Imaging Brain Structure and Function

Thomas J. Grabowski, Jr., MD Professor, Radiology and Neurology (joint) Director, UW Integrated Brain Imaging Center Director, UW Alzheimer's Disease Research Center CSE/EE 577 October 18, 2017

Why image the brain?

- What's wrong?
- How does it work?
- To aid intervention

(Medical diagnosis)(Neuroscience)(Medical treatment, Engineering)

Why is the brain hard to image?

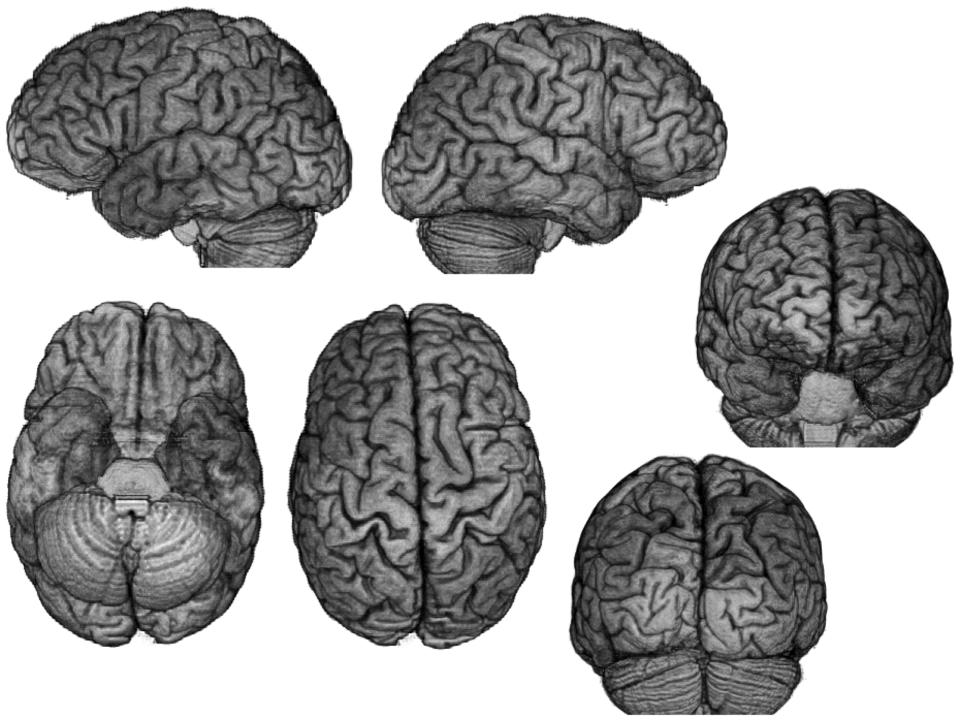
- Different soft tissues (gray matter, white matter) give low contrast to xrays
- Cerebral anatomy is 3D complex and variable
- Much of the organization of the brain is still poorly understood.
- Neurophysiological processes must be imaged indirectly through their coupled vascular and metabolic effects
- Cerebral functional zones are defined by microscopic features that can't be imaged directly

Digital image paradigm: "image" as an abstract concept

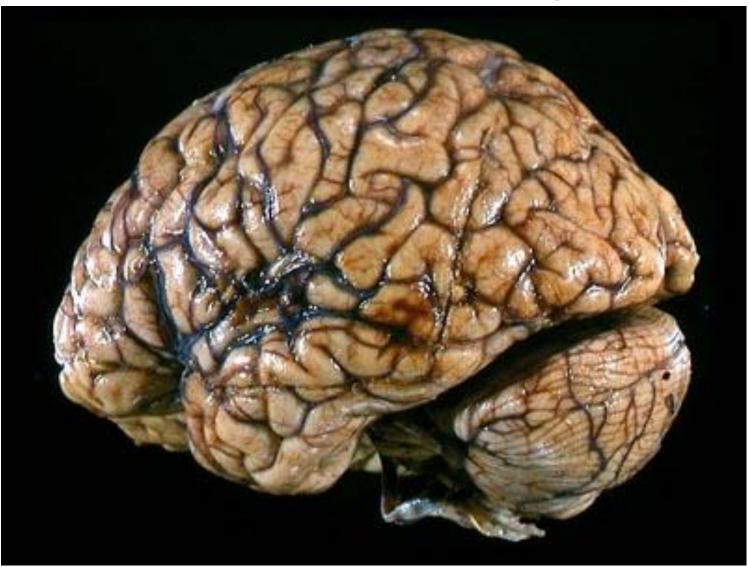
- Images are matrices of values of a physical or physiological parameter, extended over an anatomic space.
- The parameter is not derived "directly" from hardware sensors, but by post-acquisition computation.
- Digital "images" are often an element in further workflow.

Outline

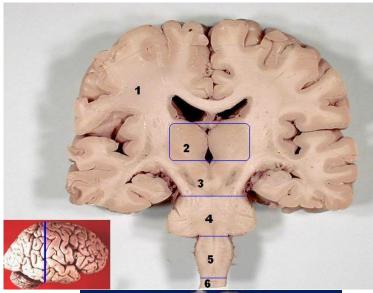
- The brain
- Brain imaging modalities
- Standard anatomical space
- Image processing

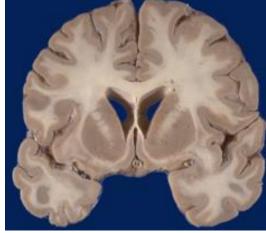


The brain is an organ



Blood, blood vessels, connective tissue (meninges), etc.





