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2	Targeted stimulation of an orbitofrontal network disrupts decisions based on inferred,
3	not experienced outcomes
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22 ABSTRACT

23 When direct experience is unavailable, animals and humans can imagine or infer the future to 24 guide decisions. Behavior based on direct experience versus inference may recruit distinct but overlapping brain circuits. In rodents, the orbitofrontal cortex (OFC) contains neural signatures of 25 inferred outcomes, and OFC is necessary for behavior that requires inference but not for 26 27 responding driven by direct experience. In humans, OFC activity is also correlated with inferred outcomes, but it is unclear whether OFC activity is required for inference-based behavior. To test 28 29 this, we used non-invasive network-based continuous theta burst stimulation (cTBS) to target lateral OFC networks in the context of a sensory preconditioning task that was designed to isolate 30 inference-based behavior from responding that can be based on direct experience alone. We 31 32 show that relative to sham, cTBS targeting this network impairs reward-related behavior in conditions in which outcome expectations have to be mentally inferred. In contrast, OFC-targeted 33 34 stimulation does not impair behavior that can be based on previously experienced stimulus-35 outcome associations. These findings suggest that activity in the targeted OFC network supports decision making when outcomes have to be mentally simulated, providing converging cross-36 37 species evidence for a critical role of OFC in model-based but not model-free control of behavior.

39 INTRODUCTION

Many decisions are made based on expectations about their likely outcomes. Such expectations can reflect what we have experienced in the past, for instance, when ordering your favorite dish at a familiar restaurant. For many other decisions in life, such as deciding to try out a new restaurant or enrolling in a PhD program, direct experience is lacking, and outcome expectations need to be mentally simulated or inferred.

Expectations arising from these two different origins, which may compete for control over behavior (Daw et al., 2005; Lee et al., 2014), are thought to recruit distinct but overlapping brain circuits (Balleine and Dickinson, 1998; Daw et al., 2011; O'Doherty et al., 2017). Whereas much research has focused on behavior that is based on direct experience (Schultz, 1998; Tricomi et al., 2009; Wunderlich et al., 2012), less is known about the neural representations that support behavior based on inferred outcomes in humans.

51 Work across animal species suggests that the orbitofrontal cortex (OFC), together with the 52 hippocampus, is particularly important for behavior based on inference (Rudebeck and Murray, 2014; Wikenheiser and Schoenbaum, 2016). For instance, in tasks that require mental simulation, 53 neural activity in the rodent OFC represents inferred outcomes in almost the same way as it 54 55 signals directly experienced outcomes (Takahashi et al., 2013; Sadacca et al., 2018). Interestingly, however, the rat OFC is not required for behavior based on directly experienced 56 57 outcomes, but it is only necessary when responding requires inference (Jones et al., 2012; 58 Takahashi et al., 2013). This suggests that rodent OFC is selectively required for the simulation 59 of outcomes. Recent work in humans has shown similar neural correlates of inferred outcomes in the OFC (Barron et al., 2013; Wang et al., 2020), but whether human OFC networks are required 60 for behavior based on such inferred outcomes is unclear. 61

62 Causal studies on human OFC function have traditionally been limited to naturally-occurring 63 lesions (Reber et al., 2017; Vaidya et al., 2019). However, we have recently developed a novel network-based transcranial magnetic stimulation (TMS) approach to non-invasively target activity 64 65 in human OFC networks (Howard et al., 2020). Similar to previous work targeting the hippocampal network (Wang et al., 2014), this approach uses resting-state functional magnetic resonance 66 67 imaging (rsfMRI) to individually define stimulation coordinates in the lateral prefrontal cortex (LPFC) that are part of the central/lateral OFC network (Kahnt et al., 2012; Zald et al., 2014). We 68 have recently shown that this targeted TMS protocol selectively affects connectivity in lateral OFC 69 70 networks, in parallel with disrupting OFC-dependent behavior (Howard et al., 2020).

