Introduction

The prefrontal cortex is a functionally heterogeneous region supporting several interconnected ‘executive’ cognitive processes that serve to monitor action-outcome associations and optimise goal-directed action (Dalley et al., 2004). It is widely acknowledged that such prefrontal cortical–dependent functions comprise response control and attentional processes (Robbins et al., 1996; Sarter et al., 2001) that support performance in challenging situations. Deficits in these functions are detectable in individuals with neuropsychiatric disorders through highly standardised and automated tests of cognition (Barch et al., 2009), but the aetiology of these disorders remain incompletely understood and the deficits are poorly treated (Insel et al., 2013; Millan et al., 2012). A standard assessment paradigm of attentional and response control in clinical and human experimental studies has been the continuous performance task (CPT; Rosvold et al., 1956) combined with signal detection analysis (Green and Swets, 1966). In such tests, subjects are exposed to a stream of

Effects of anterior cingulate cortex lesions on a continuous performance task for mice

Martha Hvoslef-Eide1,2,3, Simon R. O. Nilsson1,2,4,5, Jonathan M. Hailwood1,2, Trevor W. Robbins1,2, Lisa M. Saksida1,2,6,7,8, Adam C. Mar1,2,4,5* and Timothy J. Bussey1,2,6,7,8*

Abstract

Background: Important tools in the study of prefrontal cortical-dependent executive functions are cross-species behavioural tasks with translational validity. A widely used test of executive function and attention in humans is the continuous performance task. Optimal performance in variations of this task is associated with activity along the medial wall of the prefrontal cortex, including the anterior cingulate cortex, for its essential components such as response control, target detection and processing of false alarm errors.

Methods: We assess the validity of a recently developed rodent touchscreen continuous performance task that is analogous to typical human continuous performance task procedures. Here, we evaluate the performance of mice with quinolinic acid-induced lesions centred on the anterior cingulate cortex in the rodent touchscreen continuous performance task following a range of task parameter manipulations designed to challenge attention and impulse control.

Results: Lesioned mice showed a disinhibited response profile expressed as a decreased response criterion and increased false alarm rates. Anterior cingulate cortex lesions also resulted in a milder increase in inter-trial interval responses and hit rate. Lesions did not affect discriminative sensitivity $d'$. The disinhibited behaviour of anterior cingulate cortex-lesioned animals was stable and not affected by the manipulation of variable task parameter manipulations designed to increase task difficulty. The results are in general agreement with human studies implicating the anterior cingulate cortex in the processing of inappropriate responses.

Conclusion: We conclude that the rodent touchscreen continuous performance task may be useful for studying prefrontal cortex function in mice and has the capability of providing meaningful links between animal and human cognitive tasks.

Keywords

Executive function, touchscreen, animal model, mouse, prefrontal cortex, anterior cingulate cortex, continuous performance task

Received 20 November 2017; accepted 5 March 2018
continuously presented complex non-spatial stimuli. Rapid stimulus processing and response control are required to detect target and non-target stimuli, and to initiate and inhibit inappropriate responding accordingly. These tasks have been used successfully to identify genetic and neural mechanisms of relevance for cognitive function and approaches to cognitive enhancement in humans (Carter et al., 1998; Cornblatt et al., 2003; Rubia et al., 2001; Seidman et al., 2015).

Theoretical accounts postulate critical roles of the anterior cingulate in inhibitory and attentional control (Corbetta and Shulman, 2002; Posner and Petersen, 1990; Stuss et al., 1995). Human imaging and electrophysiological studies identify roles for the anterior cingulate in diverse processes, including response inhibition and the monitoring of conflict and response errors, in order to support behavioural adaptation and sustaining performance under demanding conditions (Botvinick et al., 2004). As assessed in CPTs and Go/No-Go tasks, the anterior cingulate supports the processing of false alarm errors and response inhibition (Botvinick et al., 2004; Casey et al., 2008; Fallgatter et al., 2001). Disrupted anterior cingulate activity is also associated with disinhibited responding, increased false alarm error and impaired discrimination in individuals with prefrontal cortical lesions (Glosser and Goodglass, 1990; Salmaso and Denes, 1982) or diagnosed with psychiatric disorders (Fallgatter et al., 2003; Hester and Garavan, 2004; Leland et al., 2008).

Several rodent analogues of the human CPT, some amenable to signal detection analysis, have successfully been developed with the aim of identifying loci of executive functioning and targets with translational value (Carli et al., 1983; McGaughy and Sarter, 1995; Young et al., 2009). In translational agreement with human studies, this work demonstrates that performances are related to activity along the medial wall of the prefrontal cortex in the rodent using localised lesions (Muir et al., 1996), site-specific pharmacological injections (Murphy et al., 2011; Paine et al., 2011; Pehrson et al., 2013; Pezze et al., 2014), electrophysiological measures (Totah et al., 2009, 2013), optogenetics (Kim et al., 2016), chemogenetics (Koike et al., 2016) and neurochemical correlates (Barbelivien et al., 2001; Dalley et al., 2002; Jupp et al., 2013). In rodent operant assays, anterior cingulate cortex (ACC) activity appears particularly linked to motor impulsivity with manipulations affecting measures such as premature responses and/or response inhibition or approaches to non-target stimuli in detection and discrimination tasks (Bassie et al., 1997; Jupp et al., 2013; Muir et al., 1996; Totah et al., 2009). Others have also found that ACC lesions in the rat can disrupt attention as measured by discriminative sensitivity (Passetti et al., 2002) and impair set-shifting as well as the processing of irrelevant stimuli (Ng et al., 2007).

Yet while rodent behavioural analogues of human CPTs often employ detection of auditory or visual stimuli, human CPT paradigms generally employ visual discrimination tasks that include identification of (a) multiple complex luminance-matched visual stimuli and (b) multiple non-target stimuli, occurring at a single response location. Extant spatial, auditory or visuospatial rodent paradigms employ some, but not all, of these features. There is good evidence that different neural and perceptual/cognitive processes may be recruited because of such cross-species task differences (Lashley, 1931; Petruno et al., 2013; Pöppel et al., 1973; Stoerig et al., 1985) that may contribute to decreased validity, translational difficulties and ultimately attrition of therapeutic candidates (Tricklebank and Garner, 2012).

The rodent touchscreen operant chamber provides an opportunity for the back-translation of standard human CPT procedures into highly analogous rodent testing protocol. In recent reports, we developed a novel rodent touchscreen version of the CPT (rodent CPT or rCPT – Kim et al., 2015; Mar et al., 2017). C57BL/6J and DBA/2J mice were demonstrated to readily acquire the rCPT, with strain differences in task performance observed following manipulations of key task parameters and following donepezil administration (Kim et al., 2015). The rat mitotic neurotoxin methylazoxymethanol acetate model (MAM-E17) of schizophrenia has also been demonstrated to have robust and persistent impairments on measures of attentional control and executive function in the rCPT (Mar et al., 2017). This study, in parallel with ongoing studies assessing the functional heterogeneity of the rat prefrontal cortex in the rCPT (Mar et al., unpublished; Fisher et al., unpublished), aims to further validate the rCPT by establishing the degree to which task performance in the mouse depends on activity in the prefrontal cortex. As part of this work, the current study tested the hypothesis that the mouse anterior cingulate is important for rCPT performance. Here, we evaluate the performance of mice with excitotoxic lesions centred on the anterior cingulate and sham-lesioned controls in the rCPT. Animals were tested following several task parameter manipulations designed to challenge performance further (Kim et al., 2015).

Methods

Animals

In total, 32 male C57BL/6J mice (Charles River, UK) started behavioural testing at 7–9 weeks of age. Animals were group-housed under a 12-h light/dark cycle (lights on at 7:00 a.m.) with stable temperature and humidity conditions with ad libitum access to food and water. Experiments were carried out during the dark phase of the light cycle. Prior to the start of testing, animals were food restricted and maintained at 85%–90% of their free-feeding body weights. Neophobia to the test diet (14 mg Bio-Serv puriﬁed rodent dustless precision pellets; Sandown Scientiﬁc, Middlesex, UK) was reduced by exposure in the home cage prior to operant training. This research has been regulated under the Animals (Scientiﬁc Procedures) Act 1986 Amendment Regulations 2012 following ethical review by the University of Cambridge Animal Welfare and Ethical Review Body (AWERB). Two animals unexpectedly died towards the end of the study but were included in the analysis where their data were complete. In all, 10 animals were omitted from the analyses. This was due to failure to reach the performance criterion post-surgery (n = 2), complications following surgery (n = 2), injury from post-surgery fighting (n = 2) and unexpected death early in the study (n = 4). The exact n numbers for each group are in Table 1.

