

A Closer Look at BOLD Fluctuations, Decreases, and Increases

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Section on Functional Imaging Methods

FIM.NIMH.NIH.GOV

&

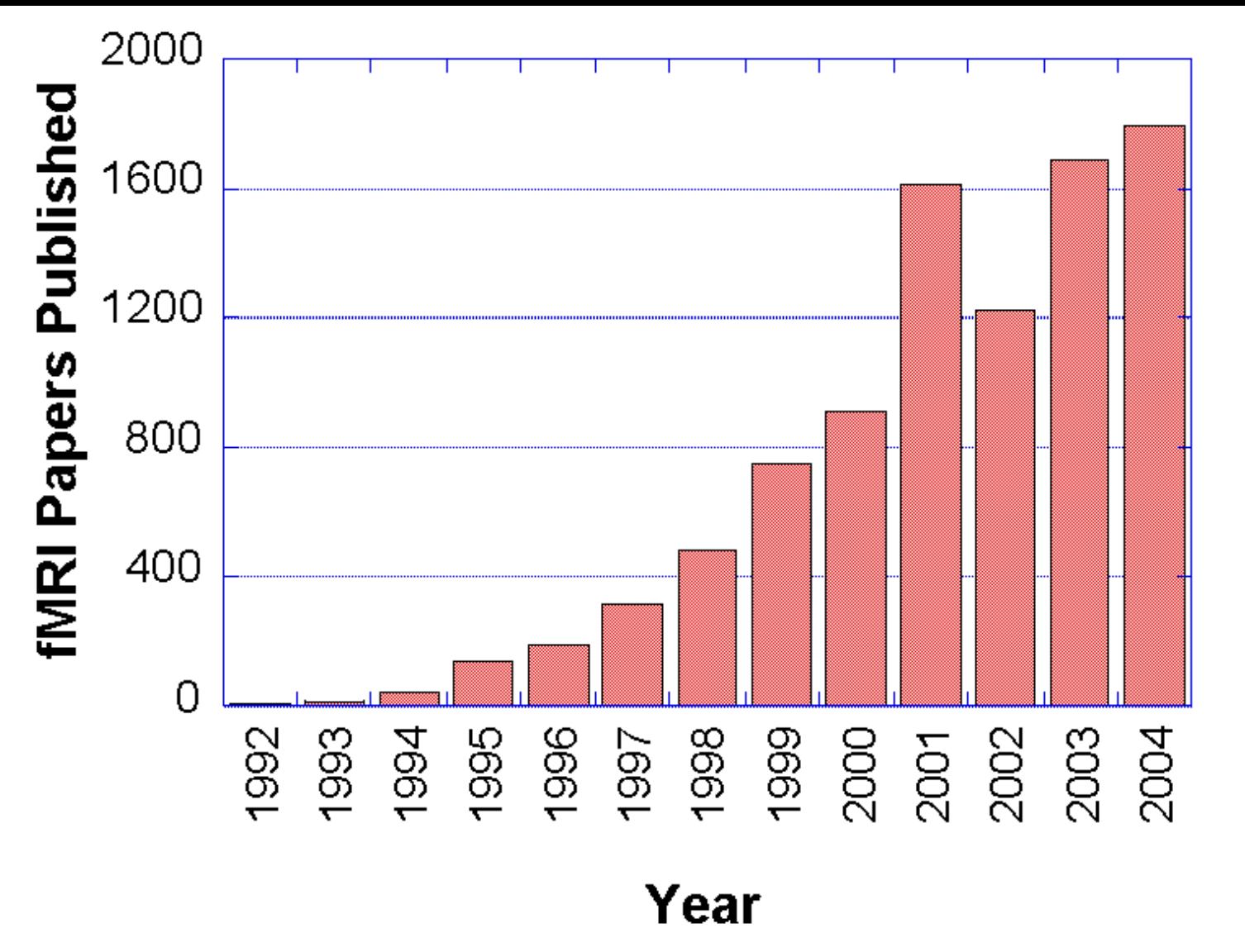
Functional MRI Facility

FMRIF.NIMH.NIH.GOV



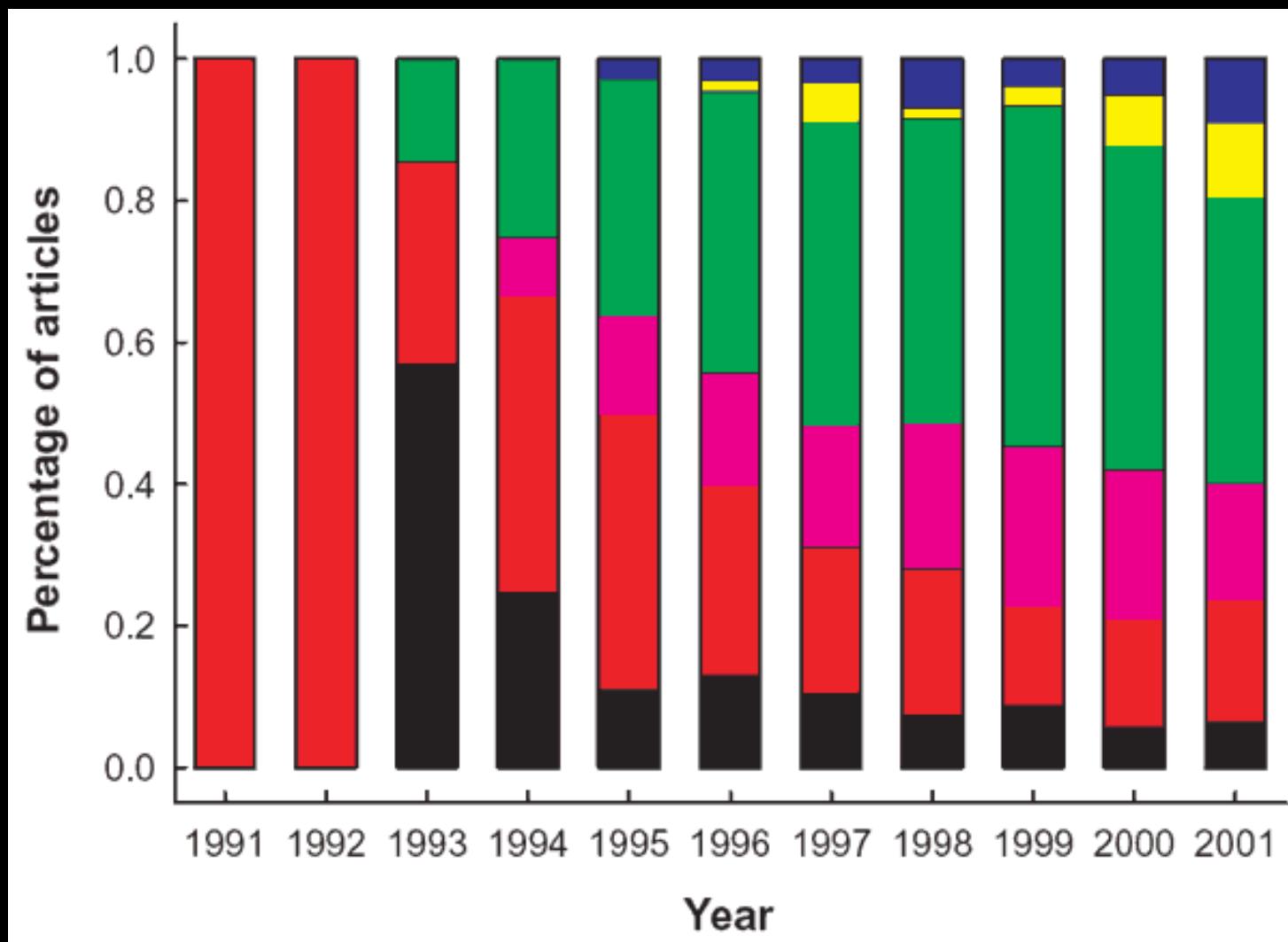


Jason Diamond
Natalia Petridou
Rasmus Birn
Niko Kriegeskorte
Jerzy Bodurka



Many remaining unknowns

- Relationship between neuronal activity and BOLD contrast?
- Sources of BOLD variability?
- • Information content / artifact in time series fluctuations?
- • Source of BOLD timing and dynamics?
- • Sources of BOLD signal decreases?
- Other sources of functional contrast?
- • Temporal resolution?
- • Spatial resolution?
- Clinical utility?
- • Best processing and display strategies?
- Best paradigm designs strategies?
- Optimal field strength?
- Applications..??



Motor (black)
Primary Sensory (red)
Integrative Sensory (violet)
Basic Cognition (green)
High-Order Cognition (yellow)
Emotion (blue)

