### Methods & Models for fMRI Analysis 2016

# Experimental design of fMRI studies &

Resting-State fMRI (rsfMRI)









# Beginning

### task-fMRI vs. rsfMRI

- changes in BOLD signal attributed to experimental paradigm
- "brain function mapped onto brain regions" → local
- generally largely ignoring any intrinsic, ongoing (spontaneous) brain activity

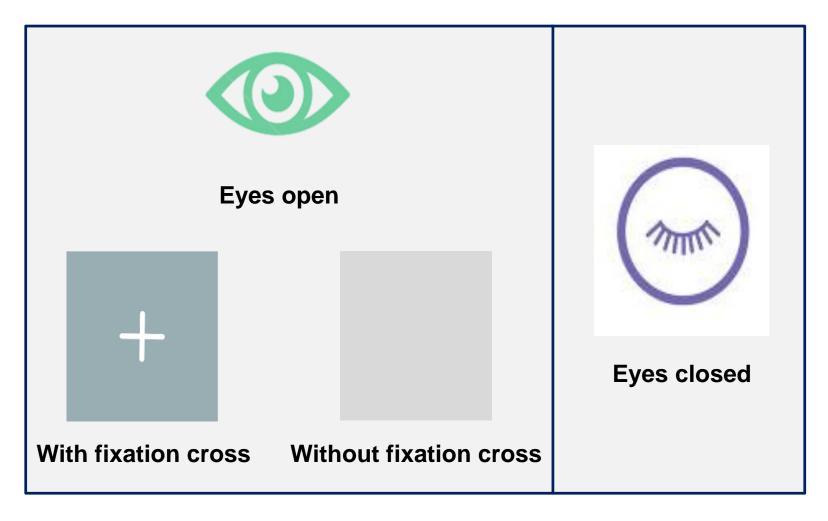
- Investigates spontaneous brain activity in fMRI in the absence of experimental stimulations
- mainly temporally correlated fMRI signal changes across the brain during 'rest' is studied, i.e. resting state networks (RSNs)
- the resting brain consumes 20% of the body's energy (Raichle et al. (2001), PNAS)

Paradigm shift



# Resting state Acquisition

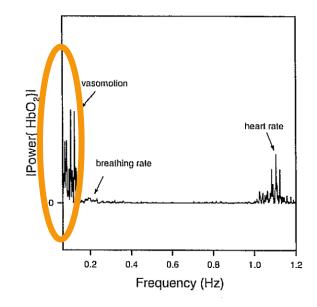
**Duration: 5-10 min** 

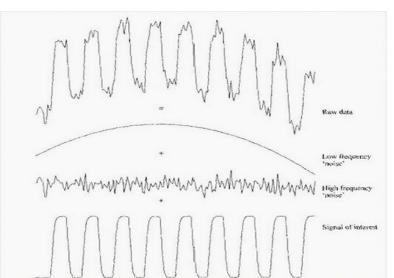


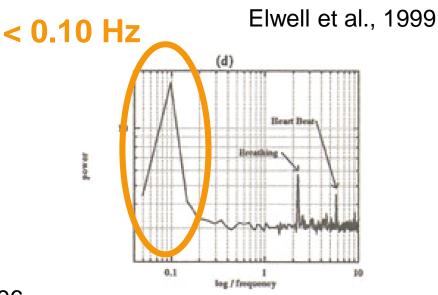


# Spontaneous BOLD activity

- the brain is always active, even in the absence of explicit input or output
  - the resting brain consumes 20% of the body's energy (mostly to support ongoing neuronal signaling), taskrelated changes in neuronal metabolism are only about 5%
- what is the "noise" in standard activation studies?
  - physiological fluctuations or neuronal activity?
  - peak in frequency oscillations from 0.01 0.08 Hz
  - distinct from faster frequencies of respiratory (0.1 0.5
     Hz) and cardiac responses (0.6 1.2 Hz)









Mayhew et al., 1996

### rsfMRI or R-fMRI

Resting state functional MRI [...] is a [...] method for evaluating regional interactions that occur when a subject is not performing an explicit task.

http://www.humanconnectome.org/about/project/resting-fmri.html



### rsfMRI or R-fMRI

### correlated fluctuations

Resting state functional MRI [...] is a [...] method for evaluating regional interactions that occur when a subject is not performing an explicit task.

http://www.humanconnectome.org/about/project/resting-fmri.html



# rsfMRI or R-fMRI → resting-state fcMRI

functional connectivity

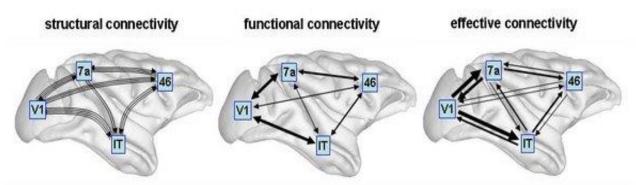
correlated fluctuations

Resting state functional MRI [...] is a [...] method for evaluating regional interactions that occur when a subject is not performing an explicit task.

