Parieto-occipital cortex activation during self-generated eye movements in the dark

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Summary

A number of extrastriate visual areas in the parietooccipital cortex are known from single-cell recordings of the macaque monkey to be involved in the coding of eyeposition signals in the brain. These are important for the accurate location of visual objects in extrapersonal space. It can be predicted that these areas will show increased activation during the performance of eye movements at high frequency. In the present study PET and measurements of the regional distribution of cerebral blood flow (rCBF) were used as indirect measures of neural activity. Two independent groups of normal volunteers performed large-amplitude self-generated eye movements in complete darkness, thus removing the confounding effects of visual stimulation on parietooccipital activation. The first group (group A; n = 5) served as a hypothesis-generating group and the second group (group B; n = 4) served as a hypothesis-testing group. The data were analysed using statistical parametric mapping at a significance level corrected for multiple

comparisons (group A, Z > 4.08; group B, Z > 4.04). Significant rCBF increases were found for both groups in the frontal eye fields, supplementary eye fields, cerebellar vermis and putamina/thalami. Additionally, activation was found in the cunei in the posterior bank of the parieto-occipital sulcus. Also, the extraocular muscles were activated and, as a consequence of the partial volume effect, projected to the orbitofrontal cortices. At a less conservative threshold, activation was found close to the intraparietal sulci on the left side (Z = 3.91, P = 0.09)and right side (Z = 3.33, P = 0.42). The locations of these areas were confirmed in group B with reference to highresolution structural MRI scans. The activation of the parieto-occipital cortex without overt visual stimuli is interpreted as the result of neural activity related to the reception of efferent copies of motor commands and/or the activation of neurons coding for eye position relative to the orbits. These are important constituents for the location and remapping of visual stimuli in space.

Keywords: saccade; frontal eye field; supplementary eye fields; cuneus; vermis

Abbreviations: AC = anterior commissure; EOG = electro-oculography; PC = posterior commissure; rCBF = regional cerebral blood flow; SPM = statistical parametric mapping

Introduction

Several mapping studies of the cerebral organization of areas involved in saccadic eye movements in the human have been performed using regional cerebral blood flow (rCBF)-based techniques (Melamed and Larsen, 1979; Fox *et al.*, 1985; Paus *et al.*, 1993, 1995; Anderson *et al.*, 1994; Nakashima *et al.*, 1994; O'Driscoll *et al.*, 1995; O'Sullivan *et al.*, 1995; Darby *et al.*, 1996; Petit *et al.*, 1996; Sweeney *et al.*, 1996; Law *et al.*, 1997). These have demonstrated the involvement of a widely distributed network including cortical and subcortical areas known through electrical stimulation, single-cell recordings and ablation studies in, for example, the cat and the monkey (Schall, 1991*a*).

The neurophysiological evidence suggests that large

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sections of the saccade-generating system have visual properties. These include some predominantly motor regions, such as the frontal eye fields (Schall, 1991*b*) and the supplementary eye field (Schall, 1991*c*). These areas are possibly involved in the target selection of a visually guided saccade. Conversely, some predominately visual areas in the parieto-occipital lobe [e.g. inferior parietal lobe, area V3A and area PO (V6)] are actively modulated by non-visual information, e.g. the angle of gaze (Andersen and Mountcastle, 1983; Galletti and Battaglini, 1989; Galletti *et al.*, 1995). The gaze-dependent neurons in the parieto-occipital region might be involved in the construction of an internal map of the visual environment in which the

topographical position of the objects reflects their objective position in space instead of reflecting the retinotopic position of their images, thus functioning in encoding spatial locations of the field of view in a head frame of reference. Such an objective map of the visual world might allow the stability of visual perception despite eye movements (Galletti and Battaglini, 1989).

One obvious strategy to locate the non-visual activation components of these areas located in the dorsal visual stream during eye movements would be to perform self-generated eye movements in the dark. This has previously been performed using PET by Petit *et al.* (1993, 1996). However, in both of these studies no activation of visual areas in the dorsal visual stream was found when the task required the simple, on-line programming and execution of self-generated saccades in the dark. As the neurophysiological evidence suggests that the occipitoparietal cortex is involved, it seemed justified to challenge these negative findings.

In the present study we have repeated the paradigm using PET in two separate groups of normal subjects serving as hypothesis-generating and as hypothesis-testing data sets, respectively. Furthermore, in the hypothesis-testing group structural MRI scans were acquired to confirm the anatomical locations of activated areas in the individual subjects.

Materials and methods

The subjects consisted of strongly right-handed (Oldfield, 1971) normal volunteers and were divided into two groups. The first group (A) was the hypothesis-generating group and consisted of five subjects (median age, 24 years; range, 23–24 years; three females, two males). The second group (B) was the hypothesis-testing group and consisted of four subjects (median age, 21 years; range, 21–34 years; one female, three males). None of the subjects had past or present neurological or psychiatric disorders or actively used medication or recreational drugs. All had normal clinical examinations of visual acuity without correction and no ophthalmological disorders, such as strabismus, were present.