Apparatus

Testing was conducted in modiﬁed Med Associates, Inc. (St. Albans, VT, USA) touchscreen operant chambers for mice as described elsewhere (Horner et al., 2013; Mar et al., 2013) controlled by in-house software (Visual Basic 2010 Express .NET, Microsoft 2010; developed by A.C.M.). In brief, the apparatus consisted of a rectangular chamber with an infrared touchscreen.
Table 1. Mean values ± SEM for sham and ACC-lesioned mice in each probe and on two averaged baseline sessions immediately prior to the start of post-surgery probes.

|                     | Sham | Lesion | Sham | Lesion |
|---------------------|------|--------|------|--------|
|                       |      |        |      |        |
| **Baseline (4 s ITI)** (n = 10; 14) |      |        |      |        |
| FAR                 | 0.46 ± 0.05 | 0.35 ± 0.10 | 0.19 ± 0.02 | 0.23 ± 0.03 |
| HR                  | 0.50 ± 0.02 | 0.53 ± 0.04 | 0.91 ± 0.05 | 0.84 ± 0.08 |
| d'                  | 0.35 ± 0.04 | 0.35 ± 0.04 | 0.31 ± 0.02 | 0.41 ± 0.04 |
|                       |      |        |      |        |
| **vSD#1** (n = 10; 14) |      |        |      |        |
| FAR                 | 0.56 ± 0.07 | 0.25 ± 0.11 | 0.17 ± 0.02 | 0.27 ± 0.04 |
| HR                  | 0.45 ± 0.03 | 0.56 ± 0.04 | 0.88 ± 0.08 | 0.82 ± 0.11 |
| d'                  | 0.40 ± 0.09 | 0.46 ± 0.04 | 0.64 ± 0.07 | 0.59 ± 0.09 |
|                       |      |        |      |        |
| **vSD#2** (n = 10; 14) |      |        |      |        |
| FAR                 | 0.60 ± 0.05 | 0.36 ± 0.10 | 0.19 ± 0.02 | 0.27 ± 0.04 |
| HR                  | 0.40 ± 0.02 | 0.48 ± 0.04 | 0.64 ± 0.07 | 0.59 ± 0.09 |
| d'                  | 0.37 ± 0.02 | 0.40 ± 0.04 | 0.41 ± 0.06 | 0.25 ± 0.09 |
|                       |      |        |      |        |
| **vSD#3** (n = 7; 14) |      |        |      |        |
| FAR                 | 0.55 ± 0.05 | 0.41 ± 0.12 | 0.24 ± 0.02 | 0.31 ± 0.04 |
| HR                  | 0.37 ± 0.02 | 0.40 ± 0.04 | 0.41 ± 0.06 | 0.25 ± 0.09 |
| d'                  | 0.31 ± 0.02 | 0.41 ± 0.04 | 0.20 ± 0.07 | 0.17 ± 0.05 |
|                       |      |        |      |        |
| **vSD#4** (n = 6; 14) |      |        |      |        |
| FAR                 | 0.64 ± 0.04 | 0.34 ± 0.12 | 0.24 ± 0.02 | 0.35 ± 0.04 |
| HR                  | 0.31 ± 0.02 | 0.41 ± 0.04 | 0.20 ± 0.07 | 0.17 ± 0.05 |
| d'                  | 0.32 ± 0.02 | 0.40 ± 0.05 | 0.30 ± 0.02 | 0.39 ± 0.05 |
|                       |      |        |      |        |
| **Fixed SD** (n = 6; 14) |      |        |      |        |
| FAR                 | 0.66 ± 0.05 | 0.49 ± 0.06 | 0.17 ± 0.03 | 0.23 ± 0.03 |
| HR                  | 0.39 ± 0.03 | 0.42 ± 0.04 | 0.74 ± 0.15 | 0.55 ± 0.17 |
| d'                  | 0.71 ± 0.05 | 0.54 ± 0.05 | 0.54 ± 0.13 | 0.60 ± 0.10 |
|                       |      |        |      |        |
| **S+ probability (%)** (n = 8; 14) |      |        |      |        |
| FAR                 | 0.74 ± 0.05 | 0.55 ± 0.09 | 0.20 ± 0.02 | 0.26 ± 0.03 |
| HR                  | 0.28 ± 0.02 | 0.34 ± 0.03 | 0.29 ± 0.11 | 0.24 ± 0.11 |
| d'                  | 0.50 ± 0.06 | 0.47 ± 0.03 | 0.71 ± 0.13 | 0.59 ± 0.23 |
|                       |      |        |      |        |
| **ITI (s)** (n = 8; 14) |      |        |      |        |
| Fixed SD (n = 10; 14) |      |        |      |        |
| FAR                 | 0.45 ± 0.04 | 0.27 ± 0.09 | 0.23 ± 0.02 | 0.30 ± 0.04 |
| HR                  | 0.50 ± 0.04 | 0.45 ± 0.04 | 0.45 ± 0.03 | 0.42 ± 0.03 |
| d'                  | 0.53 ± 0.06 | 0.35 ± 0.08 | 0.29 ± 0.02 | 0.39 ± 0.05 |
|                       |      |        |      |        |
| **Length (min)** (n = 6; 14) |      |        |      |        |
| FAR                 | 0.70 ± 0.05 | 0.45 ± 0.11 | 0.16 ± 0.01 | 0.24 ± 0.04 |
| HR                  | 0.36 ± 0.02 | 0.41 ± 0.05 | 0.66 ± 0.08 | 0.60 ± 0.12 |
| d'                  | 0.78 ± 0.03 | 0.61 ± 0.10 | 0.13 ± 0.02 | 0.18 ± 0.03 |
|                       |      |        |      |        |
| **Distractors** (4 s) (n = 10; 14) |      |        |      |        |
| Non-congruent       | 0.72 ± 0.07 | 0.49 ± 0.10 | 0.16 ± 0.02 | 0.23 ± 0.05 |
| FAR                 | 0.70 ± 0.05 | 0.45 ± 0.11 | 0.16 ± 0.01 | 0.24 ± 0.04 |
| HR                  | 0.32 ± 0.02 | 0.40 ± 0.05 | 1.00 ± 0.07 | 0.82 ± 0.11 |
| d'                  | 0.40 ± 0.04 | 0.75 ± 0.17 | 0.74 ± 0.10 | 0.75 ± 0.17 |
|                       |      |        |      |        |
| **Distractors** (2.5 s) (n = 9; 14) |      |        |      |        |
| Non-congruent       | 0.56 ± 0.05 | 0.42 ± 0.09 | 0.20 ± 0.02 | 0.27 ± 0.03 |
| FAR                 | 0.36 ± 0.08 | 0.25 ± 0.08 | 0.37 ± 0.09 | 0.32 ± 0.09 |
| HR                  | 0.22 ± 0.05 | 0.27 ± 0.06 | 0.24 ± 0.04 | 0.28 ± 0.06 |
| d'                  | 0.56 ± 0.08 | 0.31 ± 0.11 | 0.39 ± 0.07 | 0.30 ± 0.12 |
|                       |      |        |      |        |

ACC: anterior cingulate cortex; c: response criterion; FAR: false alarm rate; HR: hit rate; d': discrimination sensitivity; SD: stimulus duration; vSD: variable stimulus durations; ITI: inter-trial interval.

Significant main effects of lesion are in bold and colour (see legend). Interaction effects between group and probe are denoted by colour only. N numbers are listed in the order ‘lesion’, followed by ‘sham’.

