

Decentralized multi-site VBM analysis during adolescence shows structural changes linked to age, body mass index, and smoking: A COINSTAC analysis

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Abstract

In the recent past, there has been an upward trend in developing frameworks that enable neuroimaging researchers to address challenging questions by leveraging data across multiple sites all over the world. One such framework, Collaborative Informatics and Neuroimaging Suite Toolkit for Anonymous Computation (COINSTAC), provides a platform to analyze neuroimaging data stored locally across multiple organizations without the need for pooling the data at any point during the analysis. In this paper, we perform a decentralized voxel-based morphometry analysis of structural magnetic resonance imaging data across two different sites to understand the structural changes in the brain as linked to age, body mass index and smoking. Results produced by the decentralized analysis are contrasted with similar findings in literature. This work showcases the potential benefits of performing multi-voxel and multivariate analyses of large-scale neuroimaging data located at multiple sites.

1 Introduction

Collecting neuroimaging data is expensive as well as time consuming [Landis et al., 2016]. Other significant challenges include the storage and computational resources needed which could prove costly as the volume of the data collected goes up. On the contrary, aggregating information from data across various sites not only makes the predictions more certain by increasing the sample size [Button et al., 2013], but also ensures reliability and validity of the results, and safeguards against data fabrication and falsification [Tenopir et al., 2011, Ming et al., 2017]. In the past few years, there has been a proliferation of efforts [Poldrack et al., 2013] towards enabling researchers to leverage data across multiple sites.

26 Plis et al. [Plis et al., 2016], proposed a web-based framework titled Collaborative Informatics
27 and Neuroimaging Suite Toolkit for Anonymous Computation (COINSTAC) to such collaborative
28 analysis of data from different sites. COINSTAC implements a privacy-preserving message passing
29 infrastructure that allows large scale analysis of decentralized data. The results thus obtained are
30 on par with those that would have been obtained if the data were in one place. Since, there is no
31 pooling of data it also preserves the privacy of individual datasets.

32 One such decentralized analysis method available in the COINSTAC framework is voxel-based
33 morphometry [Ashburner and Friston, 2000] which was already discussed in [Gazula et al., 2018]
34 by conceptualizing some variants of the decentralized regression and validating on some publicly
35 available dataset. In this paper, we showcase the power of COINSTAC framework by conducting
36 a real-world decentralized VBM analysis of MRI data at two different sites to study structural
37 changes in adolescent brain as linked to age, body mass index (BMI), and smoking.

38 Smoking is a major public health concern and an economic burden. It is well known that most
39 adult smokers take up smoking during their adolescent years [Lydon et al., 2014]. However, very
40 little is understood about the brain mechanisms that influence smoking behavior. It is important to
41 understand the effects of smoking on cortical thickness or volume. Understanding the complex neu-
42 ral processes underlying smoking and smoking-induced neural change could be critical to designing
43 interventions to discourage such smoking behavior in adolescents [Ewing et al., 2016].

44 On the other hand, neuroimaging is becoming increasingly common in obesity research as
45 investigators try to understand the neurological underpinnings of appetite and body weight in
46 humans [Carnell et al., 2012]. This because a higher body mass index (BMI) is associated with
47 structural brain changes, cognitive decline, and an increased risk of Alzheimer disease (AD) in late
48 life [Cronk et al., 2010]. However, there is reason to suspect that the relationship between excess
49 weight and structural brain differences is not limited to older adults [Gunstad et al., 2008].

50 Our contributions in this paper can thus be summarized as follows.

- 51 1. Showcasing decentralized voxel based morphometry on large datasets across multiple sites,
52 IMAGEN from UK and cVEDA from India (more on this later), in the COINSTAC framework
53 and some observations.
- 54 2. An understanding of the effects of smoking and body mass index on the structural changes
55 in the brain with age via decentralized voxel-based morphometry.

56 The outline of the current paper is as follows: In section 2, we discuss the decentralized regression
57 algorithm which forms the bedrock for the decentralized voxel based morphometry analysis followed
58 by an overview of the COINSTAC framework. In section 3, we discuss the IMAGEN and cVEDA
59 data used in this study. In sections 4 and 5, we present the results and discuss our whole experience
60 with using the COINSTAC framework as well as what we found analyzing the results. We conclude
61 with some final comments in section 6.

62 2 Methods

63 2.1 Decentralized VBM (i.e. voxelwise decentralized regression)

64 Voxel-based morphometry (VBM) [Ashburner and Friston, 2000] is a statistical method that fa-
65 cilitates a comprehensive comparison, via generalized linear modeling, of voxel-wise gray matter
66 concentration between different groups, for example. To enable such statistical assessment on data
67 present at various sites, it is important to develop decentralized tools.