http://www.humanconnectome.org/about/project/resting-fmri.html



# Structural, functional & effective connectivity

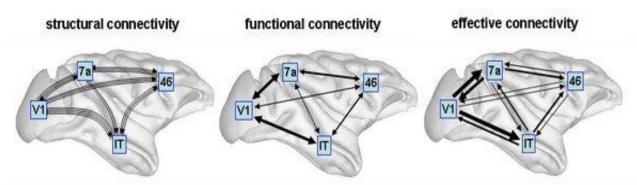


Sporns 2007, Scholarpedia

- anatomical/structural connectivity
  - = presence of axonal connections
- functional connectivity
  - statistical dependencies between regional time series
- effective connectivity
  - causal (directed) influences between neurons or neuronal populations



# Structural, functional & effective connectivity

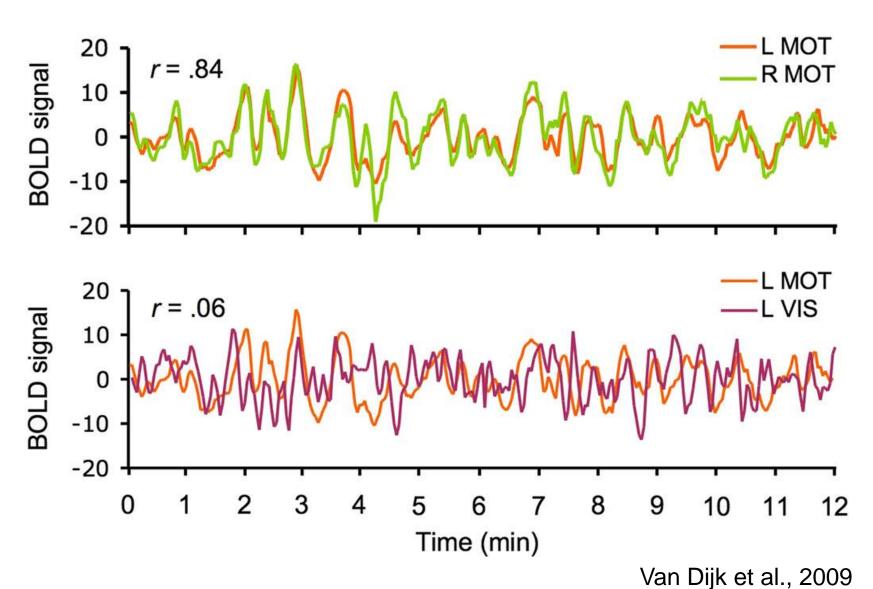


Sporns 2007, Scholarpedia

- anatomical/structural connectivity
  - = presence of axonal connections
- functional connectivity
  - → resting-state fcMRI might provide indirect information about the structural connectivity of the brain
- effective connectivity
  - causal (directed) influences between neurons or neuronal populations



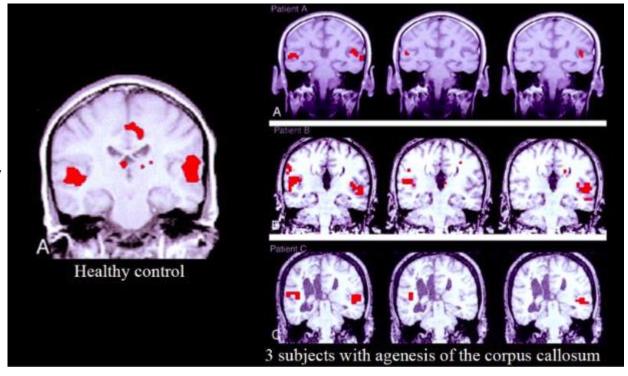
# Spontaneous BOLD activity





# functional connectivity = anatomical connectivity?

Healthy control: seed voxel from the right auditory cortex



#### Patients:

**Left**: activation data from the auditory cortex during a text-listening task.

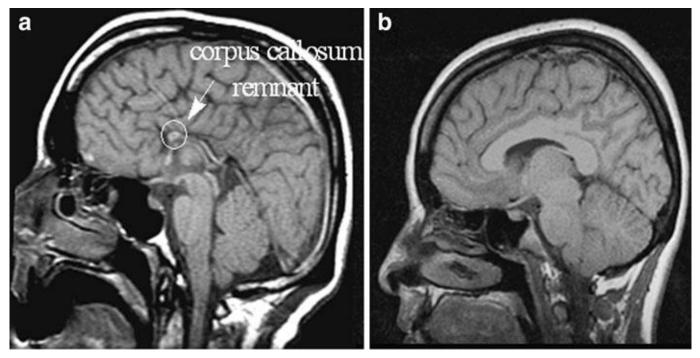
Middle: functional connectivity with seed voxel selected in the right auditory cortex.

