

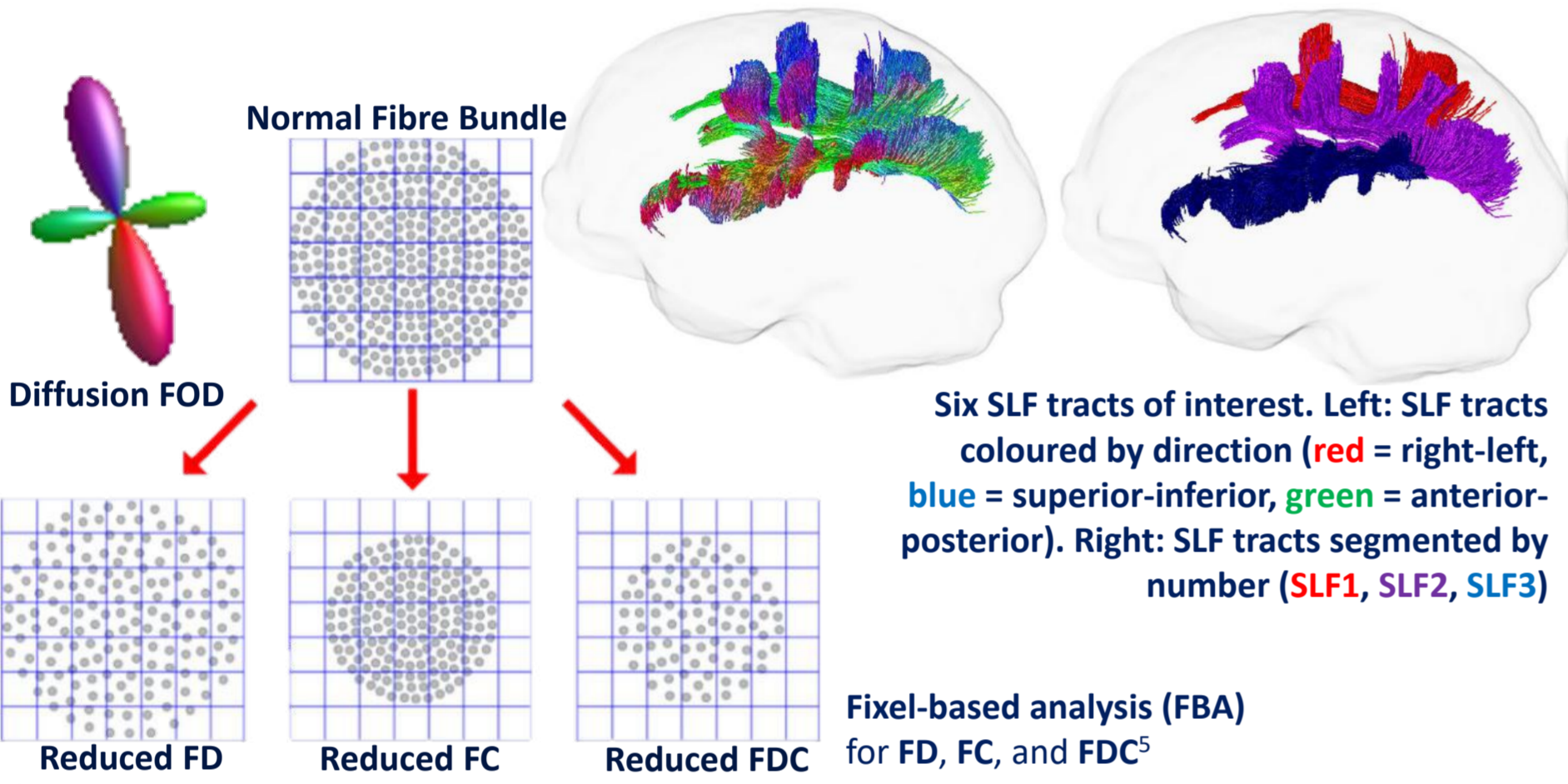
# Poorer executive function is associated with lower white matter fibre density in the superior longitudinal fasciculus in groups at risk of Alzheimer's disease

