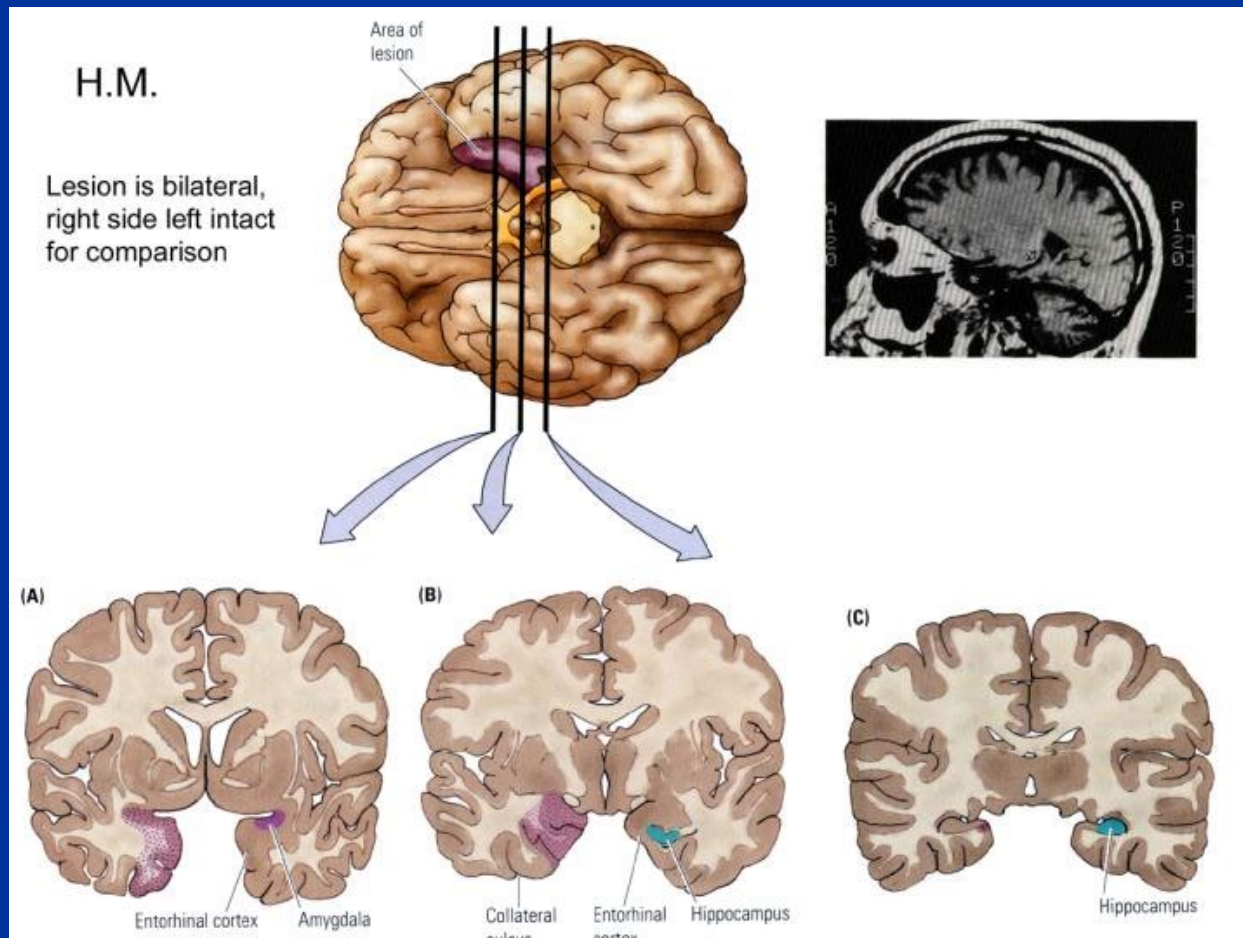


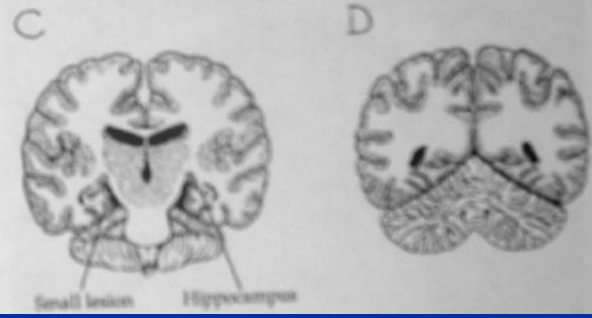
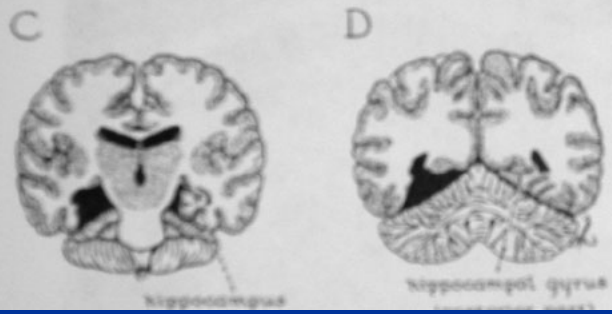
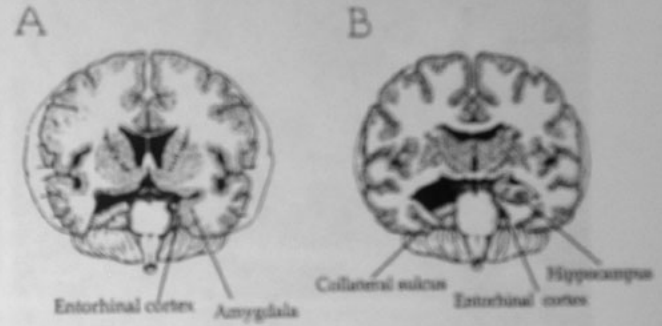
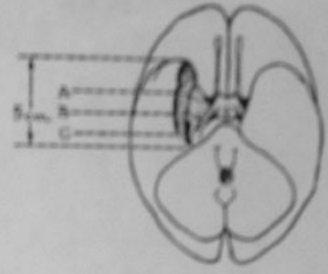
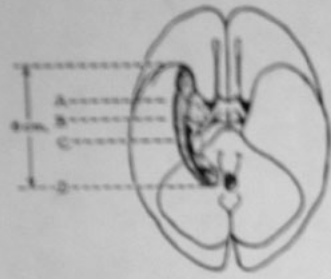
Frontal Contributions to Memory Encoding Before and After Unilateral Medial Temporal Lobectomy

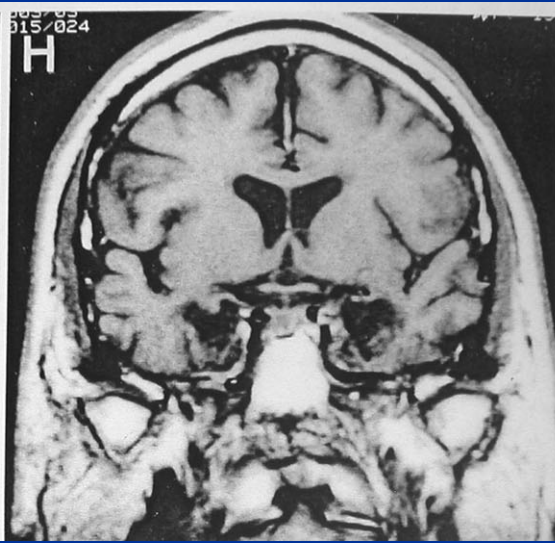
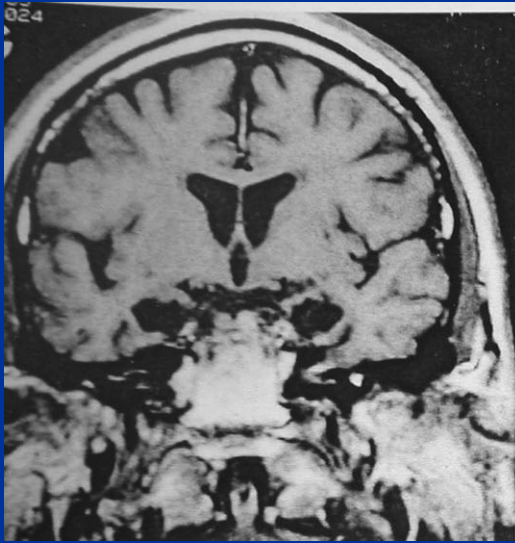
Jeff Ojemann, MD
Department of Neurological Surgery
University of Washington
Children's Hospital & Regional Medical Center

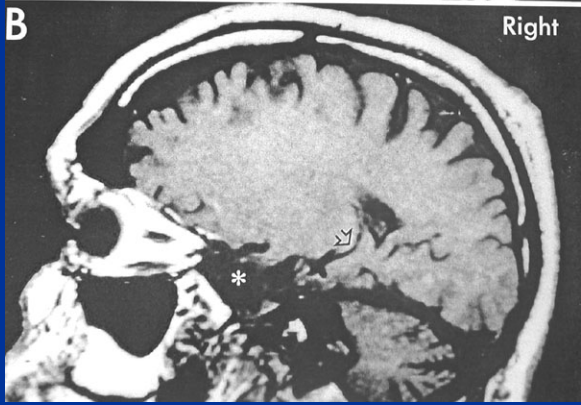
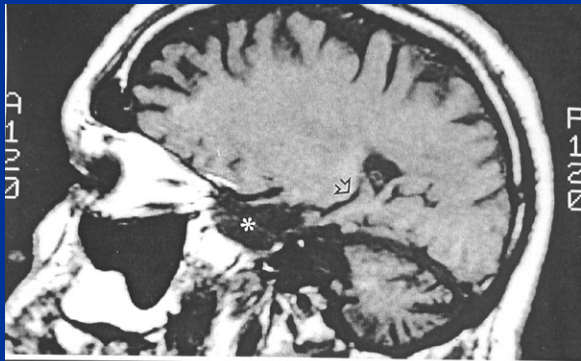


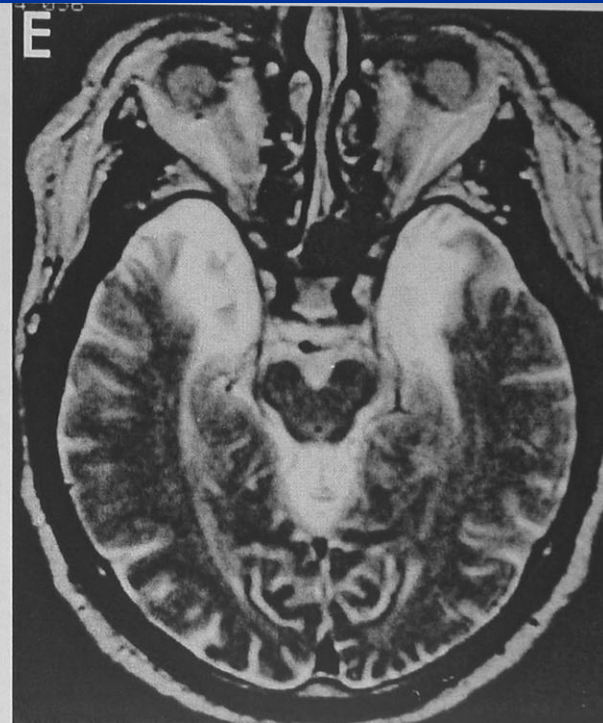
Episodic memory relies greatly on the presence of functioning medial temporal lobes











“...a grave loss of recent memory in those cases in which the medial temporal lobe resection was so extensive as to involve the major portion of the hippocampal complex bilaterally.”

“After operation this young man [H.M.] could no longer recognize the hospital staff nor find his way to the bathroom, and he seemed to recall nothing of the day-to-day events of his hospital life.”

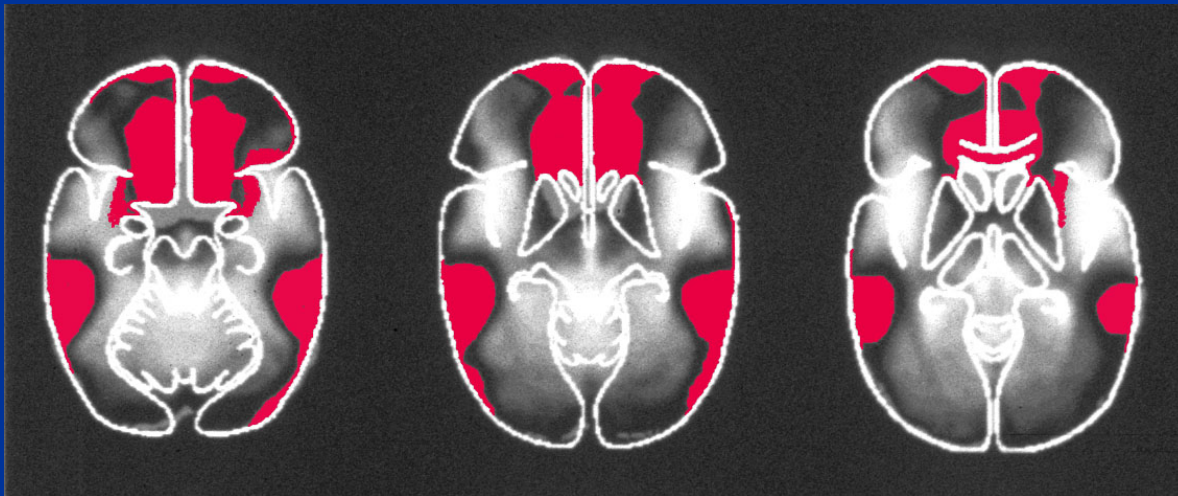
Scoville & Milner, 1957, *J. Neurol. Neurosurg. Psychiatr.*

‘Word Stem’ memory-
cued recall and
Right Hippocampus

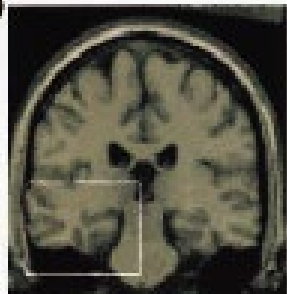


The *hippocampus* was not consistently seen in imaging studies of memory

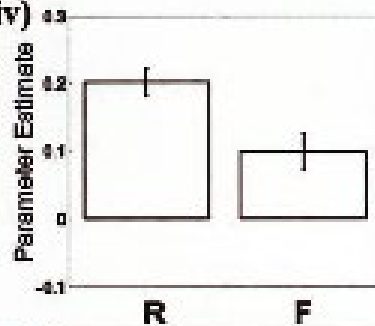
Areas of poor fMRI signal



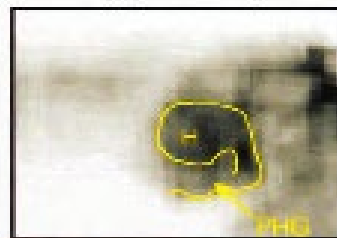
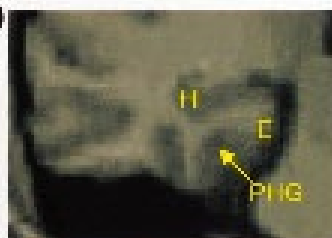
b (i)



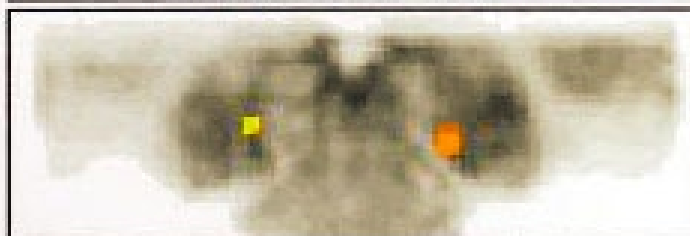
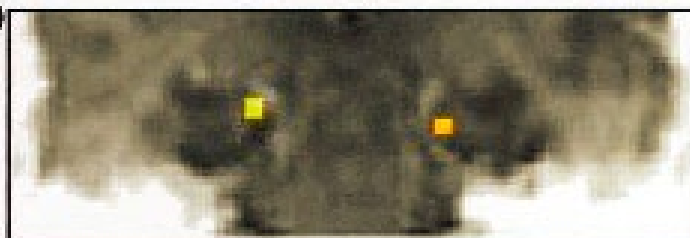
(iv)



(ii)



(iii)



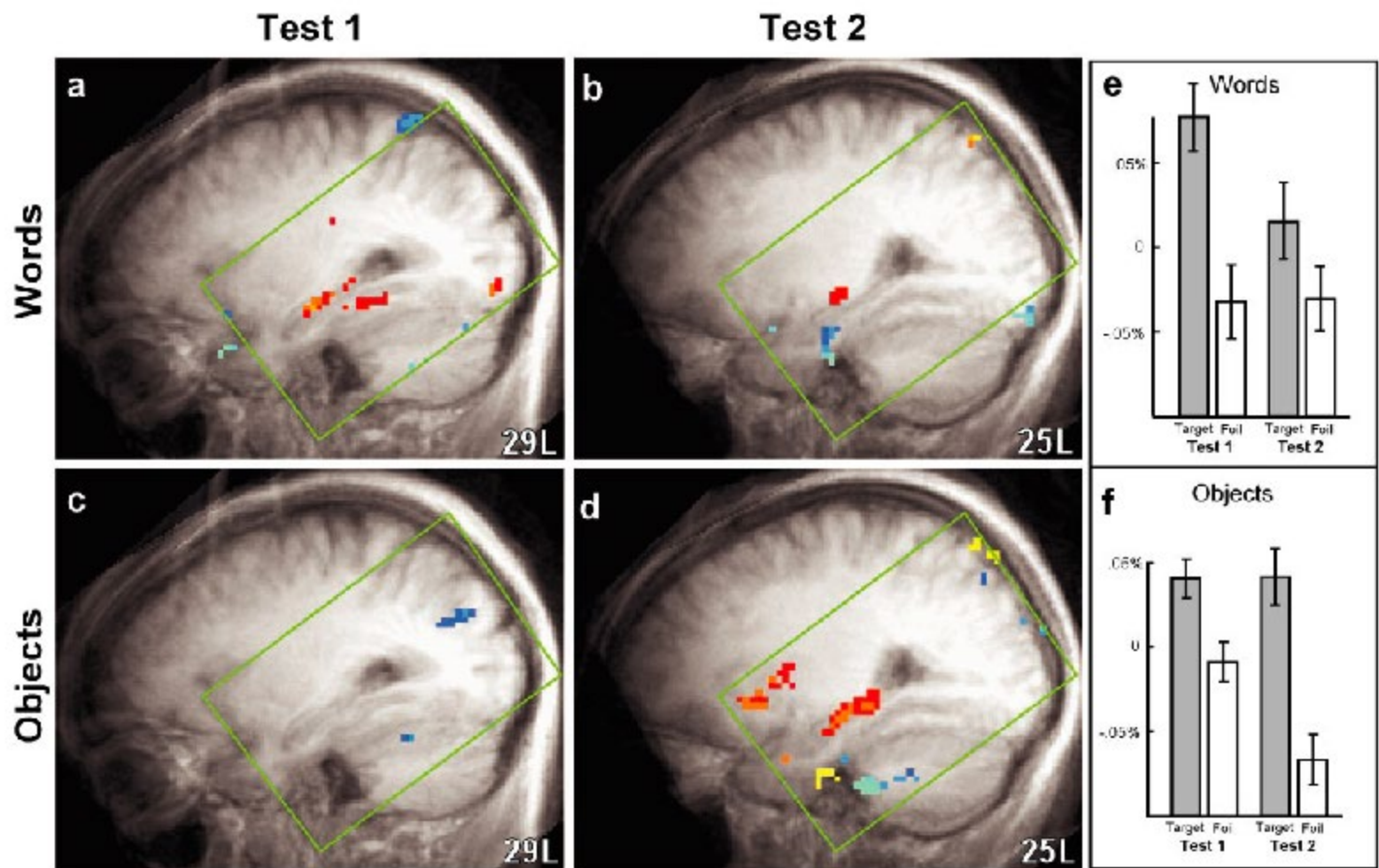
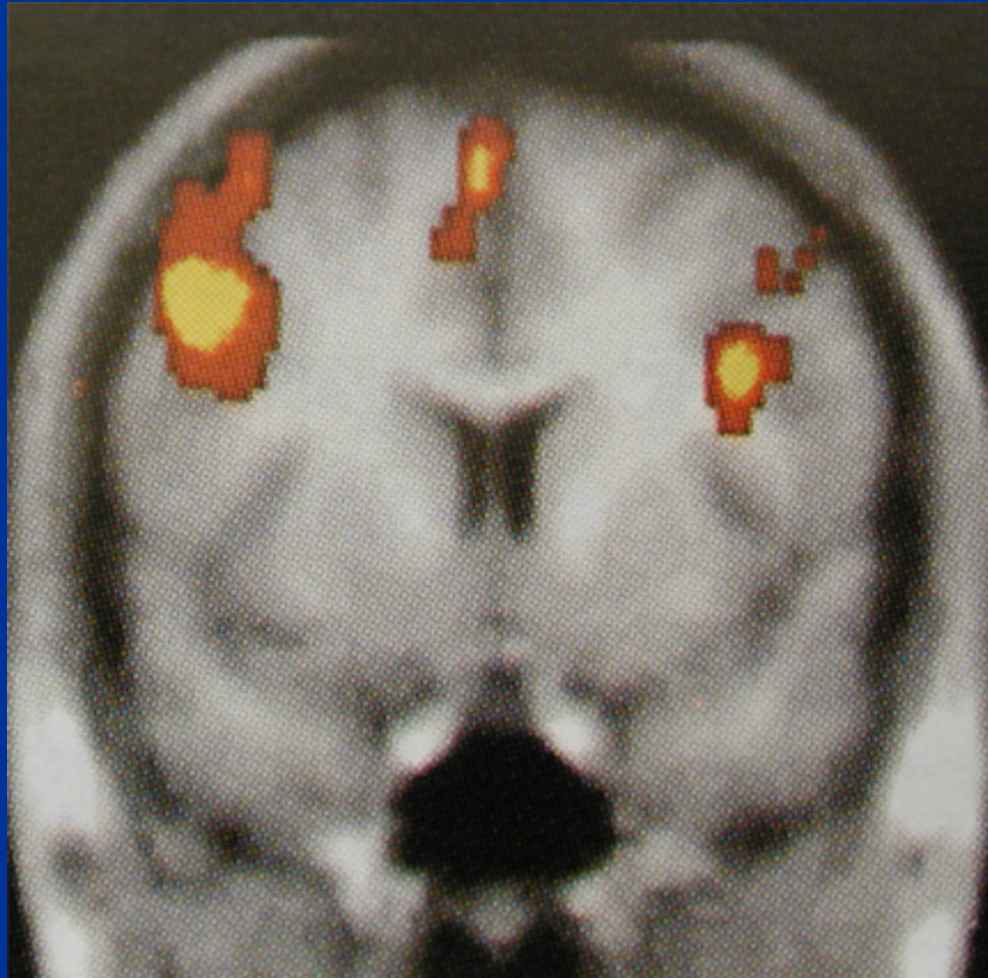


Figure 3. Whole-brain activation maps for 10 fMRI test conditions (10 words and 10 objects) in Test 1 (n = 11) and Test 2 (n = 11). The

Frontal Lobe and Memory

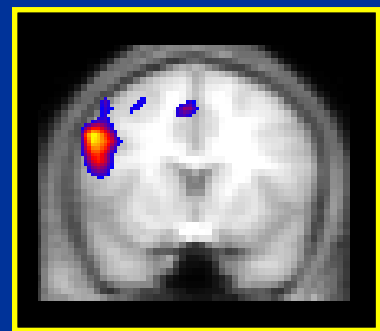
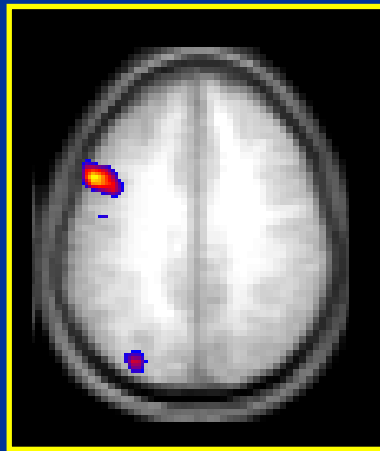


Many memory retrieval tasks
activate frontal lobe

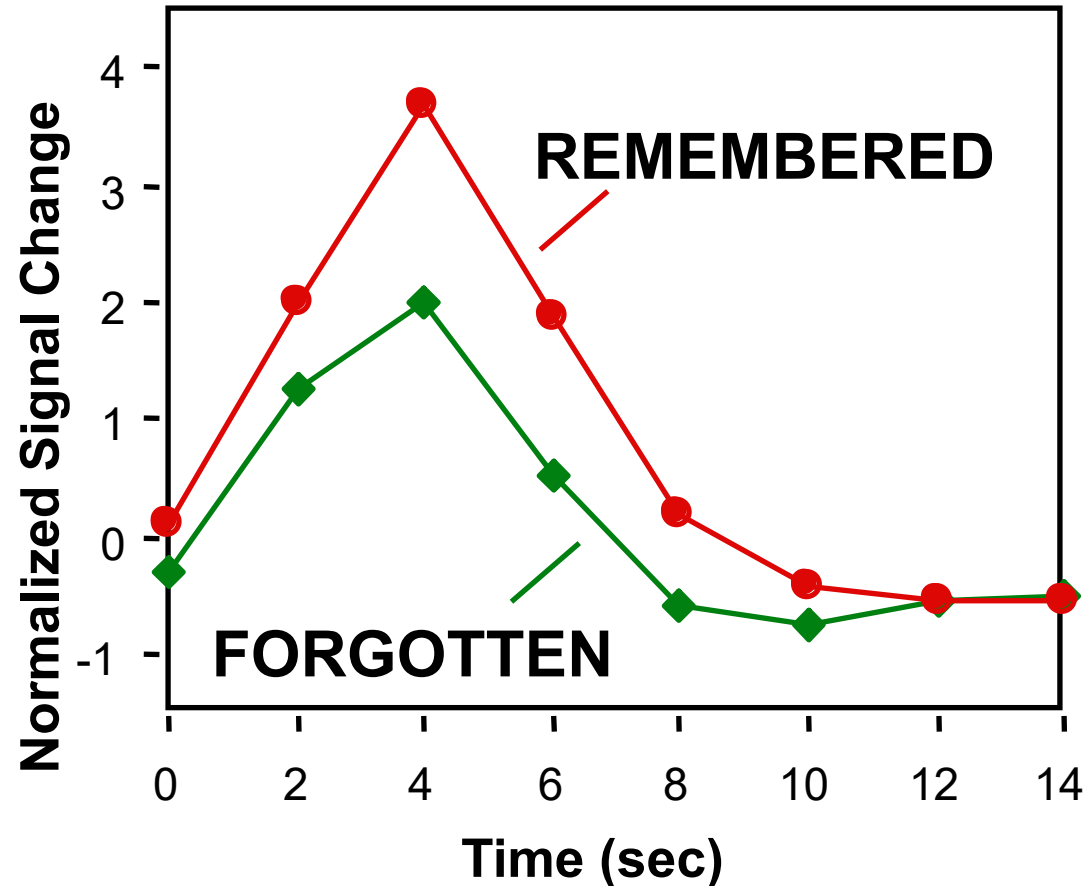


Regions of prefrontal cortex activate during encoding of both verbal and non-verbal material.

Moreover, their level of activation predicts subsequent memory.



