

QUIZ

Start

Sensory restoration via nerve stimulation



Solaiman Shokur,

Translational Neural Engineering lab,
Neuro-X, EPFL, Geneva

Outline

Week 11: How we perceive the world via touch

How to give haptic feedback?

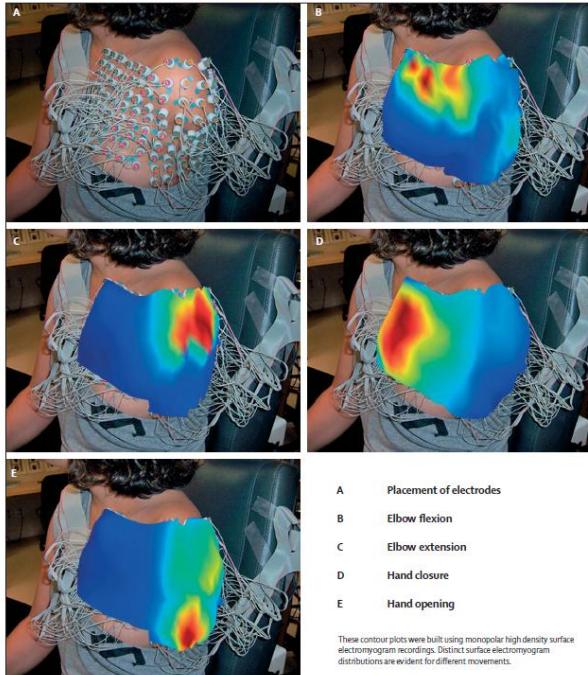
- **Week 13:** Interfacing with the skin
- **Today:** Interfacing with the Peripheral Nervous System
- **Week 15:** Interfacing with the Central Nervous System



Outline

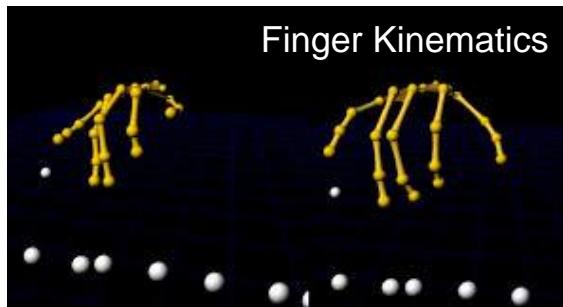
- **Today:** Interfacing with the Peripheral Nervous System
 - Prosthetic limbs
 - Motor decoding
 - EMG,
 - Targeted muscle and sensory reinnervation
 - Sensory feedback
 - Nerve organization
 - Electrodes to interface with the PNS
 - Restoring touch and proprioception sensations via implantable solutions
 - Thermal feedback





Motor decoding

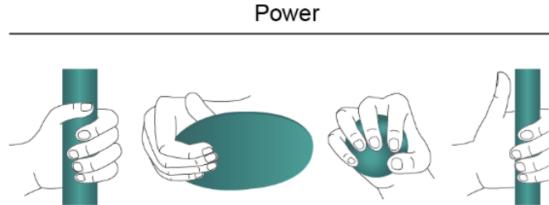
What to decode



Grasping types

A

Prehensile



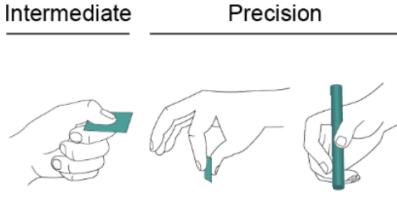
Medium wrap

Palmar

Power sphere

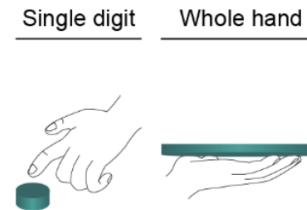
Fixed hook

Intermediate



Precision

Non-prehensile

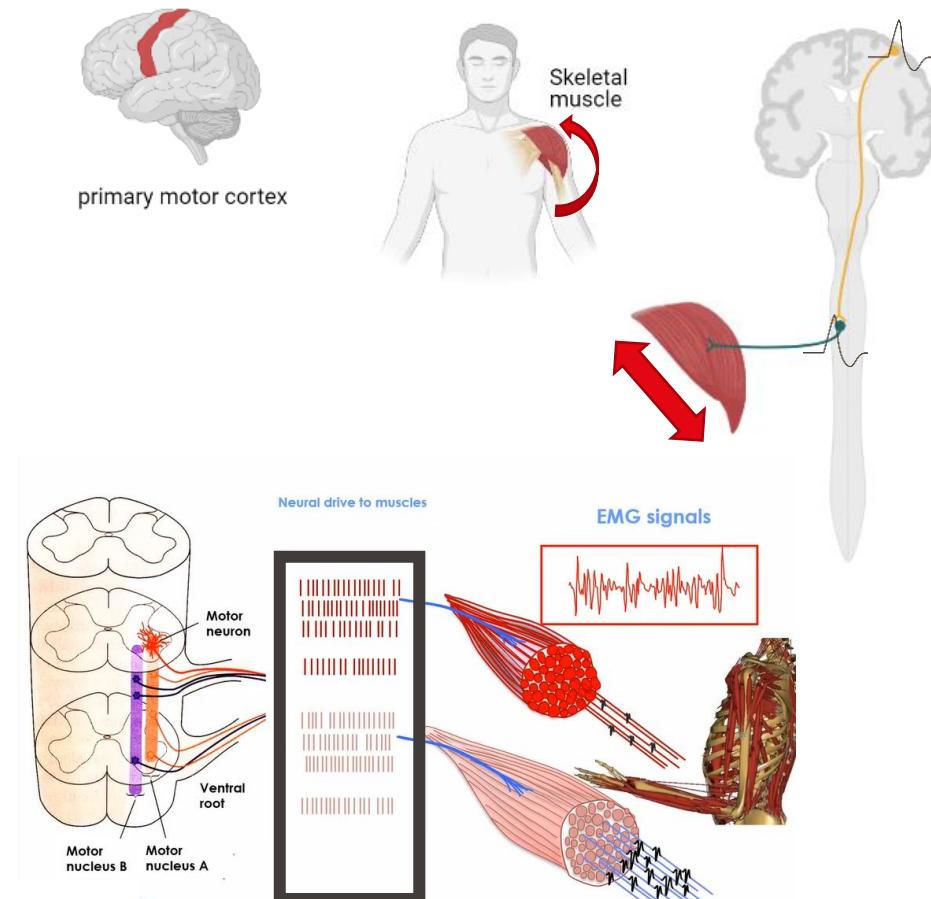


Single digit

Whole hand

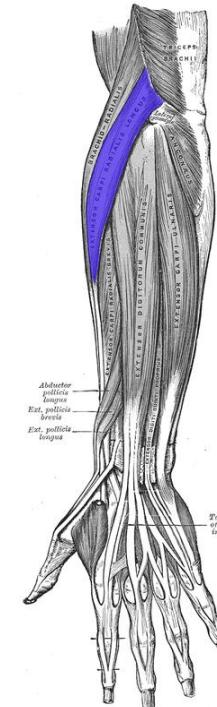
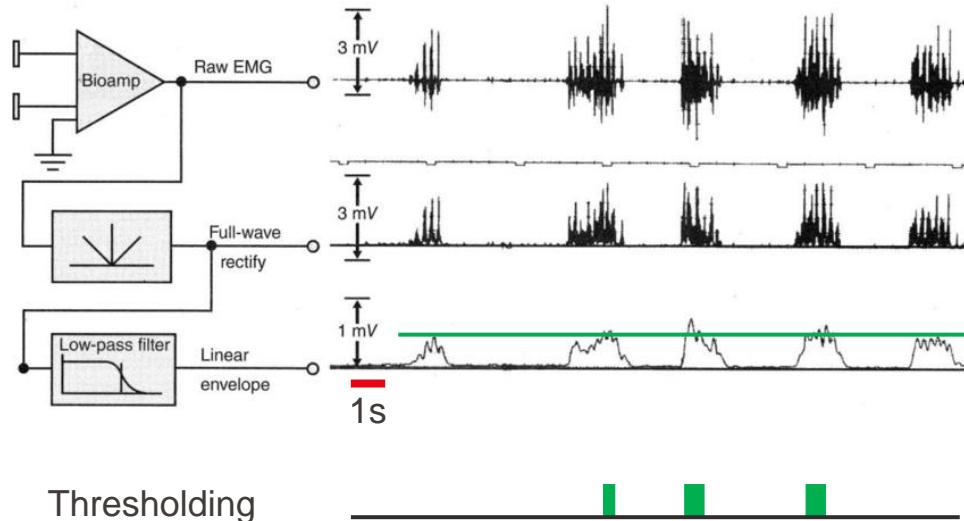
EMG signals

- Motor Neuron + muscle fiber that it supplies = motor unit
- The summation of these potentials is termed motor unit action potentials (MUAP) and is responsible for the muscle contraction.
- EMGs measure the MUAP



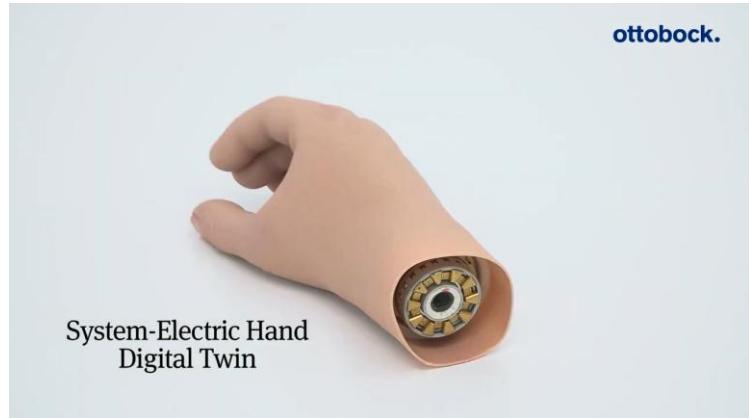
Electromyography (EMG) decoding: basic approach

Extensor carpi radialis longus muscle (wrist extension)



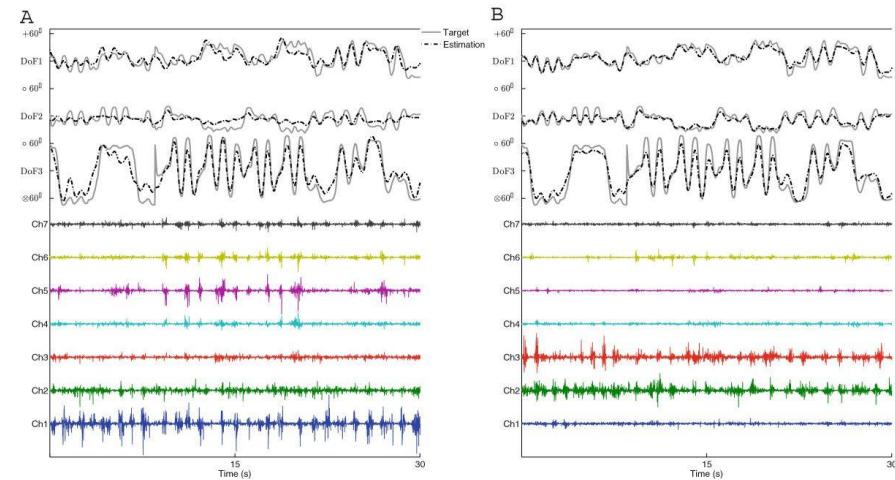
EMG decoding: basic approach

- The majority of commercially available robotic prosthetic hands (RPHs) use threshold-based sEMG decoding over a few surface electrodes
- Generally, control of 1 DoF
- Sometimes more DoF, by cycle through different types of grasps:
 - Non intuitive
 - Cannot be used for multi DoF

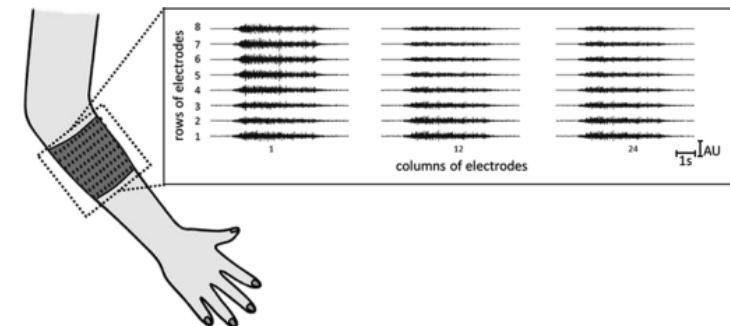


EMG decoding: machine learning approach

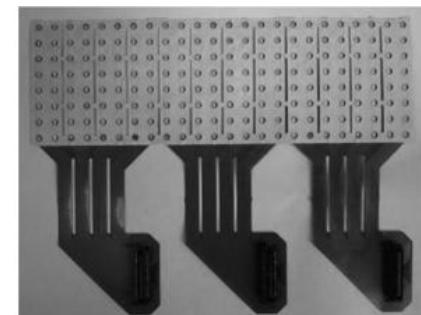
- Using machine learning approach (artificial neural network, ANN): proportional and simultaneous control of 3 DoFs of the wrist joint (flexion/extension, radial/ulnar deviation, and pronation/supination).



- In general, robustness and reliability of classical pattern recognition systems are influenced by **electrode shift during don and doff**, and by the presence of **malfunctioning channels**
- HD EMG grid of electrodes is an ensemble of sensors that records data spatially correlated.
- The variogram is a function that describes the spatial correlation between observations.



