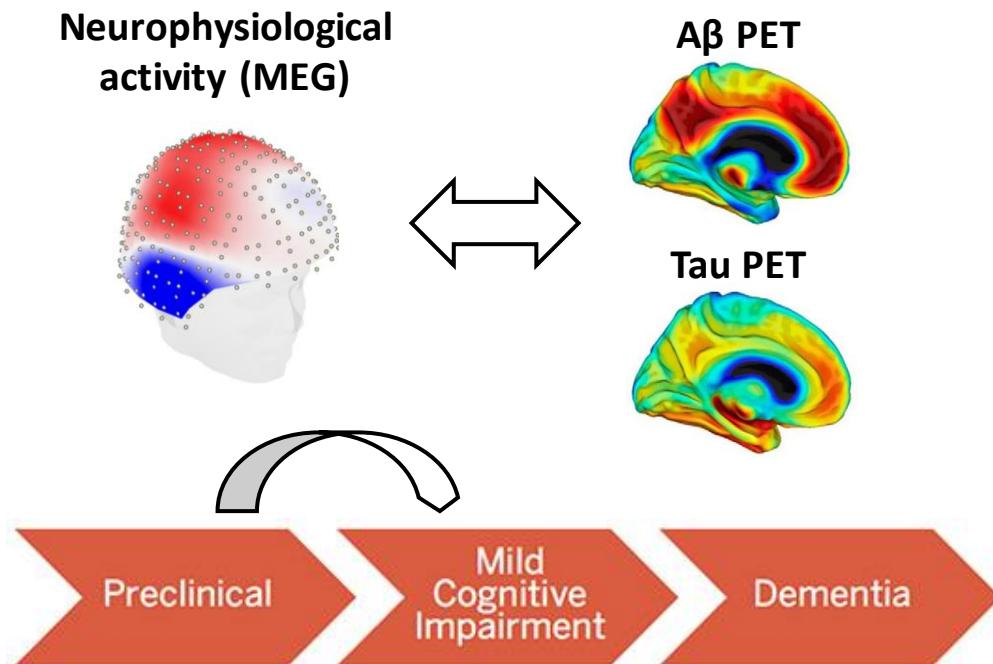




Neurophysiological activity linked to A β and tau relate to MCI progression

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Background



Aim

To test the value of neurophysiological activity features to predict progression to an MCI classification

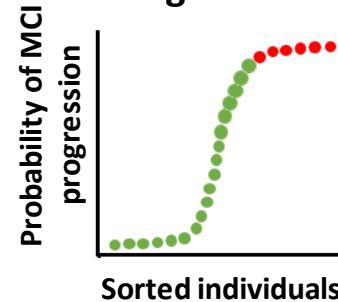
Methods

True label of participants

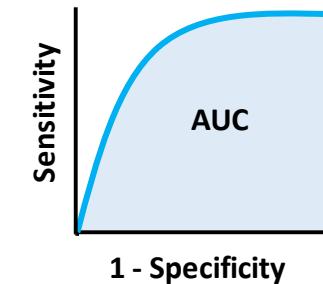
MCI progressors (n=14)

Non-progressors (n=89)

Logistic regression



Model accuracy



Comparison of pre-defined models

Clinical variables

Demographic
Baseline cognition

Structural Imaging

MRI

Neurophysiol.
activity

MEG

Radionuclide
imaging

A β PET
Tau PET

High accessibility

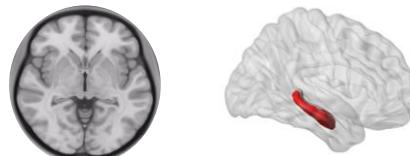
Low accessibility

Results

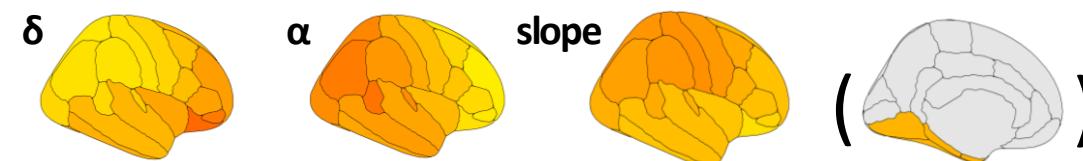
Model 1: Clinical (Age, sex, edu, MoCA, APOE ε4)



