

# Brain-Machine Interfaces

**Intelligent robotics**

**Health Robotics**

Assistive robotics

Replacing robotics (e.g. prosthesis)

Rehabilitation robotics

**Neurotechnology**

Physiologically connected robotics

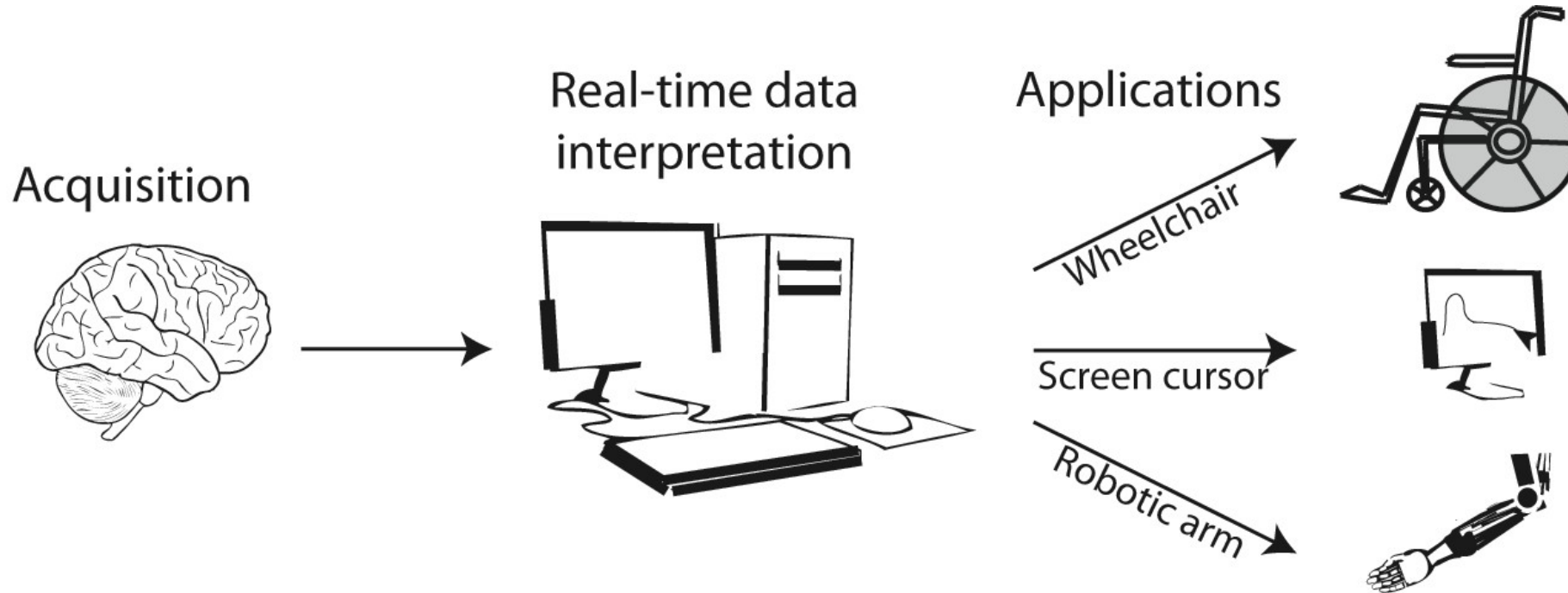
Elaine Åstrand, [elaine.astrand@mdh.se](mailto:elaine.astrand@mdh.se)

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MÄLARDALENS HÖGSKOLA  
ESKILSTUNA VÄSTERÅS

# Introduction to BMIs



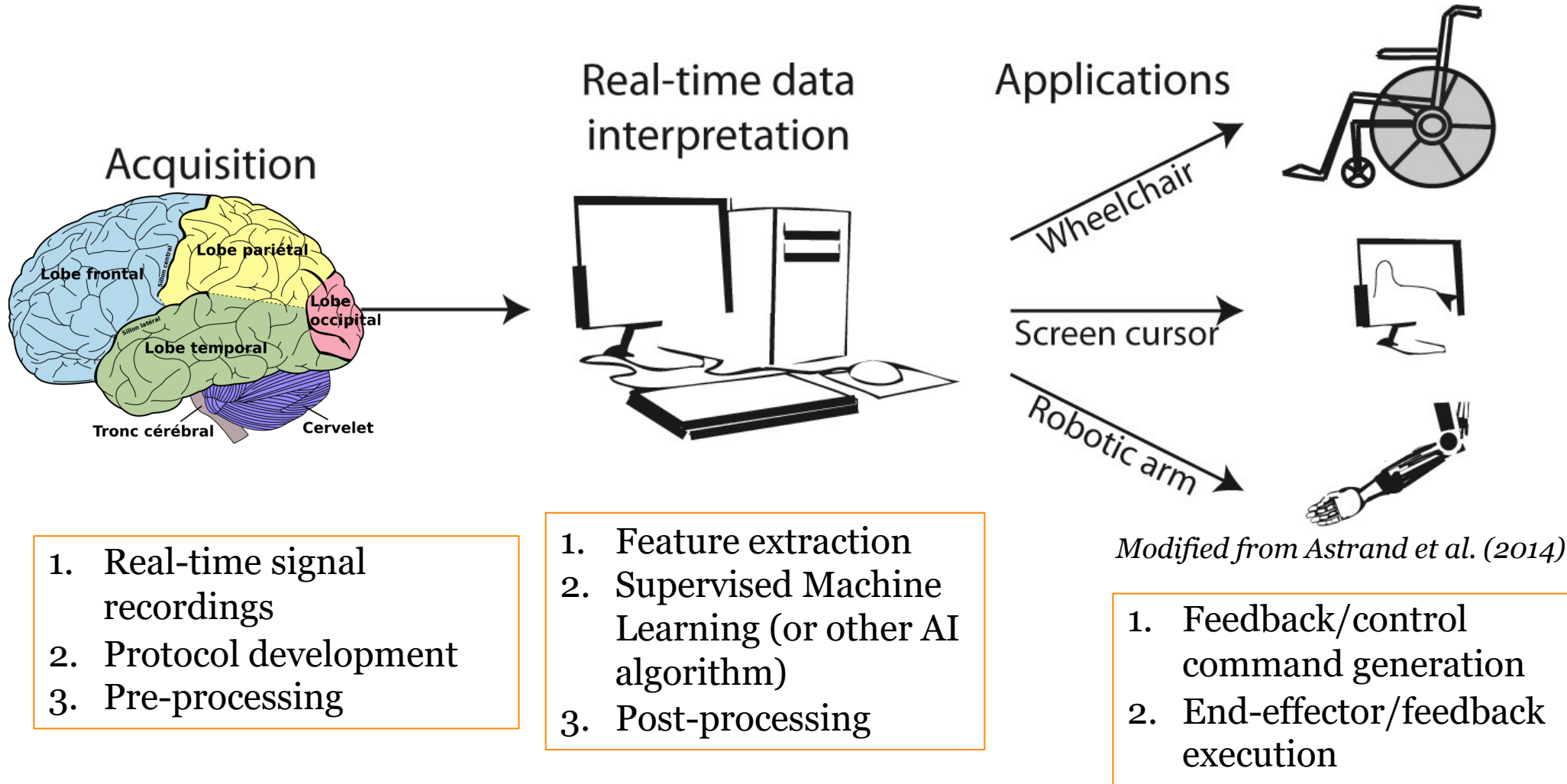
1. Real-time signal recordings
2. Protocol development

