



Data-Driven Disease Progression Modelling for Research (and Healthcare?)

Neil Oxtoby

UKRI Future Leaders Fellow

POND group: Progression Of Neurodegenerative Disease



My quest for supermodels and drugs

Neil Oxtoby

Today's menu

Alzheimer's
Disease

Heterogeneity

**Disease
Progression
Modelling**

Pseudo-time

DPM & Clinical
Trials

Enrichment

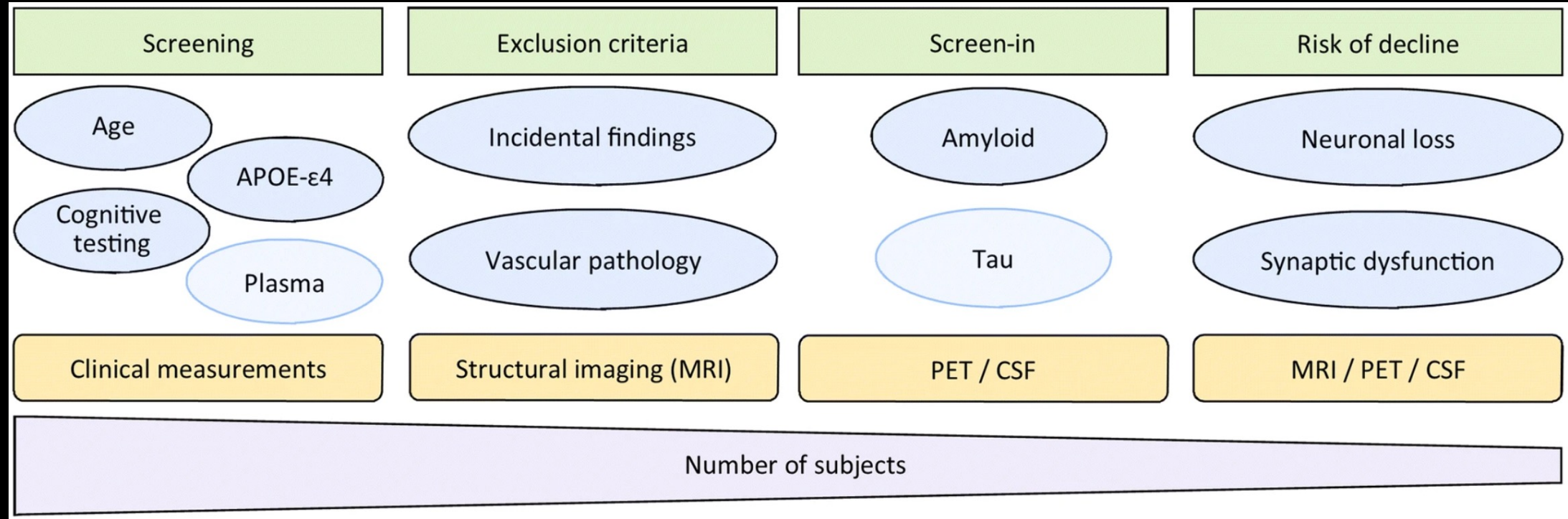
Alzheimer's Disease

- *Defined* by post mortem histopathology
- Clinical syndrome: memory *etc.*
- *Looooong* pre-symptomatic period: decades of pathology
- Heterogeneity in syndrome, onset, progression, and pathology!

Treatments for Alzheimer's?

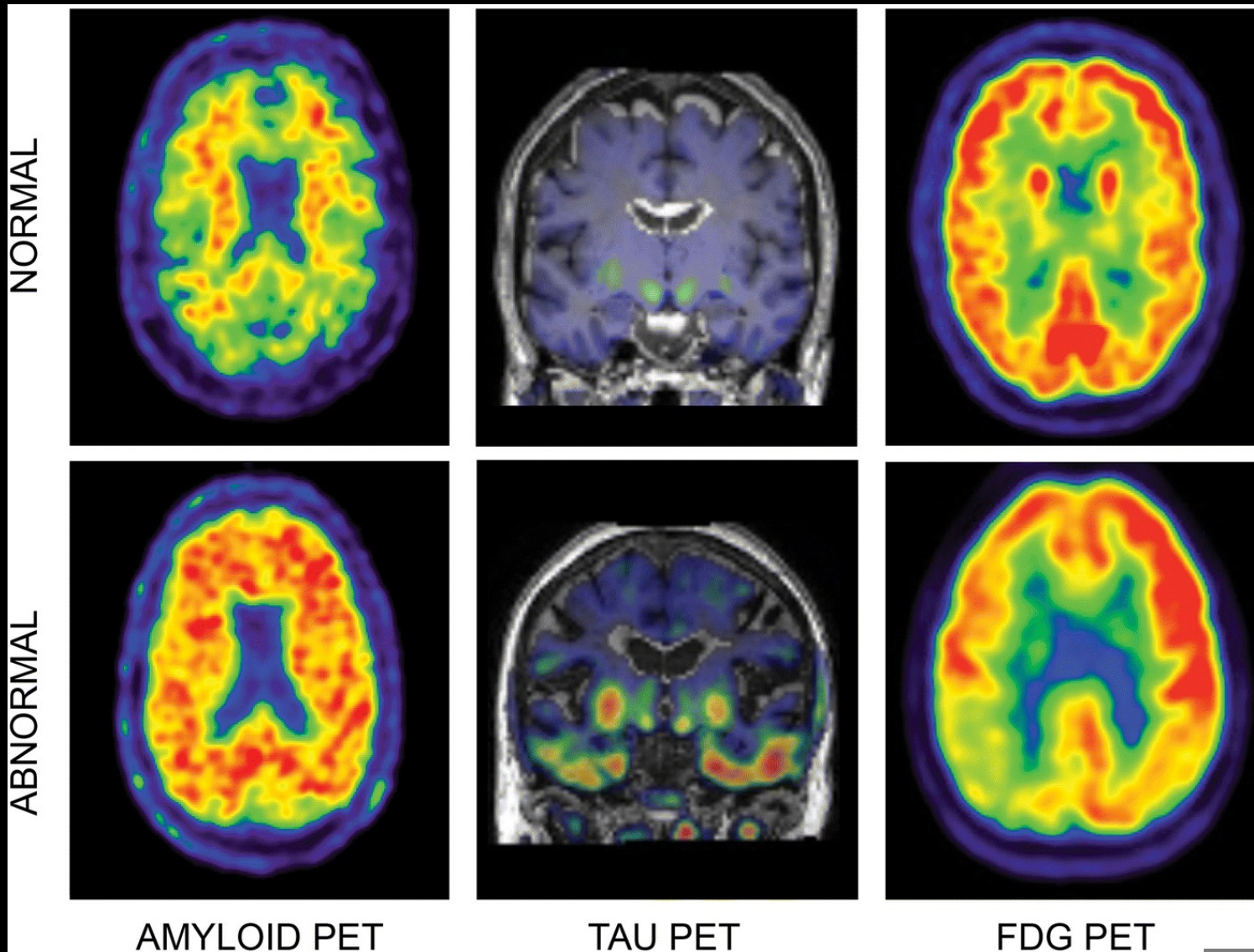
- **Amyloid cascade hypothesis** (Hardy/Higgins 1992; Selkoe/Hardy 2016)
 - + Plenty of supporting evidence
 - Anti-amyloid therapies not proving efficacious in large clinical trials
- **Why are clinical trials “failing”? (hundreds since 2003)**
 - Wrong time? (too late: prevention vs cure)
 - Wrong people? (subgroups)
 - Insufficient duration?
 - Insensitive end-points? (biology/biomarkers vs clinical benefit)
 - Amyloid hypothesis “wrong”? (*wrong* biology / comorbidities / multitarget strategies)
(Salloway, CTAD 2019; Aisen, CTAD 2019; + many at CTAD 2021/22)

What have clinical trials done?

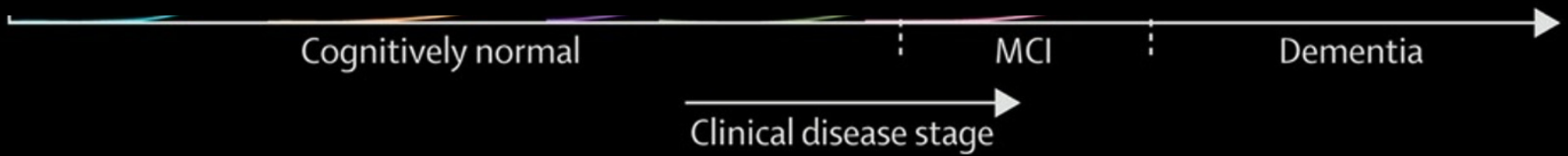


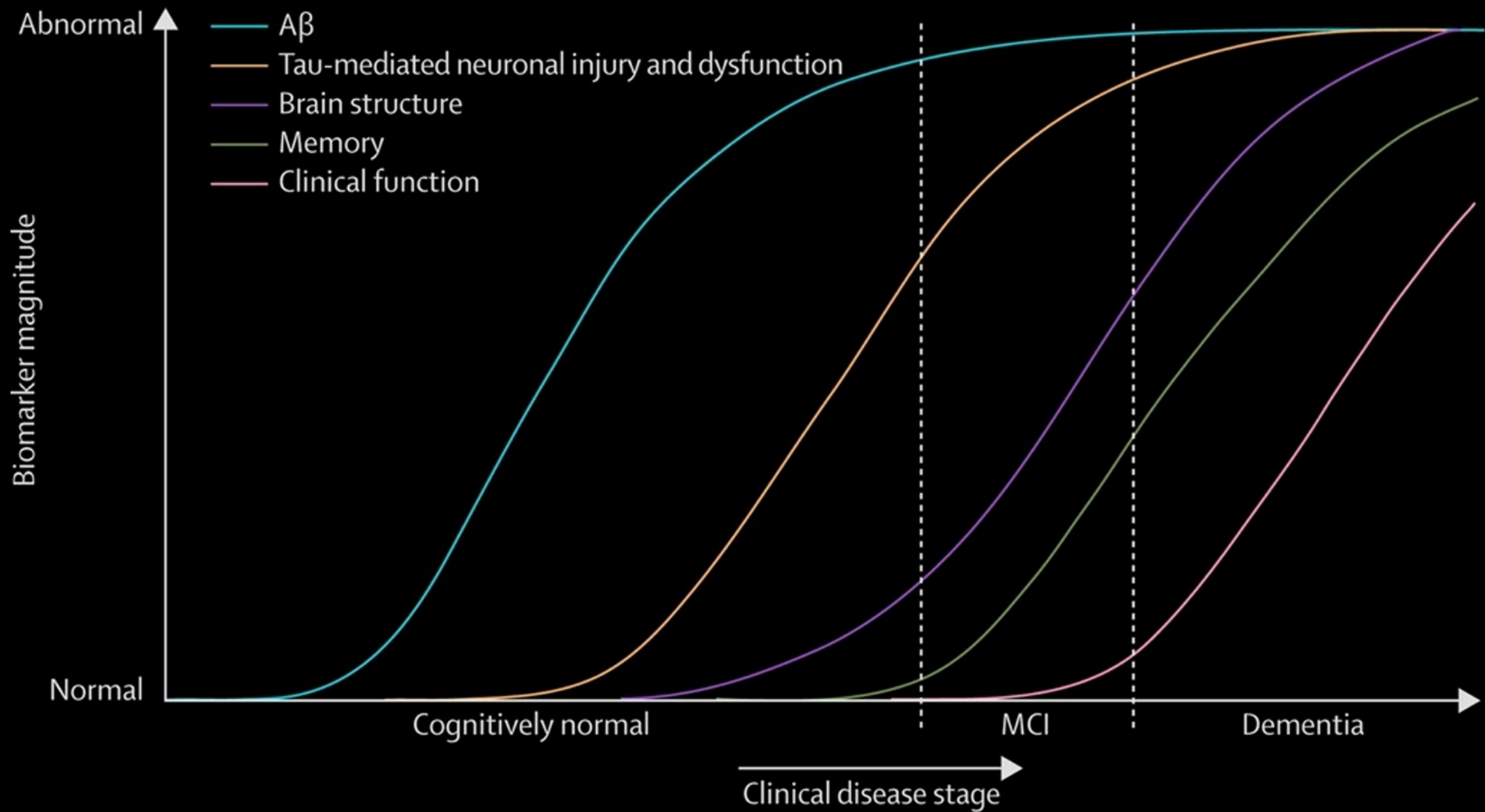
M. ten Kate et al., *Alz. Res. Therapy* (2018)

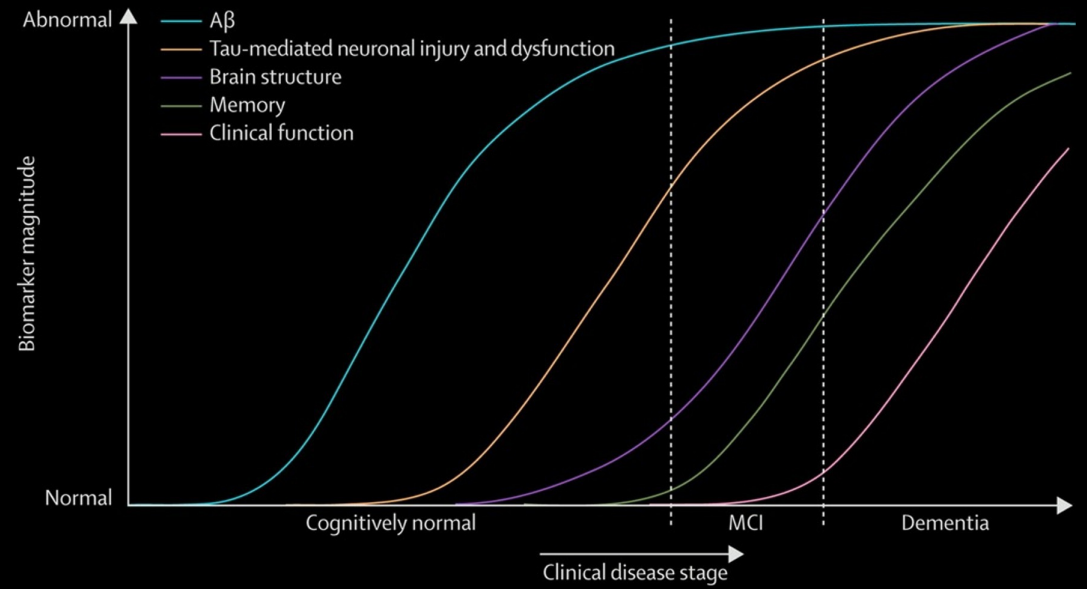
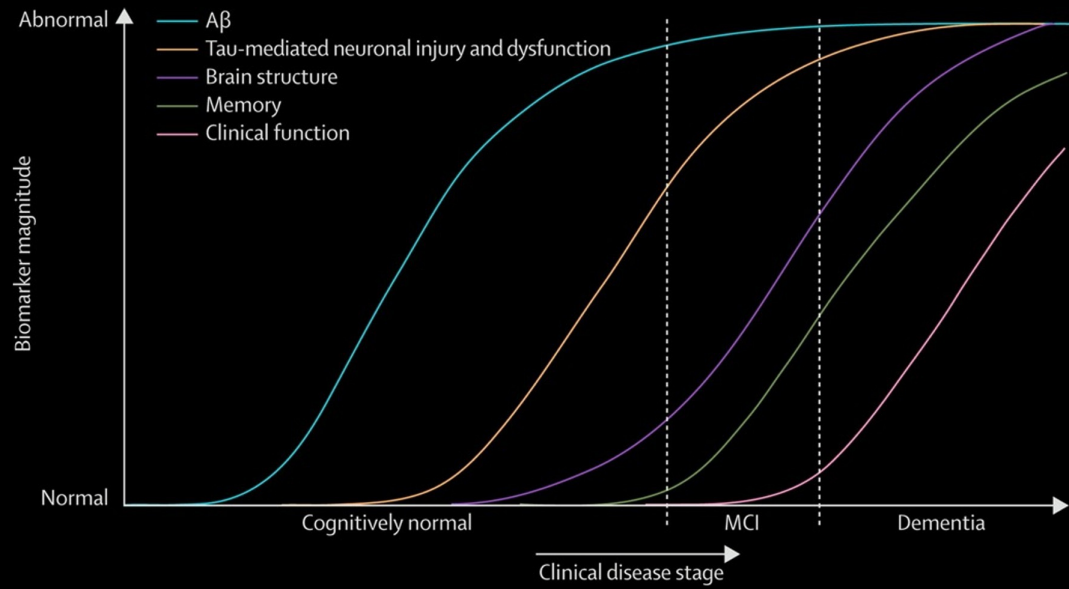
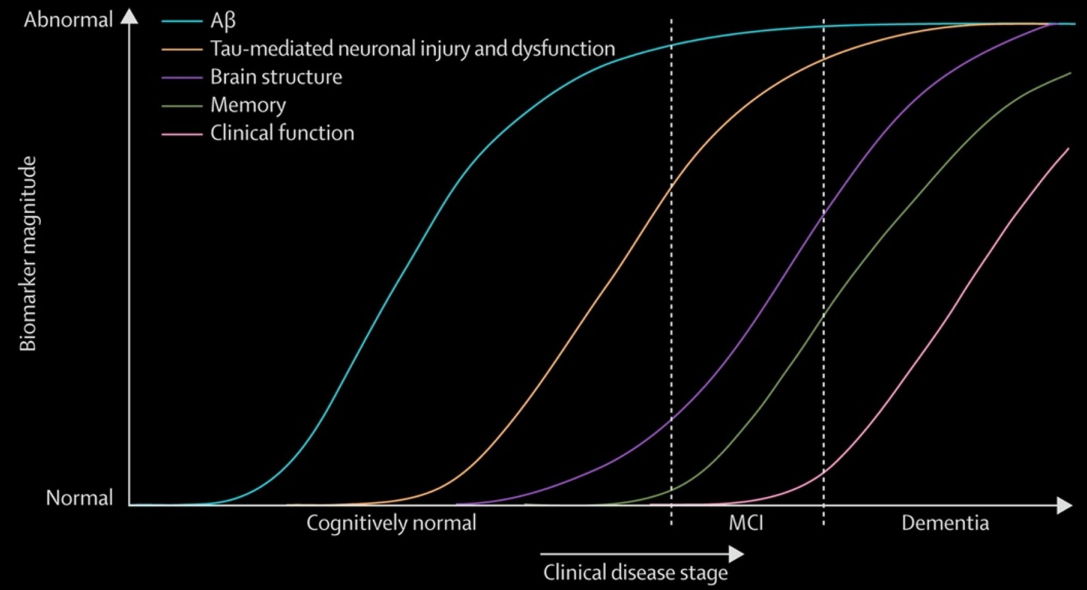
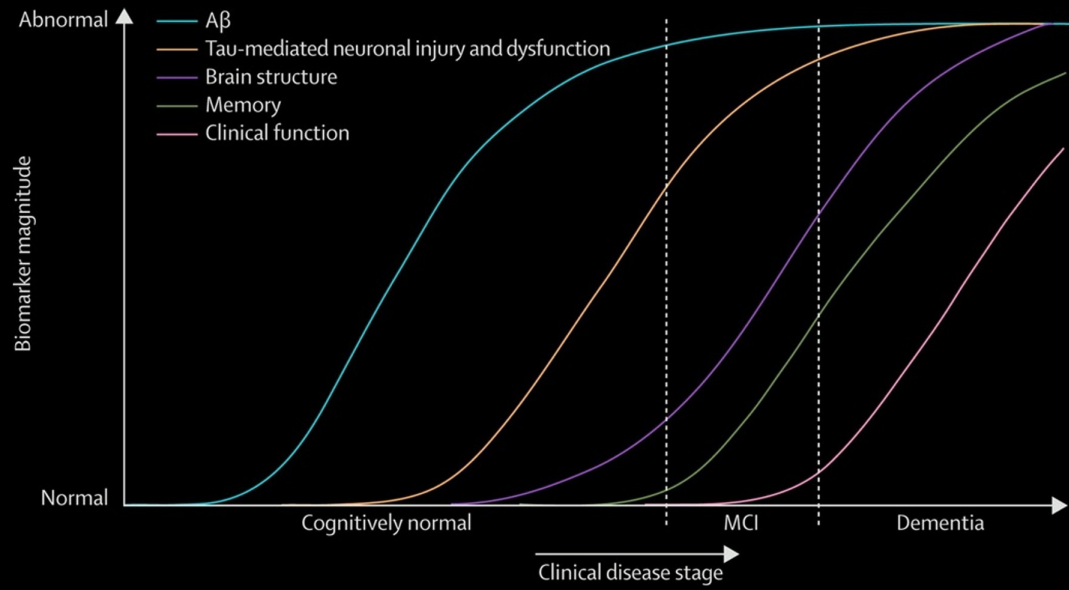
See also: D. Cash et al., *Alz. Res. Therapy* (2014)