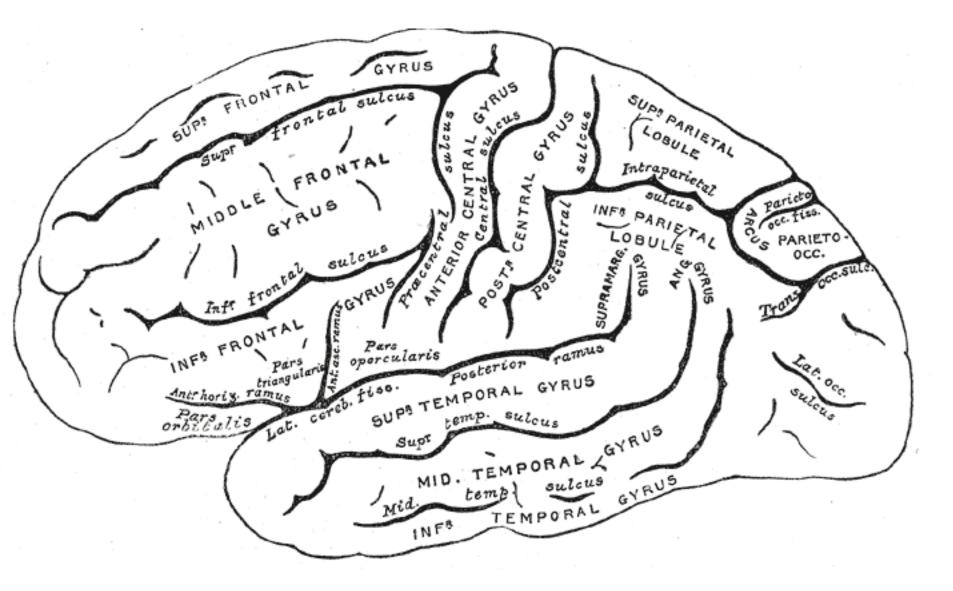




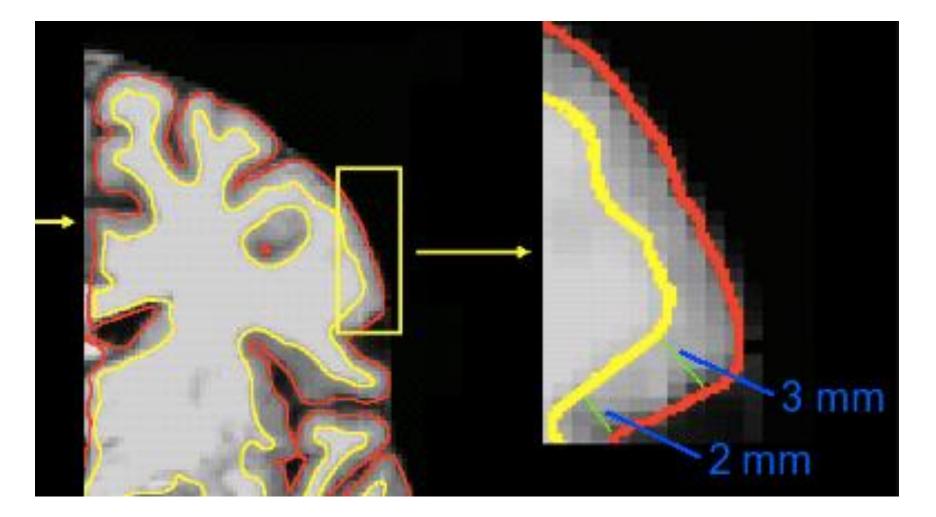




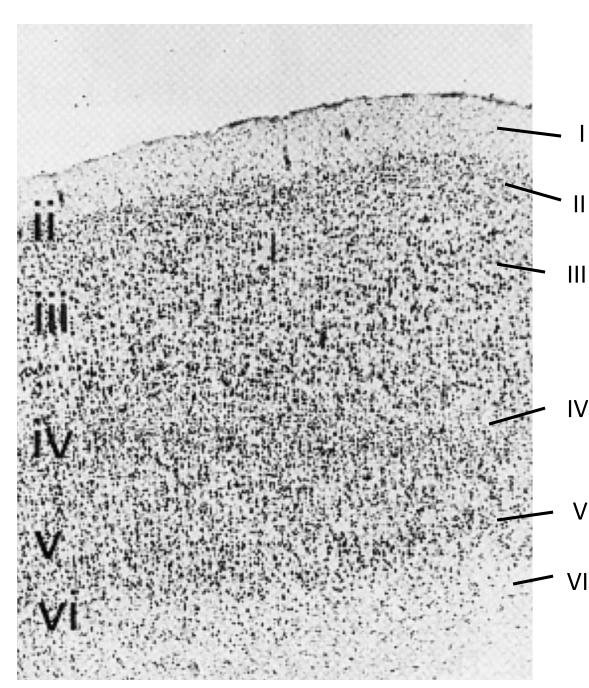
Sulci and Gyri of the Cerebral Cortex



Gray matter, white matter



Cerebral cortex



Molecular layer

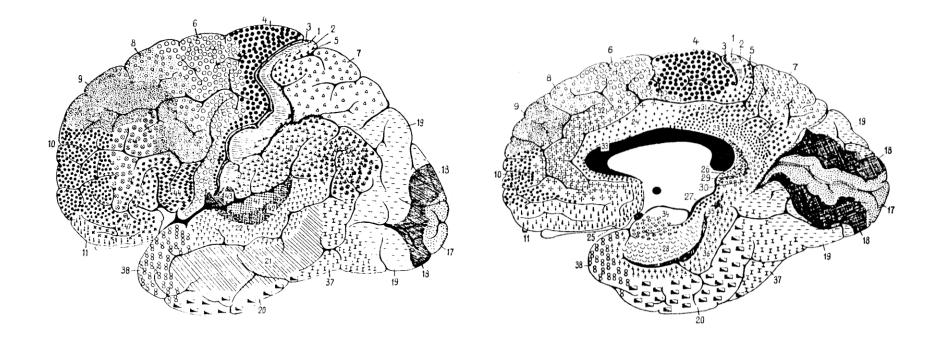
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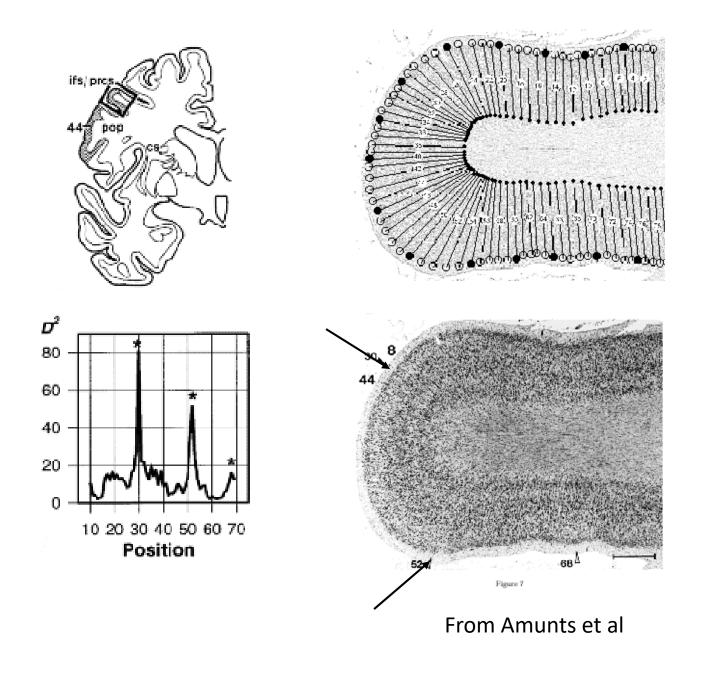
- External granular layer
- External pyramidal layer

IV Internal granular

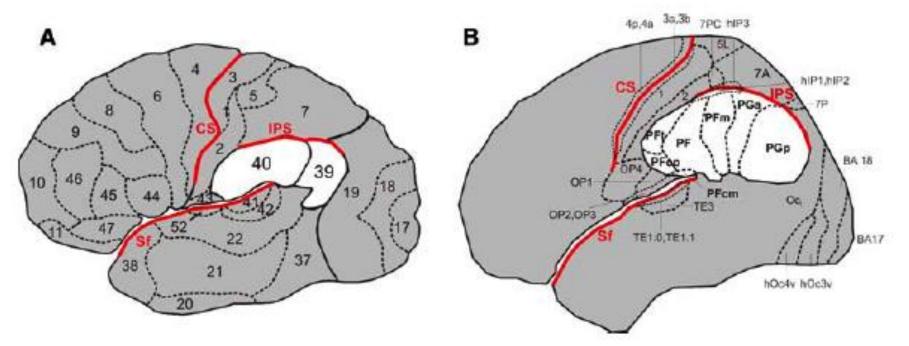
- Internal pyramidal
- Multiform layer VI

Brodmann's cytoarchitectonic map (1909)





Julich cytoarchitectonic map (2009)



Outline

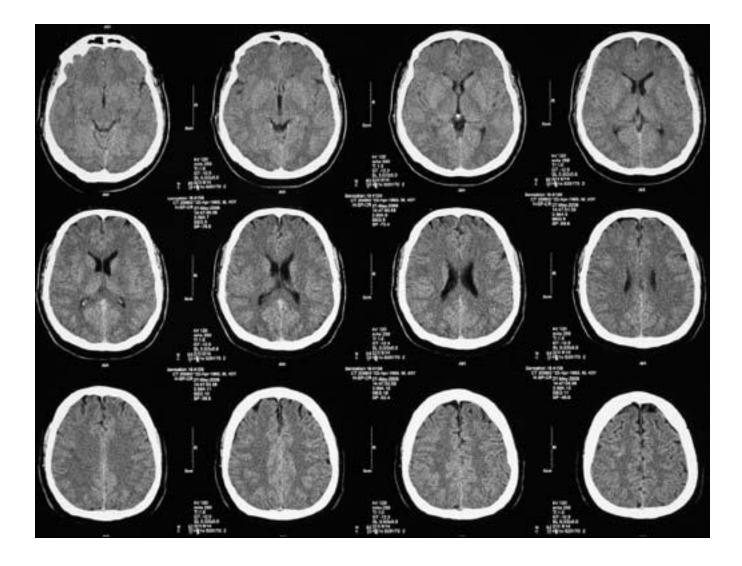
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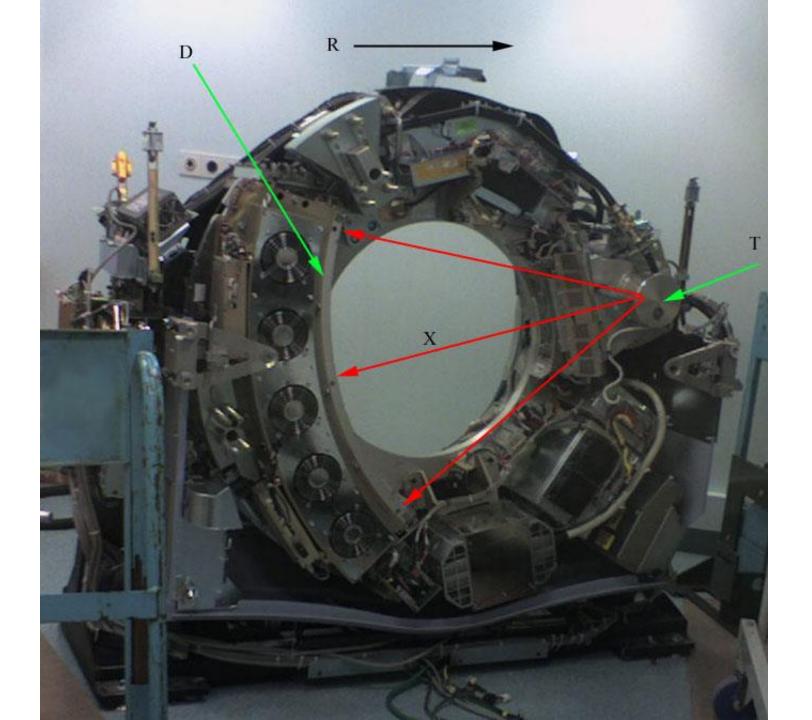
Imaging Modality

- Categorized by the physical method by which an imaging procedure is performed

 the source of energy and the type of sensors
- A taxonomy of medical brain imaging modalities:
 - Ionizing radiation
 - External ionizing radiation (X-rays)
 - Internal ionizing radiation (nuclear medicine)
 - Nonionizing radiation
 - Radiofrequency energy (magnetic resonance imaging [MRI])
 - Ultrasound
 - Visible light optical imaging

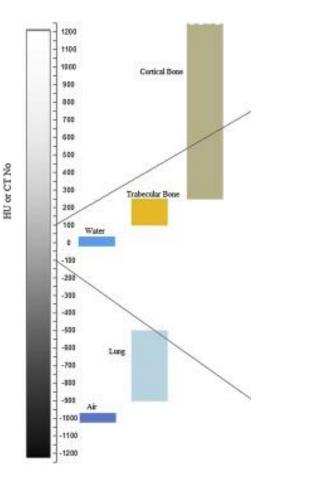
Xray Computed Tomography



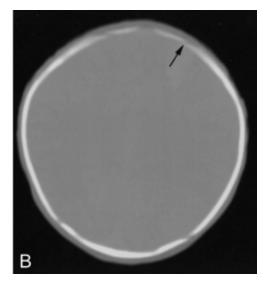


CT gives maps of radiodensity

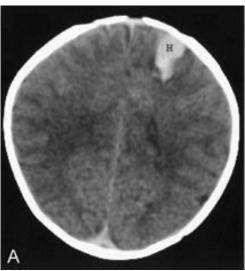
"Hounsfield Number"



