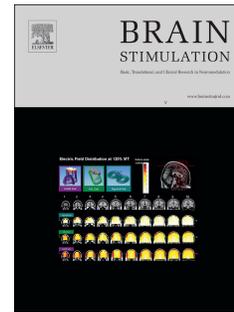


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Anterior thalamic stimulation improves working memory precision judgments

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1 **Anterior thalamic stimulation improves working memory precision judgments**

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16

17

18 **Abstract:**

19 **Background:** The anterior nucleus of thalamus (ANT) has been suggested as an
20 extended hippocampal system. The circuit of ANT and hippocampus has been widely
21 demonstrated to be associated with memory function. Both lesions to each region and
22 disrupting inter-regional information flow can induce working memory impairment.
23 However, the role of this circuit in working memory precision remains unknown.

24 **Objective:** To test the role of the hippocampal-anterior thalamic pathway in working
25 memory precision, we delivered intracranially electrical stimulation to the ANT. We
26 hypothesize that ANT stimulation can improve working memory precision.

27 **Methods:** Presurgical epilepsy patients with depth electrodes in ANT and
28 hippocampus were recruited to perform a color-recall working memory task.
29 Participants were instructed to point out the color they were supposed to recall by
30 clicking a point on the color wheel, while the intracranial EEG data were
31 synchronously recorded when participants performed the task. For randomly selected
32 half trials, a bipolar electrical stimulation was delivered to the ANT electrodes.

33 **Results:** We found that compared to non-stimulation trials, working memory
34 precision judgements were significantly improved for stimulation trials. ANT
35 electrical stimulation significantly increased spectral power of gamma (30-100Hz)
36 oscillations and decreased interictal epileptiform discharges (IED) in the
37 hippocampus. Moreover, the increased gamma power during the pre-stimulus and
38 retrieval period predicted the improvement of working memory precision judgements.

39 **Conclusion:** ANT electrical stimulation can improve working memory precision

40 judgements and modulate hippocampal gamma activity, providing direct evidence on
41 the role of the human hippocampal-anterior thalamic axis in working memory
42 precision.

43 **Keywords:** anterior nucleus of thalamus, electrical stimulation, hippocampus,
44 neural oscillations, working memory precision

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46 **Highlight:**

47 Electrical stimulation to ANT induced the improvement of working memory
48 precision.

49 Electrical stimulation to ANT increased gamma activity and decreased IED in the
50 hippocampus.

51 Increased post-stimulation gamma predicted the improvement of working memory
52 precision.

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54 **Introduction**

55 Working memory is a critical cognitive function[1] in supporting a lot of daily
56 behavior including learning[2], decision making[3], and language comprehension[4].
57 Recent studies suggest that the hippocampus was involved in working memory[5-
58 8].According to the multiplexing buffer model, working memory contents are
59 represented by neural assemblies synchronized in gamma oscillations locked to
60 specific phases of low frequency oscillations[9-11]. Consistent with this, several
61 studies have found increased hippocampal gamma activity with working memory load
62 [6, 7] and prominent theta-gamma coupling in the hippocampus when multiple items
63 are retained[5]. A rodent study reported that successful working memory was linked
64 to synchronized gamma oscillations within hippocampal formation[8]. Furthermore,
65 human intracranial EEG study revealed that hippocampal gamma power during
66 memory retrieval was predictive of memory precision[12].

67 With dense and reciprocal connections with the hippocampus[13-15], and its
68 involvement in cognitive function[15-17], the anterior nucleus of thalamus (ANT) has
69 been suggested as an extended hippocampal system[18-20]. A rodent study found that
70 disrupting information flow between the hippocampal and ANT impaired spatial
71 working memory performance[21]. Electrical stimulation directly targeted to the
72 hippocampus can disrupt memory performance[22, 23]. Given the evidence that
73 stimulating a critical node within a functional network may modulate the network
74 function[24], targeting hippocampal afferent projections may be a more efficient
75 strategy to drive the downstream structure in order to modulate memory

76 performance[25]. Thus, it is possible to modulate working memory performance by
77 electrically stimulating the ANT.

78 The current study was to examine whether directly electrical stimulation of ANT
79 can modulate working memory precision. A classic color recall paradigm[26, 27] was
80 performed by drug-resistant epileptic patients with implanted depth electrodes, while
81 a bipolar electrical stimulation was delivered to the ANT electrodes for a half of trials.
82 Given the evidence that extensive functional and anatomy connections between the
83 hippocampus and ANT and the hippocampus also plays a role in working memory, we
84 hypothesized that ANT electrical stimulation may improve working memory precision
85 judgements.

86 **Materials and Methods**

87 **Participants**

88 Eight patients with medically refractory temporal lobe epilepsy who were
89 stereotactically implanted the stereo-electroencephalography (SEEG) depth electrodes
90 to identify epileptogenic zones at Xuanwu hospital were recruited in the current study.
91 Demographic information for each patient was shown in Table 1. All patients reported
92 normal or corrected to normal acuity and normal color vision. Informed consent was
93 obtained from all subjects and study procedures were approved by the ethical
94 committee of Xuanwu Hospital, Capital Medical University.

