Supplemental Online Content

Ritter C, Buchmann A, Müller ST, et al. Evaluation of prefrontal γ-aminobutyric acid and glutamate levels in individuals with major depressive disorder using proton magnetic resonance spectroscopy. *JAMA Psychiatry*. Published online October 19, 2022. doi:10.1001/jamapsychiatry.2022.3384

eMethods 1. Study Procedures

eMethods 2. MRI Data Acquisition and Analyses

eResults 1. Comorbidity Analyses

eResults 2. ANCOVA Correcting for Gray Matter Ratio, Age, and Sex

eResults 3. Analyses in Female and Male Groups

eResults 4. Exploratory Factor Analysis of BDI Items

eFigure 1. Female Subgroup Boxplots

eFigure 2. Male Subgroup Boxplots

eReferences.

This supplementary material has been provided by the authors to give readers additional information about their work.

eMethods 1. Study Procedures

The prescreening procedure, conducted via telephone after receiving verbal consent from the participant, included a safety screening for magnetic resonance imaging (MRI), as well as the screening part of the structural clinical interview for DSM disorders (SCID-IV). Subsequently, participants completed an online battery of psychological and physiological questionnaires. Following this telephone screening, an approximately five-hour long face-to-face session was conducted at the Children's Hospital Zürich, at the start of which participants gave written consent and which included interviews of psychological rating scales conducted by a trained psychologist, such as the full SCID-IV interview.¹ This session also included assessments using the Hamilton Depression Rating Scale (HAM-D),² the Montgomery–Åsberg Depression Rating Scale (MADRS),³ and Beck's Depression Inventory (BDI).⁴ Finally, blood samples were collected, and participants underwent MRI scanning, including magnetic resonance spectroscopy (MRS).

eMethods 2. MRI Data Acquisition and Analyses

Measurements included a localizer and a 3D T1-weighted spoiled gradient recalled sequence for the assessment of global and local brain volumes (162 slices of 256x256 voxels, 1x1x1 mm resolution; TR=11 ms, TE=5 ms, TI = 600 ms, flip angle 8°), used for the localization of the MR spectra. The centre of the spectrum was localised by a standardised set of measurements,^{5,6} on a slice 1 mm above the superior margin of the lateral ventricles. On this slice, the length of the midline was measured, and the width of the left hemisphere was calculated at a point 1/3 of the distance from the anterior margin of the brain, along the midline. The midpoint of a perpendicular line crossing from the midline to the lateral margin of the left hemisphere was used to define the voxel center (see Figure 1A and B for a picture of the voxel and the spectra respectively). Editing pulses were applied at 1.9 and 7.5 ppm. Since the GABA findings were not separated from the co-edited macromolecular peak at 3 ppm, the results refer to GABA+ rather than pure GABA. The MRS spectra were processed with the LCModel 6.3-1 H, using a simulated basis set. Spectra were inspected visually for artefacts, and CRLB cutoffs for GABA, Glu, and Gln were set at 20 %, 20 %, and 30 % respectively, resulting in n=372, 372, 248, and 373 datasets for GABA, Glu, Gln, and Glx, passing the guality criteria. Linewidth data from LCModel were used as an additional index of spectral quality. Metabolite levels were referenced to the unsuppressed water peak and derived in institutional units after correction for atrophy and differing water concentrations within the brain and CSF compartments.⁵ We also adjusted for grey matter fraction in all correlation analyses to minimise any confounds from differences in tissue composition, and there were no significant between-group differences of grey matter fraction for any of the MDD diagnosis groups (χ^2 =2.52, p=.283). There was, however, a trend-level

difference between the sexes (χ^2 =3.54, p=.06, $\bar{x}_{Female(n)}$ =.325(250),

