

Comparison of stochastic and variational solutions to ASL fMRI data analysis

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What is the problem we want to solve?

- We want to go beyond traditional BOLD fMRI analysis to extract more quantitative information about task related perfusion.
- We analyse ASL fMRI with a joint detection-estimation framework [2] that permits to estimate task-related perfusion and hemodynamic responses.

Data: Arterial Spin Labeling (ASL) [1]

ASL fMRI provides a quantitative measurement of blood perfusion changes in the brain elicited by stimulus delivery and task performance.



stimulus delivery



ASL signal model [2]



For every voxel in a parcel, ASL signal can be decomposed into different terms.



Magnetically tagged image (Tag)

Tag inflowing arterial blood by magnetic inversion

Time delay (1) to (2): Labeled water reaches capillary bed and is exchanged with water molecules in the tissue, causing a signal change

Control image

Repeat acquisition without labeling inflowing blood



The difference in magnetization is proportional to regional cerebral blood flow

 $\propto CBF$

Control Image (4) - Tag Image (2)

Ref: http://fmri.research.umich.edu/research/main_topics/asl.php



How do we solve it? Bayesian inference

2.1

Data: $oldsymbol{y}$ Variables: $oldsymbol{X} = \{oldsymbol{a}, oldsymbol{h}, oldsymbol{c}, oldsymbol{g}, oldsymbol{q}, oldsymbol{ heta}\}$ posterior probability distribution

$$p(\boldsymbol{X} \mid \boldsymbol{y}) \propto p(\boldsymbol{y}, \boldsymbol{X}) = p(\boldsymbol{y} \mid \boldsymbol{X}) p(\boldsymbol{X})$$

joint prob distrib likelihood prior knowledge

How can we compute the posterior distribution?

Sampling: Markov Chain Monte Carlo

Gibbs sampling generates a realization of each conditional distribution at a time (of each variable in X), given the current values of the other variables. *eg*: $p(a|y, h, c, g, q; \theta)$

- Posterior mean estimates are computed after a burn-in period.
- The sequence of samples constitutes a Markov chain, and the stationary distribution of that Markov chain is the posterior distribution.



Approximation: Variational Expectation-Maximization

VEM approximates the posterior distribution $p(\mathbf{X}|\mathbf{y})$ by a variational distribution \tilde{p} that is as close as possible to the posterior. It minimizes the Kullback-Leibler divergence $D_{\mathrm{KL}}(\tilde{p}||p(\mathbf{X}|\mathbf{y}))$

The approximation is done by restricting the solutions to the ones that satisfy $\tilde{p}(a, h, c, g, q) = \tilde{p}_a(a) \tilde{p}_h(h) \tilde{p}_c(c) \tilde{p}_g(g) \tilde{p}_q(q)$

The E-step approximates the distribution and the M-step optimizes the hyperparameters with respect to this distribution. They can be decomposed in stages corresponding to the different parameters.

 \checkmark Lower computational time and easy constraint handling

Results: MCMC and VEM provide comparable solutions Artificial data Real data Computation times Repetition time: TR = 3sParadigm: fast event-related design (mean ISI = 5.1s), with 60 auditory and visual stimuli, TR = 3s. Number of scans: 288 Fast event-related paradigm: mean ISI = 5sArtificial data, 400 voxels for 1 ROI **PRF** and **HRF** with MCMC HRLs PRLs **PRF** and HRF with VEM MCMC 1500 iterations Response functions and levels RMSE error with respect to SNR ~ 270 secs HRL, MCMC 0.045HRF, MCMC VEM 15 iterations PRL, MCMC PRF, MCMC ~ 22 secs HRL, VEM --- HRF, VEM





- Both methods have a similar performance, but VEM recovers response levels with a lower RMSE, while MCMC recovers response functions closer to the ground truth.
- Response functions are well estimated for the ROI considered.
- PRF peaks before HRF, as enforced by the physiological prior used.
- We need to find a way to better interpret the results on real data.



MCMC 3000 iterations ~ 320 secs VEM 30 iterations ~ 95 secs

ratio = 3.4

Discussion

- MCMC and VEM provide good solutions for the joint estimation of the fASL signal model parameters.
- VEM provides a fast and valid alternative for fASL data analysis.
- Real data results interpretation remain unclear.

References

[1] D. Williams, J. Detre, J. Leigh, and A. Koretsky, "Magnetic resonance imaging of perfusion using spin inversion of arterial water", Proceedings of the National Academy of Sciences, vol. 89, no. 1, pp. 212–216, 1992.

[2] T. Vincent, J. Warnking, M. Villien, A. Krainik, P. Ciuciu, and F. Forbes, "Bayesian Joint Detection-Estimation of cerebral vasoreactivity from ASL fMRI data," in 16th Proc. MICCAI, LNCS Springer Verlag, Nagoya, Japan, Sep. 2013, vol. 2, pp. 616–623.