1	Mid-Infrared Spectroscopic Analysis of Raw Milk to Predict the Blood Plasma Non-Esterified
2	Fatty Acid Concentration in Dairy Cows
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4	Ben Aernouts,*†‡1 Ines Adriaens,*† José Diaz-Olivares,*† Wouter Saeys,† Päivi Mäntysaari,§
5	Tuomo Kokkonen,# Terhi Mehtiö,§ Sari Kajava,□ Paula Lidauer,§ Martin H. Lidauer,§ Matti
6	Pastell‡
7	
8	*KU Leuven, Department of Biosystems, Biosystems Technology Cluster, Campus Geel,
9	Kleinhoefstraat 4, 2440 Geel, Belgium
10	†KU Leuven, Department of Biosystems, Mechatronics, Biostatistics and Sensors division,
11	Kasteelpark Arenberg 30, 3001 Leuven, Belgium
12	‡Natural Resources Institute of Finland (Luke), Maarintie 6, 02150 Espoo, Finland
13	Natural Resources Institute of Finland (Luke), Tietotie 4, 31600 Jokioinen, Finland
14	#University of Helsinki, Department of Agricultural Sciences, Koetilantie 5, 00014 Helsinki,
15	Finland
16	Natural Resources Institute of Finland (Luke), Halolantie 31 A, 71750 Maaninka, Finland
17	
18	<sup>1</sup> Corresponding author: Ben Aernouts, KU Leuven, Department of Biosystems, Biosystems
19	Technology Cluster, Campus Geel, Kleinhoefstraat 4, 2440 Geel, Belgium, +32 (0)14 72 13 64,
20	ben.aernouts@kuleuven.be
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22	ABSTRACT
23	In high yielding dairy cattle, severe postpartum negative energy status is often associated with
24	metabolic and infectious disorders that negatively affect production, fertility and welfare.
25	Mobilization of adipose tissue associated with a negative energy status is reflected through an

increased level of non-esterified fatty acids (NEFA) in the blood plasma. Earlier, identification of a 26 27 negative energy status through the detection of increased blood plasma NEFA concentration 28 required laborious and stressful blood sampling. More recently there have been attempts to predict 29 blood NEFA concentration from milk samples. This study aimed to develop and validate a model to 30 predict the blood plasma NEFA concentration using milk mid-infrared (MIR) spectra that are 31 routinely measured in the context of milk recording. To this end, blood plasma and milk samples 32 were collected in weeks 2, 3 and 20 post-partum for 192 lactations in 3 different herds. The blood 33 plasma samples were taken in the morning, while representative milk samples were collected during 34 the morning and evening milk session on the same day. To predict the blood plasma NEFA 35 concentration from the milk MIR spectra, partial least squares regression models were trained on 36 part of the observations from the first herd. The models were then thoroughly validated on all other 37 observations of the first herd and on the observations of the two independent herds to explore their 38 robustness and wide applicability. The final model can accurately predict blood plasma NEFA 39 concentrations below 0.6 mmol/L with a root mean square error of prediction (RMSE) of less than 40 0.143 mmol/L. However, for blood plasma with more than 1.2 mmol/L NEFA, the model clearly underestimates the true level. Additionally, it was found that morning blood plasma NEFA levels 41 42 were predicted with a significantly higher accuracy (p = 0.009) using MIR spectra of evening milk 43 samples compared to morning samples, with RMSEP values of respectively 0.182 and 0.197 44 mmol/L and  $R^2$  values of 0.613 and 0.502. These results suggest a time delay between variations in 45 blood plasma NEFA and related milk biomarkers. Based on the MIR spectra of evening milk 46 samples, cows at risk for a negative energy status, indicated with detrimental morning blood plasma 47 NEFA levels (> 0.6 mmol/L), could be identified with a sensitivity and specificity of respectively 48 0.831 and 0.800. As this model can be applied to millions of historical and future milk MIR spectra, 49 it opens opportunities for regular metabolic screening and improved resilience phenotyping.

50 **Key words:** milk mid-infrared spectroscopy, blood plasma non-esterified fatty acid 51 concentration, negative energy status, milk biomarker

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### **INTRODUCTION**

The transition from pregnancy to lactation in high-yielding dairy cows is typically accompanied by a negative energy status (**ES**) in which the energy requirement exceeds the energy input from feed. As severe negative **ES** increases the susceptibility to various health and fertility problems (Leblanc, 2010; Ospina et al., 2010a), the duration and degree of negative **ES** should be limited through preventive actions in combination with individual monitoring and imperative treatment.

59 To compensate for the energy deficit and maintain high milk production, adipose tissue is 60 mobilized and non-esterified fatty acids (NEFA) are released in the blood. Hence, a blood plasma NEFA concentration above 0.6 mmol/L is generally used as an indicator for negative ES in dairy 61 62 cattle (Ospina et al., 2010b). These high concentrations of circulating NEFA have a detrimental 63 effect on the oocyte quality and the immune response of dairy cows (Leroy et al., 2005; Scalia et al., 64 2006). In the liver, part of the NEFA are oxidized completely to deliver energy or incompletely to produce ketone bodies (Adewuyi et al., 2005). Another portion of the NEFA is esterified to 65 66 triglycerides and either stored in the liver or transported as lipoproteins to e.g. the alveolar epithelial cells of the udder tissue to synthetize milk fat. In this way, fatty acids (FA) and ketone bodies 67 68 derived from the NEFA end up in the produced milk. Previous studies have demonstrated the use of 69 milk biomarkers for monitoring negative ES in individual cows, e.g. through the measurement of 70 certain FA (Van Haelst et al., 2008; Jorjong et al., 2014; Dórea et al., 2017), ketone bodies 71 (Enjalbert et al., 2010), citrate and many more (Bjerre-Harpøth et al., 2012). In contrast to taking 72 blood samples, milk sampling requires less labor and can be done without distressing the animals. 73 Nevertheless, the reference techniques to measure these milk biomarkers are typically labor-74 intensive and costly (Jorjong et al., 2014).

75 A relatively straightforward and cost-efficient technique for milk analysis is mid-infrared 76 (MIR) spectroscopy. As the covalent bonds of molecules in milk absorb MIR radiation at very 77 specific wavenumbers, the concentrations of these milk components can be derived from the MIR 78 absorbance spectra. Typically, multivariate linear models are trained to predict the milk constituents 79 from the acquired spectra (De Marchi et al., 2014). Already for decades, this technique is accepted 80 as the reference for accurate and routinely characterization of the main milk components in the 81 context of milk recording (ISO, 2013; ICAR, 2019). Since the commercial introduction of Fourier-82 transform MIR spectrometers for milk analysis, milk MIR spectra can be obtained with a higher 83 accuracy and repeatability. This opens opportunities for measuring minor milk components and 84 milk biomarkers such as FA profiles (Rutten et al., 2009; Afseth et al., 2010; Soyeurt et al., 2011), 85 protein composition (Franzoi et al., 2019), minerals (Soyeurt et al., 2009), ketone bodies and citrate (Grelet et al., 2016). 86

87 Recently, Benedet et al. (2019), Grelet et al. (2019) and Luke et al. (2019) developed models to 88 predict the blood plasma NEFA concentrations from milk MIR spectra of individual dairy cows. 89 However, the prediction performance of Grelet's model was poor ( $R^2 = 0.39$ ), likely because it was 90 built using a limited number (n = 234) of calibration samples (Grelet et al., 2019). Benedet's model 91 performed better ( $R^2 = 0.52$ ), however, like Grelet's model, it was not validated for a completely 92 independent herd (Benedet et al., 2019; Grelet et al., 2019). Accordingly, the reported results might 93 be overoptimistic compared to applying the model on the data of a new herd where the cows are 94 managed differently. This was clearly illustrated by Luke et al. (2019) as the determination 95 coefficient  $(R^2)$  of their model dropped from 0.61 for a randomly selected validation set, covering 96 the same herds as the ones included in the calibration set, to 0.45 for a completely independent herd. 97 We hypothesized that a better prediction performance can be obtained through increasing the 98 number of calibration samples and applying a very strict timing in the sampling of blood and milk samples relative to the diurnal pattern and the feeding schedule of the cows (Quiroz-Rocha et al., 99

100 2010). To test this hypothesis, a high number of samples was collected following a strict protocol 101 for blood and milk sample collection to obtain high quality data for training the prediction models. 102 Additionally, it is investigated whether MIR spectra of morning or evening milk samples result in a 103 better prediction of the NEFA concentration of the respective blood samples taken in the morning 104 of that day. Finally, the performance of the prediction models is evaluated extensively on a 105 completely independent validation set.

