

Tracking the time course of structural plasticity in motor learning using DWI: skill learning vs adaptation



Florencia Jacobacci^{a,b}, Gonzalo Lerner^a, Abraham Yeffal^a, Arnaud Boré^c, Marcia Renata Hidalgo-Marques^d, Edson Amaro^d, Jorge Armony^e, Jorge Jovicich^f, Julien Doyon^{c,g}, Valeria Della-Maggiore^{a,b}

a IFIBIO-Houssay, School of Medicine, University of Buenos Aires, Buenos Aires, Buenos Aires, Argentina; c Centre de Recherche de l'Institut Universitaire de Gériatrie de Montréal - University of Montreal, Montreal, Quebec, Canada; d PISA, Faculdade de Medicina FMUSP, Univ. de Sao Paulo, Sao Paulo, Brazil; e McGill Univ., Montreal, Quebec, Canada; f Center for Mind/Brain Science (CIMEC), Univ. of Trento, Rovereto, Italy; g BIC, MNI, McGill Univ., Montreal, Quebec, Canada

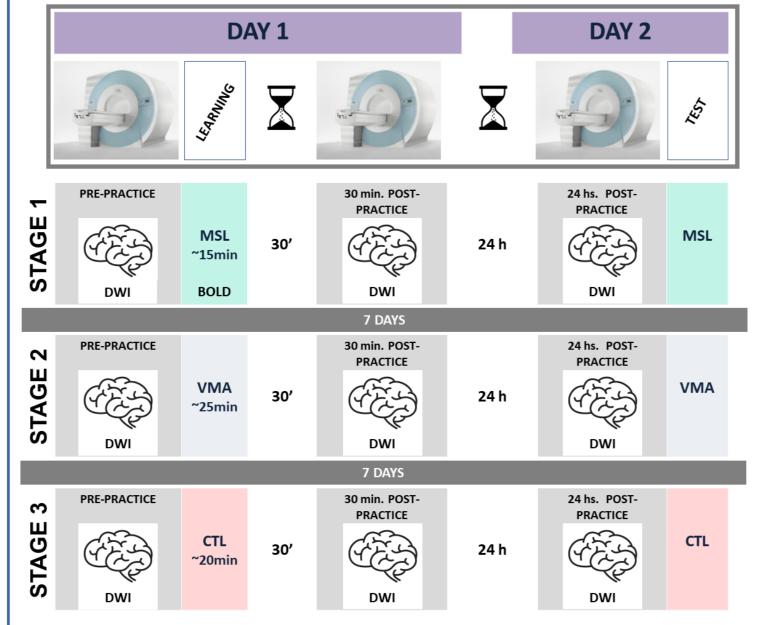
florenciajacobacci@gmail.com

Background

- Changes in grey and white matter structure occur in the healthy human brain following motor training (>1 week) $^{1-4}$.
- Learning-related plasticity can be detected in short time-scales using diffusion-weighted imaging (DWI) through a reduction in mean diffusivity (MD) in task-relevant regions. This MD reduction has been associated with a NMDA-dependent astrocyte hypertrophy, which may be indicative of sites of LTP induction^{5,6}.
- Motor learning but not mere motor activity is associated with synaptogenesis and with an increase in astrocytic volume⁷. In this study, we used MD maps to investigate the emergence of early cortical plasticity elicited by a short session of learning in two well-characterized motor learning tasks: sequence learning and adaptation. We also explored the evolution of cortical plasticity after motor memory consolidation.

Motor sequence learning involves the acquisition a new motor skill with repeated practice of sequential movements. Motor adaptation requires us to adjust our actions by recalibrating motor commands to compensate the error introduced by perturbations.

