Signalling speed along a key white matter tract influences memory recall ability in humans Ian A. Clark¹, Siawoosh Mohammadi², Martina F. Callaghan¹ & Eleanor A. Maguire^{1*} ¹Wellcome Centre for Human Neuroimaging, Department of Imaging Neuroscience, UCL Queen Square Institute of Neurology, University College London, London, UK ²Institute of Systems Neuroscience, University Medical Centre Hamburg-Eppendorf, Hamburg, Germany *For correspondence: e.maguire@ucl.ac.uk Competing interests: The authors declare no competing interests.

Abstract

Conduction velocity is the speed at which electrical signals travel along axons and is a crucial determinant of neural communication. Inferences about conduction velocity can now be made in vivo in humans using magnetic resonance (MR) imaging and a measure called the MR gratio. Here, in the first application to cognition, we found that increased MR gratio, and by inference faster conduction velocity, specifically in the parahippocampal cingulum bundle, which connects the hippocampus with a range of other brain areas, was associated with better memory recall ability in 217 healthy adults. Moreover, two tract features seemed to favour better memory retrieval – large inner axon diameters and coherently organised neurites, both of which facilitate speedy signalling. These results offer a new perspective on drivers of individual differences in memory recall ability. More broadly, they show that MR gratio can provide novel insights into how the human brain processes and integrates information.

Introduction

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Communication between neurons in the brain is critical for cognition, and depends upon action potentials being conveyed along axons within white matter tracts. The speed at which these electrical signals travel along axons is known as the conduction velocity. It has been suggested that faster axonal conduction velocity promotes better cognition. For example, an increase in axonal conduction velocity is hypothesised to underpin the greater cognitive processing ability of vertebrates, in particular primates and humans (Brancucci, 2012; Miller, 1994), compared to invertebrates (Arancibia-Cárcamo et al., 2017; Bullock et al., 1984; Nave, 2010). In rats (Aston-Jones et al., 1985) and cats (Xi et al., 1999), faster axonal conduction velocity has been observed in younger compared to older animals. In a similar vein, axonal degradation that can lead to reduced conduction velocity has been identified in older compared to younger monkeys (Peters et al., 2000; Peters and Sethares, 2002). Slower conduction velocity may, therefore, be a factor in age-related cognitive decline. Echoing these findings from non-humans, estimates of conduction velocity in humans from the latency of visual evoked potentials recorded over primary visual cortex (Reed and Jensen, 1992) and between the thalamus and parietal cortex (Reed and Jensen, 1993) have been positively correlated with nonverbal intelligence quotients. In addition, faster axonal conduction velocities are thought to better explain increases in intelligence than absolute and relative brain volumes (Dicke and Roth, 2016). That faster conduction velocity might confer an evolutionary cognitive advantage is perhaps unsurprising. The scope for signals to travel quickly and efficiently between brain regions could make all the difference for an individual's survival. The conduction velocity of an axon is dependent upon two biological features – the axon diameter and the presence and thickness of a myelin sheath (Gasser and Grundfest, 1939;

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Hursh, 1939; Huxley and Stämpeli, 1949; Rushton, 1951). A larger axon diameter results in less resistance to the action potential ion flow, resulting in faster conduction velocity. The presence of a myelin sheath around an axon acts like an electrical insulating layer, reducing ion loss and preserving the action potential, and this helps to maintain or even increase conduction velocity. A key factor in determining an axon's conduction velocity is the g-ratio (Chomiak and Hu, 2009; Rushton, 1951; Schmidt and Knösche, 2019), which is computed as the ratio of the inner axon diameter, or radius, relative to that of the axon plus the myelin sheath that encases it (Figure 1A). Given that the g-ratio encompasses information about the inner axon diameter and myelin thickness, differences in g-ratio can help to differentiate which of these two features might be influencing variations in conduction velocity (Caeyenberghs et al., 2016; Kaller et al., 2017; Lakhani et al., 2016; Waxman, 1980; Xin and Chan, 2020). Here we consider four different scenarios, central to our hypothesis testing, from which faster conduction velocity might arise, with each scenario differing in the underlying microstructure and consequently indexed differently by the g-ratio. In Figure 1F, inner axon diameter, myelin thickness and g-ratio are plotted together. Myelin thickness is represented by the gradient in background colour and contours, with thinnest myelin at the bottom right, and thickest on the top left. The direction of the arrows describes the change in g-ratio for the microstructural variations presented in the four scenarios of interest. Specifically (1) faster conduction velocity could be due to an increase in the thickness of the myelin sheath, with the inner axon diameter remaining constant. This is observed as a decrease in g-ratio values (Figure 1B and Figure 1F, blue arrow). (2) An increase in conduction velocity could arise primarily from an increase in myelin sheath thickness, but one that is also accompanied by a larger inner axon diameter. Here, a decrease in g-ratio would also be observed, but to a lesser extent than when the inner axon diameter remains constant (Figure 1C and Figure 1F, red arrow). (3) Quicker conduction velocity could be due

predominantly to a larger inner axon diameter, but with some increase in myelin thickness also being present. This would result in an increase in the g-ratio (Figure 1D and Figure 1F, orange arrow). (4) Faster conduction velocity could be a consequence of both the inner axon diameter and myelin thickness increasing proportionally to each other, and a constant g-ratio value would be expected in this circumstance (Figure 1E and Figure 1F, black arrow).

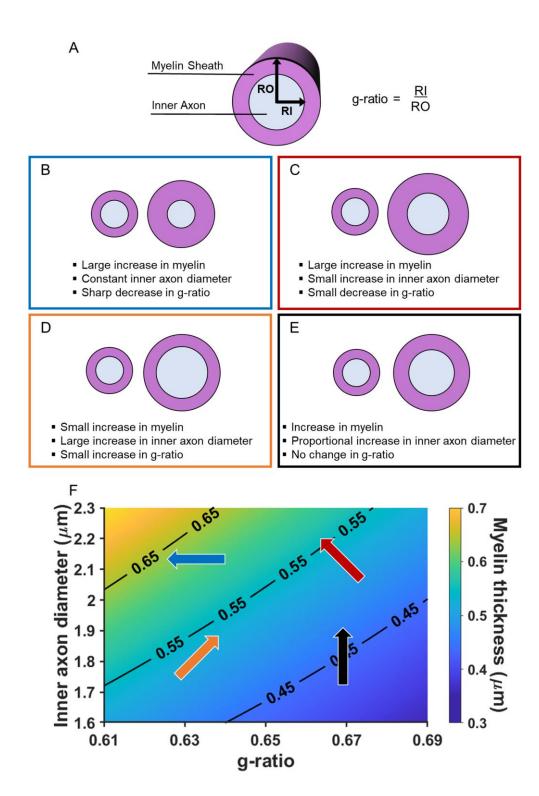


Figure 1. Illustration of the g-ratio and how it relates to specific microstructural properties that could give rise to faster conduction velocity. (A) Schematic of a myelinated axon. (B-E) Illustrations of how changes in axonal microstructure could result in faster conduction velocity, and how these are manifested in the g-ratio. (F) Graphical representation of B-E (see Appendix 1 for details of the simulation). Myelin thickness is represented by the gradient in background colour and contours on the graph, with the thinnest myelin at the bottom right and thickest at the top left. The direction of the arrows describes the change in g-ratio for each microstructural variation presented in B-E. The positioning and colours of the arrows correspond to the text box outline colours in B-E.

Until recently, g-ratio measurements have been restricted to invasive studies in animals,

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consequently limiting its application. However, by combining diffusion magnetic resonance imaging (MRI) with quantitative structural MRI scans optimised to measure myelination (e.g. magnetisation transfer saturation; Weiskopf et al., 2013), it is now possible to estimate the gratio in vivo in healthy humans across the whole brain (Drakesmith et al., 2019; Mohammadi et al., 2015; Mohammadi and Callaghan, 2020; Stikov et al., 2015). This is achieved by measuring an aggregate g-ratio, calculating the ensemble average across a voxel of an underlying microstructural distribution of g-ratios (Stikov et al., 2015; West et al., 2016). Whole brain MR g-ratio maps enable the investigation of the MR g-ratio of white matter fibre pathways at the group level. These MR g-ratio estimates have been optimised (Ellerbrock and Mohammadi, 2018; Jung et al., 2018; West et al., 2018) and used to investigate white matter development (Cercignani et al., 2017), changes in the g-ratio during aging (Berman et al., 2018), and as a potential neuroimaging marker in patients with multiple sclerosis (Yu et al., 2019). As far as we are aware, the MR g-ratio has never been examined in relation to cognition. This is despite the novel insights it could provide, for example, into individual differences. The rich recall of personal past experiences known as autobiographical memories is a critical cognitive function that serves to sustain our sense of self, enable independent living, and prolong survival (Tulving, 2002). While some healthy individuals can recollect decadesold autobiographical memories with great richness and clarity, others struggle to recall what they did last weekend (LePort et al., 2012; Palombo et al., 2015). In the context of the healthy population, we currently lack a clear biological explanation for the basis of these individual differences (Palombo et al., 2018). There is no doubt that the hippocampus is central to the processing of autobiographical memories, and hippocampal damage is linked with autobiographical memory impairments (McCormick et al., 2018; Scoville and Milner, 1957; Winocur and Moscovitch, 2011). However, no consistent relationship between

autobiographical memory recall ability and hippocampal grey matter volume or microstructure has been identified in healthy individuals (Clark et al., 2020; Clark et al., 2021a; LePort et al., 2012; Maguire et al., 2003; Van Petten, 2004). The hippocampus does not act alone, and functional neuroimaging studies have revealed that a distributed set of brain areas supports autobiographical memory recall along with the hippocampus, including the parahippocampal, retrosplenial, parietal and medial prefrontal cortices (Andrews-Hanna et al., 2014; Maguire, 2001; Spreng et al., 2009; Svoboda et al., 2006). Changes in MR g-ratio and, by inference, conduction velocity, might affect communication between these brain regions and so influence individual differences in autobiographical memory recall within the healthy population.

