

# 1 Regional Striatal Cholinergic Involvement 2 in Human Behavioural Flexibility

3 Role of human striatal choline in reversal learning

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## 30 ABSTRACT

31 Animal studies have shown that the striatal cholinergic system plays a role in behavioural flexibility  
32 but, until recently, this system could not be studied in humans due to a lack of appropriate non-  
33 invasive techniques. Using proton magnetic resonance spectroscopy ( $^1\text{H-MRS}$ ) we recently showed  
34 that the concentration of dorsal striatal choline (an acetylcholine precursor) changes during reversal  
35 learning (a measure of behavioural flexibility) in humans. The aim of the present study was to  
36 examine whether regional average striatal choline was associated with reversal learning. 36  
37 participants (mean age = 24.8, range = 18-32, 20 female) performed a probabilistic learning task  
38 with a reversal component. We measured choline at rest in both the dorsal and ventral striatum  
39 using  $^1\text{H-MRS}$ . Task performance was described using a simple reinforcement learning model that  
40 dissociates the contributions of positive and negative prediction errors to learning. Average levels of  
41 choline in the dorsal striatum were associated with performance during reversal, but not during  
42 initial learning. Specifically, lower levels of choline in the dorsal striatum were associated with a  
43 lower number of perseverative trials. Moreover, choline levels explained inter-individual variance  
44 in perseveration over and above that explained by learning from negative prediction errors. These  
45 findings suggest that the dorsal striatal cholinergic system plays an important role in behavioural  
46 flexibility, in line with evidence from the animal literature and our previous work in humans.  
47 Additionally, this work provides further support for the idea of measuring choline with  $^1\text{H-MRS}$  as  
48 a non-invasive way of studying human cholinergic neurochemistry.

## 49 SIGNIFICANCE STATEMENT

50 Behavioural flexibility is a crucial component of adaptation and survival. Evidence from the animal  
51 literature shows the striatal cholinergic system is fundamental to reversal learning, a key paradigm  
52 for studying behavioural flexibility, however, this system remains understudied in humans. Using  
53 proton magnetic resonance spectroscopy, we showed that choline levels at rest in the dorsal striatum  
54 are associated with performance specifically during reversal learning. These novel findings help to  
55 bridge the gap between animal and human studies by demonstrating the importance of cholinergic  
56 function in the dorsal striatum in human behavioural flexibility. Importantly, the methods described  
57 here can not only be applied to furthering our understanding of healthy human neurochemistry, but  
58 also to extending our understanding of cholinergic disorders.

## 59 INTRODUCTION

60 Acetylcholine (ACh) plays an important role in adaptive behaviour, and has been implicated in  
61 disorders of cognitive flexibility, such as Parkinson's disease (Tanimura et al., 2018; Zucca et al.,  
62 2018). Studies in rodents have repeatedly demonstrated that ACh transmission, determined by the  
63 activity and regulation of cholinergic interneurons in the dorsal striatum (DS), is involved in  
64 reversal learning and similar forms of behavioural flexibility (Ragozzino et al., 2002, 2009; Tzavos  
65 et al., 2004; McCool et al., 2008; Brown et al., 2010; Bradfield et al., 2013; Aoki et al., 2018;  
66 Okada et al., 2018). Further, ACh efflux has been shown to increase specifically during reversal  
67 learning (but not during initial learning), and this effect is specific to the dorsomedial striatum (with  
68 no changes in ACh levels in either the dorsolateral striatum or the ventral striatum) (Ragozzino et  
69 al., 2009). It is clear then that cholinergic activity in the DS plays an important role in reversal  
70 learning but, despite the importance of understanding this system, there remain important  
71 challenges in probing ACh function in humans due to a lack of appropriate non-invasive techniques.  
72 Proton magnetic resonance spectroscopy ( $^1\text{H-MRS}$ ) is a non-invasive method for measuring brain  
73 metabolites *in vivo* (Puts and Edden, 2012). Although it cannot be used to study ACh directly due to  
74 its low concentration (Hoover et al., 1978),  $^1\text{H-MRS}$  can be used to measure levels of certain  
75 choline containing compounds (CCCs) involved in the ACh cycle, including choline (CHO). CHO  
76 is the product of ACh hydrolysis, and its uptake in cholinergic terminals is the rate-limiting step in  
77 ACh biosynthesis (Lockman and Allen, 2002). Using functional  $^1\text{H-MRS}$  we previously  
78 demonstrated task-driven changes in the concentration of CHO in the human DS during reversal  
79 learning (Bell et al., 2018). Although  $^1\text{H-MRS}$  studies typically model CCCs as a single peak due to  
80 their proximity on the spectrum, we showed that using this method may mask CHO-specific effects.  
81 Therefore, in the context of studying ACh function, it is necessary to separate the metabolites when  
82 measuring individual differences in CHO levels (Lindner et al., 2017; Bell et al., 2018).

83 Among the many open questions around this approach is the nature of the relationship between  
84 baseline levels of CHO availability and function-relevant ACh activity. Animal studies have shown  
85 that ACh synthesis is tightly coupled to CHO availability. For example, depletion of CHO has been  
86 shown to reduce ACh synthesis (Jope, 1979) and administration of CHO has been shown to increase  
87 it (Koshimura et al., 1990). Further, overexpression (Holmstrand et al., 2013) and under-expression  
88 (Parikh et al., 2013) of presynaptic CHO up-take transporters has been shown to increase and  
89 decrease ACh levels respectively. It is possible, therefore, that baseline CHO availability may  
90 modulate ACh activity, leading to effects on behavioural flexibility. In this study, we used  $^1\text{H}$ -MRS  
91 to test whether baseline levels of regional striatal CHO are related to individual differences in  
92 performance during a probabilistic reversal learning task. To do this, we obtained average measures  
93 of CHO from the dorsal and ventral regions of the striatum (DS and VS, respectively). Additionally,  
94 CHO levels from the cerebellum were used as a control to demonstrate specificity. In line with the  
95 animal literature and our previous findings in humans (Bell et al., 2018), we predicted that average  
96 levels of CHO in the dorsal, but not the ventral, striatum would be associated with performance  
97 during reversal, but not initial, learning.

## 98 METHODS

### 99 **Participants**

100 The study was approved by the University of Reading Research Ethics Committee. 36 volunteers  
101 (20 female) between the ages of 18.3 and 32.8 (mean = 24.8, SD = 3.5) were recruited by  
102 opportunity sampling. All participants were healthy, right handed non-smokers and written  
103 informed consent was taken prior to participation. Two participants were excluded from analyses  
104 due to a high proportion of missed responses (participant 14: 35% during initial learning and 39%  
105 during reversal learning; participant 31: 27% during initial learning, 54% during reversal learning).

