

Towards precision medicine in mental health from a life-span perspective

Session 4: Developing and Advancing Phenotyping and Biomarker Discovery to Enable Patient Stratification

From Molecular Insights to Patient Stratification for Neurological and Psychiatric Disorders: A Workshop
National Academy of Sciences, Engineering and Medicine

10/6/2021

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KING'S
College
LONDON

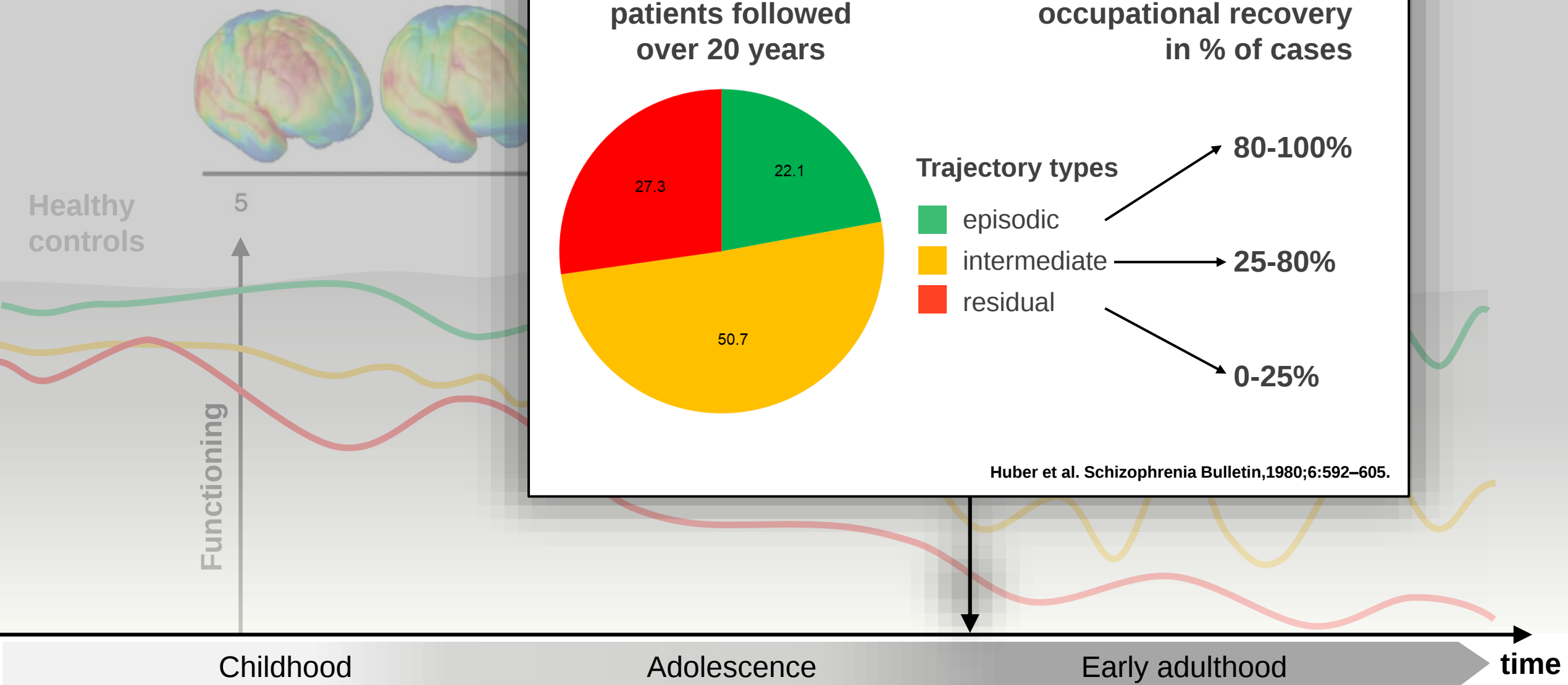


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Ludwig-Maximilian-University | King's College London
Max-Planck Fellowship Group for Precision Psychiatry

The challenge of longitudinal disease heterogeneity

Schizophrenia spectrum, bipolar a



The challenge of longitudinal disease heterogeneity

Schizophrenia



Healthy controls

Functioning

Childhood

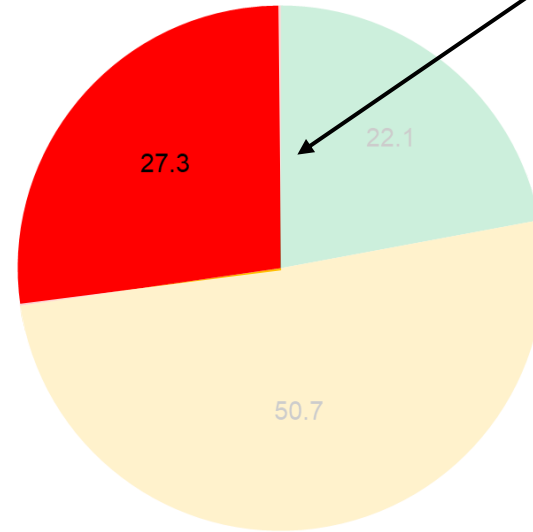
Adolescence

Early adulthood

time

502 first-episode patients followed over 20 years

Neuroprogressive disease pathology?



Trajectory types

episodic

intermediate

residual

80-100%

25-80%

0-25%

Davis et al. Aust N Z J Psychiatry, 2014; 48(6): 512-429
Schnack et al. AJP, 2016; 173(6): 607-616

