



MASSACHUSETTS
GENERAL HOSPITAL

PSYCHIATRY ACADEMY

Research on the neural basis of schizophrenia “then” and “now”

Daphne Holt, MD, PhD

Co-Director, MGH Psychosis Clinical and Research
Program

Director, MGH Resilience and Prevention Program
Associate Professor, Harvard Medical School

Schizophrenia Education Day
December 9th, 2022



MASSACHUSETTS
GENERAL HOSPITAL



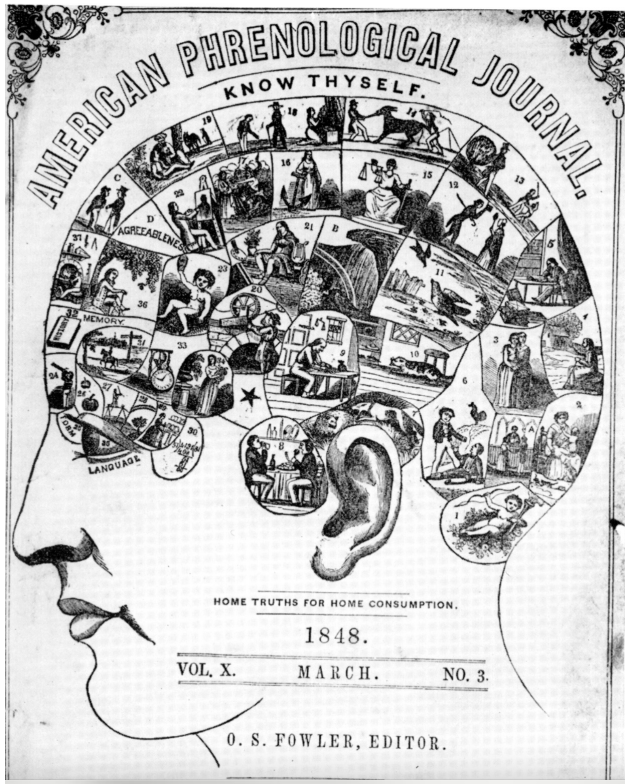
HARVARD MEDICAL SCHOOL
TEACHING HOSPITAL

www.mghcme.org

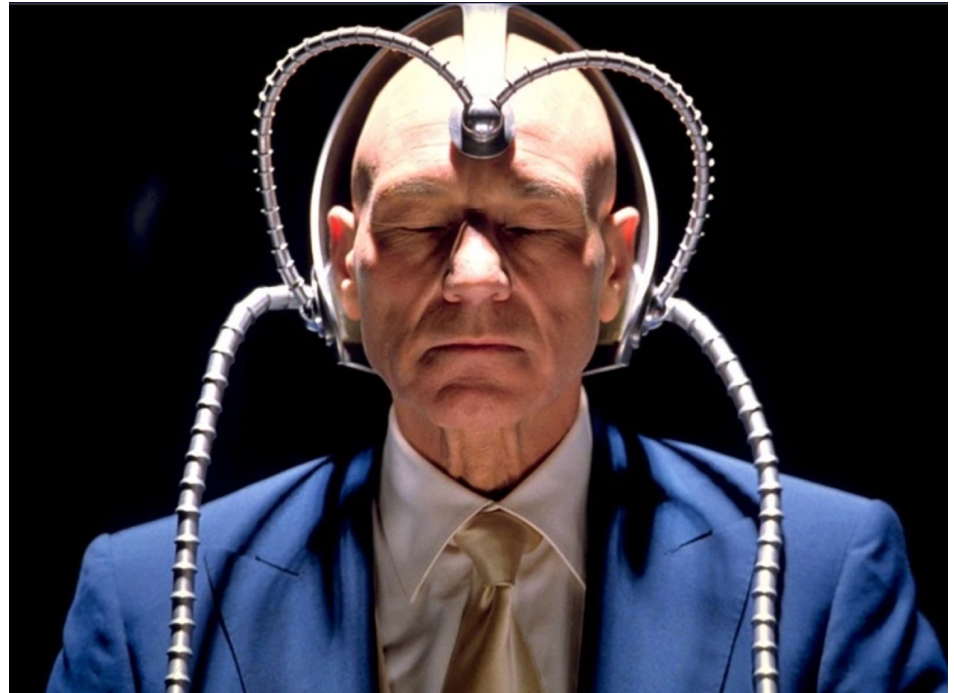
Disclosures

Neither I nor my spouse/partner has a relevant financial relationship with a commercial interest to disclose.

“Then” (2002) versus “Now” (2022)?



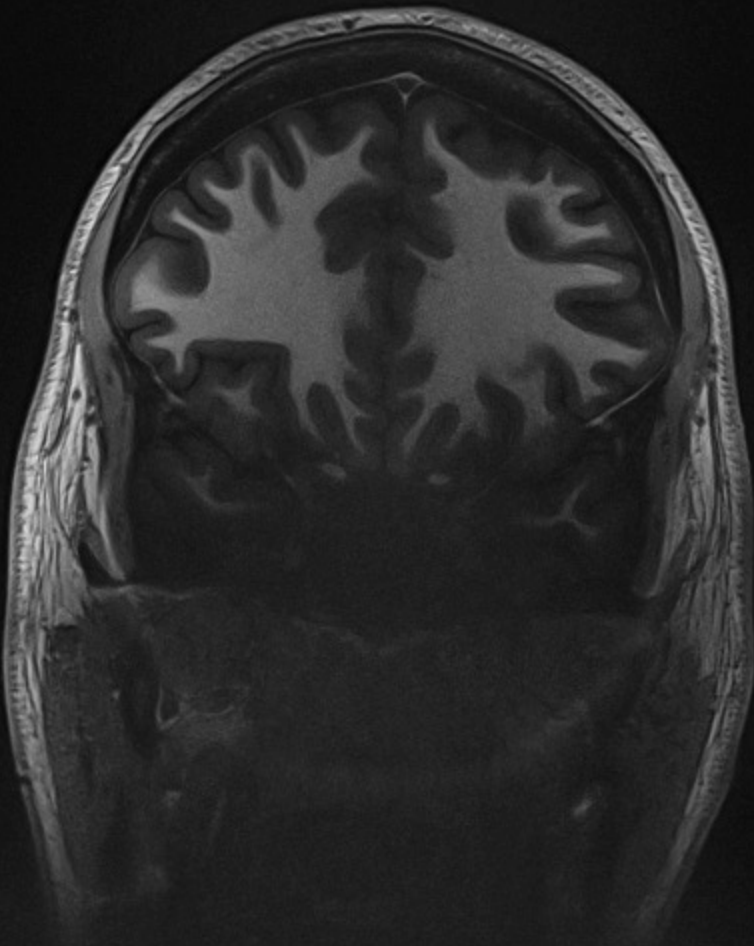
Phrenology?



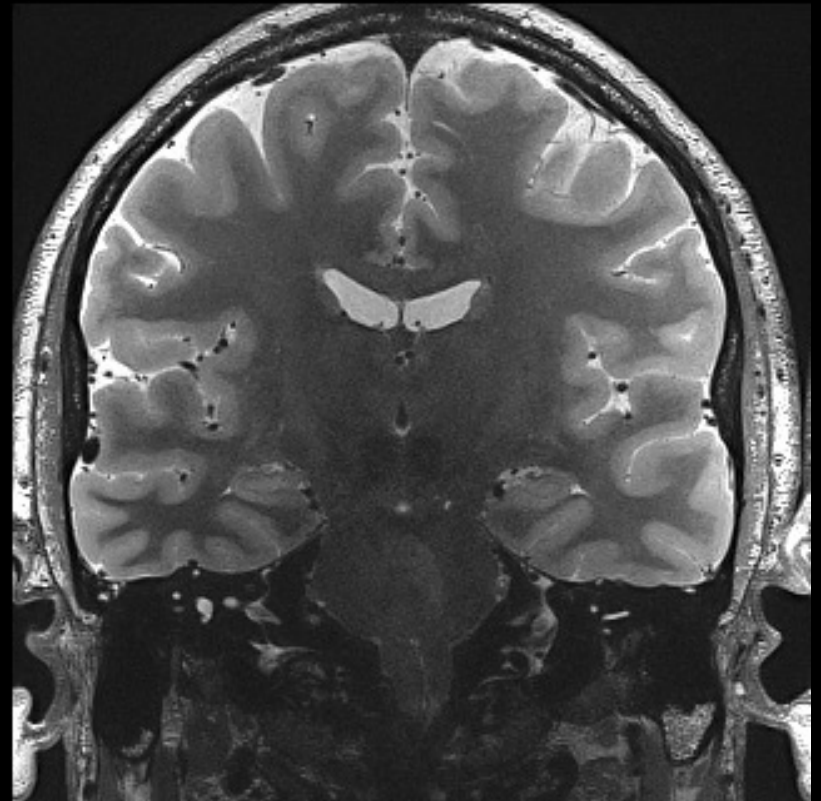
?

Mind reading?

High Resolution 3T MRI imaging



MPRAGE at 3T
.375 x .375 x 1mm



TSE .5mm isotropic
TR / TE = 3200 / 456

When did brain imaging research on schizophrenia begin?

CT scans → PET and structural MRI scans → functional MRI... and now: DTI, MEG, EEG, TMS

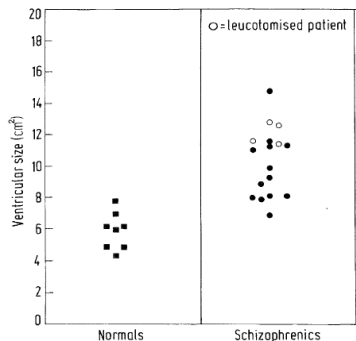
Johnstone et al, Lancet 1976:
first brain imaging study of
people with schizophrenia,
using CT scans

1976

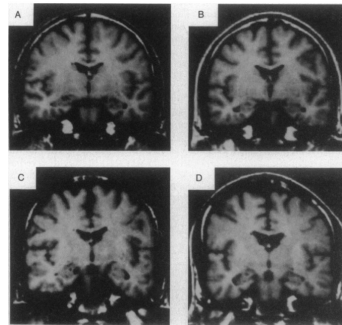
Late 1980s

Early 1990s

1999-2002



Ventricular size in patients and controls.
Each point represents average of four measurements on
photographs.



