

FUNCTIONAL CONNECTIVITY STATES OF THE BRAIN **USING RESTRICTED BOLTZMANN MACHINES**

INTRODUCTION

- **Aim:** Identification of a small number of network states that describe the patterns of brain connectivity during rest.
- Methodology: Feature extraction using a restricted Boltzmann machine (RBM) with input as the dynamic functional connectivity networks (dFCN).
- Constructing dFCN relies on sliding window correlation, which helps to understand the timevarying nature of FC.

DYNAMIC FC NETWORKS



Input: Bangor rs-fMRI dataset from the 1000 Functional Connectomes Project containing 20 healthy subjects.

RBM



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OF HIDDEN NODES IN RBM



The ratio of the maximum absolute weight for each state to the overall maximum weight is plotted wrt the state (feature) index for RBMs with different *nHid*. Increasing the number of states after 6 will not result in a significant change in data representation.

states.

FC STATES

- In State1 and 3, DMN is dominant and anticorrelated with sensorimotor regions AN, VN and SMN.
- State2 is an anti-correlated module consisting of CCN with SMN, AN and SCN.
- State4 summarizes the interactions of VN with cognitive regions.
- State5 and 6 illustrate the correlations of sensorimotor regions with each other.
- FC states obtained by RBM are highly modular and representative of the patterns in dFCN.











Occurrence, the ratio of the number of times a particular state occurs to W, is calculated for each state resulting from an RBM with a fixed *nHid*. As the variance decreases, dFCNs are more likely to be uniformly distributed among the resulting



decay rate (L1-parameter). No significant change in the sparsity of the weights is observed after the weight decay rate 0.075.

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- 96:245–260, 2014.
- 24:663–676, 2014.
- AN: auditory SMN: somatomotor SCN: subcortical VN: visual CCN: cognitive control DMN: default mode BiN: bilateral limbice



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WORK

• This research can be extended by considering multiple layers to improve the accuracy of the states.

• Neurological diseases can be diagnosed by comparing the FC states and state transitions of patient and healthy populations.

ICES

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