

# Functional MRI Contrast and Limits of Spatial and Temporal Resolution

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<http://fmrif.nimh.nih.gov>



# Functional Contrast

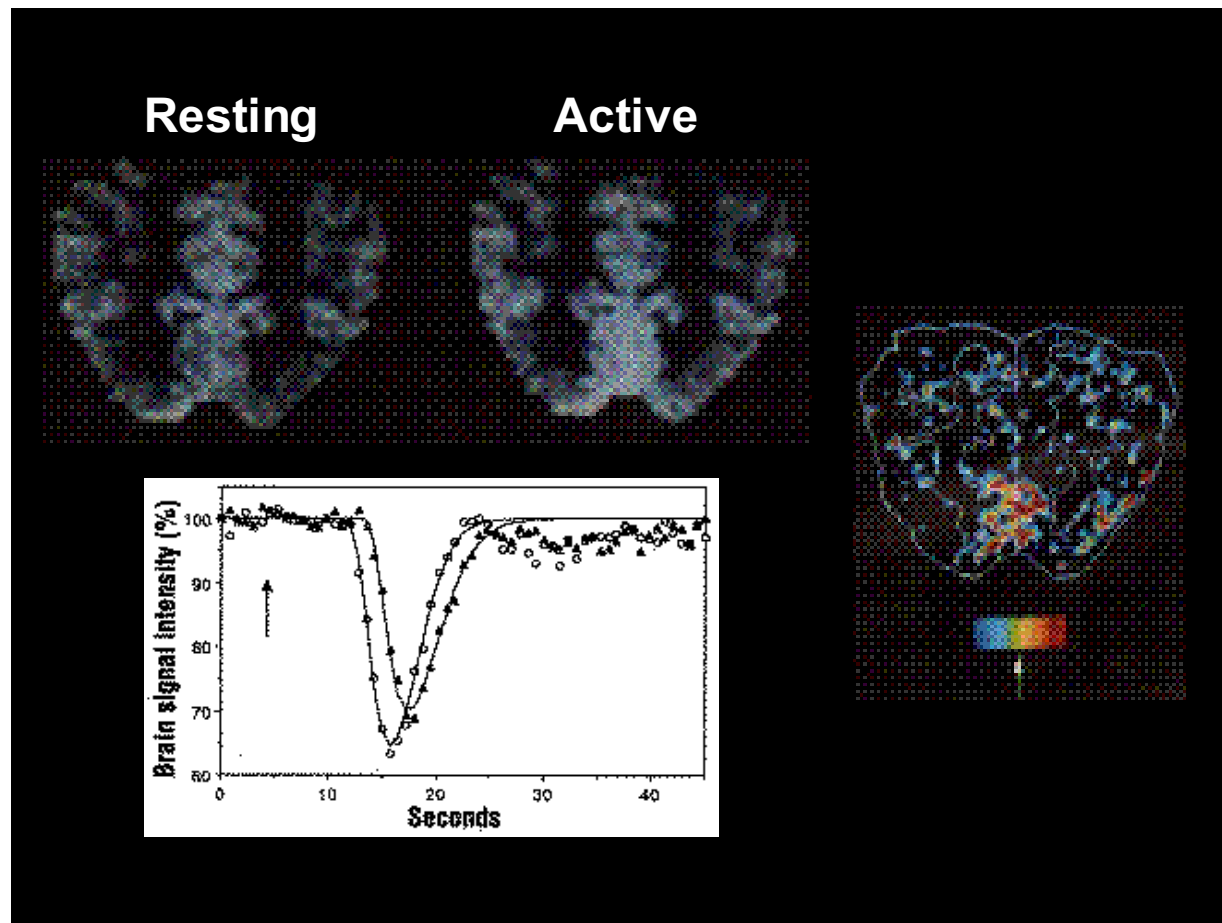
- **Volume (gadolinium)**
- **BOLD**
- **Perfusion (ASL)**
- **$\Delta\text{CMRO}_2$**
- **$\Delta\text{Volume (VASO)}$**
- **Neuronal Currents**
- **Diffusion coefficient**
- **Temperature**

# Functional Contrast

- **Volume (gadolinium)**
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# Blood Volume Imaging

Susceptibility Contrast agent bolus injection and time series collection of T2\* or T2 - weighted images



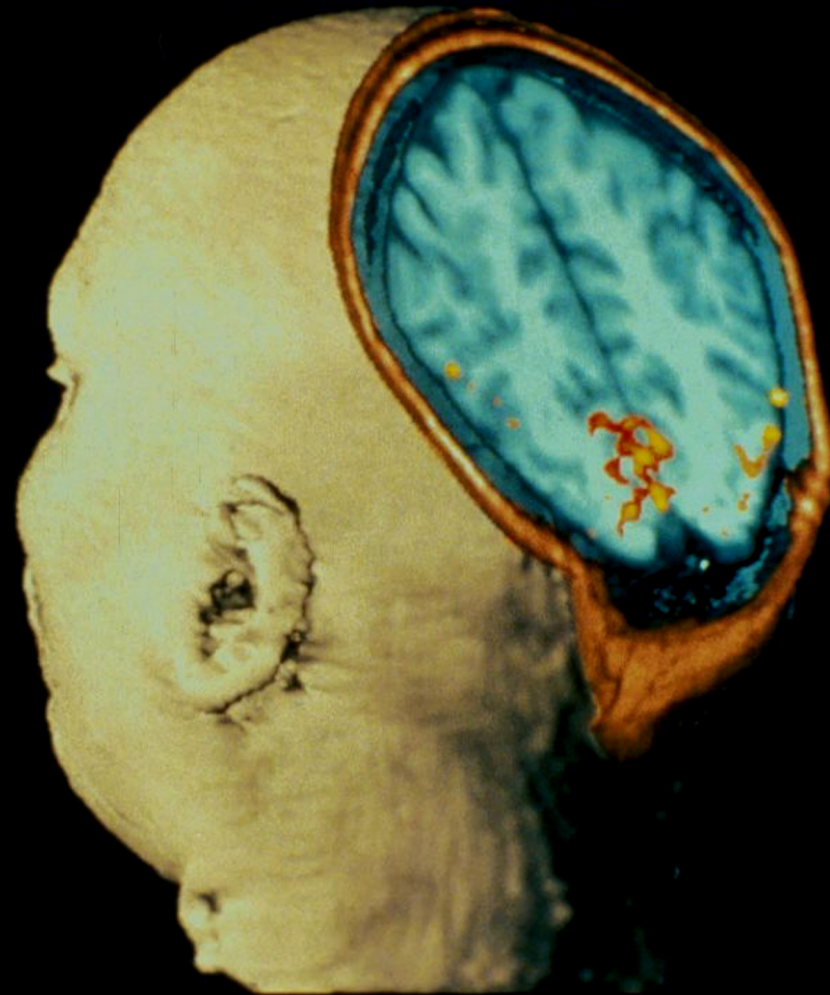


# Photic Stimulation

MRI Image showing  
activation of the  
Visual Cortex

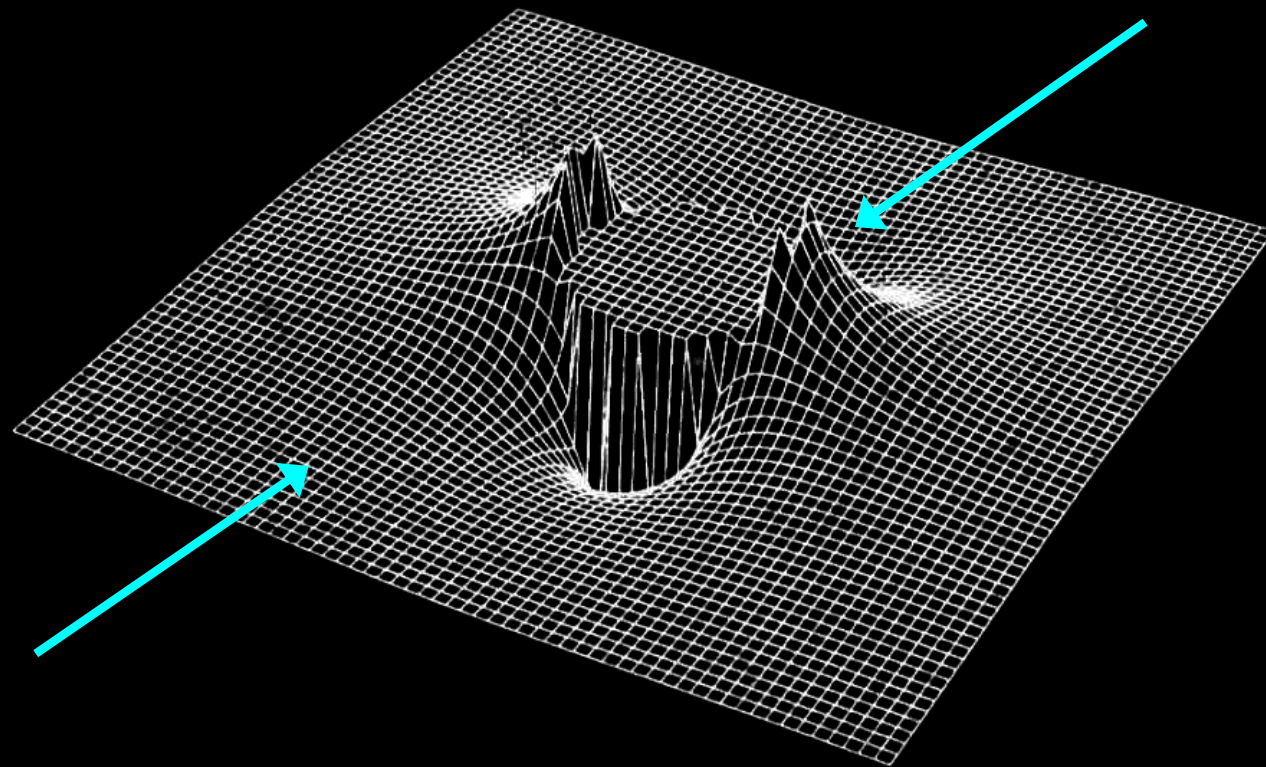
From Belliveau, et al.  
Science Nov 1991

MSC - perfusion

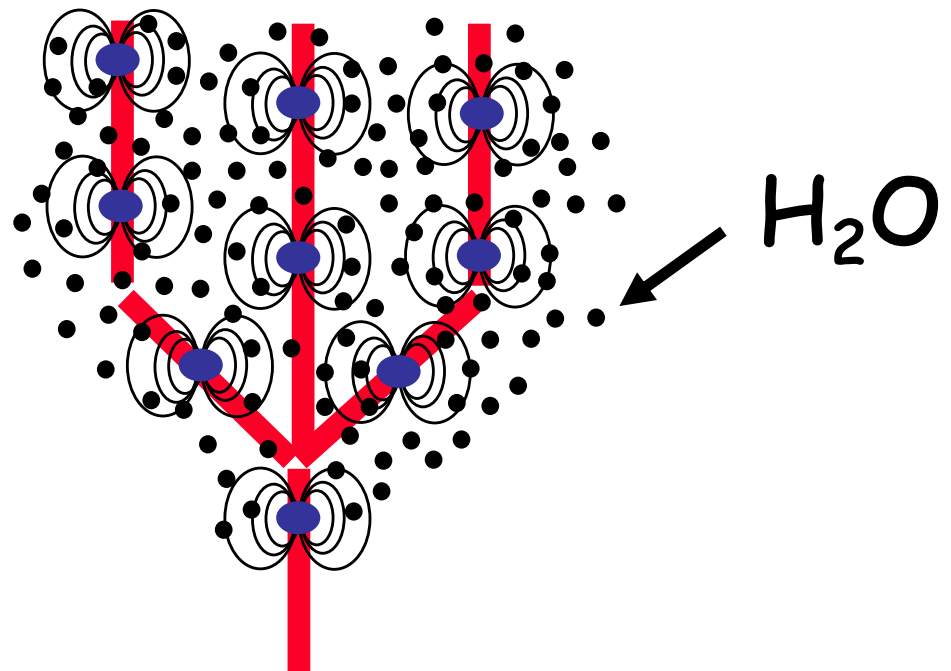
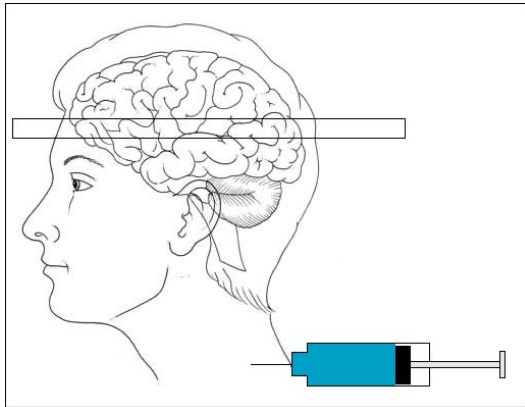


# Susceptibility Contrast

Susceptibility-Induced Field Distortion in the Vicinity of a Microvessel  $\perp$  to  $B_0$ .



# Addition of paramagnetic compound to blood



Courtesy Larry Wald

# Functional Contrast

- Volume (gadolinium)
- **BOLD**
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**Cerebral Tissue Activation**



**Local Vasodilatation**



**Increase in Cerebral Blood Flow and Volume**



**Oxygen Delivery Exceeds Metabolic Need**



**Increase in Capillary and Venous Blood Oxygenation**



**Decrease in Deoxy-hemoglobin**

*Deoxy-hemoglobin: paramagnetic  
Oxy-hemoglobin: diamagnetic*



**Decrease in susceptibility-related intravoxel dephasing**

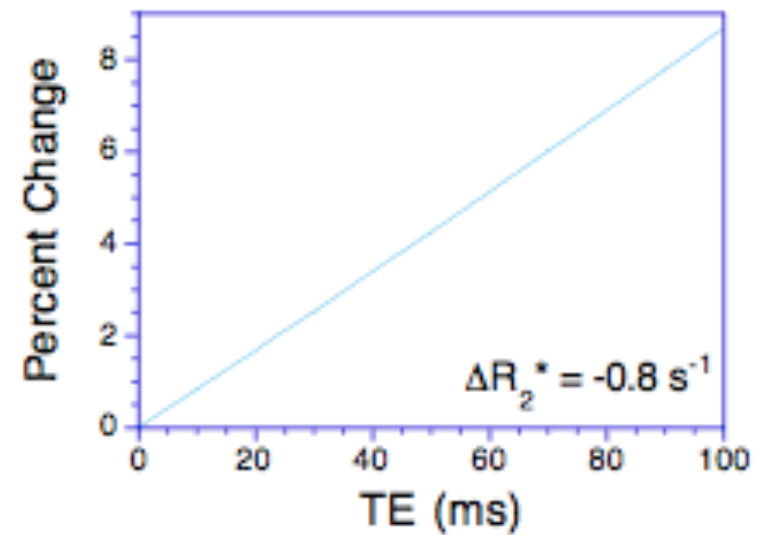
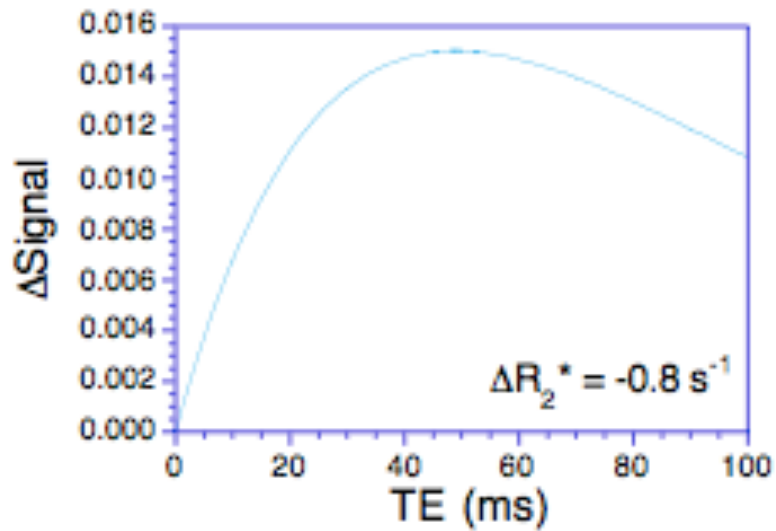
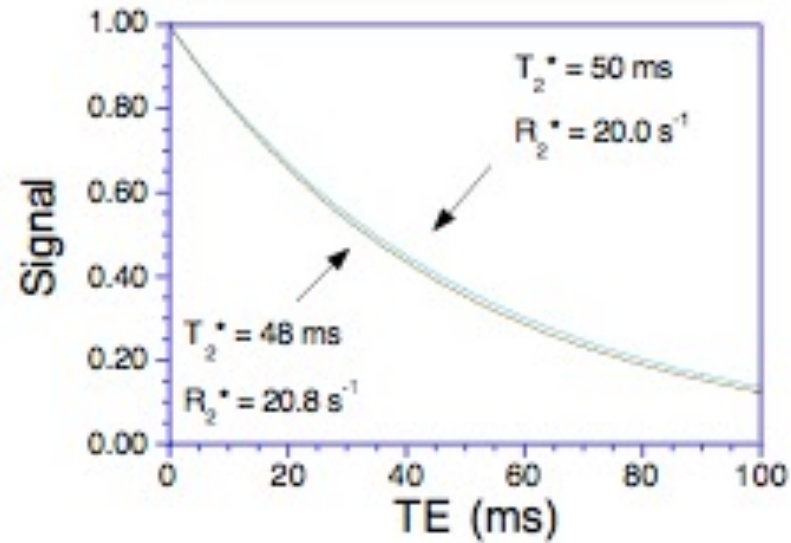


**Increase in T2 and T2\***



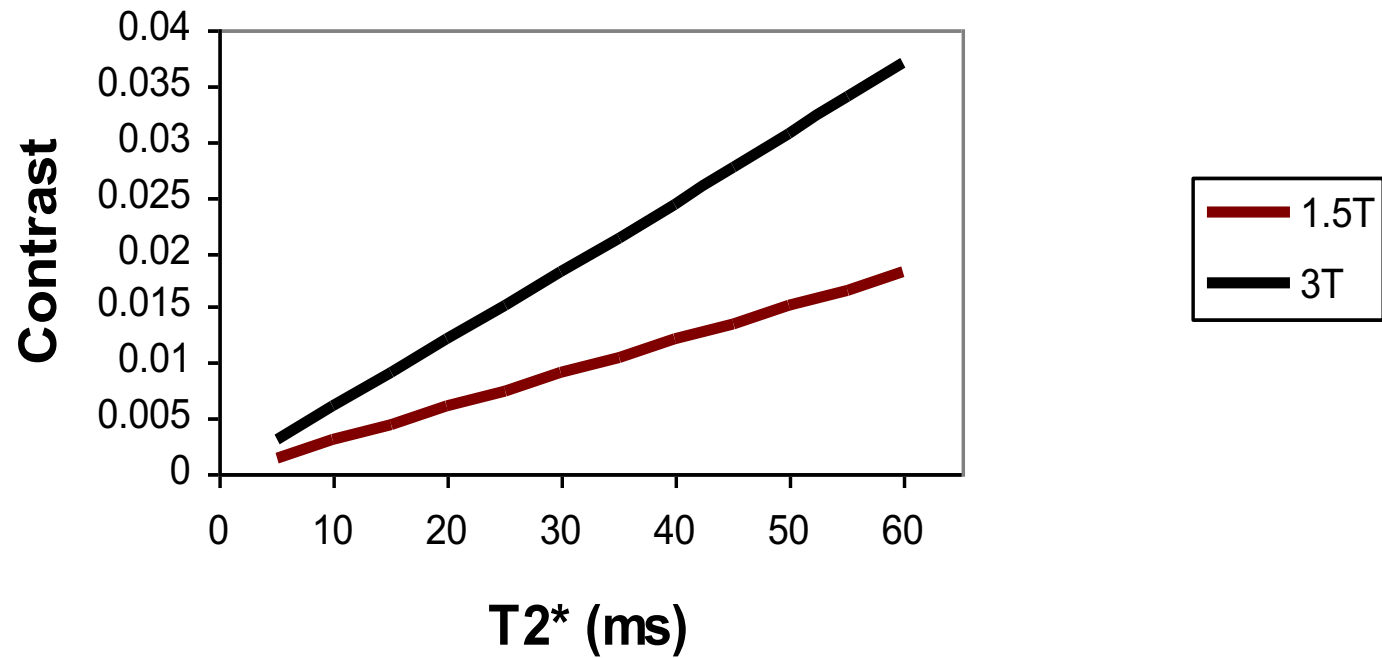
**Local Signal Increase in T2 and T2\* - weighted sequences**