**Right**: functional connectivity with seed voxel selected in the left auditory cortex

Quigley et al. (2003), AJNR



# Corpus callosum

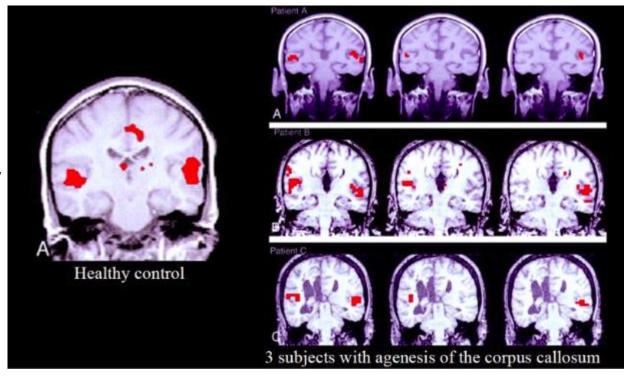


Lowe (2010), Magn Reson Mater Phy



# Functional connectivity = anatomical connectivity?

Healthy control: seed voxel from the right auditory cortex



#### Patients:

**Left**: activation data from the auditory cortex during a text-listening task.

Middle: functional connectivity with seed voxel selected in the right auditory cortex.

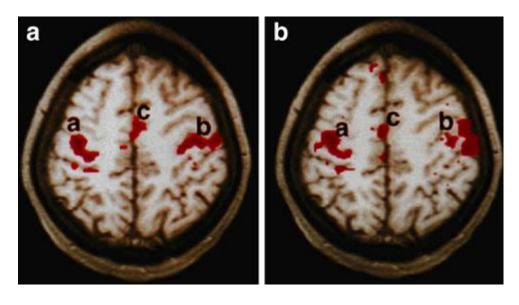
Right: functional

connectivity with seed voxel selected in the left auditory cortex

Quigley et al. (2003), AJNR



# Early studies - fMRI



a) fMRI task-activation response to bilateral finger movement

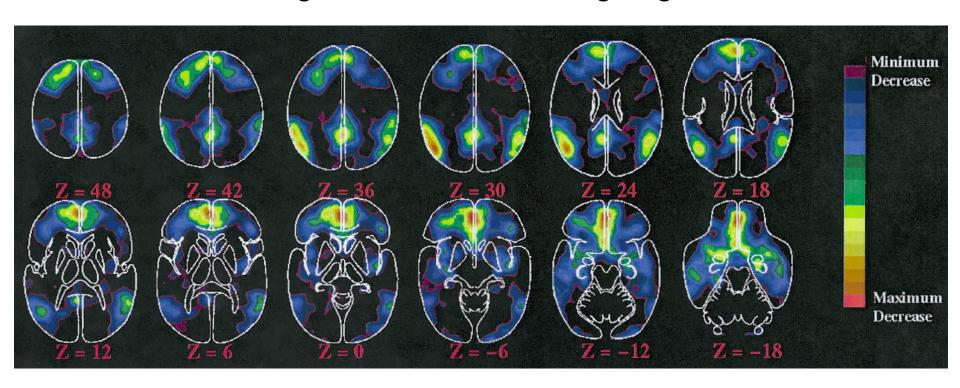
b) functional connectivity map using as seed region the left motor cortex

Biswal et al. (1995), Magn Reson Med



# Early studies - PET

Brain regions showing a decrease in metabolic activity during attention demanding cognitive tasks



### default mode of brain function

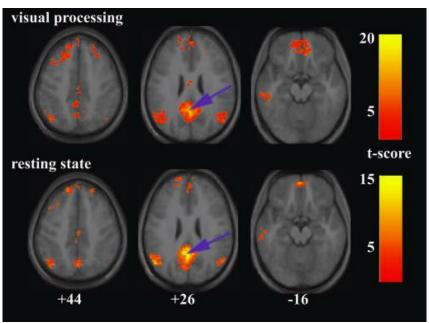


# Early studies - fMRI

### **Tasks**

- Resting state:
  - Eyes closed
  - do not think of anything in particular
- Visual processing
  - black-and-white radial checkerboard pattern
- Working memory
  - N-back spatial paradigm
  - task-related decreases in the PCC, vACC, medial prefrontal cortex (MPFC), and left inferior parietal cortex (IPC)
  - task-related increase in lateral prefrontal areas

