



# Bidirectional Mapping with Contrastive Learning on Multimodal Neuroimaging Data

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**Abstract.** The modeling of the interaction between brain structure and function using deep learning techniques has yielded remarkable success in identifying potential biomarkers for different clinical phenotypes and brain diseases. However, most existing studies focus on one-way mapping, either projecting brain function to brain structure or inversely. This type of unidirectional mapping approach is limited by the fact that it treats the mapping as a one-way task and neglects the intrinsic unity between these two modalities. Moreover, when dealing with the same biological brain, mapping from structure to function and from function to structure yields dissimilar outcomes, highlighting the likelihood of bias in one-way mapping. To address this issue, we propose a novel bidirectional mapping model, named Bidirectional Mapping with Contrastive Learning (BMCL), to reduce the bias between these two unidirectional mappings via ROI-level contrastive learning. We evaluate our framework on clinical phenotype and neurodegenerative disease predictions using two publicly available datasets (HCP and OASIS). Our results demonstrate the superiority of BMCL compared to several state-of-the-art methods.

**Keywords:** Bidirectional reconstruction · BOLD signals · Structural networks · Prediction · Biomarkers

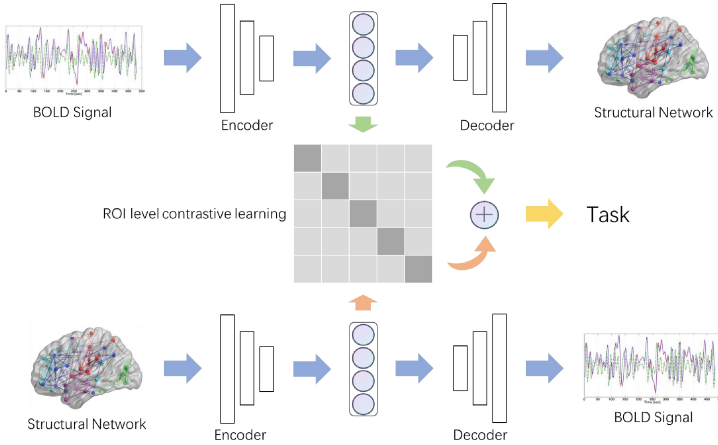
## 1 Introduction

Recent advancements in applying machine learning techniques to MRI-based brain imaging studies have shown substantial progress in predicting neurodegenerative diseases (e.g., Alzheimer’s Disease or AD) and clinical phenotypes (e.g.,

behavior measures), and in uncovering novel biomarkers that are closely related to them [4]. Different MRI techniques can be used to depict different aspects of the brain organization or dynamics [8, 19, 23]. In general, diffusion MRI can derive brain structural networks that depict the connectivity of white matter tracks among brain regions, which gains system-level insights into the brain structural changes related to brain diseases and those phenotypes [29]. However, the structural networks may not inform us about whether this tract or the regions it connects are “activated” or “not activated” in a specific state. As a complementary counterpart, the functional MRI provides measures of BOLD (blood-oxygen-level-dependent) signals to present activities of brain regions over time [3], but no clue on whether those regions are physically connected or not. Therefore, different brain imaging data provide distinct but complementary information, and separately analyzing the data of each modality will always be suboptimal. In this context, multimodal approaches are being explored to improve prediction accuracy by integrating multiple information sources [9, 13, 27, 31–33]. For example, it has been shown that combining different modalities of data (e.g., image and text) can enhance performance in image classification and clustering tasks [27, 33]. In the healthcare field, multimodal machine learning has shown its potential in disease detection and diagnosis [13]. In brain imaging studies, many studies aim to explore multimodal MRI data representations by modeling the communications between functional MRI and its structural counterpart. Most of these studies primarily focus on establishing a unidirectional mapping between these two imaging modalities (i.e., mapping from structural MRI data to the functional counterpart [24, 32], or the inverse [16, 31]). However, for the same biological brain, these two mappings generate distinct results, which highlights the likelihood of bias in the unidirectional mapping approach.

