

# **Understanding Changes in Episodic Memory Impairment Using Batchelder's Multinomial Processing Tree Model**

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# **Bill Batchelder (1940–2018)**



# Shankle Clinic Data

- Patients from a cognitive disorders clinic, given standard MCI screen assessment of memory
  - Total of 3635 patients doing a total of 14,096 assessments
  - A few patients do many assessments but most do only a few
- We focus on the free recall tasks
  - Three Immediate Free Recalls (IFR1, IFR2, IFR3) of the same list of 10 semantically-controlled words presented in the same order
  - A later expected Delayed Free Recall (DFR)

Stage	Name	Patients	Assessments
1	Normal aging	117	383
2	Possible mild cognitive impairment	492	1649
3	Mild cognitive impairment	908	3685
4	Mild dementia	1169	5352
5	Moderate dementia	430	1313
6	Moderately severe dementia	519	1714

# Visualization of 5% of Data

FAST 1  
117 people  
383 tests

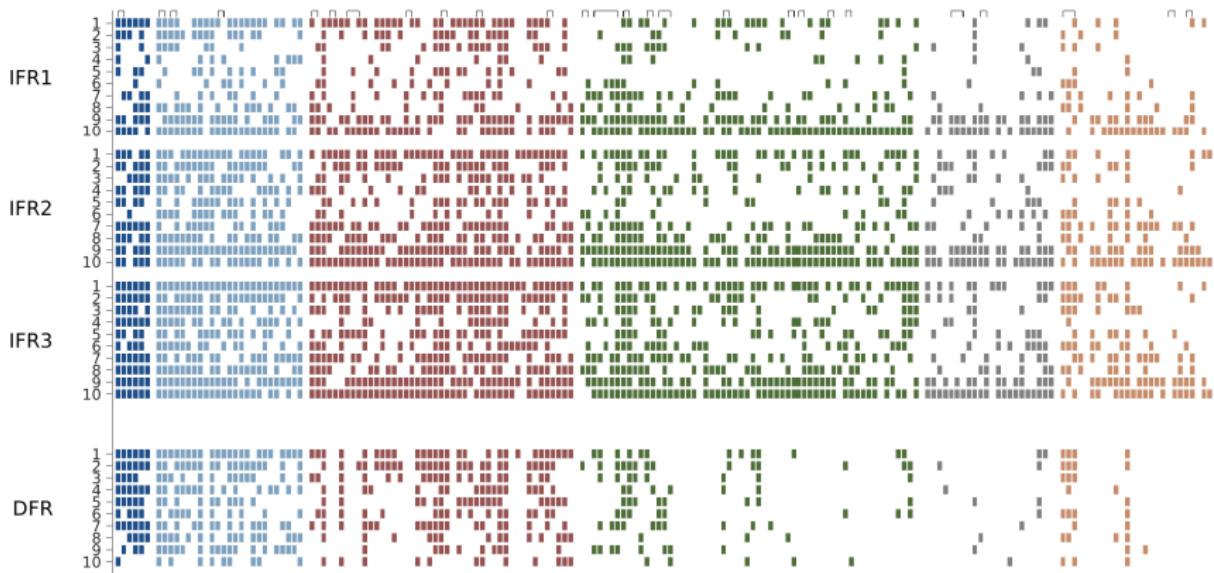
FAST 2  
492 people  
1649 tests

FAST 3  
908 people  
3685 tests

FAST 4  
1169 people  
5352 tests

FAST 5  
430 people  
1313 tests

FAST 6  
519 people  
1714 tests



# Worse Recall with Increasing Impairment

FAST 1  
117 people  
383 tests

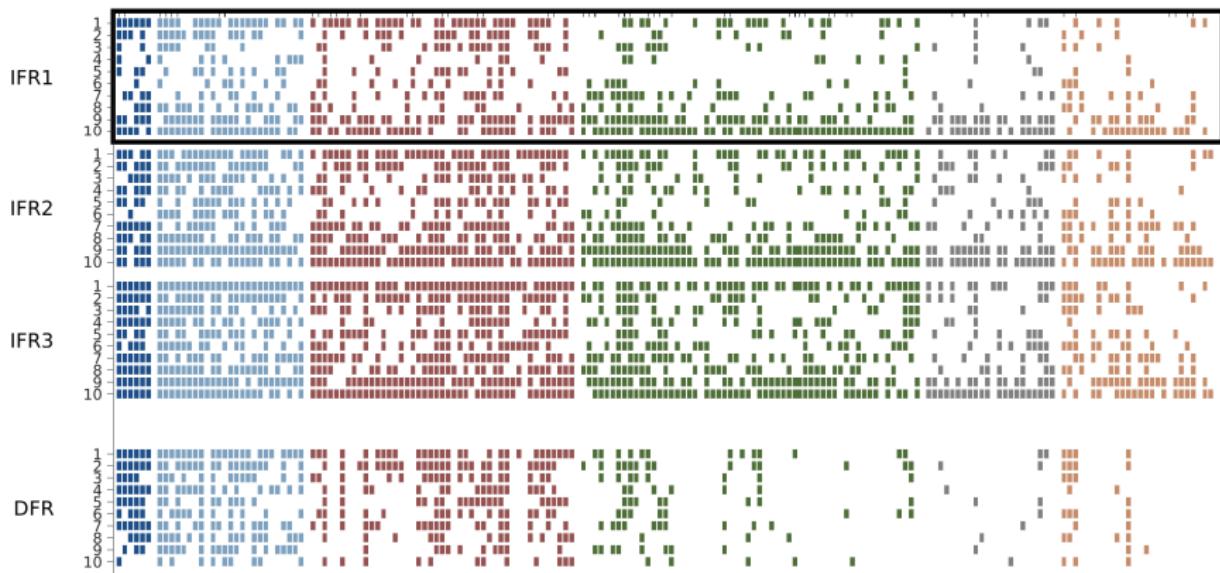
FAST 2  
492 people  
1649 tests

FAST 3  
908 people  
3685 tests

FAST 4  
1169 people  
5352 tests

FAST 5  
430 people  
1313 tests

FAST 6  
519 people  
1714 tests



# Serial Position Curves and Learning

FAST 1  
117 people  
383 tests

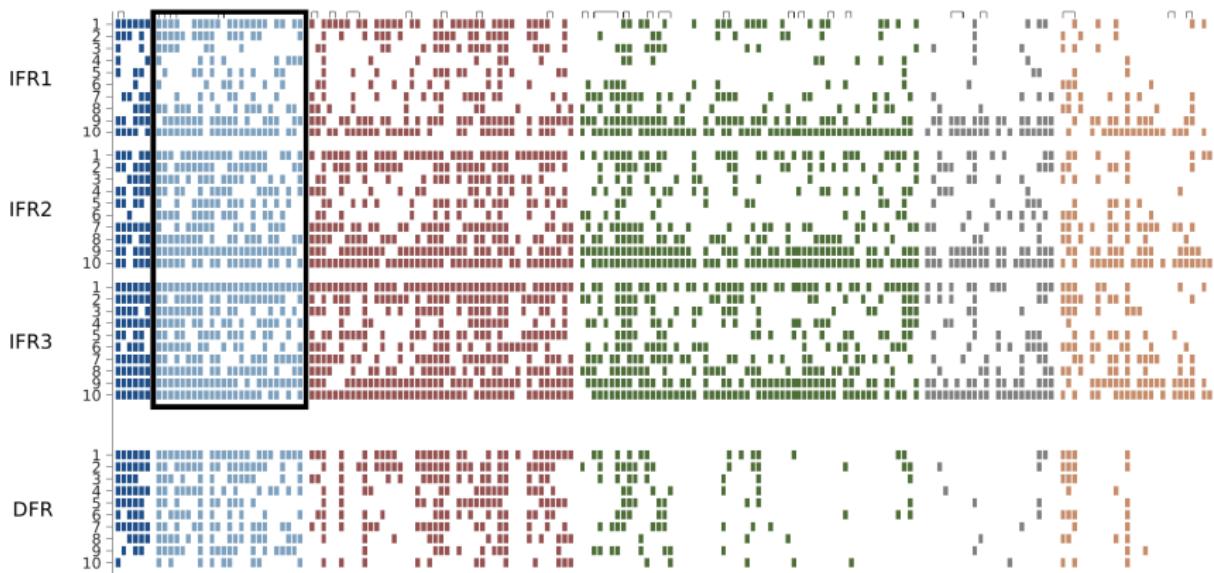
FAST 2  
492 people  
1649 tests

FAST 3  
908 people  
3685 tests

FAST 4  
1169 people  
5352 tests

FAST 5  
430 people  
1313 tests

FAST 6  
519 people  
1714 tests



# No Recency Effect after Delay

FAST 1  
117 people  
383 tests

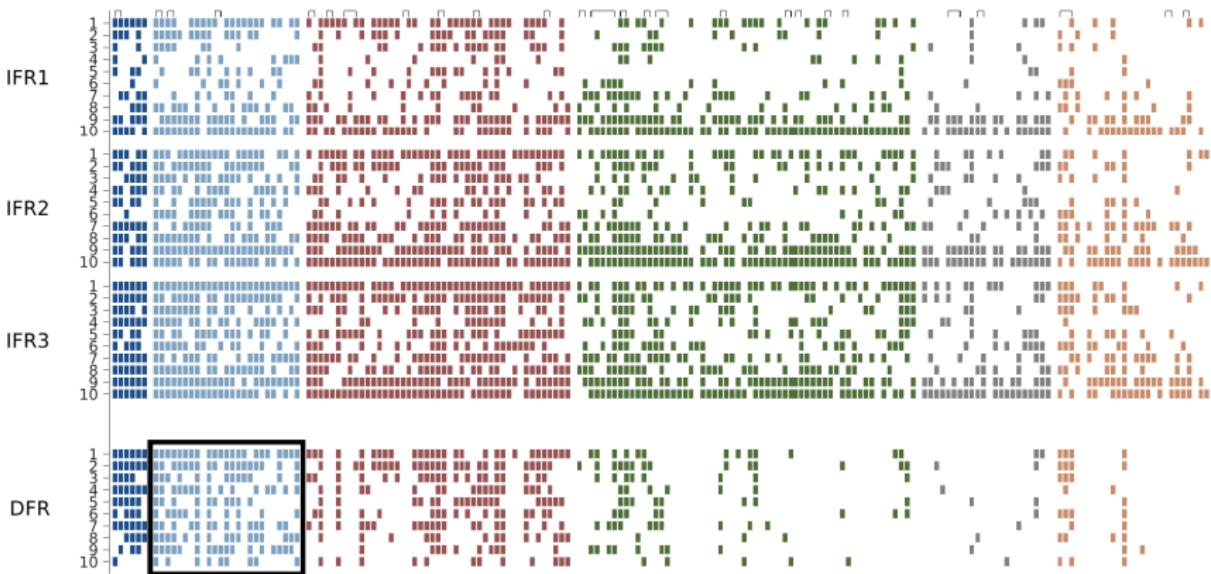
FAST 2  
492 people  
1649 tests

FAST 3  
908 people  
3685 tests

FAST 4  
1169 people  
5352 tests

FAST 5  
430 people  
1313 tests

FAST 6  
519 people  
1714 tests



# Individual Differences

FAST 1  
117 people  
383 tests

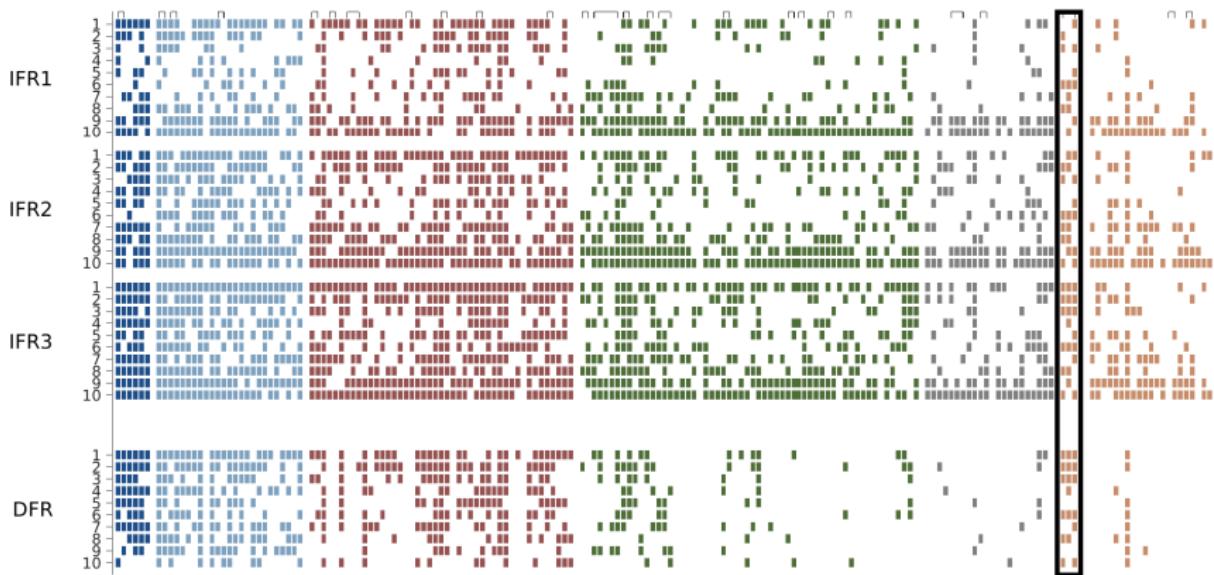
