# Group Analysis

File: GroupAna.pdf

Gang Chen

SSCC/NIMH/NIH/HHS

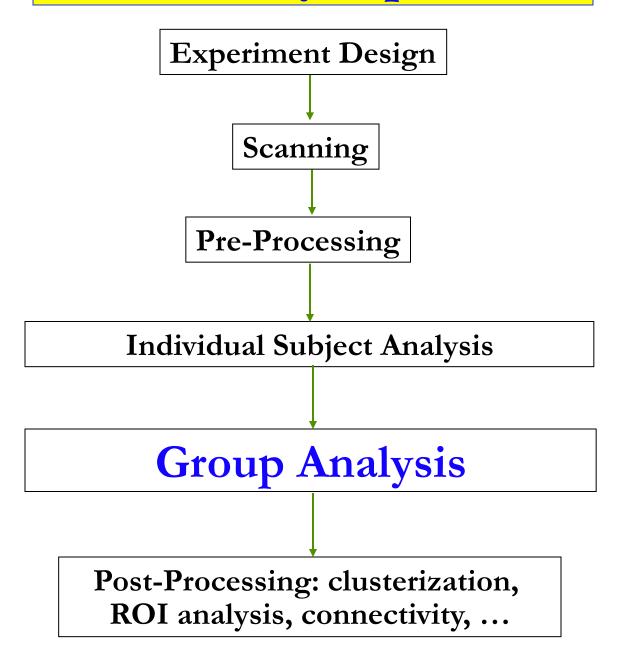






3/19/16

# FMRI Study Pipeline



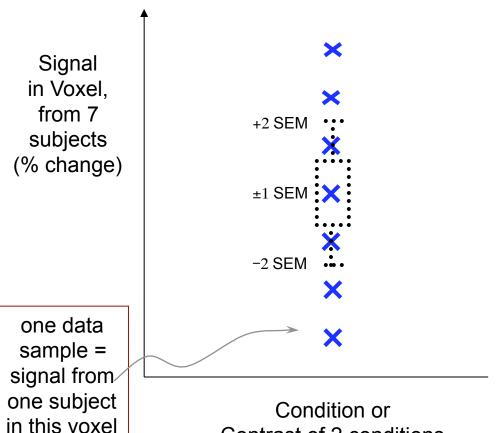
## **Preview**

- Introduction: basic concepts
  - Why do we need to do group analysis?
  - Factor, quantitative covariates, main effect, interaction, ...
- Group analysis approaches
  - *t*-test: 3dttest++ (3dttest), 3dMEMA
  - o Regression: 3dttest++, 3dMEMA, 3RegAna
  - o ANOVA: 3dANOVAx, 3dMVM, GroupAna
  - o ANCOVA or GLM: 3dttest++, 3dMEMA, 3dMVM, 3dLME
  - Impact & consequence of FSM, ASM, and ESM
- Miscellaneous
  - Centering for covariates
  - Intra-Class Correlation (ICC)
  - Nonparametric approach and fixed-effects analysis
  - Inter-Subject Correlation (ISC) analysis

# Why Group Analysis?

- Evolution of FMRI studies
  - Early days [1992-1994]: no need for group analysis
    - Seed-based correlation for one subject was revolutionary
  - Now: torture brain/data enough, and hope nature will confess!
    - Many ways to manipulate the brain (and data)
- Reproducibility and generalization
  - Science strives for generality: summarizing subject results
  - Typically 10 or more subjects per group
  - o Exceptions: pre-surgical planning, lie detection, ...
- Why not one analysis with a giant model for all subjects?
  - Computationally unmanageable and very hard to set up
  - Heterogeneity in data or experiment design across subjects
  - Model and data quality check at individual subject level

#### Simplest Group Analysis: One-Sample t-Test



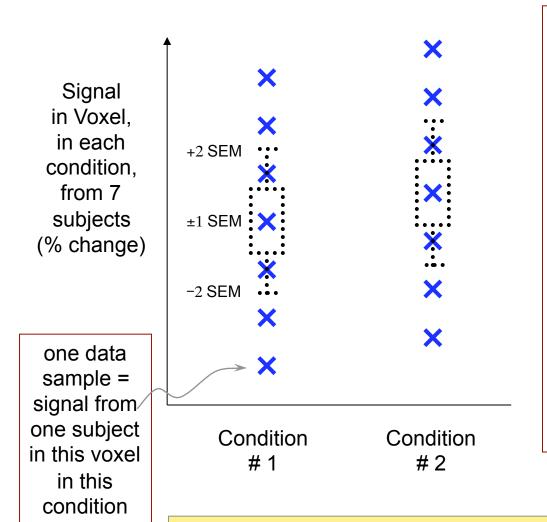
in this condition

- <u>SEM</u> = Standard Error of the Mean = standard deviation of sample, divided by square root of number of samples
- = estimate of uncertainty in sample mean
- One-sample *t*-test determines if sample mean is large enough relative to SEM

Contrast of 2 conditions

• statistically significantly different from 0!

#### Simplest Group Analysis: Two-Sample t-Test



- <u>Condition</u> = some way to categorize data (*e.g.*, stimulus type, drug treatment, day of scanning, subject type, ...)
- <u>SEM</u> = Standard Error of the Mean = standard deviation of sample divided by square root of number of samples
- = estimate of uncertainty in sample mean
- Two-sample *t*-test determines if sample means are "far apart" compared to size of SEM

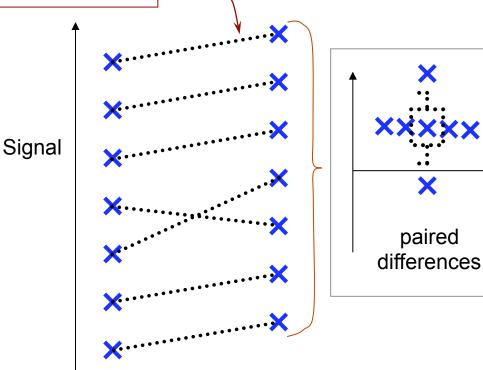
Not statistically significantly different!

#### paired data samples: same numbers as before

Condition

# 1

#### Simplest Group Analysis: Paired (~1-sample) t-Test



- Significantly different!
- Condition #2 > #1, per subject

Condition

#2

- <u>Paired</u> means that samples in different conditions should be linked together (*e.g.*, from same subjects)
- Test determines if differences between conditions in each pair are "large" compared to SEM of the differences
- Paired test can detect systematic *intra*-subject differences that can be hidden in *inter*-subject variations
- <u>Lesson</u>: properly separating *inter*subject and *intra*-subject signal variations can be very important!
- Essentially equivalent to onesample *t*-test

# Toy example of group analysis

- Responses from a group of subjects under one condition
  - o What we have:  $(\beta_1, \beta_2, ..., \beta_{10}) = (1.13, 0.87, ..., 0.72)$  [% signal change]
- Centroid: average  $(\beta_1 + \beta_2 + ... + \beta_{10})/10 = 0.92$  is not enough
  - Variation/reliability measure: diversity, spread, deviation
  - o How different is 0.92 from 0.00 compared to its deviation?
- Model building
  - Subject i's response = group average + deviation of subject i: simple model GLM (one-sample t-test)

$$\hat{\beta}_i = b + \epsilon_i, \epsilon_i \sim N(0, \sigma^2)$$

- $_{\circ}$  If individual responses are consistent,  $\epsilon_i$  should be small
- ∘ How small (*p*-value)?
  - *t*-test: significance measure =  $\hat{b}/(\hat{\sigma}/n)$
- 2 measures: **b** (dimensional) and **t** (dimensionless)

# **Group Analysis Caveats**

- Conventional: voxel-wise (brain) or node-wise (surface)
  - Proper model to account for cross-and within-subject variability
- Results: two components (in afni GUI: OLay + Thr)
  - Effect estimates: have unit and physical meaning
  - Their significance (response to house significantly > face)
    - Very unfortunately p-values solely focused in FMRI!
- Statistical significance (*p*-value) becomes obsession
  - Published papers: Big and tall parents (violent men, engineers)
     have more sons, beautiful parents (nurses) have more daughters
  - Statistical significance is not the same as practical importance
- Statistically insignificant but the effect magnitude is suggestive
  - Sample size
  - Alignment of different subjects' brain images

# **Group Analysis Caveats**

- Conventional: voxel-wise (brain) or node-wise (surface)
  - Prerequisite: reasonable alignment to some template
  - Limitations: alignment could be suboptimal or even poor
    - Different folding patterns across subjects: better alignment could help (perhaps to 5 mm accuracy?)
    - Different cytoarchitectonic (or functional) locations across subjects: structural alignment of images won't help!
    - Impact on conjunction vs. selectivity
- Alternative (won't discuss): ROI-based approach
  - Half data for functional localizers, and half for ROI analysis
  - Easier: whole brain reduced to a few numbers per subject
  - Model building and tuning possible
  - Most AFNI 3d analysis programs also handle ROI input (1D files)

# Group Analysis in Neurolmaging: why big models?

- Various group analysis approaches
  - Student's t-test: one-, two-sample, and paired
  - ANOVA: one or more categorical explanatory variables (factors)
  - GLM: AN(C)OVA
  - LME: linear mixed-effects modeling
- $\diamond$  Easy to understand t-tests not always practical or feasible
  - Tedious when layout (structure of data) is too complex
  - Main effects and interactions: desirable
  - When quantitative covariates are involved
- → Advantages of big models: AN(C)OVA, GLM, LME
  - All tests in one analysis (vs. piecemeal t-tests)
  - Omnibus F-statistics
  - Power gain: combining subjects across groups for estimates of signal and noise parameters (i.e., variances and correlations)

### **Terminology**: Explanatory variables

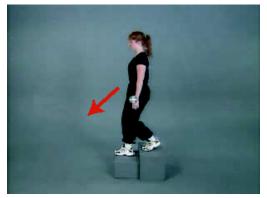
- Response/Outcome variable (HDR): regression  $\beta$  coefficients
- Factor: categorical, qualitative, nominal or discrete variable
  - Categorization of conditions/tasks
    - Within-subject (repeated-measures) factor
  - Subject-grouping: Group of subjects (sex, normal/patients)
    - Between-subjects factor
    - Gender, patients/controls, genotypes, ...
  - Subject: random factor measuring deviations
    - Of no interest, but served as random samples from a population
- Quantitative (numeric or continuous) covariate
  - Three usages of 'covariate'
    - Quantitative value (rather than strict separation into groups)
    - Variable of no interest: qualitative (scanner, sex, handedness) or quantitative
    - Explanatory variable (regressor, independent variable, or predictor)
  - Examples: age, IQ, reaction time, etc.

