

What fMRI Can, Can't, and Might Do

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&

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Overview of fMRI

Functional Contrast:

Blood volume
Blood flow/perfusion
Blood oxygenation

Spatial resolution:

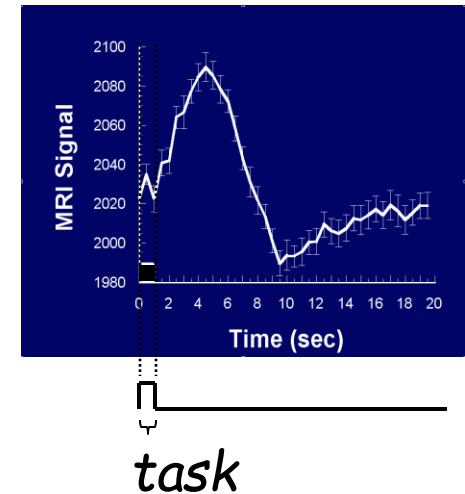
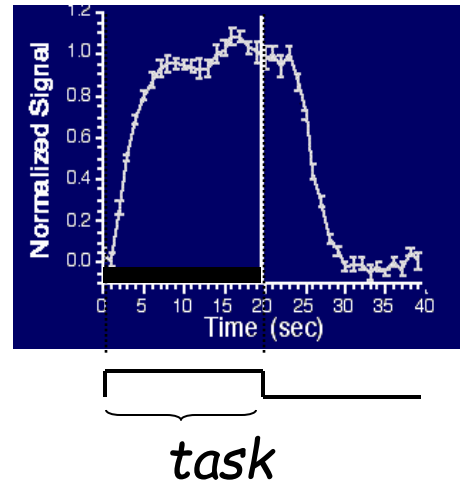
Typical: 3 mm^3
Upper: 0.5 mm^3

Temporal resolution:

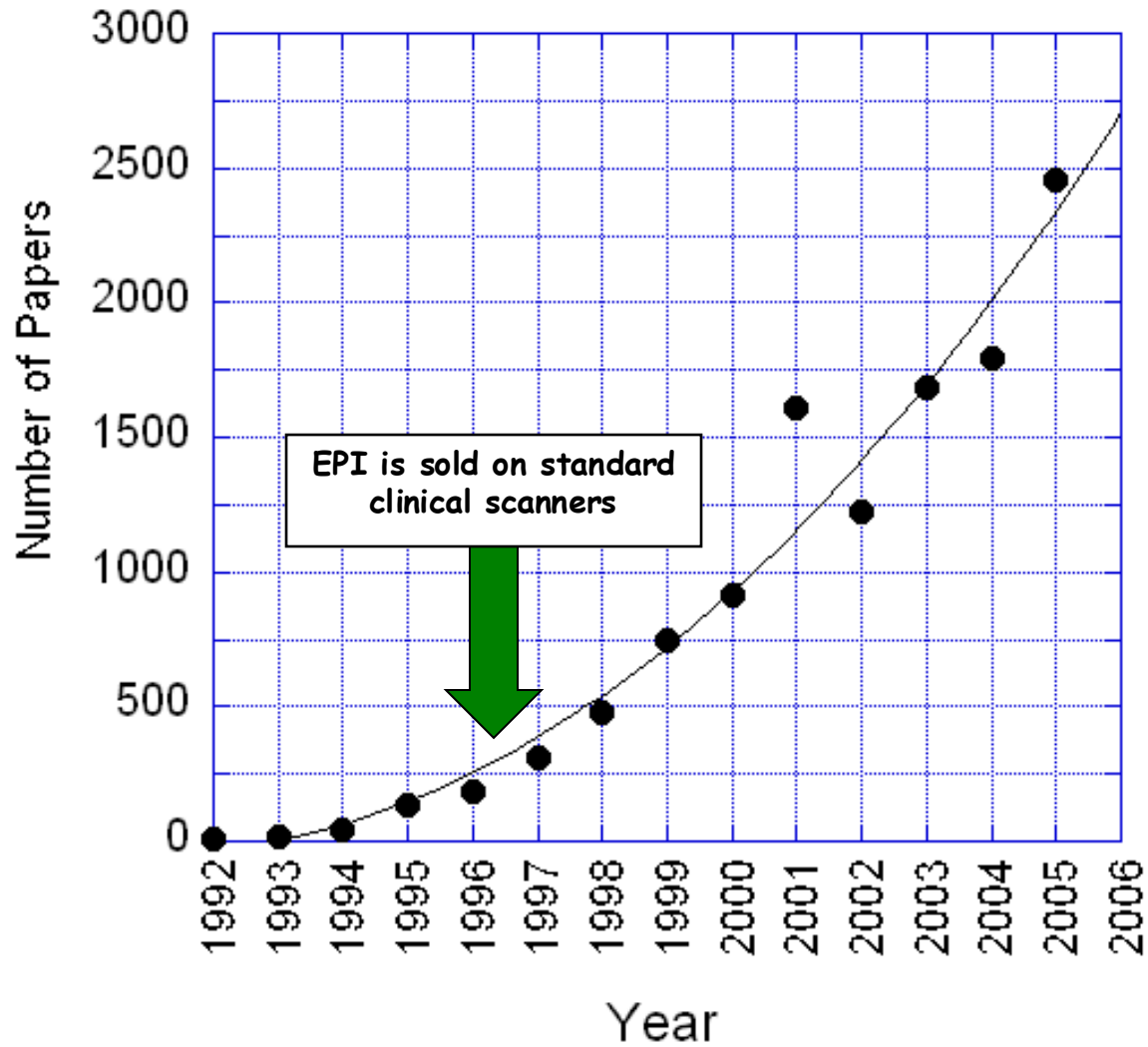
Minimum duration: $< 16 \text{ ms}$
Minimum onset diff: $100 \text{ ms to } 2 \text{ sec}$

Interpretability:

Neurovascular coupling, vascular sampling, blood, physiologic noise, motion and other artifacts, etc..