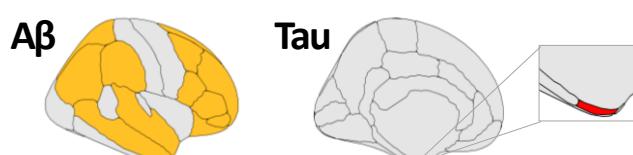
Model 2: Clinical + MRI (Hippocampal volume)



Model 3: Clinical + MEG (meta-ROI Alpha, Delta, Slope)

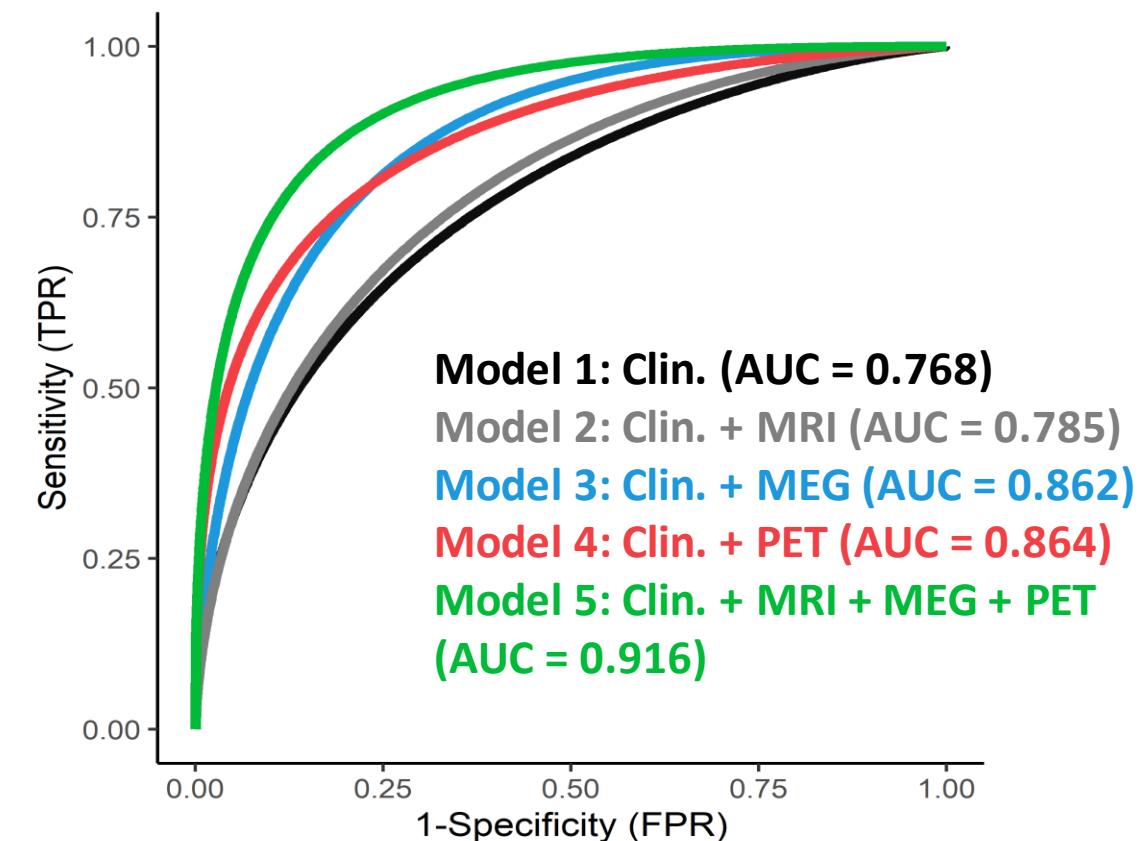


Model 4: Clinical + Aβ and Tau PET



Model 5: Clinical + MRI + MEG + PET

MEG features have high accuracy predicting MCI progression (Clin = MRI > MEG = PET)



Take home and acknowledgements

- **Neurophysiological activity** spectral features provide good accuracy identifying people progressing to MCI, adding valuable information beyond clinical/demographic and structural MRI measures and matching the accuracy of A β and tau PET.



Thanks to:

