

# Utilizing Interphase Gap in Sinusoidal Waveform Stimulation Currents to Minimize Threshold Currents for Retinal Implants

Yash Jain,<sup>1†</sup> Aiwen Xu,<sup>2</sup> Michael Beyeler,<sup>2</sup>

<sup>1</sup> Moreau Catholic High School, 27170 Mission Blvd, Hayward, CA 94544

<sup>2</sup> Department of Computer Science, University of California, Santa Barbara, CA 93106

<sup>†</sup>corresponding author: jainyash8@gmail.com

UC SANTA BARBARA  
Research Mentorship Program



## Overview

- **Retinal Degeneration** –Age Related Macular Degeneration (AMD) and Retinitis Pigmentosa (RP) – is the most common cause of **irreversible blindness**
- **Retinal Implants** are currently **most effective** and only FDA-approved assistive product for Retinal Degeneration on the market
- Retinal Implants work by **sending a stimulation current** through **electrodes** on the **retina**, and in the process **stimulating neurons** in the brain which provide a form of vision which allows for interpretation of large letters
- However, the **current** used to **stimulate** the brain's neurons can occasionally be **too strong** leading to **permanent damage** to retinal and brain tissue.
- We seek to solve this problem by developing a **neuron model** for a single retinal ganglion cell
- After developing the model, we will develop a sinusoidal pulse with varying interphase gap values ranging from 0 milliseconds to 1.84 milliseconds.
- Lastly, newly generated sinusoidal pulse with varying IPG values will be **tested** in a larger **network model** setting to validate results and trends visible in the single-cell model

## Retinal Implants

### How do Retinal Implants work?

- Work by taking **surrounding visual information** through a camera and converting it into **electrical signals** sent through **electrodes placed on or within the retina** [1]
  - The **electrode placement** plays an important role in the **amount of current** needed to **stimulate** the **neuron cells**
  - Looked at epiretinal layer for the purpose of this research
- The retinal cells convert these **electrical signals** to phosphenes that are **viewed as flashes of lights** in an array-structure with varying brightness levels

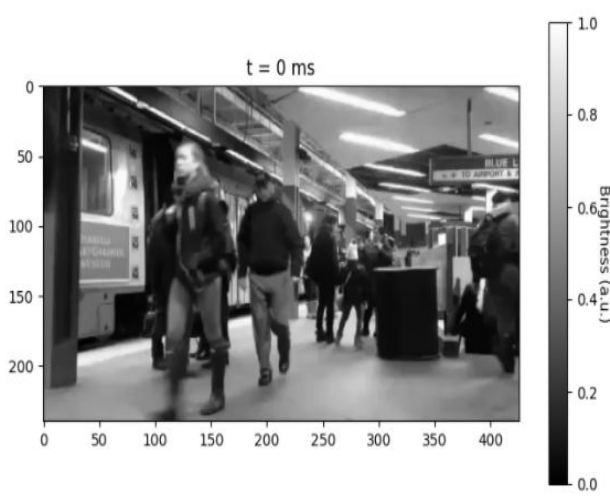


Figure 1: Pre-processed original camera feed

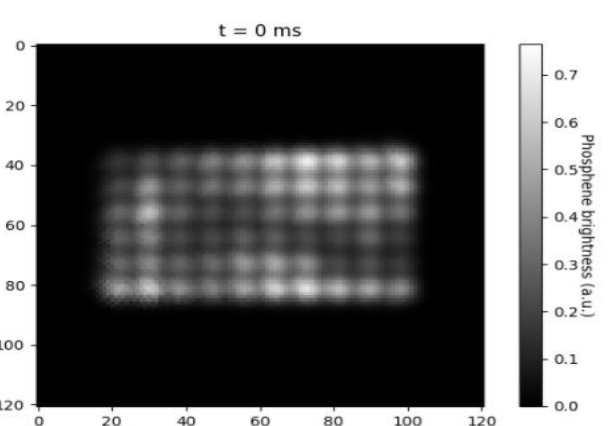


Figure 2: Patient's vision with Argus II implant

### Problems with Retinal Implants

- When delivering the stimulation current through electrodes, the **current** can be **too high** [1]
- This can lead to **permanent neural and permanent tissue damage** in the eye
- High stimulation currents can cause the visual processing unit (VPU) to require frequent charging