The challenge of longitudinal disease heterogeneity

Schizophrenia

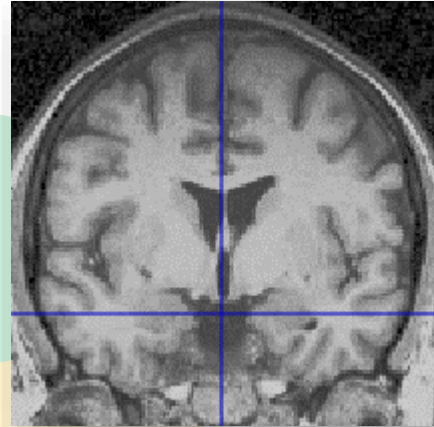


Functioning

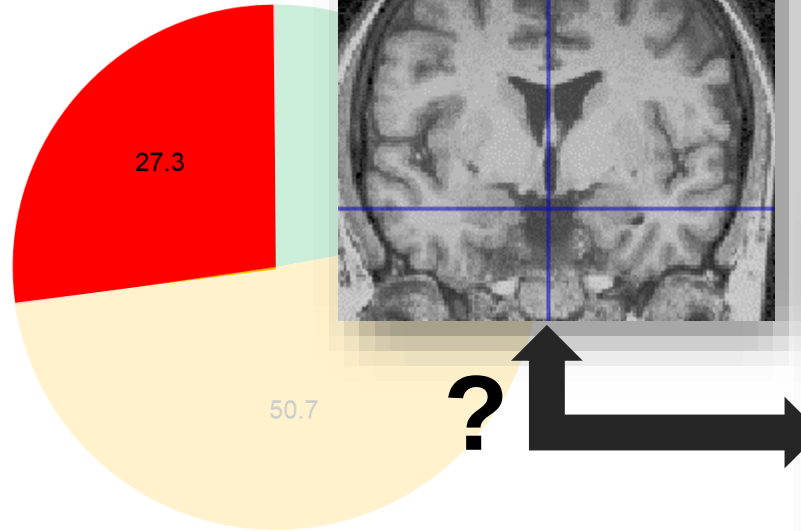
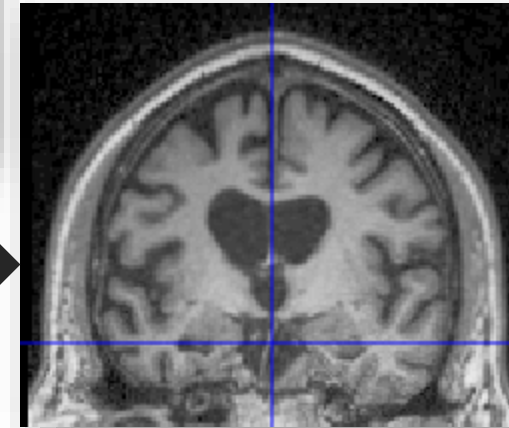
Healthy controls

5

Schizophrenia /
Dementia praecox



Behavioural-
variant FTD



Adolescence

Early adulthood

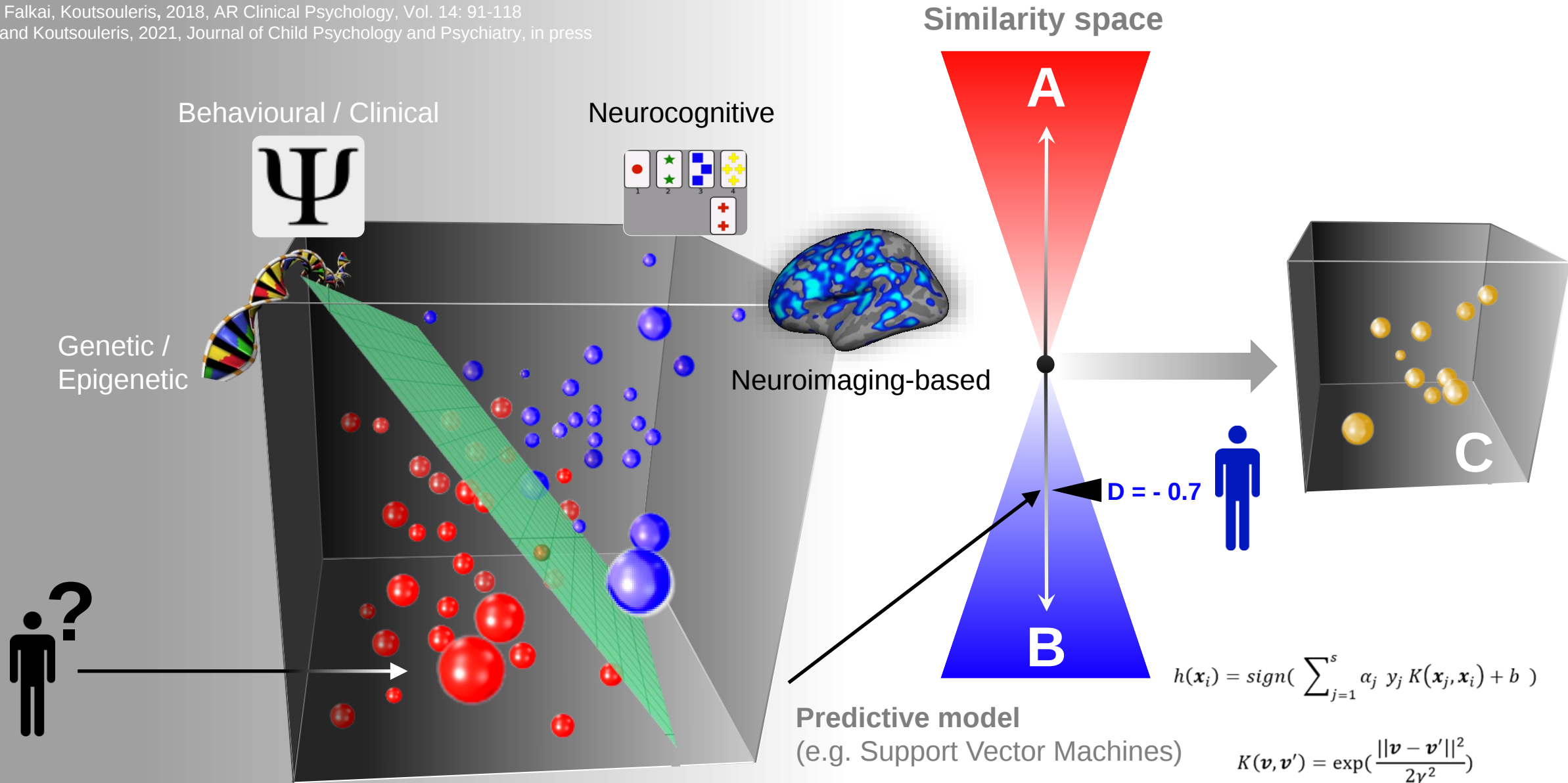
time

Collaboration with M. Schroeter
MPI for Human Cognitive and Brain Sciences,
Leipzig

Understanding heterogeneity

Comparative neuroscience based on supervised machine learning

Dwyer, Falkai, Koutsouleris, 2018, AR Clinical Psychology, Vol. 14: 91-118
Dwyer and Koutsouleris, 2021, Journal of Child Psychology and Psychiatry, in press

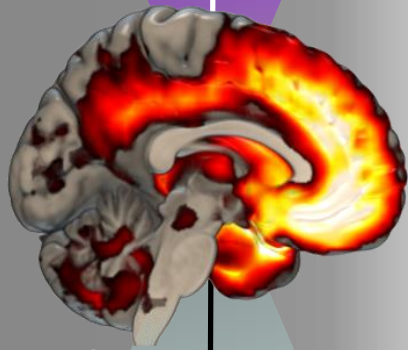


Understanding heterogeneity

Comparative neuroscience strategies crossing the borders between psychiatry and neurology

