

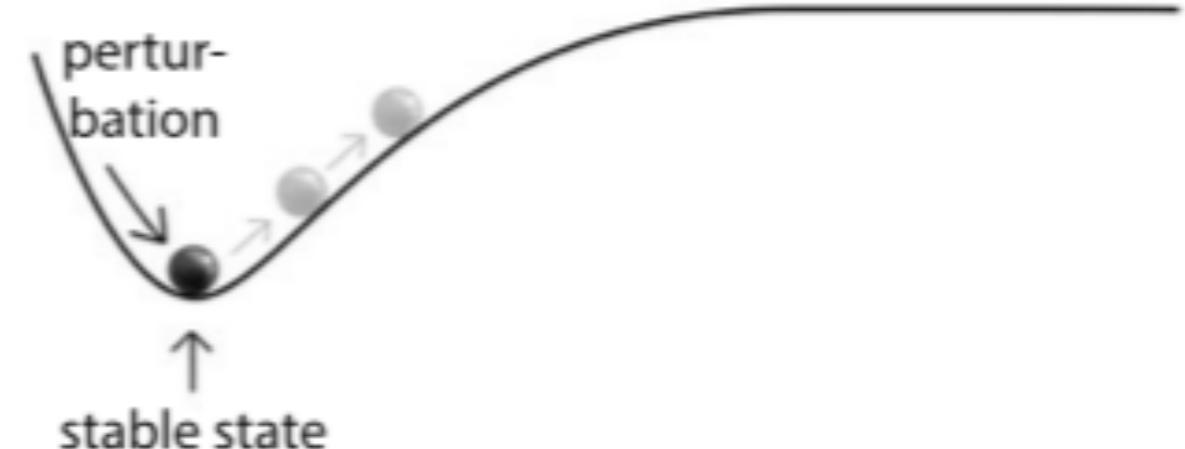
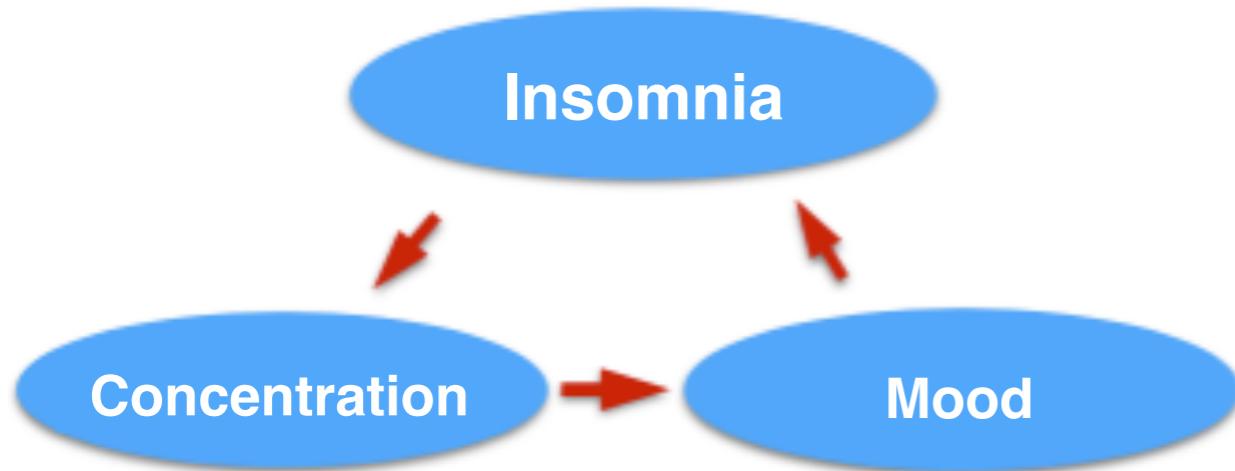
Symptom patterns and the course of depression

Claudia van Borkulo

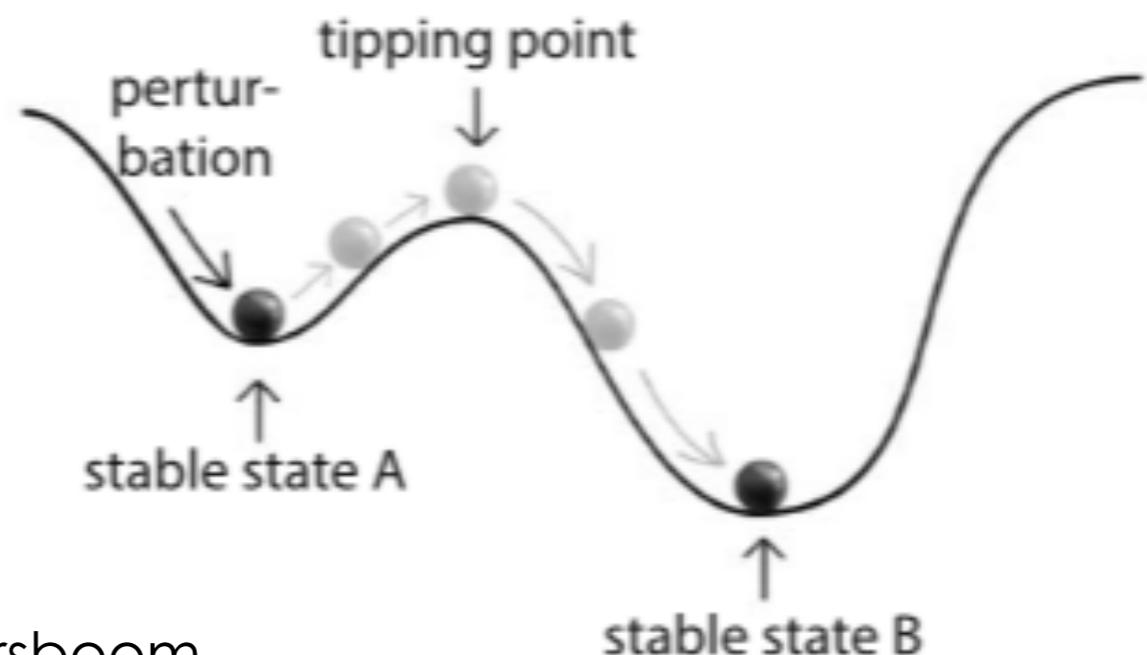
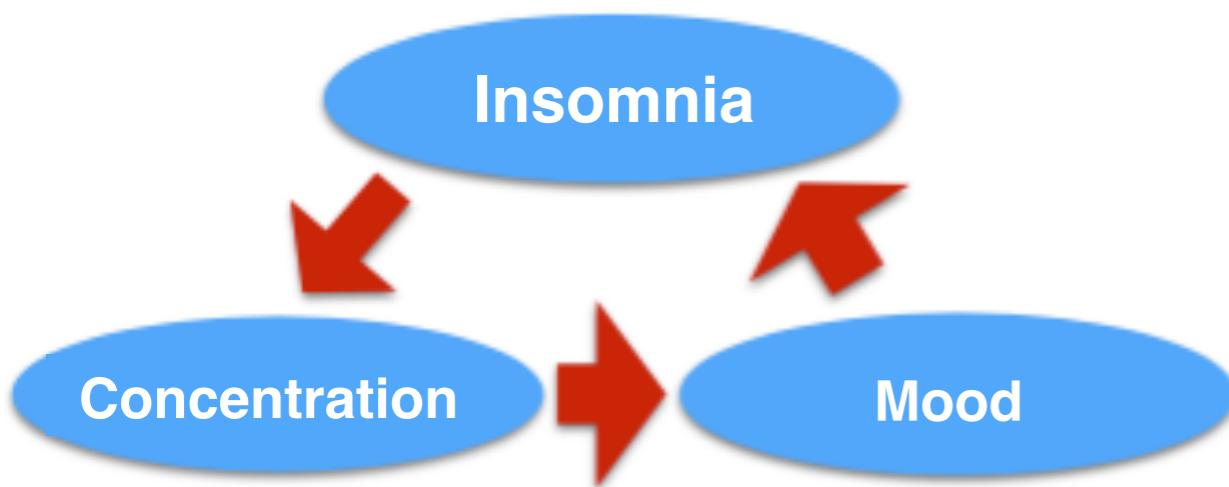
University Medical Center Groningen - University of Amsterdam

