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Brain-age prediction: Systematic evaluation of site effects, and sample age range and size

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Abstract

Structural neuroimaging data have been used to compute an estimate of the biological age of the brain (brain-age) which has been associated with other biologically and behaviorally meaningful measures of brain development and aging. The ongoing research interest in brain-age has highlighted the need for robust and publicly available brain-age models pre-trained on data from large samples of healthy individuals. To address this need we have previously released a developmental brain-age model. Here we expand this work to develop, empirically validate, and disseminate a pretrained brain-age model to cover most of the human lifespan. To achieve this, we selected the best-performing model after systematically examining the impact of seven site harmonization strategies, age range, and sample size on brain-age prediction in a discovery sample of brain morphometric measures from 35,683 healthy individuals (age range: 5–90 years; 53.59% female). The pre-trained models were tested for cross-dataset generalizability in an independent sample comprising 2101 healthy individuals (age range: 8-80 years; 55.35% female) and for longitudinal consistency in a further sample comprising 377 healthy individuals (age range: 9-25 years; 49.87% female). This empirical examination yielded the following findings: (1) the accuracy of age prediction from morphometry data was higher when no site harmonization was applied; (2) dividing the discovery sample into two age-bins (5-40 and 40-90 years) provided a better balance between model accuracy and explained age variance than other alternatives; (3) model accuracy for brain-age prediction plateaued at a sample size exceeding 1600 participants. These findings have been incorporated into CentileBrain (https://centilebrain.org/#/brainAGE2), an open-science, web-based platform for individualized neuroimaging metrics.

KEYWORDS

benchmarking, brain aging, brainAGE

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1 | INTRODUCTION

Prior literature has documented extensive age-related changes in brain morphology as inferred from structural magnetic resonance imaging (sMRI) studies (Bethlehem et al., 2022; Dima et al., 2022; Frangou et al., 2022; Ge et al., 2024; Hogstrom et al., 2013; Jiang et al., 2022). Machine learning algorithms can model these age-related changes to generate an estimate of the biological age of the brain (brain-age) (Baecker, Dafflon, et al., 2021; More et al., 2023; Schulz et al., 2020). Brain-age estimates derived from healthy individuals can

be used to establish a normative reference pattern for typical development and aging. In each individual, large deviations between brainage and chronological age indicate atypical development or aging (Ball et al., 2021; Cole & Franke, 2017; Franke & Gaser, 2019; Modabbernia et al., 2022).

Key parameters that influence accuracy of any brain-age prediction workflow comprise the type of morphometric input features and machine learning algorithms, the size and age range of the sample, and the handling of site-effects, in the case of pooled samples. Input features include voxel-wise data (Baecker, Dafflon, et al., 2021;

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Baecker, Garcia-Dias, et al., 2021; Cole, 2020), or data derived via dimensionality reduction through atlas-based parcellation (Modabbernia et al., 2022; Kim et al., 2023) or statistical methods (e.g., principal component analysis) (Franke et al., 2013). Generally, there is limited advantage to using voxel-wise data or highly granulated parcels (Baecker, Dafflon, et al., 2021; Baecker, Garcia-Dias, et al., 2021; Modabbernia et al., 2022; Valizadeh et al., 2017). There are also multiple algorithms for computing brain-age that comprise conventional methods, such as linear and Bayesian models, tree-based and kernel-embedded models (Schölkopf & Smola, 2002), and artificial neural networks commonly referred to as deep learning networks (Baecker, Garcia-Dias, et al., 2021; Tanveer et al., 2023). Studies that have undertaken a comparative evaluation of these algorithms on the accuracy of sMRI-derived brain-age estimates collectively suggest that conventional methods outperform deep learning networks in addition being computationally more efficient (Couvy-Duchesne to et al., 2020; de Lange et al., 2022; Grinsztajn et al., 2022; He et al., 2020; Modabbernia et al., 2022; More et al., 2023).

We have previously shown that Support Vector Regression (SVR) with Radial Basis Function (RBF) Kernel is preferable to parametric and nonparametric, Bayesian, linear and nonlinear, and other kernel-based models particularly because of its resilience to extreme outliers (Modabbernia et al., 2022). We adopted this algorithm to build a developmental brain-age model based on morphometric data from healthy youth aged 5-22 years (Modabbernia et al., 2022) and made this freely available to the scientific community through a web platform dedicated to providing models for individual-level neuroimaging measures (https://centilebrain.org/#/brainAGE). Here we extend our previous work to construct brain-age prediction models that are empirically validated and provide greater coverage of most of the human lifespan. To achieve this, we pooled brain morphometric data from 35,683 healthy individuals (aged 5-90 years), as the discovery sample, and data from an independent sample totaling 2102 healthy individuals (aged 27.74 years), as the replication sample. We evaluated the effect of age and sample composition on model performance as there is no consensus regarding the optimal method for integrating these parameters into brain-age models. It is acknowledged that site harmonization strategies (Lombardi et al., 2020) significantly affect the performance of brain-age models. Moreover, brain-age studies have focused either on youth (Ball et al., 2021; Brouwer et al., 2021; Luna et al., 2021) or on middleaged and elderly individuals (Cole & Franke, 2017; Elliott et al., 2021). Thus, the workflow required for reliable brain-age estimates in samples that cover most of the lifespan remains unclear. To address these knowledge gaps, we empirically evaluated the performance of the SVR-RBF algorithm in our discovery sample using diverse site harmonization strategies and by resampling the discovery model to produce subsets of different sizes and age ranges. The resulting models were then tested on the replication sample for cross-sample performance and longitudinal consistency. We outline our method in detail while codes and the best-performing models are freely available on our dedicated web platform (https:// centilebrain.org/#/brainAGE2).

