





## Introduction

A growing body of evidence suggests that dementia is a result of the complex interplay between neurodegenerative and cerebrovascular processes, influenced by genetic, demographic, and lifespan environmental exposures. Current dementia prediction work relies on either biomarkers or itemized risk factors, lacking an integrated understanding of how neurobiological mechanisms interact with non-modifiable and modifiable risk factors and lead to diverse neurodegeneration trajectories.

### **Objectives**

Develop and validate a deep systems biology model that integrates functional neuroimaging data with risk factors, including those associated with health disparities, to analyze the synergistic effects of health disparities and risk factors on dementia across diverse populations.



## Deep RDM

- A reaction module for projecting the observed functional signals X to a latent state u.
- A diffusion module to model the transition of brain fluctuation states over time.
- each brain region with the notion of optimal control.
- predict dementia risk via supervised learning.

# **Explainable Dementia Prediction Using Functional Neuroimages and Risk Factors**

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Insula Lobe Parietal Lobe Frontal Lobe

# METHODS $L = \frac{1}{2}u^T P u + \frac{1}{2}r^T Q r$ **Optimal control** ................ du $\frac{dt}{dt} = Au + Br$ Dementia $\phi_{\theta}(t) = \sigma(\beta_1 u(t) + \beta_2 X(t) + \mu) \qquad \frac{du}{dt} = Au \quad - \qquad \nabla u = w_{ij}(u_i - u_j)$

• A control module to characterize the effect of health disparity and risk factors on the state of

• By concatenating the MLPs (for reaction process) and GNN (for diffusion process), we are able to predict the evolution of brain states u(t) over time and use the terminal state  $u_{\tau}$  to

## **EXPERIMENTS**

### Data

We evaluated the dementia prediction accuracy and explored the multi-factorial mechanism of dementia risks on the Alzheimer's Disease Neuroimaging Initiative (ADNI) dataset. To ensure the availability of demographic factors, medical history, and functional neuroimages for each subject, we selected 250 samples from ADNI and processed the neuroimages with AAL atlas.

### **Prediction Accuracy & Ablation Study**

- Health disparity and risk factors contribute substantially to imaging-based diagnoses.
- Our model achieves the highest prediction accuracy with the control constraint.

| Age                         | $71.69 \pm 6.99$                           | Methods    | Input               | Accuracy |
|-----------------------------|--|------------|---------------------|----------|
| Gender                      | 52.80% Female                              | SVM        | BOLD                | 66.00%   |
| Education                   | $16.05 \pm 2.71$                           |            | POID + Rick Factors | 70 80%   |
| Gait                        | 10.00% Abnormal                            |            | DOLD + MISK Factors | /0.00/0  |
| Cardiovascular Disease      | 62.40% Have Cardiovascular Disease         | RNN        | BOLD                | 61.33%   |
| Other Neurological Diseases | 38.40% Have Other Neurological<br>Diseases |            | BOLD + Risk Factors | 70.97%   |
| Psychiatric Disorders       | 36.00% Have Psychiatric Disorders          | Neuro-RDM  | BOLD                | 71.00%   |
| Alcohol Abuse               | 4.80% Have Alcohol Abuse                   |            | BOLD + Risk Factors | 73.14%   |
| Drug Aduse                  | 1.20% Have Drug Abuse                      |            |                     |          |
| Smoking Status              | 38.40% Smoke                               | Our Method | W/O (LQR)           | 13.21%   |
| Dementia Label              | 29.20% Dementia                            |            | w/ (LQR)            | 74.22%   |

## **Dementia Risk Factors**

The *B* matrix elucidates the influence of each factor on the dynamic functional states of individual brain regions.



A System-Level Understanding of Brain Vulnerability Upon Health Disparities Following the notion of controllability, we calculated the smallest eigenvalue of controllability matrix  $C = [B A B A^2 B \dots A^{T-1} B]$  for each subject to examine the vulnerability of brain function at each region to health disparity factors.

# ACKNOWLEDGMENTS

Special thanks to Dr. Guorong Wu, Dr. Tingting Dan, Dr. Martin Styner, Jiaqi Ding, Ziquan Wei, Mustafa Dere, and Huan Liu for their support and guidance throughout my undergraduate studies. It has been a privilege to know you all and work with you all  $\heartsuit$ 





Default Mode
Dorsal Attention
Sensorimotor