Lenore T Tahara-Eckl<sup>1,2</sup>, Reece Roberts<sup>1,2</sup>, Catherine Morgan<sup>1,2</sup>, Flavio Dell'Acqua<sup>3</sup>, Ian Kirk<sup>1,2</sup>, Tracy R Melzer<sup>4,6</sup>, John C Dalrymple-Alford<sup>4,5</sup>, Tim J Anderson<sup>4,6</sup>, Nicholas J Cutfield<sup>7</sup>, Lynette Tippett<sup>1,2</sup>

<sup>1</sup>School of Psychology, University of Auckland, New Zealand; <sup>2</sup>Centre for Brain Research, University of Auckland, New Zealand; <sup>3</sup>Forensic and Neurodevelopmental Sciences, King's College, London, England; <sup>4</sup>NZ Brain Research Institute, Christchurch, New Zealand; <sup>5</sup>School of Psychology, Speech and Hearing, University of Canterbury, Christchurch, New Zealand; <sup>6</sup>Department of Medicine, University of Otago, Christchurch, New Zealand; <sup>7</sup>Department of Medicine, University of Otago, Dunedin, New Zealand

## Background

- Alzheimer's disease (AD) risk increases with:
  - age
  - subjective cognitive decline (SCD)<sup>1</sup>
  - mild cognitive impairment (MCI)
  - white matter (WM) degeneration<sup>2</sup>
- Executive dysfunction<sup>3</sup> and WM degeneration<sup>2,4</sup> may be early markers of AD
- The superior longitudinal fasciculus (SLF) tract modulates attention and executive function in ageing<sup>5,6</sup>, but its role is not fully understood in AD
- Recently, WM tracts modeled through fibre orientation density (FOD), can derive three properties: fibre density (FD), fibre cross-section (FC), and fibre density cross-section (FDC)<sup>7</sup>.