P <0.05 Significant effect of lesion
P <0.025
at one end and a reward magazine (with a photocell head entry detector) illuminated by a 3 W light bulb at the other end. A three-aperture mask (Kim et al., 2015) covered the touchscreen. The walls were clear Perspex with a metal grid floor. The chamber was housed within a sound attenuating box fitted with a fan for ventilation and masking of external noise, a pellet dispenser delivering reward pellets and a tone generator.

Procedure

**Pre-surgery training.** The training procedure is described elsewhere (Kim et al., 2015). In brief, animals were trained in four stages. In **Stage 1**, a trial started with the onset of a white square stimulus (3.5 cm × 3.5 cm) within a centrally located white frame on the touch-sensitive screen. The stimulus duration (SD) was 10 s, with a 2-s inter-trial interval (ITI, initiated at reward collection) and a limited hold (LH) of 10.5 s (i.e., responses were recorded at 0.5 s after the removal of the stimulus from the screen to account for responses initiated late during the stimulus presentation). A response to the stimulus within the LH resulted in stimulus removal, a 1-s tone, illumination of the magazine light and reward delivery. A session either terminated after 45 min or after 80 rewards had been collected. Throughout all testing, touches to the empty white frame during the ITI (‘ITI touch’) resulted in re-setting the ITI timer, thereby delaying the presentation of the next stimulus. When reaching the criterion of 60 responses to the stimulus (i.e., 60 rewards) in a 45-min session, **Stage 2** was introduced. In **Stage 2**, the target stimulus (S+) was presented (horizontal lines or vertical lines; counterbalanced across animals) and the SD was reduced to 4 s (LH=4.5 s). After a response to the stimulus, a short extension of the ITI was introduced (‘ingestion delay’; 5 s) to allow the animal to consume the reward. No other parameters were changed from Stage 1. The session lasted for 45 min or 60 rewards, whichever occurred first. The criterion for progressing to **Stage 3** was 60 rewards in a single session. In **Stage 3**, animals were presented with the S+ on 50% of the trials and a novel unrewarded stimulus (‘snowflake’, S–; see Kim et al., 2015) on 50% of the trials. If the animal responded to the S–, the stimulus was removed, the ITI was initiated and the next trial was a correction trial (in which the S– was presented repeatedly until the animal withheld a response). Animals were trained for at least eight sessions on **Stage 3**, and the performance criterion for moving on to the baseline rCPT procedure was a discriminative sensitivity (d′; see ‘Data analyses and statistics’ section) above 0.6. In the **baseline rCPT**, the ‘snowflake’ stimulus was replaced with four novel S– stimuli (see Kim et al., 2015). On a given session, the probability of the S+ stimulus being presented was 50%, with one of the four S– stimuli being presented on the remaining 50% of trials (in addition to correction trials, which were exclusively S– trials). No other parameters were changed between stage 3 and the baseline rCPT. Animals were trained on the baseline rCPT for a minimum of four sessions and the criterion for progressing was a d′ above 0.6. When criterion had been achieved, animals were exposed to rCPT probes both before and after quinolinic acid–induced lesions.

**Post-surgery probe testing.** After surgery recovery, all mice were tested on the baseline rCPT parameters until reaching a d′ of 0.6 for one session. The animals were then tested on a series of probe tasks designed to create challenging task conditions. In these probe tests, we systematically varied single task parameter while other parameters remained constant. These task manipulations have previously been used to gauge attentional functions in human studies (Berwid et al., 2005; Cattapan-Ludewig et al., 2005; Conners et al., 2003; Davies and Parasuraman, 1982; Epstein et al., 2007; Mass et al., 2008; Parasuraman, 1979; Rose et al., 2001; Stroh, 1971). The probe tests were presented in the order they are listed in Table 2.

**Manipulating SDs.** We introduced variable stimulus durations (vSD) based on the prediction that shorter SDs place greater demand on attentional processes through limited detection times (Mass et al., 2000; Parasuraman and Davies, 1984). We tested animals on four tests where vSD spanned different ranges. The different SDs were presented with an equal and random selection of each duration within each session. This included sessions using four different SDs (probe vSD#1: 1, 2, 3 and 4 s; probe vSD#2: 0.25, 0.5, 0.75 and 1 s) and sessions using three different SDs (probe vSD#3: 1, 2 and 3 s; probe vSD#4: 1, 3 and 5 s). Animals were tested for three sessions on each of the four vSD probes and presented data represent the mean of these three sessions. Animals were also assessed using probe test where the SD was fixed and changed across session (probe fixed SD: 1 and 5 s; four sessions of each probe) to assess if the observed phenotype in the vSD probes were related to the unpredictability of the SDs. In all SD probes, the LH was 0.5 s longer than the longest SD. All other task parameters remained constant and identical to the baseline rCPT procedure.

**Surgery.** Mice were placed in a stereotaxic frame (Kopf Instruments, Tujunga, CA, USA) under constant isoflurane gas anaesthesia. Following a midline incision of the skin, a flat skull surface was ensured prior to the drilling burr holes above injection sites (anterior-posterior axis (AP) +2.0, medial-lateral axis (ML) ±0.3 and dorsal-ventral axis (DV) −2.5; from Dura). For the lesion group, 0.4 µL of 60 mM quinolinic acid (2,3-Pyridinedicarboxylic acid, P3504-10G; Sigma-Aldrich, Gillingham, UK) in 0.1 M phosphate buffered saline (PBS) was infused at a rate of 0.1 µL/min; 5 min passed prior to raising the needle to ensure dispersion from the infusion site. For the sham surgery control group, the injector was lowered to the same coordinate as the lesion group, but nothing was infused. All animals were treated with a peripheral analgesic post-surgery (0.05 mg meloxicam, i.p.; Boehringer Ingelheim, Bracknell, UK). Animals were returned to food restriction and behavioural testing following full recovery from surgery.

**Manipulating target probability.** In this probe, the target probability was reduced from 50% to 30% between sessions to increase the demand on behavioural inhibition and attention when the target stimulus is less frequently presented (Berwid
Manipulating ITI. In this probe, the ITI increased from 2 to 4 s between sessions based on the prediction that longer ITIs challenge behavioural inhibition by extending the time period during which the withholding of responding is required (Conners et al., 2003; Epstein et al., 2007; Hervey et al., 2006; Rose et al., 2001). Animals were tested for four sessions with an SD of 2.5 s.

Manipulating session length. In this probe, the session length was extended from 45 to 90 min. Animals were tested for four sessions with an SD of 1 s. An extended session probe was administered to assess whether ACC-lesioned and sham mice differ in their ability to maintain rCPT performance when required to engage in the task for a longer period of time (Stroh, 1971).

Distractors. In this probe, the central test stimulus was flanked by two identical stimuli of an either congruent (the same reward contingency as the test stimulus) or incongruent (different reward contingency as the test stimulus) nature with the rational that distractors introduce noise and impair performance (Eriksen et al., 2005; Rose et al., 2001). Animals were tested for five sessions with an SD of 2.5 s.

Histology

At completion of behavioural testing, animals were terminally anaesthetised with sodium pentobarbital (Dolethal, Vetoquinol, UK) and perfused transcranially with 0.01 M PBS followed by 4% paraformaldehyde (PFA) in PBS. Brains were post-fixed in 4% PFA, immersed in 30% sucrose, and frontal cortical sections were sliced in 60 µm coronal sections. Slices were stained with Cresyl violet prior to immersion in descending concentrations of ethanol followed by xylene and mounting media. All sections were assessed and lesion extents were drawn according to a standard mouse brain atlas (Paxinos and Franklin, 2007).