Promotors: R.A. Schoevers, D. Borsboom

Resilient system



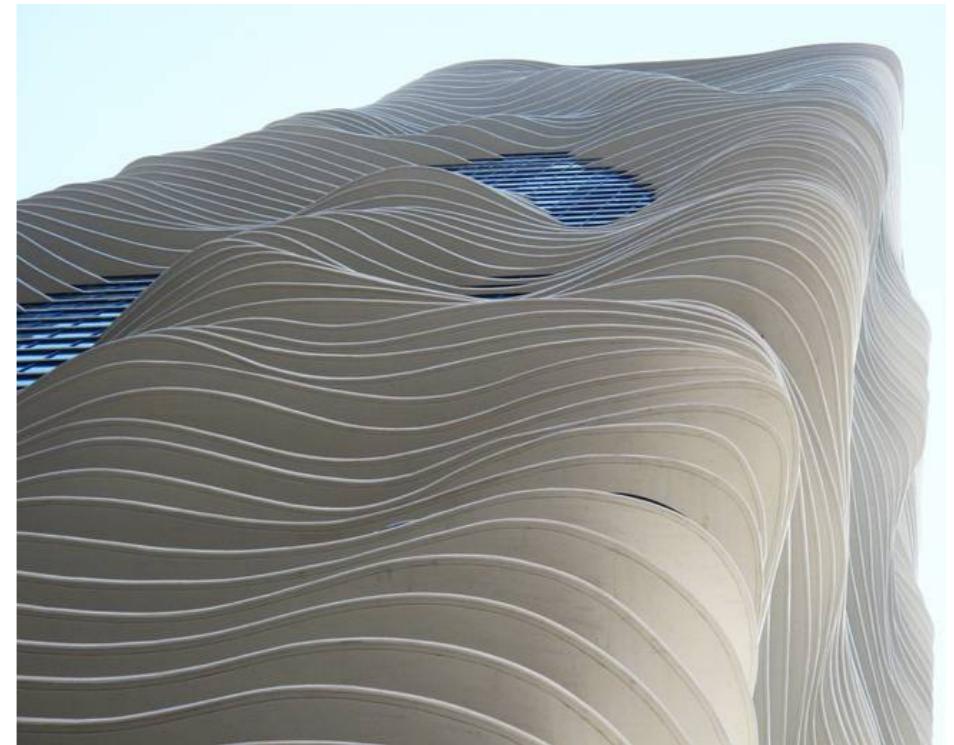
Vulnerable system



From Denny Borsboom

Outline

- Design of study
- Initial results
- Tackle some issues
- More results
- Discussion



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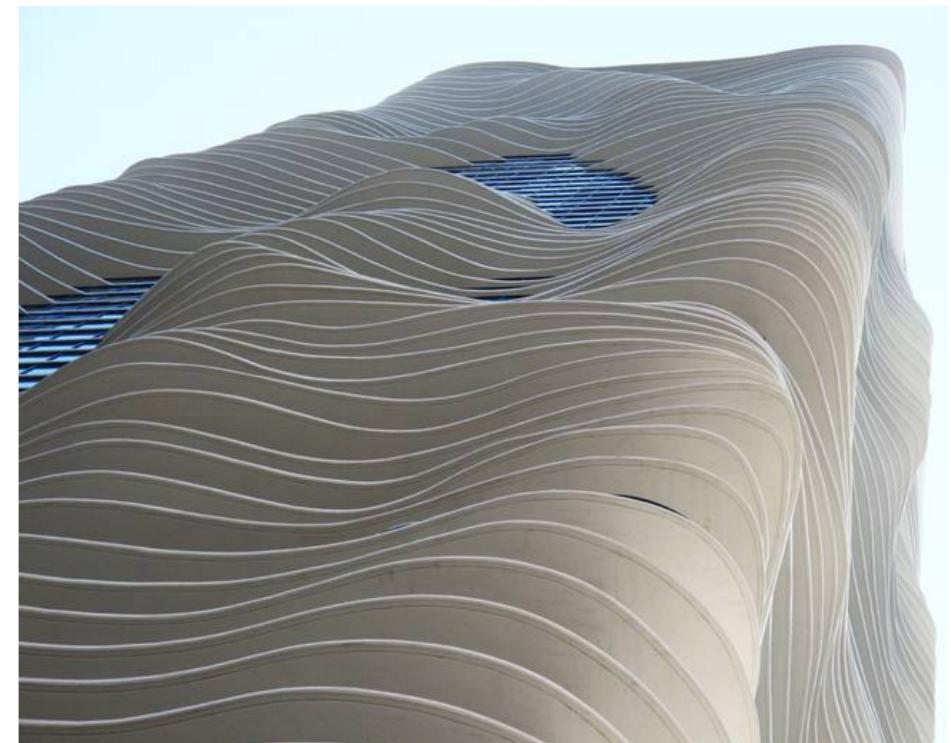
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Design of study

- 515 patients with MDD at baseline: those with persistent MDD (n = 253) and those with remitted MDD (n = 262)
- Networks estimated on 11 DSM criteria: from IDS at baseline
- Comparison of networks: Network Comparison Test