Bone Window



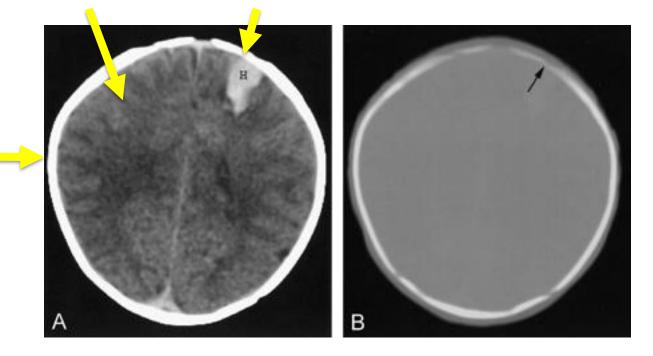
Tissue Window



Tissue vs. Bone Windows

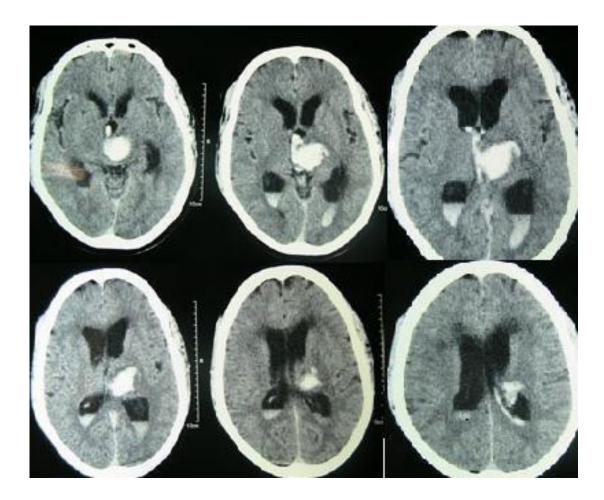
+30 +70

+1000



Hounsfield Number – radiodensity

Intracerebral hypertensive hemorrhage



CT angiography





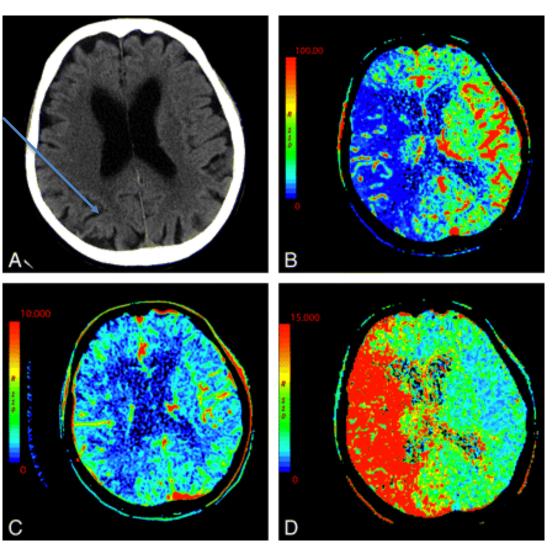
CT in Acute Stroke

CT Angiogram: R Middle Cerebral Artery Occlusion



Non contrast CT

Blood flow



Blood volume

Transit time

Computed tomography

- First tomographic anatomic imaging technique
- Modest soft tissue contrast
- Contrast agent (iodinated) already existed
- Good sensitivity to pathology, esp. blood
- Good resolution of bony structures
- Fast (good throughput, low sensitivity to motion)
- Most "available"
- Finds uses as a first-line emergency technique
- Integrated with PET for attentuation correction and anatomic image fusion
- Used extensively in body imaging (organs in motion)

Artifacts

Artifacts

Beam hardening – affects skull base, spinal column, vicinity of implanted metal

Other issues

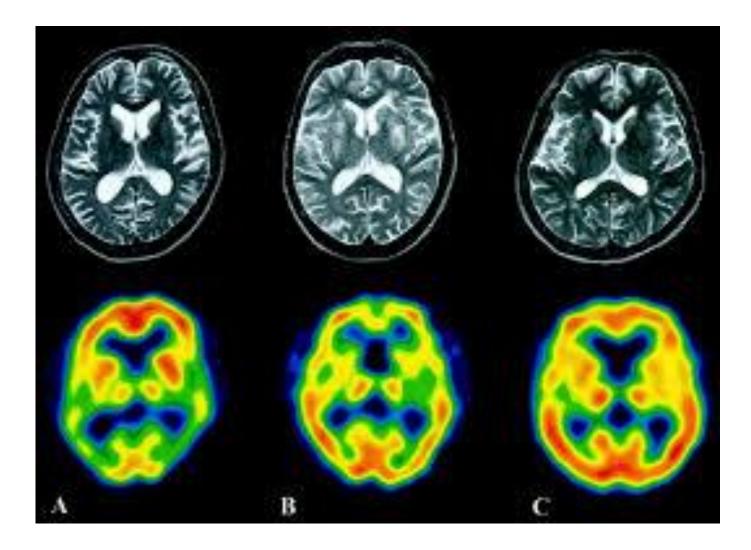
Ionizing radiation exposure Contrast agent can cause renal damage Poor visualization of soft tissue per se

Nuclear Medicine brain scans

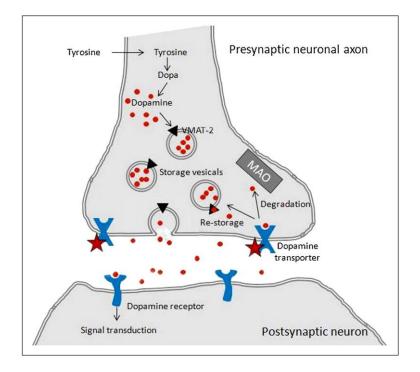
Images of brain physiological parameters are inferred from the biodistribution of radiopharmaceuticals

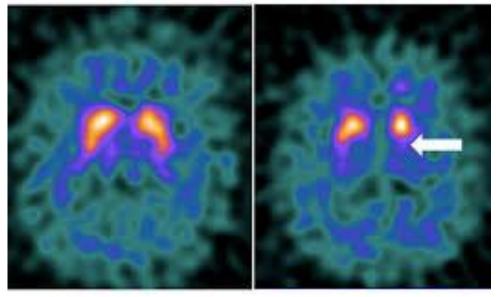


Blood Flow SPECT [⁹⁹Tc]-HMPAO





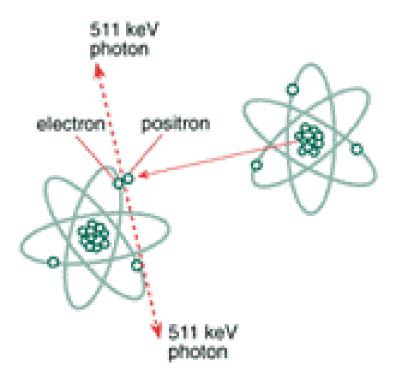




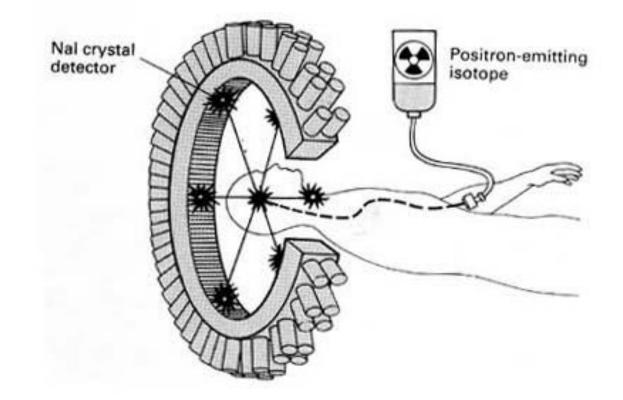
Normal Par Essential tremor Drug-induced parkinsonism

Parkinson disease

Positron emission



PET detectors



Functional Imaging

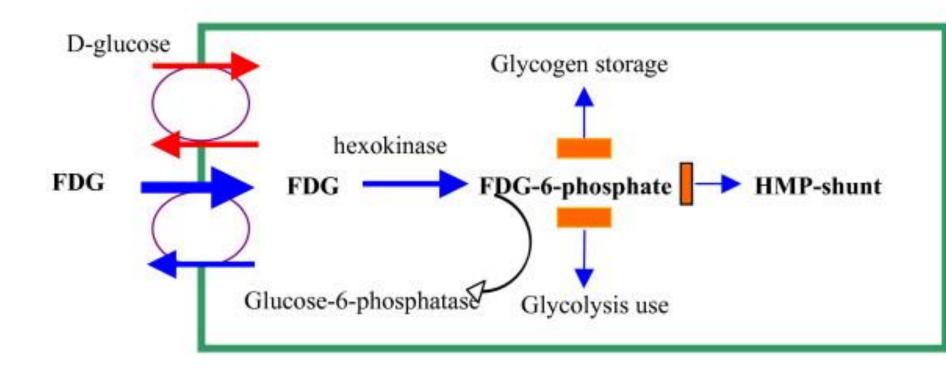
Imaging the brain *at work*

Neural processes are imaged through parameters related to metabolic substrate delivery

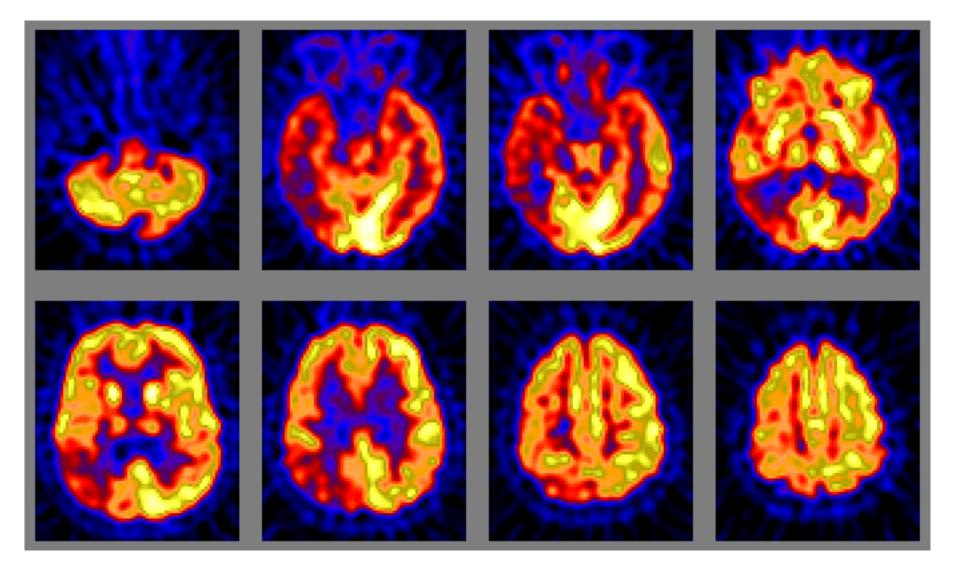
Glucose analogs as radiotracers

Neurovascular coupling

Synaptic electrochemical activity DEPENDS ON Maintenance of membrane potentials WHICH DEPENDS ON Metabolism of glucose WHICH DEPENDS ON Substrate delivery via blood flow



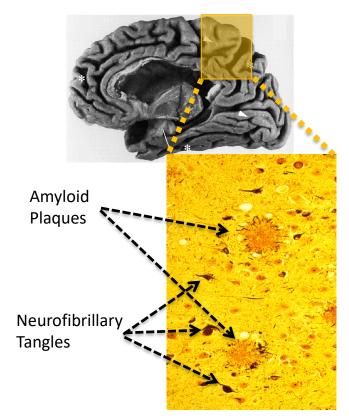
[¹⁸F]Fluorodeoxyglucose PET

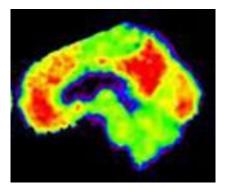


PET

- Physiologically distributed signal
- Unrivaled sensitivity
- A medical procedure with ionizing radiation
- Requires radionuclide source (cyclotron) and radiochemistry facilities
- Tracers exist for tissue metabolism (18F-FDG), blood flow (15O-water), DNA synthesis (18F-FLT), Alzheimer disease proteins, and more.