Trained neuroanatomical
similarity model

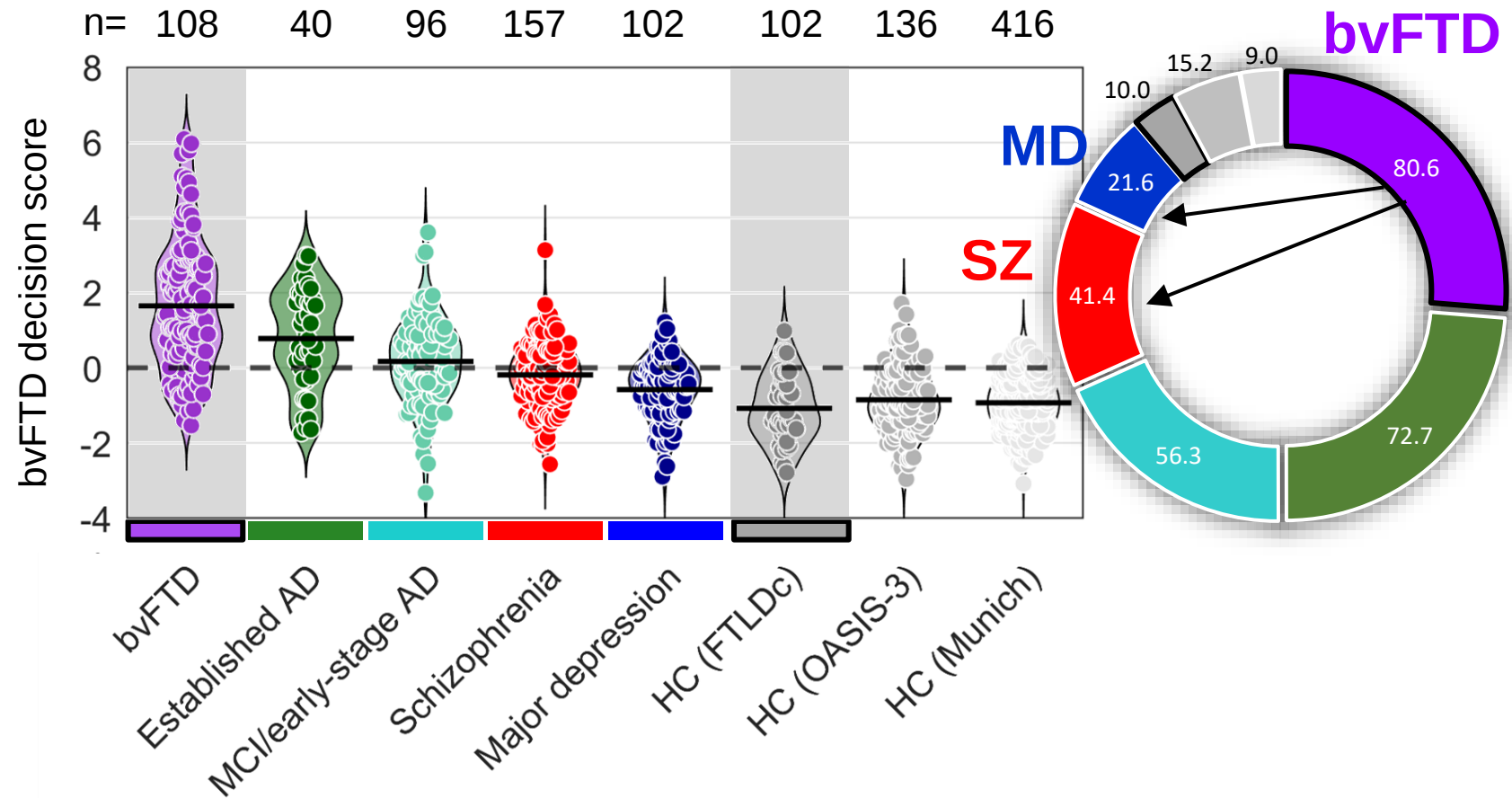
bvFTD



 bvFTD < HC
BAC: 85.3%

HC

sMRI-based bvFTD classifier applied across
different diagnostic cohorts



Koutsouleris et al. 2014, Schizophrenia Bulletin, 40(5): 1140-115

Koutsouleris et al. 2015, Brain, 138(Pt 7): 2059-2073

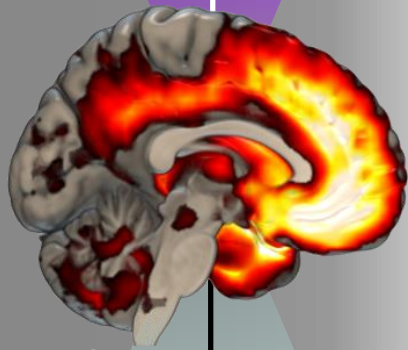
Koutsouleris et al. 2021, under review

Understanding heterogeneity

Comparative neuroscience strategies revealing shared clinical phenotypes between SCZ and bvFTD

