

Cross-modal activation of visual cortex during depth perception using auditory substitution of vision

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Previous neuroimaging studies identified multimodal brain areas in the visual cortex that are specialized for processing specific information, such as visual-haptic object recognition. Here, we test whether visual brain areas are involved in depth perception when auditory substitution of vision is used. Nine sighted volunteers were trained blindfolded to use a prosthesis substituting vision with audition both to recognize two-dimensional figures and to estimate distance of an object in a real three-dimensional environment. Using positron emission tomography, regional cerebral blood flow was assessed while the prosthesis was used to explore virtual 3D images; subjects focused either on 2D features (target search) or on depth (target distance comparison). Activation foci were found in visual association areas during both the target search task, which recruited the occipito-parietal cortex, and the depth perception task, which recruited occipito-parietal and occipito-temporal areas. This indicates that some brain areas of the visual cortex are relatively multimodal and may be recruited for depth processing via a sense other than vision.

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Introduction

Visual depth perception refers to the cognitive processes that lead to the inference of the third dimension from 2D retinal images. Perceiving depth requires the brain to extract and adequately interpret specific monocular and/or binocular cues. Historically, the visual system has been classified into two subsystems, the so-called ventral stream for shape recognition and the dorsal stream

for spatial localization (Haxby et al., 1991; Held, 1968; Schneider, 1969; Trevarthen, 1968; Ungerleider and Mishkin, 1982). Because the primary importance of 3D structure is to define spatial layout, one might expect that depth perception recruits mainly brain areas in the dorsal stream (Tsao and Tootell, 2004). However, the cortical network of stereoscopic depth perception (based on binocular disparity) in non-human primates, recruits almost every region of the visual cortex (Adams and Zeki, 2001; Burkhalter and Van Essen, 1986; DeAngelis and Newsome, 1999; Gonzalez and Perez, 1998; Hinkle and Connor, 2001; Poggio, 1995; Sereno et al., 2002; Tsao et al., 2003) including several regions of the temporal lobe (e.g., Janssen et al., 1999, 2000a,b; Maunsell and Van Essen, 1983; Uka et al., 2000). This recruitment of both the ventral and dorsal streams for stereoscopic depth perception was confirmed in human subjects in PET and fMRI brain activation studies (Backus et al., 2001; Cumming, 2002; Gulyas and Roland, 1994; Kourtzi et al., 2003; Pito et al., 1993; Rutschman and Greenlee, 2004). This wide cerebral network is also recruited when depth perception is based on static (or pictorial) monocular depth cues, such as shading (Inui et al., 2000; Taira et al., 2001).

Although depth perception is usually considered to be dependent on vision, it can also be accessed through other sensory modalities such as audition (e.g., Bronkhorst and Houtgast, 1999; Kitagawa and Ichihara, 2002) or sensory substitution of vision using tactile (e.g., Bach-y-Rita, 1972) or auditory input. Sensory substitution (Bach-y Rita et al., 1969) refers to the use of one human sense to receive information normally gathered by another sensory organ (Kaczmarek, 1995). Sensory substitution systems aim to provide blind people with coded information related to the lost perception (Veraart, 1989) in a rehabilitation paradigm. However, these systems may also be considered as research tools to explore cognitive and brain mechanisms involved in perceptual phenomena such as optical illusions (Renier et al., 2003a) and depth perception. Despite the growing number of functional imaging studies dealing with sensory substitution and depth perception, nothing is known about the brain regions involved in depth processing when a sensory substitution device is used. If

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similar brain areas are used when perceiving depth with vision and with a vision sensory substitution device, it would indicate common cognitive processes. It would also indicate that the activated brain areas specializing in depth processing are not specific to vision and/or that perceptions obtained via auditory substitution of vision are visual in nature.

The purpose of the present study was to investigate the neural substrates of depth perception when a device substituting vision with audition was used. More precisely, using positron emission tomography (PET), we wanted to examine whether 2D and 3D perception with the sensory substitution device recruited similar brain areas as in vision. In this perspective, a recruitment of areas in both the ventral and dorsal streams was specifically expected during depth perception using sensory substitution.