Age prediction based on neuroimaging data is widely used for the computation of individualized measures of the pace of development or aging (Ball et al., 2021; Cole & Franke, 2017; Franke & Gaser, 2019; Modabbernia et al., 2022). Adults with older brain-age relative to chronological age are more likely to experience negative health and cognitive outcomes (Bittner et al., 2021; Cole, 2020; Cole et al., 2018; Sone et al., 2022) leading to the recommendation for the adoption of brain age measures into clinical care (Wood et al., 2022). In children and adolescents, the role of older or younger brain-age remains a focus of interest and research activity (Ball et al., 2021; Modabbernia et al., 2022).

In this context, the current study contributes to the field in two distinct ways. First, the models developed are freely accessible freely a web platform designed so that requires minimal computational skills or infrastructure to generate brain age data from any sample. This democratizing of the computational modeling for brain-age empowers researchers from diverse backgrounds, fosters collaborations innovation and accelerates discoveries. Second, the availability of robust and generalizable models of brain age holds the promise of enhancing reproducibility across different research studies and provide a standardized method for brain age computation.

2 | METHODS

2.1 | Samples

Different independent samples were used for discovery, replication, and longitudinal consistency. These samples included pooled multisite sMRI data from Australia, East Asia, Europe, and North America (Data S1 and Figure S1, Supporting Information). The discovery sample comprised 35,683 healthy individuals (53.59% female, age range 5–90 years; Table S1). The replication sample comprised a total of 2101 healthy individuals (55.35% female, age range 8–80 years; Table S2). The longitudinal consistency sample included data from 377 healthy individuals (age range: 9–25 years; 49.87% female; Table S2) participating in the Southwest Longitudinal Imaging Multimodal Study (SLIM) and the Queensland Twin Adolescent Brain Study (QTAB). Only high-quality morphometric measures (Data S2) were included from participants who were free of psychiatric, medical, and neurological morbidity and cognitive impairment at the time of scanning.

2.2 | Brain morphometric input features

Morphometric feature extraction from whole-brain T1-weighted images was implemented using the standard pipelines in the FreeSurfer image analysis suite (http://surfer.nmr.mgh.harvard.edu/) to yield a total of 150 morphometric features that have been extensively utilized in prior models for predicting brain age (de Lange et al., 2022; Elliott et al., 2021; Han et al., 2021). These comprised Desikan-Killiany atlas measures of cortical thickness (n = 68), cortical surface area (n = 68) (Desikan et al., 2006), and regional subcortical volumes (n = 14) based on the Aseg atlas (Fischl et al., 2002).

2.3 | Evaluation of brain-age models

2.3.1 | Core elements

- All brain-age models evaluated were sex-specific because of the known sex differences in brain morphometry (Ge et al., 2021; Liu et al., 2020). The method of evaluation was identical for both sexes.
- 2. All models used the same 150 input features described above.
- 3. All models used the SVR-RBF which we adopted as our algorithm of choice as we have demonstrated its favorable performance in terms of accuracy, computational efficiency, and robustness to outliers when compared to other machine learning algorithms (Modabbernia et al., 2022). This choice is supported by independent studies that have undertaken a comparative evaluation of multiple algorithms (Beheshti et al., 2022; More et al., 2023).
- 4. The primary performance measures for all models were the mean absolute error (MAE), which represents the absolute difference between brain-age and chronological age, and the correlation coefficient (CORR) between brain-age and chronological age.
- 5. Brain-age is often overestimated in younger individuals and underestimated in older people (de Lange & Cole, 2020; Liang et al., 2019). To counter this bias, we implemented a robust approach to adjust this age-related bias following Beheshti and colleagues (Beheshti et al., 2019). However, as age bias-corrected metrics often reflect elevated accuracy, even for models with poor performance (de Lange et al., 2022), we focus primarily on uncorrected model performance.

2.3.2 | Analysis workflow

The procedures used to generate optimized sex-specific models are illustrated in Figure 1. For all models, hyperparameter tuning (C and sigma) was performed in the discovery sample using a grid search approach in a 10-fold cross-validation scheme across five repetitions. In each cross-validation, 90% of the discovery sample was used to train the model and 10% was used to test the model parameters; subsequently, the model was retrained on the entire discovery sample using the optimal hyperparameters identified from the crossvalidation process. As detailed in the subsequent sections, first, we tested three different strategies for handling site effects. The siteharmonization strategy used in the subsequent procedures was selected based on its superior performance, as indicated by the lowest within-sample cross-validation MAE (MAE_{CV}) and the highest CORR (CORR_{CV}) in the discovery sample. The model with the lowest replication MAE and highest replication CORR in the replication sample (referred to MAE_R and CORR_R) and in the longitudinal consistency samples was chosen as the preferred model.