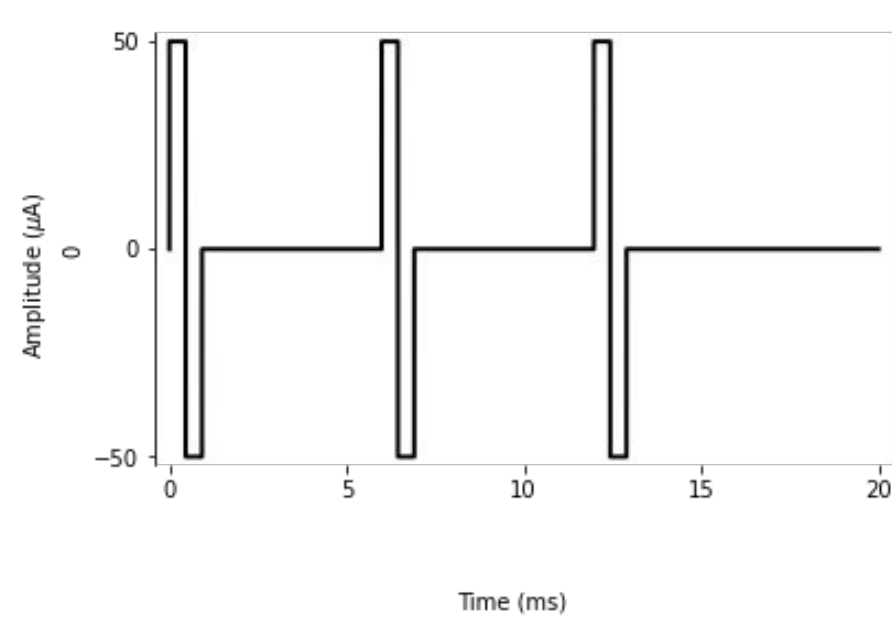


Figure 3: Current method of delivering stimulation current for neurons

### Solving this problem

- To solve this problem, we look to **mathematically model** the **response of neurons** to current
- Based on the model, we seek to **vary the form of current** from what is currently used to a **sinusoidal form** with **interphase gap durations** added in between of the anodic and the the cathodic phase
- Sinusoidal pulses provide increased access to specific neuron classes and assist in neuronal activation
- We seek to combine success seen in interphase gap durations and sinusoidal pulses to identify whether the success of both will be mirrored into sinusoidal pulses with interphase gap
- Test at the epiretinal layer to see whether applicable to retinal implants
- By doing this, we seek to **lower minimum threshold current** and contribute to Retinal Implants becoming **safer** and **more accessible** to the public

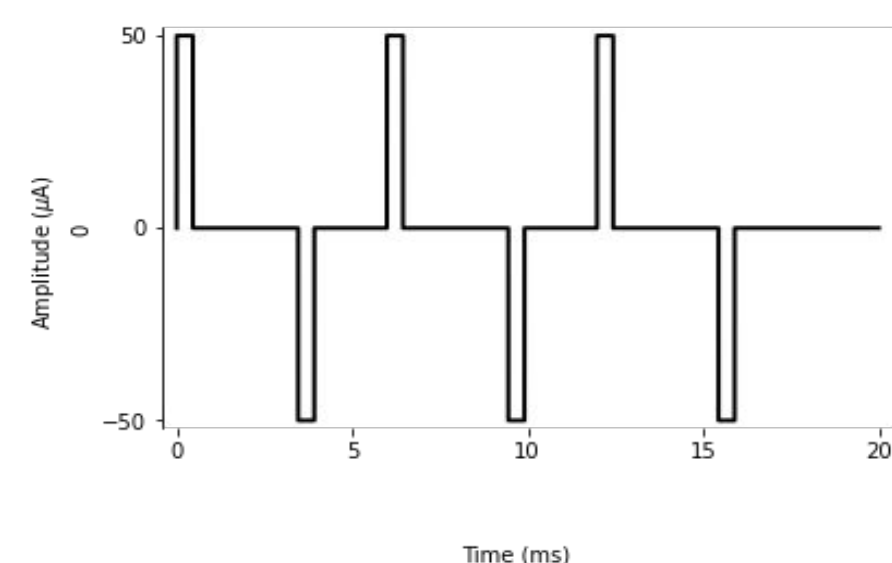


Figure 4: Biphasic pulse with interphase gap added

## Finding Lower Minimum Threshold Currents

### Developing a Neuron Model

- In order to approach the large problem of finding a **lower minimum threshold current**, a neuron model capable of identifying the number of spikes needed to be developed
- A **neuron model** can be used to model retinal cells and their response reaction to **input stimulus current**
- Therefore, we decided to use model developed by Fohlmeister et. al 1997 [6].
- The Neuron model can be modeled by Equation 1

