G149: Characteristic Traits of Mild cognitive impairment in Parkinson's disease Vicente Ferrer-Gallardo¹, Manuel Delgado^{2,3}, Irene Navalpotro⁴, Stefano Moia^{1,5}, Manuel Carreiras^{1,6}, Pedro M. Paz Alonso¹, María Cruz Rodriguez-Oroz^{1,7,8,9,6}, César Caballero-Gaudes¹

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Background

- Mild cognitive impairment (MCI), frequent in Parkinson Disease (PD), is a well-known risk factor for dementia.
- Functional connectivity resting state networks (RSNs), such as the default mode, dorsal attention, executive control and sensorimotor networks, have been reported to correlated with cognitive deficits in PD. Inter-network connectivity is crucial as well [1,2]. • This study investigates how whole-brain functional networks are affected by MCI in PD using a Connectome ICA (connICA) analysis with resting state functional MRI (RS-fMRI).

Methods

- Subjects: 59 patients (26 PD-cognitively normal (PDCN) & 33 PD-MCI) vs. 28 healthy controls (HC). PD patients performed study under parkinsonian medication.
- MRI data acquisition: 3T Siemens Trio with 32 channel head coil: T1-w (MPRAGE) & T2w (TSE) anatomical scans (1 mm³ voxels). Two 10 min eyes-open RS-fMRI acquisitions (EPI, 3 mm iso voxels, TE= 28ms) at TR = 2s and TR = 0.8 s (multiband factor = 3).
- Anatomical preprocessing: Brain parcellation was performed using Schaefer's atlas [3] plus subcortical areas of the Freesurfer's Destrieux atlas (Aparc2009) [4]. Anatomical images were coregistered to the functional space.
- fMRI preprocessing: Despiking, slice timing, distortion correction, head realignment, motion scrubbing and nuisance regression (6 Legendre polynomials, realignment parameters + temporal derivatives, 5 principal components of WM, ventricle CSF voxels, and brain's edge voxels).
- 21 HC, 21 PDCN & 23 PD-MCI subjects remained for further analysis after motion scrubbing based on Euclidean norm of framewise displacement (80% scans with < 0.4 mm) [5]
- FC analysis: FC matrices (Pearson correlation) were input to ConnICA [6] using MELODIC with 65 independent FC-traits, which was the optimal PCA component for subject identifiability [7].



- Linear mixed effect (LME) model on the weights of each FC-trait with group (HC, PDCN, PD-MCI) with the sequence (monoband, multiband) as fixed factor, and subjects as random factor. Anova p-values are corrected (Bonferroni method).
- Incremental ANOVAs and individual F-tests were computed to evaluate the relationship between the FC-traits and neuropsychological assessments.

Acknowledgments: This research was possible thanks to the BERC 2018-2021 program and by the Spanish State Research Agency through BCBL Severo Ochoa excellence accreditation SEV-2015-0490, and the Spanish Ministry of Economy and Competitiveness (Ramon y Cajal Fellowship, RYC-2017-21845).









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