Design of study



Depressed



Persister

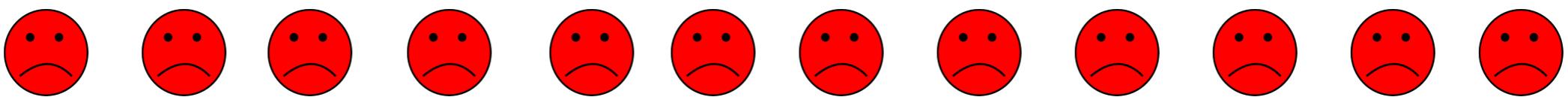


Not depressed

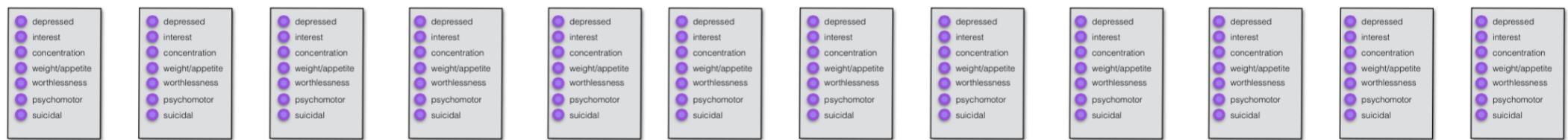


Remitter

Design of study



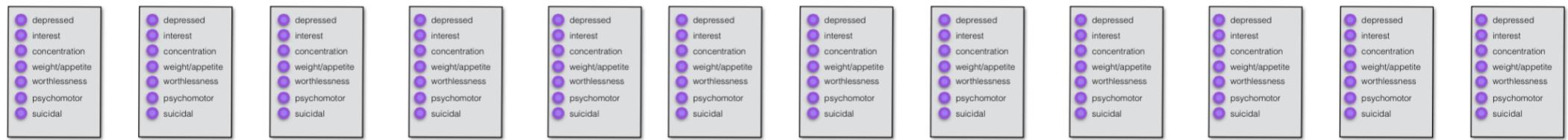
Baseline



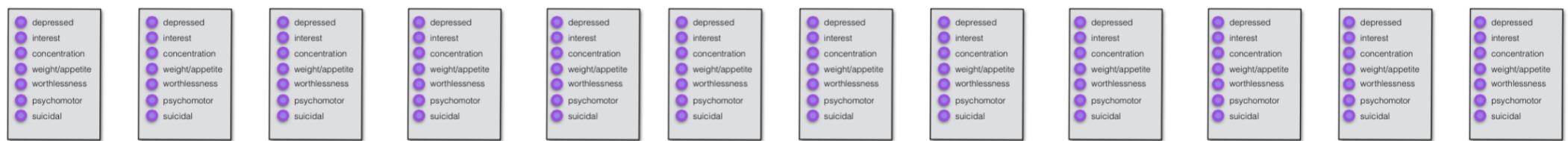
Design of study



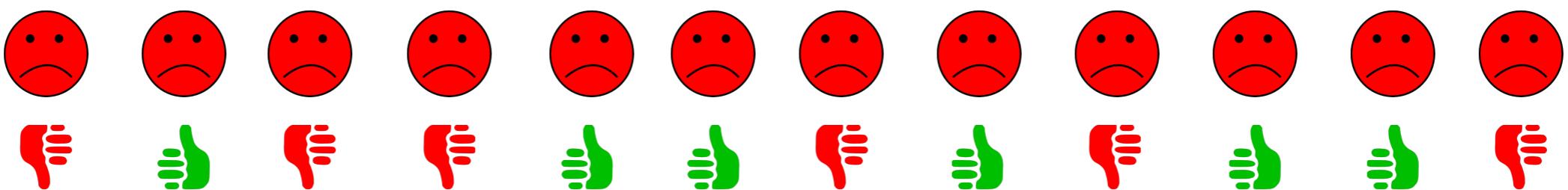
Baseline



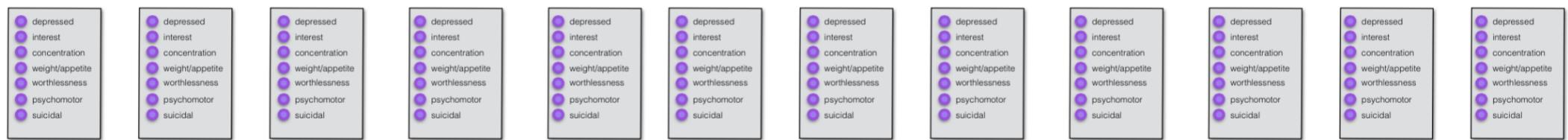
2-year
follow-up



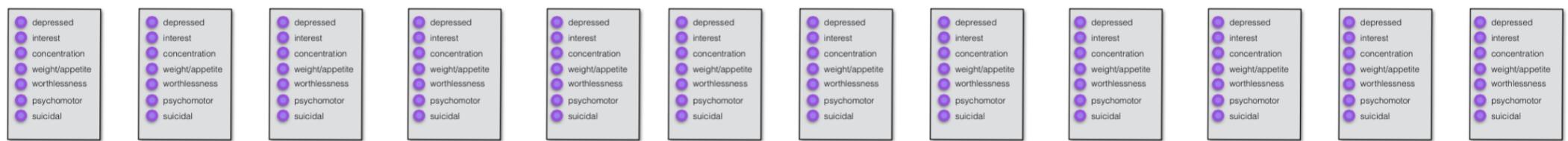
Design of study



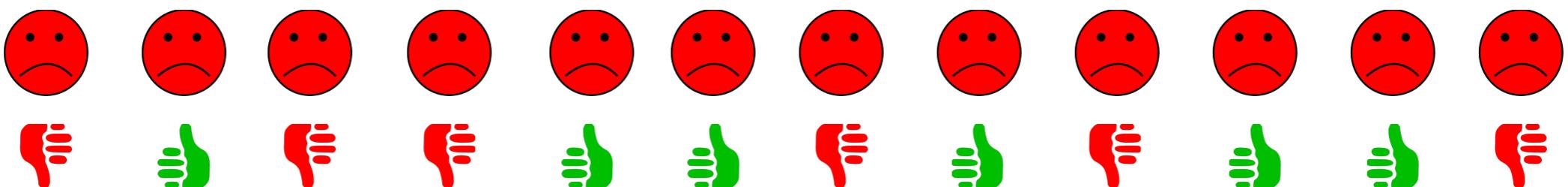
Baseline



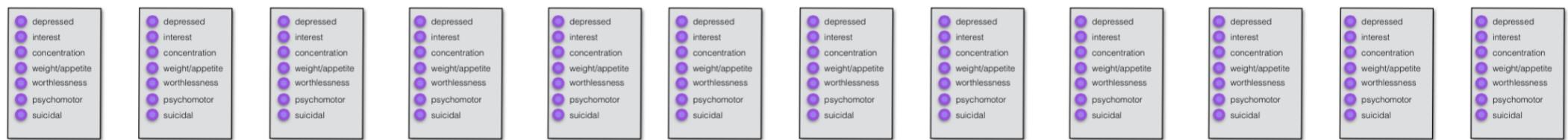
2-year
follow-up

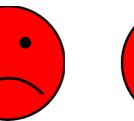


Design of study

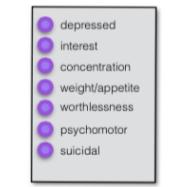
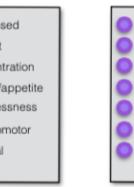
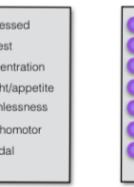
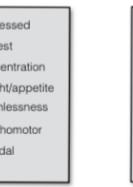
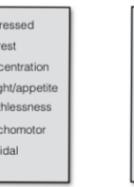
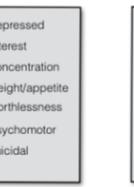
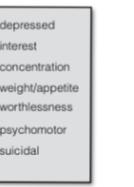
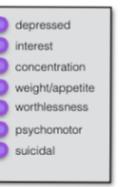
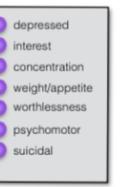
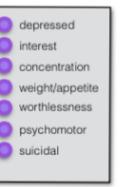
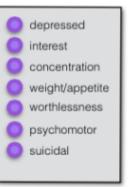
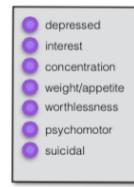


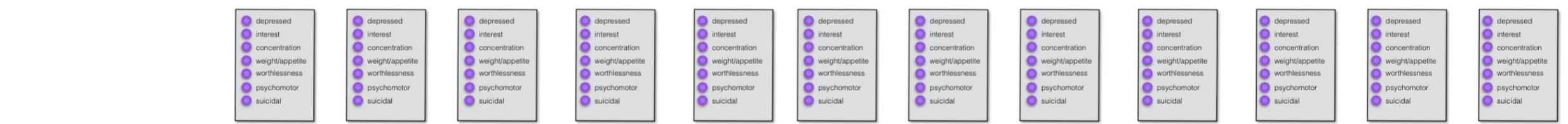
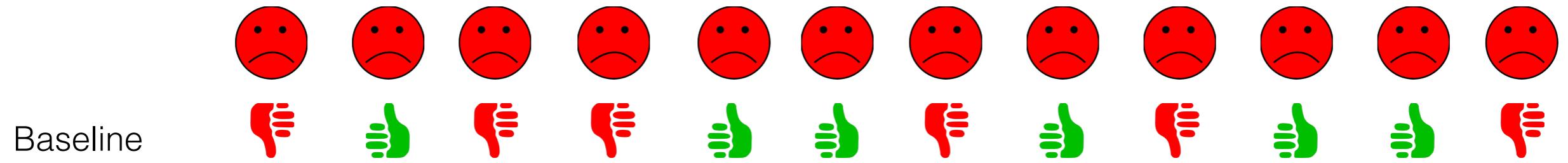
Baseline



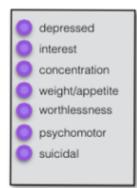
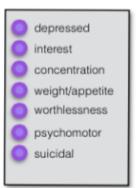
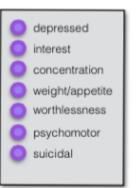
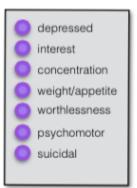
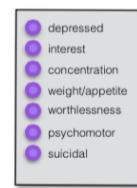
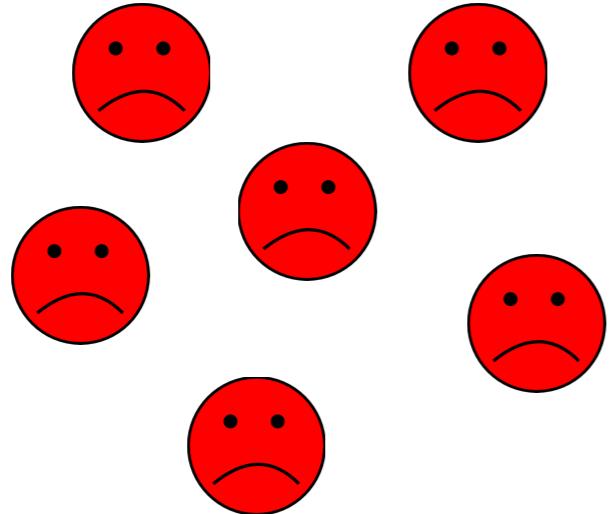