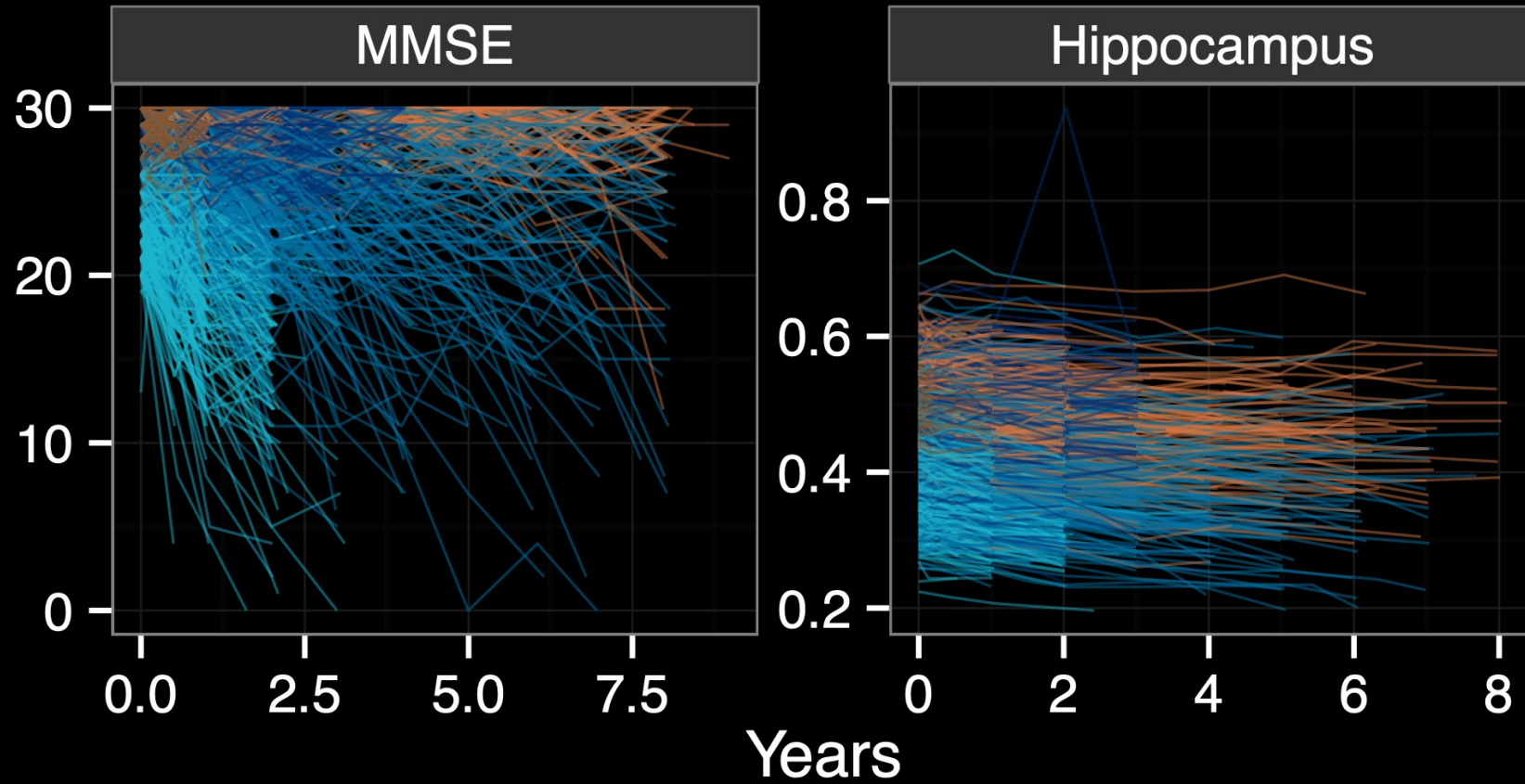
**What
have
clinical
trials
done?**







Sporadic AD, natural history: no time zero!

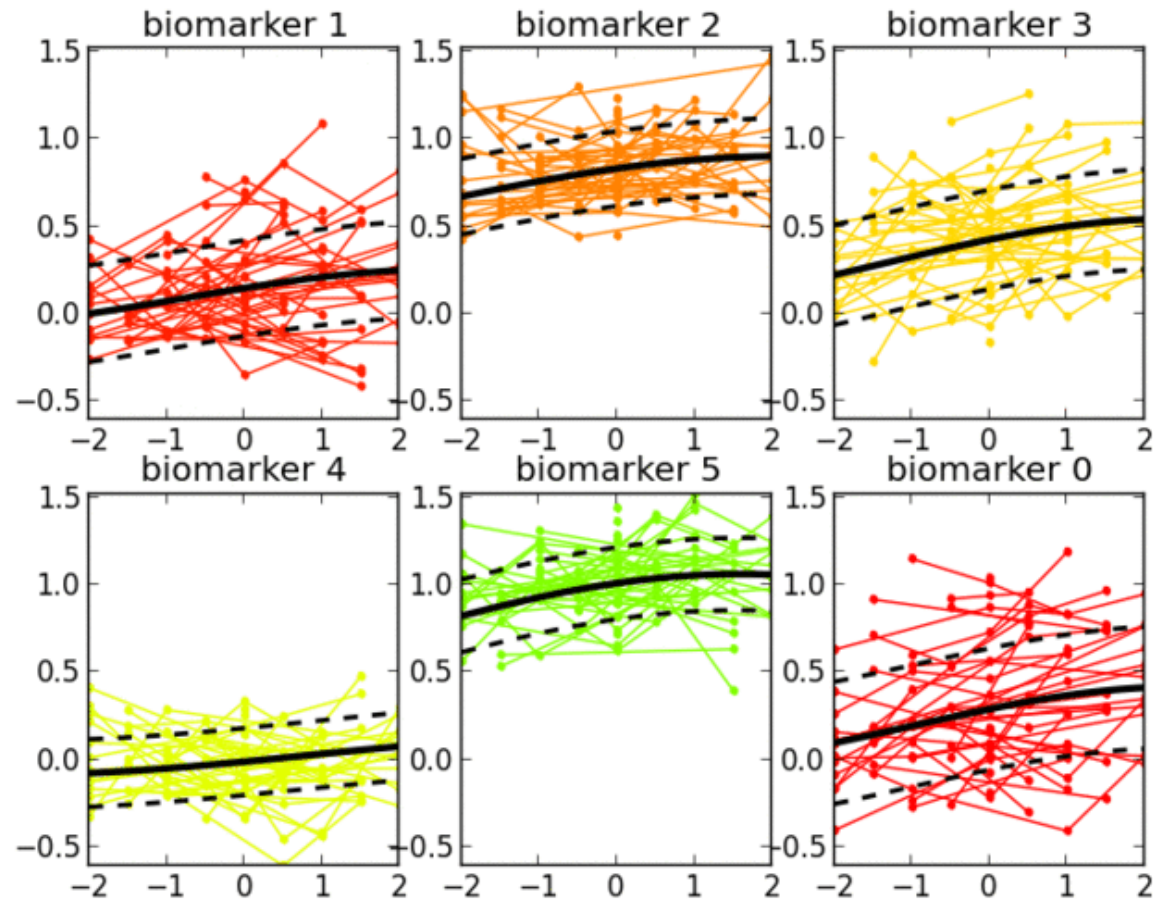


Diagnosis ■ CN ■ SMC ■ EMCI ■ LMCI ■ AD

Credit:
Mike Donohue, USC

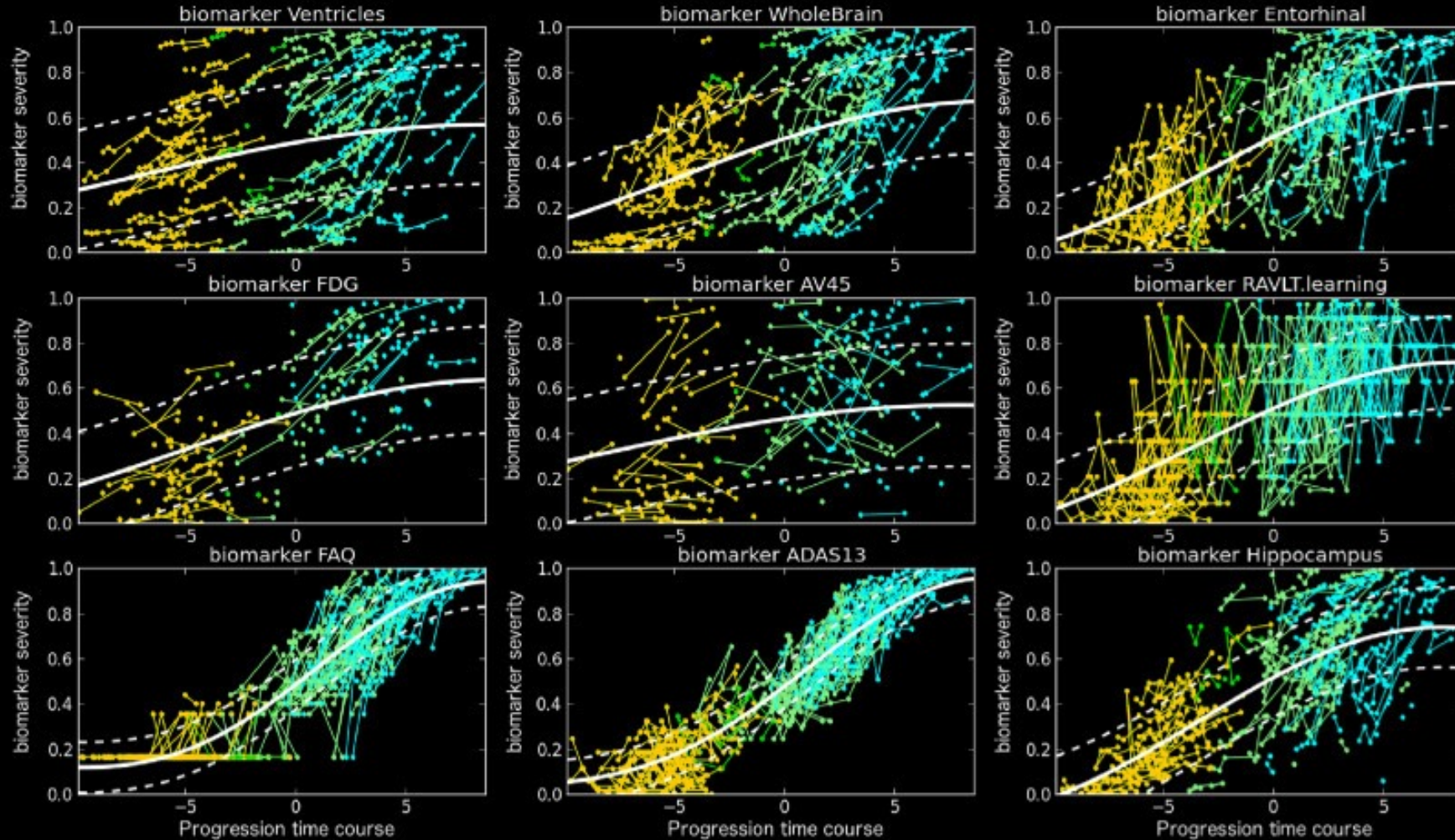
Alzheimer's Disease Neuroimaging Initiative (adni-info.org)

