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## **Comparison of different linear-combination modeling algorithms for short-TE proton spectra**

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## **Abstract**

Short-TE proton MRS is used to study metabolism in the human brain. Common analysis methods model the data as a linear combination of metabolite basis spectra. This large-scale multi-site study compares the levels of the four major metabolite complexes in short-TE spectra estimated by three linear-combination modeling (LCM) algorithms. 277 medial parietal lobe short-TE PRESS spectra (TE  $=$  35 ms) from a recent 3 T multi-site study were preprocessed with the Osprey software. The resulting spectra were modeled with Osprey, Tarquin and LCModel, using the same three vendor-specific basis sets (GE, Philips and Siemens) for each algorithm. Levels of total Nacetylaspartate (tNAA), total choline (tCho), myo-inositol (mI) and glutamate + glutamine (Glx) were quantified with respect to total creatine (tCr). Group means and coefficient of variations of metabolite estimates agreed well for tNAA and tCho across vendors and algorithms, but substantially less so for Glx and mI, with mI systematically estimated as lower by Tarquin. The cohort mean coefficient of determination for all pairs of LCM algorithms across all datasets and metabolites was  $R^2 = 0.39$ , indicating generally only moderate agreement of individual metabolite estimates between algorithms. There was a significant correlation between local baseline amplitude and metabolite estimates (cohort mean  $\mathbf{R}^2 = 0.10$ ).

While mean estimates of major metabolite complexes broadly agree between linear-combination modeling algorithms at group level, correlations between algorithms are only weak-to-moderate, despite standardized preprocessing, a large sample of young, healthy and cooperative subjects, and high spectral quality. These findings raise concerns about the comparability of MRS studies, which typically use one LCM software and much smaller sample sizes.

#### **Keywords**

linear-combination modeling; MRS; short echo-time spectra

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SUPPORTING INFORMATION

Additional supporting information may be found online in the Supporting Information section at the end of this article.

## **1 | INTRODUCTION**

Proton MRS allows in vivo research studies of metabolism.<sup>1,2</sup> Single-voxel MR spectra from the human brain are frequently acquired using PRESS localization,<sup>3</sup> and can be modeled to estimate metabolite levels. Accurate modeling is hampered by poor spectral resolution at clinical field strengths, and for short echo-time spectra, metabolite signals overlap with a broad background consisting of fast-decaying macromolecule and lipid signals. Linearcombination modeling (LCM) of the spectra maximizes the use of prior knowledge to constrain the model solution, and is recommended by recent consensus.<sup>4</sup> LCM algorithms model spectra as a linear combination of (metabolite and macromolecular [MM]) basis functions, and typically also include terms to account for smooth baseline fluctuations.

Several LCM algorithms are available to quantify MR spectra; Table 1 describes some of the most widely used: Osprey,<sup>5</sup> INSPECTOR,<sup>6</sup> Tarquin,<sup>7</sup> AQSES,<sup>8</sup> Vespa,<sup>9</sup> QUEST<sup>10</sup> and LCModel.<sup>11</sup> The implementations (open-source vs. compiled 'black-box'), modeling approaches (modeling domain and baseline model), and their licensure practices are diverse. The most widely used algorithm is the LCModel implementation (accounting for approximately 90% of the citations in Table 1), often considered as the gold standard, apart from it being the prototype LCM algorithm for MRS quantification with a precompiled 'black-box' implementation and a substantial price tag.

Surprisingly few studies have compared the performance of different LCM algorithms. Cross-validation of quantitative results has almost exclusively been performed in the context of benchmarking new algorithms against existing solutions. in vivo comparisons are often limited to small sample sizes, whether analyzing spectra from animal models<sup>7,12,13</sup> or human subjects.<sup>7,8,12</sup> To the best of our knowledge, two exceptions compared the LCM performance of different algorithms in rat brain<sup>14</sup> and human body,<sup>15</sup> respectively. Most studies report good agreement between results from different algorithms, inferring this from group-mean comparisons, or observing that differences between clinical groups are consistent regardless of the algorithm applied.14,16 Correlations of estimates from different algorithms are rarely reported; however, a high correlation between LCModel and Tarquin results was found in rat brain at ultra-high field.<sup>14</sup>

Despite the fact that LCM has been used to analyze thousands of studies (Table 1), a comprehensive assessment of the agreement between the algorithms is lacking, and the relationship between the choice of model parameters and quantitative outcomes is poorly understood. To begin to address this gap, we conducted a large-scale comparison of short-TE in vivo MRS data using three LCM algorithms with standardized preprocessing. While recent expert consensus recommends using measured MM background spectra, data for different sequences are not broadly available or integrated in LCM software. This manuscript investigates current common practice, and therefore all the models included simulated MM basis functions as defined in LCModel. We compared group-mean quantification results of four major metabolite complexes from each LCM algorithm, performed between-algorithm correlation analyses, and investigated local baseline power and creatine modeling as potential sources of differences between the algorithms.