To address this, we propose a novel bidirectional mapping framework, where the mapping from structural MRI data (i.e., diffusion MRI-derived brain structural network) to the functional counterpart (i.e., BOLD signals) and the inverse mapping are implemented simultaneously. Unlike previous studies [6, 15, 22, 28, 32] that employ unidirectional mappings, our approach leverages bidirectional mapping, minimizing the discrepancies in the latent space of each one-way mapping through contrastive learning at the brain region-of-interest level (ROI level). This method subsequently unveils the inherent unity across both imaging modalities. Moreover, our framework is interpretable, where we employ integrated gradients [20] to generate brain saliency maps for interpreting the outcomes of our model. Specifically, the identified top key brain ROIs in the brain saliency maps are closely related to the predicted diseases and clinical phenotypes. Extensive experiments have been conducted to demonstrate the effectiveness and superiority of our proposed method on two publicly available datasets (i.e., the Human Connectome Project (HCP), and Open Access Series of Imaging Studies (OASIS)). In summary, the contributions of this paper can be outlined as follows:

- We propose a novel bidirectional framework to yield multimodal brain MRI representations by modeling the interactions between brain structure and the functional counterpart.
- We use contrastive learning to extract the intrinsic unity of both modalities.
- The experimental results on two publicly available datasets demonstrate the superiority of our proposed method in predicting neurodegenerative diseases and clinical phenotypes. Furthermore, the interpretability analysis highlights that our method provides biologically meaningful insights.



**Fig. 1.** The pipeline of Bidirectional Mapping with Contrastive Learning (BMCL). The brain structural network and BOLD signals are initially processed by two separate encoders for representation learning. Afterward, ROI-level contrastive learning is applied to these extracted representations, facilitating their alignment in a common space. These derived representations are then utilized for downstream prediction tasks.

## 2 Method

The proposed bidirectional mapping framework (Fig. 1) comprises two encoder-decoder structures. One constructs BOLD signals from structural networks, while the other performs the inverse mapping. A ROI-level’s contrastive learning is utilized between the encoder and decoder to minimize the distinction of the latent spaces within two reconstruction mappings. Finally, a multilayer perceptron (MLP) is utilized for task predictions. It’s worth mentioning that instead of using the functional connectivity matrix, we directly utilize BOLD signals for bidirectional mapping. We believe this approach is reasonable as it allows us to capture the dynamic nature of the brain through the BOLD time sequence. Using the functional connectivity matrix may potentially disrupt this dynamic information due to the calculations of correlations. Furthermore, our

experiments indicate that our encoder can directly model the temporal relations between different brain regions from the BOLD signals, eliminating the need to construct functional networks.

**Preliminaries.** A structural brain network is an attributed and weighted graph  $\mathcal{G} = (A, H)$  with  $N$  nodes, where  $H \in \mathbb{R}^{N \times d}$  is the node feature matrix, and  $A \in \mathbb{R}^{N \times N}$  is the adjacency matrix where  $a_{i,j} \in \mathbb{R}$  represents the edge weight between node  $i$  and node  $j$ . Meanwhile, we utilize  $X_{\mathcal{B}} \in \mathbb{R}^{N \times T}$  to represent the BOLD signal matrix derived from functional MRI data of each subject, where each brain ROI has a time series BOLD signal with  $T$  points.

**Reconstruction.** For the reconstruction task, we deploy an encoder-decoder architecture and utilize the  $L_1$  loss function. Particularly, we use a multi-layer feed-forward neural network as the encoder and decoder. Our method differs from previous studies [21, 32], where the encoder and decoder do not necessitate a GNN-based framework, allowing us to directly utilize the adjacency matrix  $A$  of structural networks as the inputs. Previous studies randomly initialize the node features (i.e.,  $H$ ) for the GNN input, since it is difficult to find informative brain node features that provide valuable information from the HCP and OASIS datasets. Hence, we propose a reconstruction framework that detours using the node feature matrix. Our framework is bidirectional, where we simultaneously conduct structural network and BOLD signal reconstruction. Here, we have latent representations  $Z_{\mathcal{B}} = \text{Encoder}_{\mathcal{B}}(X_{\mathcal{B}})$  and  $Z_{\mathcal{S}} = \text{Encoder}_{\mathcal{S}}(A)$  for BOLD signals and structural networks, respectively.