Data-driven Disease Progression Modelling

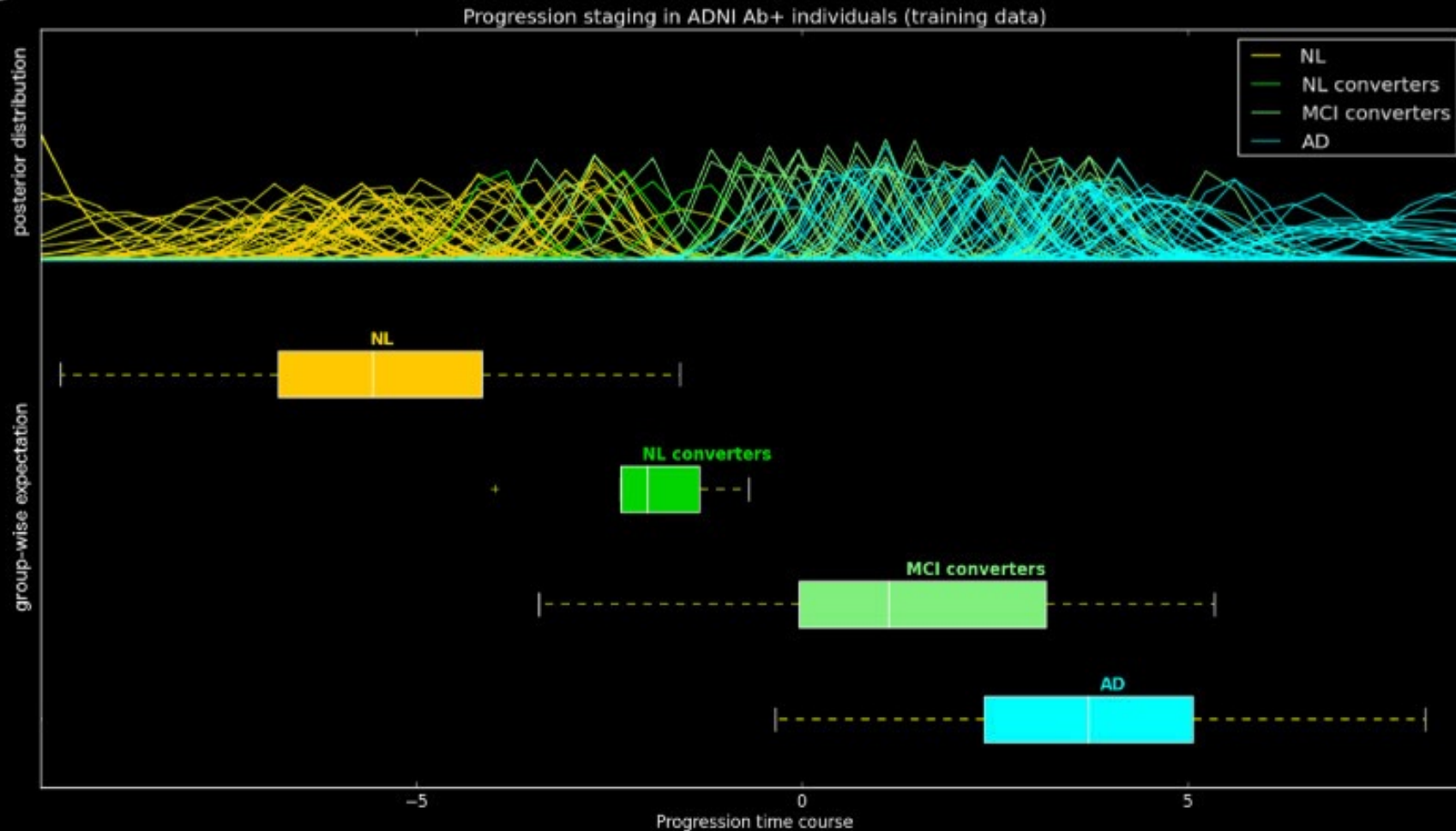


Data-driven Disease Progression Modelling

A

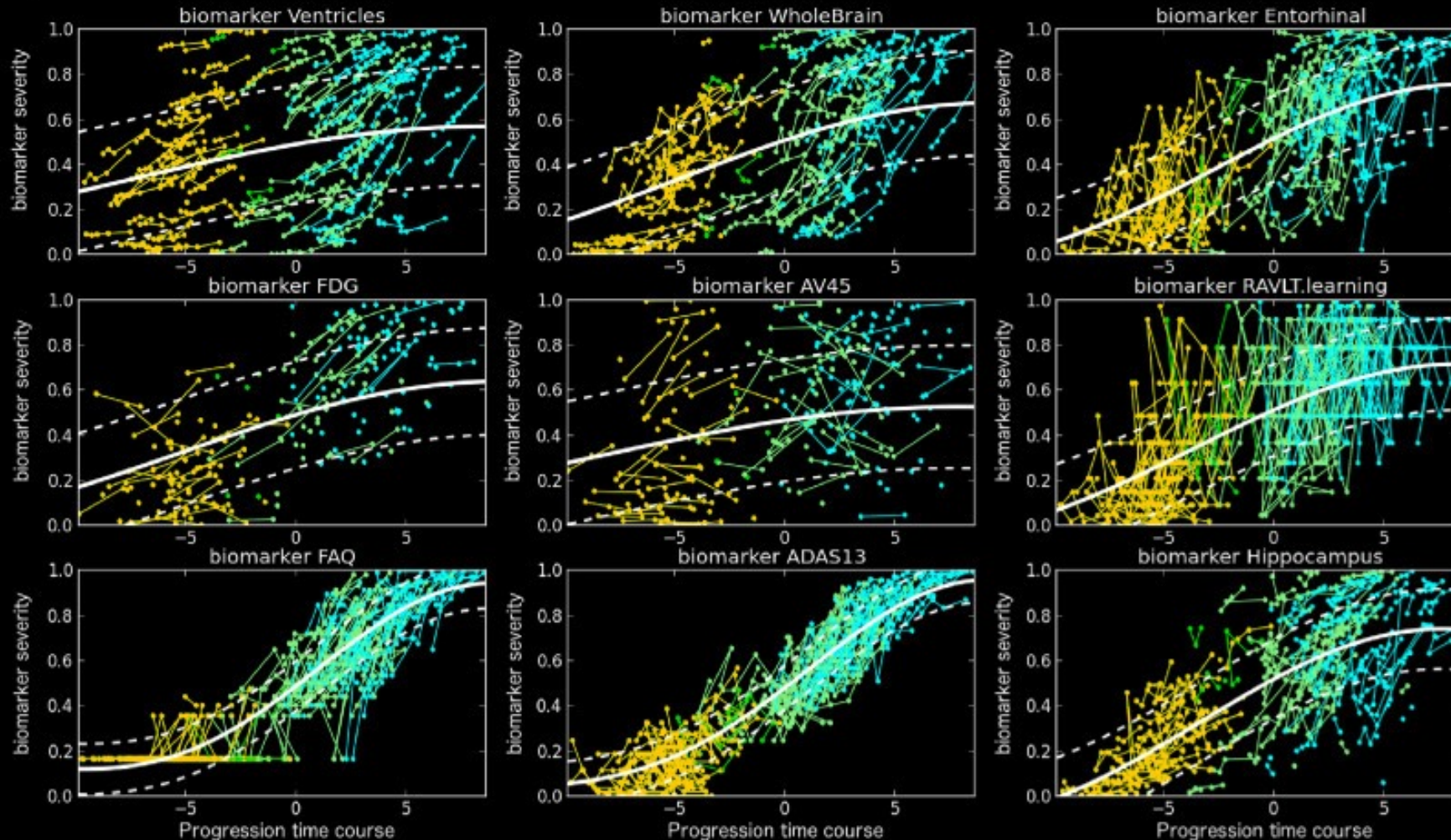


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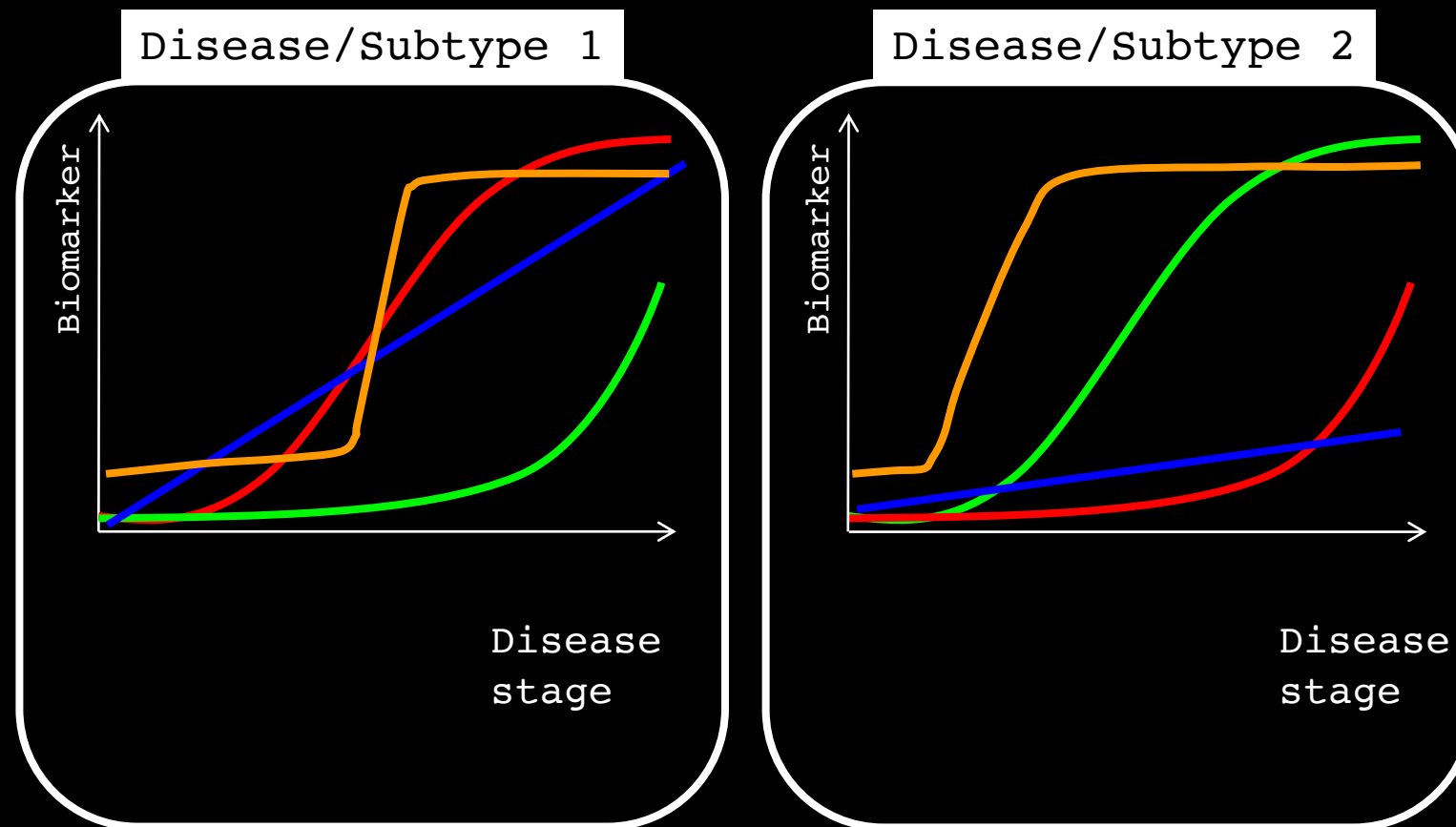


Data-driven Disease Progression Modelling

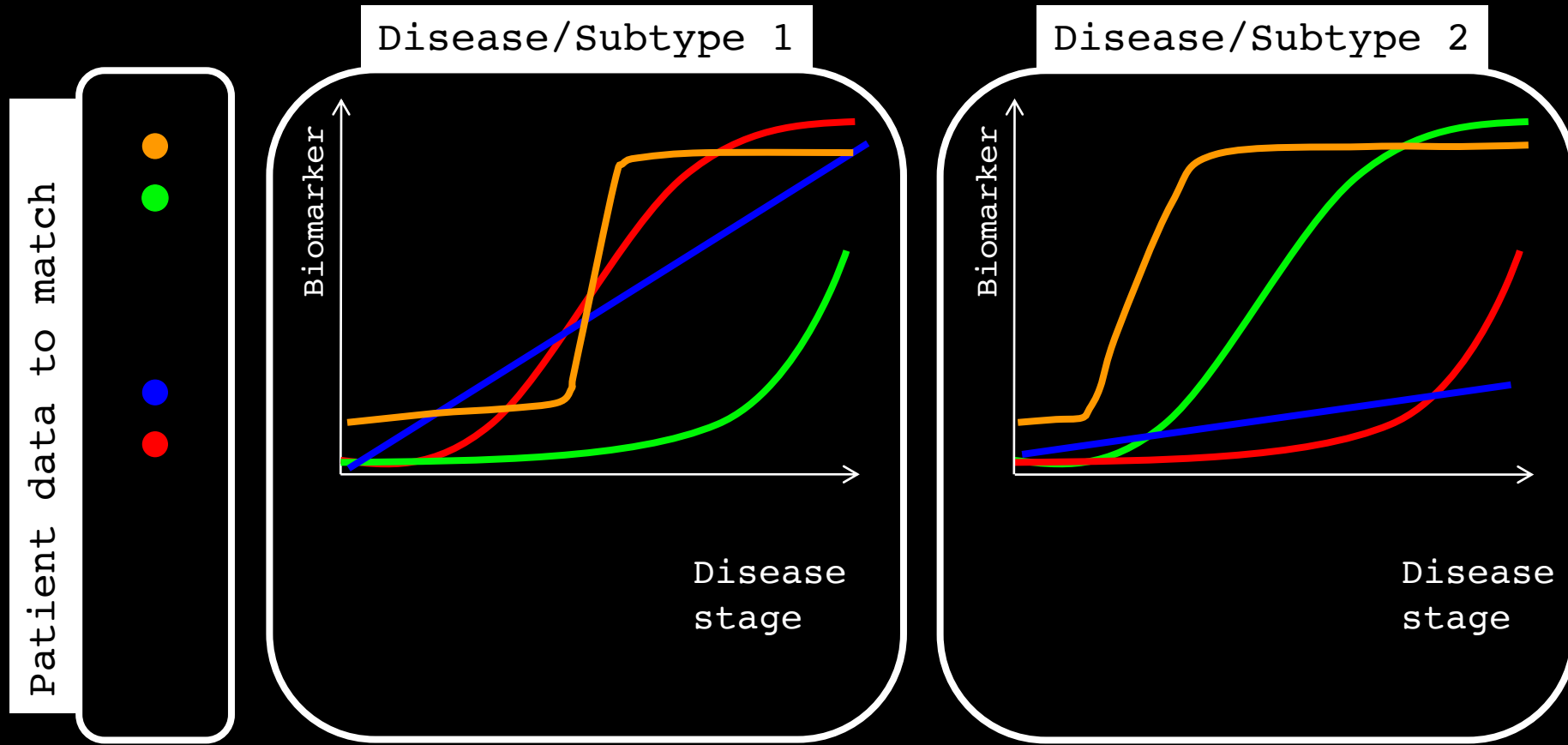
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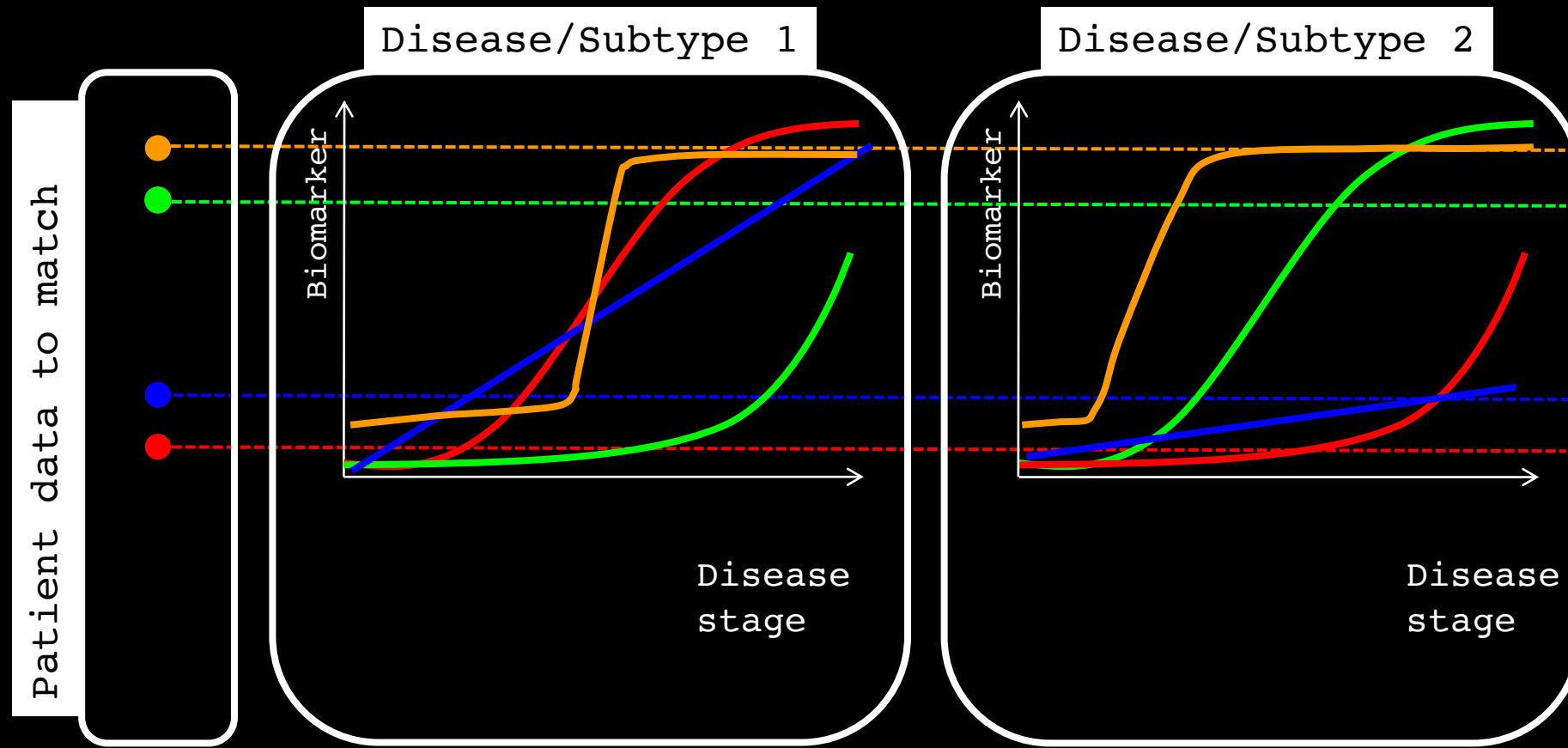
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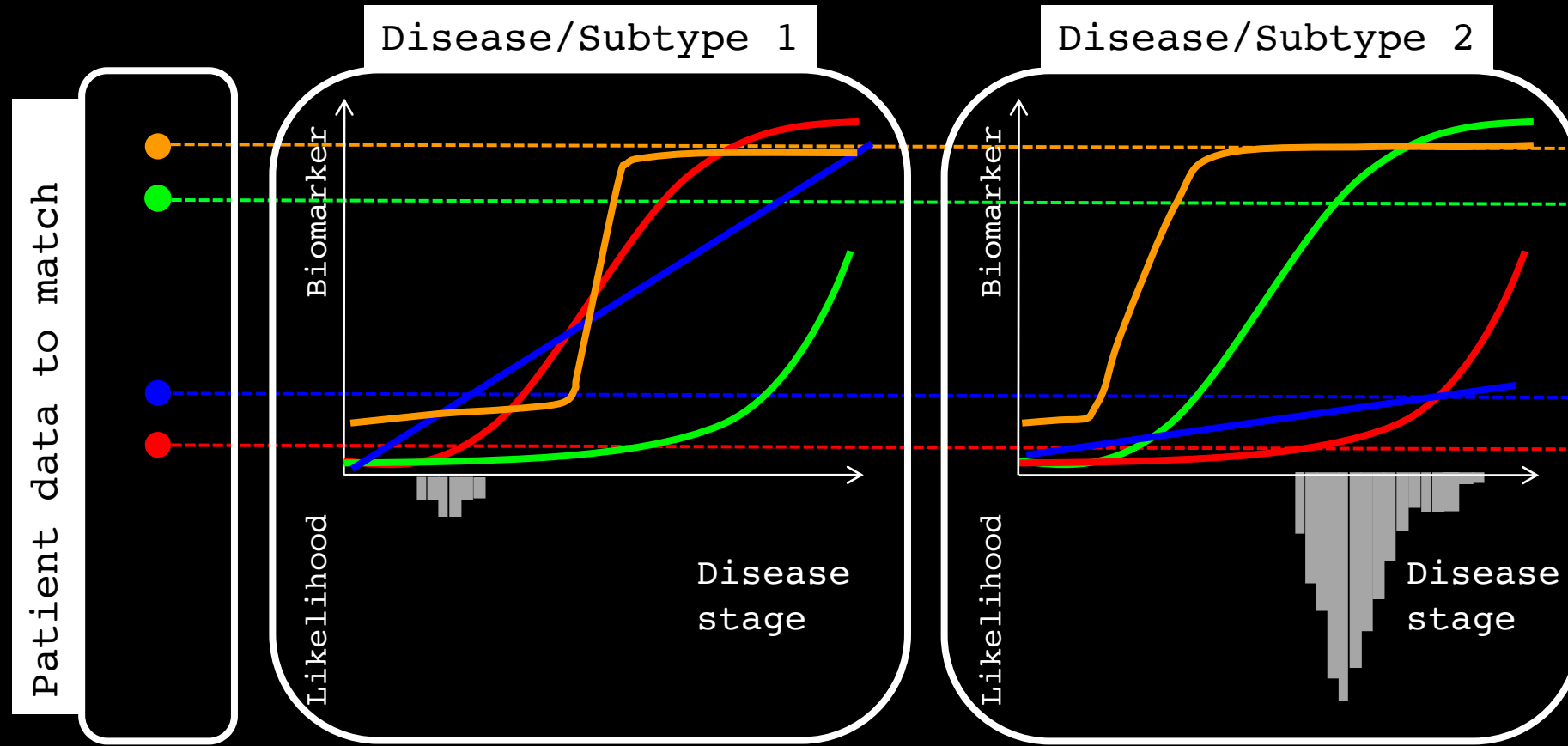
Data-driven Disease Progression Modelling



Data-driven Disease Progression Modelling

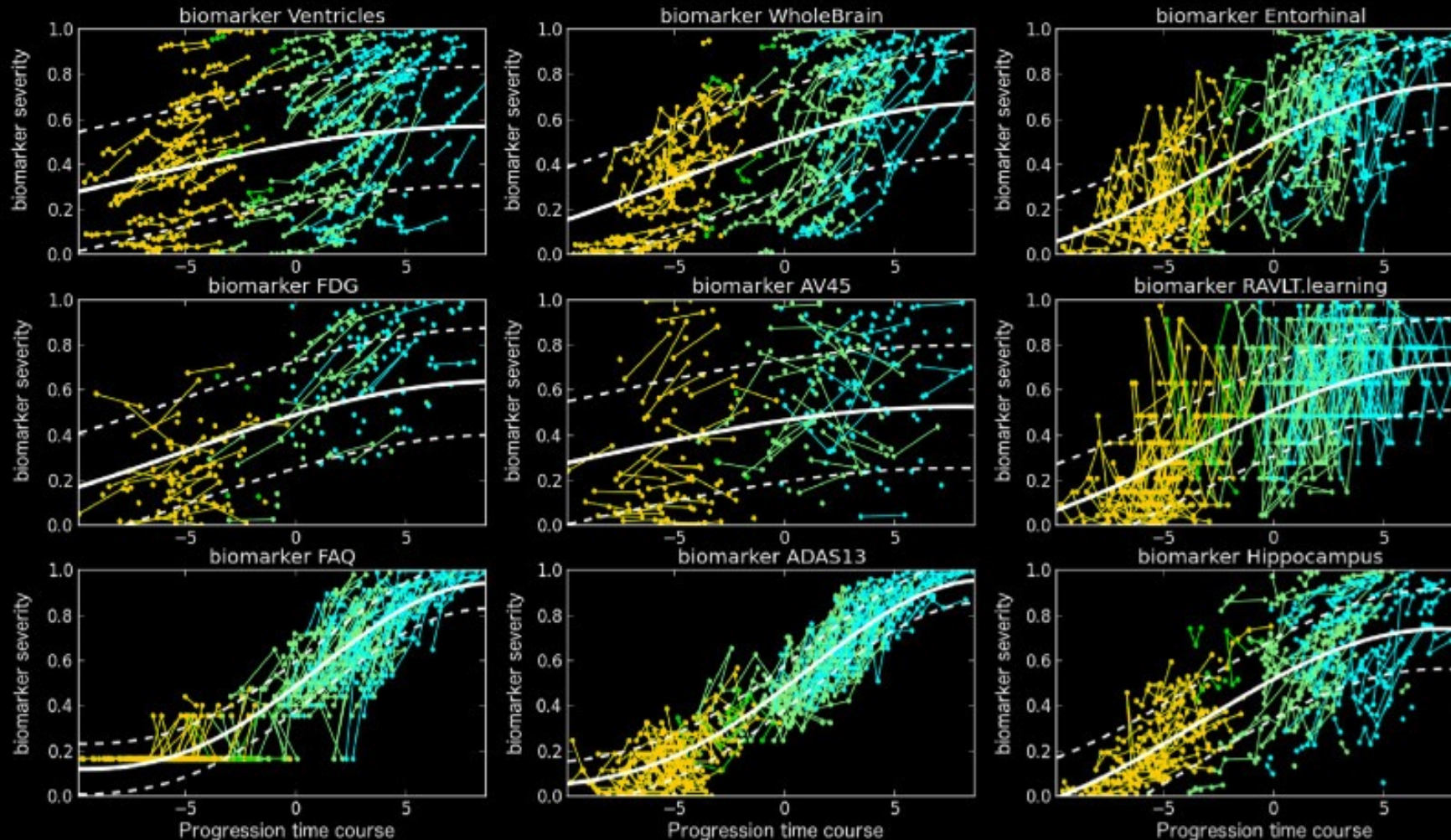


Data-driven Disease Progression Modelling



Data-driven Disease Progression Modelling

A



Disease Progression Modelling + Clustering

- Discrete: Subtype and Stage Inference

Young et al., Nature Communications 2018

- Continuous: LT-NLME + GMM

Poulet & Durrleman, IPMI 2019

Event-based model

- Estimates the order of disease “events” from a cross-sectional (or short-term longitudinal) data set