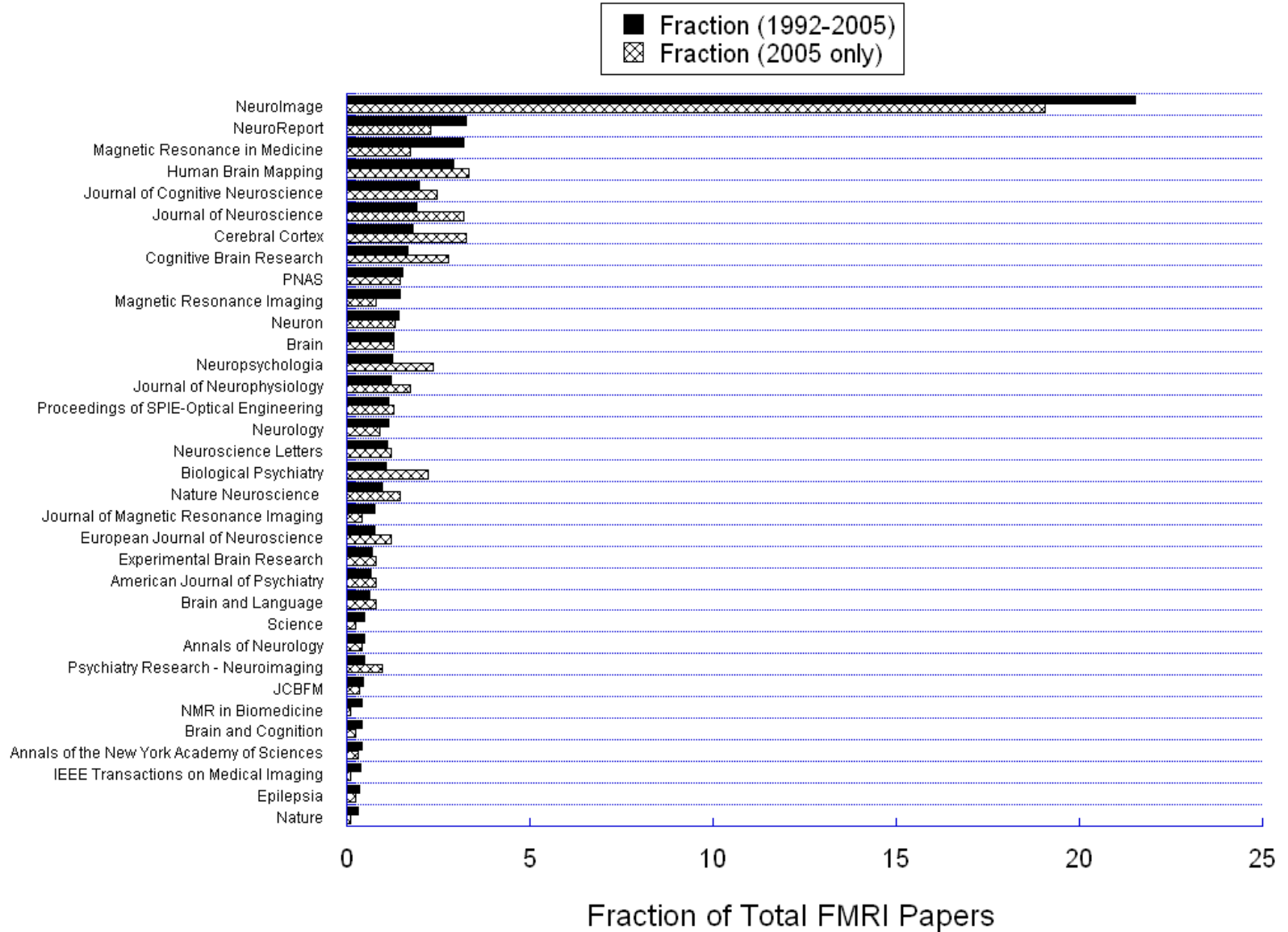


fMRI Papers Published per Year

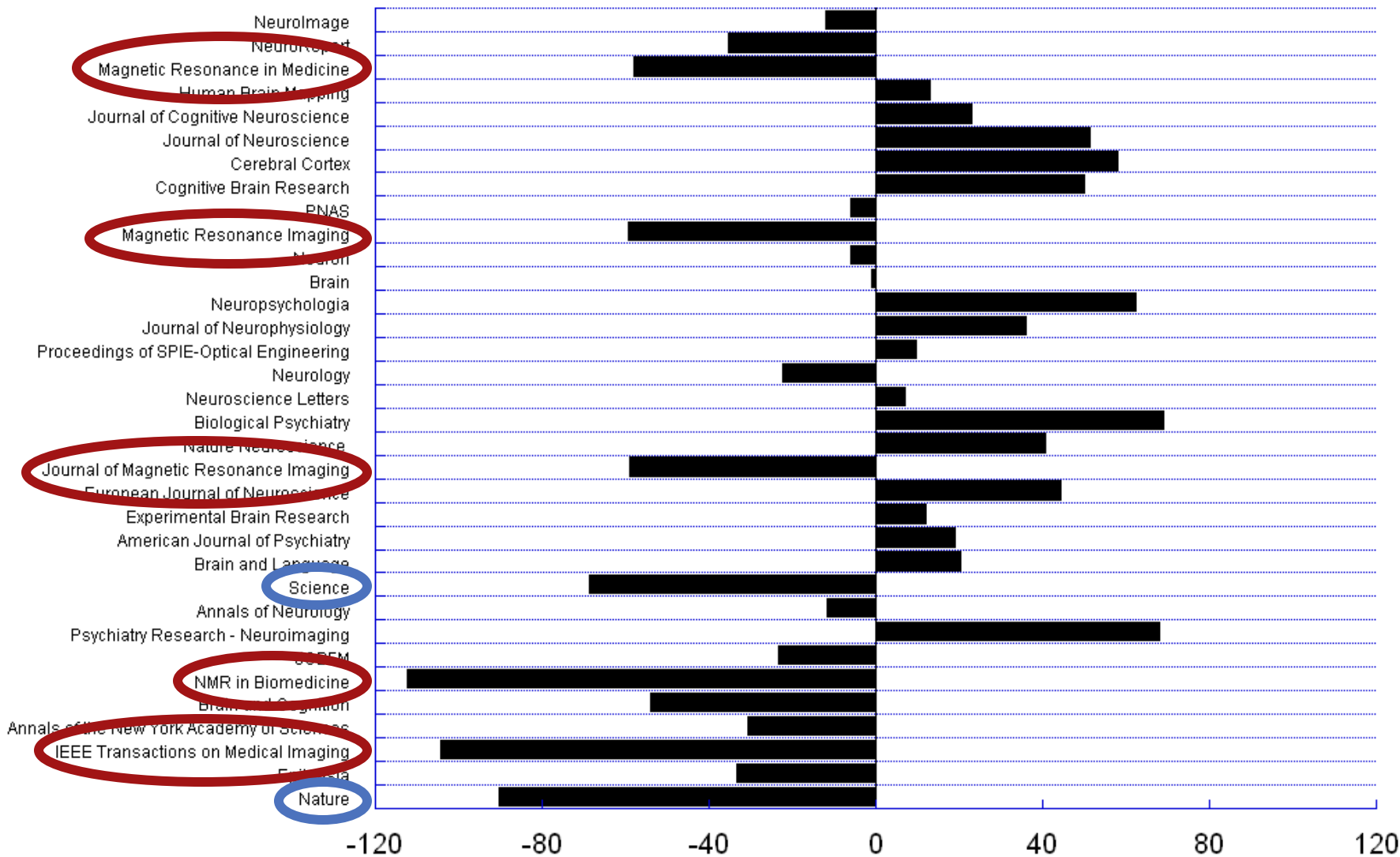


"fMRI" or "functional MRI"

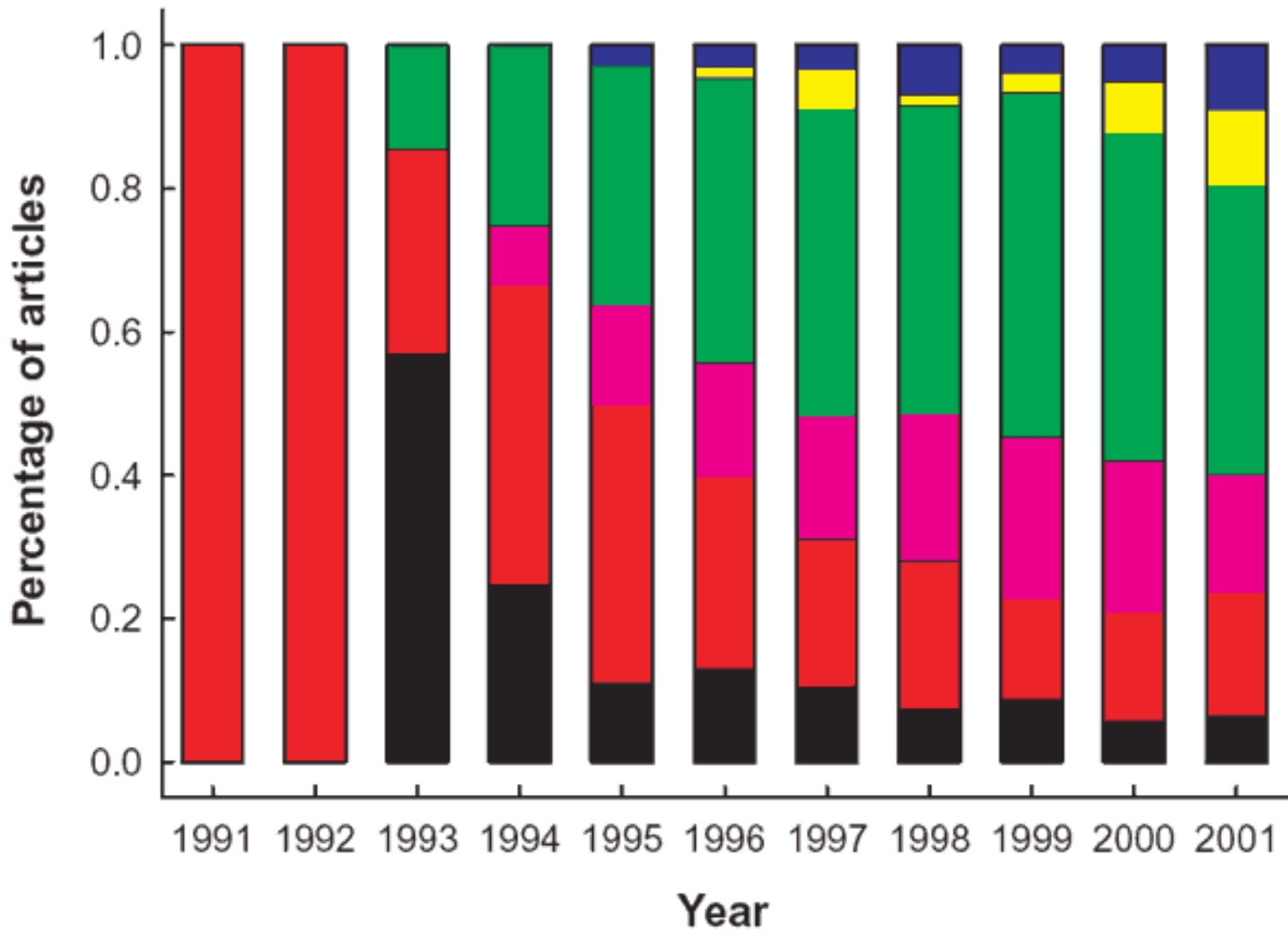
Breakdown of fMRI papers by Journal



Percent Change in fMRI Publications of 2005 relative to Average (1992 - 2005) for Each Journal



Percent Change (2005 relative to average from 1992 to 2005)



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. Gabrieli,
 Nature Neuroscience, 6 (3) p.205

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What fMRI Can Do (routine fMRI)

Help in understanding healthy brain organization

- map networks involved with specific behavior, stimulus, or performance
- characterize changes over time (seconds to years)
- determine correlates of behavior (response accuracy, etc...)

Current Clinical Applications

- presurgical mapping (CPT code in place as of Jan, 2007)

Current Clinical Research

- assessment of recovery and plasticity
- clinical population characterization with probe task or resting state

What fMRI Can't Do (what are the problems with fMRI?)

- Too low SNR for routine clinical use (takes too long)
- Requires patient cooperation (too sensitive to motion)
- Too low spatial resolution (each voxel has several million neurons)
- Too low temporal resolution (hemodynamics are variable and sluggish)
- Too indirectly related to neuronal activity
- Too many physiologic variables influence signal
- Requires a task (BOLD cannot look at baseline maps)
- Too confined space and high acoustic noise.

