

# D2.1. Data harmonisation guidelines and standardized data management/processing protocol across sites

Project title: Healthy minds from 0-100 years: Optimising the use

of European brain imaging cohorts

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	Dissemination level	
PU	Public	Χ
PP	Restricted to other programme participants (including the Commission Services)	
RE	Restricted to a group specified by the consortium (including the Commission	
	Services)	
СО	Confidential, only for members of the consortium (including the Commission	
	Services)	

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## **Executive Summary**

The deliverable is a report on the implementation of part of Task WP2.1 "Data harmonization guidelines and standardized data management plan/processing protocol across sites".

This task aims to develop and implement harmonization protocols to unify and bridge the different coding standards of target variables between sites. In this process, we will develop guidelines for addressing differences in data management systems and routines, and MR image quality control procedures across sites to secure efficient application and utilization of data transfer, storage and processing systems.

#### In this deliverable we

- 1. Categorized all available and in principle shareable data for all Lifebrain studies and time points.
- 2. Provided necessary information to the work done in other WP2 tasks:
  - a. Task 2.3 "Enrichment of existing cohorts by online data collection (M6-M18)
  - b. Task 2.4 "Enrichment of existing cohorts by home collection of dried blood spots (DBS)" (M6–M36)
  - c. Task 2.5 "Enrichment of existing cohorts by administration of buccal swabs for epigenetic analysis" (M6–M36)
  - d. Task 2.6 "Generation of new GWAS (genome-wide association study) data and harmonization of genetic data across samples" (M6-M24)
  - e. Task 3.2. "Development and validation of a posteriori harmonization of MRI data", (M1-M9)
- 3. Identified and selected variables of initial interest
- 4. Obtained site-specific code books, containing information on inclusion/exclusion criteria, standard operating procedures, data collection methods, and metadata on the variables of initial interest.
- 5. Provided a general evaluation of the data harmonization potential of variables of initial interest and formulate general data harmonization strategies

#### Next steps:

- Continue with quality control and completion of site-specific study protocols.
   The latter specifically concerns documenting the instructions given to subjects during cognitive tests.
- 2. Continue with the stringent quality control of the site-specific variable code books on completeness, organization and formatting.
- 3. Establish work groups for a in depth evaluation of data harmonization for specific dimensions and clusters of variables



4. Define and establish variables codes and meta-data for variables of initial interest to Lifebrain. Generate Lifebrain formatted tables template for site-specific variables to the Lifebrain database, developed in Task 3.1 "Development of a data storage and management system" (M1-M6), and develop conversion scripts to populate Lifebrain tables with site-specific data.



## List of acronyms / abbreviations

Lifebrain Healthy minds from 0-100 years: Optimising the use of European

brain imaging cohorts

WP Work package

GA Grant Agreement

UiO University of Oslo

UmU Umeå Universitet

UOXF University of Oxford

MPIB Max Plank Institute for Human Development

UB University of Barcelona

REGIONH Region Hovedstaden

VUMC University Medical Center Amsterdam

MRC Medical Research Council

UCAM University of Cambridge

MRI Magnetic Resonance Imaging

Abbreviations of test and questionnaires that have been employed in Lifebrain studies are provided in Appendix 1.

## Introduction

#### Task 2.1 description

"Task 2.1 Establish a data management and processing protocol for harmonization of data for pooling, integration, quality control across sites. Lead: REGIONH; Participants: UmU, UOXF, MPIB, UB, MRC, VUMC (M1-M6) The task will develop and implement harmonization protocols, i.e. develop technical and semantic data standards, and quality protocols to unify and bridge the different coding standards of target variables between sites. It will also define guidelines

for addressing differences in data management systems and routines, and MR image quality control procedures across sites to secure the efficient application and utilization of the data transfer, storage and processing system developed in T3.1. Moreover, T2.1 will facilitate the implementation of the innovative post hoc harmonization algorithms, developed in T3.2, to correct MR images for scanner-specific differences in tissue contrast and intensity, non-uniformity. Finally, T 2.1 will ensure the efficient implementation and management of the new dried blood spot assays and online data collection system developed in T3.5 and 3.6, respectively."

## Background

Lifebrain is a European multi-site study aimed to capitalize on existing multidimensional cross sectional and longitudinal retrospectively acquired biological, behavioural and cognitive, medical, mental health, and in vivo neuroimaging data.

The objective of Lifebrain is to establish a solid foundation of knowledge for understanding how brain, cognitive and mental health can be *optimized through the lifespan*. Identification of determinants of brain, cognitive and mental health at different stages of life requires a large database of detailed information about brain imaging measures, cognitive function, mental and medical health, as well as biological measures.

Central to (large-scale) multi-site initiatives such as Lifebrain are data integration, standardization and harmonization. The international European aspect adds an extra layer of unique possibilities as well as challenges. The coordinated research efforts within Lifebrain allows for multiple analytic strategies (2), increase statistical power, allow more advanced subgroup analyses, enhance generalizability of findings and support cross validation or replication of findings across datasets.

## Status of task/state-of-the art in the topic

In June 2016, the international Journal of Epidemiology published the "Maelstrom Research guidelines for rigorous retrospective data harmonization" (2). Over a nine-year period, using "a phone survey with 34 major international research initiatives, a series of workshops with experts, and case studies applying the proposed guidelines" the authors developed generic guidelines for successful retrospective data harmonization that include several interdependent steps: "

- 1. Define the research question, objectives and protocol
- 2. Assemble pre-existing knowledge and select studies
- 3. Define targeted variables and evaluate harmonization potential
- 4. Process data
- 5. Estimate quality of the harmonized dataset(s) generated
- 6. Disseminate and preserve final harmonization products"

The current deliverable primarily concerns steps 2 and 3. Overall Lifebrain research questions have been outlined in the grant application and are detailed in WP4: Demonstration. Steps 4, 5 and 6 are out of the scope of the current deliverable and are the main subject of other work packages.

## Objectives

The overall objective of the deliverable is to provide a solid foundation for establishing a Lifebrain database consisting of available behavioural, cognitive, medical and mental health, neuroimaging and biological data, in-depth data harmonization and development and implementation of guidelines for standardized data management and processing protocols across sites.

#### We will:

- Categorize available data for all Lifebrain studies and time points
- Identify an initial set of variables of interest
- Acquire site-specific code books containing information on study design, standard operating procedures, data collection methods, and metadata on variables e.g. variable names, variable description, data type, data format, allowable values etc.
- Identify commonalities in available data across sites, evaluate general harmonization potential and formulate general data harmonization strategies



## Perspective

Details and implementation of exact data harmonization techniques and the evaluation of their applicability and quality are dependent on the specific research questions formulated in WP4 and what studies will be targeted

Data harmonization, data management and proper documentation will requires constant focus and effort throughout the lifespan of Lifebrain.

## Collaboration among partners

The large number of Lifebrain researchers that have contributed to the deliverable reflects the strong, transparent and focussed collaborative framework that Lifebrain provides. Each site designated a team consisting of the study PIs and dedicated research personnel to discuss and specify the dimensions and variables of interest as well as data harmonization and to provide detailed information on study setup and protocols, and metadata for variables of interest as well as expertise and experience in data organization and harmonization.



## 1. Included studies per site

UiO LCBC: Lifespan Changes in Brain and Cognition

(consist of subject of Hukommelse Prosjekt,

Neurocognitive Development, Neurocognitive Plasticity, and

Mor og Barn) (3 time points)

UmU Betula - Aging, Memory and Dementia (2 time points)

UOXF Whitehall II: Imaging (1 time point)
MPIB BASE (Berlin Altersstudie, 8 time points)

BASE II (Berlin Altersstudie, 2 time points)

UB WAHA (Walnut intervention study: 3 time points)

MSA (Multi-Systemic Atrophy: 1 time point)

PD (Parkinson's Disease: 3 time points)
GABA (GABA Spectroscopy: 1 time point)
iTBS (Theta-burst stimulation: 1 time point)

CR (Cognitive Reserve: 1 time point)

REGIONH HUBU ("Hjernens Udvikling hos Børn og Unge"; Brain maturation

in children and adolescents: 12 time points)

LISA (Live Active Successful Ageing: 1 time point)

VUMC NESDA (Netherlands Study of Depression and Anxiety: 6 time

points)

MRC CamCan (Cambridge Centre for Ageing and Neuroscience: 3 time

points)

UCAM CALM (Centre for Attention, Learning and Memory: 1 time point)

In Figure 1. we provide the total number of subjects and observations. A complete overview of the total number of unique participants and observations with behavioural data only and with behavioural and MRI data for all individual Lifebrain studies is provided in Appendix 2.

