

Temporal contrast sensitivity in the fovea

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Overview

How do humans use the luminance modulations provided by eye movements?

Overarching goal: To characterize spatiotemporal contrast sensitivity across the retina.

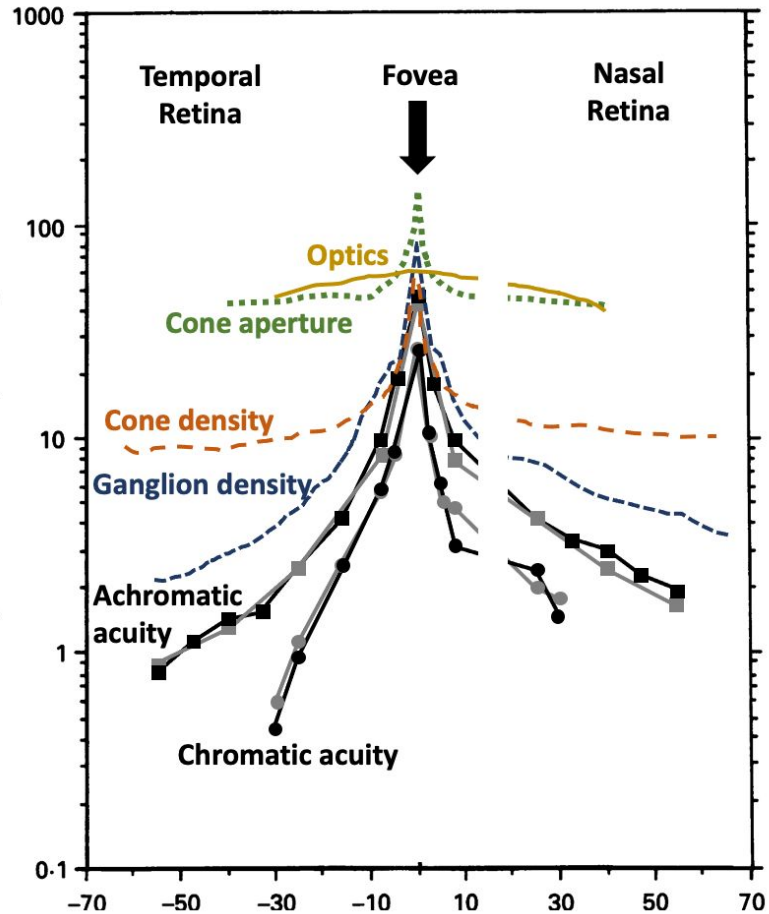
This project focuses on temporal contrast sensitivity within the fovea.

1. Literature review: Is the visual field temporally homogeneous? What is known about foveal temporal contrast sensitivity?
2. Paradigm and caveats about ddpi-mk2 and (new) EyeRIS.
3. Pilot results
4. Ddpi-mk2: eye movement characteristics

Vision is not uniform across the retina

Visual Acuity

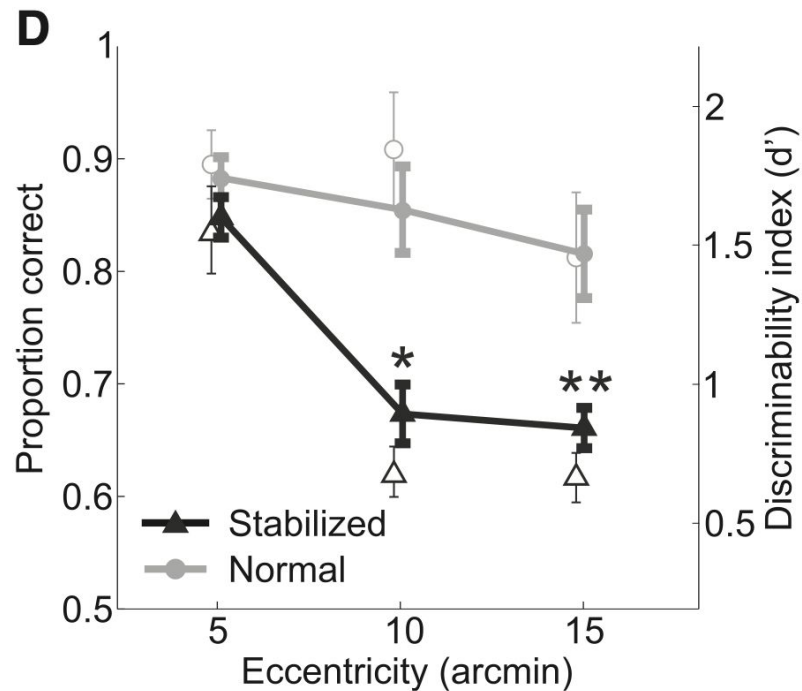
Spatial resolution (cycles deg⁻¹)



Adapted from Anderson et al, 1991

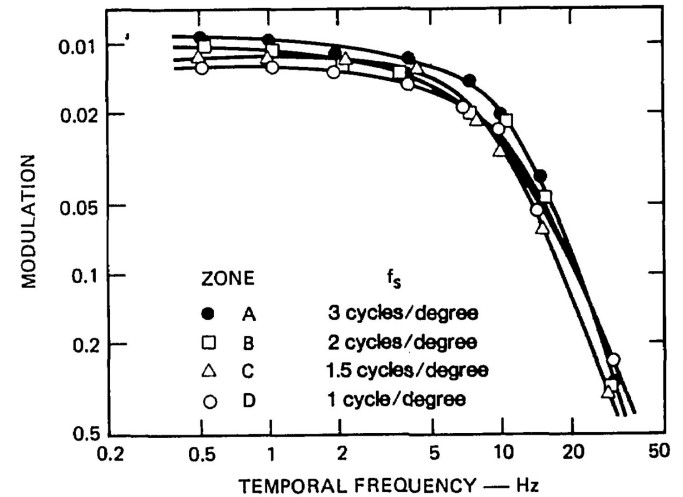
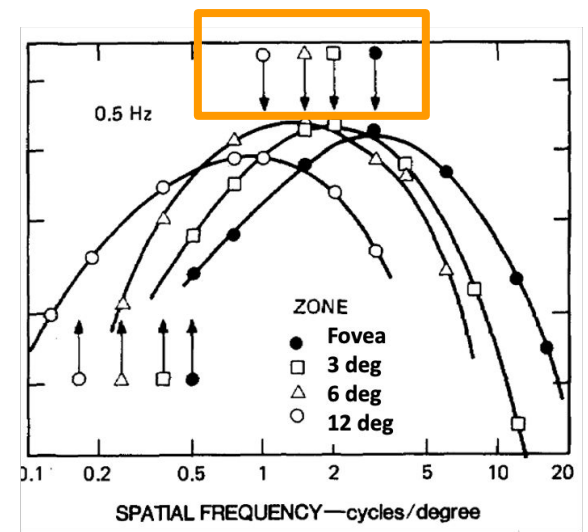
Vision is not uniform in the foveola

Visual performance falls with increasing eccentricity from the preferred retinal locus within the foveola (Rossi & Roorda, 2010; Poletti et al, 2013)



Is the visual field temporally homogeneous?

- Temporal sensitivity is uniform across the visual field *when spatial inhomogeneity is accounted for* (Virsu et al, 1980; Wright & Johnson, 1983; Kelly, 1984; Tyler, 1985)

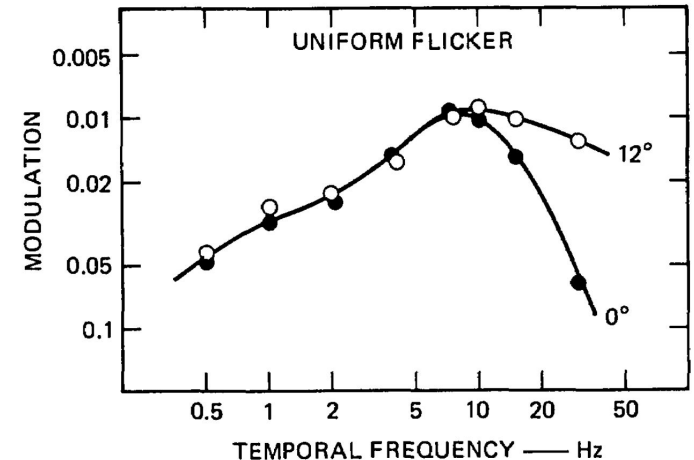
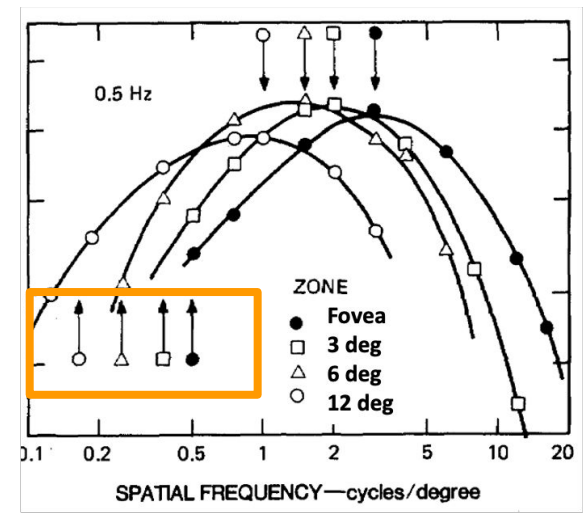


*only Kelly accounts for eye movements

Kelly, 1984

Is the visual field temporally homogeneous?

- Temporal sensitivity is uniform across the visual field *when spatial inhomogeneity is accounted for* (Virsu et al, 1980; Wright & Johnson, 1983; Kelly, 1984; Tyler, 1985)
- At low spatial frequencies, periphery becomes more sensitive to high temporal frequencies (Kelly, 1984; Wright, 1987; Snowden & Hess, 1992; Allen & Hess, 1992)

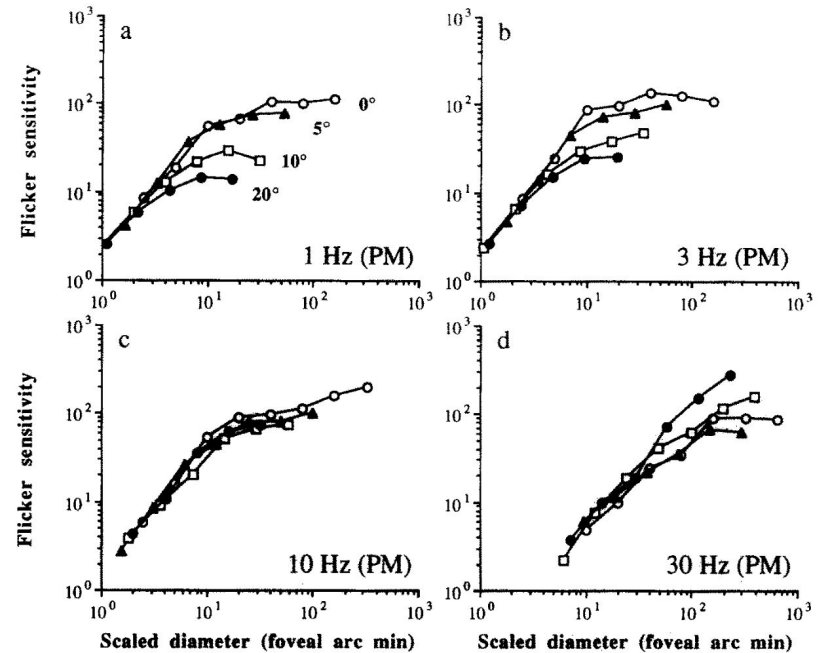


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Is the visual field temporally homogeneous?

