

Dynamical Systems Approach to Studying Resilience in Older Adults

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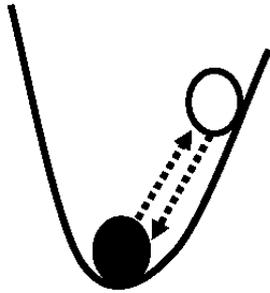
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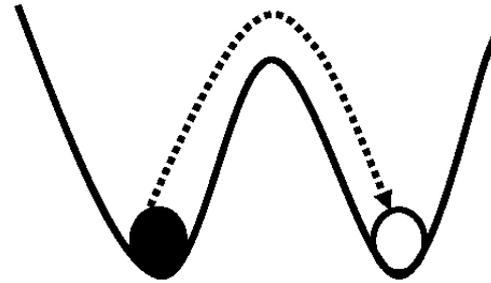
Inter-Related Properties of a Physiological System

- Stability/homeostasis
- Robustness
- Resilience



Stable System

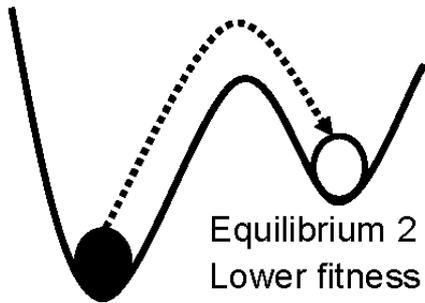
A. HOMEOSTASIS / STABILITY



Equilibrium 1
Baseline fitness