 $\bar{x}_{Male(n)}=.316(136)).$

eResults 1. Comorbidity Analyses

Results of metabolite differences between the depression groups remained unchanged with the introduction of the diagnosis of anxiety disorders, OCD, PTSD, and eating disorders as covariates in a ANCOVA for Glu (F(2,368)=3.3, p=.028), with significantly lower Glu concentrations in the past MDD group (Cohen's d=.365, p=.008, mean difference Healthy-Past_(SEM)=.349(.130)), and for GABA (F(2,369)=6.233, p=.002), with significantly lower concentrations in the past (Cohen's d=.458, p<.001, mean difference Healthy-Past(SEM)=.225(.067)), as well as current MDD groups (Cohen's d=.353, p=.042, mean difference Healthy-Current(SEM)=.173(.085)). There were no significant between group differences for Glx. The effect for Gln diminished to trend-level with the introduction of anxiety disorders as a covariate (F(2,244)=2.772, p=.065), but remained significant when anxiety disorders were not included, even if the other disorders where included as covariates (F(2,244)=4.359, p=.014), in which case the results showed significantly higher Gln concentrations in the past MDD group (Cohen's d=-.406, p=.009, mean difference Healthy-Past(SEM)=-.209(.079)), as well as the current MDD group (Cohen's d=-.416, p=.050, mean difference Healthy-Current_(SEM)=-.214 (.109)) when compared to the healthy controls.

Exclusion of n=10 subjects who took psychoactive medication during testing did not change the results of the between-group analyses. GABA concentrations were significantly lower in the past (r=.184, p=.003, $\bar{x}_{\text{Healthy(SEM, n)}}$ =2.70(.03, 232), \bar{x}_{Past} MDD(SEM, n)=2.48(.05, 88), adjusted for FDR) as well as the current MDD group (r=.172, p=.008, $\bar{x}_{\text{Healthy(SEM, n)}}$ =2.70(.03, 232), $\bar{x}_{\text{Current MDD(SEM, n)}}$ =2.47(.07, 34), adjusted for FDR) when compared to healthy controls, while Glu concentrations were significantly lowered in the past MDD group (r=.163, p=.010, $\bar{x}_{\text{Healthy(SEM, n)}}$ =7.52(.06, 230), \bar{x}_{Past}

MDD(SEM, n)=7.23(.11, 89), adjusted for FDR). Gln concentration was significantly higher in the past MDD group (r=.165, p=.043, $\bar{x}_{Healthy(SEM, n)}$ =1.64(.04, 149), \bar{x}_{Past} MDD(SEM, n)=1.85(.08, 64), adjusted for FDR).

eResults 2. ANCOVA Correcting for Gray Matter Ratio, Age, and Sex

In additional ANCOVA analyses with post-hoc pairwise comparisons covarying for grey matter ratio, age, and sex, and for multiple testing using Bonferroni correction we found that the results for the comparison of GABA concentrations between the healthy control group and the past MDD group stayed significant (Cohen's d=.436, pbonferroni=.002, mean differenceHealthy-Past MDD=.216, nHealthy;Past MDD=234,93), while the comparison between healthy controls and current MDD group was reduced to nonsignificance (Cohen's d=.299, pbonferroni=.221, mean differenceHealthy-Current MDD=.148, nHealthy;Past MDD=236,44). See tables 1a and 1b for an overview.

For the other metabolites, the analyses mirrored those described in the manuscript, with no effects found for Glx, significantly lower Glu concentrations in the past MDD group when compared to the control group (Cohen's d=.309, pbonferroni=.045, mean differenceHealthy-past MDD=.292, nHealthy;Past MDD=236,92), and significantly higher Gln concentrations in the past MDD group when compared to the healthy controls (Cohen's d=..406, pbonferroni=.027, mean differenceHealthy-past MDD=-.205, nHealthy;Past MDD=153,66). See tables 2a and 2b, 3a and 3b, and 4a and 4b respectively.

© 2022 American Medical Association. All rights reserved.

