

Voxel-Based Morphometry - The Methods

John Ashburner & Karl J. Friston

*The Wellcome Department of Cognitive Neurology, Institute of Neurology, Queen
Square, London WC1N 3BG, United Kingdom*

Running Title Voxel-Based Morphometry

Address for correspondence

Wellcome Department of Cognitive Neurology,
Functional Imaging Laboratory,
12 Queen Square,
London. WC1N 3BG
U.K.

Tel +44 (0)171 833 7472

Fax +44 (0)171 813 1420

email j.ashburner@fil.ion.ucl.ac.uk

Abstract

At its simplest, voxel-based morphometry (VBM) involves a voxel-wise comparison of the local concentration of grey matter between two groups of subjects. The procedure is relatively straight-forward, and involves spatially normalizing high resolution images from all the subjects in the study into the same stereotactic space. This is followed by segmenting the grey matter from the spatially normalized images, and smoothing the grey-matter segments. Voxel-wise parametric statistical tests are performed which compare the smoothed grey-matter images from the two groups. Corrections for multiple comparisons are made using the theory of Gaussian random fields. This paper describes the steps involved in VBM, with particular emphasis on segmenting grey matter from MR images with non-uniformity artifact. We provide evaluations of the assumptions that underpin the method, including the accuracy of the segmentation and the assumptions made about the statistical distribution of the data.

1 Introduction

A number of studies have already demonstrated structural brain differences among different patient populations using the technique of *voxel-based morphometry* (VBM) (Wright *et al.*, 1995; Vargha-Khadem *et al.*, 1998; Shah *et al.*, 1998; Wright *et al.*, 1999; Krams *et al.*, 1999; Abell *et al.*, 1999; Woermann *et al.*, 1999; Sowell *et al.*, 1999; May *et al.*, 1999). This paper summarizes, and introduces some advances to, existing methods, and provides evaluations of its components.

Studies of brain morphometry have been carried out by many researchers on a number of different populations, including patients with schizophrenia, autism, dyslexia and Turner's syndrome. Often, the morphometric measurements used in these studies have been obtained from brain regions that can be clearly defined, resulting in a wealth of findings pertaining to these particular measurements. These measures are typically volumes of unambiguous structures such as the hippocampi or the ventricles. However, there are a number of morphometric features that may be more difficult to quantify by inspection, meaning that many structural differences may be overlooked. The importance of the VBM approach is that it is not biased to one particular structure and gives an even-handed and comprehensive assessment of anatomical differences throughout the brain.

1.1 Computational Neuroanatomy

With the increasing resolution of anatomical scans of the human brain and the sophistication of image processing techniques there have emerged, recently, a large number of approaches to characterizing differences in the shape and neuroanatomical configuration of different brains. One way to classify these approaches is to broadly divide them into those that deal with differences in brain shape and those that deal with differences in

the local composition of brain tissue after macroscopic differences in shape have been discounted. The former use the deformation fields that map any individual brain onto some standard reference as the characterization of neuroanatomy, whereas the latter compare images on a voxel basis after the deformation fields have been used to spatially normalize the images. In short; computational neuroanatomic techniques can either use the deformation fields themselves or use these fields to normalize images that are then entered into an analysis of regionally specific differences. In this way, information about overall shape (deformations fields) and residual anatomic differences inherent in the data (normalized images) can be partitioned.

1.1.1 Deformation-Based and Tensor-Based Morphometry

[Figure 1 about here.]

We will use deformation-based and tensor-based morphometry in reference to methods for studying brain shapes that are based on deformation fields obtained by non-linear registration of brain images. When comparing groups, deformation-based morphometry (DBM) uses deformation fields to identify differences in the relative positions of structures within the subjects' brains, whereas we use the term tensor-based morphometry to refer to those methods that localize differences in the local shape of brain structures (see Figure 1).

Characterization using DBM can be global, pertaining to the entire field as a single observation, or can proceed on a voxel by voxel basis to make inferences about regionally specific positional differences. This simple approach to the analysis of deformation fields involves treating them as vector fields representing absolute displacements. However in this form, in addition to the shape information that is of interest, the vector fields also contain information on position and size that is likely to confound the analysis. Much

of the confounding information can be removed by global rotations, translations and a zoom of the fields in order to analyze the Procrustes shape (Bookstein, 1997a) of the brain.

DBM can be applied on a coarse (global) scale to simply identify whether or not there is a significant difference in the global shapes (based on a small number of parameters) among the brains of different populations. Generally, a single multi-variate test is performed using the parameters describing the deformations - usually after parameter reduction using singular value decomposition. The Hotelling's T^2 statistic can be used for simple comparisons between two groups of subjects (Bookstein, 1997a; Bookstein, 1999), but for more complex experimental designs, a multi-variate analysis of covariance can be used to identify differences via the Wilk's λ statistic (Ashburner *et al.*, 1998).

The alternative approach to DBM involves producing a statistical parametric map that locates any regions of significant positional differences among the groups of subjects. An example of this approach involves using a voxel-wise Hotelling's T^2 test on the vector field describing the displacements (Thompson & Toga, 1999; Gaser *et al.*, 1999) at each and every voxel. The significance of any observed differences can be assessed by assuming that the statistic field can then be approximated by a T^2 random field (Cao & Worsley, 1999). Note that this approach does not directly localize brain regions with different shapes, but rather identifies those brain structures that are in relatively different positions.

In order to localize structures whose shapes differ between groups, some form of tensor-based morphometry (TBM) is required to produce statistical parametric maps of regional shape differences. A deformation field that maps one image to another can be considered as a discrete vector field. By taking the gradients at each element of the field, a Jacobian matrix field is obtained, where each element is a tensor describing the relative positions of the neighboring elements. Morphometric measures derived from this tensor field can be used to locate regions with different shapes. The field obtained by taking the

determinants at each point gives a map of the structure volumes relative to those of a reference image (Freeborough & Fox, 1998; Gee & Bajcsy, 1999). Statistical parametric maps of these determinant fields (or possibly their logs) can then be used to compare the anatomy of groups of subjects. Other measures derived from the tensor fields have also been used by other researchers, and these are described by Thompson and Toga (Thompson & Toga, 1999).

1.1.2 Voxel-Based Morphometry

The second class of techniques, that are applied to some scalar function of the normalized image, are referred to as voxel-based morphometry. The most prevalent example of this sort of approach, described in this paper, is the simple statistical comparison of grey matter partitions following segmentation. Other variants will be discussed later. Currently, the computational expense of computing very high resolution deformation fields (required for TBM at small scales) makes voxel-based morphometry a simple and pragmatic approach to addressing small scale differences that is within the capabilities of most research units.

1.2 Overview

This paper describes the steps involved in voxel-based morphometry using the *SPM99* package (available from <http://www.fil.ion.ucl.ac.uk>). Following this we provide evaluations of the assumptions that underpin the method. This includes the accuracy of the segmentation, and the assumptions made about the normality of the data. The paper ends with a discussion about the limitations of the method, and some possible future directions.

2 Voxel-Based Morphometry

Voxel-based morphometry of MRI data involves spatially normalizing all the images to the same stereotactic space, extracting the gray matter from the normalized images, smoothing, and finally performing a statistical analysis to localize, and make inferences about, group differences. The output from the method is a statistical parametric map showing regions where grey matter concentration differs significantly between groups.

2.1 Spatial Normalization

Spatial normalization involves transforming all the subjects' data to the same stereotactic space. This is achieved by registering each of the images to the same template image, by minimizing the residual sum of squared differences between them. In our implementation, the first step, in spatially normalizing each image, involves matching the image by estimating the optimum twelve parameter affine transformation (Ashburner *et al.*, 1997). A Bayesian framework is used, whereby the maximum a posteriori (MAP) estimate of the spatial transformation is made using prior knowledge of the normal variability of brain size. The second step accounts for global nonlinear shape differences, which are modeled by a linear combination of smooth spatial basis functions (Ashburner & Friston, 1999). The nonlinear registration involves estimating the coefficients of the basis functions that minimize the residual squared difference between the image and template, while simultaneously maximizing the smoothness of the deformations.

It should be noted that this method of spatial normalization does not attempt to match every cortical feature exactly, but merely corrects for global brain shape differences. If the spatial normalization was perfectly exact, then all the segmented images would appear identical and no significant differences would be detected: VBM tries to detect differences in the regional concentration of grey matter at a local scale having discounted

global shape differences.

It is important that the quality of the registration is as high as possible, and that the choice of the template image does not bias the final solution. An ideal template would consist of the average of a large number of MR images that have been registered to within the accuracy of the spatial normalization technique. The spatially normalized images should have a relatively high resolution (1mm or 1.5mm isotropic voxels), so that the gray matter extraction method (described next) is not excessively confounded by partial volume effects, where voxels contain a mixture of different tissue types.

2.2 Image Partitioning with Correction for Smooth Intensity Variations

The spatially normalized images are next partitioned into gray matter (GM), white matter (WM), cerebro-spinal fluid (CSF), and three other background classes, using a modified mixture model cluster analysis technique. We have extended a previously described tissue classification method (Ashburner & Friston, 1997) so that it includes a correction for image intensity non-uniformity that arises for many reasons in MR imaging. Because the tissue classification is based on voxel intensities, the partitions derived using the older method can be confounded by these smooth intensity variations. Details of the improved segmentation method are provided in the appendix.

2.3 Pre-processing of Grey Matter Segments

The grey matter images are now smoothed by convolving with an isotropic Gaussian kernel. This makes the subsequent voxel by voxel analysis comparable to a region of interest approach, because each voxel in the smoothed images contains the average con-

centration of gray matter from around the voxel (where the region around the voxel is defined by the form of the smoothing kernel). This is often referred to as “grey matter density”, but should not be confused with cell packing density measured cytoarchitectonically. We will refer to “concentration” to avoid confusion. By the central limit theorem, smoothing also has the effect of rendering the data more normally distributed, increasing the validity of parametric statistical tests. Whenever possible, the size of the smoothing kernel should be comparable to the size of the expected regional differences between the groups of brains. The smoothing step also helps to compensate for the inexact nature of the spatial normalization.

2.3.1 Logit Transform

In effect, each voxel in the smoothed image segments represents the local concentration of the tissue (between zero and one). Often, prior to performing statistical tests on measures of concentration, the data are transformed using the *logit* transformation in order to render them more normally distributed. The logit transformation of a concentration p is given by:

$$\text{logit}(p) = \frac{1}{2} \log_e \left(\frac{p}{1-p} \right)$$

For concentrations very close to either one or zero, it can be seen that the logit transform rapidly approaches infinite values. Because of this instability, it is advisable to exclude voxels from subsequent analyses that are too close to one or the other extreme. An improved model for the data can be estimated using logistic regression (Taylor *et al.*, 1998), but this is beyond the scope of this paper as it requires iterative re-weighted least-squares methods. Whether or not the logit transform is a necessary processing step for voxel-based morphometry will be addressed later.

2.4 Statistical Analysis

Statistical analysis using the general linear model (GLM) is used to identify regions of grey matter concentration that are significantly related to the particular effects under study (Friston *et al.*, 1995b). The GLM is a flexible framework that allows many different tests to be applied, ranging from group comparisons and identifying regions of grey matter concentration that are related to specified covariates such as disease severity or age, to complex interactions between different effects of interest. Standard parametric statistical procedures (t-tests and F-tests) are used to test the hypotheses, so they are valid providing the residuals, after fitting the model, are independent and normally distributed. If the statistical model is appropriate there is no reason why the residuals should not be independent, but there are reasons why they may not be normally distributed. The original segmented images contain values between zero and one, where most of the values are very close to either of the extremes. Only by smoothing the segmented images does the behavior of the residuals become more normally distributed.

Following the application of the GLM, the significance of any differences is ascertained using the theory of Gaussian random fields (Worsley *et al.*, 1996; Friston *et al.*, 1995a). A voxel-wise statistical parametric map (SPM) comprises the result of many statistical tests, and it is necessary to correct for these multiple dependent comparisons.