Trained neuroanatomical
similarity model

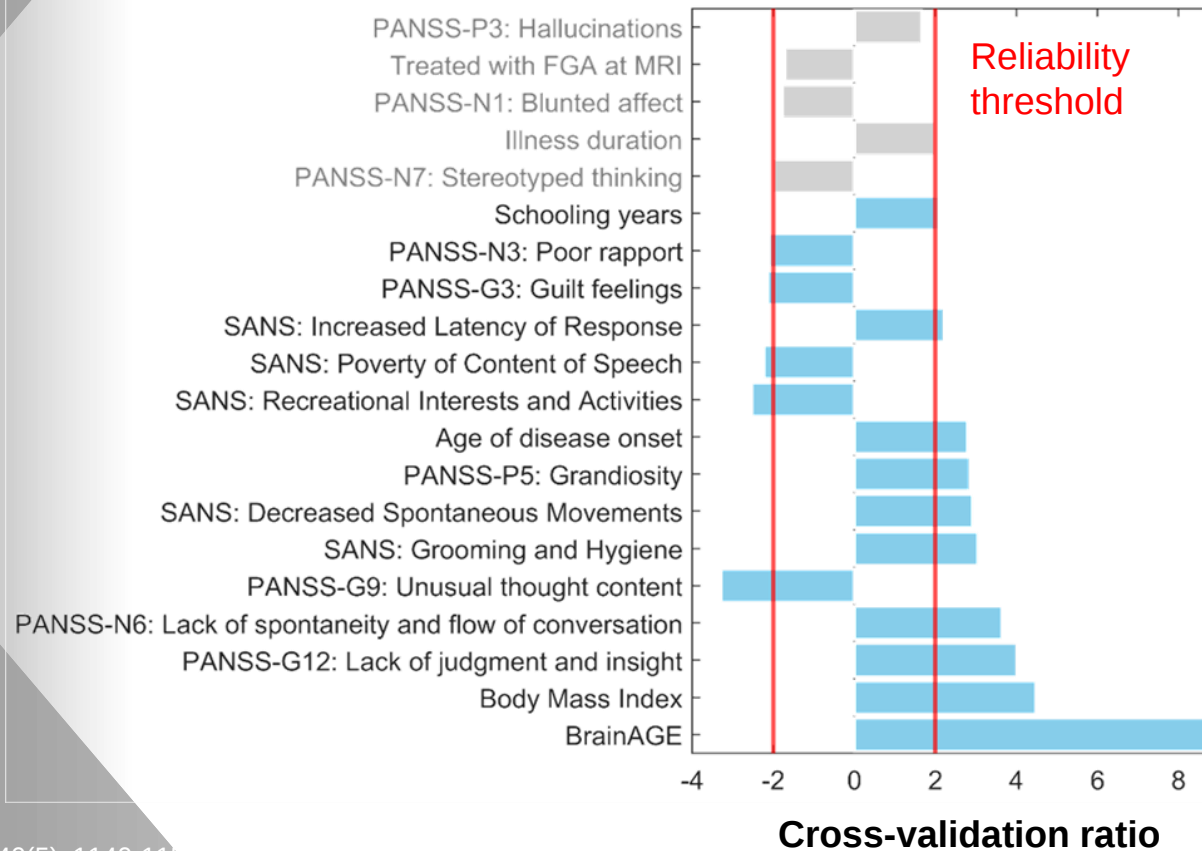
bvFTD



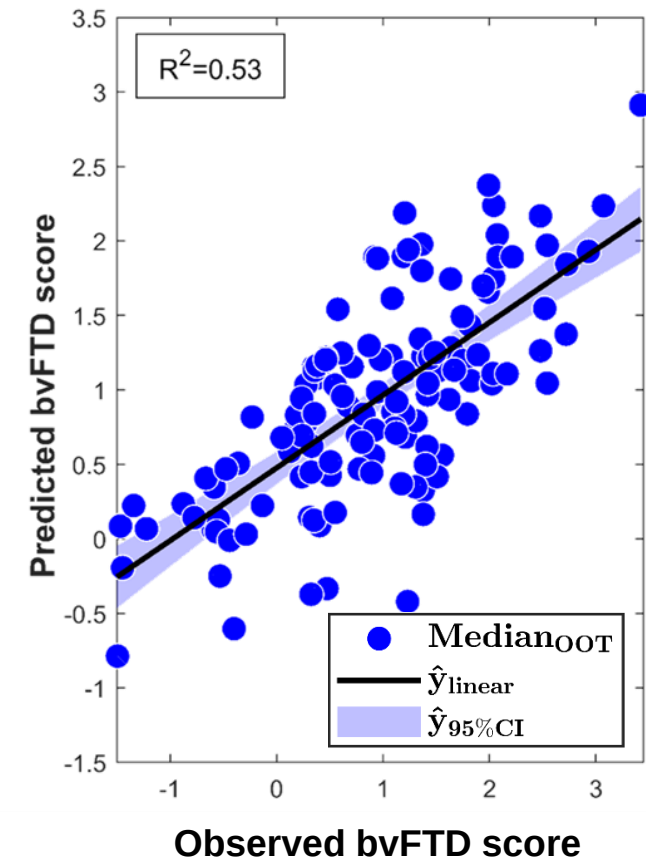
 bvFTD<HC
BAC: 85.3%

HC

Clinical and physical variables
predicting high bvFTD scores in
schizophrenia patients (n=127)



„Mapping accuracy“

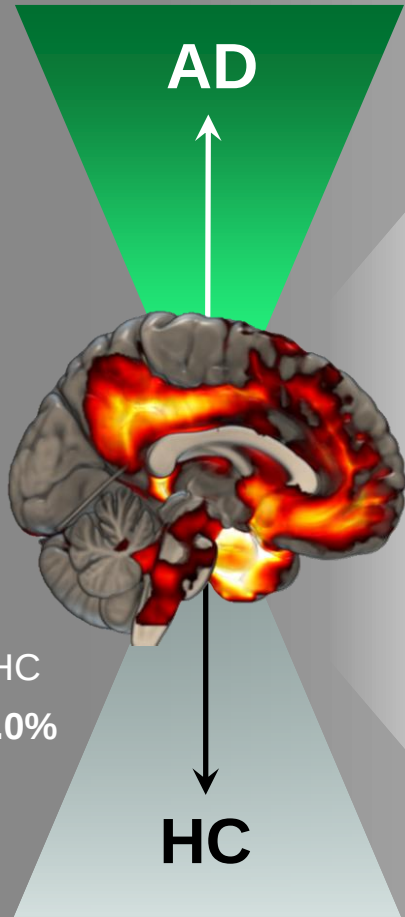


Understanding heterogeneity

Comparative neuroscience strategies showing specific predictability of bvFTD brain patterns in SCZ