71 In the current study (Fig. 1A), we applied this novel OFC-targeted brain stimulation approach in 72 the context of a sensory preconditioning task that was designed to isolate inference-based 73 behavior from responding that can be based on direct experience (Jones et al., 2012; Wimmer and Shohamy, 2012; Wang et al., 2020). This task consists of three phases (Fig. 1B): First, during 74 preconditioning, pairs of sensory cues are repeatedly presented ($A \rightarrow B$, $C \rightarrow D$). Next, during 75 conditioning, the second cue of each pair is associated with reward and no reward, respectively 76 77 $(B \rightarrow reward, D \rightarrow no reward)$. During the final probe test, reward-related responding to each cue (A, B, C, and D) is probed under extinction conditions. Reward-related responses to cue A indicate 78 79 that subjects step through the associations $A \rightarrow B$ and $B \rightarrow$ reward to infer $A \rightarrow$ reward. In contrast, such responses to cue B do not require inference because direct experience with the cue-80 outcome pairing is available. We predicted that disrupting OFC network activity with OFC-targeted 81 82 TMS will impair inference-based behavior (responding to cue A), but not behaviors that can be based entirely on direct experience alone (responding to cue B). 83

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86 MATERIALS AND METHODS

87 Subjects

In total, 71 healthy adults participated in a screening session. Of these, 52 passed screening, 88 were randomly assigned to the sham (SHAM: n=25, 13 female) or stimulation group (STIM: n=27, 89 15 female), and participated in the experiment. All participants provided written informed consent 90 to participate and were compensated with \$20 per hour for behavioral testing and \$40 per hour 91 for TMS and MRI scanning. The study protocol was approved by the Northwestern University 92 93 Institutional Review Board. One participant in the STIM group withdrew during the experiment. 94 Data from four participants (two per group) were excluded from all analyses because their 95 performance in the last run of conditioning was not significantly above chance (p>0.05, binomial 96 test). This left a total of 47 participants (SHAM: n=23, 12 female, mean age=25.24 years ± 0.86 s.e.m; STIM: n=24, 13 female, age=25.30 years ± 0.70) from whom data was analyzed. Of those, 97 data from four participants (one SHAM, three STIM) from the recognition memory test of the 98 99 experiment were not recorded due to technical problems.

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101 Stimuli and Odor Delivery

Visual cues consisted of 14 abstract symbols, and 12 of them were randomly grouped into six pairs for each participant. Two pairs served as A1–B1 pairs, two served as A2–B2 pairs, and two served as C–D pairs. The two remaining symbols were used to form two catch-trial pairs (E–E) in which the same symbols were presented twice in a row (i.e., E1–E1, E2–E2). The two symbols constituting a pair were presented in different colors (e.g., first symbol blue, second symbol green; counterbalanced across participants).

As in our previous studies, the current experiment used food odors as biologically relevant reward 108 109 in hungry participants (Howard et al., 2015; Howard and Kahnt, 2017, 2018; Suarez et al., 2019; Howard et al., 2020). Eight food odors (four sweet: strawberry, caramel, gingerbread, and yellow 110 111 cake; four savory: potato chip, pot roast, garlic, and pizza) were provided by Kerry (Melrose Park, IL) and International Flavors and Fragrances (New York, NY). Odors were delivered to 112 participants' nose using a custom-built and computer-controlled olfactometer (Howard et al., 2020; 113 114 Wang et al., 2020). The olfactometer was equipped with two independent mass flow controllers 115 (Alicat, Tucson, AZ), which allow dilution of any given odorant with odorless air. Odorless air was delivered constantly during the experiment and odorized air was mixed into the airstream at 116 117 specific time points. The overall flow rate was kept constant at 3.2 L/min throughout the task, such 118 that odor deliver did not involve a change in overall airflow or any noticeable change in somatosensory stimulation. 119

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121 Experimental Task and Design

The study was conducted over three days (**Fig. 1A**) and included (1) a screening session, (2) a MRI and TMS motor threshold session, and (3) a main task session. The MRI and TMS motor threshold session was conducted on average 18 days (s.e.m.=4.16) after the screening session. And the average delay between motor threshold and main task sessions was 4 days (s.e.m.=0.94). Participants were instructed to arrive in a hungry state (fast for at least 4 hours) for the screening and main task sessions.

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Screening Session. After informed consent and screening for eligibility, participants' rated the pleasantness of eight food odors. In each trial, participants were presented with one of the eight food odors for 2 seconds and were instructed to make a medium sized sniff. They then rated the pleasantness of the delivered odor on a scale from "Most disliked sensation" to "Most liked

133 sensation". Each food odor was presented 3 times in randomized order and ratings were 134 averaged. We then selected one sweet and one savory odor that were both rated as pleasant (i.e. 135 pleasantness above neutral) and as closely matched as possible. The two selected odors were 136 then used as reward for that individual participant in the main task session. If no such two odors 137 were found, participants were excluded from further participation in the study. Next, participants 138 rated the intensity and pleasantness of the two selected odors as well as odorless air. The scale 139 of the intensity rating was from "Undetectable" to "Strongest sensation imaginable".