J. Illes, M. P. Kirschen, J.
D. E. Gabrielli, *Nature
Neuroscience*, 6 (3)m
p.205

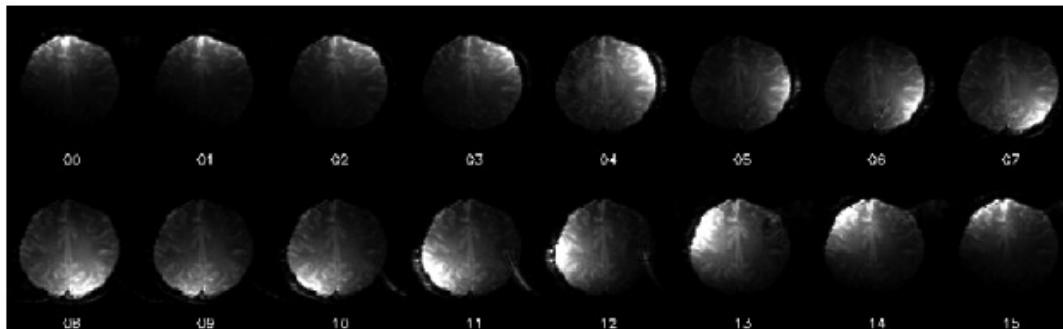
16 channel parallel receiver coil



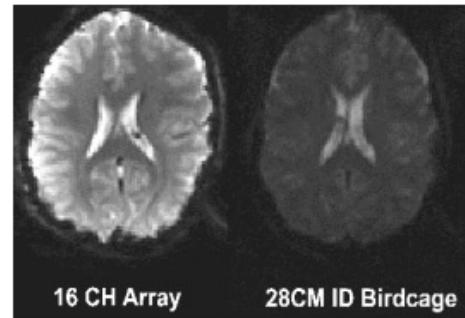
A



B

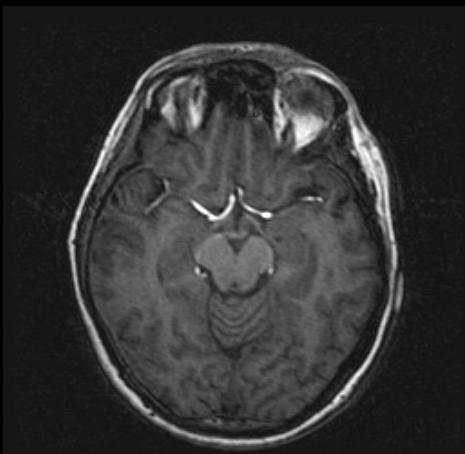


C

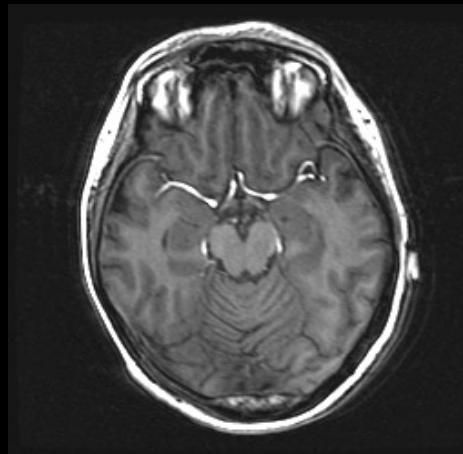


D

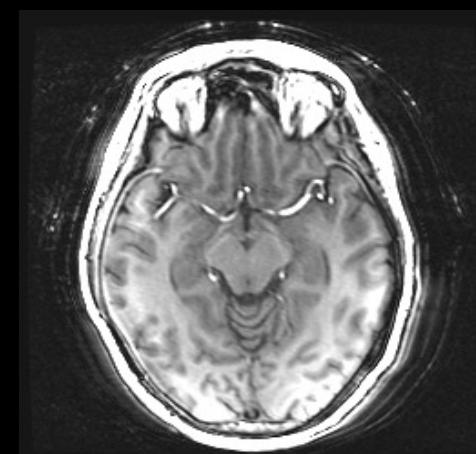
8 channel parallel receiver coil



GE birdcage



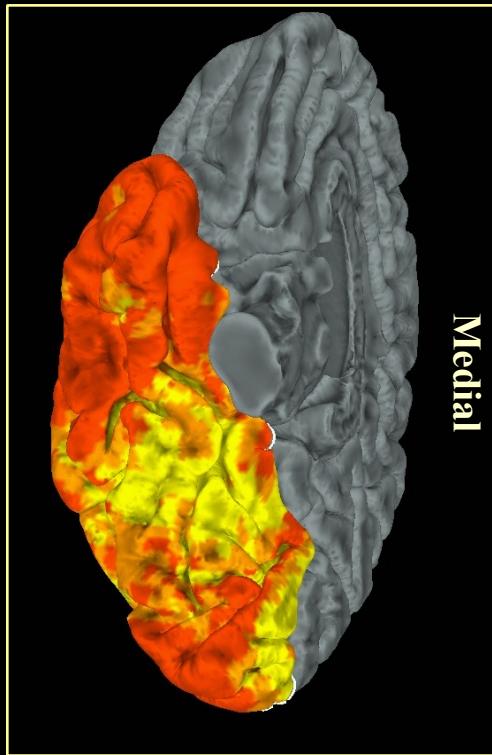
GE 8 channel coil



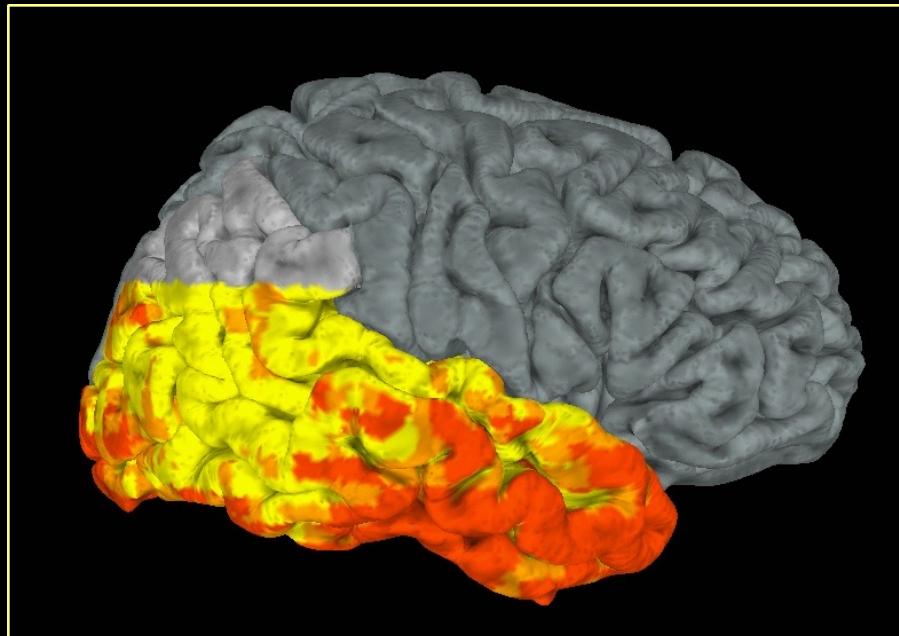
Nova 8 channel coil

Average Temporal Signal-to-Noise ratio Comparison Between Coils

Anterior



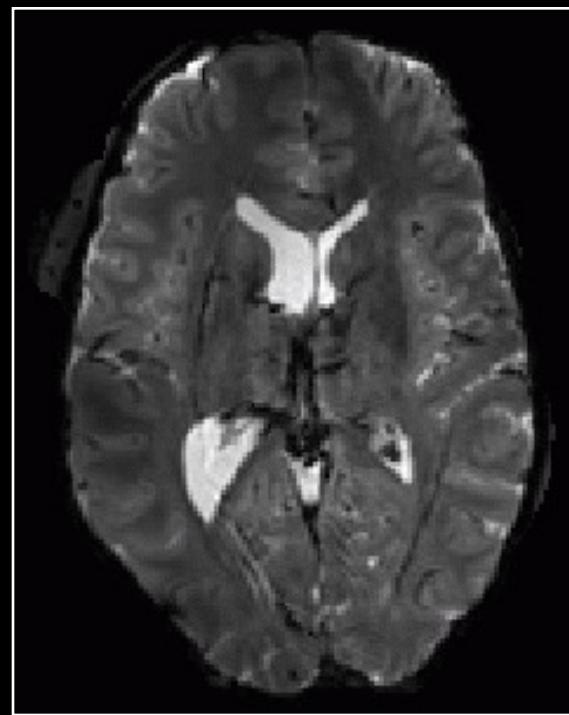
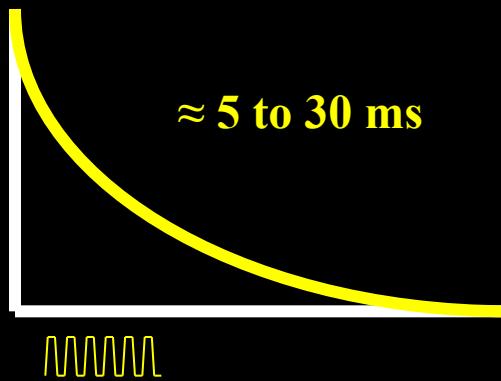
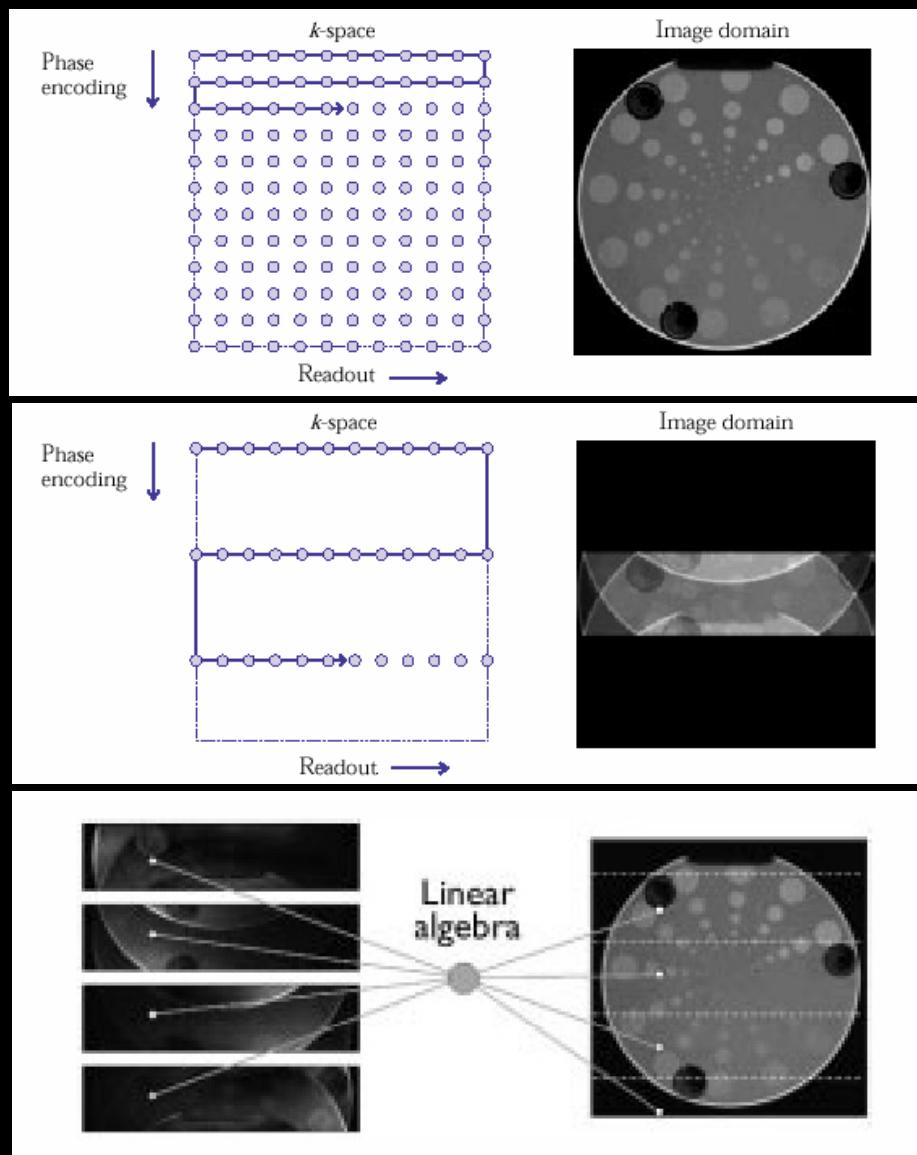
Medial



Posterior



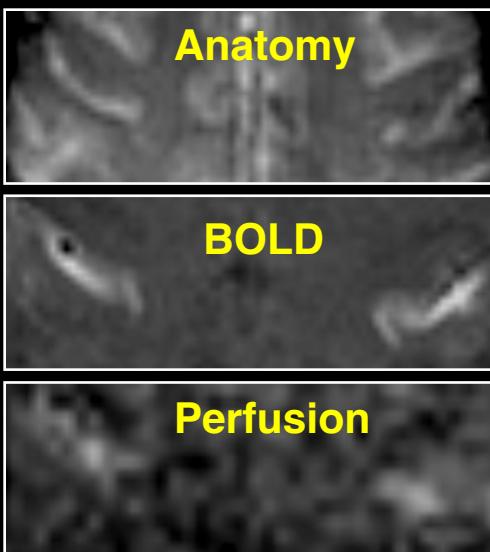
Sensitivity Encoding (SENSE) Imaging



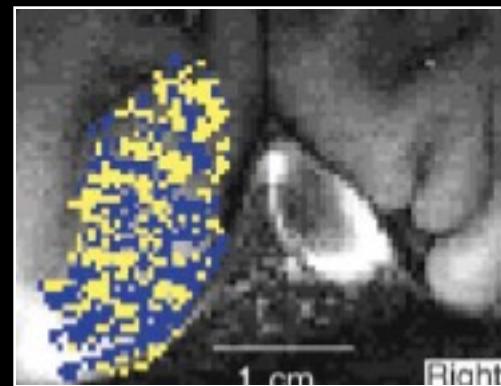
Pruessmann, et al.

3T single-shot SENSE EPI using 16 channels: 1.25x1.25x2mm

Spatial Resolution



0.47 x 0.47 in plane resolution

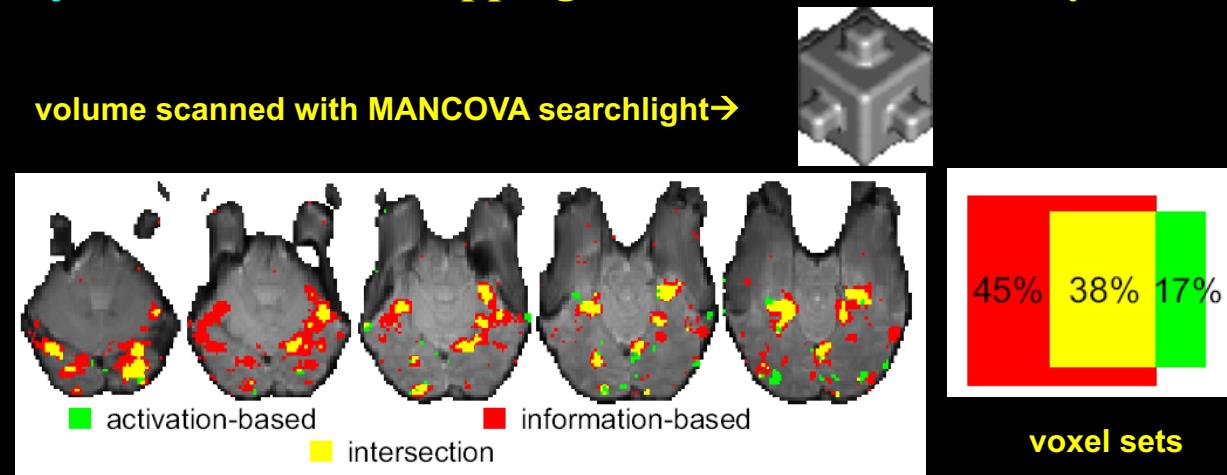


Cheng, et al. (2001) Neuron, 32:359-374

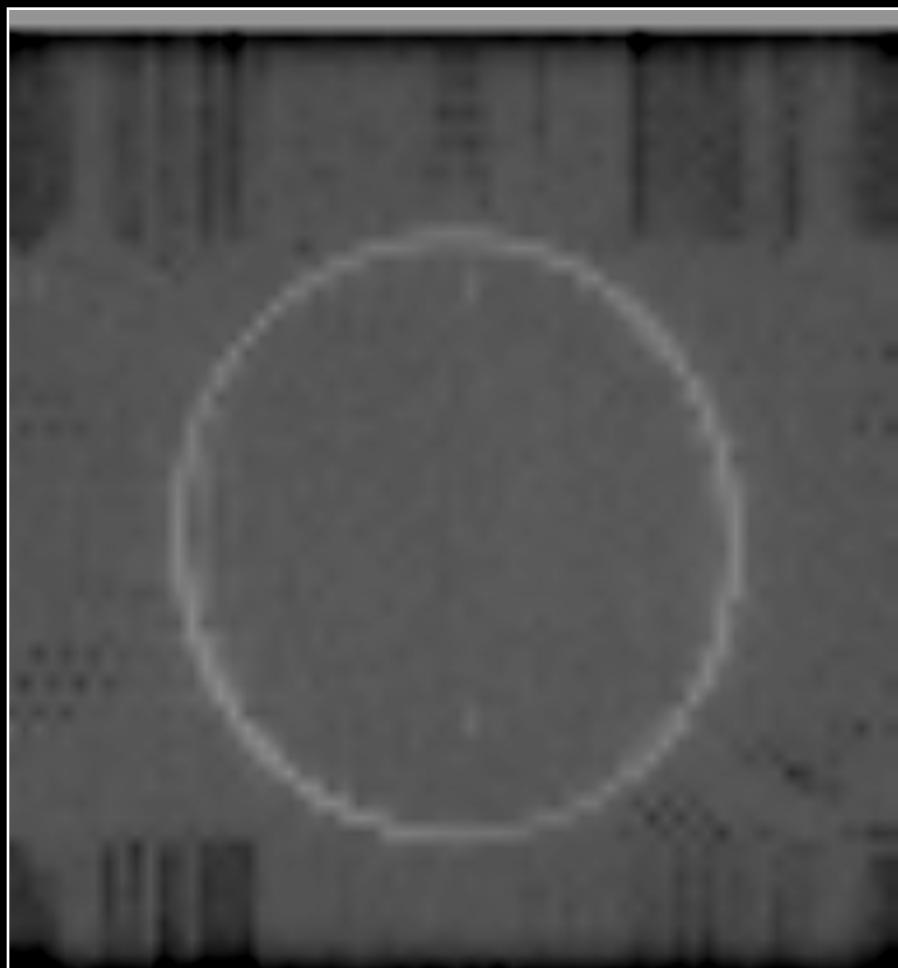
Activation-based mapping: data smoothing
(classical approach)