68 The goal of decentralized regression (the building block of decentralized VBM) is to fit a linear
69 equation (given by equation 1) relating the covariates at S different sites to the corresponding
70 responses. Assume each site j has data set $\mathcal{D}_j = \{(\mathbf{x}_i, y_i) : i \in \{1, 2, \dots, s_j\}\}$ where $\mathbf{x}_{i,j} \in R^d$ is a
71 d -dimensional vector of real-values features, and $y_j \in \mathbb{R}$ is a response. We consider fitting the model
72 in equation 2 where \mathbf{w} is given as $[\mathbf{w}; b]$ and \mathbf{x} as $[\mathbf{x}; 1]$

$$y \approx \mathbf{w}^\top \mathbf{x} + b \quad (1)$$

$$\mathbf{y} \approx \mathbf{w}^\top \mathbf{x} \quad (2)$$

73 The vector of regression parameters/weights \mathbf{w} is found by minimizing the sum of the squared
74 error given in equation 3

$$F(\mathbf{w}) = \sum_{j=1}^S \sum_{i=1}^{s_j} (y_i - \mathbf{w}^\top \mathbf{x}_{i,j})^2 \quad (3)$$

75 The regression objective function is a linearly separable function, that can be written as sum
76 of a local objective function calculated at each local site as follows:

$$F(\mathbf{w}) = \sum_{j=1}^S F_j(\mathbf{w}) \quad (4)$$

77 where

$$F_j(\mathbf{w}) = \sum_{i=1}^{s_j} (y_i - \mathbf{w}^\top \mathbf{x}_{i,j}) \quad (5)$$

78 A central aggregator (*AGG*) computes the global minimizer $\hat{\mathbf{w}}$ of $F(\mathbf{w})$.

79 2.1.1 Decentralized Regression with Normal Equation

80 For a standard regression problem of the form given in equation 2, the analytical solution is given
81 as

$$\hat{\mathbf{w}} = (\mathbf{x}^\top \mathbf{x})^{-1} \mathbf{x}^\top \mathbf{y} \quad (6)$$

82 Assuming that the augmented data matrix \mathbf{x} is made up of data from different local sites, i.e.

$$\mathbf{x} = \begin{bmatrix} \mathbf{x}_1 \\ \vdots \\ \mathbf{x}_S \end{bmatrix} \quad (7)$$

83 it's easy to see that $\hat{\mathbf{w}}$ can be written as

$$\hat{\mathbf{w}} = \left(\begin{bmatrix} \mathbf{x}_1^\top & \cdots & \mathbf{x}_S^\top \end{bmatrix} \begin{bmatrix} \mathbf{x}_1 \\ \vdots \\ \mathbf{x}_S \end{bmatrix} \right)^{-1} \times \begin{bmatrix} \mathbf{x}_1^\top & \cdots & \mathbf{x}_S^\top \end{bmatrix} \begin{bmatrix} \mathbf{y}_1 \\ \vdots \\ \mathbf{y}_s \end{bmatrix} \quad (8)$$

$$\hat{\mathbf{w}} = \left(\sum_{j=1}^S \mathbf{x}_j^\top \mathbf{x}_j \right)^{-1} \times \left(\sum_{j=1}^S \mathbf{x}_j^\top \mathbf{y}_j \right) \quad (9)$$

84 The above variant of the analytical solution to a regression model shows that even if the data
85 resides in different locations, fitting a global model in the presence of site covariates delivers results
86 that are exactly similar to the pooled case.

Algorithm 1 Decentralized Regression with Normal Equation

Require: Data \mathcal{D}_j at site j for sites $j = 1, 2, \dots, S$, where $|\mathcal{D}_j| = s_j \forall j$

- 1: **for** $j = 1$ to S **do**
- 2: Compute $Cov(X_j) = \mathbf{x}_j^\top \mathbf{x}_j$
- 3: Compute $\mathbf{x}_j^\top \mathbf{y}_j$
- 4: Node j sends $Cov(X_j)$ and $\mathbf{x}_j^\top \mathbf{y}_j$ to AGG.
- 5: **end for**
- 6: AGG computes

$$\hat{\mathbf{w}} \leftarrow \left(\sum_{j=1}^S Cov(X_j) \right)^{-1} \left(\sum_{j=1}^S \mathbf{x}_j^\top \mathbf{y}_j \right) \text{ and return } \hat{\mathbf{w}}$$

87 **2.1.2 Other Statistics**

88 In addition to generating the weights of the covariates (regression parameters), one would also be
89 interested in determining the overall model performance given by goodness-of-fit or the coefficient
90 of determination (R^2) as well as the statistical significance of each weight parameter (t -value or
91 p -value).

92 Determining R^2 entails calculating the sum-square-of-errors (SSE) as well as total sum of
93 squares (SST) which are evaluated at each local site and then aggregated at the global site to
94 evaluate R^2 given by $1 - SSE/SST$. An intermediary step before the calculation of SST is the

95 calculation of the global \bar{y} which is determined by taking a weighted average of the local \bar{y}_j weighted
96 on the size of data at each local site.

97 The steps involved in calculating the t -values (and therefore p -values) of each regression param-
98 eter are explained in [Gazula et al., 2018, Ming et al., 2017]. The global weight vector (\hat{w}) is sent
99 to each of the local sites where the local covariance matrix as well as the sum-square-of-errors is
100 calculated and sent back along with the data size to the aggregator (*AGG*) which then utilizes that
101 information to calculate the t -values for each parameter (or coefficient). Once, the t -values have
102 been calculated, the corresponding two-tailed p -values can be deduced using any publicly available
103 *distributions* library.