3 Evaluations

A number of assumptions need to hold on order for VBM to be valid. First of all, we must be measuring the right thing. In other words, the segmentation must correctly identify grey and white matter, and consequently we have included an evaluation of the segmentation method. Also, confounding effects must be eliminated or modeled as far

as possible. For example, it is not valid to compare two different groups if the images were acquired on two different scanners, or with different MR sequences. In cases such as this, any group differences may be attributable to scanner differences rather than to the subjects themselves. Subtle but systematic differences in image contrast or noise can easily become statistically significant when a large number of subjects are entered in a study. A third issue of validity concerns the assumptions required by the statistical tests. For parametric tests, it is important that the data are normally distributed. If the data are not well behaved, then it is important to know what the effects are on the statistical tests. If there is doubt about the validity of the assumptions, it is better to use a non-parametric statistical analysis (Holmes *et al.*, 1996).

3.1 Evaluation of Segmentation

In order to provide a qualitative example of the segmentation, Figure 2 shows a single sagittal slice through six randomly chosen T1-weighted images. The initial registration to the prior probability images was via an automatically estimated 12-parameter affine transformation (Ashburner *et al.*, 1997). The images were automatically segmented using the method described here, and contours of extracted grey and white matter are shown superimposed on the images.

[Figure 2 about here.]

In order to function properly, the segmentation method requires good contrast between the different tissue types. However, many central grey matter structures have image intensities that are almost indistinguishable from that of white matter, so the tissue classification is not very accurate in these regions. Another problem is that of partial volume. Because the model assumes that all voxels contain only one tissue type, the voxels that contain a mixture of tissues may not be modeled correctly. In particular,

those voxels at the interface between white matter and ventricles will often appear as grey matter. This can be seen to a small extent in Figures 2 and 3.

3.1.1 A Comparison of the Segmentation - With and Without Non-uniform Sensitivity Correction

[Figure 3 about here.]

Segmentation was evaluated using a number of simulated images ($181 \times 217 \times 181$ voxels of $1 \times 1 \times 1$ mm) of the same brain generated by the BrainWeb simulator (Cocosco *et al.*, 1997; Kwan *et al.*, 1996; Collins *et al.*, 1998) with 3% noise (relative to the brightest tissue in the images). The contrasts of the images simulated T1-weighted, T2-weighted and proton density (PD) images (all with 1.5 Tesla field strength), and they were segmented individually and in a multi-spectral manner ¹. The T1-weighted image was simulated as a spoiled FLASH sequence, with a 30° flip angle, 18ms repeat time, 10ms echo time. The T2 and PD images were simulated by a dual echo spin echo, early echo technique, with 90° flip angle, 3300ms repeat time and echo times of 35 and 120ms. Three different levels of image non-uniformity were used: 0%RF - which assumes that there is no intensity variation artifact, 40%RF - that assumes a fairly typical amount of non-uniformity, and 100%RF which is more nonuniformity than would normally be expected. The simulated images were segmented, both with and without sensitivity correction (see appendix for further details). Three partitions were considered in the evaluation: grey matter, white matter and other (not grey or white), and each voxel was assigned to the most likely partition. Because the data from which the simulated images were derived was available, it was possible to compare the segmented images with images of “true” grey and white matter using the κ statistic (a measure of inter-rater agreement):

¹Note that different modulation fields that account for non-uniformity (see Appendix) were assumed for each image of the multi-spectral data-sets.

$$\kappa = \frac{p_o - p_e}{1 - p_e}$$

where p_o is the observed proportion of agreement, and p_e is the expected proportion of agreements by chance. If there are N observations in K categories, the observed proportional agreement is:

$$p_o = \sum_{k=1}^K f_{kk}/N$$

where f_{kk} is the number of agreements for the k th category. The expected proportion of agreements is given by:

$$p_e = \sum_{k=1}^K r_k c_k / N^2$$

where r_k and c_k are the total number of voxels in the k th class for both the “true” and estimated partitions.

[Table 1 about here.]

The classification of a single plane of the simulated T1 weighted BrainWeb image with the nonuniformity is illustrated in Figure 3. It should be noted that no pre-processing to remove scalp or other non-brain tissue was performed on the image. In theory, the segmentation method should produce slightly better results if this non-brain tissue is excluded from the computations. As the algorithm stands, a small amount of non-brain tissue remains in the grey matter segment, which has arisen from voxels that lie close to grey matter and have similar intensities.

The resulting κ statistics from segmenting the different simulated images are shown in table 1. These results show that the non-uniformity correction made little difference to the tissue classification of the images without any non-uniformity artifact. For images

containing non-uniformity artifact, the segmentations using the correction were of about the same quality as the segmentations without the artifact, and very much better than the segmentations without the correction.

A by-product of the segmentation is the estimation of an intensity nonuniformity field. Figure 4 shows a comparison of the intensity nonuniformity present in a simulated T1 image with 100% nonuniformity (created by dividing noiseless simulated images with 100% nonuniformity and no nonuniformity) with that recovered by the segmentation method. A scatterplot of “true” versus recovered nonuniformity shows a straight line, suggesting that the accuracy of the estimated nonuniformity is very good.

[Figure 4 about here.]

3.1.2 Stability With Respect to Misregistration with the *A Priori* Images

In order for the Bayesian segmentation to work properly, the image volume must be in register with a set of *a priori* probability images used to instantiate the priors. Here we examine the effects of misregistration on the accuracy of the segmentation, by artificially translating (in the left-right direction) the prior probability images by different distances prior to segmenting the whole simulated volume. The 1mm slice thickness, 40% non-uniformity, and 3% noise simulated T1-weighted image (described above) was used for the segmentation, which included the non-uniformity correction. The κ statistic was computed with respect to the “true” grey and white matter for the different translations, and the results are plotted in Figure 5.

In addition to illustrating the effect of misregistration, this also gives an indication of how far a brain can deviate from the normal population of brains (that constitute the prior probability images) in order for it to be segmented adequately. Clearly, if the brain can not be adequately registered with the probability images, then the segmentation will

not be as accurate. This also has implications for severely abnormal brains, as these are more difficult to register with the images that represent the prior probabilities of voxels belonging to different classes. Segmenting these abnormal brains can be a problem for the algorithm, as the prior probability images are based on normal healthy brains. Clearly the profile in Figure 5 depends on the smoothness or resolution of the *a priori* images. By not smoothing the *a priori* images, the segmentation would be optimal for normal, young and healthy brains. However, the prior probability images may need to be smoother in order to encompass more variability when patient data are to be analyzed.

[Figure 5 about here.]

3.2 Evaluation of the Assumptions About Normally Distributed Data

The statistics used to identify structural differences make the assumption that the residuals after fitting the model are normally distributed. Statistics can not prove that data are normally distributed - it can only be used to disprove the hypothesis that they are normal. For normally distributed data, a *Q-Q plot* of the data should be a straight line. A significant deviations from a straight line can be identified by computing the correlation coefficient of the plot as described by Johnson and Wichern (1998).

A Q-Q plot is a plot of the sample quantile versus the sample quantile that would be expected if the residuals were normally distributed. Computing the sample quantile involves first sorting the J residuals (after dividing by the square root of the diagonal elements of the residual forming matrix) into increasing order (x_1, x_2, \dots, x_J) . The inverse cumulative distribution of each of the J elements is then computed as:

$$q_j = \sqrt{2} \operatorname{erfinv} \left(2 \frac{j - \frac{3}{8}}{J + \frac{1}{4}} - 1 \right)$$

where *erfinv* is the inverse error function. A Q-Q plot is simply a plot of \mathbf{q} versus \mathbf{x} , and should be a straight line if the data in \mathbf{x} are normally distributed. To test normality, the correlation coefficient for the Q-Q plot is used to test for any significant deviation from a straight line. A lookup table is used to reject the null hypothesis if the correlation coefficient falls below a particular value, given a certain sample size. However, in this paper we simply use the correlation coefficient as a “normality statistic”, and examine its distribution over voxels.

The data used to test the assumptions were T1 weighted MRI scans of 50 normal male right handed subjects aged between 17 and 62 (median 26, mean 29), who’s structural scans had been acquired as part of an ongoing program of functional imaging research. The scans were performed on a Siemens MAGNETOM Vision scanner operating at 2 Tesla. An MPRAGE sequence was used with a 12° tip angle, 9.7ms repeat time, 4ms echo time and 0.6ms inversion time, to generate sagittal images of the whole brain with voxel sizes of $1 \times 1 \times 1.5$ mm. The images were spatially normalized, segmented and smoothed using a Gaussian kernel of 12mm full width at half maximum (FWHM).

Voxel-by-voxel correlation coefficients of the Q-Q plots were computed over all voxels of the data where the mean intensity over all images was greater than 0.05. Voxels of low mean intensity were excluded from the computations, because they would not be included in the VBM analysis. This is because we know that these low intensity voxels are most likely to deviate most strongly from the assumptions about normality. Q-Q plots were computed using two different linear models. The first model involved looking at the residuals after fitting the mean, whereas the second was more complex, in that it also modeled the confounding effect of the total amount of grey matter in each volume. Q-Q plots were computed both with and without the logit transform. Histograms of the correlation coefficients were computed over the whole image volumes (717191 voxels), along with histograms generated from simulated Gaussian noise. These are plotted in

Figure 6, and show that the data does deviate slightly from normally distributed. The logit transform appeared to make the residuals slightly more normally distributed. The normality of the residuals was also improved by modeling the total amount of grey matter as a confounding effect.

[Figure 6 about here.]

3.3 Testing the Rate of False Positives using Randomization

The previous section showed that the data are not quite normally distributed, but it does not show how the non-normality influences any subsequent statistics.

Ultimately, we wish to protect against false-positive results, and in this part of the paper, we test how frequently they arise. The statistics were evaluated using the same pre-processed structural brain images of 50 subjects as were used in the previous section. The subjects were randomly assigned, with replacement, to two groups of 12 and 38, and statistical tests performed using SPM99b (Wellcome Department of Cognitive Neurology, London, UK) to compare the groups. The numbers in the groups were chosen as many studies typically involve comparing about a dozen patients with a larger group of control subjects. This was repeated a total of 50 times, looking for both significant increases and decreases in the grey matter concentration of the smaller group. The end result is a series of 100 parametric maps of the t-statistic. Within each of these SPMs, the local maxima of t-statistic field were corrected for the number of dependent tests performed, and a p value assigned to each (Friston *et al.*, 1995a). Using a corrected threshold of $p=0.05$, we would expect about five local maxima with p values below this threshold by chance alone. Over the 100 SPMs, there were six local maxima with corrected p values below 0.05. The same 50 subjects were randomly assigned to either of the two groups and the statistics performed a further 50 times, but this time modeling the total

amount of grey matter as a confounding effect. The results of this analysis produced four significant local maxima with corrected p values below 0.05. These results suggest that the inference procedures employed are robust to the mild deviations from normality incurred by using smooth image partitions.

Another test available within SPM is based on the number of connected voxels in a cluster defined by a pre-specified threshold (extent statistic). In order to be valid, this test requires the smoothness of the residuals to be spatially invariant, but this is known not to be the case by virtue of the highly non-stationary nature of the underlying neuro-anatomy. As noted by Worsley (Worsley *et al.*, 1999), this non-stationary smoothness leads to inexact p values:

“The reason is simply this: by chance alone, large size clusters will occur in regions where the images are very smooth, and small size clusters will occur in regions where the image is very rough. The distribution of cluster sizes will therefore be considerably biased towards more extreme cluster sizes, resulting in more false positive clusters in smooth regions. Moreover, true positive clusters in rough regions could be overlooked because their sizes are not large enough to exceed the critical size for the whole region.”

Corrected probability values were assigned to each cluster based on the number of connected voxels exceeding a t value of 3.27 (spatial extent test). Approximately five significant clusters would be expected from the 100 SPMs if the smoothness was stationary. Eighteen significant clusters were found when the total amount of grey matter was not modeled as a confound, and fourteen significant clusters were obtained when it was. These tests confirmed that the voxel-based extent statistic should not be used in VBM.