Information-based mapping: local multivariate analysis

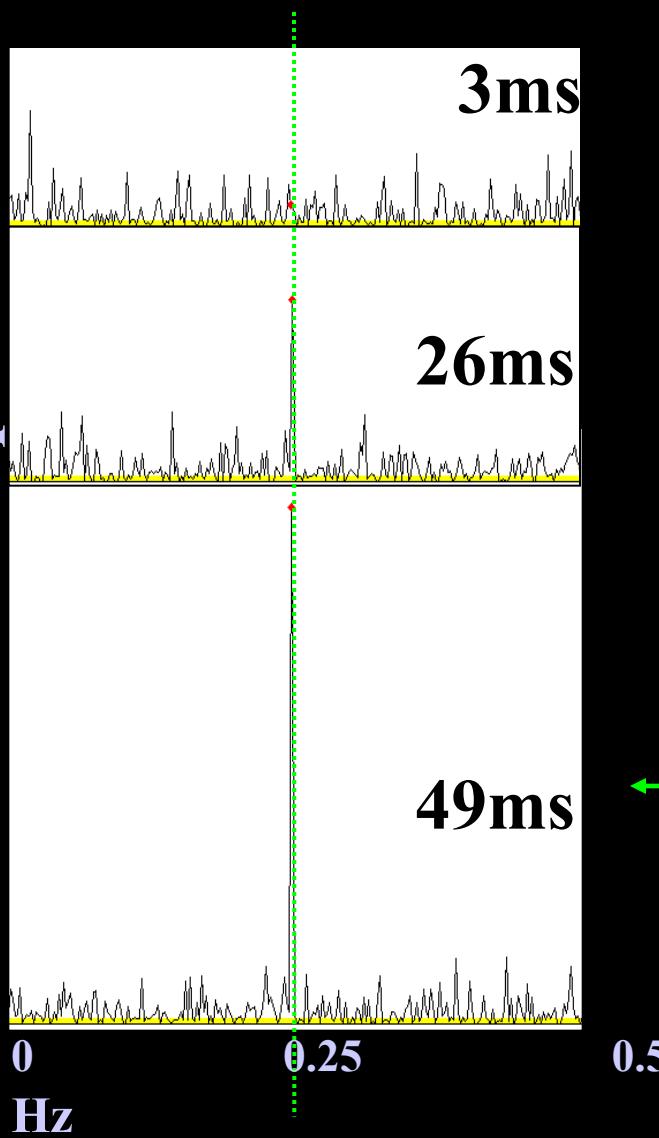


Fluctuations



Respiration Effects

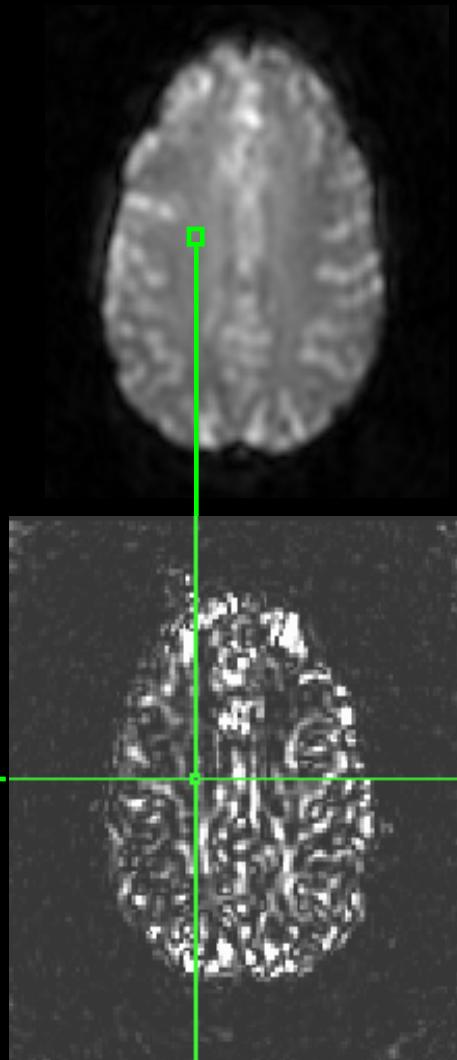
Power Spectra



0.5

Hz

Image
Respiration map



Cardiac Effects

Power Spectra

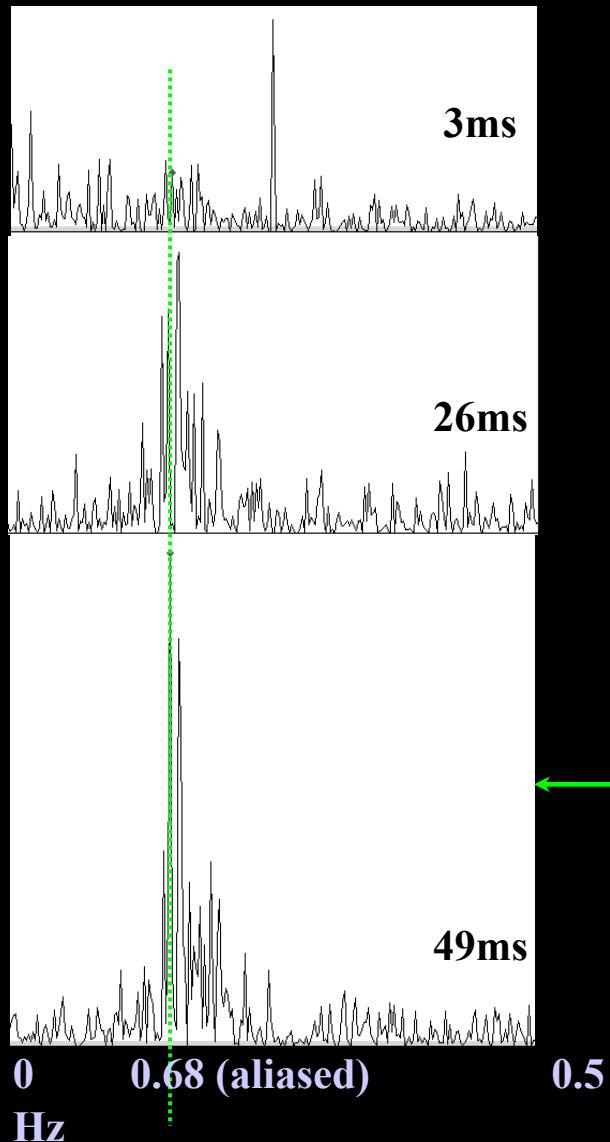
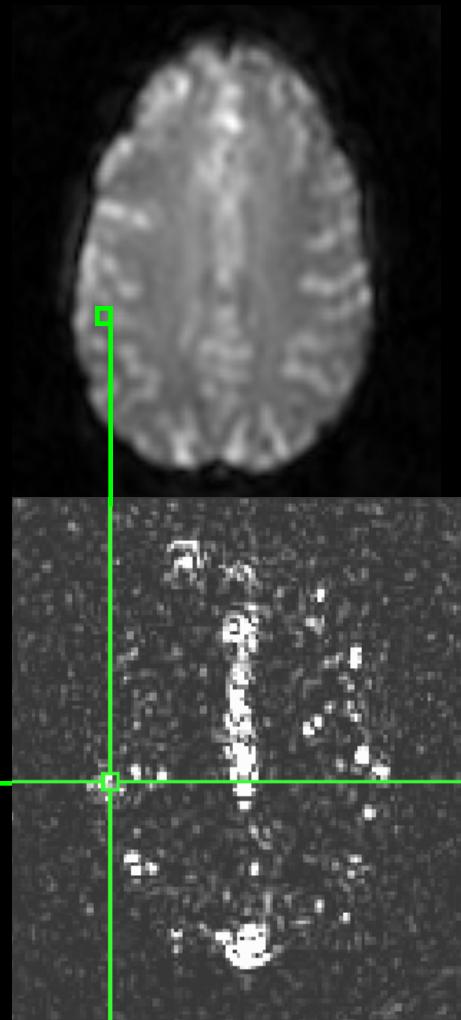
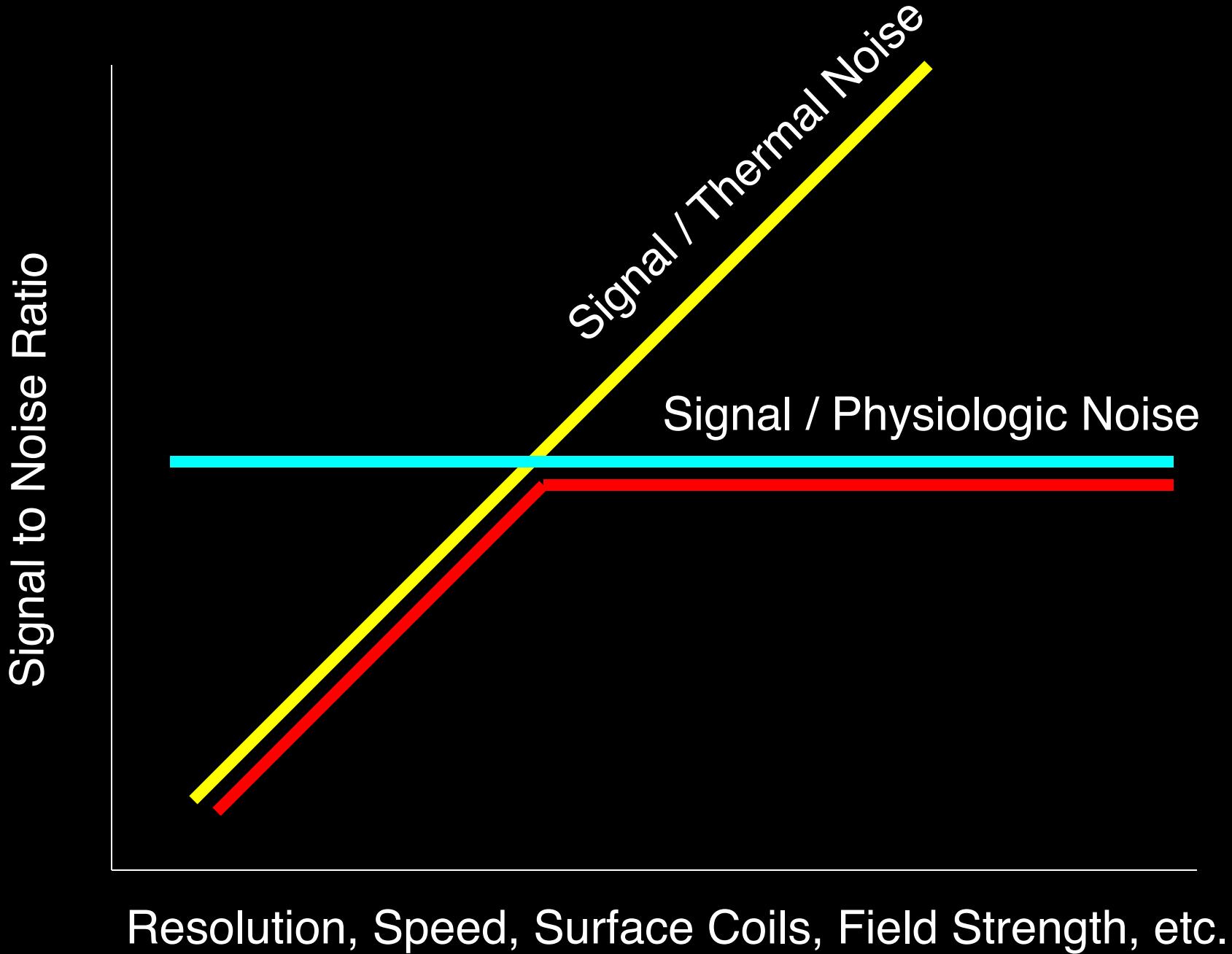
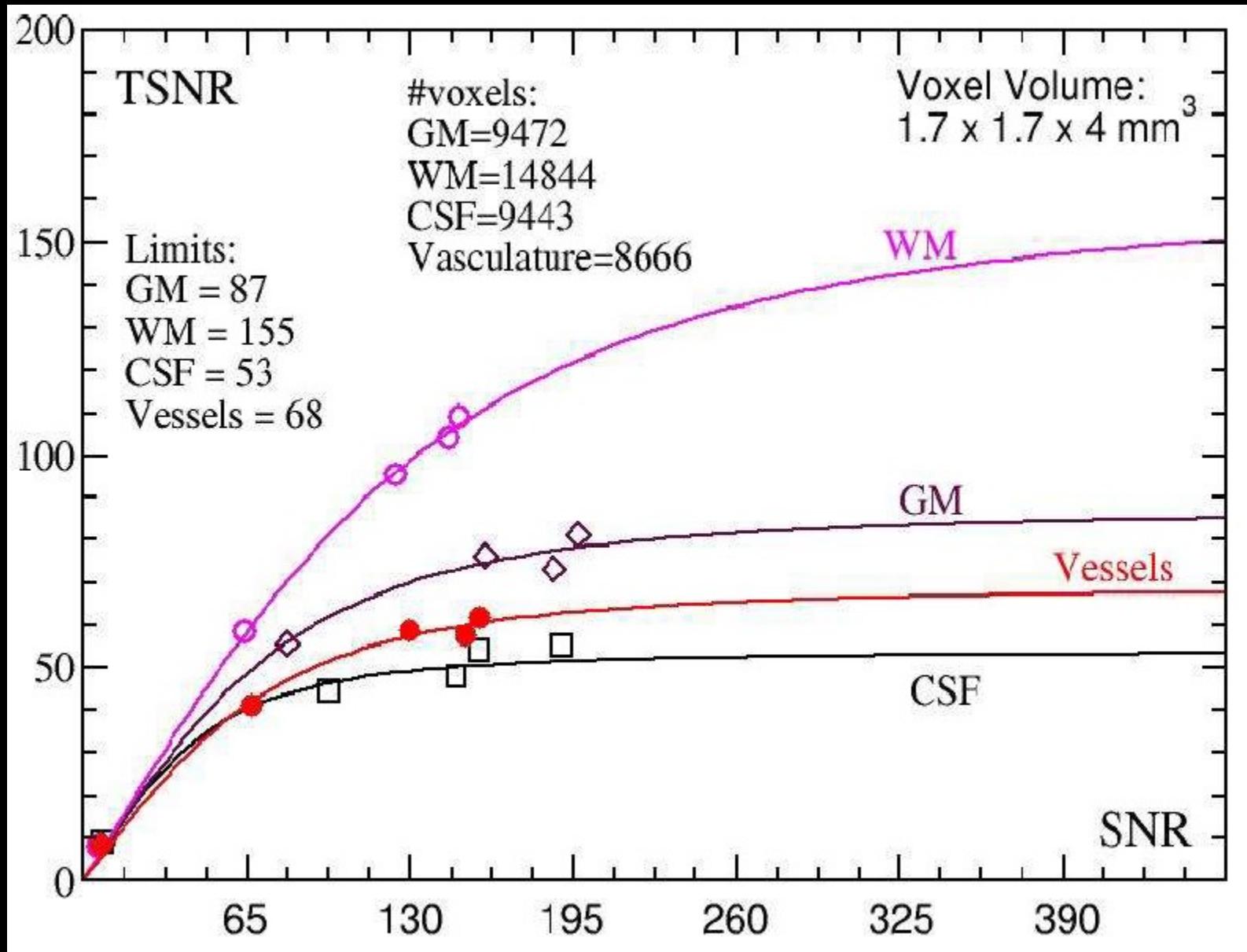