## Characteristics of the BOLD signal: T2\* effect.





### Functional Contrast at Optimal TE



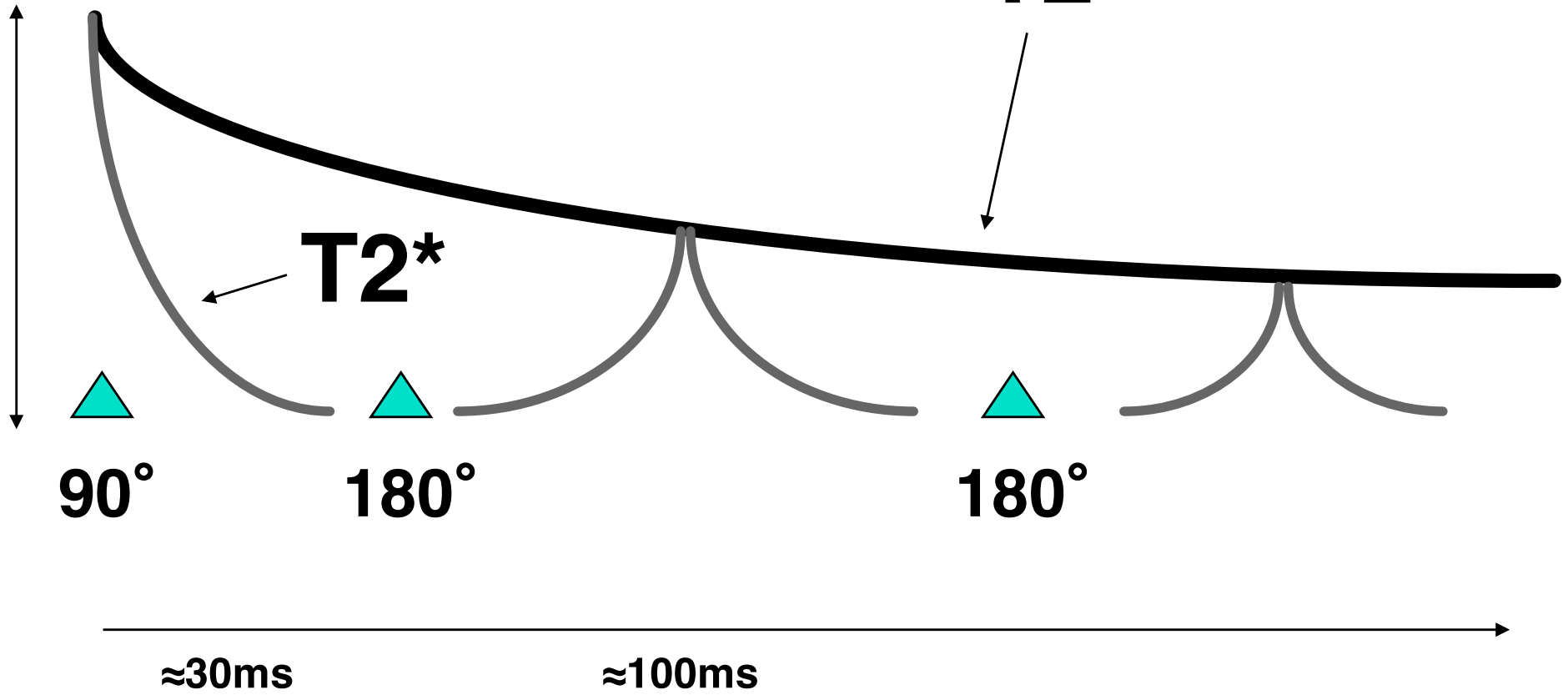


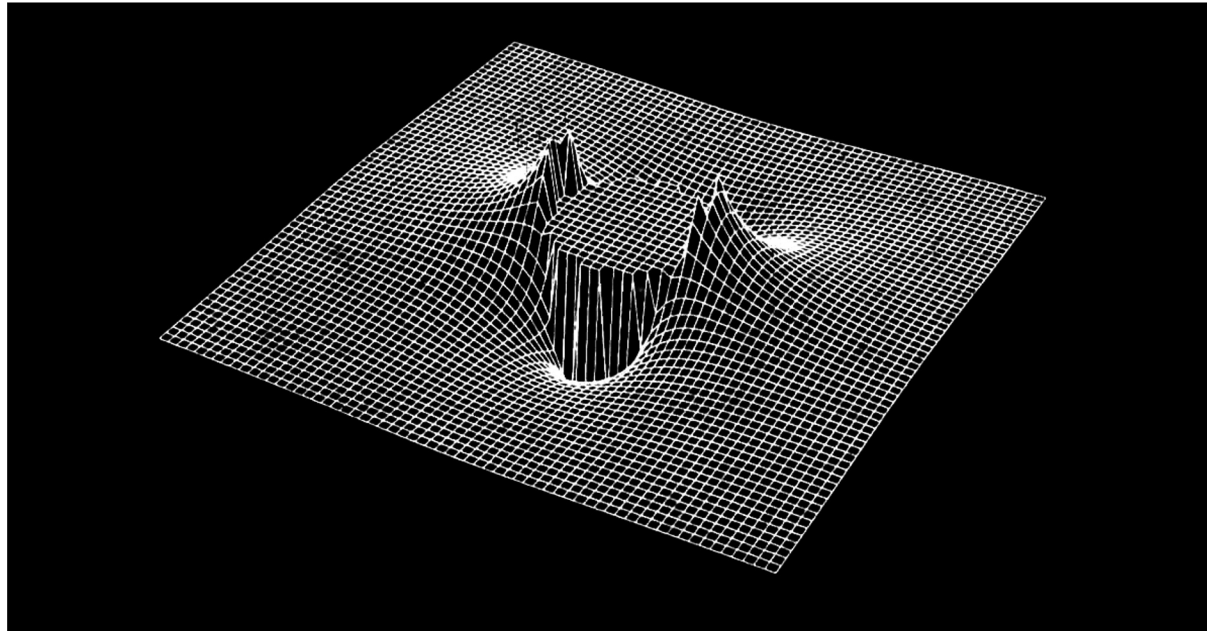
# **Spin-Echo vs. Gradient-Echo**

**fMRI**

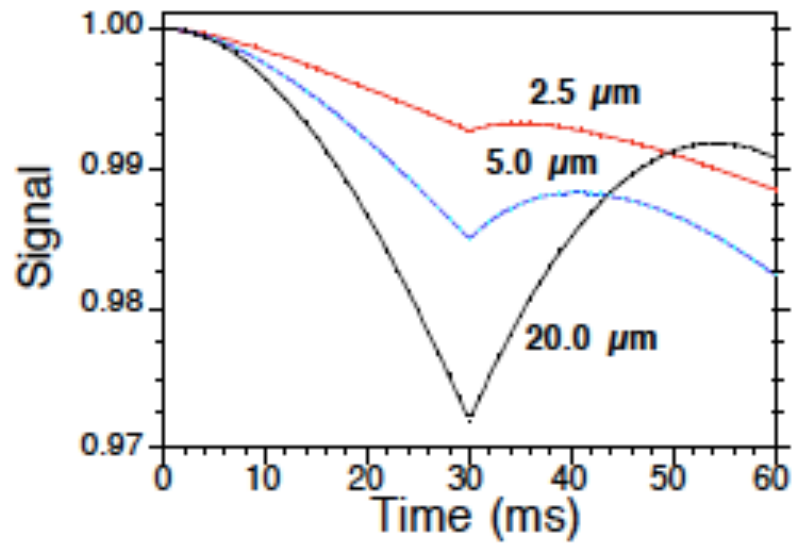
# Transverse Relaxation

transverse magnetization

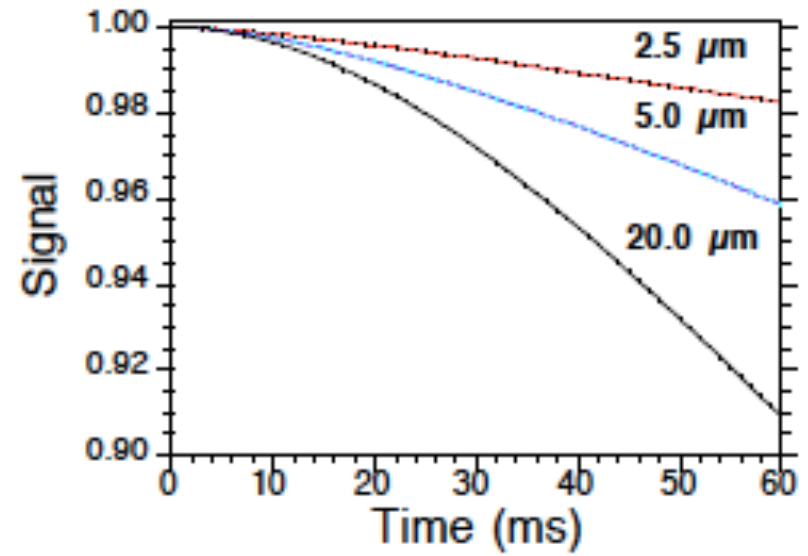




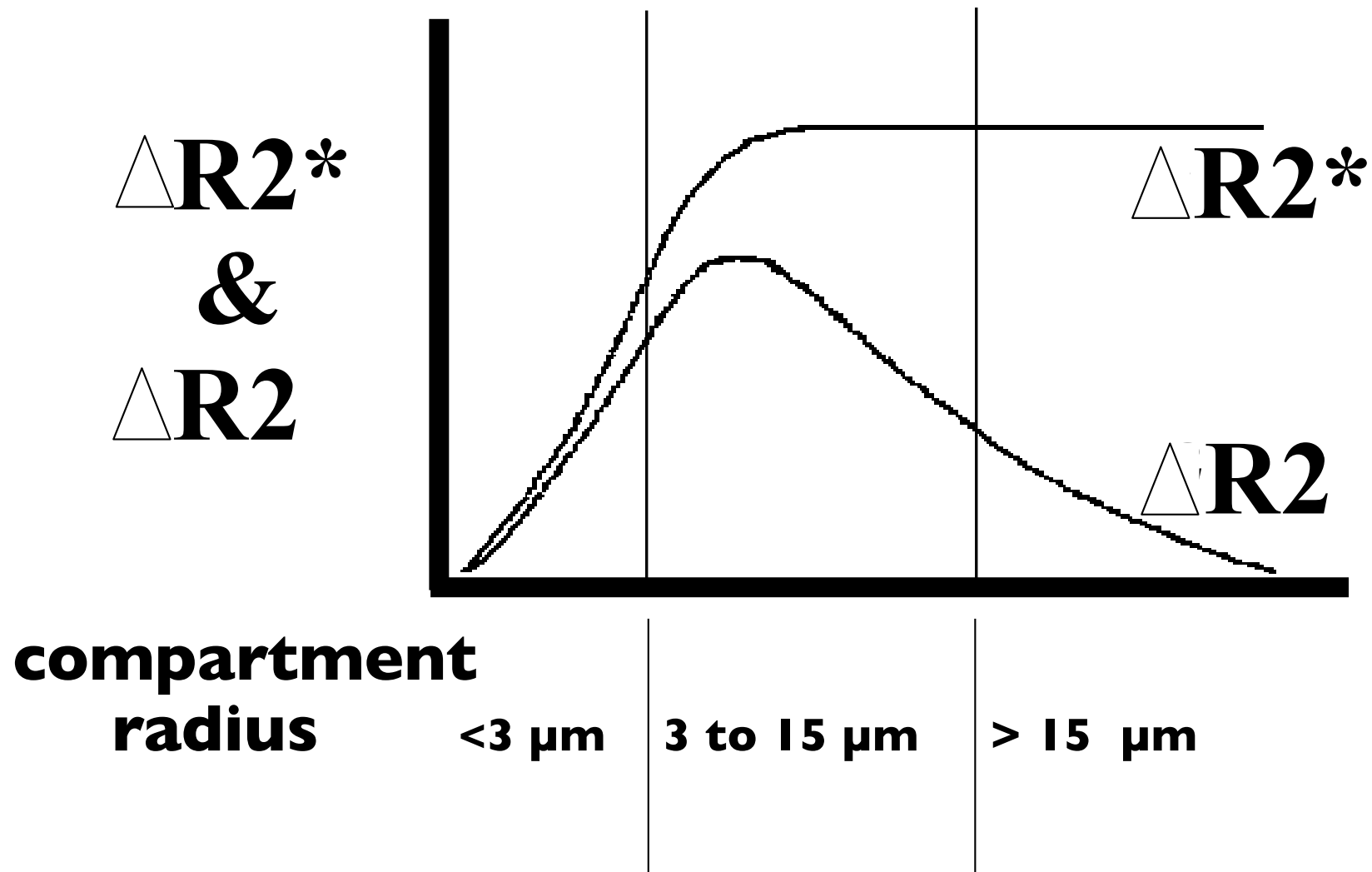
**Spin-Echo**



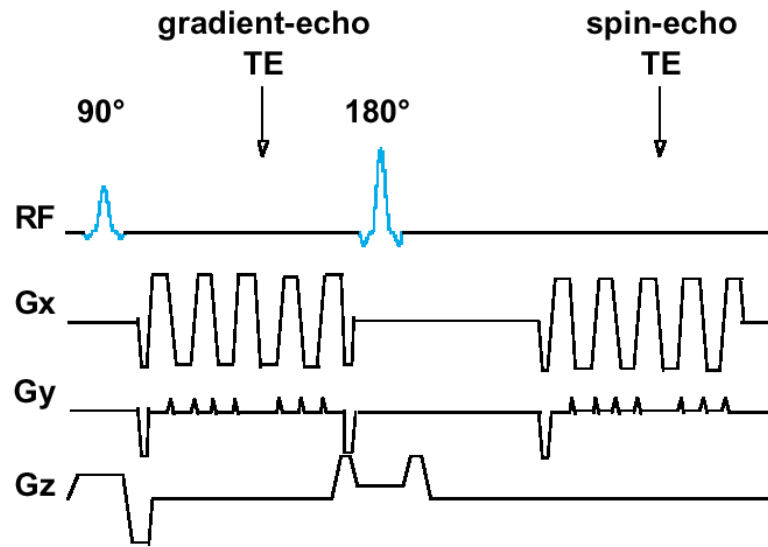
**Gradient-Echo**



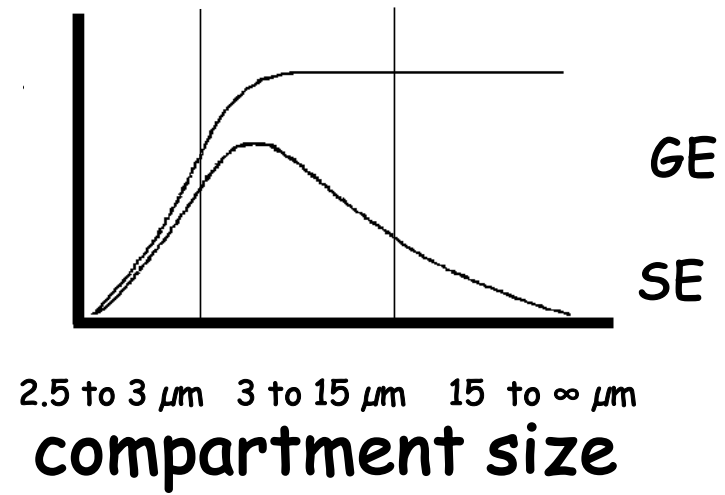
# Spin echo vs. Gradient echo



## Bolus Injection of Gadolinium

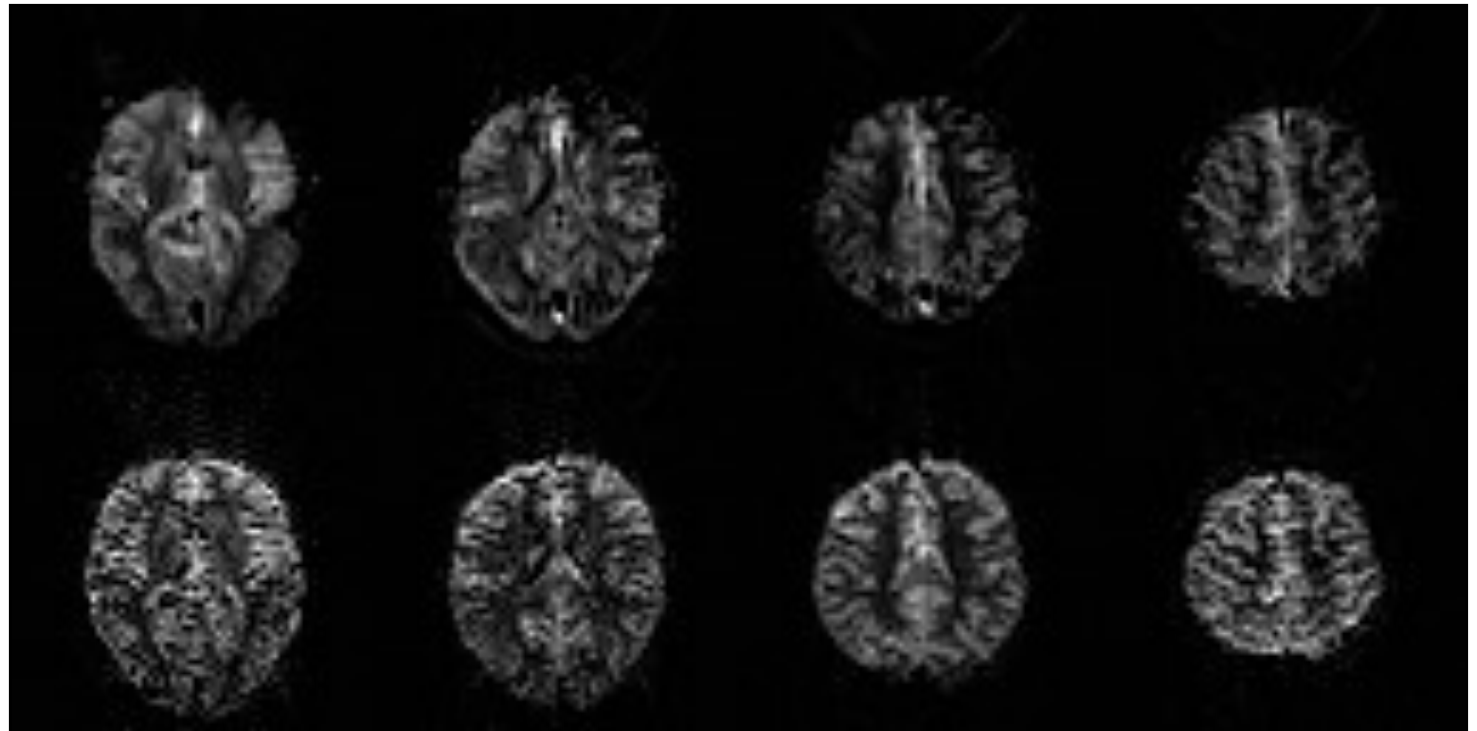


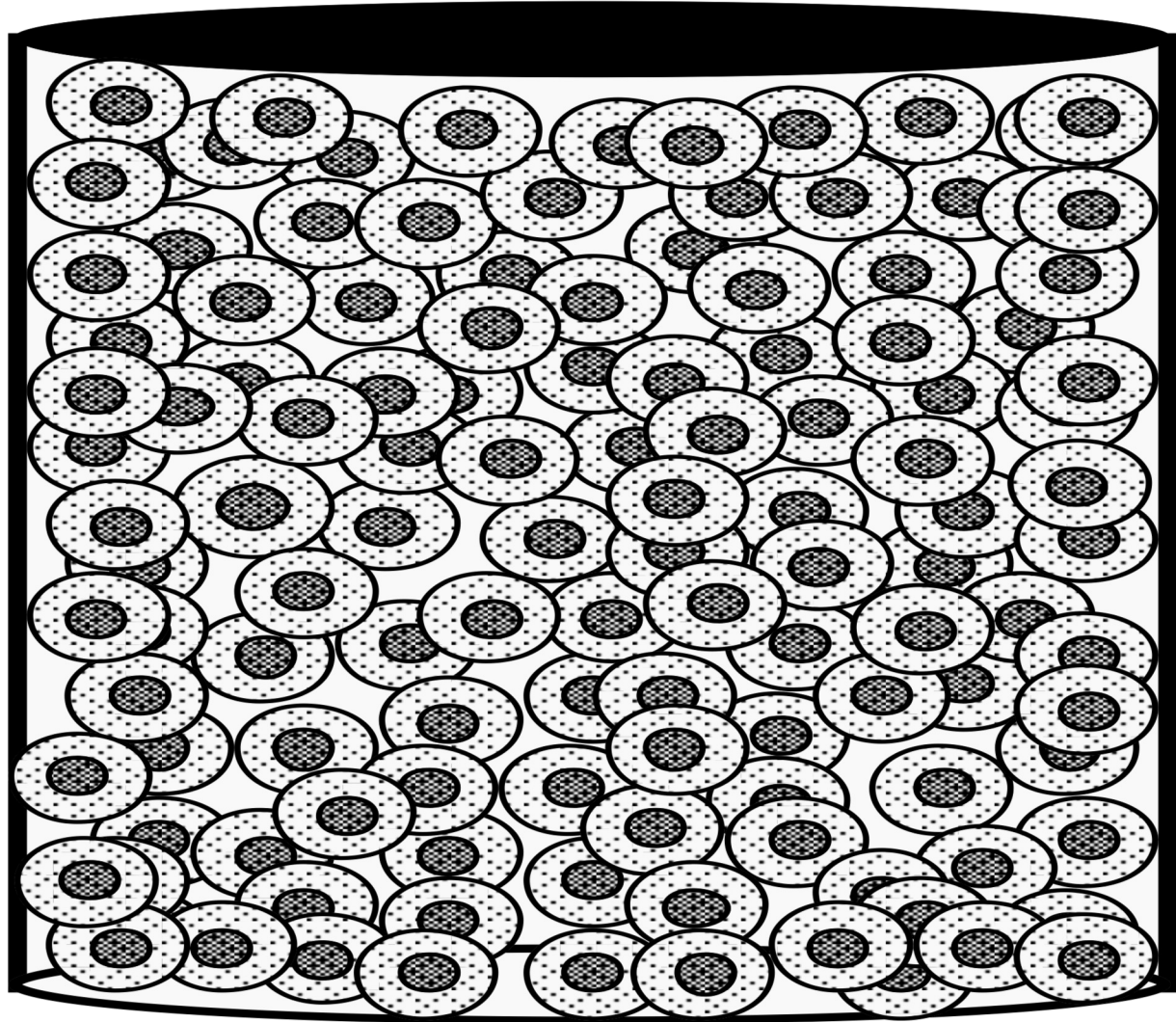
contrast



GE  
TE = 30 ms

SE  
TE = 110 ms





**Spin-Echo**  
**TE = 105 ms**  
**TR =  $\infty$**



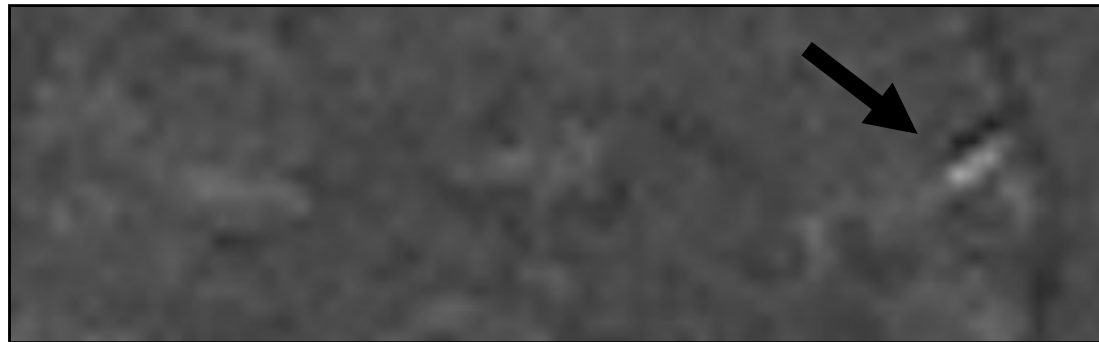
**Gradient-Echo**  
**TE = 50 ms**



**Gradient-Echo functional**  
**TE = 50 ms**

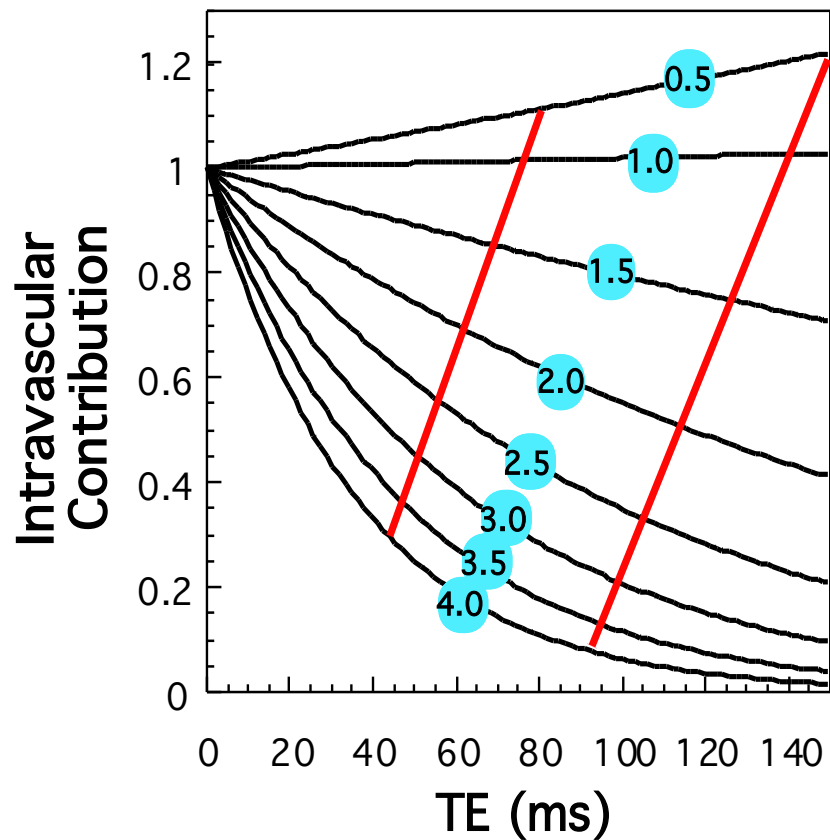


**Spin-Echo functional**  
**TE = 105 ms**

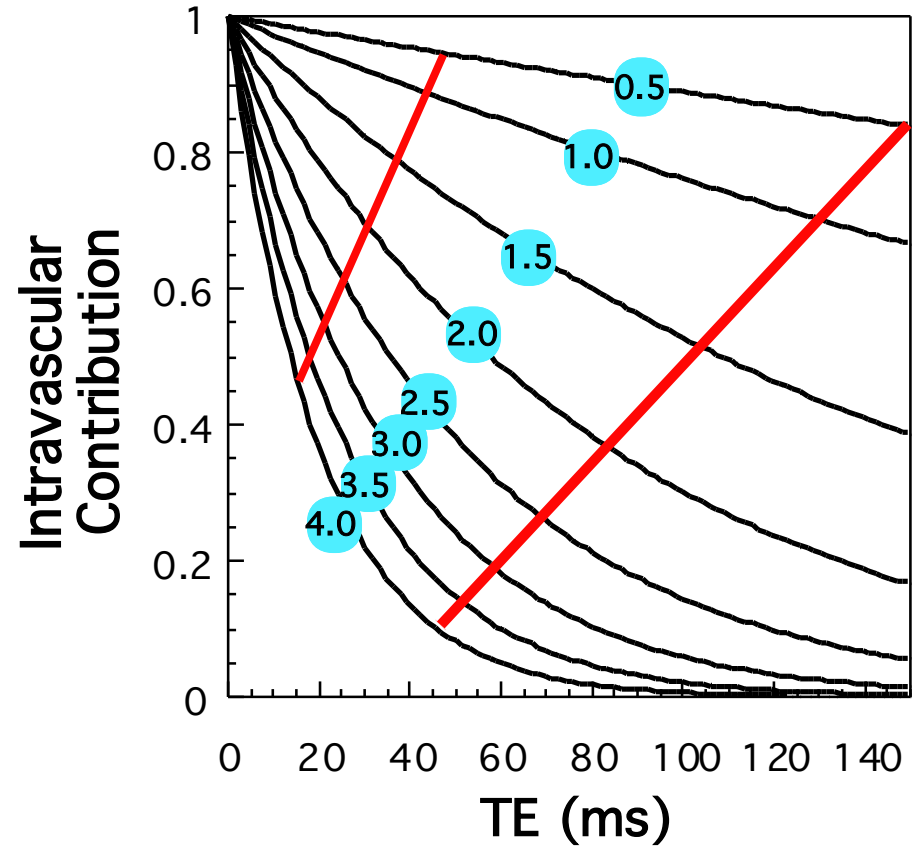


## Field strength dependence of intravascular signal

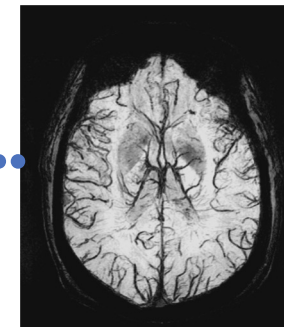
**Spin-echo, %HbO<sub>2</sub> = 60**



**Gradient-echo, %HbO<sub>2</sub> = 60**



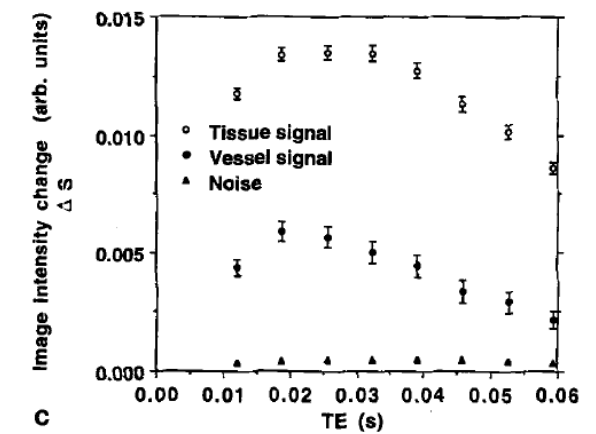
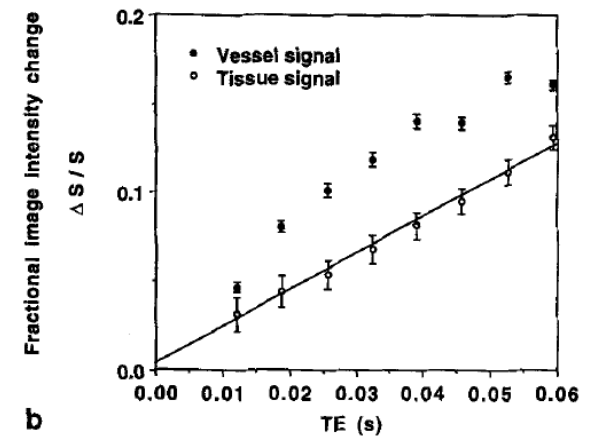
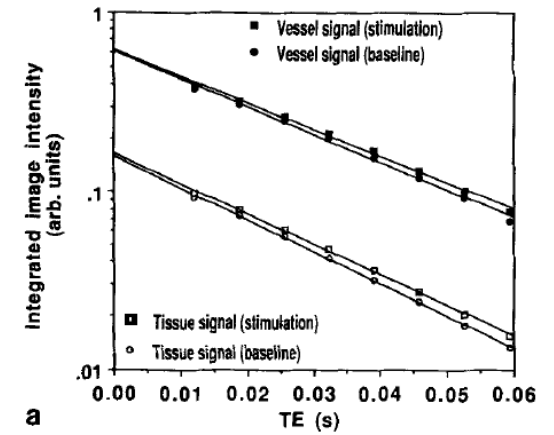
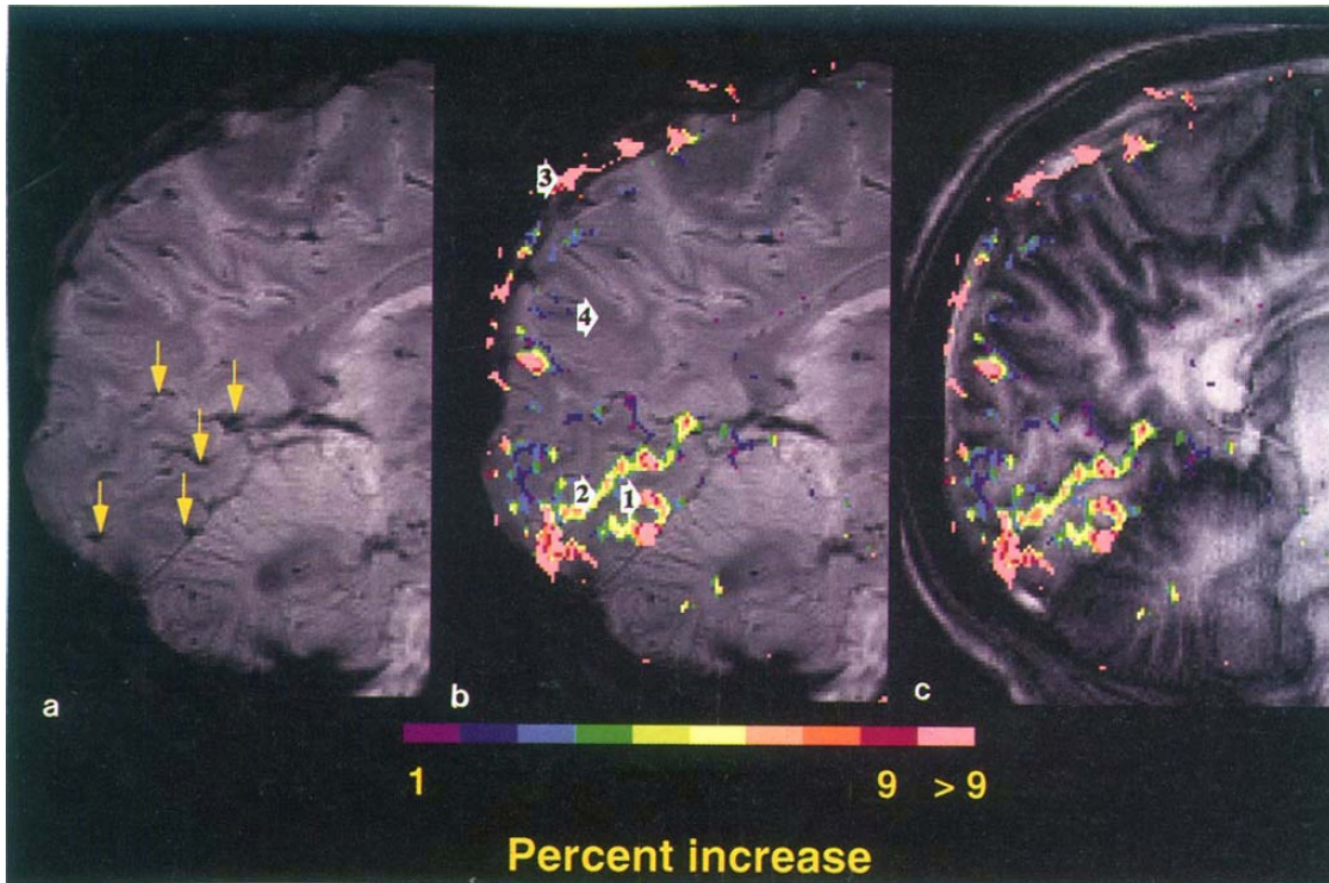
**Source of most contrast in venograms..**





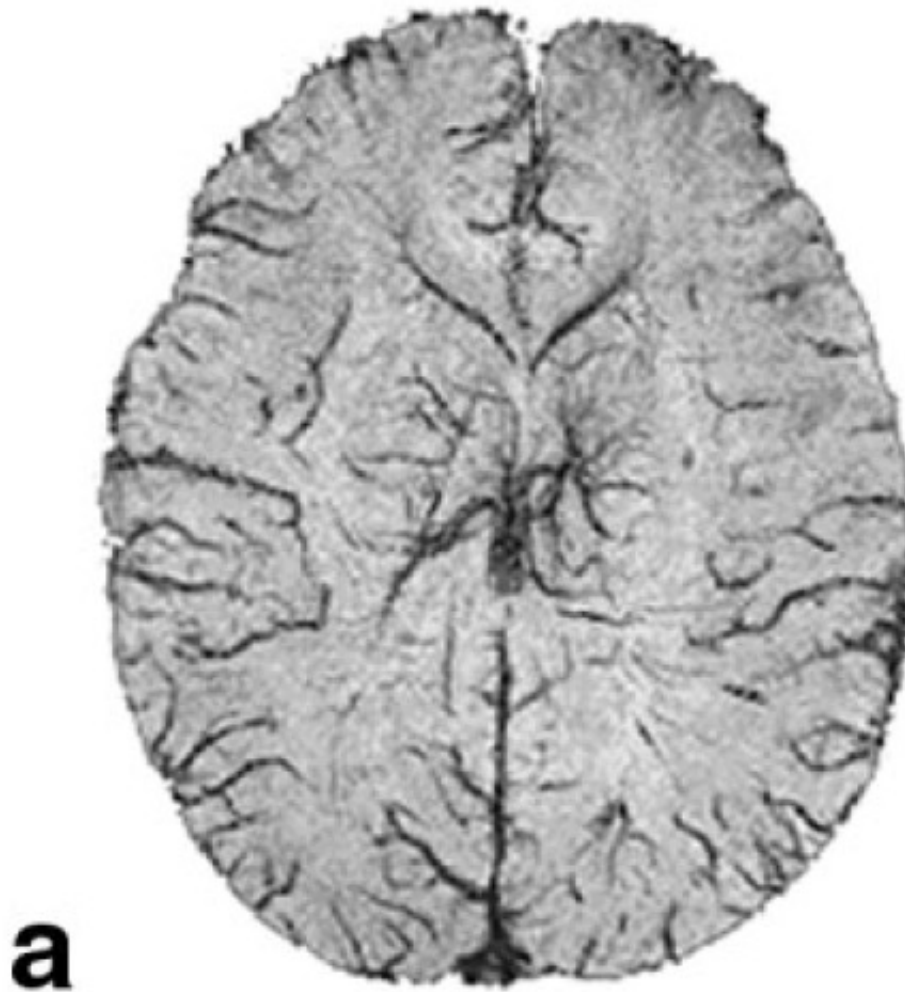
# 4 Tesla Gradient Recalled Echo Characteristics of Photic Stimulation-Induced Signal Changes in the Human Primary Visual Cortex

Ravi S. Menon, Seiji Ogawa, David W. Tank, Kâmil Uğurbil

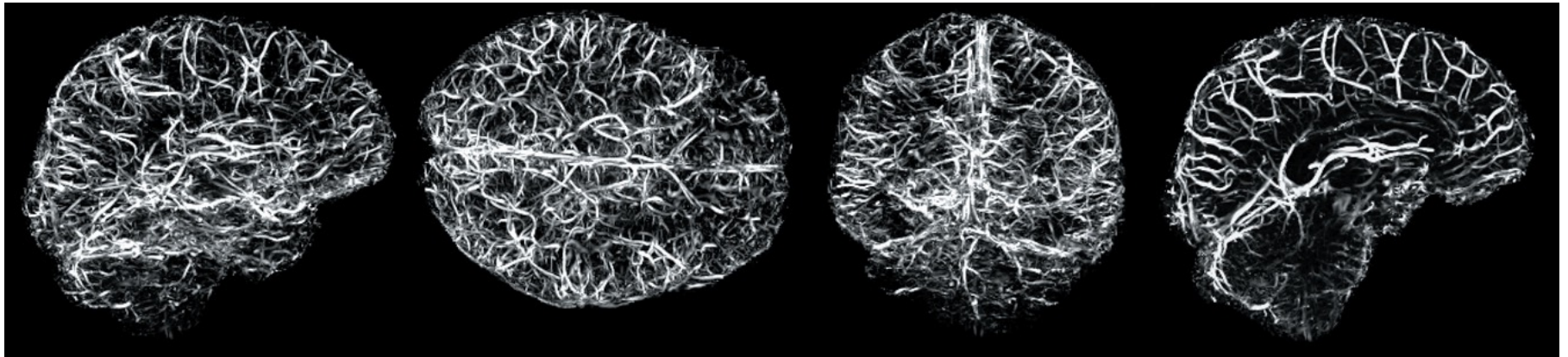


# Susceptibility Weighted Imaging (SWI)

E. Mark Haacke,<sup>1-4\*</sup> Yingbiao Xu,<sup>1,2</sup> Yu-Chung N. Cheng,<sup>1</sup> and Jürgen R. Reichenbach<sup>5</sup>