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MRI and TMS Motor Threshold Session. We acquired a T1-weighted structural MRI scan for the purpose of TMS neuronavigaton and an 8.5 minutes rsfMRI scan for individually defining OFCtargeted stimulation coordinates (see below). We then measured resting motor threshold (RMT) by delivering single TMS pulses over left motor cortex. RMT was defined as the minimum percentage of stimulator output necessary to evoke 5 visible thumb movements in 10 stimulations.

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Main Task Session. The main task session consisted of preconditioning, conditioning, TMS, probe 147 148 test, and a cue-cue recognition memory test (Fig. 1B). In four preconditioning runs, participants 149 were instructed to learn the associations between the two cues in each pair $(A \rightarrow B [A1 \rightarrow B1])$ $A2 \rightarrow B2$, $C \rightarrow D$ [C1 \rightarrow D1, C2 \rightarrow D2], $E \rightarrow E$ [E1 \rightarrow E1, E2 \rightarrow E2]). The cues in a given pair were 150 151 presented one after another for 3 seconds each, separated by an inter-stimulus-interval (ISI) of 152 300 ms. A fixation cross appeared between trials for a variable inter-trial-interval (ITI) between 3 and 11 seconds. To ensure attention to the cue pairs, participants were instructed to memorize 153 154 the cue pairs, press a button if the second cue was different from the first cue, and withhold a response if the two cues were identical. To facilitate learning, in the first two runs of 155 156 preconditioning, each cue pair was repeated three times in a row. In the remaining preconditioning 157 runs, the order of cue pairs was randomized across trials.

Next, participants performed three runs of conditioning, during which the second cue of each pair (cues B [B1, B2] and D [D1, D2]) was presented individually for 3 seconds. Participants were instructed to indicate by button press which outcome (e.g. strawberry odor [SB], garlic odor [GA], or no odor [NO]) they expected following the cue. If they expected strawberry, they were asked to select "SB"; if they expected garlic, they were asked to select "GA"; If they expected no odor, they were asked to select "NO". Participants made their prediction by pressing a button with the index, middle or ring fingers of their right hand corresponding to the positions of "SB", "GA" and

"NO" on the screen. The positions of the abbreviated names were randomized across trials.
Irrespective of their selection, the outcome was presented for 2 seconds immediately after the
cue. However, "too slow" was displayed if participants failed to respond within 3 seconds. Each
cue-outcome association was repeated four times in each run in pseudorandomized order.

169 After the conditioning phase, participants received OFC-targeted cTBS (see below). The probe test followed immediately after the stimulation. In each trial of the probe test, cue A (A1, A2), B 170 (B1, B2), C (C1, C2), or D (D1, D2) was presented individually under extinction conditions 171 172 (odorless air was delivered throughout) to prevent further learning. Each cue was presented four times in pseudorandomized order. Participants were instructed to predict the outcome after each 173 174 cue, as they did during the conditioning phase. They were further instructed to use the cue-cue 175 associations learned in the first phase to infer the outcomes associated with the preconditioned cues (Wang et al., 2020). The durations of cue presentation and the ITI were the same as during 176 177 the conditioning phase.

Following the probe test, participants were tested for their memory of the cue-cue associations in a recognition task. On each trial, participants were presented with either an original cue pair or with a newly recombined pair (i.e., consisting of cues belonging to different pairs). Pairs were presented sequentially as during preconditioning, and participants were asked to indicate using a button press whether a pair was old (O) or recombined (R) after the second cue was presented.

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184 MRI Data Acquisition

MRI data were acquired at the Northwestern University Center for Translational Imaging (CTI) 185 186 using a Siemens 3T PRISMA system equipped with a 64-channel head coil. rsfMRI scans were 187 acquired with an echoplanar imaging (EPI) sequence with the following parameters: repetition 188 time (TR), 2 s; echo time (TE), 22 ms; flip angle, 90°; slice thickness, 2 mm, no gap; number of 189 slices, 58; interleaved slice acquisition order; matrix size, 104 x 96 voxels; field of view, 208 mm 190 x 192 mm; multiband factor, 2. To minimize susceptibility artifacts in the OFC, the acquisition 191 plane was tilted approximately 25° from the anterior commissure (AC)-posterior commissure (PC) line. The rsfMRI scan consisted of 250 EPI volumes covering all but the most dorsal portion of 192 193 the parietal lobes. In addition, a 3D 1 mm isotropic T1-weighted structural scan was also collected (TR, 2300 ms; TE, 2.94 ms; flip angle, 9°; field of view, 176 mm x 256 mm x 256 mm) 194

