

Contribution of Systemic Vascular Effects on White Matter BOLD fMRI Signal

#193



PS Özbay, C Chang, D Picchioni, H Mandelkow, TM Moehlman, MG Chappel-farley, P van Gelderen, JA de Zwart, and JH Duyn

Advanced MRI Section, LFMI, NINDS, National Institutes of Health, Bethesda, MD, United States

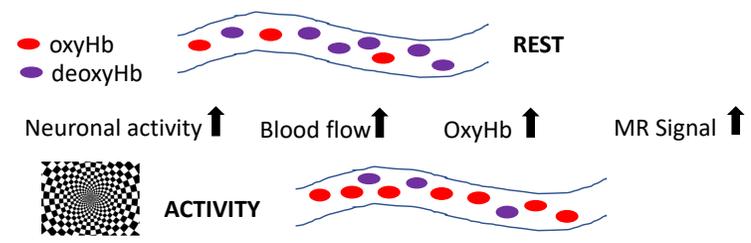
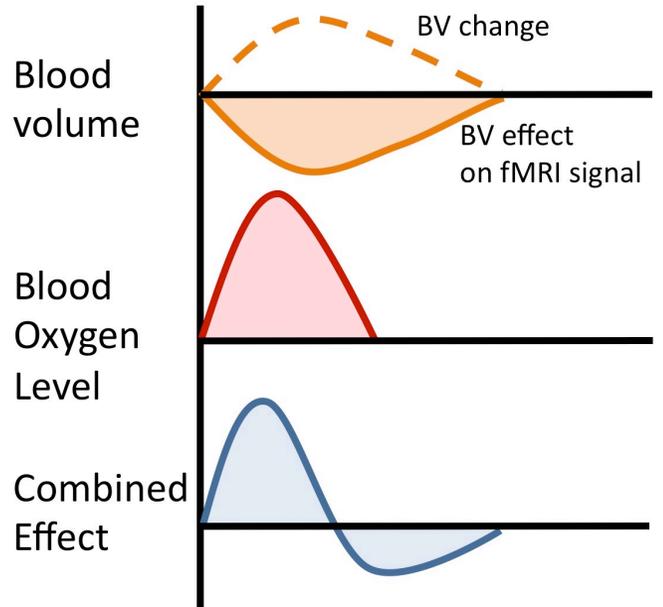
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BOLD fMRI

- Typical BOLD fMRI response to a brief, local (neuro) vascular dilatory event results from the combination of a **(negative)** cerebral blood volume and a **(positive)** blood oxygenation effect.
- As the signal results from primarily local blood flow response to changes in neural activity, it is mostly localized to gray matter or to nearby downstream venous vasculature (Turner 2002, Logothetis & Wandell 2004).

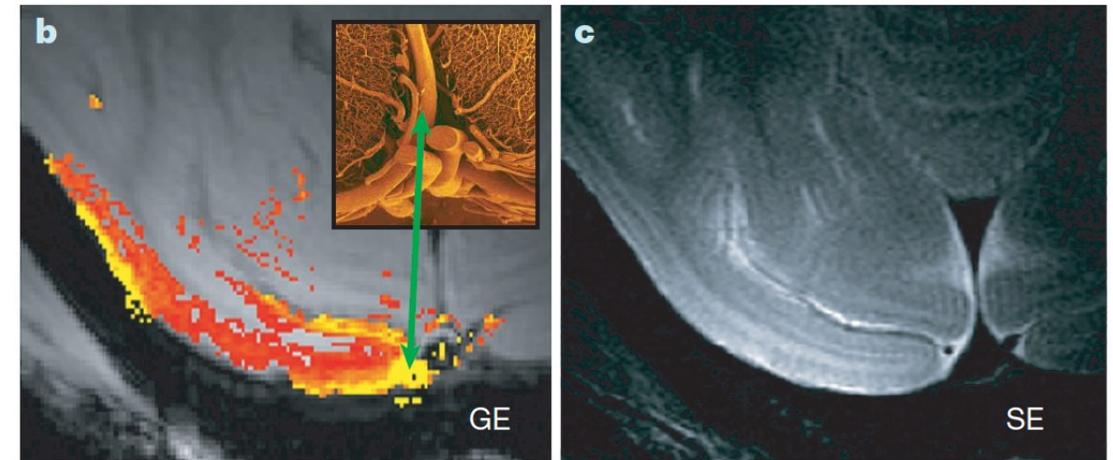


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(left) For the functional image red indicates low and yellow indicates high. In-plane resolution $0.3 \times 0.3 \text{ mm}^2$; slice thickness 2 mm. Green arrow shows scanning electron microscopy image of an area of pia vessel. (right) Anatomical scan, SE-EPI.

BOLD fMRI – white matter

- Extensive lesion and anatomic studies have implicated the functional significance of white matter in neurological and psychiatric diseases.
- Recent studies have **also** reported the detection of BOLD fMRI signal in WM.
- *A tool to non-invasively investigate the functional dynamics of WM, which could substantially broaden current approaches to study brain connectivity, and may provide considerable insight into WM diseases, such as multiple sclerosis.*

frontiers in
NEUROSCIENCE

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Does functional MRI detect activation in white matter? A review of emerging evidence, issues, and future directions

Jodie R. Gawryluk^{1†}, Erin L. Mazerolle^{2†} and Ryan C. N. D'Arcy^{3,4*}

¹ Division of Medical Sciences, Department of Psychology, University of Victoria, Victoria, BC, Canada

² Department of Radiology, Faculty of Medicine, University of Calgary, Calgary, AB, Canada

³ Applied Sciences, Simon Fraser University, Burnaby, BC, Canada

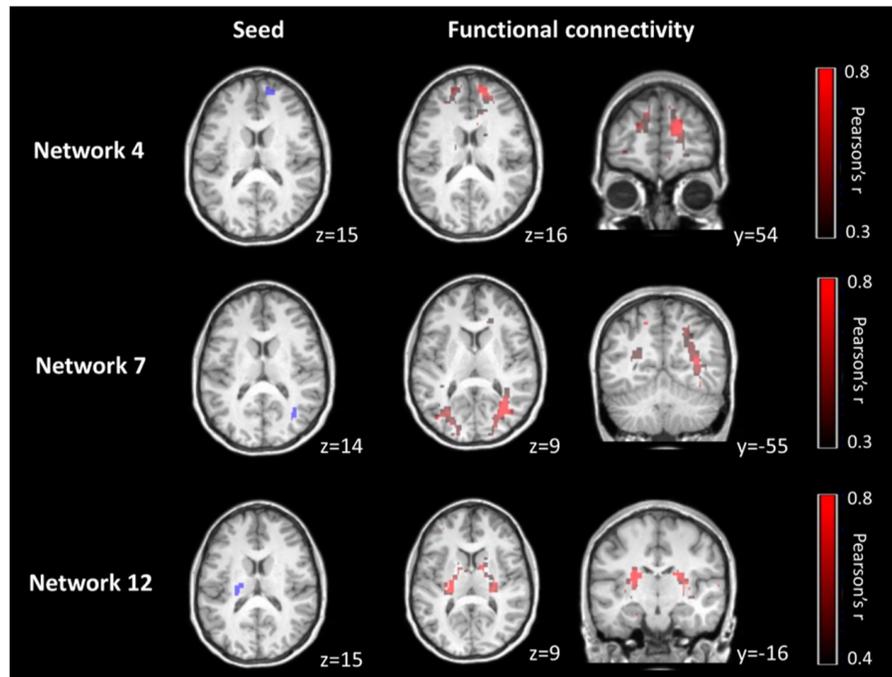
⁴ Fraser Health Authority, Surrey Memorial Hospital, Surrey, BC, Canada

Evidence for Functional Networks within the Human Brain's White Matter

Michael Peer,^{1,2} Mor Nitzan,^{3,4,5} Atira S. Bick,² Netta Levin,² and Shahar Arzy^{1,2}

¹Computational Neuropsychiatry Laboratory, Department of Medical Neurosciences, Hadassah Hebrew University Medical School, Jerusalem 91120, Israel,

²Department of Neurology, Hadassah Hebrew University Medical Center, Jerusalem 91120, Israel, ³Racah Institute of Physics, The Hebrew University of Jerusalem, Jerusalem 90401, Israel, ⁴Department of Microbiology and Molecular Genetics, Institute for Medical Research Israel-Canada, Faculty of Medicine, The Hebrew University of Jerusalem, Jerusalem 91120, Israel, and ⁵School of Computer Science, The Hebrew University of Jerusalem, Jerusalem 90401, Israel



Seed-based analysis in a small group ($n=5$) identifies the functional networks. Seeds are marked in blue and correlated voxels in red.



Mapping white-matter functional organization at rest and during naturalistic visual perception

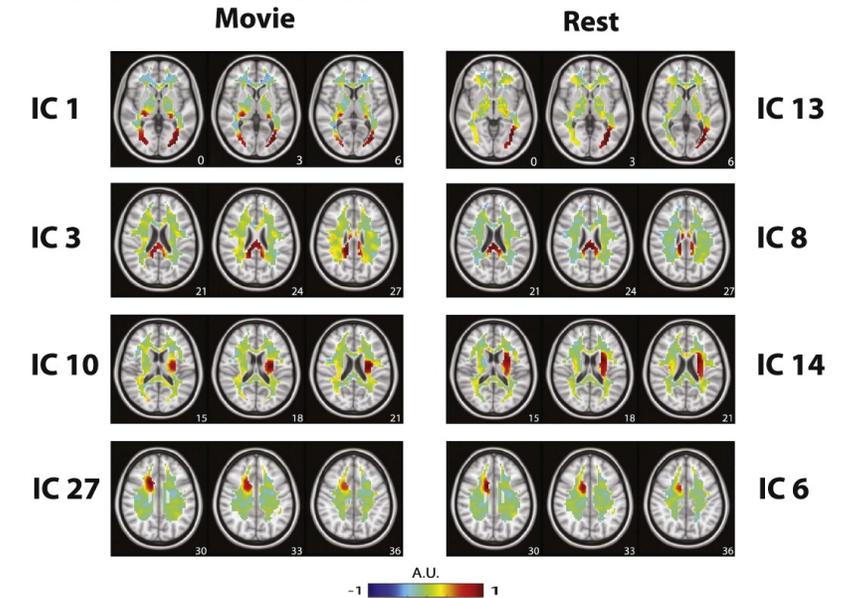


Lauren Marussich^a, Kun-Han Lu^b, Haiguang Wen^b, Zhongming Liu^{a,b,c,*}

^aWeldon School of Biomedical Engineering, Purdue University, West Lafayette, IN, USA

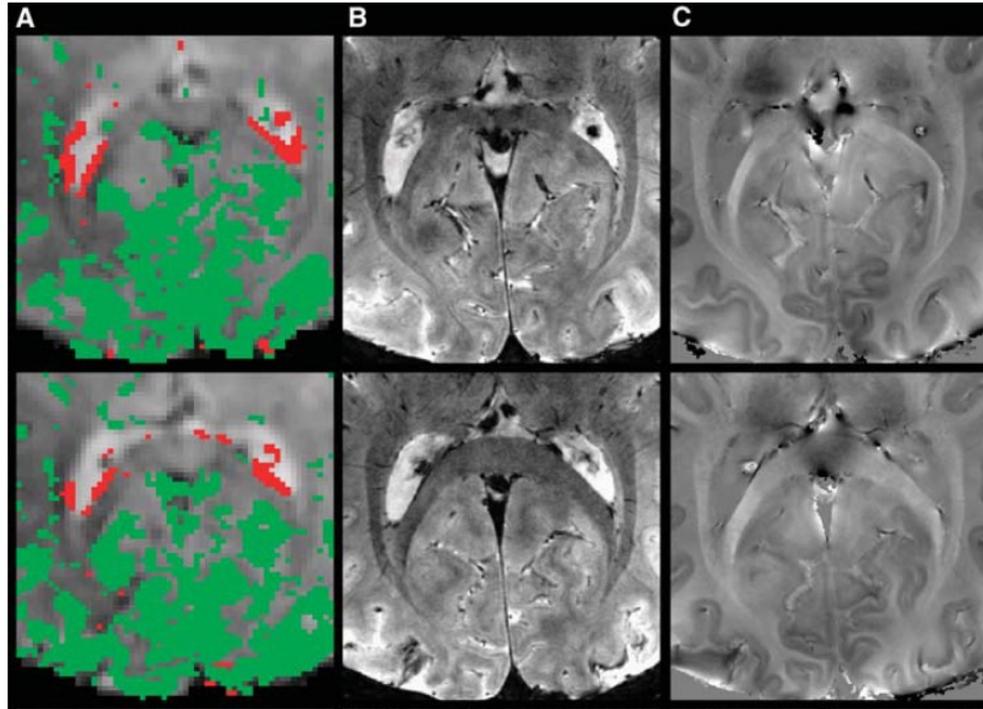
^bSchool of Electrical and Computer Engineering, Purdue University, West Lafayette, IN, USA

^cPurdue Institute for Integrative Neuroscience, Purdue University, West Lafayette, IN, USA

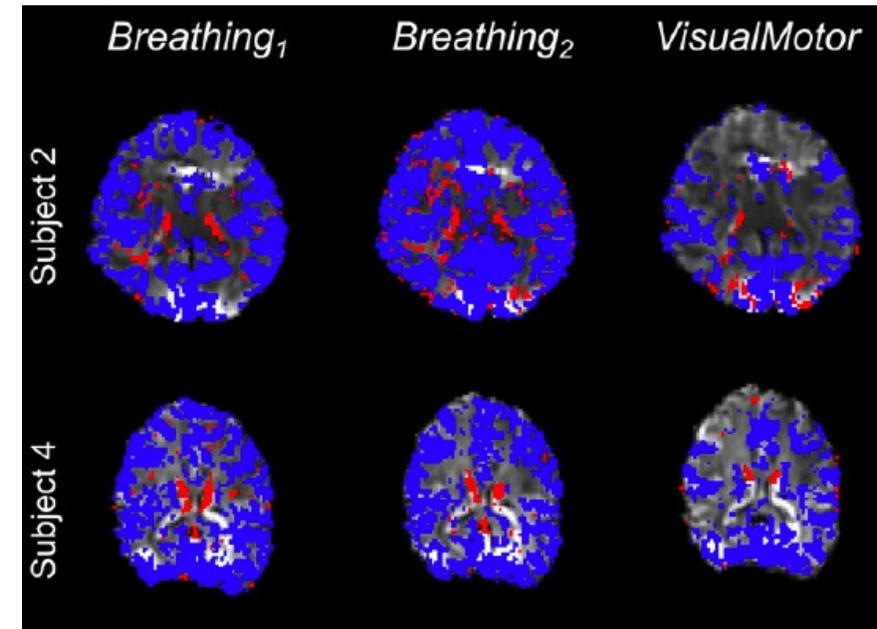


Four example pairs of **independent components** obtained from resting-state (right) and task-state (left) are shown.

“WM-fMRI signals are functionally relevant, and hence report, at least in part, neural activity in the WM.”



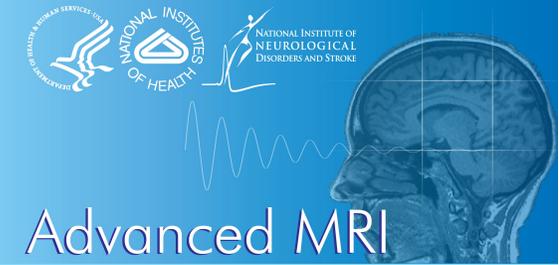
(A) the spatial distribution (red/green) of fMRI signals **anti-correlating** and **positively correlating** with the seed time series in the visual cortex; (B) magnitude and (C) phase images (TE=28.5 ms).



Significantly **correlated** (blue) and **anti-correlated** (red) voxels in the Breathing and VisualMotor data.

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Background & motivation

- WM signals are generally small.
- Their occurrence is sporadic.
- Low synaptic and vascular densities, plus the low metabolic demands of axonal signaling in WM.
- Hence, their origin is poorly understood.

“Yet, activation of the white matter has been rarely reported in the neuroimaging literature, and a reasonable investigator may doubt the presence of a BOLD signal in white matter altogether.”

Logothetis & Wandell, 2004.

- One particular concern is that a portion of WM signal may result from variations in systemic physiology.
- Peripherally measured data from the fingertip with photoplethysmography (PPG) or near-infrared spectroscopy (NIRS).

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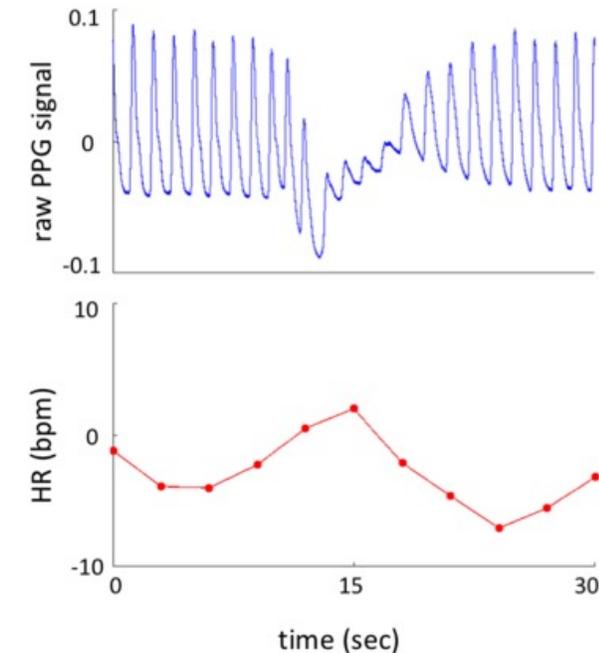
Background & motivation

To investigate a potential contribution of systemic physiology to those reported BOLD fMRI signals in WM, with used pulse-oximetry signals, as measured from finger-tip **photo-plethysmography (PPG)**, with **EEG** and **fMRI** signals co-recorded during an **over-night sleep study**.



Finger-tip PPG device

The change in volume caused by the pressure pulse is detected by illuminating the skin with the light and then measuring the amount of light either transmitted or reflected to a photodiode.



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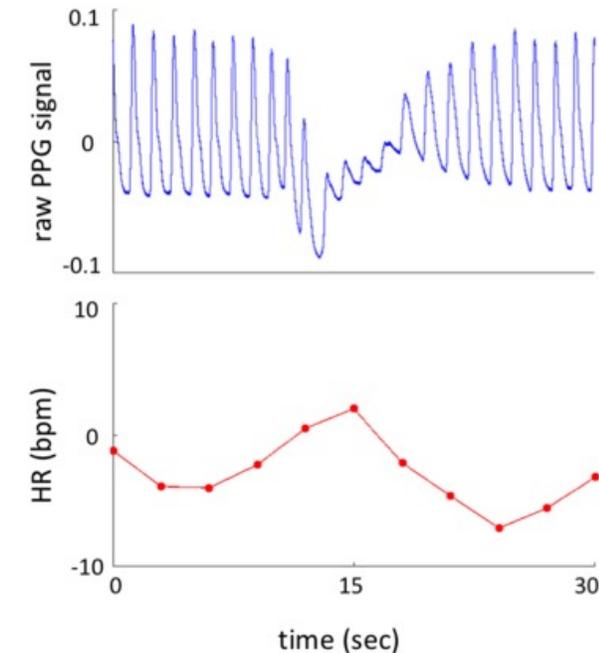
Background & motivation

To investigate a potential contribution of systemic physiology to those reported BOLD fMRI signals in WM, we used pulse-oximetry signals, as measured from finger-tip **photo-plethysmography (PPG)**, with EEG and fMRI signals co-recorded during an **over-night sleep study**.