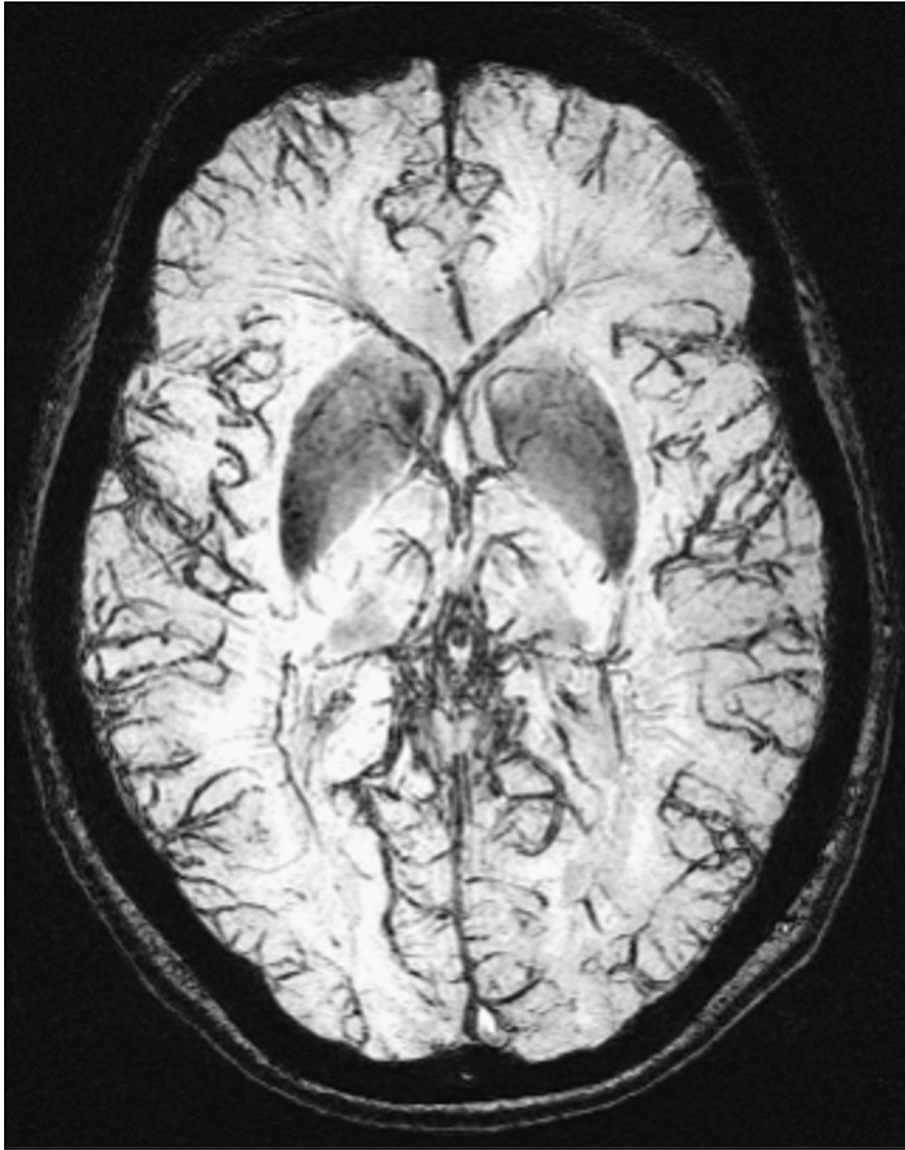
# SWI: Susceptibility Weighted Imaging



David Norris,  
Marcus Barth

7T  
Hahn Institute

## **BOLD effect to highlight veins: 3 Tesla**

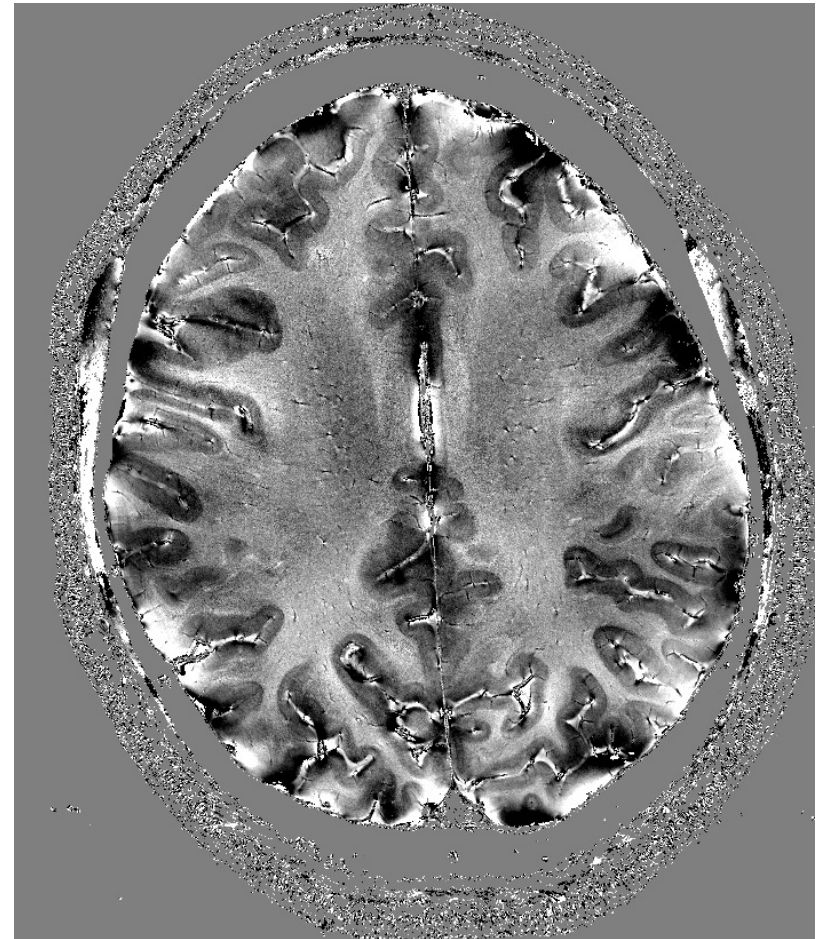
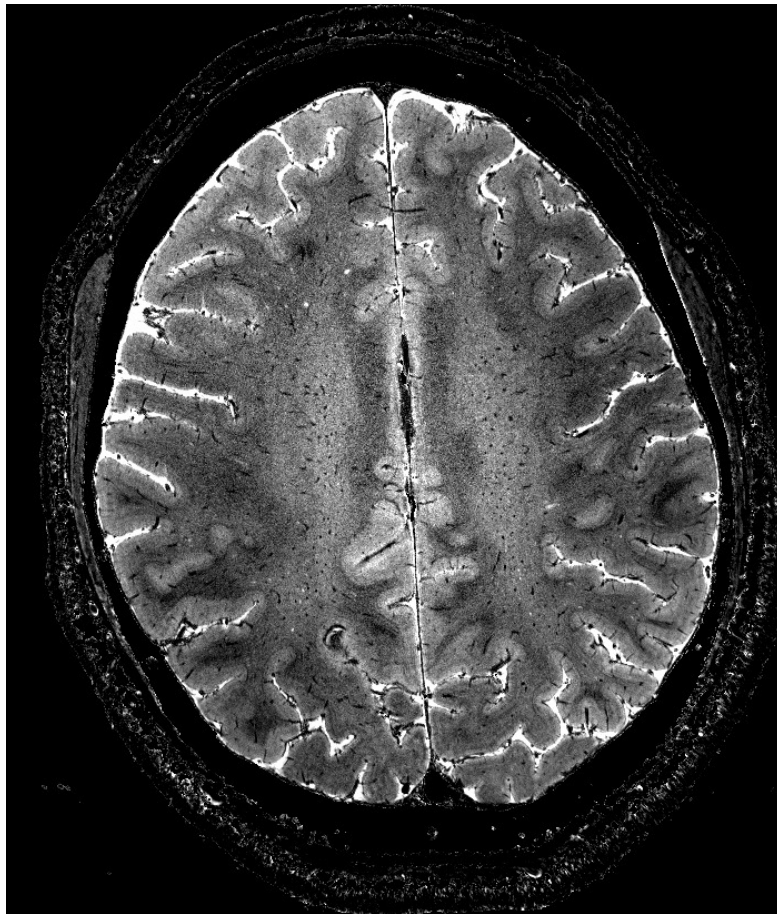


Bove-Bettis, et al (2004), SMRT



# Phase versus Magnitude Contrast

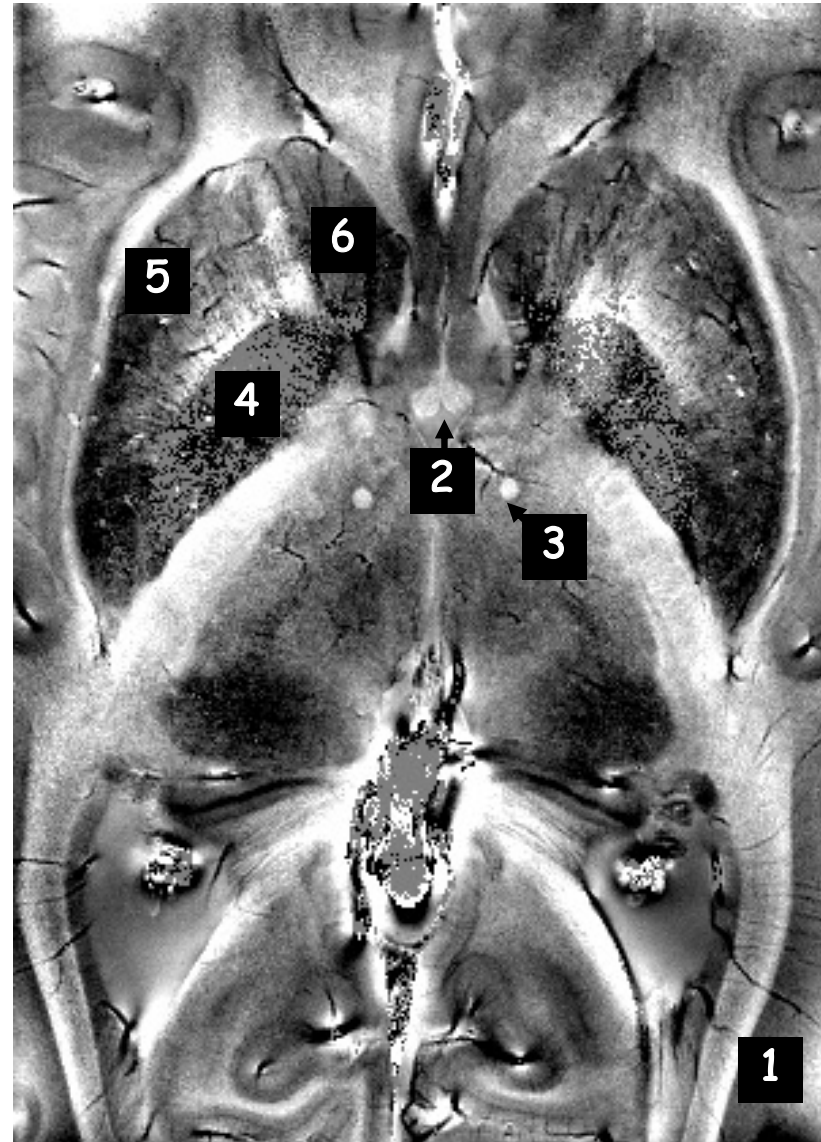
-5 Hz  5 Hz



## GRE, magnitude



## GRE, phase



1. veins crossing the optic radiations; 2. anterior column, fornix; 3. cross-section of the mamillothalamic tract; 4. globus pallidus; 5. putamen; 6. head of the caudate nucleus.

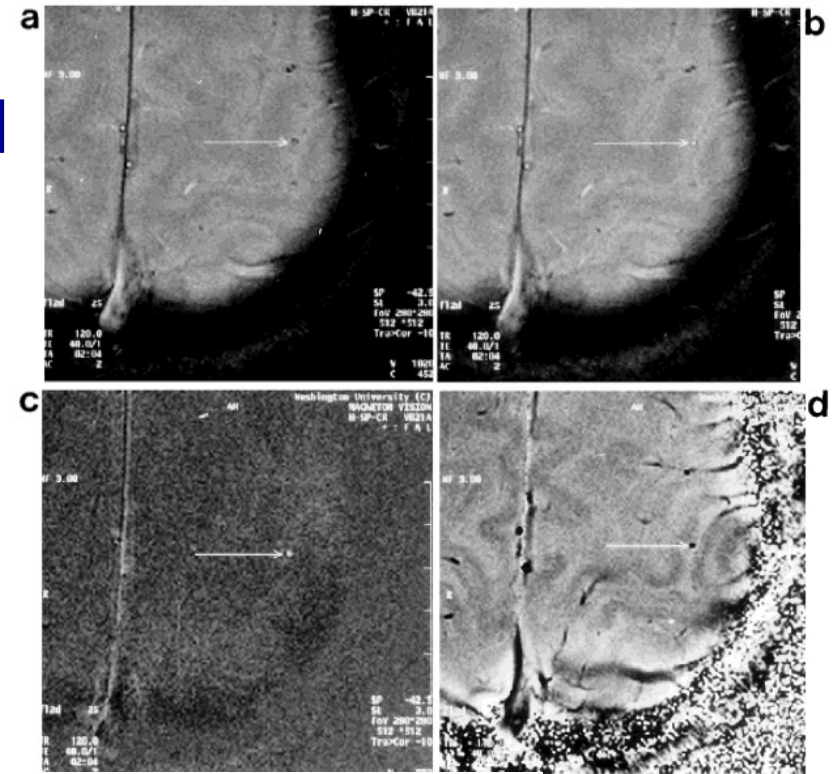


# What information can we extract using MRI / fMRI?

## Baseline and Activation-induced Changes in Oxygenation

*-assumptions on Hct, geometry  
-limited to picking out vessels*

E. M. Haacke, et al, HBM 5: 341-346, 1997



### ♦ MRI of Blood Oxygen Saturation ♦

**TABLE I. Results of phase, susceptibility, oxygenation, and velocity changes in pial veins in 5 volunteers upon motor cortex activation\***

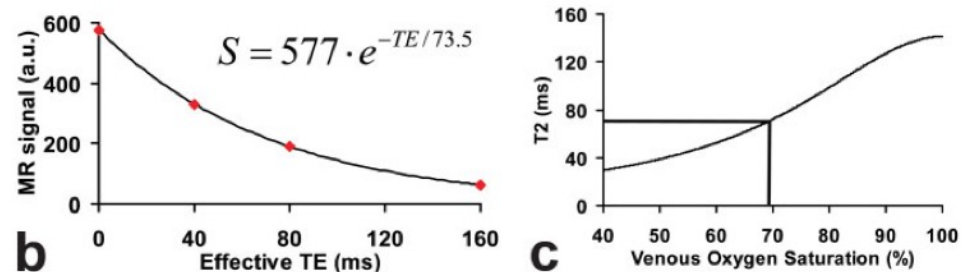
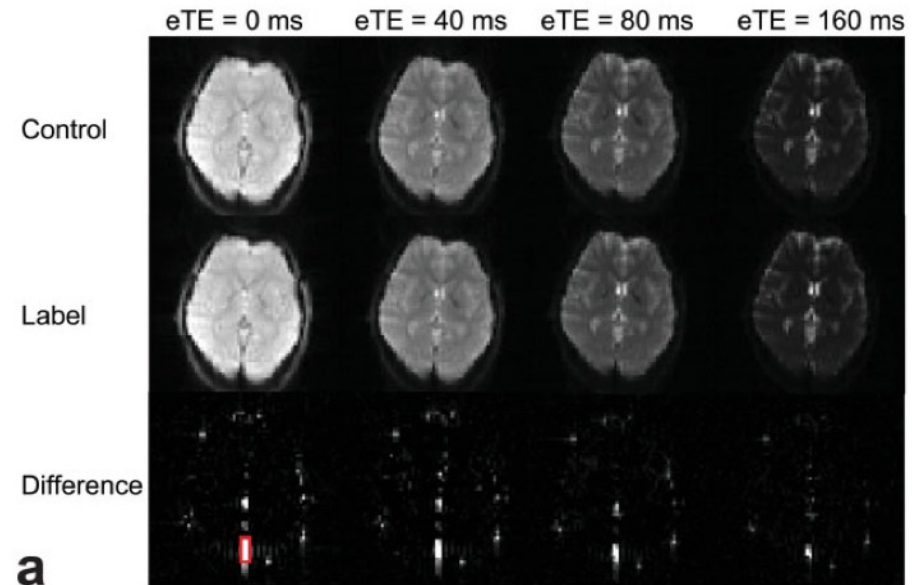
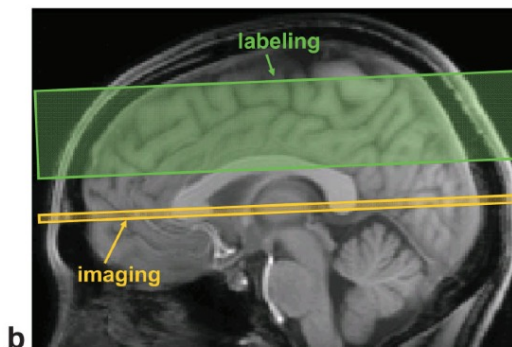
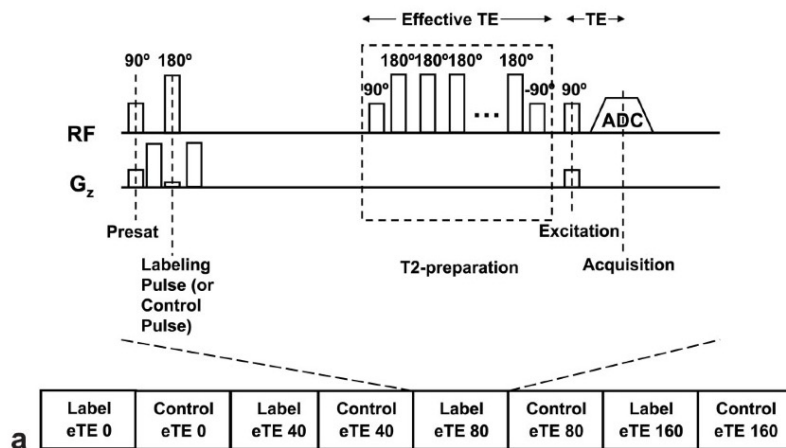
Volunteer number	TE (msec)	$\Delta\phi_{\text{rest-act}}$ (deg)	$\Delta\chi_{\text{rest-act}}$ (ppm)	$\Delta Y_{\text{susc}}$	$v_{\text{rest}}$ (cm/sec)	$v_{\text{act}}$ (cm/sec)	$\Delta Y_{\text{flow}}$
1	60	20	0.008	0.11	3.1	4.1	0.13
2	40	36	0.012	0.165	3.0	3.7	0.08
3	60	19	0.009	0.13	4.8	7.4	0.16
4	40	42	0.011	0.15	1.2	2.0	0.19
5	40	45	0.012	0.16	1.5	2.3	0.15
Mean $\pm$ SD		$32.4 \pm 12.2$	$0.01 \pm 0.001$	$0.14 \pm 0.02$	$2.72 \pm 1.44$	$3.90 \pm 1.91$	$0.14 \pm 0.04$

\*Where TE is echo time,  $\Delta\phi_{\text{rest-act}}$  the phase difference for flow-compensated acquisition.  $\Delta\chi_{\text{rest-act}}$  and  $\Delta Y_{\text{uss}}$  the susceptibility change and corresponding oxygen saturation change extracted from  $\Delta\phi_{\text{rest-act}}$ , while  $\Delta Y_{\text{flow}}$  is the oxygen saturation change extracted from the change of flow velocity, i.e., from  $v_{\text{rest}}$  in the resting state to  $v_{\text{act}}$  in the activation state.

# What information can we extract using MRI / fMRI?

## Baseline oxygenation with fewer assumptions

- measurement of  $T_2$  of ASL- tagged blood
- assumptions of Hct, accuracy of calibration plot



T2-Relaxation-Under-Spin-Tagging  
"TRUST" MRI

H. Lu, MRM, 60:357-363, 2008

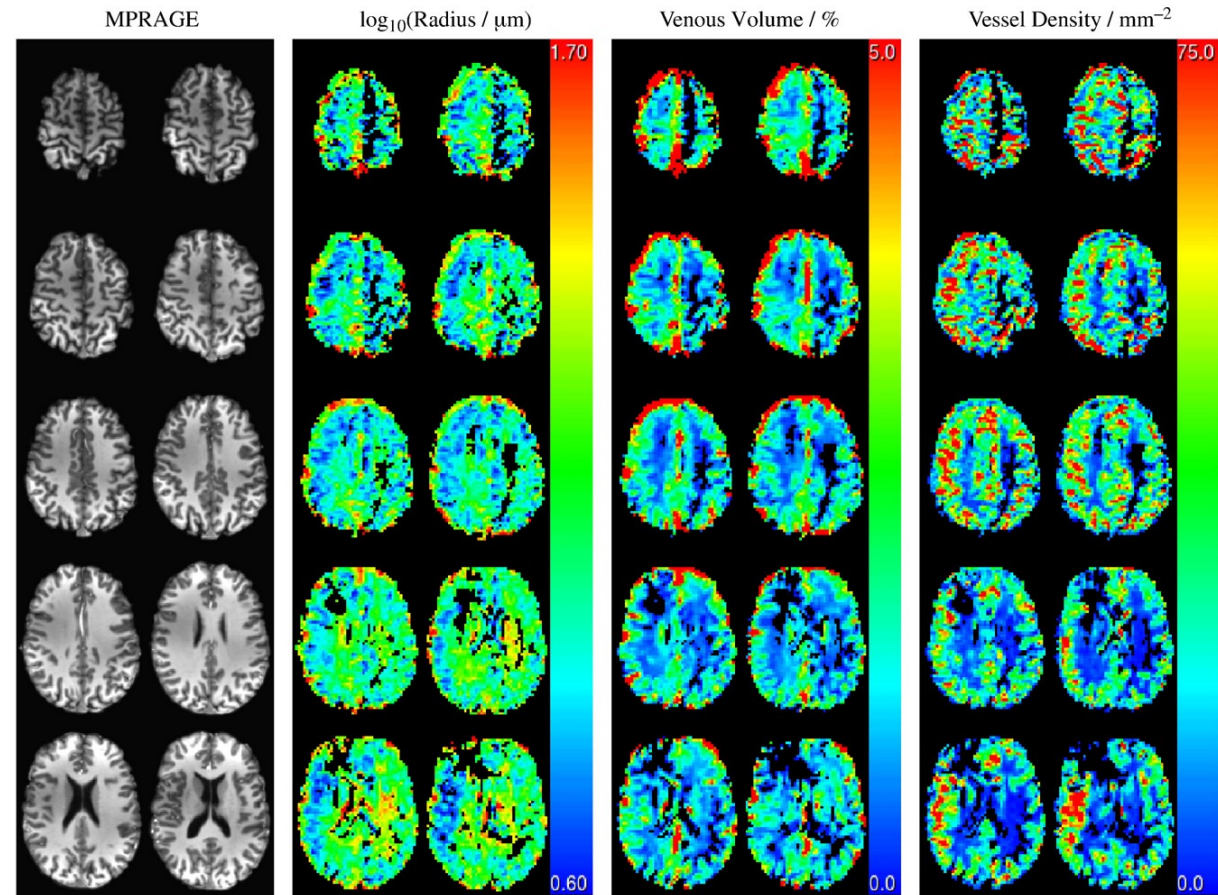
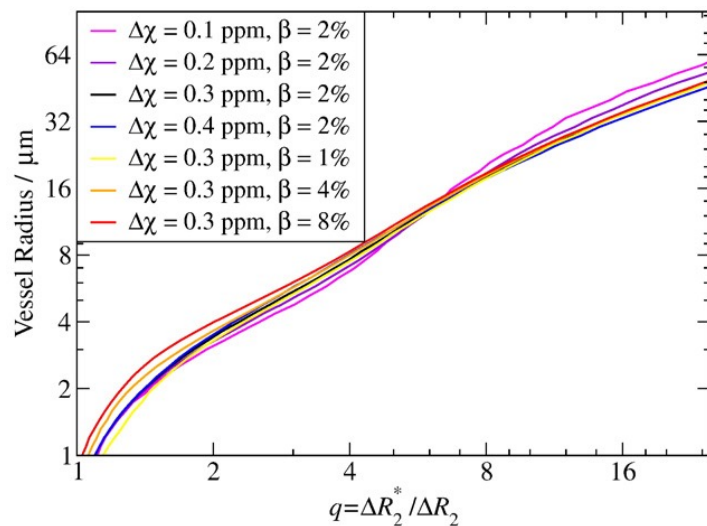


# What information can we extract using MRI / fMRI?

## Vessel Parameter Mapping

-SE/GE ratio -> vessel radius

-GE signal change with global stress  
-> blood volume



T. H. Jochimsen, et al. NeuroImage, 51: 765-774 (2010)

# Pros and Cons of Spin-Echo

- **Increased specificity (esp at high fields where IV signal is low)**
- **Less sensitive to rapidly flowing blood**
- **Less signal dropout.**
- **Less slices per TR**
- **Lower fCNR by x 2 to 4.**
- **Acquisition window still T2\***
- **Very large IV signal still present at most field strengths.**

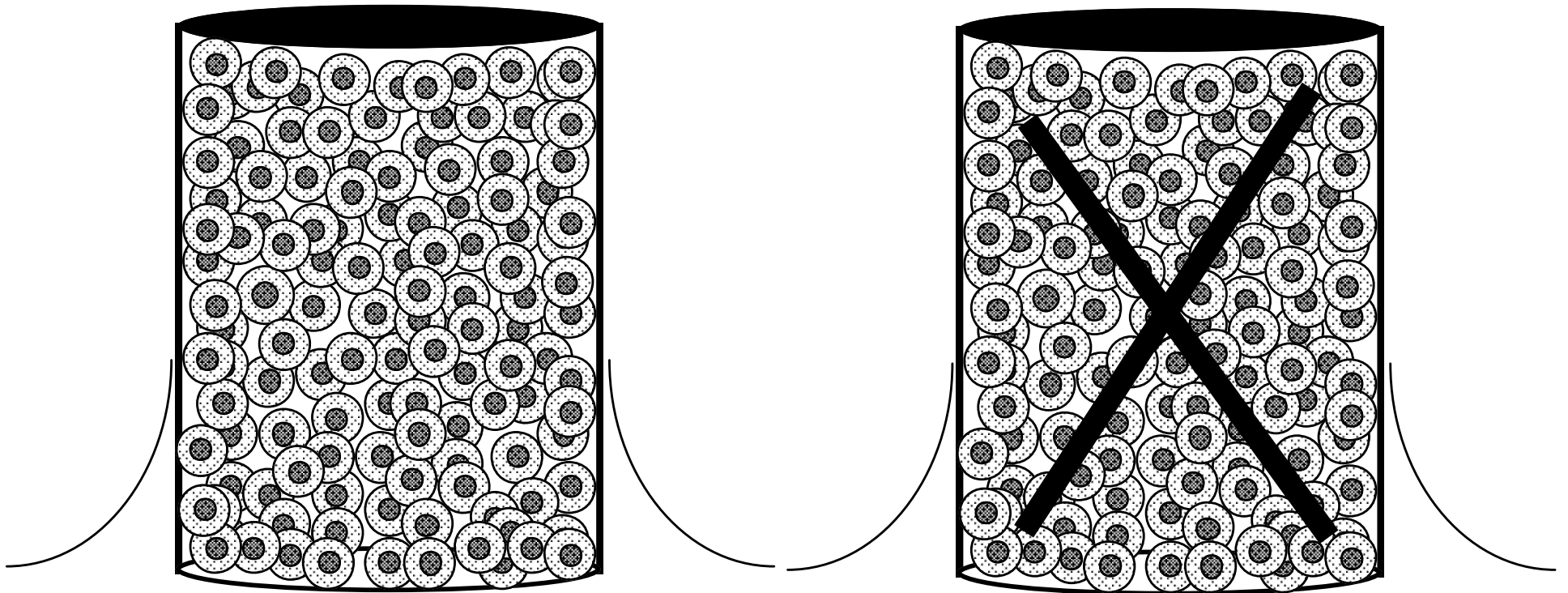
**I would only use at 7T if also imaging at high resolution and interested in something like columns or layers.**

**...so let's remove the  
intravascular signal...**

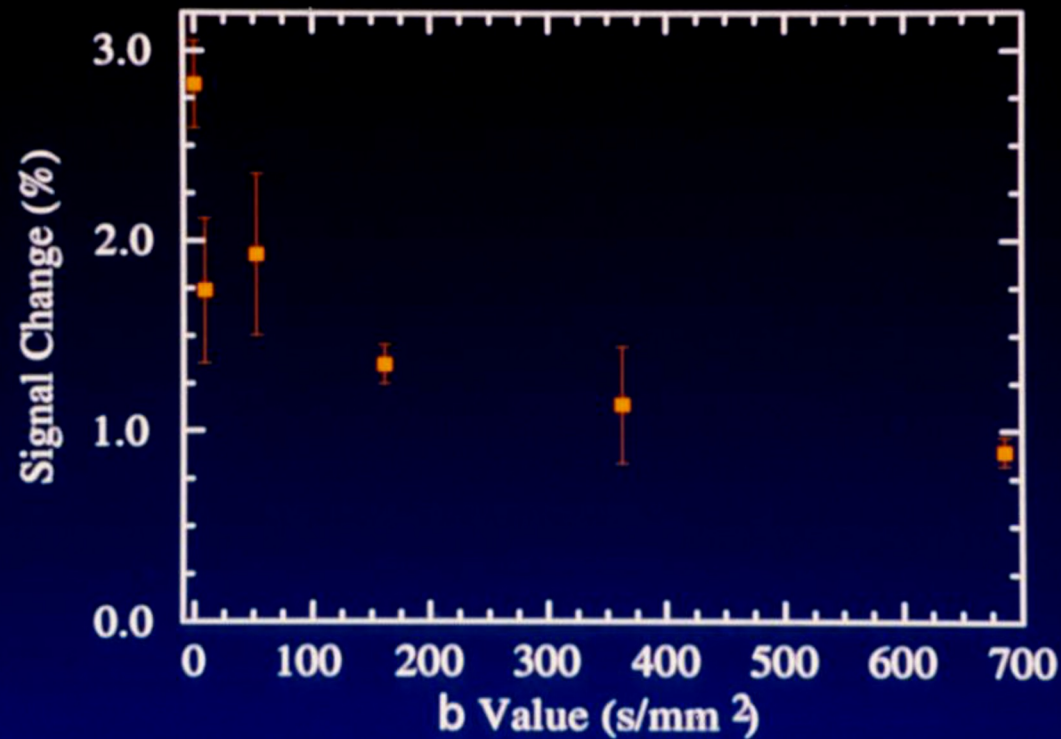
**Velocity Nulled (or diffusion  
weighted) fMRI.**

**no diffusion weighting**

**diffusion weighting**

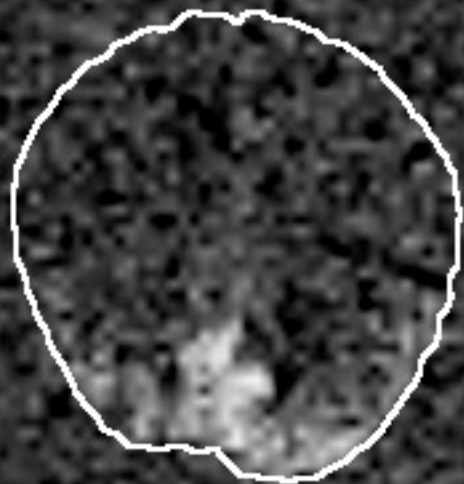


## Summary of Diffusion-Weighted fMRI Data



J. L. Boxerman, P. A. Bandettini, K. K. Kwong, J. R. Baker, T. L. Davis, B. R. Rosen, R. M. Weisskoff, The intravascular contribution to fMRI signal change: monte carlo modeling and diffusion - weighted studies in vivo. *Magn. Reson. Med.* 34, 4-10 (1995).