95 **Electrode Localization**

96 Postoperative CT was co-registered to the preoperative MRI using FreeSurfer
97 Software Suite[28] (<http://surfer.nmr.mgh.harvard.edu>) and FMRIB Software

98 Library(<https://fsl.fmrib.ox.ac.uk>)[29]. The implanted electrodes were reconstructed
99 using the stereotactic localization software[30]. Then all electrodes were mapped onto
100 a standard MNI space. All hippocampal contacts (56 contacts from 8 patients, red
101 circles) in the MNI space were visualized using BrainNet viewer[31].

102 **Electrophysiological recordings and data preprocessing**

103 Intracranial EEG data were recorded by Blackrock Neuroport recording system during
104 the experiment, with a sample rate at 2000 Hz. Artifact periods were identified by
105 visual inspection and rejected from the raw signals. Bipolar re-reference was
106 employed to reduce volume conduction as well as confounding interactions between
107 neighboring contacts. The resultant data were broken into event-related epochs for
108 further analysis.

109 **Electrical stimulation**

110 Electrical stimulation was delivered extra operatively by an external stimulator
111 (CereStim R96, Blackrock Microsystems) while the participants performed the task.
112 The stimulation was entered to the paired neighbor contacts in the ANT using
113 biphasic rectangular pulses with a width of 300 μ s and an amplitude of 0.2mA at the
114 frequency of 50Hz (Fig. 1B-C). Pat2 receives 50Hz stimulation at the amplitude of
115 0.5mA (Table 1).

116 **Experimental paradigm**

117 The working memory task was presented on a 14-in laptop monitor at a viewing
118 distance of about 60 cm with a grey background. A trial started with the display of a
119 white fixation cross (0.3°) on the center of the screen, lasting for 4.2 - 5.2 s (Fig. 1A).

120 Two colored squares ($1.5^\circ \times 1.5^\circ$) were displayed centrally and sequentially, each of
121 which lasted for 0.3 s and was followed by an interval of 0.4-0.5 s in which only the
122 fixation cross was showed centrally. The two colors were chosen at random from nine
123 pre-selected colors, each of which was spaced at least 40 degrees on a color wheel
124 comprising a circularly gradient subset of colors. After that, a cued Arabic numeral (1
125 or 2) was evenly shown for 0.55 s, indicating which color to be recalled afterwards.
126 The cue was followed by another interval of 2.5-3 s only with the fixation cross. Then
127 a color wheel was displayed and consisted of continuous colors (a thick of 1.5° and a
128 radius of 9.5°). Participants were instructed to point out the color they were supposed
129 to recall by using a mouse to click a point on the color wheel. To eliminate the
130 contribution of spatial memory, the color wheel rotated randomly across trials. One
131 second electrical stimulation were implemented in randomly selected trials across all
132 10 blocks (90 trials for stimulation trials, 90 trials for non-stimulation trials). Each
133 block was composed of 18 trials and the participants can rest during the interval of
134 blocks. The first and last 4 trials (8trials) from the whole 180 trials that did not
135 contain stimulation. Pre-stimulus statement is important for the subsequent task, as
136 recent studies suggested[32-34]. Previous studies applying stimulation during task
137 generally disrupt memory[22-24]. Exogenous stimulation might disrupt the ongoing
138 organized cognitive activities inside the brain. Multiple studies have shown that pre-
139 stimulus neural activity is important for the subsequent task[32-36]. Therefore,
140 electrical stimulation was applied beginning 2.2-2.7 s before the first color square
141 onset trying to modulate the mental state in the pre-stimulus, as referred to the recent

142 study[25]. The subjects were not informed which trials were sham and which
143 contained stimulation and they also can't report the occurrence of stimulation. Before
144 the formal experiment, we initially tested the used parameter of electrical stimulation.
145 We asked the patients whether they felt any differences when electrical stimulation
146 was silently delivered or not. None of the patients reported they feel anything
147 different when electrical stimulation was delivered.

148 **Data processing and statistical analysis**

149 **Working memory precision**

150 We estimated the precision of working memory based on the Swap model in which
151 three responses were measured: target response when participants correctly reported
152 the color of the probed item with some variability, non-target response when subjects
153 mistakenly reported the color that was not supposed to recall (e.g., though the second
154 color was cued, the first color was recalled) and guessing response for the probe item
155 completely not in memory[37]. Both target responses and non-target responses fit to a
156 Von Mises distribution centered on the color value of probed and misreported item,
157 respectively, with the same standard deviation since target and non-target colors will
158 on average be stored with the same precision[37]. The guessing response was
159 assumed to be a uniform distribution because subjects may response randomly when
160 no color information was memorized (Fig. 1D). The model can be described in the
161 equation:

$$p(\hat{\theta}) = (1 - \gamma - \beta)\phi_{\sigma}(\hat{\theta} - \theta) + \gamma \frac{1}{2\pi} + \beta \frac{1}{m} \sum_i^m \phi_{\sigma}(\hat{\theta} - \theta_i)$$