#### **Terminology**: Fixed effects

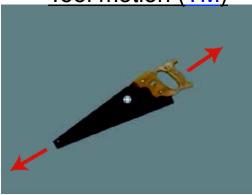
- Fixed-effects factor: categorical (qualitative or discrete) variable
  - o Treated as a fixed variable (constant to be estimated) in the model
    - Categorization of conditions/tasks (modality: visual/auditory)
      - o Within-subject (repeated-measures) factor: 3 emotions
    - Subject-grouping: Group of subjects (gender, normal/patients)
      - Between-subject factor
  - All levels of a factor are of interest
    - main effect, contrasts among levels
  - Fixed in the sense of statistical inferences
    - Apply only to the specific levels of the factor
      - o Categories: human, tool
    - Don't extend to other potential levels that might have been included (but were not)
      - o Inferences from viewing human and tool categories can't be generated to animals or clouds or Martians
- Fixed-effects variable: quantitative covariate

### Remember This Study?

Human whole-body motion (HM)



Tool motion (TM)

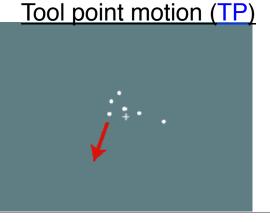


Human point motion (HP)



From Figure 1

Beauchamp et al. 2003



#### 2 Factors, Each with 2 Levels

- Factor A = type of object being viewed
  - Levels = Human or Tool
- Factor B = type of display seen by subject
  - Levels = Whole or Points
- This is <u>repeated measures</u> (4  $\beta$ s per subject), 2 × 2 <u>factorial</u>

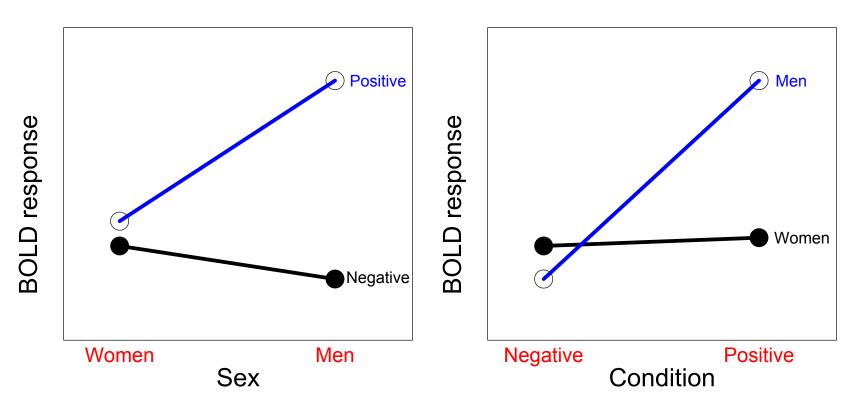
### **Terminology**: Random effects

- Random factor/effect
  - Random variable in the model: exclusively used for subject in FMRI
    - average + effects attributable to each subject: e.g.  $N(\mu, \tau^2)$
    - Requires enough subjects to estimate properly
  - Each individual subject effect is of NO interest
    - Group response = 0.92%, subject 1 = 1.13%, random effect = 0.21%
  - Random in the sense
    - Subjects as random samples (representations) from a population
    - Inferences can be generalized to a hypothetical population
- A generic model: decomposing each subject's response
  - $\circ$  Fixed (population) effects: universal constants (immutable):  $m{eta}$   $m{y}_i = X_i m{eta} + Z_i m{b}_i + m{\epsilon}_i$
  - $\circ$  Random effects: individual subject's deviation from the population (personality: durable for that subject *i*):  $b_i$
  - ο Residuals: noise (evanescent): ε<sub>i</sub>

#### **Terminology**: Omnibus tests - main effect and interaction

- Main effect: any difference across levels of a factor?
- Interactions: with  $\geq 2$  factors, interaction may exist
  - $\circ$  2 × 2 design: *F*-test for interaction between A and B = *t*-test of (A1B1 A1B2) (A2B1 A2B2) or (A1B1 A2B1) (A1B2 A2B2)
  - t stastistic is better than F: a positive t shows

A1B1 - A1B2 > A2B1 - A2B2 and A1B1 - A2B1 > A1B2 - A2B2

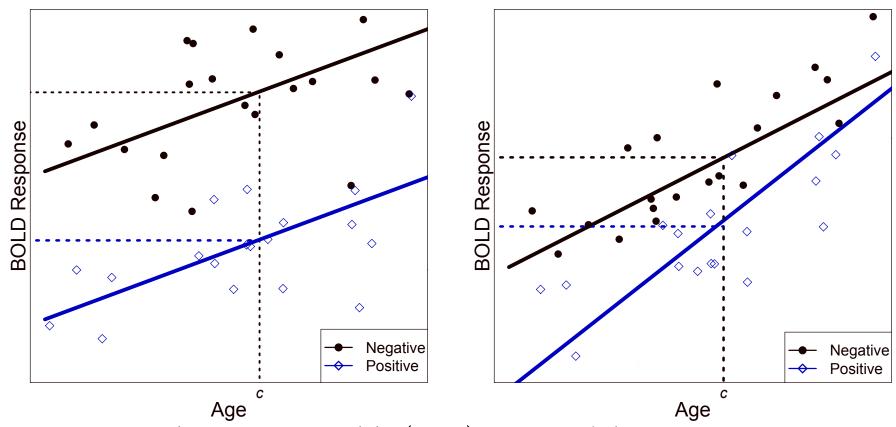


### **Terminology**: Interaction

- Interactions: ≥ 2 factors
  - o May become very difficult to sort out or understand!
    - $\geq$  3 levels in a factor
    - $\bullet \ge 3$  factors
  - Solutions: reduction (in complexity)
    - Pairwise comparison
    - Plotting: ROI averages
  - Requires sophisticated modeling
    - AN(C)OVA: 3dANOVAx, 3dMVM, 3dLME
- Interactions: quantitative covariates
  - o In addition to linear effects, may have nonlinearity: y might depend on products of covariates:  $x_1^*x_2$ , or  $x^2$

### **Terminology**: Interaction

• Interaction: between a factor and a quantitative covariate



- Using explanatory variable (Age) in a model as a nuisance regressor (additive effect) may not be enough
  - Model building/tuning: Potential interactions with other explanatory variables? (as in graph on the right)
  - Of scientific interest (*e.g.*, gender differences)

# **Models at Group Level**

- Conventional approach: taking  $\beta$  (or linear combination of multiple  $\beta$ s) only for group analysis
  - $\circ$  Assumption: all subjects have same precision (reliability, standard error, confidence interval) about  $\beta$
  - All subjects are treated equally
  - Student *t*-test: paired, 1- and 2-sample: *not* random-effects models in strict sense (said to be random effects in Some other PrograM)
  - ∘ AN(C)OVA, GLM, LME
- Alternative: taking both effect estimates and *t*-statistics
  - o *t*-statistic contains precision information about effect estimates
  - $_{\circ}$  Each subject's  $\beta$  is weighted based on precision of effect estimate (more precise  $\beta$ s get more weight)
- All models in common use are some type of linear model
  - ∘ *t*-test, AN(C)OVA, LME, MEMA
  - o Partition each subject's effect into multiple components

### Piecemeal t-tests: 2 × 3 Mixed ANCOVA example

- Explanatory variables
  - Factor A (Group): 2 levels (patient and control)
  - Factor B (Condition): 3 levels (pos, neg, neu)
  - Factor S (Subject): 15 ASD children and 15 healthy controls
  - Quantitative covariate: Age
- ♦ Using Multiple t-tests for this study
  - Group comparison + age effect
  - Pairwise comparisons among three conditions
    - Cannot control for age effect
  - Effects that cannot be analyzed as t-tests
    - Main effect of Condition (3 levels is beyond t-test method)
    - Interaction between Group and Condition (6 levels total)
    - Age effect across three conditions (just too complicated)

### Classical ANOVA: 2 × 3 Mixed ANOVA

- Factor A (Group): 2 levels (patient and control)
- Factor B (Condition): 3 levels (pos, neg, neu)
- Factor S (Subject): 15 ASD children and 15 healthy controls
- Covariate (Age): cannot be modeled; no correction for sphericity violation

$$F_{(a-1,a(n-1))}(A) = \frac{MSA}{MSS(A)},$$
 
$$F_{(b-1,a(b-1)(n-1))}(B) = \frac{MSB}{MSE},$$
 
$$F_{((a-1)(b-1),a(b-1)(n-1))}(AB) = \frac{MSAB}{MSE}$$

where

$$MSA = \frac{SSA}{a-1} = \frac{1}{a-1} \left( \frac{1}{bn} \sum_{j=1}^{a} Y_{.j.}^{2} - \frac{1}{abn} Y_{...}^{2} \right),$$

$$MSB = \frac{SSB}{b-1} = \frac{1}{b-1} \left( \frac{1}{an} \sum_{k=1}^{b} Y_{..k}^2 - \frac{1}{abn} Y_{...}^2 \right),$$

$$MSAB = \frac{SSAB}{(a-1)(b-1)} = \frac{1}{(a-1)(b-1)} \left(\frac{1}{n} \sum_{j=1}^{a} \sum_{k=1}^{b} Y_{.jk} - \frac{1}{bn} \sum_{j=1}^{a} Y_{.j.}^{2} - \frac{1}{an} \sum_{k=1}^{b} Y_{..k}^{2} + \frac{1}{abn} Y_{...}^{2}\right),$$

$$MSS(A) = \frac{SSS(A)}{a(n-1)} = \frac{1}{a(n-1)} \left(\frac{1}{b} \sum_{i=1}^{n} \sum_{j=1}^{a} Y_{ij.}^{2} - \frac{1}{bn} \sum_{j=1}^{a} Y_{.j.}^{2}\right),$$

$$MSE = \frac{1}{a(b-1)(n-1)} \left( \sum_{i=1}^{n} \sum_{j=1}^{a} \sum_{k=1}^{b} Y_{ijk}^{2} - \frac{1}{n} \sum_{j=1}^{a} \sum_{k=1}^{b} Y_{.jk} - \frac{1}{b} \sum_{i=1}^{n} \sum_{j=1}^{a} Y_{ij.}^{2} + \frac{1}{bn} \sum_{j=1}^{a} Y_{.j.}^{2} + \frac{1}{abn} Y_{...}^{2} \right)$$