Data analysis and statistics

In the rCPT, a response to the target stimulus (S+) was scored as a hit, failure to respond to the target stimulus was scored as a miss, withholding from responding to a non-target (S–) was scored as a correct rejection and responding to a non-target was scored as a false alarm. For each animal, hit rate (HR) was calculated as the number of hits as the ratio of the total number of S+ presentations. False alarm rate (FAR) was calculated as the number of false alarms as the ratio of the total number of S– presentations. Performances were also evaluated by signal detection measures’ discriminative sensitive (d′) and response bias (c) derived from FAR and HR. The discrimination sensitivity index d′ was calculated as in Macmillan and Creelman (2004)

\[ d' = z(\text{hit rate}) - z(\text{false alarm rate}) \]

with higher values showing a preference for responding to the target stimulus relative to non-target stimuli. The response criterion was calculated as

\[ c = -0.5(z(\text{hit rate}) + z(\text{false alarm rate})) \]

with larger c values indicating fewer responses to both the target and non-target stimuli. Correction trials (whereby a response to a non-target stimulus was always followed by another non-target stimulus trial) were included in all analysed data. Response latencies and reward retrieval latencies could not be analysed due to loss of data. Performances in the baseline rCPT was analysed by one-way analysis of variance (ANOVA) with lesion group as the between-subject variable. Performances in the rCPT probe tests were analysed by two-way repeated-measures ANOVAs with lesion group as the between-subject variable and probe manipulation (SD, target probability, ITI, session length or distractor condition) as the within-subject variable. The data from the probe tests of both ITI and target probability was compared to the mean performance on four baseline sessions where target probability was 50%, and the ITI was 2 s. For the session length probe, the 1-s fixed SD day was used as the control condition. All analyses were done using SPSS (v22.0, IBM Corp., Armonk, NY, USA).

Results

Histology

See Figure 1(a) and (b) for representative photomicrographs and schematic drawings of the lesioned group. No sham animals showed any damage beyond expected needle tracts. Damage in the lesioned group generally did not extend beyond two sequential 60 µm thick sections (with 720 µm distance between each collected...
The extent of damage along the anterior–posterior axis was restricted to AP −2.20 and AP −0.98, and was centred on cingulate cortex area 1 (Cg1). In three animals, damage extended ventrally into the prelimbic cortex. All lesioned animals had some damage to overlaying cortex, mainly secondary motor cortex, with three lesioned mice showing limited damage to primary motor cortex.

**Post-surgery: baseline rCPT**

There were no differences between groups in pre-surgery performance (data not shown). Sham and lesioned mice did not differ in sessions taken to recover to pre-surgery performance levels in the baseline rCPT (F1,20 = 0.764, p = 0.392; sham M: 6.50, standard deviation (STDEV) = 5.53; lesion M: 8.75, STDEV = 6.30). For the last 2 days of baseline rCPT testing using a 4-s SD, performance between the lesion and sham group was equivalent for HR (F1,20 = 1.612, p = 0.220; group × session length: F1,18 = 0.060, p = 0.810). Lesioned animals continued to make significantly more ITI touches (responses to the screen during the inter-trial interval) than sham controls (Table 2; F1,20 = 7.612, p = 0.012).

**Post-surgery probe tests**

**vSD.** Lesioned animals showed decreased values of the c parameter and increased FAR when vSD were introduced. When using vSD (1, 3 and 5 s), lesioned animals showed an SD-independent decrease in response criterion (Figure 2(a); group: F1,18 = 5.973, p = 0.025; group × SD: F2,36 = 0.204, p = 0.816) and increased FAR (Figure 2(b); group: F1,18 = 6.433, p = 0.021; group × SD: F2,36 = 0.489, p = 0.617) relative to sham controls. Lesioned animals also made more ITI touches (Figure 2(b); F1,18 = 1.222, p = 0.284; group × SD: F2,36 = 0.371, p = 0.392) or HR (Figure 2(b); group: F1,18 = 0.529, p = 0.476; group × SD: F2,36 = 0.074, p = 0.929).

**Target probability.** When reducing the target probability, lesioned animals showed a probability-independent decrease in response criterion (Figure 2(c); group: F1,20 = 6.501, p = 0.019; group × probability: F1,20 = 0.778, p = 0.388) and a probability-independent increase in FAR (Figure 2(d); group: F1,20 = 6.176, p = 0.022; group × probability: F1,20 = 0.521, p = 0.479). Lesions did not affect HR (Figure 2(d); group: F1,20 = 2.069, p = 0.166; group × probability: F1,20 = 1.549, p = 0.228) or d′ (group: F1,20 = 0.321, p = 0.578; group × probability: F1,20 = 0.076, p = 0.786). Target probability had no effect on HR, FAR, c, d′ or ITI touches (Figure 2(c and d); all ps ≥ 0.084).

**ITIs.** When the event rate of the session was slowed by prolonging the ITI from 2 to 4 s, lesioned animals showed an ITI-independent decrease in response criterion (Figure 2(e); group: F1,20 = 5.653, p = 0.028; group × ITI: F1,20 = 1.016, p = 0.325) and an ITI-independent increase in FAR (Figure 2(f); group: F1,20 = 4.576, p = 0.045; group × ITI: F1,20 = 1.018, p = 0.325). There was no effect of group on HR (Figure 2(f); group: F1,20 = 1.973, p = 0.176; group × ITI: F1,20 = 0.845, p = 0.369) or d′ (Figure 2(e); group: F1,20 = 0.119, p = 0.734; group × ITI: F1,20 = 0.001, p = 0.975). The longer ITI caused a decrease in c (F1,20 = 10.289, p = 0.004) and an increase in FAR (F1,20 = 6.836, p = 0.017) without affecting d′ (F1,20 = 2.945, p = 0.102), HR (F1,20 = 1.139, p = 0.299) or ITI touches (F1,20 = 0.387, p = 0.541) (Figure 2(e and f)).

**Session length.** When comparing the 90-min session to the baseline 45-min session, there were near-significant main effects of lesion on c (Figure 2(g); group: F1,18 = 3.889, p = 0.064; group × session length: F1,18 = 1.765, p = 0.201) and FAR (Figure 2(h); group: F1,18 = 4.119, p = 0.057; group × session length: F1,18 = 1.612, p = 0.220). In the 90-min session, lesioned mice made more ITI touches than sham mice (Table 2; F1,18 = 8.815, p = 0.008). There was no effect on HR (Figure 2(h); group: F1,18 = 0.702, p = 0.413; group × session length: F1,18 = 1.585, p = 0.224) or d′ (Figure 2(g); group: F1,18 = 1.162, p = 0.295; group × session length: F1,18 = 0.060, p = 0.810).

**Flanking distractors.** When introducing distractors (using a 4-s SD), there were trends for a distractor-independent decrease in c (Figure 3(a); group: F1,20 = 4.288, p = 0.052; group × trial type: F1,20 = 0.377, p = 0.688) and distractor-independent increase in FAR (Figure 3(b); group: F1,20 = 4.019, p = 0.059; group × trial type: F1,20 = 0.018, p = 0.982) in lesioned animals. Lesioned animals had significantly higher HRs than sham controls (Figure 3(d); group: F1,20 = 4.859, p = 0.039; group × trial type: F1,20 = 0.327, p = 0.723), but no effect on d′ (group: F1,20 = 0.605, p = 0.446; group × trial type: F1,20 = 0.564, p = 0.584). On trials that included distractors, animals showed decreased FAR (F2,40 = 21.241, p < 0.0001) and decreased HR.
Hvoslef-Eide et al.

(F2,40 = 10.372, p < 0.0001). Distractors did not affect $d'$ ($F_{2,40} = 1.282, p = 0.289$). There were no significant differences in performance on congruent versus incongruent distractor trials. The data from distractor trials with 2.5 or 1 s SD are summarised in Table 1.

Discussion

We have assessed whether lesion disruption of the ACC impacts performance in a recently developed touchscreen rodent task that closely mimics widely used human CPT procedures. We validate the task for cross-species translational studies by showing that damage to the ACC of the mouse prefrontal cortex produces a more liberal response criterion resulting from increased FARs together with modest increases in responding to target stimuli, as well as increased ITI responses. Lesions were without effect on attentional function as measured by discriminative sensitivity $d'$. This behavioural phenotype was consistent throughout rCPT testing and was observed most robustly when task parameters were set to increase task difficulty. The data are in general agreement with studies implicating the anterior cingulate in error detection and suppression of inappropriate responses and indicate that the rCPT may be useful as a translational measure of fronto-executive function.