Informed consent was obtained according to the Declaration of Helsinki II and the study was approved by the local ethics committee of Copenhagen [J. Nr. (KF) 01–339/94].

Activation paradigm and behavioural control

The two conditions were the resting state with eyes closed and the performance of voluntary self-generated large-amplitude horizontal saccadic eye movements with the eyes open. Each scan was carried out in complete darkness for both conditions. This was achieved by fitting over the eyes a pair of black goggles that permitted the eyes to move around freely. Additionally the goggles were covered with dense black cloth and the scanner gantry was draped with a black curtain. A total of 12 scans were performed per subject, and each condition was presented in randomized order. However, for group A data from only six of the scans were used as the other six scans were reserved for unrelated paradigms. Thus, each condition was repeated three times in group A and six times in group B. Each subject was trained in the eye movement task for a few minutes prior to scanning.

Eye movement performance was recorded after 20 min of dark adaptation using direct current electro-oculography (EOG) at a sampling frequency of 1 kHz. The EOG signal was calibrated before and after the scan session to 13 LEDs (light-emitting diodes) at horizontal visual angles ranging from -60° to 60° . The interdiode visual angle was 10° . The resulting calibration curves were sigmoidal in shape, which allowed conversion of the EOG signal to visual angle by fitting a fifth-order polynomial to the curves.

PET scanning

PET scans were obtained with an 18-ring GE-Advance scanner (General Electric Medical Systems, Milwaukee, Wis., USA) operating in 3D acquisition mode, producing 35 image slices with an interslice distance of 4.25 mm. The total axial field of view was 15.2 cm with an approximate in-plane resolution of 5 mm. The technical specifications have been described elsewhere (DeGrado *et al.*, 1994).

Every subject in the two groups received 12 intravenous bolus injections of 200 MBq (5.7 mCi) of $H_2^{15}O$ with an interscan interval of 10–12 min. The isotope was administered in an antecubital intravenous catheter over 3–5 s followed immediately by 10 ml of physiological saline for flushing. Head movements were limited by head-holders constructed from thermally moulded foam.

Before the activation session a 10 min transmission scan was performed for attenuation correction. Subjects were asked to initiate eye movements ~15 s before the isotope arrived at the brain, and they continued throughout the acquisition period of 90 s (Kanno *et al.*, 1991). Images were reconstructed with a 4.0 mm Hanning filter transaxially and an 8.5 mm Ramp filter axially. The resulting distribution images of time-integrated counts was used as an indirect measure of regional neural activity (Fox and Mintun, 1989).

MRI scanning

Structural MRI scanning was performed with a 1.5 T Vision scanner (Siemens, Erlangen, Germany) using a 3D MPRAGE (magnetization prepared rapid acquisition gradient echo) sequence (TR/TE/TI = 11/4/300 ms, flip angle = 12°). The images were acquired in the sagittal plane with an in-plane resolution of 0.92 mm and a slice thickness 1.0 mm. The number of planes was 170 and the in-plane matrix dimensions were 256×256 . MRI scans were obtained only for the subjects in group B.

Image analysis

For all subjects the complete brain volume was sampled. Image analysis was performed using statistical parametric mapping software (SPM95, Wellcome Department of Cognitive Neurology, London, UK) (Frackowiak and Friston, 1994). All intra-subject images were aligned on a voxel-byvoxel basis using 3D automated six-parameter rigid-body transformation (AIR software) (Woods et al., 1992). In group B, PET-MRI coregistration was performed using AMIR (automatic multimodality image registration) (Ardekani et al., 1995). In both groups, transformation into the standard stereotaxic atlas of Talairach and Tournoux was performed based on the intra-individual average PET images (Friston et al., 1995a; Talairach and Tournoux, 1988). The stereotaxically normalized images consisted of 31 planes of $2 \times 2 \times 4$ mm voxels. Before statistical analysis, images were filtered with a 16 mm isotropic Gaussian filter to increase the signal-to-noise ratio and accommodate the residual variation in morphological and topographical anatomy that was not accounted for by the stereotaxic normalization process (Friston, 1994). Differences in global activity were removed by proportional normalization of global brain counts to a value of 50.

