

Brain volumes alterations in relapsing-remitting multiple sclerosis patients versus healthy controls in comparison to **QyScore**[®] normative database

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INTRODUCTION

BACKGROUND

Brain atrophies have been suggested as **surrogate markers** of neuroaxonal loss and disease progression of Multiple Sclerosis (MS).^{1,2}

Automatic brain volumes measurements on a large-scale healthy controls (HC) database provides comparison data and enables the assessment of the presence of atrophy in clinical routine patients.

The use of a **normative reference database** of HC is essential to detect the neurodegeneration and axonal loss associated with a pathological state.

Objectives

To assess MRI differences in brain structures volumes between **relapsing-remitting MS (RRMS) and HC individuals**, in comparison to a large-scale normative database of HC.

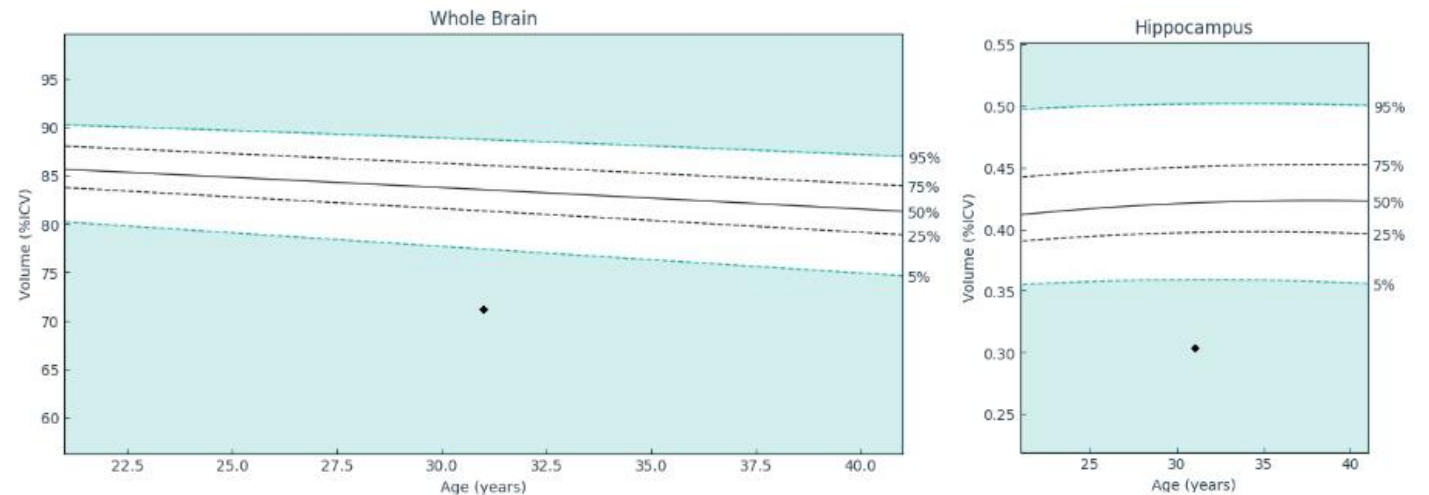
INTRODUCTION

NORMATIVE REFERENCE DATABASE

Comparison of **individual data against healthy norms** has been used in clinical practice for years.¹

A normative reference database supports the precise indication of an individual's brain structure volume using an **age-based reference chart**.

The comparison with thousands of age-matched HC within a database will significantly increase the clinical value of volumetric information.



Total brain and hippocampus volume normalized to the intracranial volume (ICV) ratio from a MS patient represented as a black dot.

¹Department of Health and Human Services, CDC 2010 "2000 CDC Growth Charts for the United States: Methods and Development" (http://www.cdc.gov/nchs/data/series/sr_11/sr11_246.pdf)

MATERIALS & METHODS

Data description

Database	QyScore® normative database	Independent test datasets	
		HC	RRMS
N	1292	29	27
Age mean ± sd [min - max]	55.6 ± 20.7 [20 - 90]	41.6 ± 11.4 [22 - 54]	40.3 ± 7.3 [29 - 50]
Sex M/F	595/697	10/19	8/19

The normative database is composed of MRI data acquired using **Siemens, GE and Philips** at **1.5T and 3.0T scanners**.

