



# Lesion Neuroanatomy of Post Stroke Deficits in Selective Attention & Working Memory.

King, R. L., Gillebert, C. R., Bickerton, W-L., Humphreys, G.W. & Demeyere, N.

## Introduction

The ability to selectively attend to goal relevant information to guide and modulate behaviour is a subtle but essential skill required in all daily tasks (Stuss et al., 1995; D'Esposito & Postle, 2015). For patients who are experiencing deficits in selective attention or working memory everyday living can become challenging and their prospect of successful long-term recovery is reduced (e.g. Marshall, 2011). In this study we aim to explore the underlying lesions associated with post-stroke deficits in selective attention and working memory by examining commission and omission errors, as well as post-task recall of target information.

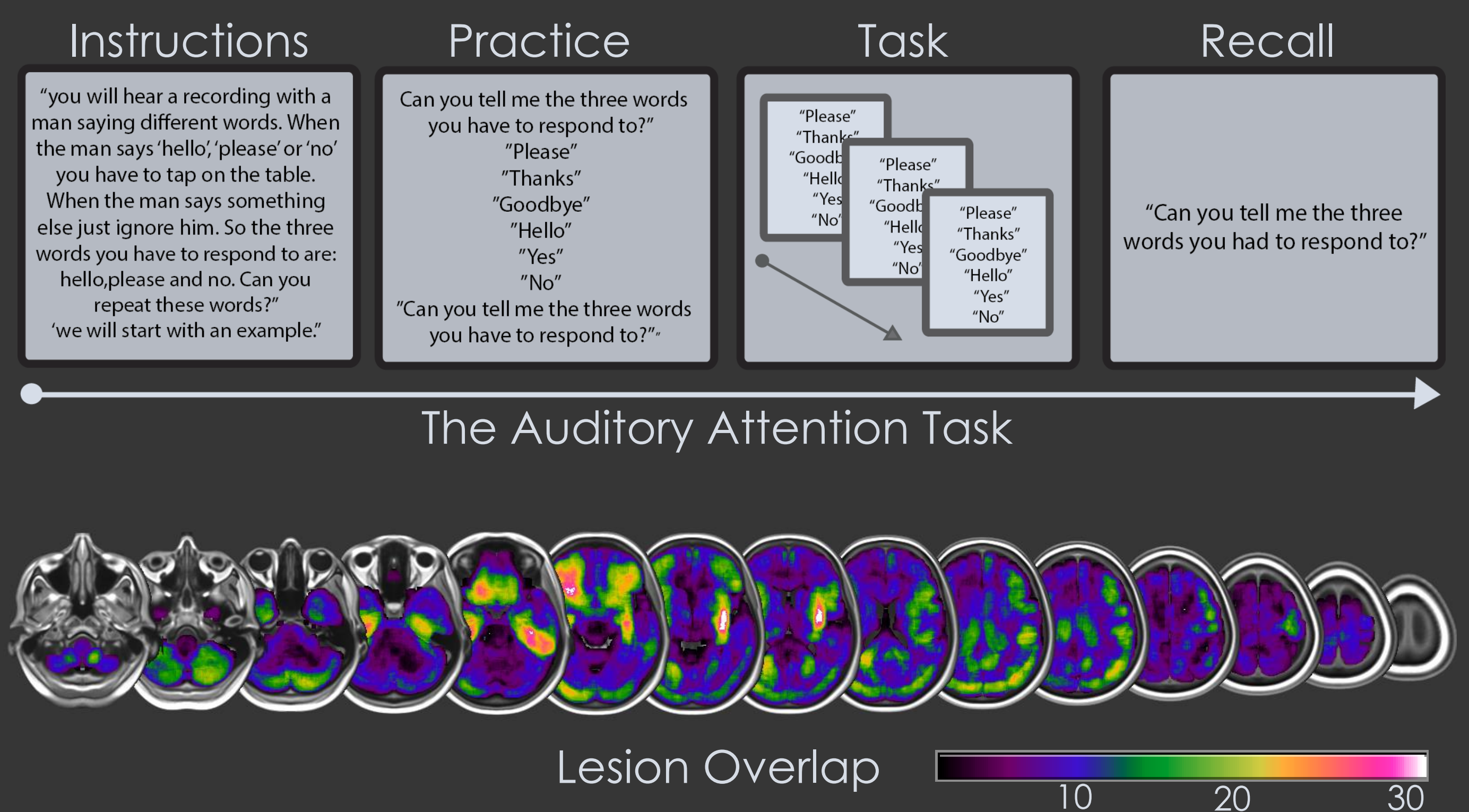
## Method

**Sample** 334 subacute stroke patients (mean age 71, SD=11 years).

**Task** The auditory attention task (Humphreys et al., 2012) is a clinically sensitive 10 minute task requiring the patient to selectively tap to previously learned target words (whilst ignoring distractor words) over 3 blocks of 18 word presentations.