Trained neuroanatomical similarity model

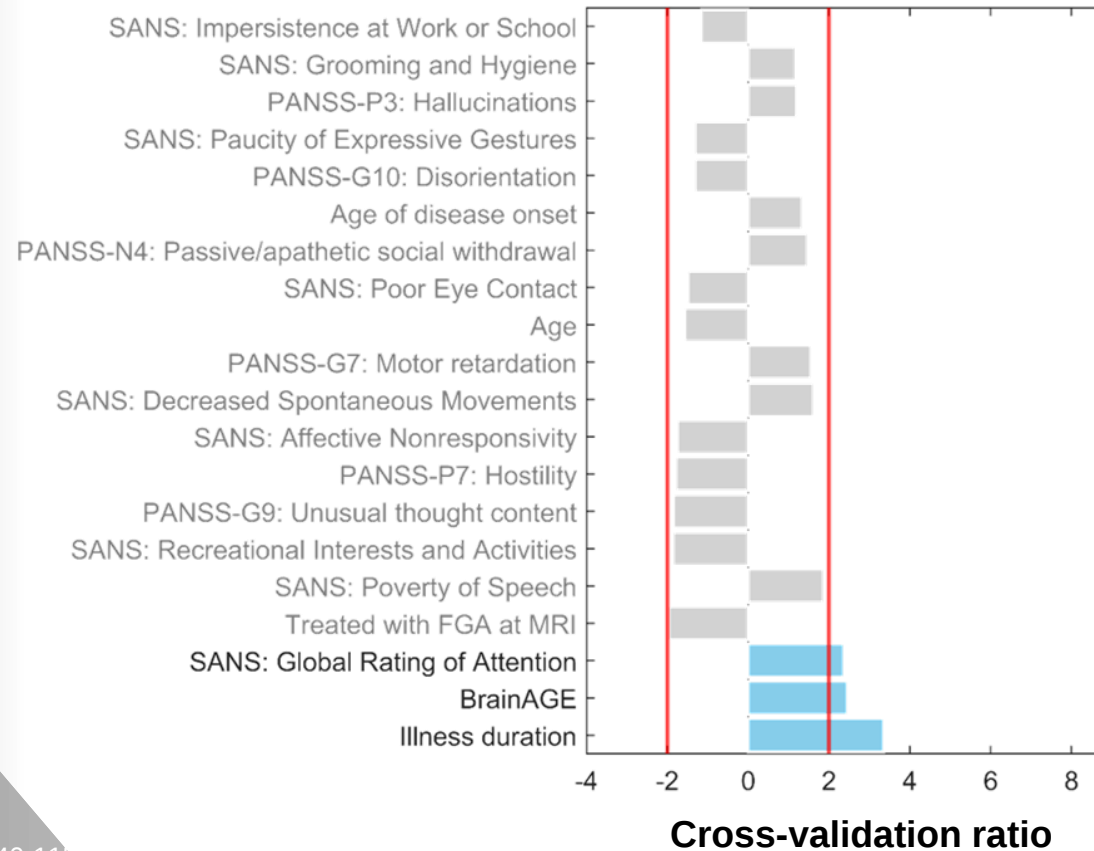
AD



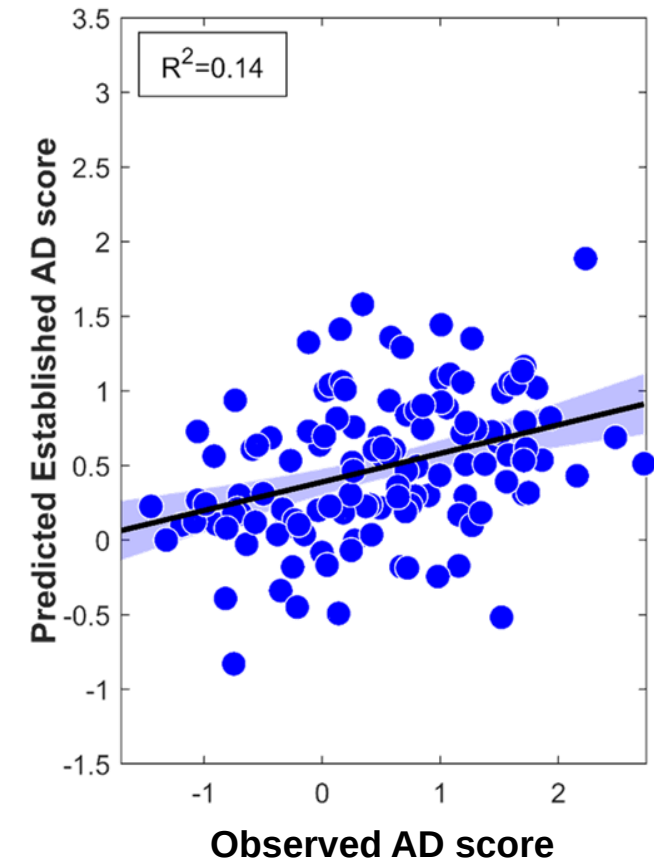
AD<HC
BAC: 86.0%

HC

Clinical and physical variables predicting high AD scores in schizophrenia patients (n=127)



Mapping accuracy

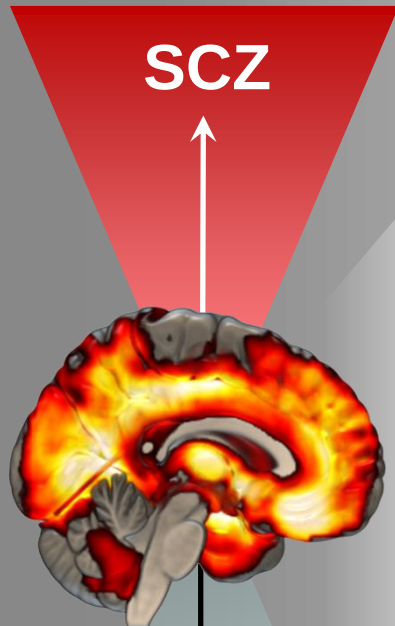


Understanding heterogeneity

Comparative neuroscience strategies showing C9orf72 association of SCZ pattern expression in bvFTD