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### MATERIALS AND METHODS

108 Experimental Setup

109 The experimental protocol was approved by the Finnish Animal Experiment Board 110 (ESAVI/5688/04.10.07/2013) and applied on 3 experimental herds in Finland: Luke Jokioinen (herd A), University of Helsinki in Viikki (herd B) and Luke Kuopio (herd C). All cows in these herds 111 112 that calved for the first time in the period between September 2013 and October 2016 were included 113 in the study, resulting in a total of 143 Nordic Red dairy cows from which 103 were in herd A, 24 in 114 herd B and 16 in herd C. For 49 of these 143 cows, also the second lactation was included in the 115 study period, thus resulting in a total of 192 lactations. A detailed description on the housing 116 conditions, ration, feeding frequency and milking conditions and frequency during the experiment is 117 given by Mäntysaari et al. (2019).

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### 119 Data Collection

For each lactation, blood samples were taken from the coccygeal vein within one hour after the morning milking session, on two non-consecutive days in week 2 and in week 3 after calving, and once in week 20. This resulted in a total of 5 blood samples per lactation. Handling of the lactating cows prior to blood-sampling was minimized to reduce its effect on the blood plasma NEFA concentrations (Leroy et al., 2011). Blood was collected in 10 mL EDTA tubes and stored in ice

until centrifuged at -4°C for 15 min at 2,000  $\times$  g. Plasma samples were frozen and stored at -20°C 125 126 for later analysis of NEFA at the university of Helsinki (Salin et al., 2012). An enzymatic 127 colorimetric acyl-CoA synthetase (ACS)-acyl-CoA oxidase (ACOD) method [NEFA-HR(2) kit, 128 Wako Chemicals GmbH, Neuss, Germany] was used according to the manufacturer's instructions to 129 determine the blood plasma NEFA concentrations, further referred to as 'blood NEFA'. Intra- and 130 interassay coefficient of variation for blood NEFA determination were 1.61 and 3.53% for low 131 NEFA concentration (0.23 mmol/L) and 0.77 and 2.91% for high NEFA concentration (1.24 132 mmol/L).

133 Representative milk samples (± 30 mL) were collected during the morning and evening milking 134 sessions on the same days as the blood collection, providing a total of 10 milk samples per lactation. 135 The milk samples were stored at  $4^{\circ}$ C using a preservative (± 0.3 mg bronopol per ml milk, Broad 136 Spectrum Microtabs II, D and F Control Systems Inc., Dublin, CA). The MIR analyses (MilkoScan 137 FT6000 spectrometer, Foss, Hillerød, Denmark) were carried out by the Valio Ltd. milk laboratory 138 (Seinäjoki, Finland) according to ISO 9622:2013 (ISO, 2013). The MIR spectrum of each milk 139 sample consisted of 1060 values, representing the infrared light transmittance through 50  $\mu$ m of sample between wavenumbers 5010.2 and 925.7 cm<sup>-1</sup> with a resolution of 4 cm<sup>-1</sup>. The MIR spectra 140 141 were standardized following the procedure developed by Grelet et al. (2015). Because of data 142 storage problems, the MIR spectra of 152 morning milk samples and 183 evening milk samples got 143 lost. The resulting final dataset therefore included 808 and 777 MIR spectra for respectively 144 morning and evening milk samples (Table 1).

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### 146 Prediction of the Blood Plasma NEFA Concentrations from Milk MIR Spectra

The MIR spectra and NEFA concentrations were imported into R version 3.4.3 (R Core Team, 2017). Only the spectral regions from 2977 to 2768 cm<sup>-1</sup>, 1800 to 1684 cm<sup>-1</sup> and 1607 to 926 cm<sup>-1</sup> were used in the analysis. Moreover, the signal-to-noise ratio in the spectral regions between 3660 and 2977 cm<sup>-1</sup>, and between 1684 and 1607 cm<sup>-1</sup>, was considered too low due to substantial MIR absorption by the water molecules. The spectral regions above 3660 cm<sup>-1</sup> and between 2768 and 1800 cm<sup>-1</sup> were deleted because they do not contain significant spectral information on relevant milk components (Aernouts et al., 2011; Grelet et al., 2019). A principal component analysis (**PCA**) with maximum 20 principal components was used to identify potential outlier spectra. When both the *Q* residuals and the Hotelling  $T^2$  statistic were above their 99% confidence limits, the spectrum was removed from the analysis (Bro and Smilde, 2014).

157 As blood samples were only taken once per cow per sampling day, while 2 milk samples were 158 collected for respectively the morning and evening milking session of that day and cow, the number 159 of blood NEFA analyses was half of the amount of milk MIR spectra. Accordingly, the same blood 160 NEFA concentration was assigned to both the morning and the evening milk MIR spectrum of the 161 respective cow and day. The combination of a morning milk MIR spectrum together with the 162 respective blood NEFA concentration is further referred to as a morning observation, while the 163 combination of an evening milk MIR spectrum together with the respective blood NEFA 164 concentration is further referred to as an evening observation. The morning and evening observation 165 of the same cow and day thus have the same blood NEFA concentration, while they have different 166 milk MIR spectra. Next, about 60% of the morning and evening observations of herd A were 167 allocated to the calibration set, while the remaining 40% of the observations of herd A and all 168 observations of herds B and C were assigned to the validation set (Figure 1, step 1). Moreover, the 169 observations of herd A were split 60/40 by applying the duplex selection method after ordering 170 them on their blood NEFA concentration (Snee, 1977). This procedure assured that both sets had 171 similar descriptive statistics. Observations for the same cow were treated as a block with all of them 172 either in the calibration or validation set to prevent overoptimistic validation results in case of 173 modeling cow-specific effects (Kemps et al., 2010).