The anterior cingulate has been implicated in various supporting functions in executive control (Corbetta and Shulman, 2002; Posner and Petersen, 1990). In human experimental studies, such functions consistently consist of processing of error signals and response inhibition. In CPTs and Go/No-Go tasks, lesions encompassing anterior frontal regions are associated with a more liberal response criterion and increased FARs (Glosser and Goodglass, 1990; Salmaso and Denes, 1982). Neuroimaging and electrophysiological studies show that false alarm errors consistently activate the anterior cingulate (Carter et al., 1998; Rubia et al., 2001). The false alarm-related ACC activity is stronger than the activity following...
correct responses or following correct inhibitions (Braver et al., 2001; Hester, 2004), which may support adjustments such as speed/accuracy trade-off and behavioural remedial actions following inappropriate responses (Gehring and Knight, 2000; Pailing et al., 2002; Scheffers et al., 1996). Furthermore, measures of event-related potentials using cued CPTs show increased ACC activity prior to non-target trials relative to target trials (Fallgatter et al., 2002) implicating the region in response inhibition and the mediation of an internal representation of ‘don’t respond’ (Braver et al., 2001). Aberrant structural and error-related anterior cingulate activity may also contribute to impairments in response inhibition tasks in mental health disorders such as attention deficit hyperactivity disorder (ADHD; Rubia et al., 2001), obsessive-compulsive disorder (OCD; Fitzgerald et al., 2005; Gehring and Knight, 2000), schizophrenia (Fallgatter et al., 2003; Salgado-Pineda et al., 2004), dementia (Sanchez-Castaneda, 2009) and drug abuse (Forman et al., 2004; Hester and Garavan, 2004; Leland et al., 2008). The observation of lower response criterion and increased FARs in ACC-lesioned animals is in broad agreement with such human studies and suggests some cross-species functional homology in the mouse.

The response profile of ACC-lesioned animals is also in general agreement with data from 5- and 3-serial reaction time tasks (CSRTT) that demonstrate the importance of the integrity of, and balanced transmission in, the ACC for inhibitory response control and the processing of incorrect responses. In the 5-CSRTT, consistent with the current data, anterior cingulate lesions in the rat can cause selective impulsive-like increases in premature responding without affecting discriminative sensitivity in the 5-CSRTT (Muir et al., 1996), although a chemogenetic silencing of the dorsal ACC in mice did not alter response control in the same task (Koike et al., 2016). High-impulsive rats also show increased dopamine turnover (Dalley et al., 2002), decreased γ-Aminobutyric acid (GABA) binding (Jupp et al., 2013) and decreased metabolic activity in the anterior cingulate regions as measured by [14C]deoxyglucose (DG) uptake (Barbelivien et al., 2001), and intra-ACC glutamic acid decarboxylase (GAD) inhibition selectively increases premature responses in the three-choice serial reaction time task (Pehrson et al., 2013). Electrophysiological recordings in the rat show, like

![Figure 3. Performance of ACC-lesioned and sham controls in the rCPT when challenged with flanking congruent or incongruent distractors. Data are presented as mean±SEM values. ACC-lesioned animals showed significantly higher hit rate and a general tendency for increased false alarm rate and lower response criterion compared to sham mice. The presence of distractors significantly reduced the hit rate and false alarm rate in both groups. Asterisks denote significant main effect of group at p<0.05.

c: response criterion; d': discrimination sensitivity.](image-url)
humans, increased ACC activity prior to stimulus onset and following incorrect responses (Totah et al., 2009) as well as altered ACC-prelimbic synchrony prior to stimulus onset (Totah et al., 2013). Notably, the behavioural profile of pharmacological animal models of psychiatric disorders includes comparable deficits in inhibitory response control. This includes rats subchronically treated with phenylcyclidine (PCP) in the 5C-CPT procedure (Barnes et al., 2012), repeated amphetamine administration in the sustained attention task (SAT) (Deller and Sarter, 1998), systemic N-methyl-D-aspartate (NMDA) antagonist treatment in the 5-CSRTT (Amitai et al., 2007; Paine and Carlezon, 2009) and the MAM-E17 model in the rCPT (Mar et al., 2017), which are all associated with increased false alarm errors. Here, we demonstrate that disinhibitory behavioural effects of ACC lesioning are also detected in the rCPT, indicating that the task is a valid approach for studying prefrontal function in the mouse that is of psychiatric relevance.

Yet ACC lesioning did not cause apparent effects on attention as defined as changed in discrimination sensitivity. The phenotype was characterised by a decrease in response criterion driven primarily by a consistent, significant increase in the FAR, with smaller increases in HR that were significant only on select probes (decreasing SDs or with flanking distractors). The increase in ITI responses also points to a general disinhibitory effect of ACC dysfunction on the CPT. The lack of interactions between lesions and attentional difficulty of the probe tests also suggests that the phenotype is unrelated to attention. In a parallel effort to examine the functional heterogeneity of the rat medial prefrontal cortex (mPFC) on rCPT (Fisher et al., unpublished), ACC-lesioned rats showed only a transient decrease in discrimination sensitivity, with no indication of impaired inhibitory control. Both rat and mouse ACC lesions leaving discrimination sensitivity largely unchanged suggest that the ACC is not critical for attentional functioning as measured by rCPT. In the 5-CSRTT, a test of visuospatial stimulus detection and response inhibition, some rat studies have observed impairments in discriminatory sensitivity following ACC lesions (Chudasama et al., 2003; Passetti et al., 2002), but these lesions included dorsal prelimbic cortex, and an ACC-restricted lesion failed to impair accuracy (Muir et al., 1996). Pharmacological, optogenetic and chemogenetic manipulations of the ACC have observed attentional disruptions on the 3- or 5-CSRTT, however, in mice and rats (Kim et al., 2015; Koike et al., 2016; Pehrson et al., 2013), suggesting that the 5-CSRTT and the rCPT are sensitive to different deficits in performance following ACC damage and may offer a complimentary function when assessing attentional and response control. This, in combination with the consistent way in which the current data support the human literature on ACC and response control, highlights the importance of behavioural tasks with high cross-species translational value.

In the rCPT, lesions of the rat medial prefrontal cortex, including prelimbic and infralimbic subregions, impaired discrimination sensitivity (d′) on baseline rCPT (Mar et al., unpublished). More specific prelimbic cortex lesions produced d' reductions in probes where SD was reduced or the event rate was high (Fisher et al., unpublished). Together, these results suggest that this area is more critical for attentional processing in this task than the ACC. In support of this, Granon (1998) found prelimbic cortex (PL) lesions in the rat to disrupt a brightness-discrimination-based CPT in rats but not impair two-choice serial reaction time task performance, pointing to a distinct role for PL function in sustained attention. Passetti et al. (2002) found that, by manipulating ITIs, PL-ACC lesions disrupt the temporal sequencing of visuospatial responding and that this may also cause accuracy impairments in the 5-CSRTT. A further possibility is that ACC dysfunction can impair divided detection, which possibly could serve to leave focused attention intact (Lashley, 1931; Petruno et al., 2013; Pöppel et al., 1973; Stoerig et al., 1985). The anterior cingulate exhibits heterogeneity in its regional organisation, and hence possibly its functioning, in both humans (Braver et al., 2001; Kiehl et al., 2000; Menon et al., 2001) and rodents (Delatour and Gisquet-Verrier, 2001; Heidbreder and Groenewegen, 2003), which may account for some of the inconsistent effects of ACC dysfunction on discriminative sensitivity.

As well as response impulsivity, the functional heterogeneity of the ACC could support associative learning and coding unsigned prediction errors (Bussey et al., 1997; Cardinal et al., 2003; Hayden et al., 2011), memory (Cabeza et al., 1997; Frankland et al., 2004; Petit et al., 1998; Tang et al., 2005), motor coordination (Paus et al., 1993; Procyk et al., 2000) and novelty detection (Clark et al., 2000). However, there is little to suggest that the response disinhibitory effects of the ACC lesion derive from impairments in domains such as motoric function, learning and memory or novelty processing per se as (a) the lesion did not affect discrimination sensitivity – hence memory as well as attention is unaffected; (b) the deficits were not present on baseline, fixed SD trials, indicating that motoric functions and alertness were not directly affected; and (c) animals were well trained in the task and pre-exposed to the probe tests before lesioning, which minimised any learning and novelty effects on performance. Lesions also did not affect re-learning of the task post-surgery.