## **2 | METHODS**

#### **2.1 | Participants and acquisition**

277 single-voxel short-TE PRESS brain datasets from healthy volunteers acquired in a recent 3 T multisite-study<sup>17</sup> were included in this analysis. Data were acquired at 25 sites (with up to 12 subjects per site) on scanners from three different vendors (GE: eight sites with  $n = 91$ ; Philips: 10 sites with  $n = 112$ ; and Siemens: seven sites with  $n = 74$ ) with the following parameters:  $TR/TE = 2000/35$  ms; 64 averages; 2, 4 or 5 kHz spectral bandwidth; 2048–4096 data points; acquisition time = 2.13 min;  $3 \times 3 \times 3$  cm<sup>3</sup> voxels in the medial parietal lobe (Figure 1A). The water suppression pulse bandwidth was 140 Hz for Philips, 50 Hz for Siemens and 150 Hz for GE. Reference spectra were acquired with similar parameters, but without water suppression and 8–16 averages. No more acquisition parameters were specified (for more details, please refer to<sup>17</sup>). Data were saved in vendornative formats (GE P-files; Philips .sdat; and Siemens .dat). In the initial study, $18$  written informed consent was obtained from each participant and the study was approved by local institutional review boards. Anonymized data were shared securely and analyzed at Johns Hopkins University with local IRB approval. Due to site-based data privacy guidelines, only a subset of these data (GE: seven sites with  $n = 79$ ; Philips: nine sites with  $n = 100$ ; and Siemens: four sites with  $n = 48$ ) is publicly available.<sup>19</sup>

#### **2.2 | Data preprocessing**

MRS data were preprocessed in Osprey,<sup>5</sup> an open-source MATLAB toolbox, following recent peer-reviewed preprocessing recommendations,<sup>2</sup> as summarized in Figure 1B. First, the vendor-native raw data were loaded, including the metabolite (water-suppressed) data and unsuppressed water reference data. Second, the raw data were preprocessed into averaged spectra. Receiver-coil combination<sup>20</sup> and eddy-current correction<sup>21</sup> of the metabolite data were performed using the water reference data. Individual transients in Siemens and GE data were frequency- and phase-aligned using robust spectral registration.<sup>22</sup> The Philips data had been coil-combined by weighted combination with the complex coefficients obtained during the survey scan and averaged on the scanner without frequency and phase correction of the individual transients. After averaging the individual transients, the residual water signal was removed with a Hankel singular value decomposition (HSVD) filter.<sup>23</sup> For Siemens spectra, an additional prephasing step was introduced by modeling the signals from creatine and choline-containing compounds at 3.02 and 3.20 ppm with a double Lorentzian model and applying the inverted model phase to the data. This step corrected a zero-order phase shift in the data arising from the HSVD water removal, likely because the Siemens water suppression introduced asymmetry to the residual water signal. Finally, the preprocessed spectra were exported in .RAW format.

#### **2.3 | Data modeling**

Fully localized 2D density-matrix simulations implemented in the MATLAB toolbox FID- $A<sup>24</sup>$  with vendor-specific refocusing pulse information, timings and phase cycling were used to generate three vendor-specific basis sets (GE, Philips and Siemens) including 19 spin systems: ascorbate, aspartate, Cr, negative creatine methylene (-CrCH<sub>2</sub>),  $\gamma$ -aminobutyric acid (GABA), glycerophosphocholine (GPC), glutathione, glutamine (Gln), glutamate

(Glu), water  $(H<sub>2</sub>O)$ , myo-inositol (mI), lactate, NAA, N-acetylaspartylglutamate (NAAG), phosphocholine (PCh), PCr, phosphoethanolamine, scyllo-inositol and taurine. The -CrCH<sup>2</sup> term is a simulated negative creatine methylene singlet at 3.95 ppm, included as a correction term to account for the effects of water suppression and relaxation. It is not included in the tCr model, which is used for quantitative referencing.

Eight additional Gaussian basis functions were included in the basis set to simulate broad macromolecules and lipid resonances<sup>25</sup> (simulated as defined in section 11.7 of the LCModel manual<sup>26</sup>): MM<sub>0.94</sub>, MM<sub>1.22</sub>, MM<sub>1.43</sub>, MM<sub>1.70</sub>, MM<sub>2.05</sub>, Lip<sub>0.9</sub>, Lip<sub>1.3</sub> and Lip<sub>2.0</sub>. The Gaussian amplitudes were scaled relative to the  $3.02$  ppm creatine CH<sub>3</sub> singlet in each basis set (details in Supplementary Material 1; see the supporting information). Finally, to standardize the basis set for each algorithm, basis sets were stored as .mat files for use in Osprey and as. BASIS-files for use in LCModel and Tarquin. In the following paragraphs, each LCM algorithm investigated in this study is described briefly (for further details, please refer to the original publications<sup>5,7,11</sup>).

**2.3.1 | LCModel v6.3—The LCModel (6.3–0D) algorithm<sup>11</sup> models data in the** frequency domain. First, time-domain data and basis functions are zero-filled by a factor of two. Second, frequency-domain spectra are frequency-referenced by cross-correlating them with a set of delta functions representing the major singlet landmarks of NAA (2.01 ppm), Cr (3.02 ppm) and Cho (3.20 ppm). Third, starting values for phase and line-broadening parameters are estimated by modeling the data with a reduced basis set containing NAA, Cr, PCh, Glu and mI, with a smooth baseline. Fourth, the final modeling of the data is performed with the full basis set, regularized lineshape model and baseline, with starting values for phase, line-broadening and lineshape parameters derived from the previous step. Model parameters are determined with a Levenberg–Marquardt<sup>27,28</sup> nonlinear least-squares optimization implementation that allows bounds to be imposed on the parameters. Metabolite amplitude bounds are defined to be non-negative, and determined using a non-negative linear least-squares (NNLS) fit at each iteration of the nonlinear optimization. Amplitude ratio constraints on macromolecule and lipid amplitude, as well as selected pairs of metabolite amplitudes (e.g. NAA + NAAG), are defined as in Osprey and Tarquin. The spline baseline is constructed from cubic B-spline basis functions, including one additional knot outside either end of the user-specified fit range, with the number of spline functions being defined by the knot spacing parameter. LCModel constrains the model with three additional regularization terms. Two of these terms penalize a lack of smoothness in the spline baseline and lineshape models using the second derivative operator, preventing unreasonable flexibility of the spline baseline and lineshape irregularity. The third term penalizes deviations of the metabolite Lorentzian line-broadening and frequency shift parameters from their expected values.