**Scans** Clinical CT scans were pre-processed and lesions delineated using an automated toolkit (Gillebert et al., 2014).

**VLSM** Parametric voxel lesion symptom mapping. Only voxels where at least 10 patients have a lesion were considered. Covariates of no interest were age, gender, handedness, orientation in time/space and lesion size. Results reported at a  $P < 0.05$  FDR corrected threshold (Bates et al., 2003).



## Results



| Score                            | Cluster | Area  | MNI |     |     | Extent<br>mm <sup>3</sup> |
|----------------------------------|---------|---|-----|-----|-----|---------------------------|
|                                  |         |   | x   | y   | z   |                           |
| <b>Commissions</b><br>N = 205    | 1       | Right inferior frontal gyrus and middle frontal gyrus | 41  | 15  | 26  | 4213                      |
|                                  | 2       | Left operculum, putamen and white matter              | -38 | 16  | 12  | 3519                      |
|                                  | 3       | Left external capsular                                | -35 | -4  | -1  | 382                       |
|                                  | 4       | Left precuneus  | -15 | -61 | 17  | 652                       |
|                                  | 5       | Left insula   | -34 | -20 | 5   | 238                       |
| <b>Omissions</b><br>N = 334      | 1       | Left supplementary motor area                         | -13 | -4  | 63  | 248                       |
|                                  | 1       | Left parietal operculum cortex                        | 41  | 15  | 26  | 4213                      |
|                                  | 2       | Right cingulate and precuneus                         | 2   | -51 | 27  | 225                       |
|                                  | 3       | Left frontal pole                                     | -35 | 47  | 19  | 232                       |
|                                  | 4       | Left middle frontal gyrus                             | -38 | 16  | 38  | 136                       |
|                                  | 5       | Left planum polare                                    | -44 | -8  | -13 | 139                       |
|                                  | 6       | Left superior occipital fusiform                      | -29 | -78 | -5  | 1630                      |
| <b>Working memory</b><br>N = 334 | 7       | Left Inferior occipital fusiform                      | -29 | -75 | -18 | 138                       |

Brain regions have been identified using the AAL and Oxford-Harvard atlases.

## Conclusions

Overall our results suggest that post-stroke impairment in selective attention is associated with nodes within the executive and energising attentional control networks. Whereas, impairment in post-task recall was associated with areas suggested to be connected with the phonological loop. In particular **Commission** errors were associated with regions responsible for response inhibition, target monitoring/selection and sustaining attention. **Omission** errors were related to the SMA, which is involved in response preparation, selection and subvocal rehearsal. **Working Memory** performance was linked to areas involved in storage, working memory manipulation and processing of verbal information.

## References

- Bates, E., Wilson, S.M., Saygin, A.P., Dick, F., Sereno, M.I., Knight, R.T., Dronkers, N.F. (2003). Voxel-based lesion-symptom mapping. *Nature Neuroscience*, 6, 448-450.
- D'Esposito, M., Postle, B. R. (2015). The Cognitive Neuroscience of Working Memory. *Annual Review of Psychology*, 3(66), 115-142.
- Gillebert, C. R., Humphreys, G. W., & Mantini, D. (2014). Automated delineation of stroke lesions using brain CT images. *NeuroImage*, 4, 540-548.
- Humphreys, G. W., Bickerton, W-L., Samson, D., & Riddoch, J. M. (2012). *Birmingham Cognitive Screen*. Psychology Press, Hove and New York.
- Marshall, G. (2011). Executive function and instrumental activities of daily living in MCI and AD. *Alzheimer's Dementia*, 7, 300-308.
- Stuss, D. T., Shallice, T., Alexander, M. P. & Picton, T. W. (1995). A Multidisciplinary Approach to Anterior Attentional Functions. *Annals of the New York Academy of Sciences*, 769(1), 191-212.