In addition to a role of the ACC in response impulsivity (inability to withhold a response), the area has been implicated in choice impulsivity (impulsive decision making: Winstanley et al., 2006). The ACC regulates the amount of effort rats are willing to invest in order to obtain a reward (Rudebeck et al., 2006), with dorsal ACC-lesioned rats preferring low-cost, low-reward options over the high-cost, high-reward alternative selected by shams (Walton et al., 2003). Although the rCPT is not specifically designed to assess choice impulsivity (e.g. there is no more physical effort associated with responding to a target than a non-target), it seems unlikely that an impairment in choice impulsivity would result in the pattern of performance impairment observed in the current study, most consistently being an increase in the FAR, a response profile that is more in keeping with impulsive response than impulsive choice. The lowest cost option, no response, is not chosen more often by lesioned mice than shams.

The secondary motor cortex (M2) has been shown to support performances in a temporal discounting procedure, with localised GABA agonists introducing cross-trial variability in the capacity to wait for large, delayed rewards (Murakami et al., 2017). The ACC-lesioned mice in the current study all showed some damage to M2 (roughly a sixth of the total M2 volume on average), raising the possibility that the behavioural effects are produced by damage to ACC and/or M2. However, in the study by Murakami et al. (2017), M2 inactivation was found to introduce both increased and decreased waiting times in rats, which is different from the consistently disinhibited profile observed in the current study. Moreover, M2 was shown to support delay discounting (Murakami et al., 2017), and the rCPT has no obvious discounting component; non-target trials in the rCPT represent no reward and responses to non-target results in further delay in the opportunity to obtain any reward. Under these current
conditions, the ACC has repeatedly been found to be critical (e.g. Barbelivien et al., 2001; Dalley et al., 2002; Jupp et al., 2013; Muir et al., 1996; Pehrson et al., 2013).

The introduction of flanking distractors disrupted the performance of both groups through general reductions in responding; distractors increased the response criterion c through decreasing hit and FARs. The higher HR of lesioned mice compared to sham mice in one distractor probe could, in the absence of other significant differences, be interpreted as an improvement in attention. When seen in light of the pattern of results across the study, as well as the numerically higher values of responding in lesioned mice in general, the increase in HR seems more in line with a general disinhibited response profile. In agreement with a previous rCPT study with mice (Kim et al., 2015), there were no congruency effects, and the inclusion of distractors did not affect d’.

This is in contrast to the pattern of responding of rats with mPFC lesions on rCPT, as well as several different pharmacological rat models, where congruent and incongruent distractors numerically improved and impaired performance, respectively, in comparison to non-distractor trials, with no change in the overall level of responding (Mar et al., unpublished; Fisher et al., unpublished; Mar et al., 2017). The rat data are in line with human studies of sustained attention using flanker tasks (Eriksen, 1995). The reductions in responding in mice may be due to animals interacting with the distractors themselves, rather than the responsive stimuli at the centre of the screen (Kim et al., 2015). In this view, the distractors work excessively well in mice in that animals are distracted from responding to the central stimulus altogether. Ongoing work is addressing this possibility with the aim of developing distractors that can disrupt attention and inhibitory control in mice.

**Conclusion**

Human performance on CPTs is reliant on activity in the ACC for the detection of false alarm errors and response inhibition on non-target trials. In broad agreement with such studies, lesions centred on the anterior cingulate in the mouse produced impairments in inhibitory response control as assessed by the touchscreen rCPT. This suggests that the rCPT has validity for assessing prefrontal cortical–dependent functions in the mouse and may have the capability of providing meaningful translationally relevant links between animal and human cognition.

**Acknowledgements**

The authors thank Jurga Mituzaitė and Sophie Naddell for valuable assistance with behavioural testing. A.C.M. and T.J.B. contributed equally to this work.

**Declaration of conflicting interests**

T.W.R. discloses consultancy with Cambridge Cognition, H. Lundbeck A/S, Unilever and Mundipharma and has research grants with H. Lundbeck A/S and Shionogi. L.M.S. and T.J.B. consult for Campden Instruments, Ltd. J.M.H. was supported by MRC and Eli Lilly through CASE studentship (MR/L01582X/1) in collaboration with Eli Lilly.

**Funding**

The research leading to these results has received support from the Innovative Medicine Initiative Joint Undertaking under grant agreement number 115008 of which resources are composed of The European Federation of Pharmaceutical Industries (EFPIA) in-kind contribution and financial contribution from the European Union’s Seventh Framework Programme (FP7/2007-2013). The Behavioural and Clinical Neuroscience Institute is co-funded by the Medical Research Council and the Wellcome Trust.

**Supplementary materials**

The rCPT is available commercially for Campden Instruments touchscreen chambers. Contact Dr Martha Hvoslef-Eide for data requests.

**ORCID iDs**

Martha Hvoslef-Eide https://orcid.org/0000-0002-5922-5824
Jonathan M. Hailwood https://orcid.org/0000-0002-5835-2143

**References**

Amitai N, Semenova S and Markou A (2007) Cognitive-disruptive effects of the psychotomimetic phencyclidine and attenuation by atypical antipsychotic medications in rats. *Psychopharmacology* 193(4): 521–537.

Barbelivien A, Ruotsalainen S and Sirviö J (2001) Metabolic alterations in the prefrontal and cingulate cortices are related to behavioral deficits in a rodent model of attention-deficit hyperactivity disorder. *Cerebral Cortex* 11(11): 1056–1063.

Barch DM, Braver TS, Carter CS, et al. (2009) CNTRICS final task selection: Executive control. *Schizophrenia Bulletin* 35(1): 115–135.

Barnes SA, Young JW and Neill JC (2012) Rats tested after a washout period from sub-chronic PCP administration exhibited impaired performance in the 5-Choice Continuous Performance Test (5C-CPT) when the attentional load was increased. *Neuropsychopharmacology* 62(3): 1432–1441.

Borns GS, Cohen JD and Mintun MA (1997) Brain regions responsive to novelty in the absence of awareness. *Science* 276(5316): 1272–1275.

Berwid OG, Curko Kera EA, Marks DJ, et al. (2005) Sustained attention and response inhibition in young children at risk for attention deficit/ hyperactivity disorder. *Journal of Child Psychology and Psychiatry* 46(11): 1219–1229.

Botvinick MM, Cohen JD and Carter CS (2004) Conflict monitoring and anterior cingulate cortex: An update. *Trends in Cognitive Sciences* 8(12): 539–546.

Braver TS, Barch DM, Gray JR, et al. (2001) Anterior cingulate cortex and response conflict: Effects of frequency, inhibition and errors. *Cerebral Cortex* 11(9): 825–836.

Bussey TJ, Everitt BJ and Robbins TW (1997) Dissociable effects of cingulate and medial frontal cortex lesions on stimulus-reward learning using a novel Pavlovian autoshaping procedure for the rat: Implications for the neurobiology of emotion. *Behavioral Neuroscience* 111(5): 908–919.

Cabeza R, Grady CL, Nyberg L, et al. (1997) Age-related differences in neural activity during memory encoding and retrieval: A positron emission tomography study. *Journal of Neuroscience* 17(1): 391–400.

Cardinal RN, Parkinson JA, Marbini HD, et al. (2003) Role of the anterior cingulate cortex in the control over behavior by Pavlovian conditioned stimuli in rats. *Behavioral Neuroscience* 117(3): 566–587.

Carli M, Robbins TW, Evenden JL, et al. (1983) Effects of lesions to the anterior cingulate cortex in the control over behavior by Pavlovian conditioned stimuli in rats. *Cerebral Cortex* 11(3): 566–587.

Carli M, Robbins TW, Evenden JL, et al. (1983) Effects of lesions to the anterior cingulate cortex in the control over behavior by Pavlovian conditioned stimuli in rats. *Cerebral Cortex* 11(3): 566–587.

