

The Effect of MUSIC in the Neonatal Brain

A neuroimaging investigation of Music structural effects in preterm infants' brain

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INTRODUCTION

Preterm birth disrupts normal brain maturation, exposing preterm infants to variate insults and depriving them from meaningful sensory inputs relevant for activity dependent plasticity during early brain development, being thus associated to long-term neurodevelopmental impairments.^{1,2,3}

Music, as an extrinsic multisensory stimulus, was shown in adults to modulate neural networks that are known to be formed in early development and that can be affected by prematurity. These networks are relevant for later cognitive and socio-emotional functions and comprise: ^{4,5}



DTI measures in the selected ROIs

 Mean measurements of <u>al</u> 	ROIs	
Mean FA of 20 ROI **	Mean MD of 20 ROI	Preterm control at term age evidence a
0.40	1.40	significantly lower FA and higher MD vs
t		Full-term, while mean FA and MD values

- Auditory cortex
- Temporal/frontal/parietal subcortical areas → Attention, Memory, Motor functions
- Limbic and paralimbic regions → Emotional processing

Amygdala, a primary structure of the limbic system, is reduced in volume in preterm infants⁶ and has been shown to play a central role in emotion modulation during music processing.^{7,8}

Diffusion tensor imaging (DTI) is a non-invasive magnetic resonance imaging (MRI) technique that allows to study the microstructure of brain water matter (WM) fibers in vivo and thus access brain maturation.⁹ It provides measures such as FA, describing the anisotropy of diffusion, and MD, reflecting the overall dispersion of diffusion. During brain maturation, FA has been shown to increase and MD to decrease. Diffusion measures indicative of WM injury have been proved to correlate with later motor, cognitive and socio-emotional impairments in preterm children.^{10,11}



Study the impact of a music intervention on structural brain development of premature infants.

MATERIALS & METHODS

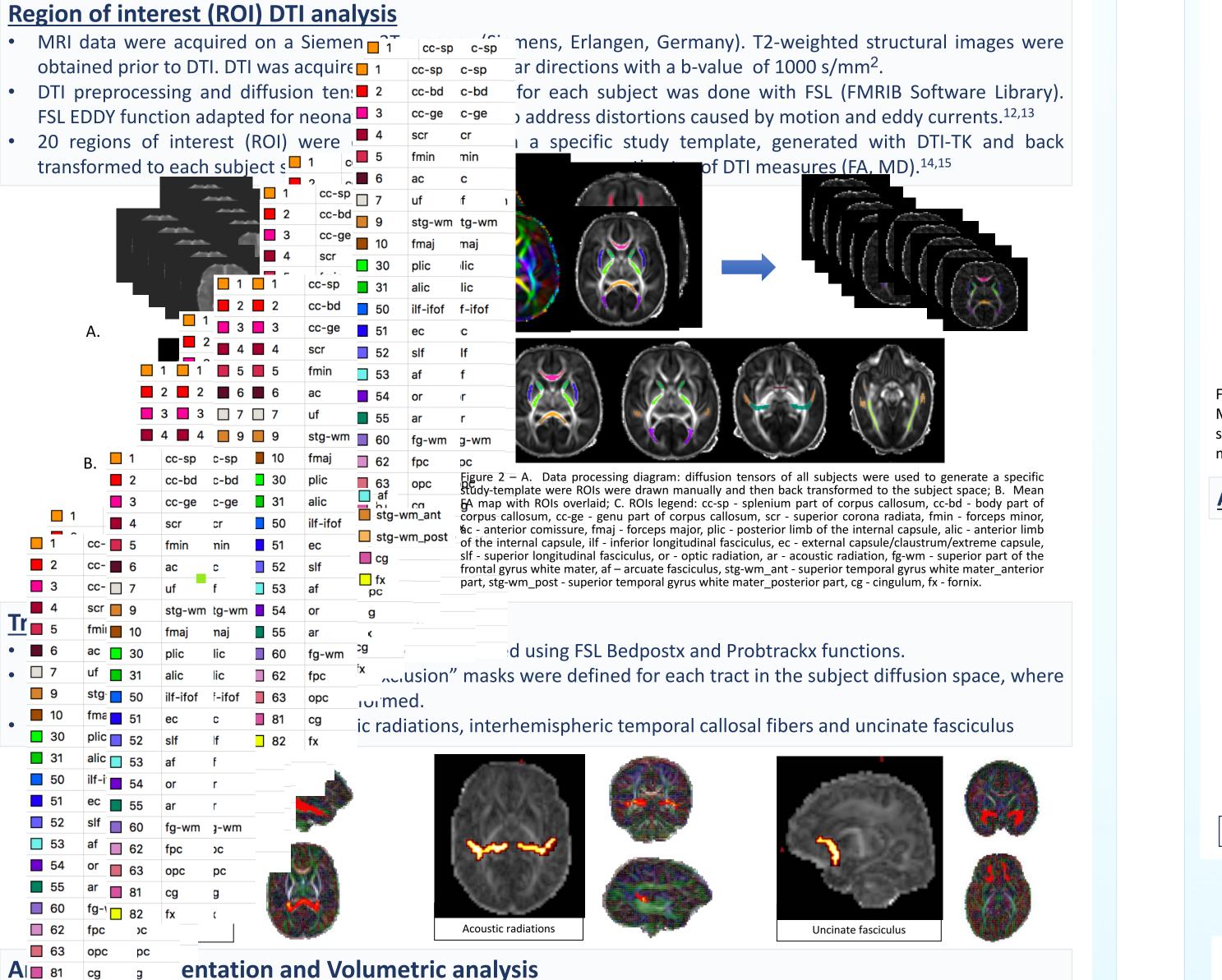
	Preterm		Term
GA (weeks)	240/7-326/7		37 ^{0/7} -42 ^{6/7}
Condition	Music	No Music	No music
Ν	15	15	15
	headphones	headphones	
	10' music 5x week 🗾	10' no noise suppression 5x week	
MRI	Term-equivalent age		Term

Table 1 – Study population was divided into three groups: preterm with music, preterm control without music and full-term newborns. An MRI brain image was performed at term or at term-equivalent age. GA, gestational age.