1. Pre-processing
2. Feature extraction
3. Supervised Machine Learning (or other AI algorithm)

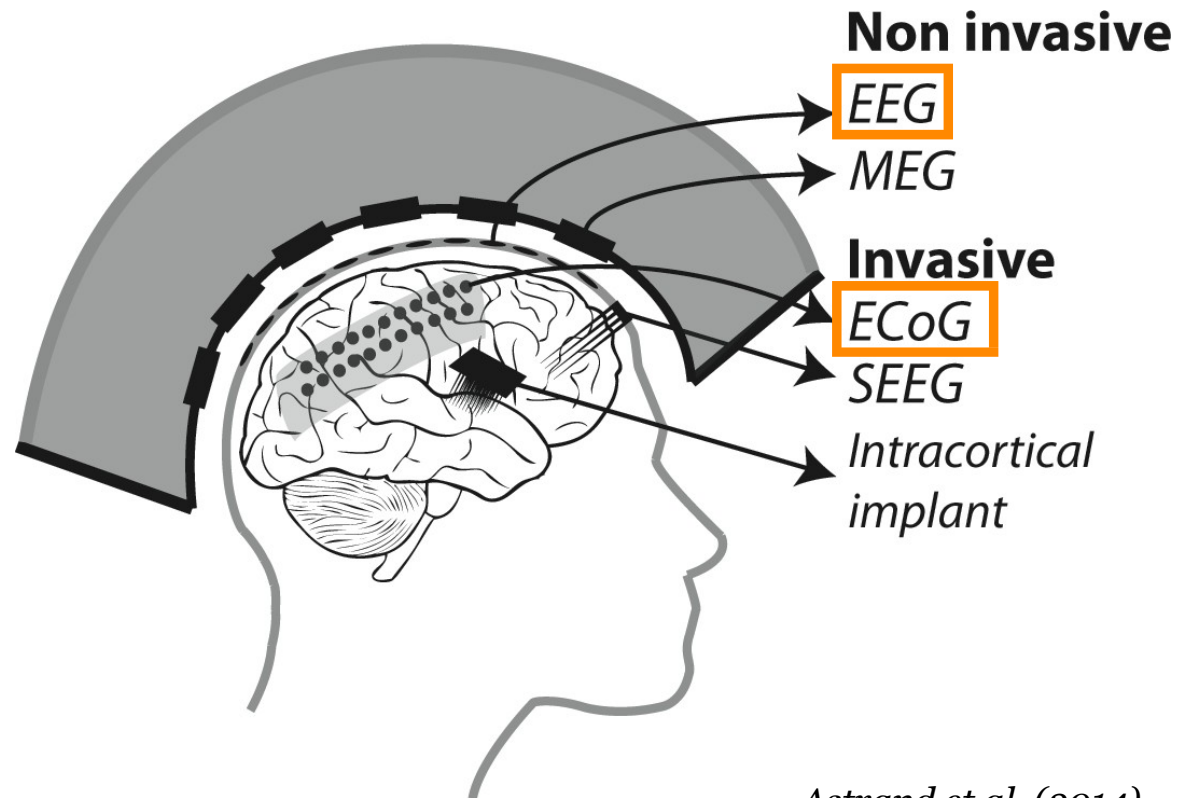
*Modified from Astrand et al. (2014)*

1. Feedback/control command generation
2. End-effector/feedback execution

# Introduction to BMIs



# Acquisition: signal recording techniques



*Astrand et al. (2014)*

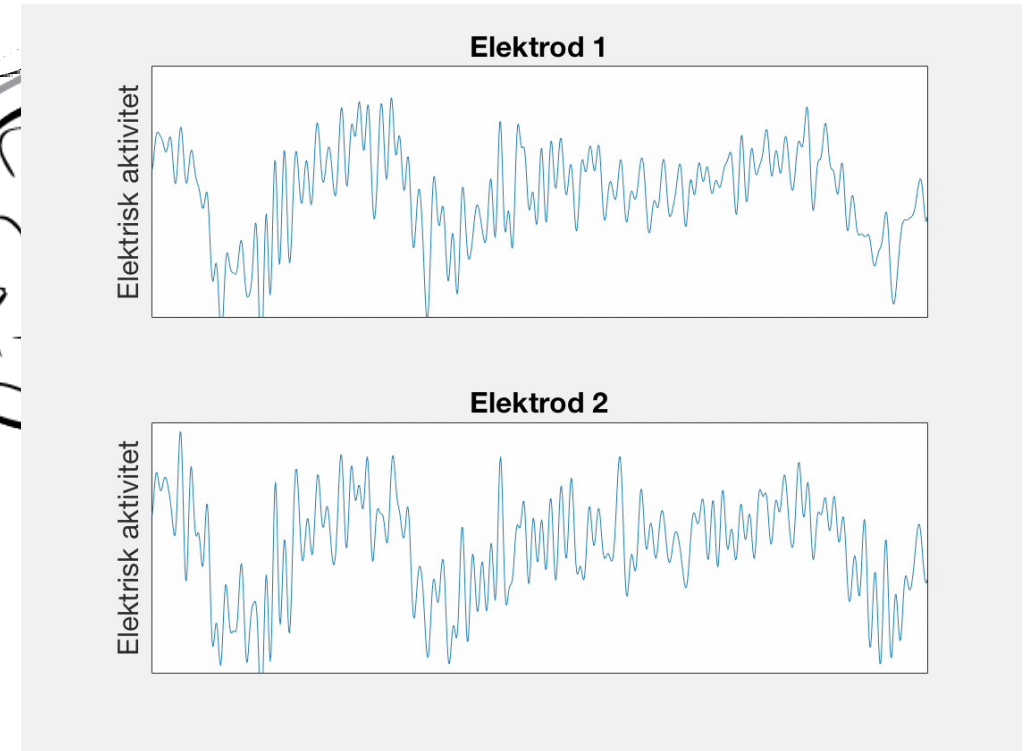
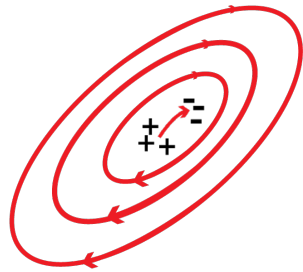
## Electroencephalography (EEG):

- Non-invasive
- Portable
- Low-cost
- Low spatial resolution (due to volume conduction)

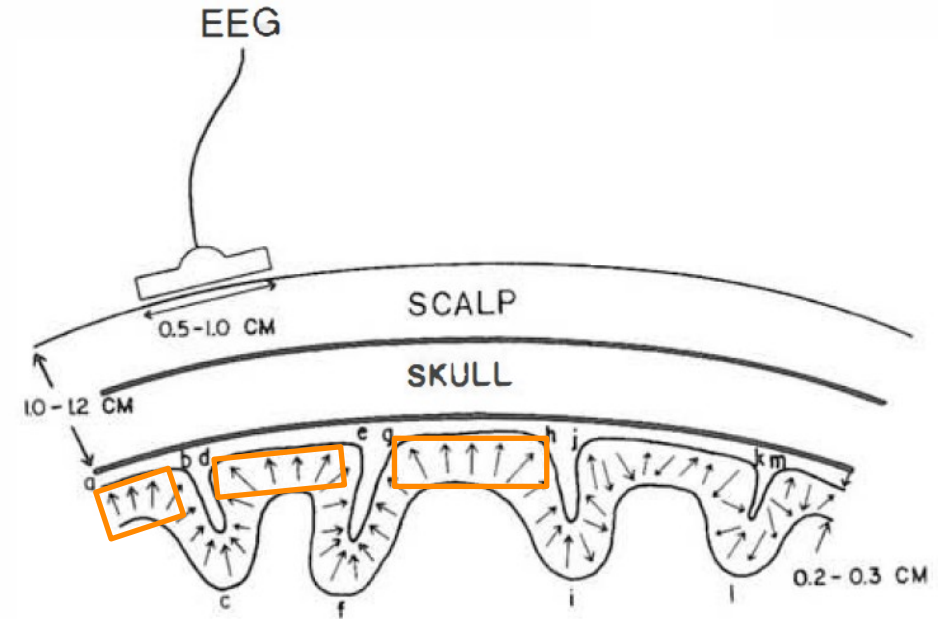
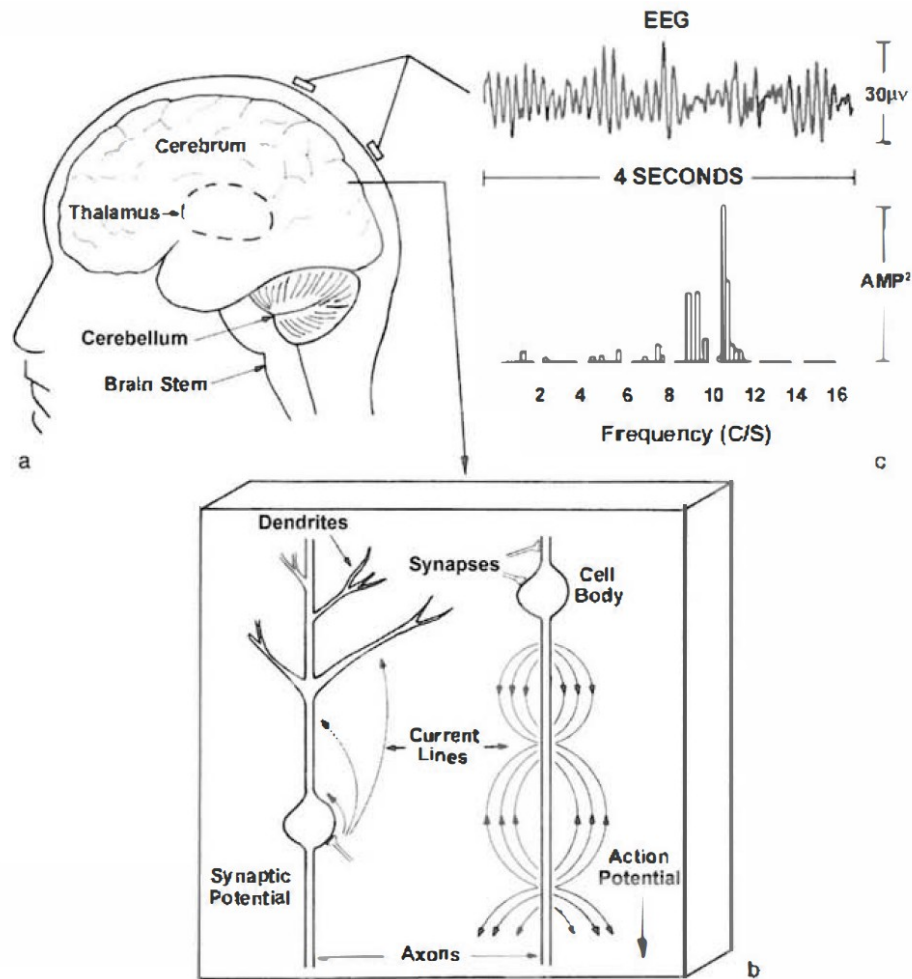
## Electrocorticography (ECoG)

- Subdural (invasive) vs. epidural (semi-invasive)
- Higher spatial resolution

# Acquisition: EEG signal recording



# Acquisition: EEG signal recording



EEG is most sensitive to correlated pyramidal neurons/dipoles located in the cortex and oriented perpendicular to the cortical surface.

# Acquisition: reference to EEG signal recording

- Modern EEG acquisition devices measure the difference of electrical potentials between each electrode placed on the head and one reference electrode
- These differences depend on both electrode locations as well as source/dipole generator configurations and locations

## **Where should the ideal reference electrode be placed?**

Ideally, the reference electrode should contain:

- The external noise and artifacts (e.g. powerline, cords etc.)
- Physical noise generated by the subject (eye-movements, blinks, ECG etc)



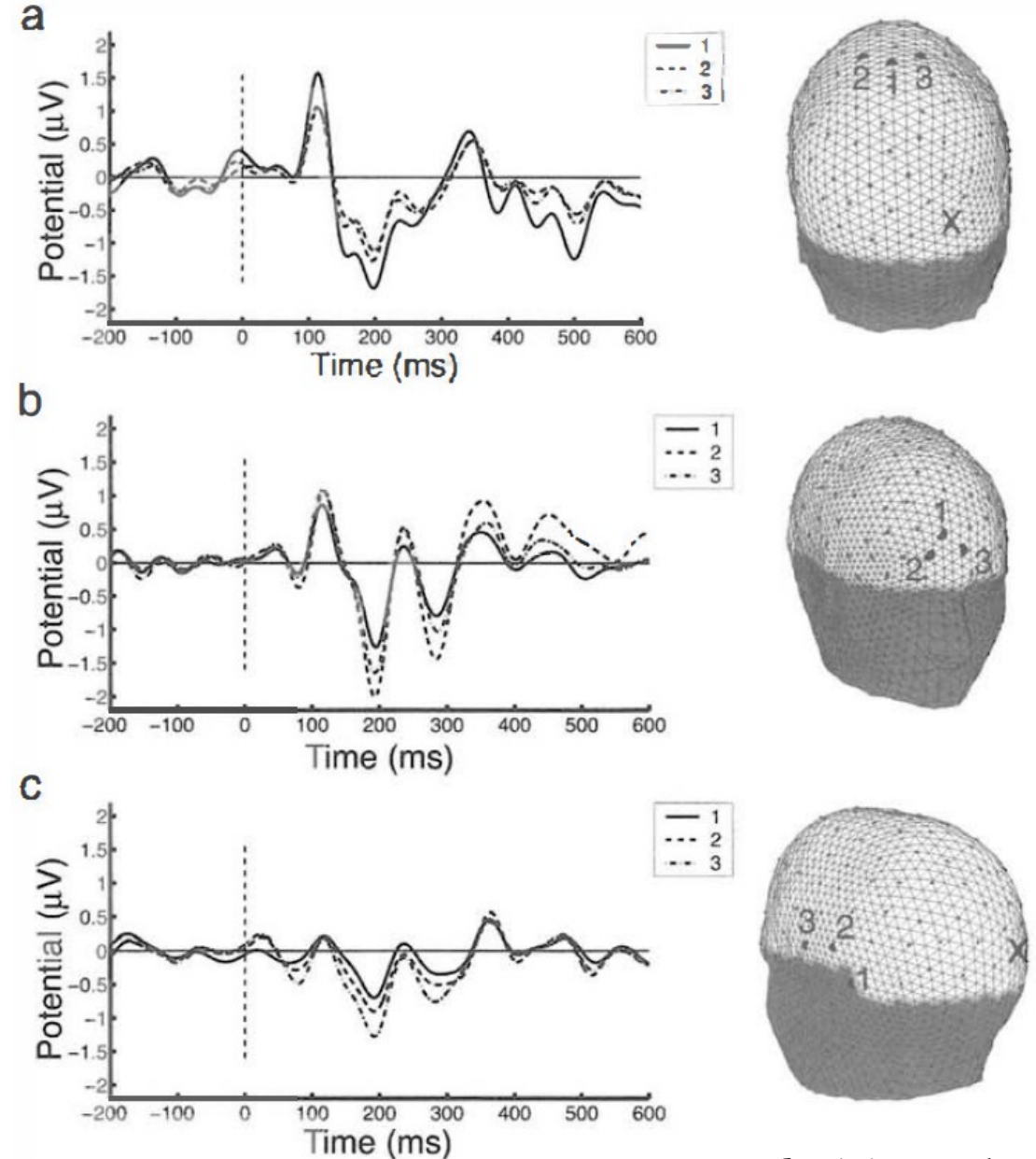
# Acquisition: reference to EEG signal recording

