Prefrontal cortical connectivity mediates locus coeruleus noradrenergic regulation of inhibitory control in older adults

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Abstract

Response inhibition is a core executive function enabling adaptive behaviour in dynamic

environments. Human and animal models indicate that inhibitory control and control networks

are modulated by noradrenaline, arising from the locus coeruleus. The integrity (i.e., cellular

density) of the locus coeruleus noradrenergic system can be estimated from magnetization

transfer sensitive magnetic resonance imaging, in view of neuromelanin present in noradrenergic

neurons of older adults. Noradrenergic psychopharmacological studies indicate noradrenergic

modulation of prefrontal and frontostriatal stopping-circuits in association with behavioural

change. Here we test the noradrenergic hypothesis of inhibitory control, in healthy adults. We

predicted that locus coeruleus integrity is associated with age-adjusted variance in response

inhibition, mediated by changes in connectivity between frontal inhibitory control regions. In a

preregistered analysis, we used magnetization transfer MRI images from N=63 healthy adults

aged above 50 years who performed a stop-signal task, with atlas-based measurement of locus

coeruleus contrast. We confirm that better response inhibition is correlated with locus coeruleus

integrity and stronger connectivity between pre-supplementary motor area and right inferior

frontal gyrus, but not volumes of the cortical regions. We confirmed a significant role of

prefrontal connectivity in mediating the effect of individual differences in the locus coeruleus on

behaviour, whereby this effect was moderated by age, over and above adjustment for the mean

effects of age. Our results support the hypothesis that in normal populations, as in clinical

settings, the locus coeruleus noradrenergic system regulates inhibitory control.

Keywords: Locus Coeruleus, neuromelanin, response inhibition, stop-signal task, healthy ageing,
functional connectivity.

Introduction

Response inhibition underpins the control of everyday behavior, and is impaired in many

neurological and psychiatric disorders (Passamonti, Lansdall, & Rowe, 2018). There is

converging evidence from animal models (Bari et al., 2011; Bari & Robbins, 2013; Eagle &

Baunez, 2010) and human psychopharmacology (Chamberlain et al., 2006; Chamberlain et al.,

2009; Robinson et al., 2008), that the noradrenergic system facilitates inhibitory control for

action cancellation. A prefrontal cortical network is also implicated in such response inhibition,

including the inferior frontal gyrus (rIFG) and pre-supplementary motor area (preSMA; Aron,

Robbins, & Poldrack, 2014; Chambers et al., 2006; Duann, Ide, Luo, & Li, 2009; Forstmann et

al., 2012; Frank, Scheres, & Sherman, 2007; Rae, Hughes, Anderson, & Rowe, 2015).

Cerebral noradrenergic innervation arises from the locus coeruleus, in the brainstem. By

exploiting the accumulation of iron-rich neuromelanin, magnetization-transfer (MT) sensitive

magnetic resonance imaging sequences can be used to assess the integrity of the locus coeruleus

(Liu et al 2019; Ye et al., 2020; but see also Watanabe et al., 2019). Such studies have associated

locus coeruleus integrity with diverse cognitive function in health (Liu et al., 2020) and disease

(Dahl et al., 2020; Holland, Robbins, & Rowe, 2021; O'Callaghan et al., 2021; Ye et al., 2021).

Phasic and tonic activities in the locus coeruleus have been proposed to afford behavioural

flexibility and inhibitory control (Aston-Jones & Cohen, 2005; Bouret & Sara, 2005; Dayan &

Yu, 2006; Passamonti, Lansdall, & Rowe, 2018). This might be achieved by modulation of

connectivity within the prefrontal network (Chambers et al., 2006; Duann et al., 2009; Forstmann

et al., 2012; Aron et al., 2014; Rae et al., 2015; Ye et al., 2015; Rae et al., 2016). Here, we tested

this hypothesis by linking locus coeruleus integrity to functional connectivity between rIFG and

preSMA, as a predictor of behaviour.

Previous analysis of cortical connectivity in healthy adults showed that the influence of

cortical connectivity on inhibitory control differs with age, such that efficient performance in

older adults relies more strongly on connectivity than in their younger counterparts (Tsvetanov et

al., 2018).

Moreover, sub-regions of the locus coeruleus have different projection distributions

(Mason & Fibiger, 1979; Loughlin, Foote, Bloom, 1986) with differential associations to

cognition, behaviour and pathology. For example, *in vivo* evidence suggest greater degeneration

of the caudal sub-region of the locus coeruleus compared to central and rostral sub-regions in

Parkinson's disease (O'Callaghan et al., 2021). Healthy ageing and age-related cognitive decline

are more strongly associated with changes in the rostral locus coeruleus (Betts, Cardenas-Blanco,

Kanowski, Jessen, & Düzel, 2017; Liu et al., 2020; Dahl et al., 2020).