Data-driven: no prior knowledge of disease stage

NeuroImage 60 (2012) 1880–1889

Contents lists available at SciVerse ScienceDirect

NeuroImage

journal homepage: www.elsevier.com/locate/ynimg

ELSEVIER

An event-based model for disease progression and its application in familial Alzheimer's disease and Huntington's disease

Hubert M. Fonteijn^{a,b,c,*}, Marc Modat^{a,d}, Matthew J. Clarkson^{a,d,e}, Josephine Barnes^e, Manja Lehmann^e, Nicola Z. Hobbs^f, Rachael I. Scahill^f, Sarah J. Tabrizi^{f,g}, Sebastien Ourselin^{a,d,e}, Nick C. Fox^{e,g}, Daniel C. Alexander^{a,b}

doi:10.1093/brain/awu176

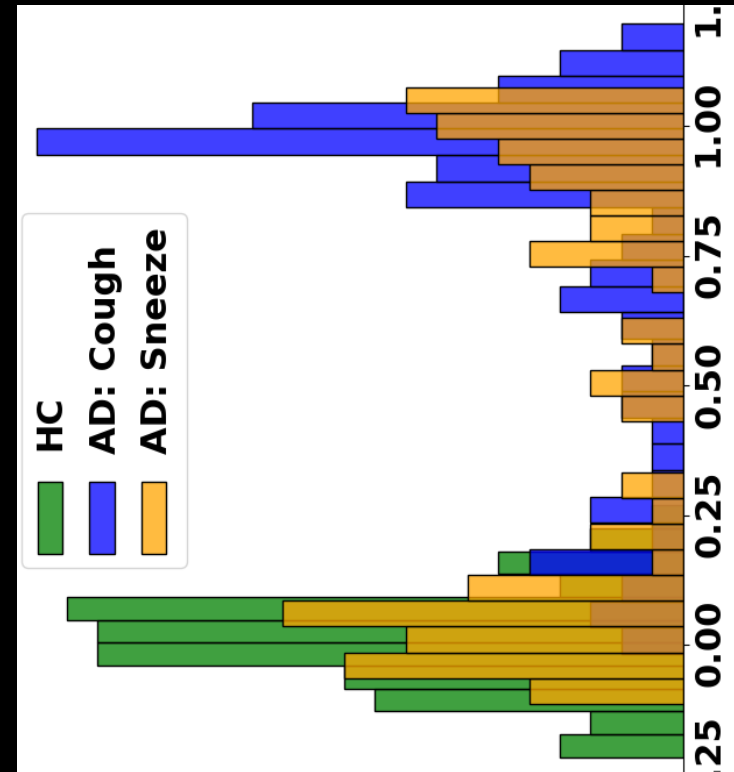
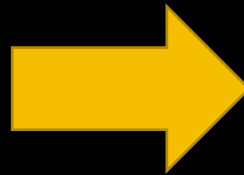
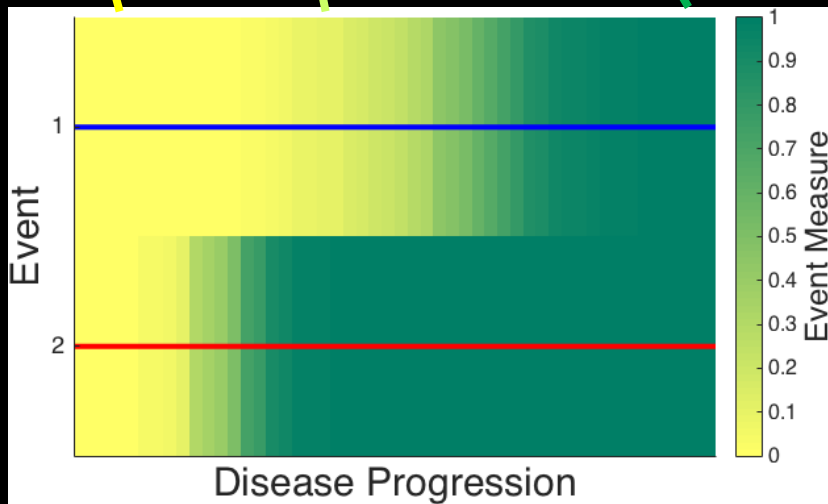
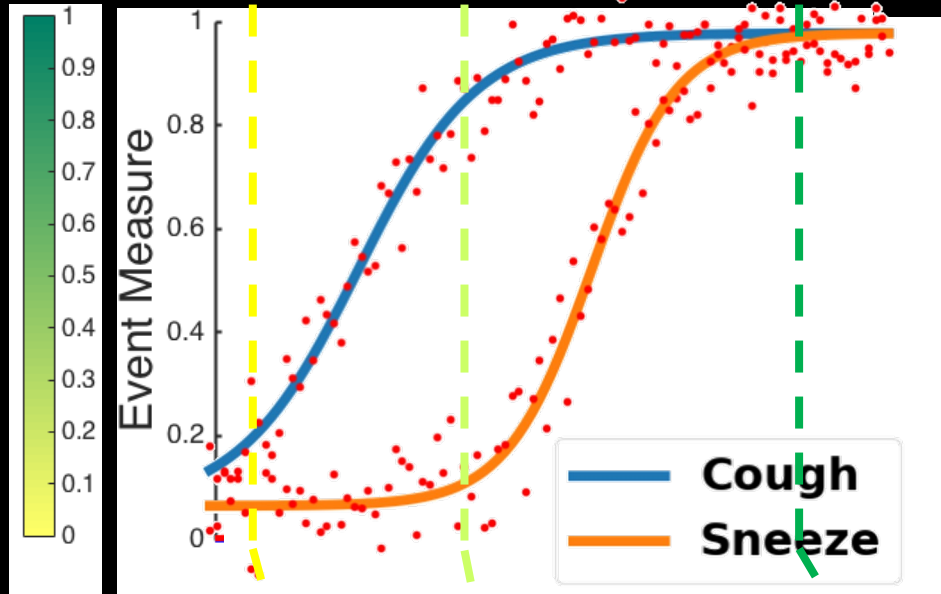
Brain 2014; 137; 2564–2577 | 2564

BRAIN
A JOURNAL OF NEUROLOGY

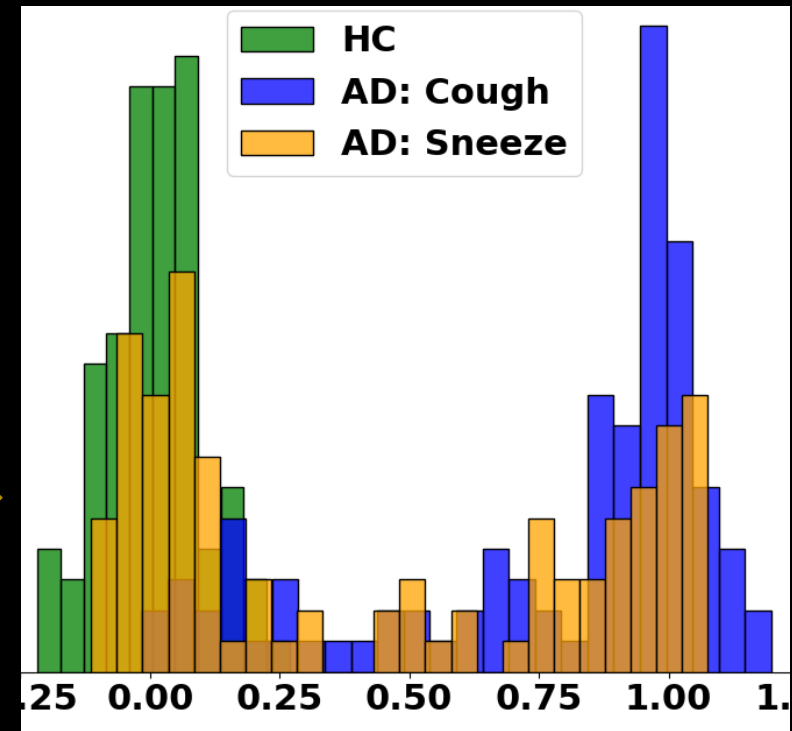
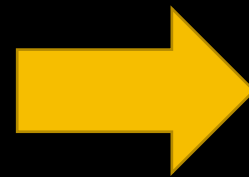
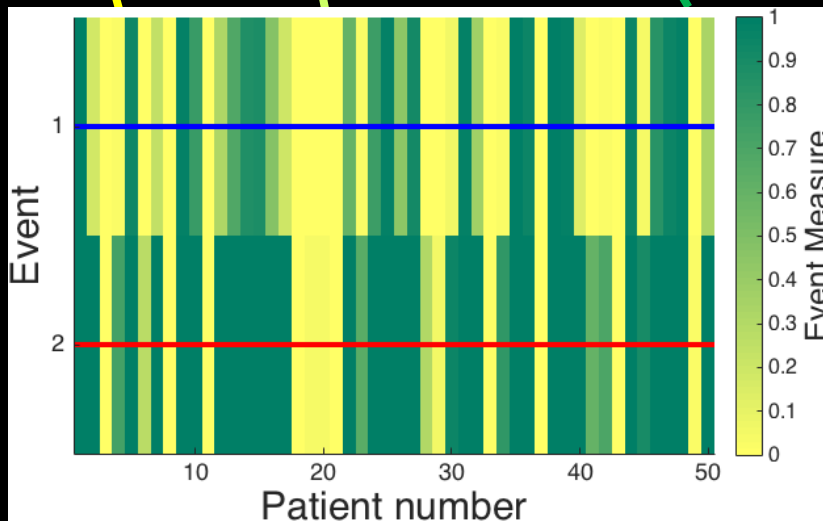
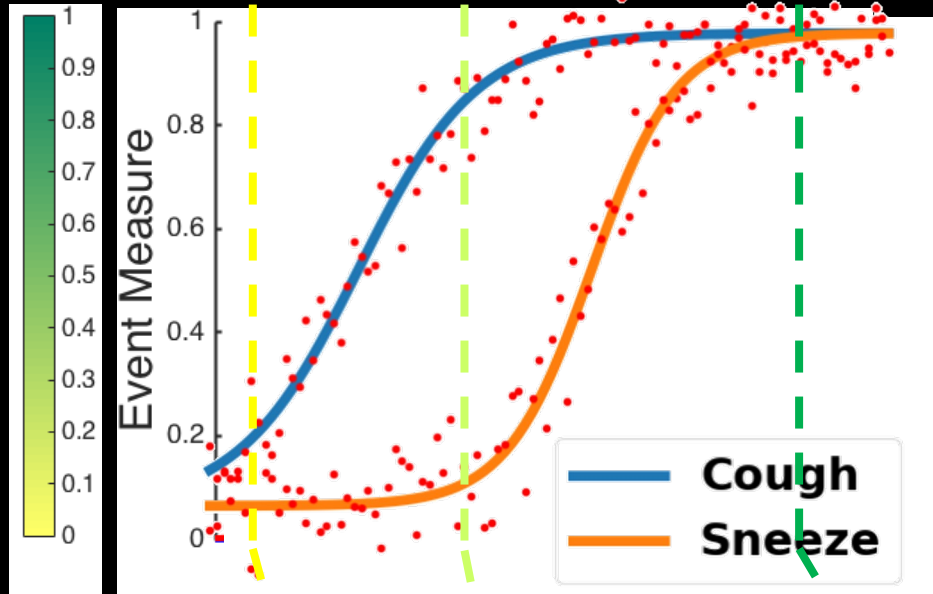
A data-driven model of biomarker changes in sporadic Alzheimer's disease

Alexandra L. Young,¹ Neil P. Oxtoby,¹ Pankaj Daga,¹ David M. Cash,^{1,2} on behalf of the Alzheimer's Disease Neuroimaging Initiative,[†] Nick C. Fox,² Sebastien Ourselin,^{1,2} Jonathan M. Schott^{2,*} and Daniel C. Alexander^{1,*}

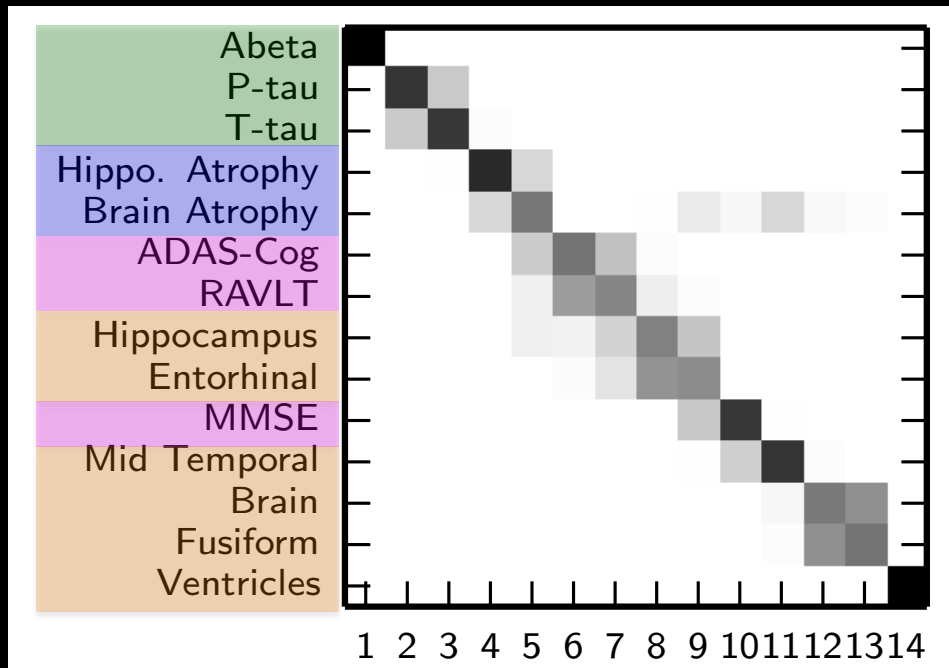
Event based model



Event based model



Event based model of Alzheimer's disease progression



Model Stages:

0

1-3

CSF

4-5

Rates of atrophy

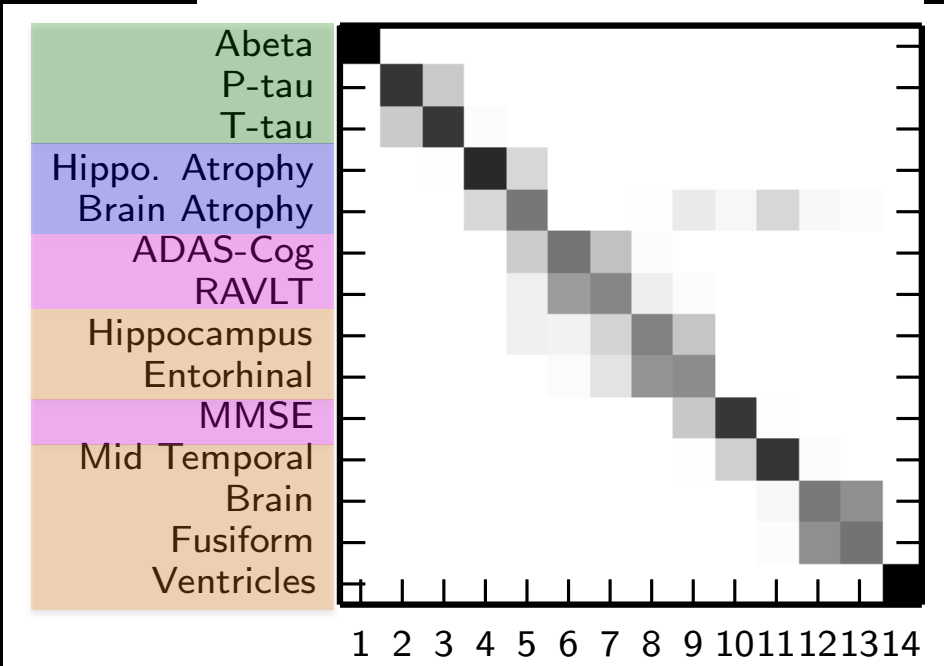
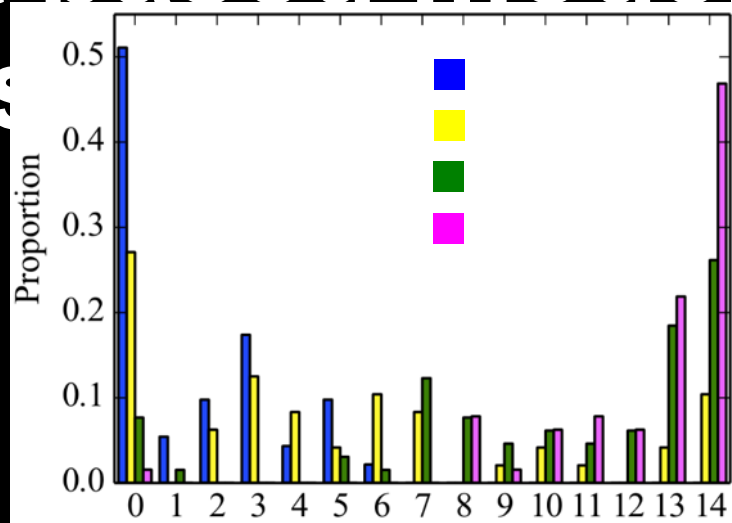
6-8

Cognitive test scores

9-14

Brain volumes

Event based model of Alzheimer's disease progression



Model Stages:

0

1-3

CSF

4-5

Rates of atrophy

6-8

Cognitive test scores

9-14

Brain volumes

Event based model in Alzheimer's disease progression: CSF vs PET

Research

JAMA Neurology | **Original Investigation**

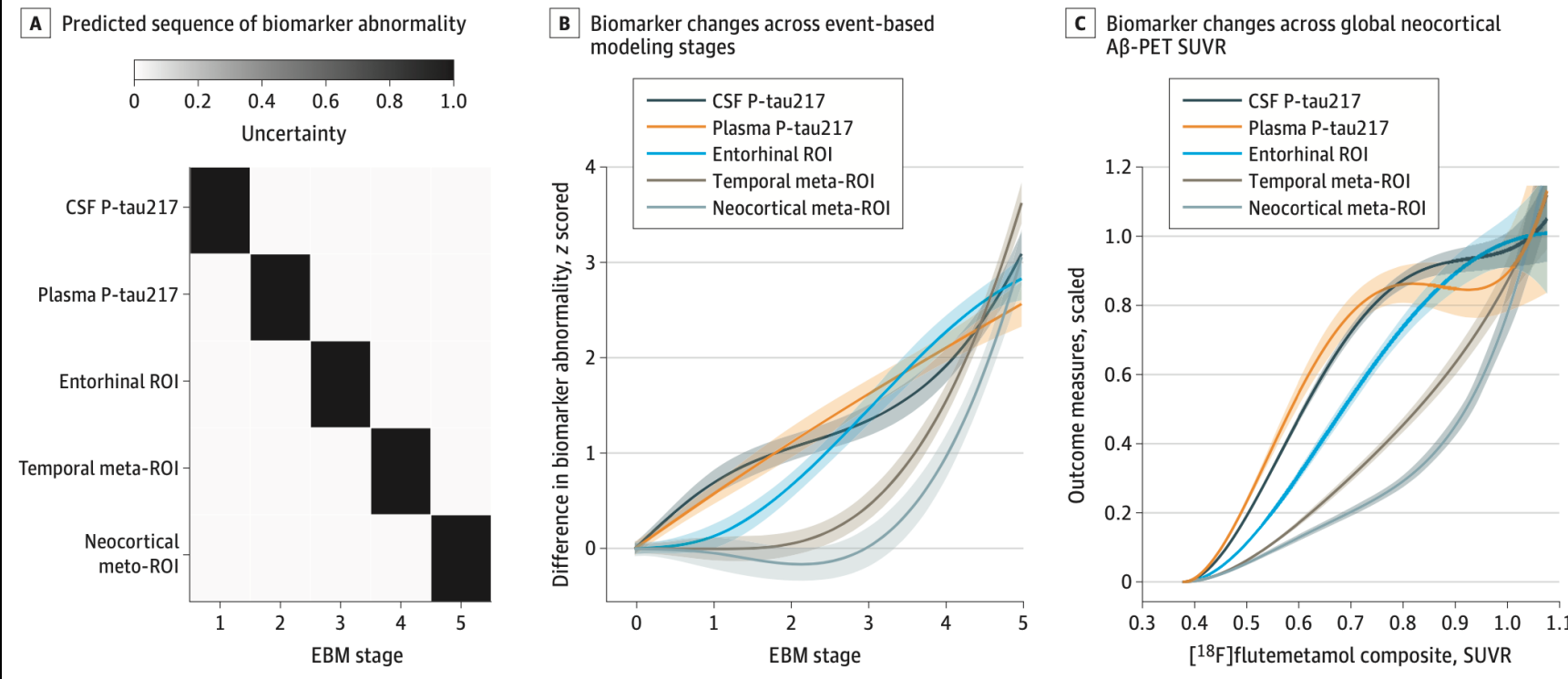
Associations of Plasma Phospho-Tau217 Levels With Tau Positron Emission Tomography in Early Alzheimer Disease

Shorena Janelidze, PhD; David Berron, PhD; Ruben Smith, MD, PhD; Olof Strandberg, PhD; Nicholas K. Proctor, BS; Jeffrey L. Dage, PhD; Erik Stomrud, MD, PhD; Sebastian Palmqvist, MD, PhD; Niklas Mattsson-Carlgen, MD, PhD; Oskar Hansson, MD, PhD

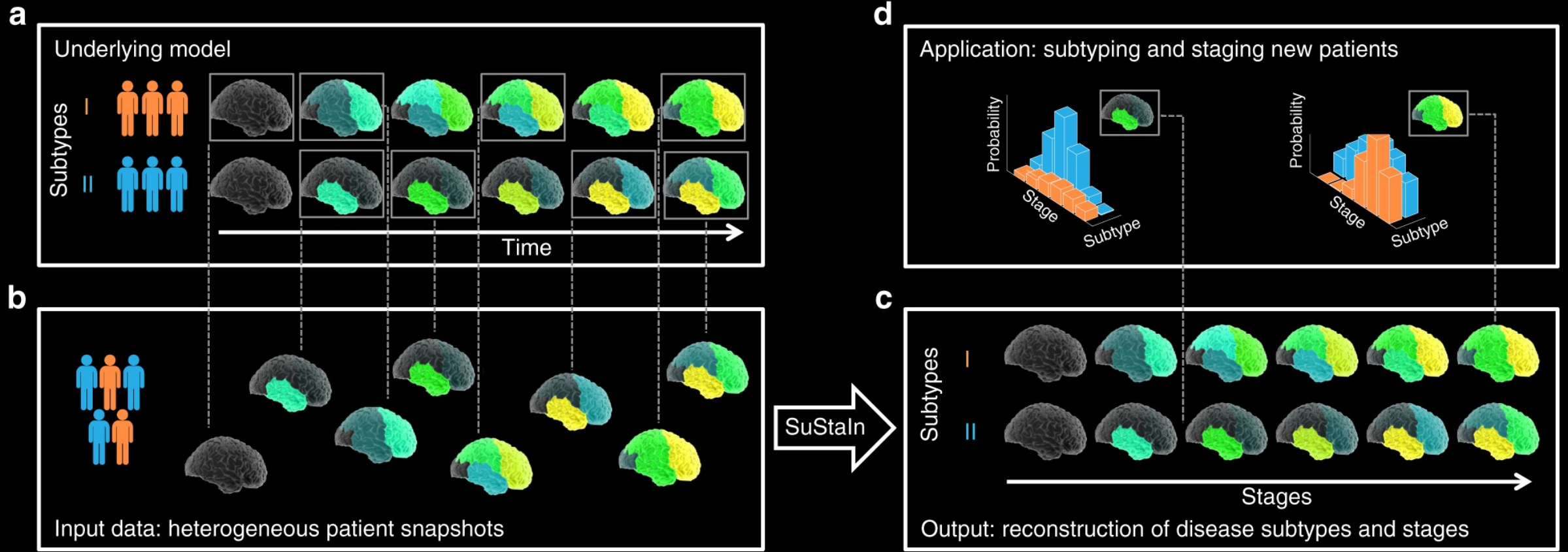
Janelidze et al,
JAMA Neurol 2021

Event based model in Alzheimer's disease progression: CSF vs PET

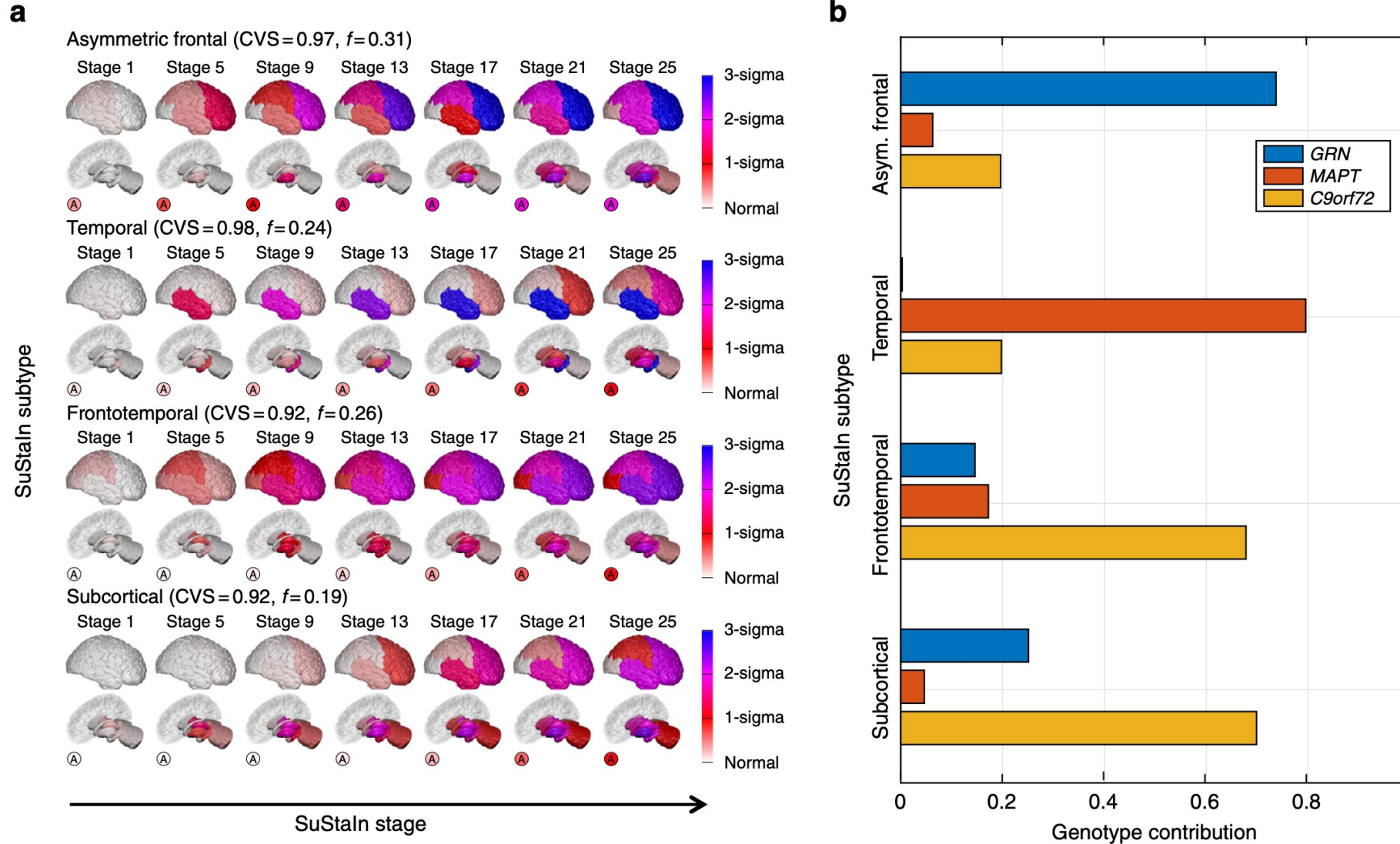
Figure 3. Order of Change in Plasma Tau Phosphorylated at Threonine 217 (P-tau217), Cerebrospinal Fluid (CSF) P-tau217, and Tau-Positron Emission Tomography (PET) Abnormality



Subtype and Stage Inference (DPM + clustering)

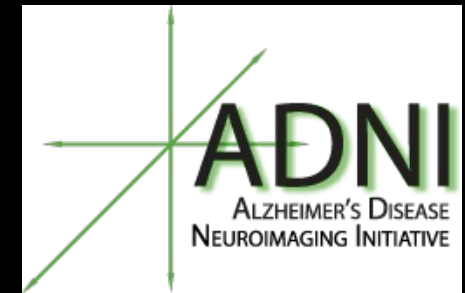
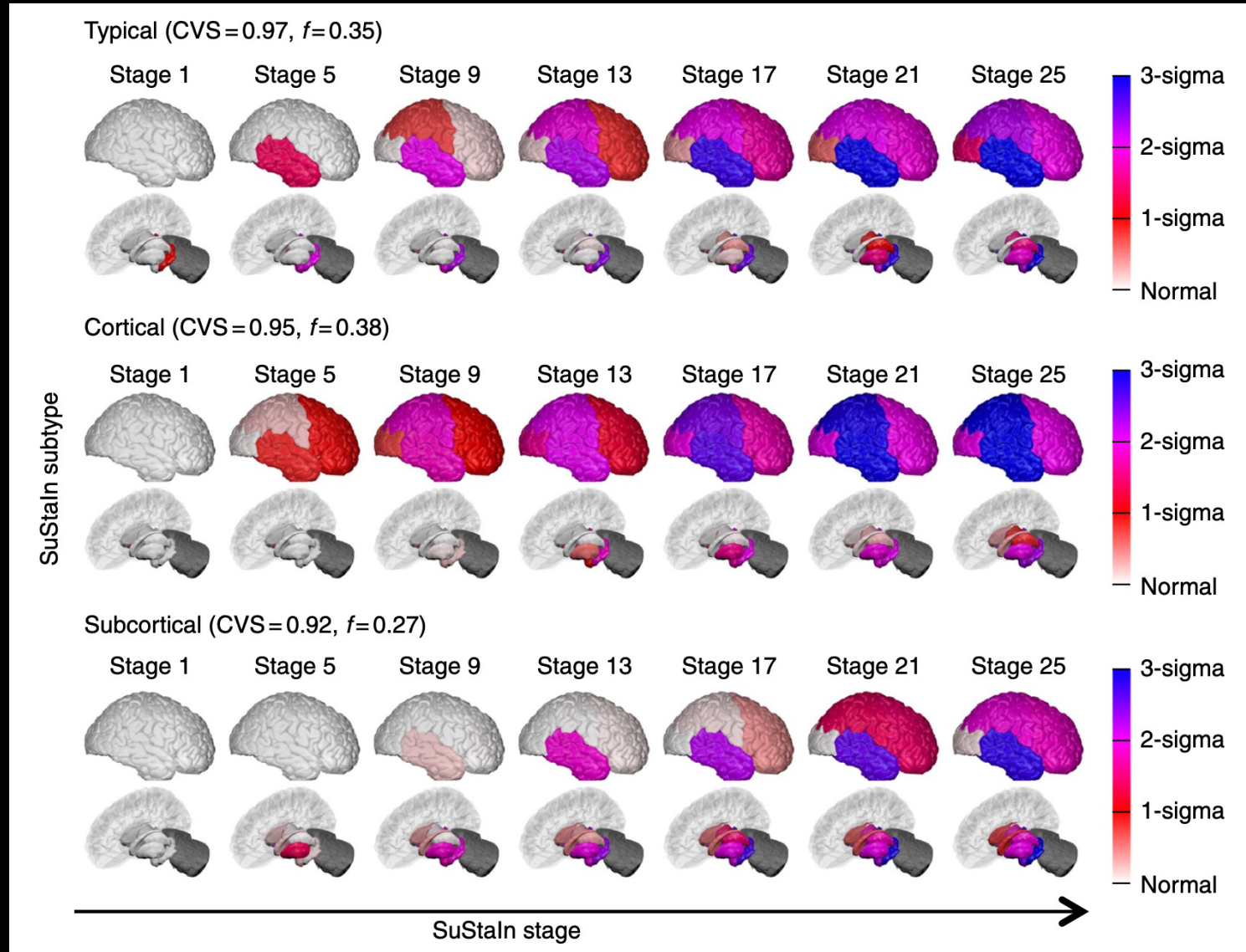


Subtype and Stage Inference – Genetic FTD



Young et al,
Nat Commun 2018

Subtype and Stage Inference – sporadic AD

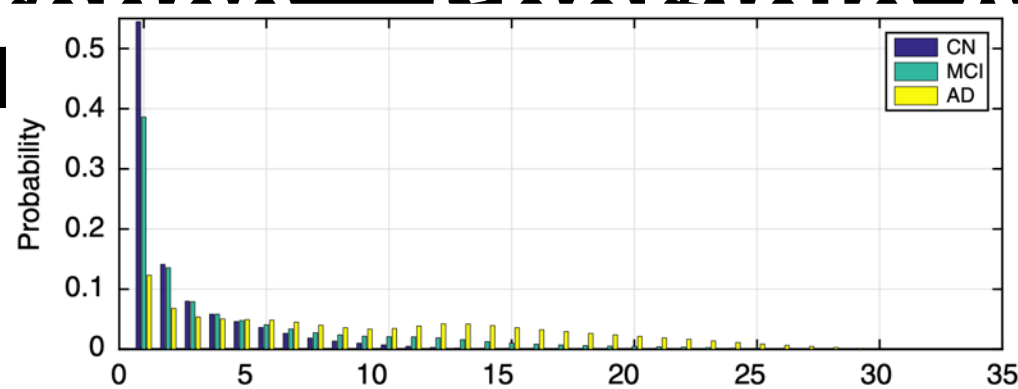
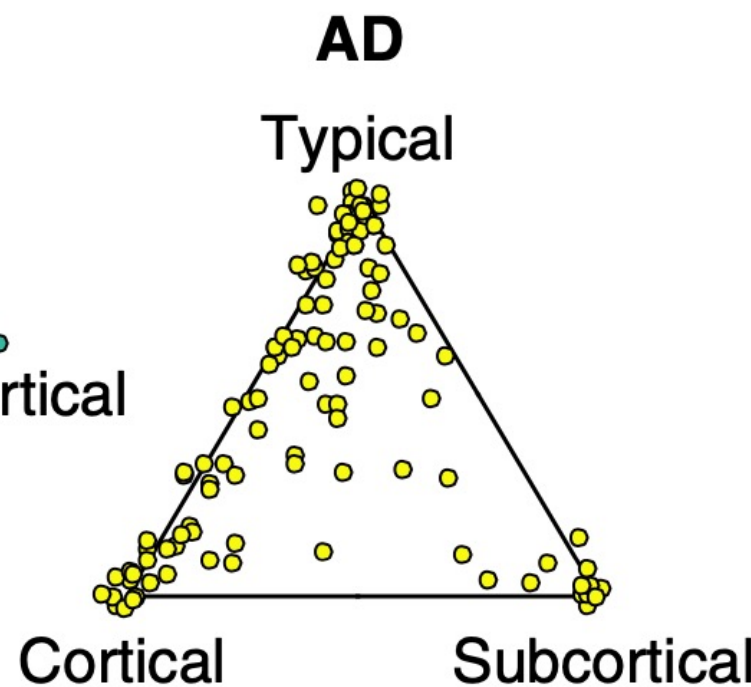
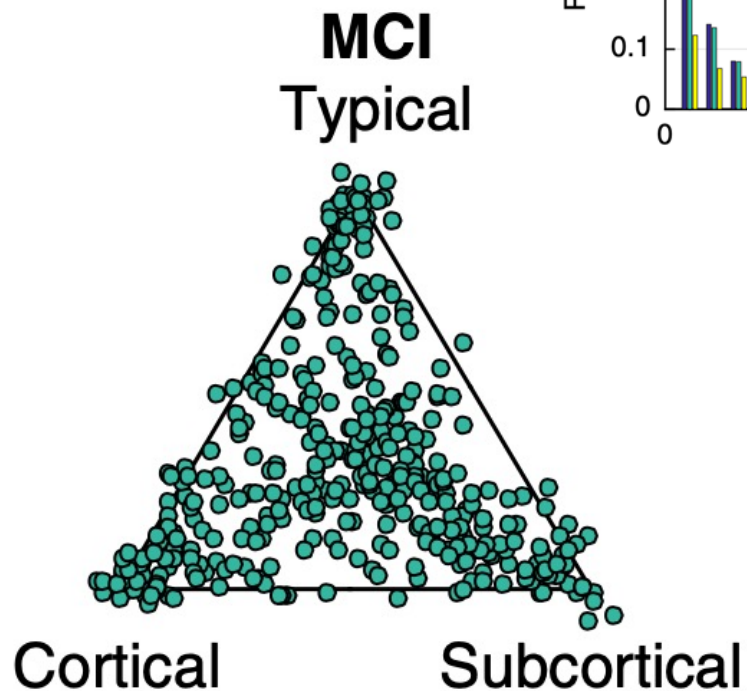
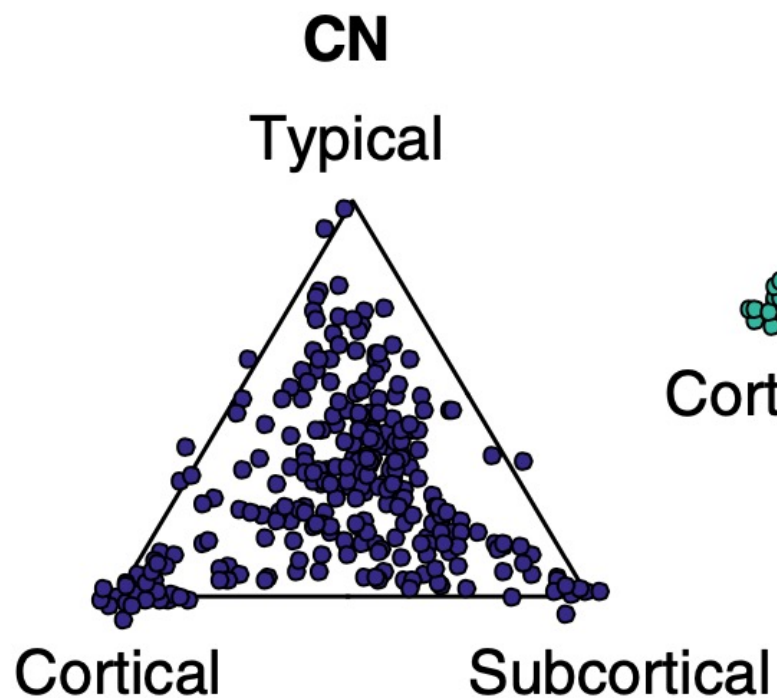


