Figure S1. Syndromic atrophy patterns in Alzheimer’s disease (AD) and behavioral variant frontotemporal dementia (bvFTD) are mirrored by intrinsic connectivity networks and structural covariance patterns in the healthy brain. (A) AD and bvFTD showed dissociable atrophy patterns, whose cortical maxima (circled) provided seed regions of interest for intrinsic connectivity network (ICN) and structural covariance analyses. (B) ICN mapping experiments in healthy subjects identified two distinct networks, the default mode network anchored by the right angular gyrus and the salience network anchored by right frontoinsula. (C) Healthy subjects further showed gray matter volume covariance patterns that recapitulated results shown in (A) and (B). Results are displayed on representative sections of the Montreal Neurological Institute template brain. In coronal and axial images, the left side of the image corresponds to the left side of the brain. ANG, angular gyrus; FI, frontoinsula; R, right. Adapted from Seeley et al. 2009 (1) with permission from the publisher.
Figure S2. Behavioral variant frontotemporal dementia (bvFTD) and Alzheimer’s disease (AD) feature divergent salience network (SN) and default mode network (DMN) connectivity. Group difference maps illustrate clusters of significantly reduced or increased connectivity for each intrinsic connectivity network. In the SN (A), bvFTD showed distributed connectivity reductions compared to healthy controls (HC) and AD, whereas AD showed increased connectivity in anterior cingulate cortex and ventral striatum compared to HC. In the DMN (B), AD showed connectivity impairments compared to HC and bvFTD, whereas bvFTD showed increased left angular gyrus connectivity, as well as anterior DMN reductions (not shown). Color bars represent \( t \)-scores, and statistical maps are superimposed on the Montreal Neurological Institute template brain. L, left. Adapted from Zhou et al. 2010 (2) with permission from the publisher.

Supplemental References