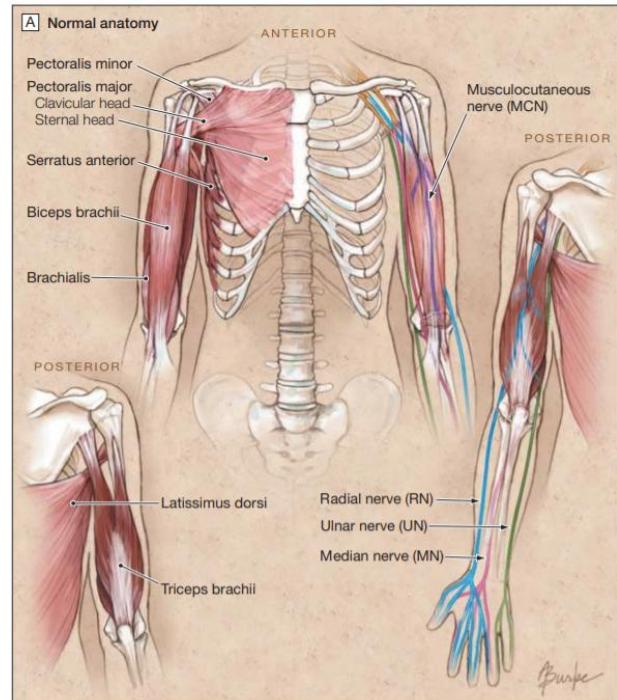
(a)



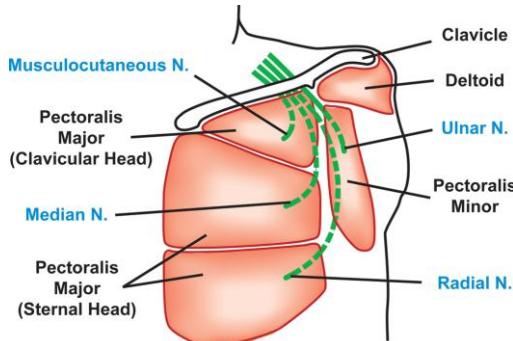
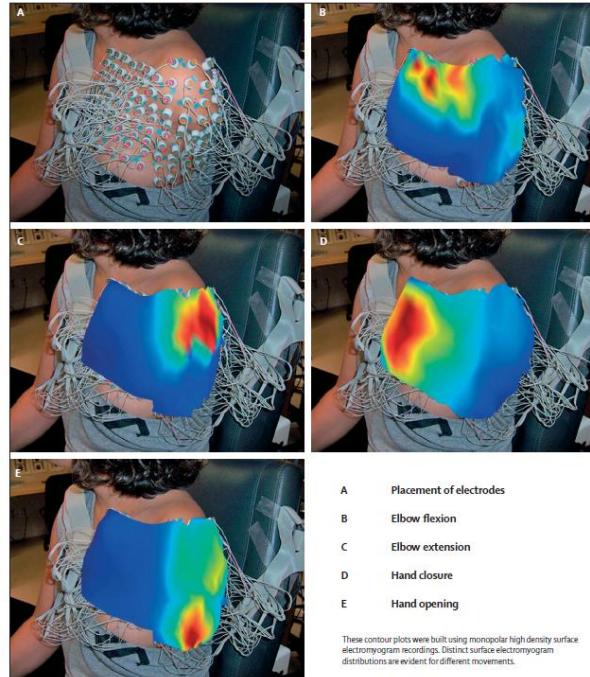
(b)

Improve intuitiveness for prosthetic users: targeted muscle reinnervation (TMR)

- Years after amputation, severed nerves still carry information about movements.
- **But**, these nerves no longer have muscle effectors → this important neural information is unavailable via classic EMG recording.
- **Solution**: nerves severed because of arm amputation could be surgically transferred to **spare** ‘target’ muscles i.e., muscles rendered biomechanically redundant after loss of the arm. This technique is called **Targeted muscle Reinnervation (TMR)**



Targeted muscle Reinnervation

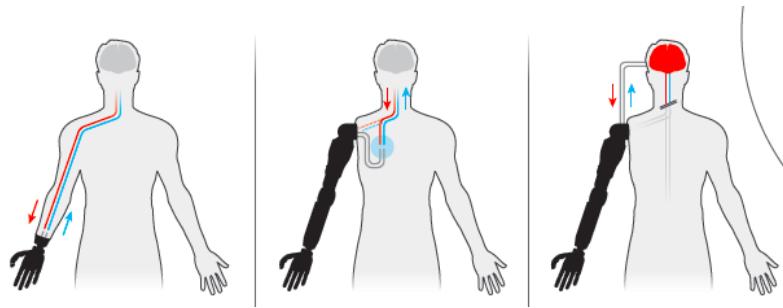


Muscles could be used as *bioamplifiers*

- After reinnervation, contraction of target muscles and EMG signal generation occurs in response to neural control information intended for the missing limb.
- Example: The patient wants to close their missing hand, the transferred median nerve causes depolarization of the target muscle, generating EMG signals that are used to close the prosthetic hand.
- This results in a faster, easier and more intuitive control of the prosthesis control.

- As a team we will be discussing the lessons to come under:
 - Start a company
 - Leave a company
- As a user I want
 - View all teams
 - Create a team

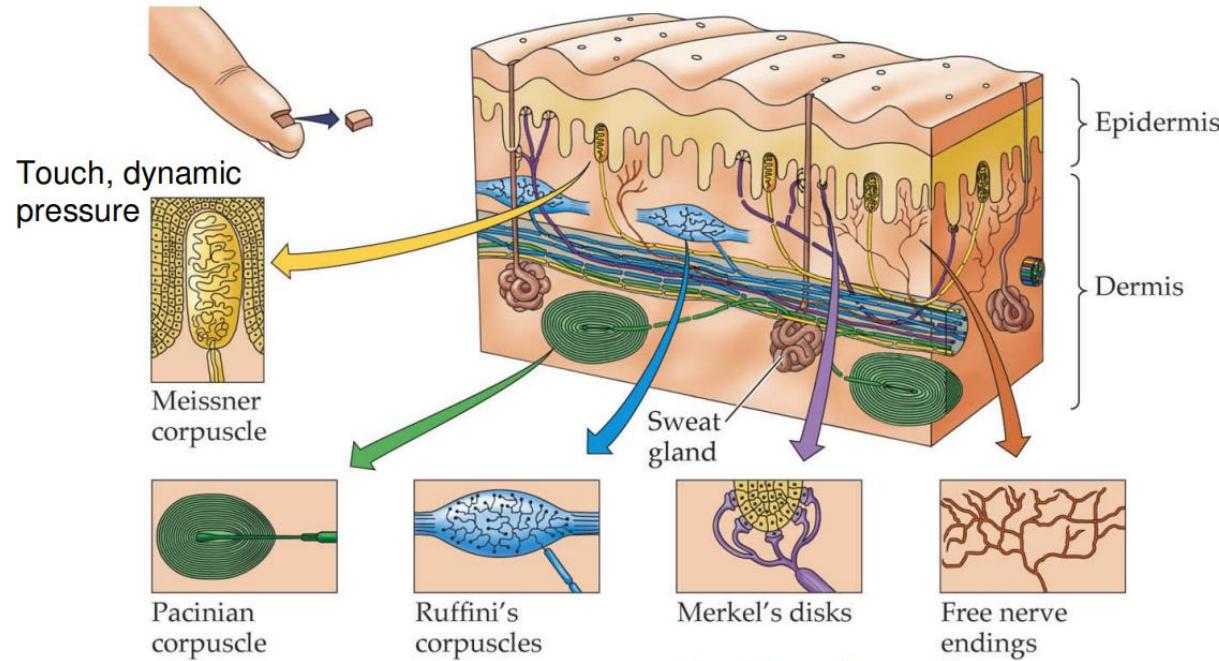


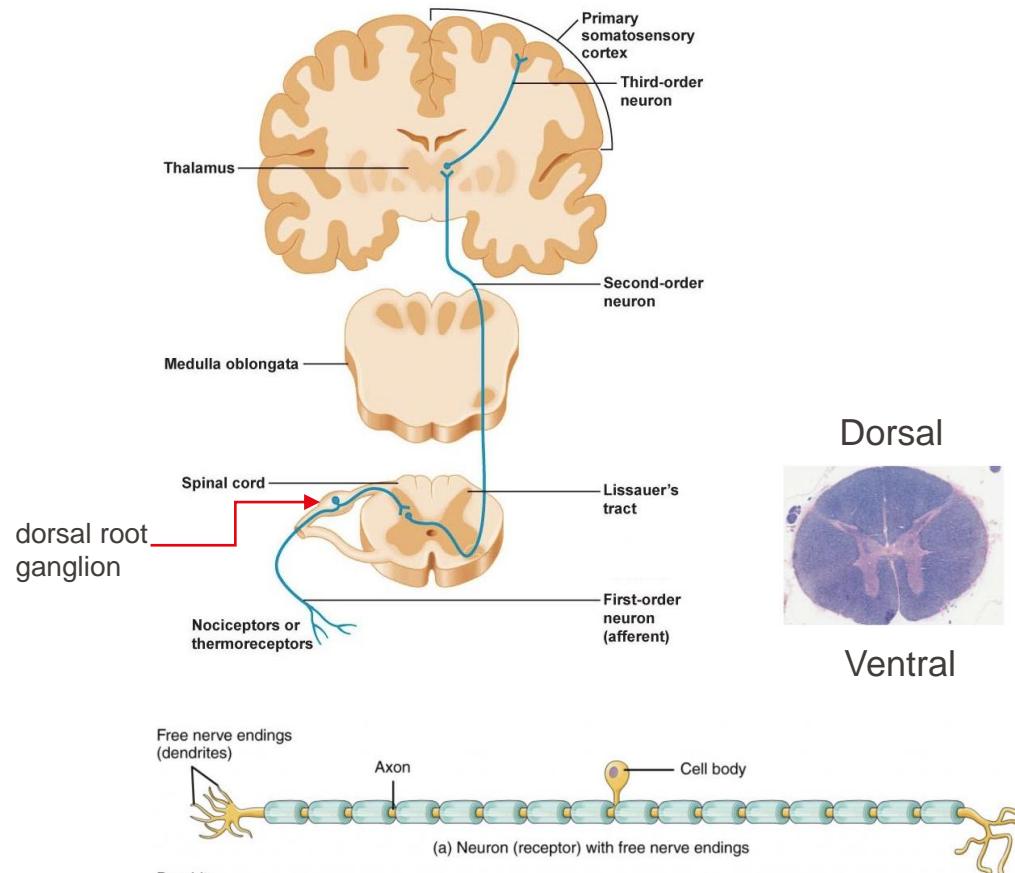


Sensory feedback

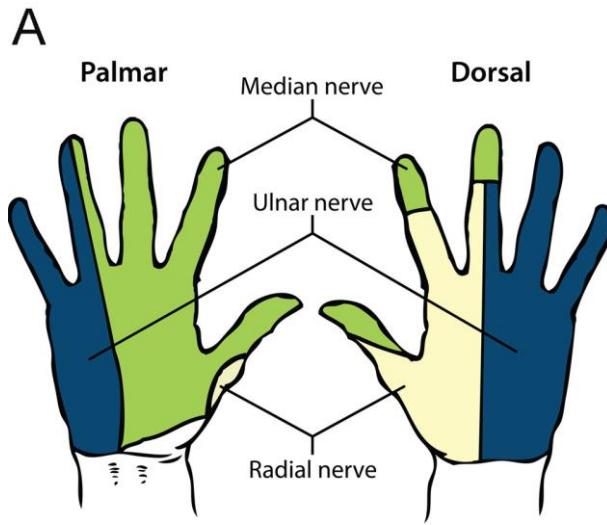
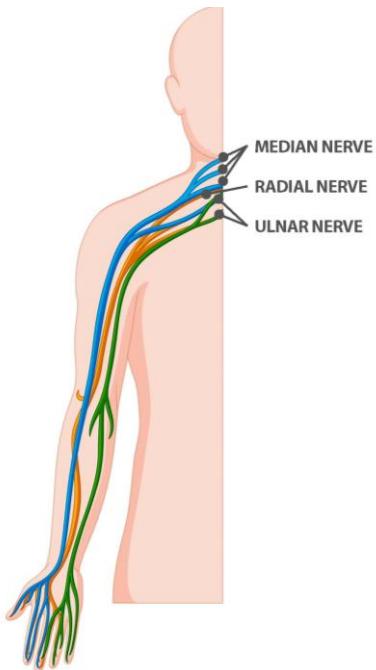
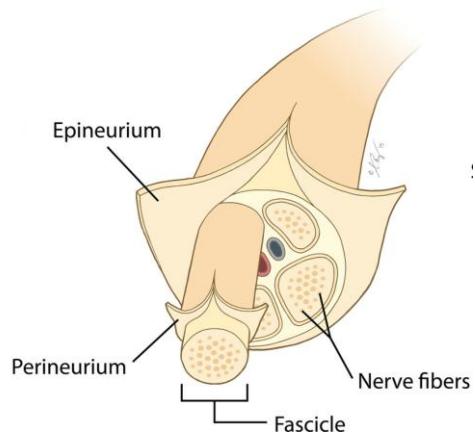
Nerve organization