2.3.3 | Evaluation of site effects and age range in the discovery sample

We evaluated seven site handling strategies after partitioning the discovery sample into different age bins as follows: (i) a single bin with the full sample age range (5–90 years); (ii) nine bins each covering sequential 10-year intervals, that is, age \leq 10 years, 10 < age \leq 20 years, 20 < age \leq 30 years, 30 < age \leq 40 years, 40 < age \leq 50 years, 50 < age \leq 60 years, 60 < age \leq 70 years, 70 < age \leq 80 years, and 80 < age \leq 90 years; (iii) four bins each covering sequential 20-year

FIGURE 1 Flowchart of brain age model optimization: after conducting the analysis with FreeSurfer and stratifying the samples by sex, the study proceeded as follows. (1) The discovery sample was utilized to evaluate the impact of siteharmonization strategies and age range. This analysis yielded the optimal site-harmonization strategy. (2) The independent replication sample was employed to further investigate the influence of age range. The outcome of this analysis led to the determination of the optimal age bins and final models. (3) The independent longitudinal consistency sample was utilized to assess the longitudinal consistency of the pre-trained optimal models.



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that age ≤ 20 years, intervals. is, $20 < age \le 40$ years. 40 < age \leq 60 years, and 60 < age \leq 80 years; (iv) three bins each covering sequential 30-year intervals, that is, age \leq 30 years, 30 < age \leq 60 years, and 60 < age \leq 90 years; (v) two age bins each covering sequential 40-year intervals, that is, age ≤ 40 years and 40 < age ≤ 90 years. Seven site handling strategies were separately applied to each bin to perform data residualization with respect to site using: (i) Combat-GAM (Pomponio et al., 2020); (ii) CovBat without age variability preservation (Chen et al., 2021); (iii) CovBat with age variability preservation (Chen et al., 2021); (iv) Subsampling Maximummean-distance Algorithm (SMA) (Wang et al., 2023; Zhou et al., 2018); (v) Invariant Conditional Variational Auto-Encoder (ICVAE) (Moyer et al., 2020; Wang et al., 2023); (vi) generalized linear model (de Lange et al., 2022); and (vii) no site harmonization. In the case of Combat-GAM, age was specified as the smooth term in the model while the empirical Bayes estimates were used for site effects, without custom boundaries for the smoothing terms. ComBat-GAM was implemented using Python (version 3.8.10) scripts. The CovBat approach was implemented using R scripts (version 3.6.0). The SMA method was implemented using Matlab (version R2021a) with the largest sample as the target site, in accordance with recommendations of Wang et al. (2023) The ICVAE was implemented using Python (version 3.8.10). To prevent data leakage, the harmonization process was applied separately to the training and test datasets during crossvalidation. The approach and age partition with the best-performing MAE_{CV} and CORR_{CV} values were considered for further evaluation.

2.3.4 | Evaluation of site effects and age range in the replication sample

The replication sample was partitioned in age bins similarly to the discovery sample and the pre-trained models were applied. The age bin partition that yielded the highest performing MAE_R and $CORR_R$ values was identified as the preferred age bins.

2.3.5 | Estimation of the minimum sample size

The discovery sample was randomly partitioned into 30 sex-specific subsets, ranging from 200 to 6000 participants in increments of 200, without replacement. The robustness of the optimized sex-specific models to sample size in terms of $CORR_{CV}$ and MAE_{CV} was assessed in each partition using 10-fold cross-validation with five repetitions. This analysis was performed individually for each of the preferred age bins according to section 2.3.4.

2.3.6 | Longitudinal consistency

The sample used to test longitudinal consistency included T1-weighted scans from a total of 377 participants scanned twice with an average interval of 1.89 (0.56) years. This sample was also divided into the preferred age bins as in the discovery and replication samples in section 2.3.4. The percentage change in MAE and CORR between the second scan and the first scan was evaluated in each age bin.

3 | RESULTS

3.1 | Site and sample age range

Figure 2 illustrates cross-validated model performance for the different site harmonization approaches. For simplicity, we display the results for the 40-year age-bins averaged across sexes (Figures S2 and S3 provide sex-specific results). For both sexes, omitting site correction demonstrated superior performance in terms of attaining the lowest MAE_{CV} values and highest $CORR_{CV}$ values compared to the other six site harmonization approaches. Consequently, the models that did not employ site harmonization were used in all subsequent analyses.

The CORR and MAE were generally higher for models from age bins with a wider age range (Figures S4 and S5). In other words, such models accounted for more of the variance in age but were less accurate. Therefore, to achieve a balance between CORR and MAE, we selected the two-bin partition with sequential 40-year intervals (i.e., 5–40 and 40–90 years). Figure 3 illustrates these results across both sexes. By adopting this approach, we managed to combine a relatively low MAE with a relatively high CORR across sexes in the two age bins. Specifically, the average MAE_{CV} and CORR_{CV} were 3.55 (1.17) years and 0.79 (0.10) and the average MAE_R and CORR_R were 5.28 years and 0.68 in the two-bin partition (i.e., 40-year intervals).

Age-bias adjustment generally improved the CORR_{CV} and MAE_{CV} by 79.67% and 35.56%, respectively, in the discovery sample (Tables S3 and S4) and improved the CORR_R and MAE_R by 287.06% and 41.79% in the replication sample (Tables S5 and S6).