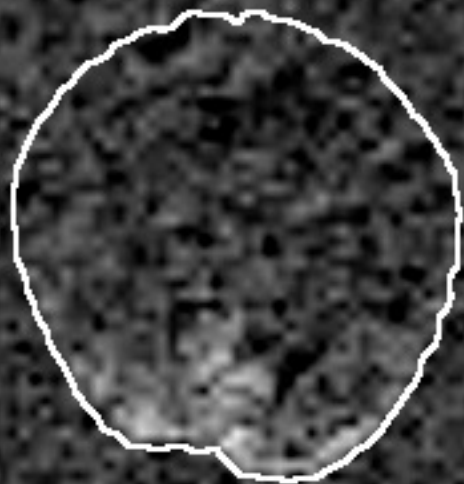
**$b = 0$**



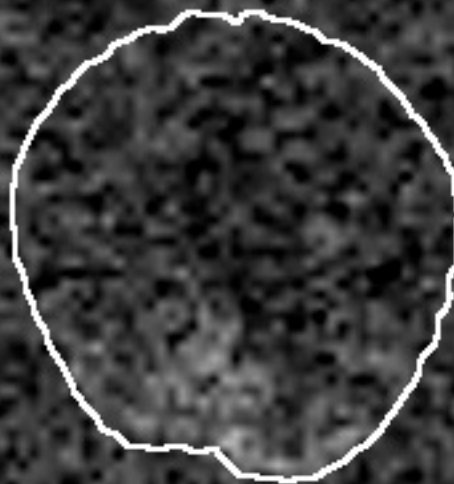
**$b = 10$**



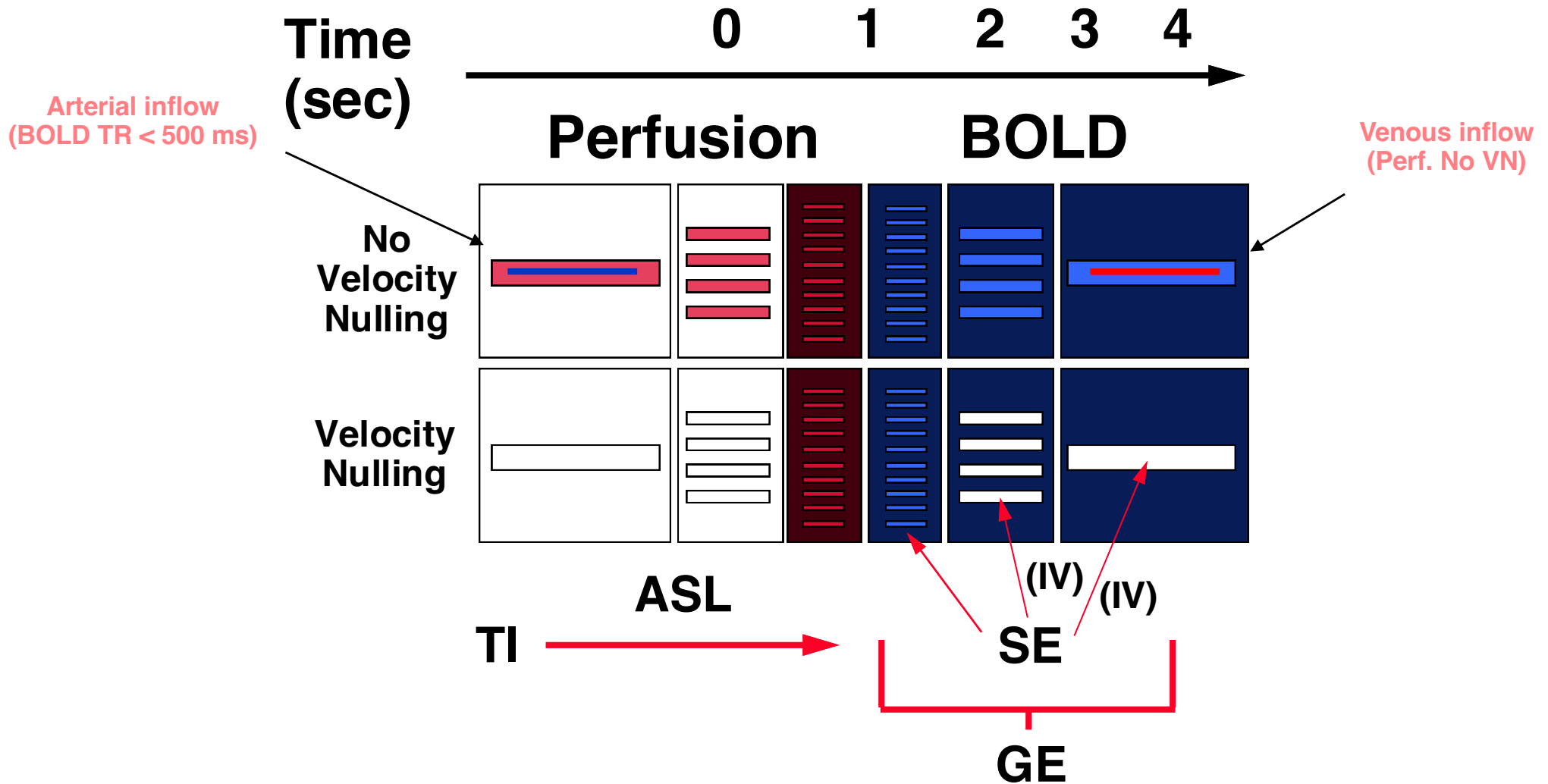
**$b = 50$**



**$b = 160$**



# Hemodynamic Specificity





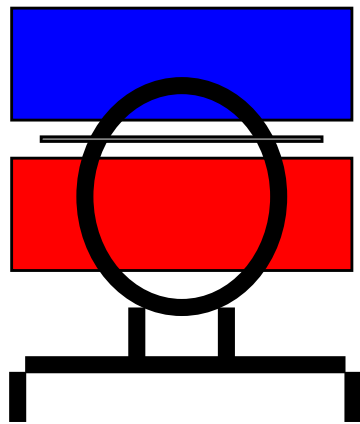
# Functional Contrast

- Volume (gadolinium)
- BOLD
- **Perfusion (ASL)**
- $\Delta\text{CMRO}_2$
- $\Delta\text{Volume}$  (VASO)
- Neuronal Currents
- Diffusion coefficient
- Temperature

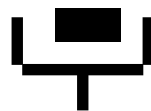
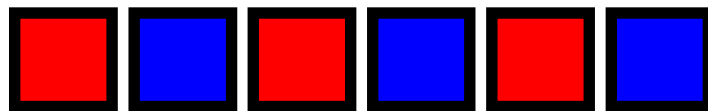
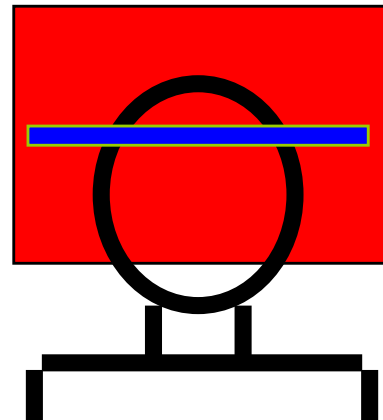


# Perfusion Contrast

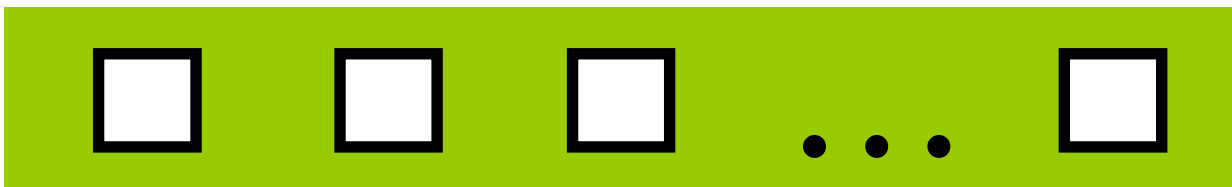
**EPISTAR**



**FAIR**



...



**Perfusion  
Time Series**

**TI (ms)**

**FAIR**

**EPISTAR**

**200**

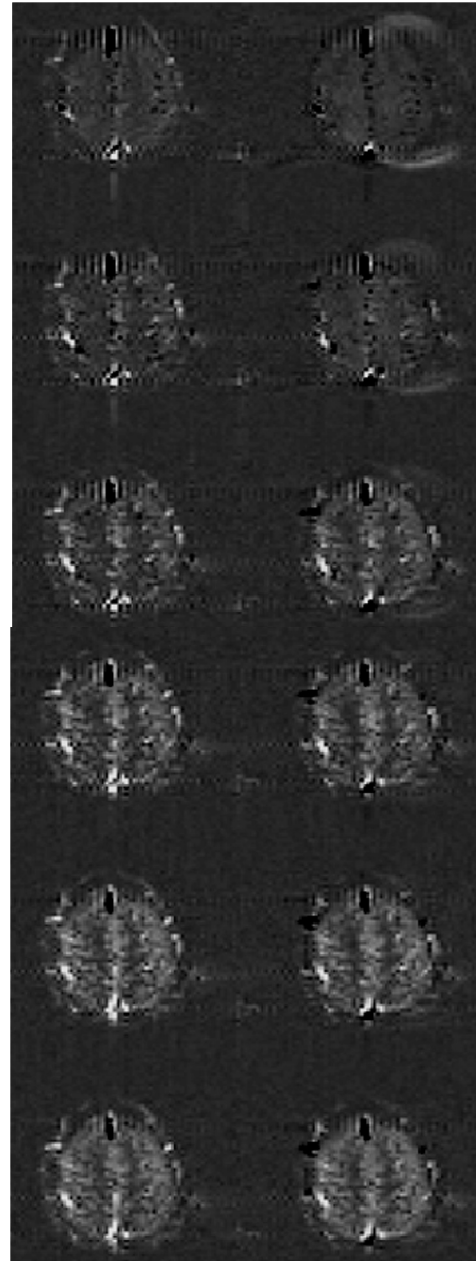
**400**

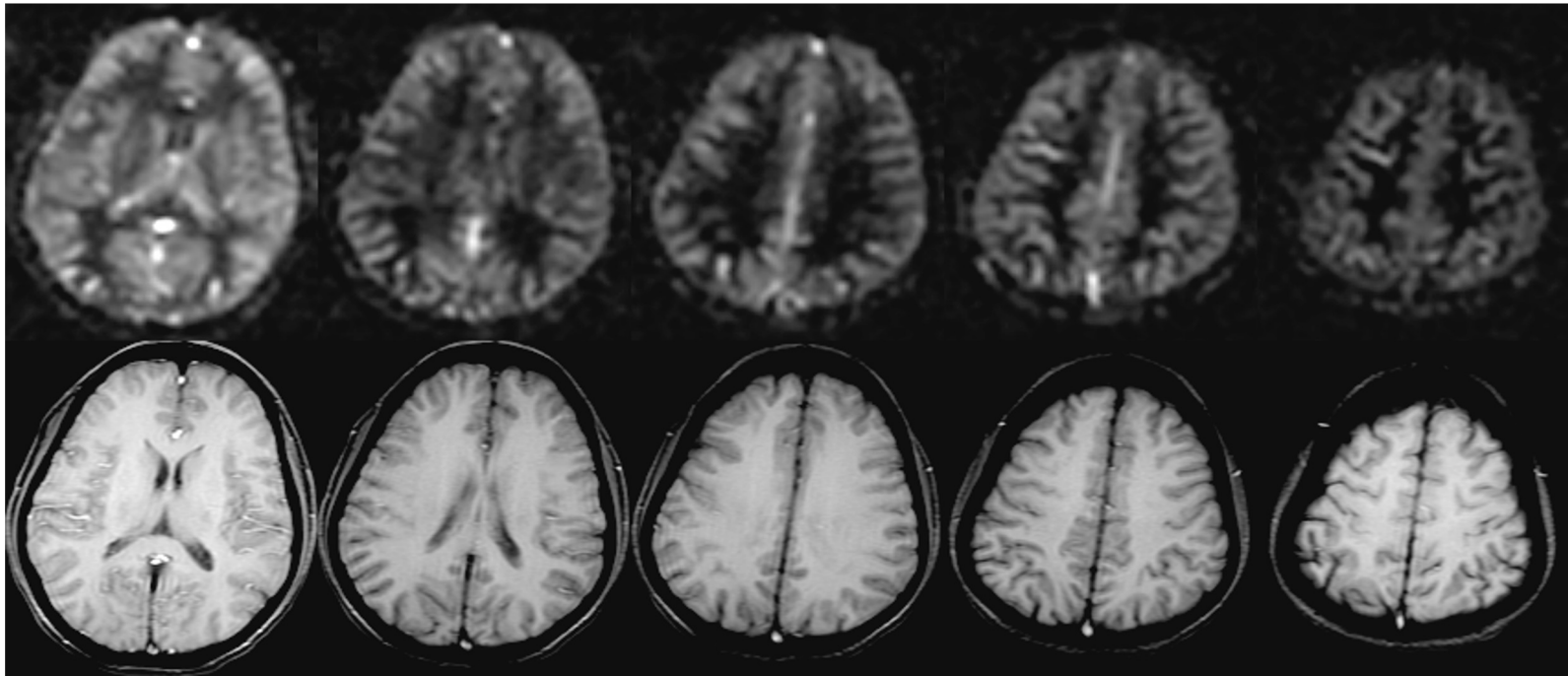
**600**

**800**

**1000**

**1200**





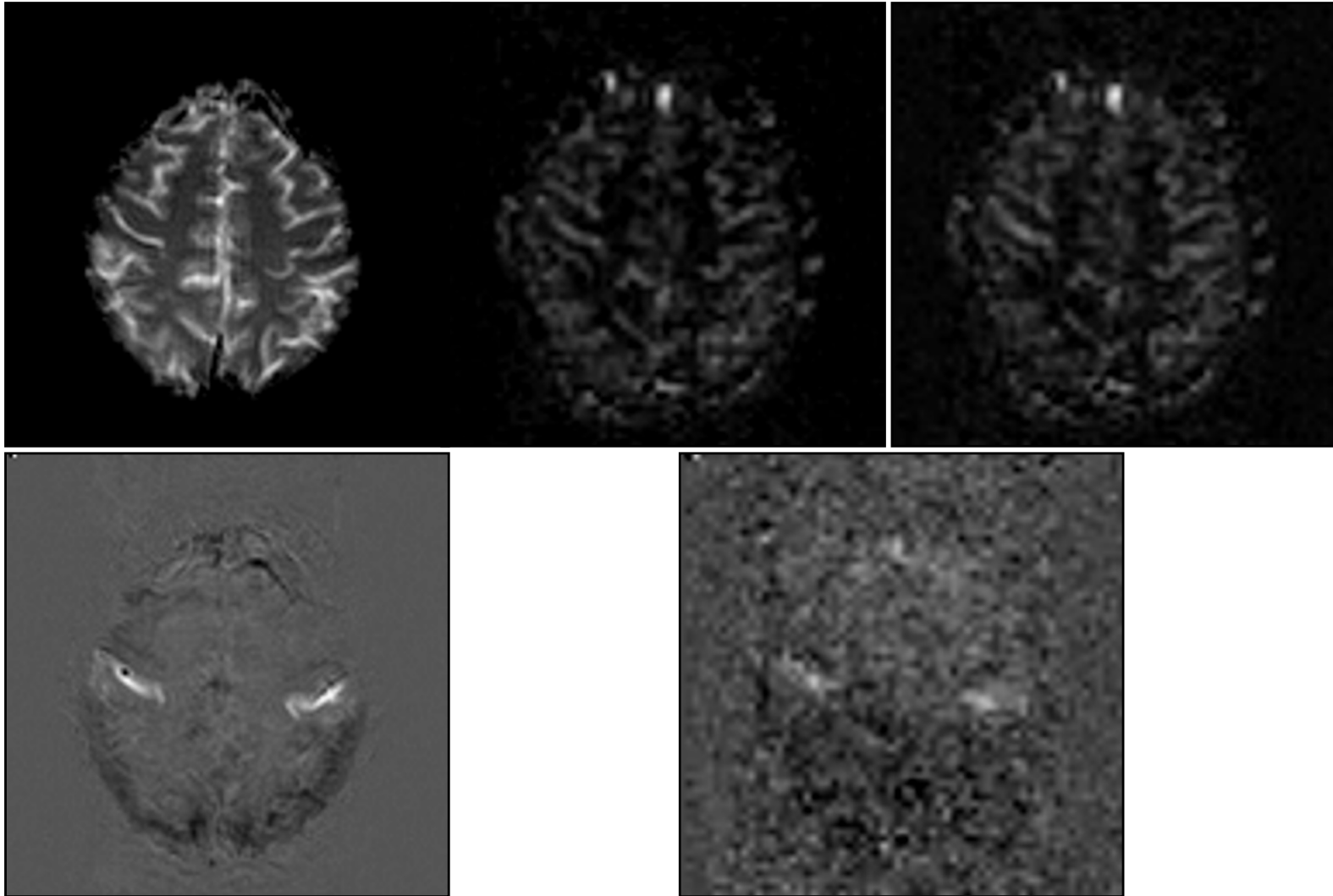
- Williams, D. S., Detre, J. A., Leigh, J. S. & Koretsky, A. S. (1992) "Magnetic resonance imaging of perfusion using spin-inversion of arterial water." *Proc. Natl. Acad. Sci. USA* 89, 212-216.
- Edelman, R., Siewert, B. & Darby, D. (1994) "Qualitative mapping of cerebral blood flow and functional localization with echo planar MR imaging and signal targeting with alternating radiofrequency (EPISTAR)." *Radiology* 192, 1-8.
- Kim, S.-G. (1995) "Quantification of relative cerebral blood flow change by flow-sensitive alternating inversion recovery (FAIR) technique: application to functional mapping." *Magn. Reson. Med.* 34, 293-301.
- Kwong, K. K. et al. (1995) "MR perfusion studies with T1-weighted echo planar imaging." *Magn. Reson. Med.* 34, 878-887.

# Perfusion

**BOLD**

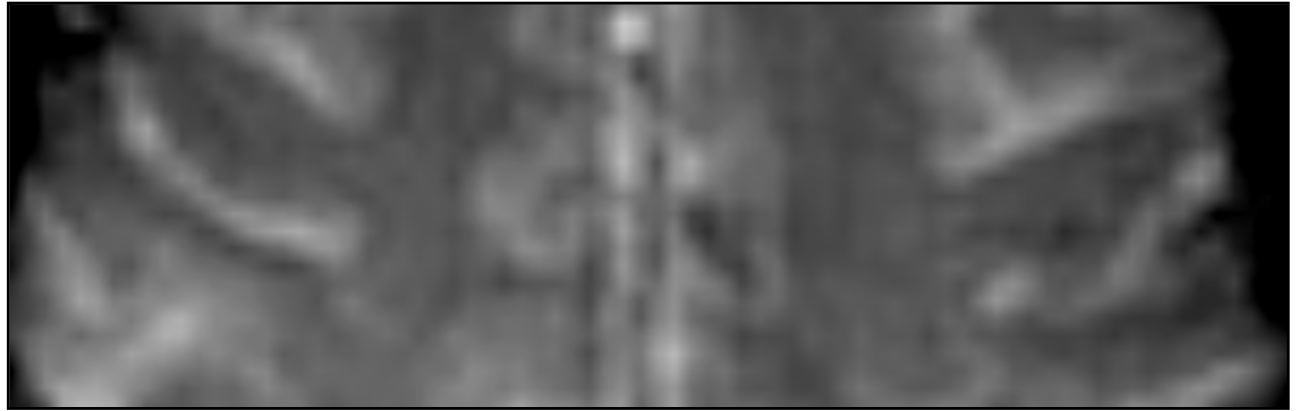
*Rest*

*Activation*

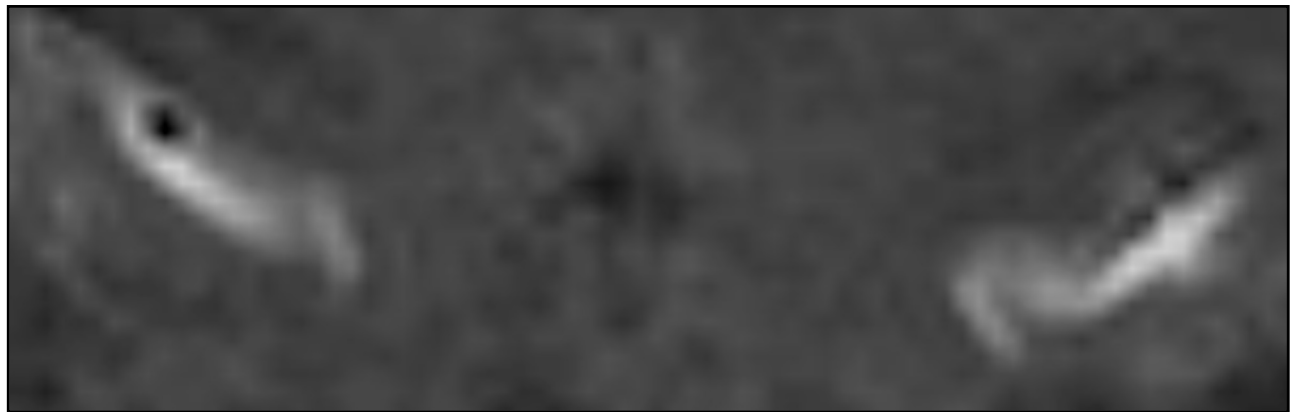


**P. A. Bandettini, E. C. Wong, Magnetic resonance imaging of human brain function: principles, practicalities, and possibilities, in "Neurosurgery Clinics of North America: Functional Imaging" (M. Haglund, Ed.), p.345-371, W. B. Saunders Co., 1997.**

# Anatomy



# BOLD

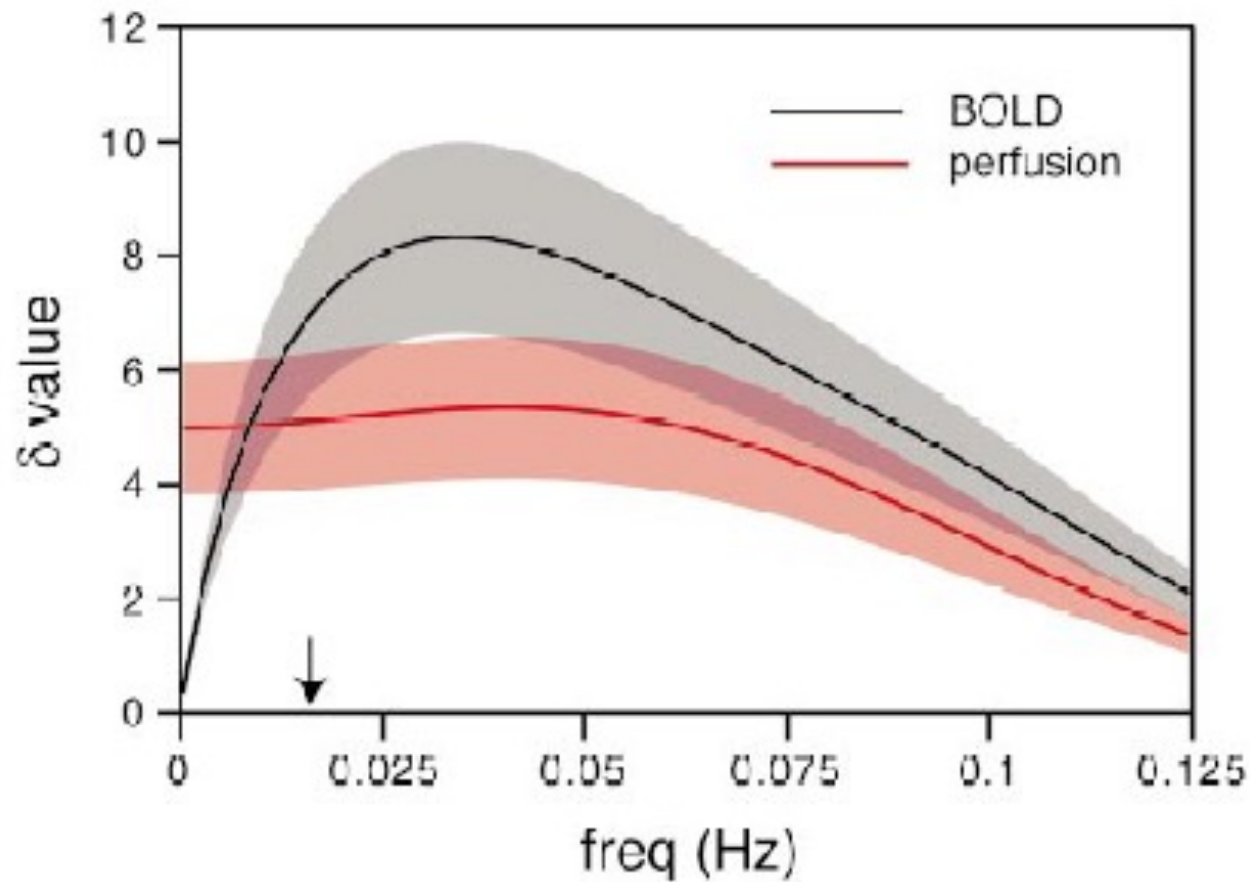


# Perfusion



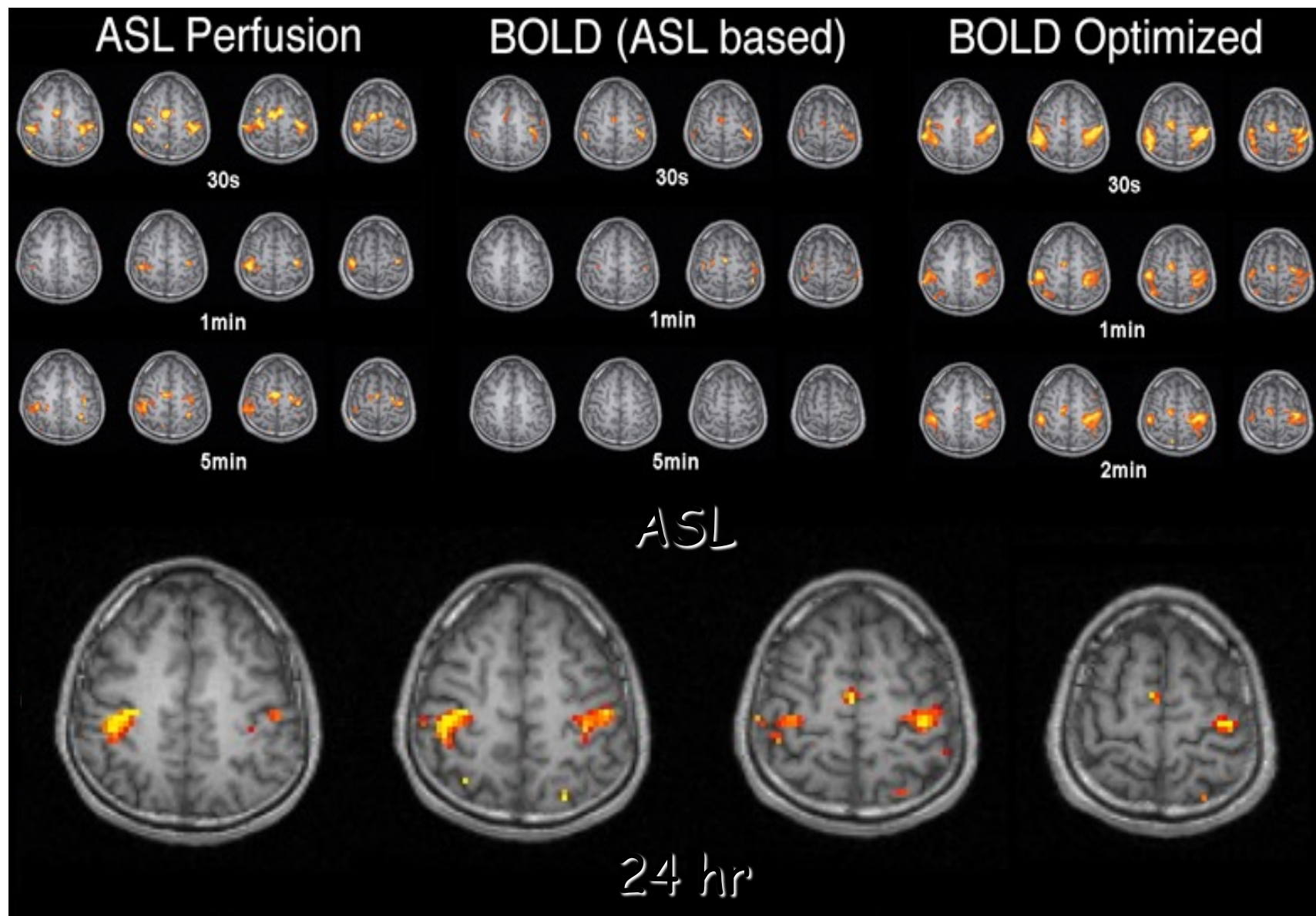
P. A. Bandettini, E. C. Wong, Magnetic resonance imaging of human brain function: principles, practicalities, and possibilities, *in* "Neurosurgery Clinics of North America: Functional Imaging" (M. Haglund, Ed.), p.345-371, W. B. Saunders Co., 1997.

Better than BOLD for long duration activation...

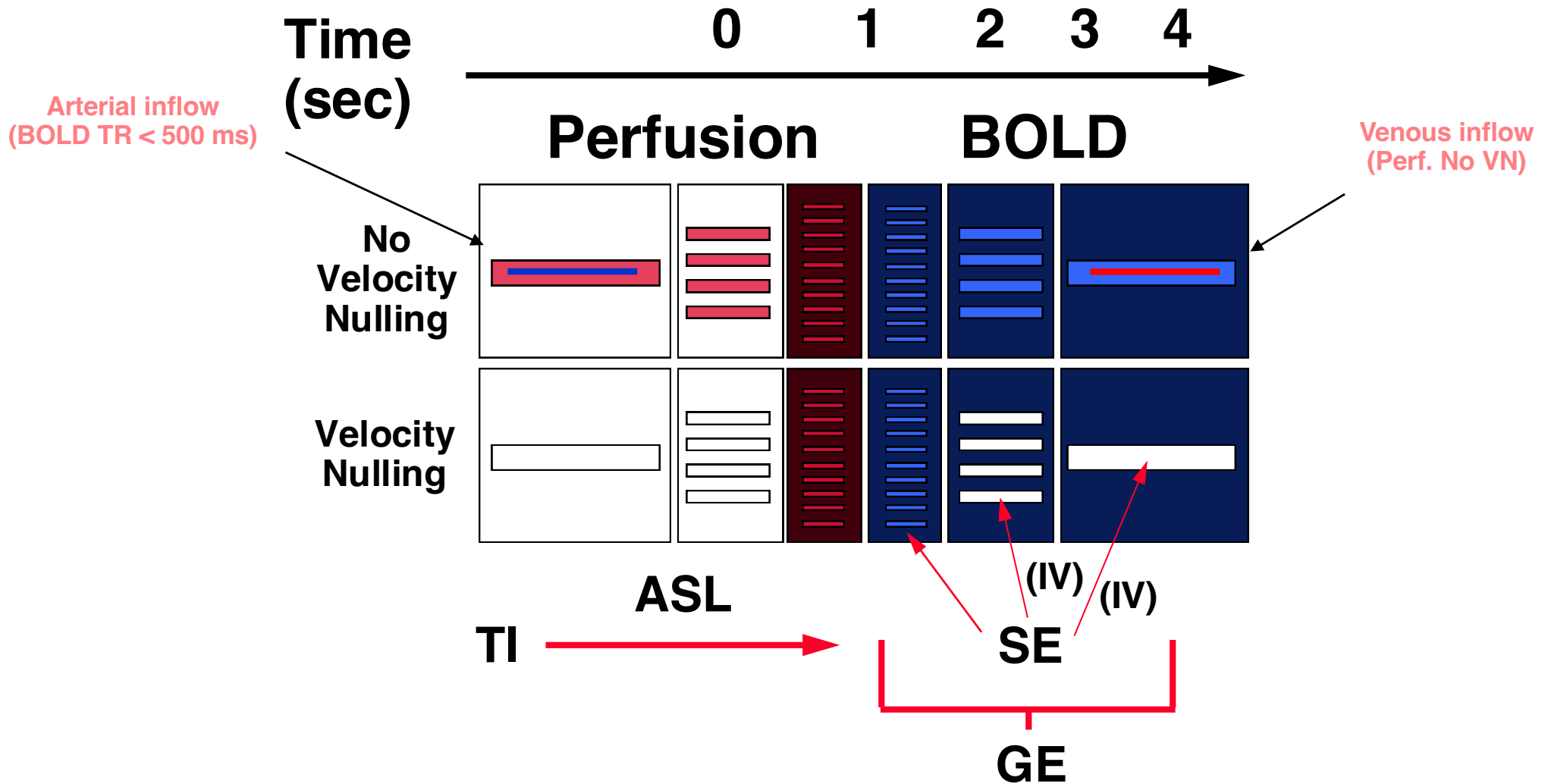


GK Aguirre et al, (2002) NeuroImage 15 (3): 488-500

# Perfusion vs. BOLD: Low Task Frequency



# Hemodynamic Specificity



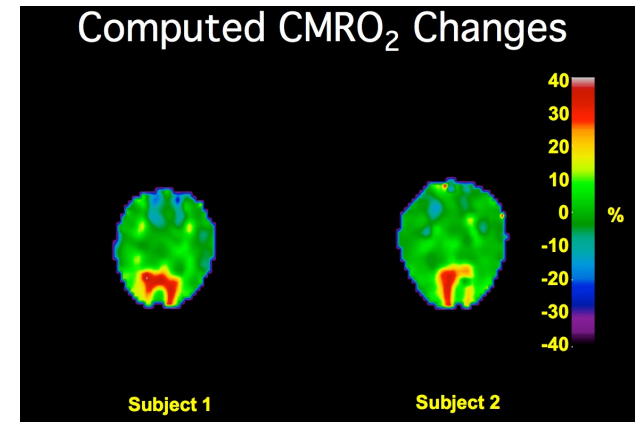


# Functional Contrast

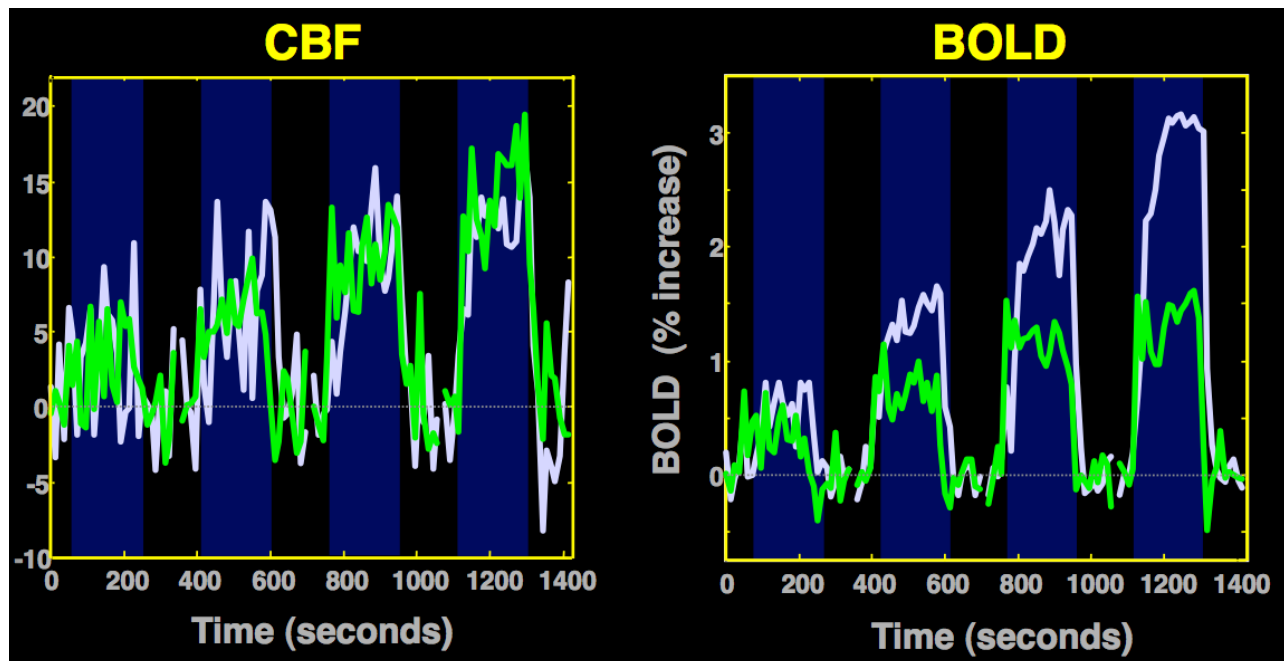
- Volume (gadolinium)
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- Temperature

