Introduction to DTI: Part I

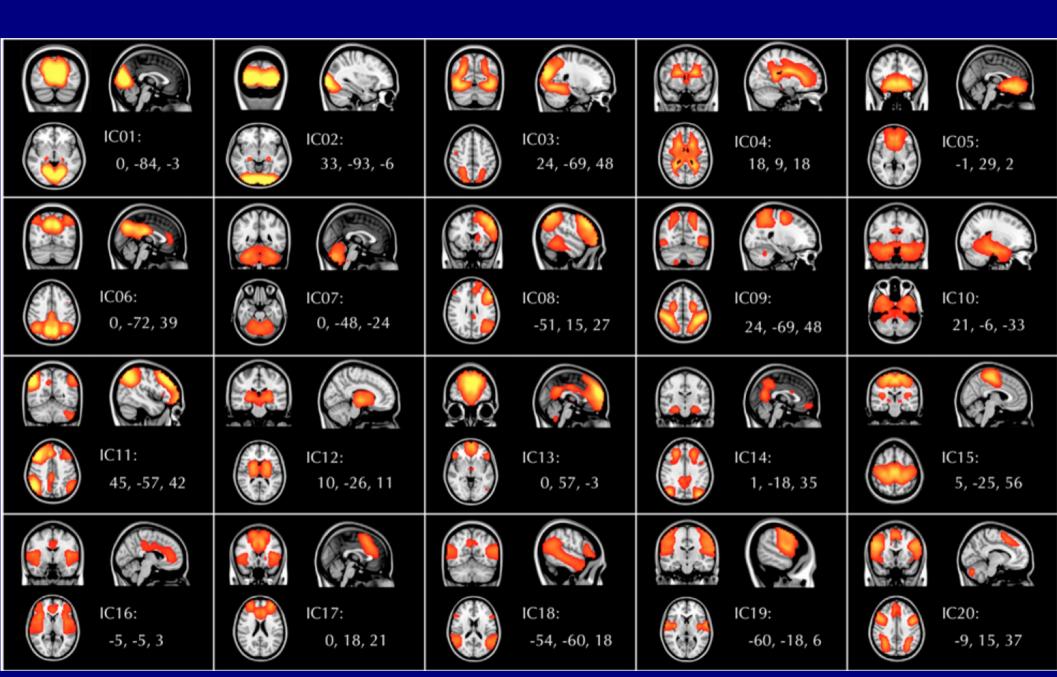
Paul A. Taylor

NIMH, NIH

Outline

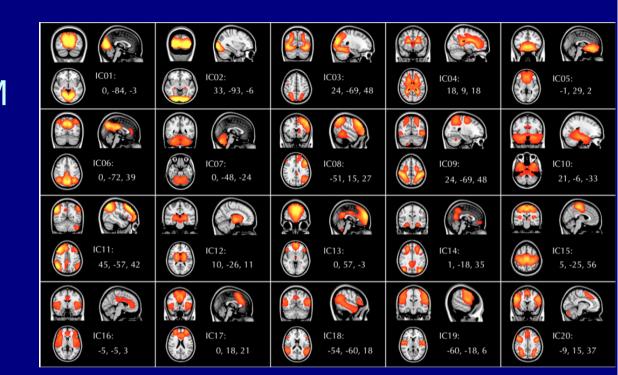
- + Why Function+Structure
- + DWI and DTI (→ local structures)
 - Brief diffusion imaging basics and parameters
 - Role of noise → DTI parameter uncertainty
- + Using tractography (→ estimate extended structures)
 - goals of tracking.
 - algorithms/properties
 - final thoughts on interpretation

FMRI: GM Networks



FMRI: GM Networks

- Functional connectivity
 networks of distinct GM
 regions, from BOLD
 time series during task
 or rest/no task.
- + Quantify GM properties: ALFF, fALFF, RSFA, σ, ReHo, GMV, etc.
- + Quantify network props: seedbased correlation, ICA, graph theoretical measures, etc.



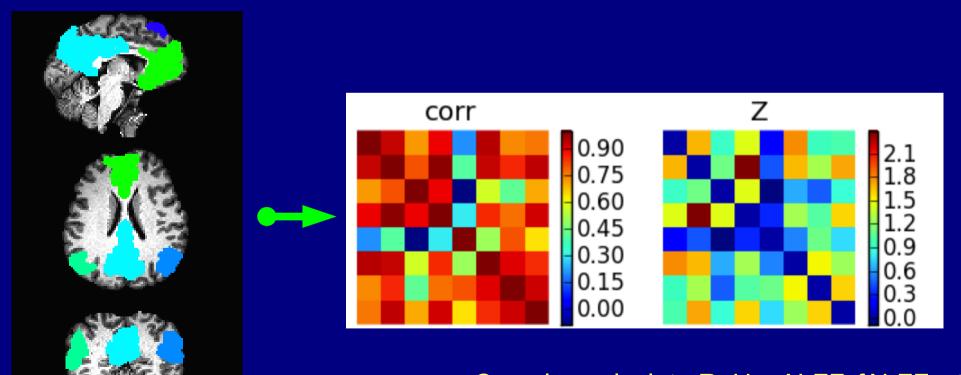
Sidenote:

Mention of a few of the FMRI tools

Functional processing, 3

For {RS- | TB-}FMRI: correlation matrices

- + 3dNetCorr: calculated post-processing, input time series data + network maps
 - can be multi-brick maps, 1 network per brick
 - calculate average time series per ROI, correlation among network ROIs
 - outputs correlation matrix/matrices, (can also do Fisher-Z transform output)



++ Can also calculate ReHo, ALFF, fALFF, etc. in FATCAT/AFNI.

DTI: WM structure

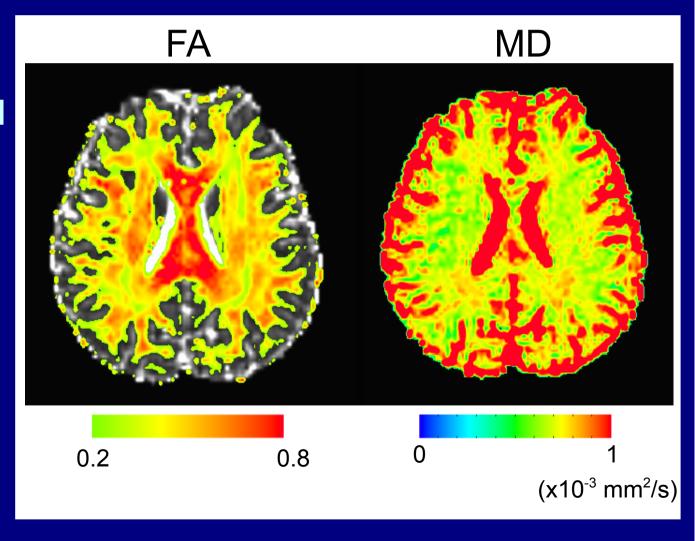
DTI-based parameters characterize some local structural properties and also show the presence of spatially-extended

WM structures.

Can quantify structural (esp. WM) properties using:

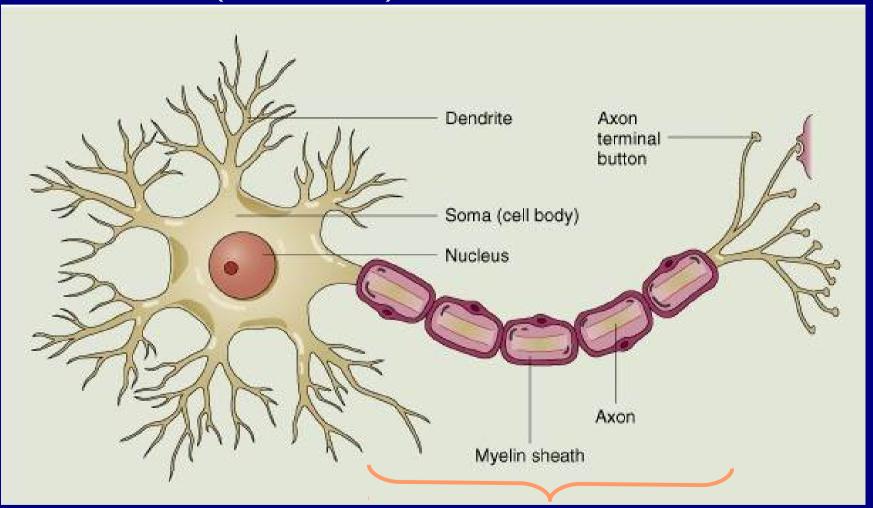
FA, MD, RD, L1, etc.

Can investigate (and Quantify?) network relations with: tractography



Structural connections in the brain

The (schematic) structure of neurons

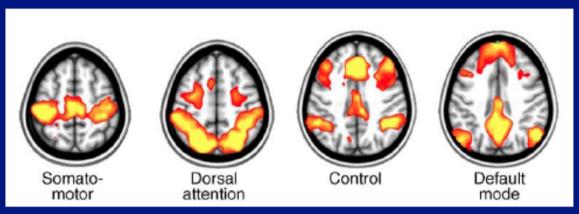


Extended white matter fibers, often organized in bundles

Structure + Function

Simple example:

GM ROIs network:

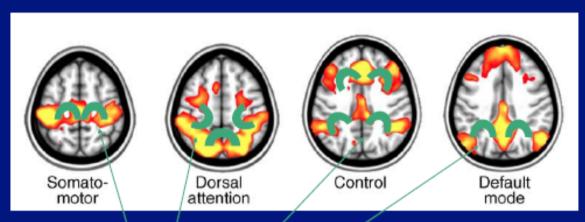


Raichle (2010, TiCS)

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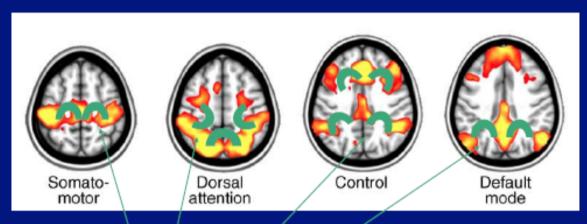
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Associated WM ROIs

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Associated WM ROIs

Our goal for tractography-> estimate likely/probable locations of WM associated with GM, and relate ROI quantities with functional/GM properties

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 - how about:
 - find likely areas where WM is connecting GM regions, and quantify properties in those regions (FA, MD, proton density from structural images...)
 - → FC+SC provides sets of complementary quantities to describe a network, and can be further combined with behavioral/other measures (statistical modeling).