3.2 | Effect of sample size

Figure 4 illustrates the effect of sample size in the discovery and replication samples using pre-trained models that were tested in 30 sexspecific subsets, ranging from 200 to 6000 participants in increments of 200, without replacement. In the discovery sample, the $CORR_{CV}$ improved in line with sample increase up to a size of 1600 participants and it plateaued thereafter; the MAE_{CV} on the other hand exhibited smaller variation as a function of sample size and plateaued around 1000 participants (Figure S6 for sex-specific results). Similarly, in the replication sample, the $CORR_R$ increased, and MAE_R decreased as a function of the sample size until it reached 1600 participants and plateaued thereafter.

3.3 | Longitudinal consistency

Figure 5 illustrates the stability of the pre-trained models in each age bin using the longitudinal consistency sample. The results indicated that models utilizing the two-bin partition (i.e., 5–40 and 40–90 years) achieved optimal consistency on the longitudinal data. Sex-specific





FIGURE 2 Effect of site harmonization approach on the performance of models derived from repeated cross-validation in different age bins of the discovery sample. Each bar represents one of the seven site handling methods. CORR, correlation coefficient between brain-age and chronological age; MAE, mean absolute error between brain-age and chronological age. Sex-specific results in Figures S2 and S3.



FIGURE 3 Performance metrics derived from the application of the models pre-trained on different age bins of the discovery sample to the corresponding age bins of the replication sample. CORR values averaged across sexes were 0.68 for 40-year interval bins; and 0.86 for the full age range of the sample. MAE values averaged across sexes were 5.28 years for 40-year interval bins; and 8.52 years for the full age range of the sample. Sex-specific results are presented in Figure S4. CORR, correlation coefficient between brain-age and chronological age; MAE, mean absolute error between brain-age and chronological age.

results are shown in Tables S7 and S8. On average, age-bias adjustment improved the CORR and MAE by 63.50% and 30.54%, respectively, in the first scan of the longitudinal consistency sample; and age-bias adjustment improved the CORR and MAE by 73.39% and 20.87%, respectively, in the second scan of the longitudinal consistency sample (Tables S7 and S8).

3.4 | Data and model availability

Information about data availability is provided in Tables S1 and S2. Our dedicated web portal freely provides the optimal model parameters to be applied to any user-specified dataset in the context of open science. In addition to the pre-trained sex-specific models, the website provides tutorials and codes (https://centilebrain.org/#/tutorial4).

4 | DISCUSSION

There is increased emphasis on the potential translational value of individualized neuroimaging measures such as brain-age that can be used to track deviation from typical brain development and aging (Ball et al., 2021; Cole & Franke, 2017; Franke & Gaser, 2019; Modabbernia et al., 2022). The literature on morphometry-derived



FIGURE 4 Model performance as a function of the sample size in the two age bins (5-40 and 40-90 years) of the discovery sample. Model parameters for each bin were obtained by randomly resampling the discovery sample without replacement generating subsets of 200–6000 participants. The results are shown here as averages across sexes and the sex-specific findings are presented in Figure S6. CORR, correlation coefficient between brain-age and chronological age; MAE, mean absolute error between brain-age and chronological age.

brain-age models from healthy individuals shows performance heterogeneity that is predicated on methodological differences in the specific features used, the algorithm employed, the handling of siteeffects, the sample size, and age distribution. The aim of the current investigation was to provide a benchmarked resource to be used as a normative reference for brain-age by the scientific community. Having such a resource accomplishes at least four important objectives. First, it enables harmonization of the methods and models available for brain-age computation across studies. Second, it empowers researchers who do not have access to large normative datasets to generate reliable brain-age estimates in their own datasets. Third, it supports rigor and reproducibility in brain-age research. Fourth, together with our developmental brain-age model (Modabbernia et al., 2022), also available through our web platform, it provides models that cover most of the human lifespan (5-90 years) thus meeting the needs of researchers working in development or aging.

Following a systematic empirical evaluation, we selected SVR-RBF as the key algorithm (Modabbernia et al., 2022), and in this study, we determined the optimal site handling method for our model as well as the optimal age distribution for brain-age computation across most of the lifespan. This detailed evaluation was necessary as multiple prior studies have shown that site harmonization strategies as well as sample age distribution and size can influence model performance (de Lange et al., 2022). As in previous reports, we found an inverse association between the age range of a sample, the MAE of the model, and the coefficient of correlation between brain-age and chronological age (de Lange et al., 2022). MAE is generally lower in samples with a narrower age range which is attributable to the minimization of errors when the predicted brain-age approximates the mean chronological age of a sample. Concomitantly, the correlation between brain-age and chronological age becomes lower the narrower the age range of a sample (de Lange et al., 2022). Previous



FIGURE 5 Model performance in longitudinal data. The left panel presents the CORR and MAE values for the first and second MRI scans, while the right panel exhibits the percentage changes (%) in CORR and MAE for the second scan compared to the first scan. The results were generated by employing models that had been trained on discovery samples from each age range division and then applied to the longitudinal consistency sample. CORR, correlation coefficient between brain-age and chronological age; MAE, mean absolute error between brain age and chronological age.

reports have also shown that model accuracy for brain-age is generally better with larger sample sizes (de Lange et al., 2022). Here we confirm this observation, and we also show that this relationship plateaus in samples with over 1600 participants. This finding is particularly useful for evaluating the robustness of other existing models and for planning future studies.

