

ScienceDirect



Cognitive enhancement through real-time fMRI neurofeedback

Frank Scharnowski^{1,2} and Nikolaus Weiskopf^{3,4}



Neuroscience has demonstrated that individual differences in cognitive task performance are closely linked to differences in brain activity. Neurofeedback training based on real-time functional magnetic resonance imaging (fMRI) can effectively change specific localized brain activity. Various studies in healthy volunteers and patients have shown that self-regulation of specific brain activity can be learned with fMRI neurofeedback, and leads to specific corresponding behavioral changes. Initial evidence for cognitive enhancement due to fMRI neurofeedback include the domains of perception, motor performance, and memory. Although further conceptual and technical advances are needed to overcome current limitations of this novel method, its non-invasiveness and compatibility with other behavioral or pharmacological approaches promise that it will become a powerful tool for cognitive enhancement.

Addresses

¹ Department of Radiology and Medical Informatics – CIBM, University of Geneva, Rue Gabrielle-Perret-G 4, CH-1211 Geneva 14, Switzerland ² Institute of Bioengineering, Swiss Institute of Technology (EPFL), STI-IBI Station 17, CH-1015 Lausanne, Switzerland ³ Wellcome Trust Centre for Neurology, LICL Institute of Neurology.

³ Wellcome Trust Centre for Neuroimaging, UCL Institute of Neurology, University College London, 12 Queen Square, London WC1N 3BG, UK ⁴ Department of Neurophysics, Max Planck Institute for Human Cognitive and Brain Sciences, Stephanstrasse 1a, 04103 Leipzig, Germany

Corresponding author: Weiskopf, Nikolaus (n.weiskopf@ucl.ac.uk)

Current Opinion in Behavioral Sciences 2015, 4:122-127

This review comes from a themed issue on Cognitive enhancement Edited by Barbara Sahakian and Arthur Kramer

http://dx.doi.org/10.1016/j.cobeha.2015.05.001

2352-1546/© 2015 Elsevier Ltd. All rights reserved.

Introduction

Neuroscientific research has firmly established that individual differences in cognitive task performance are closely linked to differences in brain functioning. For example, the level of activity in specialized brain areas such as the visual cortex, which can change spontaneously and as a function of perceptual training or attention, is associated with improved visual detection [1–3]. This also holds for more complex cognitive functions such as working memory and intelligence, which are associated with specific patterns of activity, in particular the prefrontal

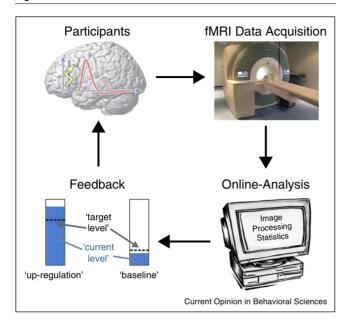
cortex [4–8]. Damage to these brain areas can result in severe visual impairment, or memory problems, respectively [1,9,10]. The close link between cognitive task performance and brain states strongly suggests that optimizing brain activity improves cognitive performance. Neurofeedback is a promising approach to manipulating brain states that is non-invasive and does not require pharmacological substances. The rationale behind cognitive enhancement based on neurofeedback is to train participants to reach brain states that have been identified to correspond to optimum levels of task performance. Depending on the task, the optimal brain states that ought to be trained with neurofeedback can be associated with enhanced attention, particular mental strategies, brain patterns evoked by specific stimuli, or any other brain state that might be promising to increase task performance. For example, improved visual sensitivity has been achieved by neurofeedback training of attention-related increases in spontaneous visual cortex activity [11**,12], as well as by training visual cortex activation patterns that corresponded to a specific visual stimulus [13°].

Neurofeedback

Neurofeedback training is accomplished by continuously measuring brain activity, analyzing it in real-time, and then providing feedback regarding the current brain state to the participant [14°,15°,16] (Figure 1). Feedback information is crucial for learning, and neurofeedback makes information about hidden brain states accessible to our consciousness. It thus provides a reinforcement signal to induce conditioning-type learning mechanisms, and also allows individuals to search for appropriate mental strategies to voluntarily control brain activity (Figure 2).