Segmentation methods

- Automated quantification by QyScore®
- Whole-brain, grey matter, white matter and hippocampus volumes
- Volumes normalized by intracranial volume (%ICV)

Metrics

Comparison of **HC** and **RRMS** against age-matched volumes in the normative database



- Standard **z-scores**
- **Volume** (%ICV)

Statistical analysis

- Group differences were evaluated with a **two tailed t-test**

RESULTS

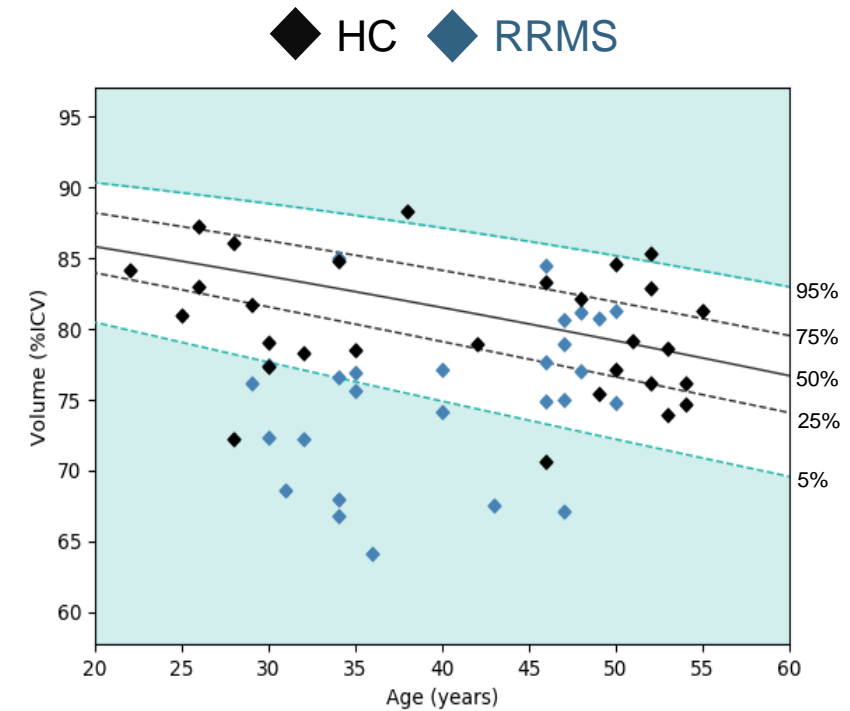
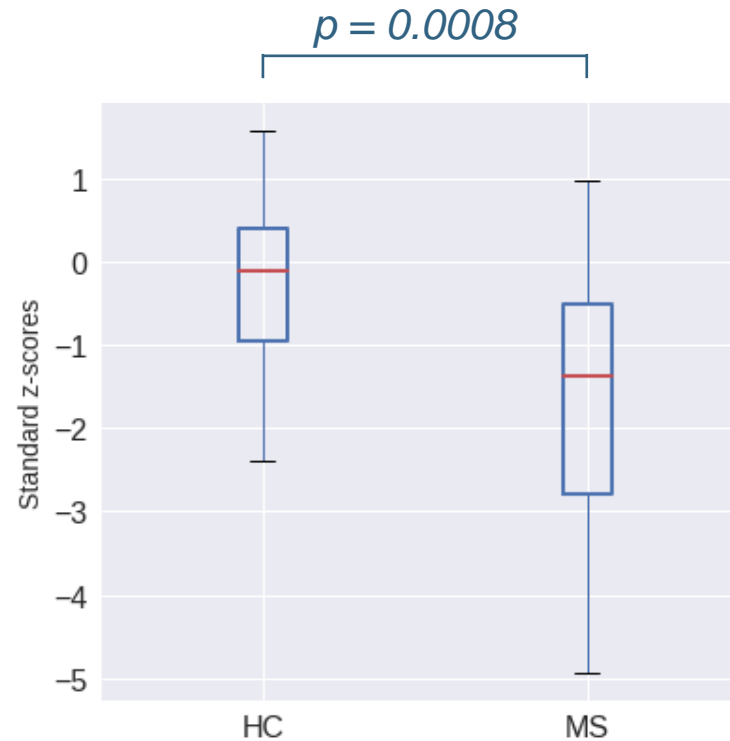
WHOLE BRAIN

Group effect

Standard z-scores in the RRMS group were **significantly smaller** than HC group

Age effect

- RRMS patients under age 45 tend to have **smaller whole brain volume** (< 5th percentile) than HC individuals of a similar age ($p = 0.025$).
- **No significant differences** were present between HC and RRMS patients older than 46 years old.



