

# A Tract Density Biomarker for Survival Prediction in Glioblastoma

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# A non-local diffusion magnetic resonance imaging tract density biomarker to stratify, predict, and interpret survival rates in human glioblastoma

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## Abstract

**Background.** Glioblastoma (GBM) is a lethal tumor, actively growing and invading neighboring neural tissue. GBMs appear functionally connected to distributed and spatially distant regions rather than representing an isolated and passive lesion disrupting the brain circuitry. Moreover, increasing evidence suggests that white matter serves as the morphological substrate for GBM to progress and migrate to distant areas in the human brain.

**Methods.** We hypothesized that the subset of white matter tracts intersecting the tumors depicts the physical substrate for large-scale neuron-glioma interactions and would therefore inform prognosis. Using normative models, we design, analyze, interpret, and test a Lesion-Tract Density Index (L-TDI) marker that considers the distributed white matter pathways interacting with the tumor in 2 independent cohorts of  $N = 367$  and  $N = 496$  patients, respectively.

**Results.** First, we show that the tract density within this white matter map robustly stratifies survival rates due to widespread white matter involvement. Second, we demonstrate why tract density-based markers offer critical and necessary insights into the morphology, location, and evolution of human GBM by proving how the proposed L-TDI implicitly considers tumor volume, white matter density, and location. We provide further evidence that the non-uniform distribution of GBMs and their differential prognosis emerge from white matter morphology. Third, we validate the L-TDI marker with multiple Cox survival models and analyze its contribution in relation to other covariates of interest (eg, MGMT promoter methylation). Lastly, by using a simple logistic model, we predict patient death at 12 months with balanced accuracies of 68% and 65%, and areas under the curve of 0.74 and 0.73 when training

## A Normative Human Glioblastoma Connectome Constructed From Tumor Connected Brain Regions Improves Survival Rates Estimation

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## A circuit-based white matter density neuroimaging biomarker to stratify, predict, and interpret survival rates in human glioblastoma

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\*Equal contribution

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## Bayesian Filtered Generation of Post-surgical Brain Connectomes on Tumor Patients

communications biology

Article



<https://doi.org/10.1038/s42003-024-06119-3>

## Functional and structural reorganization in brain tumors: a machine learning approach using desynchronized functional oscillations

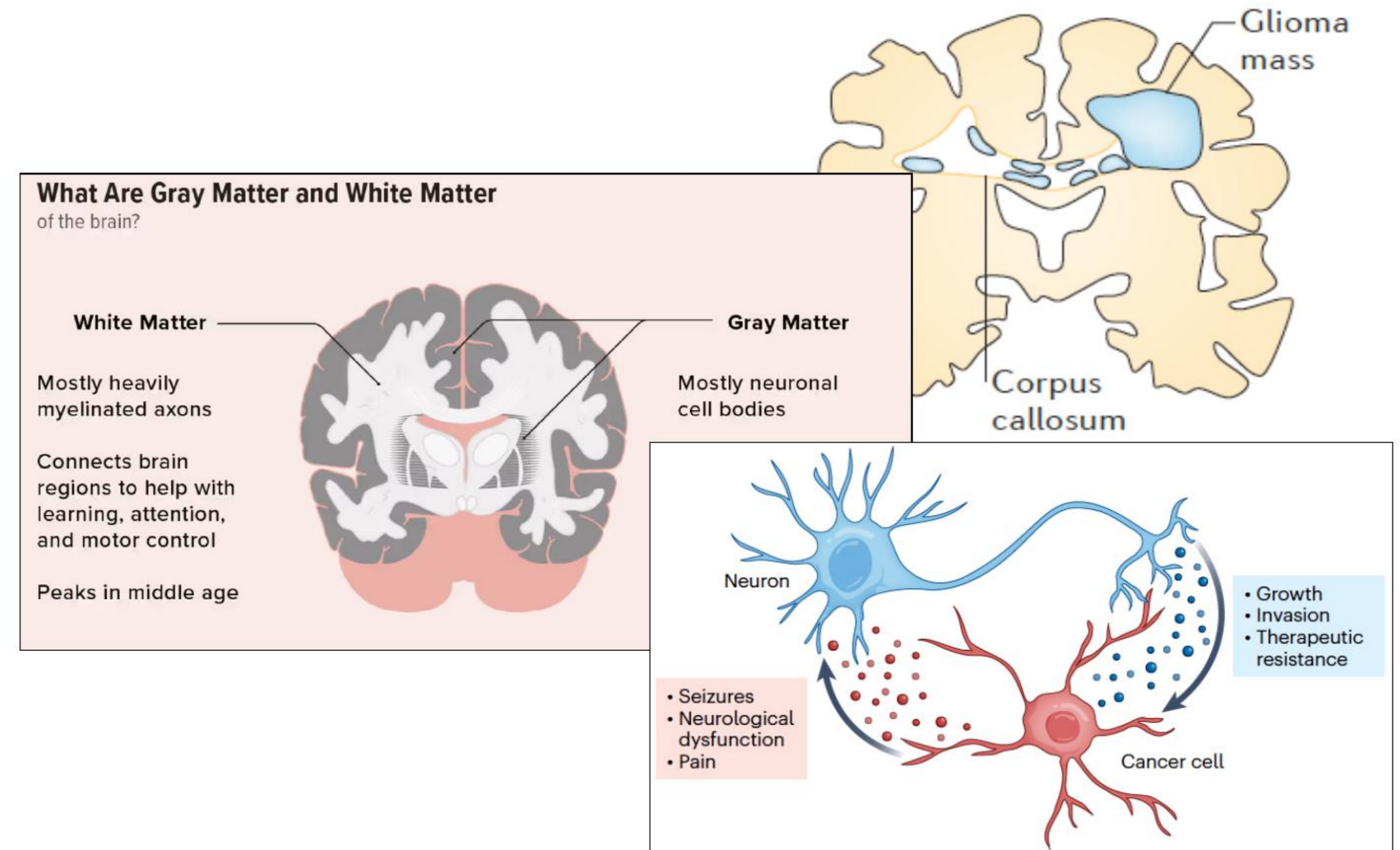
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this was originally presented by Joan Falcó-Roget