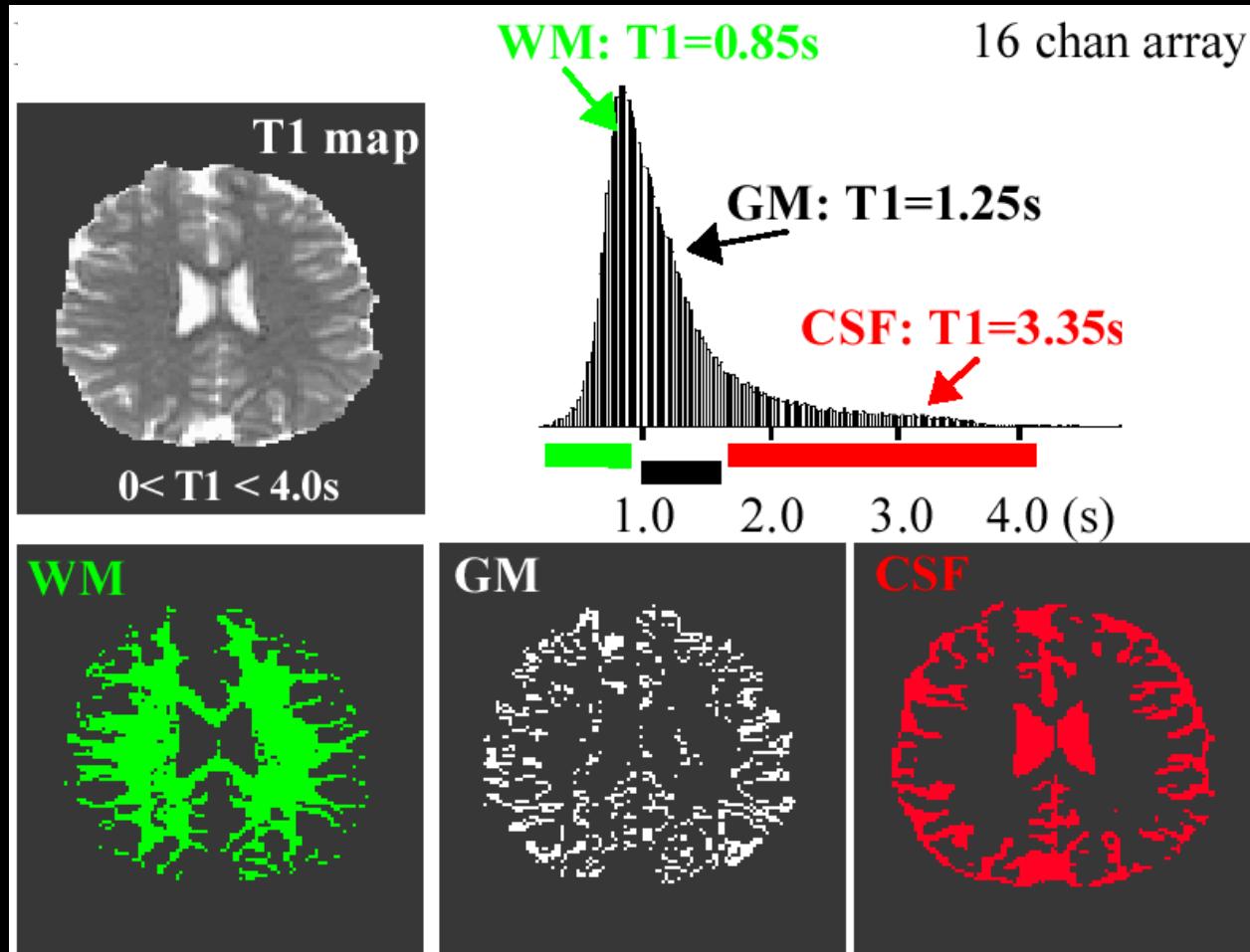
Image
Cardiac map



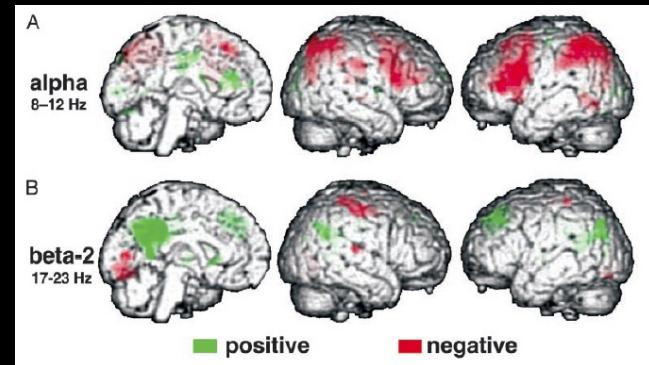
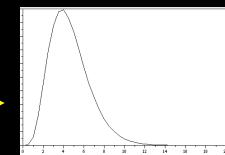
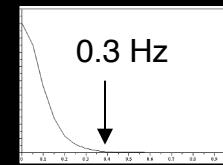
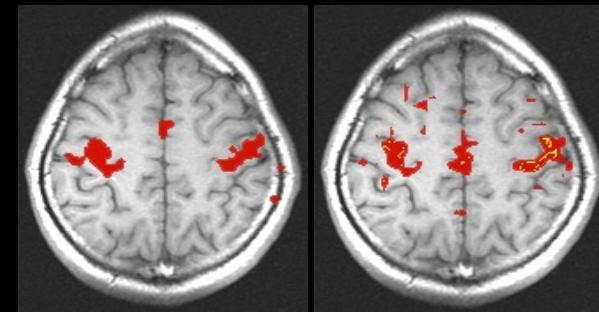
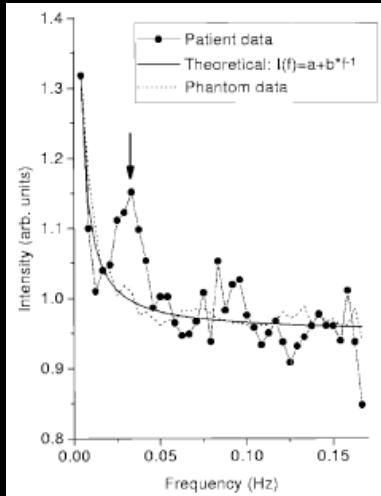




Segmentation using EPI Transient

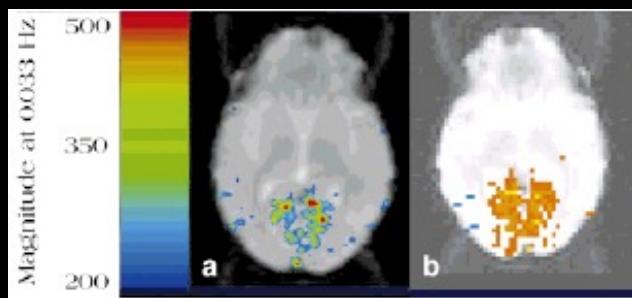


Interesting Fluctuations

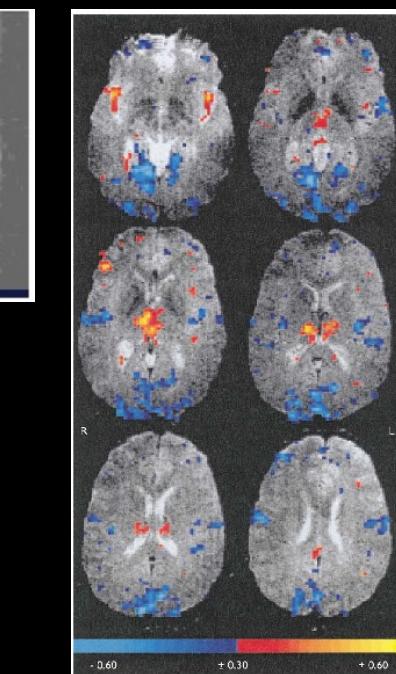
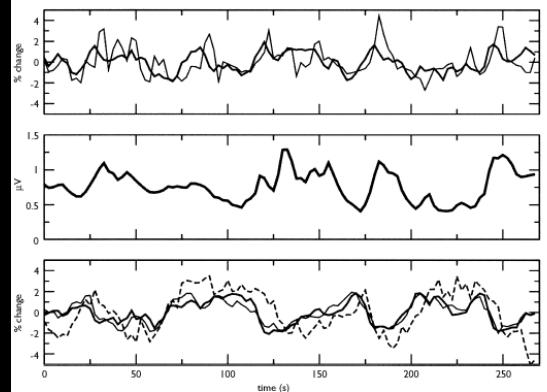


Biswal, et al (1995), MRM 34, 537-541

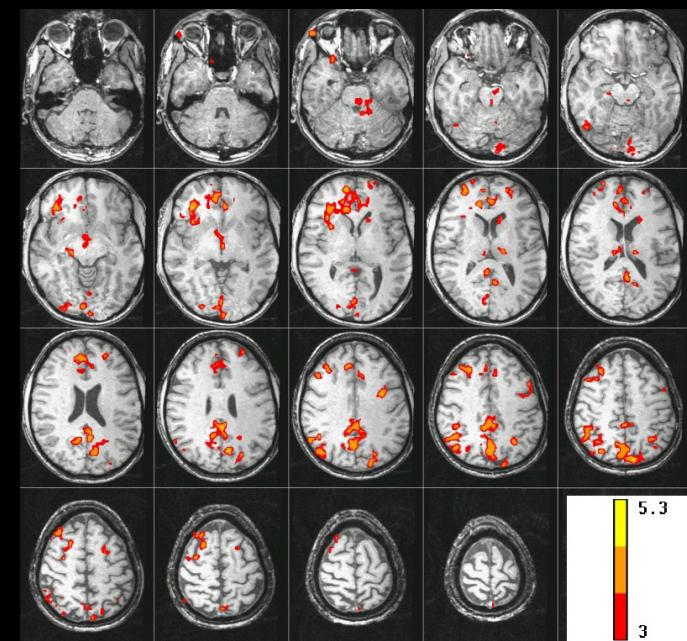
Laufs, et al (1995), PNAS 100 (19), 11053=11058



Kiviniemi, et al (2000), MRM 44, 373-378



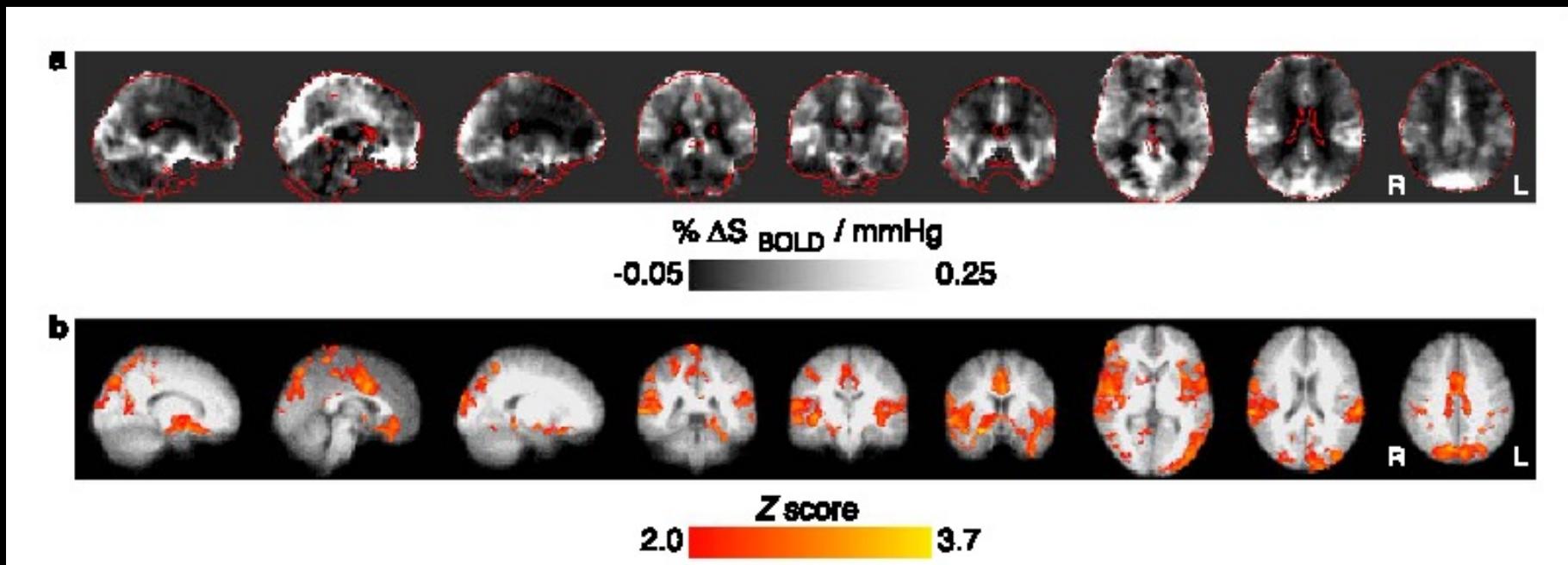
Goldman, et al (2002), Neuroreport



Patterson, et al (2002), NeuroImage 17, 1787-1806

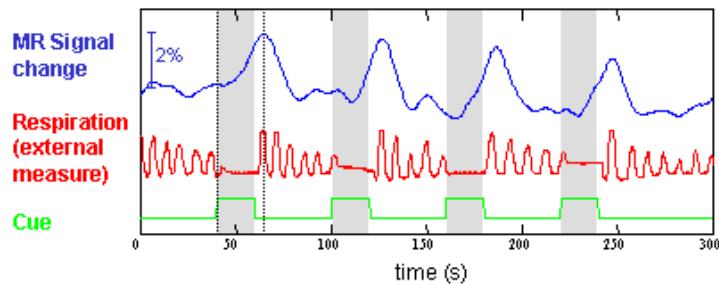
Respiration fluctuations revisited...