Tools for combining FC and SC:

Combining functional and tractographic connectivity will require:

- + determining networks from FMRI (or other) data;
- + finding correlations and local properties of functional networks;
- + turning GM ROIs into targets for tractography;
- + doing reasonable tractography to find WM ROIs;
- + estimating stats on WM ROIs...

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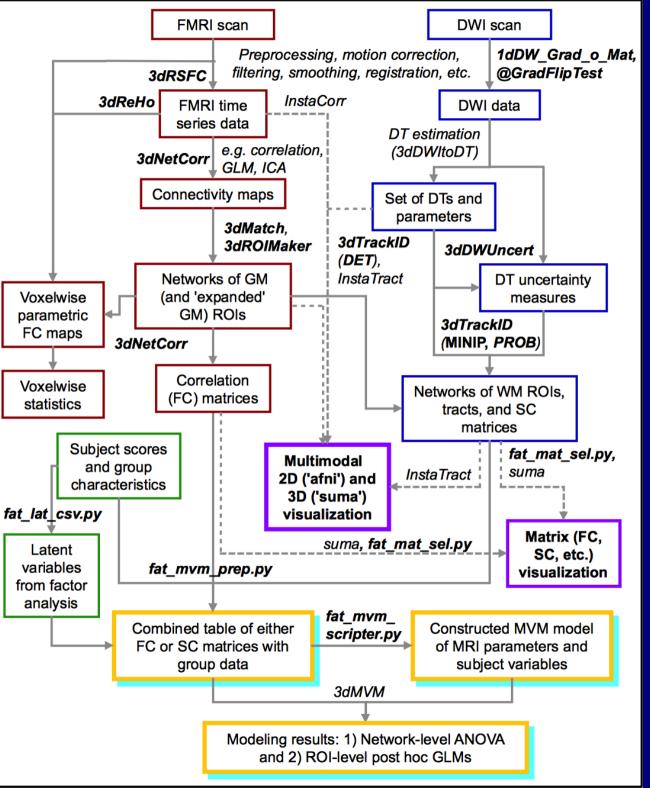
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FATCAT: Functional And Tractographic Connectivity Analysis Toolbox (Taylor & Saad, 2013), available in AFNI with demo data+scripts.



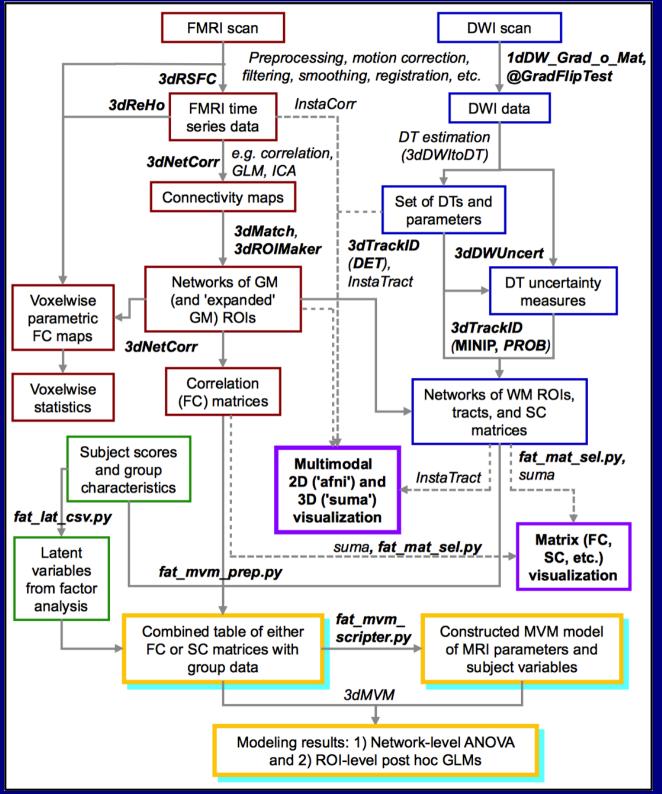


*picture from google search, not from/of either author



Schematic for combining FMRI and DTI-tractography via FATCAT

(Taylor, Chen, Cox & Saad, 2015?)

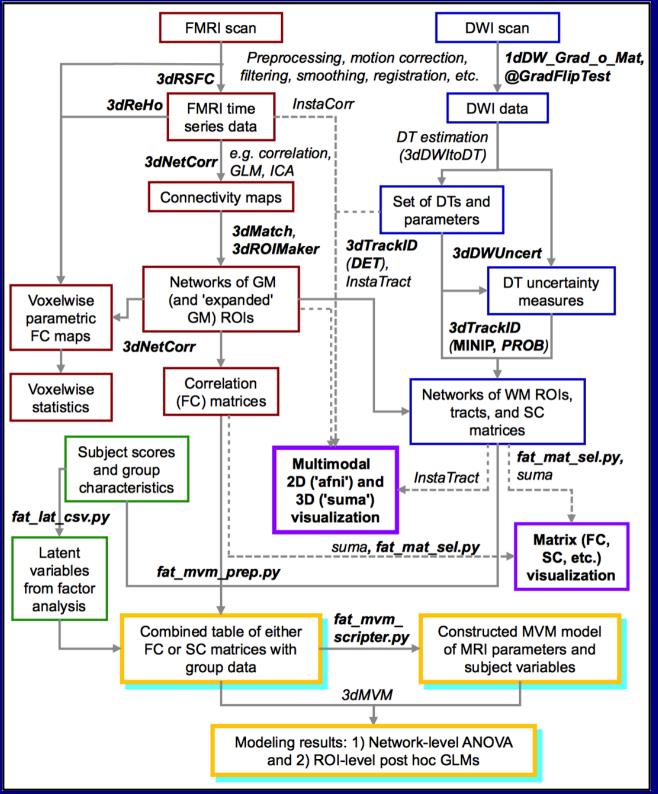


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FATCAT goals:

- + Do useful tasks
- + Integrate with existing pipelines/software
- + Derive/use information from the data itself
- + Be "simple" to implement
- + Be network-oriented, when possible
- + Be efficient
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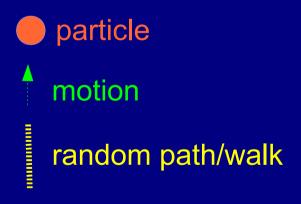
Main focus today on DTItractography, including making ROIs from FMRI

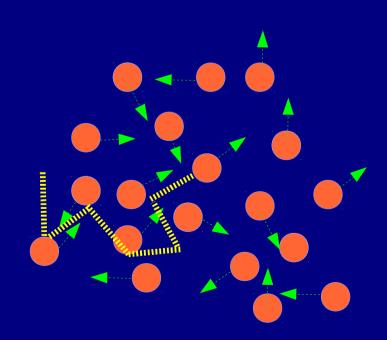
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Tensor: a mathematical object (a matrix) to store information

→ here, quantifying particle spread in all directions

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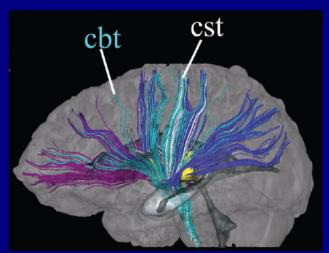
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Imaging: quantifying brain properties

 \rightarrow here, esp. for white matter



The DTI model: Assumptions and relation to WM properties

Diffusion: random (Brownian) motion of particles → mixing or spreading

Ex: unstirred, steeping tea (in a large cup):





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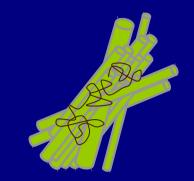
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→ *non*spherical spread

→ Diffusion shape tells of structure presence and spatial orientation

(In brief)

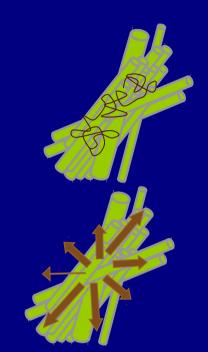
1) Random motion of molecules affected by local structures



(In brief)

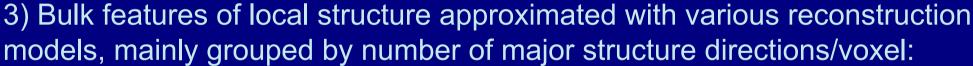
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2) Statistical motion measured using diffusion weighted MRI

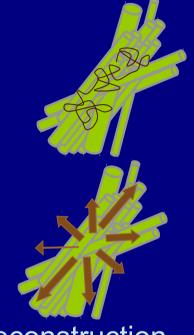


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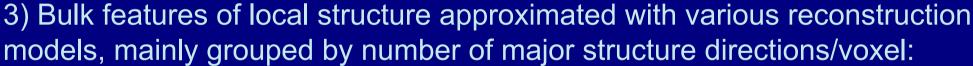


+ one direction:DTI (Diffusion Tensor Imaging)

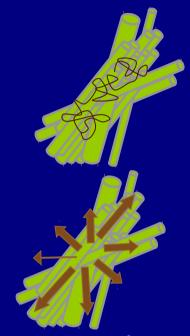


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- + one direction:DTI (Diffusion Tensor Imaging)
- + >=1 direction:
 HARDI (High Angular Resolution Diffusion Imaging)
 Qball, DSI, ODFs, ball-and-stick, multi-tensor, CSD, ...