### Univariate GLM: 2 x 3 mixed ANOVA

Group: 2 levels (patient and control)

Condition: 3 levels (pos, neg, neu)

Difficult to incorporate covariates

Broken orthogonality of matrix
 No correction for sphericity violation

Subject: 3 ASD children and 3 healthy controls

Subj			$X_0$	$X_1$	$X_2$	$X_3$	$X_4$	$X_5$	$X_6$	$X_7$	$X_8$	$X_9$		
1	$\beta_{11}$		/ 1	1	1	0	1	0	1	0	0	0		$\delta_{11}$
1	$\beta_{12}$		1 1 1 1	1		$ \begin{array}{ccc} 1 & 0 \\ -1 & -1 \\ 0 & 1 \\ 1 & 0 \end{array} $	0	1 $-1$	1 1 0 0 1 0 1	0 0 1 1	$egin{array}{cccc} 0 & 0 & 0 & 0 \\ 0 & 0 & 0 & 0 \\ 0 & 0 &$	0 0		$\delta_{12}$
1	$\beta_{13}$			1			-1							$\delta_{13}$
2	$\beta_{21}$			1	1		1	0						$\delta_{21}$
2	$\beta_{22}$			1	0		0	1					$\left(\alpha_0\right)$	$\delta_{22}$
2	$\beta_{23}$		1	1	-1	-1	-1	-1		1		$\alpha_1$	$\delta_{23}$	
3	$\beta_{31}$		1 1	1	1	0	1	0	-1	-1	0	0	$\alpha_2$	$\delta_{31}$
3	$\beta_{32}$			1	0	1	0	1	-1	$\cdot 1$ $-1$	0	0	$\alpha_3$	$\delta_{32}$
3	£ 32	_	1	1	-1	-1	-1	77	-1	-1	0	0	$\alpha_4$	$\tilde{j}_3$ .
4	341	_	1	-1	1	0	-1	0	0	0	1	0	+	$S_{41}$
4	$\beta_{42}$		1 1	-1	$\begin{bmatrix} 1 & -1 \\ 1 & 1 \\ 1 & 0 \end{bmatrix}$	1	0	-1	0 0	1 (	0	$\alpha_6$	$\delta_{42}$	
4	$\beta_{43}$			-1		-1	$\begin{array}{cc} 1 \\ -1 \end{array}$	1	0	$\begin{array}{cc} 0 & 1 \\ 0 & 0 \end{array}$	1	$0 \\ 1 \\ 1 \\ 1 \\ -1$	$\alpha_7$	$\delta_{43}$
5	$\beta_{51}$		1	-1		0		0	$\begin{array}{ccc} 1 & 0 & 0 \\ 1 & 0 & 0 \end{array}$		0		$\begin{pmatrix} \alpha_8 \\ \alpha_9 \end{pmatrix}$	$\delta_{51}$
5	$\beta_{52}$		1	-1		1	0	-1		0	0			$\delta_{52}$
5	$\beta_{53}$		1	-1		-1	1	1			$0 \\ -1$		, ,	$\delta_{53}$
6	$\beta_{61}$		1	-1		0	-1	0						$\delta_{61}$
6	$\beta_{62}$		1	-1	0	1	0	-1	0	0	-1	-1		$\delta_{62}$
6	$\setminus \beta_{63}$		\ 1	-1	-1	-1	1	1	0	0	-1	-1		$\left(\delta_{63}\right)$

# Univariate GLM: popular in neuroimaging

- ♦ Advantages: more flexible than the method of sums of squares
  - No limit on the the number of explanatory variables (in principle)
  - Easy to handle unbalanced designs
  - Covariates easily modeled when no within-subject factors present
- ♦ Disadvantages: costs paid for the flexibility
  - Intricate dummy coding (to allow for different factors and levels)
  - Tedious pairing for numerator and denominator of F-stat
    - Choosing proper denominator SS is not obvious (errors in some software)
    - Can't generalize (in practice) to any number of explanatory variables
    - Susceptible to invalid formulations and problematic post hoc tests
  - Cannot handle covariates in the presence of within-subject factors
  - No direct approach to correcting for sphericity violation
    - Unrealistic assumption: same variance-covariance structure
- → Problematic: When overall residual SS is adopted for all tests
  - F-stat: valid only for highest order interaction of within-subject factors
  - Most post hoc tests are inappropriate with this denominator

# Our Approach: Multivariate GLM

- Group: 2 levels (patient and control)
- Condition: 3 levels (pos, neg, neu)
- Subject: 3 ASD children and 3 healthy controls
- Age: quanţitative covariate

$$\boldsymbol{B}_{n\times m} = \boldsymbol{X}_{n\times q} \, \boldsymbol{A}_{q\times m} + \boldsymbol{D}_{n\times m}$$

# Why use $\beta$ values for group analysis?

- $\diamond$  Why not use individual level statistics (t, F)?
  - Dimensionless
  - No physical meaning
  - Sensitive to sample size (number of trials) and to signal-to-noise ratio (might vary per subject)
    - Are t-values of 4 and 100 (or p-values of 0.05 and 10<sup>-8</sup>) really informative? The HDR of the latter is not 25 times larger than the former?
  - Distributional considerations not very Gaussian (normal)
- $\Leftrightarrow \beta$  values
  - Have physical meaning: measure HDR magnitude = % signal change (i.e., how much BOLD effect)
- $\diamond$  Using  $\beta$  values <u>and</u> their t-statistics at the group level
  - More accurate (we hope) approach: 3dMEMA
  - $\circ$  Mostly about the same as the conventional ( $\beta$  only) approach
  - Not always practical

## Road Map: Choosing a program for Group Analysis?

- ♦ Starting with HDR estimated via shape-fixed method (SFM)
  - One ß per condition per subject
  - It might be significantly underpowered (more later)
- ♦ Two perspectives
  - Data structure
  - Ultimate goal: list all the tests you want to perform
    - Possible to avoid a big model this way
    - Use a piecemeal approach with 3dttest++ or 3dMEMA
      - That is, do each test on your list separately
      - Difficulty: there can be many tests you might want
- ♦ Most analyses can be done with 3dMVM and 3dLME
  - Computationally inefficient
  - Last resort: not recommended if simpler alternatives (e.g., t-tests) are available

# Road Map: Student's t-tests

- ♦ 3dttest++ (new version of 3dttest) and 3dMEMA
- ♦ Not for F-tests except for ones with 1 DoF for numerator
  - All factors are of two levels (at most), e.g., 2 x 2, or 2 x 2 x 2

#### ♦ Scenarios

- One-, two-sample, paired
- Multiple regression: one group + one or more quantitative variables
- ANCOVA: two groups + one or more quantitative variables
- ANOVA through dummy coding: all factors (between- or withinsubject) are of two levels
- AN(C)OVA: multiple between-subjects factors + one or more quantitative variables
- One group against a constant: 3dttest -singletonA
  - The "constant" can depend on voxel, or be fixed

# Road Map: Between-subjects ANOVA

- ♦ One-way between-subjects ANOVA
  - 3dANOVA
  - 2 groups of subjects: 3dttest++, 3dMEMA (OK with > 2 groups too)
- ♦ Two-way between-subjects ANOVA
  - Equal #subjects across groups: 3dANOVA2 -type 1
  - Unequal #subjects across groups: 3dMVM
  - 2 x 2 design: 3dttest++, 3dMEMA (OK with > 2 groups too)
- ♦ Three-way between-subjects ANOVA
  - 3dANOVA3 -type 1
  - Unequal #subjects across groups: 3dMVM
  - 2 x 2 design: 3dttest++, 3dMEMA (OK with > 2 groups too)
- ♦ N-way between-subjects ANOVA
  - o 3dMVM

# Road Map: Within-subject ANOVA

- ♦ Only one group of subjects
- ♦ One-way within-subject ANOVA
  - 3dANOVA2 -type 3
  - Two conditions: 3dttest++, 3dMEMA
- ♦ Two-way within-subject ANOVA
  - 3dANOVA3 -type 4
    - (2 or more factors, 2 or more levels each)
  - 2 x 2 design: 3dttest++, 3dMEMA
- ♦ N-way within-subject ANOVA
  - 。 3dMVM

# Road Map: Mixed-type ANOVA and others

- One between- and one within-subject factor
  - Equal #subjects across groups: 3dANOVA3 -type 5
  - Unequal #subjects across groups: 3dMVM
  - 2 x 2 design: 3dttest++, 3dMEMA
- ♦ More complicated scenarios
  - Multi-way ANOVA: 3dMVM
  - Multi-way ANCOVA (between-subjects covariates only): 3dMVM
  - HDR estimated with multiple basis functions: 3dLME, 3dMVM
  - Missing data: 3dLME
  - Within-subject covariates: 3dLME
  - Subjects genetically related: 3dLME
  - Trend analysis: 3dLME