Cattapan-Ludewig K, Hilti CC, Ludewig S, et al. (2005) Rapid visual information processing in schizophrenic patients: The impact of cognitive load and duration of stimulus presentation. A pilot study. *Neuropsychobiology* 52(3): 130–134.
Chudasama Y, Passetti F, Rhodes SE, et al. (2003) Dissociable aspects of performance on the 5-choice serial reaction time task following lesions of the dorsal anterior cingulate, infralimbic and orbitofrontal cortex in the rat: differential effects on selectivity, impulsivity and compulsivity. Behavioural Brain Research 146(1–2):105–119.

Clark VP, Fannon S, Lai S, et al. (2000) Responses to rare visual target and distractor stimuli using event-related fMRI. Journal of Neurophysiology 83(5): 3133–3139.

Conners CK, Epstein JN, Angold A, et al. (2003) Continuous performance test performance in a normative epidemiological sample. Journal of Abnormal Child Psychology 31(5): 555–562.

Corbetta M and Shulman GL (2002) Control of goal-directed and stimulus-driven attention in the brain. Nature Reviews Neuroscience 3(3): 201–215.

Comblart BA, Lencz T, Smith CW, et al. (2003) The schizophrenic prefrontal cortex revisited: A neurodevelopmental perspective. Schizophrenia Bulletin 29(4): 631–651.

Dalley JW, Cardinal RN and Robbins TW (2004) Prefrontal executive and cognitive functions in rodents: Neural and neurochemical substrates. Neuroscience & Biobehavioral Reviews 28(7): 771–784.

Dalley JW, Theobald DE, Eagle DM, et al. (2002) Deficits in impulse control associated with tonically-elevated serotoninergic function in rat prefrontal cortex. Neuropsychopharmacology 26(6): 716–728.

Davies DR and Parasuraman R (1982) The Psychology of Vigilance. London: Academic Press.

Delatour B and Gisquet-Verrier P (2001) Involvement of the dorsal anterior cingulate cortex in temporal behavioral sequencing: Subregional analysis of the medial prefrontal cortex in rat. Behavioural Brain Research 126(1–2): 105–114.

Deller T and Sarter M (1998) Effects of repeated administration of amphetamine on behavioral vigilance: Evidence for ‘sensitized’ attentional impairments. Psychopharmacology 137(4): 410–414.

Epstein JN, Casey BJ, Tonev ST, et al. (2007) ADHD and medication-related brain activation effects in concordantly affected parent-child dyads with ADHD. Journal of Child Psychology and Psychiatry 48(9): 899–913.

Eriksen CW (1995) The flankers task and response competition: A useful tool for investigating a variety of cognitive problems. Visual Cognition 2(2–3): 101–118.

Fallgatter AJ, Bartsch AJ, Strik WK, et al. (2001) Test-retest reliability of electrophysiological parameters related to cognitive motor control. Clinical Neurophysiology 112(1): 198–204.

Fallgatter AJ, Bartsch AJ and Herrmann MJ (2002) Electrophysiological measurements of anterior cingulate function. Journal of Neural Transmission 109(5–6): 977–988.

Fallgatter AJ, Bartsch AJ, Zielasek J, et al. (2003) Brain electrical dysfunction of the anterior cingulate in schizophrenic patients. Psychiatry Research: Neuroimaging 124(1): 37–48.

Fitzgerald KD, Welsh RC, Gehring WJ, et al. (2005) Error-related hyperactivity of the anterior cingulate cortex in obsessive-compulsive disorder. Biological Psychiatry 57(3): 287–294.

Forman SD, Dougherty GG, Casey BJ, et al. (2004) Opiate addicts lack error-dependent activation of rostral anterior cingulate. Biological Psychiatry 55(5): 531–537.

Frankland PW, Bontempi B, Talton LE, et al. (2004) The involvement of the anterior cingulate cortex in remote contextual fear memory. Science 304(5672): 881–883.

Gehring WJ and Knight RT (2000) Prefrontal-cingulate interactions in action monitoring. Nature Neuroscience 3: 516–520.

Gehring WJ, Himle J and Nisenson LG (2000) Action-Monitoring Dysfunction in Obsessive-Compulsive Disorder. Psychological Science 11: 1–6.

Glosser G and Goodglass H (1990) Disorders in executive control functions among aphasic and other brain-damaged patients. Journal of Clinical and Experimental Neuropsychology 12(4): 485–501.

Granov S (1998) Evidence for the involvement of the rat prefrontal cortex in sustained attention. Quarterly Journal of Experimental Psychology, B: Comparative and Physiological Psychology 51(3): 219–233.

Green DM and Swets GA (1966) Signal Detection Theory and Psychophysics. New York: Wiley.

Hayden BY, Heilbronner SR, Pearson JM, et al. (2011) Surprise signals in anterior cingulate cortex: Neuronal encoding of unsigned reward prediction errors driving adjustment in behavior. Journal of Neuroscience 31(11): 4178–4187.

Heidbreder CA and Groenewegen HJ (2003) The medial prefrontal cortex in the rat: Evidence for a dorso-ventral distinction based upon functional and anatomical characteristics. Neuroscience & Biobehavioral Reviews 27(6): 555–579.

Hervey AS, Epstein JN, Curry JF, et al. (2006) Reaction time distribution analysis of neuropsychological performance in an ADHD sample. Child Neuropsychology 12(2): 125–140.

Hester R and Garavan H (2004) Executive dysfunction in cocaine addiction: Evidence for discordant frontal, cingulate, and cerebellar activity. Journal of Neuroscience 24(49): 11017–11022.

Horner AE, Heath CJ, Hvoslef-Eide M, et al. (2013) The touchscreen operant platform for testing learning and memory in rats and mice. Nature Protocols 8(10): 1961–1984.

Insel TR, Voon V, Nye JS, et al. (2013) Innovative solutions to novel drug development in mental health. Neuroscience & Biobehavioral Reviews 37(10): 2438–2444.

Jupp B, Caprioli D, Saigal N, et al. (2013) Dopaminergic and GABAergic markers of impulsivity in rats: Evidence for anatomical localisation in ventral striatum and prefrontal cortex. European Journal of Neuroscience 37(9): 1519–1528.

Kiehl KA, Liddle PF and Hopfinger JB (2000) Error processing and the rostral anterior cingulate: An event-related fMRI study. Psychophysiology 37(2): 216–223.

Kim CH, Hvoslef-Eide M, Nilsson SRO, et al. (2015) The continuous performance test (cCPT) for mice: A novel operant touchscreen test of attentional function. Psychophysiology 232(21–22): 3947–3966.

Kim H, Ahllund-Richter S, Wang X, et al. (2016) Prefrontal parvalbumin neurons in control of attention. Cell 164(1–2): 208–218.

Koike H, Demars MP, Short JA, et al. (2016) Chemogenetic inactivation of dorsal anterior cingulate cortex neurons disrupts attentional behavior in mice. Neuropsychopharmacology 41(4): 1014–1023.

Lashley KS (1931) Mass action in cerebral function. Science 73(1888): 245–254.

Leland DS, Arce E, Miller DA, et al. (2008) Anterior cingulate cortex and benefit of predictive cueing on response inhibition in stimulant dependent individuals. Biological Psychiatry 63(2): 184–190.

McGaughy J and Sarter M (1995) Behavioral vigilance in rats: Task validation and effects of age, amphetamine, and benzodiazepine receptor ligands. Psychopharmacology 117(3): 340–357.

Macmillan NA and Creelman CD (2004) Detection Theory: A User’s Guide. Cambridge: Cambridge University Press.

Mar AC, Horner AE, Nilsson S, et al. (2013) The touchscreen operant platform for assessing executive function in rats and mice. Nature Protocols 8(10): 1985–2005.

Mar AC, Nilsson S, Gamallo-Lana B, et al. (2017) MAM-E17 rat model impairments on a novel continuous performance task: Effects of potential cognitive enhancing drugs. Psychopharmacology 234(19): 2837–2857.

Mass R, Wolf K, Wagnier M, et al. (2000) Differential sustained attention/vigilance changes over time in schizophrenics and controls during a degraded stimulus Continuous Performance Test. European Archives of Psychiatry and Clinical Neuroscience 250(1): 24–30.

