

# Diagnostic value of epidermal nerve fibre patterns

Aila Särkkä

Mathematical sciences  
Chalmers University of Technology and the University of Gothenburg  
Gothenburg, Sweden

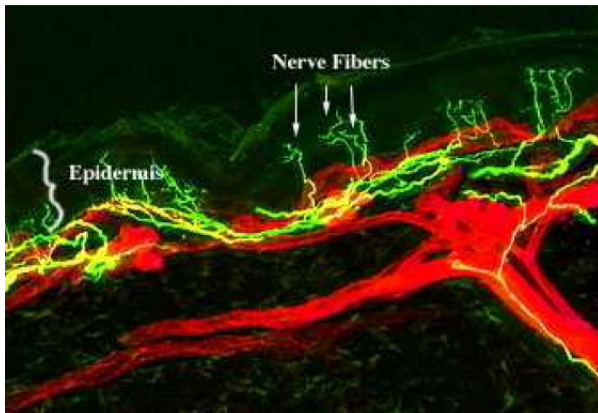
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- ▶ Mari Myllymäki and Aki Vehtari, Aalto University, Finland
- ▶ William R. Kennedy, Ioanna G. Panoutsopoulou, and Gwen Wendelschafer-Crabb, University of Minnesota

- ▶ Motivation: what are epidermal nerve fibers (ENFs)?
- ▶ Question: how is the ENF pattern affected by some covariates?
- ▶ Spatial analysis by using the second-order summary statistic Ripley's  $K$  function
  - How to include covariates?
  - Hierarchical Gaussian process regression
- ▶ Results for ENF data
- ▶ Current/future work

# Epidermal nerve fibers

ENFs are thin nerve fibers in the epidermis (the outmost living layer of the skin)



# Diagnostic value of ENFs

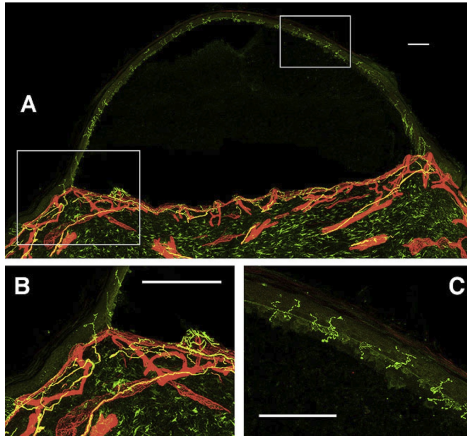
Kennedy *et al.* (1996, 1999): Subjects with diabetic neuropathy have

- ▶ less ENFs per surface area
- ▶ shorter summed length of ENFs per volume
- ▶ more clustered ENF pattern

than healthy subjects.

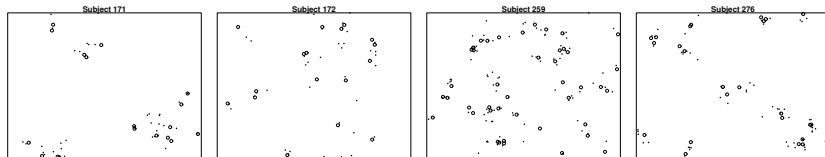
- ▶ 32 healthy subjects and 15 subjects with (mild or moderate) diabetic neuropathy
- ▶ Two skin blisters (3-6 samples) from calf of each subject (replicates)
- ▶ Age, gender and body mass index (BMI) of each subject available

# Skin blister



# Spatial pattern of ENF entry (base) and end points

We concentrate on **base points**, which are the locations, where the nerves enter the epidermis, and **end points**, which are the locations of the termination points of ENFs.



Locations of base points (open circles) and end points (small black dots) for two healthy and two diseased subjects



## Remark

The data are fibre patterns in 3D (with  $z$  direction much smaller than  $x$  and  $y$  directions) but we have looked only at the spatial pattern of base points and end points in 2D

- ▶ end points of ENFs sense heat and pain, and play, therefore, a more important role than the ENFs themselves (fibers can be omitted)
- ▶ our focus is on the spatial pattern of ENF coverage across the skin (2D projection appropriate)
- ▶ point patterns of ENF base and end points regarded as realizations of stationary spatial point processes

Our data are point patterns with replicates and non-spatial covariates

**Observation:** Subjects with diabetic neuropathy tend to have more clustered ENF patterns than healthy subjects.

**Question:** Is the (second-order) spatial structure of ENF base and end points affected by the disease status and other covariates (age, gender and BMI)?

