

TAKE-HOME

Despite **similar baseline empathy** deficits, **trajectories diverge** over time: **lvPPA** shows progressive **decline** in cognitive and affective empathy, **linked to frontal cortical thinning**, while **nfvPPA** remains **stable**.

Background

Empathy loss reported in nonfluent (nfvPPA) and logopenic (lvPPA) variants of primary progressive aphasia¹

KNOWLEDGE GAPS

- Limited longitudinal evidence on empathy changes in nfvPPA and lvPPA²
- Neural correlates of empathy decline unknown

Objectives

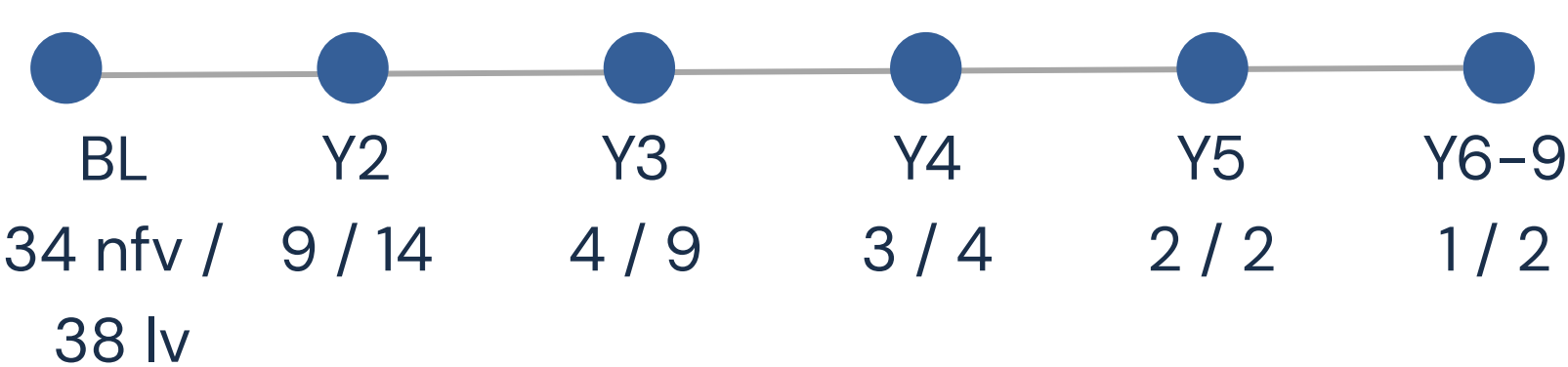
- 1 Characterize trajectories of cognitive & affective empathy in nfvPPA and lvPPA
- 2 Identify neural correlates of empathy changes

Method

PARTICIPANTS

	HC	nfvPPA	lvPPA	p
N	45	34	38	-
Age (y)	67.2	68.1	67.3	.888
Education (y)	14.2	11.8	12.9	.005
Disease dur. (y)	-	3.78	3.97	.304
CDR SoB	-	5.09	4.1	.494

LONGITUDINAL FOLLOW-UP



TASKS & MEASURES

- IRI-PT** — cognitive empathy (perspective-taking) · **IRI-EC** — affective empathy (empathic concern)
- Annual **structural MRI** in PPA participants

ANALYSES

Kruskal-Wallis + Dunn's post-hoc · linear mixed-effects models · ROI cortical thickness