### 106 **Behavioural Data**

#### 107 *Learning Task*

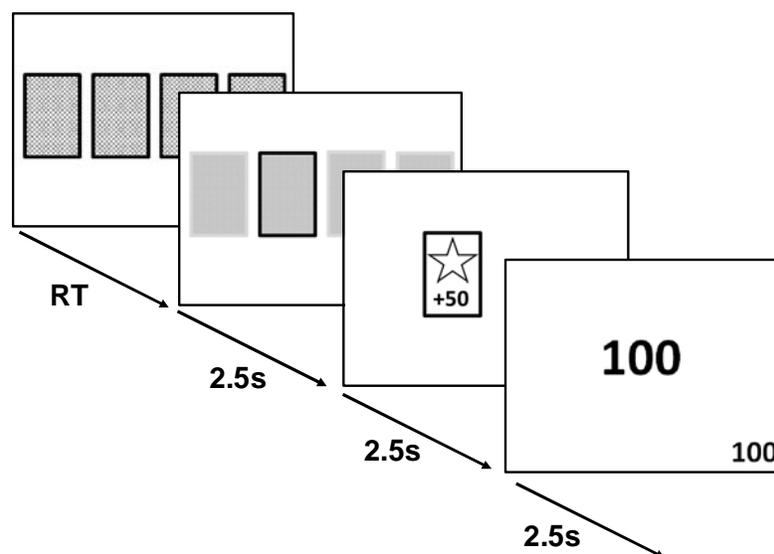
108 The task used was a probabilistic multi-alternative learning task previously described (Bell et al.,  
109 2018), and was programmed using MATLAB (2014a, The Mathworks, Inc., Natick, MA, United  
110 States) and Psychtoolbox (Brainard, 1997).

111 First, participants were presented with a fixation cross displayed in the centre of the visual display.  
112 Participants were then presented with four decks of cards. Each deck contained a mixture of  
113 winning and losing cards, corresponding respectively to a gain or loss of 50 points. The probability  
114 of getting a winning card differed for each deck (75%, 60%, 40%, and 25%) and the probabilities  
115 were randomly assigned across the four decks for each participant. Participants indicated their  
116 choice of deck using a computer keyboard. Outcomes were pseudo-randomised so that the assigned  
117 probability was true over every 20 times that deck was selected. Additionally, no more than 4 cards  
118 of the same result (win/lose) were presented consecutively in the 75% and 25% decks and no more  
119 than 3 cards of the same result in the 60% and 40% decks. A cumulative points total was displayed

120 in the bottom right-hand corner throughout the session and in the centre of the visual display at the  
121 end of each trial (Figure 1). Participants were instructed that some decks may be better than others,  
122 they are free to switch between decks as often as they wish, and they should aim to win as many  
123 points as possible.

124 The learning criterion was set at selection of either of the two highest decks (60% or 75%) on at  
125 least 80% of the time over ten consecutive trials. Though the optimal strategy is to repeatedly  
126 choose the 75% deck, pilot testing revealed the participants were not always able to distinguish  
127 between the 75% and 60% decks. Therefore, as both decks generate an overall gain in points and  
128 choice of either deck could be considered a good strategy, both decks are included in the learning  
129 criterion.

130 The initial learning phase (round 1) was completed when either the learning criterion was reached,  
131 or the participant completed 100 trials. The deck probabilities were then reversed so that the high  
132 probability decks became low probability and vice versa. Participants were not informed of the  
133 reversal. The task ended either after the learning criterion was reached following the reversal (round  
134 2), or after another 100 trials (Figure 2).



135

136 Figure 1: General outline of learning task trials. Participants were instructed to choose between four decks of  
137 cards. Each deck had a different probability of generating wins:losses (75:25, 60:40, 40:60, 25:75). Once the

138 learning criterion had been reached, the deck probabilities were reversed so that high probability decks  
139 became low probability decks and vice versa. Participants were not informed of this in advance and were  
140 simply instructed to gain as many points as possible. Each screen was shown for 2.5s, RT = reaction time.

### 141 *Impulsivity*

142 Previous research has shown that trait levels of impulsivity can influence decision making (Bayard  
143 et al., 2011). Individuals with higher levels of impulsivity have been shown to demonstrate sub-  
144 optimal performance on decision making tasks, displaying a decreased ability to learn reward and  
145 punishment associations and implement these to make appropriate decisions. For instance,  
146 individuals with high levels of impulsivity were relatively impaired in adapting their behaviour  
147 during a reversal learning task (Franken, van Strien, Nijs, & Muris, 2008). Other tasks of cognitive  
148 flexibility have also been shown to be influenced by trait impulsivity levels (e.g. Müller, Langner,  
149 Cieslik, Rottschy, & Eickhoff, 2014). Therefore all participants completed the Barratt  
150 Impulsiveness Scale (BIS-11; Patton, Stanford, & Barratt, 1995) and their total score was used as a  
151 trait measure of impulsivity. This was included in the analysis to account for effects driven by  
152 individual differences in impulsivity.

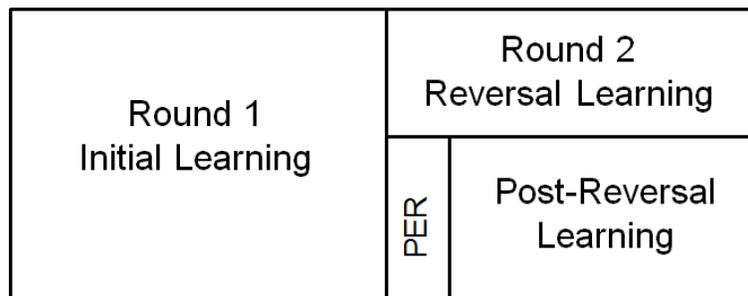
### 153 *Data Analysis*

154 Participants were split into two groups based on performance. Those who learnt both rounds (i.e.  
155 reached criterion both during initial learning and after reversal) were classified as learners and those  
156 who did not learn both rounds were classified as non-learners.

157 Behaviour was analysed for learners only. Those who did not reach criterion during round 1 will not  
158 have realised there was a change in contingencies and will not have experienced a reversal,  
159 therefore their behaviour during the reversal stage is likely to be different to those who did  
160 experience the reversal. Additionally, because the task stops at 100 trials per round if the criterion is  
161 not met, there is a ceiling effect for those who did not reach criterion. Consequently, there will be a  
162 ceiling effect for those who did not reach criterion in both rounds, and for those who did not reach

163 criterion in either round 1 or round 2 only. Therefore, participants who did not reach criteria in  
164 either one round or both rounds were excluded from behaviour analysis.

165 Performance was measured using the number of trials taken to reach criterion in round 1 (initial  
166 learning) and in round 2 (reversal learning). Round 2 was subdivided into perseverative trials and  
167 post-reversal learning (Figure 2). The number of perseverative trials was defined as the number of  
168 trials after reversal until the probability of selecting the previously favoured deck reached chance  
169 level (0.25), i.e. the number of trials taken to identify the reversal and switch behaviour. Post-  
170 reversal learning was defined as the number of trials taken to reach criterion in round 2, minus the  
171 number of perseverative trials, i.e. the number of trials to reach criterion after the reversal had been  
172 detected. In other words, post-reversal learning is measured by the number of trials the participant  
173 took to learn the contingencies once they had realised the deck probabilities had reversed.  
174 Additionally, the post-reversal learning period included a measure of regressive errors. The number  
175 of regressive errors was defined as the number of times the previously favoured deck was selected  
176 during the post-reversal learning period (i.e. after the perseverative period had ended).



177

178 Figure 2: General overview of learning task structure. Participants completed the initial learning phase  
179 (round 1) by reaching the predefined accuracy criterion or after 100 trials. Upon completion of the initial  
180 learning phase, the deck probabilities were reversed. Participants then completed a reversal learning phase  
181 (round 2). For behavioural analysis, this was subdivided into perseverative trials (PER) and a post-reversal  
182 learning period. The number of perseverative trials was defined as the number of trials after reversal until the  
183 probability of selecting the previously favoured card reached chance level (0.25). The post-reversal learning  
184 period was the number of trials to reach criterion in round 2, minus the number of perseverative trials. The  
185 number of regressive errors was defined as the number of times the previously favoured deck was selected

186 during the post-reversal learning period. The task ended once participants either reached the same accuracy  
187 criterion in round 2 or after 100 round 2 trials.