Finger-tip PPG device

The transducer recording the PPG signal was placed on the finger-tip. It predominantly measures total hemoglobin content in the vasculature of the skin; thus, the amplitude of the PPG (PPG-AMP) signal reflects blood volume and its pulsatile variations with the cardiac cycle (Shelley, 2007).



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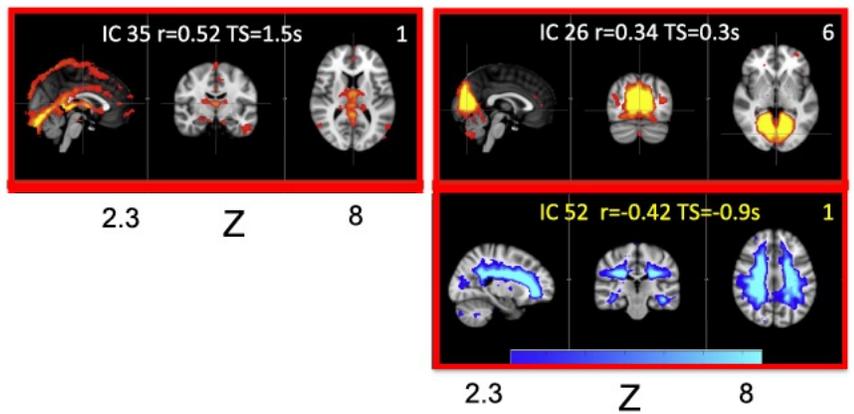


RS-fMRI & peripheral data

♦ Human Brain Mapping 31:311–325 (2010) ♦



Evaluating the effects of systemic low frequency oscillations measured in the periphery on the independent component analysis results of resting state networks
 Yunjie Tong ^{a,b,*}, Lia M. Hocke ^{a,c}, Lisa D. Nickerson ^{a,b}, Stephanie C. Licata ^{a,b}, Kimberly P. Lindsey ^{a,b}, Blaise deB. Frederick ^{a,b}



Components that show high positive correlations & highest negative correlation with the peripheral data (fNIRS), n=6.

Correction For Pulse Height Variability Reduces Physiological Noise in Functional MRI When Studying Spontaneous Brain Activity

Petra J. van Houdt, ^{1,2*} Pauly P.W. Ossenblok, ³ Paul A.J.M. Boon, ¹ Frans S.S. Leijten, ⁴ Demetrios N. Velis, ⁵ Cornelis J. Stam, ⁶ and Jan C. de Munck ²

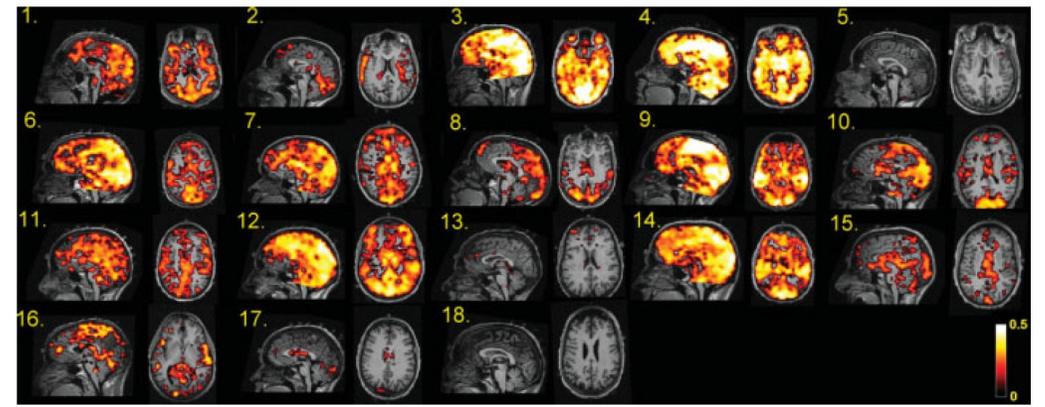


Figure 3. Statistical maps representing the significant BOLD changes which correlate with the variations in pulse height (VIPH) for all subjects (mid sagittal and axial views) at an FDR <1%. The statistical maps of Subject 1 till 5 represent the correlation patterns of the patients with epilepsy, whereas the statistical maps of Subject 6 till 18 represent the activated voxels of the healthy volunteers.

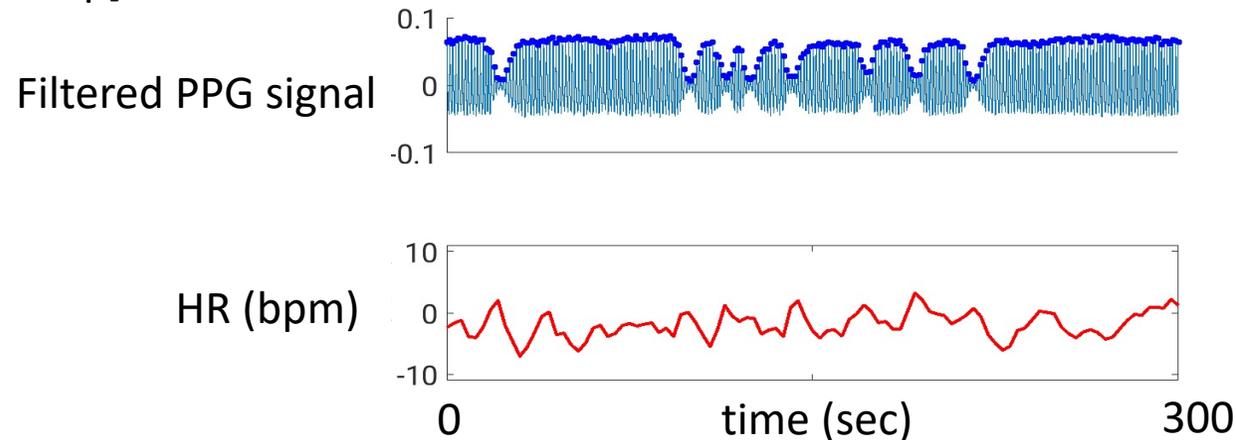
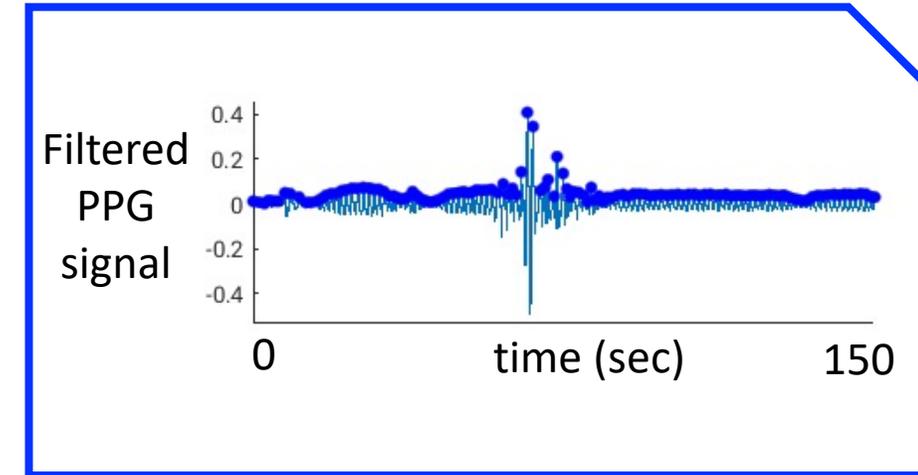
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Sleep data

Corresponding data among fMRI scans which had

- 1) least amount of motion
- 2) cleanest PPG data
- 3) isolated amplitude drops in PPG signal
- 4) segment of NREM sleep (EEG based sleep scoring)
[light sleep]



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Sleep data

fMRI data summary

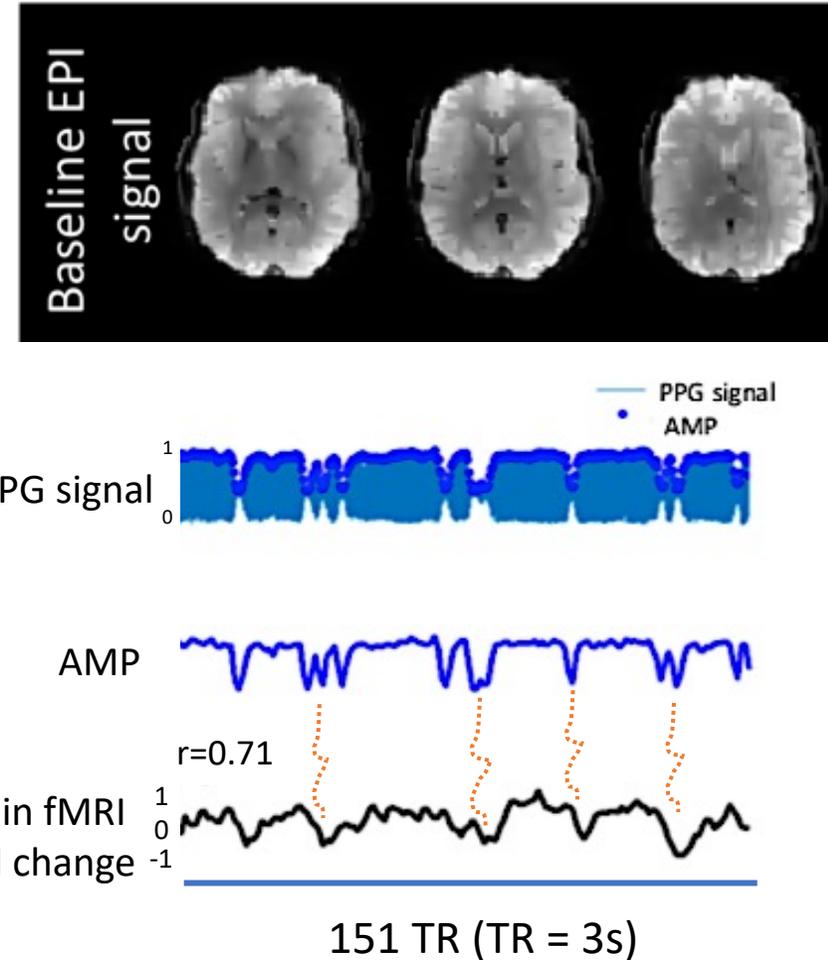
TR=3s, TE=36ms, in-plane res=2.5 mm,
slice thickness=2 mm, slice gap=0.5 mm,
Grappa=2, 3T

fMRI processing (AFNI)

Motion coregistration (six-parameter rigid body correction)
(*3dvolreg*)
Correction of residual motion (*3dDetrend*)
Low-order polynomial regression up to 3rd order
Slice timing correction (*3dTshift*)

PPG signal

Bandpass-filtering raw PPG data
Peak detection
AMP: amplitude of PPG signal



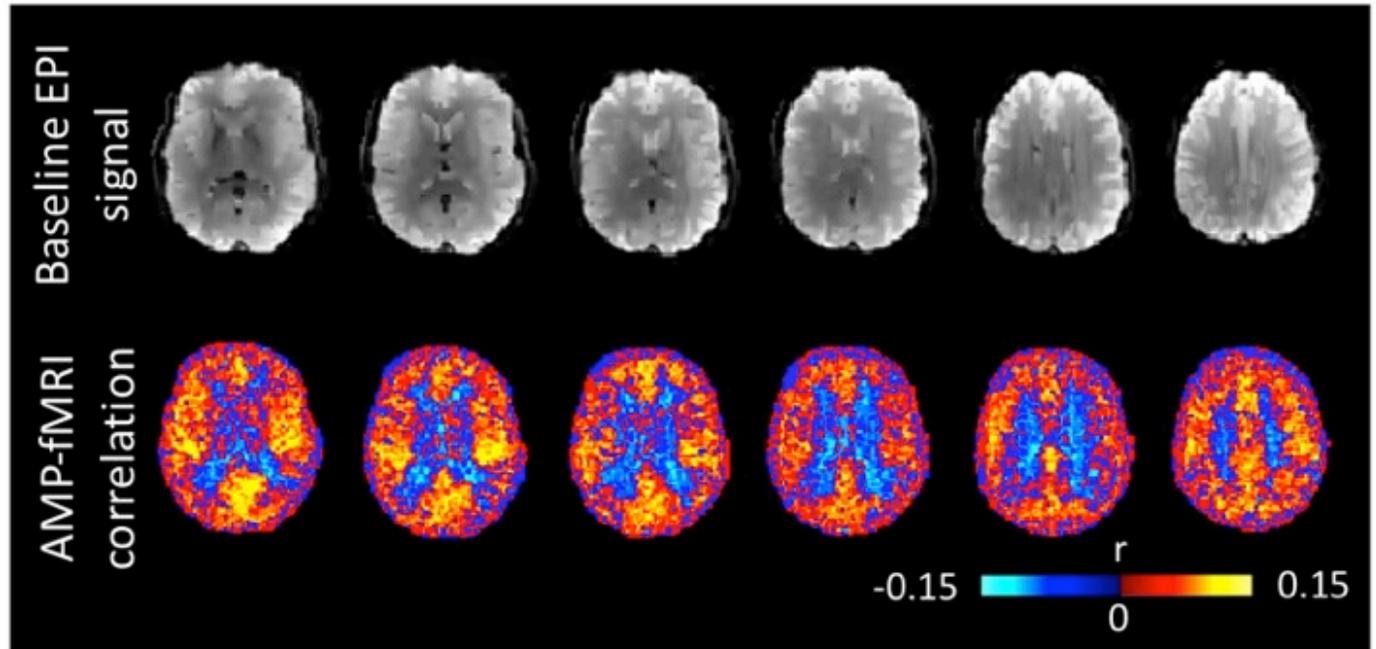
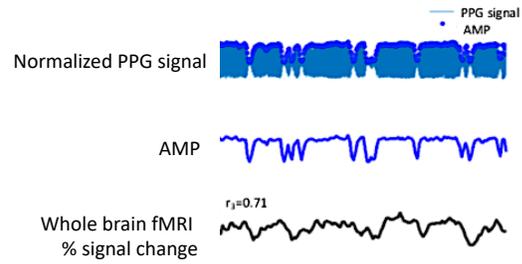
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PPG AMP – fMRI correlations

Voxel-wise correlation maps (N=8)

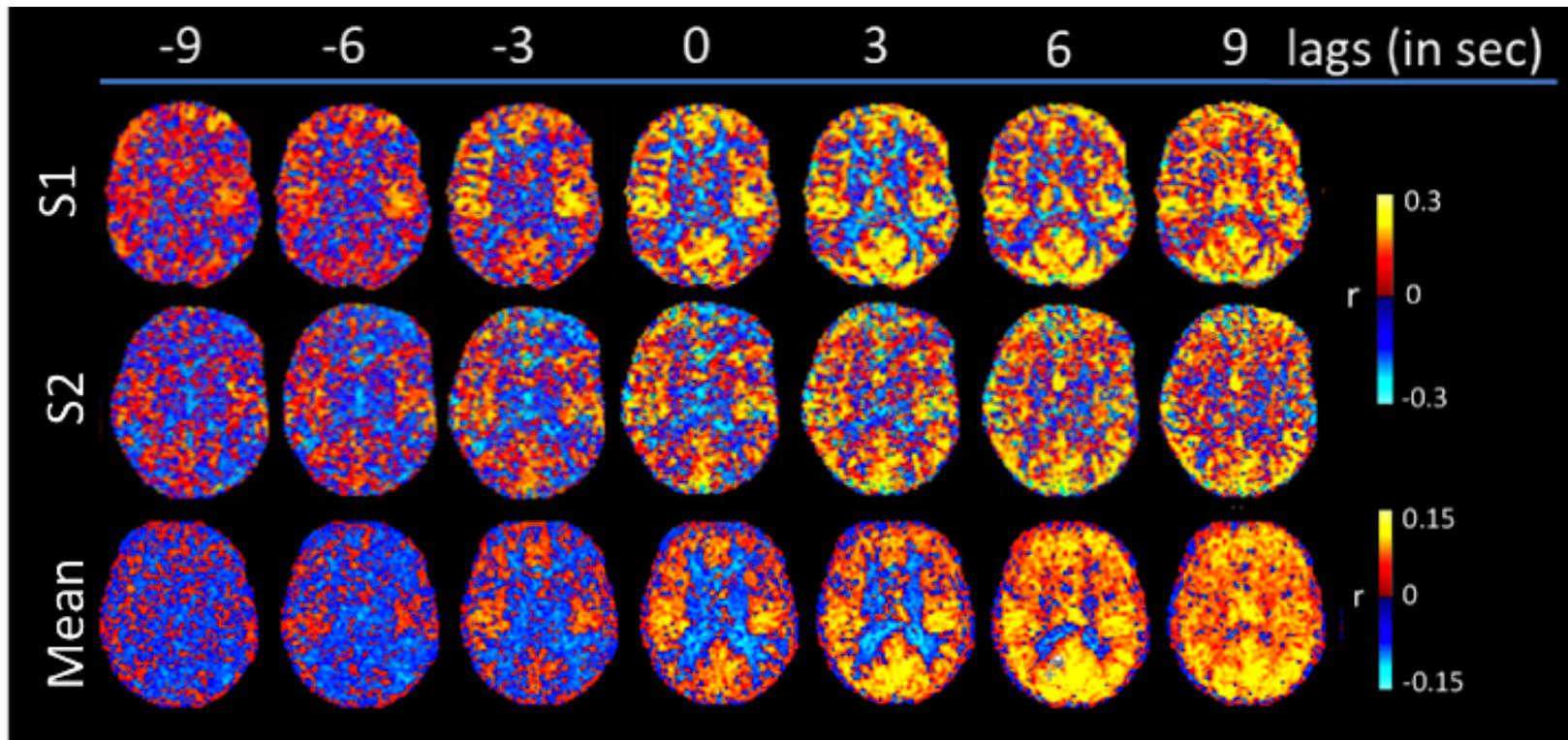
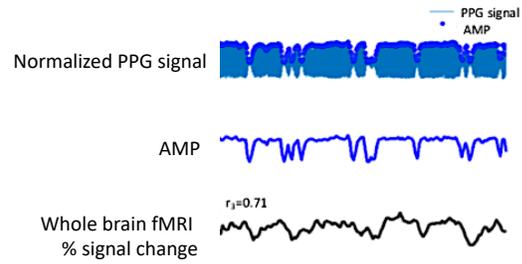


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Lag-dependent PPG AMP – fMRI correlations