Technology

Coil arrays
High field strength
High resolution
Novel functional contrast

Methodology

Functional Connectivity Assessment
Multi-modal integration
Pattern classification
Real time feedback
Task design

Fluctuations
Dynamics
Cross - modal comparison

Basic Neuroscience
Behavior correlation/prediction
Pathology assessment

Interpretation

Applications

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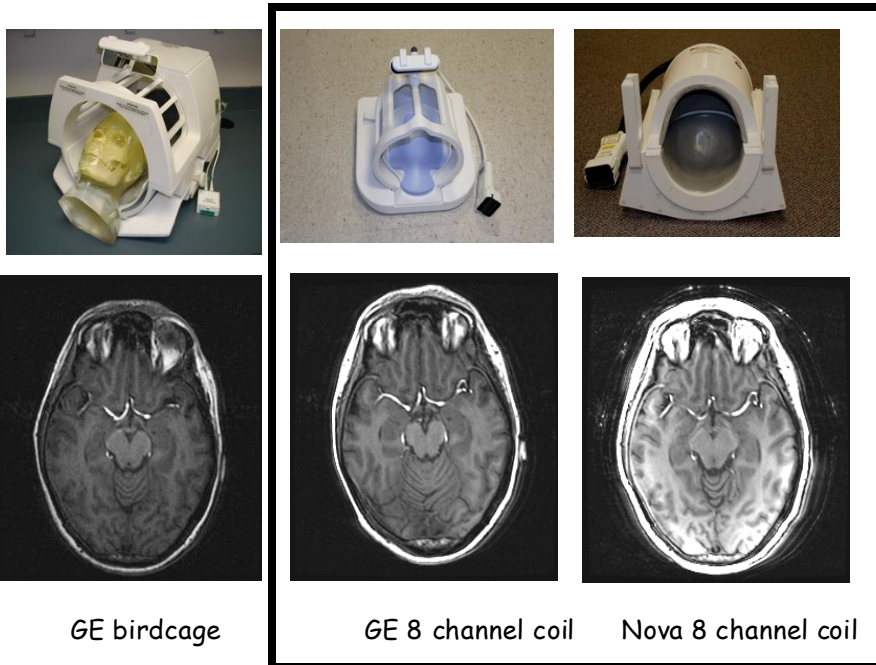
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Interpretation

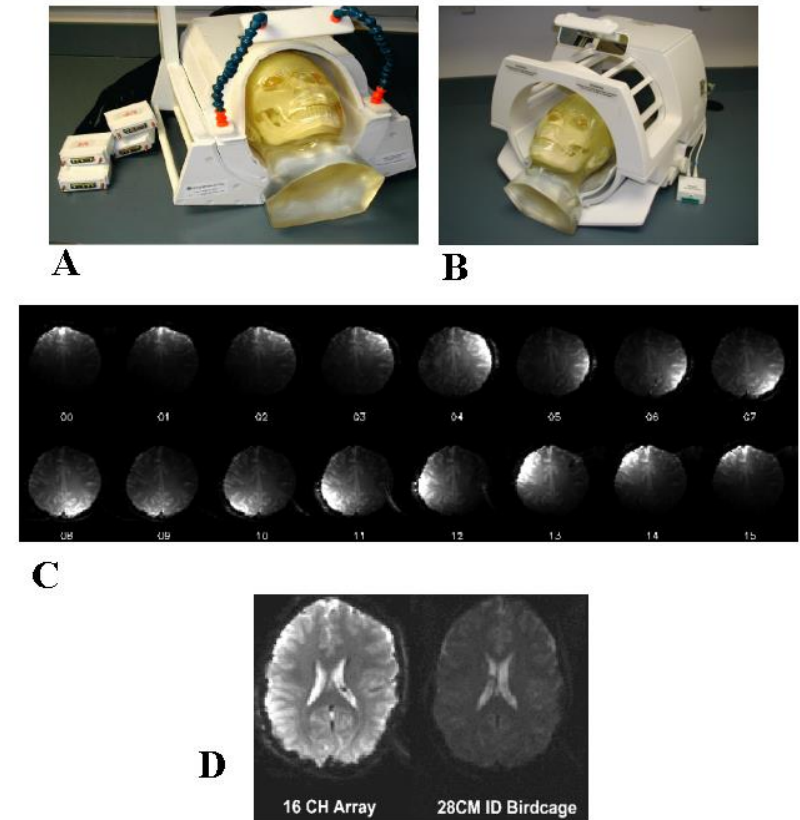
Applications

Technology

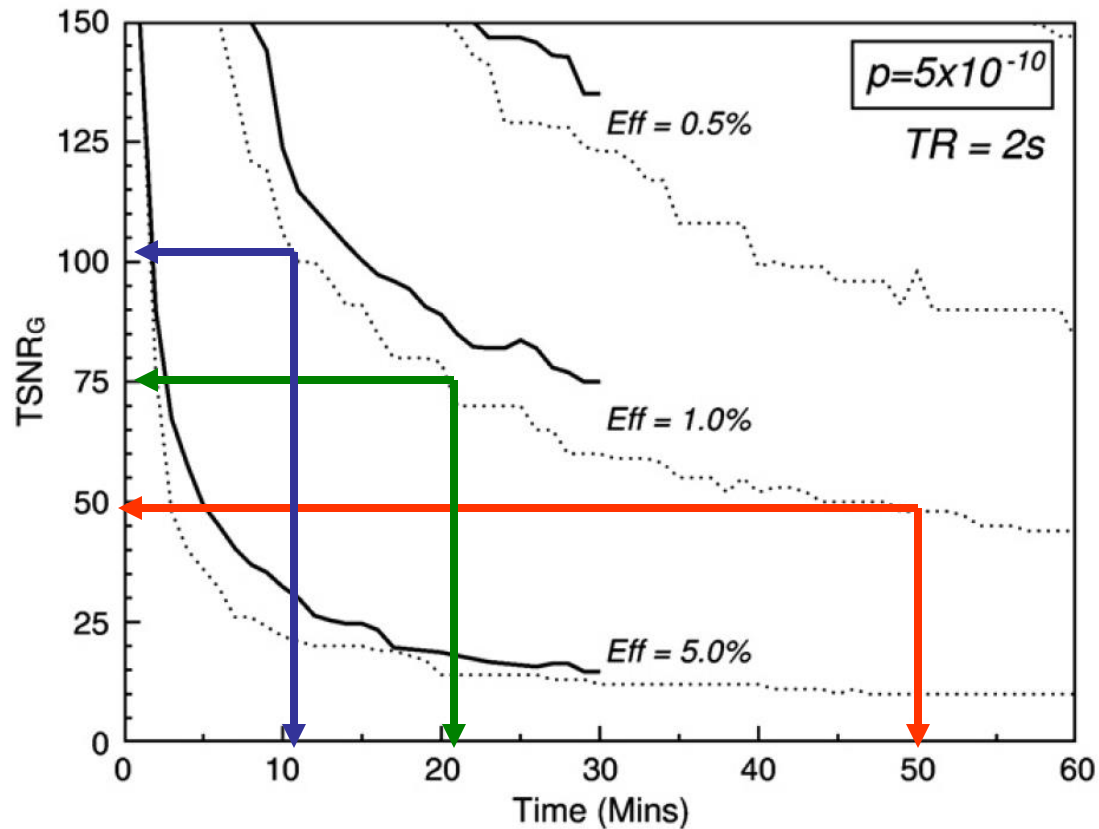
8 channel parallel receiver coil



16 channel parallel receiver coil



Technology



K. Murphy, J. Bodurka, P. A. Bandettini, How long to scan?
The relationship between fMRI temporal signal to noise and the
necessary scan duration. *NeuroImage*, 34, 565-574 (2007)

fMRI Contrast

- Volume (gadolinium)
- BOLD
- Perfusion (ASL)
- ΔCMRO_2
- ΔVolume (VASO)
- Neuronal Currents
- Diffusion coefficient
- Temperature

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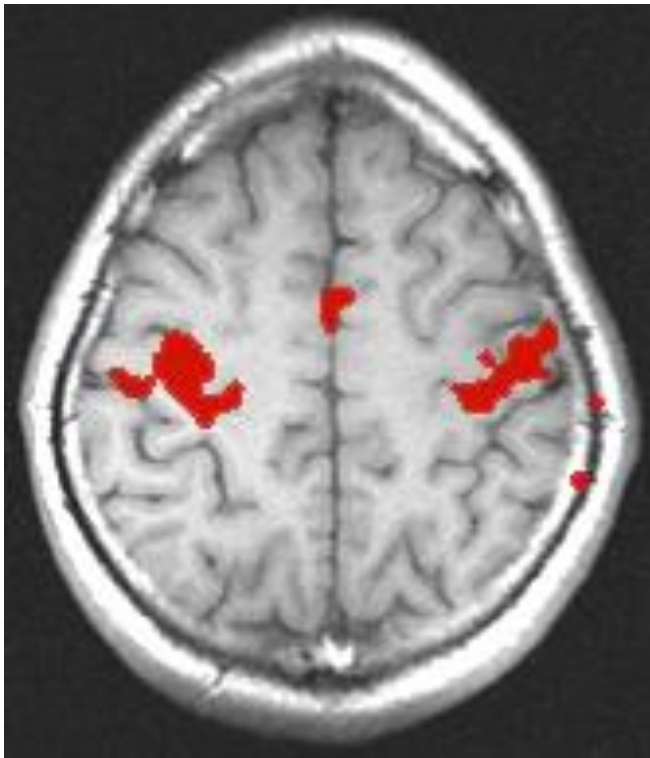
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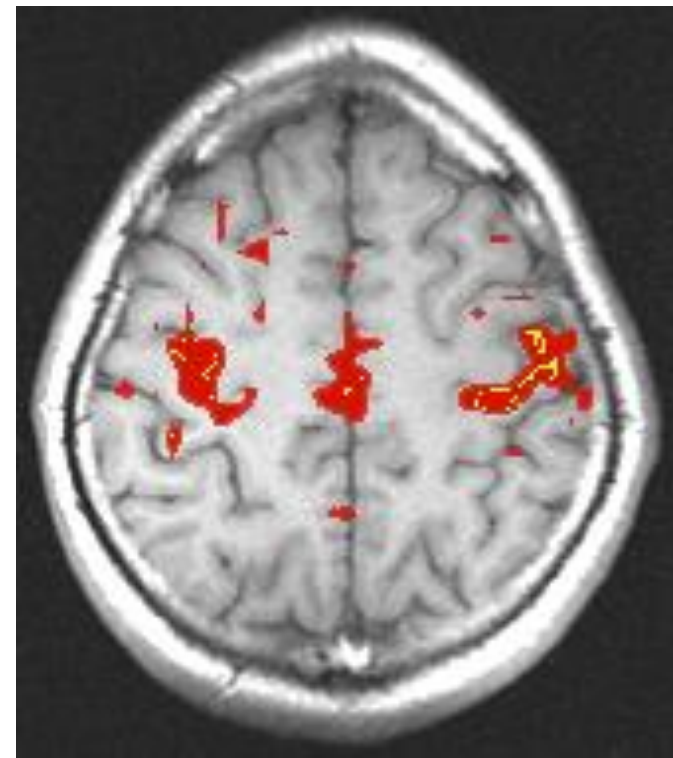
Applications