Materials and methods

Subjects

Nine male volunteers were involved in the study (mean age \pm SD was 29.4 ± 12.4 years). They were without any recorded history of neurological or psychiatric problems and had a normal magnetic resonance imaging (MRI) scan. All but two subjects were right-handed. Subjects underwent an audiometric test to adapt the

amplitudes of each sound of the prosthesis to their spectral sensitivity. Written informed consent was obtained before the study. The protocol was approved by the Biomedical Ethics Committee of the school of Medicine of the Université Catholique de Louvain.

Sensory substitution equipment

The prosthesis substituting vision with audition (PSVA) has been described in detail elsewhere (Capelle et al., 1998). Briefly, black and white images from a miniature head-mounted video camera (frame rate = 12.5 Hz) are translated in real-time into sounds that the subject hears through headphones (see Fig. 1a). The system combines an elementary model of the human retina with an inverse model of the cochlea. The camera image is pixelated according to a dual resolution model of the human retina (see Fig. 1d). This artificial retina consists of a square matrix of 8×8 large pixels with the four central ones replaced by 8×8 smaller pixels representing the fovea. The fovea, therefore, has four times the resolution of the periphery. A single sinusoidal tone is assigned to each pixel of the artificial retina with frequencies increasing from left to right and from bottom to top; frequencies range between 50 and 12,526 Hz. The greyscale level of each pixel modulates the amplitude of its corresponding sine wave. The final auditory output of the PSVA is the real-