Visually Evoked Potentials (VEP) from EEG channel O2 (denoted X) with different references ( $F_s = 1000\text{Hz}$ , bandpass filtered 0.1Hz-30Hz, 100 repetitions).  
Mathematical re-referencing

➔ Reference location has a substantial impact on VEP amplitude.

Common choices:

- Ear lobes
- Mastoid (linked)
- Common average
- Nose tip

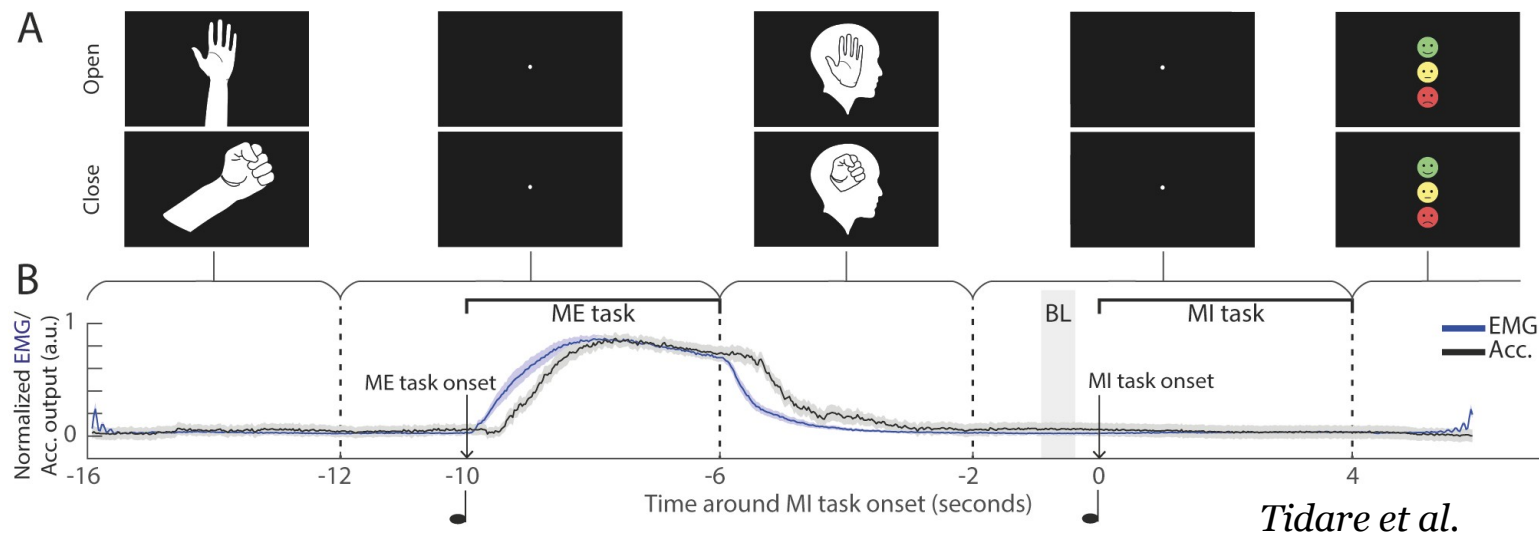


Nunez and Srinivasan (2006)



# Acquisition: protocols

- Most BMI:s with the objective to control the movement of an object will depend on motor activity generated in the brain
  - Intended or imagined movements
    - Direct neural decoder
    - Remapping approach
- The **experimental protocol** is vital for:
  - obtaining clean data
  - the development of a ML model that is able to generalize



- EEG data for training ML model
- Aligned and synchronized data

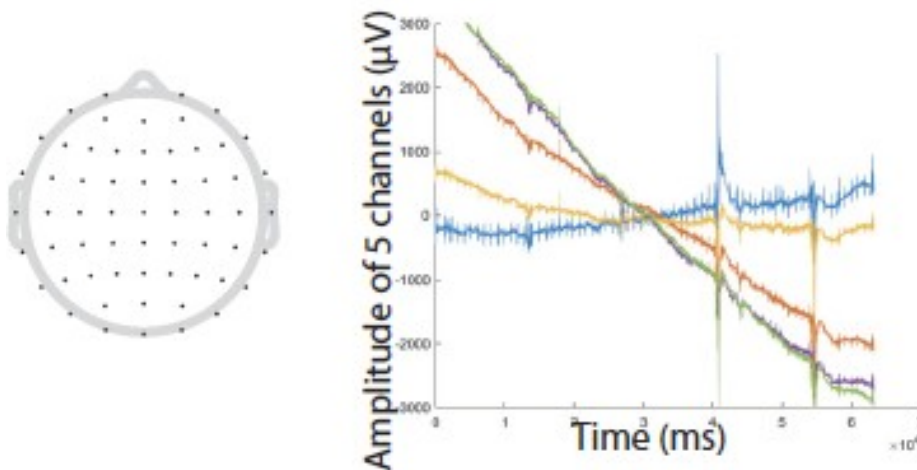
*Tidare et al.*

# Real-time data interpretation: pre-processing

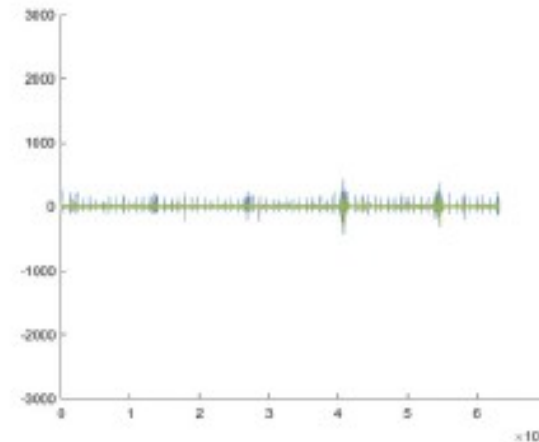
Objective:

- Remove irrelevant components of the data (bandpass filtering)
  - EEG: 0.1-0.5 Hz to ~50 Hz

1) Raw data from the entire session  
(showing only 5 channels in the graph)



2) BP filtering removes drift and  
DC-component (same 5 channels)

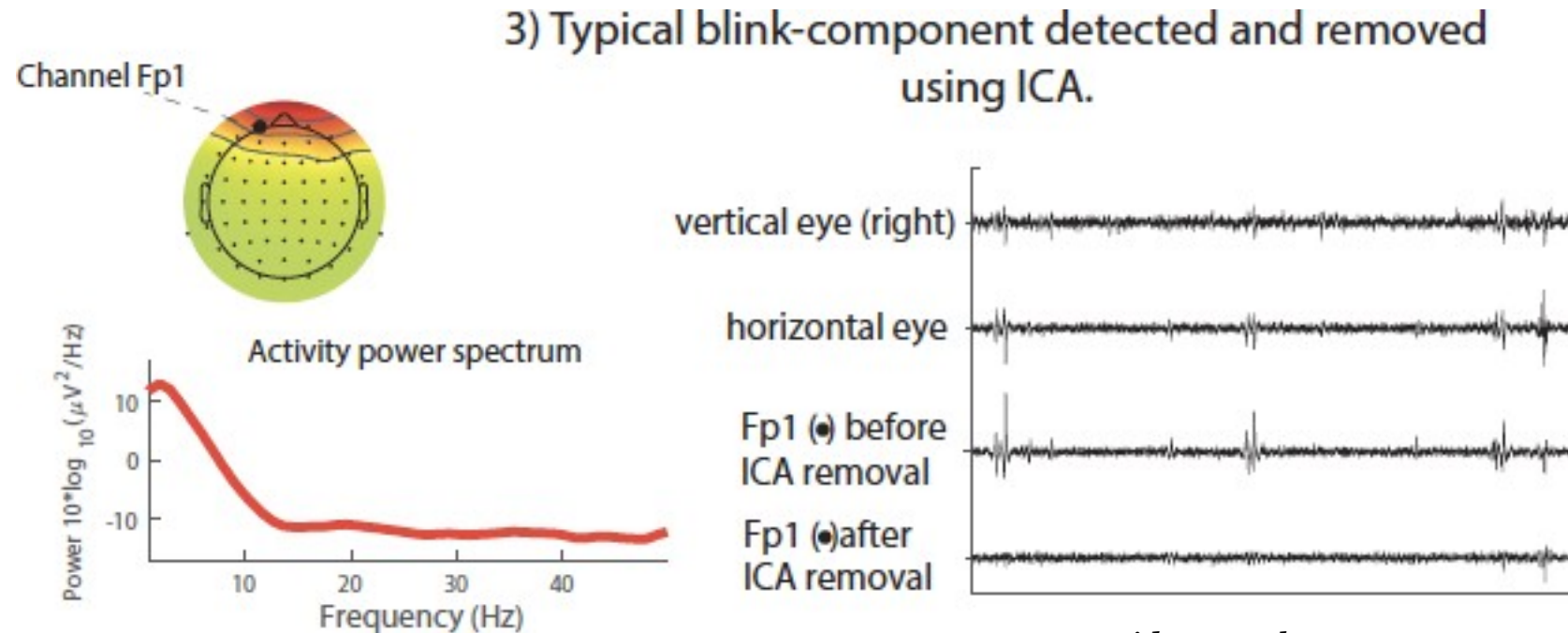


*Tidare et al.*

# Real-time data interpretation: pre-processing

Objective:

- Noise and artifact removal (e.g. offline: ICA, online: adaptive filtering, spatial filtering)



*Tidare et al.*

# Real-time data interpretation: feature extraction

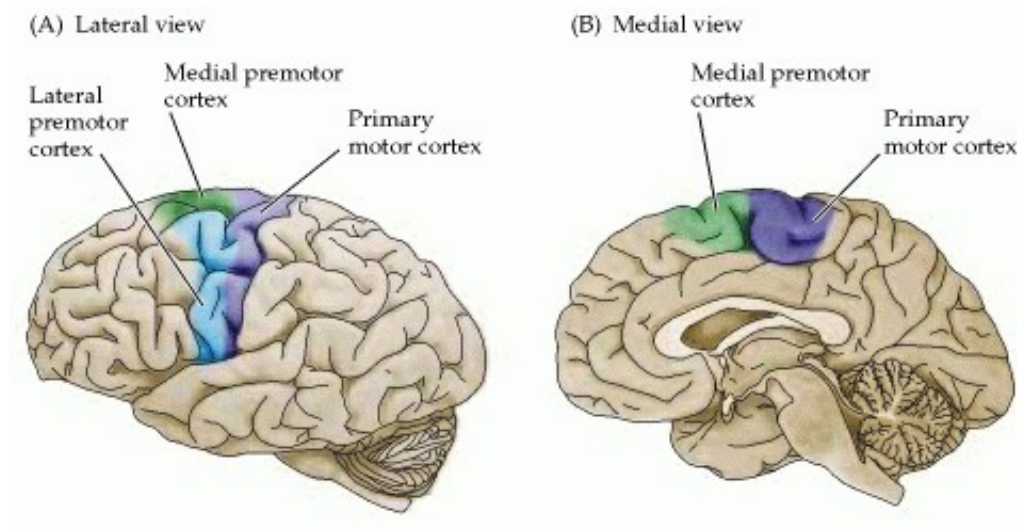


Most common features for ECoG and EEG:

- Time-domain potentials —————→ N channels x R repetitions
- Time-Frequency spectra  
    ↓  
    Delta (2-4 Hz)  
    Theta (4-7Hz)  
    Alpha (8-12Hz)  
    Beta (18-25Hz) }
  - N x FB frequency bands x R
  - FB = 4 or more (STFT)

# Real-time data interpretation: feature extraction

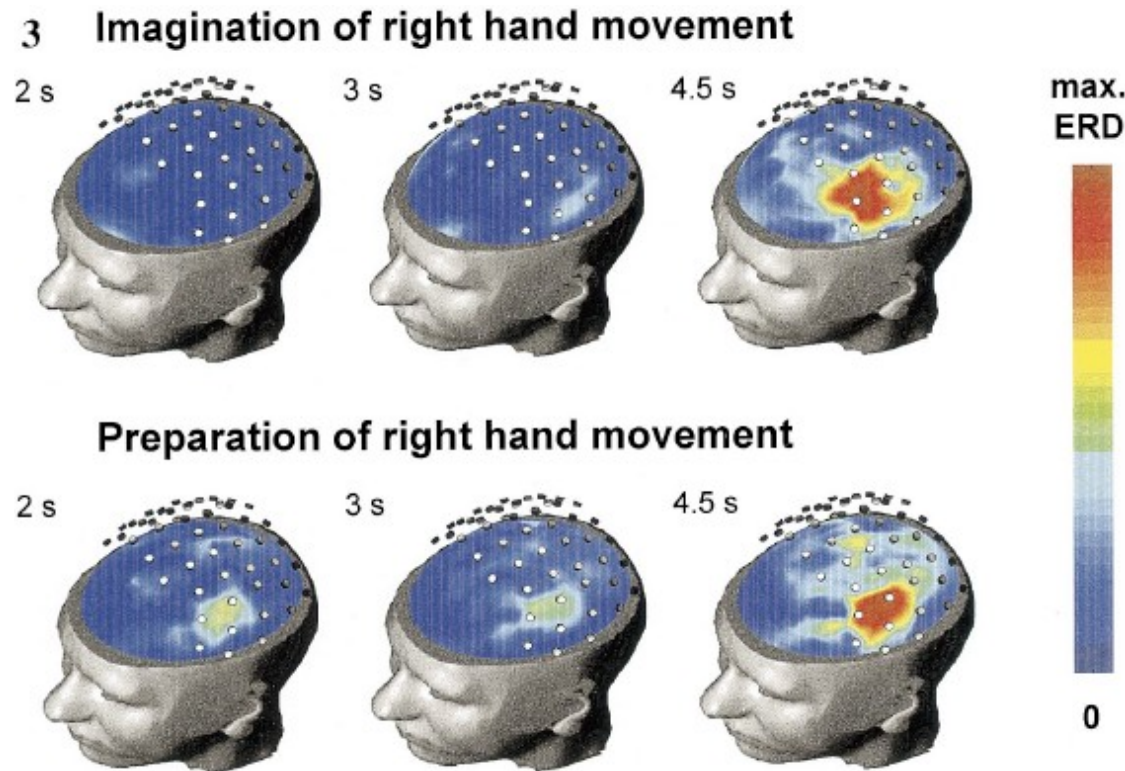
Which EEG features would you expect during upper-limb motor activation?



- Activity over sensorimotor cortex (central – parietal electrodes)
- Dominantly contralateral activity
- Studies show decrease in alpha and beta frequency power (Pfurtscheller & Neuper, 1997)

# Real-time data interpretation: feature extraction

Which EEG features would you expect during upper-limb motor activation?



- ERD=Event-Related desynchronization, equivalent to power decrease
- 9-13 Hz frequencies
- Motor Imagery is similar to real motor preparation.
- Motor execution: bilateralization of activity

# Real-time data interpretation: AI

Machine Learning or AI algorithm that can extract information from brain activity:

End-point classification:

- Linear (e.g. LDA, linear regression, SVM)
- Non-linear (e.g. SVM, ANN)

Continuous movement classification:

High resolution is needed!

- e.g. Kalman filter

Important considerations:

- Important to test/validate decoder on novel data
- Generalization issues: classification accuracy is prone to decrease when going from offline to online experiments (changes in the brain activity)
- Consider adding an idle state
- Decoding algorithm must be computationally cost-efficient



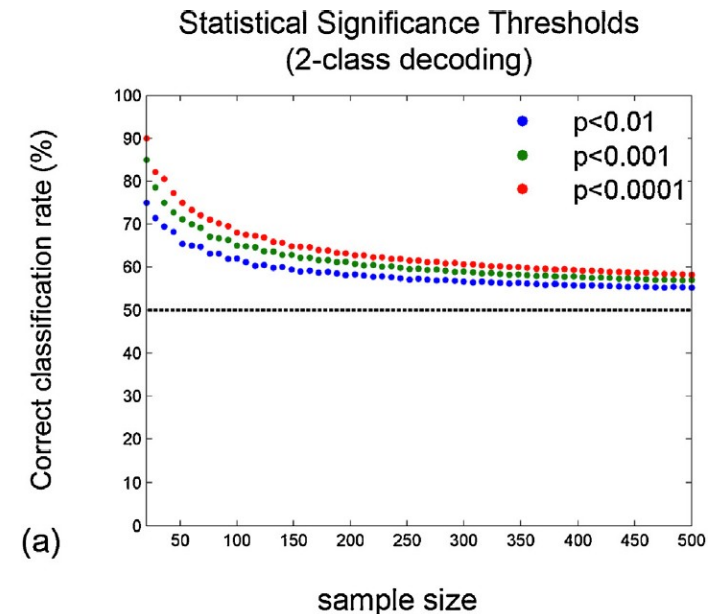
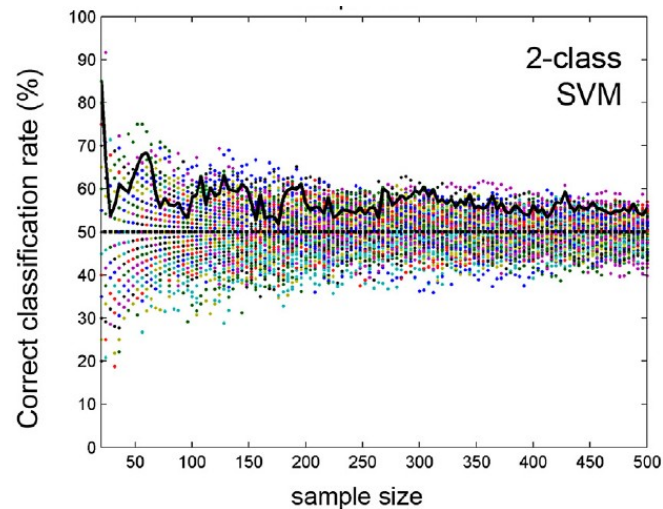
# Real-time data interpretation: validation

How can you be sure that the decoder performs above chance?