Trained neuroanatomical
similarity model

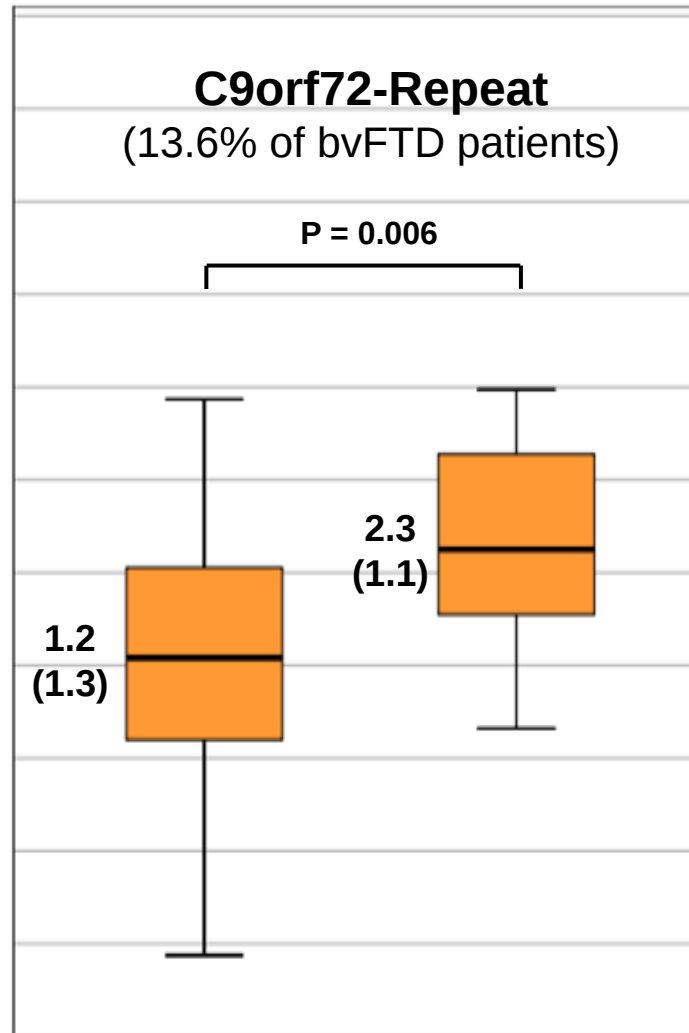
SCZ



SCZ < HC
BAC: 72.0%

HC

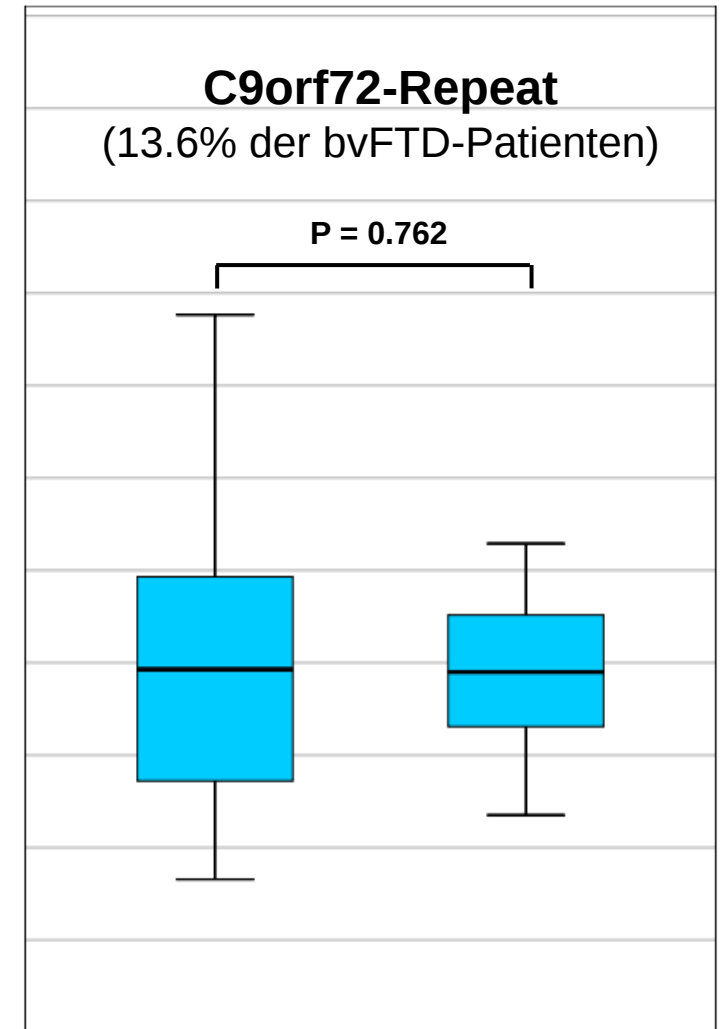
SCZ Score



Non-carriers

Carriers

AD Score

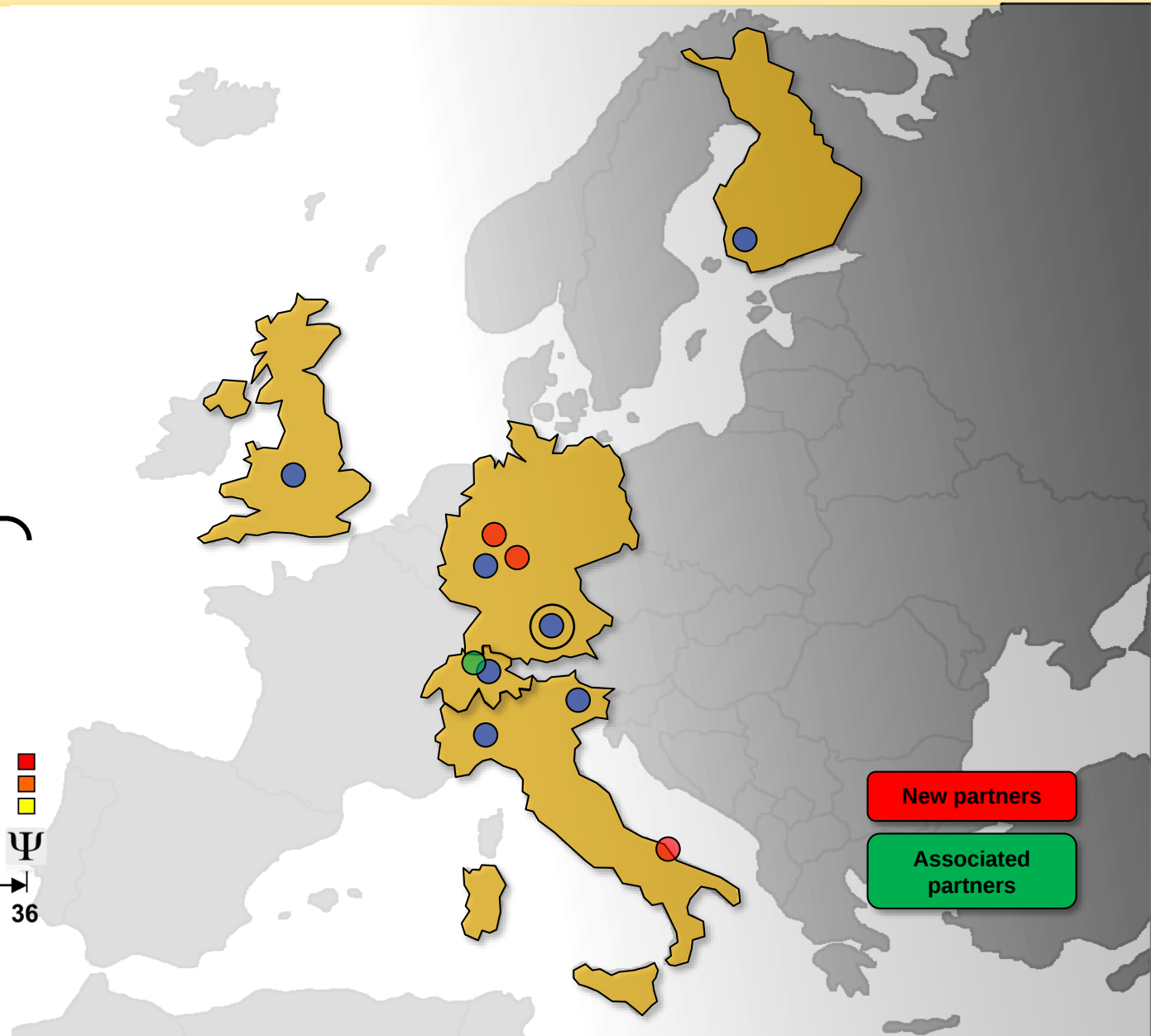
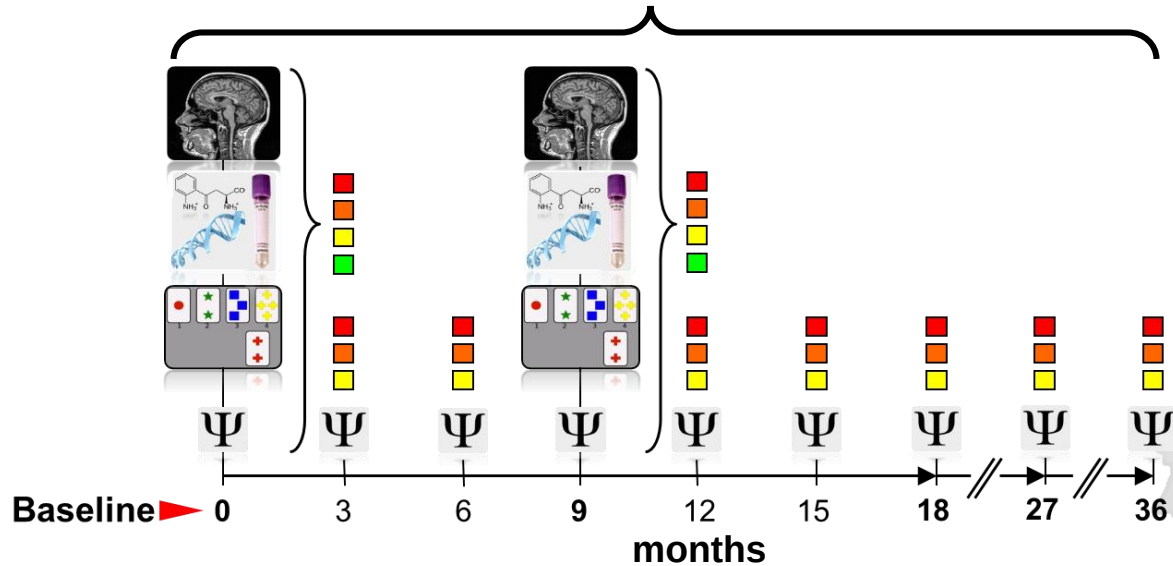
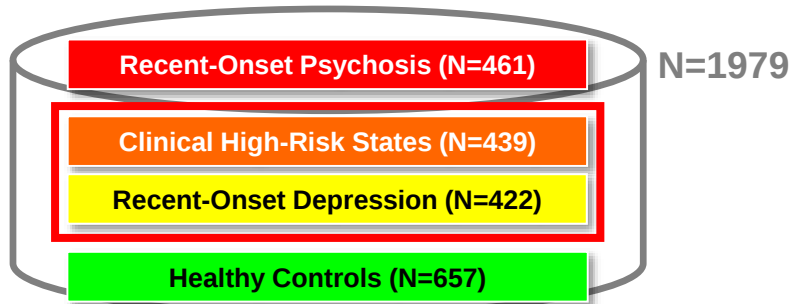


