

When are Parkinson's Patients Impaired (or Not) at Category Learning

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When are Parkinson's Patients Impaired (or Not) on Category Learning
Ben, Ryan & Shohamy, Experimental Brain Research

1. Why are BG important for category learning?
 - Perhaps feedback is key.
2. Further manipulation of task variables

Converging Evidence Suggests BG Important for Feedback Learning

1. **Electrophysiology:** BG modify responses based on (rewarding?) feedback (e.g. Lohmann et al., 2005; 2007)
2. **fMRI:** BG active during feedback learning, not observational learning (Freedman et al., 2002)
3. **Neuropsych:** Parkinson's patients impaired on some feedback learning tasks (Dawson et al., 1988; Myers et al., 2005)

⇒ However, necessity of BG for feedback learning not demonstrated directly.

Goal of Study

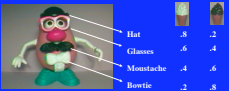
Compare Parkinson's patients on probabilistic category learning under *feedback* and *no-feedback* ("observational") training

Prediction

Parkinson's patients will be

- *impaired* when learning is feedback-based
- *not impaired* when learning is observational.

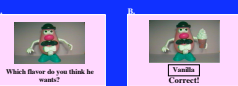
"Mr. Potatohead"




Hat	.8	.2
Glasses	.6	.4
Mustache	.4	.6
Bowtie	.2	.8

Features on Mr. Potatohead predict category outcome (vanilla or chocolate) probabilistically

Feedback Condition



Observational Condition



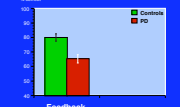
Press "next" to see another customer

Subjects: PD & Control

	PD	Education	IQ	FI	FI:PD
FB	PD	12.5	115	202	5.3
	CON	12.4	124	215	11.0
OB	PD	12.5	115	202	5.3
	CON	12.4	124	215	11.0

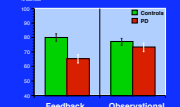
- Non-demented and non-depressed.
- Intact cognitive function.
- Tested on medication.

Results for Mr. Potatohead



⇒ Consistent with prior studies: PD impaired with feedback learning

Results for Mr. Potatohead



⇒ PD **not** impaired learning same task with "observational" learning

Learning strategies

Math analyses determine fit of individual data to models of learning strategies

Prior studies: Most subjects use specific subset of strategies under feedback conditions (Gluck et al., 2002)

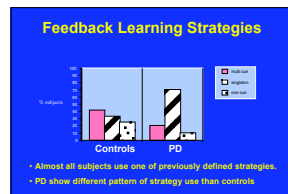
⇒ Do PD and controls use same strategies with observational learning?

Learning Strategies

Prior studies: 3 Main Learning Strategies

1. **Multi-cue** (learn all 4 cues; optimal)
2. **Singleton** (learn 4 single-cue patterns)
3. **One-cue** (respond based on one cue)

For Details See:
 Gluck, M. A., Shimamura, D. P., & Myers, C. E. (2002). How do people solve the "Potatohead" problem? Individual variability in strategies for probabilistic category learning. *Learning and Memory*, 9, 408-418.



Observational Learning: No Strategies

Almost NONE of the subjects in any group use the strategies defined earlier.

Many subjects appear to learn a RULE, responding correctly to a subset of patterns/exemplars.

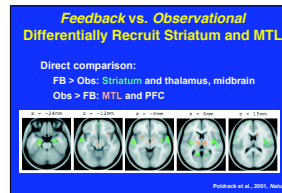
⇒ Subjects learn the task in a qualitatively different manner under feedback vs. observational conditions.

Summary

PD impaired on PCL only when learning is feedback-based, not observational.

Feedback vs. observational learning invoke different strategies in both controls and PD.

⇒ Consistent with role for BG in modifying behavior based on response-contingent feedback as suggested by our prior imaging study with R. Pollock *et al.*



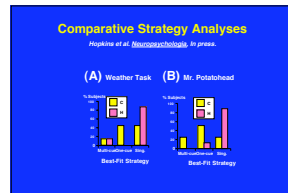
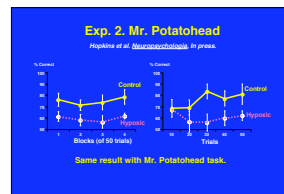
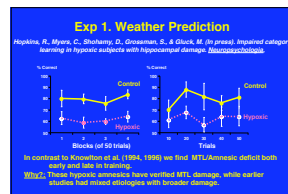
Does this suggest a double dissociation?