BRAIN IMAGING OF ALZHEIMER'S DISEASE

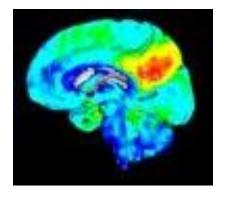




AMYLOID PET SCAN

Detects amyloid plaques Stereotypical distribution Leads symptoms by 15 years Doesn't change over time

Use: to certify diagnosis Spinal fluid is an alternative.



TAU PET SCAN

Detects tau tangles Variable distribution Correlates well with symptoms Tracks advance of disease

Use: to delineate disease impact To track treatment

Artifacts

Artifacts

Off-target tracer binding

Other issues

- Ionizing radiation exposure
- Requires radionuclide source (cyclotron) and radiochemistry facilities
- Poor visualization of anatomy
- Inherently low resolution compared to CT, MRI

Magnetic Resonance Imaging (MRI)



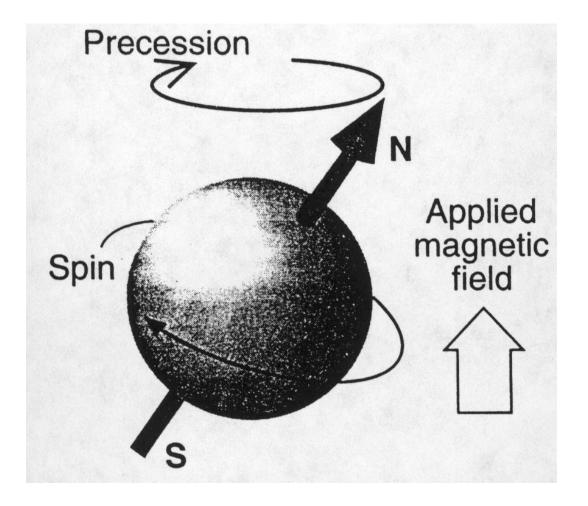
Wassersteifel Roman Signer 1986

MRI



- Water molecules have a natural frequency at which they can accept and radiate energy
- The hydrogen nuclei of water have a quantum mechanical property called *spin angular momentum*
- The spin states (ground, excited) of H nuclei diverge in energy level in the presence of a magnetic field
- Water protons absorb or give off quanta of energy to move between these energy levels
- The natural radiofrequency at which this occurs is a function of the magnetic field strength (Larmor freq).

In a magnetic field, protons precess at a natural frequency. Energy can go in or out of this system *only* at this frequency.



Excitation

- Radiofrequency energy at the Larmor frequency transfers to the water protons of the system.
- This does two things:
 - Synchronizes the precession of the protons
 - Introduces a transverse component to the magnetization (which one can detect and measure)
- When the pulse of RF input stops, the system (water in the magnet) will radiate radiofrequency energy for a little while, at the Larmor frequency

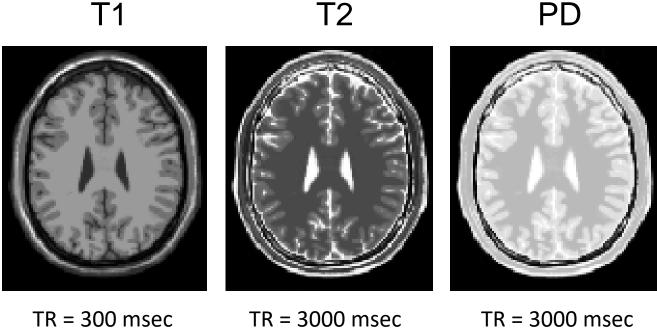
Relaxation: T1, T2, T2*

- With time (described by T1) the excited dipoles will relax back into alignment with the field.
- Before that happens, their precession will get out of phase (described by T2) and no more signal will be available.
- But even before that, local imperfections in the field will probably cause even faster dephasing (described by T2*).

T1 relaxation occurs at different rates in different tissues

- T1 relaxation is slowest in a homogeneous sample of water (e.g. in CSF)
- T1 relaxation is faster in lipid-rich white matter than in gray matter
- Differential relaxation is the key to tissue contrast in MRI

Together, the values of TR and TE emphasize different tissue parameters.



T2

PD

TR = 300 msec TE = 20 msec TE = 120 msec

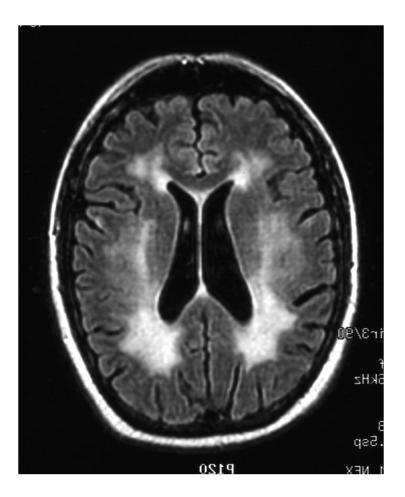
TE = 20 msec

A **short** TR and **short** TE emphasizes T1 contrast.

A long TR and long TE emphasizes T2 contrast.

A long TR and short TE emphasizes proton density contrast.

FLAIR : FLuid-Attenuated Inversion Recovery – T2 weighting with black spinal fluid



The MRI signal is rich

- Proton density
- Relaxation times (T1, T2)
- Magnetic field distortion (T2*)
- Flow
- Diffusion
- Chemical shift
- Magnetization transfer
 -)

Magnetic resonance angiography "MRA"

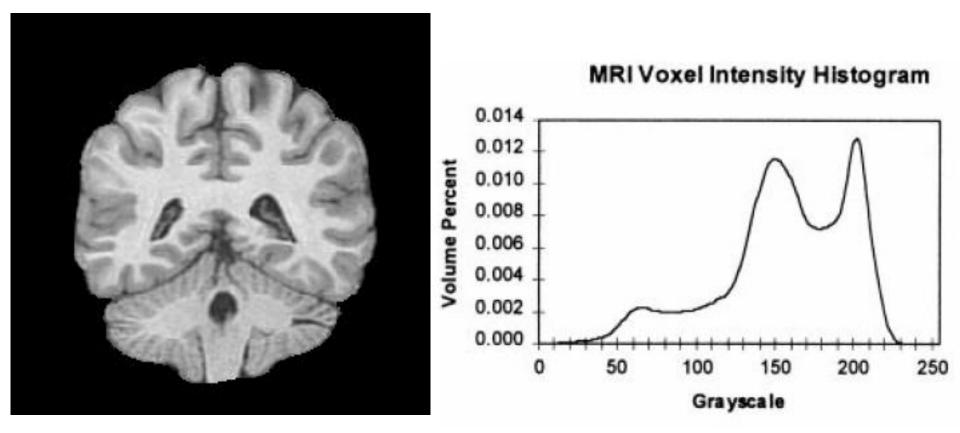


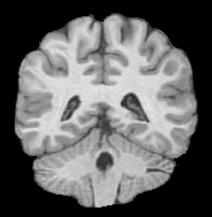
The "economy" of MRI

- In MRI, signal is the sum of the longitudinal magnetization of the protons in the field of view
- This is a like fixed budget, to be spent to obtain some combination of:
 - Better spatial resolution
 - Better signal to noise ratio (SNR)
 - Reduced imaging time
- There are always trade-offs!
- Some pulse sequences are more "economical" than others
- Advances in MRI are often in the form of a smarter pulse sequence, i.e. software-driven

Efficient pulse sequences

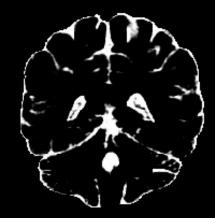
- Maximize the amount of time spent listening for the signal
- Maximize the number of protons in the sample that are being put to work at any one time
- Optimize the relationship between TR and TE to maximize signal
- We use two efficient sequences extensively: MP-RAGE and EPI GRE fMRI

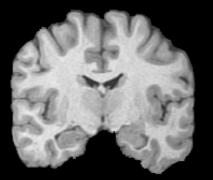




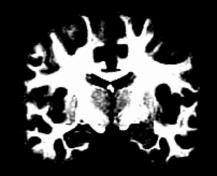




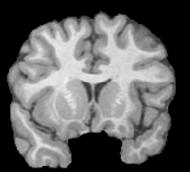


















Artifacts

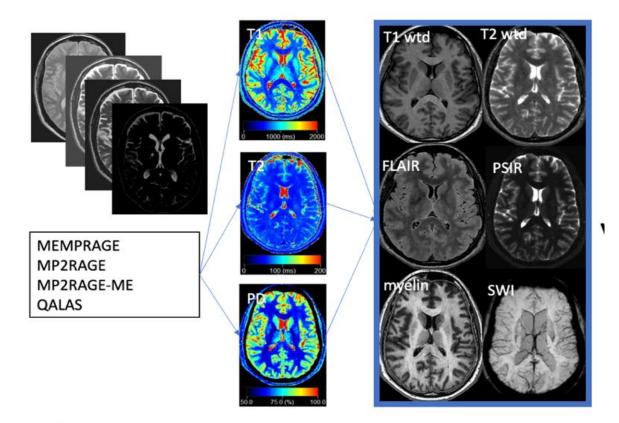
Artifacts

Motion degrades images Flow (blood, CSF)

Other issues

- Signal doesn't have absolute meaning
 - "T1-weighted images"
- Complex interactions of signal sources
- Inherently low signal

