**<u>Perceptual and memory neural processes underlie short and long-term</u>**

**<u>non-reinforced behavioral change</u>**

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**Studies and behavioral interventions have focused on reinforcement and**

**context change as means to influence preferences. Cue-approach training**

**(CAT) has been shown to induce preference changes lasting months, towards**

**items that were merely paired with a neutral cue and a speeded response**

**without reinforcement. We scanned 36 participants with fMRI during a passive**

**viewing task before, after and one month following CAT to study the neural**

**basis of representation and modification of preferences in the absence of**

**reinforcements. We found that enhanced visual processing in the short-term,**

**and memory processes in the long-term, underlie value change. These results**

**show for the first time a change in the neural representation of items in**

**perceptual regions immediately after training and enhanced memory**

**accessibility after 30 days. Our findings emphasize the potential of targeting the**

**process of neural representation to accomplish long-term behavioral change**

**and set the ground for new theories and clinical interventions.**

When faced with a choice between two food items, how do people make a

choice? How can choices be affected to promote well-being? Understanding how

preferences are constructed and modified is a major challenge in the research of

human behavior with broad implications, from basic science to interventions for long-

lasting behavioral change[1,2].

The basic question of how preferences are represented in the brain has been the

center of many animal and human studies alike[3–6]. These studies usually involve

decisions between different items along several dimensions and are conducted under

the assumption that decisions are made based on the comparison of subjective values

of each choice alternative[1,3,4]. Previous studies identified a network of brain regions

involved in value-based decision-making, mainly the ventromedial prefrontal cortex

(vmPFC) and orbitofrontal cortex (OFC), which are considered the regions where

values are computed and represented[4,5,7]. The striatum has been implicated in

reinforcement learning[8], habit formation[9] and decision-to-motor transform together

with the lateral prefrontal cortex[10,11].

The field of decision-making has focused mainly on two types of choice behaviors:

Goal-directed (model-based) and habit-based (model-free)[12]. In goal-directed

behavior, the value of each available option is computed and the behavior is guided

by the potential value of the outcomes. In contrast, habit-based behavior occurs when

an action is repeated and reinforced multiple times, omitting the dependency on the

potential value of the outcome. These two types of behavior involve reinforcement,

either during the evaluation (or learning) of a potential outcome or during the formation

of a habit[3]. However, in a novel and unique paradigm for behavioral change, named

cue-approach training (CAT)[13], preferences were successfully modified in the absence

of external reinforcement.

In the CAT paradigm, the mere association of images of items with a cue and a

speeded button-press response leads to preference changes lasting months following

a single training session[13,14]. This paradigm putatively affects choices through

automatic processes without external reinforcement[2] and thus allows to obtain novel knowledge on how preferences are represented and affected without external reinforcement or context change. Experiments with CAT commonly consist of three main phases: An evaluation phase to obtain initial subjective preferences for various items, a training phase and a probe phase to evaluate preferences modification with binary choices. During CAT, images of items (originally snack-food items) appear on the screen one by one, and participants are instructed to press a button as fast as they can in response to a delayed cue. Unbeknownst to participants, some of the items are consistently paired with the cue and response (these are termed 'Go items') while the rest of the items are not ('NoGo items'). In a subsequent probe phase, participants choose their preferred item for consumption between pairs of items with similar initial subjective values, in which only one was a Go item, previously paired with the cued button press. Replicated results from multiple samples[13–17] show that participants significantly choose high-value Go over high-value NoGo items. Recently Salomon et al. (2018) demonstrated that CAT can be used to change preferences towards various types of stimuli (i.e. unfamiliar faces, fractal art images and positive affective images) with different types of cues (i.e. neutral auditory, aversive auditory and visual cues)[14], showing that the underlying mechanism of the task is general. Furthermore, preferences' change has been shown to last up to six months following a single training session lasting less than one hour[14], thus endorsing the applicability of CAT as a real-world intervention.

CAT is performed on single items and thus changes preferences of individual items, later manifested in binary choice. Furthermore, its low-level nature, not involving external reinforcement or high-level executive control, provides a unique opportunity to study preference representation and modification in the brain.

Previous studies with CAT were able to predominantly shed light on the neural signature of preference change during choice. Eye-gaze data revealed that during choices, attention is drawn towards Go items more compared to NoGo items even when the Go items were not chosen[13]. Functional MRI results demonstrated an enhanced BOLD signal in the vmPFC during choices of high-value Go items alone and compared to NoGo items[13]. These results indicate enhanced value processing during choices of Go compared to choices of NoGo items, but do not reveal the mechanism of value change in the single item level. A multi-voxel pattern analysis study was also not able to point to differences induced during CAT between Go and NoGo items in perceptual, memory or valuation components[15]. Putatively, functional imaging during training was uninformative as to the source of the value changes occurring during training due to widespread co-activation of the motor and sensory systems during Go items presentations, masking potential differences of Go versus NoGo items. Moreover, no attempt has been made yet to investigate the neural mechanism of the long-term effect of CAT.

Therefore, here we introduce a novel phase to shed light on how preferences toward individual items are represented and modified in the brain. We added a passive viewing task whereby items were presented individually on the screen before and after CAT. During this task, items were individually presented on the screen without any manipulation, while participants performed a sham counting task (Fig. 1b,d). We tested the different neural responses to Go versus NoGo items after training compared to baseline, as well as one month following training compared to baseline. Regions in the brain showing plasticity after training and one month later shed light on the general mechanisms of preference representation in the brain and specifically on how non-externally reinforced training leads to robust long-lasting preference changes.