174 The spectral pre-processing of the MIR spectra was a combination of (1) a logarithmic spectral 175 transformation (Beer, 1852) or not; (2) a baseline correction, detrending, standard normal variates 176 weighting or multiplicative scatter correction (Geladi et al., 1985; Barnes et al., 1989; Ruckstuhl et al., 2001) or none of those; (3) a first or second order Savitzky-Golay derivative with a second order 177 178 polynomial filter and 10 different spectral window lengths (Savitzky and Golay, 1964) or no 179 derivative and (4) mean centering. This resulted in 210 different combinations, as presented in 180 Figure 1 (step 2) and described in detail in Aernouts et al. (2011). For each of these 210 181 combinations, a partial least squares regression (PLSR) model with up to 20 latent variables was 182 built to predict the blood plasma NEFA concentrations, further referred to as 'predicted blood 183 NEFA', from the pre-processed MIR spectra (Martens and Næs, 1987). A group-wise crossvalidation (CV) with 20 groups, each containing spectra of 3 to 4 cows, was performed on the 184 185 observations of the calibration set to obtain the root mean square error of cross-validation 186 (RMSECV). We selected the smallest number of latent variables for which the PLSR model was 187 not significantly worse compared to the same model with the number of latent variables resulting in 188 the lowest RMSECV. The statistical comparison in this procedure was based on a one-sided paired 189 T-test ( $\alpha = 0.05$ ) applied on the absolute residuals of the cross-validated observations (Cederkvist et 190 al., 2005). A similar approach was followed to select the best spectral pre-processing combination. 191 Moreover, the PLSR models resulting from the 210 combinations were ranked by increasing 192 RMSECV, and the one with the smallest number of latent variables and not being significantly 193 worse compared to the model with the lowest RMSECV was selected. Again, a one-sided paired T-194 test ( $\alpha = 0.05$ ) on the absolute residuals of the cross-validated observations was used to statistically 195 compare the models (Cederkvist et al., 2005; Aernouts et al., 2011).

The selected pre-processing combination was applied on the MIR spectra to be used as an input for 4 different variable selection methods (Figure 1, step 3): variable importance in projection, jackknife, reversed interval PLSR and forward interval PLSR (Norgaard et al., 2000; Westad and 199 Martens, 2000; Chong and Jun, 2005). Each of these 4 methods resulted in a set of most relevant 200 wavenumbers for which a PLSR model with an optimal number of latent variables was built as 201 described earlier. The performances of these 4 PLSR models were compared mutually and with the 202 model that uses all wavenumbers. Finally, the set of wavenumbers related to the most parsimonious 203 model whose prediction performance was not significantly worse (one-sided paired *T*-test,  $\alpha = 0.05$ ) 204 than that of the model with the lowest RMSECV was selected.

205 The final prediction model (Figure 1, step 4), together with the selected combination of spectral 206 pre-processing techniques and the selected set of wavenumbers, was used to predict the NEFA 207 concentrations of the observations in the validation set. Accordingly, an error or residual could be 208 calculated for each observation of the validation set. Based on these residuals, the root mean square 209 error of prediction (**RMSEP**), further referred to as the 'prediction error', was calculated for the 210 entire validation set. Because this validation set is very diverse, containing morning and evening 211 observations from 3 different herds with blood NEFA concentrations ranging from very low to very 212 high, the RMSEP was also calculated for different subsets of the validation set, allowing for a better 213 understanding of the prediction performance of the model under different situations. These subsets 214 were defined based on a combination of the following features:

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• Milking time: only morning observations, only evening observations or both morning and evening observations;

• Herd: observations from herd A, herd B, herd C or for the 3 herds together;

NEFA range: observations with blood NEFA concentrations in the low (0 – 0.6 mmol/L),
middle (0.6 – 1.2 mmol/L), high (1.2 – 2.0 mmol/L) or complete range (0 – 2 mmol/L).
These ranges were defined like this because 0.6 mmol/L is generally considered as critical
threshold (Ospina et al., 2010b) and because the blood NEFA concentration was always
underestimated for true concentrations above 1.2 mmol/L.

223 The procedure described above (Figure 1) was initially followed to develop and validate a PLSR 224 model that predicts the blood NEFA independent of the moment of milk sampling by training it on 225 all the observations – both morning and evening – of the calibration set. This model is further 226 referred to as the 'full model'. To evaluate the effect of restricting the calibration set to only 227 morning or evening observations, 2 new models were trained following the same procedure as 228 elaborated above, but with respectively only the morning or the evening observations of the 229 calibration set for training the respective PLSR models. These models are further referred to as 230 respectively the 'morning model' and the 'evening model'. All 3 models (full, morning and 231 evening) were validated on the same observations – both morning and evening – of the validation 232 set to allow for an objective comparison of the prediction performance.

233 The prediction performances of the 3 models were compared by applying a repeated-measures 234 ANOVA on the absolute residuals for all the observations of the validation set. Moreover, 'model' 235 was treated as a fixed effect, while 'sample' was specified as a random effect in the two-way 236 ANOVA (Cederkvist et al., 2005). When the ANOVA test pointed out a significant effect ( $\alpha = 0.05$ ) 237 of the model, then the performance of the 3 models was compared bilateral using a Tukey HSD 238 multiple comparison ( $\alpha = 0.05$ ). The 3 models were compared for all the observations in the 239 validation set, as well as the observations in the different subsets of the validation set. The model 240 (full, morning or evening) which was not significantly different from the best model for most of the 241 subsets of the validation set was identified as the most robust. This model was further evaluated on 242 its ability to identify detrimental blood plasma NEFA concentrations (next section). Finally, a 4-243 way ANOVA analysis, with the model, the milking time, the herd, the NEFA range and all possible 244 interactions as fixed factors, was applied on the absolute residuals for the observations of the entire 245 validation set and subsets of the validation set. This analysis was not paired, so the samples could 246 not be taken as a random factor. If one of the interactions was significant ( $\alpha = 0.05$ ) then all possible 247 combinations of the factors involved in these interactions were compared bilateral using the Tukey

HSD multiple comparisons. In absence of significant interaction for a factor, the effect of the factors could be interpreted separately. Moreover, if this factor had a significant ( $\alpha = 0.05$ ) influence on the performance, then the different levels within this factor were compared bilateral with the Tukey HSD multiple comparisons.

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## 253 Identify Detrimental Blood Plasma NEFA Concentrations from Milk MIR Spectra

254 To evaluate whether the predicted blood NEFA concentrations can be used to identify 255 detrimental blood NEFA levels (> 0.6 mmol/L), receiver operating characteristic (**ROC**) analyses 256 were performed (Ospina et al., 2010b; Jorjong et al., 2014; Dórea et al., 2017). The ROC curves 257 plot the true positive rate or sensitivity versus the true negative rate (= 1 -specificity) for different 258 thresholds applied on the predicted blood NEFA concentration. Only the most robust model, the one 259 that performed best according to the procedure described in the previous section, was subjected to 260 this ROC analysis. A separate analysis was done for the morning and evening observations of the 261 validation set. The R package pROC version 1.13.0 (Robin et al., 2011) was used to calculate the 262 ROC curves, to apply binormal smoothing to the ROC curves, to calculate the 95% confidence 263 intervals (CI) of sensitivities, specificities and area under the curve (AUC) of the smoothed ROC 264 curves and to statistically compare the smoothed ROC curves. The CI were calculated with 100 000 265 bootstrap replicates to obtain a fair estimate of the second significant digit (Fawcett, 2006). 266 Statistical two-sided pairwise comparisons ( $\alpha = 0.05$ ) between ROC were done based on the area 267 under the curve (AUC) and based on the sensitivities at given specificities from 0 to 1 in steps of 268 0.01, both using the bootstrap method with 100,000 replicates.

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#### RESULTS

271 Data Exploration

272 The MIR transmittance spectra of the 1585 milk samples included in this study are presented in 273 the top part of Figure 2 as the black solid and dotted lines. Lipid absorption peaks can clearly be observed as dips in the MIR transmittance spectra around 2928 & 2858 cm<sup>-1</sup>, 1745 cm<sup>-1</sup>, 1455 cm<sup>-1</sup> 274 and 1157 & 1078 cm<sup>-1</sup>, corresponding to respectively the C-H (alkyl) stretch, C=O (carbonyl) 275 276 stretch, C-H bend and C-O stretch vibrations (Fox and McSweeney, 2006; De Marchi et al., 2009). 277 The Hotelling's  $T^2$  and Q-statistics of the PCA model with 7 selected principal components and 278 the scores for the first 2 principal components of that model were far beyond the 99% confidence 279 limits for the spectra of sample 1445 (herd B, evening milking) and sample 1546 (herd C, morning 280 milking), as shown in Appendix A1. Also, the raw transmittance spectra of these 2 outliers, 281 illustrated with black dotted lines in top part of Figure 2, are clearly different from the other 1583 282 spectra, while the corresponding blood NEFA concentrations are not outlying. This suggests that 283 these 2 samples have erroneous spectral measurements and were therefore removed from the 284 dataset.