Equilibrium 2
Same level of fitness

B. ROBUST



Equilibrium 1
Baseline fitness

Equilibrium 2
Lower fitness but maintains
phenotypic identity

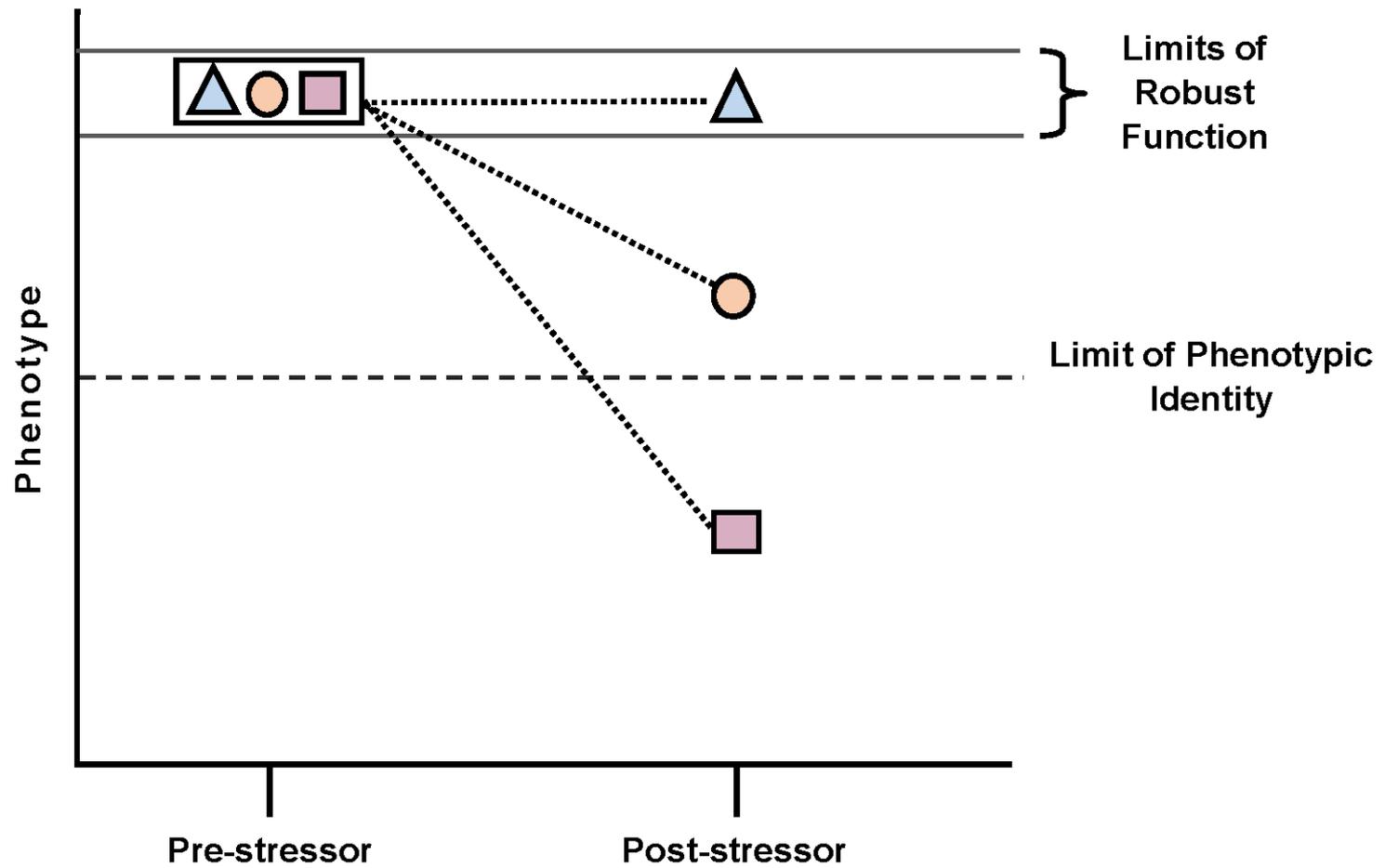
C. RESILIENT / NOT ROBUST



Equilibrium 1
Baseline fitness

Equilibrium 2
Significantly lower fitness and
loss of phenotypic identity

D. NOT RESILIENT



-  is robust
-  is resilient / not robust
-  is not resilient

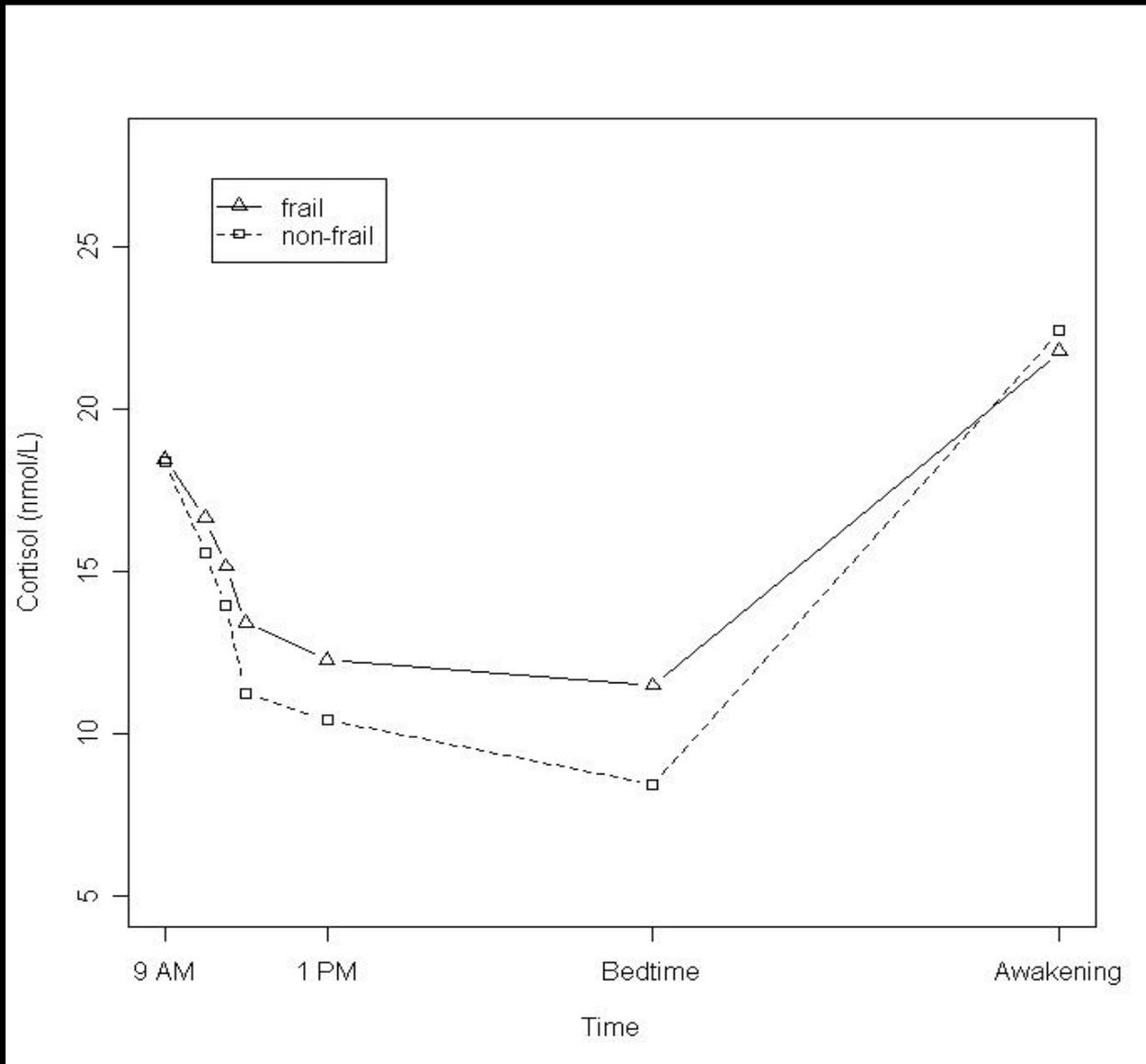
How is Frailty Related to These Concepts?