	Lifebrain
	All studies
Total unique subjects	12527
Behaviour only	7327
MRI+Behavior	5200
Total observations	27972
Behaviour only	19873
MRI+Behavior	8099

FIGURE 1. NUMBER OF SUBJECTS AND OBSERVATIONS IN LIFEBRAIN



## 2. Description of activities

The groundwork for the Lifebrain data harmonization effort was laid down in the grant application and during the Lifebrain Kick-off meeting held in Brussels, January 16-18, 2017. During the first 6 months of Lifebrain, the WP2.1 leader, RegionH, and data harmonization teams of individual Lifebrain sites communicated through email, Slack, OneDrive, Skype and telephone to discuss and organize all necessary information.

## 1.1. Mapping the data

The first task was to map all data available and in principle shareable within Lifebrain. Based on the discussion at the kick off meeting a spread sheet was created containing identified dimensions and variables. This spread sheet was than populated and if necessary extended by each site with information on data availability, and used tests, protocols, questionnaires etc. The dimensions that were included are displayed in Figure 2. A detailed overview of the variables within each of dimensions is provided in Appendix 3.



Study set up/ participants	s
Setup	
Start and end year	
Time between subsequen	t assessments
Assessment date	
Participants	
Number of subjects	
Sex	
Number of Females	
Number of Males	
Age related	
Age Range	
Can share birth date	
Can share birth month	
Can share birth year	
Can share calculated age	
Mortality general info	
Mortality Date of death	
Demographics	
Language	
Language of tests	
Mother tongue/native	
Bilingual	
Second language	
Education	
Subject education	
Mother education	
Father education	
Guardian education	
Partner eduction	
Occupation	
Subject /Partner/Parent/g	ardian
	Current
	Highest attained
	Longest
	history
Housing	100.01
Info on type of housing	
Info on geographic locatio	sn.
Income	
Household income (per ye	par)
Person (per year,)	tool
Partner (per year,)	
Parents/Guardian (per ye	ar)
Currency Marital status/relation	
Family composition	
Social Network	

Physical measures	
Weight	
Weight at birth	
Height	
Grip strength	
Waist circumference	
Blood pressure	
Handedness	
Dexterity	
Hearing	
Vision	
Eye dominance	
Chair rise	
Sait assessment	
Walking speed	
Oxygen uptake	
Lung function	
Hip circumference	
Foot dominence	
Body composition (fat, muscle)	
Smell recognition	
Physical Health	
ADL Activities of Daily Living	
Alcohol	
Smoking	
Substance use	
Physical activity	
Medication	
Sleep	
Diet	
Mental health	
Attachment style	
Anxiety	
Worry	
Depression/mood	
Phobias	
Sleep problems/fatigue	
Somatic symptoms	
Childhood trauma	
Diagnosis	
-	
Stress	
Life events/experiences	
Social contact	
Retirement	
Quality of life	
Personality	
MMSE Mini Mental State Examination	
Psychiatric Family history	

Medical Health	
physical Examination	
info on general health	
info on cardio vascular disease	
info on Vascular risk factors	
info on stroke	
info on diabetes	
info on Longstanding illness	
info on Sickness absence	
Women's health	
Cognitive Tests	
IQ or equivalent	
Attention	
Working memory	
Executive function	
Verbal memory	
Visual memory	
Memory self-assessment/Everyday memory	
Verbal fluency	
Simple reaction time	
Processing speed	
Motor speed/function	
Cognitive screening test / global cognition	
Cognitive test miscellenaneous	
MRI	
Scanner vendor	
Scanner type	
Field strenght	
Number of channels Headcoil	
T1-weighted	
Sequence name	
Orientation	
voxel dimensions	
TR in seconds	
Number of slices	
duration	
T2-weighted	
Sequence name	
orientation	
voxel dimensions	
TR in seconds	
Number of slices	
duration	
DWI	
Sequence name	
number of directions	
Number of b-values used	
b-values	_
	_
TR in seconds	
Number of volumes / b-value	_
Number of volumes / b-value duration	
Number of volumes / b-value duration rs-fMRI	
Number of volumes / b-value duration rs-fMRI Sequence name	
Number of volumes / b-value duration rs-fMRI Sequence name Instuction: eyes open/ closed / fixation	
Number of volumes / b-value duration rs-fMRI Sequence name Instuction: eyes open/ closed / fixation TR in seconds	
Number of volumes / b-value duration rs-fMRI Sequence name Instuction: eyes open/ closed / fixation TR in seconds Number of volumes	
TR in seconds  Number of volumes / b-value  duration rs-fMRI  Sequence name Instuction: eyes open/ closed / fixation  TR in seconds  Number of volumes  Duration Task fmri	
Number of volumes / b-value duration rs-fMRI Sequence name Instuction: eyes open/ closed / fixation TR in seconds Number of volumes Duration Task fmri	
Number of volumes / b-value duration rs-fMRI Sequence name Instuction: eyes open/ closed / fixation TR in seconds Number of volumes Duration Task fmri paradigm 1	
Number of volumes / b-value duration rs-fMRI Sequence name Instuction: eyes open/ closed / fixation TR in seconds Number of volumes Duration Task fmri paradigm 1 paradigm 2	
Number of volumes / b-value duration rs-fMRI Sequence name Instuction: eyes open/ closed / fixation TR in seconds Number of volumes Duration Task fmri	

Biomarkers
Blood
Freezer: -20 / -80
Whole blood
Serum
Plasma
Buffy coat
Info on time of the day
Info on fasting or no fasting
Info hours since last meal
Info on time to Scan/Assessment
Saliva
Freezer: -20 / -80
·
Info on time of the day
Info on fasting or no fasting
Info hours since last meal
Info on time to Scan/Assessment
Hormones
measured
Used test
Acquired marker
Metabolites
measured
Used test
Acquired markers
Immune marker
measured
Used test
Acquired markers
Miscellenaneous
Vitamin D
Cholesterol
Retinol
Fatty acids
DNA
Blood
Genetic info available
Whole -genome
# SNPs
type of analysis /chip
Custome genotyping
type of analysis
Measured polymorphisms/Genes
Saliva
Genetic info available
Whole -genome
# SNPs
type of analysis
Custome genotyping
type of analysis
Measured polymorphisms/Genes
massa sa kadimahanggaping

## FIGURE 2. LIFEBRAIN DATA DIMENSIONS

Miscellenaneous ASL MRS FLAIR T2\* MT/noMT



#### 1.2. Selection of variables of initial focus

Based on the detailed overview of in principle shareable data it has been decided, which variables to initial focus on (see Figure 3). The decision was informed by observed availability of data across sites, the focus of the research in WP4, specifically Task 4.2 "Analysis of individual pathways/mediator variables in relation to risk for mental health problems and

resilience" (M18-M48), and Task 4.3 "Analysis of individual pathways/mediator variables in relation to risk for poor cognitive function and decline versus resilience" (M18-M 48).

The decision was to focus our efforts on the dimensions:

- Study set up/participants
- Demographics
- Physical Measures
- Physical Health
- Mental Health and
- Cognitive Tests.

The level of detail obtained for the MRI, Biomarkers, and DNA data dimensions was sufficient to inform the specific tasks on these dimensions i.e.

- Task 3.2. "Development and validation of a posteriori harmonization of MRI data" (M1-M9);
- Task 2.4 "Enrichment of existing cohorts by home collection of dried blood spots (DBS)" (M6–M36);

Study	set up/ participants
Setup	
Start a	nd end year
Time b	etween subsequent assessments
Assess	ment date
Partici	pants
Numb	er of subjects
Sex	
Numb	er of Females
Numb	er of Males
Age re	lated
Age Ra	ange
Can sh	are birth date
Can sh	are birth month
Can sh	are birth year
Can sh	are calculated age
Morta	lity general info
Morta	lity Date of death
Demo	graphics
Langu	age
Langu	age of tests
Educa	tion
Subjec	t education
Mothe	er education
Father	education
Guard	ian education
Incom	e
House	hold income (per year,)
Currer	ncy
Marita	al status/relation
Physic	al measures
Weigh	t
Weigh	t at birth
Height	
Grip st	trength
Waist	circumference
Blood	pressure
Hande	

Physical Health
Alcohol
Smoking
Substance use
Physical activity
Medication
Sleep
Mental health
Anxiety
Depression/mood
Stress
Life events/experiences
Personality
MMSE Mini Mental State Examination
Medical Health
physical Examination
info on general health
info on cardio vascular disease
info on Vascular risk factors
info on stroke
info on diabetes
info on Longstanding illness
info on Sickness absence
Cognitive Tests
IQ or equivalent
Working memory
Verbal memory
Visual memory
Memory self-assessment/Everyday memo
Verbal fluency
Processing speed
MRI
Biomarkers
DNA

FIGURE 3. DIMENSIONS AND VARIABLES OF INITIAL FOCUS

- Task 2.5 "Enrichment of existing cohorts by administration of buccal swabs for epigenetic analysis" (M6–M36); and
- Task 2.6 "Generation of new GWAS (genome-wide association study) data and harmonization of genetic data across samples" (M6-M24).

