Effective Connectivity & Dynamic Causal Modelling

Hanneke den Ouden

Donders Institute for Brain, Cognition and Behaviour Radboud University Nijmegen



Advanced SPM course Zurich, February 18-19, 2016

Functional Specialisation

Functional Integration





Outline

- 1 Investigating Connectivity
- 2 Dynamic causal models (DCMs)
- 3 Applications of DCM to fMRI data
- 4 Final remarks and useful references

Outline

- 1 Investigating Connectivity
- 2 Dynamic causal models (DCMs)
- 3 Applications of DCM to fMRI data
- 4 Final remarks and useful references

Structural, functional & effective connectivity



- 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

Context-independent

Mechanism - free

Mechanistic

Functional Connectivity

Statistical dependencies between regional time series

- Seed voxel correlation analysis
- Coherence analysis
- Eigen-decomposition (PCA, SVD)
- Independent component analysis (ICA)

••••

Seed voxel correlation analyses

- hypothesis-driven choice of a seed voxel /roi
- extract reference time series
- voxel-wise correlation with all other voxels





Functional Connectivity

Pro

useful when we have no experimental control over the system of interest and no model of what caused the data (e.g. sleep, hallucinations, etc.)

Con Π.

- interpretation of resulting patterns is difficult / arbitrary
- no mechanistic insight 0
- usually suboptimal for situations where we have a priori \bigcirc knowledge / experimental control

Effective Connectivity









Causal (directed) influences between neurons /neuronal populations

In vivo and in vitro stimulation and recording





- Models of causal interactions among neuronal populations
 - explain regional effects in terms of interregional connectivity

Models for computing effective connectivity in fMRI data

- Structural Equation Modelling (SEM)
 McIntosh et al. 1991, 1994; Büchel & Friston 1997; Bullmore et al. 2000
- Regression models (e.g. psycho-physiological interactions, PPIs) Friston et al. 1997
- Time series models (e.g. MAR, Granger causality)
 Harrison et al. 2003, Goebel et al. 2003, but see Smith et al. 2012
- Ancestral graph theory Waldorp et al. 2011
- Dynamic Causal Modelling (DCM) bilinear: Friston et al. 2003; nonlinear: Stephan et al. 2008; stochastic: Li et al. 2011

Psycho-physiological interactions (PPI)

 Bilinear model of how the psychological context A changes the influence of area B on area C :

$\mathsf{B} \mathsf{X} \mathsf{A} \to \mathsf{C}$

- Add regressor to the GLM: the timeseries of VOI x psychological context
- A PPI corresponds to differences in regression slopes for different contexts.



Psycho-physiological interactions (PPI)

Pro

- given a single source region, we can test for its contextdependent connectivity across the entire brain
- easy to implement

Con

- only allows to model contributions from a single area
- Ignores differences in neurovascular coupling in different areas
- ignores time-series properties of the data

DCM for more robust statements of effective connectivity

Outline

- 1 Investigating Connectivity
- 2 Dynamic causal models (DCMs)
 - Basic idea
 - Neural level
 - o Hemodynamic level
 - Parameter estimation, priors & inference
- 3 Applications of DCM to fMRI data
- 4 Final remarks and useful references

Outline

- 1 Investigating Connectivity
- 2 Dynamic causal models (DCMs)
 - Basic idea
 - Neural level
 - Hemodynamic level
 - Parameter estimation, priors & inference
- 3 Applications of DCM to fMRI data
- 4 Final remarks and useful references

Dynamic Causal Modelling (DCM)



Outline

- 1 Investigating Connectivity
- 2 Dynamic causal models (DCMs)
 - Basic idea
 - Neural level
 - Hemodynamic level
 - Parameter estimation, priors & inference
- 3 Applications of DCM to fMRI data
- 4 Final remarks and useful references

Neural model

Aim: model temporal evolution of a set of neuronal states x_t



Connectivity parameters ϑ

State changes are dependent on:

- the current state x
- external inputs u
- its connectivity ϑ

 $\frac{dx}{dt} = F(x, u, \theta)$

DCM parameters = rate constant





-0.1 0 0.1 0.2 0.3 0.4 0.5 0.6 0.7 0.8 0.9

 $\tau = \ln 2 / s$

0.2

0



If $A \rightarrow B$ is 0.10 s⁻¹ this means that, per unit time, the increase in activity in B corresponds to 10% of the current activity in A