$p < .01$  $p < 10^{-6}$

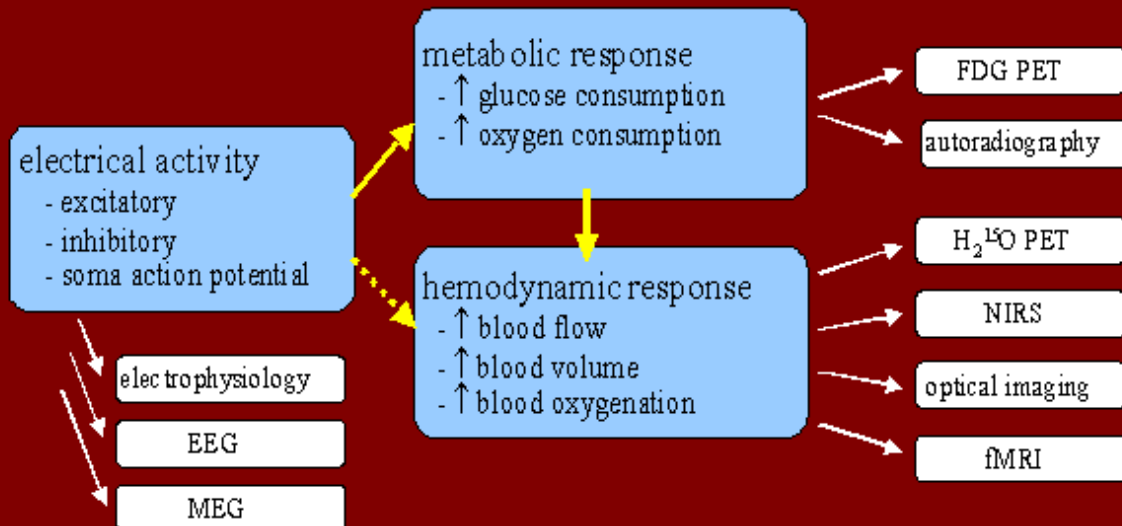


Wagner et al., 1998, *Science*

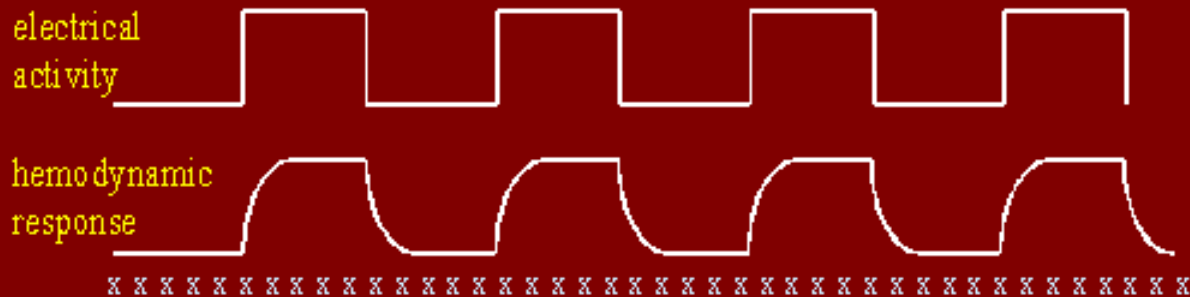
Functional imaging of memory

- Studies consistently activated the frontal lobe during encoding and retrieval tasks
- The hippocampus was rarely activated

Physiological Correlates of Brain Electrical Activity



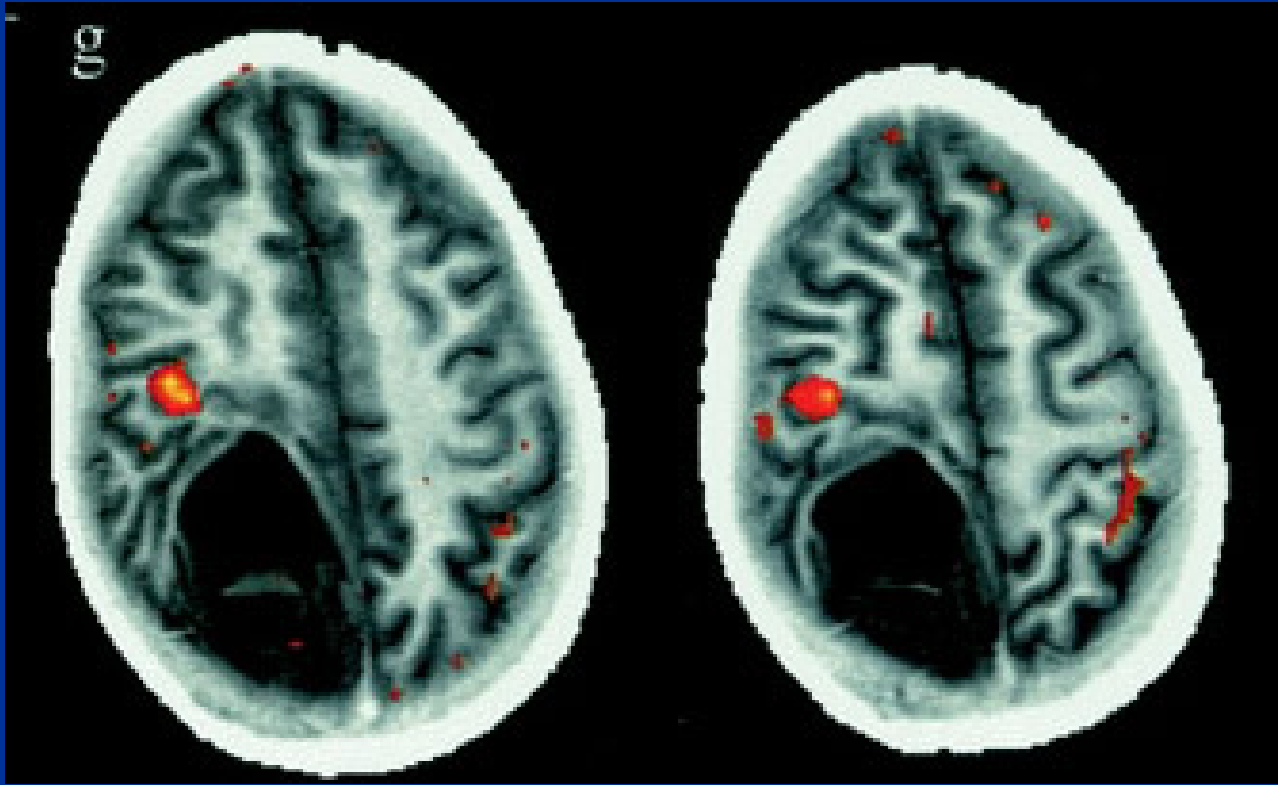
Functional MRI



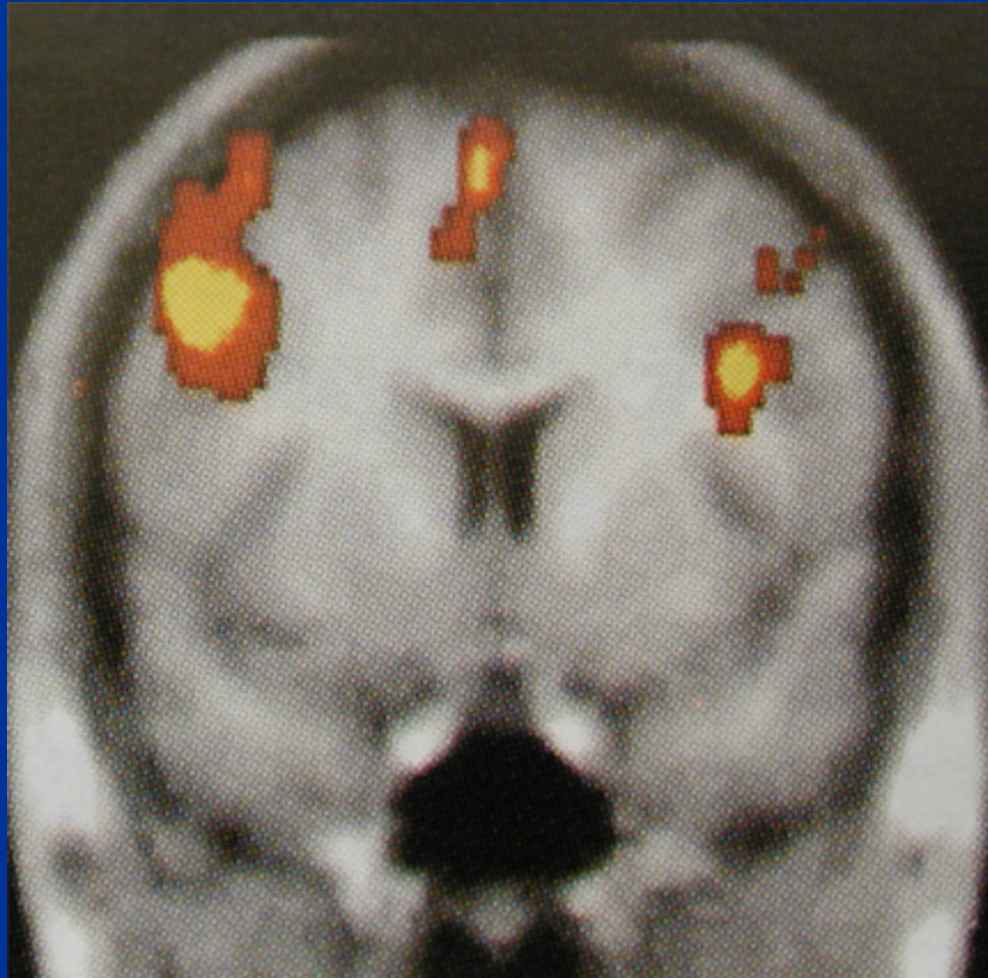
- need many samples of the brain
- need fast imaging capabilities
 - e.g. echo planar imaging
 - fast gradient coil
 - big disk!

Physiology: Summary

- increase in rCMRglu (20 – 40%)
 - seems to be mostly oxidative
- increase in rCMRO₂ (5 – 25%)
 - oxygen transport limited, but coupled: recent MR data suggests $\Delta\text{CMRO}_2 : \Delta\text{CBF} = 1:2$
- increase in rCBF (20 – 70%)
 - through increases in velocity rather than capillary recruitment
- increase in rCBV (5 – 30%)
 - mostly in venous vessels

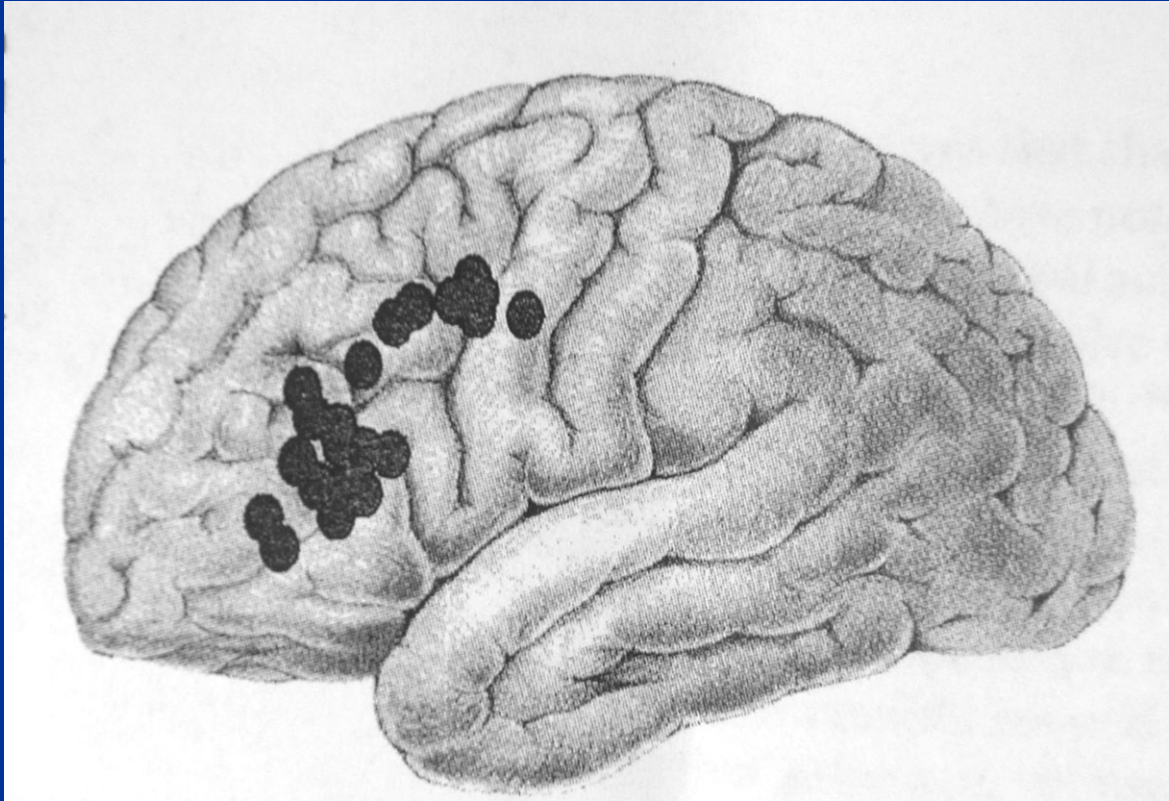


Frontal Lobe and Memory



Many memory retrieval tasks
activate frontal lobe





Hemispheric encoding/retrieval asymmetry in episodic memory: Positron emission tomography findings

(frontal lobes/semantic memory/laterality)

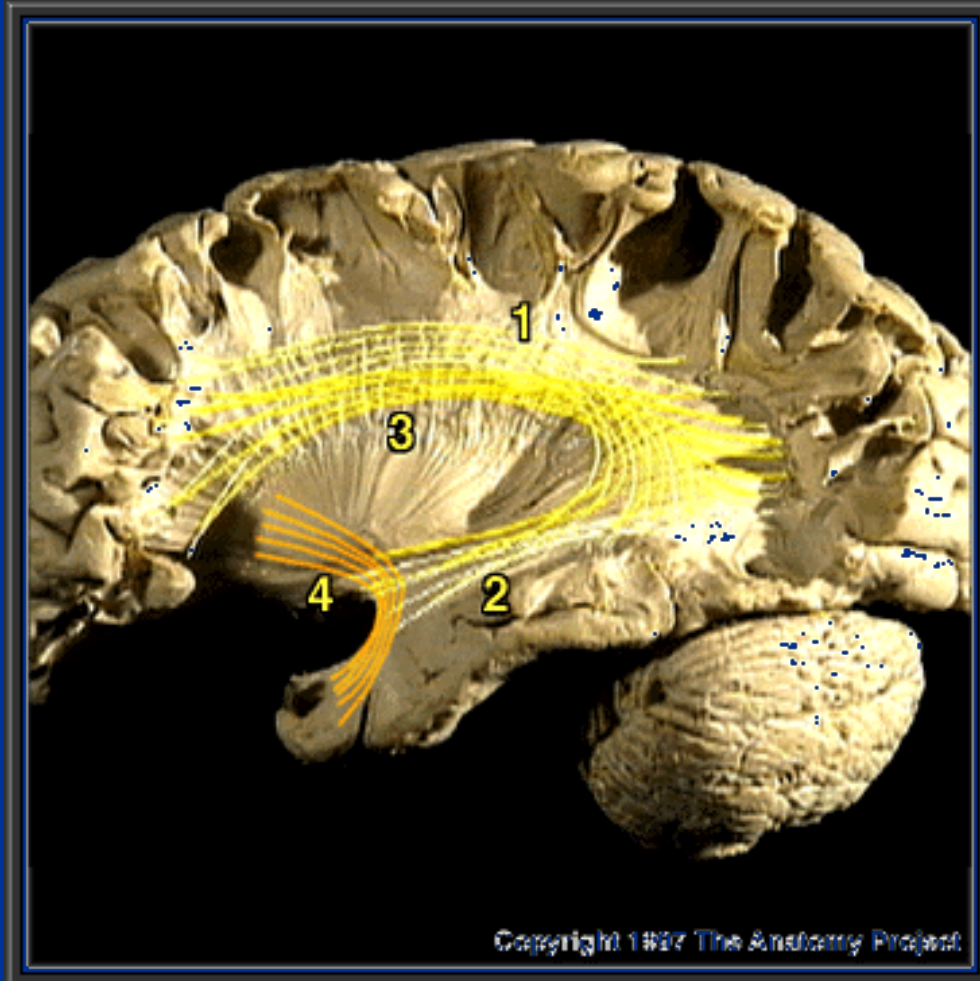
ENDEL TULVING*†, SHITIJ KAPUR‡, FERGUS I. M. CRAIK*†, MORRIS MOSCOVITCH*†, AND SYLVAIN HOULE‡

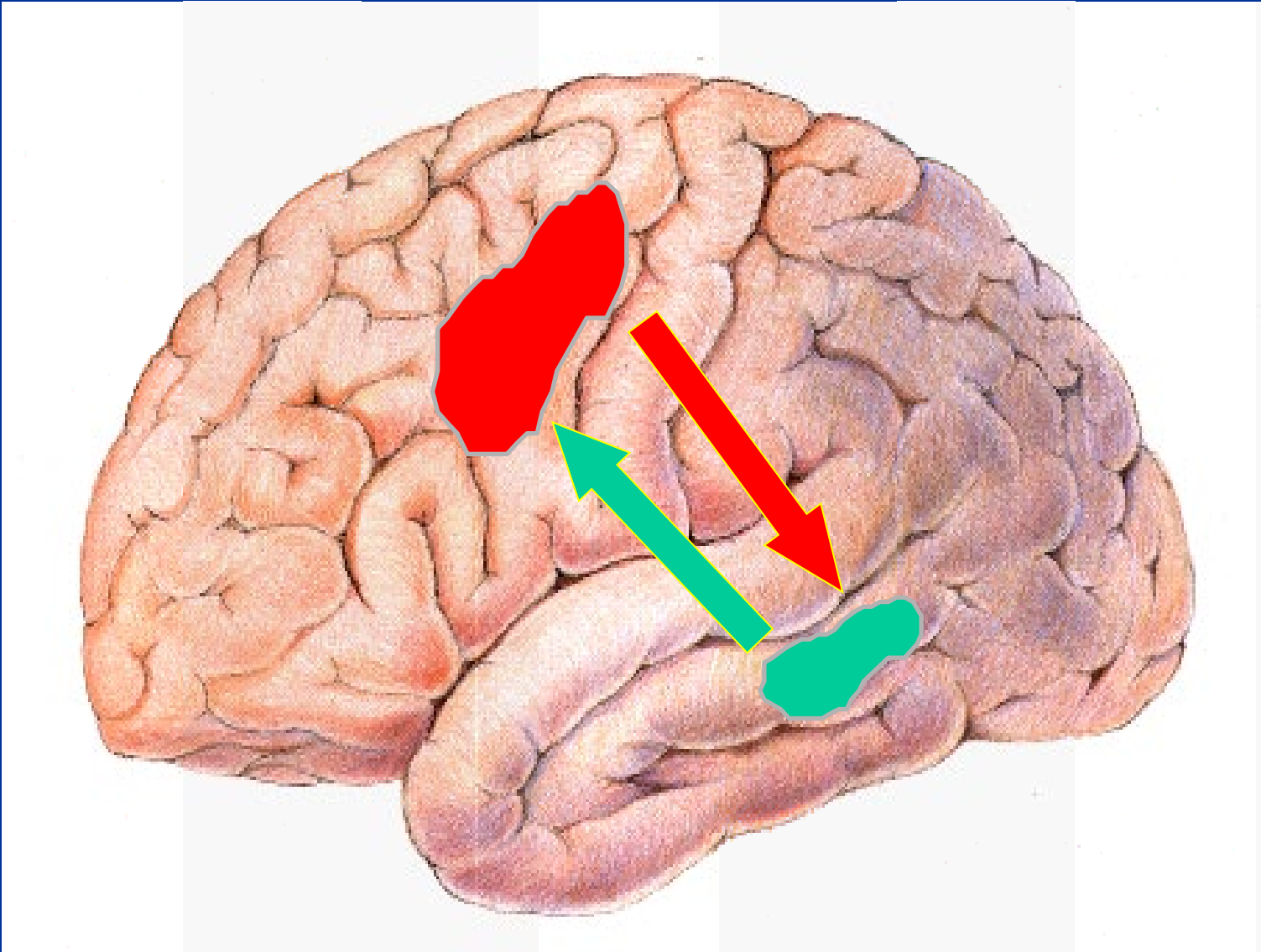
Table 1. Summary of PET findings with healthy human subjects concerning prefrontal activation associated with episodic memory encoding and retrieval processes

| Study | Left | Right |
|----------------------------------|------|-------|
| Encoding | | |
| Kapur <i>et al.</i> (14) | + | – |
| Petersen <i>et al.</i> (27) | + | – |
| Petersen <i>et al.</i> (30) | + | – |
| Frith <i>et al.</i> (31) | + | – |
| Frith <i>et al.</i> (32) | + | – |
| Wise <i>et al.</i> (33) | + | – |
| Raichle <i>et al.</i> (28) | | |
| Trial 1 | + | – |
| Trial 5 | – | – |
| Buckner <i>et al.</i> (34) | + | – |
| Retrieval | | |
| M.M. <i>et al.</i> (unpublished) | | |
| Spatial Information | – | + |
| Object Information | – | + |
| Tulving <i>et al.</i> (16) | + | + |
| Squire <i>et al.</i> (35) | – | + |
| Buckner <i>et al.</i> (34) | | |
| Different case | – | + |
| Auditory | – | + |
| Haxby <i>et al.</i> (36) | – | + |
| Jones-Gottman <i>et al.</i> (37) | – | + |

Statistically significant evidence of prefrontal involvement is indicated by +, absence of similar evidence by –.

Brain Connections

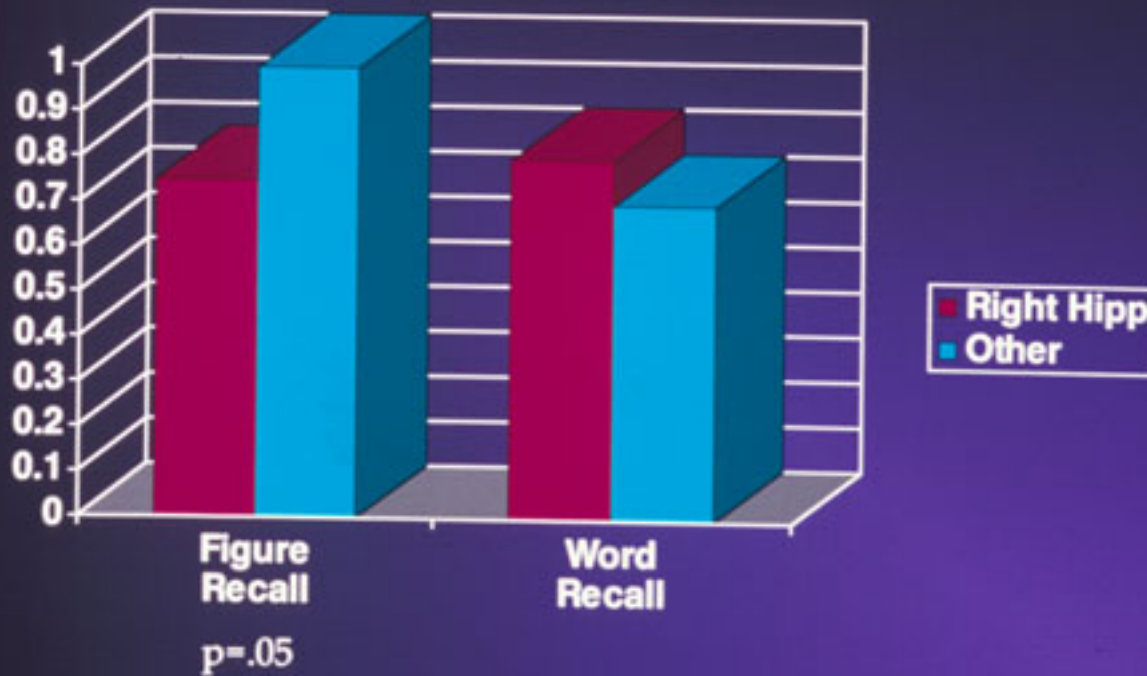




Memory

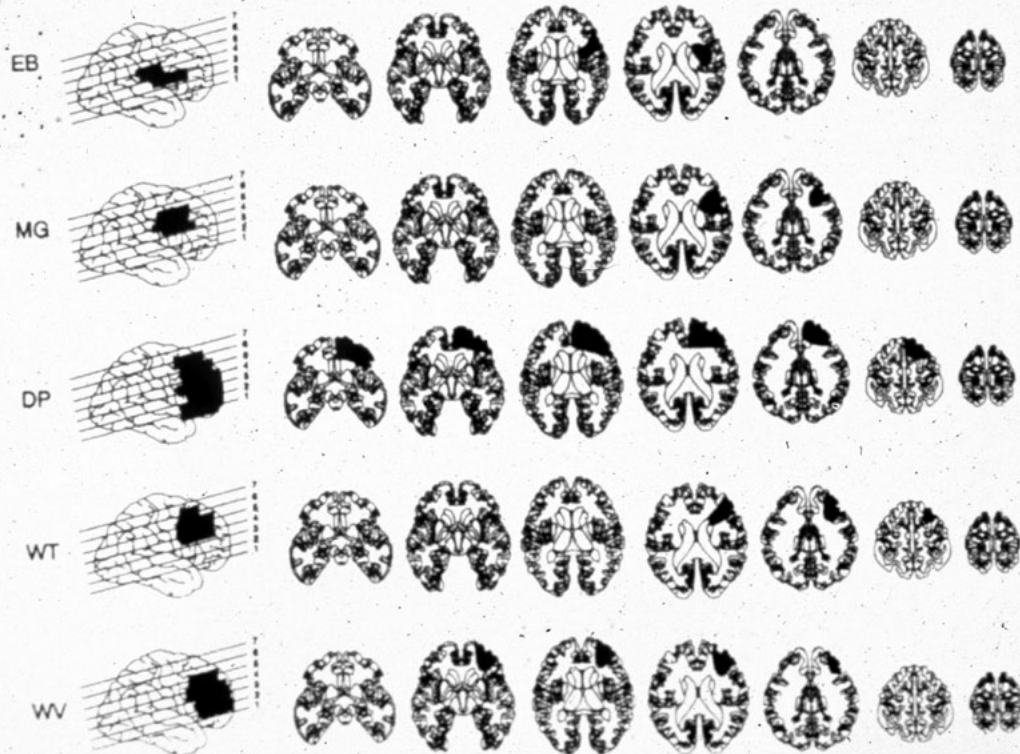
- Frontal activation > Medial Temporal lobe in fMRI literature
- Are frontal regions essential?
- Can MTL activation be useful?
- What is the significance of activation?

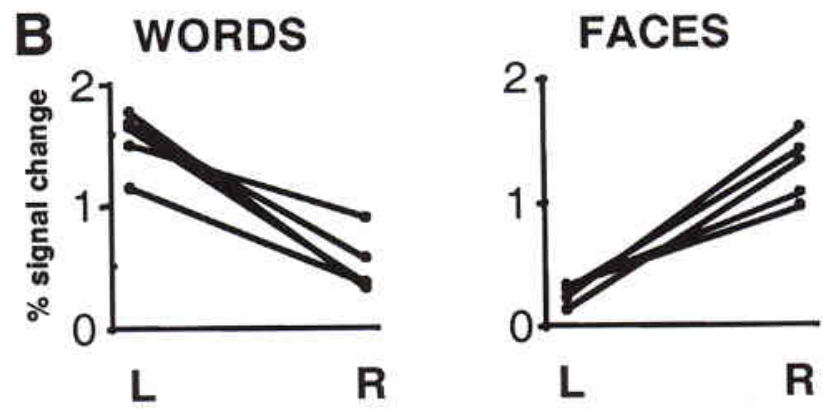
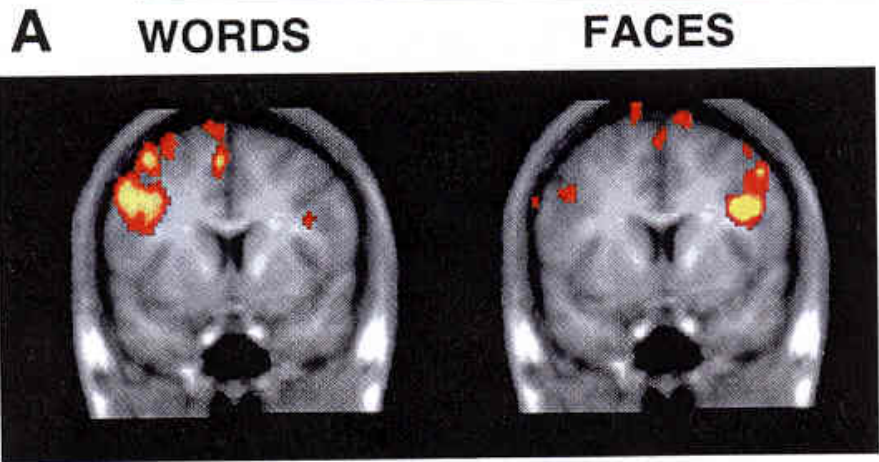
Functional MRI does not predict deficit