285 The reliability, accuracy, and robustness of spectroscopic calibrations are restricted to the range 286 of the constituent of interest and the variation in measurement conditions taken into account during 287 the calibration (Williams and Norris, 2001). The descriptive statistics of the blood NEFA 288 concentrations linked to different subsets of milk MIR transmittance spectra are presented in Table 289 2. The entire calibration and validation set contain respectively 790 and 793 observations and they 290 have a very similar mean, standard deviation and range for the blood NEFA. This table also 291 illustrates the larger variability and range of the blood NEFA levels in herd A compared to herd B 292 and C. Likely, this is the result of the higher number of blood samples being collected and analyzed 293 (n = 658) and cows being monitored (n = 103) in herd A. Additionally, this might also be caused by 294 differences in the genetic background and the management between the herds. The descriptive 295 statistics for morning and evening samples in a same herd(s) are similar, but not exactly the same. This is because for some of the blood plasma samples only the respective morning or evening milk MIR spectra were collected and not both (Table 1).

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## 299 Calibration on MIR Spectra of Morning and Evening Milk Samples (Full Model)

The 790 morning and evening observations of the calibration set were used to build a PLSR model (= full model) that relates the blood NEFA concentrations to the MIR transmittance spectra. The best performance was obtained when the MIR transmittance spectra were pre-processed using a  $2^{nd}$  order Savitzky-Golay derivative with a window length of 7 wavenumber variables, followed by mean-centering. After this pre-processing step, the reversed interval PLSR method selected 117 wavenumbers that were most informative and resulted in the best model. The most informative regions of the MIR spectra are indicated as the grey regions in Figure 2.

307 Figure 3a shows the RMSECV and the RMSEP as a function of the number of latent variables 308 included in the full PLSR model after applying the best pre-processing and selecting the best 309 wavenumbers. A separate RMSEP is provided for the morning and evening observations of the 310 validation set, respectively indicated with RMSEP<sub>M</sub> and RMSEP<sub>E</sub>. The PLSR model with 6 latent 311 variables, indicated with the green triangle, was finally selected. This model complexity resulted in 312 nearly the minimum RMSEP<sub>M</sub> and RMSEP<sub>E</sub>, confirming the right choice of number of latent 313 variables based on the cross-validation and illustrating the robustness of the full model. Figure 3a 314 clearly shows that the RMSEP<sub>E</sub> is smaller than the  $RMSEP_M$  and that the latter is smaller than the 315 RMSECV.

The regression coefficients for the full model with 6 latent variables are presented with a green solid line in the bottom part of Figure 2. The regression coefficients follow a relatively smooth curve in function of the wavenumbers, which indicates that the PLSR model is not overfitting the calibration data. High absolute values for the regression coefficients were obtained around 2950 cm<sup>-1</sup> 1, 1750 cm<sup>-1</sup> and 1150 - 990 cm<sup>-1</sup>, corresponding to important fat absorption bands: respectively the fat B, fat A and C-O stretch vibrations (Afseth et al., 2010). As the PLSR model uses the  $2^{nd}$ derivative of the MIR spectra, some of the peaks in the regression coefficients are located at the flanks rather than the center of typical absorption peaks.

324 Figure 3b presents the predicted versus measured scatter plot for the full model with 6 latent 325 variables. This figure illustrates that the prediction error of the full model varies a lot with the 326 predicted blood NEFA concentration (y-axis), both for the cross-validated observations of the 327 calibration set as well as for the morning and evening observations of the independent validation 328 set. Additionally, the blood NEFA concentration is generally overestimated for true values (x-axis) 329 between 0.2 and 0.55 mmol/L, while it is always underestimated for true concentrations above 1.2 330 mmol/L. The latter could explain why the RMSEP<sub>M</sub> and RMSEP<sub>E</sub> are lower than the RMSECV, as 331 the validation set contains less observations with a very high blood NEFA concentration (Table 2). 332 In Figure 3b, the predictions based on the evening observations of the validation set (blue crosses) 333 are closer to the identity line compared to the ones based on the morning observations of the same set (red circles). This is the reason why the  $RMSEP_E$  values are smaller than the  $RMSEP_M$  values in 334 335 Figure 3a and it suggests that the blood NEFA concentration in the morning can be predicted more 336 accurately using MIR spectra of milk samples taken in the evening of that day rather than morning 337 milk samples.

338 The prediction errors of the full model for different subsets of the validation set are 339 summarized in Table 3. The heteroscedastic prediction error of the full model is clearly shown by 340 the increasing RMSEP with increasing blood NEFA range (different horizontal sections of Table 3). 341 Moreover, for the observations in the low blood NEFA range (0 - 0.6 mmol/L), the RMSEP values 342 of the full model are all between 0.062 and 0.143 mmol/L, while for the middle blood NEFA range 343 (0.6 - 1.2 mmol/L), the RMSEP values vary between 0.198 and 0.290 mmol/L. For the high blood 344 NEFA range (1.2 - 2 mmol/L), the RMSEP values of the full model are between 0.620 and 0.793 mmol/L. Within the low, middle and high blood NEFA range, the RMSEP values do not differ 345

much between herds, illustrating that the model can be used for new herds as well (cfr. herd B and C). Compared to the morning observations of the validation set, the RMSEP values for evening observations are in most cases slightly higher for the low blood NEFA range, while they are clearly lower for the complete, middle and high blood NEFA ranges. The observations based on the RMSEP values described in this paragraph are similar to the ones based on the RMSECV values obtained from the cross-validation of the calibration samples (results not shown), confirming the robustness of the full model.

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## 354 Calibration on MIR Spectra of Morning or Evening Milk Samples

355 The PLSR model trained on the morning observations of the calibration set (= morning model), 356 as well as the one trained on the evening observations (= evening model) provided the best results after applying a 2<sup>nd</sup> order Savitzky-Golay derivative on the MIR transmittance spectra, followed by 357 358 mean-centering. The optimal window length for the derivative was respectively 7 and 13 359 wavenumber variables. For both models, reversed interval PLSR proved to be the best variable 360 selection method, resulting in respectively 92 and 126 retained wavenumbers (grey regions in 361 Figure 2). Finally, 3 and 5 latent variables were selected for respectively the morning and evening 362 PLSR model. The regression coefficients for the final morning and evening model are presented as 363 respectively the red dashed and blue dotted lines in the bottom part of Figure 2. Both models have 364 high absolute values for the regression coefficients in the regions near important MIR fat absorption 365 bands, similar to the regression coefficients of the full model.

Analogues to the RMSEP values of the full model, the prediction errors of the morning and evening model for different subsets of the validation set are also provided in Table 3. The prediction performances of the three models (full, morning and evening) are compared for each subset of the validation set. Within each column (herd x milking time) and a specified blood NEFA range (complete, low, middle or high), RMSEP values with different subscripts indicate significant ( $\alpha$  = 371 0.05) differences between the 3 models. Most subsets of herd C and some subsets involving herd B 372 indicated no significant difference between the models. For those subsets, it was found that the 373 statistical tests lacked power ( $\beta > 0.4$ ) because of a too low number of samples. Therefore, the 374 further discussion of the model comparison was only based on the tests with sufficient power ( $\beta <$ 375 0.2), which all happened to indicate a statistical effect of the model. The first column of Table 3 376 presents the RMSEP values for all the observations of the validation set in each of the 4 specified 377 blood NEFA ranges.

