

1 **Causal relationship between the right auditory cortex and speech-**
2 **evoked frequency-following response: Evidence from combined**
3 **tDCS and EEG**

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9 **Abbreviated title:** Causal relation between auditory cortex and FFR

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25 **Abstract**

26 Speech-evoked frequency-following response (FFR) reflects the neural encoding of speech
27 periodic information in the human auditory systems. FFR is of fundamental importance for
28 pitch and speech perception and serves as clinical biomarkers for various auditory and
29 language disorders. While it is suggested that the main neural source of FFR is in the auditory
30 brainstem, recent studies have shown a cortical contribution to FFR predominantly in the right
31 hemisphere. However, it is still unclear whether auditory cortex and FFR are causally related.
32 The aim of this study was to establish this causal relationship using a combination of
33 transcranial direct current stimulation (tDCS) and scalp-recorded electroencephalography
34 (EEG). We applied tDCS over the left and right auditory cortices in right-handed normal-
35 hearing participants and examined the after-effects of tDCS on FFR using EEG during
36 monaural listening to a repeatedly-presented speech syllable. Our results showed that: (1)
37 before tDCS was applied, participants had greater FFR magnitude when they listened to speech
38 from the left than the right ear, illustrating right-lateralized hemispheric asymmetry for FFR;
39 (2) anodal and cathodal tDCS applied over the right, but not left, auditory cortex significantly
40 changed FFR magnitudes compared to the sham stimulation; specifically, such after-effects
41 occurred only when participants listened to speech from the left ear, emphasizing the right
42 auditory cortical contributions along the contralateral pathway. The current finding thus
43 provides the first causal evidence that validates the relationship between the right auditory
44 cortex and speech-evoked FFR and should significantly extend our understanding of speech
45 encoding in the brain.

46

47 **Significance Statement**

48 Speech-evoked frequency-following response (FFR) is a neural activity that reflects the brain's
49 encoding of speech periodic features. The FFR has great fundamental and clinical importance
50 for auditory processing. Whilst convention maintains that FFR derives mainly from the
51 brainstem, it has been argued recently that there are additional contributions to FFR from the
52 auditory cortex. Using a combination of tDCS, that altered neural excitability of auditory
53 cortices, and EEG recording, the present study provided the first evidence to validate a causal
54 relationship between the right auditory cortex and speech-evoked FFR. The finding supports
55 the right-asymmetric auditory cortical contributions to processing of speech periodicity and

56 advances our understanding of how speech signals are encoded and analysed along the central
57 auditory pathways.

58

59 **Introduction**

60 Speech-evoked frequency-following response (FFR) is a phase-locked neural activity
61 that reflects early processing of periodic features of input speech signals in the human brain
62 ([Picton and Aiken, 2008](#); [Coffey et al., 2019](#)).

63 The FFR is closely related to fundamental auditory processes. For instance, it plays an
64 important role in pitch perception. FFR reflects the neural fidelity of linguistic pitch and is
65 stronger in tonal language than non-tonal language speakers ([Krishnan et al., 2004, 2005,](#)
66 [2009](#)). It has greater strength in musicians who have better pitch discrimination ability than
67 people without musical training ([Musacchia et al., 2007](#); [Wong et al., 2007](#); [Strait et al., 2009](#);
68 [Bidelman et al., 2011](#)). Furthermore, FFR is important for speech-in-noise perception. Greater
69 FFR magnitudes are associated with better speech recognition ability in noisy environments
70 ([Song et al., 2011](#); [Parbery-Clark et al., 2011](#)). FFR also reflects neural plasticity related to
71 fundamental cognitive and physiological processes such as auditory learning ([Skoe et al.,](#)
72 [2014](#)), changes in arousal ([Mai et al., 2019](#)) and attention ([Lehmann and Schönwiesner, 2014](#);
73 [Hartmann and Weisz, 2019](#)).

74 Clinically, FFR is proposed as a biomarker for various auditory and language disorders.
75 FFR declines with age ([Anderson et al., 2012](#); [Presacco et al., 2016](#)) and can predict word
76 recognition ability during speech-in-noise perception in older adults ([Anderson et al., 2011](#);
77 [Fujihira and Shiraishi, 2015](#); [Mai et al., 2018](#)). This indicates that degradations to FFR could
78 potentially explain the increased speech-in-noise difficulty experienced during aging. FFRs are
79 also associated with hearing deficits such as cochlear synaptopathy ([Encina-Llamas et al.,](#)
80 [2019](#)) and auditory processing disorders ([Schochat et al., 2017](#)). Furthermore, FFR is a
81 potential marker for detecting functional impairments in learning and cognitive disorders in
82 children, such as learning difficulties in literacy ([Cunningham et al., 2001](#); [Banai et al., 2007](#);
83 [White-Schwoch et al., 2015](#)), dyslexia ([Hornickel et al., 2013](#)) and autism ([Russo et al., 2008](#)).

84 It is argued that the fundamental and clinical importance of FFR is linked to the neural
85 fidelity of speech in the inferior colliculus at the brainstem, which has been proposed as the

86 main neural origin of FFR ([Chandrasekaran and Kraus, 2010](#); [Bidelman, 2015, 2018](#)). Recent
87 studies, however, have shown an additional source of FFR in the right auditory cortex
88 associated with musical experience, pitch discrimination ability ([Coffey et al., 2016](#)), speech-
89 in-noise perception ([Coffey et al., 2017a](#)) and intermodal attention ([Hartmann and Weisz,](#)
90 [2019](#)). FFR strength is associated with right-lateralized hemodynamic activity in the auditory
91 cortex ([Coffey et al., 2017b](#)), consistent with the relative specialization of right auditory cortex
92 for pitch and tonal processing ([Zatorre and Berlin, 2001](#); [Patterson et al., 2002](#); [Hyde et al.,](#)
93 [2008](#); [Albouy et al., 2013](#); [Cha et al., 2016](#)).

94 Despite findings that show the potential cortical contribution to FFRs, it is unclear
95 whether the relationship between auditory cortex and FFR is causal. The aim of the present
96 study was to determine such relationship. Here, transcranial direct current stimulation (tDCS)
97 was applied to alter neural excitability in the left and right auditory cortices. We examined the
98 after-effects of tDCS on speech-evoked FFR using electroencephalography (EEG). tDCS is a
99 non-invasive neuro-stimulation that modulates cortical excitability ([Jacobson et al., 2012](#)). By
100 applying direct currents over the scalp, tDCS leads to neural excitation or inhibition in
101 proximal parts of the cortex that last for up to 90 minutes post-stimulation ([Nitsche and Paulus,](#)
102 [2001](#)). Previous studies showed that applying tDCS over the right, compared to the left,
103 auditory cortex can significantly change pitch discrimination performances, supporting the
104 causal role of the right auditory cortex for pitch perception ([Mathys et al., 2010](#); [Matsushita et](#)
105 [al., 2015](#)). However, such causality has not been established for neurophysiological signatures
106 like FFR. The present study tested the hypothesis that tDCS over the right auditory cortex
107 should change the FFR strength during monaural listening to speech syllables. We further
108 predicted that such after-effects should occur particularly along the contralateral auditory
109 pathway where participants listen to speech from the left ear.