The model proposed here suggests that an optimal balance between MAE and CORR is achieved when the lifespan sample is partitioned into two sequential age bins, 5–40 and 40–90 years. The agebias corrected MAE and CORR values for females in the 5–40 years age bin were 3.53 and 0.83, respectively, and in the 40–90 years age bin they were 4.45 and 0.86, respectively (also Table S5). In males, the age-bias corrected MAE and CORR values for females in the 5– 40 years age bin were 3.60 and 0.84, respectively, and in the 40– 90 years age-bin, they were 4.09 and 0.87, respectively (also Table S6). These values are well within the range reported in other studies that have evaluated different computational approaches to brain-age in healthy individuals. For example, More and colleagues (More et al., 2023) reported a range of MAE values between 4 and 8 years.

We appreciate that brain morphometric features are not the only type of neuroimaging measures that can be used to derive brain-age estimates. Other studies have used other neuroimaging modalities (Beck et al., 2021; Goyal et al., 2019; Lund et al., 2022; Zhou et al., 2023) or combinations of modalities (Cole, 2020; Niu et al., 2020; Rokicki et al., 2021). Although it is important for the field to have a range of options for computing brain-age that can accommodate a variety of scientific questions, the wide availability and relative ease of acquiring and extracting brain morphometric data contribute to the popularity and preponderance of brain-age studies that use such data.

In conclusion, we present empirically validated models for brainage that can accommodate studies using data across most of the lifespan. We have outlined the methodological choices that have led to these models as well as their performance within and across samples as well as longitudinally.

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CONFLICT OF INTEREST STATEMENT

Jair C. Soares reports the following conflicts of interest: ALKERMES (Advisory Board), BOEHRINGER Ingelheim (Consultant), COMPASS Pathways (Research Grant), JOHNSON & JOHNSON (Consultant), LIVANOVA (Consultant), RELMADA (Research Grant), SUNOVION (Research Grant), and Mind Med (Research Grant).

DATA AVAILABILITY STATEMENT

The data that support the findings of this study are available on request from the corresponding author. The data are not publicly available due to privacy or ethical restrictions.

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REFERENCES

- Baecker, L., Dafflon, J., da Costa, P. F., Garcia-Dias, R., Vieira, S., Scarpazza, C., Calhoun, V. D., Sato, J. R., Mechelli, A., & Pinaya, W. H. L. (2021). Brain age prediction: A comparison between machine learning models using region- and voxel-based morphometric data. *Human Brain Mapping*, 42(8), 2332–2346. https://doi.org/10. 1002/hbm.25368
- Baecker, L., Garcia-Dias, R., Vieira, S., Scarpazza, C., & Mechelli, A. (2021). Machine learning for brain age prediction: Introduction to methods and clinical applications. *EbioMed*, 72, 103600. https://doi.org/10. 1016/j.ebiom.2021.103600
- Ball, G., Kelly, C. E., Beare, R., & Seal, M. L. (2021). Individual variation underlying brain age estimates in typical development. *NeuroImage*, 235, 118036. https://doi.org/10.1016/j.neuroimage.2021.118036
- Beck, D., de Lange, A. G., Maximov, I. I., Richard, G., Andreassen, O. A., Nordvik, J. E., & Westlye, L. T. (2021). White matter microstructure across the adult lifespan: A mixed longitudinal and cross-sectional study using advanced diffusion models and brain-age prediction. *NeuroImage*, 224, 117441. https://doi.org/10.1016/j.neuroimage.2020.117441
- Beheshti, I., Ganaie, M. A., Paliwal, V., Rastogi, A., Razzak, I., & Tanveer, M. (2022). Predicting brain age using machine learning algorithms: A comprehensive evaluation. *IEEE Journal of Biomedical and Health Informatics*, 26(4), 1432–1440. https://doi.org/10.1109/JBHI.2021.3083187
- Beheshti, I., Nugent, S., Potvin, O., & Duchesne, S. (2019). Bias-adjustment in neuroimaging-based brain age frameworks: A robust scheme.