# Activation-induced $CMRO_2$ changes

- requires a global hemodynamic stress
- assumption is that  $CMRO_2$  unchanged with global stress
- requires simultaneous flow and BOLD collection



R. D. Hoge, et al, PNAS 96: 9403-9408, 1999



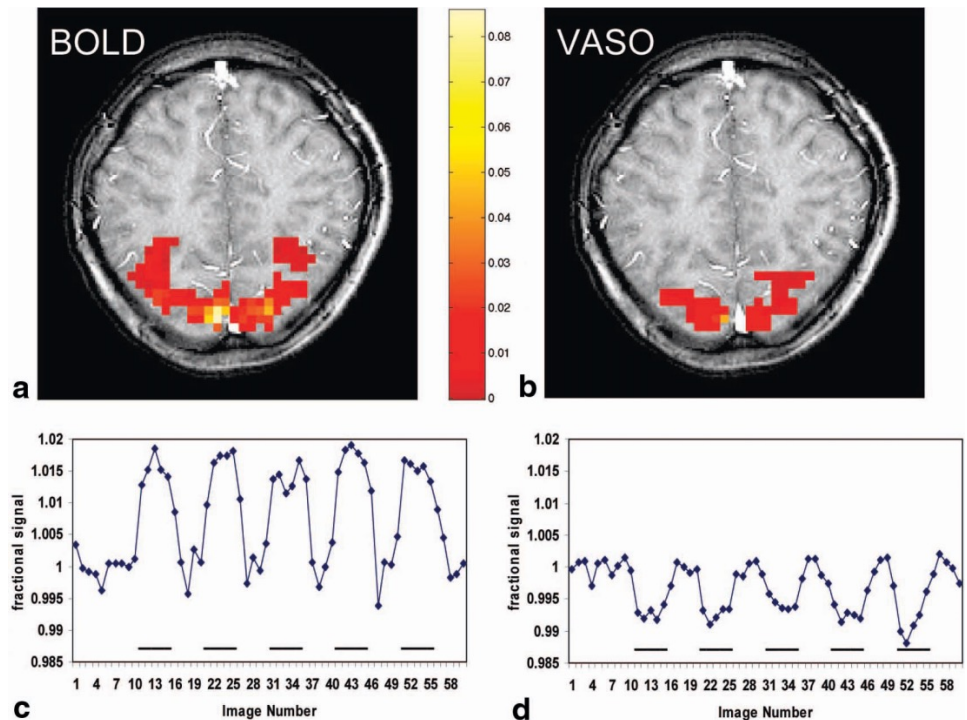
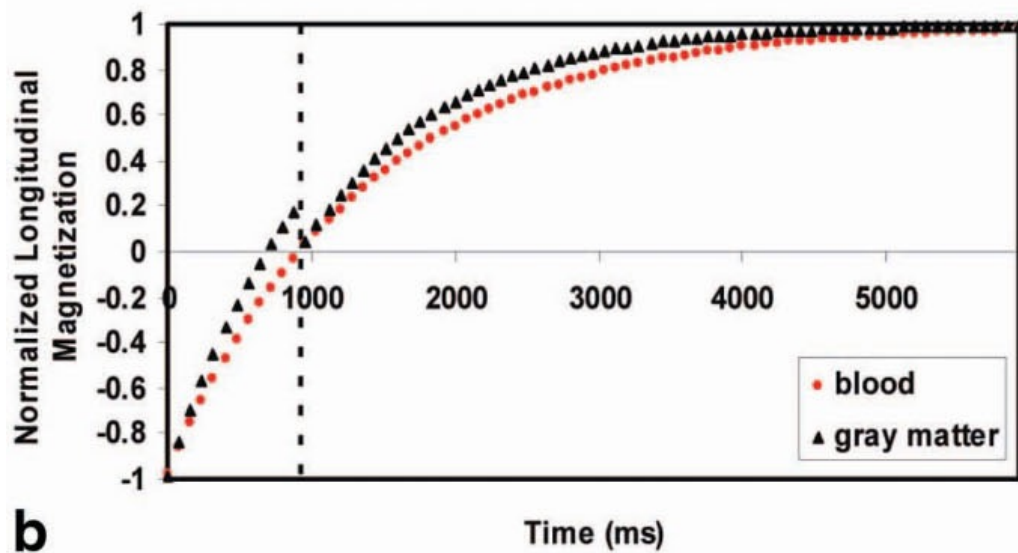
*Visual = green*  
*Hypercapnia = white*

# Functional Contrast

- Volume (gadolinium)
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- Temperature

# Activation-induced Blood Volume Changes: “VASO”

H. Lu, et al, MRM 50: 263-274, 2003

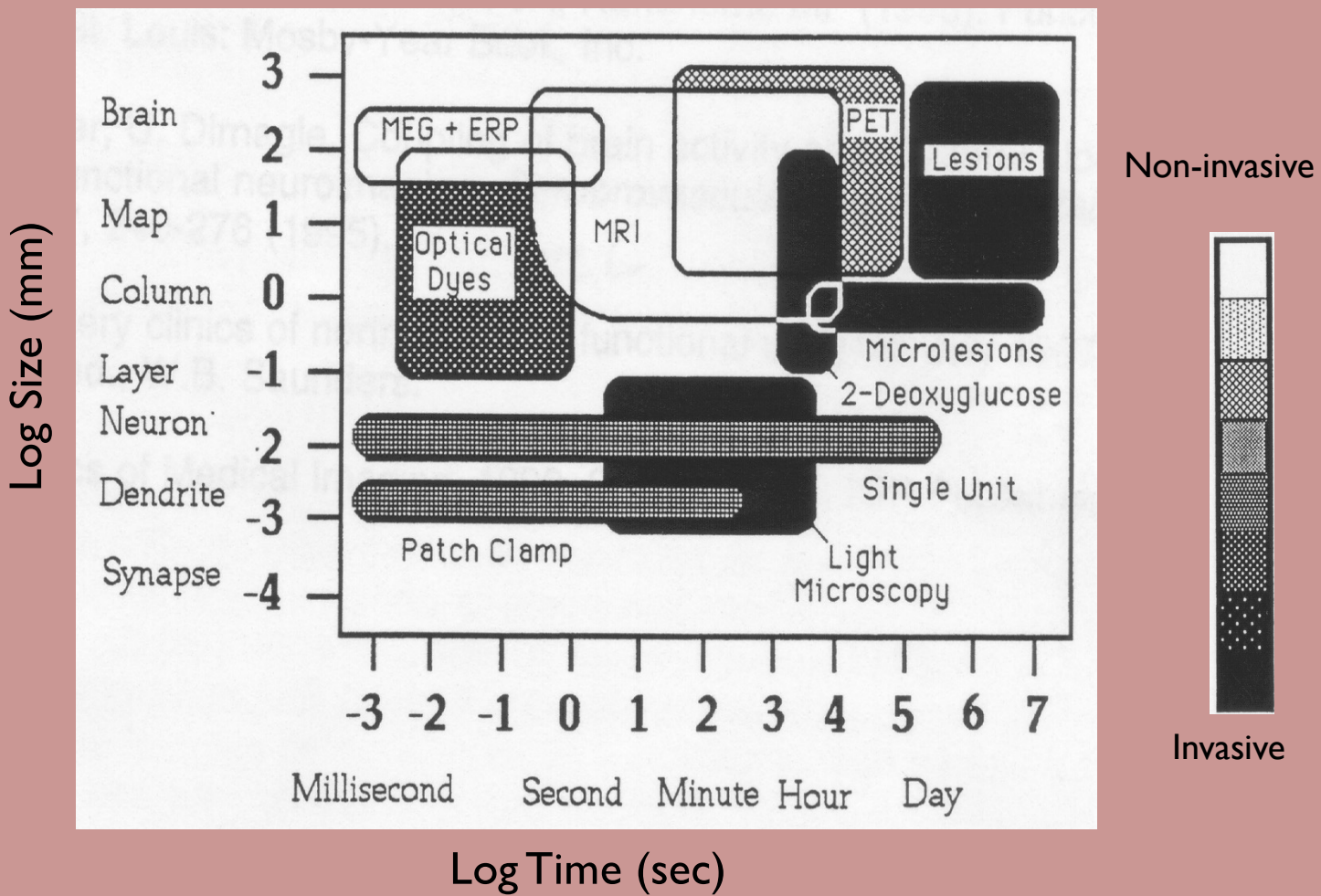


*Null blood based on T1 difference between blood and tissue  
..more blood -> less signal.*

# **Extracting Information from the fMRI Signal:**

- **Spatial Resolution**
- **Temporal Resolution**
- **Sensitivity**

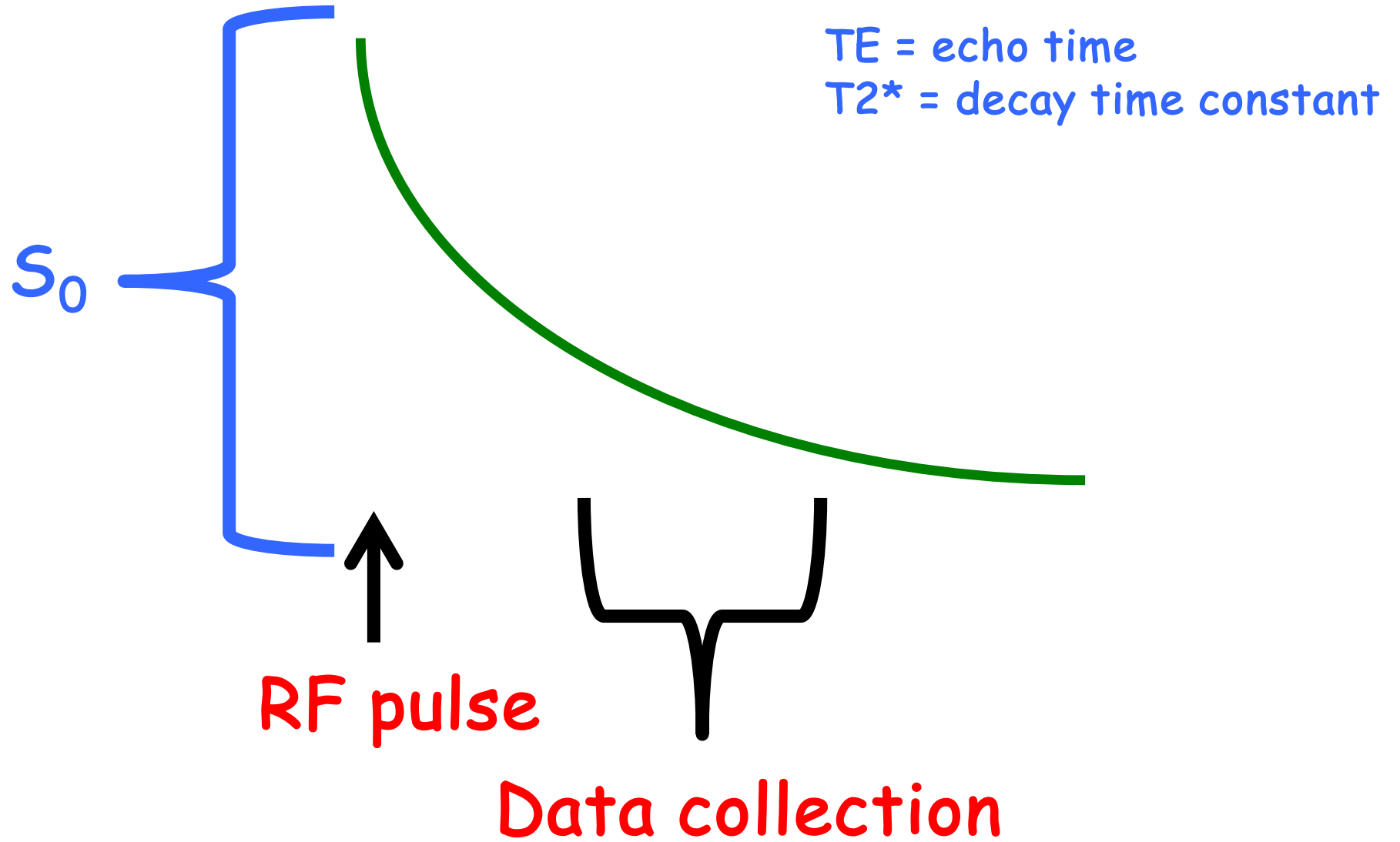
# Functional Neuroimaging Techniques



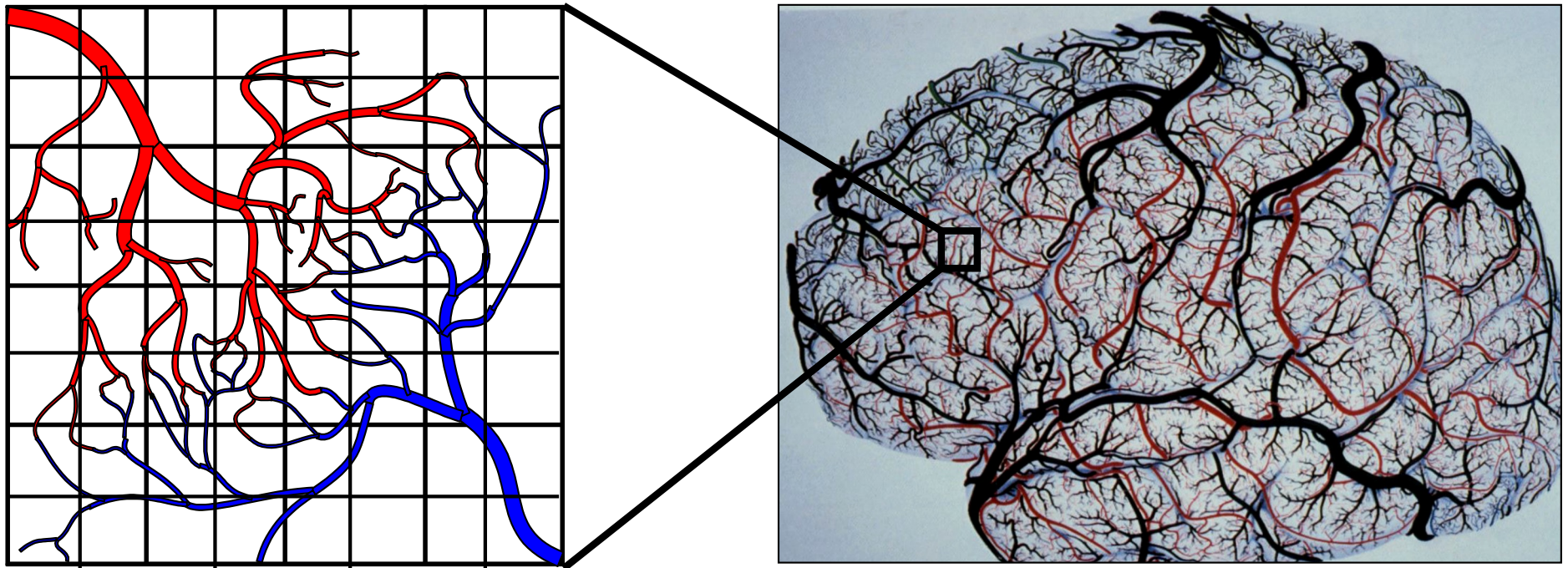
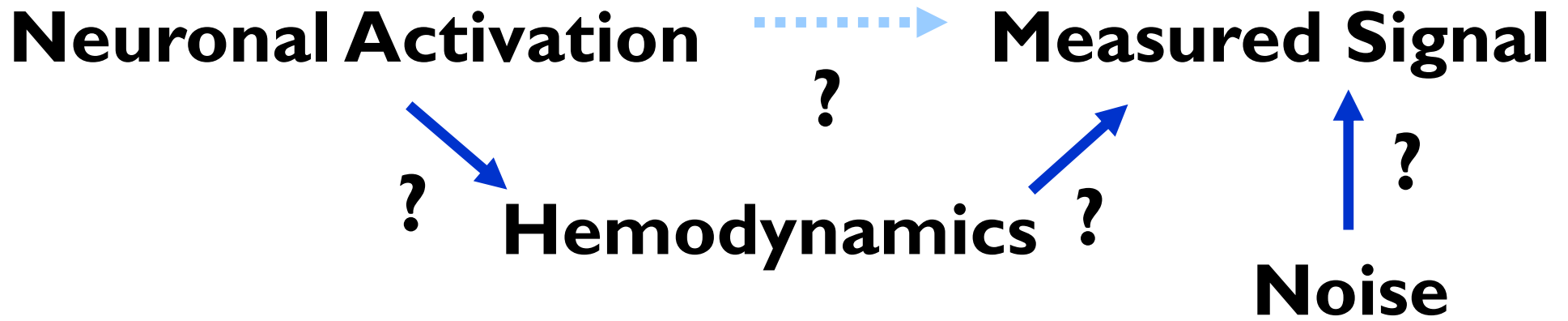
# Extracting Information from the fMRI Signal:

- **Spatial Resolution**
- **Temporal Resolution**
- **Sensitivity**

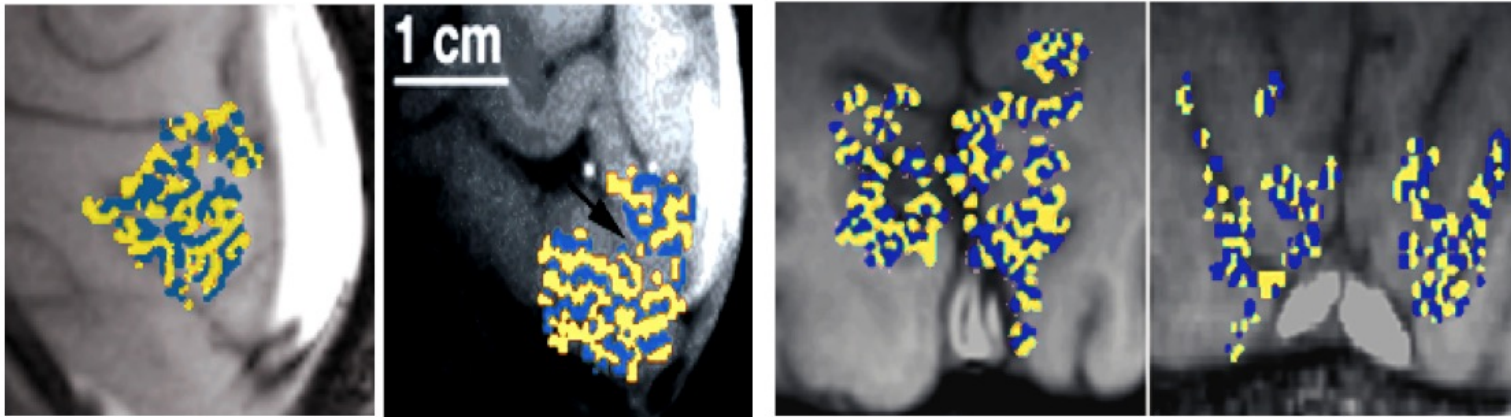
$$\text{Signal} = S_0 e^{-TE/T2^*}$$





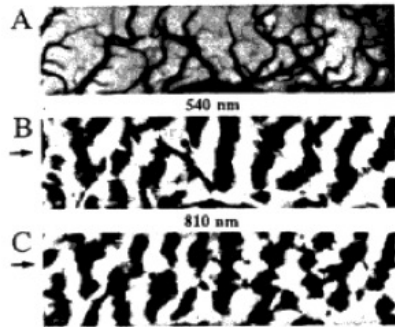


## Ocular Dominance Column Mapping

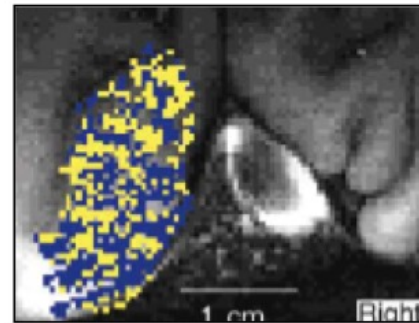


Menon, R. S., S. Ogawa, et al. (1997). *J Neurophysiol* 77(5): 2780-7.  
0.54 x 0.54 in plane resolution

### Optical Imaging



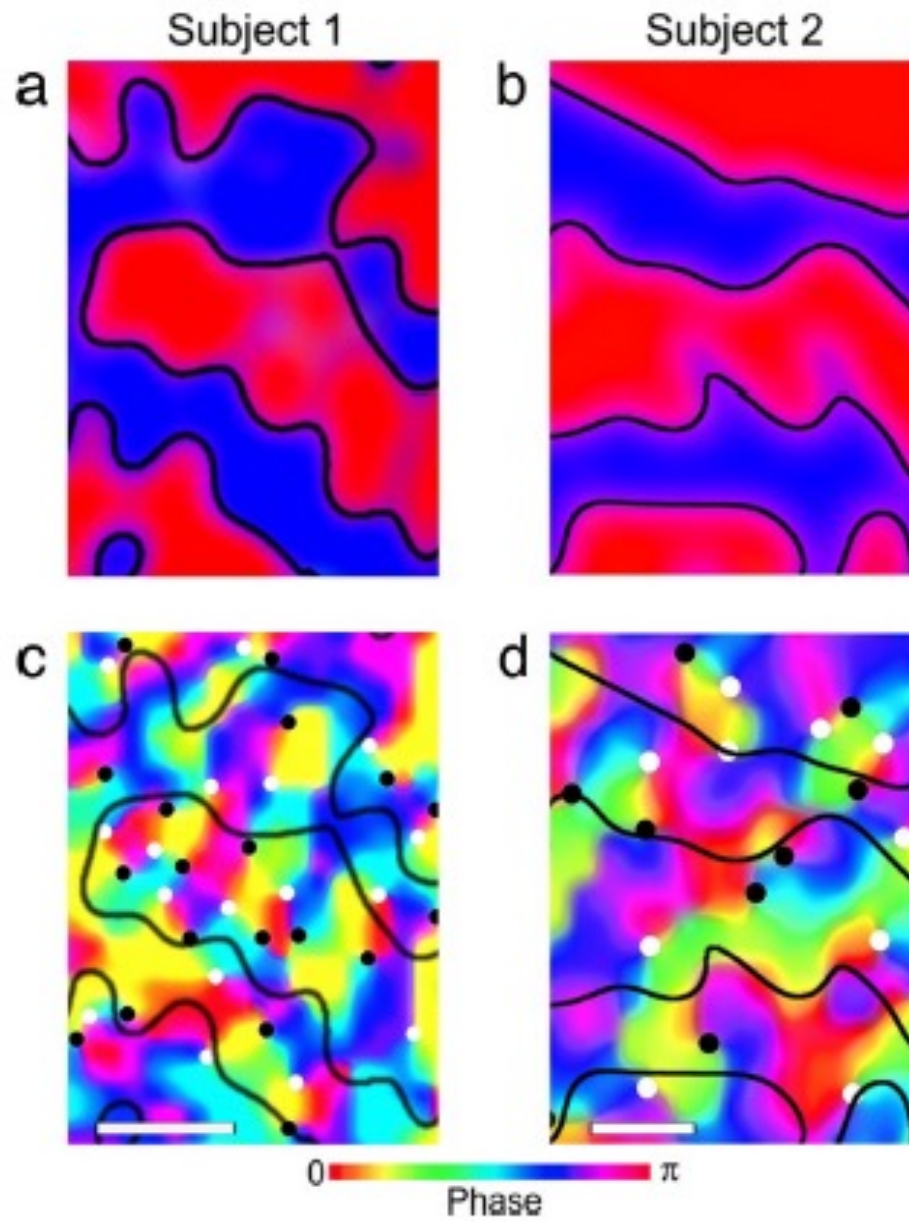
R. D. Frostig et al, *PNAS*  
87: 6082-6086, (1990).



Cheng, et al. (2001)  
*Neuron*, 32:359-374

0.47 x 0.47 in plane resolution

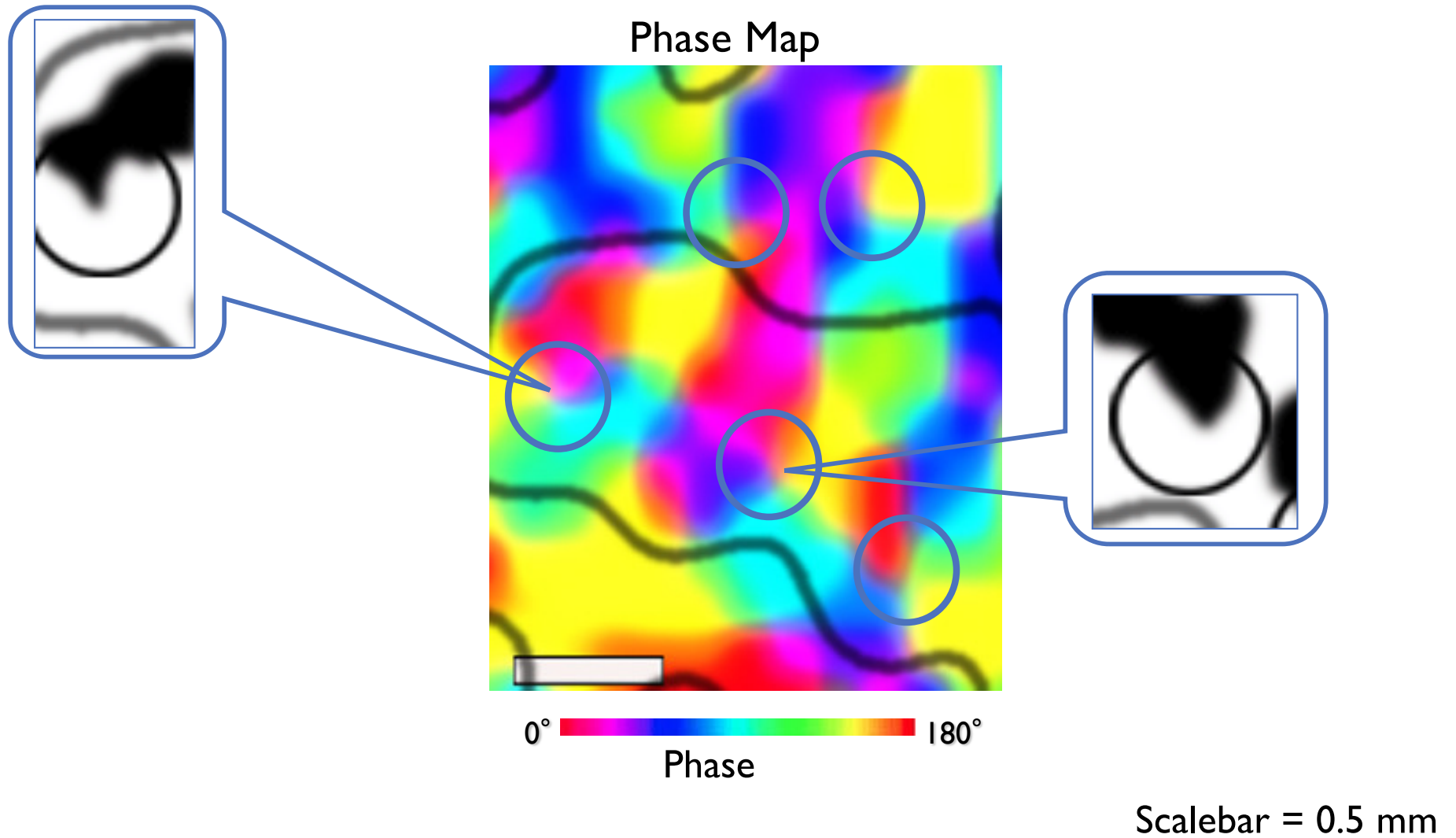
3.5mm at 1.5T (S. Engel et al - 1994)  
3.9mm (GE), 3.4mm (SE) at 3T ( L. Parkes et al - 2005 )  
2.3 mm at 7T (A. Schmuell et al - 2007)