In the hypothesis-generating data set (group A), testing the null hypothesis rejecting regionally specific condition activation effects was performed by comparing the average of all saccade scans with all resting scans on a voxel-byvoxel basis. The resulting set of voxel values constituted a statistical parametric map of the t statistic, $SPM{t}$. By transforming values from the SPM $\{t\}$ into the unit Gaussian distribution using a probability integral transform, changes could be reported in Z scores (SPM $\{Z\}$). Voxels were considered significant if their Z score exceeded a threshold of P < 0.05 after correction for multiple non-independent comparisons (Z > 4.08). This threshold was estimated according to Friston et al. (1991, 1995b) using the theory of Gaussian fields. The resulting foci were then characterized in terms of the number of voxels and peak Z score above this level. The threshold was subsequently dropped to Z =1.64 (or P < 0.05 uncorrected) in order to observe activation tendencies and in particular to define activated areas in the parieto-occipital cortex.

Data for the independent hypothesis-testing group (group B) were analysed both for the group and individually. The single-subject analysis was performed to assess individual variability and increase precision of the anatomical location of cerebral activation. The replication values from the analysis for group B were acquired by sampling the Z scores on the peak coordinates of foci defined in the group A analysis, both as a group and individually, at a threshold value of P < 0.05 uncorrected. Furthermore, group B was analysed independently of group A at a threshold value of P < 0.05 (Z > 4.04) corrected for multiple non-independent comparisons, and the locations of these activated areas were subsequently located in the individual subjects at a threshold of P < 0.05 uncorrected.

Changes in rCBF measurements are confounded by global changes. This source of variance was accounted for in the present study by proportional normalization of global brain counts to a value of 50. By default the SPM software obtains the global values from the grey matter voxels by averaging only count values greater than 80% of the maximum. Furthermore, this threshold value also acts as a data reduction device, limiting the effective space where significant changes can be found. Using this standard setting, subsequent analysis revealed significant activations in regions close to the orbitofrontal cortices (see Results), which we suspected had an extracerebral origin (Drevets et al., 1992), e.g. increases in blood flow in the eye muscles. To investigate this further we performed single-subject analysis on the subjects in group B at the maximum resolution possible and projected the results onto the corresponding structural MRI scans for anatomical localization. These analyses were thus performed without the application of a Gaussian filter kernel, without reducing the volume by thresholding, and at a threshold of P < 0.05 uncorrected.

Results

Eye movements

In the resting state low-amplitude deflections of the eyes were observed. During the self-generated eye movement task the average number of movements per second for group A was 2.04 \pm 0.22 (SD) and the amplitudes were 46.7 \pm 6.9° (SD) for the right and 47.7 \pm 3.3° (SD) for the left hemifield, respectively. For group B the corresponding values were 1.87 \pm 0.33, and 48.4 \pm 4.9° and 48.2 \pm 4.2°. There was no significant difference between the number of eye movements performed for the two groups in a two-tailed unpaired *t* test [P > 0.05; t(37) = 1.9]. An example of the sampled EOG recordings from a single subject (subject 3, group B) in the time period immediately after the arrival of the H₂¹⁵O bolus at the brain can be seen in Fig. 1.

Activation patterns

Group A

The areas that were significantly activated during the performance of self-generated eye movements in group A are shown in Table 1 and Figs 2 and 3. The lower-case letters in square brackets in Table 1 refer to various cerebral structures defined in the legend of Table 1 and illustrated in Fig. 3.

In the frontal lobes the middle frontal gyri areas were activated, probably corresponding to the supplementary eye fields ([b] in Table 1) (Fox *et al.*, 1985). Bilaterally, close to the precentral gyri, activated areas were seen extending from the frontal operculum to the middle frontal gyrus, fusing with the supplementary eye field activation on the right, probably corresponding to the frontal eye fields ([a]).

In terms of the number of activated voxels and the Z score, the activation of the cerebellum ([d]) was the greatest. The activation was centred on the medial structures without extension to the lateral cerebellar hemisphere and involved