162 where $\hat{\theta}$ is the reported color value (in radians), θ is the target color value, and θ_i
 163 is the non-target color value. γ is the proportion of trials on which the subject
 164 responds at random, and β is the probability of misremembering the target location.
 165 ϕ_{σ} denotes the Von Mises distribution with mean of zero and standard deviation
 166 (SD). The SD of the Von Mises distribution reflects the overall precision of
 167 responses, which we referred as Recall SD in the following. For each patient, we first
 168 used the Bays' lab toolbox to obtain an estimation of concentration parameter
 169 (K)[37]. K was further converted to the circular standard deviation of the Von Mises
 170 distribution with the function k2sd. (<https://bayslab.com/code.php>).

172 **Oscillatory power**

173 We calculate the power prior stimulus onset as follows. We created the sham
 174 stimulation time point (2.2-2.7 s before the first color square) for trials without
 175 stimulation according to the electrical stimulation onset in trials with stimulation. The
 176 sham stimulation had the same time window as the true stimulation. We measured
 177 oscillatory power in the LFP signals with Morlet wavelets (wave number = 5) at 40 log-
 178 spaced frequencies between 1 and 200 Hz using Fieldtrip toolbox [38]. The power (P)
 179 per frequency at each time point was log transformed and corrected to the averaged
 180 baseline power (P0) across all trials (-1.5 to -0.5 s prior to electrical stimulation onset
 181 or sham electrical stimulation onset) and time 10 to obtain the normalized power (dB)
 182 (i.e., $10 \times \log_{10}(P/P_0)$). Gamma power (30-100Hz) was measured in 0.8 s time window

183 (i.e., 0.2 s to 1 s after stimulation offset for trials with stimulation, 0.2 s to 1 s after sham
184 stimulation offset for trials without stimulation).

185 We further examined the hippocampus activity during the first encoding, the
186 second encoding, retrieval. The preprocessed hippocampal data were grouped into
187 event-related epochs. We then did time-frequency decomposition and baseline
188 correction exactly the same way as above. The baseline correction time window was -
189 1.5 to -0.5 s prior to electrical stimulation onset for trials with stimulation, -1.5 to -0.5
190 s prior to sham electrical stimulation onset for trials without stimulation. Gamma
191 power (30-100Hz) was extracted for the first encoding (i.e., 0.25 to 0.7 s after first
192 color onset), the second encoding (i.e., 0.25 to 0.7 s after second color onset), retrieval
193 (i.e., 0.5 to 1.5 s after the cue onset). The start of the encoding window was based on
194 the finding that stimulus-evoked activity was shown to emerge in the hippocampus
195 0.25 s after external stimulus onset[12, 39, 40]. We chose the time window of retrieval
196 according to a recent study indicating that memory retrieval happened between 0.5 s
197 and 1.5 s after the cue presentation[41].

198 **Interictal epileptiform discharges analysis**

199 Abnormal electrical activity during interictal intervals, i.e., interictal epileptiform
200 discharges (IED), was found in the hippocampus for patients with temporal lobe
201 epilepsy[42] which can impair memory function[43, 44]. In the current study, an
202 automated detection algorithm developed in a previous study[45] was used to identify
203 IEDs for all patients. In brief, the preprocessed data were downsampled to 200 Hz,
204 then band-pass filtered from 10 Hz to 60 Hz. Instantaneous envelope of each channel

205 was obtained by calculating the absolute value of the Hilbert transform of the filtered
206 data. The signal envelope was segmented using sliding windows with a width of 5 s
207 and an overlap of 80%. The time varying threshold of $k \times (\text{Mode} + \text{Median})$ was used
208 to detect IED, where k was 5 in this study and Mode and Median was obtained
209 through a maximal likelihood estimation of a log-normal statistical distribution of the
210 signal envelope in each segment. Each channel had its own envelope and its own
211 threshold curve now. Local maxima at intersections between envelope and threshold
212 curves were marked as detected IEDs. Originally, the performance of the automated
213 detector performance was evaluated by experienced neurophysiologists which showed
214 high detective sensitivity and low false positive rate[45]. To eschew the possibility
215 that the stimulation artifacts (in stim trials) affected the variability of LFP signals,
216 which may consequently reduce the sensitivity of IED detection. We removed the
217 instantaneous envelope when electrical stimulation was implemented. The removed
218 time window was from 0.2 s before stimulation onset to 0.2 s after stimulation offset.
219 In the current study, to examine the effect of ANT stimulation to the occurrence rate
220 of hippocampal IEDs during the working memory task, we detected IED during the
221 entire recording. After that, the number of IEDs detected from the first color square
222 onset until the response action were summed up and then divided by the total time
223 length to calculate the IED rate (count/sec). Afterwards, the IED rate was compared
224 between trials with and without stimulation.