Data harmonization of the MRI, Biomarker and DNA data is closely coupled to the work in these tasks.

## 1.3. Gathering study protocols and site-specific variables meta data

Next, spreadsheets were developed for gathering detailed information on respectively study protocols, i.e. employed inclusion and exclusion criteria and the order in which biological, physical, behavioural and cognitive, and neuroimaging assessments were performed (see Figure 4), and variable meta-data i.e. site-specific information on variable name, variable description, allowable values, data type, data format, allowable values, value description, and coding of missing data (see Figure 5).

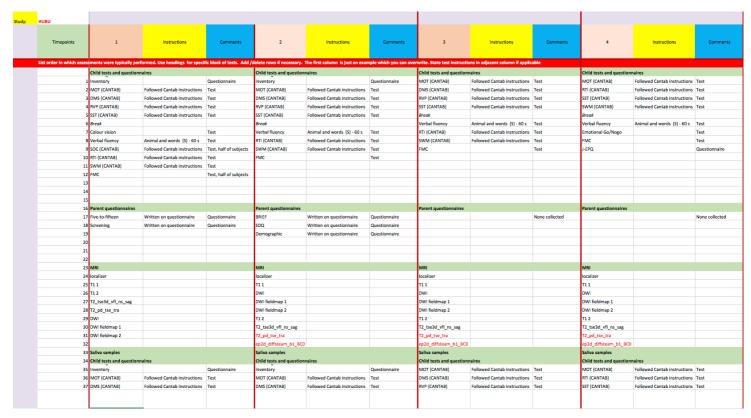


FIGURE 4. EXAMPLE SPREADSHEET LAYOUT FOR GATHERING SITE SPECIFIC STUDY PROTOCOLS



Α	В	С	D	E	F	G	Н	1	J	K	L
PLEASE NOTE	the goal is to get an overview how data is CURRENTLY CODED in the seperate studies and assessment rounds	below are only some examples /snippets of some possible Tests (you can just deleted the rows)	Create Blue header rows for each test (example below)	Create new TABS for each Assessment round of a specific study and name TAB accordingly (i.e. Study 1,2, Code Book Round 1,2,3,) and copy the first 3 rows from the Code Book Template into it	(not including missing values) should be listed in the LOOKUP Tab (see						
Site:	INSERT SITE NAME HERE	Study:	INSERT STUDY NAME							Define missing data codes used in the studies on the Readme tab. ONLY LIST exeptions of your rule here!!	specifics on coding scheme, reference t articles, other
Test_ID	Test_name	Variable_name	Variable_name_in_test	Variable_description	Туре	Format /lenght	Allowable values	Value description	Examples	Missing data	Comments
SUBJECT	NA	_									
				Specific study subject id		_					
		Subject ID	NA	start with a character	string	7			hubu001		
		DOB	NA	Date of Birth	Date	YYYY-MM-DD			1957-12-02		
		DB	NA	Day of Birth	Integer	DD	1 - 31		2		
		MB	NA	Month of Birth	Integer	MM	1 - 12		12		
		YB	NA	Year of Birth	Integer	YYYY			1957		
		Sex	NA	biological sex	Categories	Enumeration	male, female		male		
DEMO	Demographics										
		education	NA	highest eduction attained	Categories	Enumeration	lookup table				
											calculation methode
		edu_yrs		years of education	Integer	15	0-80				used
DMS	CANTAB: Delayed matching to										
				investigator doing the							
		Investigator_ID	NA	testing	Categories	Enumeration	Lookup table		1001		
		DMS_time	Test start time	NA	Date	HH:MM:SS			12:12:56		
		DMS_date	Test start date	NA	Time	YYYY-MM-DD			1957-07-05		
		DMS_CL	DMS Mean correct latency	NA	Decimal	#,#			123,76655		
		_	DMS Mean correct latency								
		DMS_CL_all	(all delays)	NA	Decimal	4,2			1233,76		
			DMS Mean correct latency						, , ,		
		DMS CL sim	(simultaneous)	NA	Decimal	#,#			123,76655		

FIGURE 5. EXAMPLE SPREADSHEET FOR GATHERING SITE SPECIFIC VARIABE META DATA

## 1.4. Checking code book consistency

All sites provided the required information in study inclusion/ exclusion criteria and study protocols. Organization of the information on the specific instructions subjects were given during cognitive tests, part of the study protocols, is ongoing.

All sites provided information on variable metadata for the variables of initial focus. A stringent quality control of the site specific variable code books on consistency and completeness, with respect to reported information in the general shared variables overview, organization and formatting is ongoing.

The provided variable data allowed us to assess data availability as well the level of detail in which dimensions and variables of interest were assessed and sampled across Lifebrain sites. The latter allowed us to perform an overall evaluation of the data harmonization potential of the different types of variables.

#### 1.5. Preliminary data harmonization potential

A detailed overview of the data available in Lifebrain is provided in Appendix 3.1- 3.3. In what follows, an overall evaluation of data harmonization potential of dimensions and cluster of variables is given.

1. Date of assessments, time of assessments, investigator doing the assessment, and subject sex, birth date, birth month, birth year, calculated age, and general info on mortality, and date of death.

This data does not need harmonization in the sense that scores, except for "Investigator doing the assessment" have the same meaning across sites. Sex will be recoded to female, male. Overall, for all variables that will be used in Lifebrain, we will impose a stringent coding regime i.e. organization and formatting of the meta data associated with Lifebrain variables. We strive to follow international standards and standards used in other large consortia comparable to Lifebrain in scoop and focus, in order to enable efficient future coupling of Lifebrain data to that of other consortia.

2. Subject, mother, father, guardian, person accompanying child educational

Lifebrain has a good coverage of subject education. The available data will allow two strategies:

- a. Record highest attained education and convert to years of education following the International Standard Classification of Education (current version 2011) (3a, b).
- b. Re-categorize available data into approximately four categories (see for example, 3). Additionally, we will statistically account for possible cohort and country effects. While not available in all studies, importantly, information on parent education is available or available in principle in studies including partially (LCBC) or exclusively (HUBU, CALM) children. Of note, in CALM, education was registered for the person who accompanied the child. Education of mother/father/guardian/other can be retrieved from this data.

#### 3. Subject occupation

Information is in principle available for most of the studies. If feasible, we will record and convert acquired data using International Standard Classification of Occupations (ISCO) 08 (4).

#### 4. Income

Data is not available in all studies. Harmonization of and/or including income in statistical models for future specific research questions is not straight forward and need to account for national differences in e.g. cost of daily living, housing prices, taxes, inflation etc (5).

#### 5. Marital and relationship status

Harmonization will include re-categorisation to ensure uniform coding.

6. Weight, Weight at birth, Height, Grip strength, Waist circumference, Blood pressure, Handedness

Data harmonization on these variables will in principle only requires re-coding. However, we need to account for differences between sites in the protocols and methods used to derive these measures (e.g. Weight measured using a weight balance or reported; Blood pressure measured sitting, lying down, or both, ...).

#### 7. Alcohol

Most sites assessed alcohol use. However, assessments differ substantial in the level of detail of acquired information (e.g. typical/ heavy drinking, type of alcohol beverage, quantity, frequency, drinking pattern, reference period) and instruments used. Successful harmonization/ modelling of alcohol consumption will depend on which studies are included in specific investigations. Cultural and cohort differences need to be accounted for (6).

#### 8. Smoking

Most sites assessed smoking habits. However, assessments differ greatly in the level of detail of acquired information (type: cigarettes, cigars, pipe, quantity, frequency, reference time, age of starting/stopping). Categorizations such as "never", "current", "not current" or ever smoked "yes/no" might be possible. Depending on the studies included in specific investigations definition of variables on quantity /frequency may be feasible (7).