MR relaxometry MR fingerprinting

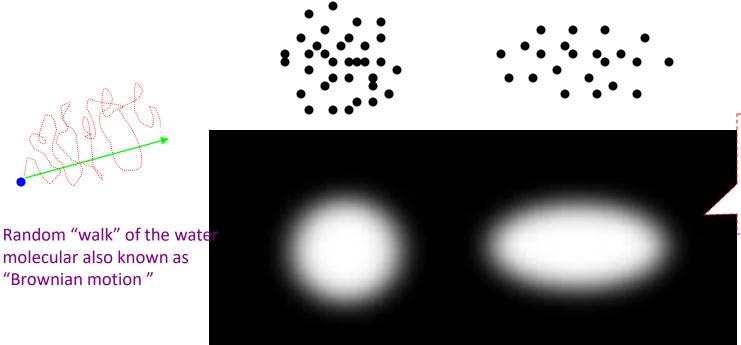


Rapid Relaxometry sequences (~6-8 min)

Tissue-specific images of MRI parameters Synthesized parameter-weighted Images for diagnostic evaluation And for cross-site harmonization

Diffusion Imaging

Diffusion



Ellipsoid = Probability of Diffusion Distribution

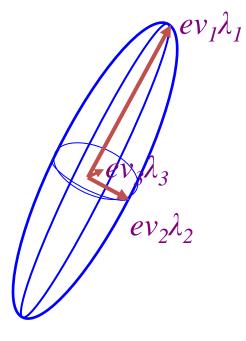
Isotropic Diffusion

Anisotropic Diffusion

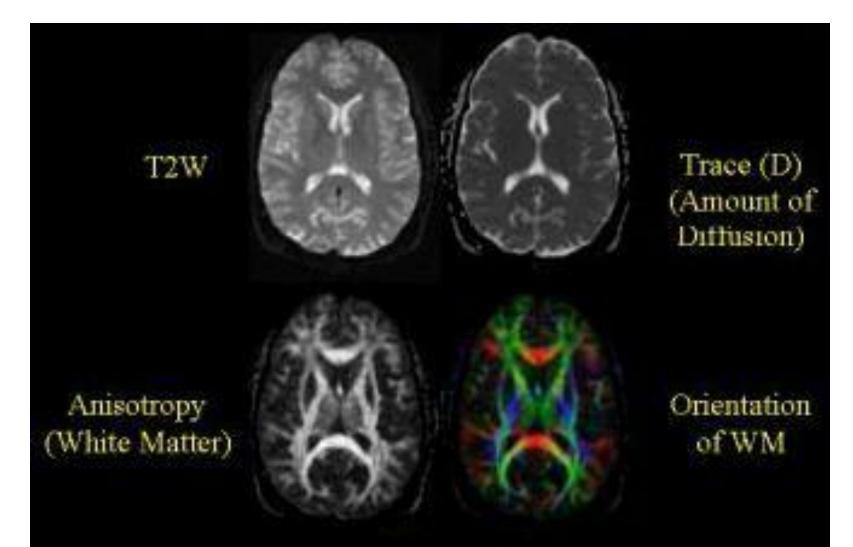
Diffusion eigenvectors

Diagonalization of this tensor provides three eigenvectors (ev_1 , ev_2 and ev_3) with three corresponding eigenvalues (λ_1 , λ_2 and λ_3)

$$D = \begin{pmatrix} D_{xx} & D_{xy} & D_{xz} \\ D_{xy} & D_{yy} & D_{yz} \\ D_{xz} & D_{yz} & D_{zz} \end{pmatrix} = E^{T} \begin{pmatrix} \lambda_{1} & 0 & 0 \\ 0 & \lambda_{2} & 0 \\ 0 & 0 & \lambda_{3} \end{pmatrix} E$$



Diffusion Tensor Images



Diffusion imaging

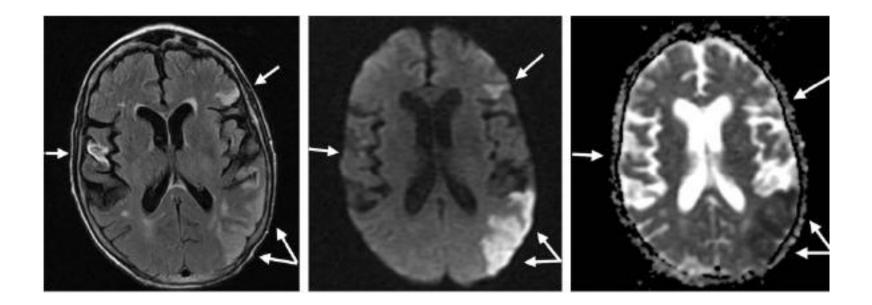
- Parameters neurologists are used to seeing
 - Diffusion-weighted image
 - Apparent diffusion coefficient ADC
- Parameters neuroscientists are used to seeing
 - Diffusion fractional anisotropy FA

A measure of how constrained water is to diffuse in only certain directions

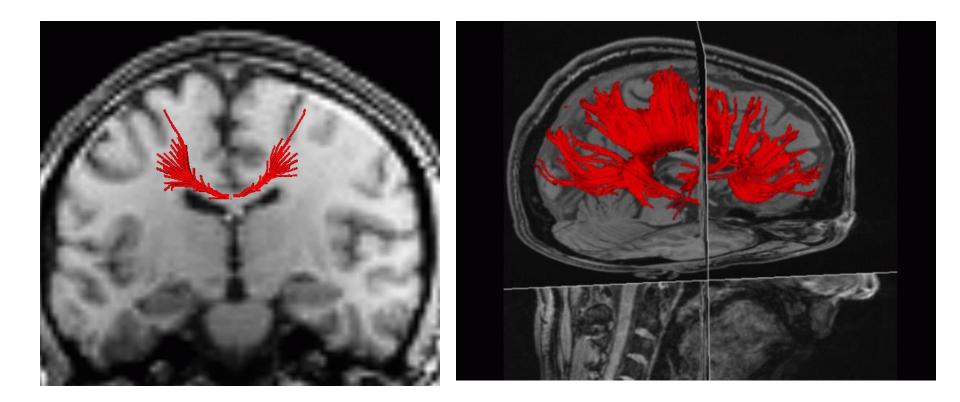
– Diffusion principal eigenvector

The axis along which water diffuses most freely

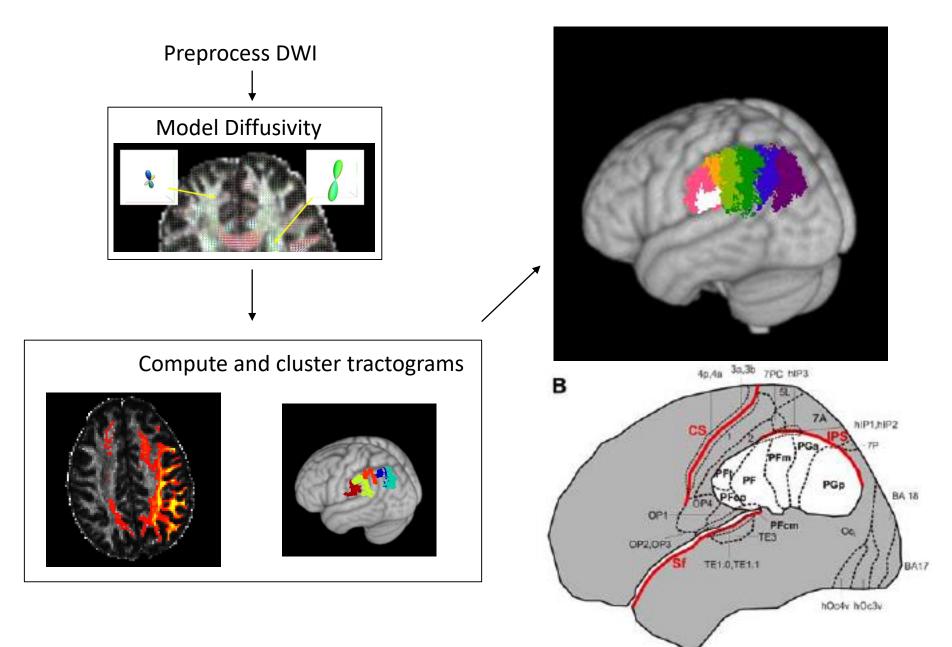
Detecting acute stroke with diffusion MRI



DTI Tract Tracing



In vivo Connectivity-based Cortex Parcellation



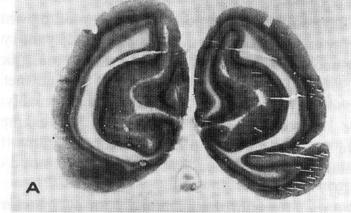
Functional Magnetic Resonance Imaging (fMRI)

Physiological basis of fMRI

Brain activity is imaged *indirectly*, through parameters related to metabolic substrate delivery.

Neurovascular coupling

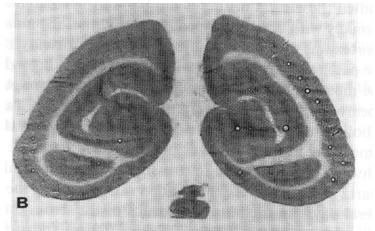
Synaptic electrochemical activity DEPENDS ON Maintenance of membrane potentials WHICH DEPENDS ON Metabolism of glucose WHICH DEPENDS ON Substrate delivery via blood flow



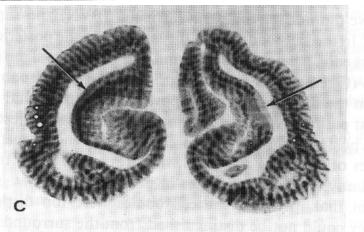
Eyes open

In theory, metabolic mapping techniques can resolve cortical processes at the level of cortical columns.

