



Ultrasound as a Neural Interface

Summer School: Hybrid Neural Interfaces, 10th - July 2024

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1. Motivation
2. What is Ultrasound?
3. Application 1. Motor Unit Decomposition via Ultrafast Ultrasound
4. Break Time
5. Translational challenges: Laboratory → Real-World
6. Application 2. Interfacing with Wearable A-mode Ultrasound
7. Questions and Answers

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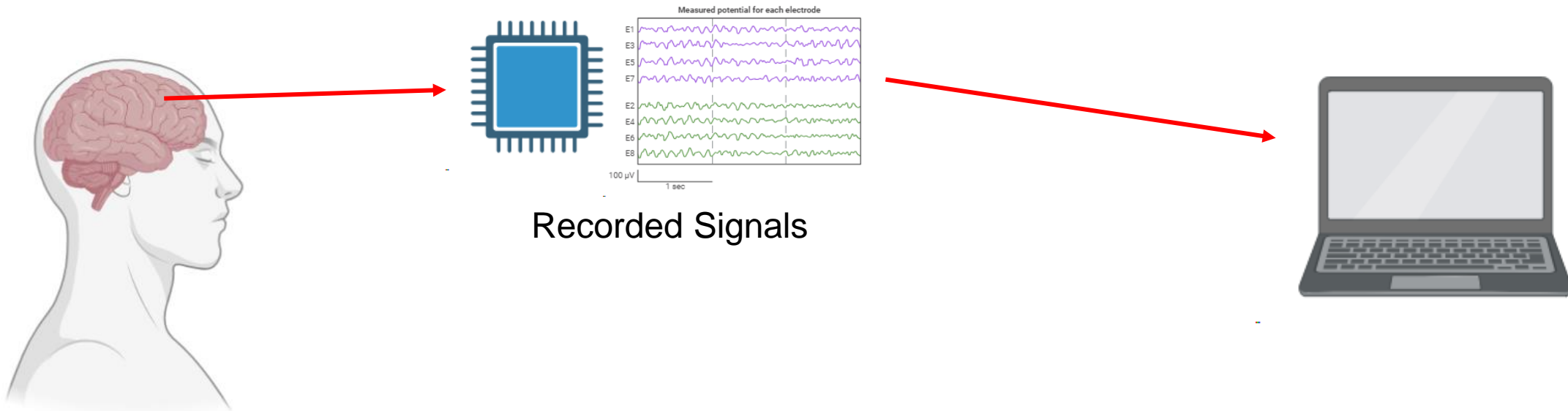
Motivation

- Interfacing with the Brain is **Very Challenging**



Motivation

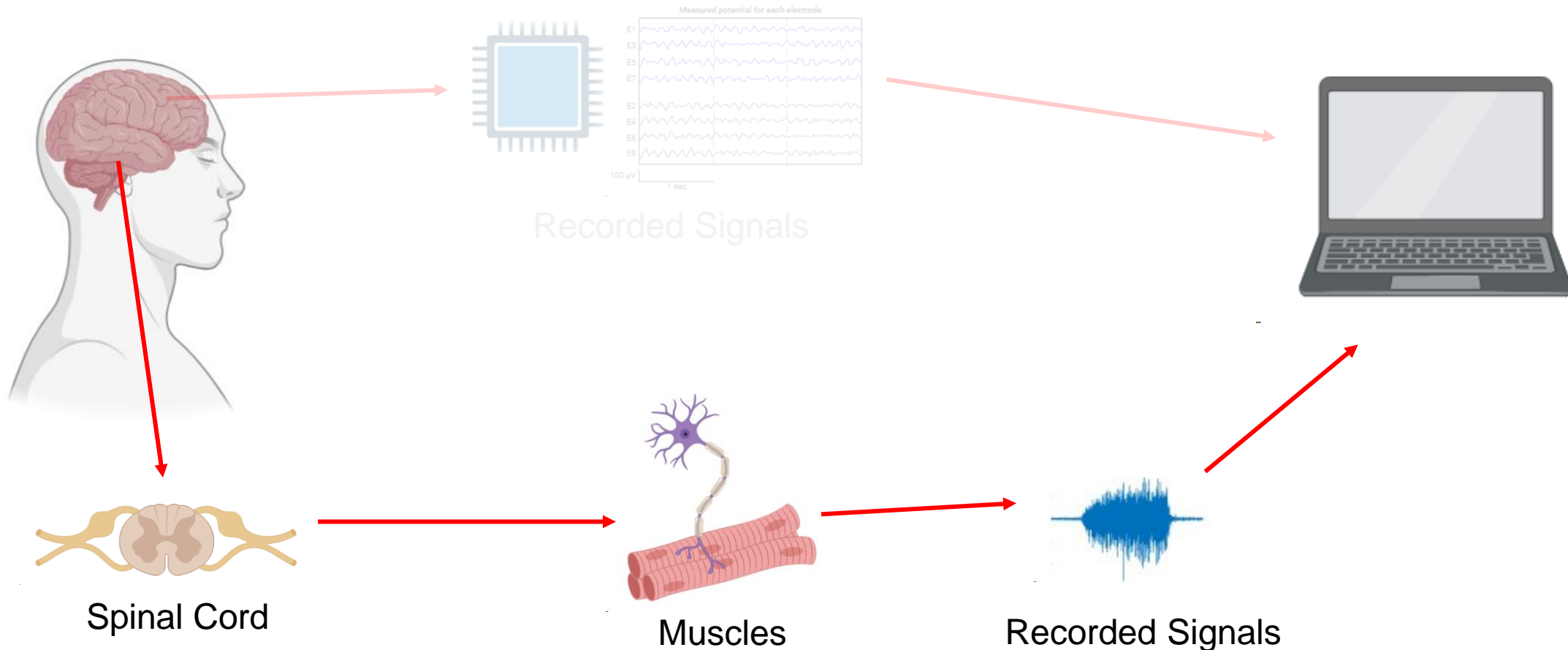
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Recorded Signals

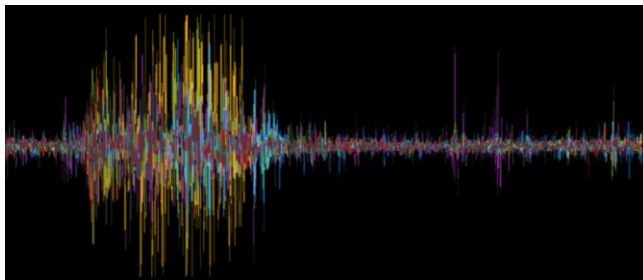
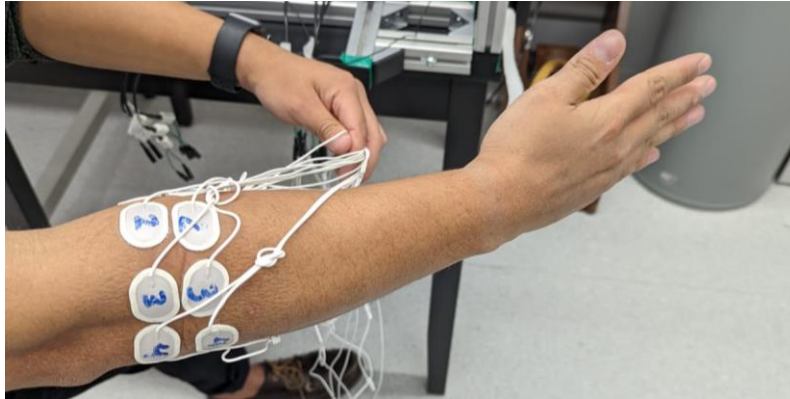
Motivation

- Interfacing with the Brain is **Via Muscles** may be **Less Challenging**

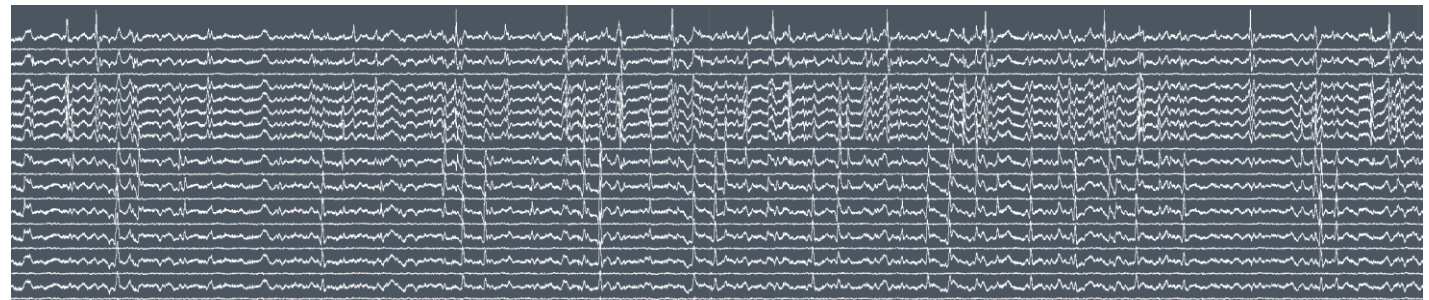
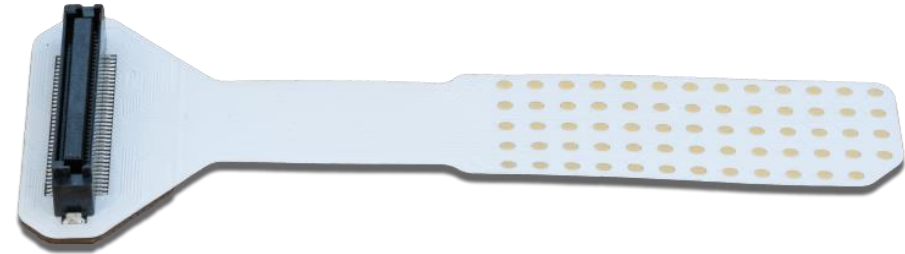


How to do it them?

Surface Electromyography (sEMG)

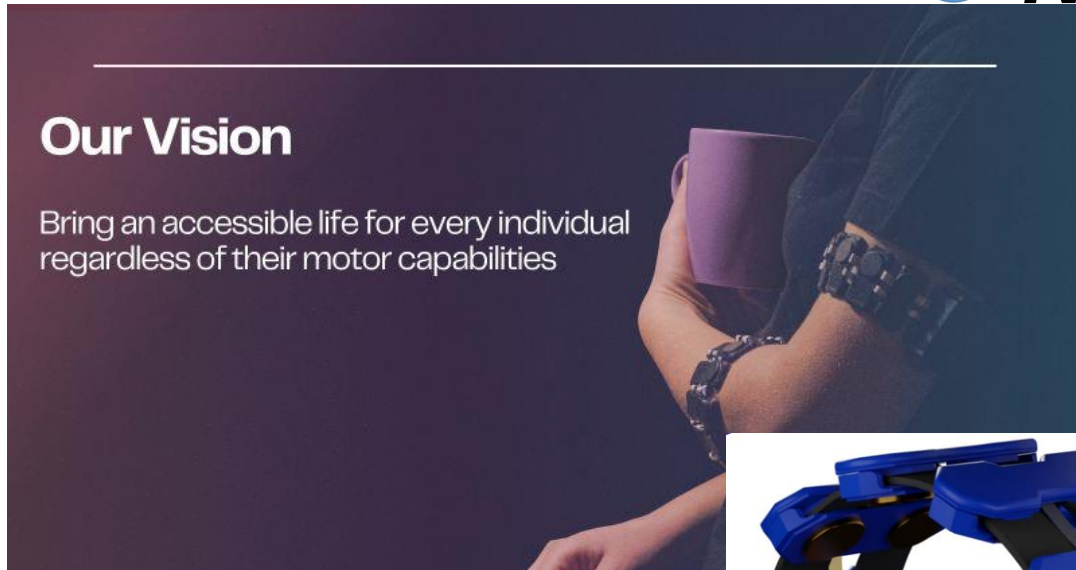
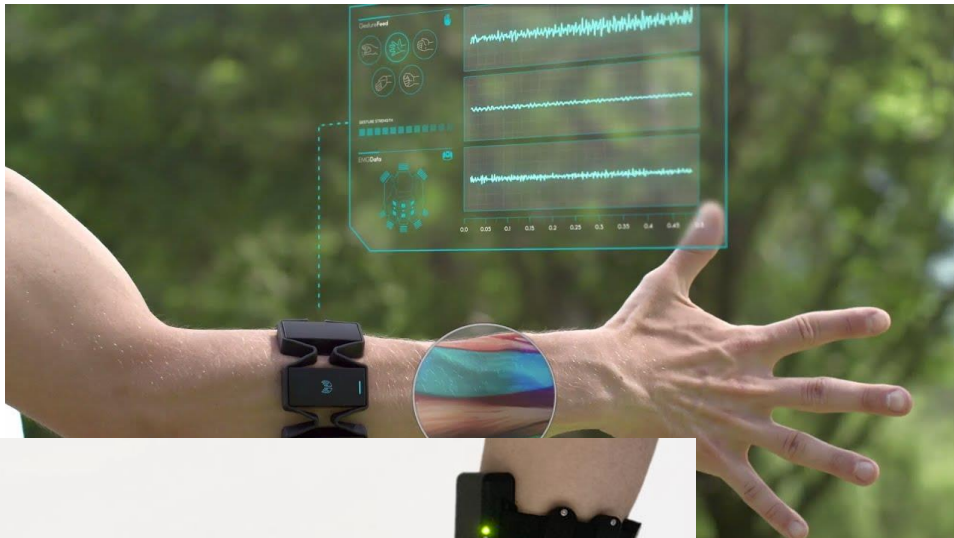


High Density Surface Electromyography (HDsEMG)



You would not be the first one to think of that

[1]



[2]



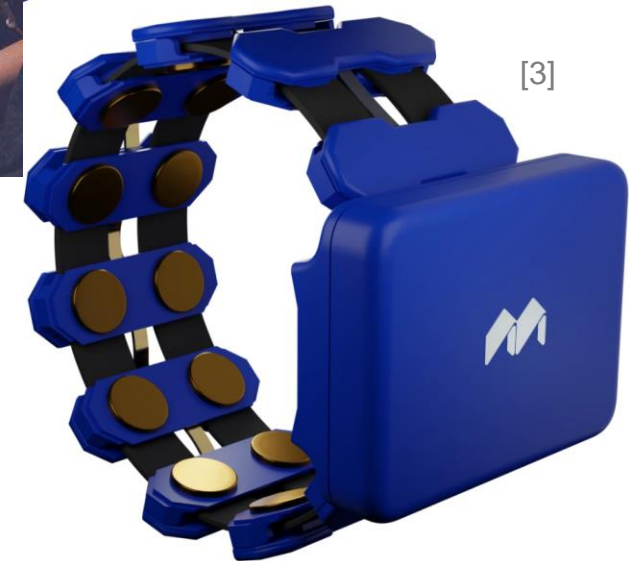
[4]



[5]



[6]



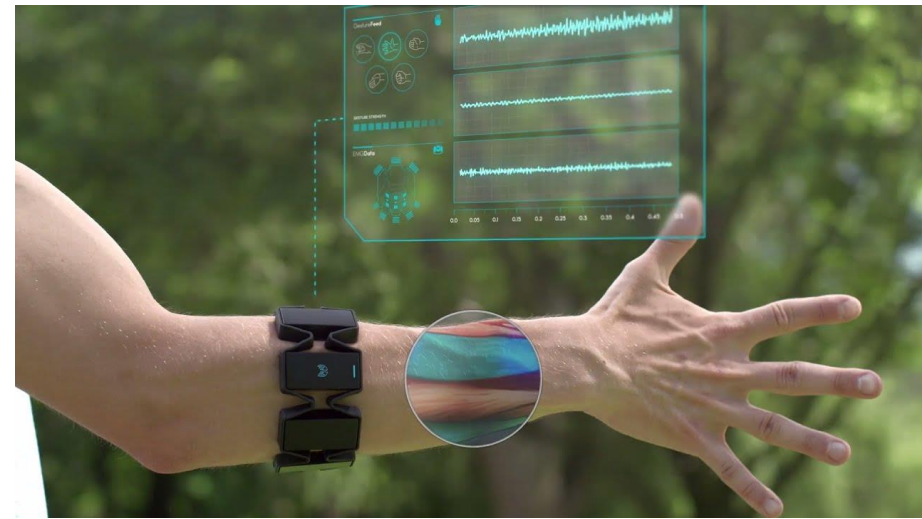
[3]

[1] Myo Armband, Thalmic Labs [4] MindRove
[2] Neubond [5] gForcePro, OYMotion
[3] AXON, Mindfeed [6] Meta Reality Labs

You would not be the first one to think of that



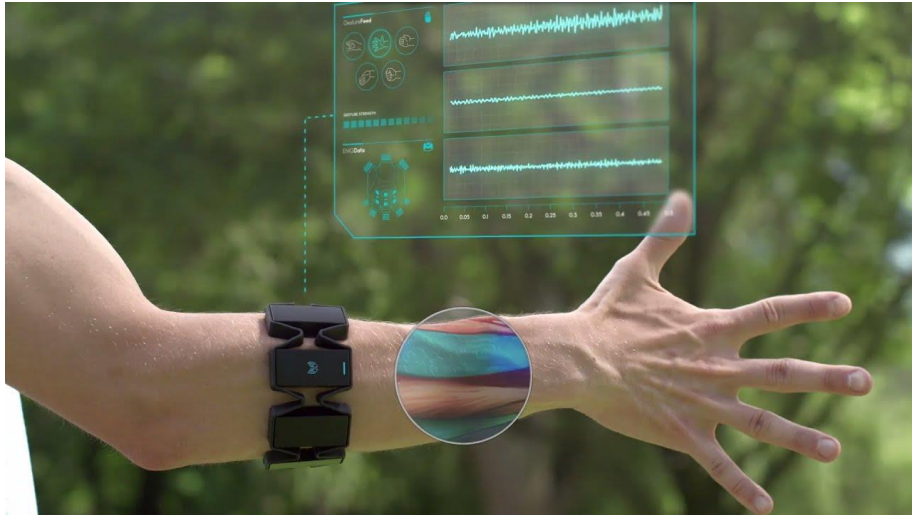
[1]



You would not be the first one to think of that



[1]



TECH

The Gadget That Will Make You Feel Like Being A Jedi Is Just Months Away

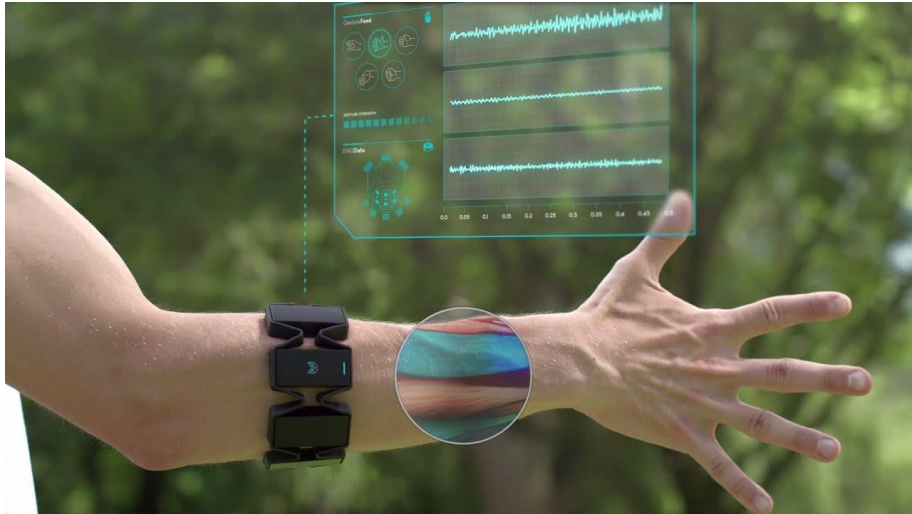
Dave Smith Jun 24, 2014, 2:51 PM BST

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[1]



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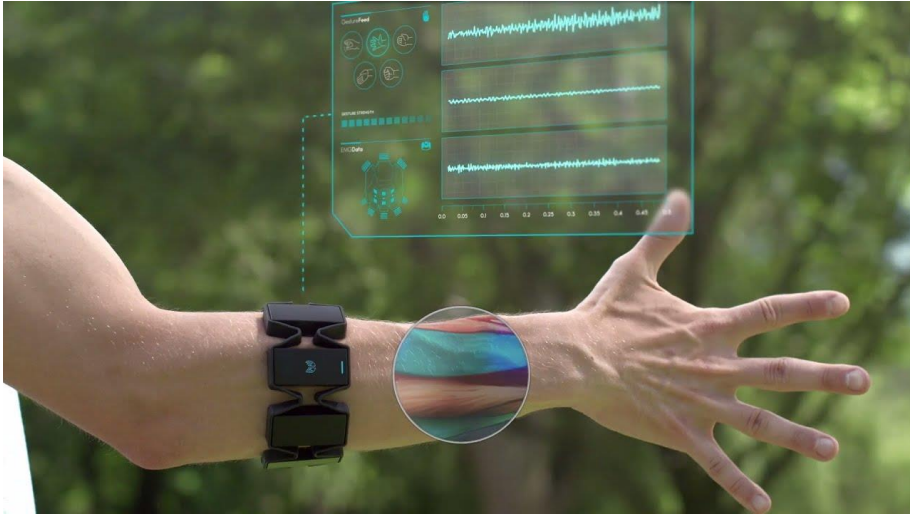
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Interfacing with the Brain is **Via Muscles** may be **Less Challenging**

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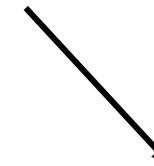
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The Gadget That Will Make You Feel Like Being A Jedi Is Just Months Away

Dave Smith Jun 24, 2014, 2:51 PM BST

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Interfacing with the Brain is **Via Muscles** may be **Less Challenging**



But it is still **Very Challenging**

Could we try something else?

sEMG is an **amazing** technology but it has
inherent limitations

"EMG cross talk, muscle coactivation, and limited sampling depth compromise the ability to estimate dexterous motor intent."

- E. Scheme et al.

"While sEMG is the standard approach in commercial active prostheses, it presents inherent limitations, such as high sensitivity, to electrode location and electrode skin contact, as well as a relatively small detection depth"

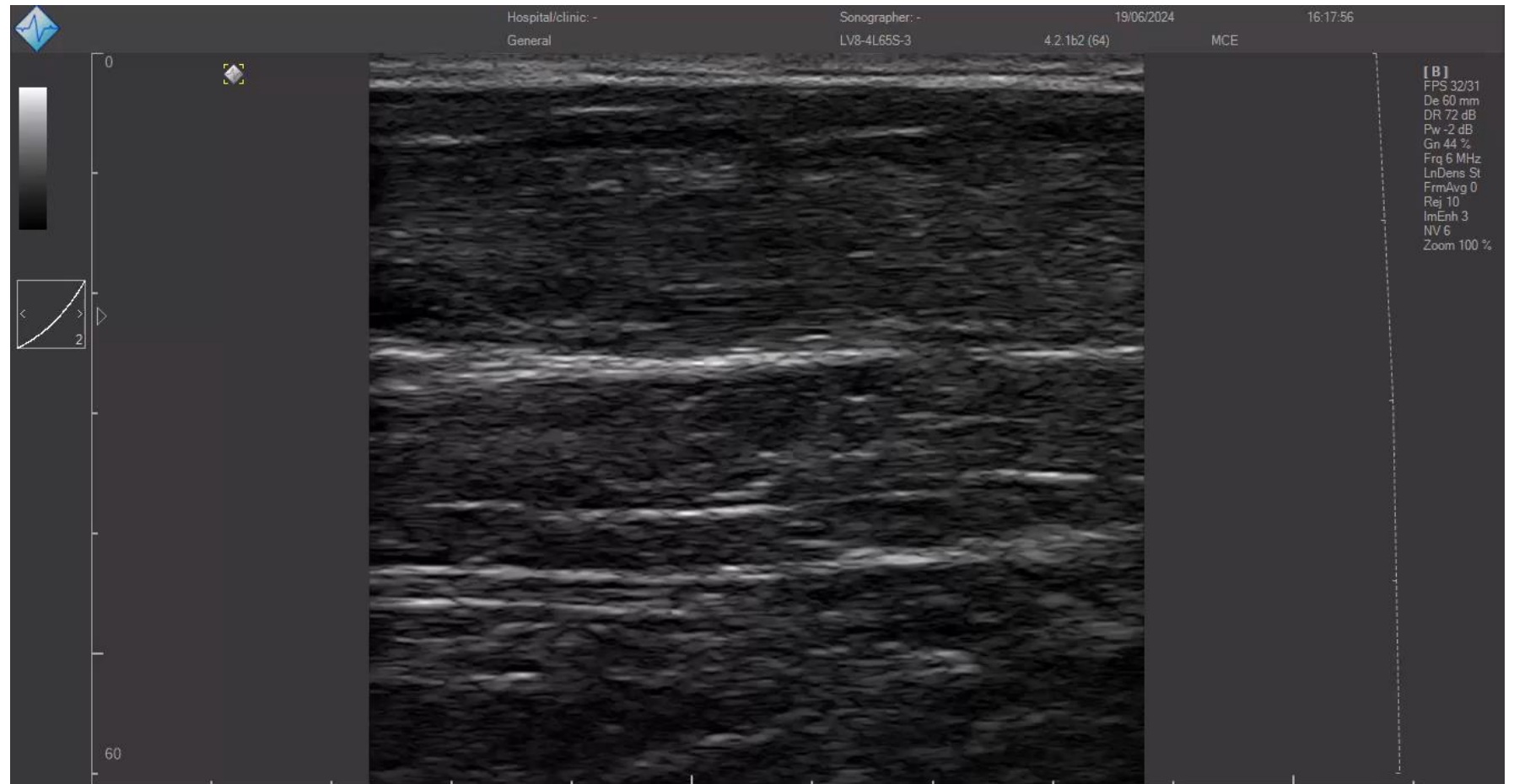
- X. Yang. et al.

"The recorded EMG signals always contaminated by several types of background noises due to the type of electronic equipment, movement of electrodes and cables, movement of the subject during signal recording and other physiological factors which make it very difficult for classifying."

- A. Sultana et al.

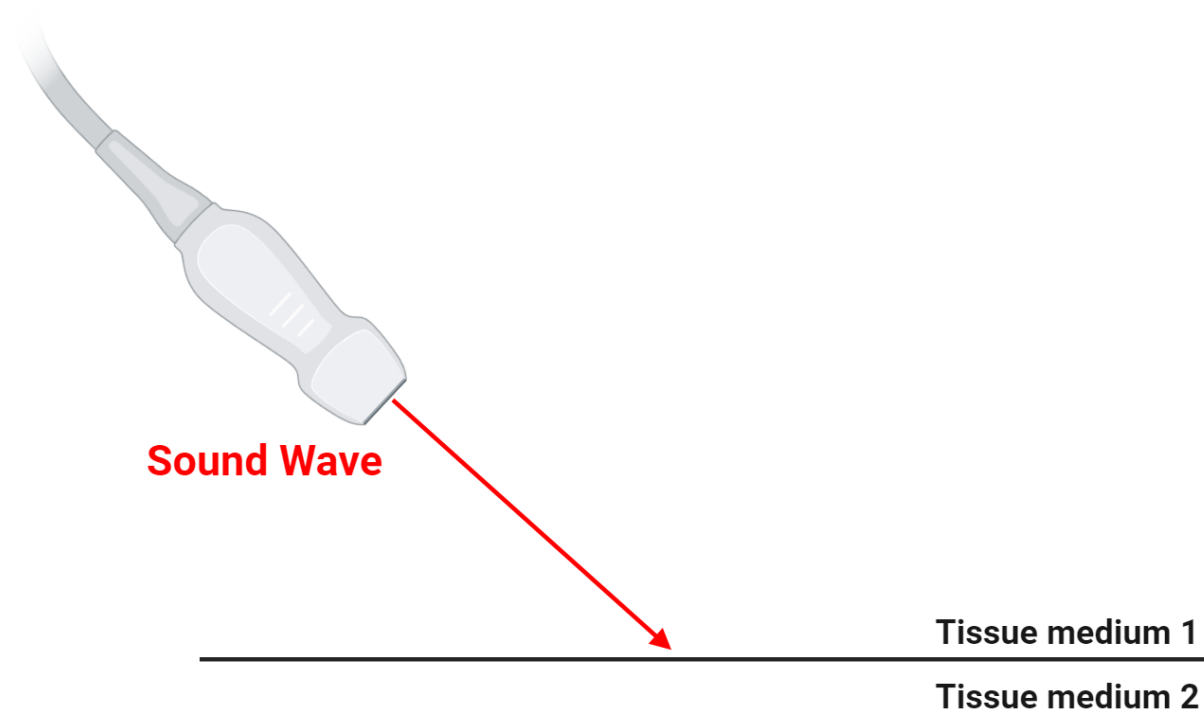
Could we use other signal modalities?

- **Ultrasound** can be used to image the Musculoskeletal system

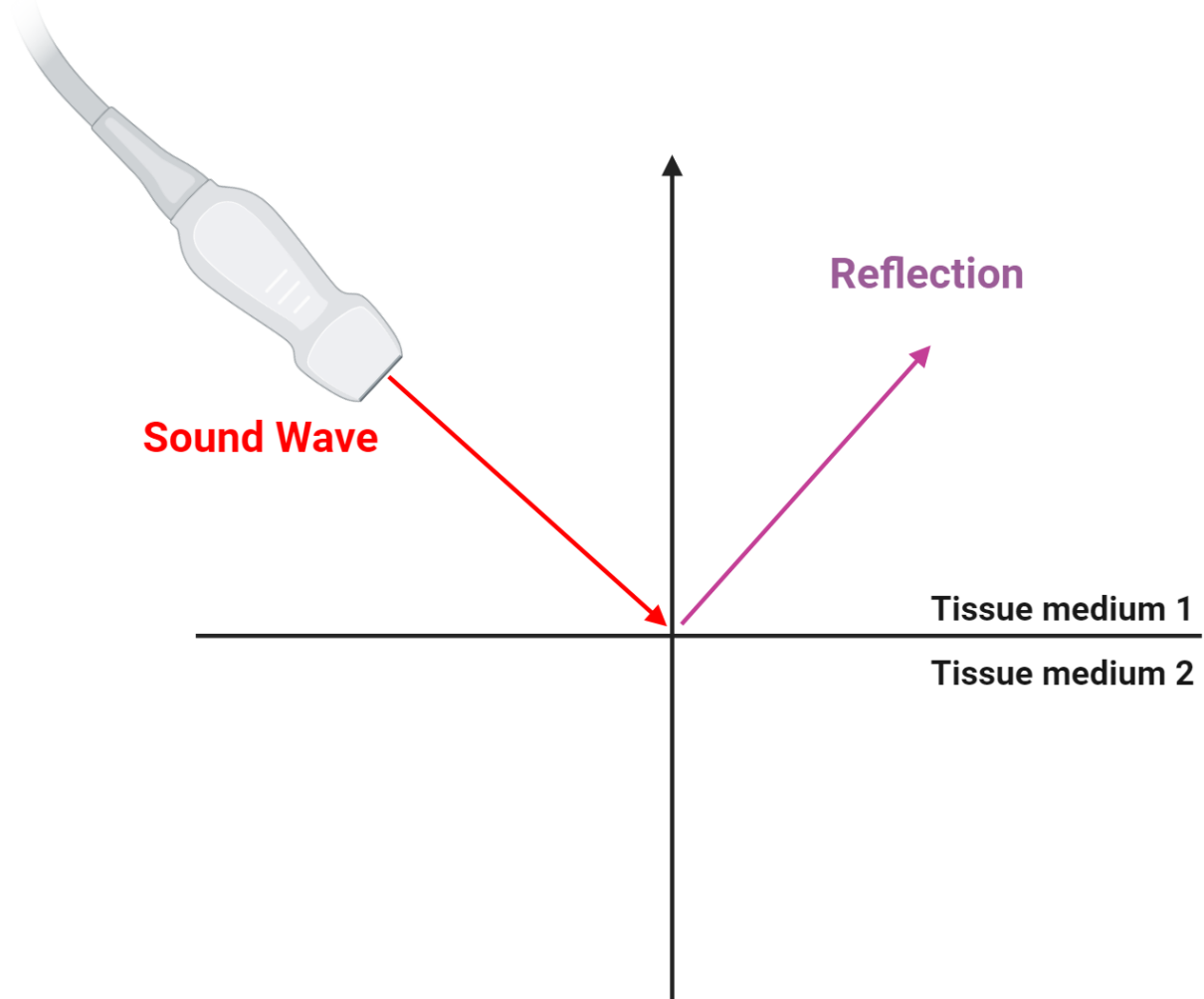


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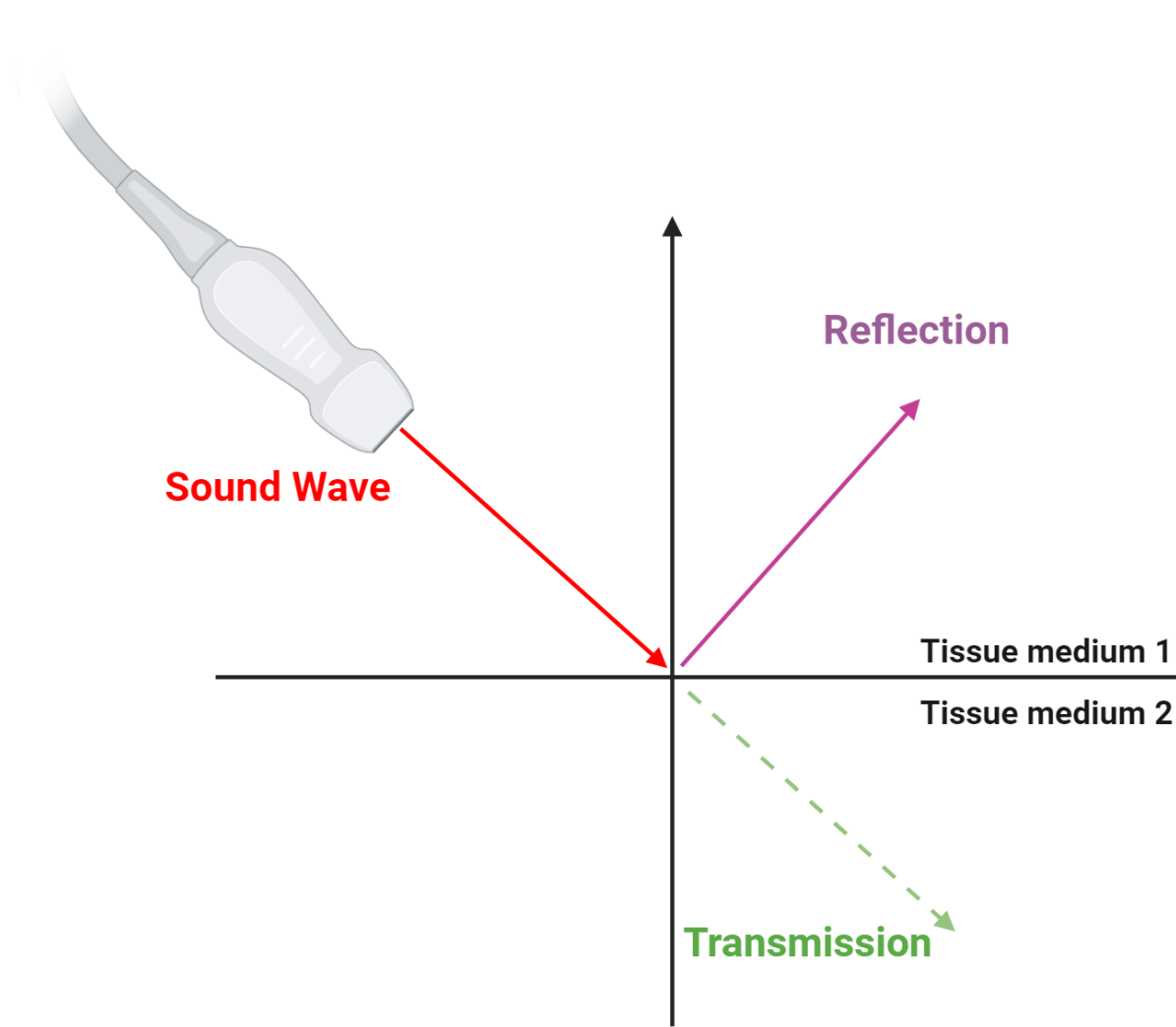
Basic Principles



