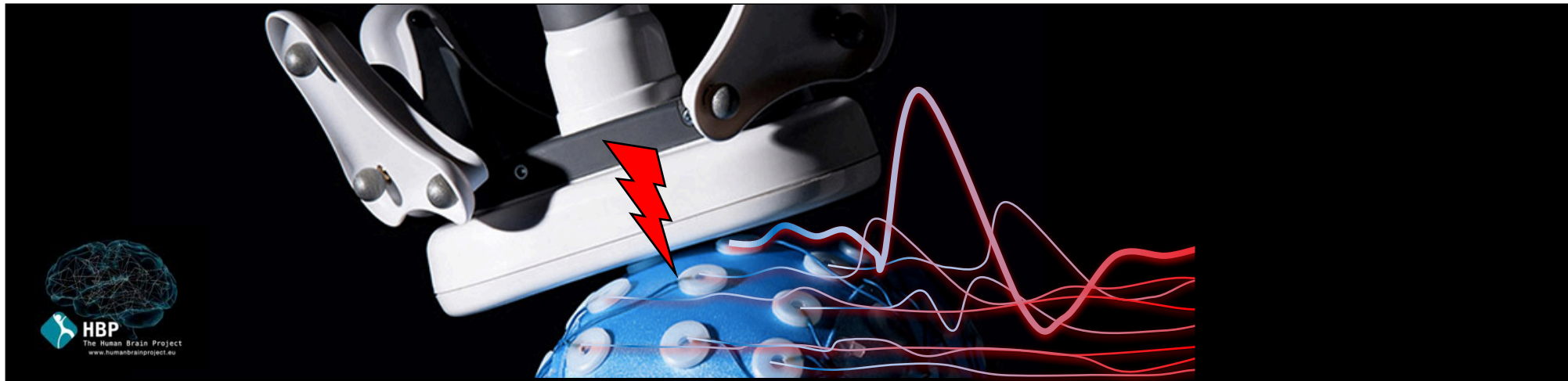
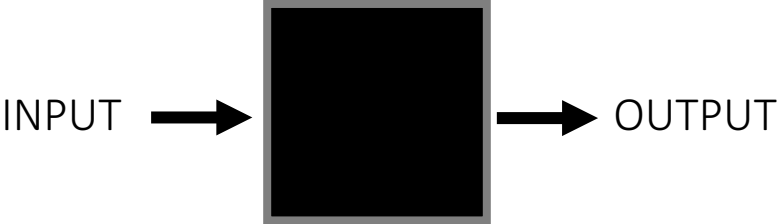


Cortical mechanisms of Loss and Recovery of Consciousness

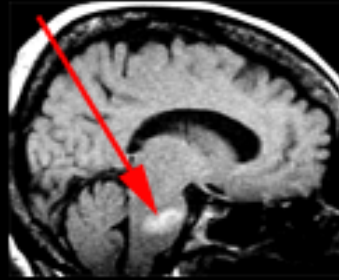
Marcello Massimini MD, PhD



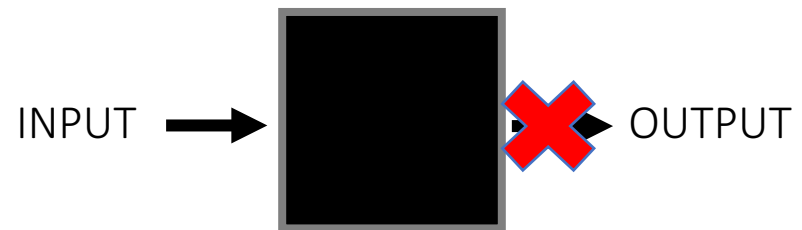
detecting consciousness currently relies on probing sensory processing and motor outputs



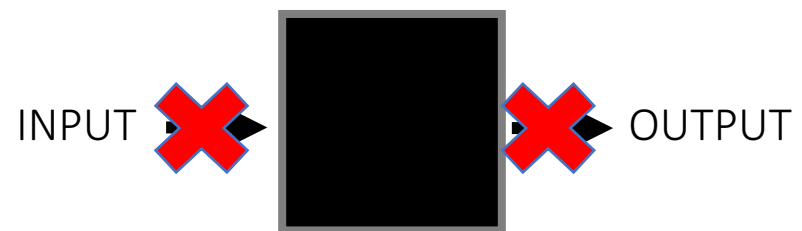
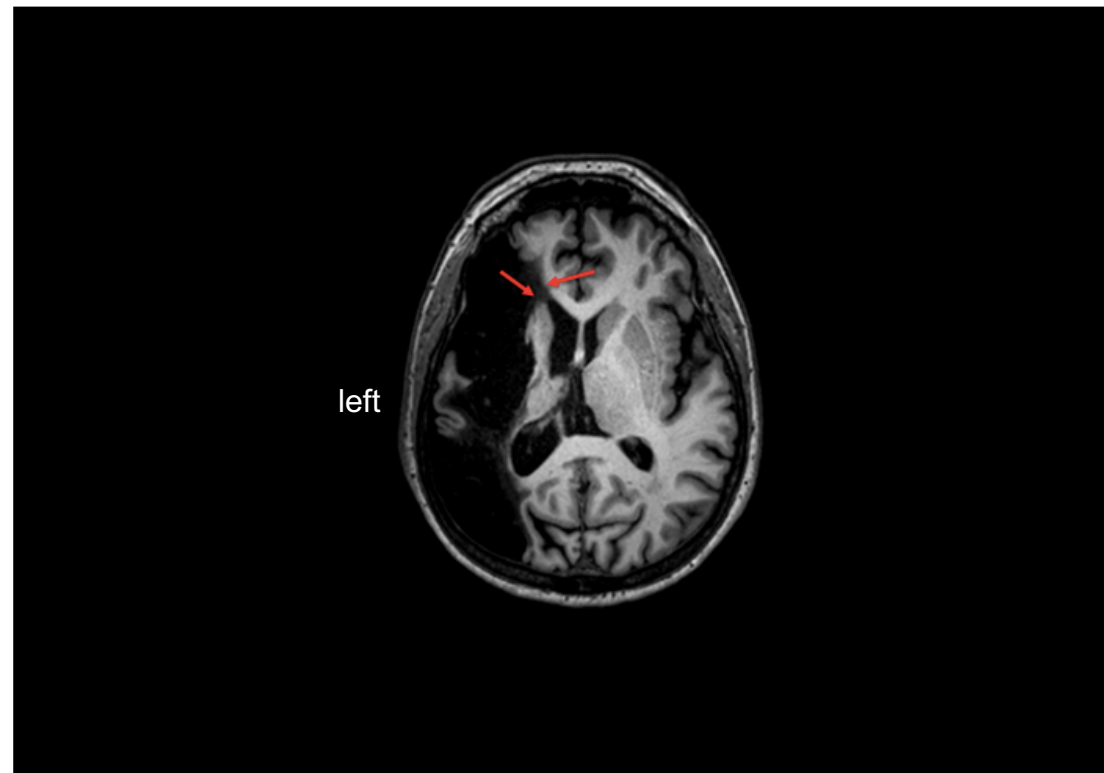
executive functions and motor outputs can be impaired in conscious patients...



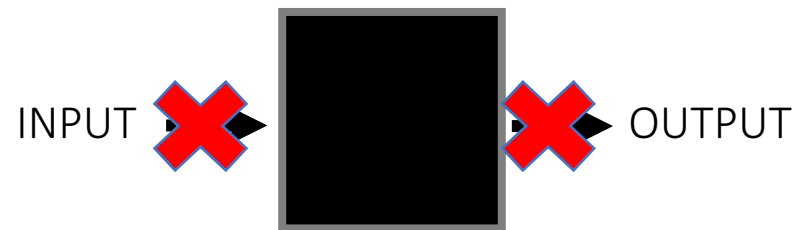
Locked-in Syndrome



...as well as sensory processing

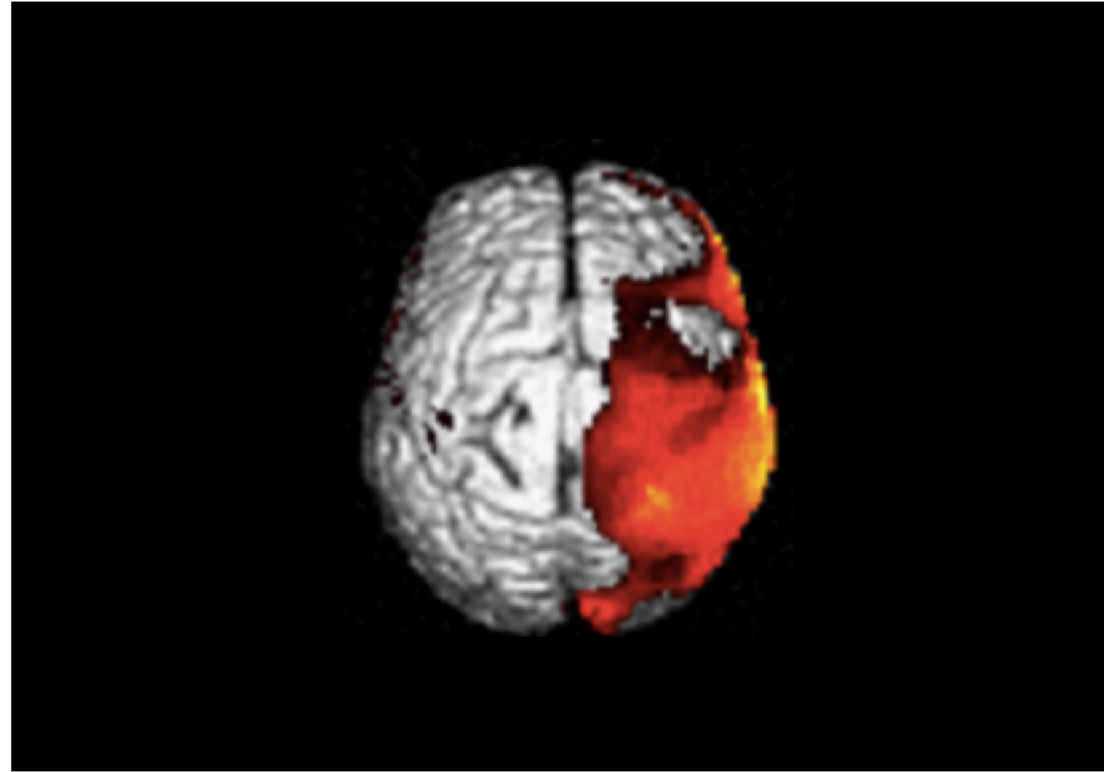


consciousness can be entirely generated within the brain...



Modified from S. D'Alì "The dream"

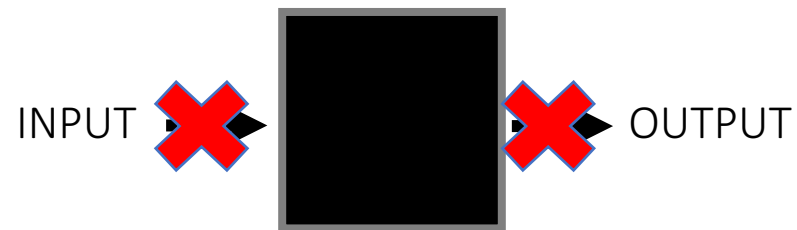
...and we are saving many patients who retain large islands of cortex



In the US:

50,000 unresponsive patients (VS)
300,000 minimally responsive (MCS)

All at risk of misdiagnosis!



A brain-based index independent of sensory processing, executive and motor functions



nature
REVIEWS **NEUROSCIENCE**

Neural correlates of consciousness: progress and problems

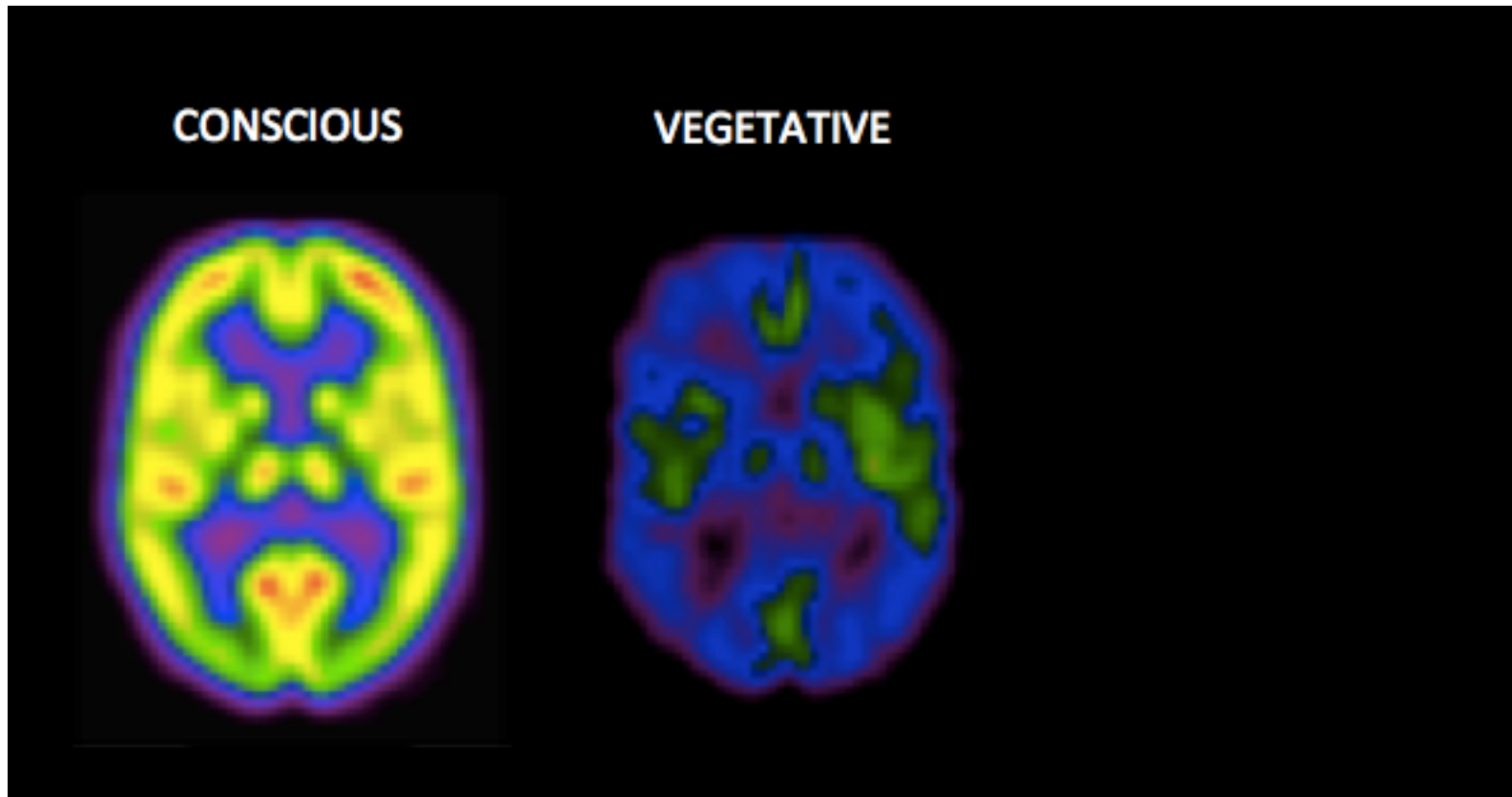
Christof Koch¹, Marcello Massimini^{2,3}, Melanie Boly^{4,5} and Giulio Tononi⁵



level of neural activity?

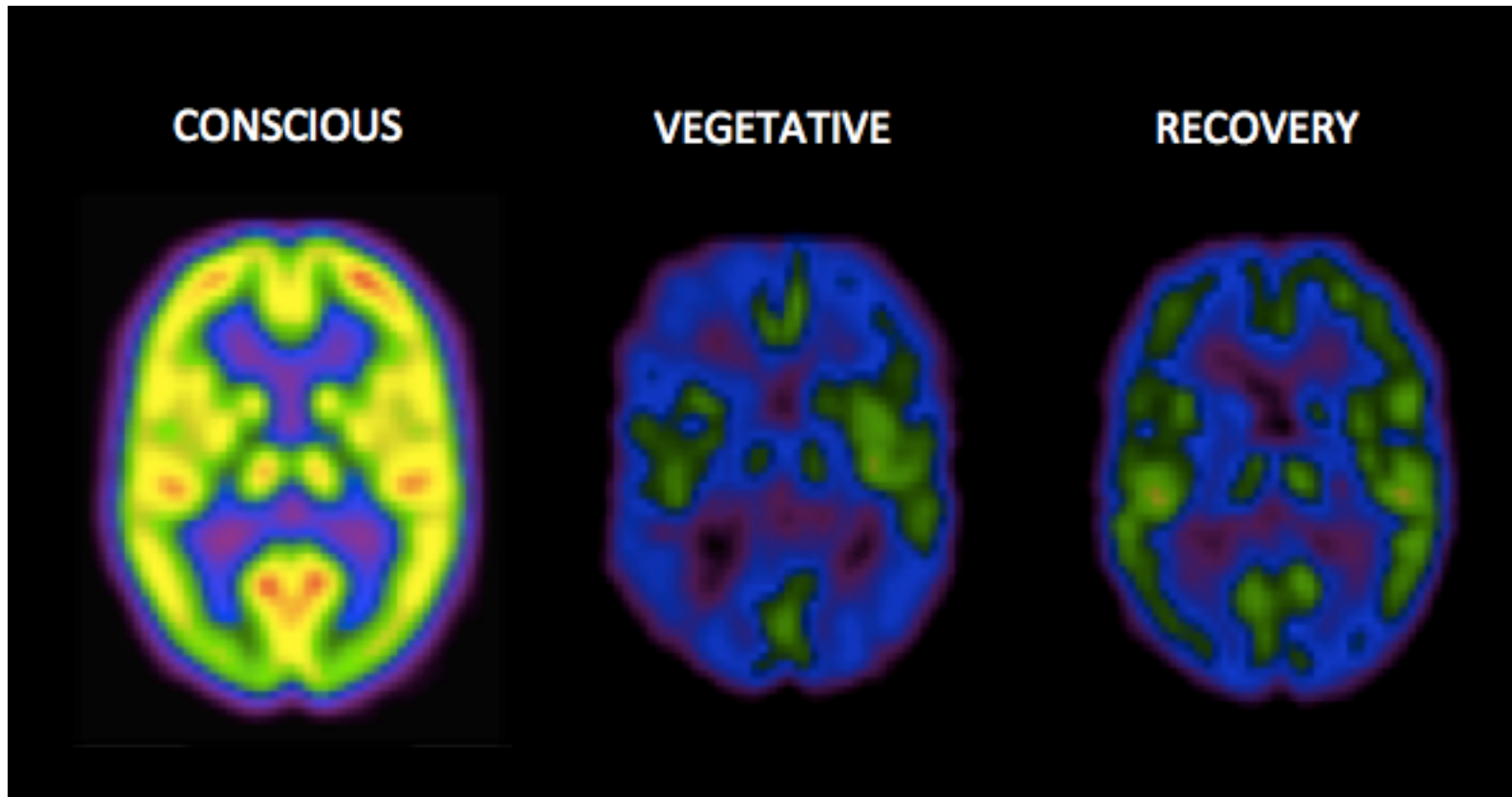


level of neural activity?



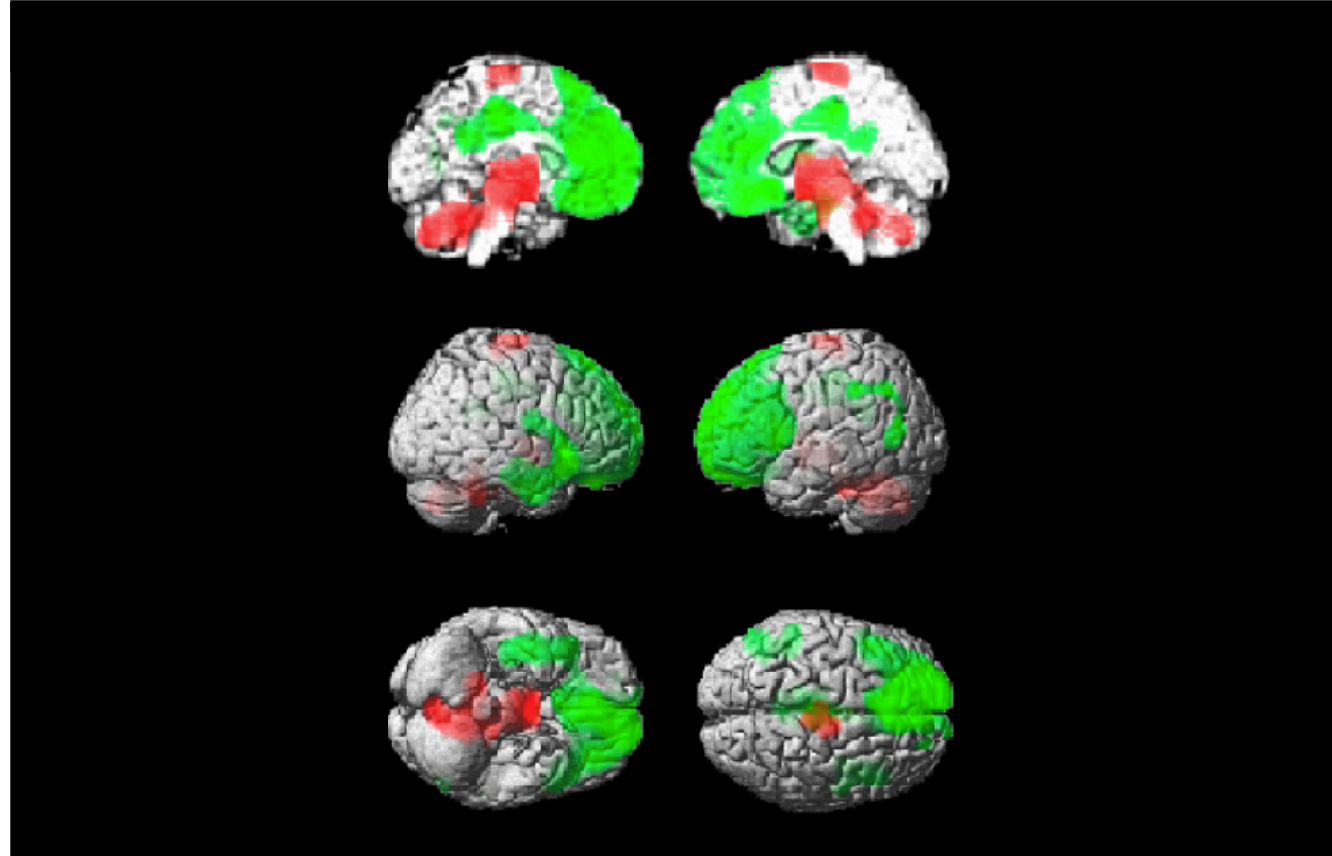


level of neural activity?





level of neural activity?

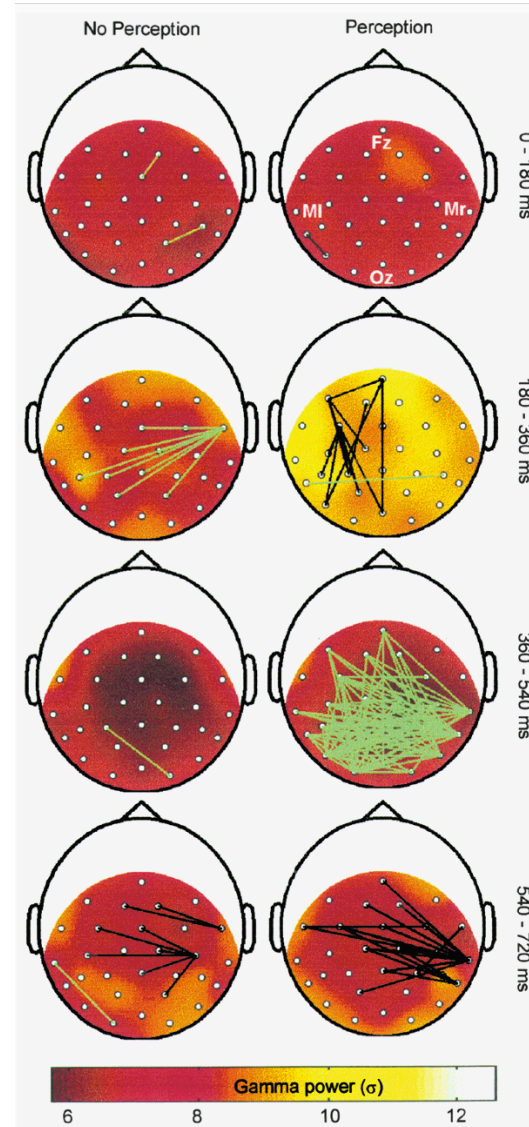
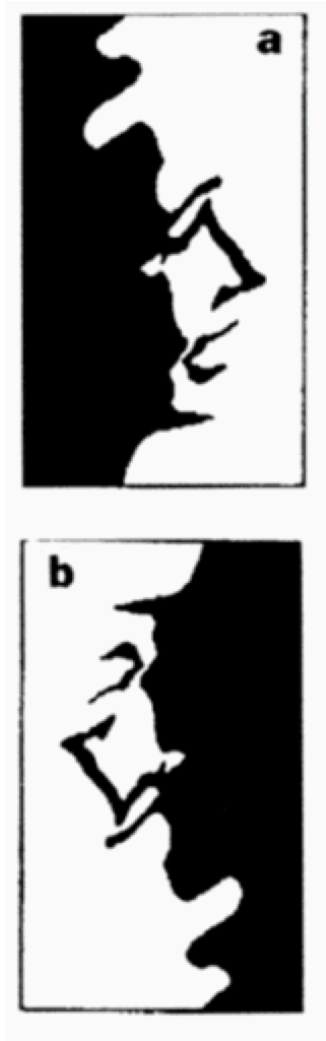




synchrony of neural activity?

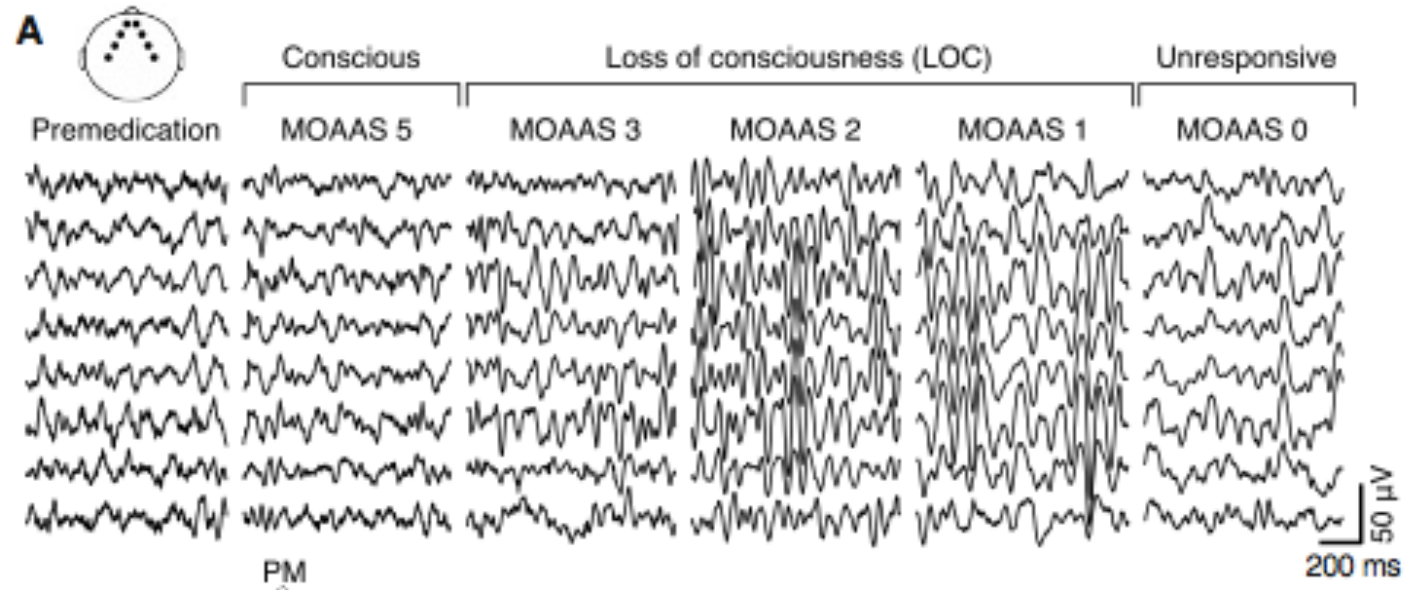


synchrony of neural activity?



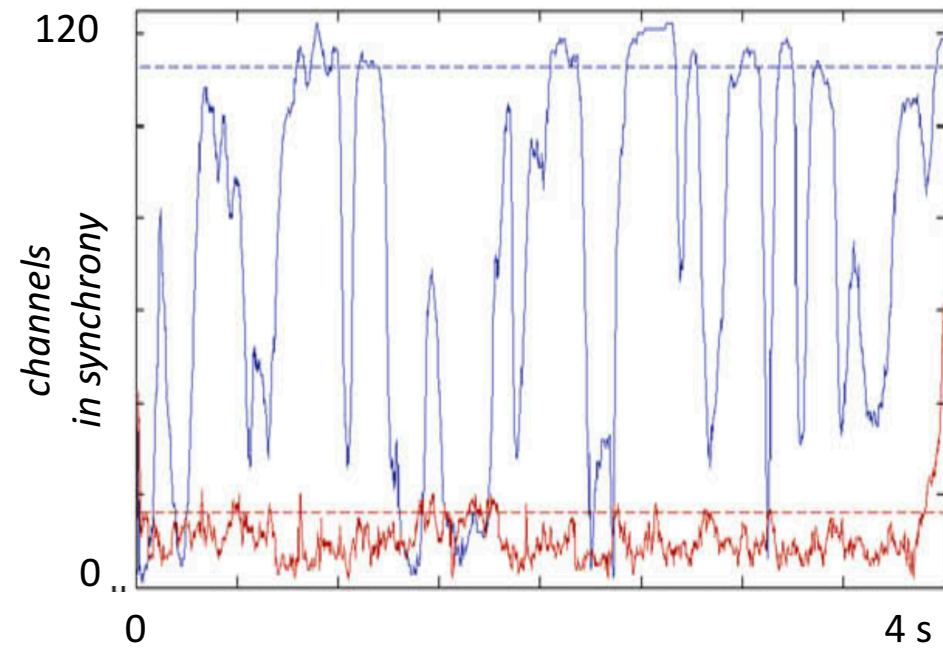


synchrony of neural activity?





synchrony of neural activity?





spectral features, entropy?

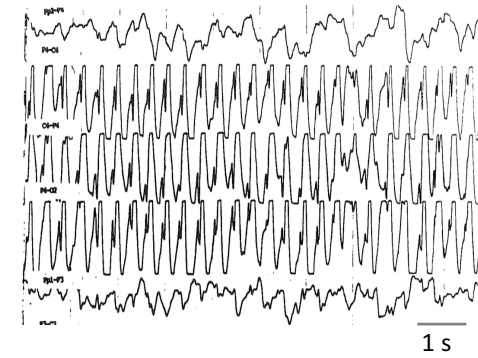
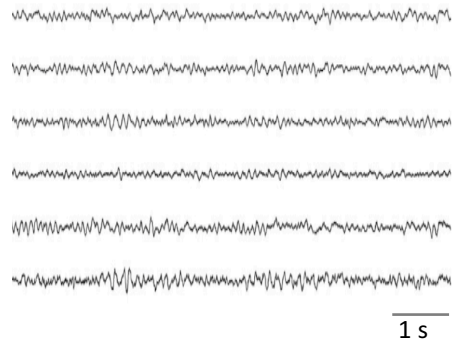


spectral features, entropy?





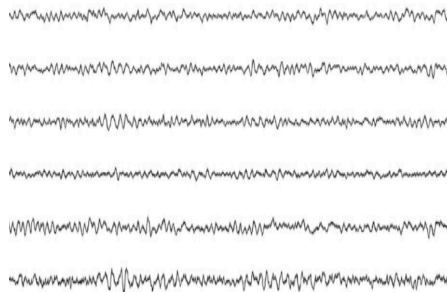
spectral features, entropy?





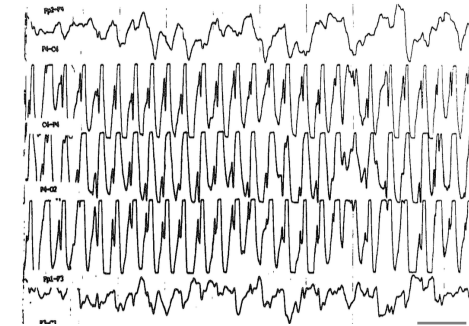
spectral features, entropy?

Alpha Coma



Bremer et al 2005

1 s

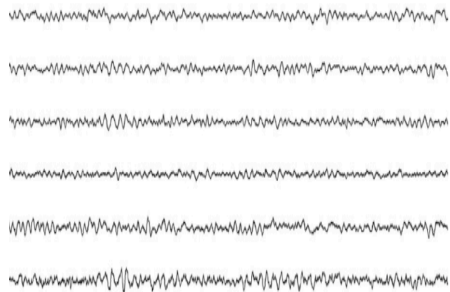


1 s



spectral features, entropy?

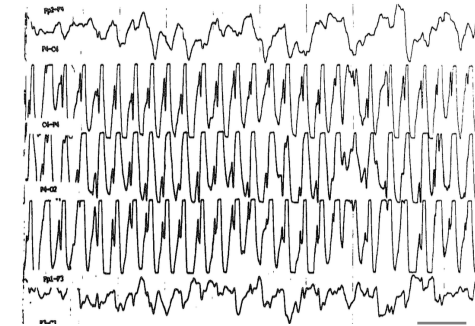
Alpha Coma



Bremer et al 2005 1 s



Status Epilepticus

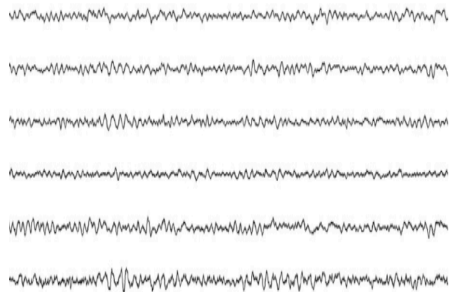


Gokygit et al 1995 1 s



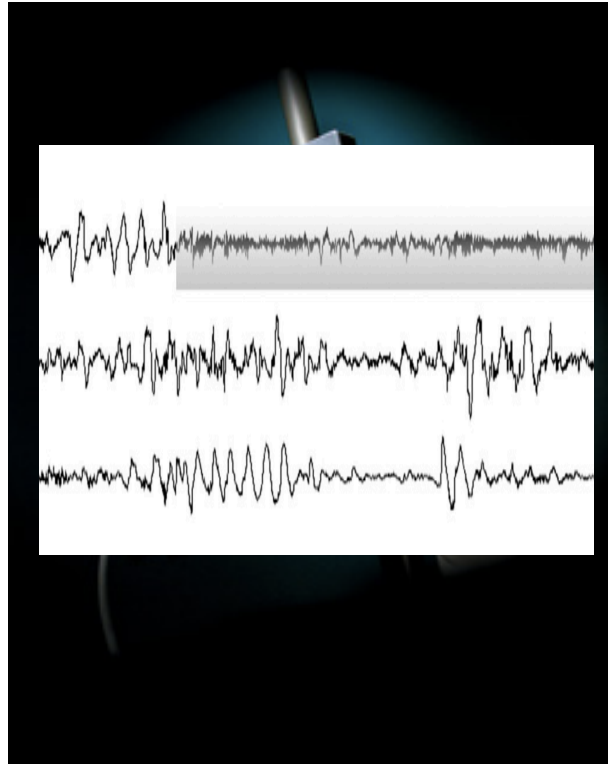
spectral features, entropy?