2-deoxyglucose: visual stim in cats

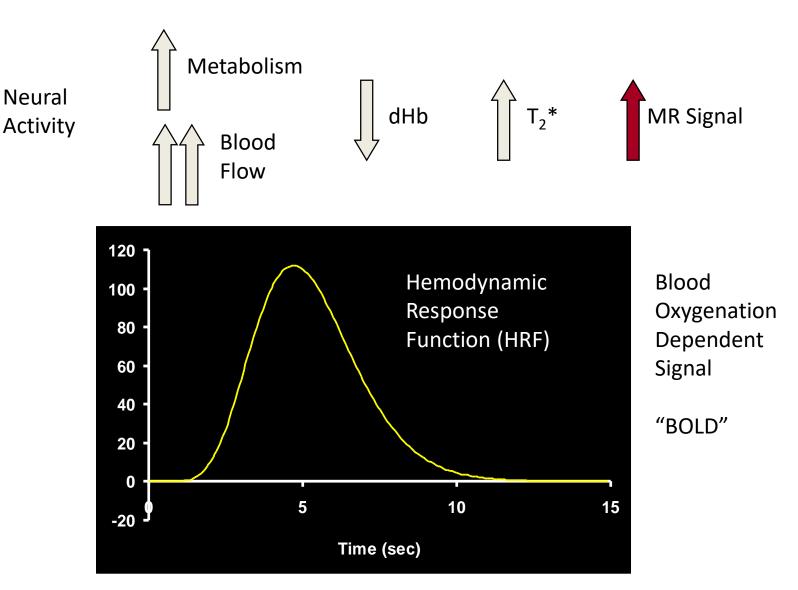


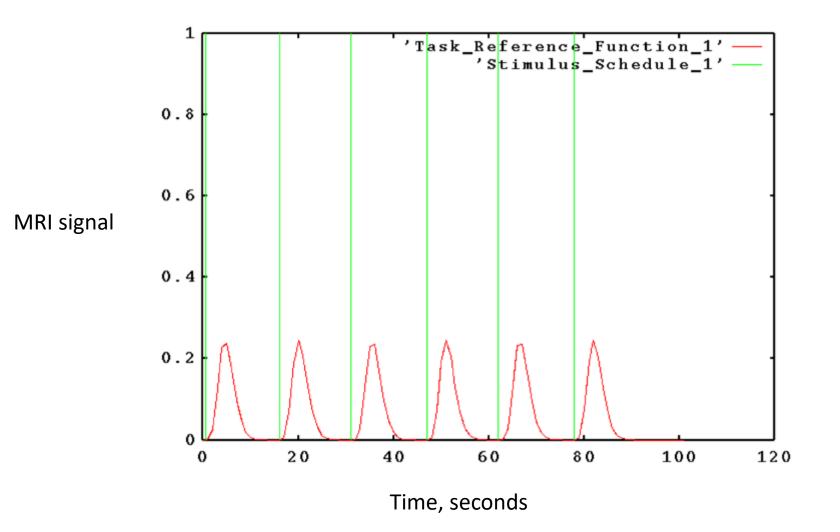
Eyes closed



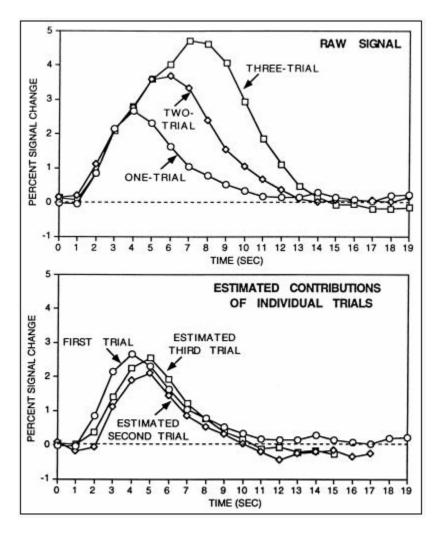
One open, one closed

Basis of fMRI signal

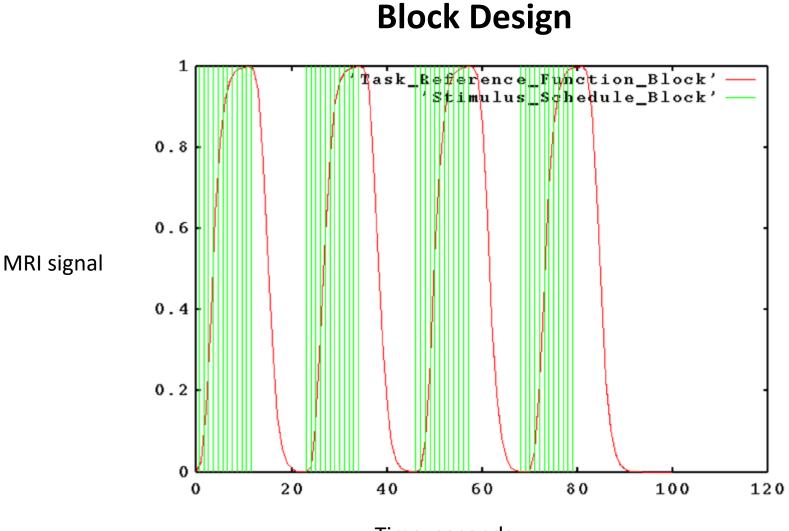




HRF sums linearly over trials

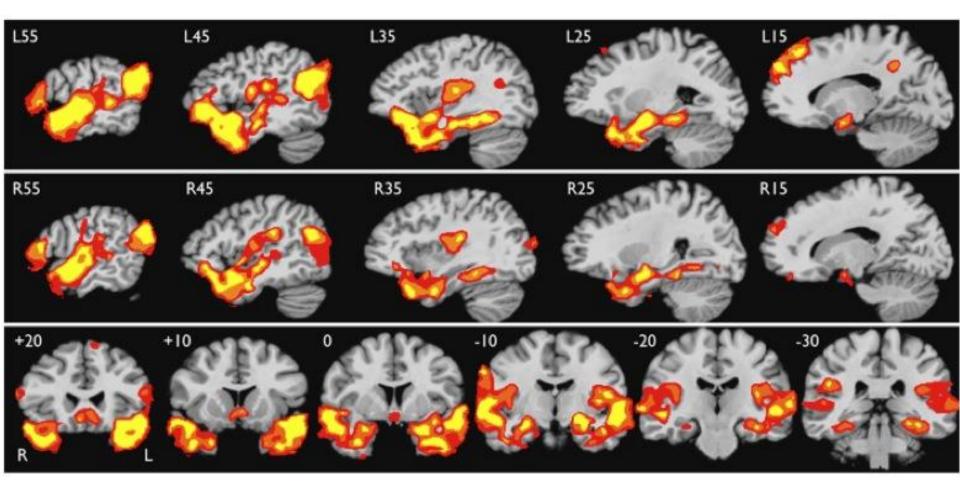


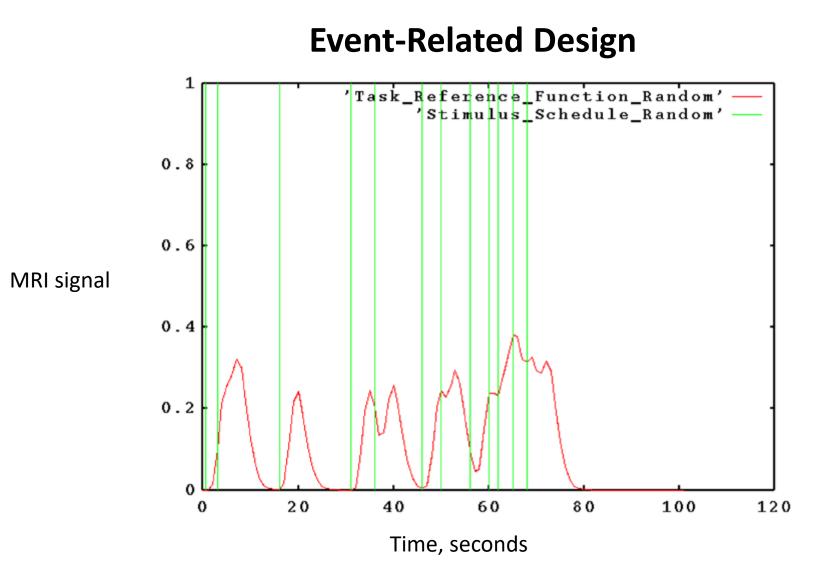
A. Dale and R. Buckner Hum Brain Mapp 5:329 1997

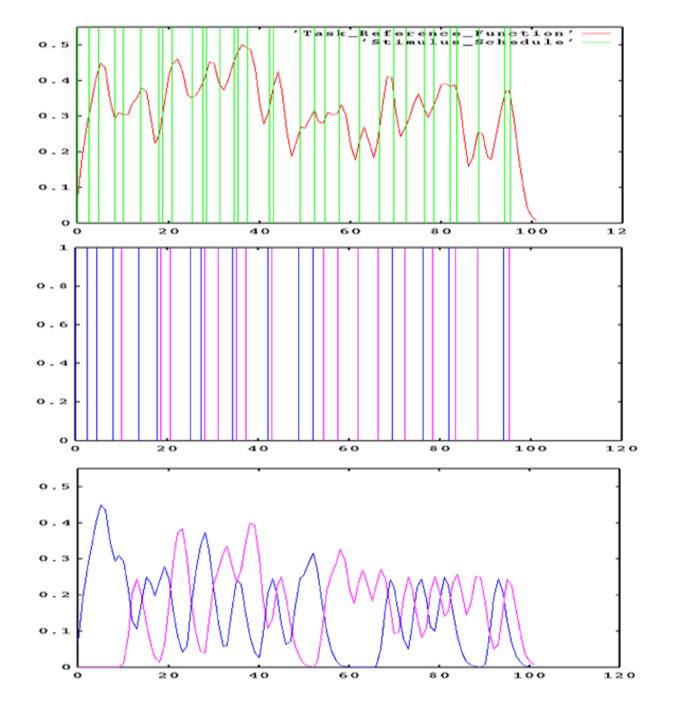


Time, seconds

Activation of the anterior temporal lobes during listening to words.