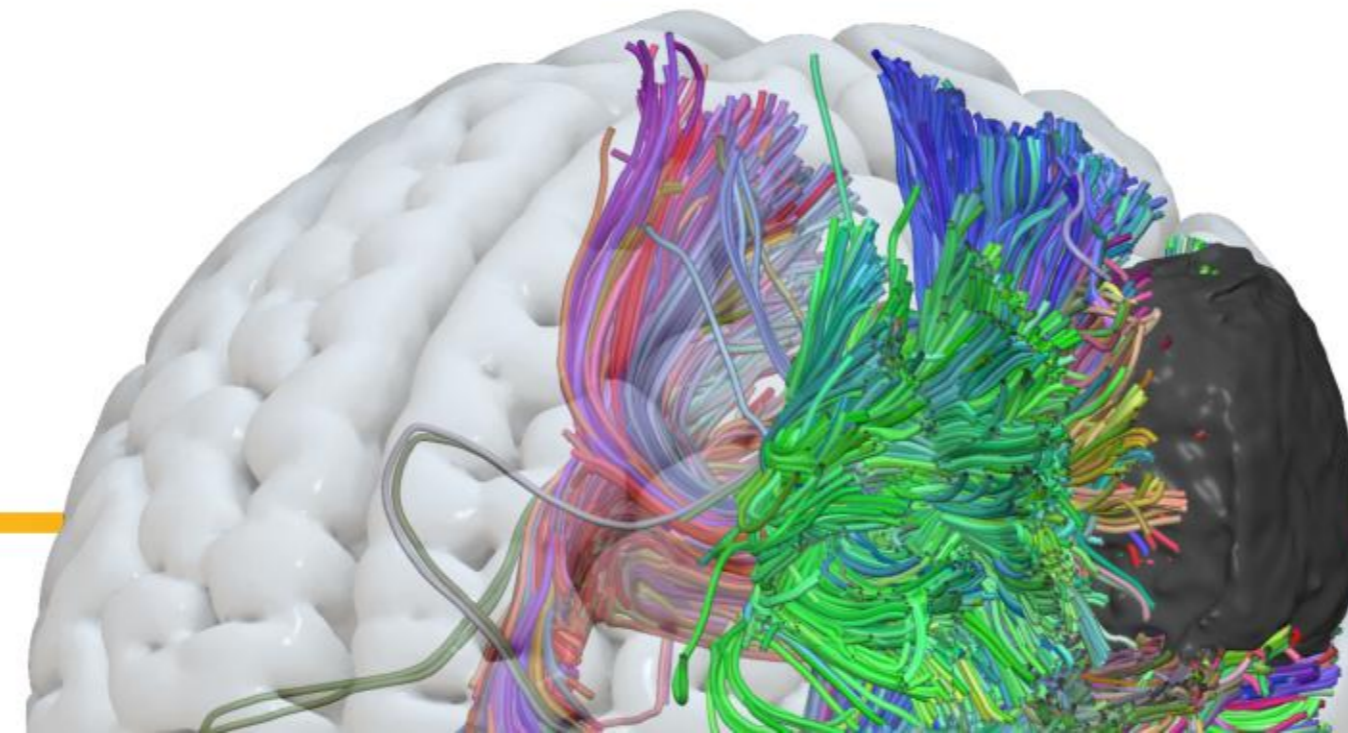
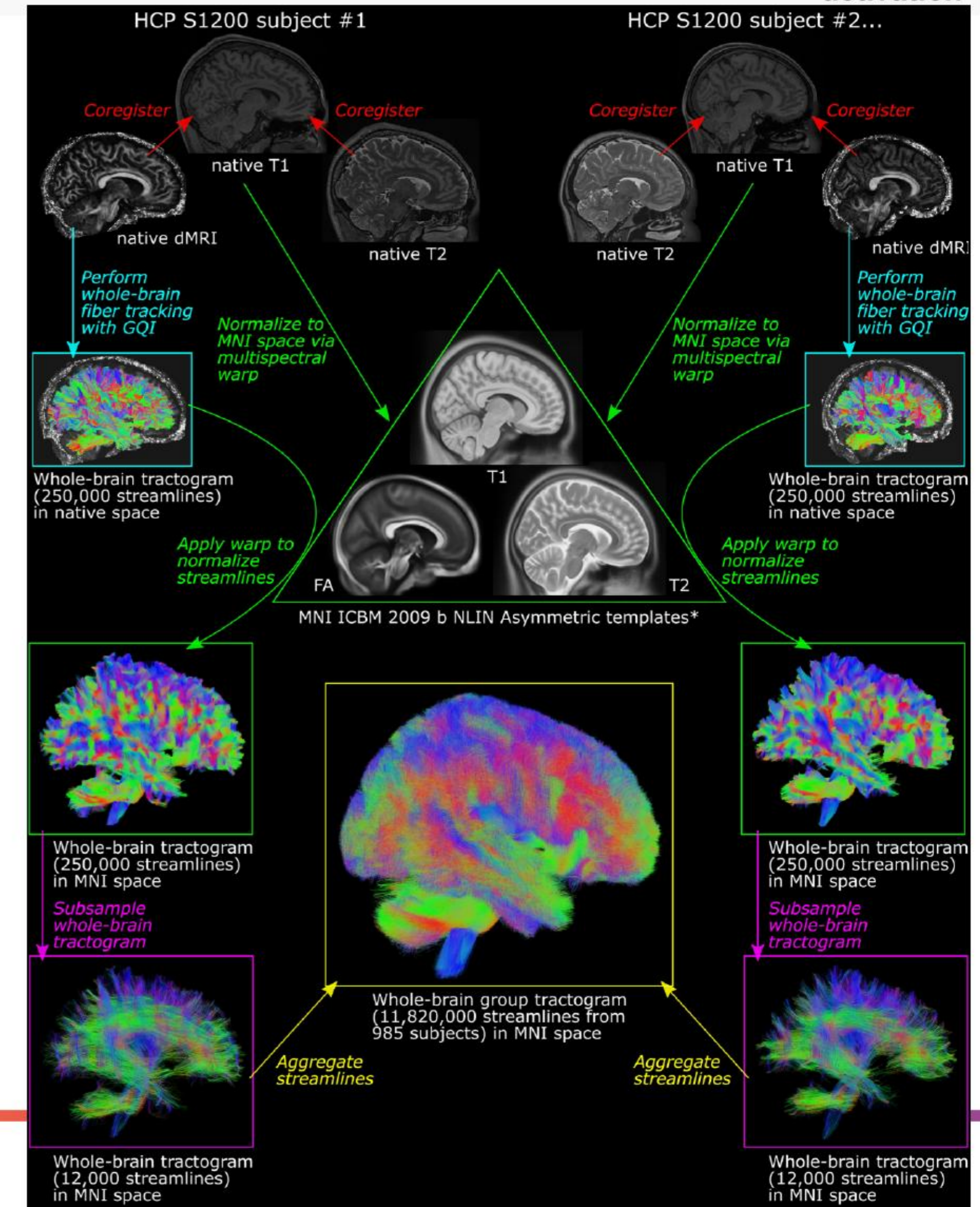
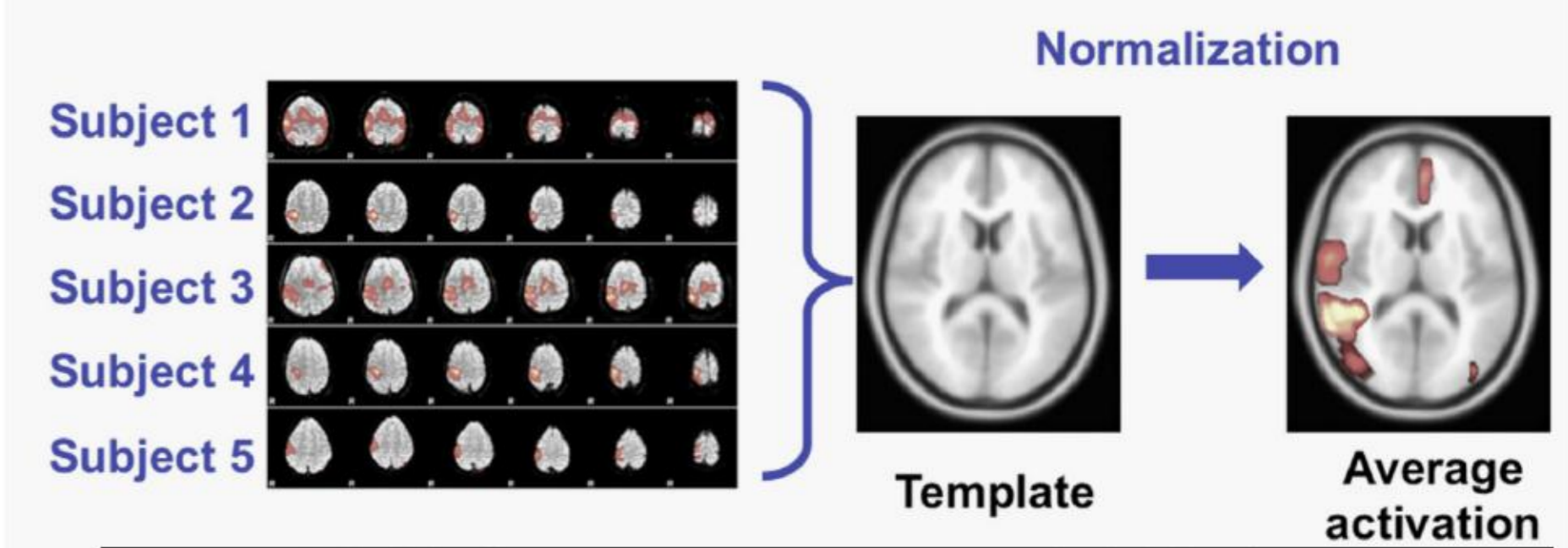
## Introduction: A connectionist framework for GBM

- Glioblastoma (GBM) cells establish functional links with neurons
- Growth, proliferation, and migration must consider the white matter scaffold
- Two interdependent complex networks:
  - 1) the brain
  - 2) the neuron-glioma
- **Our aim:**  
Map the GBM circuit and its relationship with prognosis using non-invasive methods



# Methods: Neuroimaging

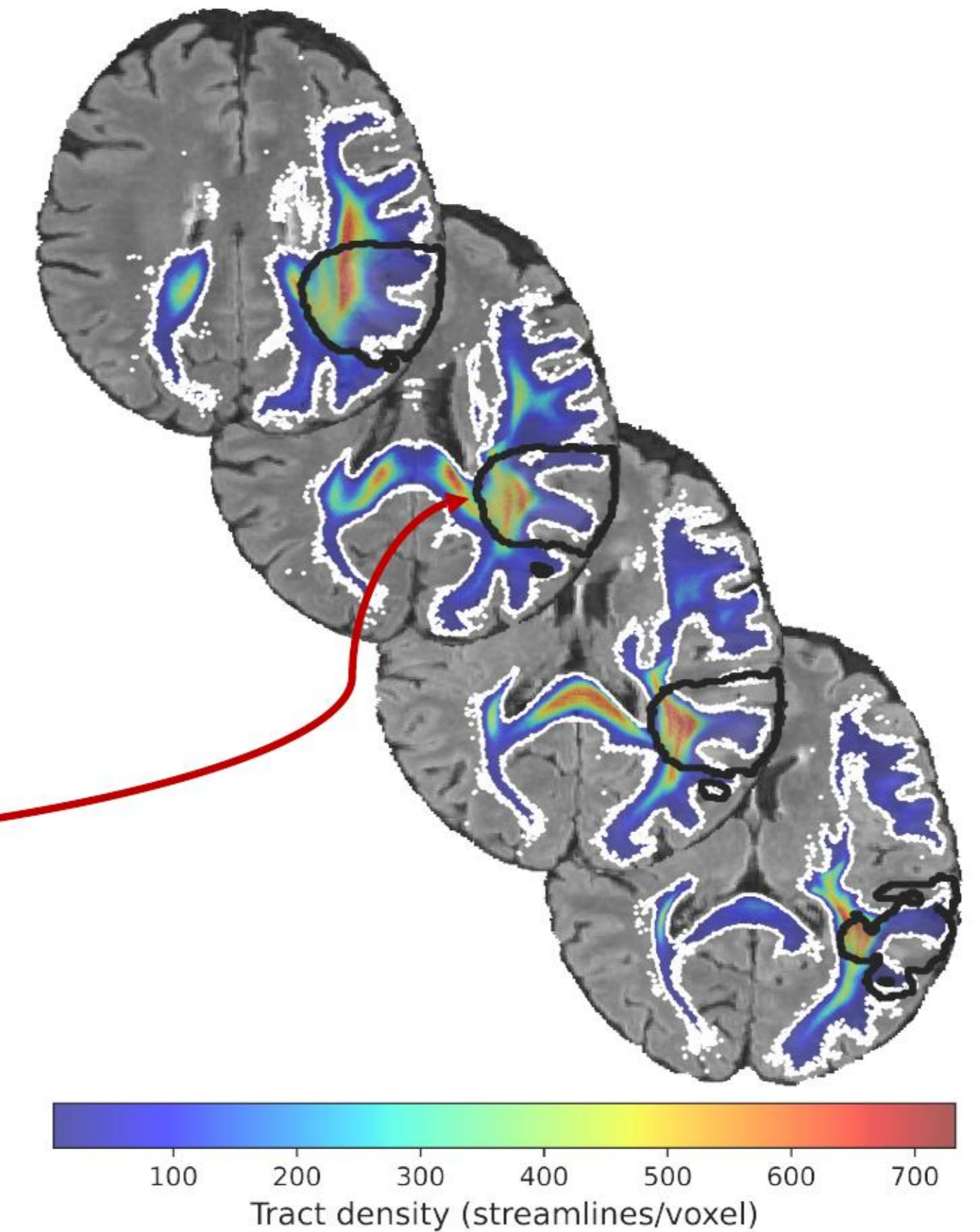
- Two independent cohorts: N=367 and N=496
- Clinical: Age, Sex, MGMT promoter status, EOR
- Normalized multimodal structural MRI
- Normative tractography (11.8M streamlines)
- *Lesion-tract density index* (L-TDI: white contour)
- *Tract density index* (TDI: black contour)



