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# Optimization of multifocal transcranial current stimulation for weighted cortical pattern targeting from realistic modeling of electric fields

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#### ABSTRACT

Recently, multifocal transcranial current stimulation (tCS) devices using several relatively small electrodes have 33 been used to achieve more focal stimulation of specific cortical targets. However, it is becoming increasingly 34 recognized that many behavioral manifestations of neurological and psychiatric disease are not solely the result 35 of abnormality in one isolated brain region but represent alterations in brain networks. In this paper we describe 36 a method for optimizing the configuration of multifocal tCS for stimulation of brain networks, represented by 37 spatially extended cortical targets. We show how, based on fMRI, PET, EEG or other data specifying a target 38 map on the cortical surface for excitatory, inhibitory or neutral stimulation and a constraint of the maximal number 39 of electrodes, a solution can be produced with the optimal currents and locations of the electrodes. The method 40 described here relies on a fast calculation of multifocal tCS electric fields (including components normal and 41 tangential to the cortical boundaries) using a five layer finite element model of a realistic head. Based on 42 the hypothesis that the effects of current stimulation are to first order due to the interaction of electric fields 43 with populations of elongated cortical neurons, it is argued that the optimization problem for tCS stimulation can 44 be defined in terms of the component of the electric field normal to the cortical surface. Solutions are found using 45constrained least squares to optimize current intensities, while electrode number and their locations are selected 46 using a genetic algorithm. For direct current tCS (tDCS) applications, we provide some examples of this technique 47 using an available tCS system providing 8 small Ag/AgCl stimulation electrodes. We demonstrate the approach 48 both for localized and spatially extended targets defined using rs-fcMRI and PET data, with clinical applications in 49 stroke and depression. Finally, we extend these ideas to more general stimulation protocols, such as alternating 50 current tCS (tACS). 51

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#### 57 Introduction

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58Transcranial current stimulation (tCS) is a noninvasive brain stimulation technique in which weak, constant or slowly varying electrical 59currents are applied to the brain through the scalp. tCS includes a family 60 61 of related non-invasive techniques including direct (tDCS), alternating (tACS) and random noise current stimulation (tRNS). These techniques 62 use scalp electrodes with electrode current intensity to area ratios of 63 64 about 0.3–5 A/m<sup>2</sup> at low frequencies (typically <1 kHz) resulting in 65weak electric fields in the brain, with amplitudes of about 0.2-2 V/m 66 (see Miranda et al. (2013) and Ruffini et al. (2013) and references therein). The neuromodulatory effect of these fields has been confirmed 67

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1053-8119/\$ – see front matter © 2013 Elsevier Inc. All rights reserved. http://dx.doi.org/10.1016/j.neuroimage.2013.12.002 in many laboratories (Antal and Paulus, 2013; Nitsche and Paulus, 2001, Q4 Q5 2000; Terney et al., 2008). In a typical tDCS experiment, a continuous Q6 current of 1–2 mA is applied for up to 20 min through two large stimu-70 lation electrodes (25–35 cm<sup>2</sup>). For therapeutic applications, such as 71 post-stroke rehabilitation (Khedr et al., 2013) or the treatment of 72 depression (Loo et al., 2012), tDCS is usually applied daily for five days, 73 during one or more weeks. 74

While tCS interventions typically focus on a single cortical target, it is 75 widely recognized today that many behavioral manifestations of neuro-76 logical and psychiatric diseases are not solely the result of abnormality 77 in one isolated brain region but represent alterations in brain networks 78 (see, e.g., Fox et al. (2012b) and references therein). In this context, and 79 provided a specification for the location and type of stimulation effects 80 is available, brain networks become the target of neuromodulatory 81 interventions. Advances in neuroimaging technology such as positron 82 emission tomography (PET), electroencephalography (EEG), magneto-83 encephalography (MEG) and resting-state functional connectivity MRI 84

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(rs-fcMRI) are allowing us to non-invasively visualize brain networks in 85 86 humans with unprecedented clarity. In a parallel and timely develop-87 ment, technologies have become available today which enable the use 88 of more than two electrodes for stimulation, making possible multifocal stimulation of brain networks. Determining the ideal configuration of a 89 multi-electrode tCS system, however, is complicated by the fact that 90 transcranial brain stimulation effects are largely non-local due to Ohmic 07 92 propagation effects. For this reason, optimization algorithms based on 93 globally defined, cortical targeting data are needed.