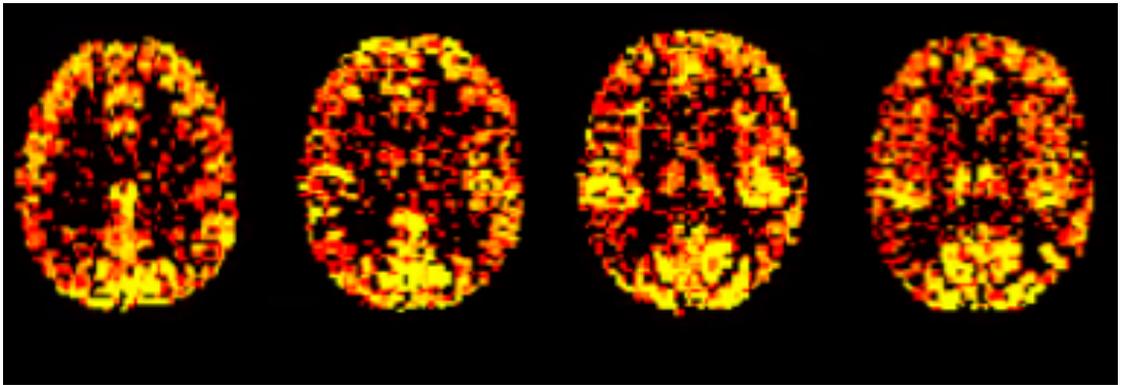
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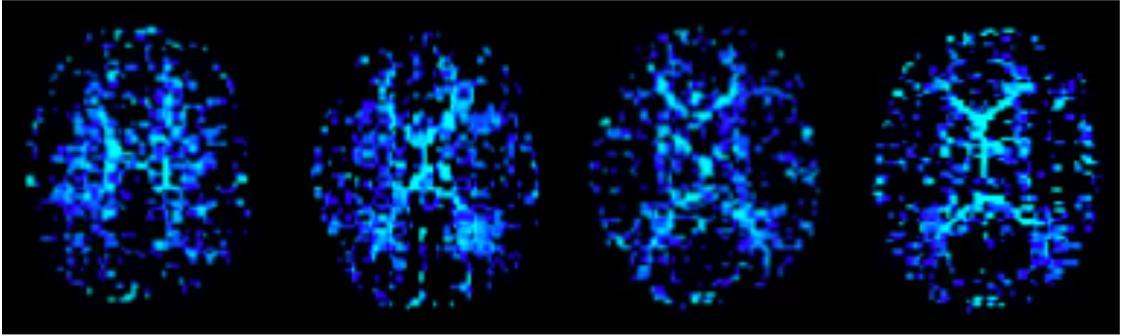
ROI-based correlations

Correlation (corr) maps between each voxel and the PPG amplitude across a lag range of -9 to 9 sec (-3 to 3 TR)

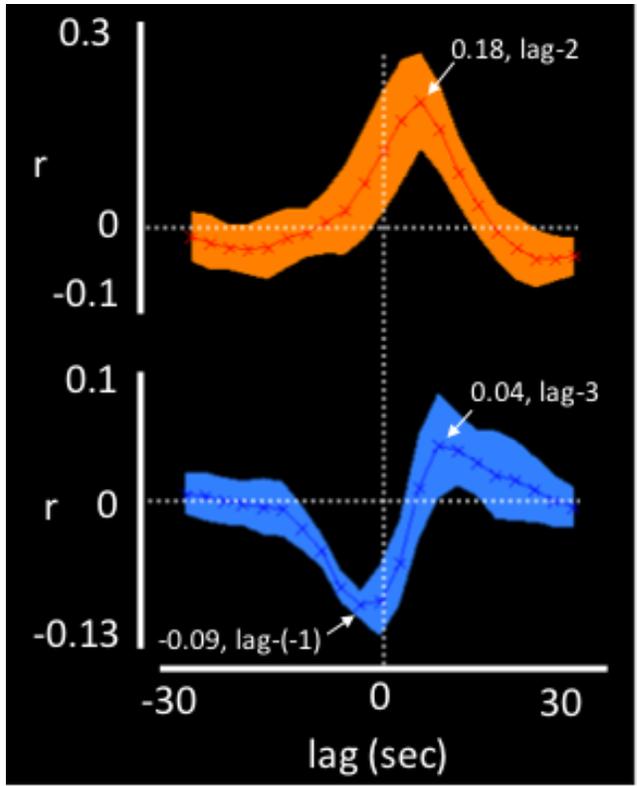
Max corr map
 $r \geq 0.1$



Min corr map
 $r \leq -0.1$



Group average (n=8) lag-dependent correlations, based on GM and WM ROIs.



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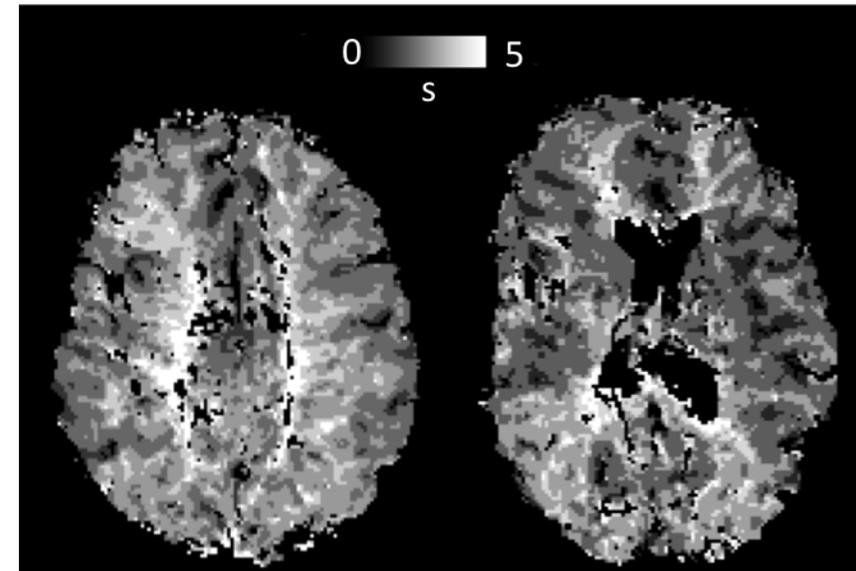
Transit time

Our results can be supported further with the results of an earlier study (van Gelderen et al. 2008), where the range of transit times were estimated in healthy subjects based on Gd-DTPA bolus-tracking experiments.

PPG AMP & fMRI correlation



Bolus arrival of Gd-DTPA injection

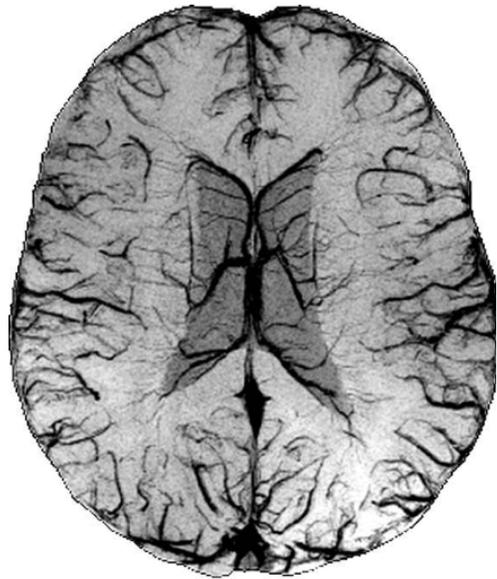


(different subject data)

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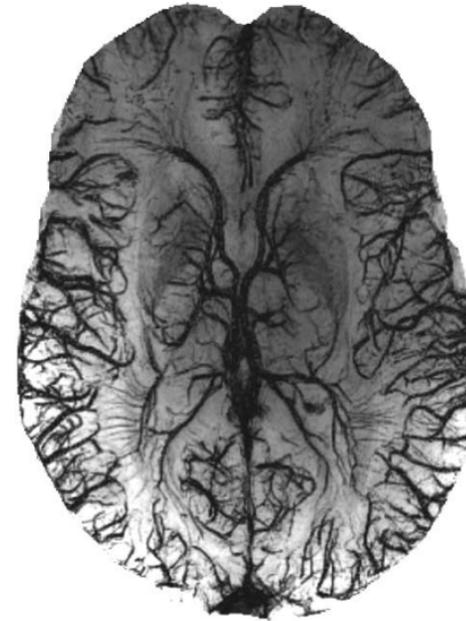
Resemblance of correlation pattern in WM with distribution of deep veins



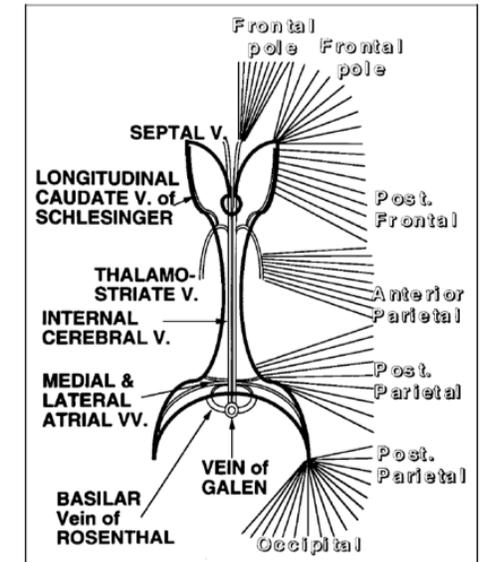
*SWI, mIP, 3T



PPG AMP & fMRI correlation



*SWI, mIP, 7T



Deep Venous System (Lee, Pennington, and Kenney 1996).

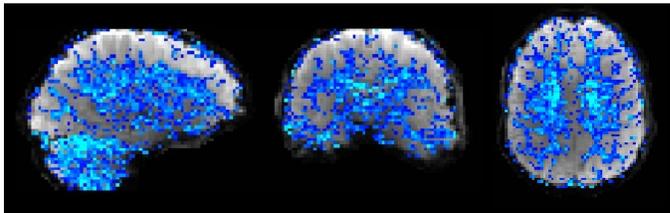
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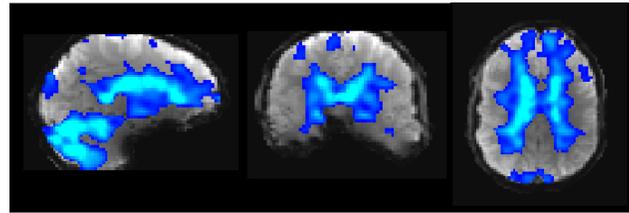
ICA – WM component

- The PPG drops are interpreted as systemic **vasoconstrictive events**, possibly related to intermittent increases in **sympathetic tone related to fluctuations in arousal state**, which supports previous work that recorded the peripheral signals with functional near-infrared spectroscopy (fNIRS).

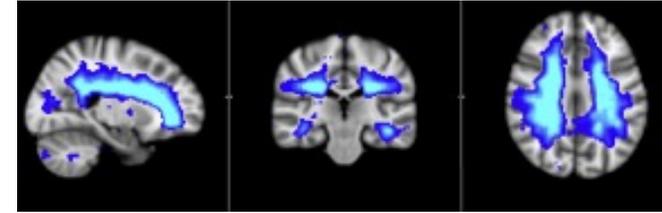
PPG-AMP & fMRI, $r < -0.05$



PPG-AMP & fMRI (ICA)
 $r = -0.64$



fNIRS & fMRI (ICA)
 $r = -0.42$



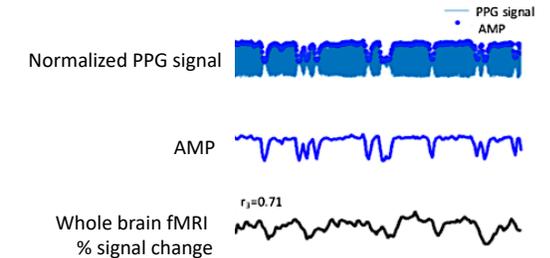
Tong et al., NIMG 2013

PPG drops & WM/GM anti-correlation

- Transit times in WM might be substantially longer due to differences in **vascular architecture**.

Blood oxygenation (BO) changes in WM are slower than in GM by several seconds.

Blood volume (BV) changes may occur more rapidly, as they do not depend on vascular transit but rather more closely follow upstream pressure changes, which could be driven by **vasoconstriction**.



PPG AMP & fMRI correlation

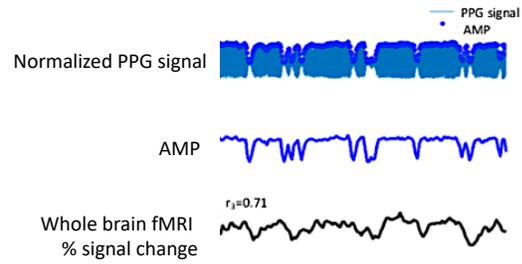
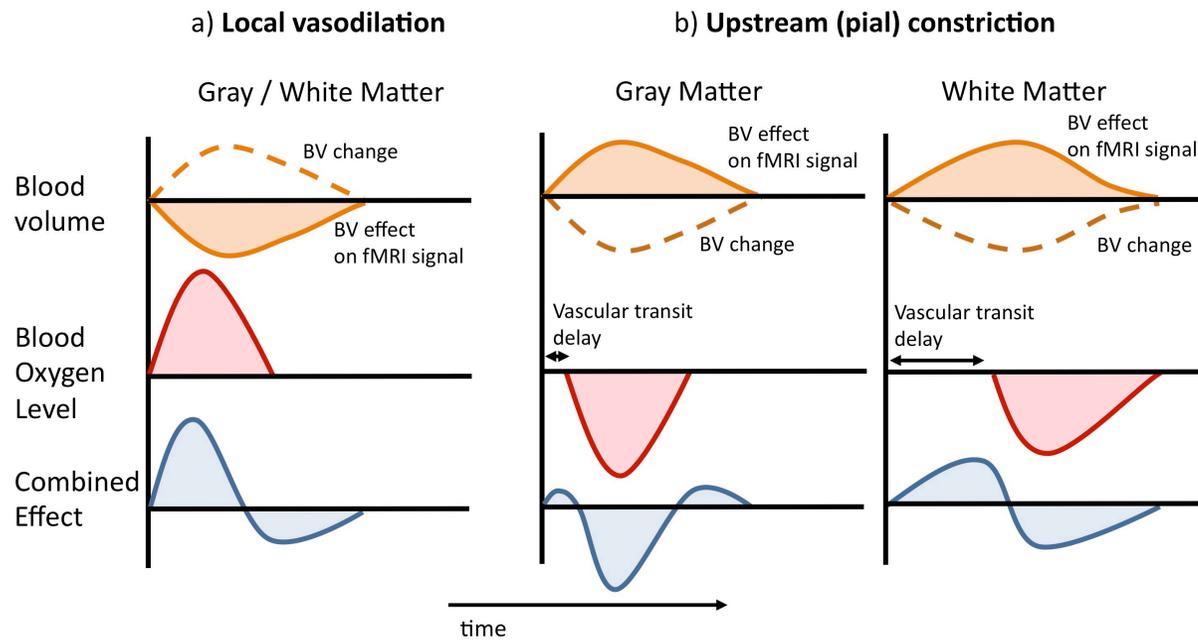


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Proposed balloon model



PPG AMP & fMRI correlation



We would expect to observe a positive BOLD contrast in response to a **local vasodilation**.

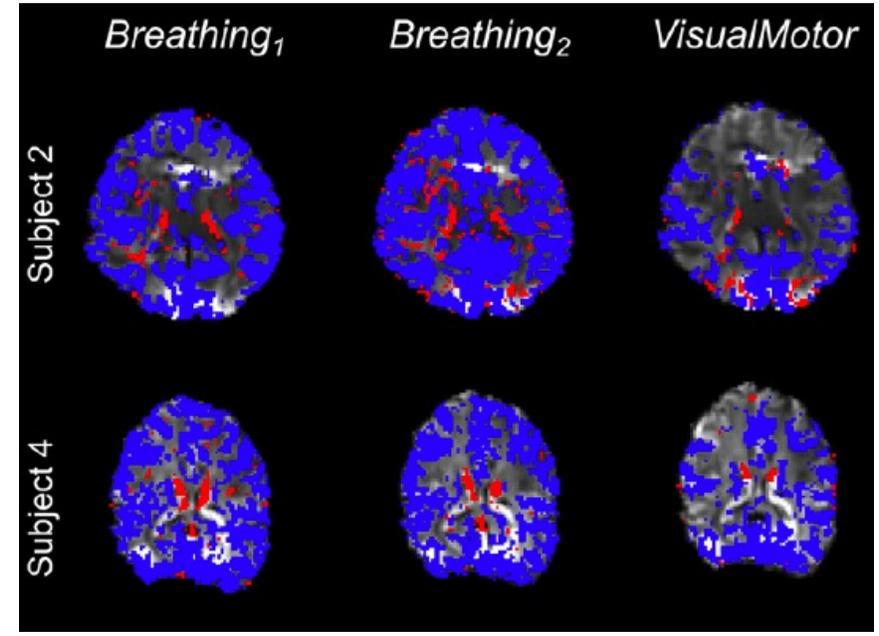
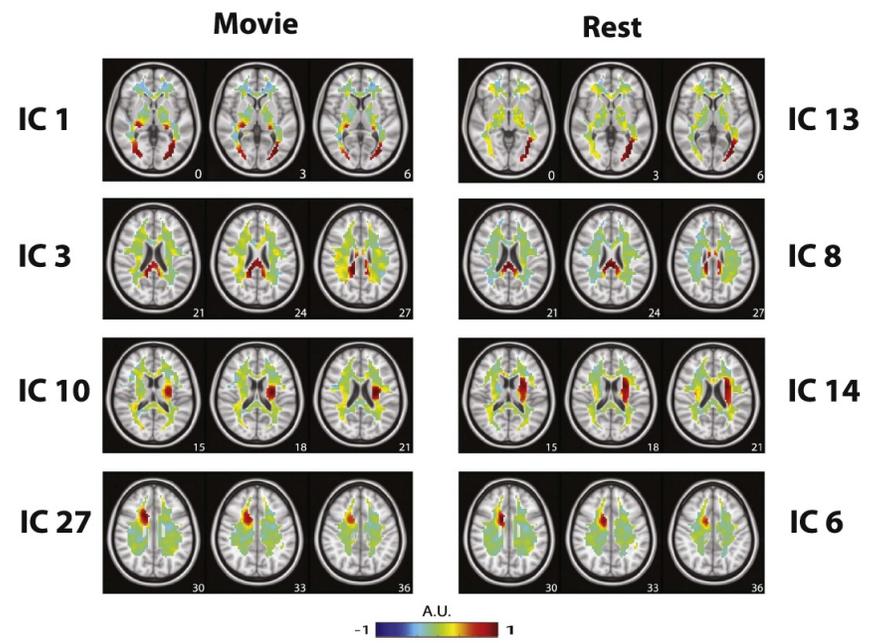
However, a physiologically originated effect such as **vasoconstriction**, which has been observed as PPG AMP drops in our data, could lead to anti-correlations in WM and GM.

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- Mismatch between BO and BV in WM:
 - **Time-lag maps & proposed balloon model & bolus tracking**

- A similar mechanism may explain **previous findings** of fMRI signals around WM & large draining veins & ventricles.