We hypothesized that variations in the locus coeruleus integrity would drive

noradrenergic-dependent changes in inhibitory control, over and above the main effect of age on

the locus coeruleus. We tested whether such relationship would vary across locus-coeruleus sub-

regions and across different ages. In this pre-registered cross-sectional study, we used a 3-D MT

weighted MRI sequence to assess the relationship between locus coeruleus integrity *in vivo* and

test its relationship with inhibitory control in cognitively normal healthy adults from the

Cambridge Centre for Ageing and Neuroscience cohort (Cam-CAN; Shafto et al., 2014) using the

Stop-Signal Task (SST). Our study has four main advances with respect to an earlier analysis of

the Cam-CAN cohort (Liu et al., 2020). First, we use an atlas-based segmentation of the locus

coeruleus, which provides unbiased estimation, with good accuracy and reliability compared to

manual and semi-automatic segmentation approaches (Ye et al., 2021). Second, we focus on

middle-aged and older healthy adults, because neuromelanin accumulates with age (Zecca,

Youdim, Riederer, Connor, & Crichton, 2004) and in younger participants the locus coeruleus

neurons may not yet be sufficiently pigmented to allow reliable inference on structural integrity

by MT weighted MRI. Third, we follow the new consensus recommendations for estimating the

stop-signal reaction time (SSRT, Verbruggen et al.,2019), and use hierarchical Bayesian

estimation of a parametric ex-Gaussian race model of the stop-signal task which enables

isolating attentional confounds from the estimation of SSRTs (Matzke, Dolan, Logan, Brown, &

Wagenmakers, 2013). Fourth, we examine whether locus coeruleus integrity is related to

modulation of connectivity within the prefrontal stopping-network quantified by psychophysical

interactions measures that reflect response inhibition-related changes in the connectivity between

different areas (Friston et al., 1997; Tsvetanov et al., 2018).

Materials and Methods

Preregistration

78   Before data analysis, we preregistered our analyses, sample size, variables of interest, hypotheses,

79   procedures for data quality checking and data analysis procedures in the Open Science

80   Framework. The preregistered information, code and data to reproduce manuscript figures are

81   available through the Open Science Framework (<https://osf.io/zgj9n/>).

Participants

We used data from the "Stage 3" cohort in the Cambridge Centre for Aging and Neuroscience

population-based study of the healthy adult life span (See Shafto et al, 2014 for details). Within

this cohort, we focused on 114 participants (18-88years) who performed a stop-signal task during

fMRI. None of the Cam-CAN participants had a diagnosis of dementia or mild cognitive

impairment, and all scored above consensus thresholds for normal cognition on the ACE-R

(>88/100). After quality control of behavioural data and MRI scans, there were 63 datasets from

participants aged 50 years or older (see table 1 for details). Note that our primary statistical

inferences are Bayesian, where inferences are based on relative evidence for alternate models,

rather than testing a null hypothesis alone. However, for secondary frequentist statistics where

type I or type II error may arise, we computed the achieved power using G*Power 3.1. With a

nominal alpha level=0.05, N=63 provides 86% power to test the interaction (moderation) term of

a multiple linear regression with five predictors, assuming a medium-sized effect (f^2=0.15).

Table 1. Demographics

Variables	Overall
N	63
Age (median [range])	68.00 [50.00, 88.00]
Sex	33M/30F
ACE-R (median [range])	95.00 [89.00, 100.00]

Procedure

The stop-signal task assesses cognitive control systems involved in action cancellation using

stop-signal trials (n =80; approximately 50% of which were successful), randomly interleaved

among go trials (n = 360) and no-go trials (n = 40) during two consecutive scanning runs (Figure

1A). On go trials participants saw a black arrow (duration 1000ms) and indicated its direction by

pressing left or right buttons with the index or middle finger of their right hand. On stop-signal

trials, the black arrow changed color (from black to red) concurrent with a tone, after a short,

variable "stop-signal" delay (SSD). On no-go trials, the arrow was red from the outset

(i.e., SSD = 0), along with a concurrent equivalent tone. Participants were instructed to withhold

button pressing if the arrow was red or became red. The length of the SSD varied between stop-

signal trials in steps of 50ms, and was titrated to participants' performance using an on-line

tracking algorithm to target a 50% successful response cancellation. No-go trials were included

as stop trials with nominal SSD = 5ms (Matzke, Curley, Gong & Heathcote, 2019).

Figure 1. Stop-Signal task (A) and SSRTs estimated by the ex-Gaussian race model of response inhibition (B). A) In the Stop-Signal task, participants respond to the direction of a black arrow by pressing the corresponding key as accurately and as quickly as possible. Occasionally, a red arrow and a tone (stop signal) require the participants to inhibit their response. The stop signal could either appear immediately after the fixation point (no-go trials), or after a short delay (stop signal delay) that varies across trials. B) Distributions of mean SSRT and go RT. The ex-Gaussian race model depicts task performance as a race between a stop process and a go process. Successful inhibition in stop and no-go trials occurs when the stop process finishes its race before the go process. The black circles indicate the medians, the thick black segments depict the 66% quantile intervals, and the thin black segments depict the 95% quantile interval. C) Posterior predictive checks: Comparing empirical data (open circles) to simulated results from the fitted model (filled circles). Within each panel, the group-level median values are plotted separately for each response (left, right and NR - no response – when applicable) and trial type (go, stop). Please note that for Reaction Times and Accuracy, responses in stop trials correspond to commission errors, whereas for Proportion Responses, no response in go trials are omission errors. Model predictions are represented by the median (filled circles) and 95% quantile intervals (error bars) of 100 simulated participants, randomly drawn from the joint posterior distribution.

