

Tampere University Hospital

New Research on ECT and development of neuromodulation for treatment of depression

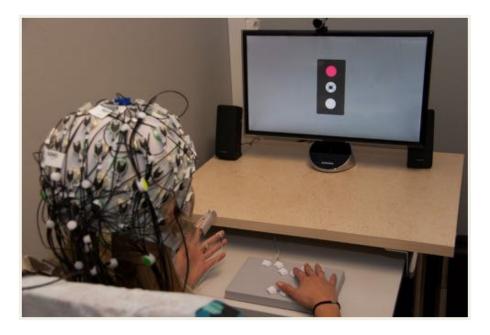
Kaisa M. Hartikainen

Neurologist, Academy Research Fellow, Associate Professor of Experimental Neurology Behavioral Neurology Research Unit

Kaija Järventausta

MD., Ph.D, Psychiatrist Tampere University Hospital

Pirkanmaa Hospital District



Behavioral Neurology Research Unit Tampere Univerity Hospital

http://www.uta.fi/med/tutkimus/kayttaytymisneurologia/index.html



Behavioral Neurology Research Unit

- Aims
 - At better understanding
 - of brain networks, mechanisms, dynamics behind cognition, emotion and behavior
 - the effect of brain disorders, brain damage and neuromodulation on mental functions
 - To develop better methods
 - For detecting alterations in cognition, emotion and behavior
 - To identify biomarkers
 - For adjusting or optimizing neuromodulation parameters



http://www.uta.fi/med/tutkimus/kayttaytymisneurologia/index.html

The effect of neuromodulation on cognitive and affective brain functions

Electroconvulsive therapy (ECT)

Depression

Vagus Nerve stimulation(VNS)

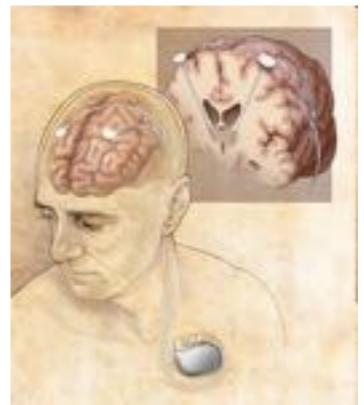
Epilepsy

Transcranial Direct Current Stimulation (TDCS)

- Depression
- Neurological Rehabilitation?
- Enhancing Cognition?

Deep Brain Stimulation (DBS)

• Epilepsy, depression, OCD





Behavioral Neurology Research Unit - Methods

Brain Physiology

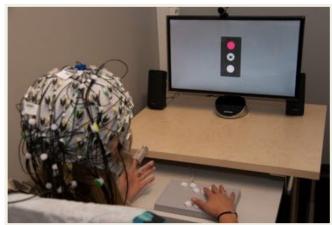
• 64 channel active electrode EEG

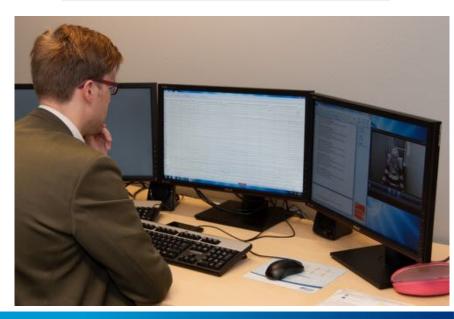
Autonomic nervous system

- Skin conductivity measurement
- Pulse, ECG

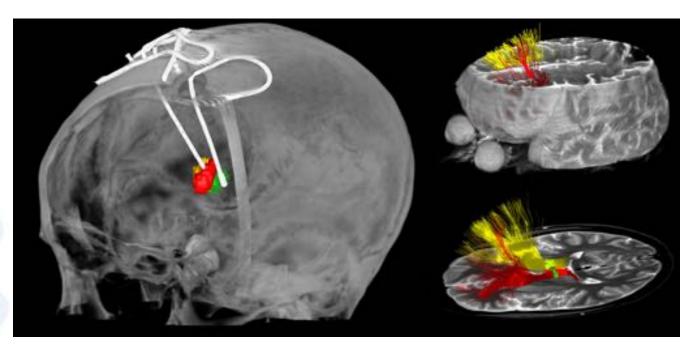
Behavior

- Performance, reaction times, accuracy
 - Computer based test of attention and executive functions
- Standardized questionaires





