
Using neural networks to decode EEG and read your thoughts

BUILDING A YES/NO CLASSIFIER TO HELP PEOPLE WITH CENTRAL NERVOUS SYSTEM INJURIES COMMUNICATE



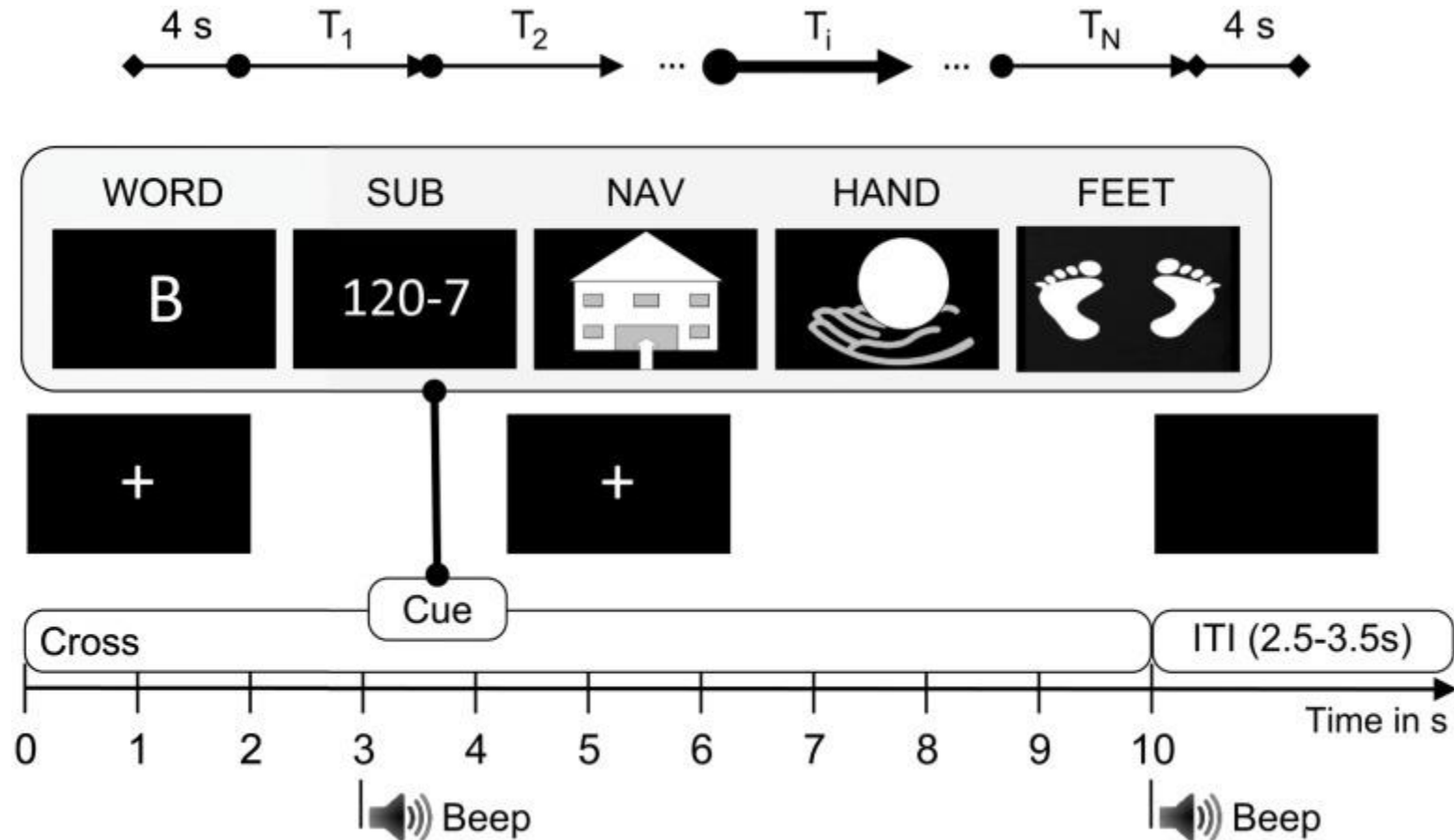
We are seeking to replicate and improve on the results of a recent scientific study

- The original study sought to **create the best yes/no binary predictor for nine participants with spinal cord injuries or major strokes.**
 - Each participant came for two sessions several days apart
 - At each session they wore an array of thirty EEG electrodes
- And most importantly for our purposes – **they released the raw data** so we can use it to try and replicate and improve on their results



Can we build a model to accurately differentiate between two of those five trial types?