# One-Sample Case

- One group of subjects  $(n \ge 10)$ 
  - o One condition (visual or auditory) effect
  - o Linear combination of multiple effects (visual vs. auditory)
- Null hypothesis  $H_0$ : average effect = 0
  - $\circ$  Rejecting  $H_0$  is of interest!
- Results
  - Average effect at group level (OLay)
  - Significance: t-statistic (Thr Two-tailed by default in AFNI)
- Approaches
  - o **uber\_ttest.py** (gen\_group\_command.py) graphical interface
  - o 3dttest++
  - o 3dMEMA

### One-Sample Case: Example

• 3dttest++: taking  $\beta$  only for group analysis

```
3dttest++ -prefix VisGroup -mask mask+tlrc \
  -setA 'FP+tlrc[Vrel#0_Coef]' \
    'FR+tlrc[Vrel#0_Coef]' \
    ......
    'GM+tlrc[Vrel#0_Coef]'
```

• **3dMEMA**: taking  $\beta$  and t-statistic for group analysis

```
3dMEMA -prefix VisGroupMEMA -mask mask+tlrc -setA Vis \
FP 'FP+tlrc[Vrel#0_Coef]' 'FP+tlrc[Vrel#0_Tstat]' \
FR 'FR+tlrc[Vrel#0_Coef]' 'FR+tlrc[Vrel#0_Tstat]' \
......

GM 'GM+tlrc[Vrel#0_Coef]' 'GM+tlrc[Vrel#0_Tstat]' \
-missing_data 0 ← Dataset value = 0 → treat it as missing
```

# Two-Sample Case

- Two groups of subjects ( $n \ge 10$  each); for example: males and females
  - o One condition (e.g., visual or auditory) effect
  - o Linear combination of multiple effects (e.g., visual minus auditory)
  - o Example: Gender difference in emotional effect of stimulus?
- Null hypothesis  $H_0$ : Group1 = Group2
  - o Results
    - o Group difference in average effect
    - Significance: t-statistic Two-tailed by default in AFNI
- Approaches
  - uber\_ttest.py, 3dttest++, 3dMEMA
  - o One-way between-subjects ANOVA
    - 3dANOVA: can also obtain individual group *t*-tests

# **Paired Case**

- One groups of subjects  $(n \ge 10)$ 
  - 2 conditions (visual or auditory): no missing data allowed
     (3dLME)
- Null hypothesis  $H_0$ : Condition1 = Condition2
  - o Results
    - Average difference at group level
    - Significance: t-statistic (two-tailed by default)
- Approaches
  - o uber\_ttest.py, 3dttest++, 3dMEMA
  - o One-way within-subject (repeated-measures) ANOVA
    - 3dANOVA2 —type 3: can also get individual condition test
  - o Missing data (3dLME): only 10 of 20 subjects have both  $\beta$ s
- Essentially same as one-sample case using contrast as input

### Paired Case: Example

• 3dttest++: comparing two conditions

```
3dttest++ -prefix Vis Aud
 -mask mask+tlrc -paired
 -setA 'FP+tlrc[Vrel#0 Coef]'
       'FR+tlrc[Vrel#0 Coef]'
        'GM+tlrc[Vrel#0 Coef]'
 -setB 'FP+tlrc[Arel#0 Coef]'
       'FR+tlrc[Arel#0 Coef]'
       • • • • • •
        'GM+tlrc[Arel#0 Coef]'
```

### Paired Case: Example

- 3dMEMA: comparing two conditions using subject-level response magnitudes and estimates of error levels
  - Contrast should come from each subject
    - Instead of doing contrast inside 3dMEMA itself

```
3dMEMA -prefix Vis_Aud_MEMA
-mask mask+tlrc -missing_data 0
-setA Vis-Aud

FP 'FP+tlrc[Vrel-Arel#0_Coef]' 'FP+tlrc[Vrel-Arel#0_Tstat]' \
FR 'FR+tlrc[Vrel-Arel#0_Coef]' 'FR+tlrc[Vrel-Arel#0_Tstat]' \
......

GM 'GM+tlrc[Vrel-Arel#0_Coef]''GM+tlrc[Vrel-Arel#0_Tstat]'
```

### One-Way Between-Subjects ANOVA

- Two **or more** groups of subjects  $(n \ge 10)$ 
  - o One condition or linear combination of multiple conditions
  - o Example: visual, auditory, or visual vs. auditory
- Null hypothesis  $H_0$ : Group1 = Group2
  - o Results
    - Average group difference
    - Significance: t- and F-statistic (two-tailed by default)
- Approaches
  - o **3dANOVA** (for more than 2 groups)
  - ∘ > 2 groups: pair-group contrasts: 3dttest++, 3dMEMA
  - o Dummy coding: 3dttest++, 3dMEMA (hard work)
  - o 3dMVM (also somewhat hard work)

#### Multiple-Way Between-Subjects ANOVA

- Two or more subject-grouping factors: factorial designs
  - One condition or linear combination of multiple conditions
  - o Examples: gender, control/patient, genotype, handedness
- Testing main effects, interactions, single group, group comparisons
  - Significance: t- (two-tailed by default) and F-statistic
- Approaches
  - Factorial design (imbalance not allowed): two-way
     (3dANOVA2 -type 1), three-way (3dANOVA3 -type 1)
  - o **3dMVM**: no limit on number of factors (imbalance OK)
  - o All factors have two levels: 3dttest++, 3dMEMA
  - Using group coding (via covariates) with 3dttest++,
     3dMEMA: imbalance possible

#### One-Way Within-Subject ANOVA

- Also called **one-way repeated-measures**: one group of subjects ( $n \ge 10$ )
  - o Two or more conditions: extension to paired t-test
  - Example: happy, sad, neutral conditions
- Main effect, simple effects, contrasts, general linear tests,
  - Significance: t- (two-tailed by default) and F-statistic
- Approaches
  - 3dANOVA2 -type 3 (two-way ANOVA with one random factor)
  - With two conditions, equivalent to paired case with 3dttest++, 3dMEMA
  - With more than two conditions, can break into pairwise comparisons with 3dttest++, 3dMEMA

#### One-Way Within-Subject ANOVA

• Example: visual vs. auditory condition

```
3dANOVA2 -type 3 -alevels 2 -blevels 10
-prefix Vis Aud -mask mask+tlrc
 -amean 1 Vis -amean 2 Aud -adiff 1 2 V-A \
  -dset 1 1 'FP+tlrc[Vrel#0 Coef]'
  -dset 1 2 'FR+tlrc[Vrel#0 Coef]'
  -dset 1 10 'GM+tlrc[Vrel#0 Coef]'
  -dset 2 1 'FP+tlrc[Arel#0 Coef]'
  -dset 2 2 'FR+tlrc[Arel#0 Coef]'
  -dset 2 10 'GM+tlrc[Arel#0 Coef]'
```

#### Two-Way Within-Subject ANOVA

- Factorial design; also known as two-way repeated-measures
  - o 2 within-subject factors
  - Example: emotion (happy/sad) and category (visual/auditory)
- Testing main effects, interactions, simple effects, contrasts
  - Significance: t- (two-tailed by default) and F-statistic
- Approaches
  - 3dANOVA3 -type 4 (three-way ANOVA with one random factor)
  - o All factors have 2 levels (2x2): **3dttest++, 3dMEMA**
  - o Missing data?
    - Break into t-tests: 3dttest++, 3dMEMA
    - 3dLME

### **Two-Way Mixed ANOVA**

- Factorial design
  - One between-subjects and one within-subject factor
  - Example: between-subject factor = gender (male and female) and within-subject factor = emotion (happy, sad, neutral)
- Testing main effects, interactions, simple effects, contrasts
  - ∘ Significance: *t* (two-tailed by default) and *F*-statistic
- Approaches
  - o **3dANOVA3 type 5** (three-way ANOVA with one random factor)
  - ∘ If all factors have 2 levels (2x2): **3dttest++**, **3dMEMA**
  - o Missing data?
    - Unequal number of subjects across groups: 3dMVM, GroupAna
    - Break into *t*-tests: uber\_ttest.py, 3dttest++, 3dMEMA
    - 3dLME

### Univariate GLM: popular in neuroimaging

- ♦ Advantages: more *flexible* than the method of Sums of Squares (SS)
  - No limit on the the number of explanatory variables (in principle)
  - Easy to handle unbalanced designs
  - Covariates can be modeled when no within-subject factors present
- ♦ Disadvantages: costs paid for the flexibility
  - $\circ$  Intricate dummy coding using covariates to partition  $\beta$ s into subsets
  - Tedious pairing for numerator and denominator of F-stat
    - Can be hard to select proper denominator SS
    - Can't generalize (in practice) to any number of explanatory variables
    - Susceptible to invalid formulations and problematic post hoc tests
  - Cannot handle covariates in the presence of within-subject factors
  - No direct approach to correcting for sphericity violation
    - Unrealistic assumption: same variance-covariance structure
- → Problematic: When residual SS is adopted for all tests
  - F-stat: valid only for highest order interaction of within-subject factors
  - Most post hoc tests are inappropriate/invalid

### MVM Implementation in AFNI

- ♦ Program 3dMVM [written in R programming language]
  - No tedious and error-prone dummy coding needed!
  - Symbolic coding for variables and post hoc testing