Three white matter pathways in particular enable communication with the hippocampal region — the fornix, the uncinate fasciculus and the parahippocampal cingulum bundle. The fornix (Figure 2A) is a major pathway in and out of the hippocampus and connects it to the orbital and medial prefrontal cortices, the basal forebrain, the anterior thalamus, the hypothalamus and the mammillary bodies (Aggleton et al., 2015; Croxson et al., 2005). The uncinate fasciculus (Figure 2B) originates in the uncus, entorhinal and parahippocampal cortices and passes over the lateral nucleus of the amygdala, arcs around the Sylvian fissure, terminating in various locations throughout the prefrontal cortex (Croxson et al., 2005; Von Der Heide et al., 2013). The parahippocampal cingulum bundle (Figure 2C) links the hippocampus with the entorhinal, parahippocampal, retrosplenial and parietal cortices, as well as providing another route between the hippocampus and anterior thalamus (Bubb et al., 2018; Jones et al., 2013b). It also links to the prefrontal cortex via its connections with other parts of the cingulum bundle.

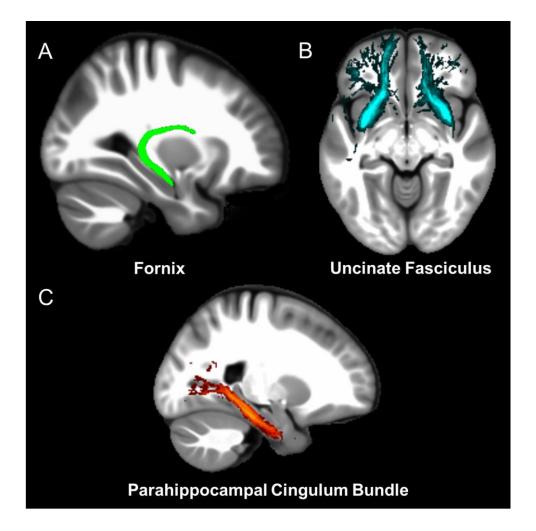


Figure 2. The three white matter tracts of interest, given their relationship with the hippocampal region. The white matter tracts were defined using the Johns Hopkins probabilistic white matter tractography atlas (Hua et al., 2008). with the minimum probability threshold set to 25%, with the exception of the fornix as the available fornix tract was not probabilistic.

In the current study we calculated the MR g-ratio within these three pathways to ascertain whether this was significantly related to autobiographical memory recall ability. The relationship of g-ratio to the underlying microstructure as outlined in Figure 1, allowed us to further gauge whether any significant effects were more likely to be explained by the extent of myelination or the size of the inner axonal diameter of the fibres in these three white matter tracts. As well as the MR g-ratio, we also used the neurite orientation dispersion and density imaging (NODDI; Zhang et al., 2012) biophysical model to derive two complementary

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biological measures that could provide further insights into the arrangement of neurites in a voxel. A neurite is any projection from a neuron's cell body, such as an axon or a dendrite. The neurite orientation dispersion index is an estimate of the organisation of the neurites in a voxel, where a small orientation dispersion index value indicates a low dispersion of neurites, in other words, that the neurites are coherently organised. The second property, neurite density, is a measure of the density of the neurites in a voxel. For completeness, the commonly reported physical parameters (e.g. fractional anisotropy and mean diffusivity; Basser, 1995) that are often derived from diffusion data were also computed (Oeschger et al., 2021; see Appendix 1 and Supplementary files 1 and 2). However, these metrics lack biological specificity (Jensen and Helpern, 2010; Jones et al., 2013a) and, consequently, could not speak to our research questions. To ensure an appropriate sample size and a wide range of autobiographical memory recall ability, we examined a large group of healthy young adults from the general population (n = 217; 109 female, 108 male; mean age of 29.0 years, SD = 5.60; age was restricted tobetween 20-41 years to limit the possible effects of aging). All participants underwent the widely-used Autobiographical Interview (Levine et al., 2002), which provided a detailed metric characterising their autobiographical memory recall ability as well as a control measure. Diffusion and magnetisation transfer saturation MRI scans were obtained for each person to enable calculation of the MR g-ratio and the other measures. Our analyses were performed using weighted means from each of the three white matter tracts of interest rather than voxel-wise across the whole brain, reducing the potential for false positives (Marek et al., 2022). Focusing on the fornix, uncinate fasciculus and parahippocampal cingulum bundle, and assuming that better autobiographical memory recall is associated with faster conduction velocity (e.g. Brancucci, 2012; Dicke and Roth, 2016; Reed and Jensen, 1992; Xi et al., 1999),

we predicted that variations in the MR g-ratio from some or all of these tracts would be associated with better autobiographical memory recall ability. We further sought to adjudicate between the scenarios outlined in Figure 1 to ascertain if better autobiographical memory recall was associated with an increase in myelin thickness. This would be reflected as a negative relationship between the MR g-ratio and autobiographical memory recall ability (Figure 1B, C and F – blue and red arrows). Alternatively, better autobiographical memory recall ability could be related to predominantly larger inner axon diameters of the fibres within the tracts. This would be observed in the form of a positive relationship between the MR g-ratio and autobiographical memory recall ability (Figure 1D and F – orange arrow).

Results

Autobiographical memory recall

We employed the widely-used Autobiographical Interview (Levine et al., 2002) to score autobiographical memory recall (see Materials and Methods for full details). The main measure of autobiographical memory recall ability was the mean number of "internal" details from the freely recalled autobiographical memories. Internal details are those that describe the specific past event in question, and are considered to reflect episodic information. Across the participants, the mean number of internal details provided per memory was 23.95 (SD = 7.25; range = 4.60-44.60).

As a control measure, the mean number of "external" details was also calculated from the autobiographical memory descriptions. External details pertain to semantic information about the past event, and other non-event information. Across the participants, the mean number of external details provided per memory was 5.35 (SD = 3.20; range = 0.8-17.40).

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No relationships between autobiographical memory recall ability and fornix or uncinate fasciculus microstructure measures We first investigated the fornix and uncinate fasciculus. None of the measures from either tract were associated with autobiographical memory recall ability. This was the case when using a corrected p < 0.017 (see Materials and Methods) or an uncorrected p < 0.05 threshold. Full details of these results are provided in Appendix 1 (Appendix 1–figures 1 and 2; Appendix 1– tables 1-4), with the source data available in Supplementary file 1. Of note, and for completeness, we also performed exploratory analyses in six additional white matter tracts: the anterior thalamic radiation, the dorsal cingulum bundle, the forceps minor, the inferior longitudinal fasciculus, the inferior occipitofrontal fasciculus and the superior longitudinal fasciculus. However, as with the fornix and the uncinate fasciculus, none of the metrics from any of these tracts were associated with autobiographical memory recall ability, even when using an uncorrected p < 0.05 threshold (see Appendix 1– figures 3-8 and Appendix 1– tables 5-16 for full details). As noted in the Introduction, traditional physical parameters (e.g. fractional anisotropy and mean diffusivity) were also extracted for all tracts but, given their lack of biological specificity (Jensen and Helpern, 2010; Jones et al., 2013a), these are reported in Appendix 1– tables 1-16. The parahippocampal cingulum bundle We found that variations in autobiographical memory recall ability were uniquely related to the microstructure of the parahippocampal cingulum bundle. This tract connects the hippocampus with the entorhinal, parahippocampal, retrosplenial and parietal cortices, and the anterior thalamus (Figure 3). Moreover, via other subdivisions of the cingulum bundle, it is indirectly connected with prefrontal regions including the medial prefrontal cortex. The

parahippocampal cingulum bundle is, therefore, well positioned for information transfer between the key regions involved in autobiographical memory recall (Andrews-Hanna et al., 2014; Maguire, 2001; Spreng et al., 2009; Svoboda et al., 2006).

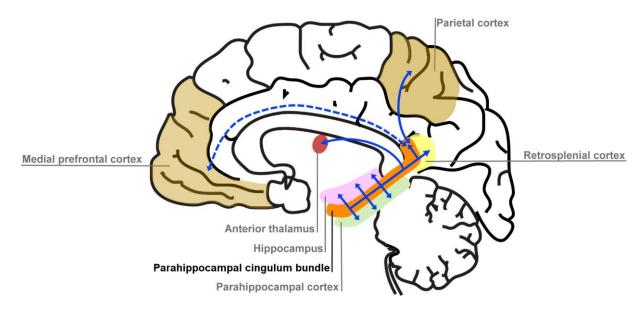


Figure 3. Simplified schematic of the location and main connections of the parahippocampal cingulum bundle. The blue lines indicate direct connections, and the dashed blue line an indirect connection.