Baseline

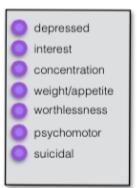
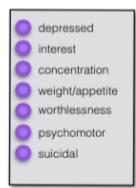
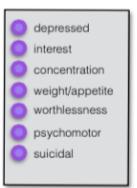
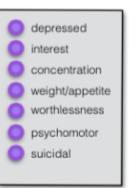
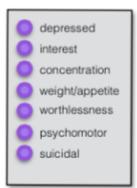
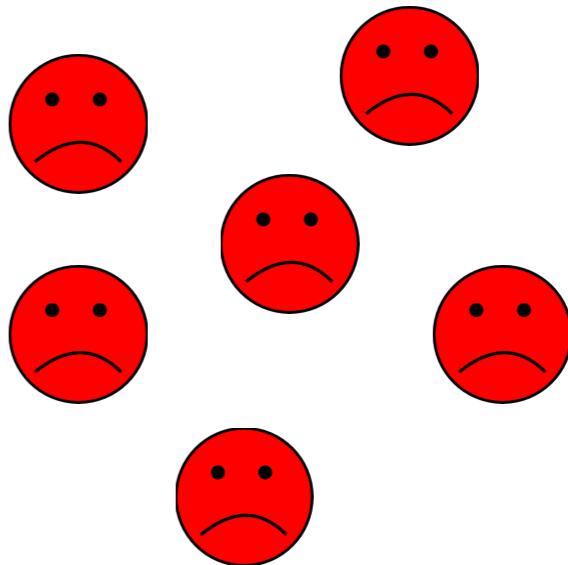




Persisters (253)



Remitters (262)



baseline

Design of study

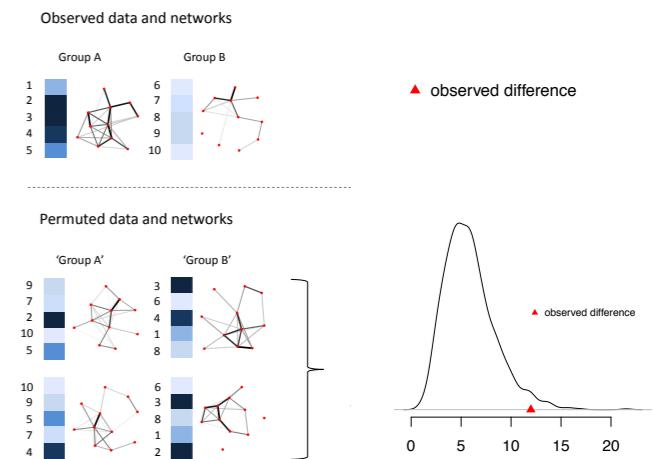
Network estimation

- Advanced method: L1-regularized partial correlations Epskamp et al., 2012
- Regularization: to find optimal balance between parsimony and goodness of fit of the network
- Low false positive rate Van Borkulo et al., 2014

Design of study

Network comparison

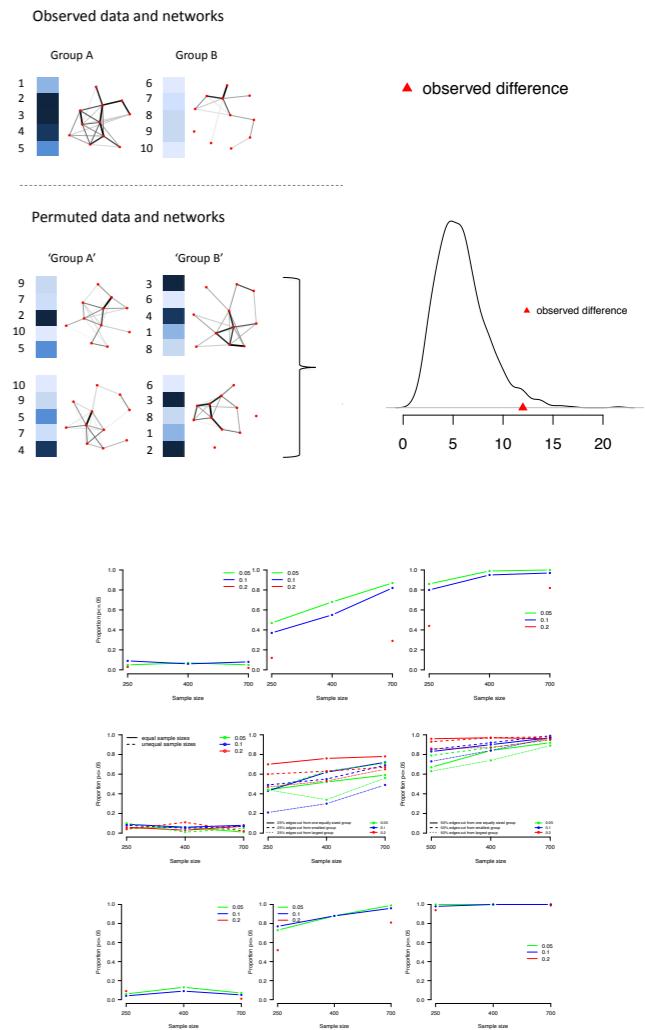
- With newly developed Network Comparison Test (NCT)
- Permutation test
- NCT performs well in a range of circumstances
 - Type I error rate is close to the nominal significance level
 - Power is sufficiently high if sample size and/or difference between networks are large enough