For a 2-class classification problem:

- Theoretical chance = 50%
- Empirical chance = ?
  - The real chance-level depends on your sample size (Combrisson and Jerbi, 2015)

Classifying random data with an SVM

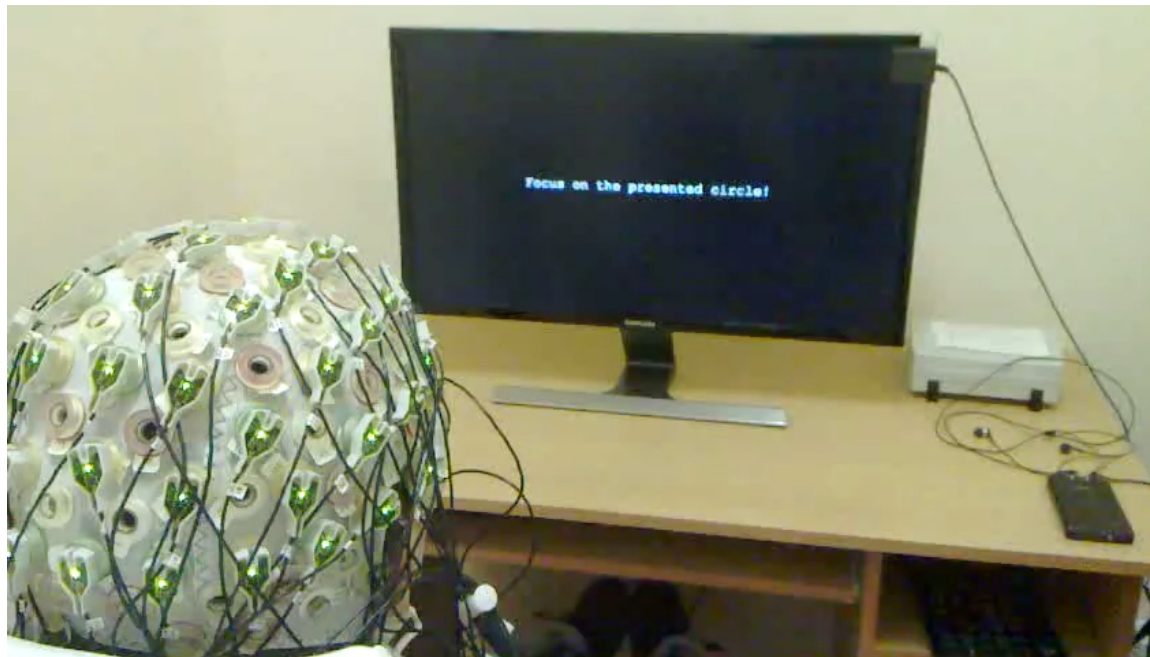


# Applications: asynchronous vs. synchronous BMIs

Different types of BMI:s:

- Asynchronous = operate without external cueing
- Synchronous = operate with external cueing (e.g. P300, SSVEP)

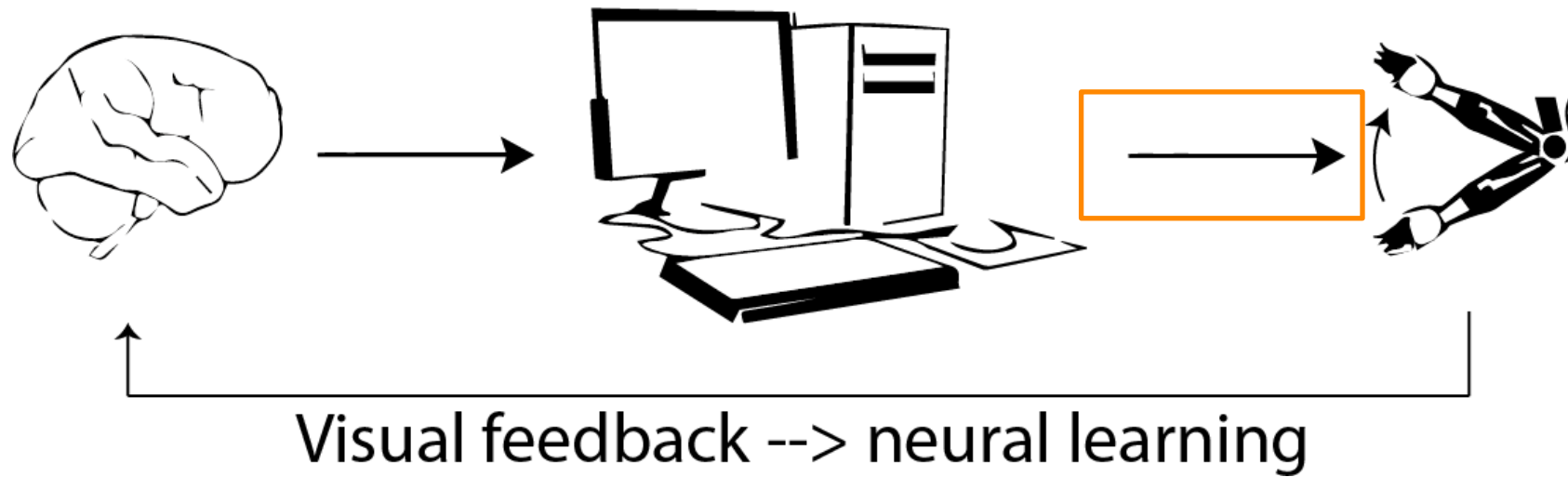
Example of SSVEP protocol



- Instruction to focus on one of the 4 circles
- Each circle flickers with a different frequency
- EEG signals over occipital and parietal electrodes show frequency components at the flickering frequency

# Applications: feedback/control command generation

How should the decoder output be converted into a movement command?

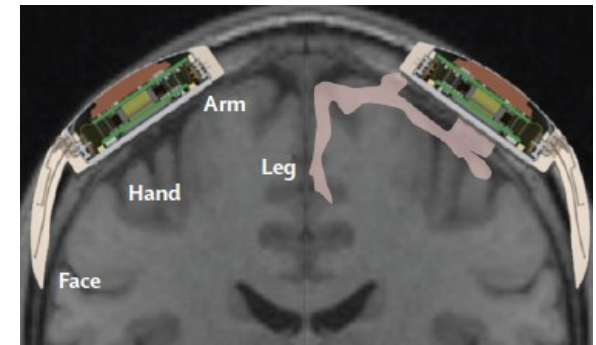
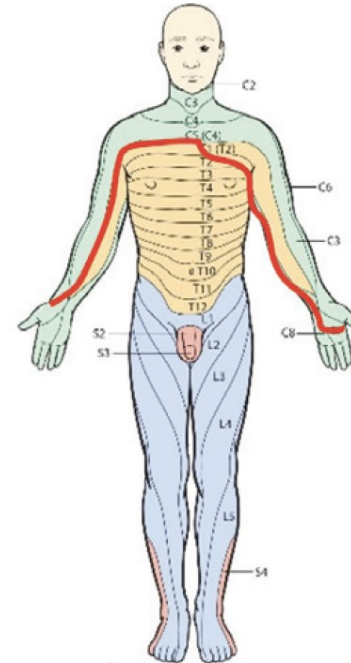


- Common: 1:1 mapping between decoder output label and movement
- Why not add more intelligence into the prosthesis?

# Applications: case 1

An exoskeleton controlled by an epidural wireless brain-machine interface in a tetraplegic patient: a proof-of-concept demonstration. Benabid et al., (2019)

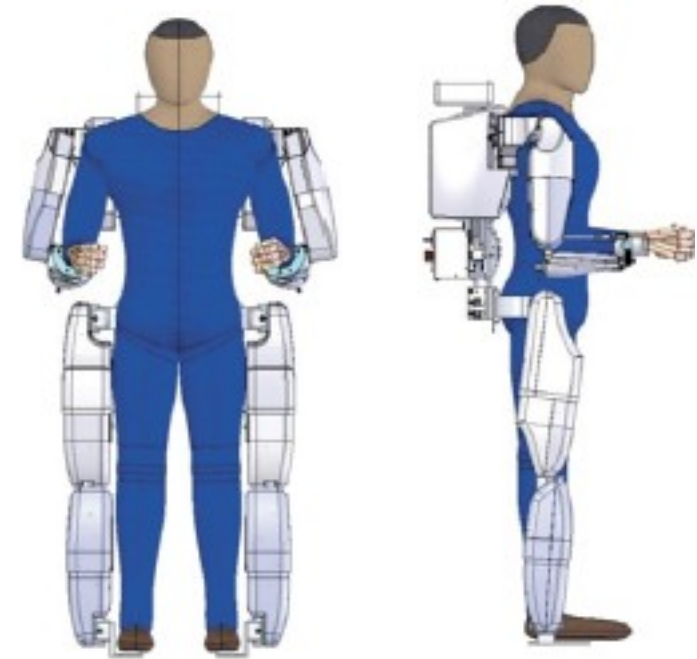
- 1 tetraplegic patient (male, 28 years, c4-C5 spinal cord injury, little motor control of upper limbs, no motor control of lower limbs)
- Bilateral epidural ECoG (64 electrodes) over sensorimotor cortex
- Data was radio-emitted through an ultra-high frequency antenna and power supplied remotely via inductive high-frequency antenna



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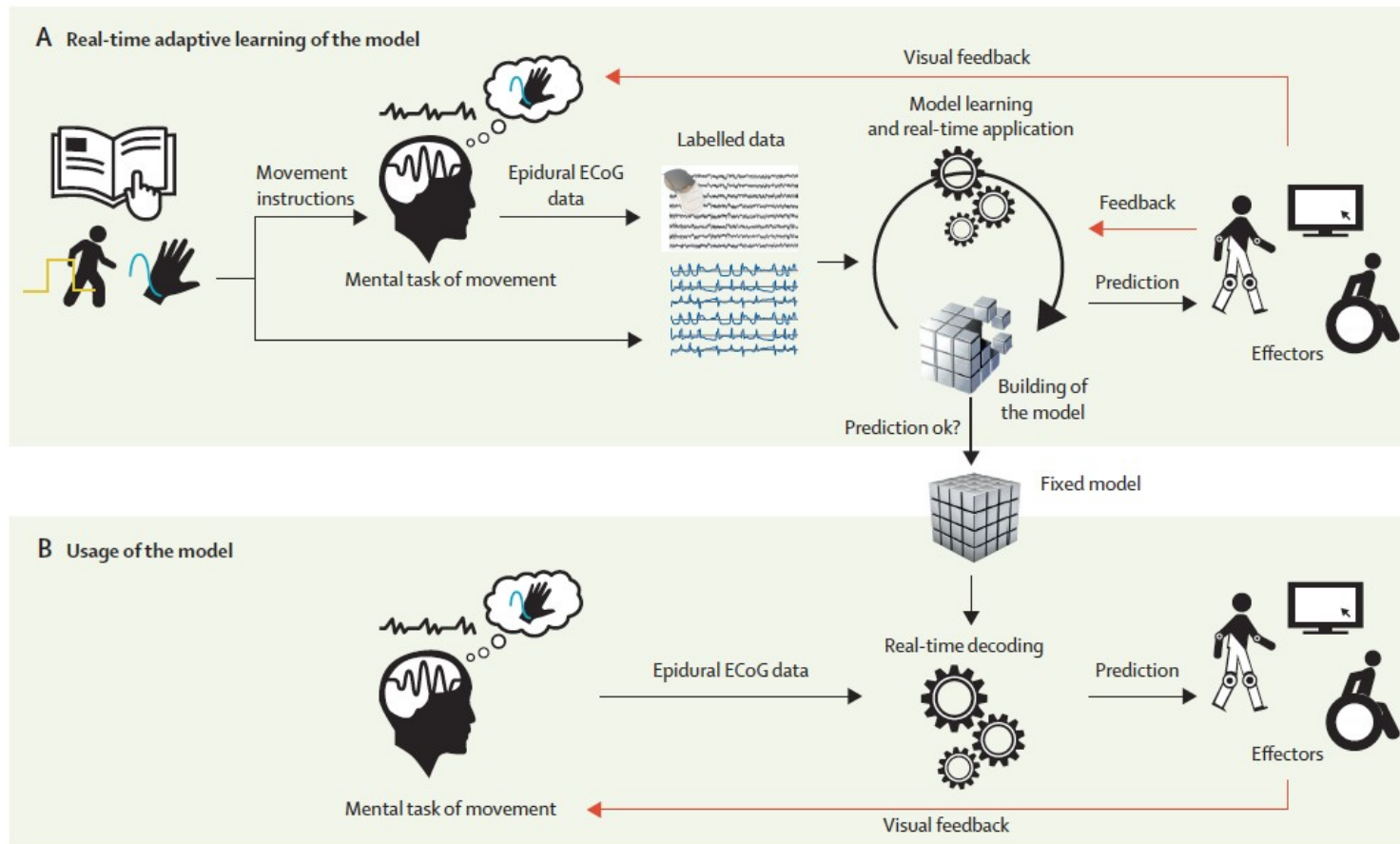
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- Bilateral epidural ECoG (64 electrodes) over sensorimotor cortex
- Data was radio-emitted through an ultra-high frequency antenna and power supplied remotely via inductive high-frequency antenna
- ECoG signals from 32 electrodes at 586Hz were decoded in real time during motor imagery and translated into exoskeleton movements
- Adaptive high-resolution decoding (within 350ms)