DCM parameters = rate constant



Neurodynamics: 2 nodes with input



Example: 2 nodes with input



$$\dot{x}_1 = a_{11}x_1 + c_{11}u_1$$
$$\dot{x}_2 = a_{21}x_1 + a_{22}x_2$$

$$\begin{bmatrix} \dot{x}_1 \\ \dot{x}_2 \end{bmatrix} = \begin{bmatrix} a_{11} & 0 \\ a_{21} & a_{22} \end{bmatrix} \begin{bmatrix} x_1 \\ x_2 \end{bmatrix} + \begin{bmatrix} c_{11} \\ 0 \end{bmatrix} u_1$$

Example: 2 nodes with input



$$\dot{x}_{1} = a_{11}x_{1} + c_{11}u_{1}$$
$$\dot{x}_{2} = a_{21}x_{1} + a_{22}x_{2}$$
$$\begin{bmatrix} \dot{x}_{1} \\ \dot{x}_{2} \end{bmatrix} = \begin{bmatrix} a_{11} & 0 \\ a_{21} \end{pmatrix} \begin{bmatrix} x_{1} \\ x_{2} \end{bmatrix} + \begin{bmatrix} c_{11} \\ 0 \end{bmatrix} u_{1}$$

Example: context-dependent enhancement





$$\dot{x}_1 = a_{11} \cdot x_1 + c_{11} \cdot u_1$$
$$\dot{x}_2 = a_{21} \cdot x_1 + u_2 \cdot b_{21}^{(2)} \cdot x_1 + a_{22} \cdot x_2$$

Example: context-dependent enhancement



Neural state equation



DCM for fMRI: the full picture



Outline

- 1 Investigating Connectivity
- 2 Dynamic causal models (DCMs)
 - Basic idea
 - Neural level
 - o Hemodynamic level
 - Parameter estimation, priors & inference
- 3 Applications of DCM to fMRI data
- 4 Final remarks and useful references

Validity of 2-level model

OPEN 🗟 ACCESS Freely available online

Identifying Neural Drivers with Functional MRI: An Electrophysiological Validation

Olivier David^{1,2*}, Isabelle Guillemain^{1,2}, Sandrine Saillet^{1,2}, Sebastien Reyt^{1,2}, Colin Deransart^{1,2}, Christoph Segebarth^{1,2}, Antoine Depaulis^{1,2}

1 INSERM, U836, Grenoble Institut des Neur innces, Grenoble, France, 2 Université Joseph Fourier, Grenoble, France

Whether functional magnetic in
question of particular importa
understand neurophysiopathol
discharges originating from
graphic (EEG) and f'
activated in fMr"Con-
"Con-
activity
on fM-
in ge
iEECiEECon fM-
hemo
dir
irrregio
prece

condition of neural drivers remains an open reiological and neuropsychological models of the brain, and/or to rung spontaneous spike-and-wave

y sector strongly view of the sector strongly view of the sector strongly view of the sector strong strong

trv

POSRICIOGY

"Connectivity analysis applied directly on fMRI signals failed because hemodynamics varied between regions, rendering temporal precedence irrelevant"The neural driver was identified using DCM, where these effects are accounted for...

The hemodynamic "Balloon" model





Hemodynamic model

y represents the simulated observation of the bold response, including noise, i.e.

 $y = h(u, \theta) + e$



Outline

- 1 Investigating Connectivity
- 2 Dynamic causal models (DCMs)
 - Basic idea
 - Neural level
 - Hemodynamic level
 - Parameter estimation, priors & inference
- 3 Applications of DCM to fMRI data
- 4 Final remarks and useful references

Parameter estimation: Bayesian inversion



"Estimate neural & hemodynamic parameters such that the **MODELLED** and **MEASURED** BOLD signals are similar (model evidence is optimised), using variational EM under Laplace approximation"



Bayesian model inversion



Bayesian model inversion & priors in DCM

Express our prior knowledge or "belief" about parameters of the model

Parameters governing

- Hemodynamics in a single region
- Neuronal interactions

Constraints (priors) on

- Hemodynamic parameters
 - Empirical
- Self connections
 - principled
- Other connections
 - shrinkage



Inference about DCM parameters

Bayesian single subject analysis

- gaussian assumptions about the posterior distributions of the parameters
- posterior probability that a certain parameter (or contrast of parameters) is above a chosen threshold γ:
- by default, γ is chosen as zero the prior ("does the effect exist?").

Classical frequentist test across Ss

test summary statistic:

- one-sample t-test:
 - parameter > 0?
- paired t-test: parameter 1 > parameter 2?



Bayesian parameter averaging

! Bayesian model comparison !