104 2.2 COINSTAC

105 2.2.1 Description

106 COINSTAC is an easy-to-install, standalone application with a user-friendly, simple, and intu-
107 itive interface. It is open source and freely available for download from [https://github.com/](https://github.com/trendscenter/coinstac)
108 [trendscenter/coinstac](https://github.com/trendscenter/coinstac). It is compatible with Windows, macOS, and Linux operating systems.
109 The software utilizes docker containers (<https://www.docker.com/>) to run computations. Exam-
110 ple of some computations currently available in COINSTAC are independent vector analysis (IVA)
111 [Wojtalewicz et al., 2017], neural networks [Lewis et al., 2020, Lewis et al., 2017], decentralized
112 stochastic neighbor embedding (dSNE) [Saha et al., 2017], joint independent component analy-
113 sis (ICA) [Baker et al., 2015], and two-level differentially private support vector machine (SVM)
114 classification [Sarwate et al., 2014].

115 2.2.2 Implementation

116 The first step to collaborating a decentralized analysis on the COINSTAC platform is creating an
117 account (Figure 1) followed by creating a consortium. A consortium is a group of users who run
118 a decentralized analysis together. Each member/site who's contributing data for a study create a
119 login and all such members constitute a consortium. There's one consortium owner who creates
120 the computation. Figure 2 shows an example of the COINSTAC consortium page where there is
121 a card for each consortium containing its name, description, active pipeline, list of owner(s) and
122 members, a button to view details about the consortium, and a button to join the consortium.

123 After a consortium has been created, the owner will be redirected to a Pipeline Creation page
124 where he/she can define the model that will be used in the decentralized analysis. The consortium
125 owner can choose the type of analysis (the computation) and then specify what variables are in the
126 model (Figure 3).

127 Now that you the owner has created a pipeline, all members join the consortium and map their
128 data to the variables in the model created earlier. At this point users will be taken to a Maps Page
129 where they will be asked to point to the data to used for the analysis. When all the members are
130 done mapping their data to the pipeline, the consortium owner is ready to start the computation.

131 **3 Data**

132 **3.1 IMAGEN**

133 The IMAGEN project is a longitudinal study of adolescent brain development and mental health in
134 Europe [Schumann et al., 2010]. Participants were recruited from eight study sites in England, Ire-
135 land, France and Germany. Each study site obtained ethical approval from the local research ethics
136 committee. Written assent and consent were acquired from all the participants and the parents
137 prior to participation. In this research, we used structural neuroimaging, BMI and questionnaire
138 data acquired at age 14.

139 **3.1.1 Measure of Smoking**

140 Measures of smoking were obtained from self-reports in the Fagerstrom Test for Nicotine Depen-
141 dence (FTND) questionnaire [Heatherton et al., 1991]. The answer to the question regarding
142 lifetime smoking experience was used create a binary variable, indicating whether the participant
143 had ever smoked (labelled as 1) or not (labelled as 0).

144 **3.1.2 Structural Magnetic Resonance Imaging**

145 High-resolution T1-weighted structural images were acquired using 3T MRI scanners (Siemens,
146 Philips and General Electric) across all IMAGEN study sites. An MRI sequence based on the
147 ADNI protocols (<http://adni.loni.usc.edu/methods/documents/mri-protocols/>) was used.
148 Visual inspection was performed to exclude low-quality images (movement artefacts, brace artefacts
149 and field inhomogeneities, etc.). Grey matter volumes (GMVs) were obtained from voxel-based
150 morphometry (VBM) analysis, by using the VBM8 toolbox (<http://www.neuro.uni-jena.de/vbm/>).
151 For the VBM analysis, structural images were first segmented into grey matter, white
152 matter and cerebrospinal fluid. The DARTEL toolbox [Ashburner, 2007] was used to convert the
153 images to the Montreal Neurological Institute (MNI) standard space. The grey matter volumes
154 were modulated by the Jacobian determinant obtained from the previous step, and then smoothed
155 with an 8mm-FWHM (full width at half maximum) Gaussian kernel.

156 **3.2 cVEDA**

157 The Consortium on Vulnerability to Externalising Disorders and Addiction (cVEDA) is a multi-site,
158 collaborative, cohort study in India with an accelerated-longitudinal design and planned missing-
159 ness approach that covers an age-span of 5-24 years 1. The cohort was setup to examine neurobe-
160 havioural developmental trajectories and vulnerability to psychopathology, with a specific focus
161 on externalising spectrum disorders. The cVEDA MRI sample comes from 6 sites with 3T MRI
162 scanners. The T1w imaging protocol was adapted from the ADNI consortium (ADNI-2/ADNI-GO)
163 [Beckett et al., 2015], while ensuring comparability to the European IMAGEN consortium. Partic-
164 ipants from 3 sites (NIMHANS, SJRI, and RVRHC) scanned at the Bengaluru site at NIMHANS

165 using two MRI scanners (Siemens Skyra and Philips Ingenia). The remaining 3 MRI sites were
166 at Chandigarh (Siemens Verio), Mysore (Philips Ingenia) and Kolkata (Siemens Verio). In this
167 research, we used baseline T1w structural MRI scans from 1057 participants. Refer to Table 1 for
168 sample characteristics and Table 2 for Acquisition Parameters. Each study site obtained ethical
169 approval from the local research ethics committee. Written assent and consent were acquired from
170 all the participants and the parents prior to participation.

