#### fMRI Contrast: How Much More Information Can We Obtain?

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# **BOLD Contrast**







# The continuing challenge is to make progressively more precise neuronal, metabolic, and hemodynamic inferences across spatial and temporal scales.



Physiologic Modulation / Measurement

### BOLD Contrast Advancements

1991 - 2 •TE dependence • Field Strength Dependence Resolution Dependence • Pulse sequence dependence (T2 and T2\*) • Dynamics: latency and return to baseline • First BOLD models • Correlation of BOLD with parametric task manipulation Post undershoot 1992-3 •NMR phase shift observation Angio and venogram correlation • Effects of Physiologic Stress 1993-4 Retinotopy Cognitive mapping Event - related fMRI 1994 - 5 Parametric task design Sub-millimeter resolution fMRI • Diffusion weighting dependence (IV contribution) 1995 - 6 • Physiologic fluctuations • Extended duration stimulation effects 1996 - 7 Pre undershoot Flow and BOLD comparisons (dynamics and magnitude) 1997-•Blood volume dynamics 8 • Simultaneous flow and BOLD acquisition Ocular Dominance Column Mapping 1998 - 9 • CMRO<sub>2</sub> Mapping Randomized ER-fMRI task design Balloon Model • Baseline Blood Oxygenation Quantitation 1999 - 2000 Mental Chronomitry •Linearity of BOLD signal change



Physiologic Modulation / Measurement

#### Latency

## Magnitude











#### Regions of Interest Used for Hemi-Field Experiment



#### Right Hemisphere

#### Left Hemisphere

# Hemi-field with 500 msec asynchrony

Average of 6 runs Standard Deviations Shown







# Motor Cortex

## **Auditory Cortex**







# Methods





Short duration stimuli produce larger responses than expected

• Amplitude of Response



Fit ideal (linear) to response

Area under response / Stimulus Duration



Output Area / Input Area



• Area under nonlinearity curve



• Slope of nonlinearity curve





#### Nonlinearity

Magnitude

Latency











# Conclusions

- Responses to short duration stimuli are larger than predicted from a linear system
- Spatial variation in this nonlinear relationship is seen
- The variation in nonlinearity is not significantly correlated with magnitude or latency



**Modulation / Measurement** 



#### Anatomical



#### Finger Movement

#### 12% 02

#### 5% CO2

#### **Resting State Blood Volume Weighting**











Physiologic Modulation / Measurement

## Activation-induced MR Signal Change Mechanisms





#### **Fractional Signal Change**

2.5 mm<sup>2</sup> 1

1.25 mm<sup>2</sup>







## T1 - weighted



## T2\* weighted



## T1 and T2\* weighted



### Perfusion





#### Activation



# Anatomy



# BOLD



# Perfusion



#### Velocity Nulling at 1.5T








Wright et al. JMRI, 1: 275-228, 1991

## $D = 1 \ \mu m^2 / ms \rightarrow 2.5 \ \mu m^2 / ms$





## Field -Strength Dependence of T2\* and T2



Hct = 44,  $\tau$  = 48, %HbO<sub>2</sub> = 60, T2<sub>o</sub> = 250 ms, T2' = 120 ms

### Gradient-echo, % $HbO_2 = 60$



### Spin-echo, %HbO<sub>2</sub> = 60



Spin-Echo TE = 105 ms TR = ∞





Spin-Echo functional TE = 105 ms











average  $\Delta R2^* / \Delta R2 \approx 3$  to 4





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#### **Gradient - Echo** Spin - Echo



During Activation Increase

Post Activation Undershoot



#### no diffusion weighting

diffusion weighting



# Hemodynamic Specificity



### How Much More Information Can we Obtain?

Neuronal Firing Rates Hemodynamics:

will eventually have quantitative maps of flow, oxygenation, volume, and CMRO2 as well as other parameters such as velocity, exchange, hematocrit, and vascular responsivity.

Resolution: < 1mm and < 100 ms.