## 188 *Temporal Difference Reinforcement Learning Model*

189 We modelled participants' choice behaviour as a function of their previous choices and rewards  
190 using a temporal difference reinforcement learning algorithm (Sutton and Barto, 1998). This allows  
191 us to track trial-and-error learning for each participant, during each task stage, in terms of a  
192 subjective expected value for each deck. On each trial  $t$ , the probability that deck  $c$  was chosen was  
193 given by a soft-max probability distribution,

$$P(c_t = c) = \frac{e^{m_t(c)}}{\sum_j e^{m_t(j)}} \quad (1)$$

194 where  $m_t(c)$  is the preference for the chosen deck and  $j$  indexes the four possible decks. The  
195 preference for the chosen deck was comprised of the participant's expected value of that deck on  
196 that trial,  $V_t(c)$ , multiplied by the participant's individual value impact parameter  $\beta$  (equivalent to  
197 the inverse temperature):

$$m_t(c) = \beta V_t(c). \quad (2)$$

198 The parameter  $\beta$  describes the extent to which trial-by-trial choices follow the distribution of the  
199 expected values of the decks: a low  $\beta$  indicates choices are not strongly modulated by expected  
200 value, being effectively random with respect to this quantity (i.e. participants are not choosing  
201 based exclusively on value, and are effectively exploring all options); conversely, a high  $\beta$  indicates  
202 choices largely follow expected value (i.e. participants choose the deck with the highest expected  
203 value; exploitation).

204 To update the subjective value of each deck, a prediction error was generated on each trial,  $pe_t$   
205 based on whether participants experienced a reward or a loss ( $reward_t = +1$  or  $-1$  respectively). The  
206 expected value of the chosen deck was subtracted from the actual trial reward to give the prediction  
207 error:

$$pe_t = reward_t - V_t(c) \quad (3)$$

208 Studies have shown that individuals differ in the degree to which they learn from better than  
209 expected outcomes (positive prediction errors) and worse than expected outcomes (negative  
210 prediction errors) (Gray, 1970; Niv et al., 2012; Christakou et al., 2013; Bull et al., 2015). To  
211 account for this, two learning rate parameters were used to model sensitivity to prediction errors in  
212 updating the expected values: the weight of learning from better than expected outcomes (learning  
213 rate from positive prediction errors:  $\eta^+$ ) and the weight of learning from worse than expected  
214 outcomes (learning rate from negative prediction errors:  $\eta^-$ ). For example, individuals who are  
215 reward seeking will place a high weight on the former, whereas those who are loss-averse will  
216 place a high weight on the latter. The prediction error on each trial was multiplied by either the  
217 positive ( $\eta^+$ ) or negative ( $\eta^-$ ) learning rate and used to update the value of the chosen deck.

$$\delta_t = \eta^+ \times pe_t \quad \text{if } pe_t > 0 \quad (4)$$

$$\delta_t = \eta^- \times pe_t \quad \text{if } pe_t < 0 \quad (5)$$

$$V(chosen_t) = V(chosen_{t-1}) + \delta_t \quad (6)$$

218 Thus, the model has three parameters of interest ( $\beta$ ,  $\eta^+$  and  $\eta^-$ ). In psychological terms,  $\beta$  captures  
219 the degree to which the subjective value of the chosen deck influenced decisions, while the learning  
220 rates capture the individual's preference for learning from positive ( $\eta^+$ ) or negative ( $\eta^-$ ) prediction  
221 errors to guide choice behaviour during this task.

## 222 *Model Fitting*

223 The model was fit per participant to provide parameters that maximised the likelihood of the  
224 observed choices given the model (individual maximum likelihood fit; Daw, 2011). The reward  
225 value was updated as 1 (win) or -1 (loss). Subjective value was initialised at zero for all decks and  
226 the initial parameter values were randomised. To ensure the model produced consistent,  
227 interpretable parameter estimates,  $\eta$  was limited to between 0 and 1 and  $\beta$  was assumed positive.  
228 The parameters were constrained by the following distributions based on Christakou et al (2013):

$$\beta \sim \text{Gamma}(2,1)$$

$$\eta \sim \text{Beta}(1.2, 1.2)$$

229 The model was fit separately over the trials encompassing round 1 (R1, initial learning) and round 2  
230 (R2, perseverative trials and post-reversal learning, denoted as reversal learning). This was done to  
231 capture the change in influence of the model parameters from initial learning to reversal learning.  
232 The model was not fit over the perseverative trials separately as the average number of  
233 perseverative trials was too small to generate a stable model fit.

234 Traditionally, to investigate the fit of a temporal difference reinforcement learning model the  
235 Bayesian information criterion (BIC) is used. The BIC is a post hoc fit criterion which looks at the  
236 adequacy of a model whilst penalising the number of parameters used. A lower number indicates a  
237 better fit (Steingroever et al., 2016). However, the BIC is generally used to compare different  
238 models, rather than model fits over different sets of data, and will penalise different sized data sets.  
239 Alternatively, the corrected likelihood per trial (CLPT) can be used. The CLPT is a more intuitive  
240 measure of fit that takes into account the number of trials completed without penalising different  
241 sized data sets. The CLPT varies between 0 and 1, with higher values indicating a better fit (Leong  
242 and Niv, 2013; Niv et al., 2015).

243 Wilcoxon signed-rank tests showed there was no significant difference between the CLPT values  
244 for the model fit over round 1 (Mdn = 0.23) and round 2 (Mdn = 0.23;  $Z = -1.308$ ,  $p = 0.191$ ).  
245 Additionally, there was no significant difference between the BIC values for the model fit over  
246 round 1 ( $M = 75.7$ ,  $SD = 45.5$ ) and round 2 ( $M = 90.9$ ,  $SD = 43.6$ ;  $t(33) = -1.533$ ,  $p = 0.135$ ,  $r =$   
247  $0.26$ ).

248 To summarise, the model fit equally well across rounds. Therefore, differences in parameter  
249 estimates across the task can be examined.

