

REVIEWS

New Approaches for Exploring Anatomical and Functional Connectivity in the Human Brain

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Information processing in the primate brain is based on the complementary principles of modular and distributed information processing. The former emphasizes the specialization of functions within different brain areas. The latter emphasizes the massively parallel nature of brain networks and the fact that function also emerges from the flow of information between brain areas. The localization of function to specific brain areas ("functional segregation") is the commonest approach to investigating function; however, an emerging, complementary approach ("functional integration") describes function in terms of the information flow across networks of areas. Here, we highlight recent advances in neuroimaging methodology that have made it possible to investigate the anatomical architecture of networks in the living human brain with diffusion tensor imaging (DTI). We also highlight recent thinking on the ways in which functional imaging can be used to characterize information transmission across networks in the human brain (functional and effective connectivity).

Key Words: Diffusion, magnetic resonance imaging, functional connectivity, human

A major challenge for neuroscience is to understand brain function in terms of connectional anatomy and the dynamic flow of information across neuronal networks. In nonhuman primates, synaptic connectivity between brain regions can be established by the injection of tracers into target brain areas and observation of the patterns of transport of tracers in the brain postmortem (see Ramnani and Miall [2001] for a description of recent advances; Kobbert et al 2000). Such methods can even identify connectivity between individual synapses, but their invasiveness makes them unsuitable for use in humans. Magnetic resonance imaging (MRI) now offers an entirely non-invasive, alternative approach. In white matter, water diffusion is highly directional ("anisotropic"), with preferential diffusion along the long axis of fibre tracts. With the application of large magnetic field gradients during image acquisition, MR images can be sensitized to the diffusion of water molecules within the voxel, and from these images we can compute the local direction of greatest diffusion. With these principal diffusion directions (PDD), the organization of major fibre tracts can be mapped. The resolution of these methods is still limited by the inherently low signal/noise ratio of MRI, and the methods cannot achieve the levels of spatial resolution of conventional anatomical tracer methods that can establish synaptic connectivity. For example, typical diffusion-weighted images used for tractography might have a voxel resolution on the order of $2.5 \times 2.5 \times 2.5 \text{ mm}^3$, whereas conventional tract-tracing methods can track the projections of single axons (with spatial resolution measured in micrometers). Furthermore, a major limitation of these methods is that they do not distinguish between efferent and afferent projections. Nonetheless, data are easily acquired from individual subjects, and the analysis of tracts across the brain can proceed relatively quickly. We will describe selected recent

advances in this field and give examples of how they can be used to determine aspects of the organization of the human brain.

A second, complementary approach is concerned with establishing the ways in which information is transmitted and integrated across brain networks. These are dynamic, context-dependent processes, in which variations in task demands lead to the preferential recruitment of some networks over others. Methods for analysis of these processes are based on the premise that functionally interacting regions will show correlated patterns of activity. Thus, simultaneously recording the activities of two groups of neurons in an animal preparation allows testing for conditions under which they become functionally coupled (Scannell et al 1995; Young et al 1994). The advantage of functional neuroimaging methods is that they can be used to detect activity not just in a limited set of areas but across the entire brain simultaneously. This makes it possible to examine the statistical relationships between the activities of not just two but of several areas across the brain. We will describe exciting new strategies for use of functional MRI (fMRI) data in the analysis of functional connectivity in the human brain. The review of diffusion tractography and functional mapping together highlights the possibility that future strategies for understanding interactions between regions of the human brain will benefit from integrating anatomically informed models of functional interactions.