#### Variable types

Post hoc tests

3dMVM	-prefix	OutputFile	-jobs 8	-SC		
	-bsVars	'Grp*Age'	-wsVars	'Cond'	-qVars 'Age	,
	$-num_glt 4$					Ì
	-gltLabel 1	Pat_Pos	-gltCode 1		$^{\prime}\mathrm{Grp}:$	1*Pat Cond: 1*Pos'
	-gltLabel 2	Ctl_Pos-Neg	-gltCode 2		'Grp: 1*Ctl (	Cond: 1*Pos -1*Neg'
	-gltLabel 3	GrpD_Pos-Neg	-gltCode 3	$^{\prime}\mathrm{Grp}:$	1*Ctl -1*Pat (	Cond: 1*Pos -1*Neg'
	-gltLabel 4	$\mathtt{Pat}_{\mathtt{A}}\mathtt{Age}$	-gltCode 4			'Grp: 1*Pat Age:'
	-dataTable					
	Subj	${ t Grp}$	Age	Cond	${ t InputFile}$	
	S1	Ctl	23	Pos	S1_Pos.nii	
	S1	Ctl	23	Neg	S1_Neg.nii	Data lavout
	S1	Ctl	23	Neu	S1_Neu.nii	Data layout
	S50	Pat	19	Pos	S50_Pos.nii	
	S50	Pat	19	Neg	S50_Neg.nii	
	S50	Pat	19	Neu	S50_Neu.nii	

- Fixed-Shape method (FSM)
- Estimead-Shape method (ESM) via basis functions: TENTzero, TENT, CSPLINzero, CSPLIN
  - Area under the curve (AUC) approach
    - Ignore **shape** differences between groups or conditions
    - Focus on the response magnitude measured by AUC
    - Potential issues: Shape information lost; Undershoot may cause trouble (canceling out some of the positive signal)
  - Better approach: maintaining shape information
    - Take individual  $\beta$  values to group analysis (MVM)
- Adjusted-Shape method (ASM) via SPMG2/3
  - $\circ$  Only take the major component  $\beta$  to group level
  - or, Reconstruct HRF, and take the effect estimates (e.g., AUC)

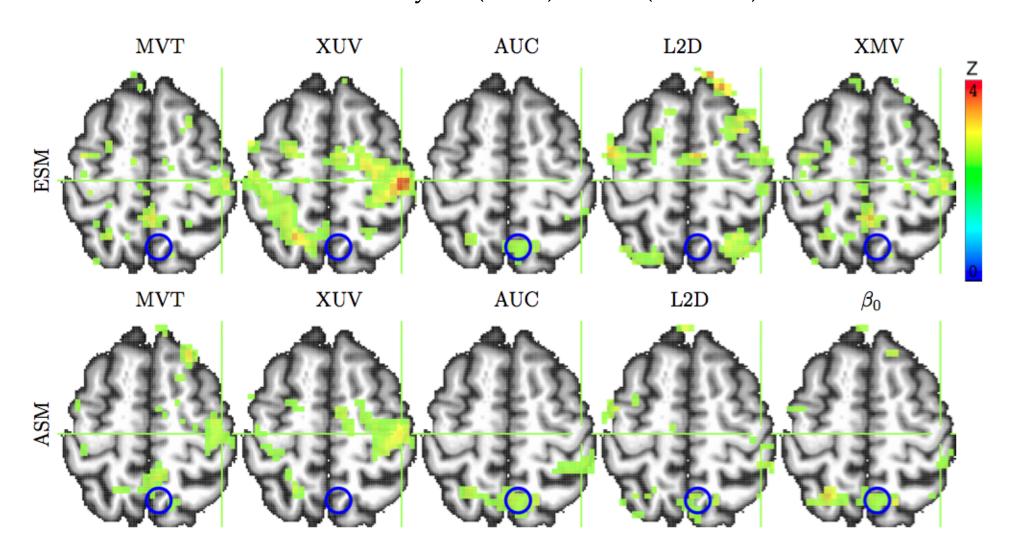
- Analysis with effect estimates at consecutive time grids (from TENT or CSPLIN or reconstructed HRF)
  - Used to be considered very hard to set up (in GLM)
  - $\circ$  Extra variable in analysis: Time =  $t_0$ ,  $t_1$ , ...,  $t_k$
  - One group of subjects under one condition
    - Accurate null hypothesis is

$$H_0: \beta_1=0, \beta_2=0, ..., \beta_k=0 \text{ (NOT } \beta_1=\beta_2=...=\beta_k)$$

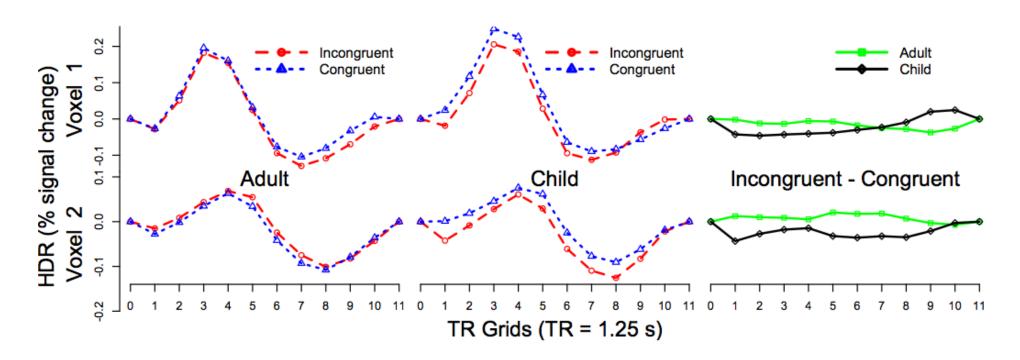
- Testing the centroid (multivariate testing)
- 3dLME
- ∘ Approximate hypothesis  $H_0$ :  $\beta_1$ = $\beta_2$ =...= $\beta_k$  (main effect)
  - 3dMVM
- $\circ$ Result: *F*-statistic for  $H_0$  and *t*-statistic for each Time point

- Multiple groups (or conditions) under one condition (or group)
  - Accurate hypothesis:  $\beta_1^{(1)} \beta_1^{(2)} = 0, \beta_2^{(1)} \beta_2^{(2)} = 0, ..., \beta_k^{(1)} \beta_k^{(2)} = 0$ 
    - 2 conditions: **3dLME**
  - $\circ$  Approximate hypothesis:  $\beta_1^{(1)} = \beta_1^{(2)}, \beta_2^{(1)} = \beta_2^{(2)}, ..., \beta_k^{(1)} = \beta_k^{(2)}$ 
    - Interaction
    - Multiple groups: 3dANOVA3 –type 5 (two-way mixed ANOVA: equal #subjects), or 3dMVM
    - Multiple conditions: 3dANOVA3 –type 4
  - o Focus: do these groups/conditions have different response shape?
    - *F*-statistic for the interaction between Time and Group/Condition
    - *F*-statistic for main effect of Group: group/condition difference of AUC
    - *F*-statistic for main effect of Time: HDR effect across groups/conditions
- Other scenarios: factor, quantitative variables
  - o 3dMVM

- 2 groups (children, adults), 2 conditions (congruent, incongruent), 1 quantitative covariate (age)
- 2 methods: HRF modeled by 10 (tents) and 3 (SPMG3) bases



- Advantages of ESM over FSM
  - More likely to detect HDR shape subtleties
  - Visual verification of HDR signature shape (vs. relying significance testing: *p*-values)
- Study: Adults/Children with Congruent/Incongruent stimuli (2×2)



### **Correlation analysis**

Correlation between brain response and behavioral measures

$$\hat{\beta}_i = \alpha_0 + \alpha_1 * x_i + \epsilon_i$$

- P Difference between correlation and regression?
  - Essentially the same
  - o When explanatory ( $x_i$ ) and response variable ( $β_i$ ) are standardized (variance=1), then regression coefficient = correlation coefficient
- P Two approaches to get correlation from statistics software
  - Standardization
  - Convert *t*-statistic to *r* (or determination coefficient)

$$R^2 = t^2/(t^2 + DF)$$

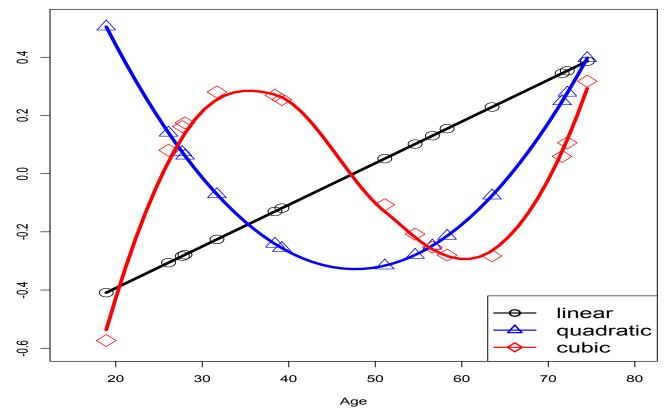
o Programs: 3dttest++, 3dMEMA, 3dMVM, 3dRegAna

## Trend analysis

- Correlation between brain response and some gradation
  - Linear, quadratic, or higher-order effects
    - Habituation or attenuation effect across time (trials)
    - o Between-subjects: Age, IQ
      - Fixed effect
    - Within-subject measures (covariates): morphed images
      - Random effects (trends in different subjects): 3dLME
  - Modeling: weights based on gradation
    - Equally-spaced: coefficients from orthogonal polynomials
    - o With 6 equally-spaced levels, e.g., 0, 20, 40, 60, 80, 100%,
      - Linear: -5 -3 -1 1 3 5
      - Quadratic: 5 -1 -4 -4 -1 5
      - Cubic: -5 7 4 -4 -7 5

### Trend analysis

- Correlation between brain response and some gradation
  - Modeling: weights based on gradation
    - o Not equally-spaced: constructed from, e.g., poly() in R
    - Ages of 15 subjects: 31.7 38.4 51.1 72.2 27.7 71.6 74.5 56.6
      54.6 18.9 28.0 26.1 58.3 39.2 63.5



### Trend analysis: summary

- Cross-trials trend: AM2 single subject analysis with weights
- Modeling with within-subject trend (group level)
  - Run GLT with appropriate weights at individual levels
- Modeling with within-subject trend: 3 approaches
  - Set up GLT weights among factor levels at group level (not directly using covariate values) 3dANOVA2/3, 3dMVM, 3dLME: best with equally-spaced with even number of levels
  - Set up the covariates as the values of a variable
    - Needs to account for deviation of each subject (random trends)
    - 3dLME
  - Run trend analysis at individual level (*i.e.*, -gltsym), and then take the trend effect coefficient estimates to group level
    - Simpler than the other two approaches of doing trend analysis at the group level