FAST 2  
492 people  
1649 tests

FAST 3  
908 people  
3685 tests

FAST 4  
1169 people  
5352 tests

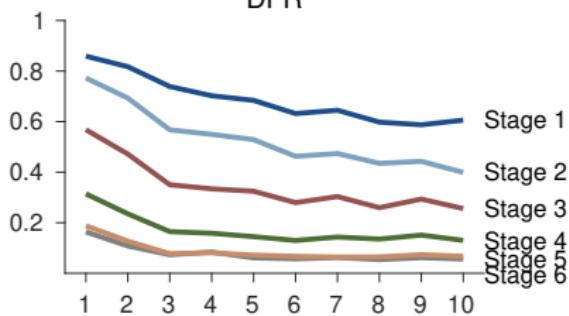
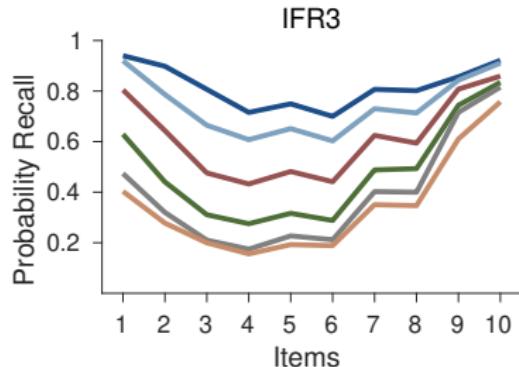
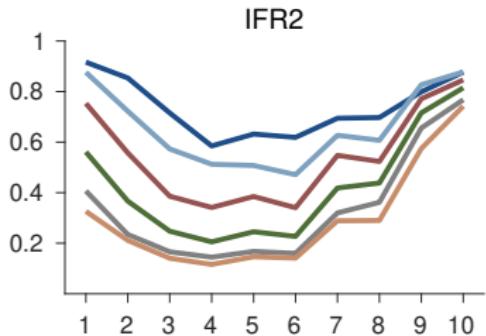
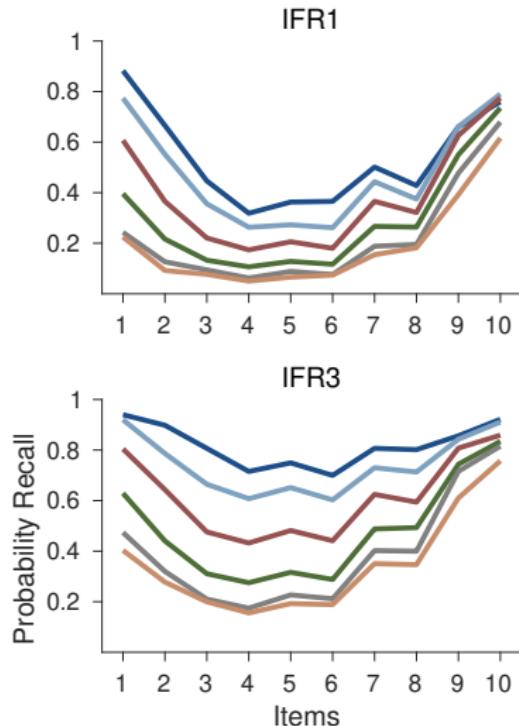
FAST 5  
430 people  
1313 tests

FAST 6  
519 people  
1714 tests



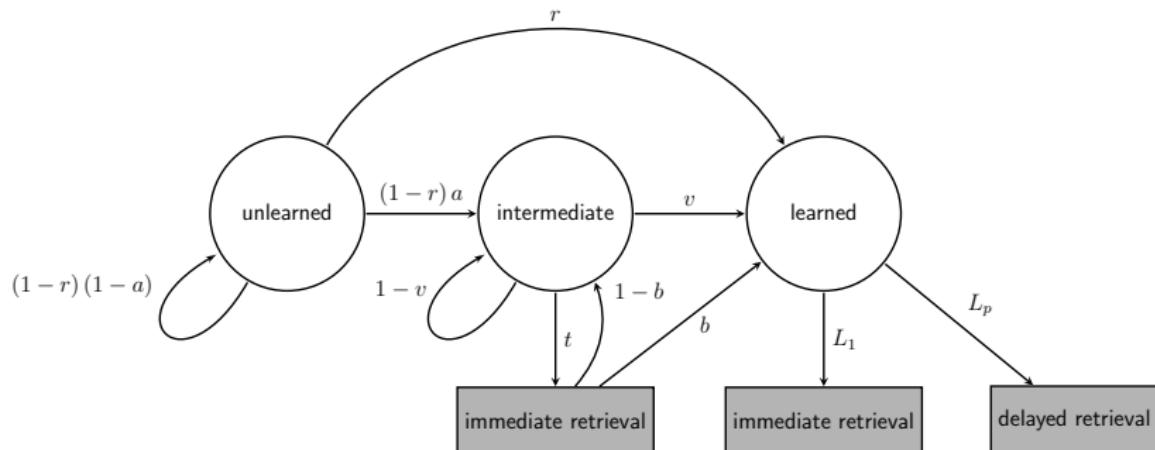
# Serial Position Curves

- Free recall shows standard serial position curves
  - Learning over trials, but worsening performance with impairment



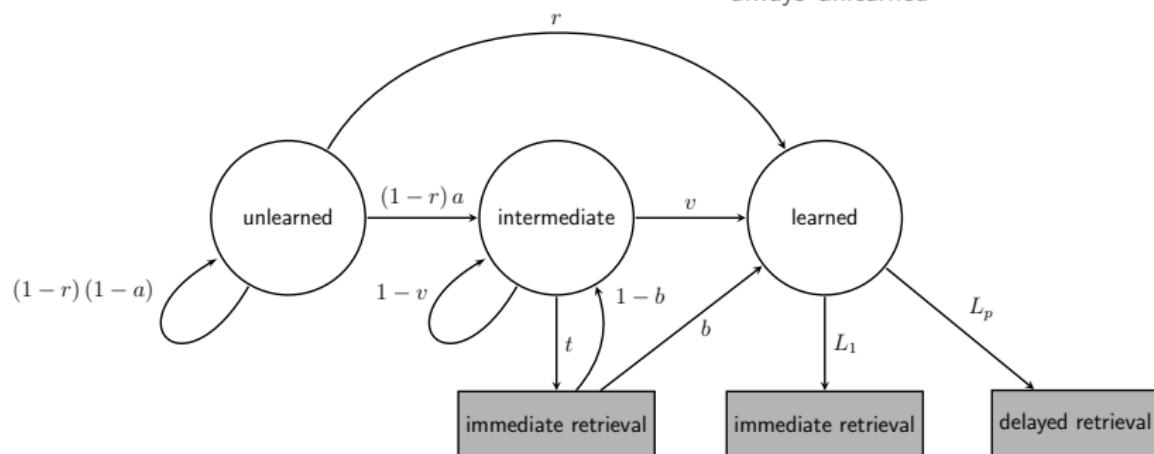
# Multinomial Processing Tree Model

- Alexander, Satalich, Shankle, and Batchelder (2016) propose a MPT model of the retrieval of an item over a sequence of immediate and delayed free recall tasks
  - Key innovation is the assumption of unlearned, intermediate (partially-learned), and learned states for an item over testing



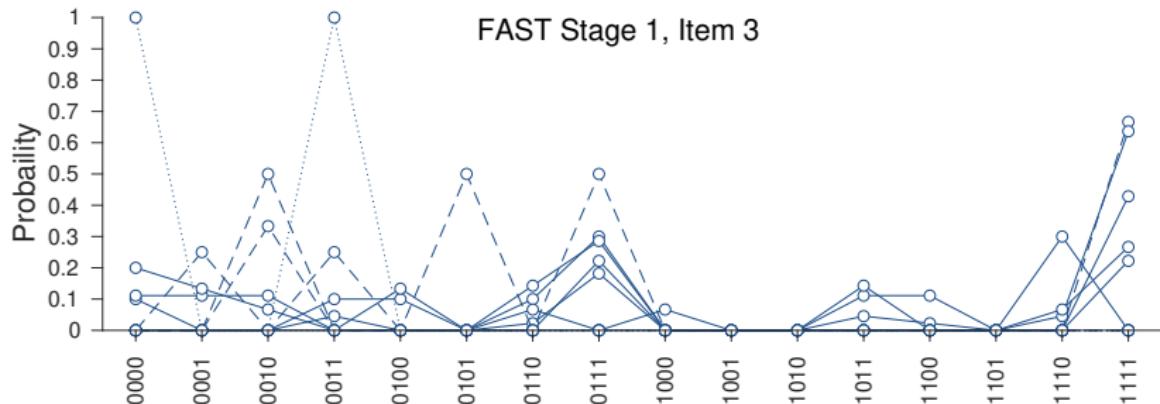
# Application to MCI Screen Tasks

$$\theta_{0000} = \overbrace{r(1 - L_1)(1 - L_1)(1 - L_1)(1 - L_p) + (1 - r)a(1 - t)v(1 - L_1)(1 - L_1)(1 - L_p) + (1 - r)(1 - a)r(1 - L_1)(1 - L_1)(1 - L_p) + (1 - r)a(1 - t)(1 - v)(1 - t)v(1 - L_1)(1 - L_p) + (1 - r)(1 - a)(1 - r)a(1 - t)v(1 - L_1)(1 - L_p) + (1 - r)(1 - a)(1 - r)(1 - a)r(1 - L_1)(1 - L_p) + (1 - r)a(1 - t)(1 - v)(1 - t)(1 - v)(1 - t) + (1 - r)(1 - a)(1 - r)a(1 - t)(1 - v)(1 - t) + (1 - r)(1 - a)(1 - r)a(1 - t) + (1 - r)(1 - a)(1 - r)(1 - a)(1 - r)(1 - a)}^{\text{learned immediately but never retrieve}} + \underbrace{(1 - r)(1 - a)(1 - r)(1 - a)(1 - r)(1 - a)}_{\text{always unlearned}}$$



# 16-Tuple Representation of Data

- Each item is either recalled or not recalled on each of the four recall tasks, giving  $2^4 = 16$  possible outcomes
  - 1111 means the item was recalled every time
  - 1110 means the item was recalled for the first three immediate free recalls, but not the delayed free recall
  - ...
  - 0000 means the item was never recalled
- We represent behavioral data as counts  $y_{ij}$  of the  $j$ th of the 16-tuple patterns for the  $i$ th person over their  $n_i$  assessments