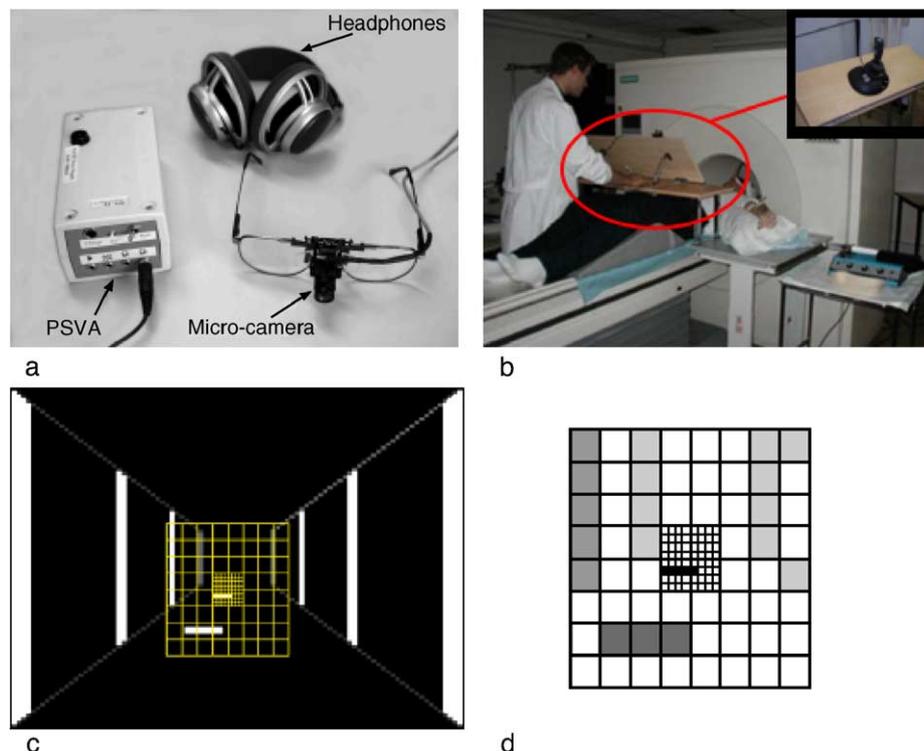


Fig. 1. (a) The prosthesis substituting vision with audition, or PSVA (Capelle et al, 1998), used in the behavioral experiments. A head-mounted video camera (attached to glasses) allows on line translation of visual patterns into sounds that are transmitted to the subject through headphones. (b) The experimental set-up used in the PET study. To avoid head movements during the PET study, a joystick is used to control the displacements of the PSVA artificial retina. (c) One of the virtual scenes used in the experimental conditions of the PET study, with the layout of the artificial retina superimposed (in yellow). This 3D scene is a schematization of the environment in which subjects were trained to perceive depth. The perceived size, the height in the image and the linear perspective can be used as depth cues to estimate the distance of the targets (the horizontal bars) and to perceive depth. The entire artificial retina is used to explore the image whereas its central part (the fovea) is mainly used for object recognition and the periphery is usually used for object localization. (d) The activated pixels of the artificial retina of the PSVA when the covered part of the virtual scene (see c) is perceived. The coding scheme is based on a pixel-frequency association (see Materials and methods). The larger the stimulus, the greater the activation of the corresponding pixels, that is, the darker they are.

time weighted sum of all 124 sine waves. The PSVA was further adapted according to the constraints of the PET technique, mainly due to the fact that the subjects could not move their head to explore a scene. Therefore, a new interface was implemented to control the movements of the artificial retina relative to the virtual scenes (see Fig. 1c) using a joystick (Fig. 1b). Only the training phase for the joystick and the PET study were performed with this adapted PSVA interface.

Experimental design

Before the PET study, subjects were involved in several training sessions aiming at (1) learning the PSVA code and (2) mastering the use of the PSVA to locate and estimate the distance to an object, as well as to perceive depth from pictorial monocular cues. A last training session was dedicated to transferring these abilities to the adapted PSVA using the joystick (3). Subjects were always blindfolded during PSVA use, including during the PET studies.

Learning the PSVA code

This training phase (adapted from Arno et al., 1999) consisted of five 1-h sessions followed by an evaluation session. Subjects were taught to recognize two-dimensional figures formed with vertical, horizontal, or oblique lines and were provided with tactile feedback; verbal cues were supplied as necessary. The evaluation procedure was identical to the one used by Arno et al. (1999). After each trial, subjects re-created their observations with a set of metal bars. A score ranging from 0 to 1 was then assigned, based on how well the re-creation matched the stimulus pattern.

Training to depth perception with the PSVA

Subjects were trained to localize and grasp an object in a real (3D) environment during three learning sessions followed by an evaluation session. In this training, the subjects were taught some static (or pictorial) monocular depth cues, such as relative size, linear perspective, and height in the field of view. During the three training sessions, subjects were asked to locate a white cube using the PSVA and then to grasp it. This task required object localization with egocentric distance estimation in the 3D-space according to depth cues, which requires depth perception. During the evaluation phase, subjects only had to localize this cube in the 3D environment with the PSVA, again basing their judgment on depth cues. Then, the PSVA was turned off, the cube was removed, and the subjects had to re-place it by hand in the 3D environment as accurately as possible. Performance was assessed by measuring the difference between the depth position of the cube as replaced by the subject and its initial position.

Learning to use the joystick with the PSVA

A last training session was dedicated to the transfer of the PSVA expertise with the head-mounted video-camera to the joystick version. Subjects explored several virtual 3D scenes with the joystick to find targets (3 to 5 horizontal bars of different sizes). They performed the task in a supine position to familiarize them with the conditions of the PET study. Subjects performed the task until they succeeded in finding all the targets in less than 90 s. Although the adaptation to the joystick interface required the subjects to make some adjustments, they all acquired the requested skill in less than 1 h.

Stimuli and tasks used in the PET study

A virtual 3D scene was designed with two horizontal bars of different size (the targets) disposed between a perspective view made of vertical bars linked with converging oblique lines (see Fig. 1c). Eight variants of this scene were used in the PET study. In four of them, the position of the two targets was congruent with the perspective effect induced by the surrounding bars, that is, the smaller target was closer to the vanishing point than the larger target. In the other four variants, the position of the targets and the perspective effect were incongruent. Three monocular depth cues were used in the congruent scenes: (i) the relative target size, which varies with its distance from the viewer, (ii) the relative vertical position of the target (targets closer to the horizon, that is, the horizontal line passing through the vanishing point of the oblique lines, appear to be further away), and (iii) the linear perspective. The position of the targets differed in the four variants of the “congruent” and “incongruent” categories.