# Applications: case 1

- Experiments contained 2 phases:
  - 1) decoder calibration/ update
  - 2) Use of decoder to estimate the performance

## Online model training!



- A recursive, exponentially weighted, n-way, partial least squares regression algorithm with a Markov switching model (Eliseyev et al. (2017); Schaeffer & Aksenova (2016))

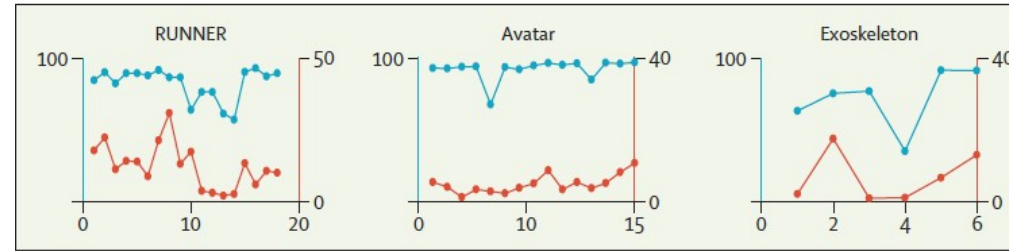


# Applications: case 1

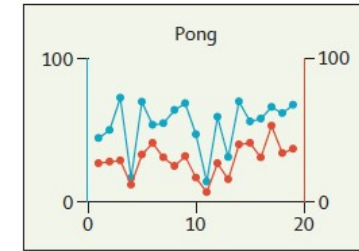


- First successful long-term use of wireless epidural ECoG
- Simultaneous exoskeleton control of up to 8 DoFs
- Long-term stable exoskeleton control (up to 7 weeks)

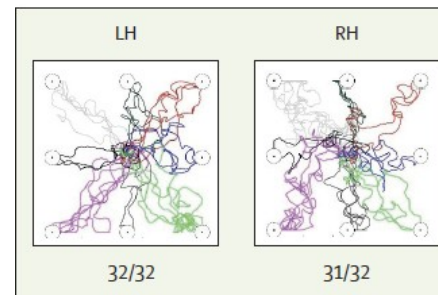
A 1D switch: walking activation



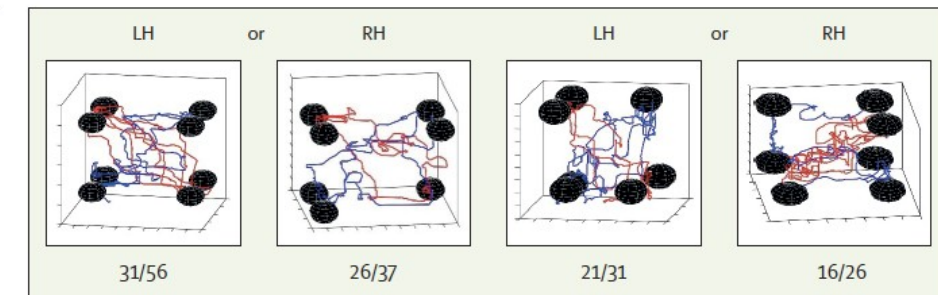
B 1D movement: horizontal Y



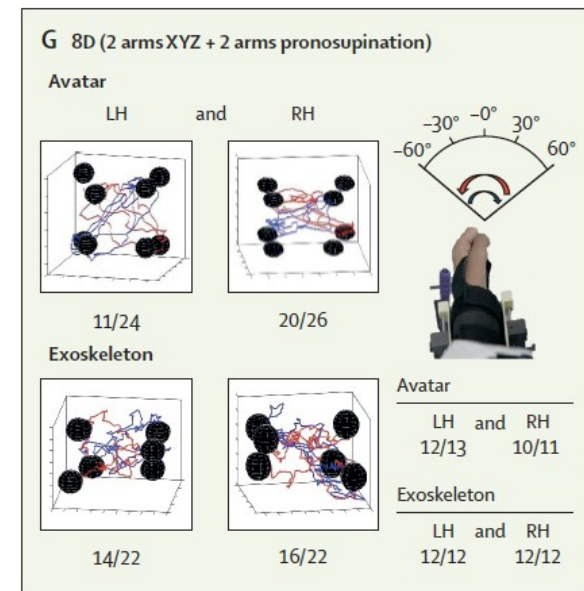
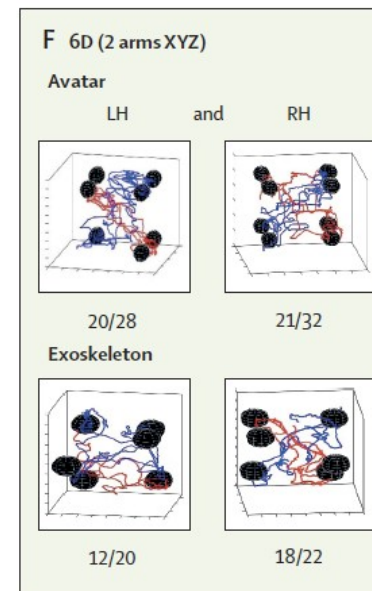
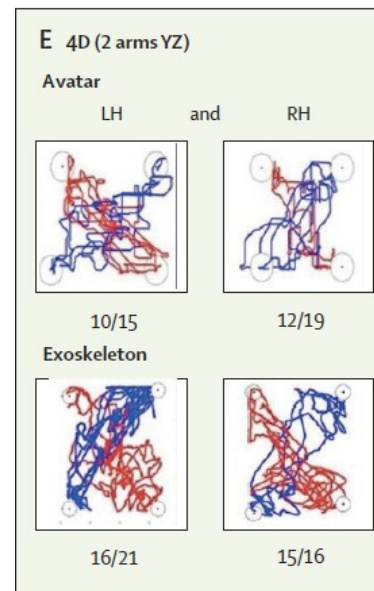
C 2D movement: XY



D 3D movement: XYZ



Multi-limb (4D, 6D, and 8D)





# Applications: case 1

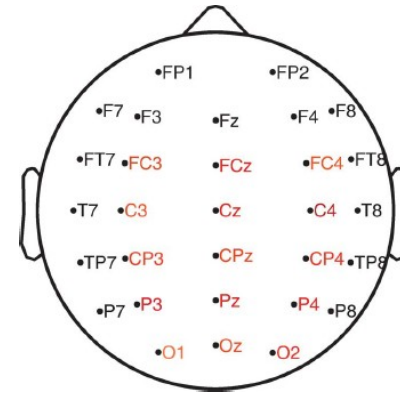
Future challenges:

- Enable data transmission from more electrodes
- Extend the duration without calibration of model
  - Online adaptation of decoding model?
- Self-balancing exoskeleton
- Decrease power consumption of exoskeleton (current: 2.5 hours)

# Applications: case 2

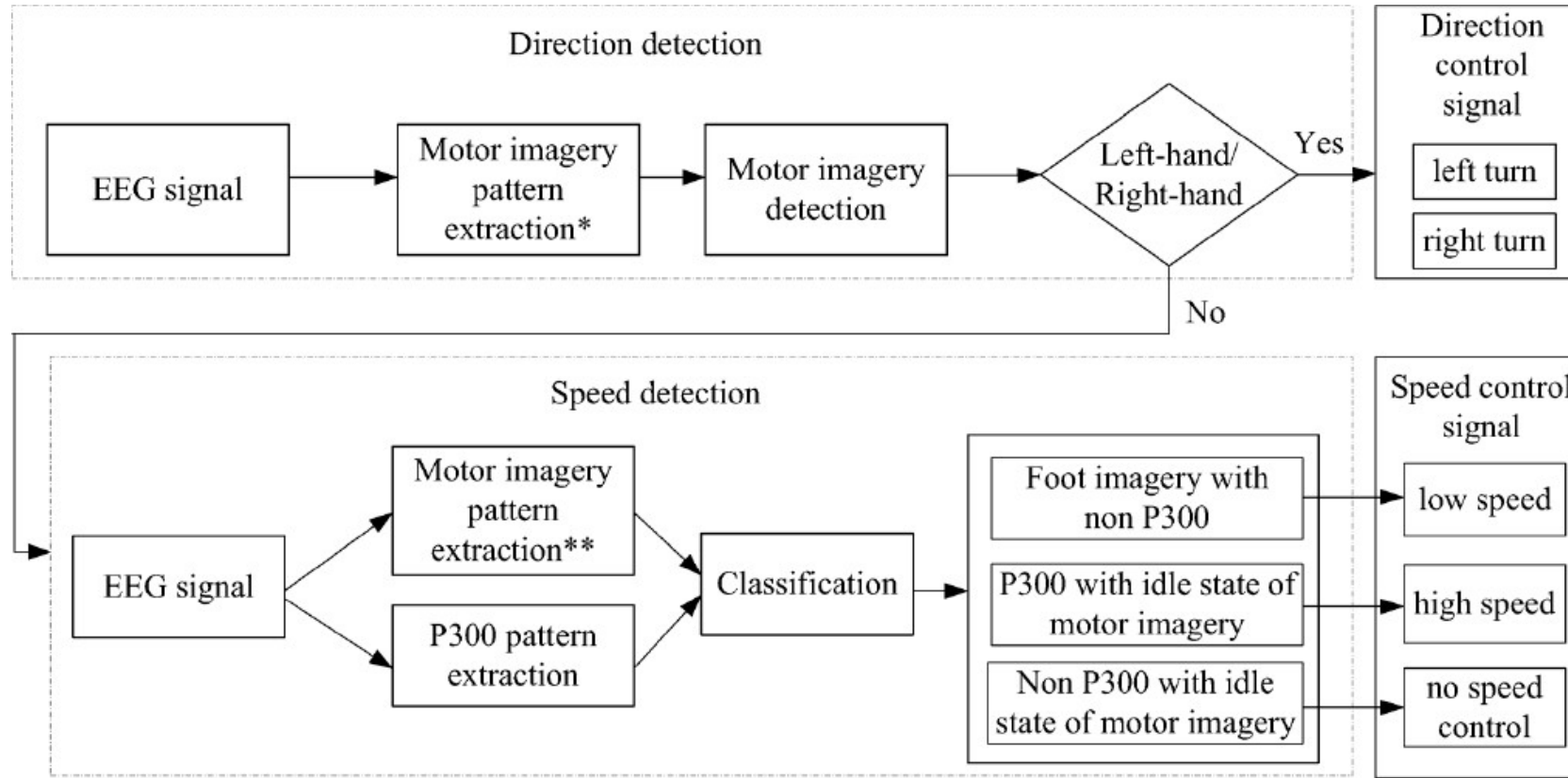
A hybrid brain computer interface to control the direction and speed of a simulated or real wheelchair. Long et al., (2012)