**ROI-Level’s Contrastive Representation Learning.** With latent representation  $Z_{\mathcal{B}} \in \mathbb{R}^{N \times d_{\mathcal{B}}}$  generated from BOLD signal and  $Z_{\mathcal{S}} \in \mathbb{R}^{N \times d_{\mathcal{S}}}$  from structural networks, we then conduct ROI-level’s contrastive learning to associate the static structural and dynamic functional patterns of multimodal brain measurements. The contrastive learning loss aims to minimize the distinctions between latent representations from two modalities. To this end, we first utilize linear layers to project  $Z_{\mathcal{B}}$  and  $Z_{\mathcal{S}}$  to the common space, where we obtain  $Z'_{\mathcal{B}} = WZ_{\mathcal{B}} + b$ ,  $Z'_{\mathcal{B}} \in \mathbb{R}^{N \times d}$  and similarly,  $Z'_{\mathcal{S}} \in \mathbb{R}^{N \times d}$ . We use  $(z_i^B, z_i^S)_{i=1 \dots N}$  to denote representations from the same ROI, where  $z_i^B$  and  $z_i^S$  are elements of  $Z'_{\mathcal{B}}$  and  $Z'_{\mathcal{S}}$ , respectively. For the same brain ROI, the static structural representation and the dynamic functional counterpart are expected to share a maximum similarity. Conversely, for the pairs that do not match, represented as  $(z_i^B, z_j^S)_{i \neq j}$ , these are drawn from different ROIs and should share a minimum similarity.

To formally build up the ROI-level’s contrastive loss, it is intuitive to construct positive samples and negative ones based on the match of ROIs. Specifically, we construct  $(z_i^B, z_i^S)_{i=1 \dots N}$  as positive sample pair, and  $(z_i^B, z_j^S)_{i \neq j}$  as negative sample pair. And our contrastive loss can be formulated as follow:

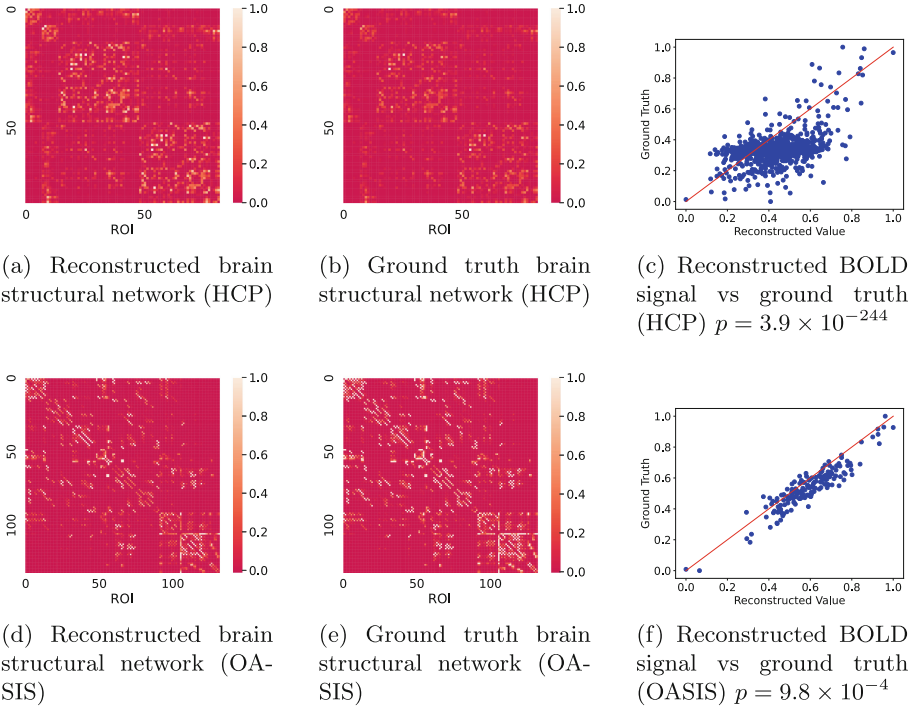
$$\begin{aligned}
\mathcal{L}_{C1} &= -\mathbb{E} \left[ \log \frac{\text{Similarity}(z_i^B, z_i^S)}{\sum_{j=1}^N \text{Similarity}(z_i^B, z_j^S)} \right] \\
\mathcal{L}_{C2} &= -\mathbb{E} \left[ \log \frac{\text{Similarity}(z_i^S, z_i^B)}{\sum_{j=1}^N \text{Similarity}(z_i^S, z_j^B)} \right] \\
\mathcal{L}_{contrast} &= \mathcal{L}_{C1} + \mathcal{L}_{C2}
\end{aligned} \tag{1}$$

where  $\text{Similarity}(\cdot)$  is substantiated as cosine similarity.