These stimuli were used for each of the three experimental conditions: target search, target size comparison and target distance estimation based on depth cues (depth condition). The stimuli varied across the conditions and the subjects, but only the stimuli of the “congruent” category were used for the depth condition. In addition, noise stimuli were used in a control condition. These noise stimuli matched the PSVA sounds for frequency, duration and intensity ranges but were meaningless (see also Arno et al. (2001) and De Volder et al. (2001)). All stimuli were created using a National Instruments Labview® software.

Familiarization to the experimental procedure

Just before the PET study, a rehearsal session took place in the gantry to instruct subjects with all conditions, to verify that they understood the tasks, and to help them to relax during the PET study.

Positron emission tomography

Experimental conditions during the PET study

Subjects were studied under 5 conditions, each of them being repeated twice in counterbalanced order across the subjects: (1) resting state condition (REST); (2) active listening to noise sounds with blanks detection (SOUND); (3) target search (here horizontal bars) within the virtual environment composed of vertical and oblique bars (see Fig. 1c) using the adapted PSVA (FORM); (4) size comparison of detected targets using the adapted PSVA (SIZE); (5) distance comparison of detected targets using the adapted PSVA (DEPTH). The first and the 10th scans in each subject were always achieved in the REST condition. Two scans of the same condition were never consecutive. The design of the REST, SOUND, SIZE and DEPTH was categorical and hierarchical since each experimental condition involved the same cognitive processes as the previous one in the list plus one which was the process of interest.

During REST, the subjects were instructed to relax without focusing their mind on anything. No auditory stimulation was provided. In the SOUND condition, subjects were required to detect blanks inserted in the sounds sequences and to press the joystick button upon detection. In the FORM condition, subjects were instructed to explore the virtual scene using the joystick, and

to press the joystick button when the horizontal bar targets were in the fovea of the artificial retina. In the SIZE condition, subjects were asked to compare the size of the detected targets to determine which was larger. They responded by pressing the joystick button when the chosen target lay in the fovea of the artificial retina of the PSVA. In the DEPTH condition, subjects were requested to compare the egocentric distance to the detected targets based on the available depth cues. For this last condition only, subjects were informed that the virtual scene was a schematization of the real (3D) environment used in the training phase.

Data acquisition

Measurements of local radioactivity uptake were made using an ECAT EXACT-HR PET tomograph (CTI/Siemens), which allows simultaneous imaging of 47 transaxial slices in three-dimensional (3D, septa retracted) mode, with an effective resolution of 8-mm full width at half-maximum (FWHM) (Wienhard et al., 1994) and a slice thickness of 3.125 mm. All images were reconstructed, using a standard ECAT software (3DRP algorithm), including scatter correction, with both a transaxial Hanning filter (cutoff frequency of 0.30) and an axial Hanning filter (cutoff frequency of 0.50, i.e., Nyquist frequency). Correct positioning of the subject in the gantry was ascertained by aligning two sets of low-power laser beams with the canthomeatal line and the sagittal line, respectively. Head-restraining adhesive bands were used. For radiotracer injection, a 22-gauge catheter was placed in the antecubital vein of the left or right arm. Prior to tracer administration, each subject underwent a 15-min transmission scan performed with retractable germanium-68 rotating rod sources, allowing the subsequent correction of emission images for attenuation. Transmission scans were acquired with a rod-windowing technique (Jones et al., 1995) producing scatter-free attenuation correction. Cerebral blood flow measurement was then performed using a 20-s bolus of oxygen-15-labeled water (8 mCi, 296 MBq). Stimulation sequences and PET acquisition were started 10 s after the initiation of tracer injection. Integrated counts accumulated during 90-s scans were used as an index of regional cerebral blood flow (rCBF) (Mazziotta et al., 1985). Time interval between successive emission scans was 13 min, which allowed decay of residual radioactivity.