**2.3.2** | Osprey—The Osprey (1.0.0) frequency-domain LCM algorithm<sup>5</sup> adopts several key features of the LCModel and Tarquin algorithms. Osprey follows the four-step workflow of LCModel including zero-filling, frequency referencing, preliminary optimization to determine starting values, and final optimization over the real part of the frequency-domain spectrum. The model parameters are zero- and first-order phase correction, global Gaussian

line-broadening, individual Lorentzian line-broadening, and individual frequency shifts, which are applied to each basis function. The final model includes the full basis set, as well as unregularized lineshape and spline baseline models. The baseline knot spacing is set to 0.15 ppm for the preliminary modeling step with a reduced basis set and increased

to 0.4 ppm for the final full model. Similar to LCModel, model parameters are determined with a Levenberg–Marquardt<sup>27,28</sup> nonlinear least-squares optimization algorithm and an NNLS fit to determine the non-negative metabolite amplitudes at each step of the nonlinear optimization.

**2.3.3 | Tarquin**—Tarquin  $(4.3.10)^7$  uses a four-step approach in the time domain to model spectra. First, residual water is removed using singular value decomposition. Second, the global zero-order phase is determined by minimizing the difference between the magnitude and the real spectra in the frequency domain. Third, zero-filling to double the number of points and frequency referencing are performed, as in the other algorithms. This step also estimates a starting value for the Gaussian line-broadening used in the fourth step, the final modeling. The model includes common Gaussian line-broadening, individual Lorentzian line-broadening, individual frequency-shifts, and zero- and first-order phase correction factors applied in the frequency domain.

Optimization is performed in the time domain with a constrained nonlinear least-squares Levenberg–Marquardt solver, allowing bounds and constraints on the parameters. In addition, the range of time-domain data points is limited by removing the first 10 ms of the FID, so as to omit the fast-decaying macromolecule and lipid signals. Finally, the baseline is estimated in the frequency domain by convolving the model residual with a Gaussian filter with a width of 100 points.

**2.3.4 | Model parameters—**The parameters chosen for each tool are summarized in Figure 1C. The fit range was limited to 0.5 to 4 ppm in LCModel and Osprey to reduce the effects of differences in water suppression techniques. For the baseline handling, the default and most commonly used parameters were chosen, that is, bLineKnotSpace  $= 0.4$  ppm for Osprey, DKNMNT =  $0.15$  ppm for LCModel, and an FID range from 10 ms to 50% of the FID for Tarquin.

#### **2.4 | Quantification, visualization and secondary analyses**

**2.4.1** | Quantification—The four major metabolite complexes tNAA (NAA + NAAG), tCho (GPC + PCh), mI and Glx (Glu + Gln) were quantified as basis-function amplitude ratios relative to total creatine (tCr = Cr + PCr). Because the primary purpose was to compare performance of the core LCM algorithms, no additional relaxation correction or partial volume correction was performed.

Model visualizations were generated with the *OspreyOverview* module, which allows LCModel and Tarquin results files (.coord and .txt) to be imported. Foreach algorithm, the visualization includes site-mean spectra, cohort-mean spectra (i.e. the mean of all spectra), and site and cohort mean modeling results (complete model, spline baseline, spline baseline+MM components, and the separate models of the major metabolite complexes).

**2.4.2** | Visualization—As in the default visualizations for the LCModel and Tarquin software interfaces, inverse phase estimates were applied to the spectra and final models. For the visualization, spectra were normalized to the amplitude of the 3-ppm creatine singlet, and a DC offset was added to each site mean spectrum to align the mean frequency-domain amplitude between 1.85 and 4.0 ppm, to aid visual comparison between algorithms and sites.

**2.4.3 | Secondary analyses—**To investigate potential vendor differences in linewidth and SNR based on the different export formats of the data, mean and standard deviation (SD) of the NAA linewidth and SNR were determined.

To investigate baseline power variability unbiased by DC offsets, the MM + baseline models were first aligned vertically according to the frequency-domain minimum of the acquired spectra between 2.66 and 2.7 ppm (i.e. between the aspartyl signals, which is the region with the highest consistency between the baseline models). Baseline models were normalized to the frequency-domain amplitude of each metabolite spectrum between 2.9 and 3.1 ppm to account for differences in the scaling of the model outputs of LCModel and Tarquin. Baseline power within the frequency ranges was then defined as the range-normalized integral of the baseline model between 0.5 and 1.95, 1.95 and 3.6, and 3.6 to 4.0 ppm. The baseline power variability was then defined as the SD of the baseline power calculated across all subjects.

To similarly investigate potential interactions between baseline power and metabolite estimates, the baseline power beneath each major metabolite was then defined as the rangenormalized integral of the baseline model between 1.9 and 2.1 ppm for the tNAA baseline, 3.1 and 3.3 ppm for the tCho baseline, 3.33 and 3.75 ppm for mI, and 1.9 to 2.5 and 3.6 to 3.8 ppm for the Glx baseline.

The contribution of variance in modeling of the creatine reference signal to metabolite ratios was also investigated. To this end, each individual tCr model  $(Cr + PCr)$  was normalized to the frequency-domain amplitude of each metabolite spectrum between 1.9 and 2.1 ppm to account for differences in the scaling of the tCr model outputs of LCModel and Tarquin. Finally, the integral over the individual creatine model was calculated.