**Loss Functions.** The loss functions within our proposed framework are summarized here. Besides the reconstruction loss ( $\mathcal{L}_{rec}$ ) and the ROI-level's contrastive loss ( $\mathcal{L}_{contrast}$ ), we utilize cross-entropy loss ( $\mathcal{L}_{supervised} = \mathcal{L}_{cross-entropy}$ ) for classification tasks, and  $L_1$  loss ( $\mathcal{L}_{supervised} = \mathcal{L}_{mean-absolute-error}$ ) for regression tasks, respectively. In summary, the loss function can be described as:

$$\mathcal{L} = \eta_1 \mathcal{L}_{contrast} + \eta_2 \mathcal{L}_{rec} + \eta_3 \mathcal{L}_{supervised}, \tag{2}$$

where  $\eta_1, \eta_2$  and  $\eta_3$  are loss weights.



**Fig. 2.** Bidirectional reconstruction results on the HCP and OASIS dataset.

### 3 Experiments

#### 3.1 Data Description and Preprocessing

Two publicly available datasets were used to evaluate our framework. The first includes data from 1206 young healthy subjects (mean age  $28.19 \pm 7.15$ , 657 women) from the Human Connectome Project [25] (HCP). The second includes 1326 subjects (mean age =  $70.42 \pm 8.95$ , 738 women) from the Open Access Series of Imaging Studies (OASIS) dataset [12]. Details of each dataset may be found on their official websites. CONN [26] and FSL [10] were used to reconstruct the functional and structural networks, respectively. For the HCP data, both networks have a dimension of  $82 \times 82$  based on 82 ROIs defined using FreeSurfer (V6.0) [7]. For the OASIS data, both networks have a dimension of  $132 \times 132$  based on the Harvard-Oxford Atlas and AAL Atlas. We deliberately chose different network resolutions for HCP and OASIS, to evaluate whether the performance of our new framework is affected by the network dimension or atlas. The source code is available at: <https://github.com/FlynnYe/BMCL>.

#### 3.2 Experimental Setup and Evaluation Metrics

We randomly split each dataset into 5 disjoint sets for 5-fold cross-validations, and all the results are reported in *mean (s.t.d.)* across 5 folds. To evaluate the performance of each model, we utilize accuracy, precision score, and  $F_1$  score for classification tasks, and mean absolute error (MAE) for regression tasks. The learning rate is set as  $1 \times 10^{-4}$  and  $1 \times 10^{-3}$  for classification and regression tasks, respectively. The loss weights (i.e.,  $\eta_1, \eta_2$ , and  $\eta_3$ ) are set equally as 1/3. To demonstrate the superiority of our method in cross-modal learning, bidirectional mapping, and ROI-level’s contrastive learning, we select four baselines including 2 single-modal graph learning methods (i.e., DIFFPOOL [30] and SAGPOOL [14]), as well as 2 multimodal methods (i.e., VGAE [11] and DSBGM [22]) for all tasks. We use both functional brain networks, in which edge weights are defined as the *Pearson Correlation* between BOLD signals, and brain structural networks as input for baseline methods. The functional brain networks are signed graphs including positive and negative edge weights, however, the DIFFPOOL, SAGPOOL, and VGAE can only take unsigned graphs (i.e., graphs only include positive edges) as input. Therefore, we convert the functional brain networks to unsigned graphs by using the absolute values of the edge weights.

#### 3.3 BOLD Signal and Structural Network Reconstruction

We train the model in a task-free manner where no task-specific supervised loss is involved. The MAE values between the edge weights in the ground-truth and reconstructed structural networks are  $0.0413 \pm 0.0009$  and  $0.0309 \pm 0.0015$  under 5-fold cross-validation on the HCP and OASIS, respectively. The MAE values between ground-truth and reconstructed BOLD signals are  $0.0049 \pm 0.0001$  and  $0.0734 \pm 0.0016$  on the HCP and OASIS, respectively. The reconstruction results on HCP are visualized in Fig. 2.