## Saturated Model

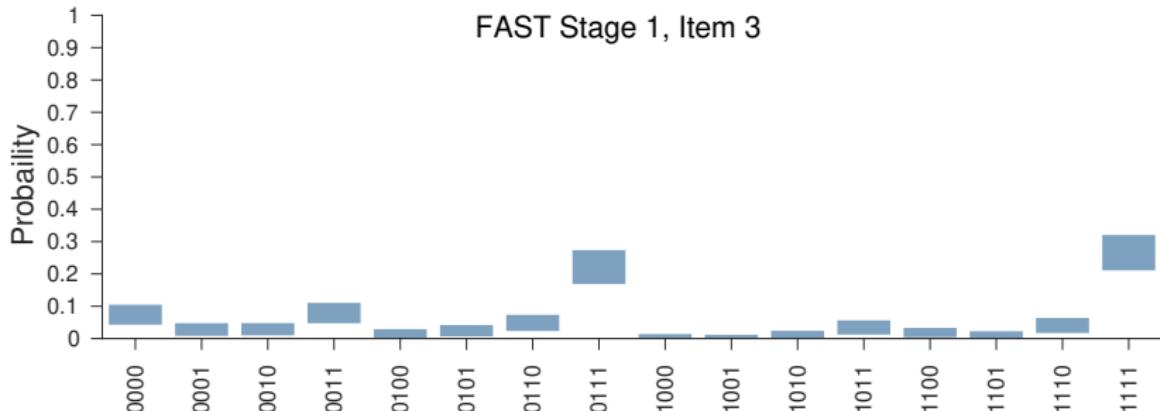
- For posterior predictive checks of the descriptive adequacy of substantive models, we characterize the data by a saturated model

$$y_{ij} \sim \text{Multinomial}(\boldsymbol{\theta}_{ij}, n_i)$$

$$\boldsymbol{\theta}_{ij} \sim \text{Dirichlet}(\boldsymbol{\alpha}_j)$$

$$\alpha_{jk} \sim \text{Gamma}(2, 1),$$

and the distribution of  $\theta_j^{\text{pred}} \sim \text{Dirichlet}(\boldsymbol{\alpha}_j)$  quantifies the uncertainty of the probability of the  $j$ th tuple occurring for any person

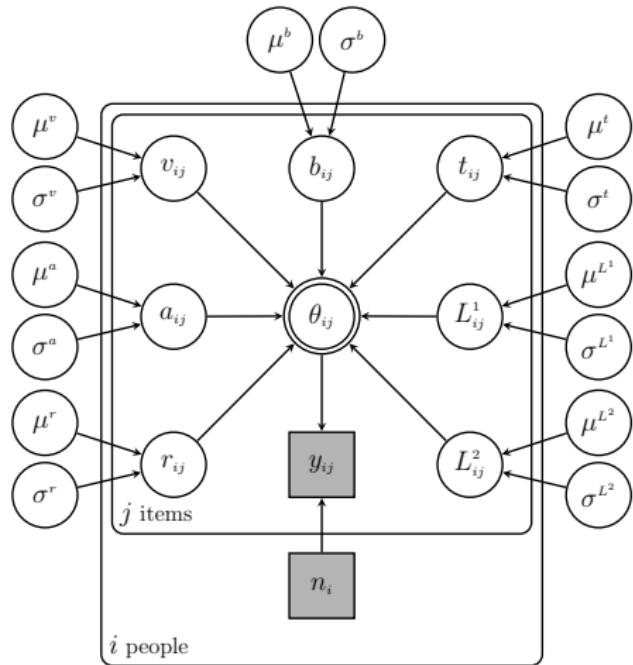


## **Fixed Item Model**

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# Fixed Item Model

Assume individual differences from a truncated Gaussian for each parameter, but no item differences in parameters



$$\mu \sim \text{Uniform}(0, 1)$$

$$\sigma \sim \text{Uniform}(0, 1)$$

$$\cdot_{ij} \sim \text{TruncatedGaussian}_{(0,1)}(\mu, 1/\sigma^2)$$

$$\theta_{ij} = \text{Batchelder}(a_{ij}, b_{ij}, r_{ij}, v_{ij}, t_{ij}, L_{ij}^1, L_{ij}^2)$$

$$y_{ij} \sim \text{Multinomial}(\boldsymbol{\theta}_i, n_i)$$

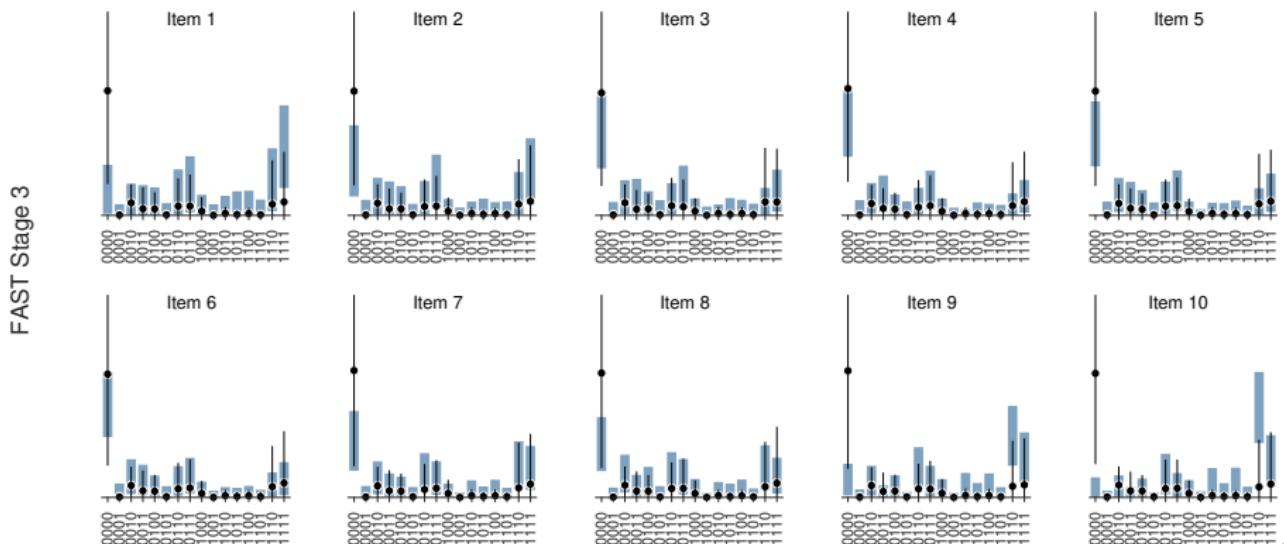
# JAGS Implementation

JAGS script makes use of an user-added function Batchelder that returns the 16-tuple probabilities given a set of MPT parameters

```
model{
  for (j in 1:nItems){
    for (i in 1:nPeople){
      # data
      y[i,j,1:nPatterns]~dmulti(theta[i,j,1:nPatterns],nAssessments[i])
      # model
      theta[i,j,1:nPatterns]=Batchelder(a[i,j],b[i,j],r[i,j],v[i,j],t[i,j],L1[i,j],L2[i,j])
      # parameters
      a[i,j]~dnorm(mua,1/sigmaaa^2)T(0,1)
      b[i,j]~dnorm(mub,1/sigmab^2)T(0,1)
      ...
    }
  }
  # priors
  mua~dunif(0,1)
  sigmaaa~dunif(0,1)
  mub~dunif(0,1)
  sigmab~dunif(0,1)
  ...
}
```

# Failure of Descriptive Adequacy

- A posterior predictive comparison of the distribution of observed proportions and the distribution over individual differences
  - The model cannot describe the data because different items have very different recall patterns
  - Example below is for FAST stage 3, but all stages have the same property

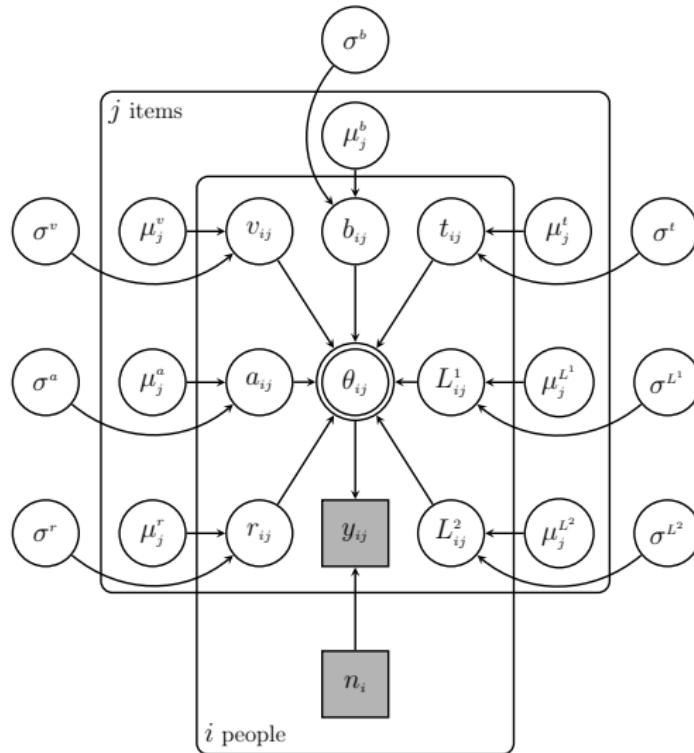


## **Independent Item Model**

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# Independent Item Model

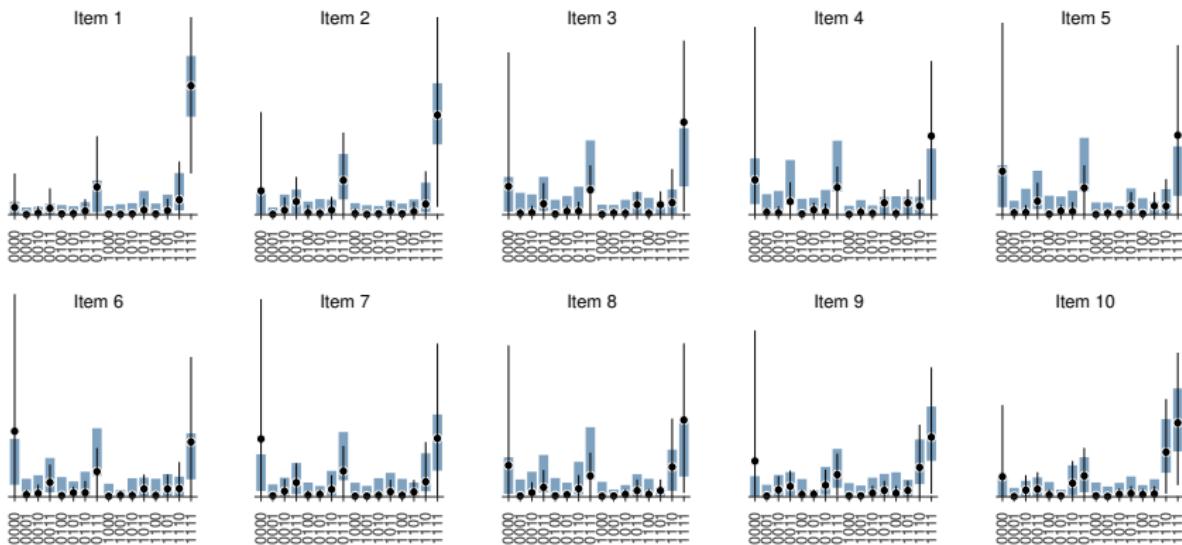
Assume individual differences from a truncated Gaussian for each parameter, and now allow independent parameters for each item position



# Descriptive Adequacy for Stage 1

- Allowing for each item to have its own parameterization achieves descriptive adequacy