## 250 **Magnetic Resonance Spectroscopy**

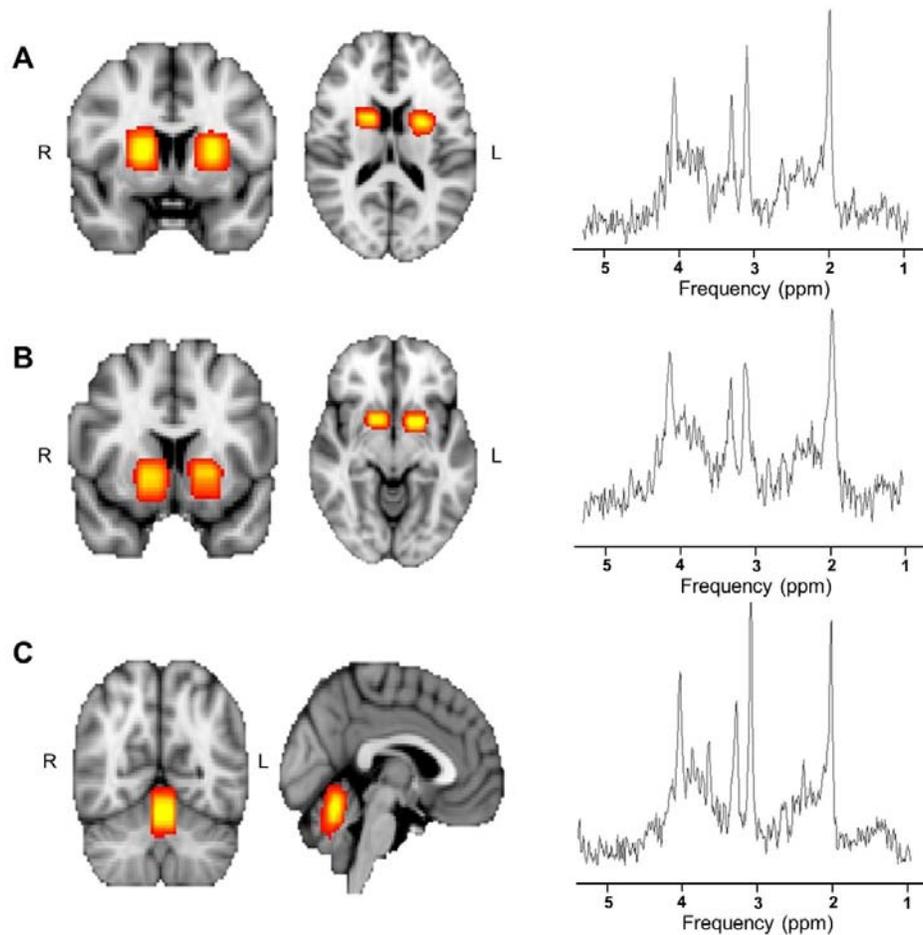
### 251 *Data Acquisition*

252 Data was collected at the University of Reading on a Siemens Trio 3T MRI scanner using a  
253 transmit-receive head coil. A high-resolution whole-brain T1 structural image was acquired for  
254 voxel placement using an MPRAGE sequence parallel to the anterior-posterior commissure line  
255 (176 x 1mm slices; TR = 2020ms; TE = 2.9ms; FOV = 250mm).

256 Voxels were placed in either the left or right dorsal striatum (DS), ventral striatum (VS) and the  
257 cerebellum, with hemisphere placement and order of measurements counterbalanced across  
258 participants. Anatomy was used to guide voxel positioning. The top of the DS was identified by  
259 slice-by-slice examination of the structural scan. The slice below the slice where the top of the  
260 striatum was no longer visible was selected and the top of the voxel was aligned with this slice. The  
261 same technique was applied for the VS voxel. The slice above the slice where the bottom of the  
262 striatum could no longer be seen was selected and used for alignment of the VS voxel. The  
263 cerebellum voxel was placed as high in the superior cerebellar vermis as possible whilst ensuring  
264 only cerebellar tissue was contained in the voxel. The superior cerebellar vermis was chosen as it  
265 has been shown to have the lowest variability in both inter and intra subject metabolite ratios as  
266 measured with <sup>1</sup>H-MRS at rest (Currie et al., 2013). All voxels were visually inspected to ensure  
267 minimal cerebrospinal fluid was included in the voxels.

268 A PRESS sequence was used to acquire data from the three separate voxel positions (voxel size =  
269 10mm x 15mm x 15mm; TR = 2000ms; TE = 30ms). 128 spectra were collected and averaged for  
270 each area. A water-unsuppressed spectrum was also obtained from each area for data processing,  
271 which consisted of an average of 15 spectra. Spectra were obtained for all participants from the  
272 cerebellum and the DS. The spectrum obtained from the VS was only usable from 34 participants  
273 due to noise levels. The SIEMENS Auto Align Scout was used in between each scan to adjust the

274 voxel position based on the actual head position of the participant. This was used to correct for  
275 participant motion and minimize the variability of the voxel position.



276

277 Figure 3: Location of voxels and example spectra. Heat maps showing the sum of the  $^1\text{H}$ -MRS voxels over  
278 all subjects in MNI space, along with a representative spectrum from a single subject (A = Dorsal Striatum,  
279 MNI coordinates: -3.41, 2.37, 11.16; B = Ventral Striatum, MNI coordinates: -2.99, 5.92, -3.93; C =  
280 Cerebellum, MNI coordinates: -2.10, -61.03, 19.20).

### 281 *Structural Segmentation*

282 Structural scans were processed using FSL version 5.0.8 (Smith et al., 2004; Jenkinson et al., 2012).  
283 First, the skull was removed using the brain extraction tool (BET) (Smith, 2002). Images were  
284 segmented into three separate tissue types: grey matter (GM), white matter (WM) and cerebrospinal  
285 fluid (CSF) using the FAST tool (Zhang et al., 2001). The coordinates and dimensions of the voxel

286 were then superimposed on these images and the proportion of each of the three tissue types  
287 contained within the voxel was calculated.

## 288 *Quantitation*

289 Data was processed in the time domain using Java-Based Magnetic Resonance User Interface  
290 (jMRUI software version 5.0 (<http://www.mrui.uab.es/mrui>); Naressi et al., 2001). Phase correction  
291 was performed using the corresponding water spectrum from each area. Each spectrum was then  
292 apodized using a Gaussian filter of 3Hz to improve signal quality, reduce noise and reduce effects  
293 of signal truncation (Jiru, 2008). The residual water peak was removed using the Hankel-Lanczos  
294 Singular Value Decomposition (HLSVD) filter tool.

295 Metabolite models were generated using the software Versatile Simulation, Pulses and Analysis  
296 (VEsPA (<https://scion.duhs.duke.edu/vespa/project>); Soher, Semanchuk, Todd, Steinberg, &  
297 Young., 2010). 14 typical brain metabolites (Acetate, Aspartate, CHO, Creatine, Gamma-  
298 Aminobutyric Acid (GABA), Glucose, Glutamate, Glutamine, Lactate, Myo-inositol, N-acetyl  
299 Aspartate (NAA), Phosphocreatine, PC & GPC, Scyllo-inositol, Succinate, Taurine) were simulated  
300 at a field strength of 3T using a PRESS pulse sequence (TE1 = 20ms, TE2 = 10ms, main field =  
301 123.25MHz). For initial analyses, CHO was modelled separately from PC+GPC based on the  
302 method described in Bell et al., 2018. Additionally, the sum of the three peaks (total choline,  
303 tCHO) was included in the analyses for comparison. If tCHO produced similar results to CHO, it  
304 would potentially suggest that there may not be a need to separate the three peaks, or that the  
305 quantitation method is not separating CHO effectively.

306 The jMRUI tool Accurate Quantification of Short Echo time domain Signals (AQSES) was used for  
307 automatic quantification of spectra signals. AQSES was applied using the method described in  
308 Minati, Aquino, Bruzzone, & Erbetta, 2010. To correct for any chemical shift displacement, the  
309 spectrum was shifted so that the peak for n-acetyl-aspartate (NAA) was at 2.02ppm. The frequency  
310 range selected for processing was limited to 0-8.6ppm (equal phase for all metabolites, begin time

311 fixed, delta damping (-10 to 25Hz), delta frequency (-5 to 5Hz), no background handling, 0  
312 truncated points, 2048 points in AQSES and normalisation on). Based on common practice in the  
313 field, values with a CRB higher than 30% were excluded on a case by case basis.  
314 Metabolite concentrations were calculated for CHO, PC+GPC, tCHO, NAA and total creatine (tCR,  
315 creatine + phosphocreatine), correcting for partial-volume and relaxation effects, using the formula  
316 described in Gasparovic et al., 2006).