Under the null hypothesis, repeatedly computed t-statistics should assume the probability density function of the Student’s t distribution. This was verified using the

computed t-fields, where each t-field contains 717191 voxels. Plots of the resulting histograms are shown in Figure 7. The top row presents distributions when global differences in grey matter were not removed as a confound. Note that global variance biases the distributions of t values from any particular comparison.

[Figure 7 about here.]

Further experiments were performed to test whether false positives occurred evenly throughout the brain, or were more specific to particular regions. The tests were done on a single slice through the same 50 subjects pre-processed brain images, but used the total count of grey matter in the brains as a confound. Each subject was randomly assigning to two groups of 12 and 38, pixel by pixel two-tailed t-tests were done, and locations of t-scores higher than 3.2729, or lower than -3.2729 were recorded (corresponding to an uncorrected probability of 0.002). This procedure was repeated 10000 times, and Figure 8 shows an image of the number of false positives occurring at each of the 10693 pixels. Visually, the false positives appear to be uniformly distributed. According to the theory, the number of false positives occurring at each pixel should be 20 (10000×0.002). An average of 20.171 false positives were found, showing that the validity of statistical tests based on uncorrected t statistics are not severely compromised.

[Figure 8 about here.]

4 Discussion

4.1 Possible Improvements to the Segmentation

One of the analytic components described in this paper is an improved method of segmentation that is able to correct for image non-uniformity that is smooth in all three

dimensions. The method has been found to be robust and accurate for high quality T1 weighted images, but is not beyond improvement. Currently, each voxel is assigned a probability of belonging to a particular tissue class based only on its intensity and information from the prior probability images. There is a great deal of other knowledge that could be incorporated into the classification. For example, we know that if all a voxel's neighbors are grey matter, then there is a high probability that it should also be grey matter. Other researchers have successfully used Markov random field models to include this information in the tissue classification model (Vandermeulen *et al.*, 1996; Van Leemput *et al.*, 1999b). A very simple prior, that can be incorporated, is the relative intensity of the different tissue types. For example, if we are segmenting a T1 weighted image, we know that the white matter should have a higher intensity than the grey matter, which in turn should be more intense than the CSF. When computing the means for each cluster, this prior information could sensibly be used to bias the estimates.

4.2 The Effect of Spatial Normalization

Because of the nonlinear spatial normalization, the volumes of certain brain regions will grow, whereas others will shrink. This has implications for the interpretation of what VBM is actually testing for. The objective of VBM is to identify regional differences in the concentration of a particular tissue (gray or white matter). In order to preserve the actual amounts of grey matter within each structure, a further processing step can be incorporated that multiplies the partitioned images by the relative voxel volumes. These relative volumes are simply the Jacobian determinants of the deformation field. This augmented VBM can therefore be considered as a combination of VBM and TBM, where the TBM employs the testing of the Jacobian determinants. VBM can be thought of as comparing the relative concentration of grey matter (i.e., the proportion of grey matter to other tissue types within a region). With the adjustment for volume change,

VBM would be comparing the absolute amounts of grey matter in the different regions. As mentioned in Section 2.1, if the spatial normalization was perfect, then no grey matter differences would be observed if a volume change adjustment was not applied. In this instance, all the information would be in the deformation fields and would be tested using TBM. However, if the spatial normalization is only removing global differences in brain shape, the results of VBM show relative grey matter concentration differences. As faster and more precise registration methods emerge, then a TBM volume change adjustment may become more important. It is envisaged that, by incorporating this correction, a continuum will arise with simple VBM (with low resolution spatial normalization) at one end of the methodology spectrum, and statistical tests based on Jacobian determinants at the other (with high resolution spatial normalization).

Another perspective on what VBM is actually comparing can be obtained by considering how a similar analysis would be done using volumes of interest (VOIs). To simplify the analogy, consider that the smoothing kernel is the shape of a sphere (values of one inside, and zero outside) rather than a 3D Gaussian point spread function. After convolving an image with this kernel, each voxel in the smoothed image will contain a count of the grey matter voxels from the surrounding spherical VOI. Now consider the effects of the spatial normalization, and where the voxels within each VOI come from the original grey matter images. The spheres can be thought of as being projected on to the original anatomy, but in doing so, their shapes and sizes will be distorted. Without multiplying by the relative voxel sizes, what would be measured would be the proportion of grey matter within each projected VOI (relative to other tissue types). With the multiplication, the total amount of grey matter within the VOI is being measured.

4.3 Multivariate Voxel-Based Morphometry

Ideally, a procedure like VBM should be able to automatically identify any structural abnormalities in a single brain image. However, even with many hundreds of subjects in a database of controls, as it stands, the method may not be powerful enough to detect subtle abnormalities in individuals. A possibly more powerful procedure would be to use some form of voxel-wise multi-variate approach. Within a multi-variate framework, in addition to images of grey matter concentration, other image features would also be included. The first obvious feature to be included would be white matter concentration. Other features could include local indices of gyrification such as the curvature of the grey matter segment, image gradients, and possibly information from the spatial normalization procedure. With a larger data-base of controls, more image features can be included without seriously impacting on the degrees of freedom of the model. The Hotelling's T^2 test could be used to perform simple comparisons between two groups. However for more complex models, the more general multi-variate analysis of covariance would be necessary. By doing this, VBM and tensor-based morphometric techniques can be combined in order to provide a more powerful method of localizing regional abnormalities.

5 Conclusions

This paper has considered the various components of voxel-based morphometry. We have described and evaluated an improved method of MR image segmentation, showing that the modifications do improve the segmentation of images with intensity non-uniformity artifact. In addition, we tested some of the assumptions necessary for the parametric statistical tests used by SPM99 to implement VBM. We demonstrated that the data used for these analyses are not exactly normally distributed. However, no evidence was found to suppose that (with 12mm FWHM smoothed data) uncorrected statistical

tests, or corrected statistical inferences based on peak height are invalid. We found that the statistic based on cluster spatial extent is not valid for VBM analysis, suggesting a violation of the stationariness assumptions upon which this test is based. Until the spatial extent test has been modified to accommodate non-stationary smoothness, then VBM should not use cluster size to assess significance (the peak height test has already been modified).

Note

Most of the software for the methods described in this paper are available from the authors as part of the SPM99 package.

Acknowledgments

Many thanks to discussions with John Sled and Alex Zijdenbos at McGill University who (back in 1996) provided the original inspiration for the image non-uniformity correction method described in the appendix. The idea led on from work by Alex Zijdenbos on estimating non-uniformity from white matter in the brain images. Thanks also to Keith Worsley for further explaining the work of Jon Taylor, Chris Cocosco for providing information on the MRI simulator, Peter Neelin and Kate Watkins for information about the ICBM probability maps, and to Tina Good and Ingrid Johnsrude for the data used in the evaluations. This work was supported by the Wellcome Trust.

References

- Abell, F., Krams, M., Ashburner, J., Passingham, R. E., Friston, K. J., Frackowiak, R. S. J., Happé, F., Frith, C. D., & Frith, U. 1999. The neuroanatomy of autism: A voxel based whole brain analysis of structural scans. *NeuroReport*, **10**(8), 1647–1651.
- Ashburner, J., & Friston, K. J. 1997. Multimodal image coregistration and partitioning - a unified framework. *NeuroImage*, **6**(3), 209–217.
- Ashburner, J., & Friston, K. J. 1999. Nonlinear spatial normalization using basis functions. *Human Brain Mapping*, **7**(4), 254–266.
- Ashburner, J., Neelin, P., Collins, D. L., Evans, A. C., & Friston, K. J. 1997. Incorporating prior knowledge into image registration. *NeuroImage*, **6**, 344–352.
- Ashburner, J., Hutton, C., Frackowiak, R.S.J., Johnsrude, I., Price, C., & Friston, K. J. 1998. Identifying global anatomical differences: Deformation-based morphometry. *Human Brain Mapping*, **6**(5), 348–357.
- Bookstein, F. L. 1997a. Landmark methods for forms without landmarks: Morphometrics of group differences in outline shape. *Medical Image Analysis*, **1**(3), 225–243.
- Bookstein, F. L. 1997b. Quadratic variation of deformations. *Pages 15–28 of: Duncan, J., & Gindi, G. (eds), Information Processing in Medical Imaging*. Berlin, Heidelberg, New York: Springer-Verlag.
- Bookstein, F. L. 1999. *Brain Warping*. Academic Press. Chap. 10, pages 157–182.
- Cao, J., & Worsley, K. J. 1999. The geometry of the Hotelling’s T^2 random field with applications to the detection of shape changes. *Annals of Statistics*, **27**(3), 925–942.
- Cocosco, C.A., Kollokian, V., Kwan, R.K.-S., & Evans, A.C. 1997. Brainweb: Online interface to a 3D MRI simulated brain database. *NeuroImage*, **5**(4), S425.

- Collins, D.L., Zijdenbos, A.P., Kollokian, V., Sled, J.G., Kabani, N.J., Holmes, C.J., & Evans, A.C. 1998. Design and construction of a realistic digital brain phantom. *IEEE Transactions on Medical Imaging*, **17**(3), 463–468.
- Evans, A. C., Collins, D. L., & Milner, B. 1992. An MRI-based stereotactic atlas from 250 young normal subjects. *Soc. Neurosci. Abstr.*, **18**, 408.
- Evans, A. C., Collins, D. L., Mills, S. R., Brown, E. D., Kelly, R. L., & Peters, T. M. 1993. 3D statistical neuroanatomical models from 305 MRI volumes. *Pages 1813–1817 of: Proc. IEEE-Nuclear Science Symposium and Medical Imaging Conference*.
- Evans, A. C., Kamber, M., Collins, D. L., & Macdonald, D. 1994. An MRI-based probabilistic atlas of neuroanatomy. *Pages 263–274 of: Shorvon, S., Fish, D., Andermann, F., Bydder, G. M., & H, Stefan (eds), Magnetic Resonance Scanning and Epilepsy*. NATO ASI Series A, Life Sciences, vol. 264. Plenum Press.
- Freeborough, P. A., & Fox, N. C. 1998. Modelling brain deformations in alzheimer disease by fluid registration of serial MR images. *J. Comput. Assist. Tomogr.*, **22**(5), 838–843.
- Friston, K. J., Holmes, A. P., Poline, J.-B., Price, C. J., & Frith, C. D. 1995a. Detecting activations in PET and fMRI: Levels of inference and power. *NeuroImage*, **4**, 223–235.
- Friston, K. J., Holmes, A. P., Worsley, K. J., Poline, J.-B., Frith, C. D., & Frackowiak, R. S. J. 1995b. Statistical parametric maps in functional imaging: A general linear approach. *Human Brain Mapping*, **2**, 189–210.
- Gaser, C., Volz, H.-P., Kiebel, S., Riehemann, S., & Sauer, H. 1999. Detecting structural changes in whole brain based on nonlinear deformations - application to schizophrenia research. *NeuroImage*, **10**, 107–113.
- Gee, J. C., & Bajcsy, R. K. 1999. *Brain Warping*. Academic Press. Chap. 11, pages 183–198.
- Holmes, A. P., Blair, R. C., J, D. G. Watson, & Ford, I. 1996. Non-parametric analysis of

- statistic images from functional mapping experiments. *Journal of Cerebral Blood Flow and Metabolism*, **16**, 7–22.
- Johnson, R. A., & Wichern, D. W. 1998. *Applied multivariate statistical analysis. fourth edition*. Upper Saddle River, NJ: Prentice-Hall.
- Krams, M., Quinton, R., Ashburner, J., Friston, K. J., Frackowiak, R. S., Bouloux, P. M., & Passingham, R. E. 1999. Kallmann’s syndrome: mirror movements associated with bilateral corticospinal tract hypertrophy. *Neurology*, **52**(4), 816–822.
- Kwan, R. K.-S., Evans, A. C., & Pike, G. B. 1996. An extensible MRI simulator for post-processing evaluation. *Pages 135–140 of: Conference on Visualisation in Biomedical Computing*.
- May, A., Ashburner, J., Büchel, C., McGonigle, D. J., Friston, K. J., Frackowiak, R. S. J., & Goadsby, P. J. 1999. Correlation between structural and functional changes in brain in an idiopathic headache syndrome. *Nature Medicine*, **5**(7), 836–838.
- Shah, P. J., Ebmeier, K. P., Glabus, M. F., & Goodwin, G. 1998. Cortical grey matter reductions associated with treatment-resistant chronic unipolar depression. *British Journal of Psychiatry*, **172**, 527–532.
- Sled, J. G., Zijdenbos, A. P., & Evans, A. C. 1998. A non-parametric method for automatic correction of intensity non-uniformity in MRI data. *IEEE Transactions on Medical Imaging*, **17**(1), 87–97.
- Sowell, E. R., Thompson, P. M., Holmes, C. J., Batth, R., Jernigan, T. L., & Toga, A. W. 1999. Localizing age-related changes in brain structure between childhood and adolescence using statistical parametric mapping. *NeuroImage*, **9**, 587–597.
- Taylor, J., Worsley, K. J., Zijdenbos, A. P., Paus, T., & Evans, A. C. 1998. Detecting anatomical changes using logistic regression of structure masks. *NeuroImage*, **7**, S753.