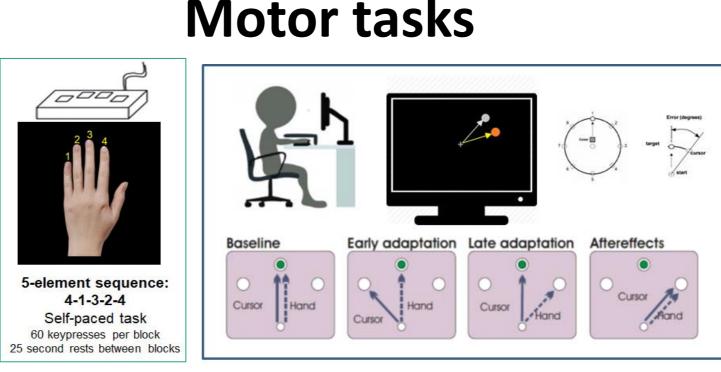
Study #1



Methods

Study #2 DAY 2 DAY 1 PRACTICE PRACTICE (F) (E) (F) VMA

Motor tasks



DWI Acquisition 3T Siemens TIM TRIO Scanner with 12

channel head coil Multiband-accelerated sequence^{8,9} (MB factor 2), Voxel size=2×2×2 mm³, FOV=240x240 mm²30 directions, bvalue = 1000 s/mm², 70 axial slices, TR=5208 ms, TE=89 ms

STUDY 1: 1 acquisition with A-P phase-encoding direction

Duration 10 min 42 sec

Duration 3 min 34 sec STUDY 2: 2 acquisitions with A-P direction + 1 acquisition with P-A direction

Processing and Stats

- Conversion of DW-images from
- DICOM to Nifti (dcm2nii) Distortion correction of images (FSL's
- Diffusion Tensor model fit (FSL's

that minimized reproducibility

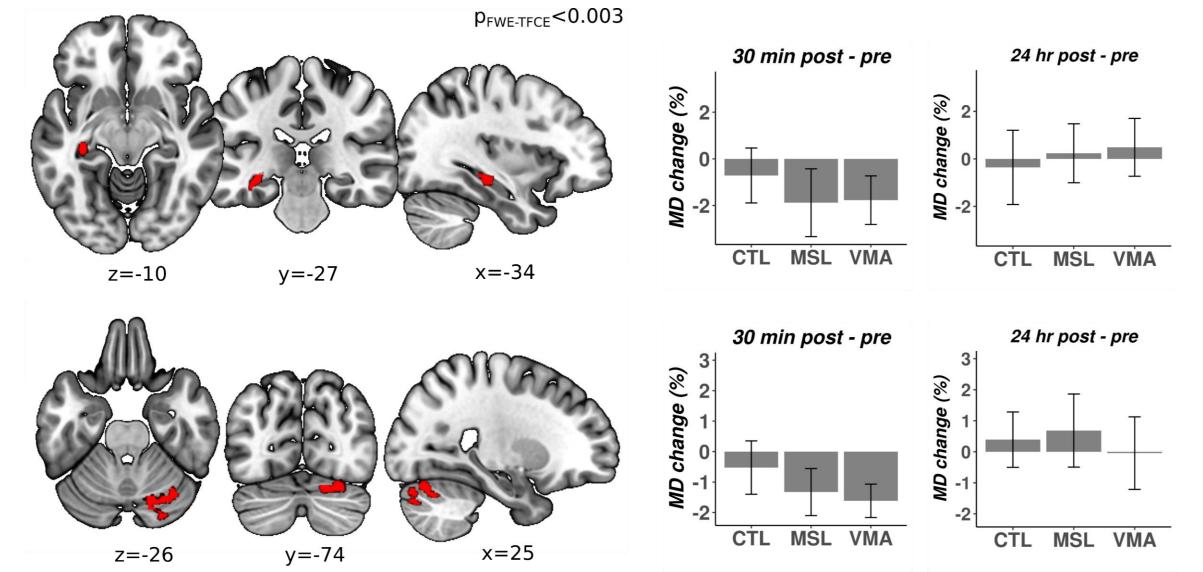
- DTIfit) MD Normalization to MNI152 using a non-linear pipeline based on ANTs
- errors¹⁰

topup + eddy)

 Smoothing 4 mm FWHM Longitudinal MD changes associated with motor learning were statistically assessed using the Sandwich Estimator (SwE) toolbox for accurate modeling of longitudinal and repeated measures neuroimaging data¹¹.