Additionally, water-referenced tCr concentrations were calculated as the ratio of the tCr and water amplitude of each algorithm. No further corrections were applied to these tCr estimates.

#### **2.5 | Data analysis**

Quantitative metabolite estimates (tNAA/tCr, tCho/tCr, mI/tCr, Glx/tCr) were statistically analyzed and visualized using  $R^{29}$  (version 3.6.1) in RStudio (version 1.2.5019, RStudio Inc.). The functions are publicly available.<sup>30</sup> The supplemental materials with MATLABand R-files, example LCModel control files (one for each vendor), and Tarquin batch-files for this study are publicly available.<sup>31</sup> The results from each LCM algorithm were imported into R with the *spant* package.<sup>32</sup>

**2.5.1 | Distribution analysis—The results are presented as raincloud plots<sup>33</sup> and** Pearson's correlation analysis using the *ggplot* $2$  package.<sup>34</sup> The raincloud plots include individual data points, boxplots with median and 25th/75th percentiles, a smoothed distribution, and mean  $\pm$  SD error bars to identify systematic differences between the LCM algorithms. In addition, the coefficient of variation  $(CV = SD/mean)$  and the mean  $\overline{CV} = \frac{(CV_{tNAA} + CV_{tCho} + CV_{Ins} + CV_{Glx})}{4}$  $\frac{6 + 6 + \text{ms} + 6 + \text{Gix}}{4}$  across all four metabolites of each algorithm are calculated.

**2.5.2 | Correlation analysis—**The Pearson's correlation analysis featured different levels, including pair-wise correlations between algorithms, as well as correlations between baseline power and metabolite estimates of each algorithm. The pair-wise coefficient of determination on the global level (black  $\mathbb{R}^2$ ), as well as within-vendor coefficient of determination (color-coded  $R^2$ ) with different color shades for different sites are reported. Furthermore, mean  $R^2$  for each pair-wise coefficient of determination (e.g. Osprey vs. LCModel) and metabolite, estimated by row or column means (e.g.  $R^2 = \frac{R_{tNAA}^2 + R_{tCho}^2 + R_{Ins}^2 + R_{Glx}^2}{4}$  $\frac{6 + \epsilon_{\text{HIS}} + \epsilon_{\text{GIX}}}{4}$ ), and a cohort mean  $\mathbb{R}^2$  (across all pair-wise correlations) are calculated. The correlations were Bonferroni-corrected for the number of correlation tests. The cohort mean  $R^2$  was used to identify global associations across all correlation analysis, while the mean  $R^2$  allowed the identification of algorithm-specific (row means) and metabolite-specific (column means) interactions across all correlation analysis. Associations between the outcomes of specific algorithms were identified by the pair-wise correlation analysis  $(R^2)$ . Vendor-specific effects were identified by differentiating between global level and within-vendor correlations.

**2.5.3 | Statistical analysis—**In the statistical analysis, the presence of significant differences in the mean and the variance of the metabolite estimates was assessed. Global metabolite estimates were compared between algorithms with parametric tests, following recommendations for large sample sizes.<sup>35</sup> The data were not grouped by vendor or site, and the statistical tests were set up as paired without any further inference. Differences of variances were tested with Fligner-Killeen's test with a post-hoc pair-wise Fligner-Killeen's test and Bonferroni correction for the number of pair-wise comparisons. Depending on whether variances were different or not, an ANOVA or Welch's ANOVA was used to compare means with a post-hoc paired t-test with equal or nonequal variances, respectively.

**2.5.4 | Linear mixed-effects analysis—**Linear mixed-effects models were set up as a repeated-measure analysis to determine variance partition coefficients to assess the contributions of algorithm-, vendor-, site- and participant-specific effects to the total variance. A log-likelihood statistic was used to calculate the goodness of fit. The probability of observing the test statistic was evaluated against the null hypotheses, which was simulated by performing parametric bootstrapping (2000 simulations).<sup>36</sup>

## **3 | RESULTS**

All 277 spectra were successfully processed, exported and quantified with the three LCM algorithms; no modeled spectra were excluded from further analysis.

#### **3.1 | Summary and visual inspection of the modeling results**

Figure 2 shows the 277 spectra, models and residuals for each algorithm (A-C) colorcoded by vendor. In general, the phased spectra and models agreed well between vendors for all algorithms. The most notable differences in spectral features are visible between 0.5 and 1.95 ppm with each algorithm modeling the macromolecules and apparent lipid peaks as baseline or macromolecule basis function to a different degree. Similarly, the baseline between 3.6 and 4 ppm is estimated differently by each algorithm, which is changing the amplitude of the residual in this frequency range and potentially the metabolite estimates. Comparing the algorithms, notable differences in spectral features and intersubject variability in the estimated baseline models appeared between 0.5 and 1.95 ppm (SD baseline area: 0.45 [Osprey] > 0.36 [Tarquin] > 0.21 [LCModel]) and between 3.6 and 4 ppm (SD baseline area: 0.15 [LCModel] > 0.13 [Osprey] > 0.10 [Tarquin]) (as shown in Figure 2A–C and calculated in the secondary analysis). A high agreement in the estimated baseline models was found between 1.95 and 3.6 ppm (SD baseline area: 0.04 [Osprey] >  $0.03$  [LCModel] =  $0.03$  [Tarquin]).

A site-level averaged summary is shown in Figure 3A–C for analyses in LCModel, Osprey and Tarquin, respectively. The averaged data, models and residuals for each of the 25 sites are color-coded by vendor. The cohort mean of all analyses for each vendor is shown in Figure 3D–F (GE, Philips and Siemens, respectively). Data, models and residuals are color-coded by algorithm.