Correlation with spontaneous changes in end tidal CO₂

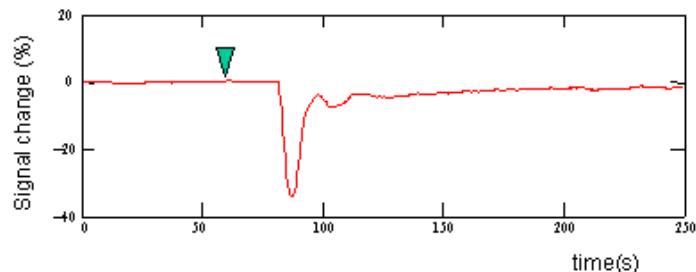


R. G. Wise, et al, NeuroImage 21 (2004), 1652-1664

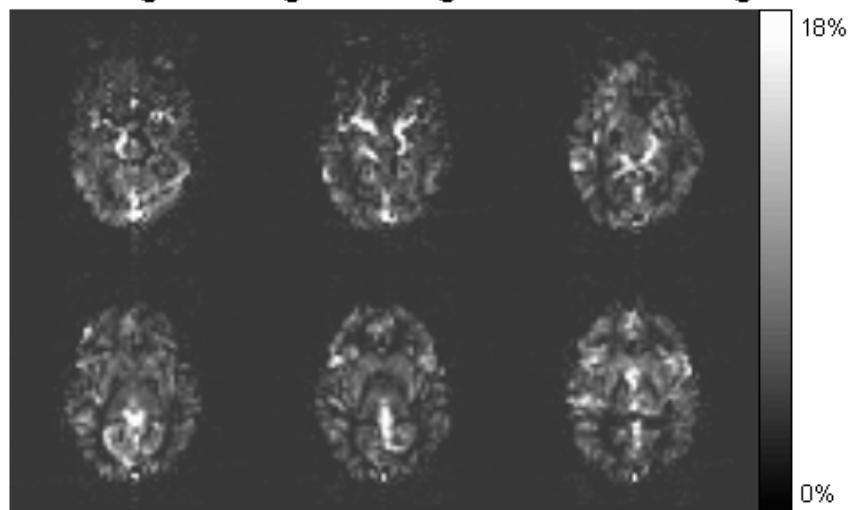
Breath-Holding



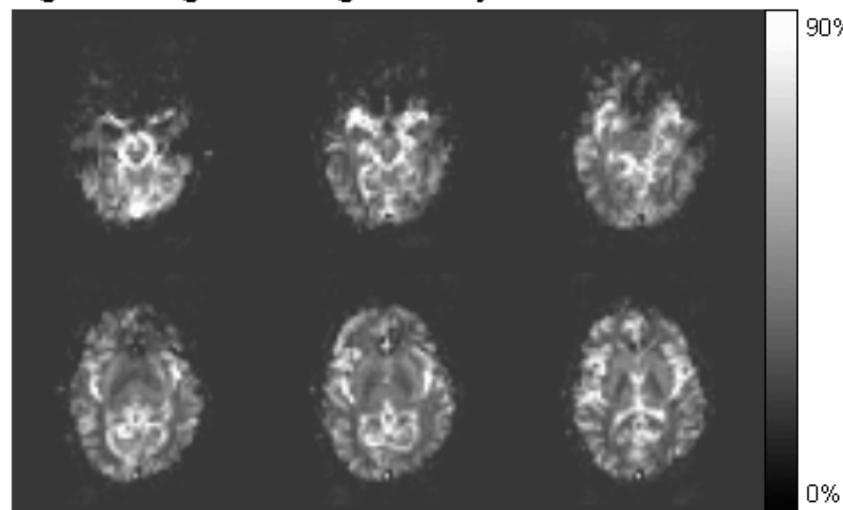
Gd-DTPA



BOLD Signal change resulting from breath holding

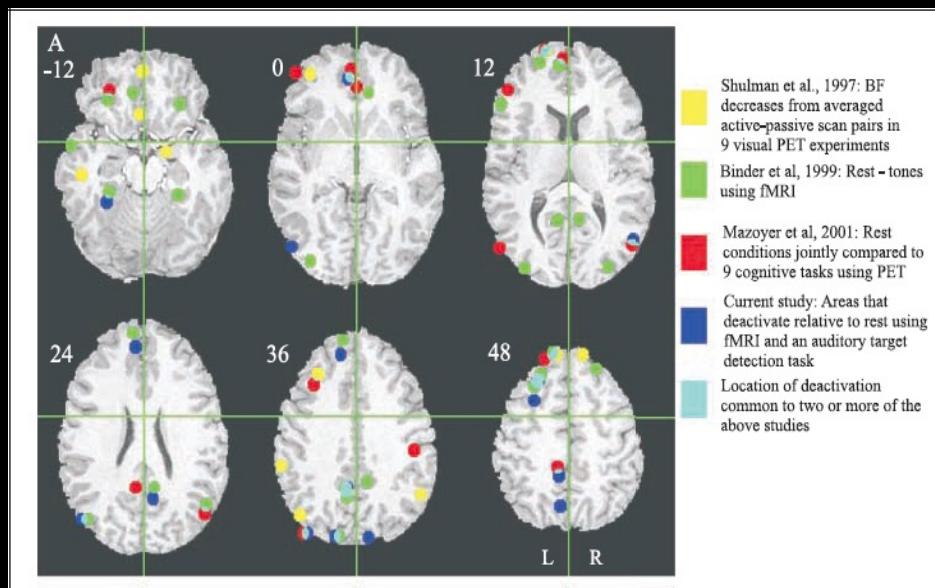
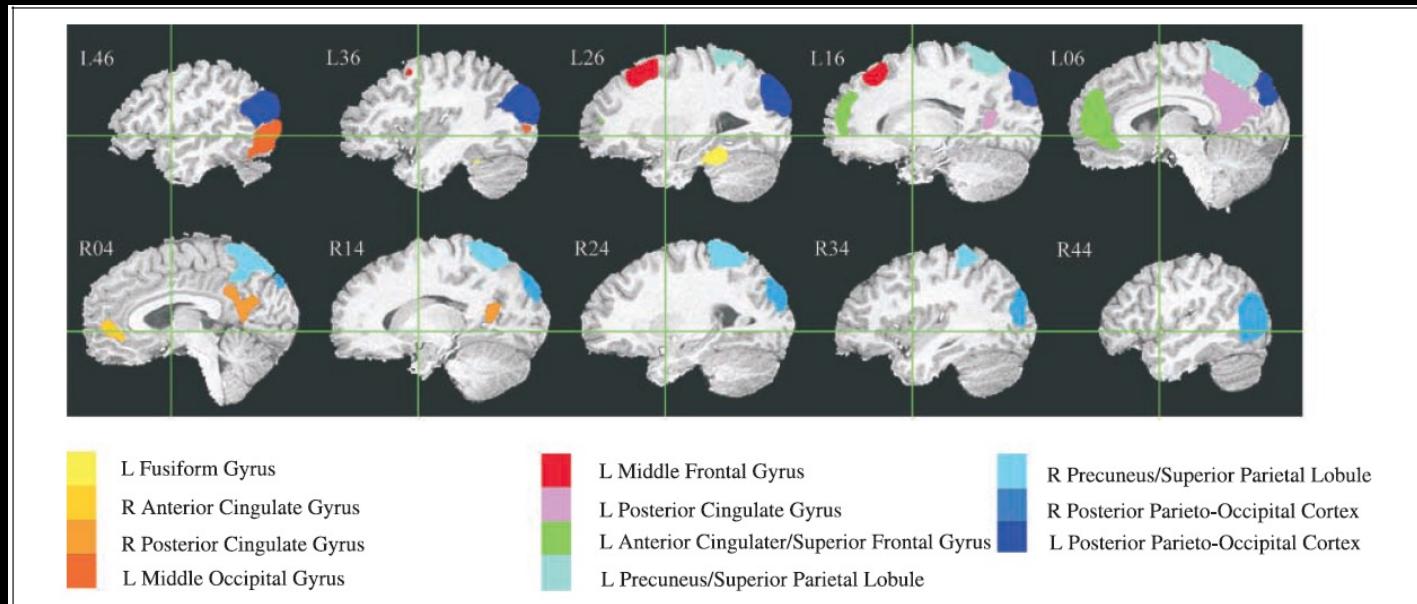


Signal change resulting bolus injection of Gd-DTPA



Note that although there are many similarities in the signal change amplitudes resulting from breath holding and exogenous contrast agent, there are several regions showing differences potentially indicating different contributions from arteries and veins.

Regions showing decreases during cognitive tasks



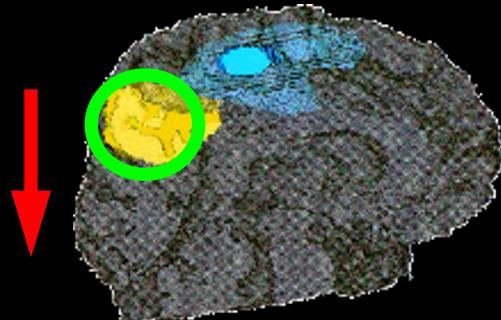
**strongly reduced
vigilance:**



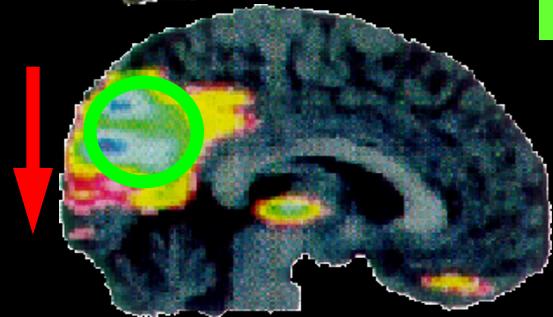
rest

**perception
+
action**

sleep

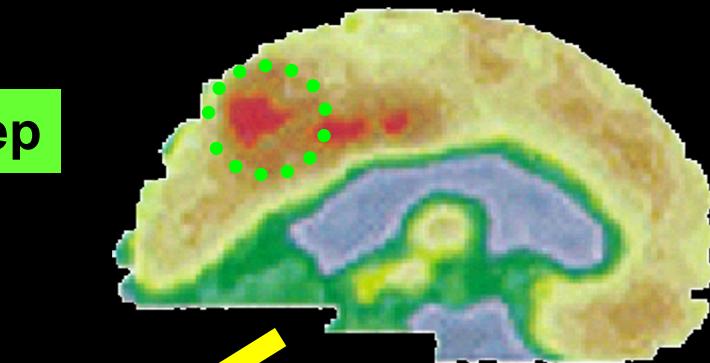


**vegetative
state**

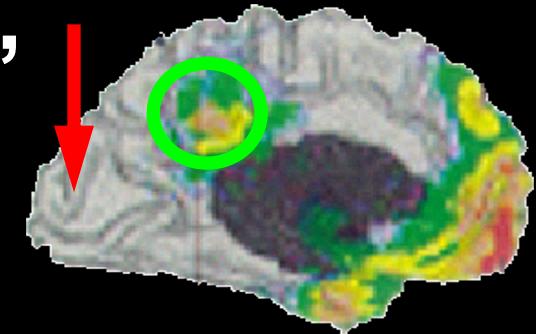


**general
anaesthesia**

“default mode”

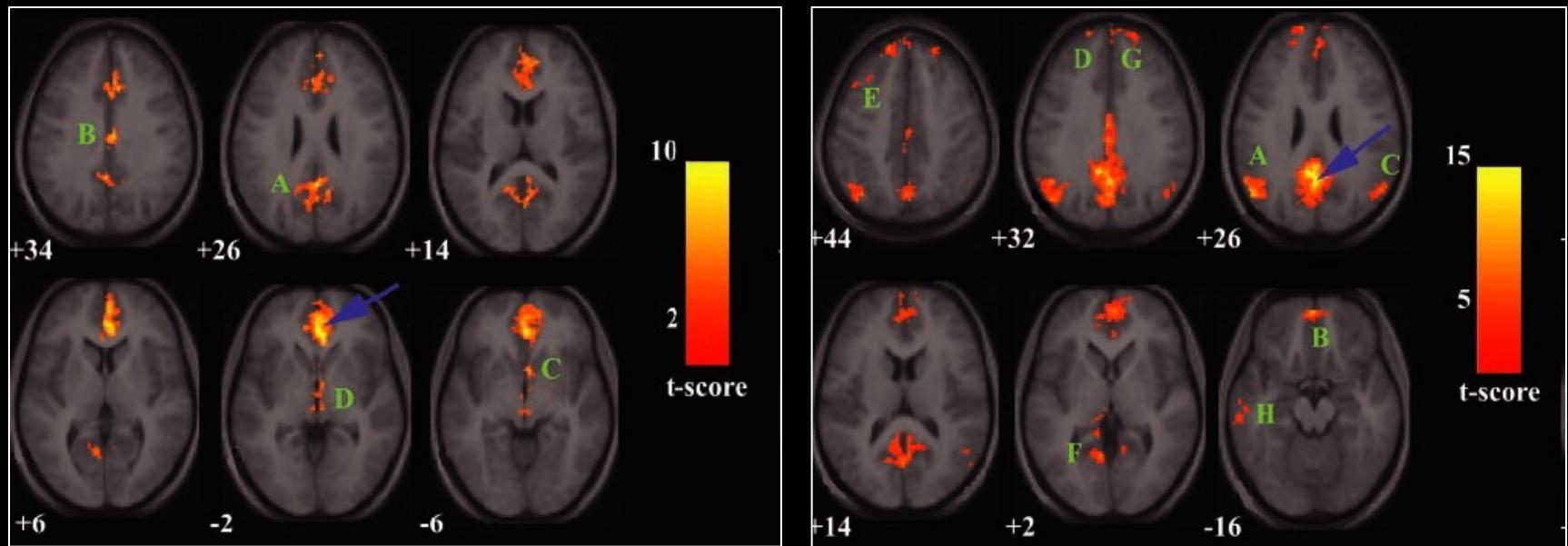


tasks



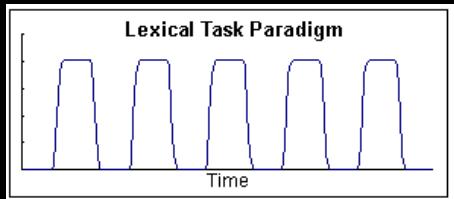
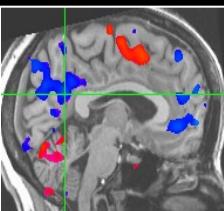
(Gusnard and Raichle 2001)

Spatial correlation of decreased signal change regions with regions showing resting state correlated fluctuations?

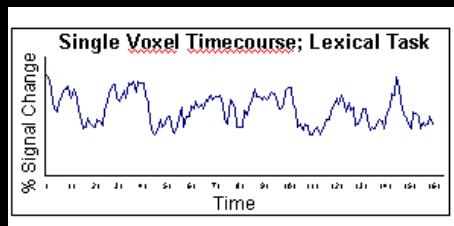
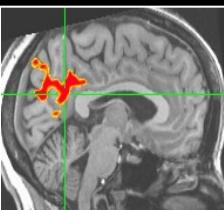


Greicius, et al (2003), PNAS 100 (1), 253-258

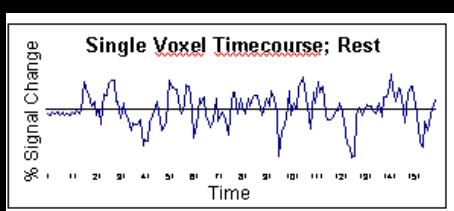
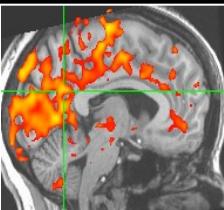
Lexical Task



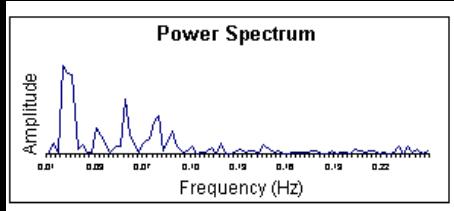
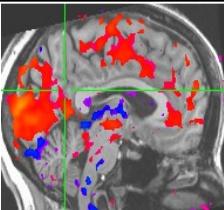
ROI



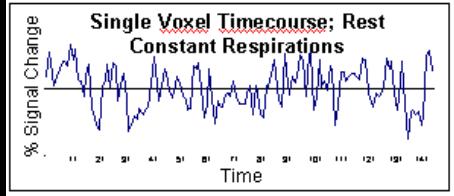
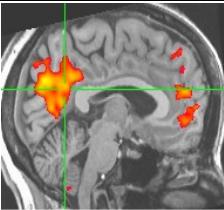
Functional Connectivity: Rest



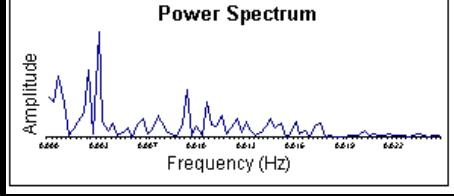
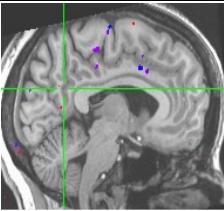
Correlation with Respiration Vol./Time



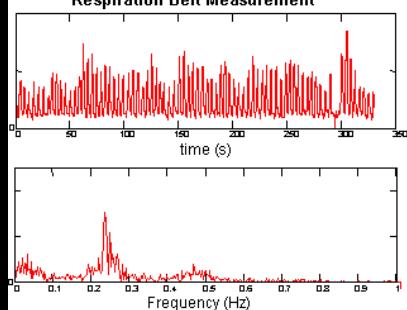
Functional Connectivity: Constant Resp.



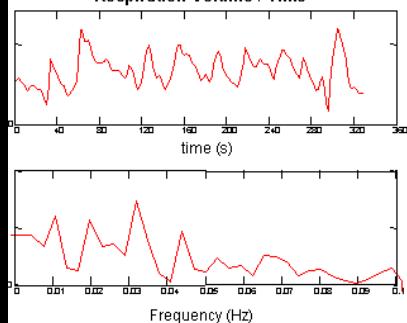
Correlation with Respiration Vol./Time: Constant Resp.



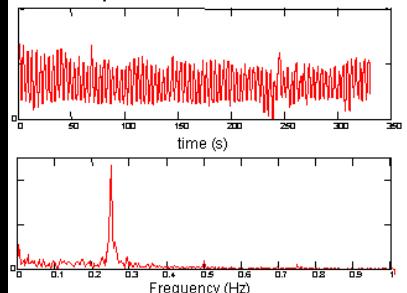
Respiration Belt Measurement



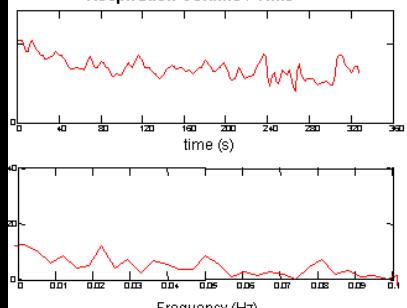
Respiration Volume / Time



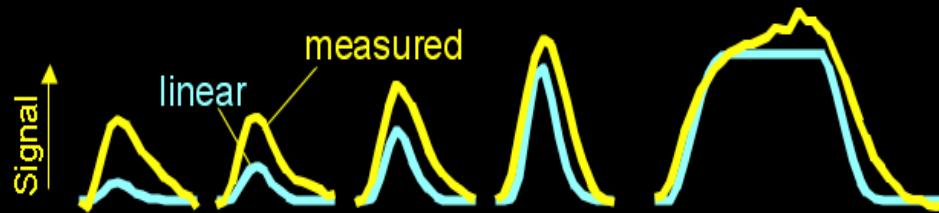
Respiration Belt Measurement



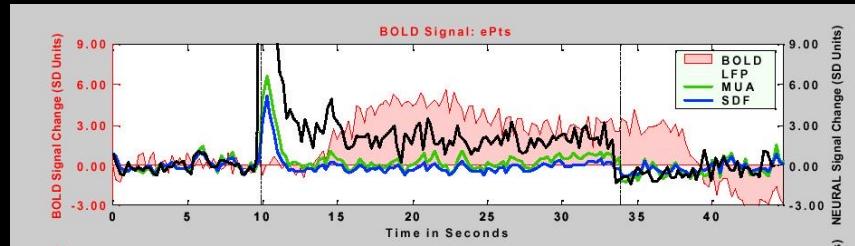
Respiration Volume / Time



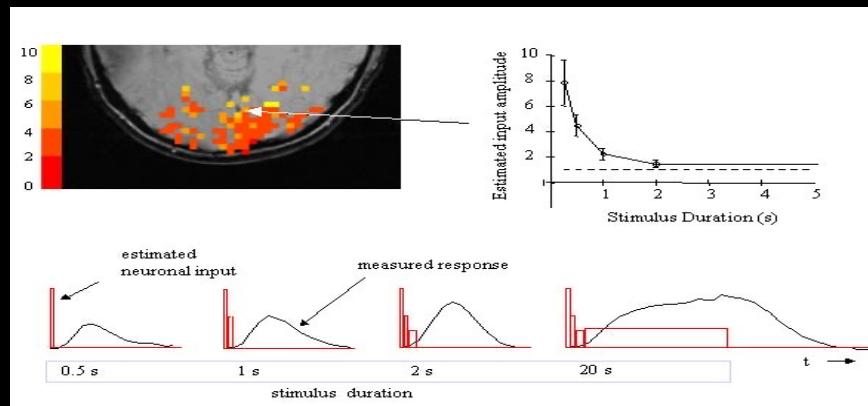
Increases: linearity



R. M. Birn, (2001) NeuroImage, 14: 817-826.



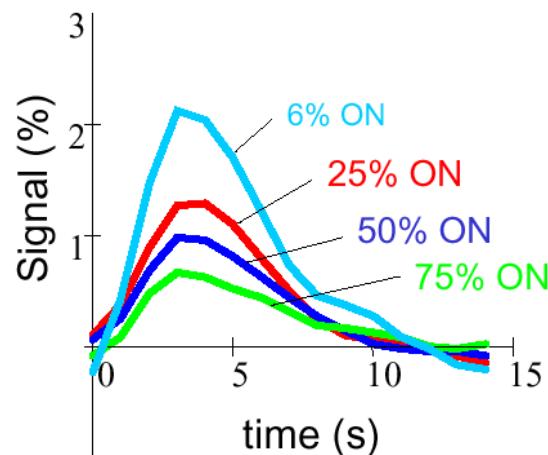
Logothetis et al. (2001) Nature, 412, 150-157.