#### Key:

Neuronal, Physiologic, and Pulse Sequence Modulation

#### Needs...

More "embedded information" pulse sequences More specific neuronal activation and physiologic stresses

#### Which requires...

Extreme sensitivity (high field strength)

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#### Functional Imaging Methods / 3T Group







average  $\Delta R2^* / \Delta R2 \approx 3$  to 4

Further Advancements?

More pulse sequence modulation Model fitting and constraining Simultaneous collection of multiple types of baseline and time series informatin Spatial mapping of dynamic characteristics with well controlled stimuli

High Field Strength:

Ask questions across spatial resolution scales Ask more subtle questions about dynamics and magnitudes Reduced intravascular effects Create MAPS of these effects.. Maps:

Spin-echo vs. gradient-echo Flow vs. BOLD Latency Post undershoot Pre undershoot Balloon model parameters Diffusion attenuation Correlation with parametric task modulation Noise correlation

## Single - Shot EPI at 3T: Half NEX, 256 x 256, 16 cm FOV



## Single - Shot EPI at 3T: Half NEX 256 x 256, 16 cm FOV





# Simultaneous Flow and BOLD



#### Simultaneous BOLD and Perfusion





# BOLD

# Perfusion



**Simultaneous BOLD and Perfusion** 

perfusion

BOLD



# Angiogram Perfusion BOLD



# CMRO<sub>2</sub>-related BOLD signal deficit:



Simultaneous Perfusion and BOLD imaging during graded visual activation and hypercapnia



Hoge, et al.









# **Vascular Sensitization**



## GE TE = 30 ms

## SE TE = 110 ms



# **Vascular Sensitization**



## Field -Strength Dependence of R2\* and R2



Hct = 44,  $\tau$  = 48, %HbO<sub>2</sub> = 60, R2<sub>o</sub> = 4.0 s<sup>-1</sup>, R2'<sub>o</sub> = 8.3 s<sup>-1</sup>
## **Relative R2\* and R2 dependence on %HbO<sub>2</sub>**



Hct = 44, D = 1.8  $\mu$ m<sup>2</sup> / ms, R2<sub>o</sub> = 4.0 s<sup>-1</sup>, R2'<sub>o</sub> = 8.3 s<sup>-1</sup>

### Field -Strength Dependence of R2\* and R2



Hct = 44,  $\tau$  = 48, %HbO<sub>2</sub> = 60, R2<sub>o</sub> = 4.0 s<sup>-1</sup>, R2'<sub>o</sub> = 8.3 s<sup>-1</sup>

## Field -Strength Dependence of T2\* and T2



Hct = 44,  $\tau$  = 48, %HbO<sub>2</sub> = 60, T2<sub>o</sub> = 250 ms, T2' = 120 ms

### Relaxation rate change dependence on field strength



%HbO<sub>2</sub> = 60 -> 75, Hct = 44,  $\tau$  = 48



 $Hct = 44, R2_{o} = 4.0 s^{-1}$ 

### **Cell Radius Effect**



Hct = 44,  $\tau$  = 48, %HbO<sub>2</sub> = 60, T2<sub>o</sub> = 250 ms, T2' = 120 ms

### **Hematocrit Effect**



 $\tau = 48, \ \text{\%HbO}_2 = 60, \ \text{T2}_0 = 250 \text{ ms}, \ \text{T2}' = 120 \text{ ms}$ 

### **Hematocrit Effect**



 $\tau = 48, \ \text{\%HbO}_2 = 60, \ \text{R2}_0 = 4.0 \ \text{s}^{-1}, \ \text{R2'}_0 = 8.3 \ \text{s}^{-1}$ 

### **Cell Radius Effect**



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## **Relative T2\* and T2 dependence on %HbO<sub>2</sub>**



Hct = 44, D =  $1.8 \ \mu m^2 / ms$ , T2<sub>o</sub> = 250 ms, T2'<sub>o</sub> = 120 ms





average  $\Delta R2^* / \Delta R2 \approx 3$  to 4

### Hematocrit Effect Relaxation Rate Changes with and Oxygenation Change



*τ* = 48, %HbO<sub>2</sub> = 60 -> 75

Numerical Simulations of the Oxygenation Dependence of the T2 and T2\* of Whole Blood using a Deterministic Diffusion Model