As with the other tracts (see Materials and Methods), the parahippocampal cingulum bundle region of interest (ROI) was defined bilaterally using the Johns Hopkins probabilistic white matter tractography atlas (Hua et al., 2008). To reduce partial volume effects, we used a conservative minimum probability of 25%, and the tract ROI was refined for each participant to ensure the mask was limited to each person's white matter. The mean number of voxels in the parahippocampal cingulum bundle ROI was 129.11 (SD=25.68), and the variance in number of voxels across individuals was accounted for in our analyses. Table 1 shows the summary statistics for the microstructure measures (see Appendix 1–tables 17 and 18, Appendix 1–figures 9 and 10, and Supplementary file 2 for the traditional physical parameters, e.g. fractional anisotropy, extracted from the parahippocampal cingulum bundle).

Table 1. Means and standard deviations for the microstructure measures from the parahippocampal cingulum bundle.

Microstructure Measure	Mean	Standard Deviation
	0.44	0.040
MR g-ratio	0.647	0.043
Neurite dispersion (ODI)	0.189	0.038
Neurite density	0.480	0.051

Note. ODI = Orientation Dispersion Index

Greater MR g-ratio of the parahippocampal cingulum bundle was associated with

better autobiographical memory recall

We first investigated whether the MR g-ratio of the parahippocampal cingulum bundle was associated with autobiographical memory recall ability, performing partial correlation analyses with age, gender, scanner and the number of voxels in the ROI included as covariates. A significant positive association was observed between the parahippocampal cingulum bundle MR g-ratio and the number of internal details (Figure 4A; r(211) = 0.18, p = 0.008, 95% CI = 0.05, 0.29). This relationship was specific to internal details, with no association evident for the external details control measure (Figure 4B; r(211) = -0.09, p = 0.17, 95% CI = -0.21, 0.019). Direct comparison of the correlations confirmed there was a significantly larger correlation between the MR g-ratio and internal details than for external details (Figure 4C; mean r difference = 0.28 (95% CI = 0.11, 0.45), z = 3.21, p = 0.0013). Therefore, when MR g-ratio values were higher in the parahippocampal cingulum bundle, suggesting the presence of fibres with larger inner axon diameters (see Figure 1D and 1F, orange arrow), better autobiographical memory recall was observed.

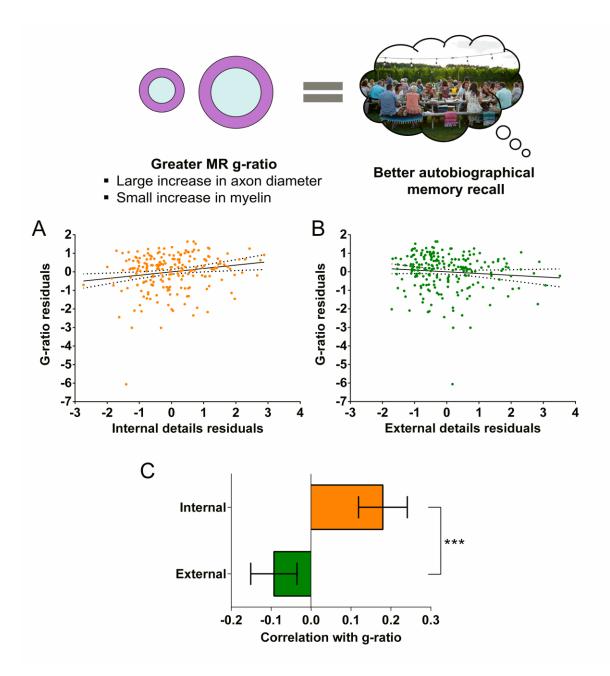


Figure 4. G-ratio and the parahippocampal cingulum bundle. The relationship between parahippocampal cingulum bundle MR g-ratio and autobiographical memory recall ability (internal details), and the control measure (external details) are shown. (A) There was a significant positive correlation between g-ratio and internal details (dashed lines indicate the confidence intervals). (B) There was no significant relationship between g-ratio and external details. (C) Bar chart showing the partial correlation coefficients (with standard errors) between g-ratio and internal and external details. There was a significant difference between the correlations when they were directly compared; ***p < 0.001. Data points for this figure are provided in Figure 4-source data 1.

Low neurite dispersion was related to better autobiographical memory recall

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In addition to the MR g-ratio, we also examined the relationship between autobiographical memory recall ability and two complementary biological measures, the neurite orientation dispersion index and neurite density maps estimated using the NODDI biophysical model (Zhang et al., 2012). Partial correlations revealed a significant negative correlation between the neurite orientation dispersion index (a small orientation dispersion index value indicates low dispersion) and internal details (Figure 5A; r(211) = -0.19, p = 0.005, 95% CI = -0.32, -0.06). This was again specific to internal details with no significant relationship between the neurite orientation dispersion index and external details (Figure 5B; r(211) = 0.07, p = 0.28, 95% CI = -0.05, 0.20). Direct comparison of the correlations revealed a significantly larger correlation between the neurite orientation dispersion index and internal details than for external details (Figure 5C; mean r difference = 0.27 (95% CI = 0.44, 0.10), z = 3.13, p = 0.0017). Neurite density was not significantly related to either internal (r(211) = 0.04, p = 0.60, 95% CI = -0.09, 0.16), or external (r(211) = 0.01, p = 0.93, 95% CI = -0.12, 0.13) details. Therefore, in addition to a greater MR g-ratio, when neurites in the parahippocampal cingulum bundle were less dispersed and thus more coherently organised, this was associated with better autobiographical memory recall.

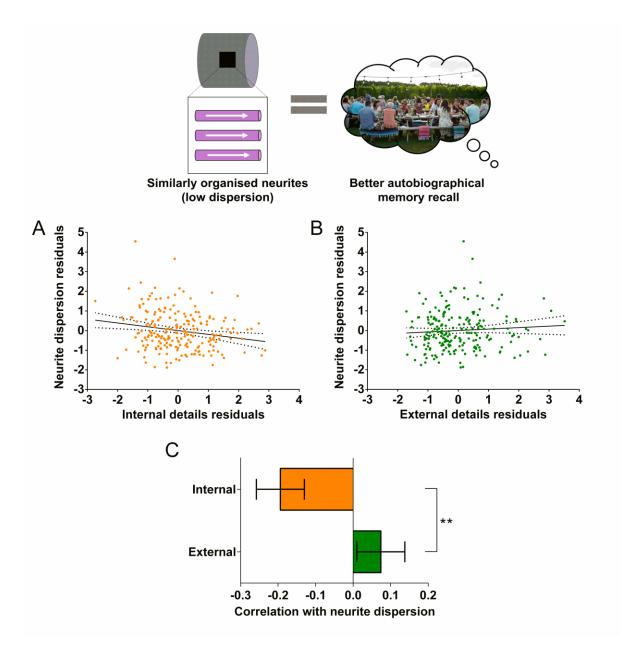


Figure 5. Neurite dispersion and the parahippocampal cingulum bundle. The relationship between parahippocampal cingulum bundle neurite dispersion (orientation dispersion index) and autobiographical memory recall ability (internal details), and the control measure (external details) are shown. (**A**) There was a significant negative correlation between neurite dispersion and internal details (dashed lines indicate the confidence intervals). (**B**) There was no significant relationship between neurite dispersion and external details. (**C**) Bar chart showing the partial correlation coefficients (with standard errors) between neurite dispersion and internal and external details. There was a significant difference between the correlations when they were directly compared; **p < 0.01. Data points for this figure are provided in the Figure 5-source data 1.

Discussion

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The conduction velocity of action potentials along axons is crucial for neural communication. Until recently it was not possible to examine metrics associated with axonal conduction velocity, such as the g-ratio, in vivo in the human brain, with this being largely the preserve of studies involving non-humans. However, by combining diffusion MRI with quantitative structural MRI scans optimised to assess myelination (Weiskopf et al., 2013), it is now possible to estimate the MR g-ratio in vivo in humans (Drakesmith et al., 2019; Mohammadi et al., 2015; Mohammadi and Callaghan, 2020; Stikov et al., 2015). Here, in the first application to human cognition, we found that variations in the MR g-ratio specifically in the parahippocampal cingulum bundle were associated with individual differences in autobiographical memory recall ability in a large sample of healthy adults. Moreover, we were able to identify two particular features in the parahippocampal cingulum bundle that might favour better memory recall, namely larger inner axon diameters, which are indicated by the increased MR g-ratio, and lower neurite dispersion, which suggests more coherently organised neurites. These results offer a new perspective on the neural instantiation of autobiographical memories, and in particular on drivers of individual differences in recall ability. This is especially welcome given the dearth of consistent findings linking hippocampal grey matter volume or microstructure with autobiographical memory recall ability in the healthy population (Clark et al., 2020; Clark et al., 2021a; LePort et al., 2012; Maguire et al., 2003; Van Petten, 2004). Our use of a biophysical model of the MR signal enabled us to link our findings to different mechanistic processes in the underlying microstructure. We considered four scenarios involving axonal microstructure that could give rise to faster conduction velocities, which in turn might promote better memory recall. As shown in Figure 1, each of these axonal

microstructure changes has a different outcome in terms of the g-ratio. The positive relationship we observed between the MR g-ratio and autobiographical memory recall ability suggests that this effect was associated predominantly with greater inner axon diameter (Figure 1D and Figure 1F, orange arrow). By contrast, had a negative correlation between the MR g-ratio and autobiographical memory recall ability been identified, we could instead have inferred that an increase in myelin was the relevant microstructural feature. Increases in myelination are often held to be a prominent source of white matter alterations associated with changes in behavioural and cognitive performance (Caeyenberghs et al., 2016; Kaller et al., 2017; Lakhani et al., 2016; Waxman, 1980; Xin and Chan, 2020). By contrast, our results highlight the potentially important role that the inner axon diameter could be playing in the recall of a critical form of memory.