Previously in HHRI: receptors in glabrous skin

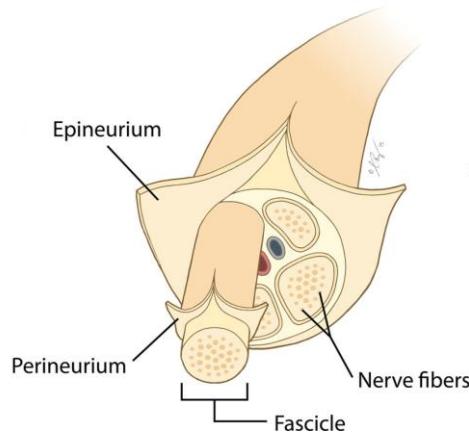




Structure of the nerve



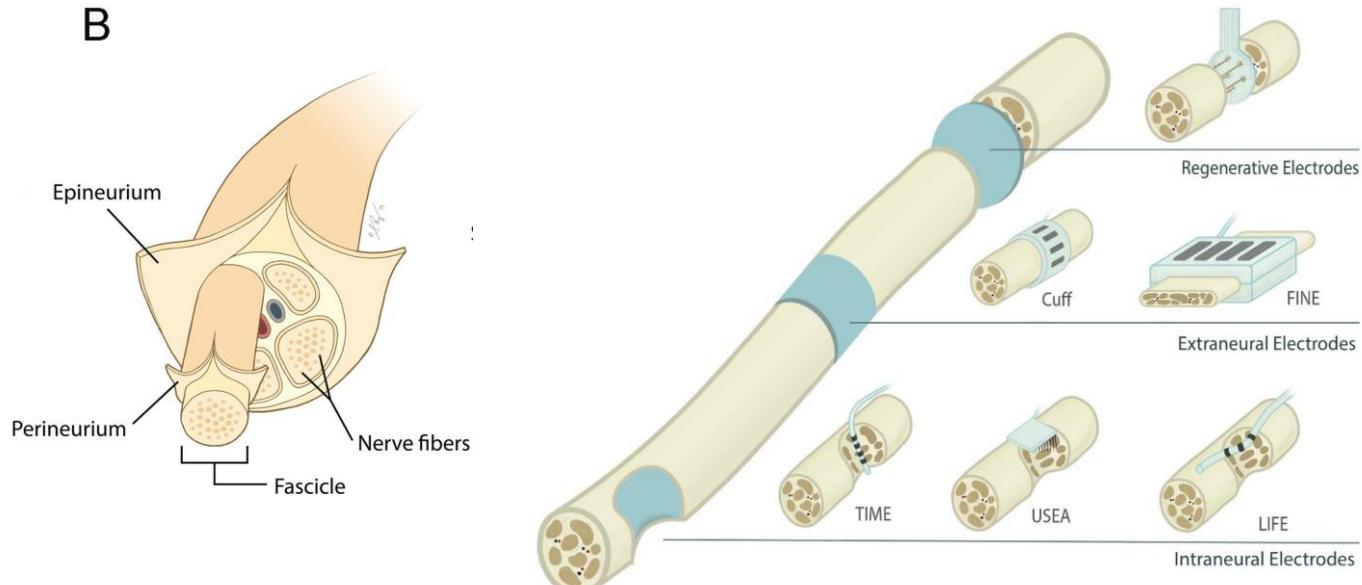
Structure of the nerve



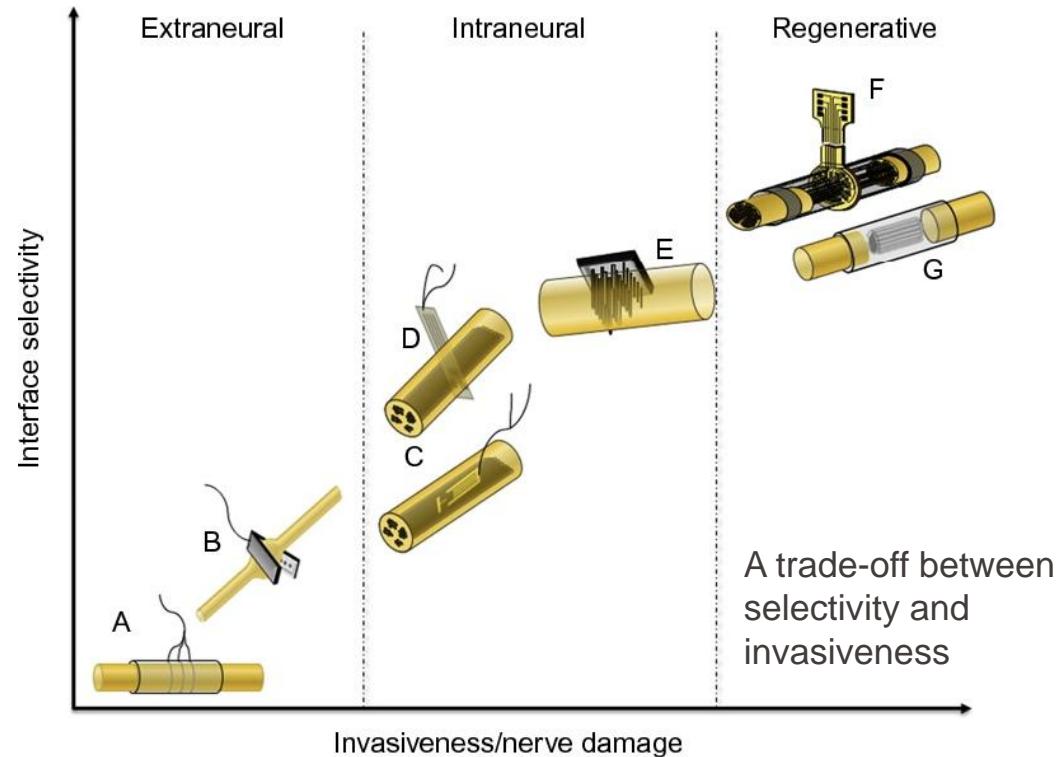
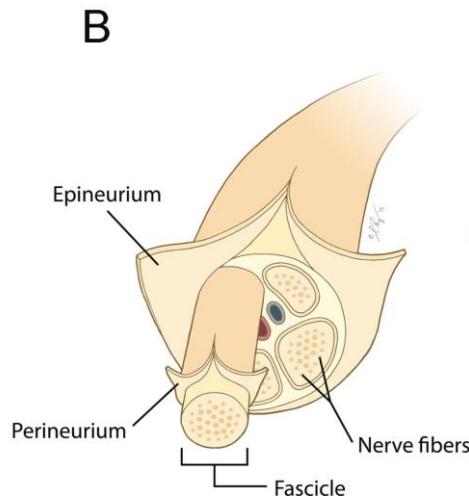
Fiber type	Fiber size (μm)	Function
A α	12–20	Somatomotor, proprioception
A β	5–12	Touch, pressure
A γ	3–6	Muscle spindle
A δ	2–5	Pain and temperature
B	<3	Preganglionic autonomic
C	0.4–1.2 (unmyelinated)	Postganglionic autonomic, pain, temperature

Adapted from Snell (2010).

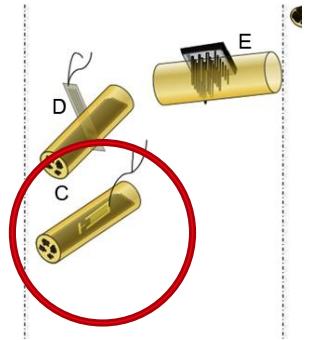
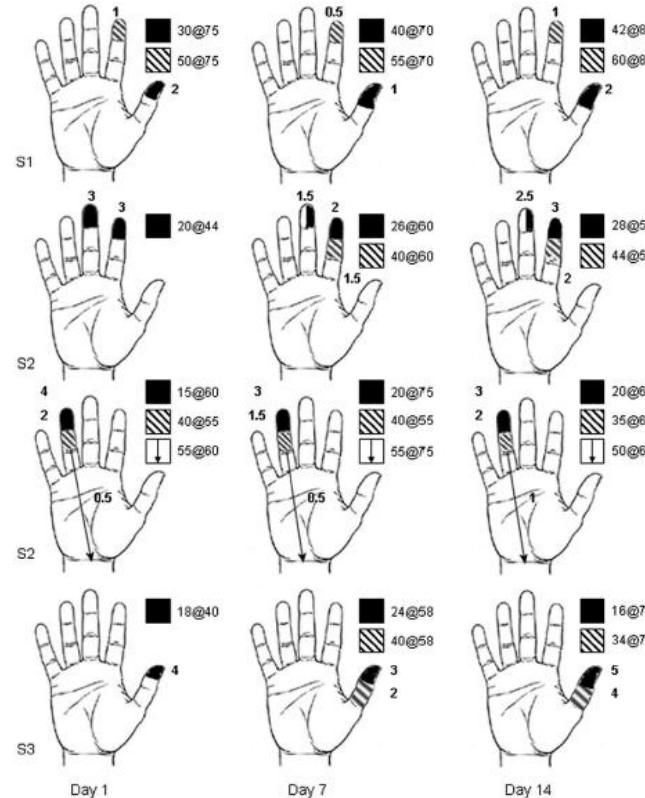
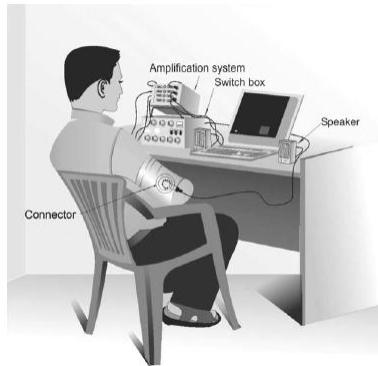
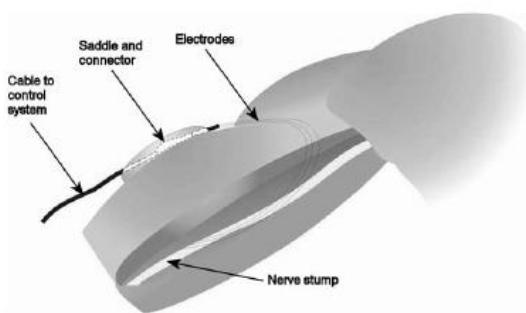
Peripheral neural interfaces



Peripheral neural interfaces

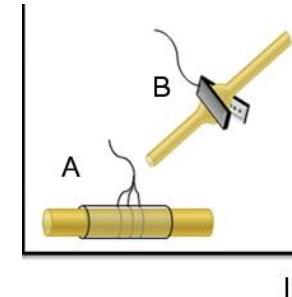
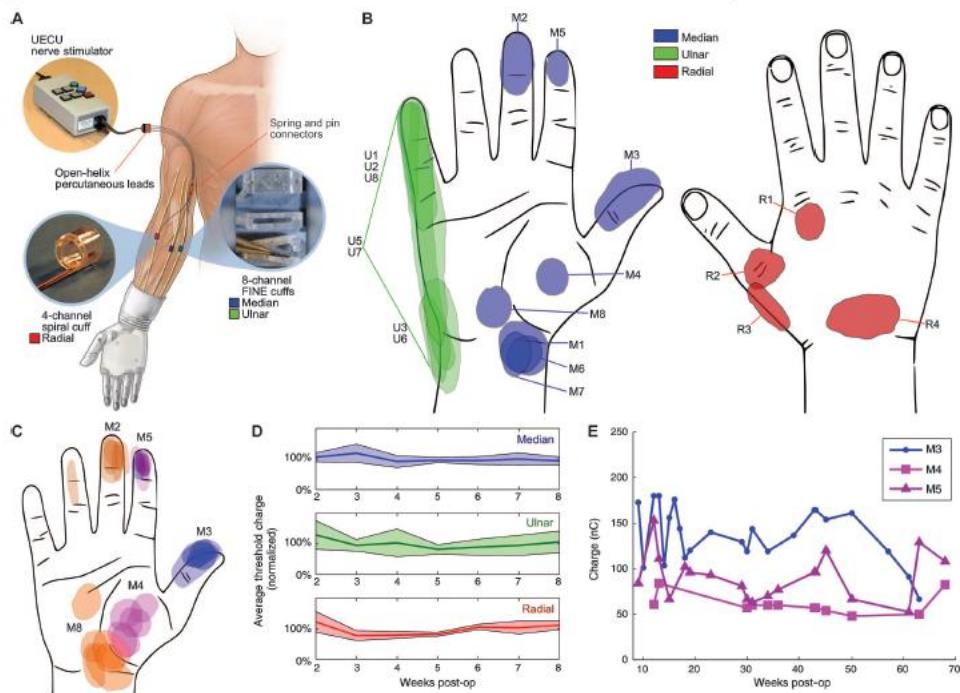


Example of intraneural stimulation



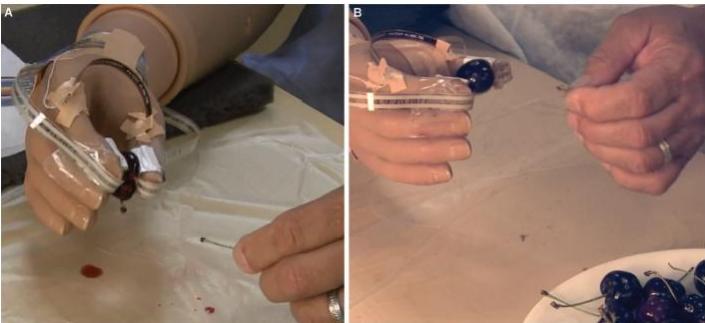
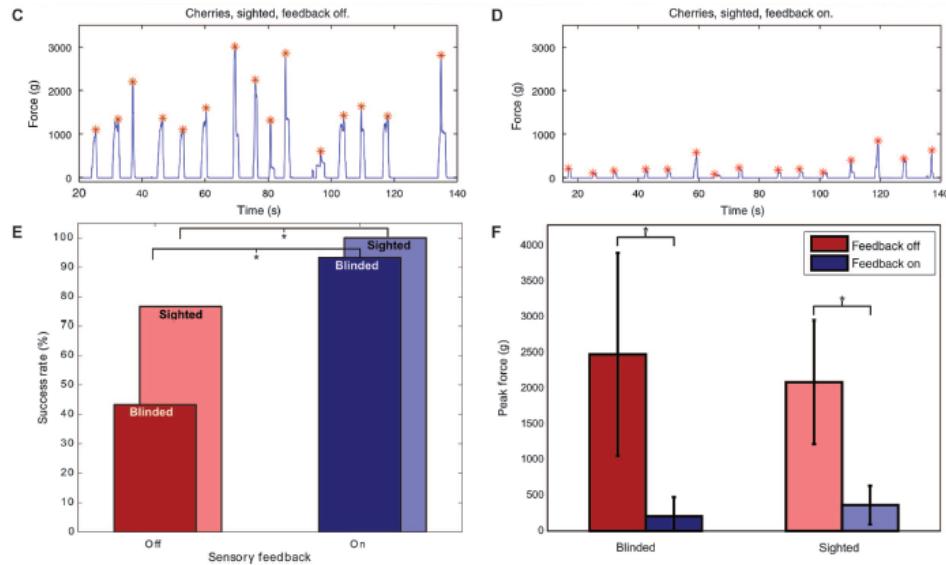
LIFE electrode

Example of extraneural stimulation

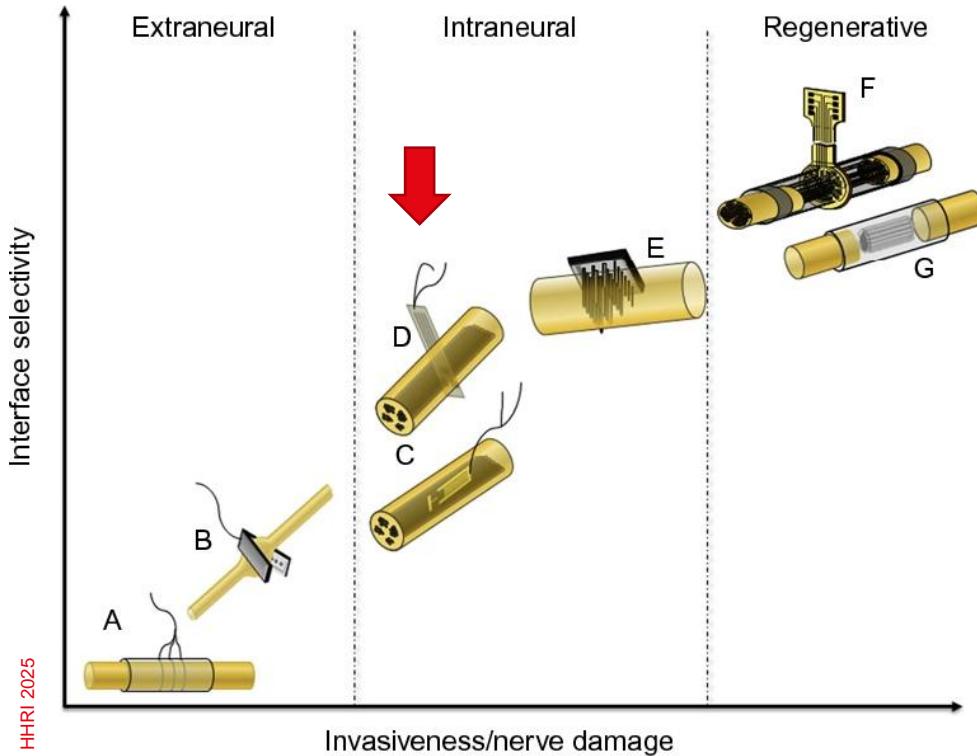


CUFF and
FINE electrodes

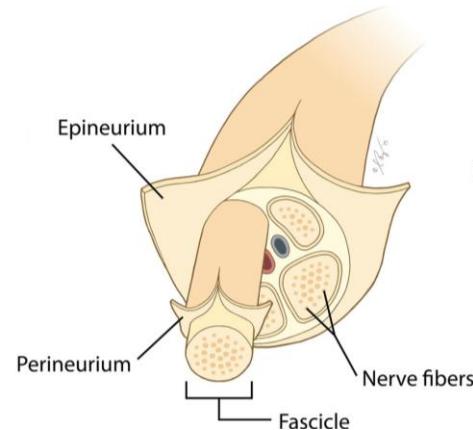
Example of extraneural stimulation



Improvement in a functional task when sensory feedback was present.