Diffusion Tractography: Exploring the Connectional Architecture of the Human Brain

Recent advances in diffusion-weighted imaging and its derivative, diffusion tensor imaging (DTI), have brought to light the possibility of *in vivo* explorations of anatomical connectivity in the human brain. Magnetic resonance diffusion-weighted imaging sensitizes the nuclear MR signal to the random motion of water molecules along a single diffusion-encoding direction (Le Bihan 2003; Stejskal and Tanner 1965). By taking measurements along many such directions, it is possible to characterize the mean diffusion properties within a voxel. Diffusion tensor imaging then makes the assumption that this local diffusion might be explained by a three-dimensional Gaussian process and fits the diffusion tensor (Basser et al 1994) as its covariance matrix at each voxel. This tensor might be represented by a diffusion ellipsoid and, if the assumption of Gaussian diffusion holds true, the principal axis of this ellipsoid corresponds to the direction of greatest diffusion, or principal diffusion direction (PDD), and its

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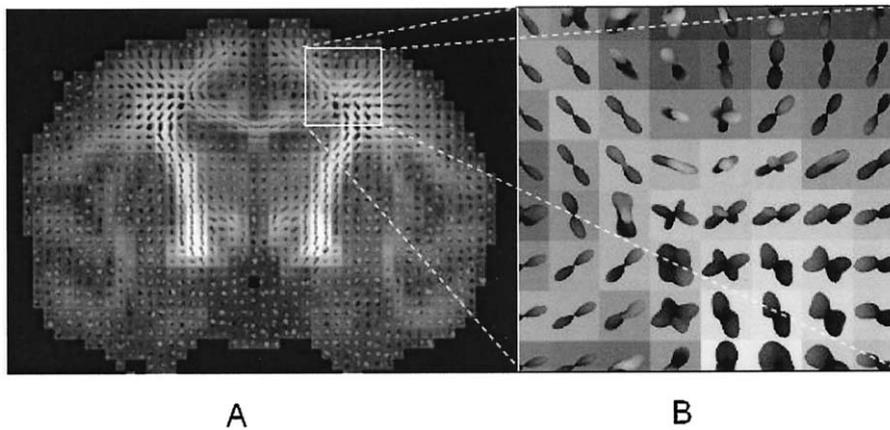


Figure 3. Q-ball diffusion imaging in the macaque monkey brain reveals fibre complexity within a voxel. Normalized orientational density functions are shown at each voxel. **(A)** A single coronal slice from macaque brain. **(B)** Detail of an area of crossing fibres in **A** (intersection of the superior longitudinal fasciculus, the corona radiata, and the corpus callosum). Image courtesy of D. Tuch.

field. Uncertainty is typically low in deep white matter fibres, thus explaining the reproducibility of streamlining results in these areas; however, uncertainty is high in areas with geometrically complex structure (such as crossing fibres). Behrens et al (2003a) propose a method for estimating this uncertainty from a single data set and propagating this local uncertainty on PDD through to a global probability density function (PDF) on the recovered connecting streamlines. Thus, pathways seeded in a given location might encounter regions of high uncertainty as they approach their targets but be able to progress into target areas, with the PDF spreading spatially to account for the uncertainty earlier in the pathway. This is illustrated in Figure 4A,

which depicts thalamo-cortical pathways (note the broadening of PDFs in the approach to the cortex; see figure legend for details).

An important advantage in computing a PDF on the location of the pathway is that it is possible to express a level of confidence in the resulting projection. Instead of discretizing the PDF on a voxel-by-voxel basis, Behrens et al (2003b) computed the probability of projection between seed points in the thalamus and each of seven anatomically defined cortical masks (Figure 4B). Seeds were classified according to the masked cortical region with which they had the greatest probability of connection (Figure 4C). Figure 4C (inset) shows a schematic diagram of the thalamus subdivided into histologically defined nuclei. Color