Until recently, neurofeedback was mainly used to train self-regulation of autonomic functions [17–19] or of specific electroencephalography (EEG) components. Such EEG-based neurofeedback training has been used clinically, in order for example to suppress epileptic activity [20], or to treat symptoms of attention deficit hyperactivity disorder (ADHD) [21-23]. It has also been used to optimize performance in healthy volunteers, for example improving vision [24], memory [25–27], motor learning [28], musical performance [29], and cognitive processing speed [30] (see [31,32°] for an overview). The main advantages of EEG as a tool for neurofeedback are that it is portable, relatively inexpensive, and that it has a very high temporal resolution. However, neurofeedback with EEG offers a limited spatial specificity and choice of brain regions that can be targeted. Recent technological

Figure 1



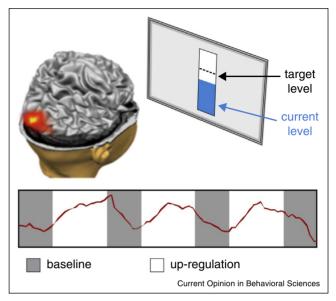
Schematic setup and data flow in real-time fMRI neurofeedback experiments. Participants are instructed to regulate brain activity. Local brain activity is measured using an MRI scanner. Real-time data pre-processing and analysis is performed with dedicated software Feedback is provided to the participant in the scanner via a projector (e.g. in the form of a thermometer icon, with the temperature reading indicating the current level of brain activity). With the help of the feedback information, participants can learn to voluntarily control brain activity in the targeted brain areas. Adapted from [11**].

advances in the field of functional magnetic resonance imaging (fMRI) have made it possible to analyze fMRI data in real-time and thus to provide online neurofeedback of the functional blood oxygen level dependent (BOLD) signal related to neuroelectric local field potentials [33,34]. Neurofeedback based on real-time fMRI allows for targeting specific brain regions with millimeter resolution and across the entire brain [16,35-37, 38°,39].

Real-time fMRI-based neurofeedback

Being able to train localized and functionally specific brain activity allows for enhancing perception and behavior that is associated with the targeted brain area (Figure 3). For example, visual perception has been enhanced with real-time fMRI neurofeedback training of the visual cortex. In one recent study, participants learned to voluntarily increase activity in a particular region of the visual cortex using neurofeedback [11**]. Up-regulation was mediated by increased top-down control of attention-related parietal cortex regions over the trained visual cortex region [12]. When participants exercised that voluntary control over visual cortex they did not only effectively up-regulate spontaneous activity in that region but also improved visual sensitivity. This goes well

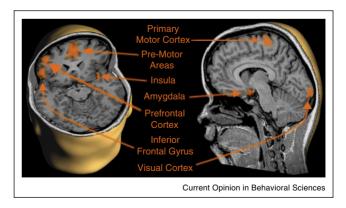
Figure 2



Example neurofeedback training. Participants perform several training runs of approximately 10 min duration, which are composed of baseline blocks and up-regulation blocks. During the up-regulation blocks the target-level indicator of the thermometer display moves up, which indicates to the participants that they should increase activity in the targeted brain region. Participants are presented feedback about their success via, for example, a thermometer icon. With the help of the feedback signal and by trial and error, participants learn voluntary control of activity in the targeted brain region. Adapted from [52].

beyond previous demonstrations of enhancing visual perception through perceptual learning because the improved visual sensitivity can be voluntarily switched on and off by the trained participants, and it does not require

Figure 3



Examples of target regions for fMRI neurofeedback. Studies have so far successfully modulated motor performance by training primary motor and pre-motor areas [36,40**,41*,42,43], emotions by training the anterior insula and the amygdala [47°,49], working memory by training the prefrontal cortex [44], linguistic processing by training the inferior frontal gyrus [45°], and visual sensitivity by training the visual cortex [11**,13**].

Rather than training spontaneous visual cortex activity, another study trained participants' visual cortex activation patterns that corresponded to a specific visual stimulus [13**]. Such training enhanced perceptual sensitivity specifically for that stimulus. The sensitivity remained improved even when participants did not actively self-regulate their visual cortex activity any more.

Also motor performance has been enhanced with neuro-feedback training. For example, training to voluntarily increase primary motor cortex activity caused faster motor responses [40**]. Similar studies that successfully trained to increase activity in pre-motor areas also found faster motor responses [36,41*], as well as improved performance in a visuo-motor tracking [42], and a motor execution task [43]. These training effects were mediated by altered connectivity of the trained pre-motor areas with other motor-related brain areas, and significantly greater behavioral enhancement was achieved with neurofeedback than with sham neurofeedback and motor imagery training [43].