We also found that lower neurite dispersion, suggesting more coherent neurite organisation, was related to better autobiographical memory recall ability. Our measure of

We also found that lower neurite dispersion, suggesting more coherent neurite organisation, was related to better autobiographical memory recall ability. Our measure of neurite dispersion was obtained using the NODDI biophysical model (Zhang et al., 2012), which aims to isolate the organisation of the neurites in a voxel from the density of the neurites in a voxel. While neurite dispersion was significantly related to autobiographical memory recall, no relationship was observed with neurite density.

A larger inner axon diameter reduces resistance to action potential signals enabling greater conduction velocities (Gasser and Grundfest, 1939; Hursh, 1939), and coherently organised fibres may decrease the distance signals need to travel, further reducing communication times (Salami et al., 2003; Steriade, 1995). This combination of features might optimise a fibre bundle for faster communication which in turn may enhance autobiographical memory recall.

These results were specific to one white matter tract, the parahippocampal cingulum bundle (Bubb et al., 2018). MR g-ratio measures from no other tract, including the dorsal part

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of the cingulum bundle, showed any association with autobiographical memory recall ability. The parahippocampal cingulum bundle directly connects the hippocampus, parahippocampal, retrosplenial and parietal cortices, the anterior thalamus and, through other subdivisions of the cingulum bundle, the medial prefrontal cortex. These regions are typically engaged during fMRI studies of autobiographical memory recall (Andrews-Hanna et al., 2014; Maguire, 2001; Spreng et al., 2009; Svoboda et al., 2006), and damage to them is often associated with autobiographical memory impairments (Berryhill et al., 2007; McCormick et al., 2018; Scoville and Milner, 1957; Vann et al., 2009). The retrosplenial and parahippocampal cortices are thought to provide visuospatial elements of autobiographical memories (Dalton and Maguire, 2017; Epstein and Higgins, 2007; Mullally and Maguire, 2011; Vann et al., 2009), while the medial prefrontal cortex may initiate autobiographical retrieval and support schemaguided recall (Gilboa and Marlatte, 2017; McCormick et al., 2018; McCormick et al., 2020). The parahippocampal cingulum bundle is, therefore, uniquely positioned as a transmission highway enabling this information to reach the hippocampus, where memories can be reconstructed (Bartlett, 1932; Hassabis and Maguire, 2007; Schacter et al., 2012). Larger inner axon diameters and coherently organised neurites could facilitate rapid information flow along the parahippocampal cingulum bundle leading to more memory elements being available simultaneously, which in turn may result in increased detail and better integration of a memory representation. There have only been a small number of previous studies investigating white matter tracts and individual differences in autobiographical memory recall ability in healthy people, with some suggesting a relationship between the parahippocampal cingulum bundle and autobiographical memory recall (Irish et al., 2014; Memel et al., 2020). However, interpretation of those findings is difficult given the relatively small sample sizes, the older age of participants in some of the studies, and the testing of mixed groups of healthy older people and patients

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with dementia. No previous study has examined the MR g-ratio, instead they focussed on commonly reported physical parameters such as fractional anisotropy and mean diffusivity (Basser, 1995). However, these metrics lack biological specificity (Jensen and Helpern, 2010; Jones et al., 2013a) and, consequently, they cannot speak to questions concerning axonal conduction velocity. In a similar vein, we are not aware of any reports of bilateral lesions that selectively compromise or sever the parahippocampal cingulum bundle in humans. Given our findings, we would predict that such lesions would adversely affect the ability to recall autobiographical memories.

Despite its prime location and connectivity at the heart of the brain's autobiographical memory system, the dearth of studies in humans and the rarity of selective bilateral lesions to the parahippocampal cingulum bundle have perhaps obscured its importance when compared to other, more celebrated, memory-related white matter tracts. We also examined two such tracts, the fornix and the uncinate fasciculus, but in both cases no significant relationships between the MR g-ratio, neurite dispersion (or neurite density) and autobiographical memory recall ability were evident in our large cohort of young healthy adults. Both the fornix and parahippocampal cingulum bundle are vulnerable to partial volume effects (Concha et al., 2005). However, to mitigate this issue we took steps to ensure the data were extracted only from white matter voxels (see Materials and Methods). Diffusion data are also susceptible to distortions which can particularly affect the uncinate fasciculus. We addressed this challenge by using a new technique that improves distortion correction in this region (Clark et al., 2021b). The absence of fornix findings in our study could echo those relating to hippocampal volume (Clark et al., 2020; Clark et al., 2021a), whereby the structure is widely acknowledged to be involved in autobiographical memory recall, and damage impedes retrieval (Aggleton et al., 2000; D'Esposito et al., 1995; Gaffan and Gaffan, 1991; Tsivilis et al., 2008), but microstructural variations have limited impact within the healthy adult population. Regarding

the uncinate fasciculus, unilateral lesions do not seem to significantly impair performance on laboratory-based memory tasks (Papagno et al., 2011) or the recall of premorbid autobiographical memories (Levine et al., 2009). Bilateral uncinate fasciculus lesions are very rare in humans, but might result in greater memory impairment. Alternatively, hippocampal-prefrontal connections may be better served by other pathways, for example, via the fornix or parts of the cingulum bundle.

Our findings were not only specific to the parahippocampal cingulum bundle, but also to the internal details of autobiographical memories which reflect the episodicity of past experiences. By contrast, our control measure of external details, which concerns non-episodic information in the autobiographical memories, did not correlate with any white matter microstructure metrics. In addition, age, gender, scanner and the number of voxels within an ROI were included as covariates in all analyses, limiting the potential confounding effects of these variables. Our analyses were also performed using weighted means from each of the three white matter tracts of interest rather than voxel-wise across the whole brain, reducing the potential for false positives (Marek et al., 2022).

While we examined the parahippocampal cingulum bundle as a unitary pathway, it comprises both long and short association fibres with differing connectivity (Bubb et al., 2018). Some fibres will form long range connections between, for example, the hippocampus and retrosplenial cortex, whereas others will make shorter range connections between neighbouring regions. The use of connectome MRI scanners is starting to make examination of short range "u-fibres" possible in vivo in humans (Movahedian Attar et al., 2020; Shastin et al., pre print), and future studies could seek to identify specific connections within the parahippocampal cingulum bundle that relate to individual differences in autobiographical memory recall.

In conclusion, it is perhaps no surprise that speed may be of the essence when it comes to neural communication, and this could influence individual differences in cognition.

Microstructure measures related to conduction velocity are now possible to derive in vivo in humans and have the potential to provide novel insights into how the brain processes and integrates information (Berman et al., 2019; Drakesmith et al., 2019), deepening our understanding of the information flow that underpins critical cognitive functions.

Materials and Methods

Participants

Two hundred and seventeen healthy people took part in the study, including 109 females and 108 males. The age range was restricted to 20-41 years old to limit the possible effects of aging (mean age = 29.0 years, SD = 5.60). Participants had English as their first language and reported no history of psychological, psychiatric or neurological conditions. People with hobbies or vocations known to be associated with the hippocampus (e.g. licenced London taxi drivers) were excluded. Participants were reimbursed £10 per hour for taking part which was paid at study completion. All participants gave written informed consent and the study was approved by the University College London Research Ethics Committee (project ID: 6743/001).

A sample size of 217 was determined during study design to be robust to employing different statistical approaches when answering multiple questions of interest. Specifically, the sample allowed for sufficient power to identify medium effect sizes when conducting correlation analyses at alpha levels of 0.01 and when comparing correlations at alpha levels of 0.05 (Cohen, 1992).

Procedure

Participants completed the study over multiple visits. Diffusion imaging and magnetisation transfer saturation scans were acquired on two separate days, and the Autobiographical Interview was conducted during a third visit. All participants completed all parts of the study.

The Autobiographical Interview

This widely-used test (Levine et al., 2002) was employed to measure autobiographical memory recall ability. Participants are asked to provide autobiographical memories from a specific time and place over four time periods – early childhood (up to age 11), teenage years (aged from 11-17), adulthood (from age 18 years to 12 months prior to the interview; two memories are requested) and the last year (a memory from the last 12 months); therefore, five memories in total are harvested. Recordings of the memory descriptions are transcribed for later scoring.

The main outcome measure of the Autobiographical Interview is the mean number of internal details included in the description of an event from across the five autobiographical memories. Internal details are those describing the event in question (i.e. episodic details) and include event, place, time and perceptual information, as well as thoughts and emotions relating to the event itself. We used the secondary outcome measure of the Autobiographical Interview, the mean number of external details included in the five autobiographical memories, as a control measure. External details include semantic information concerning the event, or other non-event information, and are not considered to reflect autobiographical memory recall ability.