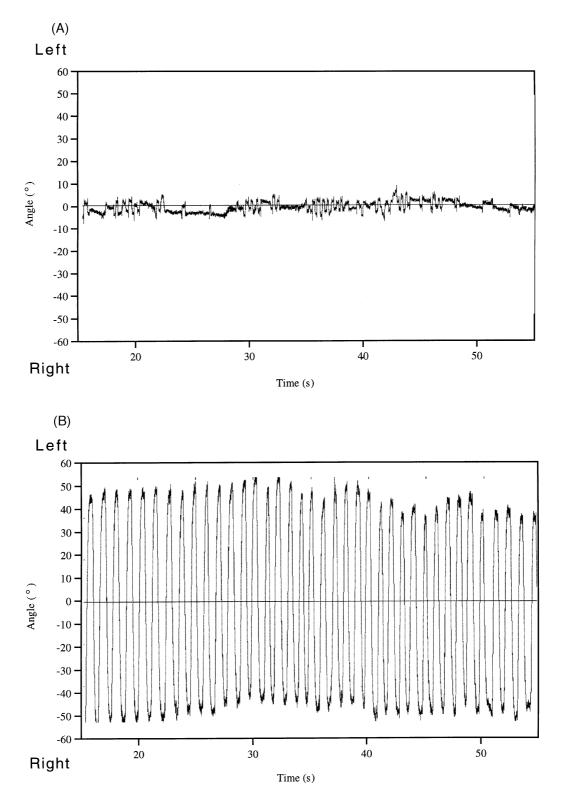


Fig. 1 A sample of horizontal EOG recordings in a single subject calibrated in degrees. In both rest (**A**) and self-generated eye movement (**B**) conditions, the $H_2^{15}O$ bolus reached the brain ~20 s after the initiation of the eye movements. It is behaviourally related rCBF events within the following 30 s that are mainly responsible for the activation pattern in that particular condition (Iida *et al.*, 1991; Silbersweig *et al.*, 1993).

	Region	Group A							Group B		
		Talairach coordinates			Size (voxels)	Extent of focus in z direction (mm)	Z score at peak activation	Z score at peak activation of Group A		No. of subjects	
		x	у	Z				Group	$\frac{\text{Individual}}{Z \pm \text{SD}}$		
[a]	L FEF	-50	-2	36	795	$12 \rightarrow 56$	4.82	2.88	2.6 ± 0.4	4	
[a]	R FEF &	42	-8	48		$12 \rightarrow 60$	5.33	4.30	2.3 ± 0.2	4	
[b]	L & R SEF	4	-10	60	1637	$48 \rightarrow 68$	5.73	4.04	3.5 ± 0.7	2	
[c]	L putamen & thalamus	-20	-14	4	252	$-4 \rightarrow 16$	4.75	3.30	2.2 ± 0.2	2	
[c]	R putamen	22	-8	8			4.27	3.01	2.6 ± 0.3	2	
[c]	R thalamus	20	-20	16	344	$-4 \rightarrow 20$	3.19	4.11	2.1 ± 0.2	2	
[d]	Vermis &	16	-64	-20			6.91	5.08	2.9 ± 0.8	4	
[d]	Flocculus region &	-20	-54	-32			4.50	2.22	2.1 ± 0.0	3	
[d]	Mesencephalon	-6	-38	-4	3639	$-48 \rightarrow 0$	4.48	NS	NS	0	
[e]	L orbit (eye muscles)	-18	28	-20	233	$-24 \rightarrow -12$	6.32	6.54	3.3 ± 0.6	4	
[e]	R orbit (eye muscles)	20	28	-20	398	$-24 \rightarrow -8$	5.95	7.39	4.0 ± 1.0	4	
[f]	L cuneus &	-12	-86	32			4.04	4.07	2.7 ± 0.9	3	
[f]	R cuneus	8	-86	32	382	$24 \rightarrow 40$	4.54	3.11	2.8 ± 0.6	3	

Table 1 Results from the hypothesis-testing group (B) showing group activations and the average of individual subject activations derived from the coordinates of activated areas from the hypothesis-generating group (A)

Comparison of the self-generated eye movement scans with rest for groups A and B showing the anatomical regions of foci of significant change in normalized regional counts at a significance threshold of P < 0.05, corrected for multiple non-independent comparisons. The coordinates are given in the standard stereotaxic space (Talairach and Tournoux, 1988) in mm for the maximally significant pixel in each area in the order x, y, z; x is the lateral displacement from the midline (– for the left hemisphere and + for the right hemisphere); y is the anterior–posterior displacement relative to the anterior commissure (– for positions posterior to this); z is the vertical displacement relative to the AC–PC line (– below this line). The lower case letters in square brackets in this table and Fig. 3 refer to the following structures: a, FEF (front eye field); b, SEF (supplementary eye field); c, putamen/thalamus; d, cerebellum; e, eye muscles (artefact); f, cuneus. Interconnected foci are indicated by '&' and the total voxel counts above the threshold are given. The vertical (z) extension of the foci gives the number of continuous slices covered by the activated area. The values from group B are sampled from the analysis of the whole group and from the single subject analysis at the coordinates derived from the group A analysis. The number of subjects contributing with a Z value >1.64 (P < 0.05, uncorrected) to the calculated mean and standard deviation of the Z scores are given. L = left; R = right; NS = not significant; \overline{Z} = mean of individual Z scores

the vermis, the dentate nuclei, the tonsillae cerebelli, the flocculi and the noduli vermis. At -12 to -4 mm below the anterior commissure–posterior commissure (AC–PC) line (Fig. 2) the left mesencephalon was activated close to the superior colliculus. The cerebellar activation kept within the boundaries of the cerebellum as defined by the atlas of Talairach and Tournoux (1988). Of other subcortical structures, the putamina and thalami ([c]) were activated bilaterally, merging into single foci, on the right in two separate peaks and on the left in a single peak.