### Group analysis with quantitative variables

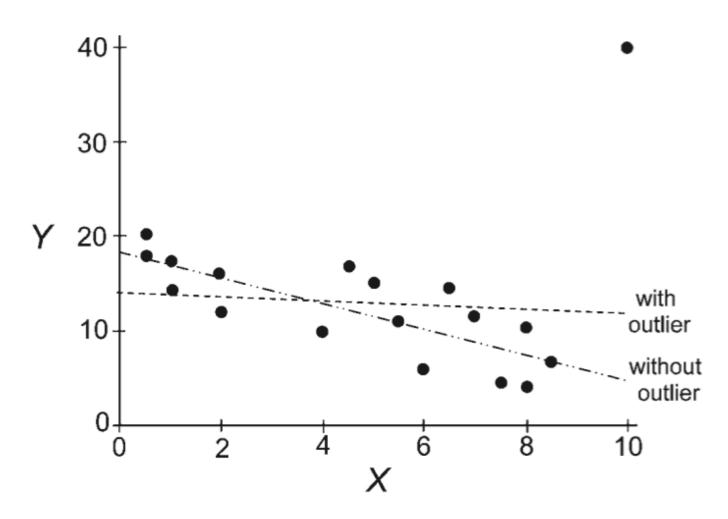
- Covariate: 3 usages
  - Quantitative (vs. categorical) variable of interest
    - o Age, IQ, behavioral measures, ...
  - Of no interest to the investigator (trying to remove variance)
    - Age, IQ, sex, handedness, scanner,...
  - Any explanatory variables in a model
- Variable selection
  - Infinite candidates for covariates: relying on prior information
  - P Typical choices: age, IQ, RT (reaction time), ...
  - RT: individual vs. group level
    - Amplitude Modulation regression: cross-trial variability at individual level (cf. Advanced Regression talk)
    - Group level: variability across subjects

### Group analysis with quantitative variables

- Conventional framework
  - ANCOVA: one between-subjects factor (e.g., sex) + one quantitative variable (e.g., age)
    - Extension to ANOVA: GLM
    - Homogeneity of slopes
- Broader framework
  - Any modeling approaches involving quantitative variables
    - o Regression, GLM, MVM, LME
    - Trend analysis, correlation analysis
- Interpretations
  - "Controlling x at ...", "holding x constant": centering
  - Regressing out dependence on *x*?

### **Caveats with covariate modeling**

• Linear regression with few data points: Sensitive to outliers



### **Caveats with covariate modeling**

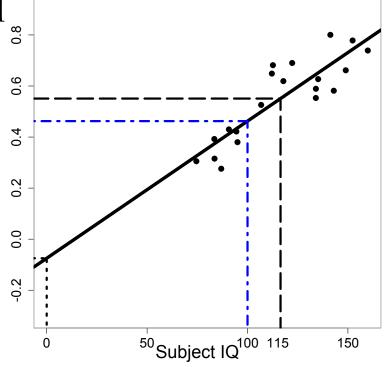
- Specification error: excluding a crucial explanatory variable may lead to incorrect or distorted interpretations (spuriousness)
  - $_{\circ}$  Toddler's vocabulary  $\sim \alpha$  \* shoe size:  $\alpha$  = .50
  - $_{\circ}$  Toddler's vocabulary  $\sim \alpha$  \* shoe size +  $\beta$  \* age:  $\alpha$  = .04,  $\beta$  = .6
    - Explanatory variables (shoe size, age) are highly correlated: r = 0.8!
    - Excluding one may lead to overestimated effect for the other, but not *always* the case

#### • Suppression:

- $\circ$  y (# suicide attempts) ~ 0.49 \*  $x_1$  (depression)
- $\circ$  y ~ 0.19 \* x<sub>2</sub> (amount of psychotherapy)
- $y \sim 0.70 * x_1 0.30 * x_2 (r_{12} = 0.7)$
- $\circ$  Imagine that  $x_1$  is head motion in FMRI!

#### Quantitative variables: subtleties

- Regression: one group of subjects + quantitative variables  $\hat{\beta}_i = \alpha_0 + \alpha_1 * x_{1i} + \alpha_2 * x_{2i} + \epsilon_i$ 
  - Interpretation of effects (results of regression)
    - $\circ \alpha_1$  slope (change rate, marginal effect): effect per unit of x
    - $\circ \alpha_0$  intercept: group effect when x=0
      - Not necessarily meaningful <sub>∞</sub>
      - Linearity may not hold
      - Solution: centering crucial for interpretability
      - Mean centering?or Median centering?

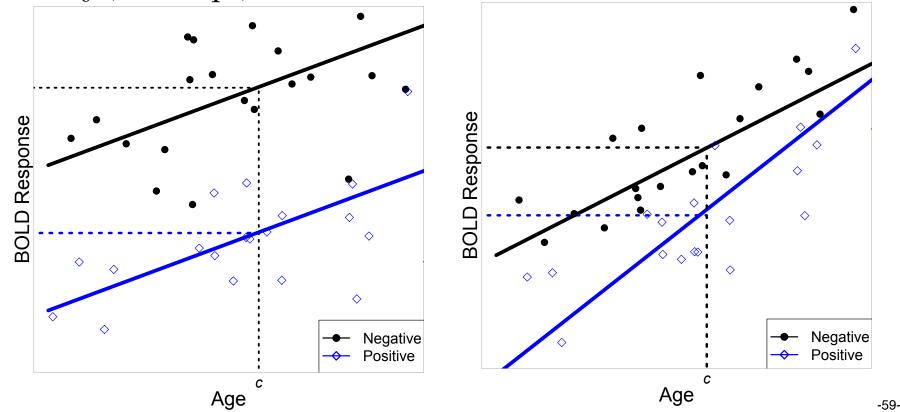


#### **Quantitative variables: subtleties + confusion**

Trickier scenarios with two or more groups

$$\hat{\beta}_i = \alpha_0 + \alpha_1 * x_{1i} + \alpha_2 * x_{2i} + \alpha_3 * x_{3i} + \epsilon_{ij}$$

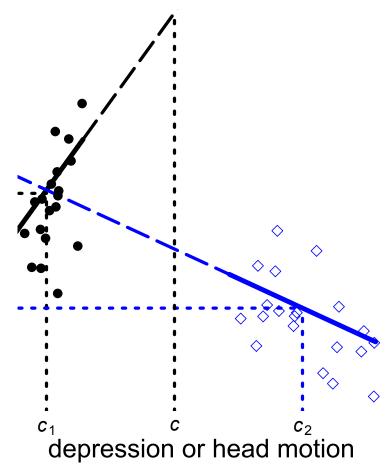
- Interpretation of effects
  - Slope: Interaction! Same or different slope?
  - $\circ \alpha_0$  (intercept) same or different center?



#### Quantitative variables: subtleties

Trickiest scenario with two or more groups

$$\hat{\beta}_i = \alpha_0 + \alpha_1 * x_{1i} + \alpha_2 * x_{2i} + \alpha_3 * x_{3i} + \epsilon_{ij}$$



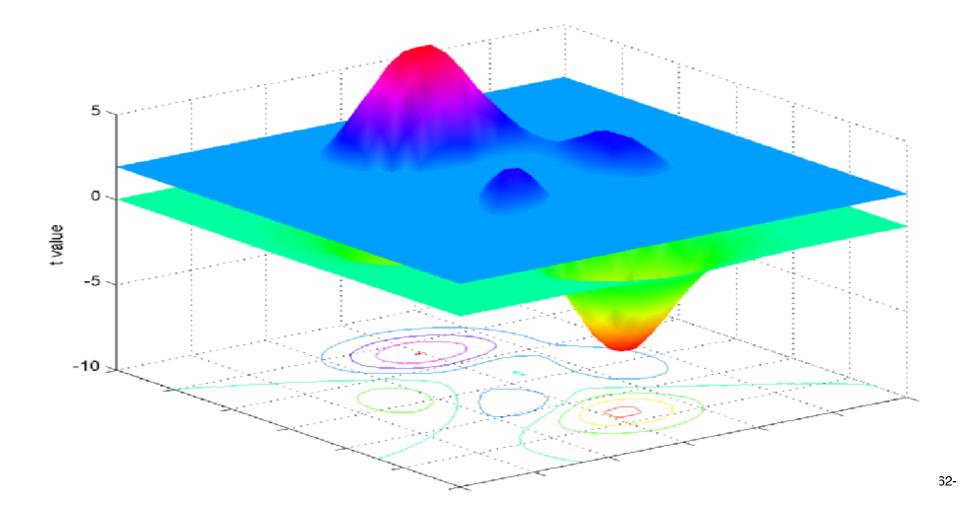
• More at http://afni.nimh.nih.gov/sscc/gangc/centering.html

### Why should we report response magnitudes?

- Unacceptable in some fields to report only significance (peak t and smallest p)
- Neuroimaging is an exception currently!
- Obsession in FMRI about p-value!
  - Colored blobs of t-values
  - Peak voxel selected based on peak t-value
- Science is about reproducibility
  - Response amplitude should be of primacy focus
  - Statistics are only for thresholding
    - No physical dimension, and are a mix of response size and noise magnitude
    - Once surviving threshold, specific values are not informative