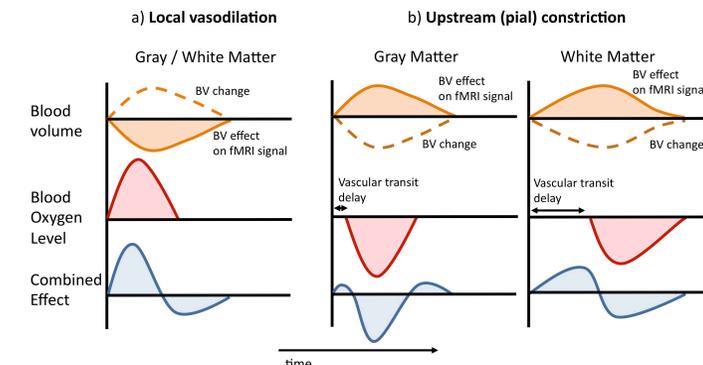
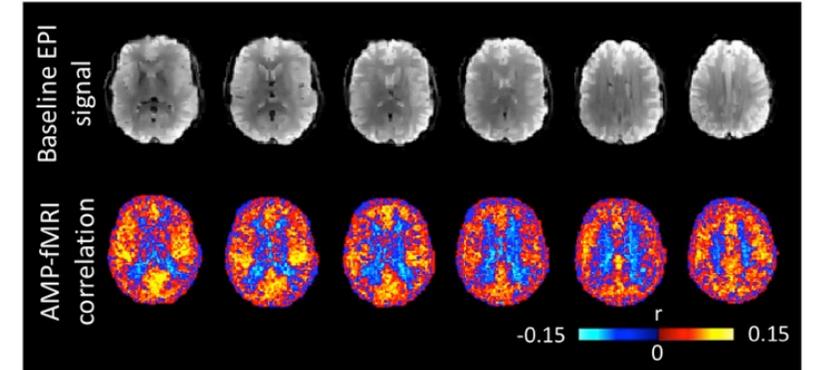
The hypocapnic CDB challenge: vasoconstriction

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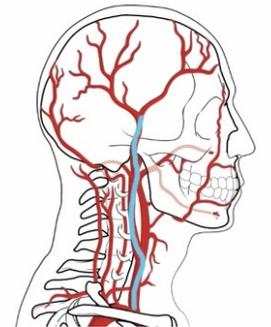
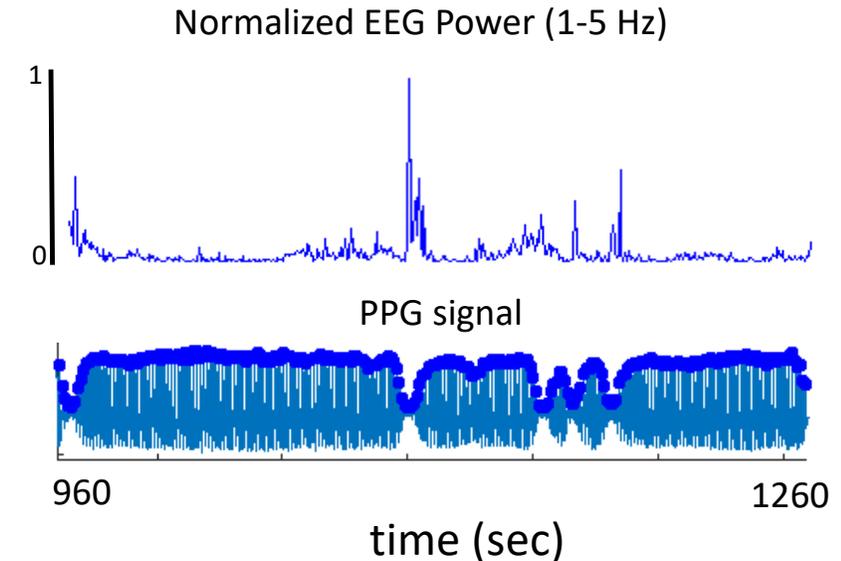
Conclusion – Part 1

- We characterized the spatiotemporal pattern of fMRI activity in WM in response to changes in **peripheral vascular tone**.
- Our results suggest that the temporal dynamics of signal characteristics in WM often observed in the fMRI literature can be explained by a **temporal mismatch between blood volume and blood oxygenation effects** [proposed balloon model].
- These results highlight the possible contribution of systemic vasoconstriction events to fMRI signal in WM.
- Care should be taken while interpreting white matter BOLD fMRI signals in functional (connectivity) studies.



Conclusion – Part 2

- Intermittent PPG-AMP drops are interpreted as systemic **vasoconstrictive** events, related to correlations between **EEG measures of arousal and PPG-AMP drops** (Ackner et al., 1957).
- Our findings suggest a contribution to the fMRI signal from the extrinsic sympathetic innervation of the pial vasculature and is expected to be important for a range of conditions that activate the sympathetic pathway.
 - Due to the close integration of brain stem systems that regulate sympathetic nervous activity and intracortical neuronal activity, separation of these two sources of fMRI activity is challenging and will require further research to establish a comprehensive model of the relationship between **fMRI, EEG, and peripheral measures**.



Jeff Duyn
Dante Picchioni
Catie Chang
Hendrik Mandelkow
Jacco A de Zwart
Peter van Gelderen
Thomas Moehlman
Miranda Chappel-Farley
...

Advanced MRI Section / LFMI / NINDS / NIH

Thanks !

DELETED SCENES

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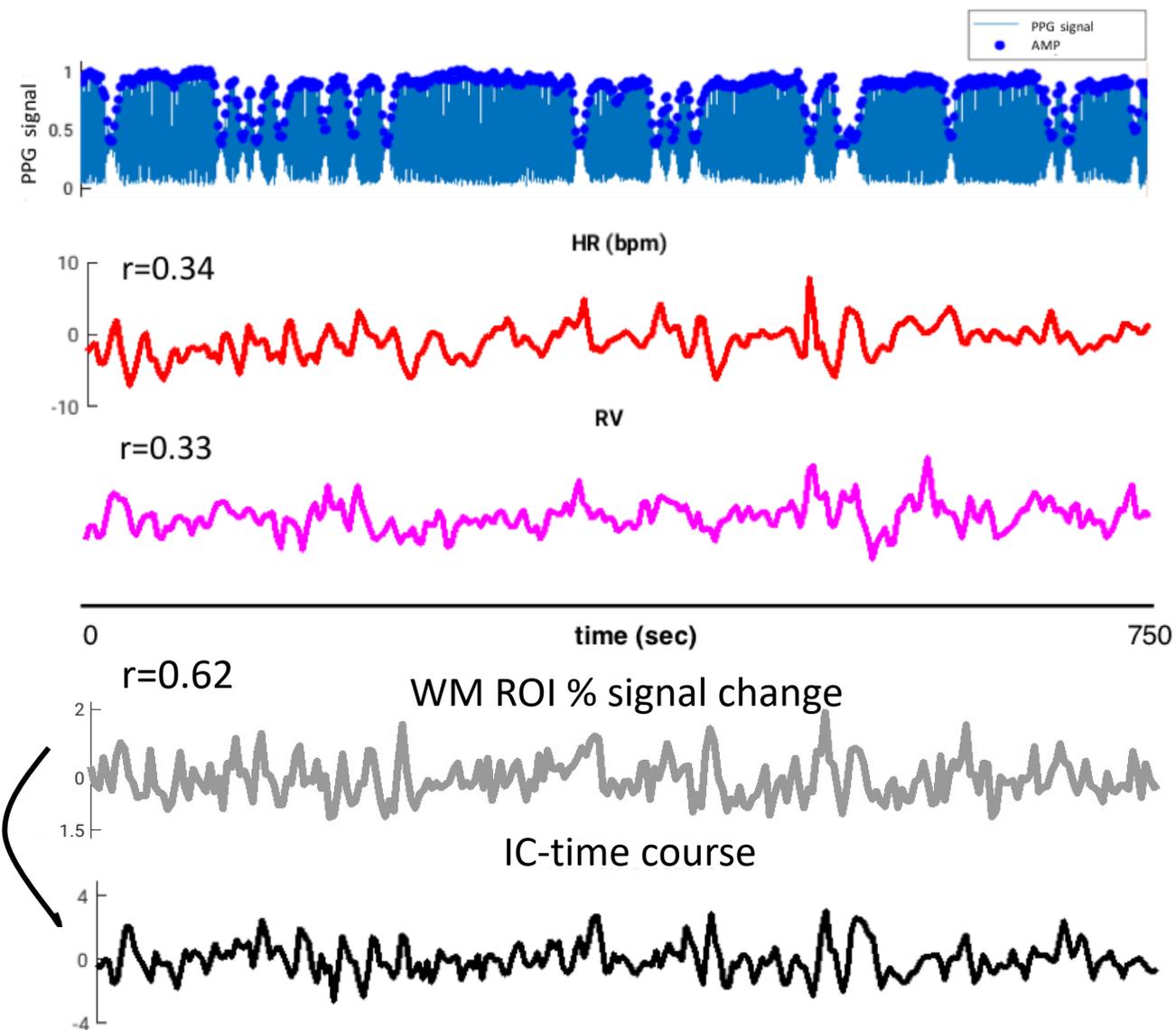
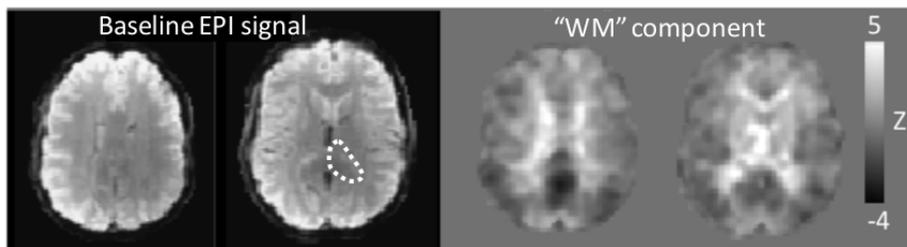
Summary of data

We found PPG-AMP dips, with strong correlation with fMRI signal, **primarily during light sleep.**

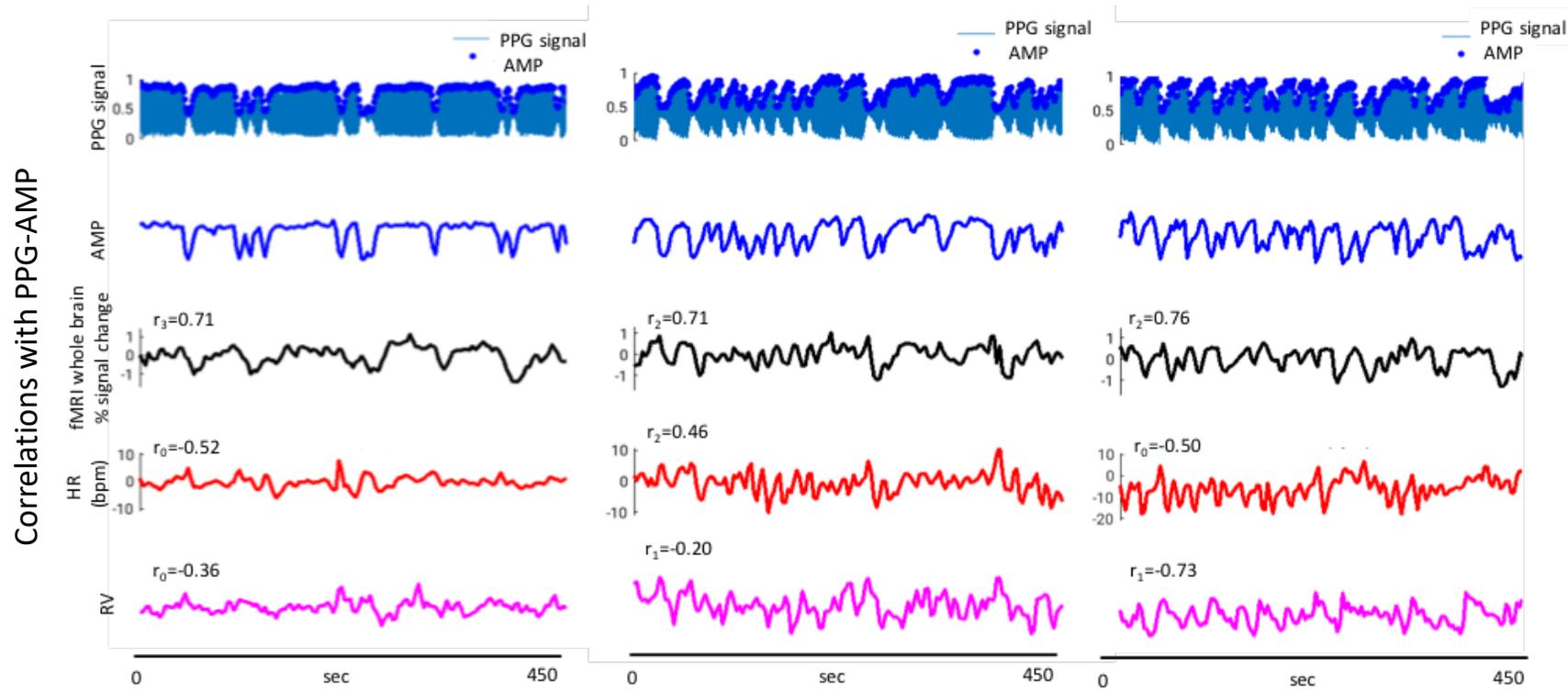
Subject	Length of segment selected for correlation analysis (TR)	Distribution of sleep stages within segments (%)			
		W	S1	S2	S3/S4
S1	151	9	4.5	82	4.5
S2	151	6	11	83	-
S3	151	-	-	100	-
S4	151	15	10	70	5
S5	111	-	100	-	-
S6	151	-	67	33	-
S7	101	21	-	79	-
S8	151	-	6	94	-

PPG AMP – fMRI correlations

ROI-based correlations



Physio – fMRI correlations

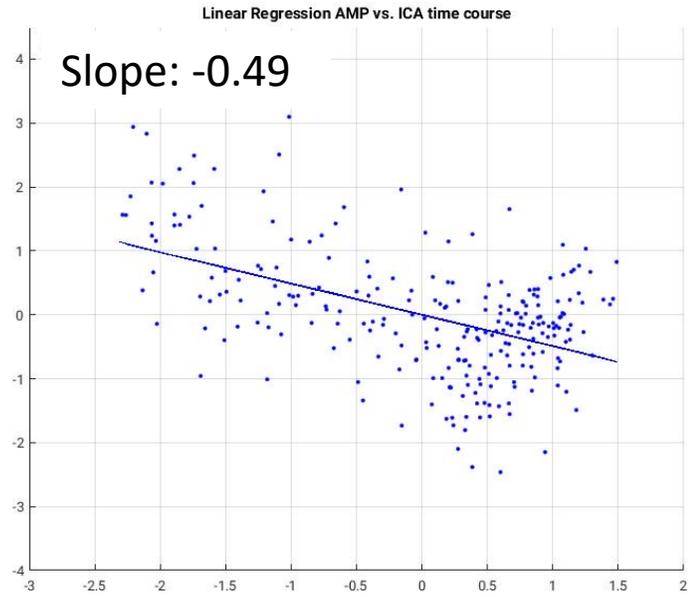
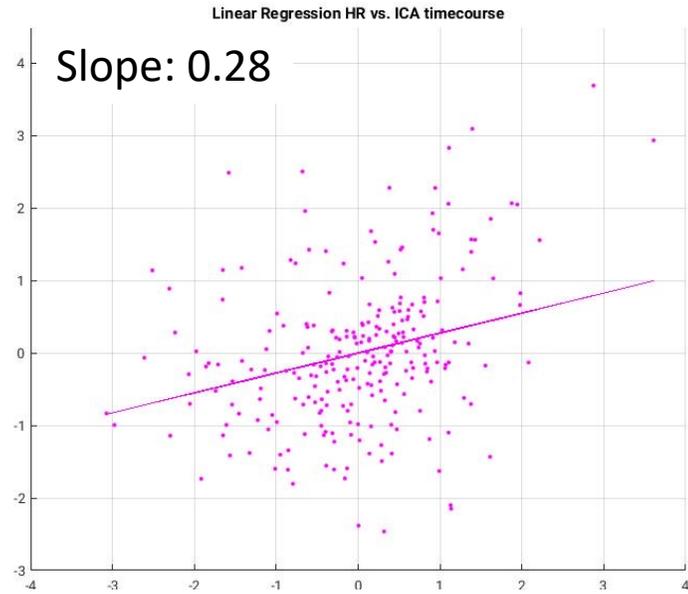


Subject average correlation of PPG-AMP, HR and RV with fMRI signal were 0.54 ± 0.19 (lag=2TRs), 0.34 ± 0.15 (0 lag), and -0.36 ± 0.22 (lag=3TRs), respectively. Subject average peak-to-peak BOLD signal changes were $2.17\% \pm 0.39\%$.

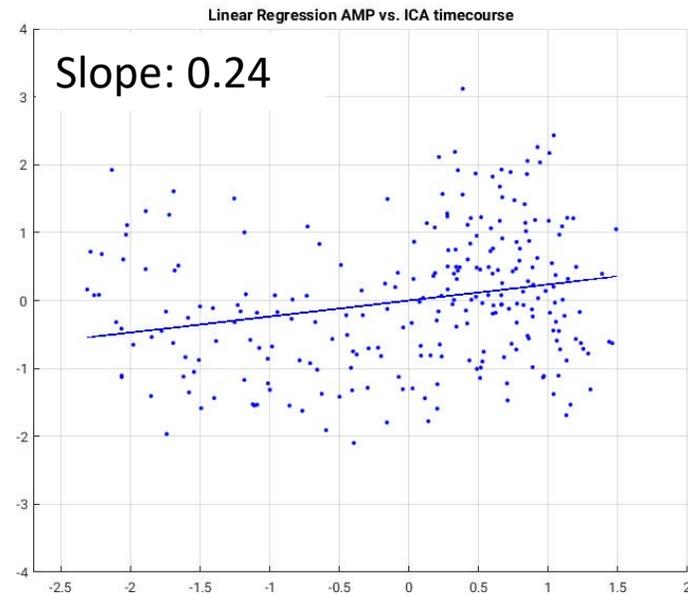
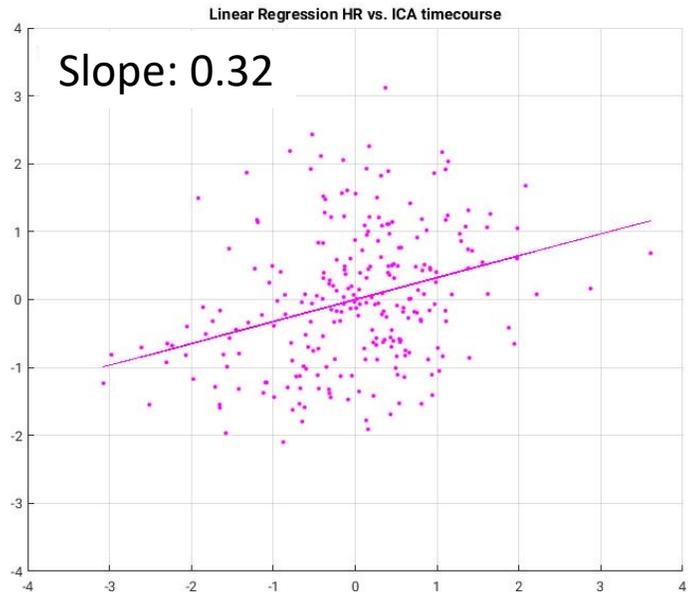
Multi-regression with HR and PPG-AMP