Diffusion in MRI

Mathematical properties of the matrix/tensor:

$$\mathbf{D} = \begin{pmatrix} D_{11} & D_{12} & D_{13} \\ D_{21} & D_{22} & D_{23} \\ D_{31} & D_{32} & D_{33} \end{pmatrix}$$

Having: 3 eigenvectors: **e**_i 3 eigenvalues: λ_i

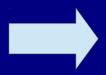
- Real-valued
- Positive definite ($\mathbf{r}^{\mathsf{T}}\mathbf{Dr} > 0$)

$$\mathbf{D}\mathbf{e}_{i} = \lambda_{i}\mathbf{e}_{i}, \quad \lambda_{i} > 0$$

- Symmetric ($D_{12} = D_{21}$, etc), 6 independent values

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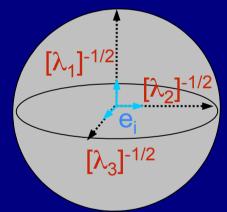
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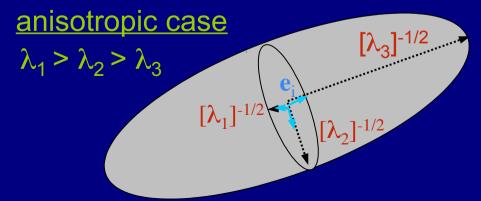
Geometrically, this describes an ellipsoid surface:

$$C = D_{11}x^2 + D_{22}y^2 + D_{33}z^2 + 2(D_{12}xy + D_{13}xz + D_{23}yz)$$



$$\lambda_1 = \lambda_2 = \lambda_3$$

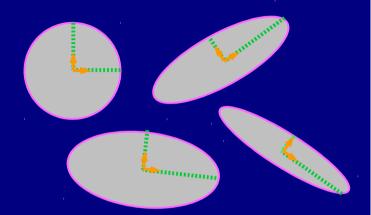




DTI: ellipsoids

Important mathematical properties of the diffusion tensor:

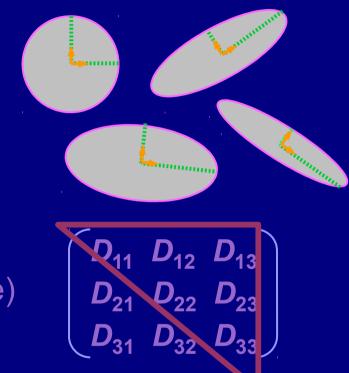
+ Help to picture diffusion model:
 tensor D → ellipsoid surface
 eigenvectors → orientation in space
 eigenvalues → 'pointiness' + 'size'



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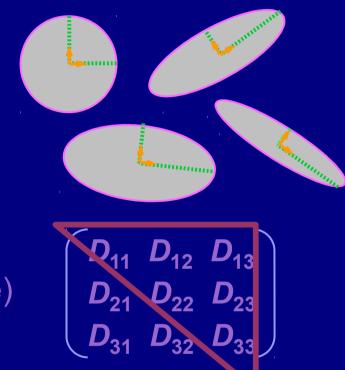
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- + Determine the minimum number of DWIs measures needed (6 + baseline)



DTI: ellipsoids

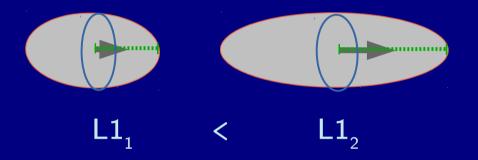
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- + Determine much of the processing and noise minimization steps



Main quantities of diffusion (motion) surface

first eigenvalue, L1 $(= \lambda_1, parallel/axial diffusivity, AD)$



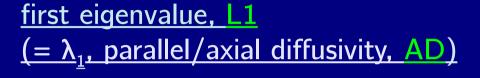
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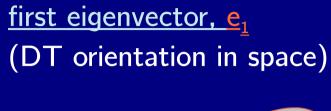


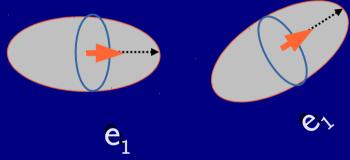
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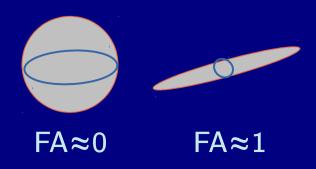




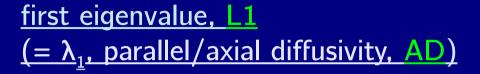


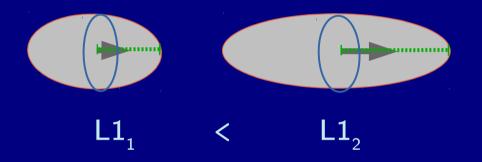


Fractional anisotropy, FA (stdev of eigenvalues)

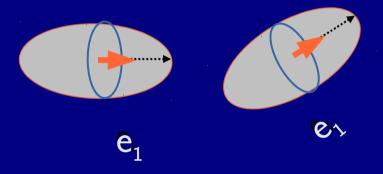


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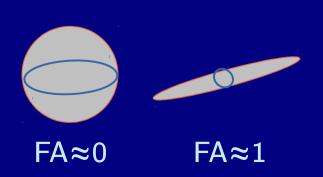




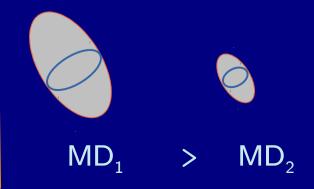
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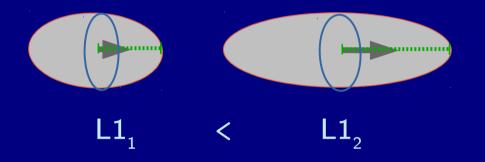


Mean diffusivity, MD (mean of eigenvalues)

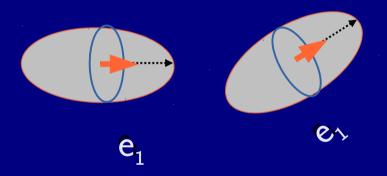


Main quantities of diffusion (motion) surface

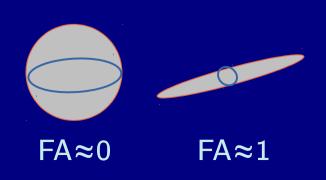
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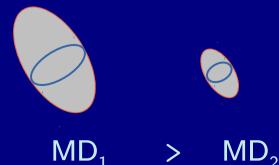
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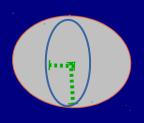
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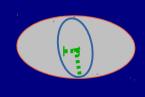


Mean diffusivity, MD (mean of eigenvalues)



Radial diffusivity, RD $(= (\lambda_2 + \lambda_3)/2)$

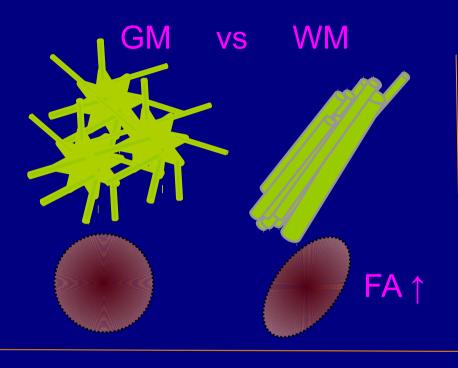


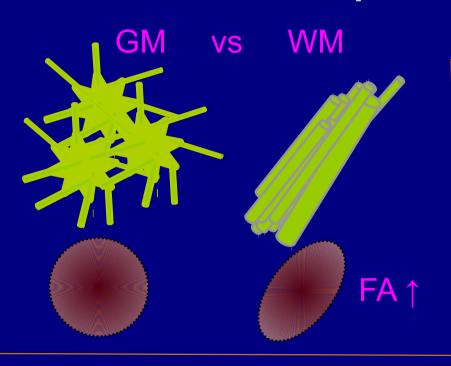


 RD_1

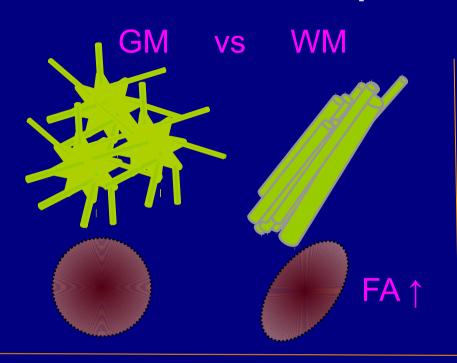
> RD₂



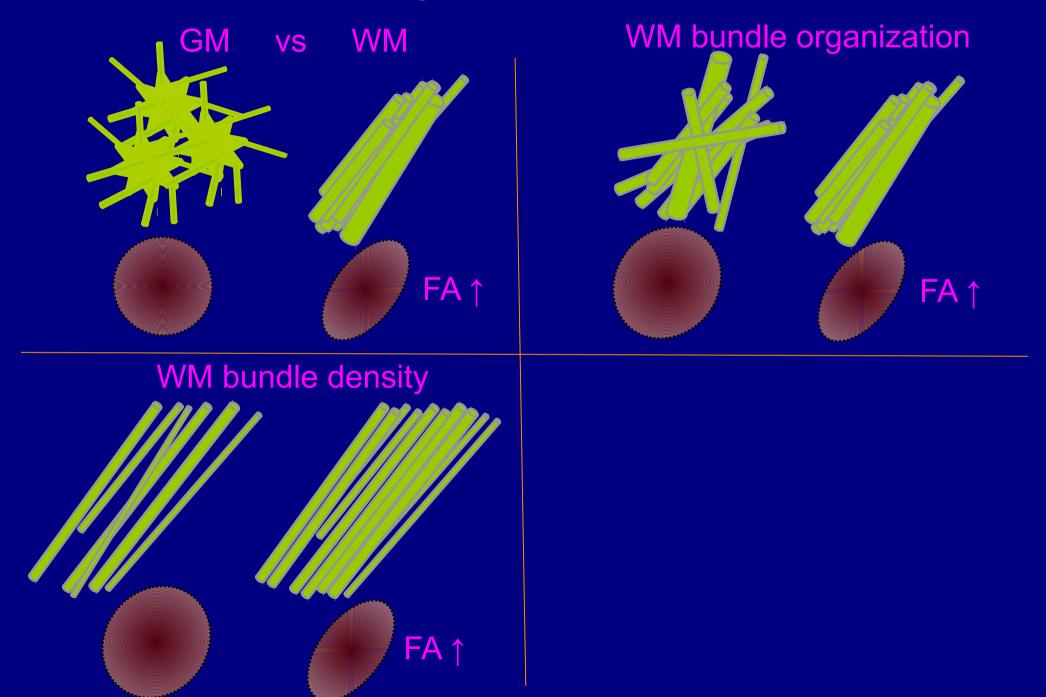


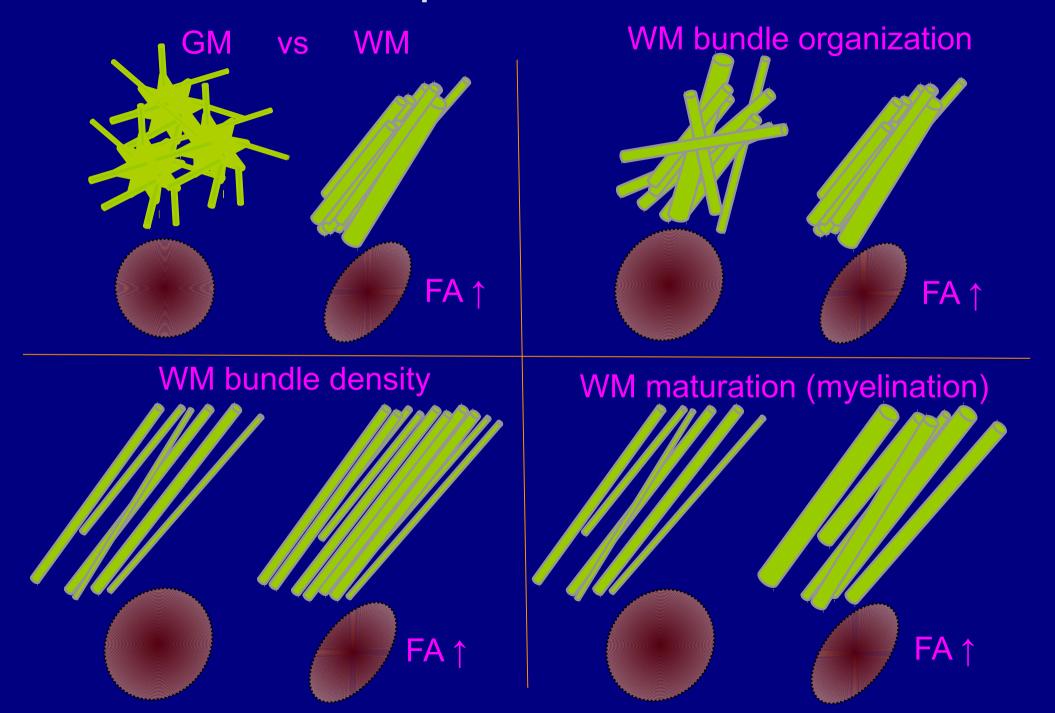












Interpreting DTI parameters

General literature:

FA: measure of fiber bundle coherence and myelination

- in adults, FA>0.2 is proxy for WM

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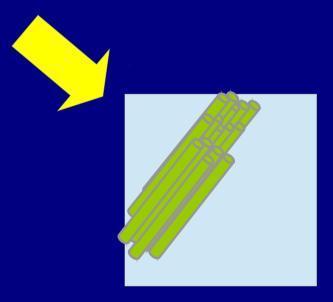
Cautionary notes:

- Degeneracies of structural interpretations
- Changes in myelination may have small effects on FA
- WM bundle diameter << voxel size
 - don't know location/multiplicity of underlying structures
- More to diffusion than structure-- e.g., fluid properties
- Noise, distortions, etc. in measures

Acquiring DTI data: diffusion weighted gradients in MRI

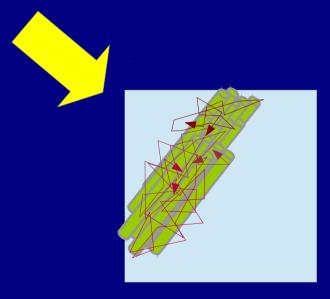
For a given voxel, observe relative diffusion along a given 3D spatial orientation (gradient)

DW gradient
$$\mathbf{g}_{i} = (g_{x'}, g_{y'}, g_{z})$$



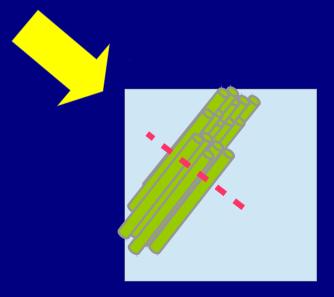
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MR signal is attenuated by diffusion throughout the voxel in that direction:

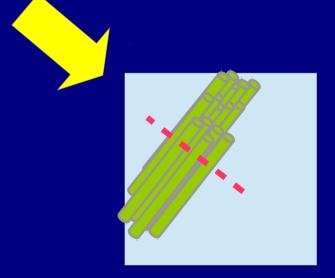
$$S_i = S_0 e^{-b g_i^T D g_i}$$

→ ellipsoid equation of diffusion surface:

$$C = \mathbf{r}^T \mathbf{D}^{-1} \mathbf{r}$$
.

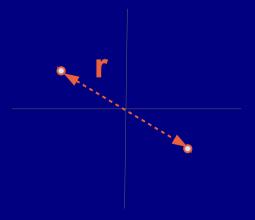
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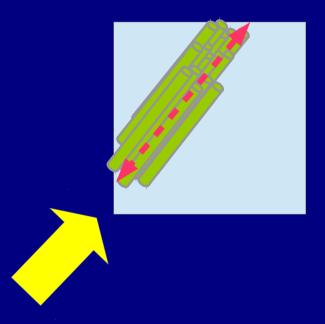
diffusion motion ellipsoid:

$$\mathbf{C}_2 = \mathbf{r}^\mathsf{T} \; \mathbf{D}^{-1} \; \mathbf{r}.$$



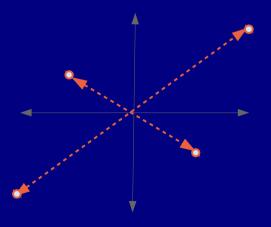
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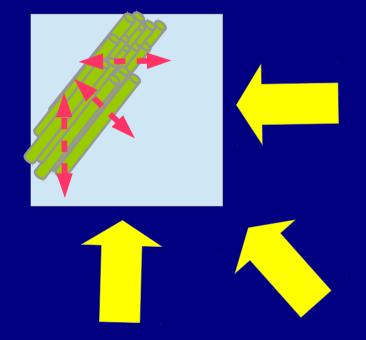


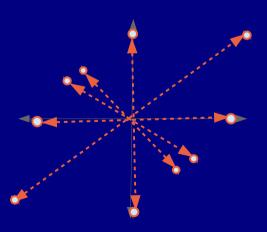
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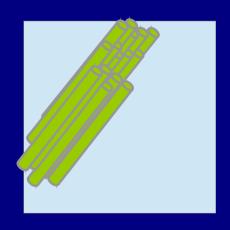
$$C_2 = \mathbf{r}^T \mathbf{D}^{-1} \mathbf{r}$$
.





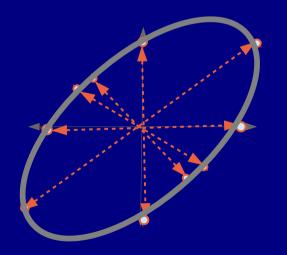
For a given voxel, observe relative diffusion along a given 3D spatial orientation (gradient)

DW gradient
$$\mathbf{g}_{i} = (g_{x'}, g_{y'}, g_{z})$$



diffusion motion ellipsoid:

$$C_2 = r^T D^{-1} r$$
.

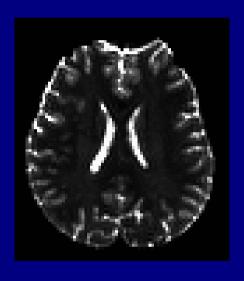


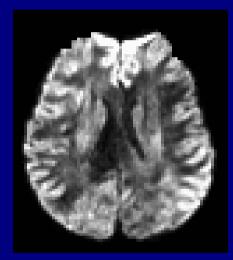
Individual points → Fit ellipsoid surface Individual signals → Solve for **D**

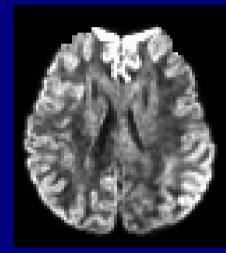
Sidenote: what DWIs look like

Unweighted reference b=0 s/mm²

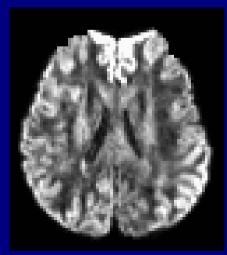
Diffusion weighted images (example: b=1000 s/mm²)

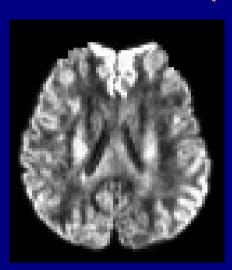


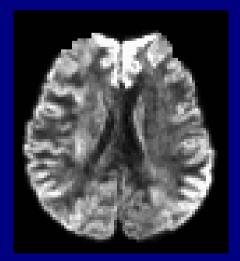








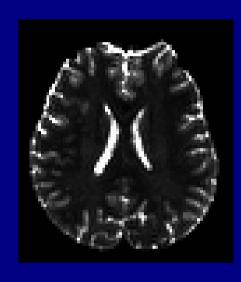


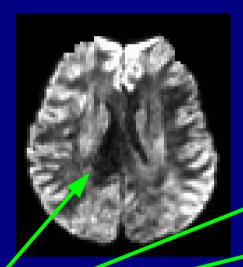


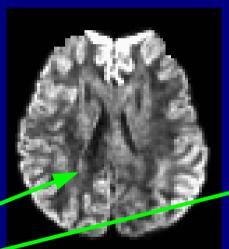
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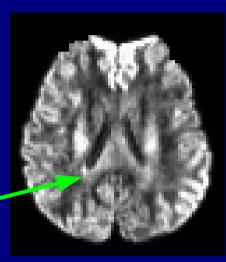
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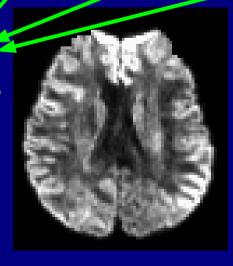


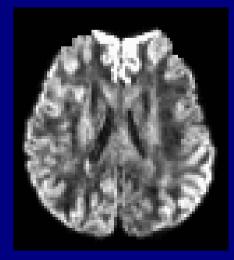


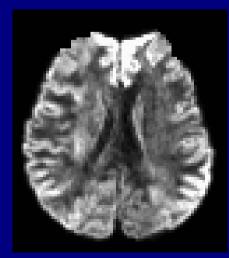




(Each DWI has a different brightness pattern: viewing structures from different angles.)







Noise in DW signals

MRI signals have additive noise

$$S_i = S_0 e^{-b g_i^T D g_i} + \varepsilon,$$

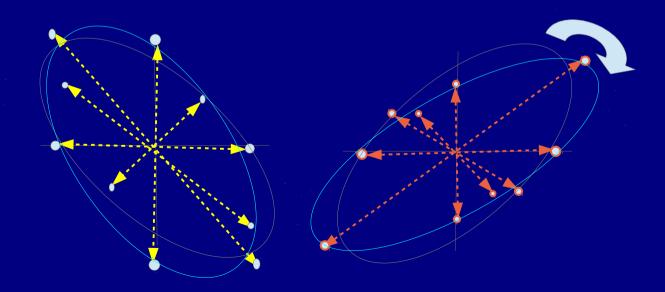
where ε is (Rician) noise.