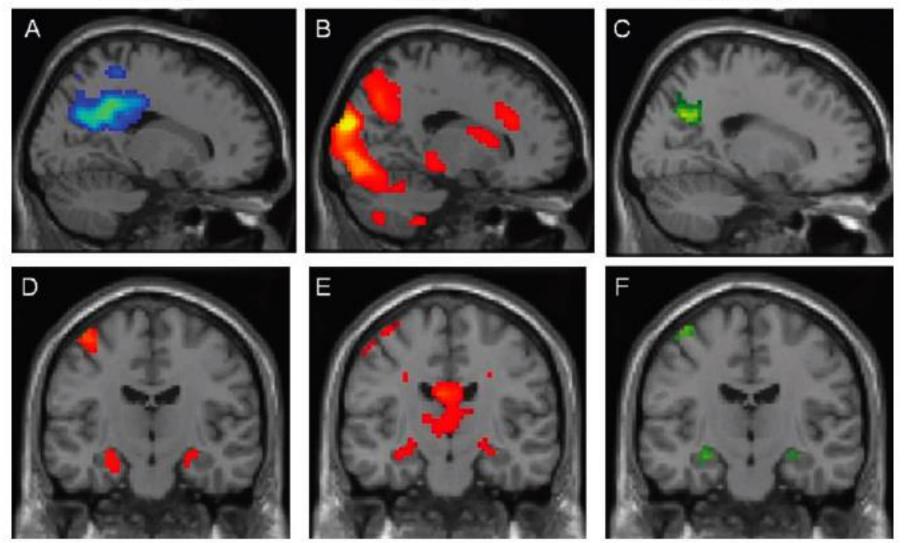


Activation of hippocampus during successful memory encoding and retrieval

Encoding

Retrieval

Conjunction



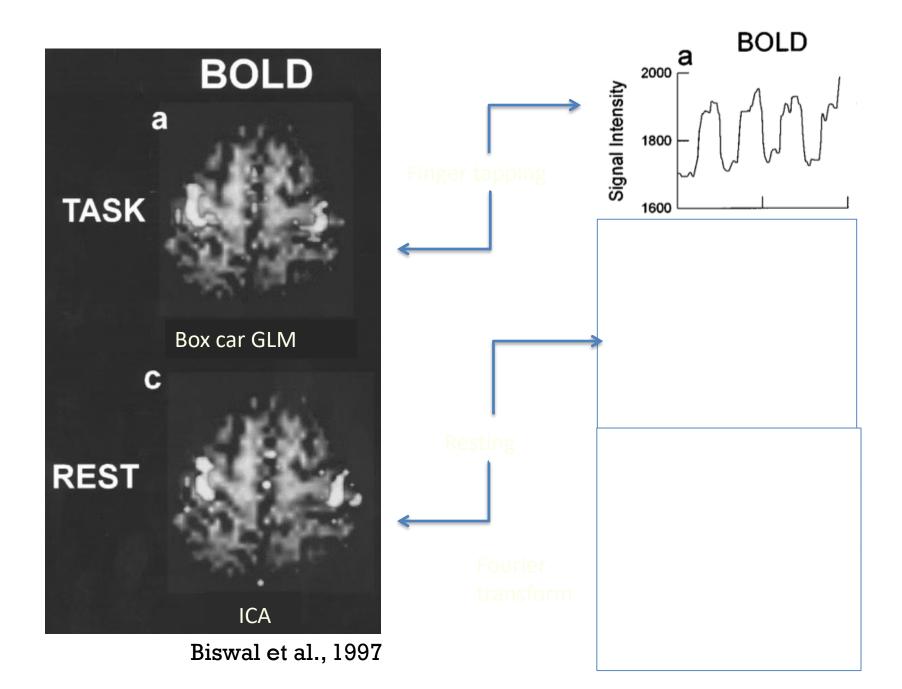
Two fMRI paradigms

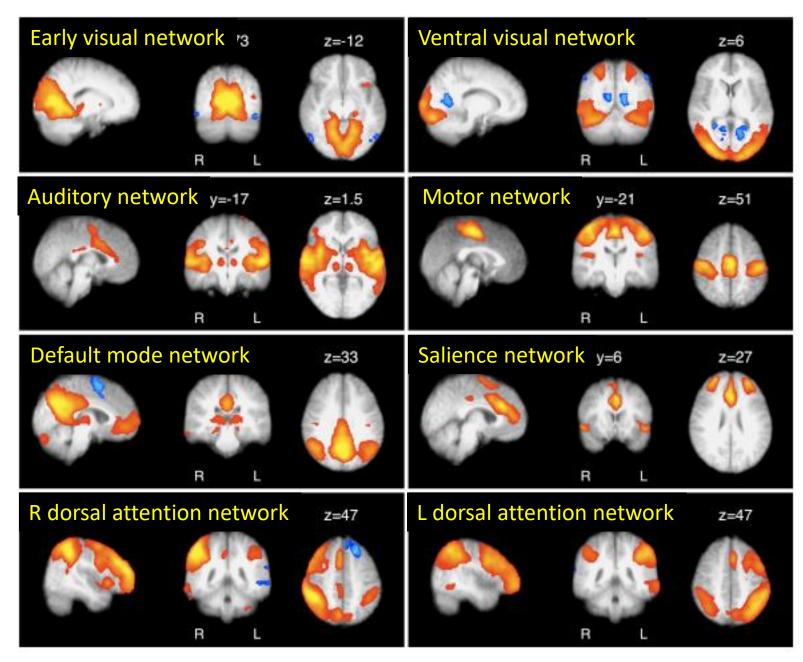
• Activation paradigm

- Signal model: predicted BOLD timecourse

• Functional connectivity paradigm

- Signal model: correlated signal timecourses

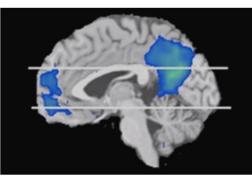




Damoiseaux et al 2006

"Default" Mode Network

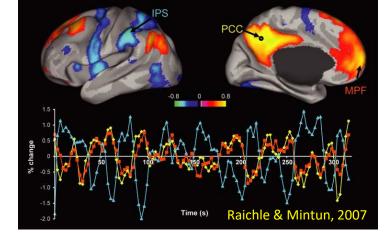
Relevance to adaptive behavior



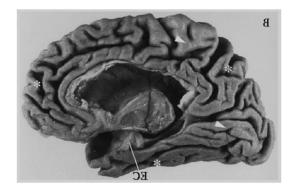
Deactivation DMN

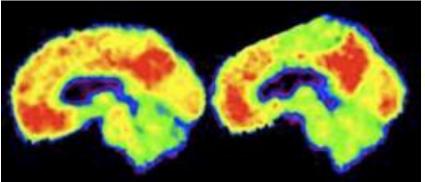


Activation DAN



Relevance to disease





ty, 2007

Summary: functional connectivity paradigm

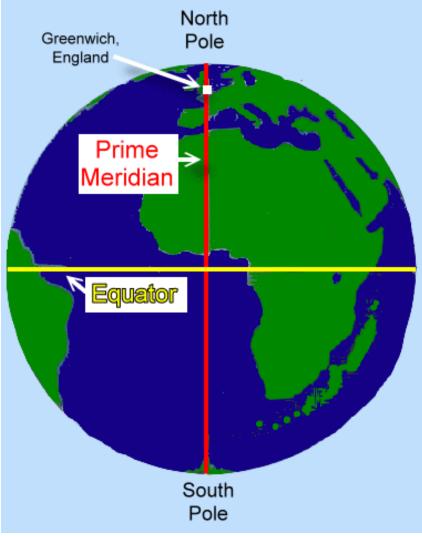
- BOLD fluctuations formerly thought to be "noise" are correlated across distant sites.
- Analysis of functional connectivity "at rest" identifies consistent "intrinsic networks"
- Functional connectivity is grounded in anatomic connectivity
- Intrinsic networks may reflect a fundamental level of large-scale physiologic organization

Outline

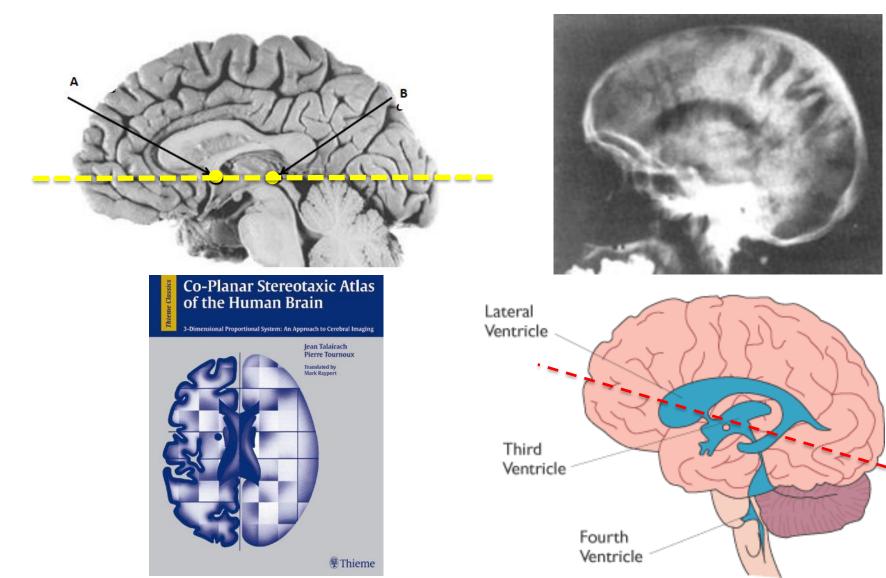
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Anchoring standard space

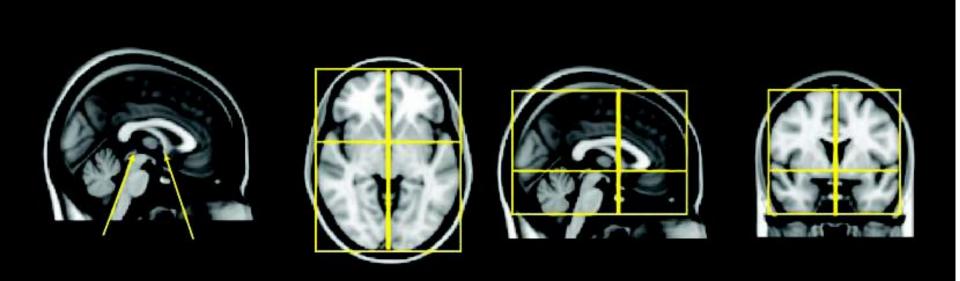




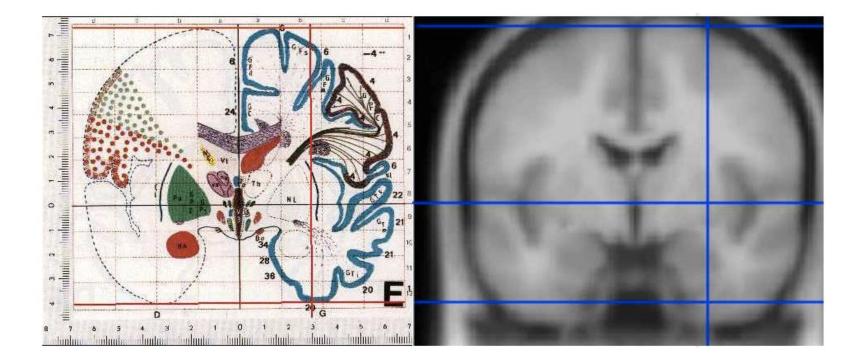
Anchoring standard space The brain "equator" is the intercommisural line