Cohort-mean spectra and models agreed well across all vendors and algorithms (Figure 3D–F). The greatest differences in the spectral features of the baseline between algorithms occur between 0.5 and 1.95 ppm, with closer agreement between Osprey and Tarquin than with LCModel. The amplitude of the residual over the whole spectral range is highest for Osprey, and similar for Tarquin and LCModel.

The mean NAA linewidth was significantly lower ( $p < 0.001$ ) for Philips (6.3  $\pm$  1.3 Hz) compared with GE (7.3  $\pm$  1.5 Hz), while no differences in the linewidth were found for the other comparisons (Siemens  $6.6 \pm 2.4$  Hz). The mean SNR was significantly higher for Siemens (285  $\pm$  72) compared with both other vendors ( $p < 0.001$ ) and significantly higher ( $p$  < 0.001) for Philips (226 ± 58) compared with GE (154 ± 37).

#### **3.2 | Metabolite level distribution**

The tCr ratio estimates and CVs of the four metabolites are summarized in Table 2. Distributions and group statistics are visualized in Figure 4, with the four rows corresponding to the three vendors and a cohort summary across all datasets.

Between-algorithm agreement was greatest for the group means and CVs of tNAA and tCho. The cohort-mean CV was lowest for Osprey (10.4%), followed by LCModel (12.6%) and

Tarquin (14.0%). Group means and CVs for tNAA are relatively consistent. Consequently, the cohort-mean tNAA/tCr was  $1.45 \pm 0.15$  for LCModel,  $1.50 \pm 0.12$  for Osprey and  $1.45 \pm 0.14$  for Tarquin, with significant differences between Osprey and both other LCM algorithms.

Cohort means for tCho showed high agreement between all algorithms. The global CV of tCho estimates was significantly higher for Tarquin compared with both other algorithms, and significantly lower for Osprey compared with LCModel. Global tCho/tCr was  $0.18 \pm$ 0.02 for LCModel,  $0.18 \pm 0.02$  for Osprey and  $0.18 \pm 0.04$  for Tarquin.

For mI, group means and CVs were comparable for Osprey and LCModel, while Tarquin estimates were lower by about 25%. Global CVs were significantly lower for Osprey compared with Tarquin, while no significant differences in the CV were found for the other comparisons. Global mI/tCr was  $0.83 \pm 0.09$  for LCModel,  $0.84 \pm 0.09$  for Osprey and  $0.60$  $\pm$  0.08 for Tarquin, with significant mean differences between all Tarquin and both other algorithms.

Group means and CVs for Glx were comparable between Osprey and LCModel, while estimates were about 30% higher in Tarquin. Global CV was significantly lower for Osprey compared with both other algorithms. Global Glx/tCr was  $1.45 \pm 0.15$  for LCModel, 1.50  $\pm$  0.12 for Osprey and 1.93  $\pm$  0.24 for Tarquin, with significant differences between all algorithms. Mean  $\overline{CVs}$ , estimated by the row mean, were between 9.0% and 13.8% for all algorithms and vendors.

#### **3.3 | Correlation analysis: pair-wise comparison between LCM algorithms**

The correlation analysis for each metabolite and algorithm pair is summarized in Figure 5.  $R^2$  each algorithm pair and metabolite are reported in the corresponding row and column, respectively.

The cohort-mean  $R^2$  = 0.39 suggests an overall moderate agreement between metabolite estimates from different algorithms. The agreement between algorithms, estimated by the row-mean  $R^2$ , was highest for Tarquin versus LCModel  $(R^2 = 0.43)$ , followed by Osprey versus LCModel  $\left(R^2 = 0.38\right)$  and Osprey versus Tarquin  $\left(R^2 = 0.37\right)$ .

The agreement between algorithms for each metabolite, estimated by the column-ms highest for tNAA( $R^2 = 0.50$ ), followed by tCho ( $R^2 = 0.44$ ), Glx ( $R^2 = 0.32$ ) and mI( $R^2 = 0.29$ ). The cohort-mean R<sup>2</sup> for each vendor was higher for Siemens  $R^2 = 0.45$  than for GE  $R^2 = 0.40$ and Philips  $(R^2 = 0.40)$ .

While the within-metabolite mean  $R^2$  (average down the columns in Figure 5) are comparable between vendors, there is substantially higher variability of the  $\mathbb{R}^2$  values with increasing granularity of the analysis. Supplementary Material 2 (see the supporting information) includes an additional layer of correlations at the site level.

#### **3.4 | Correlation analysis: baseline and metabolite estimates**

The correlation analysis between local baseline power and metabolite estimates for each algorithm is summarized in Figure 6. The cohort-mean  $R^2 = 0.10$  suggests that overall there is an association between local baseline power and metabolite estimates that is weak but statistically significant. The influence of baseline on metabolite estimates differs between metabolites, as reflected by the column-mean  $R^2$ , which was lowest for tCho  $\left(R^2 = 0.04\right)$  and tNAA $(R^2 = 0.06)$ , and highest for mI  $(R^2 = 0.13)$  and Glx  $(R^2 = 0.18)$ . The global baseline correlations all had negative slope, except for tCho estimates of Tarquin.

The mean  $R^2$  across metabolites for each algorithm, calculated as the row mean, were low for all algorithms with LCModel  $\left(R^2 = 0.17\right)$ , showing a greater effect than Tarquin  $R^2 = 0.08$  and Osprey  $\left(R^2 = 0.06\right)$ . Comparing vendors, the cohort-mean  $R^2$  was higher for GE  $\left[\mathbb{R}^2 = 0.15\right]$  and Siemens  $\left[\mathbb{R}^2 = 0.14\right]$  than for Philips  $\left[\mathbb{R}^2 = 0.05\right]$  spectra.