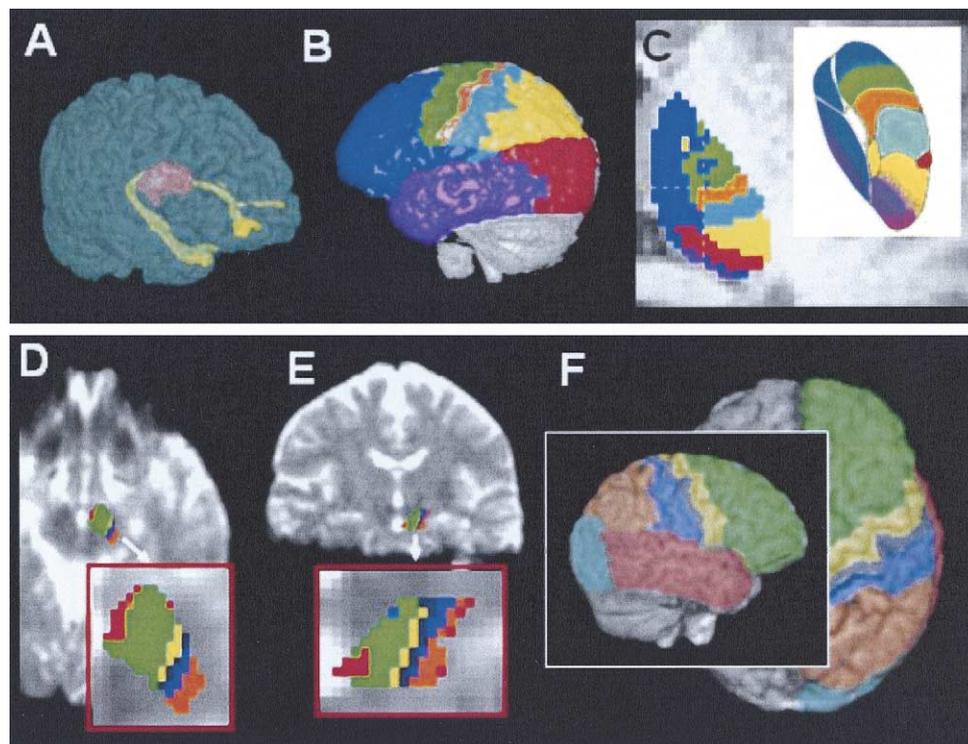


Figure 4. **(A–C)** Probabilistic tractography between thalamus and cortex. **(A)** Probabilistic connectivity distribution from medio-dorsal thalamus to the prefrontal cortex and temporal lobe. **(B)** Anatomically defined cortical masks. **(C)** Axial section through thalamus showing result of connectivity analysis. Probabilistic tractography (see text) was run from each seed voxel in thalamus, and the seed voxel was labeled according to the cortical zone in **B** with the highest probability of connection. Inset: schematic of thalamus with (overlaid in color) predictions from the monkey literature of the dominant cortical connections within each thalamic nuclear cluster. **(D–F)** Probabilistic tractography between cerebral peduncle and cortex. Axial **(D)** and coronal **(E)** section through the cerebral peduncle, parcellated according to the highest probability of connection from cortical zones defined in **F**. **A–C** adapted from Behrens et al 2003a.