#### 9. Substance use

Substance use has been assessed in several studies. However, assessments differ in the level of detail (e.g. status, type of drug, frequency, age started/stopped). Depending on studies and the number of subjects that have used substances of abuse, we may be able to model its possible effects, for example using a categorical variable "never, "current, "not current" and/or exclude subjects from analyses.

#### 10. Physical activity

Most sites assessed physical activity. However, the level of detail of acquired information (e.g. leisure, occupational, transport, daily living, organized, type, duration, regularity, intensity, frequency, MET or Calories equivalents) differs across sites as well as the assessment instruments that were used. We strive to harmonize on intensity, frequency, duration, and/or a categorical variable for level of activity (8,9).

#### 11. Medication

Most sites assessed medication use. However, level of detail (e.g medication history, types of medication, medication codes, frequency, doses) and assessments instruments used differ greatly across sites. Data harmonization likely will involve categorical variables.

#### 12. Sleep

Most sites assessed sleep. Eight studies used the Pittsburgh Sleep Quality Index. Others used in-house questionnaires. The data harmonization potential is deemed good and allows identifying common variables.

#### 13. Anxiety, Depression and Mood

Most studies assessed anxiety and depression and mood variables. However, there is considerable variation in the specific assessment instruments that were used as well as the number of instruments used in each individual study. Moreover, not all studies can provide item level data. We will identify common variables, and assess the feasibility of implementing e.g. latent factor models, item response theory (IRT) (9, 10).

14. Memory self-assessment and Everyday memory, Stress, Life events and experience, Personality

These dimensions were assessed in several studies. However, there is considerable variation in the specific assessment instruments that were used as well as the number of instruments used in each individual study. Moreover, not all studies can provide item level data. We will identify common variables, and assess the feasibility of implementing e.g. latent factor models, item response theory (IRT) (9, 10, 11).

#### 15. Physical Examination

Physical examinations were performed in several studies. However, level of detail and assessments instruments used differ greatly across sites. Information on general health, cardio vascular disease, diabetes, longstanding illness, stroke, vascular risk factors or sickness absence seems available. We strive to identify common variables and explore the possibility of creating categorical variables.

16. IQ or equivalent, Working memory, Verbal and visual memory, Mini Mental State Examination, Verbal fluency

Most studies assessed these variables. However, studies differ by the specific tests that were employed as well as by the number of test used in each individual study. We will identify common variables, and assess the feasibility of implementing e.g. latent factor models (10, 13, 14). The Mini Mental State Examination can be readily harmonized. Assessed letter and/or semantic fluency, while differing in used protocols, will likely allow us to normalized scores for this variable. Most sites assessed letter and/or semantic fluency allowing us to generate common variables and possibly use normalized scores.

#### 17. Processing speed

Several sites assessed processing speed. However, studies differ by the specific tests that were employed as well as by the number of test used in each individual study. We will identify common variables, and assess the feasibility of implementing e.g. latent factor models (10, 13, 14). Of note, most studies employed versions of the trail making task, making it feasible to use normalized scores.

## 2. Next steps

We continue with quality control and completion of site-specific study protocols. The latter specifically concerns documenting the instructions given to subjects during cognitive tests. Additionally, we continue with stringent quality control of the site-specific variable code books on completeness, organization and formatting.

Lifebrain will allow for different approaches depending on the specific research questions and hypotheses. It will allow for centralized analyses by creating one dataset for analyses, which requires harmonization of targeted datasets, or coordinated independent analyses (1).



## 2.1. General harmonization procedures

The current deliverable gathered and organized information about all variables of interest across cohorts in Lifebrain. While harmonization of some of the dimensions/variables will be straightforward, other dimensions/variables will require more effort to harmonise given the large variation in assessment instruments used for some of the dimensions. In our data harmonization efforts we will build on other initiatives, such as EPOSA (16), and BIOSHARE (17) (see Figure 6).

In the autumn of 2017, we will establish specific workgroups for data harmonization of specific dimensions/variables. The task groups will generate guidelines on how to harmonize specific dimensions/variables, and on what analytic approaches are feasible and/or recommendable. It is important to determine whether each of the dimensions/variables measures the same concept in order for the harmonization to proceed. If the variable does not measure the same concept, harmonization of the data will not be possible. If the variable does measure the same concept, then the harmonization procedures can proceed.

Another important step is to determine whether response categories overlap. If they do not overlap, variables will be matched on categories, e.g. smoking yes/no. If they do overlap, the task group will determine possible harmonization algorithms that allows for as little loss of information as possible.

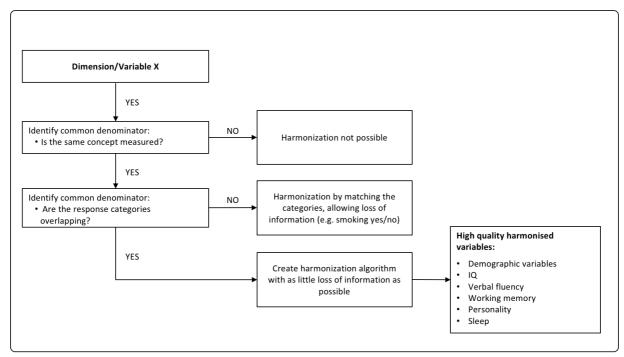


FIGURE 6. SCHEMATIC PRESENTATION OF THE HARMONIZATION PROCESS FOR ALL DIMENSIONS/VARIABLES ADAPTED FROM (16)



## 2.2. Designing the Lifebrain database

In the autumn of 2017 and in parallel with the data harmonization efforts we will start with designing the Lifebrain database tables that will ultimately populate the Lifebrain database using the infrastructure developed in Task 3.1 "Development of a data storage and management system" (M1-M6), and develop conversion scripts to populate Lifebrain tables with site-specific data.

### 3. Conclusion

The objectives of the current deliverable were fulfilled as detailed below:

- Map and categorize available data for all Lifebrain studies and time points: Completed
- Identify an initial set of variables of interest: Completed
- Obtain site specific code books, which contain information on study specific designs, standard operating procedures, data collection methods, and metadata on variables e.g. variable names, variable description, data type, data format, allowable values etc.
  - Site-specific code books, which contain information on study specific designs, standard operating procedures were generated. Gathering the instructions given to subjects during test is in progress.
  - All sites provided information on variable metadata. The detailed quality control of the site specific variable code books on consistency and completeness, with respect to reported information in the general shared variables overview, and formatting is still in progress.
- Evaluate commonalities across sites and overall harmonization potential
  - Preliminary data harmonization potential of initial variables of interest has been evaluated

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## 5. Appendix

Appendix 1: Abbreviations of test and questionnaires that have been employed in Lifebrain studies (PDF)

Appendix 2: Number of subjects and observations (PDF)

Appendix 3.1: Detailed overview of the data available in Lifebrain (PDF)

Appendix 3.2: Detailed overview of the data available in Lifebrain (PDF)

Appendix 3.3: Detailed overview of the data available in Lifebrain (PDF)