- Is it lack of robustness?
- Is it lack of resilience
- Is it something else?
- **Note:** robustness and resilience are w.r.t. a particular system and stimulus, whereas frailty is generally viewed as a “global” dysregulation

Dynamical Systems Approach

- Dynamical system: states of system change with time
- Autonomous and non-autonomous
- Autonomous (no external force)
 - diurnal cycles (e.g. cortisol rhythm)
 - longitudinal trajectories (e.g. biomarkers)
- Non-autonomous – a stimulus/stressor is present

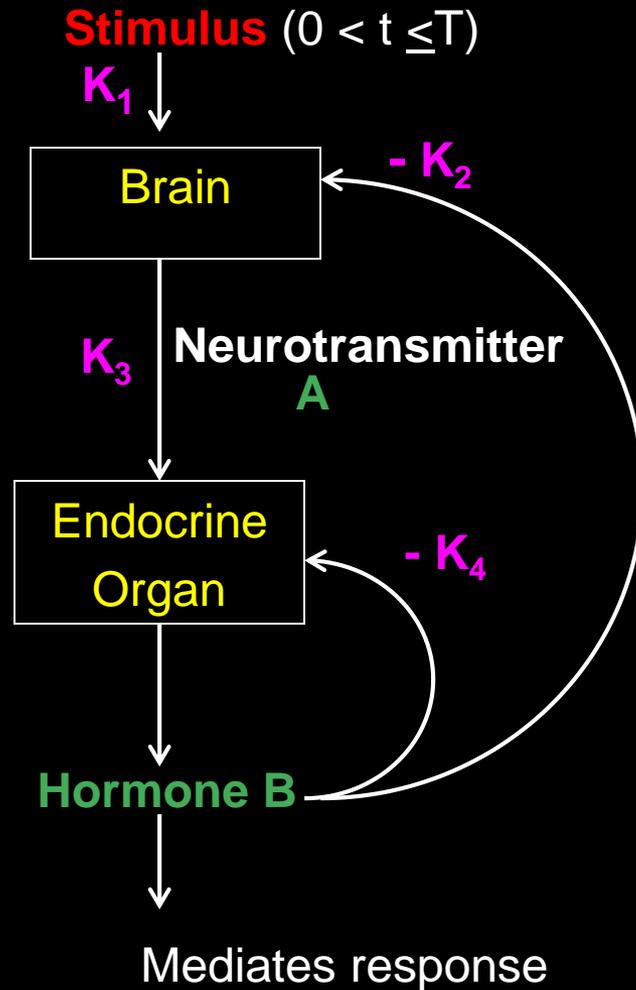
Dynamics of Diurnal Cortisol



Stimulus-Response Paradigm

- Perturb the system with a finite stimulus and study its response (Varadhan, MAD 2008)
 - Response is classically biphasic, i.e. stimulation and recovery phases
 - Focus on magnitude and kinetics of response (e.g. characteristic time constants)