In the posterior parieto-occipital cortices, bilateral symmetrical activation foci were seen immediately posterior to the parieto-occipital sulcus in the cuneus ([f]). Additionally, bilaterally in the cortex, close to the intraparietal sulci in the precunei, two foci above the threshold of P < 0.05, corrected, were found at (x, y, z) = (-20, -66, 52); Z = 3.91; P = 0.09, corrected, and (x, y, z) = (32, -58, 48); Z = 3.33; P = 0.42, corrected.

Two crescent-shaped increases ([e]) were seen bilaterally in the region of the orbitofrontal cortices. These represent blood flow increases in the eye muscles (see below).

Lowering the threshold for significant changes to P < 0.05 uncorrected did not reveal new activation foci in cerebral

regions other than those already described. In particular there was no activation in the primary visual cortices.

Group B

With the exception of the mesencephalon, all activated areas defined at the peak Z score in group A were replicated in the analysis of group B. However, only the larger activated areas (frontal eye fields, vermis) were replicated in all of the individual subjects at this location (Table 1). When the peak coordinates were defined in group B independently of group A the same modules could be identified, but with the peak coordinate located at a vector distance ranging from 0 to 22 mm (Table 2). Although the coordinates of the putative frontal eye fields were located close to the cortex of the central sulcus according to the Talairach and Tournoux atlas (1988), the projections on the structural MRI scans showed that they were actually in the precentral gyrus region in all four subjects. It was further confirmed that the cunei were activated on the occipital banks of the parieto-occipital sulci (Fig. 4). Additionally, activation was found close to the right intraparietal sulcus (x, y, z) = (20, -76, 48); Z = 5.54; P <0.05, corrected. Activation of the supplementary eye fields

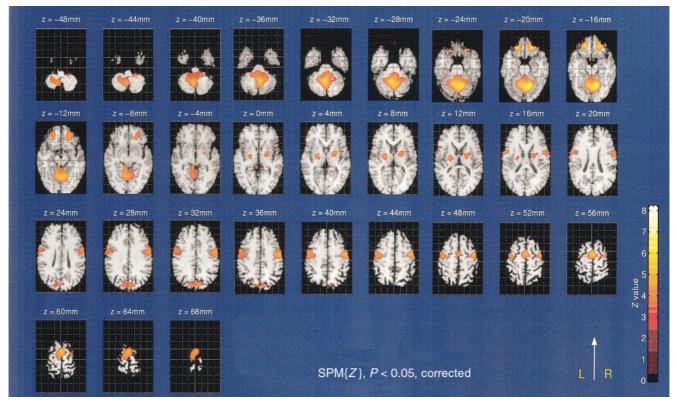


Fig. 2 Group analysis (SPM{*Z*}) of all saccade scans compared with rest in the hypothesis-generating group (group A). The spatial extent of significantly activated areas is for anatomical reference superimposed on a single MRI template in coregistration with the stereotaxic atlas of Talairach and Tournoux (1988). All images are displayed at a significance threshold of P < 0.05, corrected. Group A: n = 5; 3 rest, 3 eye movement scans.

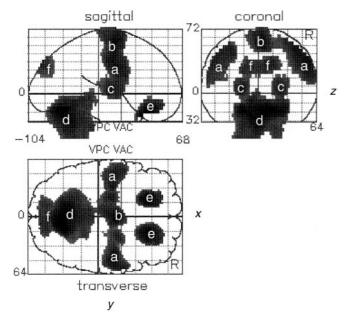


Fig. 3 Statistical parametric map (SPM{*Z*}) of the orthogonal projections for group A of the performance of eye movements versus rest (P < 0.05, corrected). The SPM projections correspond to the stereotaxic grid of Talairach and Tournoux (1988). VPC and VAC denote the vertical projections of the anterior and the posterior commissure, respectively. The lower-case characters refer to regions of activation given in the legend of Table 1.

and the subcortical structures could not be found in all subjects (Table 2).

The results from the single-subject analysis without the inclusion of additional filtering projected on to the structural MRI scans confirmed the suspicion that the orbitofrontal cortex activations arose from extracerebral structures, namely the eye muscles of the orbital cavities (Fig. 5). These had the largest Z scores when performing the analysis in this fashion. The activated areas were concentrated at the apex of the pyramidal shapes of the orbits and were located over the six external ocular muscles situated in the orbital fat.