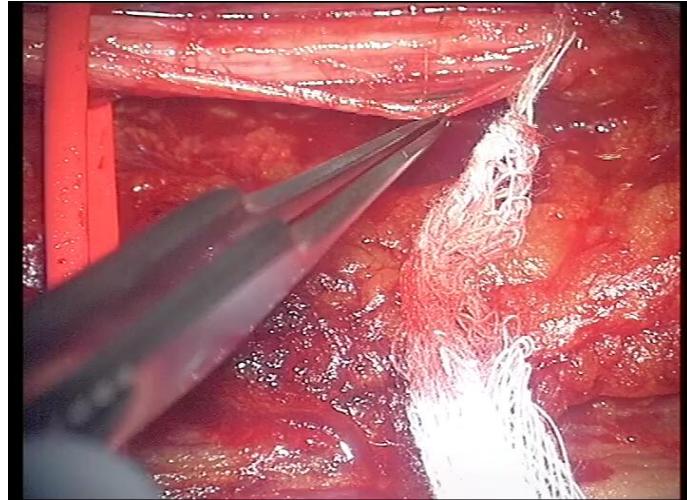
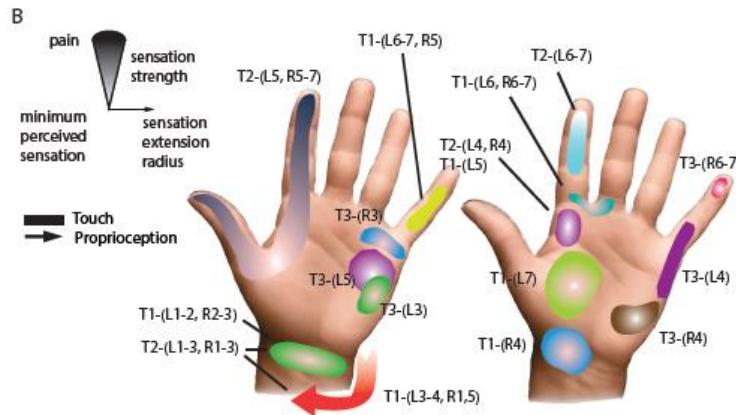


Transverse Intrafascicular Multichannel Electrode (TIME)

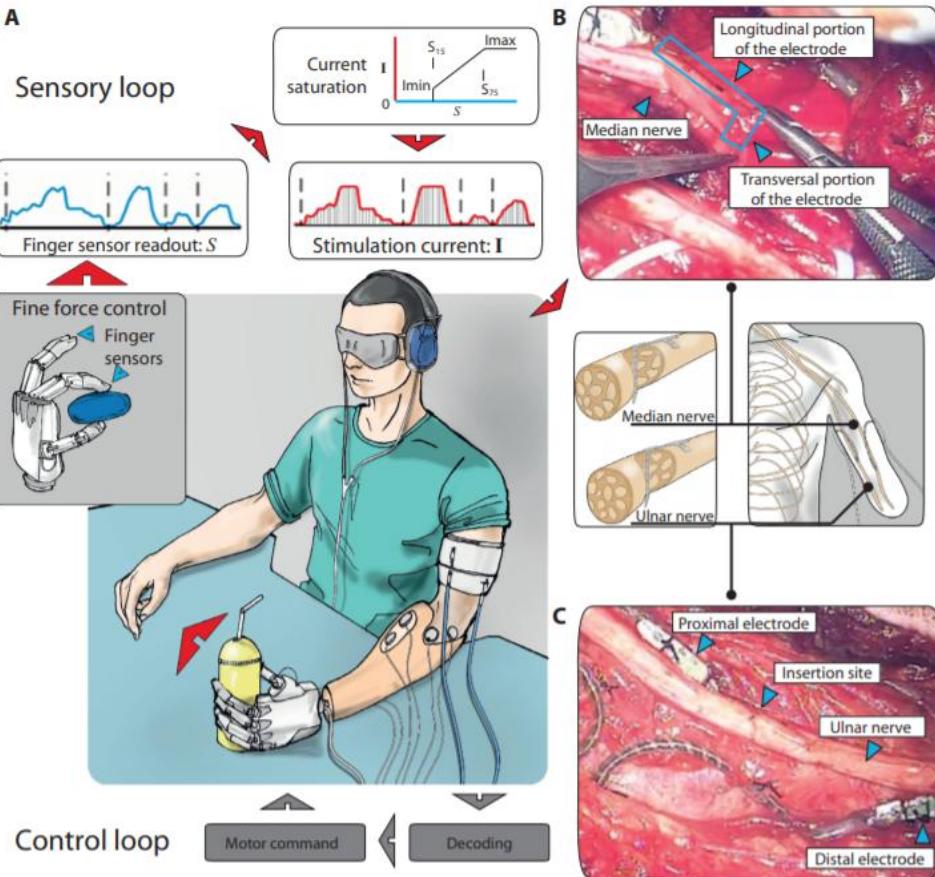


Bidirectional neuro controlled hand prostheses

- Four week implant in a 35-year-old man, from Denmark with a trans-radial amputation in 2004 (fireworks accident)
- Two TIMEs in the median and two in the ulnar nerve

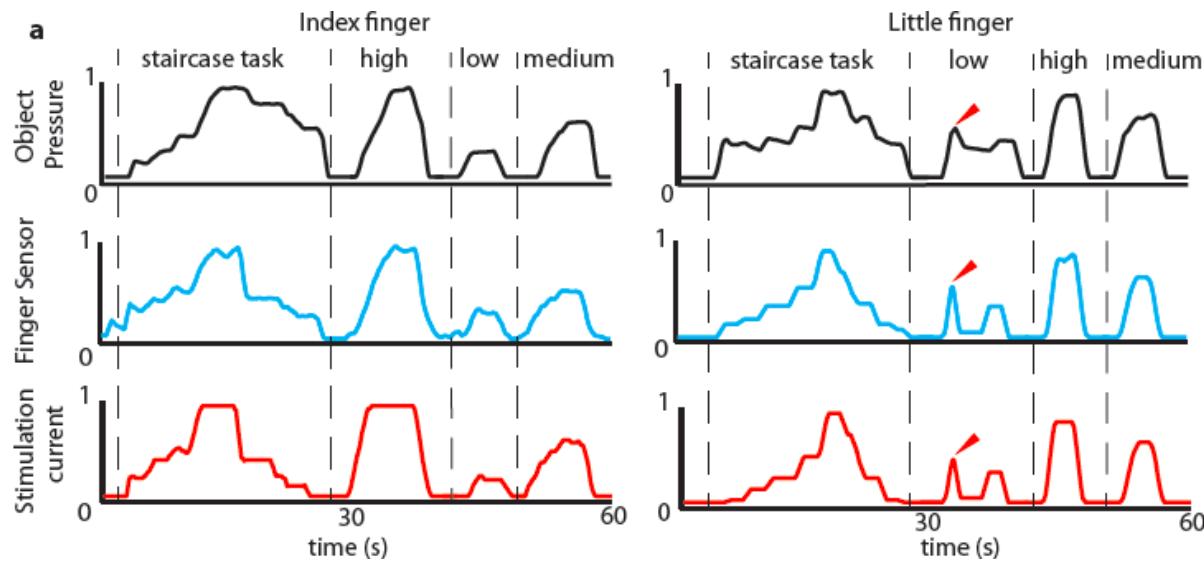


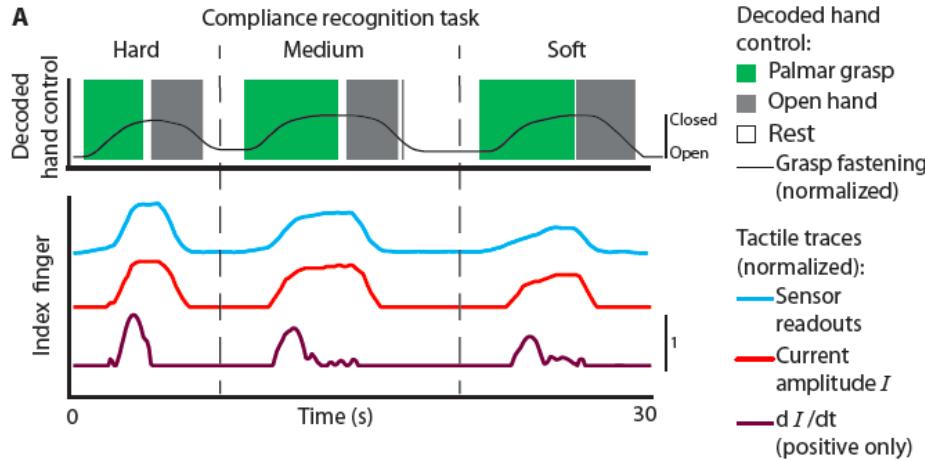
TIME electrodes



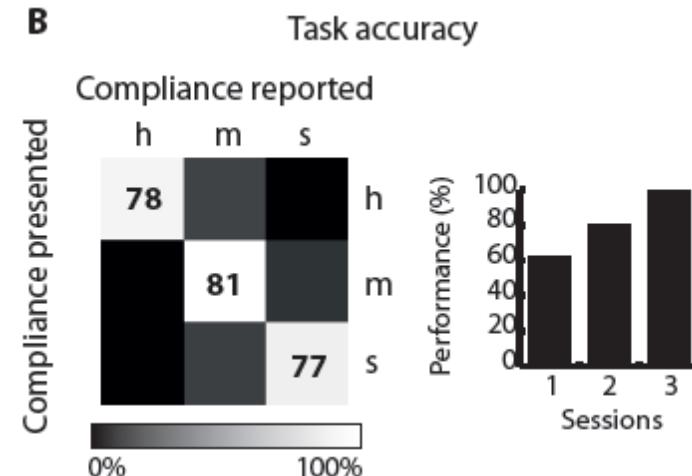
Test the possibility for the subject to use the sensory information during closed-loop control and manipulation experiments

Selection of grasping force levels

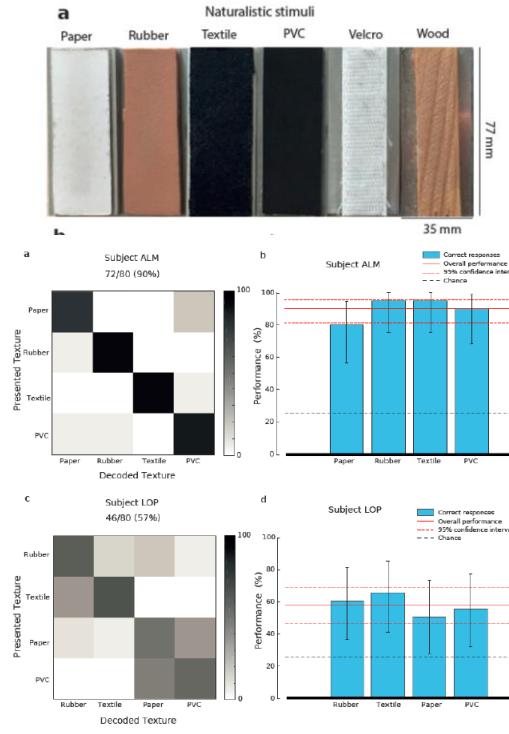
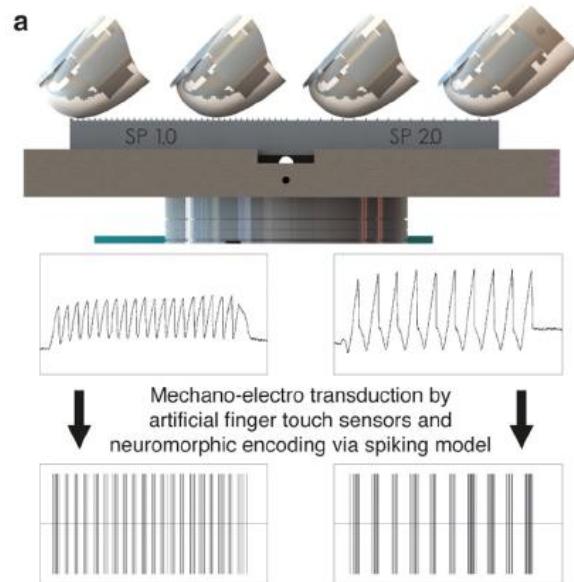
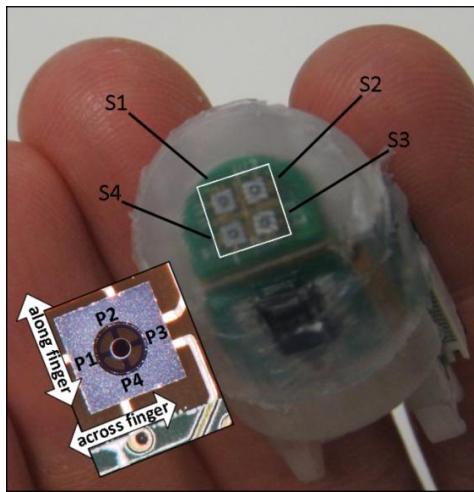