In addition to visual perception and motor function, also more complex cognitive functions such as working memory, and linguistic processing have been enhanced through real-time fMRI neurofeedback training. For example, learning to voluntarily up-regulate the dorsolateral prefrontal cortex, which is a brain area involved in working memory, improved performance in a digit span and a letter memory task [44]. Similarly, learning to voluntarily increase activity in the right inferior frontal gyrus, which is a brain area involved in understanding the speaker's intentions, improved detecting emotional intonations [45°]. Interestingly, at the beginning of training, the inferior frontal gyrus showed dense connections to a widespread network of frontal and temporal areas, which decreased and lateralized to the right hemisphere with training [46].

Finally, real-time fMRI neurofeedback training has also been shown to affect emotions positively and negatively. For example, neurofeedback training related activity increases in the left anterior insula, which is a brain area associated with appraisal of emotional stimuli, caused more negative valence ratings of aversive stimuli [47°]. Conversely, more positive valence ratings were achieved through learning to increase the top-down connectivity from cognitive control areas onto emotional limbic areas using connectivity-based neurofeedback [48,49].

Limitations of neurofeedback-based cognitive enhancement

These examples illustrate that real-time fMRI neurofeedback training can improve task performance. Participants that had been trained with this new method could see better, responded faster, showed enhanced memory, and exhibited changed emotions. Although such findings are very promising, several limitations of this novel method have to be further researched and eventually overcome. One such limitation is the relatively small effect size of neurofeedback training. Although no study so far directly compared neurofeedback training with other means of cognitive enhancement, the motor, perceptual, memoryrelated, and emotional enhancements that have been achieved with neurofeedback training might be somewhat lower than that achieved with high dosage psychopharmacological interventions (but see [50]). On the other hand, at least for clinical populations, neurofeedback training has resulted in effect sizes similar to that obtained with deep brain stimulation [51].

The relatively small effect sizes may be partly due to the limited amount of training that participants receive. So far, most neurofeedback studies included only one training session of approximately 1 h. The most extensive training consisted of approximately 3 h of neurofeedback training spread over the course of several days [11", 36,41°,52]. This is far less training than is provided with, for example, videogame or mindfulness training [53,54]. The reasons for the limited amount of training offered to the participants are the high scanning costs in the range of approximately 500\$ per hour, and the limited availability of MRI scanners. Because maximal performance (i.e. plateauing of the learning curves) has not been reached in most neurofeedback training studies, it is likely that additional training sessions would further improve selfregulation abilities and cognitive enhancement.

The neurofeedback training is not effective in all participants. Behavioral effects may not be achieved, because participants fail to learn self-regulation of brain activity or the voluntary self-regulation does not result in the intended behavioral improvement. Like with all skill learning, learning with neurofeedback requires motivation, repeated practice, and good training conditions. More rewarding feedback designs, better MRI scanner availability, and improved image quality and real-time signal processing algorithms will facilitate learning success, as does a better understanding of its neuroscientific and psychological underpinnings [14**,55**]. Likewise, an increasingly better understanding of brain function through rapid advances in conventional neuroimaging research and improved sensitivity of the behavioral tests will facilitate the specificity and the detection of neurofeedback training effects. So far, most studies trained selfregulation of functionally specific brain areas, but they did not train to achieve brain states that corresponded to optimum levels of task performance.

Finally, in order to achieve cognitive enhancement, the effects of neurofeedback training need to transfer from

the neurofeedback training environment to situations outside the MRI scanner lacking neurofeedback. They also need to be stable and maintained for longer periods of time. So far, studies that included transfer runs without neurofeedback showed mixed results. Some failed to show transfer of learned self-regulation [38,56–58], while other studies reported successful transfer runs [11°,36,42, 49,52,59]. The generalization of learned self-regulation might be facilitated by interleaving transfer runs already during the neurofeedback training, rather than merely testing for transfer effects after training has been completed [52]. Another potentially effective measure to improve transfer might be to practice self-regulation at home or with a coach outside of the scanner. Finally, classical conditioning can be used to associate a stimulus with increased brain activity during neurofeedback training, and to subsequently use that conditioned stimulus for promoting self-regulation outside the scanner [60]. The maintenance of learned self-regulation for longer periods of more than 1 year has not been reported yet, but evidence from EEG Neurofeedback studies support the long-term maintenance of self-regulation [61–65].

