

Offre n°2024-08225

Post-Doctoral Research Visit F/M Microstructural analysis in late-life depression using diffusion MRI multi-compartments models and tractometry

Le descriptif de l'offre ci-dessous est en Anglais

Type de contrat : CDD

Niveau de diplôme exigé: Thèse ou équivalent

Fonction: Post-Doctorant

A propos du centre ou de la direction fonctionnelle

The Inria Centre at Rennes University is one of Inria's eight centres and has more than thirty research teams. The Inria Centre is a major and recognized player in the field of digital sciences. It is at the heart of a rich R&D and innovation ecosystem: highly innovative PMEs, large industrial groups, competitiveness clusters, research and higher education players, laboratories of excellence, technological research institute, etc

Contexte et atouts du poste

Late-life depression (LLD) affects 7% of the population aged over 60 years and the number of cases of LLD is likely to increase given the demographic outlook. This is of concern given that LLD is an independent risk factor for mortality, a modifiable risk factor for dementia, and significantly associated with antidepressant resistance and suicide. However, the pathophysiology of LLD is plural and involves inflammatory, degenerative and vascular processes, thereby increasing clinical heterogeneity and the need for a better understanding of its mechanisms. Among LLD heterogeneity, apathy is common, increases LLD burden and is a well-established additional risk factor for cognitive decline among mild cognitive impairment and the general population but the underlying mechanisms for this additional risk of cognitive decline remain unknown [1].

Regarding apathy, its measurement has to be objective, robust and reproducible. Psychometric evaluations of apathy do not reach these criteria, being limited by patients' introspection abilities or by the definition of apathy chosen by the authors. A more objective approach is to operationalize apathy as a reduction in goal-oriented behaviors, which renders accessible a range of technologies for a valid measure of apathy. Actigraphy is an easy to employ, non-invasive device which records one's minute-to-minute daily motor activity. Actigraphy studies have provided insightful results of ecological activity in depression as in apathy in elderly population [2].

Recently, systemic inflammation was associated with apathy across deep white matter lesions in the elderly, suggesting that apathy would be the behavioral output of central inflammation. In vivo diffusion magnetic resonance imaging (dMRI) is sensitive to central inflammation and, combined with appropriate models, may provide proxy biomarkers of inflammatory processes in the brain. The dMRI sequence is a non-invasive imaging method that allows the visualization of the brain. In particular, it can detect abnormalities in brain structure associated with pathology, potentially before the onset of symptoms. A recent development in MRI has been quantitative MRI, a set of techniques for characterizing quantitative parameters of the brain's interne structure: its microstructure.

In addition to providing information about the structural geometry of the brain, dMRI can also provide microstructural metrics of brain tissues using tissue-specific biophysical models, such as fractional anisotropy. The well-known diffusion tensor imaging (DTI) model is one of the simplest ways to represent anisotropic diffusion, it is also the most widely used in clinical applications and has contributed to a better understanding of the clinical heterogeneity of major depression. However, the simplicity of DTI has its limitations. In crossed fibers, fiber dispersion, or areas with different tissues such as extra-axonal or free water, DTI cannot correctly represent the underlying microstructure. These limitations have led to the development of more complex microstructural diffusion models such as Multi-Compartment Models (MCMs), Neurite Orientation Dispersion and Density Imaging (NODDI) or Composite Hindered and Restricted Model of Diffusion (CHARMED) and its extension AxCaliber, which estimate specific properties directly from dMRI images [3]. These approaches are used to disentangle the complex signal by considering multiple isotropic and anisotropic compartments, each compartment representing a specific diffusion in cerebrospinal fluid, glial cells or axon bundles. The various three-compartment biophysical models differ in the representation used to describe the tissue-specific signal and the assumptions made about the model parameters. Promising studies have shown that MCMs appear to provide microstructural metrics with greater specificity and sensitivity to tissue properties than those obtained with conventional DTI. Indeed, subtle changes in tissue microstructure have been found in patients suffering from psychiatric disorders using an MCM [4].

Recent advances in diffusion models and tractography methods have led to the development of a new framework, called tractometry, for better assessment of WM microstructure. Specific fiber bundles can be reconstructed via tractography from diffusion models, and then the dMRI-derived measures are projected along the white matter tracts. Analysis of these bundle profiles can provide a more specific and localized investigation than looking at a region of interest or tract-averaged measures. Briefly, along-fiber approaches generate a bundle profile for each fiber, map the DTI metrics onto a centroid line, and then perform statistical analysis of the DTI metrics are multiple points along the centroid line to identify specific locations where the DTI metrics are different. This can be used to study normal brain development and to characterize areas of the brain in different brain conditions. As described previously, MCMs provide sensitive and specific metrics for certain microstructural properties. Recently, some studies have proposed to analyze each of the multiple tissue microstructural measures derived from these models independently using univariate analysis.

To advance in the understanding of apathy physiopathology in LLD, we conducted a study which evaluated the relationship between patterns of motor activity measured by actigraphy, and brain modifications of white matter microstructure. This study found two patterns of motor activity associated with apathy: a reduced diurnal mean activity, and an early chronotype pattern. These patterns of motor activity were associated with modified intra-network resting-state functional connectivity in key regions associated with the default-mode, the cingulo-opercular and the frontoparietal network. However, our preliminary work on microstructure metrics estimated from diffusion weighted imaging did not find significant associations between microstructural metrics of white matter and patterns of motor activity after adjustment for multiple. To detect more subtle links such as those between patterns of motor activity and microstructure, our approach needs to be improved [3].