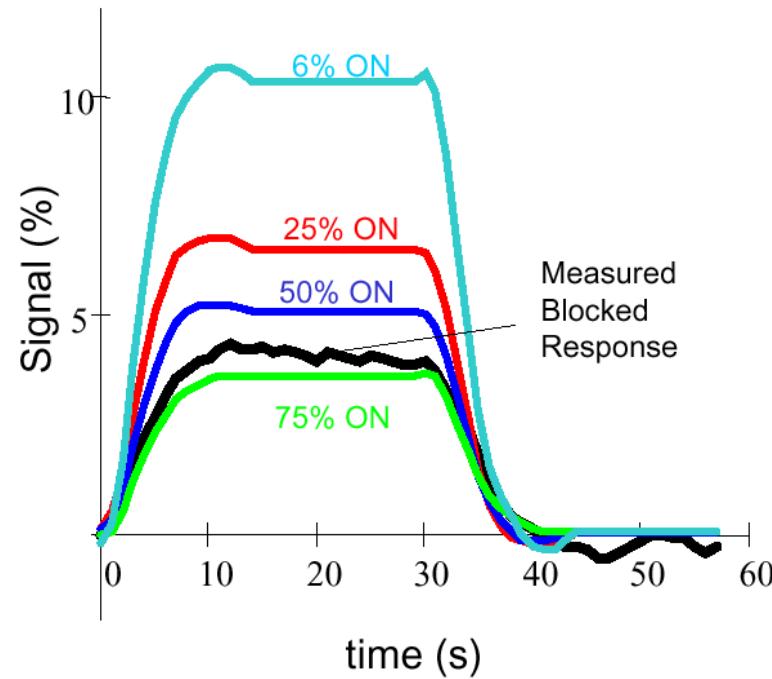
P. A. Bandettini et al, (2001) Nature Neuroscience, 4: 864-866.

Increases: duty cycle

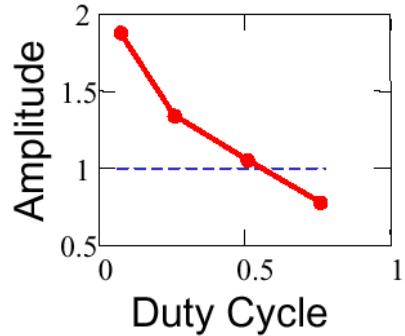
a Measured Event-related Responses



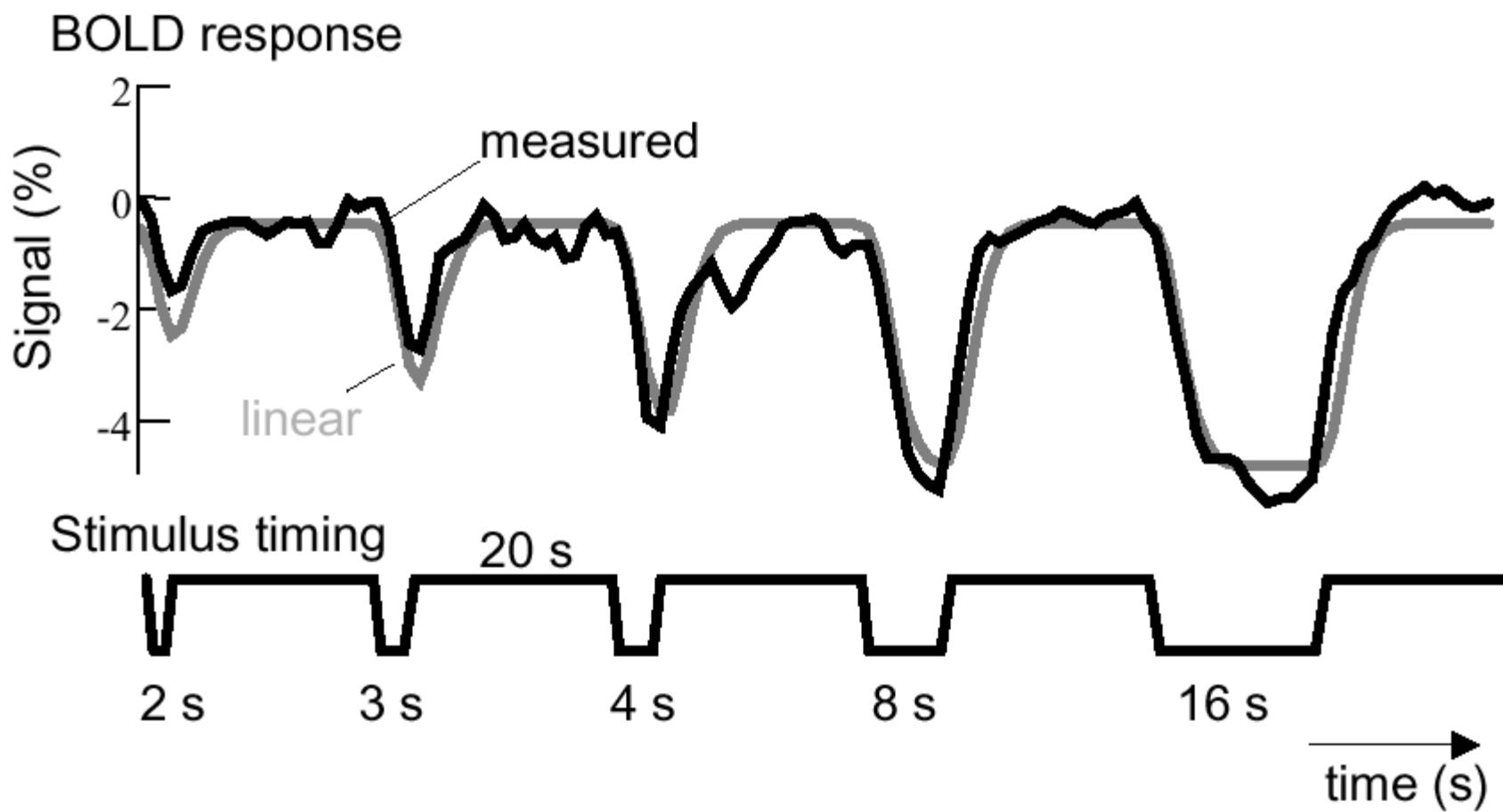
b Predicted Blocked Responses

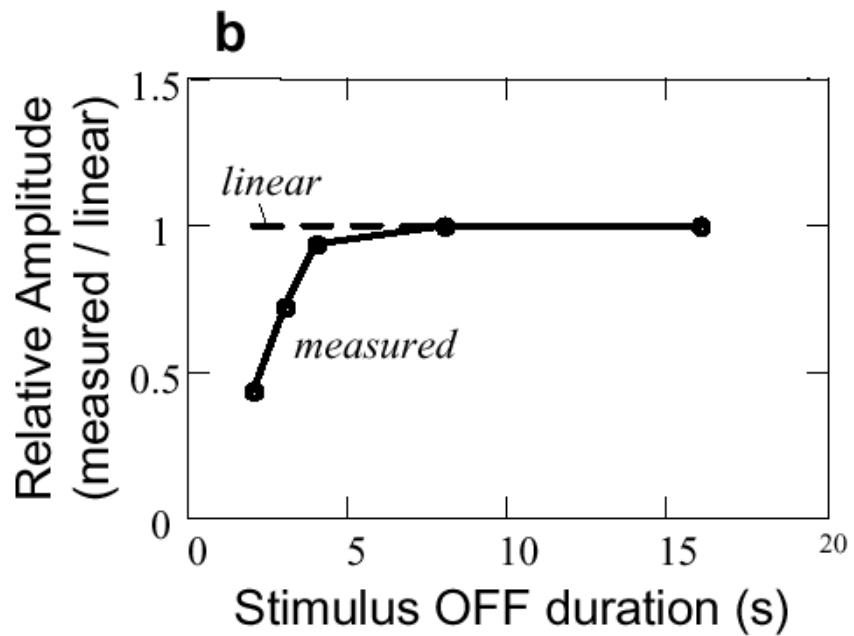
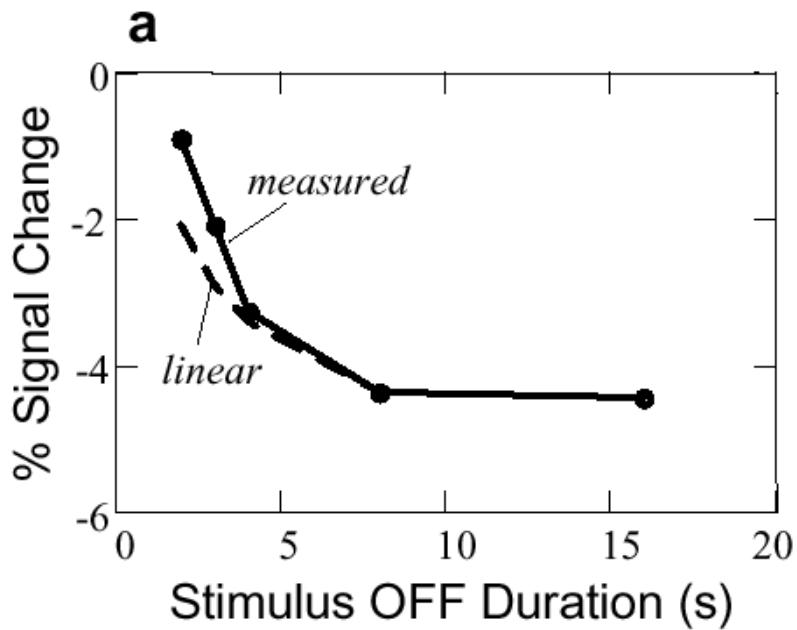


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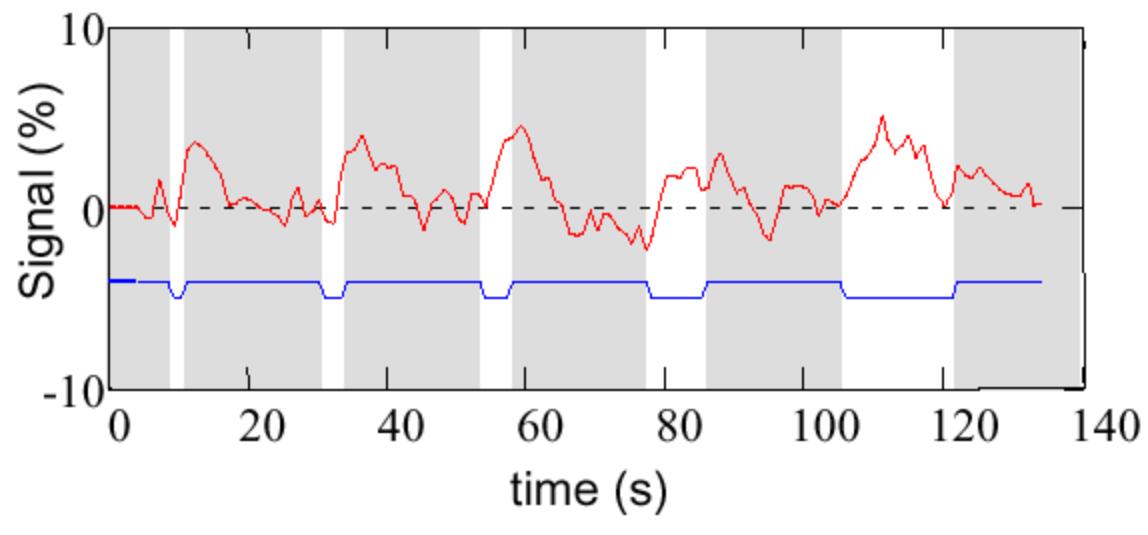
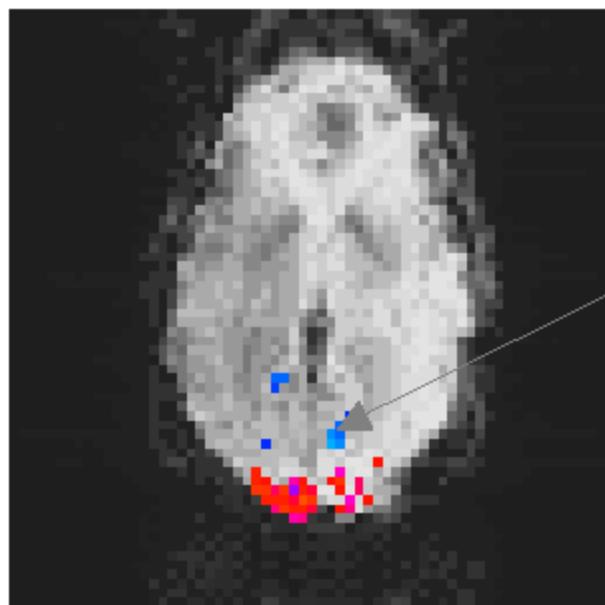


Decreases: linearity



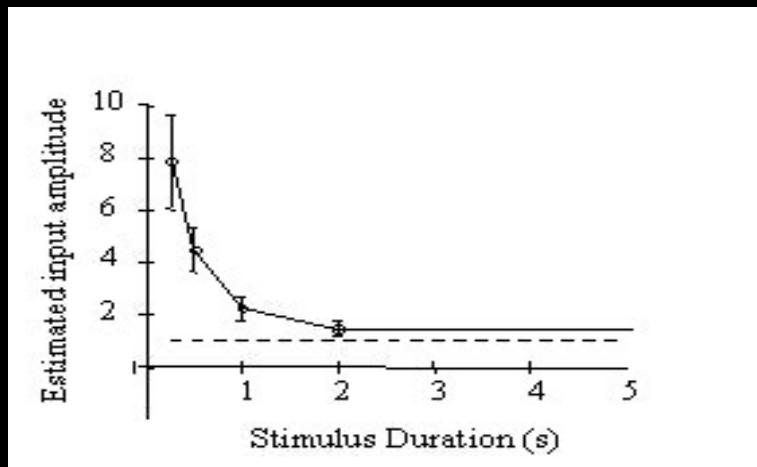


We also see increases during stimulus cessation...