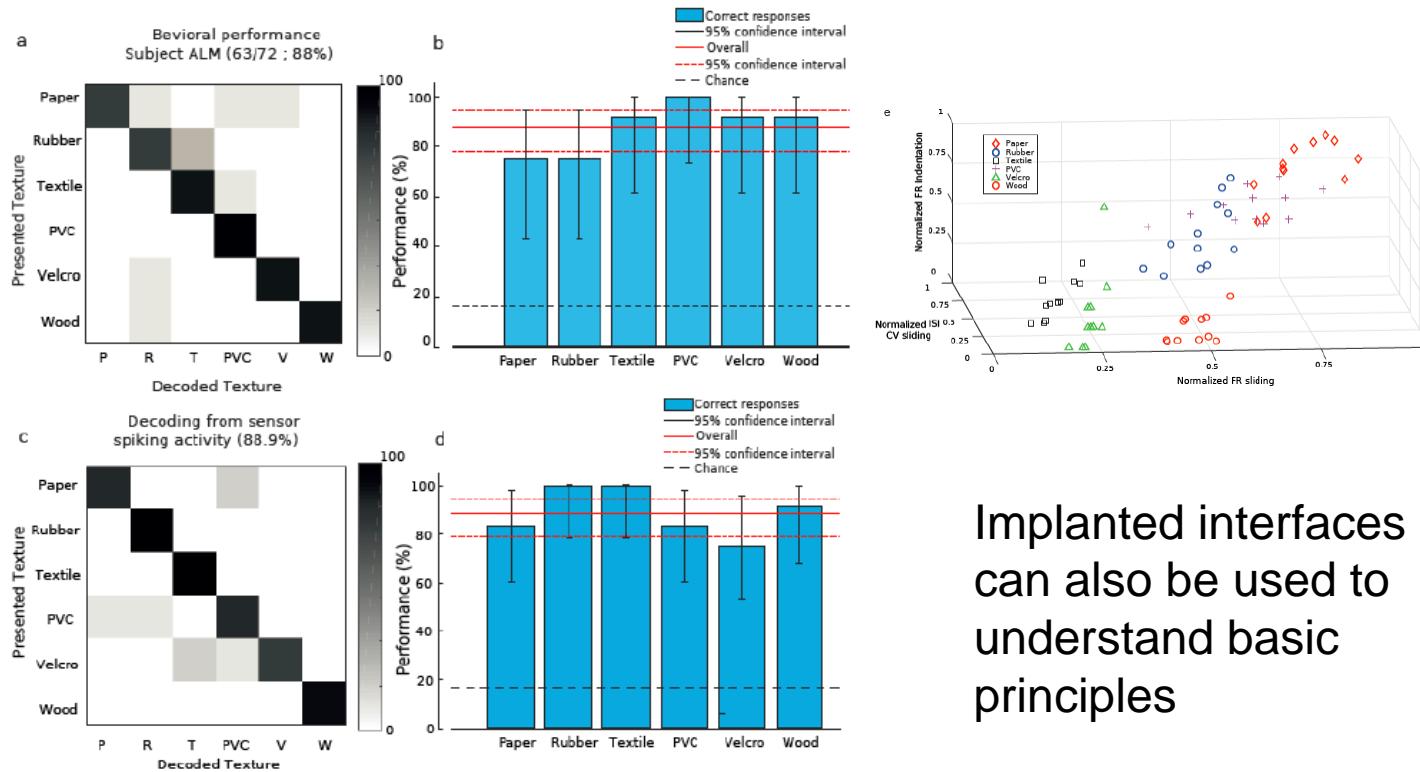
Three objects with different stiffness properties



Detecting texture via FA-type stimulation

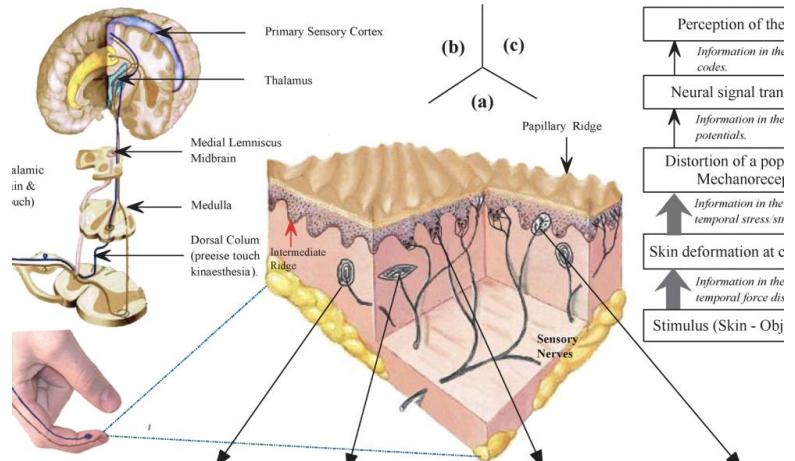


Restoring detection of real textures



Implanted interfaces
can also be used to
understand basic
principles

Human touch system



Classification Basis	Pacinian Corpuscle	Ruffini Corpuscle	Merkel Cells	Meissner's
Activation Rate	FA II	SA II	SA I	FA I
Temporal Acuity (mm)	Fast	Slow	Slow	Fast
Activation/rapid	Best(μ m)	7+	0.5	3-4
Activation threshold	Mean(μ m)	40	8	2
Activation Frequency (Hz)	40-500+	300	30	6
Activation Velocity (m/s)	35-70	100-500+	0.4-3	3-40
Active Stimuli	Temporal changes in the skin deformation	Sustained downward Pressure; Lateral skin stretch, Skin slip.	Spatial deformation; Sustained pressure; Curvature, edge, corners.	Temporal char deformation
Sensory Function	High frequency vibration detection; Tool use.	Finger position, Stable grasp.	Pattern/form detection, texture perception, Tactile flow perception.	Low frequency motion detection; Tactile flow perception.

Biomimetic encoding strategy

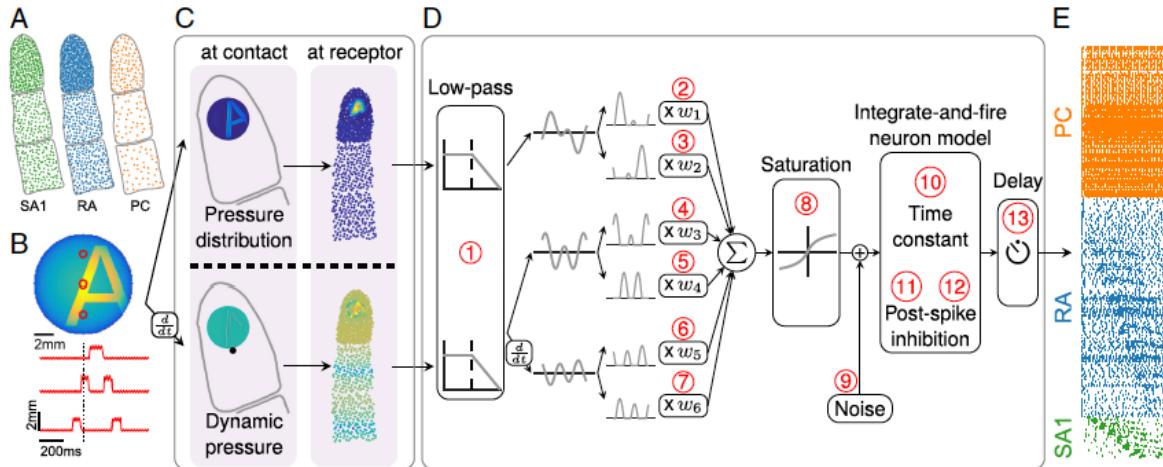
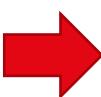
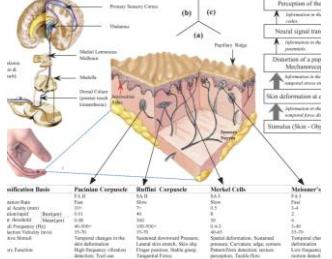
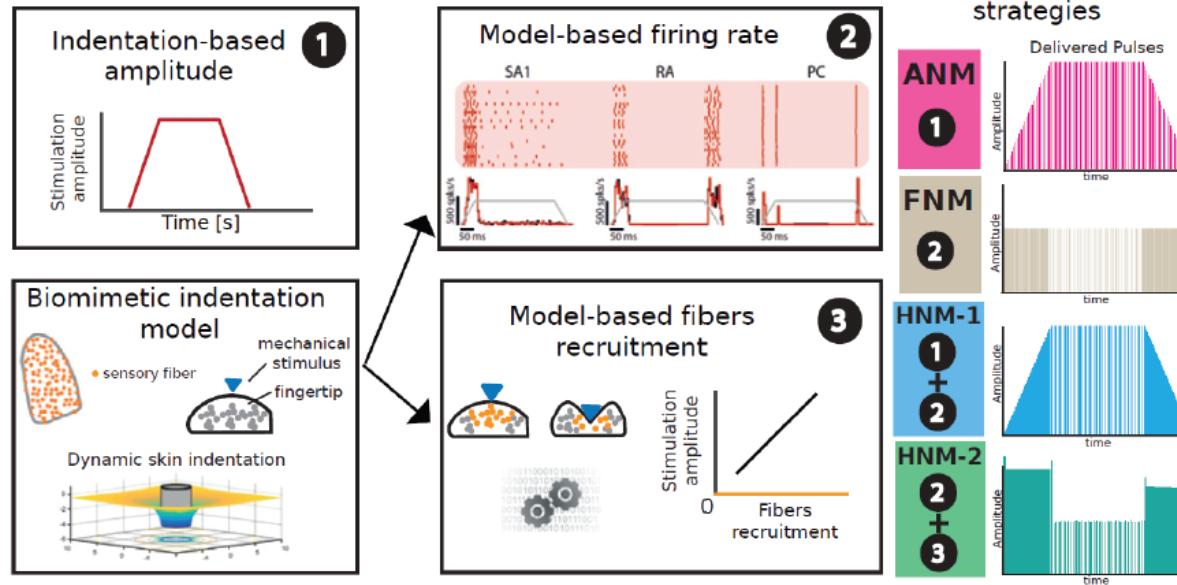


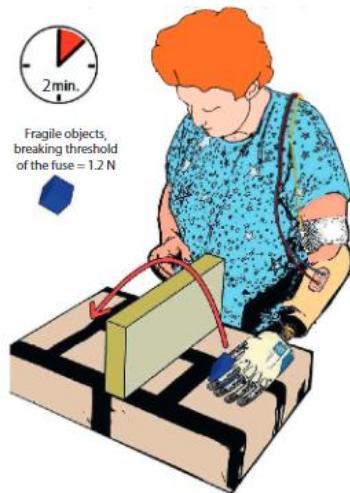
Fig. 1. Overview of the model. (A) Receptors are distributed across the skin given the known innervation densities of SA1, RA, and PC afferents. (B) The stimulus—in this case, a vibrating embossed letter A scanned across the skin—is defined as the time-varying depth at which each small patch of skin (here dubbed a pin) is indented (with a spatial resolution of 0.1 mm). The traces in *Lower* show the time-varying depth at the three locations on the skin indicated by the red dots in *Upper*. (C) The mechanics model relies on two parts: (*Upper*) modeling the distribution of stresses using a quasistatic elastic model and (*Lower*) modeling dynamic pressure and surface wave propagation. *Left* shows the surface deformation of the skin, and *Right* shows the resulting pattern of stresses at the location of the receptors. (D) The spiking responses are determined by leaky IF models using different sets of up to 13 parameters (marked in red numbers) for individual SA1, RA, and PC afferents fit based on peripheral recordings to skin vibrations. Adapted from ref. 71. (E) The output of the model is the spike train of each afferent in the population. Raster of the response of the afferent population sampled as in A to the stimulus shown in B (only active afferents are included). Note that the SA1s (in contact) only encode the spatial aspect of the stimulus, that the PCs encode from the whole finger phase-lock with the 200-Hz vibration, and that the RAs show mixed spatial and vibration responses.

Biomimetic encoding strategy

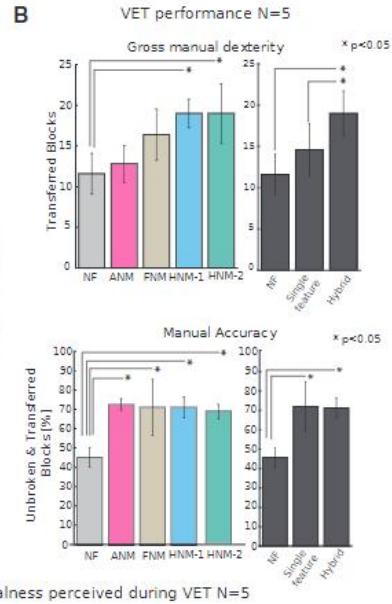


Biomimetic encoding strategy

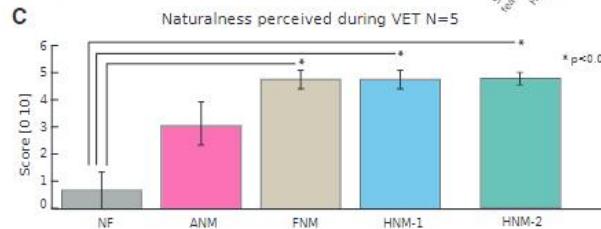
A Setup - Virtual Eggs Test (VET)



B



C



The two hybrid models are better to perform the virtual egg task.

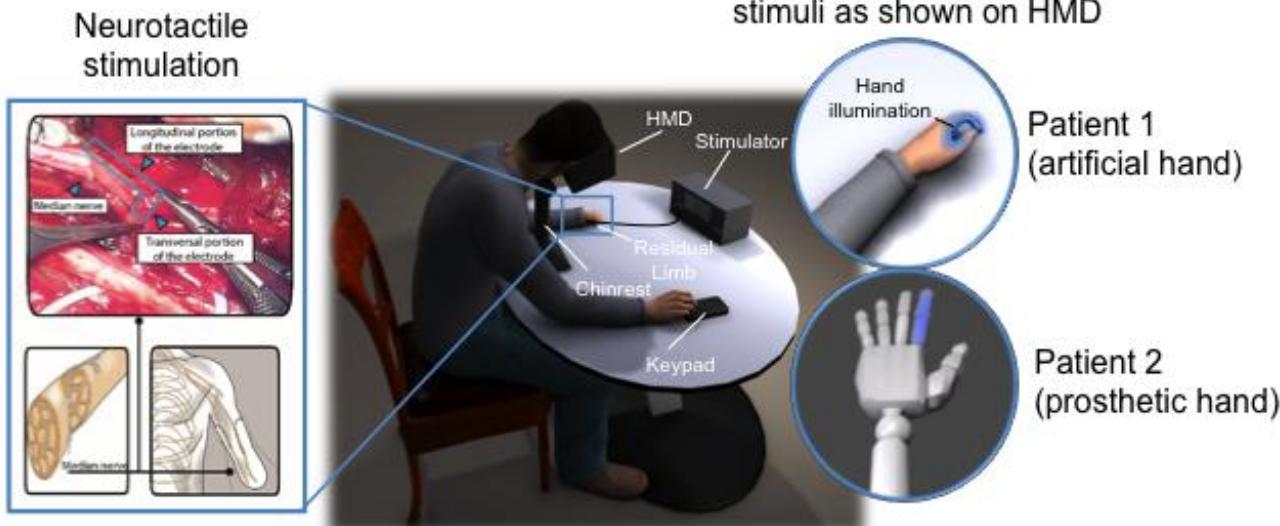
The biomimetic approaches were judged more natural