110

111 **Materials and Methods**

112 **Participants**

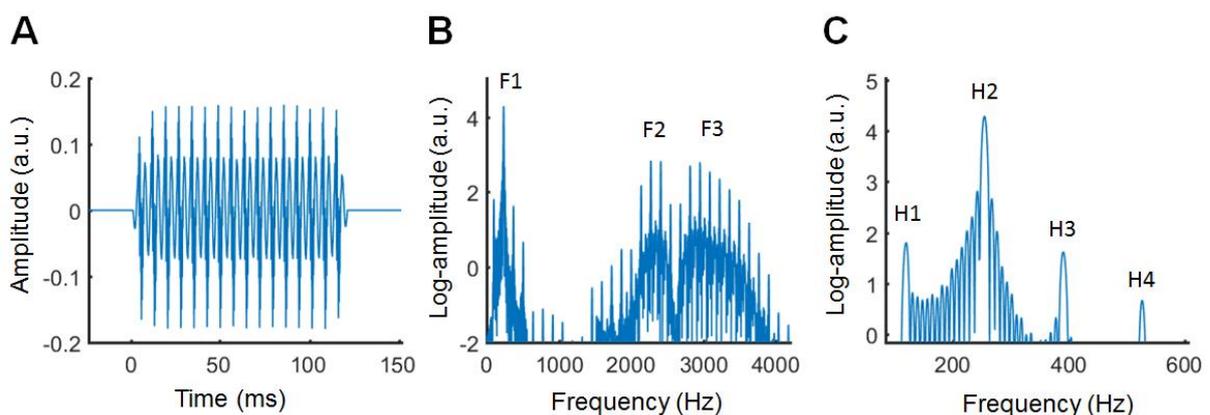
113 Ninety participants (18-40 years old; 45 females) were recruited and completed the entire
114 experiment. Two other participants dropped out during the tDCS phase because they felt
115 uncomfortable with the skin sensation when stimulation was applied. All participants had
116 normal hearing (pure-tone audiometric thresholds <25 dB HL within frequency range of 0.25–

117 6 kHz for both ears) tested using a MAICO MA41 Audiometer (MAICO Diagnostics,
118 Germany). Participants were non-tonal language speakers, had no long-term musical training
119 and reported no history of neurological or speech/language disorders. They had not participated
120 in any brain stimulation experiments in the two weeks prior to the present experiment.

121 All participants were right-handed (Handedness Index (HI) > 40; Oldfield, 1971). They
122 were assigned at random to one of five groups, each of which received different types of tDCS
123 (detailed in *Experimental design*). HI did not differ significantly between the five groups (all p
124 > 0.4, uncorrected), indicating that the degree of handedness was well-matched across
125 stimulation types. The absence of HI differences across groups is important because it has been
126 argued that handedness influences functional hemispheric specialization (Carey et al., 2014;
127 Willems et al., 2014). Hence matching the HI across groups ensured that any effects of tDCS
128 were not confounded by handedness.

129 Syllable stimulus for the FFR recording

130 A 120-ms-long syllable /i/ spoken by a male with a static fundamental frequency (F_0) at
131 136 Hz was used for the FFR recordings. The waveform and spectrum of the syllable are
132 shown as **Figure 1**. The syllable has three formants (F1, F2 and F3 at ~280, 2400 and 3100 Hz,
133 respectively). It has a stable amplitude profile across the syllable period except for the 5-ms
134 rising and falling cosine ramps applied at the onset and offset to avoid transients.



135 **Figure 1. The syllable stimulus for FFR recordings.** (A) Temporal waveform of the syllable
136 /i/. (B) Spectrum of the syllable (0–4000 Hz) showing the formant locations (F1, F2 and F3).
137 (C) The same spectrum as (B) that shows the first four harmonics with F_0 at 136 Hz. *N.B.*, the
138 spectrum was obtained via Fast Fourier Transform (FFT) after zero-padding the temporal
139 waveform to 1 second.
140

141 **Experimental design**

142 The experimental procedure is summarized in **Figure 2**. FFRs were recorded pre- and
143 post-tDCS during monaural listening to the syllable stimulus to test for any after-effects of
144 tDCS.

145 ***FFR recording***

146 EEG were recorded over participants' scalps using an ActiveTwo system (Biosemi
147 ActiView, The Netherlands) with sampling rate of 16,384 Hz whilst they listened to the
148 repeatedly-presented syllable /i/ (see *Syllable stimulus for the FFR recording*) both pre- and
149 post-tDCS. The recording site was at the vertex (Cz) localized using a standard Biosemi cap,
150 which is the conventional site used for obtaining FFRs ([Skoe and Kraus, 2010](#)). Bilateral
151 earlobes served as the reference and ground electrodes were CMS and DRL at the parieto-
152 occipital sites. Electrode impedance was kept below 35 mV. The syllable stimulus was
153 presented at ~4 times per second with inter-stimulus interval (ISI) fixed at 120 ms. The
154 stimulus was played monaurally via electrically-shielded inserted earphone (ER-3 insert
155 earphone, Intelligent Hearing Systems, Miami, FL) at 85 dB SL (excluding ISIs) in each ear
156 (e.g. left-ear listening followed by right-ear listening or vice versa with order of ear
157 presentation counterbalanced across participants). Monaural listening ensured that after-effects
158 of ipsilateral and contralateral tDCS (relative to the listening ears) could be tested separately
159 (see *Statistical analyses*). For each ear, there were 1,500 sweeps for the positive and 1,500
160 sweeps for the negative polarity presented in an intermixed order (i.e., 3,000 sweeps in total).

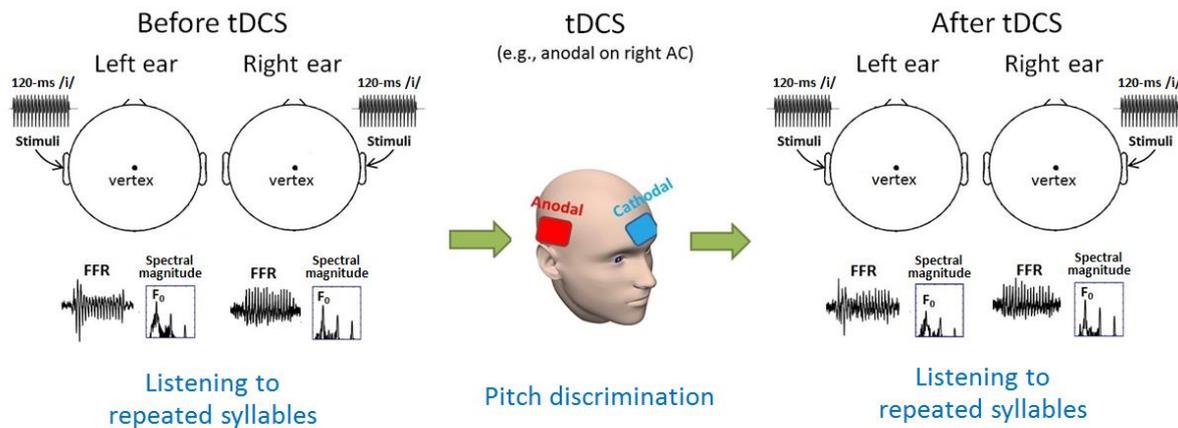
161 Participants were seated comfortably in an armchair in an electromagnetically- and
162 sound-shielded booth. They listened passively to the stimulus sequence whilst keeping their
163 eyes on a fixation cross in the centre of a computer screen. The 3,000 syllable sweeps in each
164 ear were broken into six 2-minute-long blocks (500 sweeps each) with ~40 second breaks
165 between blocks. Participants were required to keep awake and refrain from body and head
166 movements whilst they were listening to the sounds. The FFR recording lasted for ~30 minutes
167 for both pre- and post-tDCS. The post-tDCS recording was completed within 45 minutes post-
168 tDCS for all participants to ensure that any after-effects of tDCS on FFRs were sustained
169 ([Nitsche and Paulus, 2001](#)).

170 ***tDCS***

171 tDCS was applied over the scalp using a battery-driven direct current stimulator
172 (Magstim HDCStim, UK) with a pair of rubber-surface electrodes (5×5 cm) contained in
173 saline-soaked cotton pads. Participants were assigned at random to one of the five groups (18
174 participants (9 females) per group; single-blinded). The five groups received the following
175 different types of tDCS: (1) anodal stimulation on the left auditory cortex (AC) (Left-Anod);
176 (2) cathodal stimulation on the left AC (Left-Cathod); (3) anodal stimulation on the right AC
177 (Right-Anod); (4) cathodal stimulation on the right AC (Right-Cathod); and (5) Sham, with
178 electrode configurations randomly chosen from (1)–(4) for each participant (in this group, the
179 active electrode was put on the left AC for half of the participants and on the right AC for the
180 other half). Centre position of the active electrode was on T7/T8 (according to the 10/20 EEG
181 system) for the left/right AC. The reference electrode was placed on the forehead above the
182 eyebrow contralateral to the active electrode (see [Matsushita et al., 2015](#); also see **Figure 2**).
183 For groups (1)–(4), tDCS was applied at 1 mA for 25 minutes with the currents ramping
184 up/down for 15 seconds at the stimulation onset/offset. Sham applied tDCS only for 30 seconds
185 in total (15 seconds ramping up and down respectively) at the onset of stimulation. This
186 created the usual sensations associated with tDCS in Sham but without actual stimulation
187 during the remainder of the run. All experimental sessions were conducted during the day time
188 (mornings or early afternoons) and all participants had enough sleep (at least 6 hrs) the night
189 before (based on self-report prior to the experiment) to ensure adequate cortical plasticity
190 triggered by tDCS ([Salehinejad et al., 2019](#)).