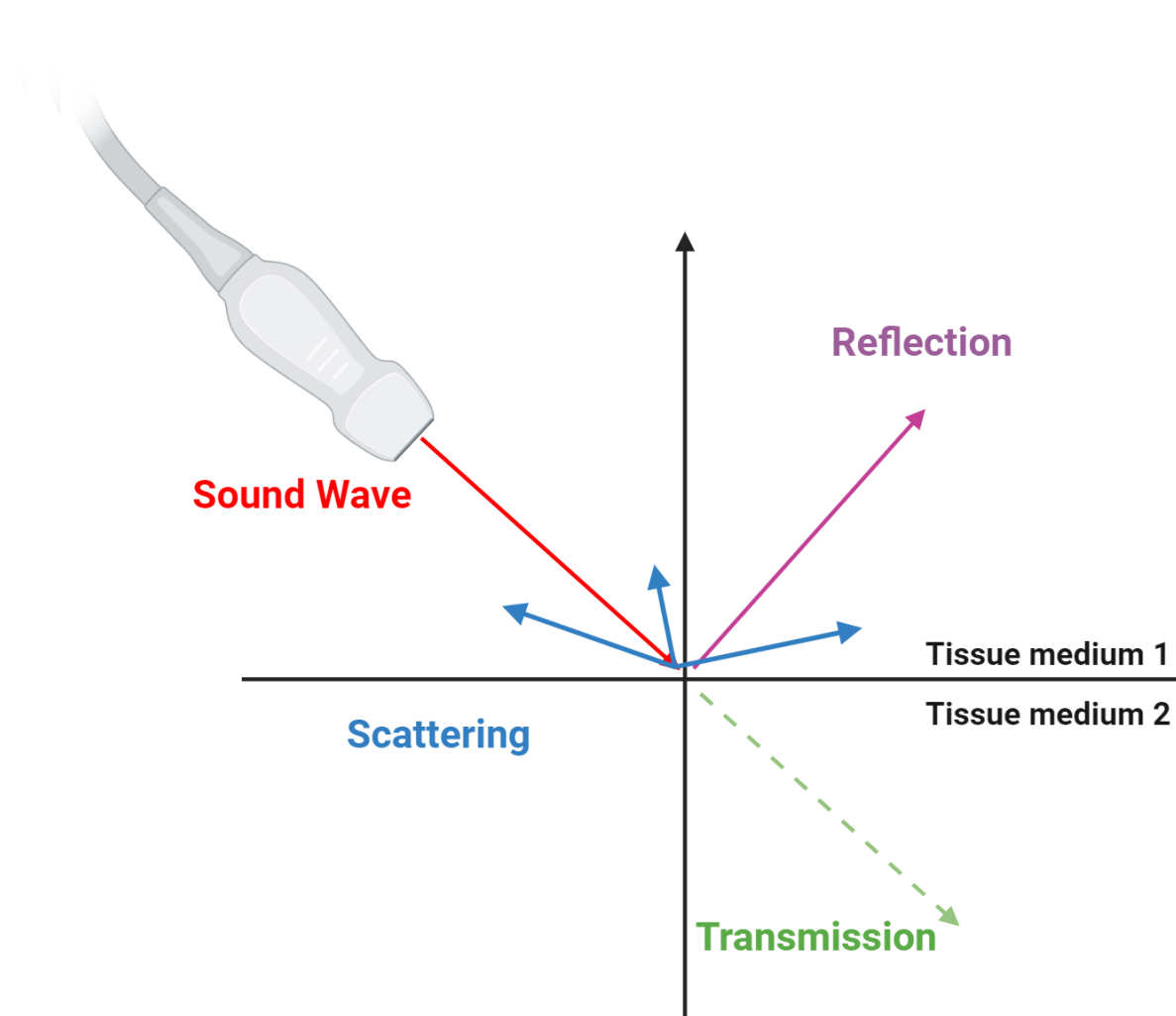
Basic Principles



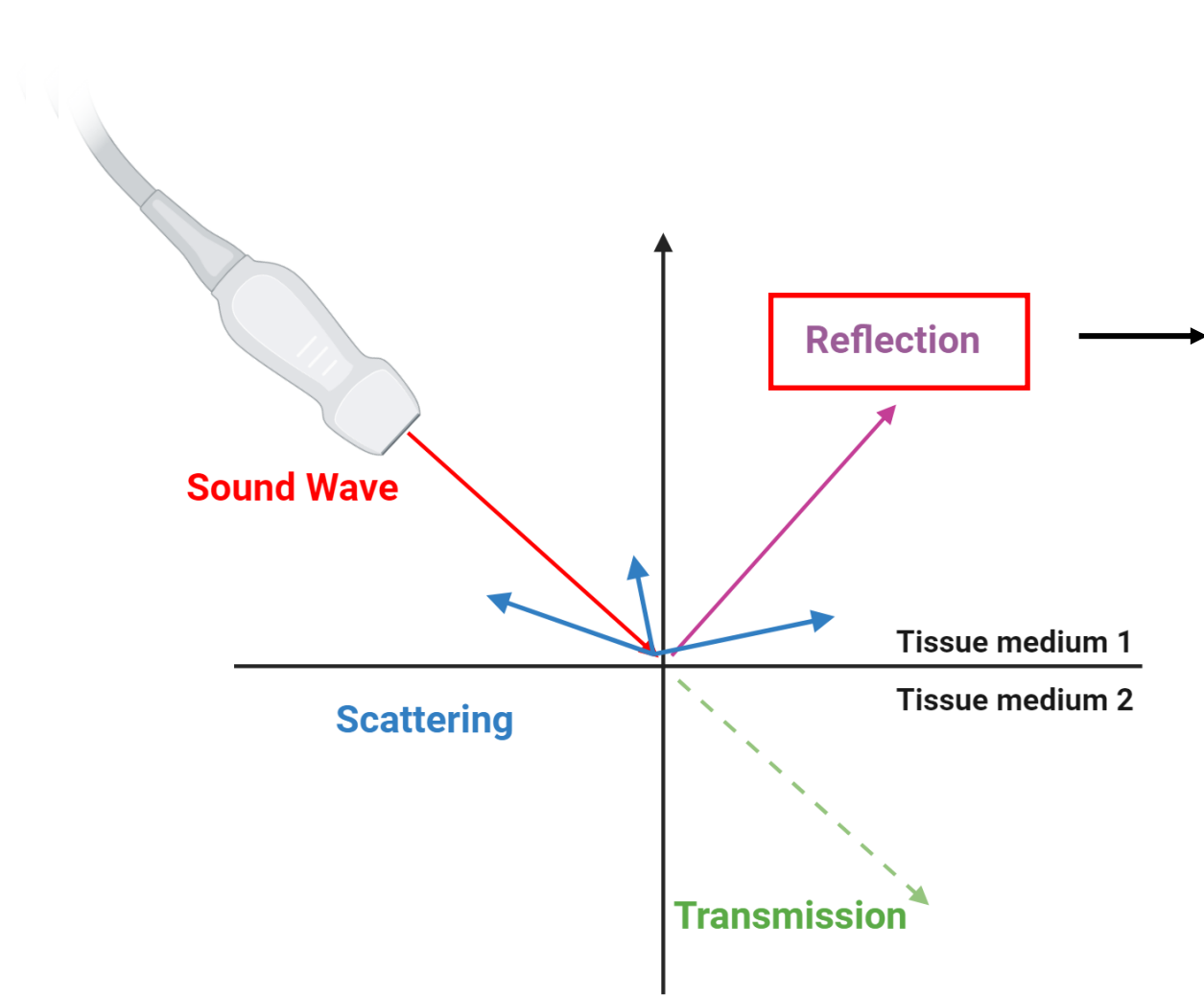
Basic Principles



Basic Principles



Basic Principles



Medical Ultrasound is mostly interested in reflections

Basic Principles



- Unlike EMG, Ultrasound is **not** biologically generated

Basic Principles

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Ultrasound acquisition has **2 Phases**

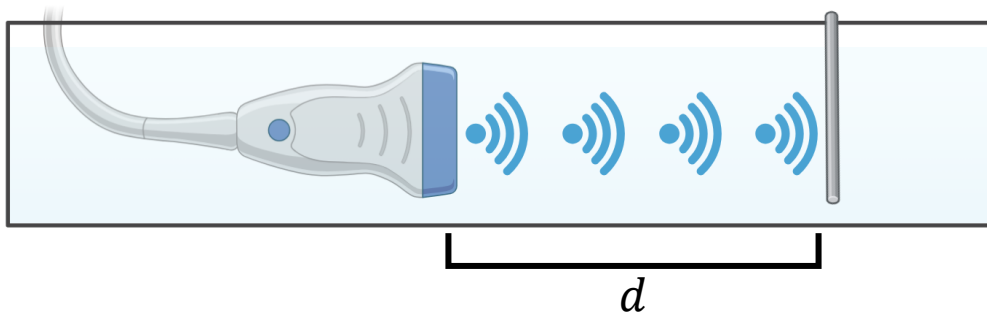
Basic Principles

- Unlike EMG, Ultrasound is **not** biologically generated

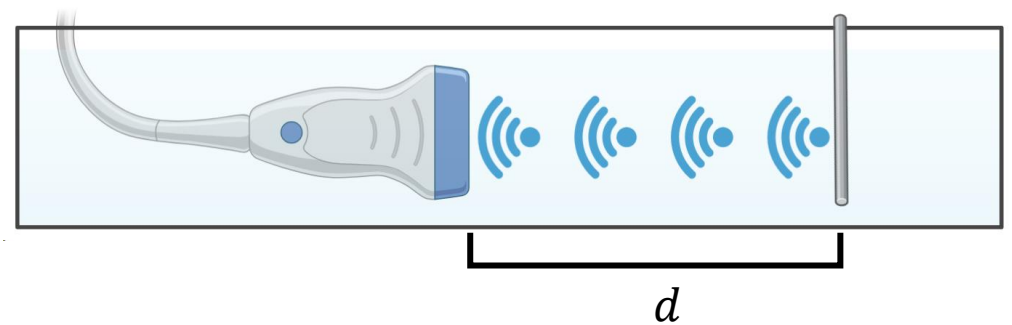


Ultrasound acquisition has **2 Phases**

Transmit

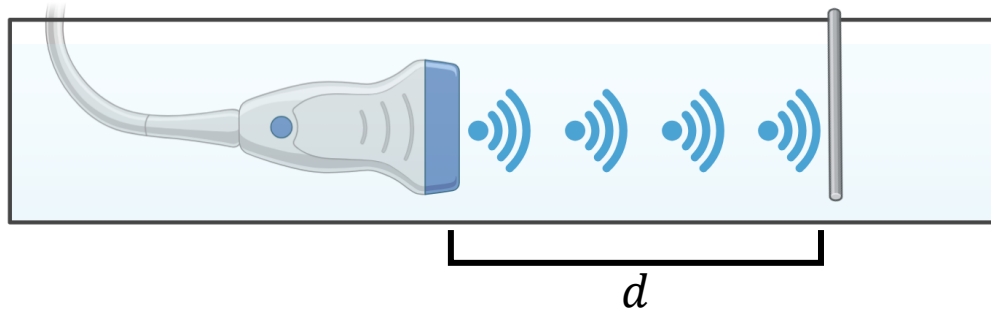


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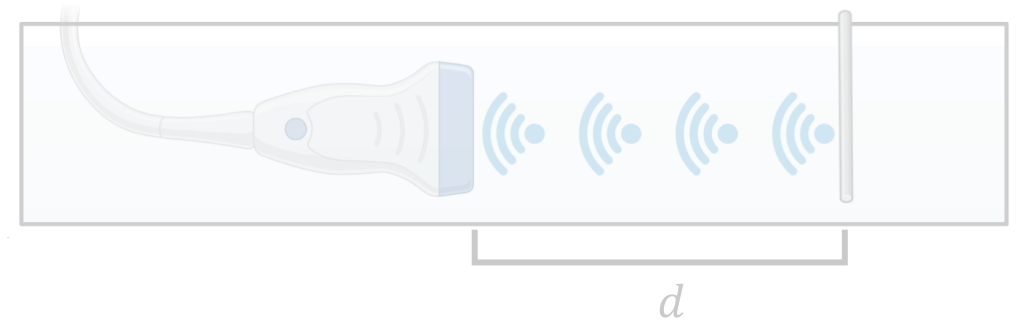


Basic Principles

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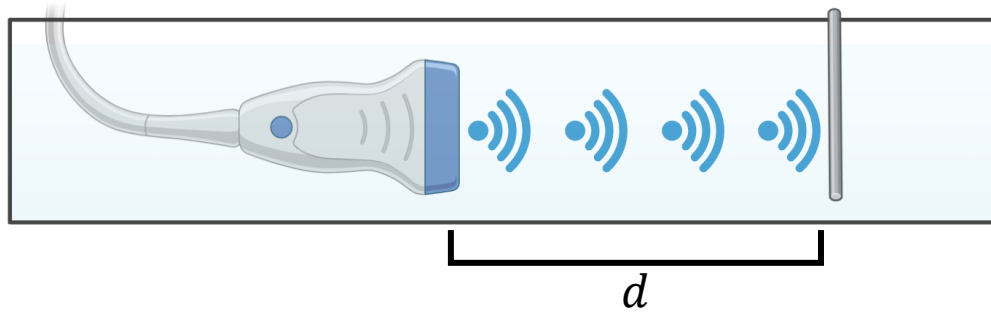


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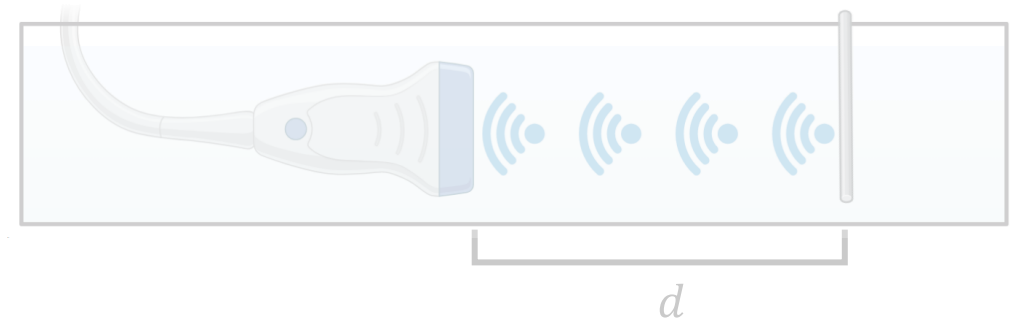


Basic Principles

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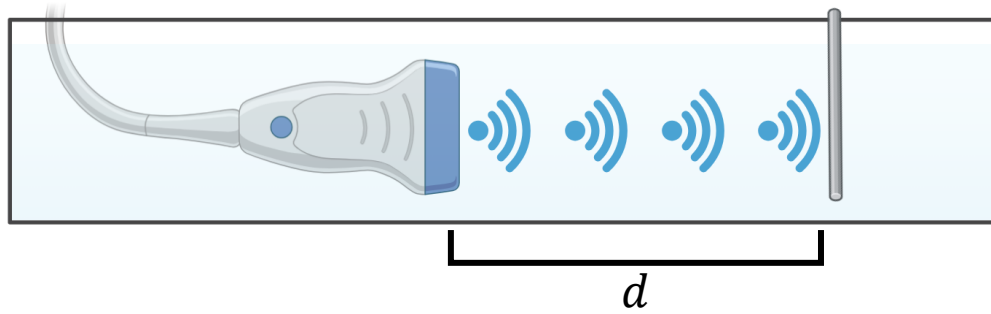


$> 1 \mu s$



Basic Principles

Transmit



Receive



$> 1 \mu s$

Various parameters can be defined:

- Centre Frequency
- Bandwidth
- Voltage
-

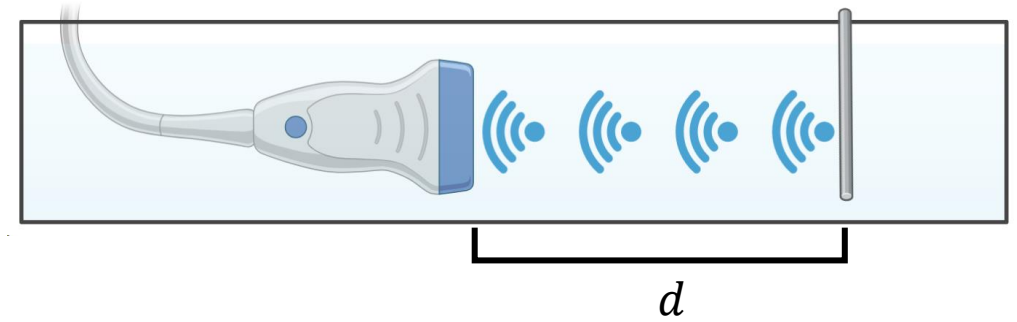


Basic Principles

Transmit



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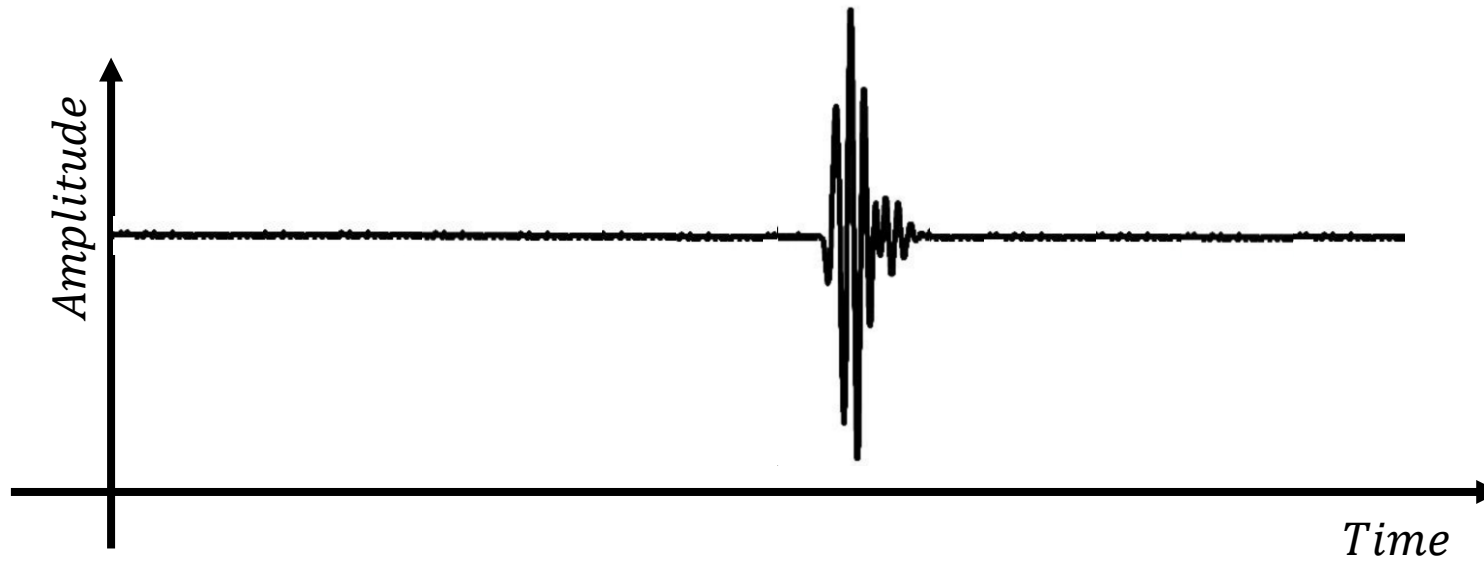
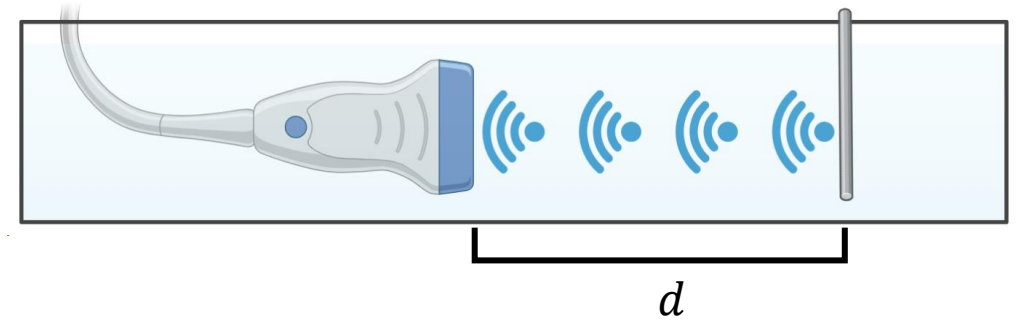


Basic Principles

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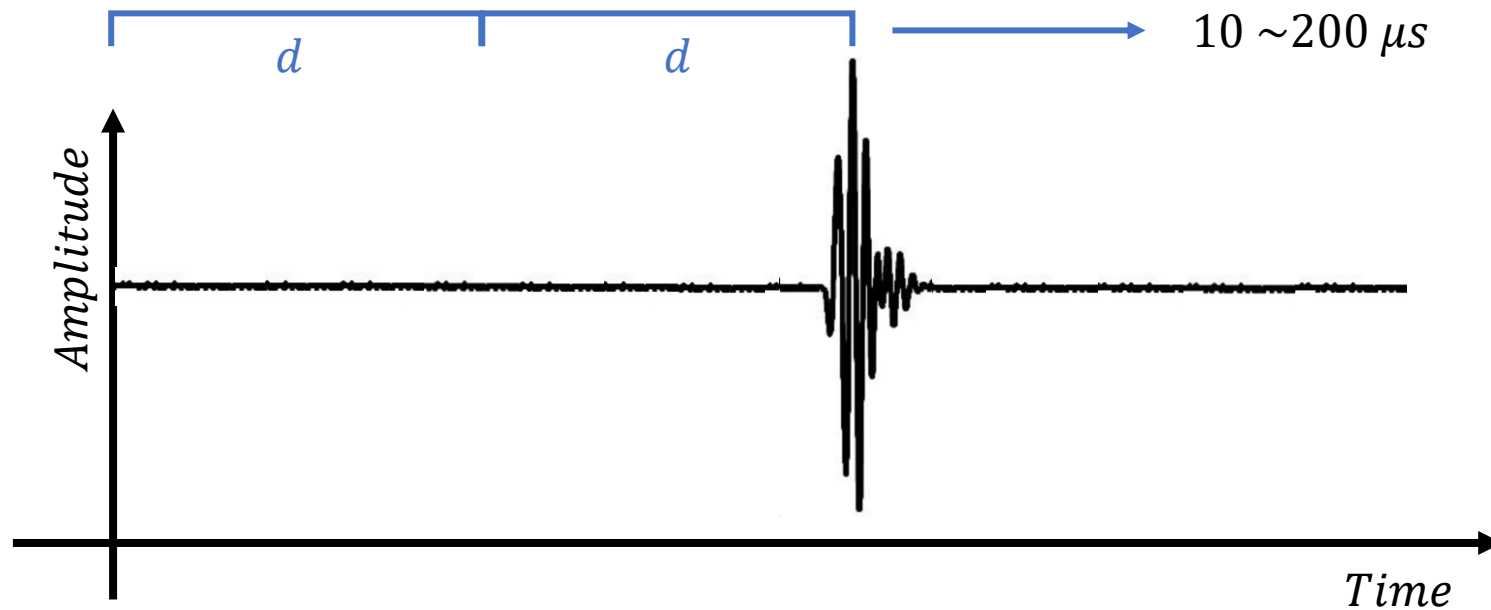
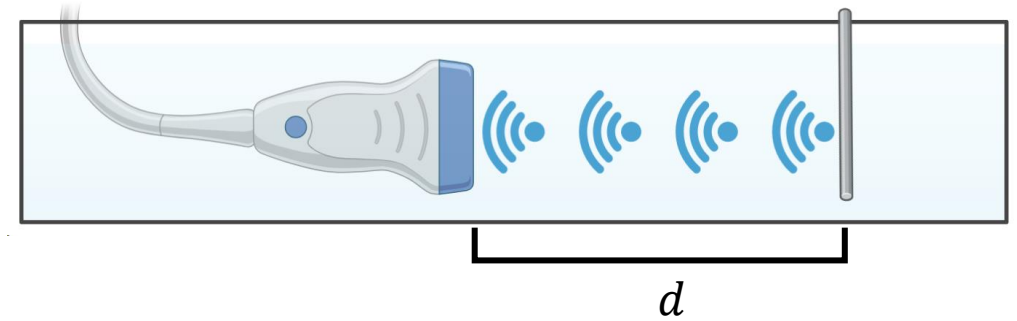


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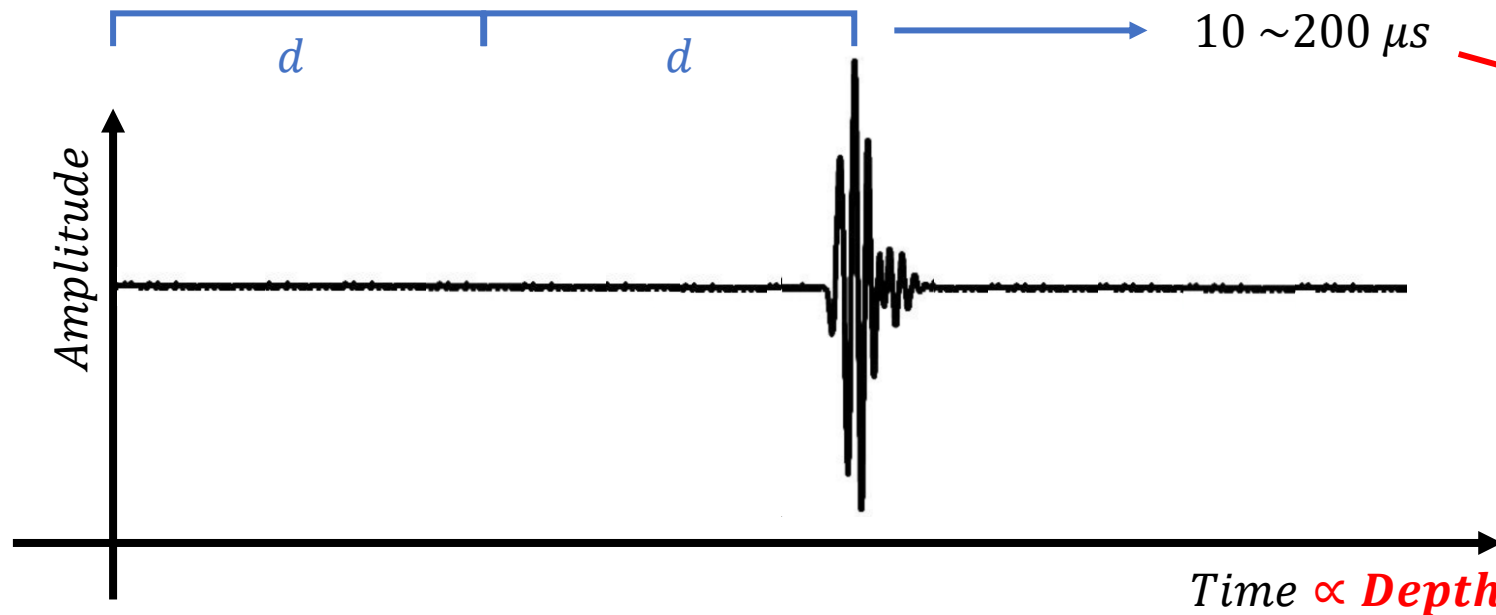
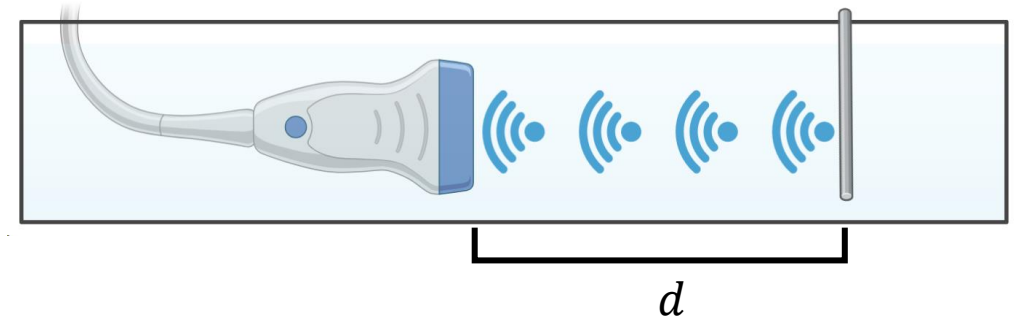


Basic Principles

Transmit



Receive



10 ~ 200 μs

Time (t) can be converted to penetration depth

$$Depth = \frac{t * c_{soft\ tissue}}{2}$$

$$c_{soft\ tissue} = 1450\ m/s$$

Therefore,

$$Depth \approx 2cm \sim 15cm$$

Ultrasound Modalities

- Ultrasound principles can be used to in a number of different **imaging modalities**:
 - A-mode
 - M-mode
 - B-mode
 - Colour Doppler, Power Doppler, Spectral Doppler
 - Transient elastography
 - Shear-wave elastography
 - Strain Imaging
 - Microbubble Ultrasound Super-resolution
 - Ultrasound Tomography
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Ultrasound Modalities



[1]

A-mode



B-mode



M-mode



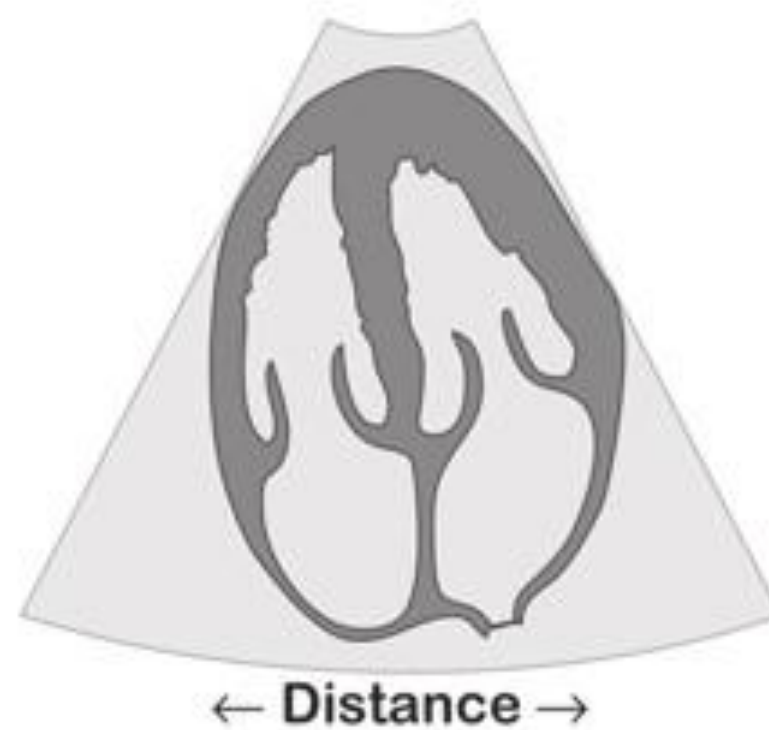
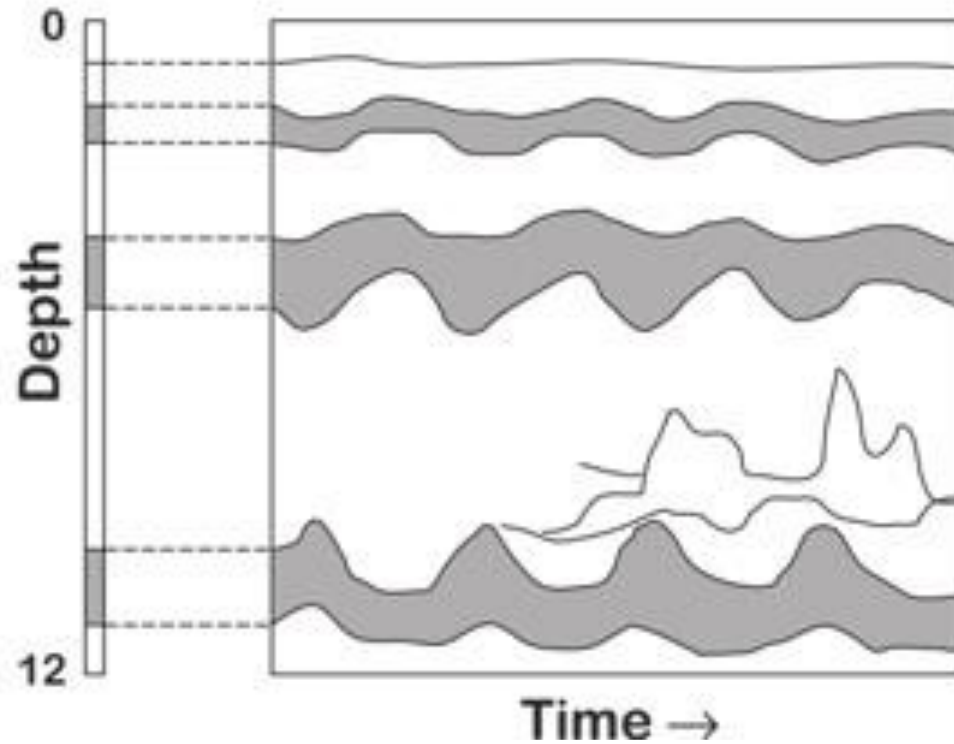
Ultrasound Modalities

[1]

A-mode

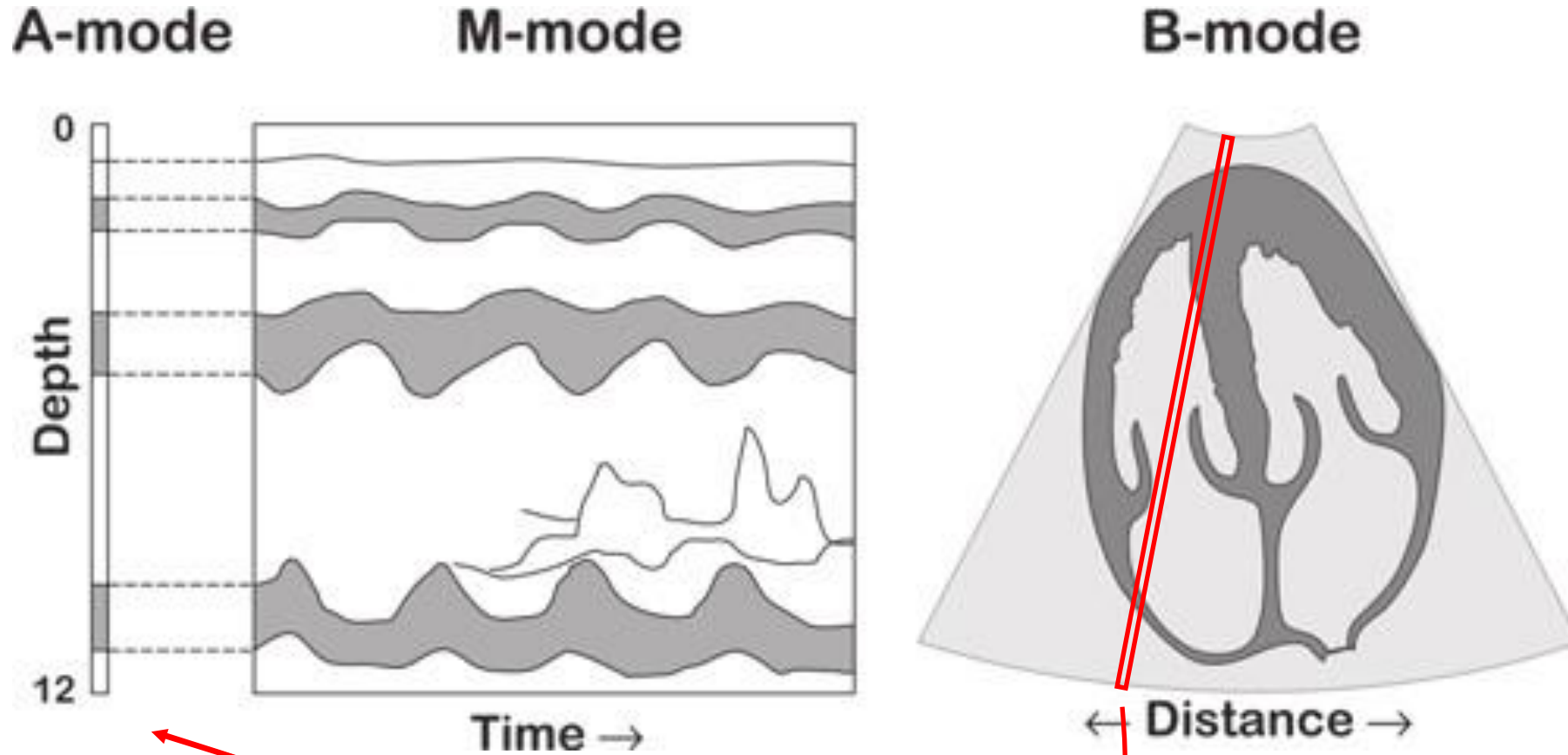
M-mode

B-mode



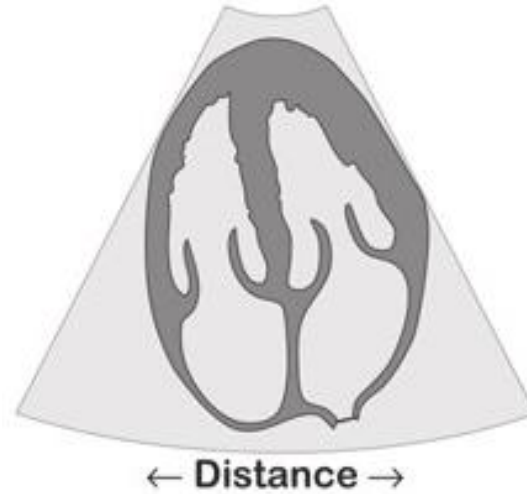
Ultrasound Modalities

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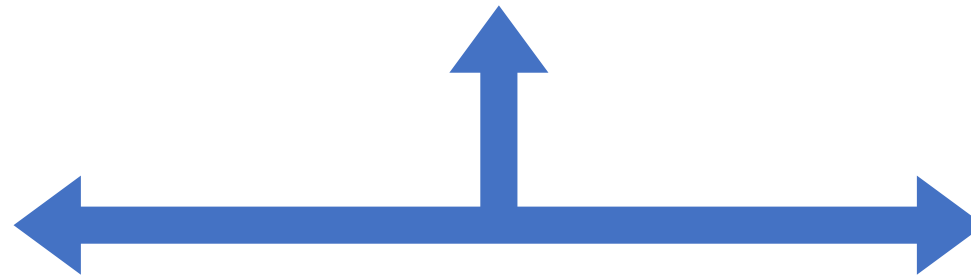


Ultrasound Modalities

B-mode [1]

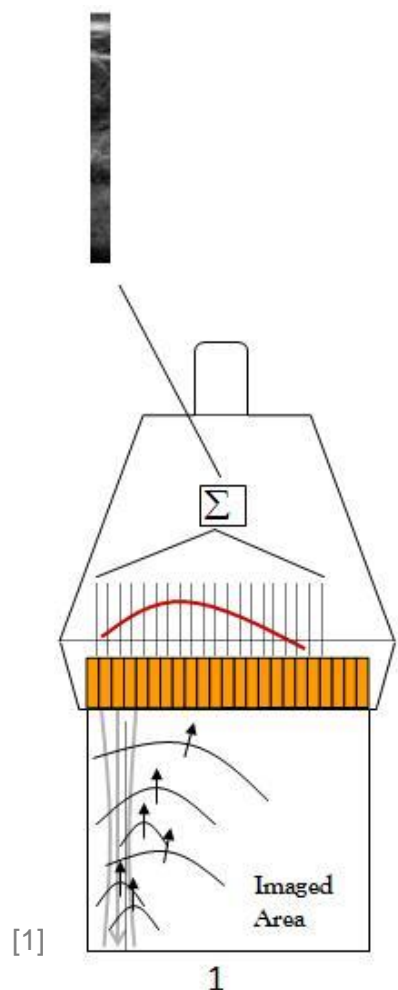


Conventional
"line-by-line"

