Commentary

**Machine learning paves the way forward for geropathology assessment**

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**Abstract.**

Geropathology investigates the pathological aspects of aging, analyzing age-related lesions in organs to track their progression and link to comorbidities. Utilizing geropathology grading scores, researchers evaluate drug efficacy in mammalian models, providing insights into the biological pathways of aging and disease development. Sheehan et al. introduced a novel approach using a weakly supervised machine learning algorithm to analyze age-related differences in mouse kidneys. This method, using chronological age as labels, effectively identifies age-associated histopathology. The model was validated against the Geropathology Research Network grading scheme, demonstrating high reliability and effectiveness in discerning drug treatment effects. The model’s reproducibility and ease of implementation, supported by tutorials and GitHub resources, enhance its utility. However, challenges include potential over-precision, the need for pathologist support, and strict whole slide image processing to prevent false detections. Future research could extend to additional systemic organs and various animal models, leveraging genetic similarities in lesion structures to improve grading precision and translational relevance to human aging and diseases.

**Key words.** Geropathology, aging, machine learning, age-related lesions, drug efficacy

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Geropathology, within the field of geroscience, focuses on the pathological aspects of aging and its association with diseases [1]. It involves assessing age-related lesions in organs, grading their severity to assign quantitative values. This detailed histopathological analysis helps track how these lesions progress with age and their links to comorbidities. By using geropathology grading scores, researchers can evaluate the effectiveness of drugs in mammalian animal models, providing crucial insights into the biological pathways of aging and the development of age-related diseases. These grading scores serve as critical endpoints in drug studies, allowing for precise measurement of how treatments impact the severity and progression of age-associated lesions.

Sheehan et al. recently introduced a novel approach, leveraging a supervised machine learning (ML) algorithm to analyze age-related differences in mouse kidneys [2]. Unlike traditional ML methods, weakly supervised learning operates with loosely specified prediction targets, blending aspects of both supervised and unsupervised learning. Essentially, it discerns age-associated histopathology using sample-level chronological age for each whole slide image (WSI), where higher chronological age serves as the label. Analogous to teaching a student with incomplete information, weakly supervised learning provides general hints or clues to the computer, prompting it to discern patterns and make predictions based on these cues. While not as precise as fully supervised learning, which requires detailed labels for every data point, weakly supervised learning empowers the computer to make educated guesses, providing invaluable information for tasks where obtaining precise labels for all data are challenging or time-consuming.

Sheehan et al. validated their model by correlating scores generated by pathologists using the Geropathology Research Network aging grading scheme [3], demonstrating high inter-reliability when compared to independent scoring by board-certified veterinary pathologists [2]. Furthermore, they showed that this classifier can discern not only age-related differences, but also differences resulting from drug treatment, such as a combination of rapamycin, acarbose, and phenylbutyrate, which was shown by our laboratory to be effective in enhancing resilience to aging in C57Bl/6 and HET3 mice [4] (Figure 1). Importantly, the model’s reproducibility allows for repeatable implementation in further studies, and the authors have provided tutorials and step-by-step directions on how to implement the code provided on GitHub. Additionally, the classifier’s throughput and portability make it feasible to run on individual computers.



**Figure 1.** Schematic diagram illustrates the program utilizing deep neural network algorithms, which employ multiple layers of interconnected digital points to model complex patterns in data for image recognition. This program identifies and distinguishes between treatment and control cohorts for kidney analysis. The leftmost hematoxylin and eosin (H&E)-stained image demonstrates a kidney with grade 1 nephropathy, characterized by less than 10% of renal parenchyma affected by an age-related lesion, in this case focal tubular regeneration (black arrow), after drug treatment. The middle H&E image shows a kidney with grade 3 nephropathy characterized by moderate lesions affecting 30 to 70% parenchyma compared to grade 1, in this example demonstrated by tubular proteinuria (black arrow), as well as focal minimal lymphoid aggregates (grade 1, black star). Lesion categories and scores were assigned by two independent pathologists. The rightmost image shows how the system codes these differences by overlapping images and analyzing age-related variations, creating quantitative measurements that are displayed graphically. Magnification 20X.

Nevertheless, implementing this technique presents several significant challenges. As addressed by Sheehan et al., while the evaluation of all pixels in an image ensures unbiased scoring, it also risks over-precision of estimates. Since the algorithm lacks the ability to differentiate lesions from non-lesions, its role is limited to identifying differences between age groups. Thus, ongoing support from trained pathologists is essential to discern subtle details over time before full autonomy can be achieved. Moreover, strict processing of WSIs is imperative to maintain precision. Any mechanical variability in tissue processing, slide preparation, or imaging can significantly impact the detection of false positives and negatives [5]. Standardizing these procedures is therefore crucial to minimize variability. Lastly, this technique only detects differences from normal tissue rather than specific abnormalities, unlike supervised ML methods. While valuable for assessing age-related degeneration in organ systems, it cannot replace supervised ML techniques for identifying specific anomalies in tissues.

Further investigations could explore examining additional systemic organs (i.e., brain, heart, lung, liver, pancreas, spleen, skeletal muscle) within and beyond the mouse model, extending to vertebrate models such as cats and invertebrate models like the house cricket. Both hold substantial translational significance in studying human aging and age-related diseases and are of great interest for our laboratory [6-7]. Through leveraging the genetically preserved similarities in lesion structure and shape across species, machine learning techniques could be employed to discern subtle differences between animal tissue types and histopathological appearances. This approach would not only enhance the precision of grading, but also shed light on variations between animal models. Identifying limitations and similarities in these models would allow for more accurate interpretation of findings and better understanding of translational relevance in histopathology research for humans.

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