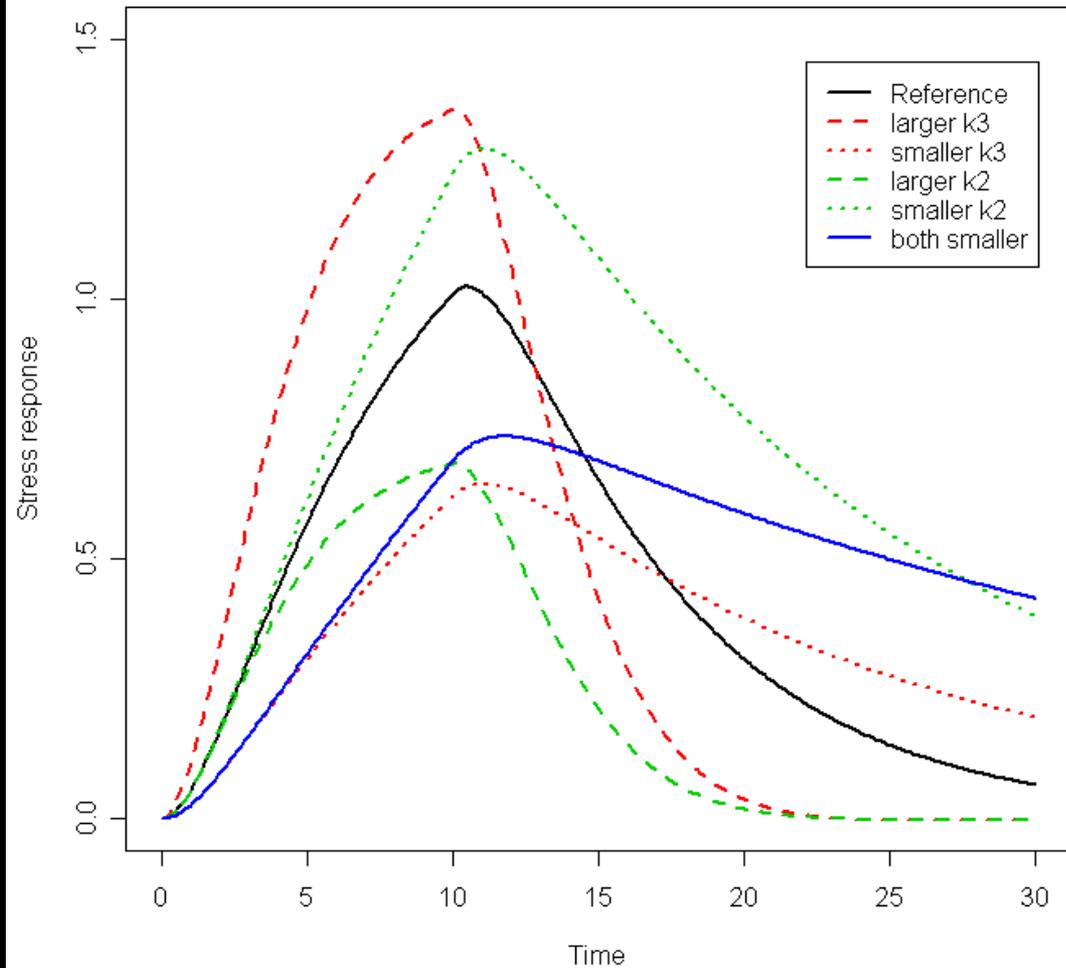
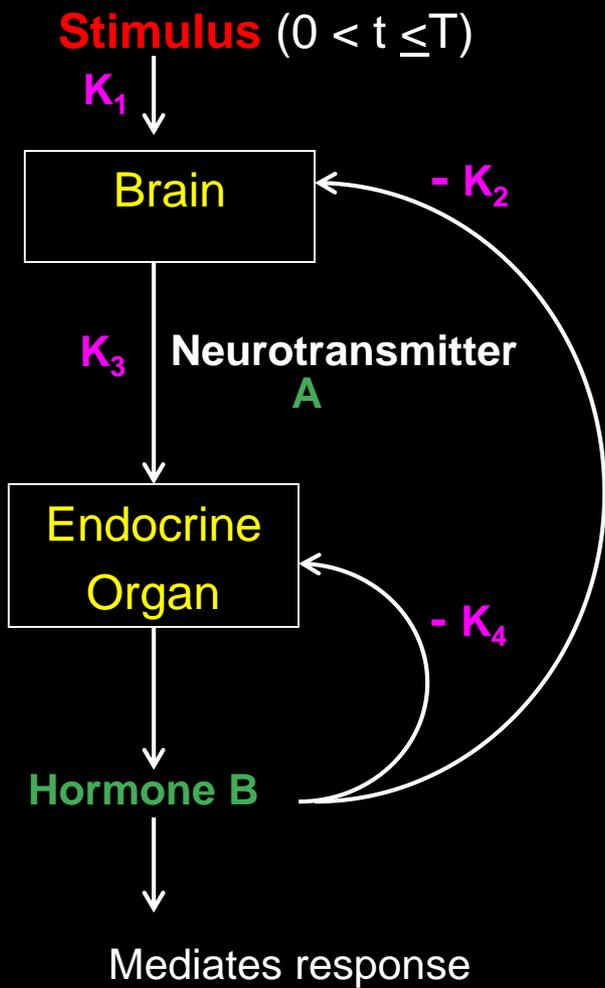
A Specific Example