Imaging

Imaging data were acquired with a 3T Siemens TIM trio with a 32-channel head coil. For each

participant, a 3D structural MRI was acquired using a T1-weighted sequence with generalized

autocalibrating partially parallel acquisition. The adopted parameters were as follows:

acceleration factor, 2; repetition time (TR) = 2250 ms; echo time (TE) = 2.99 ms; inversion time

= 900 ms; flip angle = 9°; field of view (FOV) = 256 x 240 x 192 mm; resolution = 1 mm

isotropic; acquisition time = 4 min 32 s. For fMRI, echoplanar imaging (EPI) captured 32 slices

in sequential descending order with slice thickness of 3.7 mm and a slice gap of 20% for whole-

brain coverage. The adopted parameters were as follows: TR = 2000 ms; TE = 30 ms; flip angle

= 78°; FOV = 192 x 192 mm; resolution = 3 x 3 x 4.4 mm, with a total duration of ~ 10 min 30 s.

For preprocessing details, see Taylor et al. (2017).

Image processing followed a co-registration pipeline similar to Ye et al., 2020, with Advanced

Normalization Tools (ANTs v2.2.0) software and in-house Matlab scripts. MT images were N4

bias field corrected for spatial inhomogeneity (number of iterations at each resolution level:

50x50x30x20, convergence threshold: 1x10-6, isotropic sizing for b-spline fitting: 200) and to

skull-strip T1-w images after segmentation and reconstruction (SPM12 v7219,

www.fil.ion.ucl.ac.uk/spm/software/spm12). The resulting T1-w and pre-processed MT-weighted

images were entered into a T1-driven, crossmodality coregistration pipeline to warp the

individual MT and MT-off images to the isotropic 0.5 mm ICBM152 (International Consortium

for Brain Mapping) T1-w asymmetric template.

We created an unbiased study-specific T1-w structural template using individual skull-

stripped T1-w images from all participants (Figure 2A). Native T1-w images were first rigid and

affine transformed, and then processed with a hierarchical nonlinear diffeomorphic step at five

levels of resolution, repeated by six runs to improve convergence. The resulting T1-w group

template was then registered to the standard ICBM152 T1-w brain. Four steps of deformations

were estimated in the following order: MT-off to MT, T1-w to MT-off, T1-w to T1-w group

template and T1-w group template to ICBM152 T1-w template. The resulting parameters were

used as the roadmap for MT image standardization to the ICBM brain in one step. For co-

registration details, see Ye et al., (2020).

To facilitate accurate extraction of the locus coeruleus signal we adopted a probabilistic

locus coeruleus atlas (Ye et al., 2020) generated from ultra-high resolution 7T data accompanied

by a multi-modality co-registration pipeline. As a measure of locus coeruleus integrity, we

quantified contrast by calculating the contrast-to-noise ratio (CNR) with respect to a reference

region in the central pons (Figure 2A). A CNR map was computed voxel-by-voxel on the average

MT image for each subject using the signal difference between a given voxel (v) and the mean

intensity in the reference region ($Mean_{REF}$) divided by the standard deviation (SD_{REF}) of the

reference signals

$$CNR = \frac{v - Mean_{REF}}{SD_{REF}} \qquad (1)$$

CNR values were computed bilaterally on the CNR map by applying the independent

locus coeruleus probabilistic atlas (5% probability version to improve sensitivity). To obtain

summary indices of CNR for subsequent analyses, we extracted mean CNR values for the rostral,

middle and caudal portions of the LC, collapsing across the left and right locus coeruleus.

Voxel-based morphometry estimates of grey matter volume for rIFG and preSMA cortical

areas were extracted from functionally-defined masks previously defined in Tsvetanov et al.,

2018. For the fMRI stop-signal task-related functional connectivity we used psychophysiological

interaction measures between rIFG and preSMA as estimated in Tsvetanov et al., 2018.

Specifically, group independent components analysis (ICA) decomposed the fMRI signal into

functional components that were activated in the contrast *successful stop > unsuccessful stop*.

Then correlational psychophysiological interactions analysis was used to estimate patterns of

functional connectivity modulation between rIFG and preSMA. The resulting measure quantifies

differences in connectivity (i.e., modulation) between successful and unsuccessful action

cancellation trials within the rIFG-preSMA network (see Tsvetanov et al., 2018 for further

details).