Lesion method



Reversible "lesion"/dysfunction in deep brain structures – key nodes of assocaciative and limbic circuitry with deep brain stimulation

Focal brain lesion due to brain injury

Frontal lobe

Prefrontal lobe

Orbitofrontal Cortex



Behavioral Neurology Research Unit



Tampere University Hospital

ECT for Major Depressive Disorder (MDD) and executive functions

Jari Peräkylä, Kaija Järventausta, Piia Haapaniemi, Kaisa Hartikainen

Pirkanmaa Hospital District

Attentional resources

Attention is a prerequisite for other cognitive functions such as memory

Two different aspects of attention

- Bottom-up: reaction to external impulse
 - o stimulus driven
- Top-down: conscious control of attention
 - goal driven (frontal lobes)
- Processing capacity is limited
 - We need neural mechanisms to direct our attention to things of importance
 - "competition" for attentional resources
 - Emotional stimuli capture these resources



Executive Functions

A very broad term including:

- Regulation of attentional resources
- Control of cognitive and emotional processes



Executive functions are crucial for daily life

- Guide behavior towards a goal especially when facing novel non-routine situations
- Orchestrates use of other cognitive capabilities: attention, memory, etc.

Key functions

- Formation of goals
- Planning actions to achieve the goals and
- Monitoring the execution of those actions



Executive functions and self-regulation



Working Memory Ability to keep information active, easily retrievable and shield it from distraction



Inhibition Deliberately inhibit dominant, automatic, habitual or prepotent responses

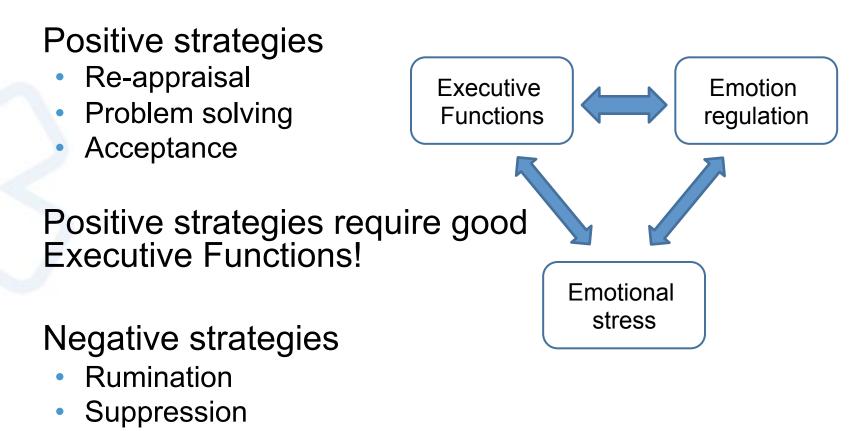


Shifting, i.e. Cognitive flexibility Ability to shift between multiple Tasks, goals and mental sets back and forth

Self-regulation: Goal-directed behavior, personal strivings Self-control: Overriding unwanted, prepotent impulses or urges



Emotional self-regulation



Avoidance

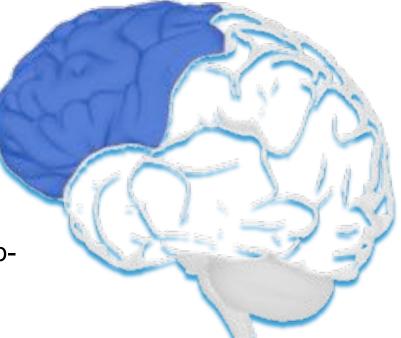


Frontal circuits and executive functions

Prefrontal cortex is necessary for these functions:

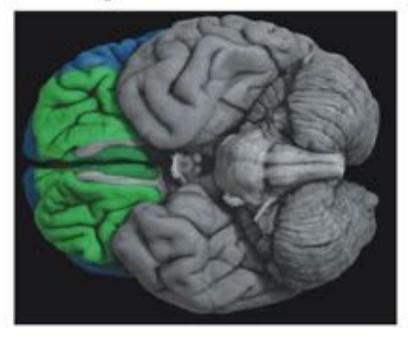
- Orbitofrontal cortex
- Dorsolateral prefrontal cortex
- Anterior cingulate

Also circuits with posterior cortical and subcortical strucures

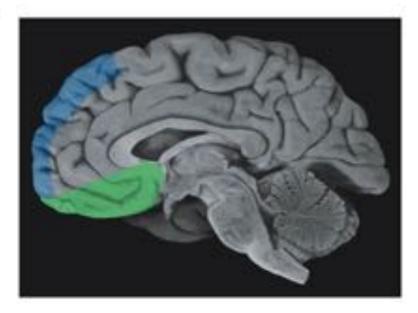




(a) The prefrontal cortex in humans







Orbitofrontal cortex Executive control of Emotion Emotional behavior

Dorsolateral prefrontal cortex Cognitive control Attentional control

Anteriorinen cingulum Motivation, drive, initiation, monitoring behavior

Circuits involved in depression

Dorsal componets related to motor and cognitive symprtoms in depression

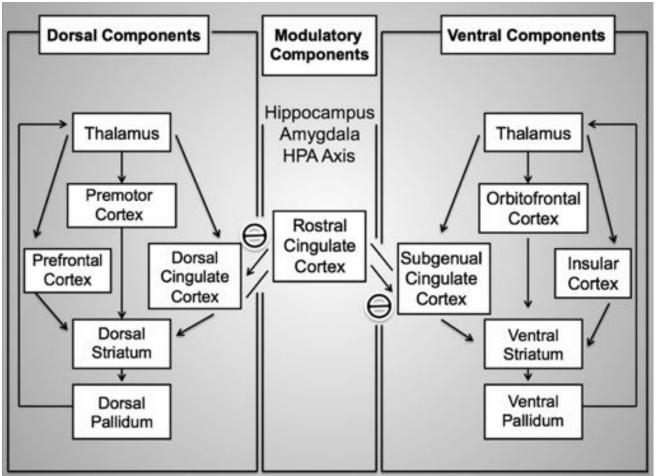
Ventral component related to somatic and vegetative symptoms in depression

Modulary part balances the dorsal and ventral components

Circuits derived from neuroimaging experiments

Hypo- and hyper activity in depression

- Hypoactivity in the dorsal part
- Hyperactivity in the ventral part





Morishita et al, Neurotherapeutics (2014) 11:475-484DOI 10.1007/s13311-014-0282-1

Depression and Executive Functions

Depression has been linked with

- hypoactivity in the dorsolateral prefrontal cortex
- deficits in Executive Functions

Impairment has been found in all key EF processes

working memory, inhibition, shifting

Two-thirds of depressed patients and one-third, one-half of remitted depressed patients suffer from cognitive impairment Cognitive impairment is and important aspect of MDD Impaired ability to think, concentrate or make decisions is a diagnostic criterion for MDD

It is thought that cognitive impairment is a core feature of depression, not just an epihenomen of depression or entirely secondary to lower mood (Meta-analysis and Review by Rock et al 2014 in Psychological Medicine, Snyder 2013 in Psychol Bulletin)

MDD and emotion attention interaction

Depressed individuals

- Attentional bias to negative stimuli
 - Attend faster and longer to negative emotional stimuli
- Interpret environmental and social stimuli more negatively than healthy peers
- Remember negative material better
- Leads to negative cognitive triad with
 - negative view about themselves,
 - the environment and
 - the future





