

#### INTRODUCTION

- Adults have superior timing for low vs. high pitches, in both  $\bullet$ behaviour (tapping) and brain responses (mismatch response, or MMR)[1]
- We do not know whether this timing bias for low pitch develops in early life or is present in infancy
- Here, we assess mismatch responses in 7-month-olds using electroencephalography (EEG)

#### **RESEARCH QUESTIONS**

**Do 7-month-olds' mismatch responses** (MMRs) reveal a superior timing bias for low vs. high pitches, as found in adults?

#### METHODS



- 12 infants (7 males, 5 females, mean age = 7.5m, range =7.1m-8.0m), data collection ongoing (toward n = 30)
- Recorded with 124-channel HydroCel GSN nets at a sampling rate of 1,000 Hz using a CZ reference.
- Two synthesized piano tones of 196.0 Hz (G3) and 466.2 Hz (B-flat4) were presented at 600ms (adapted from [1])
- Tones were presented simultaneously (standard), or with either the high or low tone 50ms early (deviant).
- **Condition 1:** only deviant trials (50% high tone early, 50%) low tone early) (high/low early standard) **Condition 2**: simultaneous standards (80%) and deviants (10% high tone early, 10% low tone early) (high/low early deviant). Fig.1



# Infant Neural Responses to Timing-Deviations in High and Low Tones

## **Ciara Ritchie, Daniel J. Cameron & Laurel J. Trainor**

Dept. Psychology, Neuroscience and Behaviour, McMaster University, Canada

#### **PREPROCESSING AND ANALYSIS**

- Used fieldtrip toolbox in MATLAB [2]
- Butterworth highpass and lowpass filters (0.5 and 20Hz), processed through the Artifact Blocking algorithm. [3]
- Bad channels were rejected by visual inspection and interpolated from neighbouring channels.
- Data segmented -100ms to 500ms
- Expected and unexpected low tone and high tone deviants were averaged separately for each participant.
- Averaged channels were baselined using the average amplitude -100ms 0ms
- The difference between expected and unexpected make up the respective high and low tone Mismatch Responses (MMR).

#### PRELIMINARY RESULTS



- Fig.2 Averaged response to simultaneous standards, presented at 0 ms
- Fig.3 Averaged response to high early early deviants (unpredictable deviants)
- Fig.4 Averaged response to low early deviants (unpredictable deviants)
- Larger responses are demonstrated for



**References** 

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standards (predictable deviants) and low early

unexpected high and low deviants, compared to their corresponding expected deviant tone.





### DISCUSSION

- and low-pitch deviants elicited a faster-peak MMR.
- bias for low pitch may develop over childhood.
- Previous work found a high-pitch bias in infant MMRs for pitch-based than adult-directed speech [5].
- human brain processes music and timing throughout development.



### PRELIMINARY RESULTS

- Fig 5. Difference waves (MMR) for early standards vs early deviants (high vs low).
- Preliminary results suggest the MMR for high pitch deviants has a greater peak amplitude and MMR for low pitch deviants has a faster peak
- Fig 6.,7. Topographic maps representing MMR amplitude for the high-early (L) and low-early (R) deviant-standard difference waves. Red circles represent channels used for Fig 2-5



Preliminary (n = 12) results suggest differing infant MMR for high and low pitch timing deviants: high-pitch deviants elicited a greater amplitude MMR

If this result is ultimately reliable, it would differ from results found in adults: low tones elicited a stronger MMR, together suggesting that the superior timing

deviants. Together with our current data, this could suggest a general high-pitch bias in infancy [4], consistent with infant-directed speech using higher pitch

Knowledge about how infants process frequencies may provide insight into early language acquisition, attention, parent-infant interactions, and how the