94 As an especially interesting example, we discuss the use of rs-fcMRI 95seed maps (Fox et al., 2012b; Shafi et al., 2012) for defining cortically extended tCS targets. In contrast to traditional task-based fMRI, resting 96 state fcMRI examines correlations in spontaneous fluctuations in the 97 98 blood oxygen level dependent (BOLD) signal in the absence of any explicit input or output, while subjects simply rest in the scanner (see, 99 e.g., Buckner et al. (2013), and references therein). A consistent obser-100 vation is that regions with similar functional properties, such as the 101 left and right motor cortices, exhibit coherent BOLD fluctuations even in 102the absence of movement under resting conditions. Negative correlations 103 (anti-correlations) between regions with apparent opposing functional 104 properties have also been observed (Fox et al., 2005). Significant 105 rs-fcMRI abnormalities have been identified across almost every 106 107 major neurological and psychiatric disease (for a review see Fox and 108 Greicius, 2010), and differences across subjects in rs-fcMRI are reproducible across scanning sessions and have been related to individual 109 differences in anatomical connectivity and behavior. 110

One of the most valuable clinical uses of rs-fcMRI may be to predict 111 112 how focal brain stimulation will propagate through networks, thus informing the ideal site for stimulation (Fox and Greicius, 2010; Fox 113 et al., 2012b). Recently, Fox et al. (2012b) used rs-fcMRI to identify dif-114 ferences in functional connectivity between effective and less effective 115116DLPFC stimulation sites (M. Fox et al., 2012; Fox et al., 2012b). Signifi-117 cant differences in connectivity were seen with the subgenual cingulate (SG), a region repeatedly implicated in antidepressant response and an 118 effective DBS target (Drevets et al., 2008; Mayberg, 2009; Mayberg et al., 119 2005). Based on this finding, Fox et al. used rs-fcMRI with the SG to 120identify theoretically optimal TMS target coordinates in the left DLPFC 121 122 (Fox et al., 2012a). A similar strategy can be applied to other neurological diseases with effective or potentially effective DBS sites including 123Parkinson's disease, dystonia, essential tremor, Alzheimer's disease, 124 and even minimally conscious state. An important challenge with this 125126 approach is that rs-fcMRI with an effective DBS site does not identify just a single cortical site, but many. In fact, it provides a continuous 127 pattern across the cortical surface of regions that are both positively 128 and negatively correlated with the deep brain stimulation site of interest. 129130Realizing the full potential of this targeting approach thus requires the 131 ability to simultaneously excite or inhibit multiple sites across the surface of the cortex. As we will see below, the same occurs with targets from 132other imaging techniques, such as PET. While conventional TMS and 133tDCS technologies allow for only one or two stimulation sites, the 134multi-electrode approach perfectly complements this scientific and 135136therapeutic need.