Alpha Coma



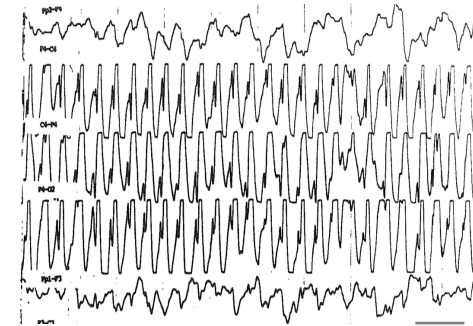
Bremer et al 2005

1 s



Nobili et a 2011

Status Epilepticus



Gokygit et al 1995

1 s

IIT

INTEGRATED INFORMATION THEORY OF CONSCIOUSNESS

IIT

PHENOMENOLOGY: CONSCIOUS EXPERIENCE IS, AT ONCE, DIFFERENTIATED and INTEGRATED

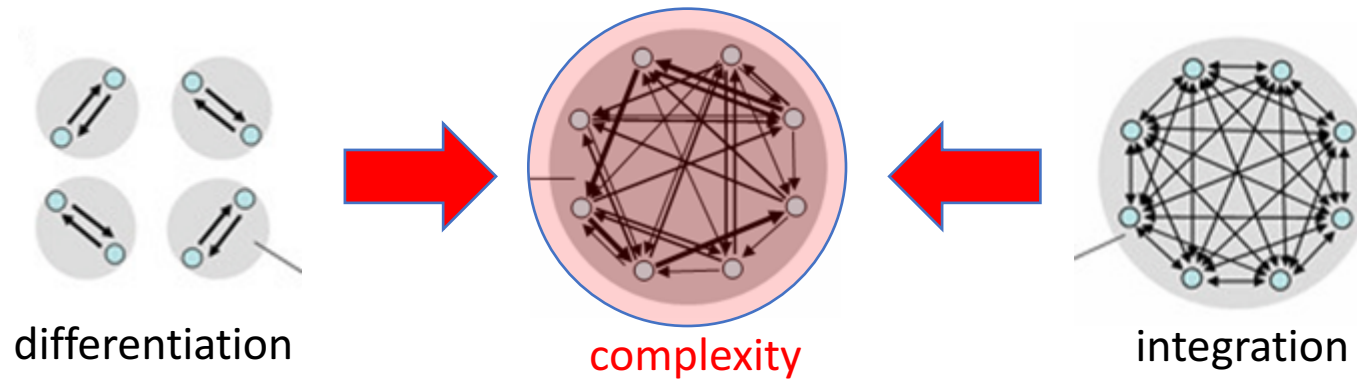


integration & differentiation = **complexity**

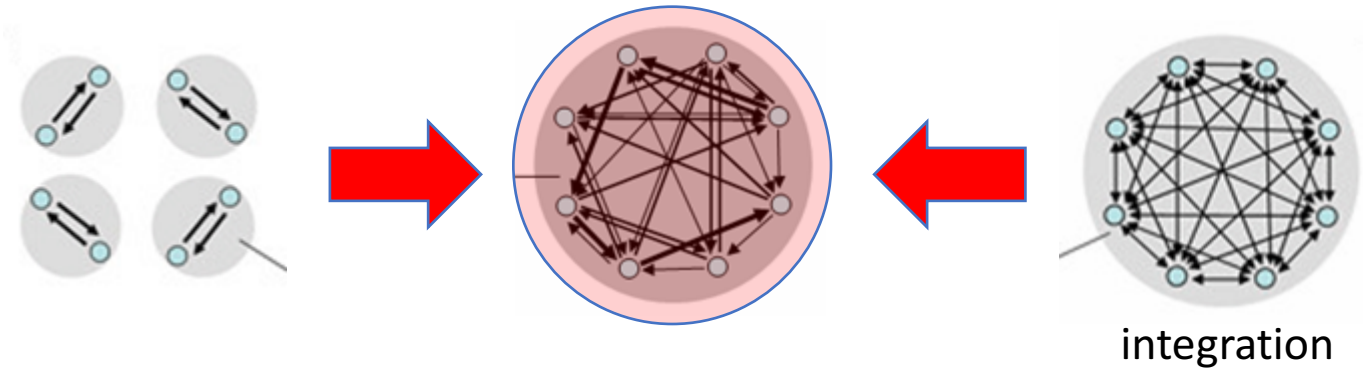
IIT

PHENOMENOLOGY: CONSCIOUS EXPERIENCE IS, AT ONCE, DIFFERENTIATED and INTEGRATED

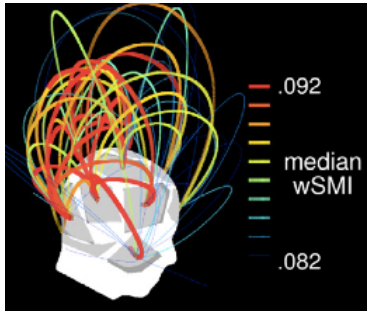
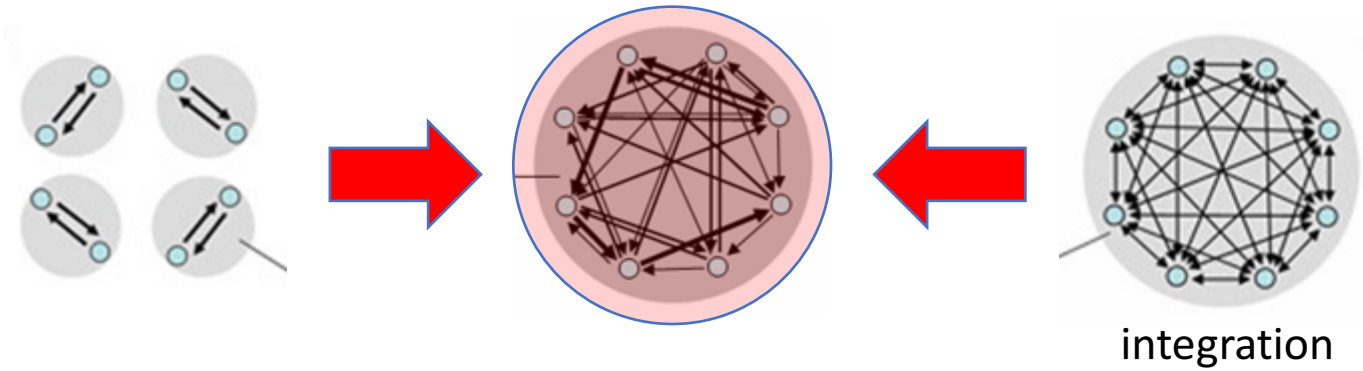
integration & differentiation = complexity



integration & differentiation = complexity

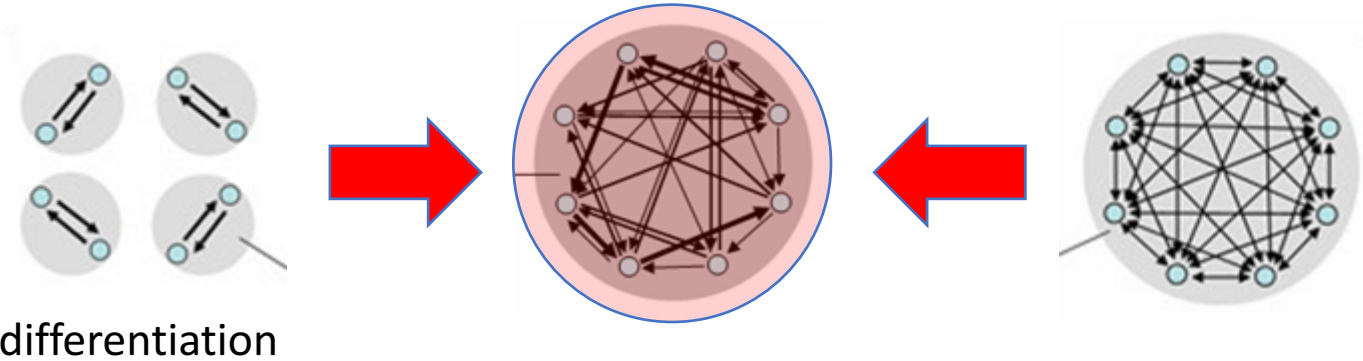


integration & differentiation = **complexity**

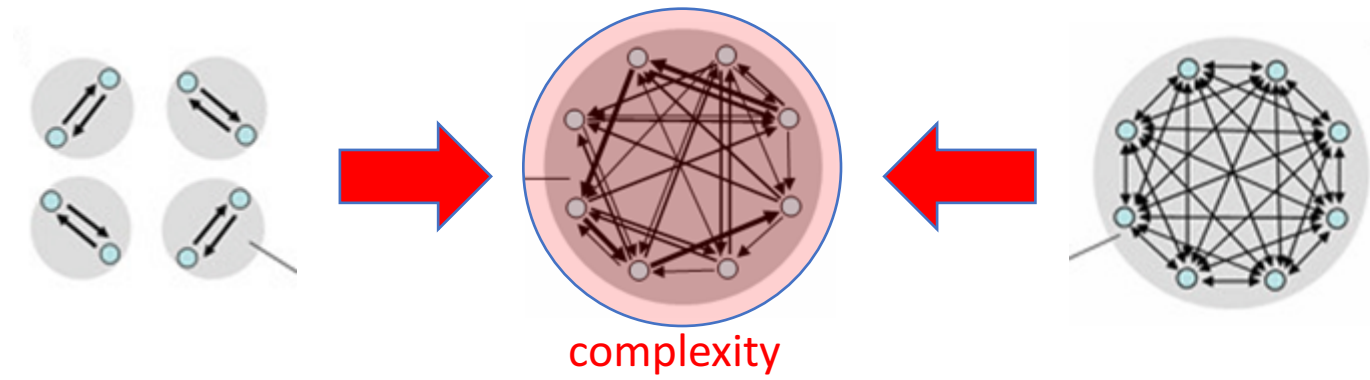


King et al, 2013

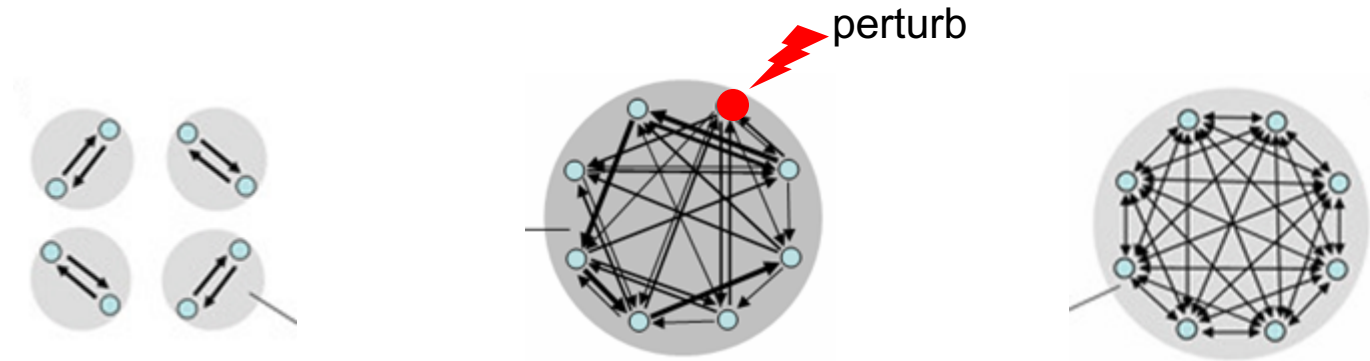
integration & differentiation = complexity



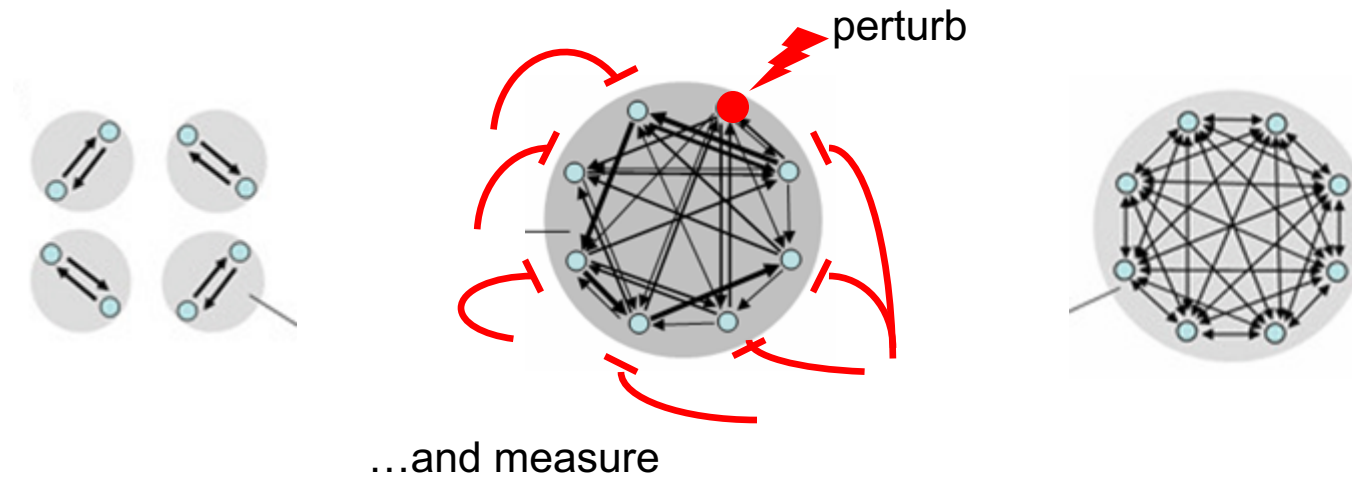
A Perturbational Approach



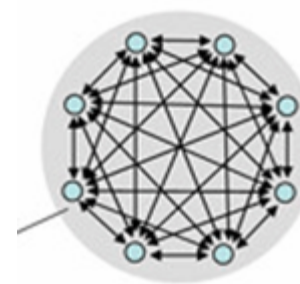
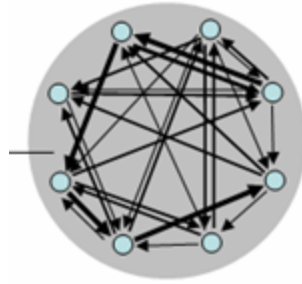
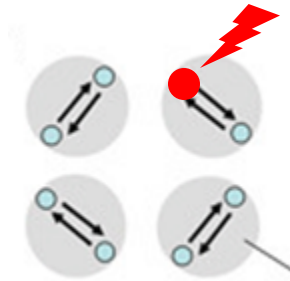
A Perturbational Approach



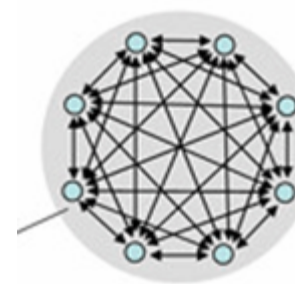
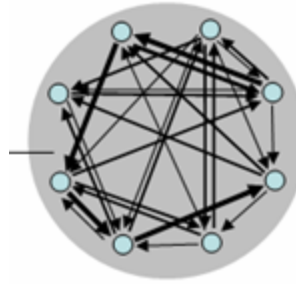
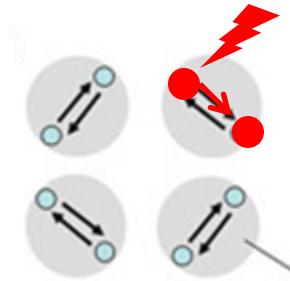
A Perturbational Approach



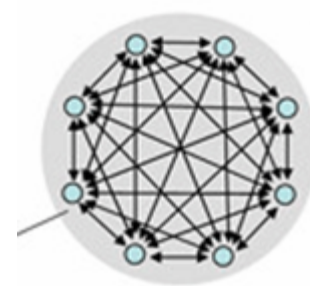
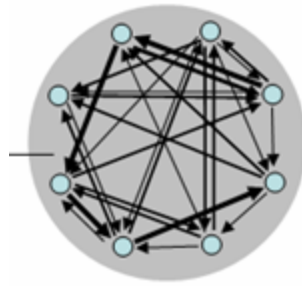
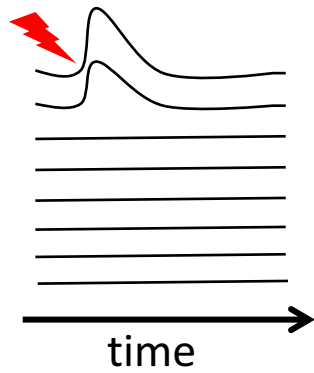
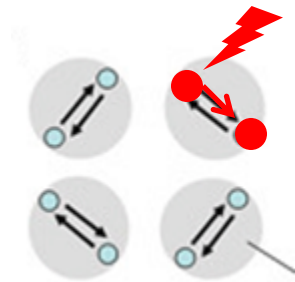
A Perturbational Approach



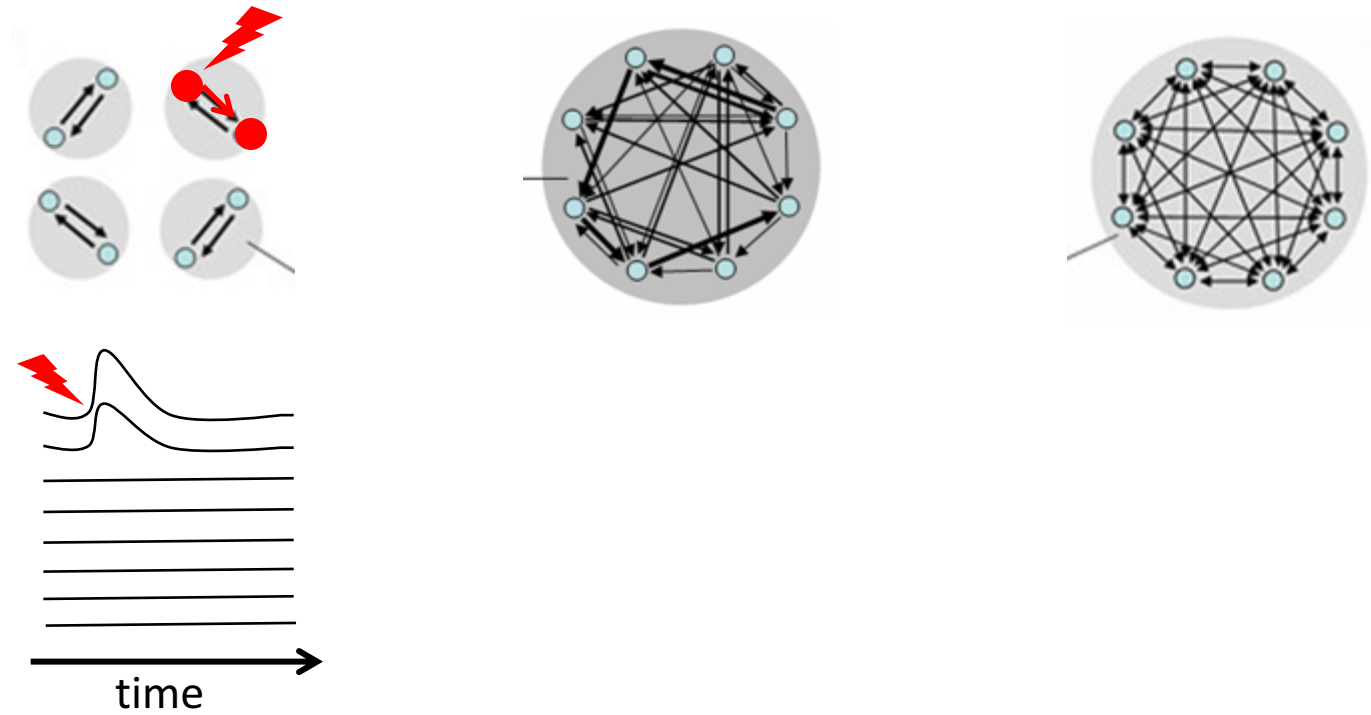
A Perturbational Approach



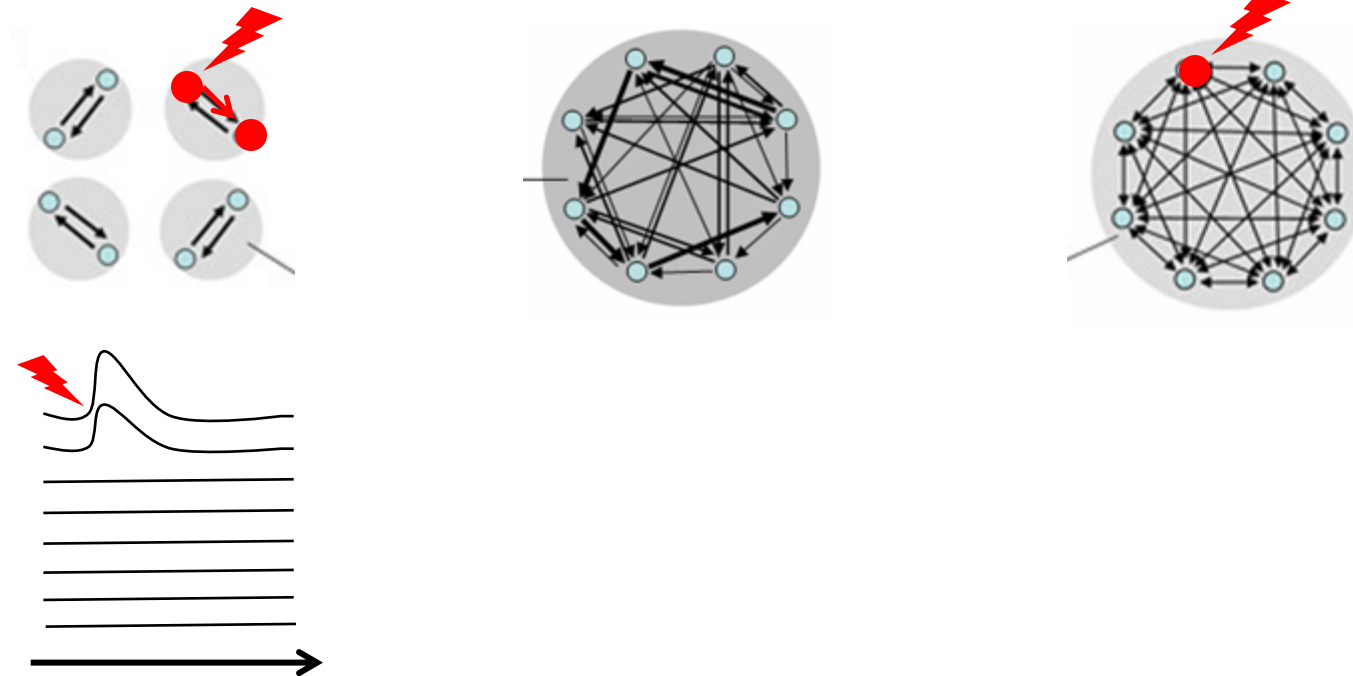
A Perturbational Approach



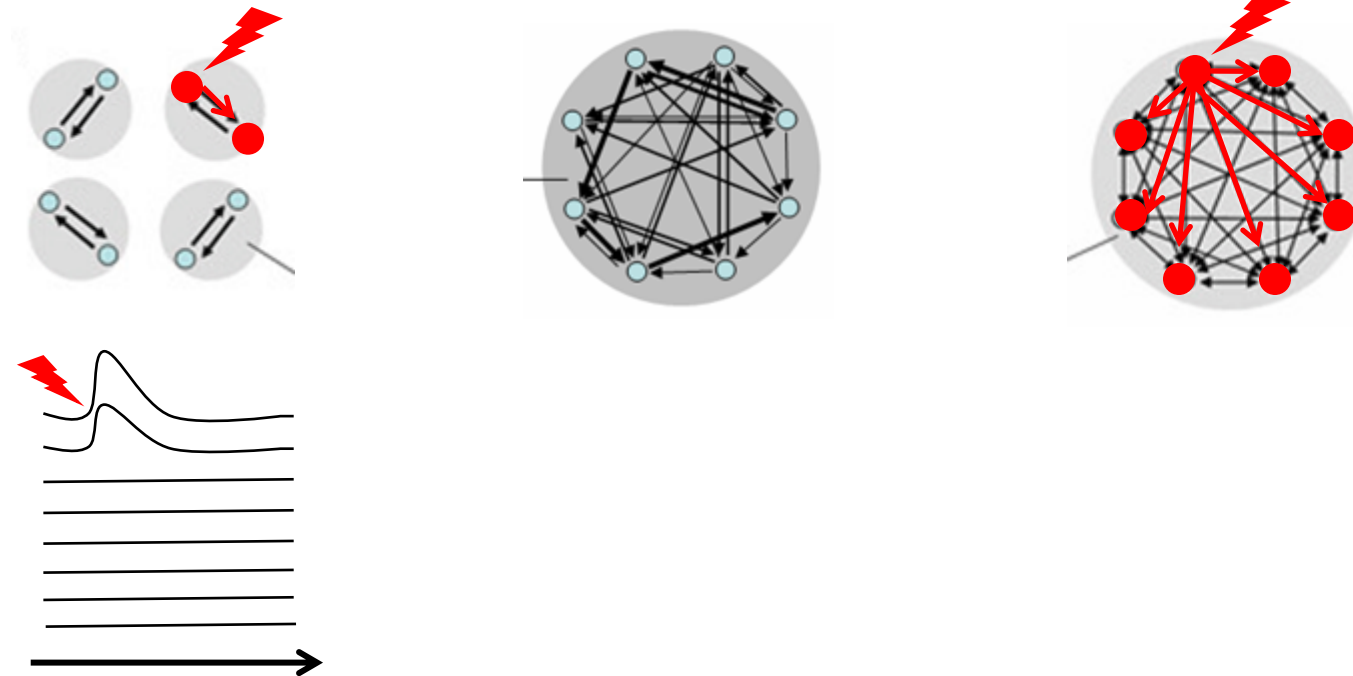
A Perturbational Approach



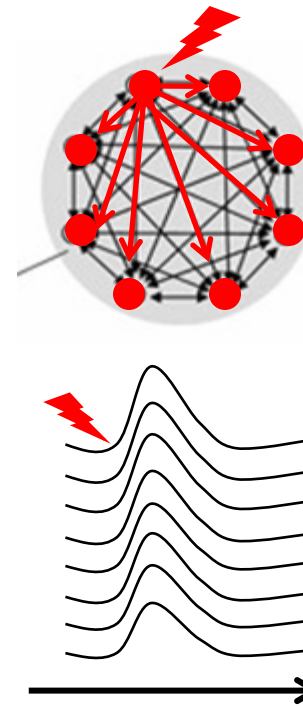
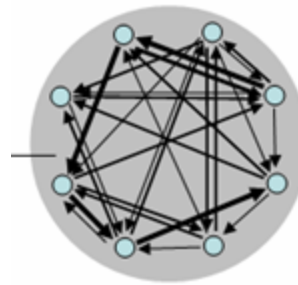
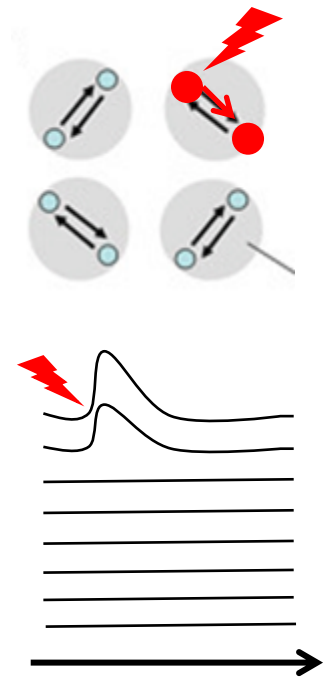
A Perturbational Approach