191 During tDCS, participants completed a pitch discrimination task while they listened to
192 sound stimuli over a loudspeaker 1 metre in front of them in the same sound-shielded booth
193 used for the FFR recordings. Three short complex tones (400 ms) were presented on each trial
194 at a calibrated level of 75 dB SL at the 1 metre position. The task was an ‘ABX’ task. In each
195 trial, two tones ‘A’ and ‘B’ with different fundamental frequencies (F_0) were played
196 consecutively followed by a third tone ‘X’ randomly selected from ‘A’ or ‘B’. Participants had
197 to identify whether ‘X’ was the same as ‘A’ or ‘B’. They gave their best guess when they were
198 unsure of the answer. The process followed a ‘2-down, 1-up’ adaptive procedure, in which the
199 F_0 difference between ‘A’ and ‘B’ decreased by $\sqrt{2}$ times following two consecutive correct
200 trials and increased by $\sqrt{2}$ times following an incorrect trial. No feedback about response
201 accuracy was provided. Half-minute breaks were taken every 4 minutes. This task was
202 included during tDCS because tDCS preferentially modulates neural networks that are
203 currently active ([Reato et al., 2010](#); [Ranieri et al., 2012](#); [Bikson and Rahman, 2013](#)).

204 Concurrent tDCS and the pitch discrimination task could therefore maintain auditory cortical
205 activity during neuro-stimulation, hence maximizing the effect of tDCS on neural excitability.



206
207 **Figure 2. Illustrations for the experiment design.** Participants first listened to a repeated
208 syllable /i/ monaurally while FFR was recorded over scalp-EEGs at Cz. tDCS was then applied
209 over the auditory cortex (AC) along with a pitch discrimination task. The same syllable
210 listening task as in the first step was finally performed following tDCS to detect any after-
211 effects of neuro-stimulation.

212

213 EEG Signal processing

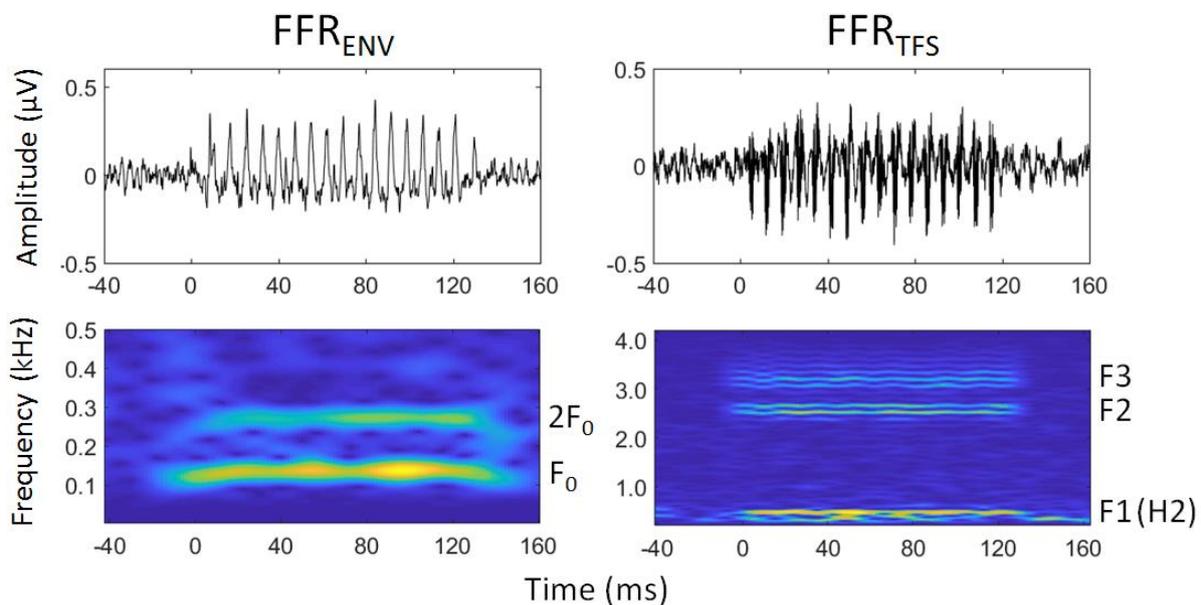
214 All EEG signal processing was conducted via Matlab R2017a (The Mathworks).

215 *Pre-processing*

216 As mentioned, the FFR was captured from Cz. The EEG signals were first re-referenced
217 to the bilateral earlobes and bandpass-filtered between 90 and 4000 Hz using a 2nd-order zero-
218 phase Butterworth filter. The filtered signals were then segmented for each sweep (-50 to 150
219 ms relative to the syllable onset). Each segment was baseline-corrected by subtracting the
220 average of the pre-stimulus (-50–0 ms) period. Segments that exceeded ± 25 mV were rejected
221 to minimize movement artefacts. The resultant rejection rates were $< 2.5\%$ averaged across
222 participants for all cases (pre- and post-tDCS for the five stimulation groups for both left and
223 right ear conditions).

224 *FFR magnitudes*

225 FFRs with the positive and negative polarities (FFR_{Pos} and FFR_{Neg}) were first obtained by
226 temporally averaging the pre-processed signals across sweeps with the respective polarities.
227 FFRs for envelopes of F_0 and its harmonics (i.e., periodicity; FFR_{ENV}) and temporal fine
228 structures (TFS; FFR_{TFS}) were obtained by adding and subtracting FFR_{Pos} and FFR_{Neg} ,
229 respectively (Aiken and Picton, 2008). The addition and subtraction minimized the responses
230 to TFS in FFR_{ENV} and to envelopes in FFR_{TFS} , so that purer FFRs to envelopes and TFS were
231 obtained separately (Aiken and Picton, 2008). Spectral magnitudes of FFR_{ENV} and FFR_{TFS}
232 were then calculated.



233 **Figure 3. A representative sample of FFR.** Sample waveforms (top panels) and the
234 corresponding spectrograms (lower panels) of FFR_{ENV} (left) and FFR_{TFS} (right) were obtained
235 from a single participant in the left ear listening condition before tDCS was applied. The first
236 two harmonics of F_0 (F_0 and $2F_0$) dominate the power of FFR_{ENV} as indicated in the FFR_{ENV}
237 spectrogram (lower left). The three formants (F_1 , F_2 and F_3) in FFR_{TFS} are shown and
238 indicated in the FFR_{TFS} spectrogram (lower right); F_1 occurs at H_2 for this vowel (the 2nd
239 harmonic).
240

241
242 For FFR_{ENV} , $FFR_{ENV_{F0}}$ and $FFR_{ENV_{2F0}}$ (FFR_{ENV} at F_0 and its 2nd harmonic, $2F_0$) that
243 dominate the power of FFR_{ENV} (see **Figure 3** left panel) were focused on. Whereas $FFR_{ENV_{F0}}$
244 and $FFR_{ENV_{2F0}}$ reflect neural phase-locking to the stimulus envelope periodicity in the central
245 auditory systems, higher harmonics (≥ 3) of FFR_{ENV} may reflect distortion products resulting
246 from non-linearities in response to acoustic stimuli on the basilar membrane (Smalt et al.,