# Visual processing vs. resting-state neural connectivity for the PCC

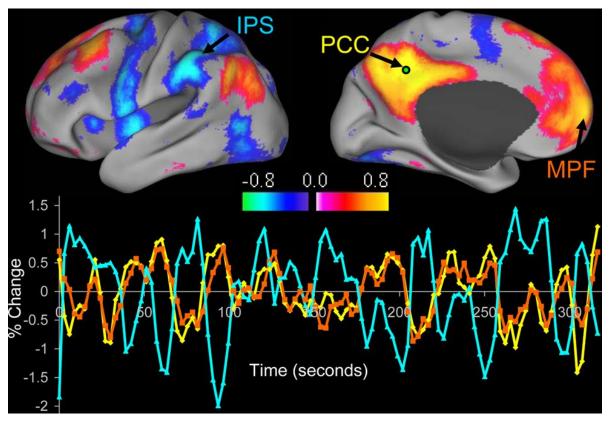


Greicius et al. (2003), PNAS



# Default mode network (DMN)

- A set of brain regions whose activation tends to
  - decrease during the performance of active, engaging tasks
  - increase during conditions of resting and reflection





# Resting-state Networks (RSNs)

"RSNs are "activation-like", spatially structured maps of grey matter brain areas exhibiting correlated BOLD signal changes" Niazy et al., 2015



# Resting-state Networks (RSNs) characteristics

### Spatial

- localize the grey matter regions of the brain (Beckmann et al. 2005; De Luca et al. 2006), including;
  - sensory and motor cortices,
  - language, memory, and higher cognitive systems
- appear to be either upregulated or downregulated during specific cognitive tasks.
  - 'task positive' vs 'task negative' (e.g. DMN)

### Temporal

- Low frequency/ slow fluctuations
- Frequencies < 0.1 Hz account for 90% of the cross-correlation between connected areas (Cordes et al., 2000,2001)
- But higher frequencies contribute equally consistent (Niazy et al. 2008)



### Spatial characteristics - Networks

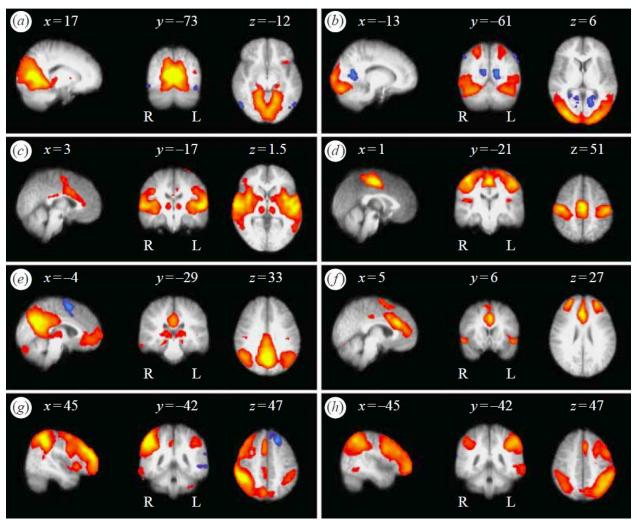
### **RSNs**

a) & b) Visual

c) Sensory

e) DMN (default mode network)

g) right frontoparietal (~attention RSN)



d) Motor

f) executive control & salience

h) Left frontoparietal (~attention RSN)

Beckmann et al. (2005), Phil Trans R Soc B



# What is so interesting about 'rest'?

- Usefulness?
  - Not a measure of structural connectivity
  - Not a measure of effective connectivity
- Interpretability?
  - Confounds

    - vascular processes (unrelated to neuronal function) (Wise et al., 2004)
    - participants might fall asleep, be planning what to do next, or might be thinking about the previous task ...
- → However, RSNs have been found to be distinct from cardiac and respiratory artefacts (spatially and temporally) (De Luca et al., 2006)
- → rsfMRI has revealed a number of networks consistently found in healthy subjects, different stages of consciousness and across species
- → may present a valuable data resource for delineating the human neural functional architecture (Cole et al., 2010)



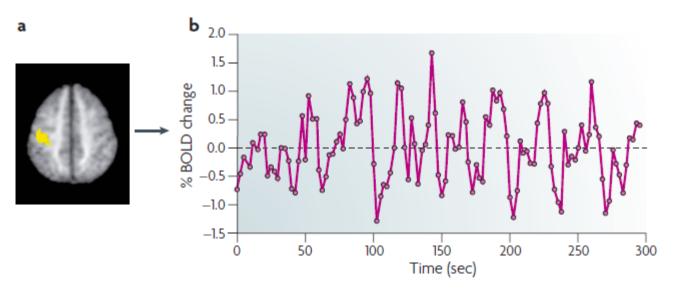
### Methods

- Model-based
  - Seed based correlation analysis
- Model-free
  - Decomposition
    - Independent component analysis (ICA), principal component analysis (PCA)
  - Clustering
    - Fuzzy clustering analysis (FCA), hierarchical clustering analysis (HCA)