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- At low spatial frequencies, periphery becomes more sensitive to high temporal frequencies (Kelly, 1984; Wright, 1987; Snowden & Hess, 1991; Allen & Hess, 1992)
- Fovea is more sensitive to low temporal frequencies with small uniform disk stimuli, and periphery to high (Wright, 1987; Mäkelä et al, 1994; Tyler, 1985)



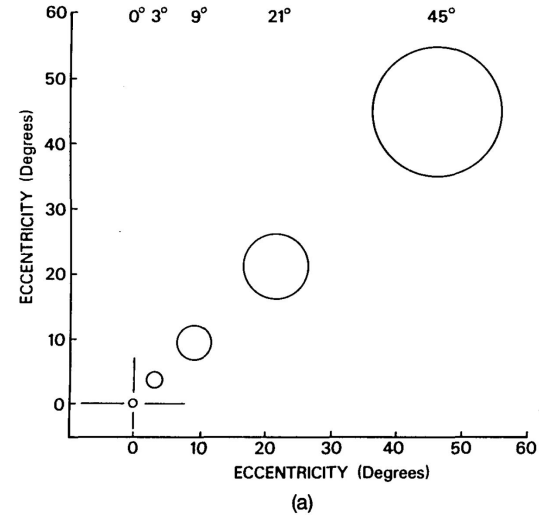
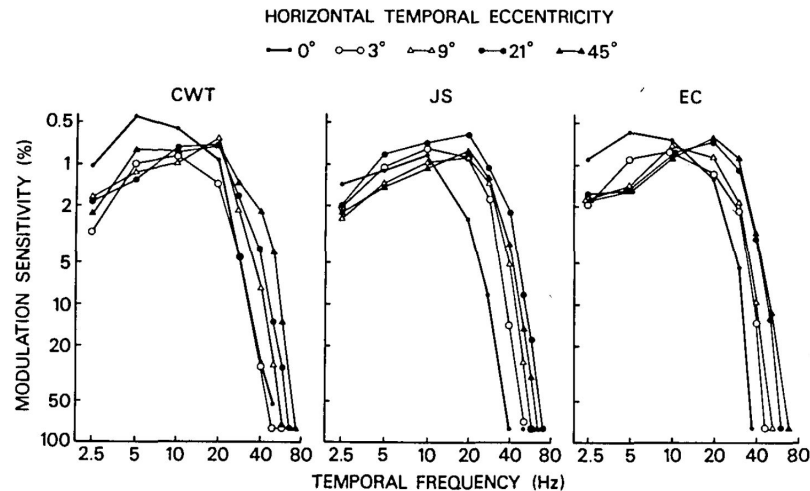
Mäkelä, Rovamu, Whitaker (1994)

*only Kelly accounts for eye movements

Is the visual field temporally homogeneous?

Most studies used large stimuli to probe foveal temporal sensitivity (>1deg diameter).

Tyler (1985) used a smaller stimulus (0.3deg) and found some deviation in foveal temporal sensitivity.



Tyler, 1985

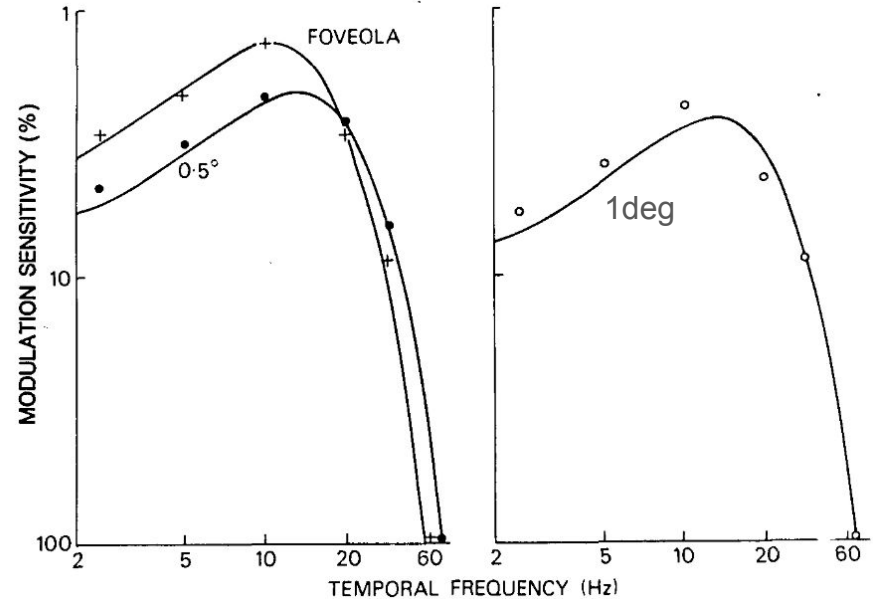
Is the fovea temporally homogeneous?

Temporal sensitivity at different foveal eccentricities:

Stimulus diameter = 0.3 deg

Solid lines are predicted sensitivity

The peak temporal frequency seems to increase with foveal eccentricity.



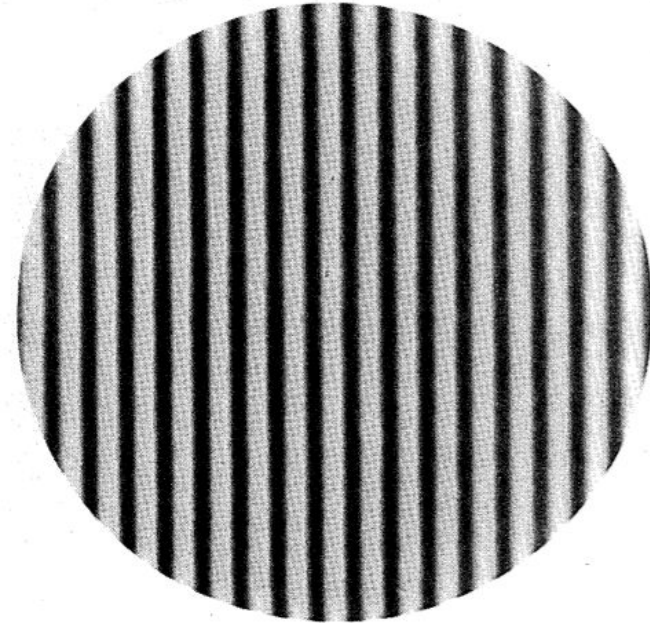
Tyler, 1985

Kelly (1979), I & II: Measuring contrast sensitivity
under retinal stabilization

Contrast sensitivity under stabilization

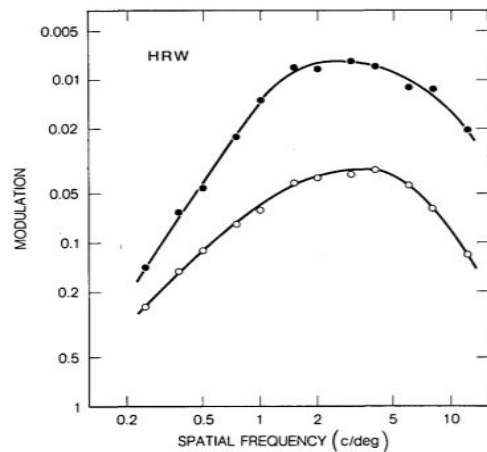
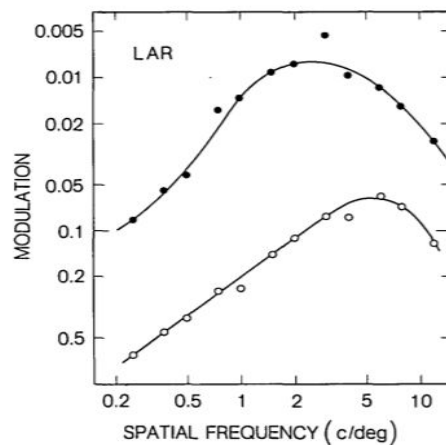
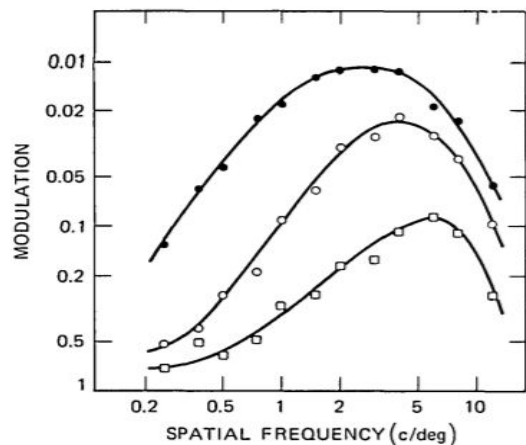
- At 0° eccentricity
- Sinusoidal grating behind 7.5° circular aperture