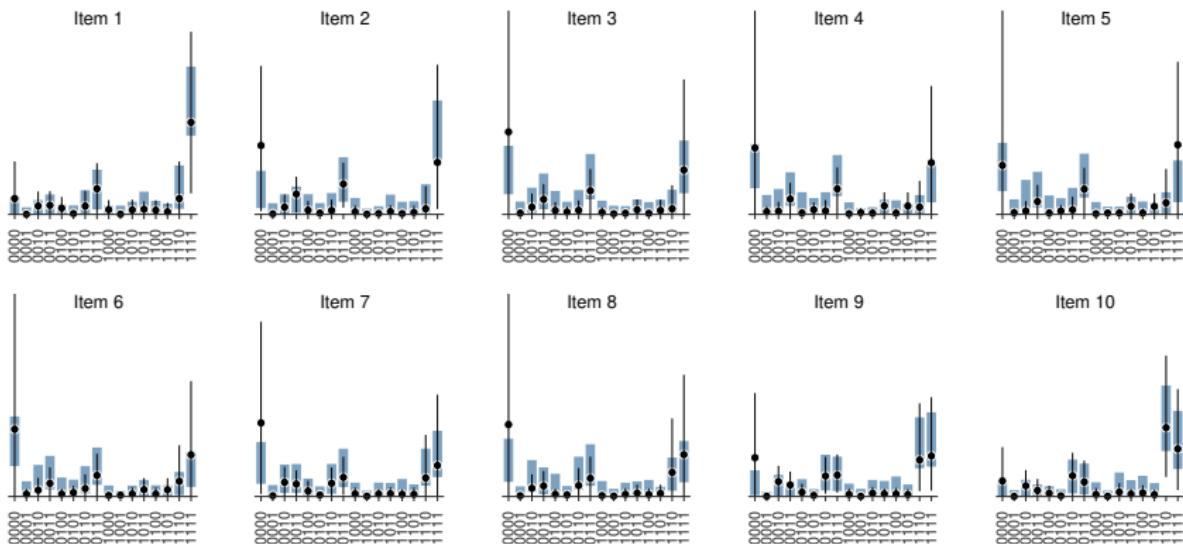
FAST Stage 1



# Descriptive Adequacy for Stage 2

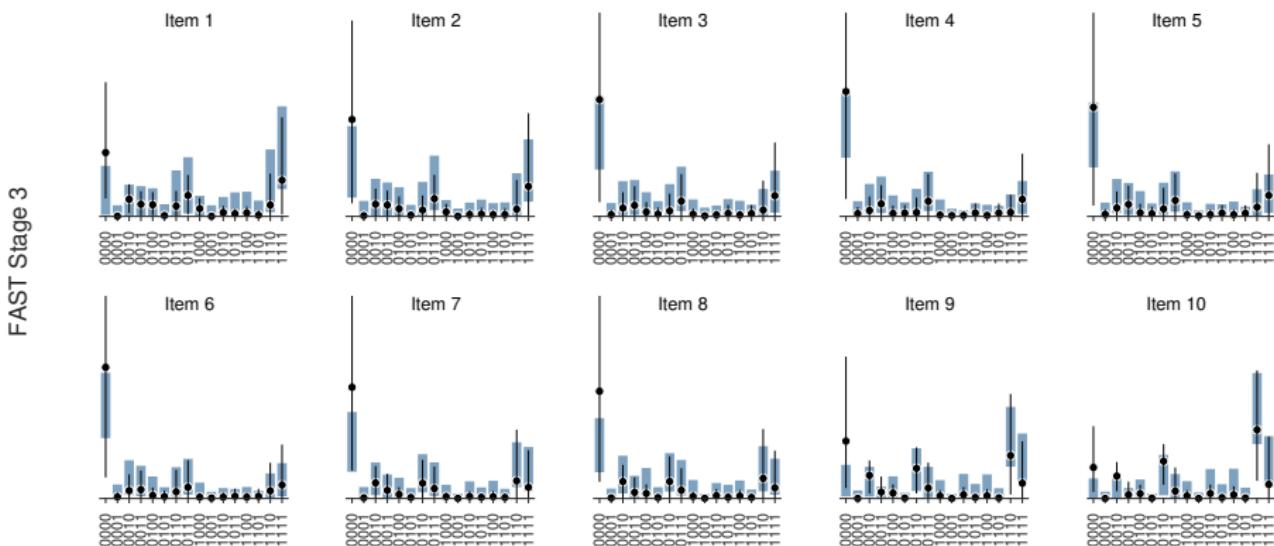
- Allowing for each item to have its own parameterization achieves descriptive adequacy

FAST Stage 2



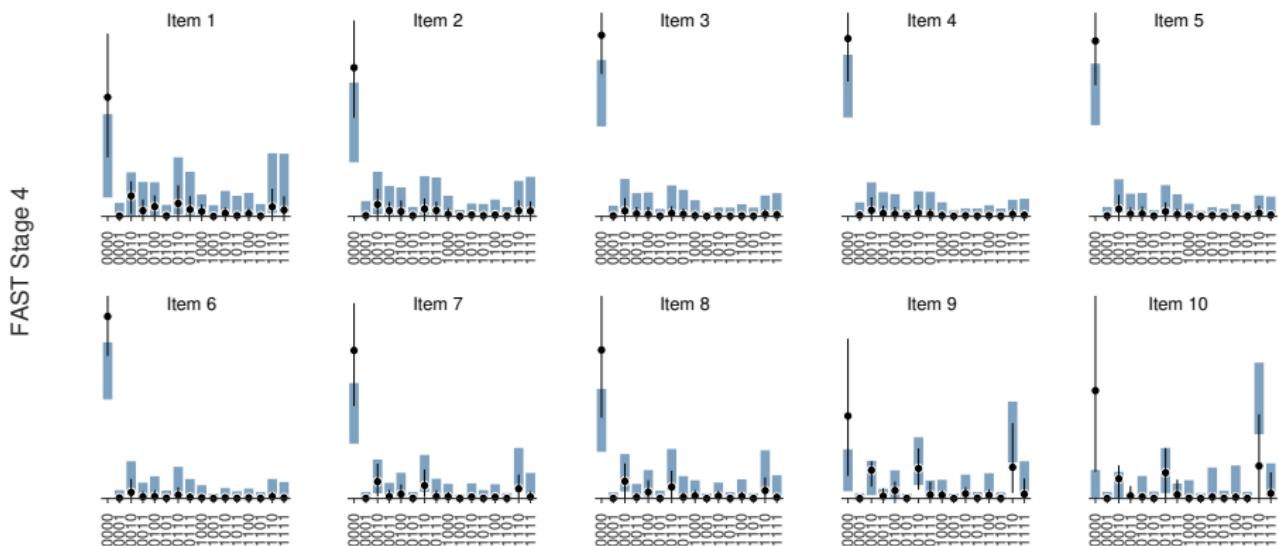
# Descriptive Adequacy for Stage 3

- Allowing for each item to have its own parameterization achieves descriptive adequacy



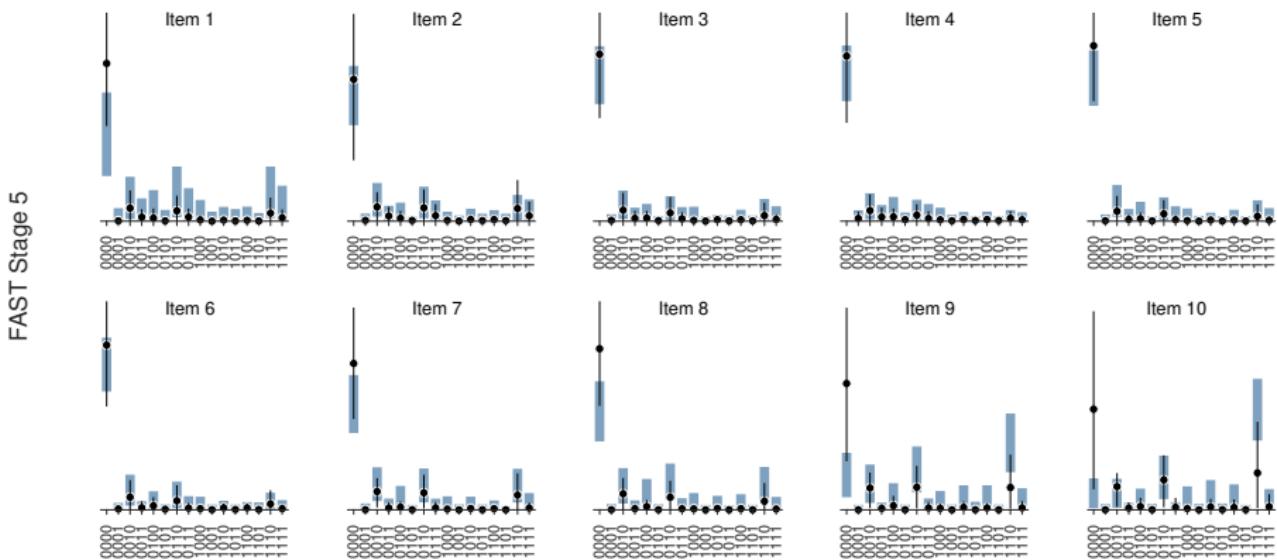
# Descriptive Adequacy for Stage 4

- Allowing for each item to have its own parameterization achieves descriptive adequacy



# Descriptive Adequacy for Stage 5

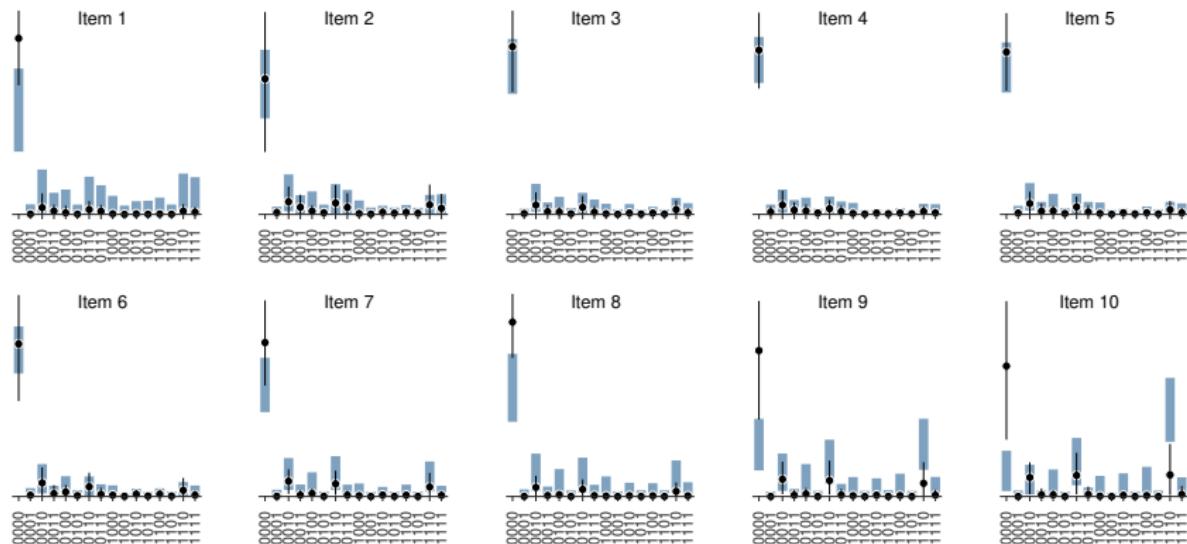
- Allowing for each item to have its own parameterization achieves descriptive adequacy