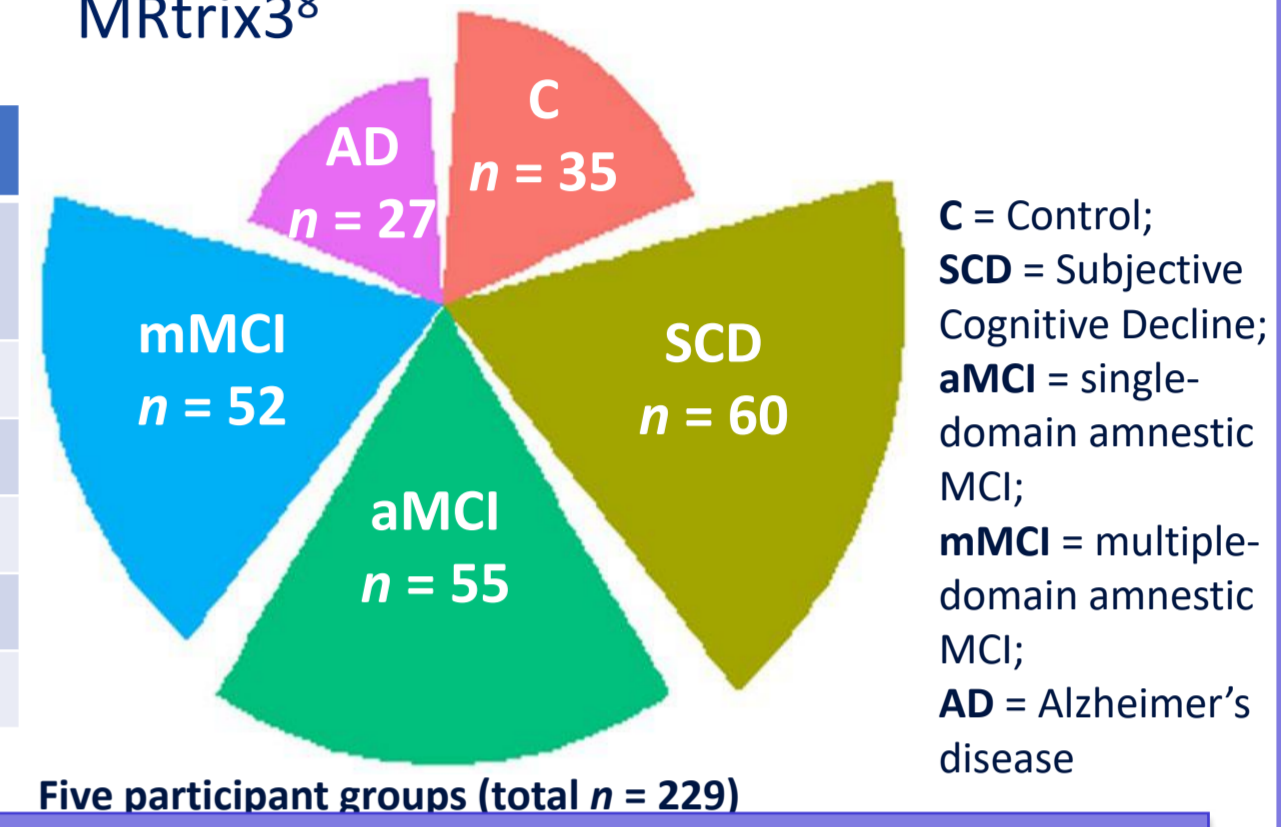
## Methods

**Participants.**  $n = 229$  (122 F,  $69.75 \pm 8.25$  years), recruited from the **Dementia Prevention Research Clinic (DPRC)** over three sites: Auckland, Christchurch, Dunedin

**Neuropsychological assessment.**

Processing Speed	Inhibition
Hayling's Congruent Sentence Set 1	Hayling's Incongruent Sentence Set 2
Stroop Colour Naming	Hayling Category A Error
Stroop Word Reading	Hayling Category B Error
Trail Making Test A	Stroop Inhibition
	Category Switching
	Trail Making Test B

**Image acquisition and preprocessing.** Diffusion-weighted MRI (100 directions,  $b = 1000, 2000$  s/mm<sup>2</sup>). FOD estimation with multi-tissue constrained spherical deconvolution and FBA processed with MRtrix<sup>8</sup>

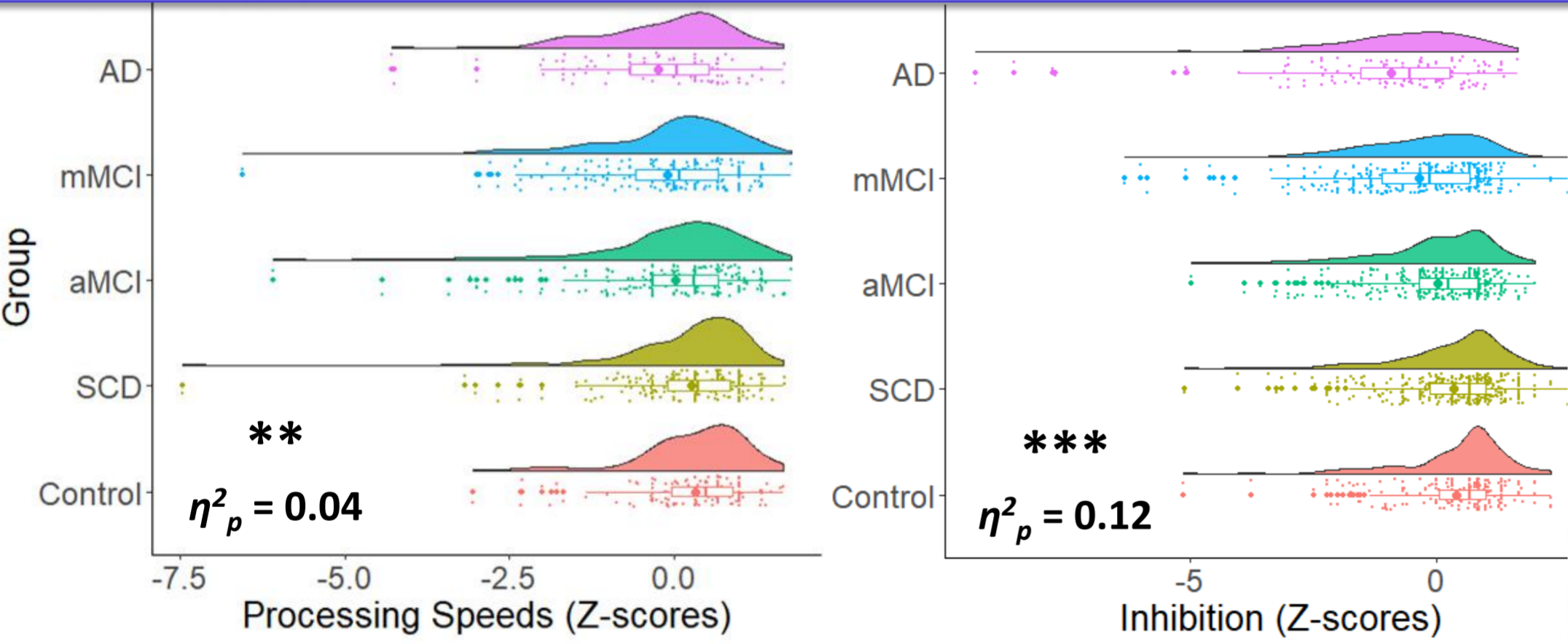


## Research Questions