- Method of adjustment
 - Subjective criterion
 - Steady-state threshold



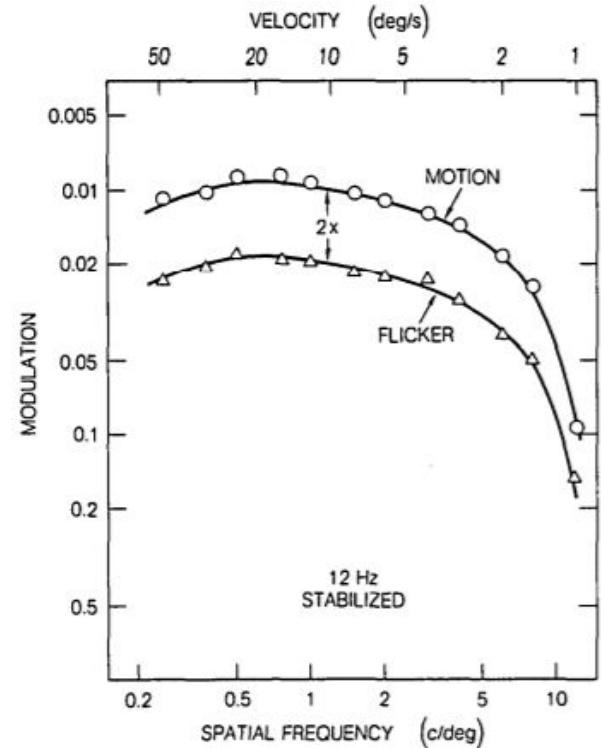
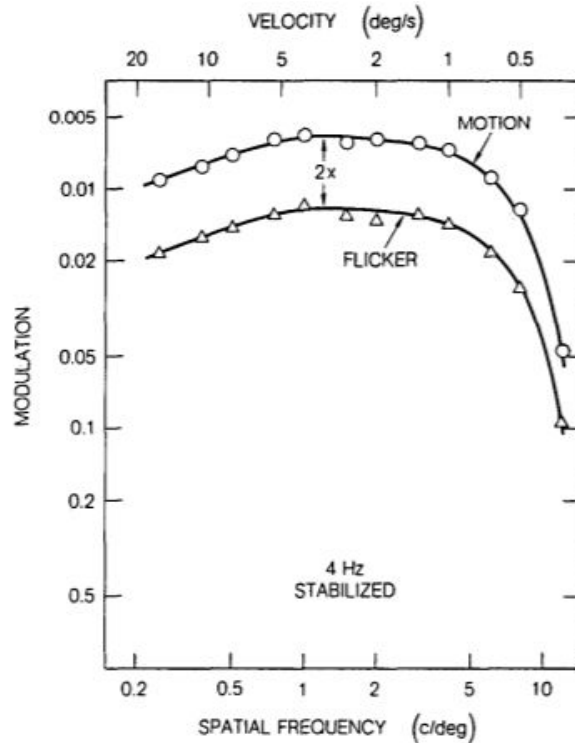
Contrast sensitivity under stabilization

- Stabilization reduces contrast sensitivity at all spatial frequencies
- The better the stabilization technique is, the higher the threshold elevation



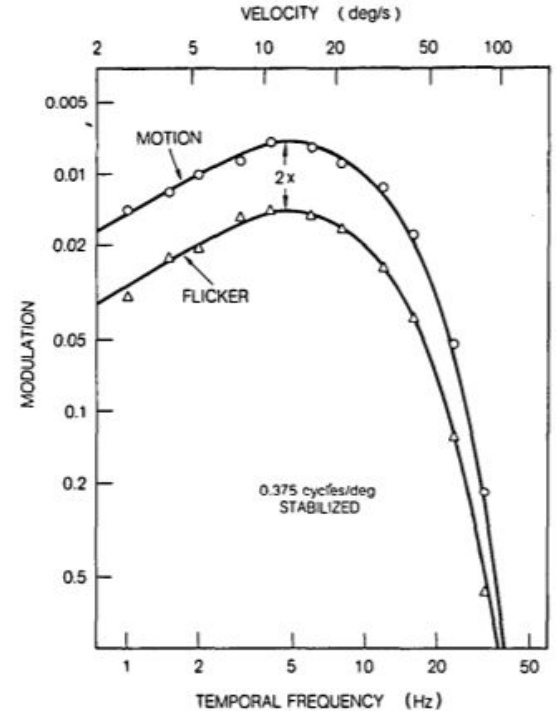
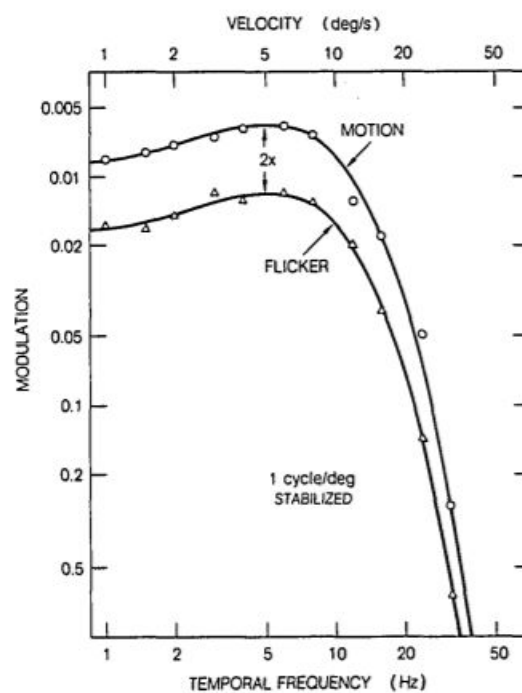
Spatiotemporal contrast sensitivity under stabilization

- Fixed temporal frequencies
- Sensitivity curve becomes more band-pass at high temporal frequency



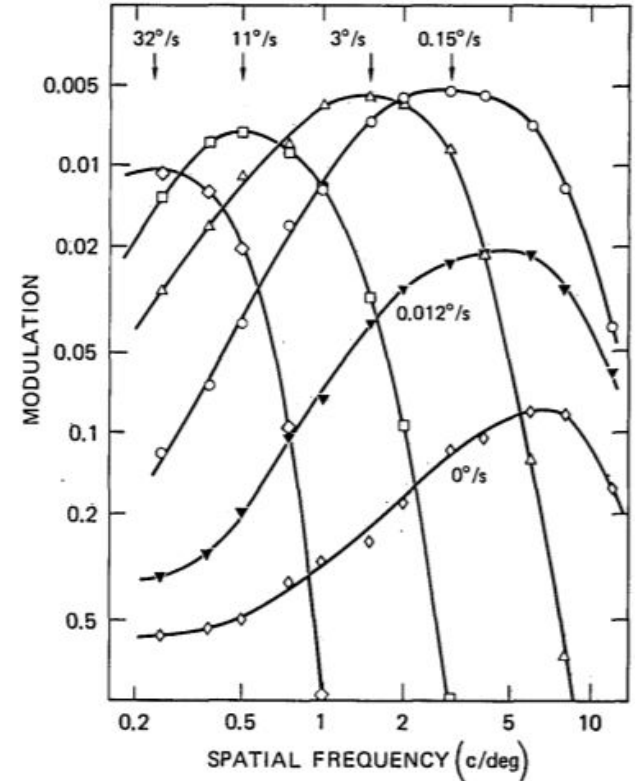
Spatiotemporal contrast sensitivity under stabilization

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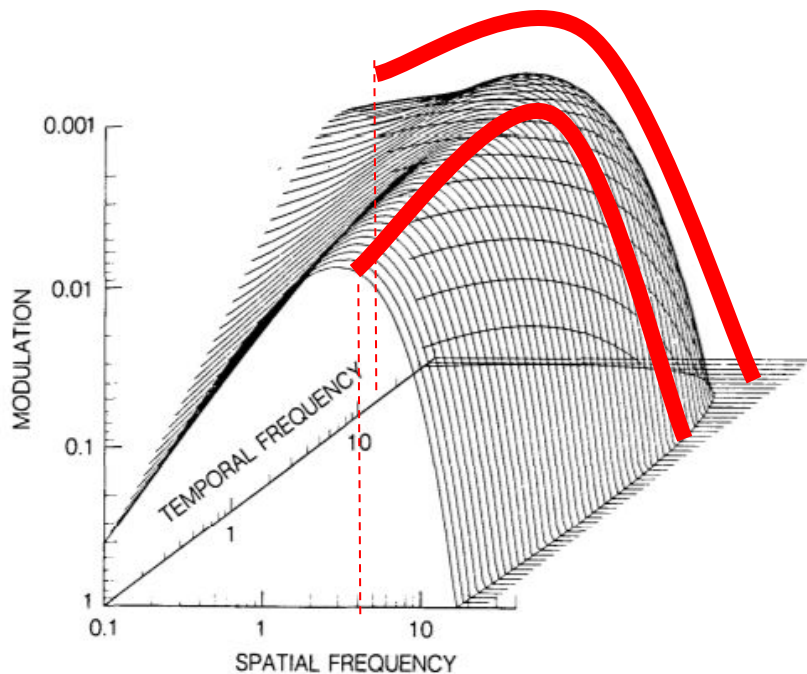
Spatiotemporal contrast sensitivity under stabilization

- High drifting velocities = high temporal frequencies
- Peak spatial frequency becomes lower with increasing velocity.



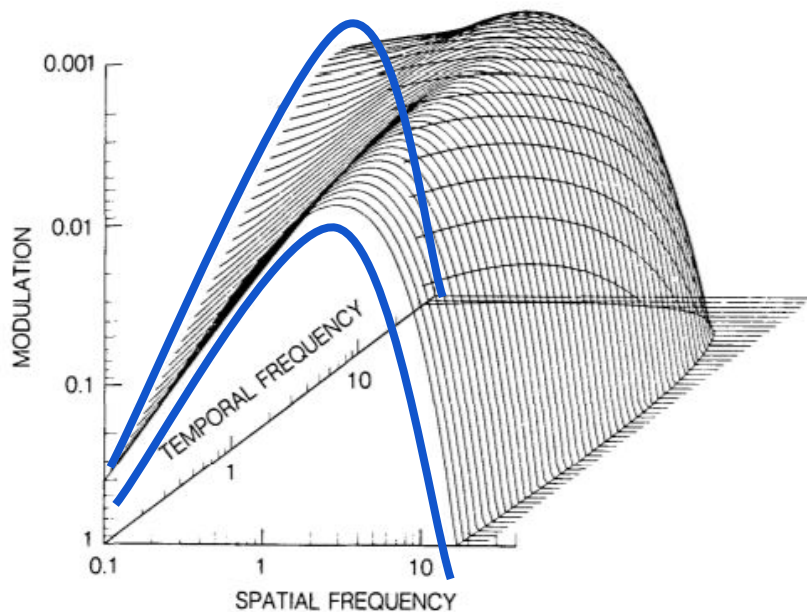
Spatiotemporal sensitivity contour map

- High spatial/temporal frequencies
 - Sensitivity curve is bandpass



Spatiotemporal sensitivity contour map

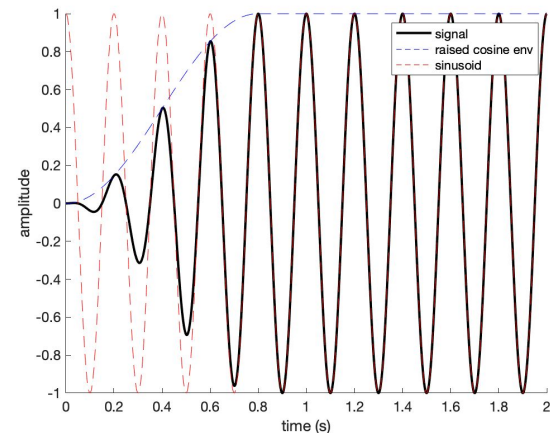
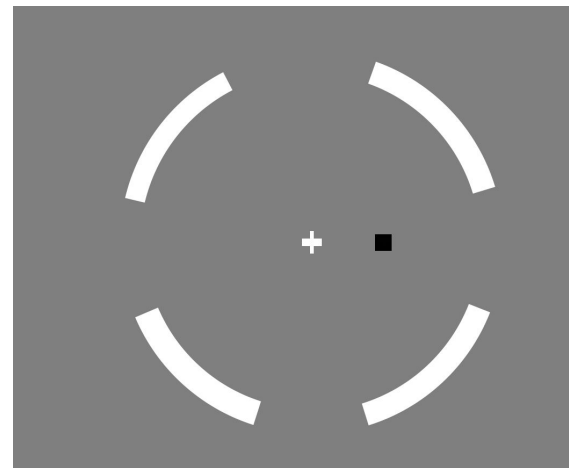
- High spatial/temporal frequencies
 - Sensitivity curve is bandpass
- Low spatial/temporal frequencies
 - Sensitivity curve is high pass