# Descriptive Adequacy for Stage 6

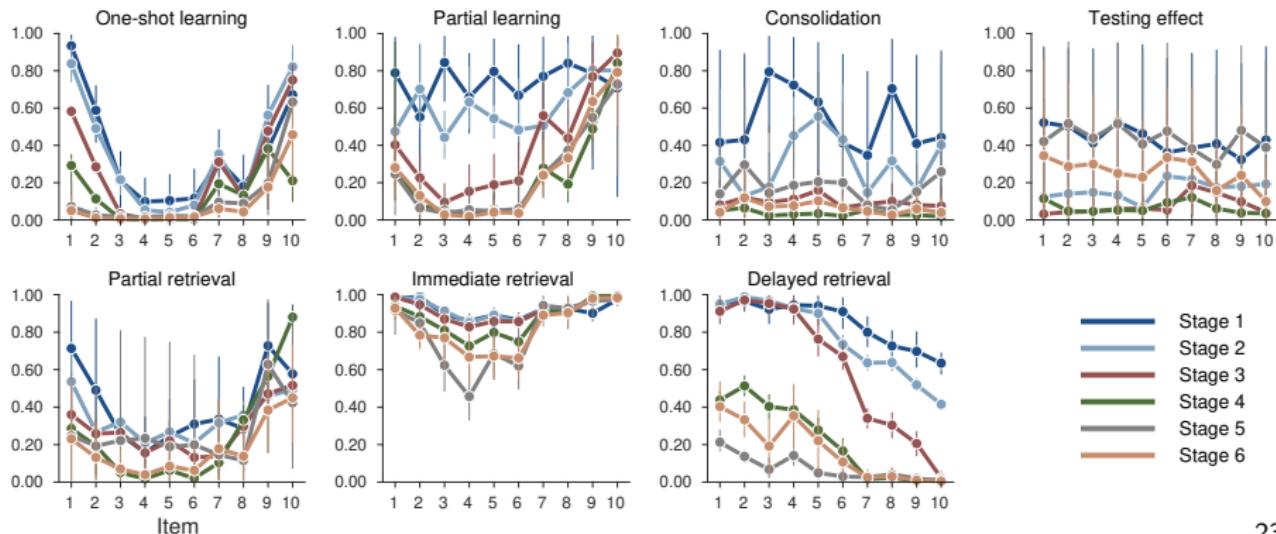
- Allowing for each item to have its own parameterization achieves descriptive adequacy

FAST Stage 6



# Parameter Inferences

- Although the parameters for each item position are inferred independently, they show clear theoretically-interpretable regularities
  - Serial position effects for immediate retrieval ( $t$ ,  $L_1$ ), and decaying primacy effects for delayed retrieval ( $L_2$ )
  - Possible serial position effects for learning ( $a$ ,  $r$ ,  $v$ ), except for constant testing effects ( $b$ )

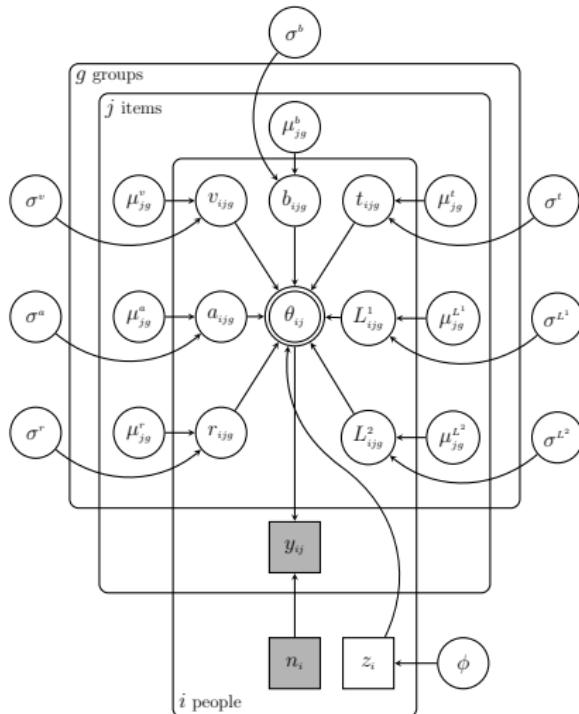


# **Independent Item Latent-Mixture Model**

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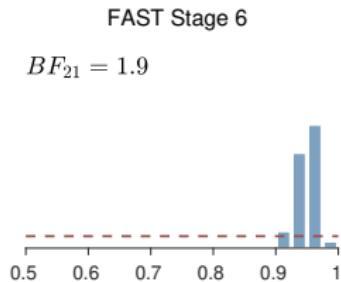
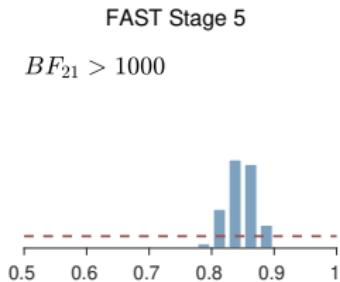
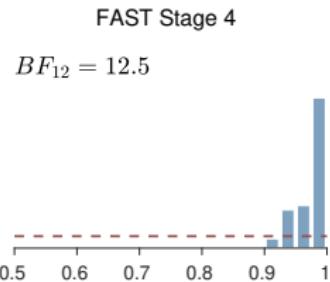
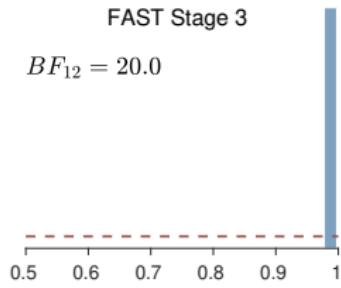
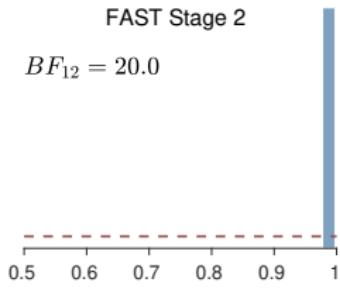
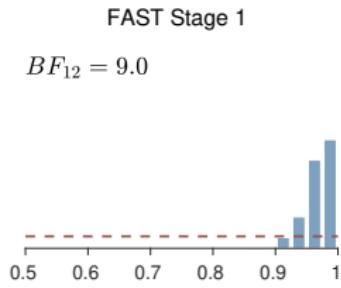
# Latent Mixture Model

Allow for two different subgroups, with each person assigned to one, and a base-rate of  $\phi \sim \text{Uniform}(0.5, 1)$  for the majority group



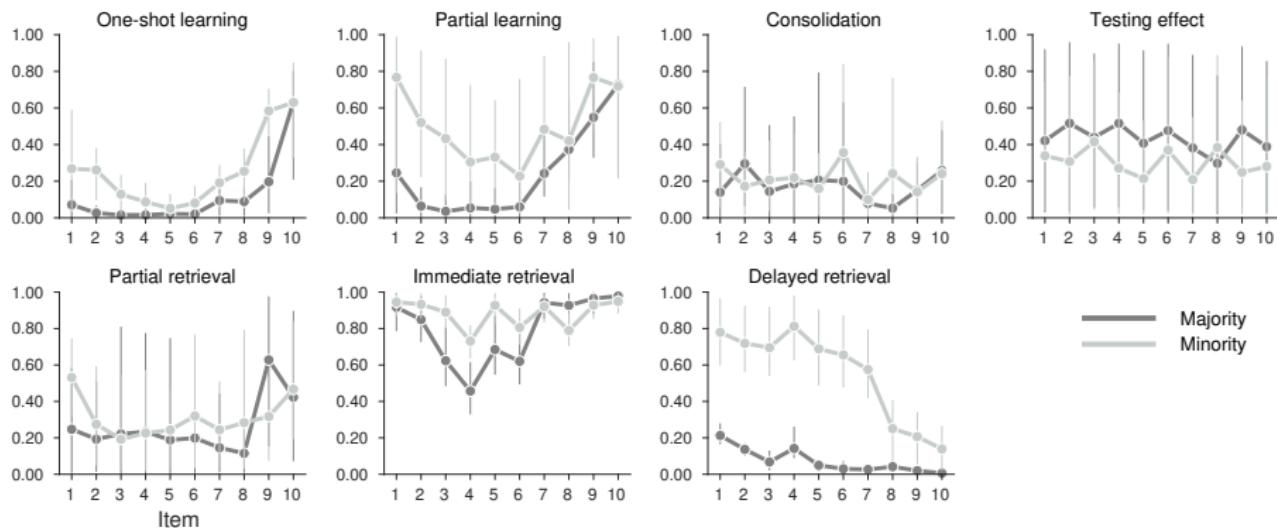
# Evidence for Subgroups

- There is evidence that FAST stages 1–4 have only one group, but stage 5 has subgroups, and stage 6 may have subgroups



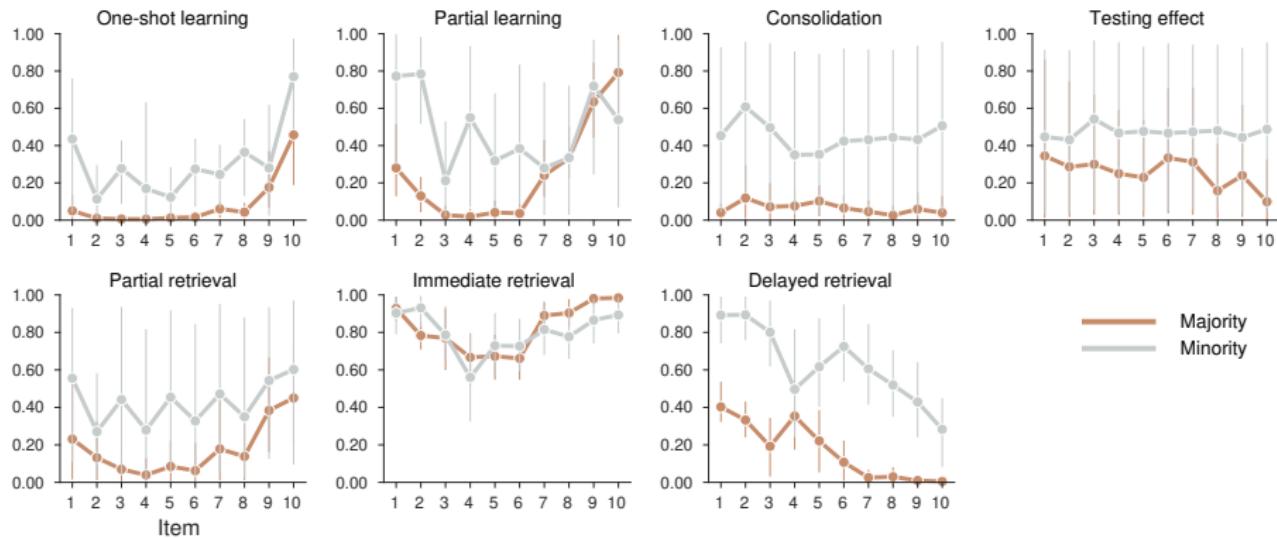
# Subgroups in Stage 5

- The minority subgroup, with about 15% of the patients, performs much better than the others