Neuroimage: Clinical, 24, 102063. https://doi.org/10.1016/j.nicl.2019. 102063

- Bethlehem, R. A. I., Seidlitz, J., White, S. R., Vogel, J. W., Anderson, K. M., Adamson, C., Adler, S., Alexopoulos, G. S., Anagnostou, E., Areces-Gonzalez, A., Astle, D. E., Auyeung, B., Ayub, M., Bae, J., Ball, G., Baron-Cohen, S., Beare, R., Bedford, S. A., Benegal, V., ... Alexander-Bloch, A. F. (2022). Brain charts for the human lifespan. *Nature*, 604(7906), 525–533. https://doi.org/10.1038/s41586-022-04554-y
- Bittner, N., Jockwitz, C., Franke, K., Gaser, C., Moebus, S., Bayen, U. J., Amunts, K., & Caspers, S. (2021). When your brain looks older than expected: combined lifestyle risk and BrainAGE. Brain structure & function, 226(3), 621–645. https://doi.org/10.1007/s00429-020-02184-6
- Brouwer, R. M., Schutte, J., Janssen, R., Boomsma, D. I., Hulshoff Pol, H. E., & Schnack, H. G. (2021). The speed of development of adolescent brain age depends on sex and is genetically determined. *Cerebral Cortex*, 31(2), 1296–1306. https://doi.org/10.1093/cercor/ bhaa296
- Chen, A., Beer, J., Tustison, N., Cook, P., Shinohara, R., & Shou, H. (2021). The Alzheimer's Disease Neuroimaging Initiative. Mitigating site effects in covariance for machine learning in neuroimaging data. *Human Brain Mapping*, 43, 1179–1195. https://doi.org/10.1002/hbm. 25688
- Cole, J. H. (2020). Multimodality neuroimaging brain-age in UK biobank: Relationship to biomedical, lifestyle, and cognitive factors. *Neurobiology of Aging*, 92, 34–42. https://doi.org/10.1016/j.neurobiolaging. 2020.03.014
- Cole, J. H., & Franke, K. (2017). Predicting age using neuroimaging: Innovative brain ageing biomarkers. *Trends in Neurosciences*, 40(12), 681– 690. https://doi.org/10.1016/j.tins.2017.10.001
- Cole, J. H., Ritchie, S. J., Bastin, M. E., Valdés Hernández, M. C., Muñoz Maniega, S., Royle, N., Corley, J., Pattie, A., Harris, S. E., Zhang, Q., Wray, N. R., Redmond, P., Marioni, R. E., Starr, J. M., Cox, S. R., Wardlaw, J. M., Sharp, D. J., & Deary, I. J. (2018). Brain age predicts mortality. Molecular psychiatry, 23(5), 1385–1392. https://doi.org/10. 1038/mp.2017.62
- Couvy-Duchesne, B., Faouzi, J., Martin, B., Thibeau-Sutre, E., Wild, A., Ansart, M., Durrleman, S., Dormont, D., Burgos, N., & Colliot, O. (2020). Ensemble learning of convolutional neural network, support vector machine, and best linear unbiased predictor for brain age prediction: ARAMIS contribution to the predictive analytics competition 2019 challenge. *Frontiers in Psychiatry*, 11, 593336. https://doi.org/10. 3389/fpsyt.2020.593336
- de Lange, A. G., & Cole, J. H. (2020). Commentary: Correction procedures in brain-age prediction. *Neuroimage: Clinical*, 26, 102229. https://doi. org/10.1016/j.nicl.2020.102229
- de Lange, A. G., Anatürk, M., Rokicki, J., Han, L. K. M., Franke, K., Alnaes, D., Ebmeier, K. P., Draganski, B., Kaufmann, T., Westlye, L. T., Hahn, T., & Cole, J. H. (2022). Mind the gap: Performance metric evaluation in brain-age prediction. *Human Brain Mapping*, 43(10), 3113– 3129. https://doi.org/10.1002/hbm.25837
- Desikan, R. S., Ségonne, F., Fischl, B., Quinn, B. T., Dickerson, B. C., Blacker, D., Buckner, R. L., Dale, A. M., Maguire, R. P., Hyman, B. T., Albert, M. S., & Killiany, R. J. (2006). An automated labeling system for subdividing the human cerebral cortex on MRI scans into gyral based regions of interest. *NeuroImage*, *31*(3), 968–980. https://doi.org/10. 1016/j.neuroimage.2006.01.021
- Dima, D., Modabbernia, A., Papachristou, E., Doucet, G. E., Agartz, I., Aghajani, M., Akudjedu, T. N., Albajes-Eizagirre, A., Alnaes, D., Alpert, K. I., Andersson, M., Andreasen, N. C., Andreassen, O. A., Asherson, P., Banaschewski, T., Bargallo, N., Baumeister, S., Baur-Streubel, R., Bertolino, A., ... Frangou, S. (2022). Karolinska Schizophrenia Project (KaSP). Subcortical volumes across the lifespan: Data from 18,605 healthy individuals aged 3-90 years. *Human Brain Mapping*, 43(1), 452–469. https://doi.org/10.1002/hbm.25320