Weinberger, Berman PET and structural MRI studies
of the prefrontal cortex and hippocampus

Invention of functional MRI at MGH
(Belliveau, Kwong, Rosen)

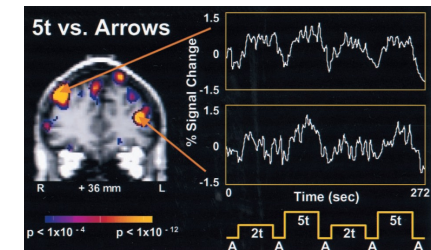
Functional Cerebral Imaging by Susceptibility-Contrast NMR

JOHN W. BELLIVEAU,* BRUCE R. ROSEN, HOWARD L. KANTOR,
RICHARD R. RZEDZIAN,† DAVID N. KENNEDY, ROBERT C. MCKINSTRY,
JAMES M. VEVEA, MARK S. COHEN,† IAN L. PYKETT,† AND THOMAS J. BRADY

Massachusetts General Hospital NMR Center, Department of Radiology, Massachusetts
General Hospital and Harvard Medical School, Boston, Massachusetts 02114; and
†Advanced NMR Systems, Inc., Woburn, Massachusetts 01801

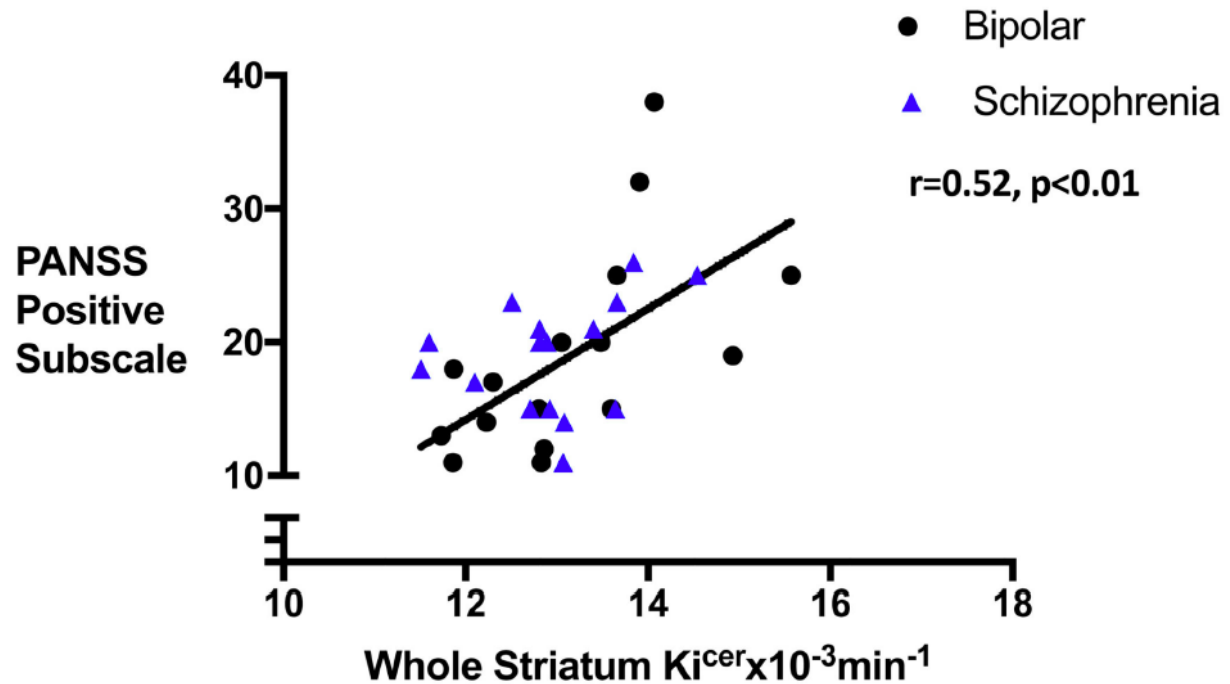
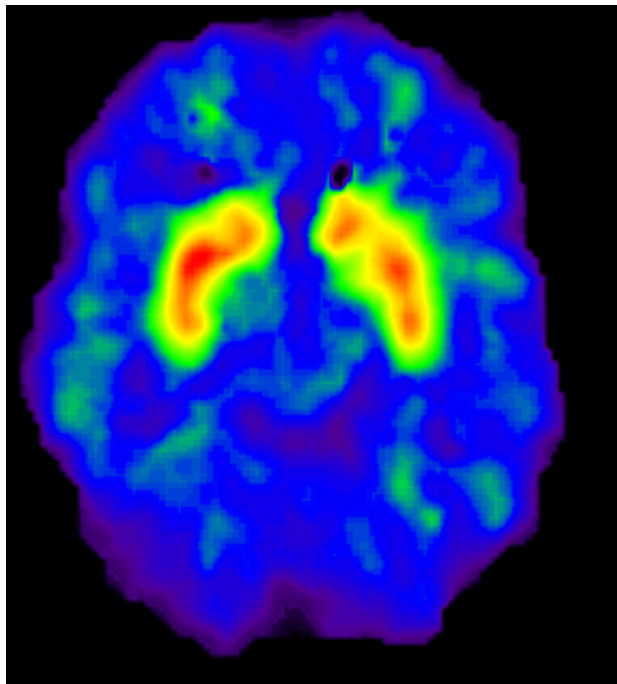
Received December 7, 1989; revised March 6, 1990

First functional MRI studies of schizophrenia



PET Imaging beginning in the 1980s: dopamine elevations in schizophrenia

Dopamine synthesis is elevated in schizophrenia and bipolar disorder
and correlates with psychotic (positive) symptom severity



Jauhar et al, 2017

The MGH Psychosis Clinical and Research Program – Neuroimaging and Cognitive Neuroscience Research

In 2002:



Stephan Heckers, MD



Dara Manoach, PhD



Gina Kuperberg, MD, PhD



Daphne Holt, MD, PhD



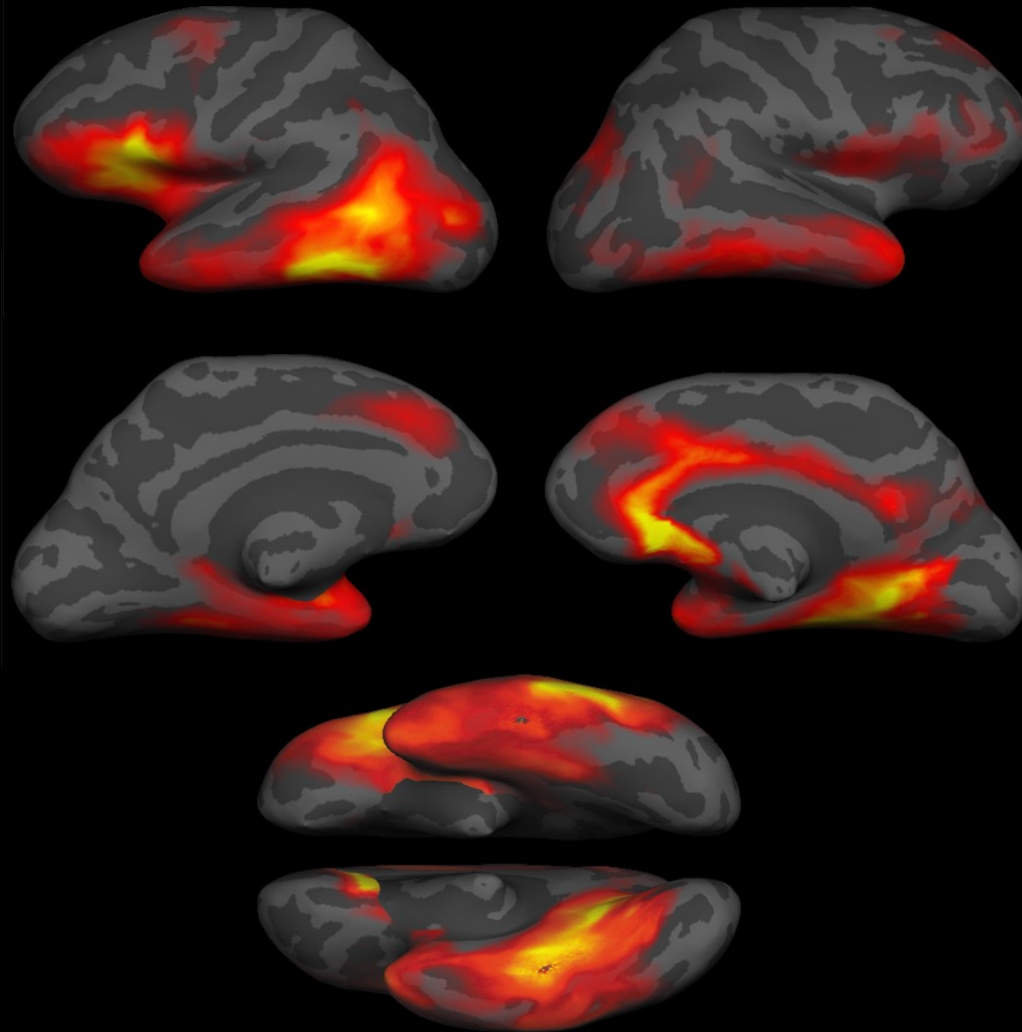
Joshua Roffman, MD



Hamdi Eryilmaz, PhD

MGH East, Charlestown Navy Yard

Cortical thinning is observed in some people with schizophrenia

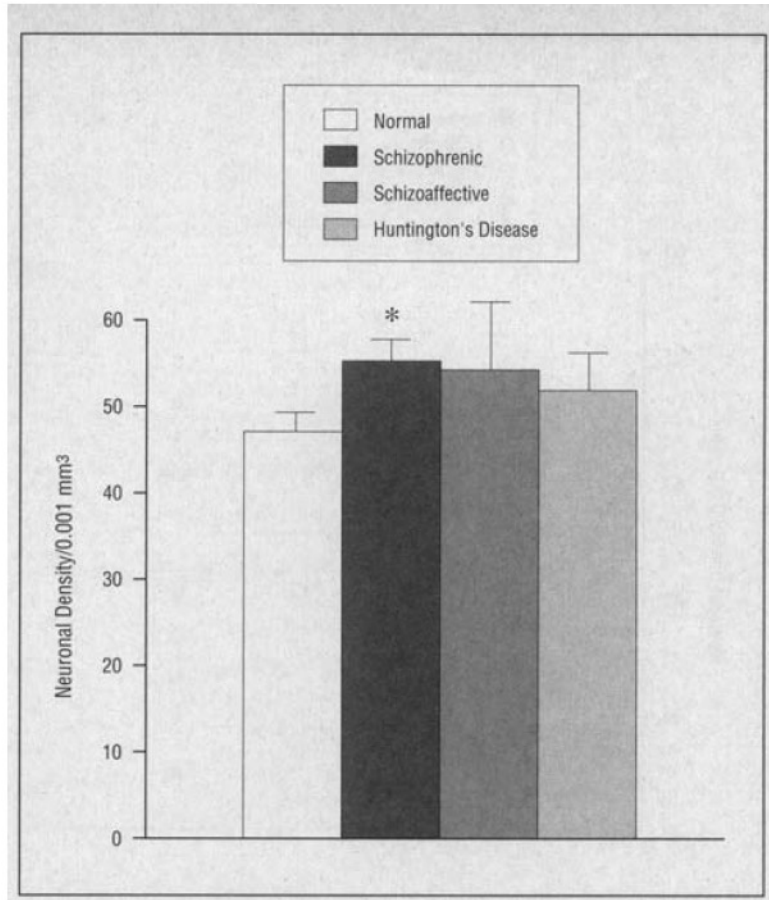


Kuperberg et al, 2003

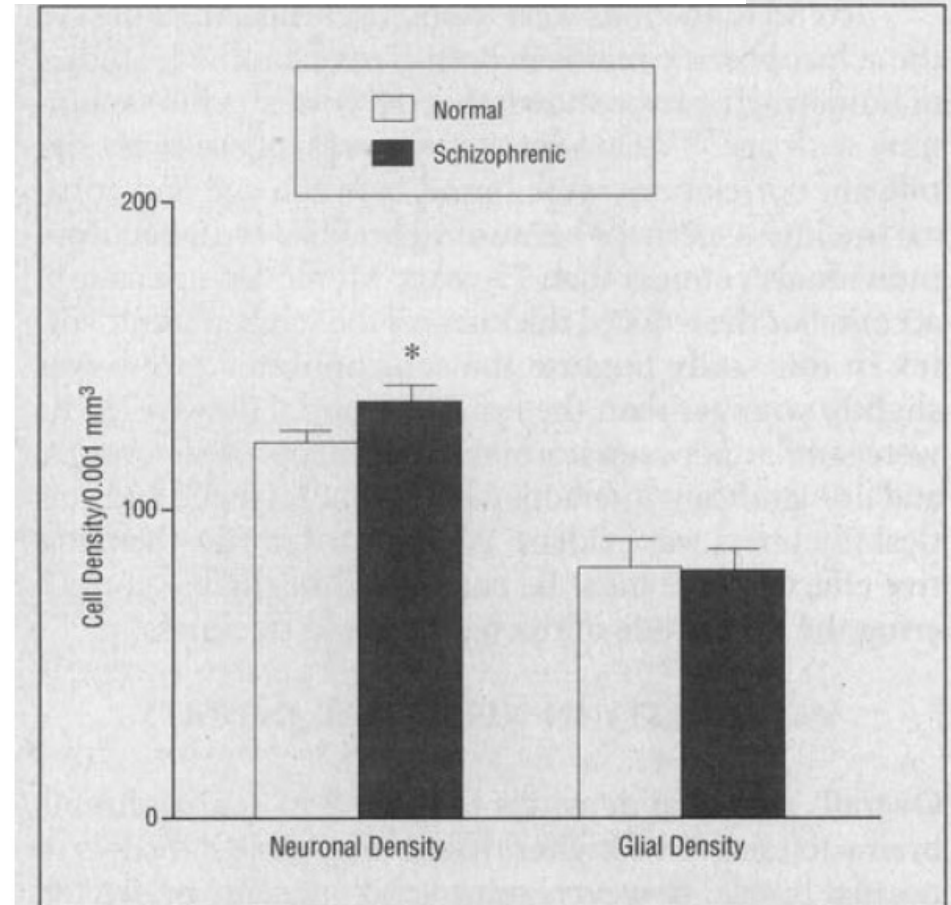
Abnormally High Neuronal Density in the Schizophrenic Cortex

A Morphometric Analysis of Prefrontal Area 9 and Occipital Area 17

Lynn D. Selemon, PhD; Grazyna Rajkowska, PhD; Patricia S. Goldman-Rakic, PhD

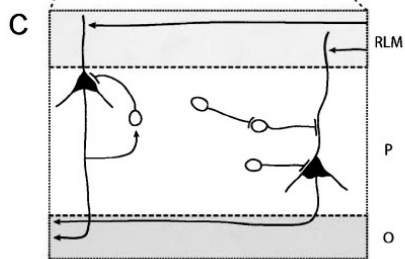
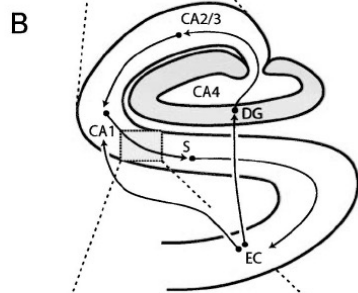


Area 9 (Frontal Cortex)



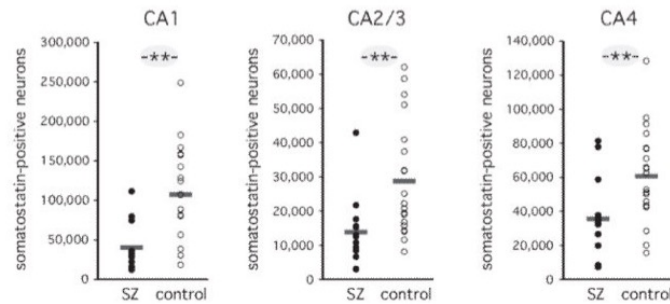
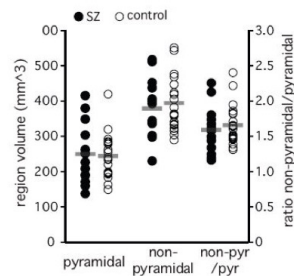
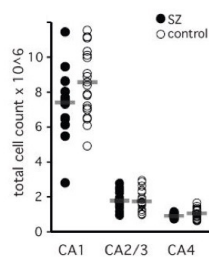
Area 17 (Visual Cortex)

A smaller hippocampus



Heckers and Konradi, 2002

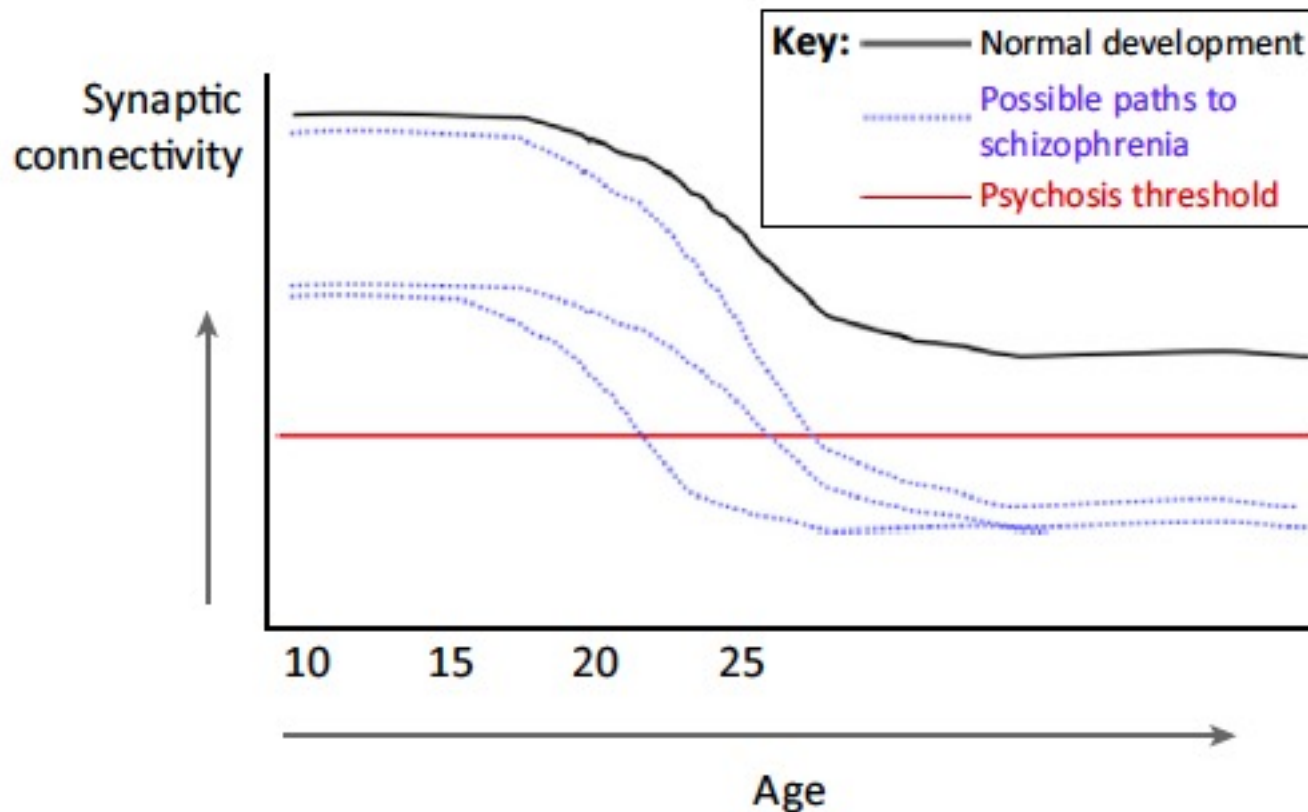
Changes in hippocampal interneurons



Konradi et al, 2011

Excessive pruning and loss of cortical connections over time → increased vulnerability to psychosis?