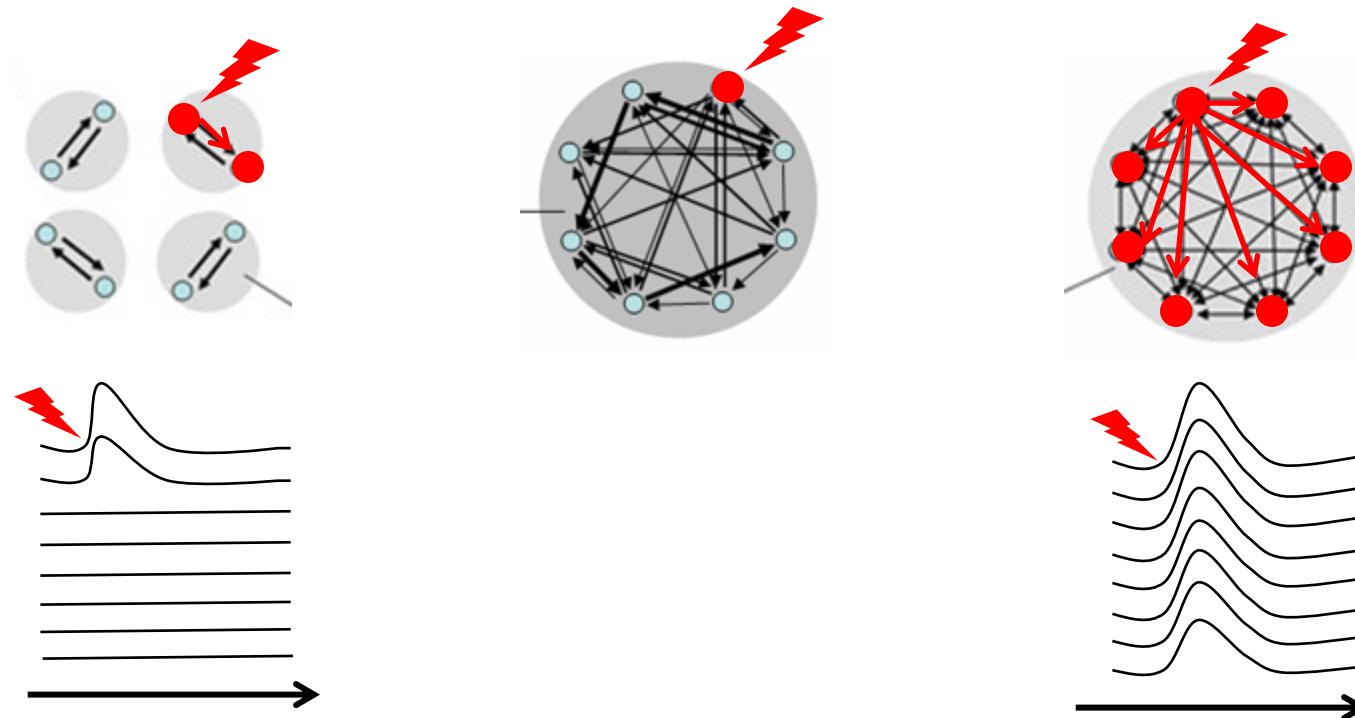
A Perturbational Approach



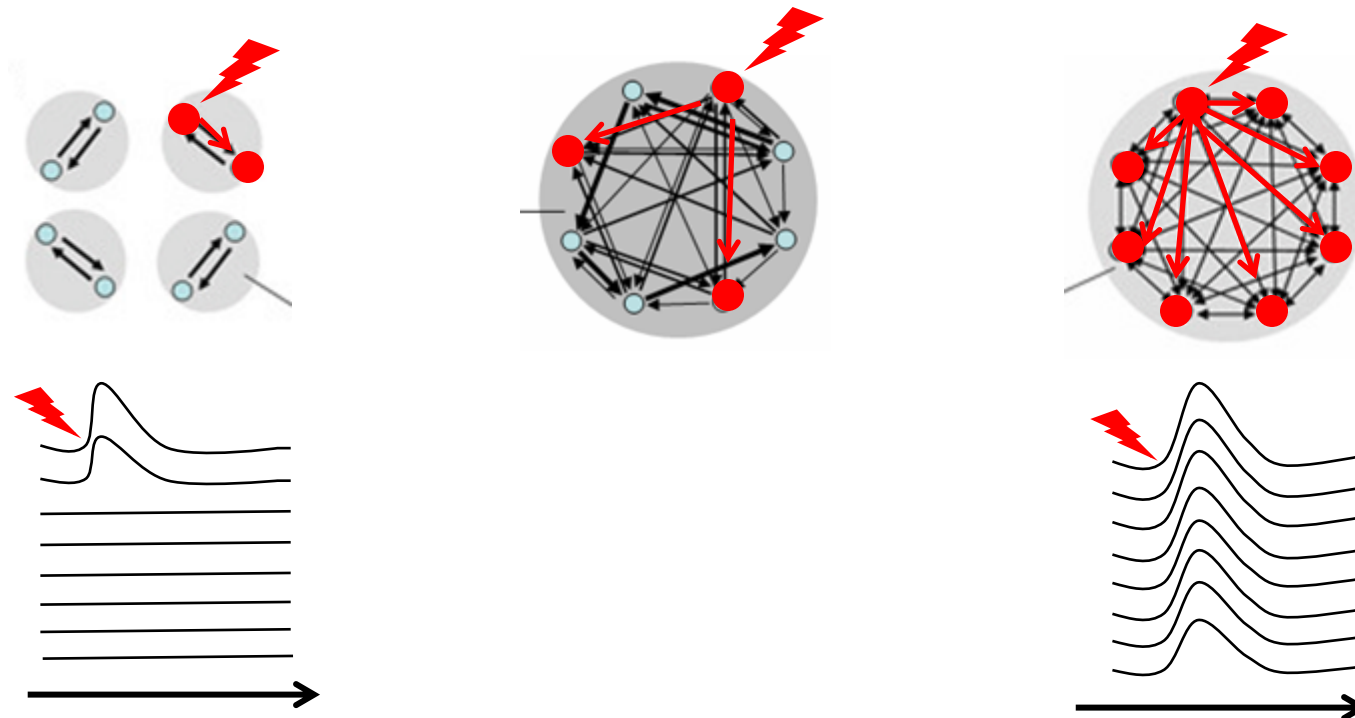
A Perturbational Approach



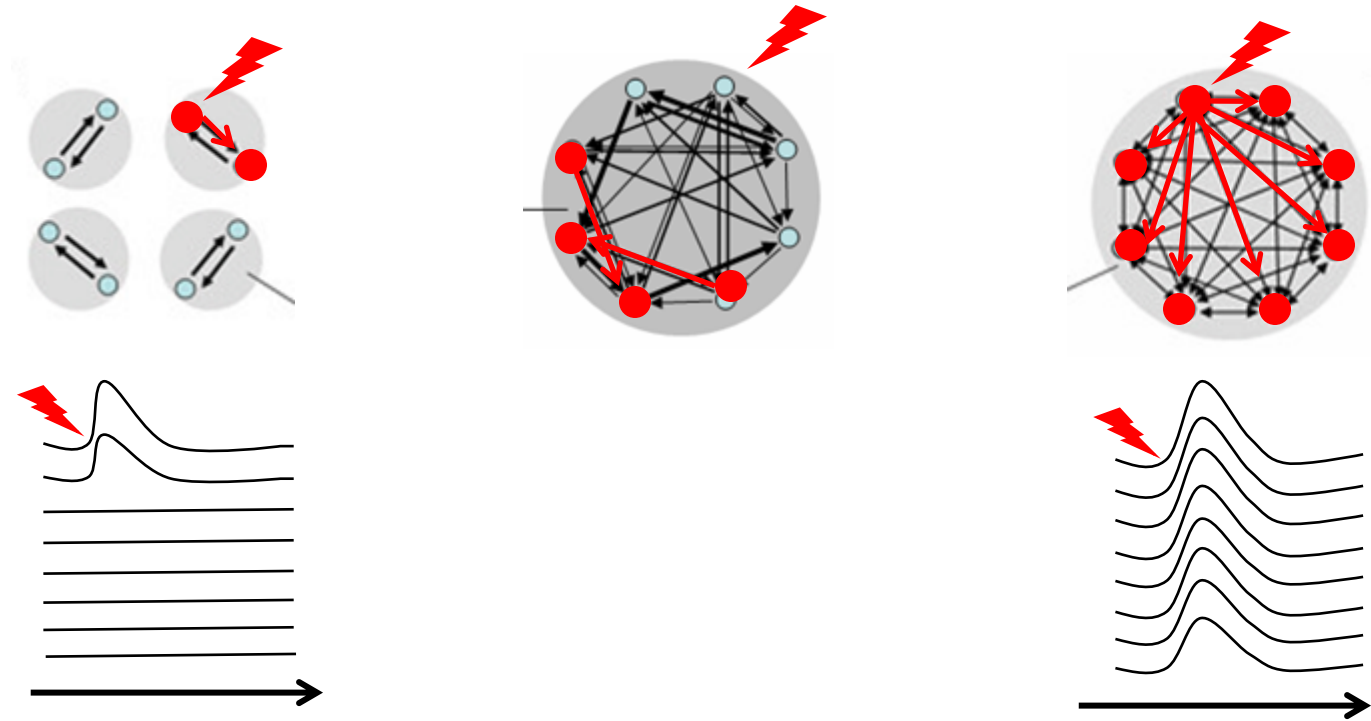
A Perturbational Approach



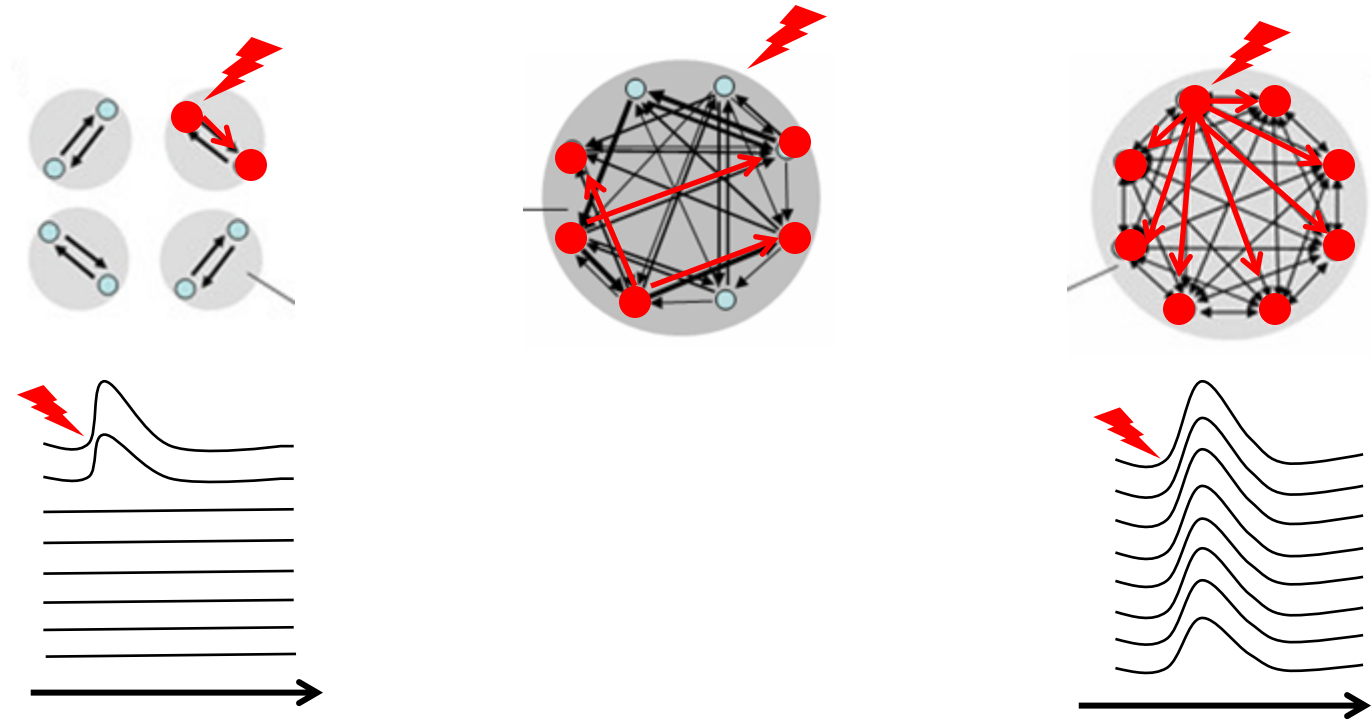
A Perturbational Approach



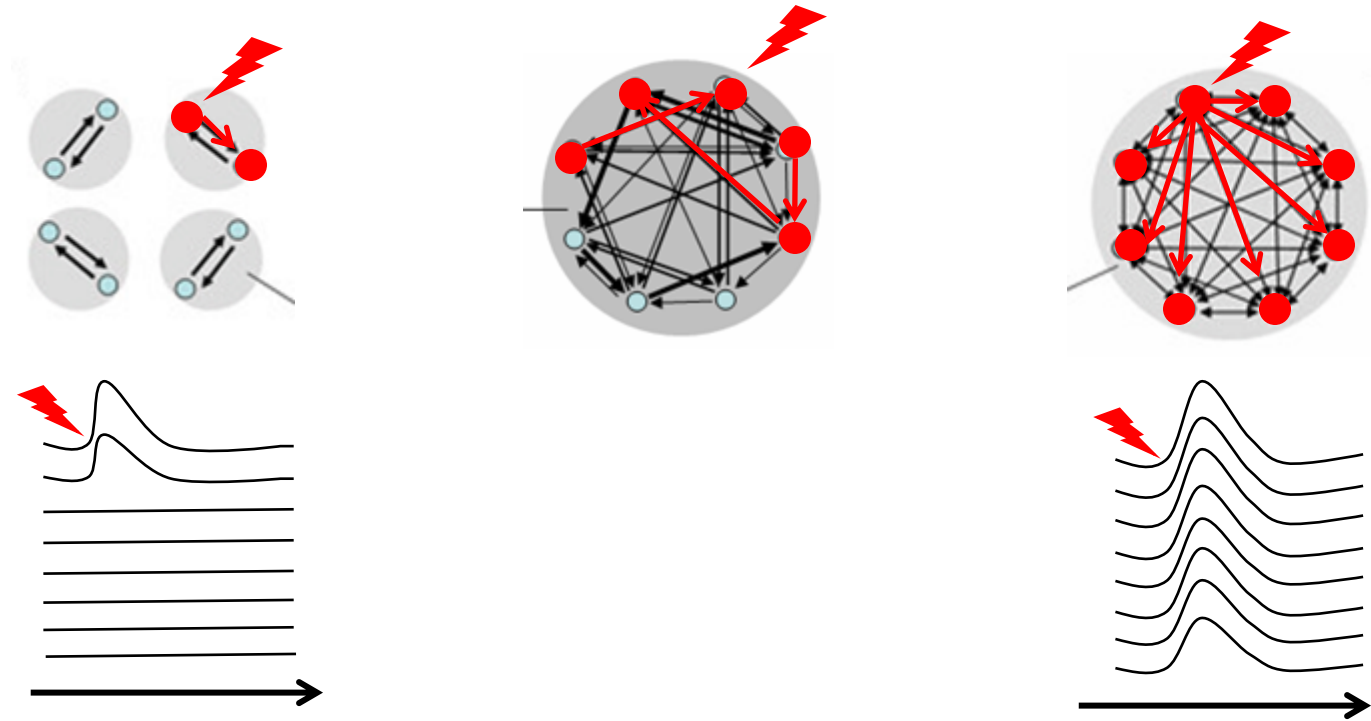
A Perturbational Approach



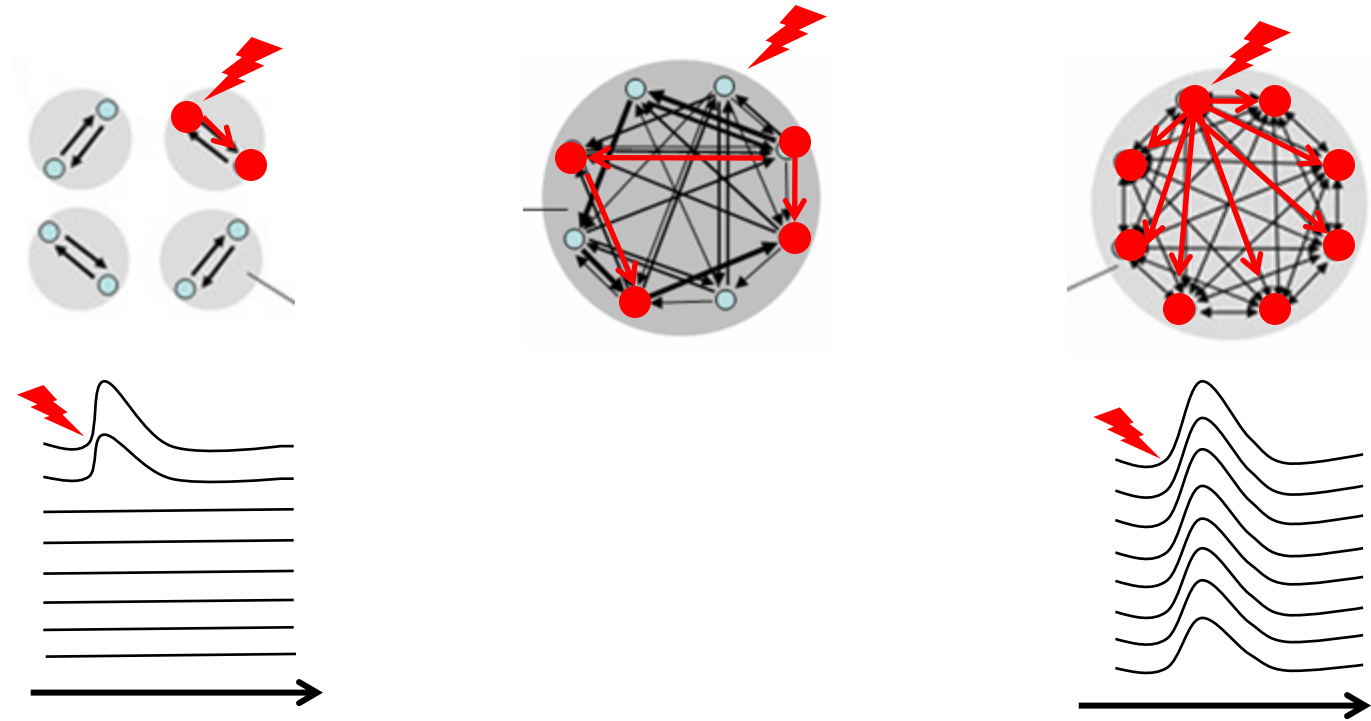
A Perturbational Approach



A Perturbational Approach



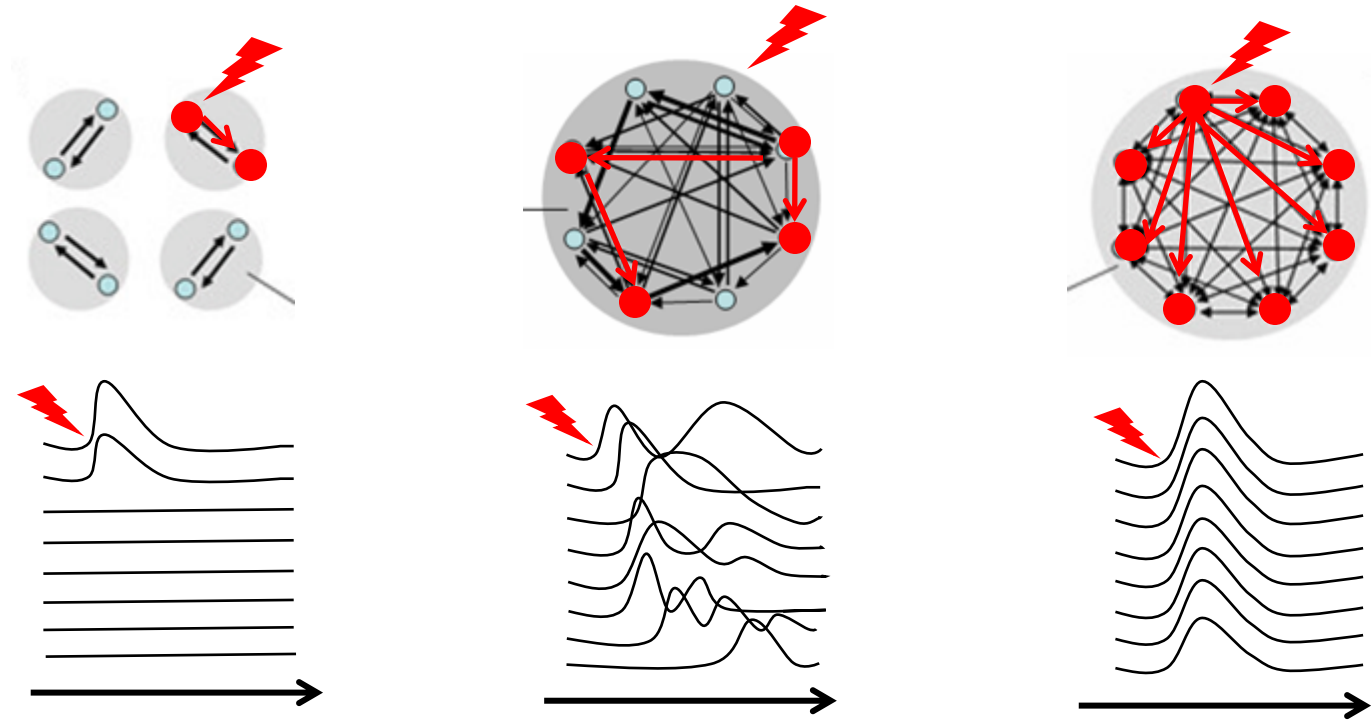
A Perturbational Approach



Causal Interactions vs. Temporal Correlations

Integration + differentiation

A Perturbational Approach

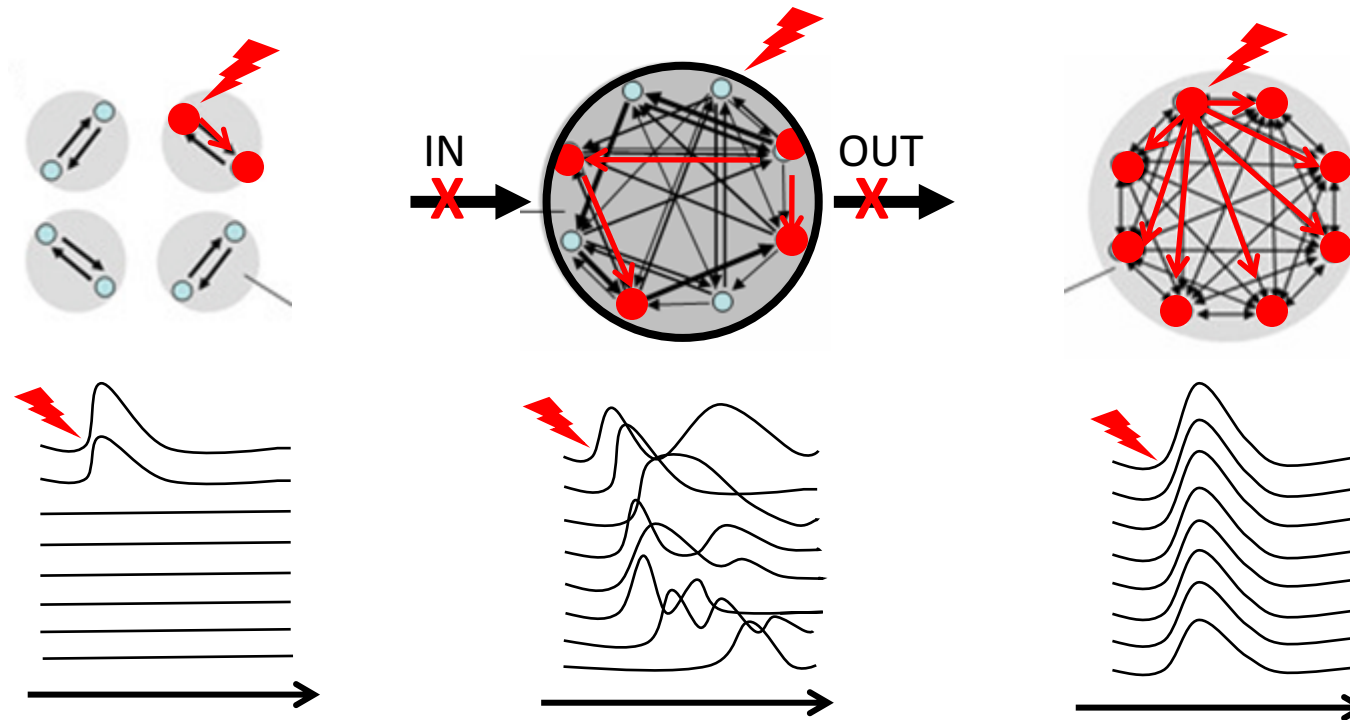


Causal Interactions vs. Temporal Correlations

Integration + differentiation

Independent of inputs & outputs

A Perturbational Approach



Causal Interactions vs. Temporal Correlations

Integration + differentiation

Independent of inputs & outputs

\neq

Levels of activity

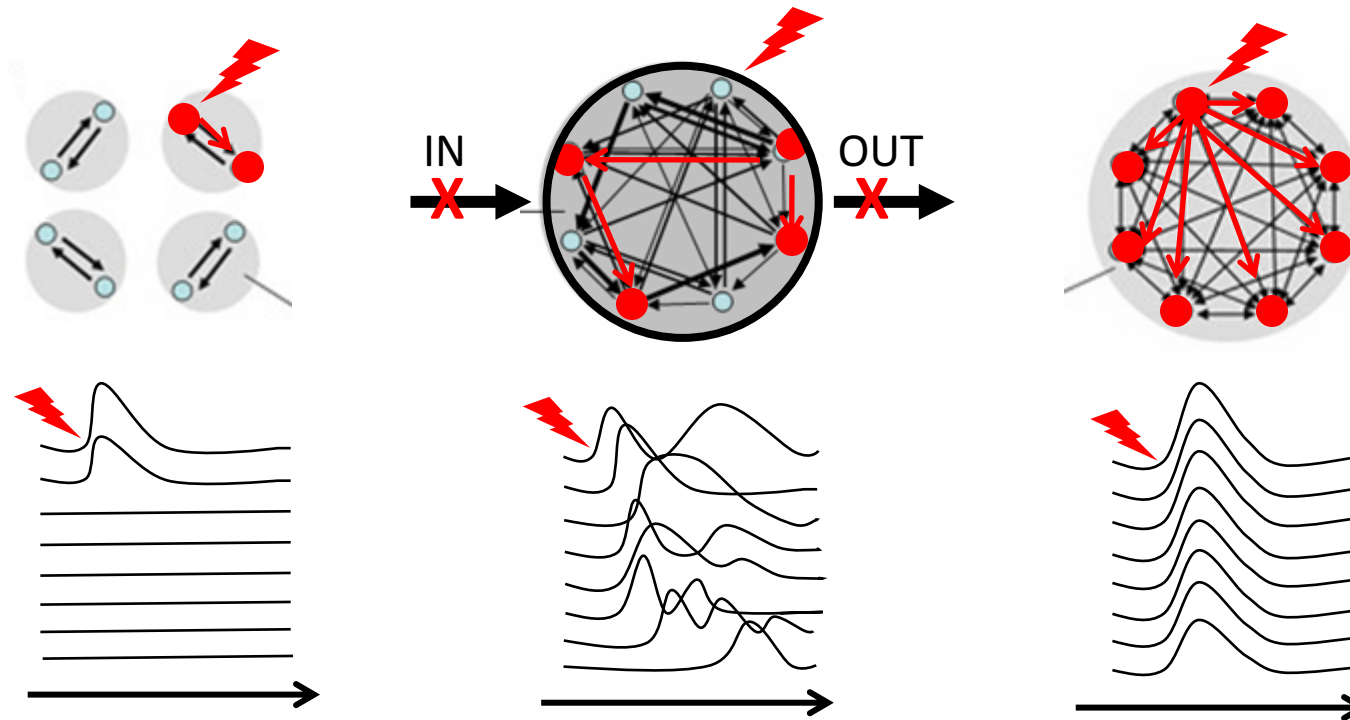
Synchrony

Spread of activity

Entropy

ERPs

A Perturbational Approach



Causal Interactions vs. Temporal Correlations

Integration + differentiation

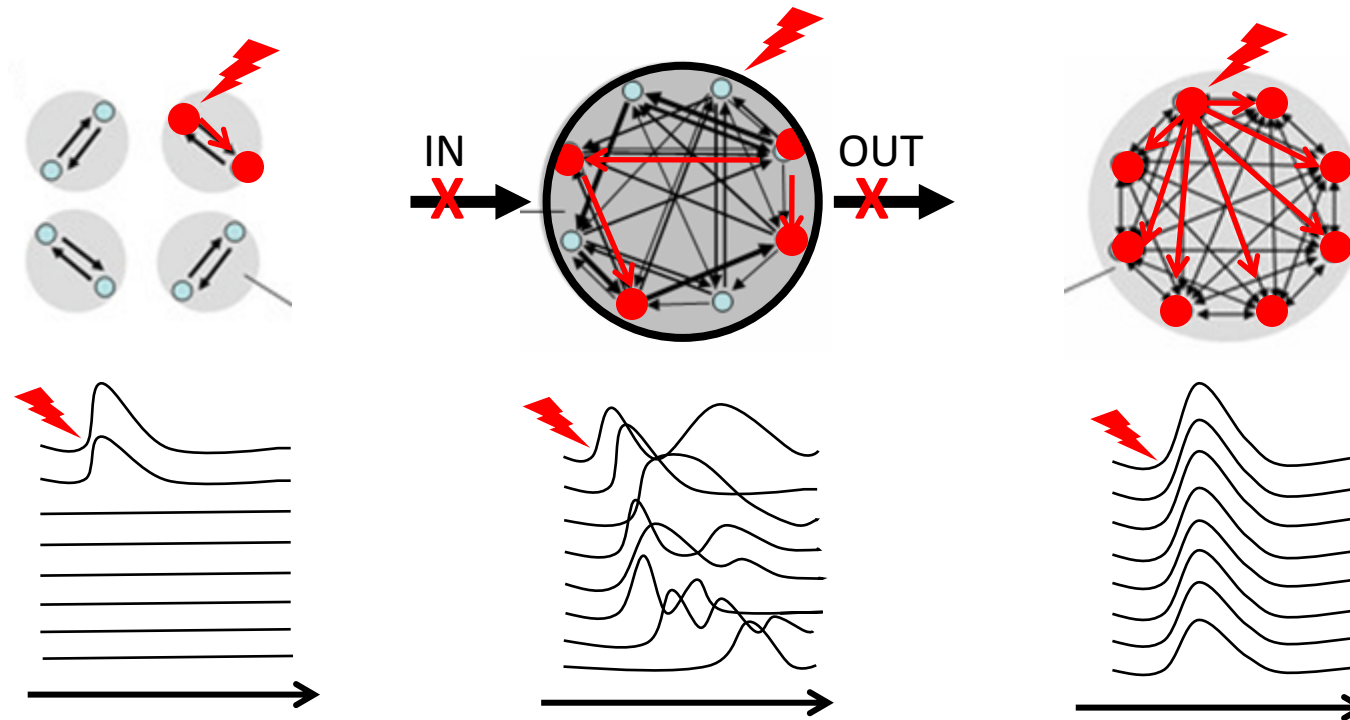
Independent of inputs & outputs

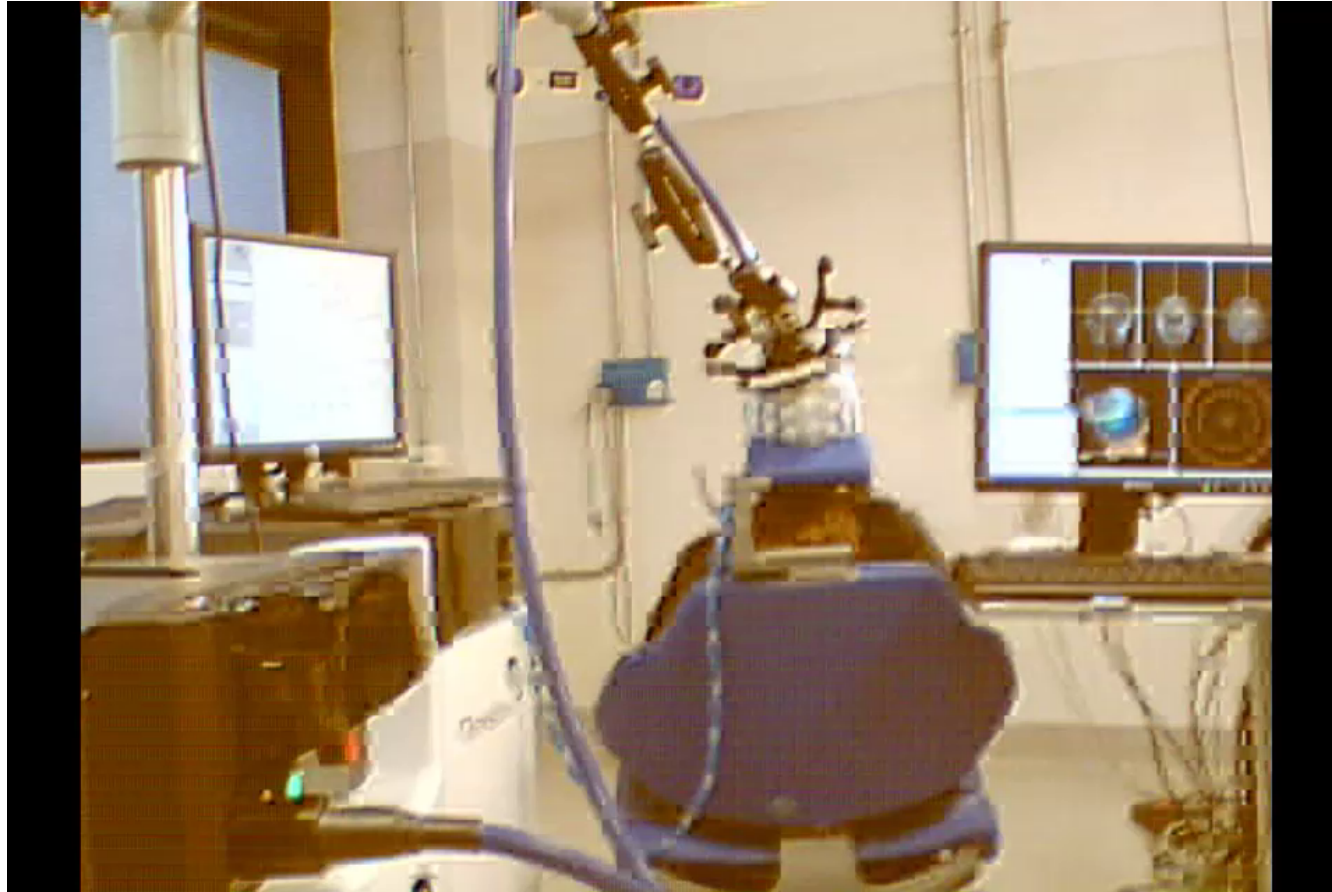
=

the amount of information
that is generated by causal interactions
within an integrated system

$\cong \Phi$

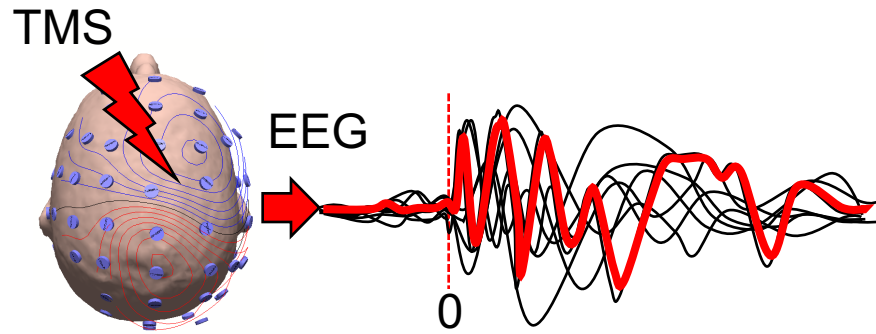
A Perturbational Approach



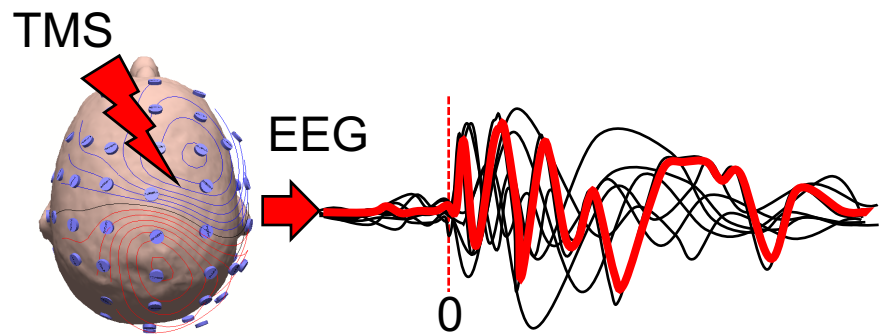


TMS/EEG: A set-up for non-invasive cortical stimulation and recording

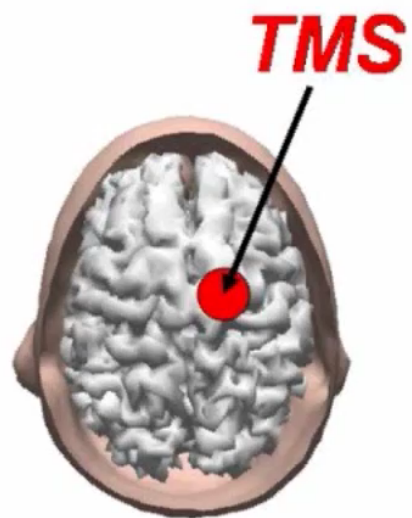
Wakefulness



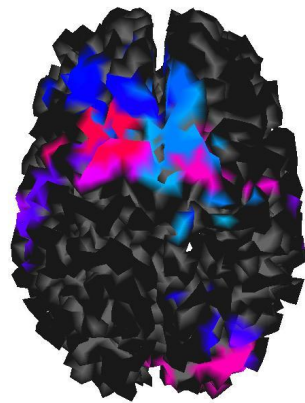
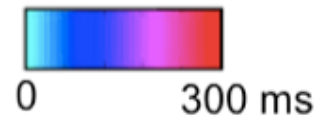
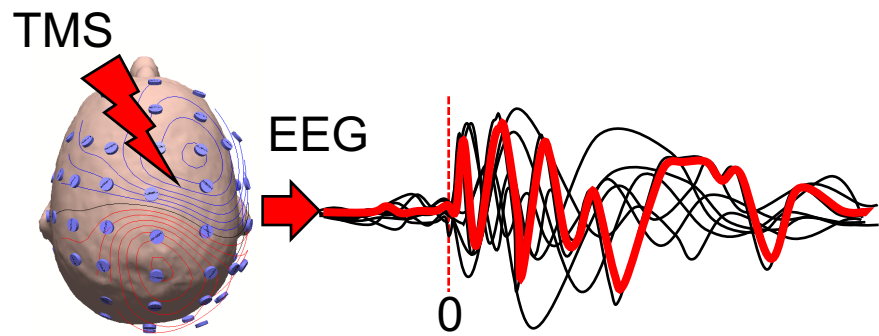
Wakefulness



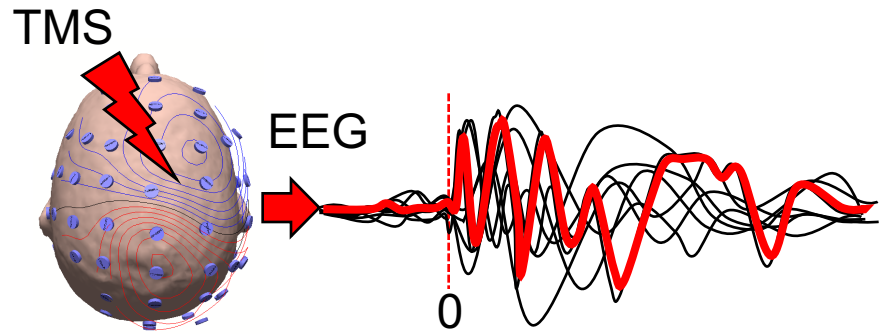
0 ms



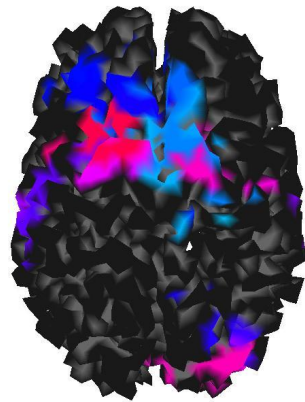
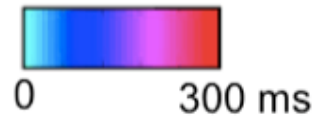
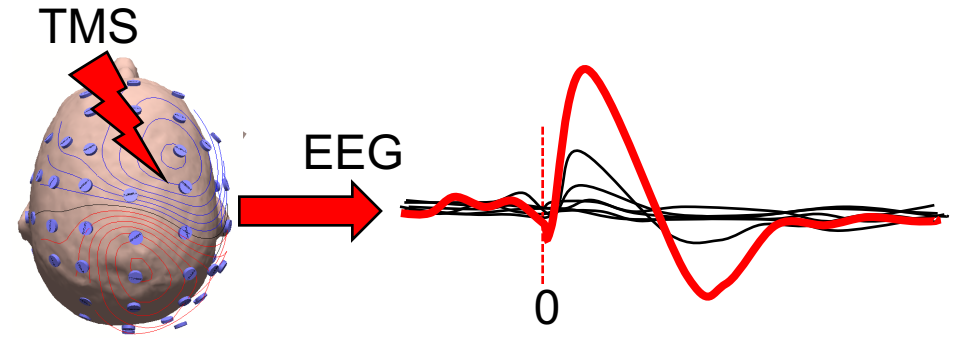
Wakefulness



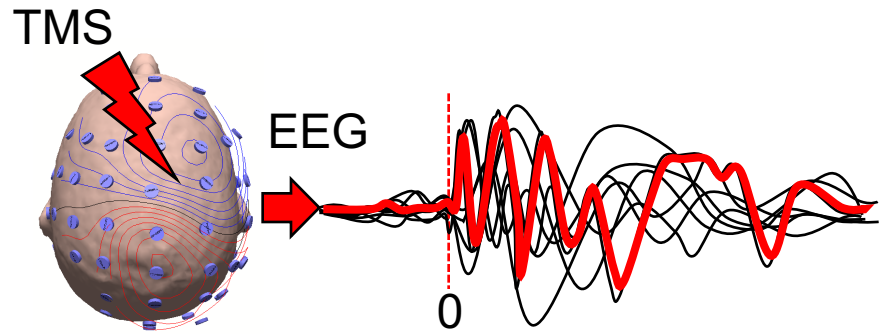
Wakefulness



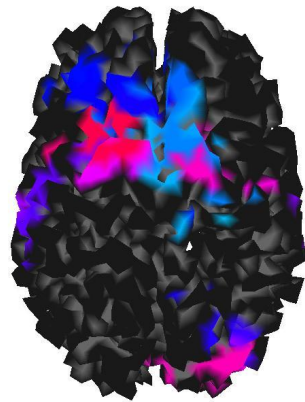
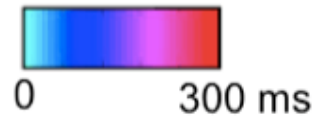
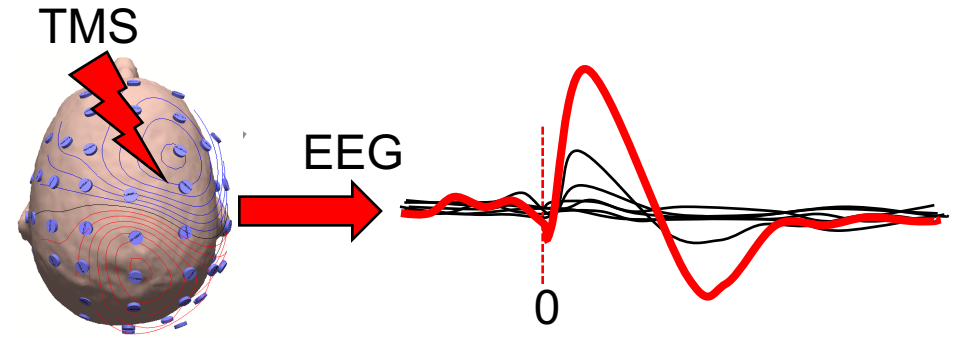
NREM



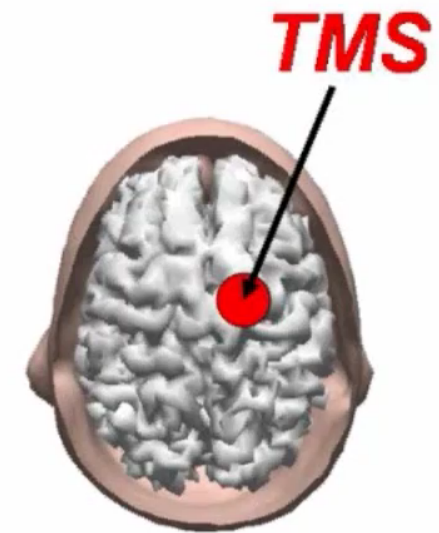
Wakefulness



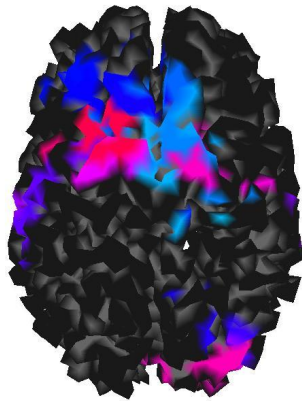
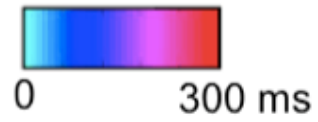
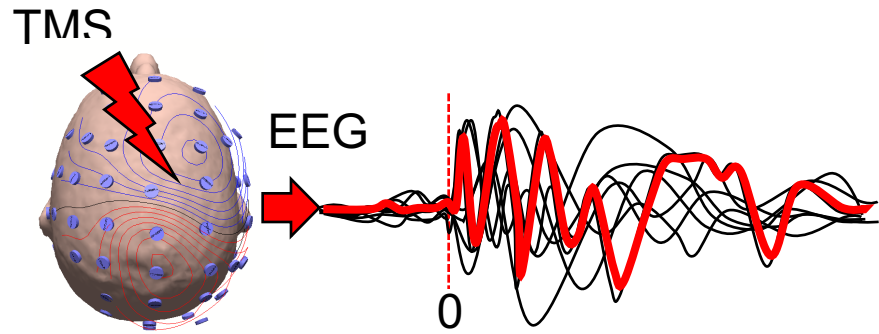
NREM



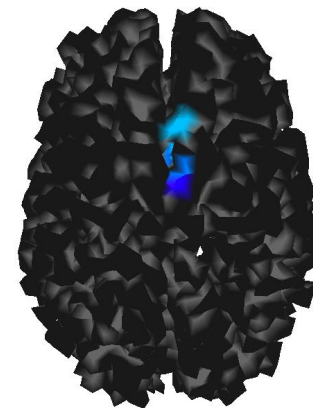
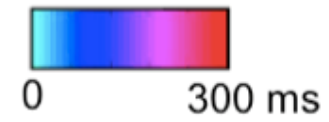
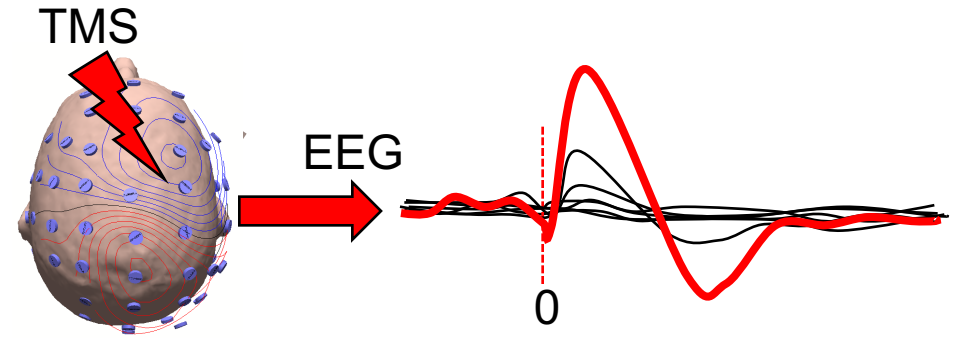
0 ms



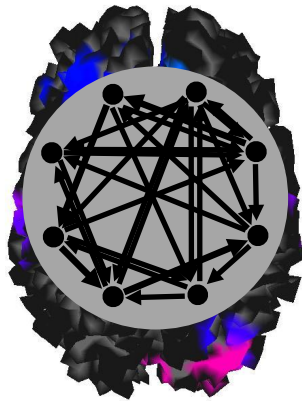
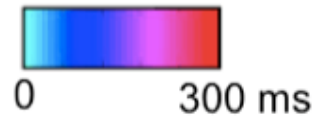
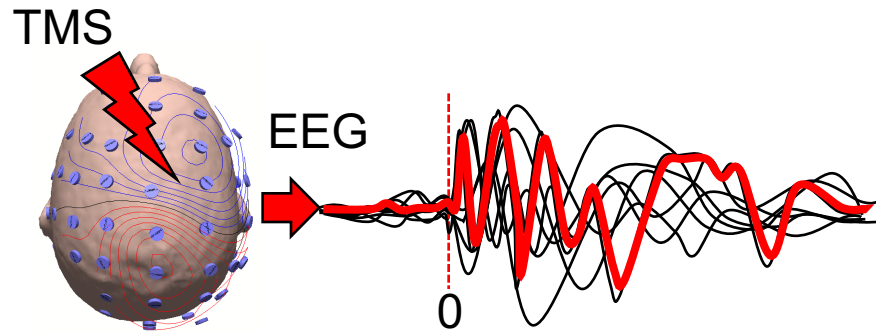
Wakefulness



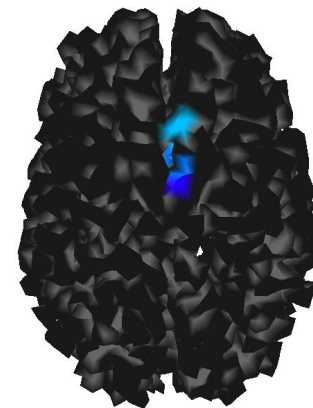
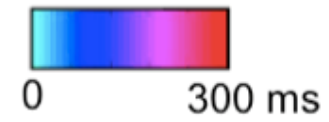
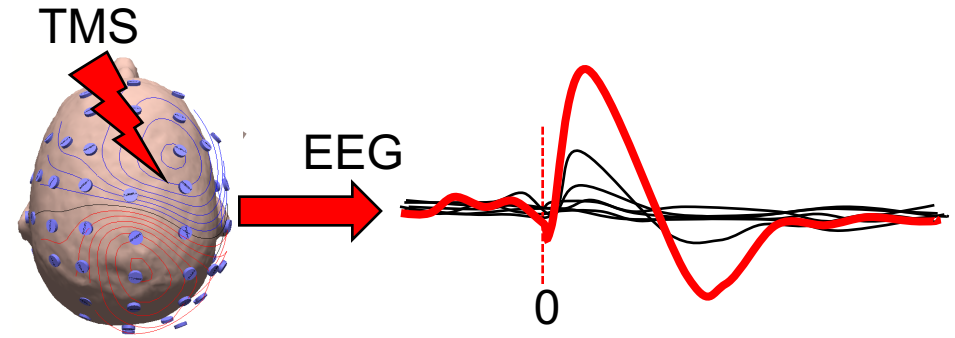
NREM



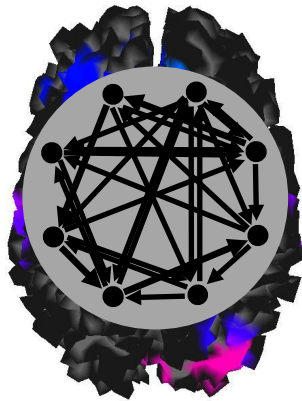
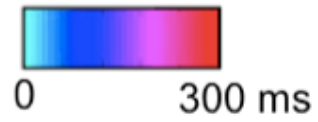
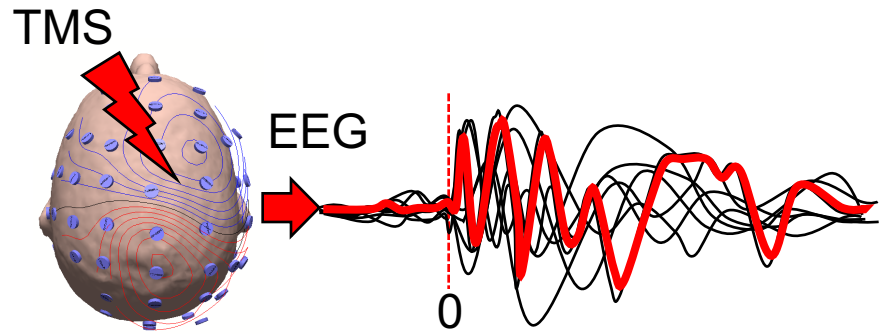
Wakefulness



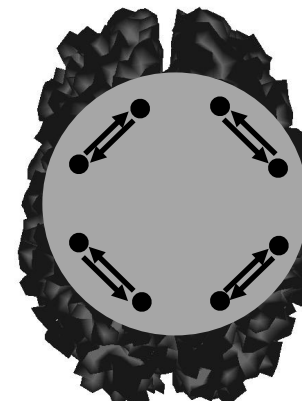
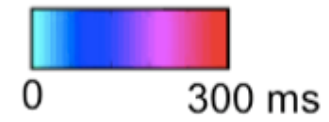
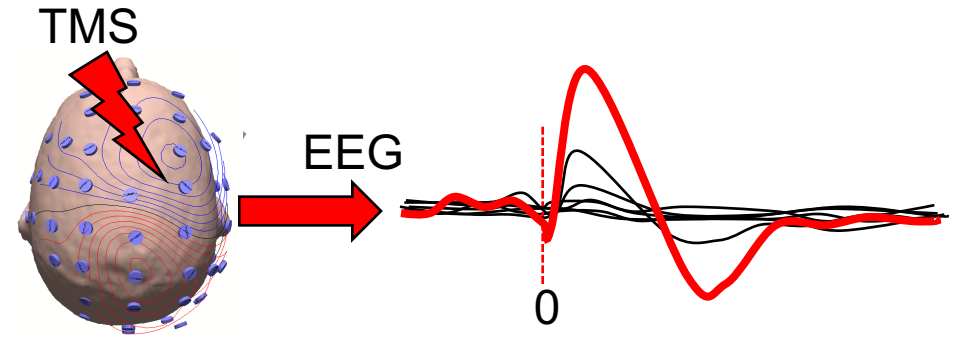
NREM



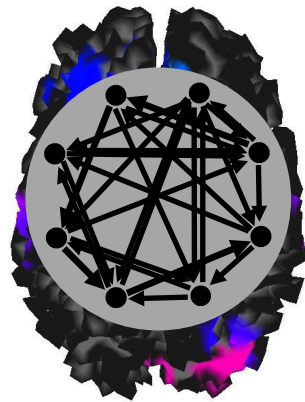
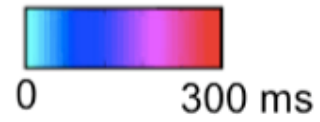
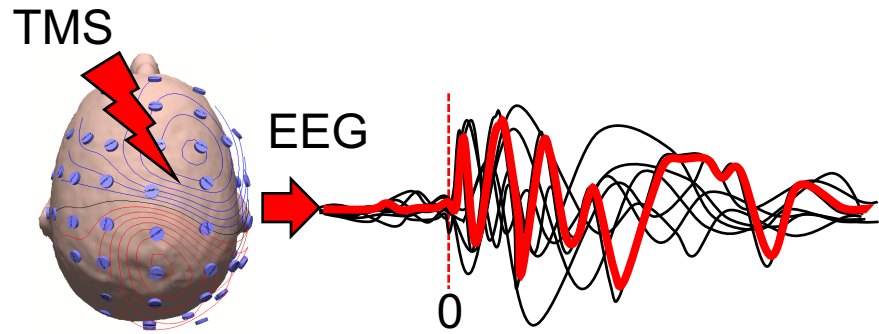
Wakefulness



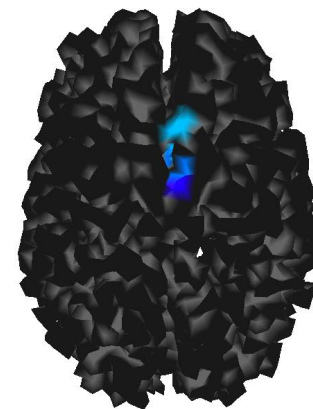
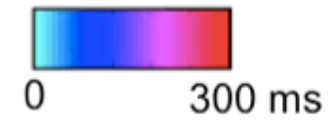
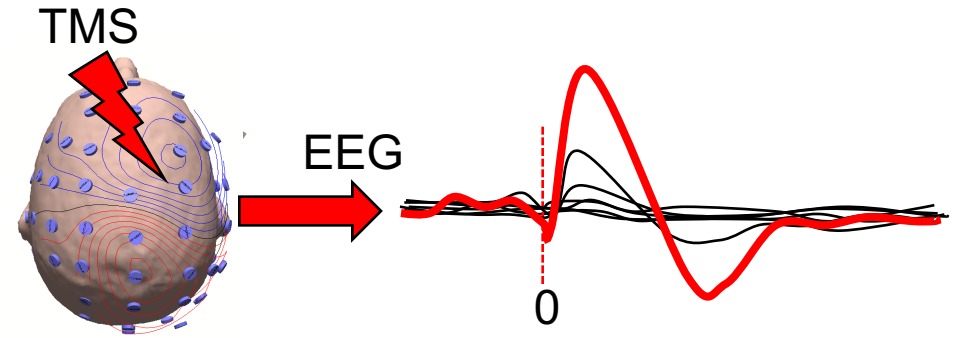
NREM