Analyses

To infer the latency of the unobservable response inhibition (i.e., the stop-signal reaction time;

SSRT) we adopted hierarchical Bayesian estimation of a parametric race model of the stop-signal

task (Matzke, Dolan, Logan, Brown, & Wagenmakers, 2013). Accordingly, performance on the

stop-signal task is modeled as a race between three independent processes: one corresponding to

the stop process, and two corresponding to go processes that match or mismatch the go stimulus.

Successful response inhibition in stop-signal trials occurs when the stop process finishes its race

before both go processes. Correct responses on go trials, instead, require the matching go process

to finish its race before the mismatching go process. The finish time distribution of the stop

process is inferred by estimating the RT distribution of unsuccessful stop trials (i.e., signal

respond RTs; see Matzke, Dolan, Logan, Brown, and Wagenmakers, 2013 for details). The model

assumes that the finish times of the stop and go processes follow an ex-Gaussian distribution

(Heathcote et al., 2018). Thus, for each process, we described the corresponding ex-Gaussian

distribution by estimating the mean μ and standard deviation σ of its Gaussian component, and

the mean (i.e., inverse rate) τ of its exponential component.

Further, we estimated the probability that the stop and go processes failed to start, referred

to as "trigger failure" and "go failure" (Matzke, Curley, Gong, & Heathcote, 2019). These

attentional failures can be common in the stop-signal task and, if not accounted for, bias

estimation of the stop process (Band et al., 2003; Matzke et al., 2019; Skippen et al., 2019). Prior

to fitting the model, we excluded implausibly fast (< 0.25s) RTs, as well as outliers go RTs

exceeding ±2.5 standard deviations from the participant's mean (Matzke, Dolan, Logan, Brown,

& Wagenmakers, 2013; O'Callaghan et al., 2021).

We estimated the posterior distributions of the parameters using Markov Chain Monte

Carlo (MCMC) sampling. The parameters were estimated hierarchically, such that parameters for

a given participant are assumed to be drawn from corresponding group-level normal distributions.

We adopted prior distributions identical to those suggested by the model developers (Heathcote et

al., 2018), except for slightly higher prior mean values for $\mu_{\text{go-match}}$ (1.5s), $\mu_{\text{go-mismatch}}$ (1.5s) and

μstop (1s), to account for slower RT in older age (O'Callaghan et al., 2021). MCMC sampling

initially ran with 33 chains (i.e., three times the number of parameters), with thinning of every

10th sample and a 5% probability of migration. Visual inspection of the MCMC chains as well as

the potential scale reduction statistic $\hat{R}$ (less than 1.1 for all parameters; mean $\hat{R}$ across subjects

mean±sd: 1.009±0.002) were used to assess model fit convergence. After confirming

convergence, an additional 500 iterations for each chain were run to obtain a posterior

distribution for each parameter. The model's goodness of fit was confirmed by comparing the

observed data to simulated data generated from the model's posterior predictive distribution

(Figure 1C).

The SSRT was the primary outcome of interest, computed as the mean of the ex-Gaussian

finish time distribution of the stop process, which is given by $\mu_{\text{stop}} + \tau_{\text{stop}}$. We repeated this

computation for each MCMC sample to approximate a posterior distribution of SSRT. The same

approach was adopted to draw a posterior distribution of go RT ($\mu_{\text{go-match}} + \tau_{\text{go-match}}$).

We used the statistical software package R (http://www.r-project.org/), following our

preregistered analysis plan (<https://osf.io/zgj9n/>). For primary analyses we used Bayesian

statistics which enables to quantify evidence in favor of the alternate hypothesis as well as

evidence for the null hypothesis (of an absence of effect). We quantify relative evidence through

Bayes Factors (BF) and for their interpretation we adhere to consensus guidelines (Jeffreys,

1961). For completeness, we also present classical frequentist analyses with $\alpha = 0.05$ criterion for

significance.

For all the regression analyses, we included sex as a binary covariate to account for

possible sex-related differences in locus coeruleus signal (Clewett et al., 2016). We additionally

controlled for changes in grey matter volume of the rIFG and preSMA, and check that regression

assumptions are met. We include age as a continuous moderator to take into account possible

age-related changes in the reliance of response inhibition on both locus coeruleus integrity and

connectivity (Tsvetanov et al., 2018). To prevent collinearity issues, the continuous variables

forming the interaction term of regression were mean centered. Moreover, since we are focusing

on changes over and above the main effect of age on the locus coeruleus, locus coeruleus CNR

values were regressed onto age and the residuals used as predictor.

For the moderated mediation analysis, the choice of the model structure was guided by a previous

interventional study of the effect of atomoxetine on functional connectivity between preSMA and

rIFG (Rae et al., 2016, see Figure 4a for a depiction of the model). The approach allows us to

estimate the shared variance between locus-coeruleus signal and functional connectivity. The

model was tested using the PROCESS macro model 15 in R using a bootstrap approach (Preacher

and Hayes, 2004). The moderated mediation model tests for locus coeruleus-induced variability

in response inhibition (direct effect, path c), and in functional connectivity mediating the effect

on response inhibition (mediated effect, path ab). The model also tests whether the direct and

indirect (i.e., mediated) effects of locus coeruleus on response inhibition change with age (age

moderation, paths $b2$ and $c2$).