Methodology

Resting State Correlations



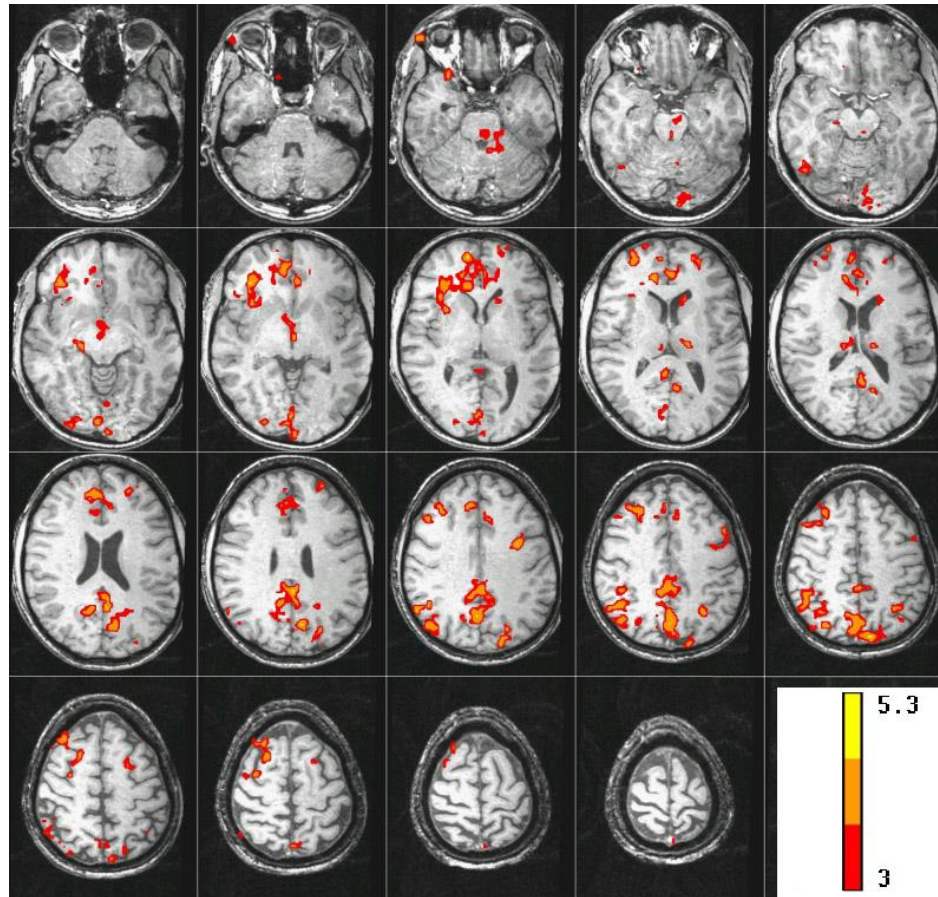
Activation:
correlation with reference function



Rest:
seed voxel in motor cortex

Methodology

BOLD correlated with SCR during "Rest"

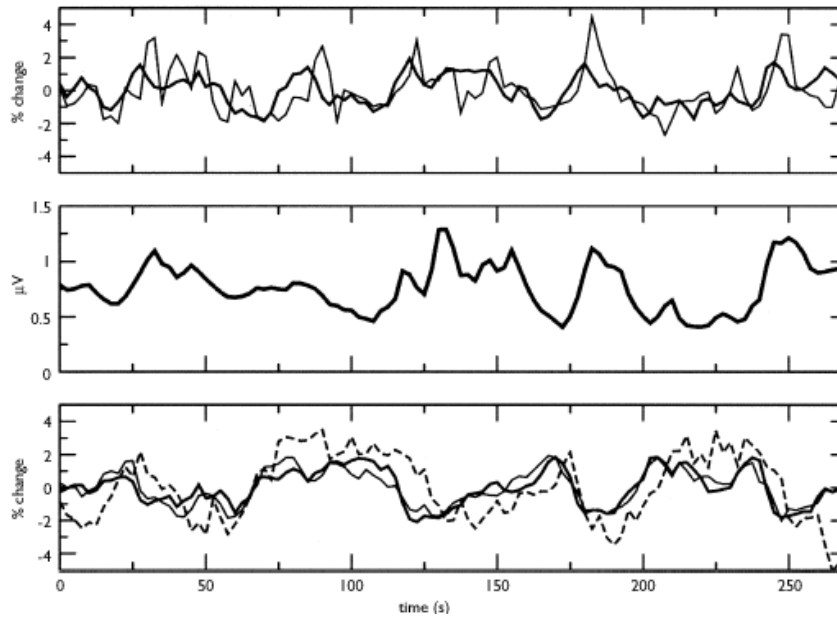


J. C. Patterson II, L. G. Ungerleider, and P. A. Bandettini, *NeuroImage* 17: 1787-1806, (2002).

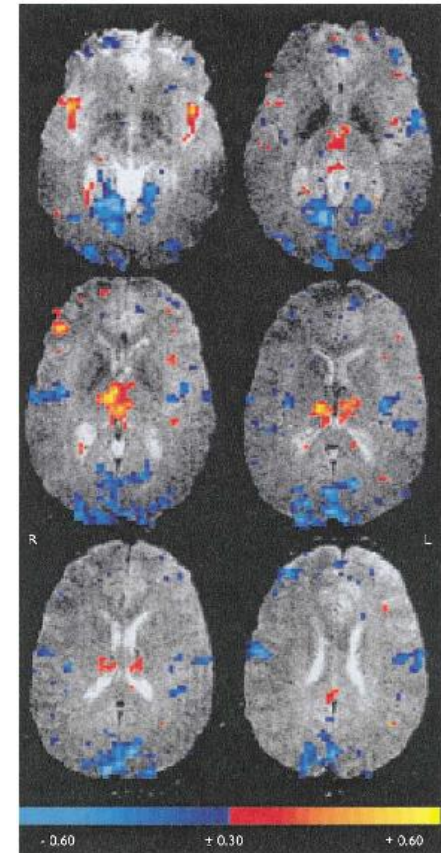
Methodology

BOLD correlated with 10 Hz power during "Rest"