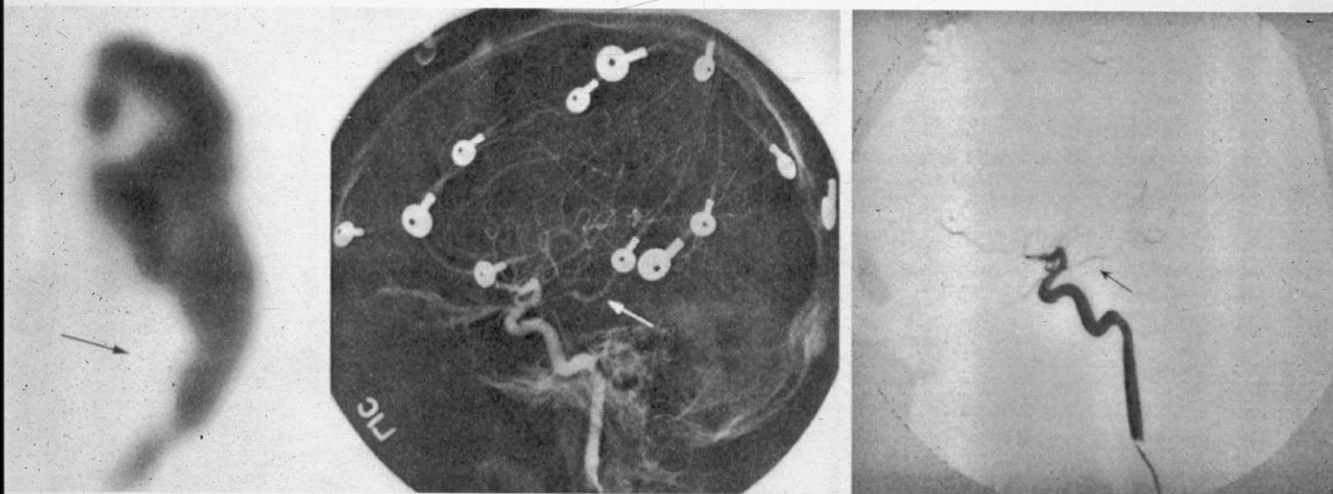
Lesions that do NOT impair retrieval

Right Frontal Lesions

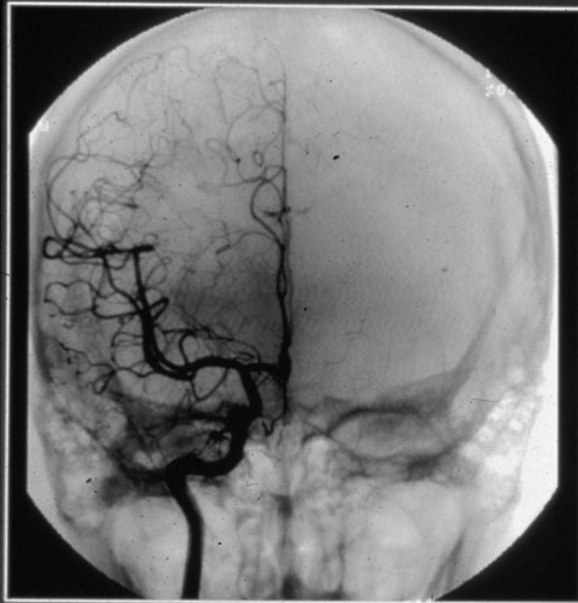




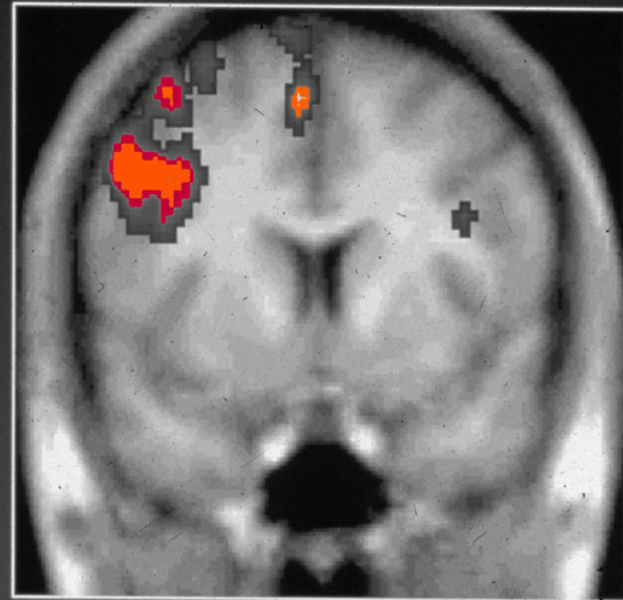
Distribution of ICA injection



Circulation affected by ICA injection



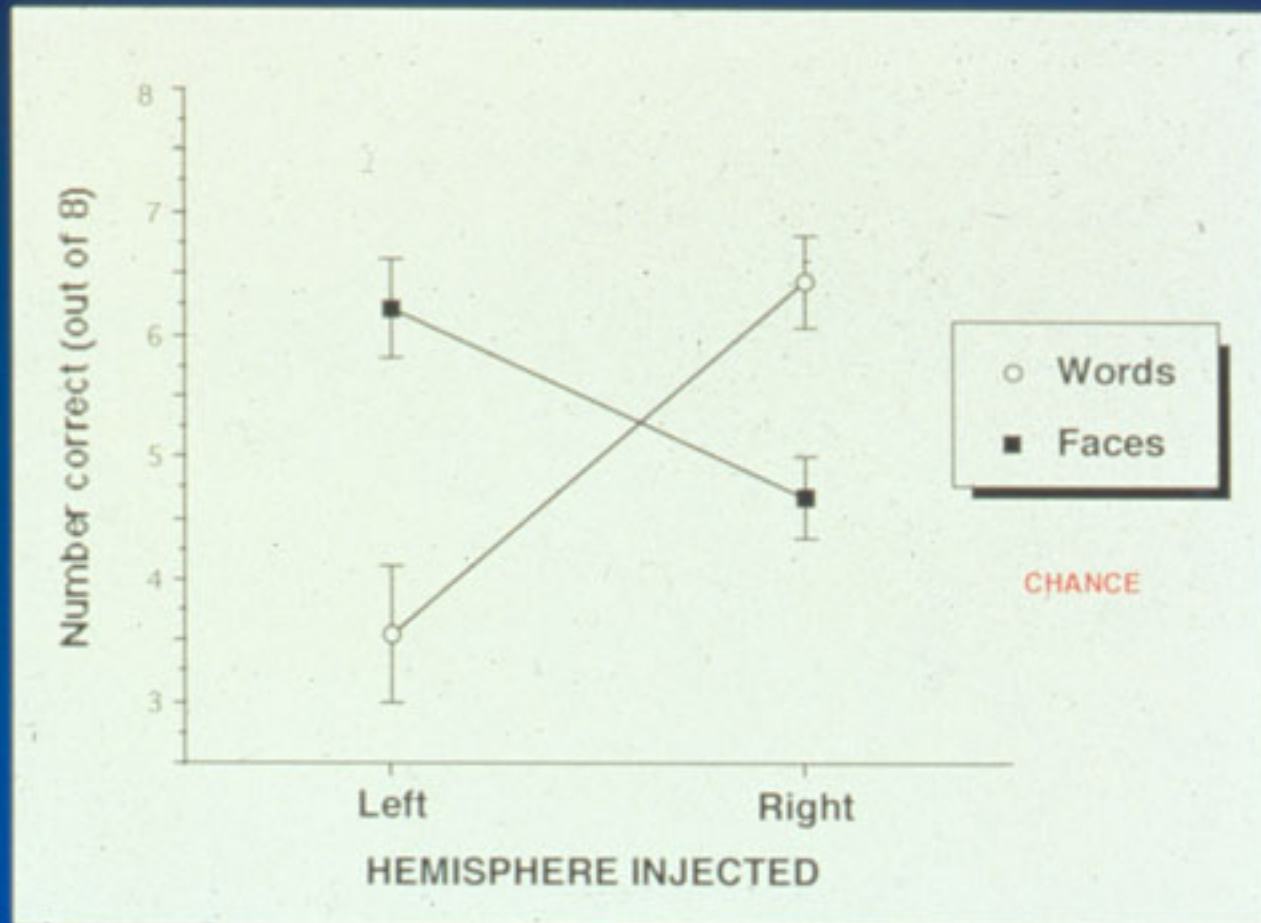
Left internal
carotid injection

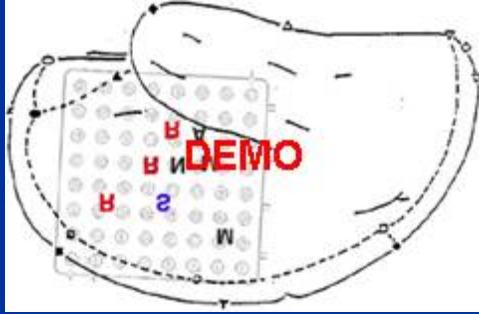


Left frontal activation
during word encoding

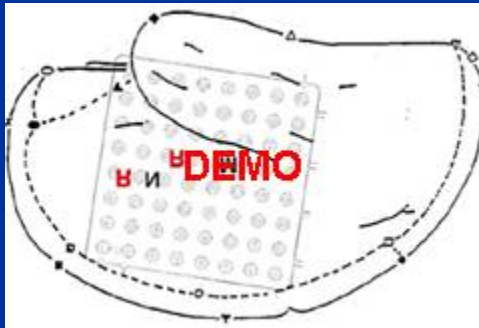
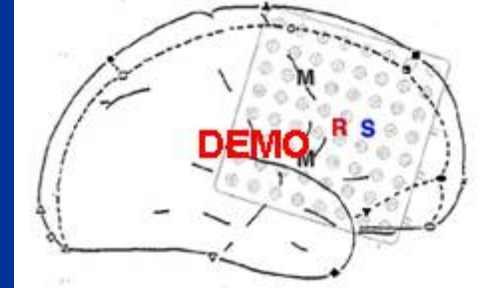
Memory formation

Wada memory performance

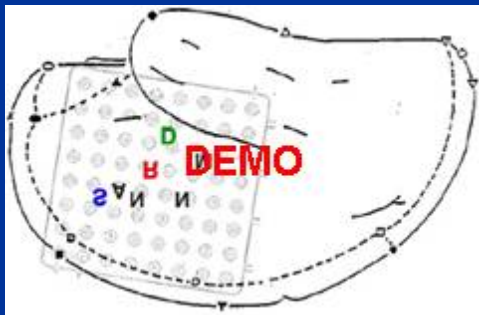
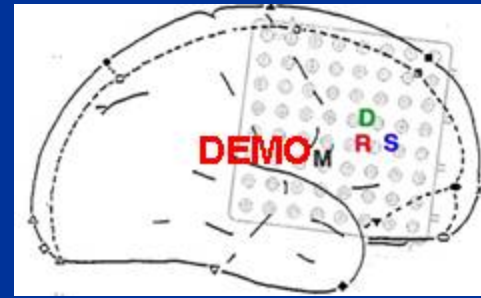




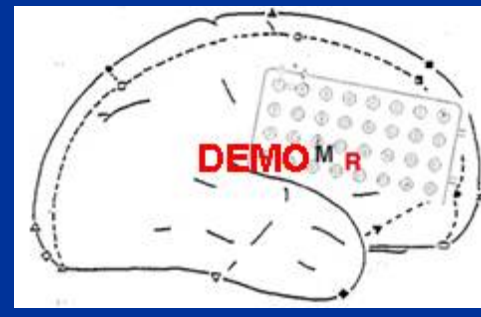
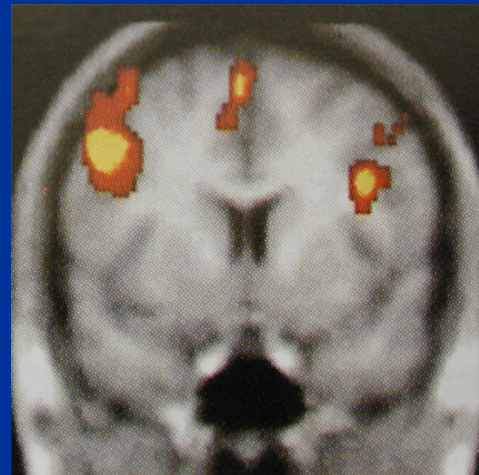
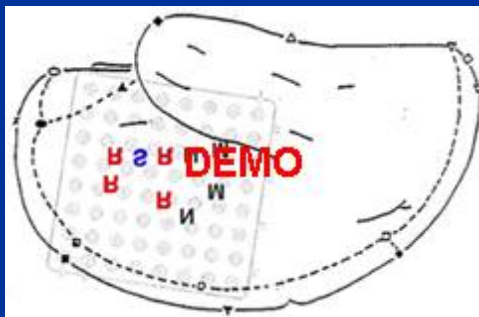
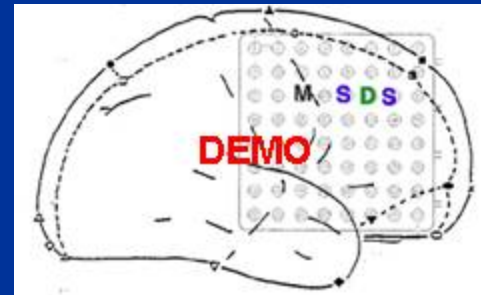
Mapping bilateral frontal sites during memory for pictures



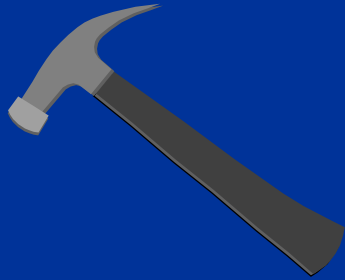
Both dominant and non-dominant sites



Consistent with fMRI literature



Cortical Stimulation Mapping



“Hammer”

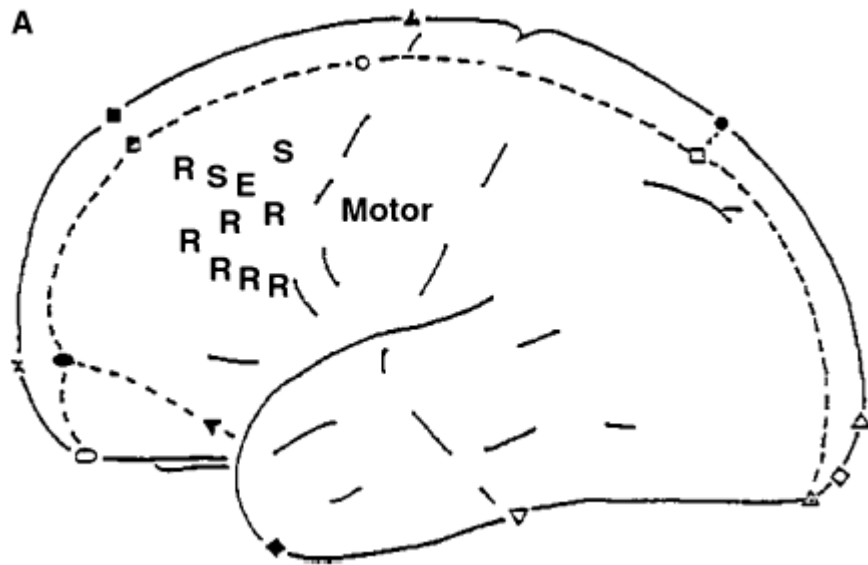
Distractor sentence

Read Sentence

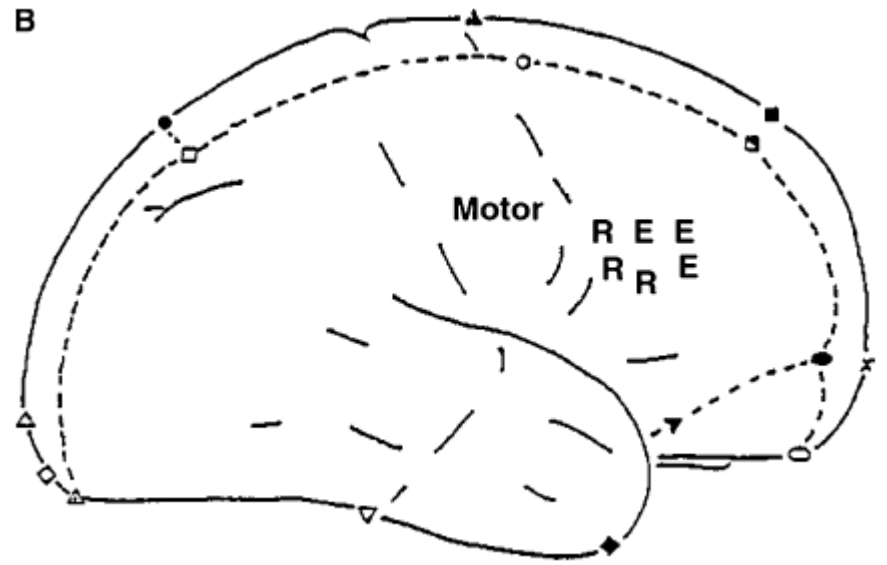
RECALL

“Hammer”

A



B



TEMPORAL LOBE EPILEPSY

- Temporal lobe epilepsy (TLE) is the most common form of epilepsy.
- Seizures are disabling, and difficult to control with medications.
- As a result, many TLE patients become potential candidates for epilepsy surgery.
- Surgery typically involves the antero-medial portion of the temporal lobe, unilaterally.
- For this reason, TLE patients represent a potentially optimal population in which to explore the interaction between frontal and temporal structures in memory encoding.



GOALS

- To explore the activity of frontal cortex during the encoding of verbal and non-verbal material *before* and *after* unilateral medial temporal lobectomy.

GOALS

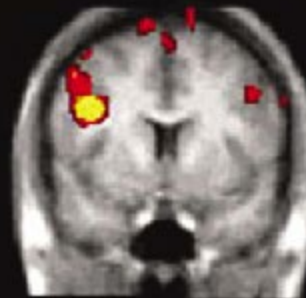
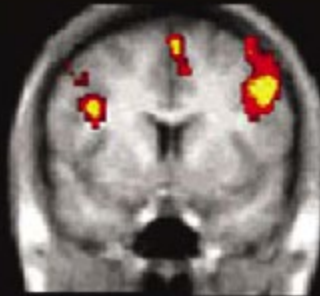
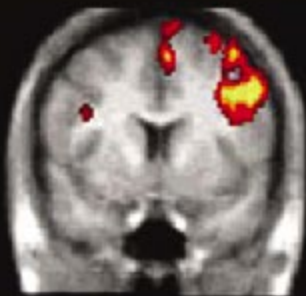
- To explore the activity of frontal cortex during the encoding of verbal and non-verbal material *before* and *after* unilateral medial temporal lobectomy.
- To investigate the usefulness of frontal encoding activation levels as a predictor of memory deficits following unilateral medial temporal lobectomy.

WORDS

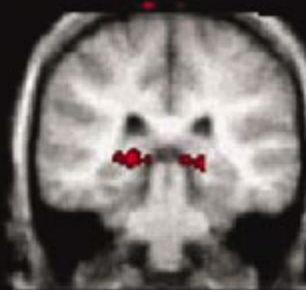
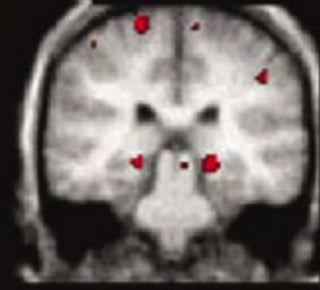
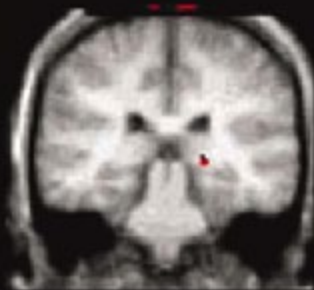
OBJECTS

FACES

A



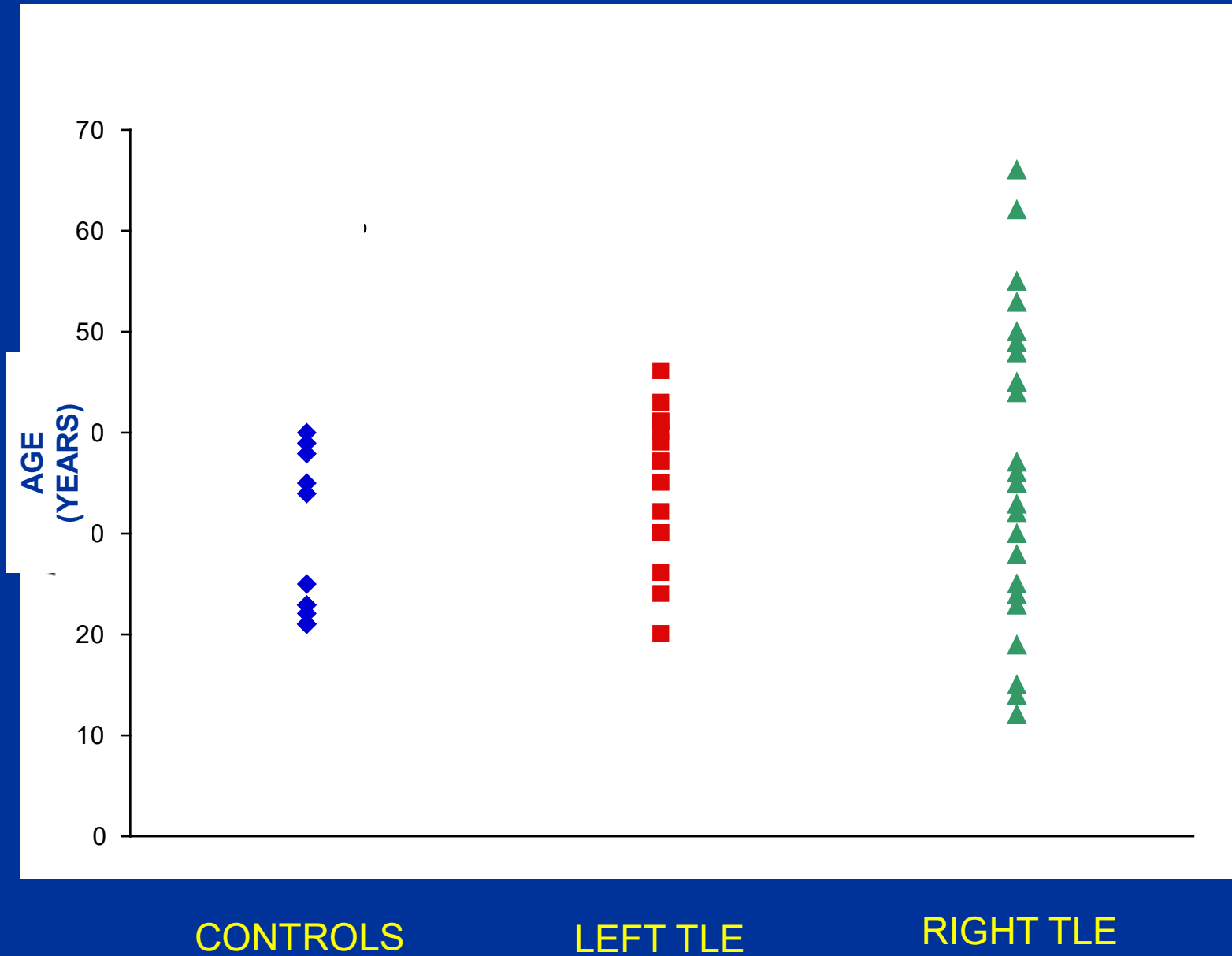
B



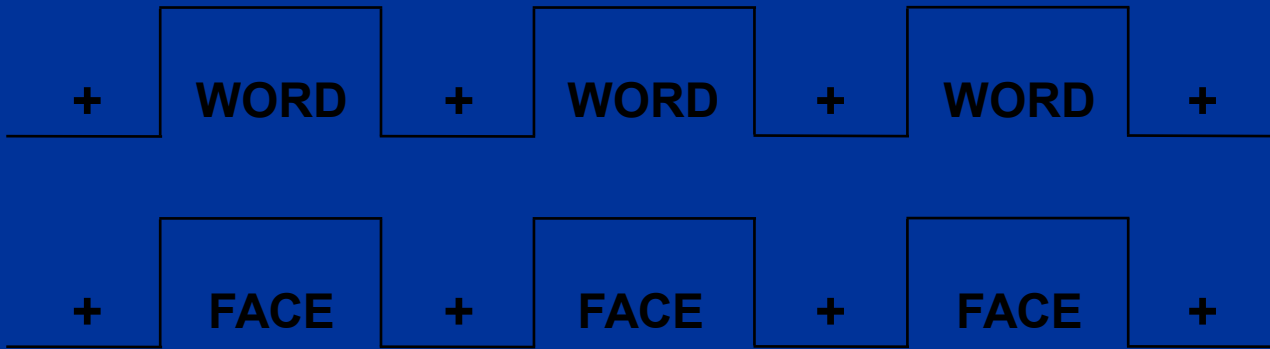
SUBJECTS

- 50 Patients with Temporal Lobe Epilepsy
 - mean age = 35.8 yrs
 - 21 M / 29 F
 - 5 left-handed
 - 37 participated in pre-operative fMRI session
 - 28 participated in post-operative fMRI session
 - of these, 15 (so far) have participated in both preop and postop fMRI sessions
- 12 Healthy Controls
 - mean age = 28.5 yrs
 - 7 M / 5 F
 - 1 left-handed

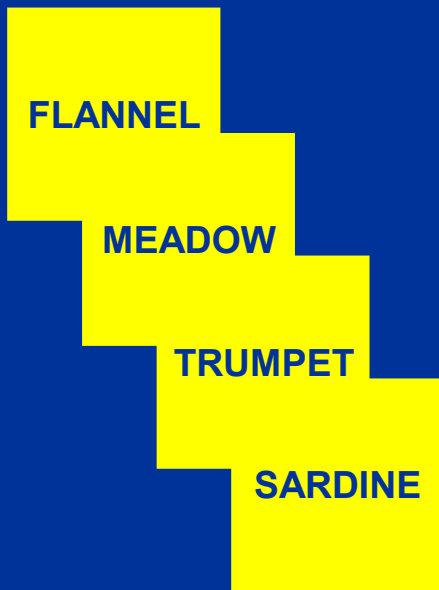
AGE DISTRIBUTION



ENCODING (inside the scanner)



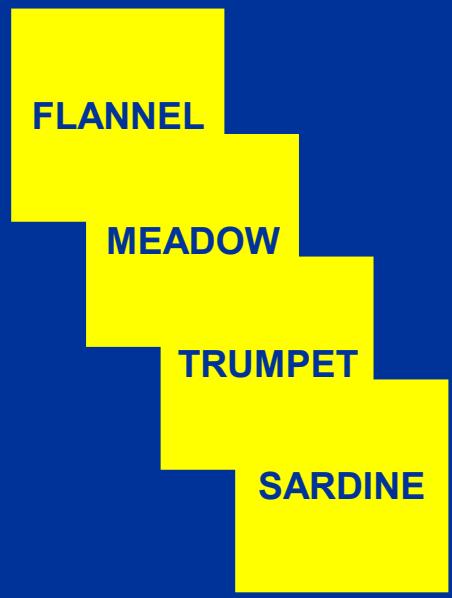
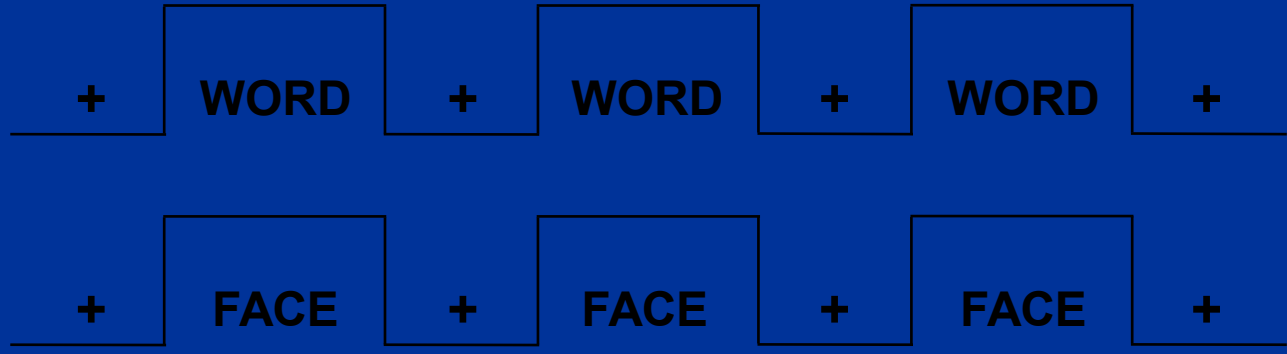
X 3



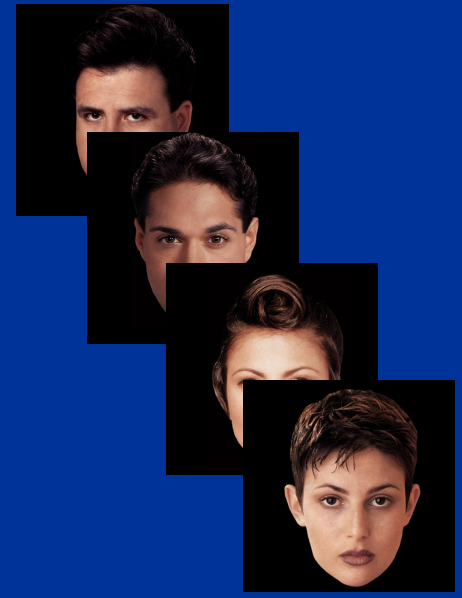
12 ITEMS / BLOCK



ENCODING (inside the scanner)



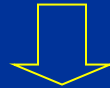
12 ITEMS / BLOCK



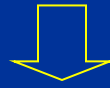
OLD/NEW RECOGNITION (outside the scanner)

TIMELINE

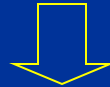
referral to surgery



pre-operative fMRI session



surgery



> 5 month wait period



post-operative fMRI session

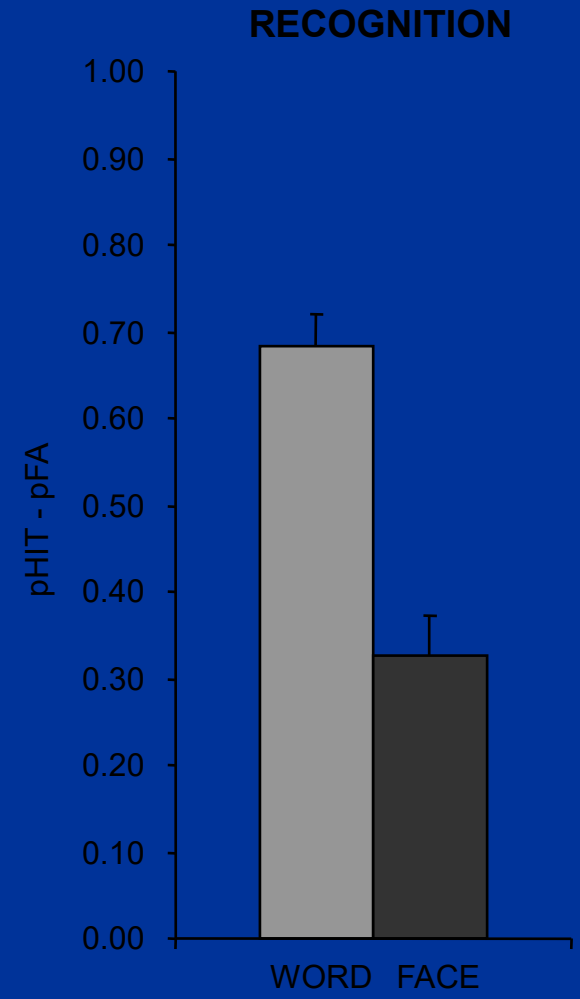
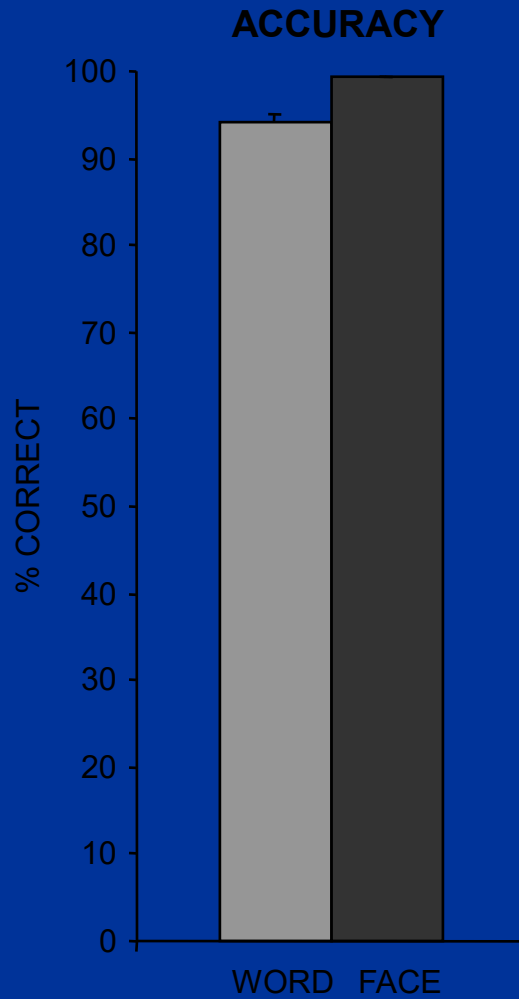
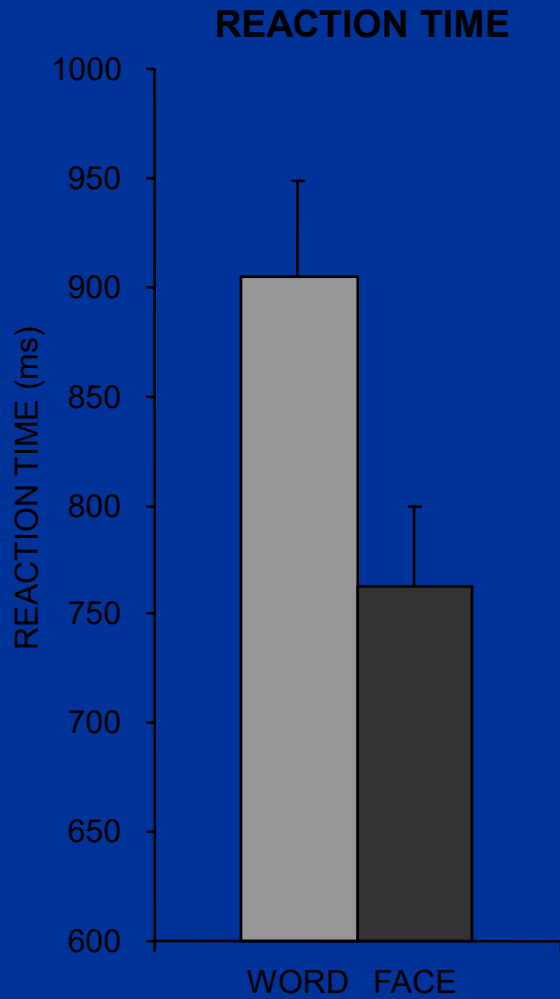
MR METHODS