- Thompson, P. M., & Toga, A. W. 1999. *Brain Warping*. Academic Press. Chap. 18, pages 311–336.
- Van Leemput, K., Maes, F., Vandermeulen, D., & Suetens, P. 1999a. Automated model-based bias field correction of MR images of the brain. *IEEE Transactions on Medical Imaging*, **18**(10), 885–896.
- Van Leemput, K., Maes, F., Vandermeulen, D., & Suetens, P. 1999b. Automated model-based tissue classification of MR images of the brain. *IEEE Transactions on Medical Imaging*, **18**(10), 897–908.
- Vandermeulen, D., Descombes, X., Suetens, P., & Marchal, G. 1996. Unsupervised regularized classification of multi-spectral MRI. *Pages 229–234 of: Proceedings of the International Conference on Visualization in Biomedical Computing*.
- Vargha-Khadem, F., Watkins, K. E., Price, C. J., Ashburner, J., Alcock, K. J., Connelly, A., Frackowiak, R. S. J., Friston, K. J., Pembrey, M. E., Mishkin, M., Gadian, D. G., & Passingham, R. E. 1998. Neural basis of an inherited speech and language disorder. *Proc. Natl. Acad. Sci. USA*, **95**, 12695–12700.
- Woermann, F. G., Free, S. L., Koepp, M. J., Ashburner, J., & Duncan, J. D. 1999. Voxel-by-voxel comparison of automatically segmented cerebral grey matter - a rater-independent comparison of structural MRI in patients with epilepsy. *NeuroImage*, **10**, 373–384.
- Worsley, K. J., Marrett, S., Neelin, P., Vandal, A. C., Friston, J. J., & Evans, A. C. 1996. A unified statistical approach for determining significant voxels in images of cerebral activation. *Human Brain Mapping*, **4**, 58–73.
- Worsley, K. J., Andermann, M., Koulis, T., MacDonald, D., & Evans, A. C. 1999. Detecting changes in non-isotropic images. *Human Brain Mapping*, **8**(2), 98–101.
- Wright, I. C., McGuire, P. K., Poline, J.-B., Travere, J. M., Murray, R. M., Frith, C. D., Frackowiak, R. S. J., & Friston, K. J. 1995. A voxel-based method for the statistical

analysis of gray and white matter density applied to schizophrenia. *NeuroImage*, **2**, 244–252.

Wright, I. C., Ellison, Z. R., Sharma, T., Friston, K. J., Murray, R. M., & McGuire, P. K. 1999. Mapping of grey matter changes in schizophrenia. *Schizophrenia Research*, **35**, 1–14.

Appendix

A The Tissue Classification Method

Although we actually use a three dimensional implementation of the tissue classification method, that can also be applied to multi-spectral images, we will simplify the explanation of the algorithm by describing its application to a single two dimensional image.

The tissue classification model makes a number of assumptions. The first is that each of the $I \times J$ voxels of the image (\mathbf{F}) has been drawn from a known number (K) of distinct tissue classes (clusters). The distribution of the voxel intensities within each class is normal (or multi-normal for multi-spectral images) and initially unknown. The distribution of voxel intensities within cluster k is described by the number of voxels within the cluster (h_k), the mean for that cluster (v_k), and the variance around that mean (c_k). Because the images are spatially normalized to a particular stereotactic space, prior probabilities of the voxels belonging to the gray matter (GM), white matter (WM) and cerebro-spinal fluid (CSF) classes are known. This information is in the form of probability images – provided by the Montréal Neurological Institute (Evans *et al.*, 1992; Evans *et al.*, 1993; Evans *et al.*, 1994) – which have been derived from the MR images of 152 subjects (66 female and 86 male, 129 right handed, 14 left handed and 9 unknown handedness, aged between 18 and 44, with a mean age of 25 and median age of 24). The images were originally segmented using a neural network approach, and mis-classified non-brain tissue was removed by a masking procedure. To increase the stability of the segmentation with respect to small registration errors, the images are convolved with an 8mm full width at half maximum Gaussian smoothing kernel. The prior probability of voxel f_{ij} belonging to cluster k is denoted by b_{ijk} . The final assumption is that the

intensity of the image has been modulated by multiplication with an unknown scalar field. Most of the algorithm for classifying the voxels has been described elsewhere (Ashburner & Friston, 1997), so this paper will emphasize the modification for correcting the modulation field.

There are many unknown parameters in the segmentation algorithm, and estimating any of these requires knowledge about the other parameters. Estimating the parameters that describe a cluster (h_k , v_k and c_k) relies on knowing which voxels belong to the cluster, and also the form of the intensity modulating function. Estimating which voxels should be assigned to each cluster requires the cluster parameters to be defined, and also the modulation field. In turn, estimating the modulation field needs the cluster parameters and the belonging probabilities.

The problem requires an iterative algorithm (see Figure 9). It begins with assigning starting estimates for the various parameters. The starting estimate for the modulation field is typically uniformly one. Starting estimates for the belonging probabilities of the GM, WM and CSF partitions are based on the prior probability images. Since we have no probability maps for background and non-brain tissue clusters, we estimate them by subtracting the prior probabilities for GM, WM and CSF from a map of all ones, and divide the result equally between the remaining clusters ².

Each iteration of the algorithm involves estimating the cluster parameters from the non-uniformity corrected image, assigning belonging probabilities based on the cluster parameters, checking for convergence, and re-estimating and applying the modulation function. This continues until a convergence criterion is satisfied. The final values for the

²Where identical prior probability maps are used for more than one cluster, the affected cluster parameters need to be modified slightly. This is typically done after the first iteration, by assigning different values for the means uniformly spaced between zero and the intensity of the white matter cluster.

belonging probabilities are in the range of 0 to 1, although most values tend to stabilize very close to one of the two extremes. The individual steps involved in each iteration will now be described in more detail.

[Figure 9 about here.]

A.1 Estimating the Cluster Parameters

This stage requires the original image to be intensity corrected according to the most recent estimate of the modulation function. Each voxel of the intensity corrected image is denoted by g_{ij} . We also have the current estimate of the belonging probabilities for each voxel with respect to each cluster. The probability of voxel i, j belonging to class k is denoted by p_{ijk} .

The first step is to compute the number of voxels belonging to each of the K clusters (**h**) as:

$$h_k = \sum_{i=1}^I \sum_{j=1}^J p_{ijk} \text{ over } k = 1..K.$$

Mean voxel intensities for each cluster (**v**) are computed. This step effectively produces a weighted mean of the image voxels, where the weights are the current belonging probability estimates:

$$v_k = \frac{\sum_{i=1}^I \sum_{j=1}^J p_{ijk} g_{ij}}{h_k} \text{ over } k = 1..K.$$

Then the variance of each cluster (**c**) is computed in a similar way to the mean:

$$c_k = \frac{\sum_{i=1}^I \sum_{j=1}^J p_{ijk} (g_{ij} - v_k)^2}{h_k} \text{ over } k = 1..K.$$

A.2 Assigning Belonging Probabilities

The next step is to re-calculate the belonging probabilities. It uses the cluster parameters computed in the previous step, along with the prior probability images and the intensity modulated input image. Bayes rule is used to assign the probability of each voxel belonging to each cluster:

$$p_{ijk} = \frac{r_{ijk}q_{ijk}}{\sum_{l=1}^K r_{ijl}q_{ijl}} \text{ over } i = 1..I, j = 1..J \text{ and } k = 1..K.$$

where p_{ijk} is the *a posteriori* probability that voxel i, j belongs to cluster k given its intensity of g_{ij} , r_{ijk} is the likelihood of a voxel in cluster k having an intensity of g_{ik} , and q_{ijk} is the *a priori* probability of voxel i, j belonging in cluster k .

The likelihood function is obtained by evaluating the probability density functions for the clusters at each of the voxels:

$$r_{ijk} = (2\pi c_k)^{-1/2} \exp\left(\frac{-(g_{ij} - v_k)^2}{2c_k}\right) \text{ over } i = 1..I, j = 1..J \text{ and } k = 1..K.$$

The prior (q_{ijk}) is based on two factors: the number of voxels currently belonging to each cluster (h_k), and the prior probability images derived from a number of images (b_{ijk}). With no knowledge of the *a priori* spatial distribution of the clusters or the intensity of a voxel, then the *a priori* probability of any voxel belonging to a particular cluster is proportional to the number of voxels currently included in that cluster. However, with the additional data from the prior probability images, we can obtain a better estimate of the priors:

$$q_{ijk} = \frac{h_k b_{ijk}}{\sum_{l=1}^I \sum_{m=1}^J b_{lmk}} \text{ over } i = 1..I, j = 1..J \text{ and } k = 1..K.$$

Convergence is ascertained by following the log-likelihood function:

$$\sum_{i=1}^I \sum_{j=1}^J \log \left(\sum_{k=1}^K r_{ijk} q_{ijk} \right)$$

The algorithm is terminated when the change in log-likelihood from the previous iteration becomes negligible.

A.3 Estimating and Applying the Modulation Function

Many groups have developed methods for correcting intensity non-uniformities in MR images, and the scheme we describe here shares common features. There are two basic models describing the noise properties of the images: multiplicative noise and additive noise. The multiplicative model describes images that have noise added before being modulated by the non-uniformity field (i.e., the standard deviation of the noise is multiplied by the modulating field), whereas the additive version models noise that is added after the modulation (standard deviation is constant). We have used a multiplicative noise model, which assumes that the errors originate from tissue variability rather than additive Gaussian noise from the scanner. Figure 10 illustrates the model used by the classification.

[Figure 10 about here.]

Non-uniformity correction methods all involve estimating a smooth function that modulates the image intensities. If the function is not forced to be smooth, then it will begin to fit the higher frequency intensity variations due to different tissue types, rather than the low frequency intensity non-uniformity artifact. Thin-plate spline (Sled *et al.*, 1998) and polynomial (Van Leemput *et al.*, 1999a; Van Leemput *et al.*, 1999b) basis functions are widely used for modeling the intensity variation. In these models, the higher frequency intensity variations are restricted by limiting the number of basis functions. In the current model, we assume that the modulation field (\mathbf{U}) has been drawn from a population for which we know the *a priori* distribution. The distribution is assumed to be multinormal, with a mean that is uniformly one, and a covariance matrix that models

smoothly varying functions. In this way, a Bayesian scheme is used to penalize high frequency intensity variations by introducing a cost function based on the “energy” of the modulating function. There are many possible forms for this energy function. Some widely used simple cost functions include the “membrane energy” and the “bending energy” (1997b), which (in three dimensions) have the forms $h = \sum_i \sum_{j=1}^3 \lambda \left(\frac{\partial u(\mathbf{x}_i)}{\partial x_{ji}} \right)^2$ and $h = \sum_i \sum_{j=1}^3 \sum_{k=1}^3 \lambda \left(\frac{\partial^2 u(\mathbf{x}_i)}{\partial x_{ji} \partial x_{ki}} \right)^2$ respectively. In these formulae, $\frac{\partial u(\mathbf{x}_i)}{\partial x_{ji}}$ is the gradient of the modulating function at the i th voxel in the j th orthogonal direction, and λ is a user assigned constant. However, for the purpose of modulating the images, we use a smoother cost function that is based on the squares of the third derivatives:

$$h = \sum_i \sum_{j=1}^3 \sum_{k=1}^3 \sum_{l=1}^3 \lambda \left(\frac{\partial^3 u(\mathbf{x}_i)}{\partial x_{ji} \partial x_{ki} \partial x_{li}} \right)^2$$

This model was chosen because it produces slowly varying modulation fields that can represent the variety of nonuniformity effects that we expect to encounter in MR images (see Figure 11).