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196 fMRI Data Preprocessing

197 Preprocessing of functional images was performed using Statistical Parametric Mapping (SPM12, 198 https://www.fil.ion.ucl.ac.uk/spm/). To correct for head motion during scanning, all rsfMRI images were aligned to the first acquired image. The mean realigned images were then co-registered to 199 the anatomical image, and the resulting registration parameters were applied to all realigned EPI 200 images. Finally, co-registered EPI images were resliced and smoothed with a 6 x 6 x 6 mm 201 Gaussian kernel. To generate forward and inverse deformation fields, the anatomical image was 202 203 normalized to Montreal Neurological Institute (MNI) space using the 6-tissue probability map provided by SPM12. 204

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206 OFC-targeted Transcranial Magnetic Stimulation

207 We used our previously established network-based OFC-targeted TMS protocol (Howard et al., 2020). TMS was delivered using a MagPro X100 stimulator connected to a MagPro Cool-B65 208 butterfly coil (MagVenture A/S, Farum, Denmark). We used a cTBS protocol involving a 40 second 209 train of 3-pulse 50 Hz bursts delivered every 200 ms (5 Hz), totaling 600 pulses (Huang et al., 210 211 2005). This TMS protocol has inhibitory aftereffects that last for 50-60 minutes over motor cortex 212 (Huang et al., 2005). Stimulation was delivered at an intensity of 80% MT in the STIM group and 5% MT in the SHAM group. As in our previous study (Howard et al., 2020), the target coordinate 213 214 was defined as a location in the right LPFC that showed maximal functional connectivity with the right OFC seed coordinate (see details below). The orientation of the coil was such that the long 215 axis of the figure-of-eight coil was approximately parallel to the long axis of the middle frontal 216 217 gyrus. All participants were informed that they may experience muscle twitches in the forehead, eye area, and jaw during stimulation. We delivered two single test pulses to test for tolerability 218 219 before cTBS was delivered. Immediately after the last pulse of cTBS, the time was noted. All 220 subsequent testing (probe test and recognition memory) took place within 33 ± 1.92 minutes of 221 the end of TMS, and this time did not differ between groups (t=0.24, p=0.814).

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223 Coordinate selection for OFC-targeted TMS

224 Stimulation coordinates on the right LPFC were determined for each individual participant based 225 on rsfMRI connectivity with a right central-lateral OFC seed region using a previously described 226 procedure (Howard et al., 2020). Briefly, we first created two spherical masks of 8-mm radius

227 around a LPFC coordinate (x=48, y=38, z=20) and a OFC seed coordinate (x=28, y=38, z=-16) 228 in MNI space, both inclusively masked by the gray matter tissue probability map provided by 229 SPM12 (thresholded at >0.1). These masks were then inverse-normalized to each participant's native space using the inverse deformation field generated by normalizing the anatomical image. 230 We then estimated a general linear model with the average rsfMRI time series in the OFC mask 231 as the regressor of interest and realignment parameters as regressors of no interest. The voxel 232 233 in the LPFC mask that had highest functional connectivity with the OFC seed was defined as stimulation coordinate. We used neuronavigation to apply stimulation to this coordinate. 234

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236 Statistics

237 Simple between-group effects were tested using unpaired t-tests. Results from parametric tests 238 were confirmed using permutation tests involving 10,000 random group assignments. Interactions 239 were tested using R (R Core Team, 2018) and the Ime4 package (Bates, 2010). Specifically, we performed linear mixed effect analysis on odor pleasantness ratings with group (SHAM vs. STIM) 240 and odor (odor vs. odorless) as independent variables. In addition, to test the interaction between 241 group, cue type, and time on reward predictions during conditioning, we used a generalized linear 242 243 mixed model with group (SHAM vs. STIM), cue (B vs. D), and time (three runs) as independent variables. Finally, the interaction between group and cue type on reward predictions during the 244 245 probe test was tested using a generalized linear mixed model with group (SHAM vs. STIM) and 246 cue type (A vs. B) as independent variables. In all analyses, subjects were modeled as random intercept effects. There were no obvious deviations from normality or homoscedasticity based on 247 visual inspection of residual plots. We computed p values by likelihood ratio tests (γ^2) of the full 248 249 model including the effect of interest against the reduced model without the effect of interest. 250 Statistical thresholds were set to p<0.05, two-tailed unless indicated otherwise.