# Methods: NeuroImaging

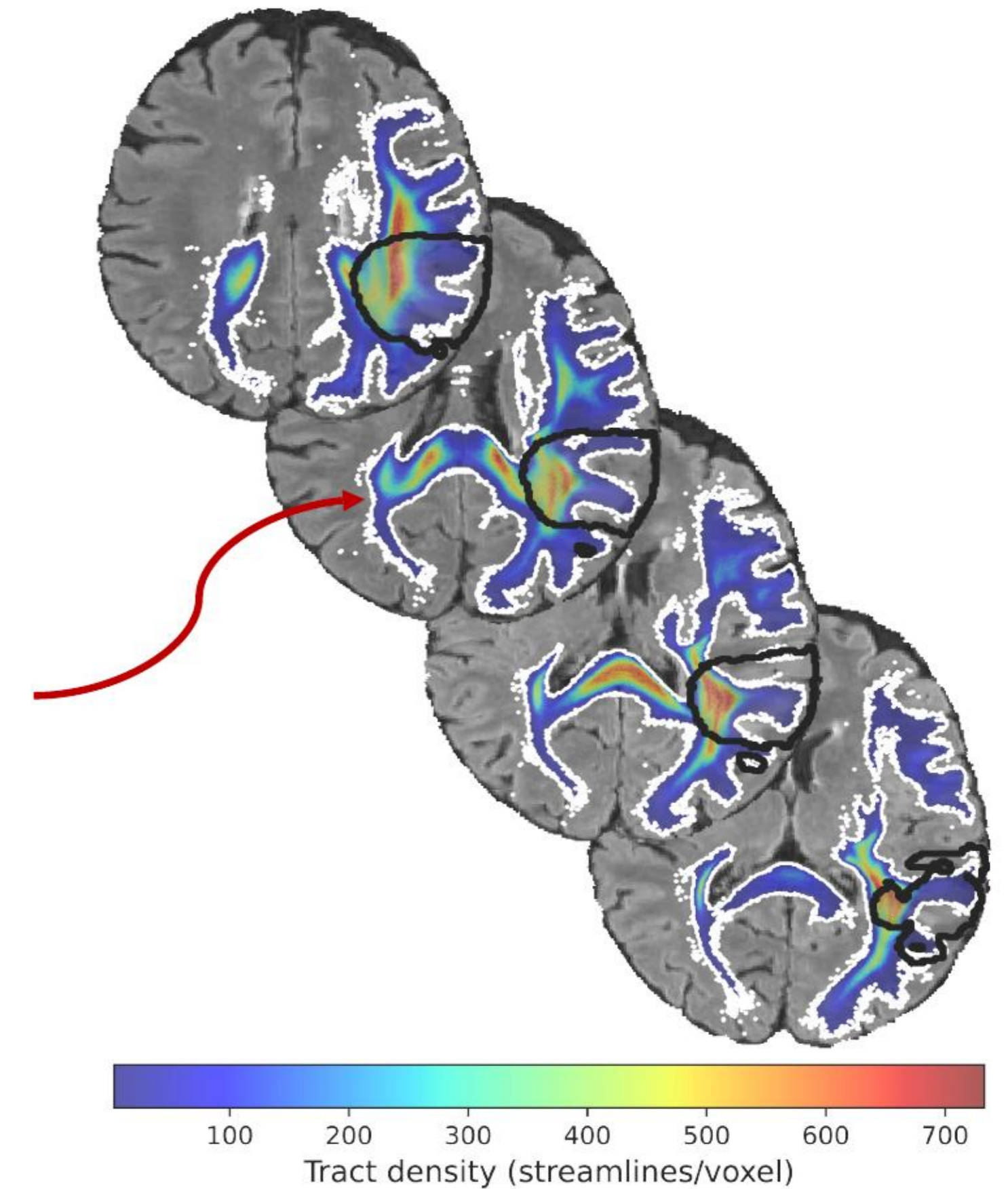
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- **Tract density index (TDI: black contour)**

$$\text{Tract density index} = \frac{1}{\text{Size}(\text{tumor})} \sum_{\text{voxel} \in \text{tumor}} \text{Tract density}$$