[Figure 11 about here.]

To reduce the number of parameters describing the field, it is modeled by a linear combination of low frequency discrete cosine transform basis functions (chosen because there are no boundary constraints). A two (or three) dimensional discrete cosine transform (DCT) is performed as a series of one dimensional transforms, which are simply multiplications with the DCT matrix. The elements of a matrix (\mathbf{D}) for computing the first M coefficients of the DCT of a vector of length I is given by:

$$\begin{aligned} d_{i1} &= \frac{1}{\sqrt{I}} \quad i = 1..I \\ d_{im} &= \sqrt{\frac{2}{I}} \cos \left(\frac{\pi(2i-1)(m-1)}{2I} \right) \quad i = 1..I, m = 2..M \end{aligned} \quad (1)$$

The matrix notation for computing the first $M \times M$ coefficients of the two dimensional DCT of a modulation field \mathbf{U} is $\mathbf{X} = \mathbf{D}_1^T \mathbf{U} \mathbf{D}_2$, where the dimensions of the DCT

matrices \mathbf{D}_1 and \mathbf{D}_2 are $I \times M$ and $J \times M$ respectively, and \mathbf{U} is an $I \times J$ matrix. The approximate inverse DCT is computed by $\mathbf{U} \simeq \mathbf{D}_1 \mathbf{X} \mathbf{D}_2^T$. An alternative representation of the two dimensional DCT obtains by reshaping the $I \times J$ matrix \mathbf{U} so that it is a vector (\mathbf{u}). Element $i + (j - 1) \times I$ of the vector is then equal to element i, j of the matrix. The two dimensional DCT can then be represented by $\mathbf{x} = \mathbf{D}^T \mathbf{u}$, where $\mathbf{D} = \mathbf{D}_2 \otimes \mathbf{D}_1$ (the Kronecker tensor product of \mathbf{D}_2 and \mathbf{D}_1), and $\mathbf{u} \simeq \mathbf{D} \mathbf{x}$.

The sensitivity correction field is computed by estimating the coefficients (\mathbf{x}) of the basis functions that minimize a weighted sum of squared differences between the data and the model, and also the bending energy of the modulation field. This can be expressed using matrix terminology as a regularized weighted least squares fitting:

$$\mathbf{x} = (\mathbf{A}_1^T \mathbf{A}_1 + \mathbf{A}_2^T \mathbf{A}_2 \cdots + \mathbf{C}_0^{-1})^{-1} (\mathbf{A}_1^T \mathbf{b}_1 + \mathbf{A}_2^T \mathbf{b}_2 \cdots + \mathbf{C}_0^{-1} \mathbf{x}_0)$$

where \mathbf{x}_0 and \mathbf{C}_0 are the means and covariance matrices describing the *a priori* distribution of the coefficients. Matrix \mathbf{A}_k and column vector \mathbf{b}_k are constructed for cluster k from:

$$\mathbf{A}_k = \text{diag} \left(\mathbf{p}_k c_k^{-1/2} \right) \text{diag} (\mathbf{f}) \mathbf{D} \text{ and } \mathbf{b}_k = \mathbf{p}_k c_k^{-1/2} v_k$$

where \mathbf{p}_k refers to the belonging probabilities for the k th cluster considered as a column vector. The objective is to find the smooth modulating function (described by its DCT coefficients), that will bring the voxel intensities of each cluster as close as possible (in the least squares sense) to the cluster means, where the vectors $\mathbf{p}_k c_k^{-1/2}$ are voxel by voxel weighting functions.

Computing $\mathbf{A}_k^T \mathbf{A}_k$ and $\mathbf{A}_k^T \mathbf{b}_k$ could be potentially very time consuming, especially when applied in three dimensions. However, this operation can be greatly speeded up using the properties of Kronecker tensor products (Ashburner & Friston, 1999). Figure 12 shows how this can be done in two dimensions using Matlab as a form of pseudo-code.

[Figure 12 about here.]

The prior distribution of the coefficients is based on the cost function described above. For coefficients \mathbf{x} this cost function is computed from $\mathbf{x}^T \mathbf{C}_0^{-1} \mathbf{x}$, where (in two dimensions):

$$\begin{aligned} \mathbf{C}_0^{-1} = & \lambda \left(\mathbf{D}_2'''^T \mathbf{D}_2''' \right) \otimes \left(\mathbf{D}_1^T \mathbf{D}_1 \right) + 3\lambda \left(\mathbf{D}_2''^T \mathbf{D}_2'' \right) \otimes \left(\mathbf{D}_1'^T \mathbf{D}_1' \right) + \\ & 3\lambda \left(\mathbf{D}_2'^T \mathbf{D}_2' \right) \otimes \left(\mathbf{D}_1''^T \mathbf{D}_1'' \right) + \lambda \left(\mathbf{D}_2^T \mathbf{D}_2 \right) \otimes \left(\mathbf{D}_1'''^T \mathbf{D}_1''' \right) \end{aligned}$$

where the notation \mathbf{D}_1' , \mathbf{D}_1'' and \mathbf{D}_1''' refer to the first, second and third derivatives (by differentiating Equation 1 with respect to i) of \mathbf{D}_1 , and λ is a regularization constant. The mean of the *a priori* distribution of the DCT coefficients is such that it would generate a field that is uniformly one. For this, all the elements of the mean vector are set to zero, apart from the first element that is set to \sqrt{MN} .

Finally, once the coefficients have been estimated, then the modulation field \mathbf{u} can be computed from the estimated coefficients (\mathbf{x}) and the basis functions (\mathbf{D}_1 and \mathbf{D}_2).

$$u_{ij} = \sum_{n=1}^N \sum_{m=1}^M d_{2jn} x_{mn} d_{1im} \text{ over } i = 1..I \text{ and } j = 1..J.$$

The new estimate for the sensitivity corrected images are then obtained by a simple element by element multiplication with the modulation field.

$$g_{ij} = f_{ij} u_{ij} \text{ over } i = 1..I \text{ and } j = 1..J.$$

List of Figures

- 1 We refer to deformation-based morphometry to describe methods of studying the positions of structures within the brain (left), whereas we use the term tensor-based morphometry for looking at local shapes (right). Currently, the main application of tensor-based morphometry involves using the Jacobian determinants to examine the relative volumes of different structures. However, there are other features of the Jacobian matrices that could be used, such as those representing elongation and contraction in different directions. The arrows in the panel on the left show absolute displacements after making a global correction for rotations and translations, whereas the ellipses on the right show how the same circles would be distorted in different parts of the brain. 40
- 2 A single sagittal slice through six T1-weighted images (2 Tesla scanner, with an MPRAGE sequence, 12° tip angle, 9.7ms repeat time, 4ms echo time and 0.6ms inversion time). Contours of extracted grey and white matter are shown superimposed on the images. 41
- 3 The classification of the simulated BrainWeb image. The top row shows the original simulated T1-weighted MR image with 100% nonuniformity, and the nonuniformity corrected version. From left to right, the middle row shows the *a priori* spatial distribution of grey matter used for the segmentation, grey matter segmented without nonuniformity correction, grey matter segmented with nonuniformity correction and the “true” distribution of gray matter (from which the simulated images were derived). The bottom row is the same as same as the middle, except that it shows white matter rather than gray. Without nonuniformity correction, the intensity variation causes some of the white matter in posterior areas to be classified as gray. This was also very apparent in the cerebellum because of the intensity variation in the inferior-superior direction. 42
- 4 Top Left: The true intensity nonuniformity field of the simulated T1 image. Top Right: The nonuniformity recovered by the segmentation algorithm. Below Left: The recovered divided by the true nonuniformity. Below Right: A scatterplot of true intensity nonuniformity versus recovered nonuniformity, derived from voxels throughout the whole volume classified as either white or grey matter. Note that the plot is a straight line, but that its gradient is not one because it is not possible to recover the absolute scaling of the field. 43
- 5 Segmentation accuracy with respect to misregistration with the *a priori* images. 44

6	Histogram of correlation coefficients taken over the whole image volumes (using a total of 717191 voxels where the mean intensity over all images was greater than 0.05). The dotted line is the histogram that would be expected if the data were perfectly normally distributed. The solid line shows the histogram of the data without the logit transform, and the dashed line shows the histogram obtained using the logit transformed data. The plot on the left is based on the model that does not include global grey matter as a confound, whereas that on the right does model this confounding effect.	45
7	Histograms of t-scores from randomly generated tests. Above: Not modeling mean effect (48 degrees of freedom). Below: Modeling a mean effect as a confound (47 degrees of freedom). Left: 50 histograms of t-scores testing randomly generated effects of interest. Center: the mean (i.e., cumulative distribution over all voxels and volumes) of the 50 histograms is plotted as a solid line, and the probability density function of the Students t distribution for 47/48 degrees of freedom is shown by the dotted line. Right: The same as center, except plotted on a logarithmic scale.	46
8	Left: Mean of 50 subjects pre-processed brain images. Right: Number of false positives occurring at each voxel at the uncorrected 0.002 level, after 10000 randomizations.	47
9	A flow diagram for the tissue classification.	48
10	The MR images are modeled as a number of distinct clusters (top left), with different levels of Gaussian random noise added to each cluster (top right). The intensity modulation is assumed to be smoothly varying (bottom left), and is applied as a straightforward multiplication of the modulation field with the image (bottom right).	49
11	Randomly generated modulation fields using the membrane energy cost function (left), the bending energy cost function (center) and the squares of the third derivatives (right).	50

- 12 The algorithm for computing $\mathbf{A}_k^T \mathbf{A}_k$ (*alpha_k*) and $\mathbf{A}_k^T \mathbf{b}_k$ (*beta_k*) in two dimensions using Matlab as a pseudocode. The symbol “*” refers to matrix multiplication, whereas “.*” refers to element by element multiplication. “ ’ ” refers to a matrix transpose and “^” to a power. The *j*th row of matrix “*D2*” is denoted by “*D2(j,:)*”, and the *j*th column of matrix “*img2*” is denoted by “*img2(:,j)*”. The functions “*zeros(a,b)*” and “*ones(a,b)*” would produce matrices of size *a*×*b* of either all zero or all one. A Kronecker tensor product of two matrices is represented by the “*kron*” function. Matrix “*F*” is the $I \times J$ non-uniformity corrected image. Matrix “*P_k*” is the $I \times J$ current estimate of the probabilities of the voxels belonging to cluster *k*. Matrices “*D1*” and “*D2*” contain the DCT basis functions, and have dimensions $I \times M$ and $J \times N$. “*v_k*” and “*c_k*” are scalars, and refer to the mean and variance of the *k*th cluster. 51