Measuring temporal contrast sensitivity in the fovea

Foveal temporal sensitivity

- Stimulus was a square probe that was sinusoidally modulated in time.
- Foveal eccentricities: [0, 10, 20, 30, 60] arcmin
- Modulation frequencies: [0, 1, 5, 10, 15] Hz
- Probe was stabilized on the retina to maintain retinal eccentricity and minimize other temporal transients
- Fixation aids:
 - Arcs with 2.5deg diameter
 - Cross at center of display was shown only for eccentricity > 10arcmin



Procedure

Method of Adjustment

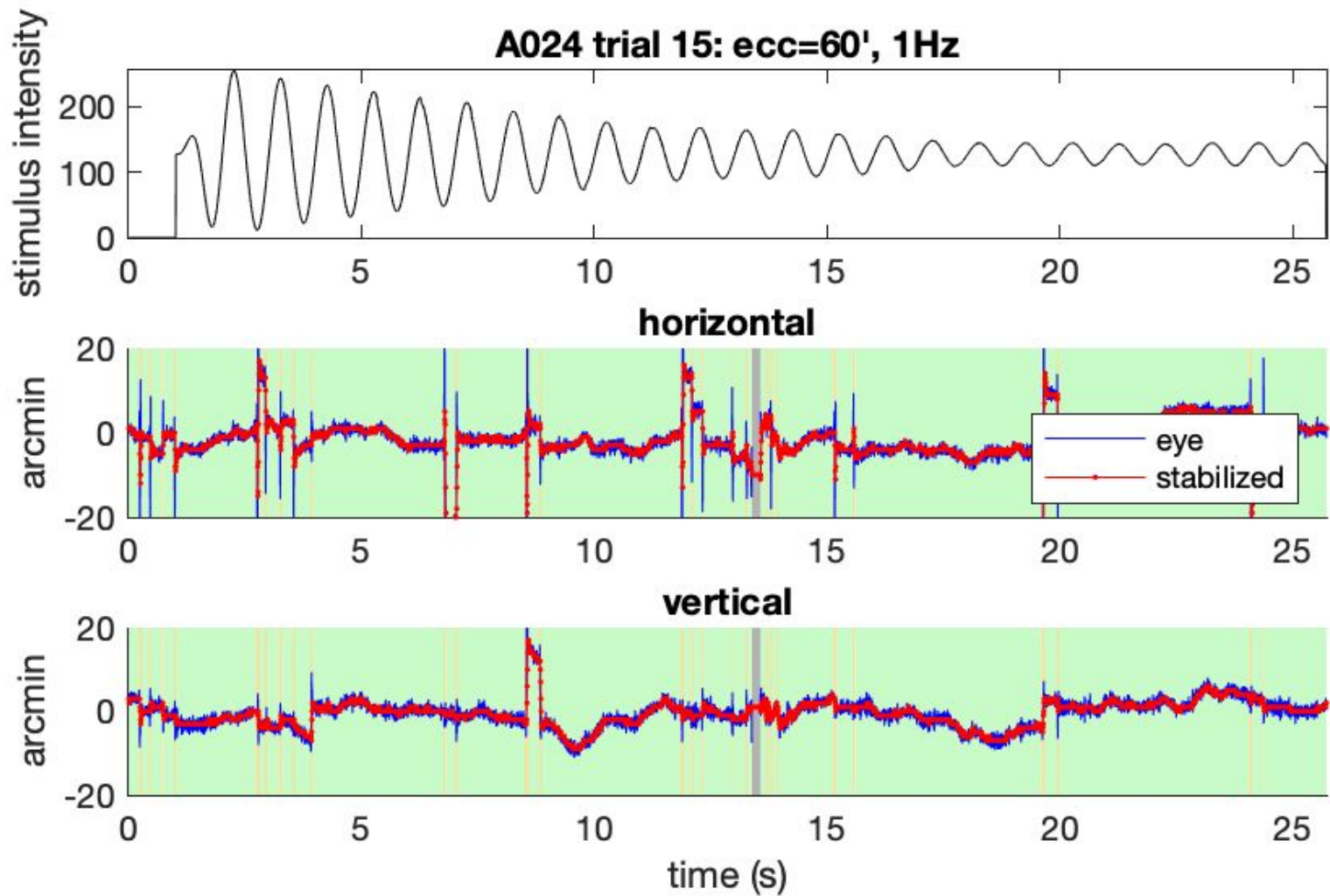
Detection task

Stimulus contrast could start either very low or very high.

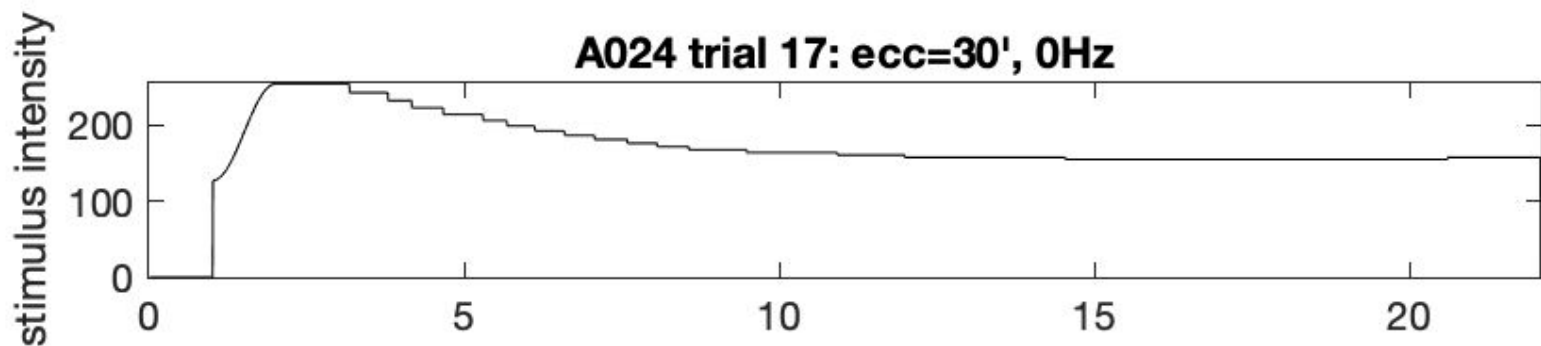
Instructions if stimulus starts high:

If you detect a small square, repeatedly and *slowly* press the DOWN button to decrease its contrast. Stop as soon as you can no longer detect the square. When you are sure you cannot detect the square press UP once. Pause for 2 seconds: If you now notice the square, press R2 to end the trial. Otherwise, continue to press UP until you detect the square, then press R2.