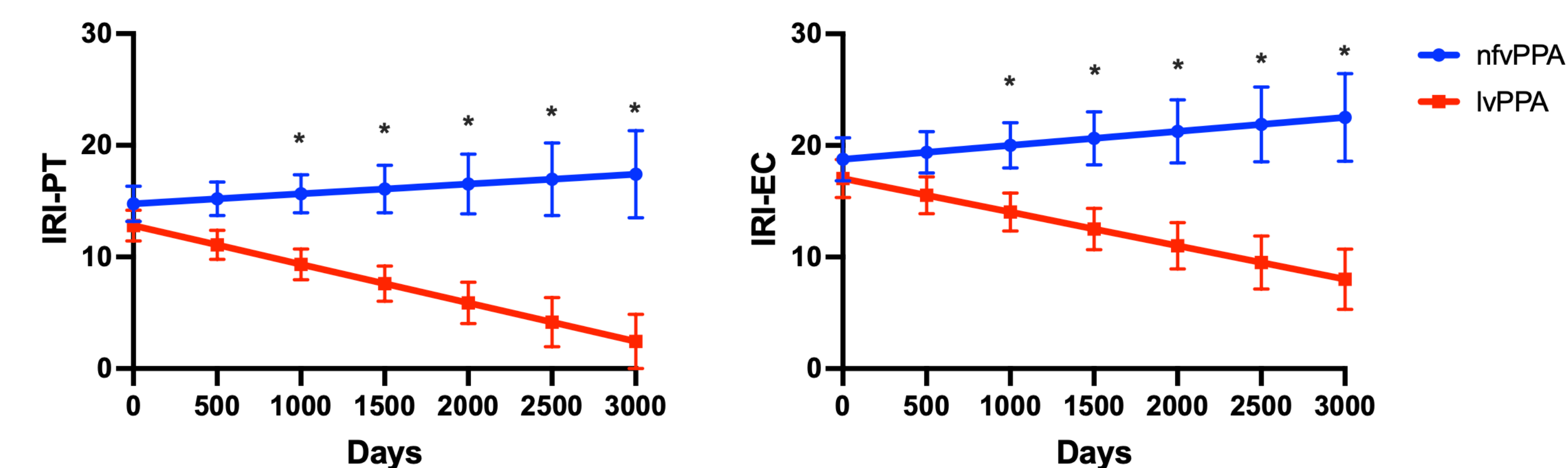
Results

EMPATHY AT BASELINE

Baseline empathy	nfvPPA	lvPPA
Cognitive empathy (IRI-PT)	↓ vs HC	↓ vs HC
Affective empathy (IRI-EC)	Preserved	Preserved

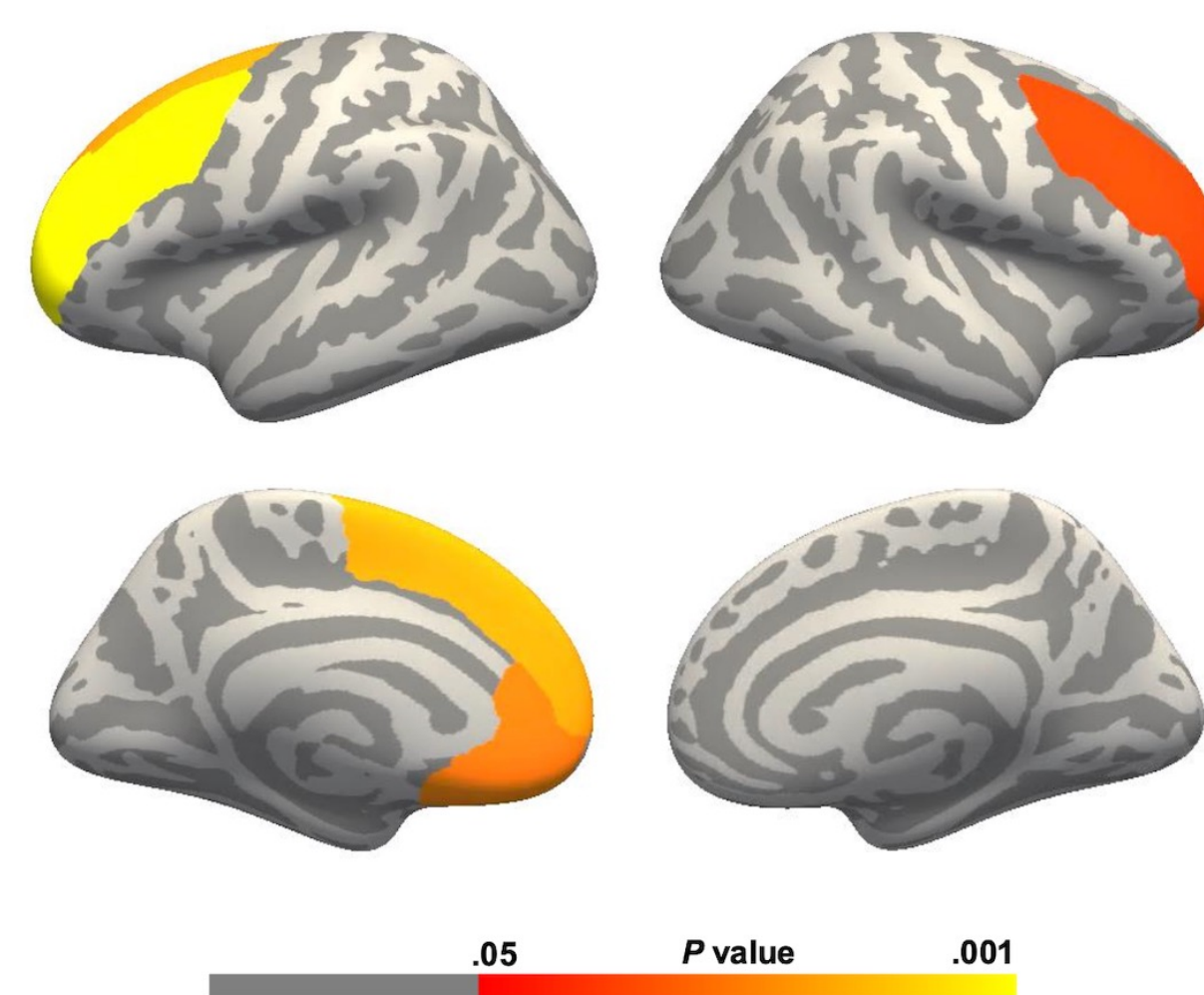
Reduced cognitive empathy but preserved affective empathy at baseline in both variants