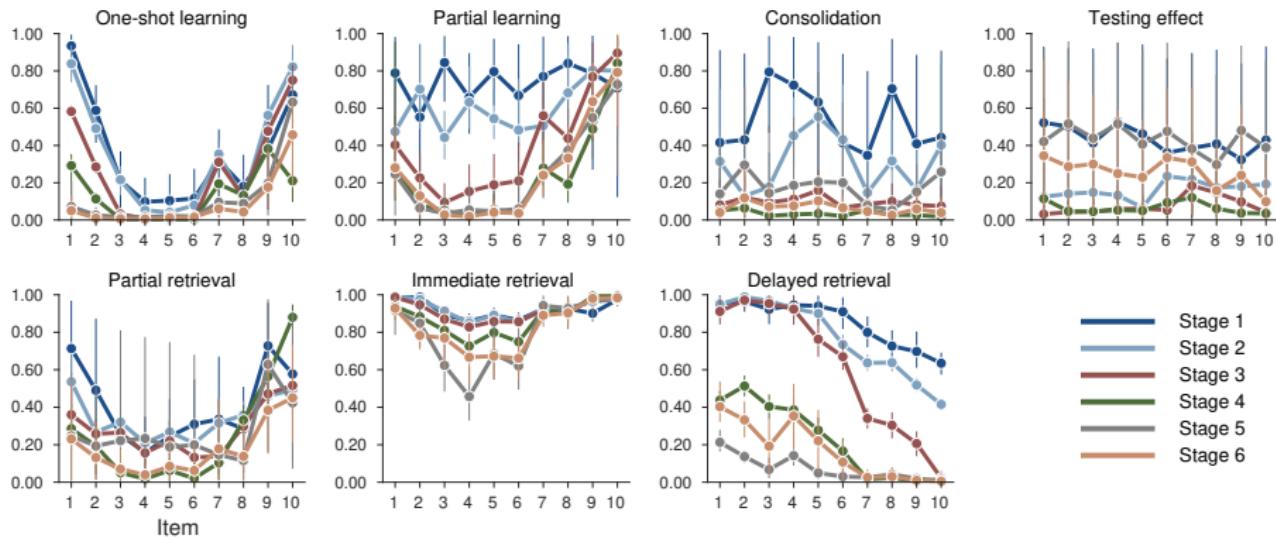
# Subgroups in Stage 6

- The minority subgroup, with about 5% of the patients, performs much better than the others



# Parameter Inferences

- Serial position effects for immediate retrieval ( $t$ ,  $L_1$ ), and decaying primacy effects for delayed retrieval ( $L_2$ )
- Possible serial position effects for learning ( $a$ ,  $r$ ,  $v$ ), except for constant testing effects ( $b$ )

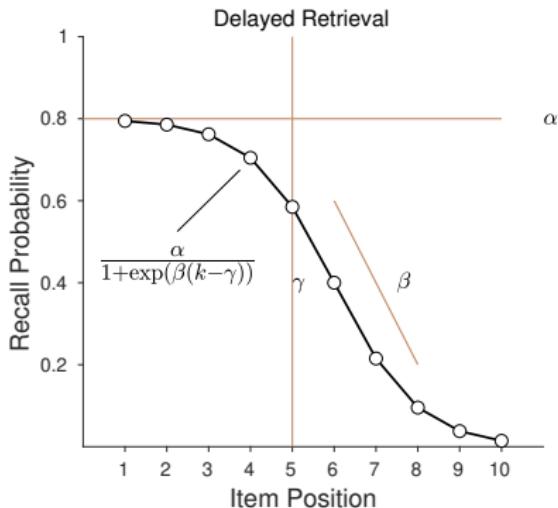
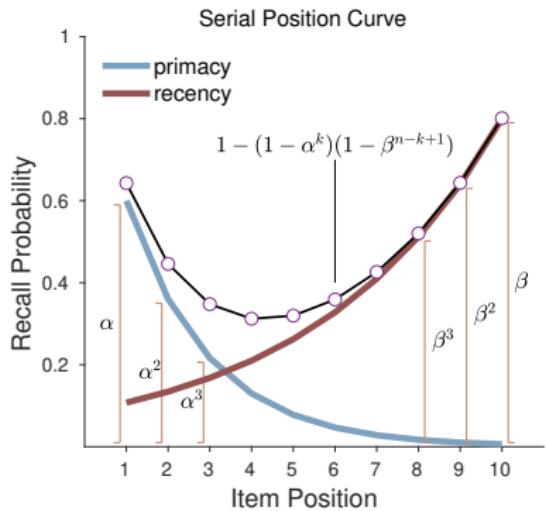


## **Hierarchical Item Model**

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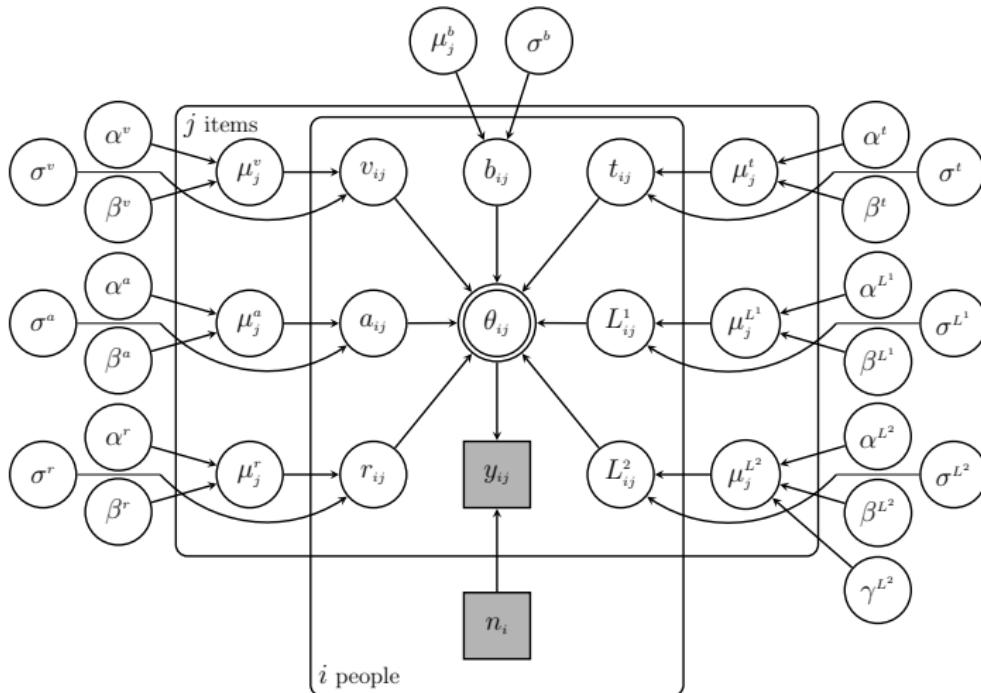
# Theoretical Extensions to Batchelder Model

- Hierarchical model of item parameters in terms of their positions
  - Serial position curve model for encoding parameters  $a$ ,  $t$ ,  $r$ , and immediate retrieval parameters  $t$ ,  $L_1$
  - Logistic model of delayed retrieval parameter  $L_2$
  - Constant testing effect learning parameter  $b$



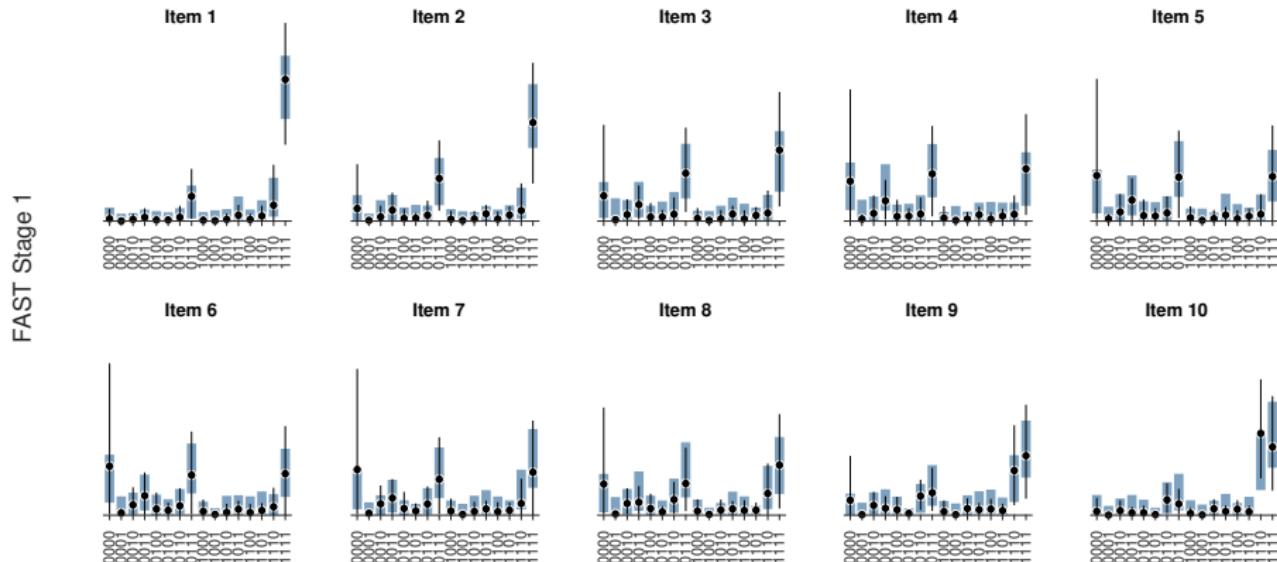
# Hierarchical Item Model

Assume individual differences from a truncated Gaussian for each parameter, and now allow independent parameters for each item position



# Descriptive Adequacy for Stage 1

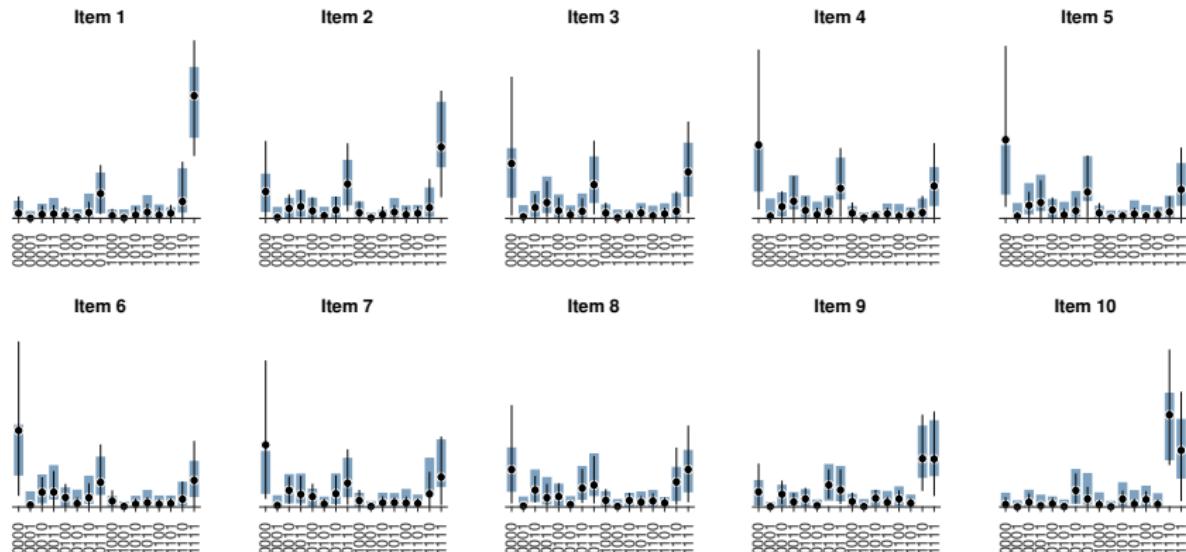
- The theoretically-extended model maintains descriptive adequacy