Discussion

The results of this study confirm data from animal experiments regarding the involvement of parieto-occipital areas during the performance of saccades in the dark. In two independent groups, significant activation was found just posterior to the parieto-occipital sulcus in the cuneus. Although significant activation close to the right intraparietal sulcus was found in the hypothesis-testing group (B) independently, the intraparietal sulcus activations in the hypothesis-generating group (A) were not significant (Fig. 4). However, previous PET activations in this area during eye movements could endorse a less conservative approach (Petit *et al.*, 1996). Besides these extrastriate visual areas, the other activated

Region	Talairach coordinates at peak activation								Z score at peak activation	
	Group				Individual				-	subjects
	x	y z	v	x	у	z	Group	Individual $\overline{Z} \pm SD$		
L FEF	-38	-16	48	22.0	-38 ± 3	-18 ± 3	47 ± 6	7.04	4.6 ± 0.8	4
R FEF &	42	-14	44	7.2	42 ± 10	-15 ± 7	37 ± 3	5.75	4.5 ± 0.4	4
L & R SEF &	-8	-12	60	12.2	-2 ± 5	-8 ± 4	56 ± 6	4.67	3.4 ± 0.9	3
L putamen &					-13 ± 4	-23 ± 7	11 ± 3		3.0 ± 1.1	4
L thalamus	-12	-26	12	16.5	-28	2	12	4.58	3.3	1
R putamen &					21 ± 1	-25 ± 3	8 ± 4		3.6 ± 0.1	2
R thalamus	20	-20	12	12.8	24 ± 2	-11 ± 3	11 ± 4	4.4	2.5 ± 0.7	3
Vermis &	6	-72	-20	12.8	-1 ± 4	-70 ± 2	-21 ± 7	7.39	4.3 ± 1.0	4
L flocculus region &	-16	-46	-48	18.3	-19 ± 4	-52 ± 3	-41 ± 7	5.05	2.6 ± 0.7	3
R flocculus region &	22	-42	-44		22 ± 2	-42 ± 4	-42 ± 6	5.12	3.8 ± 0.4	2
Mesencephalon								NS		0
L orbit (eye muscles)	-22	28	-20	4.0	-25 ± 4	24 ± 3	-23 ± 2	6.69	3.8 ± 1.0	4
R orbit (eye muscles)	30	22	-24	12.3	26 ± 4	25 ± 4	-22 ± 2	7.92	4.8 ± 0.7	4
L cuneus &	-12	-86	32	0.0	-15 ± 3	-86 ± 4	29 ± 2	4.42	3.1 ± 0.7	3
R cuneus	22	-86	32	14.0	21 ± 3	-88 ± 3	32 ± 5	5.56	3.4 ± 0.8	4

Table 2 Results from the hypothesis-testing group (B) showing group activations and the average of individual subject activations

Results from an independent analysis of the subjects in group B, both as a group and as mean values of the single subject analysis. The nomenclature follows Table 1; ν is the vector distance in mm between the coordinates of corresponding regions in groups A and B. FEF = frontal eye field; L = left; R = right; NS = not significant; SEF = supplementary eye field; \overline{Z} = mean of individual Z scores.

areas are replications of and in concordance with the localization of the larger functional modules of the saccade generation system previously found during self-generated eye movements (Petit *et al.*, 1993, 1996). These include the involvement and the location of the frontal eye fields in the cortex of the precentral gyri ([a]), the supplementary eye fields ([b]), the putamina and the thalami ([c]), and the cerebellar vermis in its entire vertical length ([d]). Not previously described was the possibility of confusing changes in eye-muscle blood flow with activation of the orbitofrontal cortices ([e]). The activation of the left mesencephalon was not present in both our groups.

There is ample evidence connecting the parietal lobe with visually guided saccadic eye movements in both the monkey and man (Andersen, 1987; Anderson et al., 1994). Previously activation of the inferior and posterior parietal lobes during eye movement-related paradigms has been found during the performance of visually guided saccades (Anderson et al., 1994; Law et al., 1997), during saccades to a remembered position (Anderson et al., 1994; O'Sullivan et al., 1995; Sweeney et al., 1996), during anti-saccades and conditional anti-saccades (O'Driscoll et al., 1995; Sweeney et al., 1996) and during imagined saccades to visual targets (Law et al., 1997). These areas are located along the dorsal visual stream, the 'where' pathway, and have, through behavioural and clinical studies, long been implicated in the internal mapping of spatial representations (Mishkin et al., 1983; Haxby et al., 1991). Furthermore, the posterior superior parietal lobes close to the cunei have been found to be activated during the performance of prelearned sequences of saccades from memory in the dark (Petit et al., 1996), possibly related to

saccade planning or the intention of saccade performance (Gnadt and Andersen, 1988; Barash, 1997).

Activations in the cunei as individual local maxima have not been described in PET studies of visually guided saccades (Anderson *et al.*, 1994; Law *et al.*, 1997). This is presumably due to the partial volume effect promoted by the image smoothing with broad filter kernels (10–20 mm) involved in the statistical analysis. The cunei are present, but will appear in the dorsal tail of a large occipital activation including neighbouring striate and extrastriate cortices.