- 1.5 Tesla BOLD fMRI (asymmetric spin echo)
- whole brain imaging (TR = 2.5 s, 16 axial slices, 8 mm thickness)
- six blocked runs (3 WORD, 3 FACE)
- analyzed using an implementation of the general linear model
- to allow accurate characterization of surgical resection 3 sets of MPRAGE images were acquired in each session



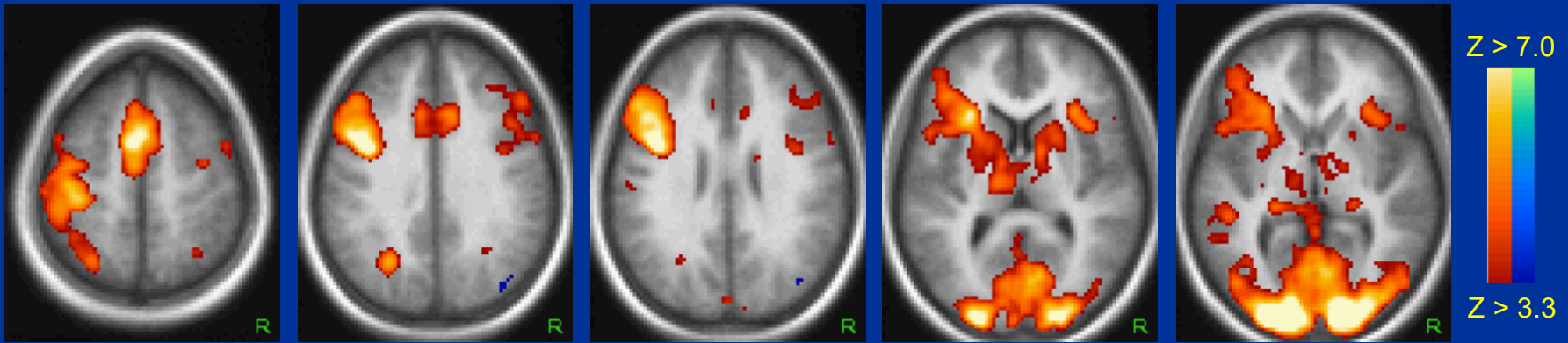
“There are lies, damn lies, and statistics”