Double scoring was performed on 20% of the data. Inter-class correlation coefficients, with a two-way random effects model looking for absolute agreement were calculated for both internal and external details. This was performed both for individual memories and as an average of all five memories across each participant. For internal details the coefficients were

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0.94 and 0.97 respectively, and for external details they were 0.84 and 0.87 respectively. For reference, a score of 0.8 or above is considered excellent agreement beyond chance. **Diffusion MRI data acquisition** Three MRI scanners were used to collect the neuroimaging data. All scanners were Siemens Magnetom TIM Trio systems with 32 channel head coils and were located at the same neuroimaging centre, running the same software. The sequences were loaded identically onto the individual scanners. Participant set-up and positioning followed the same protocol for each scanner. Diffusion-weighted images were collected using the multiband accelerated EPI pulse sequence developed by the Centre for Magnetic Resonance Research at the University of Minnesota (R012a-c, R013a on VB17, https://www.cmrr.umn.edu/multiband/; Feinberg et al., 2010; Xu et al., 2013). Acquisition parameters were: resolution = 1.7 mm isotropic; FOV = 220 mm \times 220 mm \times 138 mm; 60 directions with 6 interleaved b0 images, echo time (TE) = 112 ms, repetition time (TR) = 4.84 s, with a multiband acceleration factor of 3. The sequence was performed 4 times – twice with b-values of 1000 and twice with b-values of 2500. The first acquisition of each set of b-values was performed with phase-encoding in the anterior to posterior direction (blip-up), the second in the posterior to anterior direction (blip-down). The total acquisition time was 22 minutes. Magnetisation transfer saturation data acquisition The specific scanner used to collect a participant's diffusion-weighted images was also used to obtain their magnetisation transfer saturation map. Whole brain structural maps of magnetisation transfer saturation, at an isotropic resolution of 800 µm, were derived from a multi-parameter mapping quantitative imaging protocol (Callaghan et al., 2015; Callaghan et al., 2019; Weiskopf et al., 2013). This protocol consisted of the acquisition of three multi-echo gradient-echo acquisitions with either proton density, T1 or magnetisation transfer weighting. Each acquisition had a TR of 25 ms. Proton density weighting was achieved with an excitation flip angle of 6° , which was increased to 21° to achieve T1 weighting. Magnetisation transfer weighting was achieved through the application of a Gaussian RF pulse 2 kHz off resonance with 4 ms duration and a nominal flip angle of 220°. This acquisition had an excitation flip angle of 6°. The field of view was 256 mm head-foot, 224 mm anterior-posterior, and 179 mm right-left. The multiple gradient echoes per contrast were acquired with alternating readout gradient polarity at eight equidistant echo times ranging from 2.34 to 18.44 ms in steps of 2.30 ms using a readout bandwidth of 488 Hz/pixel. Only six echoes were acquired for the magnetisation transfer weighted volume to facilitate the off-resonance pre-saturation pulse and subsequent spoiling gradient within the TR. To accelerate the data acquisition, partially parallel imaging using the GRAPPA algorithm was employed in each phase-encoded direction (anterior-posterior and right-left) with forty integrated reference lines and a speed up factor of two. Calibration data were also acquired at the outset of each session to correct for inhomogeneities in the RF transmit field (Lutti et al., 2010). The total acquisition time was 27 minutes.

Diffusion MRI pre-processing

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The diffusion MRI data were processed using the ACID toolbox (www.diffusiontools.com) within SPM12 (www.fil.ion.ucl.ac.uk/spm). The weighted average consecutive HySCO pipeline described in Clark et al. (2021b) was followed, with the addition of multi-shell Position-Orientation Adaptive Smoothing (msPOAS; Becker et al., 2012) and Rician bias correction (André et al., 2014). In brief, the blip-up and blip-down data were first separately

corrected for motion and eddy current artefacts. Next, msPOAS was performed, followed by correction for susceptibility-related distortion artefacts using the HySCO2 module (Macdonald and Ruthotto, 2018; Ruthotto et al., 2012). Tensor fitting (Mohammadi et al., 2013) was then implemented separately on each of the distortion corrected blip-up and blip-down datasets to estimate FA maps. HySCO2 was then repeated using the distortion corrected and brain-masked FA maps as input instead of b0 images; the second HySCO2 field map being consecutively applied to the "pre-corrected" diffusion MRI data. Finally, Rician bias noise correction was employed on the distortion corrected data (André et al., 2014), before the data were combined using a weighted average to minimise information loss due to susceptibility distortion blurring induced by local spatial compression.

Magnetisation transfer saturation pre-processing

The magnetisation transfer saturation data were processed for each participant using the hMRI toolbox (Tabelow et al., 2019) within SPM12. The default toolbox configuration settings were used, with the exception that correction for imperfect spoiling was additionally enabled (Corbin and Callaghan, 2021). The output magnetisation transfer saturation map quantified the degree of saturation of the steady state signal induced by the application of the off-resonance prepulse, having accounted for spatially varying T₁ times and RF field inhomogeneity (Weiskopf et al., 2013).

Each participant's magnetisation transfer saturation map was segmented into white matter probability maps using the unified segmentation approach (Ashburner and Friston, 2005), but with no bias field correction (since the magnetisation transfer saturation map does not suffer from any bias field modulation) and using the tissue probability maps developed by Lorio et al. (2016).

Diffusion model fitting

The MR g-ratio was calculated according to Ellerbrock and Mohammadi (2018):

$$g_{MR} = \sqrt{1 - \frac{MVF_{MR}}{MVF_{MR} + AVF_{MR}}}$$

with MVF_{MR} being the myelin-volume fraction estimated from the magnetisation transfer saturation map and AVF_{MR} being the axonal-volume fraction. The AVF_{MR} was estimated as AVF_{MR} = $(1 - \text{MVF}_{\text{MR}})$ AWF according to Stikov et al. (2015), where AWF was obtained by combining the intra-cellular fraction (ν_{icvf}) and isotropic fraction (ν_{iso}) maps from NODDI (Zhang et al., 2012) as AWF = $(1 - \nu_{\text{iso}})$ ν_{icvf} . The magnetisation transfer saturation map was obtained from the hMRI toolbox as described above. For calibration of the magnetisation transfer saturation map to a myelin-volume fraction map (MVF_{MR} = α MT_{sat}), we used the gratio based calibration method as reported in Ellerbrock and Mohammadi (2018) and Mohammadi and Callaghan (2020), with α = 0.1683.

The NODDI biophysical model (Zhang et al., 2012) was also used to obtain maps of the neurite orientation dispersion index and neurite density using the NODDI toolbox (http://mig.cs.ucl.ac.uk/index.php?n=Tutorial.NODDImatlab).

Finally, for completeness, Axial-Symmetric DKI (Oeschger et al., 2021) was performed on the pre-processed diffusion data using the ACID toolbox to generate maps of the more commonly reported physical parameters of fractional anisotropy, mean diffusivity, mean kurtosis, diffusivities parallel and diffusivities perpendicular.

Microstructure data extraction

Microstructure data extraction was performed in Montreal Neurological Institute (MNI) space. The diffusion and magnetisation transfer saturation maps were transformed from native to MNI space using the hMRI toolbox (Tabelow et al., 2019). This involved performing inter-subject registration using DARTEL (Ashburner, 2007) on the segmented magnetisation transfer saturation grey and white matter probability maps, with the resulting DARTEL template and deformations then used to normalize the diffusion and magnetisation transfer saturation maps to MNI space at $1.5 \times 1.5 \times 1$

Bilateral tract ROIs were defined using the Johns Hopkins probabilistic white matter tractography atlas (Hua et al., 2008). Our primary foci were the fornix, uncinate fasciculus and parahippocampal cingulum bundle. However, we also performed exploratory analyses on six other tracts - the anterior thalamic radiation, the dorsal cingulum bundle, forceps minor, inferior longitudinal fasciculus, inferior occipitofrontal fasciculus and superior longitudinal fasciculus. To reduce partial volume effects, for all tracts (with the exception of the fornix as the available fornix tract was not probabilistic) the minimum probability threshold was set to 25%. In addition, all of the tract ROIs were refined for each participant using their segmented magnetisation transfer saturation white matter probability map, with a minimum probability of 90% to limit the mask to white matter. This also served to remove any residual mis-alignment from the maps being transformed into MNI space, as no smoothing was performed to preserve the quantitative values. As this resulted in differing tract ROI sizes for each participant, the number of voxels in each tract for each participant was calculated. Mean values of the extracted microstructure metrics from the tract ROIs were determined using a weighted average, where voxels with higher white matter probabilities contributed more to the mean.

Statistical analyses

Analyses were performed in SPSS v27 unless otherwise stated. Data were summarised using means and standard deviations. There were no missing data, and no data needed to be removed from any analysis.

As we had different tract ROI sizes for each participant, we first assessed whether there were any relationships between the number of voxels in the tract ROIs and autobiographical memory recall ability. We performed partial correlations for each tract between the number of voxels in the tract ROI and the number of internal details on the Autobiographical Interview, with age, gender and scanner as covariates. No significant relationships were identified (all r < 0.12, all p > 0.1). However, to ensure no residual effects were present, the number of voxels in a tract ROI was included as a covariate in the analyses.

In our main analyses, we first investigated the relationships between each microstructure measure and the number of internal details from the Autobiographical Interview using partial correlations, with bootstrapping performed 10,000 times to calculate confidence intervals. Four covariates were included in each partial correlation: age, gender, scanner and the number of voxels in a tract ROI. For these primary analyses, similar partial correlations were performed for the external details control measure. If an internal details correlation was significant, the internal and external details correlations were then directly compared in order to test for statistical difference using the technique described by Meng et al. (1992). This approach extends the Fisher z transformation, allowing for more accurate testing and comparison of two related correlations. The correlation comparison was performed using the R cocor package v1.1.3 (Diedenhofen and Musch, 2015).