In the complete range, the full model performs significantly better than the morning and the evening model, while there is no significant difference between the morning and the evening model. The full and evening models are not significantly different for the observations of the validation set in the low blood NEFA range, while they are both significantly better compared to the morning model. On the other hand, for the observations in the middle and high range, the morning model is significantly better than the full model, while the latter is better than the evening model.

384 For the low, middle and high blood NEFA range, the same trends are reflected in the different 385 subsets of the validation set where the observations are split up per herd and/or milking time (Table 386 3, columns 2 to 9). For the complete blood NEFA range, the full model is significantly better 387 compared to the evening model for all validation subsets with only morning observations, while it is 388 significantly better compared to the morning model for all the subsets with evening observations. 389 Additionally, it was found that the blood NEFA concentrations predicted with the morning model 390 were on average 0.042 mmol/L higher compared to the predictions by the full model applied on the 391 same milk MIR spectra, while the evening model resulted in blood NEFA predictions which were 392 on average 0.048 mmol/L lower compared to the predictions by the full model. Given the fact that 393 low blood NEFA concentrations are generally overestimated by the models, while the high blood 394 NEFA concentrations are underestimated (Figure 3b), the morning model results in lower predictions in the high NEFA range, while the evening model results in lower prediction errors for 395

the low NEFA range. This is also clearly reflected by the models' RMSEP values for the different blood NEFA ranges. As the models mainly rely on the absorption by fat-related covalent bonds (Figure 2), the offset between the models probably results from the difference in average fat content between the morning milk samples (4.3%) and the evening milk samples (5.1%) involved in the training. Taken all this into account, it was concluded that the full model is the most robust of the 3 models and is therefore further explored in the ROC analysis in the next section.

402 Apart from the comparisons between the full, the morning and the evening model for each of 403 the subsets of the validation set, a single 4-way ANOVA analysis was performed on the residuals of 404 the observations in these different subsets. As all but one of the two-way interactions between the 405 ANOVA factors were significant, the effect of the individual factors could not interpret 406 independently from the other factors involved in the interaction(s). Accordingly, all combinations of 407 the factors involved in these interactions were compared bilateral using a Tukey HSD multiple 408 comparison. This analysis mainly points out that the prediction errors for the middle and high blood 409 NEFA range are significantly higher compared to the complete and low range, but that the absolute 410 levels of these errors depend on the model, the farm and the milking time.

411 Table 3 can also be used to study the difference in prediction error when 1 of the 3 models is 412 applied on the different herds, or on either morning or evening observations. The RMSEP values for 413 the 3 herds, except for the evening observations of herd C, are very close to each other for the same 414 blood NEFA range (low, middle or high) for either morning or evening observations. This 415 illustrates that the models can be easily transferred to new herds. The RMSEP values for the subsets 416 of evening observations in herd C should be interpreted with caution as each of them is based on a 417 low number of observations ( $n \le 13$ , Table 1). Comparing the prediction errors between morning 418 and evening observations for respective subsets shows that the prediction errors for the morning 419 observations are generally higher, especially for blood NEFA concentrations above 0.6 mmol/L (middle and high ranges). For the full model, a one-sided paired T-test applied on all the 420

observations of the validation set pointed out that the blood NEFA predictions are more accurate (p = 0.009) if the model is applied on evening milk MIR spectra. This confirms that the blood NEFA concentration in the morning is predicted more accurately from milk MIR spectra taken during the evening milk session of the same day.

The observations based on the RMSEP values described in this section are similar to the ones based on the RMSECV values obtained from the cross-validation of the calibration samples (results not shown), confirming the robustness of the models and the validity of this analysis.

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### 429 Receiver Operating Characteristic Analysis of the Full Model

430 The smoothed ROC curves for the identification of detrimental blood NEFA concentrations 431 based on the predictions of the full model are shown in Figure 4. Separate smoothed ROC curves 432 are provided for the morning (red) and the evening observations (blue) of the validation set. The 433 AUC of the smoothed ROC curves for the morning and evening observations are respectively 0.860 434 (95% CI: 0.815 – 0.901) and 0.898 (95% CI: 0.860 – 0.930). Accordingly, the AUC for the morning 435 observations is significantly lower (p < 0.001) compared to the evening observations. Moreover, 436 compared to the evening observations, the sensitivities for the morning observations are 437 significantly lower in the range of specificities from 0.48 to 0.97. The average sensitivities are 438 0.752 and 0.573 for the morning observations and 0.831 and 0.690 for the evening observations 439 (Figure 4) at specificities of respectively 0.8 and 0.9. Thus, cows with a detrimental blood NEFA 440 concentration, as determined from their morning blood samples, can be detected more accurately 441 using the MIR spectra of their milk collected during the evening milking session of that day. 442 Moreover, it can identify 83 out of 100 cows with detrimental blood NEFA concentrations, while 443 20 out of 100 healthy cows will be wrongly classified as being at risk. Appendix A2 provides the 444 mean values of the sensitivities and the 95% CI of the sensitivities and specificities at given specificities from 0.7 to 0.95 (in steps of 0.05) for the morning and the evening observations of thevalidation set.

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### DISCUSSION

### 449 Morning and Evening Milk Samples

450 The validation of the PLSR models clearly indicates that, compared to morning milk, the MIR 451 spectra of evening milk support more accurate predictions of the NEFA levels in blood taken in the 452 morning of that day (Table 3, Figure 3 and Figure 4). Several studies have shown that blood NEFA 453 follows a diurnal pattern with elevated levels from about 06:00 to 10:00 h in the morning, 454 associated with a reduced energy intake during the night (Blum et al., 2000; Meier et al., 2010; 455 Quiroz-Rocha et al., 2010). For this reason, extra attention was paid to the consistent timing of the 456 blood and milk sampling. As the morning milking session was around 06:30 h, the majority of the 457 period of expected elevated blood NEFA concentrations was after the morning milking session, thus 458 mainly overlapping with the period in which the evening milk was produced. This likely introduced 459 a time delay between the moment of elevated blood NEFA levels and the moment at which a 460 change in the concentration of related milk biomarkers could be noticed, which is even further 461 delayed by the metabolic processes in the liver that transfer NEFA into milk precursors and 462 constituents (e.g. lipoproteins and ketone bodies). this delay would explain why the blood NEFA 463 concentrations were predicted more accurately from MIR spectra of evening milk compared to 464 morning milk as the blood samples were taken within 1 hour after the morning milking session, 465 right in the middle of the time window of expected elevated blood NEFA levels. This hypothesis is 466 also supported by the slightly higher NEFA levels predicted based on MIR spectra of evening milk 467 samples compared to those based on the paired morning milk samples, especially for cows with 468 detrimental blood NEFA concentrations (Figure 3b). It might be interesting for future research to 469 study these dynamics more in detail by measuring the blood NEFA level at a frequent interval and investigating the link with the MIR spectra of morning and evening milk samples on that day andthe days after.