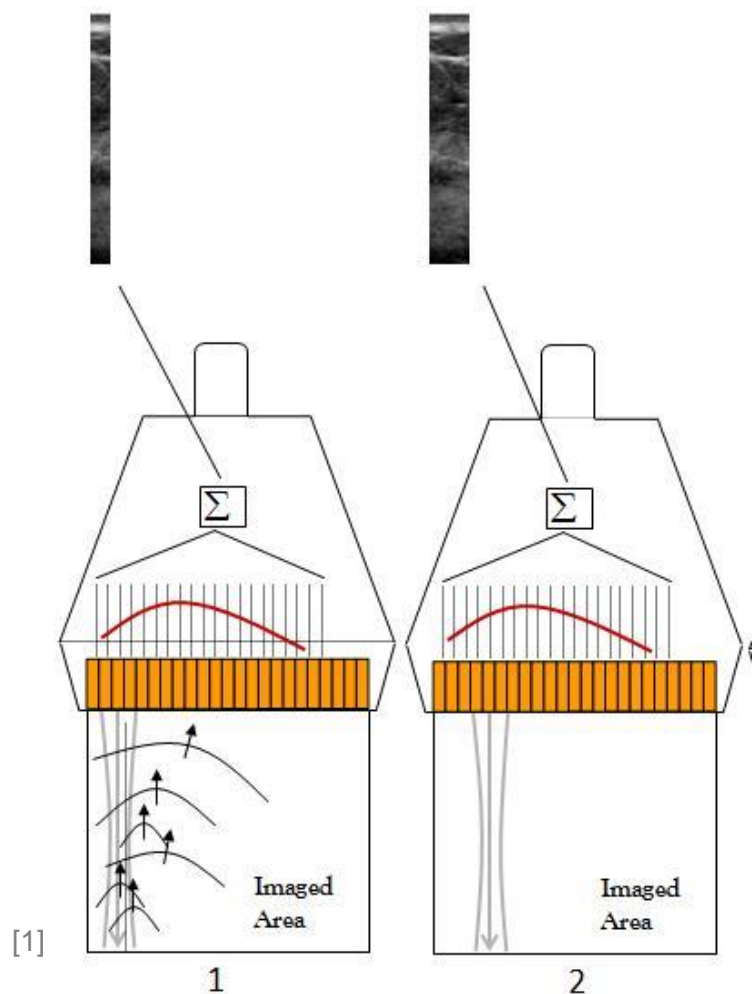


Ultrafast B-mode
"Plane Wave"

Conventional vs Ultrafast US



Conventional vs Ultrafast US

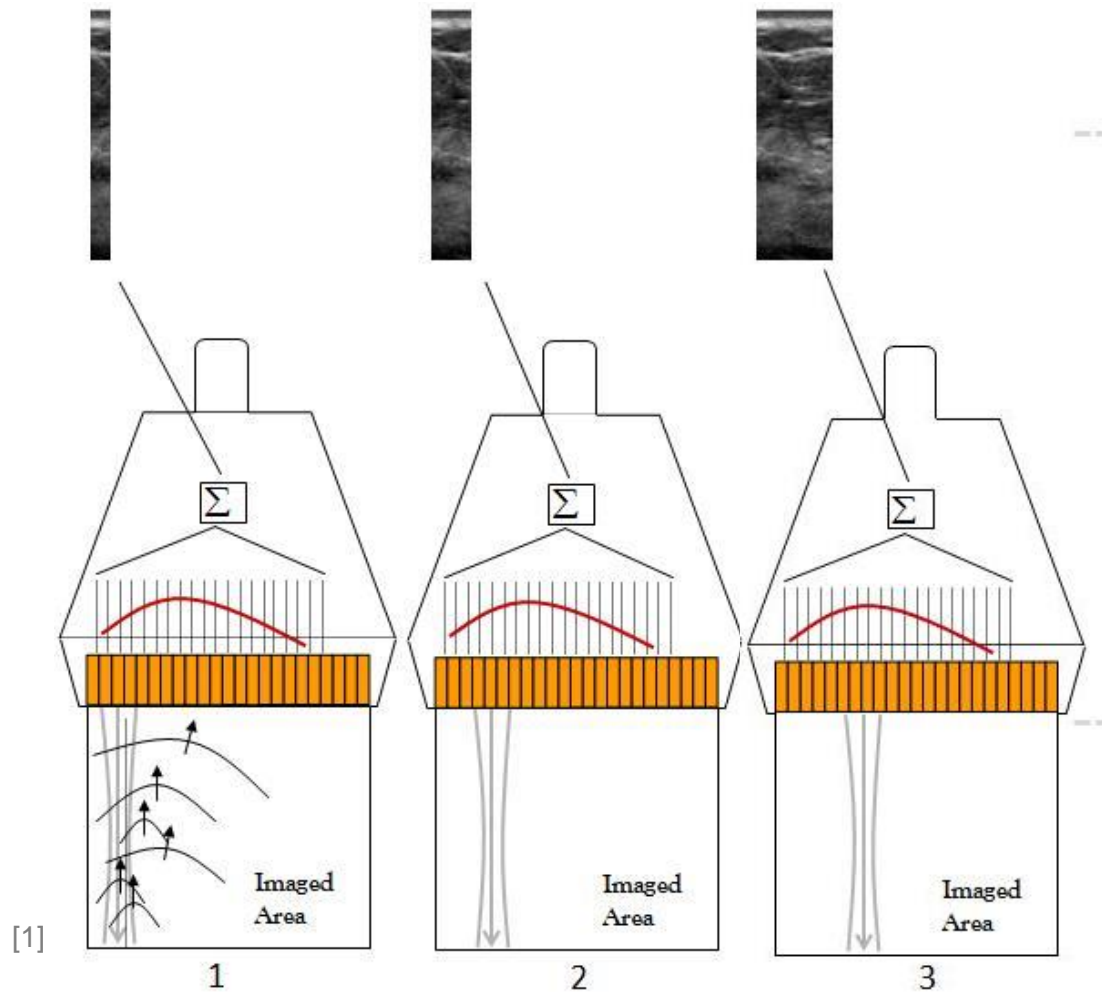


[1]

1

2

Conventional vs Ultrafast US



[1]

1

2

3

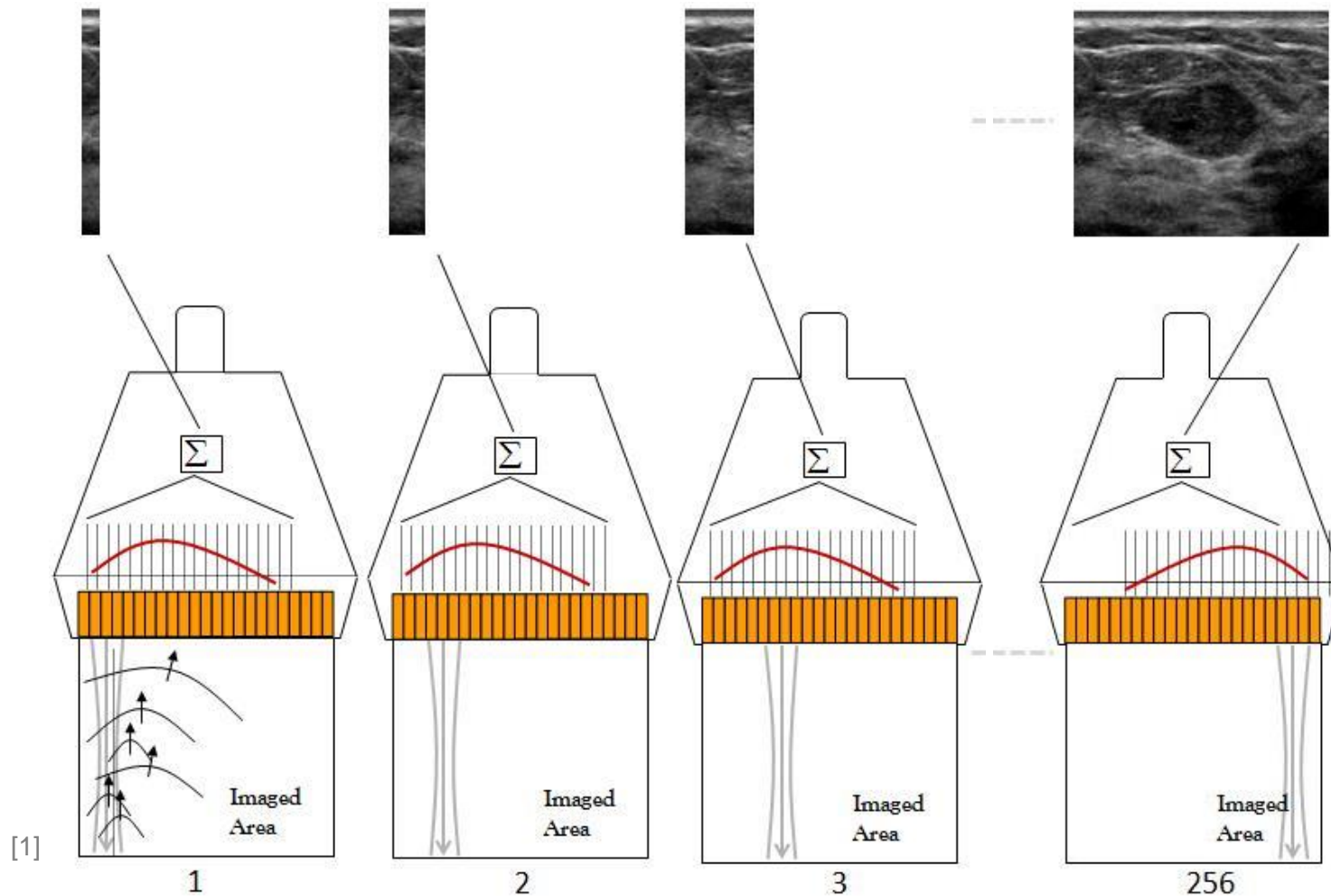


Funded by
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UK Research
and Innovation

Conventional vs Ultrafast US



[1]

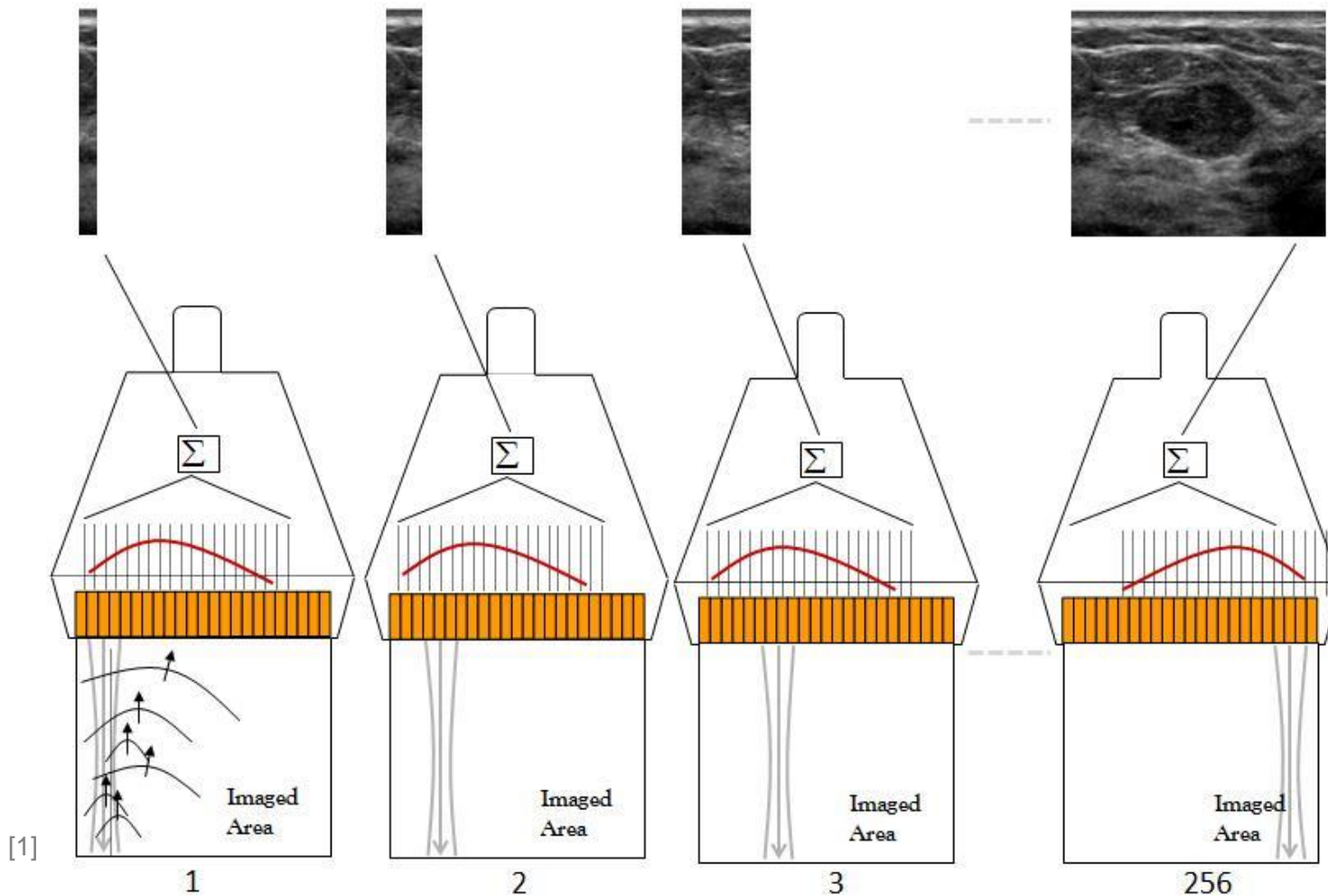
1

2

3

256

Conventional vs Ultrafast US

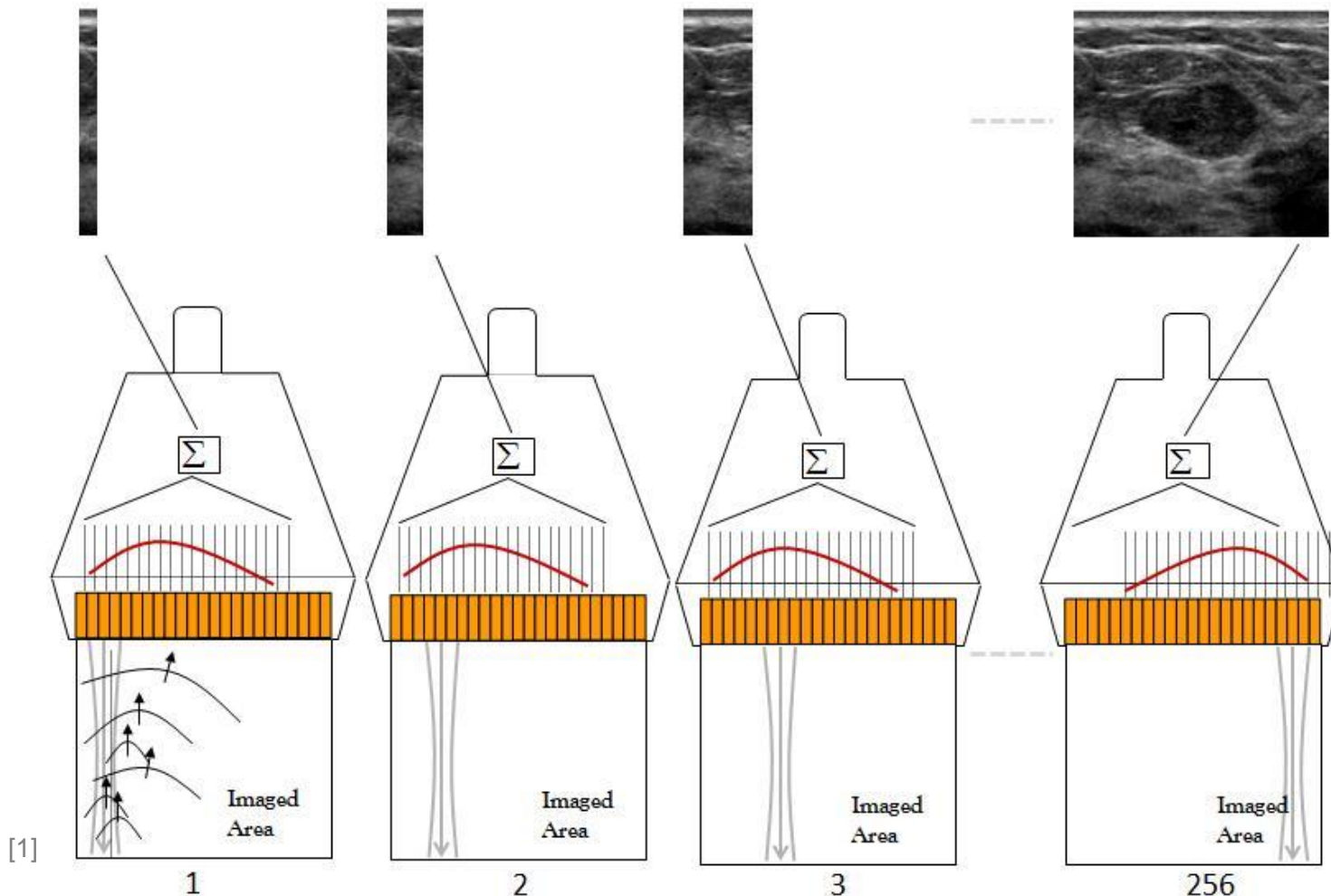


Time to build and image can be expressed as:

$$T_i = \frac{N_{lines} * 2 * depth}{c}$$

[1]

Conventional vs Ultrafast US



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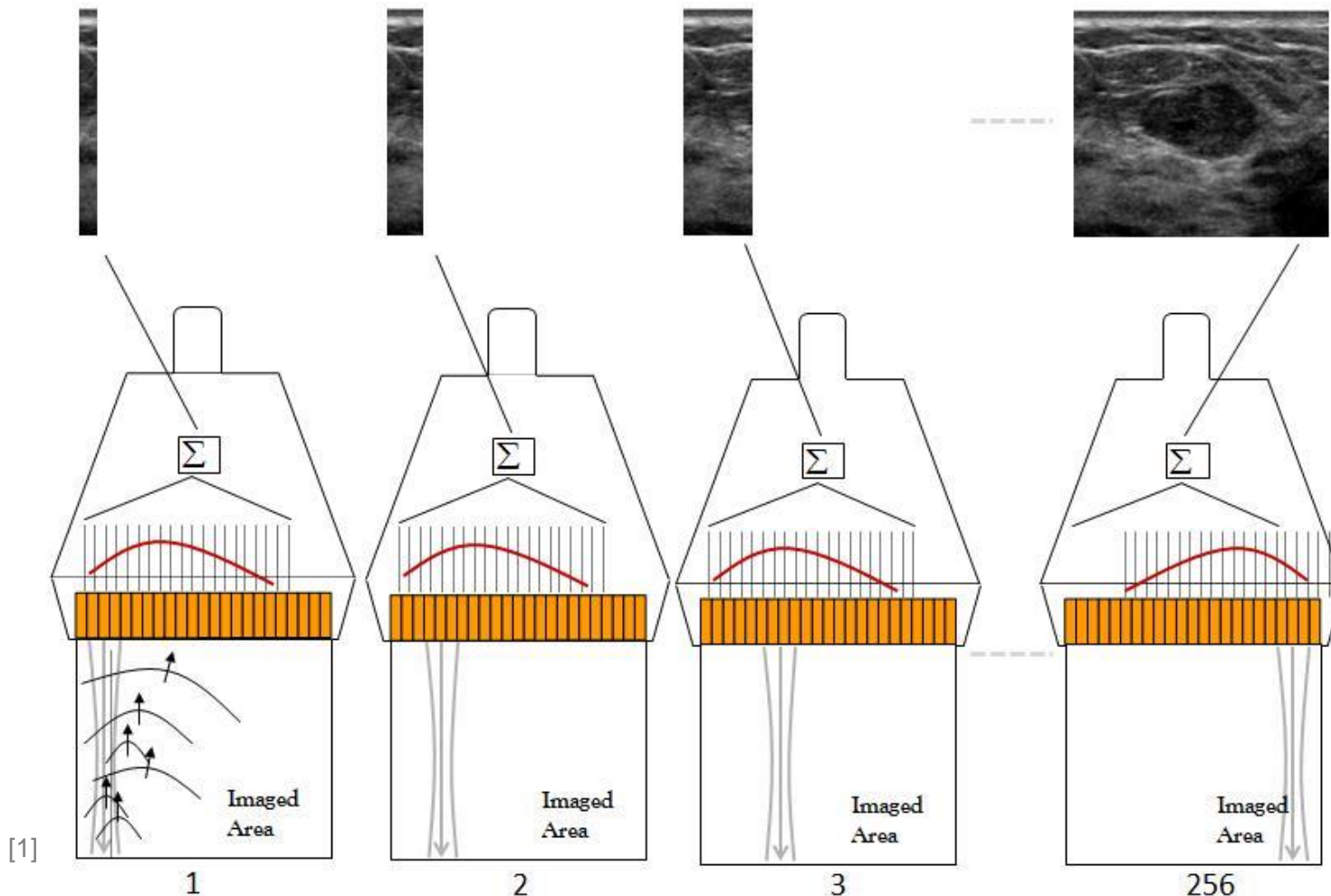
Given:

$$c = 1540 \text{ m/s}$$
$$N_{lines} = 256$$
$$depth = 5 \text{ cm}$$

Therefore:

$$T_i \approx 60 \text{ Hz}$$

Conventional vs Ultrafast US



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Conventional US applications have theoretical frame rate limits from

20~150Hz

[1]

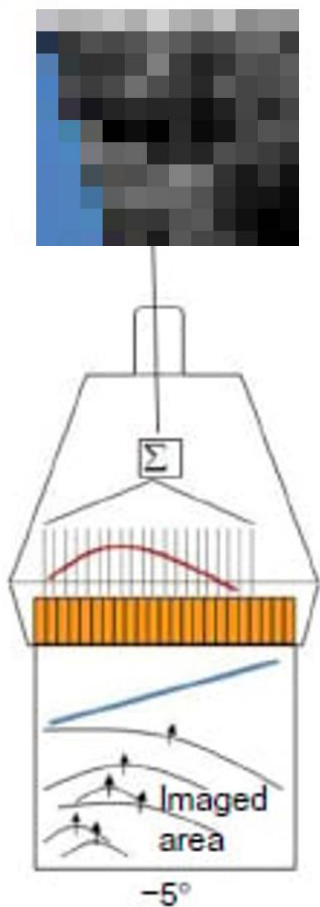
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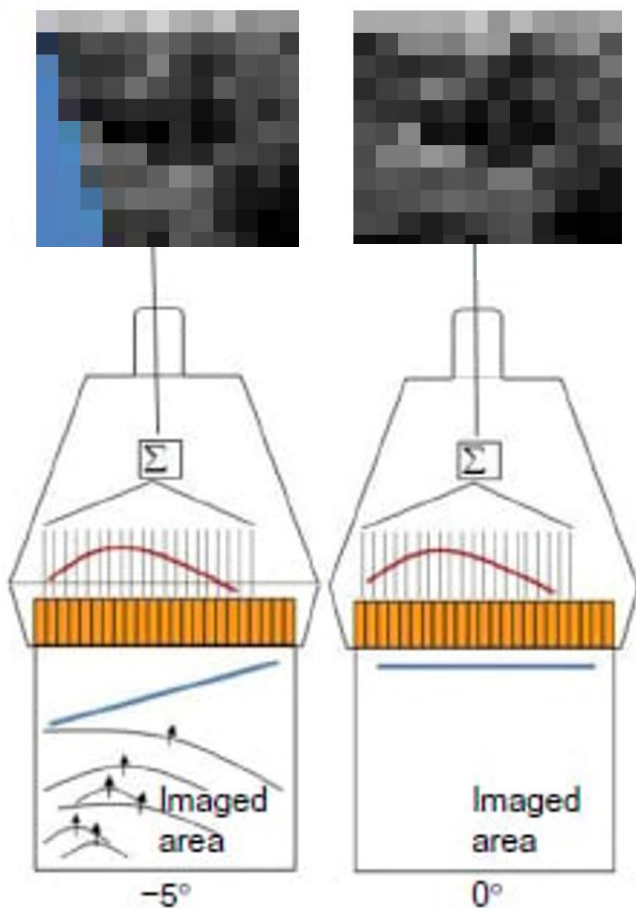
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Conventional vs **Ultrafast US**



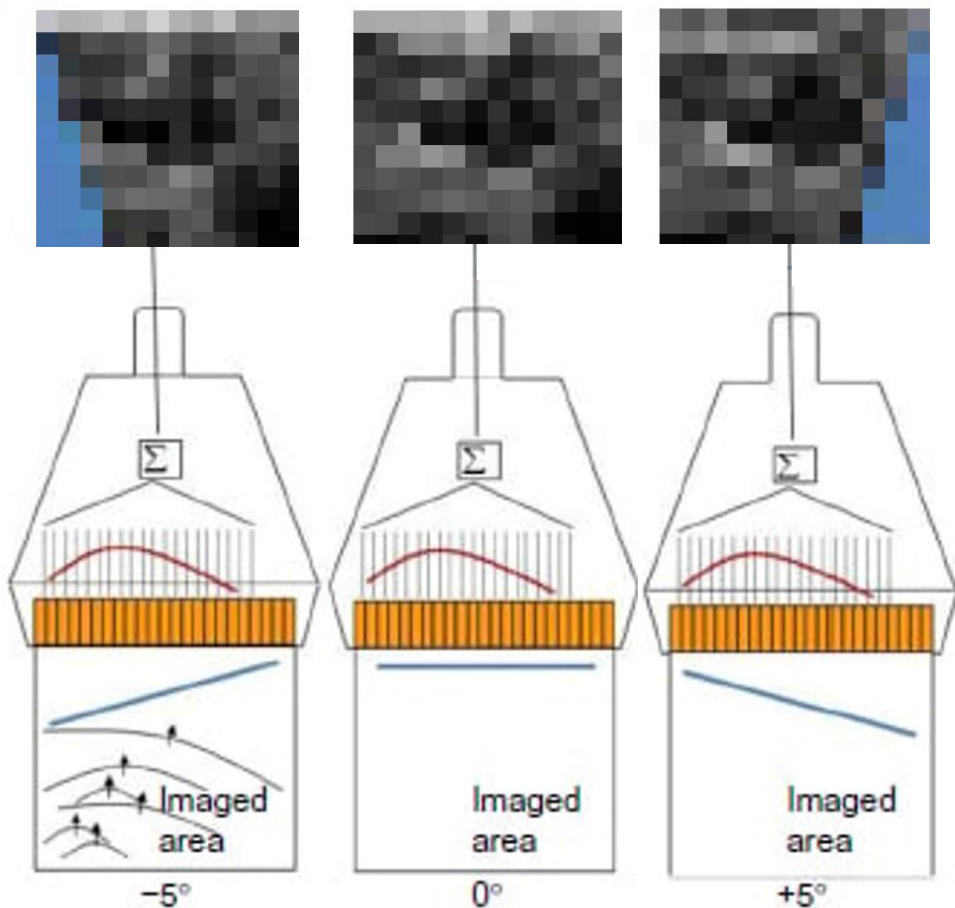
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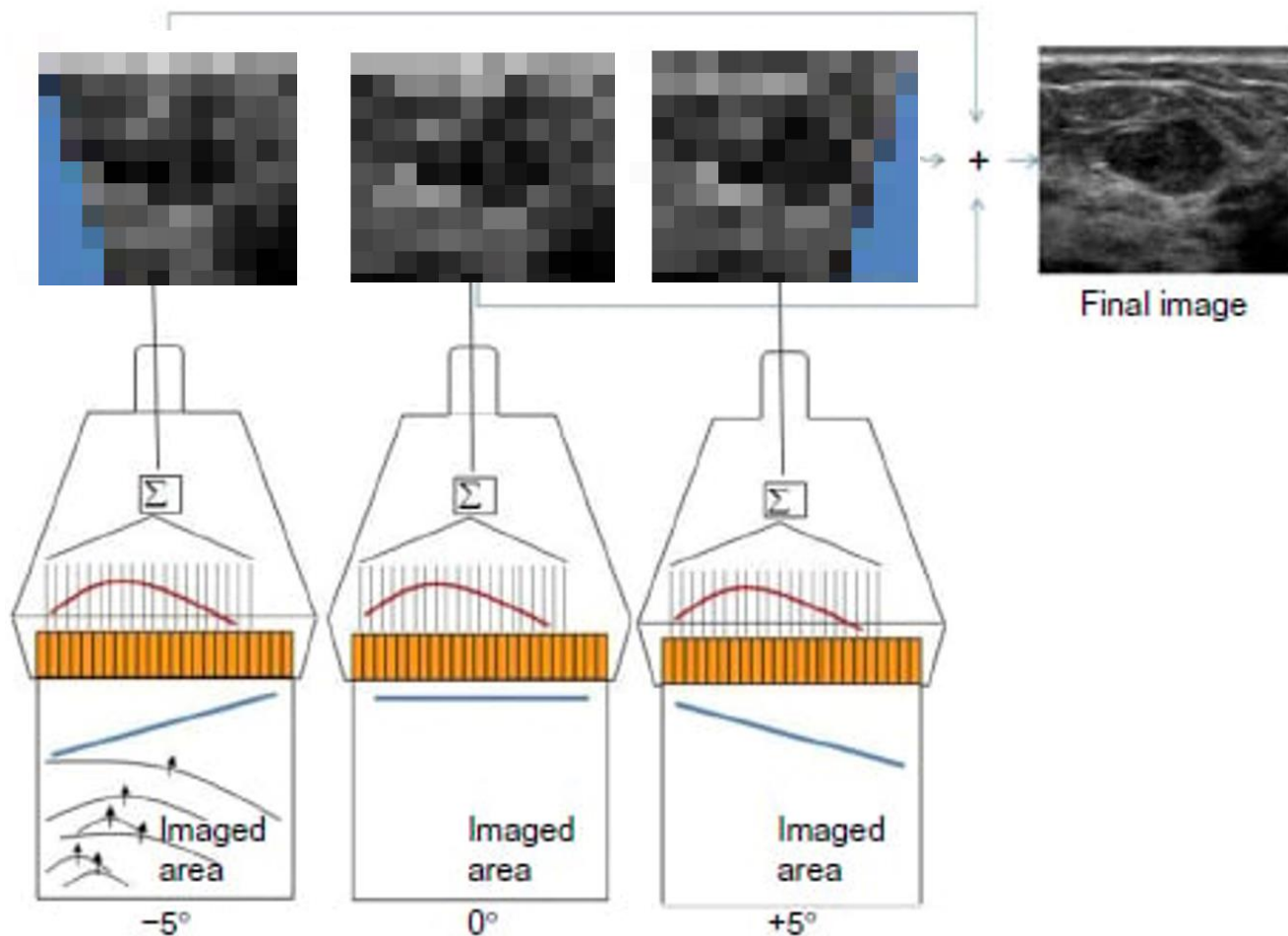
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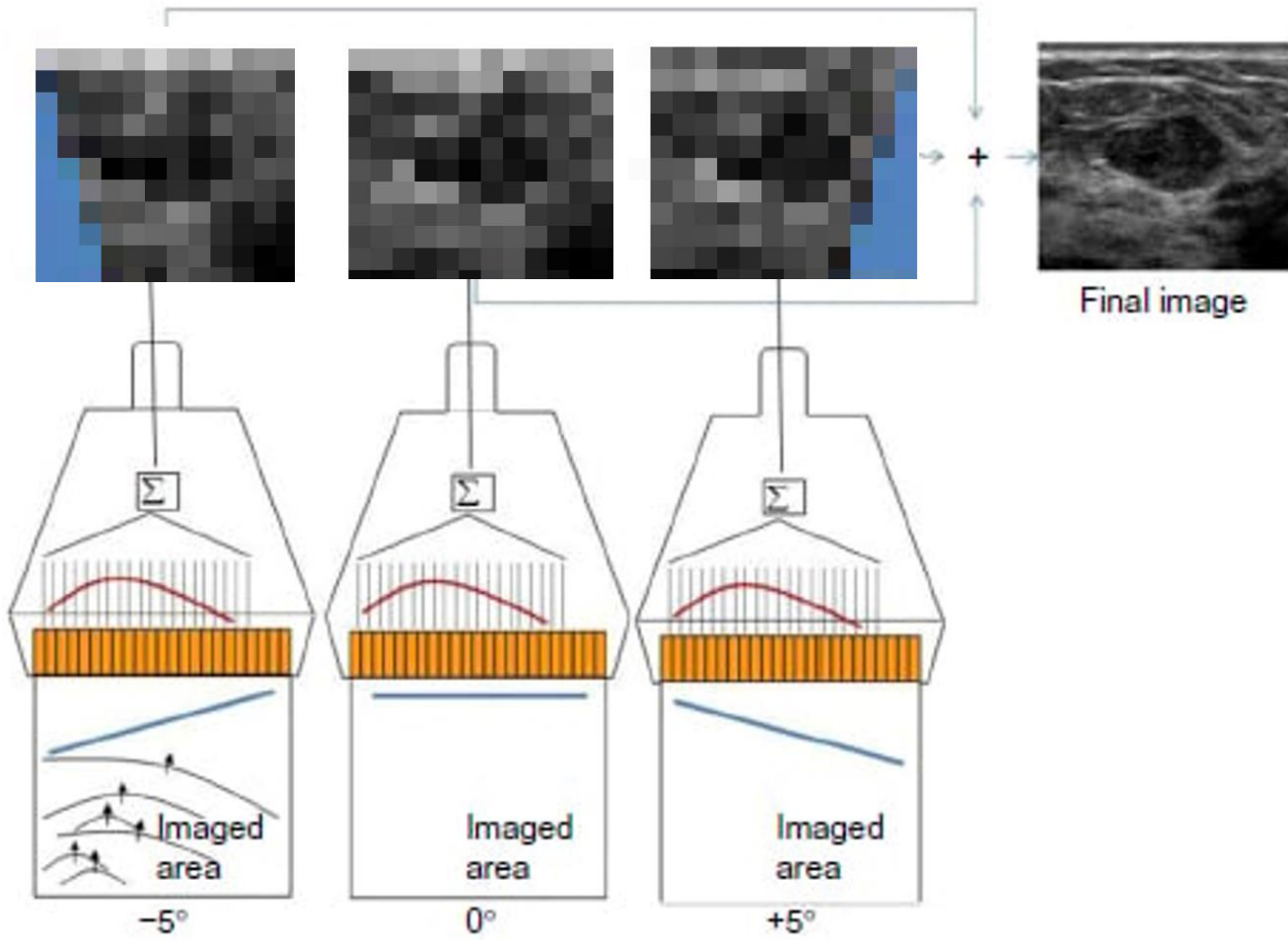
[1]

Conventional vs **Ultrafast US**



[1]

Conventional vs **Ultrafast US**



Going back to our previous equation:

$$T_i = \frac{N_{angles} * 2 * depth}{c}$$

Given:

$$c = 1540 \text{ m/s}$$

$$N_{angles} = 11$$

$$depth = 5 \text{ cm}$$

Therefore:

$$T_i \approx 1400 \text{ Hz}$$

Ultrafast US unlocks theoretical frame rates up to $\sim 5000 \text{ Hz}$

[1]

What Unlocked Ultrafast US?



[1] The concept of ultrafast ultrasound imaging was first introduced by Bruneel et al almost **40 years ago**

Ultrafast echotomographic system using optical processing^[2] of ultrasonic signals*

C. Bruneel, R. Torguet, K. M. Rouvaen, E. Bridoux, and B. Nongaillard

*Laboratoire d'Opto-Acousto-Electronique—Equipe de Recherche Associée au C.N.R.S. No 593, Centre
Universitaire de Valenciennes, 59326 Valenciennes, France*

(Received 15 November 1976; accepted for publication 16 February 1977)

An ultrafast ultrasonic tomograph has been developed in our laboratory for direct observation of the living tissues inside the human body. Acousto-optic interaction is the basic principle of our system. The information carried by the acoustic wave is impressed on a light beam diffracted during the acousto-optic interaction and an optical system is used for displaying a real image of an isonified object. A first and simple realization has been used to check the principle of operation. Directions for future improvements are discussed.