As the microstructure measures were investigated across several tracts, we corrected for the repeated testing of the same measures across our three main tracts of interest (the fornix, the uncinate fasciculus and the parahippocampal cingulum bundle) using the Bonferroni

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method; dividing alpha = 0.05 by 3. Consequently, associations with a two-sided p-value < 0.017 were considered significant. As the comparison of correlations was performed only when a significant correlation was identified, a two-sided p-value < 0.05 was deemed significant. **Acknowledgments** Thanks to Anna Monk, Victoria Hotchin, Gloria Pizzamiglio and Alice Liefgreen for assistance with data collection and scoring. Thanks also to Mohammad Ashtarayeh and Jan Malte Oeschger for their support with implementing the diffusion model fitting and g-ratio calculations. **Additional information Funding** Funder: Wellcome Grant reference numbers: 101759/Z/13/Z; 210567/Z/18/Z; 203147/Z/16/Z **Author**: Eleanor A. Maguire **Funder:** ERA-NET NEURON Grant reference number: hMRI-ofSCI Author: Martina Callaghan, Siawoosh Mohammadi Funder: German Federal Ministry of Education and Research Grant reference number: 01EW1711A and B

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Author: Siawoosh Mohammadi Funder: German Research Foundation Grant reference numbers: MO 2397/5-1; MO 2397/4-1 **Author:** Siawoosh Mohammadi Funder: Forschungszentrums Medizintechnik Hamburg Grant reference numbers: 01fmthh2017 **Author:** Siawoosh Mohammadi Funder: MRC and Spinal Research Charity Grant reference number: MR/R000050/1 **Author:** Martina F. Callaghan The funders had no role in study design, data collection and interpretation, or the decision to submit the work for publication. **Author contributions** Ian A Clark: conceptualization, methodology, investigation, data scoring, formal analysis, writing - original draft, writing - review & editing; Siawoosh Mohammadi: formal analysis, writing - review & editing; Martina F Callaghan: Formal analysis, writing - review & editing;

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Eleanor A. Maguire: conceptualization, methodology, funding acquisition, supervision, formal analysis, writing – original draft, writing - review & editing **Author ORCIDs** Ian A. Clark https://orcid.org/0000-0002-5678-2190 Siawoosh Mohammadi https://orcid.org/0000-0003-1311-9636 Martina F. Callaghan https://orcid.org/0000-0003-0374-1659 Eleanor A. Maguire https://orcid.org/0000-0002-9470-6324 **Ethics** Human subjects: All participants gave written informed consent and the study was approved by the University College London Research Ethics Committee (project ID: 6743/001). **Additional files** Appendix 1. Details of the simulation performed for Figure 1f. Investigation of the MR g-ratio, neurite orientation dispersion index, neurite density and physical parameters in the fornix and uncinate fasciculus - no significant relationships were identified. Exploratory analyses of the MR g-ratio, neurite orientation dispersion index, neurite density and physical parameters in other white matter tracts – no significant relationships were identified. Investigation of the physical parameters extracted from the parahippocampal cingulum bundle. Supplementary file 1. Microstructure and physical parameters data for the fornix and uncinate fasciculus.

- Supplementary file 2. Physical parameters data for the parahippocampal cingulum
- bundle and source data for Appendix 1-figures 9 and 10.
- Figure 4-source data 1
- Figure 5-source data 1
- Materials Design Analysis Reporting (MDAR) Form
- 714 **Data availability**

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- 715 The data for every participant are provided in Figure 4-source data 1, Figure 5-source data 1,
- 716 Supplementary file 1 and Supplementary file 2.
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Appendix 1 Details of the simulation performed for Figure 1F. Investigation of the MR g-ratio, neurite orientation dispersion index, neurite density and physical parameters in the fornix and uncinate fasciculus. Exploratory analyses of the MR g-ratio, neurite orientation dispersion index, neurite density and physical parameters in other white matter tracts. Investigation of the physical parameters extracted from the parahippocampal cingulum bundle.

Details of the simulation performed for Figure 1F

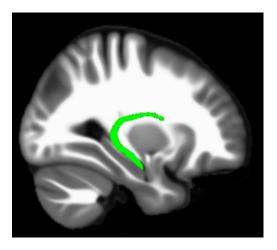
In Figure 1F, inner axon diameter, myelin thickness and g-ratio are plotted together. The range of g-ratio values used in the simulation spanned two standard deviations about the mean MR g-ratio observed for the parahippocampal cingulum bundle in the current study (mean = 0.647, standard deviation = 0.043). The axon diameter was computed for this MR g-ratio range by re-arranging the equation presented in Berman et al. (2019) such that axon diameter = $\exp(\frac{g-ratio-0.506}{0.22})$. Fibre dimeter was then calculated as fibre diameter = $\frac{axon\ diameter}{g-ratio}$, enabling myelin thickness to be computed as myelin thickness = $\frac{fibre\ diameter-axon\ diameter}{2}$. We note that discrepancies between reported microscopic parameters (i.e., g-ratio, modelled axon diameter, and myelin thickness) derived from in vivo and ex vivo histology may arise due to two reasons. (1) The in vivo MR g-ratio is computed from volume-fractions unlike the microscopic g-ratio measured with histology. (2) The heuristic equation by Berman et al. (2019) that is relating the in vivo MR g-ratio to axon diameter is rather capturing the tail of the axon radii distribution.

Investigation of the MR g-ratio, neurite orientation dispersion index, neurite density and physical parameters in the fornix and uncinate fasciculus

As can be observed in the tables below, there were no significant correlations between microstructural measures or physical parameters and autobiographical memory recall ability for either of the tracts when using the corrected (p < 0.017) threshold.

Fornix

The mean number of voxels in the region of interest (ROI) was 249.55 (SD = 23.09).



Appendix 1–figure 1. The location of the fornix.

Appendix 1–table 1. Means and standard deviations for the microstructure measures and physical parameters extracted from the fornix.

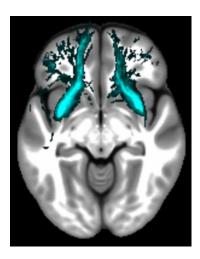
Measure	Mean	Standard Deviation	
MR g-ratio	0.720	0.017	
Neurite dispersion (ODI)	0.143	0.021	
Neurite density	0.601	0.045	
Fractional anisotropy	0.605	0.035	
Mean diffusivity (10 ⁻³ mm ² /s)	0.901	0.036	
Mean kurtosis	0.909	0.100	
Diffusivities parallel (10 ⁻³ mm ² /s)	1.645	0.072	
Diffusivities perpendicular (10 ⁻³ mm ² /s)	0.529	0.042	

Appendix 1–table 2. Partial correlations between the microstructure measures or physical parameters extracted from the fornix and memory recall ability (internal details).

Measure	r(211)	n	95% Confidence Interval	
	r(211)	p	Lower	Upper
MD a ratio	-0.04	0.53	-0.16	0.08
MR g-ratio Neurite dispersion (ODI)	-0.04	0.53	-0.16 -0.16	0.08
Neurite density	-0.03	0.69	-0.15	0.10
Fractional anisotropy	0.02	0.80	-0.12	0.15
Mean diffusivity	0.07	0.35	-0.08	0.21
Mean kurtosis	-0.03	0.66	-0.16	0.10
Diffusivities parallel	0.05	0.46	-0.09	0.19
Diffusivities perpendicular	0.02	0.74	-0.12	0.15

Uncinate fasciculus

The mean number of voxels in the ROI was 191.98 (SD = 29.77).



Appendix 1–figure 2. The location of the uncinate fasciculus.

Appendix 1–table 3. Means and standard deviations for the microstructure measures and physical parameters extracted from the uncinate fasciculus.

Measure	Mean	Standard Deviation	
MR g-ratio	0.723	0.016	
Neurite dispersion (ODI)	0.189	0.022	
Neurite density	0.562	0.045	
Fractional anisotropy	0.512	0.036	
Mean diffusivity (10 ⁻³ mm ² /s)	0.877	0.304	
Mean kurtosis	0.913	0.100	
Diffusivities parallel (10 ⁻³ mm ² /s)	1.456	0.055	
Diffusivities perpendicular (10 ⁻³ mm ² /s)	0.588	0.039	

Appendix 1–table 4. Partial correlations between the microstructure measures or physical parameters extracted from the uncinate fasciculus and memory recall ability (internal details).

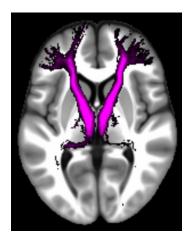
Measure	r(211)	2	95% Confidence Interval	
	r(211)	р	Lower	Upper
MR g-ratio	0.10	0.15	-0.03	0.22
Neurite dispersion (ODI)	-0.01	0.94	-0.14	0.13
Neurite density	0.01	0.89	-0.14	0.16
Fractional anisotropy	-0.01	0.94	-0.14	0.13
Mean diffusivity	-0.01	0.87	-0.14	0.13
Mean kurtosis	-0.01	0.91	-0.13	0.18
Diffusivities parallel	-0.01	0.87	-0.14	0.13
Diffusivities perpendicular	0.00	0.96	-0.15	0.14

Exploratory analyses of the MR g-ratio, neurite orientation dispersion index, neurite density and physical parameters in other white matter tracts

As can be observed in the tables below, there were no significant correlations between microstructural measures or physical parameters and autobiographical memory recall ability for any of the tracts when using the corrected (p < 0.017) threshold.