472 The fact that the morning blood NEFA concentration can be predicted more accurately when 473 the full model is applied on MIR spectra of evening milk rather than morning milk suggests that the 474 evening milk samples contain more information on the morning blood NEFA concentration and/or 475 that the morning milk samples are more subject to interfering effects. Nevertheless, training the 476 model on solely evening milk MIR spectra (evening model) did not improve the prediction 477 performance compared to the full model, even not if only MIR spectra of evening milk samples are 478 considered in the validation. Moreover, the performance of the evening model was worse if applied 479 on MIR spectra of morning milk samples. This suggests that including morning milk MIR spectra in 480 the calibration set makes the prediction model more robust for potential interfering parameters that 481 vary independent of the cow's blood NEFA level. One of these interfering effects might be the total 482 fat content in the milk, which is generally higher in evening milk compared to morning milk 483 (Forsbäck et al., 2010). Apart from the results obtained in our study, the full model is probably 484 more robust under practical conditions where farms have varying milking and feeding frequencies.

485

## 486 Prediction of Blood Plasma NEFA Concentration

487 The regression coefficients in Figure 2 show that the PLSR models primarily use information 488 from the fat-related MIR absorption bands. During negative energy status, excessive amounts of 489 NEFA are mobilized from the adipose tissue and part of them is transferred to the milk. These 490 NEFA are particularly rich in long-chain fatty acids (FA), such as C18:1 FA (Jorjong et al., 2014). 491 Dórea et al. (2017) found a nonlinear relation ( $R^2 = 0.42$  and p < 0.001) between the concentrations 492 of NEFA in the blood plasma and C18:1 FA in the milk fat. Moreover, the milk C18:1 FA increased 493 nearly linearly with increasing blood NEFA for blood NEFA levels below 400  $\mu$ Eq/L, while the 494 milk C18:1 FA concentration was practically constant for blood NEFA concentrations above 800 495  $\mu$ Eq/L. This suggests that the C18:1 FA concentration in milk fat saturates when the blood NEFA 496 increases above a certain concentration. On the other hand, Jorjong et al. (2014) suggested a linear 497 relation ( $R^2 = 0.383$ ) between the concentrations of NEFA in the blood plasma and C18:1 *cis*-9 FA in the milk fat. However, their linear function slightly underestimated the milk C18:1 cis-9 FA for 498 499 blood NEFA concentrations between 0.2 and 0.4 mmol/L, while it overestimated the milk C18:1 500 cis-9 FA for blood NEFA levels below 0.1 and above 0.9 mmol/L. Accordingly, the data of Jorjong 501 et al. (2014) confirms the non-linear trend found by Dórea et al. (2017). In our study, the predicted 502 blood NEFA concentrations versus the actual blood NEFA levels (Figure 3b) follows a very similar 503 nonlinear trend as the milk C18:1 FA in the studies of Dórea et al. (2017) and Jorjong et al. (2014). 504 Therefore, it is likely that our PLSR models largely rely on the MIR absorption by C18:1 and 505 related FA in milk. Several researchers already explored MIR spectroscopy to predict the 506 concentration of certain FA in milk, obtaining  $R^2$  values for the prediction of C18:1 FA between 507 0.11 and 0.96 (Rutten et al., 2009; Afseth et al., 2010; Soyeurt et al., 2011). Mäntysaari et al. (2019) 508 used the PLSR models developed by Soyeurt et al. (2011) to predict the milk FA concentrations 509 from milk MIR spectra and accordingly studied the relation between the predicted milk FA and the 510 blood NEFA concentration. It was found that C18:1 cis-9 and the sum of C18:1 FA in milk had the 511 highest correlation (r = 0.73) with blood NEFA, confirming our hypothesis.

512 The predicted versus measured scatterplot in Figure 3b, as well as the RMSEP values in Table 513 3. clearly show that the accuracy of the prediction of the blood NEFA from milk MIR spectra is 514 limited, especially if the blood NEFA concentration is high. The full model results in RMSEP 515 values of 0.197, 0.182 and 0.190 mmol/L when evaluated on respectively morning observations, 516 evening observations or a mixed set of morning and evening observations of the validation set. 517 Taking into account the standard deviations of the blood NEFA concentration for the different sets 518 (Table 2), the  $R^2$  values are respectively 0.502, 0.613 and 0.558. Nevertheless, the RMSEP and  $R^2$ 519 values strongly depend, because of heteroscedasticity, on the proportion of observations with a high blood NEFA concentration in the respective datasets. To account for this non-linear effect, we also explored non-linear models, such as convolutional neural networks, and a logarithmic transformation of the blood NEFA levels before applying PLSR without success. Moreover, using a more balanced calibration set with a similar number of observations with high and low blood NEFA levels through bootstrapping did not improve the performance of the prediction model either (results not shown). Because of the heteroscedasticity of the prediction error, benchmarking our results against earlier studies is challenging and should be done with caution.

527 Dórea et al. (2017) obtained RMSE values of  $169 - 220 \mu Eq/L$  (equivalent to  $\mu mol/L$ ) and  $R^2$ 528 values of 0.080 - 0.457 for the prediction of blood NEFA levels for individual cows from different 529 linear combinations or ratios of milk FA concentrations obtained from GLS analysis. As the descriptive statistics for the blood NEFA are very similar in their dataset and ours (Table 2), it is 530 531 fair to compare the results of these 2 studies. The prediction errors reported by Dórea et al. are very 532 close to the ones obtained in our study. Nevertheless, the performances of their models are only 533 reported for the calibration set and thus might be overoptimistic. Additionally, the approach 534 followed by Dórea et al. requires labor and cost intensive FA isolation and GLS analysis.

Mäntysaari et al. (2019) used a linear combination of C18:1 *cis*-9 and medium chain FA concentrations in milk, derived from evening milk MIR spectra, and lactation stage to predict the morning blood NEFA concentration, obtaining an  $R^2$  of 0.61 and an RMSECV of 0.182 mmol/L. A similar approach using morning milk MIR spectra resulted in an  $R^2$  of 0.52 and an RMSECV of 0.198 mmol/L. Although these results only represent the cross-validation of the model, and thus might be overoptimistic, they are in close agreement with the results obtained for the independent validation in our study.

Recently, Benedet et al. (2019), Grelet et al. (2019) and Luke et al. (2019) published PLSR models that predict the blood NEFA levels directly from the MIR spectra of raw milk samples. The prediction performance of Grelet's model ( $R^2 = 0.39$  and RMSECV = 344 µeq/L) is only based on 545 cross-validation of the calibration set and should thus be confirmed on an external validation set 546 (Grelet et al., 2019). Still, their results are inferior to the ones obtained in our study due to the 547 higher prediction error by Grelet's model in the low blood NEFA range. Moreover, while our full model is relatively accurate (RMSEP  $\leq 0.143$  mmol/L) in this range, Grelet's model generally 548 549 overestimates the low blood NEFA concentrations. In the high blood NEFA range, Grelet's model 550 performs similar to our models, both underestimating the blood NEFA concentration. As a result, 551 the prediction error of Grelet's model is nearly homoscedastic, but worse compared to our model, 552 especially in the low blood NEFA range. Benedet et al. (2019) obtained a PLSR model that 553 performed better, compared to Grelet's model, with an  $R^2$  of 0.52 and a standard error of prediction  $SEP = n\sqrt{RMSEP^2 - bias^2}/(n-1)$  of 0.24 mmol/L for a randomly selected validation set. 554 555 Still, these results are slightly worse compared to the ones obtained in our study. In contrast to our models, Benedet's model only uses wavenumbers between 1450 and 1000 cm<sup>-1</sup> and thus ignores the 556 fat absorption bands at around 2928, 2858 and 1745 cm<sup>-1</sup>. Additionally, it should be taken into 557 account that the model performance typically deteriorates when it is applied on a completely 558 559 independent herd, as illustrated by Luke et al. (2019). Moreover, the  $R^2$  of Luke's model dropped 560 from 0.61 for a randomly selected validation set, covering the same herds as the calibration set, to 561 0.45 for a totally independent herd. The better performance of our full model is likely the result of a 562 higher number of calibration samples (n = 790) in combination with a well-controlled timing and 563 protocol for blood and milk sample collection (Quiroz-Rocha et al., 2010).