Positive
10 Hz power
Negative



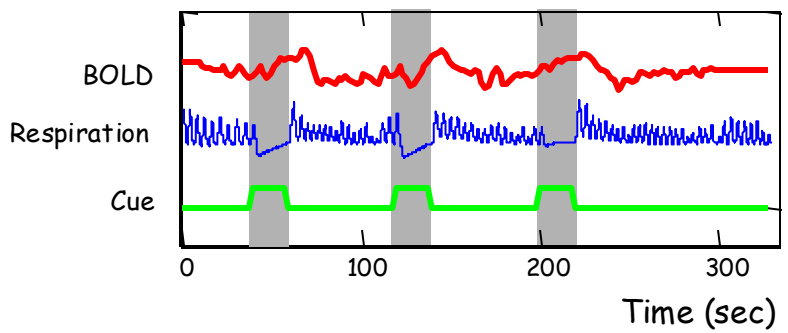
Goldman, et al (2002), Neuroreport



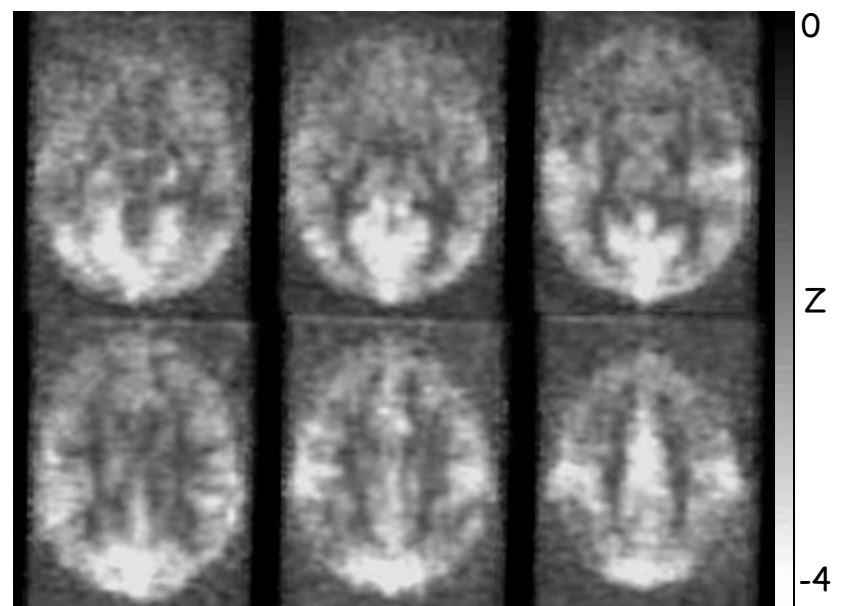
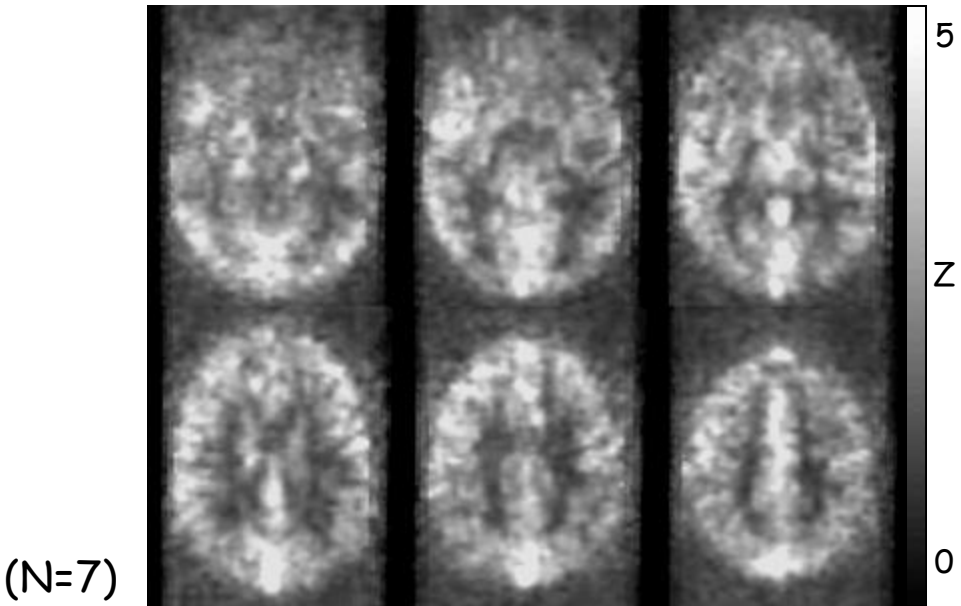
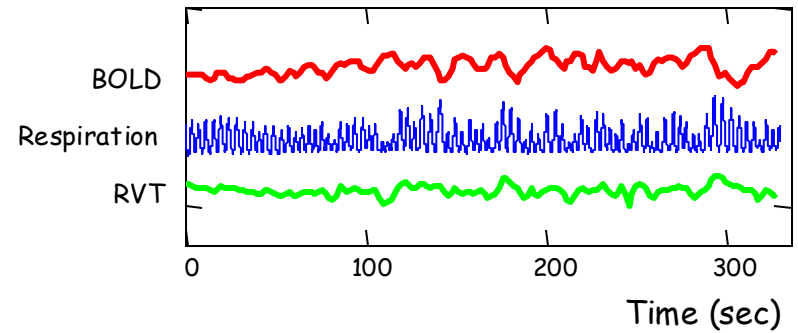
Methodology

Respiration induced signal changes

Breath-holding



Rest



R. M. Birn, J. B. Diamond, M. A. Smith, P. A. Bandettini, Separating respiratory variation-related fluctuations from neuronal activity-related fluctuations in fMRI, *NeuroImage* 31, 1536-1548 (2006)

Methodology



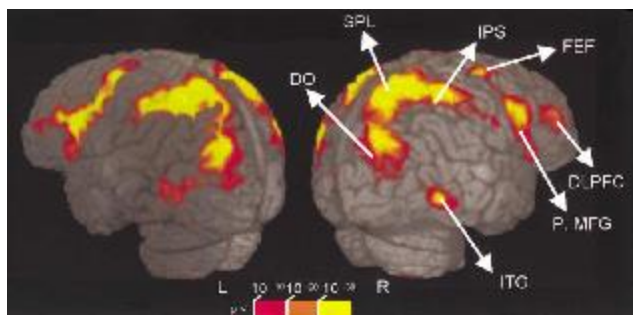
Mapping ↔ **"Reading"**

Methodology

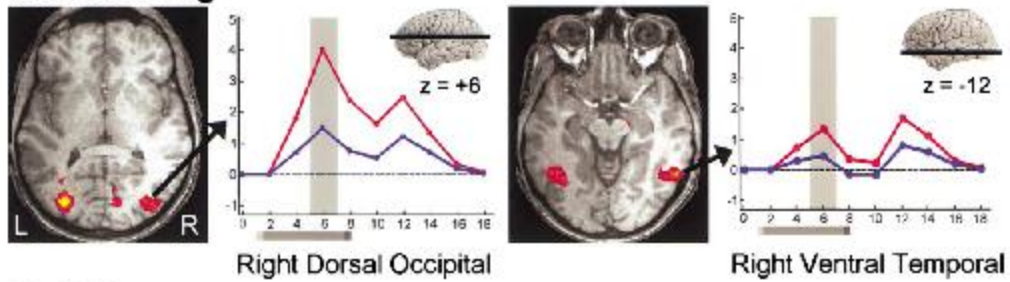
Neuron, Vol. 35, 975-987, August 29, 2002, Copyright ©2002 by Cell Press

Neural Correlates of Visual Working Memory: fMRI Amplitude Predicts Task Performance

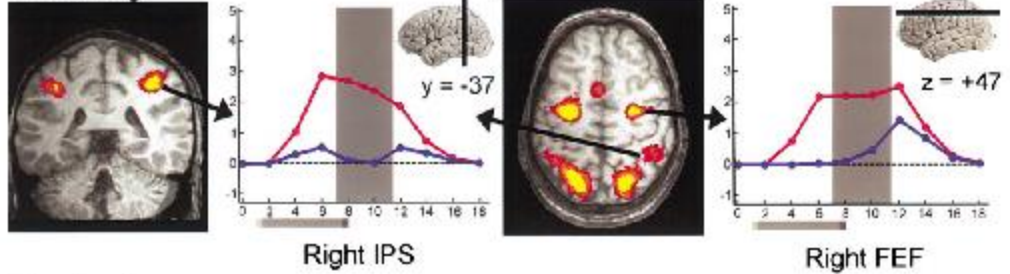
Luiz Pessoa,¹ Eva Gutierrez, Peter A. Bandettini, and Leslie G. Ungerleider
 Laboratory of Brain and Cognition
 National Institute of Mental Health
 National Institutes of Health
 Bethesda, Maryland 20892



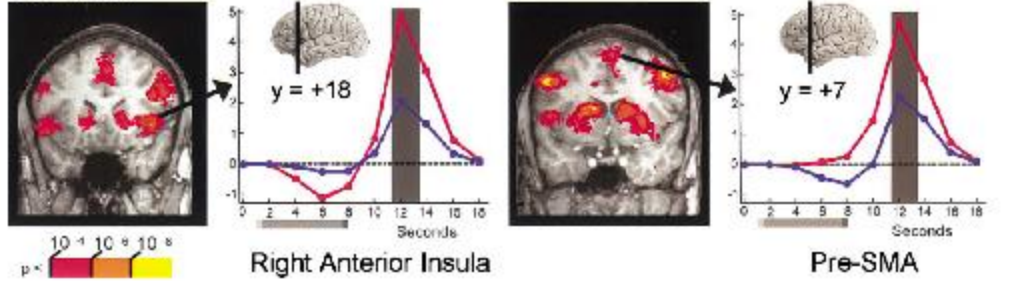
A. Encoding



B. Delay



C. Test

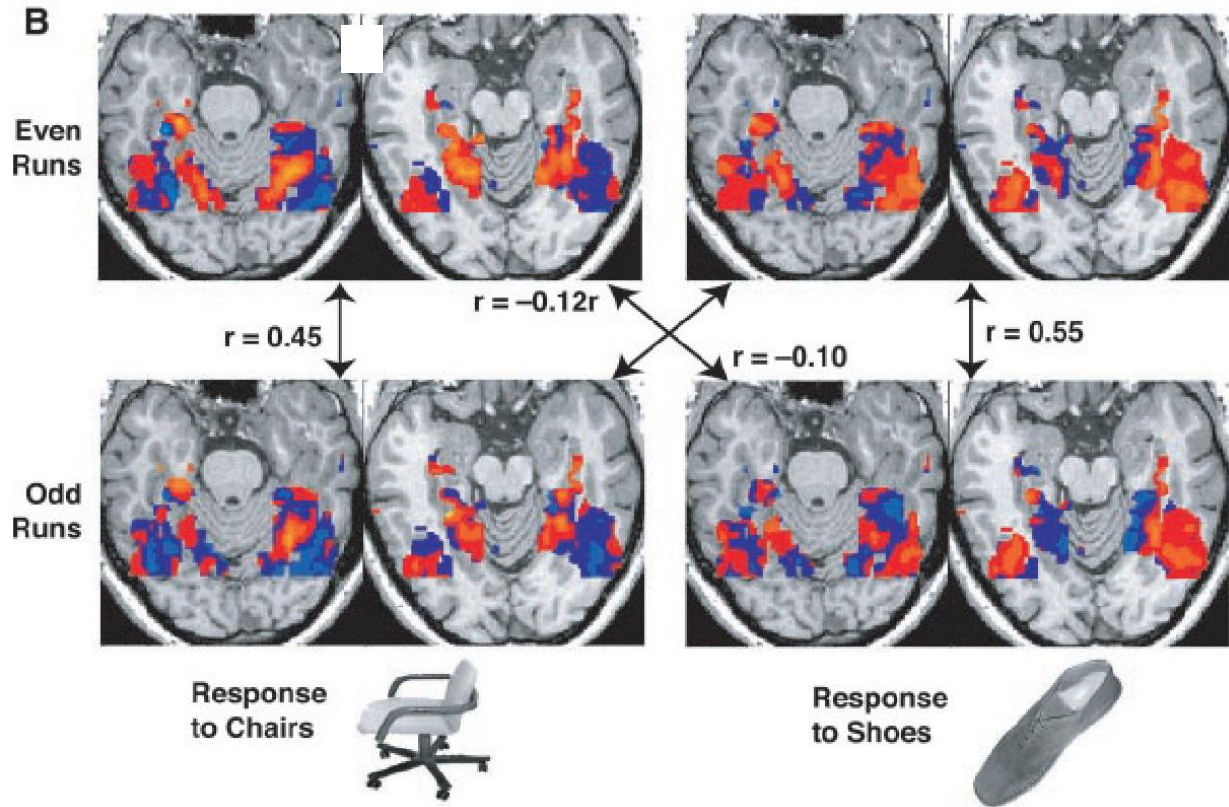


10^{-4} 10^{-6} 10^{-8}

Methodology

Ventral temporal category representations

Object categories are associated with distributed representations in ventral temporal cortex



