Functional and Structural biomarkers of

cognitive outcomes after brain tumor resection

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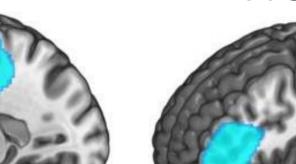
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INTRODUCTION

• Diffuse Low Grade Glioma is a slow growth brain tumor that affects cognitive faculties and triggers neuroplasticity mechanisms (Duffau, 2014, 2005) Temporal Dorsal Frontal





RESULTS

ANOVA suggested a main effect of algorithm (F = 12.31, p < 0.001) but no significant effect of dataset (F = 0.394, p = 0.793). Post-hoc tests indicated that Logistic Regression outperformed both SVM (p_{tukey} = 0.048) and DTC (p_{tukey} < 0.001)



3D imaging of three samples of DLGG tumor location

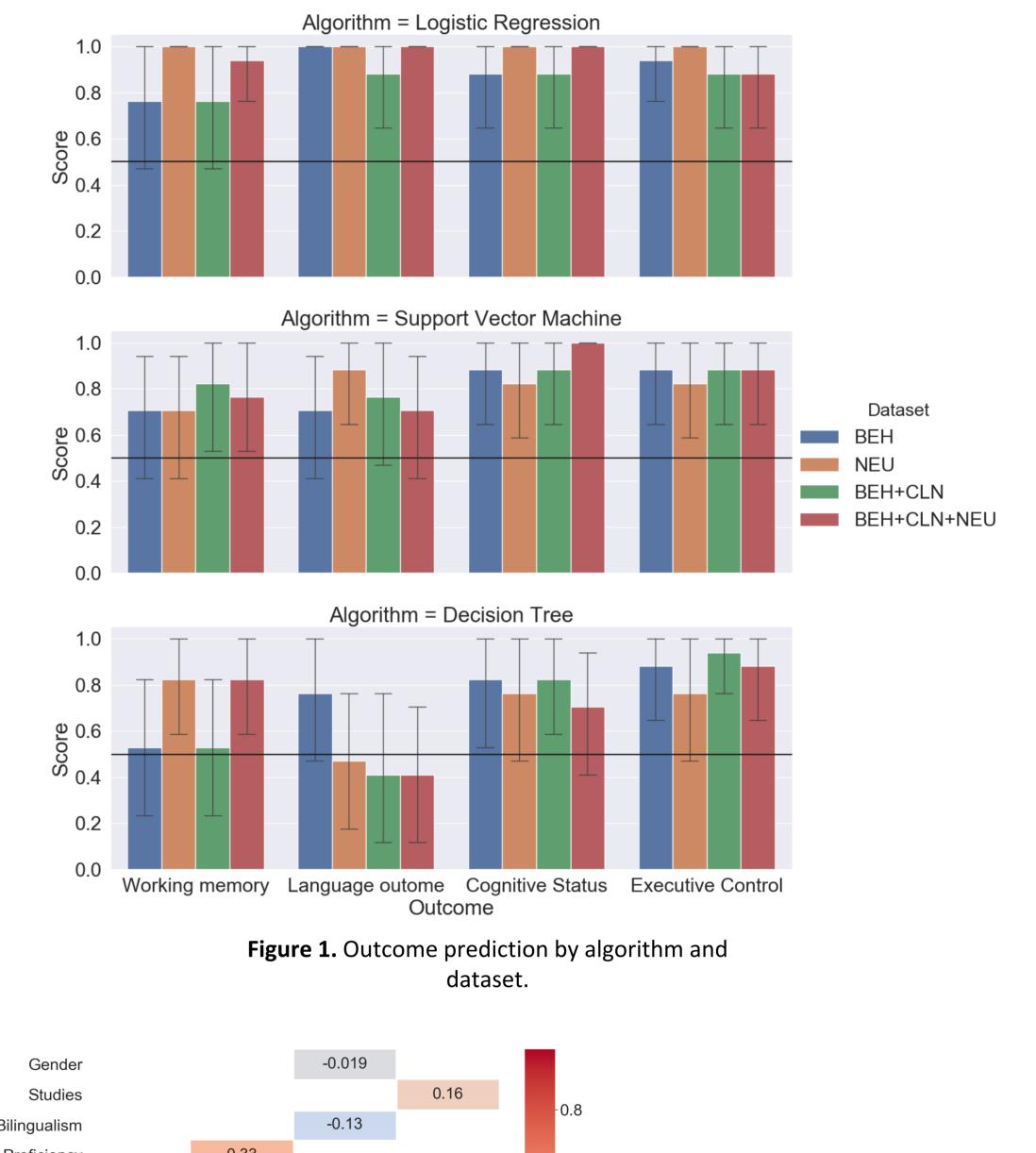
•Previous studies have focused on predicting **postsurgical survival rate and lesion recurrence** by using clinical and neuroanatomical measures with **Machine Learning algorithms.** (Senders, 2018; Vergun, 2018)