# Methods: NeuroImaging

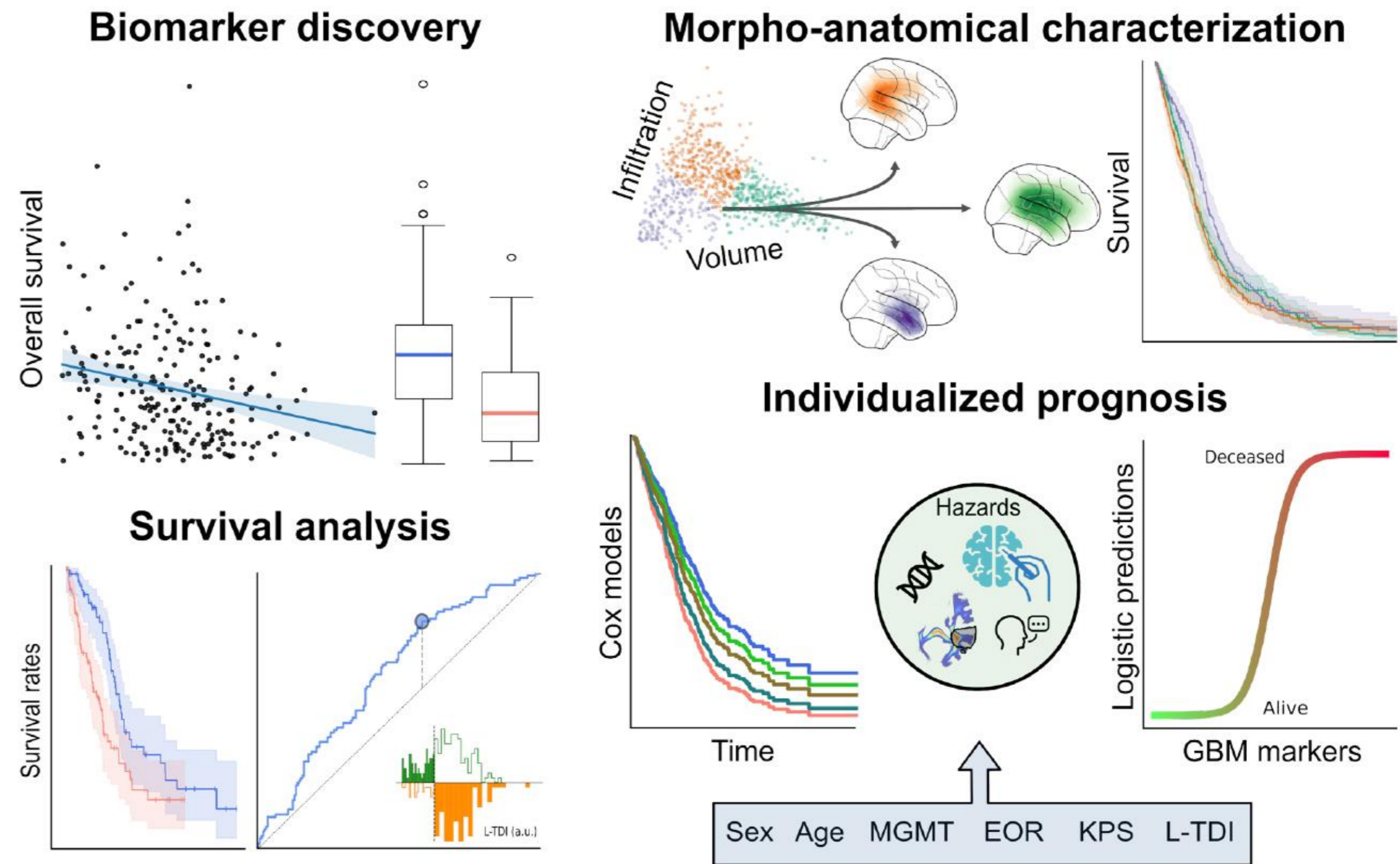
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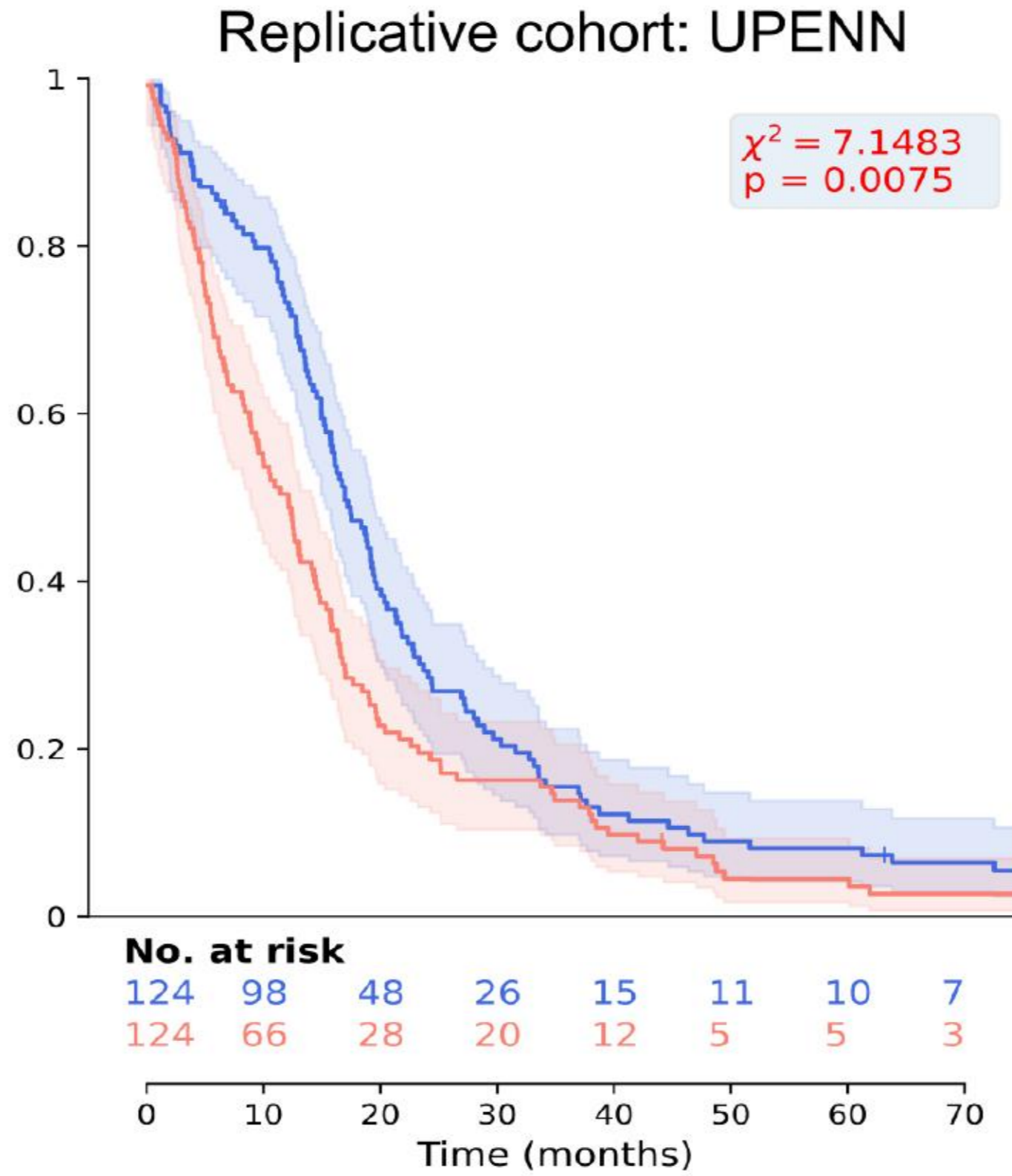
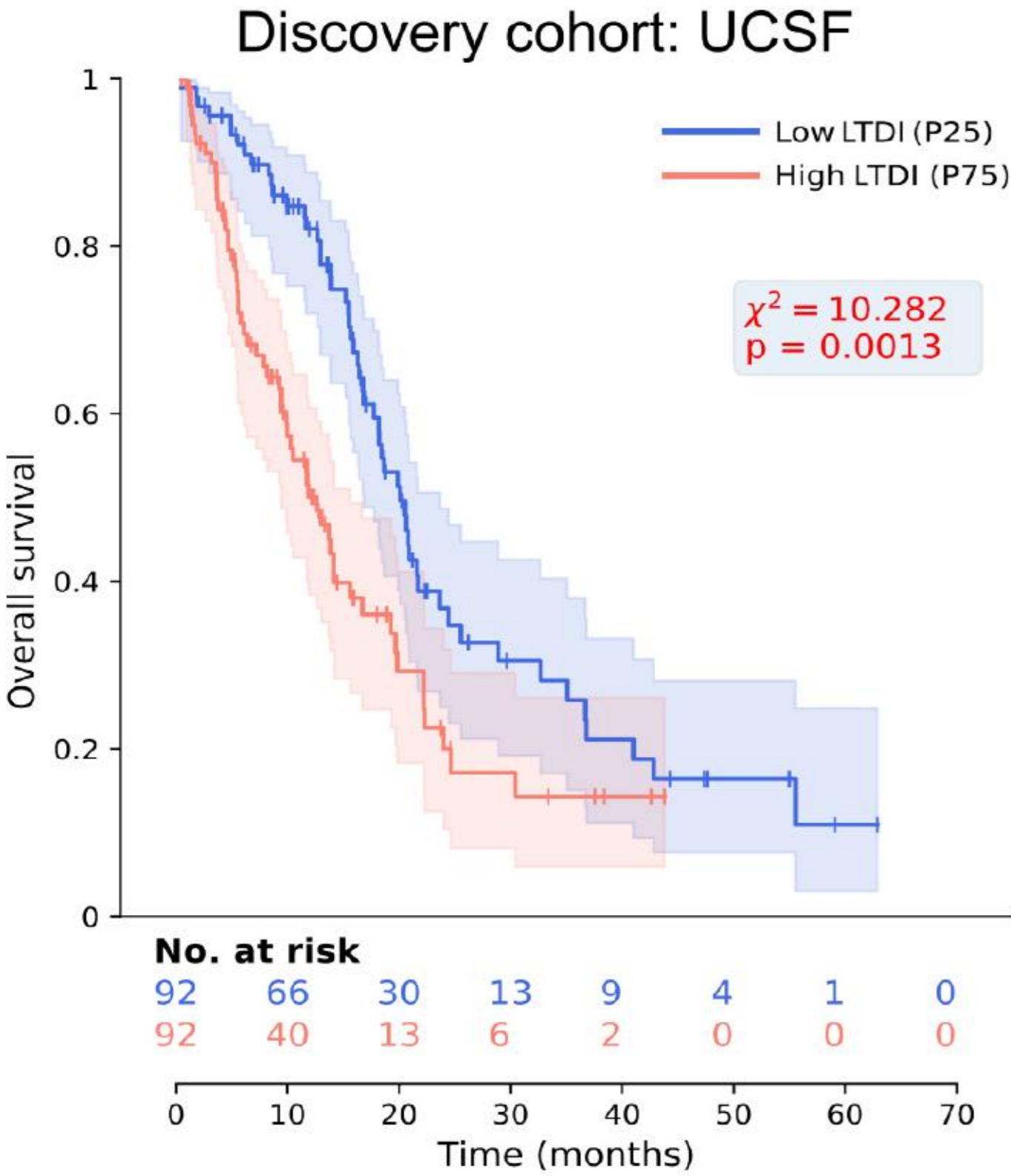
$$\text{Lesion-tract density index} = \frac{1}{\text{Size(L-TDM)}} \sum_{\text{voxel} \in \text{L-TDM}} \text{Tract density}_{\text{voxel}}$$

# Methods: Connectomics-informed survival analysis

- Univariate analysis
- Interpretability
- Cox multivariate analysis
- Survival predictions



# Results: Strata from the lesion-tract density index (L-TDI)



*MEDIAN SURVIVAL*

Discovery cohort ( $p < 0.0001^*$ )

Low L-TDI: 17.88 [11.14, 21.06]

High L-TDI: 9.58 [4.15, 13.74]

Replicative cohort ( $p = 0.0009^*$ )