Outline

- 1 Investigating Connectivity
- 2 Dynamic causal models (DCMs)
 - Basic idea
 - Neural level
 - Hemodynamic level
 - Parameter estimation, priors & inference
- 3 Applications of DCM to fMRI data
 - Modelling synesthesia
 - Quiz
- 4 Final remarks and useful references

Example: Brain Connectivity in Synesthesia

- Specific sensory stimuli lead to unusual, additional experiences
- Grapheme-color synesthesia: color
- Involuntary, automatic; stable over time, prevalence ~4%
- Potential cause: aberrant cross-activation between brain areas
 - o grapheme encoding area
 - o color area V4
 - superior parietal lobule (SPL)



Hubbard, 2007

Can changes in effective connectivity explain synesthesia activity in V4?

Model Comparison

Bottom-up

(Ramachandran & Hubbard, 2001)

Top-down

(Grossenbacher & Lovelace, 2001)



Effective connectivity reflects sensory experience

Associator ▲ Ment. scr. proj. ■ Surface proj.

Model evidence (BU

Projector-associator difference score (P-A)

Outline

- 1 Investigating Connectivity
- 2 Dynamic causal models (DCMs)
 - Basic idea
 - Neural level
 - Hemodynamic level
 - Parameter estimation, priors & inference

3 Applications of DCM to fMRI data

- Modelling synesthesia
- Quiz
- 4 Final remarks and useful references

Quiz: can this DCM explain your data?



Outline

- 1 Investigating Connectivity
- 2 Dynamic causal models (DCMs)
 - Basic idea
 - Neural level
 - Hemodynamic level
 - Parameter estimation, priors & inference
- 3 Applications of DCM to fMRI data
 - Modelling synesthesia
 - Quiz
- 4 Final remarks and useful references

DCM tries to model the same phenomena (i.e. local BOLD responses) as a GLM, just in a different way (via connectivity and its modulation).

no activation detected by a GLM

\rightarrow no motivation to include this region in a deterministic DCM.

however, a stochastic DCM could be applied despite the absence of a local activation.



The evolution of DCM in SPM

- DCM is not one specific model, but a framework for Bayesian inversion of dynamic system models
- The default implementation in SPM is evolving over time
 - o better numerical routines for inversion
 - change in priors to cover new variants (e.g., stochastic DCMs, endogenous DCMs etc.)



To enable replication of your results, you should state which SPM version you are using when publishing papers.

DCM Roadmap



Exciting extensions in DCM

- Nonlinear DCM for fMRI: Could connectivity changes be mediated by another region? (Stephan et al. 2008)
- Embedding computational models in DCMs: DCM can be used to make inferences on parametric designs like SPM (den Ouden et al. 2010, J Neurosci.)
- DCM as a summary statistic: clustering and classification: Classify patients, or even find new sub-categories (Brodersen et al. 2011Neuroimage)
- Integrating tractography and DCM: Prior variance is a good way to embed other forms of information, test validity (Stephan et al. 2009, NeuroImage)
- Stochastic / spectral DCM: Model resting state studies / background fluctuations (Li et al. 2011 Neuroimage, Daunizeau et al. Physica D 2009)

Validation studies of DCM

- reliability (reproducibility)
 - parameter estimates are highly reliable across sessions (Schuyler et al. 2010)
 - o model selection results are highly reliable across sessions (Rowe et al. 2010)
- face validity
 - simulations and empirical studies (Stephan et al. 2007, 2008)
- construct validity
 - comparison with SEM (Penny et al. 2004)
 - comparison with large-scale spiking neuron models (Lee et al. 2006)
- predictive validity:
 - o infer correct site of seizure origin (David et al. 2008)
 - infer primary recipient of vagal nerve stimulation (Reyt et al. 2010)
 - infer synaptic changes as predicted from microdialysis (Moran et al. 2008)
 - infer conditioning-induced plasticity in amygdala (Moran et al. 2009)
 - track anaesthesia levels (Moran et al. 2011)
 - predict sensory stimulation (Brodersen et al. 2010)
 - infer DA induced changes in AMPA/NMDA ratio from MEG (Moran et al. 2011)
 - predict presence/absence of remote lesion (Brodersen et al. 2011)

To get started...

■ 10 Simple Rules for DCM (2010). Stephan et al. NeuroImage 52

- The first DCM paper: Dynamic Causal Modelling (2003). Friston et al. NeuroImage 19:1273-1302.
- Physiological validation of DCM for fMRI: Identifying neural drivers with functional MRI: an electrophysiological validation (2008). David et al. PLoS Biol. 6 2683–2697
- Hemodynamic model: Comparing hemodynamic models with DCM (2007).
 Stephan et al. NeuroImage 38:387-401
- Nonlinear DCM:Nonlinear Dynamic Causal Models for FMRI (2008). Stephan et al. NeuroImage 42:649-662
- Two-state DCM: Dynamic causal modelling for fMRI: A two-state model (2008). Marreiros et al. NeuroImage 39:269-278
- Stochastic DCM: Generalised filtering and stochastic DCM for fMRI (2011). Li et al. NeuroImage 58:442-457
- Bayesian model comparison: Comparing families of dynamic causal models (2010). Penny et al. PLoS Comput Biol. 6(3):e1000709