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# Activation-induced MR Signal Change Mechanisms



<ul> <li>compartment sizes</li> </ul>	2.5 μ m -> 380 μm
<ul> <li>proton dynamics</li> </ul>	Diffusion, Exchange, Flow, Pulsation
•orientation	Random -> Single Orientation
<ul> <li>oxygen saturation</li> </ul>	0.6 -> 0.95
•volume	2% -> 100% (per voxel)
•hematocrit	10 -> 50

also

### relative intravascular and extravascular effects

## Intravascular and Extravascular T2\* Effects

red blood cells in vessel

### vessel in tissue



# $\Delta \omega$ maps

### Intravascular and Extravascular T2\* Effects

- 1. extravascular dephasing
  - intravascular / intravascular dephasing
  - intravascular dephasing

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(dependent on the T2\* of blood)

# Blood T2

•Thulborn et al. Biochim Biophys Acta, 714: 265-270, 1982
•Gomori et al. JCAT, 11: 684-690, 1987
•Wright et al. JMRI, 1: 275-228, 1991
•Ogawa et al. MRM, 29: 205-210, 1993
•Gilles et al. MRM 33: 93-100, 1995
•Brooks et al. JMRI 4: 446-450,1995

•Meyer et al. MRM 34: 234-241, 1995



# Most fMRI is performed using gradient-echo sequences.

# Calculating T2\* of Fully Oxygenated Blood

Assumption:

T2' of fully oxygenated blood  $\approx$  T2' of cortex

T2 ' of cortex:

1 / T2 ' = 1 / T2 \* - 1 / T2  $\approx$  1 / 60 ms - 1 / 80 ms  $\approx$  1 / 240 ms

T2 \* of fully oxygenated blood (at 1.5T):

 $1 / T2^* \approx 1 / T2' + 1 / T2 \approx 1 / 240 \text{ ms} + 1 / 250 \text{ ms} \approx 1 / 120 \text{ ms}$ 

# **Basic Approach**

### 1. Simplified model based on literature values.

Physiologic: hematocrit oxygenation geometry susceptibility MR:

inter-180 time field strength

### 3. Adjust *diffusion coefficient* to "match" results of:

•Wright et al. JMRI, 1: 275-228, 1991 (T2)

and

•Hoppel et al. MRM, 30: 715-723, 1993 (ΔR2\* / ΔR2)

4. Using matched parameters, simulate T2\* effects.

# **Deterministic Diffusion Model**

#### **Frequency Offset**



Randomly oriented cylinders
Feely permeable
Overlapping fields
Red blood cell radius:

(2.5 µm = 10 voxels)

Hct. determines number of cells

#### Spin Probability Distribution



- Gaussian distribution
- Step time increment: (0.1 ms to 0.25 ms)

prob (x,y) = 
$$\left| \frac{LX \times LY}{2 \text{ s}} \right| \frac{1}{\sigma^2} e^{\left| \frac{x^2 + y^2}{2 \sigma^2} \right|}$$

 $\sigma = \sqrt{2Dt}$ 

matrix sizes = 256 x 256 voxels



Frequency Offset Map

$$\Delta \omega' = 2\pi [(42.57 \times 10^6) 2\pi B_0] [\Delta \chi] (1 - Y)$$

 $rbc \\ \Delta \chi = 0.180 \times 10^{-6}$ 

 $\Delta \omega$  (outside) =  $\Delta \omega' \sin (\theta)^2 (a/r)^2 \cos (2\phi)$ 

$$\Delta \omega$$
 (inside) =  $\Delta \omega'$  (3 cos ( $\theta$ )-1)<sup>2</sup>/3

S. Ogawa et al. Biophys J. 64, 803-812 (1993).

# Spin Probablility Distribution

prob (x,y) = 
$$\left(\frac{LX \times LY}{2 \times 3}\right) \frac{1}{\sigma^2} e^{\left(\frac{x^2 + y^2}{2 \sigma^2}\right)}$$
  

$$\sigma = \sqrt{2Dt}$$

$$D (pixels^2/ms) = \frac{D (\mu m^2/ms)}{\left(\frac{cell radius (pixels)}{cell radius (\mu m)}\right)^2}$$

### x (TE/dt)



# "Phase Rotate" and "Smooth" Simulation

- 1) Start with maps of uniform, coherent transverse magnetization (i = 1, q = 0).
- 2) For each time interval, dt, perform:
  - a) Spatially dependent phase rotation. (using  $\Delta \omega$  maps)
  - b) Convolution with gaussian smoothing function. (representing diffusion during time, dt )
  - c) Signal magnitude calculation by complex addition of every matrix element.