## Second-order summary statistic

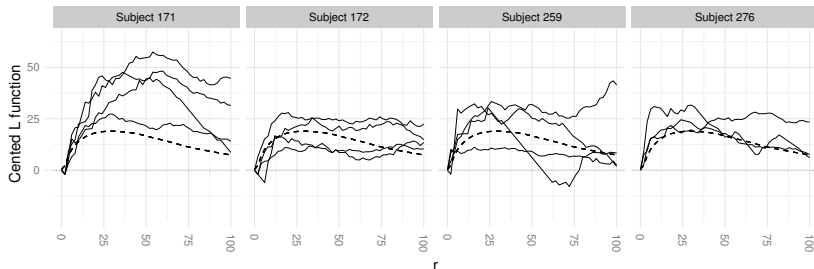
Ripley's  $K$  function:  $\lambda K(r)$  is the expected number of further points within distance  $r$  from an arbitrary point of the process, where  $\lambda$  is the intensity (mean number of points per unit area) of the process (Ripley, 1977).

We use a variance stabilizing and centered version of the  $K$  function (Besag, 1977), namely

$$L(r) - r = \sqrt{K(r)/\pi} - r,$$

which equals 0 under complete spatial randomness. Values less than zero indicate regularity and values larger than zero clustering.

# Individual $L(r) - r$ functions for end points



Subject 171 and Subject 172 are healthy, the other two diseased

# How to include non-spatial covariates?

- ▶ Pooled summary statistics for groups (see e.g. Diggle *et al.* 1991; Baddeley *et al.* 1993; Hahn, 2012)
- ▶ Summary statistic modeled by using linear mixed models (Myllymäki *et al.* 2012)
- ▶ Summary statistic modeled by using hierarchical Gaussian process regression

# Hierarchical Gaussian process regression model for centered $L$ function

- ▶ Flexible non-parametric models for making inference about the relationship between some characteristics (centered  $L$  function) and covariates
- ▶ We do not need to assume linear or any other particular form of dependence between the characteristics and covariates, a priori
- ▶ Bayesian approach

Our model is

$$y_{sjk} = L_{sj}(r_k) - r_k = f_1(\mathbf{x}_s, r_k) + f_2(s, r_k) + f_3(s, j, r_k) + \epsilon_{sjk},$$

where

- ▶  $f_1$  models the effect of age, gender, BMI and disease status (collected in  $\mathbf{x}_s$ ) together with distance  $r$
- ▶  $f_2$  models the subject-specific effect
- ▶  $f_3$  models the sample-specific effect
- ▶ latent function  $f = f_1 + f_2 + f_3$
- ▶  $\epsilon_{sjk}$ 's are independent and  $\sim N(0, \sigma^2)$

# Hierarchical model: $f_1$ (covariates) and $f_2$ (subject-specific effect)

$f_1$  is a Gaussian process (GP) with

- ▶ mean  $\overline{L(r_k) - r_k}$
- ▶ covariance function having an own length scale parameter for each covariate (age, gender, BMI, disease status) and for  $r$
- ▶ values of  $f_1$  are correlated within a subject and also between subjects due to similar covariate values.

$f_2$  is a GP with

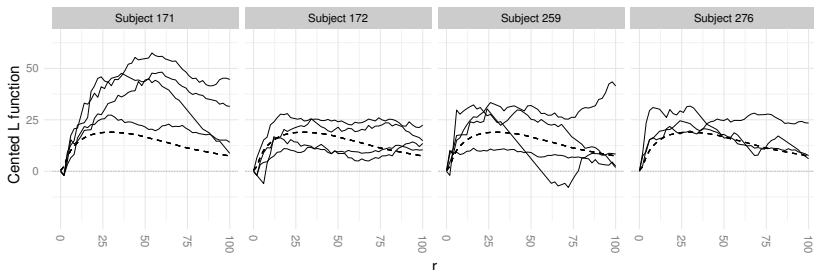
- ▶ mean zero
- ▶ covariance function, which is a priori the same for each subject



# Hierarchical model: $f_3$ (sample-specific effect)

$f_3$  is a GP with

- ▶ mean zero
- ▶ covariance function, where the variance parameter  $\sigma_{3s}^2$  is allowed to vary from subject to subject
- ▶ values of  $f_3$  are correlated only within a sample



# Hierarchical model

- ▶ Observation model  $\mathbf{y}|f, \sigma^2 \sim \prod_i N(y_i|f, \sigma^2)$

- ▶ GP prior

$$f(\mathbf{x})|\theta \sim GP(m(\mathbf{x}), k_1(\mathbf{x}, \mathbf{x}'|\theta_1) + k_2(\mathbf{x}, \mathbf{x}'|\theta_2) + k_3(\mathbf{x}, \mathbf{x}'|\theta_3))$$

- ▶ Hyperpriors

$$\sigma^2 \sim p(\sigma^2)$$

$$\theta_1 = (\phi_1, \sigma_1^2) \sim p(\phi_1)p(\sigma_1^2)$$

$$\theta_2 = (\phi_2, \sigma_2^2) \sim p(\phi_2)p(\sigma_2^2)$$

$$\theta_3 = \{\phi_3, \sigma_{3s}^2, s = 1, \dots, N\} \sim p(\phi_3) \prod_{s=1}^N p(\sigma_{3s}^2 | s_\sigma^2)$$