References:

[1] Yuen, G. S. et al. Apathy in late-life depression: common, persistent, and disabling. The Am. J. Geriatr. Psychiatry 23,488–494 (2015).

[2] Jean-Charles Roy, Renaud Hédouin, Thomas Desmidt, Sébastien Dam, Iris Miréa-Grivel, Weyl Louise, Elise Bannier, Laurent Barantin, Dominique Drapier, Jean-Marie Batail, Renaud David, Julie Coloigner, Gabriel H. Robert, Quantifying Apathy in Late-Life Depression: Unraveling Neurobehavioral Links through Daily Activity Patterns and Brain Connectivity Analysis Biological Psychiatry: Cognitive Neuroscience and Neuroimaging, 2024, pp.1-30.

[3] Panagiotaki, E. et al. Compartment models of the diffusion mr signal in brain white matter: a taxonomy and comparison, Neuroimage 59, 2241–2254 (2012).364

[4] Renaud Hédouin, Jean-Charles Roy, Thomas Desmidt, Gabriel Robert, Julie Coloigner, Microstructural brain assessment in late-life depression and apathy using diffusion MRI multicompartments models and tractometry Scientific Reports, In press

[5] Abbas, M., Roy, J. C., Robert, G., & Jeannès, R. L. B. (2022, August). Utility of actimetry to detect apathy in old-age depression: A pilot study. In 2022 30th European Signal Processing Conference (EUSIPCO) (pp. 1203-1207). IEEE.

Principales activités

This project will focus on two major subjects:

- Developing a more accurate estimation and projection of microstructure metrics along the fiber as well as a new statistical method taking into account the shape complexity of the fibers.
- Extracting more accurate markers of patterns of motor activity measured by actigraphy such as in [5]

The developed approach will be tested on a cohort of patients suffering from late-life depression, with the aim of better estimating the microstructure and thus better understanding the neuronal modifications caused by this disease and apathy.

Location: The recruited person will work at Inria/IRISA, UMR CNRS 6074, among the Empenn U1228 team. The work will be in close link with Dr Gabriel Robert and Dr Jean-Charles Roy, psychiatrists from Centre Hospitalier Guillaume Regnier (CHGR).

Compétences

Requirements: We look for candidates strongly motivated by challenging research topics in Neuroimaging and clinical projects. The applicant should present a good background in neuroimaging analysis and signal processing. Good knowledge of computer science aspects is also mandatory, especially in Python.

How to apply? Please send us the following information and documents:

- Updated CV
- A list of publications
- A motivation letter
- A recommendation letter or the contact of a supervisor who could recommend your application.

Avantages

- · Subsidized meals
- Partial reimbursement of public transport costs
- Leave: 7 weeks of annual leave + 10 extra days off due to RTT (statutory reduction in working hours) + possibility of exceptional leave (sick children, moving home, etc.)
- Possibility of teleworking (after 6 months of employment) and flexible organization of working hours
- Professional equipment available (videoconferencing, loan of computer equipment, etc.)
- Social, cultural and sports events and activities
- Access to vocational training
- · Social security coverage

Rémunération

he postdoctoral researcher will receive a gross monthly salary of 2,788 euros.

Informations générales

- Thème/Domaine: Neurosciences et médecine numériques
- Ville: Rennes
- Centre Inria: Centre Inria de l'Université de Rennes
- Date de prise de fonction souhaitée :2024-11-01
- Durée de contrat :11 mois
- Date limite pour postuler: 2024-12-09

Contacts

- Équipe Inria: EMPENN
- Recruteur:
 - Coloigner Julie / julie.coloigner@irisa.fr

A propos d'Inria

Inria est l'institut national de recherche dédié aux sciences et technologies du numérique. Il emploie 2600 personnes. Ses 215 équipes-projets agiles, en général communes avec des partenaires académiques, impliquent plus de 3900 scientifiques pour relever les défis du numérique, souvent à l'interface d'autres disciplines. L'institut fait appel à de nombreux talents dans plus d'une quarantaine de métiers différents. 900 personnels d'appui à la recherche et à l'innovation contribuent à faire émerger et grandir des projets scientifiques ou entrepreneuriaux qui impactent le monde. Inria travaille avec de nombreuses entreprises et a accompagné la création de plus de 200 start-up. L'institut s'efforce ainsi de répondre aux enjeux de la transformation numérique de la science, de la société et de l'économie.

Attention: Les candidatures doivent être déposées en ligne sur le site Inria. Le traitement des candidatures adressées par d'autres canaux n'est pas garanti.

Consignes pour postuler

Please submit online: your resume, cover letter and letters of recommendation eventually.

Sécurité défense :

Ce poste est susceptible d'être affecté dans une zone à régime restrictif (ZRR), telle que définie dans le décret n°2011-1425 relatif à la protection du potentiel scientifique et technique de la nation (PPST). L'autorisation d'accès à une zone est délivrée par le chef d'établissement, après avis ministériel favorable, tel que défini dans l'arrêté du 03 juillet 2012, relatif à la PPST. Un avis ministériel défavorable pour un poste affecté dans une ZRR aurait pour conséquence l'annulation du recrutement.

Politique de recrutement:

Dans le cadre de sa politique diversité, tous les postes Inria sont accessibles aux personnes en situation de handicap.