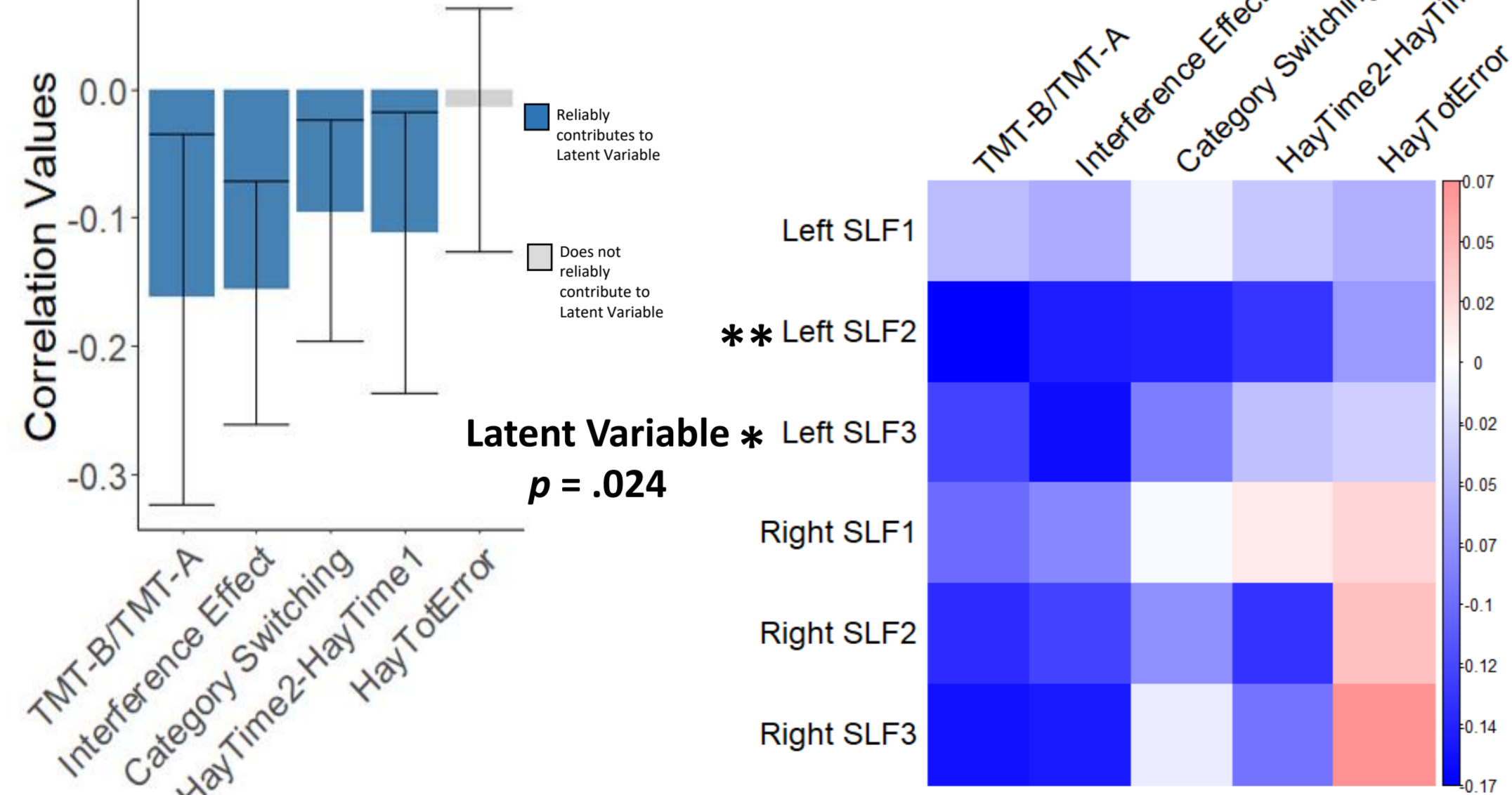
In groups at different levels of risk of AD...