Details of the original study



Source: Reinhold Scherer, Josef Faller, Elisabeth V. C. Friedrich, Eloy Opisso, Ursula Costa, Andrea Kübler, and Gernot R. Müller-Putz:
Individually Adapted Imagery Improves Brain-Computer Interface Performance in End-Users with Disability

200 trials conducted each day, 80 data points in each pairwise combination

Day 1	
Trial type	Times conducted
Word	40
Subtraction	40
Navigation	40
Hand	40
Feet	40
Total	200



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80 data points for each pairwise combination, split into train and test

Day 2

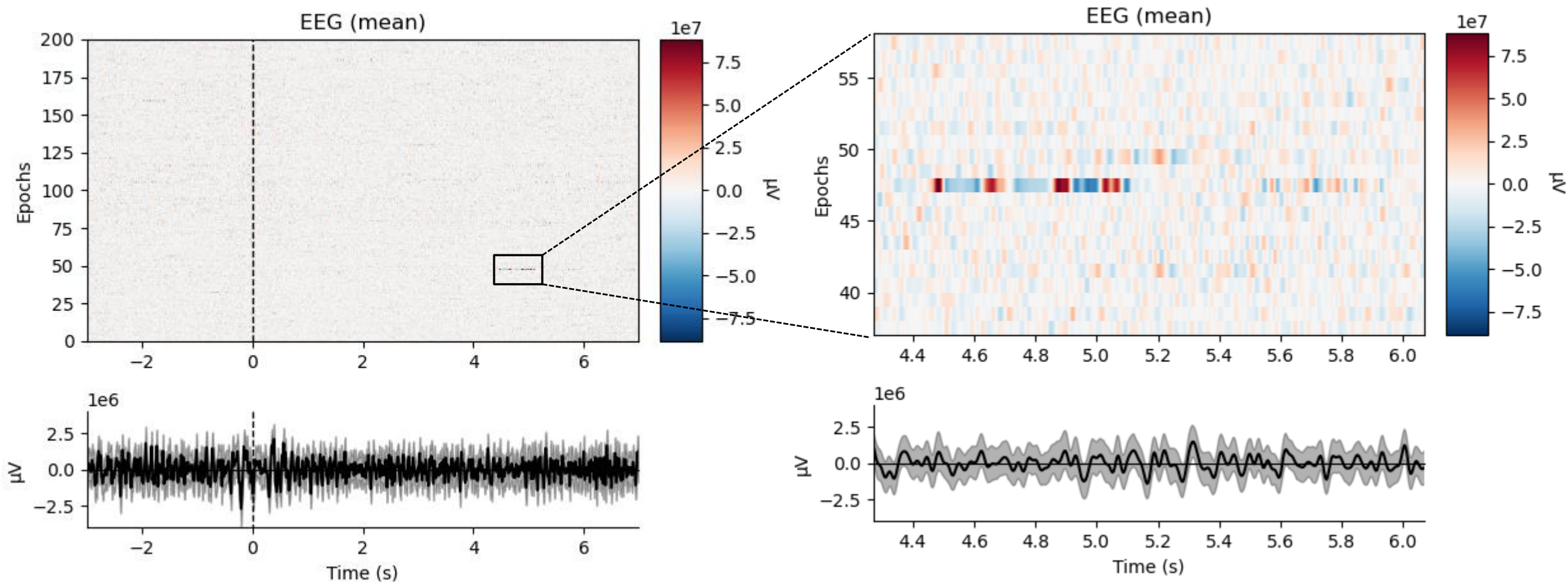
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Can't look at it until testing final model