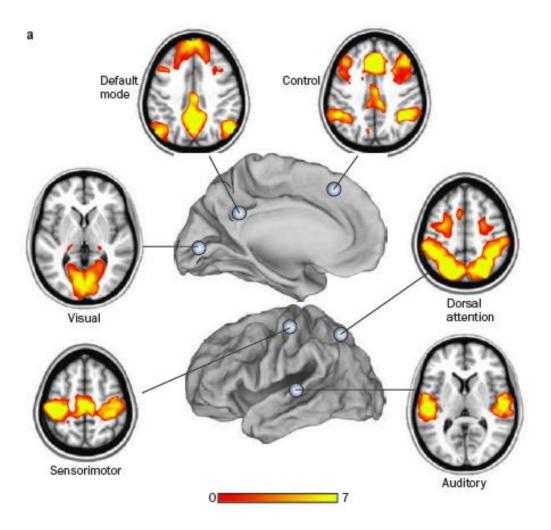
### Methods: model-based

- Seed based correlation analysis (SCA; seed = region of interest)
- Temporal correlation between the time course of every voxel in the brain and the time course from a seed voxel
  - hypothesis-driven: a priori selection of a voxel, cluster, or atlas
  - the extracted time series is used as regressors in a GLM analysis
  - univariate approach





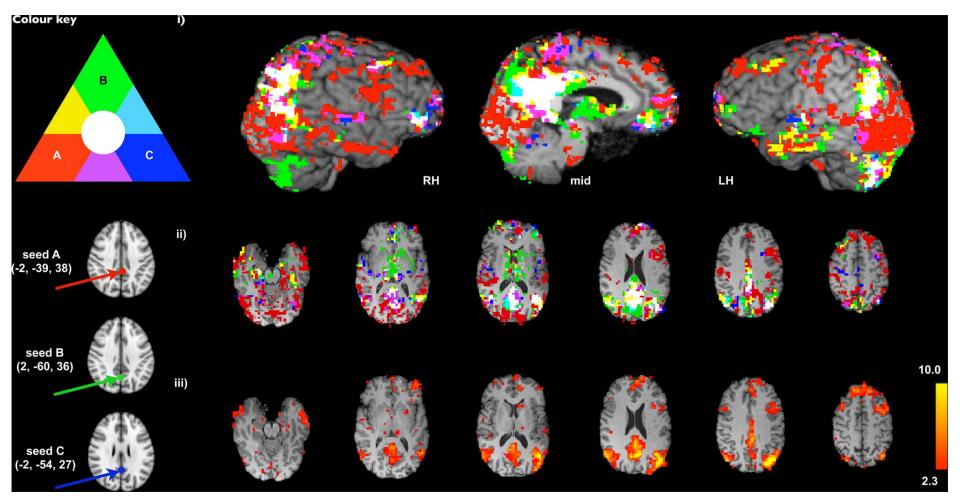
# SCA



Zhang & Raichle, 2010, Nature Reviews, Neurology



# DMN versions using 3 different seed voxels



Cole et al. (2010), Front Syst Neurosci



### Methods: model-based

 Seed based correlation analysis (SCA; seed = region of interest)

### Advantage:

- Direct answer to a direct question (straightforward interpretation)
- Has moderate-to-high reliability
- Weakness:
  - Residual confounds in the SCA time series (e.g. head motion)
  - Bias attached to seed selection (see previous slide)
  - Anatomical restrictions on the measurement of network connectivity (multiple regions must be manually defined before analysis in order to generate multiple network maps)



### Methods: model-free

- Decomposition
  - Independent component analysis (ICA), principal component analysis (PCA)
    - multivariate-approach
- The signal in fMRI data is composed out of different sources of variability:
  - machine artefacts
  - physiological pulsation
  - head motion and
  - Spontaneous fluctuations in the blood oxygen level-dependent (BOLD) signal
- Goal: to express the original fMRI dataset as a linear combination of basis vectors (PCA) or statistically independent components (ICA)



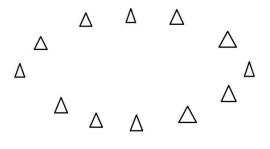
# Principal component analysis (PCA)

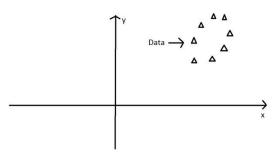
- Can treat fMRI dataset (1 time & 3 spatial dimensions) as a 2D matrix (time x voxels)
  - Decomposes the data into spatial maps (~ functional networks) with associated time series
  - Goal: finding components which explain max/most the variance in the dataset
  - iterative in defining each component in relation to the previous components
  - the components are orthogonal (uncorrelated) to each other