171 3.2.1 Data Preprocessing

172 Visual inspection was performed to exclude low-quality images (movement artefacts, brace arte-
173 facts and field inhomogeneities, etc.). AFNI’s “fat_proc_axialize_anat” function was used for AC-PC
174 alignment. The datasets were resampled (using a high-order sinc function to minimize smoothing)
175 to a 1mm isotropic voxel size. Briefly, all AC-PC aligned 3D T1-weighted MRI scans were normal-
176 ized using a linear affine followed by non-linear registration and corrected for bias field in homo-
177 geneities, and then segmented into GM, WM, and CSF components. We used the Diffeomorphic
178 Anatomic Registration Through Exponentiated Lie algebra algorithm (DARTEL) to normalize the
179 segmented scans into a standard MNI space. The segmentations were then modulated by scaling
180 with the amount of volume changes due to spatial registration to preserve tissue volume. Finally,
181 the modulated grey matter segmentation was smoothed at 8mm**3 FWHM Gaussian kernel 2.

182 Measures of smoking were obtained from WHO’s Alcohol, Smoking and Substance Involvement
183 Screening Test (ASSIST) questionnaire that provides specific substance involvement score indicat-
184 ing the risk levels. A binary variable for Lifetime Smoking was created with tobacco involvement
185 score of ≥ 3 labelled as 1 (Present) and a score < 3 was labelled as 0 (Absent).

186 4 Results

187 The use of a decentralized analytic framework like COINSTAC has many advantages. The final
188 results are comparable to its pooled counterpart (where all the data is at one place) guaranteeing
189 a virtual pooled analysis effect by a chain of computation and communication process. Other
190 advantages include data privacy and support for large data

191 Once the two consortium members (IMAGEN and cVEDA) opened the COINSTAC applica-
192 tion on their respective machines, joined the computation consortium and mapped the data, the
193 consortium owner proceeds with starting the computation and it roughly took 30-45 minutes of
194 computation time to finish the whole decentralized analysis and for the results to be displayed on
195 the output screen as well as be downloaded for further processing. As noted earlier, a decentralized
196 VBM was performed to understand the brain structural changes linked to BMI and smoking. Two
197 separate models were run for the purpose of this analysis viz., age + BMI and age + smoking.
198 Gender and site covariates were also included in both the models.

199 We will provide a quick summary of the results here and will discuss them further in the
200 following section. Please note that all the maps have been thresholded with a 0.05 FDR correction

201 [Benjamini and Hochberg, 1995]. A decentralized VBM of the structural MRI data for the effects
202 of smoking indicates that non-smokers have higher gray matter concentration in the right anterior
203 cingulate cortex, bilateral thalamus and brainstem, as well as the left dorsal prefrontal cortex in
204 addition to an increase in precuneus (see Figure 4). On the other hand, for a model with BMI,
205 Figure 5, we see increases in bilateral putamen, bilateral hypothalamus as well as lateral and medial
206 temporal lobes on both sides. Although the age covariate was included in both the models, the
207 effects of age for both smoking and BMI look similar and hence we report the results from only
208 one model. From Figure 6, for age, we see widespread decreases in gray matter (weighted more
209 towards frontal) with bilateral increases in hippocampus.

210 5 Discussion

211 The goal of this paper was two-fold: to demonstrate the feasibility of COINSTAC for performing
212 decentralized analysis on a large data present across multiple sites and to use this experiment to
213 understand the influence of smoking and BMI on brain structural changes. With that, we surmise
214 this was a useful exercise working with real users of the COINSTAC application and we believe
215 the success of this exercise culminating with this writing will spawn more fruitful collaborations
216 going forward. Overall, in the words of the users (IMAGEN and cVEDA), the ability to examine
217 the voxel-wise effects as against the traditional ROI-wise summary effects across multiple sites
218 with data-privacy issues handled and with efficient decentralized computations is what they found
219 unique and an exciting prospect for further collaborations. From a development standpoint, it
220 was a great experience for the developers of the COINSTAC application as it gave them a unique
221 insight into how the research conversations happen and would serve them well in easing out the
222 user experience associated with the use of COINSTAC.

223 We reckon that the results in this study were consistent with existing findings from literature.
224 In addition, they extend some findings which we will discuss here under. We noted earlier that
225 non-smokers have higher gray matter concentration in the right anterior cingulate cortex, bilateral
226 thalamus and brainstem, as well as the left dorsal prefrontal cortex in addition to an increase in
227 precuneus. From literature, orbitofrontal cortex and smoking association is fairly understandable
228 with links to impulsivity/decision making and supported by literature. However, the causal rela-
229 tionship is yet debatable. Olfactory cortex involvement is slightly novel given the large N in this
230 study, but has been linked to smoking previously [Schriever et al., 2013].