CPT Continuos Performance Test CVA CerebroVascular Accident CVLT California Verbal Learning Test DAST-20 Drug Abuse Screening Test DE Dependence Symptoms DHEA-5 Dehydroepiandrosterone 5 mg DKEFS Delis-Kaplan Executive Function System DMS(Cantab) Delayed Matching to Sample DSM-III-R Diagnostic and Statistical Manual of Mental Disorders III revised E2 Estradiol EFIT Emotional face identification task EHI Edinburgh handedness inventory EMO Emotional go/nogo task EMQ Everyday memory questionaire (Sunderland et al. 1983) EPI Echo-Planar Imaging EPIC European Prospective Investigation into Cancer and Nutrition EPIC EPAQ-2 EPIC Physical Activity Questionnaire ERQ Emotion Regulation Quiestionnaire FABB Frontal Assessement Battery FCSRT Free and Cued Selective Reminding Test (Buschke) FFEAR FEAR Questionnaire FFQ Food Frequency Questionnaire FFQ Food Frequency Questionnaire FFQ Food Frequency Questionnaire FFFQ Food Frequency Questionnaire GAD Generalized Anxiety Disorder GGD Generalized Anxiety Disorder HAMD Hamilton Depression Scale (Yesavage) GHQ General Health Questionnaire HAMD Hamilton Depression Scale (Heavage) HAMD Hamilton Depression Scale (Heavage) HAMD Hamilton Depression Scale HIPIC Hierarchical Personality Inventory for Children HAC Head-neck coil HAPL Harmful alcohol Use HIPIC Hierarchical Personality Inventory for Childr	f the questionnaire
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ICU Inveotory of Callous-Unemotional traits	
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IDS Inventory of depressive symptomatology	
IPAQ International Physical Activity Questionaire	
IPAQ-S International Physical Activity Questionnaire short version 2002	
IST-2000-R Intelligens Struktur Test 2000 Revised	
J-EPQ Junior Eysenck personality questionnaire  Jenskins Jenkins Sleep Questionnaire	
JLO Judgement of Line Orientation	
KSQ Karolinska Sleep Questionnaire	
LOT-R Life Orientation-Revised	
LTE-Q List of Threatening Experiences questionnaire	
MACA MacArthur stress reactivity questionnaire  MADRS Montgomery-Asberg Depression Rating Scale	
MADRS Montgomery-Asberg Depression Rating Scale  MASQ Mood and Anxiety Symptom Questionnaire	
MB Multi-band	
MDI Major depression inventory	
MDQ Mood Disorder Questionnaire	
MEMPR Multi-Echo MPRAGE  Matabalia Favinalant Tatal	
MET Metabolic Equivalent Total  MFQ Memory Functioning Questionnaire (MFQ) (Gilewski 1990)	

MIDI

Mill Hill

**MMSE** 

MNA

**MOCA** 

**MTCF** 

N-back

**NART** 

NA (VUMC)

Neo-Pi-R

NEO-FFI

**NEPSY VA** 

PA (VUMC)

**NEPSY** 

NPI

PΑ

PAL

PASE PGCMS

PHQ-9

**PING** 

PSQI PSS

**PSWQ** 

**RAVLT** 

**RCFT** 

Rey-0

**ROCF** 

RTI (CANTAB)

SA (VUMC)

RQ

RVP

SCD-Q

SCID-I

SCL-90

**SDMT** 

SDQ

SF-36

SHBG

**SOEP** 

STAI

STAI-C

**STW** 

**SWLS** 

TCF

TCI

TFEQ

TMT A,B

TMT-A

TMT-B

TOPF

TOT

**UCLA** 

**UPSIT** 

**VOSP** 

WAIS

WASI

WHIIS

WISC

WQ

Young

WMS III WPPSI

**WHODAS** 

WAIS-IV DS, DC

SPSRQ-CR

SOC (CANTAB)

SST (CANTAB)

SWM (CANTAB)

**MPRAGE** 

Mini Mental State Examination

**Montreal Cognitive Assessment** 

**Modified Taylor Complex Figure Test** 

**NEO Personality Inventory-Revised** 

**NEPSY- Visual Attention subtest** 

Mini Nutritional Assessment

Mill Hill vocabulary scale

**Working Memory Test** 

National Adult Reading Test

**Negative Affect** 

Panic Disorder

**Positive Affect** 

Midlife Development Inventory (MIDI) Scale

Magnetization-Prepared Rapid Gradient Echo

a neuropsychological assessment instrument

Neuropsychiatric Inventory (Cummings)

Physical Activity Scale for the Elderly

Preceived Health questionnaire

Pittsburgh Sleep Quality Index

Rey Auditory Verbal Learning Test

Rey-Osterrieth complex figure test

Rey-Osterreich complex figure

Symptom Checklist 90 items

Symbol Digit Modalities Test

Strenght and difficulties questionaire

German Socio-Economic Panel Study (SOEP)

State Trait Anxiety Inventory for Children

Temperament and Character Inventory

UCLA University of California, Los Angeles) Lonelinness Scale

Digit Span (DS) and Coding (DC) tests from the Wechsler Adult Intelligence Scale - Fourth Edition

University of Pennsylvania Smell Identification Test

Visual Object and Space Perception Battery

Wechsler Abbreviated Scale of Intelligence

Women's Health Initiative Insomnia Rating Scale

Wechsler Preschool and Primary Scale of Intelligence

World Health Organization Disability Assessment Schedule

Three Factor Eating Questionnaire

36-Item Short Form Health Surve

State and Trait Anxiety Inventory

The Satisfaction With Life Scale

**Spatial Working Memory** 

Trail Making Test A,B

Trail Making Test part A

Trail Making Test part B

Tip of The Tongue

(WAIS-IV;

**Test of Premorbid Functioning** 

Wechsler Adult Intelligence Scale

Wechsler Intelligence Scale

Womens questionnaire

Young Mania Rating Scale

Wechsler Memory Scale-3<sup>rd</sup> ed

**Taylor Complex Figure Test** 

Sex Hormone Binding Globulin

Stockings of Cambridge

Stop-Signal Task

Spot the word

**Preceived Stress Scale** 

**Rey Complex Figure Test** 

Somatic Arousal

Neuroticism Extraversion Openness Five-Factor Inventory

Paired Associated Learning (visual memory and learning) CANTAB

The Relationship Questionnaire (Bartholomew & Horowitz, 1991)

Subjective Cognitive Decline Questionnaire (Rami et al., 2014)

Structured Clinical Interview for DSM-IV-TR Axis I Dis- orders

Cambridge Neuropsychological Test Automated Battery Reaction Time touchscreen version

Sensitivity to Punishment and Sensitivity to Reward Questionnaire - Child Revised

The Philadelphia Geriatric Center (PGC) Morale Scale

Pediatric Imaging, Neurocognition, and Genetics

Penn-State Worry Questionnaire ultrabrief version

Rapid Visual Information Processing (CANTAB)

## Lifebrain: overview of the total number of unique participants and observations

Lifebrain	Site	UiO	UmU	UOXF	М	PIB	UB						REGIONH		VUMC	MRC	UCAM
All studies	Study	LCBC	Betula	Whitehall II Imaging	BASE	BASE II	WAHA	MSA_PS P	PD	GABA	iTBS	CR	HUBU	LISA	NESDA	CamCAN	CALM
	Number of time points	3	3	1	8	2	3	1	3	1	1	1	12	1	6	3	1
12527	Total unique subjects	1677	376	800	516	2200	82	24	46	33	27	49	94	450	2981	2690	482
7327 <sub>7387</sub>	Behaviour only	39		25	516	1755								90	2680	2057	255
5200 5140	MRI+Behavior	1638	376	775		445	82	24	46	33	27	49	94	390 450	301	633	227
27972	Total observations	2533	707	800	1402	2527	229	24	105	33	27	49	817	450	14860	2927	482
19873	Behaviour only	39		25	1402	1755	52							60	14228	2057	255
8099	MRI+Behavior	2494	707	775		772	177	24	105	33	27	49	817	390	632	870	227