247 2012). Whilst it is expected that $\text{FFR}_{\text{ENV}_F0}$ plays the major role in phase-locking to speech
248 periodicity, $\text{FFR}_{\text{ENV}_2F0}$ also makes contributions (e.g., [Aiken and Picton, 2008](#)) because of the
249 non-sinusoidal characteristics of speech periodicity ([Holmberg et al., 1988](#); also see
250 discussions in [Smalt et al., 2012](#)). The procedure for measuring the magnitudes of $\text{FFR}_{\text{ENV}_F0}$
251 and $\text{FFR}_{\text{ENV}_2F0}$ was as follows: a set of 120 ms (same length as the stimulus syllable) sliding
252 windows (1 ms per step), each with a 5-ms rising/falling cosine ramp at the onset/offset, was
253 applied to the FFR_{ENV} waveform. As FFR_{ENV} occurs at the auditory brainstem ([Chandrasekaran](#)
254 [and Kraus, 2010](#); [Bidelman, 2015, 2018](#)) and/or primary auditory cortex ([Coffey et al., 2016](#)),
255 the neural transmission delays were set at 5–20 ms. Onsets of the windows were therefore set
256 at 6–21 ms (allowing for an additional ~1 ms sound transmission through the plastic tube of the
257 earphone to the cochlea) after the syllable onset. The windowed FFR_{ENV} waveform in each step
258 was then zero-padded to 1 second to allow for a frequency resolution of 1 Hz and the log-
259 transformed FFT-powers ($10 \cdot \log_{10}[\text{power}]$) centred at F_0 and $2F_0$ were measured (averaged
260 across 136 ± 2 Hz and 272 ± 2 Hz, respectively). Finally, the $\text{FFR}_{\text{ENV}_F0}$ and $\text{FFR}_{\text{ENV}_2F0}$
261 magnitudes were taken as the powers at the optimal neural delays (i.e., when powers are
262 maximal across all steps for F_0 and $2F_0$, respectively).

263 For FFR_{TFS} , $\text{FFR}_{\text{TFS}_H2}$ and $\text{FFR}_{\text{TFS}_F2F3}$ (FFR_{TFS} at the 2nd harmonic that represents F1
264 for this vowel, and at F2 and F3, respectively; see **Figure 4.3** right panel) were focused on.
265 $\text{FFR}_{\text{TFS}_H2}$ reflects FFR to TFS at the resolved-harmonic region while $\text{FFR}_{\text{TFS}_F2F3}$ reflects FFR
266 to TFS at the unresolved-harmonic region. The same procedure used when measuring
267 magnitudes of $\text{FFR}_{\text{ENV}_F0}$ and $\text{FFR}_{\text{ENV}_2F0}$ was followed, except that: (1) the procedure was
268 applied on FFR_{TFS} at H2 (for $\text{FFR}_{\text{TFS}_H2}$) and at H16–H27 (the 16th to 27th harmonics
269 corresponding to the range of F2 and F3 for $\text{FFR}_{\text{TFS}_F2F3}$; the final magnitude was taken as the
270 mean magnitude across all harmonics in this range); (2) the neural delays during analyses were
271 set at 1–6 ms (0–5 ms delays allowing an additional 1 ms sound transmission through the
272 plastic tube of the earphone) as FFR_{TFS} arises at earlier stages of auditory processing in the
273 periphery ([Aiken and Picton, 2008](#)).

274 Because of the different neural origins of FFR_{ENV} (brainstem/auditory cortex) and
275 FFR_{TFS} (periphery), the present study thus allows us to confirm whether tDCS applied to
276 auditory cortex affects FFR that arise at different levels of the auditory systems.

277 **Statistical analyses**

278 Before testing the after-effects of tDCS, analyses were first conducted to check whether
279 baseline (pre-tDCS) characteristics were matched across stimulation. ANOVAs were
280 conducted using the baseline magnitudes and optimal neural delays of FFRs as dependent
281 variables, Stimulation (Left-Anod, Left-Cathod, Right-Anod, Right-Cathod and Sham) and Ear
282 (left vs. right) as independent variables. Post-hoc analyses were conducted following
283 significant interactions or main effects.

284 After-effects of tDCS (differences in FFR magnitudes between post- and pre-tDCS) were
285 tested using linear mixed-effect regressions. These were conducted using after-effects as
286 dependent variables, Stimulation and Ear as fixed-effect factors and Participant as the random-
287 effect factor. Post-hoc analyses were conducted following significant interactions or main
288 effects.

289 Furthermore, regardless of whether interaction effects occurred between Stimulation and
290 Ear, planned comparisons for the after-effects were conducted between different stimulation
291 types in the left and right ear conditions, respectively. This was because collapsing the left and
292 right ears would smear the distinctions between any after-effects along the contralateral
293 pathway (ears with tDCS on the opposite side) and those along the ipsilateral pathway (ears
294 with tDCS on the same side), which was one of the aspects addressed in the present study. As
295 multiple comparisons were conducted for each ear (5 stimulation types leading to 10
296 comparisons), the critical α value for detecting significance was adjusted at 0.005. It was
297 predicted that, compared to Sham, significantly greater after-effects of tDCS over the right
298 auditory cortex (Right-Anod and Right-Cathod), but not the left auditory cortex (Left-Anod or
299 Left-Cathod), should be found, consistent with the current hypothesis that the right auditory
300 cortex makes specific contributions to FFR.

301 FFR magnitudes were magnitudes of FFR_{ENV} (FFR_{ENV_F0} and FFR_{ENV_2F0}) and FFR_{TFS}
302 (FFR_{TFS_H2} and FFR_{TFS_F2F3}) (see *EEG signal processing*). For FFR_{ENV} , the present study
303 combined the magnitudes of FFR_{ENV_F0} and FFR_{ENV_2F0} , rather than use them as separate
304 dependent variables. The reason was that, it was observed that the summed FFR_{ENV_F0} and
305 FFR_{ENV_2F0} magnitude yielded greater effect sizes during planned comparisons where statistical
306 significance ($p < 0.05$, uncorrected) was detected using FFR_{ENV_F0} or FFR_{ENV_2F0} magnitude
307 alone: Cohen's $d = 0.752$ and 1.001 for FFR_{ENV_F0} and for the summed FFR_{ENV_F0} and
308 FFR_{ENV_2F0} magnitude, respectively, when Right-Anod was compared with Sham in the left ear
309 listening condition; Cohen's $d = 0.934$ and 1.140 for FFR_{ENV_F0} and for combined FFR_{ENV_F0}

310 and FFR_{ENV_2F0} magnitude, respectively, when Right-Cathod was compared with Sham in the
311 left ear listening condition (see *Results* for further details).

312

313 **Results**

314 **Baseline characteristics**

315 **Table 1** and **2** shows the baseline magnitudes and neural delays for FFR_{ENV} , FFR_{TFS_H2}
316 and FFR_{TFS_F2F3} in both the left and right ear conditions. ANOVAs were conducted for baseline
317 magnitudes and optimal neural delays of FFR_{ENV} , FFR_{TFS_H2} and FFR_{TFS_F2F3} .

318 For FFR_{ENV} , a significant main effect of Ear was found for the magnitude ($F(1, 85) =$
319 $12.318, p < 0.001$; greater magnitude in the left than in the right ear condition) but not for the
320 neural delay ($F(1, 85) = 0.055, p = 0.815$); no main effects of Stimulation (magnitude: $F(4, 85)$
321 $= 0.932, p = 0.450$; neural delay: $F(4, 85) = 0.799, p = 0.529$) or [Stimulation \times Ear]
322 interactions were found (magnitude: $F(4, 85) = 0.541, p = 0.706$; neural delay: $F(4, 85) =$
323 $0.046, p = 0.996$). Furthermore, no significant differences were found between any stimulation
324 type in either ear condition (magnitude: all $p > 0.07$; neural delay: all $p > 0.1$). **Figure 4**
325 illustrates the comparison of baseline magnitudes for FFR_{ENV} between the left and right ear
326 conditions after collapsing across stimulation types (due to the significant main effect of Ear
327 but no main effect of Stimulation).