Software and Equipment

The ex-Gaussian model fitting was performed with the Dynamic Models of Choice toolbox

(Heathcote et al., 2019), implemented in R (version 4.0, R Core Team, 2019). Further statistical

analyses in R used the 'tidyverse' (Wickham et al., 2019) for data organization and visualization,

'processR' with 'lavaan' (Rosseel, 2012) packages for path analysis, and the 'BayesFactor'

(Morey et al., 2018) and 'bayestestR' (Makowski, Ben-Shachar, and Lüdecke, 2019) packages

for Bayes Factor analysis. Figures 2B, 3A, 4A were created with BioRender.com.

Results

We confirmed the task performance expectations in that (i) the group SSRT (median 161ms) and

GoRT (median 593ms) were within the range expected from the literature on related tasks, as

show in in figure 1B; (ii) Commissions error latencies were shorter than accurate GoRT,

indicative of impulsive responses, figure 1C; and (iii) errors and latencies were approximately

equal between left and right hand responses, figure 1C. The Stop signal algorithm converged on

average 57.4% accuracy (SD 12.8%). In the following sections, we relate individual differences

in performance to locus coeruleus CNR, using the 5% atlas, but note that results are qualitatively

similar using the more conservative atlas threshold of 25%.

Locus coeruleus integrity predicts individual differences in response inhibition

We tested for effects of locus coeruleus integrity (as CNR) on response inhibition (the SSRT)

using multiple linear regression (Figure 2B). The locus coeruleus integrity was associated with

faster inhibitory responses but the strength of such association diminishes with age (Figure 2C;

interaction LC CNR x age: BF_{H1} = 16.866; t_{55} = 2.993; p = 0.004). This moderation remains

significant even after controlling for loss of grey matter in preSMA and rIFG regions, crucial

components of the stopping-network (BF_{H1} = 19.068; t_{55} = 3.08; p = 0.003). No significant main

effects were observed for sex (BF_{H1} = 0.407; t_{55} = -0.767; p = 0.446) nor for volumetric

differences in the preSMA (BF_{H1} = 0.714; t_{55} = - 0.817; p = 0.417) and rIFG (BF_{H1} = 0.623; t_{55} =

0.366; p = 0.715) across subjects. To confirm that the parameter estimates of the multiple linear

regression were not driven by the excessive influence of any given participant, we calculated

Cook's distance which quantifies the influence of each data point on all parameters of the linear

model simultaneously. As a rule of thumb, a participant is deemed overly influential if their

Cook's distance exceeds 4 divided by the total number of participants (Van der Meer, Te

Grotenhuis, Pelzer, 2010). In our sample, the Cook's distance values ranged from 0 to 0.056,

within the applicable cut-off value of 4/62 = 0.64. In a further effort to ensure robustness of our

results, we re-fit the model using robust linear regression, which is less sensitive to data outliers

than the conventional ordinary least squares method. The results of the robust analysis confirmed

the results from the conventional linear regression showing a significant locus coeruleus integrity

x age interaction (t_{55} = 3.15; p = 0.0025), but no significant main effects of sex (t_{55} = - 0.618; p =

0.538) or grey volume in preSMA (t_{55} = - 0.811; p = 0.414) and rIFG (t_{55} = - 0.501; p = 0.616).

The observed moderating effect of age on the association of locus coeruleus integrity

with inhibitory control might be confounded by differences in the degree to which a participant

has "successfully aged" cognitively and maintained cognitive ability on par with early adult life

in contrast to "unsuccessfully aged" cognitively with decline in cognitive ability. To estimate this

change in cognitive ability, one can compare current fluid intelligence to crystallized intelligence.

This difference (ability discrepancy score) approximates the degree to which a participant has

sustained or changed their cognitive ability, with lower fluid than crystallized intelligence as a

marker of "unsuccessful aging" (McDonough et al., 2016). We tested for a possible role of

unsuccessful ageing by including ability discrepancy in the interaction term locus coeruleus CNR

x age, while controlling for sex and cortical volumetric changes. Bayesian analysis confirmed the

age-moderated relationship between locus coeruleus CNR and response inhibition observed in the

previous analyses (BF_{H1} = 12.580; although not significant with frequentist analysis t_{51} = 1.567; p

= 0.123). However, there was no significant main effect of ability discrepancy (BF_{H1} = 0.446; t_{51}

= -0.482; p = 0.632), nor interaction effects of ability discrepancy x age (BF_{H1} = 0.497; t_{51} =

0.071; p = 0.944), CNR x ability discrepancy (BF_{H1} = 0.775; t_{51} = 1.053; p = 0.297) , or CNR x

ability discrepancy x age (BF_{H1} = 1.753; albeit marginally significant with frequentist analysis t_{51}

= 2.017; p = 0.049). Therefore, age affects the modulatory effect of locus coeruleus integrity on

response inhibition irrespective of individuals' lifetime decline in cognitive ability.