ECT and Cognition

Most acutely effective treatment of depression

Use limited by cognitive side effects, mainly memory problems

Safety vs. Tolerability

Cognitive side effects (episodic memory and executive functions) mostly limited to 3 days post-ECT, return to baseline or improvement noted after 15 days (Semkovska and McLoughlin in Biol Psychiatry 2010)





Aims of the Study



- Effect of ECT on higher cognitive control functions i.e. executive functions
- Effect of ECT on emotion-attention and emotion-executive function interaction
 - Suitability of computerized Executive functions test to assess changes in executive functions before and after ECT treatment
- Applicability of BRIEF-A questionnaire on assessing executive functions before and after ECT



Methods

17/32 subjects with pharmaco-resistant depression treated with ECT

Subjects were tested with computer based Executive Reaction Time (RT) Test before and 3-7 days after ECT treatment.

 Treatment included ~10 ECT (bilateral) sessions during 3 weeks according to Tampere University Hospital ECT protocol

Subjects and their informant also filled in BRIEF-A questionnaire assessing executive functions before and after treatment





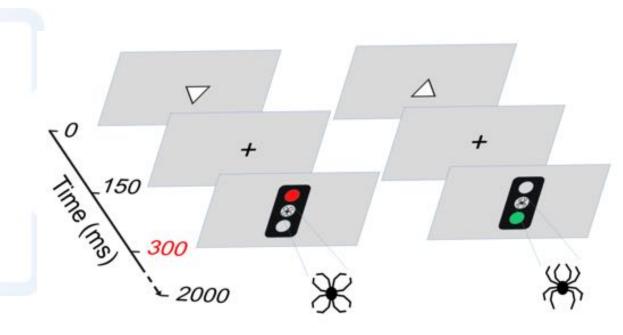
Standardized neuropsychological tests

Not sensitive to mild executive dysfunction/alteration in efficacy of executive functions

- Test that asses one cognitive domain such as language, memory, attention at a time do not challenge executive function
- Structured testing environment: Neuropsychologists gives the structure i.e. provides the executive control "what to do and when" thus patients executive control functions are not challenged
- Learning effect, long testing, bottleneck trained neuropsychologist
- Everyday life challenges executive control with multiple cognitive processes required at any given moment, unexpected and novel situations, need to suppress impulses and distractors in order to stay on goal or behave socially appropriately, need to switch goals or ways of behavior when context or circumstances change (work, home, safe environment, potential danger)

Tampere Univ

Executive-RT test Test of Executive Functions



Performance measures

Reaction Time Total errors – Overall Performance Incorrect Responses – Working Memory Missing Responses – Sustained Attention Commission Errors – Inhibition

Hartikainen K.M., Wäljas M., Isoviita T., Dastidar P., Liimatainen S., Solbakk A.K, Ogawa KH, Soimakallio S., Ylinen A., Öhman J. Persistent symptoms in mild to moderate traumatic brain injury associated with executive dysfunction. *Journal of Clinical and Experimental Neuropsychology*. **2010**; 32 (7), 767-774



Behavior Rating Inventory of Executive Function – Adult Version (BRIEF-A)

BRIEF: A standardized questionnaire originally developed to assess impairment of executive functions in children and adolescents (5-18 years)

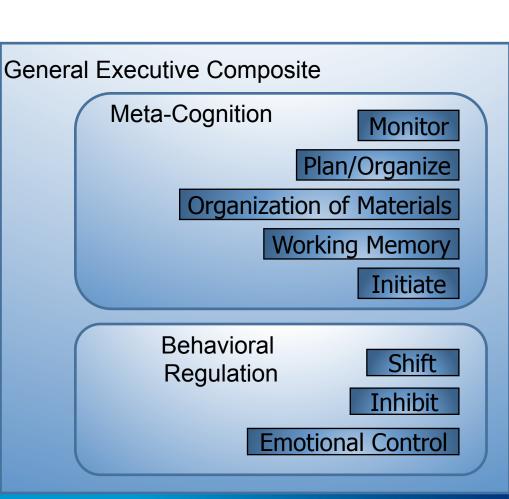
- Parent and teacher input
- Self report