Young et al,
Nat Commun 2018

Subtype and Stage Inference in sporadic AD

Typical (CVS=0.97, $f=0.35$)

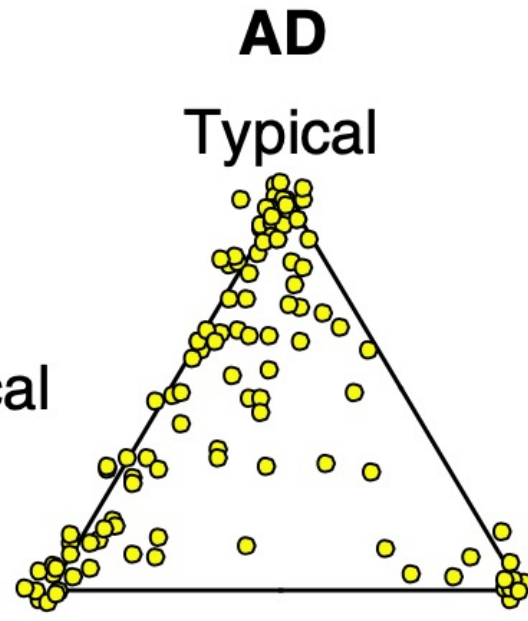
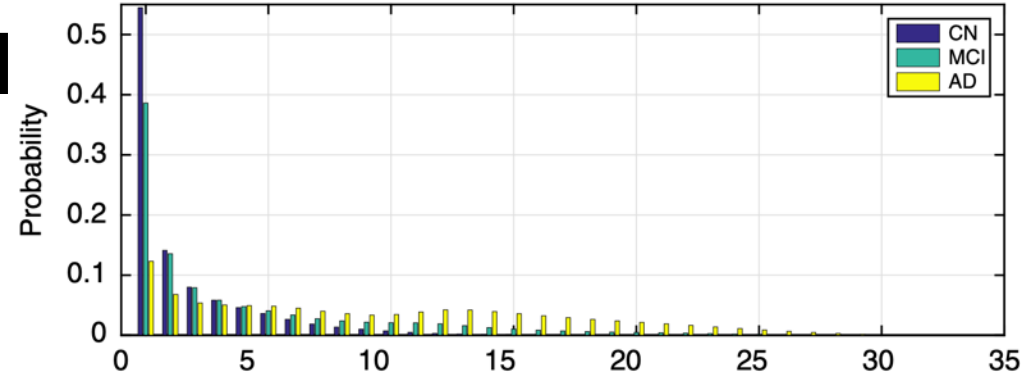
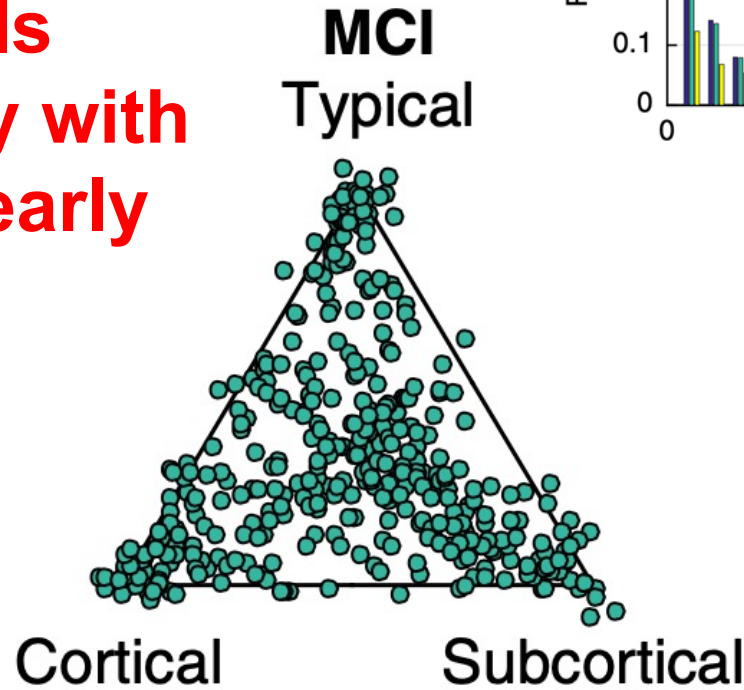
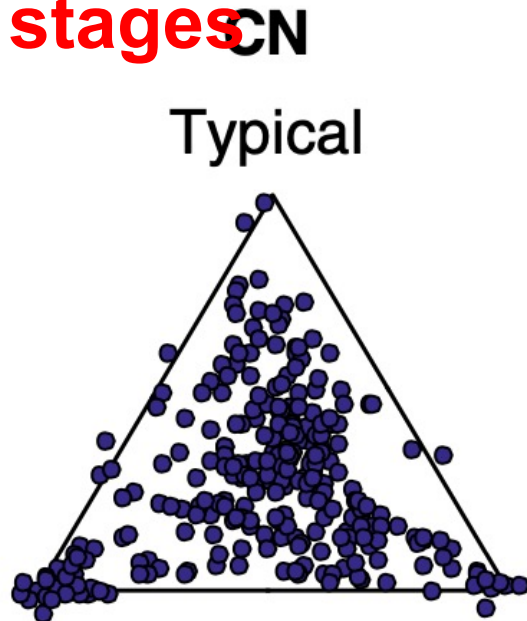
b



Subtype and Stage Inference in sporadic AD

Typical (CVS=0.97, $f=0.35$)

b Some individuals strongly identify with subtypes from early stages



Cortical Subcortical

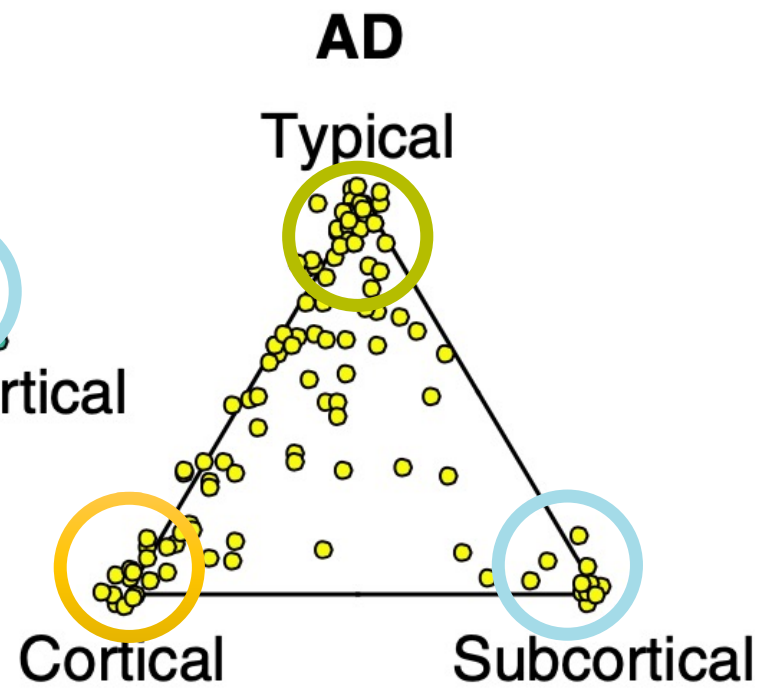
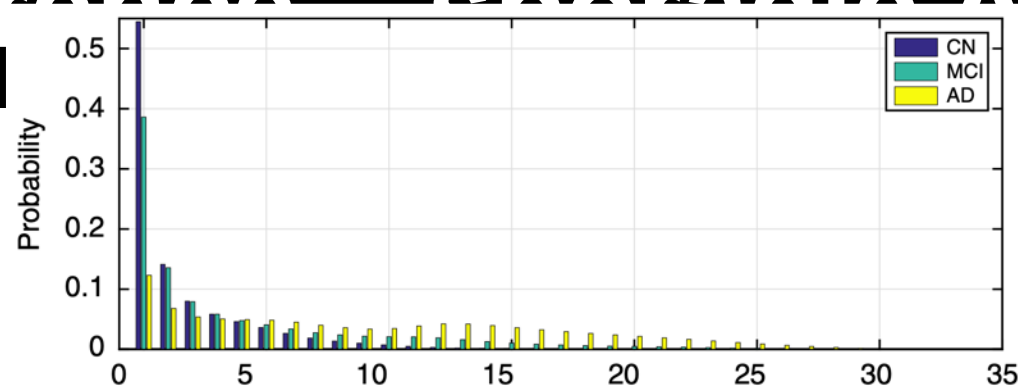
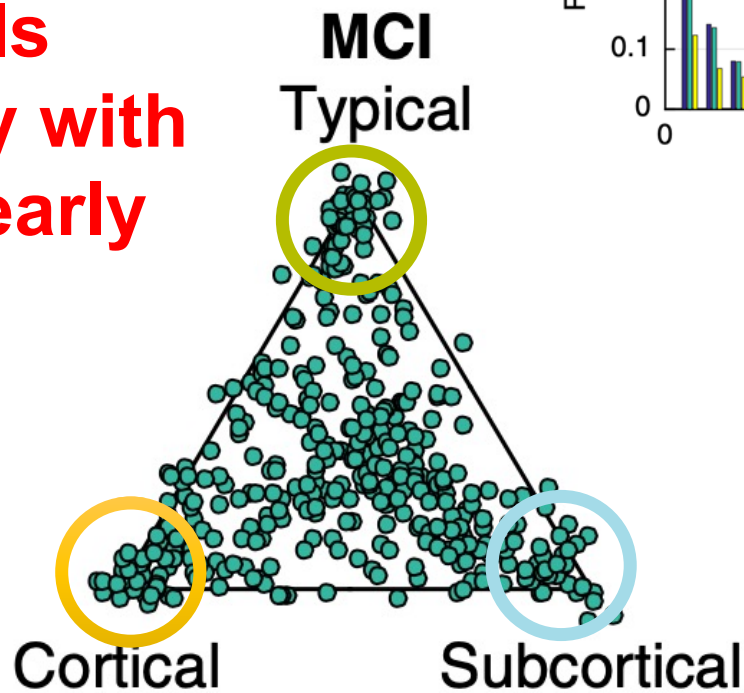
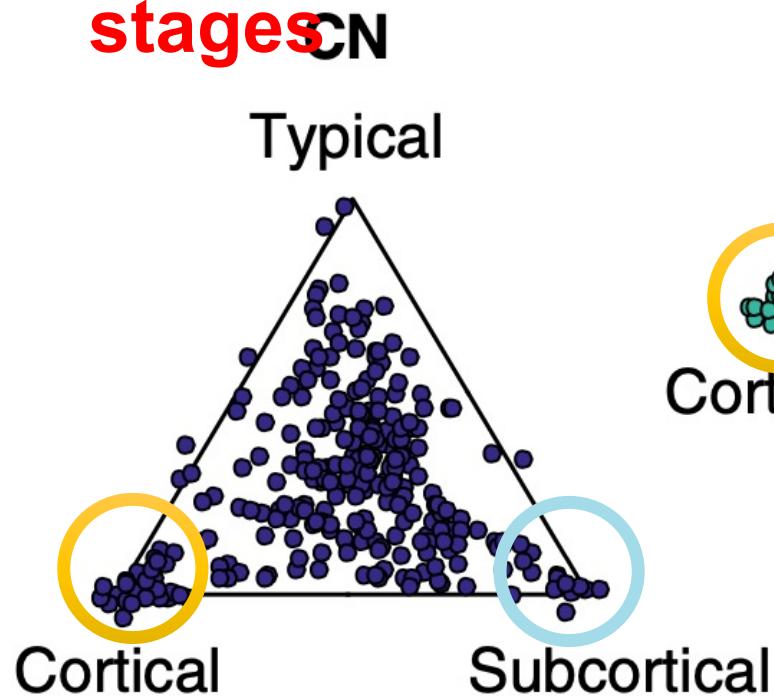
Cortical Subcortical



Subtype and Stage Inference in Sporadic AD

Typical (CVS=0.97, $f=0.35$)

b Some individuals strongly identify with subtypes from early stages
















Subtype and Stage Inference – further reading

nature
medicine

ARTICLES

<https://doi.org/10.1038/s41591-021-01309-6>

Four distinct trajectories of tau deposition identified in Alzheimer's disease








Jacob W. Vogel ¹✉, Alexandra L. Young², Neil P. Oxtoby ^{3,4}, Ruben Smith ^{5,6}, Rik Ossenkoppele^{5,7}, Olof T. Strandberg⁵, Renaud La Joie ⁸, Leon M. Aksman^{3,9}, Michel J. Grothe ^{10,11}, Yasser Iturria-Medina ¹, the Alzheimer's Disease Neuroimaging Initiative*, Michael J. Pontecorvo ¹², Michael D. Devous ¹², Gil D. Rabinovici ^{8,13}, Daniel C. Alexander ^{3,4}, Chul Hyung Lyoo ¹⁴, Alan C. Evans ¹ and Oskar Hansson ^{5,15} ✉

github.com/ucl-pond/pySuStain

<https://doi.org/10.1038/s41467-021-22265-2>

OPEN

Identifying multiple sclerosis subtypes using unsupervised machine learning and MRI data

Arman Eshaghi ^{1,2}✉, Alexandra L. Young^{2,3}, Peter A. Wijeratne ², Ferran Prados ^{1,2,4}, Douglas L. Arnold⁵, Sridar Narayanan⁵, Charles R. G. Guttmann⁶, Frederik Barkhof ^{1,2,7,8}, Daniel C. Alexander ², Alan J. Thompson ¹, Declan Chard ^{1,9,10} & Olga Ciccarelli^{1,9,10}



DOI: 10.1038/s41467-018-05892-0

OPEN

Uncovering the heterogeneity and temporal complexity of neurodegenerative diseases with Subtype and Stage Inference

Alexandra L Young  et al.[#]

Applications of DPM in Clinical trials in Alzheimer's disease

Applications of DPM in Clinical trials in Alzheimer's disease



**SHOW ME
THE DATA!**

Jerry Maguire,
Sony Pictures 1996

Applications of DPM in Clinical trials in Alzheimer's disease

- Event-based model

Oxtoby et al., Frontiers 2022

- Subtype and Stage Inference

Shand et al., AD/PD 2022

MCI clinical trial of Donepezil (& vitamin E)

The NEW ENGLAND
JOURNAL of MEDICINE

ESTABLISHED IN 1812

JUNE 9, 2005

VOL. 352 NO. 23

Vitamin E and Donepezil for the Treatment of Mild Cognitive Impairment

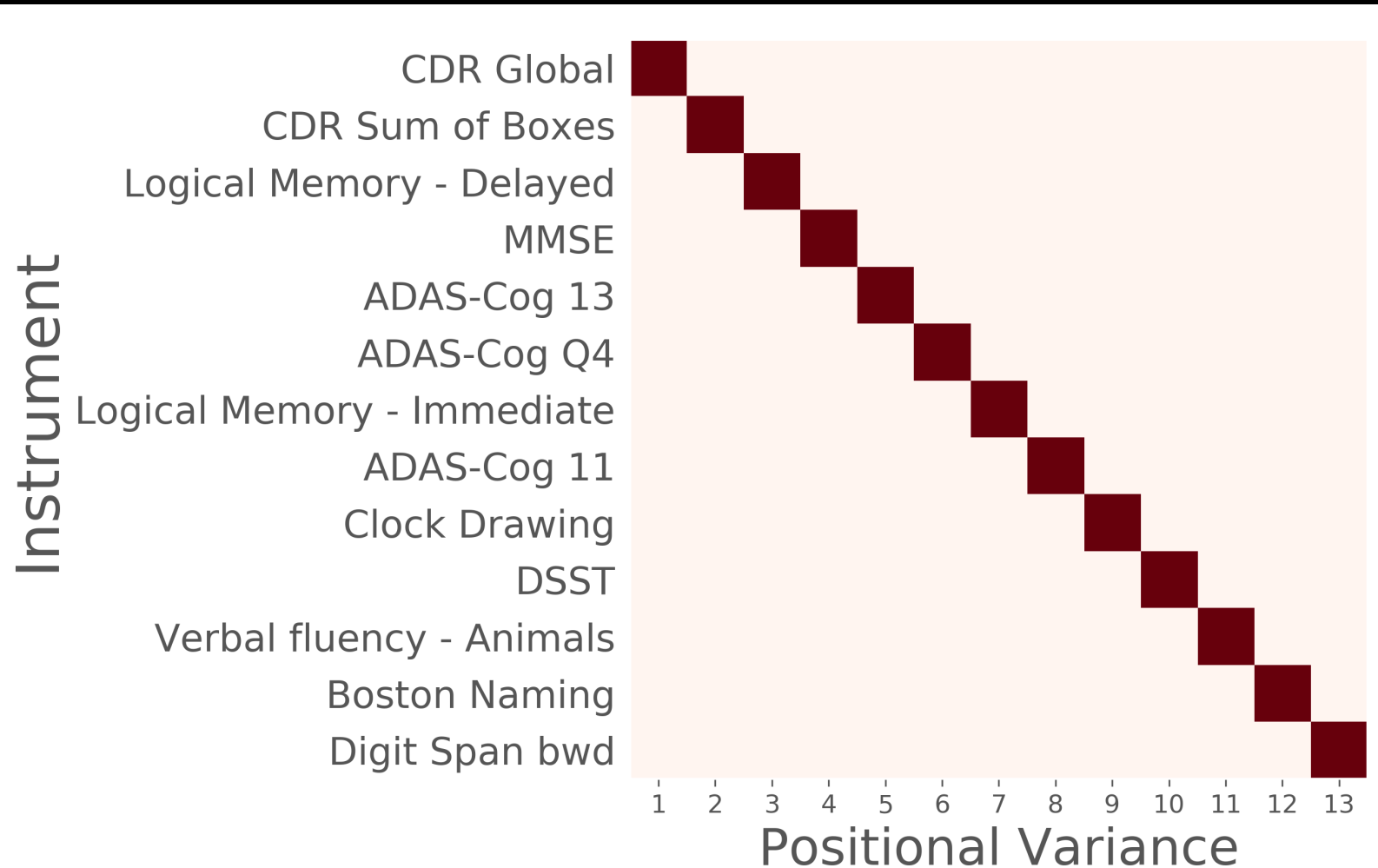
Ronald C. Petersen, Ph.D., M.D., Ronald G. Thomas, Ph.D., Michael Grundman, M.D., M.P.H., David Bennett, M.D., Rachelle Doody, M.D., Ph.D., Steven Ferris, Ph.D., Douglas Galasko, M.D., Shelia Jin, M.D., M.P.H., Jeffrey Kaye, M.D., Allan Levey, M.D., Ph.D., Eric Pfeiffer, M.D., Mary Sano, Ph.D., Christopher H. van Dyck, M.D., and Leon J. Thal, M.D., for the Alzheimer's Disease Cooperative Study Group*