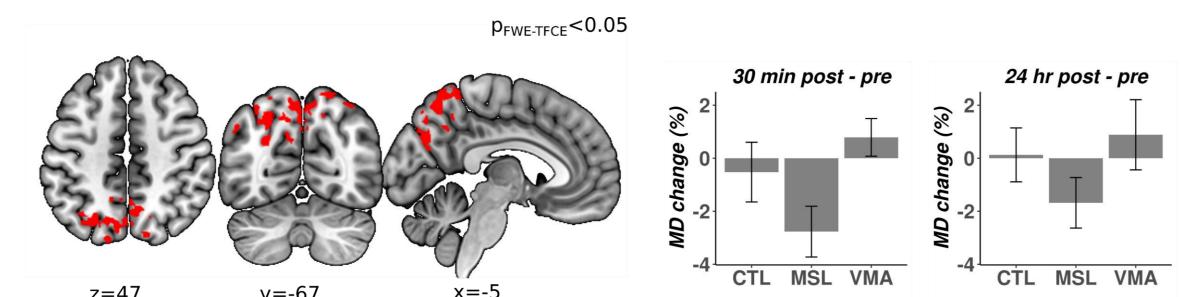
Results

Plastic changes common to MSL and VMA

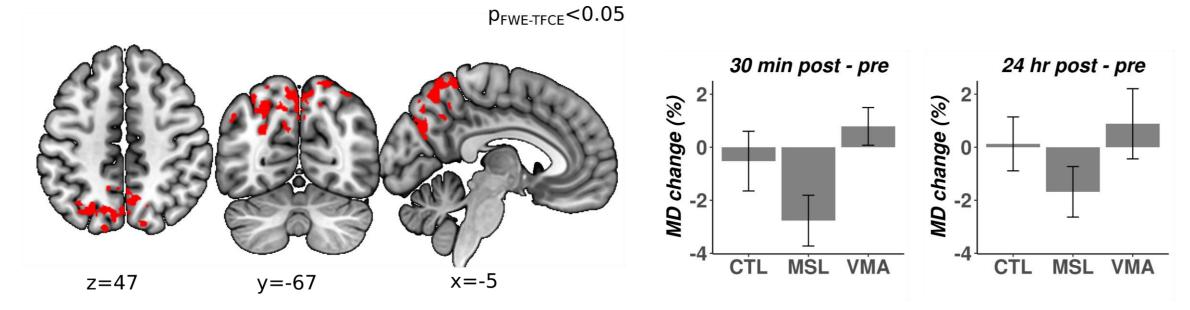


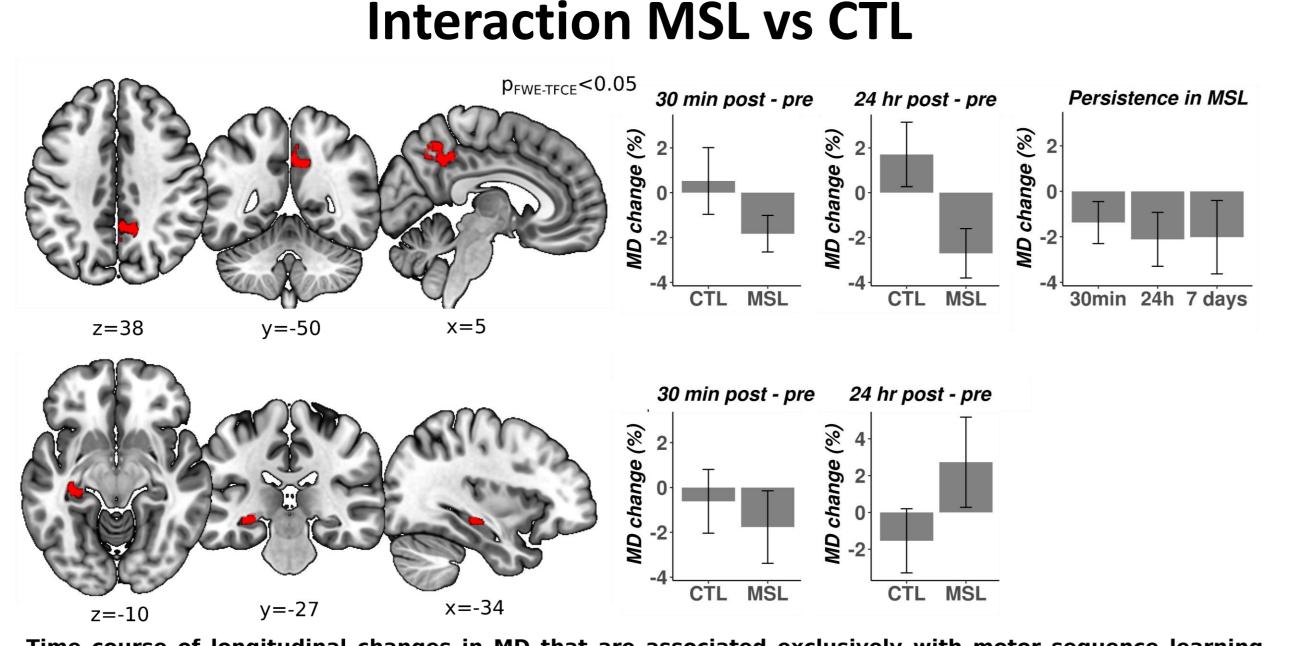
Time course of longitudinal changes in MD that are common to visuomotor adaptation (VMA) and motor sequence learning (MSL). MSL and VMA showed a reduction of MD in the right lateral cerebellum and the left hippocampus 30 min post-learning that returned to baseline at 24 hours. This temporal pattern was specific to motor learning, since it was not present in a control condition (CTL; go-nogo task). P-values<0.003 are FWE corrected using TFCE and shown in -log10 scale. Error bars represent the confidence interval of the mean. Orientation is neurological.