Advantages of neurofeedback-based cognitive enhancement

Although neurofeedback based on real-time fMRI is a rather recent development and thus requires further exploration, it clearly offers certain advantages and benefits over conventional cognitive enhancement approaches. Based on previous studies and conceptual arguments, the neurofeedback method is considered safe [66]. As an intervention it empowers the volunteers, since they learn voluntary control. Another advantage of real-time fMRI neurofeedback is that it is fully compatible with other approaches for cognitive enhancement such as psychopharmacology, brain stimulation techniques, and cognitive training. Combining different approaches that have their specific strengths might lead to performance increases beyond simple additive effects. For example, interleaving individual neurofeedback training sessions might make standard cognitive training more directed and efficient. Neurofeedback can also be personalized to the individual needs of each participant in terms of the training objectives, and the target brain areas/ networks.

Further, a unique benefit of neurofeedback training is that it may provide insights into how the performance improvement is achieved. Because the training takes place in the MRI scanner, changes in brain activity that underlie successful cognitive enhancement training are automatically recorded, and can be evaluated in order to further improve the effectiveness of this new approach. Another unique advantage of neurofeedback is that it integrates both biological as well as psychological factors underlying cognitive enhancement. Unlike psychopharmacology and cognitive training, which predominantly address either biological or psychological aspects, respectively, neurofeedback training directly changes brain states and enhances mental self-regulation competencies. Finally, neurofeedback is non-invasive in the sense that it is based on a fundamental human capacity: our ability to learn. It therefore does not require interventions from the outside such as with psychopharmacology or brain stimulation techniques.

Conclusions

Neurofeedback based on real-time fMRI is a novel method for cognitive enhancement, and the technology required for it is advancing rapidly. The initial success of neurofeedback training in fields such as perception. motor performance, and memory are promising, although further advances are needed to overcome current limitations of this novel method. The unique advantages offered by neurofeedback training promise that it will be a powerful tool for cognitive enhancement.

Conflict of interest statement

The Wellcome Trust Centre for Neuroimaging has an institutional research agreement with and receives support from Siemens.

Acknowledgements

This work was supported by the Swiss National Science Foundation, the European Union (BRAINTRAIN: Marie Curie Career Integration Grant FP7-PEOPLE-2011-CIG), and the Wellcome Trust. This work is part of the BRAINTRAIN European research network (Collaborative Project) supported by the European Commission under the Health Cooperation Work Programme of the 7th Framework Programme (Grant agreement No.

References and recommended reading

Papers of particular interest, published within the period of the review, have been highlighted as:

- of special interest
- of outstanding interest
- Tong F: Primary visual cortex and visual awareness. Nat Rev Neurosci 2003, 4:219-229.
- Rees G, Kreiman G, Koch C: Neural correlates of consciousness in humans. Nat Rev Neurosci 2002, 3:261-270.
- Ress D. Heeger DJ: Neuronal correlates of perception in early visual cortex. Nat Neurosci 2003, 6:414-420
- Brancucci A: Neural correlates of cognitive ability. J Neurosci Res 2012. 90:1299-1309.
- Neubauer AC, Fink A: Intelligence and neural efficiency. Neurosci Biobehav Rev 2009, 33:1004-1023.
- Jung RE, Haier RJ: The Parieto-Frontal Integration Theory (P-FIT) of intelligence: converging neuroimaging evidence. Behav Brain Sci 2007, 30:135-154 discussion 154-187.
- Kane MJ, Engle RW: The role of prefrontal cortex in workingmemory capacity, executive attention, and general fluid intelligence: an individual-differences perspective. Psychon Bull Rev 2002, 9:637-671
- Olesen PJ, Westerberg H, Klingberg T: Increased prefrontal and parietal activity after training of working memory Nat Neurosci 2004, 7:75-79.