# Descriptive Adequacy for Stage 2

- The theoretically-extended model maintains descriptive adequacy

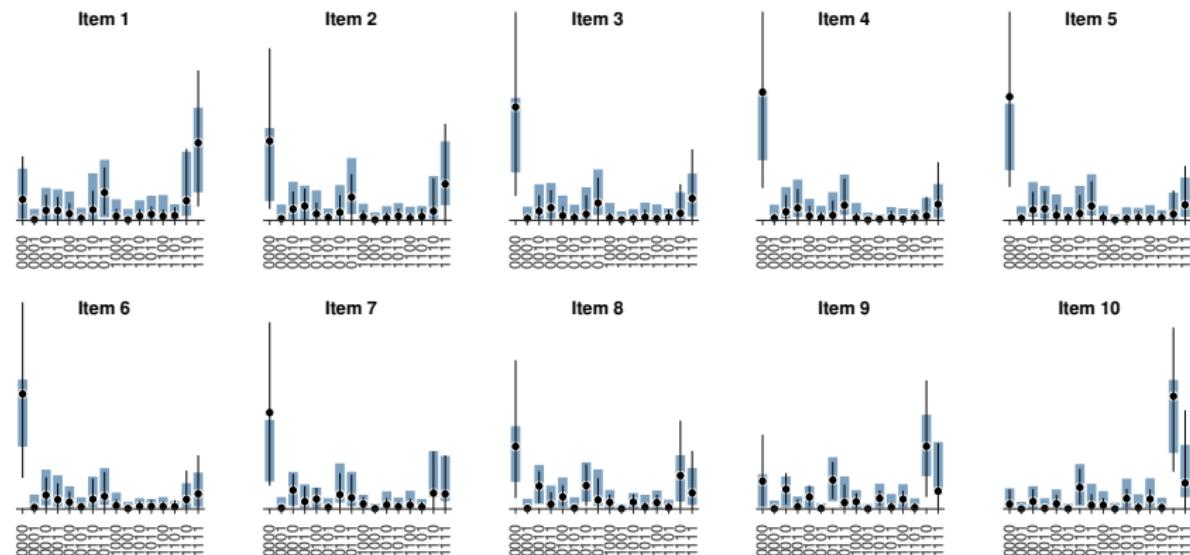
FAST Stage 2



# Descriptive Adequacy for Stage 3

- The theoretically-extended model maintains descriptive adequacy

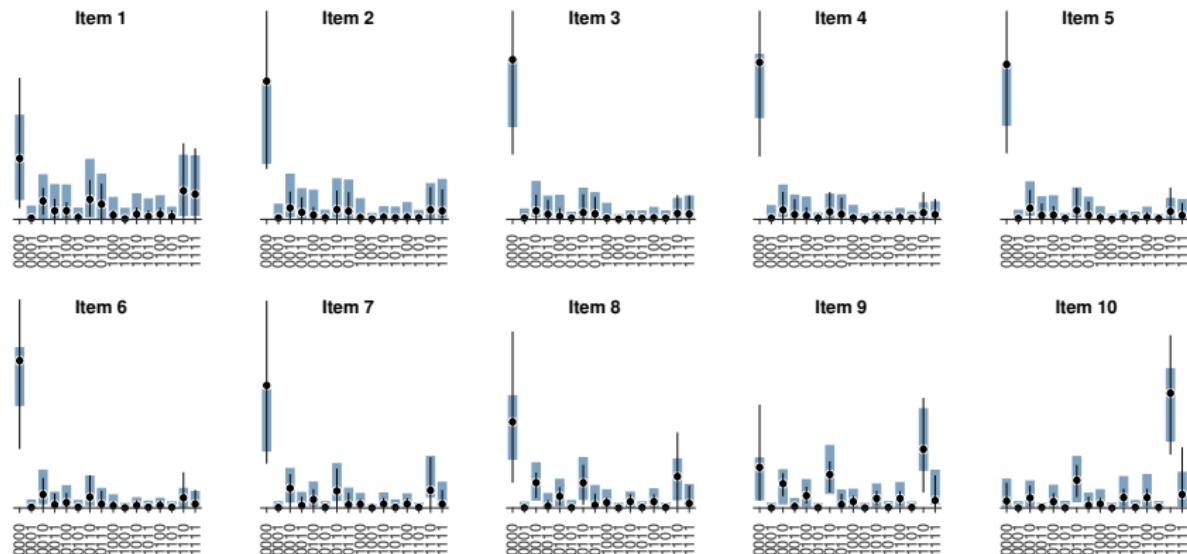
FAST Stage 3



# Descriptive Adequacy for Stage 4

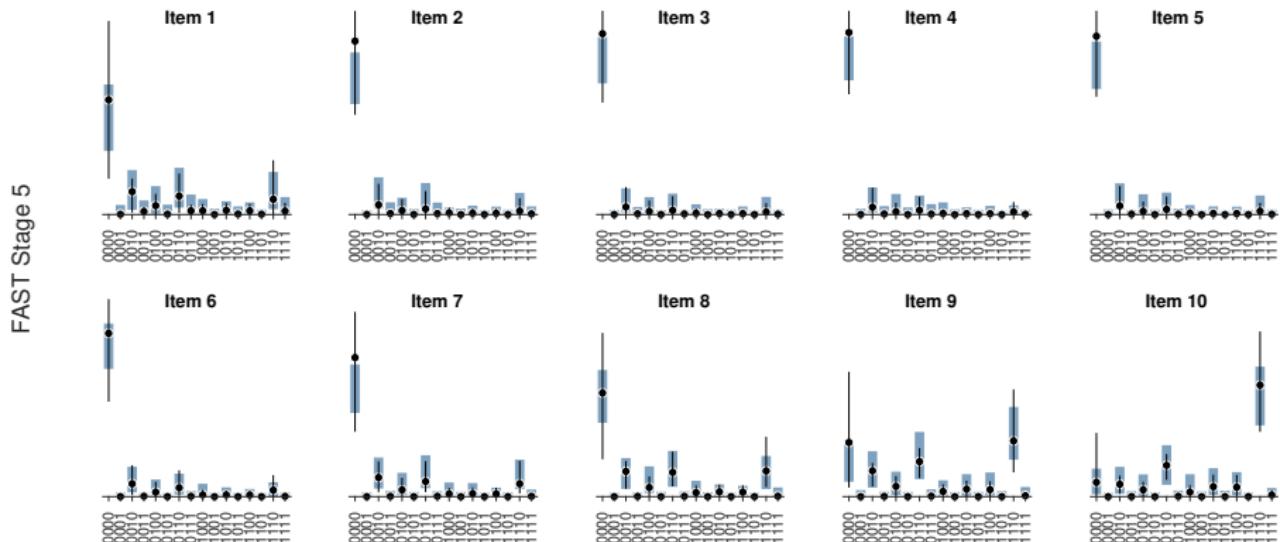
- The theoretically-extended model maintains descriptive adequacy

FAST Stage 4



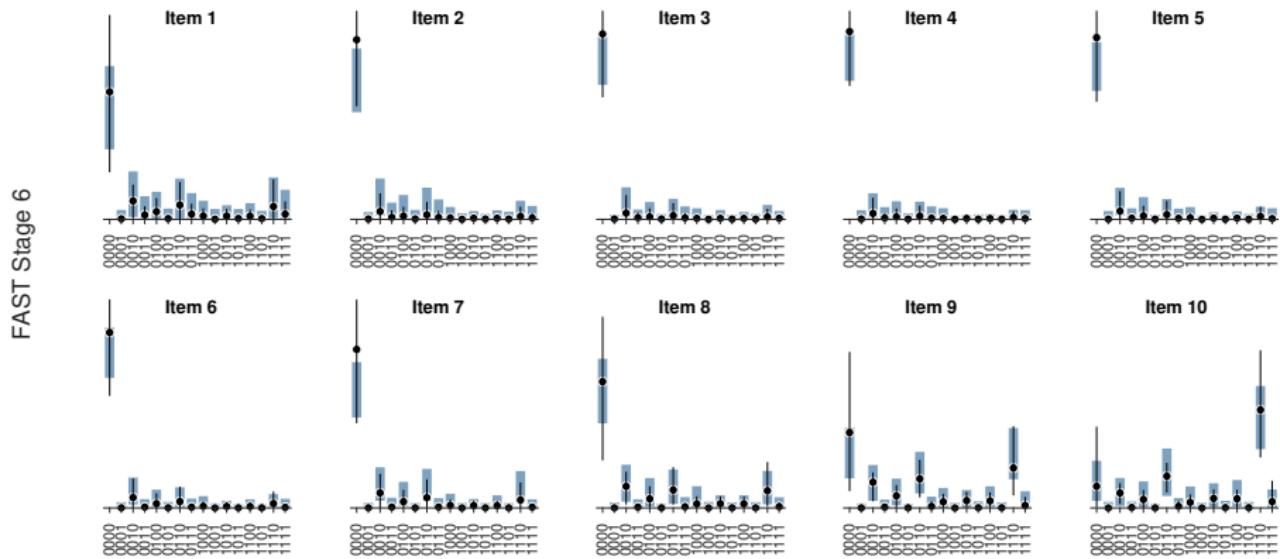
# Descriptive Adequacy for Stage 5

- The theoretically-extended model maintains descriptive adequacy



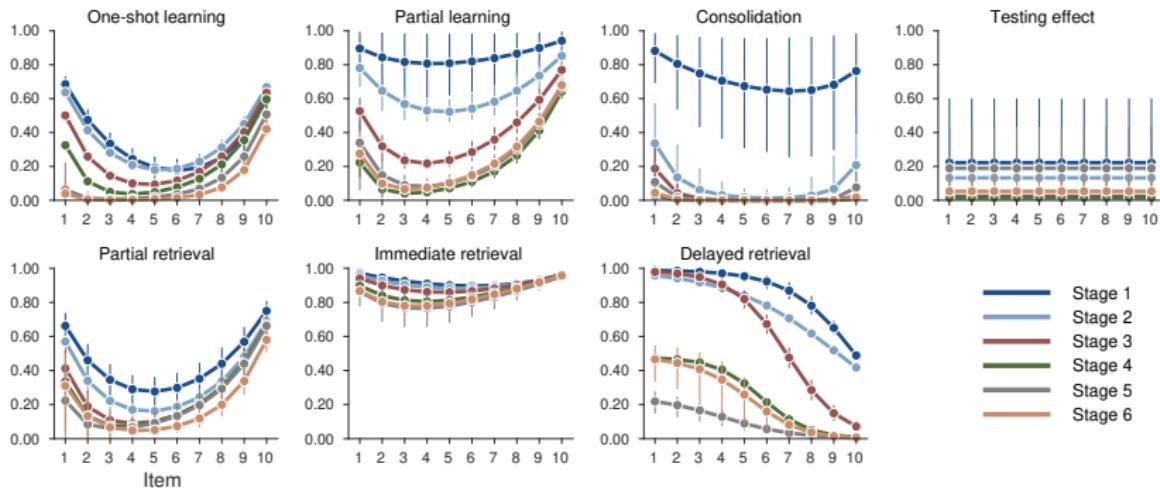
# Descriptive Adequacy for Stage 6

- The theoretically-extended model maintains descriptive adequacy



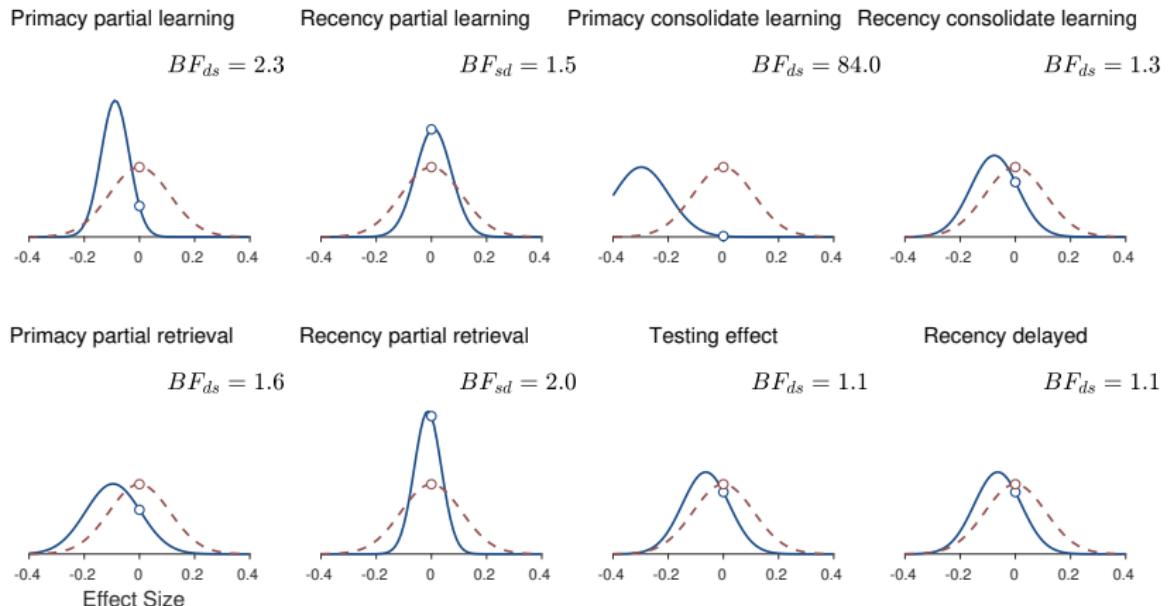
# Inferences of Theoretically-Extended Model