Interaction MSL vs VMA



Time course of longitudinal changes in MD that distinguish MSL from VMA. A marked reduction in MD over the lateral posterior parietal cortex 30 min post-training, that persisted at 24 hours, distinguished MSL from VMA. Pvalues<0.05 are FWE corrected using TFCE and shown in -log10 scale. Error bars represent the confidence interval of the mean. Orientation is neurological.



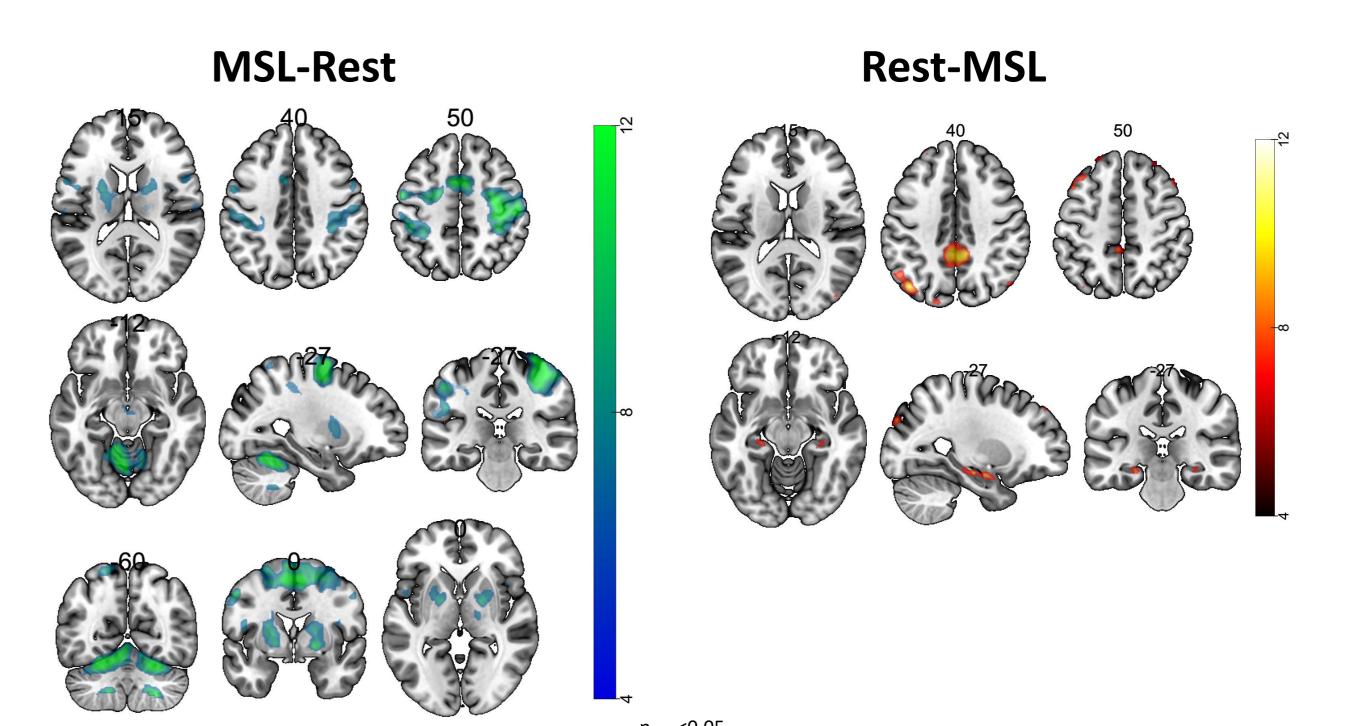


Time course of longitudinal changes in MD that are associated exclusively with motor sequence learning (MSL). MSL showed a reduction of MD in the precuneus 30 min post-learning, which persisted after 24 hs. MD remained below baseline levels even after 7 days for this brain region. In contrast, the reduction in the left hippocampus 30 min post-learning reverted at 24 hours. This temporal pattern was specific to motor learning, since it was not present in a control condition (CTL; go-nogo task). P-values < 0.05 are FWE corrected using TFCE and shown in -log10 scale. Error bars represent the confidence interval of the mean. Orientation is neurological.