Menon V, Adleman NE, White CD, et al. (2001) Error-related brain activation during a Go/NoGo response inhibition task. Human Brain Mapping 12(3): 131–143.

Millan MJ, Agid Y, Brüne M, et al. (2012) Cognitive dysfunction in psychiatric disorders: Characteristics, causes and the quest for improved therapy. Nature Reviews: Drug Discovery 11(2): 141–168.
Muir JL, Everitt BJ and Robbins TW (1996) The cerebral cortex of the rat and visual attentional function: Dissociable effects of mediofrontal, cingulate, anterior dorsolateral, and parietal cortex lesions on a five-choice serial reaction time task. Cerebral Cortex 6(3): 470–481.

Murakami M, Shteingart H, Loewenstein Y, et al. (2017) Distinct sources of deterministic and stochastic components of action timing decisions in rodent frontal cortex. Neuron 94(4): 908–919.

Murphy ER, Fernando ABP, Uncuayl GP, et al. (2011) Impulsive behaviour induced by both NMDA receptor antagonism and GABA receptors. Psychopharmacology 219(2): 401–410.

Ng CW, Noblejas MI, Rodefer JS, et al. (2007) Double dissociation of attentional resources: prefrontal versus cingulate cortices. Journal of Neuroscience 27(45): 12123–12131.

Pailing PE, Segalowitz SJ, Dywan J, et al. (2002) Error negativity and response control. Psychophysiology 39(2): 198–206.

Paine TA and Carlezen WA Jr (2009) Effects of antipsychotic drugs on MK-801-induced attentional and motivational deficits in rats. Neuropeharmacology 56(4): 788–797.

Paine TA, Slipp LE and Carlezen WA (2011) Schizophrenia-like attentional deficits following blockade of prefrontal cortex GABAA receptors. Neuropsychopharmacology 36(8): 1703–1713.

Parasuraman R (1999) Memory load and event rate control sensitivity decrements in sustained attention. Science 205(4409): 924–927.

Parasuraman R and Davies DR (1984) Varieties of Attention. New York: Academic Press.

Paxinos G and Franklin KBJ (2007) The Mouse Brain in Stereotaxic Coordinates. San Diego: Gulf Professional Publishing.

Pehrson AL, Bondi CO, Totah NKB, et al. (2013) The influence of NMDA and GABA(A) receptors and glutamic acid decarboxylase (GAD) activity on attention. Psychopharmacology 225(1): 31–39.

Petit L, Courtney SM, Ungerleider LG, et al. (1998) Sustained activity in the medial wall during working memory delays. Journal of Neuroscience 18(22): 9429–9437.

Petruno SK, Clark RE and Reingel P (2013) Evidence that primary visual cortex is required for image, orientation, and motion discrimination by rats. PLoS ONE 8(2): e56543.

Pezze M, McGarry S, Mason R, et al. (2014) Too little and too much: Hypoactivation and disinhibition of medial prefrontal cortex cause attentional deficits. Journal of Neuroscience 34(23): 7931–7946.

Pöppel E, Held R and Frost D (1973) Residual visual function after frontal, cingulate, anterior dorsolateral, and parietal cortex lesions on a field defect due to a post-geniculate lesion. Nature 243(5405): 295–296.

Posner MI and Petersen SE (1990) The attention system of the human brain. Annual Review of Neuroscience 13(1): 25–42.

Robbins TW, Weinberger D, Taylor JG, et al. (1996) Dissociating executive functions of the prefrontal cortex [and discussion]. Philosophical Transactions of the Royal Society B: Biological Sciences 351(1346): 1463–1471.

Rose CL, Murphy LB, Schickendanz B, et al. (2001) The effects of event rate and signal probability on children’s vigilance. Journal of Clinical and Experimental Neuropsychology 23(2): 215–224.

Rosvold HE, Milsky AF, Sarason I, et al. (1956) A continuous performance test of brain damage. Journal of Consulting Psychology 20(5): 343–350.

Procyk E, Tanaka VL and Joseph JP (2000) Anterior cingulate activity during routine and non-routine sequential behaviors in macaques. Nature Neuroscience 3(5): 502.

Rubia K, Russell T, Overmeyer S, et al. (2001) Mapping motor inhibition: Conjunctive brain activations across different versions of Go/No-Go and Stop tasks. NeuroImage 13(2): 250–261.

Rudebeck PH, Walton ME, Smyth AN, et al. (2006) Separate neural pathways process different decision costs. Nature Neuroscience 9(9): 1161–1168.

Salgado-Pineda P, Junqué C, Vendrell P, et al. (2004) Decreased cerebral activation during CPT performance. NeuroImage 21(3): 840–847.

Salmaso D and Denes G (1982) Role of the frontal lobes on attention task: A signal detection analysis. Perceptual and Motor Skills 54(3): 1147–1150.

Sanchez-Castaneda C, Rene R, Ramirez-Ruiz B, et al. (2009) Correlations between gray matter reductions and cognitive deficits in dementia with Lewy Bodies and Parkinson’s disease with dementia. Movement Disorders 24(12): 1740–1746.

Sarter M, Givens B and Bruno JP (2001) The cognitive neuroscience of sustained attention: Where top-down meets bottom-up. Brain Research Reviews 35(2): 146–160.

Seidman LJ, Hellemann G, Nuechterlein KH, et al. (2015) Factor structure and heritability of endophenotypes in schizophrenia: Findings from the Consortium on the Genetics of Schizophrenia (COGS-1). Schizophrenia Research 163(1–3): 73–79.

Scheffers MK, Coles MG, Bernstein P, et al. (1996) Event-related brain potentials and error-related processing: An analysis of incorrect responses to go and no-go stimuli. Psychophysiology 33(1): 42–53.

Stoerig P, Hübner M and Pöppel E (1985) Signal detection analysis of residual vision in a field defect due to a post-geniculate lesion. Neurropsychologia 23(5): 589–599.

Stroh CM (1971) Vigilance: The Problem of Sustained Attention. Oxford: Pergamon Press.

Stuss DT, Shallite C and Alexander MP (1995) A multidisciplinary approach to anterior attentional functions. Annals of the New York Academy of Sciences 769(1): 191–211.

Tang J, Ko S, Ding H-K, et al. (2005) Pavlovian fear memory induced by activation in the anterior cingulate cortex. Molecular Pain 1: 6.

Totah NKB, Jackson ME and Moghaddam B (2013) Preparatory attention relies on dynamic interactions between prelimbic cortex and anterior cingulate cortex. Cerebral Cortex 23(3): 729–738.

Totah NKB, Kim YB, Homayoun H, et al. (2009) Anterior cingulate neurons represent errors and preparatory attention within the same behavioral sequence. Journal of Neuroscience 29(20): 6418–6426.

Tricklebank MD and Garner JP (2012) The possibilities and limitations of animal models for psychiatric disorders. In: Rankovic Z, Hargreaves R and Bingham M (eds) Drug Discovery for Psychiatric Disorders. Cambridge: Royal Society of Chemistry, pp. 534–557.

Walton ME, Bannerman DM, Alterscu K, et al. (2003) Functional specialization within medial frontal cortex of the anterior cingulate for evaluating effort-related decisions. Journal of Neuroscience 23(16): 6475–6479.

Weible AP, Rowland DC, Pang R, et al. (2009) Neural correlates of novel object and novel location recognition behavior in the mouse anterior cingulate cortex. Journal of Neurophysiology 102(4): 2055–2068.

Winstanley CA, Eagle DM and Robbins TW (2006) Behavioral models of impulsivity in relation to ADHD: Translation between clinical and preclinical studies. Clinical Psychology Review 26(4): 379–395.

Young JW, Light GA, Marston HM, et al. (2009) The 5-choice continuous performance test: Evidence for a translational test of vigilance for mice. PLoS ONE 4(1): e4227.

Zhu XO, Brown MW, McCabe BJ, et al. (1995) Effects of the novelty or familiarity of visual stimuli on the expression of the immediate early gene c-fos in rat brain. Neuroscience 69(3): 821–829.