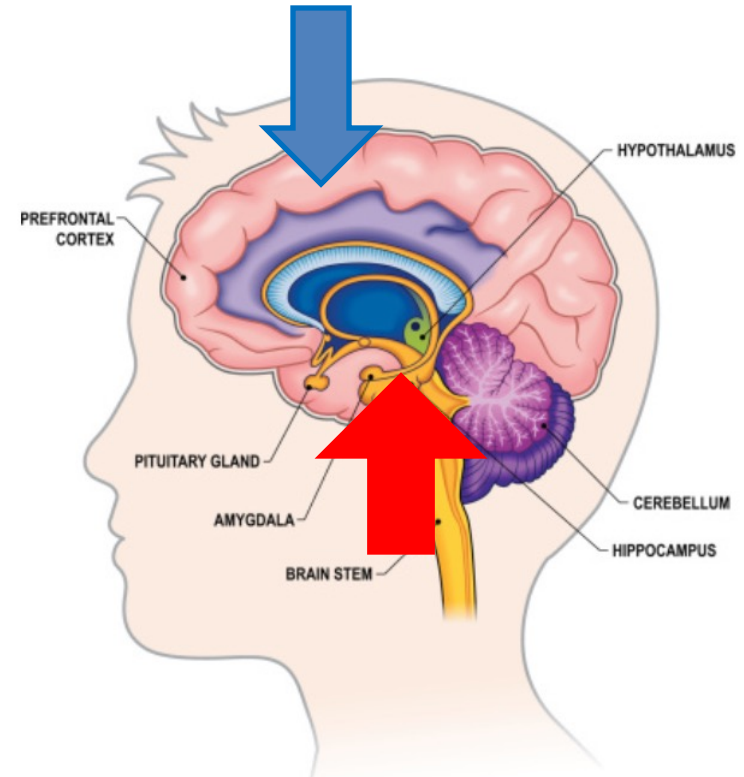
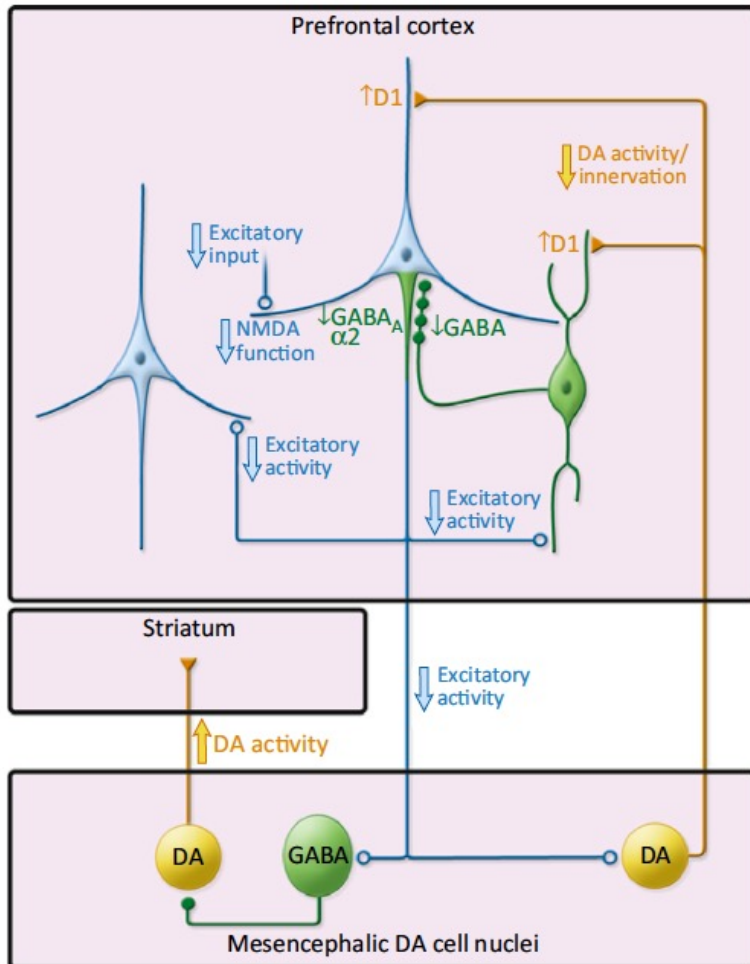
One (still unproven) model:



Cannon 2015

One model: Cortical *hypo*activity → Subcortical *hyper*activity

Cellular model of schizophrenia



One model: Cortical *hypo*activity → Subcortical *hyper*activity

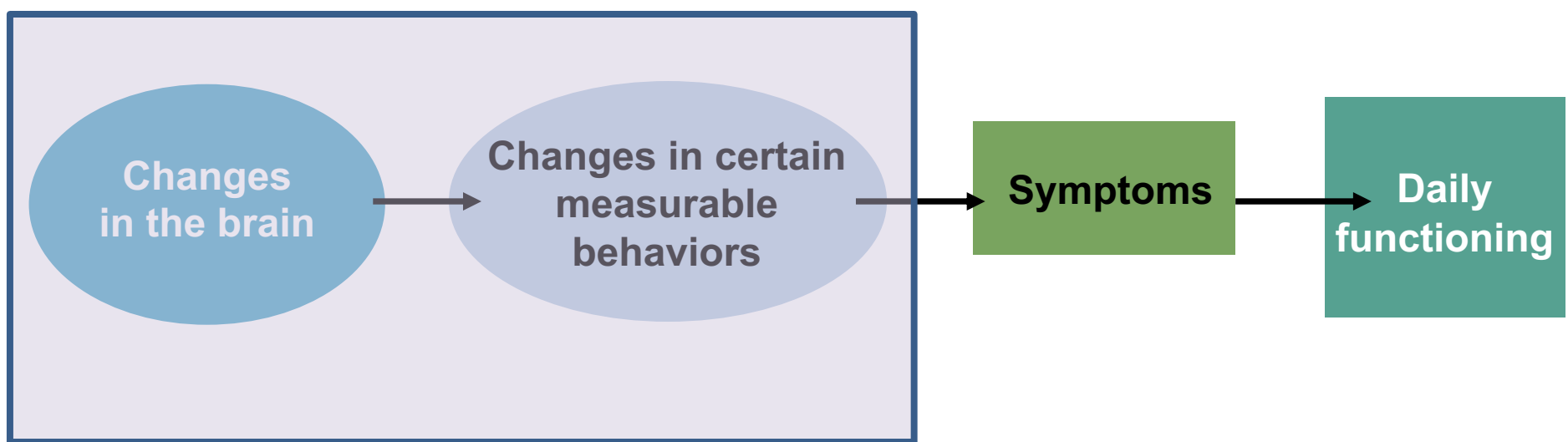
Eugene Bleuler: “When the faculty of logical reasoning is weakened, the influence of the affects increases in strength...The distortion can eventually reach the proportions of delusional ideas...”



Eugen Bleuler, 1857-1939



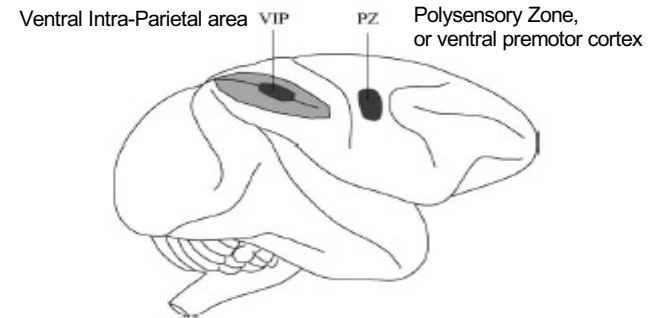
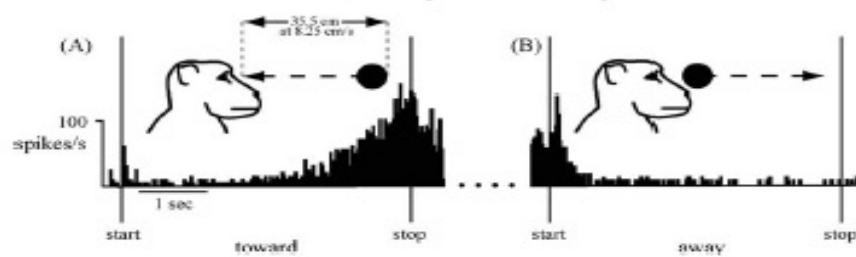
What are the links between the changes in the **brain** and **symptoms** and **quality of life**?



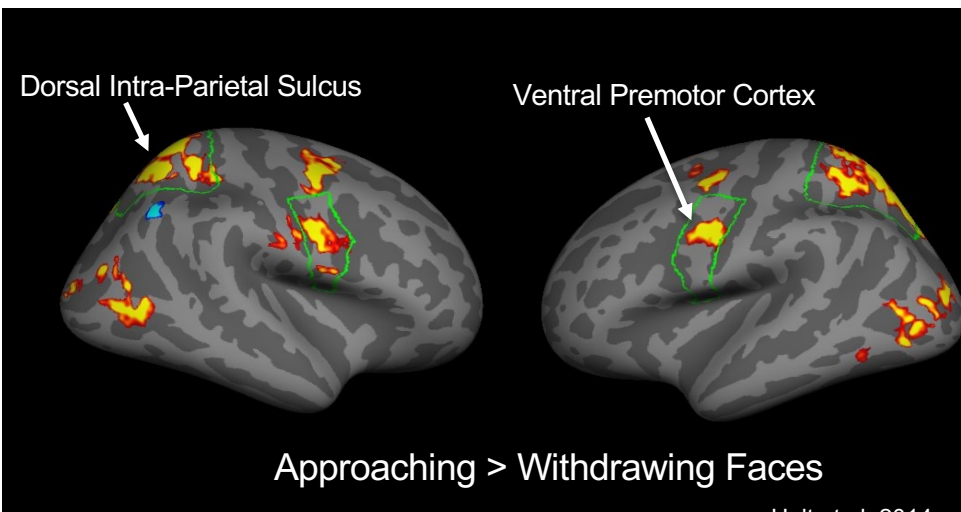
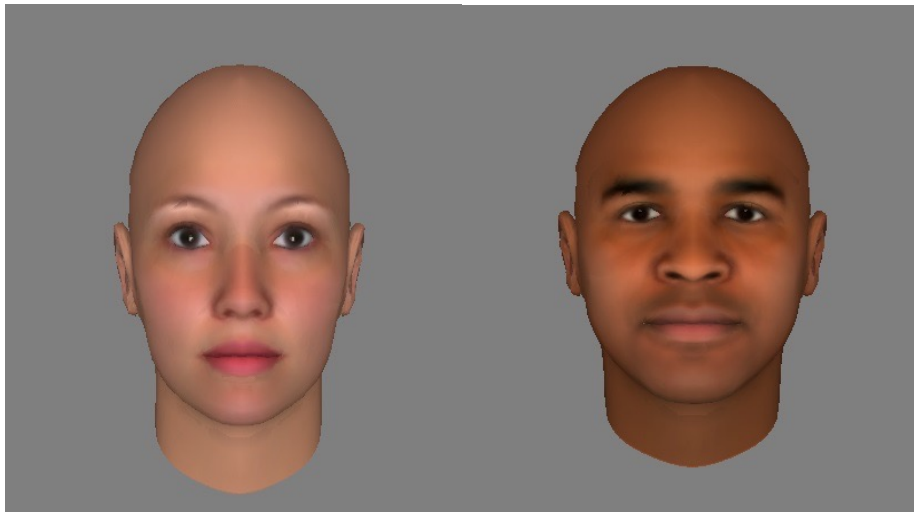
Cognitive neuroscience & neuroimaging research can shed light on this

Functional, task-based neuroimaging: How does it work?