**Table 1.** The results for sex classification on HCP and AD classification on OASIS. The best results are highlighted in **bold** font. Methods marked with † are unimodal methods.

Method	HCP (gender)			OASIS (disease)		
	Acc	Pre	F1	Acc	Pre	F1
DIFFPOOL <sup>†</sup> w/ F	67.77 (3.56)	65.25 (2.65)	68.82 (1.72)	68.97 (1.34)	66.03 (3.36)	69.24 (1.83)
SAGPOOL <sup>†</sup> w/ F	70.95 (2.88)	69.83 (1.85)	71.44 (1.29)	65.65 (2.01)	63.33 (1.95)	67.27 (2.09)
DIFFPOOL <sup>†</sup> w/ S	58.71 (4.62)	30.96 (4.73)	40.6 (5.17)	86.04 (2.65)	64.92 (4.16)	74.01 (3.64)
SAGPOOL <sup>†</sup> w/ S	61.06 (4.58)	32.79 (3.54)	42.64 (3.78)	88.48 (2.51)	68.71 (3.92)	77.33 (3.44)
VGAE	73.59(2.42)	74.43 (1.84)	76.25 (1.49)	64.68 (2.49)	62.57 (2.19)	65.85 (1.91)
DSBGM	82.19 (2.01)	85.35 (1.99)	84.71(2.37)	78.92 (1.38)	79.81 (1.41)	80.22(2.25)
BMCL w/o F	93.68 (2.88)	91.71 (2.19)	92.31 (2.31)	90.09 (2.65)	71.26 (4.16)	83.61 (3.64)
BMCL w/o S	69.54 (1.77)	68.61 (1.71)	56.82 (2.60)	89.66 (2.93)	73.35 (3.15)	79.52 (3.29)
BMCL	<b>94.83 (1.35)</b>	<b>93.47 (3.65)</b>	<b>93.21 (1.98)</b>	<b>92.23 (0.62)</b>	<b>84.47(2.14)</b>	<b>83.38(0.76)</b>

### 3.4 Disease and Sex Classification

We conduct Alzheimer’s disease (AD) classification on the OASIS dataset, and sex classification on the HCP dataset. As shown in Table 1, our proposed BMCL can achieve the best results in accuracy, precision, and  $F_1$  score for both tasks among all methods. For example, in the AD classification, our model outperforms the baselines with at least 4.2%, 5.8% and 4.0% increases in accuracy, precision and  $F_1$  scores, respectively. In general, multimodal methods can outperform single-model methods. The superiority of our bidirectional BMCL model, compared to the unidirectional methods, attributes to the fact that our BMCL reduces the distinction between the latent spaces generated by two unidirectional mappings through ROI-level’s contrastive learning.

### 3.5 ASR and MMSE Regression

Mini-Mental State Exam (MMSE) is a quantitative measure of cognitive status in adults, and Adult Self-Report scale (ASR) [1] is to measure the adult’s behavior. As shown in Table 2, our proposed BMCL model outperforms all baselines in terms of MAE values. The regression results also demonstrate the superiority of bidirectional mapping and the importance of ROI-level’s contrastive learning, which is consistent with the results in the classification tasks.

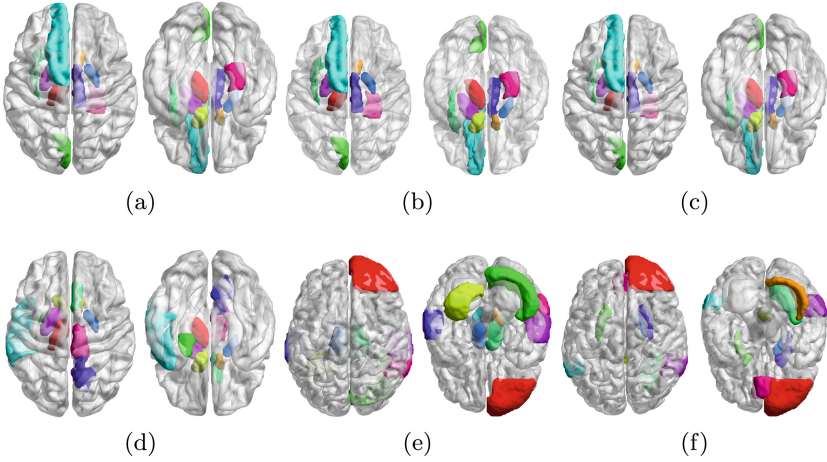
### 3.6 Ablation Study

To demonstrate the significance of bidirectional mapping, we remove a part of our proposed BMCL model to yield two unidirectional mappings (i.e., either mapping from structural network to BOLD signal, or mapping inversely). As shown in the bottom three rows in Table 1 and Table 2, the prediction results are declined when we remove each directional mapping, which clearly demonstrates the importance of bidirectional mapping.