Haxby et al. 2001

Functional magnetic resonance imaging (fMRI) “brain reading”: detecting and classifying distributed patterns of fMRI activity in human visual cortex

David D. Cox^{a,b,*} and Robert L. Savoy^{a,b,c}

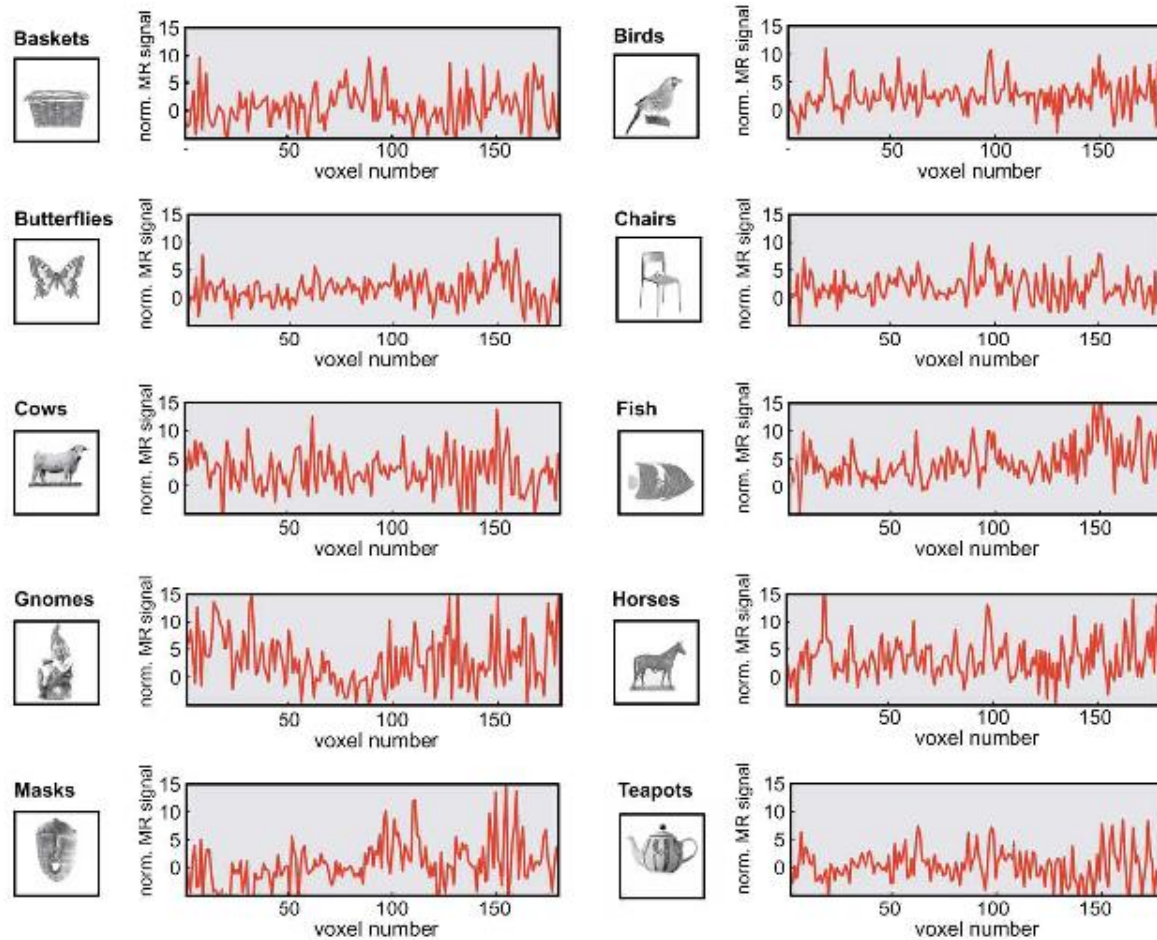
^a Rowland Institute for Science, Cambridge, MA 02142, USA

^b Athinoula A. Martinos Center for Structural and Functional Biomedical Imaging, Charlestown, MA 02129, USA

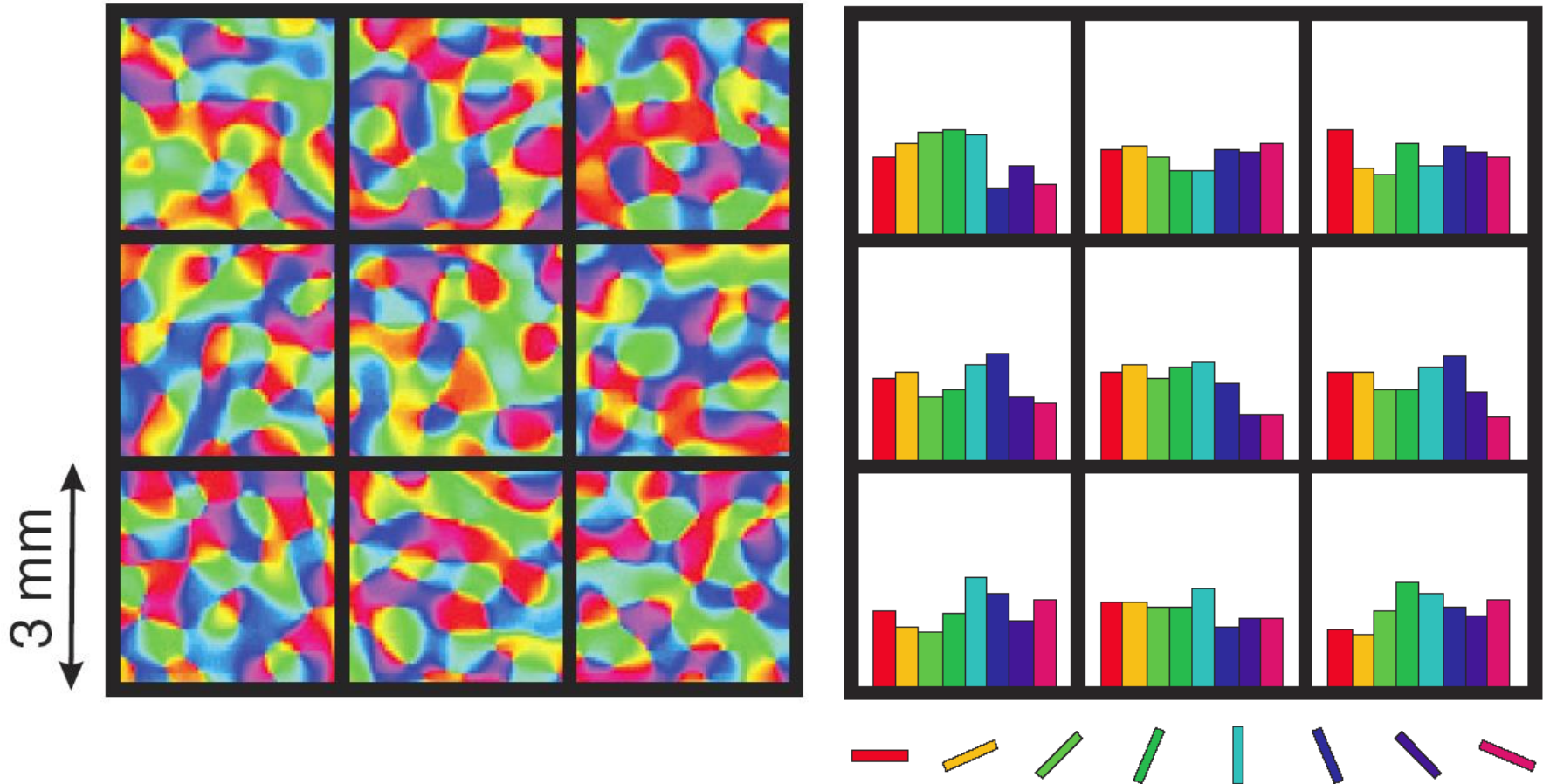
^c HyperVision, Inc., P.O. Box 158, Lexington, MA 02420, USA