#### **3.5 | Variability of tCr models**

Mean tCr model spectra  $(\pm$  one SD) are summarized in Supplementary Material 3A (see the supporting information) for each vendor and LCM algorithm, along with distribution plots of the area under the model.

The agreement in mean and CV is greatest between Osprey and Tarquin for all vendors, while tCr areas for LCModel appear slightly higher. Differences in water suppression are accounted for with the -CrCH<sub>2</sub> correction term, which is not included in the tCr model used for quantitative referencing.

Supplementary Material 3B (see the supporting information) shows the distribution of the water-referenced tCr concentrations with high agreement of CV between all algorithms and vendors. The agreement between the mean was higher between Osprey and Tarquin for GE and Siemens, while the mean concentrations were different for LCModel. The highest variation between algorithms was found for Philips.

#### **3.6 | Linear mixed-effect models**

The results from the linear mixed-effects model analysis are summarized in Table 3. The algorithm-specific effect ranged from 0.7% (tCho) to 58.7% (mI) and was significant for all metabolites. Significant vendor-specific effects were found for Glx (10.1%) and tCho (17.5%), while significant site-specific effects ranged from 3.8% (mI) to 21.7% (tNAA). The participant-specific effects ranged from 7.5% (Glx) to 40.4% (tNAA) and were significant for all metabolites. The metabolite distribution divided by algorithm, vendor, site and subject is shown in Figure 7.

## **4 | DISCUSSION**

We have presented a three-way comparison of LCM algorithms applied to a large dataset of short-TE in vivo human brain spectra. The aims at the onset were to compare metabolite estimates obtained with different LCM algorithms, as applied in the literature, and to identify potential sources of differences between the algorithms. The major findings are:

- **•** Group means and CVs for tNAA and tCho agreed well across vendors and algorithms. For mI and Glx, group means and CVs were less consistent between algorithms, with a higher degree of agreement between Osprey and LCModel than with Tarquin.
- **•** The strength of the correlations between individual metabolite estimates from different algorithms was moderate. In general, tNAA and tCho estimates from different algorithms agreed better than Glx and mI. With each sublevel of analysis, the variability of correlation strength increased (i.e. correlations grew increasingly variable when calculated separately for each vendor, or even each site).
- **•** Overall, the association between metabolite estimates and the local baseline power was significant, with mI and Glx showing stronger associations than tNAA and tCho, and LCModel showing greater effects than Tarquin and Osprey.
- **•** A large vendor-specific effect was found for Glx (49.3%) and mI (58.7%) by calculating variance partition coefficients using linear mixed-effects modeling. For tNAA and tCho, the participant-level effect was largest with 40.4% and 28.8%, respectively.

The strong agreement of group means and CVs for metabolites with prominent singlets (tNAA/tCho) and inconsistency for lower intensity coupled signals (mI/Glx) are in line with previous two-tool comparisons of simulated data<sup>7,15</sup> and in vivo studies with smaller sample sizes.7,14,16

While previous work highlighted group means and SDs, the between-algorithm agreement of individual metabolite estimates has not been extensively studied. Our results suggest that substantial variability is introduced by the choice of the analysis software itself, indicated by only moderate between-algorithm correlation strength (between-algorithm mean  $R^2 < = 0.5$ for all investigated metabolites), even for the well-established LCM algorithms LCModel and Tarquin ( $\mathbb{R}^2$  between 0.27 and 0.59 for all metabolites). This finding raises concerns about the generalizability and reproducibility of MRS study results. MRS studies typically suffer from low sample sizes (approximately 20 per comparison group is common). Considering the moderate between-tool correlation of individual estimates, it is likely that marginally significant group effects and correlations found with one analysis tool will not be found with another tool, even if exactly the same dataset is used. This is exacerbated by the substantial variability of correlation strengths at vendor or even site level, and is even more likely to be the case for 'real life' clinical data, given the relatively high quality of the 'best case scenario' dataset in this study (standardized preprocessing; large sample size; high SNR; low linewidth; young, healthy, cooperative subjects). While two

previous studies found that some differences between clinical groups remained significant independent of the LCM algorithm,  $14,16$  this is questionable as a default assumption. The lack of comparability arising from the additional variability originating in the choice of analysis tool is rarely recognized or acknowledged. If choice of analysis tool is a significant contributor to measurement variance, it could be argued that modeling of data with more than one algorithm will improve the robustness and power of MRS studies. It should also be investigated whether the reduction of the degrees of freedom by improving MM and baseline models (e.g. by using acquired MM data) increases between-tool agreement and consistency between sites and vendors.