Appendix 3.1 Detailed overview of the data available in Lifebrain Site include Categories **Variables** Subvar **UiO UOXF MPIB** UB **REGIOH VUMC UCAM UMU** MRC Study LCBC Whitehall II BASE BASE-II **WAHA** MSA\_PSP PD GABA iTBS CR HUBU LISA **NESDA** CALM Study Study name Betula: CamCAN Study Study Time points Date of assessments Study Study Time of assessments Study Study Investigator doing the Study Study assessment Study Subject Sex 24-40 /6: 4-93 25-85 60-84 70-95+ 63-80 38-81 36-81 60-79 48-89 7.5-21.5 62-70 18-74 18-102 5-18 Study Subject Age Range (specify) 61-83 Birth date Study Subject Birth month and year Study Subject Subject Study Birth year Subject Calculated age Study Subject General info mortality Study Subject Date of death Study **Demographics** Language Language of tests (specify) Norwegian Swedish English German German Spanish Spanish Spanish Spanish Spanish Spanish Danish Danish Dutch English English Mother tongue/native Demographics Language Demographics Language assessed Bilingual Demographics Language assesed Second language asked generally to list "other Demographics Language languages spoken at home" Basic ethnicity info Demographics Language CC3000 Demographics Language Cognitive reserve Solé-Padullés Demographics Language et al., 2009 Mayer, K. U., Maas, I., & Language Demographics Wagner, M. (1999). Demographics Language witin Medical history Modified CAMB questionnaire Demographics Language only checked if English is mother Demographics Language tounge unstructured interview (self Demographics Language report) Demographics Language In-house questioinnaire Assessed Demographics Education CC3000 Demographics Education Education Modified CAMB questionnaire Demographics Education **SOEP-questions** Demographics Demographics Education In-house questionairre unstructured interview (self Education Demographics report) Subject education Highest attained Demographics Years of education (Full-Subject education Demographics /Partime) Demographics Subject education **Education history** Partner education Highest attained Demographics Demographics Partner education Years of education Mother education Highest attained Demographics Demographics Mother education Years of education Father education Highest attained Demographics Demographics Father education Years of education Parental education Demographics Highest attained (either father or mother) Guardian education Highest attained Demographics Guardian education Years of education Demographics Occupation Assessed Demographics Occupation CC3000 (Cascot coded) Demographics Occupation Modified CAMB questionnaire Demographics TIC - P Occupation Demographics Cognitive reserve questionnaire Occupation Demographics (Solé-Padullés 2009) Detailed career history Demographics Occupation questionnaire (Cf. Mayer et al., in-house (Mayer, K. U. (1979). Demographics Occupation Berufliche Tätigkeit, berufliche Various standardised and non-Demographics Occupation standardised occupational Self-report Demographics Occupation Demographics Subject occupation Current Subject occupation Highest attained Demographics Demographics Subject occupation Longest Occupation history Demographics Subject occupation Partner occupation Current /Last Demographics Highest attained; before, Partner occupation Demographics immediately after mariage Longest; during mariage and Partner occupation Demographics before devorce/death Parent occupation Occupation Mother Demographics Occupation father Parent occupation Demographics Gardian occupation Occupation guardian Demographics Info on type of housing (e.g. Housing Demographics private, public, appartment, etc) residental history Info on geographic location (e.g. Demographics Housing Large city, small city, rural) Housing Household composition Demographics Postal code, combined with Housing Demographics dutch geo-data Housing CC3000 Demographics Demographics Housing diw\_datadoc\_2009-046.pdf Housing In-house Demographics Demographics Income assessed NOK DKK Currency (specify)  $\mathsf{DM}$ Sterling Demographics Income Euro Euro Euro Euro Household (per year, ...) Demographics Income Parents/Gardian (per year, ...) Demographics Income Partner (per year, ...) Demographics Income Person (per year, ...) Demographics Income CC3000 Demographics Income Modified CAMB questionnaire Demographics Income Income in-house Questionairre Demographics in-house interview Demographics Income unstructured interview (self Demographics Income report) Social information Assessed Demographics Social information Champ- Qestionnaire Demographics Cognitive reserve questionnaire Social information Demographics (Sole-Padulles 2009 Social information Loneliness scale Russel 1984 Demographics Number of confidants Social information Demographics (Antonucci) Social information SOEP-Person-questionnaire Demographics Demographics Social information in-house structured interview Social information Demographics In-house questionairre unstructured interview (self Social information Demographics report) Marital status Demographics assessed Relationship status Demographics assessed Family Demographics grandchildren, brothers and Network Info on Social network Demographics Info on Hobbies Other Demographics Other Info on Activities Demographics Other Life events Demographics Work life/satisfaction Assessed Demographics Work life/satisfaction Demographics Karasek questionire Work life/satisfaction Demographics PGCMS (15 items) and others Work life/satisfaction **SWLS** Demographics wellbeing, loneliness Demographics Work life/satisfaction Work life/satisfaction Demographics in-house Questionairre **Physical measures** Weight Measured unstructured interview (self **Physical measures** Weight report) **Physical measures** Weight at birth From records unstructured interview (self **Physical measures** Weight at birth report) **Physical measures** Height Measured unstructured interview (self **Physical measures** Height **Physical measures** Grip strength Tested **Physical measures** Grip strength Dynamometer **Physical measures** Hand-dynamometer Grip strength **Physical measures** Grip strength Jamar dynamometer Grip strength Standardized dynametry **Physical measures** Physical measures Waist circumference Measured **Physical measures** Blood pressure Measured Left/right arm while sitting, liyng **Physical measures Blood pressure** & standing (TP1) Lying; sitting; standing syst/diast. **Blood** pressure **Physical measures** Sitting after 1hr mental exercise. **Physical measures** Blood pressure average of 2 readings. right arm Blood pressure Physical measures supine rest rest 5minutes: sitting down, Blood pressure **Physical measures** right arm, average of 3 **Physical measures** Blood pressure Sitting, 1 minute rest blood pressure monitor (lying, Physical measures **Blood** pressure standing, standing after 3 min) sitting down, with automated **Physical measures Blood pressure** machine **Physical measures** Handedness Measured Biggs 1975 self-report Handedness **Physical measures** questionnaire **Physical measures** Handedness Description of laterilazation Edinburgh Handedness **Physical measures** Handedness Inventory **Physical measures** Handedness in-house Questionairre unstructured interview (self **Physical measures** Handedness Physical measures Dexterity Tested **Physical measures** Balance and Gait test Dexterity Biggs 1975 self-report **Physical measures** Dexterity questionnaire Hand coordination - circle **Physical measures** Dexterity drawing **Physical measures** Dexterity Pegboard Reitan Trail Making, Complex **Physical measures** Dexterity **Figures** Physical measures Hearing Tested **Physical measures** Hearing Audiogram AudioMester PA 444' / **Physical measures** Hearing Company: Hortmann **Physical measures** Hearing **Five Minute Hearing Test** Hearing Handicap Inventory for **Physical measures** Hearing the Elderly Hearing threshold level; Physical measures Hearing audiometry, frequences from **Physical measures** Hearing Oldenburger Inventar Pure tone hearing threshold (0.5 **Physical measures** Hearing - 2.0 kHz; 3.0 - 8.0 kHz) **Physical measures** Hearing Siemen's Hearcheck Screener unstructured interview (self **Physical measures** Hearing report) **Physical measures** Vision Tested CC3000 Snellen **Physical measures** Vision; acuity If pp could read on a board from **Physical measures** Vision; acuity 3 and 5 meters Reading chart/distance chart: Vision; acuity **Physical measures** Snellen chart score Colour blindness self reported **Physical measures** Vision; colour on VSTM **Physical measures** Vision; colour Colour test reported **Physical measures** Vision; colour Colour vision Info on Glasses/contact lenses **Physical measures** Vision; other Info on Glasses/contact lenses **Physical measures** Vision; other strenghts National Eye Institute Visional **Physical measures** Vision; other Functioning Questionnaire – 25 /\/EO\_25\ Only noted if affected test **Physical measures** Vision; other performance unstructured interview (self **Physical measures** Vision; other report) Physical measures Chair rise Measured **Physical measures** Chair rise 4-Meter Gehstreckentest **Physical measures** Chair rise Timed up&go Test **Physical measures** Chair rise Tinetti **Physical measures** Chair rise in-house test **Physical measures** Gait assessment Measured Physical measures Gait assessment 4-Meter Gehstreckentest **Physical measures** Gait assessment Experimental device **Physical measures** Timed up&go Test Gait assessment Physical measures Gait assessment Tinetti **Physical measures** Lung function Measured **Physical measures** Lung function Diagnostic & measurement Peak flow **Physical measures** Lung function **Physical measures** Hip circumference Measured **Physical measures** Tested Foot dominence Physical measures Foot dominence CC3000 Body composition (fat, Physical measures Tested muscle) Body composition (fat, Impedance (InBody, Adults only) Physical measures muscle) **ADL** Activities of Daily **Health Qs** Measured Living **ADL** Activities of Daily **Health Qs** ADL Living **ADL** Activities of Daily Baltes, M. M., Maas, I., Wilms, **Health Qs** H.-U., Borchelt, M., & Little, T. D Living ADL Activities of Daily Barthel-Index plus 2 IADL items **Health Qs** from Lawton & Brody Living **ADL** Activities of Daily **Health Qs** Living ADL Activities of Daily WHODAS questionnaire Yesterday-Interview & BASE ADL Activities of Daily **Health Qs** Living **Activitity Questionnaire** ADL Activities of Daily In-house Physical activity (child **Health Qs** and parent) Living **ADL** Activities of Daily **Health Qs** in-house interview Living **ADL** Activities of Daily unstructured interview (self **Health Qs** Living report) Alcohol **Health Qs** Measured **Health Qs** Alcohol Audit questionnaire **Health Qs** Alcohol **CAMB** questionnaire CC3000 **Health Qs** Alcohol CDDR+ other questionnaires put **Health Qs** Alcohol together Alcohol **Health Qs** CIDI Dependence identified by SCID-I Alcohol **Health Qs** and CAGE GMS-A/-B **Health Qs** Alcohol Mediterranean diet **Health Qs** Alcohol questiostionnaire **Health Qs** Alcohol in-house structured interview **Health Qs** Alcohol in-house questionnaire unstructured interview (self **Health Qs** Alcohol report) Smoking **Health Qs** Measured **Health Qs** Smoking CAMB questionnaire Smoking CC3000 **Health Qs** CDDR+ other questionnaires put Health Qs Smoking together **Fagerstrom Test for Nicotine Health Qs** Smoking Dependence (FTND) **Health Qs** Smoking In-house questionnaire **Health Qs** Smoking in-house structured interview unstructured interview (self **Health Qs** Smoking report) **Health Qs** Substance use Measured CDDR+ other questionnaires put **Health Qs** Substance use together **Health Qs** Substance use DAST-20 GMS-A **Health Qs** Substance use **Health Qs** Substance use Soft and hard drug use **Health Qs** in-house structured interview Substance use unstructured interview (self **Health Qs** Substance use Physical activity **Health Qs** measured frequency and duration Physical activity **Health Qs** reported for 3 intensity levels of **Health Qs** Physical activity Baecke Index **CHAMPS Health Qs** Physical activity **Health Qs** Physical activity **EPIC EPAQ-2** Physical activity IPAQ **Health Qs Health Qs** Physical activity Medical interview Metabolic Equivalent of Task Physical activity Health Qs (MET) Modified Minnesota scale **Health Qs** Physical activity PASE **Health Qs** Physical activity Cognitive reserve questionnaire **Health Qs** Physical activity (Sole-Padulles 2009) **Health Qs** Physical activity Self-report questionnaire Walking, cycling, sedentary **Health Qs** Physical activity activitv **Health Qs** Physical activity In-house questionnaire **Health Qs** Medication Info on medication use **Health Qs** Medication In-housequestionnaire **Health Qs** Medication GMS-A **Health Qs** Medication Info on types of medication **Health Qs** Medication Medical interview Medication history **Health Qs** Medication Medication information **Health Qs** Medication recorded for children with ADHD Medication use according to **Health Qs** Medication ATC codes, frequency and **Health Qs** Medication in-house Questionairre unstructured interview (self **Health Qs** Medication report) **Health Qs** Sleep Measured **Health Qs** CAMB questionnaire Sleep **Health Qs** Sleep In-house, sleep night before In-house, based on Spiegel, **Health Qs** Sleep **Health Qs** Insomnia rating Scale Sleep **Health Qs** Sleep Jenkins **Health Qs** Sleep Karolinska Sleep Questionnaire Pittsburg sleep inventory (child **Health Qs** Sleep 