Table 1. GABA Concentrations

Table 1a: ANCOVA - GABA Concentrations											
	Sum of Squares	df	Mean Square	F	р	η²					
Overall model	3.22296	5	0.64459	2.70796	0.020						
MDD Diagnosis	3.19435	2	1.59717	6.54229	0.002	0.035					
Grey Matter Ratio	0.00202	1	0.00202	0.00829	0.927	0.000					
Age	0.00701	1	0.00701	0.02871	0.866	0.000					
Sex	0.01958	1	0.01958	0.08019	0.777	0.000					
Residuals	87.15467	357	0.24413								

Comparison												
MDD DiagnosisMDD DiagnosisMean DifferenceSEdftpbonferroniC												
Healthy		-	Past MDD	0.2156	0.0626	357	3.445	0.002	0.436			
		_	Current MDD	0.1476	0.0823	357	1.794	0.221	0.299			
Past MDD		-	Current MDD	-0.0680	0.0925	357	- 0.735	1.000	-0.138			

Bonferroni method.

Table 2. Glx Concentrations

Table 2a: ANCOVA - Glx Concentration													
		Sum of Squar	es	df		Mean Square		F		р		η²	
Overall model		15.9837		5		3.1967		2.7613		0.018			
MDD Diagnosis		1.6879		2		0.8439		0.7245		0.485		0.004	
Grey Matter Ratio		12.5938		1		12.5938		10.8118		0.001		0.029	
Age		0.0561		1		0.0561		0.0481		0.826		0.000	
Sex		1.6459		1		1.6459		1.4130		0.235		0.004	
Residuals		417.0066		358		1.1648							

Table 2b: Post H	loc	: C	on	nparisons – Glx Co	ncentrations by	MD	D Diagno	sis					
Comparison													
MDD MDD Diagnosis Diagnosis					Mean Difference		SE	df		t	p bonferro	ni	Cohen's d
Healthy		-		Past MDD	0.16157		0.136	358	3	1.1859	0.709		0.14971
		-		Current MDD	0.00813		0.180	358	3	0.0452	1.000		0.00753
Past MDD - Current MDD -0.15344 0.202								358	3	- 0.7610	1.000		-0.14217
Note. Comparisons are based on estimated marginal means, corrected for multiple comparisons using the Bonferroni method.													

Table 3. Glu Concentrations

Table 3a: ANCOVA - Glu Concentration												
		Sum of Squares		df		Mean Square		F		р		η²
Overall model		13.4874		5		2.6975		3.2373		0.007		
MDD Diagnosis		5.3219		2		2.6609		2.9819		0.052		0.016
Grey Matter Ratio		5.6171		1		5.6171		6.2946		0.013		0.017
Age		2.4902		1		2.4902		2.7906		0.096		0.008
Sex		0.0583		1		0.0583		0.0653		0.798		0.000
Residuals		317.6829		356		0.8924						

Table 3b: Post	Table 3b: Post Hoc Comparisons – Glu Concentrations by MDD Diagnosis														
C	Con	npa	ari	son											
MDD MDD Diagnosis Diagnosis						Mean Difference	SE		df	t	Pbonferroni	Cohenid 5 0.3086 0 0.0806			
Healthy		-		Past MDD		0.2915	0.119	3	356	2.442	0.045		0.3086		
		_		Current MDD		0.0762	0.157	3	356	0.484	1.000		0.0806		
Past MDD		-		Current MDD		-0.2154	0.176	3	356	- 1.220	0.670		-0.2280		
Note. Comparisons are based on estimated marginal means, corrected for multiple comparisons using the Bonferroni method.															