328 For FFR_{TFS_H2} , there were no significant main effects of Stimulation (magnitude: $F(4, 85)$
329 $= 0.692, p = 0.600$; neural delay: $F(4, 85) = 1.421, p = 0.234$) or Ear (magnitude: $F(1, 85) =$
330 $3.483, p = 0.065$; neural delay: $F(1, 85) = 1.842, p = 0.178$), or [Stimulation \times Ear] interactions
331 (magnitude: $F(4, 85) = 0.744, p = 0.565$; neural delay: $F(4, 85) = 0.587, p = 0.673$). No
332 significant differences were found between any stimulation type in either ear condition
333 (magnitude: all $p > 0.1$; neural delay: all $p > 0.05$).

334 For FFR_{TFS_F2F3} , significant main effects of Stimulation ($F(4, 85) = 40.872, p < 0.001$)
335 and Ear ($F(1, 85) = 4.225, p = 0.002$; greater in the right than the left ear condition) were found
336 for the magnitude, but not for the neural delay (Stimulation: $F(4, 85) = 1.504, p = 0.208$; Ear:
337 $F(1, 85) = 0.324, p = 0.571$). A significant [Stimulation \times Ear] interaction was found for the
338 neural delay ($F(4, 85) = 2.549, p = 0.045$), but not for the magnitude ($F(4, 85) = 1.763, p =$

339 0.144). Post-hoc analyses found significant differences in magnitudes between several
 340 stimulation types (collapsing the left and right ears: Left-Anod vs. Right-Anod, $t(34) = -2.110$,
 341 $p = 0.042$; Left-Anod vs. Sham, $t(34) = -2.713$, $p = 0.010$; Left-Cathod vs. Right-Anod, $t(34) =$
 342 -2.796 , $p = 0.008$; Left-Cathod vs. Right-Cathod, $t(34) = -2.566$, $p = 0.015$; Left-Cathod vs.
 343 Sham, $t(34) = -3.498$, $p = 0.001$). Significant differences were found between stimulation types
 344 for the neural delay in both the left ear (Left-Anod vs. Right-Cathod, $t(34) = -2.703$, $p = 0.011$)
 345 and the right ear condition (Right-Anod vs. Right-Cathod, $t(34) = 2.279$, $p = 0.029$; Left-Anod
 346 vs. Right-Anod, $t(34) = -2.240$, $p = 0.032$; Right-Anod vs. Sham, $t(34) = 2.629$, $p = 0.013$). All
 347 p -values here are reported without correction.

348 The results thus indicate that the baseline characteristics of FFR_{ENV} and FFR_{TFS_H2} , but
 349 not FFR_{TFS_F2F3} , were well matched across stimulation types. As such, although after-effects
 350 were tested for all three FFR signatures, FFR_{ENV} and FFR_{TFS_H2} are focused on. In addition, the
 351 main effects of Ear for FFR_{ENV} and FFR_{TFS_F2F3} magnitudes may reflect the laterality of speech
 352 encoding at the subcortical (Chandrasekaran and Kraus, 2010; Bidelman, 2015, 2018) and/or
 353 cortical levels (Coffey et al., 2016, 2017b), which will be discussed further (see *Discussion*).

354

355 **Table 1.** Baseline magnitudes (standard deviations shown in the brackets; in *dB*) for FFR_{ENV} ,
 356 FFR_{TFS_H2} and FFR_{TFS_F2F3} across stimulation types in the left and right ear conditions.

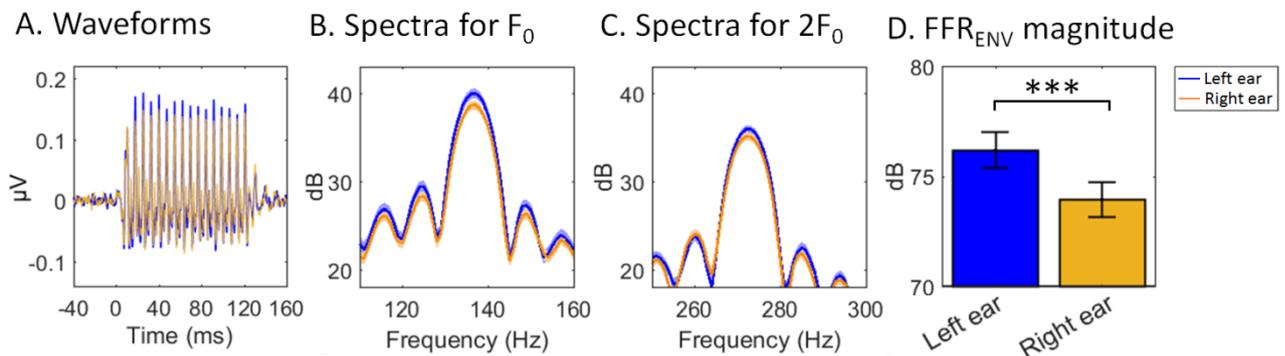
FFRs	Ear	Left-Anod	Left-Cathod	Right-Anod	Right-Cathod	Sham
FFR_{ENV}	Left	76.28 (5.27)	78.84 (7.03)	76.05 (6.96)	76.24 (8.56)	73.45 (10.05)
	Right	75.05 (5.79)	75.42 (4.72)	72.82 (6.62)	74.24 (7.91)	72.17 (10.92)
FFR_{TFS_H2}	Left	30.35 (5.70)	30.70 (7.71)	32.52 (7.12)	31.68 (6.24)	33.37 (6.86)
	Right	32.71 (3.88)	30.63 (6.98)	32.59 (7.97)	33.40 (7.51)	34.36 (5.66)
FFR_{TFS_F2F3}	Left	15.31 (7.26)	13.21 (7.24)	19.45 (7.16)	20.14 (6.58)	20.46 (5.75)
	Right	17.13 (7.07)	16.28 (6.58)	22.97 (7.57)	20.90 (7.82)	23.58 (6.09)

357

358 **Table 2.** Baseline neural delays (standard deviations shown in the brackets; in *ms*) for FFR_{ENV} ,
 359 FFR_{TFS_H2} and FFR_{TFS_F2F3} across stimulation types in the left and right ear conditions.

FFRs	Ear	Left-Anod	Left-Cathod	Right-Anod	Right-Cathod	Sham
FFR _{ENV}	Left	8.75 (2.45)	9.42 (2.44)	9.67 (2.70)	8.56 (2.81)	8.81 (2.71)
	Right	8.78 (2.02)	9.47 (3.49)	9.50 (3.25)	8.58 (1.69)	9.08 (2.33)
FFR _{TFS_H2}	Left	3.50 (2.28)	4.50 (1.82)	3.50 (1.82)	3.67 (2.06)	4.28 (1.60)
	Right	3.61 (2.30)	4.94 (1.59)	4.44 (1.95)	4.11(2.00)	4.06 (1.92)
FFR _{TFS_F2F3}	Left	2.90 (0.36)	3.04 (0.27)	3.03 (0.44)	3.20 (0.31)	3.05 (0.53)
	Right	2.93 (0.48)	3.03 (0.48)	3.28 (0.47)	2.97 (0.34)	2.87 (0.48)

360



361

362 **Figure 4. Comparison of baseline magnitude for FFR_{ENV} between the left and the right**

363 **ear conditions.** The comparison was conducted by collapsing the stimulation types following

364 the ANOVA results which showed a significant main effect of Ear, but no significant main

365 effect of Stimulation or [Stimulation × Ear] interaction for the baseline FFR_{ENV} magnitude. The

366 left and the right ear conditions are indicated as *blue* and *orange*, respectively. **(A)** Waveforms

367 of FFR_{ENV} averaged across stimulation types. **(B)(C)** FFT-power spectra averaged across

368 stimulation types, obtained using the individual optimal neural delays for **(B)** FFR_{ENV_F0}

369 (showing 110–160 Hz peaking at F₀ of 136 Hz) and **(C)** FFR_{ENV_2F0} (showing 250–300 Hz

370 peaking at 2F₀ 272 Hz) (shaded areas in the spectra cover the ranges of ±1 standard errors

371 (SEs)). **(D)** FFR_{ENV} magnitude (summed magnitude of FFR_{ENV_F0} and FFR_{ENV_2F0}). Significant