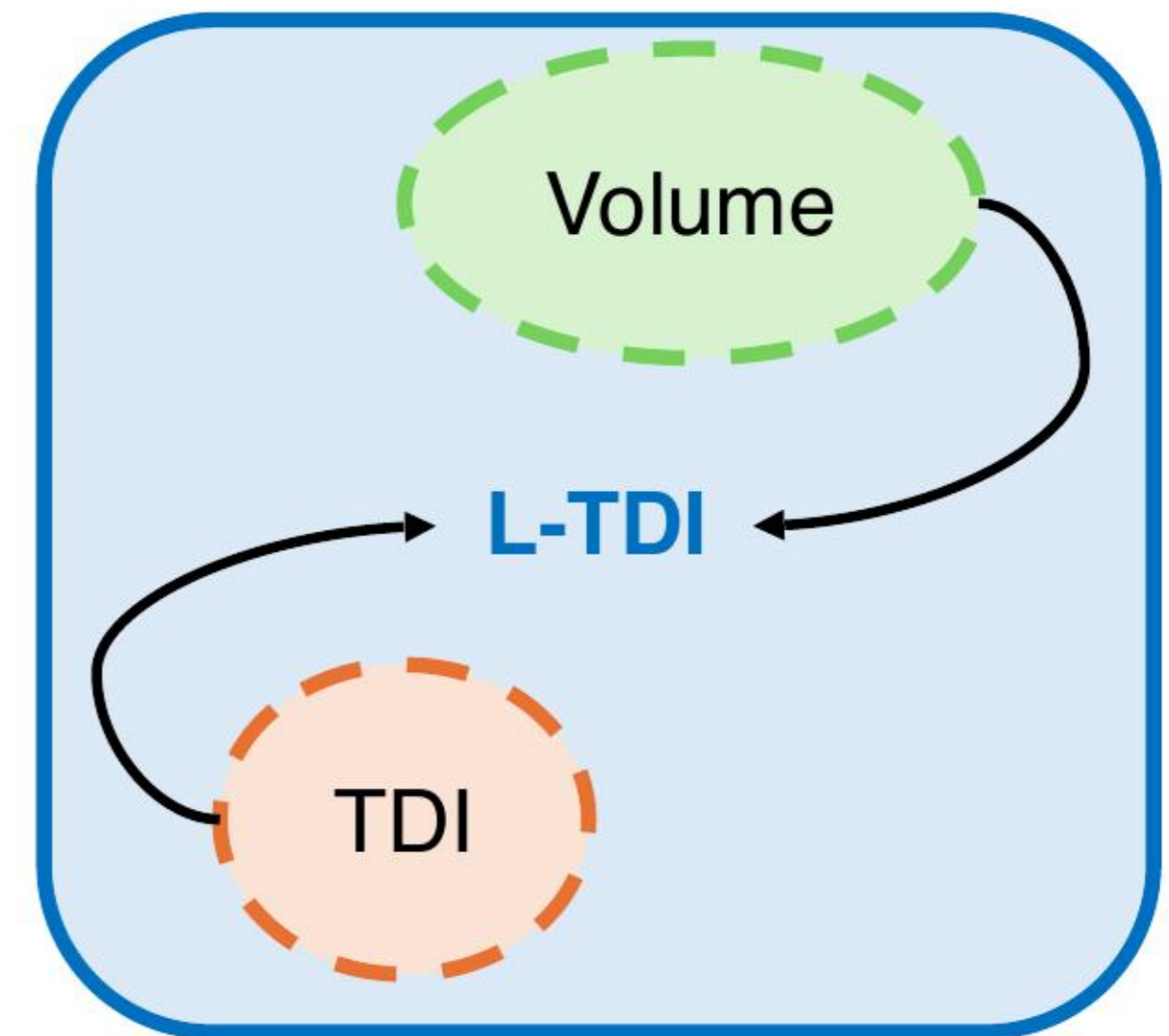
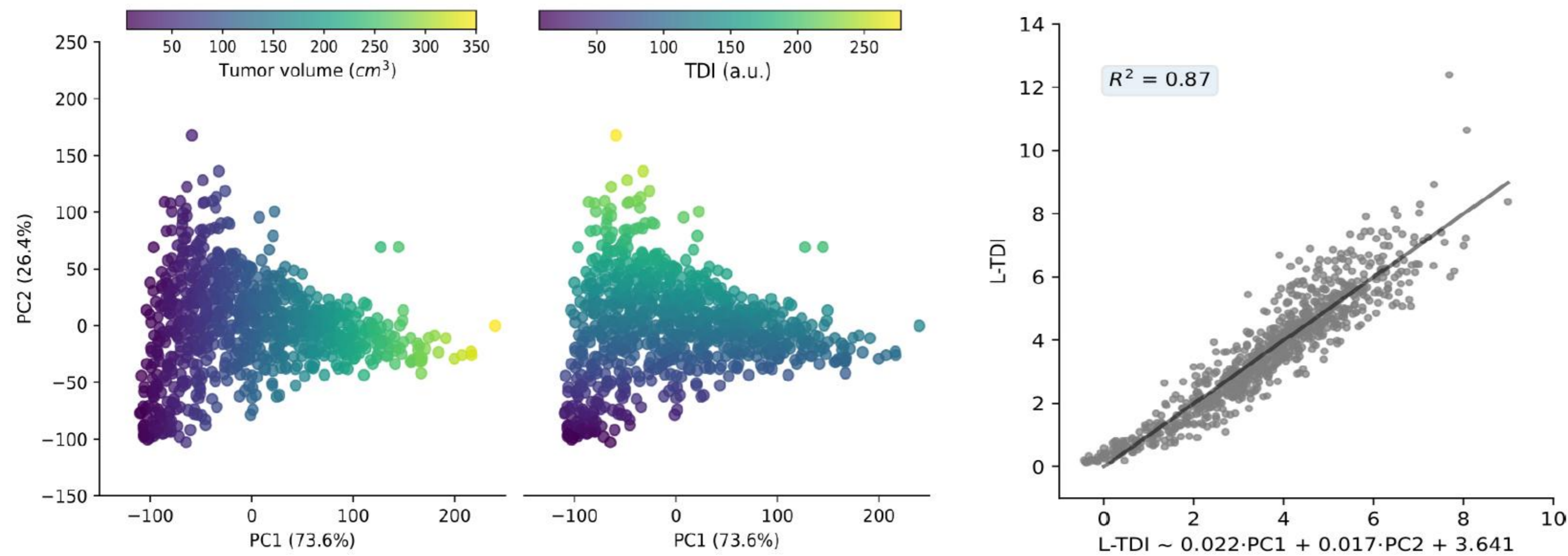
Low L-TDI: 19.89 [11.21, 24.39]

High L-TDI: 15.74 [4.96, 19.00]

\*Two-sided Mann-Whitney U-test

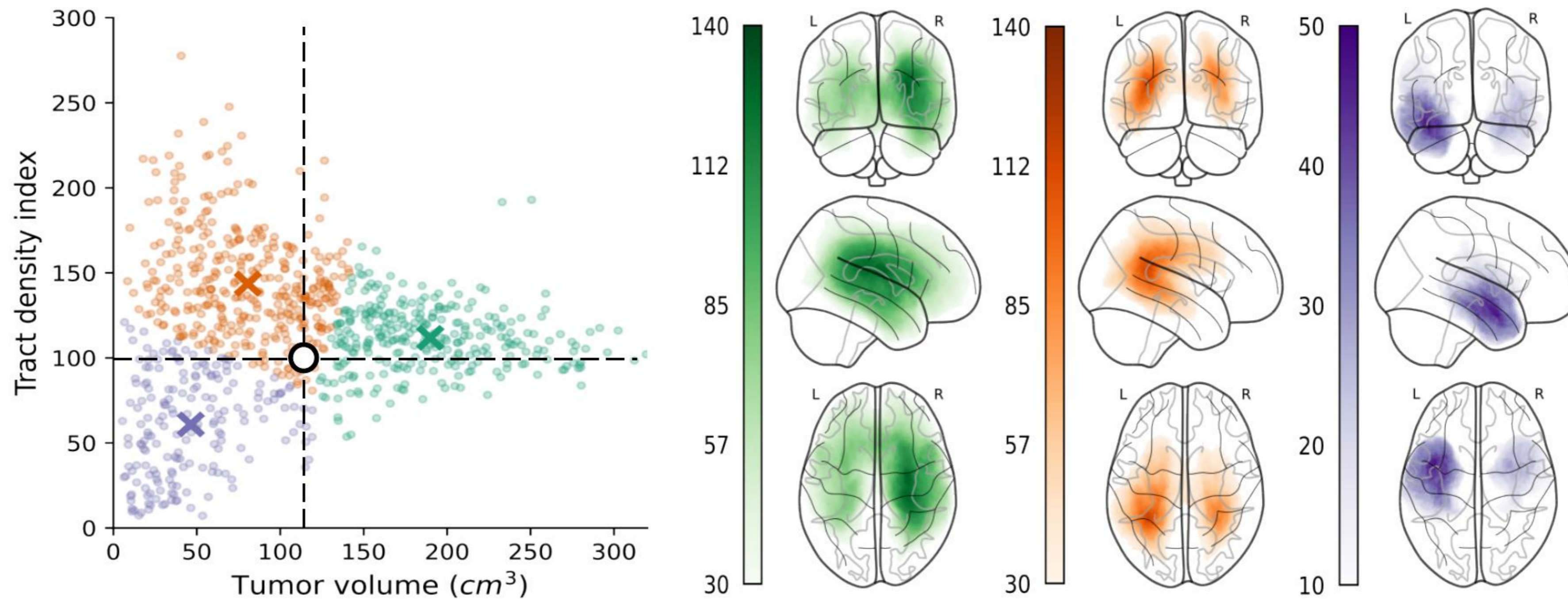
# Results: The morpho-anatomy of Glioblastomas

- **L-TDI = TDI + volume** (it implicitly considers tumor volume and local fiber density)