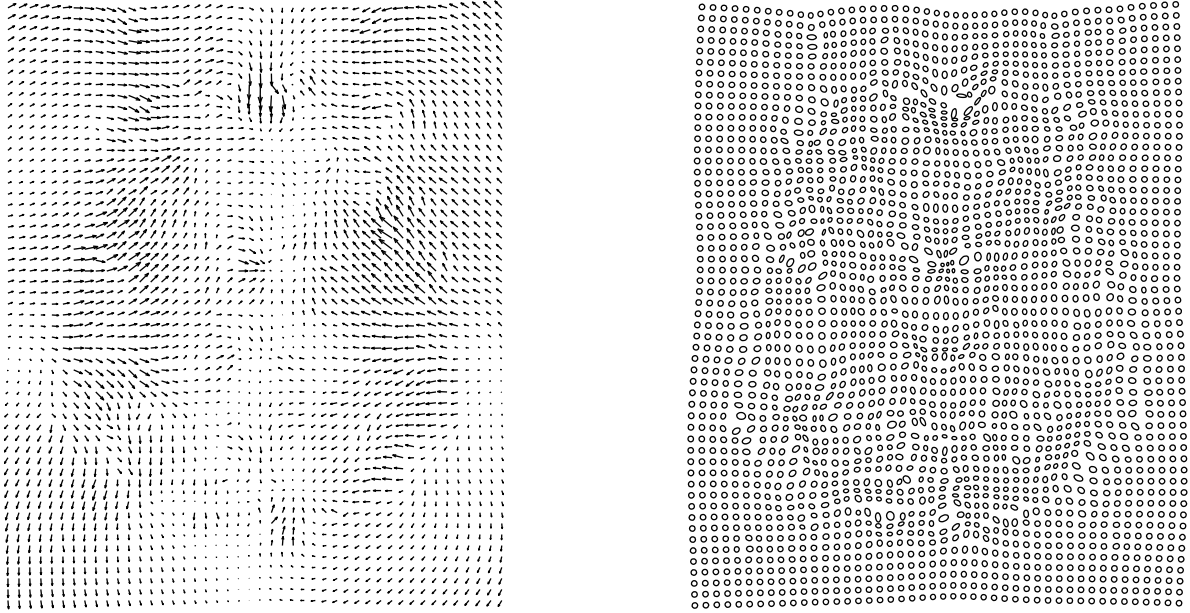


Figure 1: We refer to deformation-based morphometry to describe methods of studying the positions of structures within the brain (left), whereas we use the term tensor-based morphometry for looking at local shapes (right). Currently, the main application of tensor-based morphometry involves using the Jacobian determinants to examine the relative volumes of different structures. However, there are other features of the Jacobian matrices that could be used, such as those representing elongation and contraction in different directions. The arrows in the panel on the left show absolute displacements after making a global correction for rotations and translations, whereas the ellipses on the right show how the same circles would be distorted in different parts of the brain.

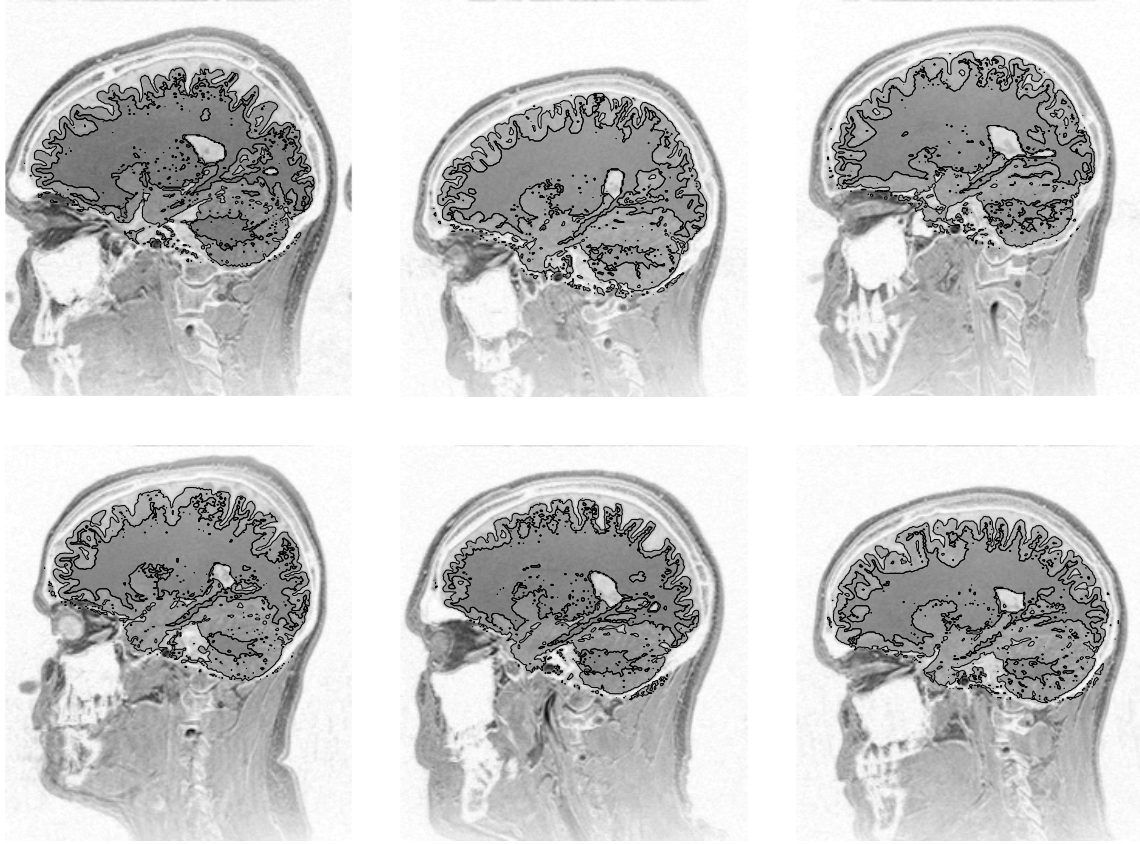


Figure 2: A single sagittal slice through six T1-weighted images (2 Tesla scanner, with an MPRAGE sequence, 12° tip angle, 9.7ms repeat time, 4ms echo time and 0.6ms inversion time). Contours of extracted grey and white matter are shown superimposed on the images.

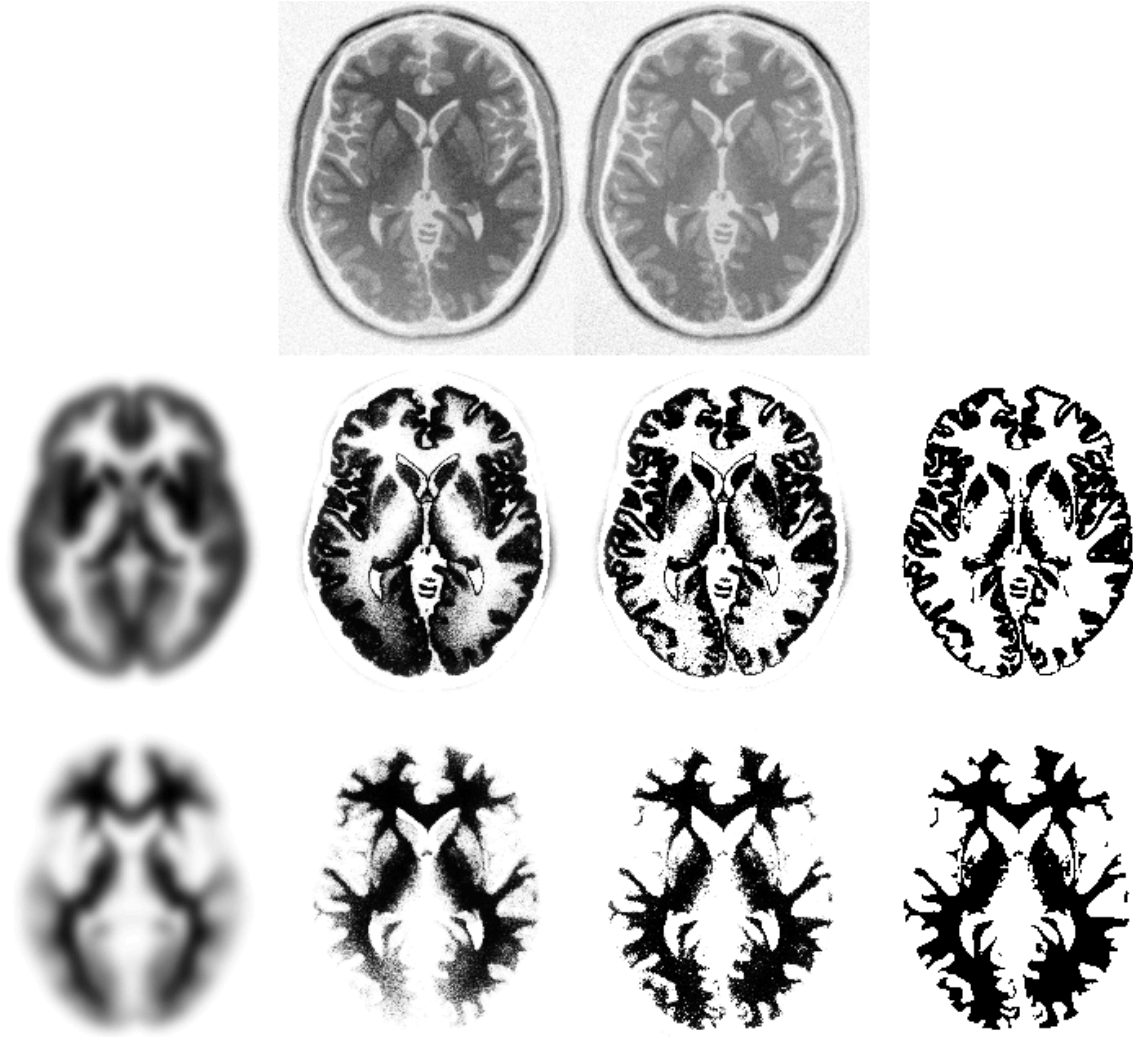


Figure 3: The classification of the simulated BrainWeb image. The top row shows the original simulated T1-weighted MR image with 100% nonuniformity, and the nonuniformity corrected version. From left to right, the middle row shows the *a priori* spatial distribution of grey matter used for the segmentation, grey matter segmented without nonuniformity correction, grey matter segmented with nonuniformity correction and the “true” distribution of gray matter (from which the simulated images were derived). The bottom row is the same as same as the middle, except that it shows white matter rather than gray. Without nonuniformity correction, the intensity variation causes some of the white matter in posterior areas to be classified as gray. This was also very apparent in the cerebellum because of the intensity variation in the inferior-superior direction.