The mechanisms underlying the after-effects of tDCS are still the 137subject of investigation, but in all cases these local changes are brought 138about by the accumulated action of the applied electric field over time, 139directly or indirectly. For this reason we focus here on electric field op-140 141 timization. Moreover, given that there are strong directional effects in the interaction of electric fields and neurons, i.e., neurons are influenced 142mostly by the component of the electric field parallel to their trajectory 143 (Bikson et al., 2004; Fröhlich and McCormick, 2010; Ranck, 1975; 144 Rattay, 1986; Roth, 1994; Rushton, 1927), and that the effects of tDCS 145depend on its polarity, knowledge about the orientation of the electric 146 field is crucial in predicting the effects of stimulation. The components 147 of the field perpendicular and parallel to the cortical surface are of special 148 importance, since pyramidal cells are mostly aligned perpendicular to the 149150surface, while many cortical interneurons and axonal projections of pyramidal cells tend to align tangentially (Day et al., 1989; Fox et al., 151 2004; Kammer et al., 2007). Thus, an important element in modeling is 152 to provide the electric field distribution and orientation relative to the 153 gray matter (GM) and white matter (WM) surfaces (the latter might be 154 important to study the possibility of polarizing corticospinal axons, 155 their collaterals and other projection neurons). In order to do this, we 156 work here with a realistic head model derived from structural MRI im-157 ages (Miranda et al., 2013) to calculate the tCS electric field components 158 rapidly from arbitrary EEG 10–20 montages. Importantly, this modeling 159 approach allows for fast calculation of electric field components normal 160 and parallel to the GM and WM surfaces. 161

In what follows, we show how to use neuroimaging data to specify a 162 target map on the cortical surface for excitatory, inhibitory or neutral 163 stimulation, and how, given constraints on the maximal number of 164 electrodes and currents, a solution can be produced with the optimal 165 electrode currents and their locations. The main differences of our 166 approach with other recent efforts stem from a) the overall concept 167 of working with extended, weighted cortical pattern target maps 168 based on fMRI, PET, EEG, MEG or other data, b) the emphasis on op- 169 timization of an electric field component as opposed to its magnitude 170 or intensity (as in, e.g., Sadleir et al. (2012)), c) the definition of 171 targets based on a coordinate system relative to the cortical surface, 172 with targets for normal  $(E^{\perp})$  and tangential  $(E^{\parallel})$  components of electric 173 field (as opposed to "radial or normal to the skull" as in Dmochowski 174 et al. (2011), and d) the use of advanced algorithms to optimize not 175 only currents but also the number and location of electrodes given ap- 176 propriate constraints. Finally, in the discussion section we address the 177 generalization of these methods to tACS, although in a more exploratory 178 fashion. 179

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#### General statement of the problem

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The non-invasive stimulation problem can be loosely classified as 182 follows: a) single localized target, b) bipolar or, more generally, multi- 183 polar localized targets and c) pattern targeting. With the single target 184 case an issue that typically arises is how to deal with the return current, 185 since the laws of physics require current conservation and thus a mini- 186 mum of two electrodes need to be applied. The return (or "reference") 187 electrode is normally positioned in an area which is presumed not to 188 play a role (e.g., "over the contralateral orbit"), and sometimes it is chosen 189 to have a larger area than the "active" one so that its effects diffuse 190 (Nitsche et al., 2007). More modern approaches include the so-called 191 "high-definition tDCS", where a return arrangement of electrodes is 192 placed close to the active electrode (see, e.g., Dmochowski et al. (2011), 193 and references therein) or more general quasi-monopolar montages 194 such as the one described below, which employ an array of optimally-195 placed return electrodes (see Targeting localized cortical regionssection 196 and Fig. 1). 08

In bipolar or multi-polar targeting, two or more discrete targets are ac-198 tually sought, some excitatory (anodal) and others inhibitory (cathodal) (as in, e.g., Chib et al. (2013), Ferrucci et al. (2009), Lindenberg et al. 200 (2010) and Mahmoudi et al. (2011)). This situation will normally require the use of small electrodes, as electric field defocusing may be an issue if large electrodes are used. An example is provided below (see Targeting localized cortical regions section and Fig. 2).

More generally, we have the possibility of global cortical targeting 205 designed to achieve a more effective neuromodulatory outcome. In 206 the case of tDCS, such a map may just be a specification of the areas to 207 excite, inhibit, or leave unaffected, with a particular weighting map for 208 each of them. We provide examples on the use of PET and rs-fcMRI 209 generated target maps in sections Cortical pattern target from PET 210 and Cortical pattern target from rs-fcMRI respectively. 211

In the following, and without loss of generality, we make the discus-212 sion concrete by adopting the *StarStim* device specifications (produced 213

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