Overall, current evidence suggests that the immediate behavioral change following

CAT might involve attention modification and value enhancement[13,16]. Furthermore,

the long-lasting nature of the effect raises the possibility that memory processes are

also involved. Therefore, we hypothesized that preferences are highly dependent on

attentional and memory-related mechanisms, affecting value representation. In our

pre-registered　　　　　　　　　　　　　　　　　　　　　　　　　hypotheses

(https://osf.io/q8yct/?view_only=360ad8ba027b4a85ab56b1586d6ad6c9),　　　　we

predicted greater BOLD activity after CAT in response to high-value Go items in

episodic memory-related regions in the medio-temporal lobe, top-down attention-

related dorsal parietal cortex and prefrontal value-related regions. In addition, we

hypothesized we will replicate previous CAT results showing a significant behavioral

effect of choosing high-value Go over high-value NoGo items during probe and

increased BOLD activity in the vmPFC during choices of high-value Go items[13–18].

Results from this study will help isolate neural representation of preferences that are

not based on external rewards and lead to better behavioral change interventions.

*Figure 1.* Outline of the experimental procedures. (a) Initial preferences were evaluated using the Becker–DeGroot–Marschak (BDM) auction procedure[19]. (b) "Passive viewing", a new task in which items are individually presented on the screen, while participants passively observe them and perform a sham counting task. (c) Cue-approach training: Participants were instructed to press a button as fast as they could whenever they heard an auditory cue, and before the item disappeared from the screen. Items were presented on the screen one by one. Go items were consistently paired with the cue and button press response, while NoGo items were not. (d) The "passive viewing" task was repeated after training. (e) In the probe task, participants chose their preferred item between pairs of items with similar initial subjective preferences, one Go and one NoGo item. (f) A recognition memory task. (g) The BDM auction was repeated.

Procedures performed inside the MRI scanner (during a functional scan) are marked with an asterisk. Stages e-g were performed again in the one-month follow-up session.

## Results

### Behavioral probe results

*After CAT.* Participants (N = 36) significantly preferred Go over NoGo items in high-value probe choices (mean = 59.0%, $P$ = 0.002, one-sided logistic regression) and marginally also in low-value probe choices (mean = 56.1%, $P$ = 0.051; Fig. 2). The proportion of Go items choices was significantly higher for high-value compared to low-value items (indicating a differential effect of CAT on preference for stimuli of the two value categories, $P$ = 0.015, one-sided logistic regression). These results were predicted based on previous studies and replicated them[13–15,20].

*One-month follow-up.* One month following training (mean = 30.26 days, SD = 9.93 days, N = 27) participants significantly chose Go over NoGo items in both high-value (mean = 56.3%, $P$ = 0.032) and low-value (mean = 57.2%, $P$ = 0.026) probe trials. There was no differential effect in this session ($P$ = 0.267).

**Figure 2.** *Behavioral results of Go choices during probe. Mean proportion of trials in which participants chose Go over NoGo items are presented for high-value (dark gray) and low-value (light gray) probe pairs, for each session (session1 / follow-up). The dashed line indicates chance level of 50%, error bars represent standard error of the mean. Asterisks reflect statistical significance in a one-tailed logistic regression analysis. Asterisks above each line represent proportions higher than chance (log-odds = 0, odds-ratio = 1). Asterisks above pairs of bars represent differential effect between the two value categories; +P < 0.1, \*P < 0.05, \*\*P < 0.005.*

**Imaging results**

Behavioral results with snack food items from previous studies[13–15] and from the current study demonstrated a consistent differential pattern of the change of preferences across value level: Preferences modifications were more robust for high-value compared to low-value items. Therefore, in our imaging results, we chose to focus on the functional changes in the representation of high-value items, which had more dominant behavioral modification effect. We further tested two kinds of relations between the behavioral effect and the neural response: *Modulation across items*, meaning that the change in activity was stronger for items that were later more

preferred during the subsequent probe phase (within-participant first-level parametric

modulation); and *correlation across participants*, meaning that the change in activity

was stronger for participants that later showed a stronger behavioral effect quantified

as higher ratio of choosing high-value Go over high-value NoGo items (between-

participants group-level correlation). Finally, for a subset of three pre-hypothesized

and pre-registered regions (vmPFC, hippocampus and superior parietal lobule) we

performed a small volume correction (SVC) analysis (see online methods).

Untresholded images of all contrasts presented here can be found on NeuroVault[21]

(https://neurovault.org/collections/TTZTGQNU/)

**Passive viewing imaging results**

To investigate the functional changes in the response to the individual items following

CAT, we scanned participants with fMRI while they were passively viewing the items.

Participants completed this task before, after and one month following CAT (N = 36;

follow-up N = 27).

***After CAT*** *(Fig. 3, for description of all activations see Supplementary Table 2).* BOLD

activity while passively viewing high-value Go compared to high-value NoGo items

was increased after compared to before CAT in the left and right occipital and temporal

lobes (Fig. 3a), along the ventral visual processing pathway[22].

Results of the SVC analyses revealed enhanced BOLD activity during passive viewing

of high-value Go items after compared to before CAT in the vmPFC (Fig. 3b).

***Figure 3.** fMRI results from the passive viewing task after compared to before CAT. (a) Enhanced BOLD activity in bilateral occipito-temporal regions, for high-value Go compared to high-value NoGo items (whole-brain analysis). (b) Enhanced BOLD activity in the vmPFC in response to high-value Go items (Small volume corrected results; the mask used is presented on a dark grey brain silhouette). For description of all activations see Supplementary Table 2.*

**One-month follow-up** *(Fig. 4, for description of all activations see Supplementary Table 3).* Comparison of the BOLD activity in response to high-value Go items in the follow-up compared to before CAT did not reveal significant clusters with whole-brain correction. However, similar to the short-term change, BOLD activity in the vmPFC was found to be enhanced with SVC analyses (Fig. 4a). In addition, BOLD activity in the left orbitofrontal cortex (OFC) in response to high-value Go items was positively modulated by the choice effect across items in the follow-up compared to before CAT (whole-brain analysis; Fig. 4b). SVC analyses revealed that BOLD activity in response to high-value Go items in the right anterior hippocampus was positively modulated by the choice effect across items in the follow-up compared to before training (Fig. 4c), while BOLD activity in response to high-value Go minus high-value NoGo items in the right SPL was negatively correlated with the choice effect across participants in the follow-up compared to before training (Fig. 4d).