To probe the specificity of the relationship between locus coeruleus integrity and action

cancellation, we repeated the linear regression analysis replacing SSRTs with successful *Go*

reaction times as outcome. There was evidence for slowing of Go reaction times with age (BF_{H1}

= 6.824; t_{55} = 2.714; p = 0.0088) but no evidence for a link between Go reactions times and locus

coeruleus integrity (main effect CNR: BF_{H1} = 0.366; t_{55} = 0.602; p = 0.549; interaction CNR x

age: BF_{H1} = 0.617; t_{55} = 0.904; p = 0.369).

Figure 2. A) Study specific atlas of the locus coeruleus (light blue) and reference region in the central pons (green). B-C) SSRT estimates as a function of age adjusted locus coeruleus contrast-to-noise ratio (CNR) and age group. The interaction with age is estimated as a continuous variable (see text) but binarized for visualization purposes only. D) Bayesian evidence for an association between the integrity of rostral, and caudal sub-regions of the locus coeruleus with response inhibition.

Integrity of the rostral sub-region of the locus coeruleus is associated with response inhibition.

Sub-regions of the locus coeruleus may have differential associations to cognition, behaviour and

pathology given the heterogeneity in its topographic organization. Here we estimated the

association between the integrity of sub-regions of the locus coeruleus with response inhibition.

In the pre-registered analysis plan, we proposed to fit a multiple linear regression model

including the interaction between rostral, middle, caudal subregions of the locus coeruleus and

age while controlling for sex and gray matter volume as in our previous analyses. However,

diagnostic tests indicated a strong multicollinearity in the interaction term driven by the middle

CNR (variance inflation factor > 10). We therefore deviate from the pre-registered plan for this

test, to exclude the middle sub-region from the model. The multicollinearity issue was solved

(variance inflation factor < 10) and all the linear regression assumptions (e.g., skewness, kurtosis,

heteroscedasticity) were met.

The multiple linear regression results show strong evidence for an association between

response inhibition and the rostral sub-region mediated by age (rostral CNR x age: BF_{H1} =

13.905; t_{50} = 2.735; p = 0.0086) (Figure 2D). There were no significant interaction effects for

CNR x age (BF_{H1} = 0.855; t_{50} = -1.090; p = 0.280), caudal CNR x rostral CNR (BF_{H1} = 0.607; t_{50}

= 0.715; p = 0.477) and caudal CNR x rostral CNR x age (BF_{H1} = 0.545; t_{50} = -0.272; p = 0.786)

nor for the main effects of caudal CNR (BF_{H1} = 0.658; t_{50} = -1.553; p = 0.126), sex (BF_{H1} =

0.634; t_{50} = -1.281; p = 0.206) and grey matter volume in preSMA (BF_{H1} = 1.345; t_{50} = -1.463; p

= 0.149) and rIFG(BF_{H1} = 0.824; t_{50} = -0.350; p = 0.728).

Modulation of connectivity between preSMA and rIFG predicts individual differences in response

inhibition

We tested whether the performance related connectivity (between successful and unsuccessful

stop trials) within the prefrontal stopping-network was related to individual differences in

response inhibition (SSRT), using multiple linear regression. Age moderated the relationship

between preSMA- rIFG connectivity and response inhibition (BF_{H1} = 4.644; t_{55} = 2.311; p =

0.024) (Figure 3B) qualitatively similar to the effect observed when locus coeruleus CNR was

used as predictor. There were no significant main effects for sex (BF_{H1} = 0.449; t_{55} = -0.948; p =

0.347) or volumetric grey matter differences in preSMA (BF_{H1} = 0.566; t_{55} = -0.494; p = 0.623)

and rIFG regions (BF_{H1} = 0.533; t_{55} = -0.238; p = 0.812). We confirmed robustness of our linear

regression results by examining the Cook's distance of each participant (range 0 – 0.058, below

the 0.64 threshold) as well as by showing that results were qualitatively identical when re-fitting

the data with a robust regression approach. Specifically, the robust regression results confirm a

significant Connectivity x age interaction (t_{55} = 2.754; p = 0.008) but no significant main effects

for sex (t_{55} = -0.622; p = 0.536) or grey matter volume in in preSMA (t_{55} = -0.507; p = 0.536) and

rIFG (t_{55} = -0.349; p = 0.724).

— Connectivity ····· Moderation   Age group — 50-65 — 65-88

Figure 3. A) Age moderates the influence of connectivity between the preSMA and rIFG on

response inhibition (SSRT) . B) SSRT estimates as a function of connectivity between preSMA

and rIFG. The interaction with age is estimated as a continuous variable (see text) but binarized

for visualization purposes only.

