

Examining the relationship between cerebral blood flow and grey matter structure in typically developing children

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Purpose

We will use pseudo-continuous arterial spin labeled (pCASL) MRI to measure cerebral blood flow (CBF) and identify the amount of CBF variance explained, both voxel-wise and globally, by tissue microstructure as measured by structural MRI.

Methods

Images were acquired for 61 normally developing children aged 7-17 years. For each subject, pCASL images were acquired [1] along with T1-weighted and diffusion tensor images (DTI). A subset of the data (n=30) was used to create a population specific templates for each of the modalities using ANTs [2]. The pCASL and DTI templates were then aligned to the T1-template to create a single multi-modality reference space. The T1 template then served as the basis for multi-atlas labeling using publicly available data sets of whole brain [3] as well as three tissue segmentation [4]. Each image for each subject was then aligned to the corresponding component of the multi-modal template for brain masking. Intra-subject registration is then used to align all of the brain-masked images for a given subject to the T1 image.

Each subject's T1 image was used to obtain a probabilistic three tissue segmentation using Atropos [2] and a voxel-wise measure of cortical thickness [5]. The DTI images were used to calculate fractional anisotropy (FA) and mean diffusion (MD), while the pCASL data was used to calculate CBF. Finally, the intra-subject warps were composed with the T1 subject-to-template warps to align all images into the common template space. In order to examine the extent to which structural MR measures influence cerebral blood flow as measured by pCASL, \mathbf{R} was used to perform voxel-wise linear regression for all voxels in the gray matter according to:

Full Model : $CBF \sim \beta_1 * Prob(\text{gray matter}) + \beta_2 * Prob(\text{white matter}) + \beta_3 * \text{Thickness} + \beta_4 * FA + \beta_5 * MD$

Additionally, we examine how each measure relates the CBF variability by initially limiting the model to the probability of gray matter and then adding each factor to the model in a step-wise manner.

Results

The average r-squared values for each model are listed in table 1. To visualize the performance of each model, the R-squared value for the linear regression at each voxel was used was created an image as illustrated in Figure 1.

Conclusions

In all models, the highest R-squared values were found along the gray-white border and superior cortical regions tended to have higher R-squared values than more inferior regions. The addition of metrics derived from DTI improved the fit over models 1-3 that relied upon metrics derived from T1 images only, however there remains a great deal of variance in the CBF signal that does not appear to be directly determined structural properties of the tissue.

Model	Mean R-Squared	References
1) GM	0.0415 +/- 0.0572	1. Jain, et. al. Radiology. 263(2)
2) GM + WM	0.0798 +/- 0.0809	2. http://www.picsl.upenn.edu/ants
3) WM + WM + Thickness	0.1004 +/- 0.0859	3. Shattuck, et. al. NeuroImage 39(3)
4) WM + WM + Thickness + FA	0.1213 +/- 0.0904	4. http://www.nirep.org
5) WM + WM + Thickness + FA + MD	0.1403 +/- 0.0925	5. Das, et.al. NeuroImage 45(3)



Figure 1. R-Squared map for model 5