Noise in DW signals

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→ Leads to errors in surface fit, equivalent to rotations and rescalings of ellipsoids:



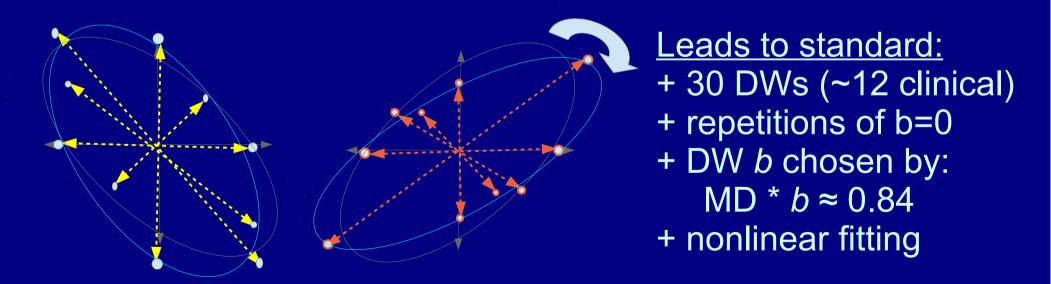
'Un-noisy' vs perturbed/noisy fit

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'Un-noisy' vs perturbed/noisy fit

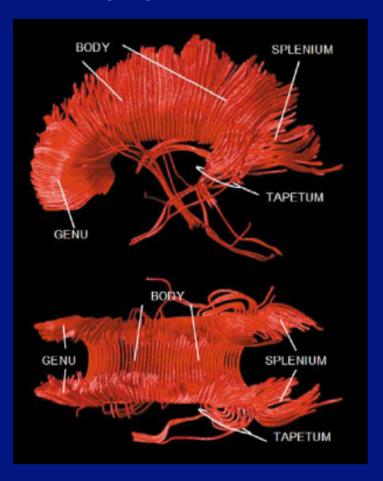
Now discuss using *local* structure information to generate/estimate *nonlocal* structures: WM tractography

Tractography in brief

old, invasive



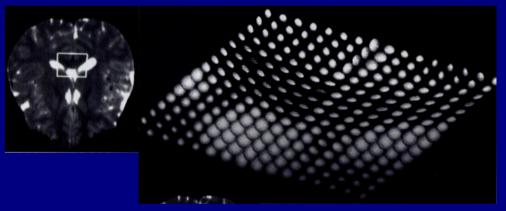
stain and preserve brain, get some ldea of structure... non-ideal: brain physiology changes postmortem, also `mortem' aspect new(er), theoretical



(images from Iowa Virtual Hospital and Bammer et al. 2003)

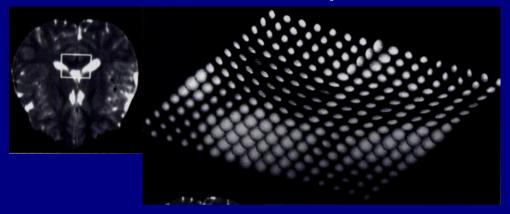
Local DTs → **extended tracts**

Field of local diffusion parameters



Local DTs → **extended tracts**

Field of local diffusion parameters

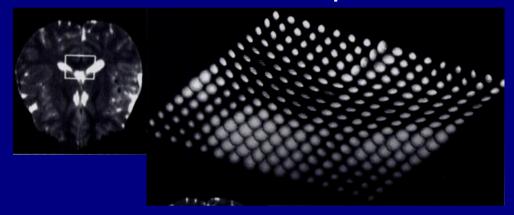


 \rightarrow individual ellipsoids

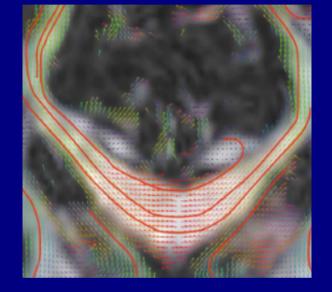


Local DTs → **extended tracts**

Field of local diffusion parameters



Connect to form extended tracts



 \rightarrow individual ellipsoids

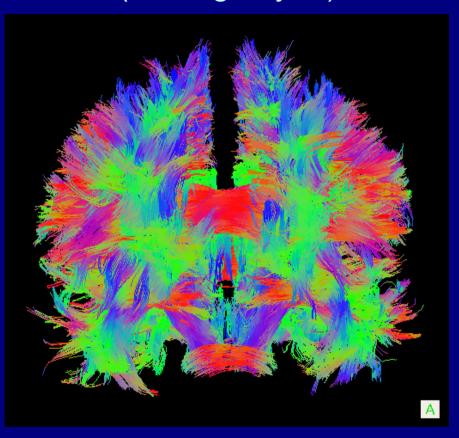


→ linked structures

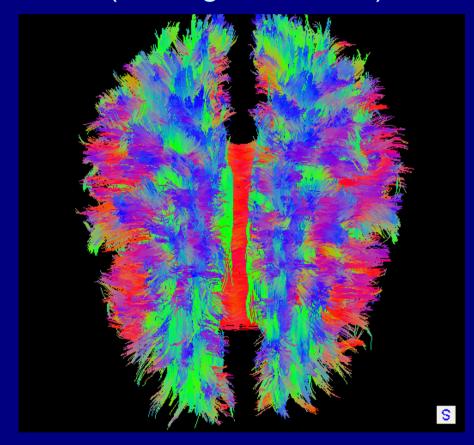


Tractography: connecting the brain

(looking at you)

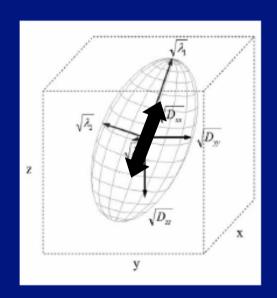


(looking downward)

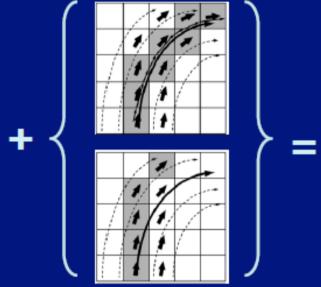


Tractography

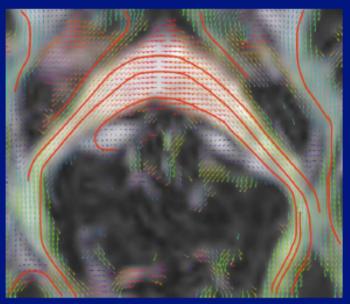
Estimate WM structure (fiber tract locations)



ellipsoid measures (~smoothing of real structures)



some kind of algorithm for connecting



estimate spatial extents of WM 'tracts' in vivo

Diversity in tractography

Series of (mostly) logical, simple rules for estimating tracts

→ many methods/algorithms and kinds of parameters to choose: (Mori et al., 1999; Conturo et al. 1999; Weinstein et al. 1999; Basser et al. 2000; Poupon et al. 2001; Mangin et al. 2002; Lazar et al. 2003; Taylor et al. 2012;)

Propagation via, e.g.:

smoothing diffusion vectors and solving differential equations; deflecting propagating tracts; allowing tracts themselves to 'diffuse'; solving for global minimum energy of connections...

To date, no single 'best' algorithm, work continues:

- histology can't give perfect answers.
- some test models (phantoms) exist, but not brain-complex

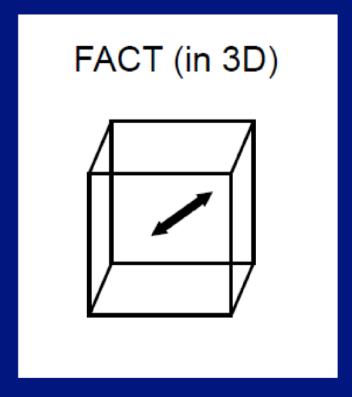
So, first question for using tractography in a study:

Which algorithm to choose?

- FACT = Fiber Assessment by Continuous Tracking (Mori et al. 1999) [used more than 200 times in past 1.5 yrs]
 - Start in voxel with FA>0.2 (proxy definition for WM)
 - Follow 1st eigenvector/greatest diffusion direction to next voxel
 - Continue if FA stays>0.2 and angle between e₁s is <45 deg

FACT (in 2D)

Ex.:

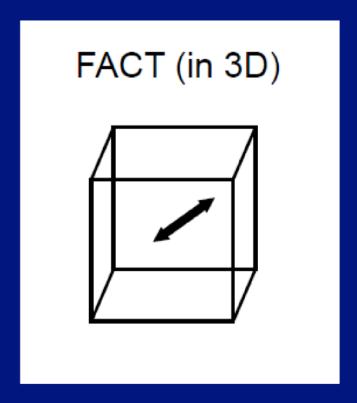


Very simple, but actually, gives some decent results, e.g.many known tracts

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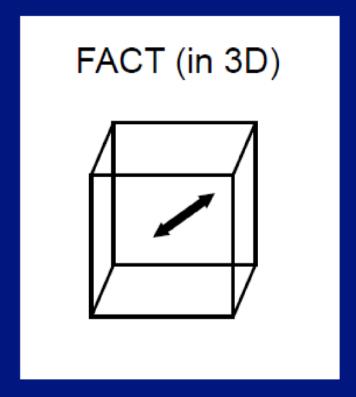
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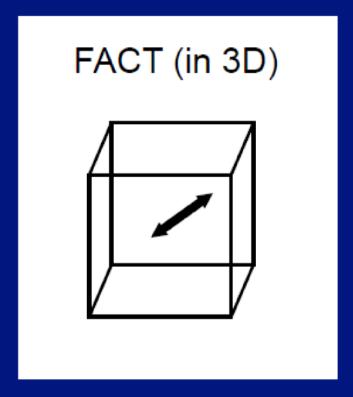


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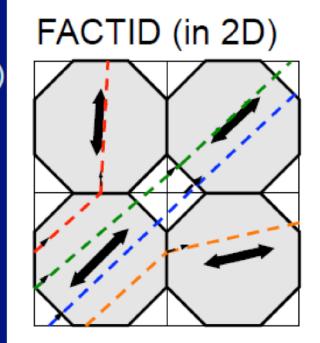
Improving FACT->

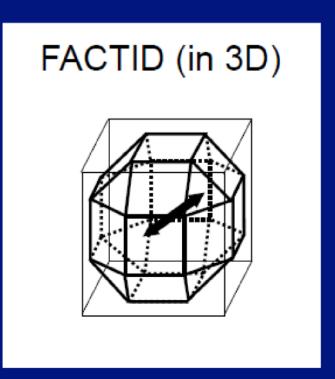
- Start by thinking: what properties a 'good' algorithm should have?
 - Should be independent of coordinate axes (i.e., results invariant to rotation of data set)
 - Should improve with spatial resolution (convergence in resolution)
 e.g., like in calculus, diagonals are better approximated with small grid steps
 - 3) Should improve with SNR (converge in SNR)
 - 4) Should not have strong instability with or dependence on noise

Improving FACT->

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Posit: including diagonal (ID) propagation helps 1 and 4, check about other props.