Embodiment

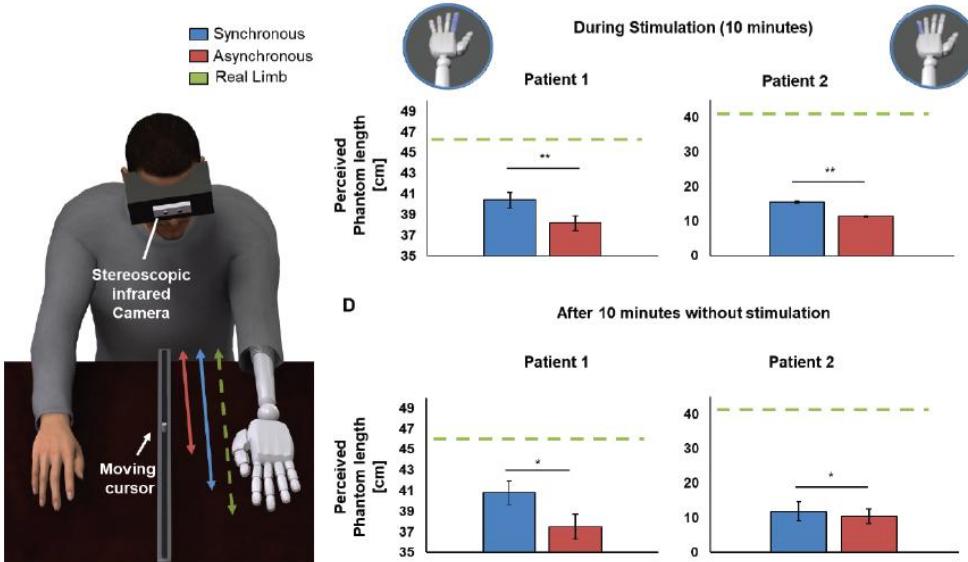


O. Blanke

G. Rognini



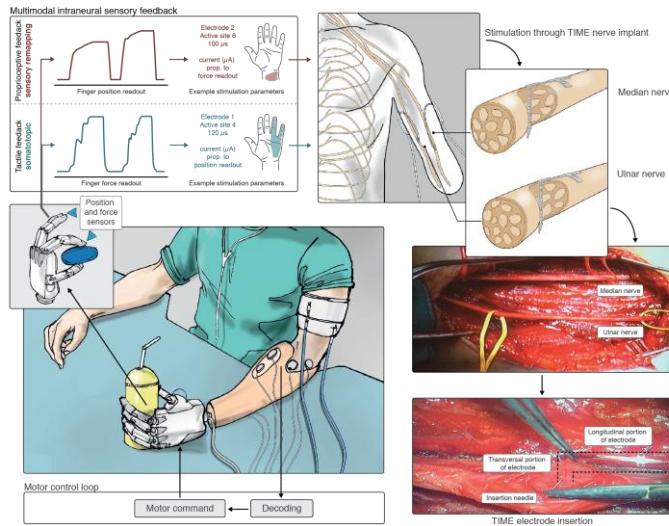
Sensory feedback



Synchronous Tactile feedback (via intraneuronal stimulation) and Visual feedback (illumination of the region corresponding to phantom touch) feedback increased prosthesis embodiment and reduced the telescoping effect (perception that limb is shorter).

Bidirectional neurocontrolled hand prostheses

“Multimodal” sensory feedback



a Experimental setup

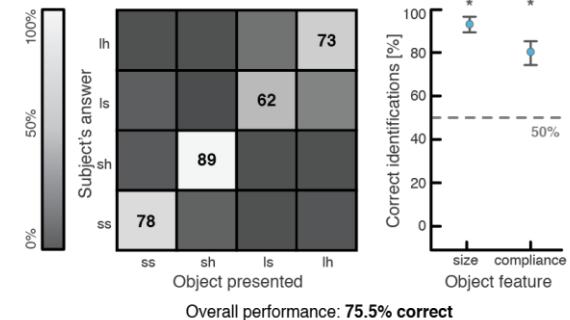
ss – small soft sh – small hard



ls – large soft lh – large hard

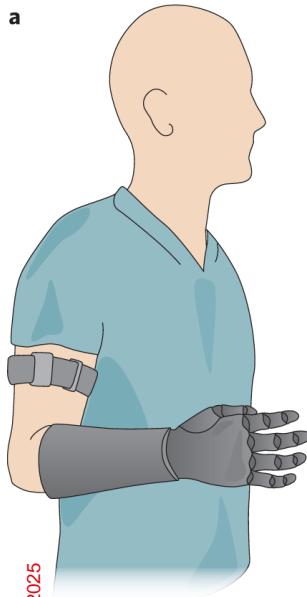


b Task performance with touch and proprioception (n=2)

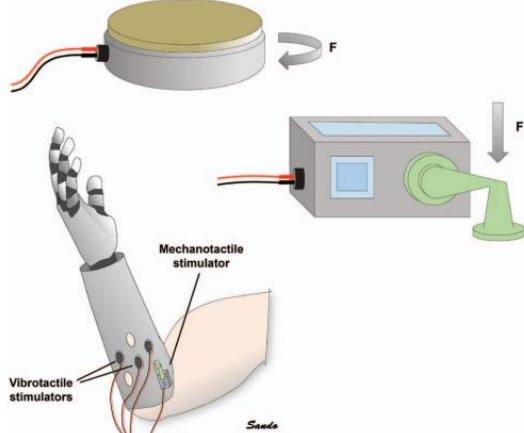


Tactile feedback via non-invasive solutions

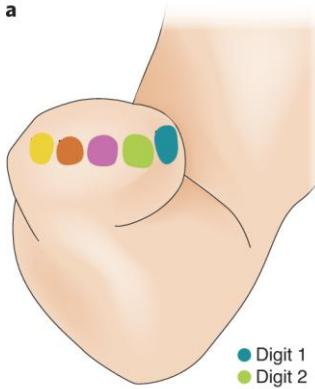
a



HHRI 2025

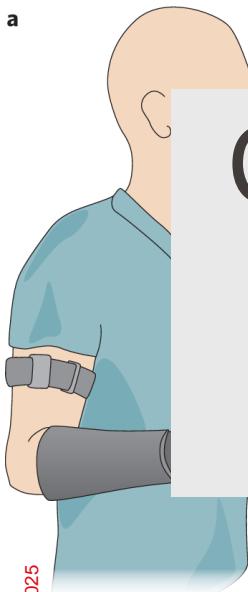


a



- Digit 1
- Digit 2
- Digit 3
- Digit 4
- Digit 5

a

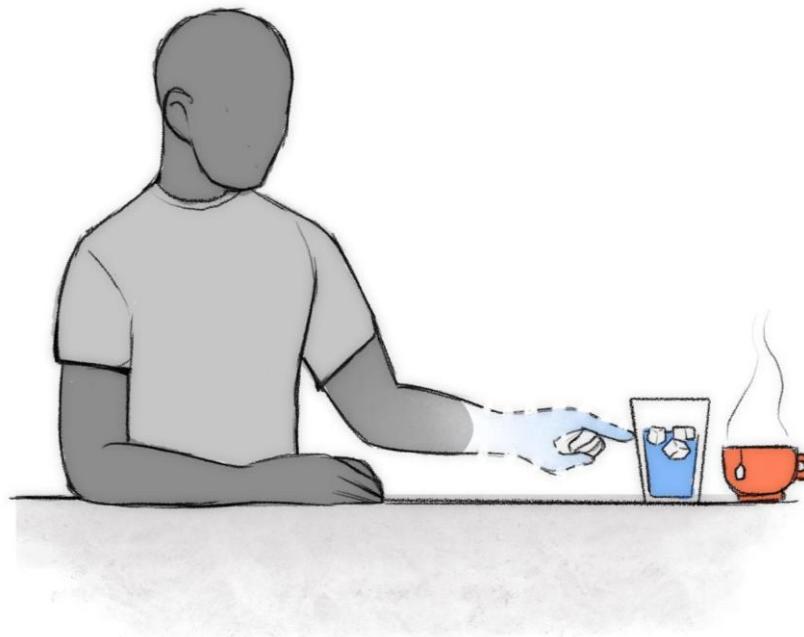


Can we exploit phantom
sensations to provide
thermal information?

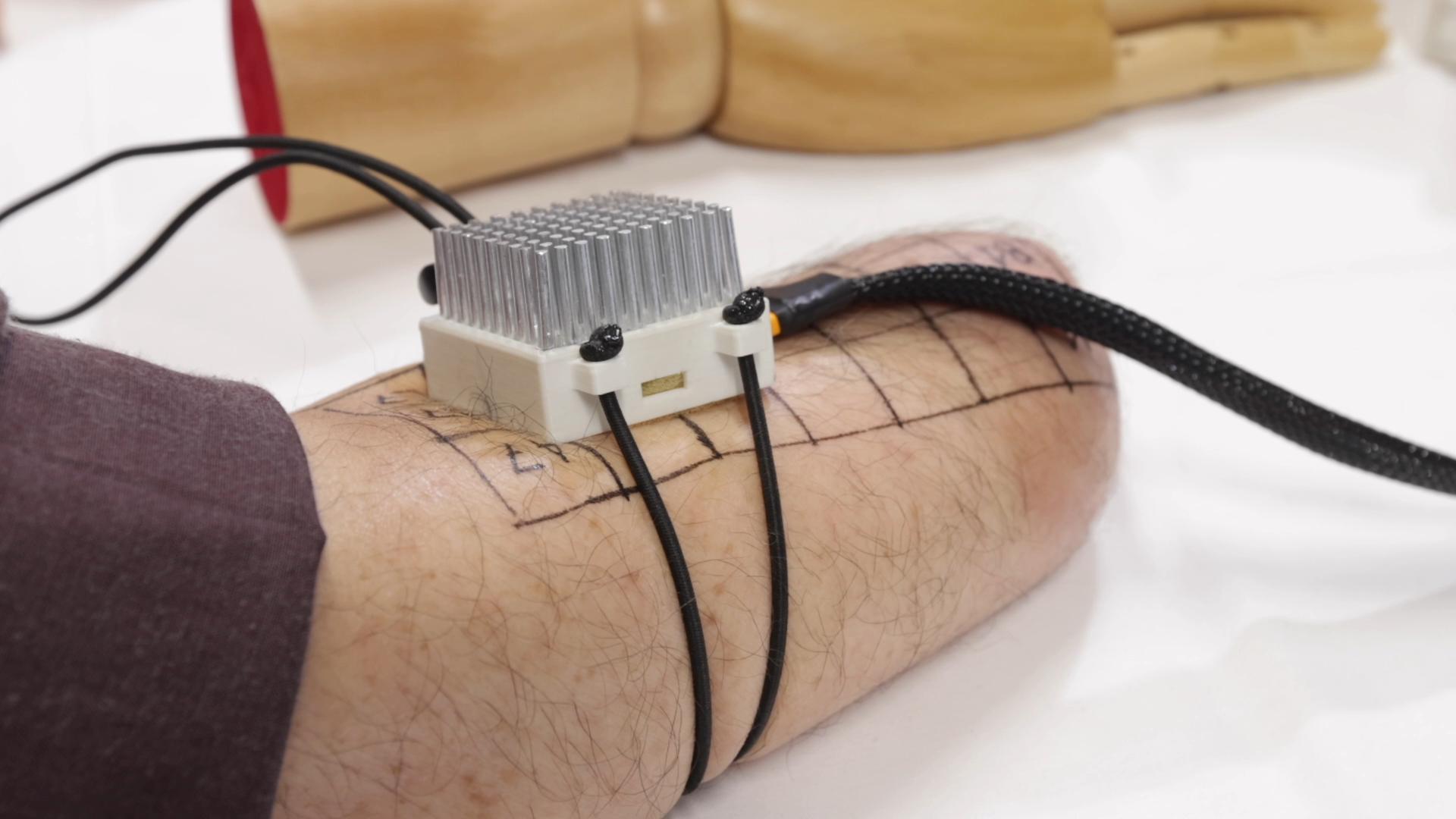


Digit 4
Digit 5

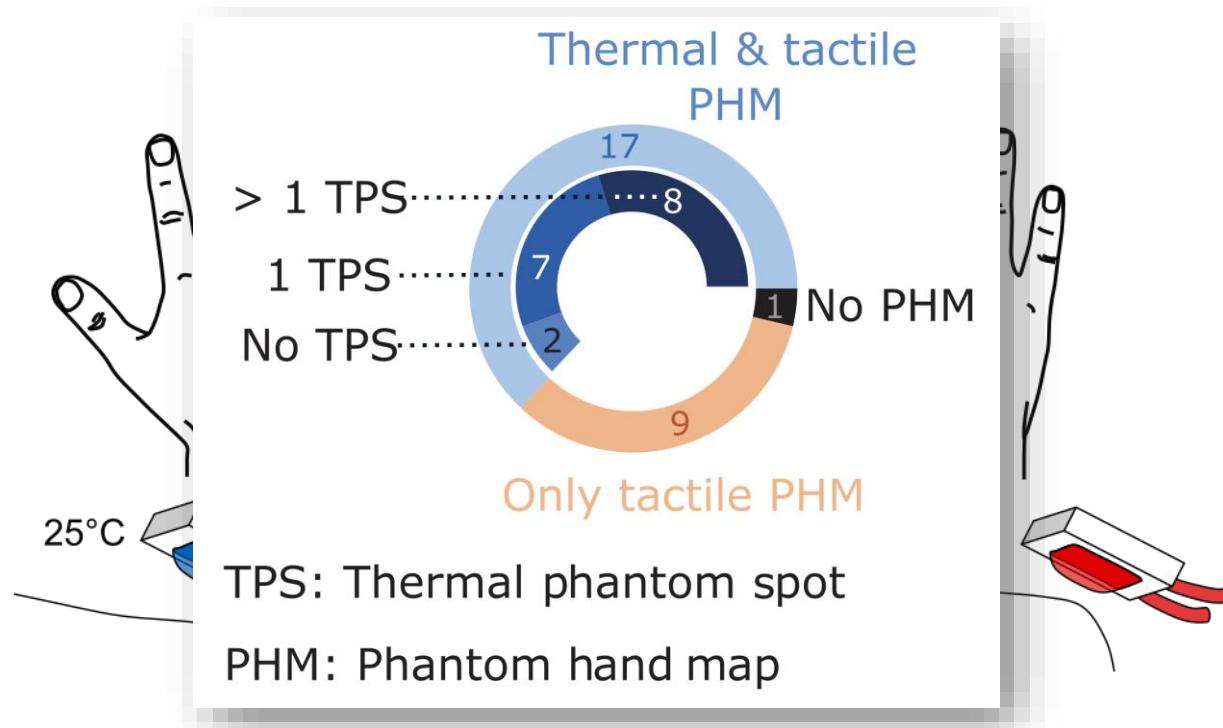
Why thermal feedback?