PZ neurons respond to looming stimuli



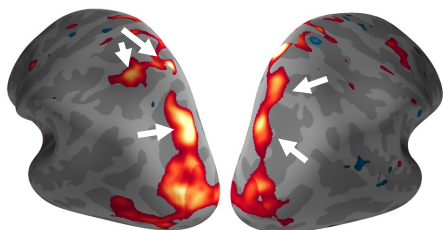
Graziano and Cooke, 2006



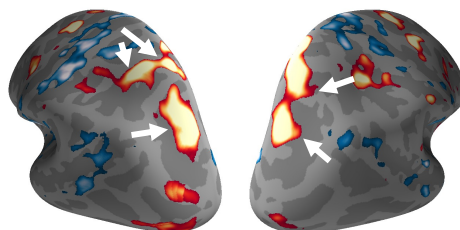
Halt et al. 2014

Functional, task-based neuroimaging: How does it work?

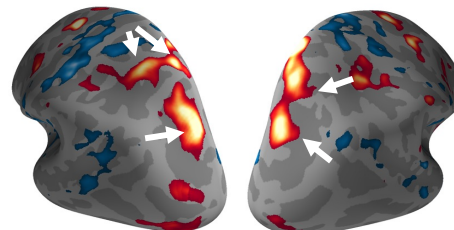
Subject 1: Scan 1



Subject 1: Scan 2

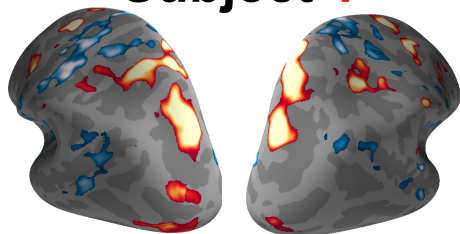


Subject 1: Scan 3

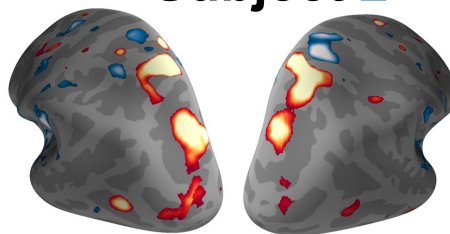


Approach vs. Withdrawal Contrast

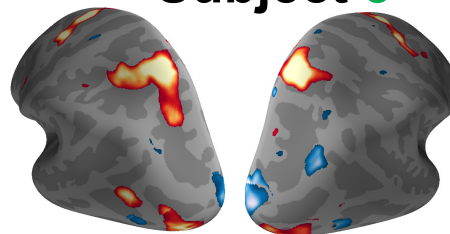
Subject 1



Subject 2



Subject 3



Approach vs. Withdrawal Contrast

Examples of tasks performed inside the scanner:

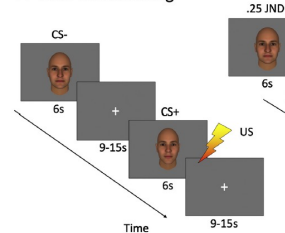
Perceptual: Checkerboard patterns (contrast), depth perception, motion detection

Cognitive: working memory, episodic memory, attention, language processing

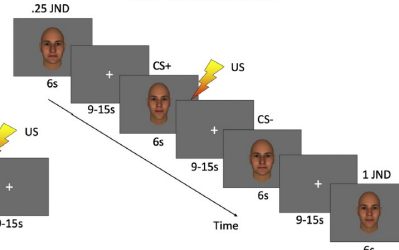
Emotion: fearful faces, looming faces, unpleasant and pleasant pictures