Anterior thalamic radiation

The mean number of voxels in the ROI was 2090.21 (SD = 67.43).



Appendix 1–figure 3. The location of the anterior thalamic radiation.

Appendix 1–table 5. Means and standard deviations for the microstructure measures and physical parameters extracted from the anterior thalamic radiation.

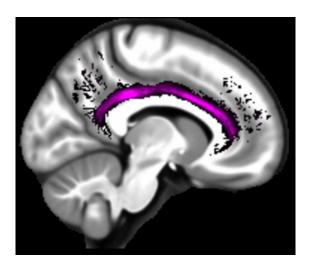
Measure	Mean	Standard Deviation	
MR g-ratio	0.724	0.014	
Neurite dispersion (ODI)	0.252	0.017	
Neurite density	0.598	0.041	
Fractional anisotropy	0.430	0.028	
Mean diffusivity (10 ⁻³ mm ² /s)	0.861	0.029	
Mean kurtosis	0.986	0.063	
Diffusivities parallel (10 ⁻³ mm ² /s)	1.328	0.041	
Diffusivities perpendicular (10 ⁻³ mm ² /s)	0.627	0.034	

Appendix 1–table 6. Partial correlations between the microstructure measures or physical parameters extracted from the anterior thalamic radiation and memory recall ability (internal details).

Measure	r(211)	p	95% Confidence Interval	
			Lower	Upper
MR g-ratio	0.05	0.47	-0.06	0.17
Neurite dispersion (ODI)	-0.05	0.46	-0.18	0.09
Neurite density	0.10	0.16	-0.04	0.23
Fractional anisotropy	0.08	0.26	-0.06	0.21
Mean diffusivity	0.03	0.67	-0.11	0.17
Mean kurtosis	0.07	0.28	-0.07	0.22
Diffusivities parallel	0.09	0.20	-0.04	0.21
Diffusivities perpendicular	-0.02	0.77	-0.16	0.12

Dorsal cingulum bundle

The mean number of voxels in the ROI was 611.48 (SD = 25.29).



Appendix 1–figure 4. The location of the dorsal cingulum bundle.

Appendix 1–table 7. Means and standard deviations for the microstructure measures and physical parameters extracted from the dorsal cingulum bundle.

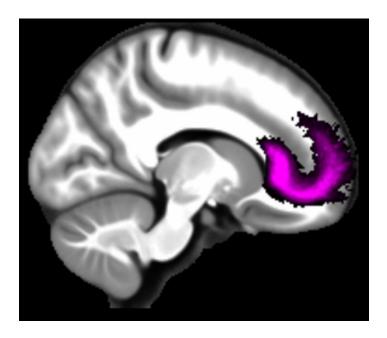
Measure	Mean	Standard Deviation	
MR g-ratio	0.710	0.016	
Neurite dispersion (ODI)	0.147	0.019	
Neurite density	0.560	0.038	
Fractional anisotropy	0.570	0.039	
Mean diffusivity (10 ⁻³ mm ² /s)	0.862	0.026	
Mean kurtosis	0.862	0.093	
Diffusivities parallel (10 ⁻³ mm ² /s)	1.531	0.061	
Diffusivities perpendicular (10 ⁻³ mm ² /s)	0.527	0.040	

Appendix 1–table 8. Partial correlations between the microstructure measures or physical parameters extracted from the dorsal cingulum bundle and memory recall ability (internal details).

Measure	r(211)		95% Confidence Interval	
	r(211)	p	Lower	Upper
MR g-ratio	0.09	0.22	-0.04	0.21
Neurite dispersion (ODI)	0.09	0.17	-0.05	0.23
Neurite density	0.09	0.17	-0.05	0.23
Fractional anisotropy	0.01	0.85	-0.13	0.16
Mean diffusivity	0.06	0.43	-0.08	0.19
Mean kurtosis	0.13	0.05	0.00	0.27
Diffusivities parallel	0.05	0.48	-0.08	0.18
Diffusivities perpendicular	0.01	0.91	-0.14	0.15

Forceps minor

The mean number of voxels in the ROI was 4613.67 (SD = 78.02).



Appendix 1-figure 5. The location of the forceps minor.

Appendix 1–table 9. Means and standard deviations for the microstructure measures and physical parameters extracted from the forceps minor.

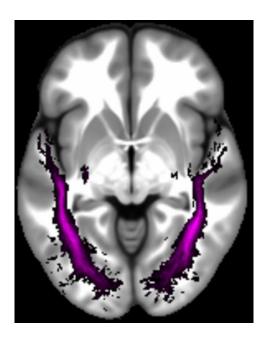
Measure	Mean	Standard Deviation	
MR g-ratio	0.698	0.026	
Neurite dispersion (ODI)	0.201	0.016	
Neurite density	0.601	0.042	
Fractional anisotropy	0.500	0.027	
Mean diffusivity (10 ⁻³ mm ² /s)	0.881	0.031	
Mean kurtosis	0.947	0.128	
Diffusivities parallel (10 ⁻³ mm ² /s)	1.467	0.052	
Diffusivities perpendicular (10 ⁻³ mm ² /s)	0.588	0.034	

Appendix 1–table 10. Partial correlations between the microstructure measures or physical parameters extracted from the forceps minor and memory recall ability (internal details).

Measure	r(211)	-	95% Confidence Interval	
	r(211)	p	Lower	Upper
MD	0.04	0.52	0.07	0.10
MR g-ratio	0.04	0.53	-0.07	0.18
Neurite dispersion (ODI)	-0.06	0.38	-0.21	0.07
Neurite density	0.09	0.19	-0.04	0.22
Fractional anisotropy	0.10	0.17	-0.03	0.23
Mean diffusivity	-0.04	0.56	-0.17	0.09
Mean kurtosis	0.00	0.97	-0.11	0.21
Diffusivities parallel	0.03	0.67	-0.09	0.18
Diffusivities perpendicular	-0.07	0.32	-0.19	0.05

Inferior longitudinal fasciculus

The mean number of voxels in the ROI was 2844.03 (SD = 52.97).



Appendix 1–figure 6. The location of the inferior longitudinal fasciculus.

Appendix 1–table 11. Means and standard deviations for the microstructure measures and physical parameters extracted from the inferior longitudinal fasciculus.

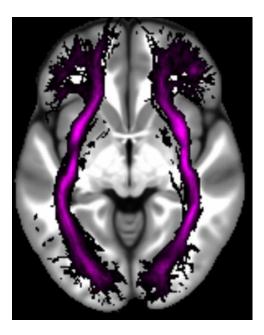
Measure	Mean	Standard Deviation
MR g-ratio	0.724	0.013
Neurite dispersion (ODI)	0.184	0.017
Neurite density	0.558	0.041
Fractional anisotropy	0.486	0.028
Mean diffusivity (10 ⁻³ mm ² /s)	0.902	0.029
Mean kurtosis	0.918	0.061
Diffusivities parallel (10 ⁻³ mm ² /s)	1.473	0.045
Diffusivities perpendicular (10 ⁻³ mm ² /s)	0.616	0.035

Appendix 1–table 12. Partial correlations between the microstructure measures or physical parameters extracted from the inferior longitudinal fasciculus and memory recall ability (internal details).

Measure	r(211)		95% Confidence Interval	
	r(211)	p	Lower	Upper
3 m	0.05	0.05	0.04	0.10
MR g-ratio	0.07	0.35	-0.06	0.19
Neurite dispersion (ODI)	-0.03	0.64	-0.17	0.10
Neurite density	0.07	0.35	-0.07	0.19
Fractional anisotropy	0.10	0.14	-0.04	0.23
Mean diffusivity	-0.01	0.87	-0.15	0.13
Mean kurtosis	0.10	0.16	-0.03	0.23
Diffusivities parallel	0.07	0.29	-0.07	0.21
Diffusivities perpendicular	-0.07	0.34	-0.19	0.07

Inferior occipitofrontal fasciculus

The mean number of voxels in the ROI was 3344.31 (SD = 46.0).



Appendix 1-figure 7. The location of the inferior occipitofrontal fasciculus.

Appendix 1–table 13. Means and standard deviations for the microstructure measures and physical parameters extracted from the inferior occipitofrontal fasciculus.

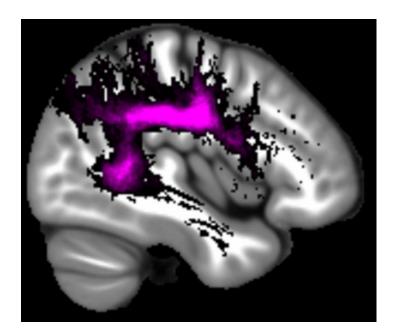
Measure	Mean	Standard Deviation
MR g-ratio	0.729	0.011
Neurite dispersion (ODI)	0.179	0.012
Neurite density	0.563	0.036
Fractional anisotropy	0.508	0.024
Mean diffusivity (10 ⁻³ mm ² /s)	0.889	0.026
Mean kurtosis	0.912	0.057
Diffusivities parallel (10 ⁻³ mm ² /s)	1.488	0.039
Diffusivities perpendicular (10 ⁻³ mm ² /s)	0.590	0.031

Appendix 1–table 14. Partial correlations between the microstructure measures or physical parameters extracted from the inferior occipitofrontal fasciculus and memory recall ability (internal details).