- Rees G: Neuroimaging of visual awareness in patients and normal subjects. Curr Opin Neurobiol 2001, 11:150-156.
- 10. Szczepanski SM, Knight RT: Insights into human behavior from lesions to the prefrontal cortex. Neuron 2014, 83:1002-1018.
- 11. Scharnowski F. Hutton C. Josephs O. Weiskopf N. Rees G:
- Improving visual perception through neurofeedback J Neurosci 2012. 32:17830-17841.

This study provides evidence that neurofeedback training of visual cortex activity improves perception for previously unseen visual stimuli.

- Scharnowski F, Rosa MJ, Golestani N, Hutton C, Josephs O, Weiskopf N, Rees G: Connectivity changes underlying neurofeedback training of visual cortex activity. PLOS ONE 2014, 9:e91090.
- Shibata K, Watanabe T, Sasaki Y, Kawato M: Perceptual learning 13. incepted by decoded fMRI neurofeedback without stimulus presentation. Science 2011, 334:1413-1415.

An important paper showing that neurofeedback training can induce highly selective brain plasticity even without participant's awareness of what was to be learned.

- Sulzer J, Haller S, Scharnowski F, Weiskopf N, Birbaumer N,
- Blefari ML, Bruehl AB, Cohen LG, Decharms RC, Gassert R et al.: Real-time fMRI neurofeedback: progress and challenges. Neuroimage 2013, 76C:386-399

An extensive review covering the current state-of-the-art in the field of real-time fMRI neurofeedback.

- 15. Weiskopf N: Real-time fMRI and its application to
- neurofeedback. Neuroimage 2012, 62:682-692.

Review on real-time fMRI methods and applications to neurofeedback with particular interest in the historical development of the field.

- 16. deCharms RC: Reading and controlling human brain activation using real-time functional magnetic resonance imaging. Trends Cogn Sci 2007, 11:473-481.
- 17. Kimmel HD: Instrumental conditioning of autonomically mediated responses in human beings. Am Psychol 1974,
- 18. Miller NE: Learning of visceral and glandular responses. Science 1969, 163:434.
- 19. Shearn DW: Operant conditioning of heart rate. Science 1962, **137**:530.
- 20. Kotchoubey B, Strehl U, Uhlmann C, Holzapfel S, Konig M, Froscher W, Blankenhorn V, Birbaumer N: Modification of slow cortical potentials in patients with refractory epilepsy: a controlled outcome study. Epilepsia 2001, 42:406-416.
- 21. Fuchs T, Birbaumer N, Lutzenberger W, Gruzelier JH, Kaiser J: Neurofeedback treatment for attention-deficit/hyperactivity disorder in children: a comparison with methylphenidate. Appl Psychophysiol Biofeedback 2003, 28:1-12
- Gevensleben H, Rothenberger A, Moll GH, Heinrich H: **Neurofeedback in children with ADHD: validation and** challenges. Expert Rev Neurother 2012, 12:447-460.
- Moriyama TS, Polanczyk G, Caye A, Banaschewski T, Brandeis D, Rohde LA: Evidence-based information on the clinical use of neurofeedback for ADHD. Neurotherapeutics 2012, 9:588-598.
- 24. Nan WY, Wan F, Lou CI, Vai MI, Rosa A: Peripheral visual performance enhancement by neurofeedback training. Appl Psychophysiol Biofeedback 2013, 38:285-291.
- 25. Reiner M, Rozengurt R, Barnea A: Better than sleep: theta neurofeedback training accelerates memory consolidation. Biol Psychol 2014, 95:45-53.
- 26. Wang JR, Hsieh S: Neurofeedback training improves attention and working memory performance. Clin Neurophysiol 2013, **124**:2406-2420.
- Vernon D, Egner T, Cooper N, Compton T, Neilands C, Sheri A, Gruzelier J: The effect of training distinct neurofeedback protocols on aspects of cognitive performance. Int J Psychophysiol 2003, 47:75-85.

- 28. Ros T, Munneke MA, Parkinson LA, Gruzelier JH: Neurofeedback facilitation of implicit motor learning. Biol Psychol 2014,
- 29. Egner T, Gruzelier JH: Ecological validity of neurofeedback: modulation of slow wave EEG enhances musical performance. Neuroreport 2003, 14:1221-1224.
- Angelakis E. Stathopoulou S. Frymiare JL. Green DL. Lubar JF. Kounios J: **EEG neurofeedback: a brief overview and an** example of peak alpha frequency training for cognitive enhancement in the elderly. Clin Neuropsychol 2007, 21:110-129.
- 31. Vernon DJ: Can neurofeedback training enhance performance? An evaluation of the evidence with implications for future research. Appl Psychophysiol Biofeedback 2005, 30:347-364.
- 32. Gruzelier JH: EEG-neurofeedback for optimising performance.
- I: a review of cognitive and affective outcome in healthy participants. Neurosci Biobehav Rev 2014, 44:124-141.