225 **Statistical analysis**

226 Statistical analysis was processed using custom scripts combined with open source
227 toolboxes developed in MATLAB (MathWorks, Natick, MA, USA). Wilcoxon
228 signed-rank test was performed to measure the effect of stimulation and difference in
229 memory precision of the probed color. The comparison of gamma power and IED rate
230 of the hippocampus between electrical stimulation and non-stimulation were carried
231 out using linear mixed-effect (LME) model. The LME model is a sort of regression
232 model in which the variation of a dependent variable is modeled as a function of both
233 fixed and random effects[46]. LME model is very suitable for our dataset because it
234 can be used at a group level, while accounting for repeated measurements from one
235 sample, which occurred as we tested the stimulation effects at the same contact.
236 Furthermore, the LME model can account for the uneven sampling across conditions
237 and groups. This characteristic is important for our analysis because participants had
238 different number of contacts in the hippocampus. The LME model was defined as
239 follows:

240 $Y \sim \text{condition} + (1|\text{subject}) + (1|\text{subject: electrode})$

241 The condition was fixed effect variable, while subject and electrode were random
242 effect variable. We compared gamma power (Y) between trials with and without
243 electrical stimulation during the pre-stimulus fixation, the first encoding, the second
244 encoding, retrieval and the trial offset period separately. The condition referred to the
245 trial type (trials with stimulation and trials without stimulation). To examine the
246 change of IED rate, the condition was trials with and without stimulation, while Y

247 was IED rate under the corresponding condition. The LME model was implemented
248 using the *fitlme* function in MATLAB. The correlation between the changed
249 electrophysiological activity (i.e., gamma power/IED with electrical stimulation -
250 gamma power/IED without electrical stimulation) and precision change (i.e., SD with
251 electrical stimulation - SD without electrical stimulation) was measured by Spearman
252 correlation.

253 **Results**

254 **Electrical stimulation enhanced working memory precision** 255 **judgements**

256 For each subject, the recall SD calculated by fitting the error distributions using the
257 Swap model, in which smaller recall SD indicated better memory precision[37] (Fig
258 1D). To determine the behavioral effects of stimulation, we compared recall SD
259 between trials in which subjects did and did not receive stimulation using Wilcoxon
260 signed-rank test. We found that electrical stimulation significantly improved memory
261 performance ($z = 2.240$, $p = 0.025$) (Fig. 2A). Furthermore, the working memory
262 precision improvements were highly consistent across subjects (7/8) (Fig. 2B). These
263 results indicated that stimulation delivered to the ANT during the pre-encoding
264 fixation can improve working memory precision judgement.

265 **Increased hippocampus gamma activity**

266 Given that the hippocampus has been proposed involving in processing memory

267 precision[12], we analyzed the neural changes of 56 hippocampal contacts (Fig. 3A)
268 related to ANT stimulation. Recent studies found that electrical stimulation enabled to
269 induce high-frequency activity and that the induced gamma activity was associated
270 with memory performance[47]. In the current study, pre-stimulus gamma power (30-
271 100Hz) in stimulation trials were compared with that in the non-stimulation trials
272 using the LME model. The analysis showed an increased gamma power in the
273 hippocampus after ANT stimulation during pre-stimulus fixation ($\beta = -0.155$, $t(110) =$
274 -3.447 , $p < 0.001$) (Fig. 3B-C). We also found hippocampus gamma power was
275 higher during the first encoding ($\beta = -0.101$, $t(110) = -2.990$, $p = 0.003$,
276 supplementary Fig. 1B), the second encoding ($\beta = -0.101$, $t(110) = -3.526$, $p < 0.001$,
277 supplementary Fig. 1D) and retrieval ($\beta = -0.104$, $t(110) = -3.471$, $p < 0.001$) in the
278 trial with stimulation (Fig. 3F). However, the theta, alpha and beta power were not
279 significant between trials with and without stimulation during different stages (all p
280 values > 0.05 , supplementary Fig. 1A-D).

281 **Decreased IED rate in the hippocampus**

282 Considering the subjects recruited in the current study was patients with temporal lobe
283 epilepsy, we further examined whether electrical stimulation improved memory
284 precision by reducing epilepsy discharges. IED was recognized as the biomarker of
285 epileptogenic tissue and hippocampal IED can cause cognitive impairments[42, 43].
286 We computed IED incidence for each hippocampal contact between trials with and
287 without stimulation. Using the LME model, we found statistically reliable reduction

288 in IED rate as a result of electrical stimulation ($\beta = 0.010$, $t(110) = 2.782$, $p = 0.006$)
289 (Fig. 4).