## 317 **Experimental Design and Statistical Analysis**

318 Statistical analysis was performed using SPSS (IBM Corp. Released 2013. IBM SPSS Statistics for  
319 Windows, Version 22.0. Armonk, NY: IBM Corp).

320 The relationships between model parameters and behaviour, along with model parameters and  
321 metabolite levels and behaviour and metabolite levels was assessed using correlation analysis. The  
322 distribution of the data was analysed using measures of skewness and kurtosis, along with the  
323 Shapiro-Wilk test. When the assumptions of normality and homogeneity were met, Pearson's  
324 correlation ( $r$ ) was used to assess correlations. When assumptions of normality were not met,  
325 Kendall's Tau ( $r_{\tau}$ ) was used to assess correlations, as it provides a better estimation of the  
326 correlation in a small sample size compared to other non-parametric methods (Field, 2009). Where  
327 appropriate, hierarchical multiple regression analysis was used to assess the variance explained by  
328 metabolite levels in behaviour, after the model parameters were accounted for.

### 329 *Confounding Variables*

330 There were no significant differences in metabolite levels between hemispheres, therefore the  
331 results were combined across hemisphere of acquisition.

332 To examine if variations in the metabolite values might be caused by differing proportions of tissue  
333 composition, correlations were performed between CCC levels and proportion of grey and white

334 matter present in the voxel. Additionally, metabolite values were checked against the water signal  
335 for the same reason. No significant correlations were found between CCCs and grey/white matter  
336 content, indicating any variance seen is generated by differing metabolite levels. The water signal  
337 significantly correlated with DS tCHO ( $r_{\square}(35) = -0.348, p = 0.003$ ) and VS PC+GPC ( $r_{\square}(32) = -$   
338  $0.270, p = 0.001$ ). Therefore, analyses involving DS tCHO or VS PC+GPC were corrected for this  
339 source of variance using partial correlations. No other significant correlations were seen between  
340 the water signal and metabolite levels of interest.

341 There is evidence that metabolite levels in the brain can vary based on time of day (Soreni et al.,  
342 2006) and age (Pfefferbaum et al., 1999; Reyngoudt et al., 2012). Therefore, all metabolites were  
343 checked against these two variables to ensure this was not a source of variance. Time of day  
344 significantly correlated with DS tCHO ( $r_{\square}(35) = 0.249, p = 0.038$ ) and cerebellum tCHO ( $r_{\square}(31) =$   
345  $0.285, p = 0.026$ ). Therefore, analyses involving DS tCHO or cerebellum tCHO were corrected for  
346 this source of variance using partial correlations. No other significant correlations were seen  
347 between metabolite levels and time of day or age of participant.

## 348 *Controls*

349 The cerebellum was used as a control to demonstrate the regional specificity of results. None of the  
350 effects were present in the cerebellum and therefore these results are not reported further. NAA and  
351 tCR were used as controls to demonstrate the neurochemical specificity of the results (i.e. that the  
352 relevant individual differences were specific to choline and not to spectrum-wide inter-individual  
353 differences). None of the effects were present in either NAA or tCR and therefore these results are  
354 not reported further. Furthermore, none of the reported effects were found when using tCHO as a  
355 measure of cholinergic availability and therefore these results are not reported further.

## 356 RESULTS

### 357 Behavioural Results

358 Twenty-two (22) participants reached criterion during both rounds (i.e. they reached criterion both  
359 during initial learning and after the reversal) and were included in the analysis.

#### 360 *Model parameters and performance*

361 A reinforcement-learning model was used to disentangle components of learning that contribute to  
362 overall behaviour. We looked at three parameters of interest, the learning rates from positive ( $\eta^+$ )  
363 and negative ( $\eta^-$ ) prediction errors, and the overall impact of subjective value of the deck on the  
364 participants choice (value impact parameter,  $\beta$ ). To test the contribution of the model parameters to  
365 behaviour, we looked at correlations between behaviour (as measured by trials to criterion, number  
366 of perseverative trials and number of regressive errors) and the corresponding model parameters,  
367 i.e. behaviour during initial learning was correlated with model parameters fit over the initial  
368 learning period, and likewise for the reversal learning period.

369 Table 1: Performance variables

	<i>Average Number of Trials</i>	<i>SD</i>
<b>Initial Learning</b>	44	28
<b>Reversal Learning</b>		
<b>Perseveration Period</b>	12	8
<b>Post Reversal Learning</b>	35	22
<b>Regressive Errors</b>	7	6
<b>Total</b>	47	

370

371

372 Table 2: Estimates of model parameters

	$\eta^+$	$\eta^-$	$\beta$
<b>Initial Learning</b>	0.37 (SD = 0.30)	0.42 (SD = 0.31)	1.44 (SD = 0.56)
<b>Reversal Learning</b>	0.24 (SD = 0.35)	0.31 (SD = 0.27)	1.37 (SD = 0.97)

373 Note:  $\eta^+$  = learning rate from positive prediction errors;  $\eta^-$  = learning rate from negative prediction errors;  $\beta$  =  
374 impact of subjective value on choice.

375 Table 3 shows the correlation coefficients for the relationships between model parameters and  
376 behaviour. Faster initial learning (low number of trials to criterion) was associated with a higher  
377 learning rate from positive prediction errors ( $r(22) = -0.439$ ,  $p = 0.041$ ) and a higher value impact  
378 parameter ( $r(21) = -0.536$ ,  $p = 0.012$ ). A lower number of perseverative trials was associated with a  
379 higher learning rate from negative prediction errors ( $r(22) = -0.527$ ,  $p = 0.012$ ). As was the case  
380 during initial learning, during post-reversal learning (after the reversal has been identified) a lower  
381 number of trials taken to reach criterion was associated with a higher learning rate from positive  
382 prediction errors ( $r_{\square}(22) = -0.335$ ,  $p = 0.03$ ), and a higher value impact parameter ( $r_{\square}(22) = -$   
383  $0.352$ ,  $p = 0.022$ ). Additionally, during post-reversal learning, a lower number of regressive errors  
384 was associated with a higher learning rate from positive prediction errors ( $r_{\square}(22) = -0.355$ ,  $p =$   
385  $0.023$ ) and a higher value impact parameter ( $r_{\square}(22) = -0.337$ ,  $p = 0.031$ ).

386 Table 3: Correlation coefficients for relationships between model parameters and behaviour

	$\eta^+$	$\eta^-$	$\beta$
<b>Initial Learning (TTC)</b>	-0.439*	-0.218	-0.536*
<b>Reversal Learning</b>			
<b>Perseverative Errors</b>	-0.176	-0.527*	0.132
<b>Post Reversal Learning (TTC)</b>	-0.335*	0.322	-0.352*
<b>Regressive Errors</b>	-0.355*	0.292	-0.337*

387 Note:  $\eta^+$  = learning rate from positive prediction errors;  $\eta^-$  = learning rate from negative prediction errors;  $\beta$   
388 = value impact parameter; \*  $p < 0.05$ .