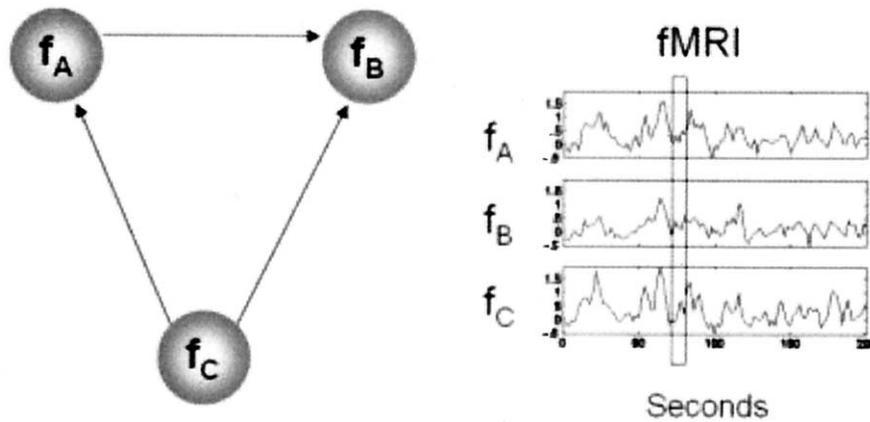


Figure 5. Structural equation models (SEMs) posit a set of causal relationships between variables. These can be shown graphically, for example, by the network in the left panel. The right panel shows a set of functional magnetic resonance imaging (fMRI) time series in which the superimposed narrow rectangle indicates that SEMs model the instantaneous correlations, that is, the correlation between regions at the same time point. Instantaneous activity is assumed to be the result of random fluctuations (i.e., activity that cannot be directly attributed to known experimental manipulation) and connections between regions. Changes in connectivity can be attributed to experimental manipulation by partitioning the data set.

number of connections. Such sparse structures that neglect, for example, reciprocal connections between regions are often biologically implausible and might result in poor model fits. Second, SEMs do not make use of temporal information—if the time indexes of the data were randomly permuted, SEM would give the same results.

Multivariate Autoregressive Modeling

To overcome these difficulties, Harrison et al (2003) have proposed the use of multivariate autoregressive (MAR) models for the analysis of fMRI data. An autoregressive approach is used to characterize structure in a time series, whereby the current value of a time series is modeled as a weighted linear sum of previous values. Multivariate autoregressive models extend this approach to multiple time series, so that the vector of current values of all regions is modeled as a linear sum of previous vector values. The optimal number of preceding time points can be found with Bayesian model order selection (see Figure 6).

In a MAR model, the dependencies between time points and between regions are characterized by a matrix of weighting values. Estimation of these weights is a noniterative linear fitting process. Thus, estimation is fast, which opens up the possibility of readily comparing connectivity models comprising different regions and connectivity patterns.

The parameters of a MAR model can be used to compute a number of further quantities, each of which can be used to describe network connectivity. These include coherences (correlation at particular frequencies), partial coherences (the coherence between two time series after the effects of others have been taken into

account), phase relationships (the lag between two signals at a given frequency), and Granger causality (the dependence of region A on region B, as assessed by comparing two MAR models, one with the A-to-B connection and one without).

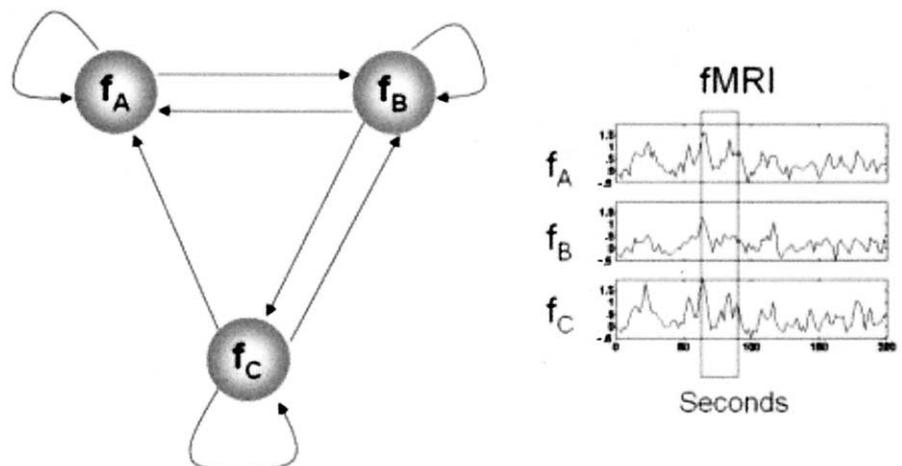
By partitioning an fMRI data set into different levels of a factor, one can then infer that pathways have been activated or that, for example, Granger causality between regions has changed. Multivariate autoregressive models are only beginning to be applied in fMRI but have a history of application in electroencephalography (EEG)/magnetoencephalography (Bressler and Scott Kelso 2001).