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253 **RESULTS**

254 Odor Ratings and Learning Performance

The experiment took place across three days (**Fig. 1A**). Day 1 and 2 consisted of a screening visit and a MRI (anatomical and rsfMRI) session, respectively. Day 3 involved a sensory preconditioning task and network-based OFC-targeted TMS. On day 3, subjects (SHAM, n=23; STIM, n=24) in both groups arrived fasted (not eaten for 11 ± 4.27 hours; group difference, t(45)=1.00, p=0.321) and with similar levels of hunger (t(45)=1.28, p=0.205). Subjects first learned associations between pairs of abstract visual cues during preconditioning (A \rightarrow B, C \rightarrow D, **Fig. 1B**). Next, they learned that a pleasant food odor followed cue B, whereas cue D was always followed by odorless air (**Fig. 1B**). To measure reward expectations, participants were asked to predict the outcome associated with the presented cue via button press.

264 Subjects in both groups rated the food odors as significantly more pleasant than the odorless air (SHAM: t(22)=11.62, p=7.38×10⁻¹¹; STIM: t(23)=12.97, p=4.59×10⁻¹², **Fig. 2A**), demonstrating 265 that food odors were perceived as rewarding. Importantly, there were no differences in the 266 pleasantness ratings between groups (main effect of group: $\chi^2(1)=2.49$, p=0.115; group by odor 267 interaction: $\chi^2(1)=1.34$, p=0.247). During conditioning, the percentage of trials in which 268 participants expected a food odor after cue B increased across time relative to cue D (3-way 269 [group x time x cue] generalized linear mixed model; main effect of cue, $\chi^2(1)=1736$, p<2.2×10⁻¹⁶; 270 main effect of time, $\gamma^2(2)=0.98$, p=0.613; cue by time interaction, $\gamma^2(2)=254.22$, p<2.2×10⁻¹⁶; Fig. 271 272 2B). There were no significant differences between groups in learning across time (main effect of group, $\chi^2(1)=0.096$, p=0.757; cue by group interaction, $\chi^2(1)=3.22$, p=0.072; time by group 273 interaction, $\chi^2(2)=2.88$, p=0.24; cue by time by group interaction, $\chi^2(2)=0.36$, p=0.834). Most 274 275 importantly, performance in the last conditioning run did not differ between groups (t(45)=0.0045). 276 p=0.996), demonstrating that subjects in both groups learned the associations between the cues 277 and their associated outcomes equally well.

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279 OFC-targeted cTBS disrupts inference-based responding

After conditioning and immediately prior to the probe test, we applied 40 seconds of cTBS to a site in right lateral prefrontal cortex (LPFC) that was individually selected to have maximal restingstate fMRI connectivity with the central/lateral OFC, following previously established procedures (Howard et al., 2020). Specifically, stimulation was administered in the STIM group at a high intensity that we have previously shown disrupts OFC network activity and adaptive behavior in a reinforcer devaluation task. Stimulation in the SHAM group was administered at a low intensity that was not expected to produce any impact on neural function (Howard et al., 2020).

We hypothesized that targeting the lateral OFC network with cTBS would selectively disrupt reward expectations based on inference but not those based on direct experience. In line with

this, we found a significant interaction between cue type and group ($\chi^2(1)=4.95$, p=0.026), 289 indicating that responses to cues A and B were differentially affected by OFC-targeted cTBS 290 291 compared to the SHAM group. Indeed, follow-up t-tests showed that this interaction was driven 292 by significantly reduced responses to cue A in the STIM relative to the SHAM group (t(45)=2.40,293 p=0.020, Fig. 3A) whereas there was no group difference in responding to cue B (t(45)=1.18, p=0.245, Fig. 3B). These results were confirmed using permutation tests (group difference in 294 responding to A, p=0.012; group difference in responding to B p=0.127). This demonstrates that 295 effects of OFC-targeted cTBS were specific for inference-based responding. 296