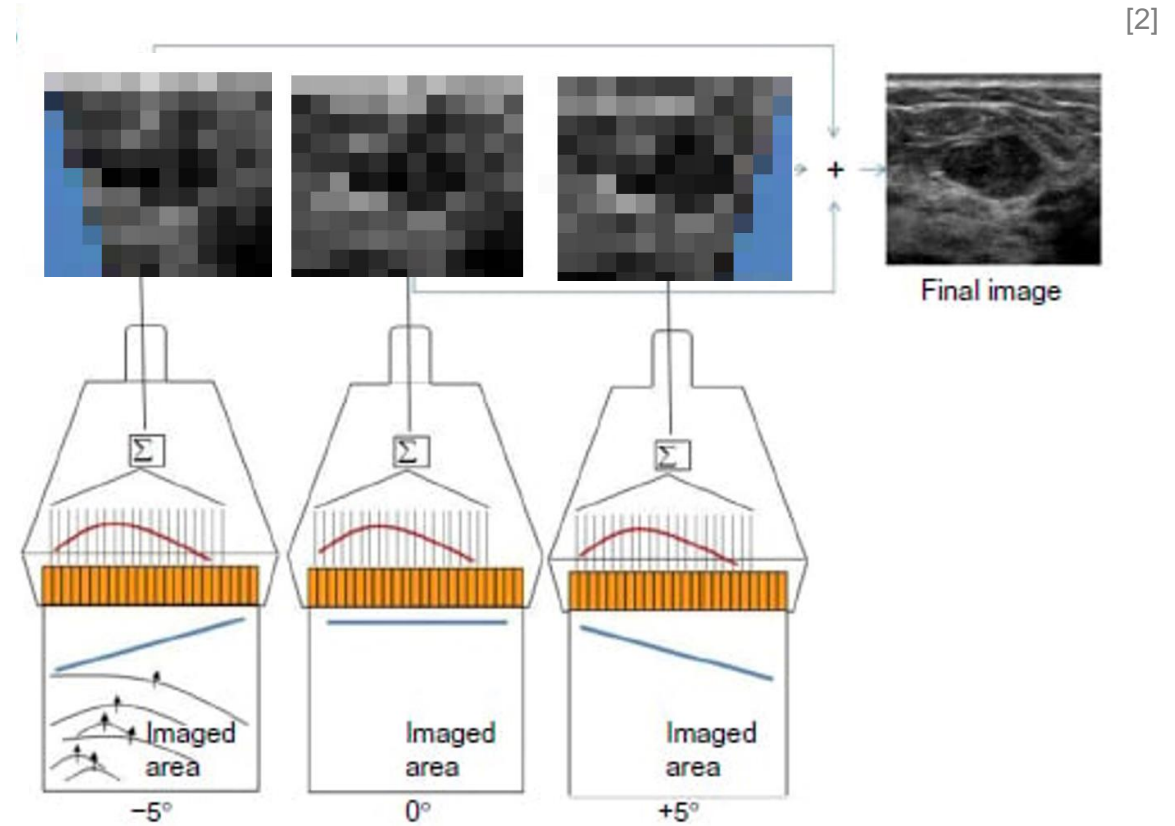
PACS numbers: 87.70.Es, 43.85.+f, 87.50.Ce

[1] Couade M., The advent of ultrafast ultrasound in vascular imaging: a review

[2] Bruneel et al., Ultrafast echotomographic system using optical processing of ultrasonic signals

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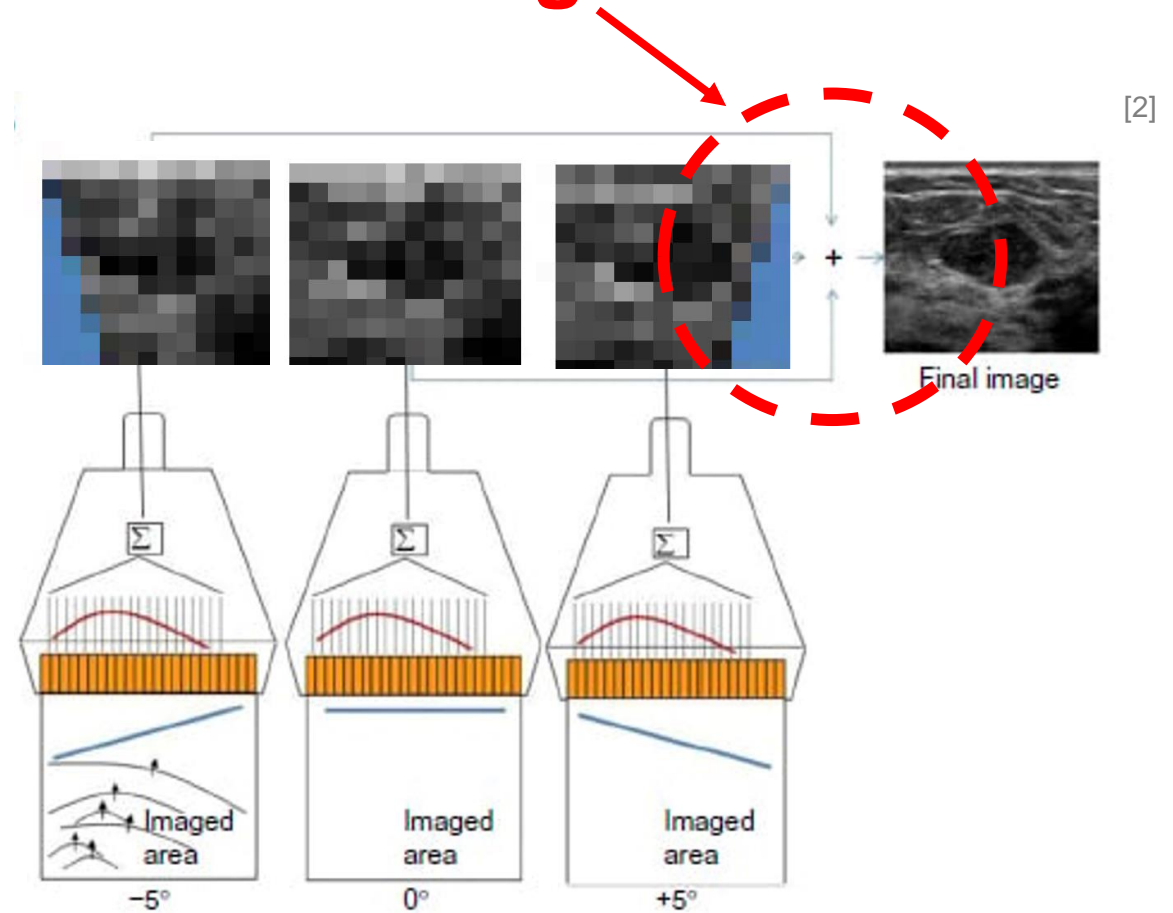
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Beamforming



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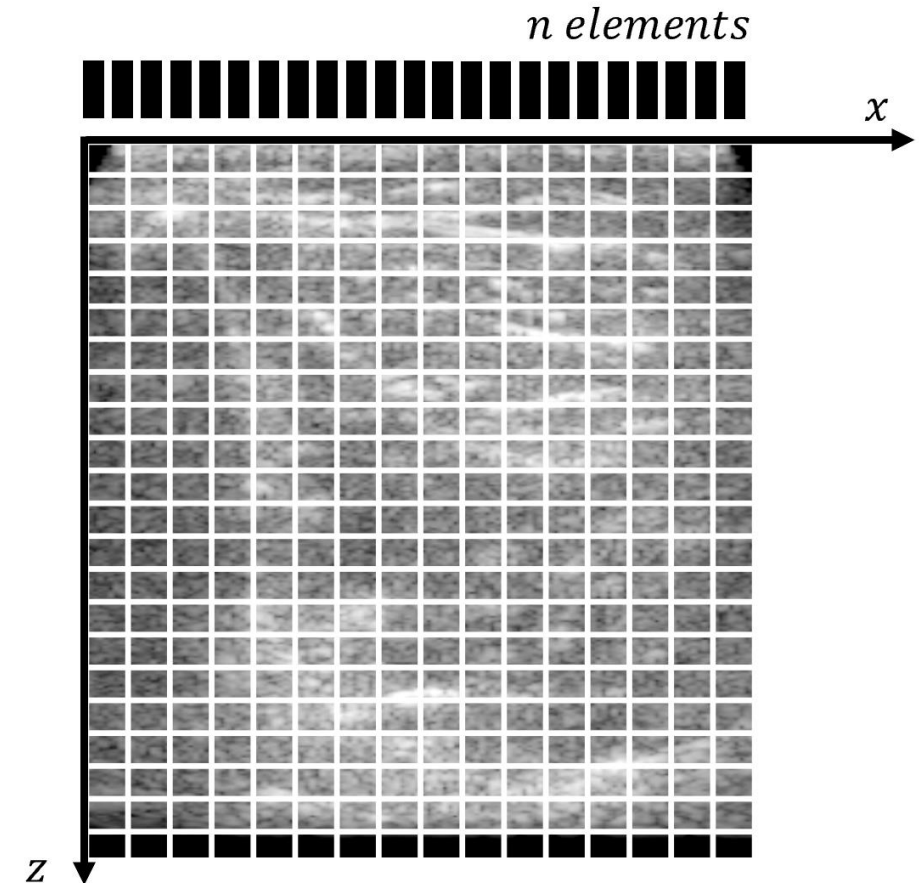
[2] Ultrafast Ultrasound Imaging, Ultrasound Imaging - Medical Applications

What Unlocked Ultrafast US?

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[1] “However, its implementation on a commercial ultrasound diagnostic device has only been possible recently, thanks to the massive **parallel processing power of personal computers developed in the last decade.**”

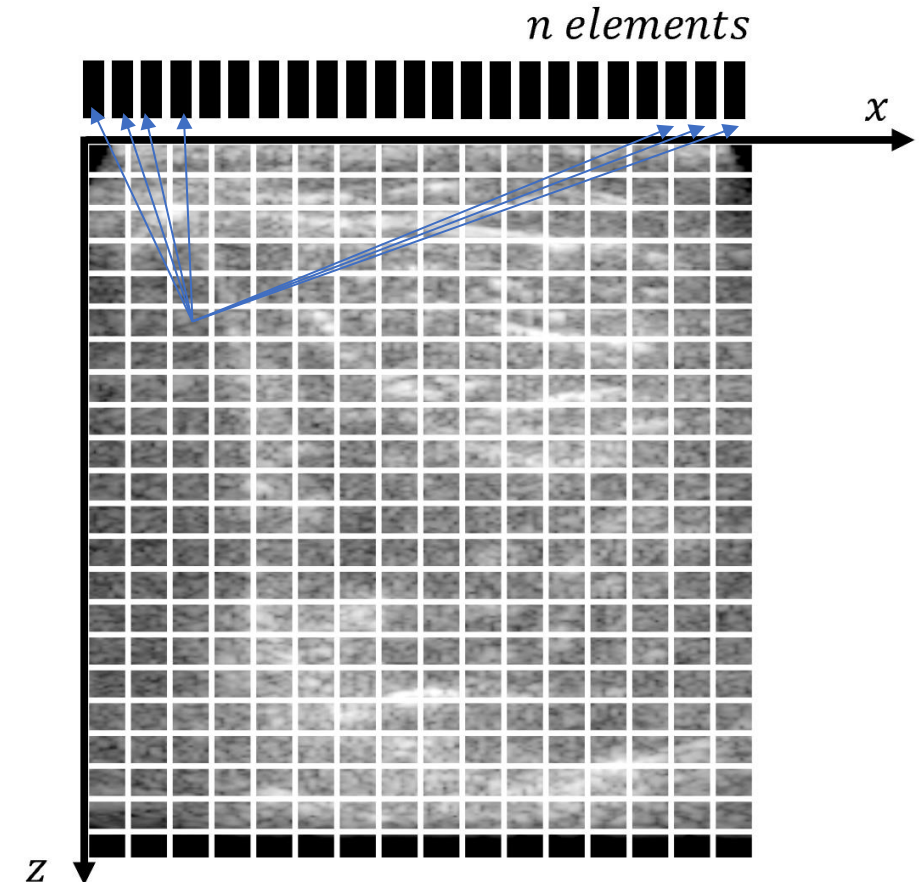


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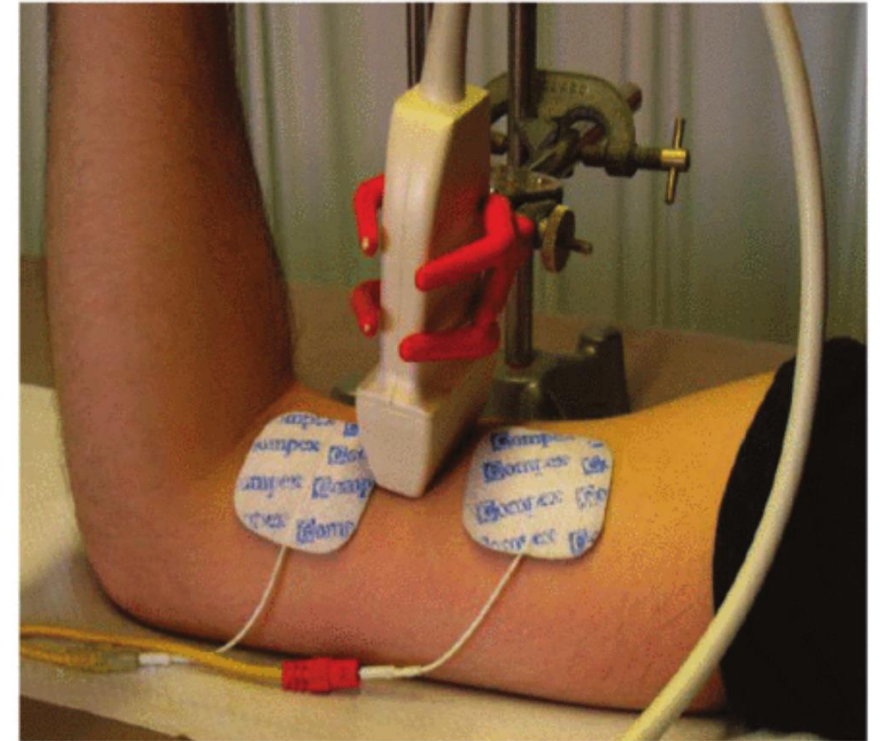
What all of this has to do with Neural Interfaces?

IEEE TRANSACTIONS ON ULTRASONICS, FERROELECTRICS, AND FREQUENCY CONTROL, VOL. 55, NO. 10, OCTOBER 2008

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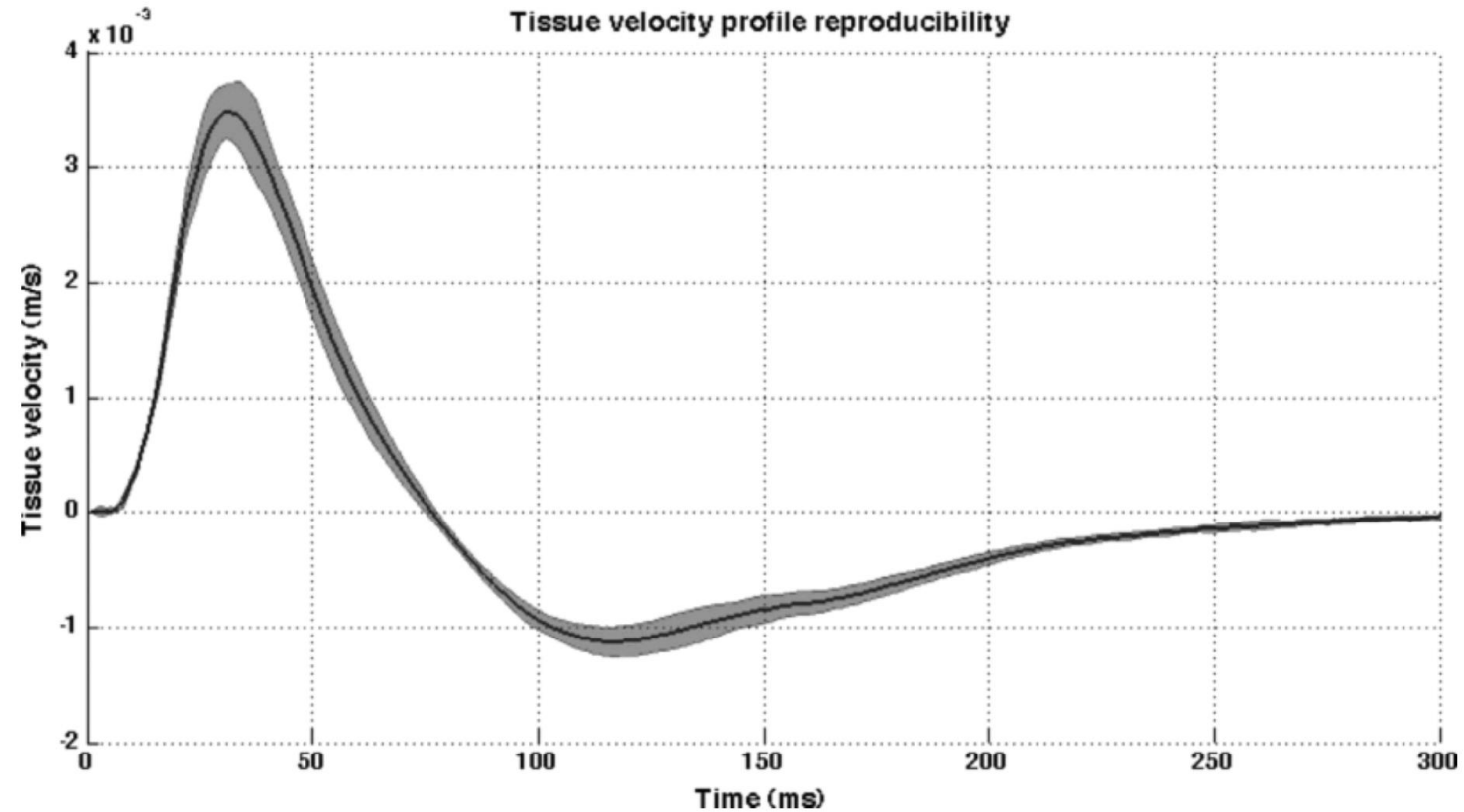
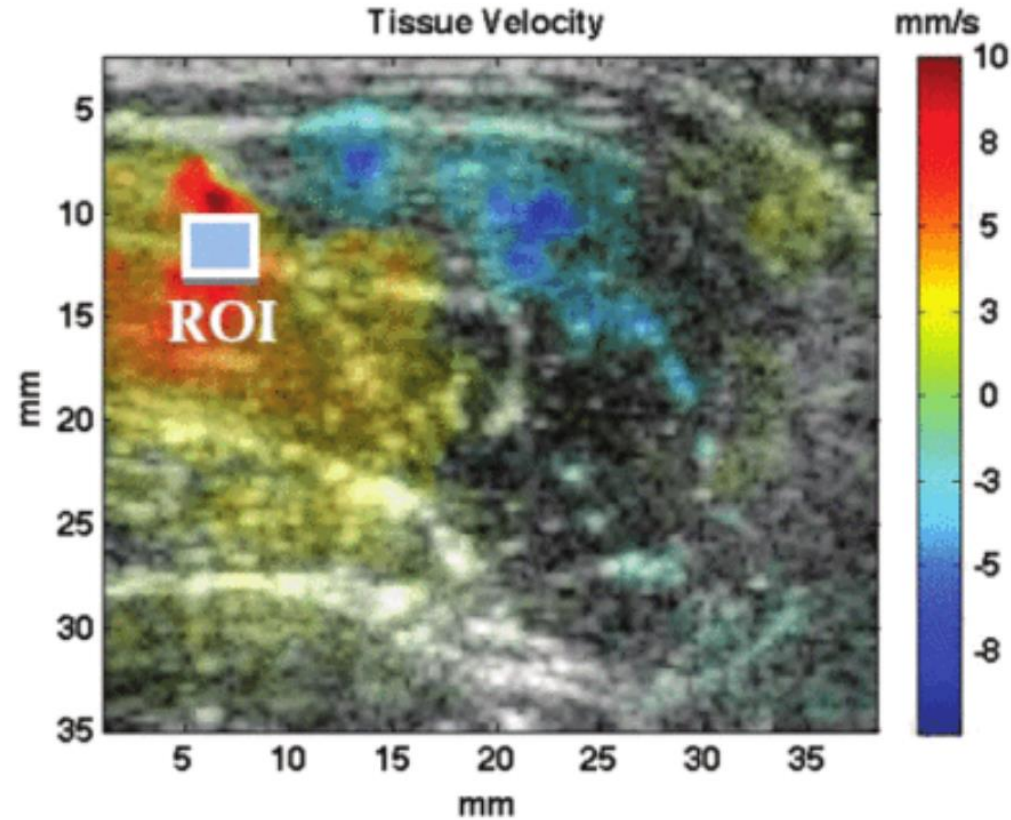
Assessment of the Mechanical Properties of the Musculoskeletal System Using 2-D and 3-D Very High Frame Rate Ultrasound

Thomas Deffieux, Jean-Luc Gennisson, Mickaël Tanter, and Mathias Fink

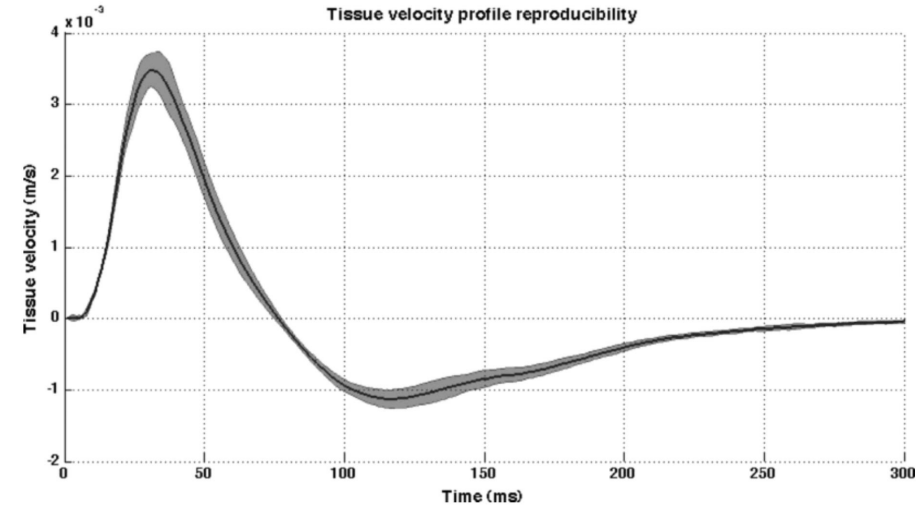
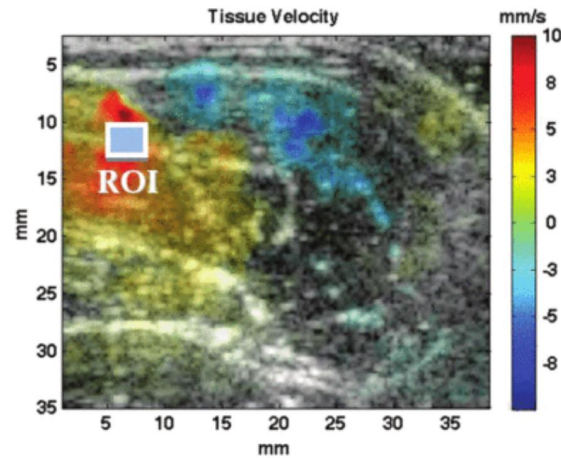


T. Deffieux, J. -I. Gennisson, M. Tanter and M. Fink, "Assessment of the mechanical properties of the musculoskeletal system using 2-D and 3-D very high frame rate ultrasound,"

What all of this has to do with Neural Interfaces?



What all of this has to do with Neural Interfaces?



What this study shows us.

- Ultrafast ultrasound can image localized transient motion inside muscles
- When electrically stimulated we can record distinct reproducible twitch like motions

What we don't know.

- Can we image fibre movement during voluntary contractions?
- Can we image and decompose individual motor unit spiking activity?

The start of our Investigation

Proposal

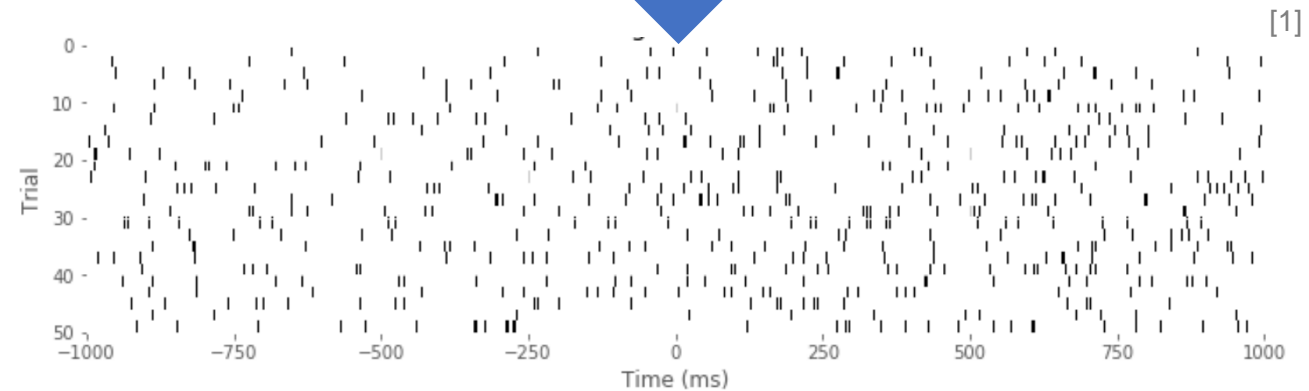
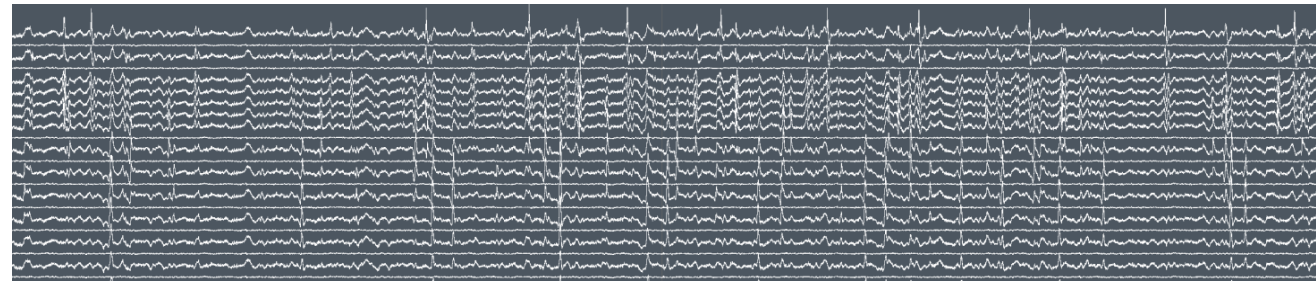
- 1) Simultaneous HDsEMG and Ultrafast Ultrasound recording



The start of our Investigation

Proposal

- 1) Simultaneous HDsEMG and Ultrafast Ultrasound recording
- 2) Decompose MUs via HDsEMG



[1] <https://mark-kramer.github.io/Case-Studies-Python/10.html>



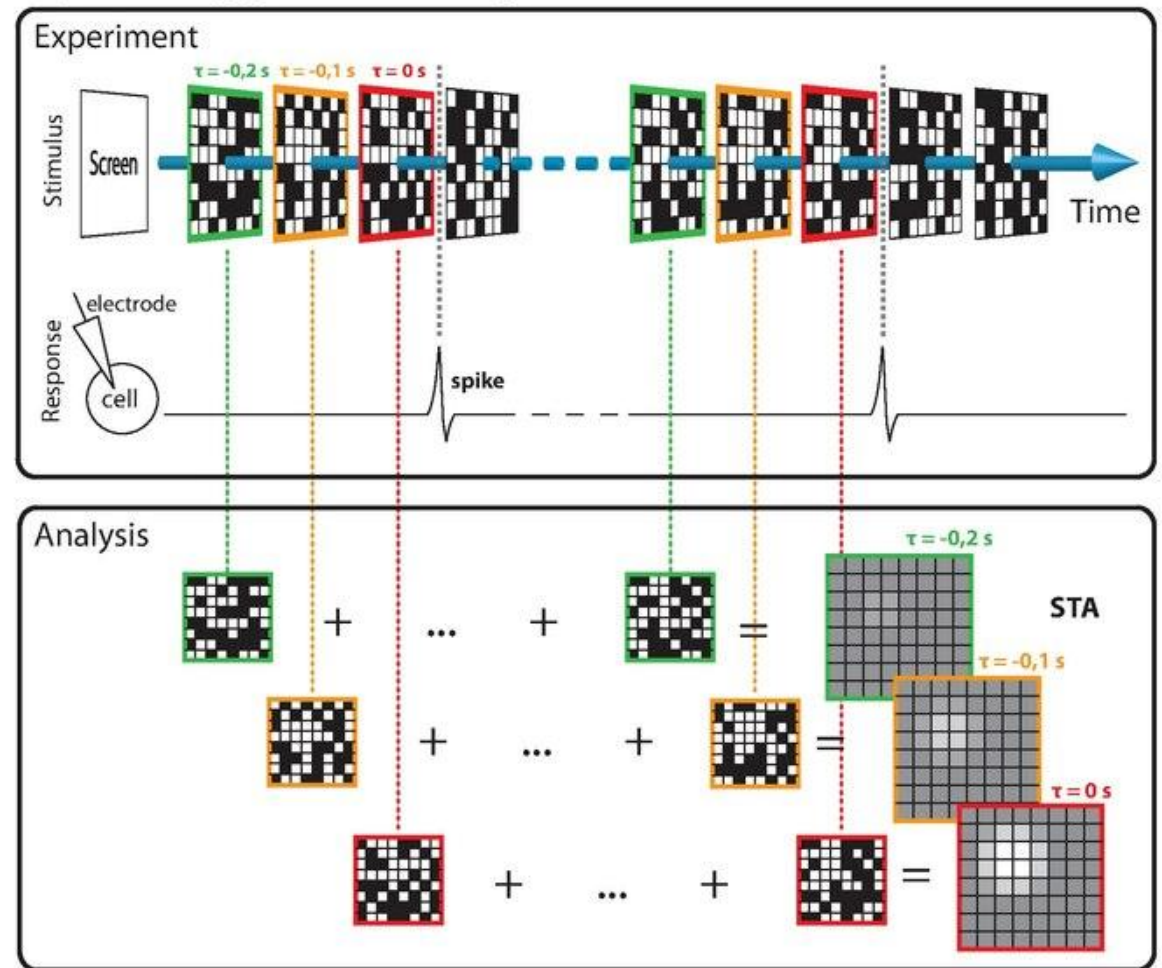
The start of our Investigation

Proposal

- 1) Simultaneous HDsEMG and Ultrafast Ultrasound recording
- 2) Decompose MUs via HDsEMG
- 3) Use the MUs spiking times to perform a Spike trigger average (STA) on the US velocity maps
- 4) Profit?

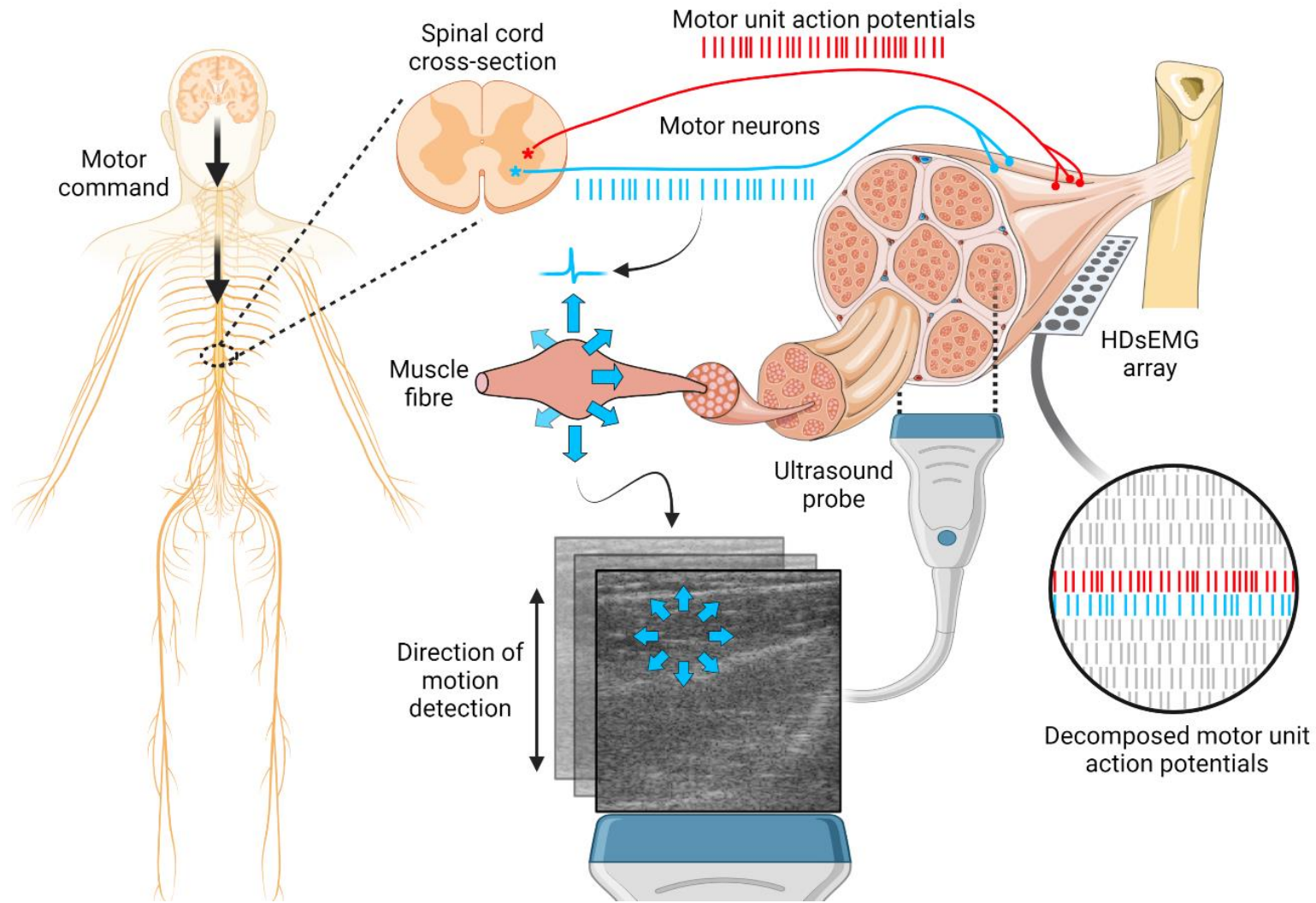


Spike-triggered average (STA)



[1]

The start of our Investigation



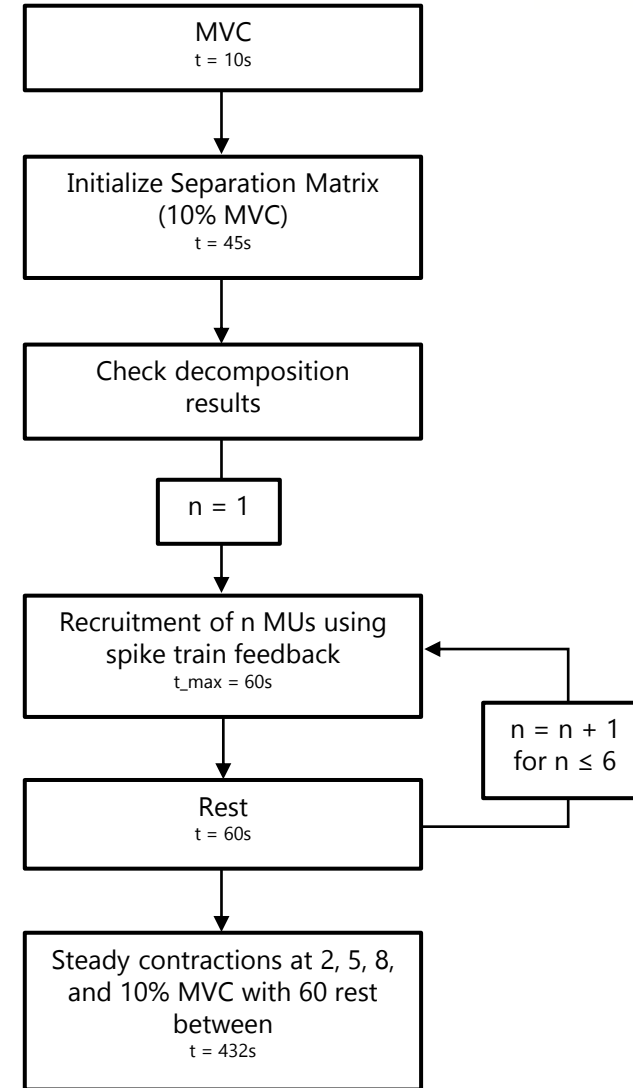
The start of our Investigation



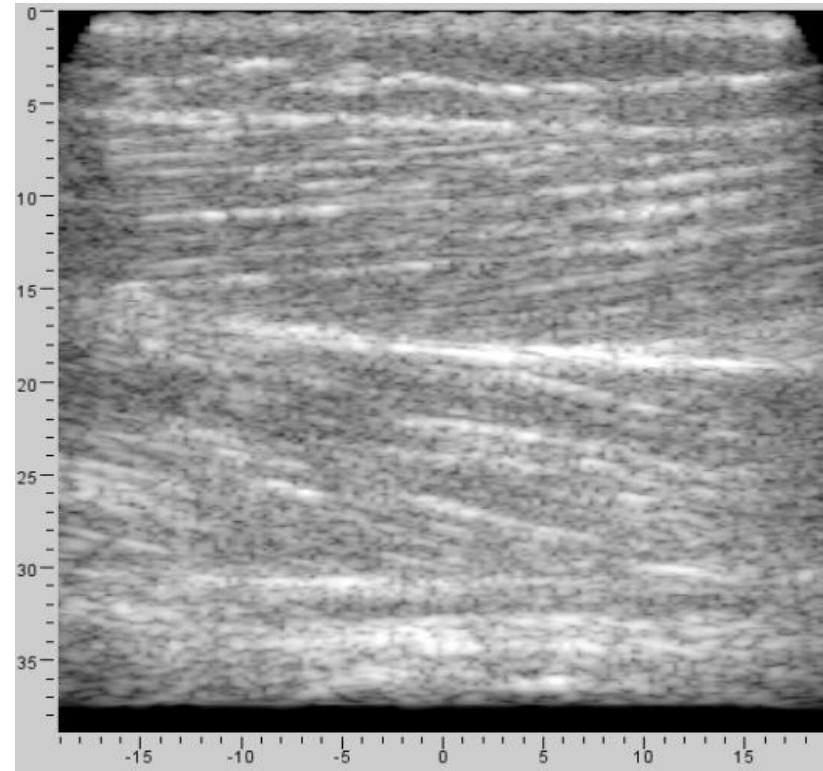
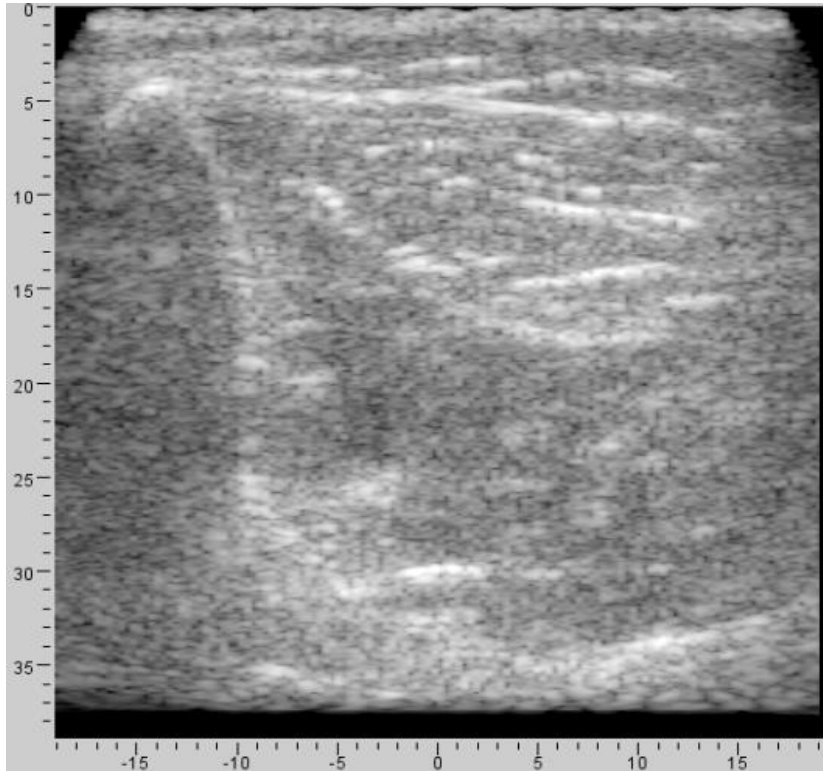
(A)