- 5 subjects (exp 1), 2 subjects (exp 2)
- EEG signal recordings (15 electrodes,  $F_s = 250\text{Hz}$ , bp-filtered between  $0.5\text{Hz}$ - $100\text{Hz}$ )
- Control commands:
  - Right/left turn: MI of right/left hand movements
  - Deceleration: MI of foot movements and ignore GUI
  - Acceleration: Attention to one of the 8 flashing buttons on a GUI and no MI



Wang et al. (2014)

# Applications: case 2



\* related to four patterns (left hand, right hand, foot motor imagery and idle state)

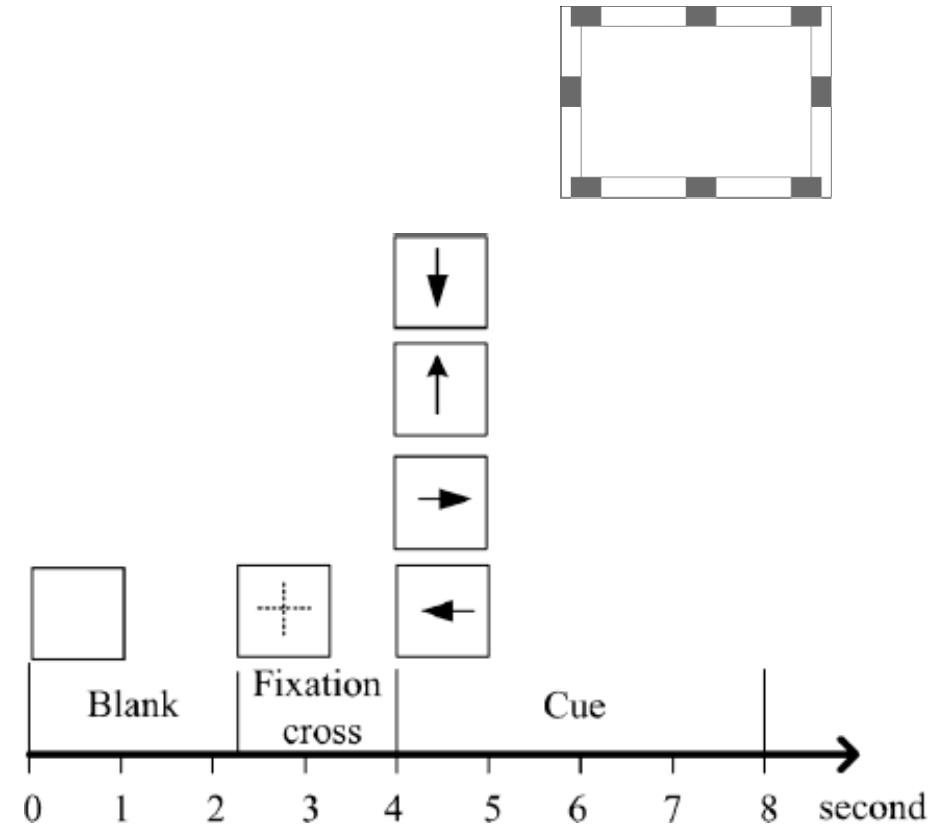
\*\* related to foot imagery and idle state

# Applications: case 2

## Detection of directional control signals

Classification/decoder training phase (to build a model that works in real time):

1. Obtaining a train data set with 4 classes (right/left hand MI, foot MI (up arrow), idle (down arrow))
2. Signal processing
  - Spatial filter: Common Average Reference (CAR)
  - Bandpass filter: 8-32 Hz



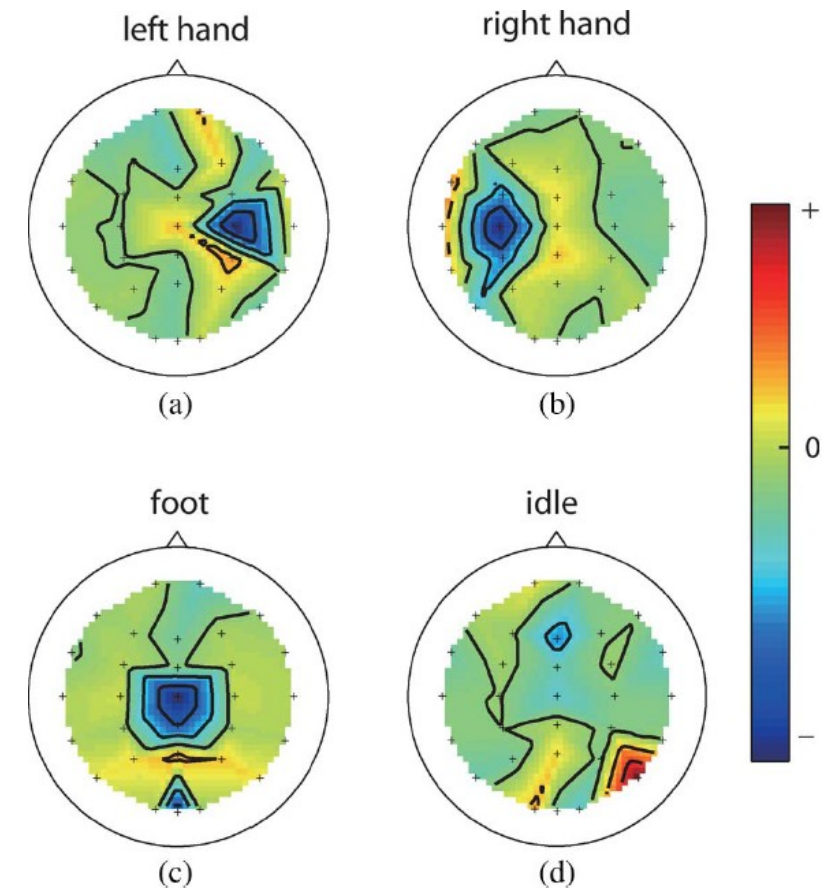
# Applications: case 2

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2. Signal processing
  - Spatial filter: Common Average Reference (CAR)
  - Bandpass filter: 8-32 Hz
3. Feature extraction & selection
  - Common Spatial Patterns (CSP)
4. LDA (1 vs. all) using data averaged in a 1000 ms time window with step size of 200 ms

CSP weights – subject 1



# Applications: case 2

## Detection of speed control signals

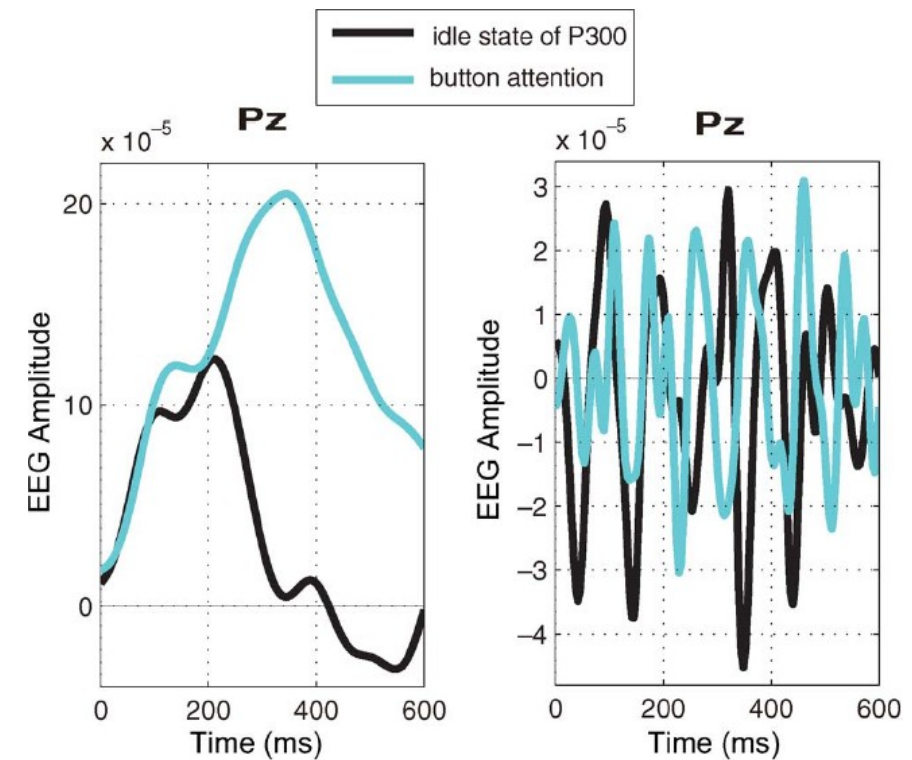
Combining ERD/ERS of the sensorimotor rhythms and the P300 potential to detect

- 1) foot MI and
- 2) attention to a flashing button.