CONTROL BEHAVIOR



CONTROL ENCODING

WORD



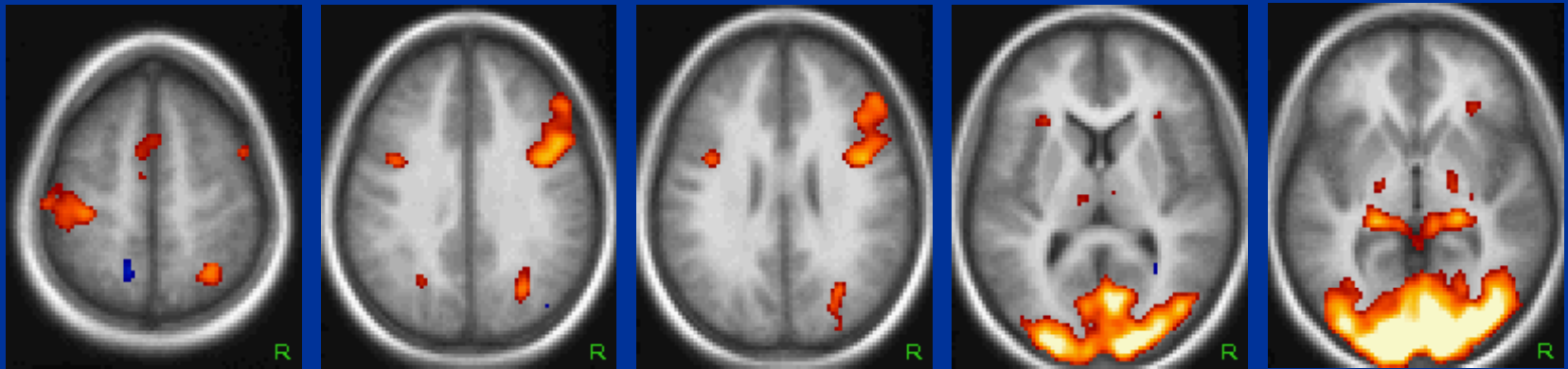
Z = 52

Z = 33

Z = 26

Z = 8

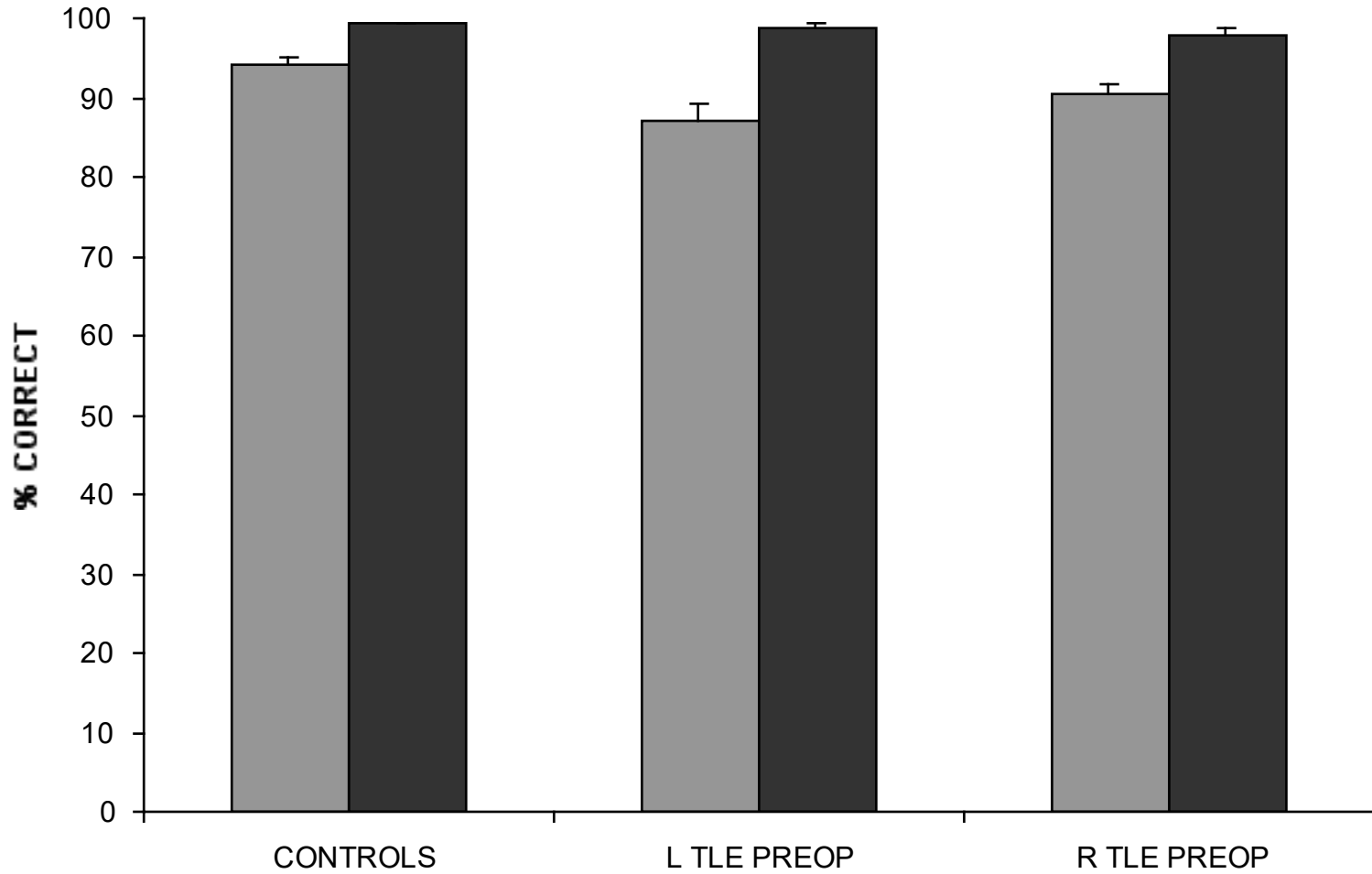
Z = -2



FACE

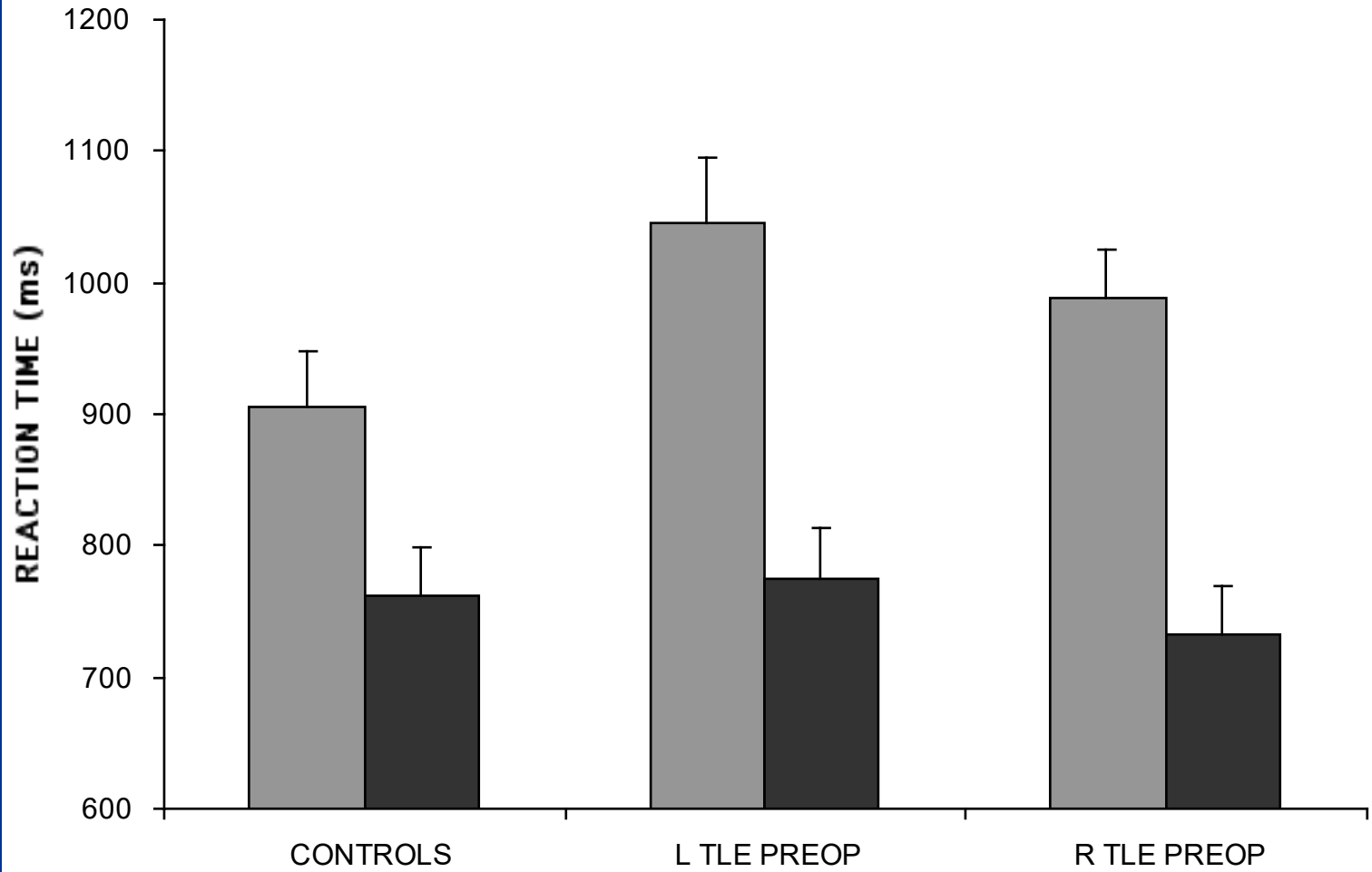
ACCURACY

■ WORD
■ FACE

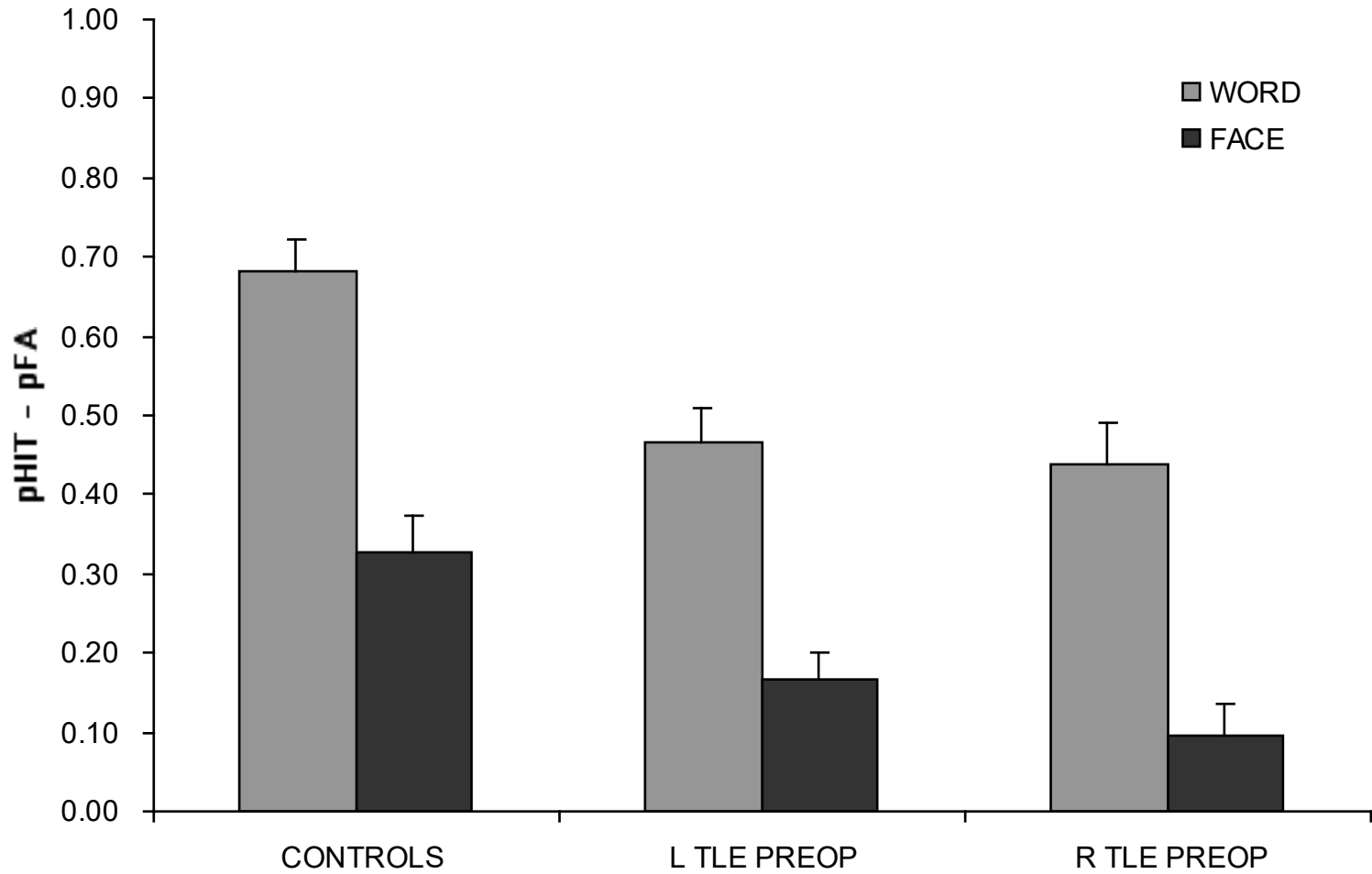


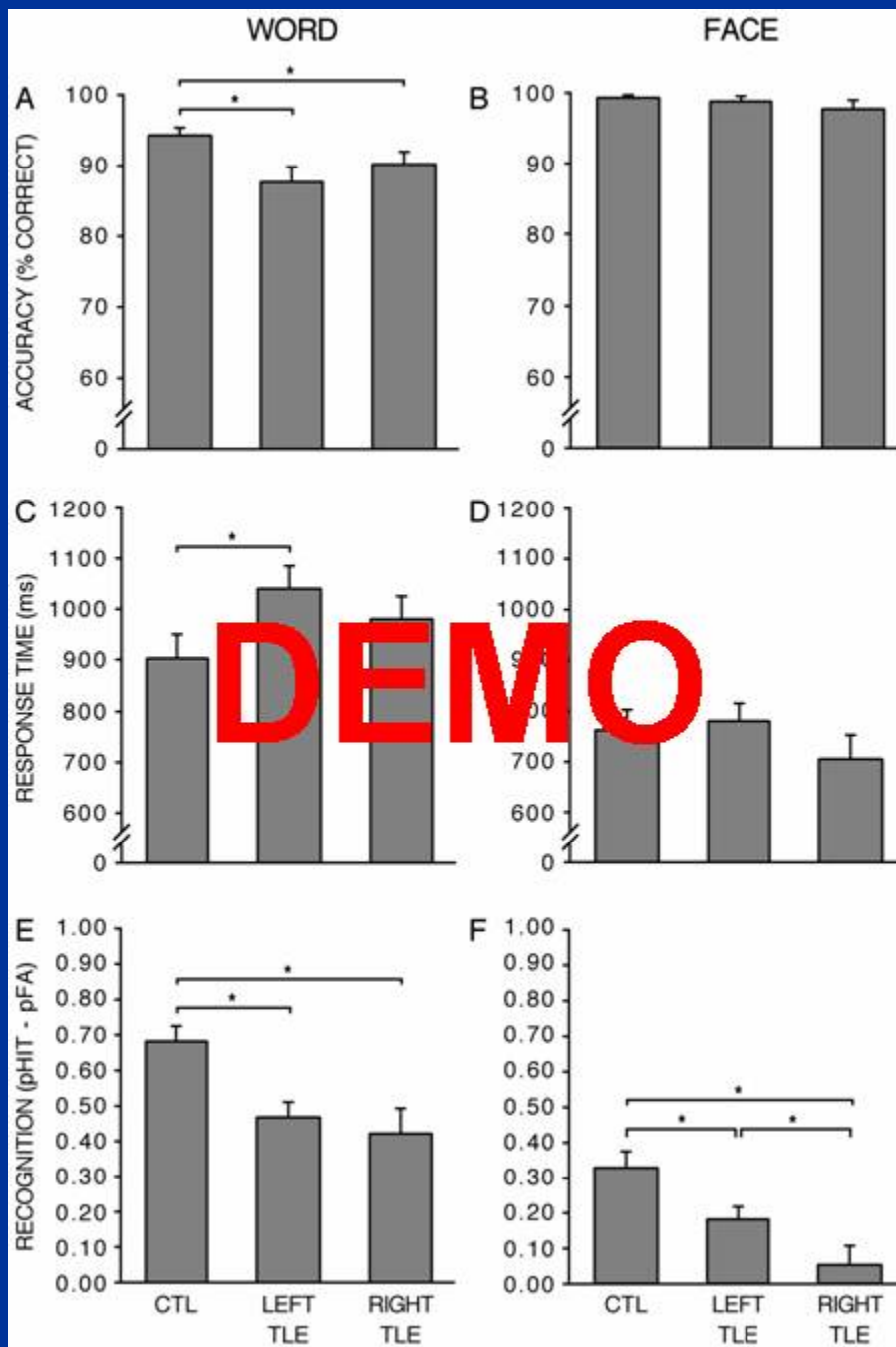
REACTION TIME

■ WORD
■ FACE



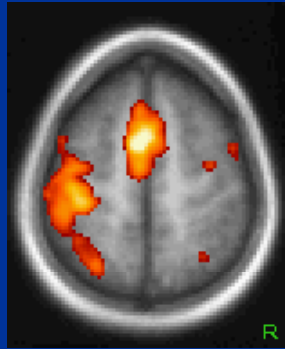
RECOGNITION



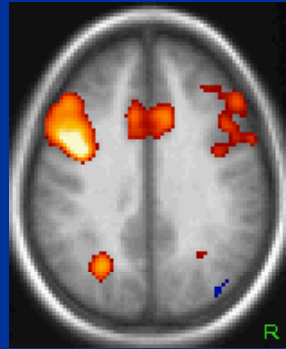


WORD TASK - PREOP

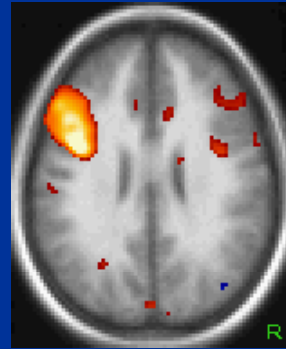
CONTROLS



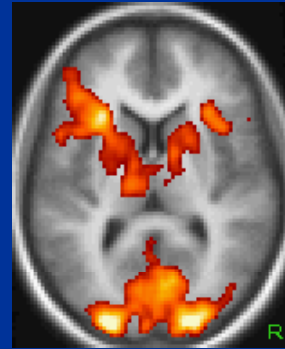
Z = 52



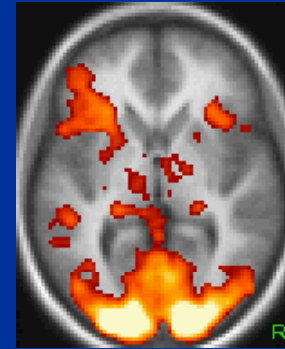
Z = 33



Z = 26



Z = 8

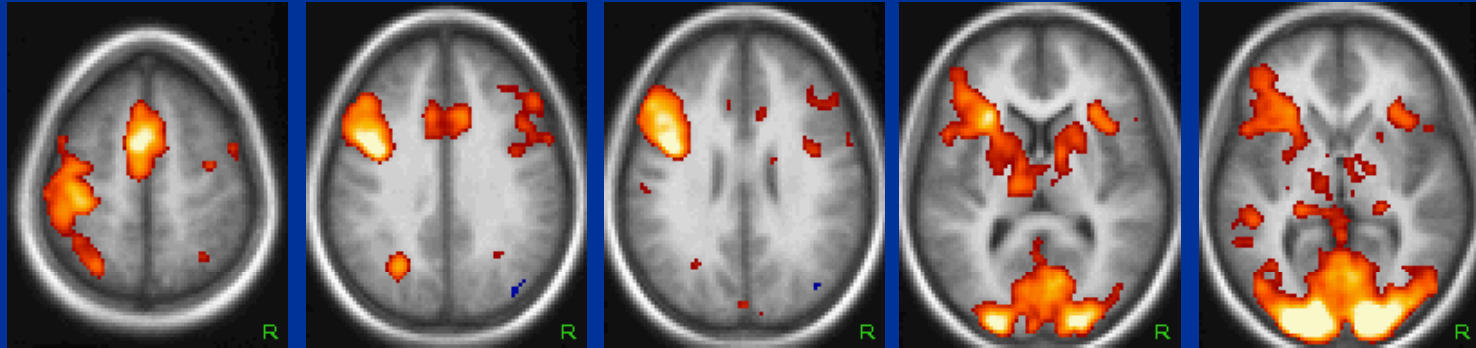


Z = -2

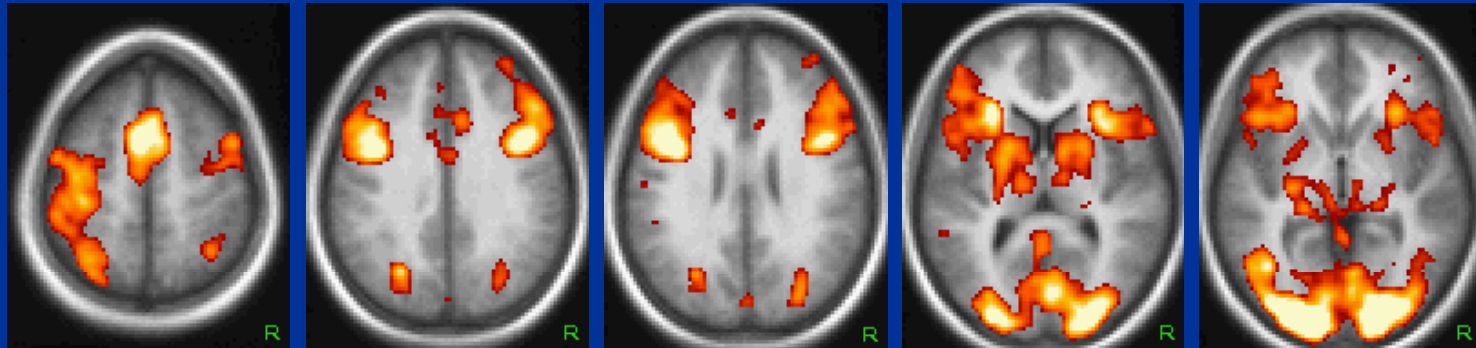


WORD TASK - PREOP

CONTROLS



LEFT TLE



Z = 52

Z = 33

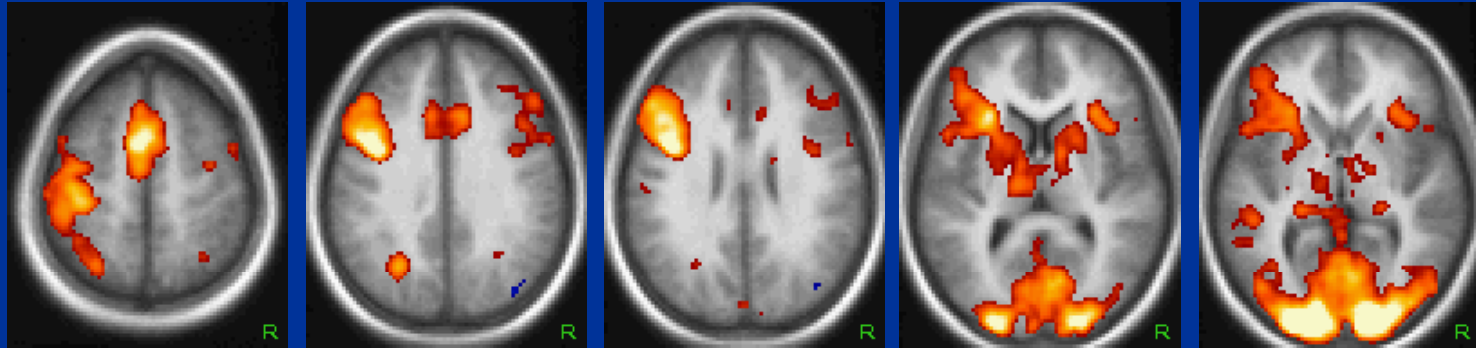
Z = 26

Z = 8

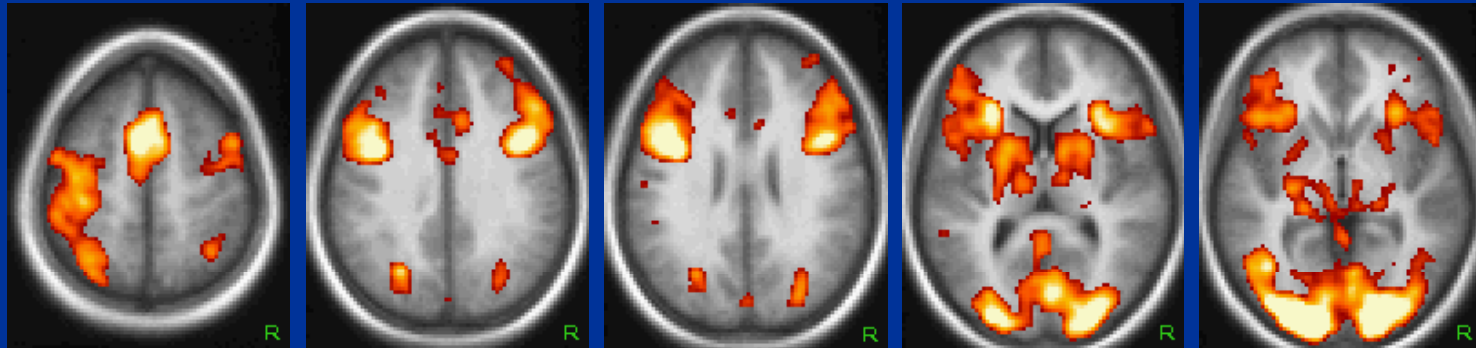
Z = -2

WORD TASK - PREOP

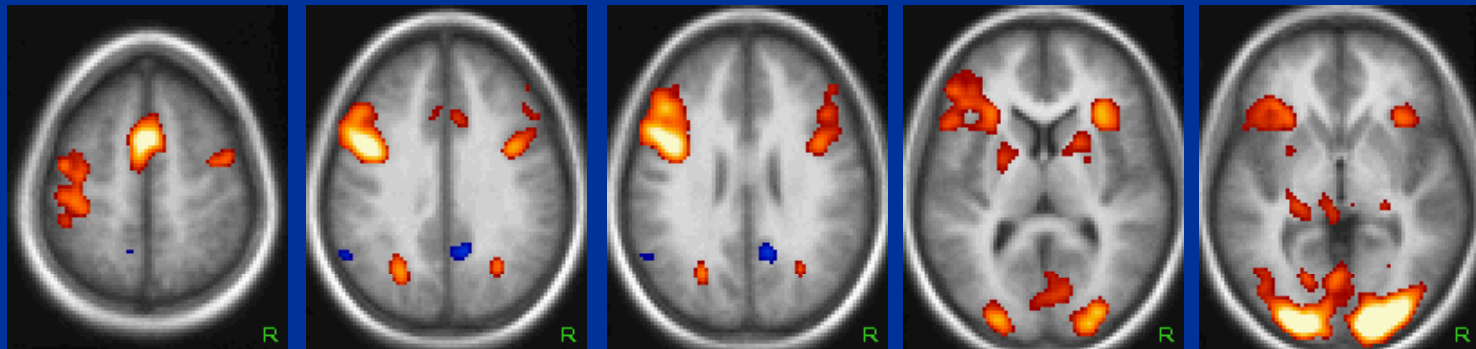
CONTROLS



LEFT TLE



RIGHT TLE



Z = 52

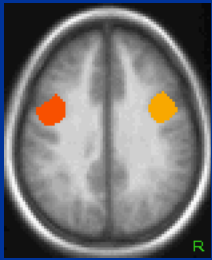
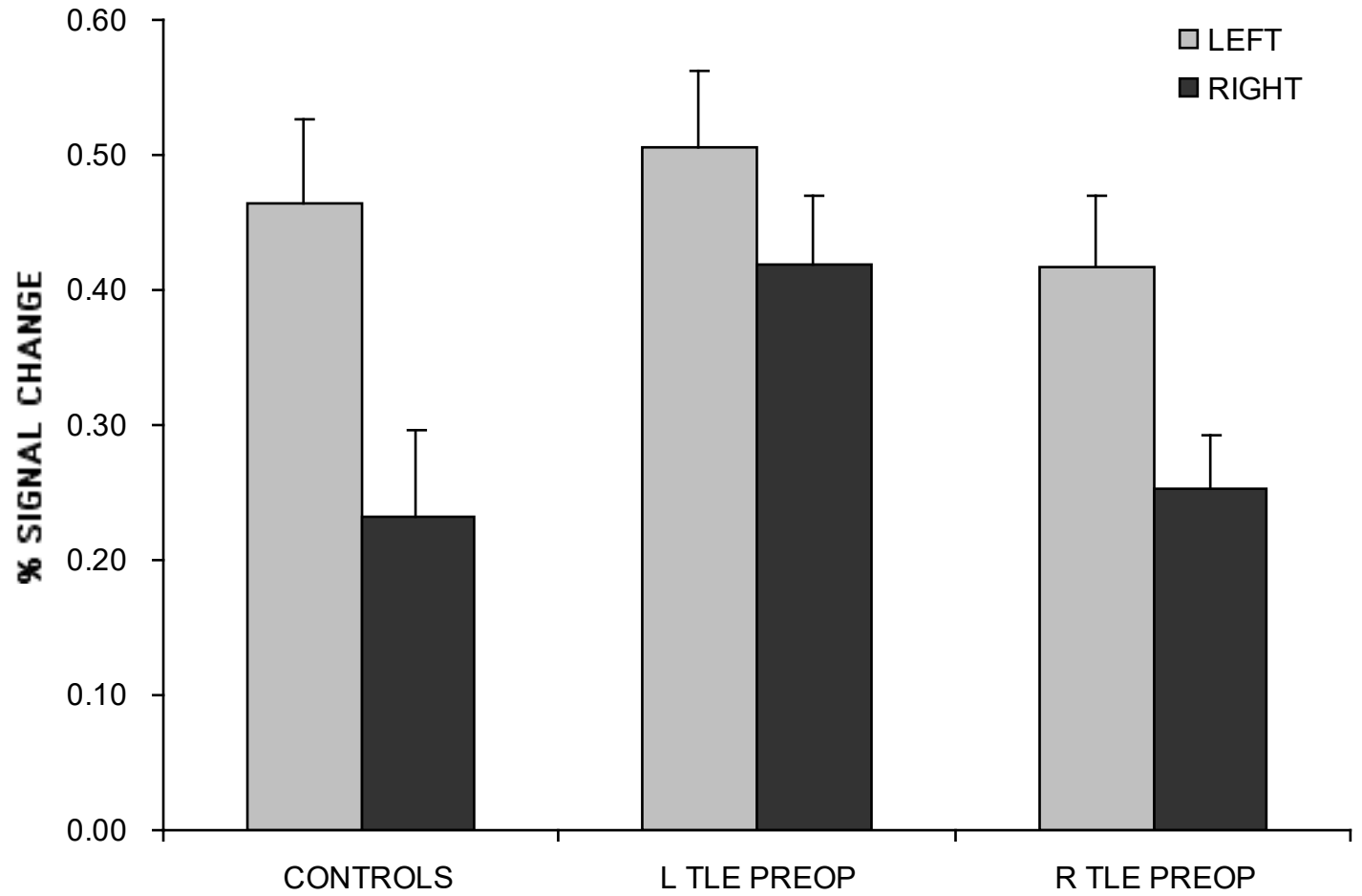
Z = 33

Z = 26

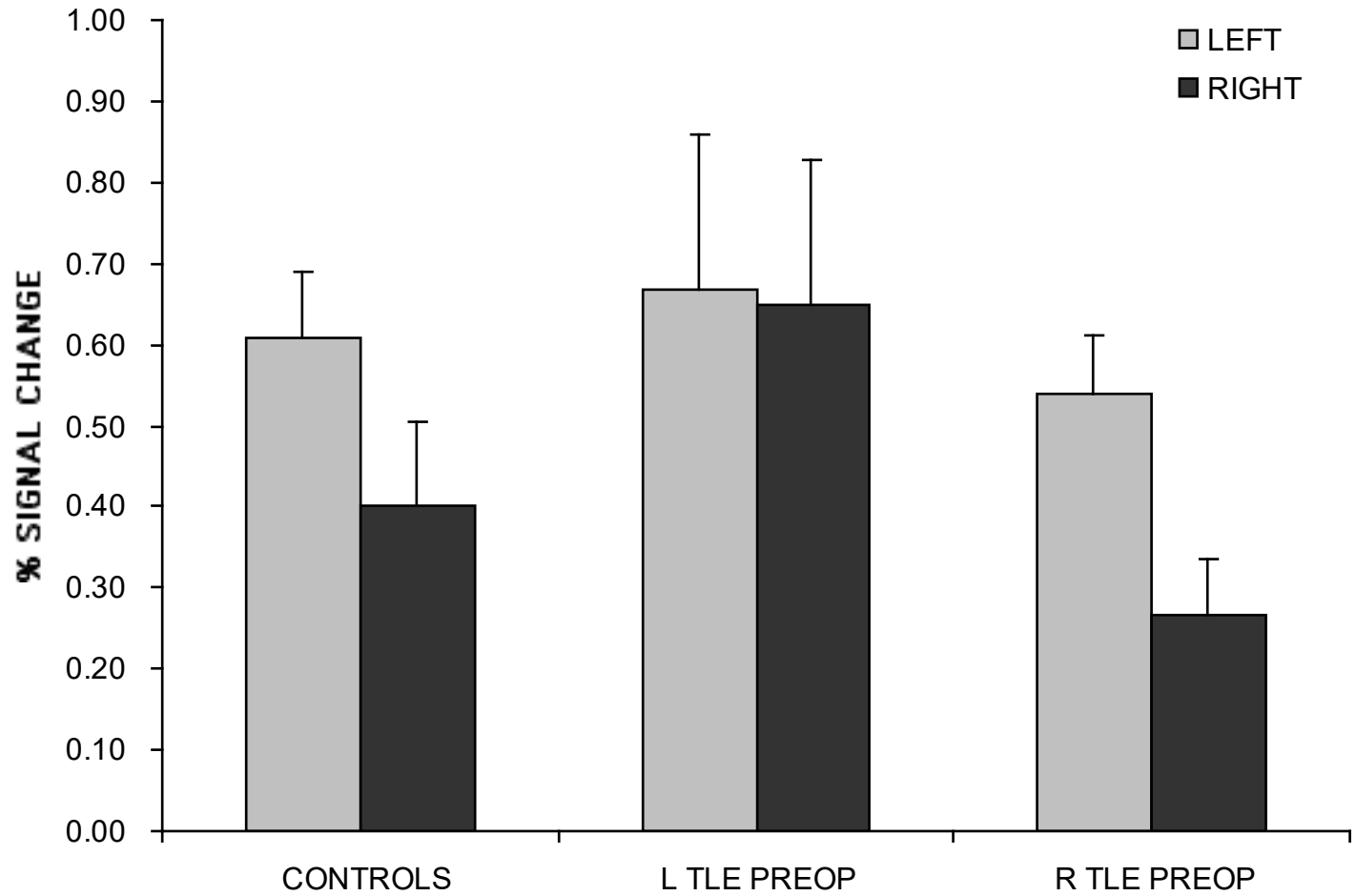
Z = 8

Z = -2

FRONTAL CORTEX (WORD TASK)

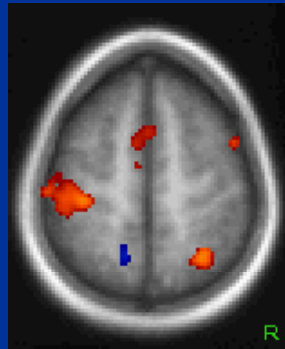


ANTERIOR FRONTAL CORTEX (WORD TASK)

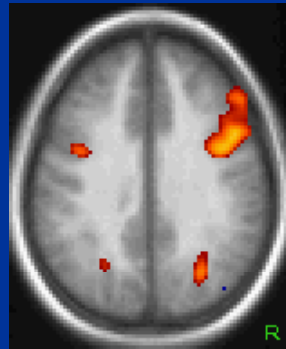


FACE TASK - PREOP

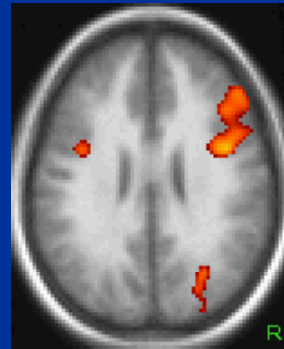
CONTROLS



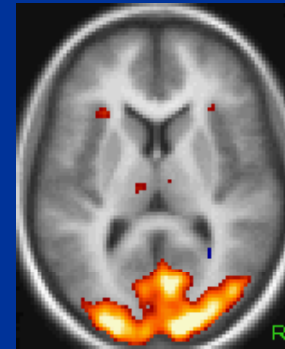
Z = 52



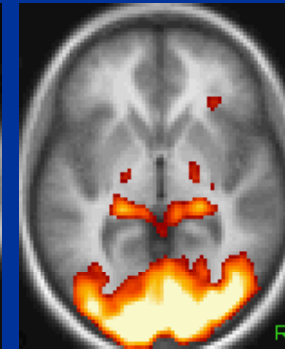
Z = 33



Z = 26



Z = 8

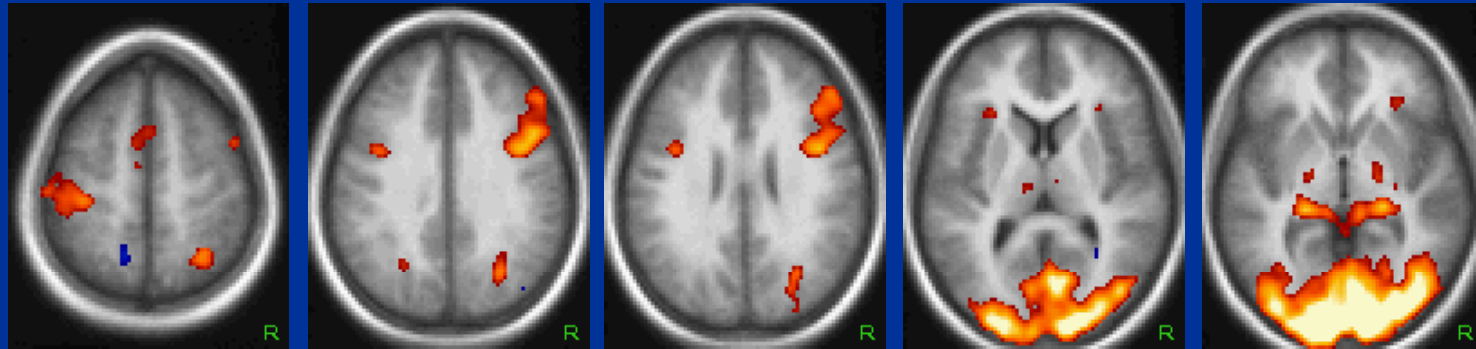


Z = -2

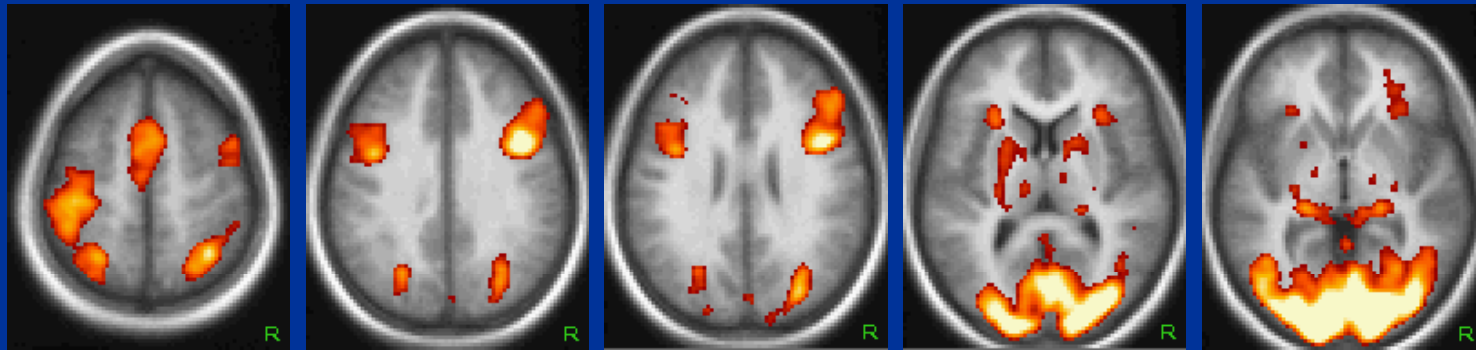


FACE TASK - PREOP

CONTROLS



LEFT TLE



Z = 52

Z = 33

Z = 26

Z = 8

Z = -2

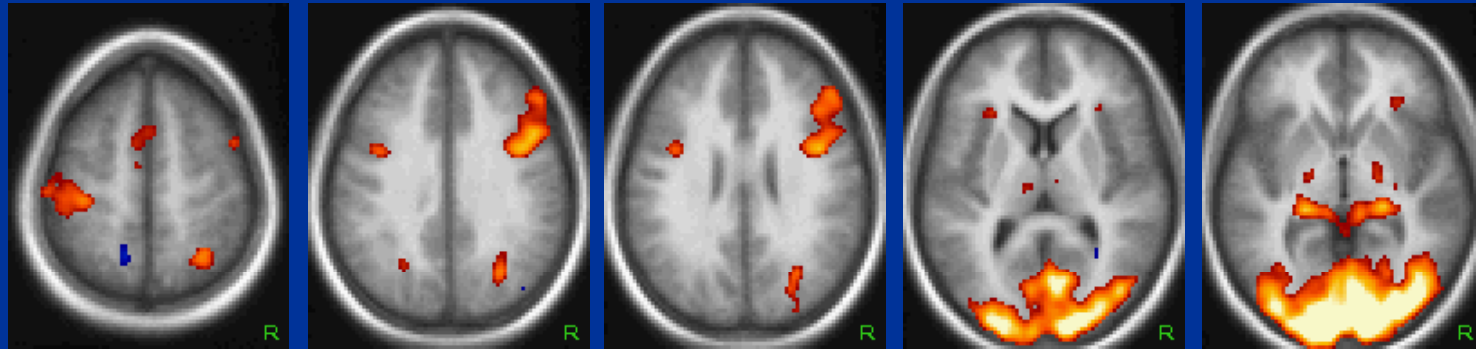
Z > 7.0



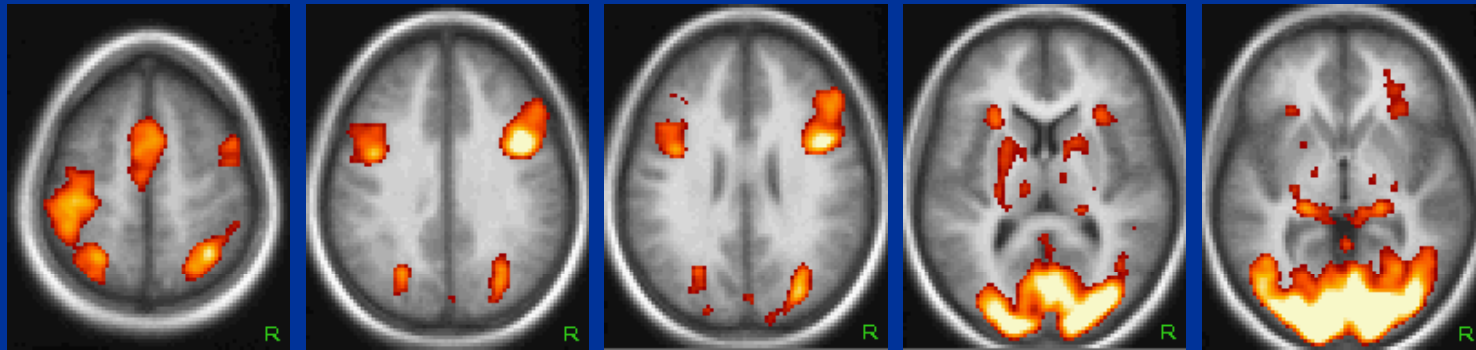
Z > 3.3

FACE TASK - PREOP

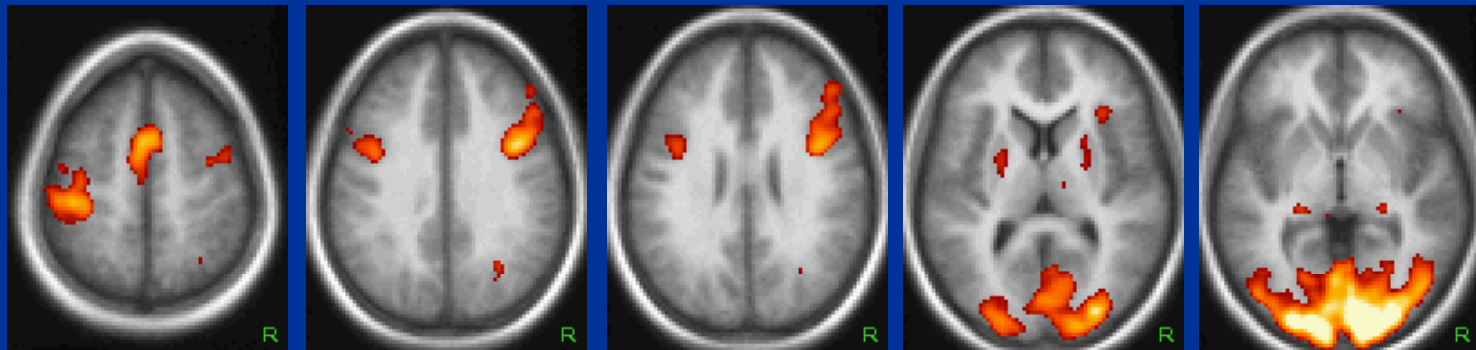
CONTROLS



LEFT TLE



RIGHT TLE



Z = 52

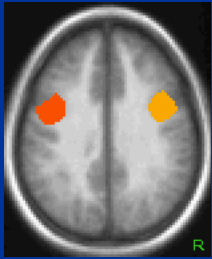
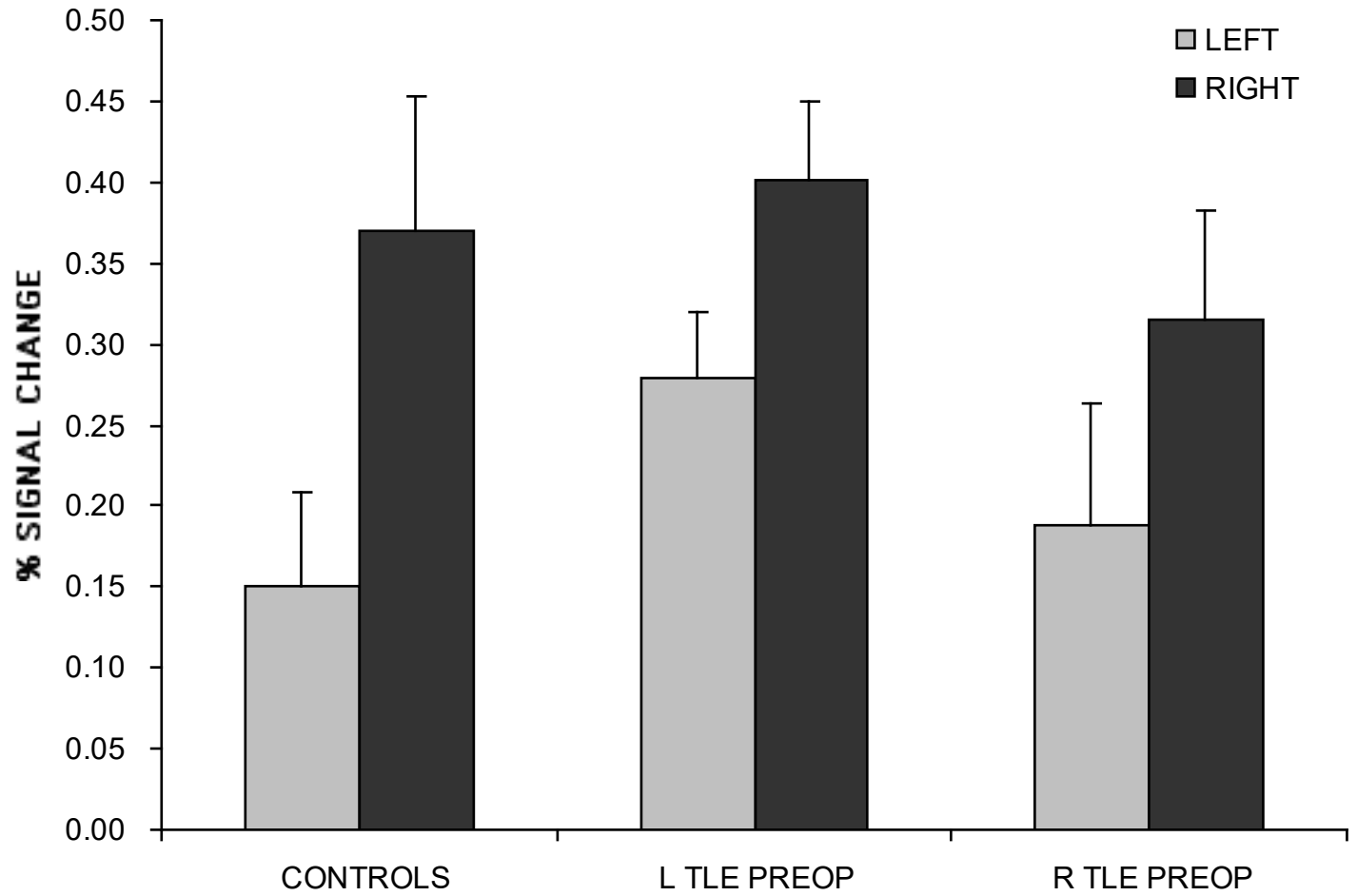
Z = 33

Z = 26

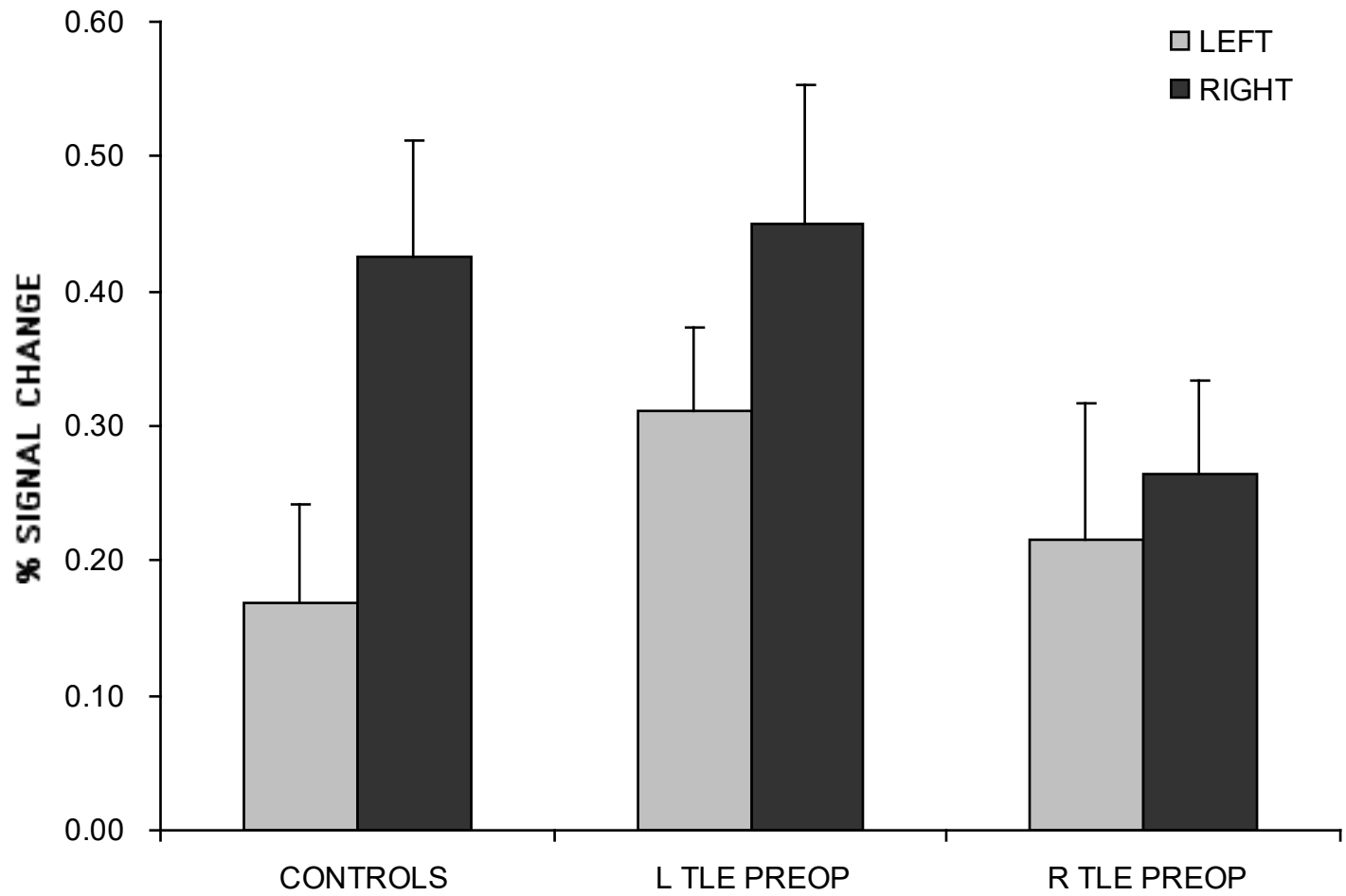
Z = 8

Z = -2

FRONTAL CORTEX (FACE TASK)