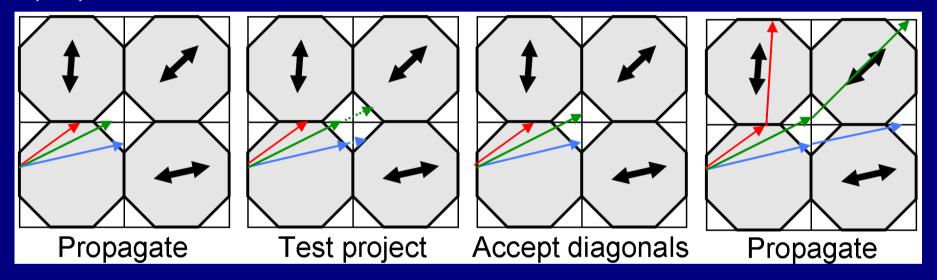




FACTID (FACT Including Diagonals):

+ Utilize simple check for diagonals.

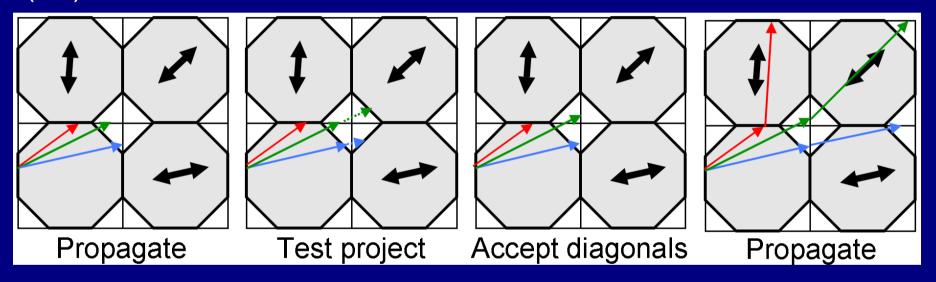
(2D) Schematic:



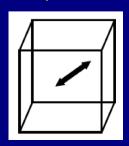
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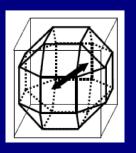
(2D) Schematic:



NB that in (3D) FACT, a single voxel has 6 neighbors for propagation, while in FACTID, a voxel has 26 neighbors propagation.



vs



Test 1: Rotational invariance

A test for consistency of results when axes of data have been rotated; here, using data from a real subject (scan axes rotated)

FACTID











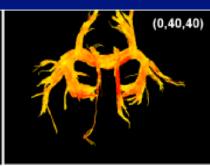
FACT



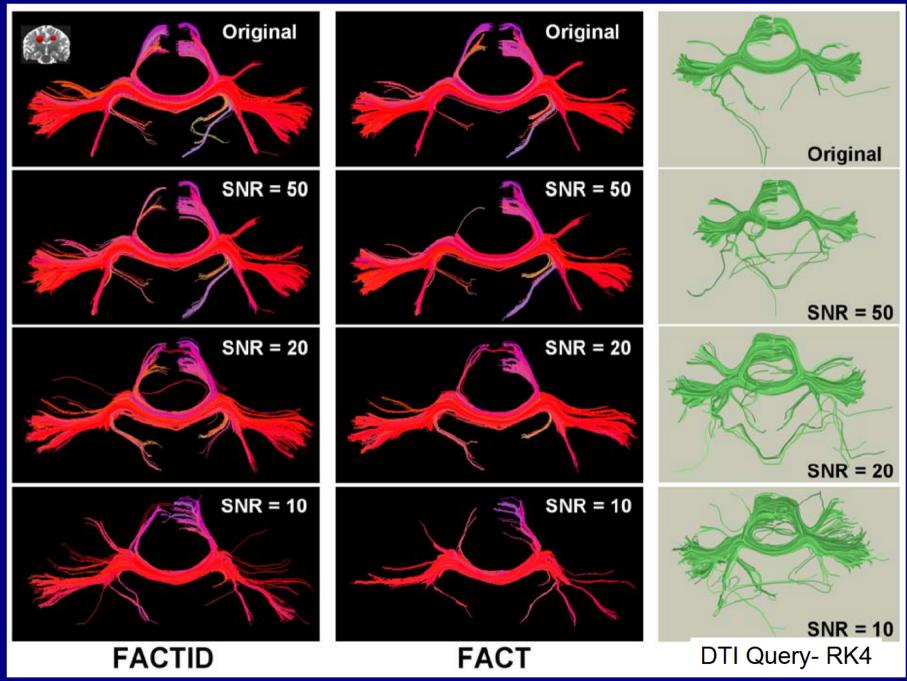








Test 3: Noise sensitivity



Test 5: Phantom Set

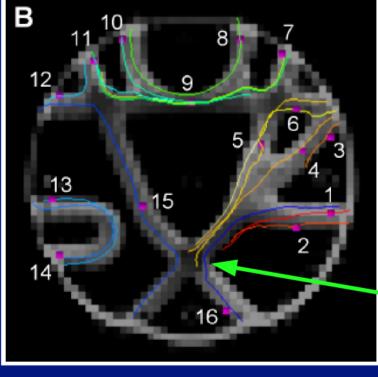
Fillard et al. (2011, NI) test phantom

FACT



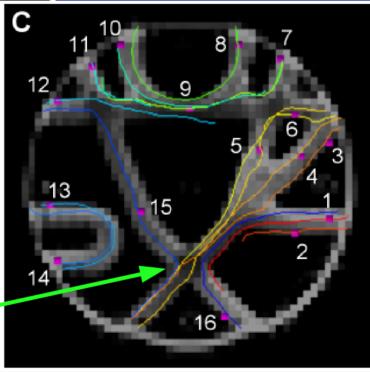
FACTID

"ANSWER"



(Taylor, Cho, Lin & Biswal, 2012)

e.g. compare



In addition to tracking algorithms, (great) care also has to be taken in pre-processing the diffusion data.

Importance of being processed (in earnest)

NB words of wisdom from wikipedia GIGO entry:

On two occasions I have been asked, "Pray, Mr. Babbage, if you put into the machine wrong figures, will the right answers come out?" ... I am not able rightly to apprehend the kind of confusion of ideas that could provoke such a question.

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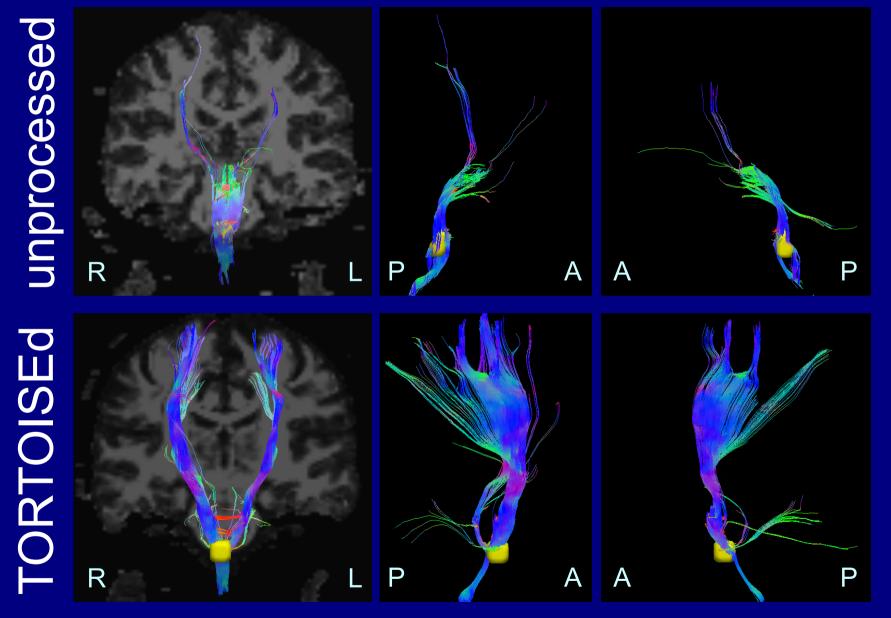
—Charles Babbage, <u>Passages from the Life of a Philosopher</u>

In addition to the tracking algorithm, the quality of data acquisition and preparation matter quite a bit

→ see the *TORTOISE* tool (Pierpaoli et al., 2010)

https://science.nichd.nih.gov/confluence/display/nihpd/TORTOISE

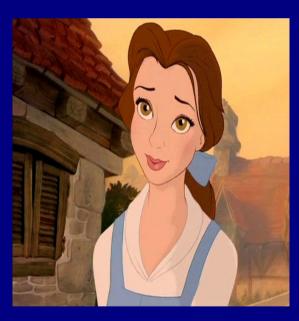
Importance of being processed (in earnest)



Data from the morning session, same target ROI in brainstem. Consider reach of tracts, symmetry, physiology, etc.

Cinematic side note:

La Belle et la Bête of tractography

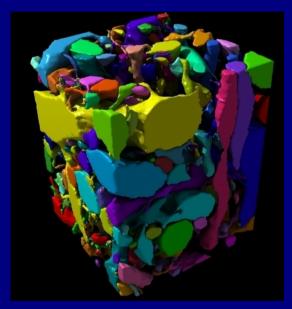


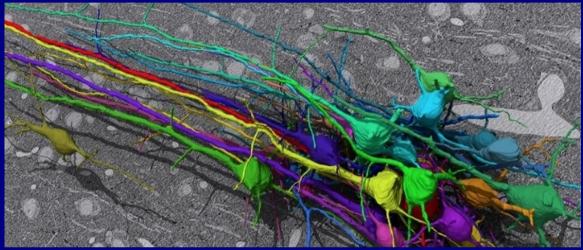


Known Challenges for Tracking

- + Axon diameters are of order a few micrometers
- + MRI voxel size is of order millimeters





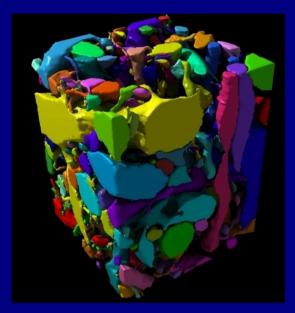


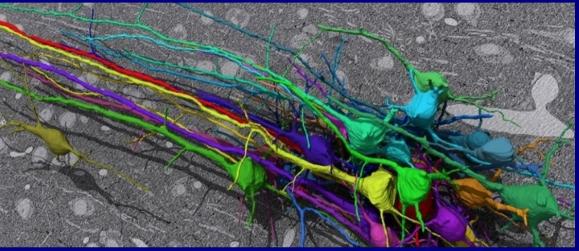
(images of Eyewire data via NPR website)

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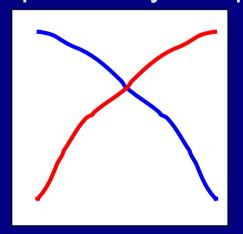


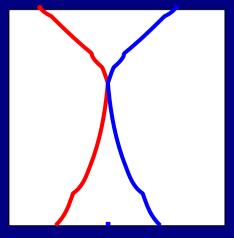




(images of Eyewire data via NPR website)

+ WM regions are tightly packed, with many connections and potentially complicated sub-voxel scale structure





Crossing/kissing fibers can:

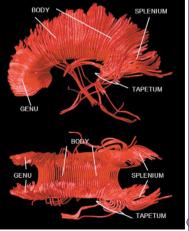
- Lower FA (stop tracking)
- Redirect (or *not*) tracking incorrectly.