- 297 Reward-related responding to cue A depends not only on the ability to make an inference, but 298 also on knowledge about the reward predicted by cue B, which was acquired through direct 299 experience ($B \rightarrow$ reward). To further examine the effects of OFC-targeted cTBS on inference-300 based behavior independent of potential effects on direct experience, we normalized responses 301 to cue A by responses to cue B. The resulting ratio (i.e., A/B) reflects the ability to infer outcomes 302 relative to the knowledge about directly experienced cue-reward association. This ratio was significantly smaller in the STIM compared to the SHAM group (t(45)=2.33 p=0.024, Fig. 3C). We 303 confirmed the statistical significance of this difference using a permutation test (p=0.013). Taken 304 305 together, these results demonstrate that OFC-targeted cTBS selectively impairs behavior based 306 on inferred outcomes but does not disrupt behavior that can be based on directly experienced 307 outcomes.
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309 **OFC-targeted cTBS does not disrupt memory for cue-cue associations**

310 Inference also depends on memory of the cue-cue associations learned during preconditioning 311 (Wang et al., 2020). It is therefore possible that the findings reported above reflect a failure of memory rather than inference. Although this is unlikely given that memory of directly experienced 312 313 cue-reward associations was unimpaired in the STIM group, we measured recognition memory for cue-cue associations after the probe test to rule out this potential explanation. In both groups, 314 recognition memory was significantly above chance (SHAM: t(21)=5.01, p<0.001; STIM: 315 t(20)=2.70, p=0.013), and there was no difference between groups (t(41)=1.34, p=0.188, 316 permutation test, p=0.129 Figure 4A). Moreover, as in our previous study (Wang et al., 2020), 317 recognition memory was significantly correlated with inference-based responding (r=0.51, 318 p=0.0005, Figure 4B). These correlations were significant within each group (SHAM, r=0.38, 319 p=0.039, one-tailed; STIM, r=0.55, p=0.01) and did not differ between groups (Z=-0.93, p=0.178). 320

Taken together, these findings demonstrate that similar to directly experienced cue-reward associations, OFC-targeted cTBS did not significantly impair memory for cue-cue associations, or how they were used for inference-based behavior.

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326 **DISCUSSION**

The current study shows that targeting the human OFC with network-based cTBS impairs rewardrelated behaviors when outcome expectations need to be mentally simulated, but not when expectations can be based on direct experience. This closely parallels previous findings from rats (Jones et al., 2012), providing converging cross-species evidence for a critical role of OFC networks in model-based but not model-free behavior.

As such, our findings suggest that the contribution of OFC to decision making may be limited to 332 333 situations that require model-based planning, and that choices based on direct experience may rely on value computations in other brain areas, such as the amygdala or striatum (Paton et al., 334 335 2006; Cox and Witten, 2019). This proposal is seemingly at odds with a large number of studies across different species that has shown neural correlates of both inferred and directly experienced 336 value in OFC (Hare et al., 2009; Schoenbaum et al., 2009; Barron et al., 2013; Stalnaker et al., 337 2014; Howard et al., 2015; Padoa-Schioppa and Conen, 2017; Suzuki et al., 2017; Klein-Flugge 338 et al., 2019; Lopez-Persem et al., 2020; Wang et al., 2020). Why would OFC represent value 339 signals if they are not required for behavior? One potential answer is that OFC computes and 340 341 represents inferred values in all situations, and that these signals may bias choices at any point 342 (Ballesta et al., 2020). However, if direct experience is available, these signals are typically 343 indistinguishable from, and redundant with, cached values represented elsewhere in the brain, 344 such that disruption of OFC does not affect observed behavior. In contrast, because no other 345 brain area computes model-based values, OFC becomes important for behavior when outcomes 346 must be inferred. This proposal would explain why animals and humans with compromised OFC function are capable of making choices, but that these choices reflect previously learned values 347 even if they are no longer valid (Gallagher et al., 1999; Izquierdo et al., 2004; West et al., 2011; 348 Rudebeck et al., 2013; Murray et al., 2015; Gardner et al., 2017; Reber et al., 2017; Gardner et 349 al., 2018; Parkes et al., 2018; Howard et al., 2020). 350