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- 565 **R**

## **Receiver Operating Characteristic Analysis**

566 Unlike the regression analysis, in which the RMSE is subject to the effect of heteroscedasticity, 567 the result of the ROC analysis is less dependent on the relative number of observations with a high 568 blood NEFA concentration. Accordingly, these ROC analyses allow for a more objective 569 comparison among different studies. Dórea et al. (2017) obtained their best results to identify cows 570 with detrimental blood NEFA concentrations ( $\geq 600 \ \mu Eq/L$ ) based on the milk C13:0 FA using a 571 threshold of 0.036 g FA per 100 g milk fat. This resulted in an AUC, sensitivity and specificity of 572 respectively 0.90, 0.859 and 0.823. The ROC curve to detect detrimental blood NEFA levels based on milk C18:1 cis-9 FA and reported by Jorjong et al. (2014) had a sensitivity of 0.75 and 0.5 at a 573 574 specificity of respectively 0.79 and 0.935. The full model obtained in our approach and applied on 575 the evening observations results in an AUC of 0.898 and a sensitivity of 0.831 at a specificity of 576 0.8. The same model applied on morning observations has an AUC of 0.860 and a sensitivity of 577 0.752 at a specificity of 0.8 (Appendix A2). Therefore, it can be concluded that our model, which 578 only requires MIR spectral analysis of raw milk, is not inferior compared to more complex 579 techniques that require characterization of certain FA in the milk fat. A similar approach followed 580 by Luke et al. (2019) to identify elevated blood NEFA levels resulted in a AUC values of 0.87 and 581 0.82, sensitivities of 0.73 and 0.25 and specificities of 0.81 and 0.90 for respectively a randomly 582 selected and a completely independent validation set. Thus, our model tends to be slight more 583 robust compared to the one of Luke et al. (2019).

Although the prediction accuracy is not excellent, the developed model can provide valuable information to further improve genetics, nutrition and management of dairy cows. As it can be applied on millions of historical and future milk MIR spectra, this approach can reveal detailed information on the energy status of individual cows, herds and pedigrees. This could potentially result in improved estimations of breeding values and the identification of specific genetic markers for metabolic resilience.

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### CONCLUSIONS

592 In this study, we successfully predicted the blood NEFA level in individual dairy cows from 593 their milk MIR spectra. The best model was obtained after training on MIR spectra of both morning 594 and evening milk samples. The NEFA concentration of blood plasma samples taken in the morning were predicted with a higher accuracy if the model was applied on MIR spectra of evening milk samples. The obtained prediction accuracy is acceptable for low blood NEFA levels, but is unsatisfactory if the blood NEFA concentration is high. Nevertheless, low and intermediate/high blood NEFA levels could be discriminated well to identify 83 out of 100 cows with detrimental blood NEFA levels, while only 20 out of 100 healthy cows are wrongly classified. This opens opportunities for identifying cows at risk of a negative energy status and studying the metabolic resilience of individual cows and pedigrees.

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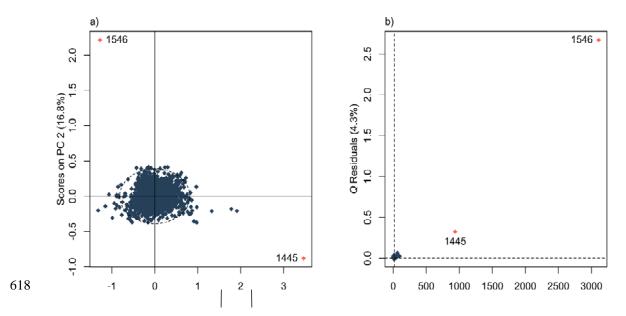
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### **APPENDICES**

Appendix A1 Figures of a) The scores plot of principal component (PC) 1 versus PC2 of the principal component analysis (PCA) on all 1585 mean-centered mid-infrared transmittance spectra. The dashed ellipse represents the 99% confidence limits of the scores on PC1 and PC2. b) The influence plot (Q residual versus Hotelling  $T^2$  statistics) for the PCA model with 7 PC presenting the of the PCA. The dashed lines represent the 99% confidence limits on respectively the 2 statistics. In both figures, each dot represents a different sample spectrum and the red dots (with sample number) indicate potential outlier spectra.



- 619 Appendix A2 Table with the mean values of the sensitivities and the 95% confidence intervals (CI)
- 620 of the sensitivities and specificities at given specificities for the morning and the evening
- 621 observations of the validation set.
- 622

C.a	Morni	ng observ	ations	Evening observations				
Sp	95% CI Sp	Se	95% CI Se	95% CI Sp	Se	95% CI Se		
0.700	0.600 - 0.794	0.850	0.775 - 0.924	0.584 - 0.800	0.902	0.841 - 0.953		
0.750	0.661 - 0.830	0.807	0.725 - 0.890	0.648 - 0.835	0.872	0.803 - 0.932		
0.800	0.724 - 0.866	0.752	0.661 - 0.844	0.714 - 0.870	0.831	0.754 - 0.902		
0.850	0.788 - 0.902	0.678	0.577 - 0.778	0.781 - 0.905	0.775	0.687 - 0.856		
0.900	0.852 - 0.939	0.573	0.463 - 0.683	0.848 - 0.941	0.690	0.589 - 0.785		
0.950	0.918 - 0.974	0.410	0.293 - 0.533	0.916 - 0.974	0.545	0.425 - 0.660		

Sp = specificity; Se = sensitivity

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772

# TABLES

- Table 1 Number of mid-infrared (MIR) transmittance spectra of morning and evening milk samples
- available for the 3 different herds included in this study.

Mills complex	All herds -		Herd	
Milk samples	All liefus -	А	В	С
Morning	808	640	121	47
Evening	777	646	118	13

773

# 776 **Table 2** The descriptive statistics of the blood plasma non-esterified fatty acid (NEFA) concentrations linked to different subsets of milk mid-

# 777 infrared transmittance spectra.

Blood	Calibration set (Herd A)		Validation set (Herd A, B and C)									
NEFA	Overall	Momina	Evening	Overall	Morning samples				Evening samples			
(mmol/L)	Overall	Morning	Evening		All herds	Herd A	Herd B	Herd C	All herds	Herd A	Herd B	Herd C
Number	790	395	395	793	412	245	121	46	381	251	117	13
Mean	0.436	0.436	0.435	0.445	0.442	0.477	0.372	0.444	0.448	0.479	0.372	0.530
SD	0.296	0.296	0.296	0.286	0.280	0.316	0.187	0.246	0.292	0.324	0.188	0.298
Minimum	0.036	0.036	0.036	0.055	0.055	0.055	0.069	0.087	0.055	0.055	0.069	0.092
Maximum	1.951	1.951	1.951	1.748	1.631	1.631	1.080	1.256	1.748	1.748	1.080	1.033

778	Table 3 Root mean squared error of prediction (RMSEP) for the non-esterified fatty acid (NEFA) concentration in the blood plasma by the
779	partial least squares regression models trained on morning and evening observations (= full model), only morning observations (= morning
780	model) and only evening observations (= evening model) of the calibration set. The RMSEP values are provided for the different subsets (blood
781	NEFA range, milking time and herd) of the validation set. Within each column and a specified blood NEFA concentration range, the RMSEP
782	values with different subscripts indicate significant ( $\alpha = 0.05$ ) differences between the models according to Tukey HSD multiple comparison,
783	with a letter lower in the alphabetical order indicating a better model