Modulation of Prefrontal connectivity partially mediates influence of locus coeruleus on response

inhibition

Next, we tested whether task-related functional connectivity mediated the variance between locus

coeruleus signal and SSRT, subject to moderation by age (Figure 4A). The direct association

between locus coeruleus and response inhibition was moderated by age (c2: standardized β =

0.817; p = 0.013). The association between connectivity and response inhibition was also

conditional on age (b2: standardized β = 0.637; p < 0.0001). A formal test of moderated

mediation based on the index term (Hayes, 2015) indicated that the effect of locus coeruleus

integrity on response inhibition was partly mediated by functional connectivity in the prefrontal

stopping-network, but this relationship changed with age (ab: coefficient of moderated mediation

= 0.00019; bootstrapped 95% CI = [0.00003, 0.00053]; p = 0.004; proportion moderated =

0.159). The moderated direct and indirect effects of locus coeruleus integrity on response

inhibition are depicted on figure 4B.

C

Moderated mediation results

Variables	Predictors	Labels	z-scores	p values	Standardized β
preSMA-rIFG connectivity	Locus coeruleus CNR	a	2.838	0.005	0.298
SSRT	preSMA-rIFG connectivity	b	-8.202	< 0.001	-0.612
SSRT	Locus coeruleus CNR	c	-2.684	0.007	-0.830
SSRT	preSMA-rIFG connectivity x Age	b2	7.154	< 0.001	0.637
SSRT	Locus coeruleus CNR x Age	c2	2.539	0.011	0.817

	Coefficient	95% Confidence interval	z-score	p value
Index of moderated mediation	0.00019	0.00003 – 0.00053	2.912	0.004

Note. SSRT = Signal stop reaction time. Bootstrap sample size = 10,000; Path labels (e.g. c) correspond to figure 4A.

382   *Figure 4.* A) *Moderated mediation model, with locus coeruleus integrity as a predictor (LC-*
383   *CNR), functional connectivity within the prefrontal stopping-network as a mediator*
384   *(Connectivity), and stop signal reaction times as an outcome (SSRT). Age was included as a*
385   *second-level moderator. B) Direct and indirect (i.e., mediated by functional connectivity) effects*
386   *of locus coeruleus integrity on response inhibition, conditional on age.*

Discussion

The principal results of this pre-registered study are that (i) individual differences in stopping

efficiency are related to the integrity of the locus coeruleus; and (ii) this effect is partially

mediated by the facilitation of connectivity within the prefrontal stopping-network. These effects

were observed in healthy adults from a population-based cohort, but moderated by age, over and

above the main effect of age on locus coeruleus integrity.

This behavioural effect is mainly associated with integrity of the rostral sub-region of the

locus-coeruleus, which preferentially targets prefrontal cortex, and is affected by healthy ageing

(Loughlin et al., 1986; Mason et al., 1979). Crucially, these effects were observed after correction

for a possible main effect of age on the locus coeruleus. Nonetheless, the influence of locus

coeruleus variability is moderated by age. Previous reports linked variation of rostral locus

coeruleus intensity to cognitive performances in healthy subjects. Preserved integrity of the

rostral locus coeruleus in healthy older adults has been associated with better cognitive function

(Manaye, McIntire, Mann, and German, 1995; Hammerer et al., 2018; Dahl et al., 2019; Liu et

al., 2020). Our results support this previous work and extend the evidence for an influence of the

locus coeruleus noradrenaline system on inhibitory control.

The influence of noradrenaline may also be understood in terms of its effect on task-

related connectivity between regions (Rae et al., 2016; Holland, Robbins, & Rowe, 2021). For

inhibitory control, connectivity between the rIFG and preSMA are of particular relevance: lesion

studies, transient interference by magnetic or electrical stimulation, and neuroimaging work

provide converging evidence that interactions between these regions are crucial for successful

response inhibition (Chambers et al., 2006; Duann et al., 2009; Forstmann et al., 2012; Aron et

al., 2014; Rae et al., 2015). We found that the effect of locus coeruleus integrity on response

inhibition is partly mediated by changes in functional connectivity between the rIFG and

preSMA. These findings reinforce previous reports on the effect of the noradrenaline reuptake

inhibitor atomoxetine on response inhibition in Parkinson's disease. For example, Rae et al

(2016) observed that in patients, connectivity between of preSMA on the rIFG was reduced, but

restored by atomoxetine. Using dynamic causal modelling, they showed that atomoxetine exerts

restored the effective connectivity between preSMA and rIFG, and increased the strength their

interacting projections to subthalamic nucleus. Our results similarly associate increased

connectivity between these two areas to enhanced response inhibition, and provide evidence that

modulation within the stopping-network is related to the integrity of the locus coeruleus, the

principal source of noradrenaline.

The influence of both locus coeruleus integrity and prefrontal stopping-network

connectivity on inhibitory control changed with age. Our results confirmed such an interaction:

higher age-adjusted integrity within the younger and middle age range (50-65 years) of healthy

adults was associated with positive modulation of the stopping-network and better inhibitory

control. This was not observed over 65 years.