$$\frac{dA}{dt} = k_1 I\{0 < t \leq T\} - k_2 B$$

$$\frac{dB}{dt} = k_3 A - k_4 B$$

$$A(0) = B(0) = 0$$



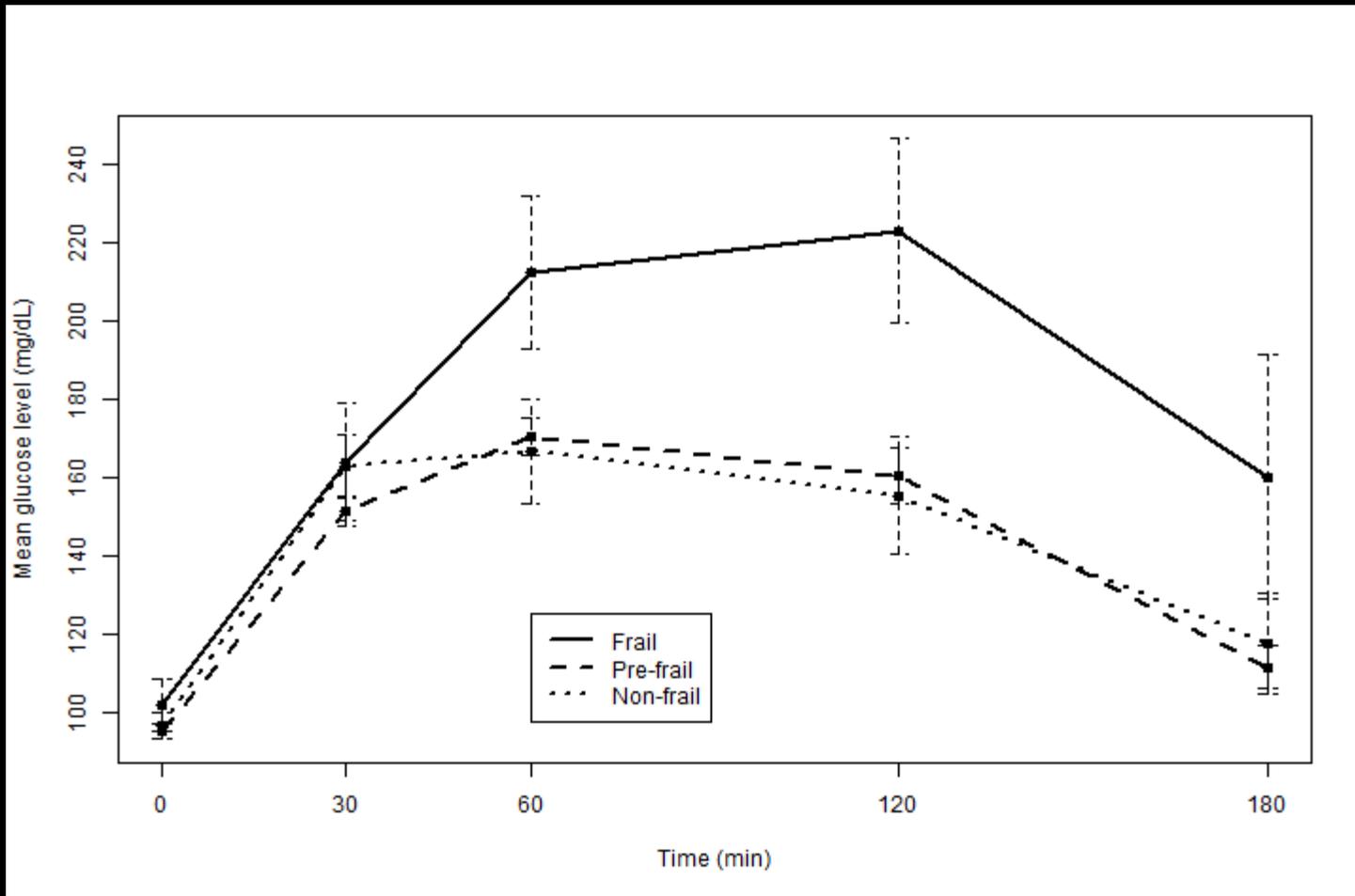
Stimulus-Response Studies in WHAS

- WHAS is a cohort study of community-dwelling women since 1994 (age 70-79 years, N=436)
- Stimulus-response studies in 2008-09 on a subset of survivors (age 84-95 years)
 - **Glucose tolerance test**
 - ACTH stimulation test
 - Magnetic resonance spectroscopy of PCR kinetics in skeletal muscle
 - Influenza vaccination
 - Low-level activity