*Figure 4.* fMRI results from the passive viewing task in the one-month follow-up compared to before CAT. (a) Enhanced BOLD activity in response to high-value Go items in the vmPFC (small volume corrected). (b) BOLD activity in response to high-value Go items in the left OFC was positively modulated by the choice effect across items (whole-brain analysis). (c) BOLD activity in response to high-value Go items in the right anterior hippocampus was positively modulated by the choice effect across items (small volume corrected). (d) BOLD activity in response to high-value Go minus high-value NoGo items in the right SPL was negatively correlated with the choice effect across participants (small volume corrected). The masks used for the small volume correction (SVC) analyses are presented on a dark grey brain silhouette. For description of all activations see Supplementary Table 3.

Inspection of the uncorrected results (z > 2.3) revealed increased visual enhancement for high-value Go compared to high-value NoGo items in the follow-up compared to before CAT, in visual regions similar to the ones found to be enhanced after CAT. However, these clusters did not exceed statistical significance following whole-brain cluster correction and were not preregistered; therefore, we did not perform an SVC analysis for these regions.

## Probe imaging results

To investigate the functional response during choices, we scanned participants with fMRI while they completed the probe (binary choices) phase, as was done in previous studies[13,15]. Participants completed the probe task after CAT (N = 33) as well as in the one-month follow-up for the first time (N = 25).

***After CAT*** *(Fig. 5, for description of all activations see Supplementary Table 4).* BOLD activity was stronger during choices of high-value Go compared to choices of high-value NoGo items in bilateral visual regions and bilateral central opercular cortex and Heschl's gyrus (Fig. 5a). In addition, BOLD activity in the striatum while choosing high-value Go compared to high-value NoGo items after CAT was negatively correlated with the choice effect across participants (the ratio of choosing high-value Go items during probe; Fig. 5b) and negatively modulated by the choice affect across items (Fig. 5c). SVC analysis revealed that BOLD activity in the right SPL while choosing high-value Go items after CAT was negatively correlated with the choice effect across participants (Fig. 5d) and negatively modulated by the choice effect across items (Fig. 5e).

**Figure 5.** *fMRI results from the probe task after CAT: (a) Enhanced BOLD activity during choices of high-value Go compared to choices of high-value NoGo items in bilateral visual regions and bilateral central opercular cortex and Heschl's gyrus (whole-brain analysis). (b) BOLD response negatively correlated with the choice effect across participants and (c) negatively modulated by the choice effect across items, during choices of high-value Go over high-value NoGo items in the striatum as well as other regions (whole-brain analysis). (d) BOLD response negatively correlated with the choice effect across participants and (e) negatively modulated by the choice effect across items, during choices of high-value Go compared to high-value NoGo items, in the right SPL (small volume corrected). The masks used are presented on a dark grey brain silhouette. For description of all activations see Supplementary Table 4.*

**One-month follow-up** *(Fig. 6, for description of all activations see Supplementary Table 5).* BOLD activity in the precuneus, bilateral superior occipital cortex and bilateral middle and superior temporal gyrus while choosing high-value Go items in the follow-up was positively modulated by the choice effect across items (Fig. 6a). BOLD activity in the precuneus/posterior cingulate cortex (PCC) and right post-central gyrus while choosing high-value Go items in the follow-up was positively correlated with the choice effect across participants (Fig. 6b).

*Figure 6. fMRI results from the probe task in the one-month follow-up: BOLD activity*
*during choices of high-value Go items (whole-brain analyses) was (a) positively*
*modulated by the choice effect across items in the precuneus, bilateral superior*
*occipital cortex and bilateral middle and superior temporal gyrus and (b) positively*
*correlated with the choice effect across participants in the precuneus/posterior*
*cingulate cortex (PCC) and right post-central gyrus. For description of all activations*
*see Supplementary Table 5.*

## Discussion

Research of value-based decision-making and behavioral change mainly focused on

reinforcement and context change as means to change preferences[3,23,24]. The cue-

approach training (CAT) paradigm has been shown to change preferences using the

mere association of a cue and a speeded button response without external

reinforcement. The paradigm is highly replicable with dozens of studies demonstrating

the ability to change behavior for months with various stimuli and cues[13–18]. The

behavioral results obtained in the current study replicated previous studies,

demonstrating enhanced preferences towards high-valued cued (high-value Go)

compared to high-valued non-cued (high-value NoGo) items following CAT[13–18].

Importantly, CAT utilizes low-level associations to induce long-term change of

preferences at the item level, without external reinforcement or high-level self-control

mechanisms, and thus it provides a unique opportunity to study how preferences are

represented and modified in the brain at the individual item level in the absence of

reinforcement. Here we introduced a new passive viewing task to study the functional

plasticity of the response to single items before, after and one month following CAT, in order to deepen our understanding of the neural mechanisms involved in non-reinforced preferences modification, both in the short and in the long term.

Prior to data analysis, we predicted and preregistered that the underlying neural mechanisms will involve memory, attention and value-related brain regions. We found enhancement of visual processing for Go compared to NoGo items after training during passive viewing. We show for the first time that activity in high-level visual processing occipito-temporal cortex is related to subjective values without rewards. By recording eye-gaze from a sub-group of our participants during this task, we found that enhanced activity in occipito-temporal visual cortex was probably not the result of longer gaze duration on paired items (see Supplementary Data). Activity in low and high-level visual regions was previously shown to be related to value, but this activity was related to past rewards and not to subjective values[25].