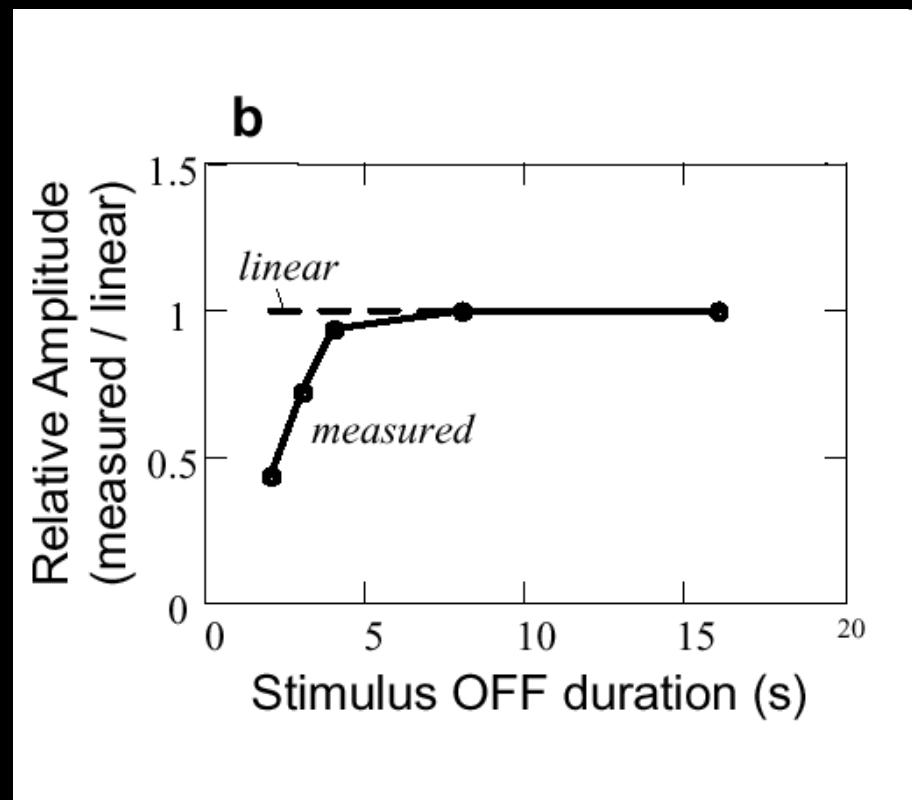


Visual stimulation

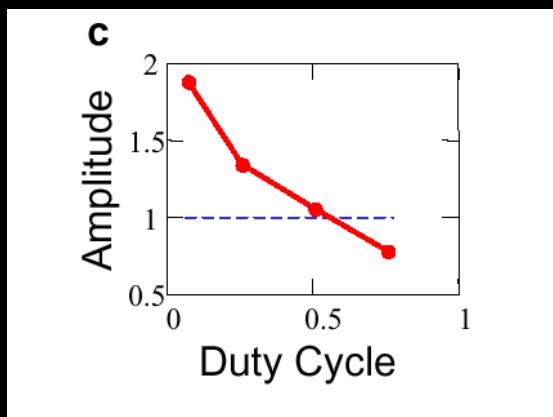
Increase: duration on



Decrease: duration off



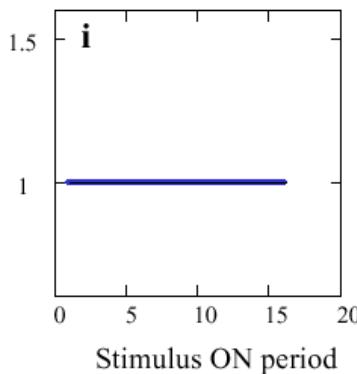
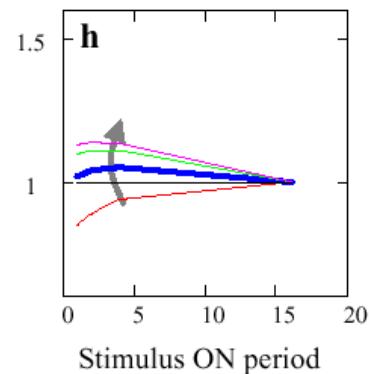
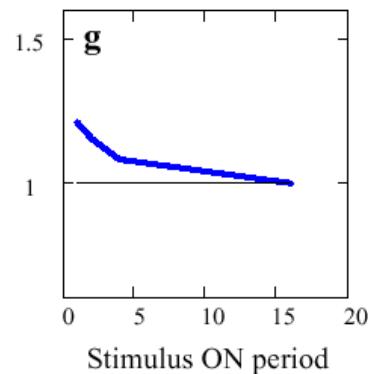
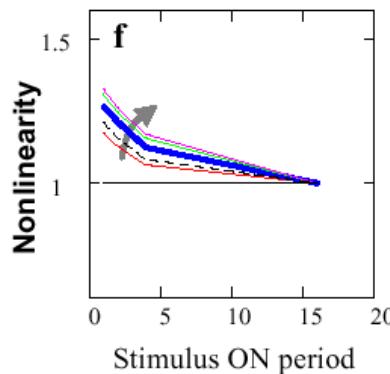
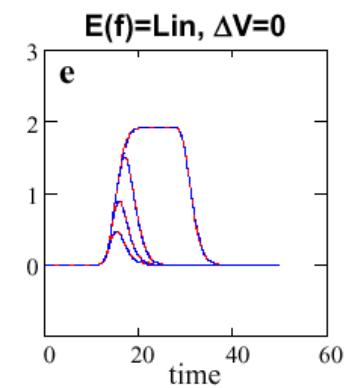
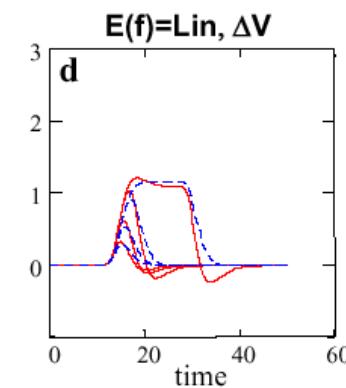
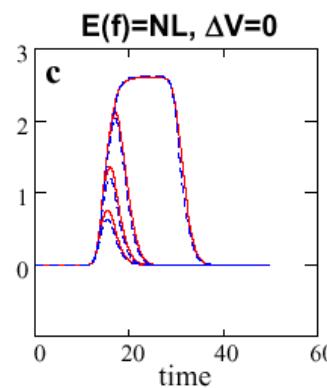
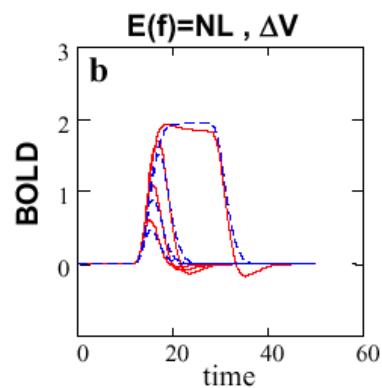
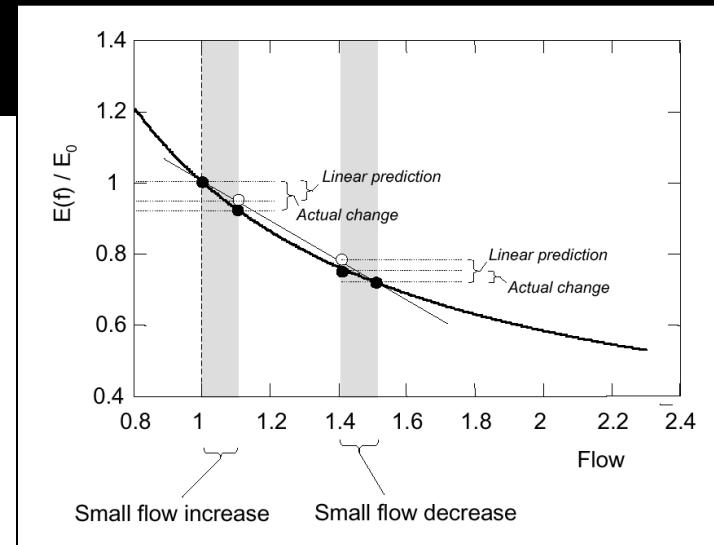
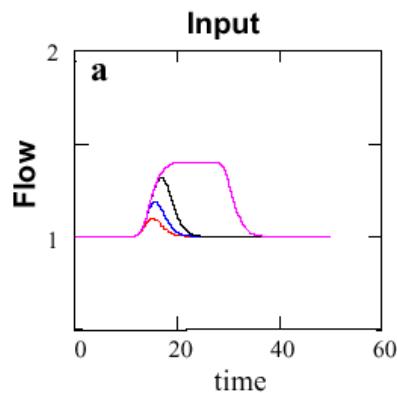
Increase: duty cycle



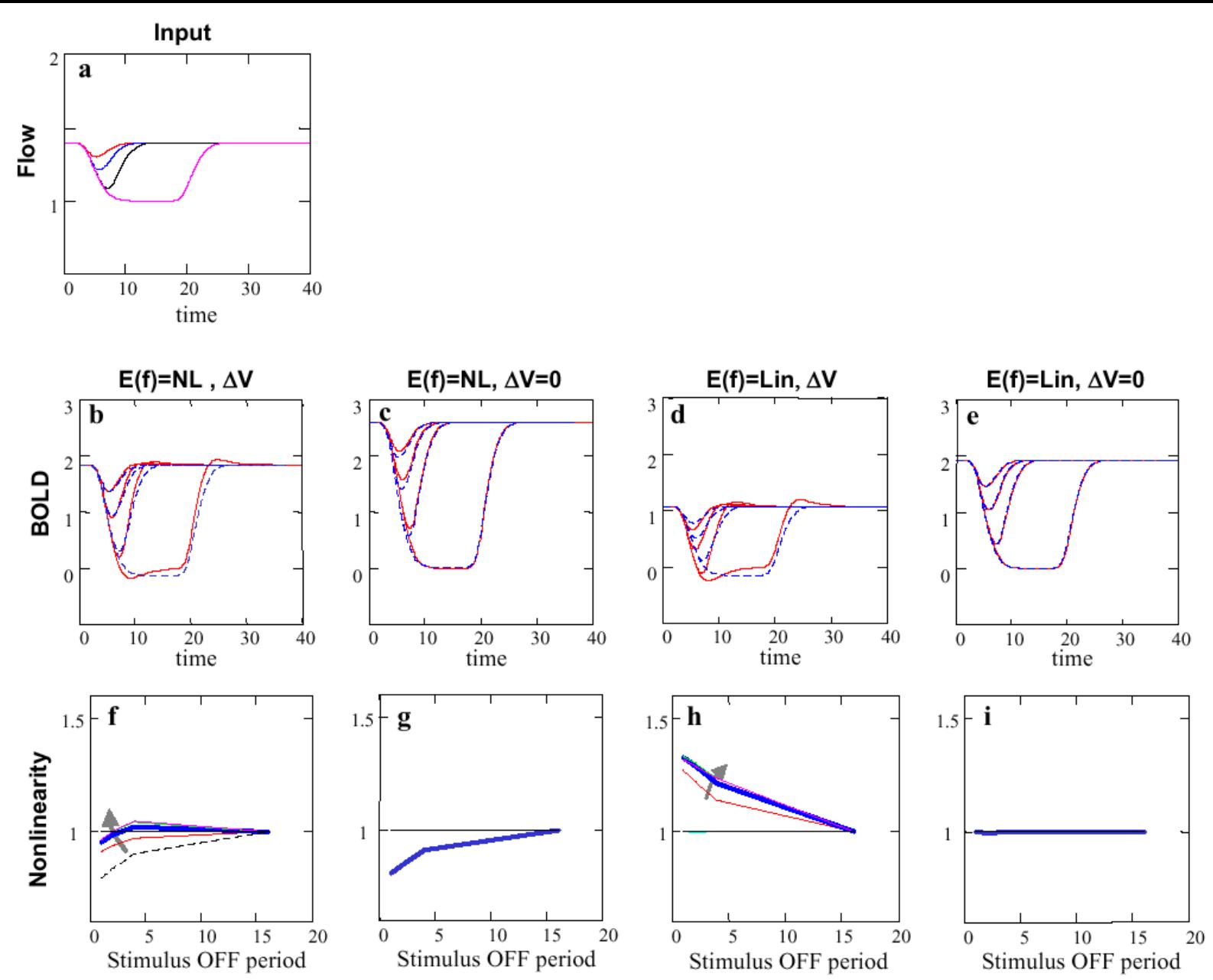
Balloon Model Parameters

Parameter	Description	Default Value	Range Evaluated
E_0	<i>Resting oxygen extraction fraction</i>	0.4	0.3 – 0.6
v_0	<i>Resting blood volume fraction</i>	0.03	0.03 – 0.18
f_0	<i>Resting relative blood flow</i>	0.01 s ⁻¹	0.01 s – 0.16 s
Δf	<i>Fractional blood flow change</i>	0.4	–
α	<i>Steady-state flow-volume relationship</i>	0.4	0.25 – 1.0
τ_{MTT}	<i>Blood mean transit time (v_0/f_0)</i>	3 s	1.1 s – 18 s
τ_+	<i>Viscoelastic time constant (inflation)</i>	20 s	10 s – 40 s
τ_-	<i>Viscoelastic time constant (deflation)</i>	20 s	10 s – 40 s
a_1	<i>Weight for deoxyHb change</i>	3.7	2.8 – 5.6
a_2	<i>Weight for blood volume change</i>	1.1	0.7 – 1.9