290 **Correlation between electrophysiological activity and** 291 **behavioral performance**

292 Next, we performed the correlation analysis between electrophysiological activity
293 (gamma power and IED) and behavioral performance. We did not find that
294 hippocampal IED rate change was related to working memory precision change (IED:
295 $r = -0.262$, $p = 0.536$). However, the correlation between pre-stimulus hippocampal
296 gamma power change and working memory precision change was significant ($r = -$
297 0.738 , $p = 0.046$) (Fig. 3D). Further, the increased gamma power during the retrieval
298 period was also correlated with working memory improvement ($r = -0.881$, $p =$
299 0.007 Fig. 3E). The increased gamma power during the first encoding and second
300 encoding was not correlated with working memory improvement (all $p > 0.05$).

301 **Discussion**

302 The current study revealed that electrical stimulation targeted to ANT was effective in
303 improving working memory precision. Indeed, we found that ANT stimulation can
304 increase hippocampal gamma power, and decrease IED occurrence rate in the
305 hippocampus. Increased hippocampal gamma power significantly correlated with the
306 working memory precision judgements, which provided the causal role of the
307 hippocampal-anterior thalamic axis in working memory precision.

308 A large number of studies attempted to improve memory via electrical

309 stimulation delivered to hippocampus related structures and yielded inconsistent
310 results[22, 23, 25, 48]. The current study applied electrical stimulation to ANT, one of
311 the primary components in the circuit of Papez. The Papez circuit was proposed as the
312 anatomical basis of memory[49]. Researchers has proposed that modulating the neural
313 activity in the Papez circuit can affect hippocampal activity and thus change memory
314 performance. Consistent with this, we found electrical stimulation improved working
315 memory precision, which can be predicted by the increased hippocampal gamma
316 power. Our results supported the growing consensus that direct electrical stimulation
317 can enable to modulate the activity of a distributed network connected to the
318 stimulation site[24, 50]. This inference was line with the perspective from
319 noninvasive stimulation used to investigate global brain network dynamics and
320 organization[51].

321 We delivered electrical stimulation to ANT, and found stimulation improve
322 working memory precision. Given this result indicates hippocampal-anterior thalamic
323 axis is causally involved, there are two possibilities accounting for working memory
324 precision improvement. First, ANT stimulation itself may improve memory directly as
325 it is a critical component of the extended hippocampal system supporting memory[19,
326 20]. Furthermore, ANT was reported to play a vital role in memory-guided
327 attention[16, 17, 52]. Moreover, a recent study revealed shared neural mechanisms
328 between attention and working memory[53]. Second, working memory precision was
329 improved by the modulated activity in the hippocampus. ANT is densely connected to
330 the hippocampus[13, 15]. Recent study suggests that it is essential to modulate

331 cognitive function by stimulating one of connected nodes comprising a functional
332 network[24]. Indeed, we found that ANT stimulation can increase hippocampal
333 gamma power and the increased gamma power was predictive of the improved
334 working memory precision. The hippocampus has been suggested to be involved in
335 working memory processing either when multiple items were maintained or when
336 objects were presented sequentially[5, 54]. Both human and animal studies have
337 shown that working memory is linked to gamma activity in the hippocampus[5, 6, 8].
338 Thus, the modulated activity in the hippocampus may contribute to working memory
339 improvement.

340 It was possible that electrical stimulation delivered to ANT may change the
341 patient's mental state by increasing alertness or attention prior to the stimulus input.
342 Multiple studies have shown that pre-stimulus neural activity can explain the trial-by-
343 trial variability in perceptual and cognitive performance[32-35]. Consistent with this,
344 the increased pre-stimulus hippocampal gamma power was correlated with memory
345 improvement. In addition, gamma power during the encoding and retrieval period
346 were also enhanced by electrical stimulation. The increased gamma power during
347 retrieval was also predictive of memory improvement. Our results were consistent
348 with previous study that hippocampus gamma power was necessary for working
349 memory execution[8]. Taken together, it is possible that electrical stimulation
350 delivered to ANT may increase patient's alertness or attention during the pre-stimulus
351 stage and further affect subsequent memory encoding and retrieval.

352 We also observed that ANT stimulation may suppress hippocampal pathological,

353 consistent with our previous clinical study[14]. However, the decrease of IED can't
354 predict working memory improvement, although multiple studies have demonstrated
355 that hippocampal IED was associated with memory performance[43, 44, 55]. It is
356 possible that IED may primarily affect long-term memory, while our task is working
357 memory.

358 There are three limitations in this study. First, the sample size is relatively small.
359 Confirmation of the stimulation effect observed required further investigation by
360 recruiting a large number of participants. Also, this small sample size limited us to
361 further investigate the laterality effect of ANT stimulation. Second, all of the
362 individuals in the present study were patients with drug-resistant epilepsy. Hence
363 generalizing the current results to other groups should be treated with caution. On the
364 other hand, a lot of patients with epilepsy have reported memory deficits and
365 improving memory for them is essentially a therapeutic goal. Third, this study found
366 that ANT stimulation can improve working memory precision in humans. However, it
367 is unknown whether other stimulation parameters such as intensity, duration and
368 stimulation period may also modulate working memory performance. Fourth, it is
369 possible that electrical stimulation delivered to ANT may increase patient's alertness
370 or attention during the pre-stimulus stage and further affect subsequent memory
371 encoding and retrieval. However, in this study we can't determine which stage is more
372 important for the working memory improvement. Future studies may directly test this
373 by delivering electrical stimulation during different stages separately.