## 389 *Effects of trait impulsivity on performance*

390 To investigate the influence of impulsivity on decision making, we looked at correlations between  
391 impulsivity (total BIS-11 score) and measures of behaviour (including model parameters) in  
392 learners. Higher impulsivity levels were associated with a lower number of perseverative errors  
393 ( $r(22) = -0.470, p = 0.027$ ). No other measures of behaviour correlated with impulsivity.

## 394 *Summary*

395 Faster initial learning was indexed by both higher learning rates from positive prediction errors  
396 ( $R1\eta^+$ ) and higher value impact parameters ( $R1\beta$ ). Reduced numbers of perseverative trials were  
397 associated with higher learning rates from negative prediction errors ( $R2\eta^-$ ) and higher impulsivity  
398 levels. Similar to initial learning, faster post-reversal learning was associated with higher learning  
399 rates from positive prediction errors ( $R2\eta^+$ ) and higher value impact parameters ( $R2\beta$ ).  
400 Additionally, during post-reversal learning, lower numbers of regressive errors were associated with  
401 higher learning rates from positive prediction errors ( $R2\eta^+$ ) and higher value impact parameters  
402 ( $R2\beta$ ).

## 403 **Spectroscopy Results**

404 One participant was excluded from spectroscopy analysis due to issues with segmentation of the  
405 structural scan.

406 Table 4: Average metabolite levels in the DS

	<i>CHO</i>	<i>PC+GPC</i>	<i>tCHO</i>	<i>NAA</i>	<i>tCR</i>
<b>Learners</b>	0.15 (SD = 0.20)	0.27 (SD = 0.10)	0.42 (SD = 0.12)	8.73 (SD = 0.77)	11.58 (SD = 1.74)
<b>Non-Learners</b>	0.11 (SD = 0.16)	0.36 (SD = 0.14)	0.46 (SD = 0.10)	8.83 (SD = 2.37)	11.80 (SD = 2.31)

407 Note: CHO = choline, PC+GPC = phosphocholine and glycerophosphocholine, tCHO = total choline, NAA  
408 = n-acetyl aspartate, tCR = total creatine.

409 Table 5: Average metabolite levels in the VS

	<i>CHO</i>	<i>PC+GPC</i>	<i>tCHO</i>	<i>NAA</i>	<i>tCR</i>
<b>Learners</b>	0.24 (SD = 0.17)	0.27 (SD = 0.12)	0.5 (SD = 0.17)	5.39 (SD = 1.97)	12.02 (SD = 2.26)
<b>Non-Learners</b>	0.23 (SD = 0.17)	0.25 (SD = 0.14)	0.48 (SD = 0.16)	5.45 (SD = 1.54)	11.13 (SD = 3.95)

410 Note: CHO = choline, PC+GPC = phosphocholine and glycerophosphocholine, tCHO = total choline, NAA  
411 = n-acetyl aspartate, tCR = total creatine.

## 412 *Group Comparisons*

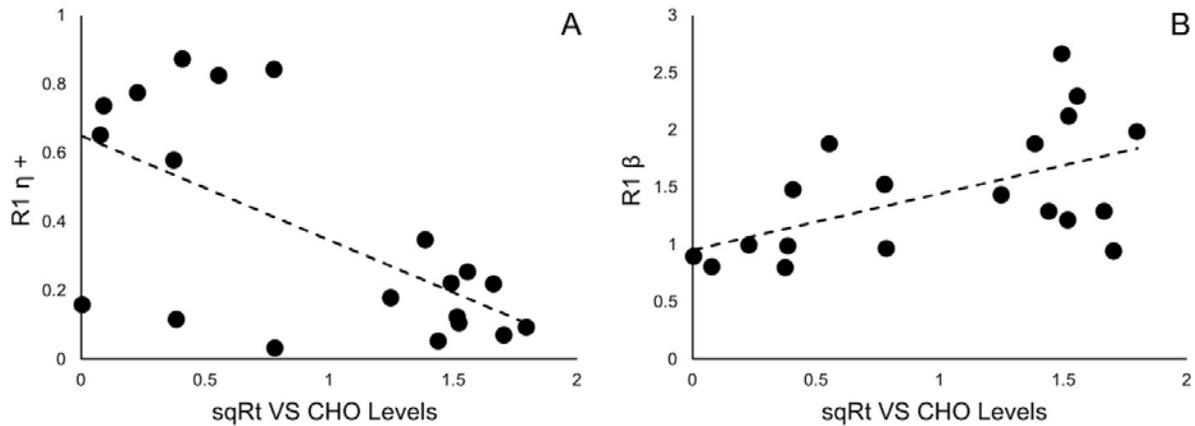
413 To investigate whether average levels of CHO in the striatum relate to task performance, the  
414 average levels were compared between learners and non-learners. There was no significant  
415 difference in CHO levels between learners and non-learners in either the DS or the VS.

## 416 *Correlations with Behaviour*

417 To further investigate the relationship between average metabolite levels and task performance,  
418 correlations were performed between metabolite levels and measures of performance in learners  
419 (numbers of trials to criterion and model parameters).

### 420 *Initial Learning*

421 No significant correlations were seen with measures of performance in round 1 (trials to criterion,  
422  $R1\eta^+$  or  $R1\beta$ ) and average levels of CHO in the DS.  
423 VS CHO did not correlate with trials to criterion in round 1. However, low levels of CHO in the VS  
424 were associated with higher learning rates from positive prediction errors ( $r(20) = -0.625$ ,  $p =$   
425  $0.003$ ; Figure 4A) and lower value impact parameters ( $r(19) = 0.555$ ,  $p = 0.014$ ; Figure 4B).



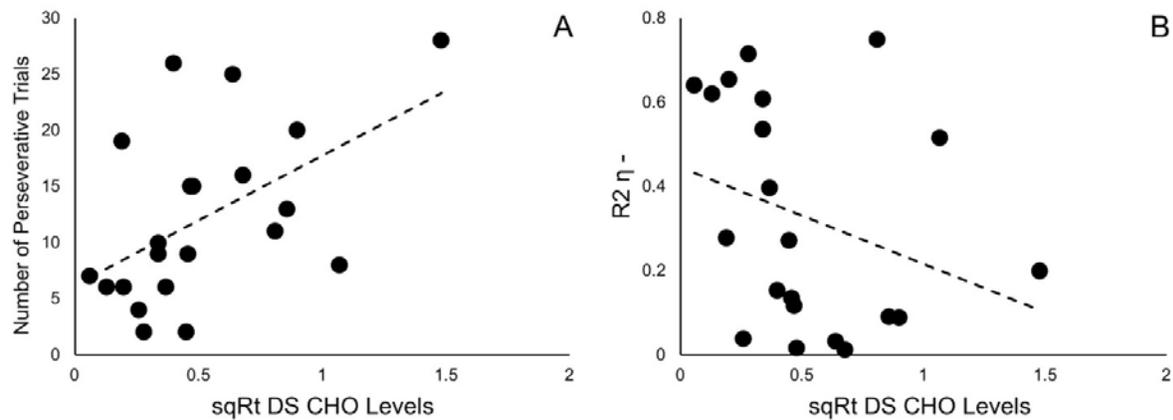
426

427 Figure 4: Correlations between VS CHO levels and performance during initial learning **A**: Negative  
428 correlation between learning rate based on positive prediction errors derived from round 1 ( $R1\eta+$ ) and levels  
429 of CHO in the VS ( $r(20) = -0.625$ ,  $p = 0.003$ ). **B**: Negative correlation between impact of participant's  
430 subjective value on their future choice derived from round 1 ( $R1\beta$ ) and levels of CHO in the VS ( $r(19) =$   
431  $0.555$ ,  $p = 0.014$ ). VS: Ventral Striatum; CHO: Choline.