For each subject, 3D MRI anatomical data were also obtained on a 1.5-T unit (General Electric Signa) using a spoiled grass technique. T1-weighted images (TR = 25 ms, TE = 6 ms, flip angle 25°, slice thickness 1.5 mm) were obtained in the bicommissural (AC-PC) orientation.

Image analysis

Individual PET images were aligned to correct for possible interscan movements and coregistered to the subject's MRI using AIR 3.0 (Woods et al., 1998a,b). The resulting matching brain images (MRI and coregistered PET) were spatially normalized with statistical parametric mapping (SPM) (Wellcome Department of Cognitive Neurology), in the referential defined by the atlas of Talairach and Tournoux (1988) and the MRI template supplied by the Montreal Neurological Institute (MNI) to allow group analysis (voxel size: 2 × 2 × 2 mm). The accuracy of realignment and normalization procedure was assessed with interactive home-made image display software (Michel et al., 1995) implemented in IDL language (IDL Research Systems, Inc). Finally, the PET images were smoothed with an isotropic Gaussian filter (15-mm full-width

at half maximum) and were corrected for differences in global activity by proportional scaling (Fox et al., 1988). In order to identify the regions showing significant rCBF changes, statistics were computed on a voxel-by-voxel basis, using the general linear model (Friston et al., 1995). The resulting voxels set of each contrast constitutes a statistical parametric map of the *t* statistic, SPM{*t*}, which was then transformed to the unit normal distribution SPM{*Z*}. This allowed the overlay of the obtained *t* maps on each spatially normalized MRI. Statistical analysis was performed using a multi-subject design (with replication) (SPM 99, Wellcome Department of Cognitive Neurology).

Since a hierarchical design was used, the DEPTH condition could be contrasted with respect to the other conditions. Accordingly, (DEPTH – SOUND) subtracted the brain activity related to auditory stimulation and to the manipulation of the joystick from the experimental condition, while (DEPTH – FORM) further subtracted the brain activity related to the target search and form identification. The last contrast (DEPTH – SIZE) subtracted brain activity related to size judgment from distance estimation based on depth cues. All contrasts were additionally masked by the difference between the more complex condition and the REST condition (e.g., DEPTH – REST was used as inclusive mask for the contrast DEPTH – SIZE), to ensure that all activation foci detected with the contrasts were related to activation well above the basal resting state. Only regions which were significantly activated at *P* < 0.001 (uncorrected for multiple comparisons) or *P* < 0.05 (corrected for multiple comparisons) were considered.

Results

Behavioral results

At the end of the training phase to learn the PSVA code, subjects obtained a mean score of 77% of correct responses (SD = 15) in the pattern recognition task. This performance level was considered to be high enough to justify continuing the study.

After training for depth perception in a real 3D environment, the subjects demonstrated a satisfactory level of performance (>90% of accuracy in object remoteness estimation using the PSVA). Accordingly, we considered that the subjects were able to perceive depth with the PSVA and were ready to undergo the PET study.

For the tasks carried out during the PET study, the scores were respectively 97% (SD = 5) of successful blank detection in the SOUND condition, 97% (SD = 8) of successful target detection in the FORM condition, 100% (SD = 0) of correct responses in the SIZE condition and 94% (SD = 17) of correct responses in the DEPTH condition. These results indicated an accurate execution of the tasks performed during the PET acquisitions.

PET results

Main effect of depth perception versus size comparison

When the depth perception condition was contrasted with the size comparison condition (DEPTH – SIZE masked by DEPTH – REST), six distinct brain areas were found to be active (Table 1): the fusiform gyrus (BA37, Fig. 2) was bilaterally activated, as well as the left superior parietal lobule (BA 7), the left (BA 7) and right precuneus (BA 19), and the left inferior parietal lobule (BA 19 and BA 40).