- Comparing FAST stage 1 to stage 2 examines the subjective change from cognitively normal to cognitively normal but with a subjective sense of memory impairment
  - No difference in overall recall accuracy, nor in everyday function, for people in these stages



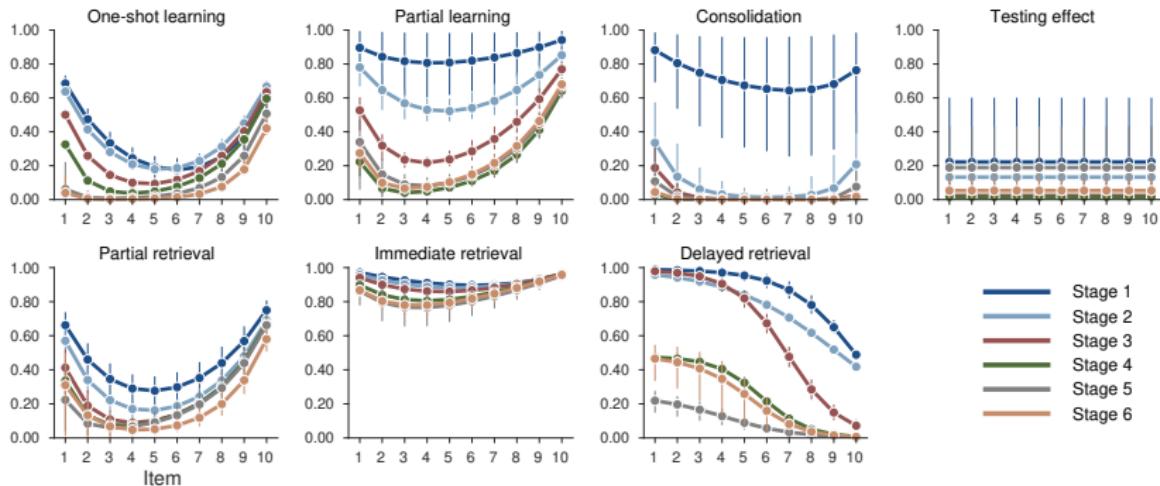
# FAST Stage 1 vs 2

- The change in effect size at  $\delta = 0$  from prior to posterior gives the Bayes factor for sameness or difference between FAST stage 1 and 2
  - Stage 2 has worse consolidation of partially-learned words at the beginning of the list



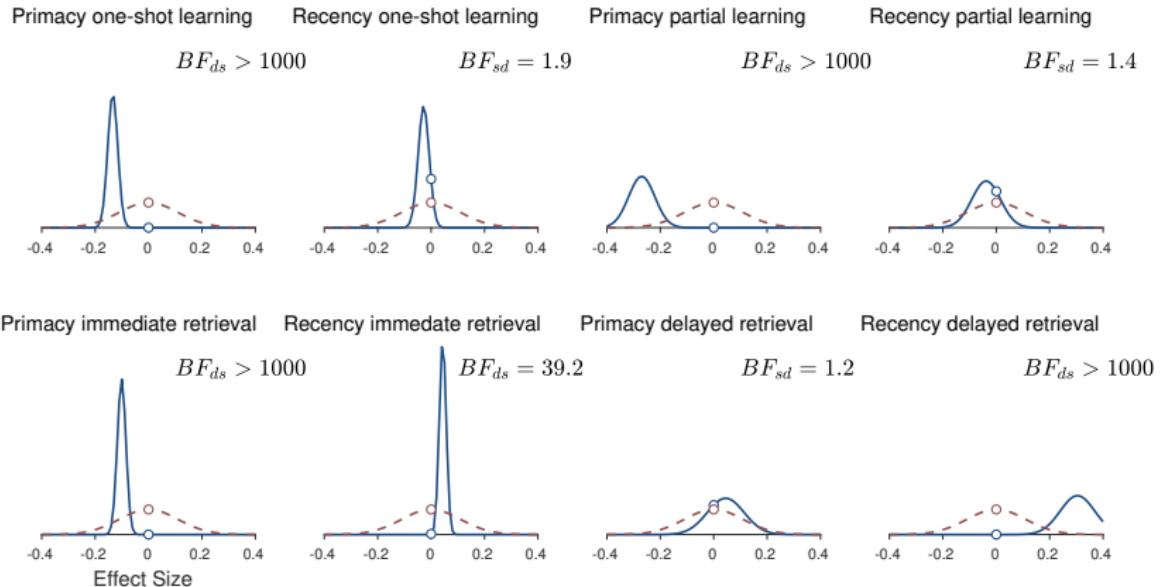
# Inferences of Theoretically-Extended Model

- Comparing FAST stage 2 to stage 3 examines the objective change from cognitively normal to cognitively impaired



# FAST Stage 2 vs 3

- Learning words presented at the beginning of the list is much worse in stage 3, as is the immediate and delayed recall of later words



## Some Preliminary Conclusions About Memory

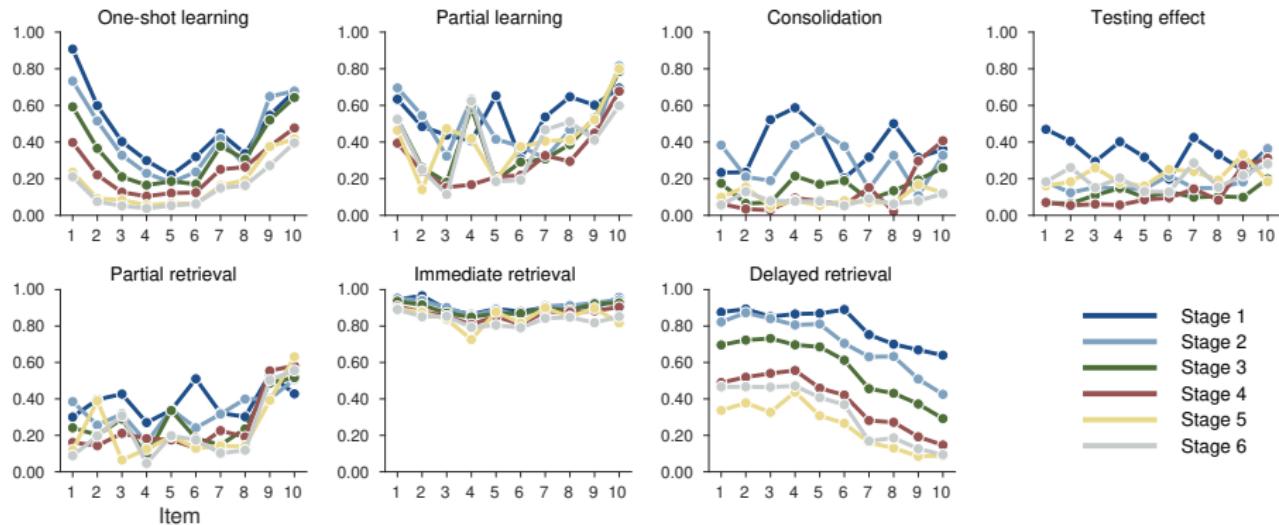
- Subjective decline from FAST stage 1 to FAST stage 2 involves difficulties with partial learning
  - Deficits in consolidating encoding of partially-learned words
- More severe objective cognitive impairment to FAST stage 3 and beyond involves deterioration in long-term memory and rehearsal processes
  - Failure to recall words presented at the beginning of lists in immediate free recall
  - Failure to recall words presented at the end of lists in delayed free recall

## **Two Final Things**

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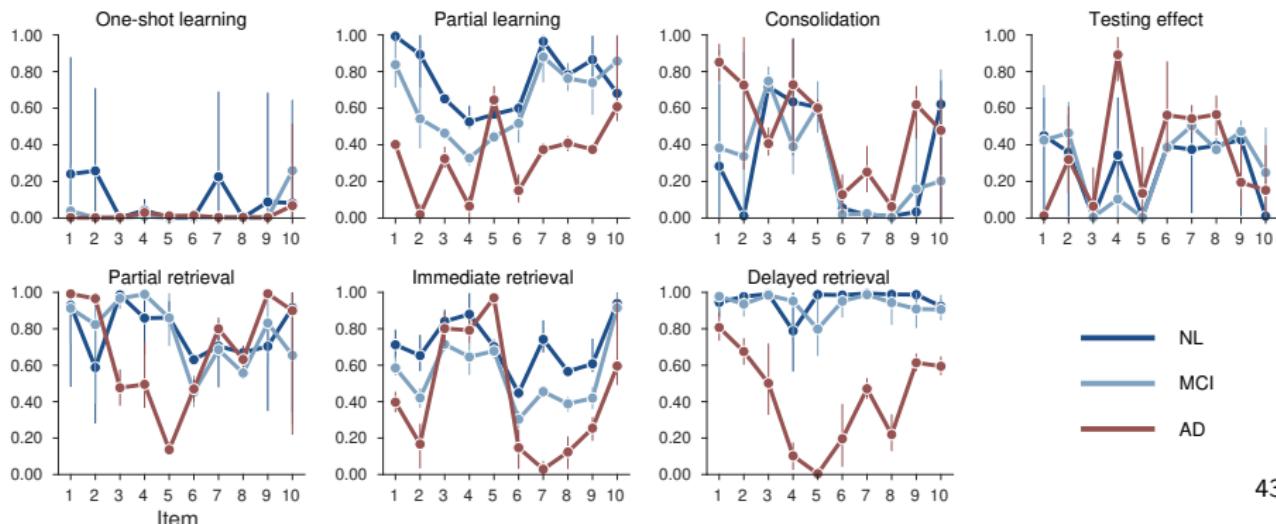
# Need to Incorporate Individual Differences

- The inferences are qualitatively different, and less theoretically sensible, if individual differences are removed
- These results are based on aggregating all assessments in each stage, which is equivalent to assuming there are no individual differences for different people in the same FAST stage



# Need to Present Items in Same Order

- The inferences are qualitatively different, and **much** less theoretically sensible, for alternative clinical tests that present words in different orders
- These results are based on ADNI data involving cognitively normal, mildly cognitively impaired, and Alzheimer's disease individuals tested using the ADAS-Cog test



## **Conclusion**

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# Generative Models and Bayesian Methods

- Case study is an example of the benefits of **generative models** of cognition and the use of **Bayesian methods** of inference (Lee, 2018)
- Generative probabilistic models of cognition
  - Force assumptions to be part of the model, saying how psychological parameters and processes generate data
  - Make models theoretically richer, and force the complete quantification of their predictions
- Bayesian methods allow rich and creative cognitive models to be explored
  - Can always, in principle, apply any generative probabilistic model to data to make inferences in the same way
  - Always represent uncertainty about models and parameters, controlling for complexity in the exploration

**Thanks!**

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# References

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- Alexander, G. E., Satalich, T. A., Shankle, W. R., & Batchelder, W. H. (2016). A cognitive psychometric model for the psychodiagnostic assessment of memory-related deficits. *Psychological Assessment*, 28, 279.
- Lee, M. D. (2018). Bayesian methods in cognitive modeling. In J. Wixted & E.-J. Wagenmakers (Eds.), *The Stevens' Handbook of Experimental Psychology and Cognitive Neuroscience. Volume 5: Methodology* (Fourth ed., pp. 37–84). John Wiley & Sons.