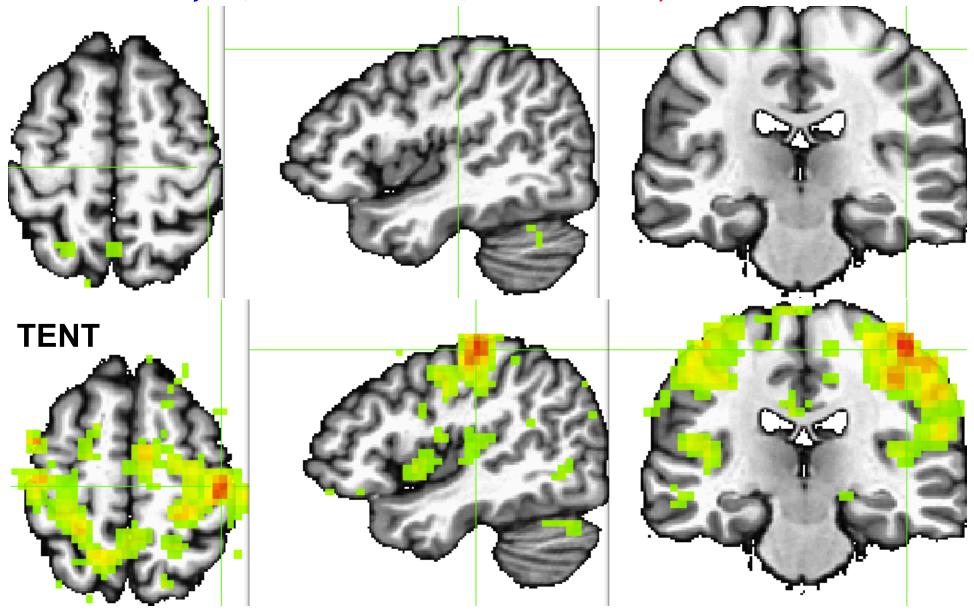
#### Basics: Null hypothesis significance testing (NHST)

- Should science be based on a binary (Yes/No) inference?
  - o If a cluster fails to survive thresholding, it has no value?
  - Small Volume Correction (SVC): Band-Aid solution

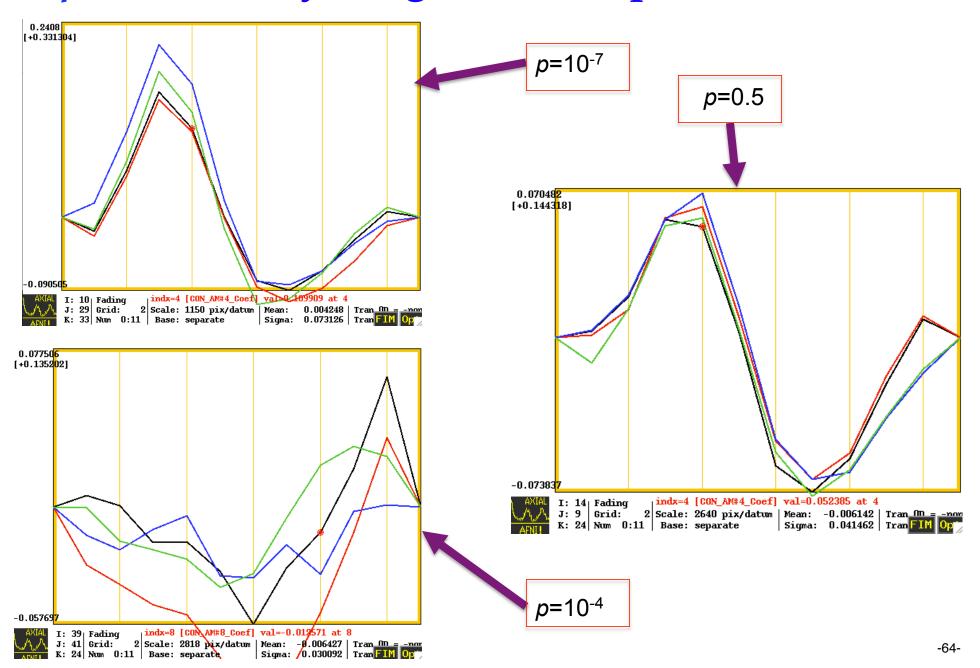


## Modeling strategy & results: an example

**SPMG3**: 1<sup>st</sup>  $\beta$  (canonical HDR) [voxel-wise p=0.01]



### Is *p*-value everything? An example



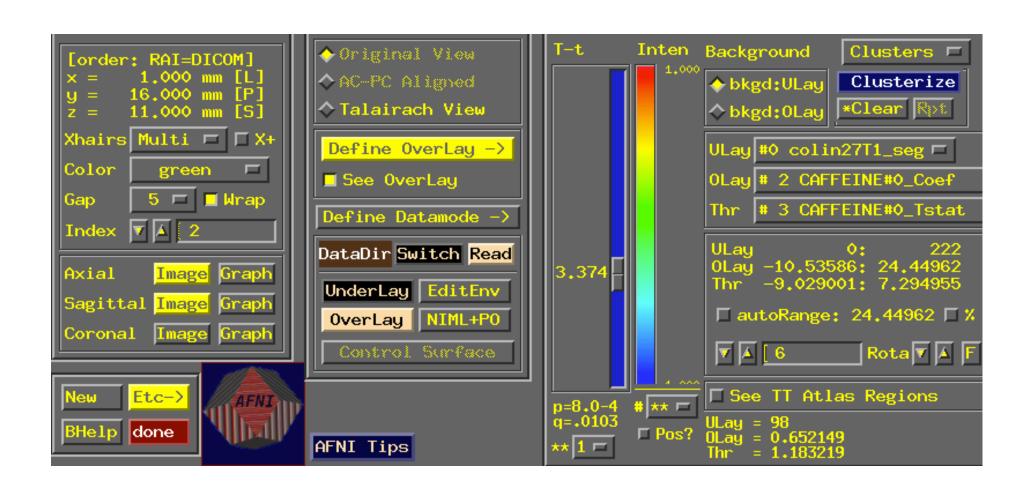
### **Advantages of ESM**

- Multiple basis functions
  - o TENTzero, TENT, CSPLINzero, CSPLIN
  - Similar to FIR in SPM, but FIR does not allow non-TRsynchronized modeling
- Higher statistical power than FSM and ASM
  - More likely to identify activations
- Extra support for true positives (TP) with HRF signature shape
  - Unavailable from FFM and ASM
- Crucial evidence if significance is marginal: false negatives (FP)
- Avoiding false positives (FP)
- Works best for event-related experiments
  - Useful for block designs if concerned about habituation, attenuation,...

### How rigorous about corrections?

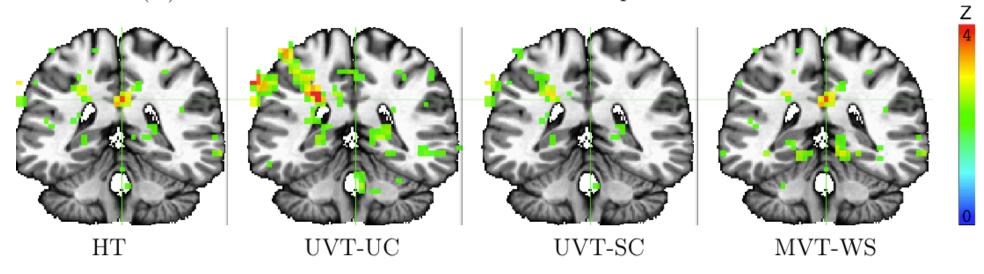
- Two types of correction
  - Multiple testing correction n(MTC): same test across brain
    - ∘ FWE, FDR, SVC(?)
    - o People (esp. reviewers) worship this!
  - Multiple comparisons correction (MCC): different tests
    - Happy vs. Sad, Happy vs. Neutral, Sad vs. Neutral
    - ∘ Two one-sided *t*-tests: *p*-value is ½ of two-sided test!
    - o How far do you want to go?
      - Tests in one study
      - o Tests in all FMRI or all scientific studies?
    - Nobody cares about this issue in FMRI (for unknown reasons)
- Many reasons for correction failure (loss of statistical significance)
  - Region size, number of subjects, alignment quality, substantial cross-subject variability (anxiety disorder, depression, ...)

### Presenting response magnitudes



### Presenting response magnitudes

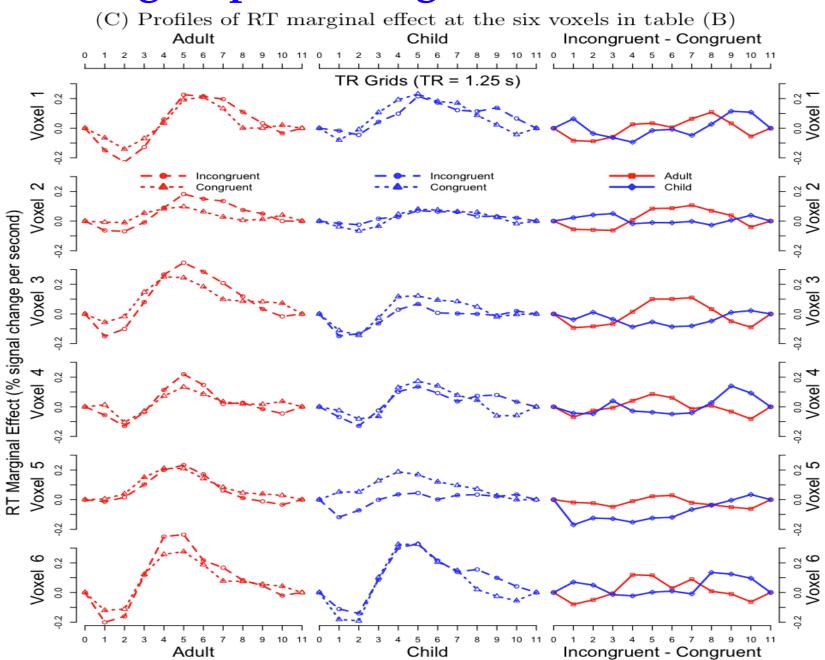
(A) Coronal view of interaction effect of Group:Condition:Time