Table 1
Principal activation foci found in the present study

Statistical analyses	Anatomical localization	Brodmann area (BA)	Coordinates (mm)			Size (number of voxels)	Voxel level			
			Side	x	y		z	Z score	Corrected <i>P</i> (a)	Uncorrected <i>P</i>
(DEPTH- SIZE) masked with	Fusiform gyrus	37	L	-52	-60	-14	238	4.18	0.002	0.000
	IPL-SPL	7–40	L	-44	-56	50	129	3.86	0.006	0.000
(DEPTH- REST)	Precuneus	7	L	-16	-78	44	43	3.39	0.024	0.000
	IPL-Precuneus	19	L	-38	-82	38	36	3.39	0.025	0.000
	Fusiform gyrus	37	R	58	-52	-16	32	3.38	0.025	0.000
(SIZE- FORM) masked with	Precuneus	19	R	30	-60	34	32	3.31	0.031	0.000
	Cingulate gyrus	24	R	20	6	34	<20	3.19	>0.05 (b)	0.001 NS
(SIZE- REST)	Postcentral gyrus	1–2–3	L	-32	-20	34	<20	3.18	>0.05 (b)	0.001 NS
(FORM- SOUNDS) masked with	Precuneus	7	L	-8	-66	60	1286	4.40	0.001	0.000
	Precentral gyrus	4	L	-40	-16	60	191	4.13	0.002	0.000
FORM- REST)	Cerebellum and vermis		R	8	-58	-10	151	3.85	0.006	0.000
	IPL	40	L	-38	-36	52	249	3.77	0.008	0.000
	Cerebellum		R	20	-56	-40	217	3.65	0.011	0.000
	Cerebellum		L	-22	-48	-26	66	3.42	0.023	0.000

Note. (a) Corrected *P* values at the voxel level were computed using a spherical Volume of Interest (VOI) with 15 mm radius, centered over the coordinates obtained with SPM99. (b) shown here for reference, though not significant. NS: means that the level is significant only at a *P* value uncorrected for multiple comparisons.

Size comparison versus target search and form recognition

During size comparison, as contrasted to target search and form recognition (SIZE – FORM masked by SIZE – REST), only activation trends were observed in the right cingulate gyrus (BA 24) and the left postcentral gyrus (BA 1-2-3), at threshold *P* = 0.001, uncorrected (Table 1).

Target search and form recognition versus active listening to sounds

During target search and form recognition as contrasted to active listening to noise sounds (FORM – SOUNDS masked by FORM – REST), the left precuneus (BA7), precentral gyrus (BA 4), and inferior parietal lobule (BA 40) were