231 While studying the influence of BMI, we reported seeing increases in bilateral putamen, bilateral
232 hypothalamus as well as lateral and medial temporal lobes on both sides. This is an intriguing
233 finding indicating there could be a non-linear effect. In one previous study, BMI correlated with
234 brain activity in the left putamen, amygdala and insula in an inverted U-shaped manner [Dietrich
235 et al., 2016]. The hypothalamic link to BMI is interesting as well, as the hypothalamic centers have
236 a role in regulating food intake. However the reported literature points towards an atrophy rather
237 than an increase with BMI [Kurth et al., 2013]. They report a negative correlation with BMI and

238 waist circumference. However, the BMI range in their work was 18.18 to 42.37, thereby making
239 it unlikely that had a problem with non-linearity of effects as they did not have low BMI group
240 (< 18.5). We surmise that this effect maybe specific for adolescents, where hypothalamic volume
241 increases with BMI and then starts reducing with chronic obesity in adulthood.

242 We also reported that there's a widespread decrease in gray matter (weighted more towards
243 frontal) with bilateral increases in hippocampus. Gray matter volume reduction in adolescence is
244 fairly straightforward and is linked to maturation (cortical thinning/synaptic pruning/increase in
245 underlying WM etc). However, the DMN localization of VBM-related grey matter reduction in
246 adolescence is a fascinating insight. Maturation of the association cortices continues well into the
247 adolescence. DMN mainly involves regions of the association cortex, and evolutionarily speaking,
248 these regions are placed at an increased spatial distance from sensory-motor areas, the latter ma-
249 turing much earlier. The "tethering hypothesis" [Buckner et al., 2013] suggests this aspect of DMN
250 allows cognition to become more decoupled from sensory(perception)-motor(action) cycles. The
251 hippocampal volume increase looks clear and it reaches a plateau only by mid adulthood.

252 **6 Conclusion**

253 In this paper, we showcased the power of COINSTAC in enabling neuroimaging researcher to answer
254 important research questions by performing a multi-site study without having to pool the data.
255 Decentralized voxel-based morphometric analysis of structural magnetic resonance imaging data
256 from two different sites in UK and INDIA revealed some interesting insights into the gray matter
257 concentrations in adolescent brains as a function of age, body mass index and smoking. Other
258 advantages of such a decentralized platform include data privacy and support for large data. In
259 conclusion, the results presented here strongly encourage the use of decentralized algorithms in large
260 neuroimaging studies over systems that are optimized for large-scale centralized data processing.

261 **7 Conflict of interest**

262 The authors declare no conflict of interest.

263 **8 Acknowledgments**

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267 **9 Author Contributions**

268 HG implemented the decentralized regression algorithms on structural MRI data and the manuscript
269 writing. BH, and ZZ contributed data to the study as well as contributed to some parts of the

270 writing. EV contributed to performing the analysis and organizing the results. RK developed
271 the software for the COINSTAC platform. GS is a co-investigator and has been instrumental in
272 facilitating this multi-site study. VC led the team and formed the vision and also helped interpret
273 the results.

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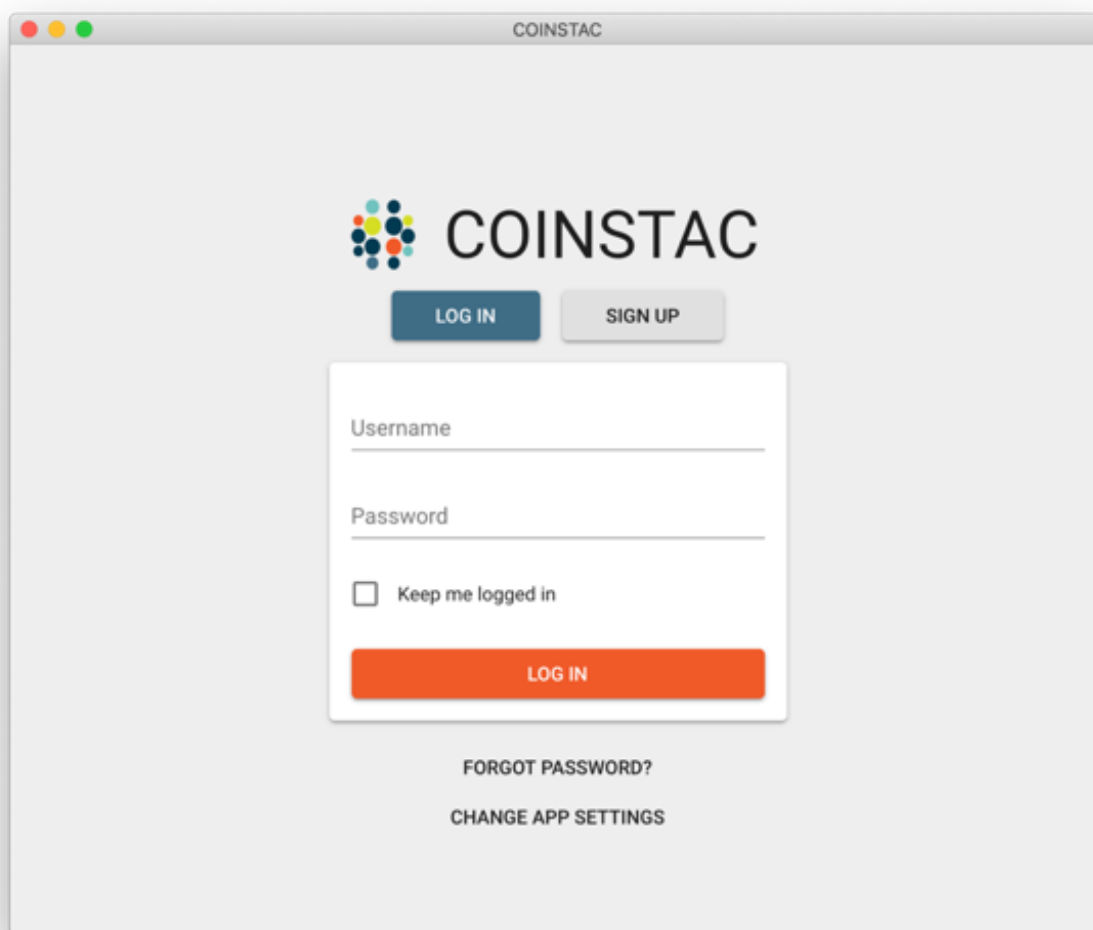