- Elliott, M. L., Belsky, D. W., Knodt, A. R., Ireland, D., Melzer, T. R., Poulton, R., Ramrakha, S., Caspi, A., Moffitt, T. E., & Hariri, A. R. (2021). Brain-age in midlife is associated with accelerated biological aging and cognitive decline in a longitudinal birth cohort. *Molecular Psychiatry*, 26(8), 3829–3838. https://doi.org/10.1038/s41380-019-0626-7
- Fischl, B., Salat, D. H., Busa, E., Albert, M., Dieterich, M., Haselgrove, C., van der Kouwe, A., Killiany, R., Kennedy, D., Klaveness, S., Montillo, A., Makris, N., Rosen, B., & Dale, A. M. (2002). Whole brain segmentation: Automated labeling of neuroanatomical structures in the human brain. *Neuron*, 33(3), 341–355. https://doi.org/10.1016/s0896-6273(02) 00569-x
- Frangou, S., Modabbernia, A., Williams, S. C. R., Papachristou, E., Doucet, G. E., Agartz, I., Aghajani, M., Akudjedu, T. N., Albajes-Eizagirre, A., Alnaes, D., Alpert, K. I., Andersson, M., Andreasen, N. C., ... Dima, D. (2022). Cortical thickness across the lifespan: Data from 17,075 healthy individuals aged 3-90 years. *Human Brain Mapping*, 43(1), 431–451. https://doi.org/10.1002/hbm.25364
- Franke, K., & Gaser, C. (2019). Ten years of BrainAGE as a neuroimaging biomarker of brain aging: What insights have we gained? *Frontiers in Neurology*, 10, 789. https://doi.org/10.3389/fneur. 2019.00789
- Franke, K., Gaser, C., Manor, B., & Novak, V. (2013). Advanced BrainAGE in older adults with type 2 diabetes mellitus. *Frontiers in Aging Neuroscience*, 5, 90. https://doi.org/10.3389/fnagi.2013.00090
- Ge, R., Liu, X., Long, D., Frangou, S., & Vila-Rodriguez, F. (2021). Sex effects on cortical morphological networks in healthy young adults. *NeuroImage*, 233, 117945. https://doi.org/10.1016/j.neuroimage. 2021.117945
- Ge, R., Yu, Y., Qi, Y. X., Fan, Y. V., Chen, S., Gao, C., Haas, S. S., New, F., Boomsma, D. I., Brodaty, H., Brouwer, R. M., Buckner, R., Caseras, X., Crivello, F., Crone, E. A., Erk, S., Fisher, S. E., Franke, D. B., Glahn, D. C., ... Frangou, S. (2024). Normative modeling of brain morphometry across the lifespan using CentileBrain: Algorithm benchmarking and model optimization. *Lancet Digit Health*, *6*, E211–E221. https://doi.org/10.1016/S2589-7500(23)00250-9
- Goyal, M. S., Blazey, T. M., Su, Y., Couture, L. E., Durbin, T. J., Bateman, R. J., Benzinger, T. L., Morris, J. C., Raichle, M. E., & Vlassenko, A. G. (2019). Persistent metabolic youth in the aging female brain. Proceedings of the National Academy of Sciences of the United States of America, 116(8), 3251–3255. https://doi.org/10. 1073/pnas.1815917116
- Grinsztajn, L., Oyallon, E., & Varoquaux, G. (2022). Why do tree-based models still outperform deep learning on typical tabular data? In 36th conference on neural information processing systems (NeurIPS2022), track on datasets and benchmarks. NeurIPS.
- Han, L. K. M., Dinga, R., Hahn, T., Ching, C. R. K., Eyler, L. T., Aftanas, L., Aghajani, M., Aleman, A., Baune, B. T., Berger, K., Brak, I., Filho, G. B., Carballedo, A., Connolly, C. G., Couvy-Duchesne, B., Cullen, K. R., Dannlowski, U., Davey, C. G., Dima, D., ... Schmaal, L. (2021). Brain aging in major depressive disorder: Results from the ENIGMA major depressive disorder working group. *Molecular Psychiatry*, *26*(9), 5124– 5139. https://doi.org/10.1038/s41380-020-0754-0
- He, T., Kong, R., Holmes, A. J., Nguyen, M., Sabuncu, M. R., Eickhoff, S. B., Bzdok, D., Feng, J., & Yeo, B. T. T. (2020). Deep neural networks and kernel regression achieve comparable accuracies for functional connectivity prediction of behavior and demographics. *NeuroImage*, 206, 116276. https://doi.org/10.1016/j.neuroimage.2019.116276
- Hogstrom, L. J., Westlye, L. T., Walhovd, K. B., & Fjell, A. M. (2013). The structure of the cerebral cortex across adult life: Age-related patterns of surface area, thickness, and gyrification. *Cerebral Cortex*, 23(11), 2521–2530. https://doi.org/10.1093/cercor/bhs231
- Jiang, R., Woo, C. W., Qi, S., Wu, J., & Sui, J. (2022). Interpreting brain biomarkers: Challenges and solutions in interpreting machine

learning-based predictive neuroimaging. *IEEE Signal Processing Maga*zine, 39(4), 107-118. https://doi.org/10.1109/MSP.2022.3155951