and parents)
PSQI

Sleep duration

in-house Questionairre

in-house structured interview

unstructured interview (self

report)

Assessed

(Types of) calorie intake

Body image

**CAMB** questionnaire

CC3000 food consumed

Detailed info on dietary habits

**EPIC** questionnaire

FFQ

Food frequency list (7 days

protocol)

In-house nutrition questionnaire

Mediterranean diet adherence:

Schroder 2014 MNA (Mini Nutritional

Assessment)

**Health Qs** 

Sleep

Sleep

Sleep

Sleep

Sleep

Diet

lifetime

Mental health

Depression/mood

Depression/mood

Depression/mood

Depression/mood

Depression/mood

Depression/mood

Depression/mood

Depression/mood

Depression/mood

Phobias

**Phobias** 

Phobias

**Phobias** 

Sleep

problems/fatigue Sleep

problems/fatigue Sleep

problems/fatigue

Sleep

problems/fatigue

Sleep

problems/fatigue

Somatic symptoms

Somatic symptoms

Somatic symptoms

Somatic symptoms

Childhood trauma

Memory self-

assessment/ Everyday

memory Memory self-

assessment/ Everyday

IVIEMOTY Self-

assessment/ Everyday

IVIEMOTY SEIT-

assessment/ Everyday

assessment/ Everyday

iviemory seit-

assessment/ Everyday

IVIEMOTY Self-

assessment/ Everyday

iviemory seit-

assessment/ Everyday

IVIEMOTY Self-

assessment/ Everyday

iviemory seit-

assessment/ Everyday

Memory self-

assessment/ Everyday

Memory self-

assessment/ Everyday

Diagnosis

Stress

Life

events/experiences Life

events/experiences

events/experiences Life

events/experiences Life

events/experiences Life

events/experiences

events/experiences

Life

events/experiences

events/experiences Life

events/experiences

Life

events/experiences

events/experiences

events/experiences

Social contact

Retirement

Retirement

Retirement

Quality of life

Quality of life

Quality of life

Quality of life

Personality

MMSE Mini Mental

State Examination
Psychiatric Family

history Psychiatric Family

history
Psychiatric Family

history Psychiatric Family

history
Psychiatric Family

history
Psychiatric Family

history Psychiatric Family

history
Psychiatric Family

history

Behavioral

disturbances Behavioral

disturbances Behavioral

disturbances Behavioral

disturbances

Behavioral

disturbances

Behavioral

disturbances

Behavioral

disturbances
physical Examination

Women's health

**PGCMS** 

PHQ-9

Revised Children's Anxiety and

Depression Scale-25, child self-

report and parent report

SDQ

Young

in-house structured interview

Ever been told by a doctor?

unstructured interview (self

report)

Assessed

CIDI, SocPhob, Agora, GAD, PA

CIS-R

GMS-A

Assessed

Insomnia rating Scale

PSQI

Revised Children's Anxiety and

Depression Scale-25 (Chorpita et

in-house structured interview

Assessed

CIS-R

Complaint List (von Zerssen,

1990) Presence of 20 diseases, GP

records, 4DKL, migraine, chronic

Measured

**CAMB** questionnaire

Childhood Trauma

Questionnaire

NEMESIS questionnaire

in-house structured interview

unstructured interview (self

report)

War experiences / SOEP

Assessed

10 Memory Self-Report

Questions

CDQ

Do you have any

cognitive/memory complaint?

Vac / Na itam

EMQ

GMS-A

MFQ

SCD-Q

Self reported and/or observed

subjective memory complaints

(Frank Jessen)

unstructured interview (self

report)

Assessed

based on self-report

Case Report Form (CRF) ist the

whole medical examination, CC3000, specific diagnoses

enquired about: bipolar CIDI (only mood, bipolar,

anxiety, alcohol.)

DSM-3

DSM-4-5

ICD-10

ICD-10 (based onself report)

ICD-9

Reported by professionals

referring children to the CALM

SCID-I

in-house

questionairre/interview unstructured interview (self

report)

Assessed

"How much stress in the past 4

weeks?"

4DSQ

Brugha questionnaire

CASE

TICS (Trier Inventory for Chronic

Stress

Daily Hassles questionnaire

MACA

Perceived stress (Perceived

Stress Scale, PSS) (Cohen,

**PSQ** 

SCL-90

Unstructured interview (self

report)

Assessed

months between

Lifetime

FTF

In-house family history

Last 12 months CASE

Life events

Life events (Brown & Harris,

1989; Holmes & Rahe, 1967;

LTE-Q

**NEMESIS** questionnaire

Parent-reported CASE made into

lifetime
The Lifetime of Experiences

Questionnaire unstructured interview (self

report)

Measured

**ASEBA** 

Cognitive reserve questionnaire

Loneliness scale

Number of confidants

(Antonucci)
Relationship questionnaire -

peers and family

Social activities & social support

Social contacts questions

developed by Valenzuela

Social dominance orientation

Social Networks in Adult Life

Questionnaire

in-house structured interview

unstructured interview (self

report)

Assessed

in-house Questionairre

Within questionnaire on

occupational career

Assessed

Satifaction with Life Scale

(Pavot & Diener, 1993),

**PGCMS** 

unstructured interview (self

report)

Measured

BAS

BIS

BIS-11

HiPIC

J-EPQ

LOT-R

MIDI

NEO

NEO-FFI

NEO-P-R

Big five

numerous other aspects of the

self and personality: cf. Smith, J.