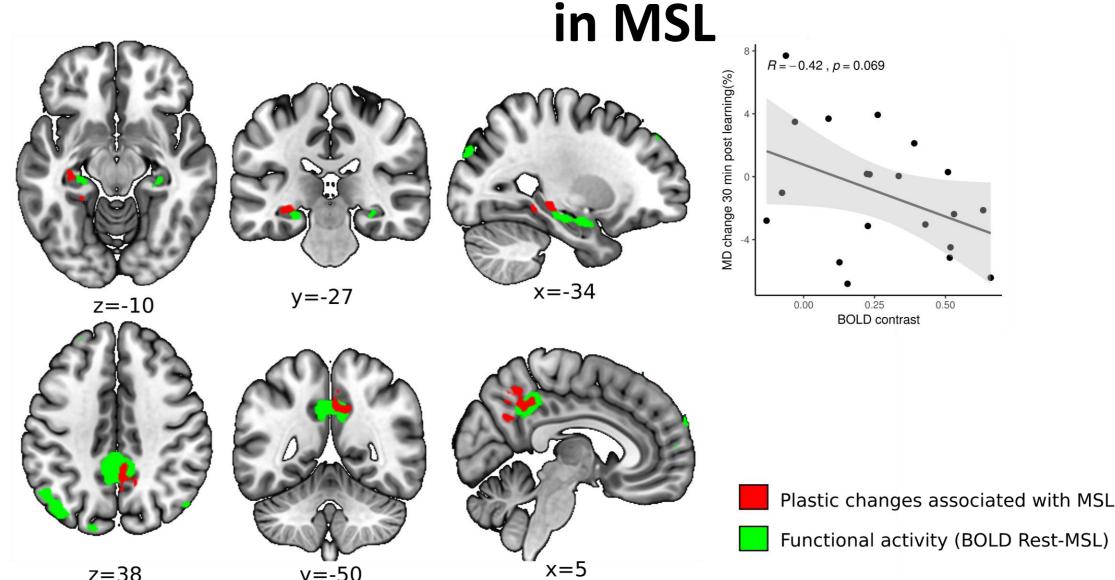
Conclusions

- The left hippocampus is reliably modified by learning in both motor tasks (MSL and VMA) during a short time window.
- This result is consistent with previous work showing that the hippocampus is active during $MSL^{12,13}$, and with the fact that hippocampal amnesic patients show deficits in the consolidation of an MSL task¹⁴.
- There are no previous reports directly linking the hippocampus with memory consolidation in VMA. Adaptation in HM was spared¹⁵. Yet, learning a hippocampal based declarative task after adaptation impairs memory retention¹⁶.
- MD changes in MSL (precuneus and hippocampus) overlapped with areas active in the Rest-Task BOLD contrast. This may relate to the existence of micro offline gains during this task. 17
- Changes in the precuneus area associated with MSL persisted after 24 hours after the end of training. These alterations proved to be long lasting, as they were still present after 7 days.
- The posterior cerebellum (VMA) and the precuneus (MSL) appear to distinguish the two tasks, whereas both engage the lateral anterior cerebellum