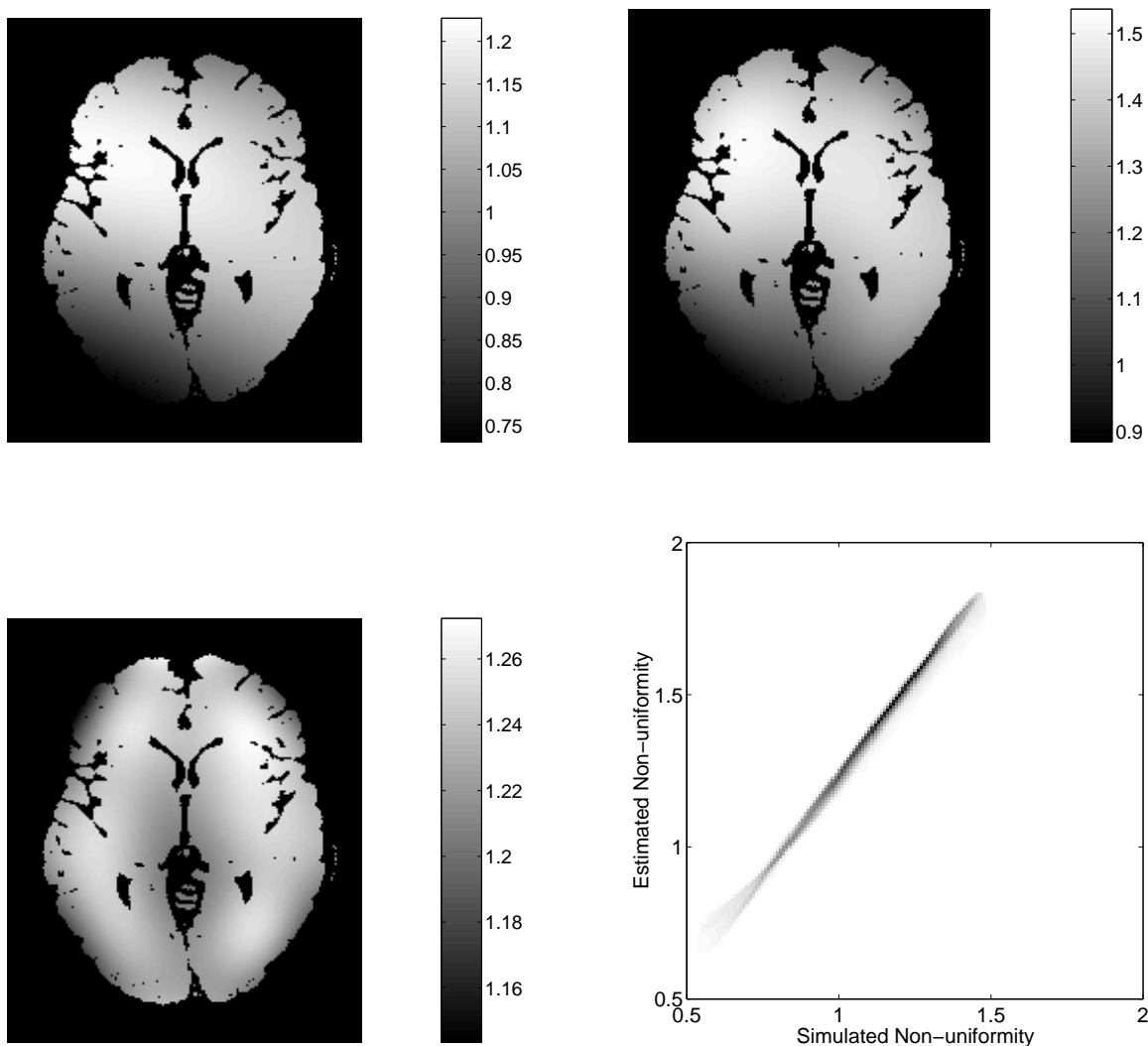


Figure 4: Top Left: The true intensity nonuniformity field of the simulated T1 image. Top Right: The nonuniformity recovered by the segmentation algorithm. Below Left: The recovered divided by the true nonuniformity. Below Right: A scatterplot of true intensity nonuniformity versus recovered nonuniformity, derived from voxels throughout the whole volume classified as either white or grey matter. Note that the plot is a straight line, but that its gradient is not one because it is not possible to recover the absolute scaling of the field.

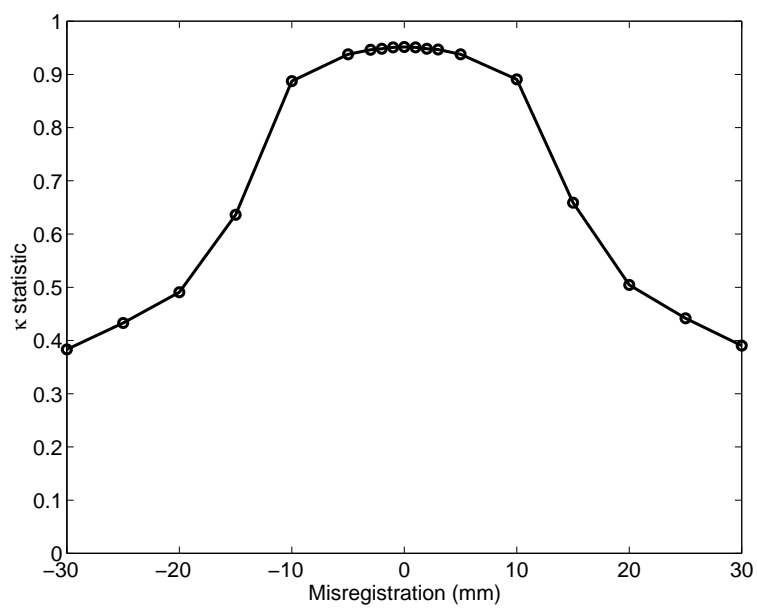


Figure 5: Segmentation accuracy with respect to misregistration with the *a priori* images.

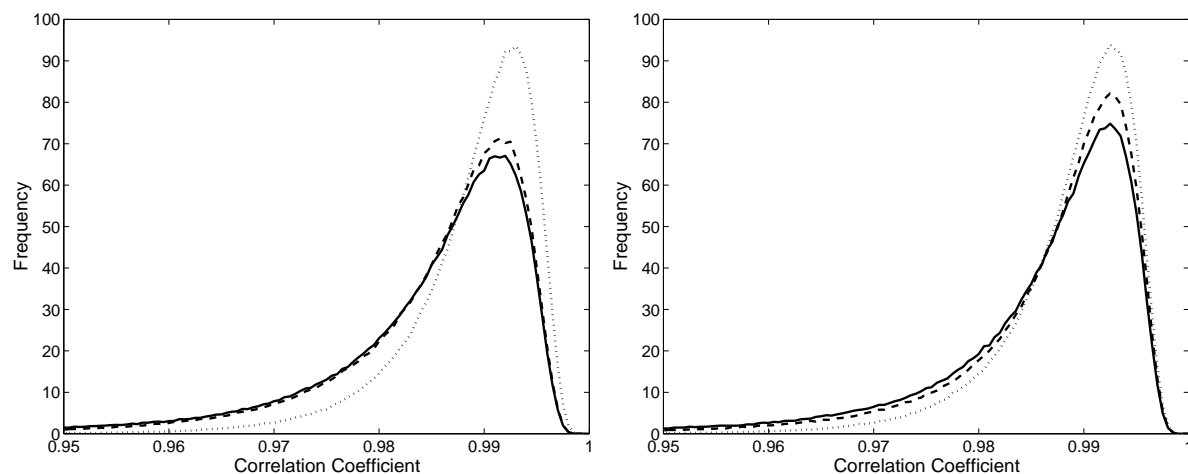


Figure 6: Histogram of correlation coefficients taken over the whole image volumes (using a total of 717191 voxels where the mean intensity over all images was greater than 0.05). The dotted line is the histogram that would be expected if the data were perfectly normally distributed. The solid line shows the histogram of the data without the logit transform, and the dashed line shows the histogram obtained using the logit transformed data. The plot on the left is based on the model that does not include global grey matter as a confound, whereas that on the right does model this confounding effect.

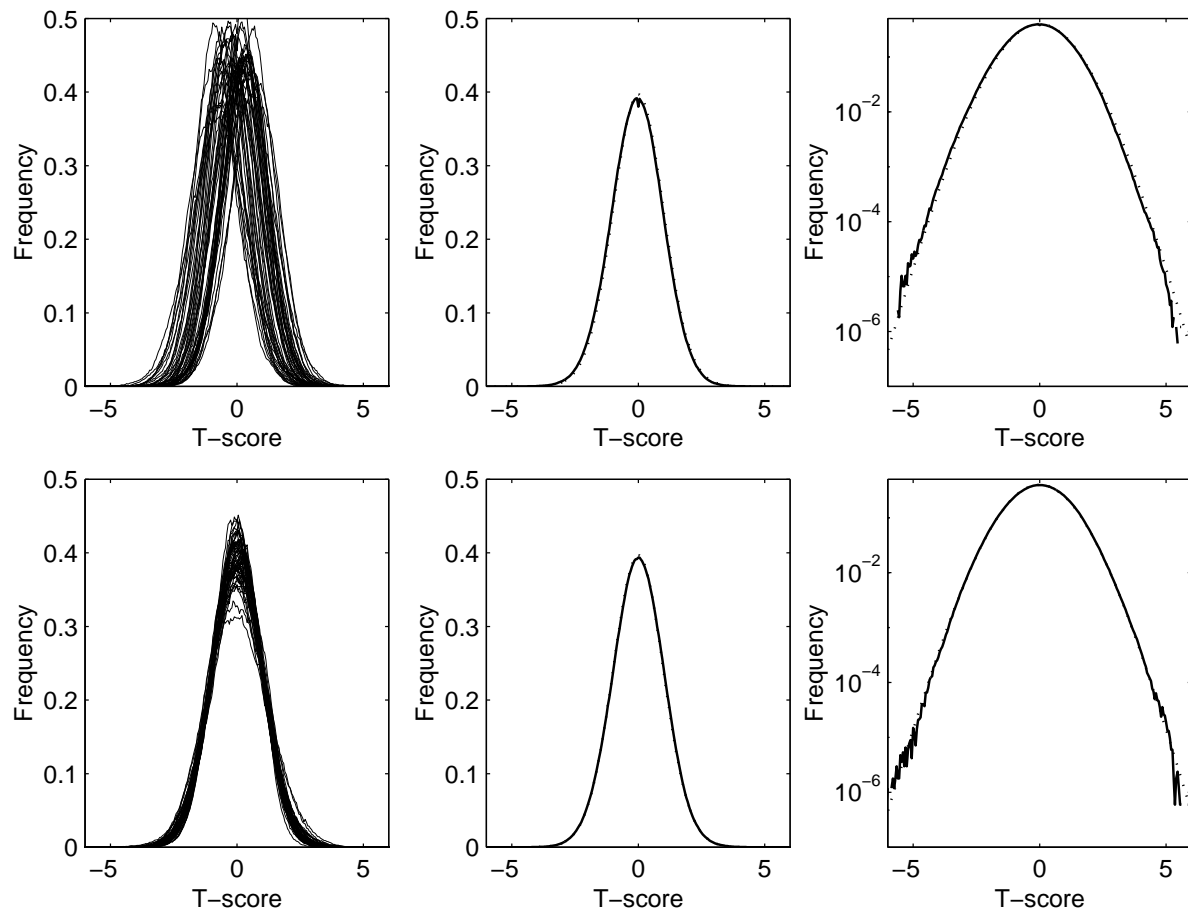


Figure 7: Histograms of t-scores from randomly generated tests. Above: Not modeling mean effect (48 degrees of freedom). Below: Modeling a mean effect as a confound (47 degrees of freedom). Left: 50 histograms of t-scores testing randomly generated effects of interest. Center: the mean (i.e., cumulative distribution over all voxels and volumes) of the 50 histograms is plotted as a solid line, and the probability density function of the Student's t distribution for 47/48 degrees of freedom is shown by the dotted line. Right: The same as center, except plotted on a logarithmic scale.

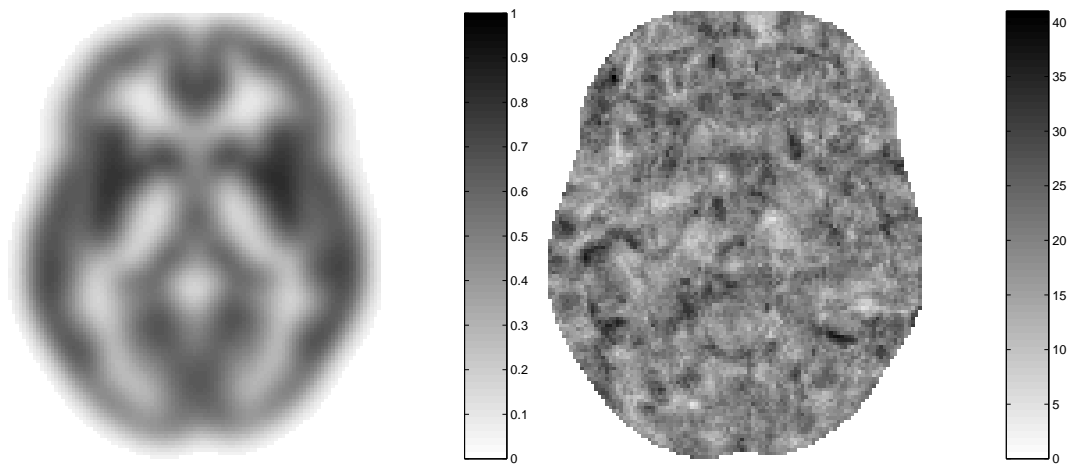


Figure 8: Left: Mean of 50 subjects pre-processed brain images. Right: Number of false positives occurring at each voxel at the uncorrected 0.002 level, after 10000 randomizations.