We also found evidence for enhanced BOLD response in the vmPFC for cued items, after CAT and in the one-month follow-up, indicating a long-lasting value change signature[26,27] of individual items not during choice. These results reveal for the first time an item-level value change during passive viewing[25,26], in accordance with previous findings of enhanced activity in the vmPFC during binary choices of more preferred high-value Go items[13,15]. In addition, this is the first time, to the best of our knowledge, that such enhancement in value-related prefrontal regions is found one month following a behavioral change paradigm.

In the follow-up session, we further found that the long-term behavioral change was related to plasticity in memory, attention and value-related brain regions. In addition to the enhancement of activity in the vmPFC described above, the change in BOLD response to the cued Go items in the left OFC and right hippocampus was positively

modulated by the choice effect across items, meaning that activity in these regions

was stronger while viewing Go items which were chosen more during the subsequent

probe phase.

We suggest that the functional changes in the bilateral occipito-temporal visual regions

reflect modifications in the representation of the paired items[28–30], following the low-

level association of visual images with auditory cues and motor responses during

training. The bottom-up enhanced perceptual processing and representation of paired

items led to enhanced value-related processing, reflected as enhanced activity in the

vmPFC, and thus to choices of these items over non-paired items[25]. The bottom-up

enhanced short-term perceptual processing enhancement affected the encoding and

accessibility of paired items and their related associations in memory for the long-term.

This suggests why in the one-month follow-up, visual processing was enhanced to a

lesser extent, while memory-related processes drove the long-term behavioral effect.

In addition to these results, the change in BOLD response in the long-term (follow-up

greater than before CAT) in the right SPL was negatively correlated with the choice

effect across participants; i.e. participants with overall greater behavioral change

demonstrated reduced change of BOLD response to high-value Go items in this

region. Although the SPL was one of our pre-hypothesized regions, we expected a

positive relation between the behavioral effect and the change of activity in this region.

This finding might indicate less involvement of top-down attention mechanisms during

passive viewing of Go compared to NoGo items[31].

We further compared BOLD response during choices of paired versus non-paired

items during the probe phase. BOLD response was enhanced mainly in visual and

auditory related regions in the occipital and temporal lobes. This strengthens the

finding of enhanced perceptual processing of paired items during passive viewing by

indicating that visual, as well as auditory processing, are also enhanced during choices of paired over non-paired items. These findings suggest that bottom-up processing is putatively driving the short-term enhanced preferences towards Go items. Furthermore, activity in the right SPL during choices of paired items was negatively modulated by the choice effect across items as well as negatively correlated with the choice effect across participants (though in a more posterior and inferior region), indicating that top-down attentional mechanisms were less involved during choices of Go compared to choices of NoGo items[31]. Activity in the striatum, a region known to be involved in reinforcement learning and habit-based learning[9,32], was also negatively correlated with choices of paired over non-paired items, both in a parametric modulation across items (mainly in the right putamen) as well as a correlation with the behavioral effect across participants (mainly in the left caudate). These findings potentially suggest that cue-approach training shifted the process of goal-directed decision-making during binary choices to be more automatic and based on non-reinforced mechanisms. Although previous studies included fMRI during the probe phase, this is the first study with CAT to observe this effect in the striatum and thus it remains to be replicated in future studies[13,15]. In the follow-up session, choices of paired compared to non-paired items were related to enhanced BOLD activity in the precuneus and posterior cingulate cortex (PCC), which have been related to episodic memory retrieval (and are also considered to be part of the default mode network)[33–37], for participants that had a stronger behavioral effect and for items toward which preferences were more enhanced. This again demonstrates the central role of memory processes in the long-term behavioral change.

Overall, results obtained from the fMRI data during binary choices showed a similar pattern to those obtained during passive viewing: Enhanced perceptual processing in

the short-term and involvement of episodic memory processes in the long-term. We

were not able to replicate previous results of enhanced activity in the vmPFC during

choices of paired items, modulated by the number of choices of each item during probe

(modulation across items)[13,15]. These previous results were found for high-value Go

items when the group's behavioral effect of choosing high-value Go over high-value

NoGo items was significant but weak relative to other samples (study 3 in Schonberg

et al., 2014[13]). Similar results were found for choices of low-value Go compared to

choices of low-value NoGo items when the behavioral effect was strong for high-value

items and weak for low-value items[15]. Therefore, a possible explanation for the lack of

replication of these findings in the current study is that this contrast of modulation

across items depends on the variance of the choice effect across items, which seems

to be smaller here compared to previous samples that found this effect.

Related to this potential issue of variance is the fact that the CAT effect is a group

effect. Not all participants choose paired over non-paired items following training, and

there is a considerable variance across participants. In addition, training is performed

on the individual item level, and thus preferences are affected only for some but not

all paired items. The CAT effect at the one-month follow up was relatively weak. This

might explain why our findings immediately after CAT were found in contrasts testing

for main effects across all high-valued paired items, whereas results from the one-

month follow-up were obtained mainly in parametric modulation of choices across

items (within participants). Since the long-term behavioral effect was weaker than the

effect in the short-term, the variance across items was larger and enabled us to find

differences in the response to different items in the follow-up session.

The behavioral change of preferences in the one-month follow-up was relatively weak

in the current study, although the behavioral effect was found to last for up to six

months in previous studies[13,14]. This may be a side-effect of the new passive viewing

task which was completed before, after and one month after training. In this task, items

are presented on the screen without cues or motor responses. The task is completed

three times before the follow-up probe (choice) phase, which might cause partial

extinction of the item-cue pairing established during training. In accordance with the

marginally significant behavioral follow-up effect, the visual enhancement during

passive viewing of paired compared to non-paired items was also present in the one-

month follow-up (but only with z>2.3 uncorrected), but did not exceed statistical

significance following cluster-based correction for multiple comparisons.

Our results suggest that in the short-term, perceptual processing is enhanced beyond

all paired items, while in the long-term, the effect persists only for some of the items,

and thus the overall behavioral effect is weaker and the neural changes are for specific

items, these that elicited stronger response in memory-related regions, and not for all

paired items. Furthermore, in the follow-up session we also found a negative

correlation between the change of activity and the behavioral effect across participants

(a group level correlation) in the parietal lobe. Since this correlation is not item-specific,

but participant-specific, it informs us about the neural changes that were stronger for

participants that were more affected by CAT.