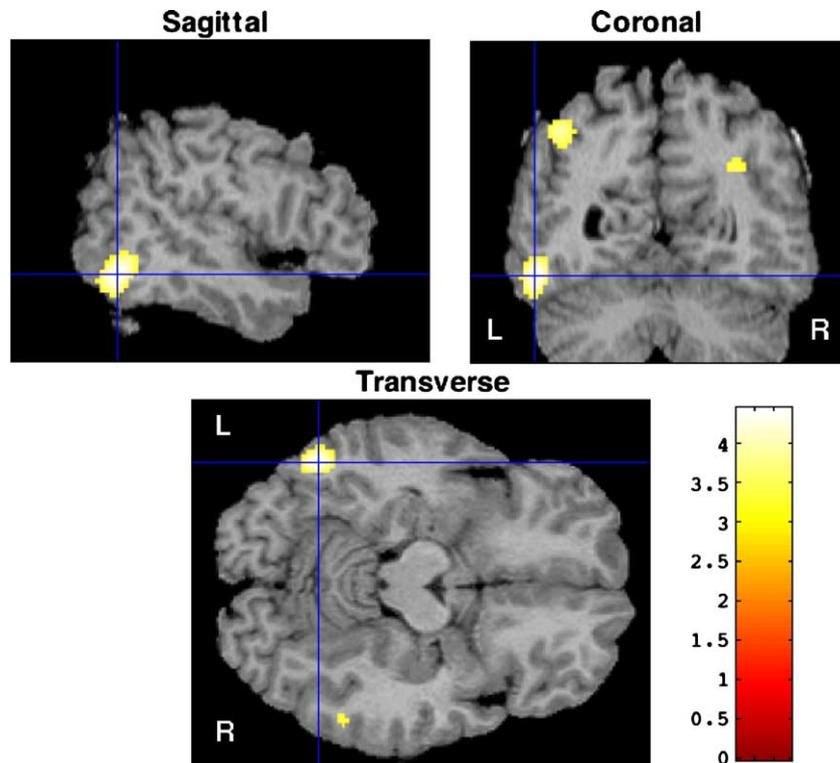


Fig. 2. Brain activation foci observed during depth perception as contrasted to size comparison. The statistical parametric map for this comparison is superimposed on the sagittal, coronal and transverse sections of an individual normalized brain MRI. Only positive difference exceeding a threshold of $P < 0.001$ (uncorrected) is shown according to the color scale that codes the *T* values. The lines intersect at coordinates ($x, y, z = -52, -60, -14$) on a voxel in the left fusiform gyrus (BA 37) with a *Z* value of 4.18 ($P = 0.002$, corrected for multiple comparisons, see also Table 1). Coordinates refer to the referential defined by the atlas of Talairach and Tournoux (1988) and the MNI template (see Materials and methods).

activated, as well as the vermis and the cerebellum bilaterally (Table 1).

Discussion

The present study demonstrated a selective activation of both occipito-parietal and occipito-temporal areas in sighted volunteers who were blindfolded and used an auditory vision substitution device to perceive depth. Target search and form recognition with the same device activated occipito-parietal areas and the cerebellum in accordance with a previous study (Arno et al., 2001).

This experiment was undertaken to investigate the neural network involved in depth perception when a device substituting vision with audition was used. Due to the methodological constraints inherent to the PET technique, virtual images were explored using a joystick. Although those conditions were not very natural, subjects were familiar with virtual 3D scenes given their visual experience. They also demonstrated an equivalent level of mastery of the adapted PSVA with a joystick, as compared to that of the PSVA head-mounted camera. Furthermore, although head motion may provide information about distance, such dynamic cues were not necessary for distance estimation during training, which was based on static monocular depth cues. Therefore, using the joystick to explore virtual scenes differs from using head-movements only in that it is less natural and intuitive. In the present study, the accurate completion of a distance comparison task was considered as an indicator of depth perception. The subjects based their judgment on available pictorial monocular depth cues. Accordingly, successful completion of the distance comparison task required a three-dimensional perception of the scene. Finally, a vision control group was not available for us to determine the neural substrates of visual depth perception induced by our stimuli. Therefore, the results are discussed with reference to the few available neuroimaging studies dealing with visual depth perception from static monocular depth cues. Although the stimuli and tasks were obviously different in these studies, the kind of perception obtained (i.e., depth perception) and the activation foci (i.e., an activation of both the dorsal and the ventral streams) were similar in all referenced studies. Notwithstanding these limitations, the present study provides the first data concerning the neural substrates of depth perception during a sensory substitution procedure.

The observed activation of both dorsal (BA 7 and BA 40) and ventral (BA 37) visual pathways during depth perception via sensory substitution is quite similar to those obtained in vision during depth perception from static monocular cues (e.g., Inui et al., 2000; Taira et al., 2001). These similar activation patterns indicate either that these brain areas are relatively multimodal and deal specifically with depth perception whatever the sensory modality used, or that perception obtained via sensory substitution of vision may recruit visual processes. These hypotheses are not mutually exclusive. Some visual brain areas have multimodal functional properties and may be activated by touch and/or audition (e.g., Büchel et al., 1998; Wallace et al., 2004) in addition to vision. Occipito-temporal regions, especially the lateral occipital cortex (LOC) are recruited both during visual and haptic object identification (Amedi et al., 2001, 2002; Deibert et al., 1999; James et al., 2002; Stoeckel et al., 2003; Zhang et al., 2004). In the same way, some regions of the dorsal visual stream, especially the parieto-occipital cortex (POC) are active during