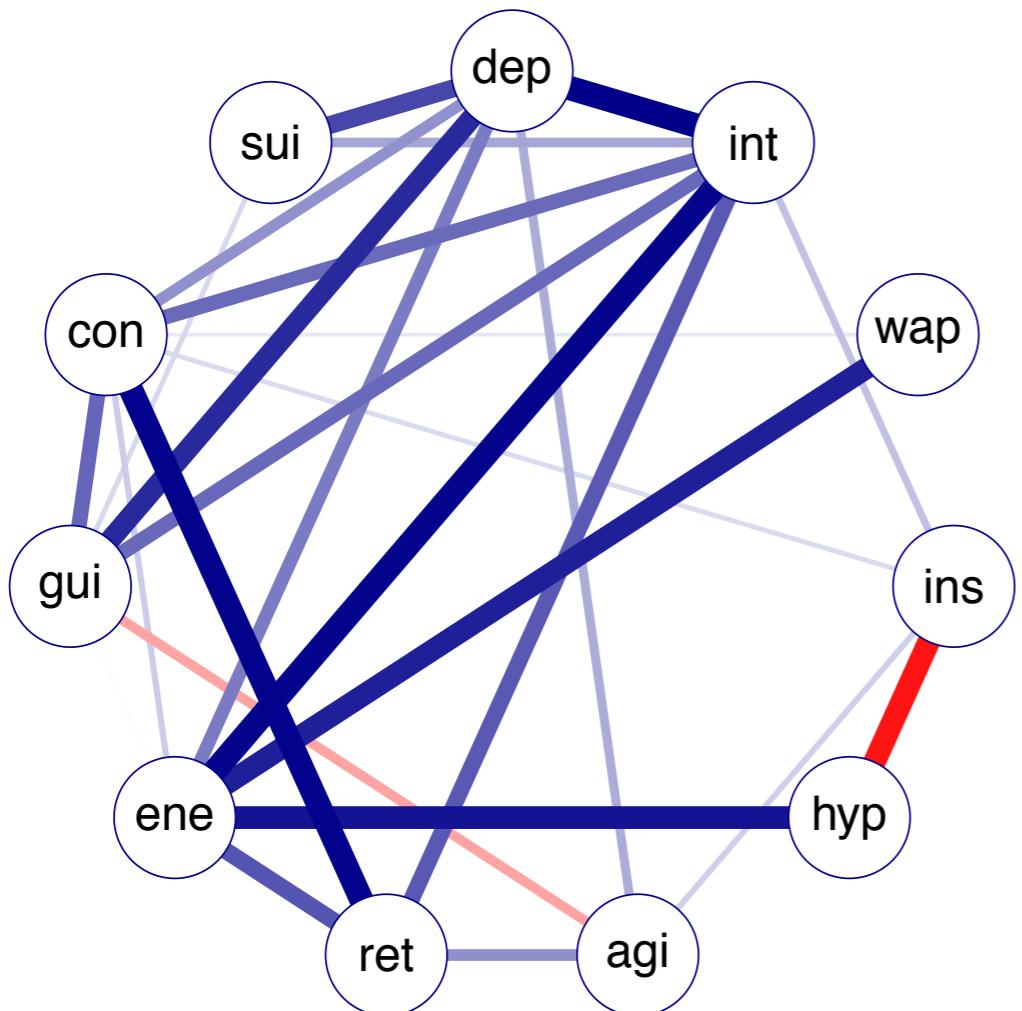
Design of study

Network comparison

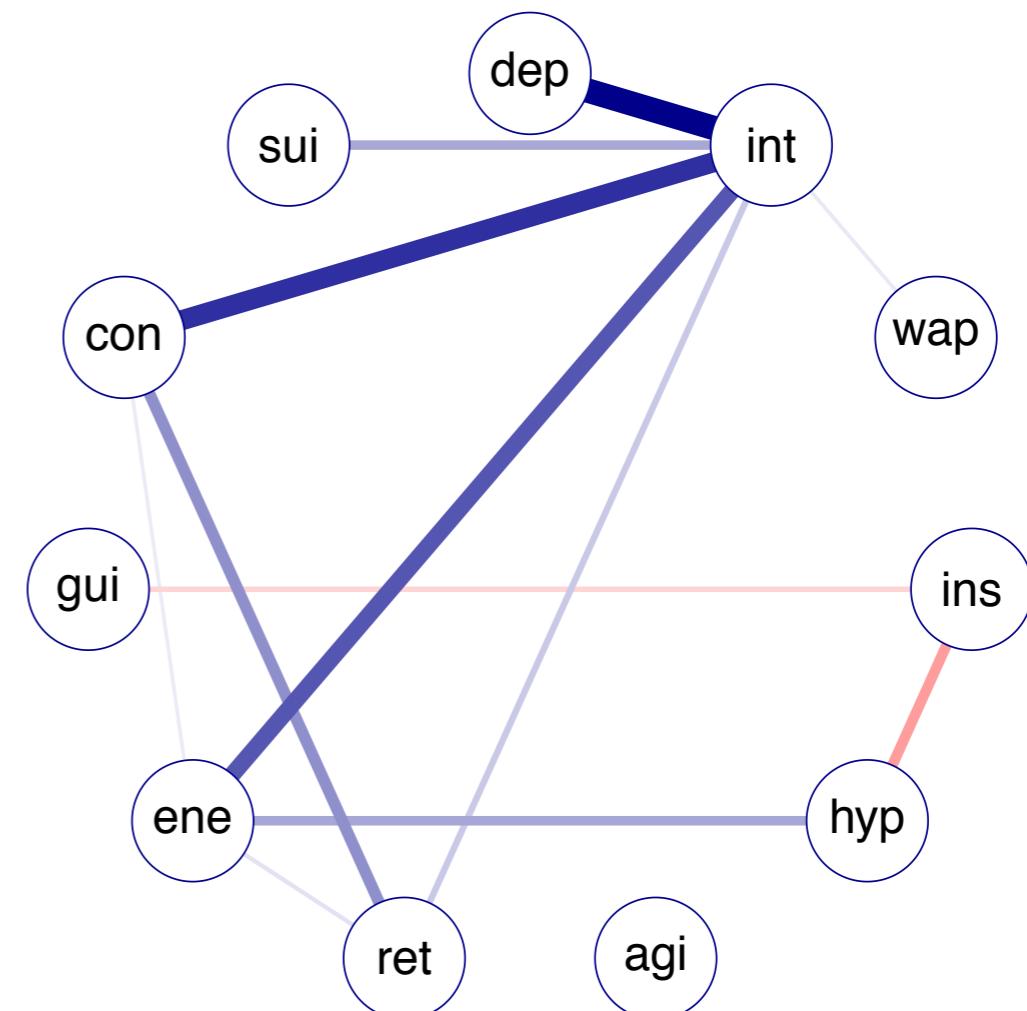
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Initial results