- Do measures of processing speed and inhibition differ?
- Do SLF fibre properties differ?
- Do the SLF tracts correlate with processing speed and inhibition measures?

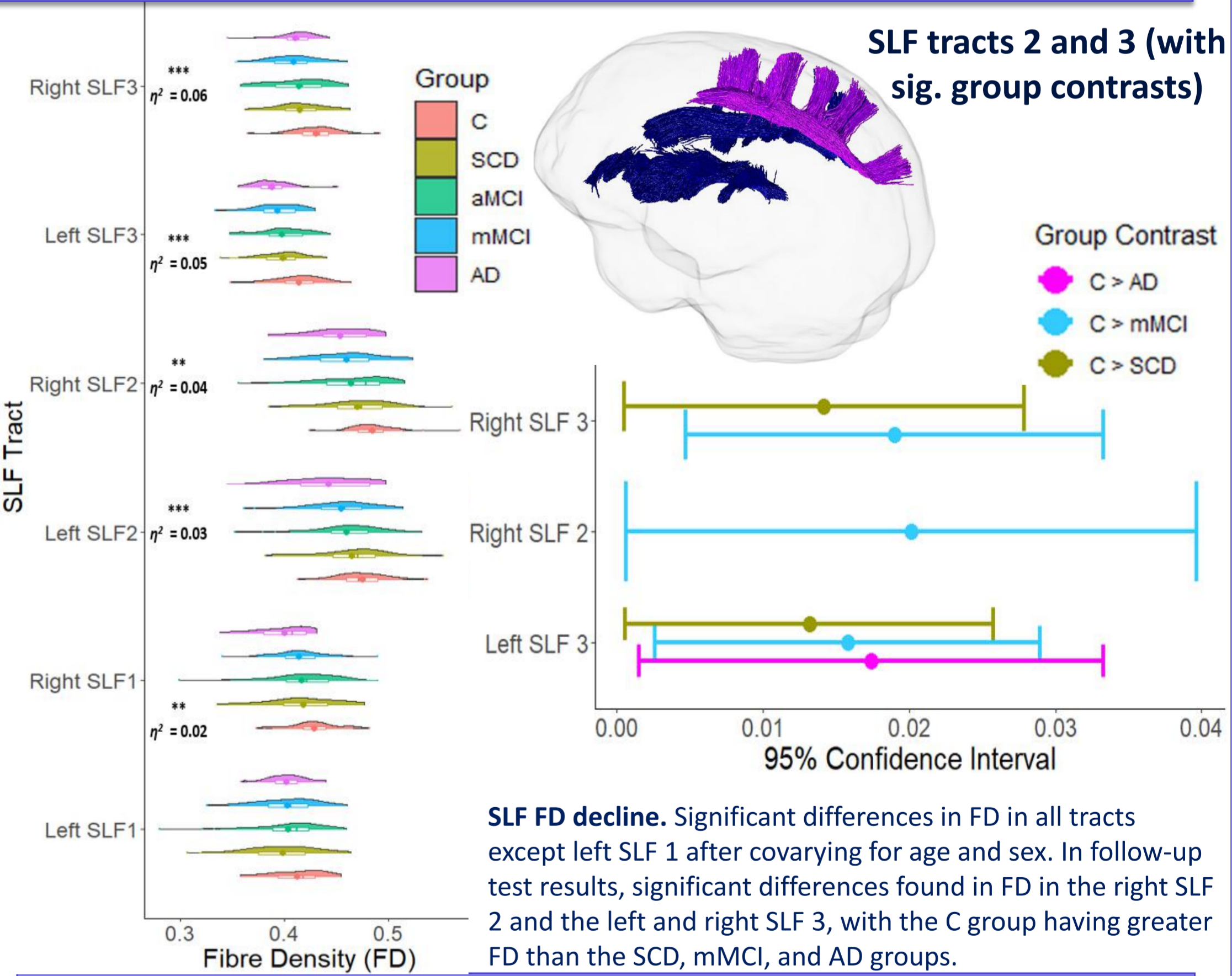
## Results



**Neuropsychological assessment.** Significant differences and decreasing linear trends between groups in processing speed and inhibition (accounting for age, sex, and education). Groups significantly differed in all individual tests except for Stroop Word Reading and Hayling's Congruent, Incongruent Sentences. Significant follow-up tests results were evident between most groups, but none were found between C and SCD.



**Partial Least Squares.** Significant association between FD in left SLF 2 and 3 tracts and inhibition but not processing speed after covarying for age and sex. All inhibition measures except Total Category Errors significantly contributed to the latent variable.



## Discussion

- Inhibition and processing speed** impaired in MCI and AD groups
  - Standardised tests detect cognitive changes in impaired groups, and more so in inhibition than processing speed
- WM fibre density (FD) in SLF** differed between groups, but not FC, and little for FDC
  - Density, rather than volume of the fibre, steadily decreased between groups
  - While C and SCD groups had similar cognitive performance, the SLF FD differed. The C group had greater SLF FD, while the SCD group's SLF FD was more similar to the MCI and AD groups
- Inhibition, and not processing speed** significantly correlated with FD in the left SLF 2 and 3
  - The SLF plays a critical role in inhibition processes in AD risk cohorts

## Conclusion

Our findings suggest that specific microstructural changes in the SLF, namely FD, may provide a very early biomarker of changes occurring in AD. Chiefly, individuals with subjective memory impairments showed FD changes before objective impairments were evident.

## References

- Rabin, L. A., Smart, C. M., and Amariglio, R. E. 2017. *Annual Review of Clinical Psychology*, 13(1), 369–396.
- Lockhart, S. N., & DeCarli, C. 2014. *Neuropsychology Review*, 24(3), 271–289.
- Perry, R. J., & Hodges, J. R. 1999. *Brain*, 122(3), 383–404.
- Bennett, I. J., & Madden, D. J. 2014. *Neuroscience*, 12(276), 187–205.
- Sasson, E., Doniger, G. M., Pasternak, O., Tarrasch, R., and Assaf, Y. 2013. *Frontiers in Neuroscience*, 7(7 MAR), 1–13.
- Creemers, L. G. M., de Groot, M., Hofman, A., Krestin, G. P., van der Lugt, A., Niessen, W. J., Vernooij, M. W., and Ikram, M. A. 2016. *Neurobiology of Aging*, 39, 108–117.
- Raffelt, D. A., Tournier, J. D., Smith, R. E., Vaughan, D. N., Jackson, G., Ridgway, G. R., and Connelly, A. 2017. *NeuroImage*, 144, 58–73.
- Tournier, J. D., Smith, R., Raffelt, D., Tabbara, R., Dhollander, T., Pietsch, M., Christiaens, D., Jeurissen, B., Yeh, C. H., and Connelly, A. 2019. *NeuroImage*, 202(August), 116137.

## Acknowledgements

Funding from Brain Research New Zealand (BRNZ)  
We thank the participants and DPRC staff for giving their time for this study.