Up until the current study it was not clear what is the mechanism underlying the CAT

effect, unexplained by current value-based decision-making theories. How are

preferences represented in the brain and why such a simple training changes them for

the long-term? Based on the findings of the current study, we suggest that low-level

association-based paradigms, such as CAT, affect the neural representation of

targeted individual items and draw bottom-up attention (manifested in previous studies

with eye-gaze during binary choices[13]) towards them (although probably less top-down

attention). In the short-term, the enhanced bottom-up processing of individual Go

items leads to enhanced preferences towards them when a fast binary choice is

required (and with less top-down attention during these choices). In the long-term,

enhanced perceptual processing and attention affected encoding and accessibility of

these items in memory. During choices, positive associations in favor of the more

accessible paired items accumulates faster to choices[38].

A previous influential review proposed a framework for studying the neurobiology of

value-based decision-making[3]. They divided the decision-making process into five

main computations: Representation, valuation, action selection, outcome evaluation

and learning. Regarding the representation stage, they stated that "unfortunately, little

is known about the computational and neurobiological basis of this step". Previous

research of the representation stage has mainly focused on reinforcement learning

(e.g. Wilson and Niv, 2012[39]). Our findings emphasize the importance of the

representation stage and the necessity of studies investigating the representation of

choice alternatives and its relation to preferences. Moreover, our findings with CAT

highlight the potential of utilizing this process in order to accomplish long-term

behavioral change. Finally, they highlight the importance of memory in the

construction and modification of preferences[38,40].

Gaining knowledge on the representation stage of decision-making and on non-

reinforced change of preferences has great potential as a fruitful path for new theories

relating neural mechanisms such as perceptual processing, memory and attention to

preferences. It also holds great promise for new long-term behavioral change

interventions based on automatic mechanisms, which might improve the quality of life

for people around the world.

**Methods**

**Data sharing.** Behavioral data and codes are available at the Open Science Framework: https://osf.io/ts7b5/?view_only=c867c80179264ae5874af3d26ec39914. Imaging data is available in Brain Imaging Data Structure (BIDS) format[41] at OpenNeuro: https://openneuro.org/datasets/ds001417. Unthresholded statistical images are available at NeuroVault[21]: https://neurovault.org/collections/TTZTGQNU/.

**Participants**. Forty healthy right-handed participants took part in this experiment. The sample size was chosen before data collection and pre-registered during data collection (https://osf.io/kxh9y/?view_only=4476c6fd74a84f0eb5a893df7e46700a). We initially planned to collect n = 35 participants based on previous imaging CAT samples and based on predicted 10% attrition for the one-month follow-up. However, during data collection we realized attrition rates are higher than expected, thus the planned sample size was increased to n = 40 (before exclusions and attrition), and re-pre-registered. The total number of participants included in the final analyses of the first session is 36 (19 females, age: mean = 26.11, SD = 3.46 years). Twenty-seven participants completed the follow up session (15 females, age: mean = 26.15, sd = 3.44 years).

*Exclusions.* A total of four participants were excluded: One participant due to incompletion of the experiment, one based on training exclusion criteria (7.5% false alarm rate during training) and two participants with incidental brain findings.

All participants had normal or corrected-to-normal vision and hearing, no history of eating disorders or psychiatric, neurologic or metabolic diagnoses, had no food restrictions and were not taking any medications that would interfere with the experiment. They were asked to refrain from eating for four hours prior to arrival to the

laboratory[13]. All participants gave informed consent. The study was approved by the

institutional review board at the Sheba Tel Hashomer Medical Center and the ethics

committee at Tel Aviv University.

**Stimuli**: Sixty color images of familiar local snack food items were used in the current

experiment. Images depicted the snack package and the snack itself on a

homogenous black rectangle sized 576 x 432 pixels (see Supplementary Table 1;

Stimuli dataset was created in our lab and is available online at

http://schonberglab.tau.ac.il/resources/snack-food-image-database/).  All snack food

items were also available for actual consumption at the end of the experiment.

Participants were presented with the real food items at the beginning of the experiment

in order to promote incentive compatible behavior throughout the following tasks.

**Experimental procedure:** The general task procedure was similar to previous studies

with CAT[13,14]. In order to test for functional changes of the neural response to the

individual items following CAT, we added a new passive viewing task before, after and

one month following training.

First, we obtained the subjective willingness to pay (WTP) of each participant for each

of the 60 snack food items using a Becker-DeGroot-Marschak (BDM) auction

procedure, performed outside the MRI scanner (see Fig. 1a,g)[19,42]. Then, participants

entered the scanner and completed two "passive viewing" runs while scanned with

fMRI (see Fig. 1b,d), followed by anatomical and diffusion-weighted imaging (DWI)

scans. Afterwards, participants went out of the scanner and completed cue-approach

training (CAT) in a behavioral testing room at the imaging center (see Fig. 1c). They

then returned to the scanner and were scanned again with anatomical and DWI. Then,

they were scanned with fMRI while performing two more runs of the "passive viewing"

task and four runs of the probe phase, during which they chose between pairs of items

(see Fig. 1e). Finally, participants completed a recognition task outside the scanner

(see Fig. 1f), during which they were presented with snack items that appeared in

previous parts of the experiment, as well as new items, and were asked to indicate for

each item whether it was presented during the experiment and whether it was paired

with the cue during training. As the last task during the first day of scanning, they again

completed the BDM auction to obtain their WTP for the snacks.

*Follow-up session*. Approximately one month after the first day of the experiment,

participants returned to the lab. They entered the scanner, were scanned with

anatomical and DWI scans and completed two "passive viewing" runs as well as

another probe phase (without additional training). Finally, participants completed the

recognition and BDM auction parts, outside the scanner.