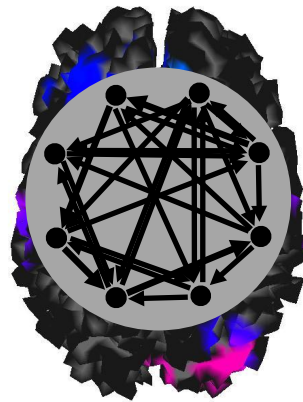
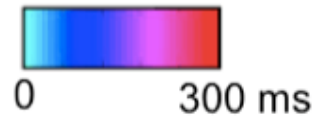
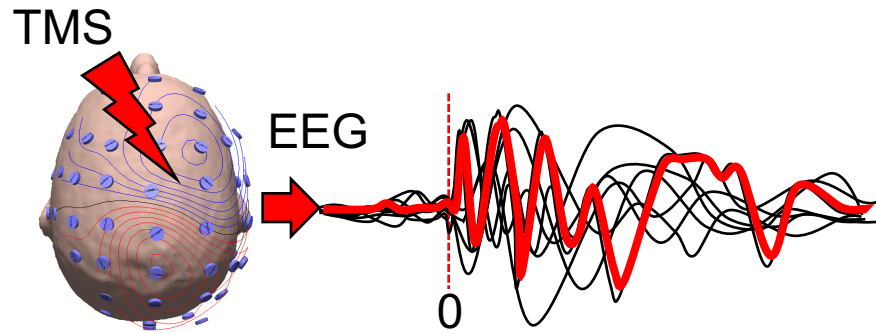
Wakefulness



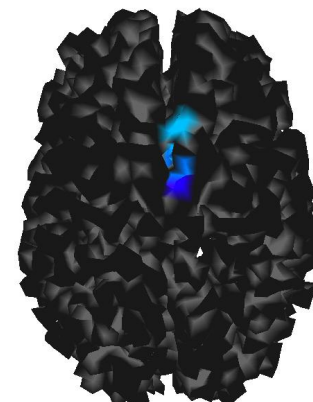
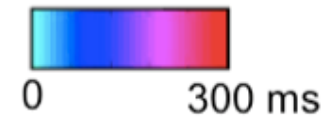
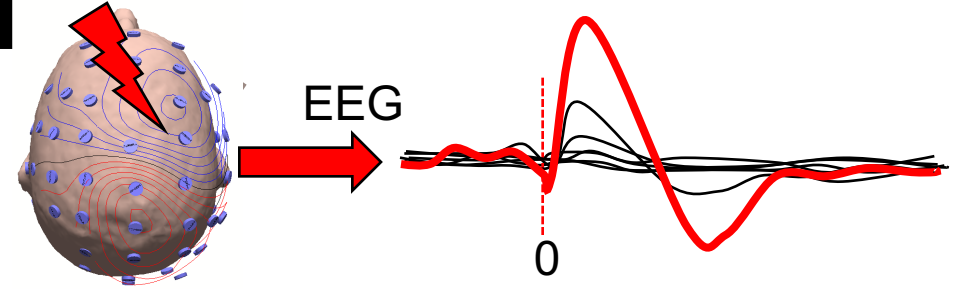
NREM



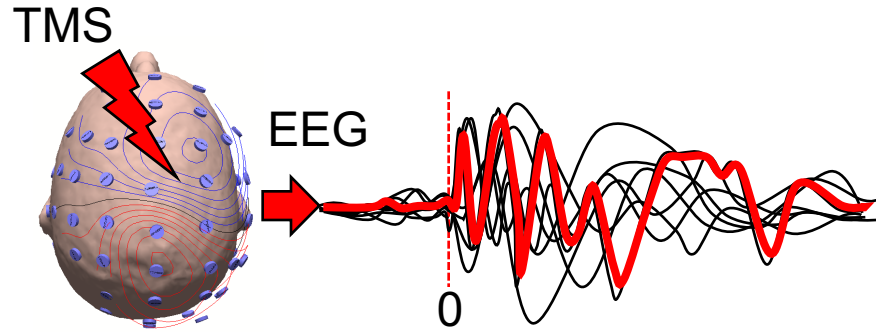
Wakefulness



NREM
↑
TMS

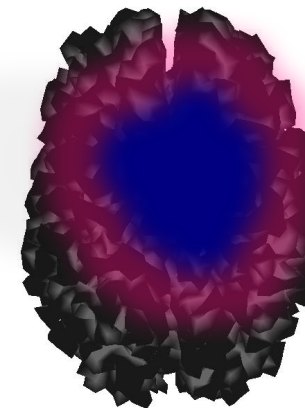
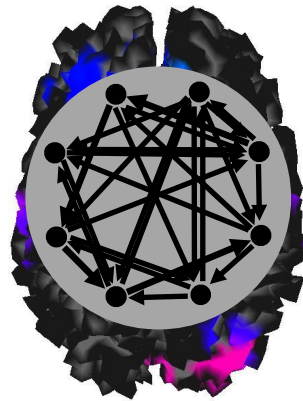
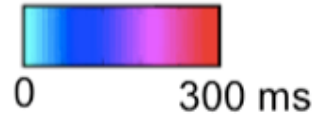
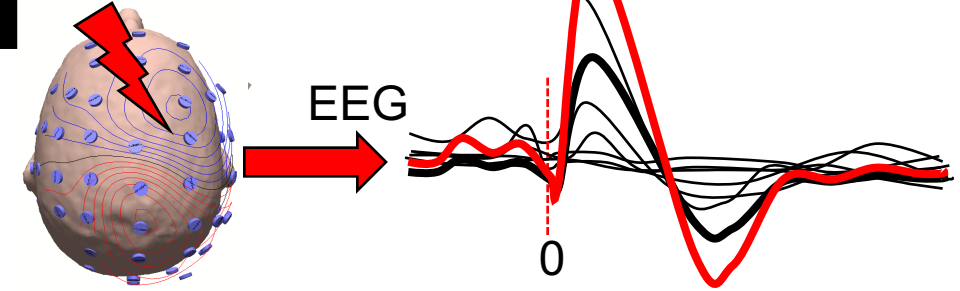


Wakefulness

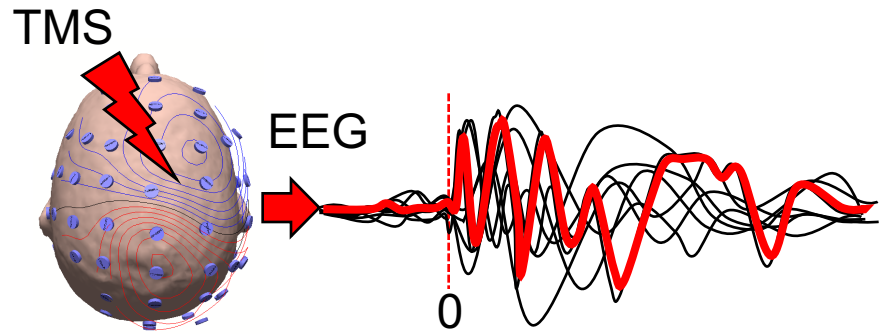


NREM

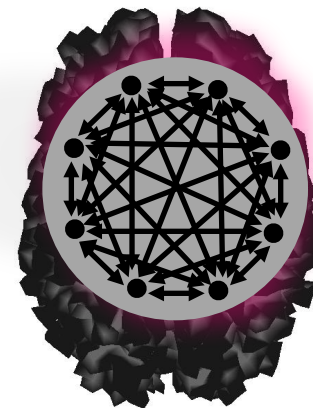
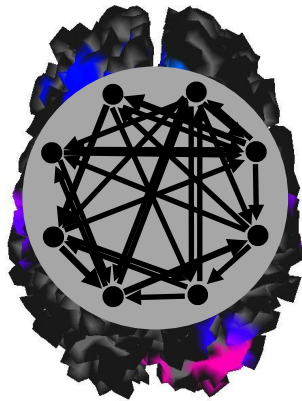
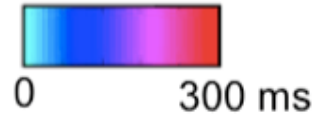
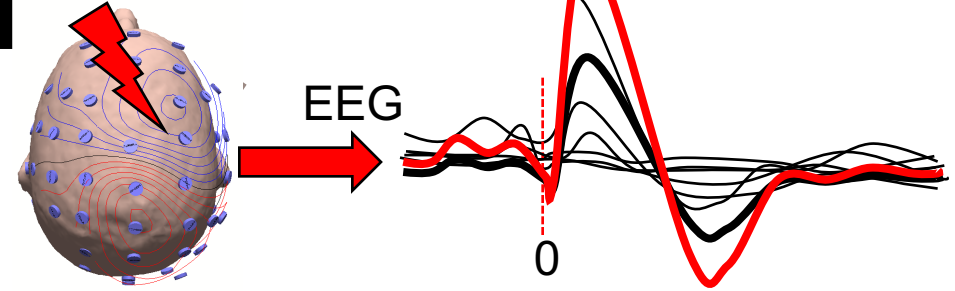
TMS



Wakefulness

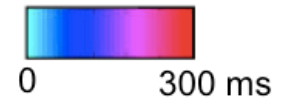
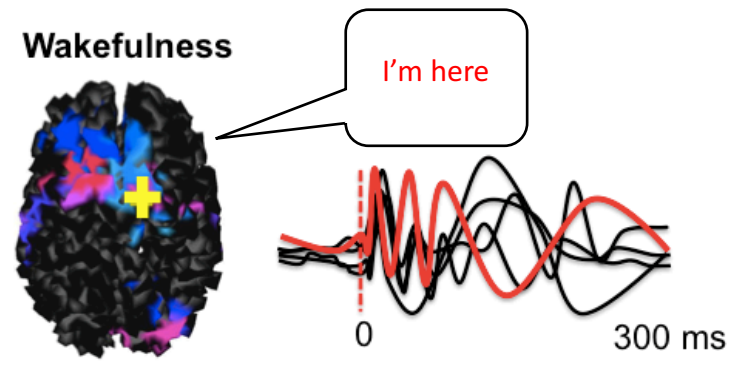


NREM
↑
TMS

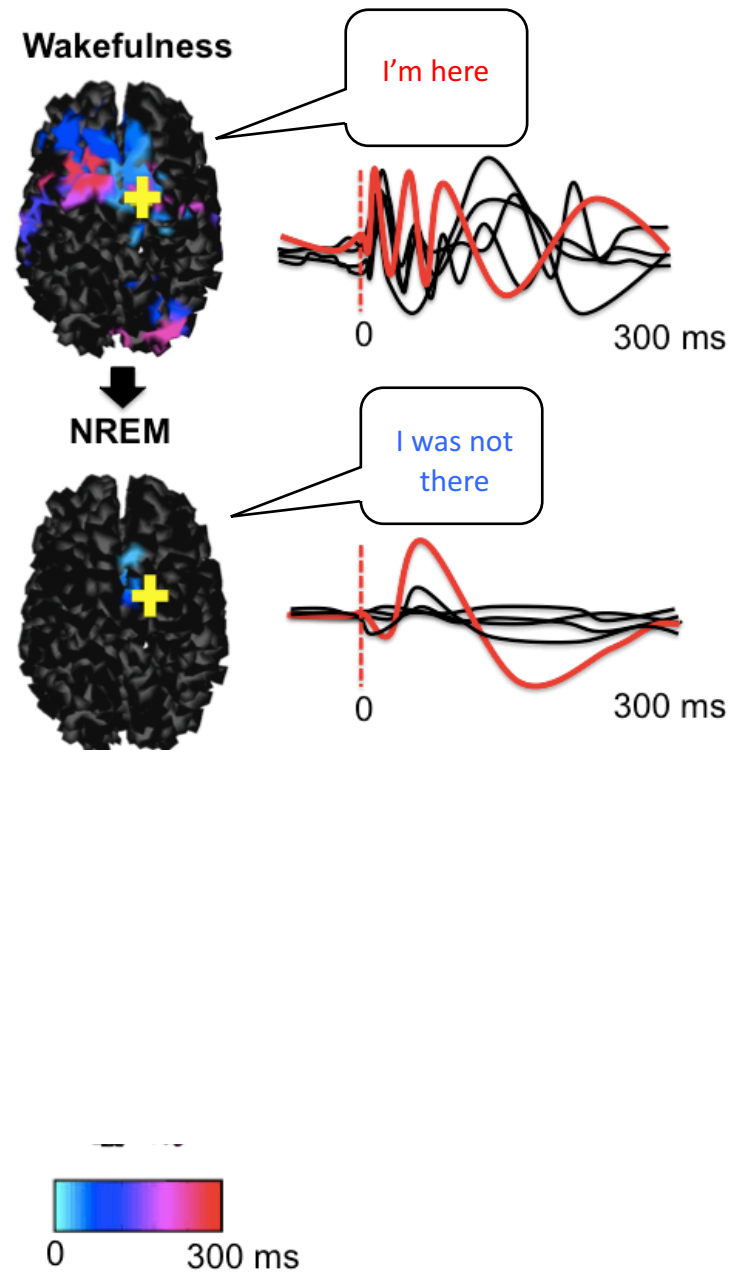


Dreaming

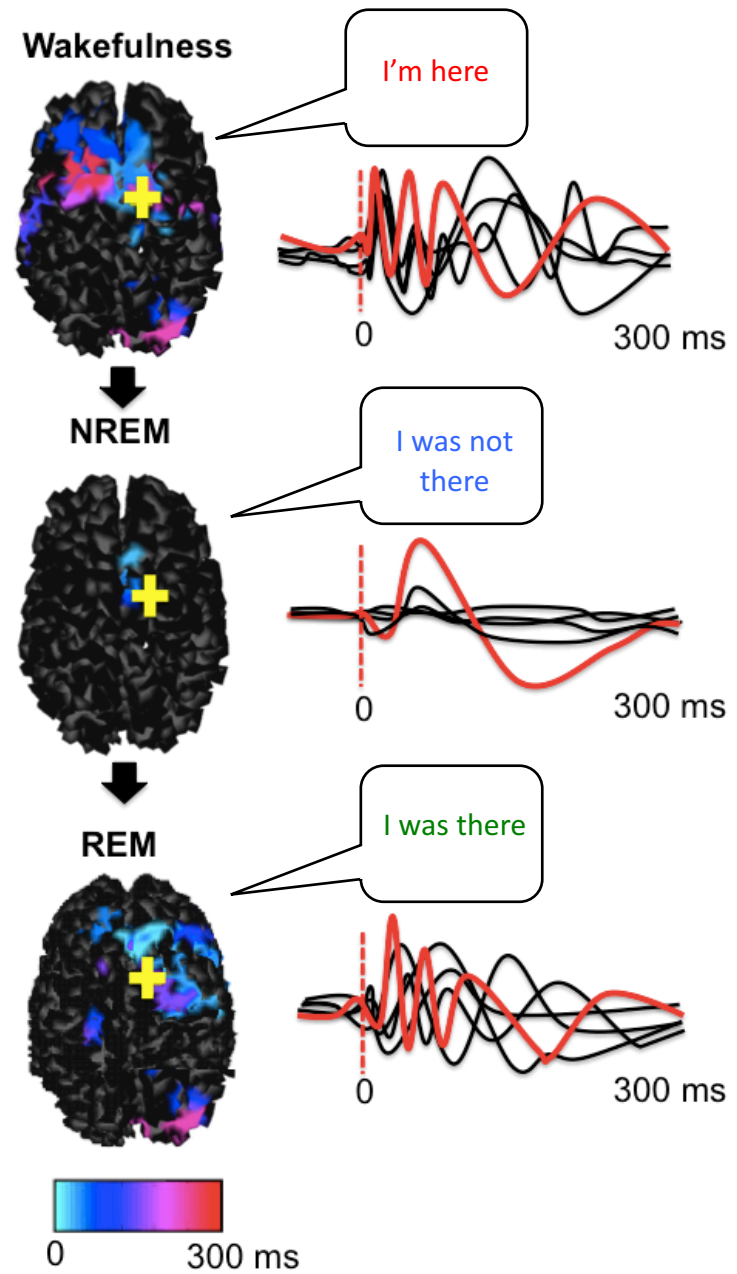
Dreaming



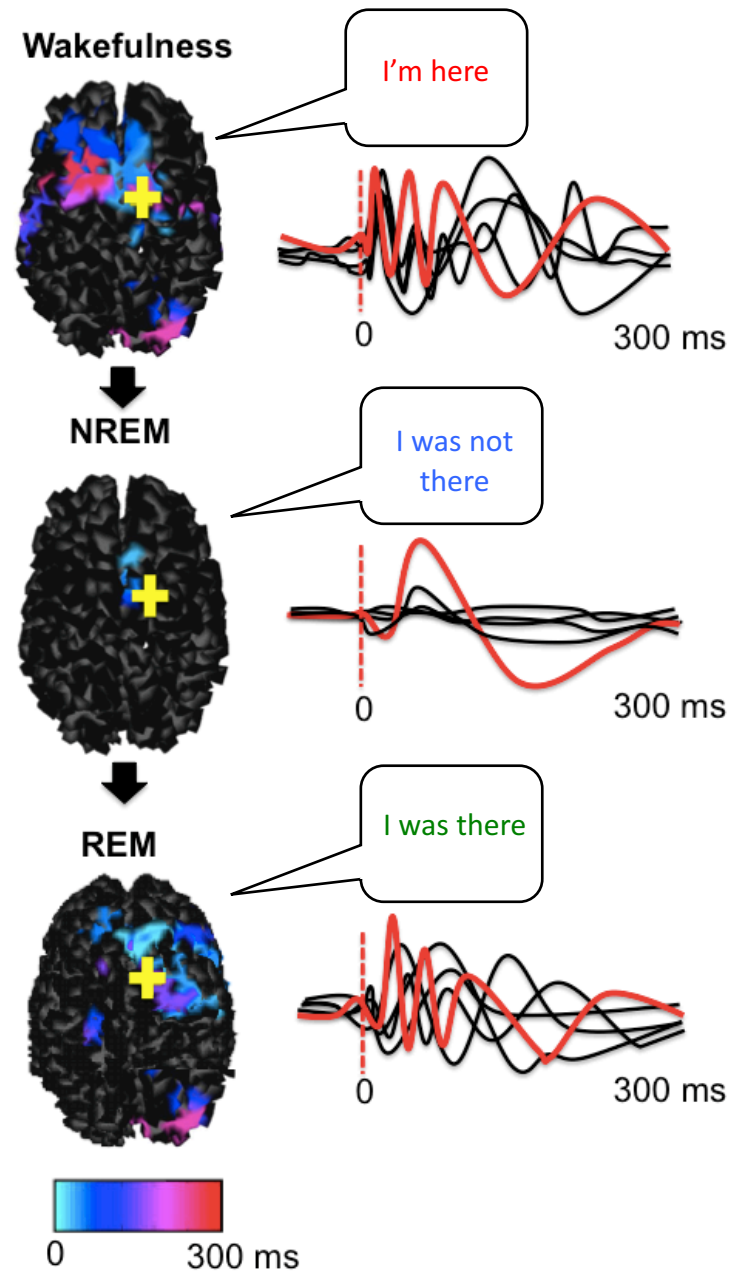
Dreaming



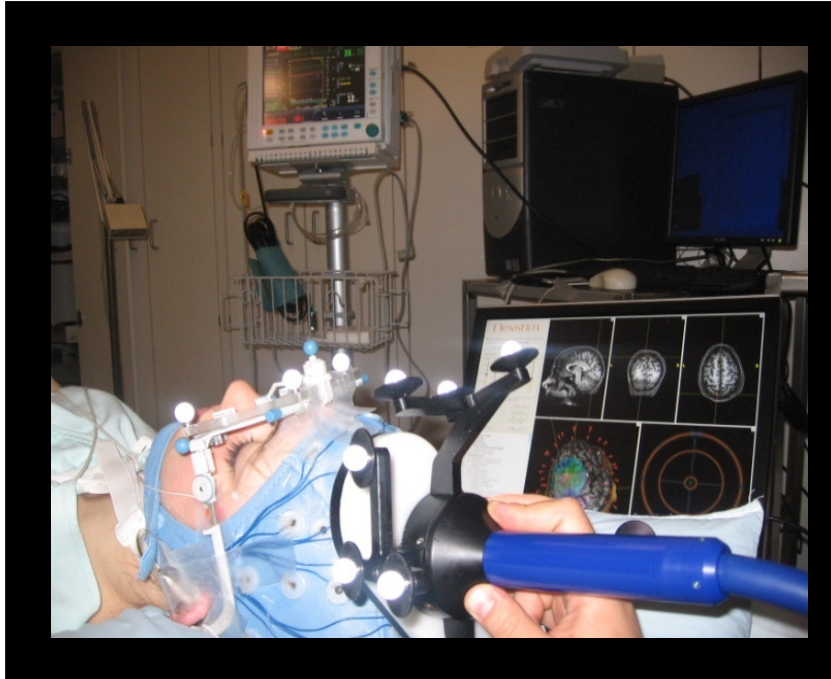
Dreaming



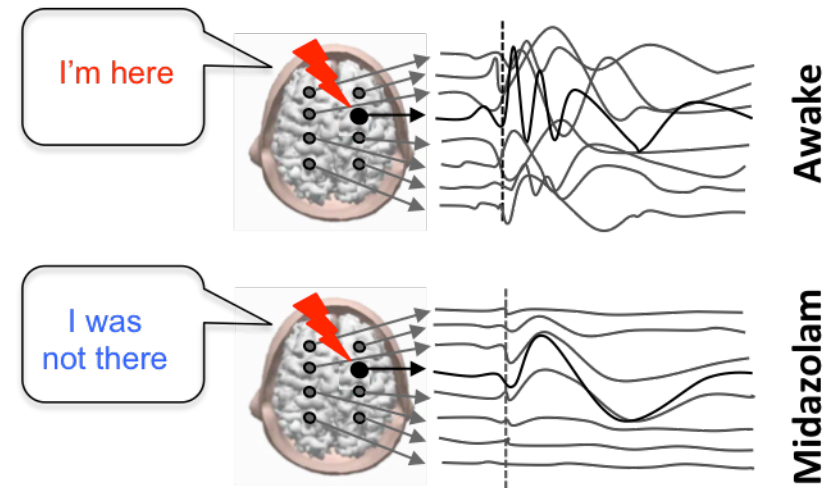
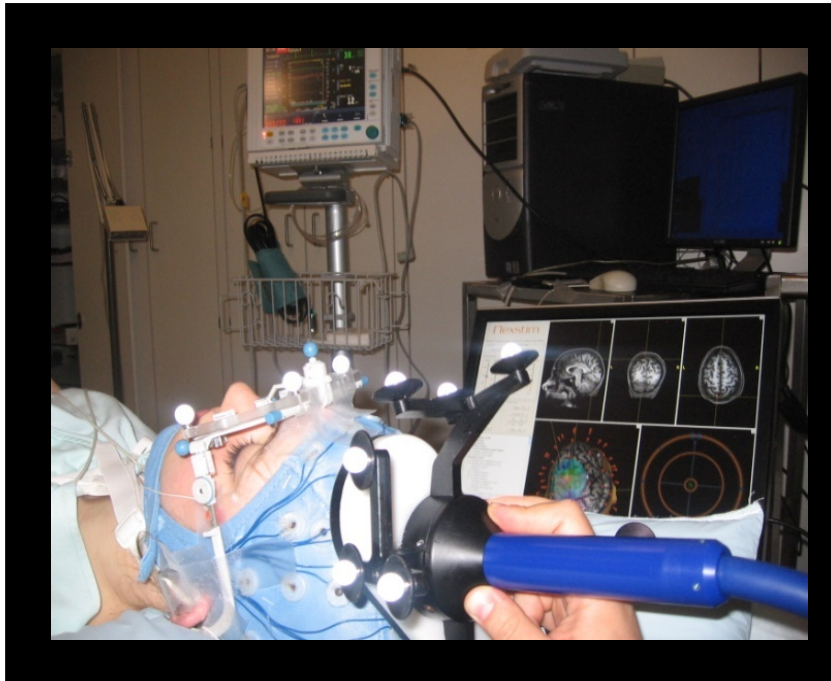
Dreaming



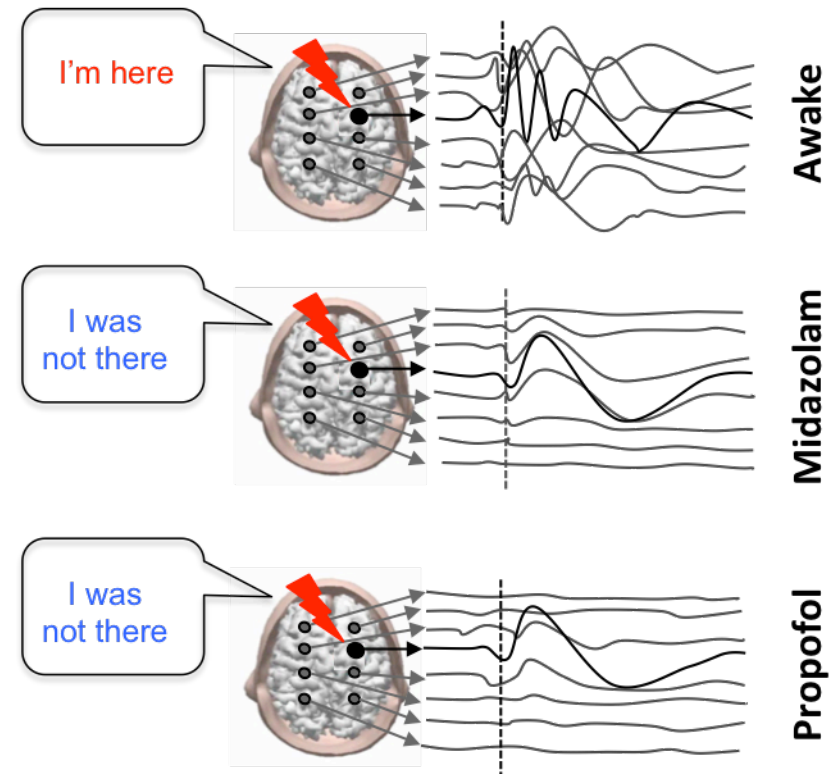
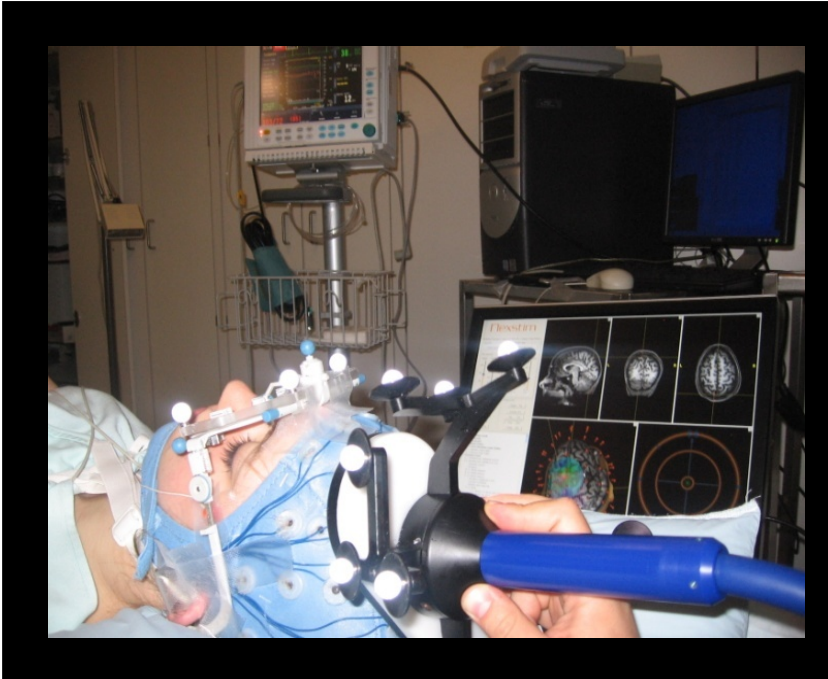
Anesthesia



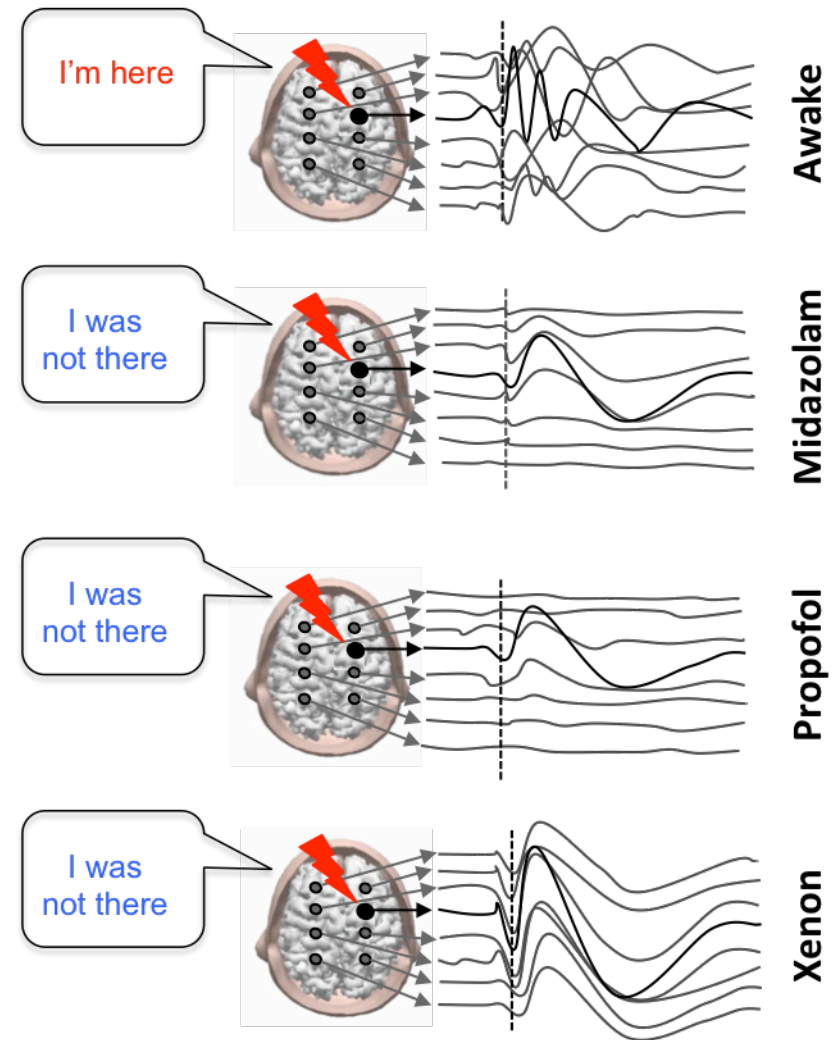
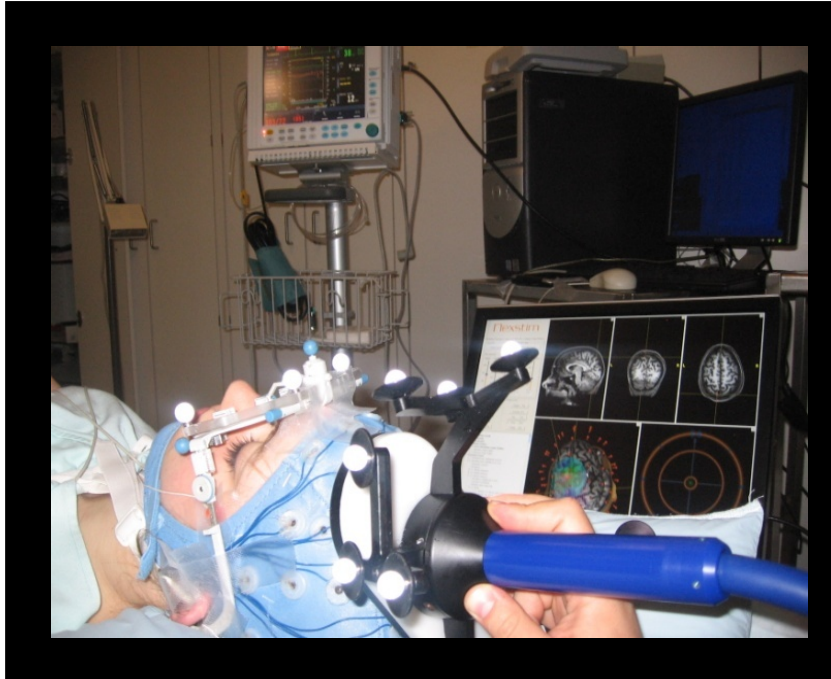
Anesthesia



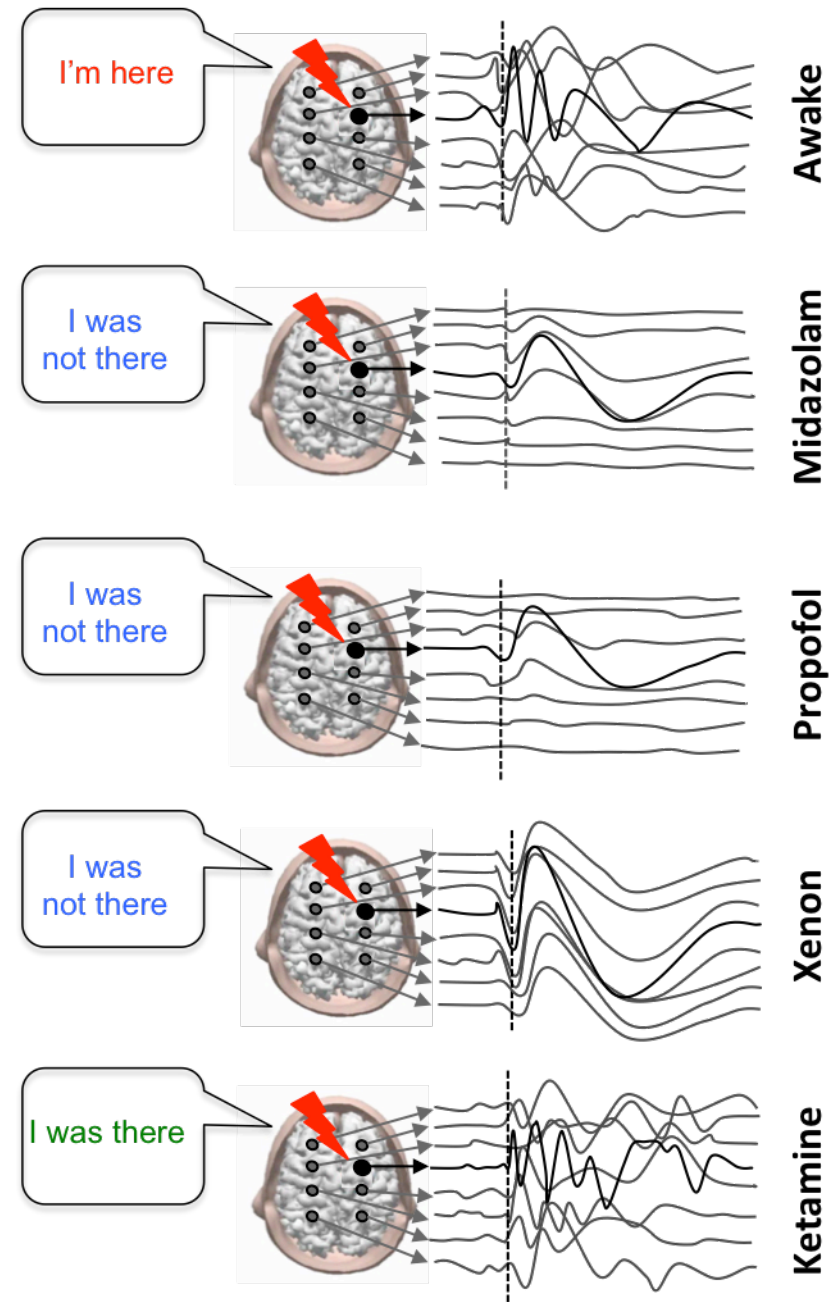
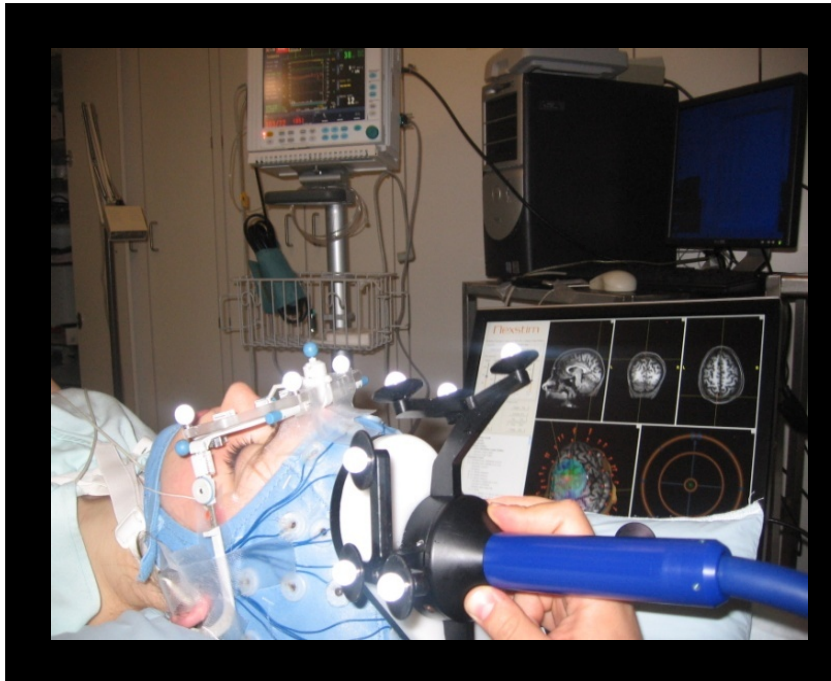
Anesthesia