- ▶ Hyper-hyperprior  $s_\sigma^2 \sim p(s_\sigma^2)$

- ▶ Spacing of  $r$  values ( $r = 0, 12, 24, \dots, 96$  for end points)
- ▶ Piecewise polynomial compactly supported covariance functions (less smooth for  $f_3$  than for the first two components)
- ▶ Half-Student  $t$  and scaled inverse  $\chi^2$  priors for hyperparameters and for  $s_\sigma^2$

# Bayesian inference and posterior predictive $L$ functions

Since  $f$  and the likelihood are Gaussian, we can integrate out the latent function and obtain the *log marginal likelihood*

$$\log p(\mathbf{y}|\mathbf{X}, \theta, \sigma^2) = -\frac{n}{2} \log(2\pi) - \frac{1}{2} \log |K + \sigma^2 I| - \frac{1}{2} \mathbf{y}^T (K + \sigma^2 I)^{-1} \mathbf{y},$$

where  $\theta = (\theta_1, \theta_2, \theta_3)$  collects all the parameters of  $f$  and  $K$  is the covariance matrix.

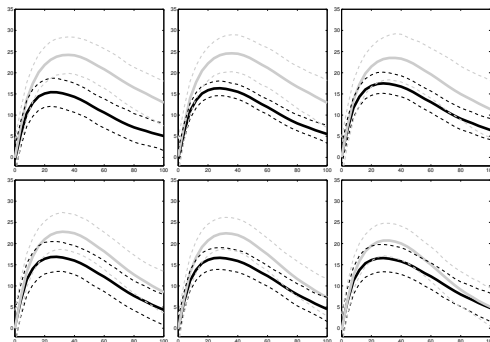
The posterior distribution of the latent function  $f_1$

$$p(f_1|\mathbf{y}, \mathbf{X}) = \int p(f_1|\mathbf{y}, \mathbf{X}, \theta, \sigma^2) p(\theta, \sigma^2|\mathbf{y}, \mathbf{X}) d\theta d\sigma^2$$

can be obtained by Monte Carlo integration over the hyperparameters

- ▶ To obtain the posterior distribution of the parameters, we run an MCMC simulation updating in turns the hyper-hyperparameter and the hyperparameters
- ▶ For sampling the Matlab toolbox GPstuff (Vanhatalo et al., 2013) is used

# Mean prediction centred $L$ curves (mean of the posterior predictive distribution of $f_1$ ) for end points

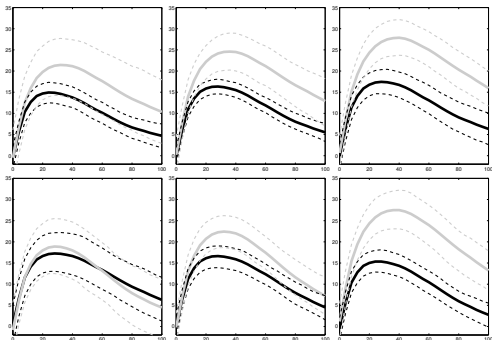


Female (first row), male (second row)

From left to right: Age 30, 45, 60; BMI is fixed to 25

Healthy (black), diseased (grey)

# Mean prediction centred $L$ curves for end points



Female (first row), male (second row)

From left to right: BMI 20, 25, 30; Age is fixed to 45

Healthy (black), diseased (grey)

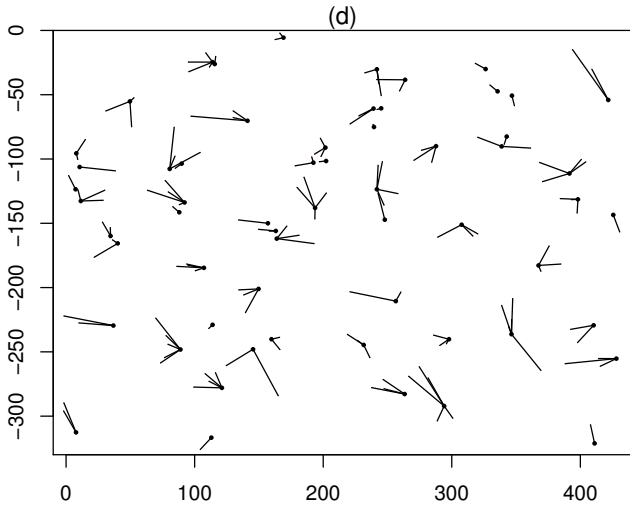
Base points: covariates (including disease status) do not seem to have any effect on the ENF pattern

End points

- ▶ diseased patterns clearly more clustered than healthy ones
- ▶ difference between healthy and diseased patterns is clearer for women than for men
- ▶ difference between healthy and diseased patterns is more easily seen for younger subjects and subjects with high BMI than for older subjects and subjects with low BMI
- ▶ effects of age, gender and BMI not evident



- ▶ 2D and 3D spatial point (and fibre) process models for ENFs
- ▶ Spatio-temporal models for ENF growth
- ▶ How to use replicates and include non-spatial covariates in the models?



Thank you!

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