#### **4.1 | Sources of variance**

In order to understand the substantial variability introduced by the choice of analysis tool, the influence of modeling strategies and parameters on quantitative results needs to be better understood. Previous investigations have shown that, within a given LCM algorithm, metabolite estimates can be affected by the choice of baseline knot spacing,  $37,38$  the modeling of MM and lipids,  $37,39$  and SNR and linewidth.  $40-43$  In this study, we focused on the comparison of each LCM with their default and commonly used parameters, and observed differences resulting both from the default parameters and from differences in the core algorithm. Minor differences in spectral quality (SNR and linewidth) were found between vendors. The agreement between vendors was high for the mean metabolite levels and the cohort-mean correlations. Further vendor-specific effects on the LCM estimation of this dataset are described elsewhere.<sup>17</sup>

LCM relies on the assumption that broad background and baseline signals can be separated from narrower metabolite signals. This is true to a limited degree, and the choice of MM and baseline modeling influences the quantification of metabolite resonances.<sup>4</sup> Our secondary analysis of the relationship between baseline power and metabolite estimates showed a stronger interaction for the broader coupled signals of Glx and mI than the singlets. tCho showed the weakest effect, and the three LCMs showed the highest agreement between the MM + baseline models around 3.2 ppm. The higher variance of Glx and mI estimates may at least partly be explained by the absence of MM basis functions for frequencies of greater than 3 ppm in the model. MM signal must therefore either be modeled by metabolite basis functions or the spline baseline. This also emphasizes that any LCM implementation requires a baseline model to account for broad background and baseline signals, with the disadvantage of this being a main source of variance between algorithms. This is also implied by the large algorithm-level effect for mI and Glx in the linear mixed-effects model. Comparing the variance partition coefficients of this study with the prior single LCModel analysis<sup>17</sup> shows a high agreement in the variance partition for tNAA and tCho. A lower agreement is found for mI and Glx, as the estimates of those metabolites strongly differ between algorithms, introducing a high algorithm-level effect. Including experimental MM acquisitions into studies may reduce the degrees of freedom of modeling, but introduce other sources of variance, such as age dependency<sup>44</sup> or tissue composition.<sup>39,45</sup> While consensus is emerging that such approaches are recommended, many open questions must be resolved before the recommendations can be broadly implemented,<sup>25</sup> and the default LCModel MM basis functions are still commonly used in studies applying MRS. A literature review of

the 30 most recent LCModel<sup>11</sup> citations (Google Scholar, 10 November 2020) in short-TE 3 T MRS application studies revealed that 24 of these studies used the default MM basis functions, one was performed without MM basis functions at all, and only one employed a measured MM spectrum. The remaining four studies did not report sufficient details, and the authors did not respond to our inquiries.

For all three LCM algorithms, optimization between the model and the data is solved by local optimization. Algorithms could converge on a local minimum, if the search space of the nonlinear parameters is of high dimensionality, or if the starting values of the parameters are far away from the global optimum.46 The availability of open-source LCM such as Tarquin and Osprey will allow further investigation of the relationship between optimization starting values and modeling outcomes.

The inherent differences between frequency-domain modeling, which is normally restricted to a specific frequency range, and time-domain modeling, which includes the full spectrum, are a potential source of variance, as the approaches differ in their susceptibility to the residual water peak. In this study, Tarquin's internal default SVD water removal was included in addition to the HSVD filter in Osprey's processing pipeline to reduce this effect and to follow Tarquin's default approach. A secondary analysis confirmed that the effect of Tarquin's SVD on the metabolite estimates was negligible.<sup>31</sup> Further standardization between Tarquin and the frequency-domain modeling approaches could be achieved by restricting the frequency range of the basis set accordingly.

Because this study focused on reporting tCr ratios, it is important to consider the variance of the creatine model of each algorithm. With MRS only quantitative in a relative sense, separating the variance contribution of the reference signal is a challenge. While mean tCr model areas were slightly higher for LCModel than for Osprey and Tarquin, there was no generalizable observation of lower tCr ratios from LCModel. CVs of the tCr model areas were comparable across LCM algorithms for each vendor. This is also the case for the water-referenced tCr concentrations, which showed no systematic differences in the mean or CV between algorithms. Vendor differences in the water suppression were minimized by limiting the analysis range to  $0.5-4$  ppm, and by including a -CrCH<sub>2</sub> correction term (omitted from calculations of the tCr ratios and the secondary analysis of the tCr models). The contribution of the reference signal to the variance of metabolite estimates is unclear and hard to isolate. Nevertheless, tCr referencing was preferred in this study, because water referencing is likely to add additional tool-specific variance resulting from water amplitude estimation.

#### **4.2 | Limitations**

First, as mentioned in greater detail above, there is currently no widely adopted consensus on the definition of MM basis functions, and measured MM background data are not widely available to nonexpert users. To reflect common practice in current MRS applications, the default MM basis function definitions from LCModel were adapted for each algorithm in this study. These basis functions only included MMs for frequencies smaller than 3.0 ppm, which is likely insufficient for the modeling of MM signals between 3 and 4 ppm,  $47$  and will have repercussions for the estimation of tCho, mI and Glx.

Second, standard modeling parameters were chosen for each LCM, which ensured a broader comparability with the current literature, but may not be ideal.

Third, there is obviously no 'gold standard' of metabolite level estimation to validate MRS results against. The performance of an algorithm is often judged based on the level of variance, but low variance clearly does not reflect accuracy and may indicate insufficient responsiveness of a model to the data. Therefore, while comparing multiple algorithms, a higher degree of correlation in the results does not necessarily imply higher reliability, but it could equally be the case that shared algorithm-based sources of variance increase such correlations. Efforts to use simulated spectra as a gold standard, including those applying machine learning, <sup>48, 49</sup> can only be successful to the extent that simulated data are truly representative of in vivo data.

Fourth, another criterion to judge the performance of an algorithm is the residual. For example, a small residual indicates higher agreement between the complete model and the data for LCModel, but it does not imply a better estimation of individual metabolites, and may result from the higher degree of freedom in the baseline of LCModel (higher number of splines) compared with Osprey and Tarquin. This is emphasized by the higher agreement of the mean mI models, but lower agreement of the baseline models around 3.58 ppm between LCModel and Osprey.

Fifth, this study was limited to the two most widely used algorithms, LCModel and Tarquin, as well as the Osprey algorithm, which is currently undergoing development in our group. While including additional algorithms would increase the general understanding of different algorithms, the complexity of the resulting analysis and interpretation would be overwhelming and beyond the scope of a single publication.