Figure 1 – Baby listening to the music with the headphones in the neonatal unit.





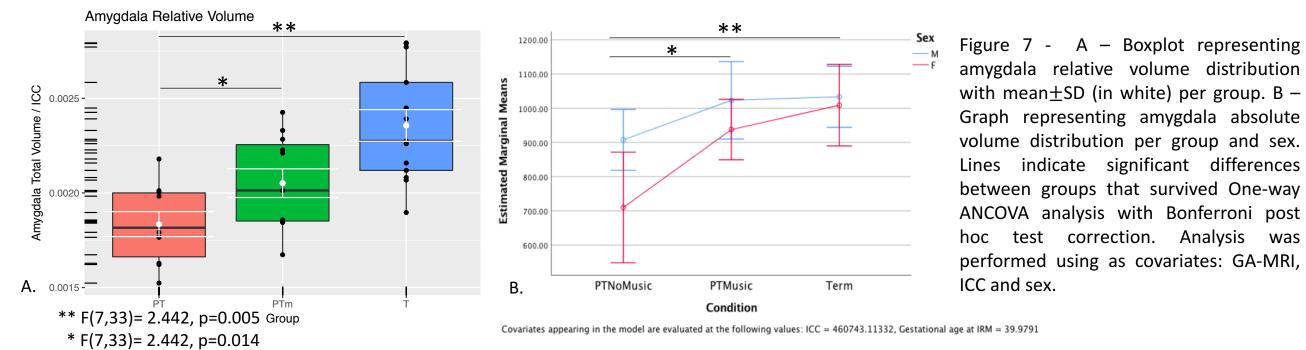
E. 0.125 -Group ∆ F(2,40)= 2.883, p=0.034 Group * F(2,41)= 4.046, p=0.048 ** F(2,40)= 5.879, p=0.004 Mean MD of Interhemispheric Auditory Callosal Fibers Mean MD of Acoustic Radiations Mean MD of Uncinate Fasciculus ** F(2,41)= 9.248, p=0.0001; *p=0.022 ** F(2,41)= 4.970, p=0.006; Δ p=0.023 Mean FA was higher in Preterm Music at term Preterm control evidenced a significantly lower Mean FA was significantly higher in Preterm **FA** and <u>higher</u> **MD** vs Full-term newborns. Music vs Preterm control at term age. age vs Preterm control newborns.

Figure 6 - Boxplot of mean FA and MD measurements with mean ± SD (in white) computed per selected tract, FA (A) and MD (B) of Acoustic Radiations; FA (C) and MD (D) of Interhemispheric Temporal Callosal Fibers; FA (E) and MD (F) of Uncinate Fasciculus. Lines with "*" indicate significant differences between groups that survived One-way ANCOVA analysis with correction for GA-MRI and Bonferroni post hoc test, while lines with "^Δ" indicate differences not surviving the multicomparison test correction.



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Α.



Preterm control present a significantly lower amygdala volume vs Full-term, whereas Preterm Music a significantly higher amygdala volume vs Preterm control.



. FA values not different from Full-term in the "average of 20 ROI" and "Interhemispheric temporal callosal fibers".

• Overall, brain microstructural maturation was decreased in Preterm Control at term vs Full-term: . Significantly lower FA in the "average of 20 ROI" and namely in "fg-wm", "ac", "fminor", "cc-ge", "cc-bd", "cc-sp",

. Significantly higher FA in "ec" ROI, Acoustic Radiations and Uncinate Fasciculus vs Preterm Control.

"mtg-wm", "ilf", "scr", "plic" and "ec" ROIs in Preterm Control at term vs Full-term.

. Significantly lower Amygdala volumes in Preterm Control at term vs Full-term.

- by the same operator, using the manual contour editing function of a visualization software (ITK-snap).
- Segmentation was based on anatomical guidelines for the localization of amygdala, according to published literature and a neonatal atlas comprising a protocol for amygdala manual segmentation.^{6,16} Segmentations were corrected by a neurosurgeon with expertise in neuroanatomy.
- Amygdala volumes were obtained using ITK-snap and corrected for intracranial cavity (ICC) volume, gestational age at MRI (GA-MRI) and sex for statistical analysis.

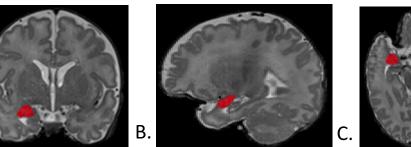


Figure 3 – Delineation of right amygdala on

• Improves **WM maturation**, namely in **Emotional processing** neural pathways Music Non-invasive early postnatal neuroenhancement intervention to preterm infants during NICU stay.

• Preterm exposed to Music when at term :

. Significantly higher Amygdala volumes vs Preterm Control.

T2-weighted MRI using the ITK-snap software: (A) coronal view; (B) sagittal view; (C) axial view.

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