The above-mentioned PET studies have found activation in the posterior parietal lobes both bordering and including the cunei. These activations can be attributed to either visuospatial or memory components, which were not present in our experiment. Interpretations of the extrastriate visual cortical activations found in our non-visual motor task could include several possibilities. These areas could themselves send motor command signals (Mountcastle *et al.*, 1975) or represent motor intention (Gnadt and Andersen, 1988), engage in monitoring feedback motor signals (corollary discharge) from motor areas, e.g. the frontal eye fields (Andersen *et al.*, 1987; Duhamel *et al.*, 1992*a*, *b*; Paus *et al.*, 1995), engage in monitoring an eye position signal relative to the orbits (Andersen and Mountcastle, 1983; Andersen *et al.*, 1985*b*) or represent automatic eye movement-related shifts of attention.

To locate visual objects accurately in extrapersonal space we are faced with the dilemma of distinguishing between a change in the location of a retinal image caused by a change in the direction of gaze and the same change caused by an actual displacement of the object in the visual field. The solution could arise from neurons of the visual system that

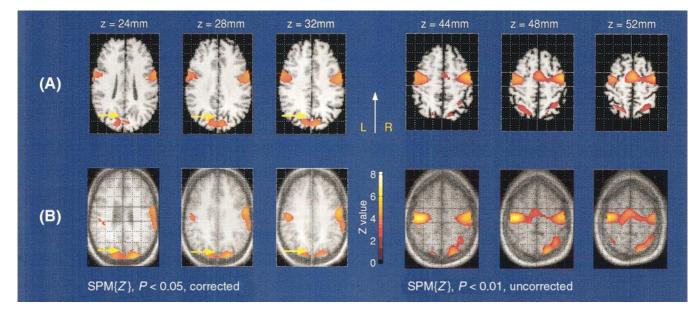


Fig. 4 The top row shows the group analysis (SPM{*Z*}) of all saccade scans compared with rest in the hypothesis-generating group (group A). The spatial extent of significantly activated areas is for anatomical reference superimposed on a single MRI template in coregistration with the stereotaxic atlas of Talairach and Tournoux (1988). In the bottom row the corresponding activation patterns for the hypothesis-testing group (group B) are shown for comparison superimposed on the group average of their stereotaxically normalized MRI scans. The images to the left show slices z = 24 mm to 32 mm above the AC–PC line at a significance threshold of P < 0.05, corrected. The replication of the activation of the cunei at the posterior bank of the parieto-occipital sulcus is seen. The yellow arrows point to the parieto-occipital sulcus. Slices z = 44 mm to 52 mm above the AC–PC line are displayed to the right at a significance threshold of P < 0.01, uncorrected (Z > 2.33). Of particular interest is the activation of the posterior parietal cortex close to and in the intraparietal sulci.

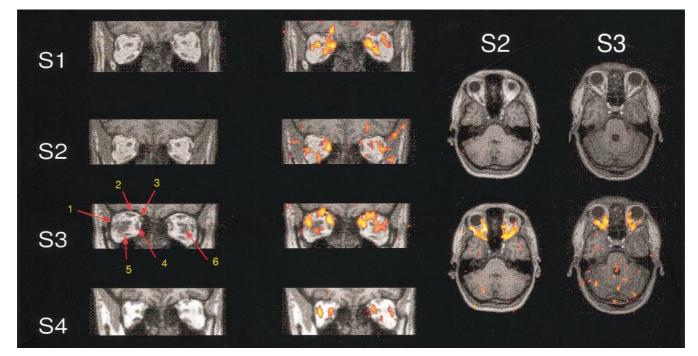


Fig. 5 Coronal anatomical MRI references through the orbital cavities of the four individual subjects in group B (S1–S4) (far left) and corresponding projections of the individual Z score maps calculated with only the PET scanner reconstruction filters (middle left). Transaxial slices of two selected subjects (S2–S3) in a similar display are shown on the right. The activated areas are scaled from Z values of 1.64–5.0. The activated areas were primarily located close to the apex of the pyramidal shaped orbital cavity, and had the largest Z scores in each individual comparison calculated in this fashion. The eye muscles (1–5) and ocular bulb/optic nerve (6) can easily be discerned, embedded in the high-intensity white orbital fat. 1 = lateral rectus muscle; 2 = levator palpebrae superioris muscle and superior rectus muscle; 3 = superior oblique muscle; 4 = medial rectus muscle; 5 = inferior rectus muscle and inferior oblique muscle.

integrate retinotopically organized visual information from their receptive fields and information about gaze direction (Galletti *et al.*, 1993). Neurons sensitive to the position of the eyes in the orbits have been found in the nucleus prepositus hypoglossi in the brainstem (Lopez-Barneo *et al.*, 1982), superior colliculus (Peck *et al.*, 1980) and central thalamus (Schlag *et al.*, 1980) of the cat, as well as in the cerebellar vermis (McElligott and Keller, 1984), extrastriate area V3A (Galletti *et al.*, 1991, 1995), inferior parietal lobe (Sakata *et al.*, 1980; Andersen and Mountcastle, 1983) and the supplementary eye field (Schall *et al.*, 1993) of the monkey.