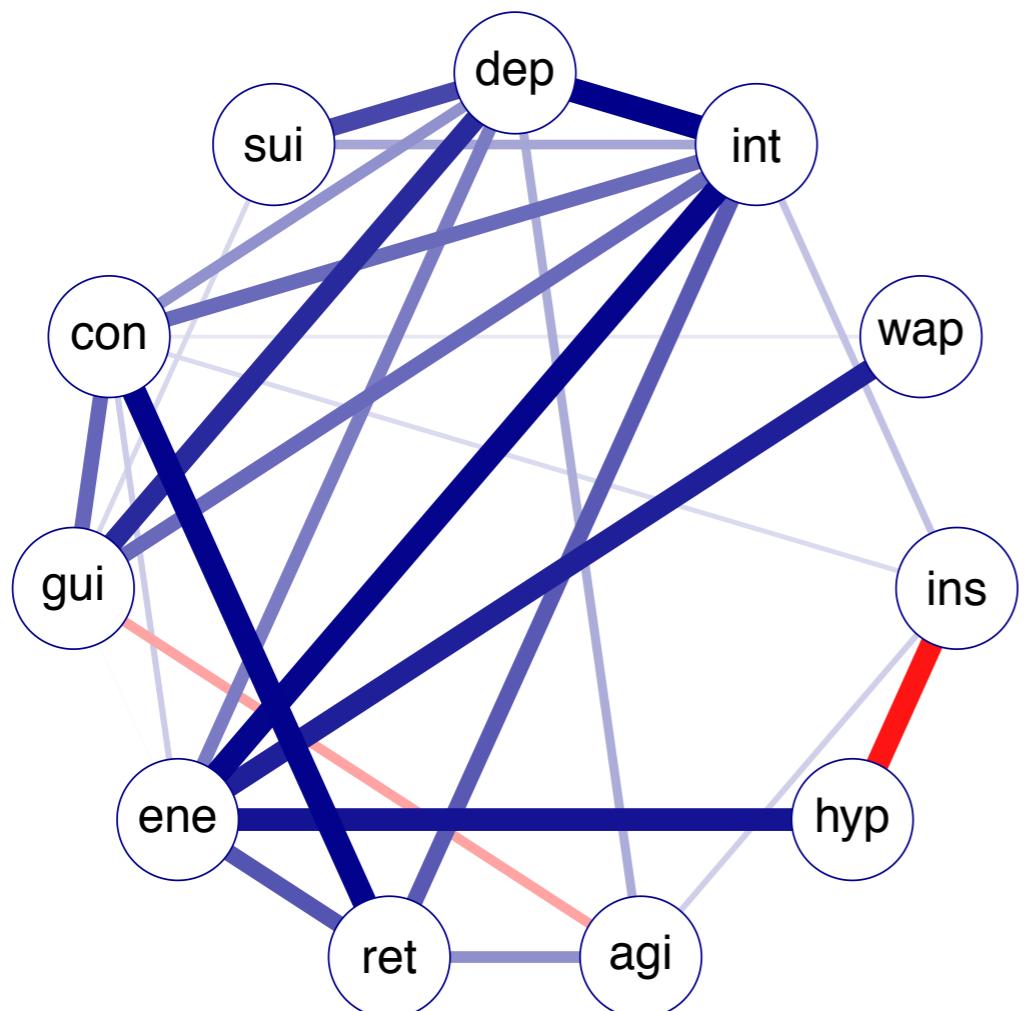


Persisters



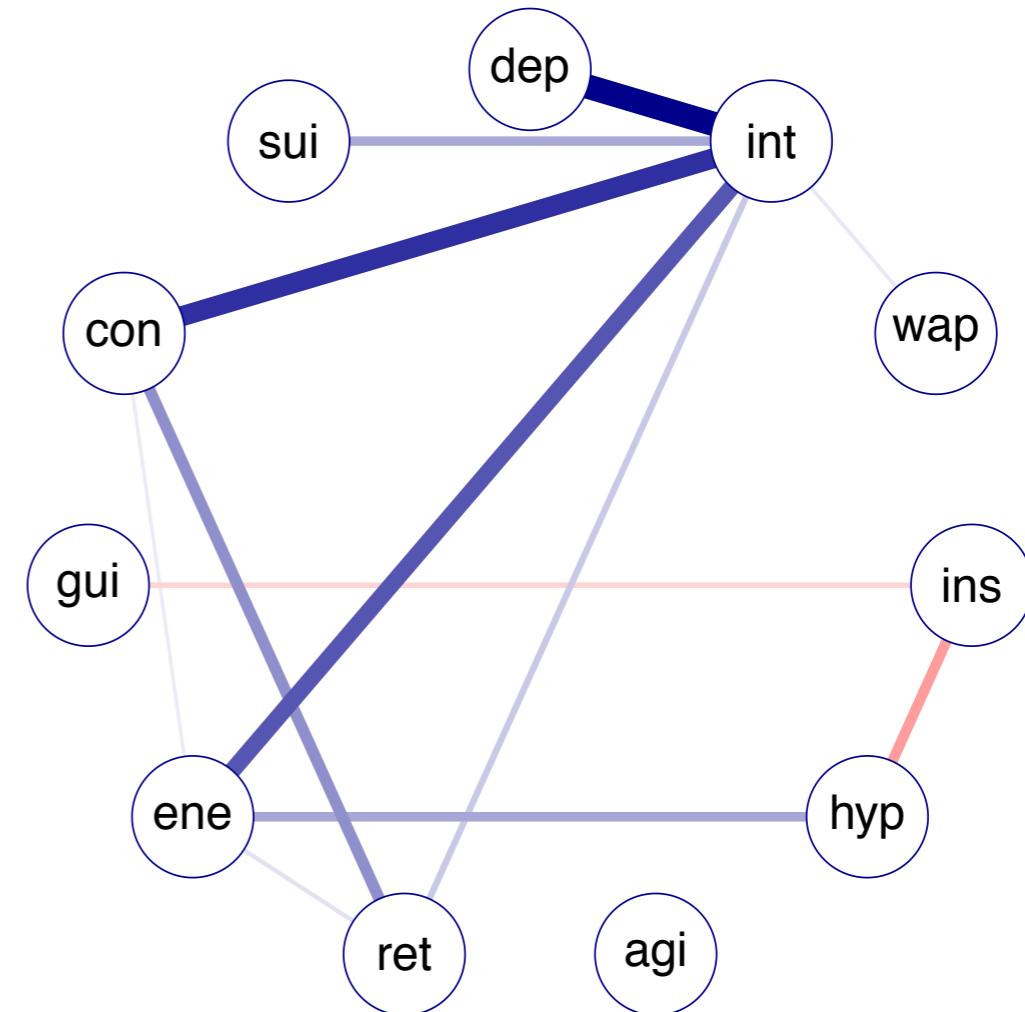
Remitters

Initial results



Persisters

$$P = .01$$



Remitters

But...

Table 2. Analysis of Item Scores of Remitters and Persisters

Symptom (abbreviation)	Mean (sd)		Statistic ^a	P Value
	Persisters (n=253)	Remitters (n=262)		
Depressed mood (dep)	1.85 (0.75)	1.53 (0.72)	25446	< 0.001
Loss of interest or pleasure (int)	1.38 (0.71)	1.12 (0.61)	26493	< 0.001
Weight/appetite change (wap)	1.16 (0.79)	1.24 (0.79)	34990	0.27
Insomnia (ins)	1.39 (0.81)	1.15 (0.71)	27506	0.001
Hypersomnia (hyp)	0.68 (0.87)	0.79 (0.88)	35646	0.11
Psychomotor agitation (agi)	1.30 (0.85)	1.23 (0.90)	31683	0.36
Psychomotor retardation (ret)	1.26 (0.94)	0.89 (0.90)	25864	< 0.001
Fatigue or loss of energy (ene)	1.89 (0.76)	1.62 (0.70)	26568	< 0.001
Feeling guilty (gui)	1.89 (1.12)	1.78 (1.15)	31448	0.28
Concentration/decision making (con)	1.73 (0.77)	1.47 (0.76)	27039	< 0.001
Suicidality (sui)	0.99 (0.82)	0.82 (0.85)	29236	0.01



Tackle some issues

Are results confounded by baseline severity?

Two strategies to tackle this issue:

1. Match number of patients with same IDS sum score
2. Matching by partialing out severity

25	25
25	27
27	27
27	27
27	27
27	27
28	28
28	29

Tackle some issues

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1. Match number of patients with same IDS sum score
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25	25
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Tackle some issues

Are results confounded by baseline severity?

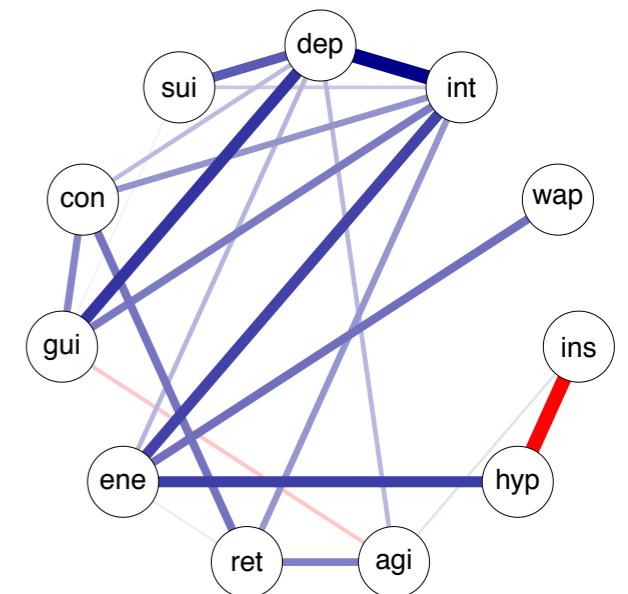
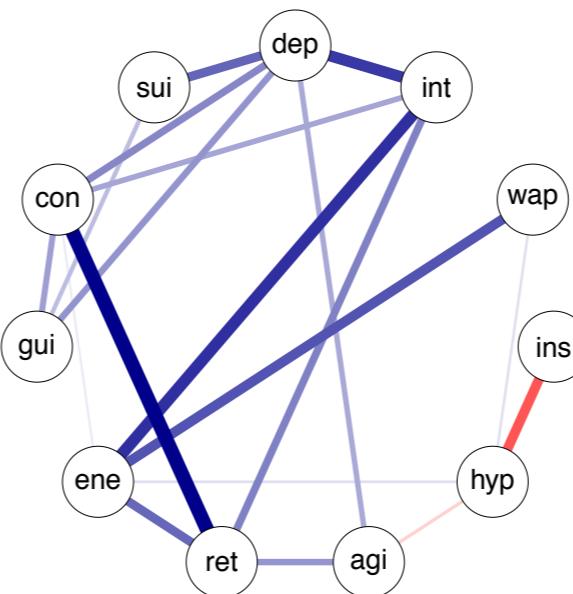
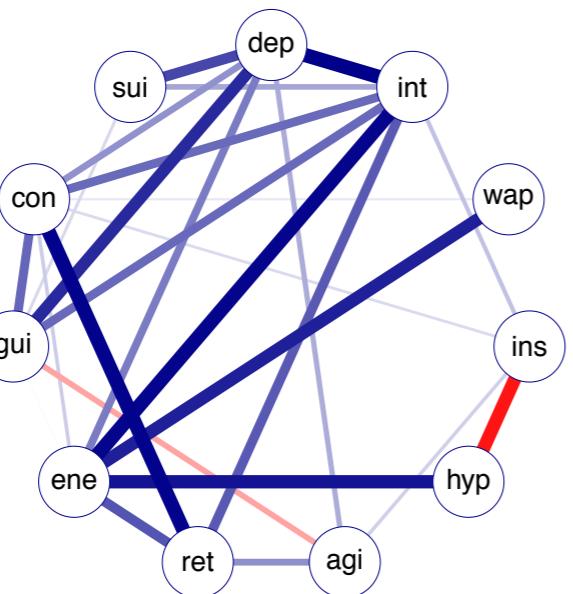
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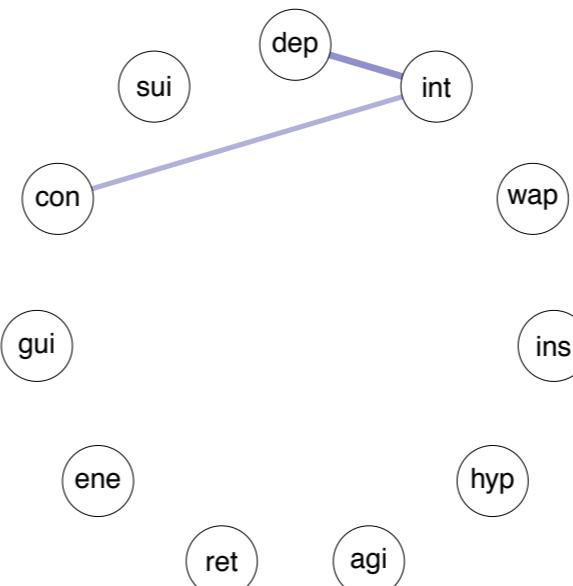
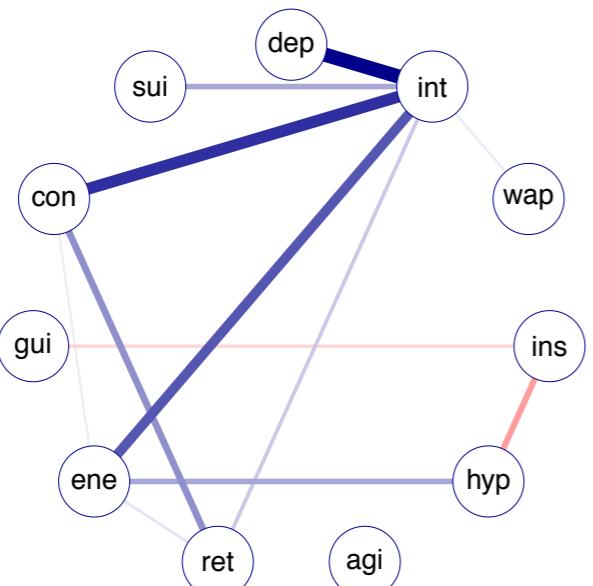
25	25
27	27
27	27
27	27
27	27
28	28

Tackle some issues

Persisters



Remitters



original data
($P = .01$)

matched on IDS
($P = .04$)

matched on WHODAS
($P = .02$)

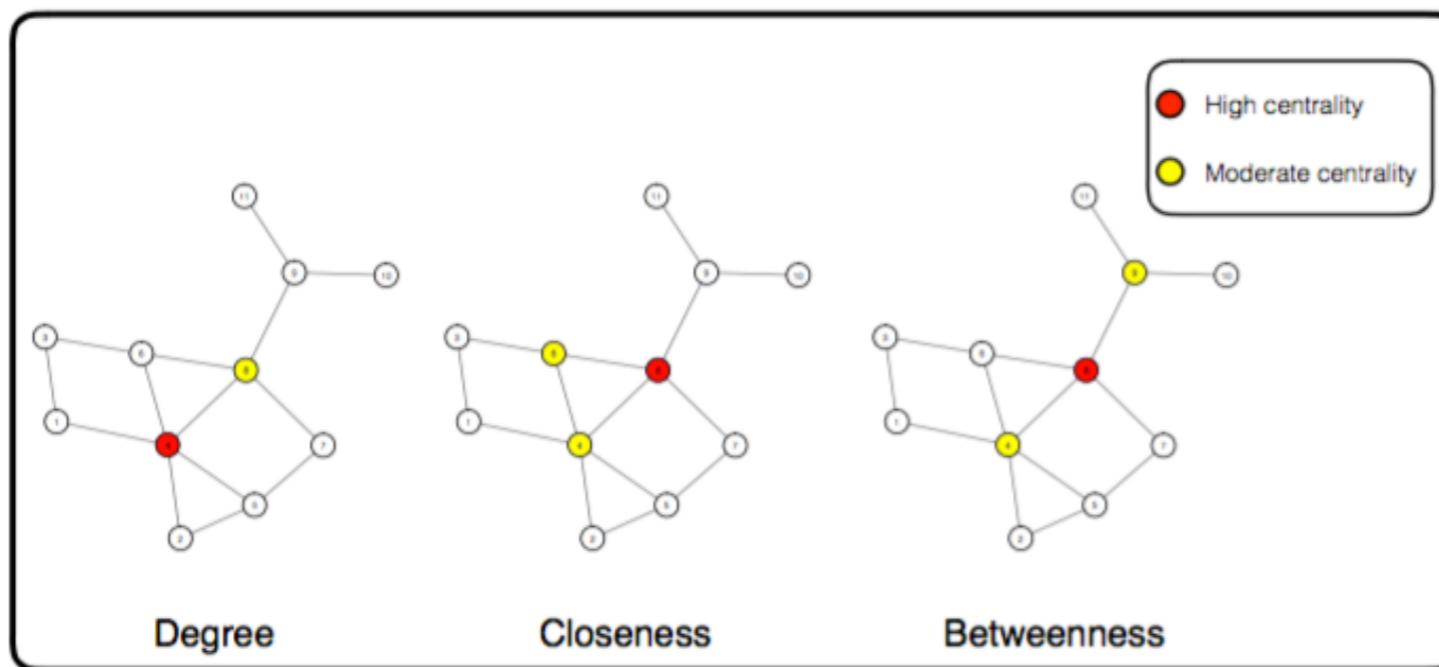
More results

4 centrality measures

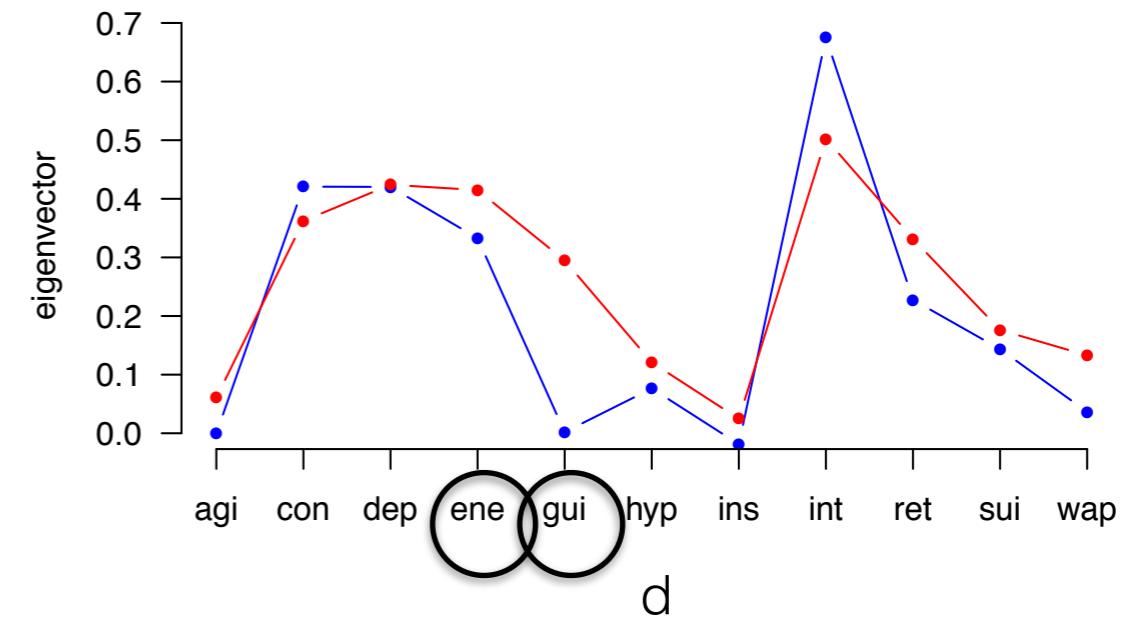
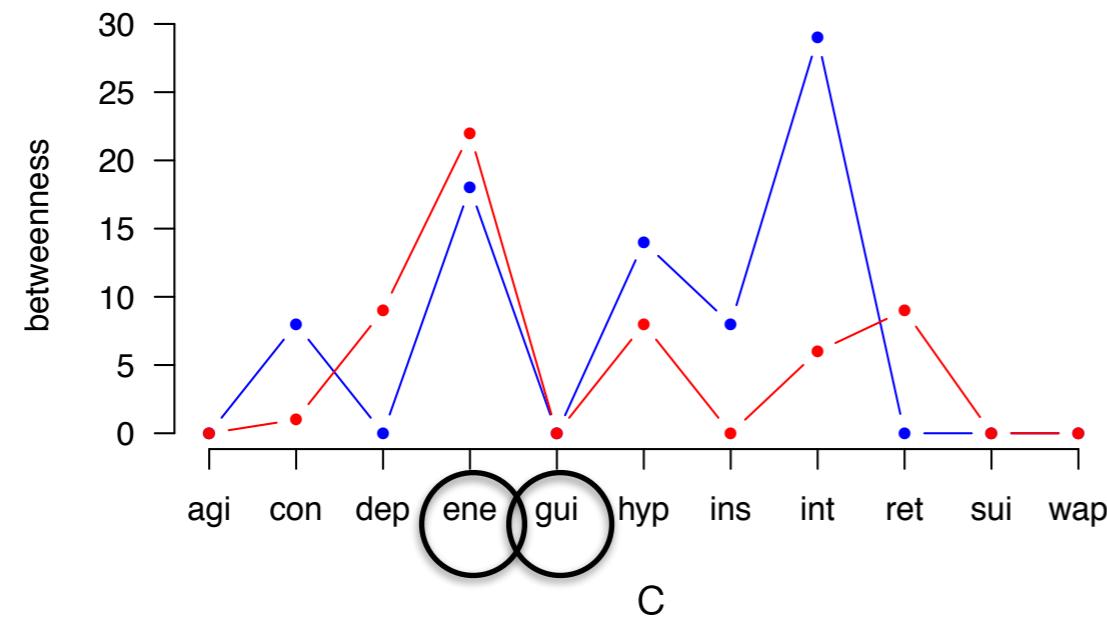
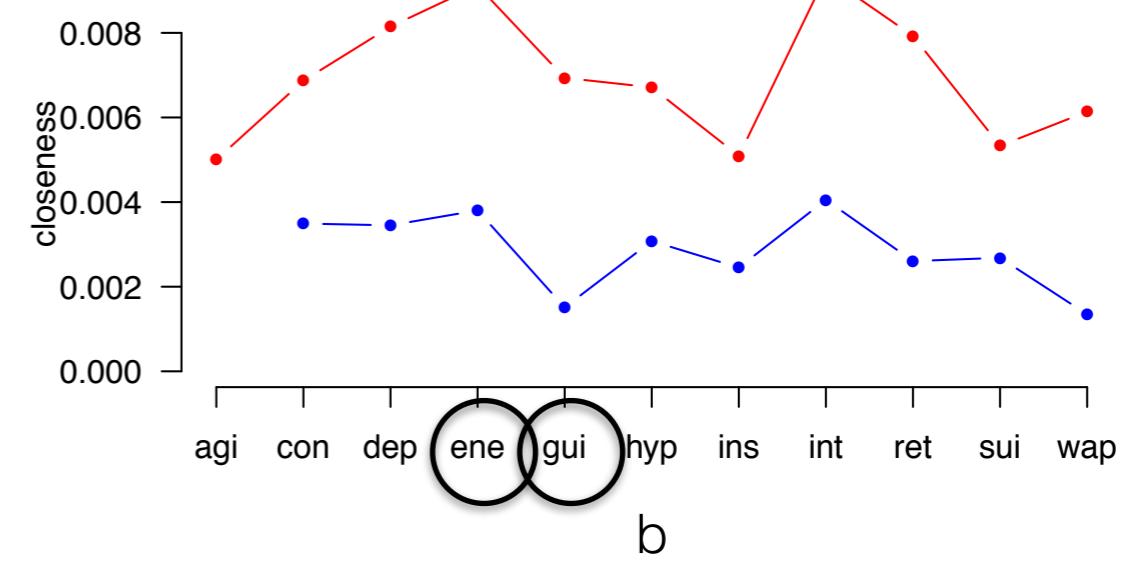
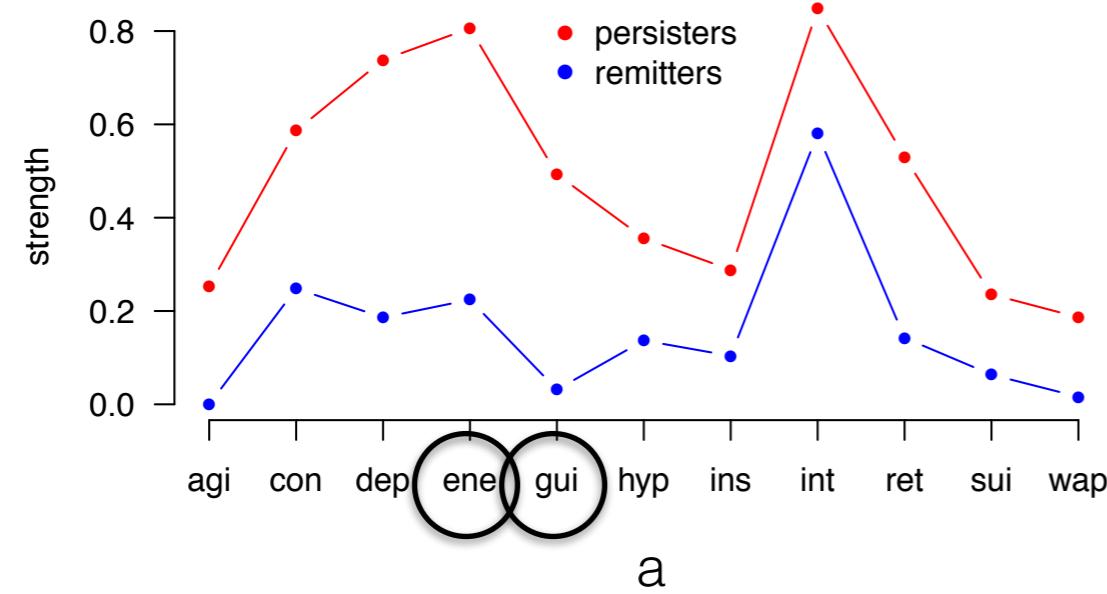
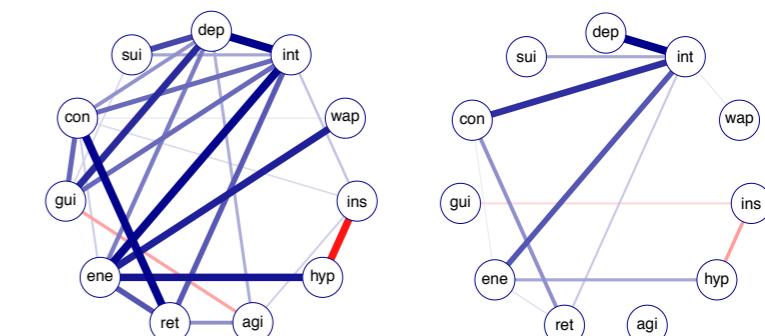
- strength
- closeness
- betweenness
- eigenvector centrality

Focus on largest difference

- with bootstrapping of centrality measures
- effect size is based on the difference in means



More results



Discussion



Conclusion