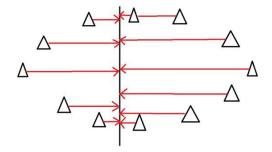
# PCA example

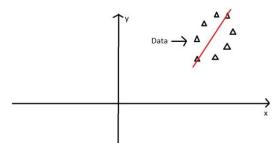
### Finding directions of maximum variance for 2 sources



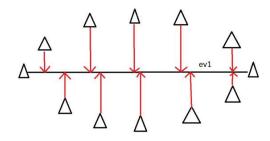


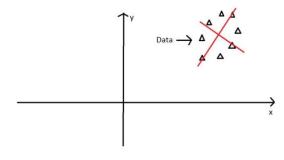
number of variables = number of eigenvectors/ eigenvalues = number of dimensions

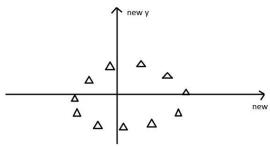




e.g.:
x = age
y = hours spent in the
internet







# Principal Component Analysis

The core of **PCA** is to represent the observed fMRI time courses X with a combination of orthogonal contributors. Each contributor is made of a temporal pattern (a principal component) multiplied with a spatial pattern.

**Singular Value Decomposition** (SVD): method for eigen-decomposition of matrices:

$$X = \mathbf{U}\mathbf{S}\mathbf{V}^T = \sum_{i=1}^p S_i U_i V_i^T$$

X: observed fMRI time course

T: time points

 $S_i$ : singular value of X

 $U_i$ : the *i*th principal component

 $V_i$ : the corresponding eigen map

p: number of chosen components

Li et al, 2009, Comput Img Med Graph



# SVD: an example using simulated data

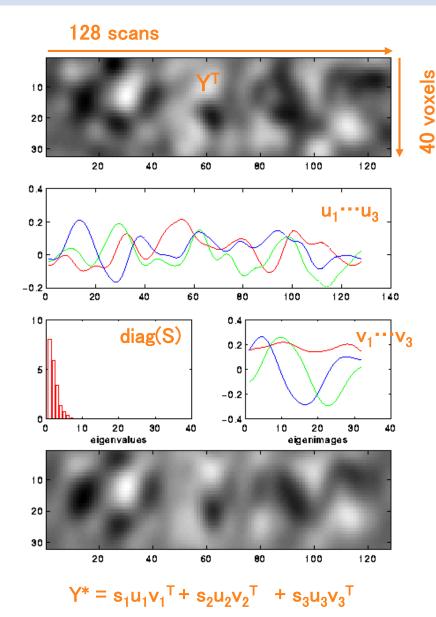
# A time-series of 1D images: 128 scans of 40 "voxels"

(note: for display reasons, the transpose of the data matrix is shown)

Eigenvariates U: Temporal expression of the first three eigenimages over time

Singular values S and eigenimages V ("spatial modes")

The time-series reconstructed from the first three eigenimages





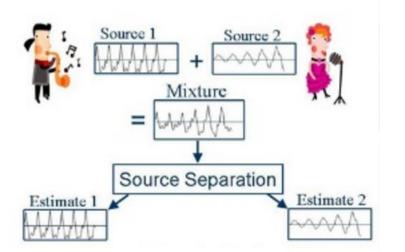
# Independent Component Analysis (ICA)

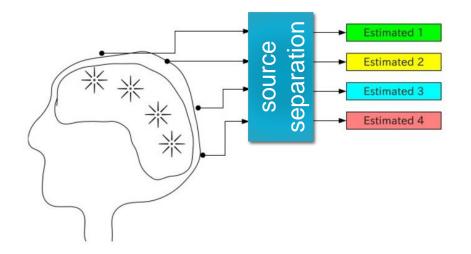
ICA decomposes a two-dimensional (time x space) data matrix into the time courses and associated spatial maps of the underlying 'hidden' signal sources

- Spatial ICA: a form of ICA that generates components that have minimal spatial redundancy
- Temporal ICA: a form of ICA that generates components that have minimal temporal redundancy









$$X = AS$$

X: measured data

A: mixing matrix

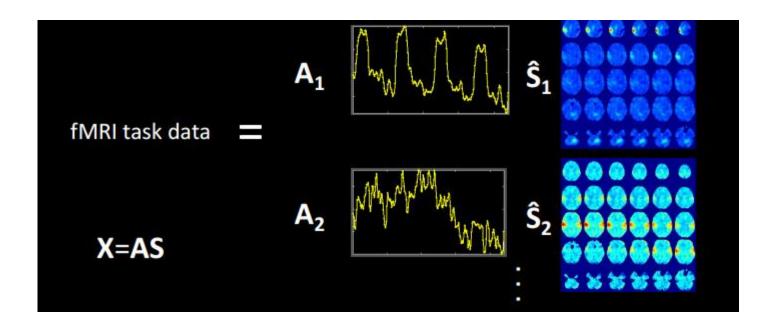
S: the underlying (original) signal source (IC component)