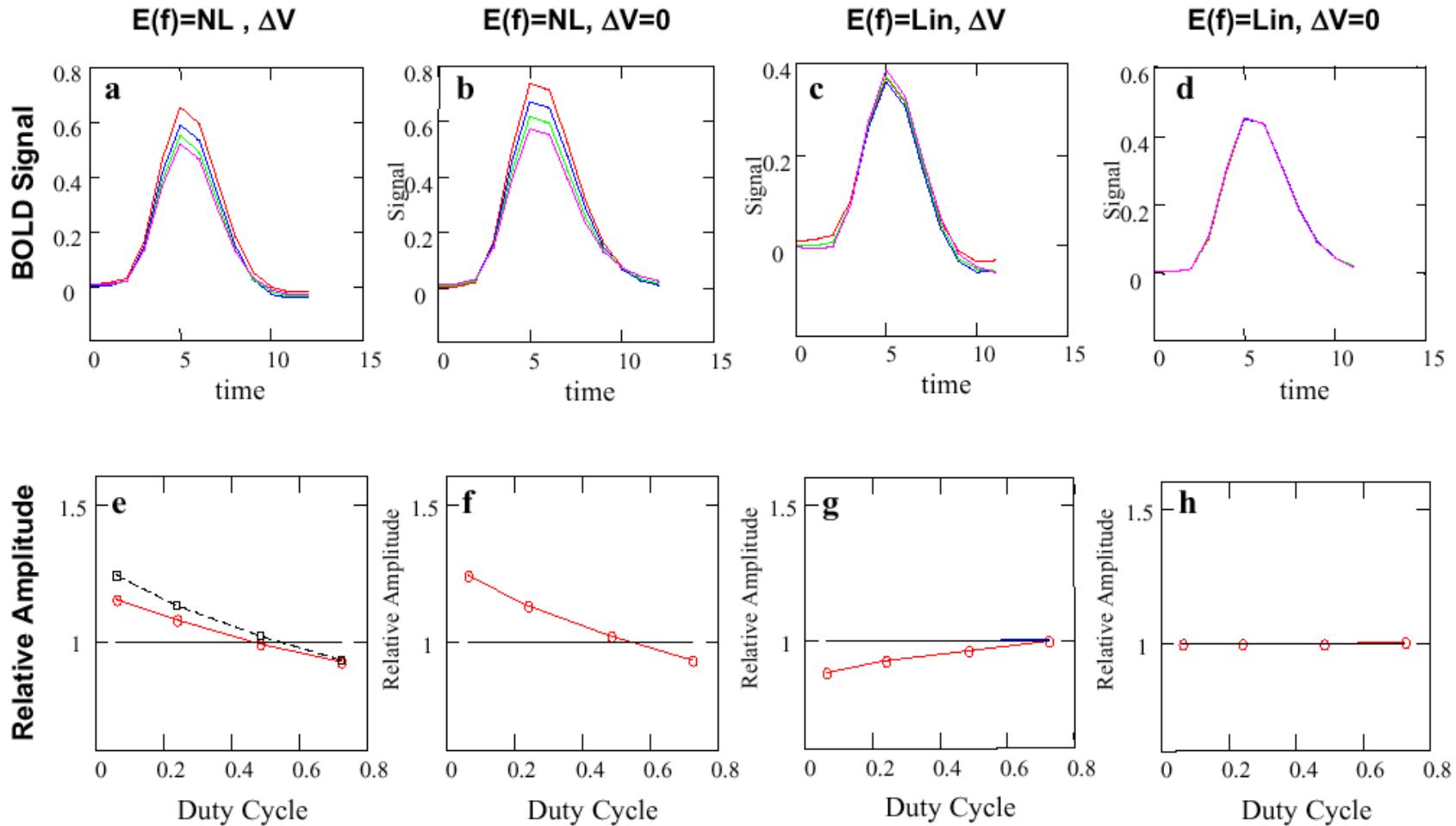
“on” Linearity



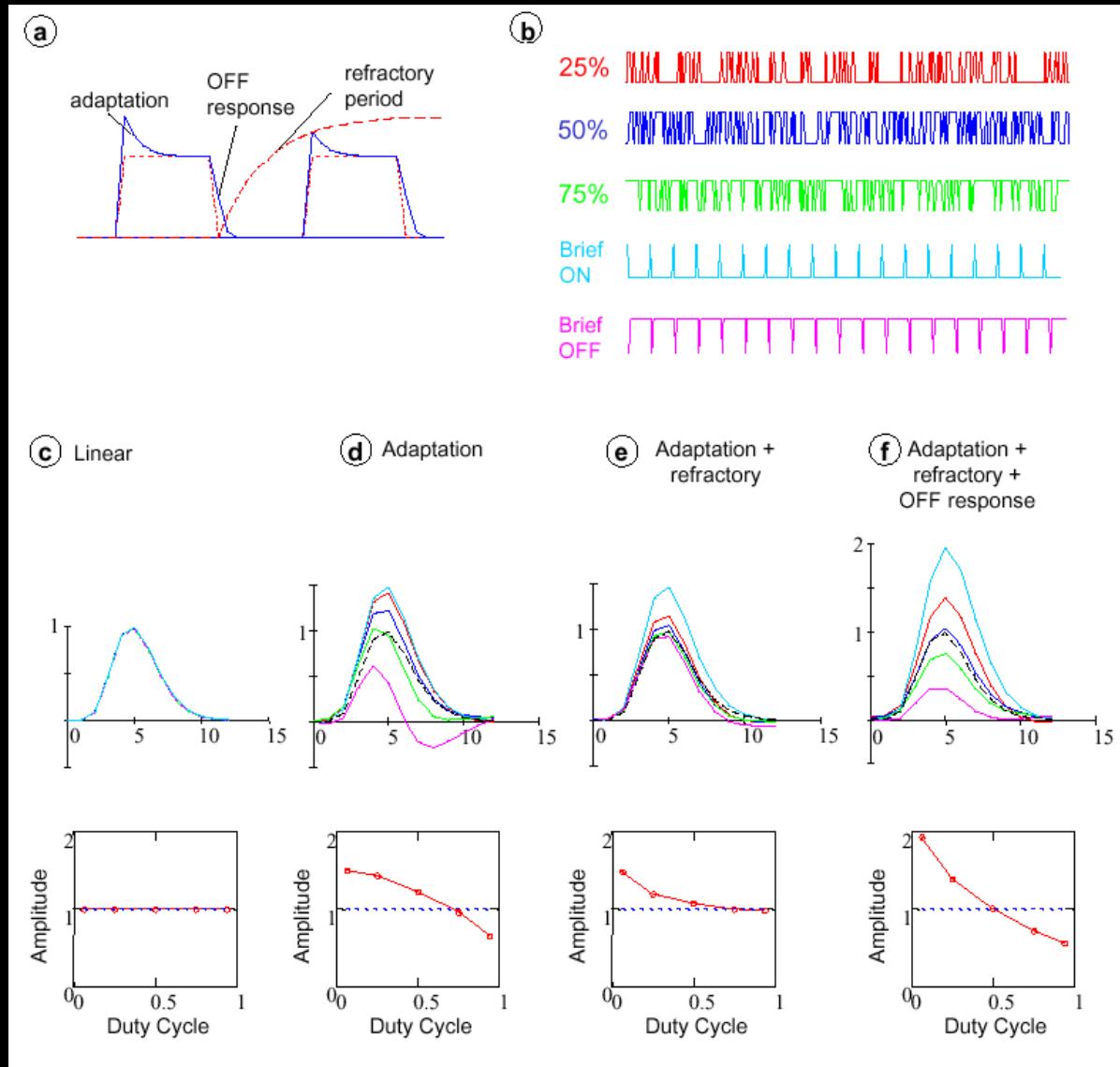
“off” linearity



Duty Cycle



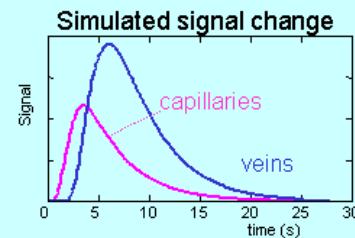
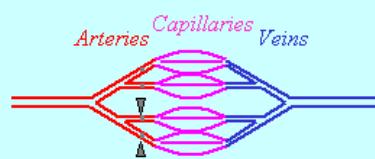
Neuronal effects to explain duty cycle effects



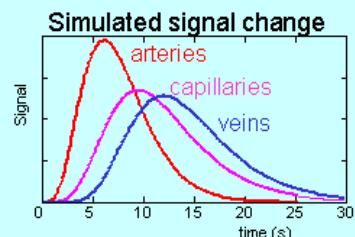
Temporal Resolution: potential calibration

Signal origins and simulated signal changes

BOLD (brief neuronal activation)



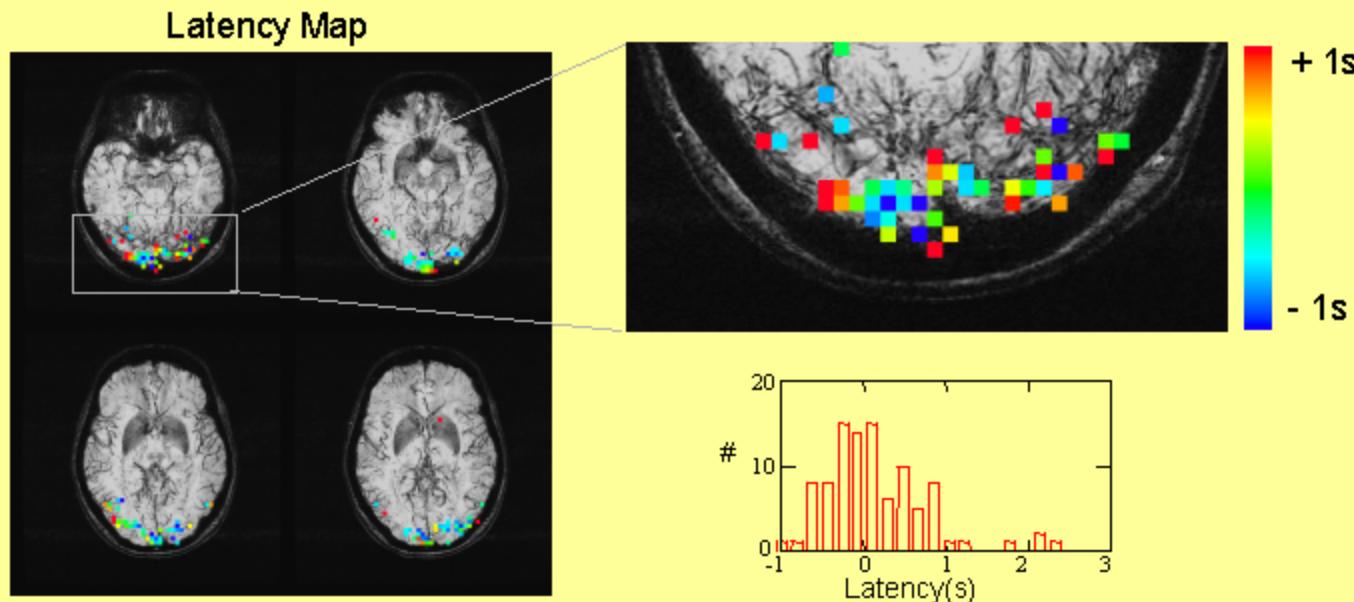
Gd-DTPA (bolus of contrast agent)



A voxel can contain a mixture of arteries, capillaries, and veins

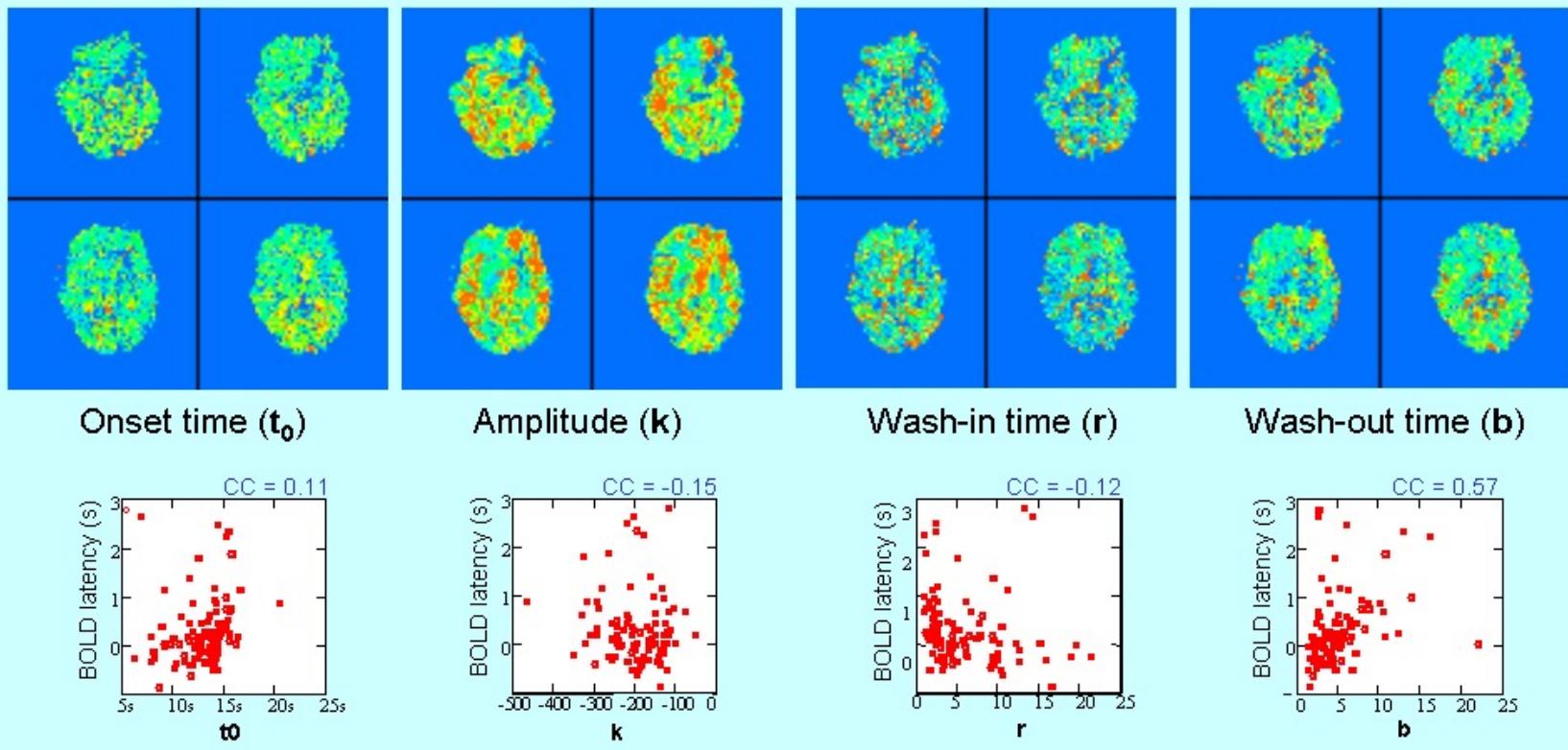
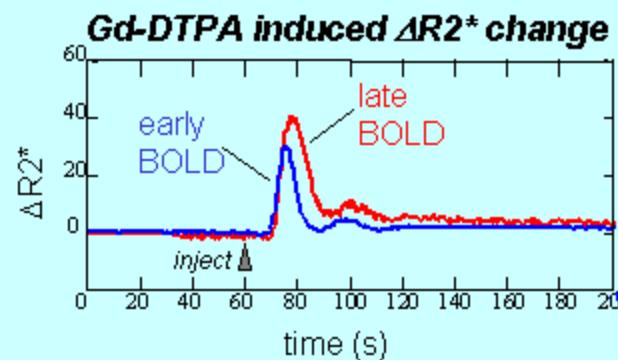
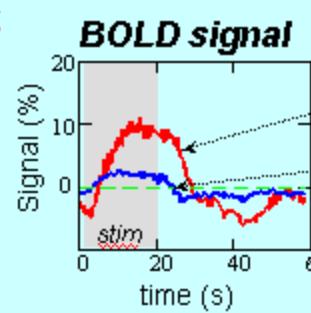
- The latency of BOLD response depends on the vessels between the arteriolar sphincters and the voxel of interest.
- The dynamics of the Gd-DTPA bolus induced signal change depends on the vessels between the site of injection and the voxel of interest.
- Previous calibration studies have focused on the onset latency of the Gd-DTPA induced signal decrease (2).
 - This time constant is influenced by variations in the arrival time of the bolus from the site of the injection to the arteriolar sphincters
- We hypothesize that the wash-out time of the Gd-DTPA bolus is more reflective of the time for blood to travel from the arterioles through capillaries and veins, and is therefore more predictive of BOLD onset time and duration

1. Latency of fMRI BOLD response varies by several seconds across regions of the brain



These latency variations, likely the result of BOLD signals arising from different vessels (capillaries, venules, or veins), dominate any underlying neuronal timing differences (1).

2. Can we correct for hemodynamic variations in the latency estimate by using a separate measure of vascular dynamics – the signal changes from a bolus of contrast agent?

B**C**

1. In general, the latency of BOLD response is correlated with the washout time of Gd-DTPA bolus.
2. This correlation is not strong enough to correct the large spatial variations in BOLD response latency.
3. Future improvements include:
 - a. More accurate modeling of BOLD and Gd-DTPA bolus signal changes.
 - b. Finding ways to separate arterial and venous contributions.

Many remaining unknowns

- Relationship between neuronal activity and BOLD contrast?
- Sources of BOLD variability?
- • Information content / artifact in time series fluctuations?
- • Source of BOLD timing and dynamics?
- • Sources of BOLD signal decreases?
- Other sources of functional contrast?
- • Temporal resolution?
- • Spatial resolution?
- Clinical utility?
- • Best processing and display strategies?
- Best paradigm designs strategies?
- Optimal field strength?
- Applications..??