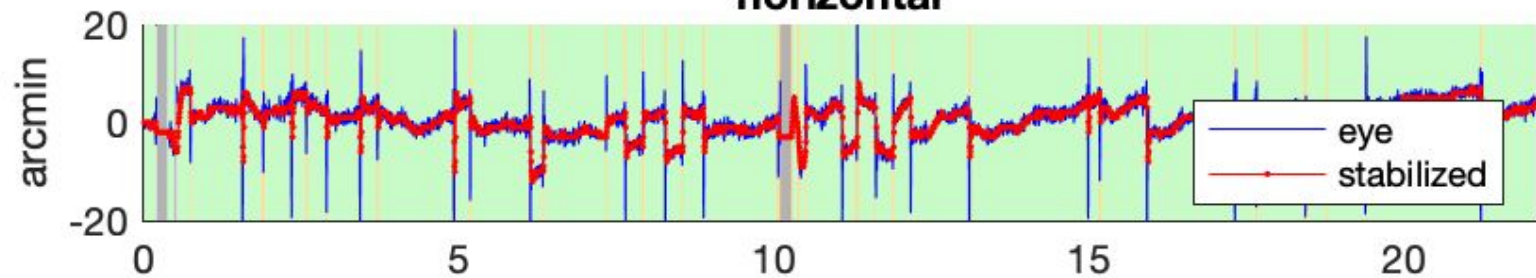
A024 trial 15: ecc=60', 1Hz



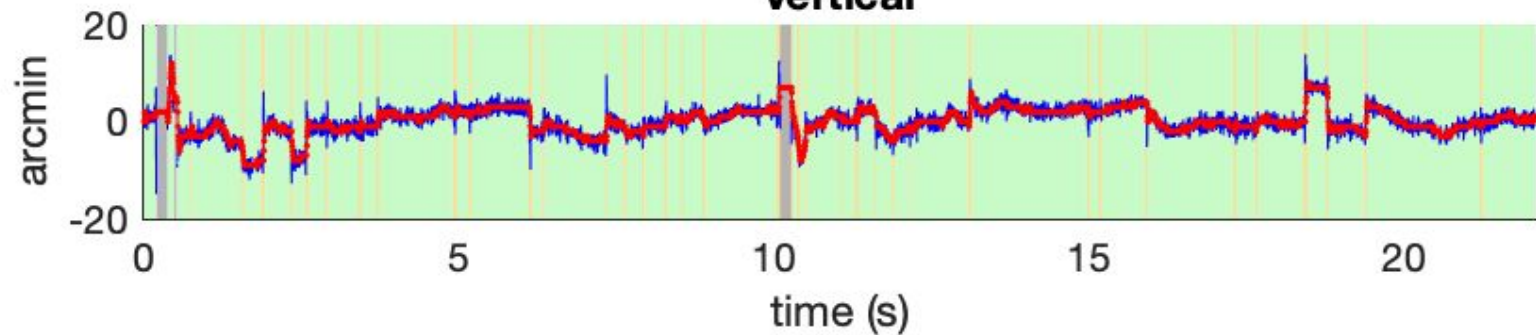
A024 trial 17: ecc=30', 0Hz



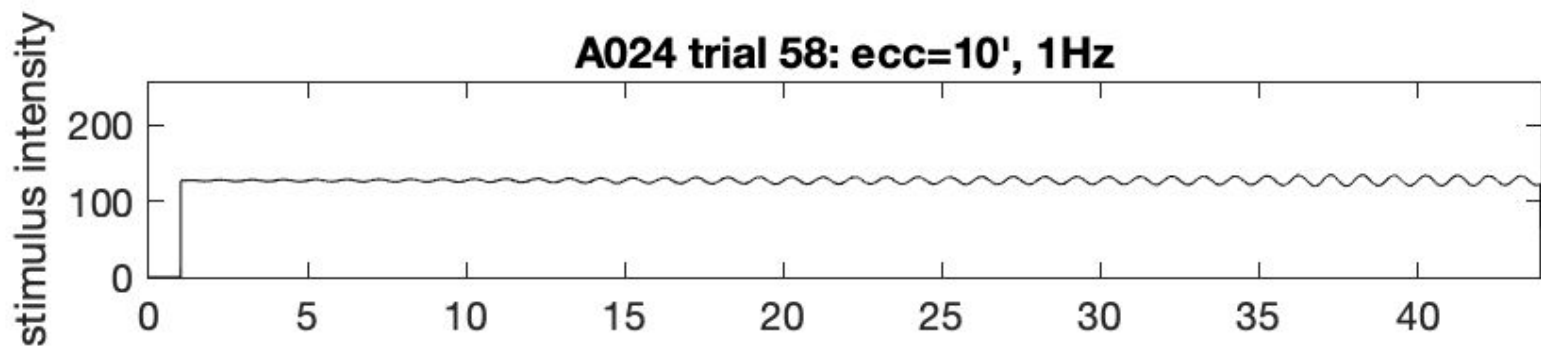
horizontal



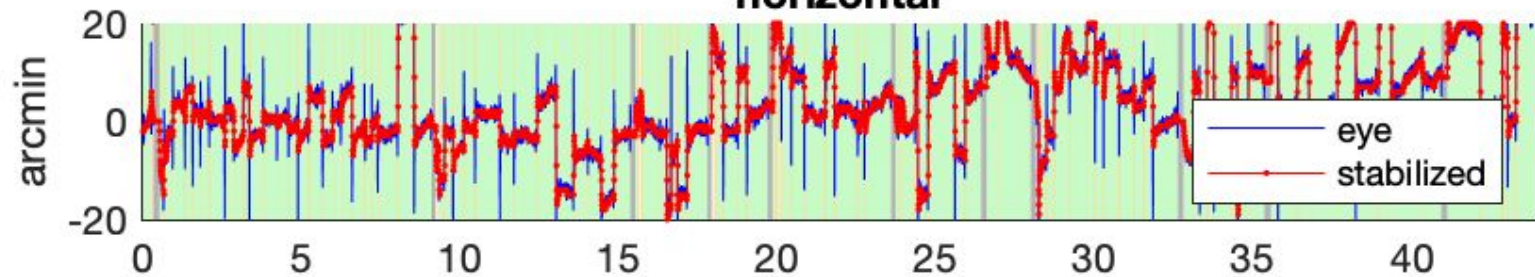
vertical



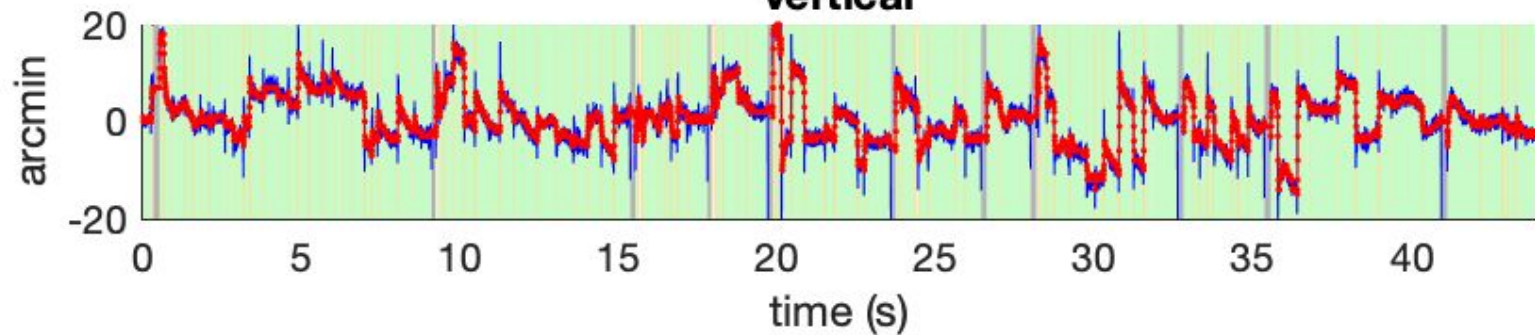
A024 trial 58: ecc=10', 1Hz



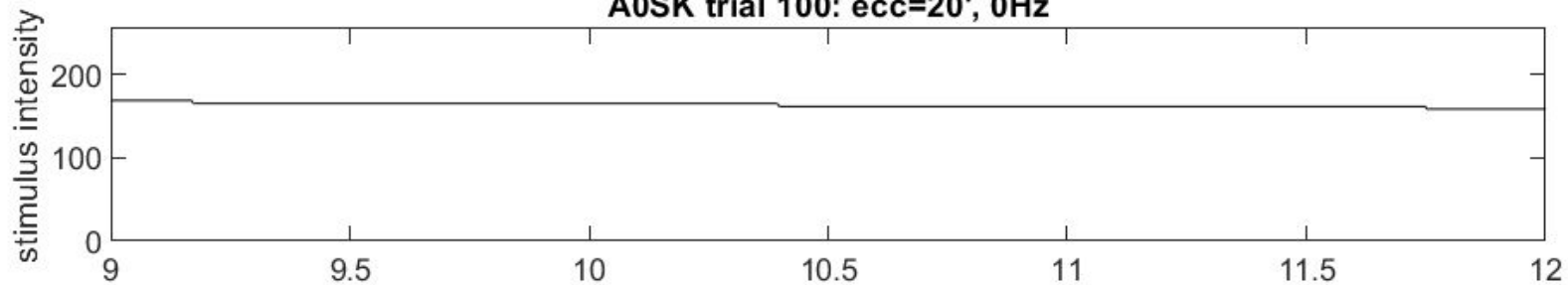
horizontal



vertical



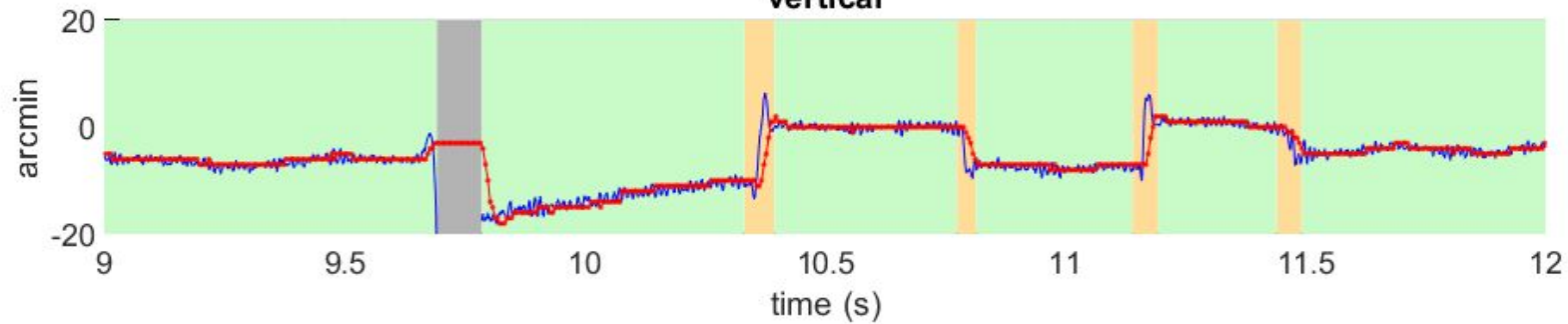
A0SK trial 100: ecc=20', 0Hz



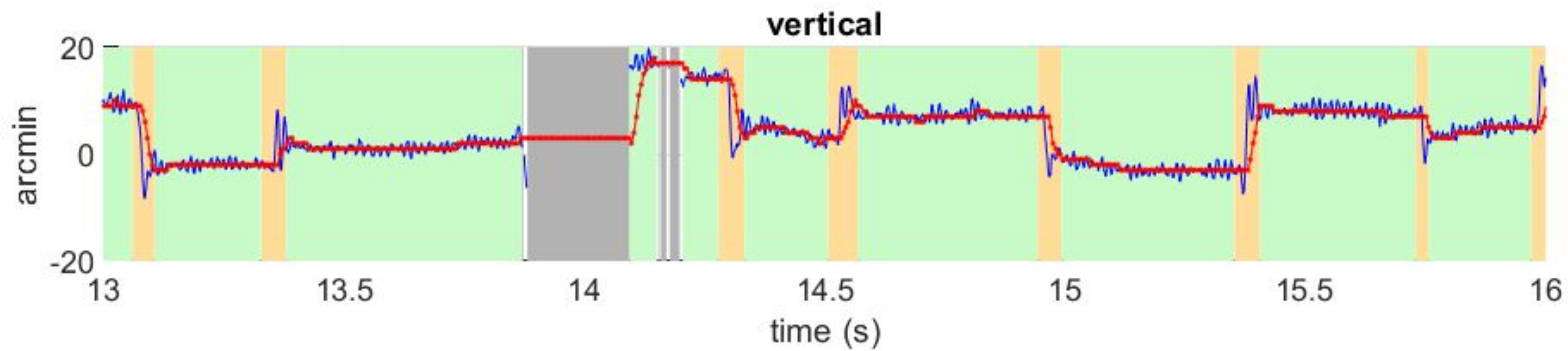
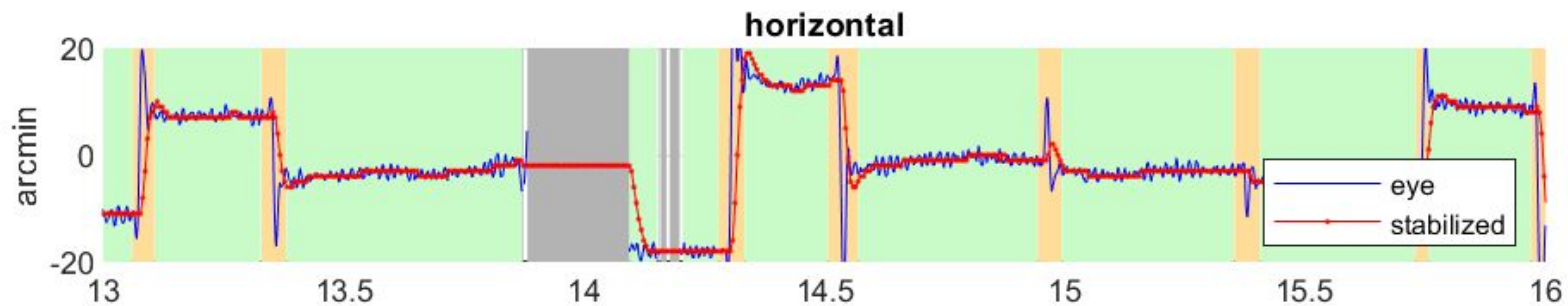
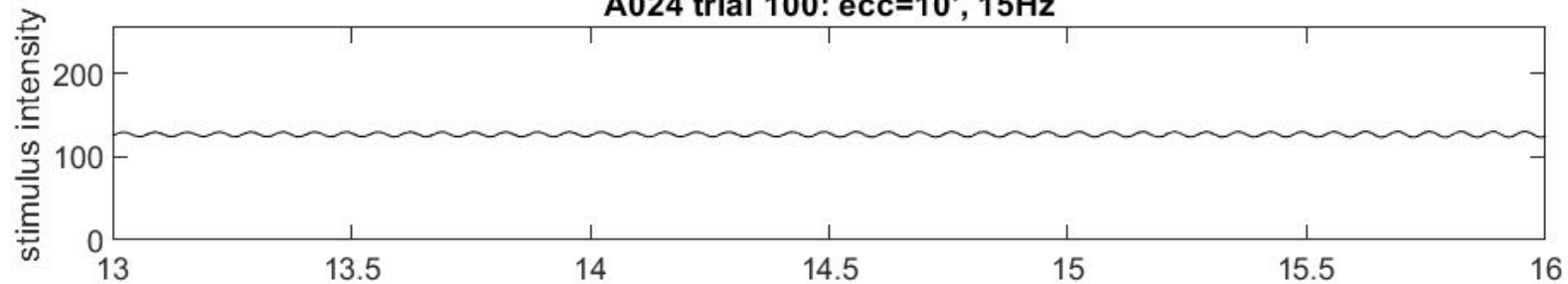
horizontal



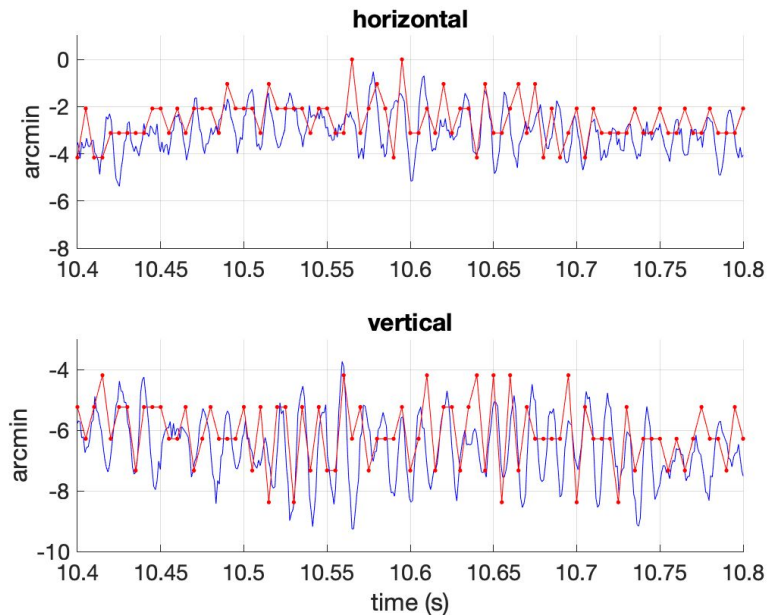
vertical



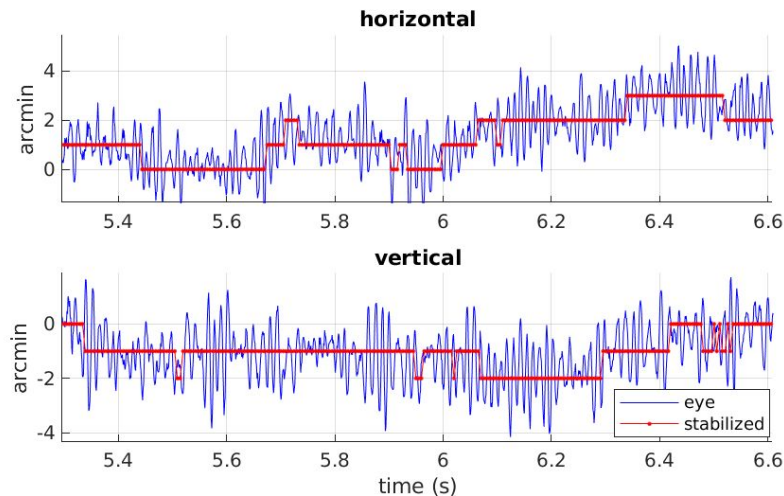
A024 trial 100: ecc=10', 15Hz



Technical Problem: Slow stabilization (solved)



Fast stabilization (note timing between eye and stabilized traces are not correct)



Slow stabilization (30Hz cutoff) applied during both saccades and drift

Caveats: Unsolved technical problems

1. Screen tearing: The stimulus is likely not being rendered at 200Hz so there is an error in retinal stabilization