BRIEF-A: Adult version (18-90 years)

- Self report form
- Informant form

Consists of

- Generic Executive Composite
- Metacognition Index
- Behavioral Regulation Index
- Eight behavioral indices



Results

Depression was alleviated

- BDI: dropped from 35.2 points (Severe depression) to 17.8 points (Mild depression)
- MADRS: dropped from 36.4 points (Severe depression) to 11.9 points (Mild depression)
- Executive functions improved
 - Executive-RT test: Inhibitory top-down control, shielding working memory from emotional distraction, attention control
 - BRIEF-A: Subjective improvement of executive functions



Discussion

ECT is effective in alleviating depression

ECT improved executive functions

Patients working memory, attention and inhibition/top-down control improved

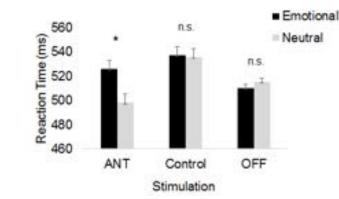
Improved mood -> improved cognition, causal relation uncertain

Upregulation of trophic factors?

After ECT treatment Emotional reactivity to threat was altered -Behavioral Biomarker?



Behavioral and Electrophysiological biomarkers of emotionattention interaction and their alteration due to neuromodulation

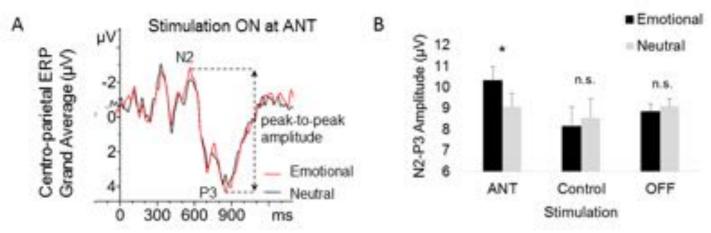




Emotional distractor



ANT-DBS enhances attention allocation to threat



Sun, Lihua; Peräkylä, Jari; Polvivaara Markus; Öhman Juha, Peltola, Jukka; Lehtimäki, Kai; Huhtala, Heini; Hartikainen, Kaisa. <u>Human anterior thalamic nuclei are involved in emotion-attention interaction</u>. Neuropsychologia, 2015 Oct 3. pii: S0028-3932(15)30179-2. doi: 10.1016/j.neuropsychologia.2015.10.001.



Studies going on in Tampere



The immediate impact of TDCS on cognition, specifically on emotion-executive function interaction in healthy subjects

The efficacy of TDCS in treatment of depression and impact on cognition

Impact of DBS in treatment of OCD, MDD and epilepsy on brain circuits underlying mental functions



Summary

- Sensitive and objective methods for detecting alterations in cognitive and emotional functions are needed to
 - To better understand the alterations of basic affective and cognitive functions due to mental disorders
 - To better understand the mechanisms of action of neuromodulatory treatment
 - Detecting effects of neuromodulation affective and cognitive brain functions
 - Optimizing neuromodulation treatment







Kaija Järventausta, MD,PhD Psychiatrist, Tampere Univerisity Hospital





Timo Tähtinen, MD Senior Consultant neurosurgeon Tampere University Hospital



Joonas Haapasalo, MD,PhD Neurosurgery resident Tampere University Hospital

Behavioral neurology research group:

Kaisa Hartikainen, MD,PhD, associate Professor (leader)



Timo Möttönen, MD Neurosurgery resident Tampere University Hospital



Kai Lehtimäki, MD,Ph Neurosurgeon, Tampere Univerisity Hospital

Lihua Sun, MSc PhD student



Jari Peräkylä, quality standard manager, MSc



Behavioral Neurology Research Unit