Received 15 July 2002; accepted 10 December 2002

NEUROIMAGE 19 (2): 261-270 Part 1 JUN 2003



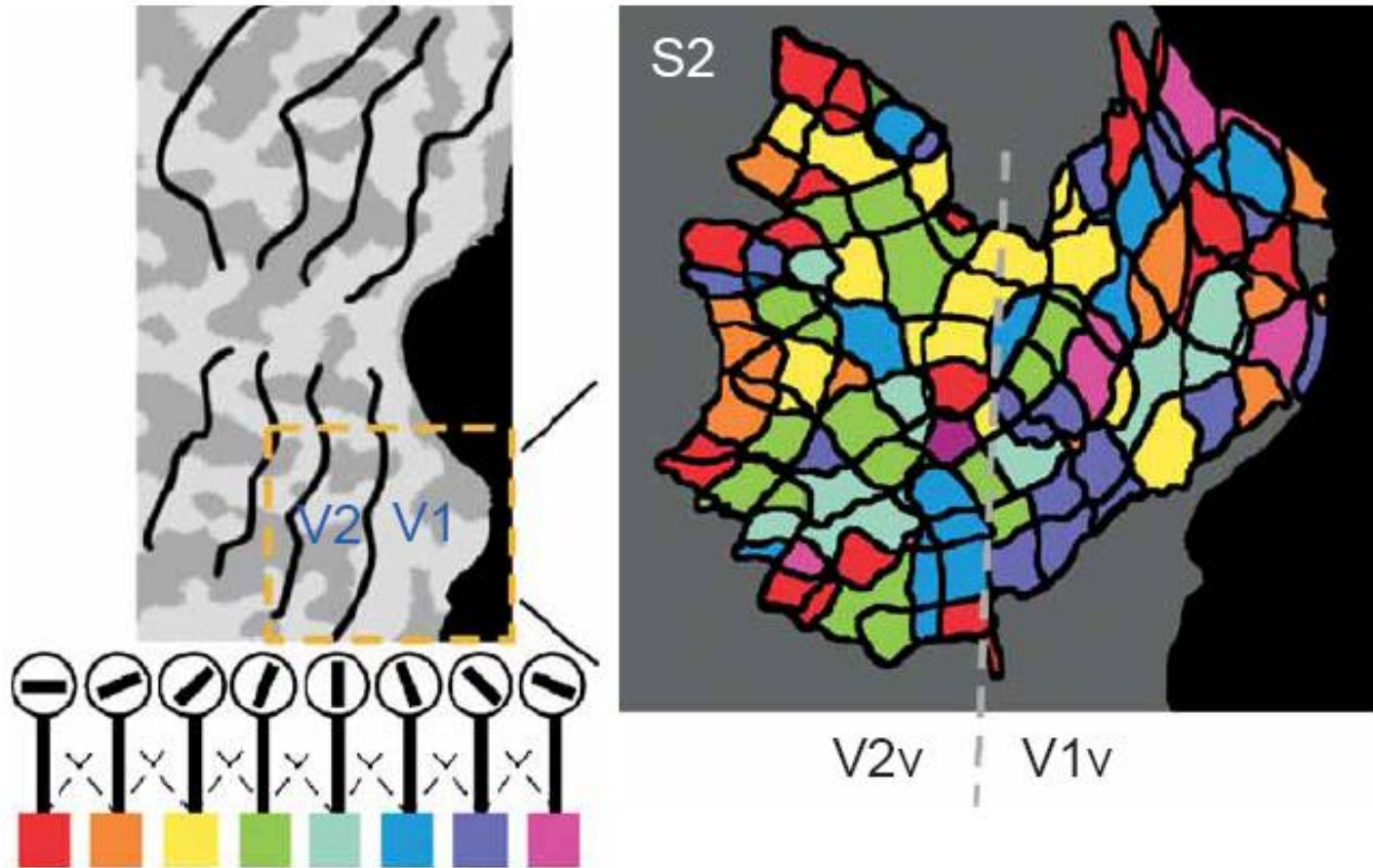
Methodology



Boynton (2005), News & Views on Kamitani & Tong (2005) and Haynes & Rees (2005)

Methodology

Lower spatial frequency clumping

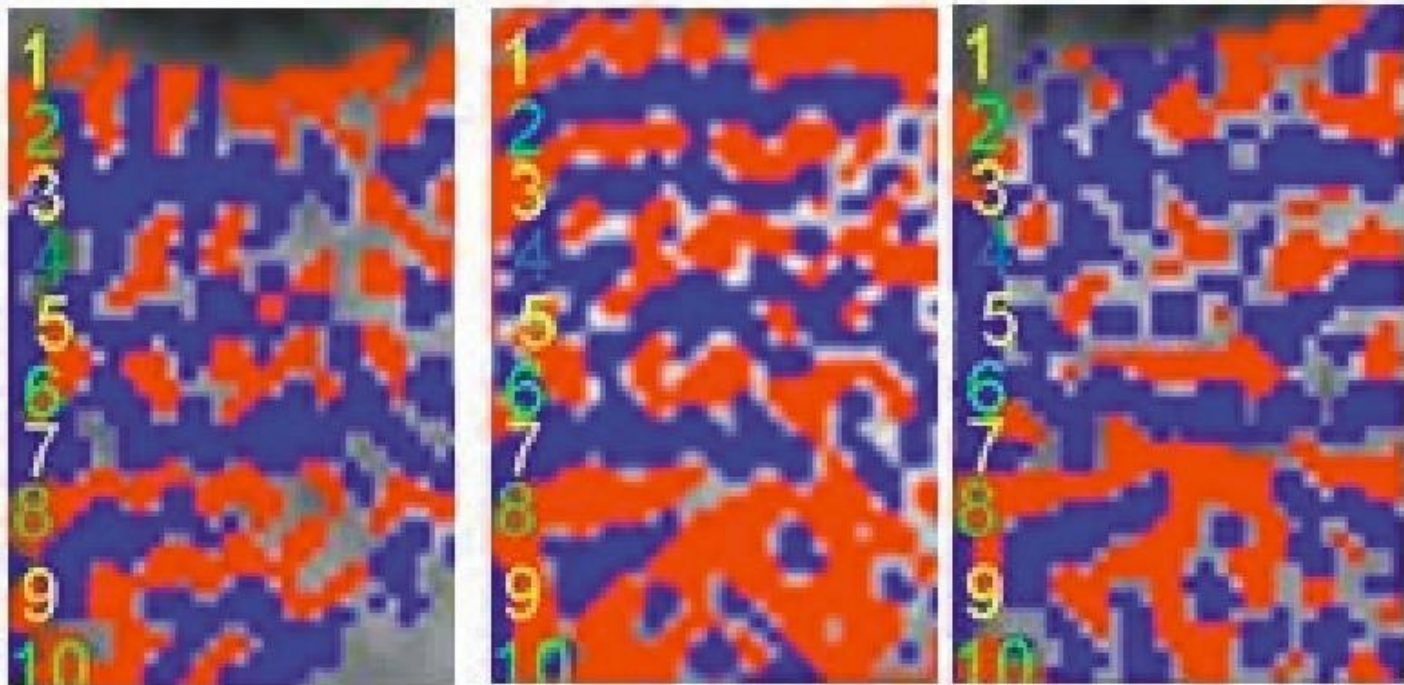


Kamitani & Tong (2005)

What to do with high resolution data?