Glucose Tolerance Test

- Response to 75-g oral glucose (measure blood glucose, insulin, ghrelin and leptin levels at 0, 30, 60, 120 min)
- To detect whether impaired glucose metabolism is implicated in frailty
- Frail = 9; prefrail = 17; nonfrail = 47 (N=73)

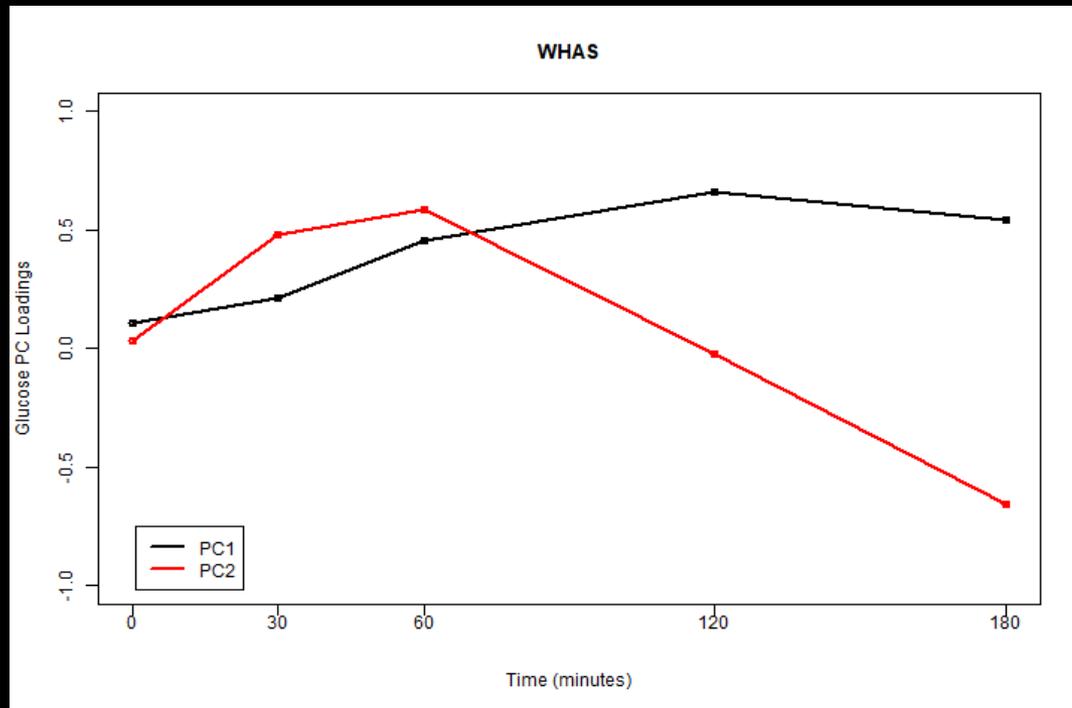
Glucose Levels by Frailty Status



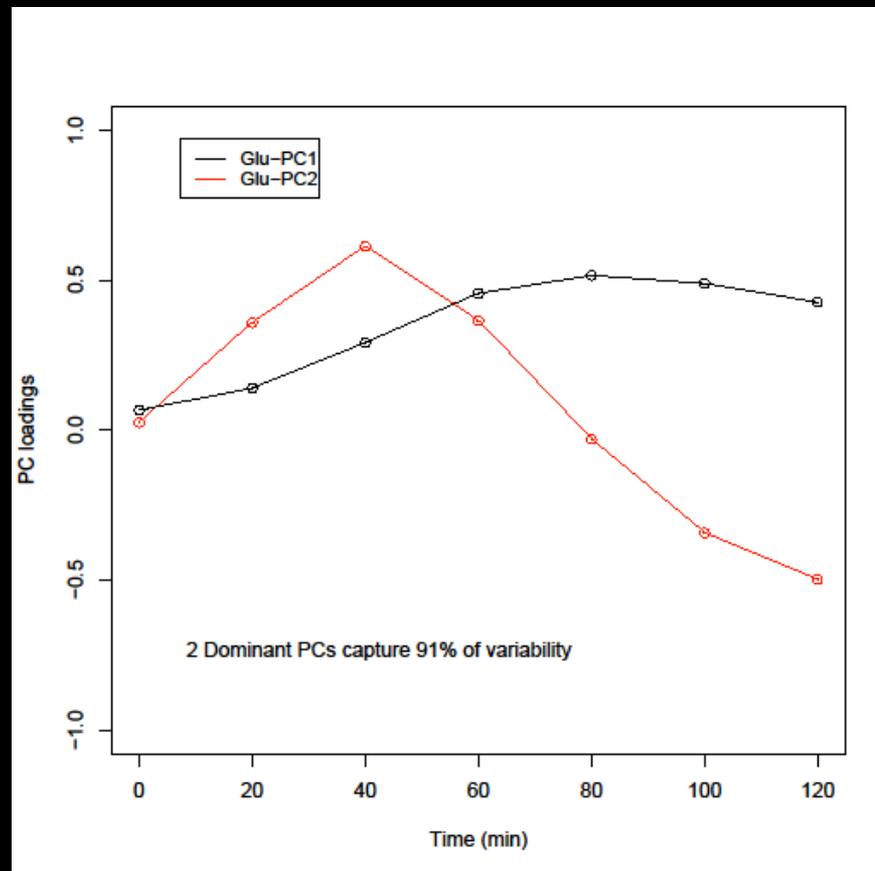
Functional Principal Components

- To parsimoniously capture the temporal variability in dynamic response
- $Y_i(t_j) = f_i(t_j) + \epsilon_i(t_j)$
 - $\epsilon_i(t_j)$ = measurement error + high-frequency oscillations $> K$
- $f_i(t_j) = \sum_{k=1}^K U_{ki} \varphi_k(t_j)$
 - where $\varphi_k(t)$ are basis functions (PC loadings);
 U_{ki} are random coefficients (PC scores)
- $K = 2$ is often sufficient