#### 432 *Perseverative Trials*

433 A lower number of perseverative trials was associated with lower levels of DS CHO ( $r_{\square}(21) =$   
434  $0.367$ ,  $p = 0.021$ ; Figure 5A). The opposite effect was seen with DS PC+GPC ( $r(21) = -0.447$ ,  $p =$   
435  $0.042$ ). Additionally, higher learning rates from negative prediction errors were associated with  
436 lower DS CHO levels ( $r_{\square}(21) = -0.371$ ,  $p = 0.019$ ; Figure 5B). This result is specific to DS CHO,  
437 with no other DS metabolites found to correlate with learning rates from negative prediction errors.  
438 Additionally, VS CHO was not found to correlate with either the number of perseverative trials or  
439 learning rates from negative prediction errors.

440



441

442 Figure 5: Correlations between DS CHO levels and performance during reversal **A**: Positive correlation  
443 between the number of perseverative trials and levels of CHO in the DS ( $r_{\square}(21) = 0.367$ ,  $p = 0.021$ ). **B**:  
444 Negative correlation between the learning rate based on negative prediction errors derived from round 2  
445 ( $R^2\eta^-$ ) and levels of CHO in the DS ( $r_{\square}(21) = -0.371$ ,  $p = 0.019$ ). DS: Dorsal Striatum; CHO: Choline.

446

447 After establishing an association between CHO levels and reversal performance, we wanted to  
448 examine whether CHO contributed to reversal efficiency over and above behavioural and  
449 personality variables. Using a hierarchical multiple regression, we first modelled the contribution of  
450 variance from learning rates from negative prediction errors and total BIS scores to the variance in  
451 the number of perseverative trials (Model 1;  $F(2,18) = 9.460$   $p = 0.002$ ,  $R^2 = 0.512$ ; Table 6). The  
452 second model looked at whether the addition of DS CHO would explain significantly more  
453 variance, over and above that explained by learning rates from negative prediction errors and total  
454 BIS score (Model 2;  $F(3,17) = 9.574$   $p = 0.001$ ,  $R^2 = 0.628$ ; Table 6).

455 The amount of variance in the number of perseverative trials explained by learning rates from  
456 negative prediction errors was significant in both Model 1 ( $\beta = -0.493$ ,  $t(18) = -2.980$ ,  $p = 0.008$ ;  
457 Table 6) and Model 2 ( $\beta = -0.430$ ,  $t(17) = -2.843$ ,  $p = 0.011$ ; Table 6). Additionally, total BIS score  
458 also explained a significant amount of variance in both Model 1 ( $\beta = -0.472$ ,  $t(18) = -2.855$ ,  $p =$   
459  $0.011$ ; Table 6) and Model 2 ( $\beta = -0.419$ ,  $t(17) = -2.787$ ,  $p = 0.013$ ; Table 6).

460 In Model 2, DS CHO also explained a significant amount of variance in the number of  
 461 perseverative trials ( $\beta = 0.351$ ,  $t(17) = 2.300$ ,  $p = 0.034$ ; Table 6). The addition of DS CHO to the  
 462 model increased  $R^2$  by 0.116 and this increase was statistically significant ( $F(1,23) = 5.291$ ,  $p =$   
 463  $0.034$ ; Table 6).

464 To assess the specificity of this result, DS PC+GPC was also included in the model. However,  
 465 analysis of multicollinearity diagnostics showed a tolerance of 0.175, which is below the acceptable  
 466 value of 0.2. This is due to the strong significant correlation between DS CHO and DS PC+GPC ( $r_{(21)} = -0.667$   $p < 0.001$ ). As a result, including the two variables in the same regression model  
 467 would violate the assumption of multicollinearity and the regression model would not be able to  
 468 provide unique estimates of the regression coefficients, as each will account for overlapping  
 469 variance (Field, 2009). Therefore, we instead repeated the hierarchical regression with DS PC+GPC  
 470 in place of DS CHO. The amount of variance explained by DS PC+GPC was not significant ( $\beta = -$   
 471  $0.301$ ,  $t(17) = -1.900$ ,  $p = 0.075$ ). The addition of DS PC+GPC to the model increased  $R^2$  by 0.085  
 472 and this increase was not statistically significant ( $F(1,23) = 3.611$ ,  $p = 0.075$ ). This indicates that DS  
 473 CHO levels can explain part of the variance in the number of perseverative trials, however DS  
 474 PC+GPC levels cannot.

476 Table 6: Summary of hierarchical regression analyses for variables predicting perseveration

	<i>B</i>	<i>SE B</i>	$\beta$	$R^2$	$\Delta R^2$	<i>p</i>
<b>Model 1</b>				0.512		0.002
R2 $\eta^2$	-14.476	4.858	-0.493			0.008
BIS Total	-0.504	0.176	-0.472			0.011
<b>Model 2</b>				0.628	0.116	0.034
R2 $\eta^2$	-12.619	4.439	-0.430			0.011
BIS Total	-0.447	0.160	-0.419			0.013
DS CHO	5.306	2.307	0.351			0.034

477 Note, for  $\Delta R^2 = 0.139$ ,  $p = 0.037$

478 *B* = unstandardized coefficient, *SE* = standard error,  $\beta$  = standardised coefficient

479 *Post Reversal Learning*

480 No significant correlations were seen with either DS or VS CHO levels and measures of  
481 performance during post reversal learning (trials to criterion,  $R2\eta^+$  or  $R2\beta$ ). Additionally, there were  
482 no significant correlations between DS or VS CHO levels and the number of regressive errors.

483 *Summary*

484 In the DS, average CHO levels were associated with performance during reversal, but not during  
485 initial learning. There was a significant positive correlation between DS CHO levels and the  
486 number of perseverative trials, and a significant negative correlation between DS CHO levels and  
487 learning rates from negative prediction errors ( $R2\eta^-$ ). Additionally, DS CHO levels explained  
488 variance in the number of perseverative trials over and above that explained by learning rates from  
489 negative prediction errors.

490 In the VS, average CHO levels were not associated with performance during reversal learning.  
491 Although VS CHO levels were not associated with the speed of initial learning, there was a  
492 significant positive correlation between VS CHO levels and learning rates from positive prediction  
493 errors, and a significant negative correlation between VS CHO levels and the value impact  
494 parameter during initial learning.

## 495 DISCUSSION

496 We used  $^1\text{H-MRS}$  to investigate the relationship between average CHO levels in the human striatum  
497 at rest and performance during probabilistic reversal learning. Here we show that baseline levels of  
498 CHO in the human DS are associated specifically with individual differences in reversal learning  
499 efficiency, but not in initial learning, and that this effect is specific to the dorsal, but not the ventral  
500 striatum.

501 Behaviourally, we show that faster initial learning is indexed by a higher learning rate from positive  
502 prediction errors ( $\eta^+$ ) and a higher value impact parameter ( $\beta$ ). Therefore, during this period,  
503 participants are using wins and expected value to guide their choices. This is also seen during the  
504 post-reversal learning period, in which faster post-reversal learning is indexed by higher learning  
505 rates from positive prediction errors ( $\eta^+$ ) and higher value impact parameters ( $\beta$ ). Faster reversal  
506 (less perseveration), however, was indexed by higher learning rates from negative prediction errors  
507 ( $\eta^-$ ) only. During this period, participants must now pay increased attention to worse than expected  
508 outcomes in order to identify the change in contingencies. Therefore, to adapt to changes in task  
509 structure, participants adapt their strategy by altering the weight of learning from prediction errors  
510 based on reward history.