Blood NEFA	Blood NEFA		Validation set - RMSEP (mmol/L)									
range	Model	Overall	Morning observations				Evening observations					
(mmol/L)		Overall	All herds	Herd A	Herd B	Herd C	All herds	Herd A	Herd B	Herd C		
	Full	0.190 <sup>a</sup>	0.197 <sup>a</sup>	0.220 <sup>a</sup>	0.135	0.204	0.182 <sup>a</sup>	0.199 <sup>a</sup>	0.140 <sup>a</sup>	0.167		
Complete: $0-2$	Morning	0.194 <sup>b</sup>	0.194 <sup>a</sup>	0.211 <sup>a</sup>	0.143	0.209	0.194 <sup>b</sup>	0.207 <sup>b</sup>	0.169 <sup>b</sup>	0.139		
0-2	Evening	0.206 <sup>b</sup>	0.225 <sup>b</sup>	0.252 <sup>b</sup>	0.161	0.220	0.183 <sup>a</sup>	0.195 <sup>a</sup>	0.156 <sup>a,b</sup>	0.162		
	Full	0.129 <sup>a</sup>	0.124 <sup>a</sup>	0.132	0.109	0.128	0.134 <sup>a</sup>	0.143 <sup>b</sup>	0.122 <sup>a</sup>	0.062		
Low: 0 – 0.6	Morning	0.158 <sup>b</sup>	0.141 <sup>b</sup>	0.145	0.129	0.152	0.174 <sup>b</sup>	0.184 <sup>c</sup>	0.161 <sup>b</sup>	0.071		
0 - 0.0	Evening	0.132 <sup>a</sup>	0.136 <sup>a,b</sup>	0.135	0.135	0.145	0.128 <sup>a</sup>	0.120 <sup>a</sup>	0.143 <sup>a</sup>	0.098		
	Full	0.241 <sup>b</sup>	0.269 <sup>b</sup>	0.270 <sup>b</sup>	0.253 <sup>a,b</sup>	$0.290^{a,b}$	$0.208^{a,b}$	0.198 <sup>a,b</sup>	0.230	0.258		
Middle: 0.6 – 1.2	Morning	0.211 <sup>a</sup>	0.234 <sup>a</sup>	0.232 <sup>a</sup>	0.218 <sup>a</sup>	$0.277^{a}$	0.185 <sup>a</sup>	0.174 <sup>a</sup>	0.219	0.206		
0.0-1.2	Evening	0.281 <sup>c</sup>	0.328 <sup>c</sup>	0.339 <sup>c</sup>	0.286 <sup>b</sup>	0.322 <sup>b</sup>	0.223 <sup>b</sup>	0.221 <sup>b</sup>	0.226	0.231		
	Full	0.668 <sup>b</sup>	0.713 <sup>b</sup>	0.704 <sup>b</sup>		0.793	0.620 <sup>b</sup>	$0.620^{b}$				
High: 1.2 – 2	Morning	0.607 <sup>a</sup>	0.675 <sup>a</sup>	0.668 <sup>a</sup>		0.738	0.530 <sup>a</sup>	0.530 <sup>a</sup>				
1.2 - 2	Evening	0.711 <sup>c</sup>	0.781 <sup>c</sup>	$0.780^{\circ}$		0.784	0.633 <sup>b</sup>	0.633 <sup>b</sup>				

783	with a letter	lower in the	e alphabetical	order indicating a	better model.

784

### FIGURES

**Figure 1** Schematic overview of the methodology to build a partial least squares (PLSR) model to predict the blood plasma non-esterified fatty acid concentration from milk mid-infrared spectra. CV = cross-validation, RMSECV = root mean square error of cross-validation, RMSEP = root mean square error of prediction.

789

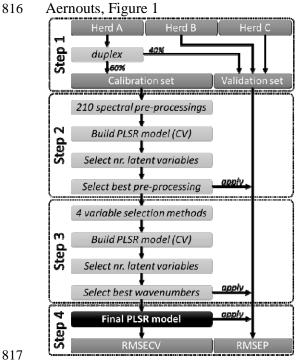
790 Figure 2 Top: Relative mid-infrared (MIR) transmittance spectra of the milk samples. The dotted 791 black lines (with sample number) indicate 2 potential outlier spectra. The grey regions indicate the 792 wavenumbers included in at least 1 of the 3 final partial least squares regression (PLSR) models 793 (full, morning or evening) to predict the blood plasma non-esterified fatty acid concentration after 794 applying a variable selection technique. Bottom: Regression coefficients for the 3 different PLSR 795 models constructed using a calibration set with MIR spectra of respectively i) morning and evening 796 milk samples (= full model, green solid), ii) only morning milk samples (= morning model, red 797 dashed) and iii) only evening milk samples (= evening model, blue dotted) of herd A.

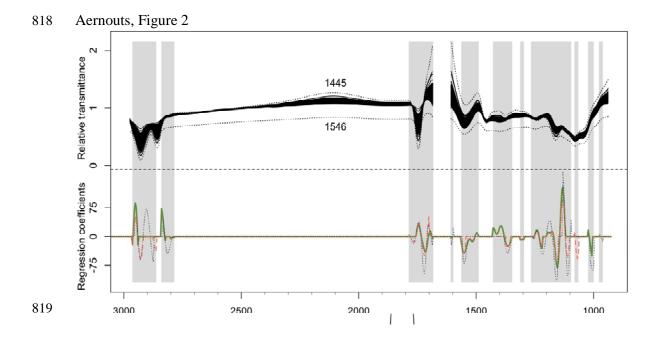
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799 Figure 3 The results of the partial least squares regression (PLSR) model trained on a calibration 800 set of mid-infrared transmittance spectra of milk samples collected during morning and evening 801 milking sessions (= full model) on herd A to predict the non-esterified fatty acid (NEFA) 802 concentration in the blood plasma of the respective cows for which blood was sampled in the 803 morning. a) Root mean squared error (RMSE) for the calibration set in cross-validation (CV) and 804 the morning  $(P_M)$  and evening  $(P_E)$  observations of the validation set (all 3 herds), in relation to the 805 number of latent variables of the PLSR model. The green triangle indicates the number of selected 806 latent variables (n = 6) for the final PLSR model. b) The predicted versus measured scatterplot for 807 the calibration set (herd A) in cross-validation (CV) and the morning  $(P_M)$  and evening  $(P_E)$ observations of the validation set (3 herds). 808

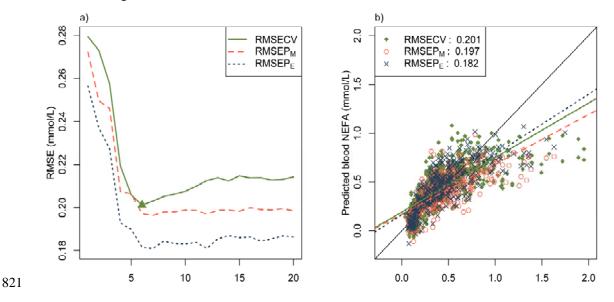
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810	Figure 4 Smoothed receiver operating characteristic (ROC) curves for the identification of
811	detrimental blood plasma non-esterified fatty acid (NEFA) concentrations (≥ 0.6 mmol/L). The
812	NEFA concentrations were predicted with partial least squares regression models trained on
813	morning and evening observations (= full model) of the calibration set. The mean values (lines) and
814	95% confidence intervals (areas) for the smoothed ROC curves are provided for morning (red,
815	dashed) and evening observations (blue, dotted) of the validation set.





# 820 Aernouts, Figure 3



# Aernouts, Figure 4