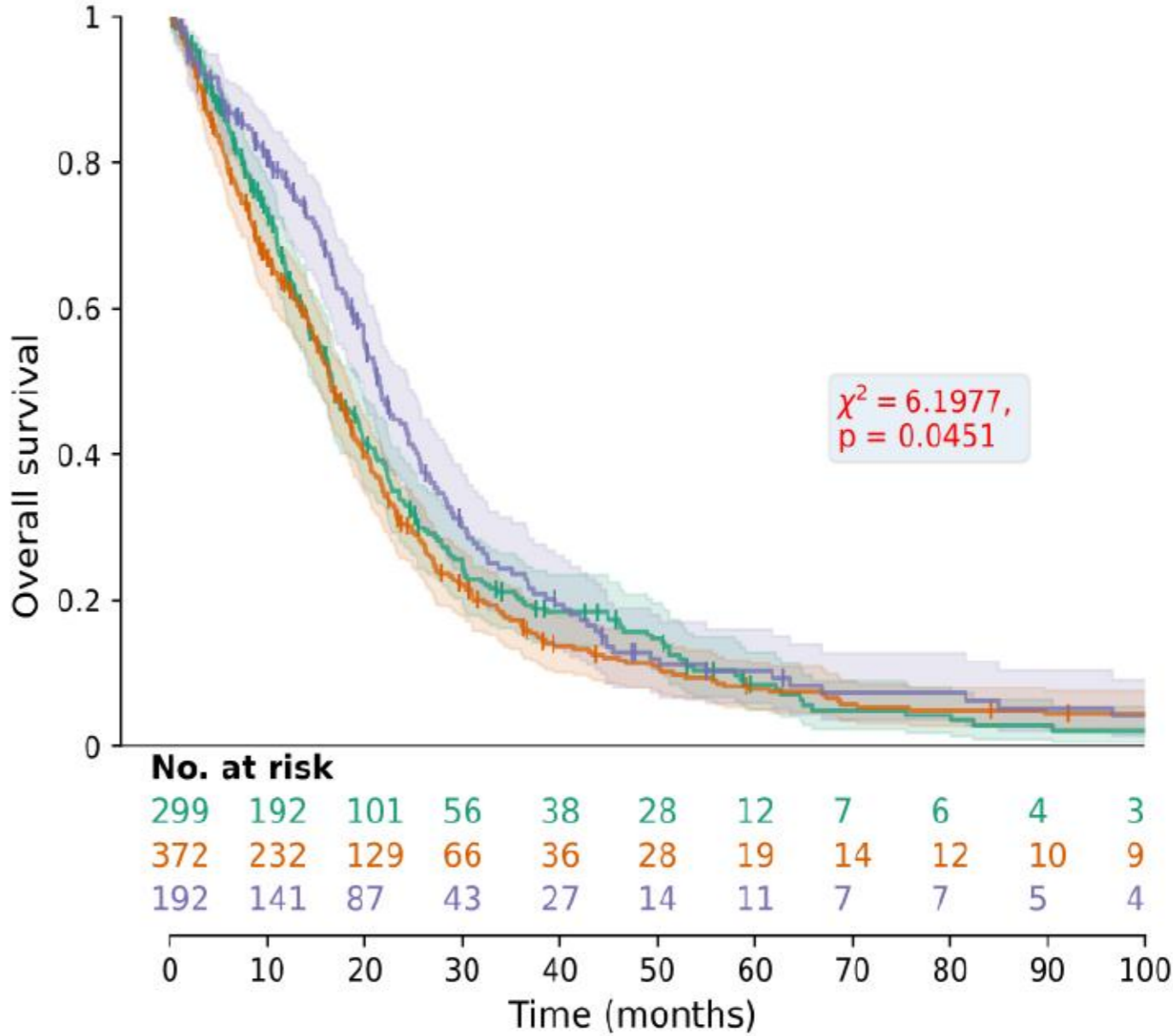
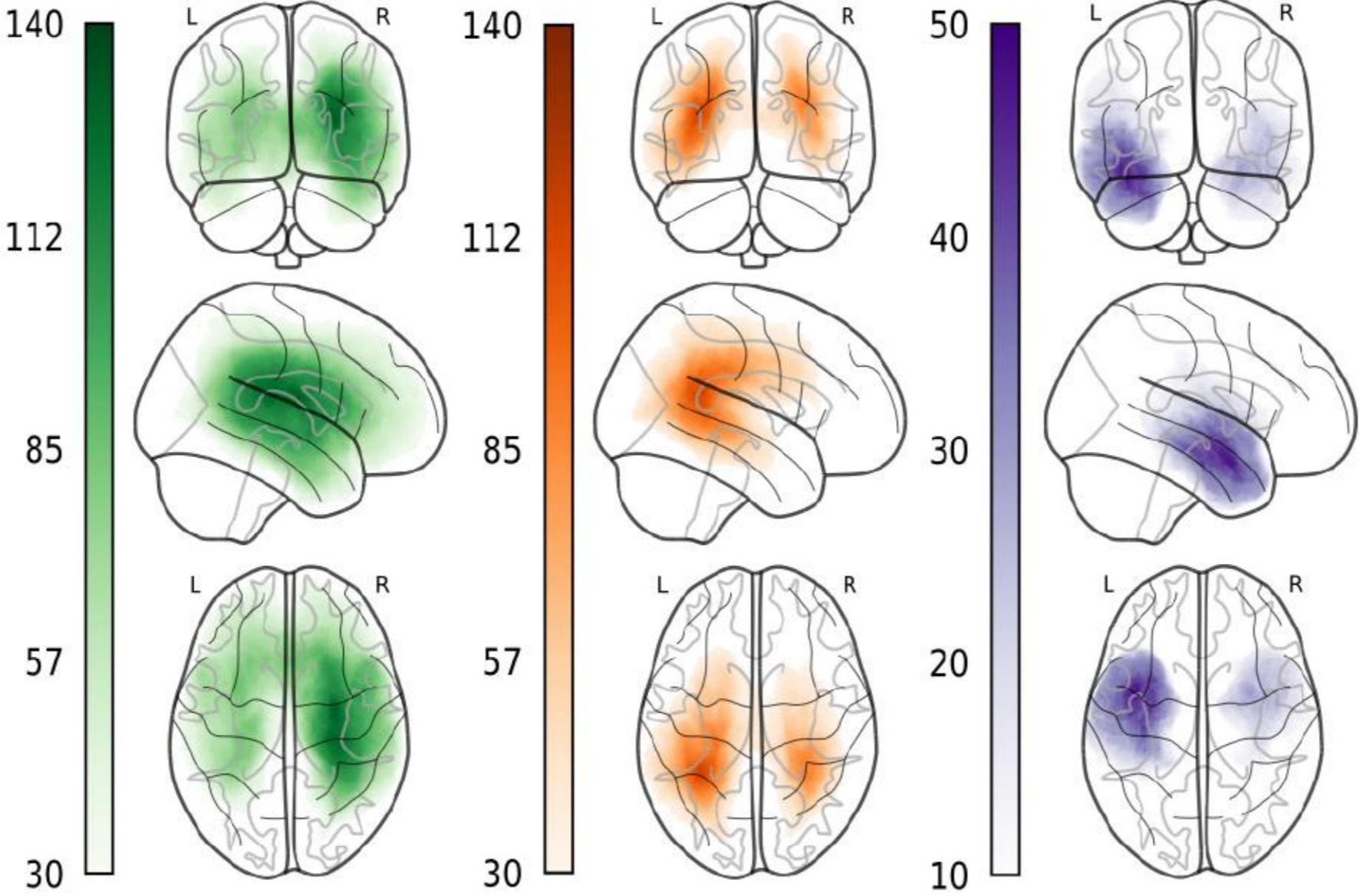
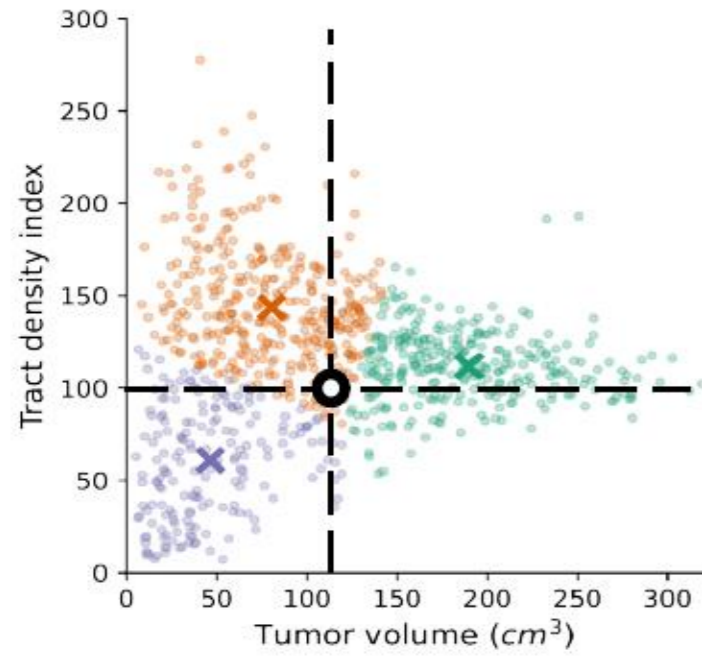
# Results: The morpho-anatomy of GBMs

- L-TDI assigns a unique pair of (TDI, volume) coordinates within the human brain