	Feedback	Observ.
BG damage (PD)	Impaired	OK
MTL Damage (Amn)	?OK?	?Impaired?

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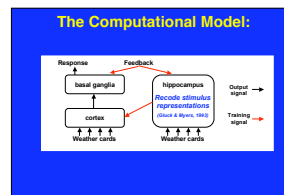
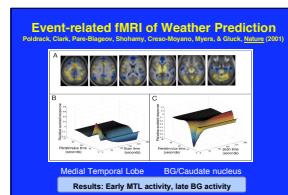
* Prior data suggested early MTL learning OK (Knowlton, Squire, & Gluck, 1994; Knowlton, Mangels, & Squire, 1996)

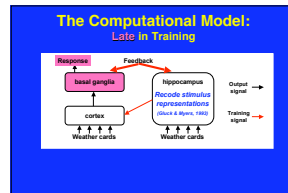
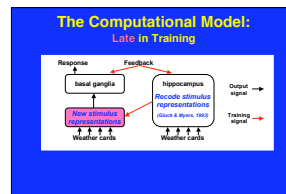
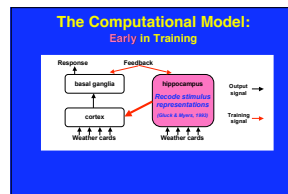


No clean double dissociation:

	Feedback	Observ.
BG damage (PD)	Impaired	OK
MTL Damage (Amn)	Impaired	??

But, consistent with earlier imaging and modeling:
 BG and MTL both important for PCL but in different ways, and at different times during learning (early MTL, late BG)



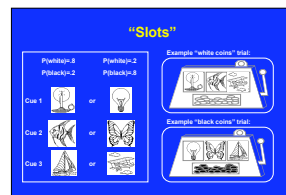


When are Parkinson's Patients Impaired (or Not) on Category Learning
from Scott J. Frank, Gregor Schödl, and Michael J. Frank

1. Why are BG important for category learning?
Perhaps feedback is key.
2. Further manipulation of task variables
to better understand functional roles
of BG and MTL in category learning

Myers et al. (2003) CNS Poster

1. Are PD simply slower at probabilistic category learning (PCL), or is there a qualitative difference in how they approach PCL, relative to controls?
2. Is the PD deficit unique to the (very difficult) weather task, or does it extend to other (easier) probabilistic category tasks?



Slots: Simpler PCL

Stimuli

- Three independent cues.
- Each cue **probabilistically** associated with each outcome
- Each **pattern deterministically** associated with each outcome
- subject potentially achieve 100% correct (vs. 67% WP)
- Fewer solution strategies than in "weather" task:
 - no "singleton" patterns

Transfer: Unsignaled reversal

Slots: PD vs. Matched Controls

- Acquisition: **PD are not different from controls.**
- Reversal: **PD are not different from controls.**

Slots Strategy Analysis: PD shift, Controls Reverse

- Acquisition: Most subjects use a one-cue strategy
- Reversal: All but 2 controls best-fit by same strategy as in acquisition; all but 2 PD shift from a one-cue strategy to another (different) one-cue strategy.
- No difference controls keep (and reverse) their **same** strategy; PD "avoid" reversal by shifting to a new, **equally-effective** cue.

Slots: General Discussion

- PD are not impaired at acquisition

Thus, PD deficit observed in "weather" task may depend on **specific features of that task**, including overall difficulty, need to encode configurational cues, pattern-response conflict, etc., rather than reflecting a general PD deficit in probabilistic classification learning. **Failure: manipulation of these variables independently**

- No PD impairment on reversal

PD "avoid" reversal by shifting to another, equally-effective strategy

Lack of PD impairment on this shifting is consistent with the general lack of impairment by medicated PD patients on other intradimensional shift tasks (e.g. Downs et al., 1989; Gauntlett-Gilbert et al., 1999).



Bibliography

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3.2 Gluck

Slots Methods

Subjects

- 13 individuals with mild-to-moderate idiopathic PD
- 10 males, 3 females, mean age 62.4 years, mean education 16.8 years
- All tested on dopaminergic medication, clean of other medication including anticholinergics, screened for depression and dementia.
- 13 healthy controls
- 6 males, 7 females, mean age 63.0 years, mean education 15.9 years
- Neither age nor education differed significantly from the PD group (age: $t(24)=0.31$, $p=0.90$; education: $t(24)=0.75$, $p=0.46$)
- Screened for absence of any neurological or psychiatric disorder, including depression; free of any medication that could impair cognition.

Procedure

- Task and data analysis same as in Experiment 1.