2. Monitor linearization: We are not sure if EyeRIS is applying the gamma corrections to linearize the luminance of the monitor. The monitor settings *may* have been changing between data collection sessions, but the luminance is linear in the range we are interested in regardless of specific screen setting.
3. Additional transients are introduced by stabilization errors around the times of blinks and saccades.
4. Subjects completed only autocalibration and re-calibrations, not manual calibration.

Data Collection

Probe size = 10 arcmin

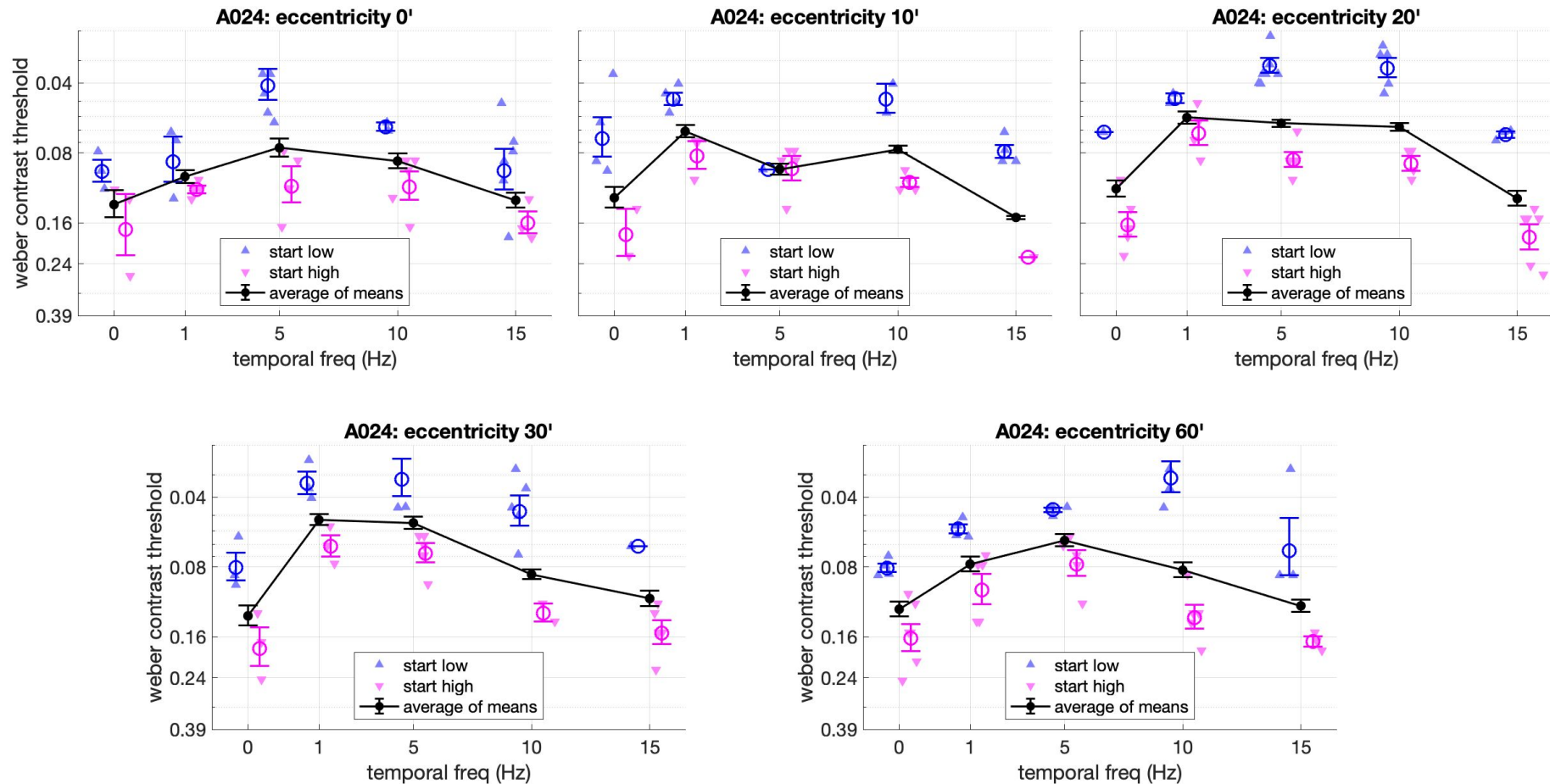
A024					
# sessions = 4					
Total Time = 91.18 minutes					
Total Trials = 214					
Excluded Trials = 20					
Aborted = 12, Bad Fixation = 1, Flagged = 7					
Valid Trial Time = 85.72min, 26.51±9.48s per trial					
	0'	10'	20'	30'	60'
0Hz	6 (3-3)	6 (4-2)	6 (1-5)	6 (3-3)	10 (4-6)
1Hz	7 (3-4)	7 (4-3)	6 (2-4)	6 (3-3)	9 (4-5)
5Hz	10 (6-4)	6 (1-5)	13 (8-5)	9 (4-5)	9 (4-5)
10Hz	7 (2-5)	6 (2-4)	9 (5-4)	7 (5-2)	9 (4-5)
15Hz	9 (6-3)	5 (4-1)	9 (3-6)	6 (1-5)	6 (3-3)