Achievements of Tracking

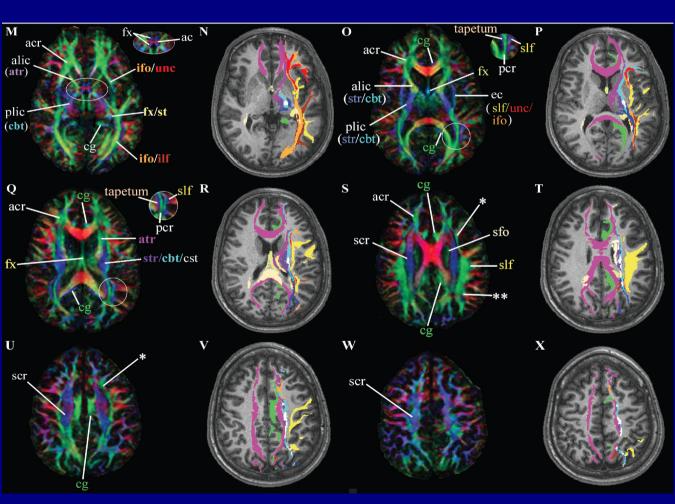


- + Reproduction of many known pathways
- + In vivo vs post-mortem information





(Bammer et al., 2003)



Light at the end of the tunnel?



Tractography seems useful and logically consistent as follows:

- 1) GM ROIs are connected by WM skeleton.
- 2) We can use tracking to estimate and highlight WM *likely* to be associated with GM ROIs.
- 3) One can then use DTI parameters in the tracked 'WM ROIs' for quantitative comparisons (or use ROIs as masks for other data).
- 4) Tractography can parcellate the WM skeleton based on the subject's own data.
- 5) Avoid interpreting reconstructed tracks to represent literal, underlying fibers.

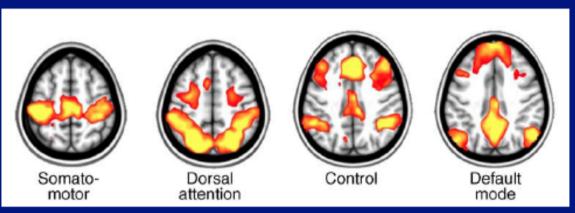
Applying tractography

Structure + Function

Simple example:

FMRI provides: maps of (GM) regions working together

GM ROIs network:



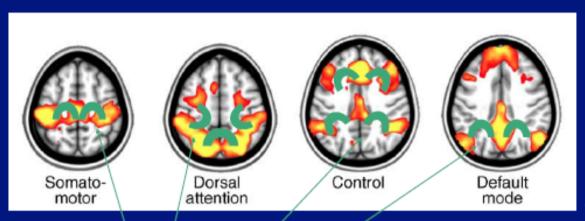
Raichle (2010, TiCS)

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Raichle (2010, TiCS)

Associated WM ROIs

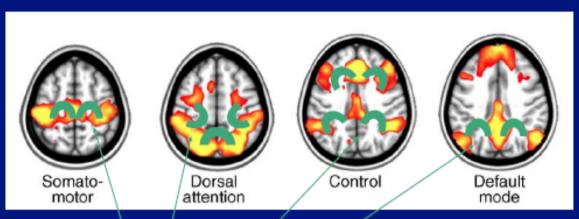
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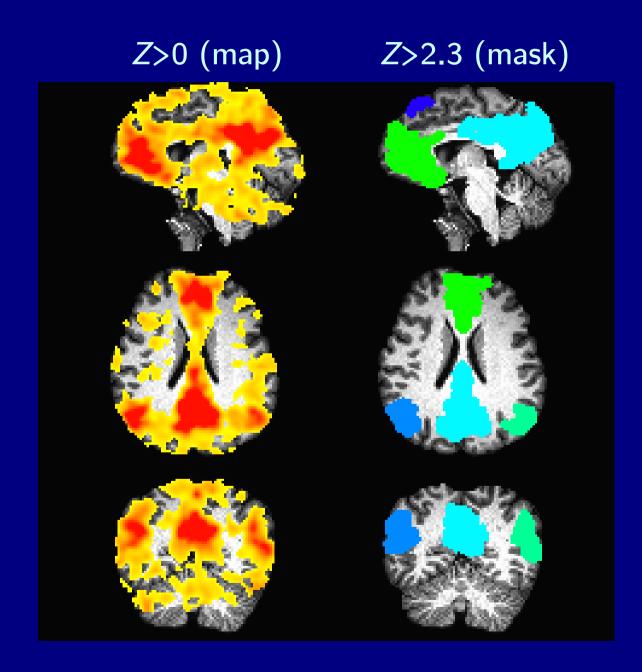
Raichle (2010, TiCS)

Associated WM ROIs

Our goal for tractography-> estimate likely/probable locations of WM associated with GM, and relate ROI quantities with functional/GM properties

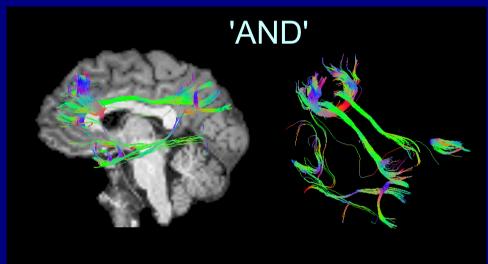
Example: Tractographic selections of WM

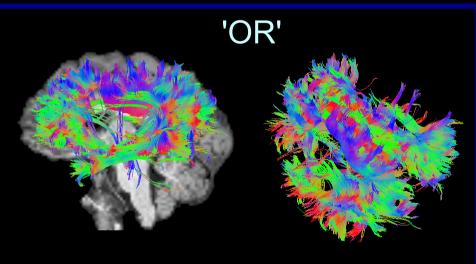
- 1) Start with FMRI:
- → threshold to obtain networks of GM ROIs

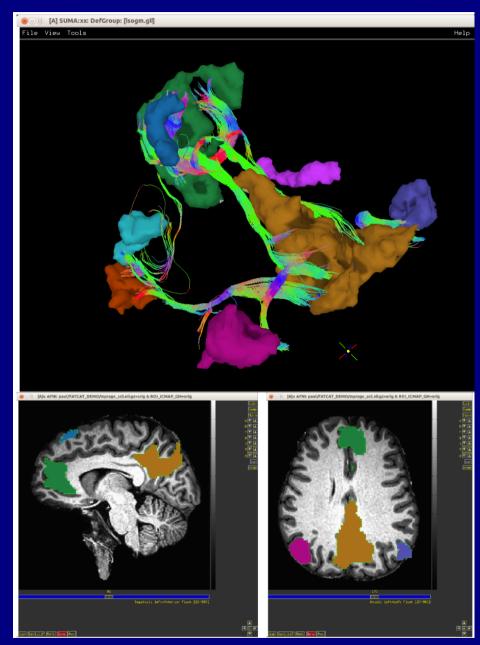


Example: Tractographic selections of WM

2) Use DTI-tractography to find likely location of WM associated with these 'targets'





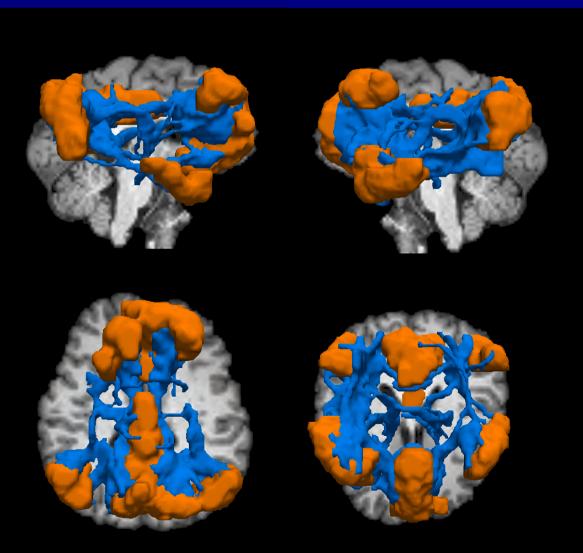


(Deterministic tracking using publicly available AFNI-FATCAT software)

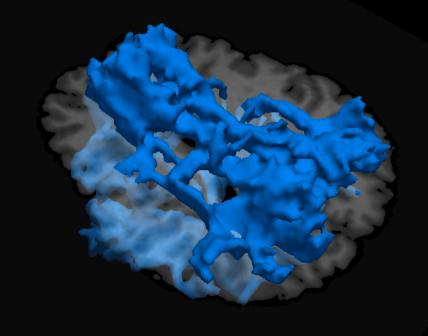
Example: Probabilistic tractography

More robust tracking method (many Monte Carlo iterations)

→ '*most likely*' locations of WM



orange = GM ROIs
blue = WM estimates
(via AFNI-FATCAT)



Brings up next question for doing tractography:

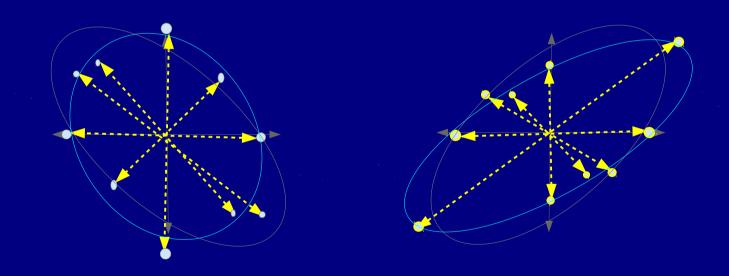
How do we estimate tensor parameter noise/uncertainty?