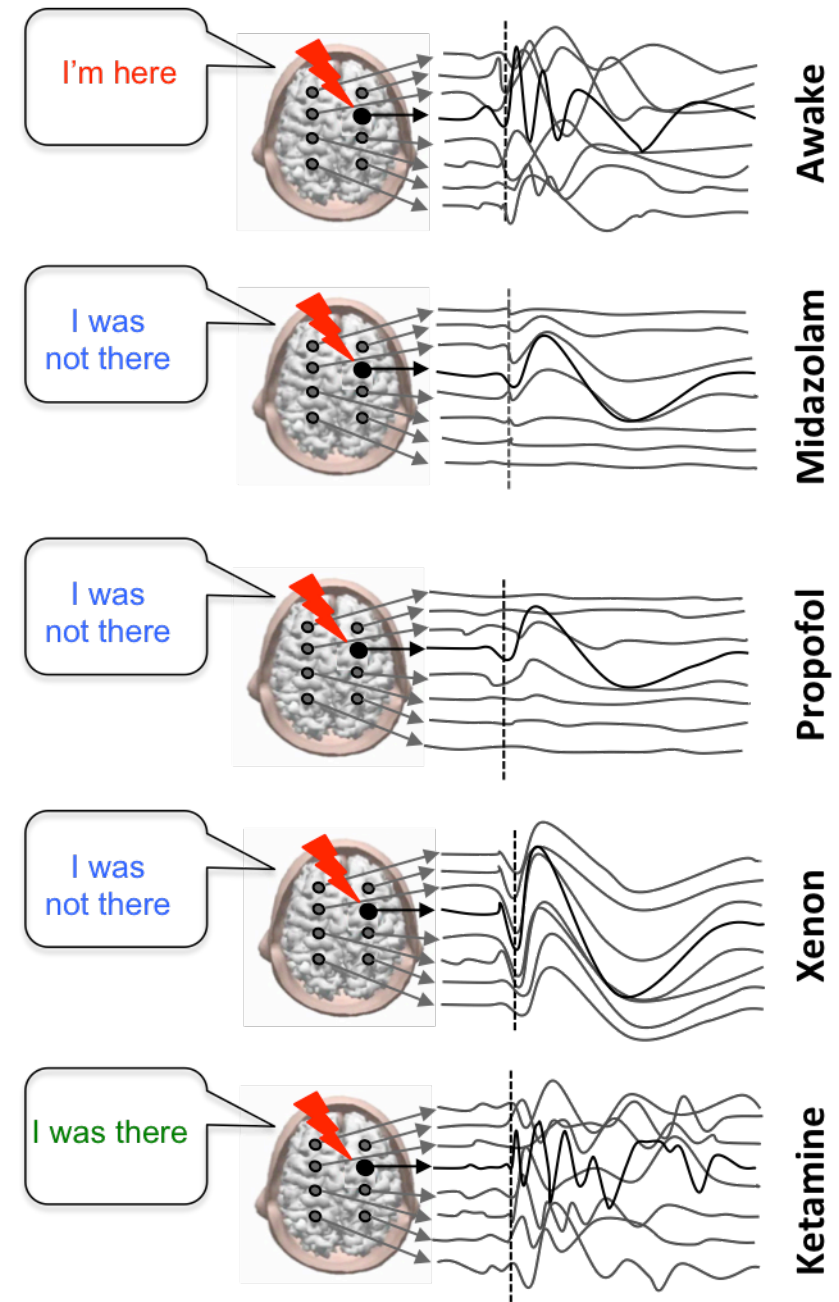
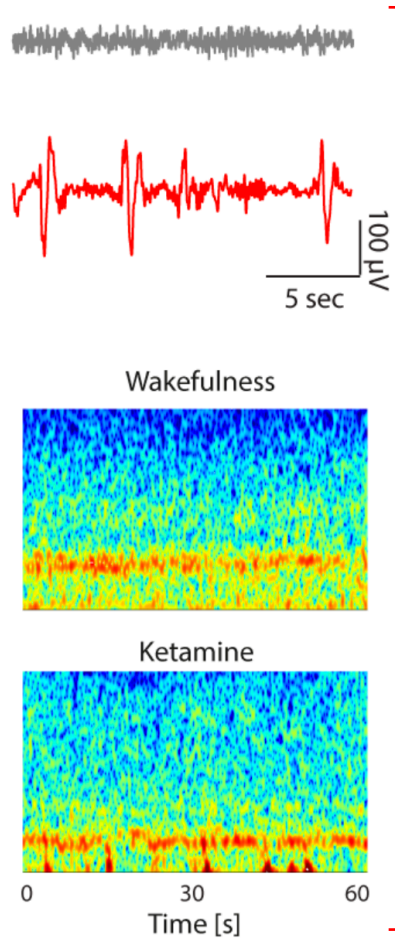
Anesthesia



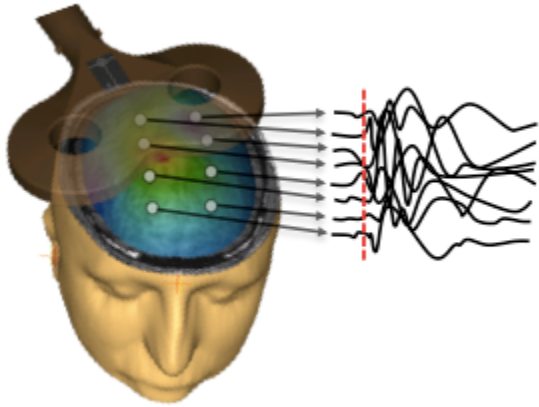
Anesthesia



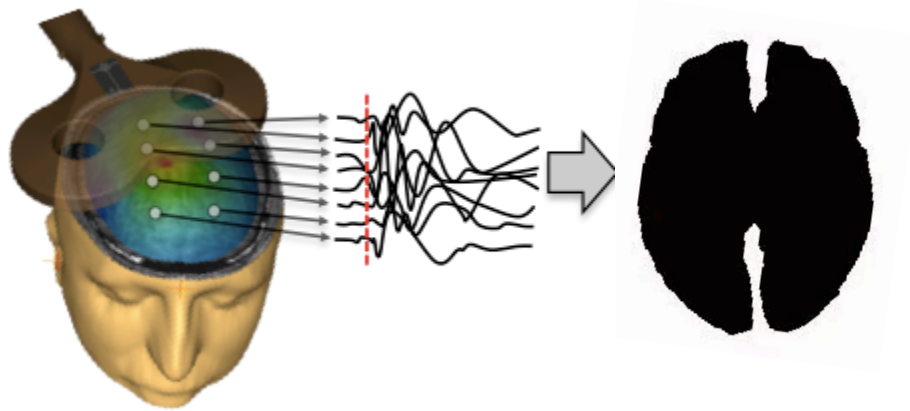
Anesthesia



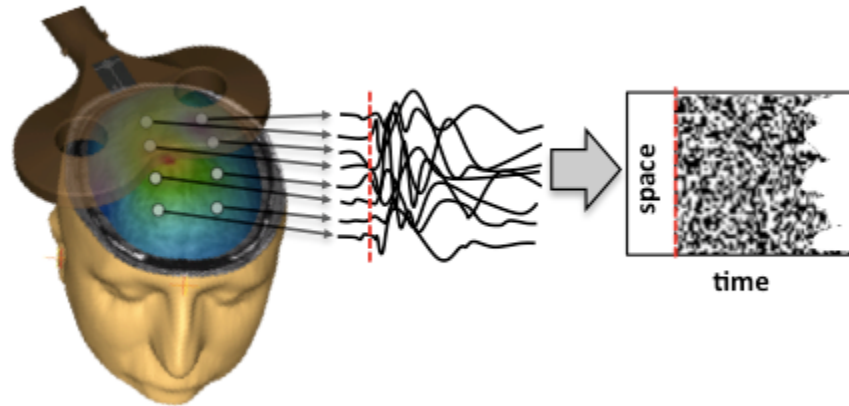
A quantification: the Perturbational Complexity Index (PCI)



A quantification: the Perturbational Complexity Index (PCI)

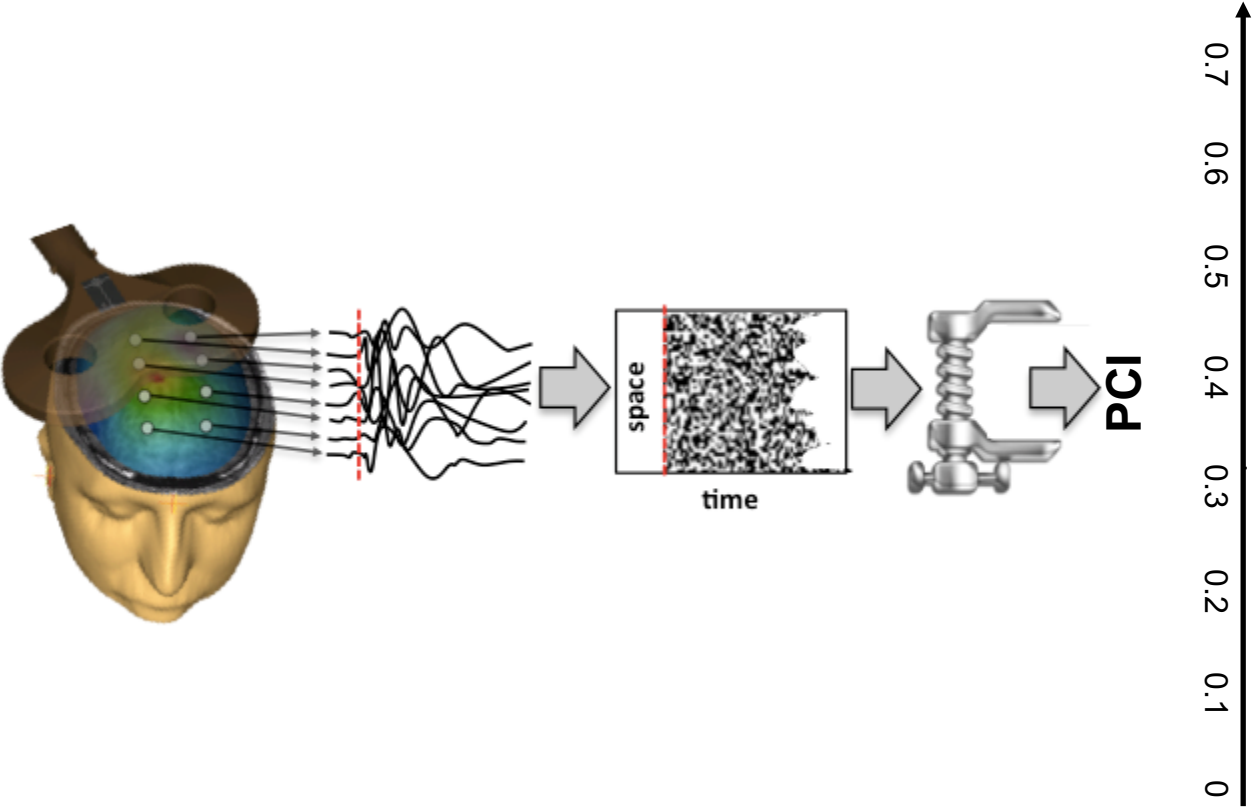


A quantification: the Perturbational Complexity Index (PCI)



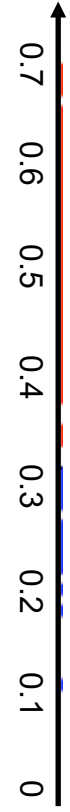
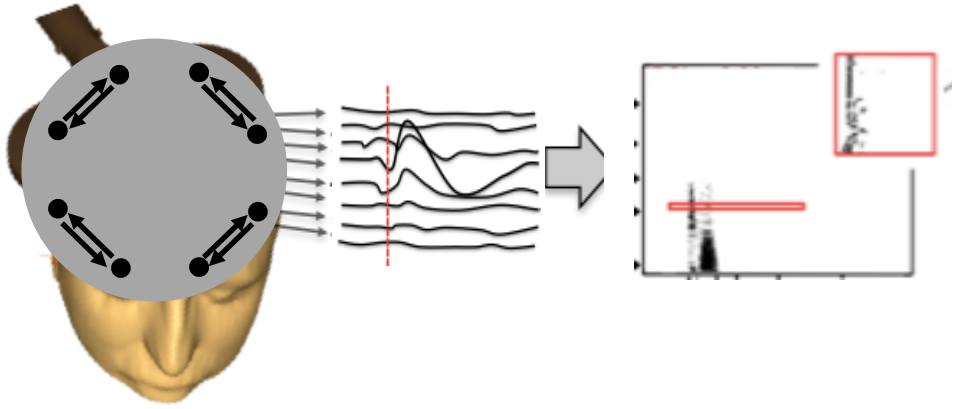
Casali et al., *Science Translational Medicine* 2013;

A quantification: the Perturbational Complexity Index (PCI)



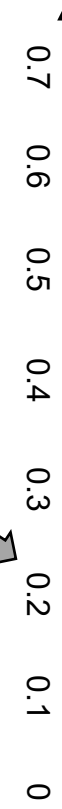
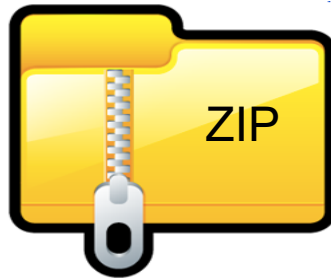
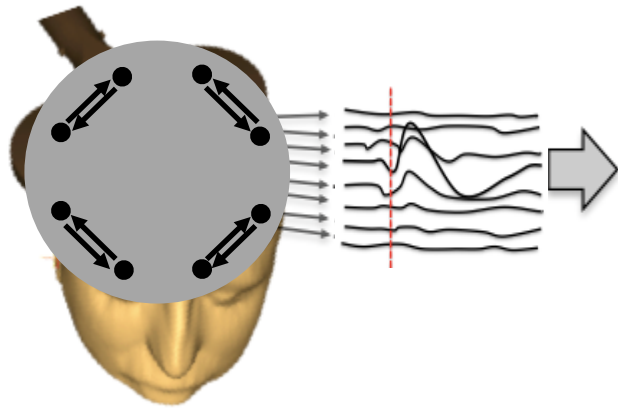
Casali et al., *Science Translational Medicine* 2013;

No Integration



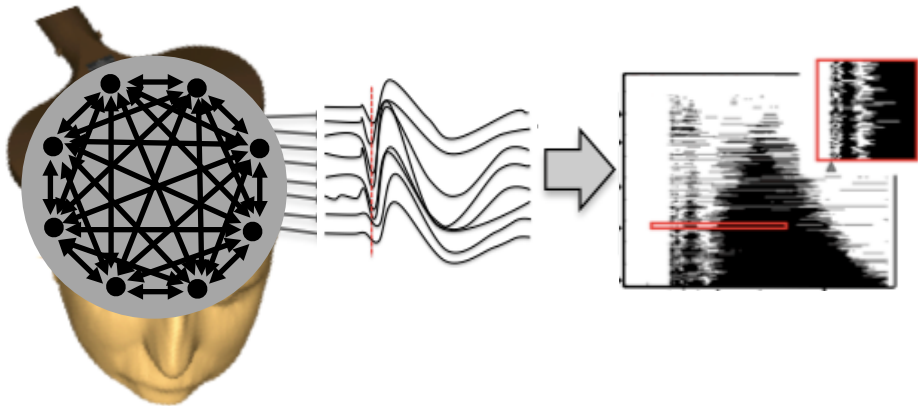
1
1

No Integration

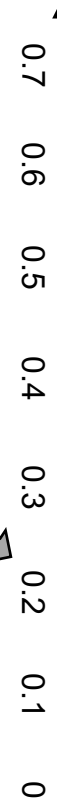
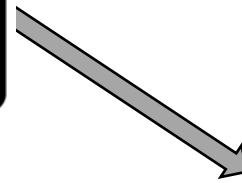
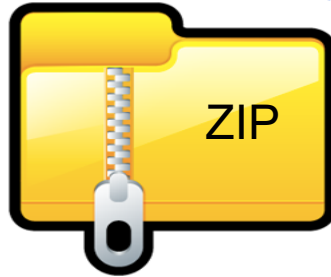
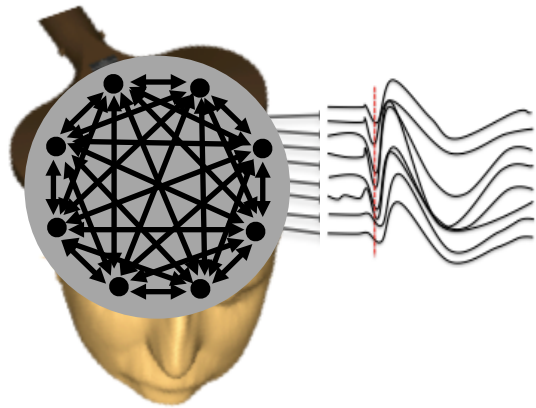


Low PCI

No Differentiation

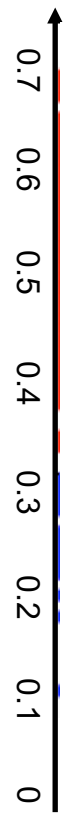
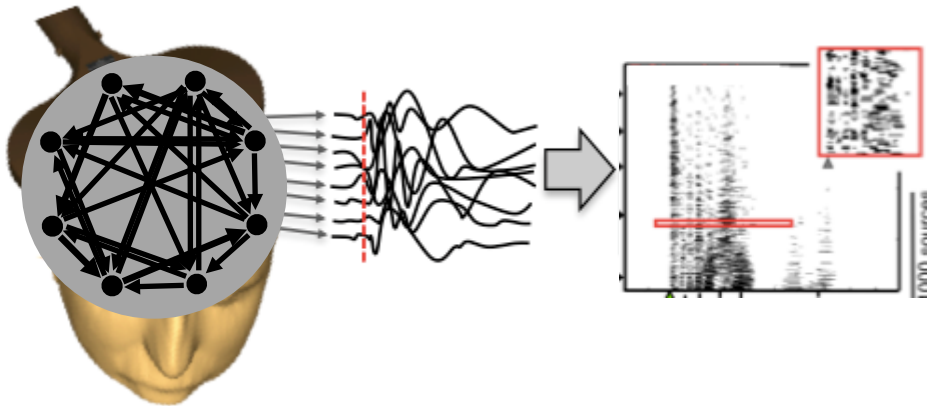


No Differentiation

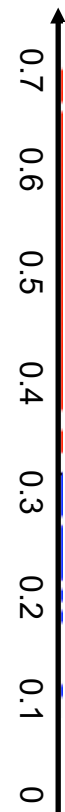
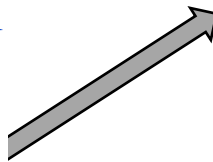
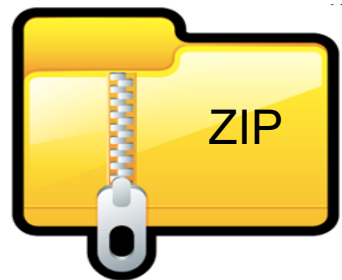
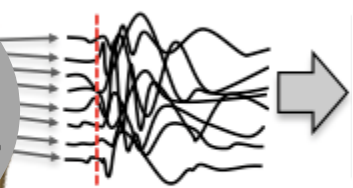
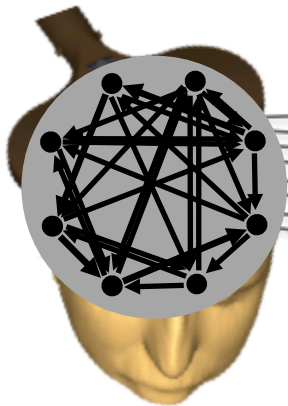