Based on cytoplasmic and myelin architecture in postmortem human brains, the heavily myelinated dorsal area V3 (V3d) has been tentatively located 'lateral and superior to area V2 in the upper part of the occipital cortex' (the cuneus) (Clarke and Miklossy, 1990). This anatomical location has been confirmed by PET (Shipp et al., 1995) and functional MRI (Sereno et al., 1995; DeYoe et al., 1996). The functional MRI studies were performed using phaseencoded retinal stimulation, which locates area V3A rostral to area V3 behind the parieto-occipital sulcus. In the macaque monkey the extrastriate visual area PO (V6) has been located in the parieto-occipital sulcus close to area V3A (Colby et al., 1988). Both these areas include gaze-dependent neurons that even in darkness combine information about eye position with a restricted retinal receptive field (Galletti and Battaglini, 1989; Galletti et al., 1995, 1996). The high-frequency, large amplitude shifts performed by our subjects would involve a larger population of gaze-dependent neurons than that involved during rest, contributing to the observed signal increase. Thus, the activation of the cuneus could represent activation of either or both of these extrastriate visual areas.

In the macaque monkey, particularly the lateral part of the intraparietal sulcus has been associated with saccadic eye movements through strong connections to the SC and the frontal eye field (Andersen et al., 1985a; Huerta et al., 1987). The inferior parietal lobe does have the capacity to generate saccades by direct electrical stimulation, as demonstrated in 1875 by Ferrier and subsequently by others (Shibutani et al., 1984; Thier and Andersen, 1996), presumably accessing the brainstem saccade generator via either the frontal eye fields or the SC (Keating and Gooley, 1988). However, as very few saccade neurons have the correct temporal sequencing or response properties it is more likely that the saccaderelated activity in the parietal lobe represents efferent motor command copies rather than motor commands and/or proprioceptive input from the extraocular muscles relaying information about the occurrence of an eye movement (Andersen et al., 1987). In a recent PET experiment, Paus et al. (1997) activated the left frontal eye field by focal TMS (transcranial magnetic stimulation). This activation showed significant covariation with the ipsilateral medial parietooccipital cortex in the cuneus immediately posterior to the parieto-occipital sulcus [(x, y, z) = (-12, -80, 30)], i.e. at a

location identical to ours. Since this procedure is independent of a given behavioural set the activations are likely to represent efferent copies powerful enough to elicit detectable changes with PET. The functional significance of the efferent feedback copies could be to anticipate the retinal consequences of eye movements and provide a continuous remapping of the representation of visual space (Duhamel *et al.*, 1992*a*).

The eye movement artefact

The individual SPM analysis of the original PET images projected on to the corresponding structural MRI scans in group B confirmed that the activation observed close to the orbitofrontal cortices was an artefact. The artefact presumably arose from eye movement-induced blood flow increases in the six external eye muscles of the orbital cavities (Fig. 5) with spill-over into the adjacent cortical areas. This effect is enhanced by the filtering process involved in the SPM approach, which, due to the proximity to the orbitofrontal cortex, is inefficiently excluded by the 80% grey matter threshold. Artefacts arising from muscle blood flow increases are known sources of error in methods relying on the measurement of rCBF. Previously, increased tone in the muscles of mastication during anxiety attacks has erroneously been interpreted as activation of the parahippocampal gyri (Reiman et al., 1984) or the temporal poles (Reiman et al., 1989; Drevets et al., 1992).

The artefact has been deliberately included in the data presentation as it has not been described before, in order to increase awareness of its spatial extent and configuration should it be present in future studies. The absence of the artefact in previous PET studies is presumably due to the restricted axial fields of view of the scanners involved.

Conclusion

Our study demonstrates that the presentation of overt visual stimuli during eye movements is not a prerequisite for the activation of the extrastriate visual cortex, the cuneus and possibly the intraparietal sulcus. Note that no other visual areas were activated. It is thus supportive of the concept that these areas are involved in the reception and integration of motor efferent copies and/or eye position signals. These are important constituents of the location and remapping of visual stimuli in space. This would indicate that a segment of the activations of this area during visually guided saccadic eye movements found previously (Anderson *et al.*, 1994; Sweeney *et al.*, 1996; Law *et al.*, 1997) can be attributed to corollary discharge and/or eye position signals associated with the performance of eye movements *per se* apart from the activation arising from the visuospatial task components.

Furthermore, our results indicate that specific attention should be paid to the possibility of misinterpreting extraocular muscle blood flow increases as activations of the orbitofrontal cortices.

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