372 greater FFR_{ENV} magnitude was found in the left than in the right ear condition (***)

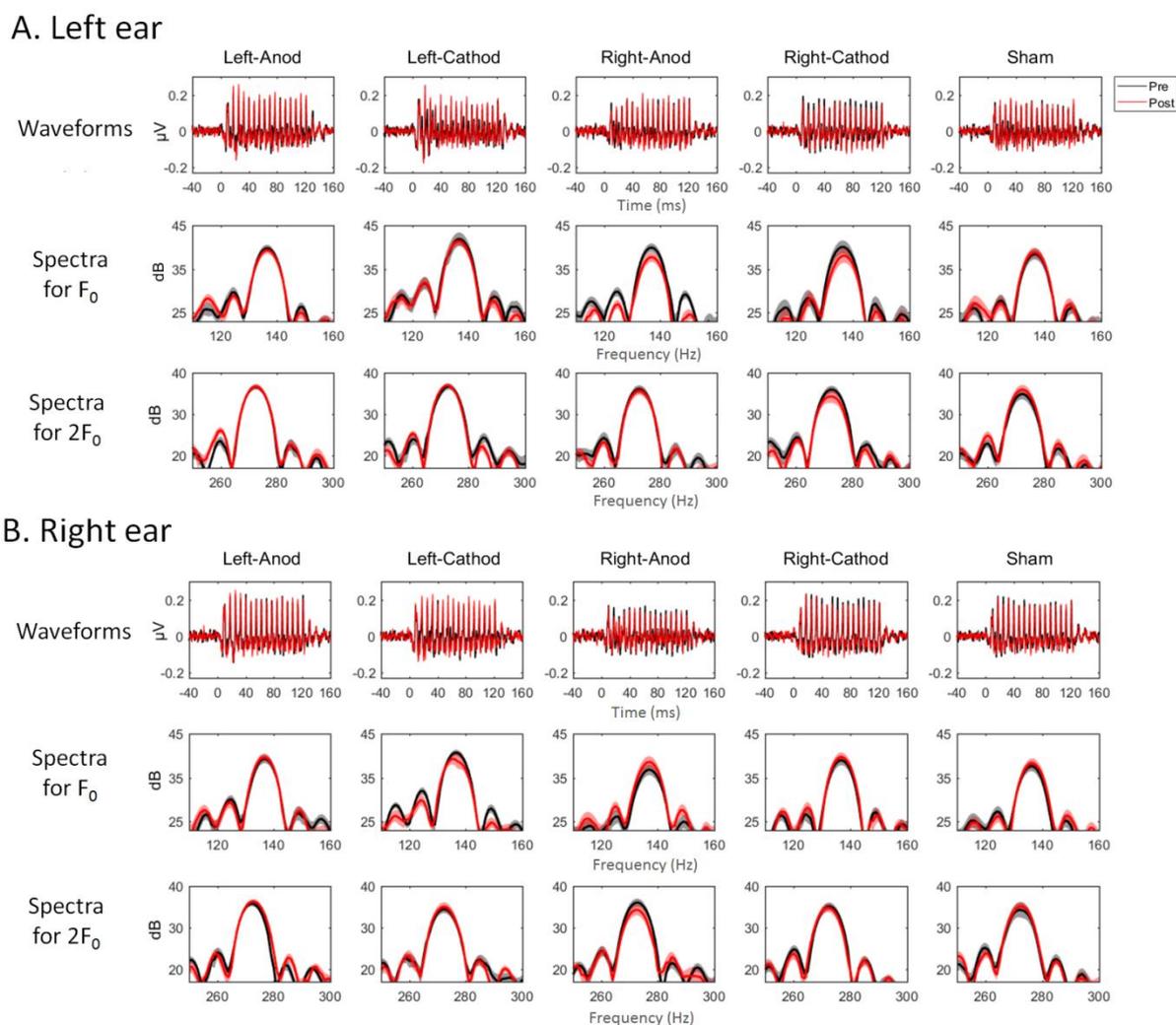
373 *p* < 0.001, uncorrected). Error bars indicate the SEs.

374 **After-effects on FFR_{ENV}**

375 FFR_{ENV} magnitude refers to the summed FFR_{ENV_F0} and FFR_{ENV_2F0} magnitudes (see

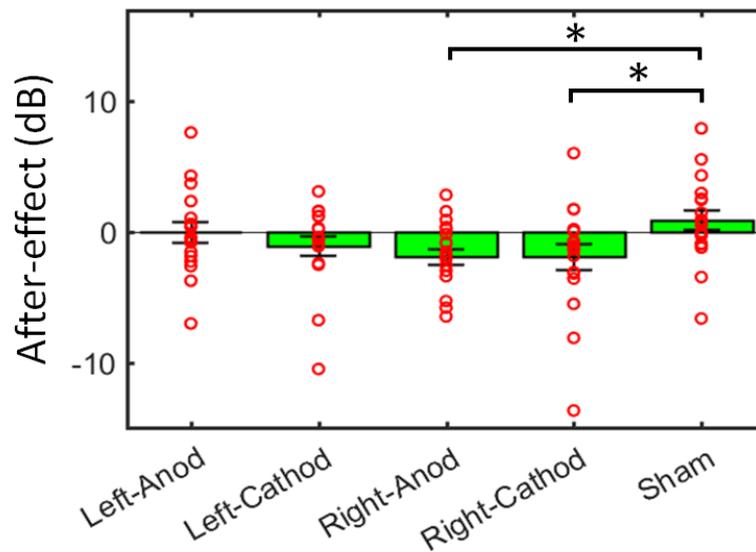
376 Statistical analyses). **Figure 5** shows the waveforms and FFT-power spectra for FFR_{ENV} across

377 participants. Linear mixed-effect regression showed a significant main effect of Stimulation
 378 ($F(4, 85) = 2.549, p = 0.045$). No main effect of Ear ($F(1, 85) = 0.784, p = 0.378$) or
 379 [Stimulation \times Ear] interaction ($F(4, 85) = 1.309, p = 0.273$) was found. Post-hoc independent-
 380 sample t-tests were thus conducted between different stimulation types following the main
 381 effect of Stimulation (collapsing the left and right ear due to the lack of [Stimulation \times Ear]
 382 interaction). After-effects of tDCS over the right AC were significantly lower than that of
 383 Sham (Right-Anod vs. Sham, $t(34) = -2.569, p = 0.015$ (uncorrected), Cohen's $d = 0.856$;
 384 Right-Cathod vs. Sham, $t(34) = -2.219, p = 0.033$ (uncorrected), Cohen's $d = 0.740$) (**Figure**
 385 **6**).



386 **Figure 5. Waveforms and power spectra for FFR_{ENV} averaged across participants. (A) and**
 387 **(B) show the waveforms and FFT-power spectra in the left and right ear condition,**
 388 **respectively. Pre- and post-tDCS were indicated as *black* and *red*, respectively (shaded areas**
 389 **in the spectra cover the ranges of ± 1 SEs from the means). From left to right are different**
 390