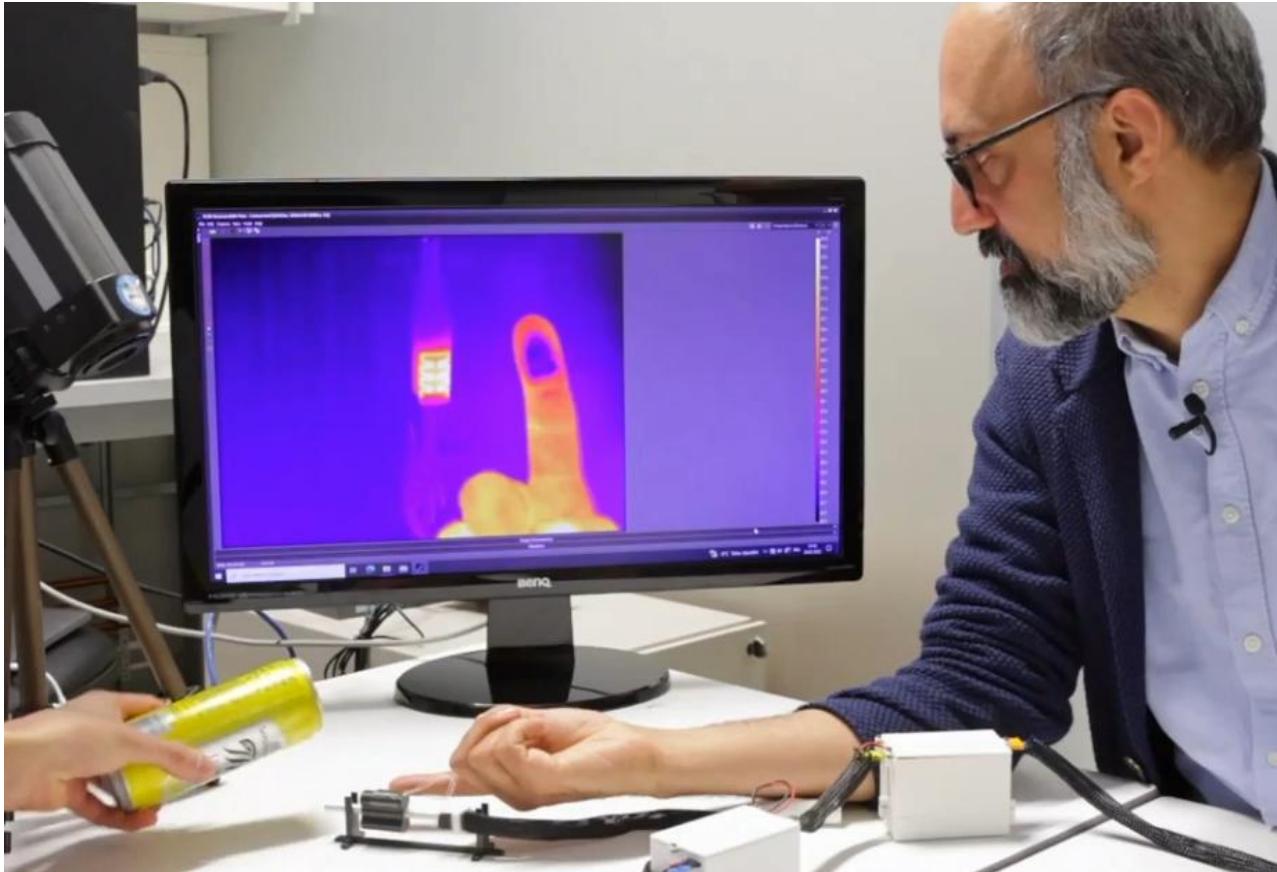
- Convey thermal information
 - Cold, warm, dangerously hot
- More complex modalities:
 - **Material** detection
 - **Moisture** detection
 - Contact with a **body**
- **Social** and **affective** aspects of touch



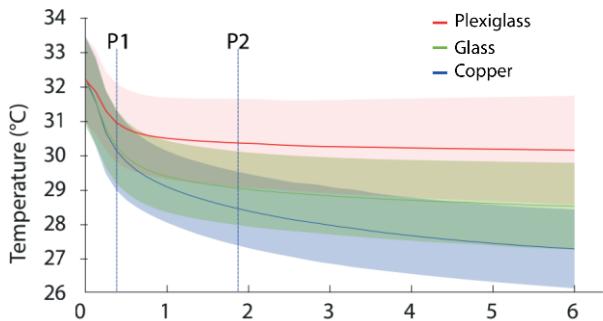
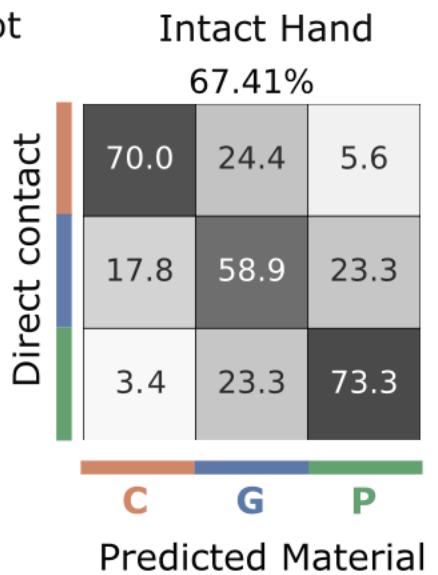
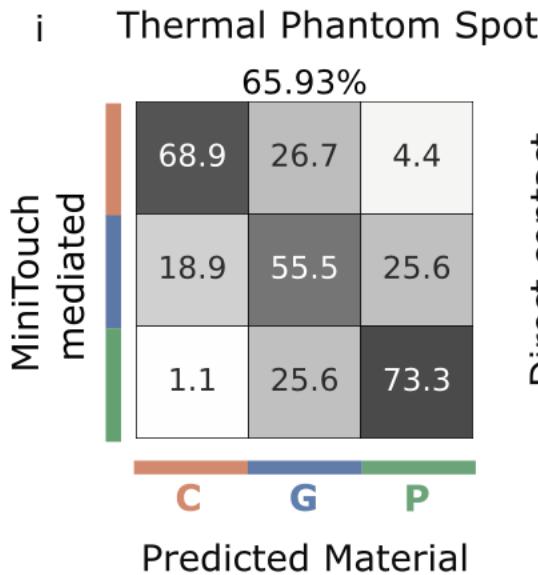
Phantom tactile and thermal maps



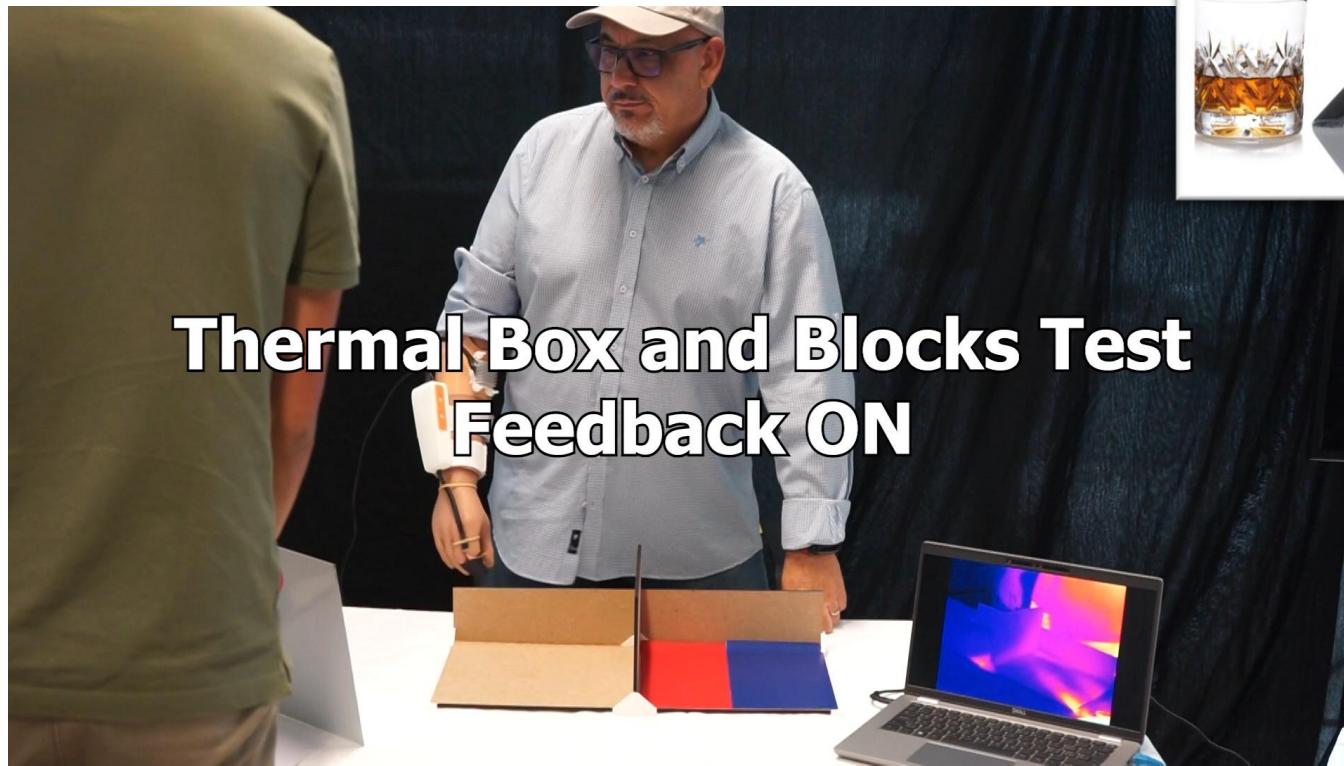
Wearable solution



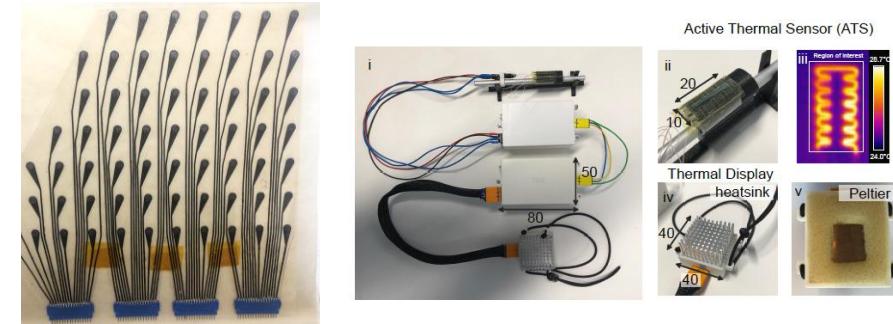
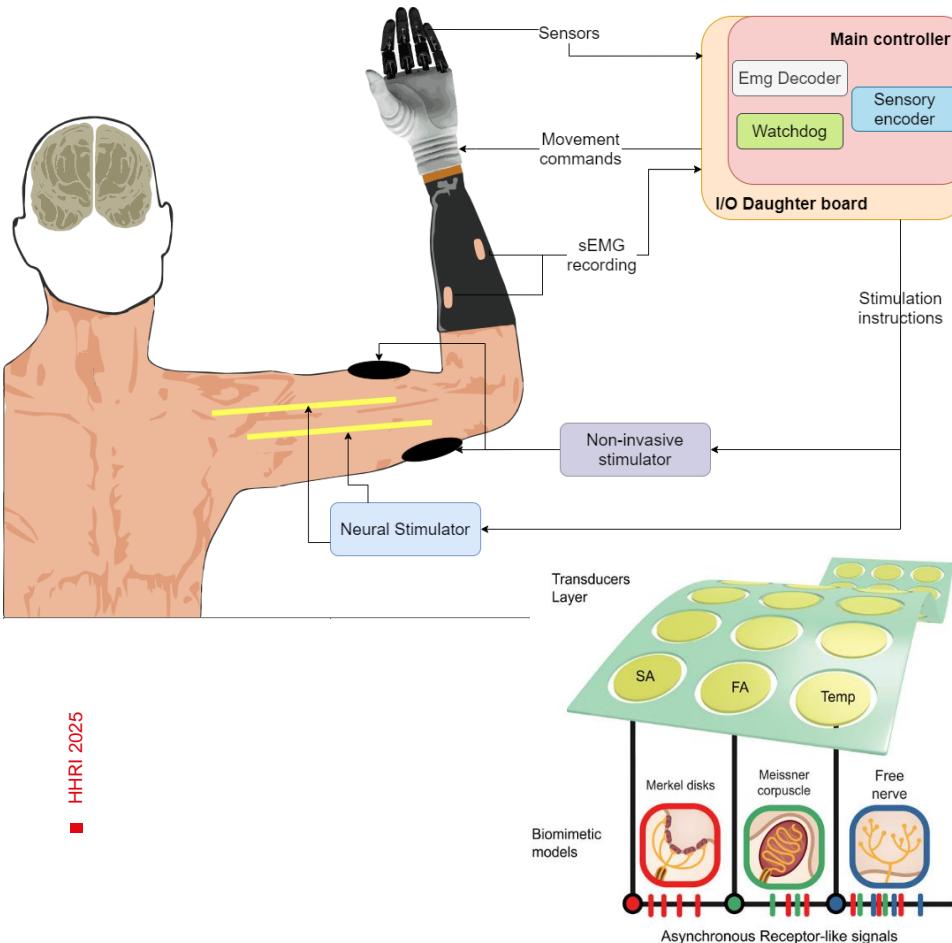
Material detection