Ageing is also associated with decline of other aspects of motor performance such as

psychomotor slowing and reduced fine motor skills (Salthouse, 2000; Seidler et al., 2010). A

contributor to age-related performance decline is loss of grey matter volume (Draganski, Lutti, &

Kherif, 2013) with evidence from functional neuroimaging studies for adaptive plasticity

paralleling structural decline (Tsvetanov et al., 2020). Consequently, older adults may display

more widespread brain activation, weaker segregation of local networks and weaker inter-

hemispheric connectivity (Rowe et al., 2006; Chan, Park, Savalia, Petersen, & Wig, 2014;

Geerligs, Renken, Saliasi, Maurits, & Lorist, 2014; Tsvetanov et al., 2016). Evidence to date

suggests that less segregated brain networks contribute to age-related decline in cognitive and

sensorimotor performance (Chan, Park, Savalia, Petersen, and Wig, 2014; Geerligs, Renken,

Saliasi, Maurits, and Lorist, 2014; King et al., 2017; Bethlehem et al., 2020). Indeed, similarly to

our results, analysis of cortical connectivity in the CamCAN dataset showed that stopping

efficiency in older adults relied more strongly on connectivity than in their younger counterparts

(Tsvetanov et al., 2018), in accord with preclinical studies of the effects of locus coeruleus

plasticity and connectivity (Bear & Singer, 1986; Coull, Buchel, Friston, Frith, 1999; Martins &

Froemke, 2015). Further longitudinal studies are warranted to investigate age-related changes in

the way locus coeruleus integrity and cortical connectivity impact on inhibitory control.

Our pre-registered analysis was designed to probe the association of locus coeruleus

integrity with response inhibition and differs in many respects from an earlier analysis of the

Cam-CAN cohort looking for associations of coeruleus integrity with diverse cognitive functions

(Liu et al., 2020). We focused on adults aged above 50 years, for better estimation of structural

integrity of the locus coeruleus using MT weighted MRI. This is because of the greater

neuromelanin based contrast with age (Zecca, Youdim, Riederer, Connor, & Crichton, 2004).

The locus coeruleus signal was extracted through a probabilistic atlas-based segmentation, which

provides unbiased estimation, with superior accuracy and reliability compared to the manual

segmentation approaches (Chen et al., 2014; Langley, Huddleston, Liu, & Hu, 2016; Ye et al.,

2021). These features are preferable when using 3T MRI images, where the manual segmentation

approach may be unreliable due to the relatively low signal-to-noise ratio. Next, the stop-signal

reaction time (SSRT) was estimated using a Bayesian parametric model of the stop-signal task

which isolates attentional confounds from response inhibition (Matzke, Dolan, Logan, Brown, &

Wagenmakers, 2013). These differences between studies might explain the fact that no effect of

locus coeruleus signal on the stop-signal task was observed in Liu et al (2020).

There are limitations in the current study that should be considered when interpreting the

results and need to be addressed in future studies. First, the focus on ages above 50 years reduced

sample size. Power calculations confirmed that our study was well powered for the intended

analyses (see pre-registration <https://osf.io/zgj9n/>). However, individual variability in locus

coeruleus signal increases with age (Liu et al., 2019; Ye et al, 2020). Second, our results are

based on a cross-sectional cohort. Therefore, our conclusions merely speak to the effects of age

and its correlates, as assessed across individuals, but provide no insight on the dynamic process

of individual ageing. A larger sample size including more subjects of advanced age or a

longitudinal cohort might be needed in future studies to confirm the impact of ageing on the

relationship between locus coeruleus and inhibitory control. Third, participants' cognitive

functions were screened with the ACE-R test which may lack the sensitivity to detect latent

Alzheimer's disease pathology in the older group. Notably, the regional vulnerability of locus

coeruleus neurons varies between disorders and the rostral region, which we show being related

to response inhibition, is especially vulnerable to Alzheimer's disease and latent pathology with

healthy ageing (German et al., 1992; Mason & Fibiger, 1979). Fourth, the 3T MRI images used in

the present study afford a lower signal-to-noise ratio compared to 7T scans. However, the

resulting reduced sensitivity would be expected to increase type II but not type I error. Finally,

the present work focused on the modulatory role of the locus coeruleus noradrenergic system on

action cancellation. We acknowledge that other neuromodulators, such as serotonin, can play a

crucial role in regulating forms of inhibitory control other than action cancellation (Eagle, Bari,

and Robbins 2008; Cools, Roberts, and Robbins, 2008; Ye et al. 2014; Hughes, Rittman,

Regenthal, Robbins, & Rowe 2015).

In conclusion, we show that the ability to inhibit responses relies on both the locus

coeruleus and its facilitation of connectivity within the prefrontal cortex. The locus coeruleus

integrity has different implications for inhibitory control at different ages. These findings

contribute to the broader understanding of the importance of noradrenergic systems for executive

functions in normal populations, with implications for impulsive clinical disorders.

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