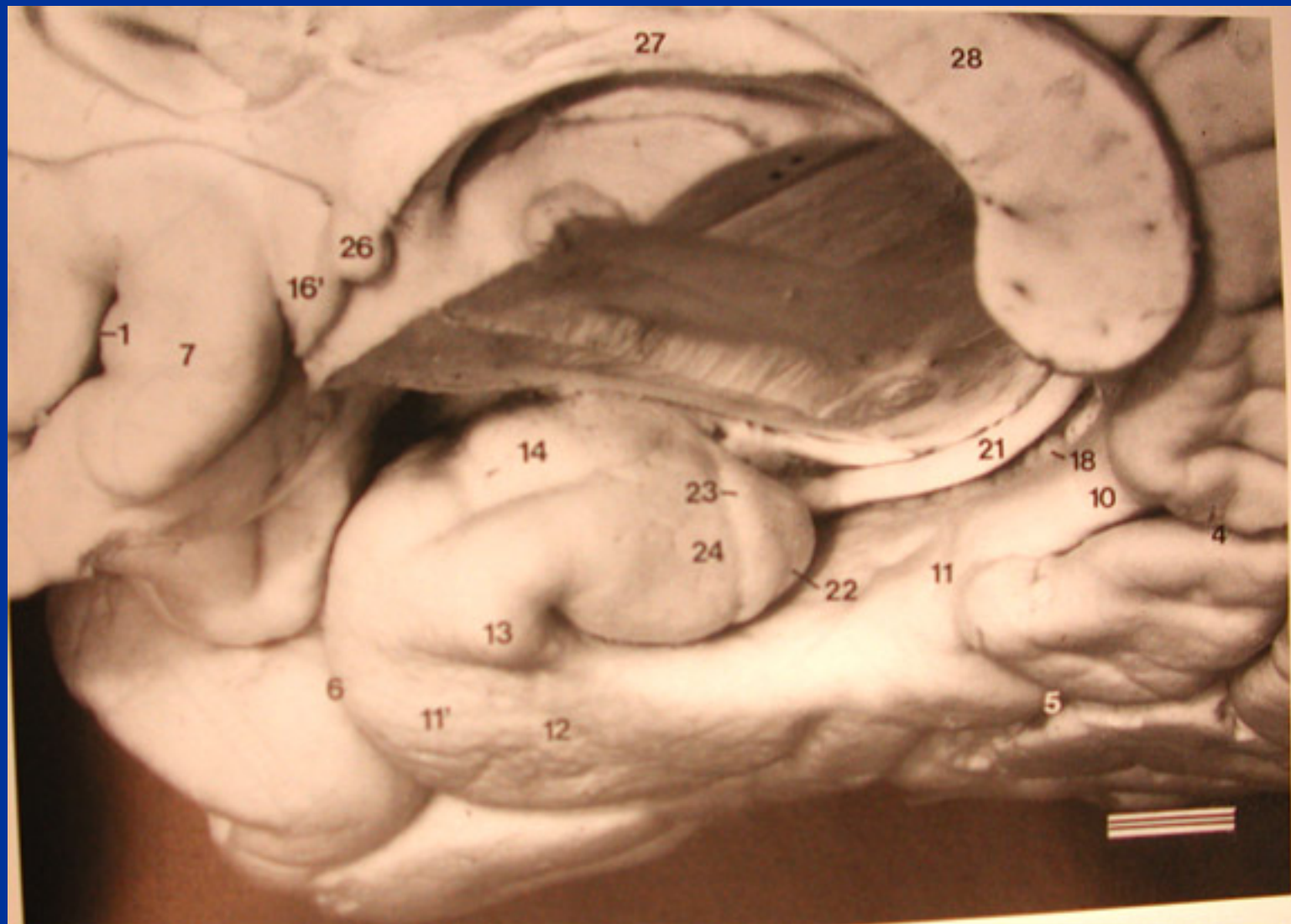


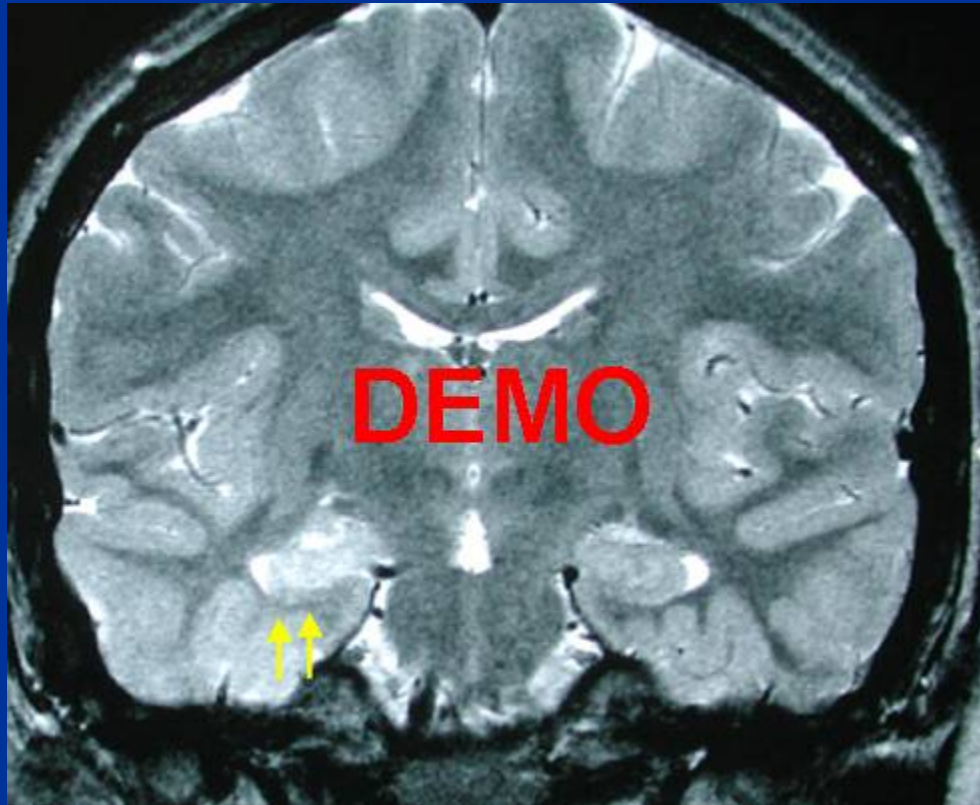
ANTERIOR FRONTAL CORTEX (FACE TASK)



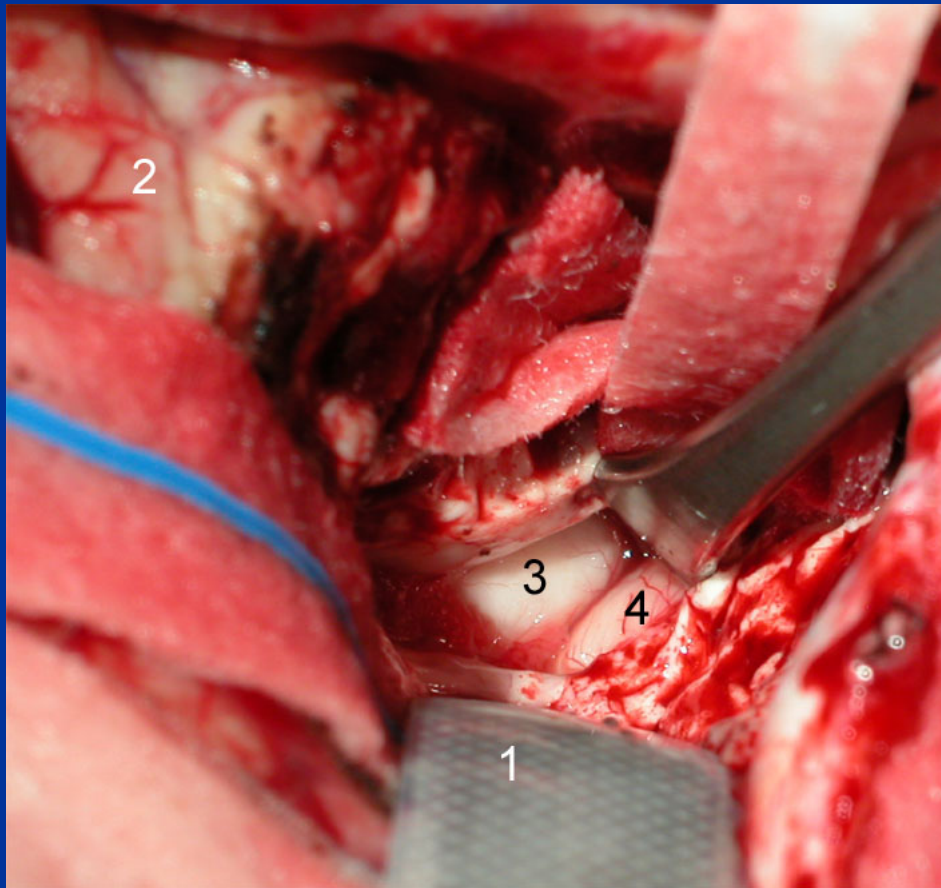
SUMMARY

- Preoperative TLE patients are behaviorally impaired in recognition as compared to controls, both in verbal and non-verbal domains.
- At the same time, preoperative encoding activation in frontal cortex by-and-large resembles that of controls for both left and right TLE patients.
- Preoperative patients show a trend for reduced lateralization in frontal cortex (most significantly observed in L TLE patients when encoding verbal material).