Figure 1: COINSTAC application login/home page

Table 1: Simple Statistics from cVEDA data

Variable	Mean (SD), [Range]
Age	15.27 (4.29), [5 - 24]
Gender (M/F)	582/439
Lifetime Smoking	72 (7%)
BMI	19.43 (4.5), [10.55 - 43.73]
TICV	1350.4 (130.5), [1084.5 - 1826.5]

Table 2: Scanner parameters from cVEDA data

Acq Seq	Site	Scanner Model	dx (mm)	dy (mm)	dz (mm)	TR (ms)	TE (ms)	FA*	Matrix Size (mm)	Sag Slices
A	Mysuru	Ingena	1.2	1	1	6.9	3.2	9	256×256	170
B	Bengaluru	Ingenia	1.0	1	1	6.5	2.9	9	256×256	211
C	Bengaluru	Skyra	1.2	1	1	2300	3	9	256×240	176
D	Kolkata	Trio	1.2	1	1	2300	3	9	256×240	176
E	Chandigarh	Verio	1.2	0.5	0.5	2300	3	9	512×240	176

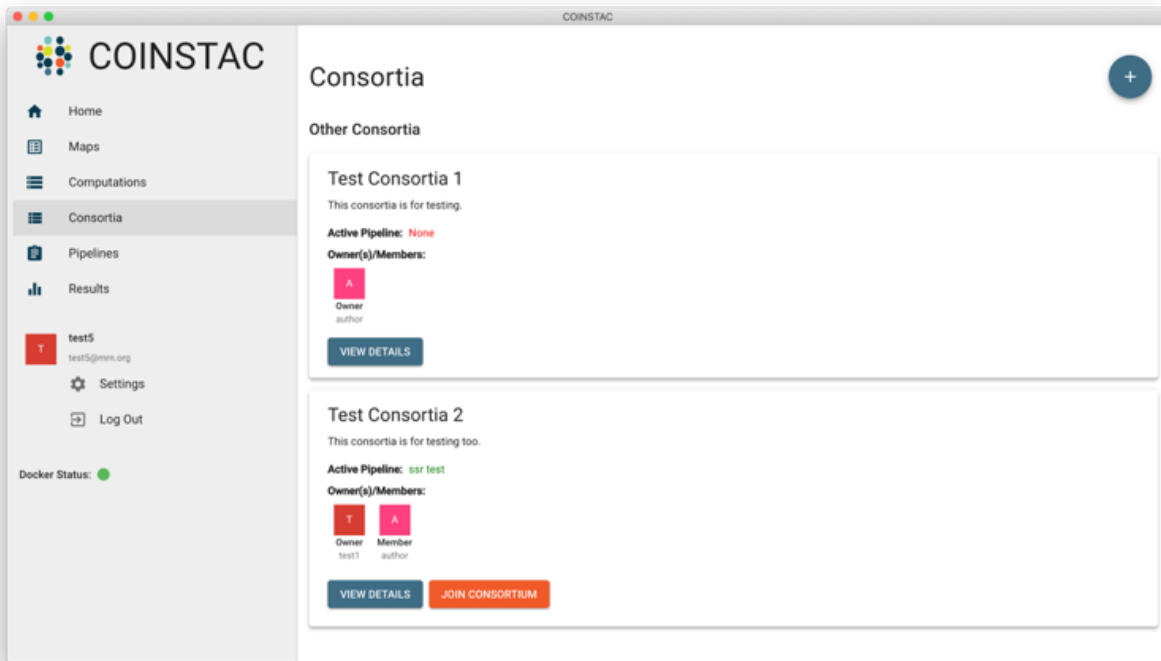


Figure 2: COINSTAC application Consortia page

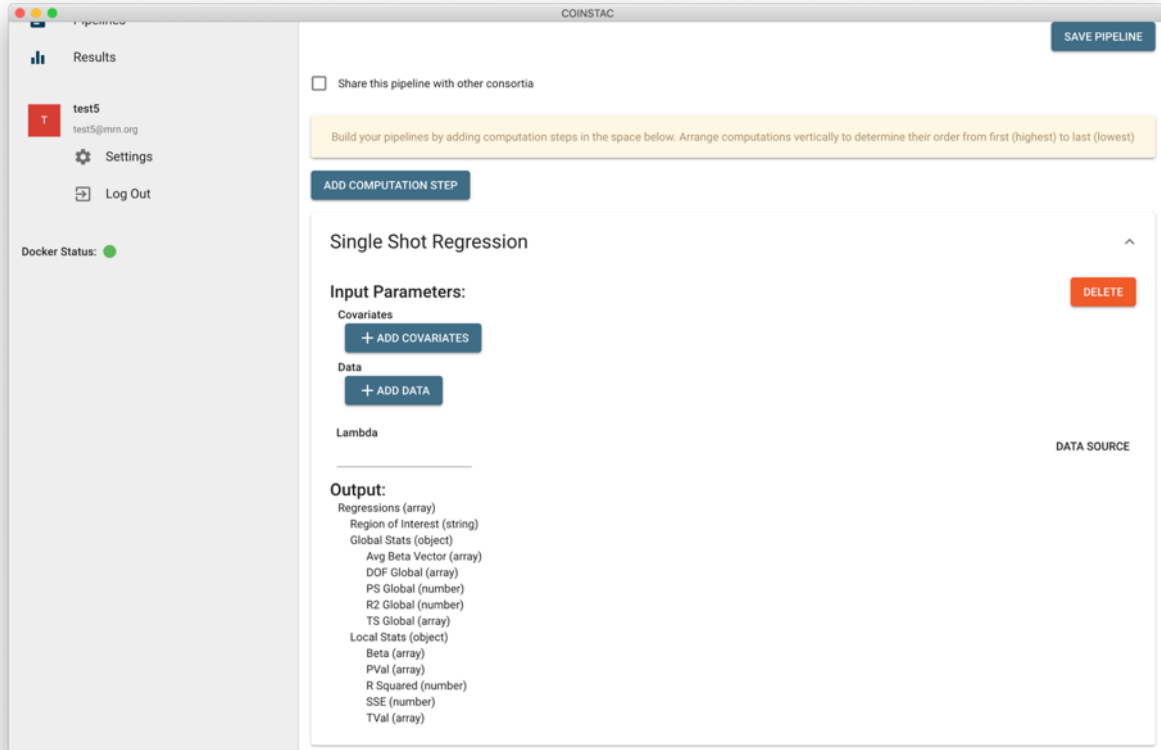


Figure 3: COINSTAC application Pipeline page

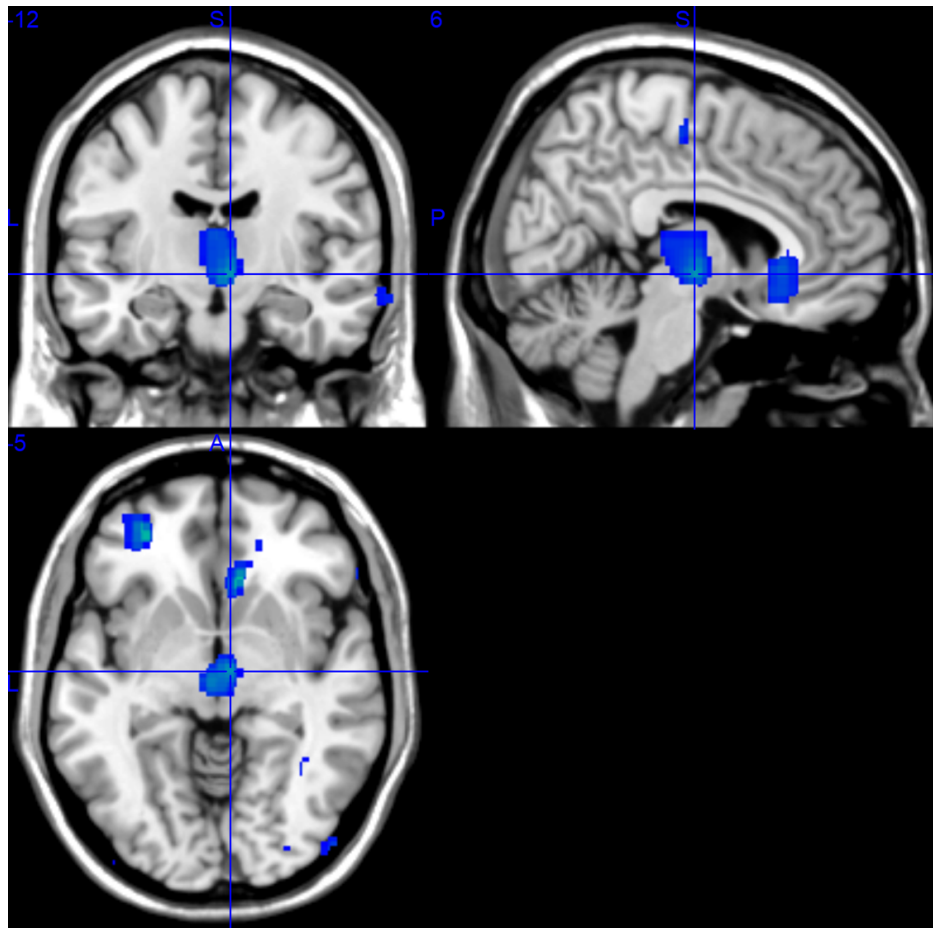


Figure 4: Rendered images of voxel-wise significance values ($-\log_{10}p\text{-value} \times \text{sign}(t)$) for the covariate 'Smoking'.