Anatomical and diffusion-weighted imaging data were obtained for each participant

before, immediately after and one month following training. Analyses of diffusion data

are beyond the scope of this paper.

*Initial preferences evaluation* (see Fig. 1a,g). In order to obtain initial subjective

preferences, participants completed a BDM auction procedure[19,42]. Participants first

received 10 Israeli Shekels (ILS; equivalent to ~2.7$ US). During the auction, 60 snack

food items were presented on the screen one after the other in random order. For each

item, participants were asked to indicate their willingness to pay (WTP) for the

presented item. Participants placed their bid for each item using the mouse cursor

along a visual analog scale, ranging from 0-10 ILS (task was self-paced). Participants

were told in advance that at the end of the experiment, the computer will randomly

generate a counter bid ranging between 0 - 10 ILS (with 0.5 increments) for one of the

sixty items. If the bid placed by the participant exceeds the computer's bid, she or he

will be required to buy the item for the computer's lower bid price. Otherwise, the

participant will not be allowed to buy the snack but gets to retain the allocated 10 ILS.

Participants were told that at the end of the experiment, they will stay in the room for

30 minutes and the only food they will be allowed to eat is the snack (in case they

"won" the auction and purchased it). Participants were explicitly instructed that the

best strategy for this task was to indicate their actual WTP for each item.

*Item selection*. For each participant, items were rank ordered from 1 (highest value) to

60 (lowest value) based on their WTP. Then, 12 items (ranked 7-18) were defined as

high-valued items to be used in probe, and 12 items (ranked 43-54) were defined as

low-valued items to be used in probe. Each group of twelve items (high-value or low-

value) was split to two sub groups with identical mean rank. Six of the 12 items were

chosen to be paired with the cue during training (Go items; training procedures are

described in the following sections), and the other six were not paired with the cue

during training (NoGo items). This allowed us to pair high-value Go and high-value

NoGo items, or low-value Go with low-value NoGo items, with similar initial WTPs, for

the probe binary choices. To maintain 30% frequency of Go items during training

(similar to previous studies with CAT[13–15,18]), we used 16 more NoGo items that were

also used during training and passive viewing (40 snacks overall; see *Supplementary*

*Fig. 1* for a detailed description of all stimuli allocation).

*Passive viewing* (*see Fig. 1b,d*). The task was performed inside the scanner, while

participants were scanned with fMRI. This new task was introduced to evaluate the

functional changes in the response to the individual items following CAT. The neural

signature of the participants' response to each of the individual items was obtained in

three different time points: A baseline measurement before CAT, after CAT and in a

one-month follow-up. In this task, participants passively viewed a subset of 40 items,

which were presented in the training procedure (see *item selection* section and

*Supplementary Fig. 1*). The task consisted of two runs (in each session). On each run,

each of the 40 items was presented on the screen for a fixed duration of two seconds,

followed by a fixed inter-stimulus interval (ISI) of seven seconds. Items were presented

in random order. To ensure participants were observing and processing the presented

images, we asked them to perform a sham task of silently counting how many items

were of snacks containing either one piece (e.g. a 'Mars' chocolate bar) or several

pieces (e.g. a 'M&M' snack) in a new package. At the end of each run, participants

were asked how many items they counted. Task instructions (count one / several)

were counterbalanced between runs for each participant. The time elapsed between

the two runs before training and two runs after training was about two hours (including

cue-approach training, anatomical and diffusion weighted scans before and after

training and time to exit and enter the scanner).

*Cue-approach training* (see *Fig. 1c*)**.** Training was performed outside the scanner. The

training task included the same 40 items presented in the passive viewing task. Each

image was presented on the screen one at a time for a fixed duration of one second.

Participants were instructed to press a button on the keyboard as fast as they could

when they heard an auditory cue, which was consistently paired with 30% of the items

(Go items). Participants were not informed in advance that some of the items will be

consistently paired with the cue, or the identity of the Go items. The auditory cue

consisted of a 180ms-long sinus wave function. The auditory cue was heard initially

750ms after stimulus onset (Go-signal delay, GSD). To ensure a success rate of

around 75% in pressing the button before stimulus offset, we used a ladder technique

to update the GSD. The GSD was increased by 16.67ms following every successful

trial and decreased by 50ms if the participant did not press the button or pressed it

after the offset of the stimulus (1:3 ratio). Items were followed by a fixation cross that

appeared on the screen for a jittered ISI with an average duration of two seconds

(range 1-6 seconds). Each participant completed 20 repetitions of training, each

repetition included all 40 items presented in a random order. A short break was given

following every two training repetitions, in which the participants were asked to press

a button when they were ready to proceed. The entire training session lasted about

40-45 minutes, depending on the duration of the breaks, which were controlled by the

participants.

**Probe** (see *Fig. 1e*). Probe was conducted while participants were scanned with fMRI.

The probe phase was aimed to test participants' preferences following training.

Participants were presented with pairs of items that had similar initial rankings (high-

value or low-value), but only one of the items in each pair was associated with the cue

during training (e.g. high-value Go vs. high-value NoGo). They were given 1.5 seconds

to choose the item they preferred on each trial, by pressing one of two buttons on an

MRI-compatible response box. Their choice was highlighted for 0.5 second with a

green rectangle around the chosen items. If they did not respond on time, a message

appeared on the screen, asking them to respond faster. A fixation cross appeared at

the center of the screen between the two items during each trial, as well as during the

ISI, which lasted on average three seconds (range 1-12 seconds).