A number of signal processing methods were tried to improve signal quality

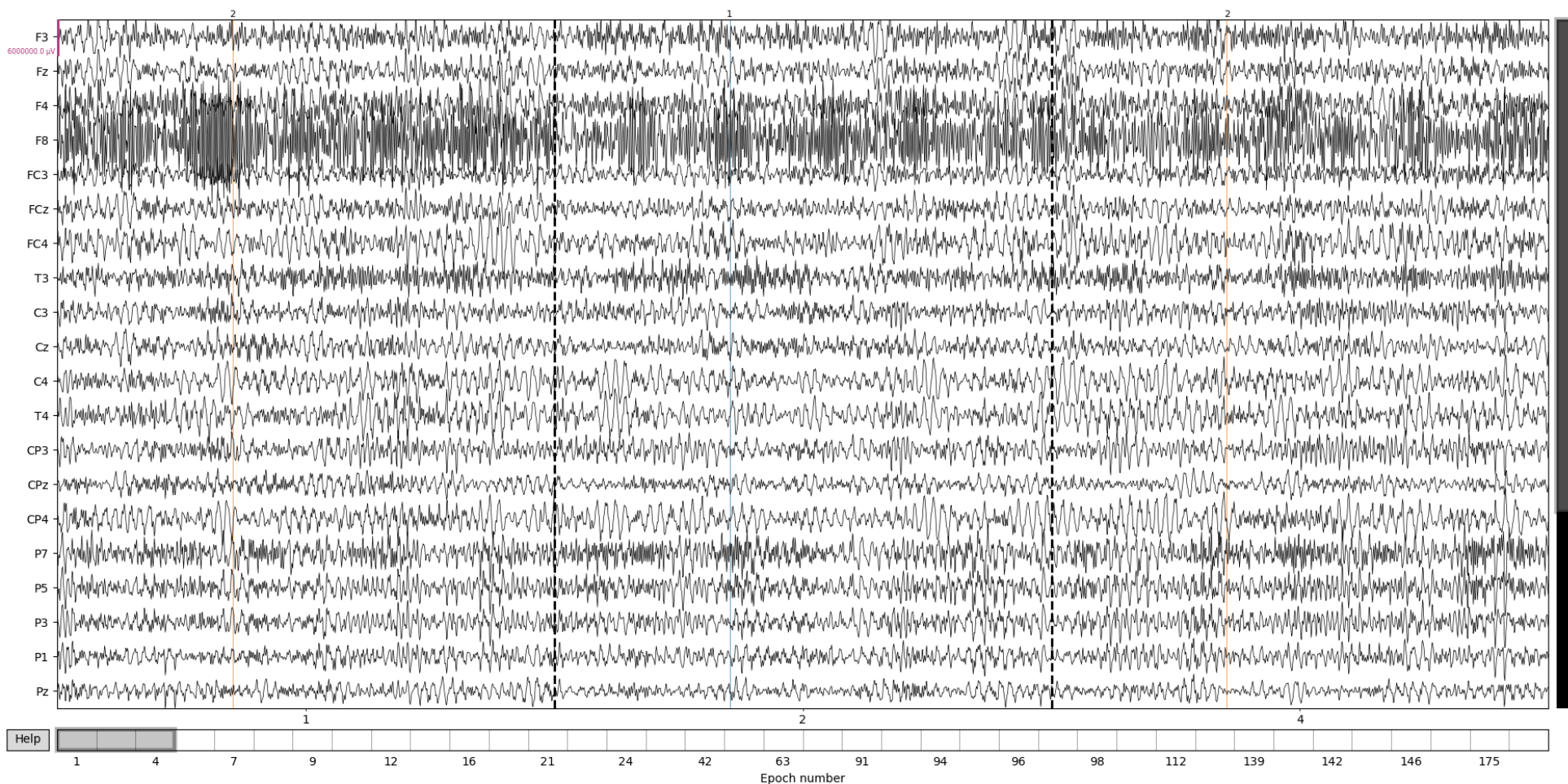
1. **Frequency filtering** (low pass and high pass filters)
2. Use **signal-space projections (SSP)** and **independent component analysis (ICA)**
3. **Baseline correction**
4. **Decimate data** (e.g., take every 2nd, 4th, and 8th samples)
5. **Drop trials** based on peak-to-peak amplitude or lack of peak to trough amplitude
6. **Common Spatial Patterns (CSP)** to reduce dimensionality of data