Table 4. Gln Concentrations

Table 4a: ANCOVA - Gln Concentration												
	Sum of Square	es	df		Mean Squa	re	F		р		η²	
Overall model	5.284		5		1.057		3.998		0.002			
MDD Diagnosis	2.186		2		1.093		4.300		0.015		0.034	
Grey Matter Ratio	0.217		1		0.217		0.855		0.356		0.003	
Age	2.761		1		2.761		10.865		0.001		0.043	
Sex	0.120		1		0.120		0.471		0.493		0.002	
Residuals	59.477		234		0.254							

Table 4b: Post I	Table 4b: Post Hoc Comparisons – Gln Concentrations by MDD Diagnosis												
	Con	npa	rison										
MDD Diagnosis			MDD Diagnosis	Mean Difference		SE	SE df t 0.0777 234 -2.632 0.1057 234 -1.822 0.1172 234 0.102 ected for multiple comparisons 0.102			Pbonfer	P _{bonferroni} Cohen's c		
Healthy		-	Past MDD	-0.2046		0.0777		234	-2.632	0.02	7	-0.4057	
		-	Current MDD	-0.1926		0.1057		234	-1.822	0.20	9	-0.3820	
Past MDD - Current MDD 0.0119 0.1172 234 0.102 1.000 0.0237													
Note. Comparisons are based on estimated marginal means, corrected for multiple comparisons using the Bonferroni method.													

Within the female subgroup, we observed significantly lower GABA concentration in subjects with past MDD when compared to healthy controls (r=.173, p=.033, $\bar{x}_{\text{Healthy}(\text{SEM,n})}$ =2.68(.04, 153), $\bar{x}_{\text{Past MDD}(\text{SEM,n})}$ =2.49(.05, 75), adjusted for FDR). Likewise, Glu concentrations were significantly lower in the past MDD group when compared to the control group (r=.187, p=.019, $\bar{x}_{\text{Healthy}(\text{SEM,n})}$ =7.52(.08, 153), \bar{x}_{Past} MDD(SEM,n)=7.16(.12, 75), adjusted for FDR). Analyses left DLPFC Gln concentrations revealed significantly higher levels in subjects with past MDD when compared to healthy controls (r=.258, p=.009, $\bar{x}_{\text{Healthy}(\text{SEM,n})}$ =1.63(.05, 153) \bar{x}_{Past} MDD(SEM,n)=1.92(.09, 75), adjusted for FDR).

Between-group analyses in the male subgroup revealed significantly lower GABA concentrations in subjects with past MDD when compared to healthy controls (r=.189, p=.046, $\bar{x}_{\text{Healthy(SEM,n)}}$ =2.73(.06, 98), $\bar{x}_{\text{Past MDD(SEM,n)}}$ = 2.48(.13, 23)). The result in the male subgroup diminished to non-significant levels when adjusted for FDR, although the effect size was similar to that seen in the (larger) female subgroup.

In the male subgroup, we found significant associations between GABA levels and MADRS (rho=-.252, p=.005, n=124), BDI (rho=-.261, p=.004, n=122).

eResults 4. Exploratory Factor Analysis of BDI Items

Exploratory factor analysis revealed 4 factors for the twenty-two items of the BDI. Factor 1 was comprised of 5 items of the BDI, mostly associated with a negative self-image that explained 4.7% of the variance with factor loadings from .473 to .748. A second factor, mostly associated with 9 items relating to sadness, anhedonia and negative affect explained 40.3% of the variance with factor loadings between .341 and .695. A third factor, comprised of 5 items associated with somatic symptoms and feelings of being punished, explained 5.1% of the variance and showed loadings from .346 to .608. A final factor comprised of the single BDI item measuring pessimism explained another 3.8% of the variance, with a factor loading of .559 (see Figure 1 for an overview).

In a partial Spearman analysis, controlling for sex and grey matter ratio, GABA concentration was significantly and negatively associated with factors 2 (rho=-.110, p=.037, n=361) and 3 (rho=-.155, p=.003, n=361) identified in the exploratory factor analysis. Glx was not associated with any of the factors. Glu was significantly and negatively associated with factor 3 (rho=-.111, p=.036, n=360). Finally, Gln showed a significant positive association with factor 1 (rho=.150, p=.021, n=239), see Figure 2 for an overview.