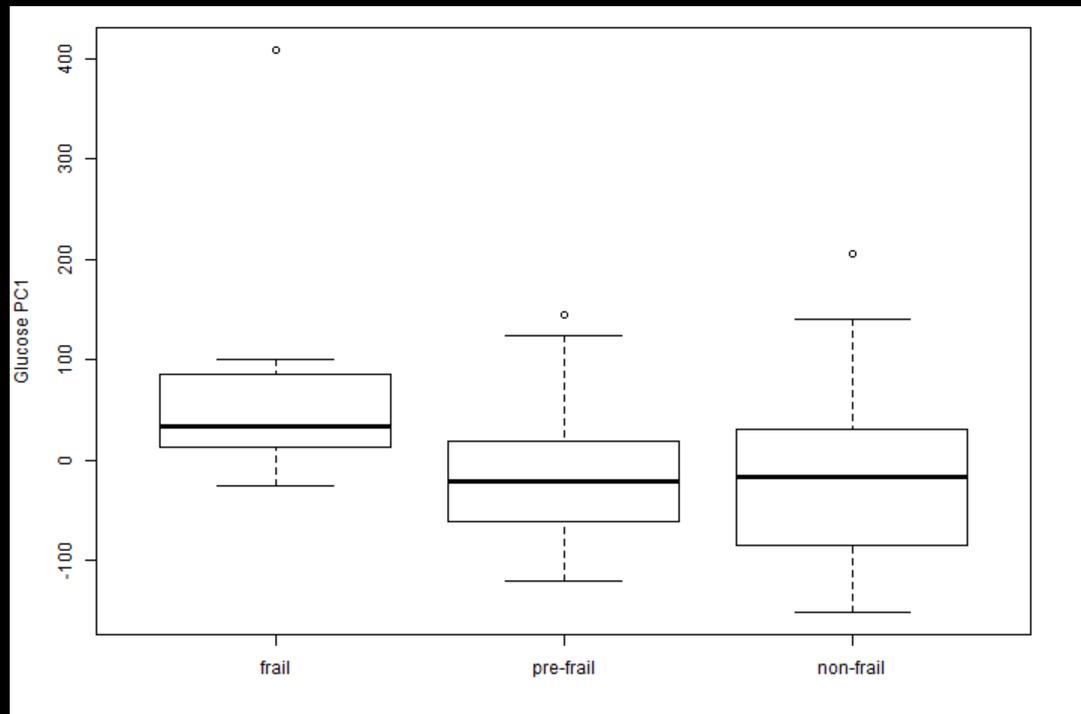
PC Loadings for Glucose in WHAS



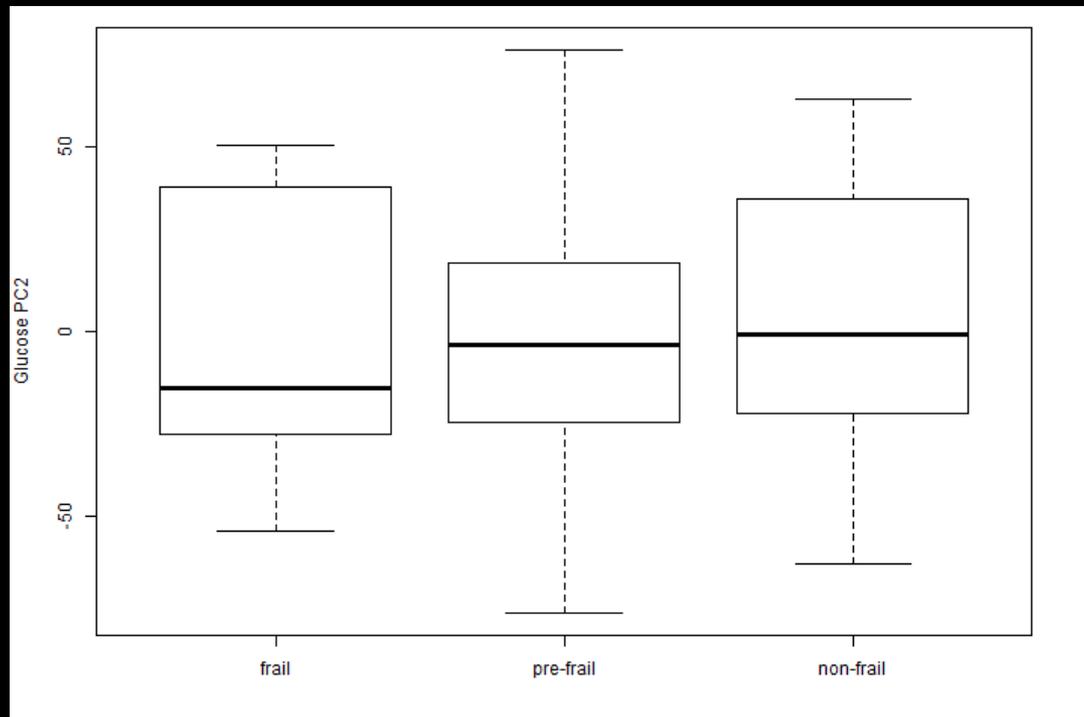
PC Loadings for Glucose in BLSA



First PC by Frailty Status



Second PC by Frailty Status



Variability

- Two types of variability: intra-person and inter-person variability
- Within person variability: low-frequency versus high-frequency variations
- Often, high-frequency variations are indicative of reactive tuning (e.g., heart-rate variability, gait pattern variability)
- $1/f$ spectral pattern indicates robustness
- Variability versus complexity

Variability

- Inter-person variability is an essential aspect of aging: **the Anna Karenina principle!**
 - “Happy families are all alike; every unhappy family is unhappy in its own way”
- Between-person variability may be partly due to increased within-person variation (dysregulation of homeostatic controls or loss of complexity)
- “Gerentropy”

Characterizing Variability

- Spectral analysis for within-person variability
- Nonlinear random effects (hierarchical) models for both types of variability
- Model parameters vary across groups of individuals
- Different parameter distributions for non-resilient and resilient

Some Important Considerations

- What is the goal of studying resilience?
- Which physiological system to study?