Non-carriers

Carriers

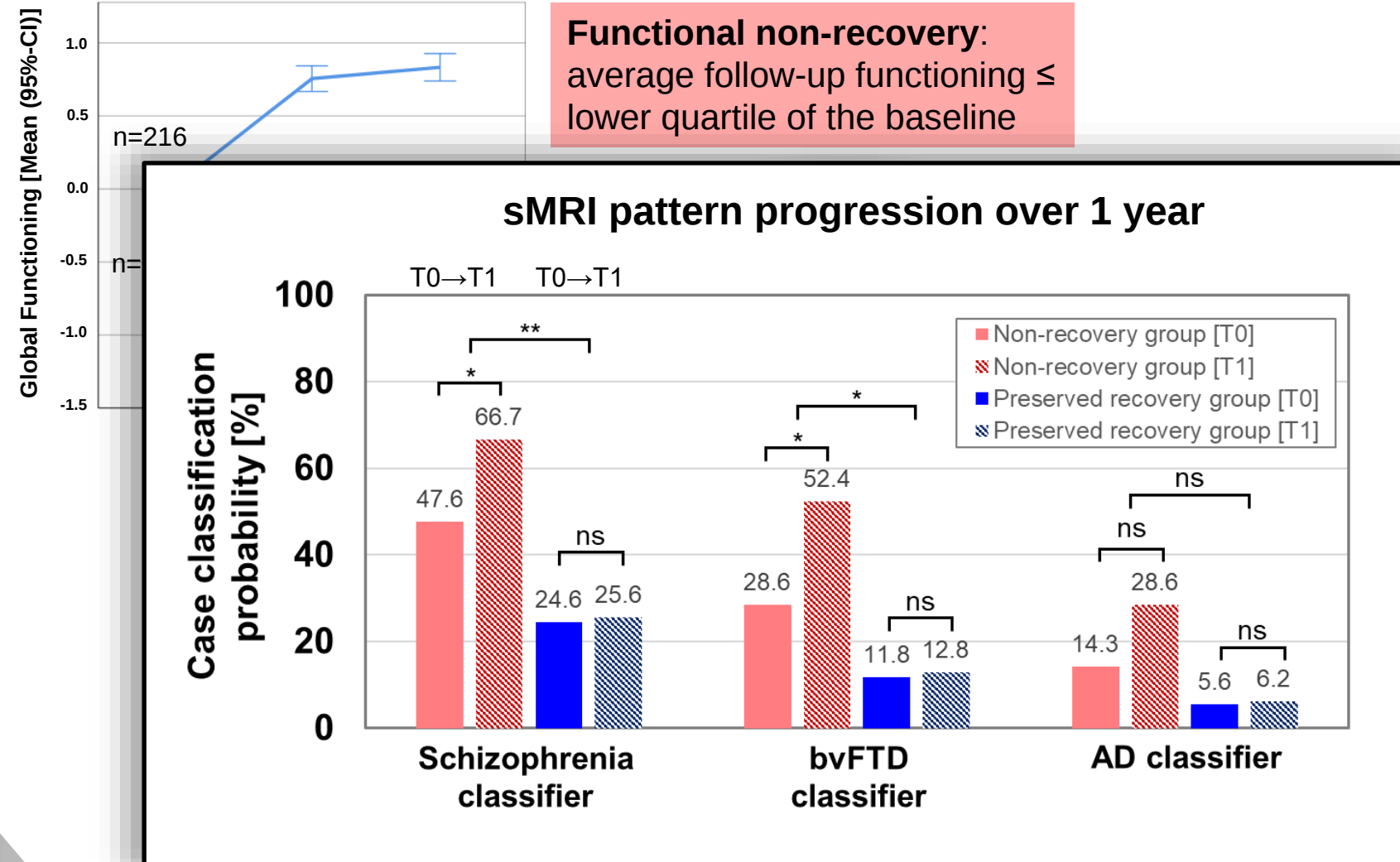
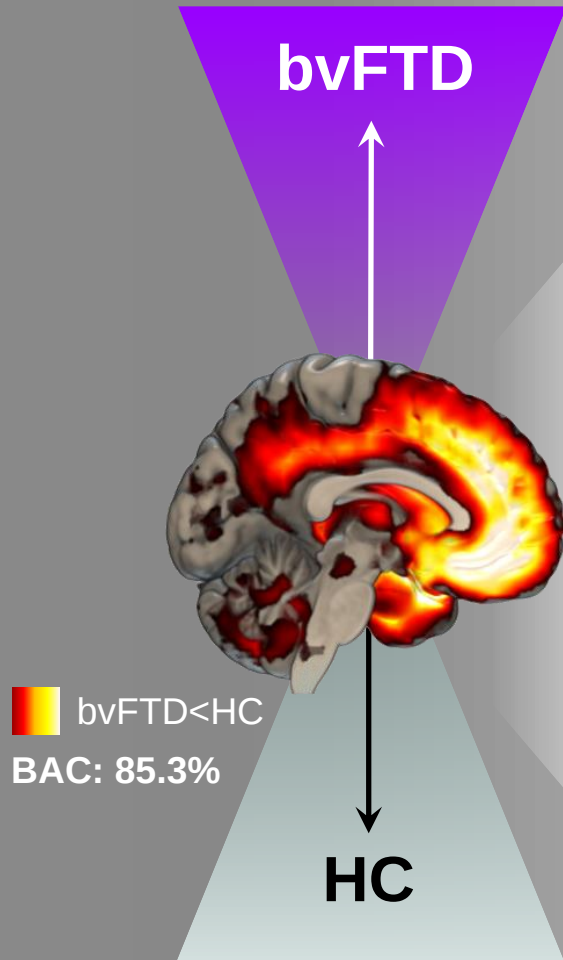
Understanding longitudinal heterogeneity

Can we learn something from these cross-sectional analyses for predicting outcomes?