• Few literature on **cognitive prognosis prediction** after brain surgery. Most of them focused on neuropsychological assessments to predict **quality of life** prognosis in patients diagnosed with DLGG (Krupp, 2009)

• Little is known about the **combination** of neuropsychological and neuroanatomical variables for predicting **postsurgical cognitive prognosis**.

Objective

To build, implement and validate a **classifier tool based on supervised machine learning algorithms** that allows clinicians to preoperatively predict DLGG patient postsurgical cognitive outcomes.



METHODS

Participants: 17 patients with DLGG ($M_{age} = 40.0$, SD = 14.15) underwent preoperative and postoperative neuropsychological assessments.

Materials:

- Behavioral data (BEH): Demographic data, language proficiency, neuropsychological measures
- Clinical data (CLN): Tumor location, tumor type, tumor volume
- Neuroanatomic data (NEU): Grey matter tissue volume

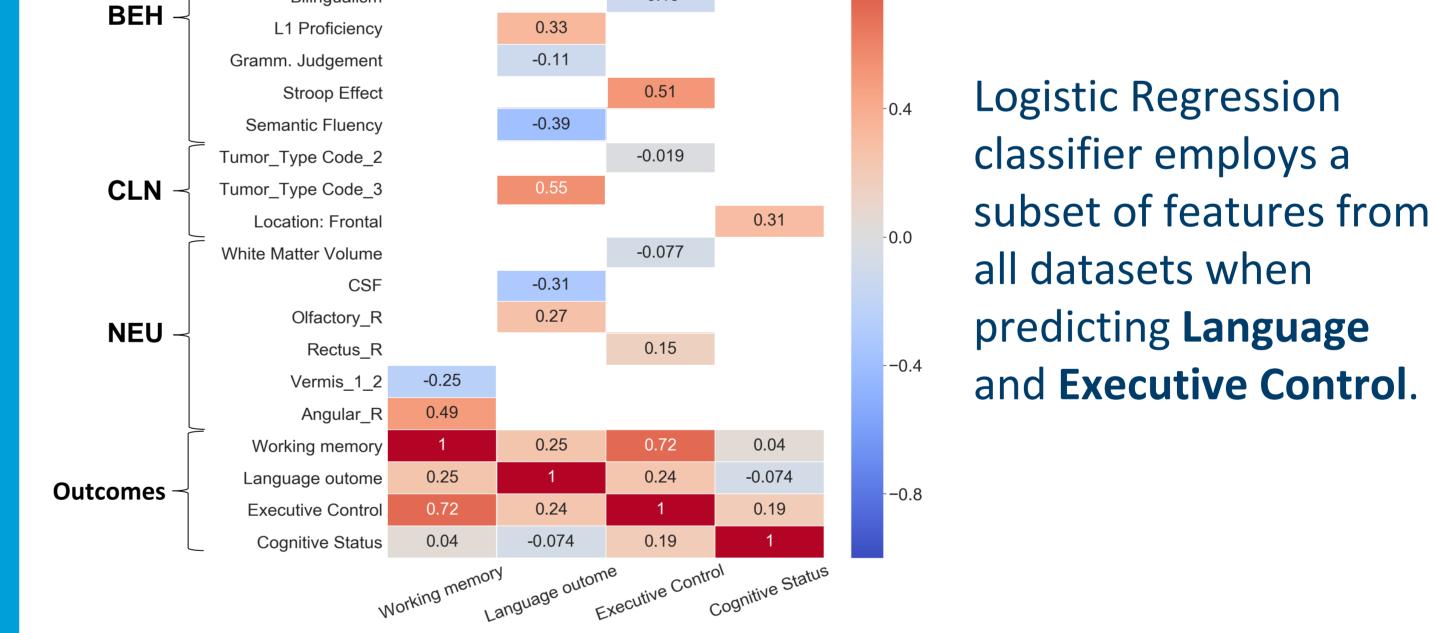
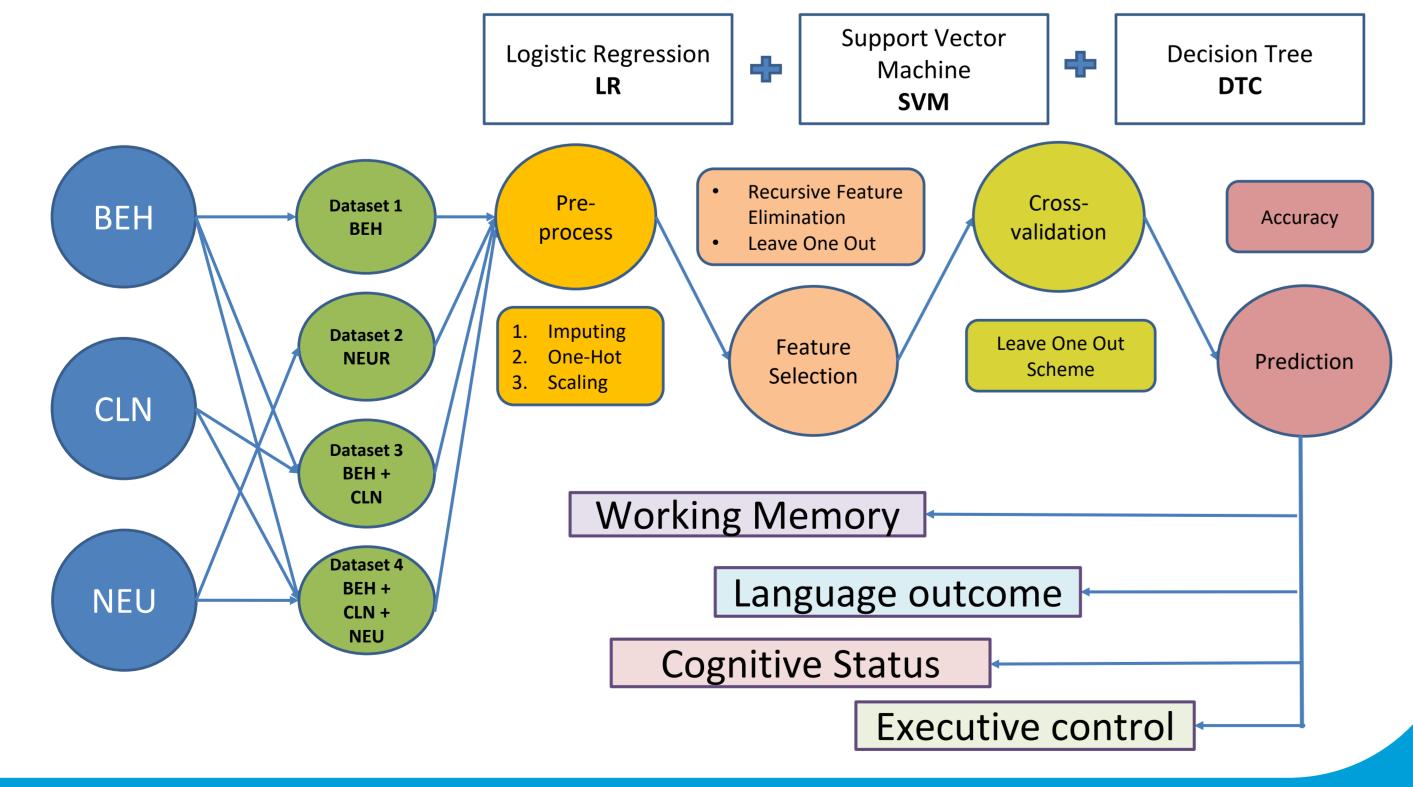


Figure 2. Correlation of selected features with outcomes for logistic regression classifier and full dataset

Procedure:



CONCLUSIONS

- Logistic Regression yielded the highest performance when predicting cognitive prognosis.
- There were no significant differences among the datasets.



- Features from all datasets were selected to better classify language and executive control outcomes
- These results are proof-of-concept for classifying patient's cognitive prognosis
- Future directions will involve increasing sample size and including detailed white matter volume features.

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