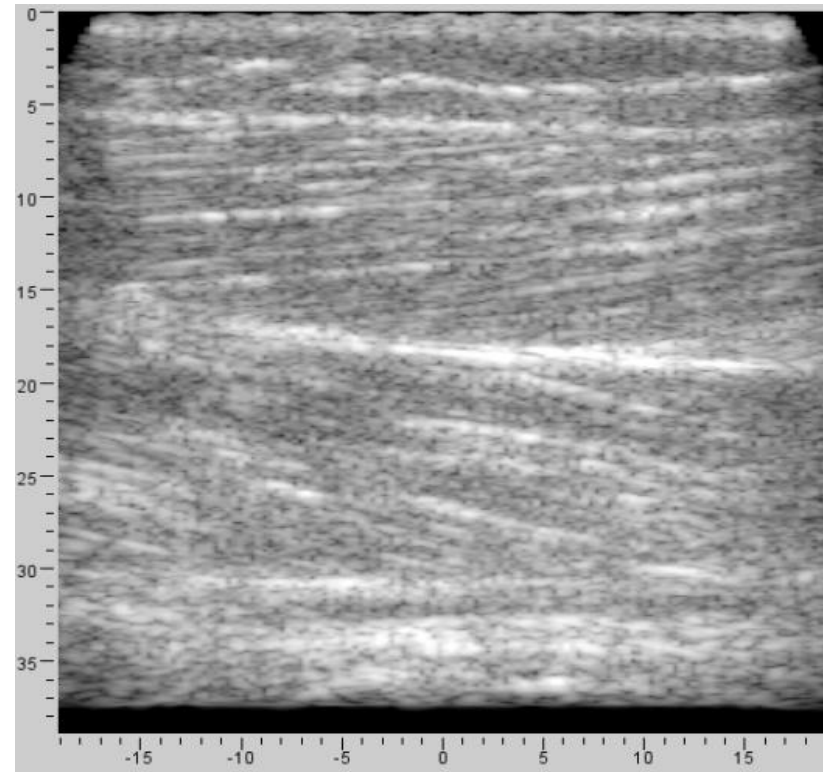
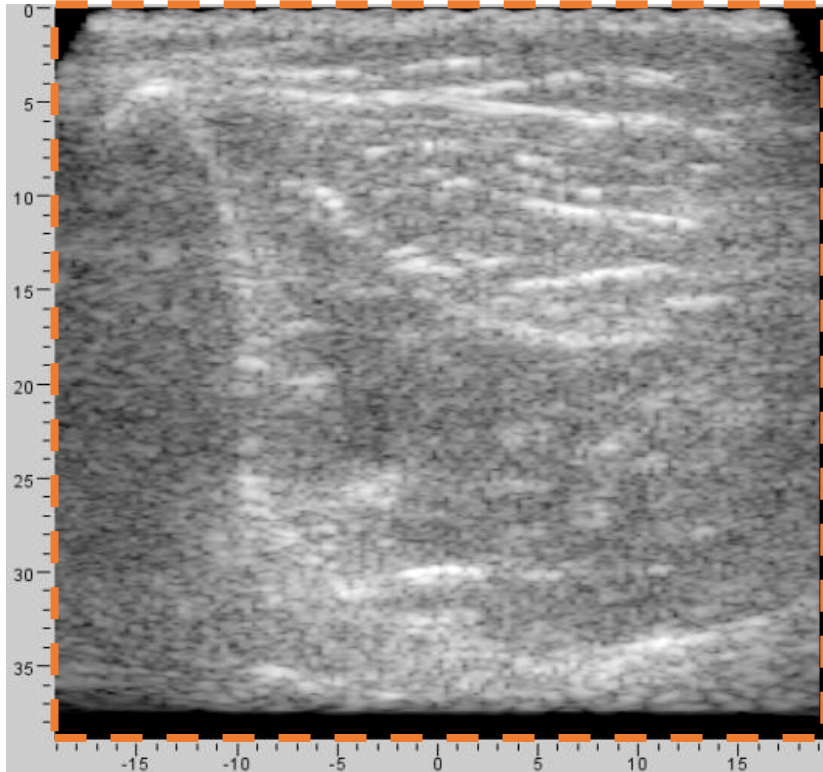
(B)



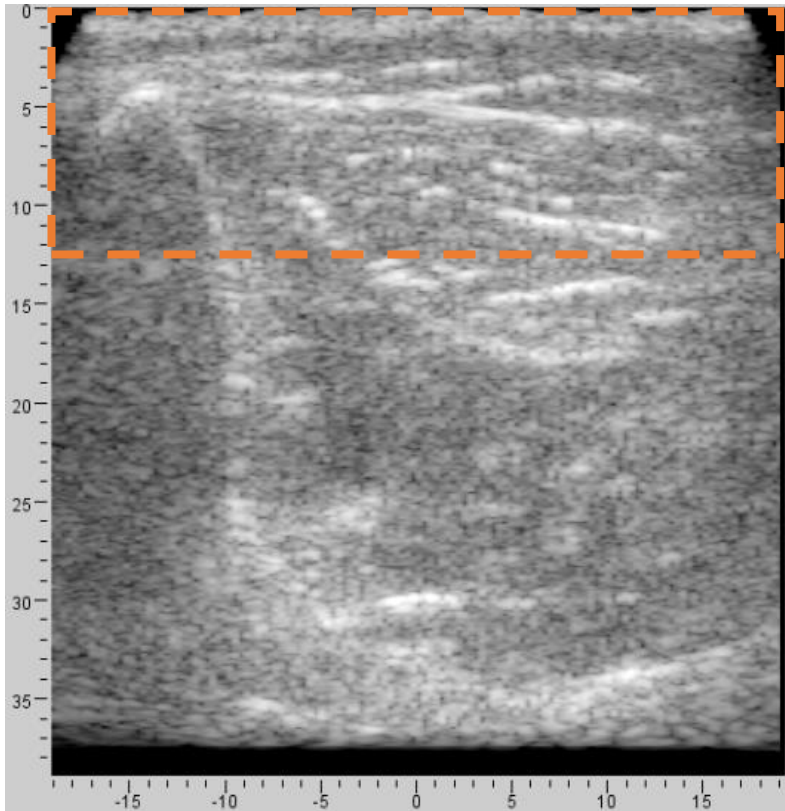
The start of our Investigation



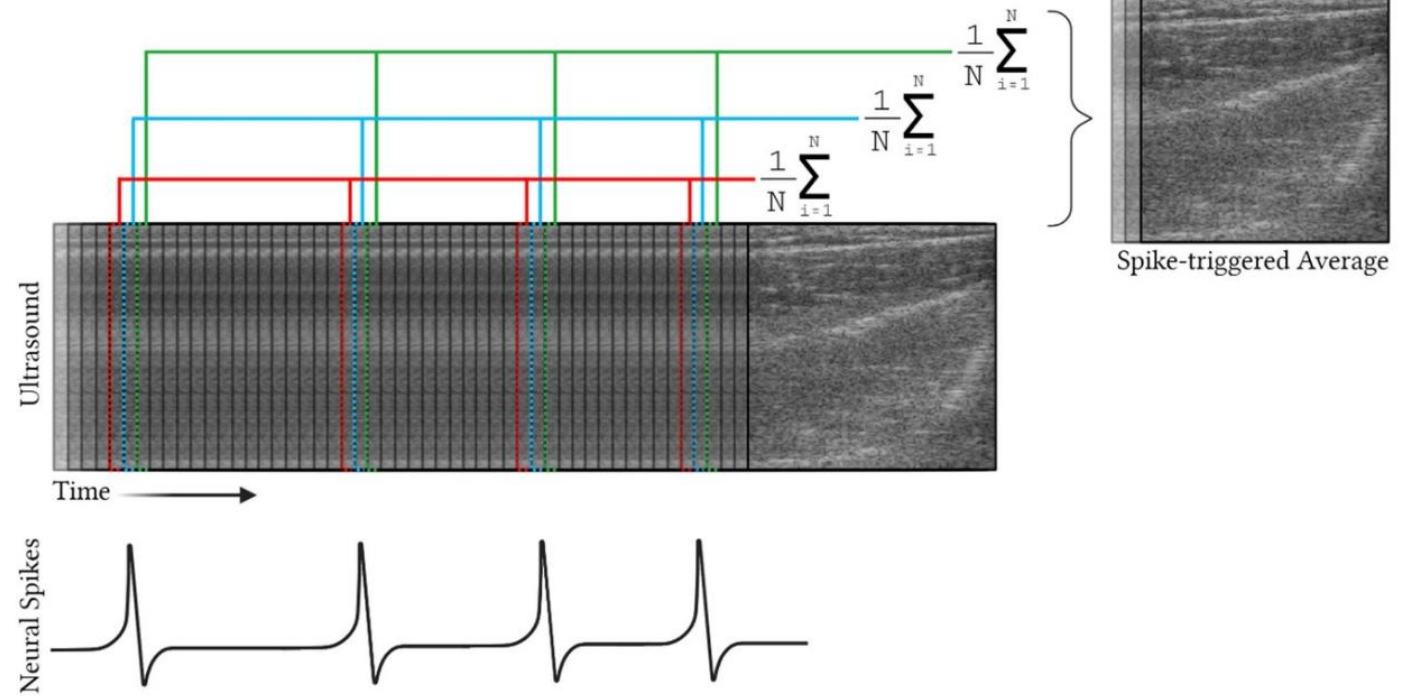
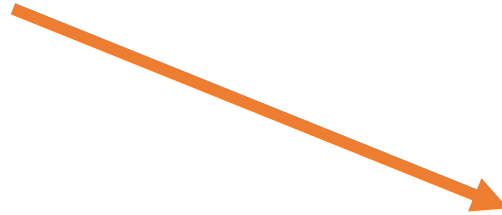
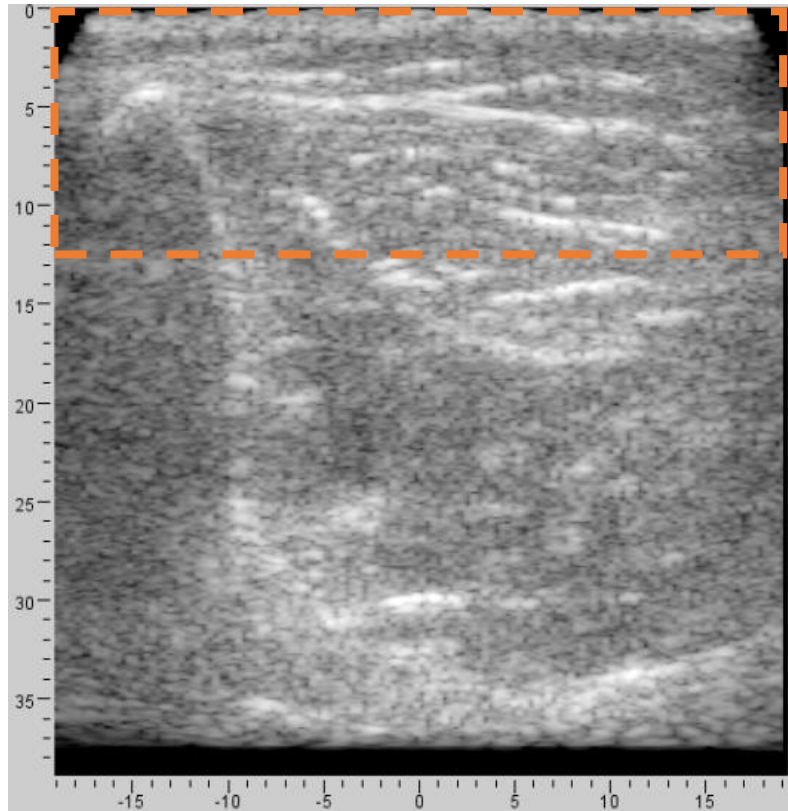
The start of our Investigation



The start of our Investigation

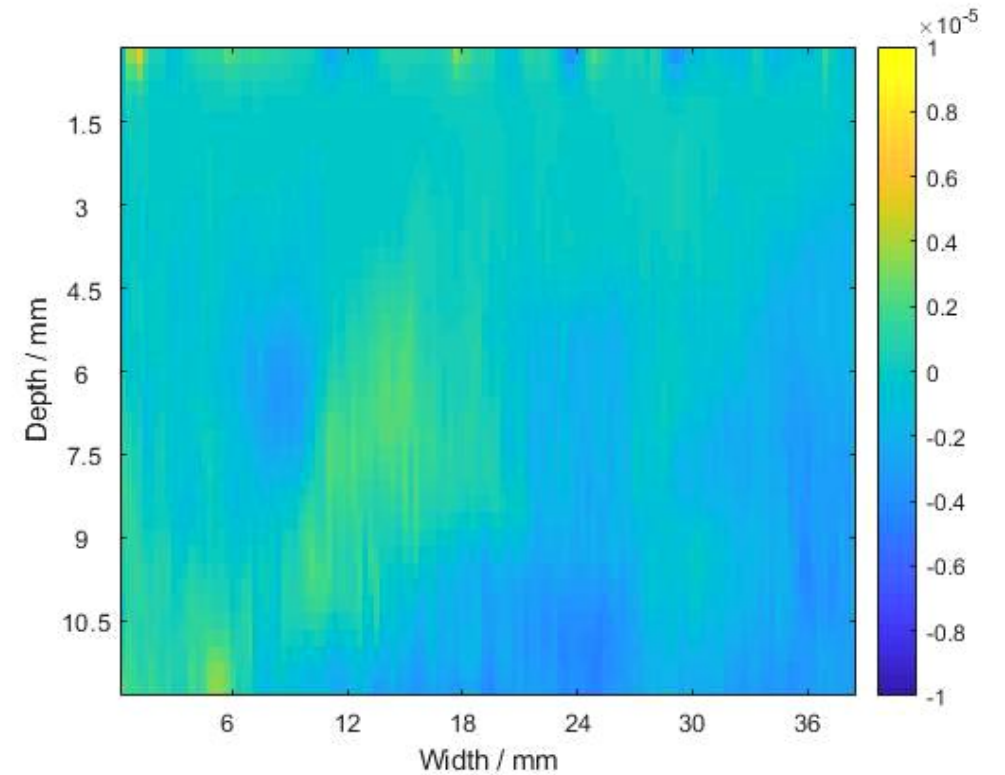
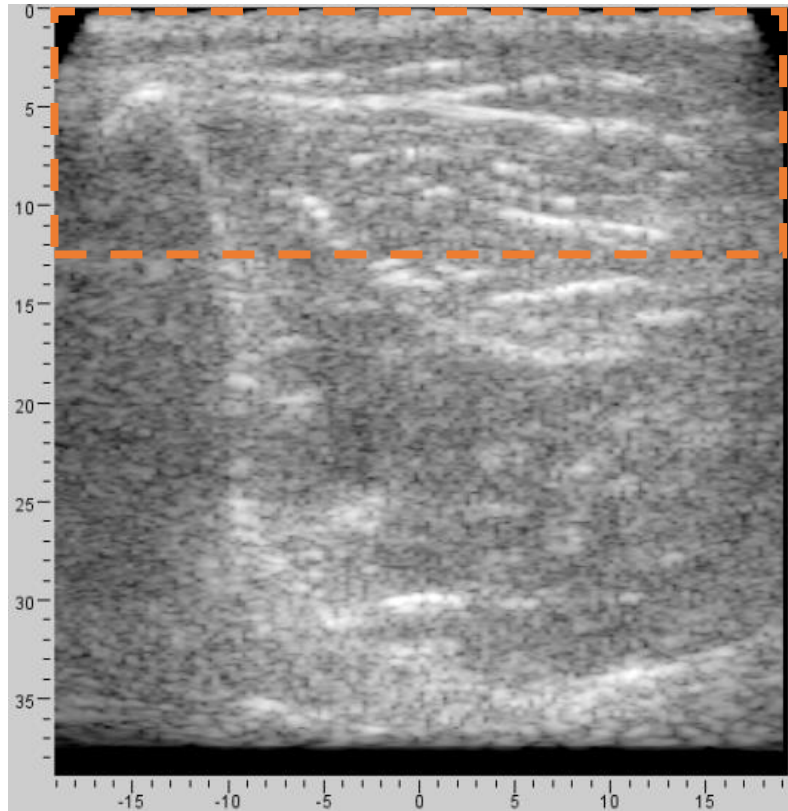


The start of our Investigation



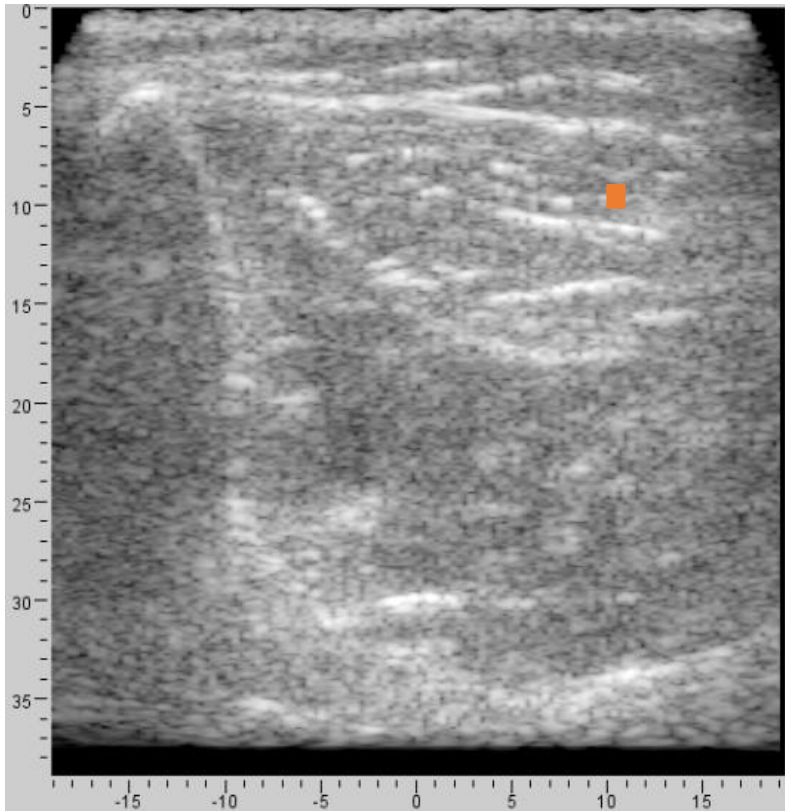
Emma Lubel et al. Kinematics of individual muscle units in natural contractions measured in vivo using ultrafast ultrasound, 2022

The start of our Investigation

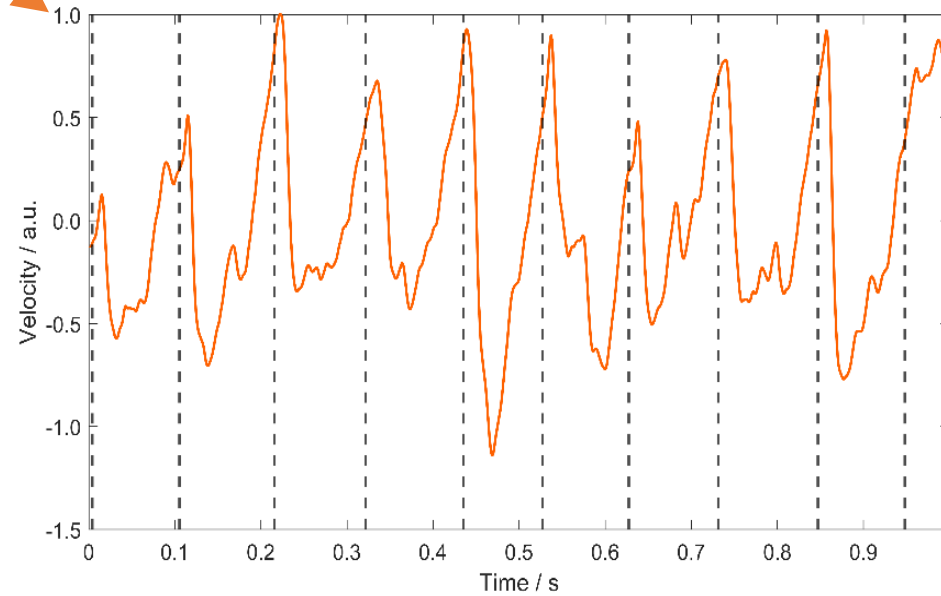
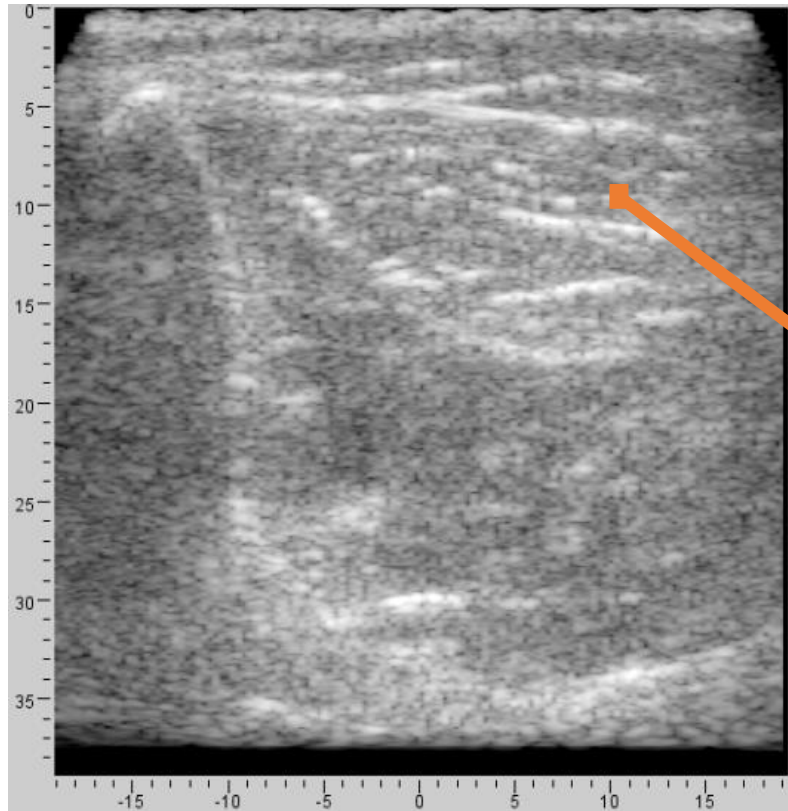


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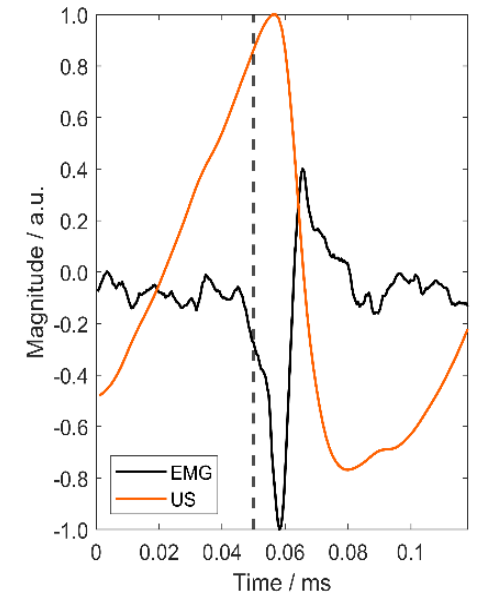
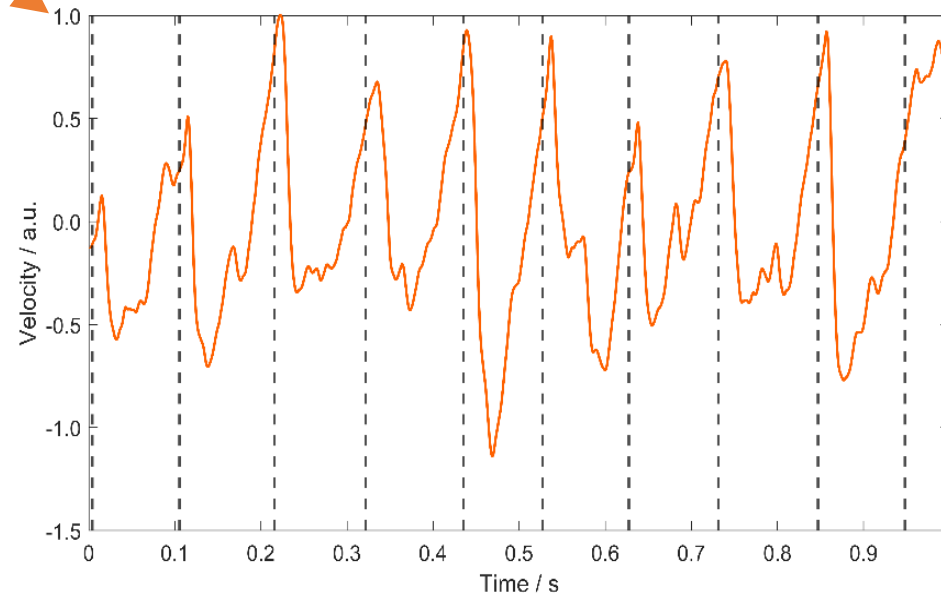
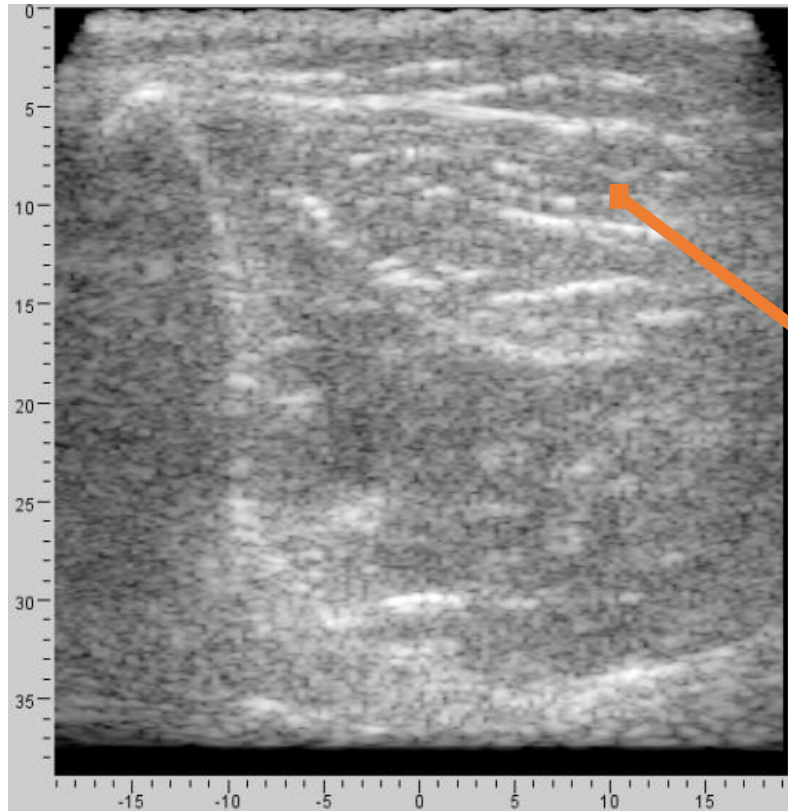
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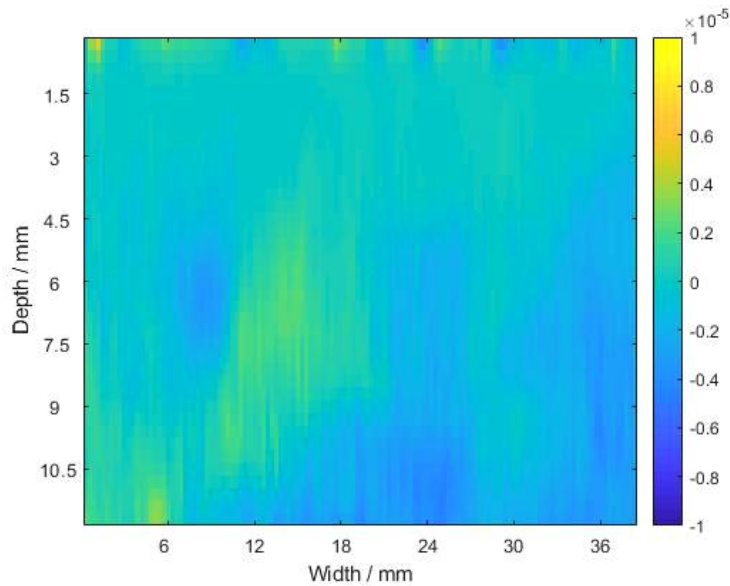
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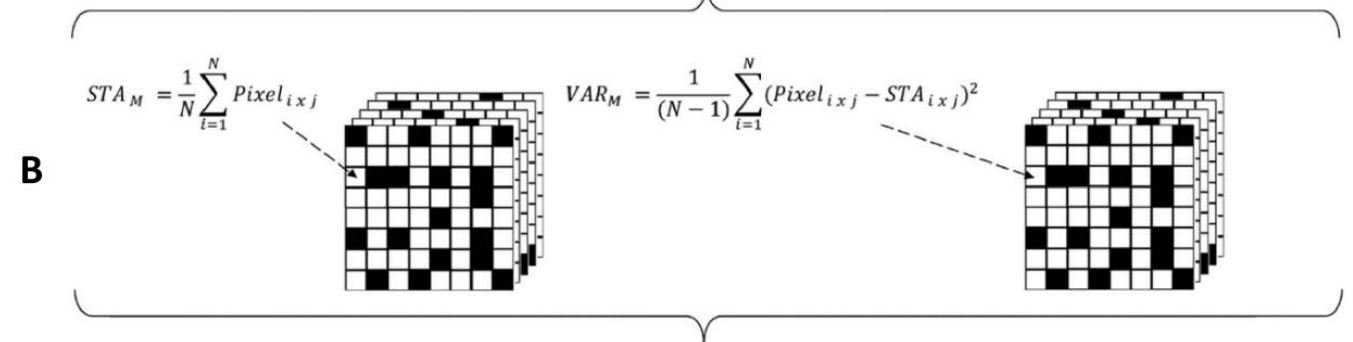
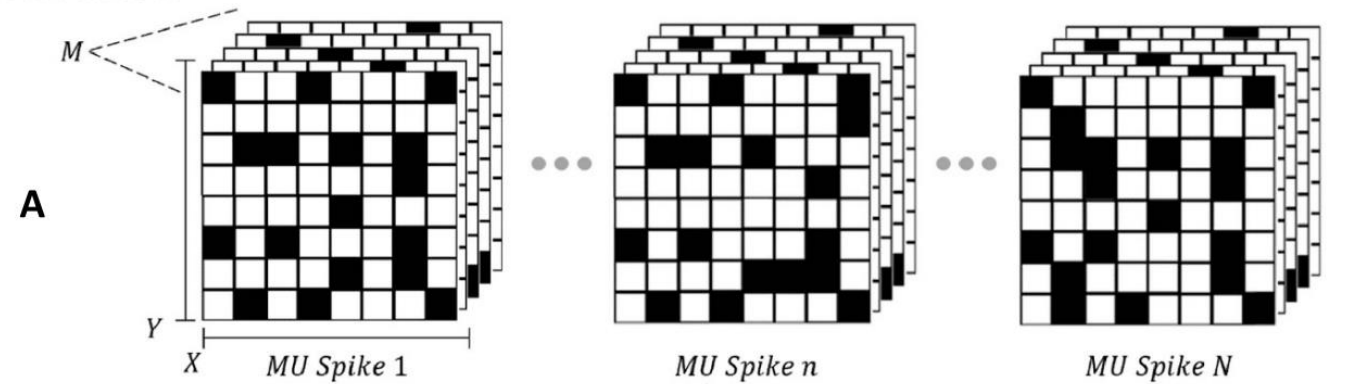
The start of our Investigation



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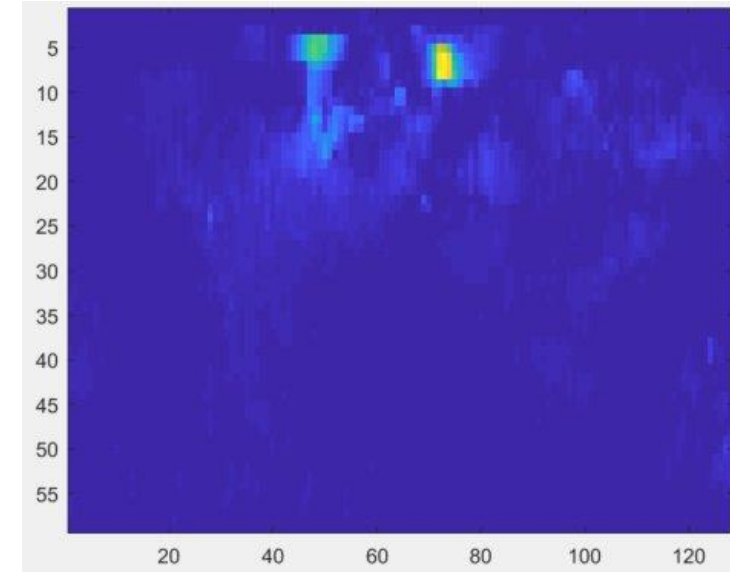
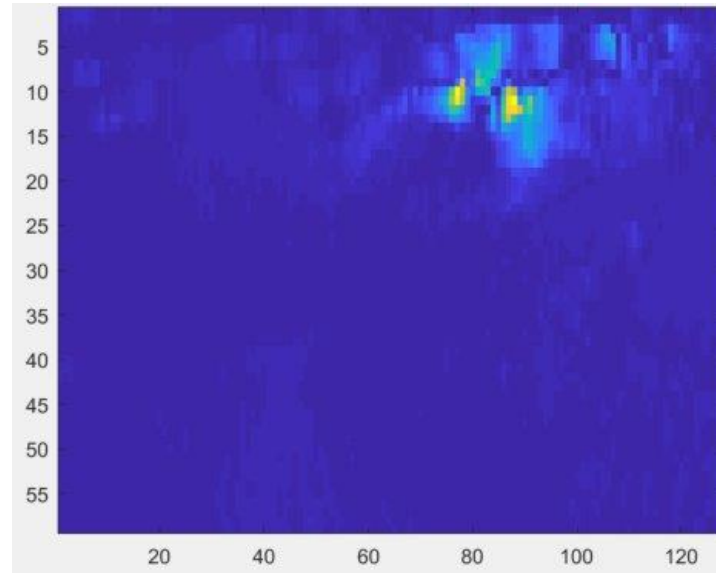
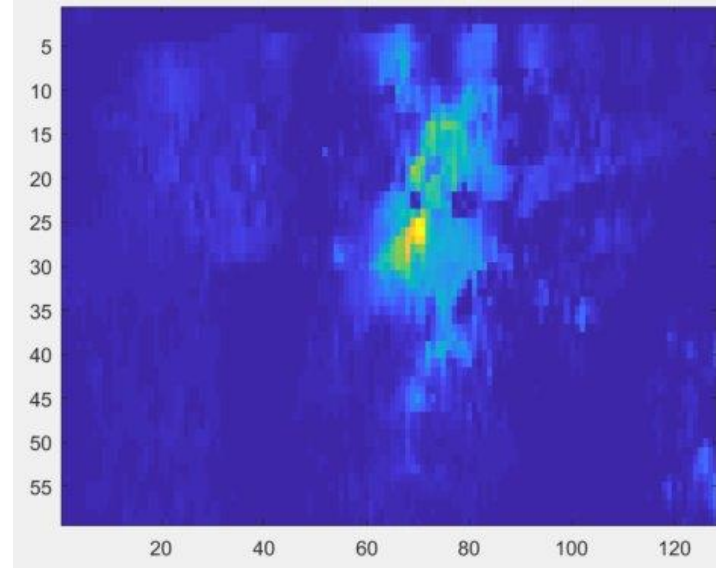
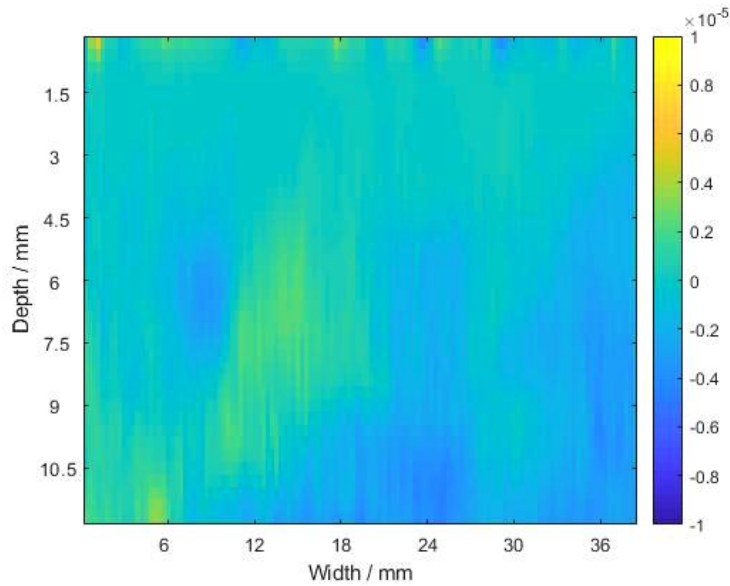
For each MU:



C

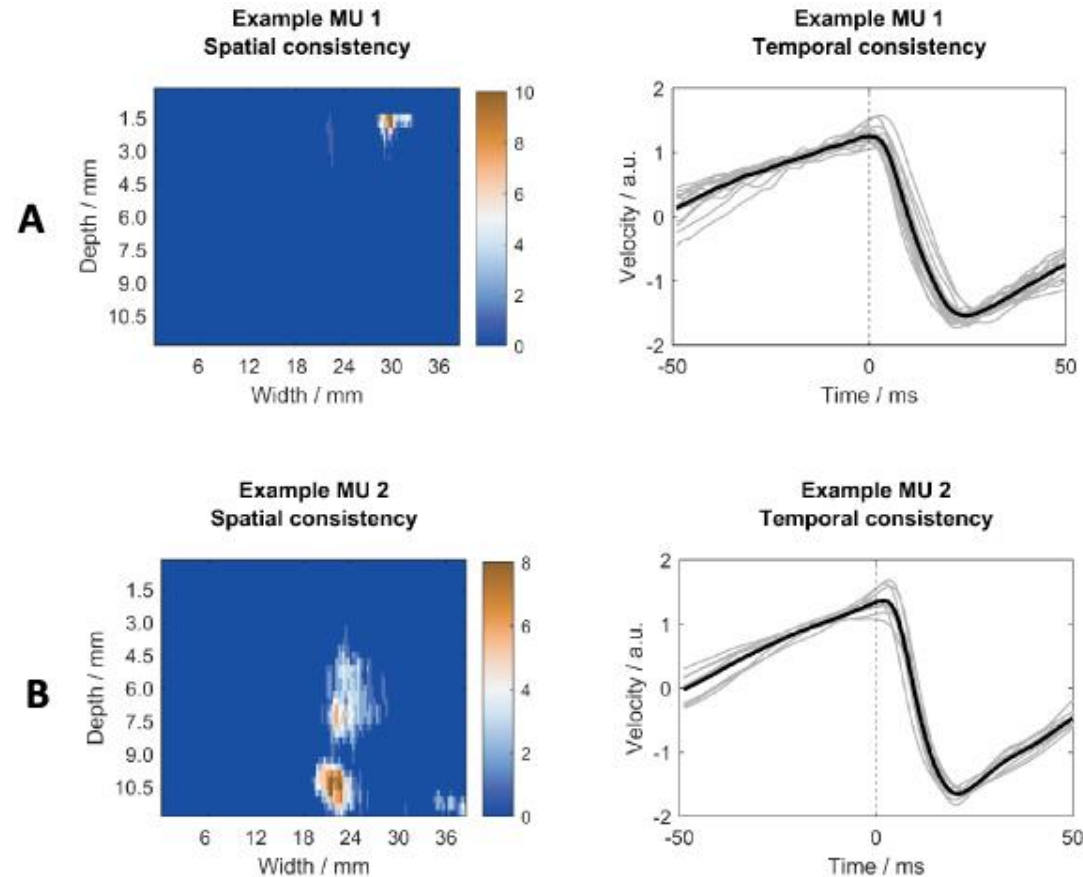
$$Direction = \sum_{i=1}^{\frac{M}{2}} \frac{STA_i}{VAR_i} - \sum_{j=\frac{M}{2}}^M \frac{STA_j}{VAR_j} \begin{cases} \text{Motor unit intensity} = \sum_{i=1}^M \frac{(STA_i)^2}{VAR_i} * (-1), \text{ if } Direction > 0 \\ \text{Motor unit intensity} = \sum_{i=1}^M \frac{(STA_i)^2}{VAR_i}, \text{ if } Direction < 0 \end{cases}$$