$$C_m \frac{dV}{dt} + \bar{g}_{Na} m^3 h (V - V_{Na}) + \bar{g}_{Ca} c^3 (V - V_{Ca}) + (\bar{g}_K n^4 + \bar{g}_A a^3 h_A + \bar{g}_{K,Ca}) (V - V_K) + \bar{g}_L (V - V_L) = I_{stim} \quad (1)$$

- Model was **computationally generated** using Python Library: **Brian2**
- **Values** of Calcium Voltage and Capacitive current of Potassium/Calcium were **modeled** using equations listed in Fohlmeister et. al 1990[5] and Fohlmeister et. al 1997 [6]

### Calculating Minimum Threshold Current

- **Number of Pulses** to be sent as stimulus current was set at **30 pulses** and was identified using values listed in Weitz et. al 2014
- Weitz et. al 2014[8] identifies that target number of spikes are equal to the number of pulses sent as stimulus current divided by 2. Therefore, target number of **spikes** was **set at 15**.
- After preparing the pulse and neuron model, **Interphase Gap Duration values** were **identified** from Weitz et. al 2014 as **[0, 0.12, 0.24, 0.34, 0.46, 0.92, 1.38, 1.84]**.
- **Values of Interphase Gap** were **tested upon** to identify minimum stimulus current **required to produce target spikes**
- **Trend was identified** by looking at **average percent change** over change in interphase gap duration

## Effects of Interphase Gap Duration on Minimum Threshold Current

### Sinusoidal Pulse Generation

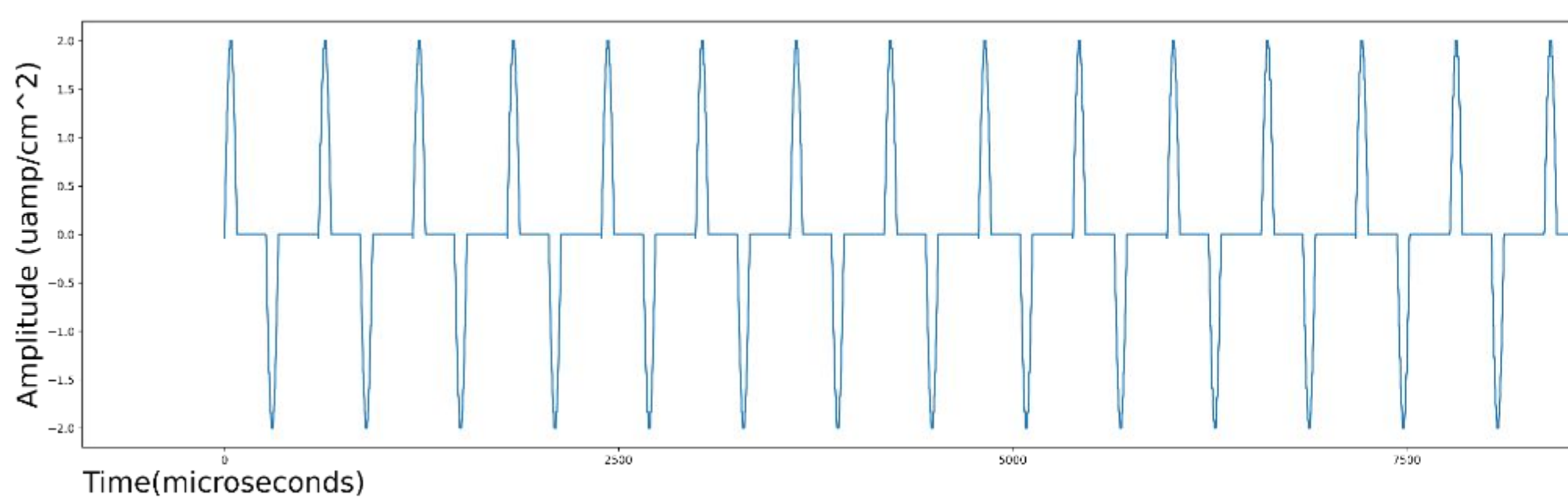


Figure 5: Displaying sinusoidal pulse generated with amplitude of 2 milliamperes of current and an interphase gap of 1.84 milliseconds. Interphase gap can be found in between anodic and cathodic phase.