- Kim, W., Heo, D., Maeng, J., Shen, J., Tsogt, U., Odkhuu, S., Zhang, X., Cheraghi, S., Kim, S., Ham, B., Rami, F. Z., Sui, J., Kang, C. Y., Suk, H., & Chung, Y. (2023). Deep learning-based brain age prediction in patients with schizophrenia spectrum disorders. *Schizophrenia Bulletin*, 2023, sbad167.
- Liang, H., Zhang, F., & Niu, X. (2019). Investigating systematic bias in brain age estimation with application to post-traumatic stress disorders. *Human Brain Mapping*, 40(11), 3143–3152. https://doi.org/10.1002/ hbm.24588
- Liu, S., Seidlitz, J., Blumenthal, J. D., Clasen, L. S., & Raznahan, A. (2020). Integrative structural, functional, and transcriptomic analyses of sex-biased brain organization in humans. *Proceedings of the National Academy of Sciences of the United States of America*, 117(31), 18788–18798. https://doi.org/10.1073/pnas. 1919091117
- Lombardi, A., Amoroso, N., Diacono, D., Monaco, A., Tangaro, S., & Bellotti, R. (2020). Extensive evaluation of morphological statistical harmonization for brain age prediction. *Brain Sciences*, 10(6), 364. https://doi.org/10.3390/brainsci10060364
- Luna, A., Bernanke, J., Kim, K., Aw, N., Dworkin, J. D., Cha, J., & Posner, J. (2021). Maturity of gray matter structures and white matter connectomes, and their relationship with psychiatric symptoms in youth. *Human Brain Mapping*, 42(14), 4568–4579. https://doi.org/10.1002/ hbm.25565
- Lund, M. J., Alnæs, D., de Lange, A. G., Andreassen, O. A., Westlye, L. T., & Kaufmann, T. (2022). Brain age prediction using fMRI network coupling in youths and associations with psychiatric symptoms. *Neuroimage: Clinical*, 33, 102921.
- Modabbernia, A., Whalley, H. C., Glahn, D. C., Thompson, P. M., Kahn, R. S., & Frangou, S. (2022). Systematic evaluation of machine learning algorithms for neuroanatomically-based age prediction in youth. *Human Brain Mapping*, 43(17), 5126–5140. https://doi.org/10. 1002/hbm.26010
- More, S., Antonopoulos, G., Hoffstaedter, F., Caspers, J., Eickhoff, S. B., & Patil, K. R. (2023). Alzheimer's Disease Neuroimaging Initiative. Brainage prediction: A systematic comparison of machine learning workflows. *NeuroImage*, 270, 119947. https://doi.org/10.1016/j. neuroimage.2023.119947
- Moyer, D., Ver Steeg, G., Tax, C. M. W., & Thompson, P. M. (2020). Scanner invariant representations for diffusion MRI harmonization. Magnetic Resonance in Medicine, 84, 2174–2189. https://doi.org/10.1002/ mrm.28243
- Niu, X., Zhang, F., Kounios, J., & Liang, H. (2020). Improved prediction of brain age using multimodal neuroimaging data. *Human Brain Mapping*, 41(6), 1626–1643. https://doi.org/10.1002/hbm.24899
- Pomponio, R., Erus, G., Habes, M., Doshi, J., Srinivasan, D., Mamourian, E., Bashyam, V., Nasrallah, I. M., Satterthwaite, T. D., Fan, Y., Launer, L. J., Masters, C. L., Maruff, P., Zhuo, C., Völzke, H., Johnson, S. C., Fripp, J., Koutsouleris, N., Wolf, D. H., ... Davatzikos, C. (2020). Harmonization of large MRI datasets for the analysis of brain imaging patterns throughout the lifespan. *NeuroImage*, 208, 116450. https://doi.org/10. 1016/j.neuroimage.2019.116450
- Rokicki, J., Wolfers, T., Nordhøy, W., Tesli, N., Quintana, D. S., Alnaes, D., Richard, G., de Lange, A. G., Lund, M. J., Norbom, L., Agartz, I., Melle, I., Naerland, T., Selbaek, G., Persson, K., Nordvik, J. E., Schwarz, E., Andreassen, O. A., Kaufmann, T., & Westlye, L. T. (2021). Multimodal imaging improves brain age prediction and reveals distinct abnormalities in patients with psychiatric and neurological disorders. *Human Brain Mapping*, 42(6), 1714–1726. https://doi.org/10.1002/hbm. 25323
- Schulz, M. A., Yeo, B. T. T., Vogelstein, J. T., Mourao-Miranada, J., Kather, J. N., Kording, K., Richards, B., & Bzdok, D. (2020). Different

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scaling of linear models and deep learning in UKBiobank brain images versus machine-learning datasets. *Nature Communications*, 11(1), 4238. https://doi.org/10.1038/s41467-020-18037-z

- Schölkopf, B., & Smola, A. J. (2002). Learning with kernels: Support vector machines, regularization, optimization, and beyond. MIT Press.
- Sone, D., Beheshti, I., Shinagawa, S., Niimura, H., Kobayashi, N., Kida, H., Shikimoto, R., Noda, Y., Nakajima, S., Bun, S., Mimura, M., & Shigeta, M. (2022). Neuroimaging-derived brain age is associated with life satisfaction in cognitively unimpaired elderly: A community-based study. Translational psychiatry, 12(1), 25. https://doi.org/10.1038/s41398-022-01793-5
- Tanveer, M., Ganaie, M., Behashti, I., Goel, T., Ahmad, N., Lai, K., Huang, K., Zhang, Y., Del Ser, J., & Lin, C. (2023). Deep learning for brain age estimation: A systematic review. *Information Fusion*, 96, 130–142. https://doi.org/10.1016/j.inffus.2023.03.007
- Valizadeh, S. A., Hänggi, J., Mérillat, S., & Jäncke, L. (2017). Age prediction on the basis of brain anatomical measures. *Human Brain Mapping*, 38(2), 997–1008. https://doi.org/10.1002/hbm.23434
- Wang, Y., Chen, X., & Yan, C. (2023). Comprehensive evaluation of harmonization on functional brain imaging for multisite data-fusion. *Neuro-Image*, 274, 120089. https://doi.org/10.1016/j.neuroimage.2023. 120089
- Wood, D. A., Kafiabadi, S., Busaidi, A., Guilhem, E., Montvila, A., Lynch, J., Townend, M., Agarwal, S., Mazumder, A., Barker, G. J., Ourselin, S., Cole, J., & Booth, T. C. (2022). Accurate brain-age models for routine clinical MRI examinations. *NeuroImage*, 249, 118871. https://doi.org/ 10.1016/j.neuroimage.2022.118871
- Zhou, Z., Li, H., Srinivasan, D., Abdulkadir, A., Nasrallah, I. M., Wen, J., Doshi, J., Erus, G., Mamourian, E., Bryan, N. R., Wolk, D. A., Beason-Held, L., Resnick, S. M., Satterthwaite, T. D., Davatzikos, C., Shou, H., Fan, Y., & ISTAGING Consortium. (2023). Multiscale functional connectivity patterns of the aging brain learned from harmonized rsfMRI data of the multi-cohort iSTAGING study. *NeuroImage*, 269, 119911. https://doi.org/10.1016/j.neuroImage.2023.119911

SUPPORTING INFORMATION

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