(B) Sphericity scenarios at six representative voxels

Voxel		Sphericity			UVT-UC	UVT-SC	MVT-WS	HT
No.	coordinates	Mauchly p-value	$\epsilon_{GG}$	$\epsilon_{HF}$	p-value	p-value	p-value	taking
1	-2 36 27	0	0.32	0.35	0.28	0.31	0.00021	MVT-WS
2	-33 -5 42	0	0.42	0.46	$3.8 \times 10^{-6}$	$8.4 \times 10^{-4}$	$1.6 \times 10^{-4}$	MVT-WS
3	-50 -16 24	0	0.45	0.50	$1.6 \times 10^{-4}$	0.0041	0.14	MVT-WS
4	-5 -20 23	$8.7 \times 10^{-6}$	0.68	0.79	$1.8 \times 10^{-5}$	0.0001	0.008	UVT-SC
5	37 68 20	0	0.30	0.32	0.012	0.074	0.15	MVT-WS
6	-36 -16 7	0	0.53	0.60	$1.8 \times 10^{-5}$	$5.3 \times 10^{-4}$	0.0019	UVT-SC

### Presenting response magnitudes



### **IntraClass Correlation (ICC)**

- Reliability (consistency, reproducibility) of signal: extent to which the levels of a factor are related to each other
  - Example 3 sources of variability: conditions, sites, subjects
  - Traditional approach: random-effects ANOVAs
  - LME approach

$$\hat{\beta}_{ijk} = \alpha_0 + \alpha_1 * x_k + b_i + c_j + d_k + \epsilon_{ijk}, b_i \sim N(0, \tau_1^2), c_j \sim N(0, \tau_2^2), d_k \sim N(0, \tau_3^2), \epsilon_{ijk} \sim N(0, \sigma^2)$$

$$ICC_l = \frac{\tau_l^2}{\tau_l^2 + \tau_2^2 + \tau_3^2 + \sigma^2}, l = 1, 2, 3$$

o 3dLME

### **Group Analysis:** Non-Parametric Approach

- Parametric approach
  - $_{\circ}$  When have enough number subjects: n > 10
  - Random effects of subjects: usually Gaussian distribution
  - Individual and group analyses: separate
- Non-parametric approach
  - $_{\circ}$  Moderate number of subjects: 4 < n < 10
  - No assumption of data distribution (e.g., normality)
  - Statistics based on ranking or permutation
  - Individual and group analyses: separate

### **Non-Parametric Analysis**

- Ranking-based: roughly equivalent to permutation tests
  - 3dWilcoxon (~ paired *t*-test)
  - 3dFriedman (~ one-way within-subject with 3dANOVA2)
  - 3dMannWhitney (~ two-sample *t*-test)
  - 3dKruskalWallis (~ between-subjects with 3dANOVA)
- Pros: Less sensitive to outliers (more robust)
- Cons
  - > Multiple testing correction **limited** to FDR (**3dFDR**)
  - > Less flexible than parametric tests
    - Can't handle complicated designs with more than one fixedeffects factor
    - Can't handle covariates
- Direct permutation approach?

### Group Analysis: Fixed-Effects Analysis (very old)

- When to consider?
  - LME approach
  - o Group level: a few subjects: n < 6
  - o Individual level: combining multiple runs/sessions
- Case study: difficult to generalize to whole population
- Model  $\beta_i = b + \varepsilon_i$ ,  $\varepsilon_i \sim N(0, \sigma_i^2)$ ,  $\sigma_i^2$ : within-subject variability
  - o Fixed in the sense that cross-subject variability is not considered
- Direct fixed-effects analysis (3dDeconvolve/3dREMLfit)
  - o Combine data from all subjects and then run regression
- Fixed-effects meta-analysis (**3dcalc**): weighted least squares

$$\circ \beta = \sum w_i \beta_i / \sum w_i, w_i = t_i / \beta_i = \text{weight for } i \text{th subject}$$

$$\circ t = \beta \sqrt{\sum w_i}$$

### **Group Analysis Program List**

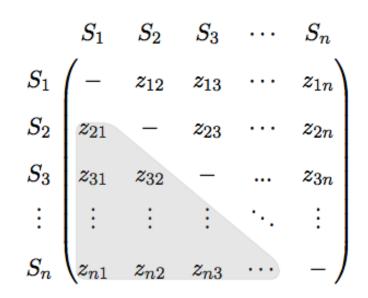
- **3dttest++** (<u>one-sample</u>, <u>two-sample</u> and <u>paired</u> *t*) + covariates (voxelwise is allowed, *e.g.*, GM fraction)
- **3dMEMA** (R package for mixed-effects analysis, *t*-tests plus covariates)
- 3ddot (correlation between two datasets)
- 3dANOVA (one-way between-subject)
- 3dANOVA2 (one-way within-subject, 2-way between-subjects)
- 3dANOVA3 (2-way within-subject and mixed, 3-way between-subjects)
- 3dMVM (AN(C)OVA, and within-subject MAN(C)OVA)
- **3dLME** (R package for sophisticated cases)
- 3dttest (obsolete: one-sample, two-sample and paired t)
- 3dRegAna (obsolete: regression/correlation, covariates)
- GroupAna (mostly obsolete: Matlab package for up to four-way ANOVA)

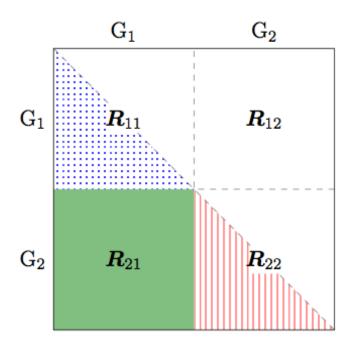
# FMRI Group Analysis Comparison

		AFNI	SPM	FSL		
<i>t</i> -test (one-, two	o-sample, paired)	3dttest++, 3dMEMA	Yes	FLAME1, FLAME1+2		
One categorica one-way ANO		3dANOVA/2/3, GroupAna	Only <b>one</b> WS factor: full and flexible factorial design	Only <b>one</b> within- subject factor: GLM in FEAT		
Multi-way AN(	(C)OVA	3dANOVA2/3, GroupAna, 3dMVM				
Between-subject covariate		3dttest++, 3dMEMA, 3dMVM	Partially	Partially		
	Covariate + within-subject factor					
Sophisticated situations	Subject adjustment in trend analysis	3dLME				
	Basis functions					
	Missing data			,		

- Conventional task-related FMRI experiments
  - Meticulously designed
  - Each trial lasts one or few TRs
  - o Ultimate goal: identify ROIs associated with a task or a contrast
  - Potential issues: sensitivity (underpowered)
- Naturalistic tasks: lasting for a few minutes or more
  - Movie clip, music, speech
  - Minimally manipulated

- Analysis methodology
  - Regression with task-related regressors won't work
  - Voxel-wise correlation between any subject pair with
     3dTcorrelate
    - n = 4 subjects  $\rightarrow 6$  ISC; n = 5 subjects  $\rightarrow 10$  ISC
    - *n* subjects  $\rightarrow n(n-1)/2$  ISC which are not all independent!
  - o How to go about group analysis?

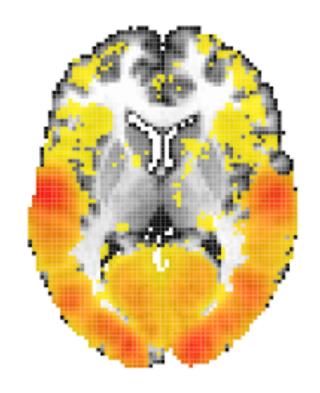




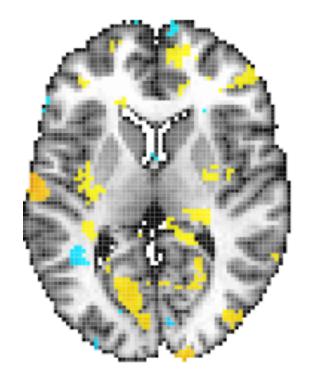
- Analysis methodology
  - o How to go about group analysis?
    - Difficulty: The ISCs are not independent with each other
    - The correlations are correlated themselves!

	$Z_{21}$	$Z_{31}$	$Z_{41}$	$Z_{51}$	$Z_{32}$	$Z_{42}$	$Z_{52}$	$Z_{43}$	$Z_{53}$	$Z_{54}$
$Z_{21}$	( 1	ρ	ρ	ρ	ρ	ρ	ρ	0	0	0
$Z_{31}$	ρ	1	ρ	ρ	ρ	0	0	ρ	ρ	0
$Z_{41}$	ρ	ρ	1	ρ	0	ho	0	ρ	0	ρ
$Z_{51}$	ρ	ρ	ρ	1	0	0	ρ	0	ρ	ρ
$Z_{32}$	ρ	ρ	0	0	1	ho	ρ	ρ	ρ	0
$Z_{42}$	ρ	0	ρ	0	ρ	1	ρ	ρ	0	ρ
$Z_{52}$	ρ	0	0	ρ	ρ	ρ	1	0	ρ	ρ
$Z_{43}$	0	ρ	ρ	0	ρ	ho	0	1	ρ	ρ
$Z_{53}$	0	ρ	0	ρ	ρ	0	ρ	ρ	1	ρ
$Z_{54}$	0	0	ρ	ρ	0	$\boldsymbol{\rho}$	ρ	$\rho$	ρ	1 /

- Analysis methodology
  - o How to go about group analysis?
    - Male group and difference between males and females



Males, p < 0.001



Males vs. Females, p < 0.05

### **Overview**

- Basic concepts
  - Why do we need to do group analysis?
  - o Factor, quantitative covariates, main effect, interaction, ...
- Various group analysis approaches
  - ∘ Regression (*t*-test): 3dttest++, 3dMEMA, 3dttest, 3RegAna
  - AN(C)OVA: 3dANOVAx, 3dMVM, GroupAna
  - o Quantitative covariates: 3dttest++, 3dMEMA, 3dMVM, 3dLME
  - Impact & consequence of SFM, SAM, and SEM
- Miscellaneous
  - Issues regarding result reporting
  - Intra-Class Correlation (ICC)
  - Nonparametric approach and fixed-effects analysis
- No routine statistical questions, only questionable routines!