- Which stimulus to apply or study (controlled versus natural)?
- Which responses to measure?
- Should we consider multi-system interactions?

Some Important Considerations

- Design of experiment
 - selection of subjects
 - strength and duration of stimulus
 - sample collection frequency
- Modeling: parametric versus non-parametric
- How to distinguish normal vs. dysregulated response?

Challenges Ahead

- We need to think critically about the utility of stimulus-response paradigm
- Will it yield novel and useful insights?
- A coherent biological framework is essential to obtain useful insights
- NIA has funded animal-model studies to develop “assays” (stimulus-response experiments) for measuring resilience

Challenges Ahead

- Experiments are intensive and involve significant burden for older adults
- Decreased participation of frail + increased variability of responses → low SNR
- Is it feasible to do these experiments on a large scale?
- Animal models can yield useful insights but transportability is an issue

Thank You

Stimulus-Response Experiments in WHAS

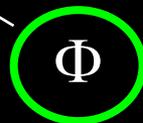
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Integration of Short- and Long-Term Dynamics

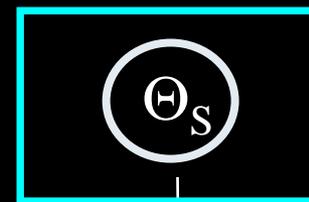
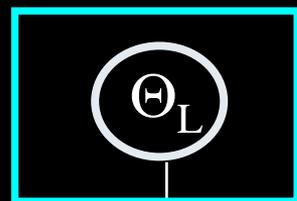
Clinical Phenotype



Physiologic Reserve



Parameters



Biomarkers