The start of our Investigation

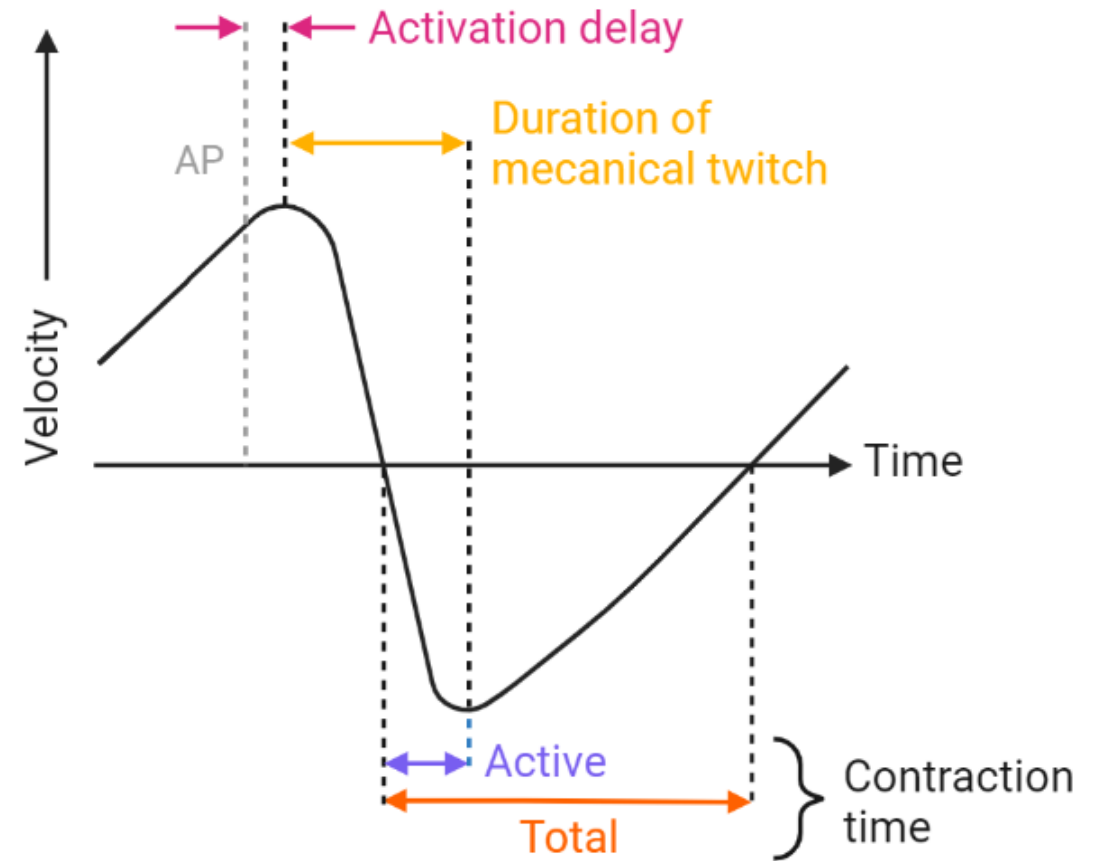
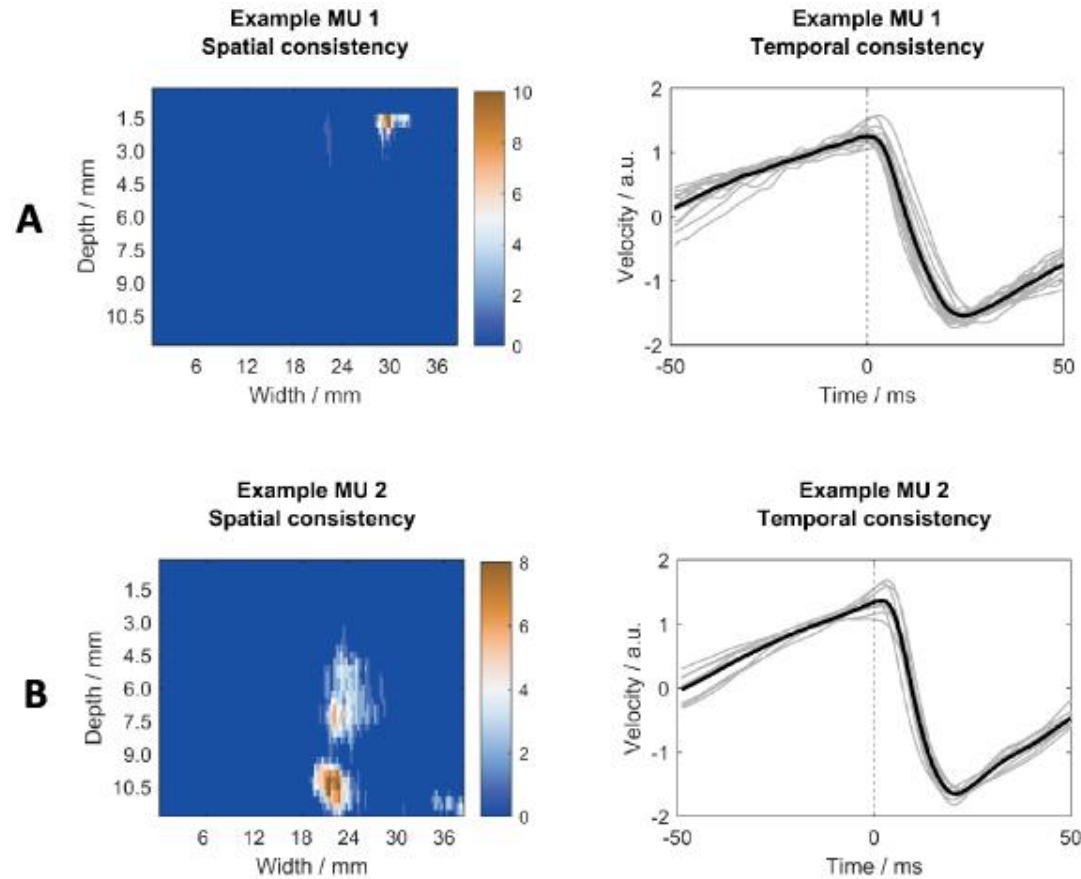


Emma Lubel et al. Kinematics of individual muscle units in natural contractions measured in vivo using ultrafast ultrasound, 2022

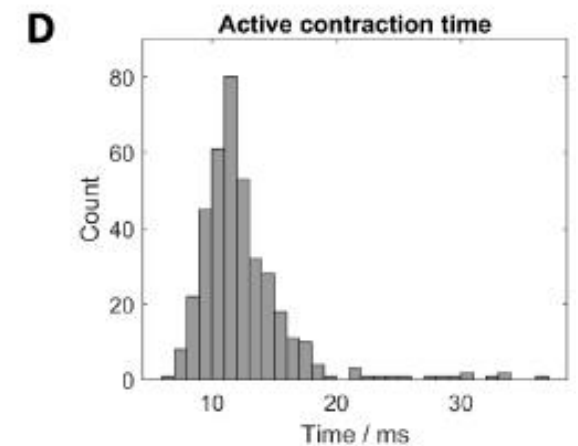
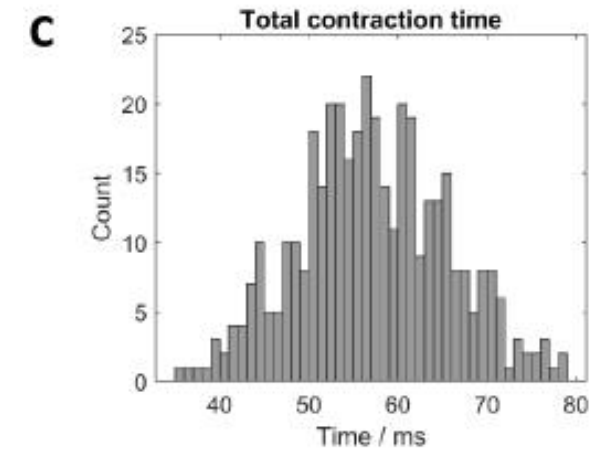
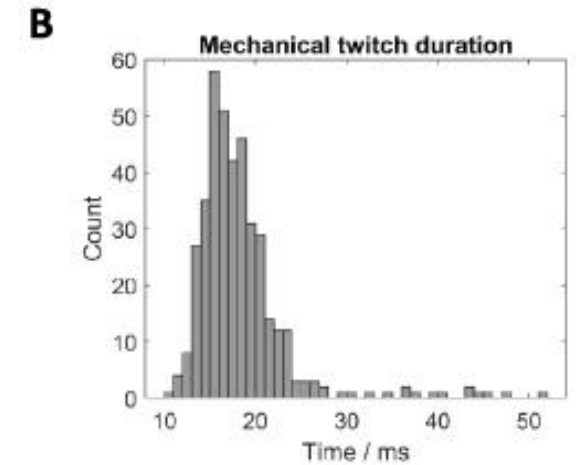
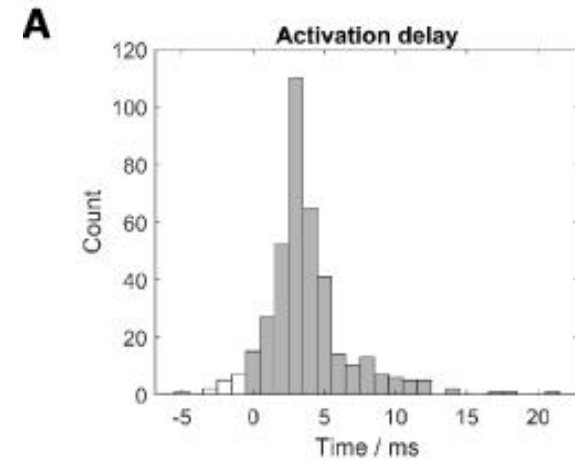
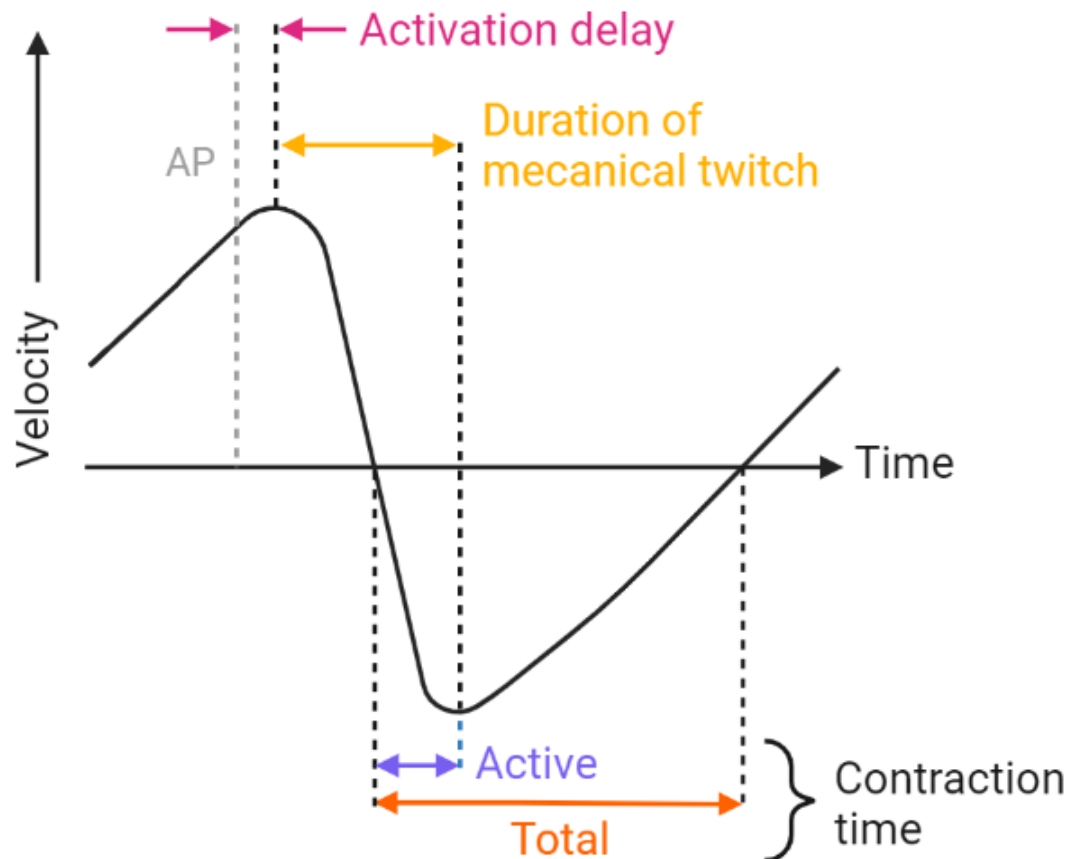
The start of our Investigation



The start of our Investigation



The start of our Investigation



Initial Conclusions

What worked

- 1) US is able to track individual twitch profiles during voluntary tetanic contractions.
- 2) Twitches are present (above noise level) both after STA and individually
- 3) US can track MUs in space along the plane as well as indicate some “motion territory”

Future Challenges

- 1) MU Twitches are not simple. They have varied and unique shapes
- 2) There is a lot of overlap between units. We don't really know how they interact

Initial Conclusions

What worked

- 1) US is able to track individual twitch profiles during voluntary contractions.
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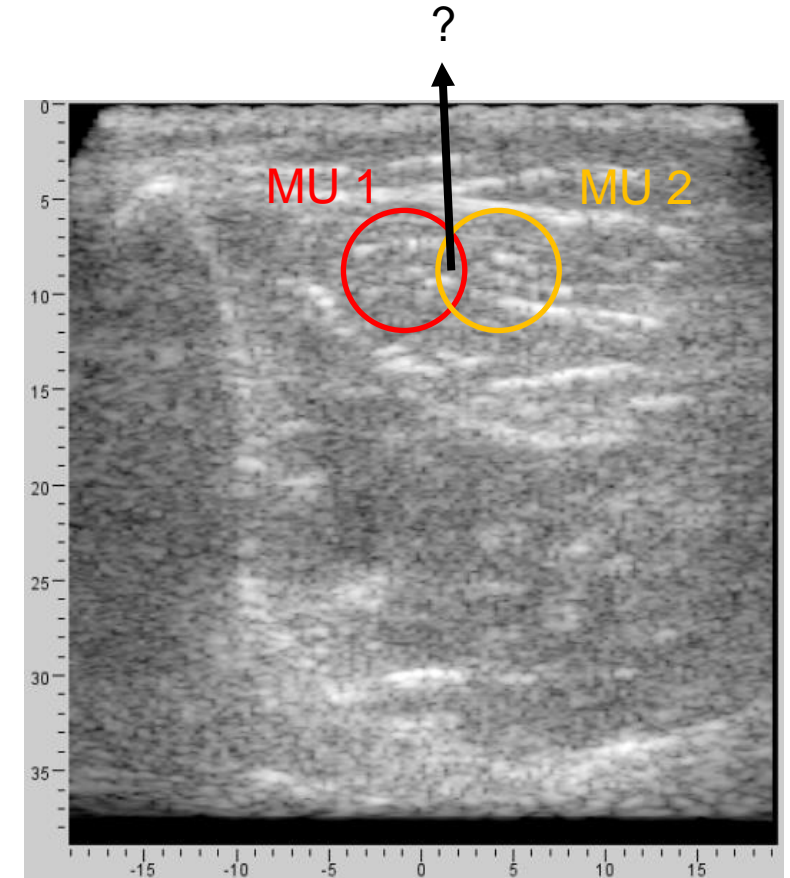
Future Challenges

- 1) MU Twitches are not simple. They have varied and unique shapes
- 2) **There is a lot of overlap between units. We don't really know they interact**

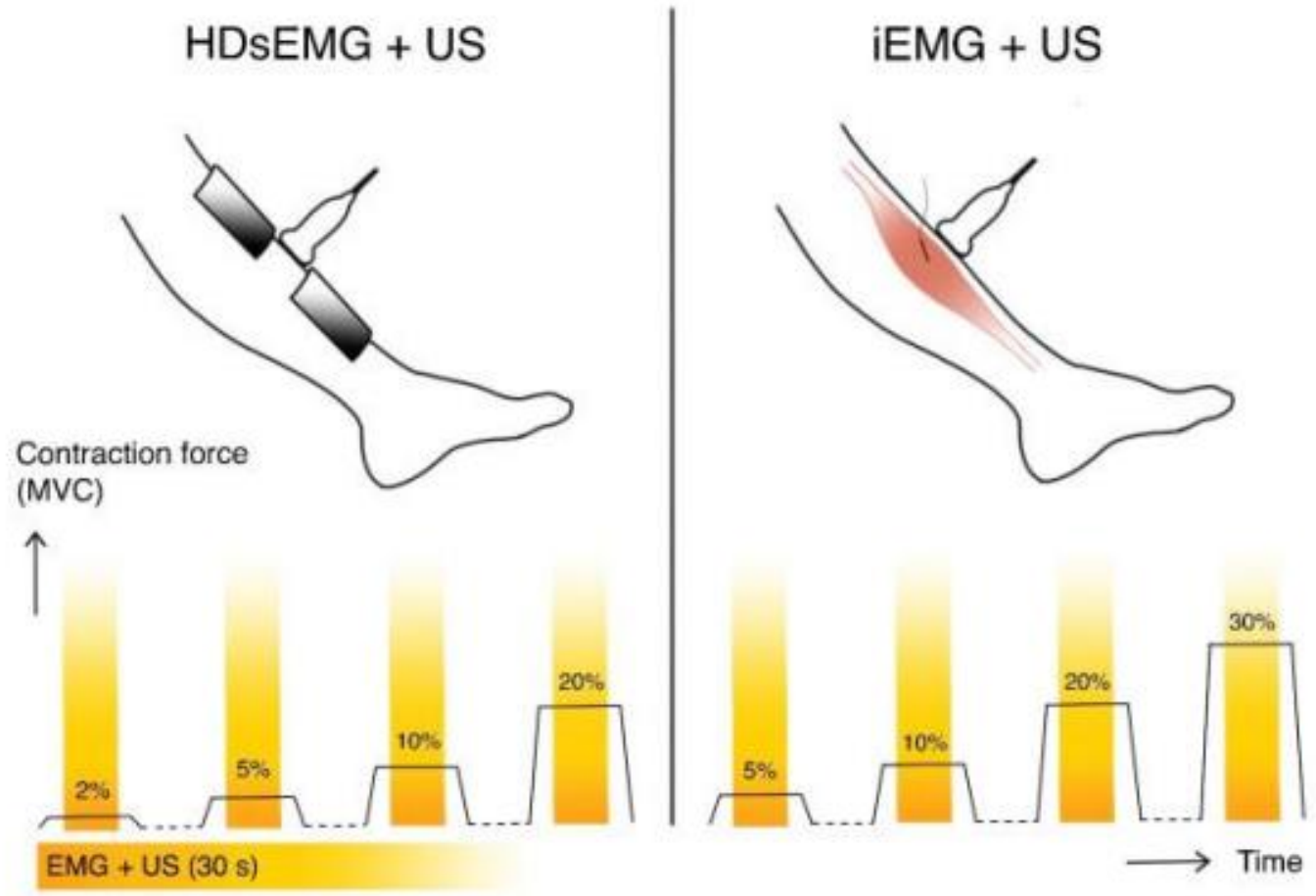
Follow-up investigation - Linearity

Questions

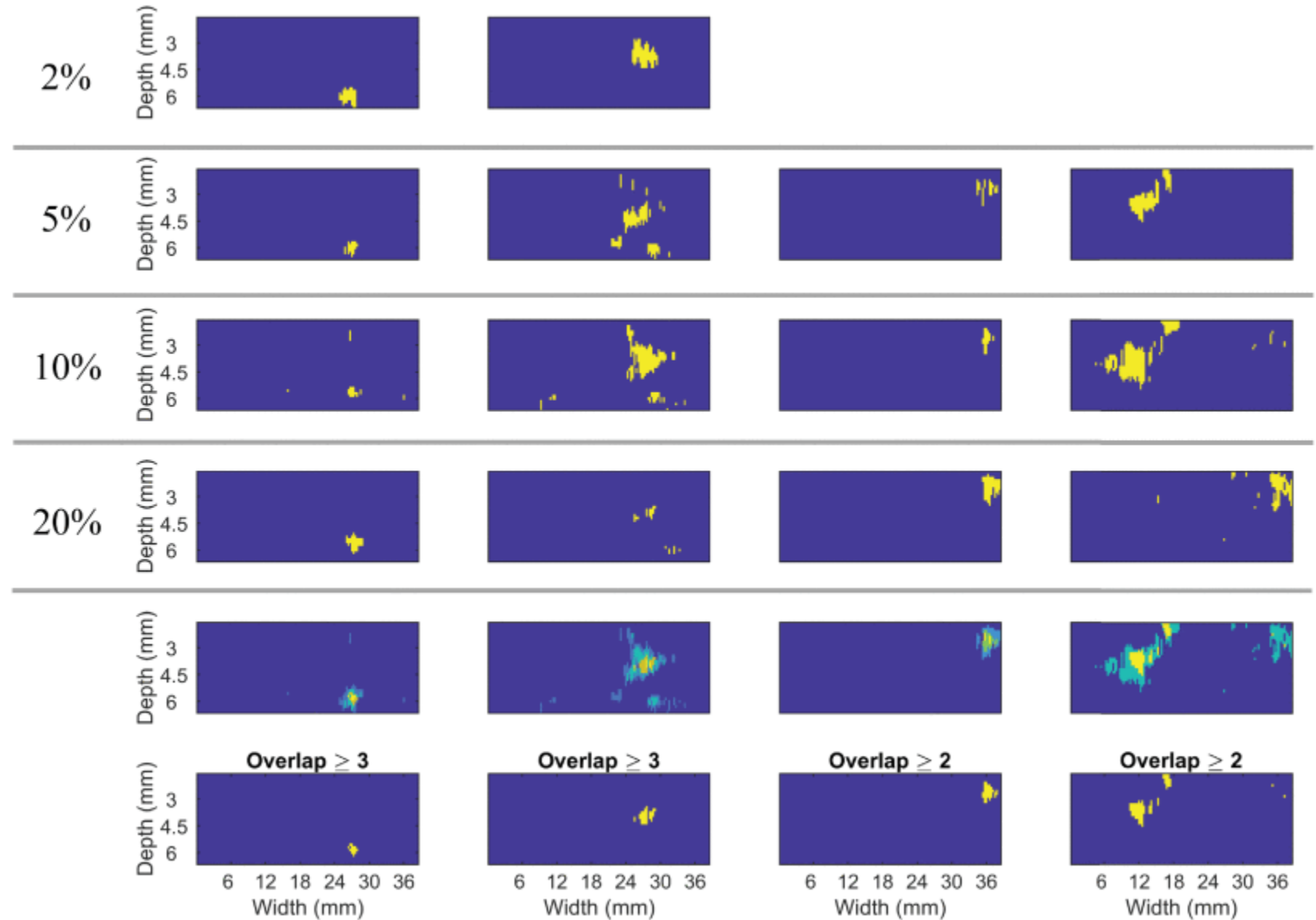
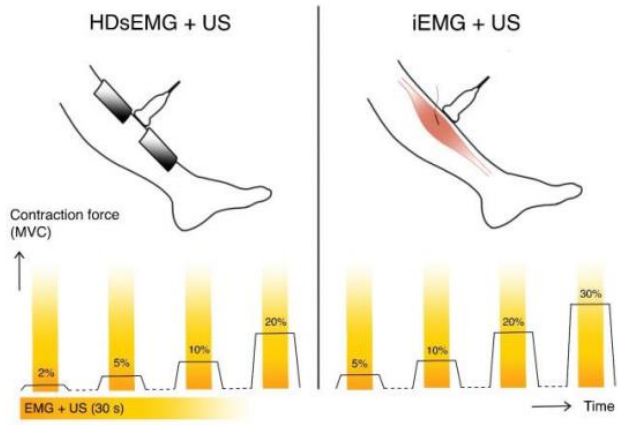
- How linear, if at all, is the mechanical twitch summation?
- Do MU twitch profiles change at different force levels?
- Do MU twitch profiles change with recruitment order?



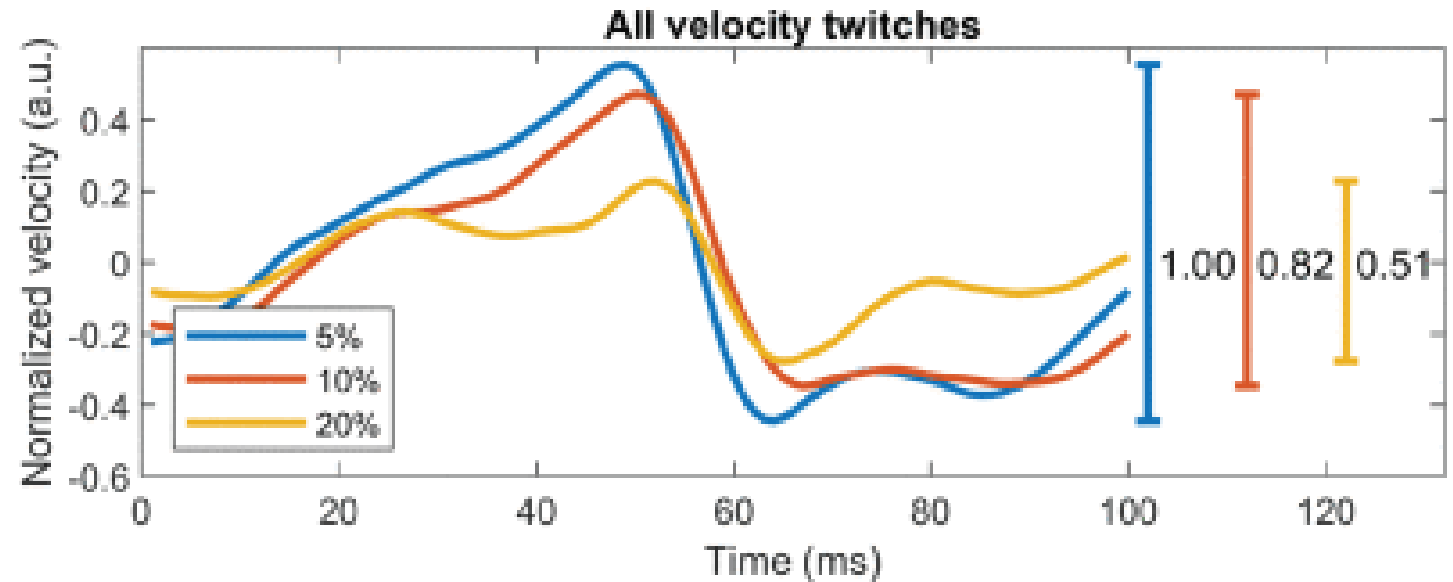
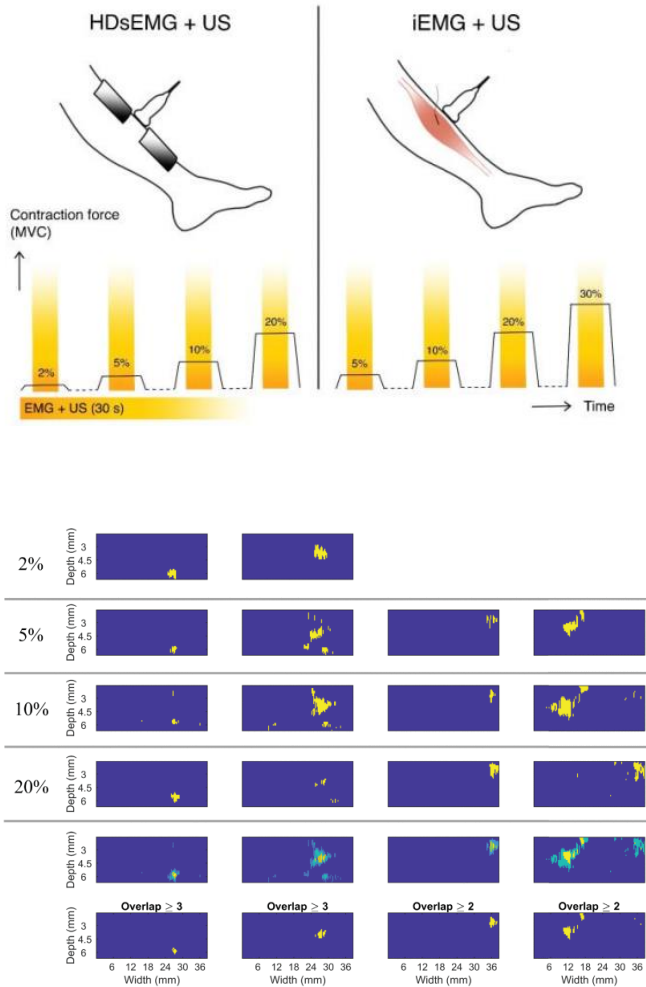
Twitches Changes at increasing force levels



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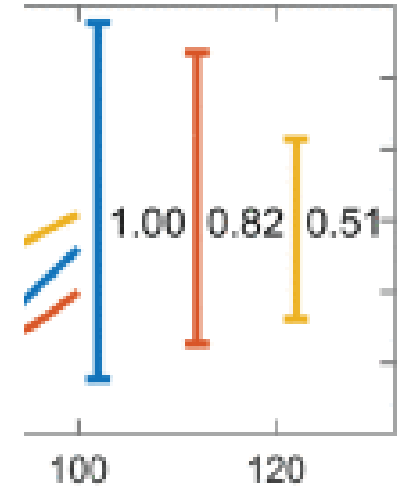
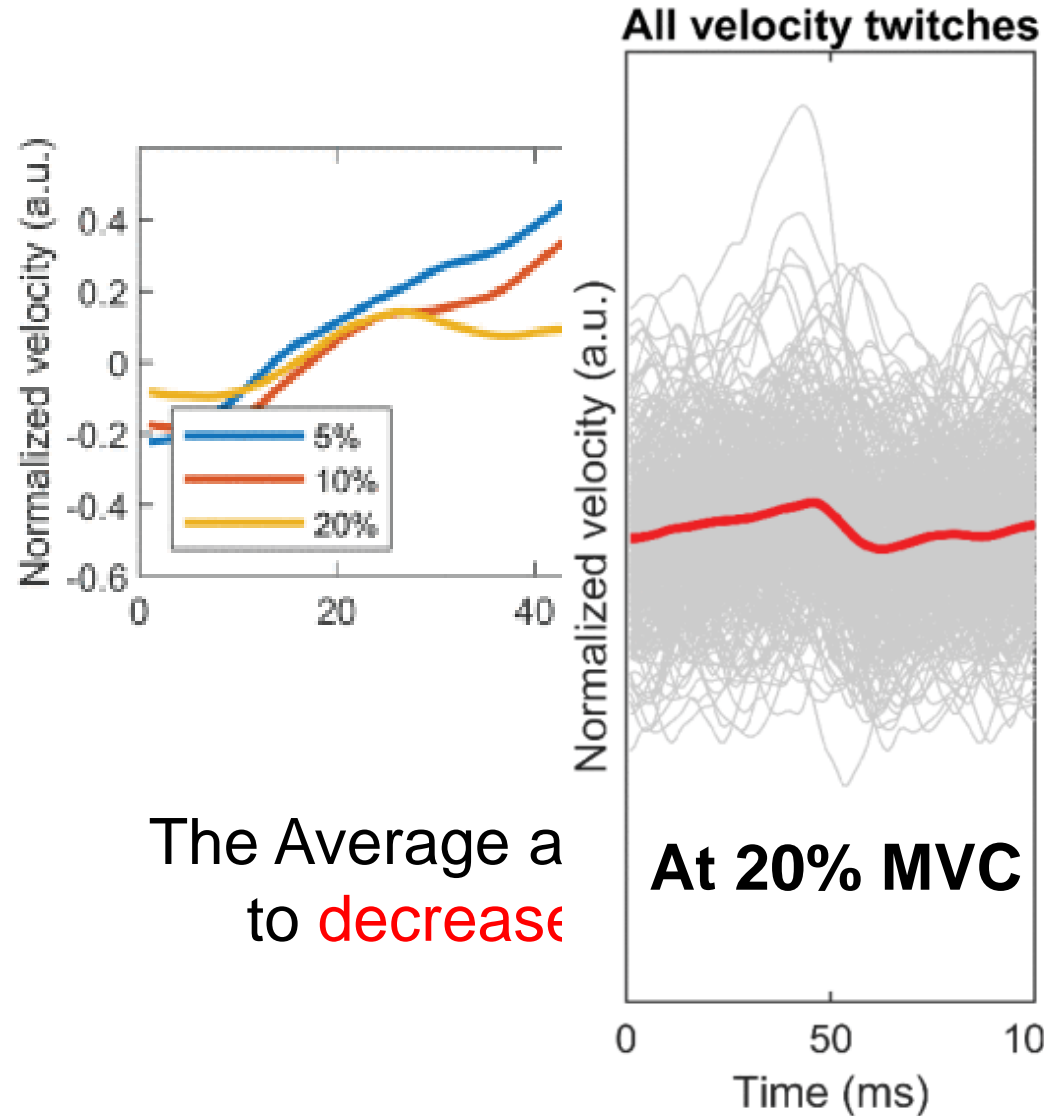
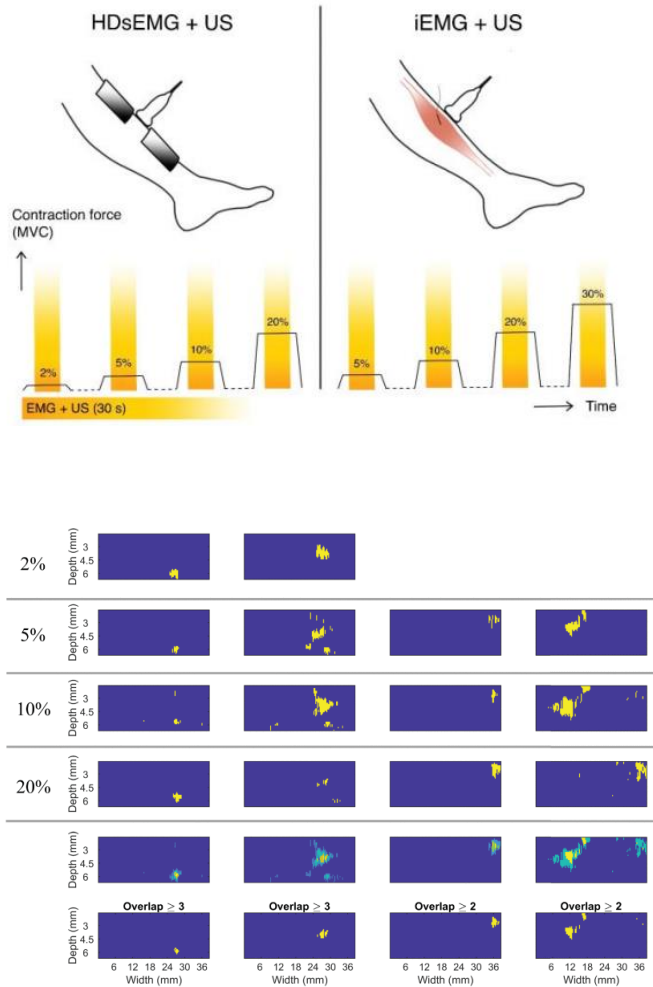


Twitches Changes at increasing force levels



The Average amplitude of all twitches seem to **decrease** with **higher** force levels?

Twitches Changes at increasing force levels

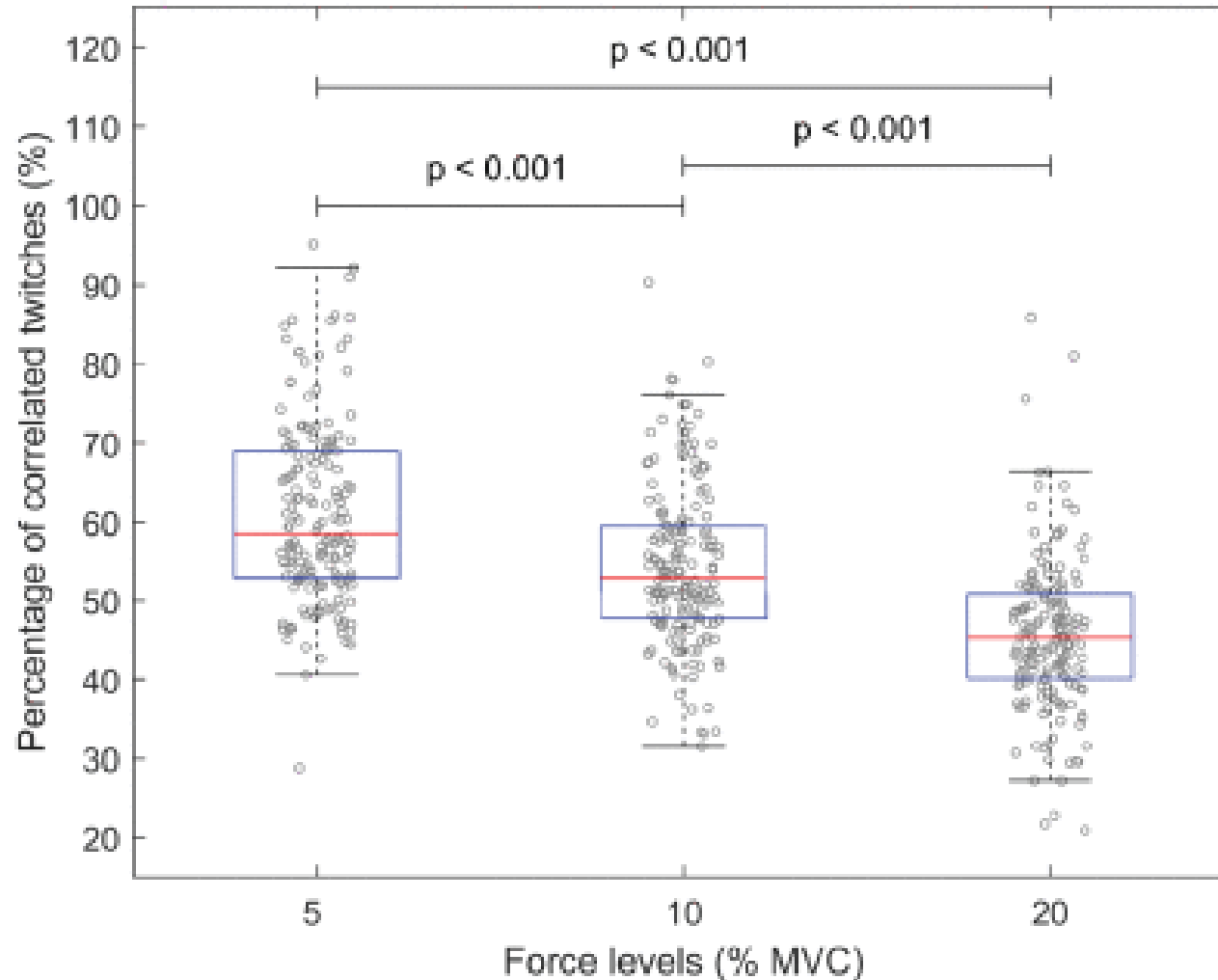


The Average a to decrease

ches seem levels?