SDQ

TCI

Assessed

Measured

Case Report Form (CRF) ist the

whole medical examination,

F-HAM

Family history of dementias

Family tree inventory

**HAS-Items** 

PING

unstructured interview (self

report)

Measured

**BRIEF** 

**ERQ** 

NPI

Questionnaire on control beliefs

(cf. Smith & Baltes, 1999)

Questionnaire on coping styles

(in-house; Smith & Baltes, 1999)

Self-perceived efficacy

Performed

CAMB questionnaire

Case Report Form (CRF) ist the

whole medical examination, CC3000

Framingham CHD

Framingham CVD

Framingham Stroke Risk Score

Info on cardio vascular disease

Info on diabetes

Info on general health

info on Longstanding illness

Info on medication (HTA,

diabetes, dyslipmeia)

Info on Sickness absence

Info on stroke

Info on Vascular risk factors

Medical assessment

PASE

Visit with Neuropsychologist

Visit with doctor + Clinical

records
In-house (Steinhagen-Thiessen,

E., & Borchelt, M. (1999).

Inhouse structured interview

unstructured interview (self

report)

In-house questionnaire

Assessed

CAMB quest

CC3000

Children

Contraceptive pill

Female sex hormone

In-house

Menopause

Only for the female MR-

subsample, questions on Question in the form "Formulär

1", not in the WQ-form unstructured interview (self

report)
Within medical anamnesis (Incl.

info on menarche, pregnancies, Womens Questionnaire (created

within Betula)

3-5

include **Variables** Subvar Categories Study Study Study name Study Study Time points **Cognitive Tests** IQ or equivalent Measured Vocabulary (WAIS /WAIS-III) 

**Cognitive Tests** 

**Imaging** 

**Imaging** 

**Imaging** 

**Imaging** 

**Imaging** 

Biomarker

Biomarker

Biomarker

Biomarker

Biomarker

DNA

DNA

Appendix 3.3

**Cognitive Tests** 

IQ or equivalent IQ or equivalent **Cognitive Tests** IQ or equivalent

Attention

Working memory

Executive function

**Executive function** 

Executive function

**Executive function** 

Executive function

Executive function

Motor speed/function

Executive function

Verbal memory

Visual memory

Verbal fluency

Processing speed

Simple reaction time

Motor speed/function

Cognitive screening

test / global cognition Cognitive screening

<u>test / global cognition</u>

**Cognitive Other** 

**Cognitive Other** 

**Cognitive Other** 

Cognitive Other

**Cognitive Other** 

Cognitive Other

Cognitive Other

Cognitive Other

**Cognitive Other** 

Cognitive Other

**Cognitive Other** 

Cognitive Other

Cognitive Other

Cognitive Other

Cognitive Other

Cognitive Other

Cognitive Other

MRI

MRI

MRI

MRI

MRI

Blood

Saliva

Hormones

Metabilites

Immune markers

Blood

Saliva

IQ or equivalent IQ or equivalent

Vocabulary (WASI / WPPSI) IQ or equivalent IQ or equivalent

BASECog: g-score Block Design (WASI / WPPSI) **Blocks WAIS** Blocks WISC

Vocabulary WISC

Cattell

Composite scores used to

estimate g IST-2000-R

Matrix (WASI / WPPSI)

Matrix Reasoning, WASI

(Wechsler Abbreviated Scale of NART

Practical problems, figural

analogies, letter series (fluid

Similarities (WAIS)

Similarities (WASI/WPPSI)

Spot The Word

TOPF

Measured

Antisaccade

ANT

Balloons Hunt, Test of Everyday

Attention for Children 2 (Manly, Barking, Test of Everyday

Attention for Children 2 (Manly,

CPT

Exogene cuing task

Hector Cancellation, Test of

**Everyday Attention for Children** Memory + distraction

Red, Blues, Bags and Shoes, Test

of Everyday Attention for Simple Reaction Time, Test of

**Everyday Attention for Children** 

TMT-A

TMT-B

Vigil, Test of Everyday Attention

for Children 2 (Manly, et al.

Measured

Plus-Minus

Spatial span (Wechsler Memory

Scale) **Automated Working Memory** 

Assessment (Alloway, 2007)

BASECog: memory

Coding (DC) (WAIS- IV)

Digit Recall

Digit Recall Backward

Digit Recall, Automated Working

Memory Assessment (Alloway

Digit Span (DS)

Digit Span (DS) (WAIS- IV)

Digit span backward

(WISC/WASI)

Digit span forward (WISC/WASI)

Digits backwards (WAIS)

Dot Matrix, Automated Working

Memory

Letter digit substitution

Letter updating

Mental control (Wechsler

Memory Scale)

Memory Assessment (Alloway,

N-back

N-Back (2-back)

N-Back (number)

Spatial span forward

(WISC/WASI)

Spatial updating

Spatial working memory

CANTAR

Working memory (card-sorting)

Measured

BRIEF (parents)

CLOX

FAB

Flanker

Hotel

Keep track

Local-global

Multi-source interference

**NEPSY Directors task** 

Plus-minus

**RCFT** 

SOC (CANTAB)

SST (CANTAB)

Stroop

TMT-B

Tower of London

Tower Test, Delis Kaplan

**Executive Function System** 

Reitan Trail Making

Trail making

Measured

CAMT

CVLT

Emotional memory task,

imaging only FCSRT (Buschke)

HVLT

HVLT-R

IST-2000-R

Letter memory

Logical Memory WMS III

Memory for text

Mill Hill

**RAVLT** 

Recall of sentences and words

Story Recall, Children's Memory

Scale (Cohen, 1997) VLMT: verbal learning and

memory test

Measured

DMS (CANTAB)

e.g., Paired Associates

Face recognition

Face-profession task

In-house Emotional Memory

Object location

PAL Cantab

**Rey Complex Figure Test** 

Scene encoding

Measured

ACE-R

Boston Naming Test (BNT)

FAB fluency

Fluency (2 tasks)

Fluency (4 tasks)

Letter fluency (F-A-S)

Letter fluency (P-M-R)

Letter fluency (P)

VFL phonemic + semantic

VLF Categories (animals)

WASI/WPPSI Vocabulary

Words beginning with "S"

Measured

Choice Reaction Time

Digit symbol (Echsler)

Letter-digit

Perceptual speed

Rapid automated naming task

RVP (Cantab)

RTI (CANTAB)

**SDMT** 

TMT-A

Word-color interference

Measured

Control task

CPT reaction time

IAT

Reaction time to neutral stimuli

in cognitive tests can be utlized

Simple Reaction Time Test

Measured

**DKEFS Trail Making Test** 

**Electronic Tapping Test (Medical** 

assessment)

Force Matching

Hand coordination

Motor Learning

Reitan Trail Making

TMT-A

Measured

ACE-R

**BRIEF** 

IST-2000-R

**MMSE** 

MOCA

Measured

10 Memory Self-Report

Questions Alliteration, Phonological

Assessment Battery (Frederickson, et al., 1997)

Approach-avoidance task

**Benton Faces** 

Boston Naming Test (BNT)

**BRIEF** 

Cimbi affective meMory task

CN-Rep (nonword repetition),

Gathercole 1989

Delayed discounting

Dexterity (Pegboard)

Ekman Face Emotion

Recognition Emotion Regulation (in one half of people) (Re-appraising

negative movies) Emotional face identification

task

Face Emotional Go/Nogo

Famous Faces

Five-to-fifteen

Implicit association test

JLO

Naming Speed, Phonological

Assessment Battery

(Frederickson, Frith & Reason, Numerical Operations, Wechsler

Individual Achievement Test II

(Wechsler, 2006) Numerous (e.g., Enhanced Cued

Recall; Complex Figure)

**Picture Priming** 

Picture Supplemented

Alliteration, Phonological

Assessment Batterv

proverbs (frontal test)

RAN/RAS

Reading Comprehension,

Wechsler Individual

Achievement Test II (Wechsler.

SDQ

Serial recall

Single Word Reading, Wechsler

Individual Achievement Test II

(Wechsler. 2006) Spelling Wechsler Individual

Achievement Test II (Wechsler,

2006) Syntatic/Semantic

Comprehension

Tip of The Tongue

VOSP (number location and

incomplete letters)

Measured

T1-weighted

T2-weighted

DWI

rs-fMRI

Measured

Measured

Measured

Measured

Measured

Measured

Measured

Mr X, Automated Working

Memory Assessment (Alloway, In-house Visual Short-Term

**UiO** 

LCBC

**UMU** 

Betula:

**UOXF** 

Whitehall II

**MPIB** 

BASE-II

BASE

Detailed overview of the data available in Lifebrain

**WAHA** 

MSA\_PSP

Site

PD

UB

GABA

iTBS

CR

**UCAM** 

CALM

**REGIOH** 

LISA

HUBU

**VUMC** 

**NESDA** 

MRC

CamCAN