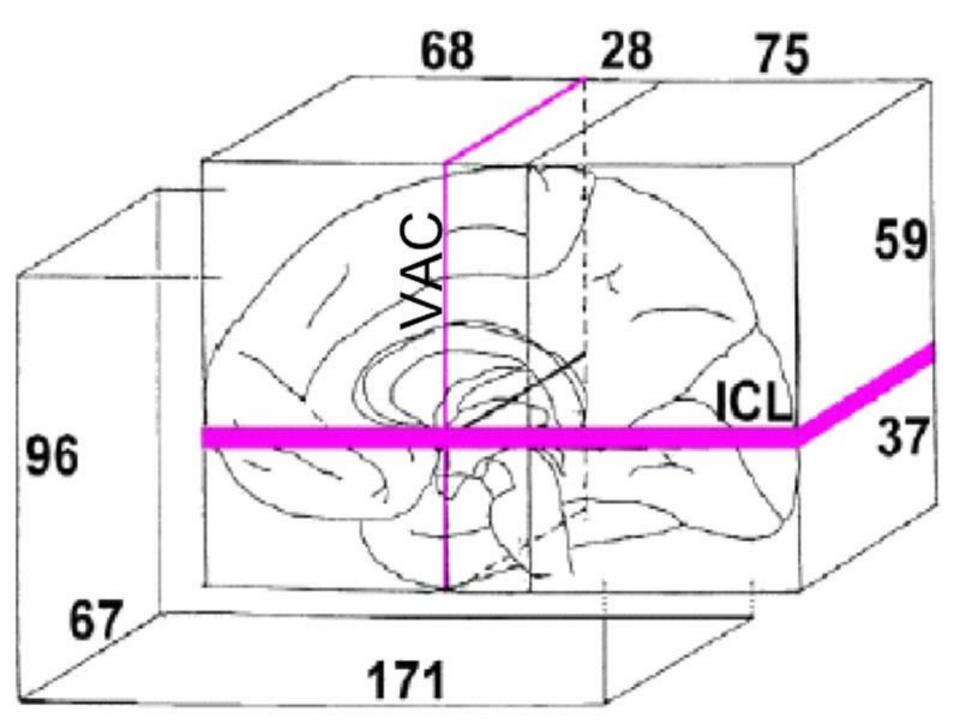


Talairach Space

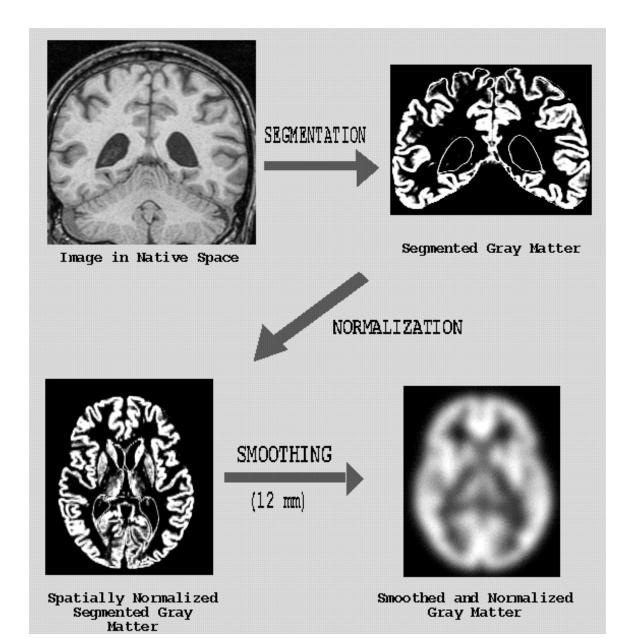


Talairach Space Montreal Neurological Institute (MNI) space





Voxel-based morphometry



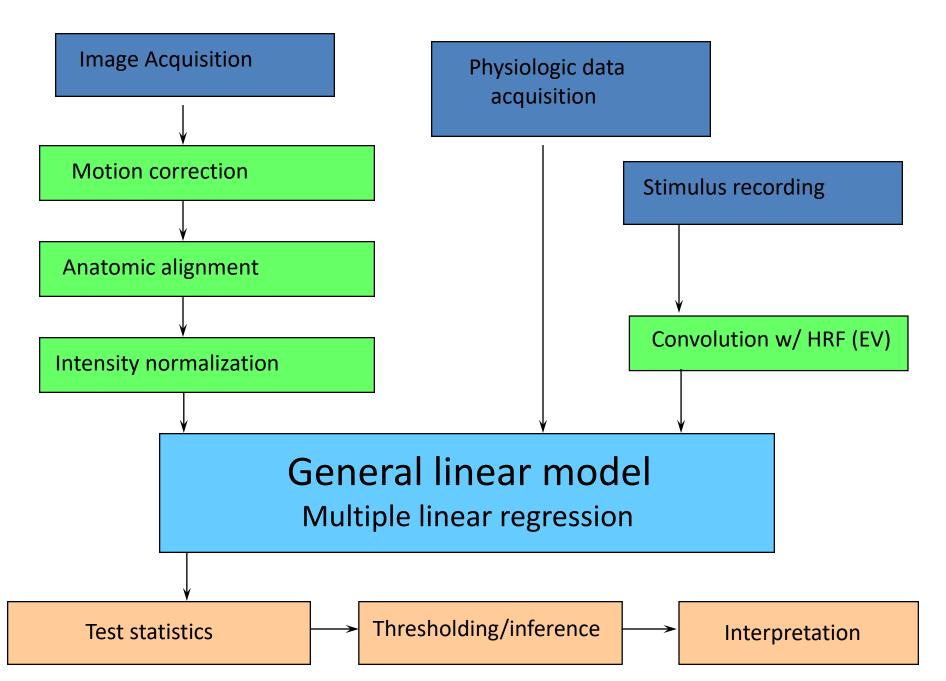
Limits on interpretation of spatial normalization

- Anatomic variability in Talairach space
 1.5 cm
- Irreducible cortical variability
 - This variability is itself variable
 - Cytoarchitecture adds another layer of variability
- Not always easy to assign results to one location
 - Local maximum of statistic field, vs center of mass
 - Extent-based statistics vs Magnitude-based statistics
- fMRI data are typically smoothed for SNR reasons

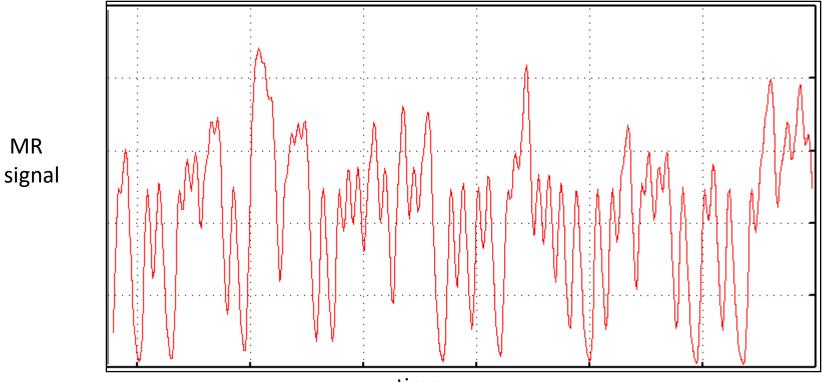
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fMRI Data Post-Processing



fMRI time series



MR

time

fMRI signal reflects multiple simultaneous effects

- Task
- Physiologic fluctuations
 - Cardiac pulsatility
 - Respiratory effects
 - CSF flow/pulsation
- Head motion/spin history
- Slow drifts
- Thermal noise

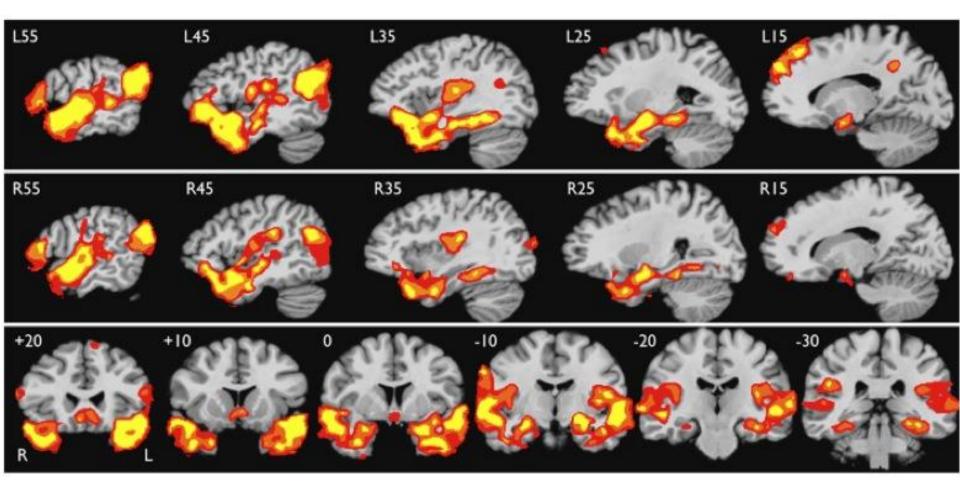
Statistical analysis

- Problem: at each voxel, estimate the task effect in the presence of other effects
- Technique: multiple linear regression supported by the general linear model:

$$\mathbf{Y} = \boldsymbol{\beta}_1 \mathbf{X}_1 + \boldsymbol{\beta}_2 \mathbf{X}_2 + \dots + \boldsymbol{\varepsilon}$$

- The task effect is estimated by regression coefficient (β) and tested with a *t* statistic

Activation of the anterior temporal lobes during listening to words.



Summing Up

- MRI approaches to brain structure and function continue to diversify and become more powerful, driven mostly by conceptual and software innovation.
- Multispectral/multimodal approaches are now common, clinically and in research.
- Imaging approaches are beginning to analyze brain activity in terms of natural systems structure (columns, fields, large scale systems)
- Most of the techniques have not (YET) found their way into clinical application

