

1. BACKGROUND

- Bipolar disorder symptoms often emerge several years prior to the onset of major episodes.
- While offspring of parents with mental illness are at heightened risk,¹ family history does not account for all cases of bipolar disorder.²
- This study aimed to identify early neuroimaging biomarkers of bipolar disorder and their interactions with family risk, using measures that capture key neurodevelopmental changes.

2. METHODS

Participants

- Youth ages 9-11 years participating in the Adolescent Brain Cognitive Development (ABCD) study.^{3,4}
- Groups comprised typically developing controls (mean age = 9.9 years; 47% males) and youth with bipolar disorder symptoms (mean age = 9.9 years; 48% males), subdivided by parental history of mental illness.

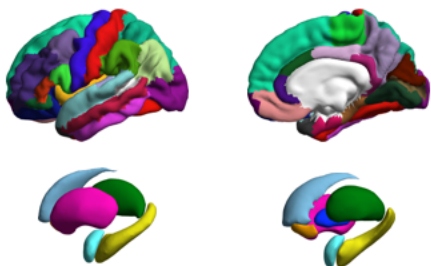
	+ Parental mental illness	No parental mental illness
Controls	n = 1,171	n = 1,652
Bipolar	n = 145	n = 161

Neuroimaging markers

Structural and diffusion MRI scans yielded the following measures:

1) Cortical (68 regions)

- Thickness
- Surface area
- Neurite density
- Peri-cortical neurite density
- Grey-white matter contrast



2) Subcortical (16 regions)

- Volume
- Neurite density

Analysis

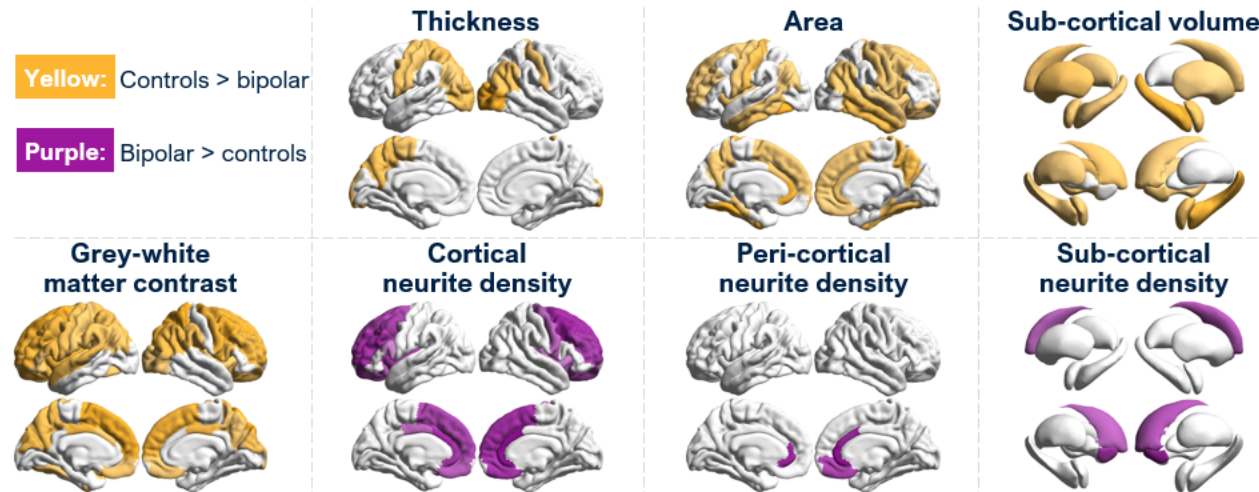
- Multivariable ANOVAs were performed on all markers to examine diagnosis, parental history, and age interactions, with sex as a covariate.
- Post hoc analyses were performed with false discovery rate correction.

3. RESULTS

Significant main effects of diagnosis

Yellow: Controls > bipolar

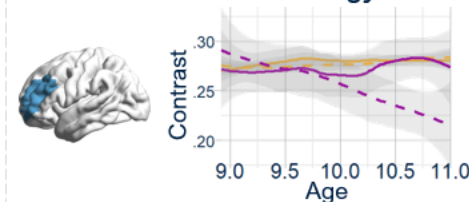
Purple: Bipolar > controls



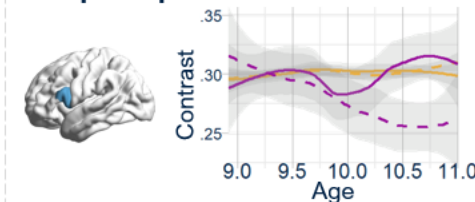
Significant diagnosis × parental history × age interactions for grey-white matter contrast

- Controls
- Bipolar
- No parental history
- - Parental history

Left rostral middle frontal gyrus



Left pars opercularis



4. CONCLUSIONS

- This study identifies potential biomarkers for bipolar disorder that are robust to parental history of mental illness.
- Selective abnormalities in grey-white matter differentiation in those with familial risk could indicate early signs of more severe future manifestations.

REFERENCES

- 1) Dean, K et al. (2010) *Arch Gen Psychiatry*, 67, 822–829.
- 2) Mesman, E et al. (2013) *Am J Psychiatry*, 170, 542–549.
- 3) Casey, BJ et al. (2018) *Dev Cogn Neurosci*, 32, 43–54.
- 4) Hagler, DJ et al. (2019) *Neuroimage*, 202, 116091.