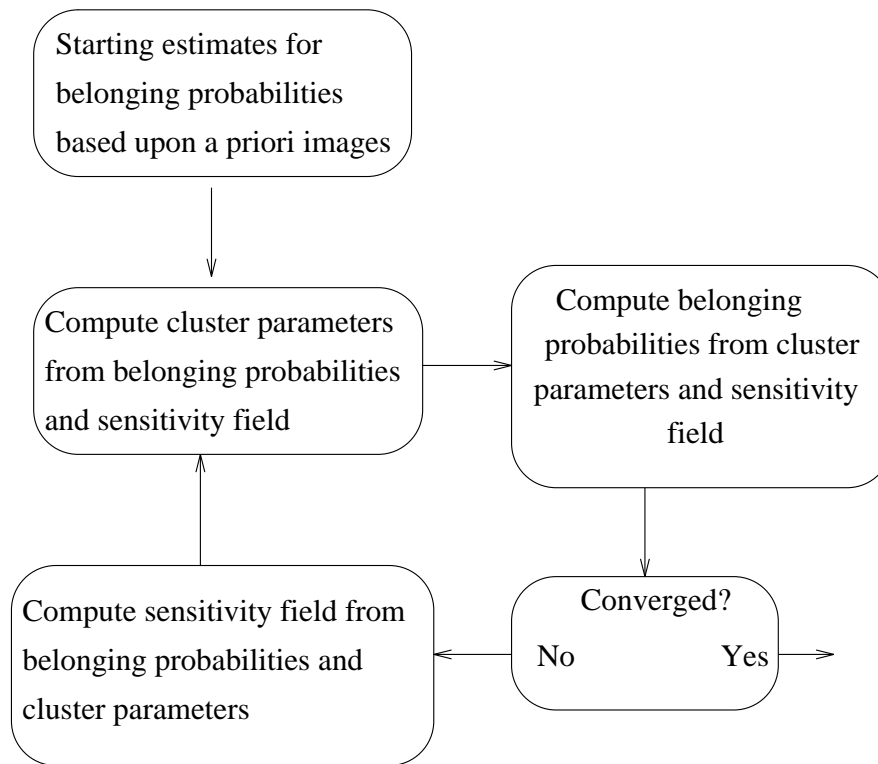


Figure 9: A flow diagram for the tissue classification.

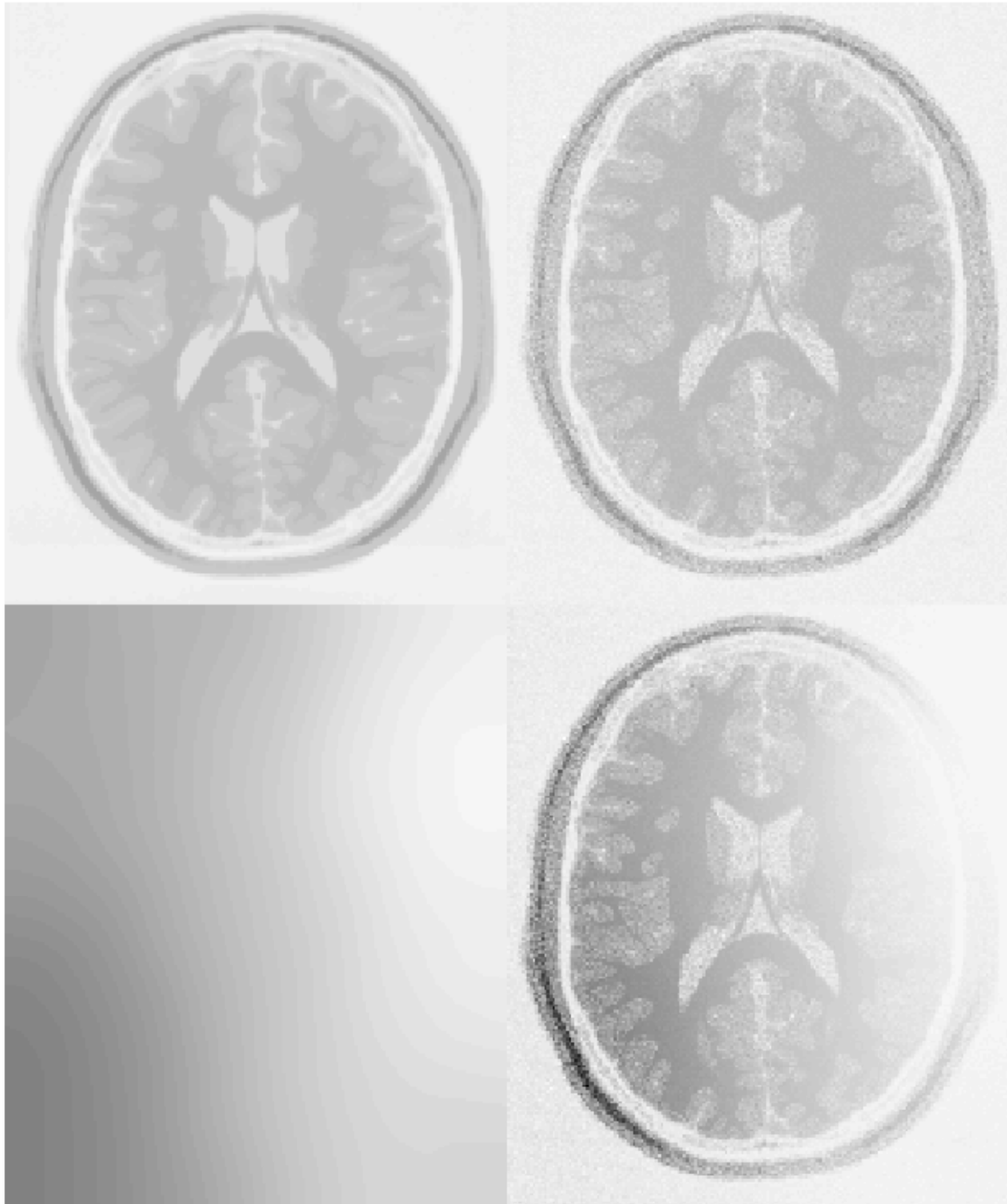


Figure 10: The MR images are modeled as a number of distinct clusters (top left), with different levels of Gaussian random noise added to each cluster (top right). The intensity modulation is assumed to be smoothly varying (bottom left), and is applied as a straightforward multiplication of the modulation field with the image (bottom right).

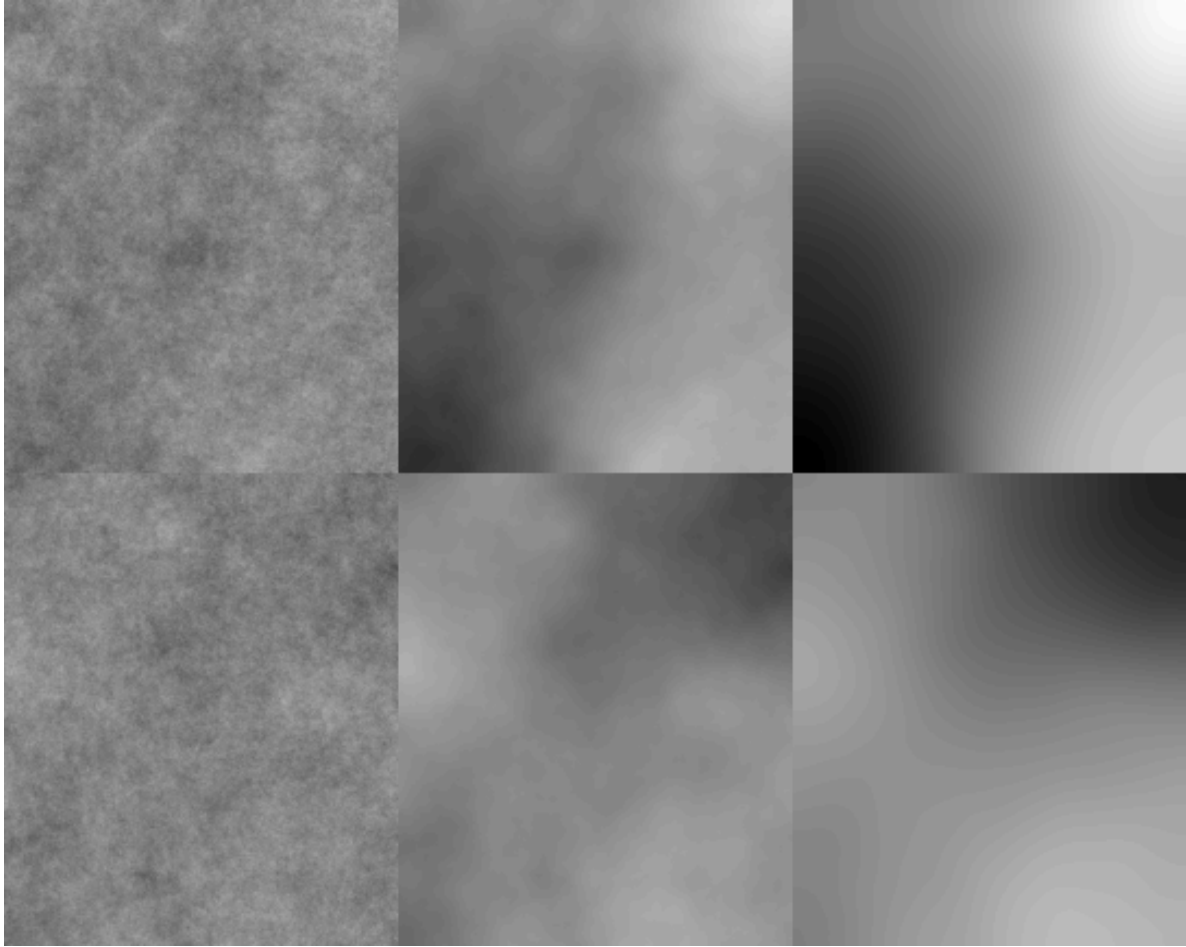


Figure 11: Randomly generated modulation fields using the membrane energy cost function (left), the bending energy cost function (center) and the squares of the third derivatives (right).

```

alpha_k = zeros(M*N,M*N);
beta_k  = zeros(M*N,1);
weight  = P_k*(c_k^(-0.5));
img1     = weight.*F;
img2     = weight*v_k;
for j = 1:J,
    tmp    = (img1(:,j)*ones(1,M)).*D1;
    alpha_k = alpha_k + kron(D2(j,:)'.*D2(j,:), tmp'*tmp);
    beta_k  = beta_k  + kron(D2(j,:)'.*tmp'*img2(:,j));
end;

```

Figure 12: The algorithm for computing $\mathbf{A}_k^T \mathbf{A}_k$ (*alpha_k*) and $\mathbf{A}_k^T \mathbf{b}_k$ (*beta_k*) in two dimensions using Matlab as a pseudocode. The symbol “*” refers to matrix multiplication, whereas “.*” refers to element by element multiplication. “'” refers to a matrix transpose and “^” to a power. The *j*th row of matrix “*D2*” is denoted by “*D2(j,:)*”, and the *j*th column of matrix “*img2*” is denoted by “*img2(:,j)*”. The functions “*zeros(a,b)*” and “*ones(a,b)*” would produce matrices of size *a* × *b* of either all zero or all one. A Kronecker tensor product of two matrices is represented by the “*kron*” function. Matrix “*F*” is the $I \times J$ non-uniformity corrected image. Matrix “*P_k*” is the $I \times J$ current estimate of the probabilities of the voxels belonging to cluster *k*. Matrices “*D1*” and “*D2*” contain the DCT basis functions, and have dimensions $I \times M$ and $J \times N$. “*v_k*” and “*c_k*” are scalars, and refer to the mean and variance of the *k*th cluster.

List of Tables

- | | | |
|---|--|----|
| 1 | This table shows the different κ statistics that were computed after segmenting the simulated images. | 53 |
|---|--|----|

	Single image			Multi-spectral			
	T1	T2	PD	T2/PD	T1/T2	T1/PD	T1/T2/PD
0%RF - uncorrected	0.95	0.90	0.90	0.93	0.94	0.96	0.94
0%RF - corrected	0.95	0.90	0.90	0.93	0.94	0.96	0.95
40%RF - uncorrected	0.92	0.88	0.79	0.90	0.93	0.95	0.94
40%RF - corrected	0.95	0.90	0.90	0.93	0.94	0.96	0.94
100%RF - uncorrected	0.85	0.85	0.67	0.87	0.92	0.94	0.93
100%RF - corrected	0.94	0.90	0.88	0.92	0.93	0.95	0.94

Table 1: This table shows the different κ statistics that were computed after segmenting the simulated images.