Dynamic Causal Modeling

Whereas SEM and MAR models were developed in other areas of science, dynamic causal modeling (DCM) (Friston et al 2003) has been specifically designed for the analysis of functional imaging data. Dynamic causal modeling posits a causal model, whereby neuronal activity in a given region causes changes in neuronal activity in other regions, via interregional connections, and in its own activity, via self-connections (see Figure 7). The neuronal activity in each region then gives rise to changes in blood volume, flow, and deoxyhemoglobin content. These then determine the blood oxygen level–dependent signal that is measured with fMRI. In DCM, these hemodynamic relationships are quantified by the Balloon model (Friston et al 2003).

Thus, DCM models neuronal connectivity, whereas SEM and MAR model correlations at the level of observed fMRI time series. Dynamic causal models are able to work at the neuronal level because they use a “forward model” (with hemodynamic parameters), relating neuronal activity to fMRI activity, and this model is

Figure 6. Multivariate autoregressive (MAR) models posit a set of causal relationships between variables as shown, for example, in the left panel. The self-connections highlight the fact that activity in each region is modeled as an autoregressive process. The right panel shows a set of functional magnetic resonance imaging (fMRI) time series in which the superimposed wide rectangle indicates that MAR models take into account the ongoing correlations, that is, the correlation between regions at the same and neighboring time points. Instantaneous activity is the result of random fluctuations, local dynamics, and connections between regions. Changes in connectivity can be attributed to experimental manipulation by partitioning the data set.