Low PCI

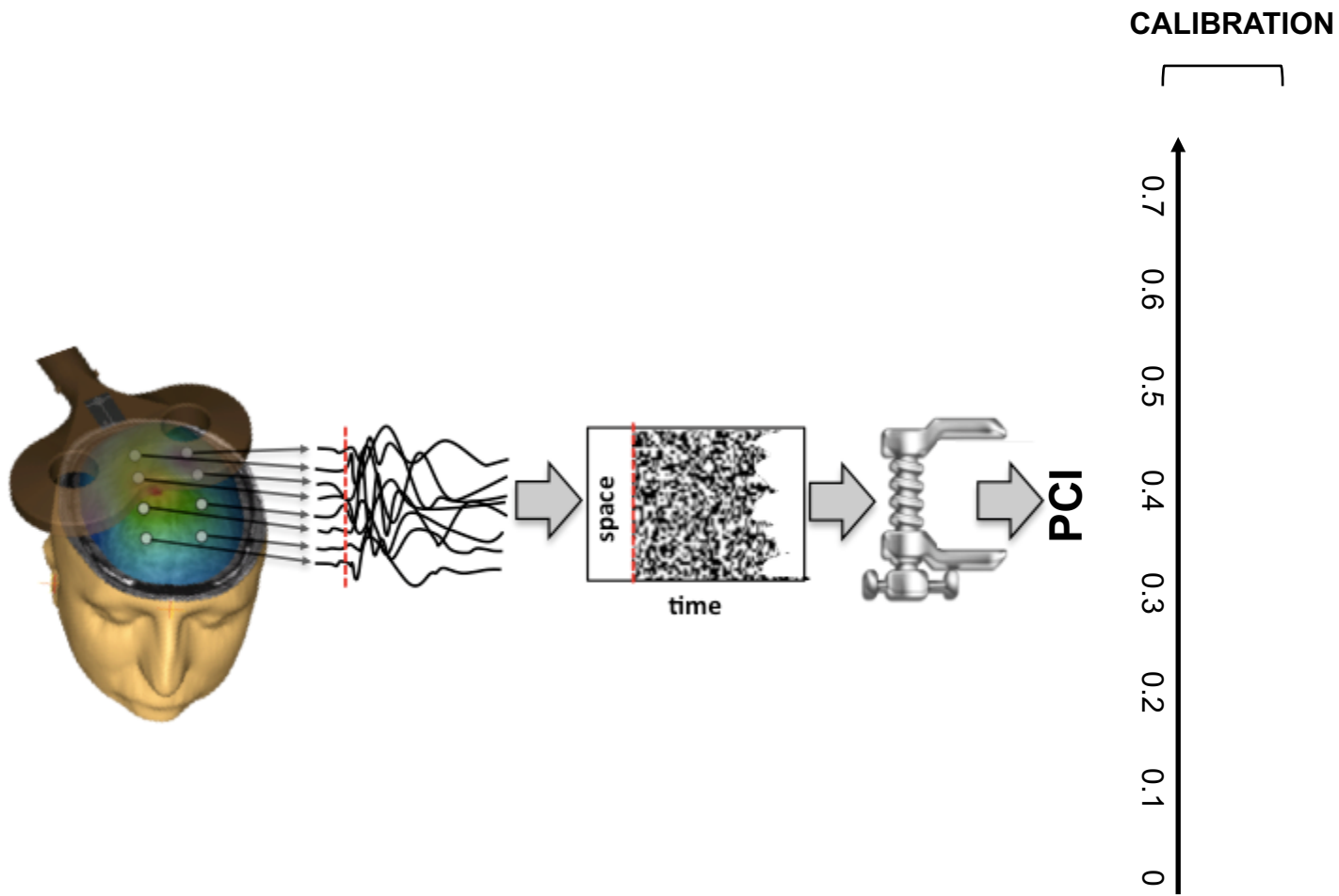
Integration
&
Differentiation

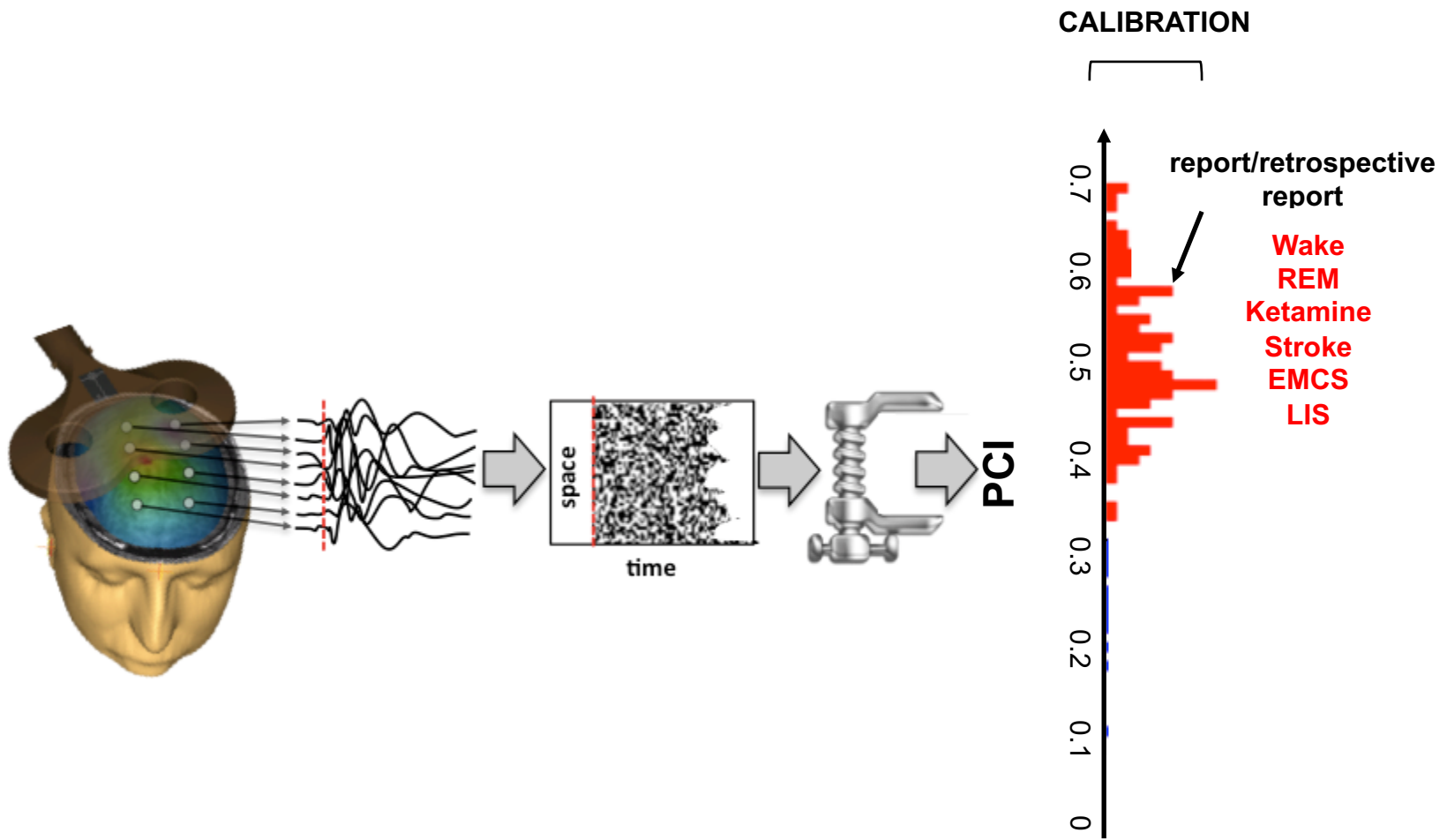


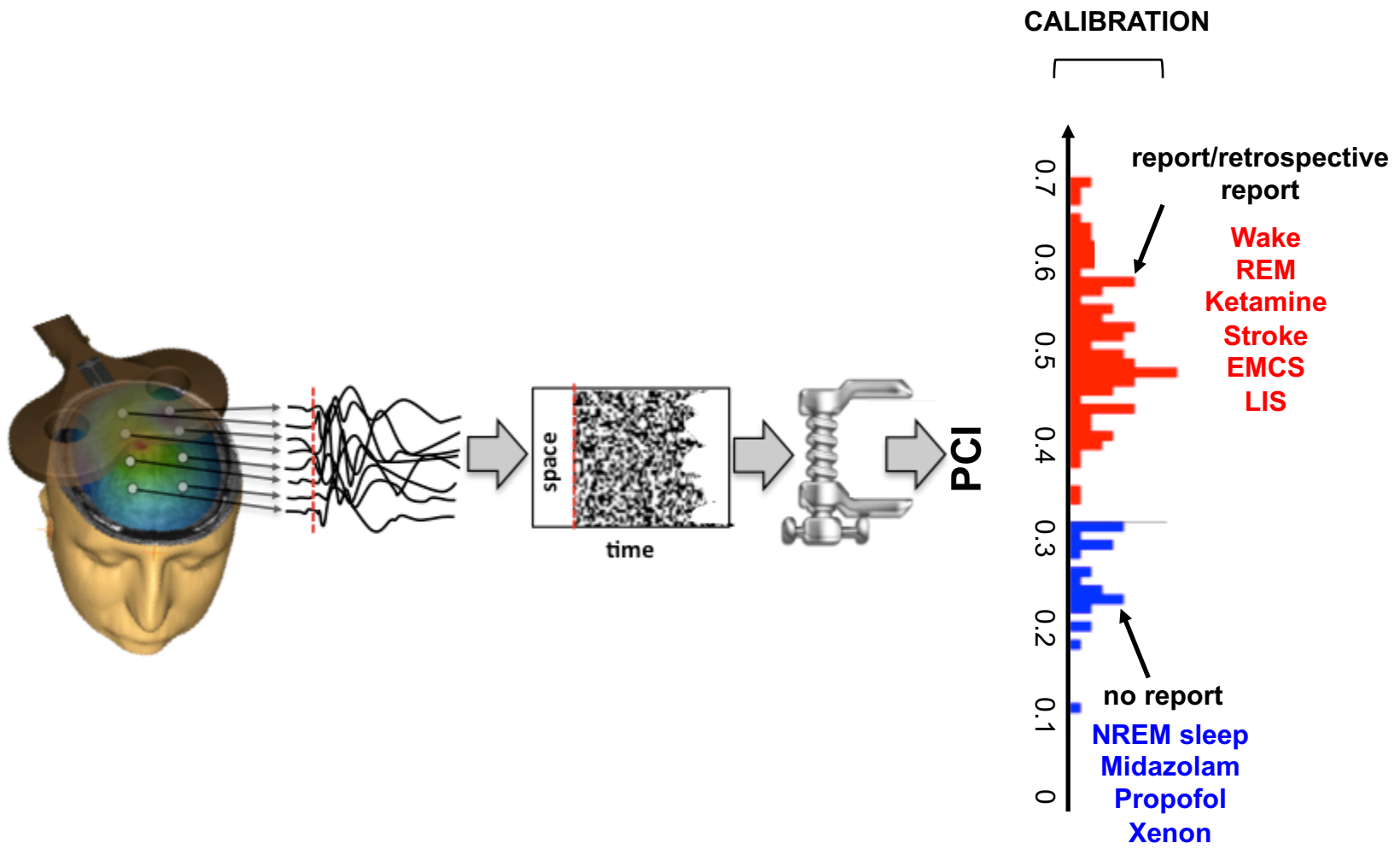
Integration
&
Differentiation

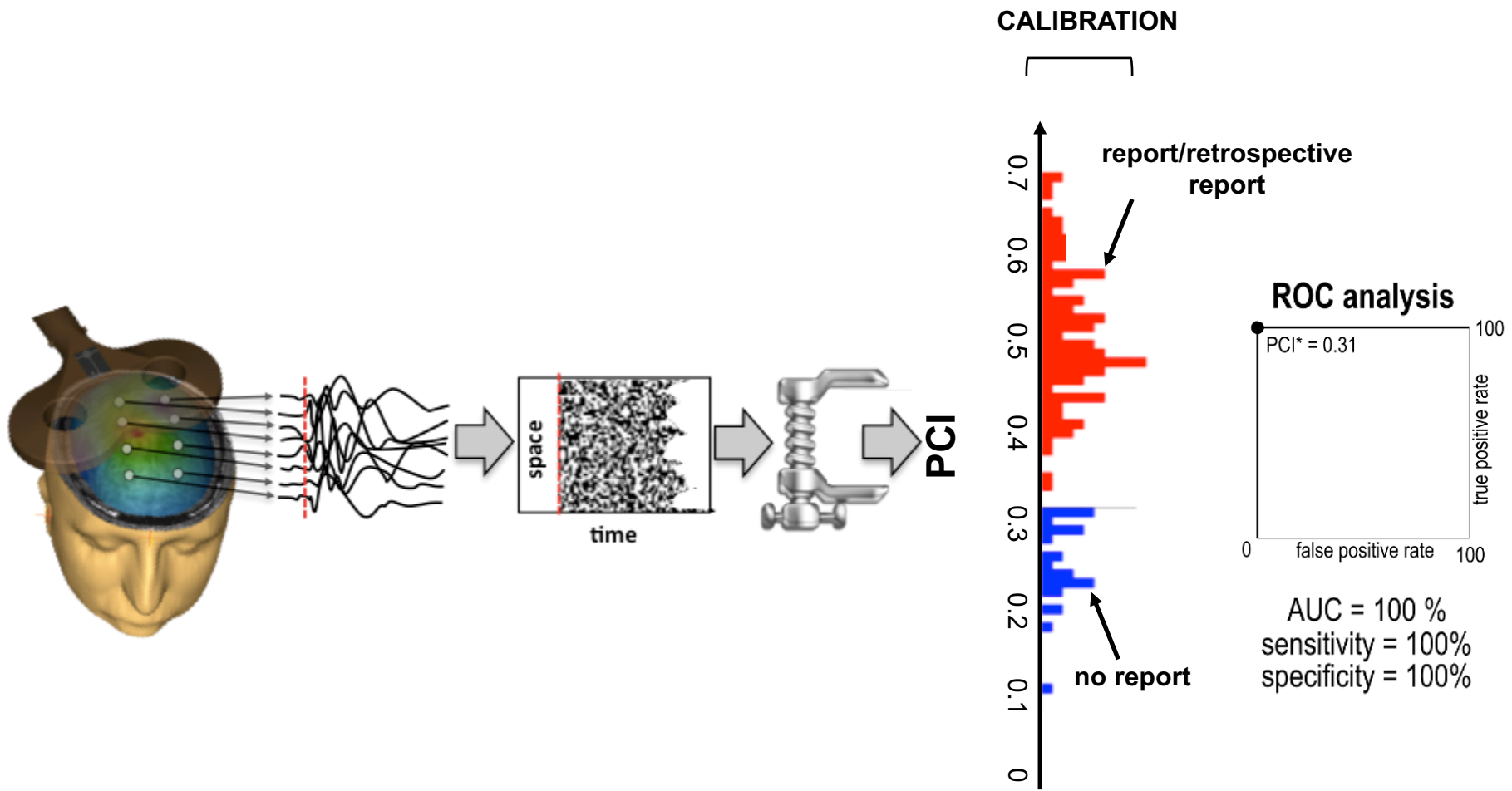


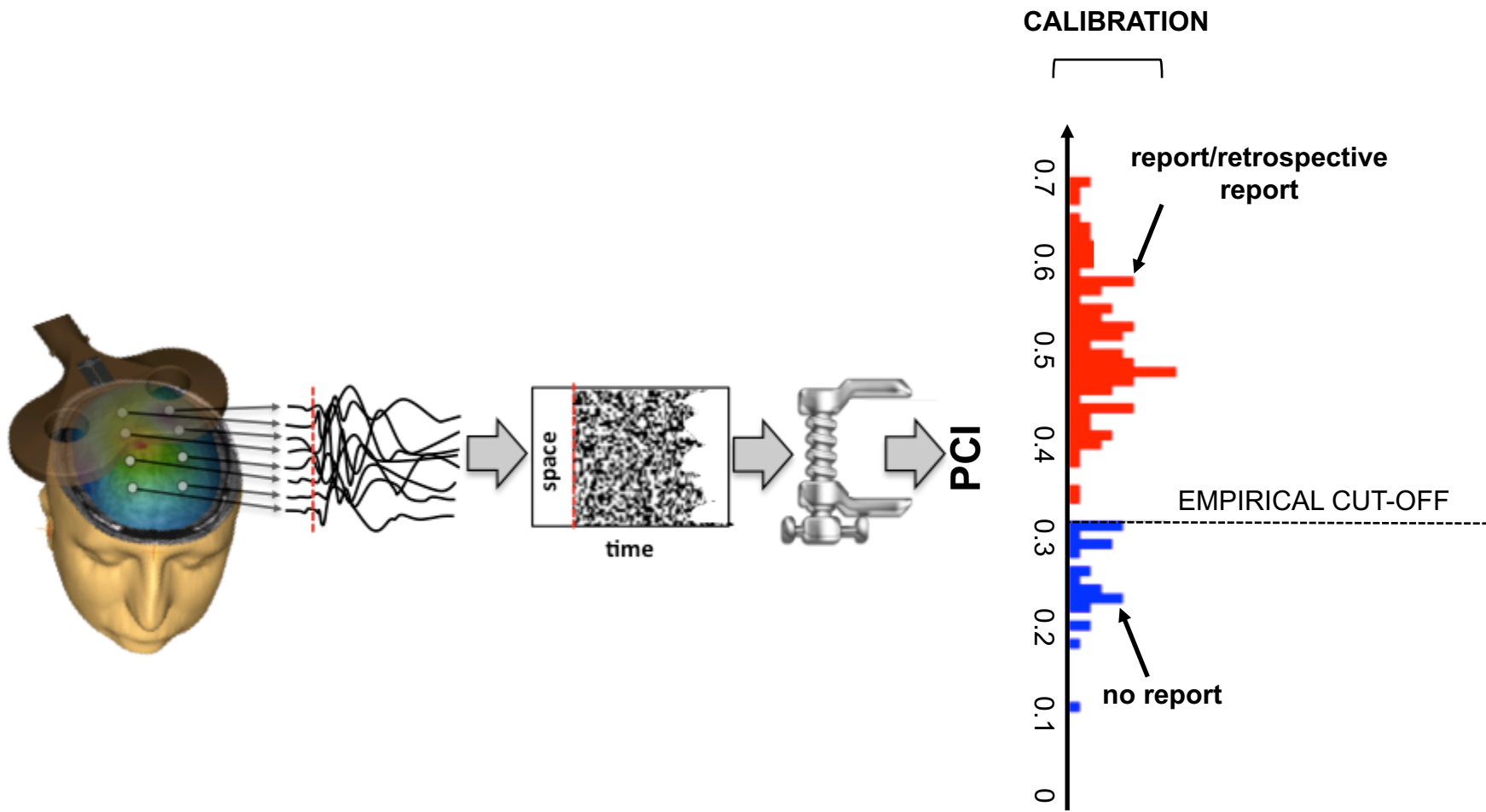
High PCI

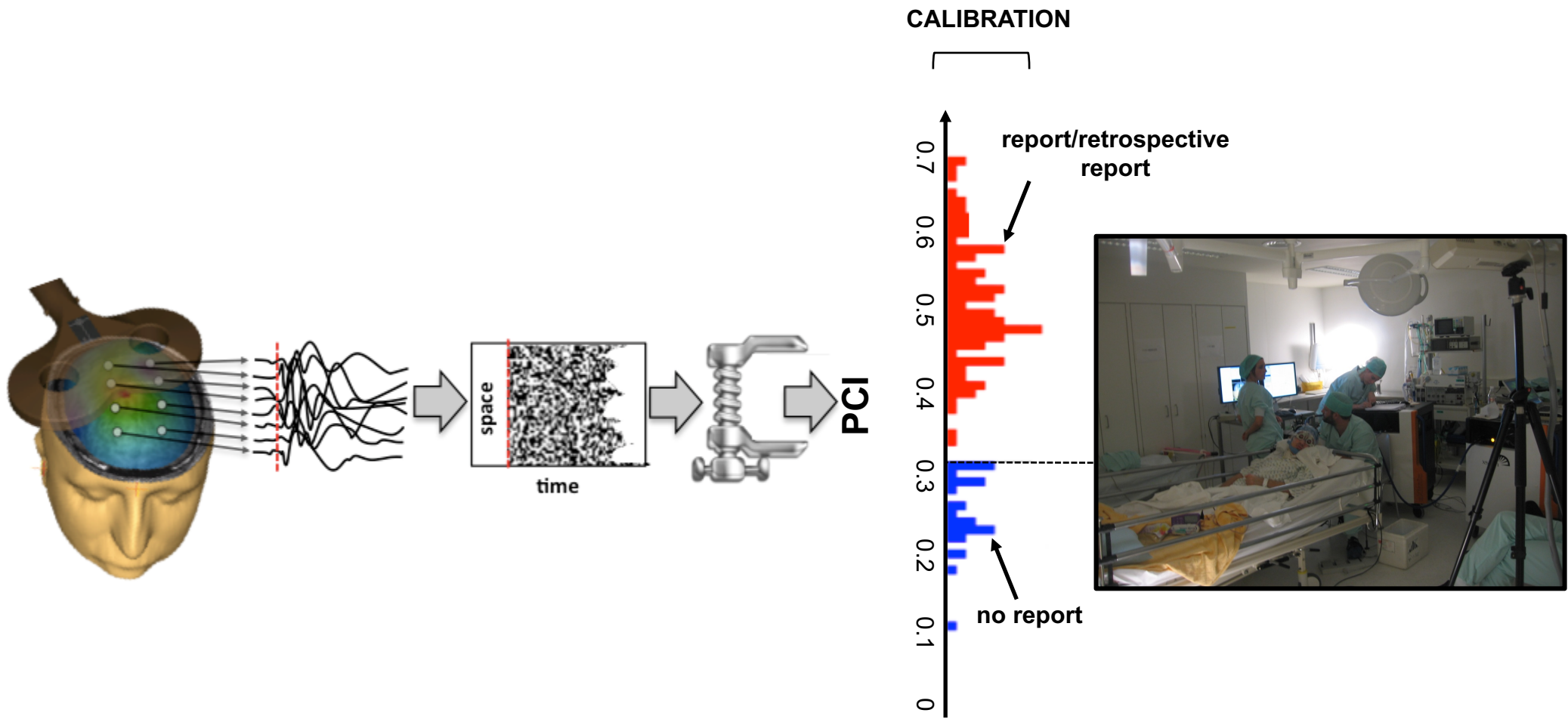


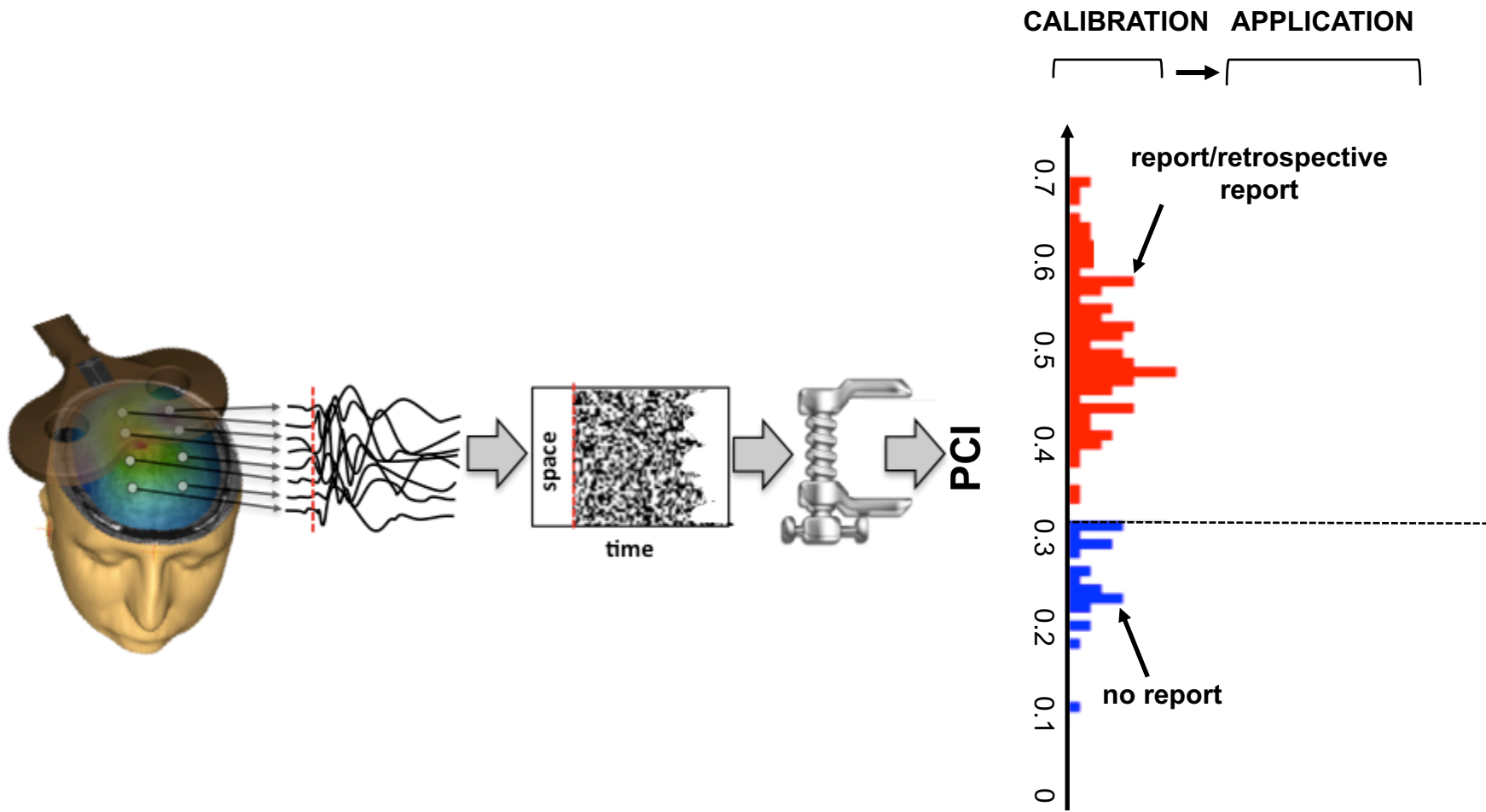


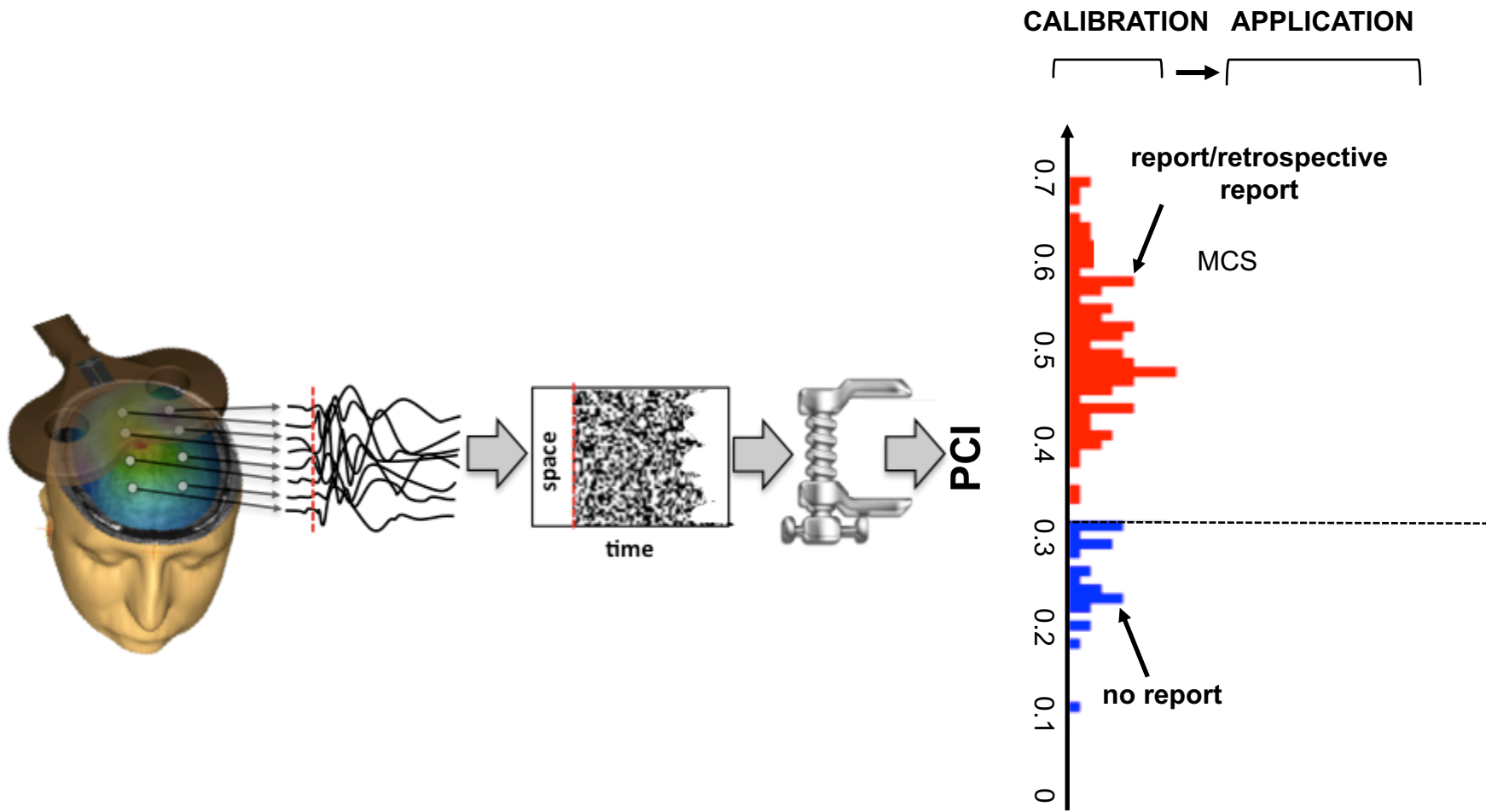


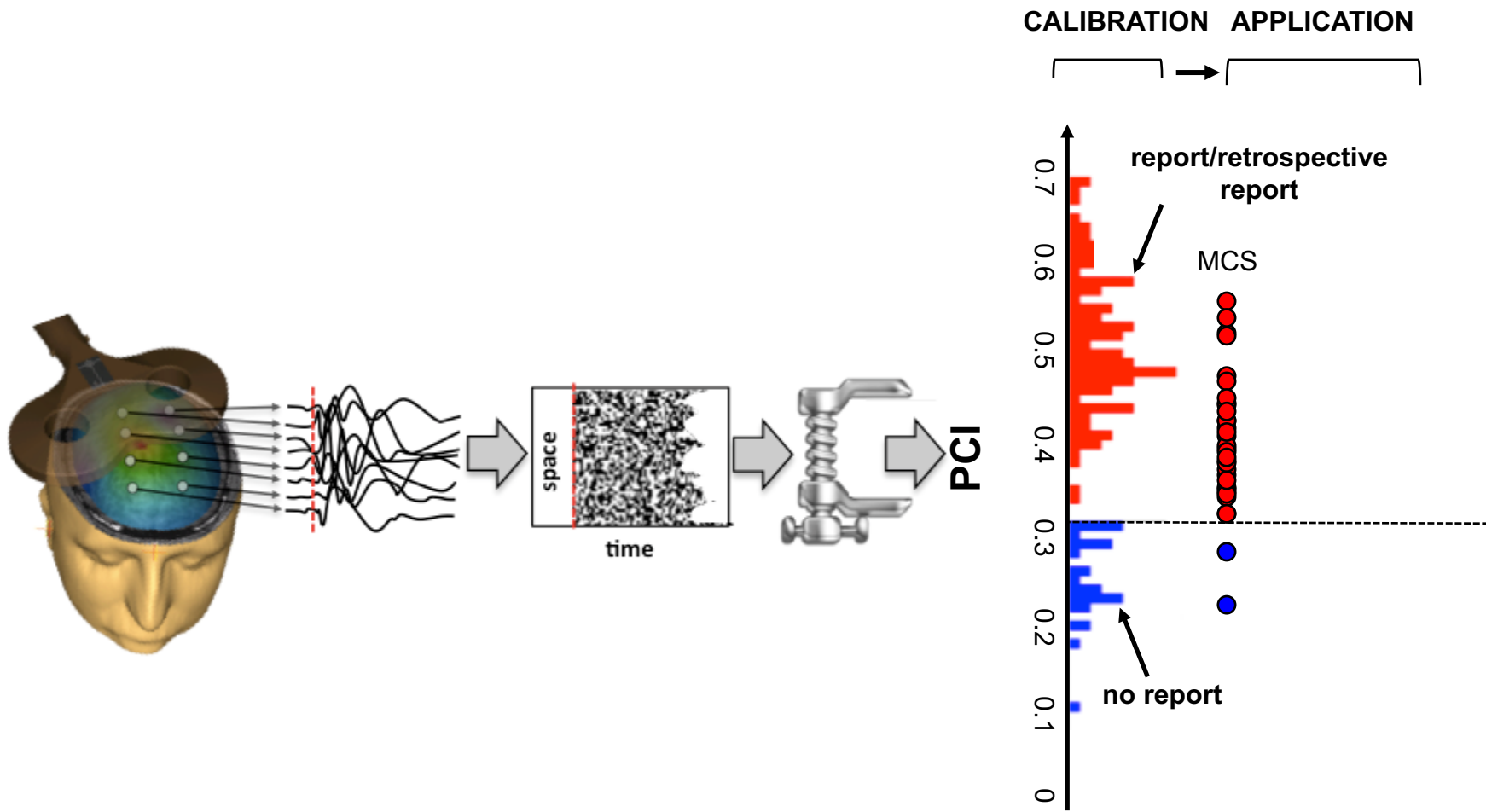


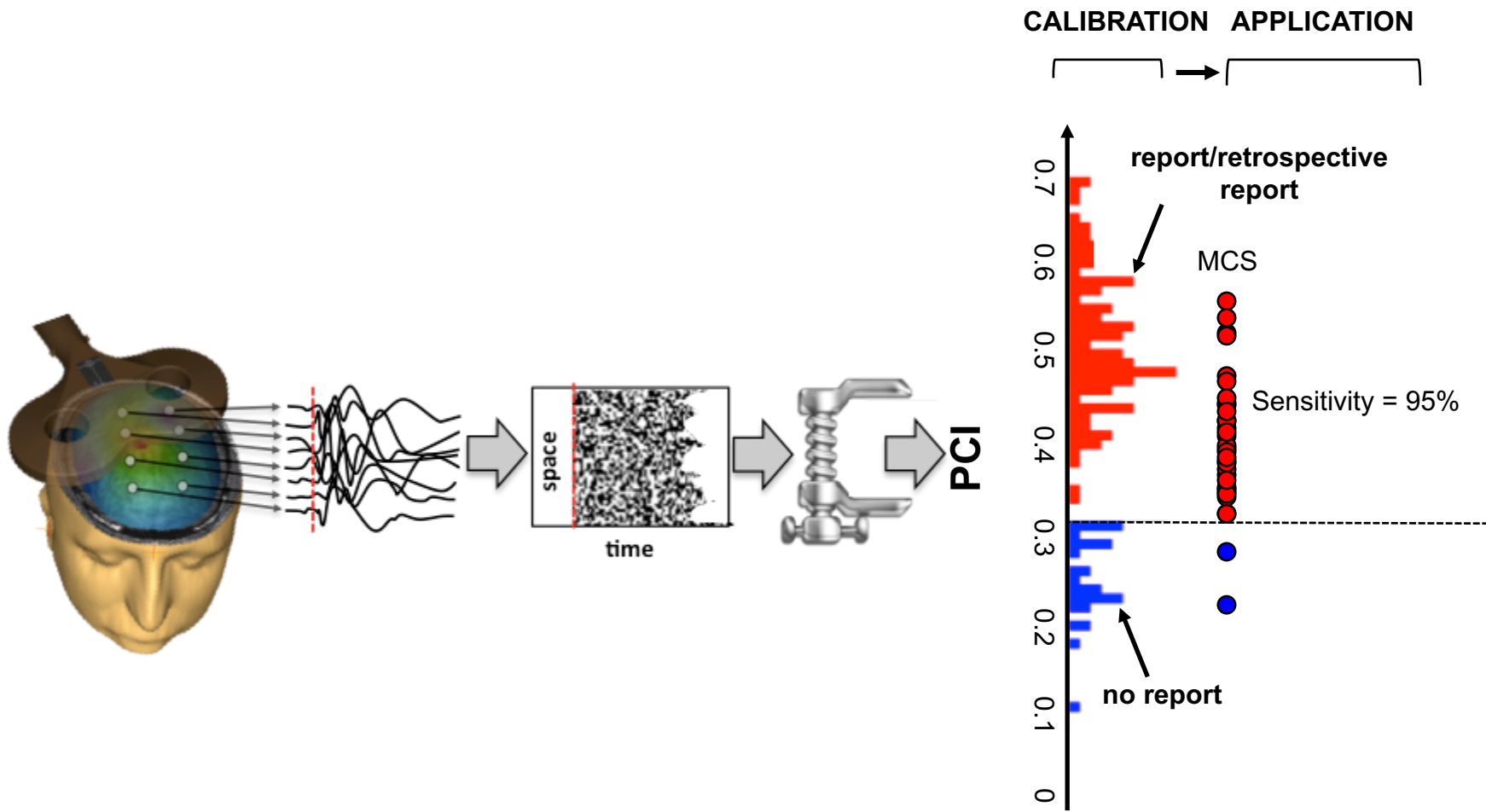




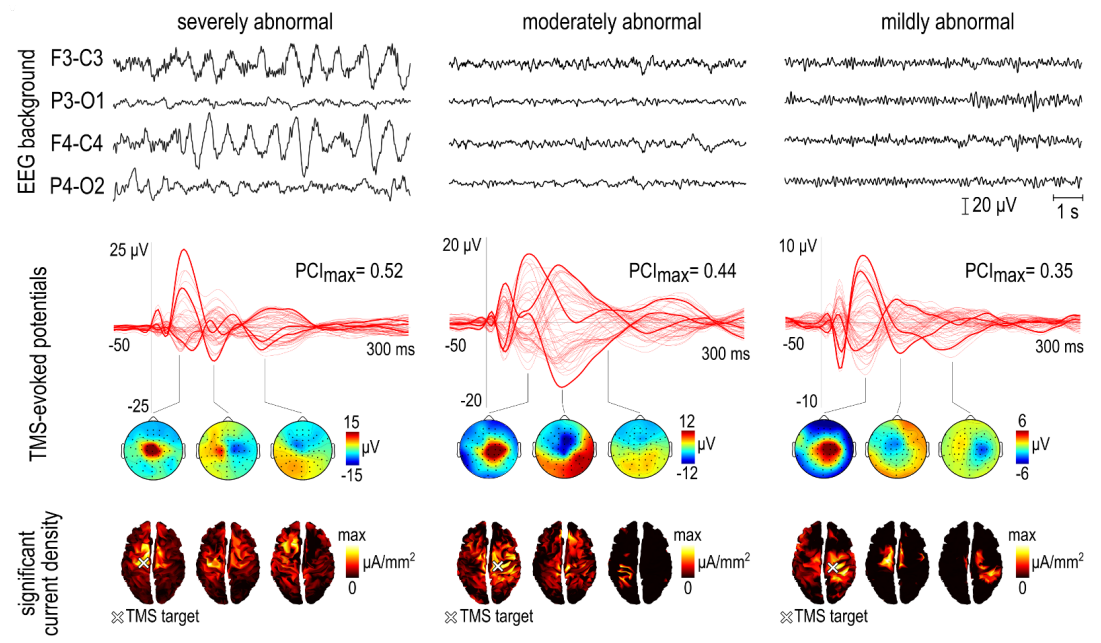




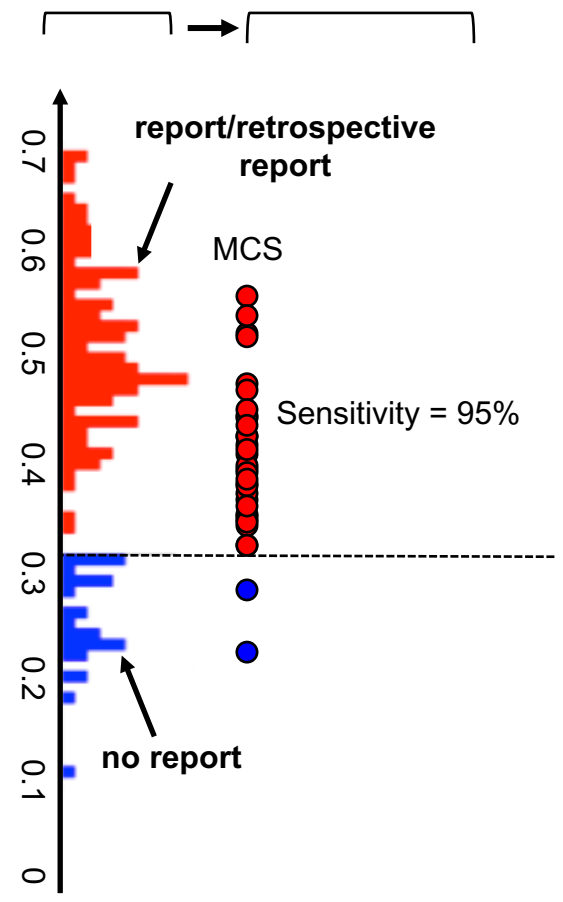


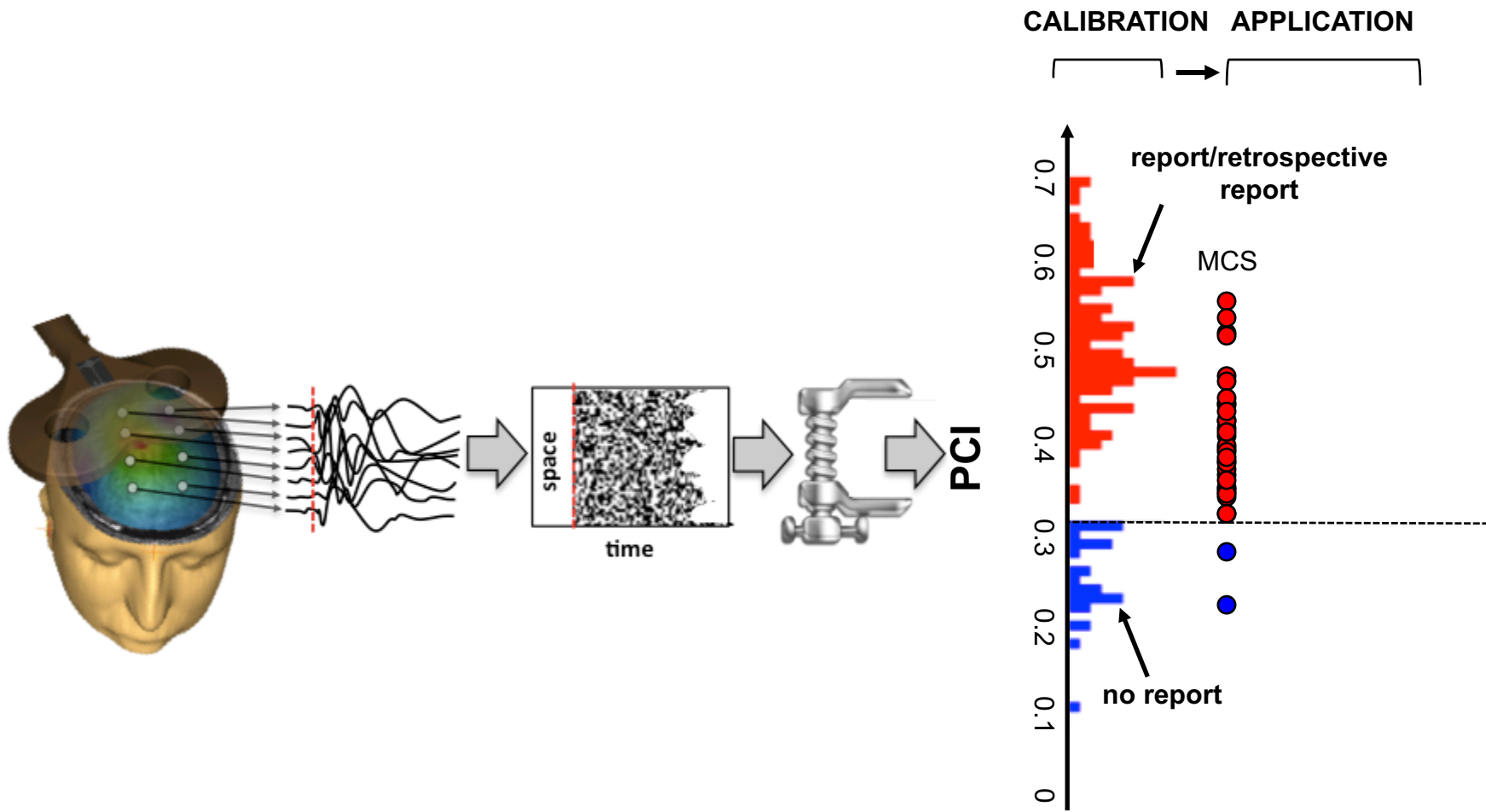


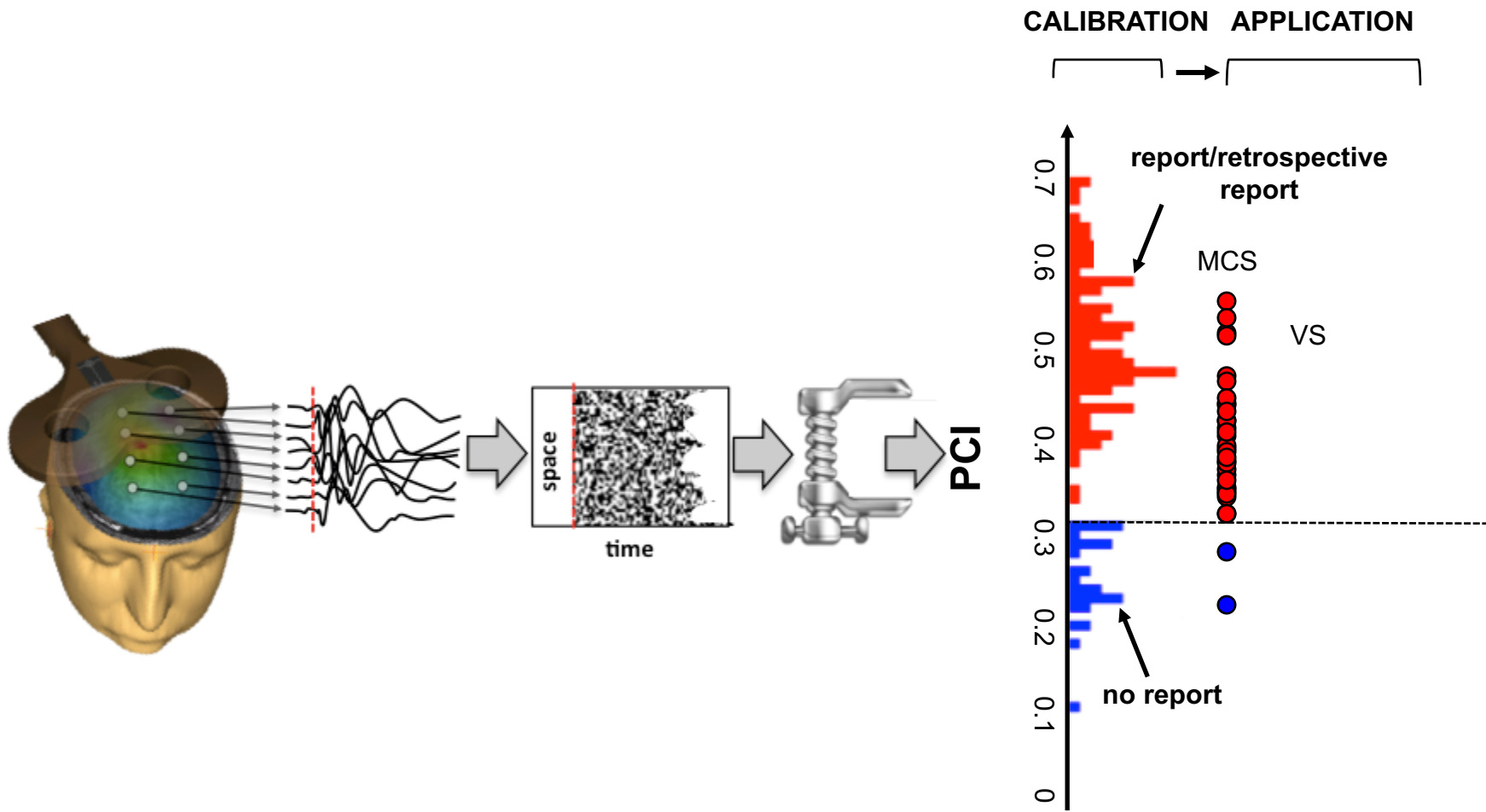
Spont. EEG

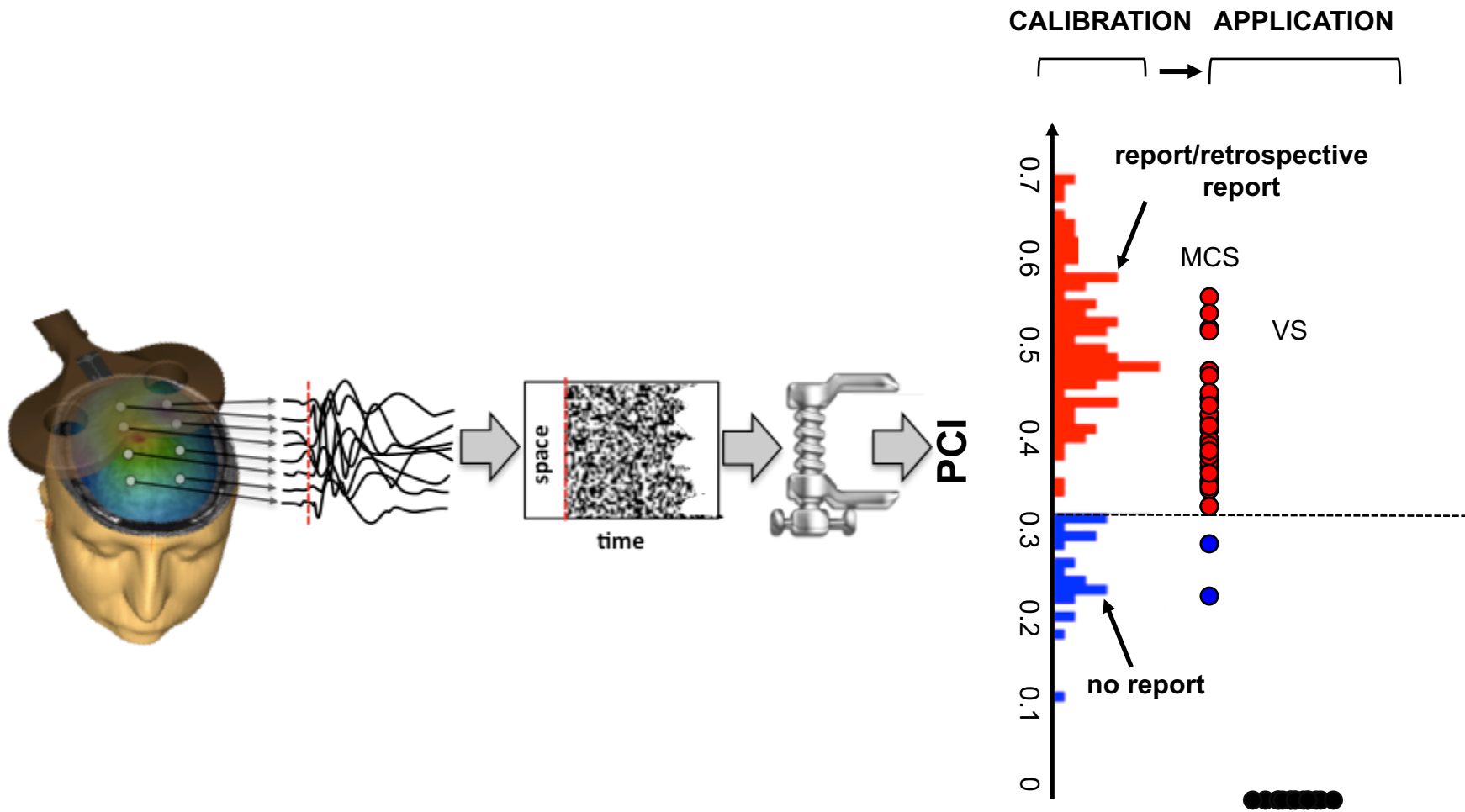


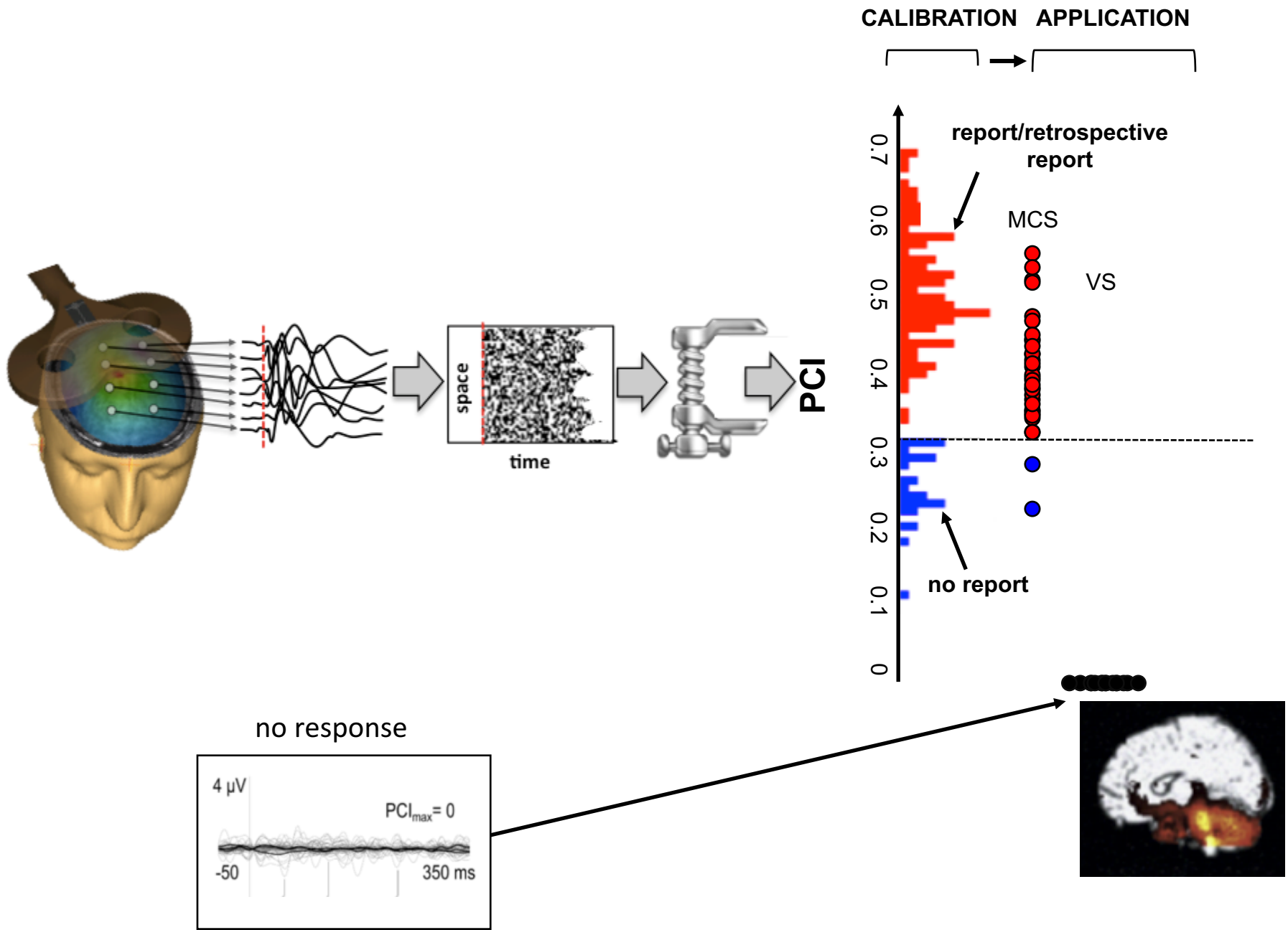
CALIBRATION APPLICATION

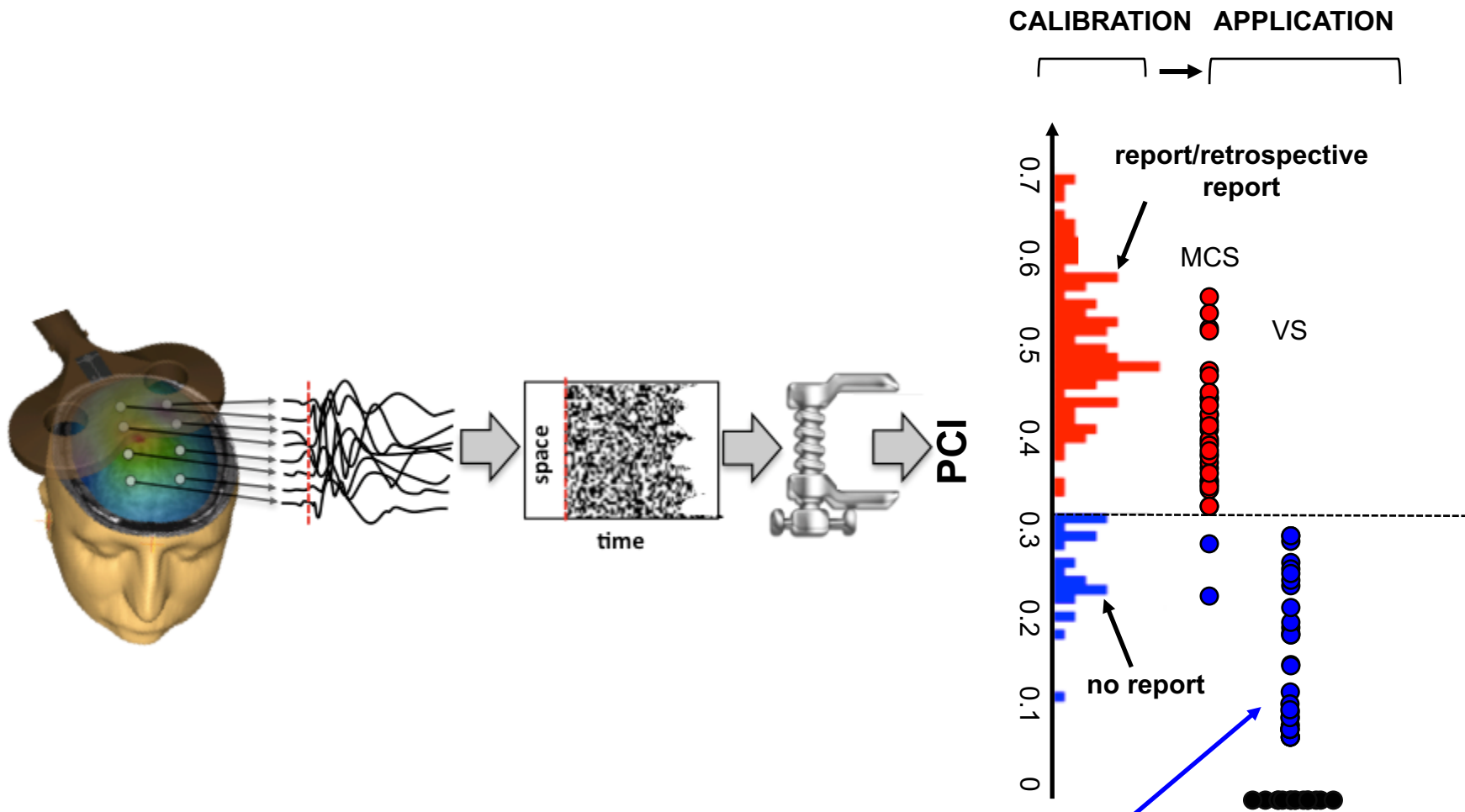




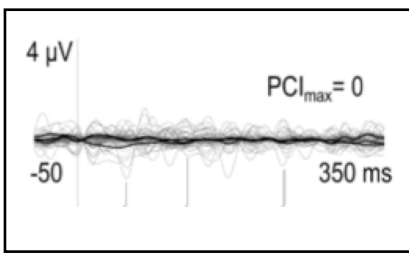




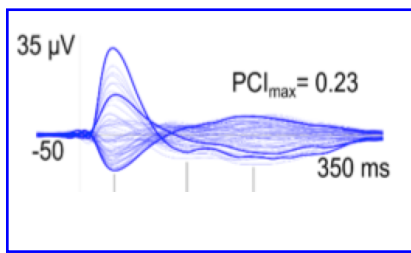


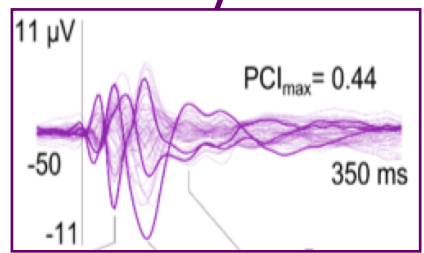
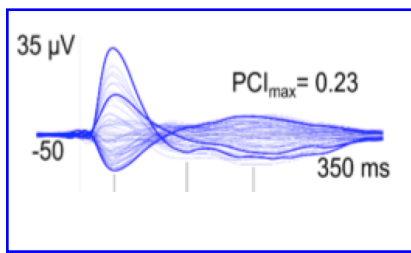
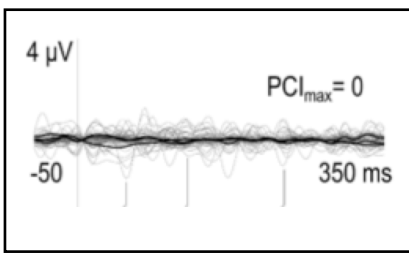
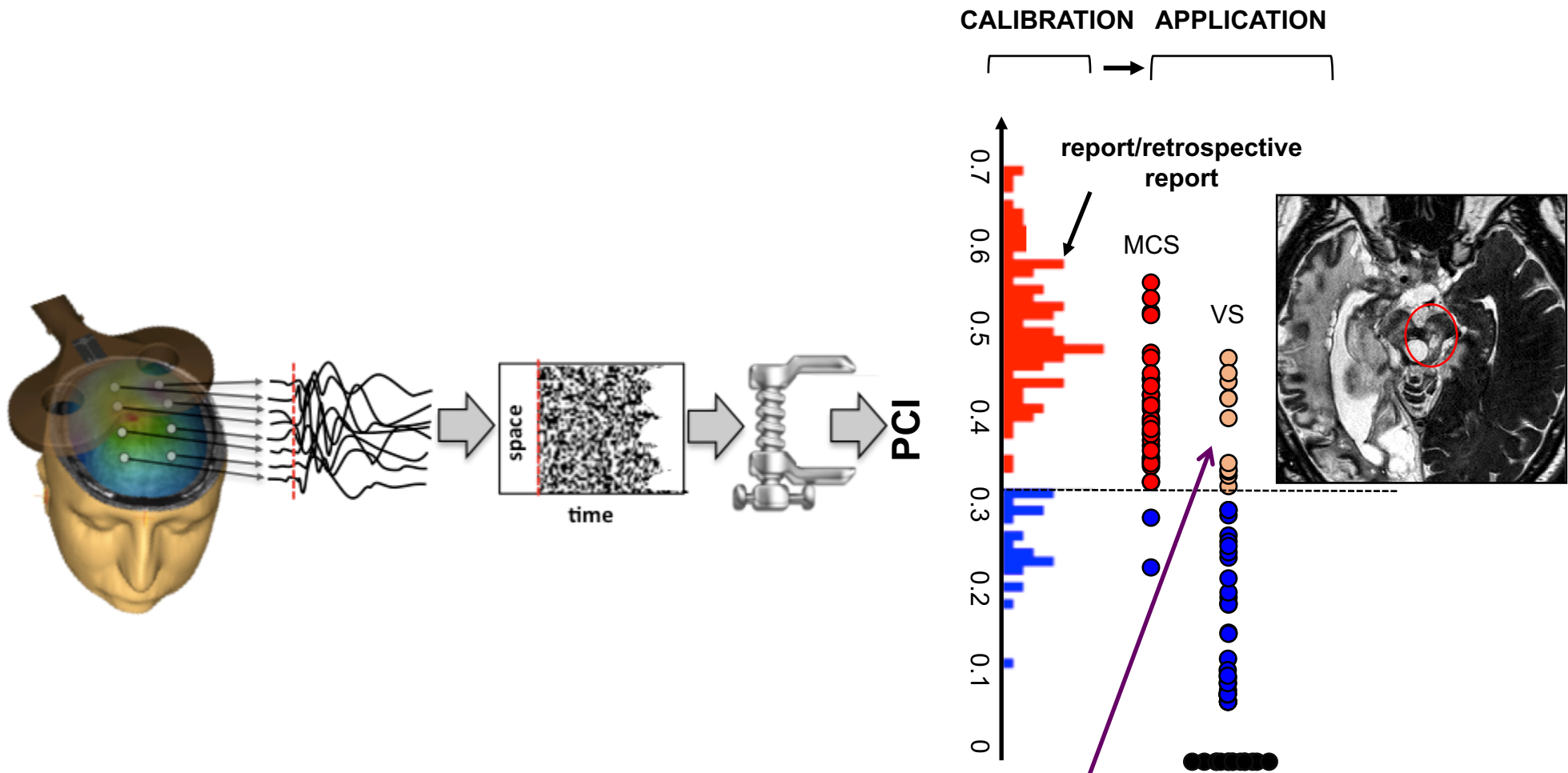