The probe phase consisted of two blocks. On each block, each of the six high-value Go items were compared with each of the six high-value NoGo items (36 comparisons), as well as each of the six low-value Go items with each of the six low-value NoGo items. Thus, overall there were 72 pairs of Go-NoGo comparisons (each repeated twice during probe, once on each block). In addition, on each block we compared each of two high-value NoGo items versus each of two low-value NoGo items, resulting in four probe pairs that were used as "sanity checks" to ensure participants chose the items they preferred according to the initial WTP values obtained during the BDM auction. Each probe block was divided to two runs, each consisted of half of the total 76 unique pairs (38 trials on each run). All pairs within each run were presented in a random order, and the location of the items (left/right) was also randomly chosen. Choices during the probe phase were made for consumption to ensure they were incentive-compatible. Participants were told that a single trial will be randomly chosen at the end of the experiment and that they will receive the item they chose on that specific trial. The participants were shown the snack box with all snacks prior to the beginning of the experiment.

**Recognition** (see *Fig. 1f*). Participants completed a recognition task, were the items from the probe phase, as well as new items, were presented on the screen one by one and they were asked to indicate for each item whether or not it was presented during the experiment and whether or not it was paired with the cue during training. Analysis of this task is beyond the scope of this paper.

**One-month follow–up session.** All participants were invited to the follow-up session approximately one month after training. A subset of 27participants returned to the lab

and completed the follow-up session. They were scanned with anatomical and

diffusion protocols, completed two passive viewing runs and performed another probe

while scanned with fMRI protocols, similar to the first session. In the follow-up session,

the probe included the same pairs as the probe of the first session, presented in a new

random order. Afterwards, participants completed another session of the recognition

task and a third BDM auction, both outside the scanner in the testing room.

**Behavioral analysis of the probe phase**. Similar to previous studies using cue-

approach task[13,14], we performed a repeated-measures logistic regression to compare

the odds of choosing Go items against chance level (log-odds = 0; odds ratio = 1) for

each trial type (high-value / low-value). We also compared the ratio of choosing the

Go items between high-value and low-value pairs. These analyses were conducted

for each session separately.

**MRI acquisition.** Imaging data were acquired using a 3T Siemens Prisma MRI

scanner with a 64-channel head coil, at the Strauss imaging center on the campus of

Tel Aviv University. Functional data were acquired using a T2*-weighted echo planer

imaging sequence. Repetition time (TR) = 2000ms, echo time (TE) = 30ms, flip angle

(FA) = 90°, field of view (FOV) = 224 × 224mm, acquisition matrix of 112 × 112. We

positioned 58 oblique axial slices with a 2 × 2mm in plane resolution 15° off the anterior

commissure-posterior commissure line to reduce the frontal signal dropout[43], with a

space of 2mm and a gap of 0.5mm to cover the entire brain. We used a multiband

sequence[44] with acceleration factor = 2 and parallel imaging factor (iPAT) = 2, in an

interleaved fashion. Each of the passive viewing runs consisted of 180 volumes and

each of the probe runs consisted of 100 volumes. In addition, in each scanning session

(before, after and one month following training) we acquired high-resolution T1w

structural images using a magnetization prepared rapid gradient echo (MPRAGE)

pulse sequence (TR = 1.75s, TE = 2.59ms, FA = 8°, FOV = 224 × 224 × 208mm,

resolution = 1 × 1 × 1mm for the first five participants; TR = 2.53s, TE = 2.88ms, FA =

7°, FOV = 224 × 224 × 208mm, resolution = 1 × 1 × 1mm for the rest of the sample.

Protocol was changed to enhance the T1w contrast and improve registration of the

functional data to the standard space).

**fMRI preprocessing**: Raw imaging data in DICOM format were converted to NIfTI

format with dcm2nii tool[45]. The NIfTI files were organized according to the Brain

Imaging Data Structure (BIDS) format v1.0.1[41]. Preprocessing of the functional

imaging data was performed using fMRIprep version 1.0.0-rc8[46], a Nipype[47,48] based

tool. Each T1 weighted volume was corrected for bias field using

N4BiasFieldCorrection v2.1.0[49] and skull stripped using antsBrainExtraction.sh v2.1.0

(using OASIS template). Cortical surface was estimated using FreeSurfer v6.0.0[50].

The skull stripped T1 weighted volume was coregistered to skull stripped ICBM 152

Nonlinear template version 2009c[51] using nonlinear transformation implemented in

ANTs v2.1.0[52]. Functional data were motion corrected using MCFLIRT v5.0.9[53]. This

was followed by co-registration to the corresponding T1 weighted volume using

boundary based registration with nine degrees of freedom, implemented in FreeSurfer

v6.0.0[54]. Motion correcting transformations, T1 weighted transformation and MNI

template warp were applied in a single step using antsApplyTransformations v2.1.0

with Lanczos interpolation. Three tissue classes were extracted from the T1 weighted

images using FSL FAST v5.0.9[55]. Voxels from cerebrospinal fluid and white matter

were used to create a mask in turn used to extract physiological noise regressors

using aCompCor[56]. Mask was eroded and limited to subcortical regions to limit overlap

with grey matter, and six principal components were estimated. Framewise

displacement (FD)[57] was calculated for each functional run using Nipype

implementation. For more details of the pipeline using fMRIprep

see http://fmriprep.readthedocs.io/en/1.0.0-rc8/workflows.html. We created confound

files (tsv format) for each scan (each run of each task of each session of each

participant), with the following columns: standard deviation of the root mean squared

(RMS) intensity difference from one volume to the next (DVARS), absolute DVARS

values, voxelwise standard deviation of DVARS values and six motion parameters

(translational and rotation, each in three directions). We added a single time point

regressor (a single additional column) for each volume with FD value larger than 0.9,

in order to model out volumes with extensive motion. Scans with more than 15%

scrubbed volumes were excluded from analysis, resulting in one excluded participant

from the analysis of the first session's probe task.

**fMRI analysis.** Imaging analysis was performed using FEAT (fMRI Expert Analysis

Tool) v6.00, part of FSL (FMRIB's Software Library)[58] v5.0.10.