Social cognition: Theory-of-Mind, self vs. other reference task

A Fear Conditioning

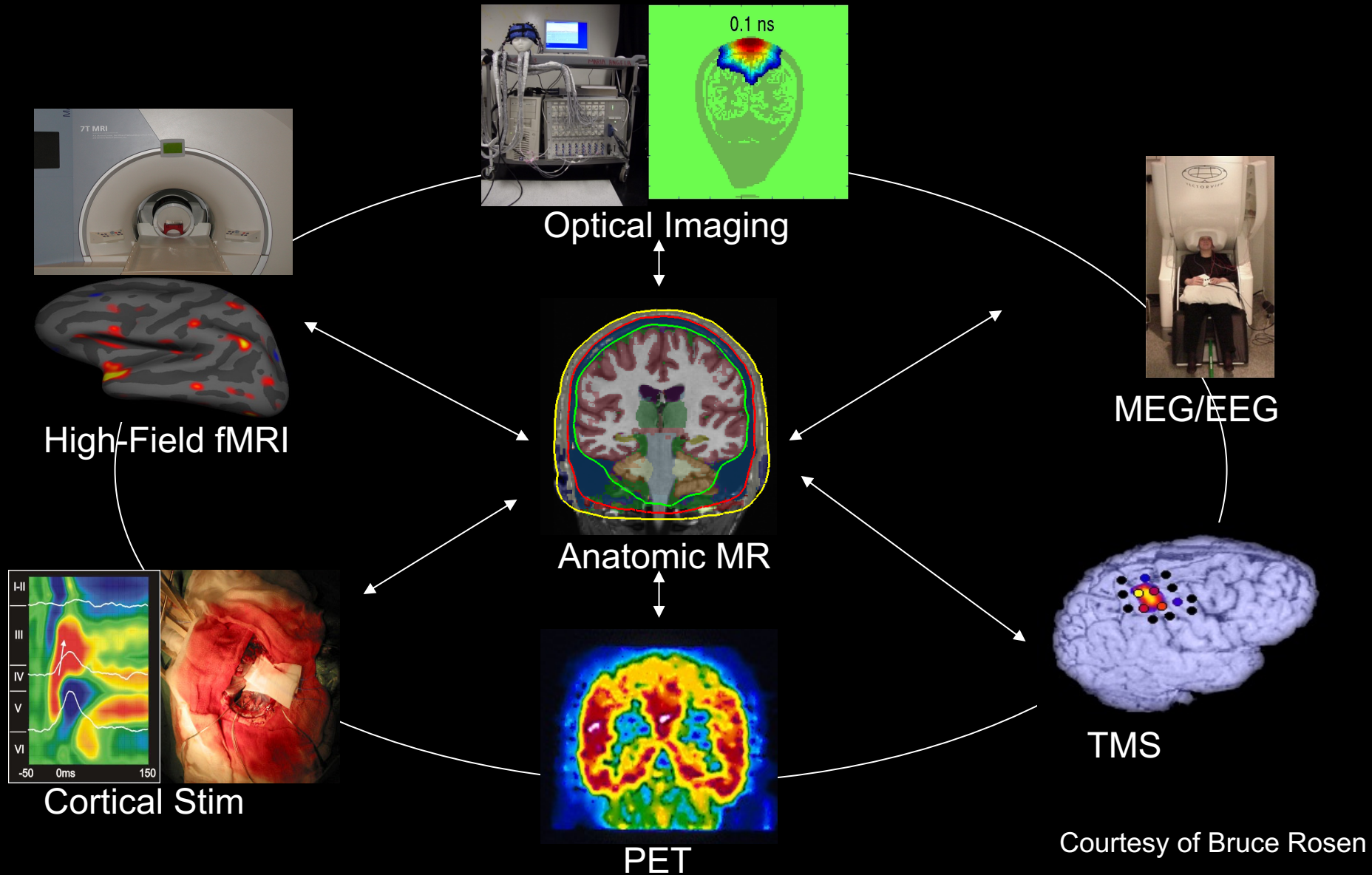


B Fear Generalization



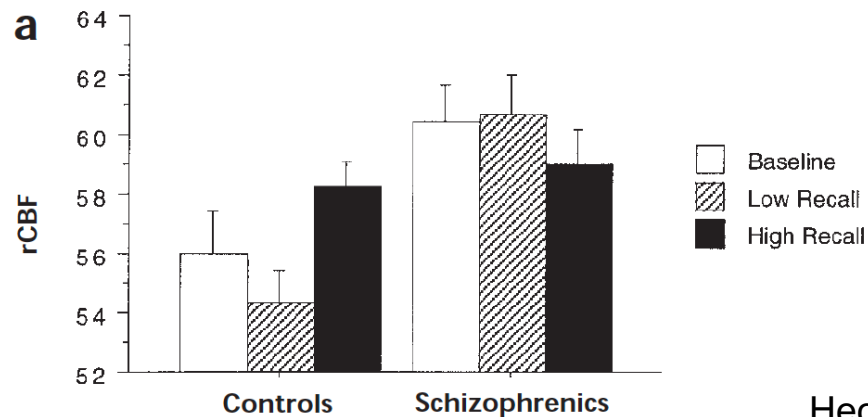
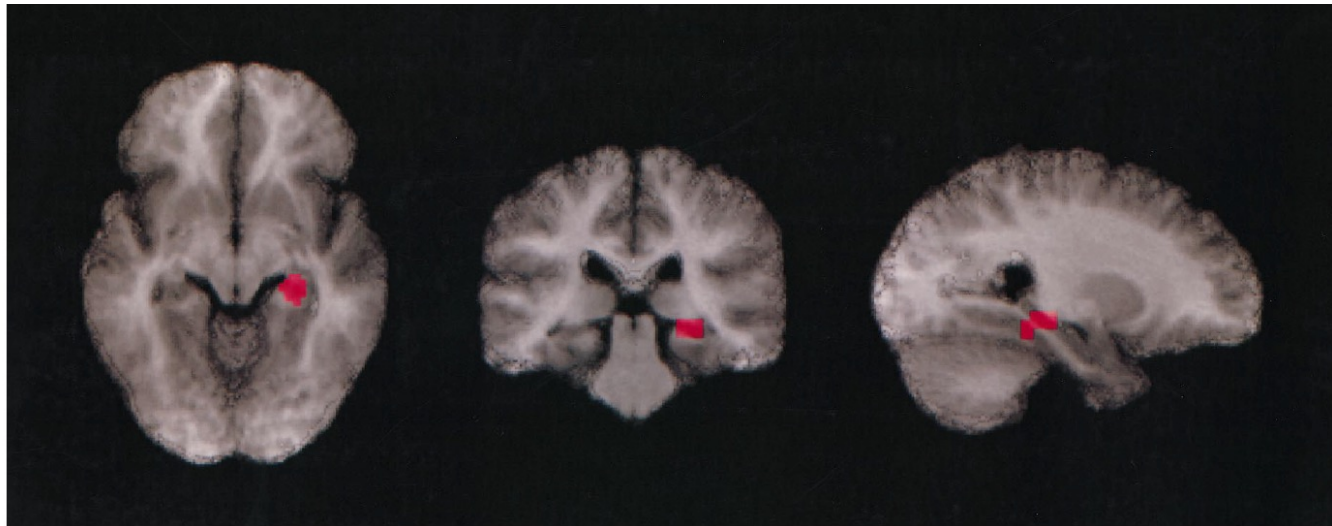
Brain Imaging: Across Space and Time

Anatomy, Physiology, Metabolism, Electrophysiology, Neurochemistry



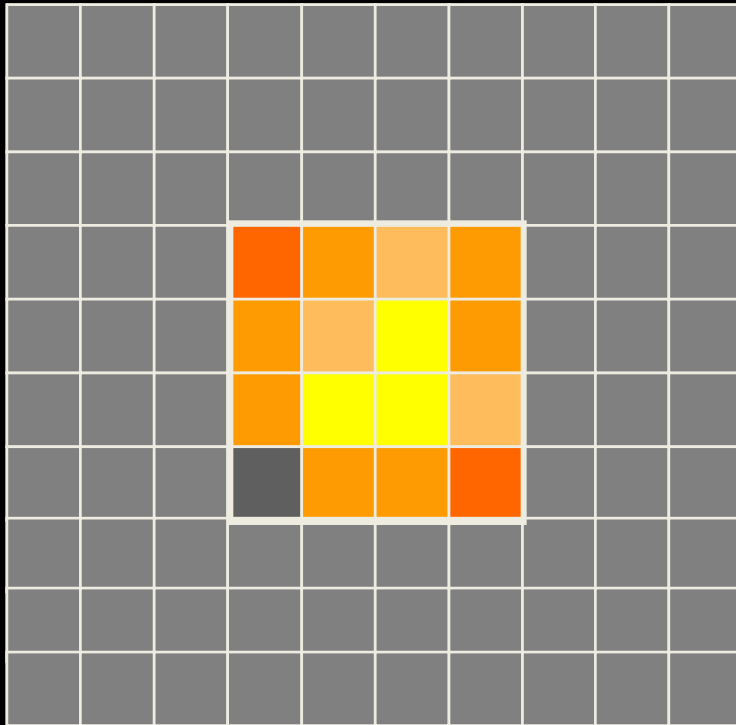
The hippocampus: episodic/declarative memory (conscious recollection)

Less hippocampal activation during episodic memory recall in people with schizophrenia, compared to control subjects

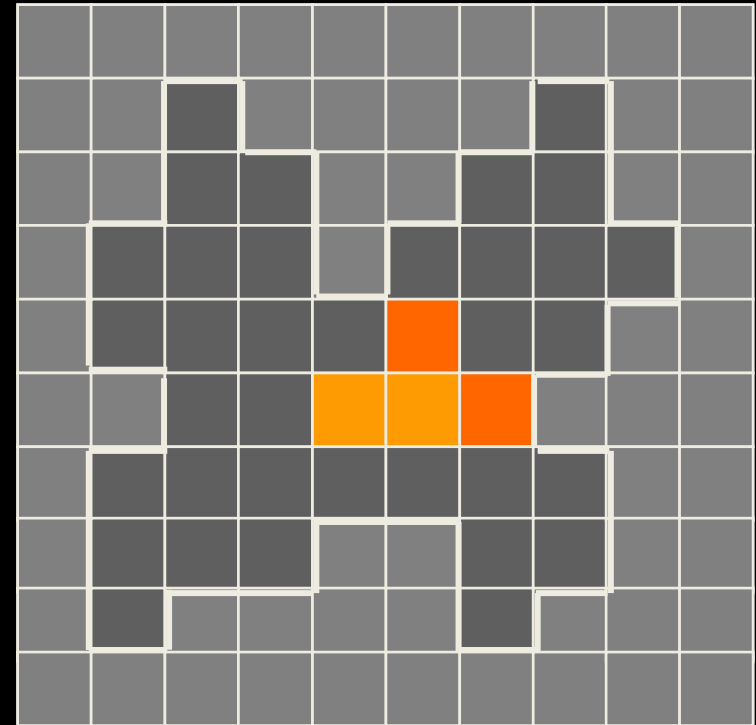


Heckers et al, 1998

Control Group



Schizophrenia Group



Number of Subjects



Frontal and parietal cortex: understanding and producing language

Sentence types:

ConcreteCongruous: During the rain storm he carried a large golf umbrella.

Incongruous: The twenty dairy cows are kept in the red bench.

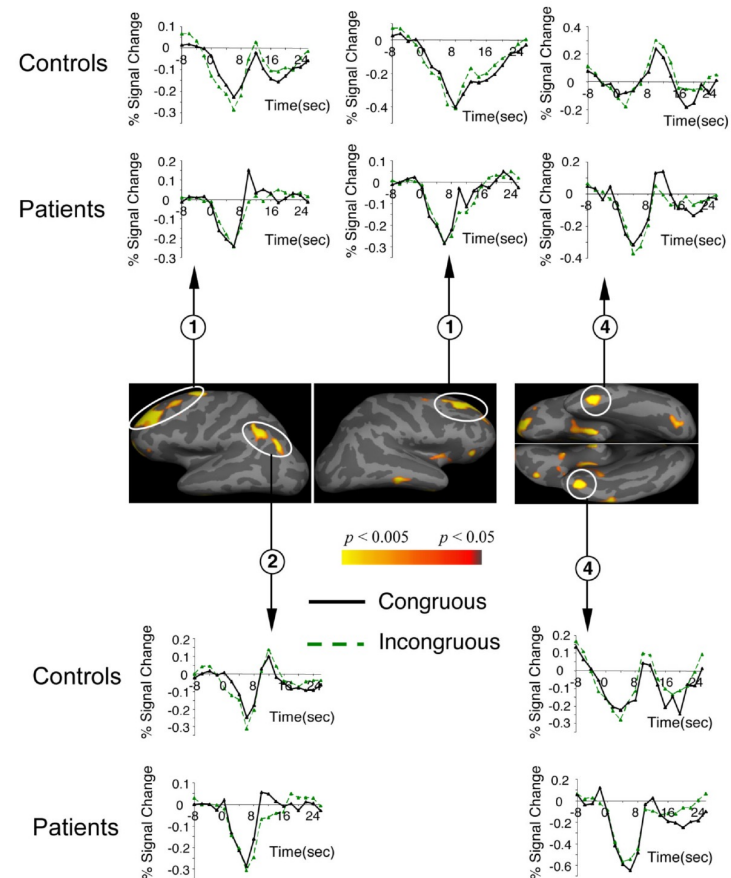
Abstract:

Congruous:

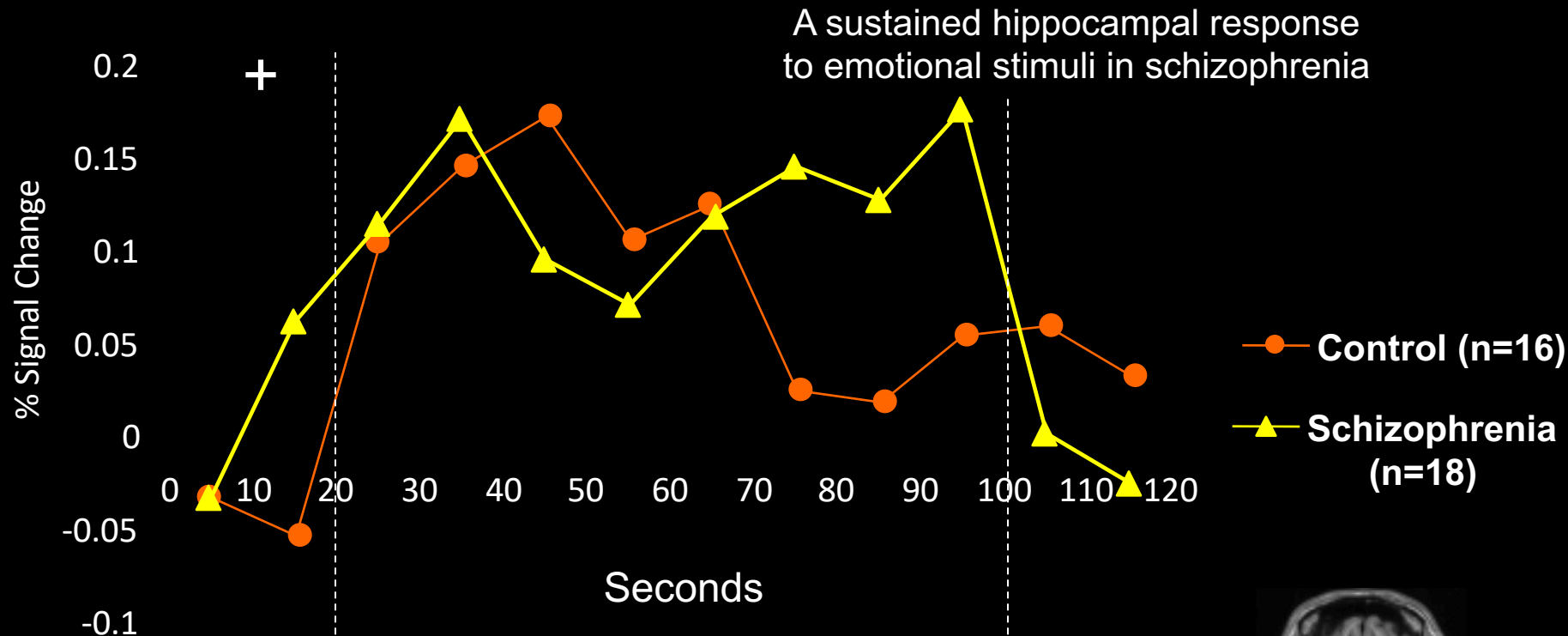
Although she strove for perfection she continued to make mistakes.