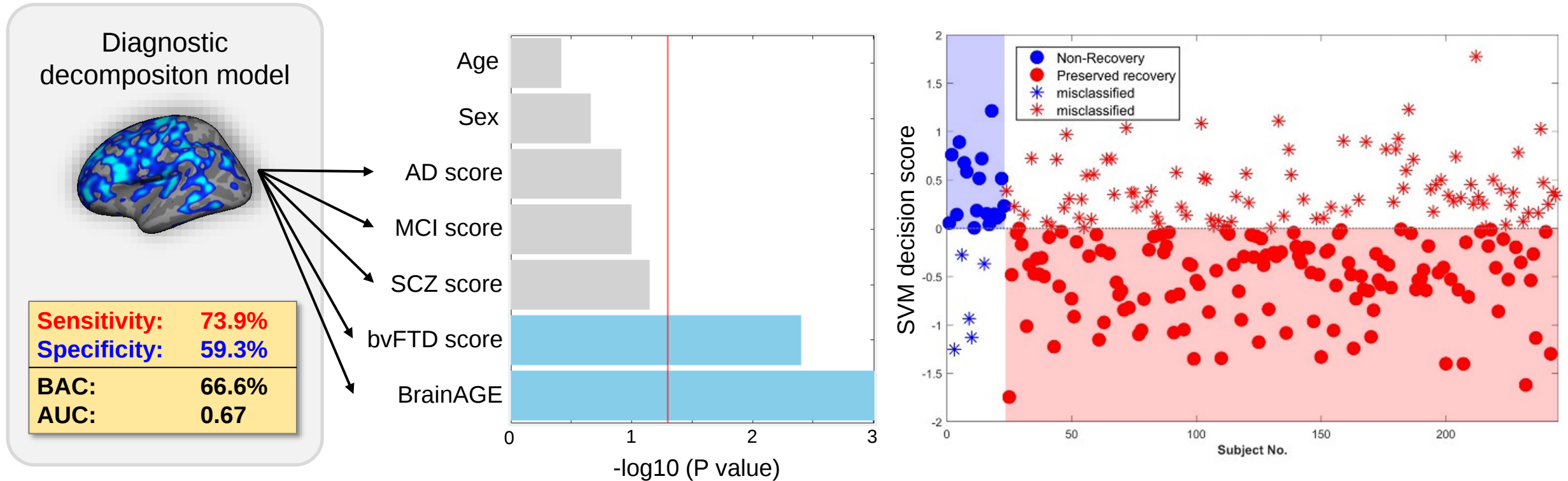
Understanding longitudinal heterogeneity

Testing the neuroprogression hypothesis in early-stage disease samples



From promise to practice

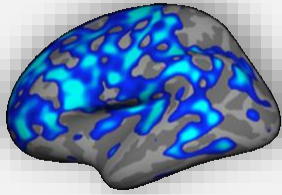
Using diagnostic decompositions to predict **2-years non-recovery courses** in CHR and ROD patients



From promise to practice

Using multiple data domains to predict **2-years non-recovery courses** in CHR and ROD patients

Diagnostic
decomposition model



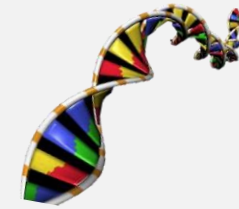
Sensitivity:	73.9%
Specificity:	59.3%
BAC:	66.6%
AUC:	0.67

Clinical-neurocognitive
risk calculator

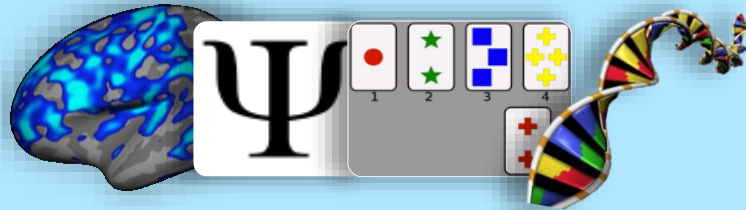


Sensitivity:	69.6%
Specificity:	53.4%
BAC:	61.5%
AUC:	0.64

Poly-PRS-based risk
calculator



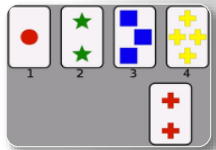
Sensitivity:	77.3%
Specificity:	54.5%
BAC:	65.9%
AUC:	0.71



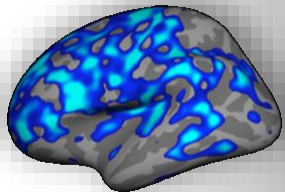
Sensitivity:	69.6%
Specificity:	75.1%
BAC:	72.3%
AUC:	0.78

Toward the real-world implementation of biomarkers

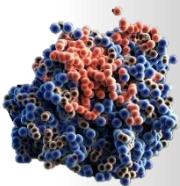

Clinical phenotyping
Digital sensing



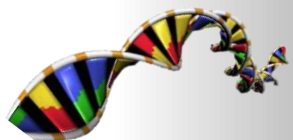
Neurocognition



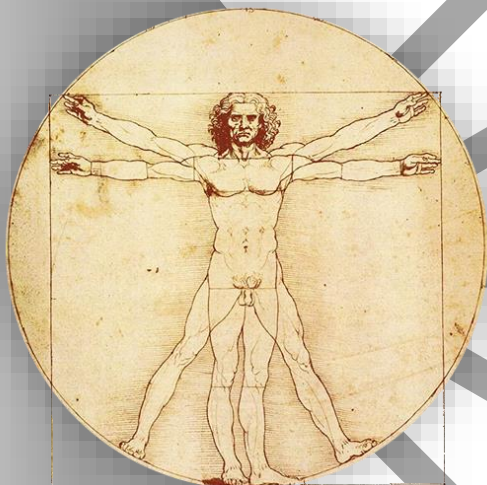
Neuroimaging



Proteomics
Transcriptomics



Genetics



To assess and compare data domains for their diagnostic, prognostic and theragnostic utility.

To test models across different phenotypes, patient populations and disease gradients/stages.

Based on lessons learned, to iteratively refine clinical applications areas for 'algorithmic augmentation'.

To test clinical effectiveness of model-informed treatments in biomarker-stratified clinical trials.

To improve models and treatments via bedside-to-bench and bench-to-beside development cycles.