Measure	r(211)	p	95% Confidence Interval	
			Lower	Upper
MR g-ratio	-0.01	0.93	-0.12	0.12
Neurite dispersion (ODI)	-0.01	0.89	-0.14	0.13
Neurite density	0.06	0.42	-0.07	0.18
Fractional anisotropy	0.06	0.38	-0.08	0.20
Mean diffusivity	0.00	0.99	-0.13	0.13
Mean kurtosis	0.07	0.31	-0.06	0.19
Diffusivities parallel	0.05	0.50	-0.09	0.18
Diffusivities perpendicular	-0.03	0.62	-0.17	0.10

Superior longitudinal fasciculus

The mean number of voxels in the ROI was 4243.22 (SD = 39.80).



Appendix 1–figure 8. The location of the superior longitudinal fasciculus.

Appendix 1–table 15. Means and standard deviations for the microstructure measures and physical parameters extracted from the superior longitudinal fasciculus.

Measure	Mean	Standard Deviation	
MR g-ratio	0.751	0.011	
Neurite dispersion (ODI)	0.218	0.012	
Neurite density	0.634	0.034	
Fractional anisotropy	0.471	0.026	
Mean diffusivity (10 ⁻³ mm ² /s)	0.825	0.025	
Mean kurtosis	1.029	0.041	
Diffusivities parallel (10 ⁻³ mm ² /s)	1.324	0.035	
Diffusivities perpendicular (10 ⁻³ mm ² /s)	0.575	0.041	

Appendix 1–table 16. Partial correlations between microstructure measures or physical parameters extracted from the superior longitudinal fasciculus and memory recall ability (internal details).

Measure	r(211)	p	95% Confidence Interval	
			Lower	Upper
MR g-ratio	0.08	0.28	-0.05	0.20
Neurite dispersion (ODI)	-0.09	0.17	-0.23	0.05
Neurite density	0.12	0.09	-0.01	0.24
Fractional anisotropy	0.13	0.05	0.01	0.26
Mean diffusivity	-0.02	0.80	-0.14	0.11
Mean kurtosis	0.11	0.12	-0.03	0.24
Diffusivities parallel	0.12	0.09	-0.03	0.25
Diffusivities perpendicular	-0.08	0.23	-0.20	0.03

Investigation of the physical parameters extracted from the parahippocampal cingulum bundle

As reported in the main text, significant correlations between a number of microstructural measures from the parahippocampal cingulum bundle and autobiographical memory recall ability were evident. This was also the case for several of the physical parameters – see Appendix 1–tables 17 and 18 and Appendix 1–figures 9 and 10 below.

Appendix 1–table 17. Means and standard deviations for the physical parameters extracted from the parahippocampal cingulum bundle.

Measure	Mean	Standard Deviation	
Fractional anisotropy	0.466	0.053	
Mean diffusivity (10 ⁻³ mm ² /s)	0.931	0.041	
Mean kurtosis	0.779	0.122	
Diffusivities parallel (10 ⁻³ mm ² /s)	1.479	0.071	
Diffusivities perpendicular (10 ⁻³ mm ² /s)	0.656	0.057	

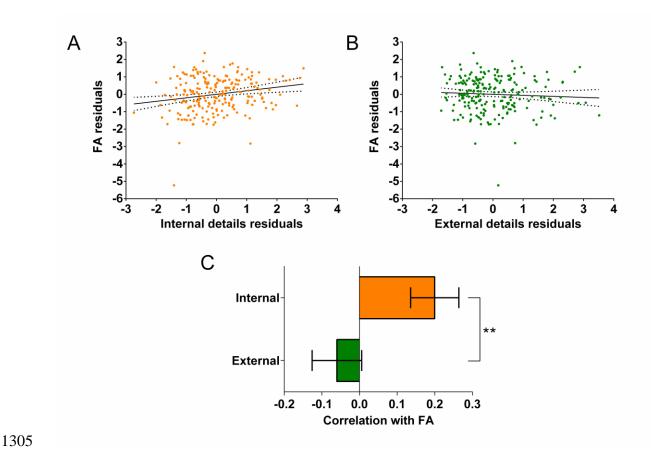
Appendix 1–table 18. Partial correlations between the physical parameters extracted from the parahippocampal cingulum bundle and memory recall ability (internal details).

Measure	r(211)	p	95% Confide Lower	ence Interval Upper
Fractional anisotropy	0.20	0.003*	0.07	0.32
Mean diffusivity	-0.02	0.72	-0.15	0.11
Mean kurtosis	0.08	0.23	-0.05	0.21
Diffusivities parallel	0.19	0.005^{*}	0.06	0.32
Diffusivities perpendicular	0.15	0.03	-0.27	-0.02

^{*}p < 0.017 (two-sided Bonferroni corrected threshold)

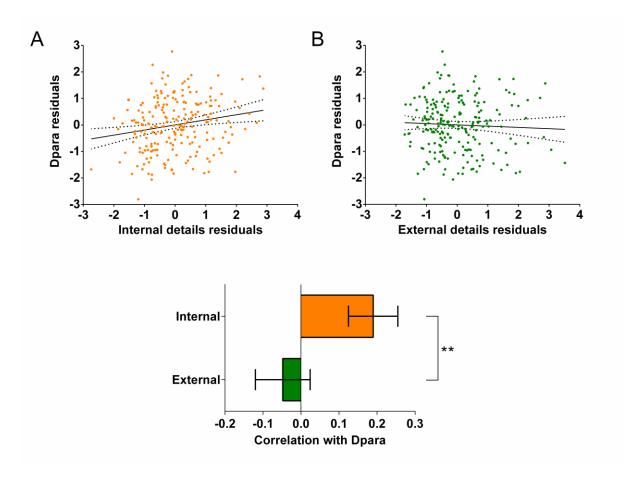
Specifically, partial correlation analyses, with age, gender, scanner and the number of voxels in the ROI included as covariates revealed a significant positive correlation between internal details and fractional anisotropy (FA) (Appendix 1–figure 9A; r(211) = 0.20, p = 0.003, 95%

CI = 0.07, 0.32). This relationship was specific to internal details, and was not evident for the external details control measure (Appendix 1–figure 9B; r(211) = -0.06, p = 0.39, 95% CI = -0.19, 0.07). Direct comparison of the two correlations confirmed a significant difference between them, showing that parahippocampal cingulum bundle FA was related to internal details to a greater extent than external details (Appendix 1–figure 9C; mean r difference = 0.26 (95% CI = 0.10, 0.44), z = 3.08, p = 0.002).



Appendix 1–figure 9. Fractional anisotropy (FA) and the parahippocampal cingulum bundle. The relationships between parahippocampal cingulum bundle FA and autobiographical memory recall ability (internal details), and the control measure (external details) are shown. (A) There was a significant positive correlation between FA and internal details (dashed lines indicate the confidence intervals). (B) There was no significant relationship between FA and external details. (C) Bar chart showing the partial correlation coefficients (with standard errors) between FA and internal and external details. There was a significant difference between the correlations when they were directly compared; **p < 0.01. Data points for this figure are provided in Supplementary file 2.

In addition, a significant positive correlation between parallel diffusivity and the number of internal details was also apparent (Appendix 1–figure 10A; r(211) = 0.19, p = 0.005, 95% CI = 0.06, 0.32). As with FA, no significant relationship was observed between parallel diffusivity and external details (Appendix 1–figure 10B; r(211) = -0.048, p = 0.49, 95% CI = -0.19, 0.10). Direct comparison of the correlations confirmed that parallel diffusivity was related to internal details to a greater extent than external details (Appendix 1–figure 10C; mean r difference = 0.24 (95% CI = 0.07, 0.41), z = 2.81, p = 0.0049).



Appendix 1–figure 10. Dpara and the parahippocampal cingulum bundle. The relationships between parahippocampal cingulum bundle parallel diffusivity (Dpara) and autobiographical memory recall ability (internal details), and the control measure (external details) are shown. (A) There was a significant positive correlation between Dpara and internal details (dashed lines indicate the confidence intervals). (B) There was no significant relationship between Dpara and external details. (C) Bar chart showing the partial correlation coefficients (with standard errors) between Dpara and internal and external details. There was a significant difference between the correlations when they were directly compared; **p < 0.01. Data points for this figure are provided in Supplementary file 2.

In contrast, no relationships were observed when examining the partial correlations between either internal or external details and MD (internal: r(211) = -0.02, p = 0.72, 95% CI = -0.15, 0.11; external: r(211) = 0.01, p = 0.86, 95% CI = -0.11, 0.14), the mean kurtosis (internal: r(211) = 0.08, p = 0.23, 95% CI = -0.05, 0.21; external: r(211) = 0.03, p = 0.62, 95% CI = -0.01, 0.16) or perpendicular diffusivity (internal: r(211) = -0.15, p = 0.03, 95% CI = -0.27, -0.02; external: r(211) = 0.44, p = 0.52, 95% CI = -0.08, 0.17), when using the corrected (p < 0.017) threshold. This suggests that none of these parameters were strongly associated with individual differences in autobiographical memory recall.