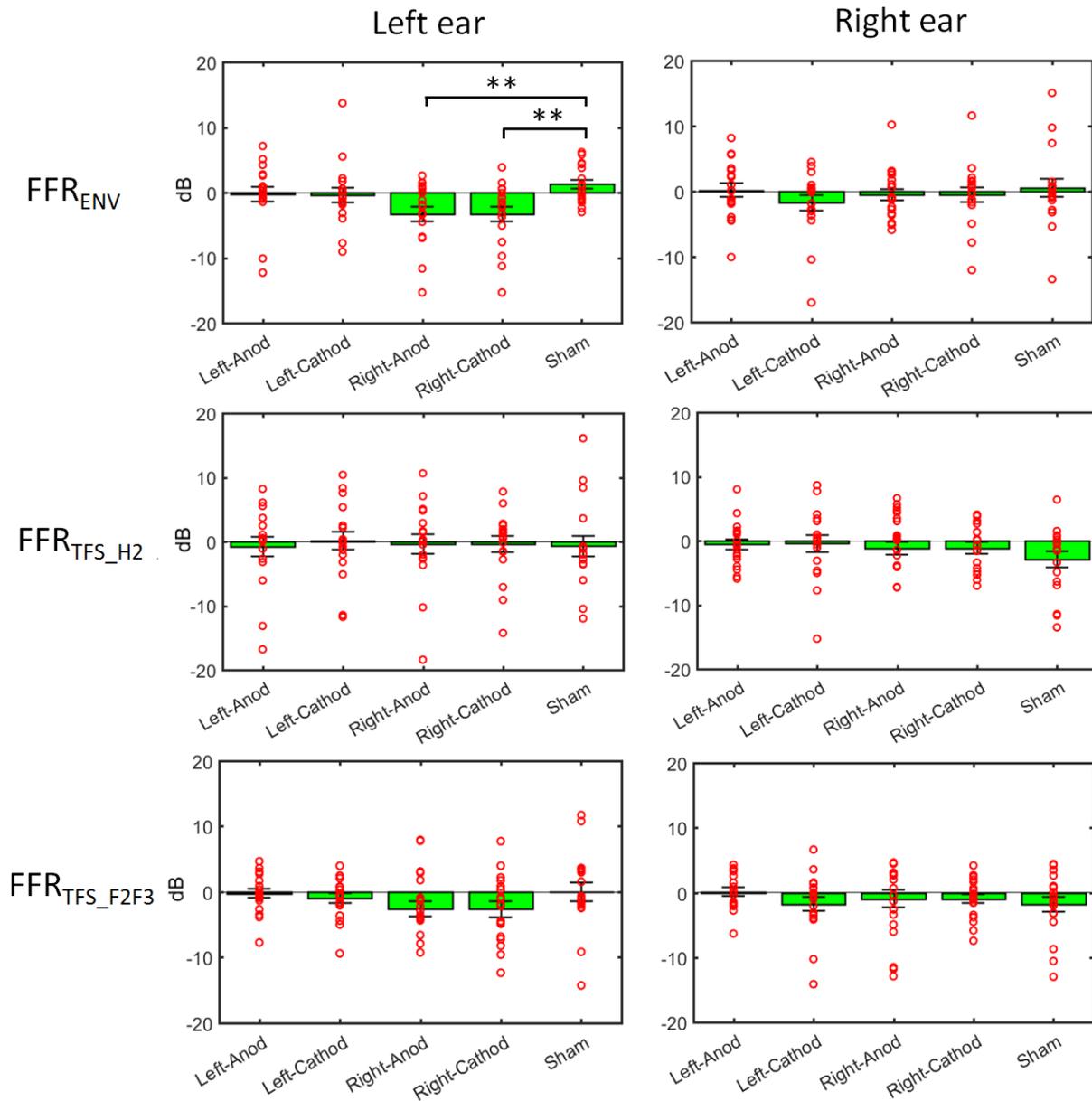
391 stimulation types (Left-Anod, Left-Cathod, Right-Anod, Right-Cathod and Sham). *Upper*
392 panels: waveforms of FFR_{ENV} ; *mid* and *lower* panels: power spectra obtained using the
393 individual optimal neural delays for FFR_{ENV_F0} (*mid*; showing 110–160 Hz peaking at F_0 of 136
394 Hz) and FFR_{ENV_2F0} (*lower*; showing 250–300 Hz peaking at $2F_0$ of 272 Hz).



395
396 **Figure 6. After-effects of tDCS on FFR_{ENV} magnitudes comparing across stimulation**
397 **types after collapsing the left and right ears.** Collapsing the left and right ears was
398 conducted following the ANOVA results which showed a significant main effect of
399 Stimulation but no significant main effect of Ear or [Stimulation \times Ear] interaction. Red circles
400 indicate individual data for the corresponding stimulation types (Left-Anod, Left-Cathod,
401 Right-Anod, Right-Cathod and Sham). Post-hoc paired comparisons showed significant
402 differences between tDCS over the right AC (Right-Anod and Right-Cathod) and Sham ($*p <$
403 0.05, uncorrected). Error bars indicate the SEs.

404
405 Planned comparisons between different stimulation types were subsequently conducted
406 for the left and right ear listening conditions to determine whether tDCS has effects along the
407 contralateral or ipsilateral pathway. The critical α value for detecting significance was adjusted
408 to 0.005 (there were 10 pairs of comparisons in each ear condition). The results are illustrated
409 in **Figure 7** (upper panels). In the left ear condition, significant differences were found between
410 tDCS over the right AC and Sham (Right-Anod vs. Sham, $t(34) = -3.024$, $p < 0.005$, Cohen's d

411 = 1.001; Right-Cathod vs. Sham, $t(34) = -3.420$, $p = 0.002$, Cohen's $d = 1.140$). No significant
412 effects were found for any other comparison (all $p > 0.2$). In the right ear condition, no
413 significant effects were found for any pair of comparison (all $p > 0.2$). All p -values shown here
414 are reported without correction.



415
416 **Figure 7. After-effects of tDCS on FFR magnitudes.** Upper, mid and lower panels indicate
417 the after-effects on magnitudes of FFR_{ENV} , FFR_{TFS_H2} and FFR_{TFS_F2F3} , respectively. Planned
418 comparisons were conducted between different stimulation types in both the left and right ear
419 conditions, with the critical α value set at 0.005 according to multiple comparisons. Significant
420 differences were found between tDCS over the right auditory cortex (Right-Anod and Right-
421 Cathod) and Sham in the left ear condition for FFR_{ENV} . (** $p < 0.005$, uncorrected; i.e., $p <$

422 0.05 after correction according to multiple comparisons) Red circles indicate individual data
423 for the corresponding stimulation types. Error bars indicate the SEs.

424

425 **After-effects on FFR_{TFS}**

426 Equivalent analyses to those conducted for the FFR_{ENV} magnitude were conducted for
427 the magnitudes of FFR_{TFS_H2} and FFR_{TFS_F2F3}. The linear mixed-effect regressions did not show
428 significant main effects of Stimulation (FFR_{TFS_H2}: $F(4, 85) = 0.528, p = 0.715$; FFR_{TFS_F2F3}:
429 $F(4, 85) = 0.613, p = 0.655$) or Ear (FFR_{TFS_H2}: $F(1, 85) = 0.496, p = 0.467$; FFR_{TFS_F2F3}: $F(1,$
430 $85) = 0.213, p = 0.646$), or significant [Stimulation \times Ear] interactions (FFR_{TFS_H2}: $F(4, 85) =$
431 $0.530, p = 0.714$; FFR_{TFS_F2F3}: $F(4, 85) = 1.189, p = 0.322$).

432 Planned comparisons did not find significant after-effects between different stimulation
433 types in the left or right ear condition (FFR_{TFS_H2}: all $p > 0.6$ in the left ear condition and all $p >$
434 0.1 in the right ear condition; FFR_{TFS_F2F3}: all $p > 0.09$ in the left ear condition and all $p > 0.1$
435 in the right ear condition; see **Figure 7**, mid and lower panels). All p -values are reported
436 without correction.

437

438 **Discussion**

439 The current study used a combined tDCS and EEG approach to test for a causal
440 contribution of auditory cortex to speech-evoked FFR in healthy right-handed participants. The
441 left and right auditory cortices were neuro-stimulated in different groups of participants and the
442 after-effects of tDCS on the FFR were examined during monaural listening to a repeated
443 speech syllable. The results showed that tDCS, both anodal and cathodal, over the right
444 auditory cortex, generated significantly greater after-effects on FFR_{ENV} magnitude compared to
445 sham stimulation. Specifically, such effects were present only in the left ear listening
446 condition, indicating that the changes in processing of speech periodicity information occur
447 along the contralateral pathway (i.e., from the left ear to the right auditory cortex). The results
448 thus agree with previous studies that have shown a close relation between the right auditory
449 cortex and FFR (Coffey et al., 2016, 2017a, 2017b; Hartmann and Weisz, 2019) and provide
450 the first evidence for a causal relationship.