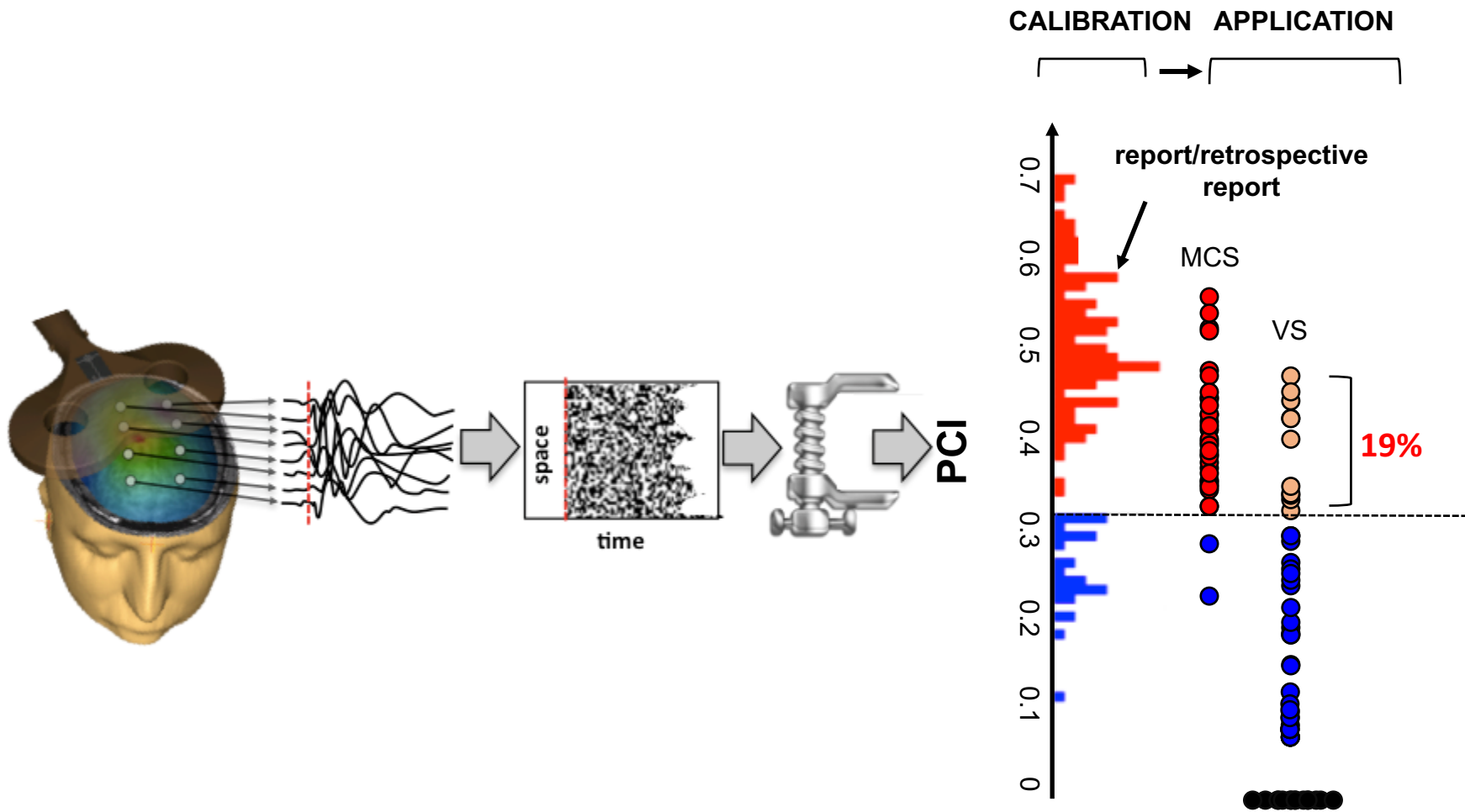
no response



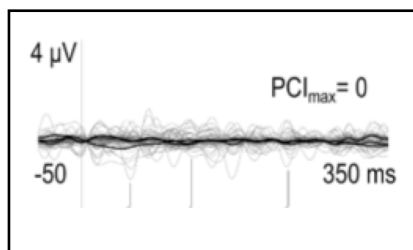
low-complexity



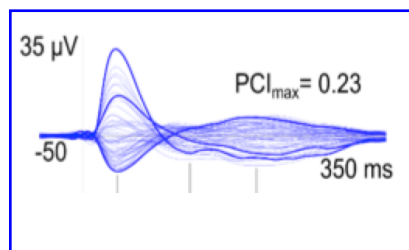




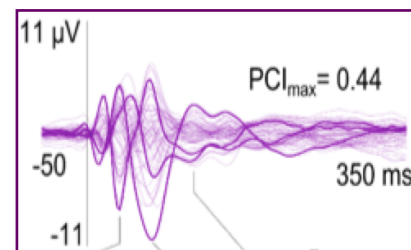
no response

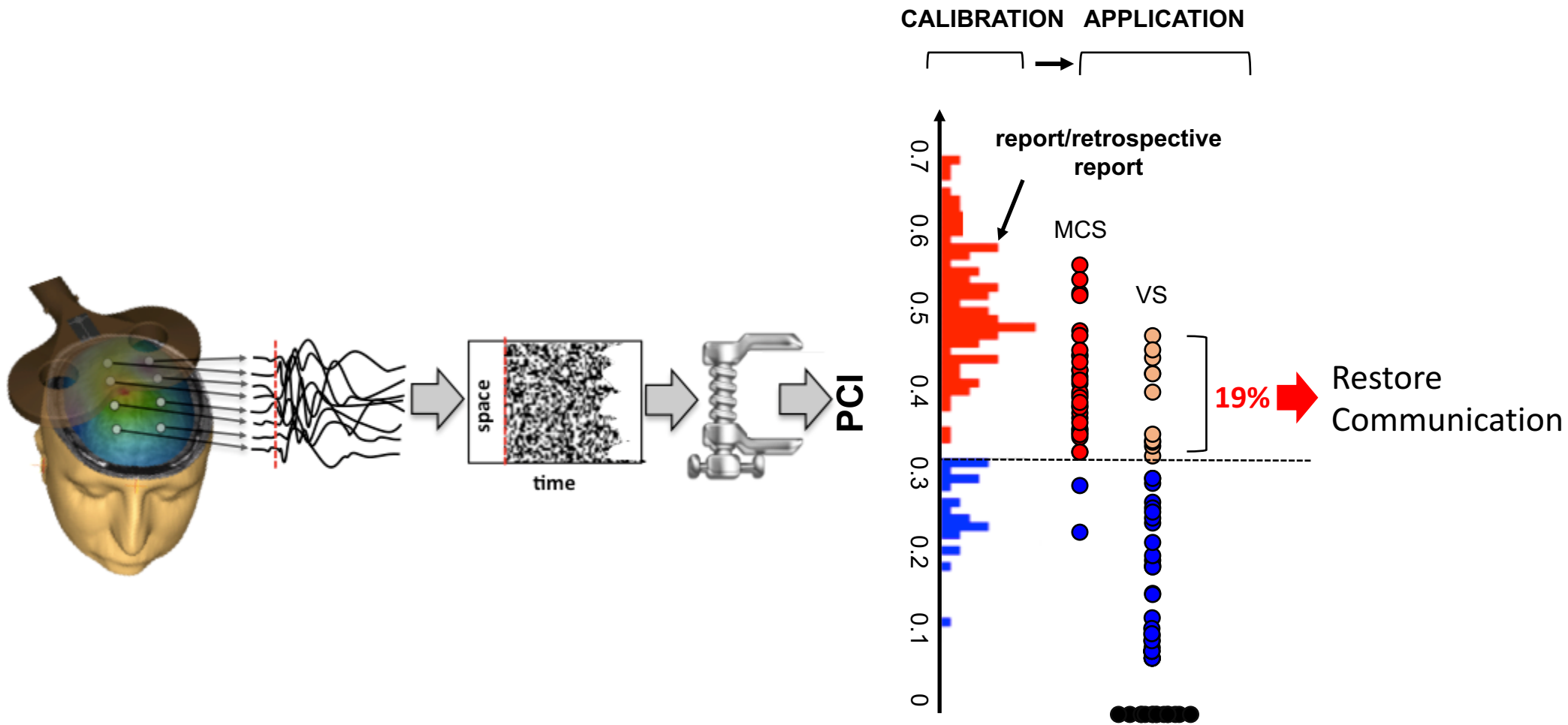


low-complexity

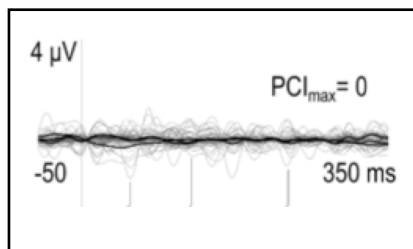


high-complexity

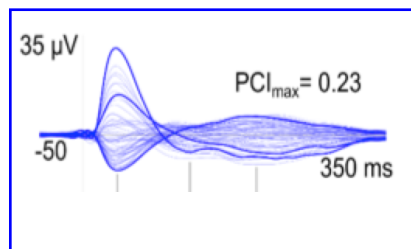




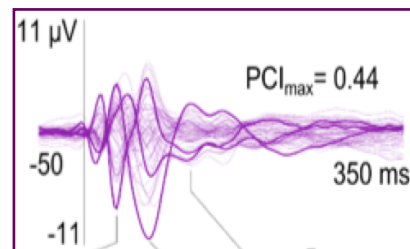
no response

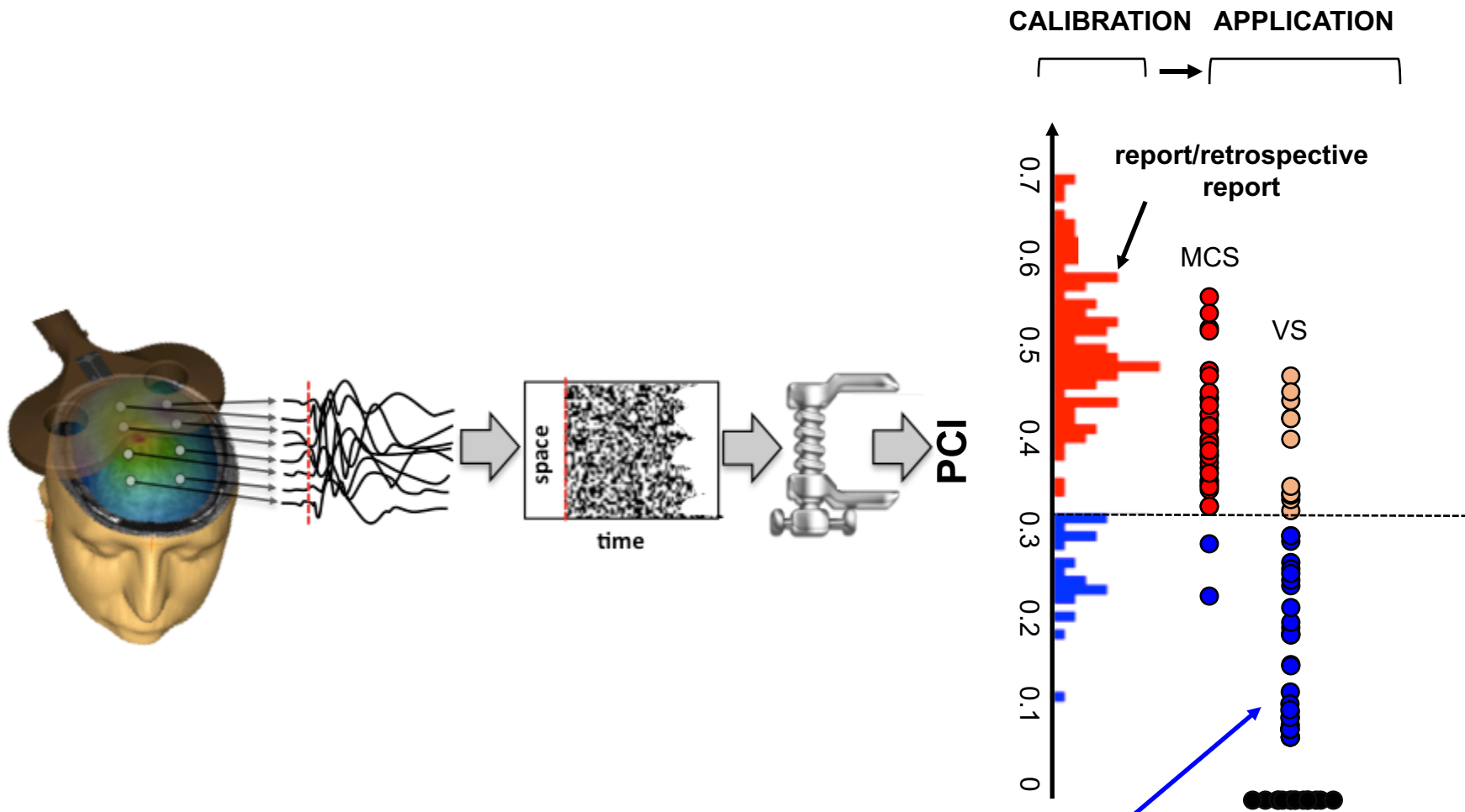


low-complexity

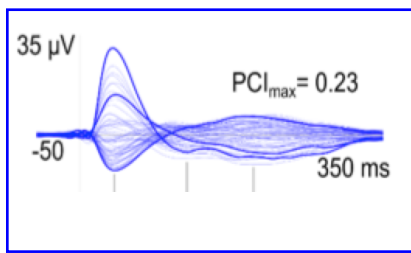


high-complexity

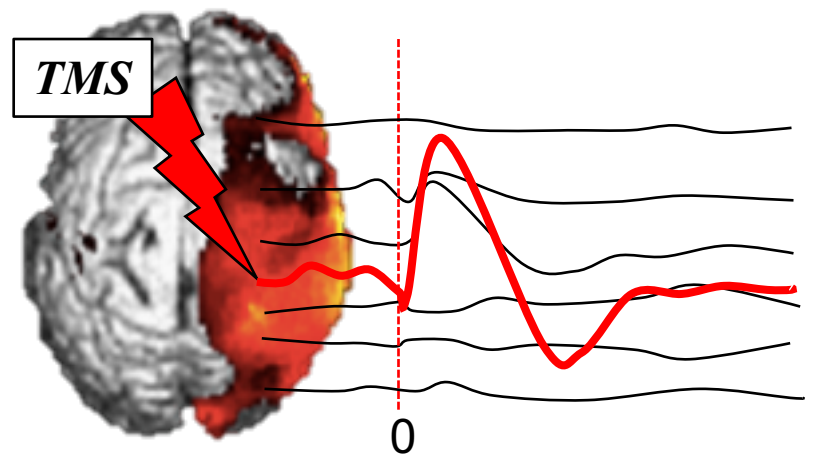




low-complexity

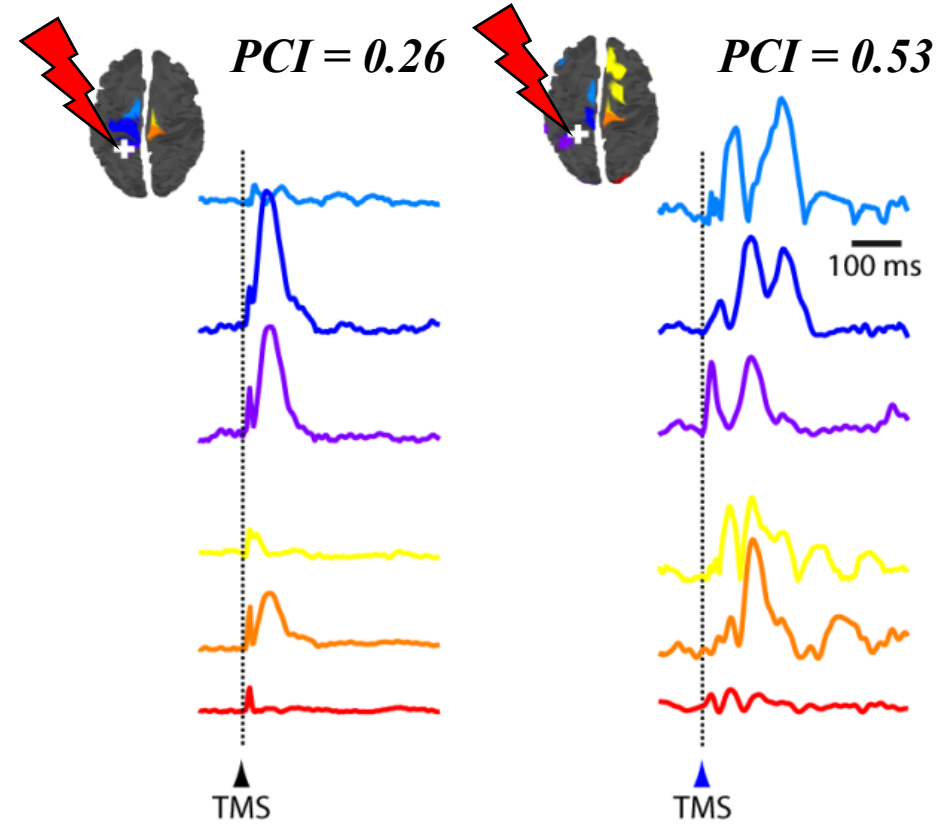


Structurally intact, metabolically active,...

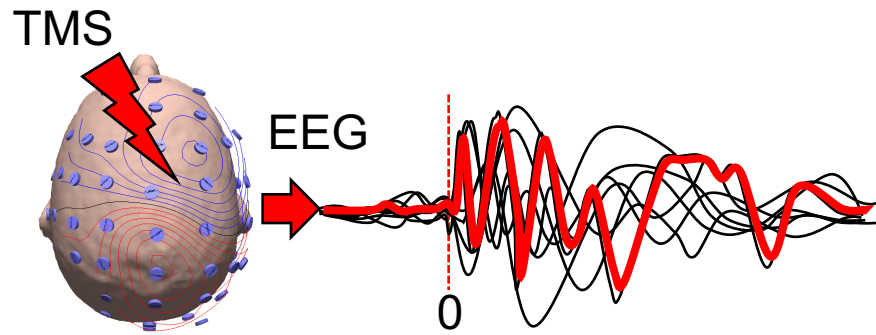


...but stuck in low-complexity

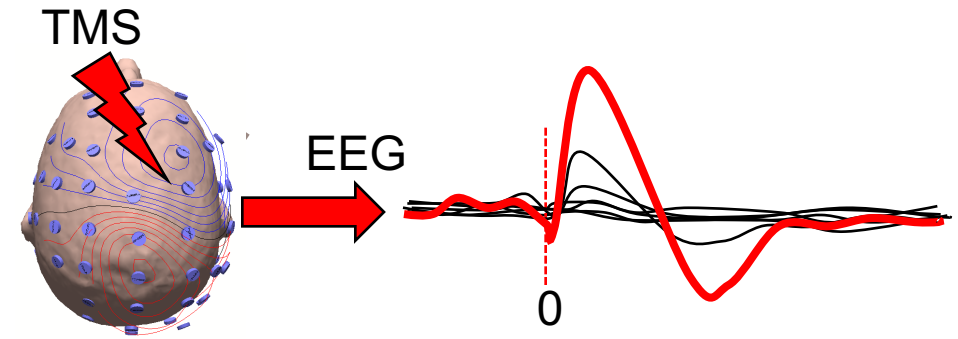
Vegetative State → *Recovery*



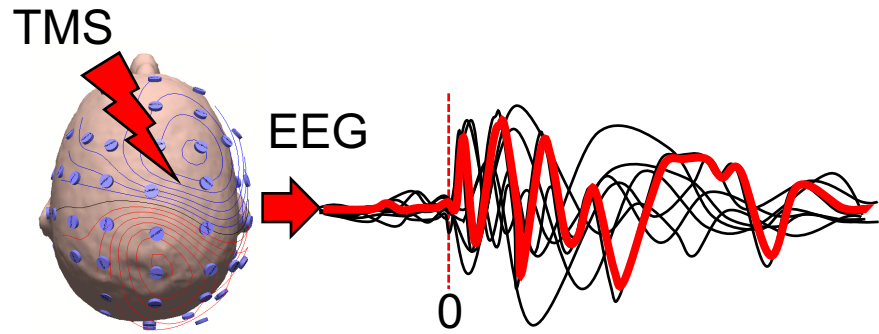
Wakefulness



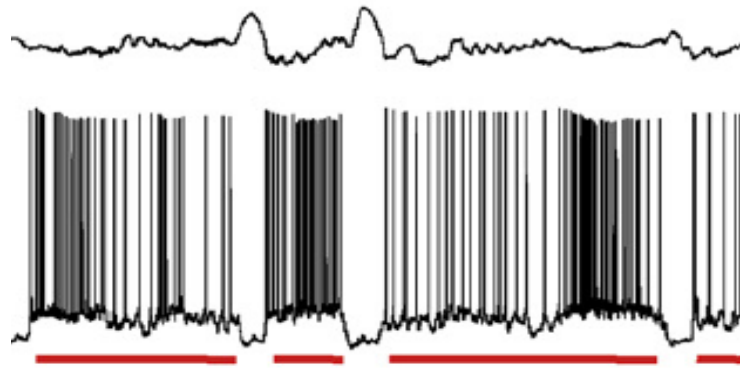
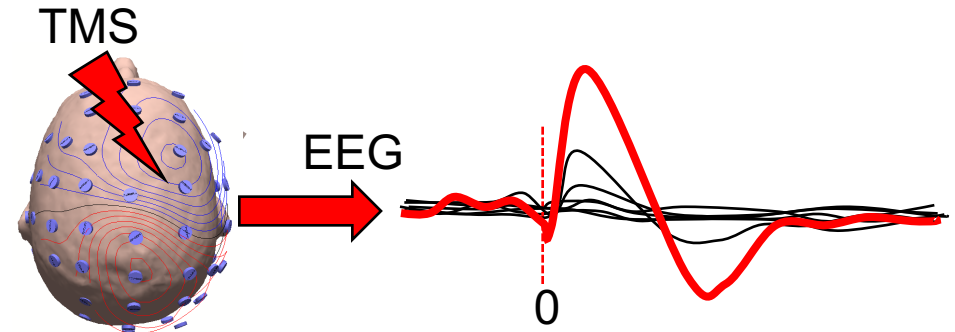
Sleep



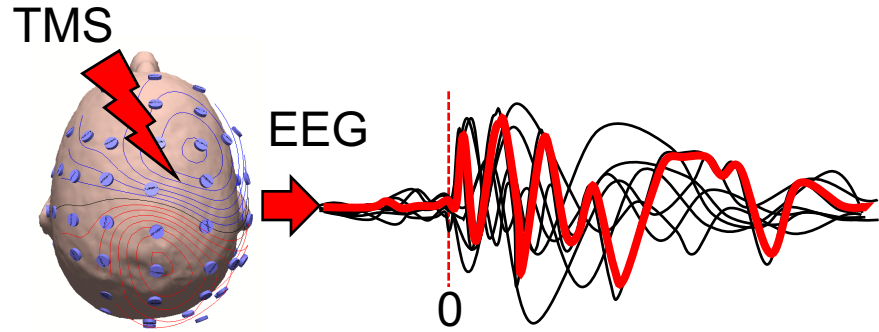
Wakefulness



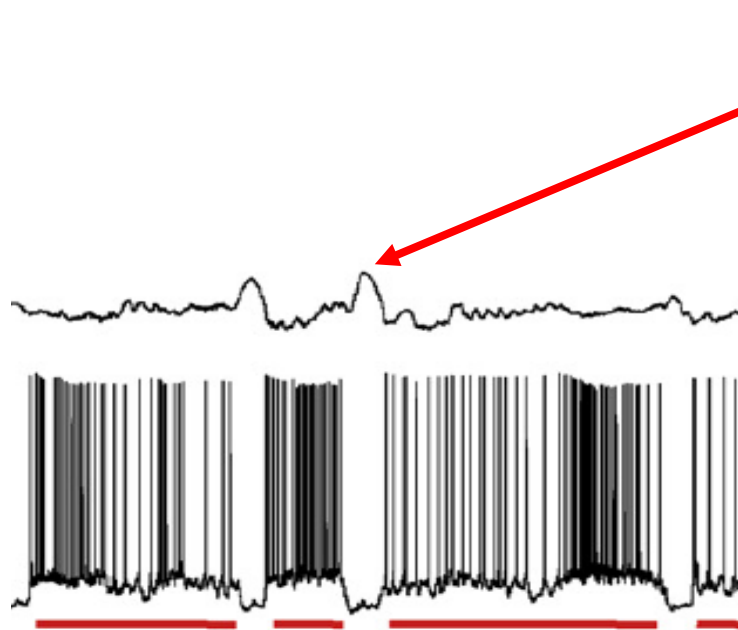
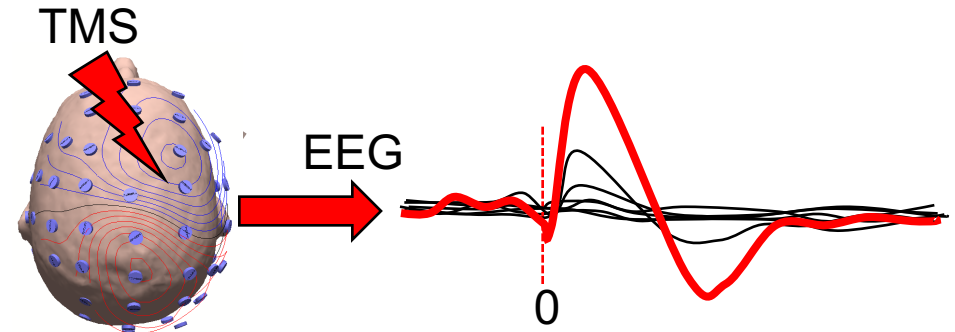
Sleep



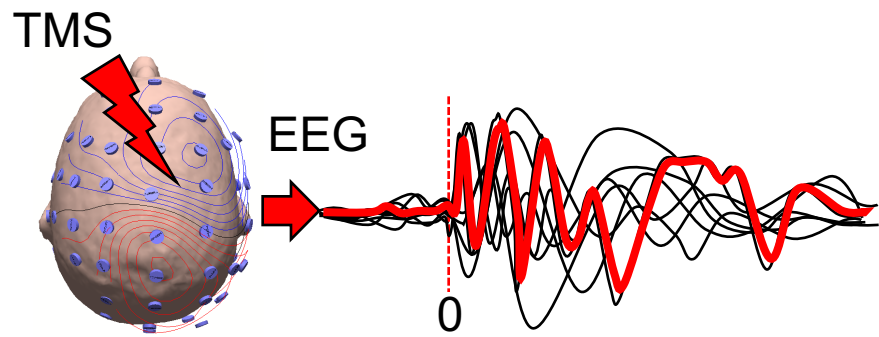
Wakefulness



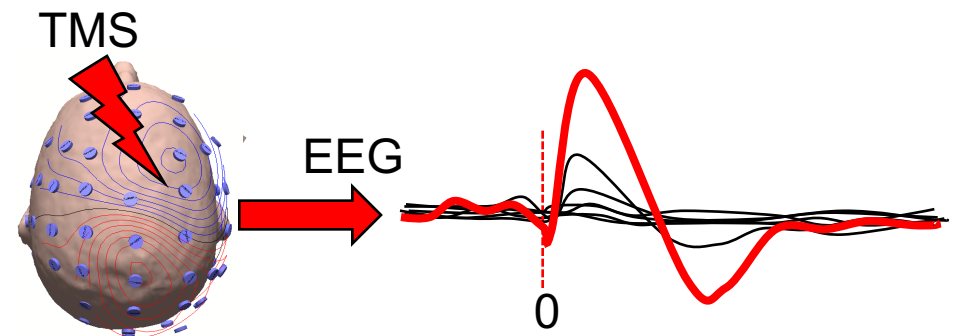
Sleep



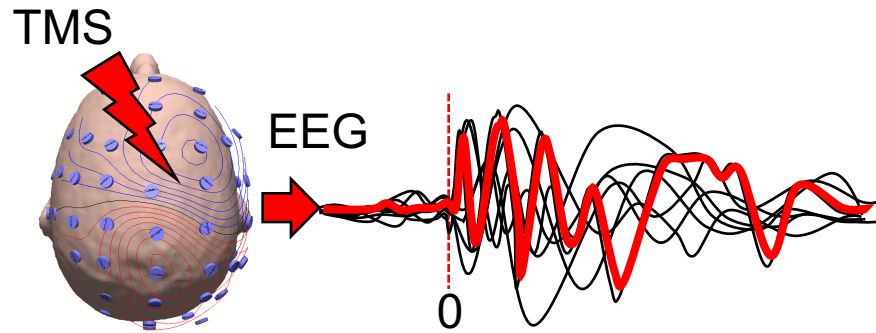
Wakefulness



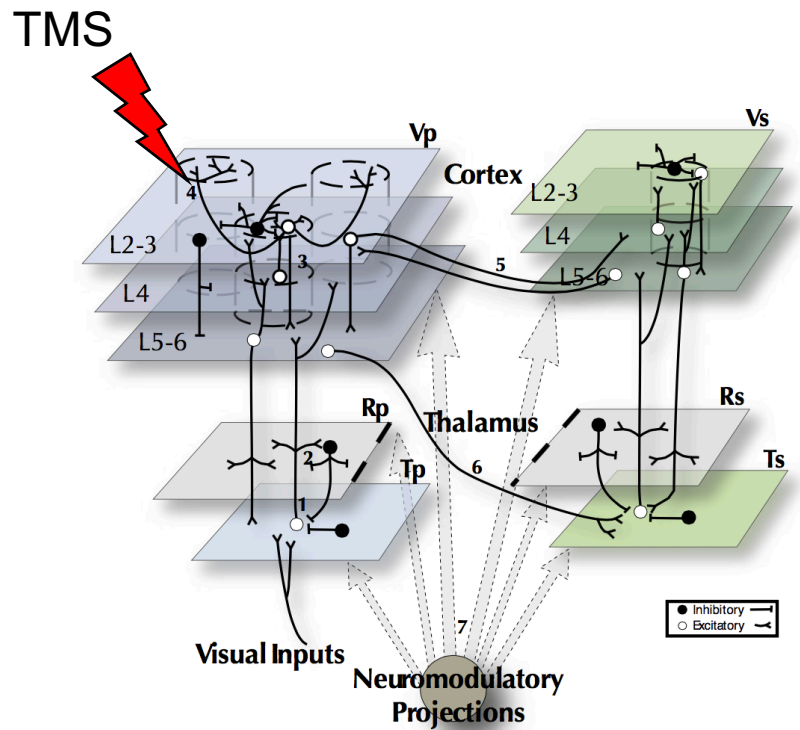
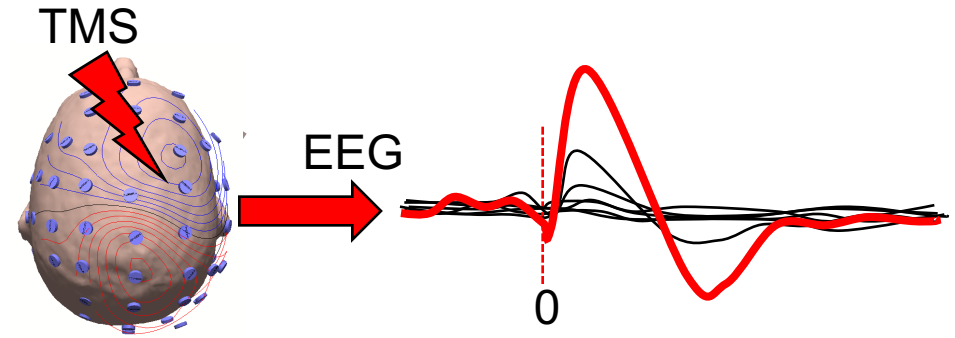
Sleep



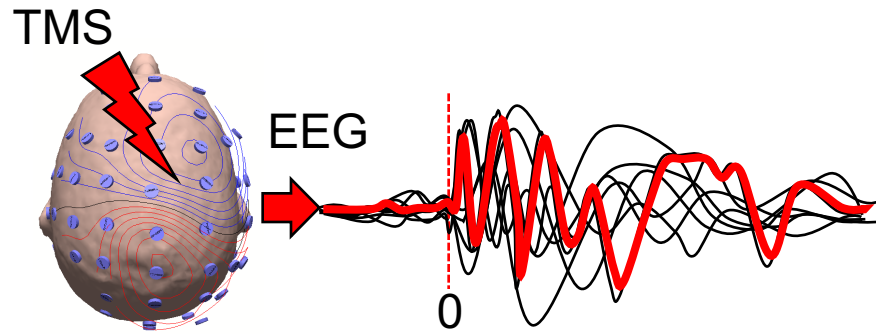
Wakefulness



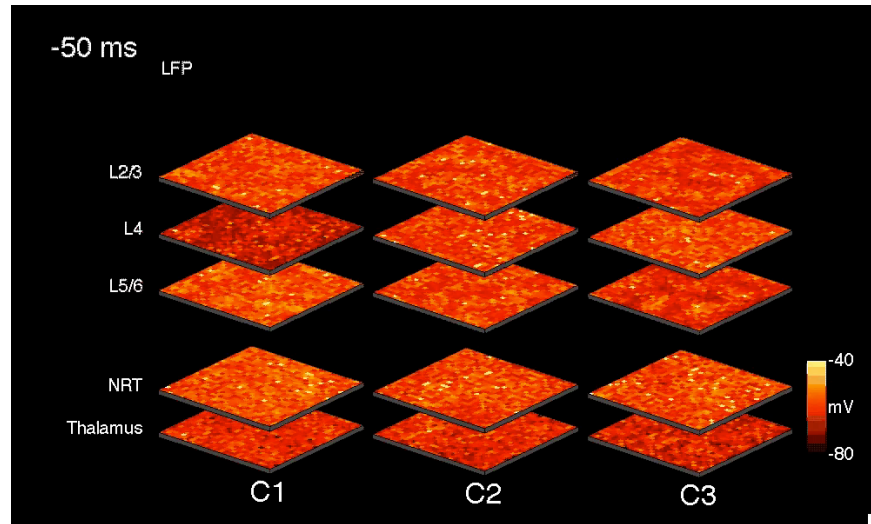
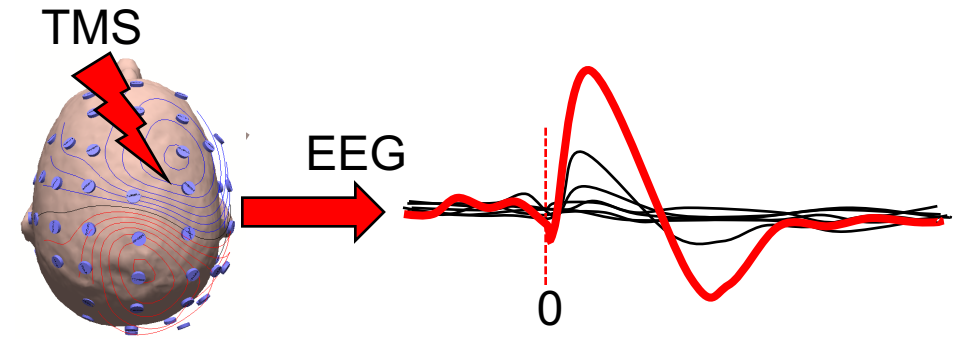
Sleep



