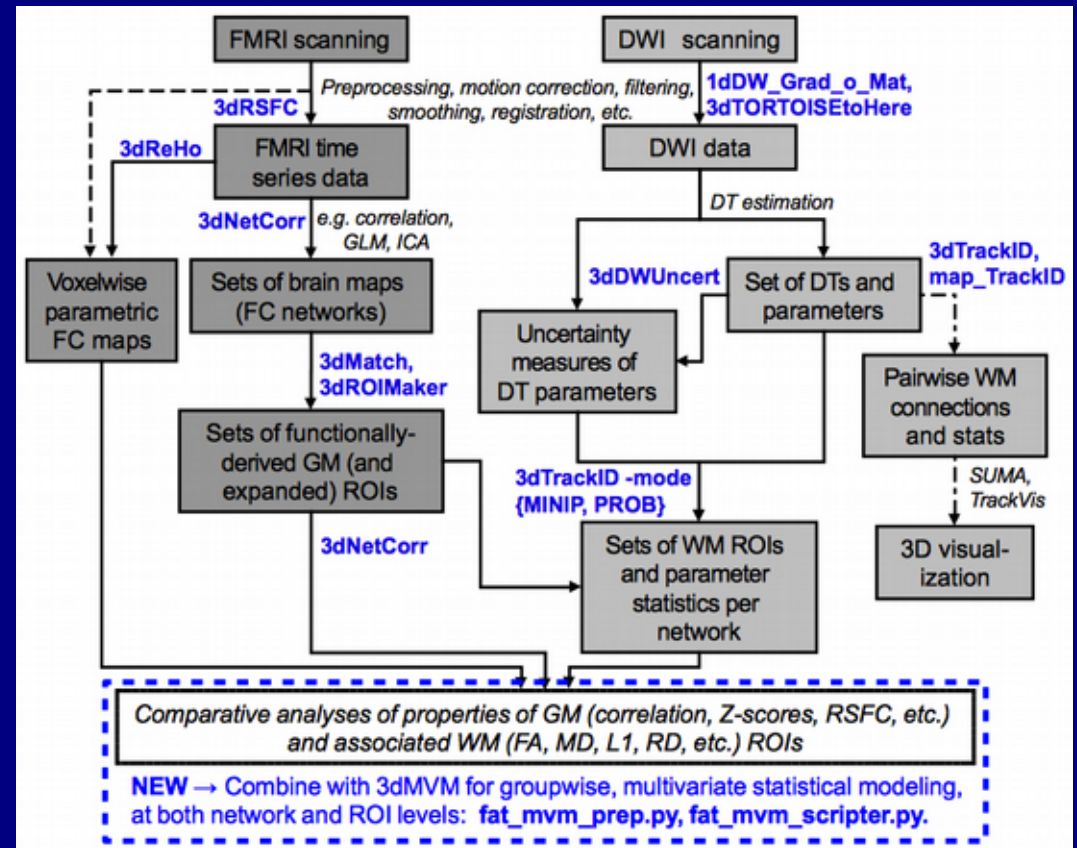
## Combining multimodal data: FC+SC+...



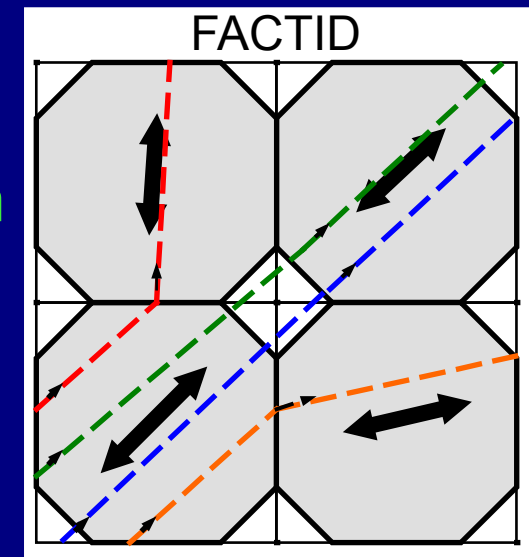
# In Summary

We have discussed capabilities and benefits of:

## Combining multimodal data: FC+SC+...



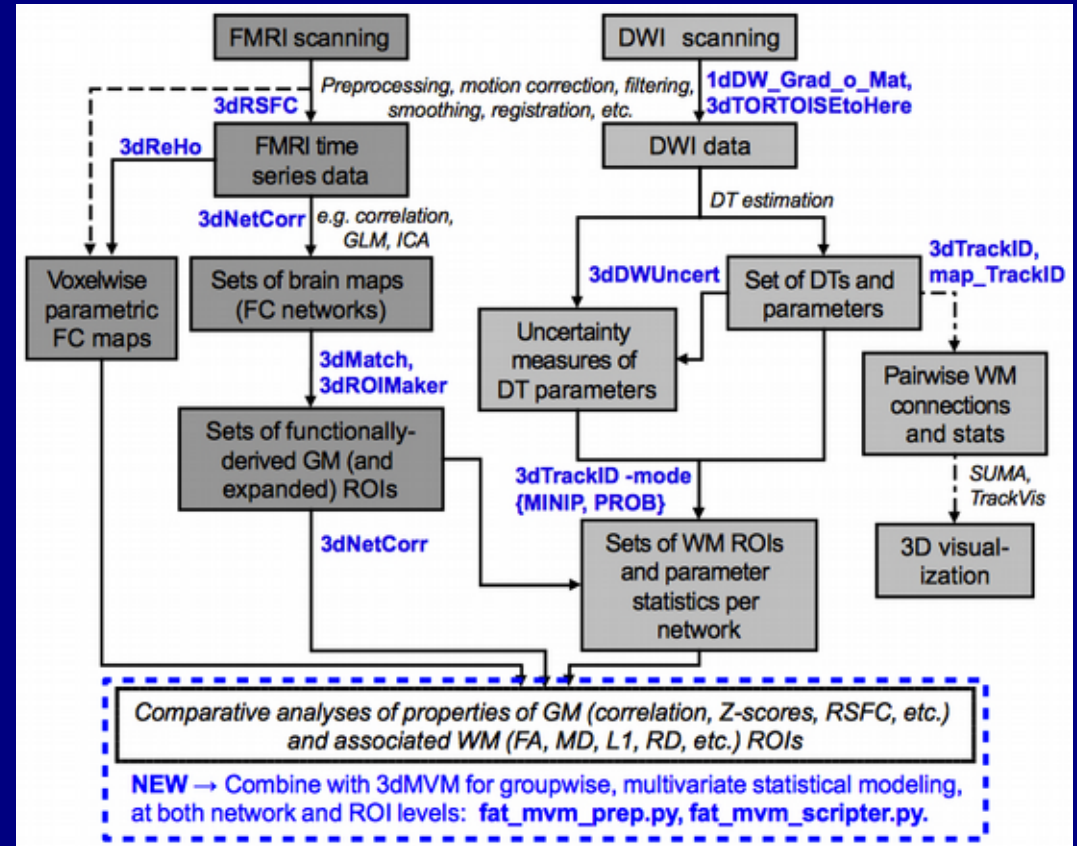
Using an efficient algorithm, reduced bias of propagation



# In Summary

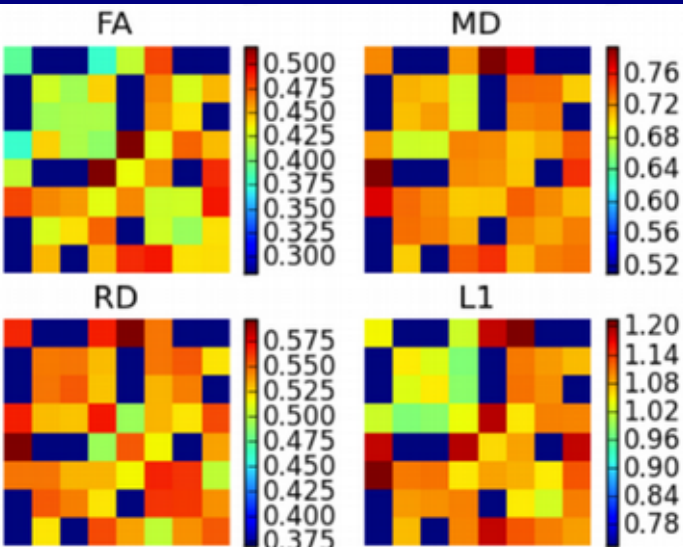
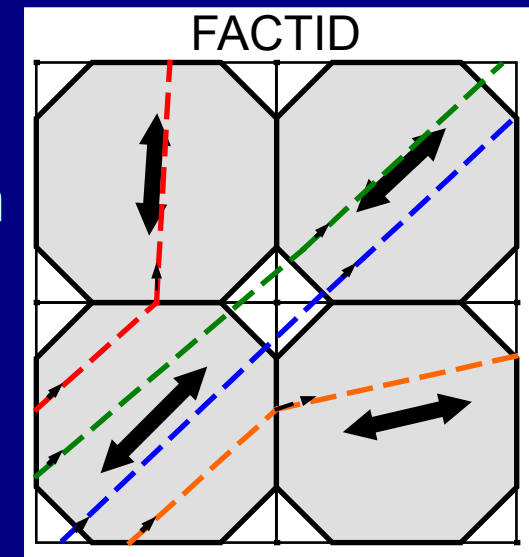
We have discussed capabilities and benefits of:

## Combining multimodal data: FC+SC+...



Using an efficient algorithm, reduced bias of propagation

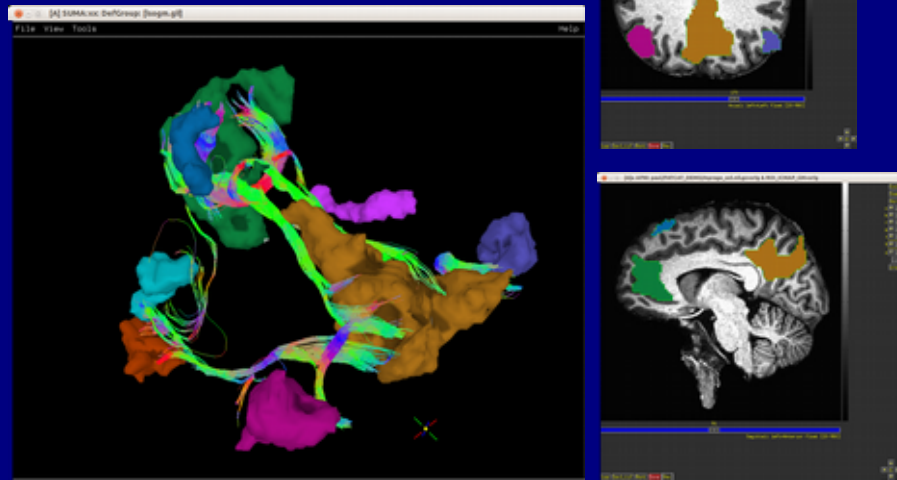
Tracking to define and quantify WM ROIs (with uncertainty/probabilistic) → 3dMVM network stats



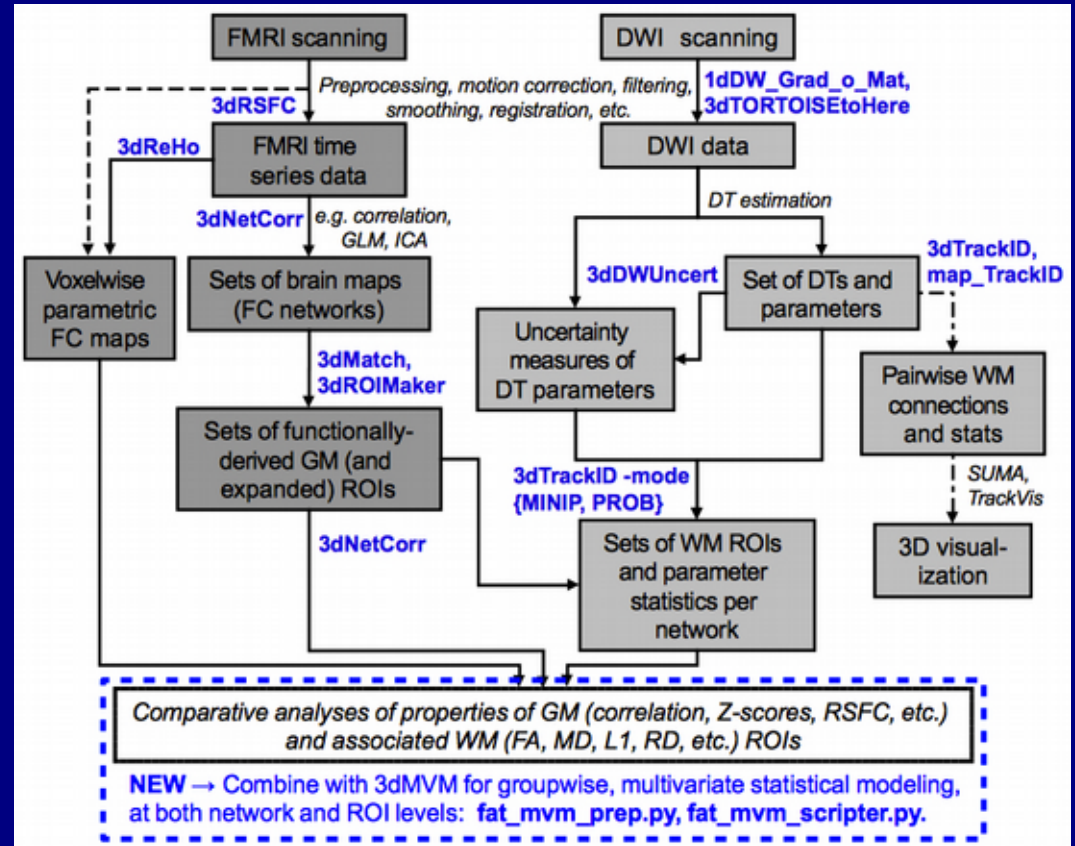
# In Summary

We have discussed capabilities and benefits of:

Integrating AFNI-SUMA visualization



# Combining multimodal data: FC+SC+...



Using an efficient algorithm, reduced bias of propagation

Tracking to define and quantify WM ROIs (with uncertainty/probabilistic) → 3dMVM network stats