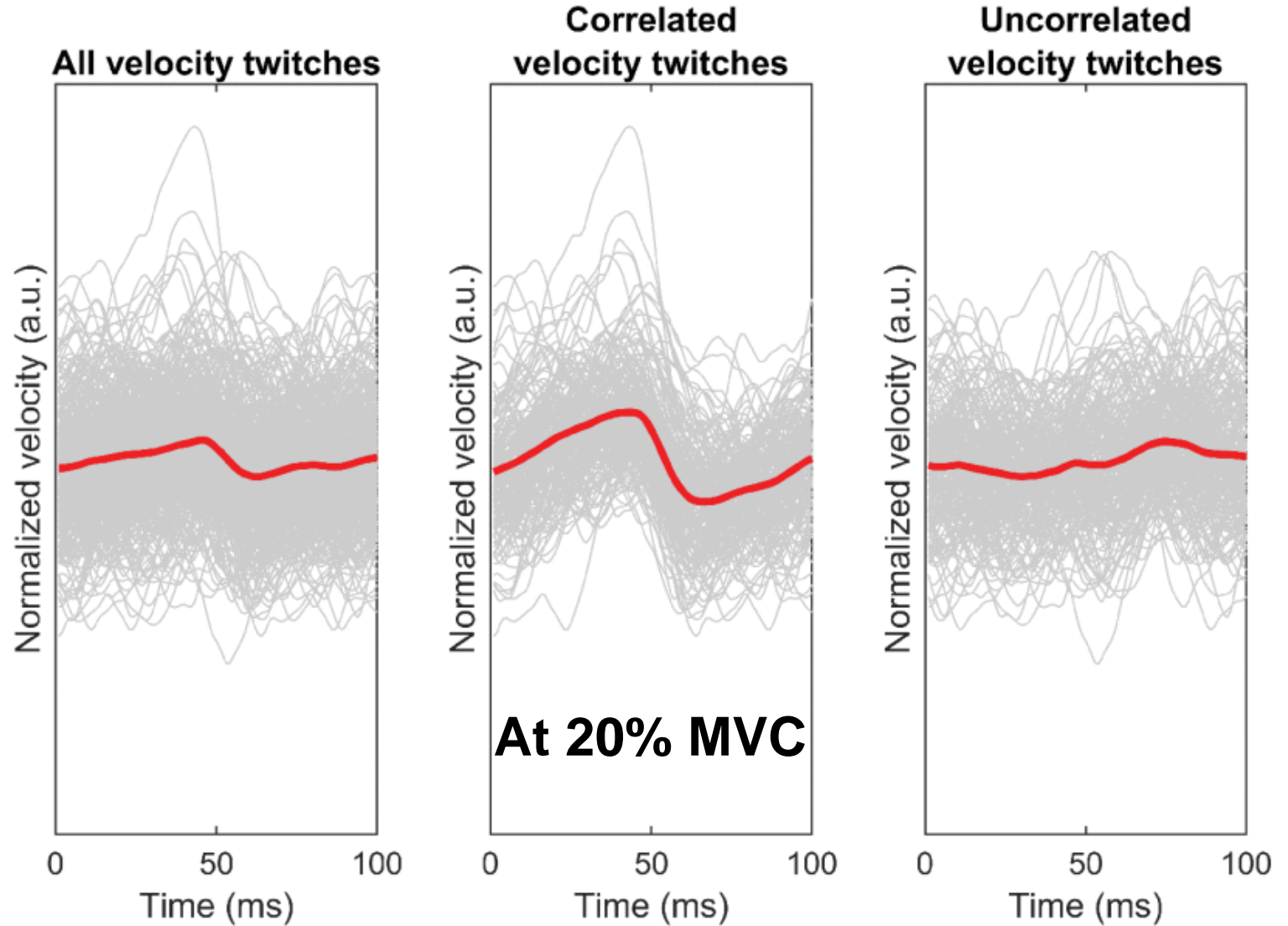
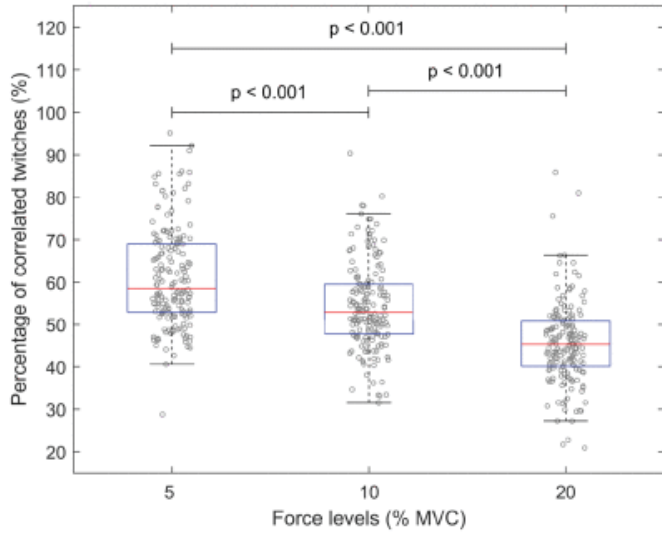
Twitches Changes at increasing force levels

Correlation between individual spikes of a MU

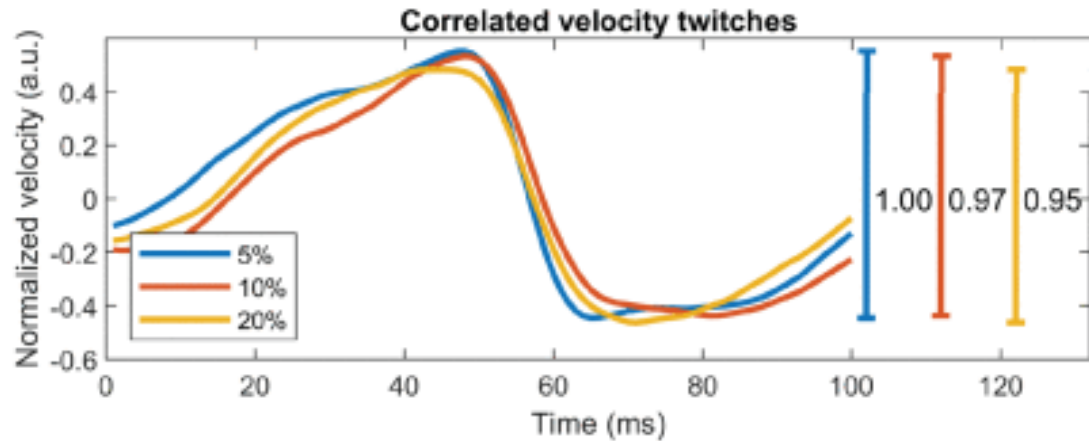
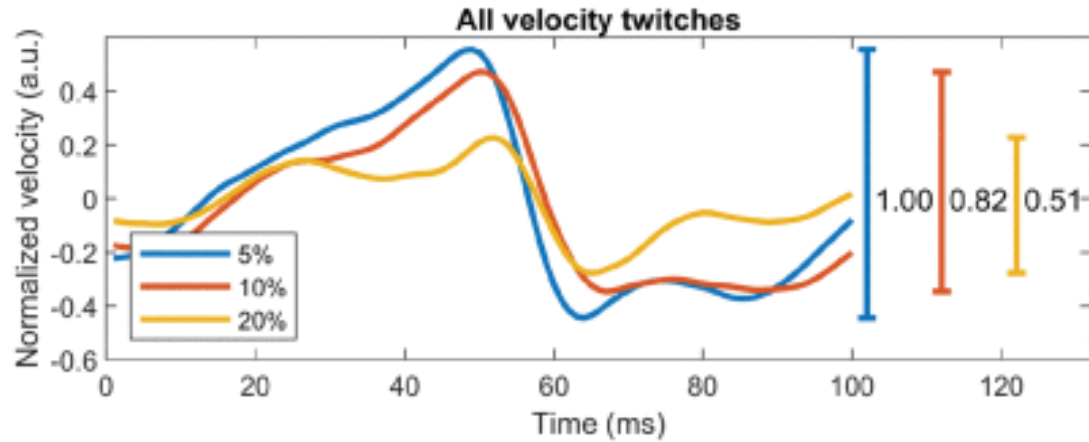


Twitches Changes at increasing force levels

Correlation between individual spikes of a MU



Twitches Changes at increasing force levels



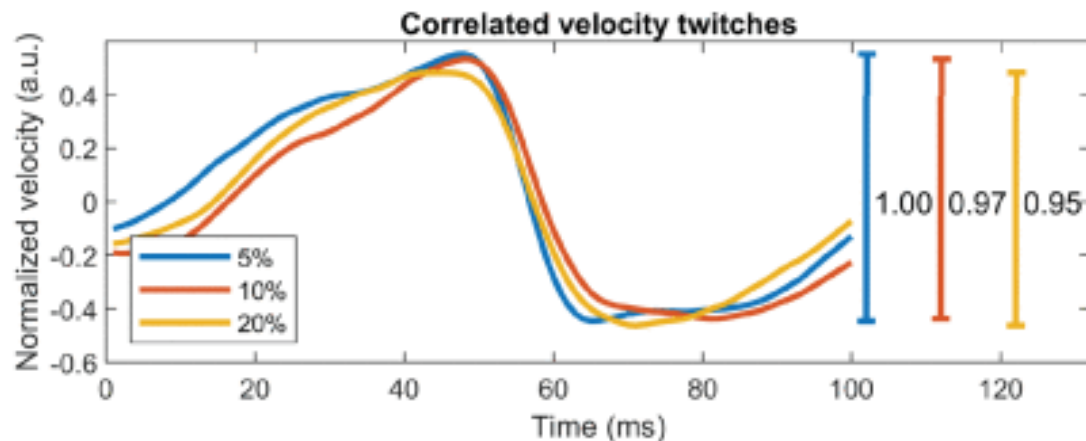
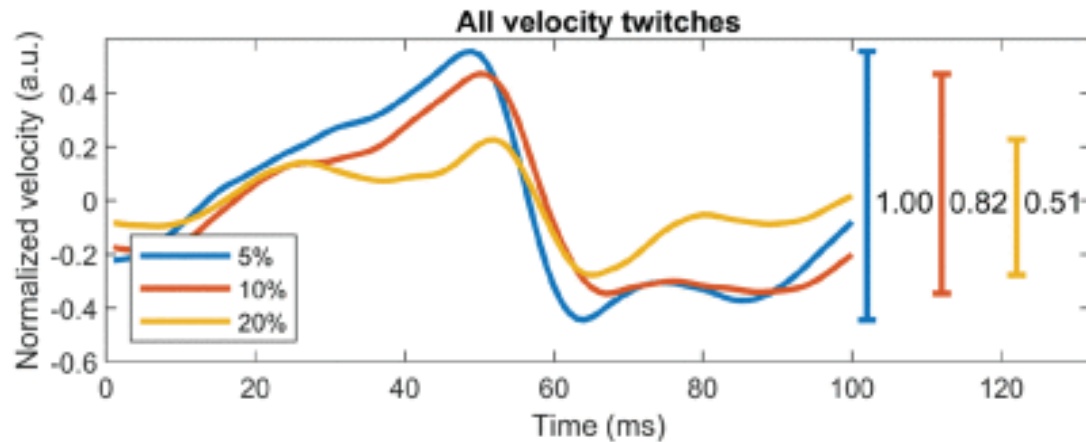
Twitches Changes at increasing force levels

Questions.

Do MU twitch profiles change at different force levels?

Do not seem to cause significant changes in the average “standard” twitch amplitude/shape

Do introduce more uncorrelated twitches to a spike train



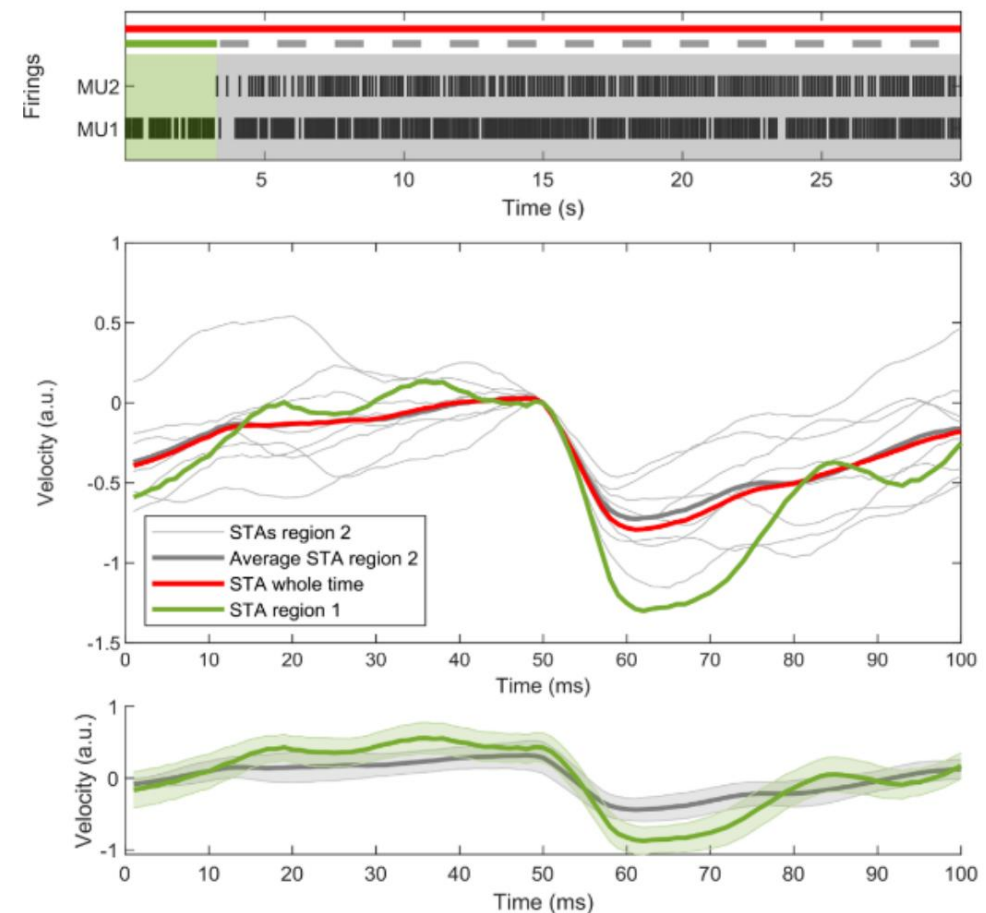
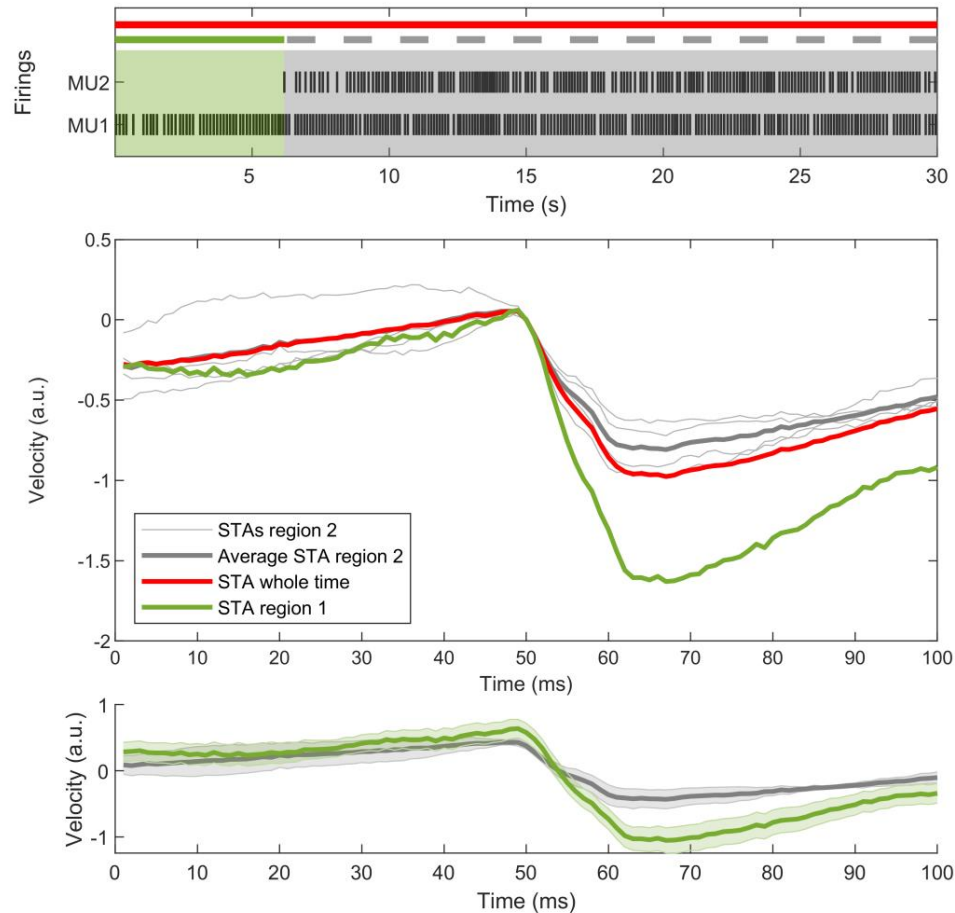
Twitches Changes due to Recruitment order



Given US gives MU spatial location can we analyse units close to each other.

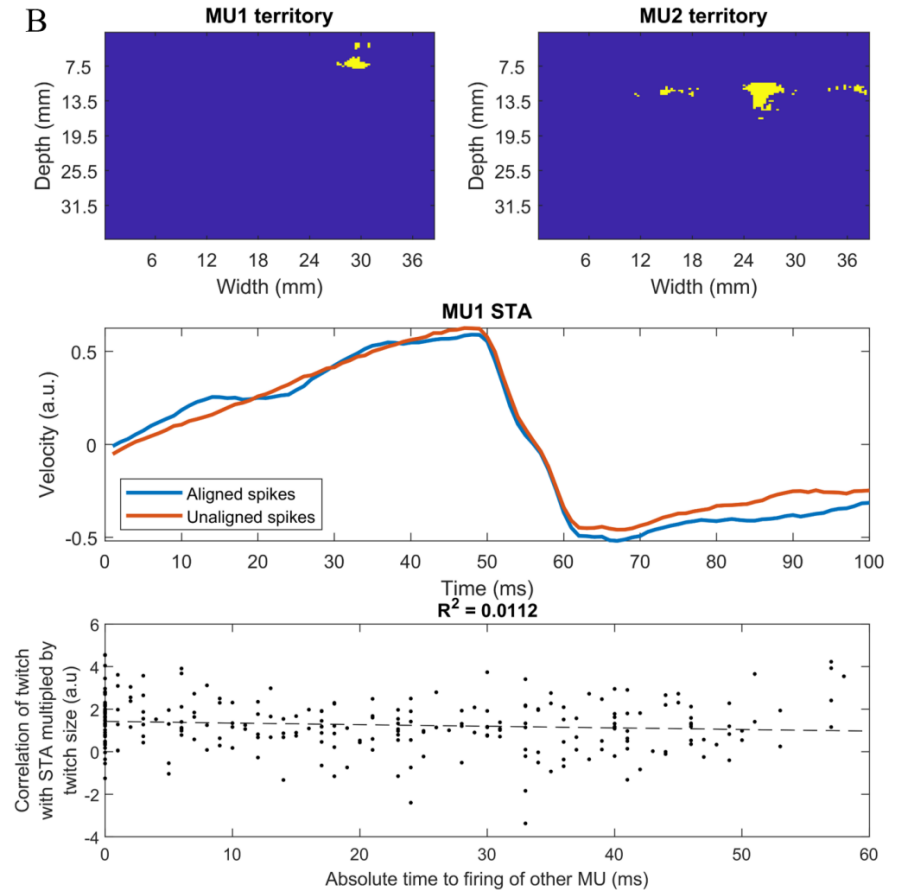
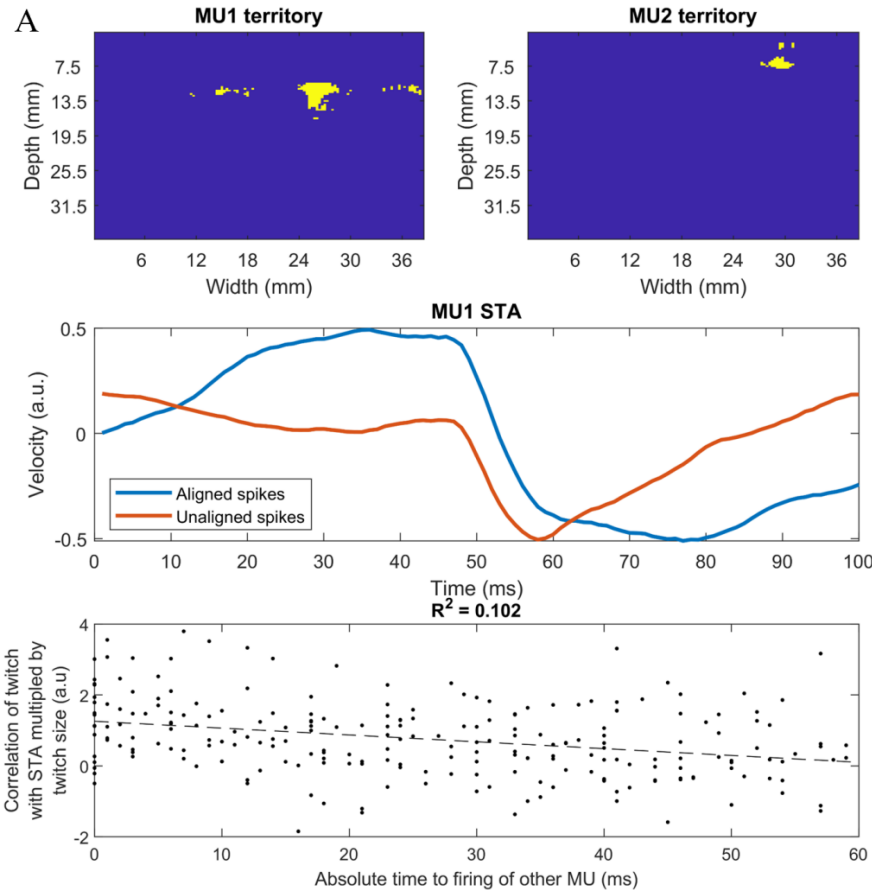
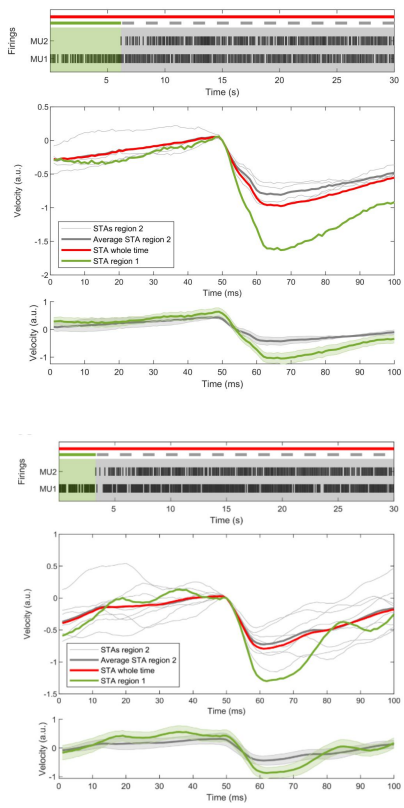
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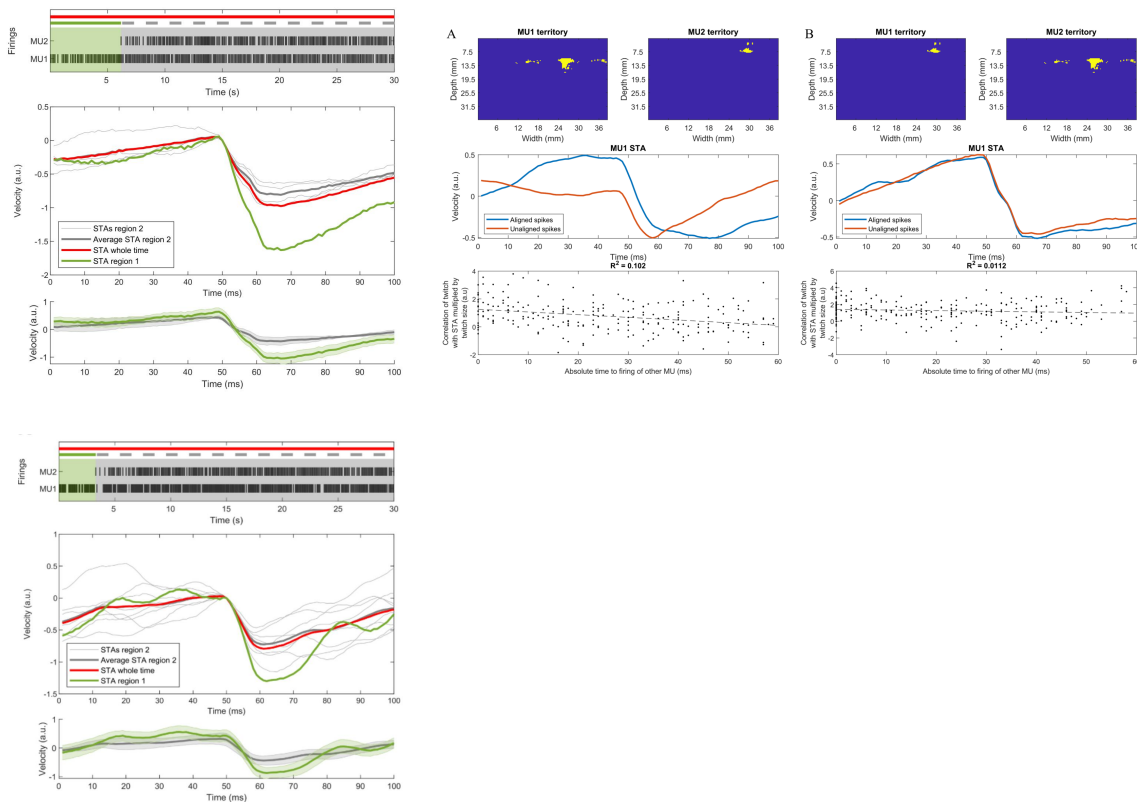
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Question.

1. How linear, if at all, is the mechanical twitch summation?
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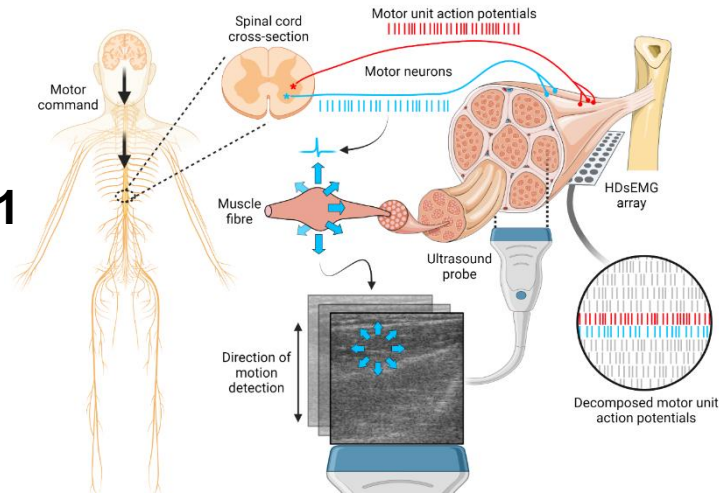
Twitches from spatially close MUs **do affect each other**

Influence from spatially close MUs is **not symmetrical**, and **may be modulated by recruitment order**

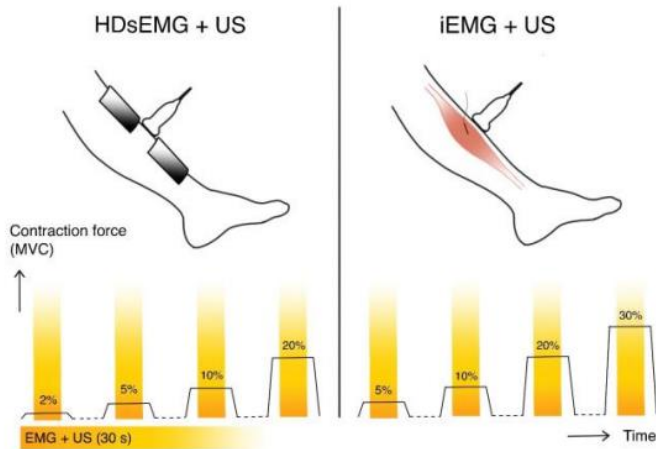


MU decomposition with only US

Study 1

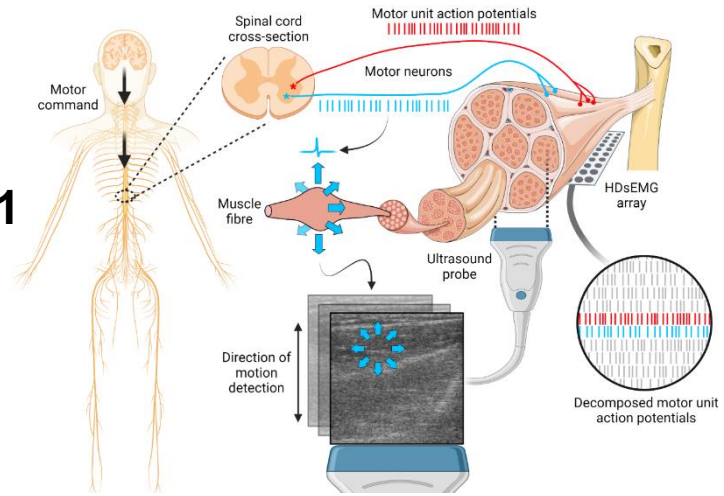


Study 2

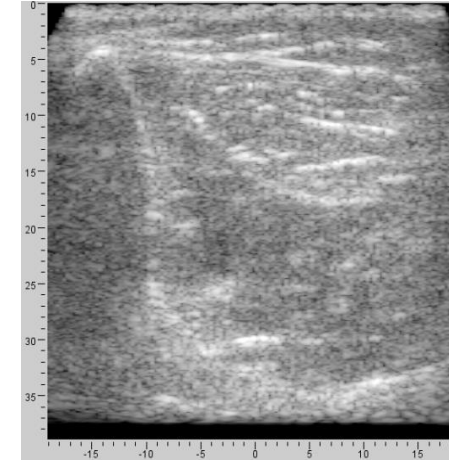
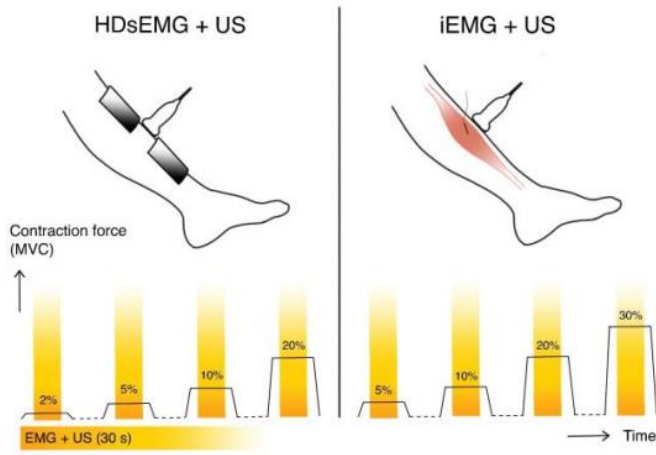


MU decomposition with only US

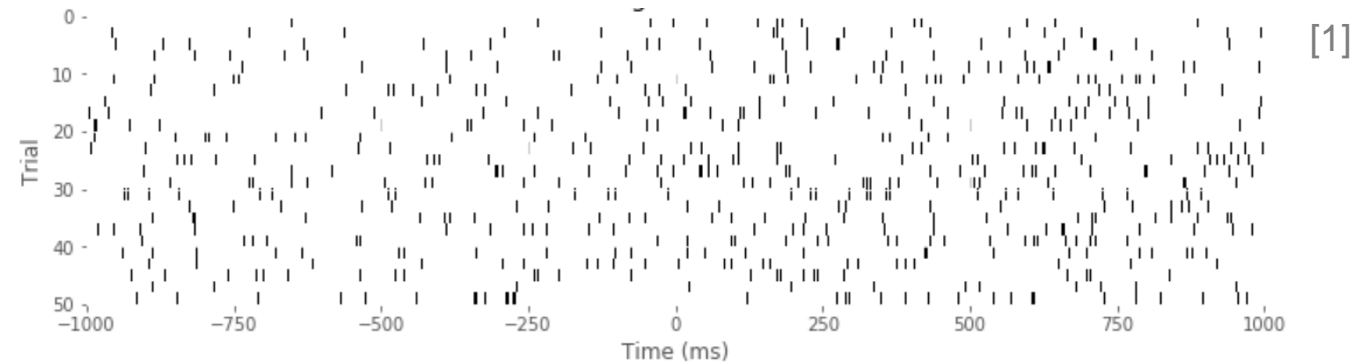
Study 1



Study 2



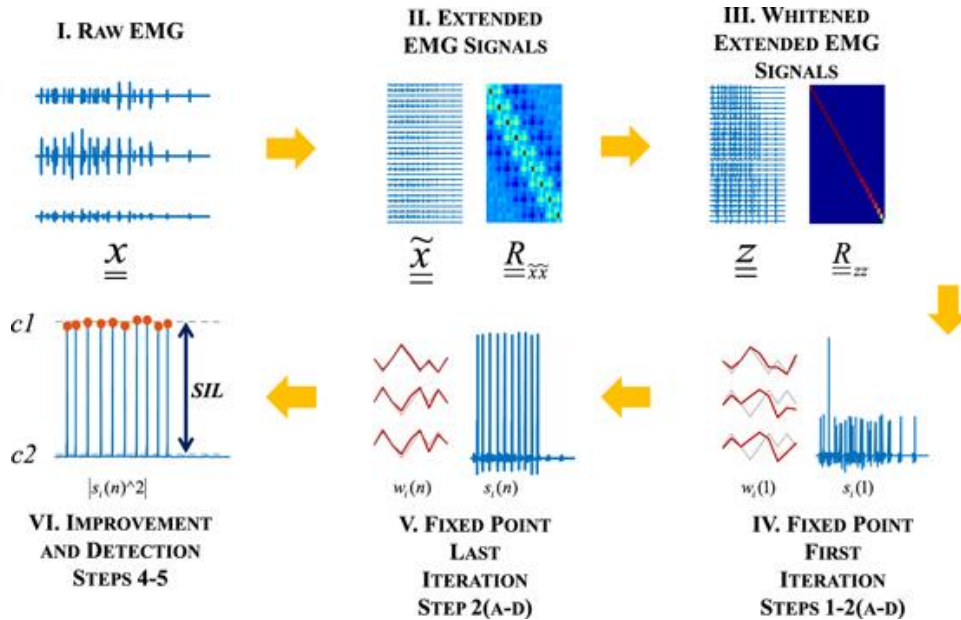
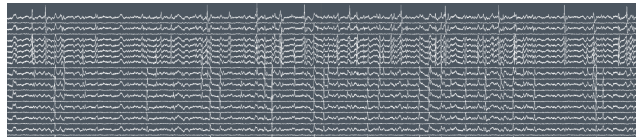
Magic?



[1] <https://mark-kramer.github.io/Case-Studies-Python/10.html>

MU decomposition with only US

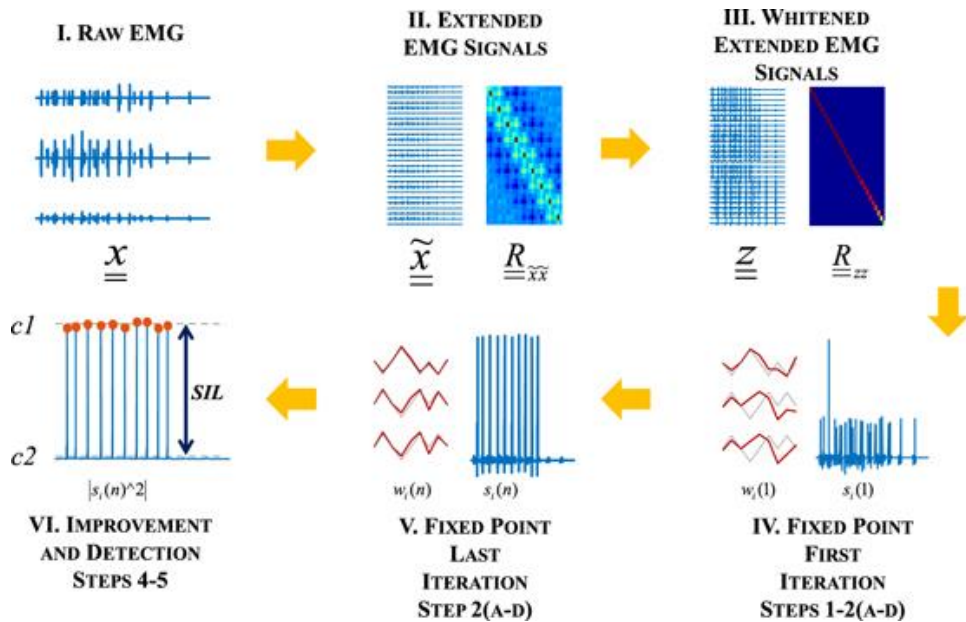
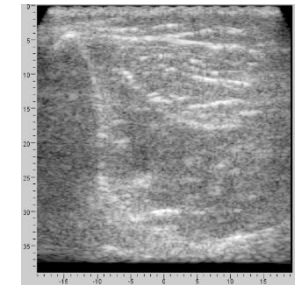
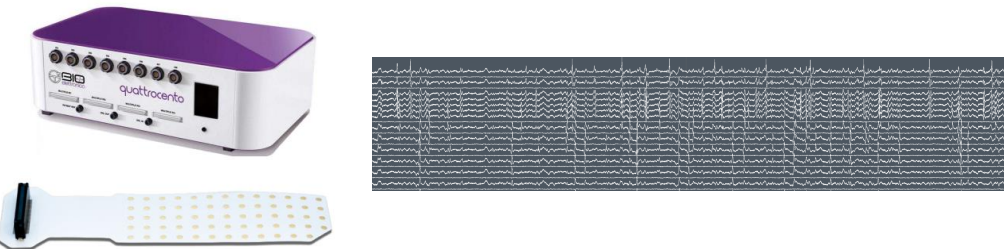
Given our Experience with EMG.