An overview of cognitive enhancement with EEG-based neurofeedback.

- Logothetis NK: What we can do and what we cannot do with fMRI. Nature 2008, 453:869-878.
- Logothetis NK, Pauls J, Augath M, Trinath T, Oeltermann A: Neurophysiological investigation of the basis of the fMRI signal. Nature 2001, 412:150-157.
- 35. deCharms RC: Applications of real-time fMRI. Nat Rev Neurosci 2008, **9**:720-729.
- 36. Weiskopf N, Scharnowski F, Veit R, Goebel R, Birbaumer N, Mathiak K: Self-regulation of local brain activity using real-time functional magnetic resonance imaging (fMRI). J Physiol Paris 2004, 98:357-373.
- 37. Weiskopf N, Sitaram R, Josephs O, Veit R, Scharnowski F, Goebel R, Birbaumer N, Deichmann R, Mathiak K: **Real-time** functional magnetic resonance imaging: methods and applications. Magn Reson Imaging 2007, 25:989-1003.
- 38. Sulzer J, Sitaram R, Blefari ML, Kollias S, Birbaumer N,
 Stephan KE, Luft A, Gassert R: Neurofeedback-mediated selfregulation of the dopaminergic midbrain. Neuroimage 2013.

This study presents the first demonstration that neurofeedback training of dopaminergic midbrain structures might indirectly allow self-control of dopaimne levels.

- 39. Weiskopf N, Mathiak K, Bock SW, Scharnowski F, Veit R, Grodd W, Goebel R, Birbaumer N: Principles of a braincomputer interface (BCI) based on real-time functional magnetic resonance imaging (fMRI). IEEE Trans Biomed Eng 2004, **51**:966-970.
- 40. Bray S. Shimoio S. O'Doherty JP: Direct instrumental conditioning of neural activity using functional magnetic resonance imaging-derived reward feedback. *J Neurosci* 2007, 27:7498-7507.

The first study that used real-time fMRI to directly condition neural activity using monetary reward, rather than feeding back information about brain activity levels.

Scharnowski F, Veit R, Zopf R, Studer P, Bock S, Diedrichsen J, Goebel R, Mathiak K, Birbaumer N, Weiskopf N: Manipulating motor performance and memory through real-time fMRI neurofeedback. Biol Psychol 2015, 108:85-97.

The first study that simultaneously trained bidirectional control (i.e. upregulation and down-regulation) of two functionally distinct brain areas.

- Sitaram R, Veit R, Stevens B, Caria A, Gerloff C, Birbaumer N, Hummel F: Acquired control of ventral premotor cortex activity by feedback training: an exploratory real-time FMRI and TMS study. Neurorehabil Neural Repair 2012, 26:256-265.
- 43. Zhao X, Song S, Ye Q, Guo J, Yao L: Causal interaction following the alteration of target region activation during motor imagery training using real-time fMRI. Front Hum Neurosci 2013:7.
- 44. Zhang G, Yao L, Zhang H, Long Z, Zhao X: Improved working memory performance through self-regulation of dorsal lateral prefrontal cortex activation using real-time fMRI. PLOS ONE 2013, **8**:e73735.

45. Rota G, Sitaram R, Veit R, Erb M, Weiskopf N, Dogil G,
Birbaumer N: Self-regulation of regional cortical activity using real-time fMRI: the right inferior frontal gyrus and linguistic

processing. Hum Brain Mapp 2009, 30:1605-1614.

- This study presented the first evidence that neurofeedback training can be used to improve speech processing.
- Rota G, Handjaras G, Sitaram R, Birbaumer N, Dogil G: Reorganization of functional and effective connectivity during real-time fMRI-BCI modulation of prosody processing. Brain Lang 2011, 117:123-132.
- 47. Caria A, Sitaram R, Veit R, Begliomini C, Birbaumer N: Volitional control of anterior insula activity modulates the response to aversive stimuli. A real-time functional magnetic resonance imaging study. Biol Psychiatry 2010, 68:425-432.