### IPG vs. Minimum Threshold Current

- Single cell model shows a trend of minimum threshold current required for 15 spikes out of 30 pulses decreasing as interphase gap duration value increases
- Network-level model also shows trend of minimum threshold current decreasing as interphase gap value duration increases
- Both show a decrease of almost 30 percent in the minimum threshold current as interphase gap duration increases from 0 milliseconds of 1.84 milliseconds
- Single cell model trend of decreasing is consistent with what is seen in the network level model at the epiretinal layer

### Minimum Threshold Current

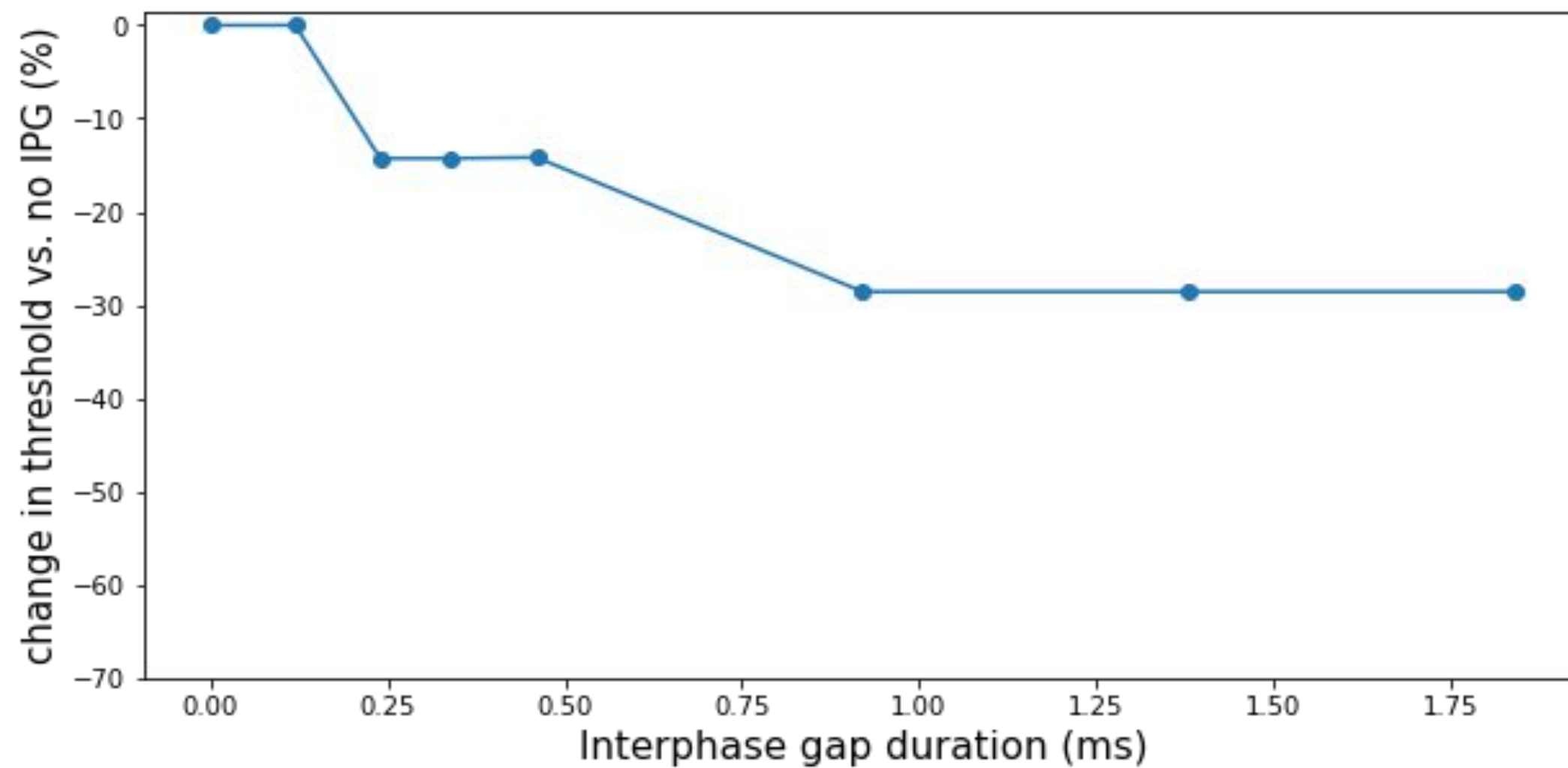


Figure 6: Displaying overall percent change in minimum threshold current as interphase gap duration increases from 0 milliseconds to 1.84 milliseconds for a single cell model