Dropping trials, visualized



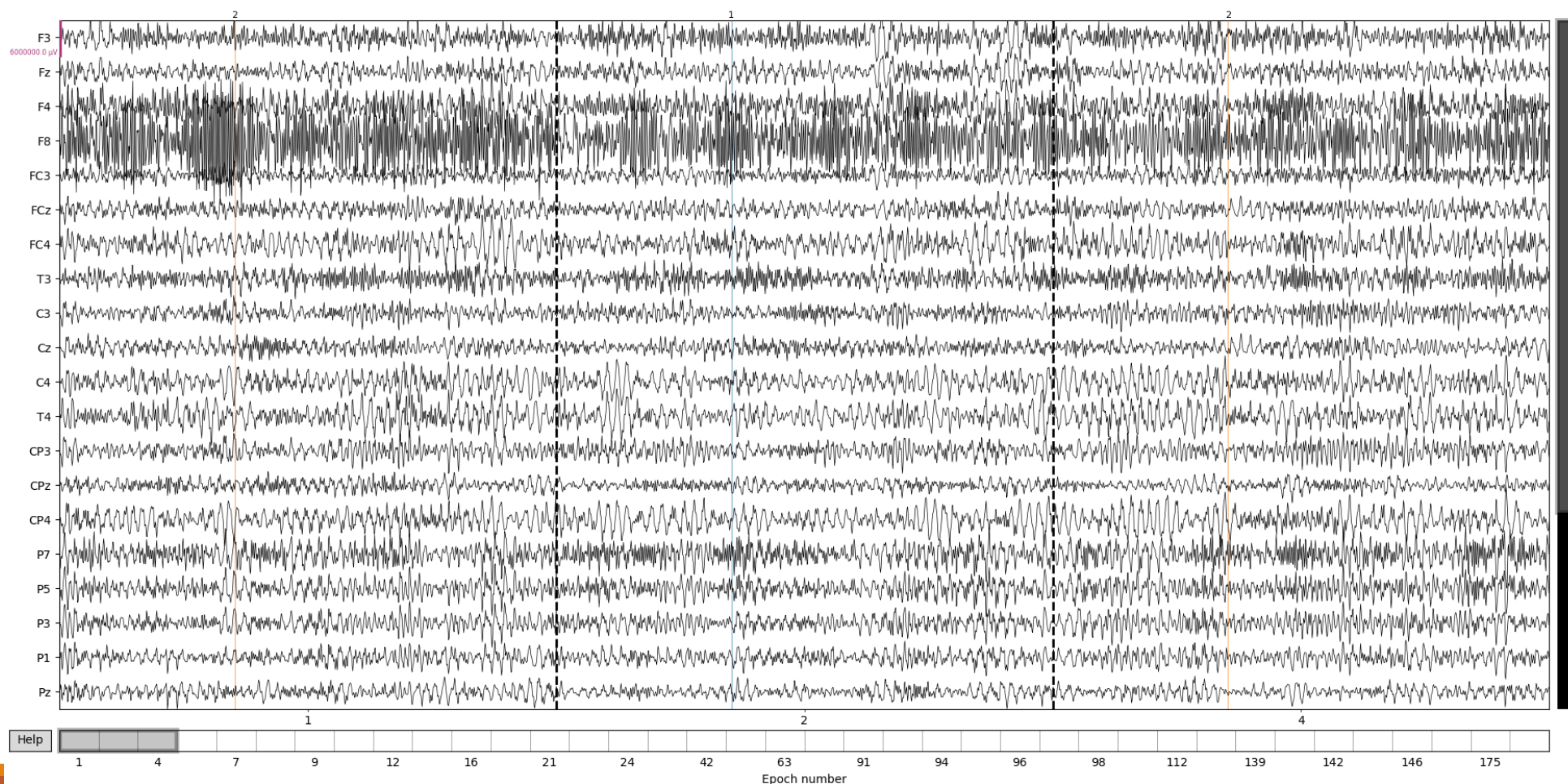
ICA visualized (1 of 2)