Functional activity during MSL

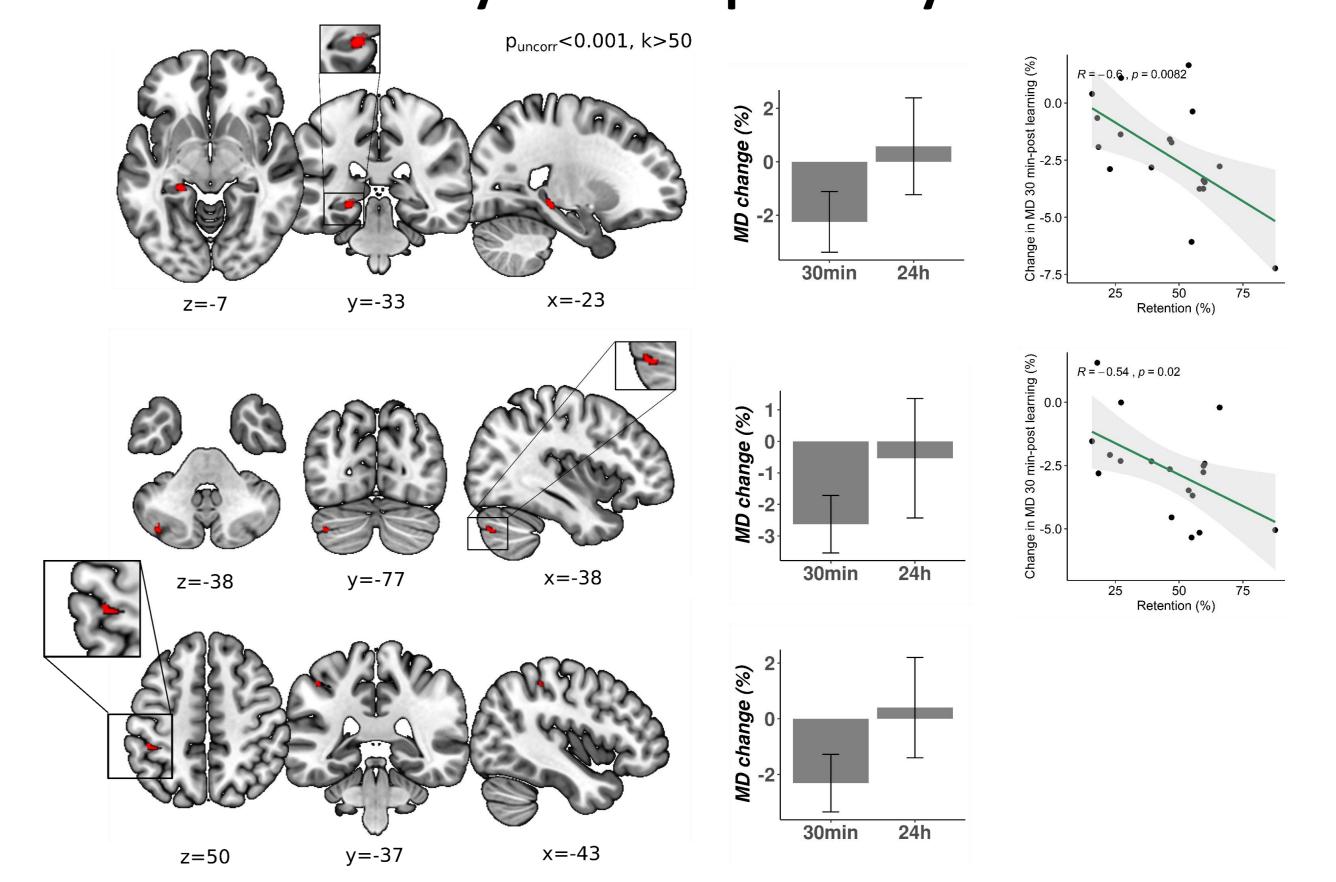


Relation between functional activity and plasticity



Plastic changes ocurring after motor sequence learning (MSL) are associated with functional activity. Brain regions showing a functional deactivation overlap with areas showing MD changes after MSL. Futhermore, in the hippocampus a greater functional deactivation is associated with greater changes in MD 30 minutes post-training.

Behaviorally relevant plasticity in VMA



Time course of longitudinal changes in MD that are associated with visuomotor adaptation (VMA). VMA showed a reduction of MD in the left hippocampus, in the left cerebellum and in the parietal cortex 30 min post-learning. These alterations in MD returned to baseline levels after 24 hs. The plastic changes observed in the hippocampus and the cerebellum are behaviourally relevant since an MD reduction 30 min-post learning is negatively correlated with memory retention 24 hs later. Uncorrected p-values<0.001 are shown in -log10 scale. Error bars represent the confidence interval of the mean. Orientation is neurological.

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ACKNOWLEDGEMENTS Funding:

RBIQ RI-05 international networking grant PICT 2015-0844 Valeria Della Maggiore