374 **Conclusion**

375 This study showed that intracranial electrical stimulation to the anterior nuclear of
376 thalamus can improve working memory precision and increase hippocampal gamma
377 activity. The increased hippocampal gamma activity during pre-stimulus and retrieval
378 was predicted by the subsequent improvement of working memory precision. These
379 results suggest the critical roles of the hippocampal-anterior thalamic axis in working
380 memory precision.

381

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577

578 **Table 1:** Demographic information and electrical stimulation parameters for each patient.

ID	Age/ Gender	Supposed seizure zone	Stimula tion site	Electrodes/ Total contacts	Stimulation current (mA)
Pat1	23/M	Bi-MTL	L-ANT	4/40	0.2
Pat2	18/F	R-MTL	R-ANT	8/124	0.5
Pat3	26/F	R-TL	R-ANT	6/92	0.2
Pat4	29/F	R-MTL	R-ANT	7/123	0.2
Pat5	26/M	Bi-MTL	L-ANT	5/84	0.2
Pat6	35/F	R- MTL	R-ANT	7/99	0.2
Pat7	17/F	R-aTL, Hipp, pTL	R-ANT	8/124	0.2
Pat8	27/M	L-TL	L-ANT	7/112	0.2

579 Pat: patient; F: female; M: male; L: left hemisphere; R: right hemisphere; ANT: anterior nucleus

580 of thalamus; Bi: bilateral hemisphere; aTL: anterior temporal lobe; MTL: medial temporal lobe;

581 TL: temporal lobe; FL: frontal lobe; Hipp: hippocampus; pTL = posterior temporal lobe;

582

583 **Figure legends**

584 **Figure 1.** Task design. (A) Trials started with a white fixation cross on the center of the
585 screen. Two colored squares were displayed sequentially. Then a cued Arabic numeral (1 or
586 2) was evenly and randomly showed, indicating which color to be recalled afterwards. After
587 an interval, participants were instructed to point out the color they were supposed to recall by
588 using a mouse to click a point on the color wheel. Electrical stimulation was applied
589 beginning 2.2–2.7 s before the first color square onset (red bar). (B) An example electrode
590 (black filled circles) is display for Pat 3. The most medial contact is located in the ANT
591 (black arrow). (C) Stimulation patterns. Stimulation was implemented using of biphasic
592 rectangular pulses with a width of 300 μ s and an amplitude of 0.2mA (inter-pulse interval of
593 60 μ s) at the frequency of 50Hz. (D) Swap model fitting the behavior responses. An
594 exemplary response (black bar) was represented on the color wheel (left). A probabilistic
595 model was used to fit the performance in which there are three possible sources: Von Mises
596 variability centered at target color, another von Mises distribution with the same
597 concentration but centered at nontarget color and a fixed probability of simply guessing at
598 random (right).

599 **Figure 2.** ANT stimulation enhances working memory precision. (A) Working memory
600 precision (Recall SD) of trials with (Stim) and without stimulation (Nonstim) ($z = 2.240$, $p =$
601 0.025). (B) Percentage change in working memory precision for each participant.

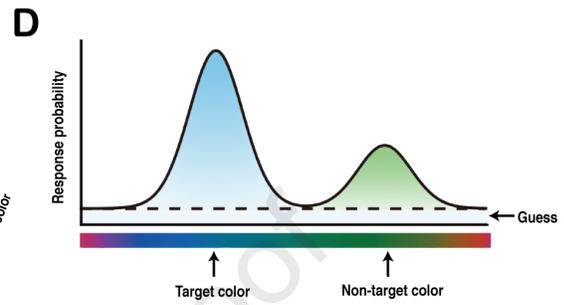
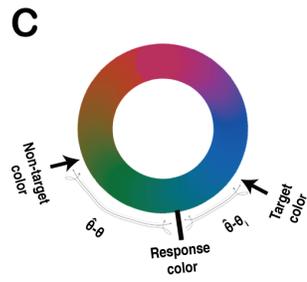
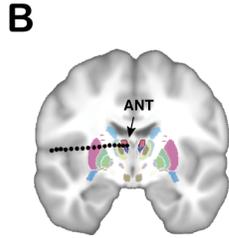
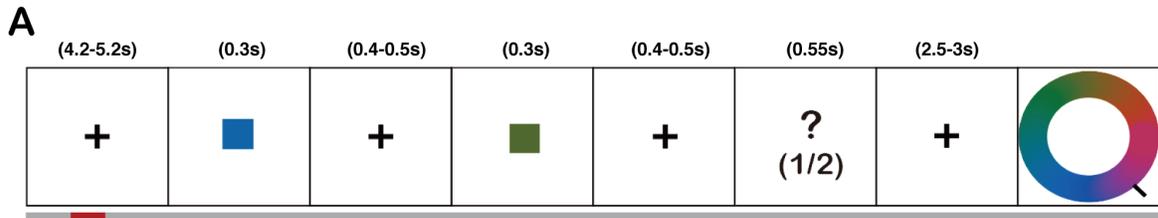
602 **Figure 3.** ANT stimulation increases hippocampal gamma activity. (A) All hippocampal
603 contacts (56 contacts from 8 patients) are delineated in the MNI space. (B) Pre-stimulus gamma