### x (TE/dt)





# **Gradient-Echo**



Time 0 ms 10 ms 20 ms 30 ms 40 ms 50 ms 60 ms



# **Spin-Echo**



**180°** 





SE

# **Comparison #1**

•Wright et al. JMRI, 1: 275-228, 1991

- Hct = 44
- Field Strength = 1.5 T
- 5 echo measurement
- inter-180 time ( $\tau$ ) from 1.5 ms to 48 ms.
- $\cdot$  T2<sub>o</sub> set to 250 ms.
- % $HbO_2$  varied from 30% to 100%

# **Simulated Multi - Echo Collection**





 $D = 1.8 \,\mu m^2 / ms$
### $D = 1 \mu m^2 / ms \rightarrow 2.5 \mu m^2 / ms$



# **Comparison #2**

•Hoppel et al. MRM, 30: 715-723, 1993

- $\cdot \text{ Hct} = 44$
- Field Strength = 1.5 T
- Determine  $\Delta R2^*/\Delta R2$
- 5 echo measurement
- Spin-echo:  $\tau$  = 48 ms.
- Gradient-echo: center echo TE = 48 ms.
- $\Delta R2^*$  and  $\Delta R2$  relating to %HbO<sub>2</sub> change from 60% to 70%.

- Large vessel effect not removed by spin-echo.
- FMRI signal change magnitude (for SE and GE) is likely to be most strongly weighted by blood volume in each voxel





## Conclusions

### 1. Intravascular T2\* and T2 effects are simulated with a deterministic diffusion model.

-simplified geometry and proton dynamics.
-simplified dephasing mechanism: (diffusion in, through, and around red blood cells)

2. Results show general agreement with literature at D = 1.8  $\mu$ m<sup>2</sup>/ms and radius = 2.5  $\mu$ m.

- 3. Because of intravascular effects, spin-echo sequences do not remove large vessel effects.
- 4. T2\* of blood is significant when considering field strength fMRI dependence.

### **Red Blood Cell**



Gilles et al. MRM 33: 93-100, 1995



Wright et al. JMRI, 1: 275-228, 1991



Brooks et al. JMRI 4: 446-450,1995

# **Future Work**

- Model the relative intravascular and extravascular effects using the deterministic diffusion model.
- Characterize the differences between exchange and diffusion mechanisms.



Brooks et al. JMRI 4: 446-450,1995

### **Red Blood Cell**



Gilles et al. MRM 33: 93-100, 1995

$$\frac{1}{T2_{b}} = \frac{1}{T2_{o}} + K(\tau_{180}, \omega_{0}) \left(1 - \frac{\% \text{HbO}_{2}}{100\%}\right)^{2}$$

### Luz - Meiboom Model



Wright et al. JMRI, 1: 275-228, 1991



#### Meyer et al. MRM 34: 234-241, 1995



Meyer et al. MRM 34: 234-241, 1995



FIG. 4. Dependence of the relaxation rate in the absence of exchange ( $A = R_{2_0}$ , in Eq. [3]) on the fraction of deoxyhemoglobin in whole blood ( $f_{Hb}$ ). The linear regression of this plot is  $R_{2_0} = (26 \pm 2.13) f_{Hb} + (6.28 \pm 1.84); r^2 = 0.98.$ 

#### Meyer et al. MRM 34: 234-241, 1995





2.5 mm<sup>2</sup> 1.67 mm<sup>2</sup> 1.25 mm<sup>2</sup> 0.83 mm<sup>2</sup> 0.62 mm<sup>2</sup>