tactile discrimination of grating orientation (Sathian et al., 1997; Zangaladze et al., 1999) as in vision (Sergent et al., 1992). These multimodal brain areas may support adaptive brain changes (plasticity) in case of visual deprivation (Rauschecker, 1995). In the present study, it is obvious that only visual brain areas were recruited during depth perception. Furthermore, despite the use of an arbitrary auditory code, depth perception with the sensory substitution device was based on specific visual depth cues that depend on previous visual experience (Gregory and Wallace 1963; Heller et al., 1996; Renier et al., 2003b). This supports the concept that perceptions obtained by sensory substitution of vision are visual in nature. In addition, the observed modulation of the brain activation between 2D and 3D perception (i.e., according to what was perceived) further indicates that sensory substitution is governed by similar rules as vision since different patterns of brain activity have been demonstrated in vision when 2D forms and 3D figures were contrasted (e.g., Ptito et al., 1993). Finally, we cannot exclude the possibility that the recruitment of visual brain areas was related to some visualization process that could contribute to the perception with a sensory substitution device, as was demonstrated for haptic perception (Prather et al., 2004; Sathian et al., 1997; Zhang et al., 2004). If indeed visualization plays a major role in successful use of the PSVA in sighted subjects, a fundamental difference should be found between early and late blind subjects. Supporting the hypothesis of visualization, preliminary data obtained in congenitally blind subjects led us to conclude the absence of any specific brain activation for depth judgments using the PSVA. Further studies in early blind subjects and late blind volunteers are needed, however, to clarify the role of visual experience and of visual deprivation on this perception.

In the present study, we reported a parietal activation during target search and form recognition in sighted subjects, and no recruitment of the ventral visual pathway during this task. The parietal cortex is known to be involved in visual target search (Ashbridge et al., 1997, 1999; Corbetta et al., 1995; Coull et al., 2003; Donner et al., 2000, 2003; Egly et al., 1991; Friedman-Hill et al., 1995; Olivers and Humphreys, 2004; Shafritz et al., 2002; Shimozaki et al., 2003; Walsh et al., 1999) but the absence of activation in the temporal lobe during form recognition with the PSVA represents a difference with regard to vision. Visual perception of 2D figures is usually processed by brain regions in the ventral visual pathway, especially the inferior temporal cortex (Felleman and Van Essen, 1991; Logothetis and Sheinberg, 1996; Pasupathy and Connor, 2001; Schwartz et al., 1983; Tanaka et al., 1991, 2000; Ungerleider and Mishkin, 1982). However, due to the characteristics of the PSVA, spatial strategies that mainly recruit the dorsal visual pathway are predominantly employed when using the device, even for 2D figure recognition (Arno et al., 2001). This is due to the fact that perception with the PSVA, as compared to vision, is mainly analytic and sequential given the small size of the perceptual field and the limited number of frequencies that can be transmitted to the user without saturating the auditory channel. In addition, the targets used in the present study (horizontal bars) were very simple and maybe too basic or insufficiently detailed to activate the ventral pathway. In the same way, no additional activation was obtained in the size condition when contrasted with target search and form recognition using the prosthesis. This is probably because the target search and size recognition tasks were too similar to each other and involved comparable cognitive processes.

The present study showed that perception of a 3D scene with a sensory substitution system involved spatial strategies that recruited predominantly occipito-parietal areas and, to a lesser extent, brain areas of the ventral visual pathway, as in vision. This cross-modal recruitment of visual association areas could be the neural substrate of a visual-like perception with auditory substitution of vision. Additional experiments are needed to verify whether the same activation patterns may be induced by depth perception in the absence of vision, that is, in subjects affected by congenital blindness.

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