604 power (trials with stimulation vs trials without stimulation). The blackout (0-1 s) is the electrical
605 stimulation duration. (C) Gamma power (30-100Hz) was significant higher for trials with
606 stimulation than trials during pre-stimulus fixation based on the LME model ($\beta = -0.155$, $t(110)$
607 $= -3.447$, $p < 0.001$). (D) Correlation between gamma power change (i.e., gamma power with
608 electrical stimulation - gamma power without electrical stimulation) during pre-stimulus
609 fixation and memory recall SD change ($\rho = -0.738$, $p = 0.046$). (E) Significant correlation
610 between gamma power change during retrieval (i.e., gamma power with electrical stimulation
611 - gamma power without electrical stimulation) and memory recall SD change (i.e., SD with
612 electrical stimulation - SD without electrical stimulation) ($\rho = -0.881$, $p = 0.007$). Each
613 colored circle denotes one patient. (F) Gamma power was significant increased during retrieval
614 in trials with stimulation based on the LME model ($\beta = -0.104$, $t(110) = -3.471$, $p < 0.001$).
615 *** $p < 0.001$

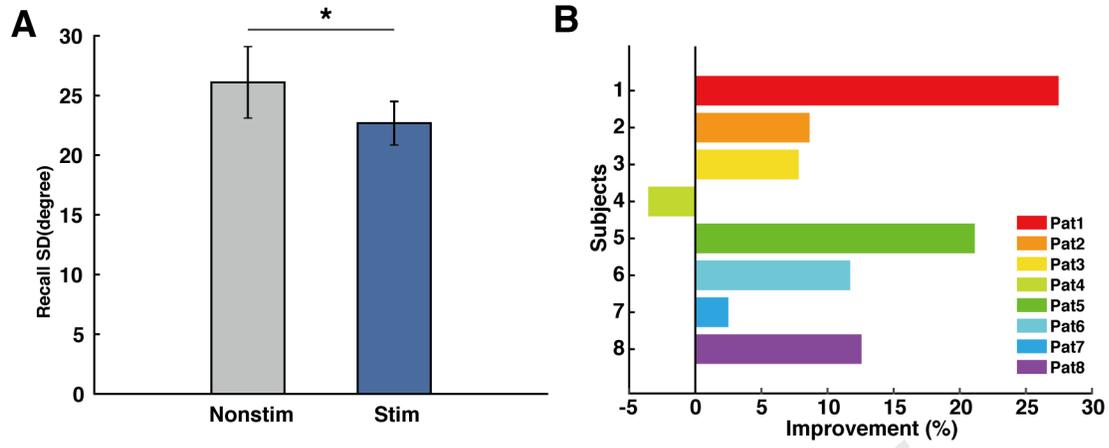
616 **Figure 4.** ANT stimulation decreases hippocampal IED rate. (A) Averaged IED rate from the
617 first color square onset to response action is significantly decreased for trials with electrical
618 stimulation compared with trials without electrical stimulation ($\beta = 0.010$, $t(110) = 2.782$, $p =$
619 0.006). (B) Two example IEDs (marked in red circles) using an automatic detection method.
620 (C) Raster plot of detected IEDs across trials without stimulation (upper) and with stimulation
621 (lower) for patient 2. Each vertical red bar denotes an IED detected at a specific time.