- Patterns in symptom associations seem predictive for the course of MDD
 - More pronounced associations between symptoms may be an important determinant of persistence in MDD
- Controlling for difference in baseline severity confirmed main results

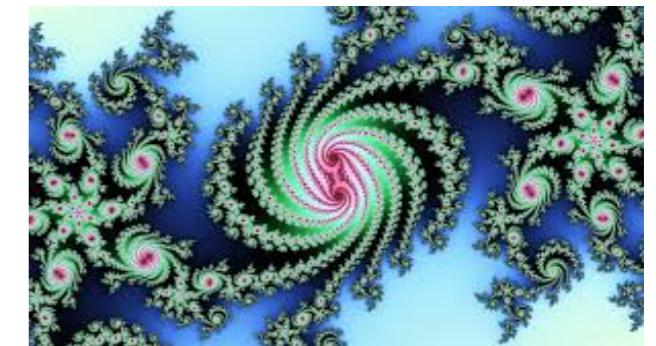
Limitations

- It is currently unclear what this means at the level of an individual patient
- Analysis at individual level can (theoretically) result in radically different network (Simpson's paradox)

Future

- Investigate relationship between networks at group and individual level

Thanks to...



Lynn Boschloo



Denny Borsboom

Brenda Penninx



Lourens Waldorp



Robert Schoevers