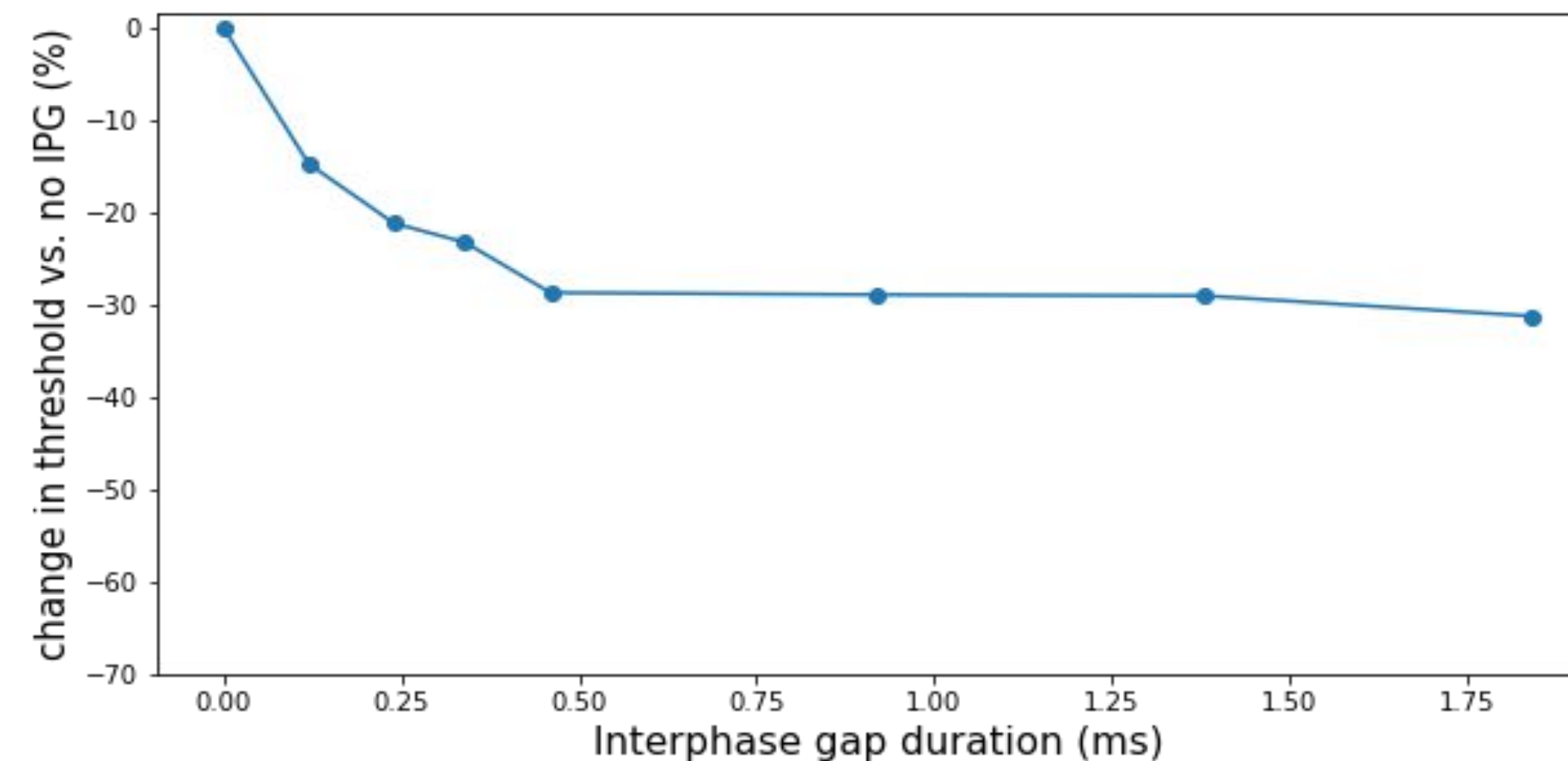


Figure 7: Displaying overall percent change in minimum threshold current as interphase gap duration increases from 0 milliseconds to 1.84 milliseconds for a network level model

## Overall Trend

- Identified trend in single cell-model that as interphase gap value increased from 0 milliseconds to 1.84 milliseconds, the minimum threshold current value had decreased
- Based on our sinusoidal pulse with interphase gap, a ~28.57% decrease in minimum threshold current was noted
- Network-level model testing had shown similar results of a decreasing minimum threshold current as values of interphase gap duration increased
- Based on testing on the network level model, ~31.3 % decrease in minimum threshold current.
- Results from network-level model support the results of the single cell model as both displaying a decreasing trend in minimum threshold current

## Future work

Develop a new neuron model with more ion channels to get more accurate number of spikes

Develop and test on a new suprachoroidal layer because of its success in the past

Find new parameters to research and alter to further lower minimum threshold current

**Acknowledgements:** I would like to acknowledge and thank my mentor, Aiwen Xu as well as acknowledge Dr. Michael Beyeler, Dr. Lina Kim, Sergey Salushev, Raphael Ruschel, the entire RMP staff, fellow lab members, the Department of Computer Science at UC Santa Barbara and my family & friends for their unwavering support throughout the course program

- [1] Y. H.-L. Luo and L. da Cruz, "The Argus® II Retinal Prosthesis System," Progress in Retinal and Eye Research, vol. 50, pp. 89–107, Jan. 2016, doi: 10.1016/j.preteyeres.2015.09.003.