351 In line with our previous work showing neural correlates of inferred outcomes in OFC (Wang et 352 al., 2020), the current findings suggest that OFC networks are directly involved in stepping 353 through the cue-cue and cue-reward associations when inferring outcomes at the time of decision making. However, alternative explanations have been proposed that do not require inference at 354 this time point. For instance, cue A could be reactivated at the time of conditioning, such that it 355 also acquires model-free value, just like cue B. Several studies have provided correlative 356 357 evidence for such mediated learning processes in areas of the medial prefrontal cortex and temporal lobe (Shohamy and Wagner, 2008; Wimmer and Shohamy, 2012; Zeithamova et al., 358 359 2012; Kurth-Nelson et al., 2015). The strongest evidence against such mediated learning comes 360 from reports that cue A does not support conditioned reinforcement (Sharpe et al., 2017), and 361 that responding to this cue is sensitive to devaluation (Hart et al., 2020), the gold standards for 362 assessing model-free and model-based value, respectively. Moreover, pharmacological inactivation of the OFC in the probe test selectively disrupts responding to cue A without affecting 363 364 responding to cue B (Jones et al., 2012). If responding to both A and B were based on the same neural mechanisms involving model-free values, then presumably the two would not be 365 differentially affected by OFC inactivation in the final probe test in this earlier experiment or, 366 367 indeed, in the current study.

However, it is important to keep in mind that behavior can be driven by several independent 368 369 mechanisms and that inference-based behavior may occur in parallel with support from additional mechanisms such as mediated learning (Schlichting and Preston, 2015), which may recruit 370 371 hippocampus (Shohamy and Wagner, 2008; Wimmer and Shohamy, 2012; Kurth-Nelson et al., 372 2015) and perirhinal cortex (Wong et al., 2019). Nevertheless, the susceptibility of inference-373 based responding to OFC-targeted cTBS indicates that at least some amount of behavior in our 374 task is based on real-time model-based computations. In this regard, it is important to note that whereas OFC-targeted cTBS reduced subjects' ability to make inference based decisions, it did 375 376 not fully abolish this function. This could be related to the fact that we only applied unilateral stimulation, and thus the contralateral OFC network may have remained unimpaired. 377 378 Alternatively, the remaining performance could be driven by mediated learning processes mentioned above, dependent on areas not impacted by our OFC-targeted manipulation. 379

A limitation of our study is that we did not measure rsfMRI directly after TMS. Therefore, although stimulation sites were selected to have maximal connectivity with the central-lateral OFC, and we have previously shown that an identical OFC-targeted protocol disrupts activity in the lateral OFC network (Howard et al., 2020), we are not able to confirm that this was the case in our current

sample. It is therefore possible that local effects of our stimulation on LPFC drove the observed 384 385 effects. However, we think this is unlikely for the following reasons. First, our TMS protocol was 386 identical to our previous study in which we did not observe any effects on LPFC activity (Howard et al., 2020). Second, our results parallel previous findings with pharmacological inactivation of 387 OFC in animals (Jones et al., 2012). Third, although medial PFC networks have been implicated 388 in inference processes (Zeithamova et al., 2012; Schlichting et al., 2015; Schlichting and Preston, 389 390 2015), we are not aware of similar findings related to LPFC. However, cTBS could have affected reliability signals in LPFC that have been shown to correlate with the arbitration of behavioral 391 392 control between model-based and model-free processes (Lee et al., 2014).

393 An additional limitation is our sham condition, which involved stimulation at 5% RMT. This is 394 noticeably different from stimulation at 80% RMT in terms of auditory and somatosensory stimulation. Thus, these unintended peripheral effects of TMS could have driven the observed 395 396 behavioral effects, rather than the neural changes induced by cTBS. We believe this is unlikely 397 for two reasons. First, effects of cTBS were specific to inference-based behavior, and no differences were found for behavioral responses based on direct experience or memory for cue-398 399 cue associations. It is difficult to conceive why peripheral effects of the TMS would have highly 400 disparate effects on two almost identical behaviors that only differ in their requirement for inference. Second, our previous study utilizing OFC-targeted TMS involved an additional control 401 402 condition that was matched for somatosensory stimulation (Howard et al., 2020). Despite comparable peripheral effects, behavioral and neural effects in this control condition differed 403 404 significantly from active cTBS but were similar to the 5% sham condition. We therefore think it is 405 unlikely that our results were driven by unintended non-neuronal effects of cTBS.