**Yacoub et al. PNAS 2008**



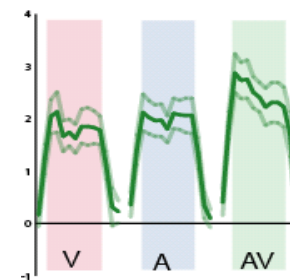
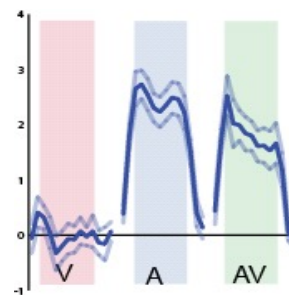
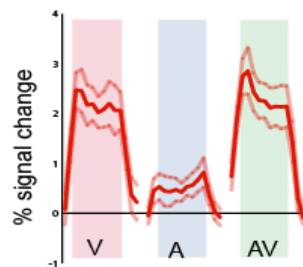
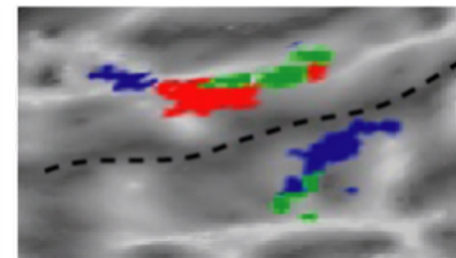
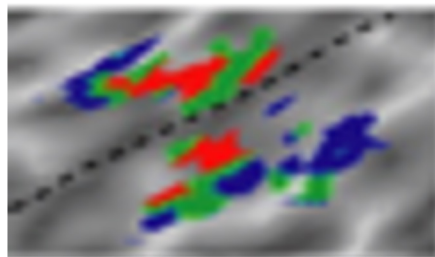
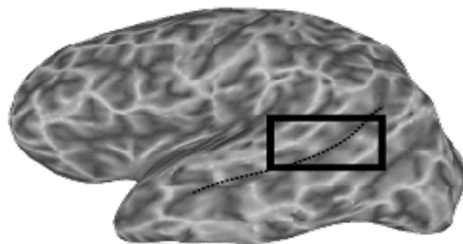
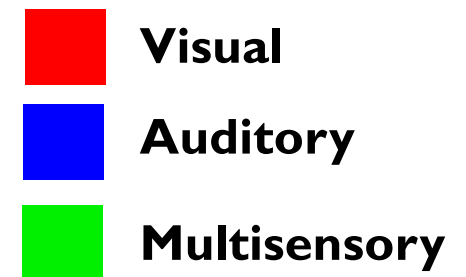
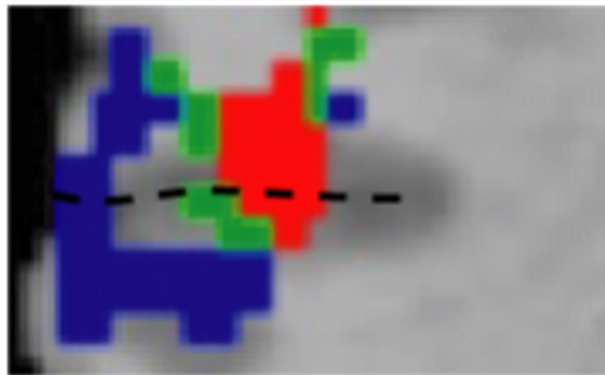
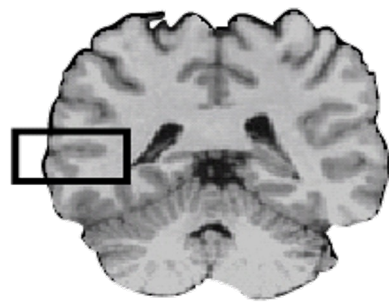
# Orientation Columns in Human VI as Revealed by fMRI at 7T



**Yacoub et al. PNAS 2008**

# Multi-sensory integration

*M.S. Beauchamp et al.,*

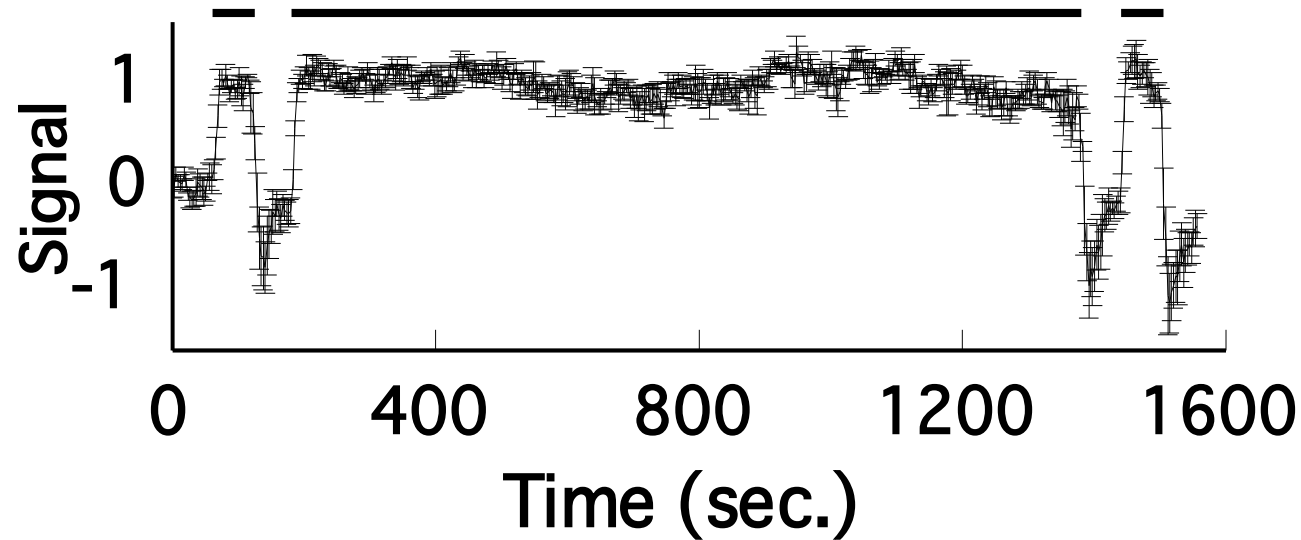


# Extracting Information from the fMRI Signal:

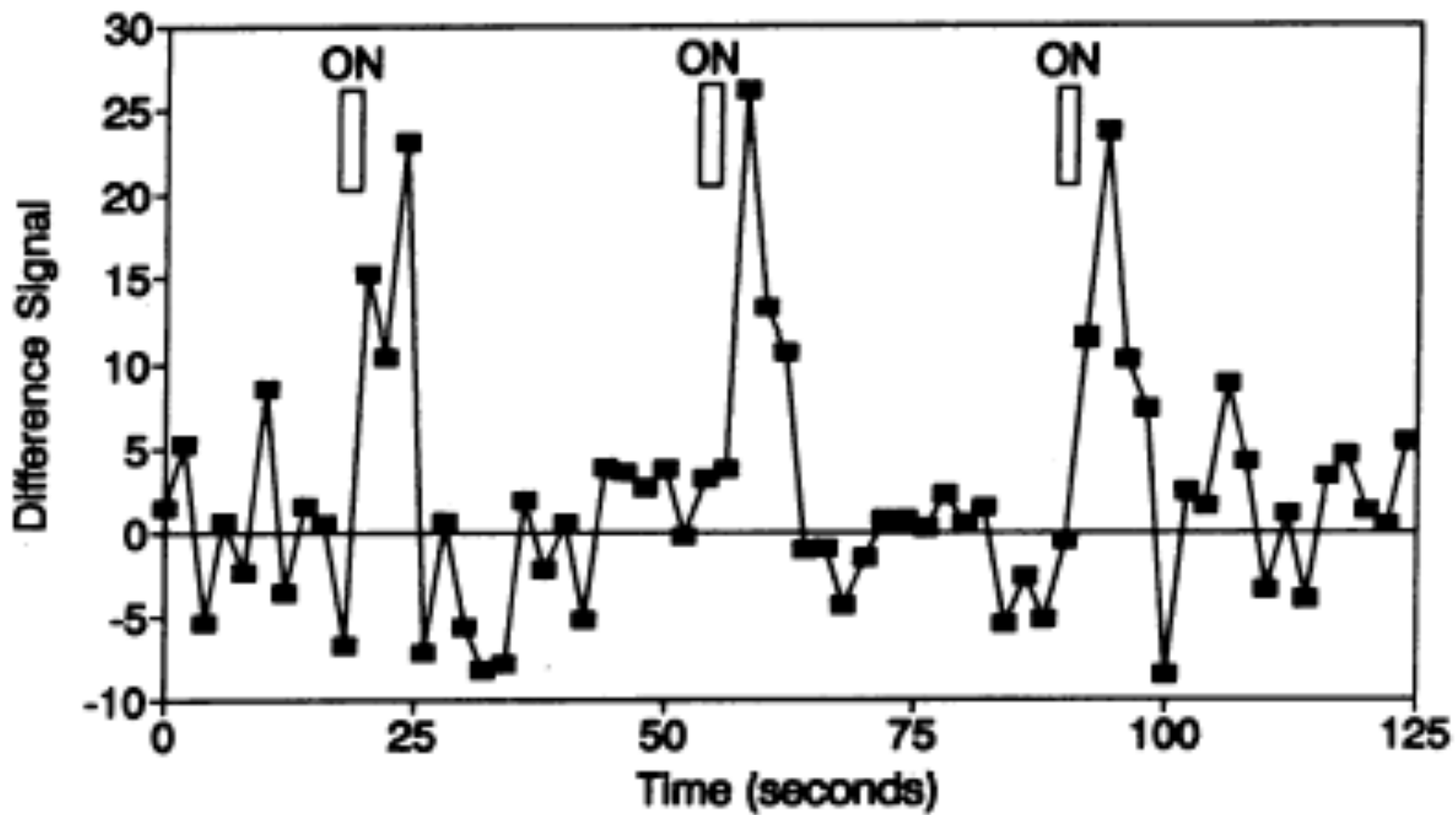
- **Spatial Resolution**
- **Temporal Resolution**
- **Sensitivity**

**20 minutes continuous activation**

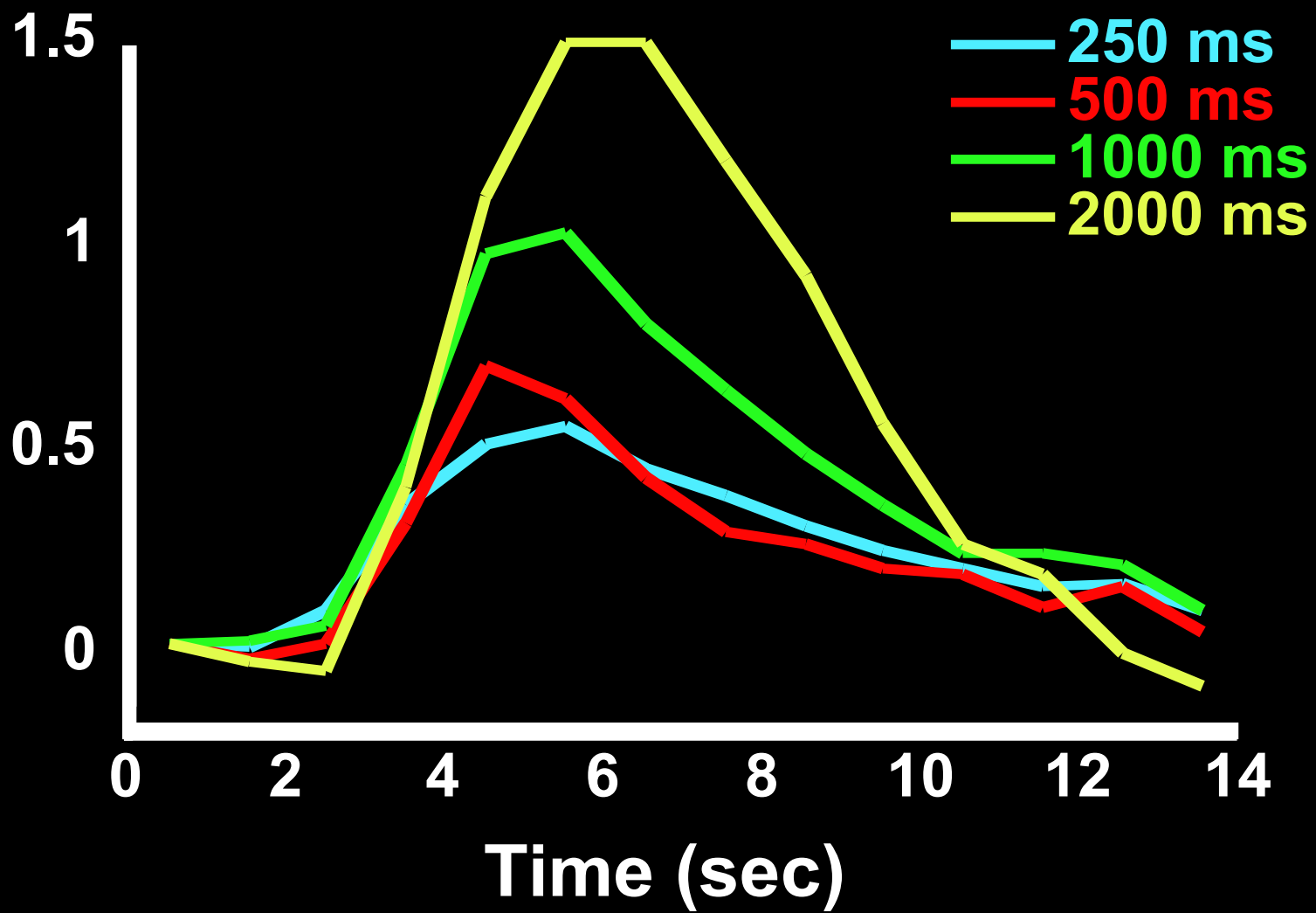
**T2\* - Weighted**



**P.A. Bandettini, K. K. Kwong, T. L. Davis, R. B. H. Tootell, E. C. Wong, P.T. Fox, J.W. Belliveau, R. M. Weisskoff, B. R. Rosen, (1997). "Characterization of cerebral blood oxygenation and flow changes during prolonged brain activation." *Human Brain Mapping* 5, 93-109.**

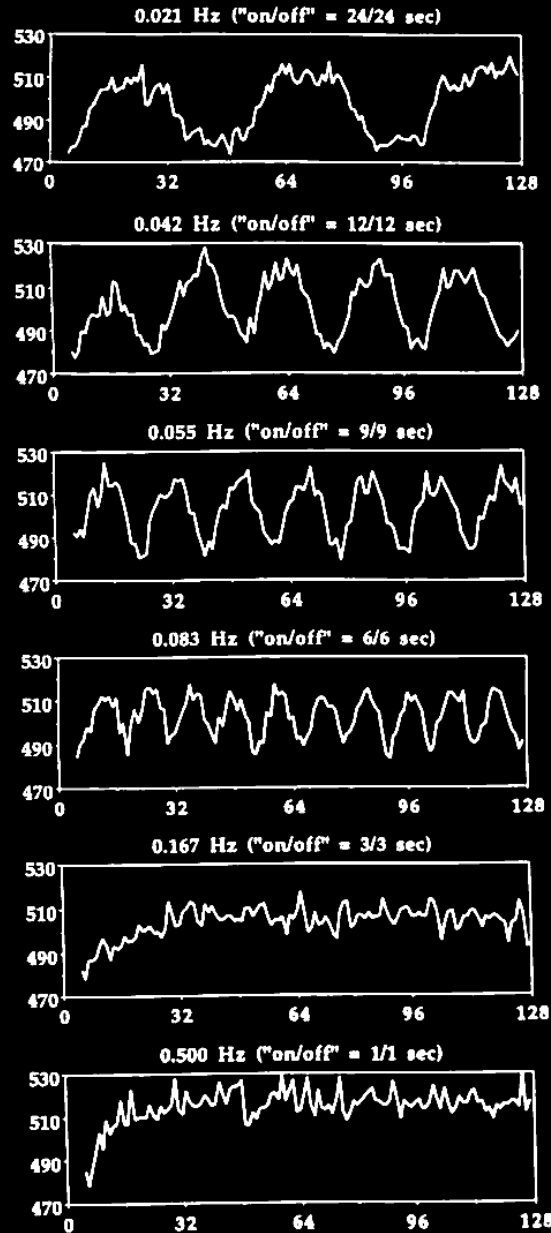




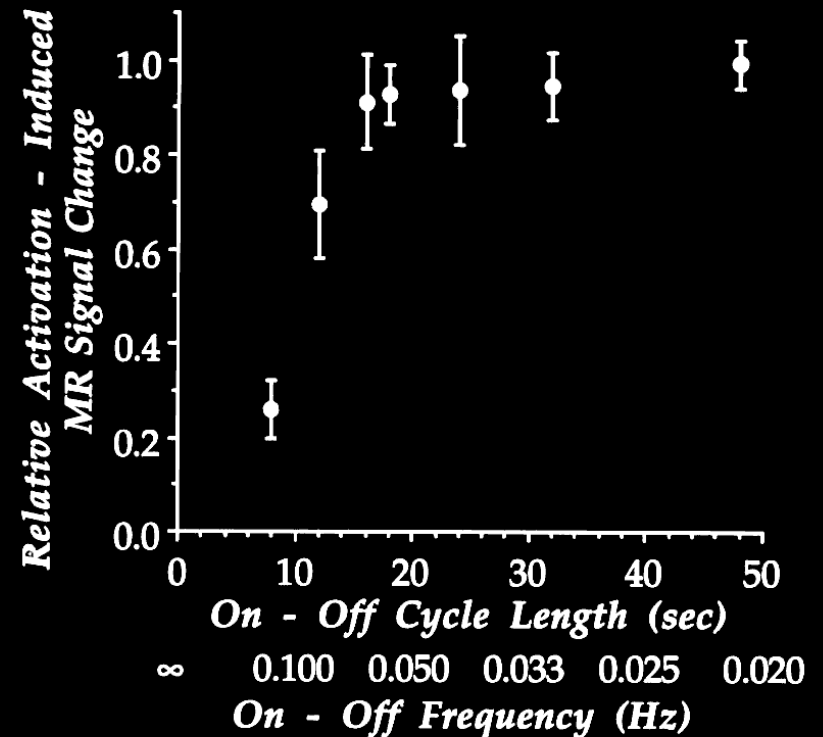


## How rapidly can one switch on and off?

MRI Signal



Time (seconds)

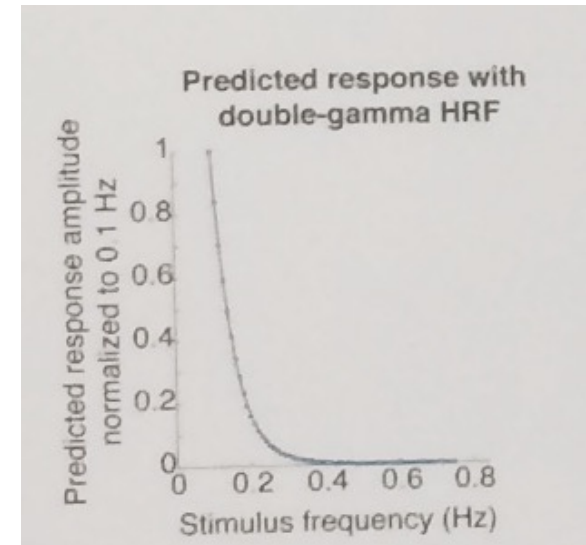
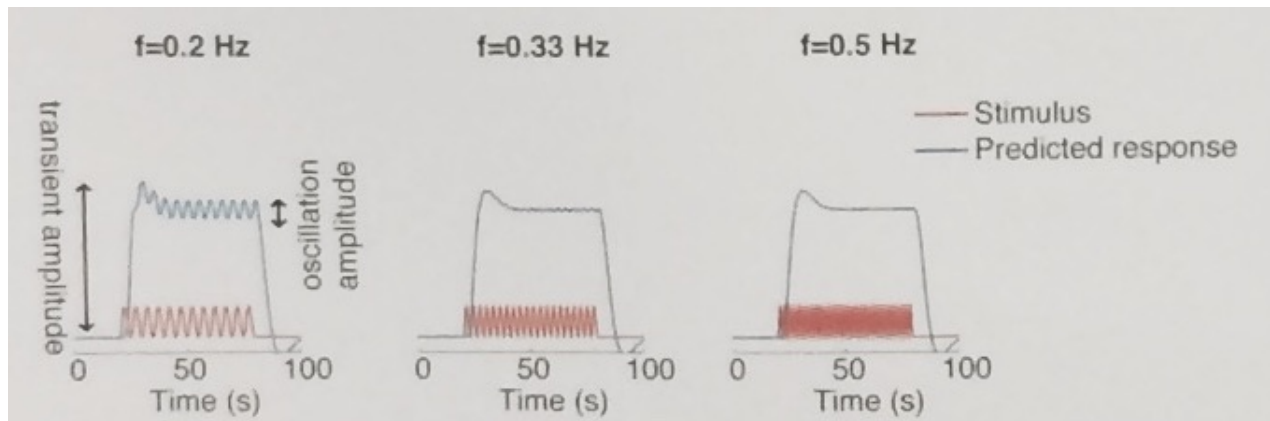


P. A. Bandettini., Functional MRI using the BOLD approach: dynamic characteristics and data analysis methods, in "Diffusion and Perfusion: Magnetic Resonance Imaging" (D. L. Bihan, Ed.), p.351-362, Raven Press, New York, 1995.

# Detection of delta-band oscillations in visual cortex using fast fMRI and simultaneous EEG-fMRI

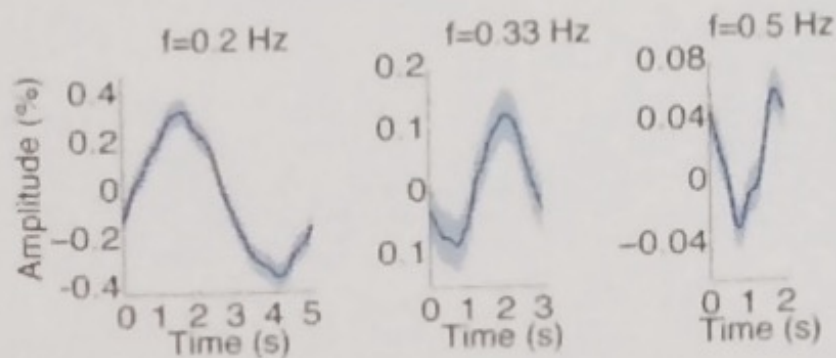
Laura D. Lewis, Kawin Setsompop, Bruce R. Rosen, Jonathan R. Polimeni

OHBM 2015

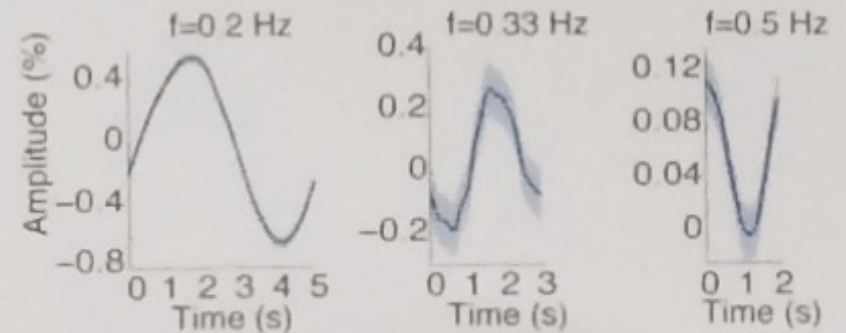


## fMRI responses in V1 can be reliably detected up to 0.5 Hz

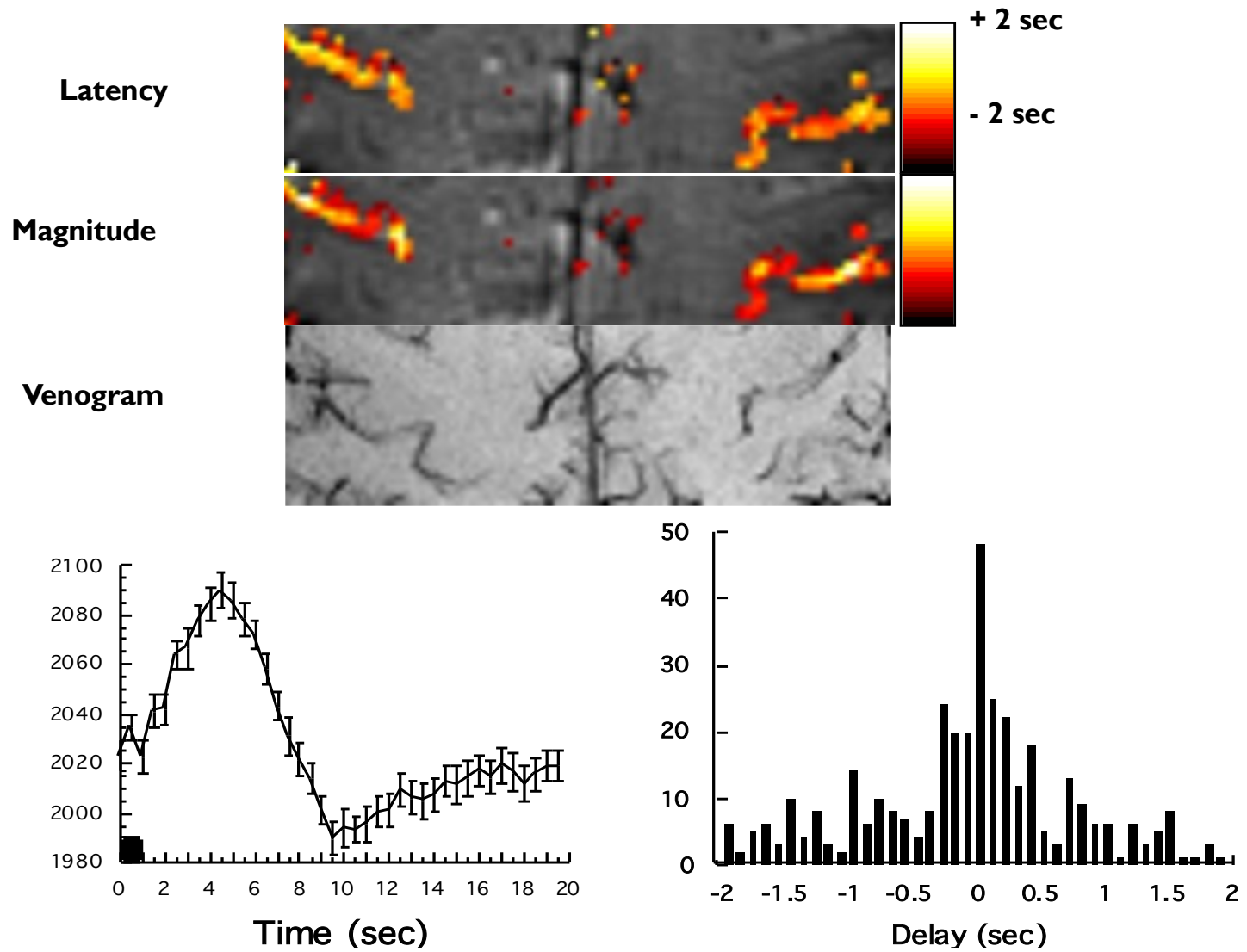
Experiment 1 (9 subjects)



Experiment 2 (11 subjects)



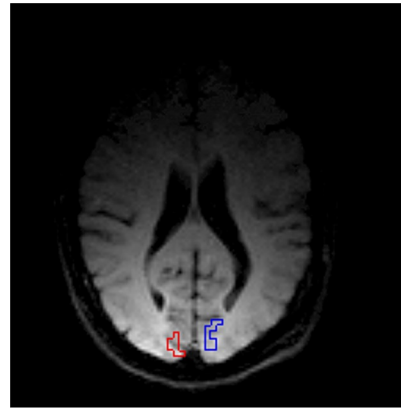
## Latency Variation...



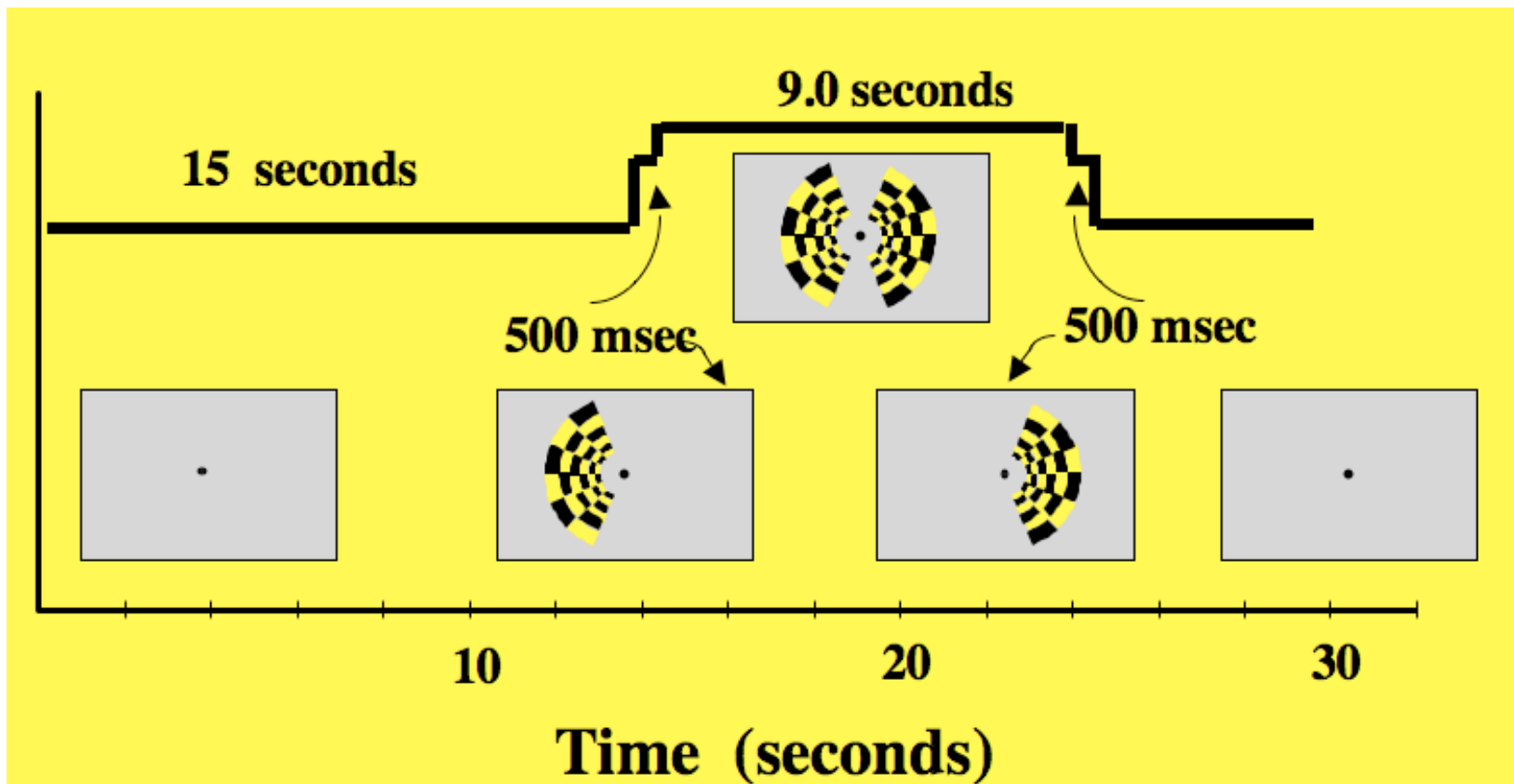
P.A. Bandettini, (1999) "Functional MRI" 205-220.