- [2] K. L. Pennington and M. M. DeAngelis, "Epidemiology of age-related macular degeneration (AMD): associations with cardiovascular disease phenotypes and lipid factors," Eye and Vis, vol. 3, no. 1, Dec. 2016, doi: 10.1186/s40662-016-0063-5.
- [3] C. Hamel, "Retinitis pigmentosa," Orphanet J Rare Dis, vol. 1, no. 1, Oct. 2006, doi: 10.1186/1750-1172-1-40.
- [4] K. M. Gehrs, D. H. Anderson, L. V. Johnson, and G. S. Hageman, "Age-related macular degeneration—emerging pathogenetic and therapeutic concepts," Annals of Medicine, vol. 38, no. 7, pp. 450–471, Jan. 2006, doi: 10.1080/07853890600946724.
- [5] R. K. Shepherd, M. N. Shivdasani, D. A. X. Nayagam, C. E. Williams, and P. J. Blamey, "Visual prostheses for the blind," Trends in Biotechnology, vol. 31, no. 10, pp. 562–571, Oct. 2013, doi: 10.1016/j.tbiotec.2013.08.005.
- [6] J. F. Fohlmeister and R. F. Miller, "Impulse Encoding Mechanisms of Ganglion Cells in the Tiger Salamander Retina," Journal of Neurophysiology, vol. 78, no. 4, pp. 1935–1947, Oct. 1997, doi: 10.1152/jn.1997.78.4.1935.
- [7] J. F. Fohlmeister, P. A. Coleman, and R. F. Miller, "Modeling the repetitive firing of retinal ganglion cells," Brain Research, vol. 510, no. 2, pp. 343–345, Mar. 1990, doi: 10.1016/0006-8993(90)91388-w.
- [8] A. C. Weitz et al., "Interphase gap as a means to reduce electrical stimulation thresholds for epiretinal prostheses," J. Neural Eng., vol. 11, no. 1, p. 016007, Jan. 2014, doi: 10.1088/1741-2560/11/1/016007.