451 **Laterality for FFR_{ENV} at the baseline**

452 Ear laterality for the baseline FFR_{ENV} and FFR_{TFS_F2F3} magnitudes were found (see
453 *Baseline characteristics*). The discussion here focuses on FFR_{ENV} alone due to the significant
454 main effect of Stimulation for the baseline FFR_{TFS_F2F3} magnitude (which means that the
455 baseline was not well matched across stimulation types) and lack of a significant after-effect of
456 tDCS on FFR_{TFS_F2F3} magnitude.

457 The present study found that baseline FFR_{ENV} had significantly greater magnitude in the
458 left than in the right ear condition, supporting the lateralization of speech periodicity encoding
459 along the contralateral auditory pathway from the left ear to the right auditory cortex. This
460 echoes the previous findings that showed the right-hemispheric lateralization of the classic 40
461 Hz auditory steady-state response (ASSR) (Ross et al., 2005; Luke et al., 2017). Right
462 lateralization was also found in ASSR at 80 Hz (Vanvooren et al., 2014). ASSRs are phase-
463 locked responses to amplitude-modulated tones/noise and both ASSRs and FFR_{ENV} are
464 envelope-following responses (Dimitrijevic et al., 2004). Whilst the 40 Hz ASSR has its main
465 generator at the cortical level (Herdman et al., 2002; Ross et al., 2002, 2005), prominent
466 activities occur at the brainstem level for the 80 Hz ASSR (Herdman et al., 2002) and speech-
467 evoked FFR_{ENV} (Chandrasekaran and Kraus, 2010; Bidelman, 2015, 2018; this can also be seen
468 in the present study where average optimal neural delays were between 5 and 10 ms, see **Table**
469 **2**). Recent studies, however, have shown that FFR has additional sources in the auditory cortex
470 (Coffey et al., 2016, 2017a; Hartmann and Weisz, 2019). It is thus not clear whether the
471 observed laterality of FFR_{ENV} in the present study occurs at the subcortical or cortical level or,
472 more equivocally, whether auditory cortex contributes to this laterality. As such, the current
473 combined tDCS and EEG approach showed how altering neural excitability of auditory cortex
474 in the left or right hemisphere can lead to changes in FFR which therefore provides
475 confirmatory evidence for a causal cortical contribution.

476 **Causal role of the right auditory cortex for FFR_{ENV}**

477 After-effects found for FFR_{ENV} but not FFR_{TFS} indicate that tDCS had impacts on the
478 responses at the subcortical and/or cortical levels above the auditory periphery. The findings
479 thus argue for a causal role of the right auditory cortex in processing speech periodicity
480 information along the contralateral pathway in the central auditory systems.

481 The present study thus advances our understanding of the relationship between FFR and
482 pitch processing in the right auditory cortex. Previous studies have shown that FFR is closely
483 related to pitch perception. FFR strength can be enhanced by both short-term perceptual
484 training of pitch discrimination (Carcagno and Plack, 2011) as well as long-term musical
485 experience (Musacchia et al., 2007; Wong et al., 2007; Strait et al., 2009; Bidelman et al.,
486 2011). Furthermore, FFR has been used as an index of neural fidelity of linguistic pitch and the
487 fidelity is greater in tonal language than in non-tonal language speakers (Krishnan et al., 2004,
488 2005, 2009). Despite this, however, rather than reflecting the result of pitch extraction, FFR
489 has been suggested to reflect subcortical responses to monaural temporal information (e.g.,
490 periodicity cues) that are important for extracting pitch of complex sounds (i.e., ‘pitch-bearing’
491 information; Gockel et al., 2011). On the other hand, the process of pitch extraction itself takes
492 place in the auditory cortex (Penagos et al., 2004; Bendor and Wang, 2005; Puschmann et al.,
493 2010) with a right hemispheric specialization (Zatorre and Berlin, 2001; Patterson et al., 2002;
494 Hyde et al., 2008; Mathys et al., 2010; Albouy et al., 2013). In this respect, the current after-
495 effects of tDCS may reflect a top-down corticofugal modulation process in which the right
496 auditory cortex affects the processing of pitch-bearing information that occurs at the
497 subcortical level. Alternatively, although EEG mainly captures FFR signals originating from
498 the brainstem (Bidelman, 2015, 2018), cortical sources have been found dominated in the right
499 hemisphere (Coffey et al., 2016; 2017a). It therefore cannot be excluded that tDCS may affect
500 the FFR magnitude directly at the cortical level. It is noteworthy that the current finding could
501 not disentangle whether the effects emerge at the subcortical or cortical level, or both.

502 Also, stronger evidence would be provided for the specific contributions of the right
503 auditory cortex to FFR if significant differences in after-effects were further found between
504 tDCS over the right and the left auditory cortex. However, the present results did not show
505 such differences. A possible explanation is that tDCS not only alters excitability of regions in
506 which electrodes are located but can yield widespread changes across the brain (see a review:
507 Filmer et al., 2014). This could be due to the diffuse nature of the tDCS where currents do not
508 only flow between electrodes, but also spread widely through various other regions (Faria et
509 al., 2011; Bai et al., 2014; Unal and Bikson, 2018). tDCS also changes functional connectivity
510 (Sehm et al., 2012; Kunze et al., 2016) by which interactions of auditory cortices between the
511 two hemispheres may be further activated. Therefore, tDCS over the left auditory cortex could
512 also cause some changes in the right side that yield similar (but smaller) after-effects as direct
513 stimulation over the right auditory cortex.

514 **Neurophysiological consequences of tDCS**

515 An intriguing finding of the present study is that anodal and cathodal tDCS over the right
516 auditory cortex resulted in the same direction of changes, both causing decreases in FFR_{ENV}
517 magnitude compared to sham. Conventionally, anodal and cathodal stimulations reflect
518 depolarization and hyperpolarization of neurons, respectively, which should lead to opposite
519 directions of after-effects (Jacobson et al., 2012). However, it is not unusual that tDCS has
520 polarity-independent effects due to the underlying complexity of its neurophysiological
521 consequences. For example, several studies have shown that anodal and cathodal tDCS have
522 the same effects on excitability of motor cortex (Antal et al., 2007), motor learning (de Xivry et
523 al., 2011), cerebellar functions for working memory (Ferrucci et al., 2008) and visuomotor
524 learning (Shah et al., 2013). The first possible explanation would be the non-linear effects of
525 tDCS depending on the current density. It has been shown that cathodal tDCS with an
526 electrode size of 35 cm^2 can lead to inhibition in the motor cortex at 1 mA but excitation at 2
527 mA (Batsikadze et al., 2013). The present study used a current intensity at 1 mA but with
528 smaller electrode size (25 cm^2 ; hence greater current density). It could be that this current
529 density through the auditory cortex would lead to non-linear effects as resulted in the motor
530 cortex. Second, it is possible that similar changes in concentrations of relevant
531 neurotransmitters are caused by anodal and cathodal tDCS. It was found that with 1 mA
532 currents, anodal tDCS causes decreases in GABA concentration that lead to cortical excitation;
533 cathodal tDCS also causes decreases in GABA, but with greater concurrent decreases in
534 glutamate that lead to cortical inhibition (Stagg et al., 2009). It is possible that GABA
535 concentrations, which decrease following both anodal and cathodal tDCS, play an important
536 role for changes in FFR_{ENV} magnitude.

537 **Conclusion**

538 The current results validate the previous findings that the right auditory cortex makes
539 significant contributions to speech-evoked FFR (Coffey et al., 2016, 2017a, 2017b; Hartmann
540 and Weisz, 2019) by establishing a causal relationship between the two. To our knowledge,
541 this is the first evidence for this causality and it could be essential due to the fundamental and
542 clinical importance of the FFR. Thus, these findings should advance our understanding of how
543 speech periodicity and pitch information are processed along the central auditory pathways in
544 the human brain. Future research is needed to further clarify where exactly this causality
545 emerges, i.e., to disentangle whether the effects are realized through top-down corticofugal

546 modulations on the subcortical level, or modulations directly in the cortex. Moreover, it will be
547 worthwhile to further investigate how changes in concentrations of neurotransmitters by neuro-
548 stimulation relate to this causality, which can help us better understand the underlying
549 mechanisms of the cortical contributions to FFR.

550

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