Procedure:

1. MI feature extraction
2. P300 feature extraction
3. 2 LDAs are trained on (1) and (2) and their scores combined to calculate 2 thresholds,  $D_{\text{mean}}^{+}$  and  $D_{\text{mean}}^{-}$
4. In the test-phase, the combined score,  $D$  of the test-sample data is classified as follows:

$$\hat{y} = \begin{cases} +1, & \text{if } D > D_{\text{mean}}^{+} \text{ Acceleration} \\ 0, & \text{if } D_{\text{mean}}^{-} \leq D \leq D_{\text{mean}}^{+} \\ -1, & \text{if } D < D_{\text{mean}}^{-} \text{ Deceleration} \end{cases}$$



# Applications: case 2

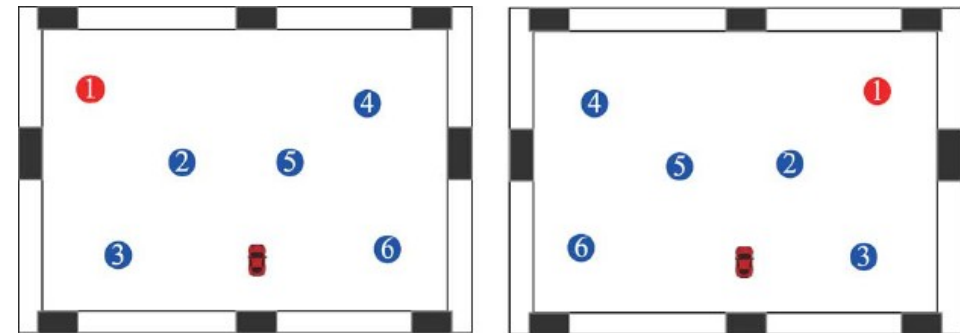
## Validation of the brain-controlled wheelchair

- 2 phases: **1) simulated wheelchair to evaluate performance**, and 2) Real wheelchair to test the hybrid system

### Performance measures:

- Accuracy rate of successful navigation tasks
- Path length
- Path length optimality ratio
- Time
- Time for low speed
- Collisions

Simulated wheelchair virtual environment





# Applications: case 2

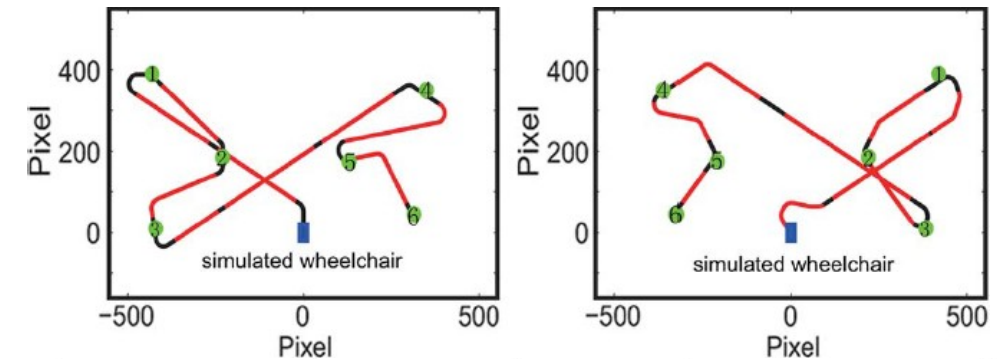
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### Simulated wheelchair virtual environment



	Accuracy rate (%)	Path length ( <i>pixel</i> )	Path opt. ratio	Time (s)	Time for low speed (s)	Collisions
S1	100±0	2837.35±66.63	1.25±0.04	82.11±1.62	22.35±1.22	0±0
S2	100±0	2761.13±51.26	1.22±0.03	80.84±1.35	23.63±1.45	0±0
S3	100±0	2919.65±76.42	1.29±0.03	88.39±1.26	30.80±1.76	0±0
S4	100±0	2856.32±73.27	1.26±0.04	85.02±1.19	27.22±1.23	0±0
S5	100±0	2842.32±54.71	1.25±0.02	85.75±1.22	29.38±1.15	0±0
mean±std	100±0	2843.46±105.41	1.25±0.05	84.42±4.63	26.67±4.18	0±0

# Applications: case 2

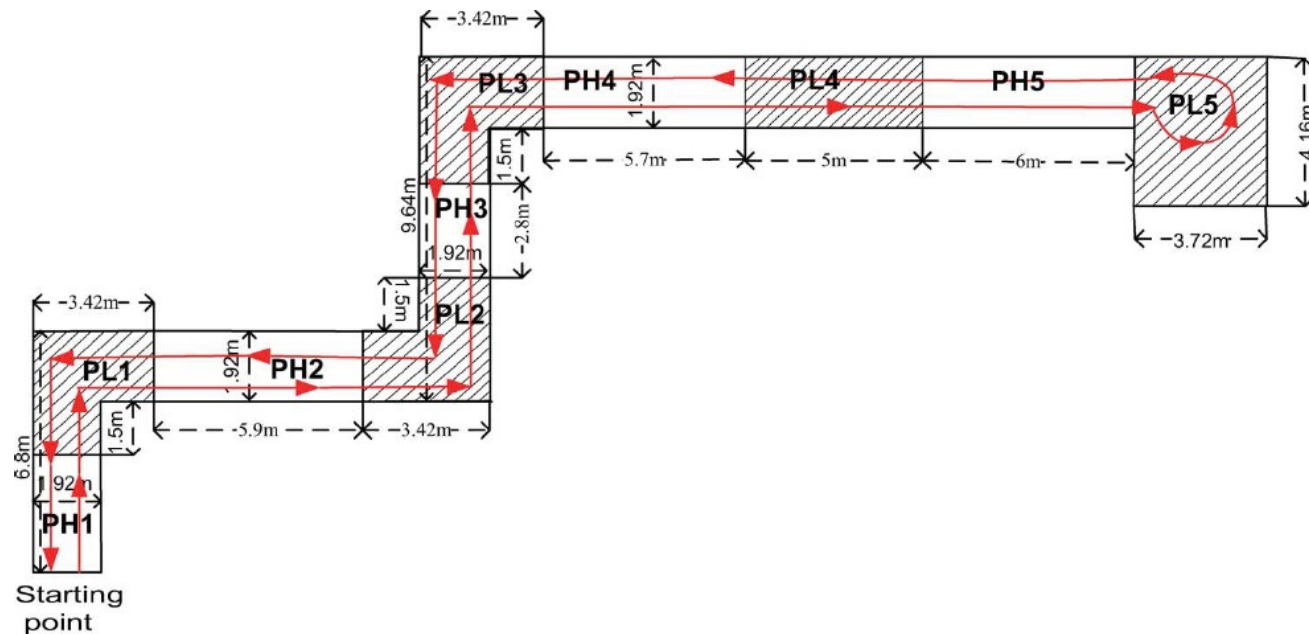
## Validation of the brain-controlled wheelchair

- 2 phases: 1) simulated wheelchair to evaluate performance, and **2) Real wheelchair to test the hybrid system**

### Performance measures:

- Path length
- Path length optimality ratio
- Time
- Wrong speed control time
- Collisions

### Real wheelchair path



# Applications: case 2

## Validation of the brain-controlled wheelchair

- 2 phases: 1) simulated wheelchair to evaluate performance, and **2) Real wheelchair to test the hybrid system**

### Performance measures:

- Path length
- Path length optimality ratio
- Time
- Wrong speed control time
- Collisions

PERFORMANCE INDICES (AVERAGED FROM TWO SUBJECTS) OBTAINED WITH REAL WHEELCHAIR IN LOW SPEED AREAS

	Path length ( <i>m</i> )	Path opt. ratio	Time ( <i>s</i> )	Wrong speed control time ( <i>s</i> )	Collisions
PL1	5.82±0.26	1.18±0.02	47.72±1.46	5.25±0.62	0±0
PL2	5.68±0.24	1.15±0.02	49.98±1.65	3.50±0.51	0±0
PL3	5.71±0.21	1.16±0.03	47.96±1.67	4.80±0.76	0±0
PL4	5.41±0.16	1.08±0.02	45.99±1.31	4.14±0.45	0±0
PL5	4.52±1.23		35.27±2.13	4.94±0.82	0±0
mean±std	5.43±2.02	1.14±0.07	45.38±5.51	4.54±1.24	0±0

TABLE IV

PERFORMANCE INDICES (AVERAGED FROM TWO SUBJECTS) OBTAINED WITH REAL WHEELCHAIR IN HIGH SPEED AREAS

	Path length ( <i>m</i> )	Path opt. ratio	Time ( <i>s</i> )	Wrong speed control time ( <i>s</i> )	Collisions
PH1	3.75±0.16	1.11±0.02	14.75±0.05	3.38±0.23	0±0
PH2	6.37±0.23	1.08±0.03	24.20±0.04	4.45±0.57	0±0
PH3	3n.14±0.13	1.12±0.01	12.46±0.06	2.99±0.38	0±0
PH4	6.27±0.18	1.10±0.02	24.24±0.06	5.01±0.52	0±0
PH5	6.54±0.15	1.09±0.02	25.07±0.07	4.91±0.64	0±0
mean±std	5.21±1.54	1.10±0.04	20.14±6.27	4.16±1.36	0±0

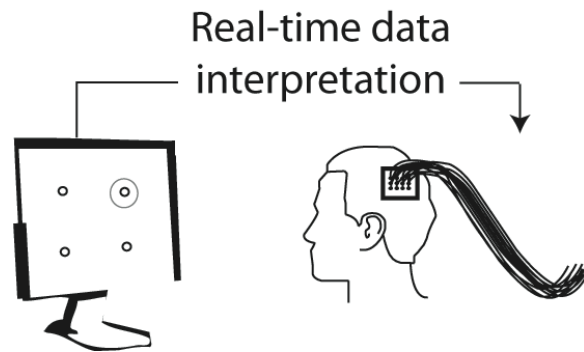
# Applications: case 2

Future challenges?

How would you like to improve this work?

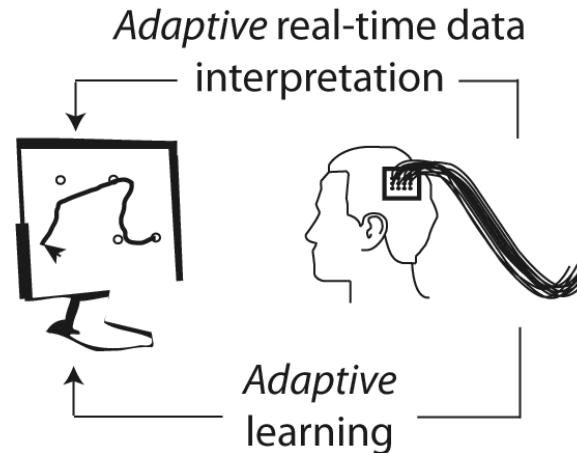
# Applications: Open vs. closed-loop BMI

## B. Open loop design



*Modified from Astrand et al. (2014)*

## C. Closed loop design



### Open loop:

- No RT feedback to subject
- Remote monitoring applications

### Closed-loop:

- RT feedback to subject
- Wide range of applications