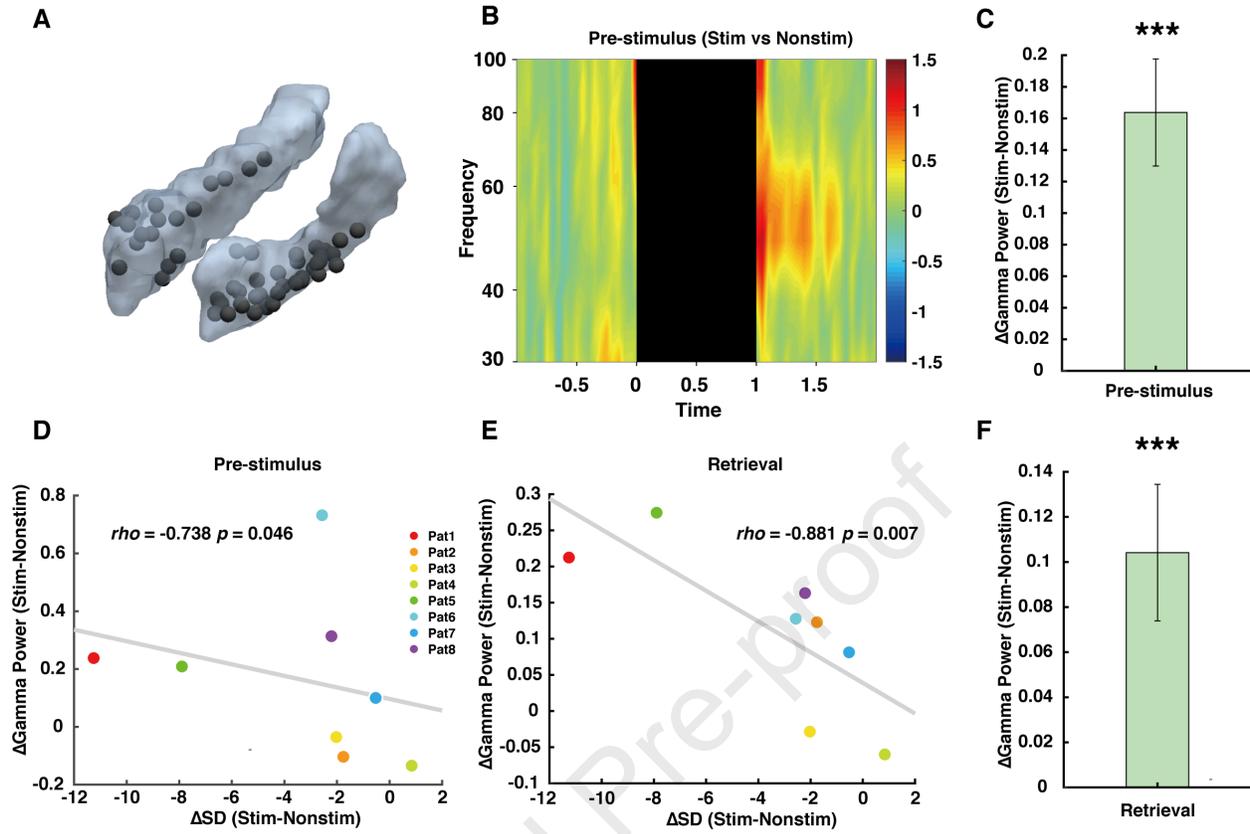
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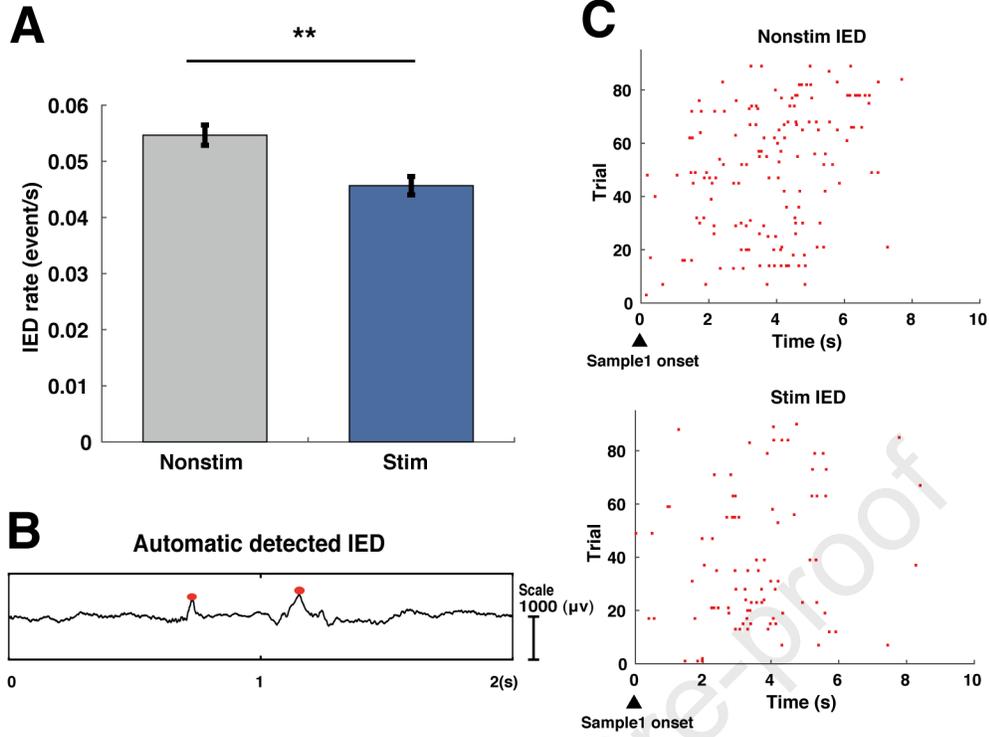
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Journal Pre-proof







Highlight:

Electrical stimulation to ANT induced the improvement of working memory precision.

Electrical stimulation to ANT increased gamma activity and decreased IED in the hippocampus.

Increased post-stimulation gamma predicted the improvement of working memory precision.

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Competing interests: The authors report no competing interests.

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