RESULTS

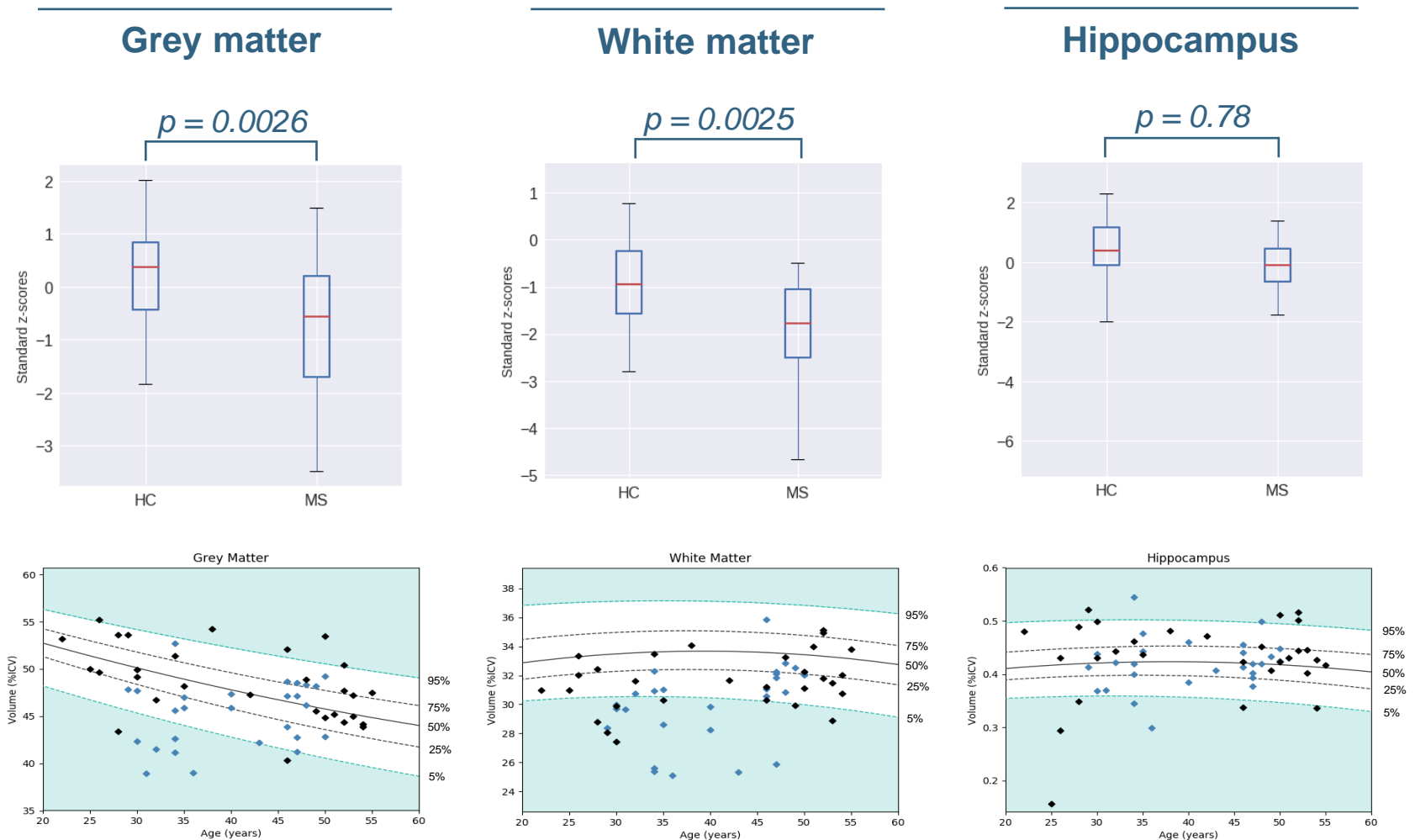
GREY MATTER, WHITE MATTER & HIPPOCAMPUS

Group effect

Grey and White matter standard z-scores in the RRMS group were **significantly smaller** than the HC group and **did not differ** for the hippocampus structure.

Age effect

- RRMS patients under age 45 tend to have **smaller white matter volume** (< 5th percentile) than HC individuals of a similar age ($p = 0.003$).
- No significant differences** were present between HC and RRMS patients older than 46 years old.



CONCLUSIONS

In our study, RRMS patients:

- showed **reduced** whole brain, grey and white matter volumes in comparison with HC
- under 45 y.o tend to have **smaller** whole brain and white matter volumes (< 5th percentile, $p < 0.05$) in comparison with HC of a similar age.

The comparisons to normative reference data provided through QyScore® **are in line** with previously reported results^{1,2,3,4} on RRMS patients tissue atrophies.

The age-related findings are in line with a recent study¹ indicating that the whole brain atrophy in MS patients up to **30-40 years old** is **MS specific**, while the atrophies observed in older patients are more due to normal brain aging.

The use of a normative database for the interpretation of brain volumetric analysis, such as the QyScore® normative database, can improve the individual assessment of brain neurodegeneration in RRMS patients in the clinical routine setting