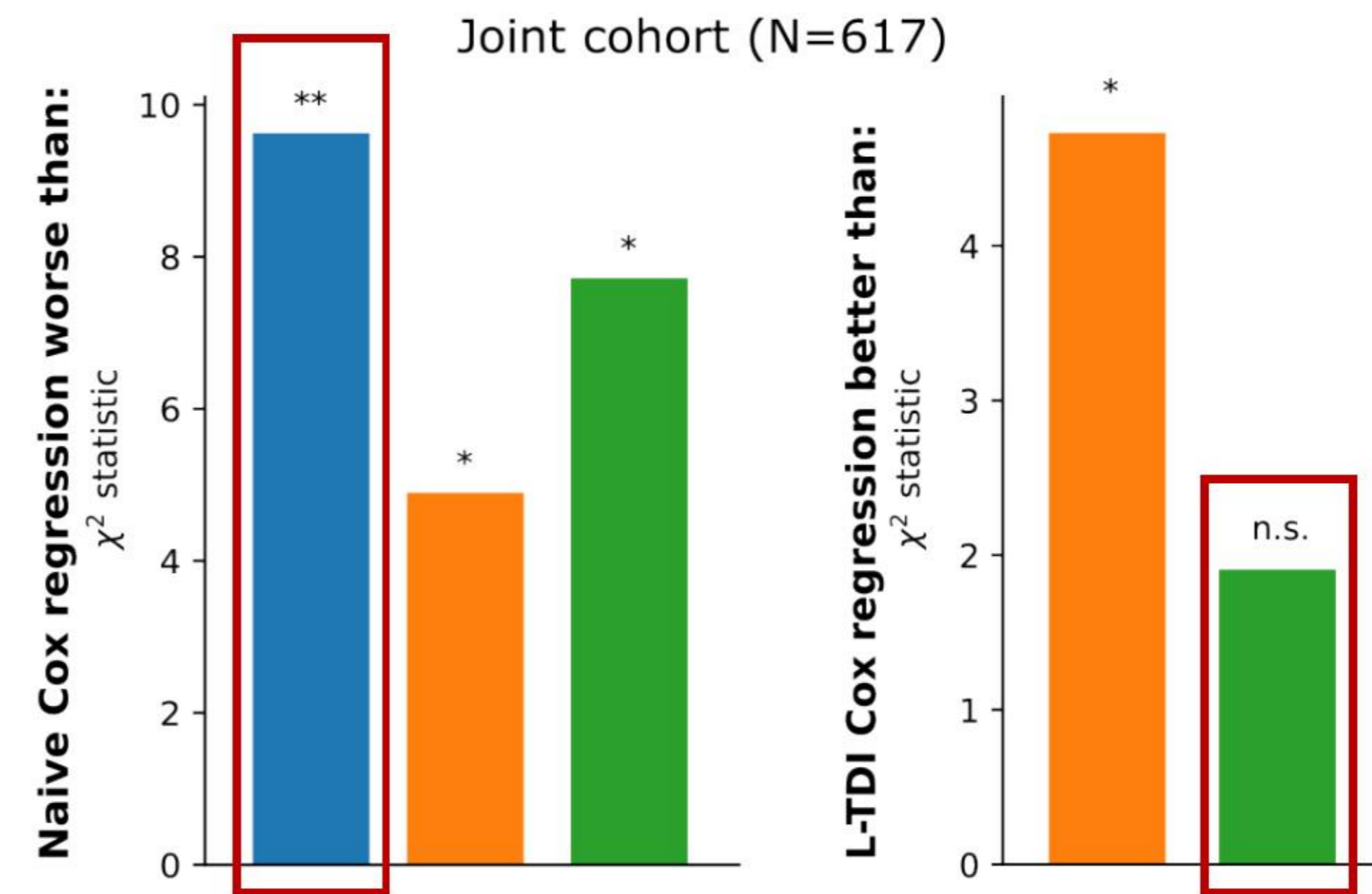
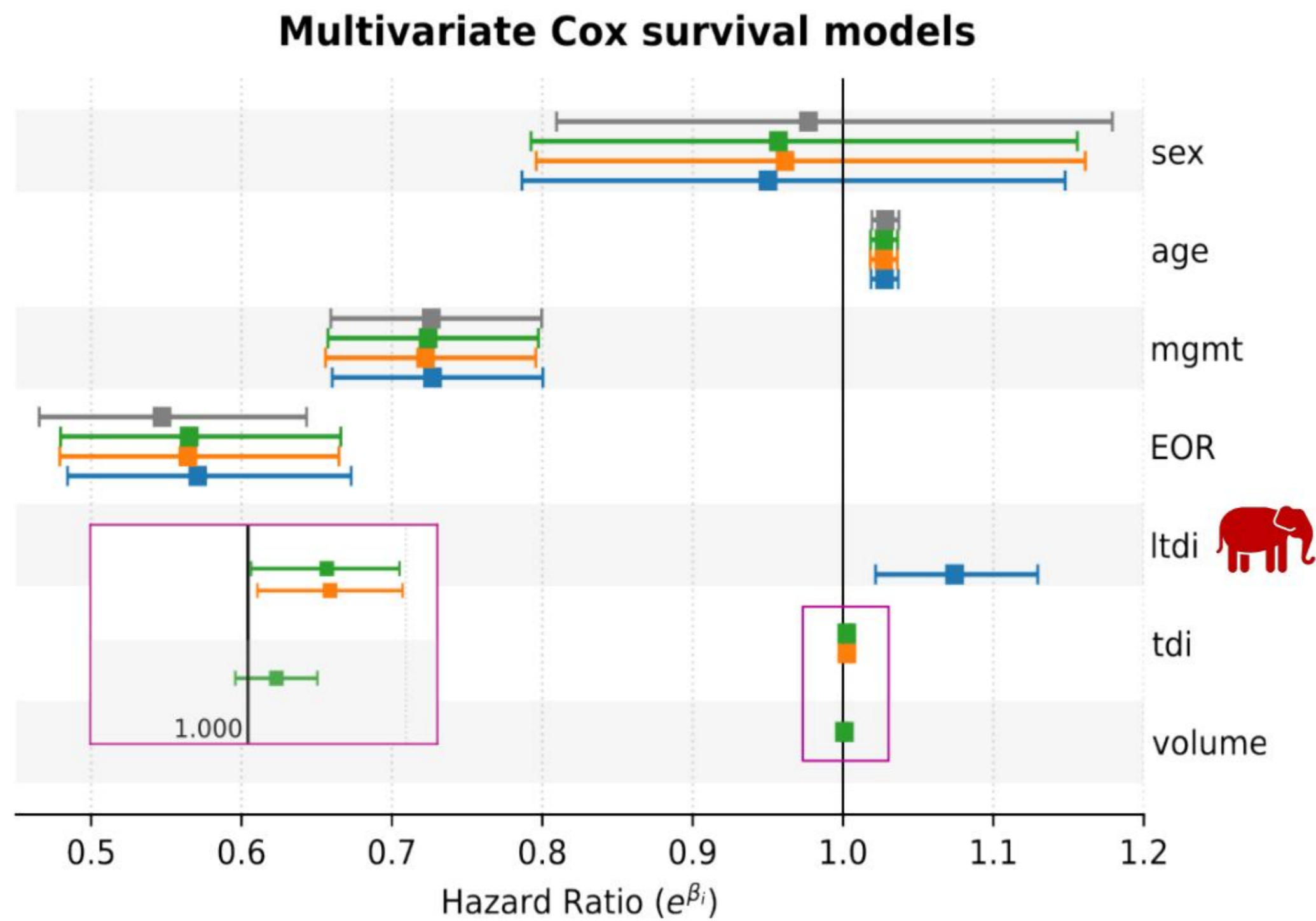


# Results: The morpho-anatomy of GBMs

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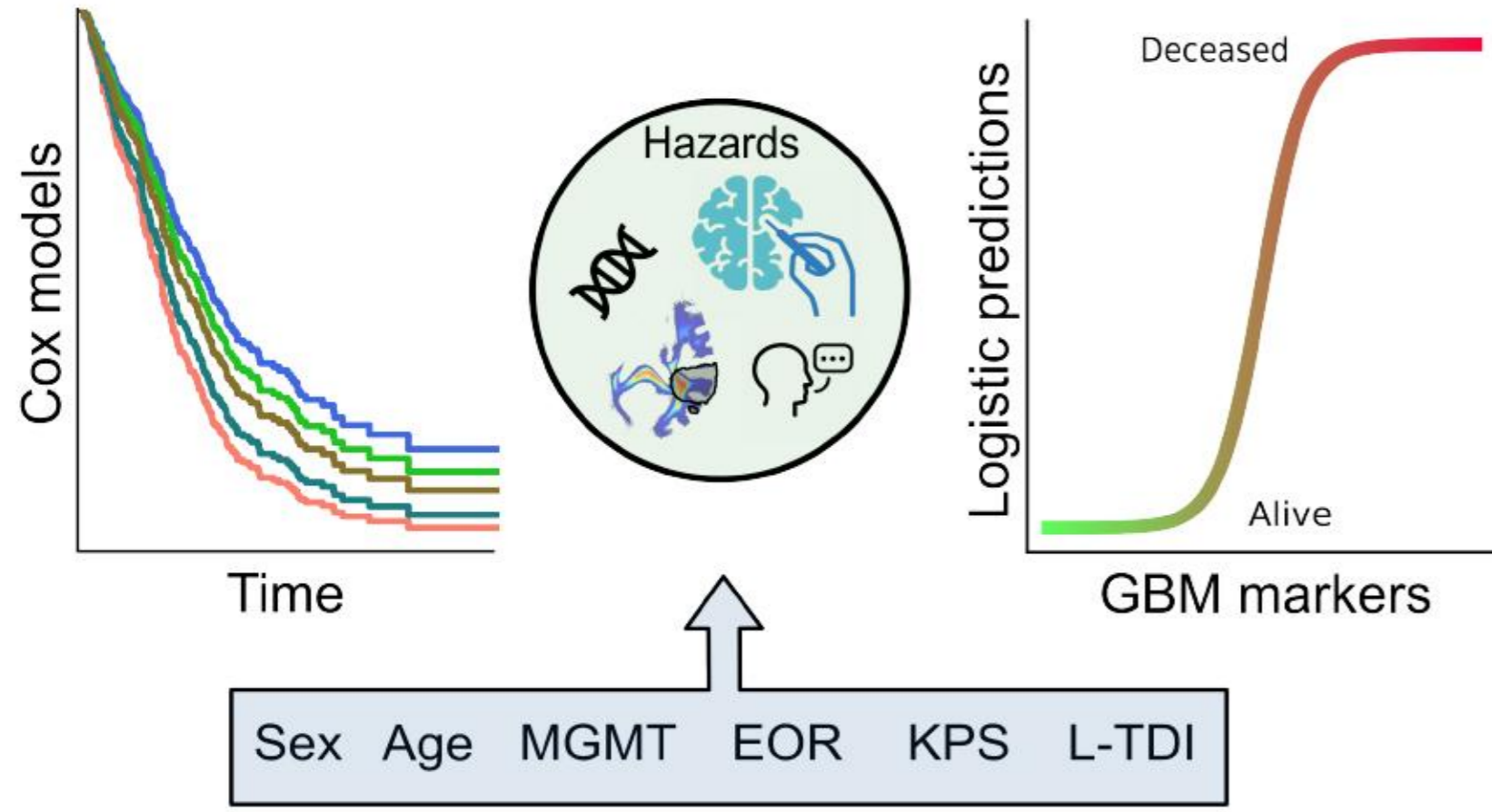