Experiments:

1. Build model (ADNI data)
2. Stage trial data (BL/SC)
3. Stratify
4. Analyse subgroups

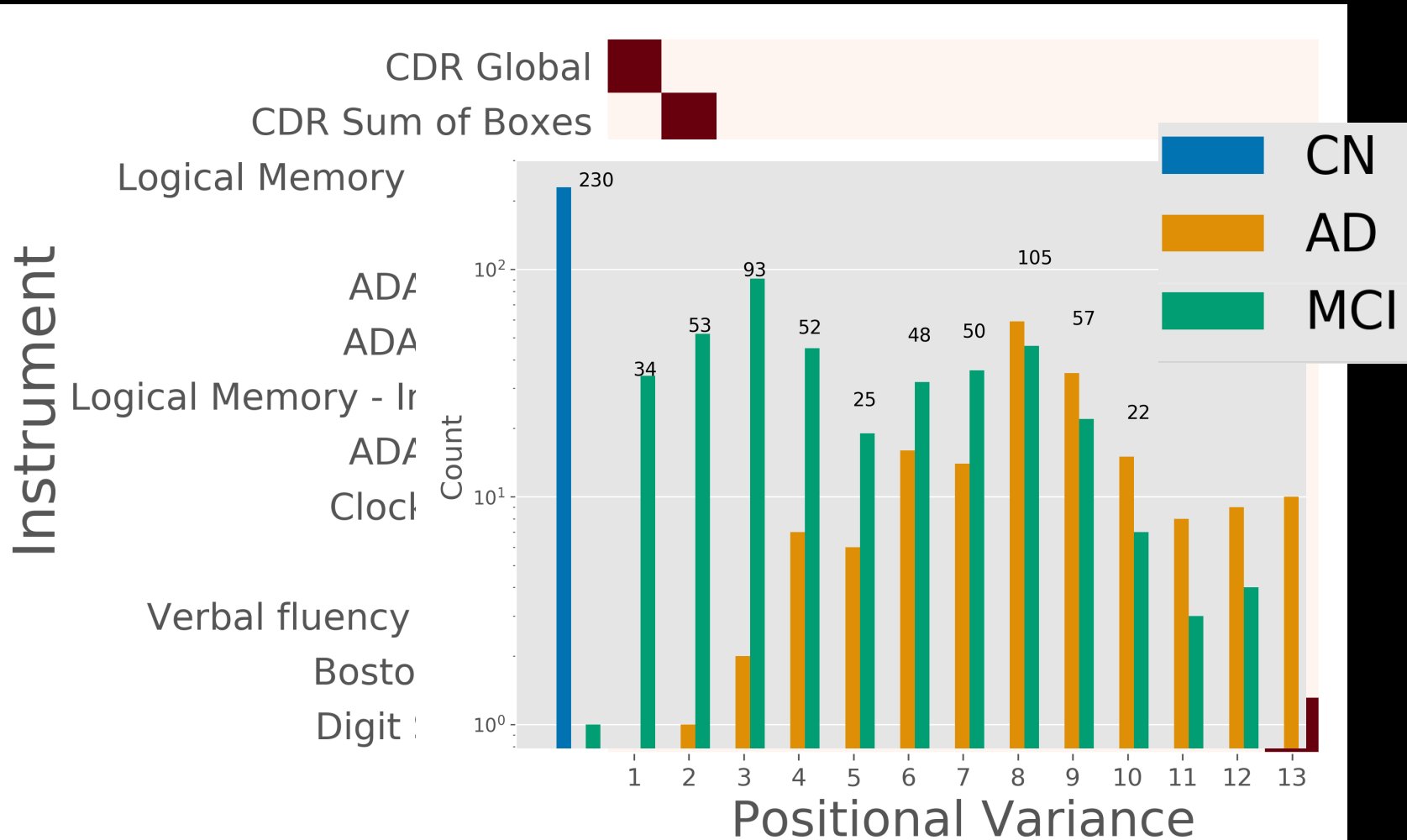
MCI clinical trial of Donepezil (& vitamin E)



Experiments:

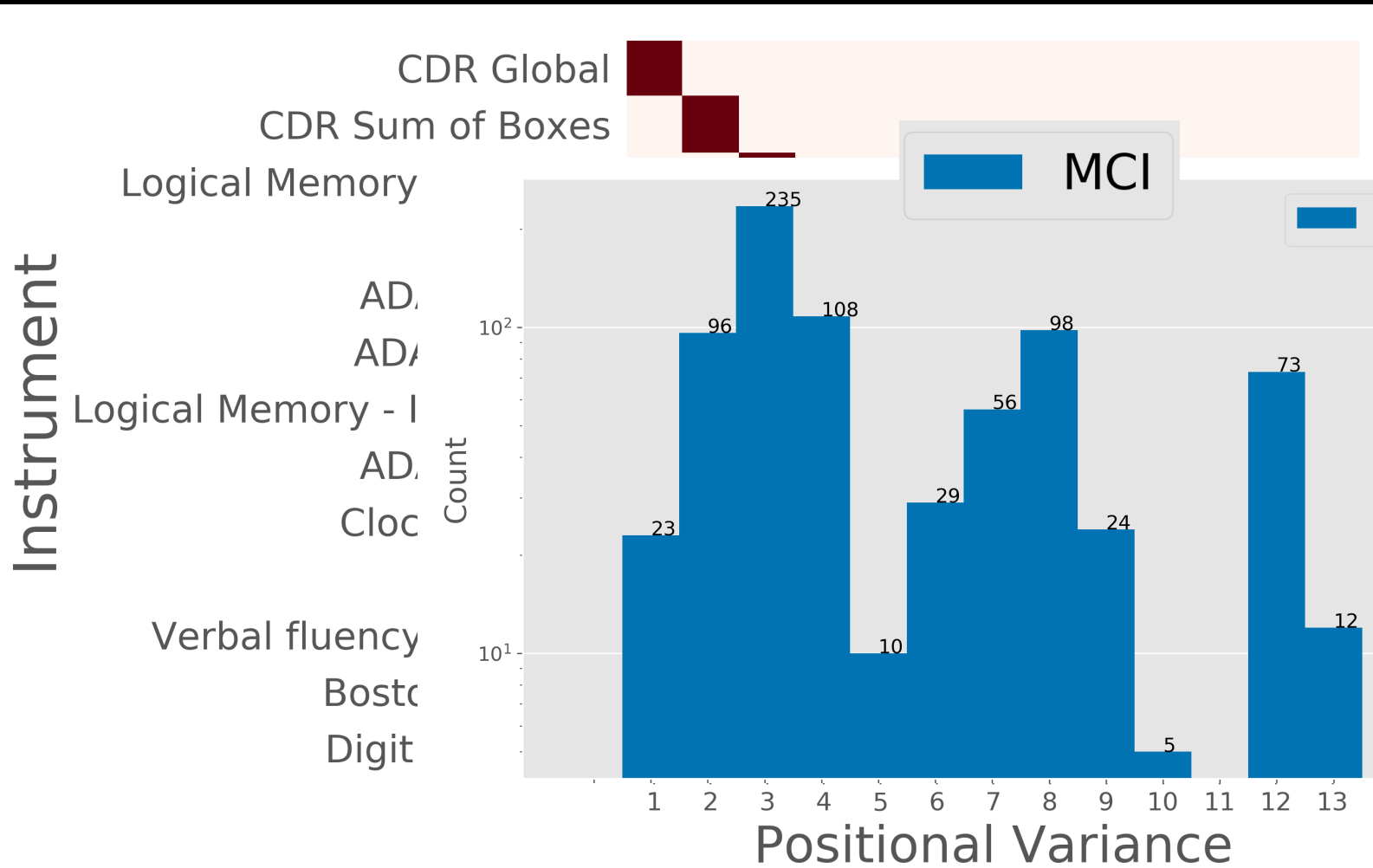
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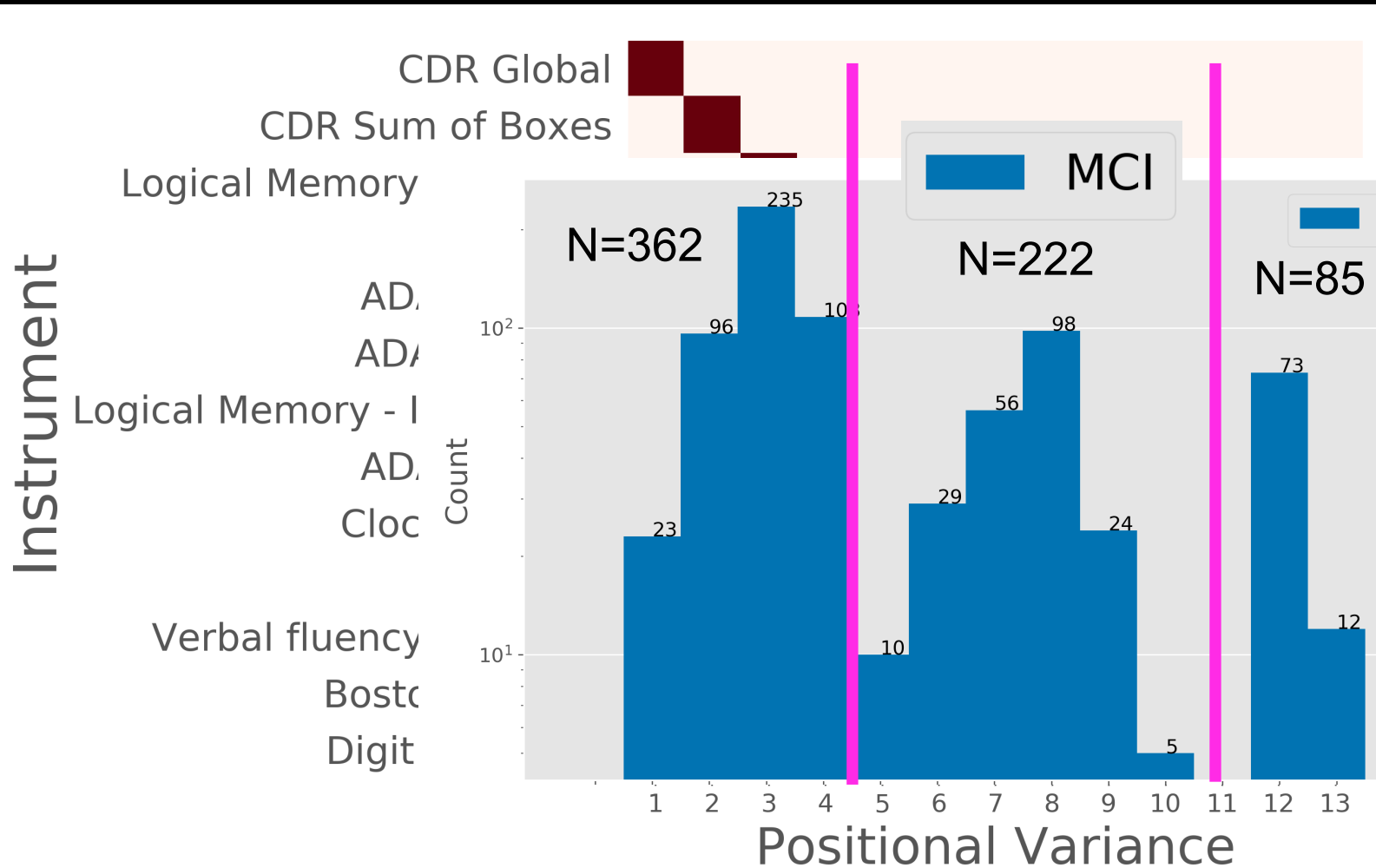
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Experiments:

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MCI clinical trial of Donepezil (& vitamin E)

Table 1. Group differences (Placebo – Treatment) in ADAS-Cog 13 between treatment and placebo (two-sample t test).

* $p < 0.05$

Instrument	Treatment	6mo	12mo	18mo	24mo	30mo	36mo
N=362 SS < 5	Donepezil	-0.14	-0.04	-0.11	-0.29	-0.60	0.32
	Vitamin E	-0.56	-0.71	-0.40	-0.51	-2.11	0.68
N=222 5 ≤ SS ≤ 10	Donepezil	-0.02	-0.77	0.55	-1.05	1.10	0.33
	Vitamin E	-0.51	-1.83	-0.50	0.47	-3.24	-1.48
N=85 SS > 10	Donepezil	1.92	3.71*	0.20	4.34	0.52	6.31*
	Vitamin E	2.81	1.97	1.16	-3.04	-0.24	0.09
All	Donepezil	0.79	0.89	0.46	0.42	-0.45	1.12
	Vitamin E	-0.15	-0.64	-0.22	-0.56	-2.14	0.04

Experiments:

1. Build model (ADNI data)
2. Stage trial data (BL/SC)
3. Stratify
4. Analyse subgroups

FYN trial of ADZ0530

Experiments:

1. Build model (ADNI data)
2. Subtype & Stage trial data (BL/SC)
3. Stratify
4. Analyse subgroups

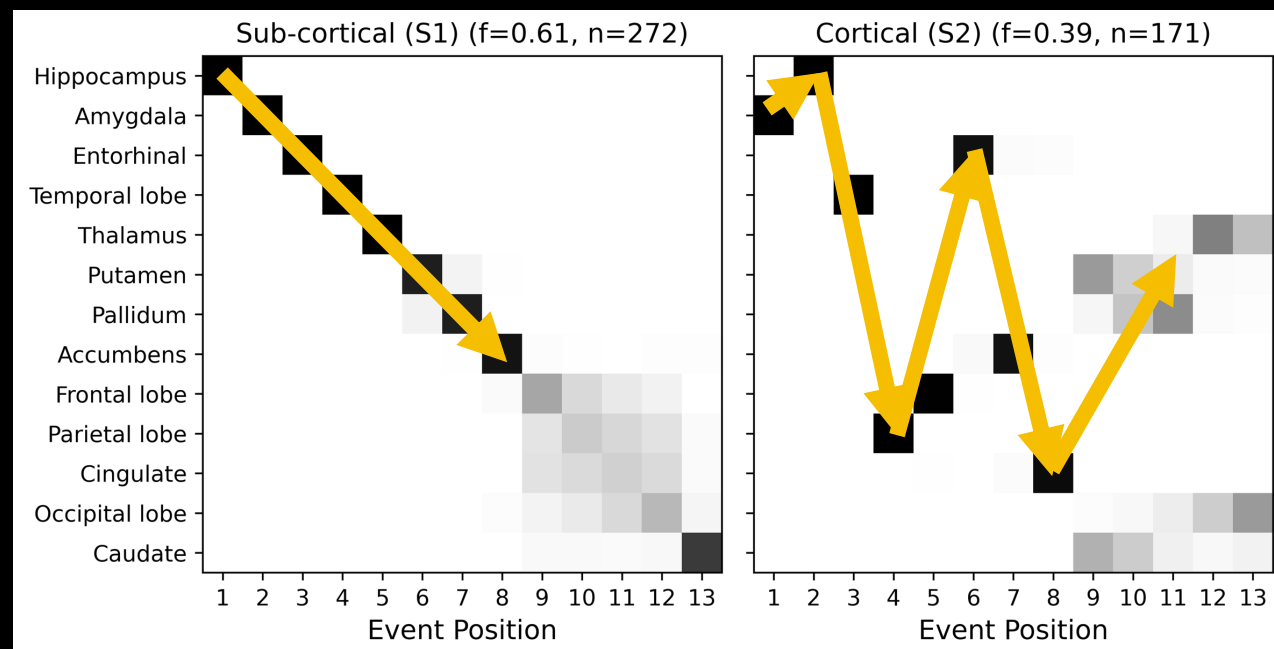


Figure 1: Positional variance diagrams showing disease progression event sequence (intensity indicates sequence positional density)

FYN trial of ADZ0530

Experiments:

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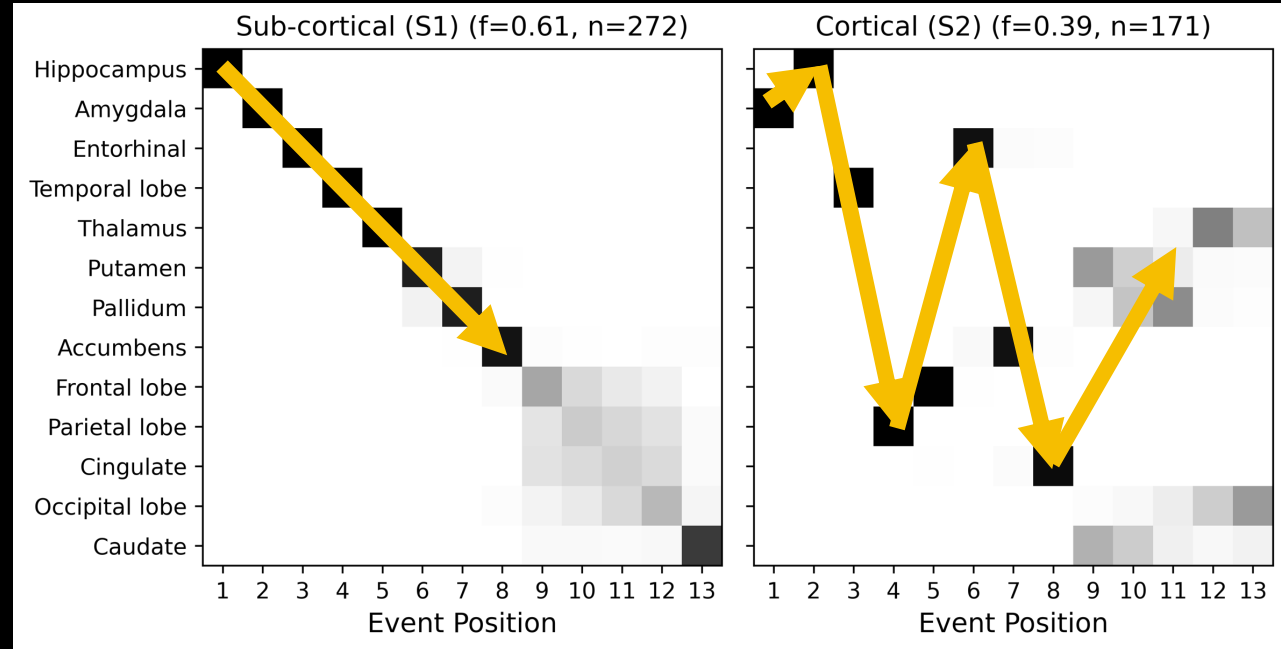


