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Visual analysis of fractional anisotropy and mean diffusivity of white matter tracts in

stroke patients using tract-based spatial statistics

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HEART & STROKE FOUNDATION Canadian Partnership for Stroke Recovery

BACKGROUND

- Diffusion Tensor Imaging (DTI) is an MRI-based neuroimaging technique that provides a visual representation of white mater tracts by mapping water diffusion *in vivo*
- Previous studies have shown that FA increases from baseline in the first 2 years poststroke¹ and MD increases slightly at the chronic stage²
- Fractional anisotropy (FA) measures the degree of directionality of water movement, with a higher FA value indicating a more intact white matter tract

PARTICIPANTS

- 68 stroke patients whose data was collected from a study funded by the National Institute of Health, conducted at Sunnybrook Health Sciences Centre, Toronto (n=45) and the Chicago Medical Center (n=23)
- 27 normal control subjects collected from the FIBA study conducted at Sunnybrook Health Sciences Centre
- Radial diffusivity (RD) measures water diffusion lateral to the main tract direction
- Mean diffusivity (MD) is the vector sum of all water directions

PURPOSE

To understand the effects of stroke on white matter tracts, especially how the hemisphere contralateral to stroke location is affected in terms of FA, MD, and RD

METHODS

- FA, MD, and RD maps were generated using FMRIB's Diffusion Toolbox, part of FSL^{3,4,5,7,8,9,10}
- Voxelwise statistical analysis of FA, MD, and RD data was carried out using TBSS, part of FSL^{4,6} which allows voxel-by-voxel comparison of white matter tracts between patients and controls
- Stroke subgroups were analyzed in comparison to controls using visual analysis
- White Matter Tracts were identified using the John Hopkins atlas

Anterior corona radiata

RESULTS

nferior fronto-occipital

| | Tah | le 1 - Der | nogranl | hics | | | | |
|------------------|-----|--------------------------|-------------------|-------------|-----------------------|--|--------------|----------------------------------|
| | n | Age (SD) | Sex (% males) | YOE (SD) | days post stroke (SD) | | LEGEND: INTE | RPRETING DTI IMAGES |
| Stroke | 68 | 64.2 (12.7) ^a | 55.9 ^b | 14.5 (3.2)ª | 435.9 (248.9) | FRACTIONAL ANISOTROPY | Green | - Not significant |
| Normal Controls | 27 | 70.3 (6.8) | 44.4 | 16.2 (3.1) | N/A | In patients with right hemispheric stroke it was found that there was an | Yellow, Red, | - Significant difference betweer |
| Left Stroke | 19 | 67.7 (14.3) | 52.6 | 14.8 (2.9) | 431.3 (137.1) | increase in FA on the contralateral (left) hemisphere | Orange | patients and controls |
| Right Stroke | 21 | 61.3 (9.8) | 66.7 | 14.3 (2.9) | 431.8 (373.8) | | | |
| Bilateral Stroke | 24 | 65.6 (13.6) | 45.8 | 14.3 (3.7) | 400.1 (192.4) | -Forceps minor | | —— Forceps minor |

fasciculus

| Left Frontal Stroke | 10 | 64.3 (14.8) | 40.0 | 14.5 (2.8) | 432.4 (148.2) |
|--|----|-------------|------|------------|---------------|
| Right Frontal Stroke | 9 | 60.1 (9.7) | 77.8 | 14.9 (2.7) | 441.2 (209.6) |
| Bilateral Frontal Stroke | 17 | 63.9 (13.9) | 47.1 | 13.3 (2.8) | 432.3 (215.4) |
| Other Stroke (non-frontal, non-subcortical) | 24 | 67.9 (12.9) | 58.3 | 15.2 (3.4) | 337.8 (232.7) |

52.8

14.0 (2.8)

63.1 (13.0)

^a Significantly different than controls, p<0.05 ^b Not significantly different than controls, $x^{2}(1)=0.31$

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right stroke FA control < patients, p < 0.05



right stroke FA, control < patients, p < 0.05



External capsule -Sagittal stratum

Anterior corona radiata



right stroke FA control < patients, p < 0.05

MEAN DIFFUSIVITY

Frontal Stroke

• Patients had an increase in MD in both hemispheres when stroke was contained to one region



Left stroke MD control < patients, p < 0.05



434.6 (192.1)

Right stroke MD control < patients, p < 0.05

Bilateral stroke MD control < patients, p < 0.05



Frontal stroke MD control < patients, p < 0.05



Left frontal stroke MD control < patients, p < 0.05





Right frontal stroke MD control < patients, p < 0.05



















Other stroke MD

RADIAL DIFFUSIVITY

 Patients had an increase in RD in both hemispheres when stroke was contained to one region













Left stroke RD control < patients, p < 0.05

Right stroke RD

control < patients, p < 0.05

Bilateral stroke RD control < patients, p < 0.05

Frontal stroke RD control < patients, p < 0.05

Left frontal stroke RD control < patients, p < 0.05

Right frontal stroke RD control < patients, p < 0.05

Bilateral frontal stroke RD control < patients, p < 0.05

Other stroke RD control < patients, p < 0.05

DISCUSSION

- This study suggests that stroke contained in one hemisphere can lead to changes in the microstructural integrity of the contralateral hemisphere
- The white matter integrity may improve in the hemisphere contralateral to stroke, possibly to compensate for the integrity loss in the ipsilateral hemisphere
- The increase in RD may be the main cause for the increase in MD, meaning stroke may increase lateral water diffusion throughout the white matter tracts of the brain

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