*Univariate imaging analysis - passive viewing:* The functional data from the passive

viewing task were used to examine the functional changes underlying the behavioral

change of preferences following CAT in the short and long-term. We used a general

linear model (GLM) with 13 regressors: Six regressors modelling each item type (high-

value Go, high-value NoGo, high-value sanity, low-value Go, low-value NoGo and low-

value sanity); six regressors with the same onsets and duration, and a parametric

modulation by the mean-centered proportion of trials each item was chosen in the

subsequent probe phase (the number of trials each item was chosen during the

subsequent probe divided by the number of probe trials including this item, mean-

centered) and one regressor for all items with a parametric modulation by the mean-

centered WTP values acquired from the first BDM auction. These 13 regressors were

convolved with the canonical double-gamma hemodynamic response function, and

their temporal derivatives were added to the model. We further included at least nine

motion regressors as confounds, as described above. We estimated a model with the

above described GLM regressors for each passive viewing run of each participant in

a first level analysis.

In the second level analysis (fixed effects), runs from the same session were averaged

and compared to the other session. Two second level contrasts were analyzed

separately: after compared to before CAT and follow-up compared to before CAT.

All second level analyses of all participants from after minus before or from follow-up

minus before CAT were then inputted to a group level analysis (mixed effects), which

included two contrasts of interest: One with the main effect (indicating group mean)

and one with the mean centered probe effect of each participant (the demeaned

proportion of choosing Go over NoGo items during the subsequent probe in the

relevant pair type, i.e. either high-value, low-value or all probe pairs). The second

contrast was used to test the correlation between the fMRI activations and the

behavioral effect across participants (correlation with the behavioral effect across

participants).

All reported group level statistical maps were thresholded at Z > 2.3 and cluster-based

Gaussian Random Field corrected for multiple comparisons at the whole-brain level

with a (corrected) cluster significance threshold of $P = 0.05$[59].

Since we only found a behavioral effect for high-value items (similar to previous cue-

approach samples with snack food items[13,14]), we focused our analyses on the

contrasts for high-value items: high-value Go items, high-value Go items modulated

by choice and high-value Go minus high-value NoGo items.

*Univariate imaging analysis - probe:* Imaging analysis of the probe data was similar to

previous imaging studies with CAT[13,15]. We included 16 regressors in the model (in

addition to at least nine motion regressors), based on the initial value of the probe pair

(high / low) and the choice outcome (participant chose the Go / NoGo item), resulting

in four regressors (high-value chose Go / high-value chose NoGo / low-value chose

Go / low-value chose NoGo) without parametric modulation; the same four regressors

with a parametric modulation across items by the mean-centered proportion of choices

of the specific item during the entire probe phase; the same four regressors with a

parametric modulation  by the WTP difference between the two presented items; one

regressor for all "sanity-check" trials; one regressor for all missed trials; and two

regressors accounting for response time differences (one regressor with a modulation

of the demeaned response time across trials for each value category).

Since our behavioral effect was stronger for high-value items (similar to previous cue-

approach samples with snack food items), we focused our analysis on the contrasts

for high-value chose Go, high-value chose Go modulated by choice and high-value

chose Go minus high-value chose NoGo. Similar to analyses of the passive viewing

task, we estimated a first level GLM for each run of each participant. We then averaged

the four runs of each probe (after / follow-up) of each participant in a second-level

analysis. Finally, we ran a group level analysis as described above, with one contrast

for the mean group effect and one contrast for the demeaned probe effect across

participants (correlation with the behavioral effect across participants).

Some of the probe runs were excluded from the imaging analysis because one of the regressors was empty or because the parametric modulator of Go item choices was zeroed out, resulting in a rank-deficient design matrix. This happened, for example, when a participant chose high-value Go over high-value NoGo items on all trials of a specific run. Participants who did not have at least one full valid block (out of two probe blocks, each probe including one presentation of each probe pair) without any empty regressors or zeroed modulators for Go items, were excluded from the probe imaging analysis (i.e. not included in the second level analysis of the specific participant). In order to minimize the number of excluded runs and participants, we did not exclude runs or participants due to a zeroed modulator of NoGo items choices, but rather decided not to use the contrasts including modulation by choice of trials where NoGo items were chosen. Overall, one participant was excluded from the imaging analysis of the probe from both the after and follow-up sessions and two more were excluded each from one of the sessions, based on regressors causing rank-deficient matrices (in addition to the one participant that was excluded from the first session due to excessive motion, as described above). Thus, a total of 33 (out of 36) participants were included in the imaging analysis of the probe after training (out of which for 28 participants no run was excluded, for four participants one run was excluded and for one participants two runs- one block- were excluded), and 25 (out of 27) participants were included in the imaging analysis of the follow-up probe (out of which for 21 participants no run was excluded and for four participants one run was excluded).

Small volume correction (SVC) analysis - passive viewing: We pre-hypothesized (and pre-registered) that value, attention and memory-related regions will be involved in the behavioral change following CAT: Prefrontal cortex, dorsal parietal cortex and medial-

temporal lobe, respectively (https://osf.io/6mysj/). Thus, in addition to the whole-brain

analyses described above for the passive viewing and probe task, we ran similar group

level analyses once for each of these pre-hypothesized regions (bilateral

hippocampus, bilateral SPL and vmPFC), with a mask containing the voxels which

were part of the region. All masks were based on the Harvard-Oxford atlas (see

*Supplementary Fig. 2*), anatomical regions for the vmPFC mask were based on those

used in previous CAT papers[13,15].

**Pre-registration of analysis plan**. Our analysis plan was pre-registered

(https://osf.io/x6hsq/?view_only=d3d59209e1704f97bc044b7aa6eb6fd2) prior to final

full analyses.

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**Author contributions**

R.B.N. and T.Sc. designed the experiment, R.B.N. and T.Sa. collected the data,

R.B.N., T.Sa. and T.Sc analyzed the data, and R.B.N., T.Sa. and T.Sc. discussed

the results and wrote the paper.

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