# ICA applied to fMRI

### Spatial ICA

- the sources are maps that are maximally spatially independent (i.e. non-overlapping)
- the mixing matrix represents activation time courses of the sources





# ICA applied to fMRI

- →identifies stationary sets of voxels whose acivations vary together over time and are maximally distinguishable from other sets.
- →assumes that fMRI data consist of a set of spatially overlapping components, each with an independent spatial pattern and different time course
- →the term «independent» means that the algorithm minimizes the overlap between the components, but the components do not need to be orthogonoal with each other
- →One common approach is to estimate maximally statistically independent, non-Gaussian components from fMRI data (by optimizing a measure of non-Gaussianity in the estimated spatial maps)



### toolbox

- MELODIC FSL
- GIFT (MIALAB; Vince Calhoun)
- REST and DPARSF SPM
- CONN Toolbox (<a href="http://www.nitrc.org/projects/conn/">http://www.nitrc.org/projects/conn/</a>)



### Methods: model-free

### Decomposition

- ICA/ PCA
  - multivariate-approach

### Advantage:

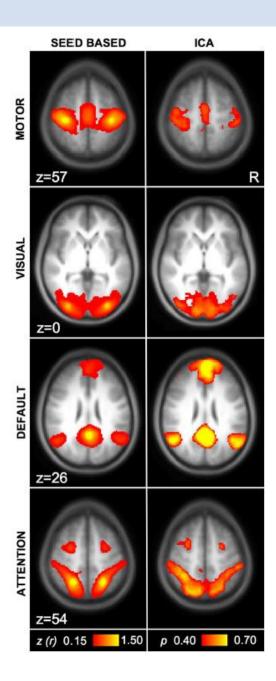
- Data-driven; explore fMRI data in search of systematic variation, without necessarily adopting an a priori model for that variation
- Partition the four dimensional fMRI time series into a set of components that may reflect distinct aspects of brain functioning, and also sources of non-neuronal variance (related to movement, ventricles, WM, respiration)

#### Weakness:

- Poorly chosen models (e.g. how to select the number of components?)
- Variability in the hemodynamic response
- Loss of specificity in relation to a well-defined seed of interest, interpretation?



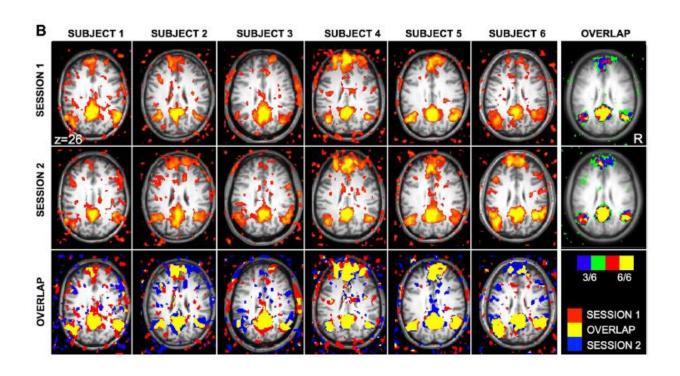
### SCA vs. ICA





# rsfMRI reliability

two sessions with a mean delay of 7.7  $\pm$  5.5 (SD) days.