Probe size = 6 arcmin

A0SK					
# sessions = 2					
Total Time = 60.44 minutes					
Total Trials = 125					
Excluded Trials = 18					
Aborted = 3, Bad Fixation = 14, Flagged = 1					
Valid Trial Time = 49.25min, 27.62±10.72s per trial					
	0'	10'	20'	30'	60'
0Hz	4 (3-1)	4 (3-1)	3 (2-1)	5 (2-3)	3 (2-1)
1Hz	4 (3-1)	3 (2-1)	7 (4-3)	4 (1-3)	6 (2-4)
5Hz	3 (1-2)	5 (1-4)	6 (1-5)	3 (1-2)	5 (3-2)
10Hz	4 (1-3)	3 (1-2)	3 (0-3)	3 (1-2)	5 (2-3)
15Hz	4 (2-2)	2 (1-1)	3 (0-3)	10 (6-4)	5 (4-1)

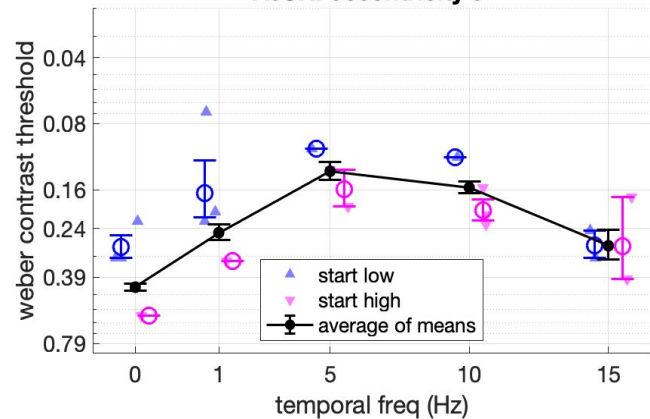
Table 1: Number of valid trials collected in each condition (bold). Numbers in parantheses are the number of trials with low and high initial contrasts respectively. Aborted = trial ended early online. Bad Fixation = gaze left 100arcmin radius. Flagged = trial flagged after visual inspection of data.

A024: Contrast thresholds by eccentricity

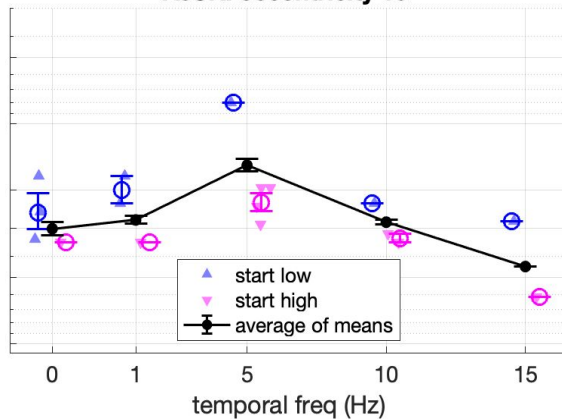


A0SK: Contrast thresholds by eccentricity

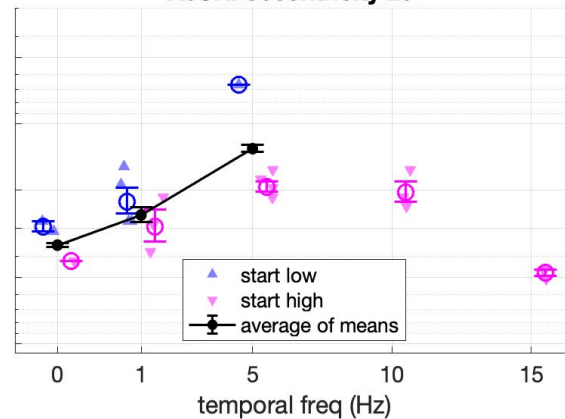
A0SK: eccentricity 0'



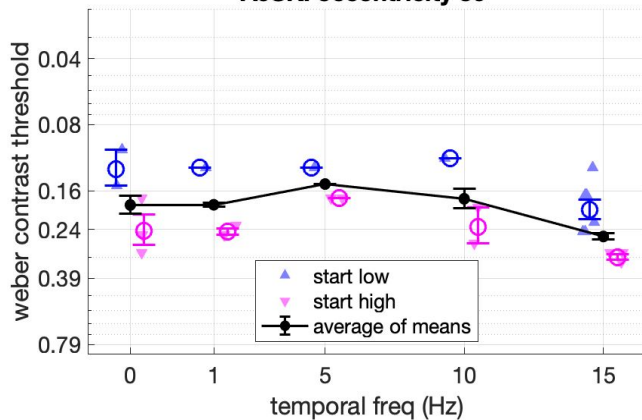
A0SK: eccentricity 10'



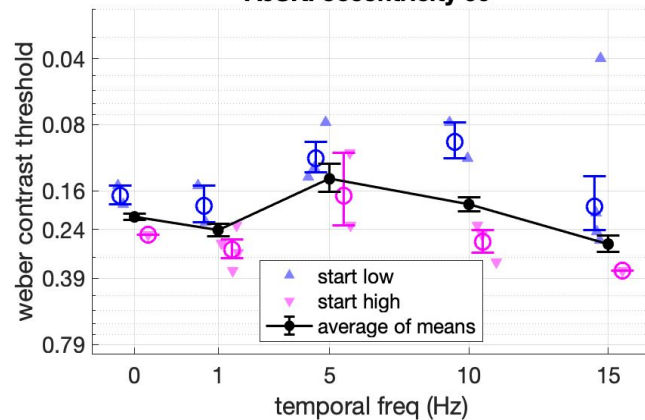
A0SK: eccentricity 20'



A0SK: eccentricity 30'

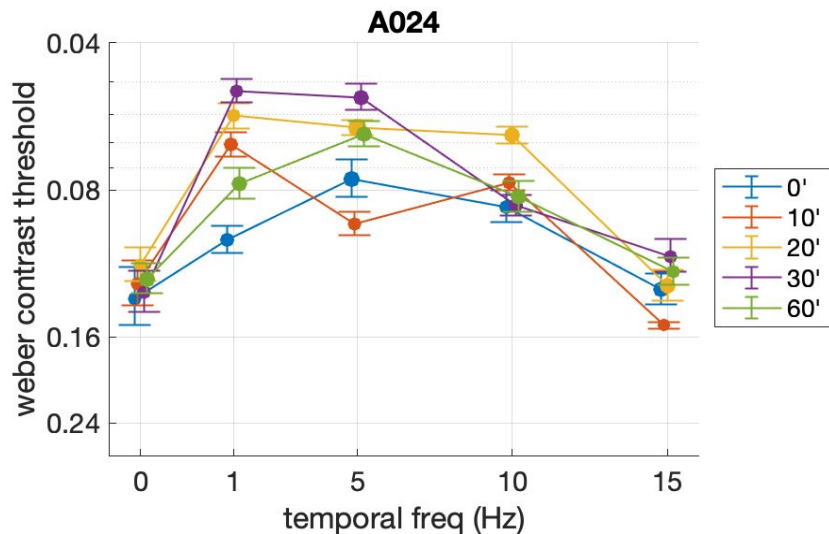


A0SK: eccentricity 60'

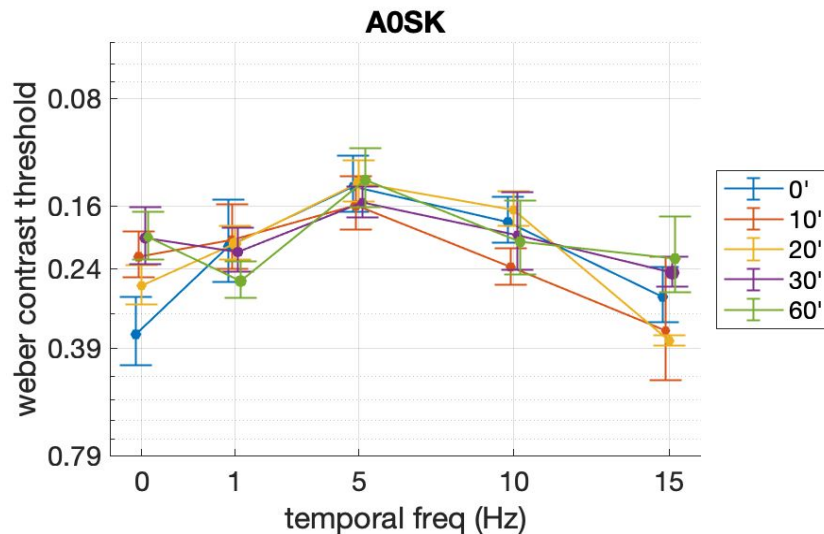


Temporal contrast thresholds

Probe size = 10 arcmin



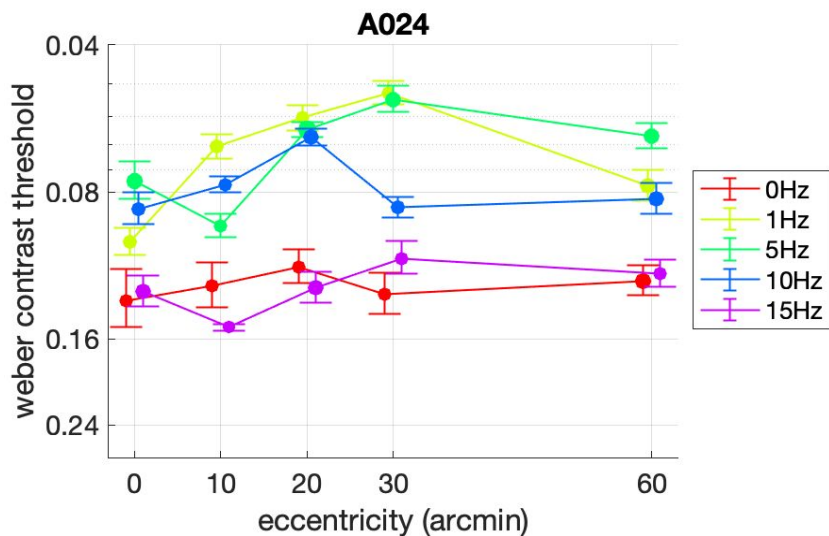
Probe size = 6 arcmin



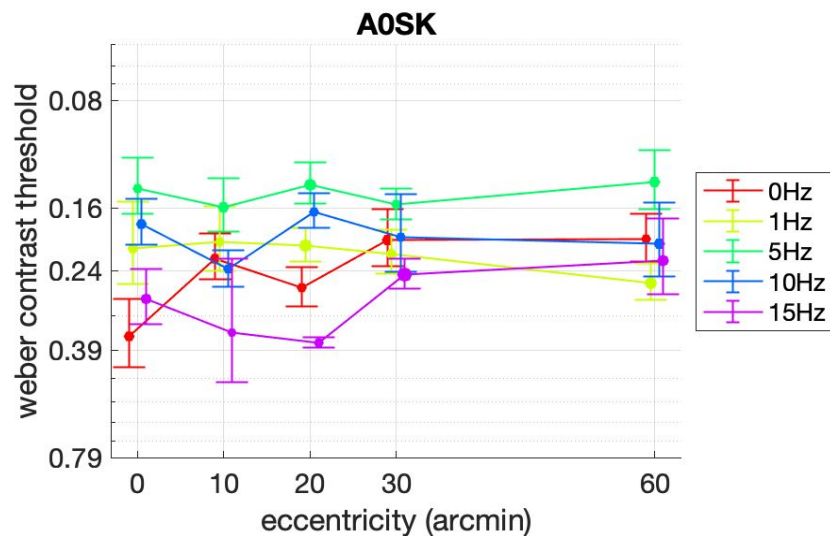
Foveal sensitivity is highest when stimuli are modulated in the range 1-5Hz.