Incongruous:

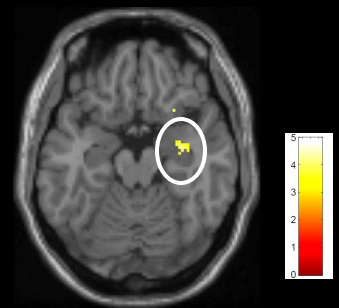
Her outer expressions were completely blank and revealed no equality.



The midline cortex and limbic system: emotion and social cognition



X 160



Holt et al, 2005

Why does this happen?



We have made **observations** about what might be different in the brain in schizophrenia



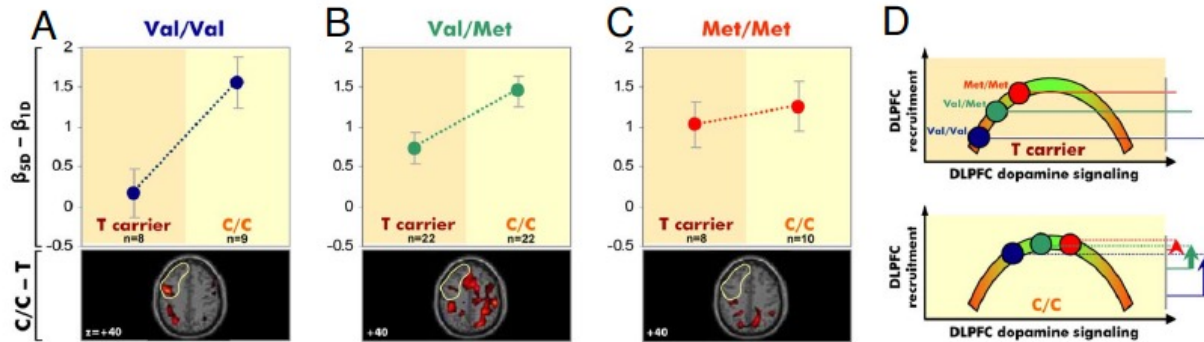
Can we now “look under the hood” and figure out what is causing the changes?



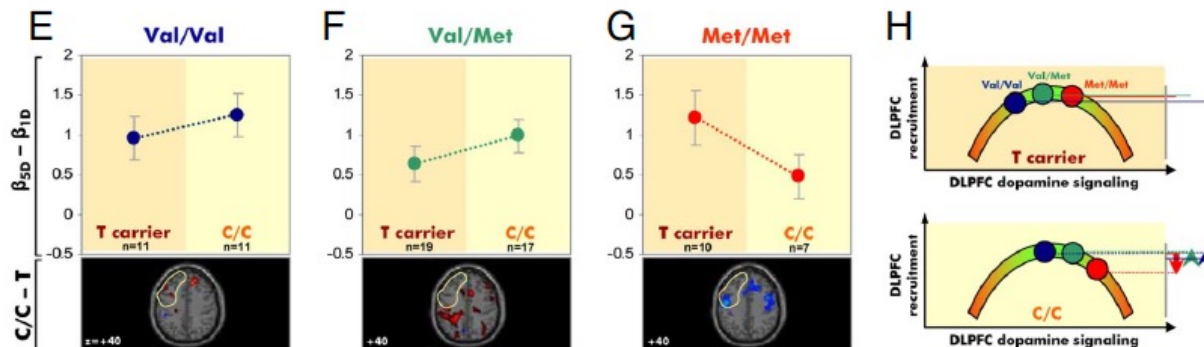
Understanding **the underlying causes or mechanisms** will help us come up with better treatments

Why does this happen?

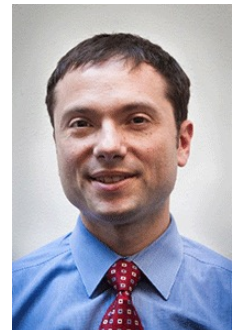
SCHIZOPHRENIA PATIENTS



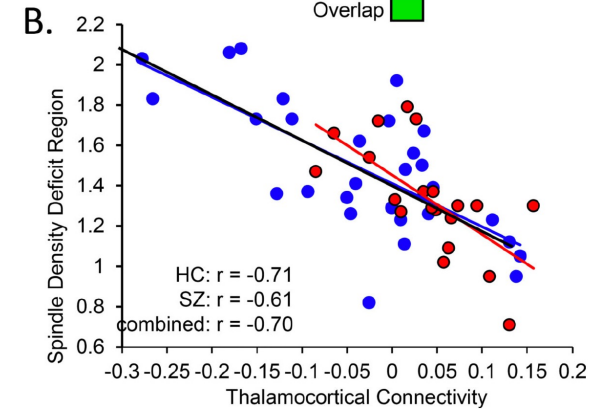
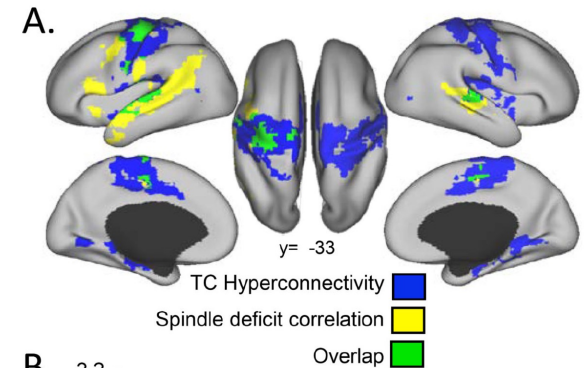
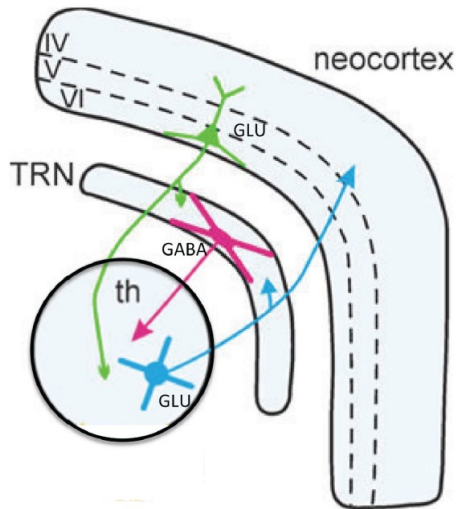
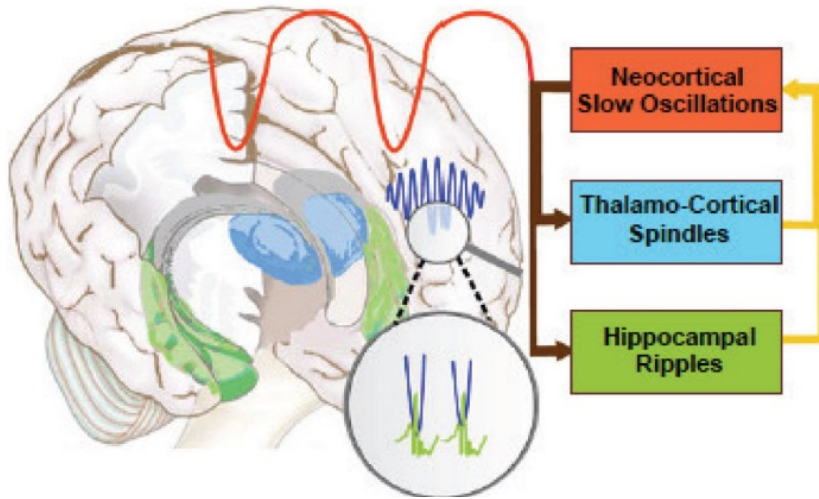
HEALTHY CONTROLS



Roffman et al, 2008



Why does this happen?



Manoach & Stickgold, 2019

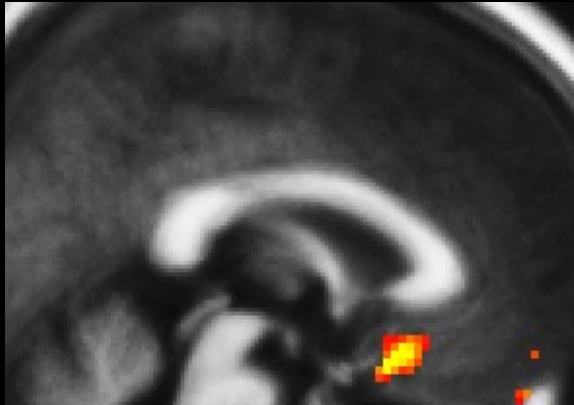


Manoach et al, 2016

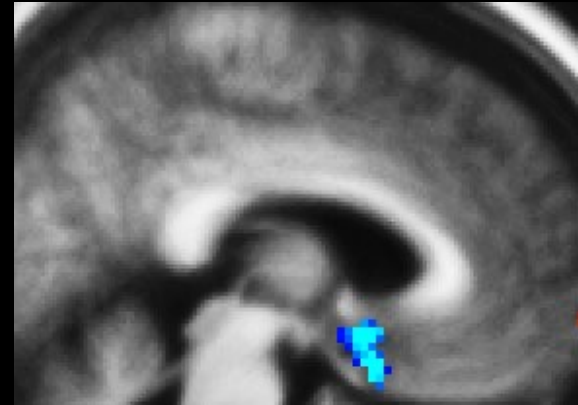
Why does this happen?