Thank you

Advanced SPM course Zurich, February 05-06, 2015

DCM for fMRIdemo

Hanneke den Ouden

Donders Institute for Brain, Cognition and Behaviour Radboud University Nijmegen



Attention to motion in the visual system

Paradigm



Parameters

Stimuli 250 radially moving dots at 4.7 degrees/s

Pre-Scanning

5 x 30s trials with 5 speed changes (reducing to 1%) Task - detect change in radial velocity

Scanning (no speed changes) FAFNFAFNS

- F fixation
- S observe static dots + photic
- N observe moving dots + motion
- A attend moving dots + attention
- blocks of 10 scans
- 360 scans total
- TR = 3.22 seconds

Attention to motion in the visual system

Paradigm



Results



Attention – No attention

Büchel & Friston 1997, Cereb. Cortex Büchel et al. 1998, Brain

- fixation only
- observe static dots+ photic \rightarrow V1
- observe moving dots + motion \rightarrow V5
- task on moving dots + attention \rightarrow V5 + parietal cortex

DCM: comparison of 2 models





Bayesian model selection: Which model is optimal?

Attention to motion in the visual system

Paradigm



Ingredients for a DCM

Specific hypothesis/question
Model: based on hypothesis
Timeseries: from the SPM
Inputs: from design matrix

<u>Model 1</u>

attentional modulation of V1 \rightarrow V5: forward



Model 2 attentional modulation of SPC \rightarrow V5: backward



DCM: linear model

ul - photic

$$x_1$$
 x_2
 x_3
 x_3
 x_1
 x_2
 x_3
 x_3
 x_1
 x_2
 x_3
 x_3
 x_1
 x_2
 x_3
 x_3
 x_4
 x_4

$$\dot{x}_{1} = a_{11}x_{1} + a_{12}x_{2} + c_{1}u_{1}$$
$$\dot{x}_{2} = a_{21}x_{1} + a_{22}x_{2} + a_{23}x_{3}$$
$$\dot{x}_{3} = a_{32}x_{2} + a_{33}x_{3}$$

$$\begin{bmatrix} \dot{x}_1 \\ \dot{x}_2 \\ \dot{x}_3 \end{bmatrix} = \begin{bmatrix} a_{11} & a_{12} & 0 \\ a_{21} & a_{22} & a_{23} \\ 0 & a_{31} & a_{33} \end{bmatrix} \begin{bmatrix} x_1 \\ x_2 \\ x_3 \end{bmatrix} + \begin{bmatrix} c_{11} & 0 & 0 \\ 0 & 0 & 0 \\ 0 & 0 & 0 \end{bmatrix} \begin{bmatrix} u_1 \\ u_2 \\ u_3 \end{bmatrix}$$

Attention to motion in the visual system

DCM – GUI basic steps

- 1 Extract the time series (from all regions of interest)
- 2 Specify the model
- 3 Estimate the model
- 4 Repeat steps 2 and 3 for all models in model space
- 5 Compare models
- 6 OPTIONAL: do parameter inference on optimal model (potentially after model averaging)

Inference about DCM parameters

Bayesian single subject analysis

- The model parameters are distributions that have a mean $\eta_{\theta|y}$ and covariance $C_{\theta|y}$.
 - Use of the cumulative normal distribution to test the probability that a certain parameter (or contrast of parameters c^Tη_{θ|y}) is above a chosen threshold γ:



Classical frequentist test across Ss

- Test summary statistic: mean $\eta_{\theta|y}$
 - One-sample t-test:
 Parameter > 0?
 - Paired t-test:
 parameter 1 > parameter
 2?
 - rmANOVA: e.g. in case of multiple sessions per subject

Model comparison and selection

Given competing hypotheses on structure & functional mechanisms of a system, which model is the best?

Which model represents the best balance between model fit and model complexity?

For which model m does model evidence p(y | m)become maximal?



For a given dataset, to compare two models, we compare their evidences.

$$B_{12} = \frac{p(y \mid m_1)}{p(y \mid m_2)}$$

positive value, $[0; \infty]$

B ₁₂	p(m1 y)	Evidence
1 to 3	50-75%	weak
3 to 20	75-95%	positive
20 to 150	95-99%	strong
≥ 150	≥ 99%	Very strong

or their log evidences

$$\ln(B_{12}) = \ln(p(y | m_1)) - \ln(p(y | m_2)) \approx F_1 - F_2$$

Comparing models with Bayes factors



Given flat priors on the models, the posterior and model evidence are equivalent