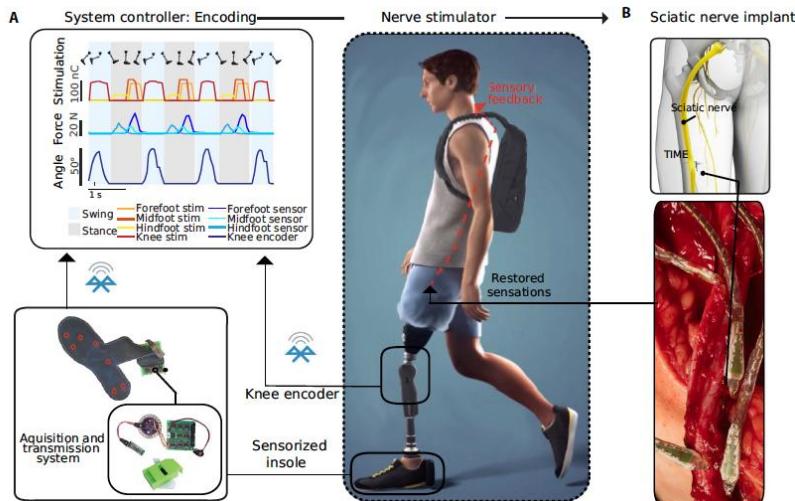


Sensory motor tasks with real-time feedback



NEXT STEP – Going chronic at home

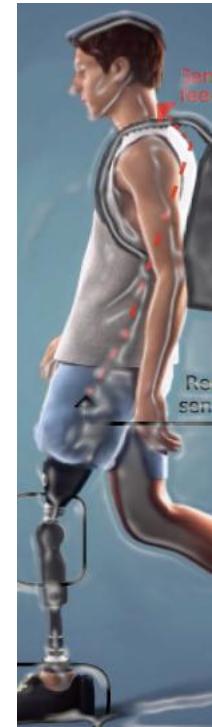
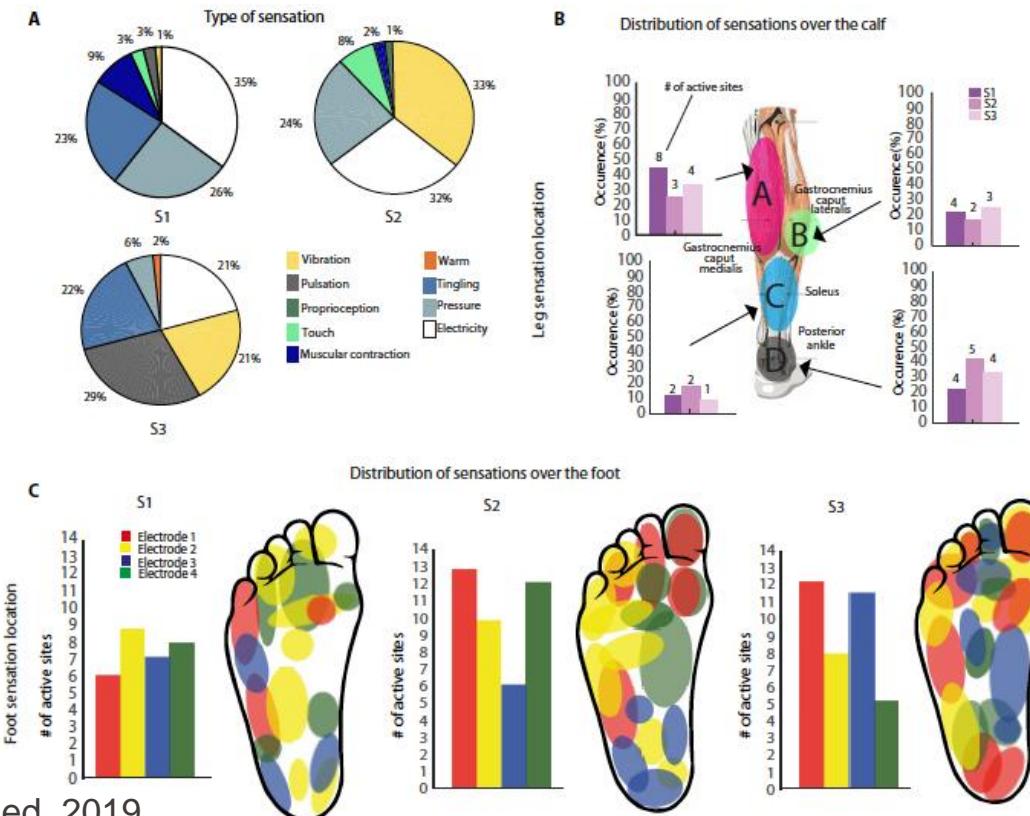




Lower limb bionics

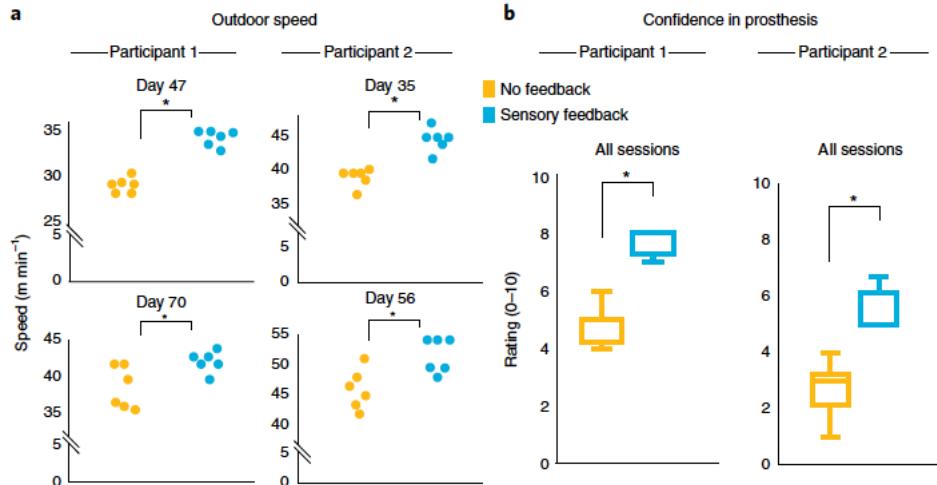
Bidirectional neurocontrolled leg prostheses

Sensory feedback



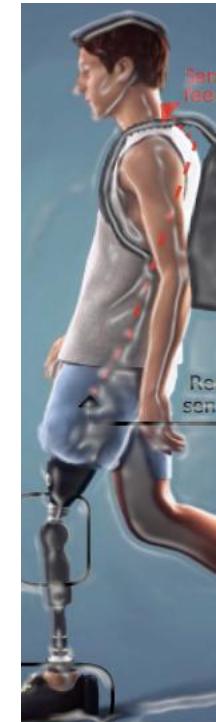
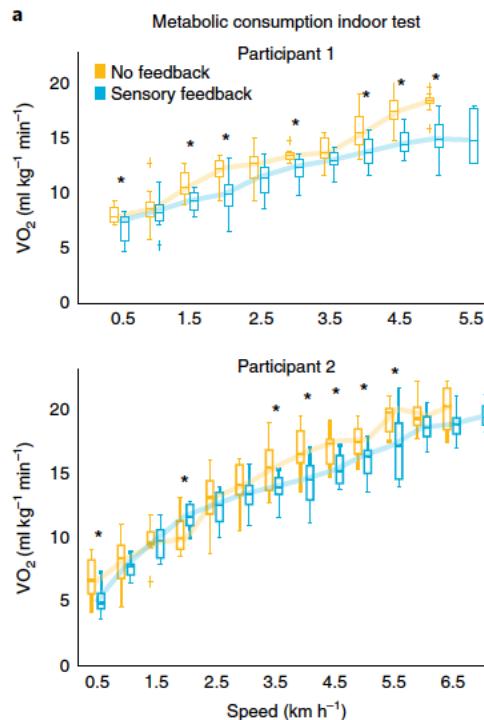
Bidirectional neurocontrolled leg pro

Sensory feedback



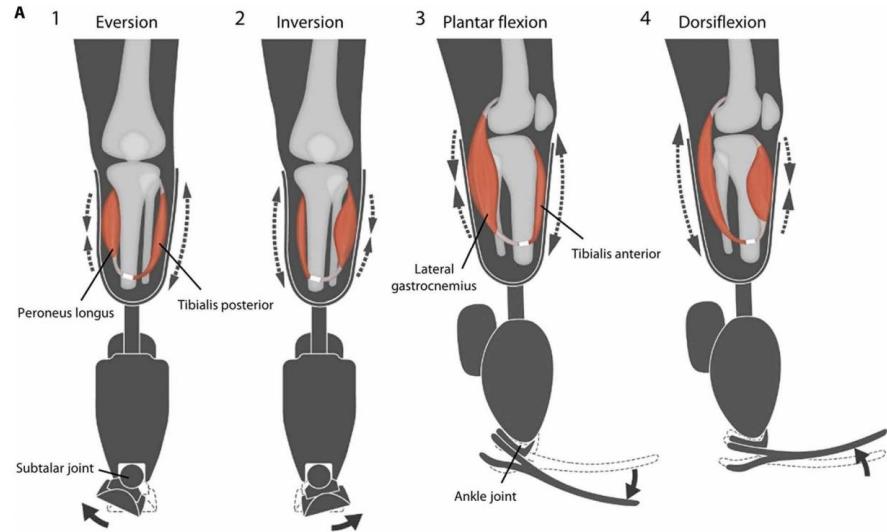
Walking speed and self-reported confidence increased while mental and physical fatigue decreased for both participants

Participants exhibited reduced phantom limb pain with neural sensory feedback.

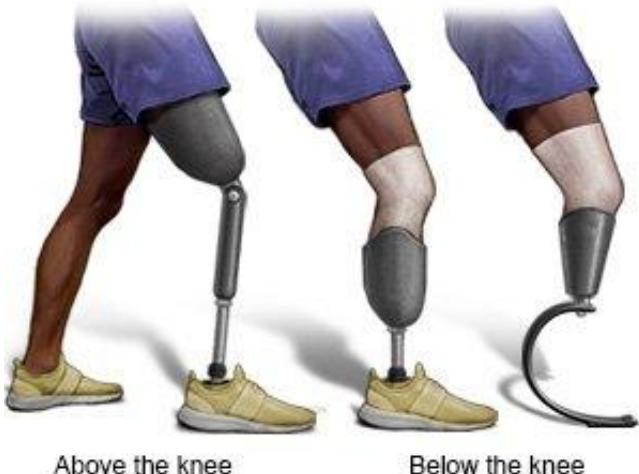


Agonist-antagonist myoneural interface

- As a methodology of improving efferent (neural pathways that relay commands from the central nervous system to a muscle or other end organ) prosthetic control and providing afferent proprioceptive sensation, we present an agonist-antagonist myoneural interface (AMI)
- An AMI is made up of an agonist and an antagonist muscle tendon connected mechanically in series: When the agonist contracts, the antagonist is stretched and vice versa
- The purpose of an AMI is to control and interpret proprioceptive feedback from a bionic joint.



Bidirectional neurocontrolled leg prostheses



Above the knee

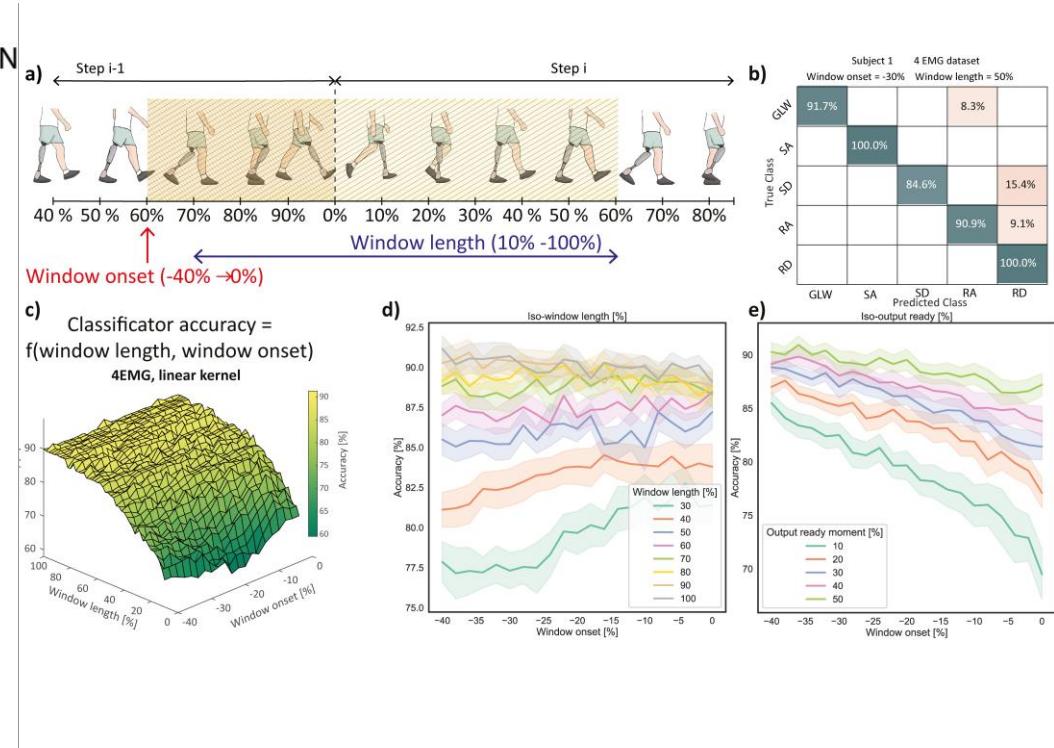
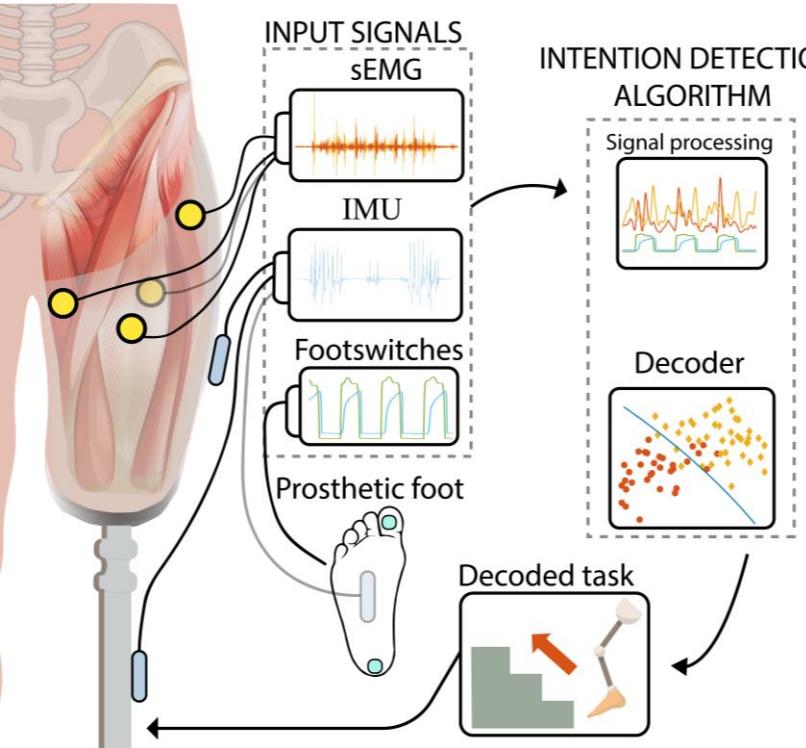
Below the knee

Leg Prosthetics

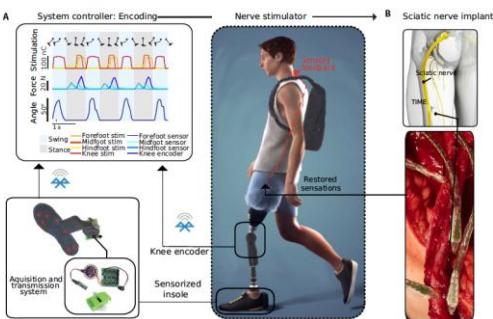


 BIONIC ENGINEERING LAB
THE UNIVERSITY OF UTAH

Bidirectional neurocontrolled leg prostheses



Enhancing functional abilities and cognitive integration of the lower limb prosthesis



Movie S2:

Neuroprosthesis working principle and active tasks

Caution: Investigational device