406 In summary, our results support the idea that human OFC networks are necessary for inference-407 based behavior, whereas they are not critical to support decision making when direct experience is available. Deficits in decision making are a hallmark of many neuropsychiatric disorders, 408 409 including substance use disorder (SUD) (Volkow and Fowler, 2000; Franklin et al., 2002; 410 Goldstein et al., 2007; Zilverstand et al., 2018), obsessive compulsive disorder (OCD) (Menzies et al., 2008; Gillan et al., 2011; Nakao et al., 2014). Our findings may offer a conceptual framework 411 412 for understanding how OFC dysfunction may disrupt behavior in these conditions. For instance, 413 an impaired ability to imagine unobservable states may reinforce checking behaviors in OCD, and 414 a failure to infer the consequences of long-term drug-use may bias drug-taking decisions in SUD. 415 It would be important to develop OFC-targeted TMS protocols that enhance rather than disrupt

416 OFC network activity with the goal to develop novel treatments that target specific behavioral 417 dysfunctions in these disorders.

418

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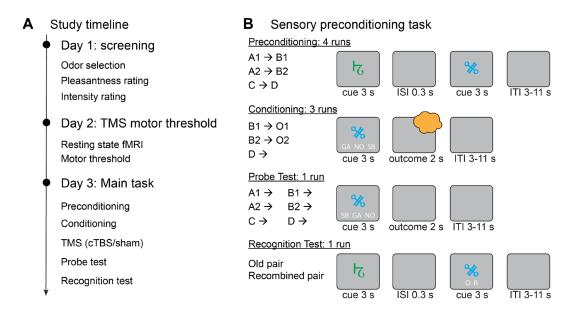
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428 Author Contributions

429 F.W., G.S., J.L.V, and T.K. designed the experiment. F.W. and J.D.H. collected the data. F.W.

430 analyzed the data. F.W., G.S. and T.K. interpreted the results and wrote the manuscript.

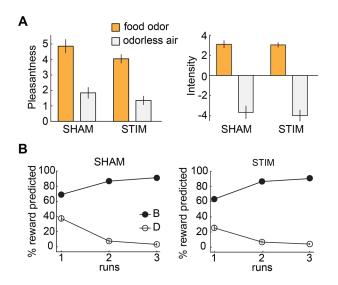
432 FIGURE LEGENDS



433

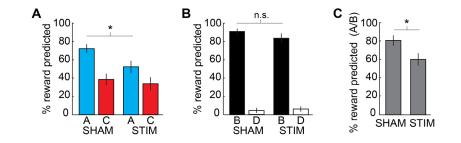
Figure 1. Experimental design and sensory preconditioning task. A. Experimental timeline. B. Participants learned cue pairs during preconditioning (A \rightarrow B, C \rightarrow D). During conditioning, they learned associations between the second cue in each pair and one of two food odors (O1 or O2) or odorless air (B \rightarrow odor reward, D \rightarrow odorless air). During the probe test, participants were asked to make outcome predictions to all cues, but no outcomes were delivered. Finally, subjects completed a recognition task testing for memory of cue-cue associations.

440



442

Figure 2. Odor ratings and behavioral performance during conditioning. A. Participants rated the pleasantness (left) and intensity (right) of food odors significantly higher than odorless air (p<0.001), but ratings did not differ between groups (p's>0.14). B. The percentage of trials in which an odor reward was expected after cue B increased relative to cue D across time during conditioning, and there were no group differences. Error bars depict SEM (n=23 SHAM, n=24 STIM).



450

451 Figure 3. Responses based on inferred outcomes are disrupted by OFC-targeted cTBS. A.

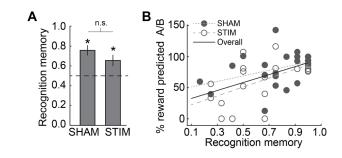
The percentage of trials in which participants predicted a reward for cue A was significantly larger in the SHAM compared to the STIM group (p=0.020). There was no difference in reward

454 predictions for cue C (p=0.642). **B.** There was no group difference in responding to cue B

455 (p=0.245) or D (p=0.740). **C.** Responses to cue A relative to cue B (A/B) were significantly

456 stronger in the SHAM compared to the STIM group (p=0.024). Error bars depict SEM (n=23 SHAM,

457 n=24 STIM) and * depicts p<0.05.



459

460 Figure 4. Memory for cue-cue associations and its relation to inference-based behavior is

461 **not altered by OFC-targeted cTBS. A.** Recognition memory for cue-cue pairs does not differ

462 between groups (p=0.188). * depicts p<0.05. **B.** Recognition memory for cue-cue associations

463 was significantly correlated with responding to preconditioned cues (reward prediction responses

to A/B) during the probe test (r=0.51, p<0.001, solid circles: SHAM; empty circles: STIM), and this

465 correlation did not differ between groups (Z=-0.93, p=0.178).

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