Figure 1. Factor Loadings

Factor Loadings											
		1	2		3		4	Uniqueness			
BDI8_SelfCriticism		0.748						0.387			
BDI7_SelfDislike		0.719						0.375			
BDI3_PastFailure		0.682						0.331			
BDI5_Guilt		0.549						0.496			
BDI14_Worthlessness		0.473						0.606			
BDI12_LossOfInterest			0.69	5				0.455			
BDI4_LossOfPleasure			0.65	0				0.410			
BDI17_Tiredness			0.61	0				0.438			
BDI22_InterestInSex			0.58	0				0.618			
BDI13_Indecisiveness			0.50	1				0.486			
BDI15_EnergyLoss		0.330	0.40	0				0.523			
BDI1_Sadness			0.39	6			0.326	0.466			
BDI10_Crying			0.35	3				0.653			
BDI11_Irritability			0.34	1				0.715			
BDI18_Appetite					0.608			0.543			
BDI21_HealthWorry					0.507			0.666			
BDI19_WeightLoss					0.499			0.739			
BDI6_PunishmentFeelings	\square	0.317			0.479			0.601			
BDI9_SuicidalThoughts					0.346		0.310	0.479			
BDI16_SleepChanges								0.657			
BDI2_Pessimism							0.559	0.311			
Note. 'Minimum residual' extrac	tion me	thod was us	ed in comb	inatic	on with a 'ob	olimir	n' rotation	<u>1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1</u>			





Partial Spearman Correlation Analyses of Left DLPFC Neurotransmitter Concentrations (GABA, Glx, Glu, Gln) and the Factors Identified in the Exploratory Factor Analysis of BDI Items, controlled for sex and grey matter ratio. Note: * p < .05, ** p < .01, *** p < .001, the Legend Depicts Color-coded Effect Sizes (Spearman's Rho).





Female Subgroup. Boxplots of left DLPFC neurotransmitter concentrations by MDD diagnosis (corrected for false discovery rate). **A)** Kruskal-Wallis chi-squared = 6.7967, df = 2, p-value = 0.03343; **B)** Kruskal-Wallis chi-squared = 1.0877, df = 2, p-value = 0.5805; **C)** Kruskal-Wallis chi-squared = 9.2515, df = 2, p-value = 0.009797; **D)** Kruskal-Wallis chi-squared = 8.8965, df = 2, p-value = 0.0117.





Male Subgroup. Boxplots of left DLPFC neurotransmitter concentrations by MDD diagnosis (corrected for false discovery rate). **A)** Kruskal-Wallis chi-squared = 7.2183, df = 2, p-value = 0.02708; **B)** Kruskal-Wallis chi-squared = 1.2595, df = 2, p-value = 0.5327; **C)** Kruskal-Wallis chi-squared = 2.1971, df = 2, p-value = 0.3334; **D)** Kruskal-Wallis chi-squared = 2.6282, df = 2, p-value = 0.2687.

eReferences.

- 1. Steinberg M. Interviewer's guide to the structured clinical interview for DSM-IV dissociative disorders (SCID-D). American Psychiatric Pub; 1994.
- 2. Hamilton M. A rating scale for depression J Neurol Neurosurg Psychiatry 23: 56–62. *View Article*. 1960.
- 3. Montgomery S, Åsberg M. *A new depression scale designed to be sensitive to change*. Acad. Department of Psychiatry, Guy's Hospital; 1977.
- 4. Beck AT, Ward CH, Mendelson M, Mock J, Erbaugh J. An Inventory for Measuring Depression. *Archives of General Psychiatry*. 1961;4(6):561-571.
- 5. Chowdhury FA, O'Gorman RL, Nashef L, et al. Investigation of glutamine and GABA levels in patients with idiopathic generalized epilepsy using MEGAPRESS. *J Magn Reson Imaging*. 2015;41(3):694-699.
- 6. Michels L, Martin E, Klaver P, et al. Frontal GABA levels change during working memory. *PloS* one. 2012;7(4):e31933-e31933.