## **5 | CONCLUSION**

This study presents a comparison of three LCM algorithms applied to a large-scale multisite short-TE PRESS multi-vendor dataset. While different LCM algorithms' estimates of major metabolite levels agree broadly at group level, correlations between results are only weak-to-moderate, despite standardized preprocessing, a large sample of young, healthy and cooperative subjects, and high spectral quality. The variability of metabolite estimates that is introduced by the choice of analysis software is substantial, raising concerns about the robustness of MRS research findings, which typically use a single algorithm to draw inferences from much smaller sample sizes.

#### **Supplementary Material**

Refer to Web version on PubMed Central for supplementary material.

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## **DATA AVAILABILITY STATEMENT**

Due to site-based data privacy guidelines, only a subset of the data that support the findings of this study are openly available at NITRC at<https://www.nitrc.org/projects/biggaba/>.

The quantitative results and all scripts are openly available on the Open Science Framework at https://doi.org/10.1101/2020.06.05.136796.

The open-source MRS analysis pipeline Osprey is available for free download at [https://](https://github.com/schorschinho/osprey) [github.com/schorschinho/osprey.](https://github.com/schorschinho/osprey)

The R functions used for visualization are freely available as an R package (SpecVis) at <https://github.com/hezoe100/SpecVis>.

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#### **FIGURE 1.**

Voxel position and overview of the MRS analysis pipeline. A, Representative voxel position in the medial parietal lobe extracted with 'OspreyCoreg'. B, Preprocessing pipeline implemented in Osprey including 'OspreyLoad' to load the vendor-native spectra, and 'OspreyProcess' to process the raw data and to export the averaged spectra. C, Modeling of the averaged spectra with details of the basis set and parameters of each LCM (LCModel, Osprey, and Tarquin)



#### **FIGURE 2.**

Summary of the individual modeling results. A–C, Individual residuals, data, models, MM models + baseline, baseline and MM models for each LCM algorithm, color-coded by vendor



#### **FIGURE 3.**

Summary of the modeling results. A–C, Site-level averaged residual, data, model, MM model + baseline, baseline and MM model for each LCM algorithm, color-coded by vendor. D–F, Cohort-mean residual, data, model, MM model + baseline, and metabolite models for each vendor, color-coded by LCM algorithm

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### **FIGURE 4.**

Metabolite level distribution. Raincloud plots of the metabolite estimates of each LCM algorithm (color-coded). The four metabolites are reported in the columns, and the three vendors in rows, with a cohort summary in the last row. The coefficient of variation is reported for each distribution, as well as a mean  $\overline{\text{CV}}$  reported in the last column, which is calculated across each row. Asterisks indicate significant differences (adjusted  $p < 0.001$  = \*\*\*)

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#### **FIGURE 5.**

Pair-wise correlational comparison of algorithms. LCModel and Osprey are compared in the first row, Tarquin and Osprey in the second row, and LCModel and Tarquin in the third row. Each column corresponds to a different metabolite. Within-vendor correlations are color-coded; global correlations are shown in black. The  $R^2$  values are calculated along each dimension of the grid with mean  $\mathbb{R}^2$  for each metabolite and each correlation. A cohort-mean  $R<sup>2</sup>$  value is also calculated across all 12 pair-wise correlations. Asterisks indicate significant correlations (adjusted  $p < 0.01 =$ \*\* and adjusted  $p < 0.001 =$ \*\*\*)



#### **FIGURE 6.**

Correlation analysis between metabolite estimates and local baseline power for each algorithm, including global (black) and within-vendor (color-coded) correlations. The mean  $R^2$  values are calculated along each dimension of the grid for each metabolite and each algorithm. Similarly, a cohort-mean  $R^2$  value is calculated across all 12 pair-wise correlations. Asterisks indicate significant correlations (adjusted  $p < 0.05 =$ \*, adjusted  $p <$  $0.01 =$ \*\*, adjusted  $p < 0.001 =$ \*\*\*)



#### **FIGURE 7.**

Metabolite level distribution by site. Boxplots of the metabolite estimates of each LCM algorithm and vendor (color-coded). Each site is represented as a single box with individual data points. The four metabolites are reported in the rows and the three vendors are represented in the columns. The fourth column represents the vendor-collapsed distributions

#### **TABLE 1**

Overview of linear-combination modeling algorithms. The domain (time [TD] or frequency [FD]) of modeling and the baseline model approach are specified



\* Citations reported from Google Scholar on 26 October 2020.

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#### **TABLE 2**

Metabolite level distribution. Mean, standard deviation and coefficient of variation (CV) of each metabolite-tocreatine ratio, listed by algorithm and vendor as well as global summary values. Asterisks indicate significant differences (adjusted  $p < 0.01 = **$  and adjusted  $p < 0.001 = ***$  or  $\frac{\text{Hint}}{\text{diff}}$  or ") in the mean (for the metabolite ratios) or the variance (for the CV) compared with the algorithm in the next row (LCModel vs. Osprey = \*\* or \*\*\*, Osprey vs. Tarquin  $=$   $###$ , and Tarquin vs. LCModel  $=$  "')



#### **TABLE 3**

Variance partition coefficients for algorithm-, vendor, site-, and participant-level effects for the metabolite levels (shown as percentage). The residual represents the part of the total variance which is not explained by the linear mixed-effect model. Asterisks indicate significant effects based on linear mixed-effect modeling ( $p$  <  $0.05 = *$  and  $p < 0.01 = **$ )