A) wm component time course and B) gm (visual) component time course

WM
time course

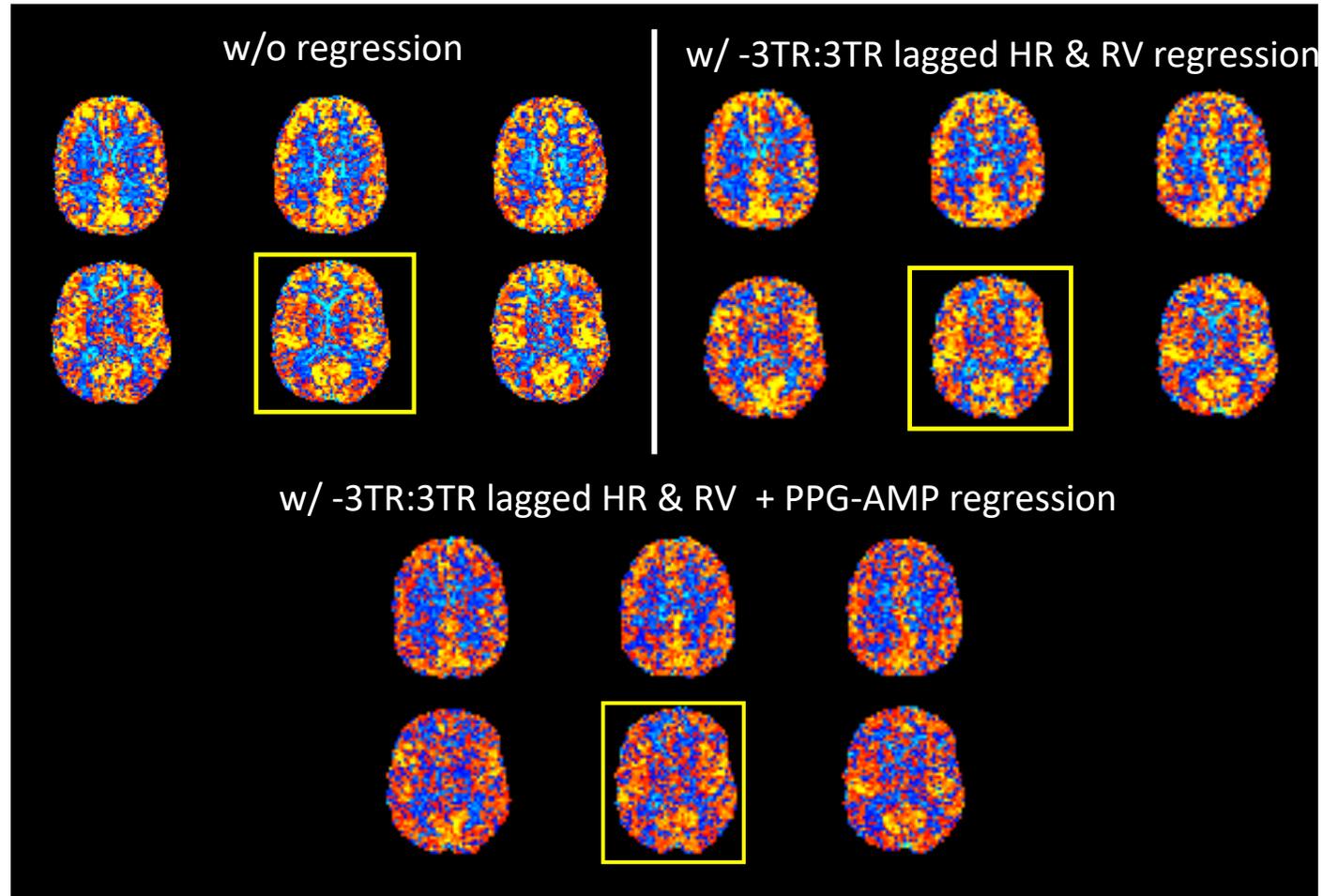


GM
time course

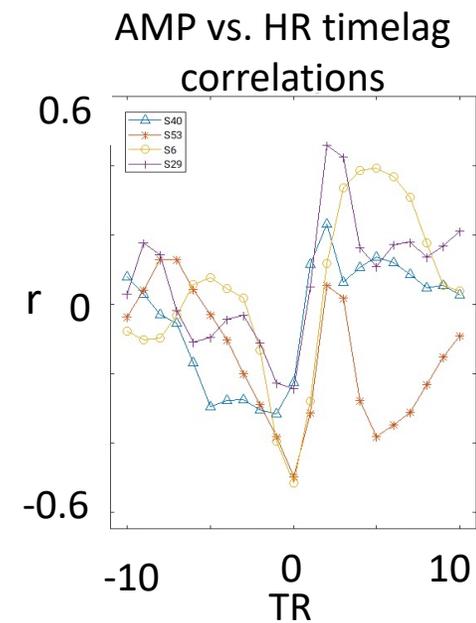
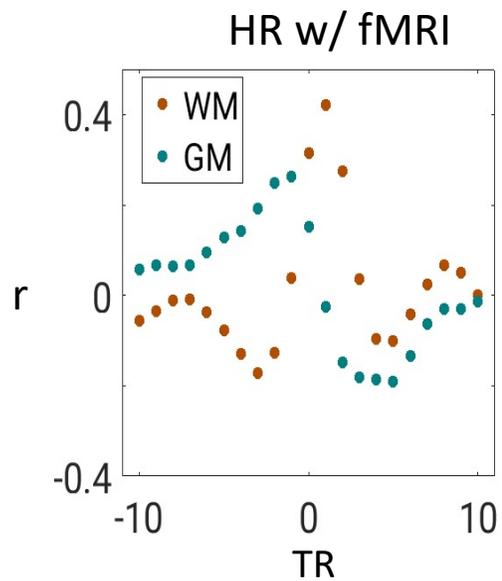
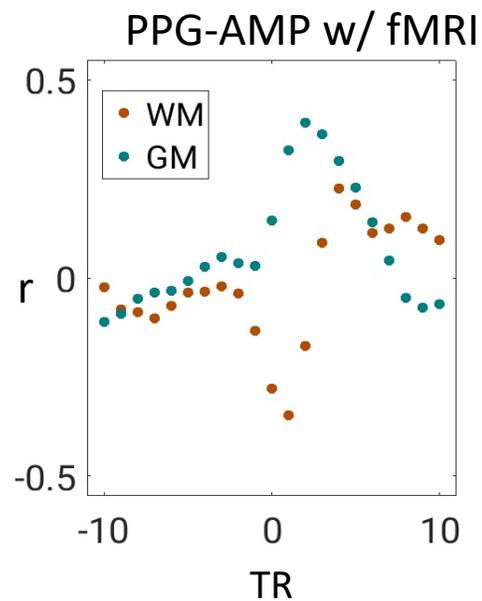
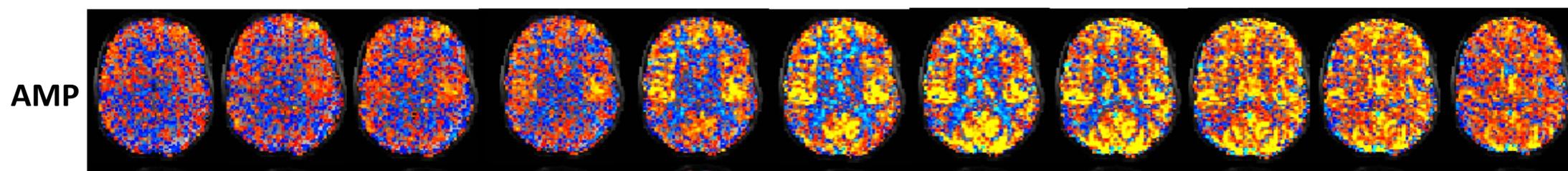
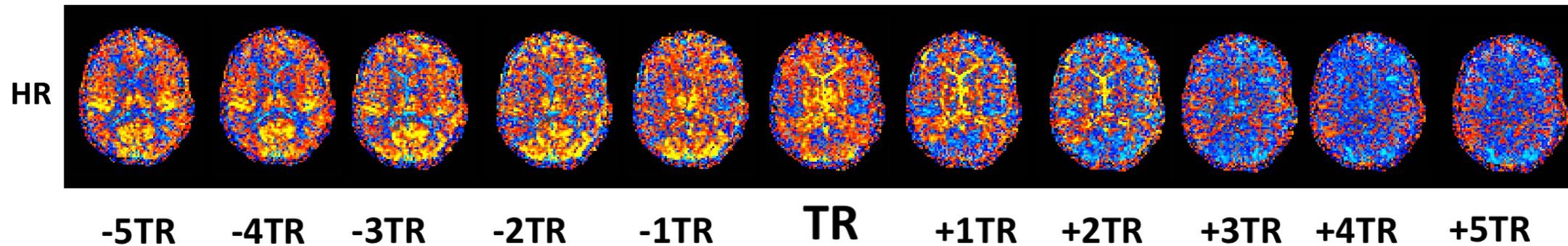


HR/RV and PPG-AMP as regressors

PPG-AMP & fMRI correlation maps

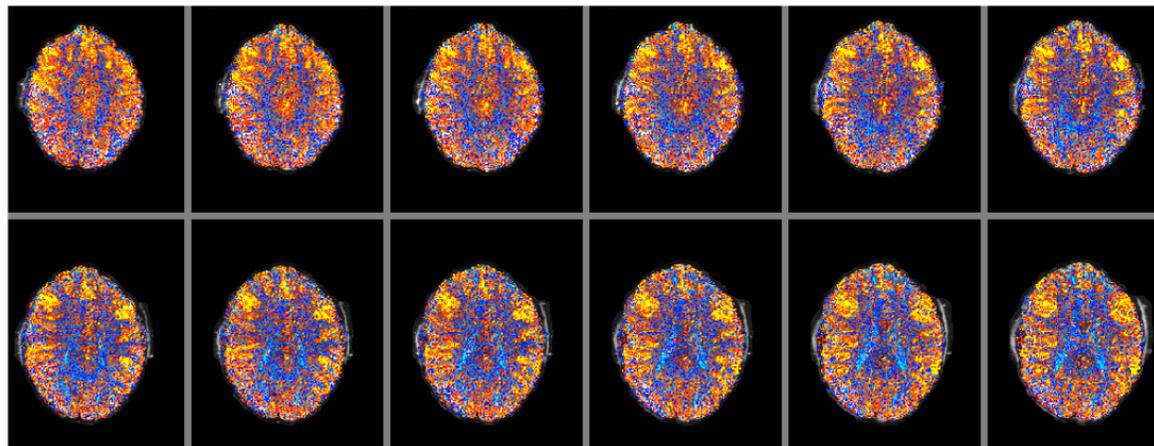
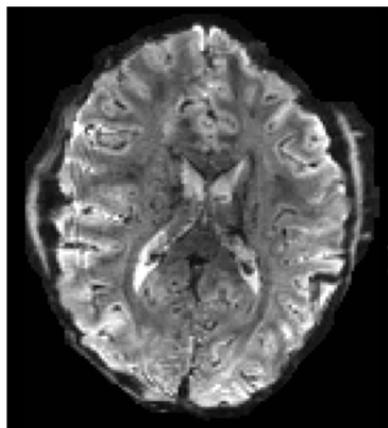


HR and PPG-AMP relations

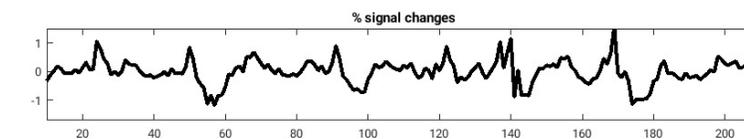
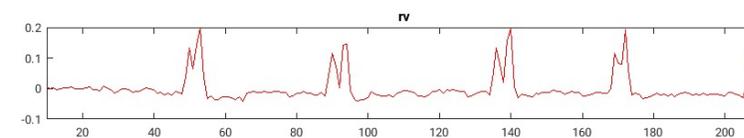
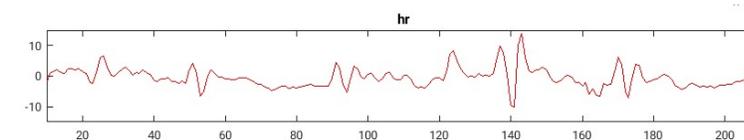
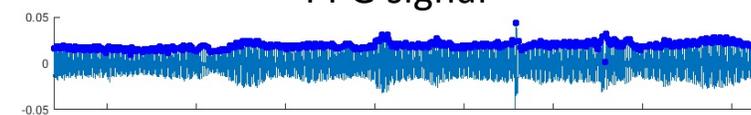


7T, TR=2s, TE=33ms, 32 slices
Cued deep breathing, PPG-AMP & fMRI correlation maps
0-lag

EPI slice



PPG signal

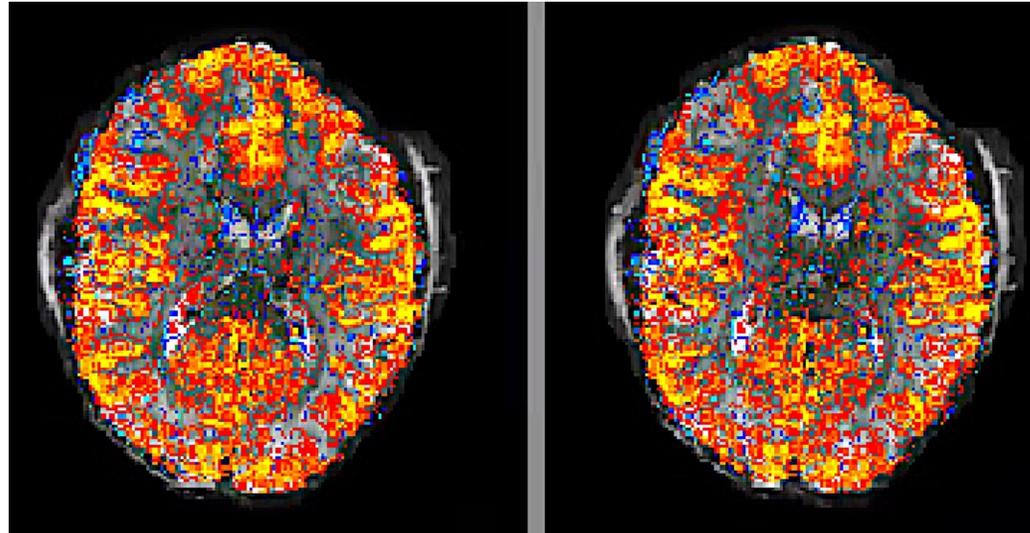
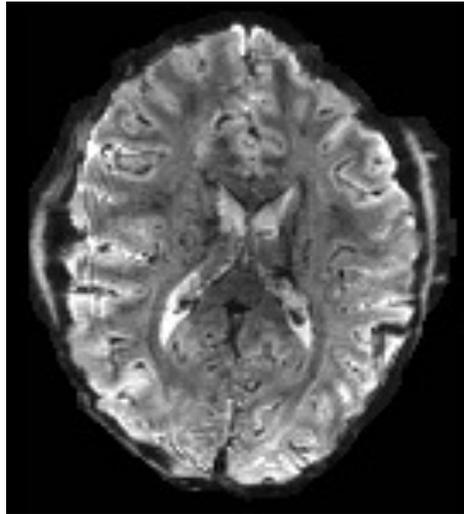


TR

Experiment 1, cont'

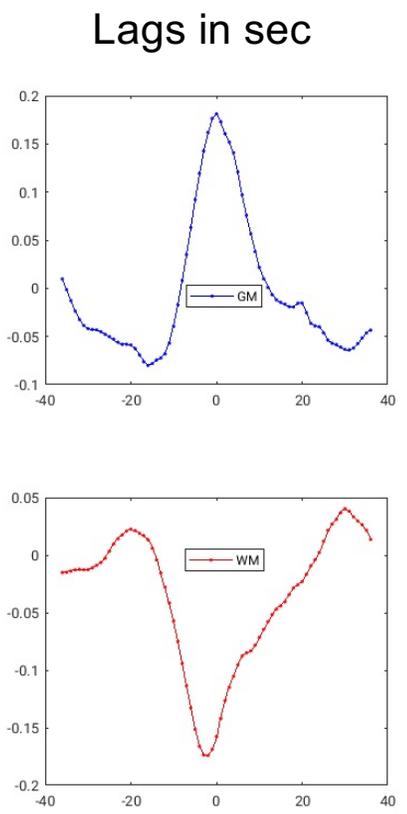
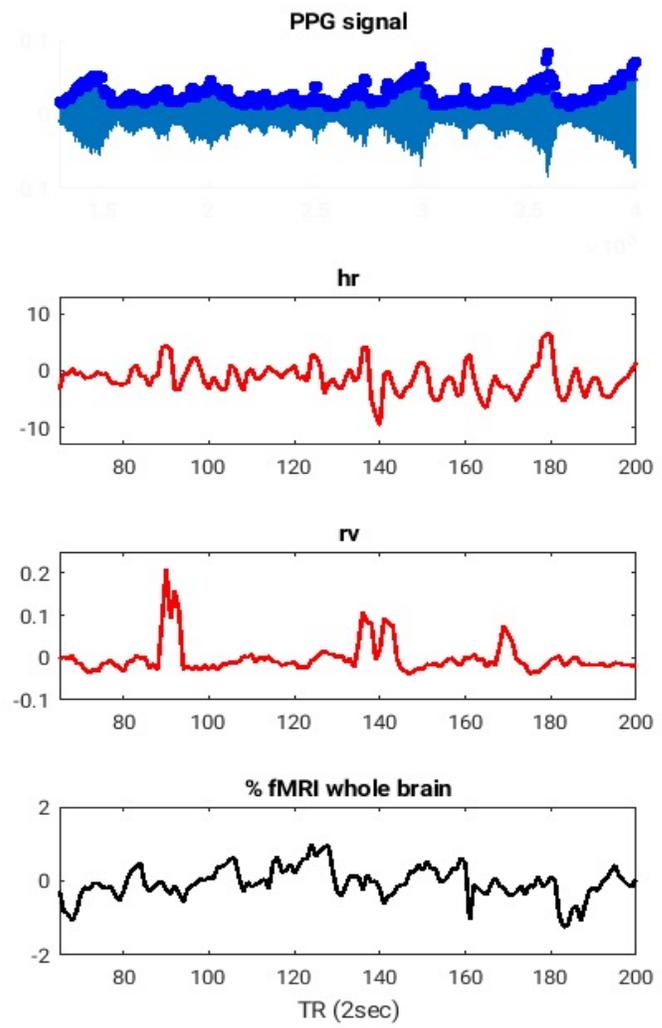
Cued deep breathing, voxel-wise correlation maps with mean global signal

EPI slice

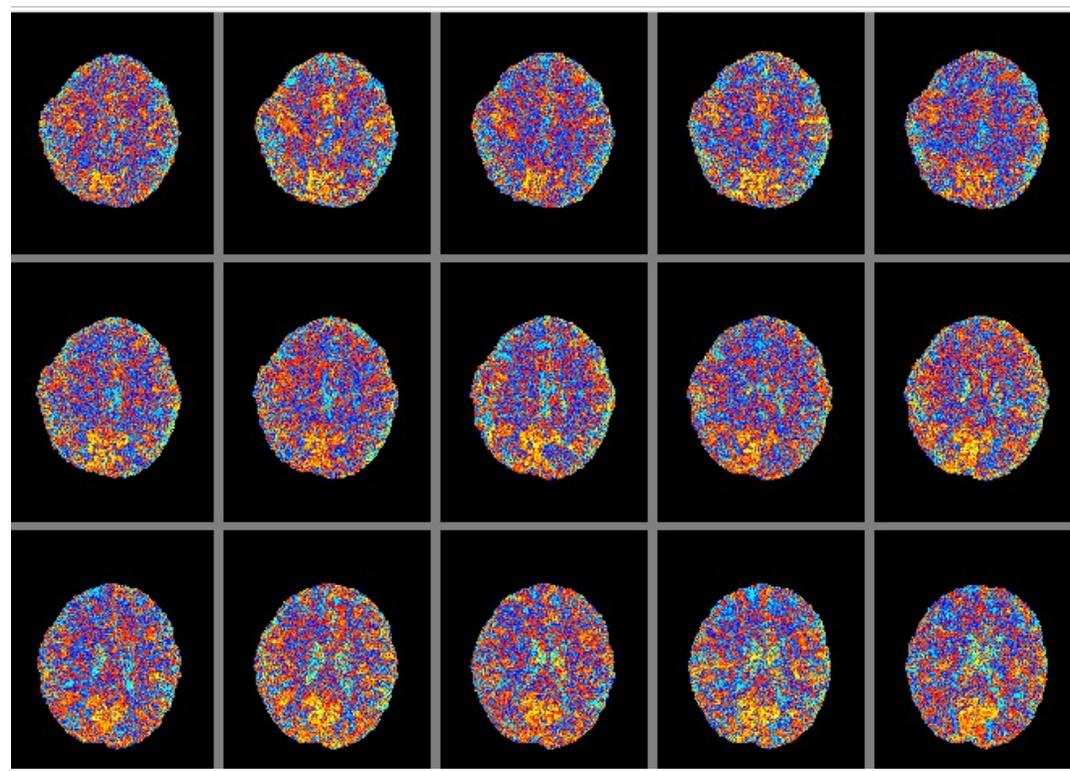


Experiment 2

PART 1: more related to deep breathing (RV)