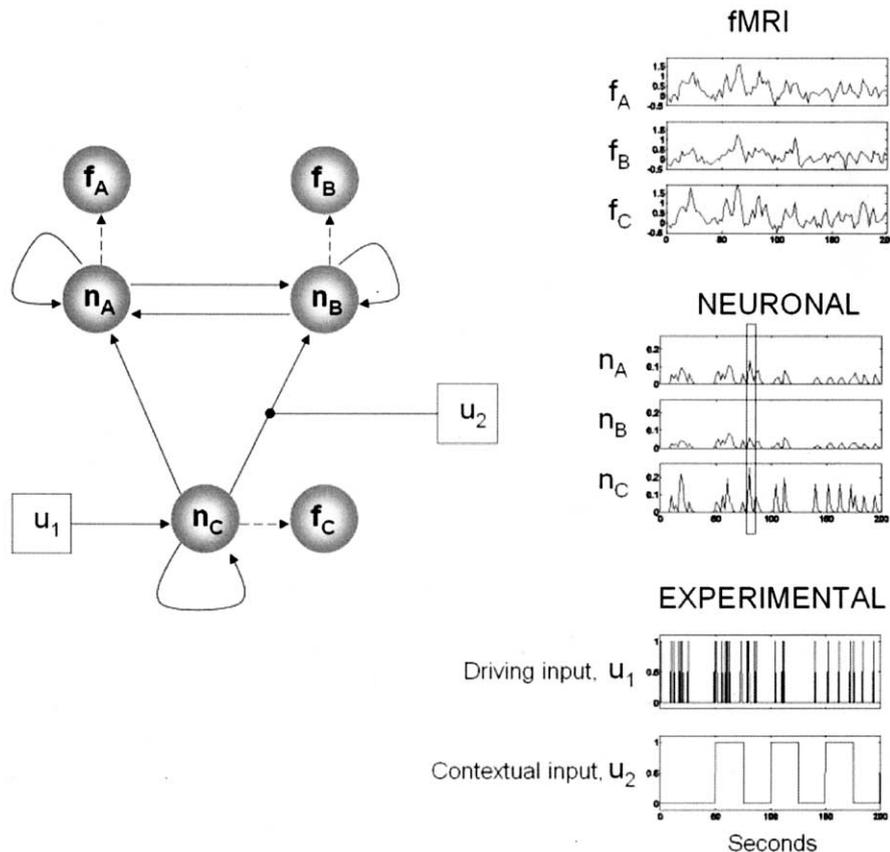


Figure 7. Dynamic causal modeling (DCM) models transient dependence in neuronal signals. Neuronal activity is the result of driving experimental input and neuronal dynamics, and changes in connectivity are directly attributable to experimental manipulation. This figure shows that input 1, a driving input, causes activity in region C, which in turn causes activity in regions A and B. This activity gradually decays according to a neurodynamic model that can be estimated from functional magnetic resonance imaging (fMRI) data. Input 2, a contextual input, changes the connectivity from the neuronal ensembles in region C to those in region B. This changes network activity and results in different observed hemodynamics (note, for example, that fMRI activity in region B is stronger and more correlated to activity in region A when input 2 is “high”).

inverted during the model-fitting process. Another important distinction is that DCM explicitly models the effect of experimental manipulation on network dynamics. Mathematically, neuronal activity is described by a bilinear differential equation, whereby transient responses are initiated via driving external inputs, and the time constants of these transients can be altered via modulatory inputs. The strength of these driving and modulatory input connections (or “neurodynamic parameters”) can be estimated from data.

A DCM is fitted to data by tuning the neurodynamic and hemodynamic parameters so as to minimize the discrepancy between predicted and observed fMRI time series. This takes place via an iterative nonlinear fitting process. A current limitation of DCM is that, because this model fitting is computationally demanding, one must restrict analyses to a small number of regions.

An example of an analysis with DCM is a study of whether category specificity effects in infero-temporal cortex are mediated by top-down or bottom-up activity (Mechelli et al 2003). We anticipate that the DCM approach rapidly will become widely used because it both 1) explicitly models how experimental manipulations cause network activity; and 2) models this activity at a neuronal rather than hemodynamic level, a level that is most appropriate for understanding information flow.

A second current limitation of DCM is that neurodynamics in each region are characterized by a single state variable (“neuronal activity”). This prohibits inferences that can be meaningfully linked to specific neurotransmitter systems, because these would require multiple state variables in each region that describe activity in excitatory and inhibitory subpopulations. The parameters of such models could only be identified with DCMs that use high temporal resolution data, such as from EEG. The development of such models therefore requires integration of informa-

tion from fMRI (to determine where activity occurs) and from EEG (to determine when it occurs) and is an exciting area for future research that would significantly strengthen the bridge between data from imaging neuroscience and our understanding of the neurobiology underlying cognitive processing.

A Multidisciplinary Approach to Understanding Connectivity

This review has provided an overview of recently developed methods that permit investigations of anatomical and functional connectivity in the human brain. Although these methods have yet to reach the peak of their sophistication, it is clear that they have already made significant contributions to our understanding of how the human brain operates as a collection of networks. The same methods also promise to transform the ways in which we think about the underlying causes of neuropsychiatric conditions. For example, DTI has been useful in the identification of connectional abnormalities in fronto-parietal and fronto-temporal circuitry in schizophrenia (Burns et al 2003; see Lim and Helpem 2002 for a review). Investigations of functional connectivity have been useful in studies of neurotransmitter systems closely linked to schizophrenia. As a recent example, Honey et al (2003) demonstrated that dopaminergic drugs alter the functional connectivity between areas of the prefrontal cortex and interconnected regions of the striatum and thalamus.

In future work, the combined use of DTI and functional connectivity analyses will also serve to overcome important limitations. Methods for examining effective connectivity (e.g., DCM, as described above) often require the a priori specification of anatomical connectivity models in the system of interest, but

these are inevitably inaccurate because they are derived from nonhuman primate studies, and the connectivity between areas in the human brain is almost always unknown. The methods described here offer the prospect of using DTI to specify the anatomical model to inform functional connectivity analyses, not only in the same species but also in the same subjects.

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