Before removing ICA components

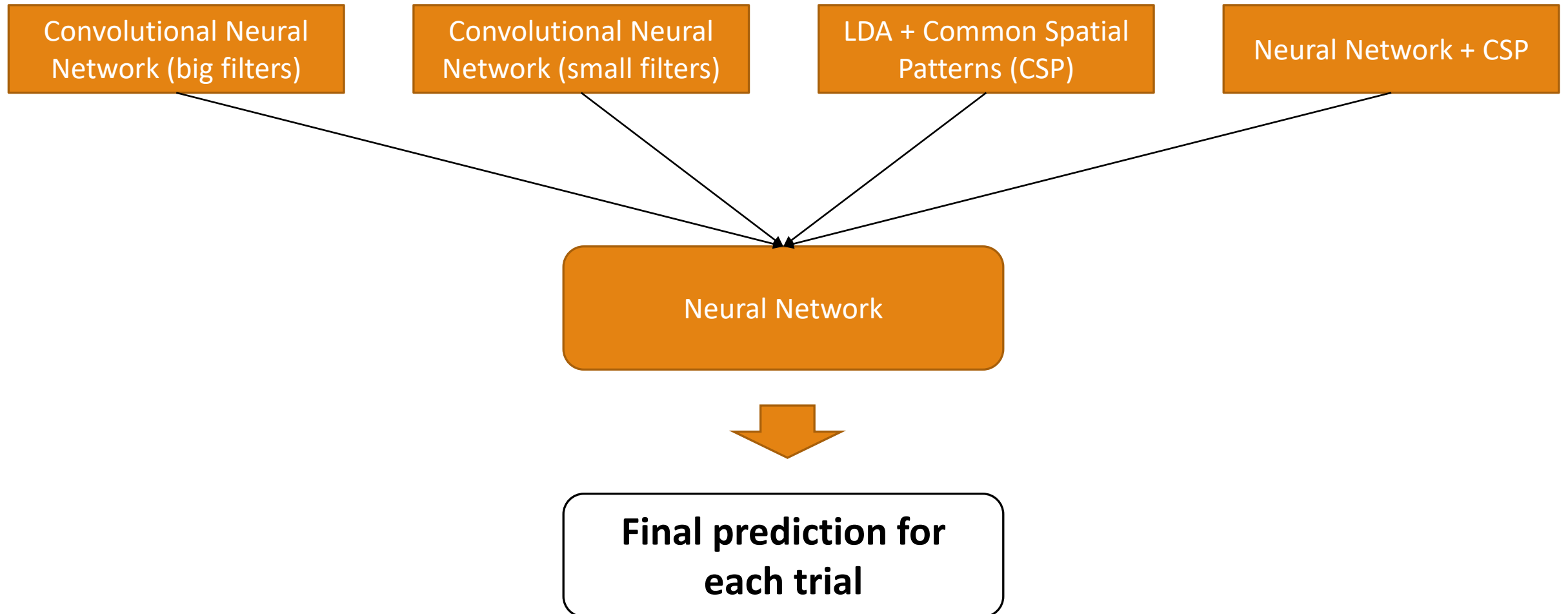


ICA visualized (1 of 2)

After removing ICA component 1



I combined several methods to try and solve the problem – **unique model for each subject**



The original study achieved 80% average accuracy across the nine subjects

Participant		E		F		J		G		L		H		C		D		A		md (n)
Mental task pairs		TPR	TNR	TPR	TNR	TPR	TNR	TPR	TNR	TPR	TNR	TPR	TNR	TPR	TNR	TPR	TNR	TPR	TNR	
		90	78	97	88	75	89	70	81	89	79	79	76	59	79	82	88	89	36	82 (7)
		76	83	70	82	81	89	70	77	69	97	90	55	48	79	61	82	72	91	76 (8)
		84	89	91	63	87	63	70	84	56	84	60	71	81	85	85	52	88	58	74 (6)
		87	100	88	66	75	73	87	55	96	88	64	71	77	85	91	52	68	68	74 (5)
		80	68	71	74	94	57	60	88	59	63	79	83	64	81	82	91	89	37	72 (7)
		68	87	55	94	68	70	84	65	73	72	69	72	67	71	84	73	67	61	72 (6)
		86	84	77	63	57	70	81	52	70	91	69	74	62	85	66	77	57	87	71 (6)
		64	73	82	65	68	68	58	84	78	53	67	83	67	71	58	81	78	67	69 (3)
		63	92	79	79	78	68	50	73	70	63	68	67	73	56	82	58	64	84	69 (4)
		70	68	70	66	56	80	74	65	48	84	62	74	63	80	48	87	79	52	68 (1)

TP(N)R < 70
 70 ≥ TP(N)R < 80
 TP(N)R ≥ 80

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Unfortunately I wasn't able to match that accuracy on session 2 data

Subject	A		C		D		E		F		G		H		J		L	
% Acc. (TPR, TNR)	87	10	48	85	0	100	0	100	73	27	100	0	88	6	97	49	54	36



Extremely **unbalanced positive vs negative accuracy** rates show the model has not successfully adapted to the shift to session 2.

Overall average accuracy is only 55%

Next steps

1. Use **different ensemble model** – neural network is overfitting
2. Utilize a **Reiman geometry** method for a new L1 model
 1. Supposed to outperform CSP on EEG problems
3. Implement a **rebiasing** method
 1. Essentially using the first few trials of session 2 to adjust the model to the shifted EEG patterns
4. Make **CNN models more generalizable**
 1. Resample the data (e.g., instead of looking at data from 0 - 5 seconds, create three sections of data 0 – 3 1 – 4 2 - 5)
5. Rerun analysis with **fewer dropped channels**
 1. The key to success here is more data – I should drop as little as possible