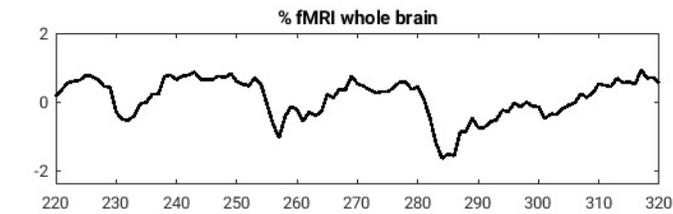
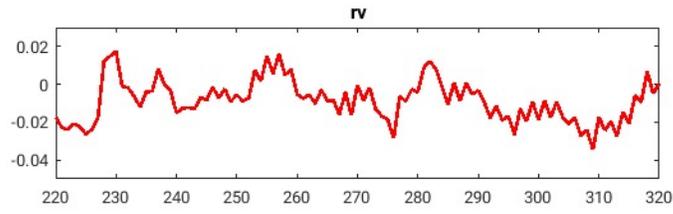
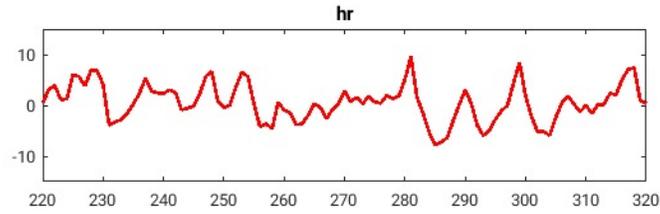
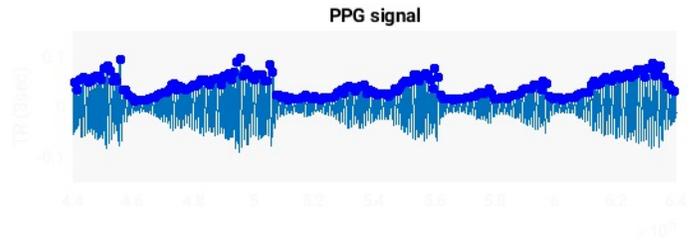


PPG & fMRI

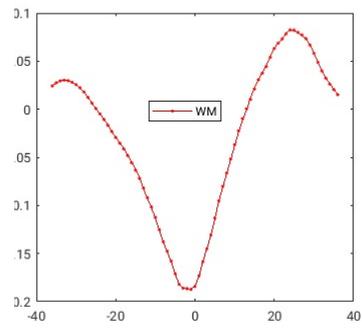
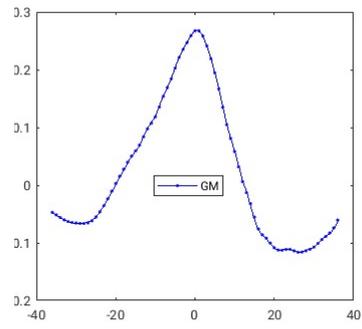


Experiment 2

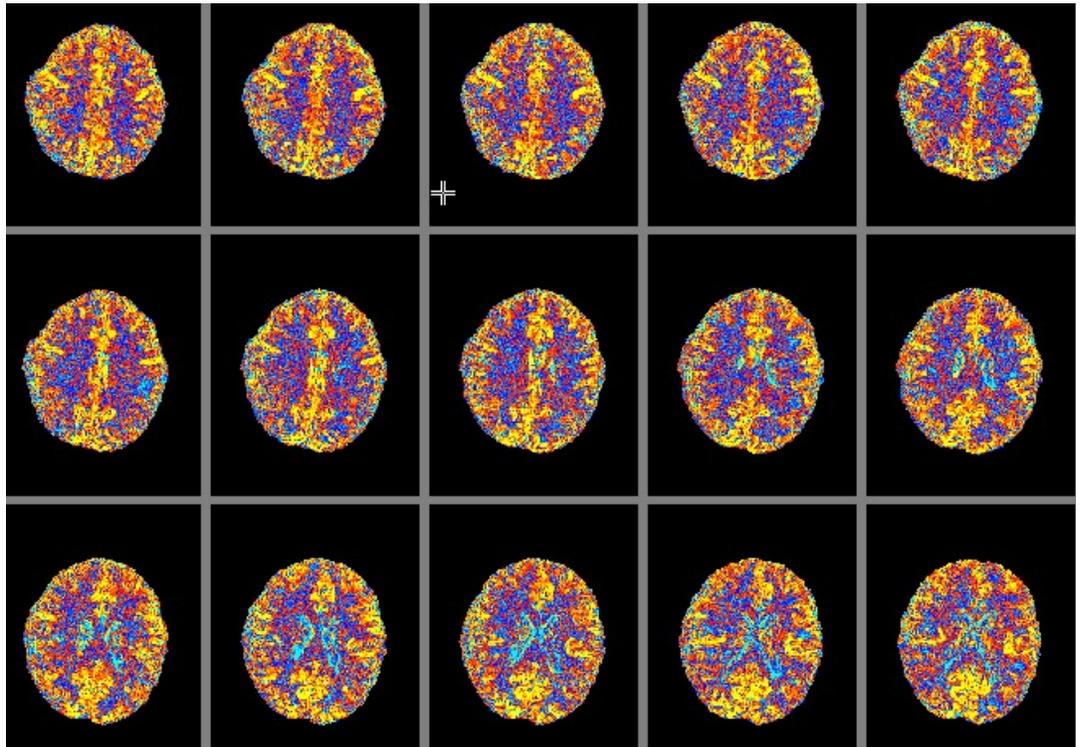
PART 2: more related to light sleep (PPG)



Lags in sec



PPG & fMRI



Contribution of Systemic Vascular Effects on White Matter BOLD fMRI Signal

#193



On-going work - EEG

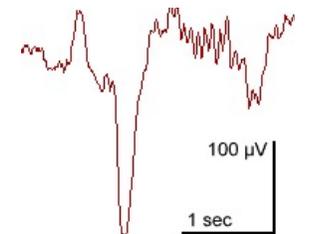
Previous studies have found those dips to be associated with K-complexes (Kcs), which are signs of **arousal**.

Monstad et al. 1999, Kcs relation with blood pressure (BP) during NREM, spontaneous Kcs predominantly occurred during drop in BP.

Catcheside et al. 2002, Acoustic induced arousal during NREM, PPG is more sensitive as a marker of autonomic (subcortical) arousal.

Czisch et al. 2004, BOLD signal decrease during NREM sleep, increased number of Kcs upon acoustic stimulation.

A K-complex is an EEG waveform that occurs primarily during stage 2 of NREM sleep.



Different channels

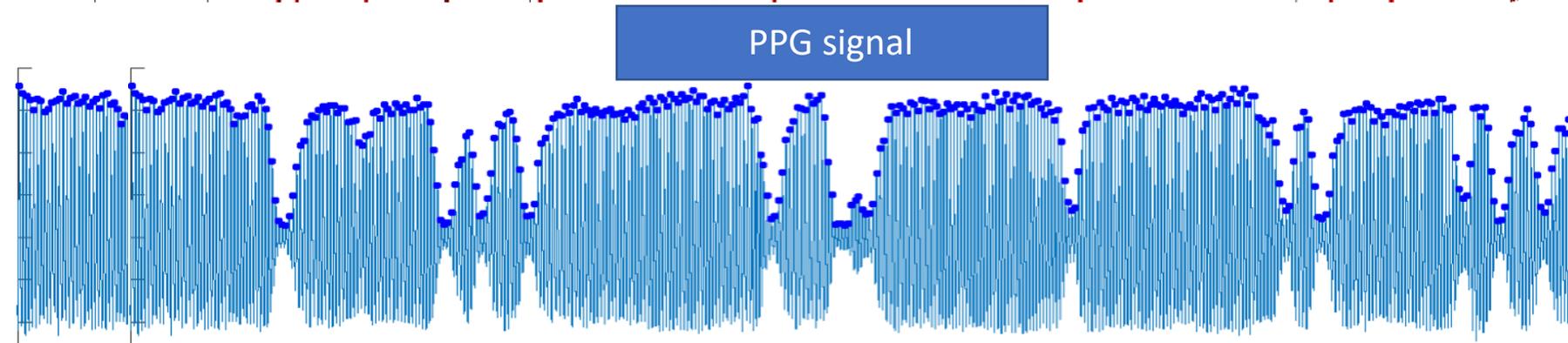
Chan0 Chan0

Chan8 Chan8

Chan37 Chan37

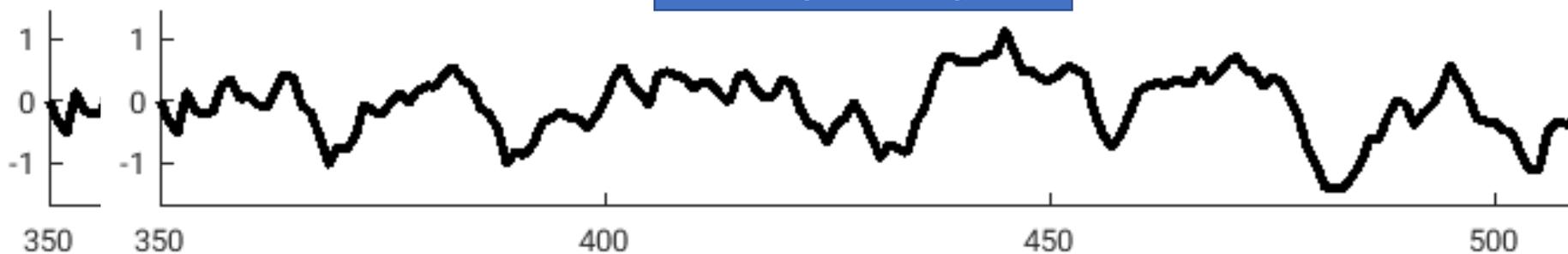
Chan38 Chan38

Filtered EEG signal (0.5-35 Hz)

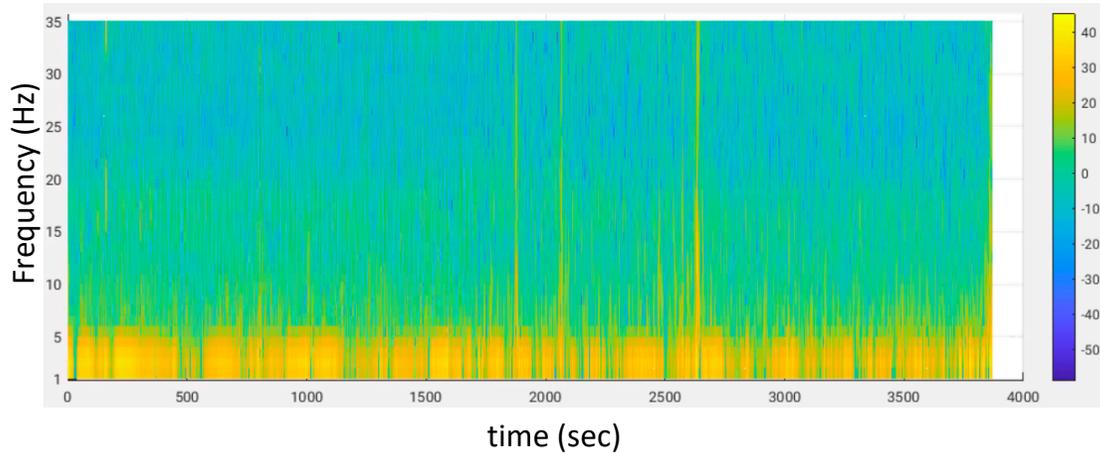


$r = 0.7$ $r = 0.7$

Whole brain fMRI % signal change



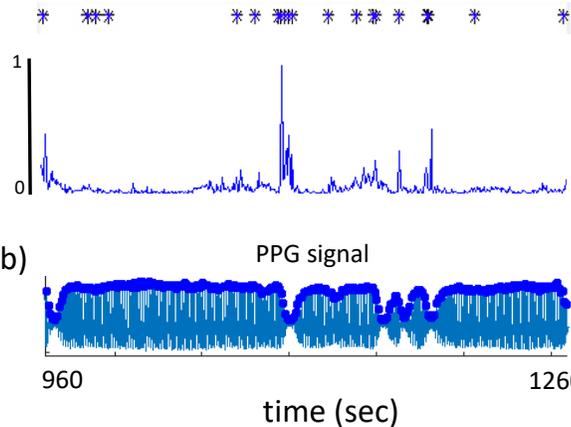
Power spectral density of EEG



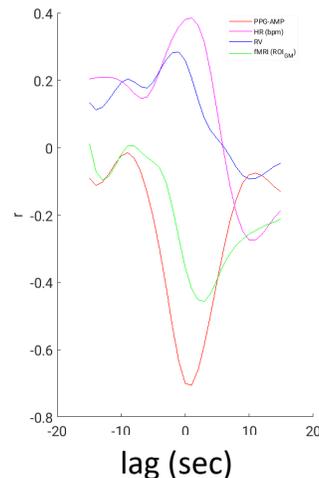
Exemplary power spectral density showing ~1hr of EEG data (channel Fp1) from one subject. Yellow color represents high power, while green/blue less power per frequency.

From the spectrum, we could see the highest power segments correspond to delta frequency range, 1-5 Hz, in which K-complexes are known to occur predominantly (Forget et al., 2011).

a) Detected K-complexes and normalized EEG Power (1-5 Hz)

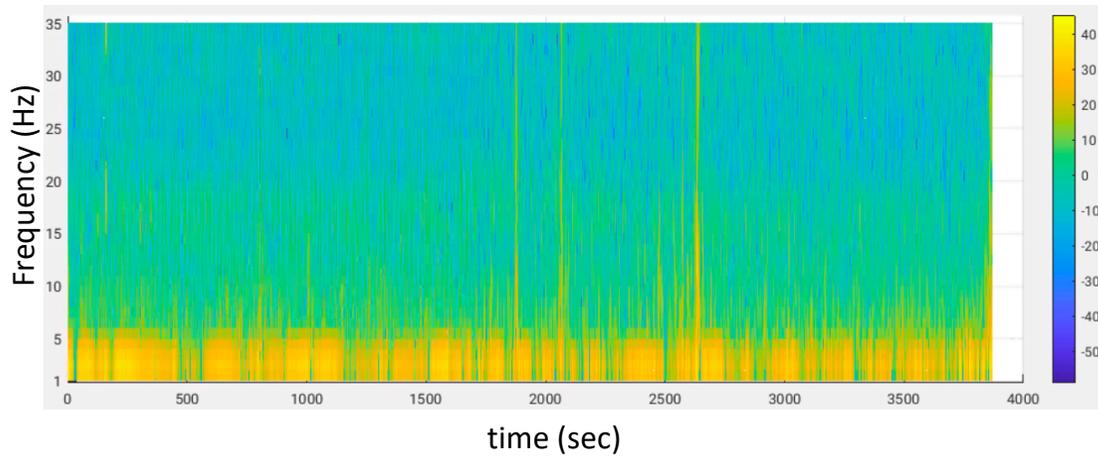


c) Lag dependent correlations with EEG



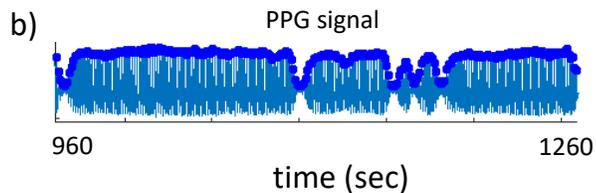
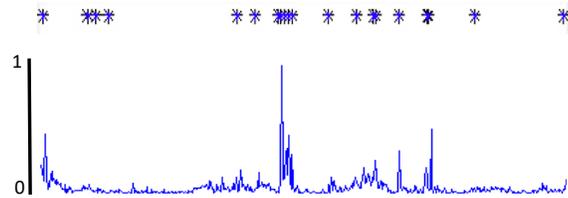
Segment of N2 selected from data shown above. (a) Detected K-complexes combined from all channels (blue stars, top), normalized EEG power (1-5Hz) (bottom), (b) corresponding PPG signal, (c) EEG power correlations with PPG-AMP, HR, RV and fMRI (ROI: primary visual area) signals.

Power spectral density of EEG

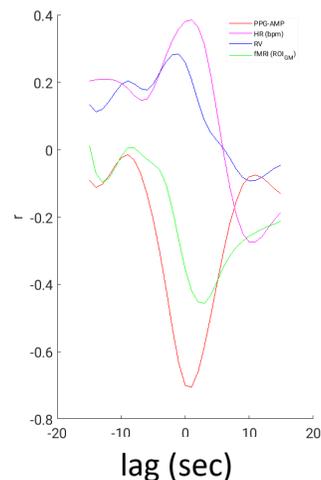


Exemplary power spectral density showing ~1hr of EEG data (channel Fp1) from one subject. Yellow color represents high power, while green/blue less power per frequency.

a) Detected K-complexes and normalized EEG Power (1-5 Hz)



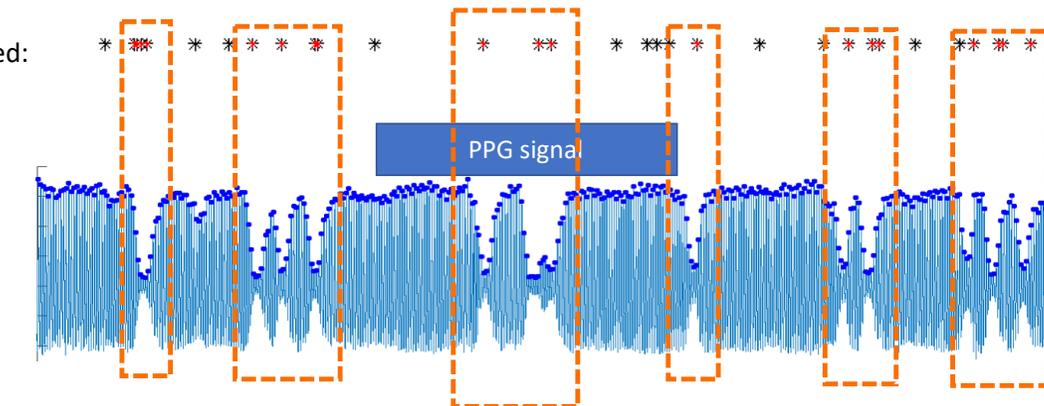
c) Lag dependent correlations with EEG



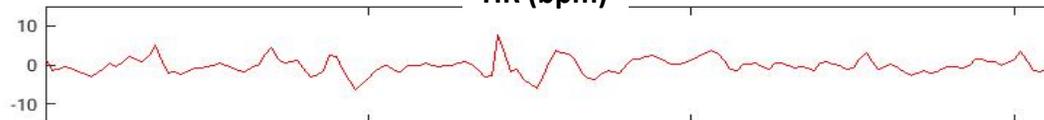
- During time segments of NREM N2 sleep, on average, we observed a **high co-occurrence (>80%) of the PPG-AMP drops with K-complexes in the EEG data.**
- Furthermore, **we found substantial correlation (r, ranging from -0.2 to -0.7 between subjects) between EEG and peripheral vascular tone**, consistent with previous studies that linked it to **sympathetic activation** (Ackner and Pampiglione, 1957)(Catchside et al., 2002) of the **super cervical ganglion**, followed by changes in the fMRI signal.