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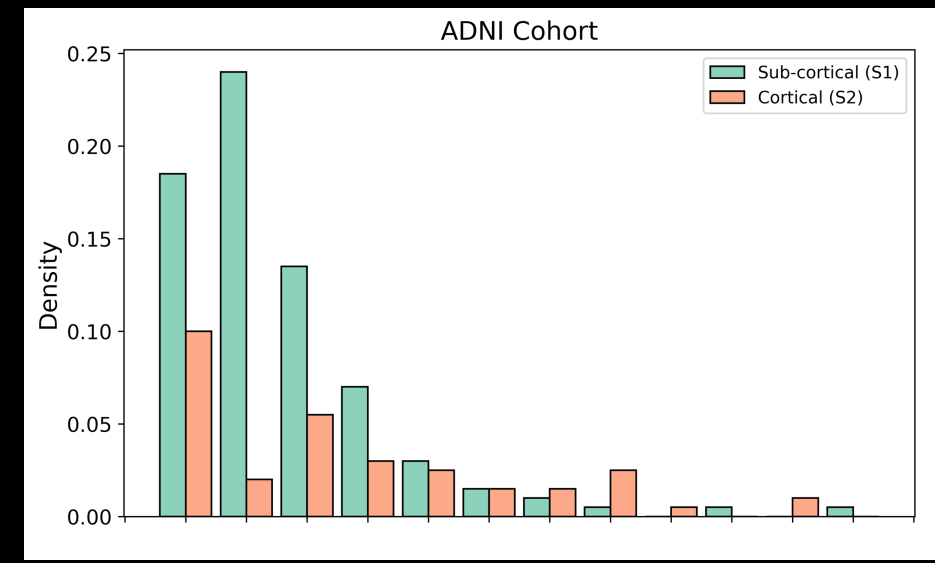


Figure 2: Disease stage histogram in ADNI (top) and FYN (bottom)

FYN trial of ADZ0530

Experiments:

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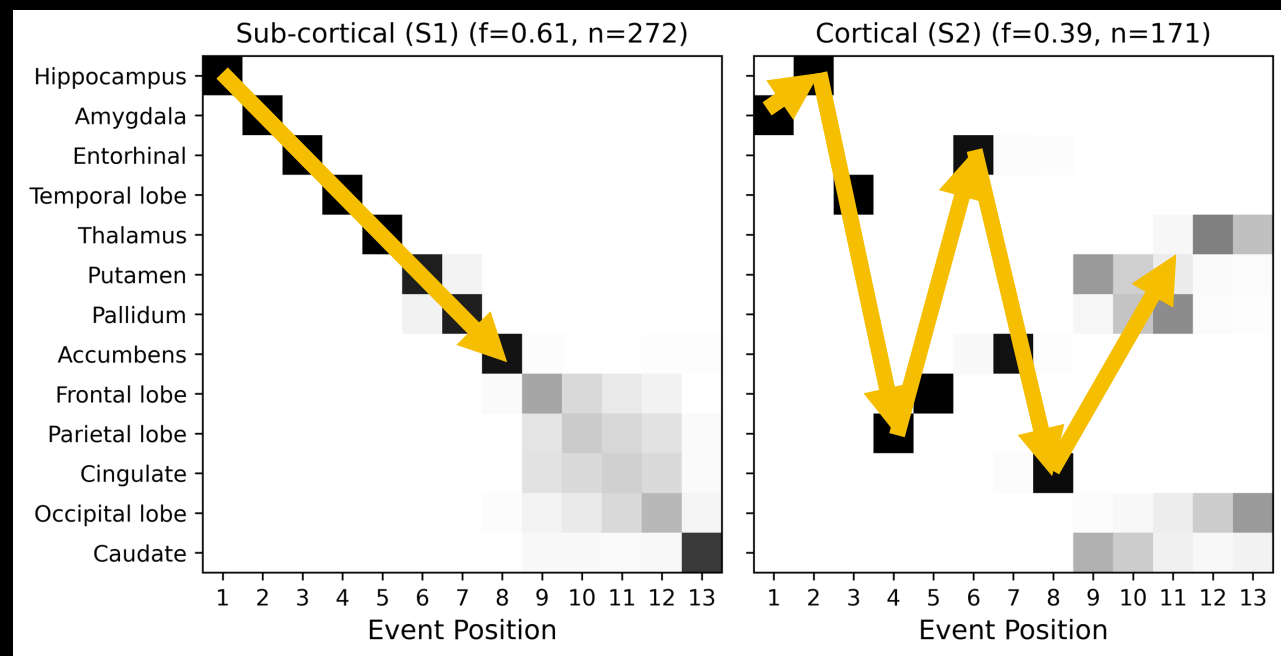


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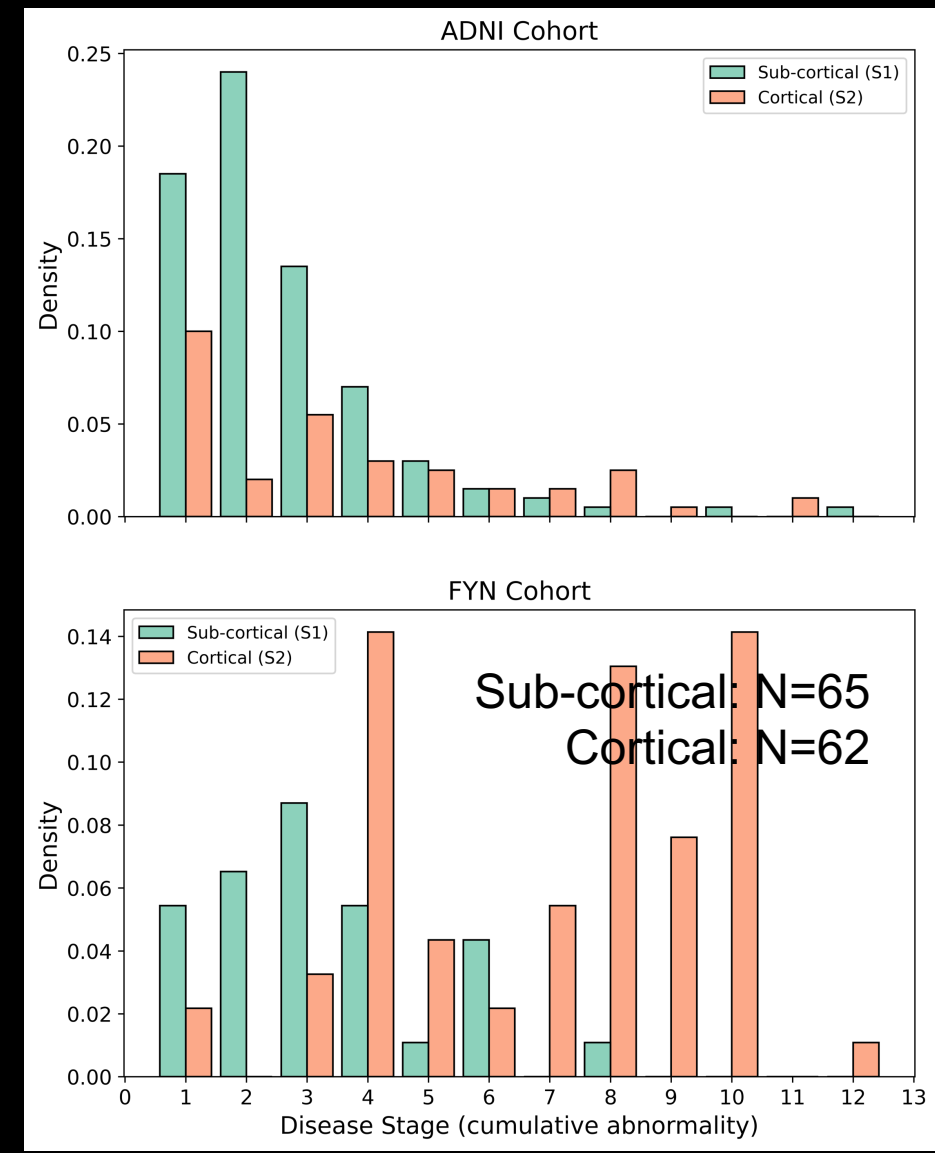


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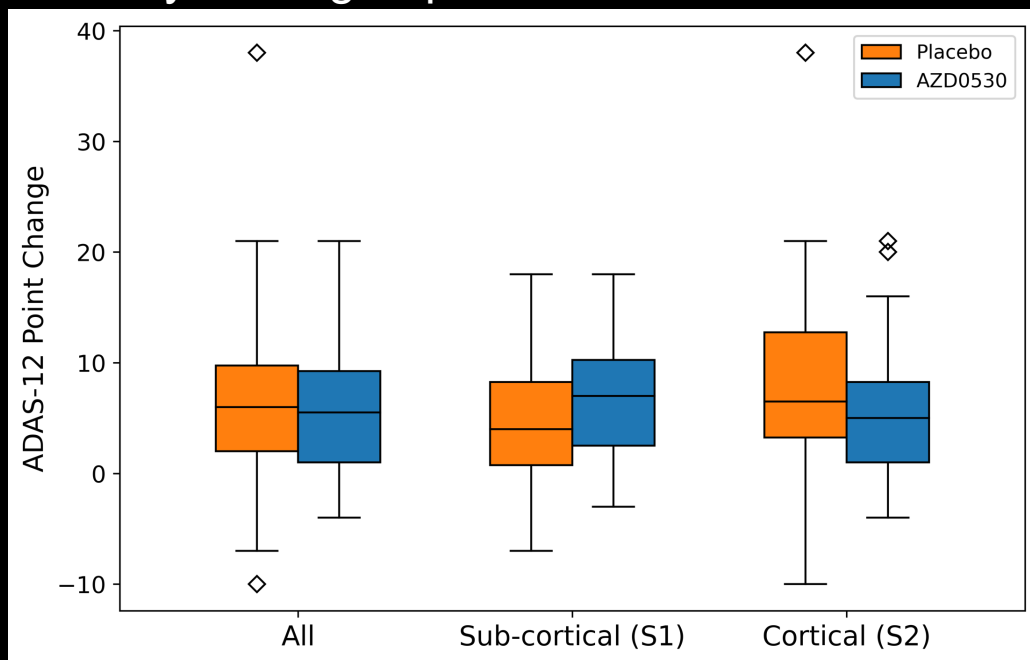


Figure 3: Change in ADAS-Cog 12 scores across 52-week period for whole cohort and two subtypes, separated by trial arm (greater point increase = greater cognitive decline)

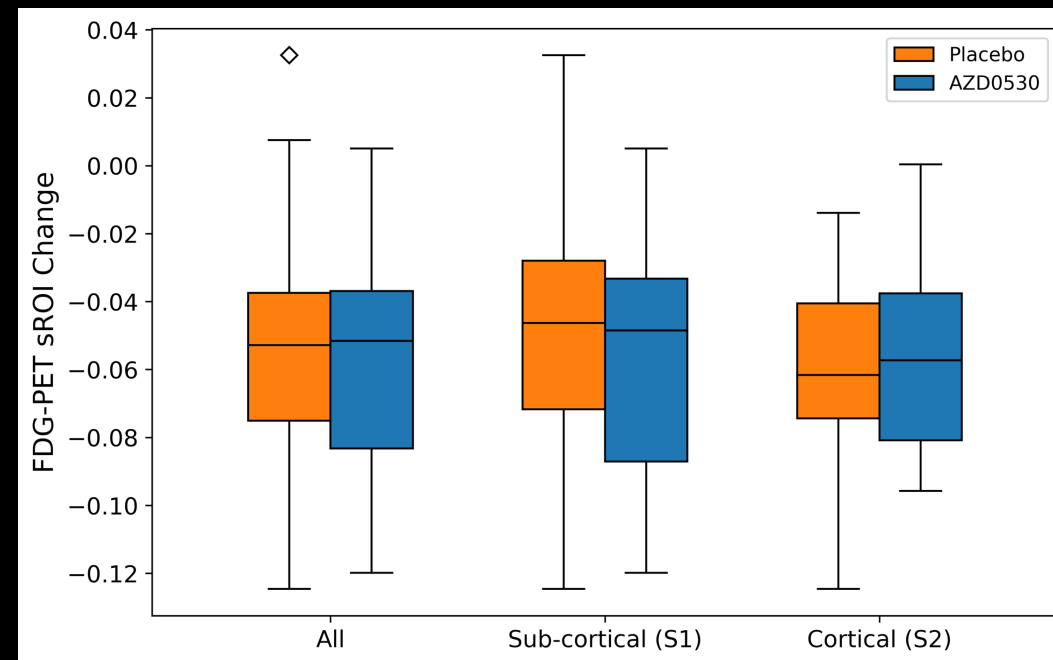


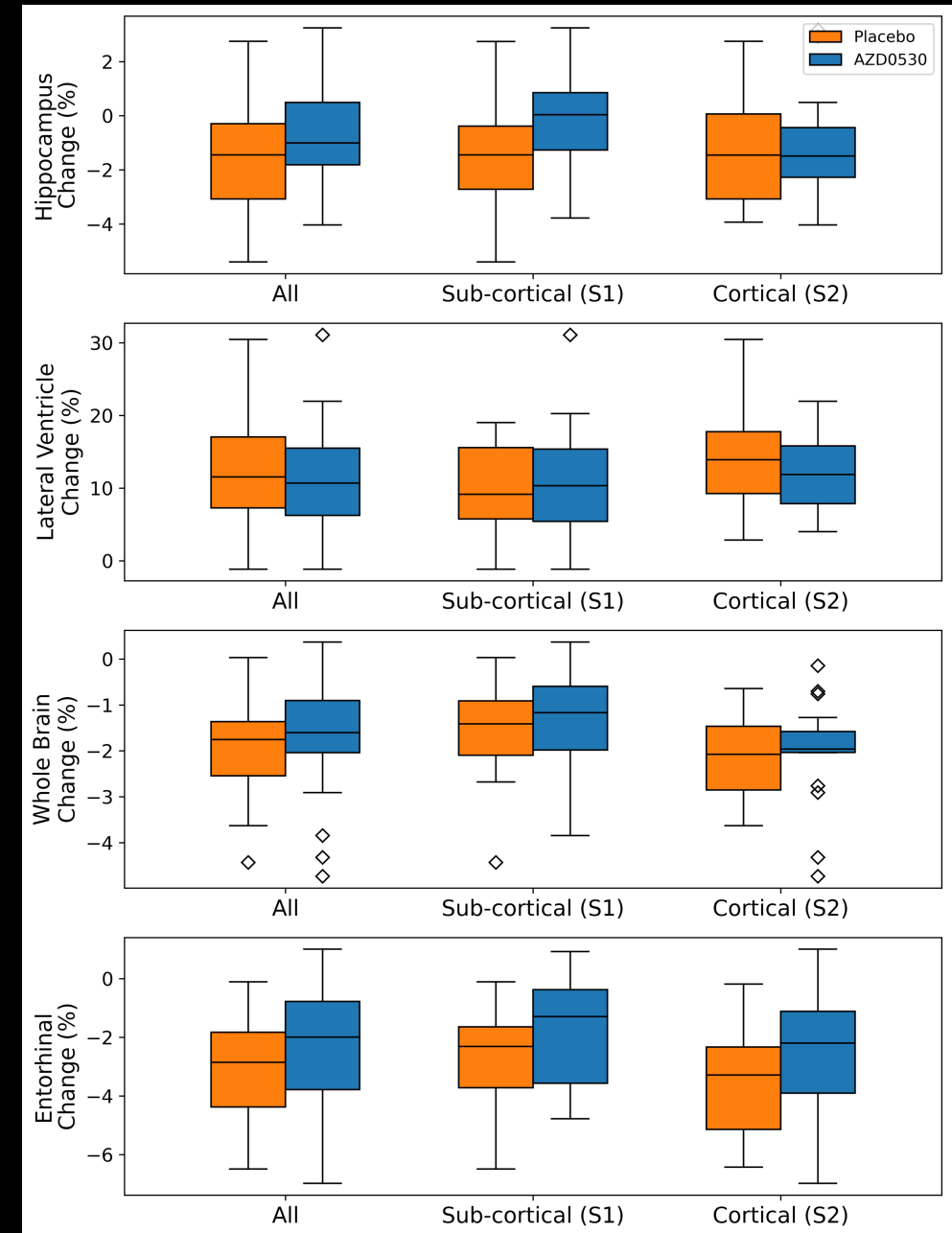
Figure 4: Change in FDG-PET sROI across 52-week period for whole cohort and two subtypes, separated by trial arm (greater sROI decrease = greater neurodegeneration)

FYN trial of ADZ0530

Experiments:

1. Build model (ADNI data)
2. Subtype & Stage trial data (BL/SC)
3. Stratify
4. Analyse subgroups

Figure 5: Percentage change in regional volumes across 52-week period for whole cohort and two subtypes, separated by trial arm

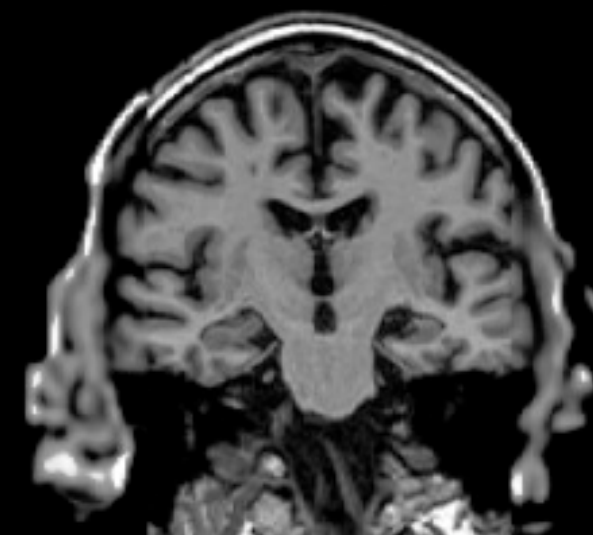
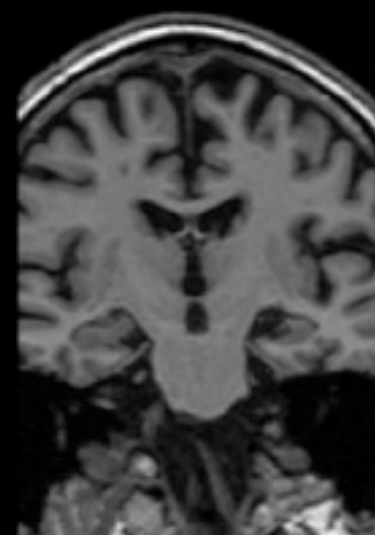


Take home messages

- Alzheimer's disease is a heterogeneous mystery
- Disease Progression Modelling can help to unravel the mystery
- DPM produces quantitative templates of AD progression that can enrich clinical trials to find *the right patients at the right time*

Healthcare?

- Local memory clinic in England
- T2w MRI used for routine care
- T1w MRI cropped!





My quest for supermodels and drugs

Neil Oxtoby

**Thanks to all research participants, their families, and my colleagues,
in particular those in POND developing supermodels.**