# Hemi-Field Experiment

Right Hemisphere

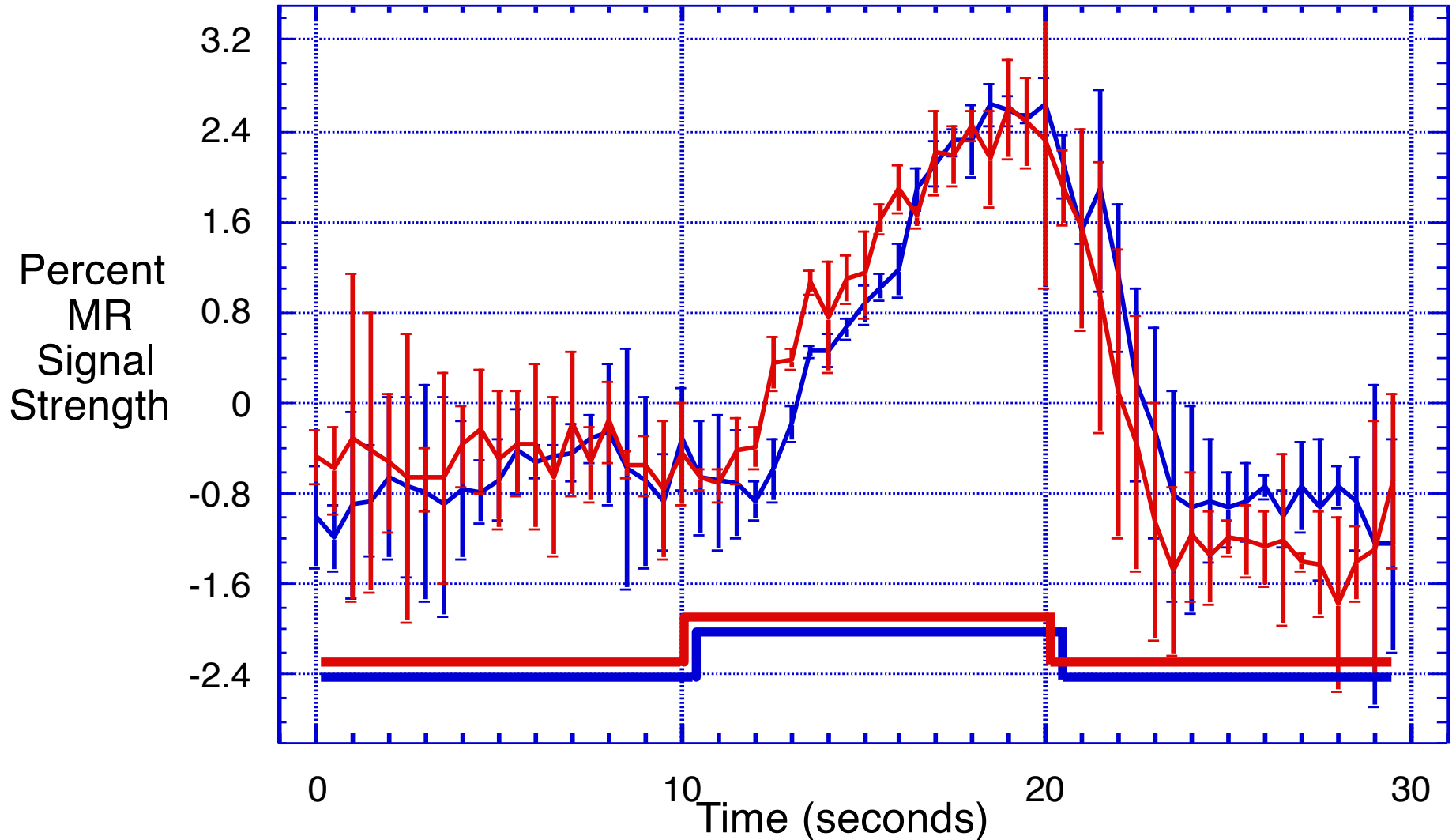


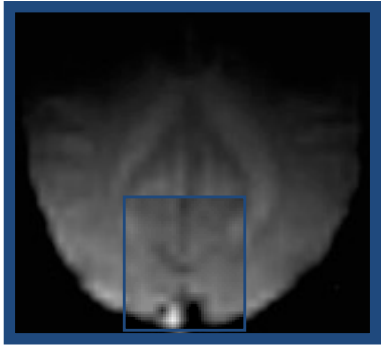
Left Hemisphere



# Hemi-field with 500 msec asynchrony

Average of 6 runs

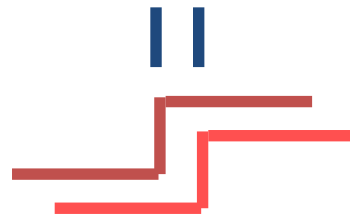
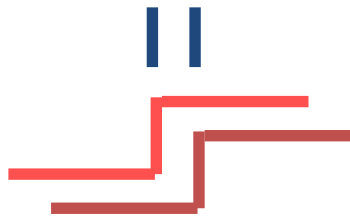




Timing

500 ms

500 ms



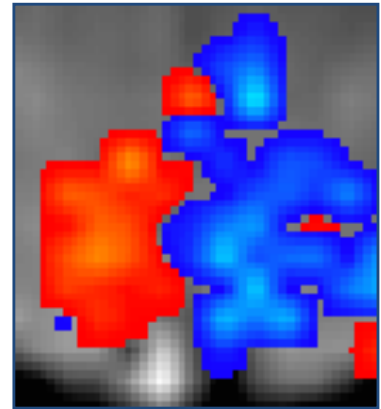
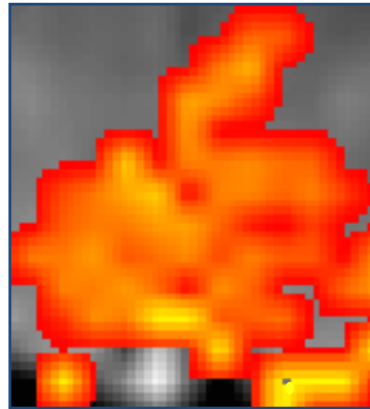
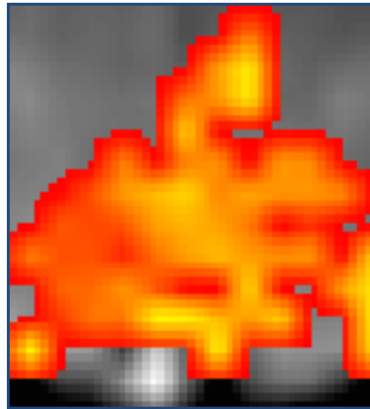
Right Hemifield

Left Hemifield

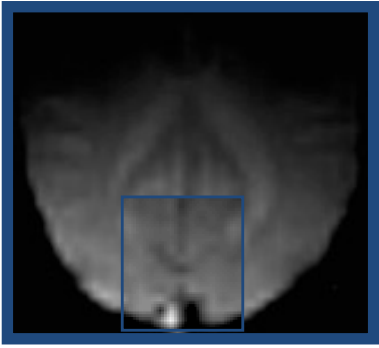
+ 2.5 s

0 s

- 2.5 s



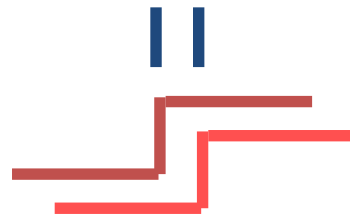
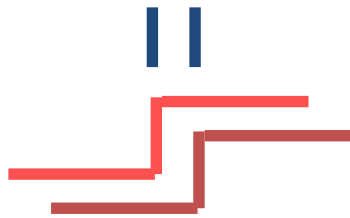




Timing

250 ms

250 ms



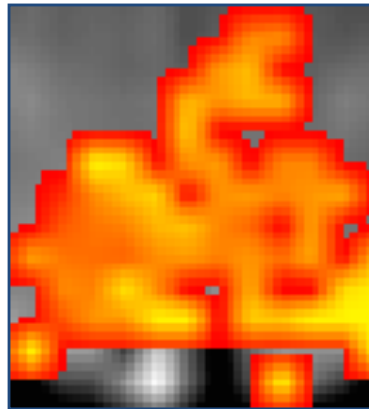
Right Hemifield

Left Hemifield

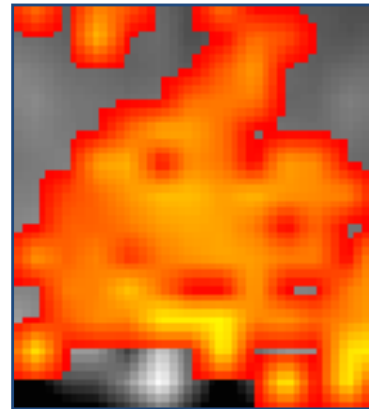
+ 2.5 s

0 s

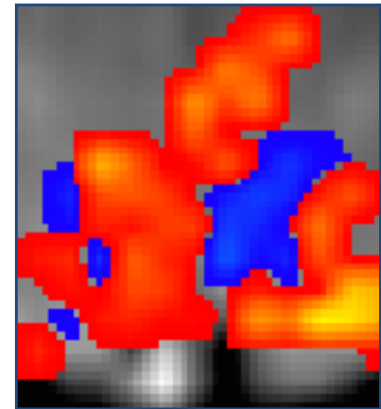
- 2.5 s



-



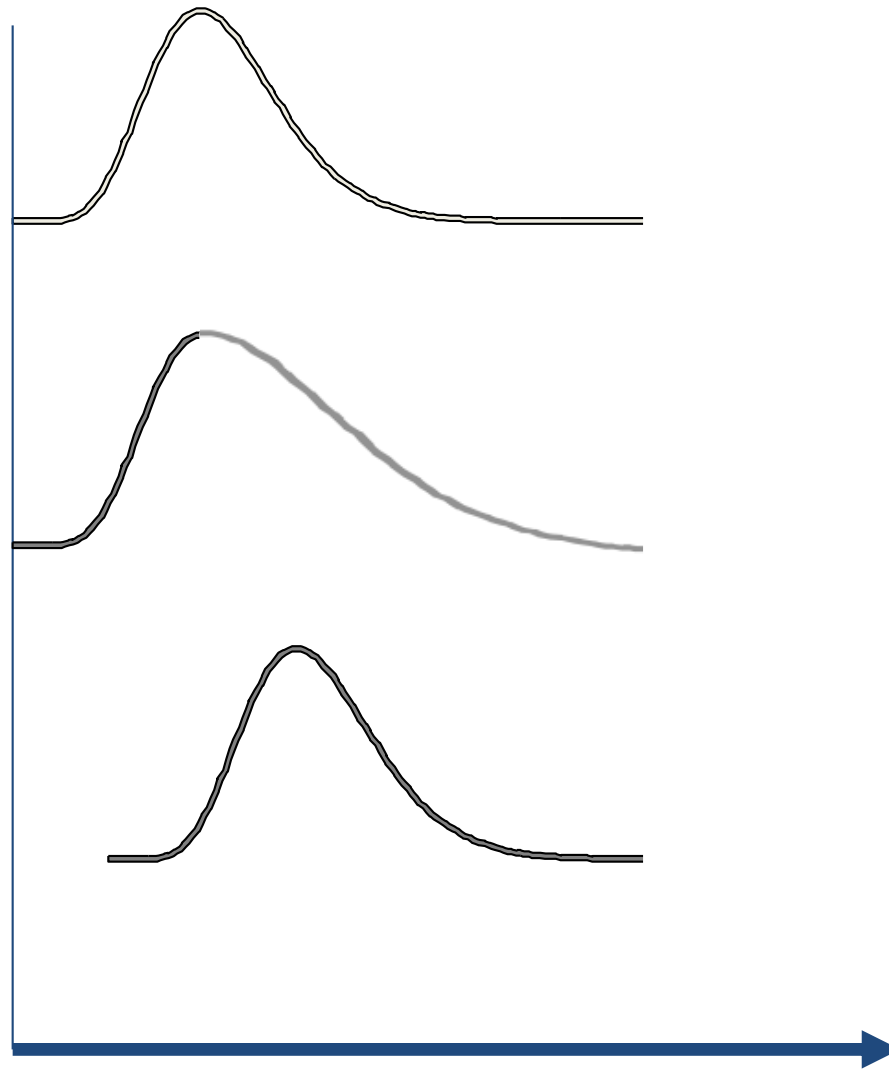
=



## Hemodynamic Response Modulation

**Bottleneck  
In Processing  
(upstream)**

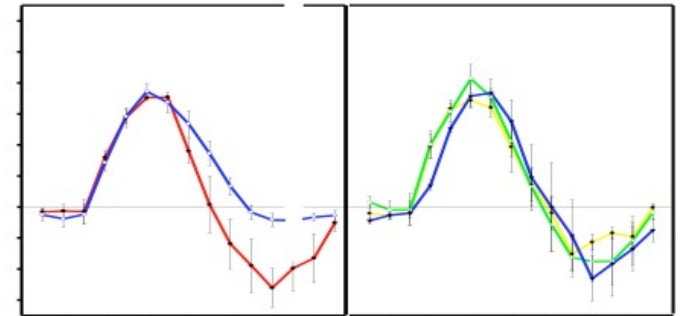
**Delayed  
Processing  
(downstream)**



Word vs. Non-word

0°, 60°, 120° Rotation

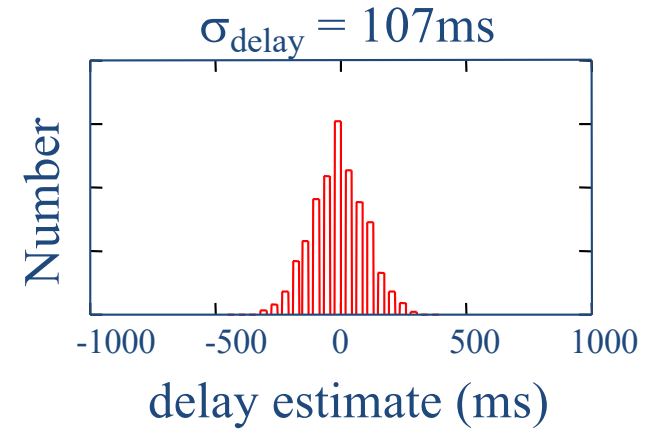
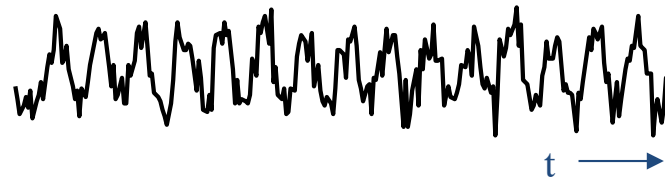
		Lexical Delay		Mean Reaction Time
		Words	Non-Words	
Rotational Delay	0°	smudge	dierts	823 ms
	60°	frollic	cuhlos	891 ms
	120°	slouch	gedrup6	1446 ms
Mean Reaction Time		986 ms	1219 ms	



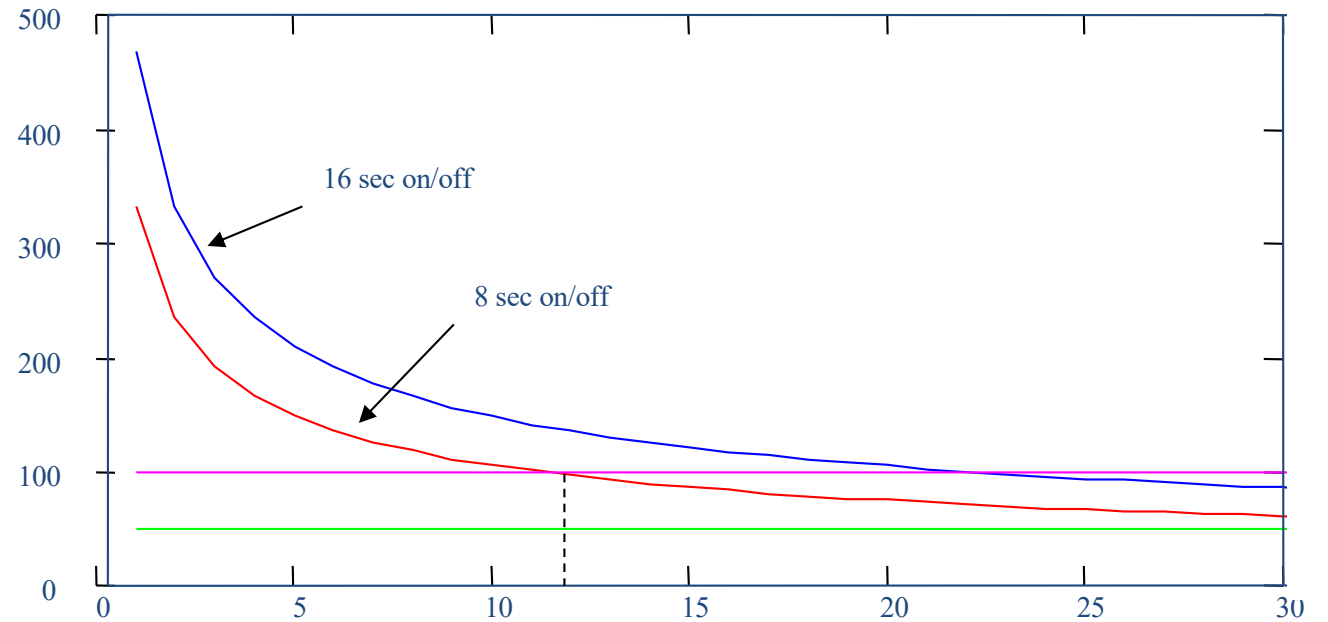
# Even if no hemodynamic variability exists...

1 run:

1% Noise  
4% BOLD  
256 time pts /run  
1 second TR



Smallest latency  
Variation Detectable  
(ms) ( $p < 0.001$ )

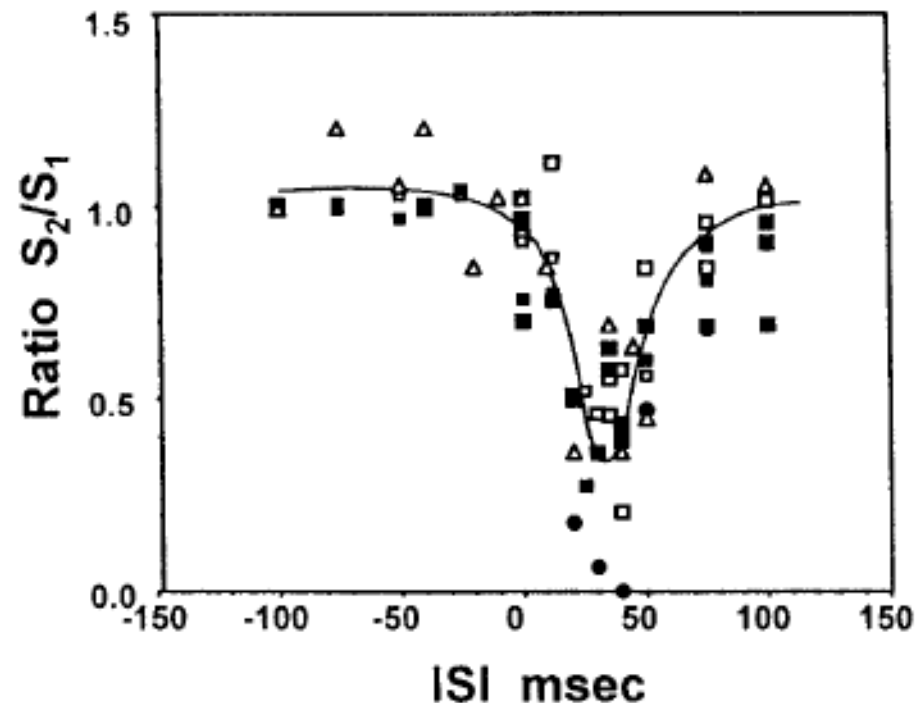


11

Number of runs

# An approach to probe some neural systems interaction by functional MRI at neural time scale down to milliseconds

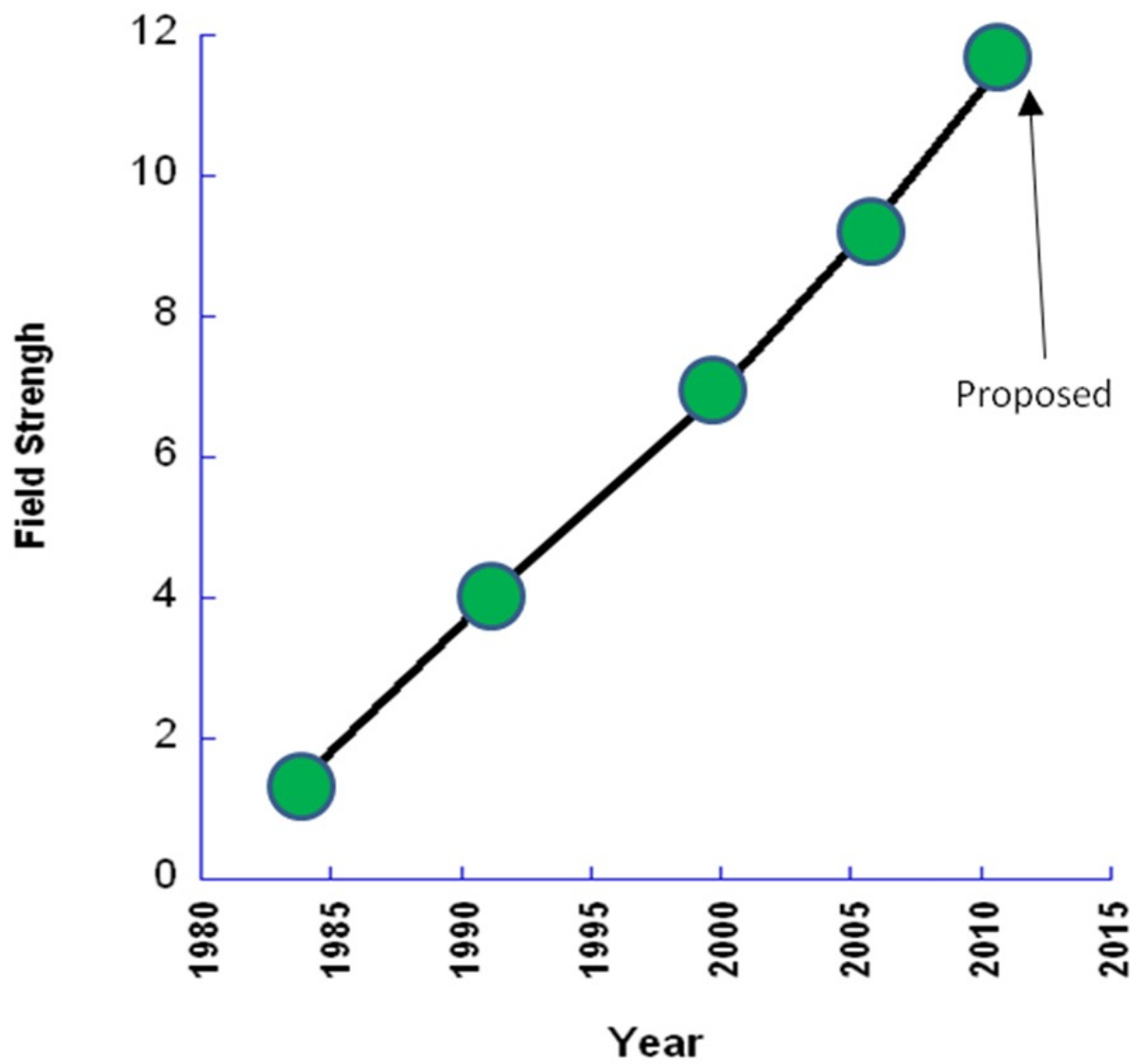
Seiji Ogawa<sup>††</sup>, Tso-Ming Lee<sup>†</sup>, Ray Stepnoski<sup>†</sup>, Wei Chen<sup>§</sup>, Xiao-Hong Zhu<sup>§</sup>, and Kamil Ugurbil<sup>§</sup>



# Extracting Information from the fMRI Signal:

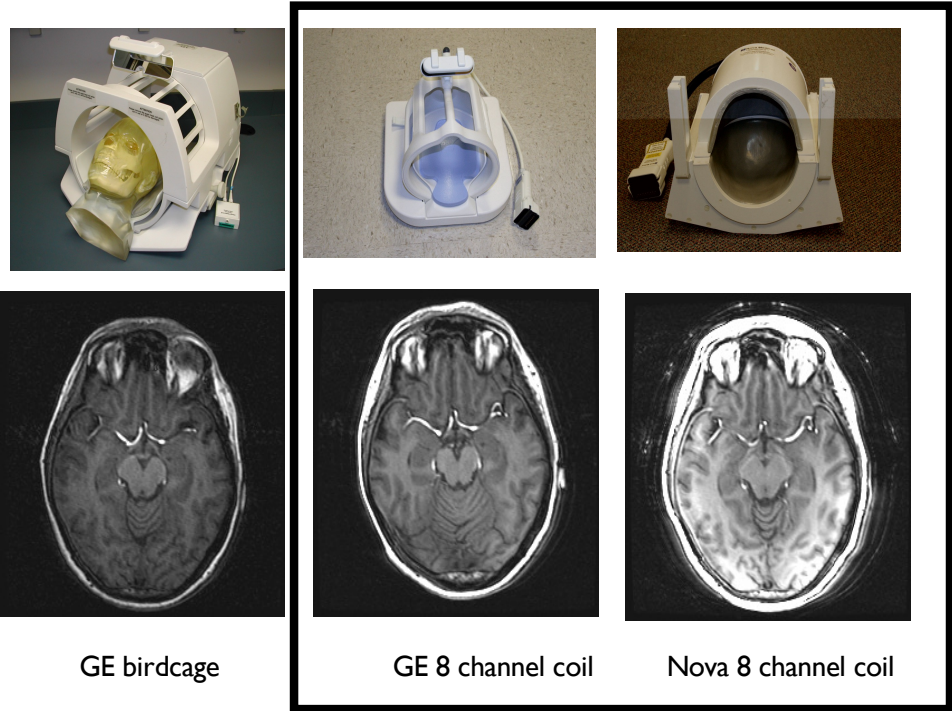
- **Spatial Resolution**
- **Temporal Resolution**
- **Sensitivity**

### Progression of Human MRI Field Strength

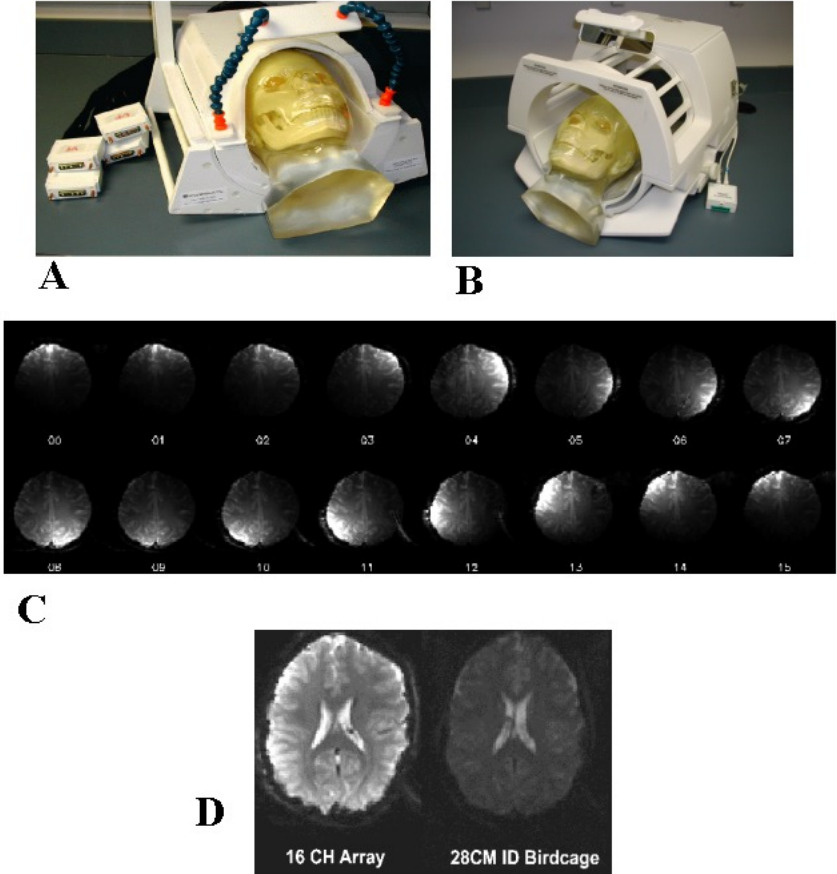




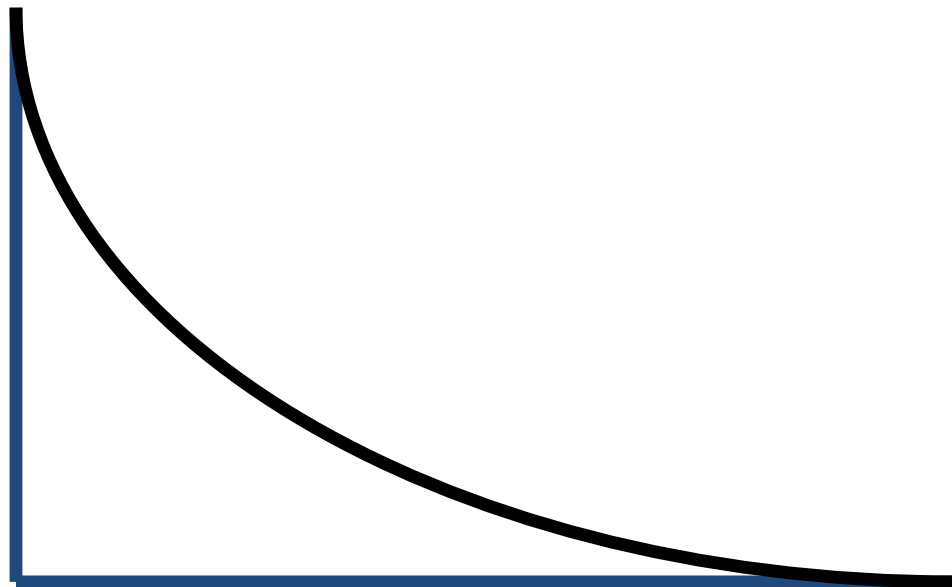
### 8 channel parallel receiver coil



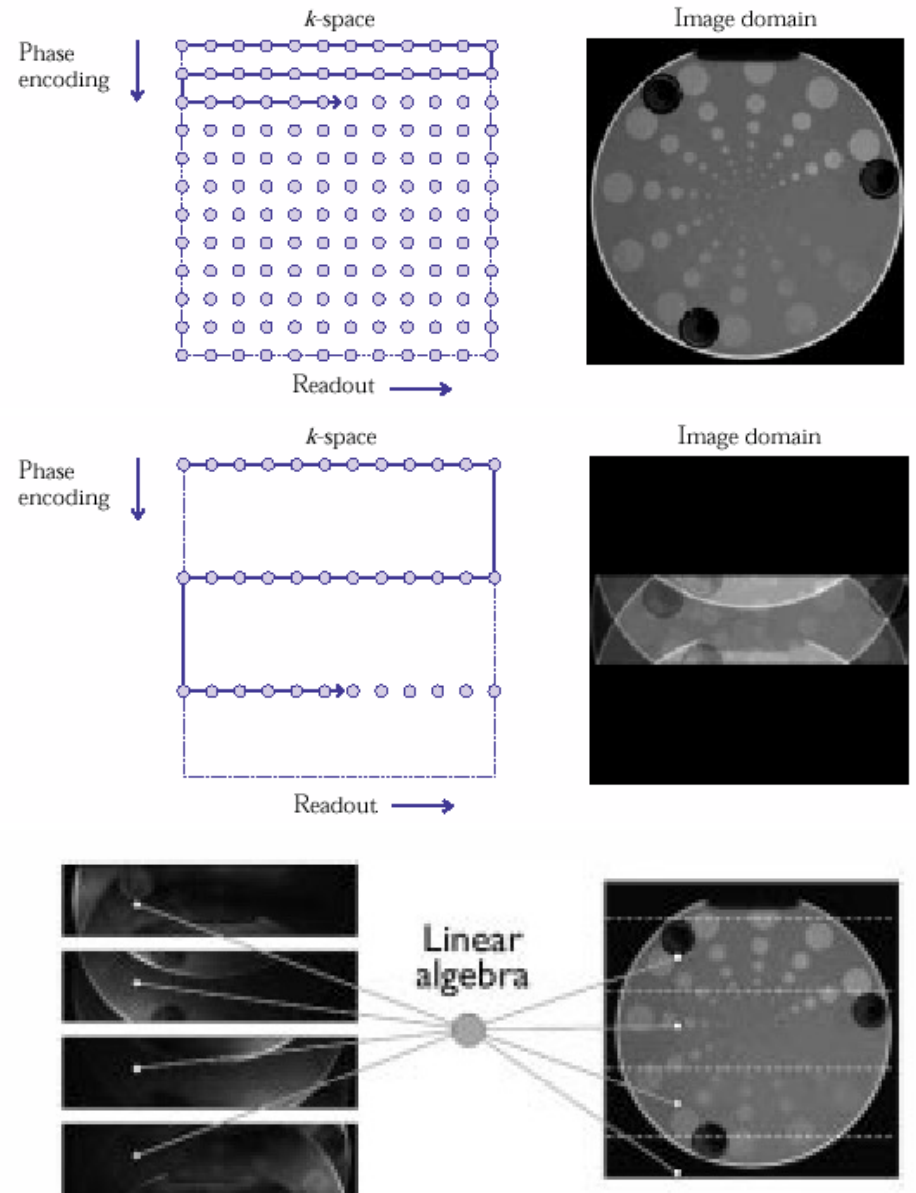
### 16 channel parallel receiver coil



# SENSE Imaging

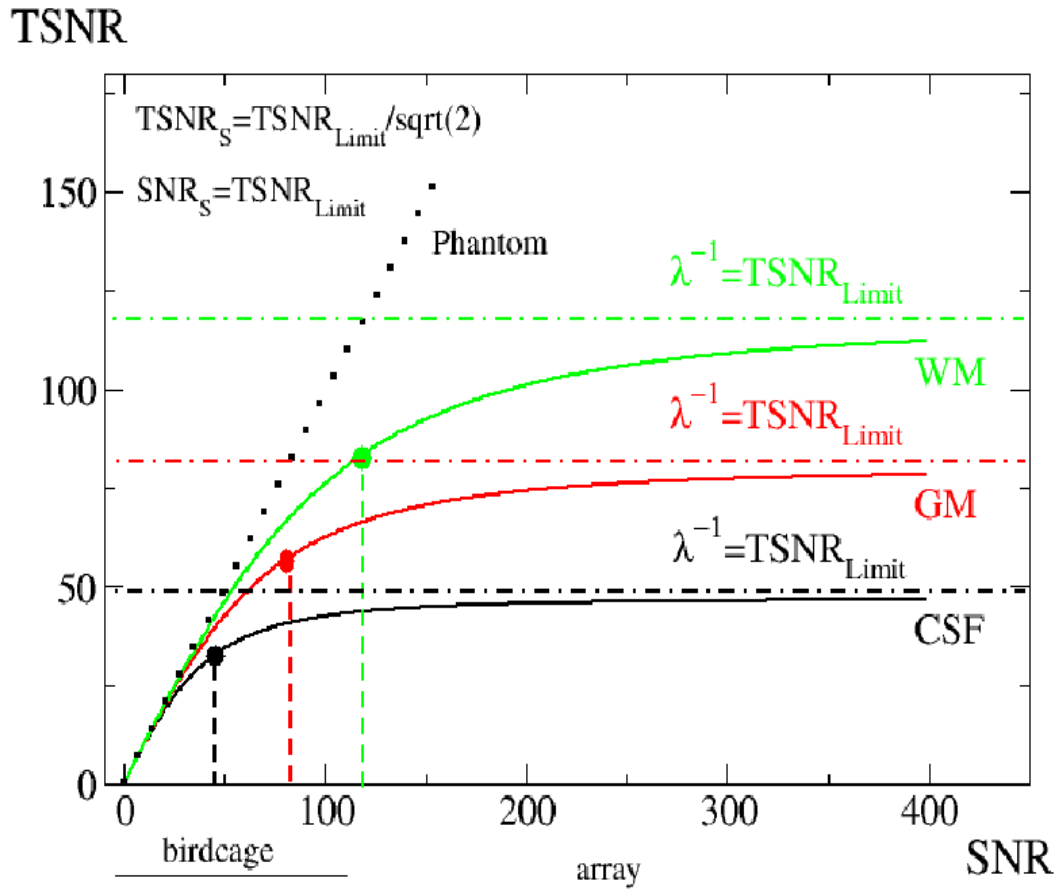


$\approx 5$  to  $30$  ms



Pruessmann, et al.