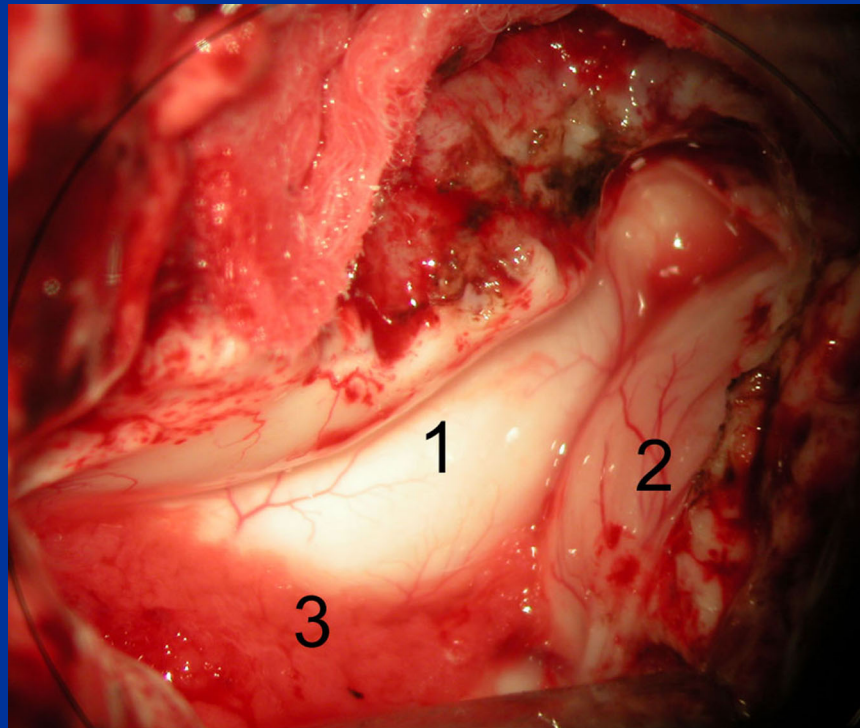


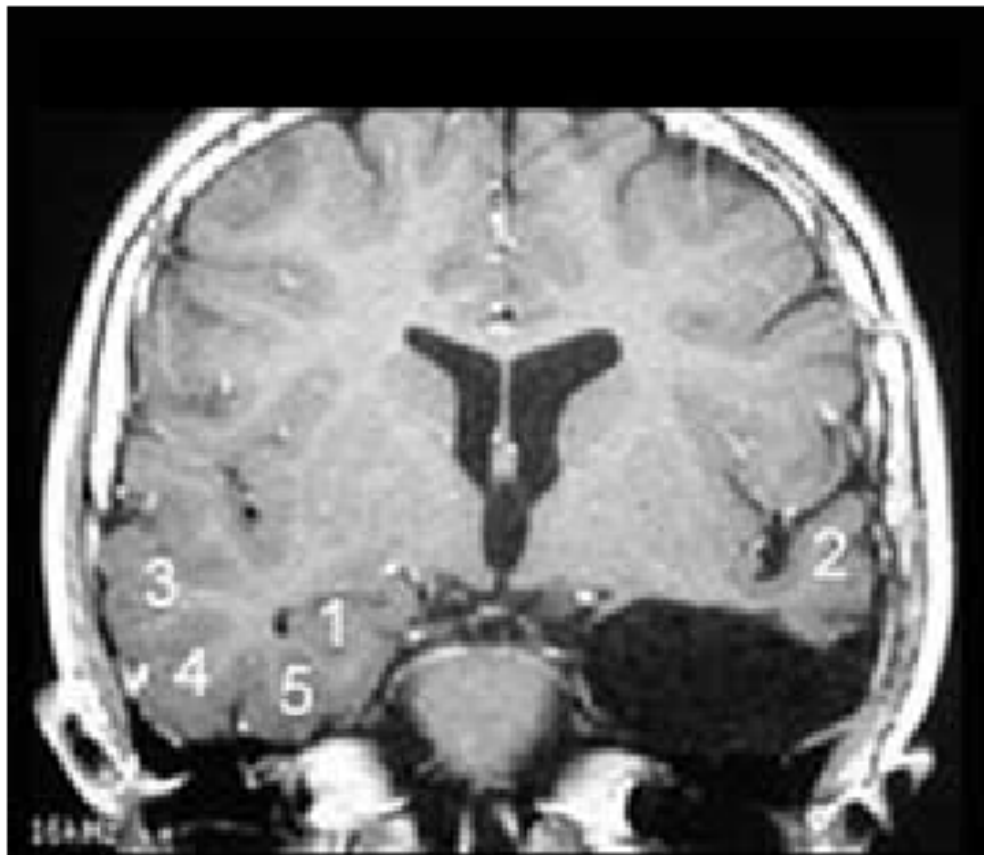


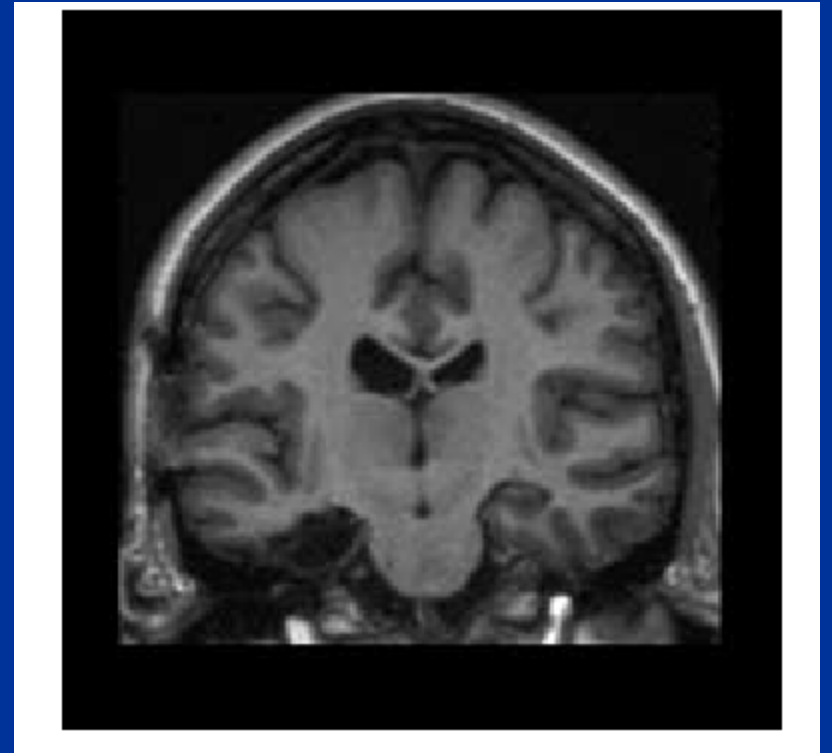
Surgery of the hippocampus

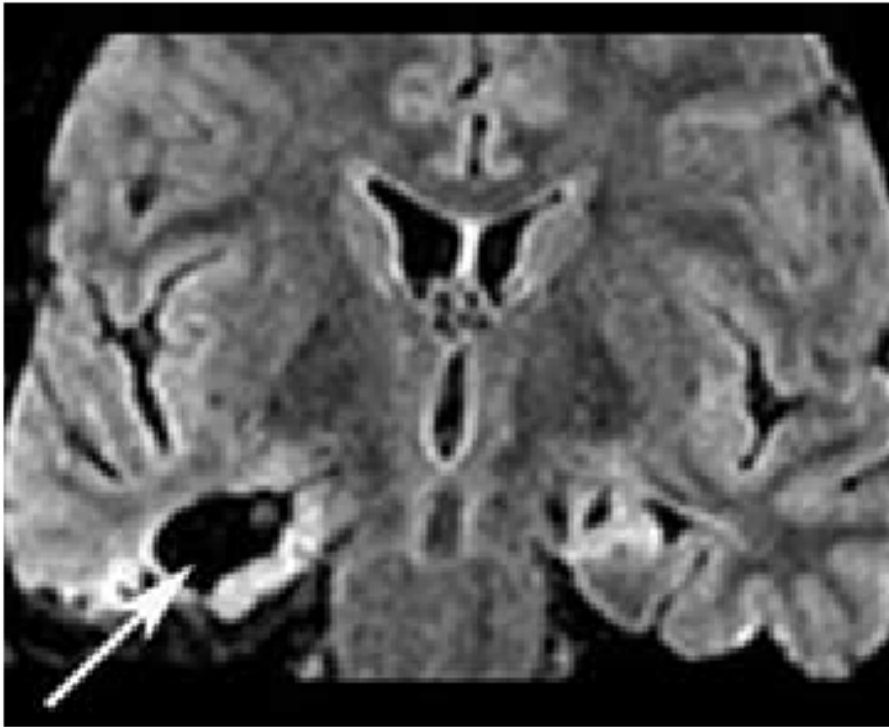


Hippocampus - surgery



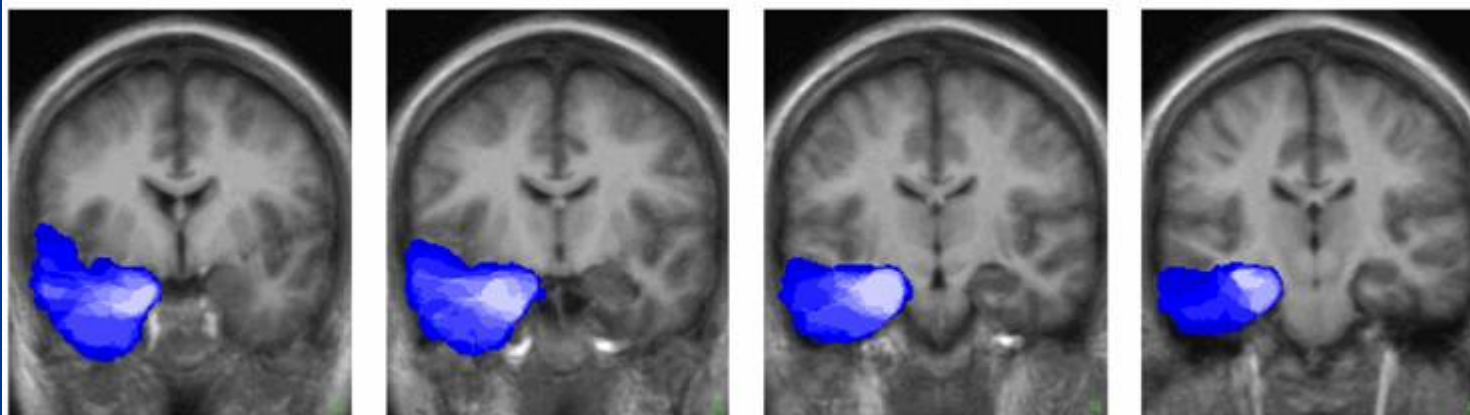






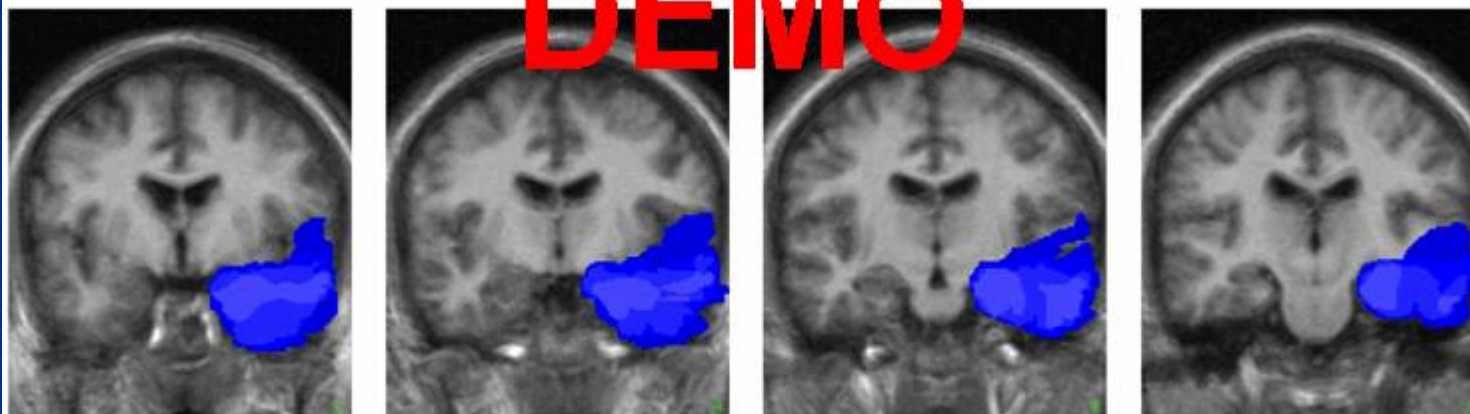
A

LEFT TLE SURGERY



B

RIGHT TLE SURGERY



Y = -6

Y = -12

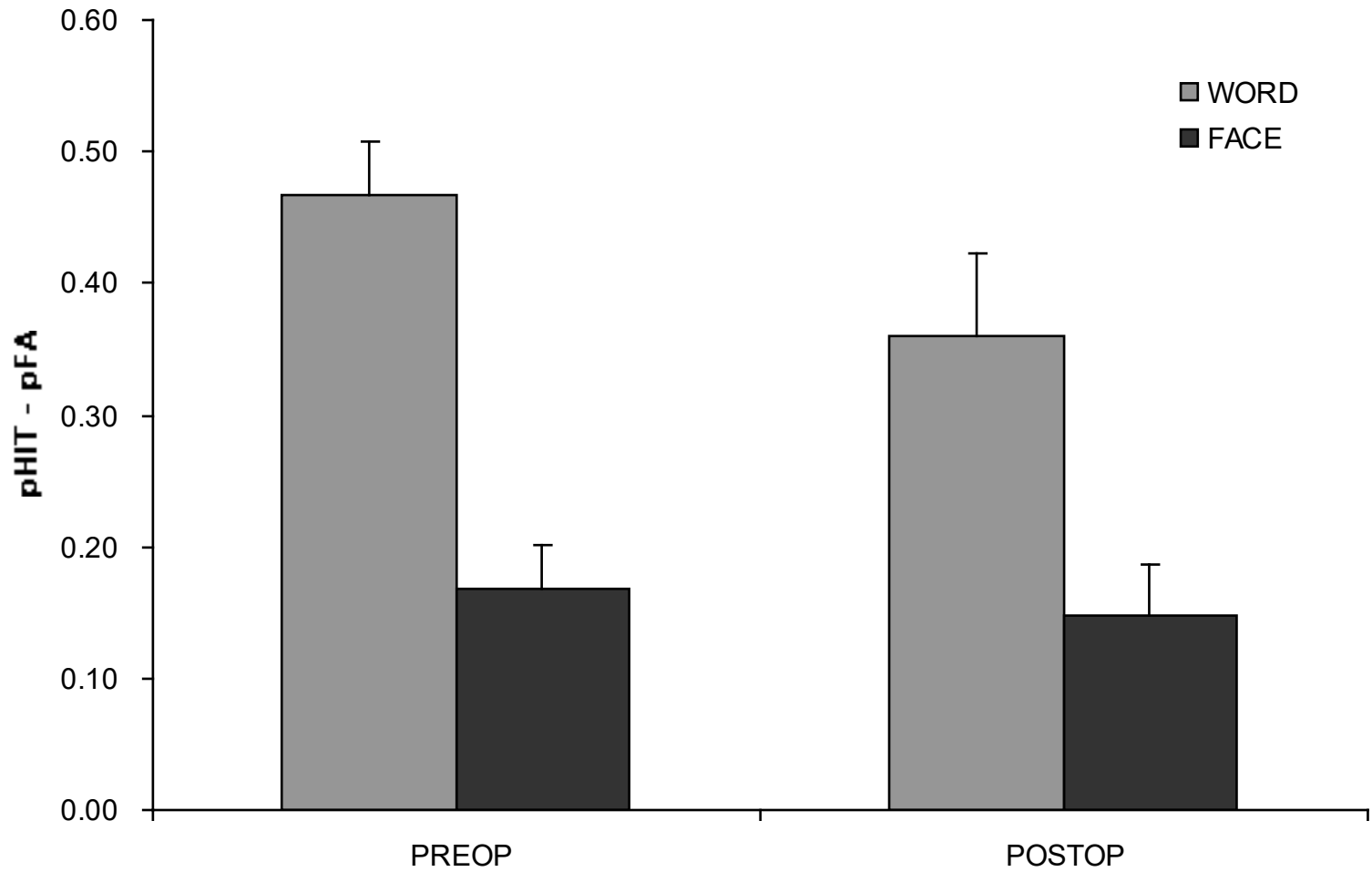
Y = -18

Y = -24



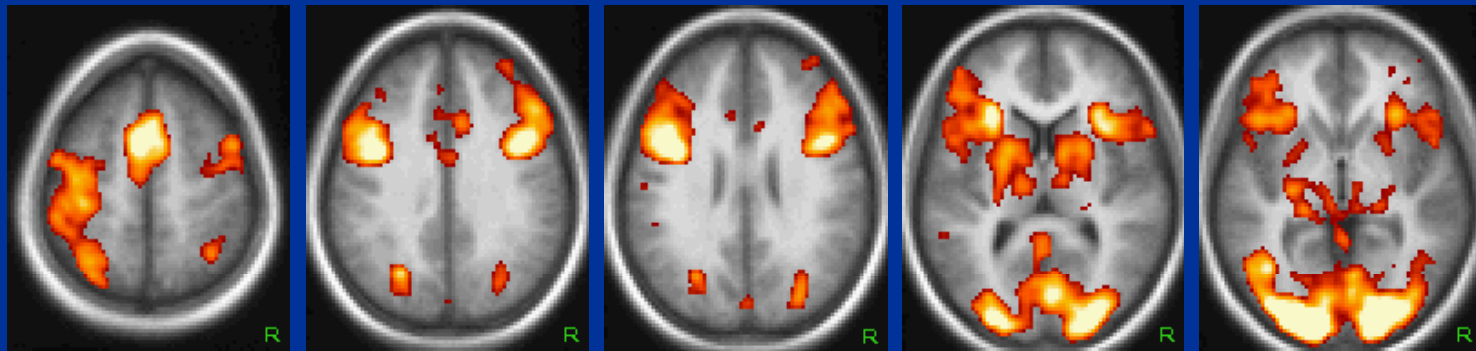
NUMBER OF PATIENTS

RECOGNITION - EFFECT OF SURGERY IN L TLE



LEFT TLE - WORD TASK - PREOP/POSTOP

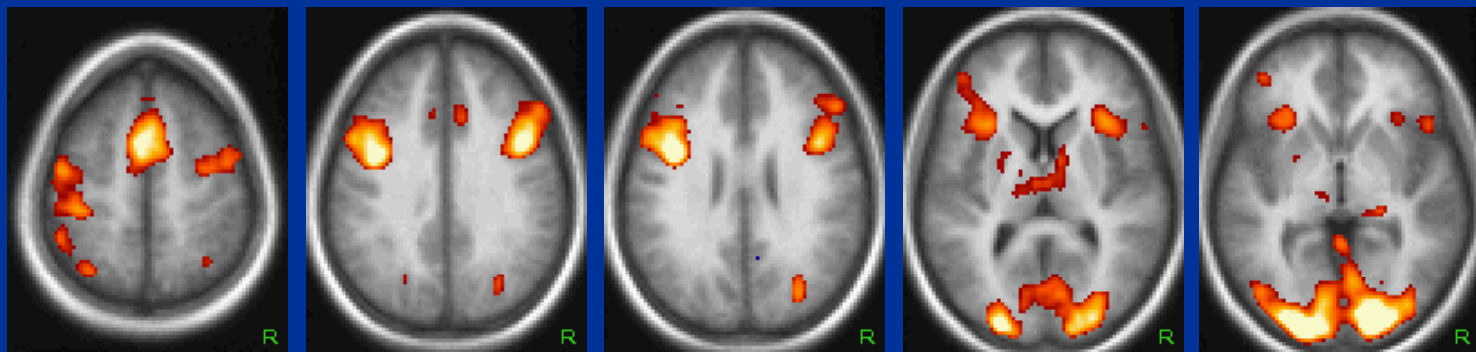
PREOP



Z > 7.0

Z > 3.3

POSTOP



Z = 52

Z = 33

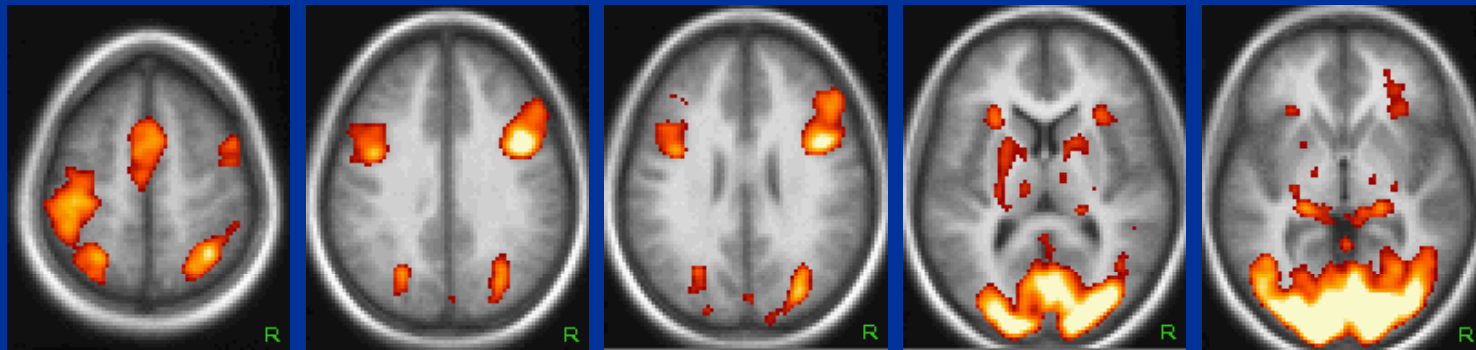
Z = 26

Z = 8

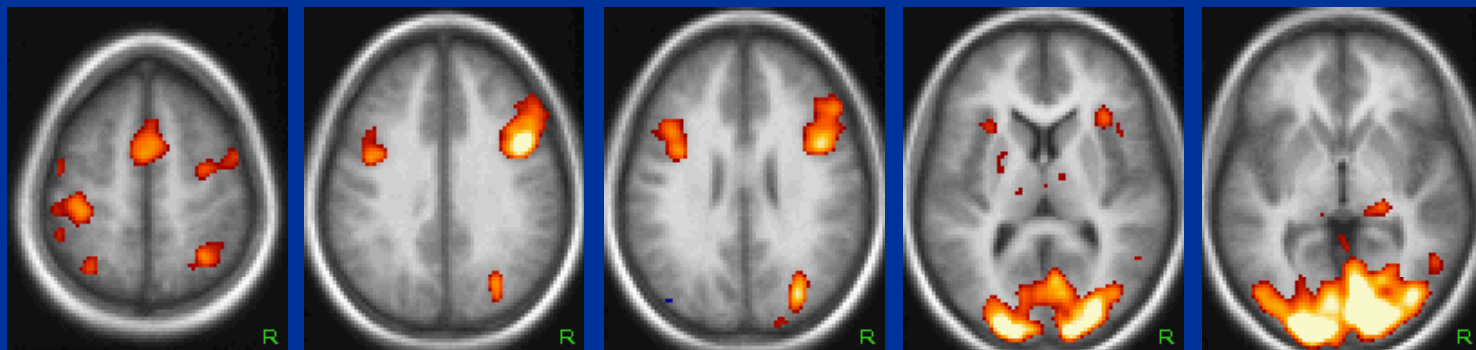
Z = -2

LEFT TLE - FACE TASK - PREOP/POSTOP

PREOP



POSTOP



Z = 52

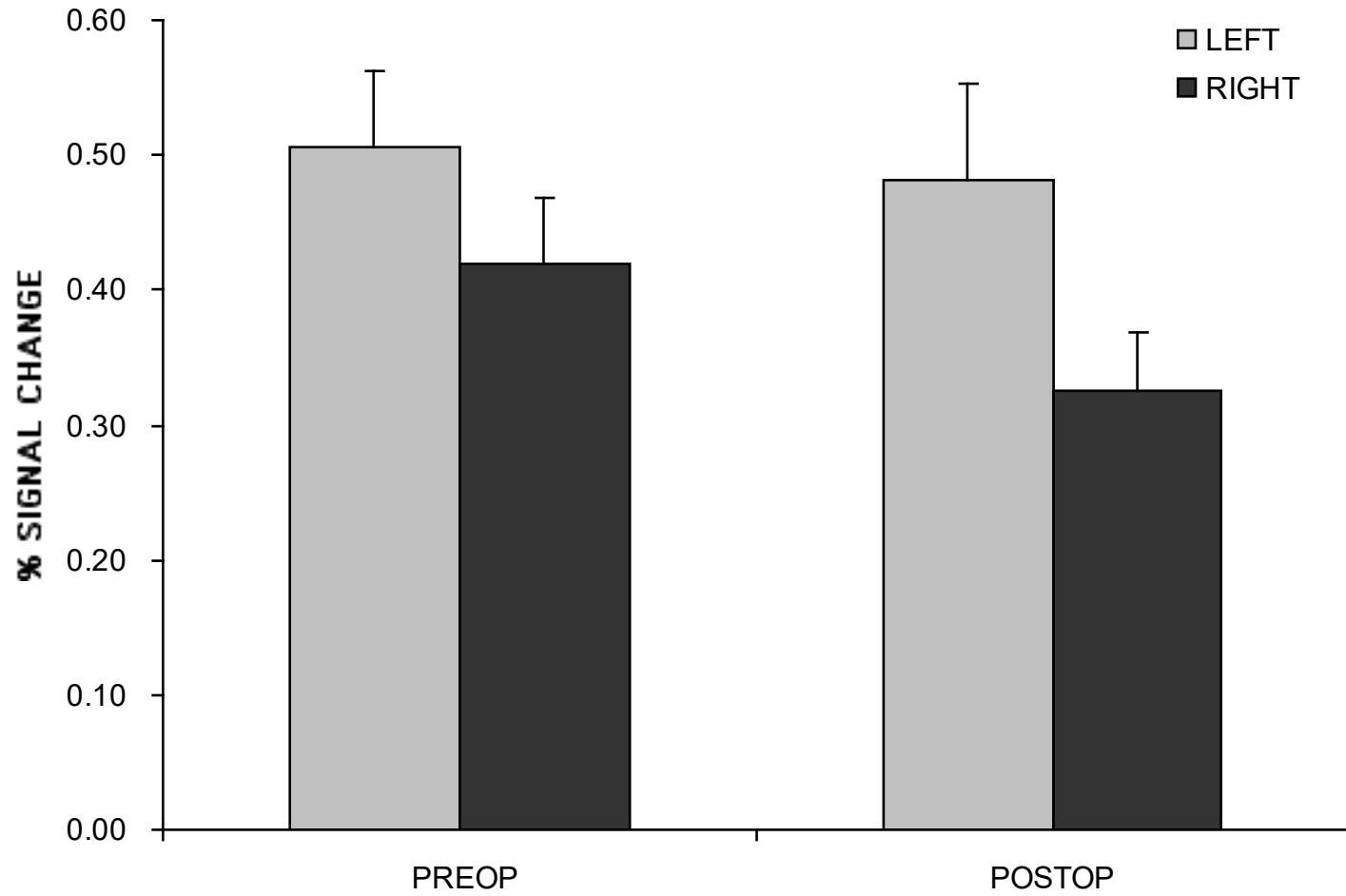
Z = 33

Z = 26

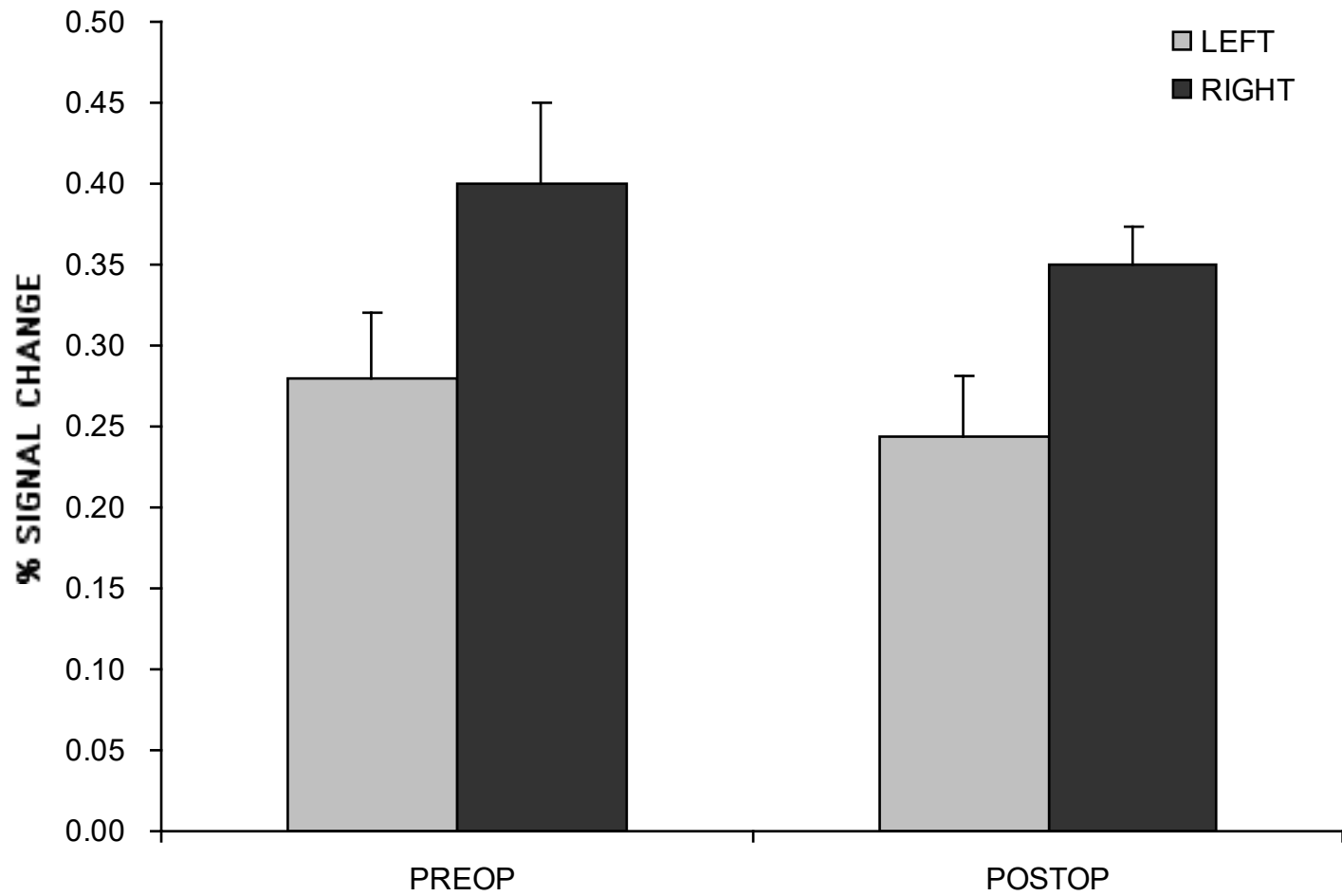
Z = 8

Z = -2

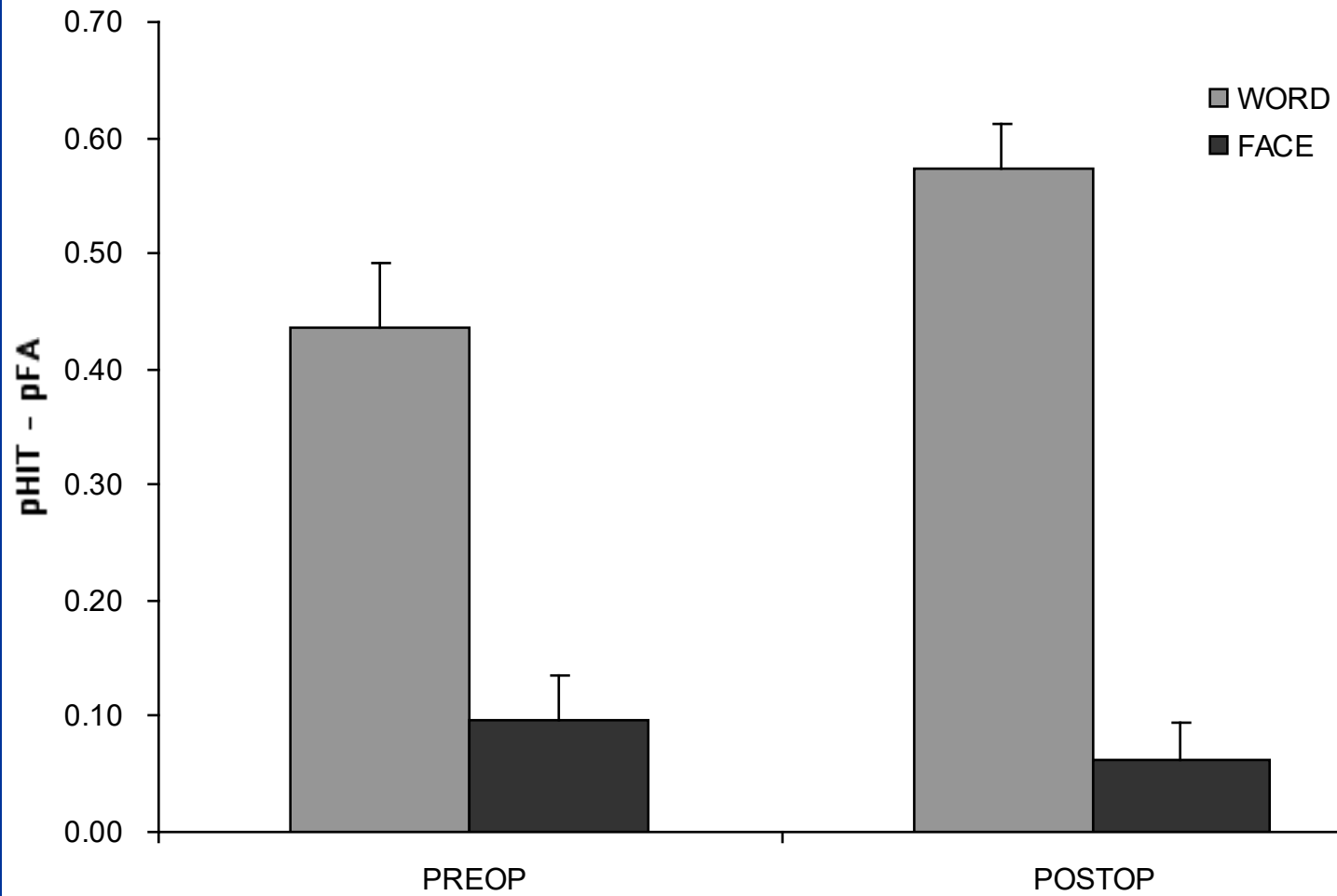
FRONTAL CORTEX (WORD TASK)



FRONTAL CORTEX (FACE TASK)

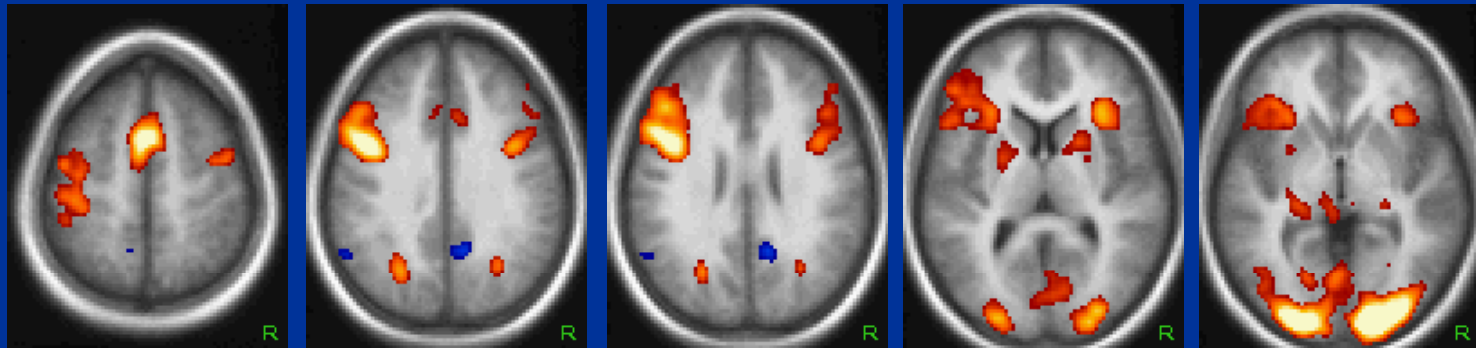


RECOGNITION - EFFECT OF SURGERY IN R TLE

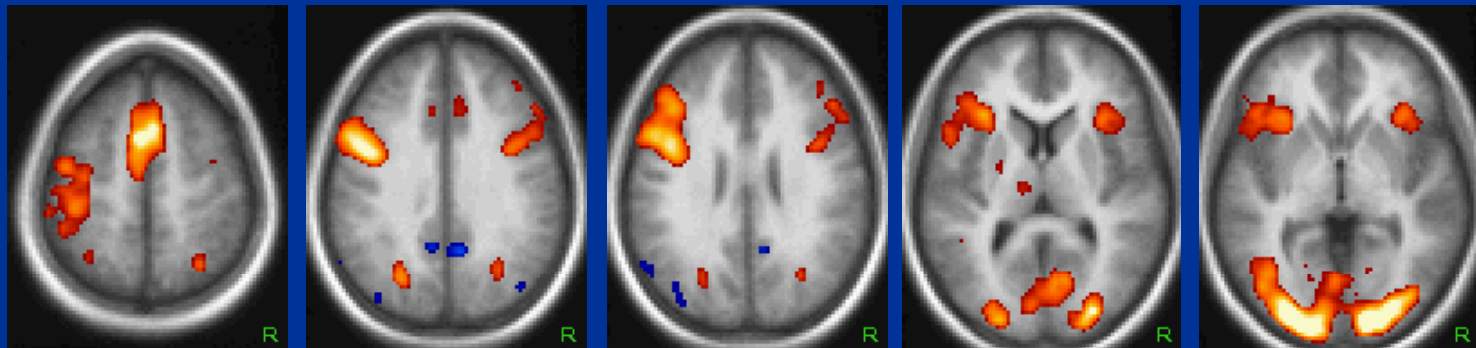


RIGHT TLE - WORD TASK - PREOP/POSTOP

PREOP



POSTOP



Z = 52

Z = 33

Z = 26

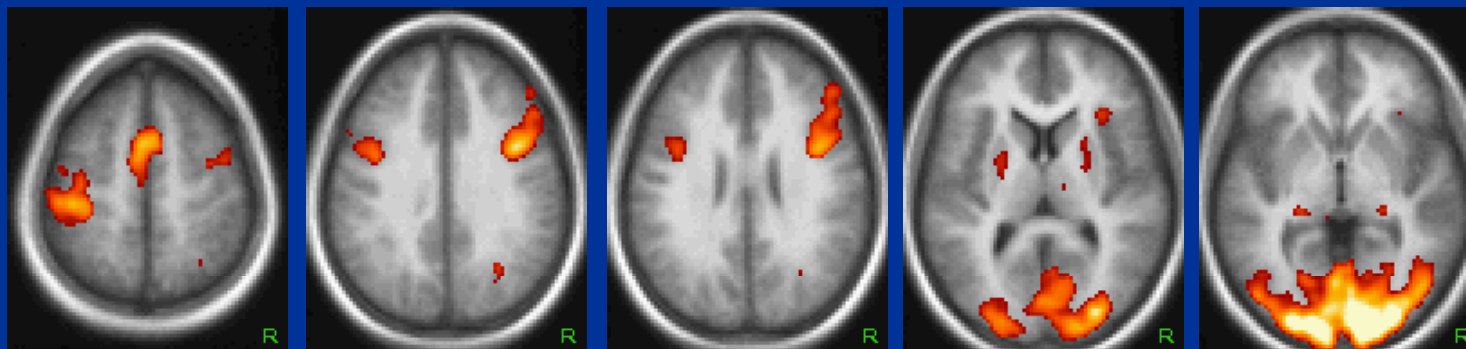
Z = 8

Z = -2

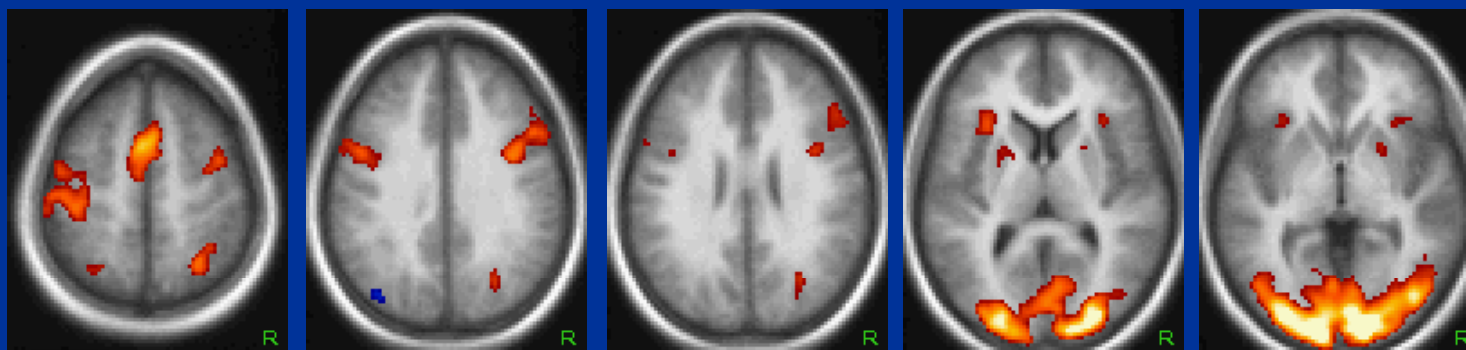


RIGHT TLE - FACE TASK - PREOP/POSTOP

PREOP



POSTOP



$Z = 52$

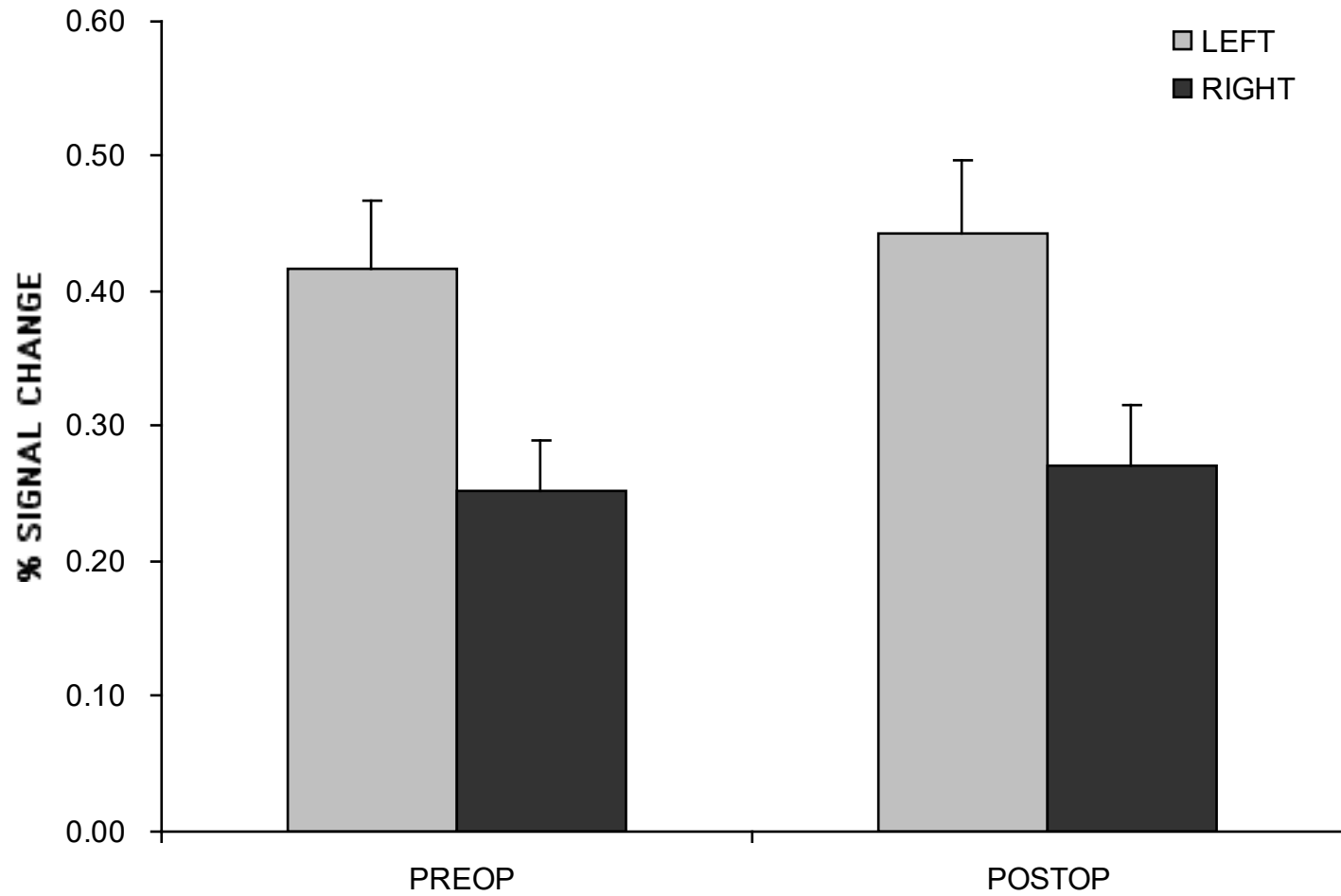
$Z = 33$

$Z = 26$

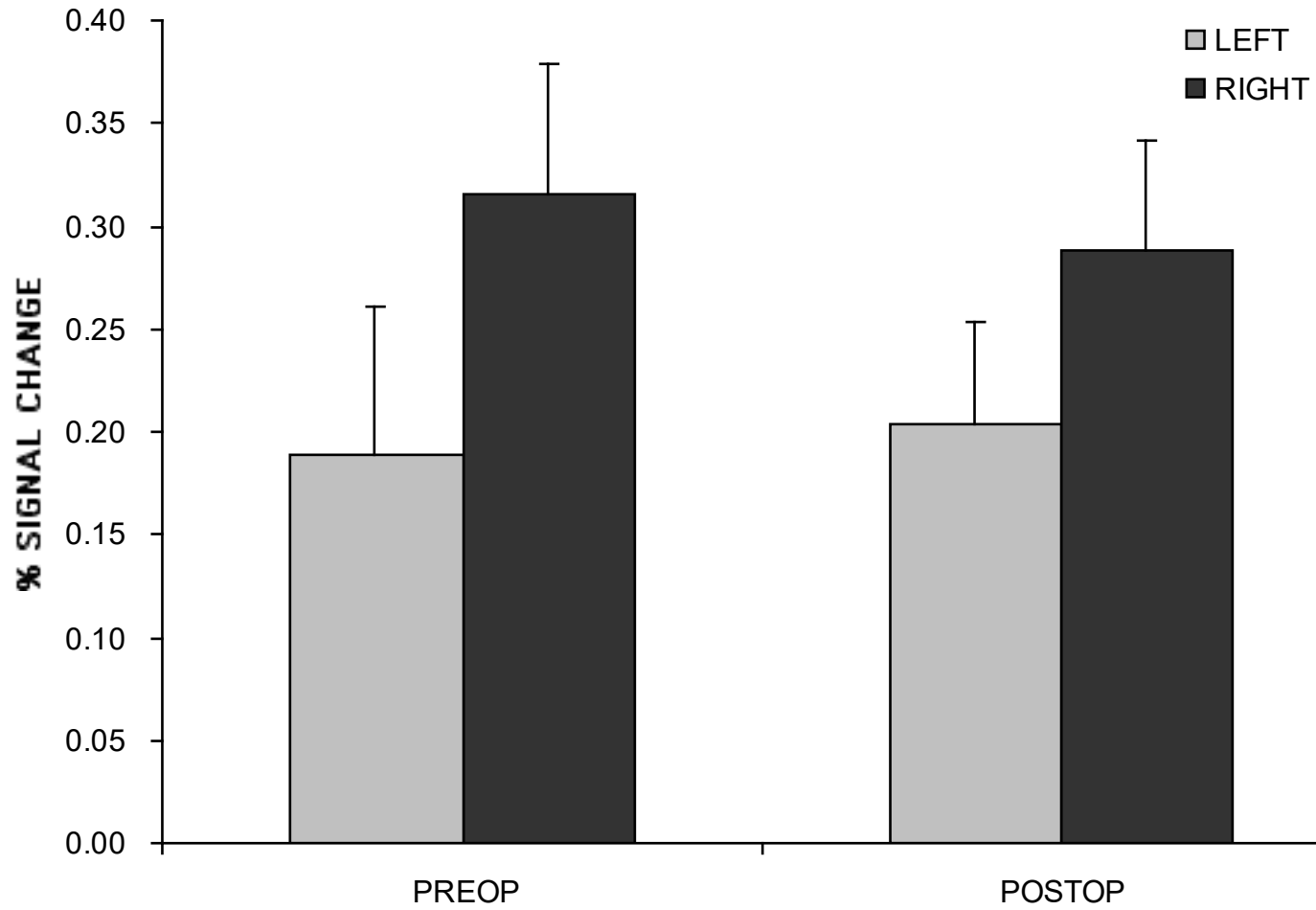
$Z = 8$

$Z = -2$

FRONTAL CORTEX (WORD TASK)

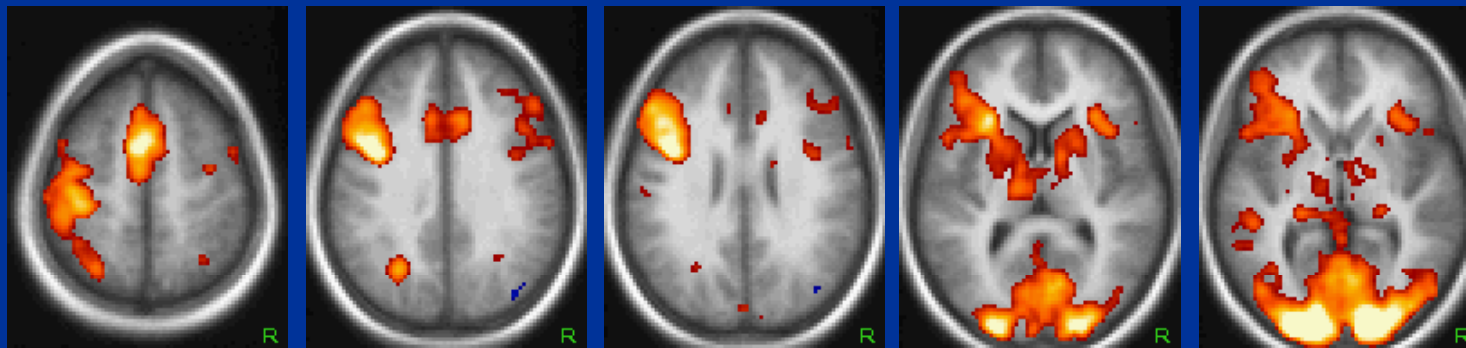


FRONTAL CORTEX (FACE TASK)