**Table 2.** The experimental results for ASR regression on HCP and MMSE regression on OASIS. The best results are highlighted in **bold** font. Methods marked with † are unimodal methods.

Method	HCP (aggression)	HCP (rule-break)	HCP (intrusive)	OASIS (MMSE)
DIFFPOOL <sup>†</sup> w/ F	2.39 (0.021)	2.26 (0.0092)	2.47 (0.15)	1.77 (0.56)
SAGPOOL <sup>†</sup> w/ F	3.07 (0.062)	2.88 (0.0022)	3.47 (0.029)	1.73 (0.79)
DIFFPOOL <sup>†</sup> w/ S	1.78 (0.268)	1.12 (0.473)	0.61 (0.3335)	2.13 (15.5941)
SAGPOOL <sup>†</sup> w/ S	1.82 (0.2674)	1.13 (0.3672)	0.63 (0.2608)	0.53 (0.2125)
VGAE	1.74(0.019)	1.37(0.051)	0.67 (0.022)	1.27 (0.25)
DSBGM	1.71 (0.11)	1.21 (0.24)	0.65 (0.026)	0.87 (0.18)
BMCL w/o F	1.98 (0.2688)	1.12 (0.3508)	0.62 (0.3145)	0.49 (0.1908)
BMCL w/o S	2.03 (0.2045)	1.11 (0.3704)	0.63 (0.3839)	0.50 (0.2008)
BMCL	<b>1.68 (0.2374)</b>	<b>1.05 (0.5046)</b>	<b>0.58 (0.3377)</b>	<b>0.45 (0.1726)</b>



**Fig. 3.** Saliency maps to identify top 10 regions associated with (a) intrusiveness, (b) aggression, (c) rule-break, (d) sex, (e) AD and (f) MMSE, respectively.

### 3.7 Interpretability

The 10 key brain regions (Fig. 3) associated with AD (from OASIS) and with each sex (from HCP) are identified using the brain saliency map. The salient regions for AD are concentrated in cerebellum (i.e., cerebellum 3 right and left, cerebellum 8 left, cerebellum crus2 right) and middle Temporal gyrus (i.e., the posterior division left and right, as well as the temporooccipital right of middle temporal gyrus), which have been verified as core AD biomarkers in literature [2, 18]. Similarly, 10 key regions (Fig. 3) are identified for regression tasks (i.e., 3 ASR from HCP and MMSE from OASIS). Interestingly, several brain regions (including left and right accumbens areas, cortex left hemisphere cuneus and insula, as well as cortex right hemisphere posteriorcingulate and parahippocampal) are consistently identified across 3 ASR scales (i.e., aggression, rule-break,



and intrusive). This finding is supported by [21], which suggests that similar ASR exhibits common or similar biomarkers. Also, these regions have been reported as important biomarkers for aggressive-related behaviors in literature [5, 17].

## 4 Conclusions

We propose a new multimodal data mining framework, named BMCL, to learn the representation from two modality data through bidirectional mapping between them. The elaborated ROI-level contrastive learning in BMCL can reduce the distinction and eliminate biases between two one-way mappings. Our results on two publicly available datasets show that BMCL outperforms all baselines, which demonstrates the superiority of bidirectional mapping with ROI-level contrastive learning. Beyond these, our model can identify key brain regions highly related to different clinical phenotypes and brain diseases, which demonstrates that our framework is interpretable and the results are biologically meaningful. The contrastive learning method, while emphasizing the alignment of features from different modalities, may inadvertently neglect the unique characteristics inherent to each modality. Moving forward, we intend to refine our method by aiming for a balance between the alignment of modalities and the preservation of modality-specific information. Additionally, the pre-selection of important features or the consideration of subnetworks holds promising for further research.

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