Temporal Signal to Noise Ratio (TSNR) vs. Signal to Noise Ratio (SNR)



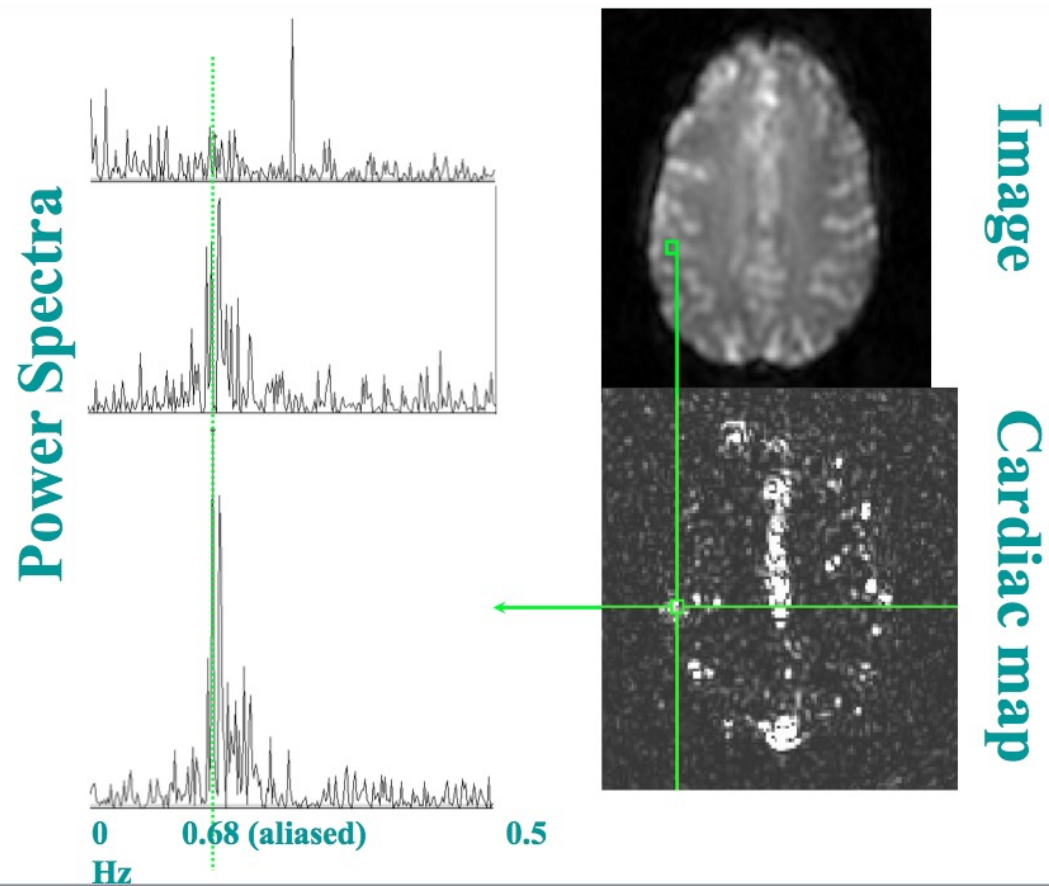
## Sources of time series fluctuations:

- Blood, brain and CSF pulsation
- Vasomotion
- Breathing cycle ( $B_0$  shifts with lung expansion)
- Bulk motion
- Scanner instabilities
- Changes in blood  $CO_2$  (changes in breathing)
- Spontaneous neuronal activity

# What information can we extract using MRI / fMRI?

## Heart Rate

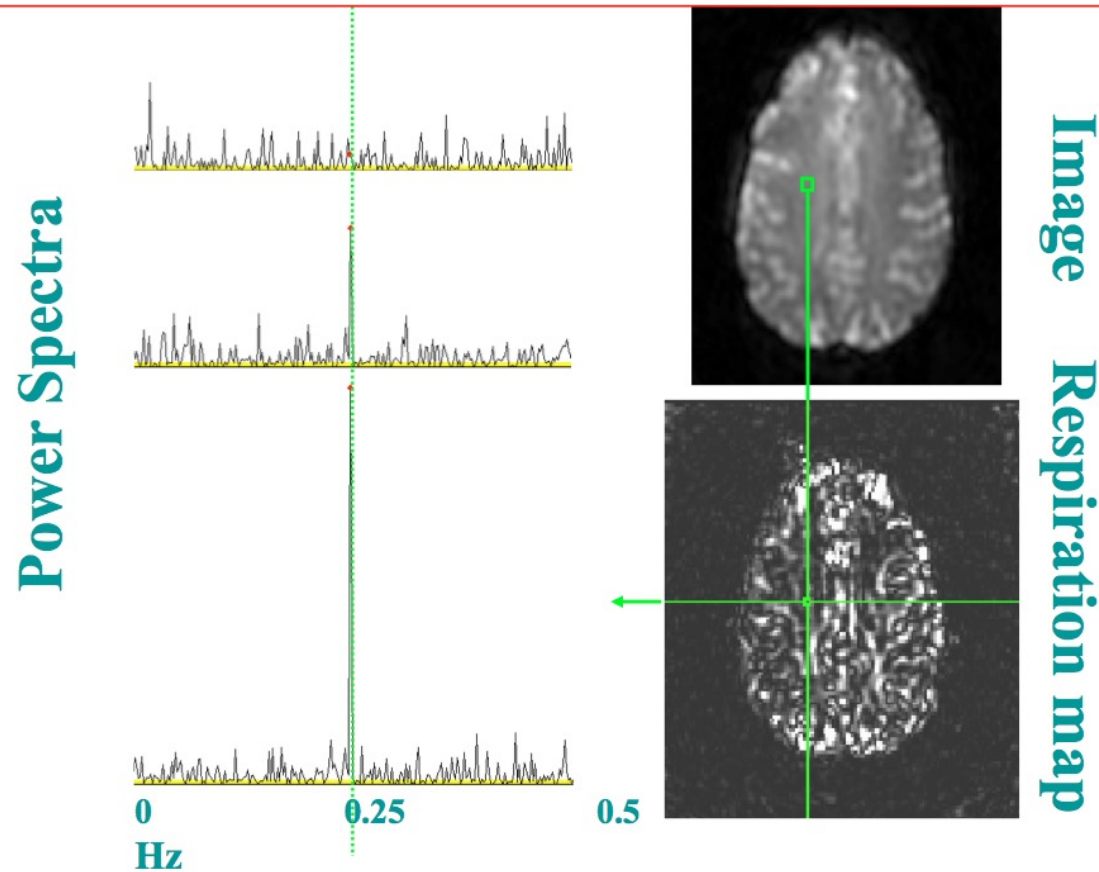
### 0.68 Hz Cardiac rate at 3T



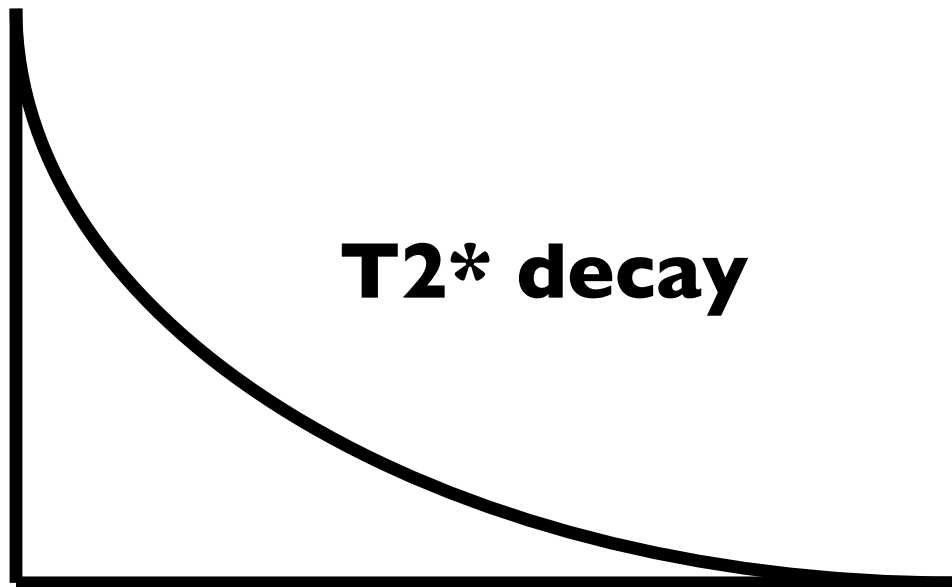
# What information can we extract using MRI / fMRI?

## Respiration Rate

**0.25 Hz Breathing at 3T**

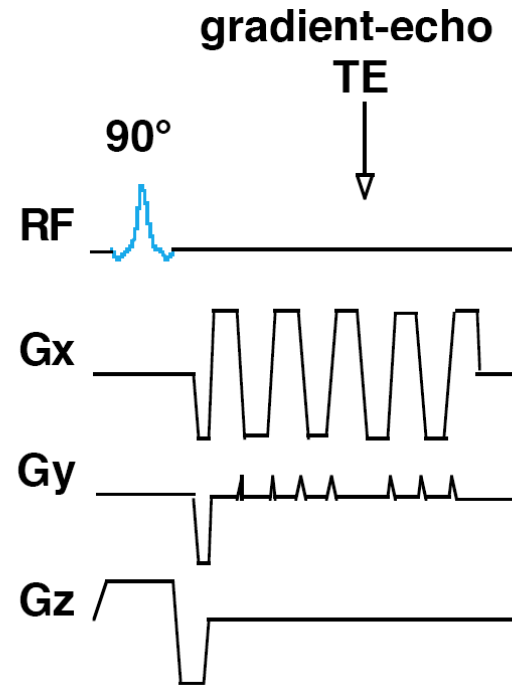


# Single Shot Echo Planar Imaging (EPI)



**EPI Readout Window**

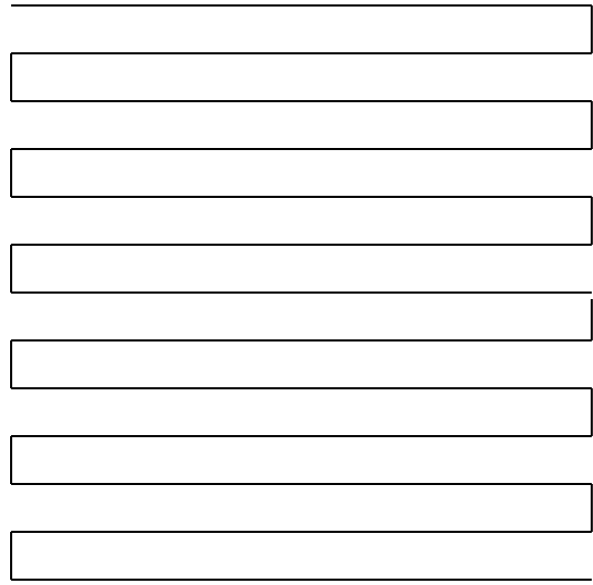
**≈ 20 to 40 ms**



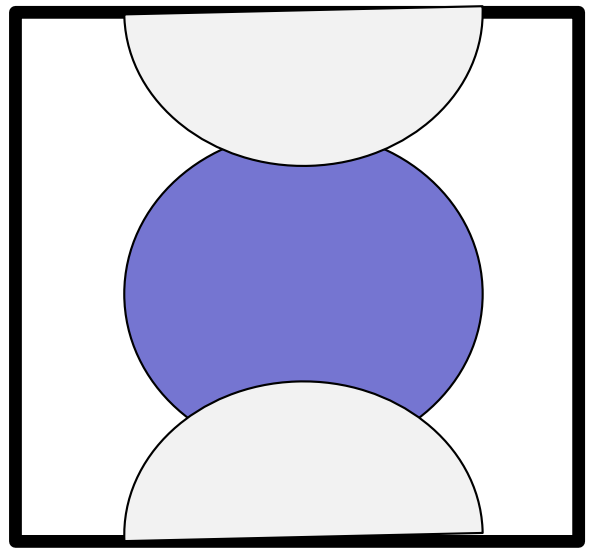
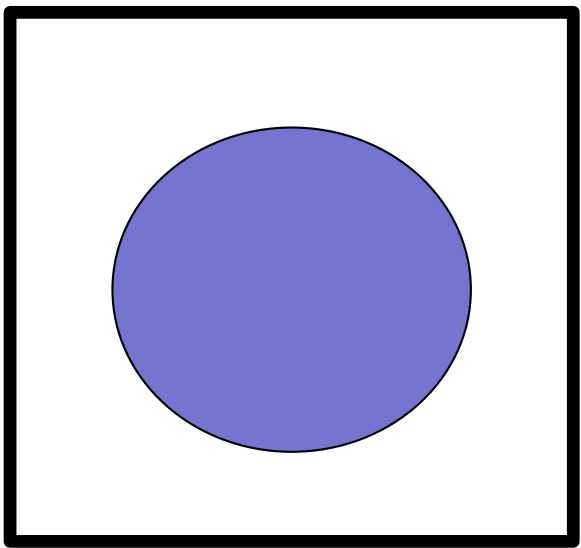
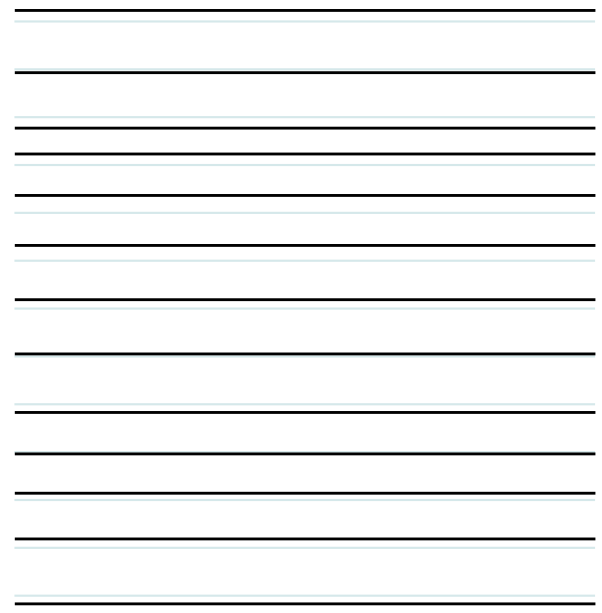
A series of ten horizontal rectangular boxes, stacked vertically, representing a list or a set of data points.



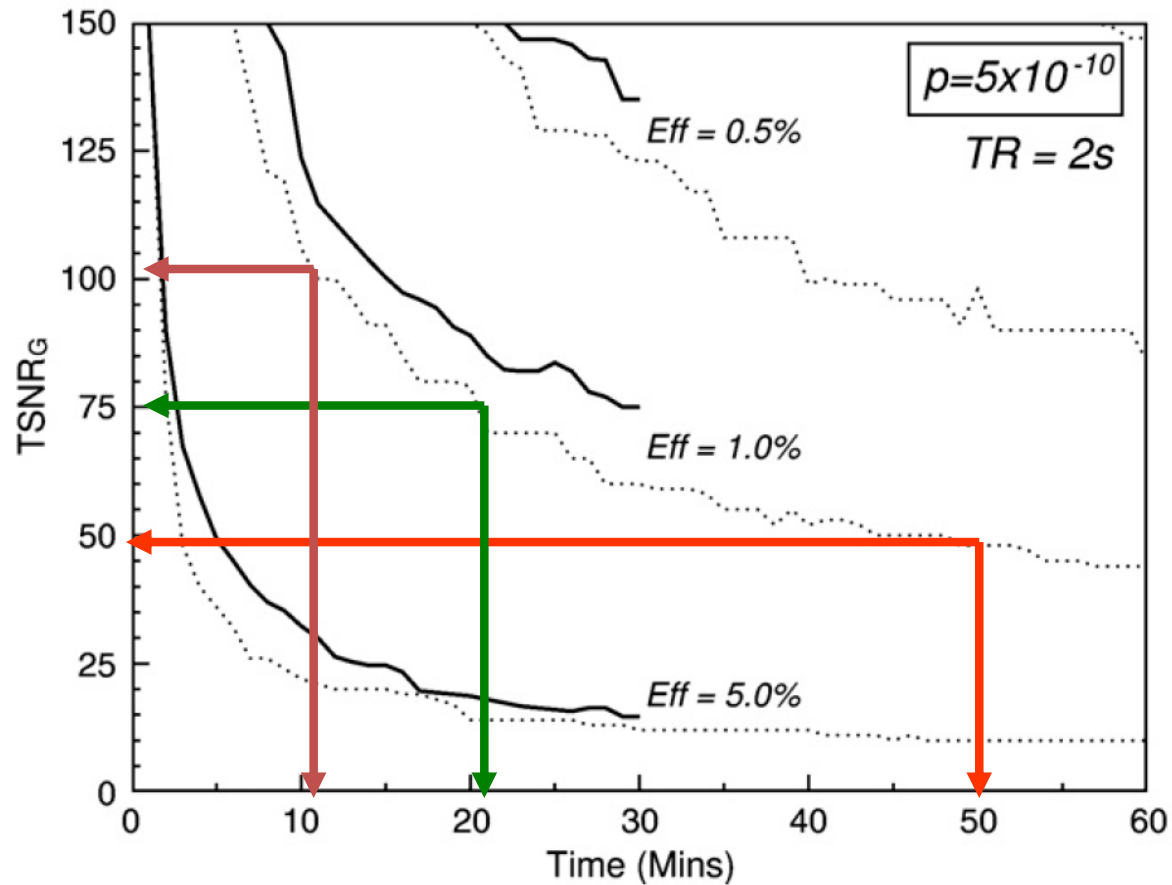
**30 ms**



**10 sec  
to  
1 min**



# Sensitivity, Scan Time, and Temporal Signal to Noise

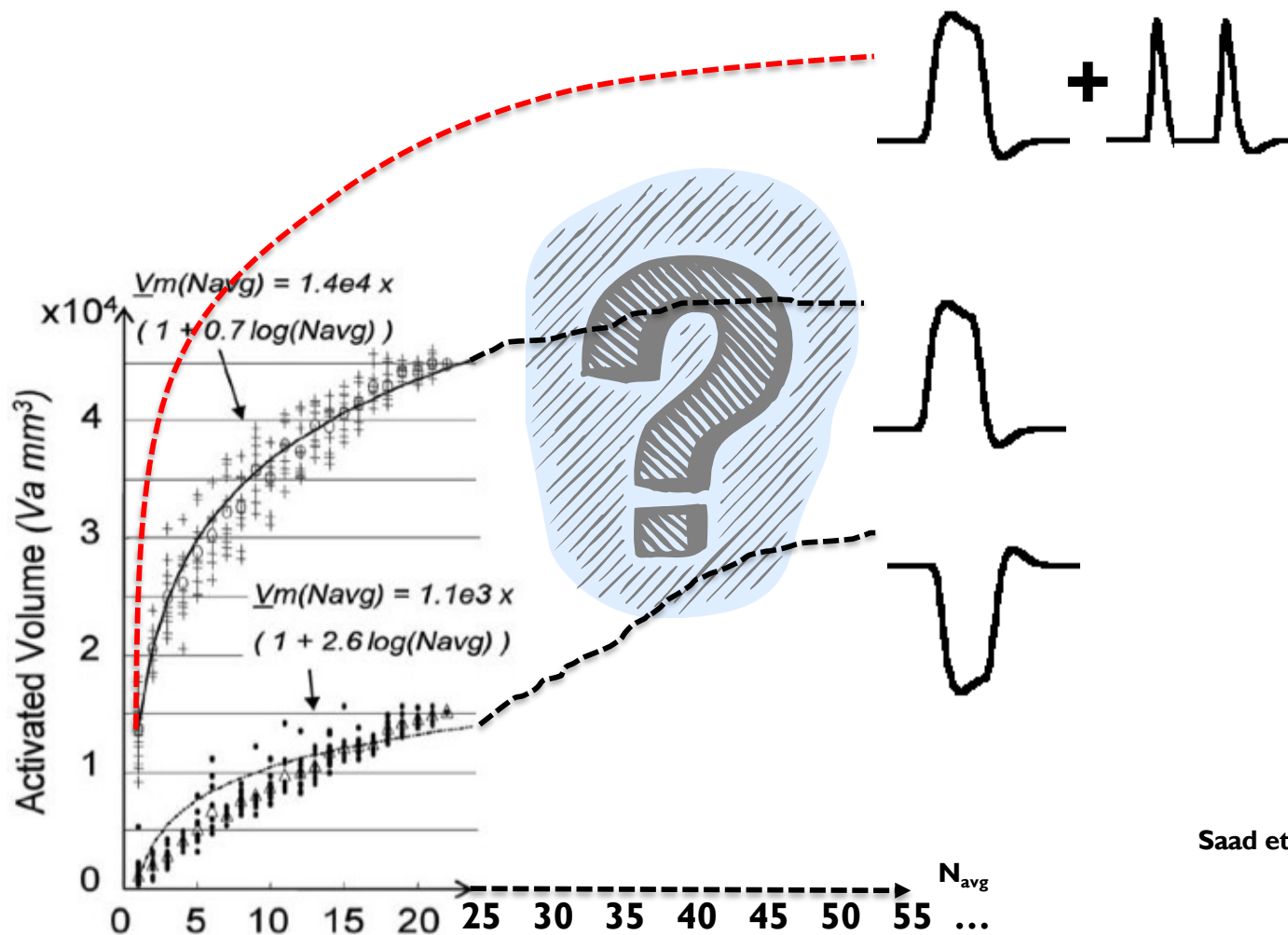


K. Murphy, J. Bodurka, P.A. Bandettini, *NeuroImage*, 34, 565-574 (2007)

IS THE SPARSENESS OF FMRI ACTIVATIONS REAL?

OR

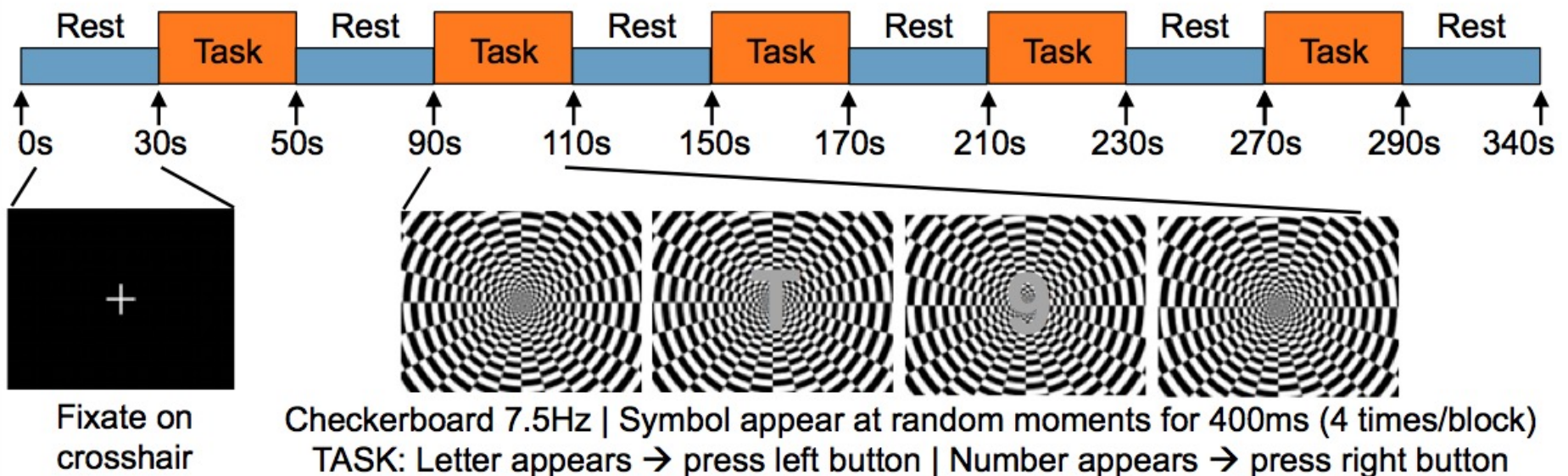
IS IT THE RESULT OF INSUFFICIENT TSNR + OVERLY STRICT RESPONSE



Saad et al

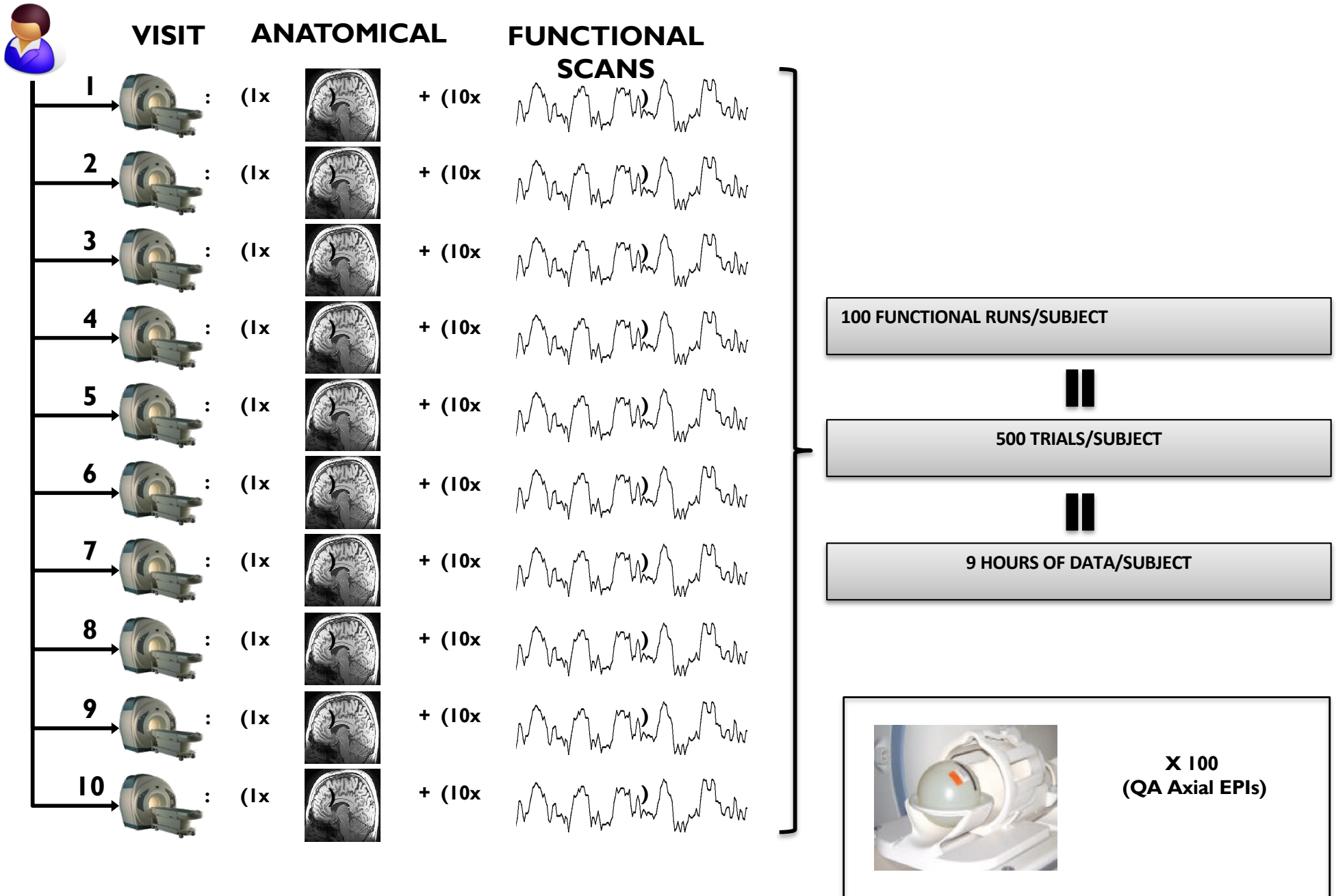
# Experimental Methods (I)

- 3 Healthy Volunteers: 1M/2F; Age =  $27 \pm 2.5$
- 3T GE Signa HDx
- Anatomical Scan: MPRAGE |  $.9 \times .9 \times 1.2 \text{ mm}^3$  | 192 Slices
- Functional Scans: GRE-EPI
  - TR/TE = 2s/30ms
  - In-Plane Res = 64x64
  - #Slices = 32 Oblique
  - **FOV = 240mm**
  - **Slice Thickness = 3.8 mm**
  - **Flip Angle = 75°**



# Experimental Methods (II)

3x



# Data Analysis