511 The learning rate for negative prediction errors, accounting for trait impulsivity, explained a  
512 significant amount of variance during perseveration, providing a simple mechanism to explain  
513 reversal efficiency. However, average DS CHO levels explained variance in the number of  
514 perseverative trials over and above this original model. This suggests a more complex mechanism  
515 in which perseveration is influenced, in part, by the learning rate from negative prediction errors  
516 (which can change due to task demand) and by resting levels of DS CHO. Indeed, Franklin &  
517 Frank, 2015 showed that a model which takes into account cholinergic activity performs better on a  
518 reversal learning task than a model based solely on dopamine prediction error signalling.

519 Our results indicate that participants who were quicker to reverse had lower average levels of DS  
520 CHO, suggesting that low trait levels of DS CHO are beneficial for reversal learning. Based on  
521 evidence that ACh efflux increases during reversal learning (Ragozzino et al., 2009; Brown et al.,  
522 2010), this suggests two potential mechanisms. Firstly, lower levels of DS CHO at rest could reflect  
523 lower levels of ACh at rest. This is also supported by evidence from the animal literature, which has  
524 shown a positive correlation between ACh levels at rest as measured by microdialysis and average  
525 CCCs as measured by <sup>1</sup>H-MRS (Wang et al., 2008). Additionally, higher levels of CHO availability  
526 have been shown to lead to higher levels of ACh release, implying a positive correlation between  
527 the two metabolites (Koshimura et al., 1990). Based on this notion, the findings here suggest that  
528 lower levels of ACh at rest may be beneficial for reversal learning because they enable a higher  
529 contrast between ACh levels at rest and during reversal learning. However, it is important to note  
530 that Wang et al. (2008) modelled all three CCCs as a single peak. It is likely that the relationship  
531 between CHO levels as measured by spectroscopy and ACh levels in the brain is not  
532 straightforward, and this interpretation should be considered with caution. Indeed, animal studies  
533 have shown the relationship between CHO and ACh can change based on neuronal firing and ACh  
534 requirement (Löffelholz, 1998; Klein et al., 2002). Furthermore, we have previously demonstrated a  
535 drop in CHO levels in the human DS during reversal learning, thought to reflect the sustained  
536 increase in ACh release seen in animal studies (e.g. Ragozzino et al., 2009). This drop is thought to  
537 be due to an increase in translocation of CHO uptake receptors in response to sustained neural firing  
538 (Bell et al., 2018). Though we have described the measurements in this study as “at rest”,  
539 cholinergic interneurons are tonically active, and therefore the relationship between CHO and ACh  
540 levels in the striatum will likely reflect a more complex dynamical relationship between the two.

541 The second potential mechanism supported by our findings is that lower levels of DS CHO at rest  
542 may result from a more efficient CHO uptake system. Mice carrying mutations in the gene coding  
543 for CHO uptake transporters have reduced neuronal capacity to both clear CHO and release ACh.

544 Moreover, performance on an attention task was impaired in these mice (Parikh et al., 2013).  
545 Additionally, in a study of frontal cortex cholinergic modulation during attention, humans with a  
546 gene polymorphism which reduces CHO transport capacity showed reduced activation in the  
547 prefrontal cortex during an attentional task. Furthermore, the pattern of activation predicted CHO  
548 genotype (Berry et al., 2015). Further work is needed to determine the relationship between CHO  
549 uptake, ACh release and reversal learning.

550 Disruption of cholinergic signalling in rodents typically results in an increase in regressive errors  
551 (Brown et al., 2010; Bradfield et al., 2013). However, here we found no association between DS  
552 CHO levels and the number of regressive errors. In humans, measures of individual differences in  
553 perseverative and regressive errors are likely to be confounded by individual differences in  
554 representation of the task structure. Rather than making perseverative and regressive errors based  
555 solely on feedback, the ability to flexibly alter response depends in part on a higher level  
556 representation of the task, which is thought to be maintained in frontal areas of the cortex  
557 (Armbruster et al., 2012). It should be noted that the basal ganglia-thalamo-cortical system has been  
558 shown to be modulated by the maintenance of task rules, with those with stronger representation of  
559 the task structure showing higher activation in the caudate and thalamus during a behaviour switch  
560 (Ueltzhöffer et al., 2015), indicating that representation of task structure likely modulates DS  
561 activity in response to the need for behavioural flexibility. Inevitably, caution is needed when  
562 translating evidence from rodent studies of learning to human studies. This emphasises the need to  
563 further develop non-invasive techniques for studying human neurochemistry *in vivo*

564 As predicted, and in line with evidence from the animal literature (Ragozzino et al., 2009), levels of  
565 CHO in the VS were not associated with reversal learning. However, VS CHO levels were  
566 associated with model parameters which contributed to initial learning. Though Ragozzino et al.  
567 demonstrated that ACh levels in the VS did not change during reversal learning, they did not test if  
568 they changed during initial learning. Successful learning requires the ability to learn from feedback,

569 which is signalled by dopaminergic prediction error signalling in the VS (Schultz et al., 1997). The  
570 rodent VS has a higher density of cholinergic interneurons than the DS (Matamales et al., 2016) and  
571 changes in cholinergic activity are time locked to changes in dopaminergic activity, which is  
572 thought to enhance the contrast of prediction error signalling (Aosaki et al., 2010). Indeed,  
573 cholinergic activity in the VS has been linked with effective learning of a stimulus-outcome  
574 association (Brown et al., 2012), therefore, it is likely that cholinergic activity in the VS is involved  
575 in some aspect with goal-directed learning, and further studies should explore this contribution.

576 We used several controls to demonstrate that these effects are specific to CHO levels in the  
577 striatum, not least because our MRS application method is novel. We acquired data from a voxel in  
578 the cerebellum, geometrically identical to the striatal voxels. No learning effects were present in the  
579 cerebellum, demonstrating that our findings are specific to the striatum. Additionally, we also  
580 quantified two control metabolites (NAA and tCR) to ensure that the results were specific to the  
581 metabolite of interest, rather than a general measurement or region effect. None of the effects were  
582 seen in levels of NAA and tCR in the DS or VS. Importantly, none of the effects were seen when  
583 modelling all three peaks together (tCHO), highlighting once more the importance of separating  
584 CHO when using  $^1\text{H}$ -MRS to investigate individual differences in CCC levels.

585 In conclusion,  $^1\text{H}$ -MRS was used to demonstrate that average levels of CHO in the human DS are  
586 associated with performance during probabilistic reversal, but not during initial learning. This is in  
587 line with evidence from the animal literature and our own prior work with humans which suggests a  
588 specific role for cholinergic activity in the DS during reversal learning. These results provide  
589 evidence for the role of the human cholinergic striatum in reversal learning and behavioural  
590 flexibility more generally. Additionally, these findings further support the idea of using CHO levels  
591 as measured by  $^1\text{H}$ -MRS as a tool for non-invasive *in vivo* monitoring of both healthy human  
592 neurochemistry, as well as disorders of the human cholinergic system.

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