## Fractional Signal Change

2.5 mm<sup>2</sup> 1

1.25 mm<sup>2</sup>



0.83 mm<sup>2</sup> 0.62 mm<sup>2</sup>









average  $\Delta R2^* / \Delta R2 \approx 3$  to 4



#### **Summary of Diffusion-Weighted fMRI Data**



# Anatomy



# BOLD



# Perfusion



## Simultaneous Flow and BOLD



**Simultaneous BOLD and Perfusion** 

perfusion

BOLD



## Angiogram Perfusion BOLD



## T1 - weighted



## T2\* weighted



## T1 and T2\* weighted





#### Anatomical

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#### Finger Movement

### 5% CO2

12% 02

#### **Resting State Blood Volume Weighting**





#### · · · · · Capillaries —— Veins













### Latency

### Magnitude
















### GE TE = 30 ms

### SE TE = 110 ms



# BOLD

BALD

### GE TE=30 ms

SE TE=110 ms

### GE TE = 30 ms



SE TE = 110 ms







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# $\begin{array}{cc} GE & SE \\ (TE = 30 \text{ ms}) & (TE = 110 \text{ ms}) \end{array}$



### Subject 1

### Subject 2









### S2 Gradient - Echo

#### Spin - Echo

During Activation Increase







During Activation Increase

Post Activation Undershoot

#### Visual task





#### Motor task







### no diffusion weighting

### diffusion weighting



### plasma $\chi$ < rbc $\chi$



#### plasma $\chi$ > rbc $\chi$















 $\mathbf{b} = \mathbf{0}$ 







#### TE = 5.0

64

TE = 44.3





# Mo

# **T2\***



# **MR Signal**



# **TE (5 to 44 ms)**

Grid:10

Num: 64

# **Percent Change**

## Difference



# TE (5 to 44 ms)





2.5 mm<sup>2</sup> 1.67 mm<sup>2</sup> 1.25 mm<sup>2</sup> 0.83 mm<sup>2</sup> 0.62 mm<sup>2</sup>

## Fractional Signal Change

2.5 mm<sup>2</sup> 1

1.25 mm<sup>2</sup>



0.83 mm<sup>2</sup> 0.62 mm<sup>2</sup>







average  $\Delta R2^* / \Delta R2 \approx 3$  to 4

#### Spin-Echo TE = 105 ms TR = ∞

Gradient-Echo TE = 50 ms

Gradient-Echo functional TE = 50 ms

Spin-Echo functional TE = 105 ms





#### **Summary of Diffusion-Weighted fMRI Data**



# Anatomy



# BOLD



# Perfusion



# Simultaneous Flow and BOLD



**Simultaneous BOLD and Perfusion** 

perfusion

BOLD



## Angiogram Perfusion BOLD



## T1 - weighted



## T2\* weighted



## T1 and T2\* weighted





#### Anatomical

)



#### Finger Movement

#### 5% CO2

12% 02
## **Resting State Blood Volume Weighting**





#### · · · · · Capillaries —— Veins













# Latency

# Magnitude



















## <u>Blood Oxygenation Level Dependent (BOLD) signal changes</u>







Short duration stimuli produce larger responses than expected

### Tasks

#### **Visual Stimulation**



Finger tapping

## **Imaging Parameters**

3 Tesla EPI 64x64 24 cm FOV 5 mm slice thickness 8 slices

TR: 1000 ms TE: 30 ms

320 time points

Simulated (linear) Measured visual stimulation motor task

• Amplitude of Response



Fit ideal (linear) to response

Area under response / Stimulus Duration



Output Area / Input Area



• Area under nonlinearity curve



• Slope of nonlinearity curve





## Nonlinearity

Magnitude

Latency













### Motor task







# Conclusions

- Responses to short duration stimuli are larger than predicted from a linear system
- Spatial variation in this nonlinear relationship is seen
- The variation in nonlinearity is not significantly correlated with magnitude or latency

# Implications

• Nonlinearity is primarily neuronal in origin

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• Magnitude and latency do not accurately reflect underlying vasculature