HR & Motion

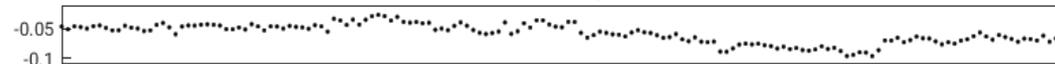
All channels combined:



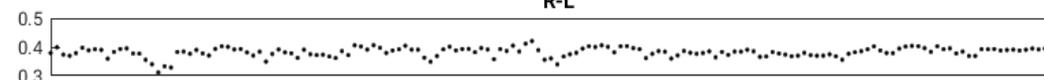
HR (bpm)



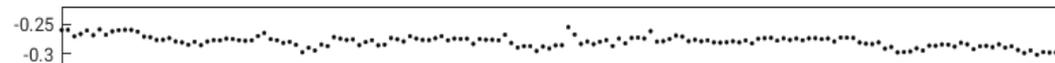
Motion Rot degree: I-S



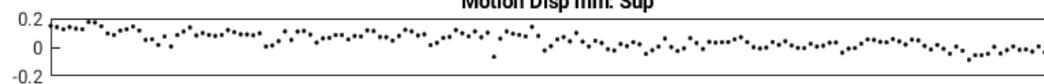
R-L



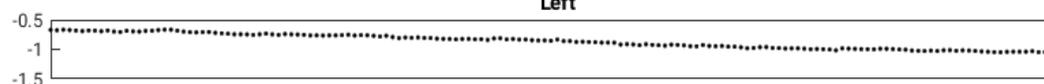
A-P



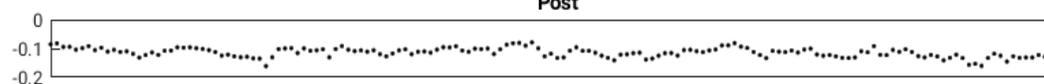
Motion Disp mm: Sup



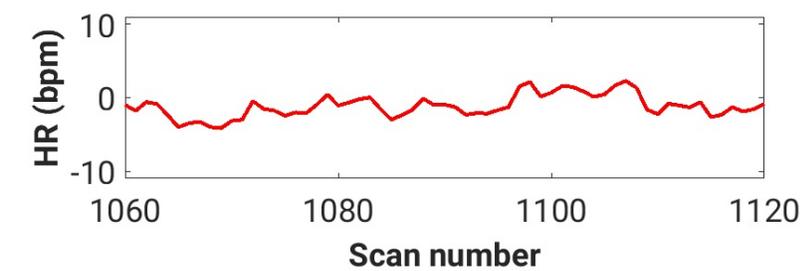
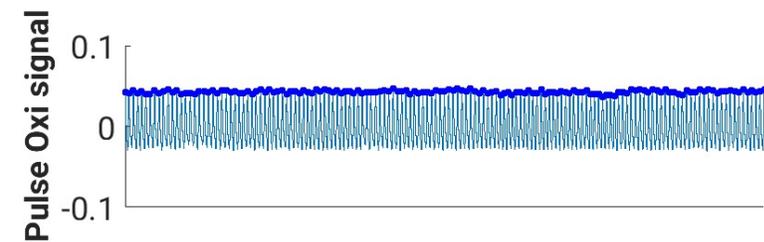
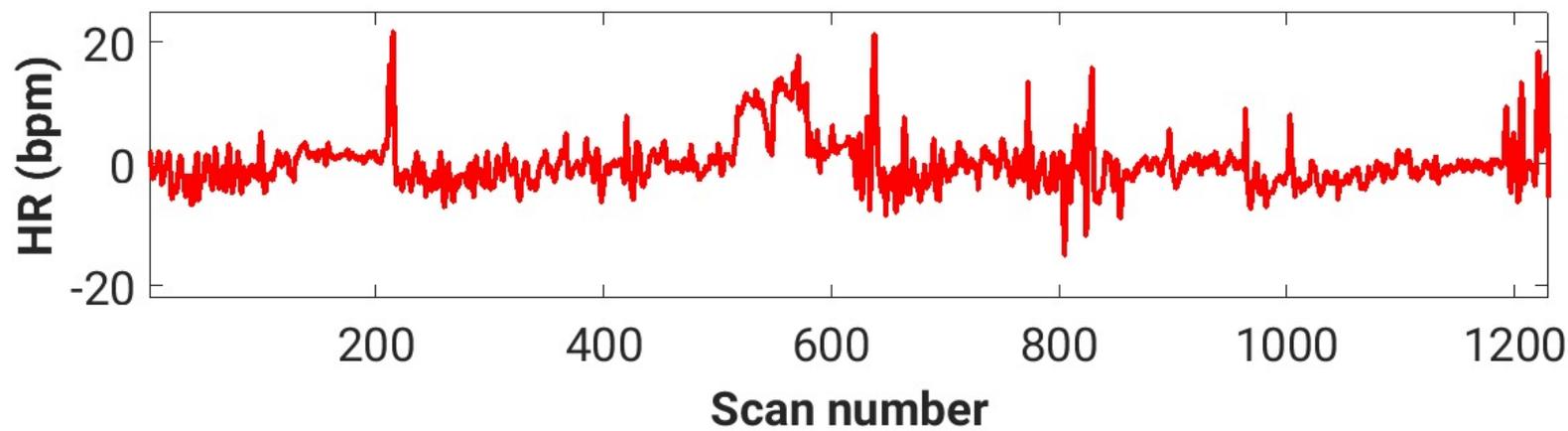
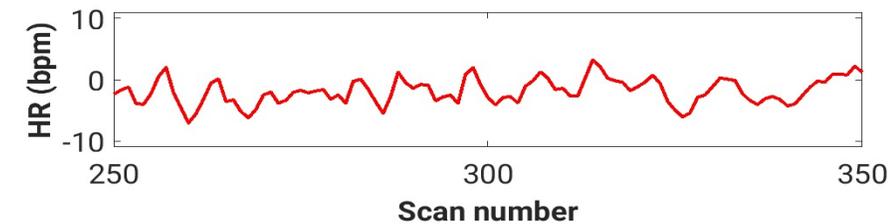
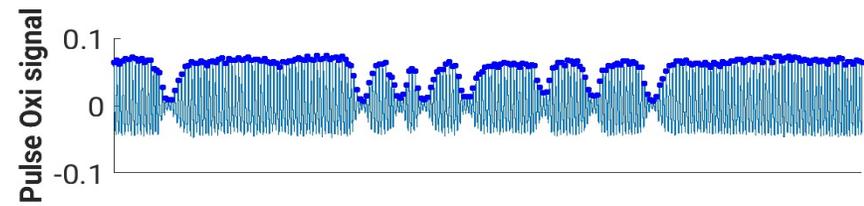
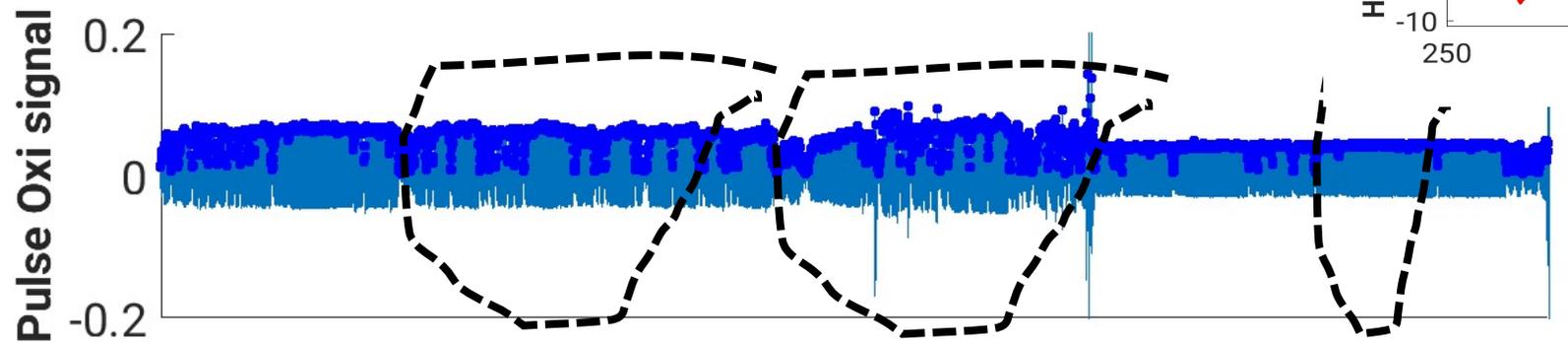
Left



Post



Sleep data

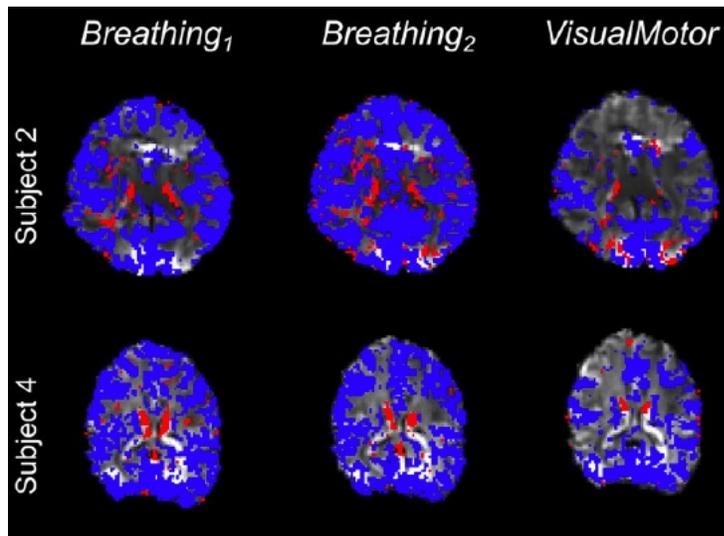


Background (in house)



Early anti-correlated BOLD signal changes of physiologic origin

Molly G. Bright^{a,b,*}, Marta Bianciardi^{a,c}, Jacco A. de Zwart^a, Kevin Murphy^b, Jeff H. Duyn^a



Significantly correlated (blue) and anti-correlated (red) voxels in the Breathing and VisualMotor data.

.. identified anti-correlated BOLD signal changes in response to respiratory challenges in voxels primarily located near edges of CSF stores.

These signal changes occur earlier than the response across most of GM voxels.

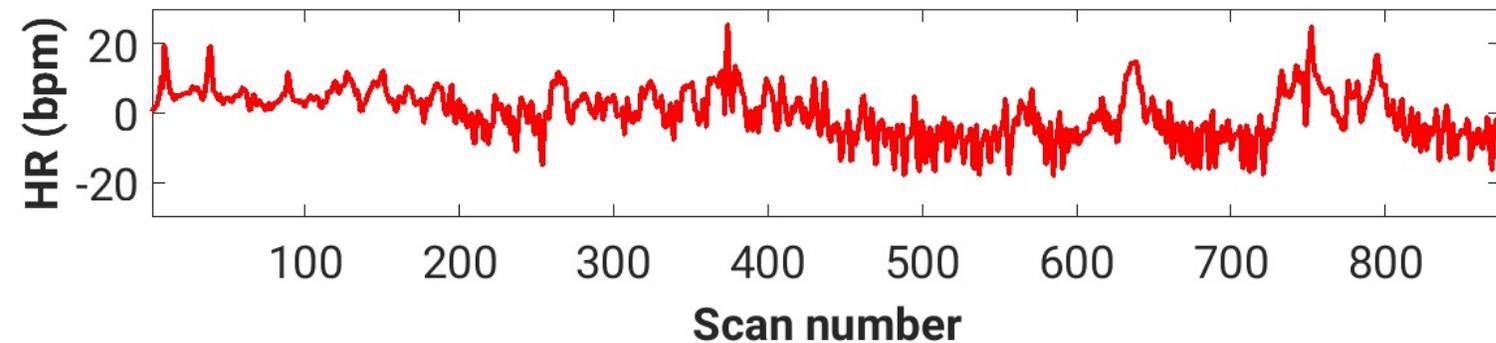
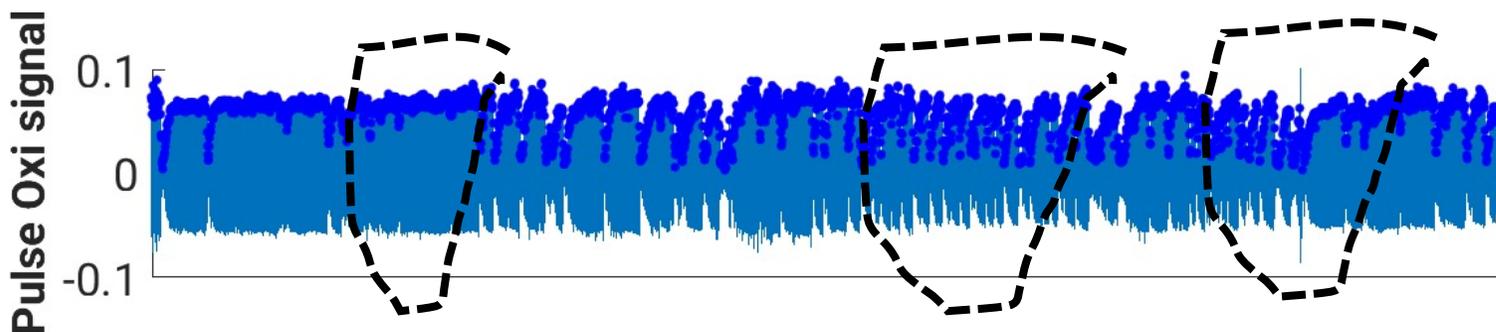
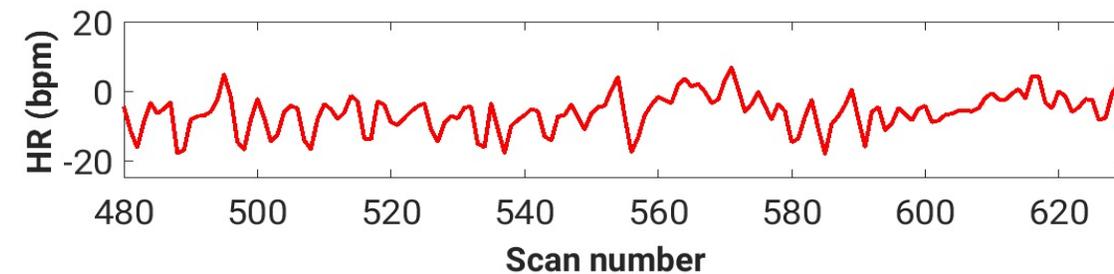
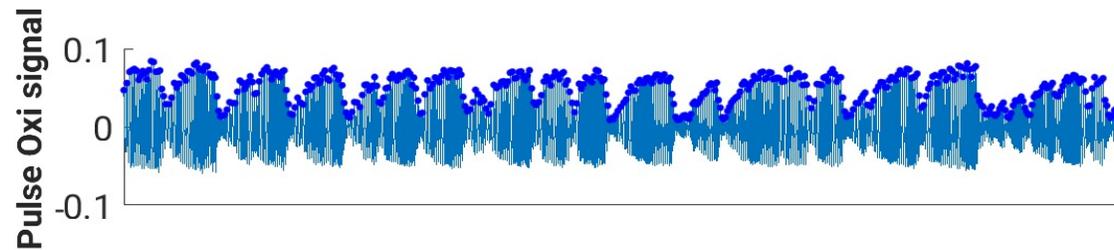
*.. these signal changes can be attributed primarily to changes in S_0 associated with **increases in intracranial CSF volume** during widespread changes in cerebral perfusion.*

Sleep data

Subject 3

TR=3s, TE=36ms, in-plane res=2.5 mm,
slice thickness=2 mm, slice gap=0.5 mm),

Grappa = 2, 3 T



- Extensive lesion and anatomic studies have implicated the functional significance of white matter in neurological and **psychiatric diseases**.

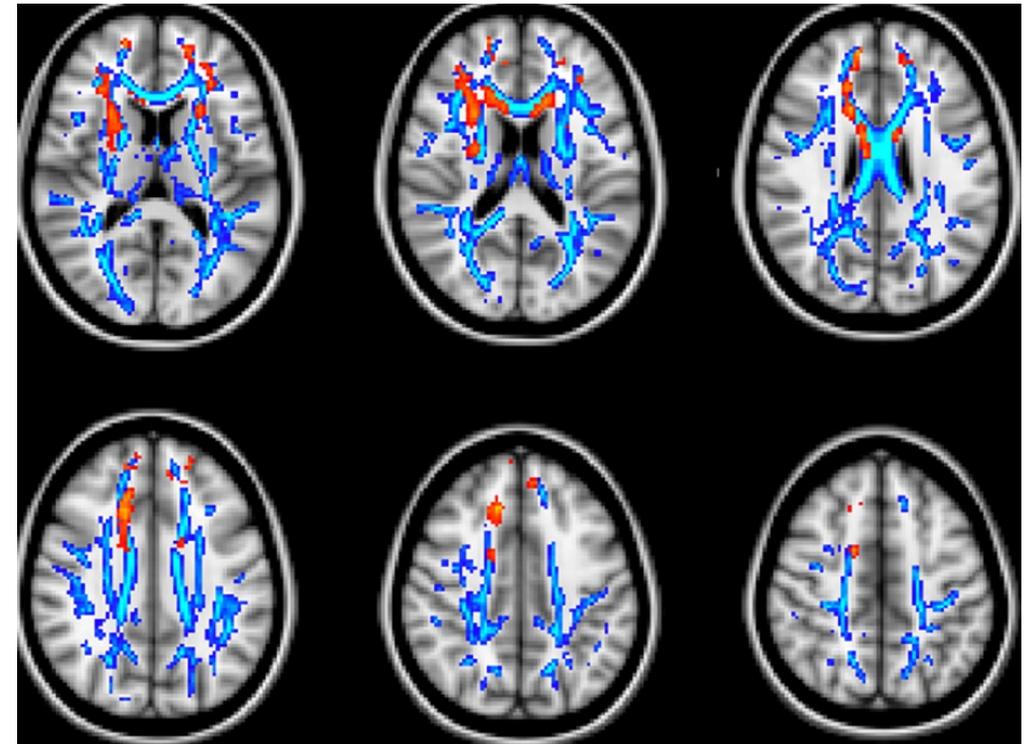
Brain Imaging and Behavior (2015) 9:868–877
DOI 10.1007/s11682-014-9349-1

ORIGINAL RESEARCH

White matter abnormalities of microstructure and physiological noise in schizophrenia

Hu Cheng • Sharlene D. Newman • Jerillyn S. Kent •
Amanda Bolbecker • Mallory J. Klaunig •
Brian F. O'Donnell • Aina Puce • William P. Hetrick

- Decrease in fractional anisotropy (FA): an indicator of white matter integrity.
- Regions of significant **FA reduction** for schizophrenia (blue-light blue, track-based spatial significance analysis, $p < 0.05$ to $p < 0.01$)
- Voxels that are significantly different between patient and control from the **temporal-SNR analysis** (red-yellow, $p < 0.001$ uncorrected to $p < 0.05$ FEW corrected).