Noise in DW signals

MRI signals have additive noise

$$S_i = S_0 e^{-b g_i^T D g_i} + \varepsilon,$$

where ε is (Rician) noise, with the effect of leading to errors in surface fit, equivalent to *rotations* and *rescalings* of ellipsoids:



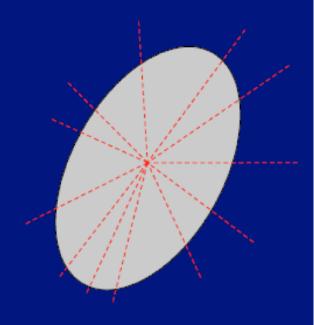
'Un-noisy' vs perturbed/noisy fit

EPI distortions, subject motion, et al. also warp ellipsoids.

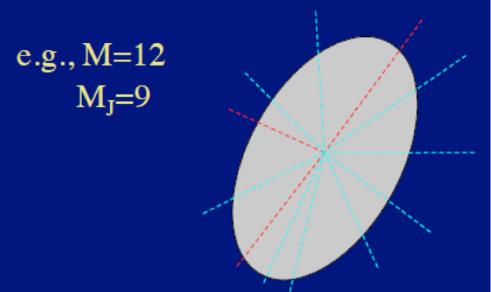
DTI Uncertainty

- We use jackknife resampling (e.g., Efron 1982)
 - Other studies have used bootstrapping (e.g., Jones 2003), or theoretical estimates (Jeong & Anderson 2008)
 - Jackknifing is efficient (just need one data set unlike bootstrap), simpler than theory, since, e.g., SNR is likely not constant across voxels

• Basically, take M acquisitions

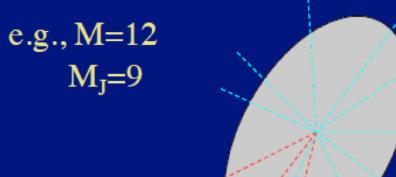


- Basically, take M acquisitions
- Randomly select M_J < M to use to calculate quantity of interest
 - standard nonlinear fits



 $[D_{11} \ D_{22} \ D_{33} \ D_{12} \ D_{13} \ D_{23}] = \dots$

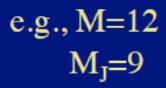
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- Repeatedly subsample large number (~10³-10⁴ times)

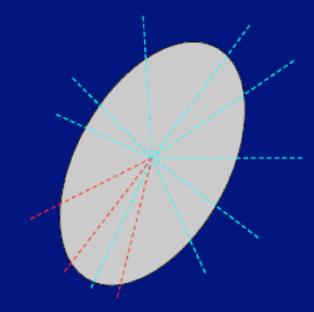


$$\begin{aligned} [D_{11} & D_{22} & D_{33} & D_{12} & D_{13} & D_{23}] = \dots \\ [D_{11} & D_{22} & D_{33} & D_{12} & D_{13} & D_{23}] = \dots \\ [D_{11} & D_{22} & D_{33} & D_{12} & D_{13} & D_{23}] = \dots \end{aligned}$$

• • • •

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 - standard nonlinear fits
- Repeatedly subsample large number (~10³-10⁴ times)
- Analyze distribution of values for estimator (mean) and confidence interval
 - sort/%iles
 - (not so efficient)
 - if Gaussian, e.g. μ±2σ
 - simple





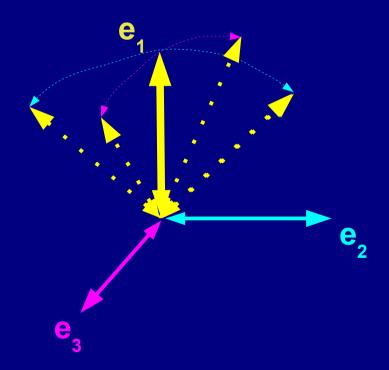
$$\begin{bmatrix} D_{11} & D_{22} & D_{33} & D_{12} & D_{13} & D_{23} \end{bmatrix} = \dots$$

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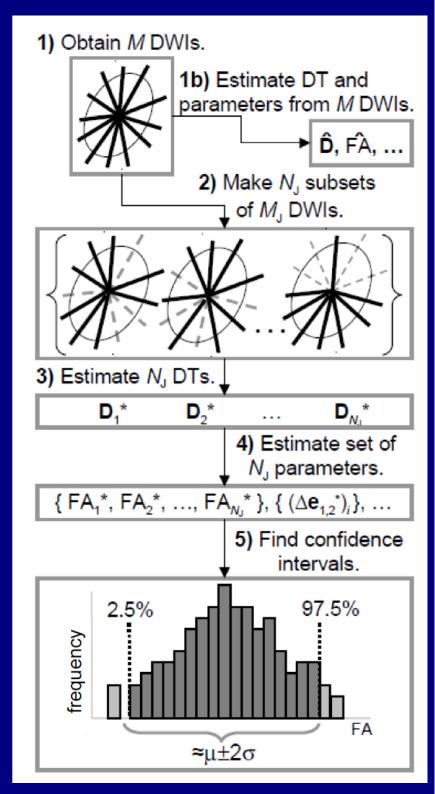
$$\begin{bmatrix} D_{11} & D_{22} & D_{33} & D_{12} & D_{13} & D_{23} \end{bmatrix} = \dots$$

Uncertainty estimation

+ 3dDWUncert estimates bias and σ of first eigenvector e₁ (main direction of diffusion), based on how much it could tip toward either e₂ or e₃:

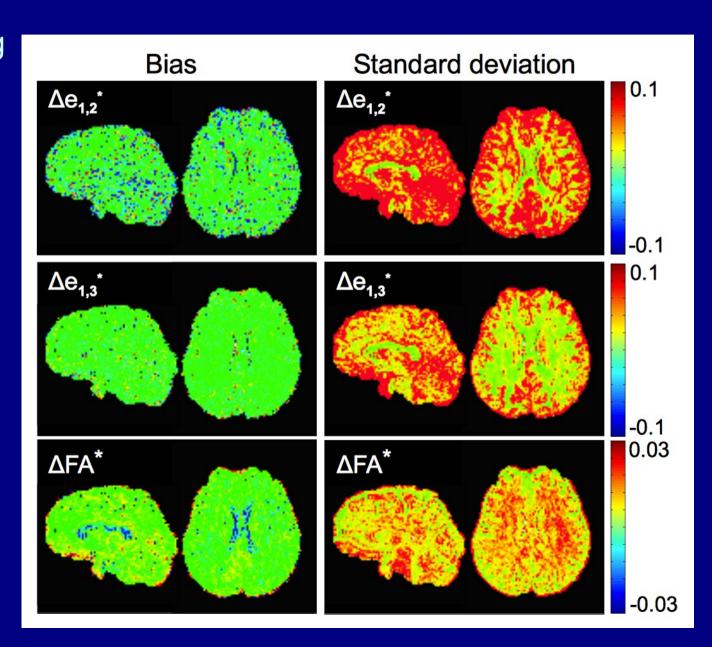


.... and the bias and σ of FA



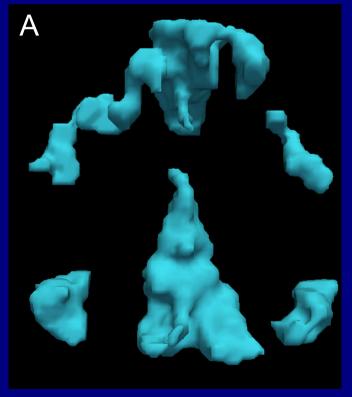
Uncertainty example

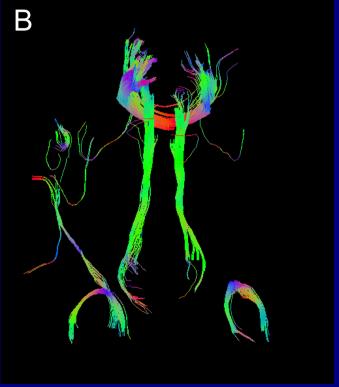
- + Can see difference in e1 uncertainty along e2 and e3
- + Tissue-dependent differences in FA uncertainty



Mini-Probabilistic Tracking

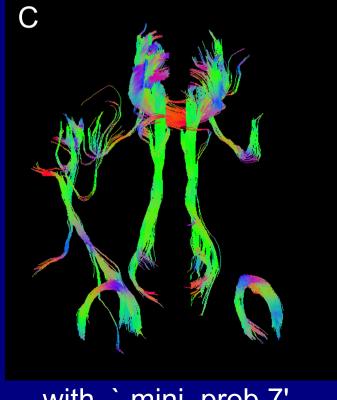
- + Full probabilistic methods generate voxelwise brain maps without linear track structure
- + 'Mini-probabilistic' tracking performs a few extra iterations of deterministic' tracking on uncertainty-perturbed data sets
 - track structure is retained,
 - results generally exhibit more robust tracks and fewer false negatives than deterministic tracking alone
 - false positives tend to be isolated and visually apparent.











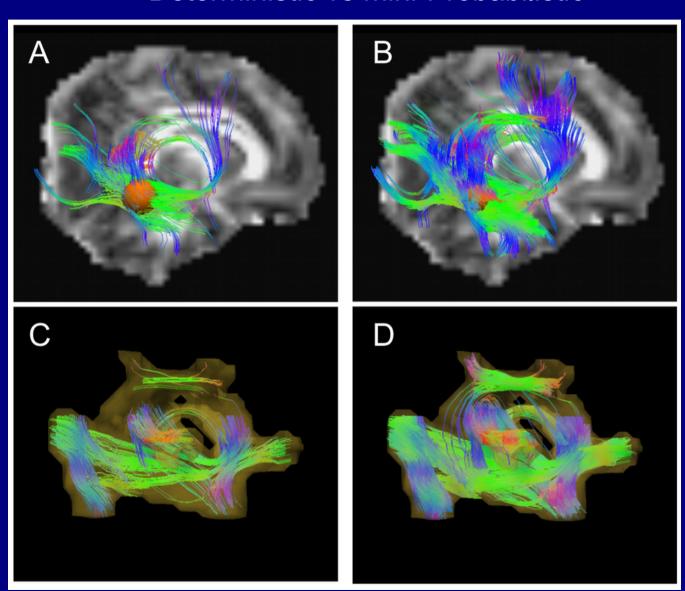
with '-mini prob 7'

Mini-Probabilistic Tracking

Deterministic vs mini-Probabilistic

Through single ROI

AND logic through network, cf with full-prob results



(Taylor et al., 2014)

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Pia Wintermark (Montreal Children's)

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