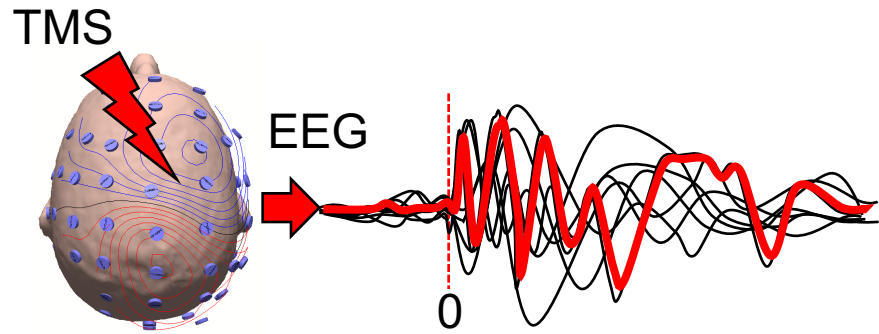
Wakefulness



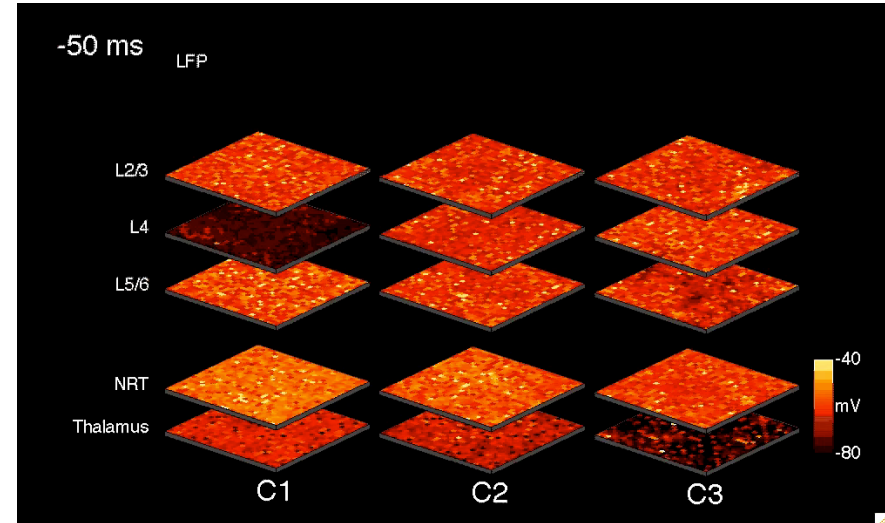
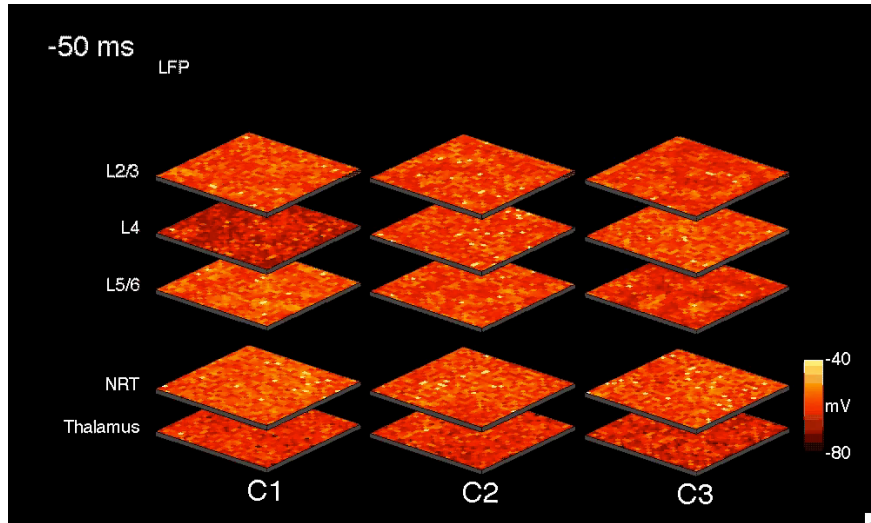
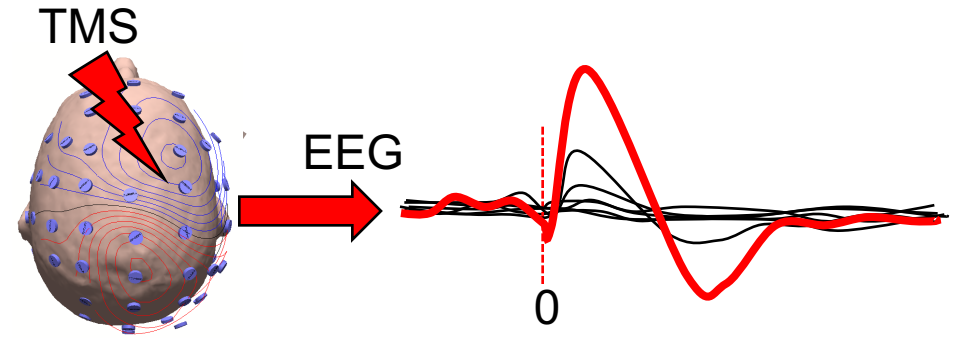
Sleep

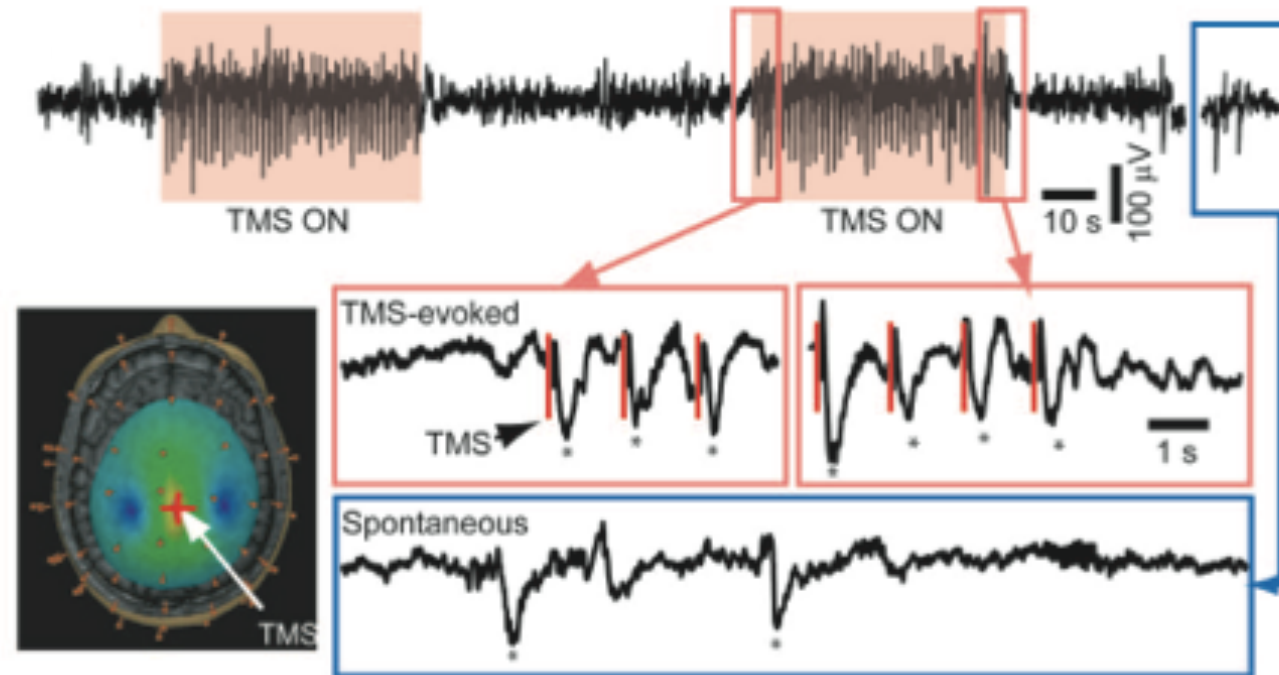


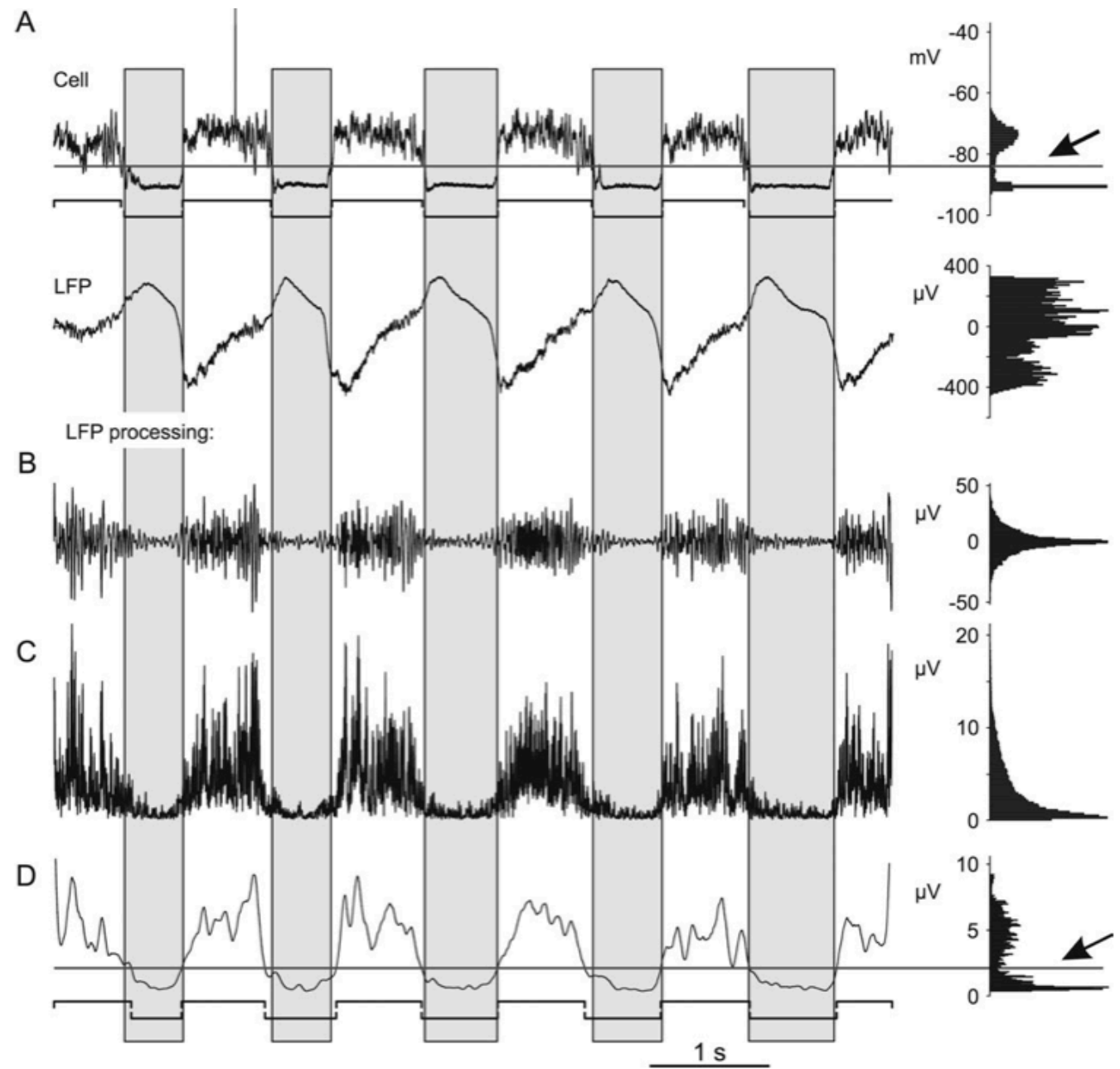
Wakefulness



Sleep

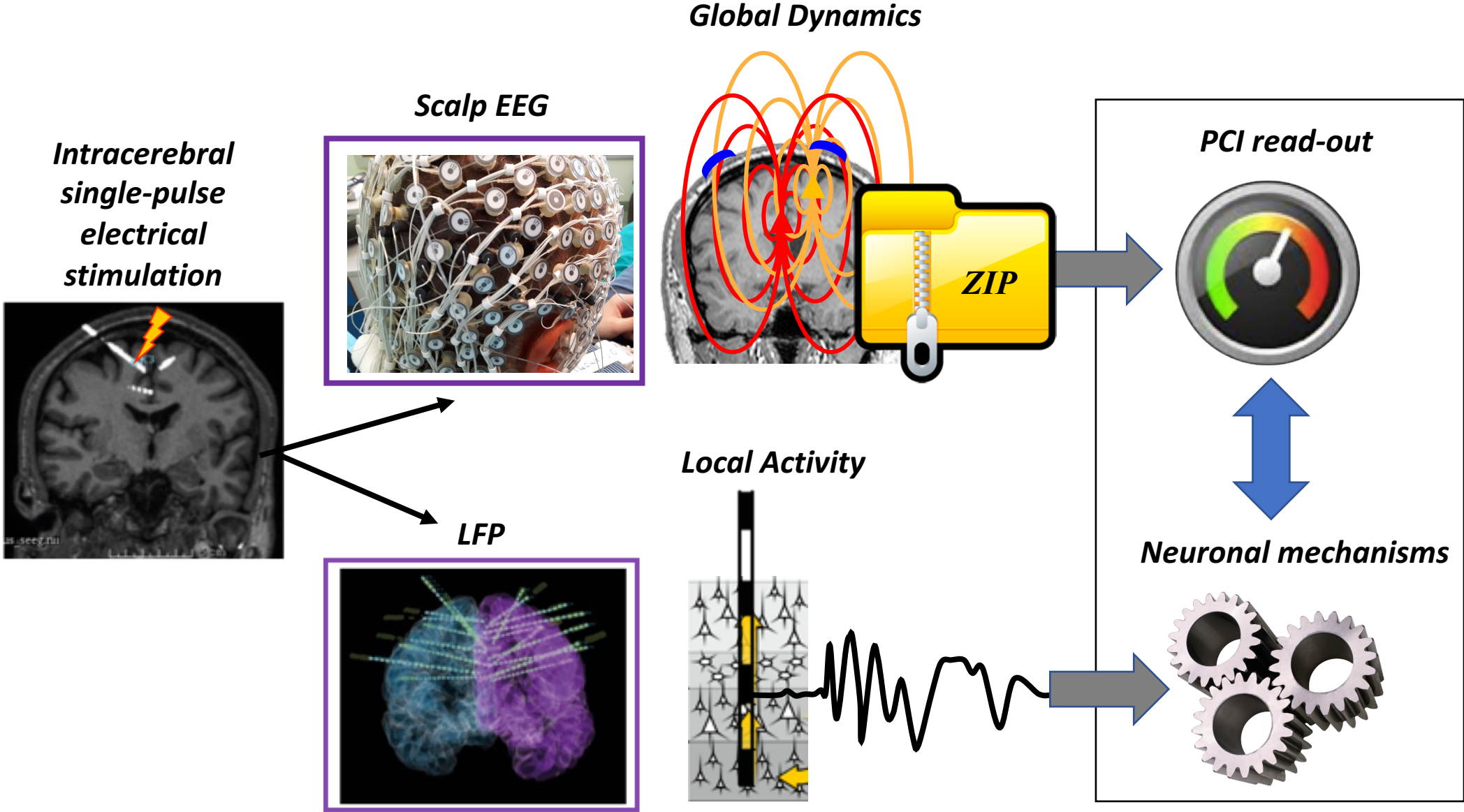


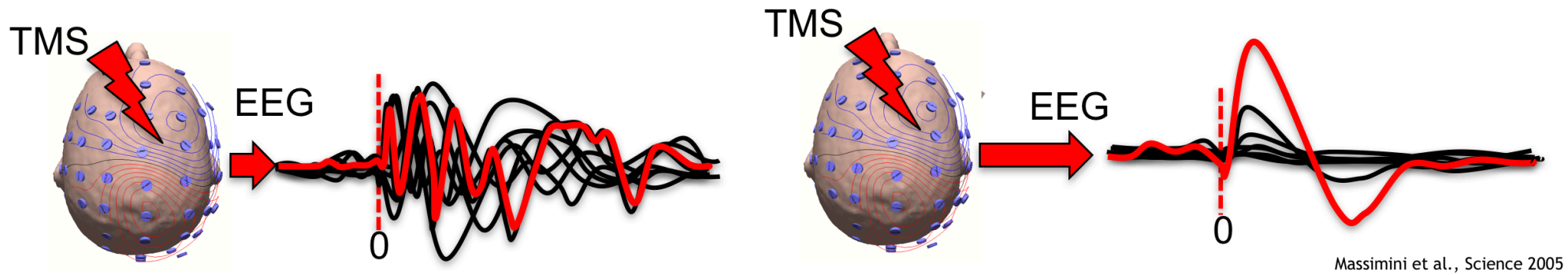




Understanding the mechanism of loss and recovery of complexity

Understanding the mechanism of loss and recovery of complexity

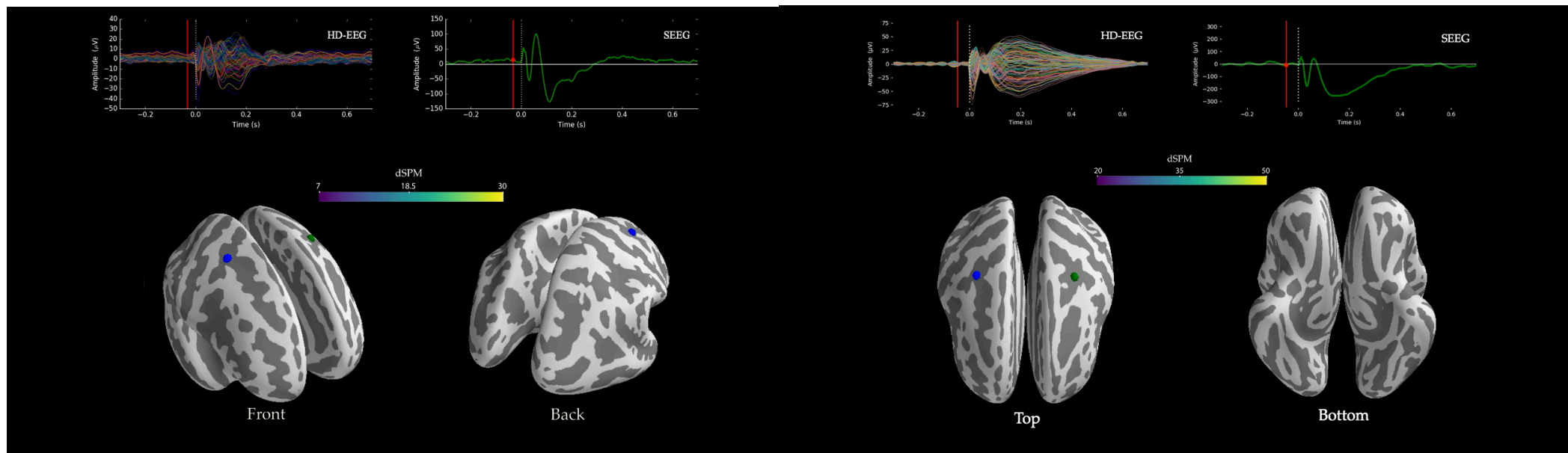




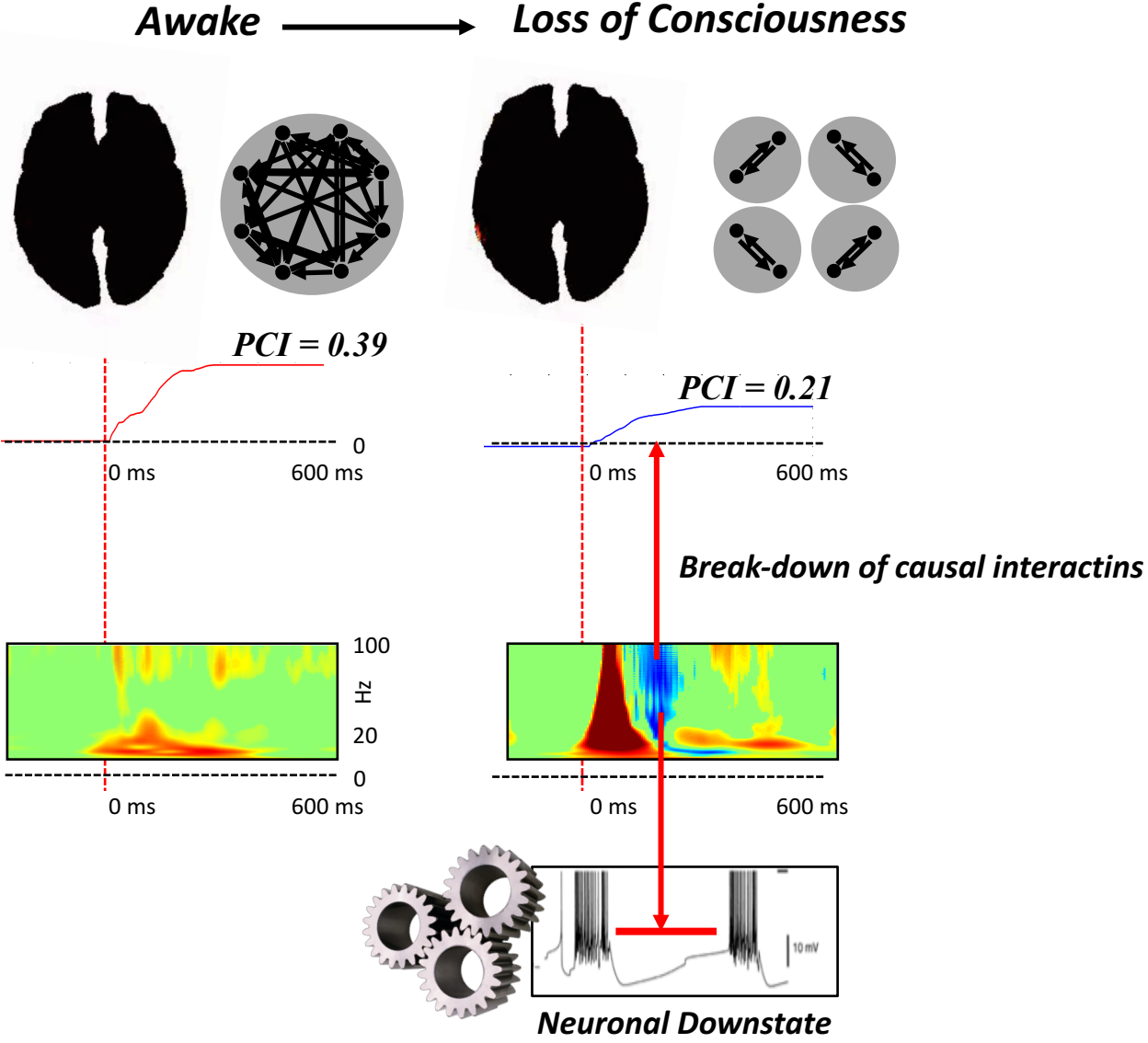
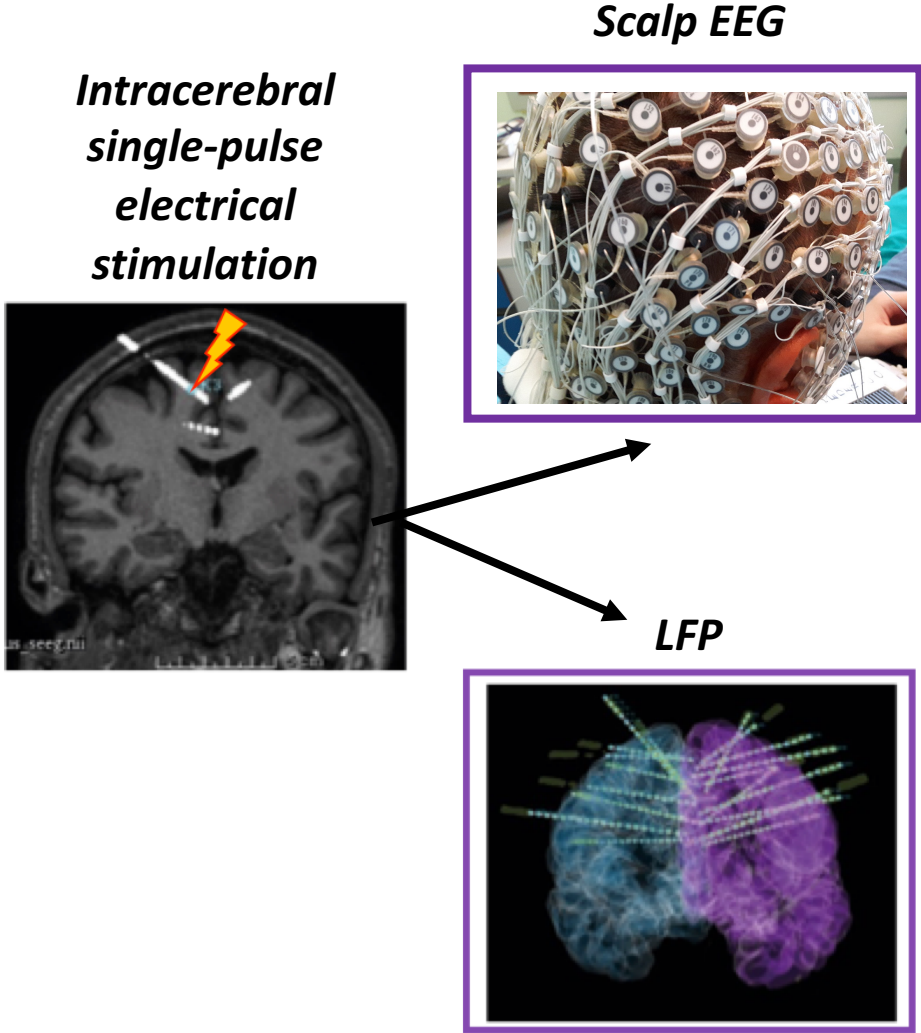
INTRACRANIAL

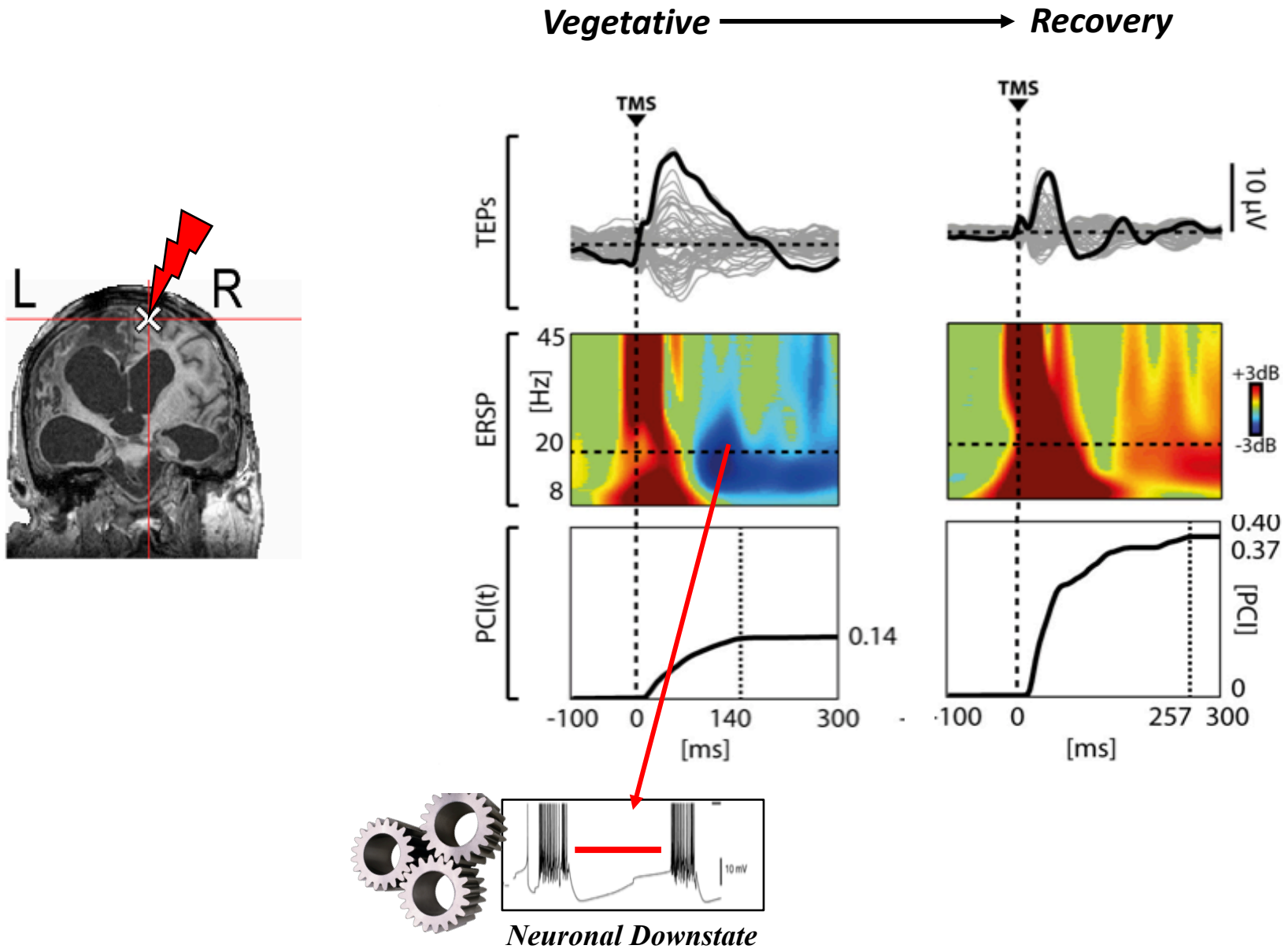
Wakefulness

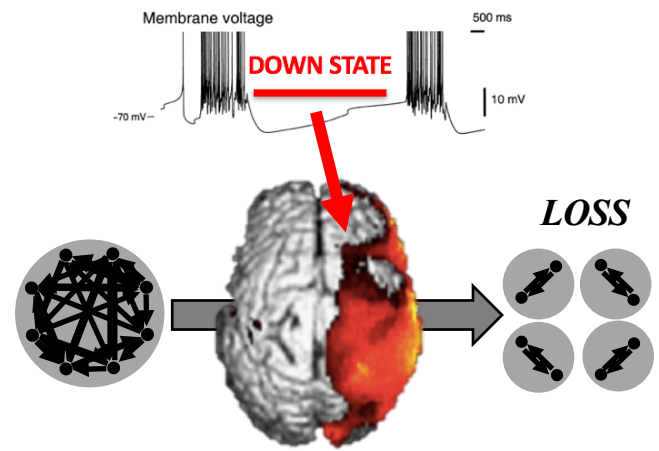
Sleep

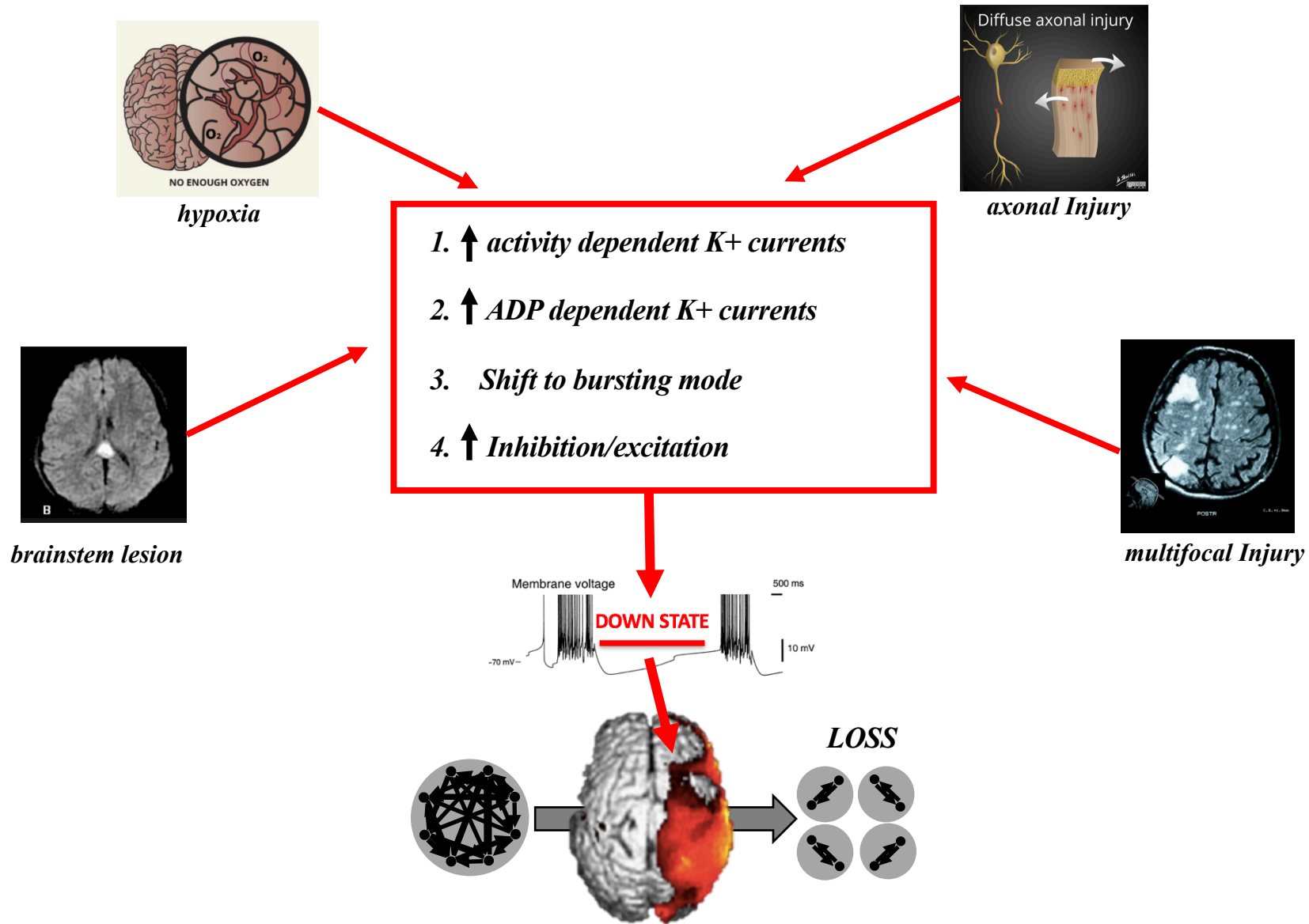


Understanding the mechanism of loss and recovery of complexity: a multi-scale approach

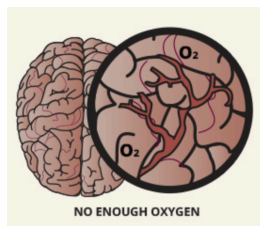




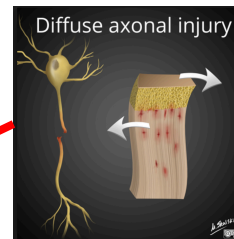




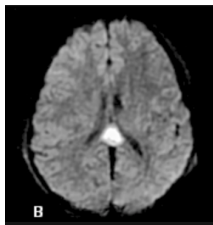
McCormick 1992
 Steriade et al., 1993
 Compte et al., 2003
 Sanchez-Vives et al 2000
 Timofeev et al., 2000
 Destexhe et al, 2007
 Funck et al, 2017
 Zucca et al., 2017



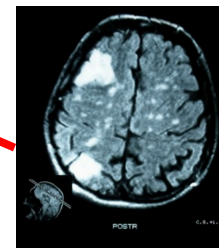
hypoxia




axonal Injury



brainstem lesion



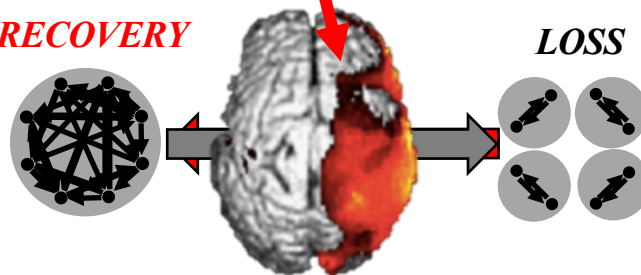
multifocal Injury

1. \uparrow activity dependent K^+ currents
2. \uparrow ADP dependent K^+ currents
3. Shift to bursting mode 
4. \uparrow Inhibition/excitation



RECOVERY

LOSS



While structural lesions and disconnections cannot be reversed, it may still be possible to restore complexity by acting pharmacologically on neuronal bistability



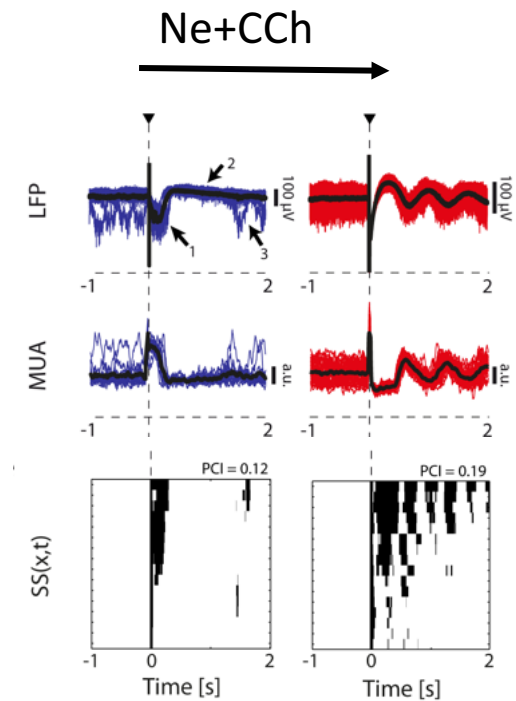
 **OXFORD**

Cerebral Cortex, 2017; 1–10
doi: 10.1093/cercor/bhx122
Original Article

ORIGINAL ARTICLE

Bistability, Causality, and Complexity in Cortical Networks: An In Vitro Perturbational Study

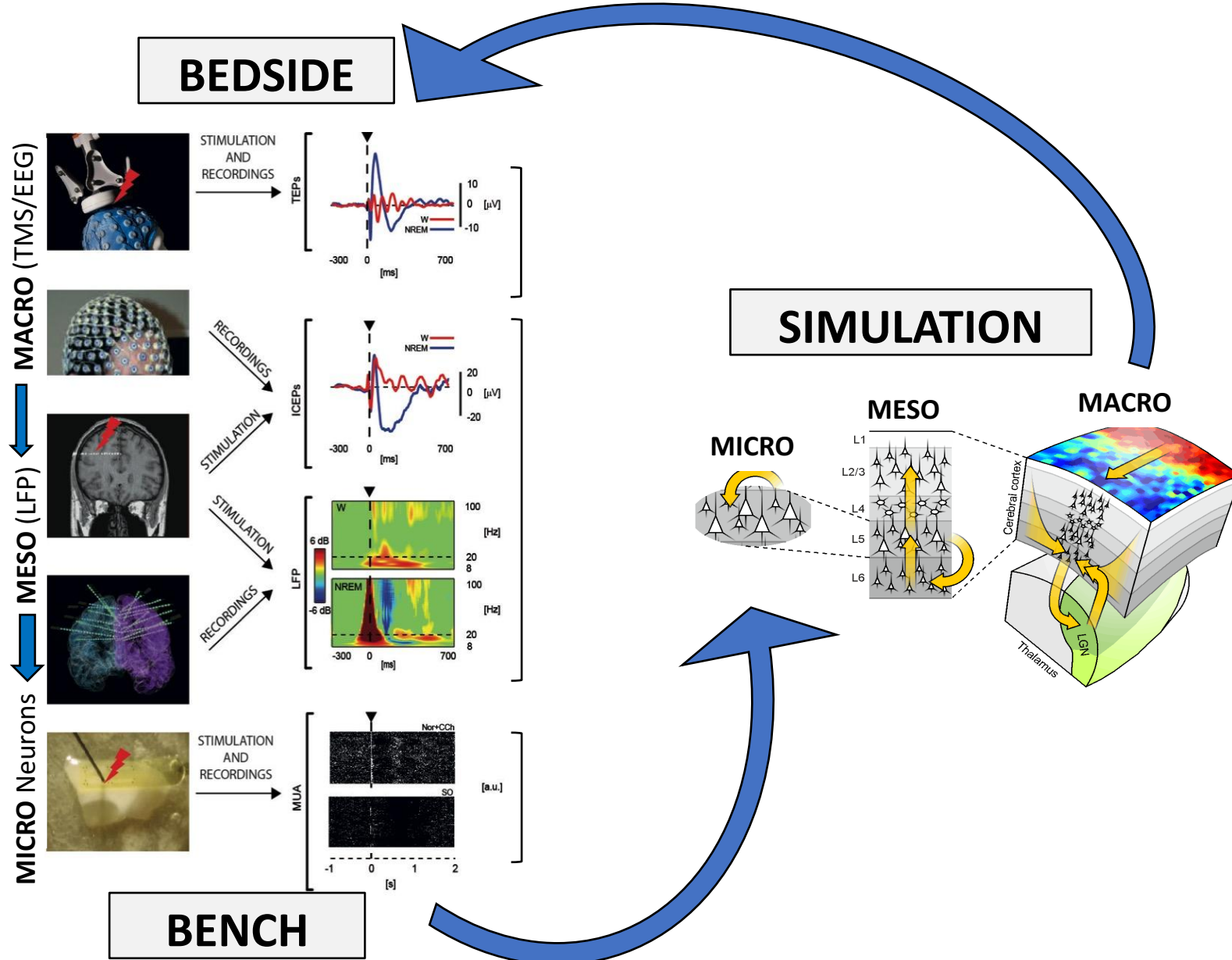
Mattia D'Andola¹, Beatriz Rebollo¹, Adenauer G. Casali², Julia F. Weinert¹,
Andrea Pigorini³, Rosa Villa^{4,5}, Marcello Massimini^{3,6}
and Maria V. Sanchez-Vives^{1,7}



Mechanisms of Loss and Recovery of Brain Complexity: across scales, species and models



Human Brain Project



Thank you!



UNIVERSITY OF MILAN:

Silvia Casarotto
Simone Sarasso
Andrea Pigorini
Mario Rosanova
Adenauer Casali
Matteo Fecchio
Martino Napolitani



UNIVERSITY OF LIEGE:

Melanie Boly
Olivia Gosserie
Marie-Aurelie Bruno
Didier Ledoux
Steven Laureys



UNIVERSITY OF WISCONSIN:

Fabio Ferrarelli
Brady Riedner
Michael Peterson
Reto Huber
Michael Murphy
Harpreet Singh
Giulio Tononi



NIGUARDA HOSPITAL:

Lino Nobili
Annalisa Rubino
Paola Proserpio
Laura Tassi
Ivana Sartori
Roberto Mai
Giorgio Lorusso