CONTROLS, LEFT TLE - WORD TASK

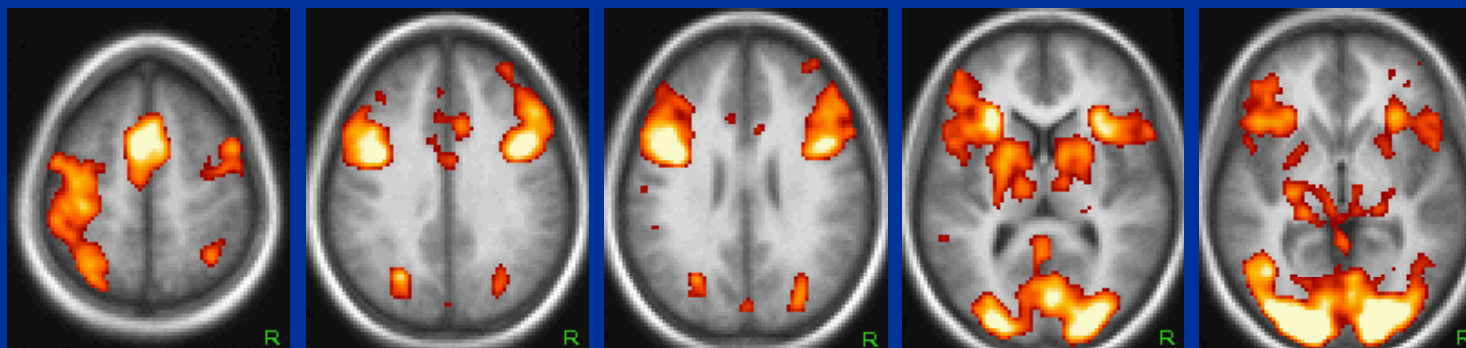
CONTROLS



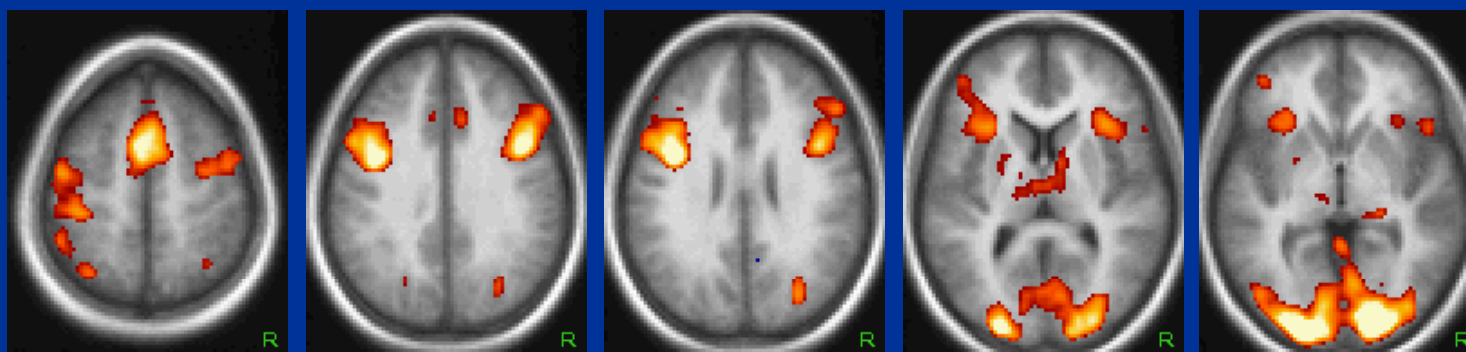
Z > 7.0

Z > 3.3

PREOP



POSTOP



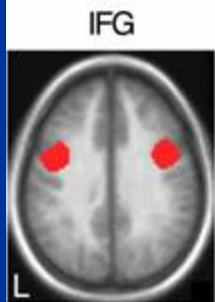
Z = 52

Z = 33

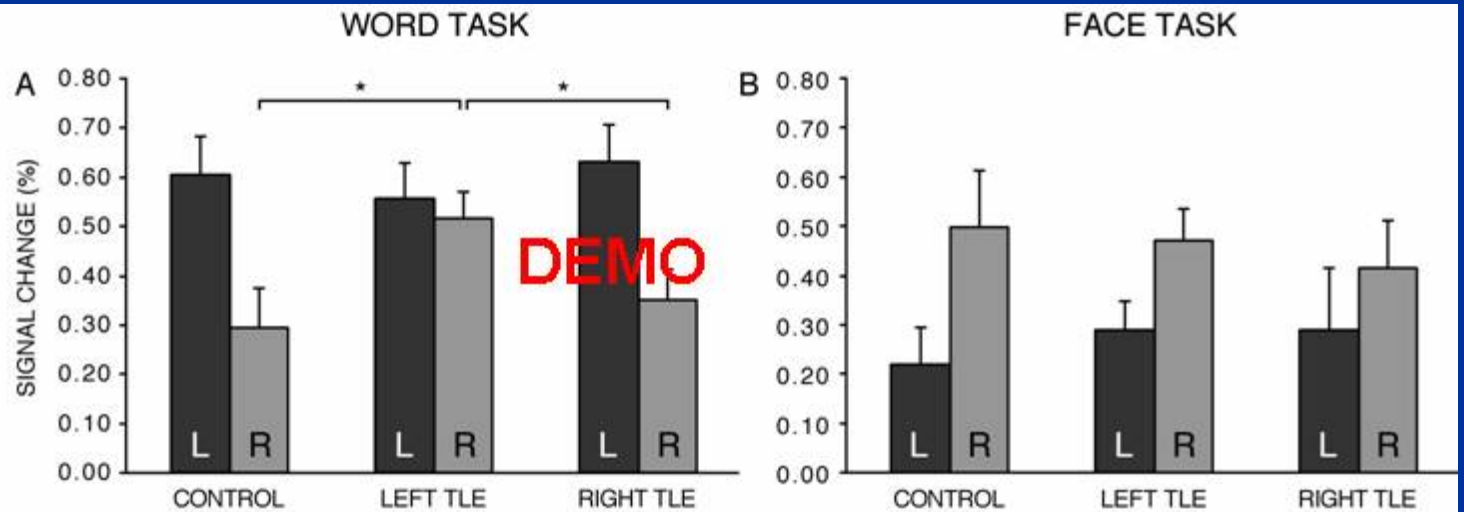
Z = 26

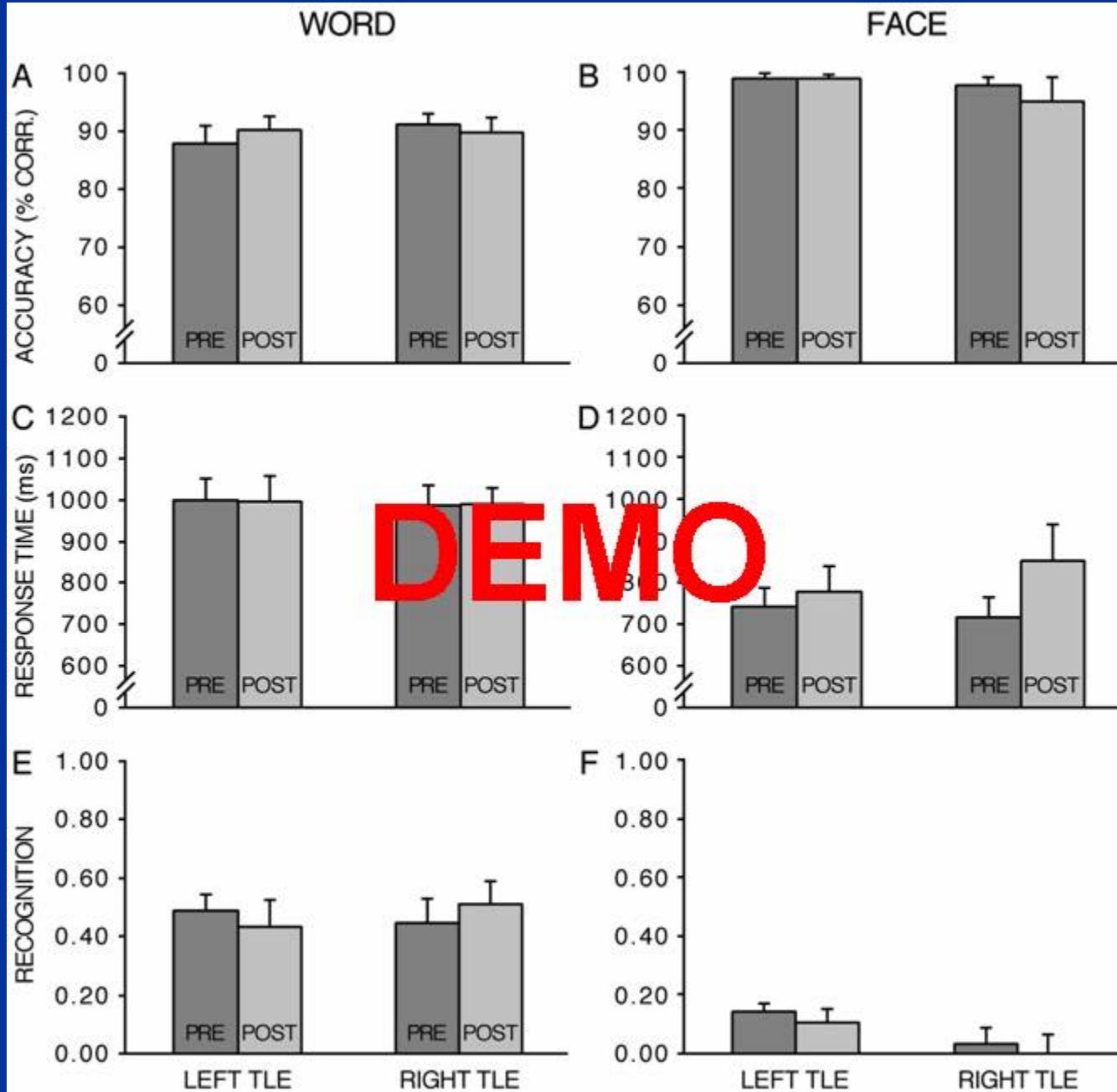
Z = 8

Z = -2

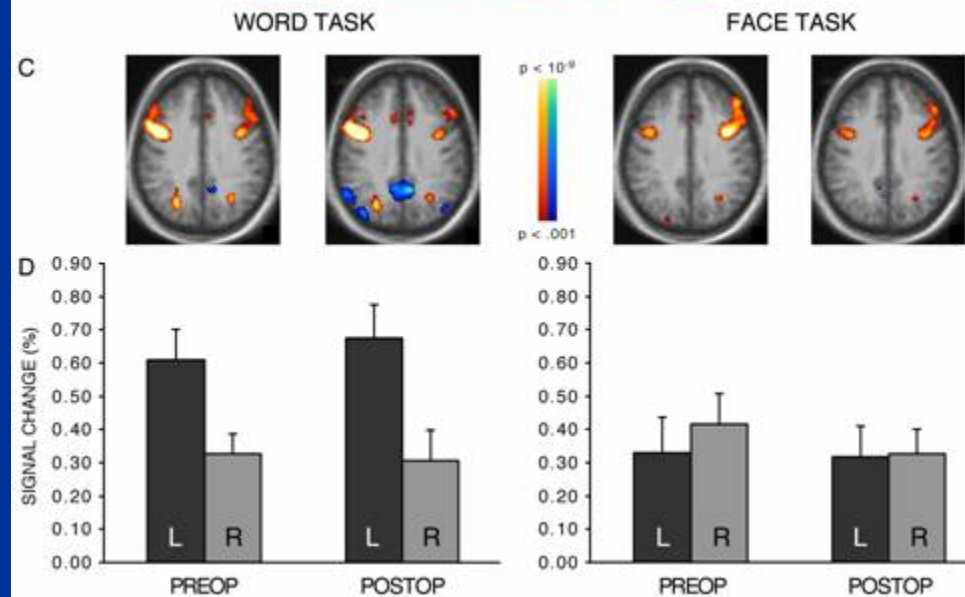
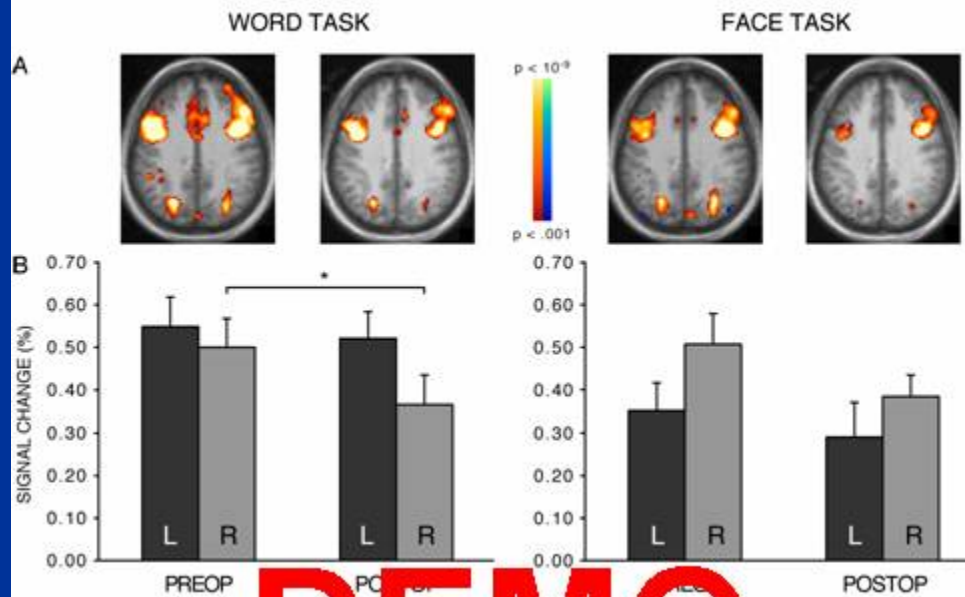


Z = +32





LEFT TLE

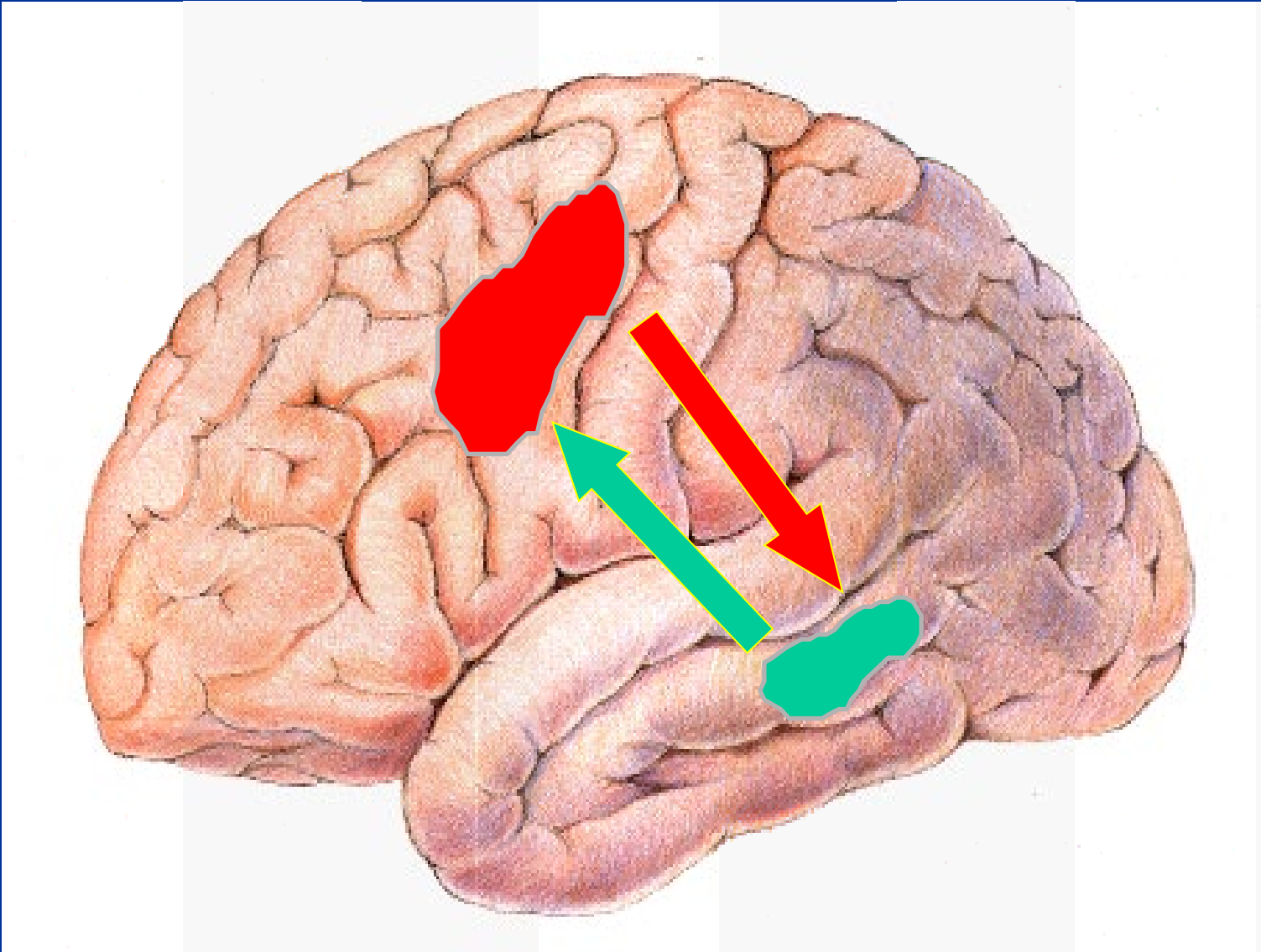


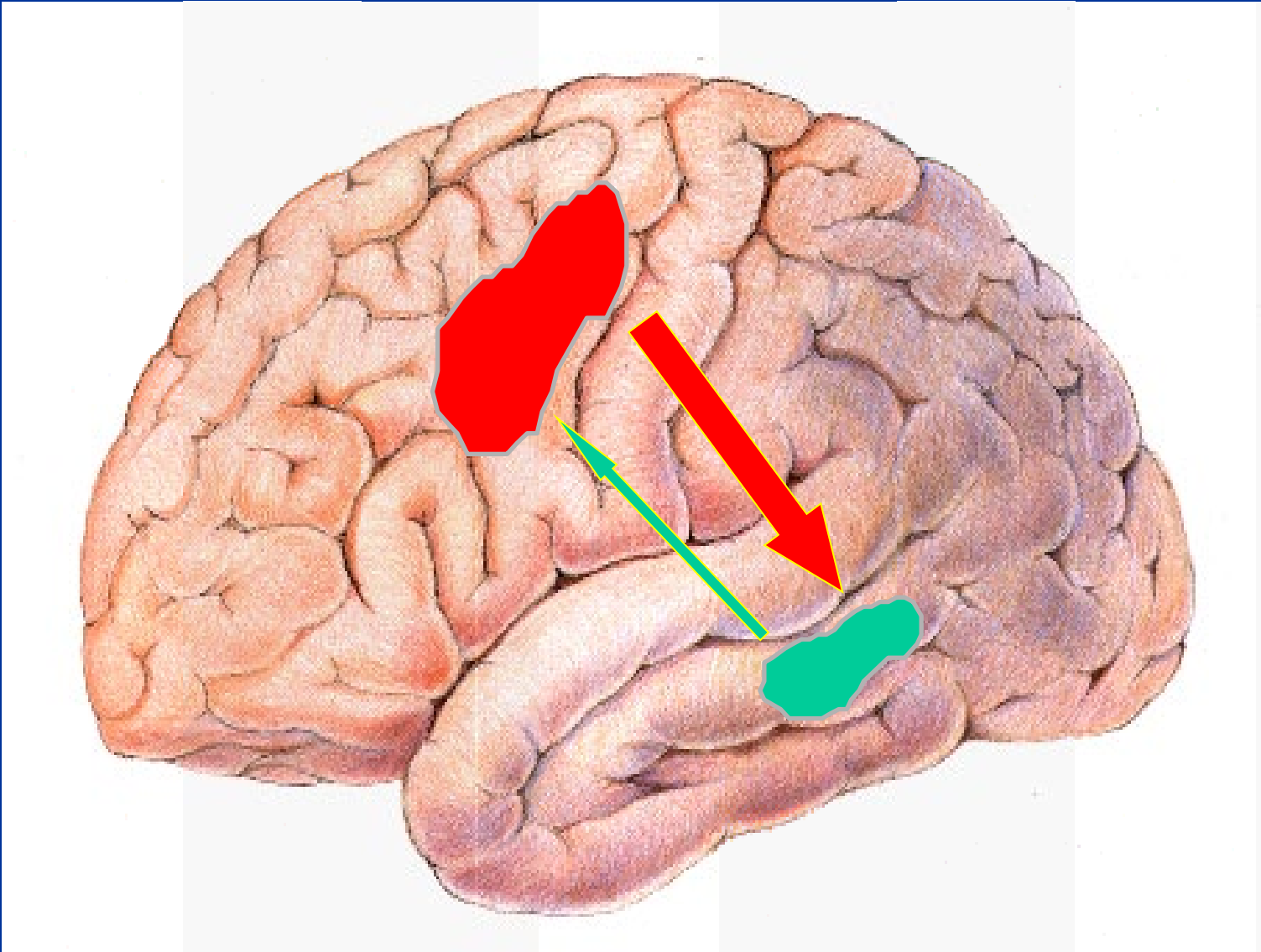
CONCLUSIONS

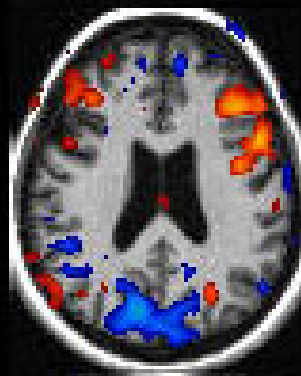
- TLE patients showed significant verbal and non-verbal memory impairment as compared to controls, *preoperatively*.
- In the face of this, activation levels in frontal regions near BA44/6 were essentially identical between preoperative TLE patients and controls for both verbal and non-verbal material (the greatest similarity being between controls and R TLE patients).
- Strikingly, surgery did not have a significant effect on recognition memory.
- Moreover, *postoperative* activation levels in frontal regions near BA44/6 were very similar to the levels observed preoperatively.

CONCLUSIONS

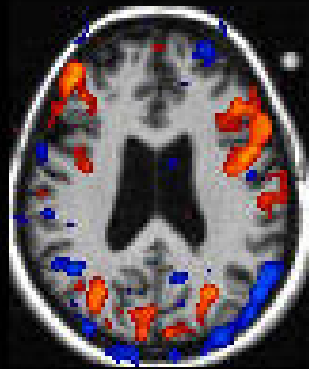
- Taken together, the observation that 1) epilepsy patients are significantly impaired in recognition memory, while 2) the levels of activity in frontal regions observed in such patients are essentially identical to those of healthy subjects both *before* and *after* unilateral removal of the medial temporal lobe, are strongly indicative of a one-directional interaction between frontal cortex and medial temporal structures in memory encoding.





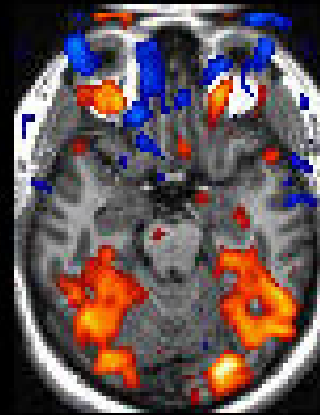


Pre-op



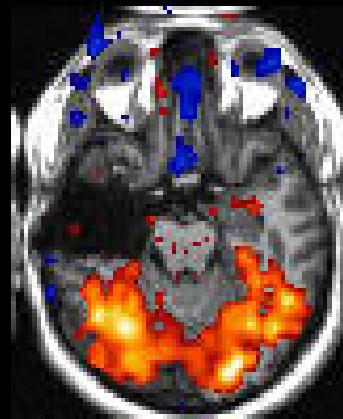
Post-op

Preserved Frontal
activation following
temporal lobectomy



Pre-op

Temporal lobe
activation

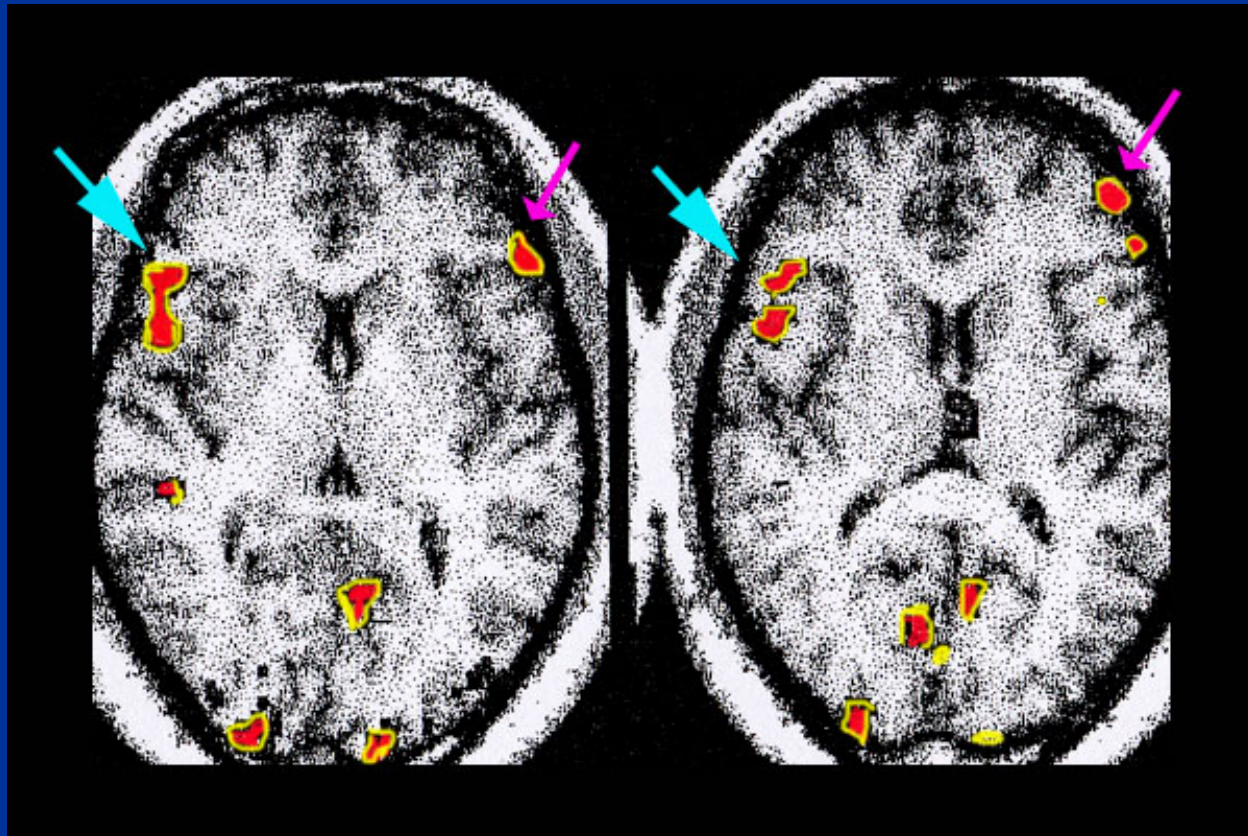


Post-op Right temporal lobectomy

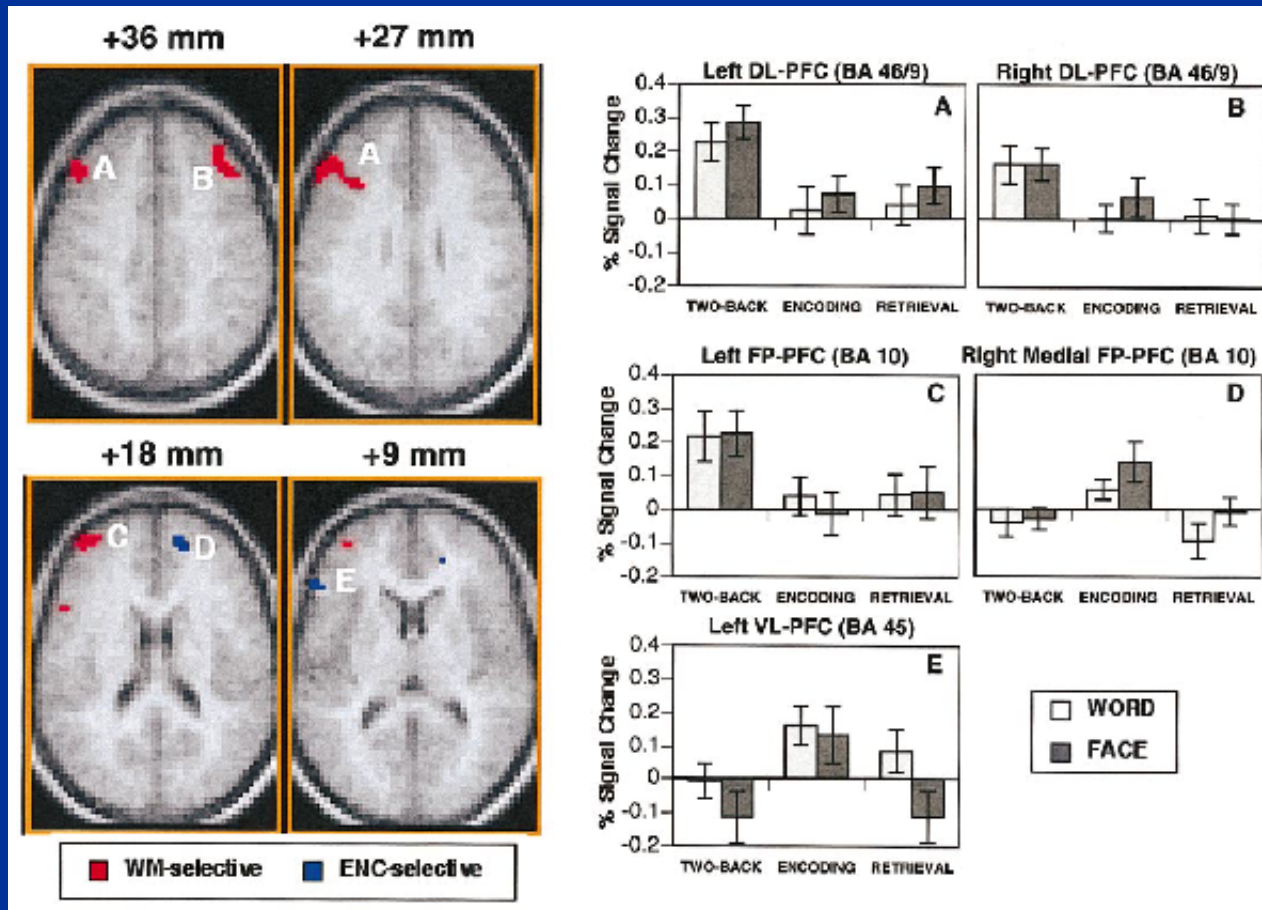
Memory and fMRI

- Memory formation can activate bilateral hippocampus
- ‘Unhealthy’ hippocampus may not activate
- Unclear if this will predict outcome
- Frontal lobe activation may predict Wada results

Frontal sites dissociate along with Wada lateralization



Is this all working memory?



Future studies

- Characterize post-op performance
- Functional MRI predictors of outcome?
- Non-memory correlates with fMRI?
- Stronger hippocampal activations, including *non-memory* tasks