This study demonstrates that neurofeedback training of brain areas involved in emotion processing alters the perception of emotional stimuli.

- Koush Y, Rosa MJ, Robineau F, Heinen KS, Weiskopf WR, Vuilleumier N, Van De Ville P, Scharnowski DF: Connectivitybased neurofeedback: dynamic causal modeling for real-time fMRI. Neuroimage 2013, 81:422-430.
- 49. Koush Y, Rey G, Pichon S, Rieger SW, Linden D, Van De Ville D, Vuilleumier P, Scharnowski F: Learning control over emotion networks with real-time fMRI connectivity feedback. In Proceedings Organization for Human Brain Mapping. 2014.
- Husain M, Mehta MA: Cognitive enhancement by drugs in health and disease. Trends Cogn Sci 2011, 15:28-36.
- Linden DEJ, Habes I, Johnston SJ, Linden S, Tatineni R, Subramanian L, Sorger B, Healy D, Goebel R: Real-time selfregulation of emotion networks in patients with depression. PLOS ONE 2012:7.
- 52. Robineau F, Rieger SW, Mermoud C, Pichon S, Koush Y, Van De Ville D, Vuilleumier P, Scharnowski F: Self-regulation of interhemispheric visual cortex balance through real-time fMRI neurofeedback training. Neuroimage 2014, 100:1-14.
- Green CS, Bavelier D: Learning, attentional control, and action video games. Curr Biol 2012. 22:R197-R206.
- Tang YY, Posner MI: Training brain networks and states. Trends Cogn Sci 2014, 18:345-350.
- 55. Birbaumer N, Ruiz S, Sitaram R: Learned regulation of brain
- •• metabolism. Trends Cogn Sci 2013, 17:295-302.

An excellent review of the neural mechanisms underlying neurofeedback training.

- Ruiz S, Buyukturkoglu K, Rana M, Birbaumer N, Sitaram R: Realtime fMRI brain computer interfaces: self-regulation of single brain regions to networks. Biol Psychol 2014.
- Hamilton JP, Glover GH, Hsu J-J, Johnson RF, Gotlib IH: Modulation of subgenual anterior cingulate cortex activity with real-time neurofeedback. Hum Brain Mapp 2011, 32:22-31.
- Lee JH, Kim J, Yoo SS: Real-time fMRI-based neurofeedback reinforces causality of attention networks. Neurosci Res 2012, 72:347-354
- deCharms RC, Christoff K, Glover GH, Pauly JM, Whitfield S, Gabrieli JDE: Learned regulation of spatially localized brain activation using real-time fMRI. Neuroimage 2004, 21:436-443.
- Strehl U: What learning theories can teach us in designing neurofeedback treatments. Front Hum Neurosci 2014, 8:894
- Kotchoubey B, Blankenhorn V, Froscher W, Strehl U, Birbaumer N: Stability of cortical self-regulation in epilepsy patients. Neuroreport 1997, 8:1867-1870.
- Kouijzer MEJ, de Moor JMH, Gerrits BJL, Buitelaar JK, van Schie HT: Long-term effects of neurofeedback treatment in autism. Res Autism Spectr Disord 2008, 3:496-501.
- Leins U, Goth G, Hinterberger T, Klinger C, Rumpf N, Strehl U: Neurofeedback for children with ADHD: a comparison of SCP and Theta/Beta protocols. Appl Psychophysiol Biofeedback 2007, 32:73-88.
- Tansey MA: 10-year stability of EEG biofeedback results for a hyperactive boy who failed 4th grade perceptually impaired class. Biofeedback Self Regul 1993, 18:33-44.
- Vernon D, Frick A, Gruzelier J: Neurofeedback as a treatment for ADHD: a methodological review with implications for future research. J Neurother 2004, 8:53-82.
- 66. Hawkinson JE, Ross AJ, Parthasarathy S, Scott DJ, Laramee EA, Posecion LJ, Rekshan WR, Sheau KE, Njaka ND, Bayley PJ et al.: Quantification of adverse events associated with functional MRI scanning and with real-time fMRI-based training. Int J Behav Med 2012, 19:372-381.