# Results: A biomarker that improves survival analyses

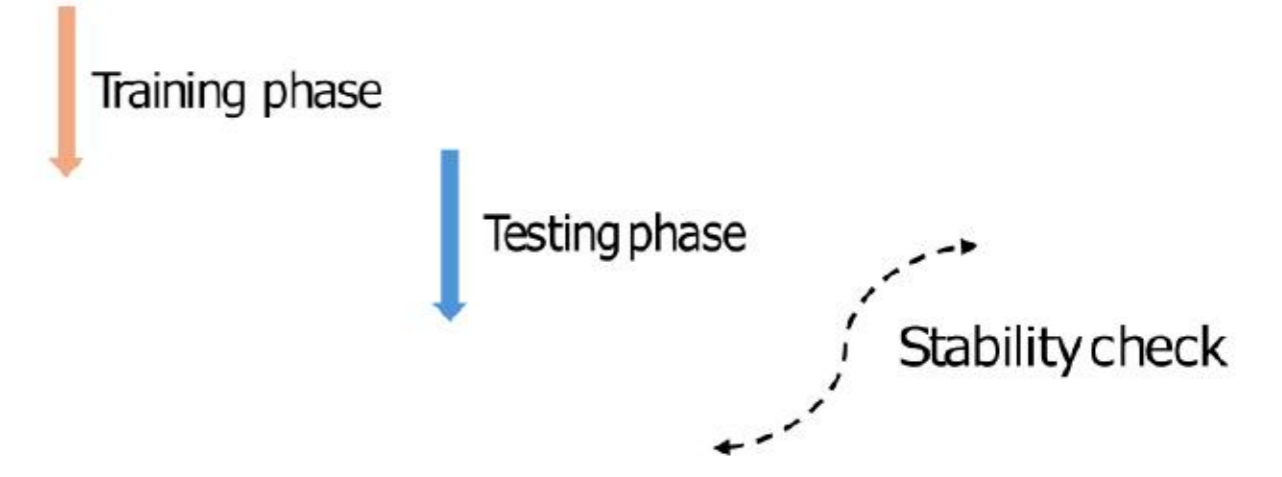
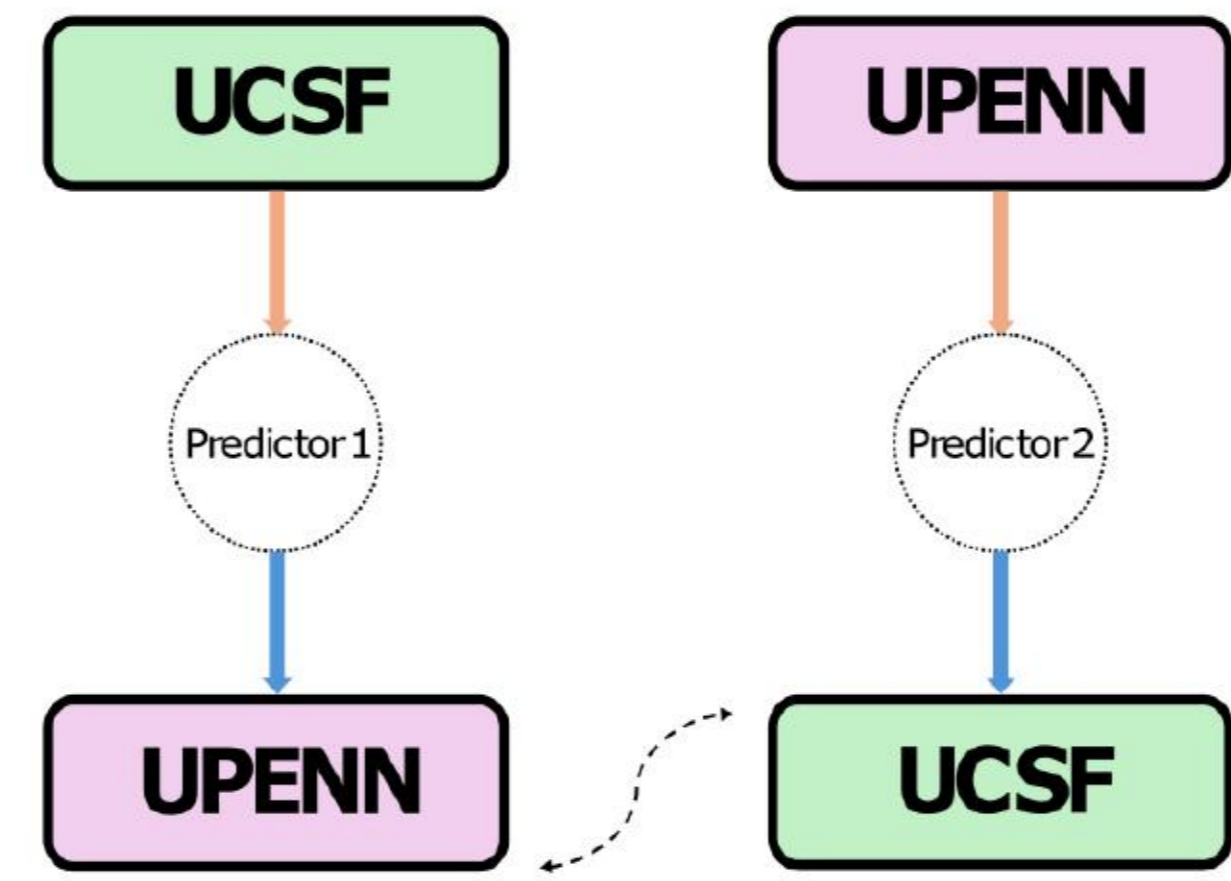


■ L-TDI ■ TDI ■ TDI+Volume ■ Naive

# Individualized prognosis



Sex Age MGMT EOR KPS L-TDI



		TRAIN (12 months)					
<b>Area under the curve (AUC)</b>		UCSF			UPENN		
<b>Model</b>		L-TDI	TDI	Naive	L-TDI	TDI	Naive
<b>TEST (12 months)</b>	UCSF	N.A.			0.7433	0.7088	0.7220
	UPENN	0.7327	0.7039	0.7077	N.A.		
<b>Balanced accuracy (bACC)</b>		UCSF			UPENN		
<b>Model</b>		L-TDI	TDI	Naive	L-TDI	TDI	Naive
<b>TEST (12 months)</b>	UCSF	N.A.			0.6498	0.6463	0.6418
	UPENN	0.6753	0.656	0.6661	N.A.		

# Conclusions



We introduce a fast, robust, and interpretable tractography-based marker to stratify GBM survival



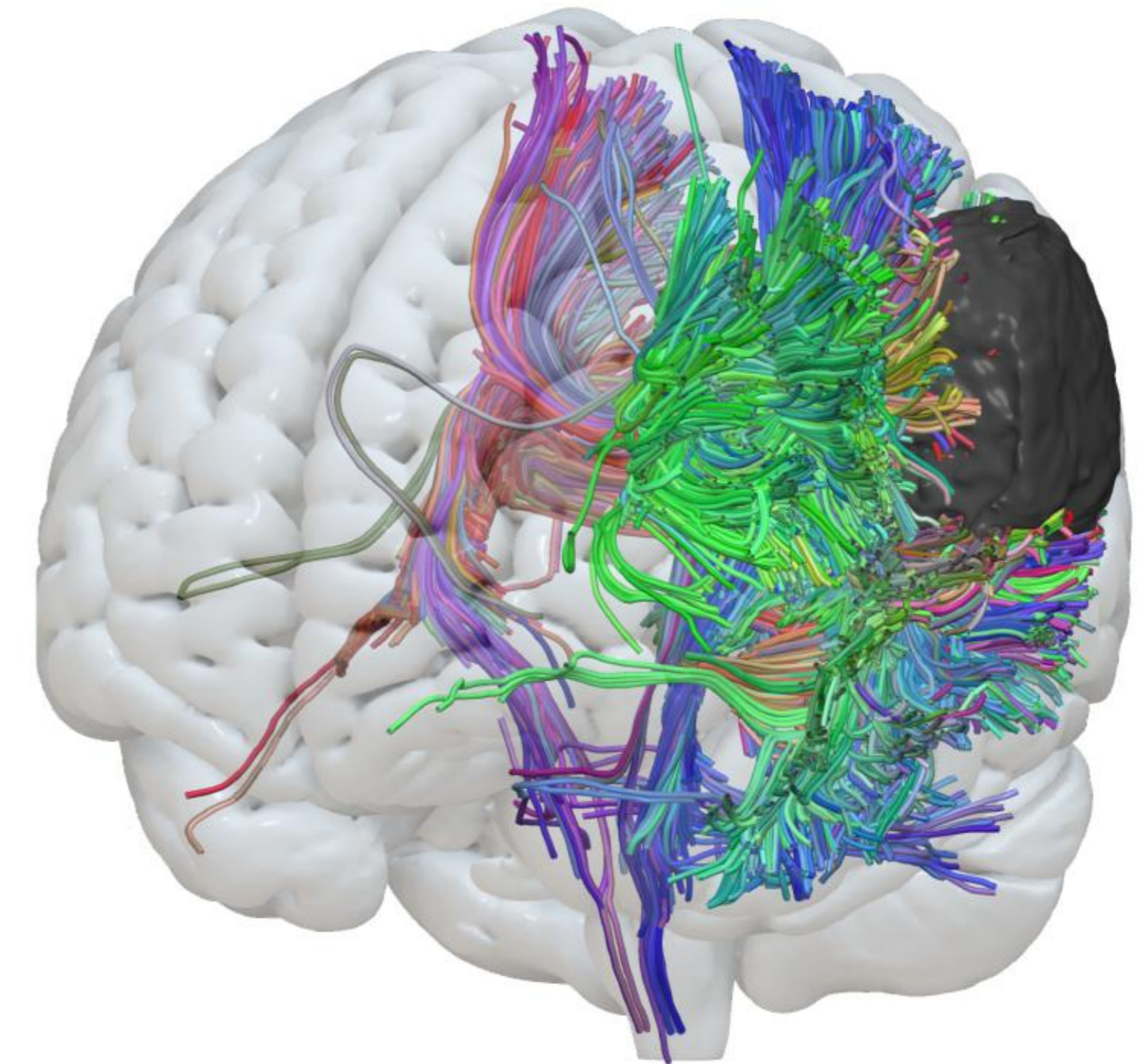
We model GBM as a distributed lesion embedded within the brain's white matter scaffold



We reinterpret GBM morphology and anatomy through a connectomics framework



We demonstrate how connectomics can enhance AI/ML survival prediction models



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Sara Lillo (*National Center for Oncological Hadrontherapy and University of Pavia, Pavia*)

Letterio Salvatore Politi (*Humanitas University and IRCCS Humanitas Research Hospital, Milan*)

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