EMPATHY TRAJECTORIES OVER TIME



Predicted cognitive (IRI-PT) and affective (IRI-EC) empathy over time in nfvPPA and lvPPA: progressive decline in both cognitive and affective empathy in lvPPA only

NEURAL CORRELATES OF EMPATHY CHANGES IN LVPPA



Cognitive empathy decline in lvPPA associated with thinning of:
Bilateral middle frontal gyrus · Left superior frontal gyrus · Left ventromedial prefrontal cortex

Discussion

- Similar baseline empathy deficits, but divergent empathy trajectories over time

nfvPPA Reduced cognitive empathy at baseline, **stable** over time

lvPPA Reduced cognitive empathy at baseline, **decline** of both components over time

- Frontal cortical thinning** associated with cognitive empathy decline in lvPPA
 - Suggests a critical role of frontal networks in maintaining empathy³

Clinical implications

- Empathy may be a valuable non-language marker of disease progression⁴
- Longitudinal empathy assessment could support differential diagnosis
- Early identification of empathy loss may inform caregiver support⁵

References

- Cordonier, N., & Piguet, O. (2025). Social cognition in the nonfluent and logopenic variants of primary progressive aphasia: A review of variant-specific profiles. *Cortex*, 193, 171–190.
- Van Langenhove, T., Leyton, C. E., Piguet, O., & Hodges, J. R. (2016). Comparing longitudinal behavior changes in the primary progressive aphasia. *Journal of Alzheimer's Disease*, 53(3), 1033–1042.
- Eres, R., Decety, J., Louis, W. R., & Molenberghs, P. (2015). Individual differences in local gray matter density are associated with differences in affective and cognitive empathy. *NeuroImage*, 117, 305–310.
- Piguet, O. (2022). Reflections on language and primary progressive aphasia. *Brain Impairment*, 23(3), 337–343.
- Hazelton, J. L., Irish, M., Hodges, J. R., Piguet, O., & Kumfor, F. (2017). Cognitive and affective empathy disruption in non-fluent primary progressive aphasia syndromes. *Brain Impairment*, 18(1), 117–129.