Background

Original Article

Perfusion information extracted from resting state functional magnetic resonance imaging

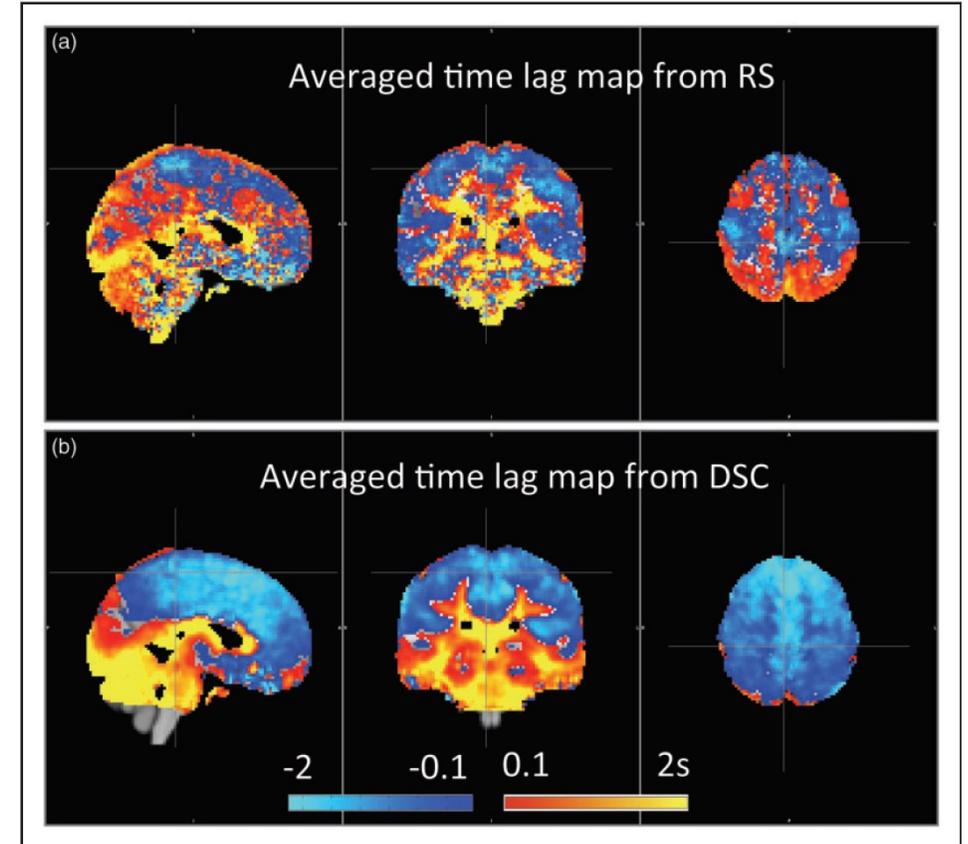
Yunjie Tong^{1,2}, Kimberly P Lindsey^{1,2}, Lia M Hocke^{1,3},
Gordana Vitaliano^{1,2}, Dionyssios Mintzopoulos^{1,2}
and Blaise deB Frederick^{1,2}

The first 10 ICs that show high positive correlations with the peripheral data.

The IC pattern with the highest negative correlation with the peripheral data is also shown in the last panel.

JCBFM

Journal of Cerebral Blood Flow & Metabolism
2017, Vol. 37(2) 564–576
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DOI: 10.1177/0271678X16631755
jcbfm.sagepub.com
SAGE



Background

OPEN ACCESS Freely available online

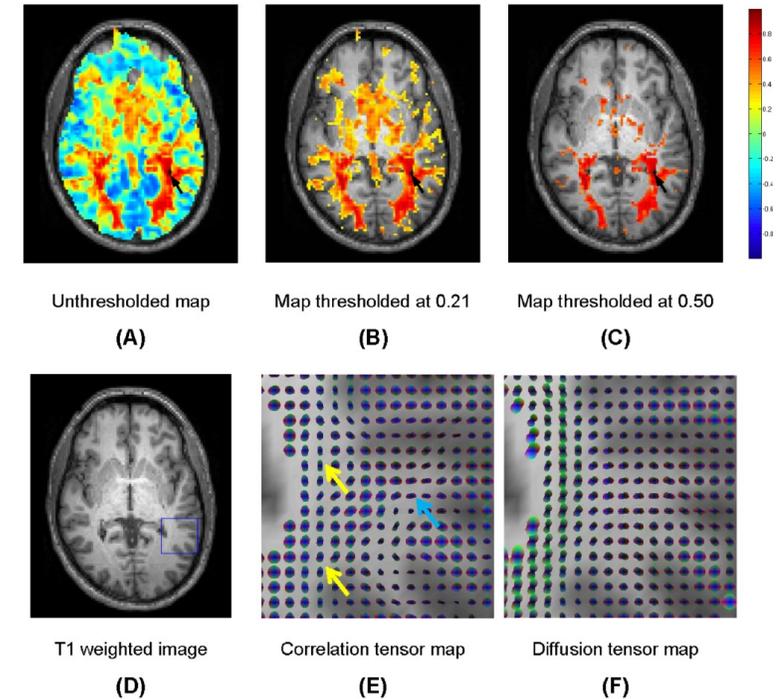
PLOS ONE

Spatio-Temporal Correlation Tensors Reveal Functional Structure in Human Brain

Zhaohua Ding^{1,2,3,4,5*}, Allen T. Newton^{1,6}, Ran Xu^{1,2}, Adam W. Anderson^{1,2,3}, Victoria L. Morgan^{1,2,3}, John C. Gore^{1,2,3,5,7,8}

.. appropriate analysis of resting state acquisitions may reveal MRI signal variations within WM that reflect neural electrical activity and the propagation of information.

In WM, evidence of anisotropy would be consistent with our hypothesis and could form the basis of a new way to integrate directly the structure and function of neural networks in the human brain.



Maps of temporal correlations of BOLD signals to a seed in the left optic radiation.

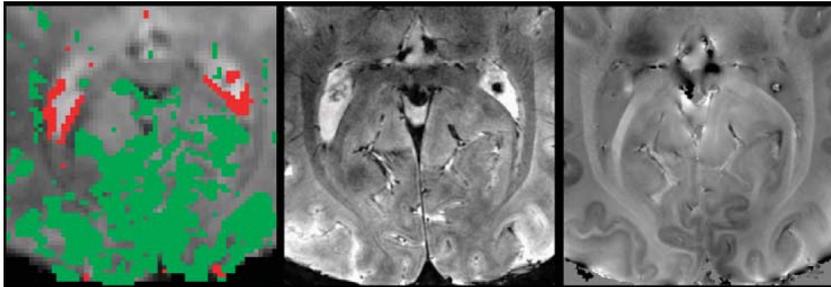
Background

Journal of Cerebral Blood Flow & Metabolism (2011) 31, 401–412
© 2011 ISCBFM All rights reserved 0271-678X/11 \$32.00
www.jcbfm.com



Negative BOLD-fMRI signals in large cerebral veins

Marta Bianciardi, Masaki Fukunaga, Peter van Gelderen, Jacco A de Zwart and Jeff H Duyn



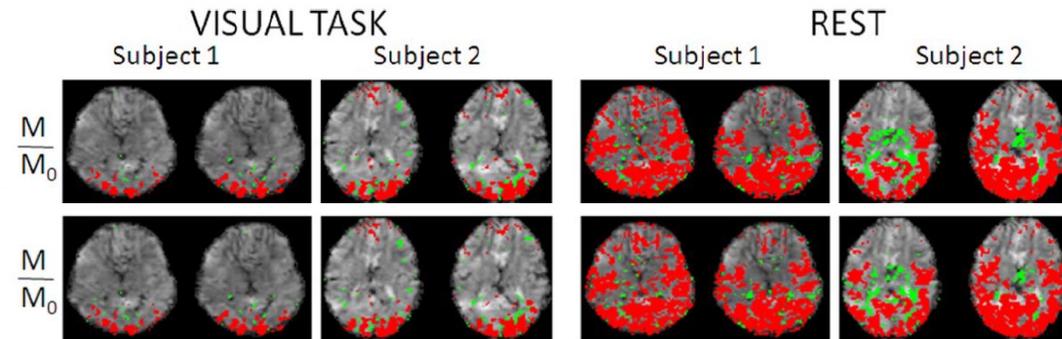
(left) the spatial distribution (red/green) of fMRI signals anti-correlating and positively correlating with the seed time series in the visual cortex; (middle) magnitude and (right) phase images (TE=28.5 ms).

*.. negative BOLD signals were consistent with increases in **local blood volume**.*

♦ Human Brain Mapping 35:2191–2205 (2014) ♦

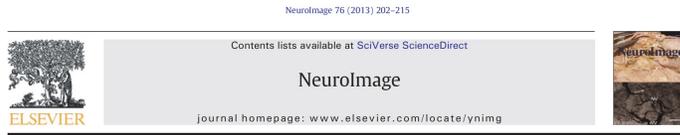
Investigation of BOLD fMRI Resonance Frequency Shifts and Quantitative Susceptibility Changes at 7 T

Marta Bianciardi,^{1,2*} Peter van Gelderen,¹ and Jeff H. Duyn¹



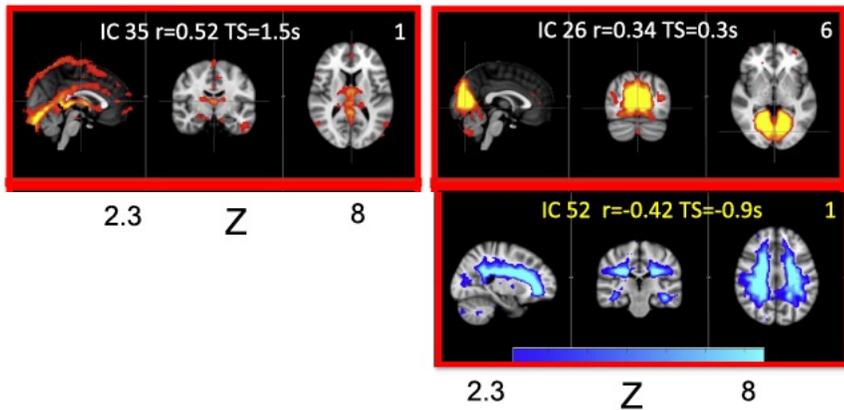
BOLD fMRI (Magnitude) activity maps during visual task and at rest for two subjects (red/green: positive/negative activity): (top) without and (bottom) with physiological noise correction.

Background



Evaluating the effects of systemic low frequency oscillations measured in the periphery on the independent component analysis results of resting state networks

Yunjie Tong ^{a,b,*}, Lia M. Hocke ^{a,c}, Lisa D. Nickerson ^{a,b}, Stephanie C. Licata ^{a,b}, Kimberly P. Lindsey ^{a,b}, Blaise deB. Frederick ^{a,b}



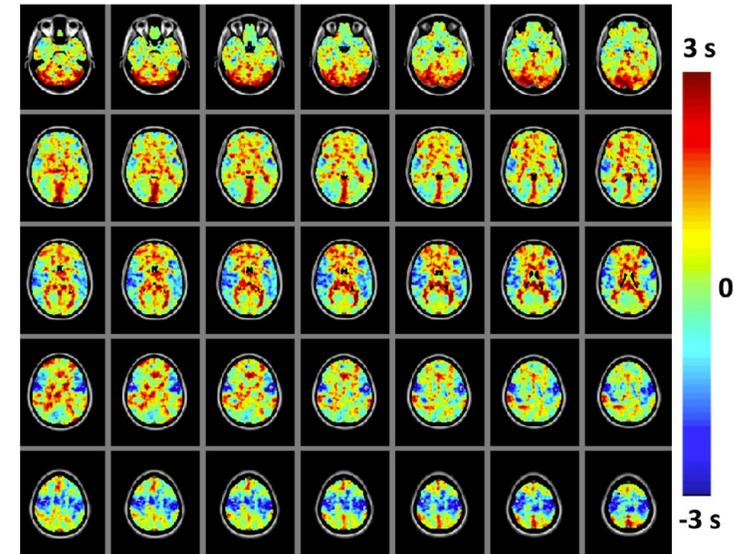
.. ICs that show high positive correlations & highest negative correlation with the peripheral data.

Common areas: deep-WM & ventricles & large veins



Correcting for Blood Arrival Time in Global Mean Regression Enhances Functional Connectivity Analysis of Resting State fMRI-BOLD Signals

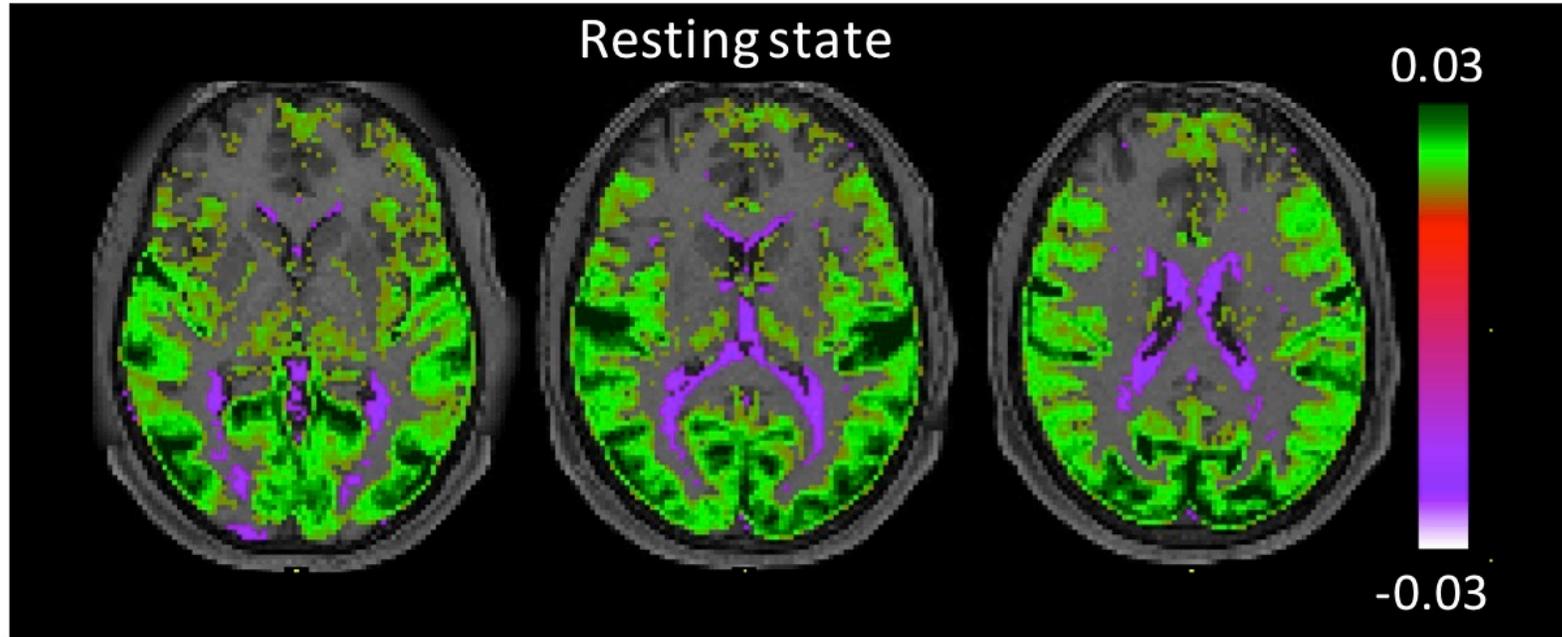
Sinem B. Erdogan ^{1,2*}, Yunjie Tong ^{1,2}, Lia M. Hocke ³, Kimberly P. Lindsey ^{1,2} and Blaise deB. Frederick ^{1,2}



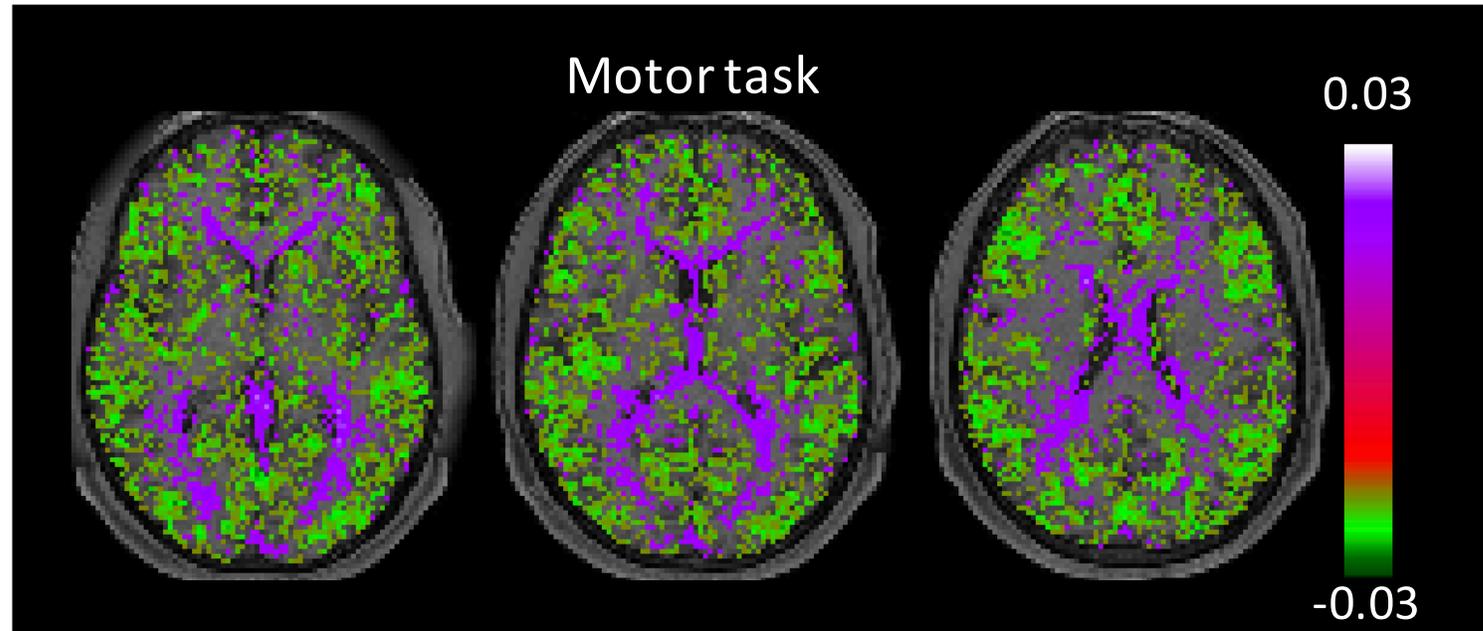
Time delay map indicates the relative arrival time of global signal to each voxel.

Maps represent the group (#) average of the voxel-specific delays in arrival time of the global signal.

Human connectome data (1200 subject release), similar correlation patterns observed with PPG amplitude, average results shown for ~600 subjects, correlation lag 3.5 s.



Human connectome data (1200 subject release), similar correlation patterns observed with PPG amplitude, average results shown for ~600 subjects, correlation lag 3.5 s.



Sleep data

Corresponding data among fMRI scans which had

- 1) **least amount of motion**
- 2) **cleanest PPG data**
- 3) **isolated amplitude drops in PPG signal**
- 4) **segment of NREM sleep**

[light sleep]

Resting state and sleep

~30% of connectome
data scored as sleep