Extinction Recall

A. CON



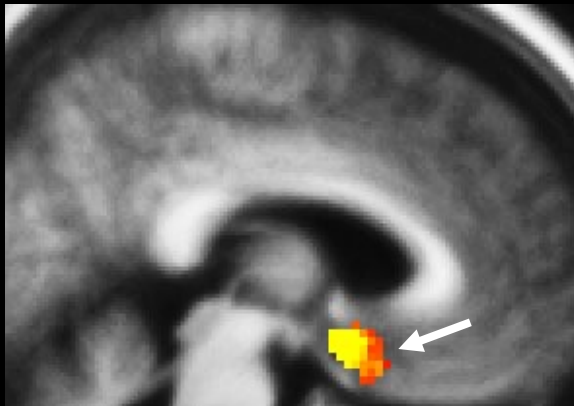
B. SCZ



CS+E > CS+U, $p < .05$

CS+U > CS+E, $p < .05$

C. CON vs. SCZ



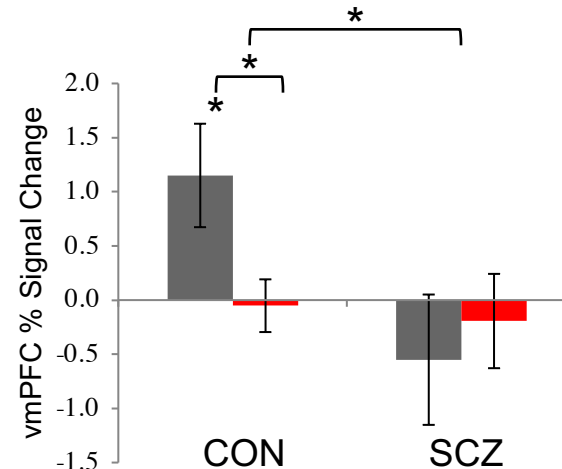
CON > SCZ

SCZ > CON

Peak vmPFC between-group difference: $p < 10^{-4}$

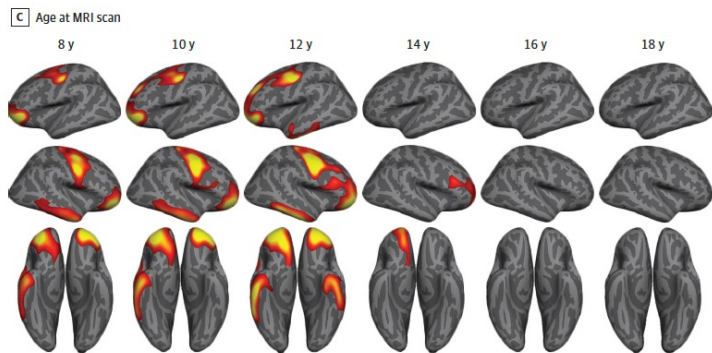
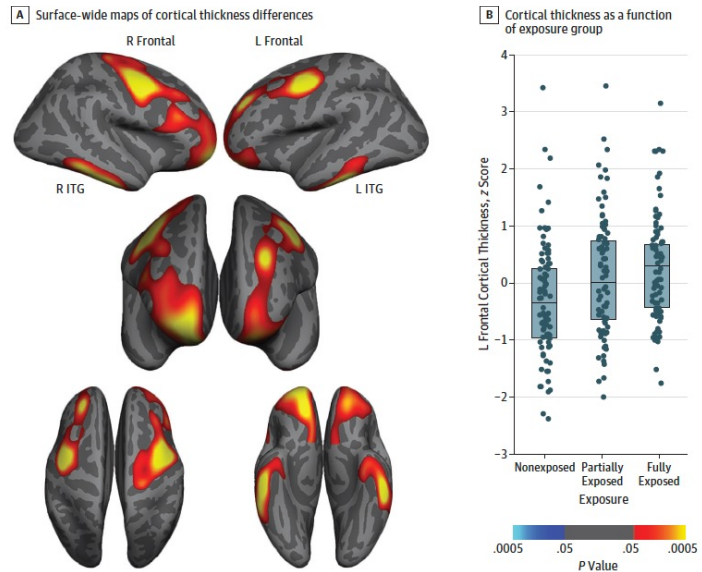
D.

Extinction Recall
Fear Renewal

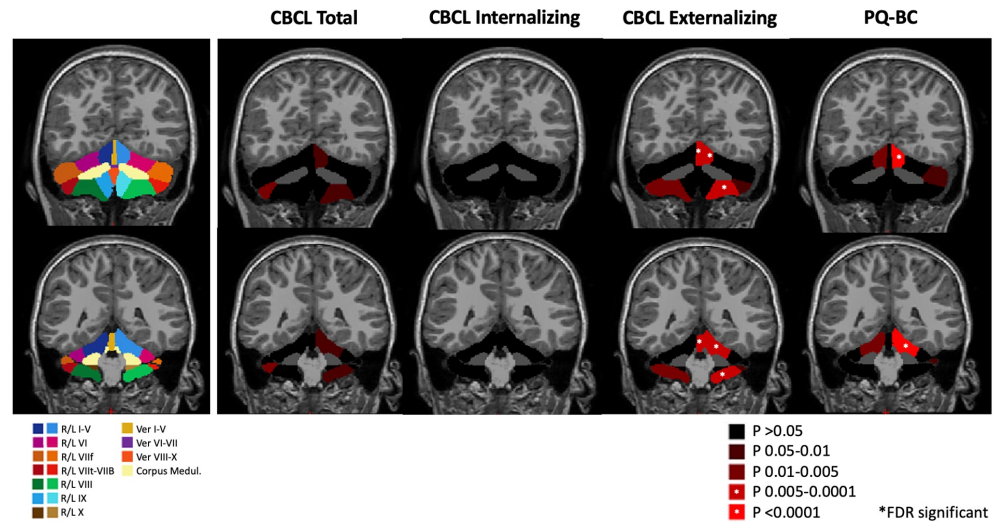


When does all of this happen?

Clues from neurodevelopment and genetics



Eryilmaz et al, 2018



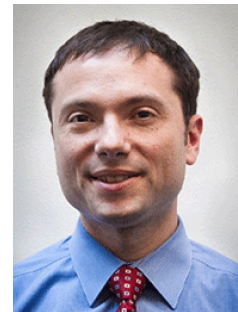
Hughes et al, under review



Hamdi Eryilmaz, PhD



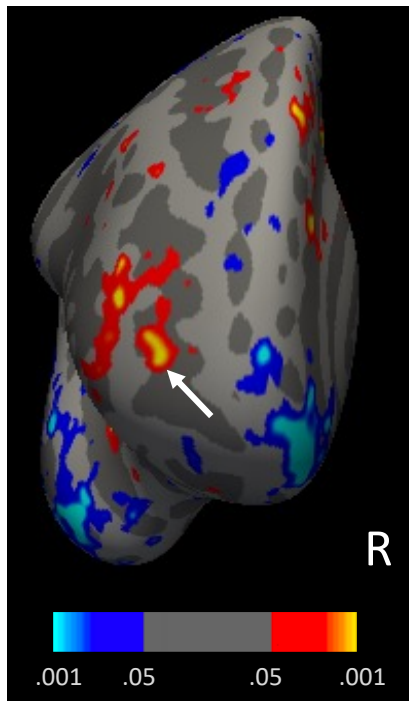
Dylan Hughes, BS



Joshua Roffman, MD

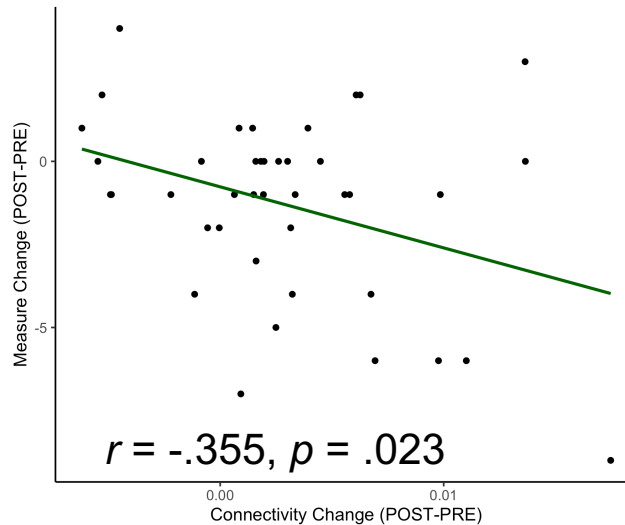
Can we change this? Evidence from a study of Resilience Training (RT)

Post-RT change in frontohippocampal connectivity

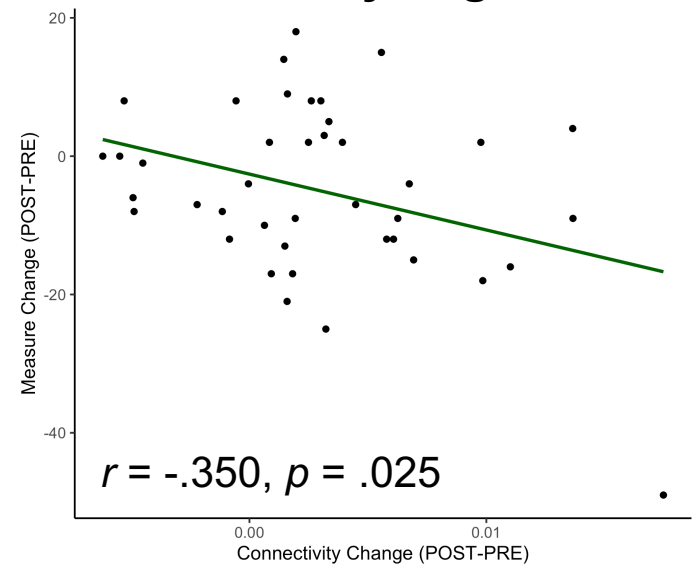


Post-RT change in delusional thinking and emotional dysregulation vs. post-RT change in frontohippocampal connectivity

Delusional thinking



Emotional dysregulation



The greater the increase in frontohippocampal connectivity, the greater the decrease in delusional thinking and emotional dysregulation following Resilience Training

The Present and Future...



Louis Vinke, PhD



Faye McKenna, PhD



Keiko Kunitoki, PhD



Paige Hickey, PhD



Victoria Grunberg, PhD



Martin Sjøgård, PhD



Baktash Babadi, MD, PhD



Jacci Clauss, MD, PhD



Nicole DeTore, PhD

The Present and Future...