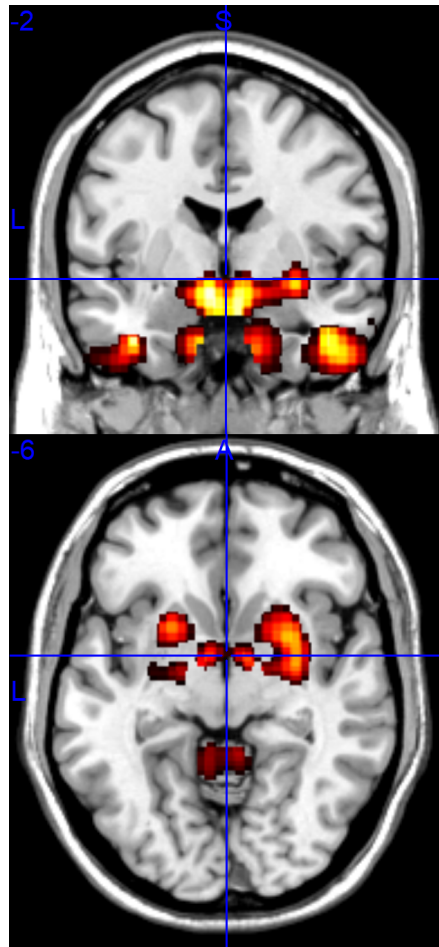


Figure 5: Rendered images of voxel-wise significance values ($-\log_{10}p\text{-value} \times \text{sign}(t)$) for the covariate 'BMI'.

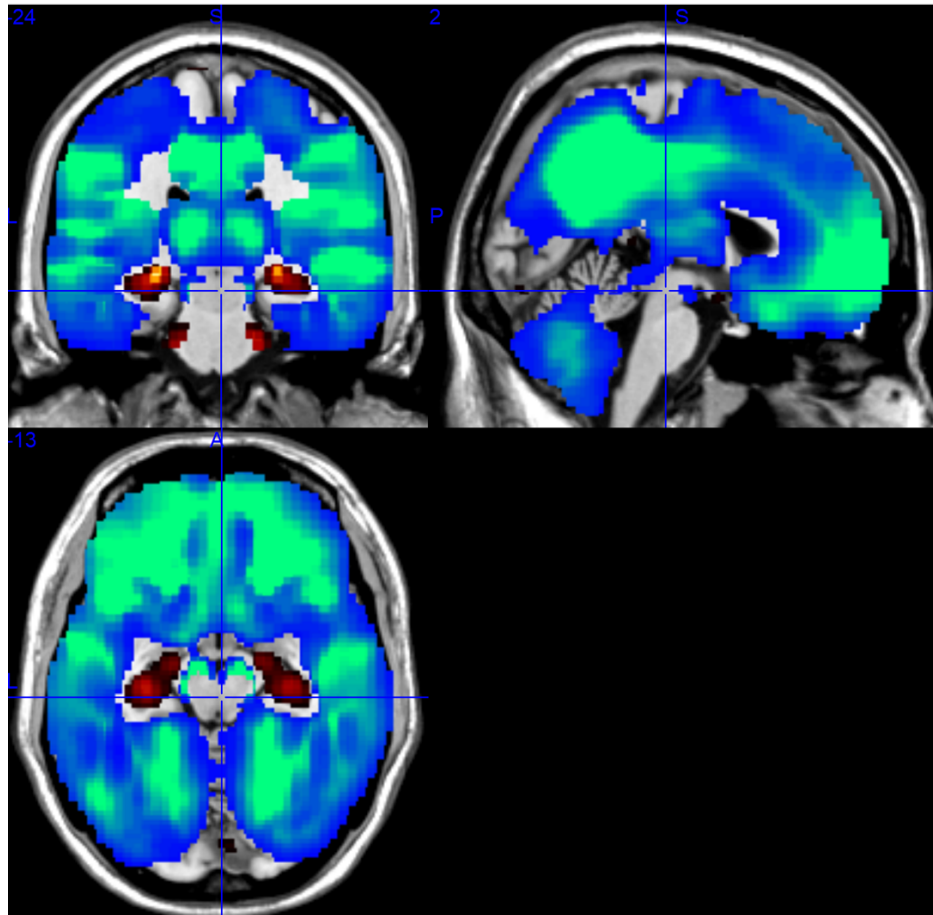


Figure 6: Rendered images of voxel-wise significance values ($-\log_{10}p\text{-value} \times \text{sign}(t)$) for the covariate 'Age'.