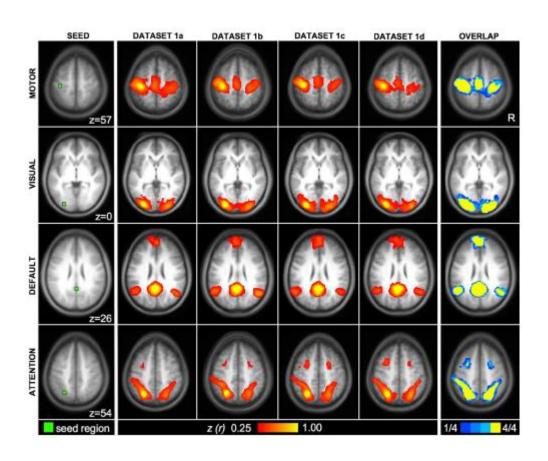




# rsfMRI stability

#### Dataset 1:

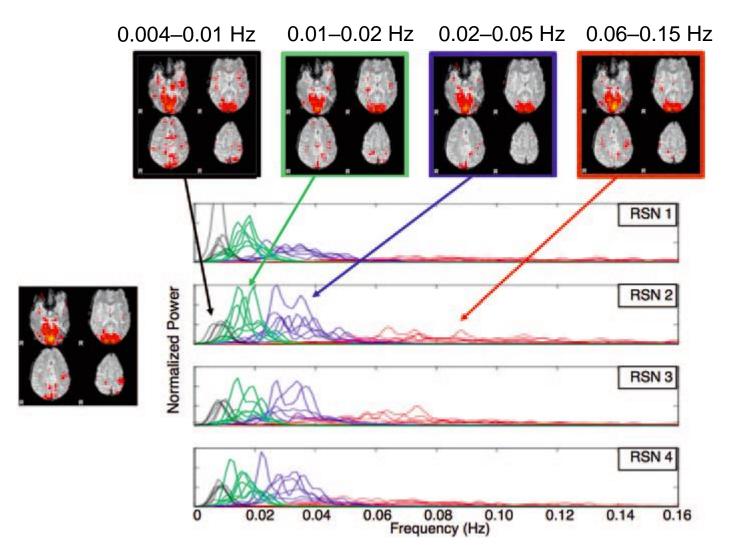
- N=48; 6 min fixation,
   TR: 2.5s, 3x3x3mm
- The 48 subjects from a dataset were divided into four independent groups of 12 subjects



Functional connectivity networks are reliable across independent subject groups



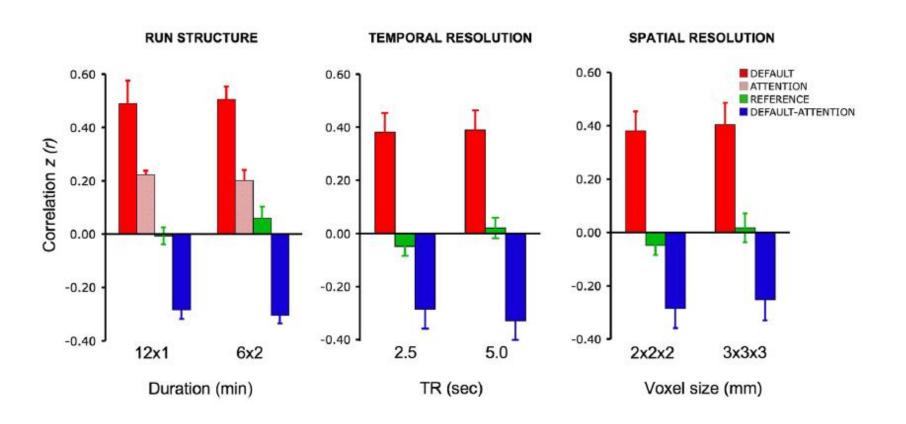
# Temporal characteristics



RSNs reproduced using ICA in different frequency bands of the power spectrum from the same data



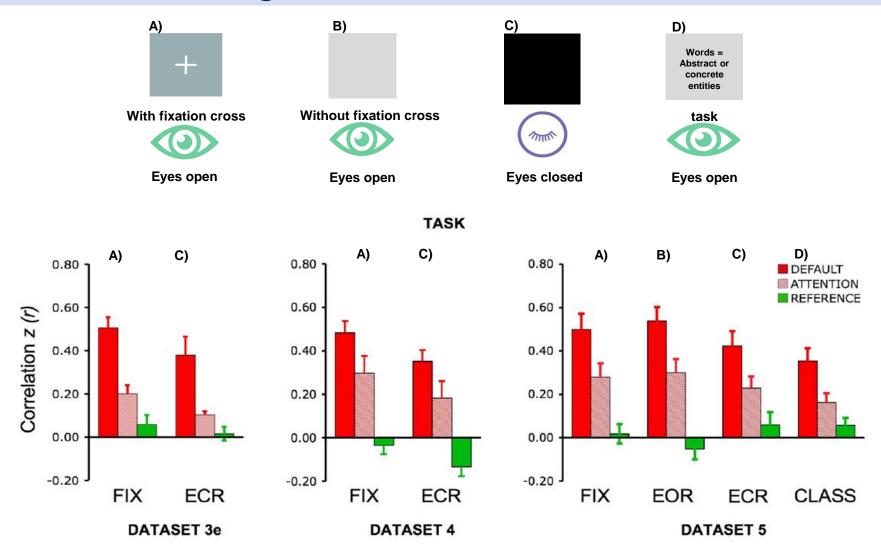
### Effects of structure & resolution on rsfMRI



Functional connectivity strength depends minimally on run structure, temporal resolution, and spatial resolution



# Effects of design on rsfMRI



Functional connectivity strength is influenced by task



# Application resting-state fcfMRI

 RSNs are reliable across subjects, sessions and replicable across independent subject groups → may be appropriate phenotypes for exploring individual and group differences

- Clinical application
  - Patients unable to perform tasks
  - rsfMRI can be collected during sleep, sedation, anaesthesia
  - Finding group differences resulting from pathologies
  - Used as biomarkers for obtaining diagnostic and prognostic information in single patients
  - Used to explore the brain's functional organization and if the brain is altered in neurological or psychiatric diseases



# Questions?