Temporal contrast thresholds

Probe size = 10 arcmin



Probe size = 6 arcmin



There may be an effect of foveal eccentricity on sensitivity: fovea is most sensitive to 1-5 Hz oscillations around 30 arcmin eccentricity.

Summary

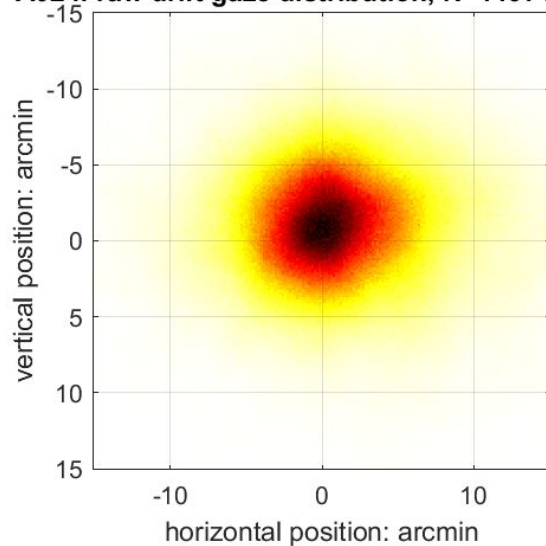
- Foveal contrast sensitivity is highest when stimuli are modulated in the range 1-5Hz.
- Temporal modulations may be more helpful in more eccentric fovea.
-
- How can we improve instructions to better measure “steady-state” sensitivity?

Next Steps:

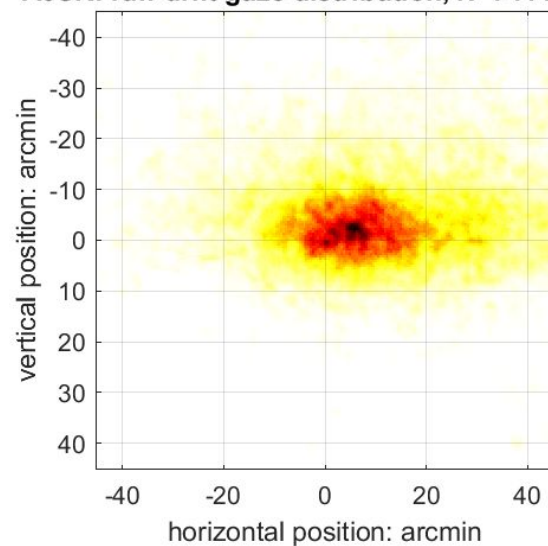
- Confirm pattern of sensitivity with more accurate threshold estimation
- Extend paradigm to spatio-temporal stimulus at larger eccentricities

Eye movement characteristics

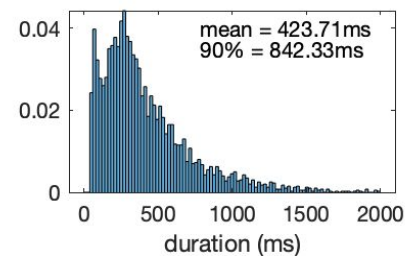
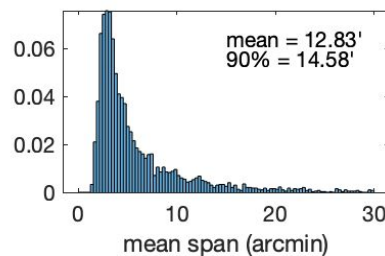
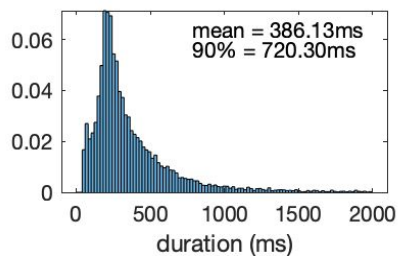
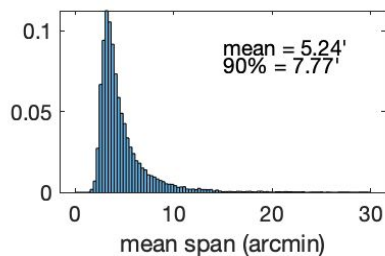
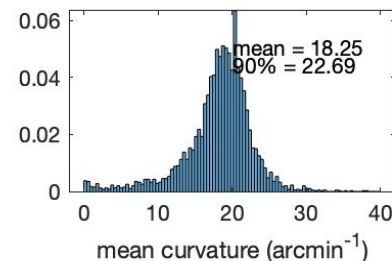
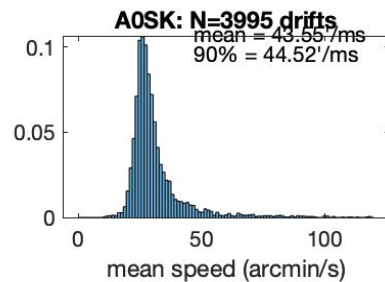
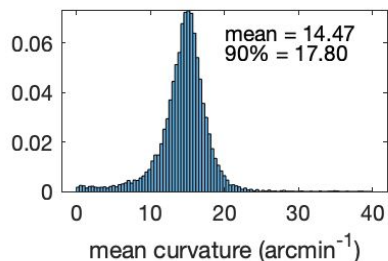
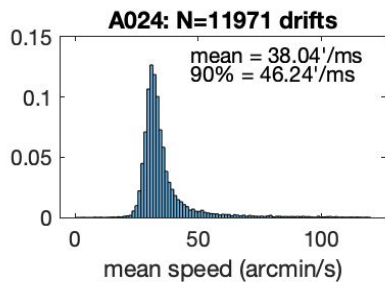
A024: raw drift gaze distribution, N=11971 drifts



A0SK: raw drift gaze distribution, N=7414 drifts

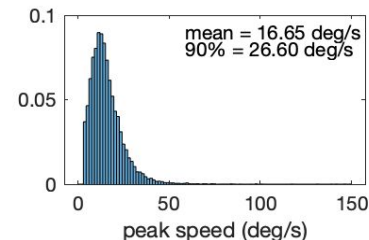
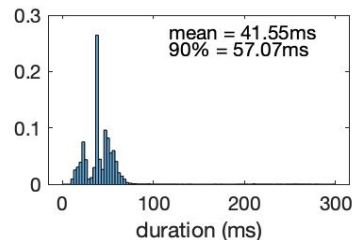
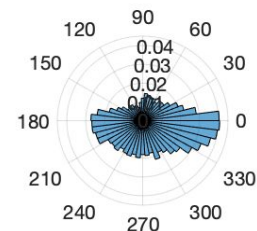
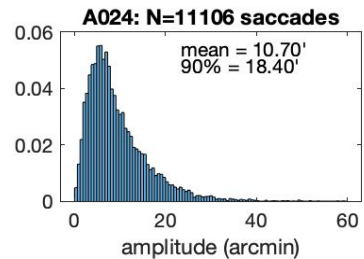
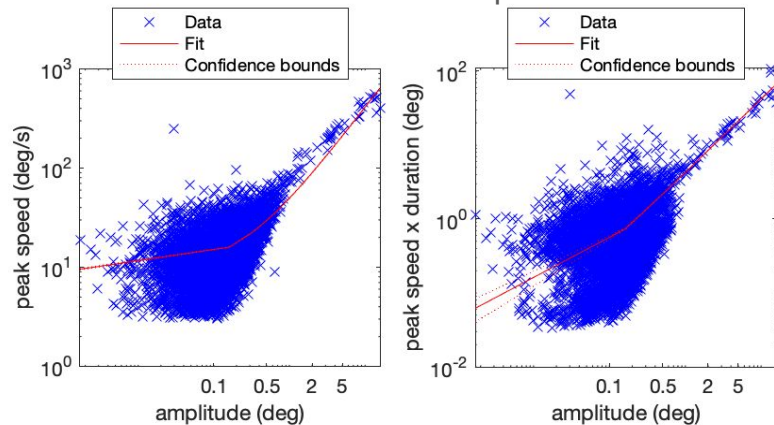


Drift characteristics

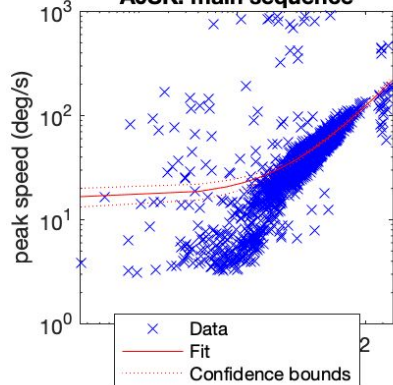


Saccades

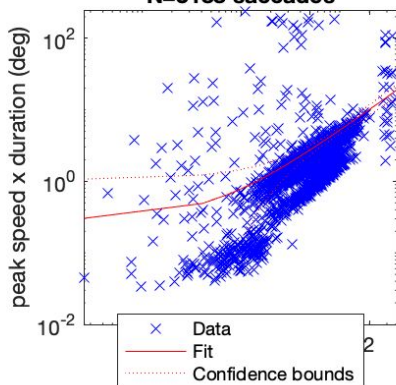
A024: main sequence



AOSK: main sequence



N=3188 saccades



AOSK: N=3188 saccades