HSE-BOLD demonstration of ocular dominance columns

human, 7T, $0.5 \times 0.5 \times 3 \text{ mm}^3$



day 1

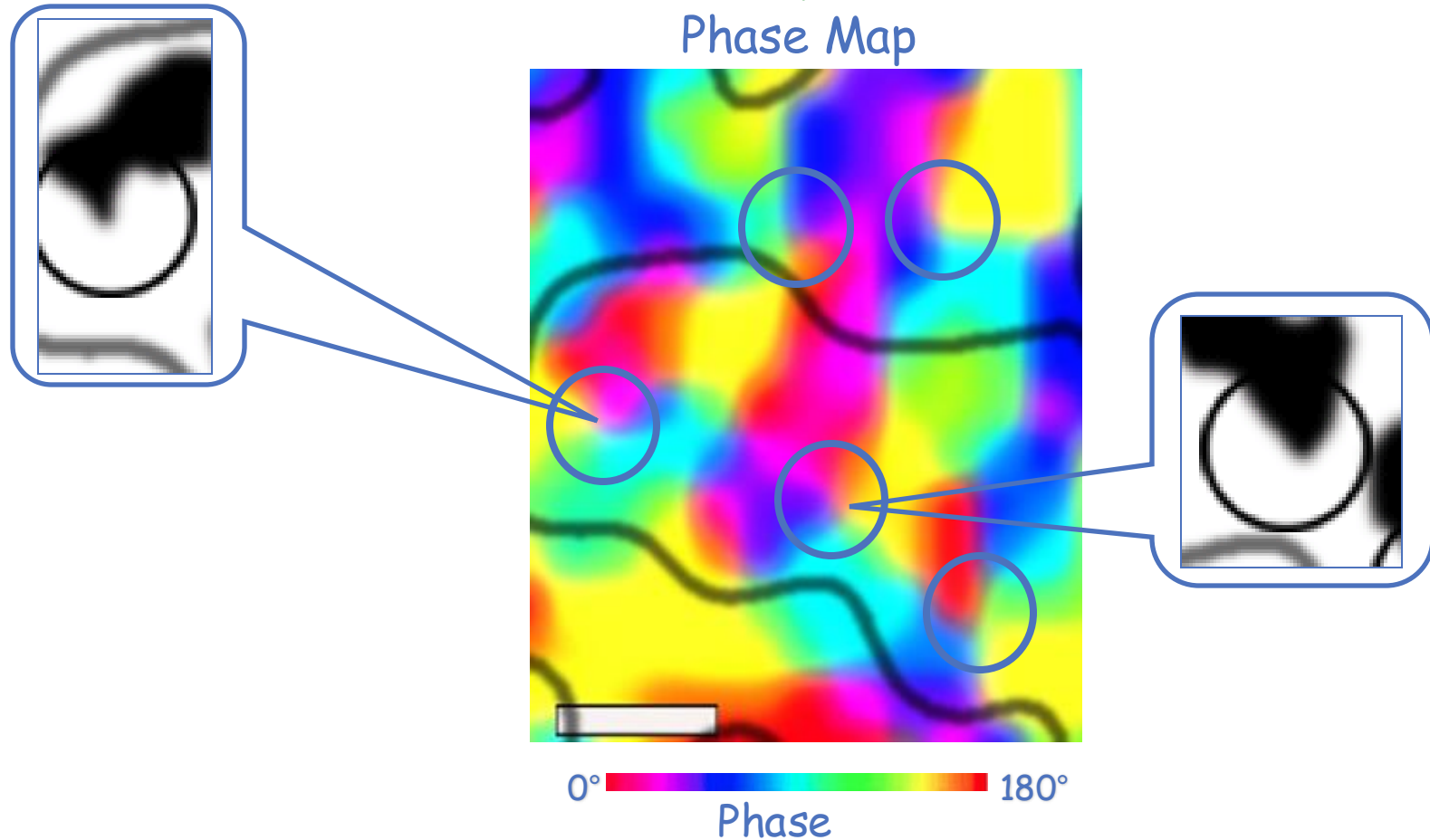
day 2

day 3

Yacoub et al: differential maps contrasting stimulation of the left and right eye

Methodology

Orientation Columns in Human V1 as Revealed by fMRI at 7T



Yacoub, Ugurbil & Harel
University of Minnesota / CMRR

HBM 2006: Thursday, June 15, 2006 at 9:30

Scalebar = 0.5 mm

Methodology

neuronal
activity pattern

fMRI
activity pattern

condition 1



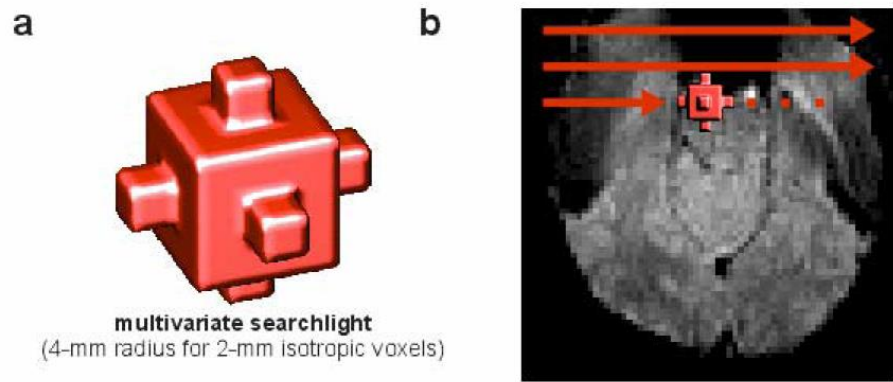
hemodynamics



condition 2



Methodology



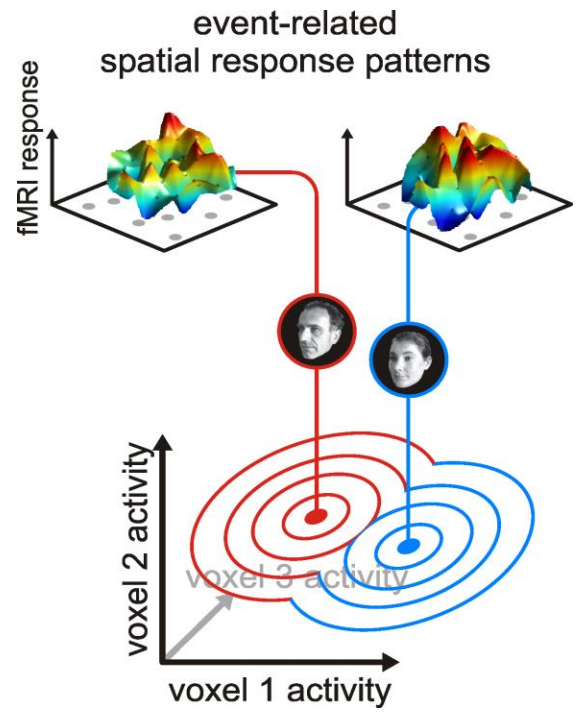
multivariate searchlight
(4-mm radius for 2-mm isotropic voxels)



Information-based searchlight map with t-map texture (FDR $q < 0.05$)



Unsmoothed-data t map (same number of voxels marked)



N. Kriegeskorte, R. Goebel, P. Bandettini, Information-based functional brain mapping. *Proc. Nat'l. Acad. Sci. USA*, 103, 3863-3868 (2006).

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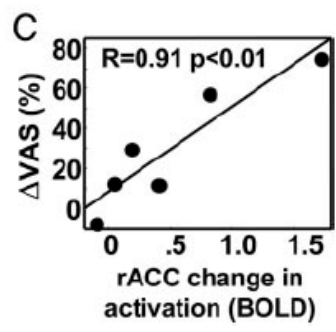
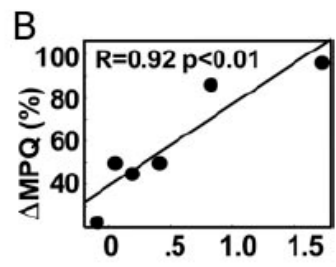
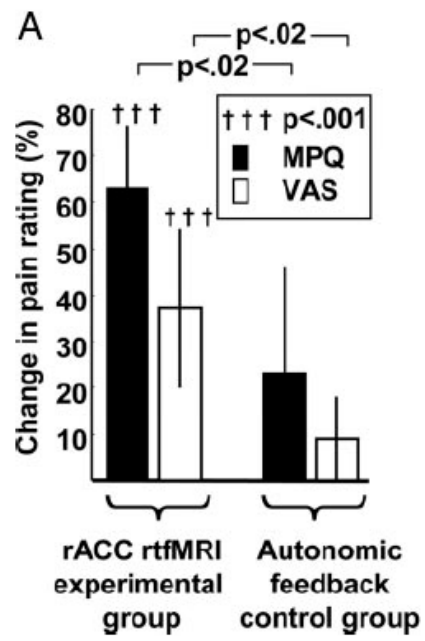
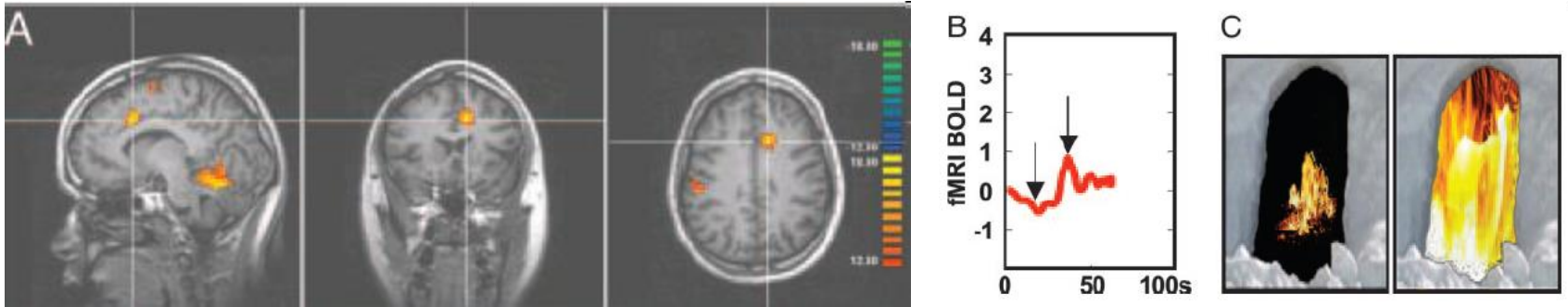
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Applications

Real time fMRI feedback from Anterior Cingulate Cortex to reduce chronic pain



Control over brain activation and pain learned by using real-time functional MRI, R. C. deCharms, et al. PNAS, 102; 18626-18631 (2005)

What fMRI Might Do

Complementary use for clinical diagnoses

- utilization of clinical research results for diagnoses
- prediction of pathology

Clinical treatment and assessment of therapy

- better understanding mechanism of pathology for focused therapy
- drug effect assessment
- assessment of therapy progress, biofeedback
- epileptic foci mapping
- neurovascular physiology assessment

Non clinical uses

- lie detection
- prediction of behavior tendencies
- brain/computer interface

How most fMRI studies are performed

MRI parameters:

1.5T - 3T, 64 x 64 matrix, 3mm x 3mm x 5mm voxel size, whole brain, TR = 2 sec.

Paradigm:

Block design or event-related, single or multiple conditions.

Analysis:

Motion correct, multi-regression, spatial smoothing and spatial normalization, standard classical statistical tests, multi-subject averaging.

Hypothesis:

A region or network of regions show modulation with a task. This modulation is unique to the task and/or population.

How fMRI might be performed

MRI parameters:

3T - 11.7T, 256 × 256 matrix, 0.5 × 0.5 × 0.5 voxel size, whole brain TR = 1sec or select slab TR = 100 ms.

Paradigm:

Natural, continuous, or no stimuli/task. Simultaneous multi-modal, or multiple contrast measurements.

Analysis:

Motion correct, dynamic Bo-field correction, no spatial or temporal smoothing, machine learning algorithms, pattern classification, hemodynamic parameter assessment, correlation with behavior.

Hypothesis:

Similar to previous but using the high resolution patterns, fluctuations, dynamics, and contrast mechanisms that we are still figuring out how to interpret and extract.