[1]

MU decomposition with only US

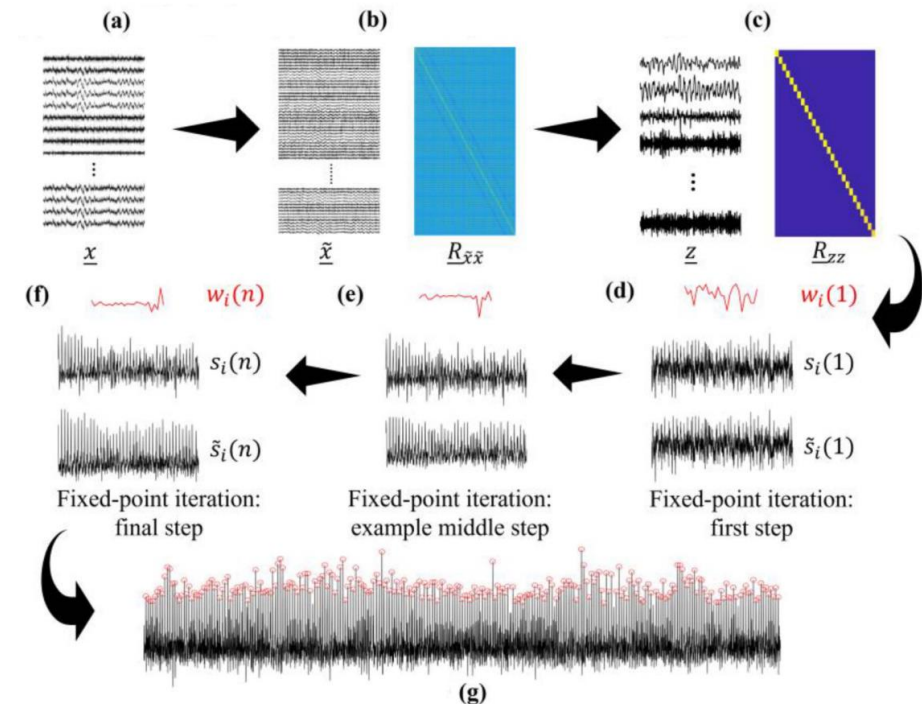
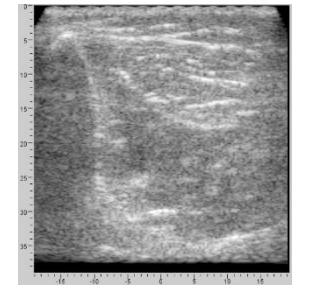
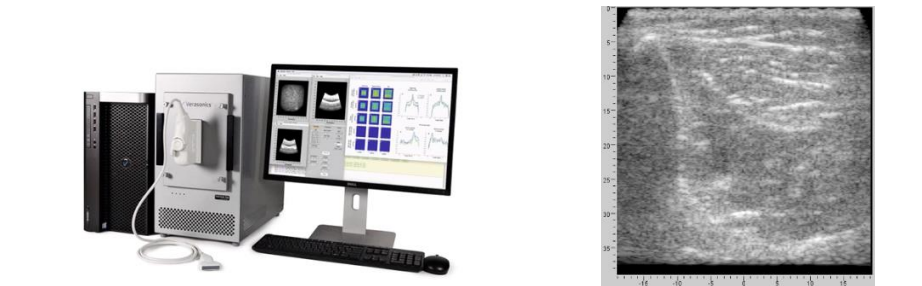
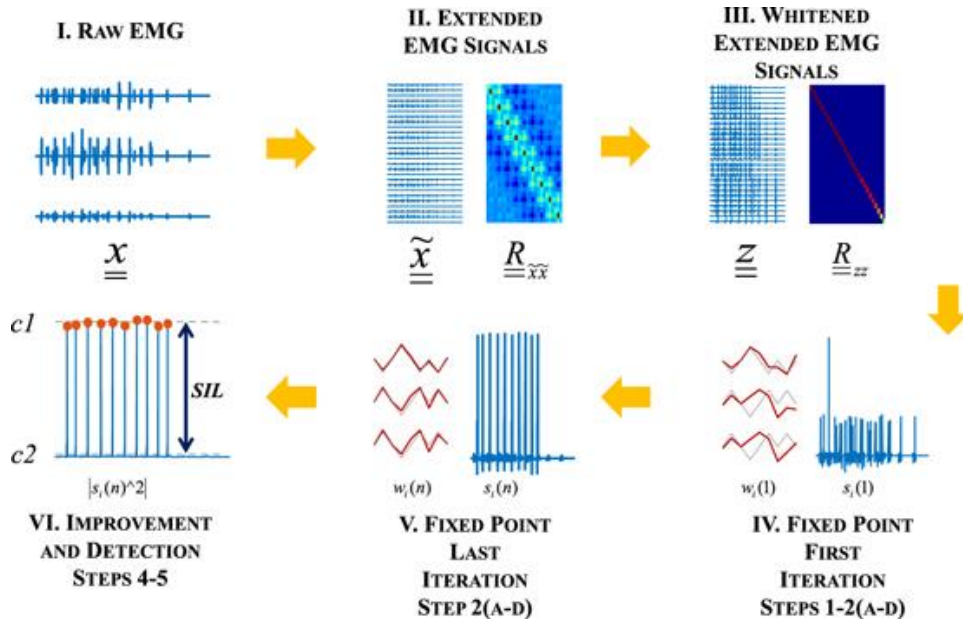
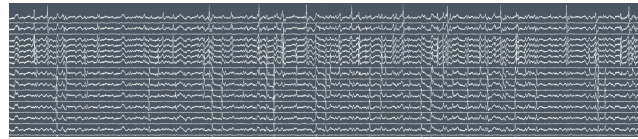
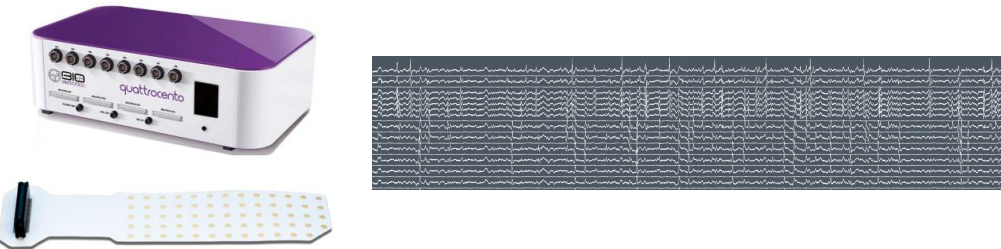
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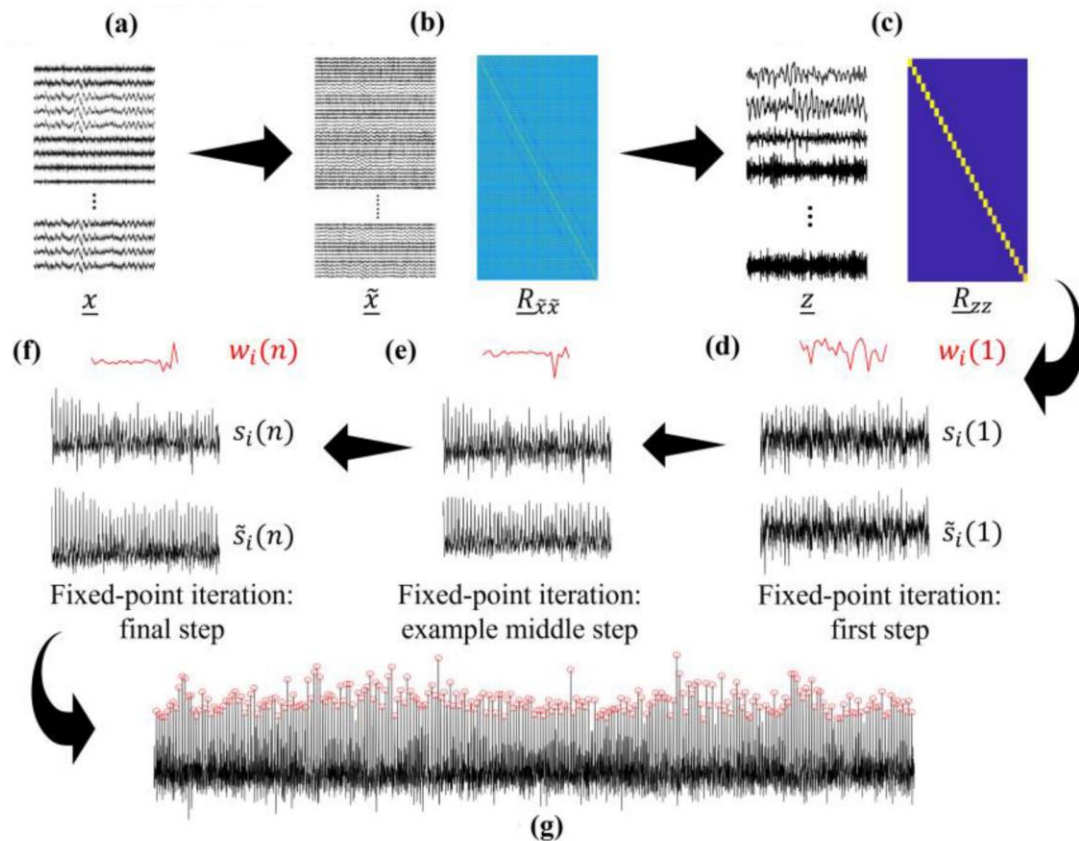
MU decomposition with only US

Given our Experience with EMG.

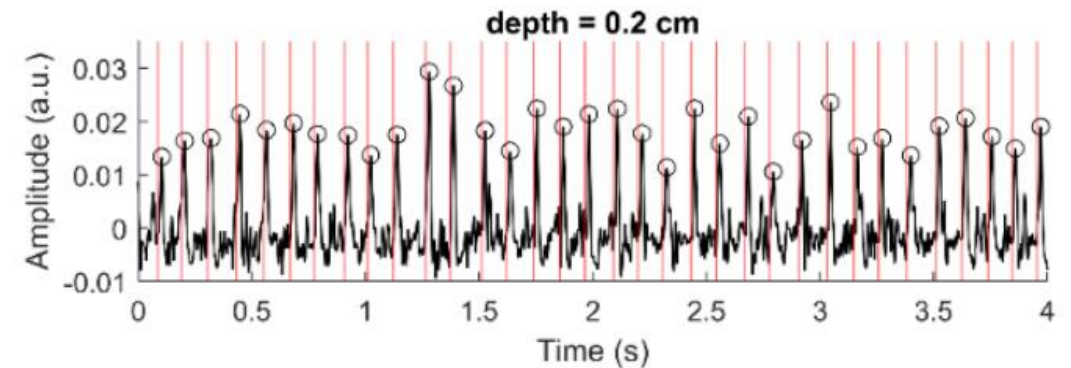


[1] Francesco Negro et al. Multi-channel intramuscular and surface EMG decomposition by convolutive blind source separation, 2016

MU decomposition with only US



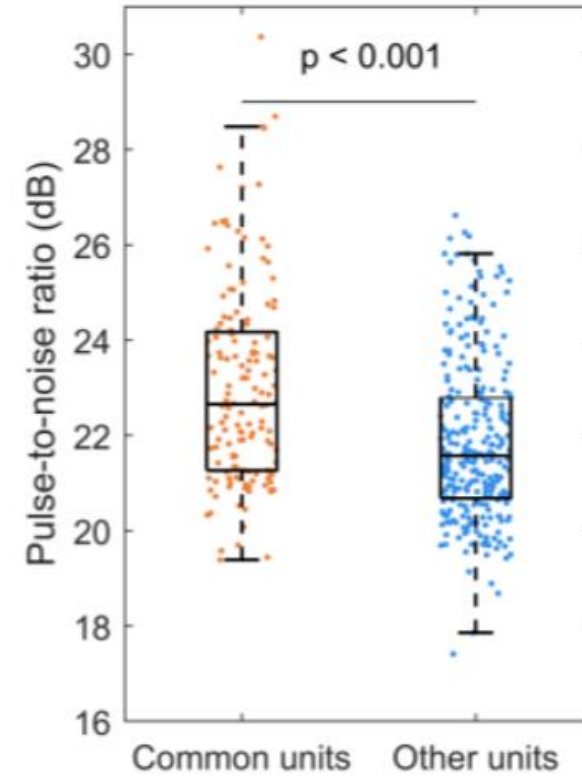
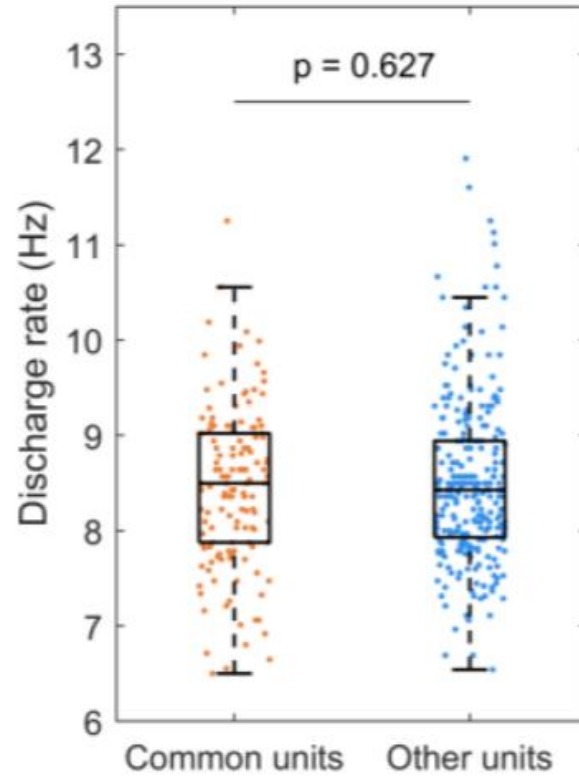
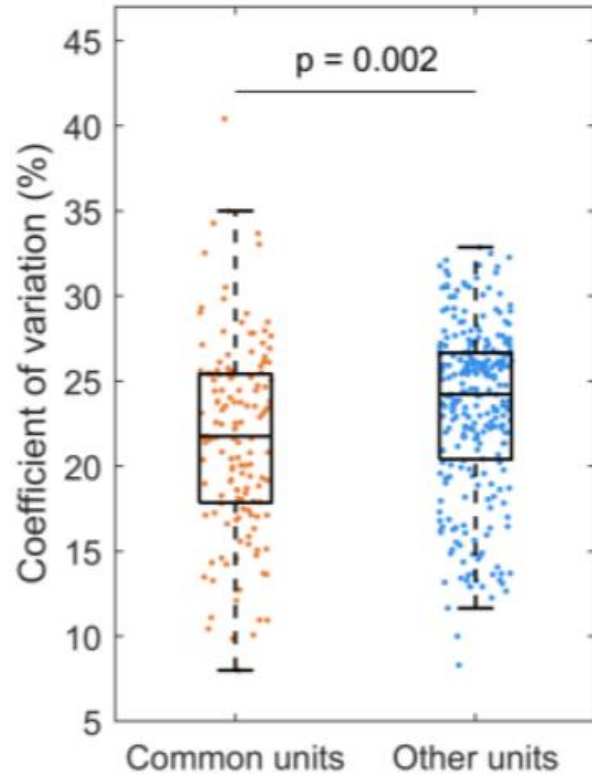
Using our Dataset of Simultaneous HDsEMG and US



Black – US decomposed
Red – HDsEMG decomposed

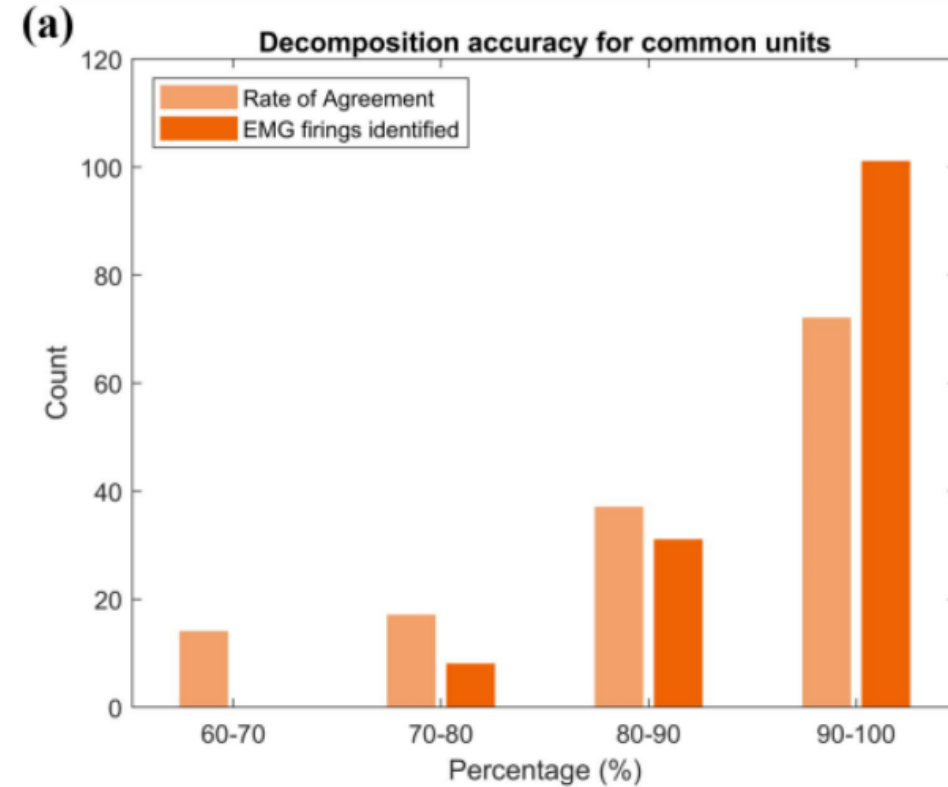
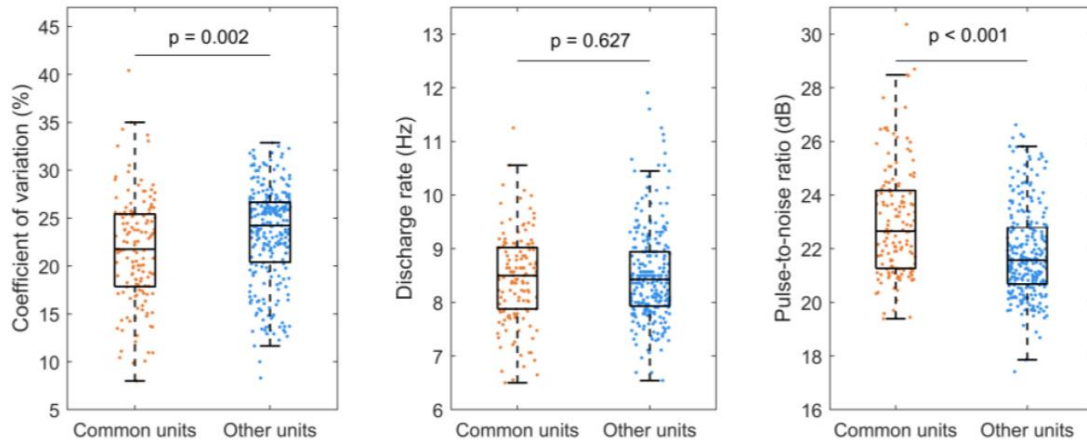
MU decomposition with only US

Two source validation.



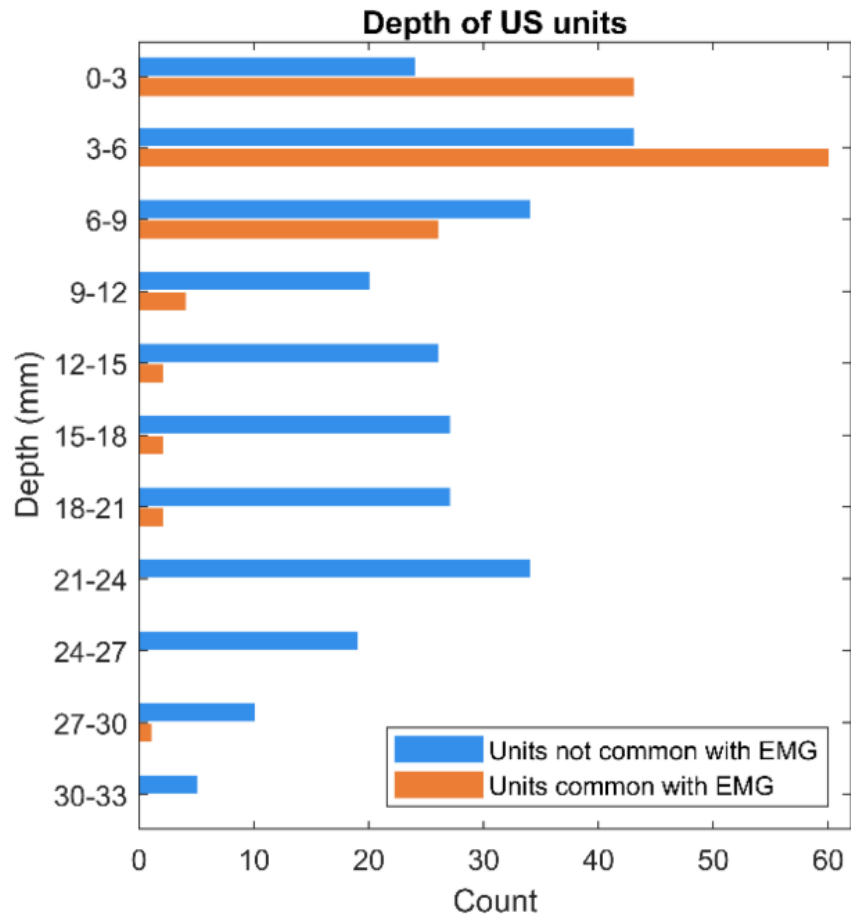
MU decomposition with only US

Two source validation.



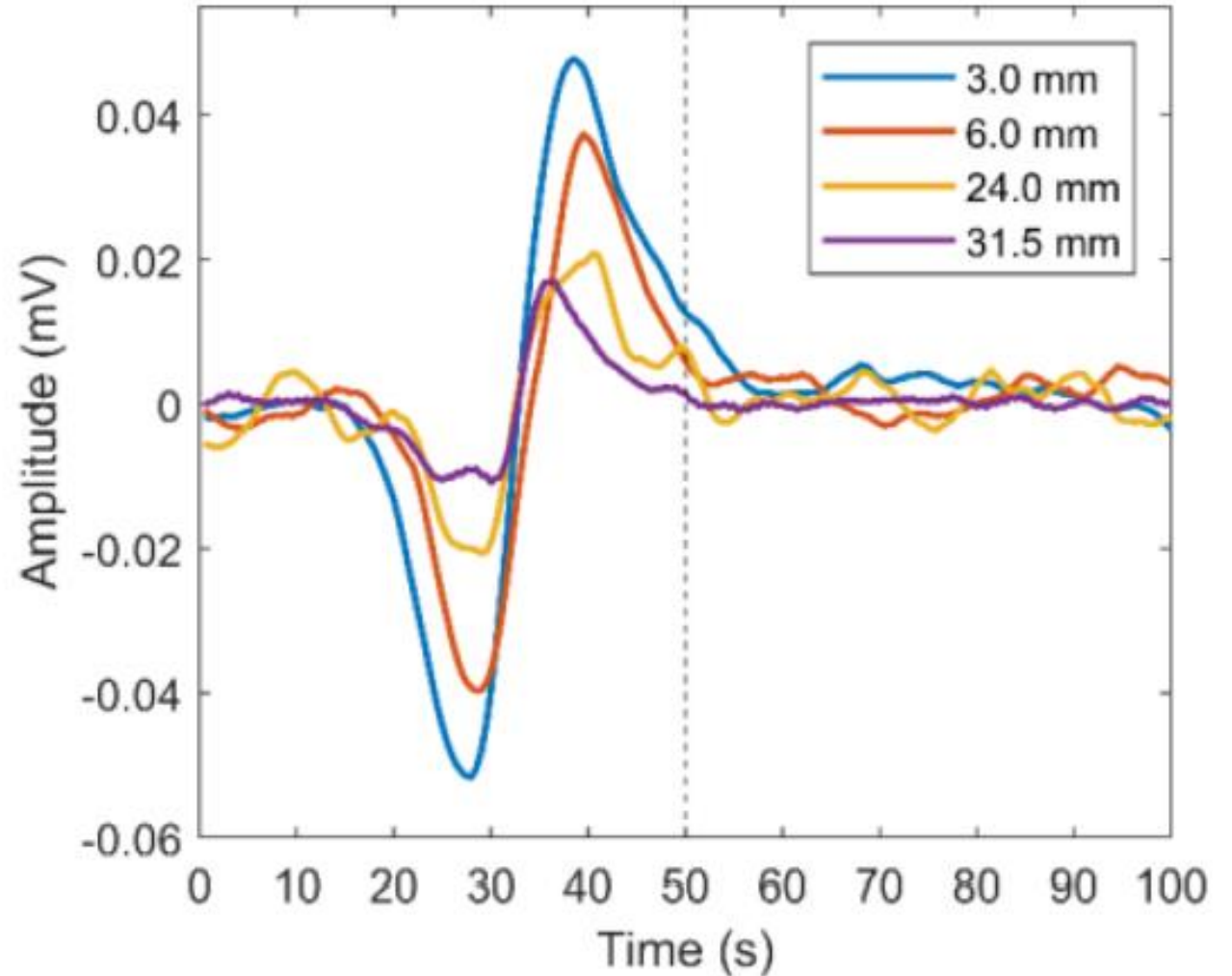
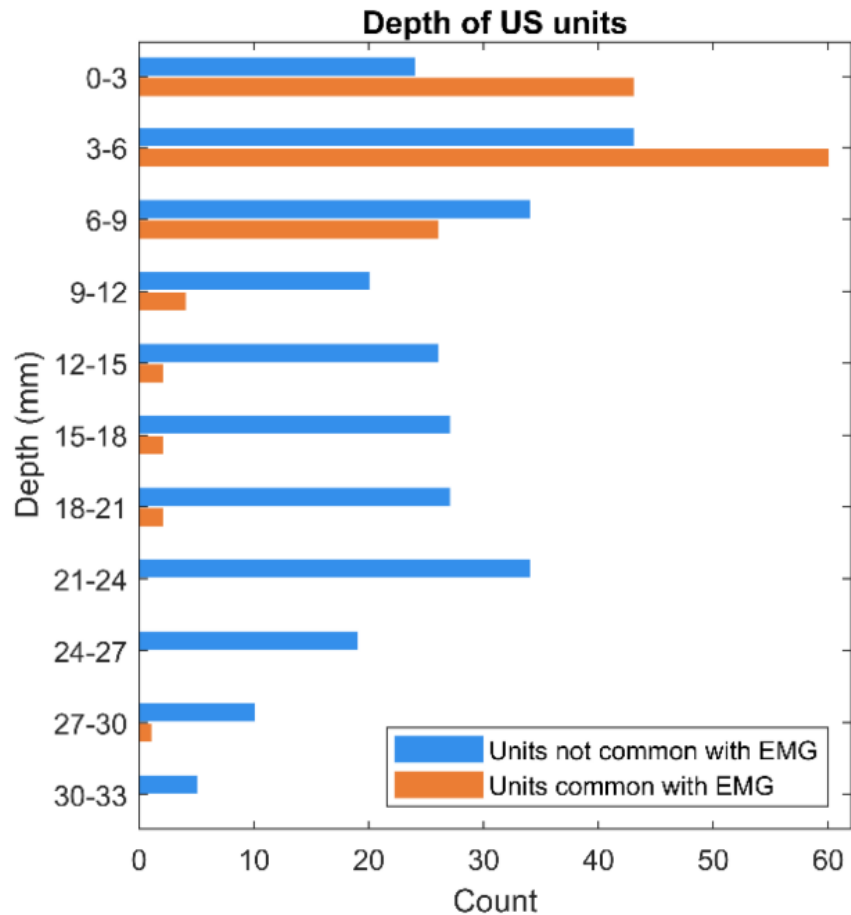
MU decomposition with only US

The Ultrasound Differential.



MU decomposition with only US

The Ultrasound Differential.



Break Time!

Happy to answer questions during the Break

All this work so far was done offline



Each 44 Kg



Long processing

After the break
What can ultrasound do when you are restricted to:



Portable Electronics



Real-time Processing

Topics



1. Motivation
2. What is Ultrasound?
3. Application 1. Motor Unit Decomposition via Ultrafast Ultrasound
4. Break Time
- 5. Translational challenges: Laboratory → Real-World**
6. Application 2. Interfacing with Wearable A-mode Ultrasound
7. Questions and Answers



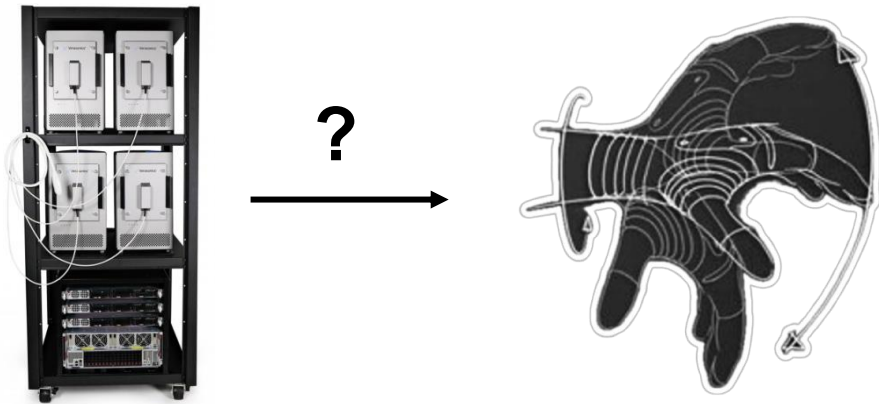
Why do we not use the MU decomposition method?

- US decomposition is **potentially great** for Human Machine Interface control



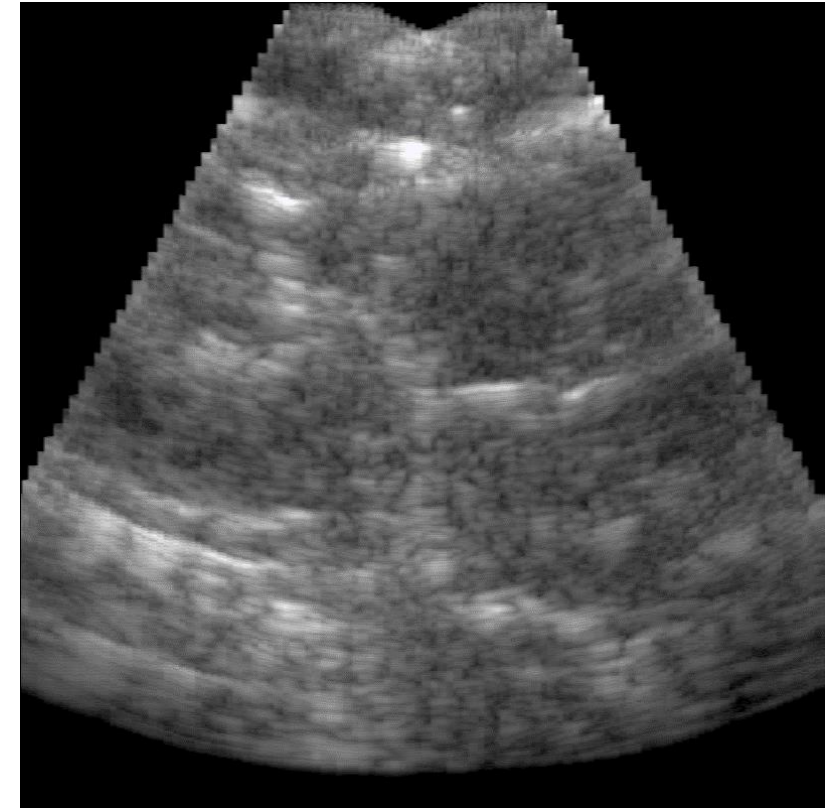
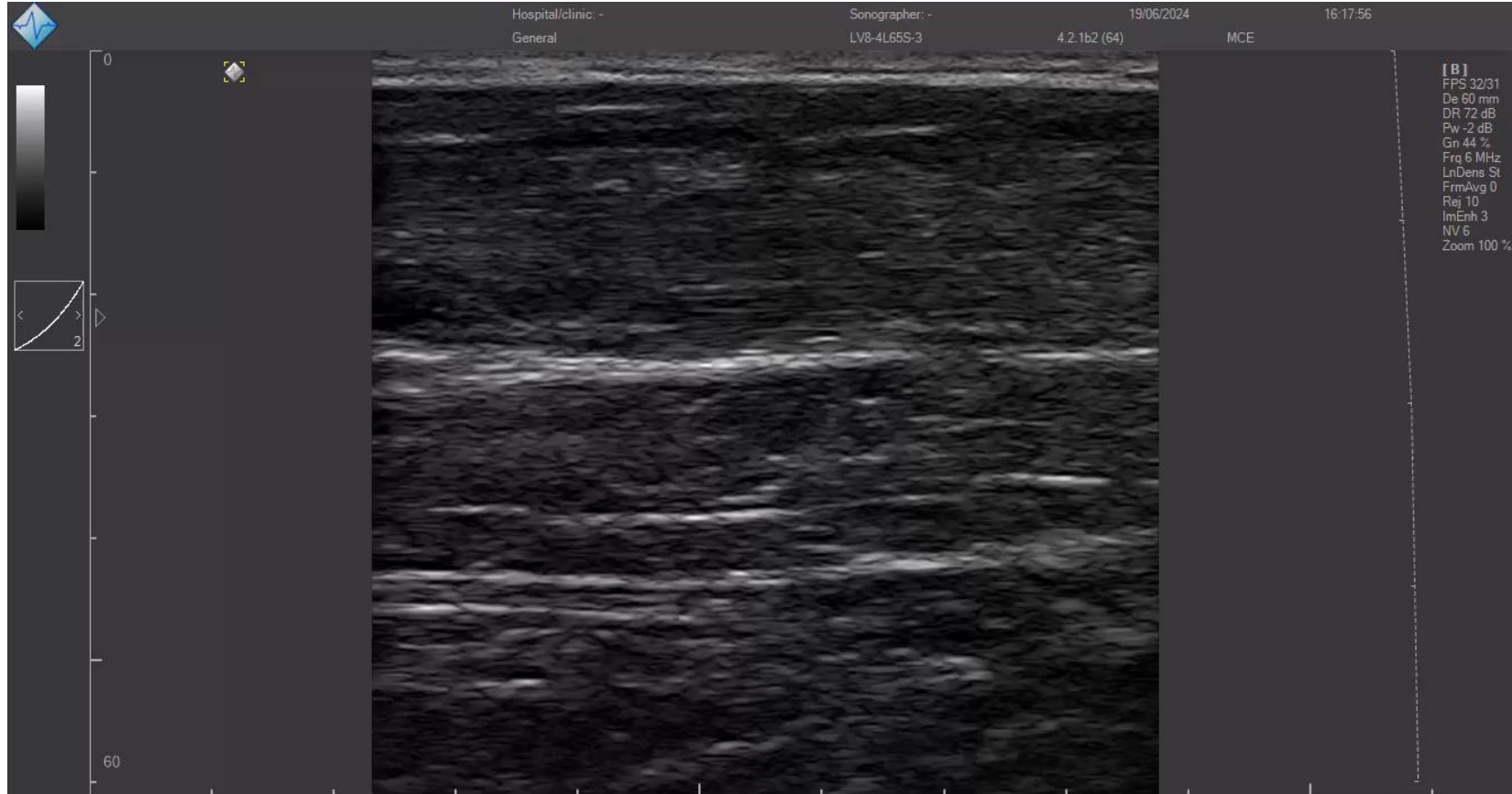
But it currently still faces a number of **practical limitations**

1. Likely limited performance on higher forces
2. Validation only conducted on Isometric conditions
3. Probes are large, bulky and not stable during movement
4. Acquisition system required is not portable
5. Beamforming + Processing + Decomposition is fairly slow



Are there other ways of using ultrasound to interface with muscles?

- Ultrasound can also image **gross muscular movement**

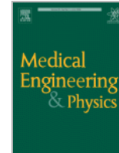


First work investigating it in a control perspective



Medical Engineering & Physics

Volume 28, Issue 5, June 2006, Pages 405-415



Sonomyography: Monitoring morphological changes of forearm muscles in actions with the feasibility for the control of powered prosthesis

Y.P. Zheng  , M.M.F. Chan, J. Shi, X. Chen, Q.H. Huang

Show more 

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<https://doi.org/10.1016/j.medengphy.2005.07.012> 

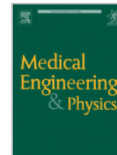
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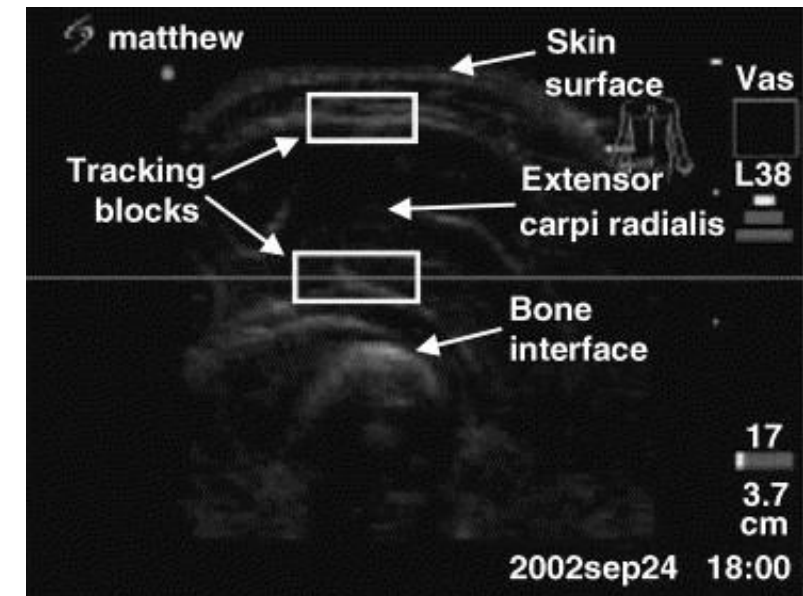
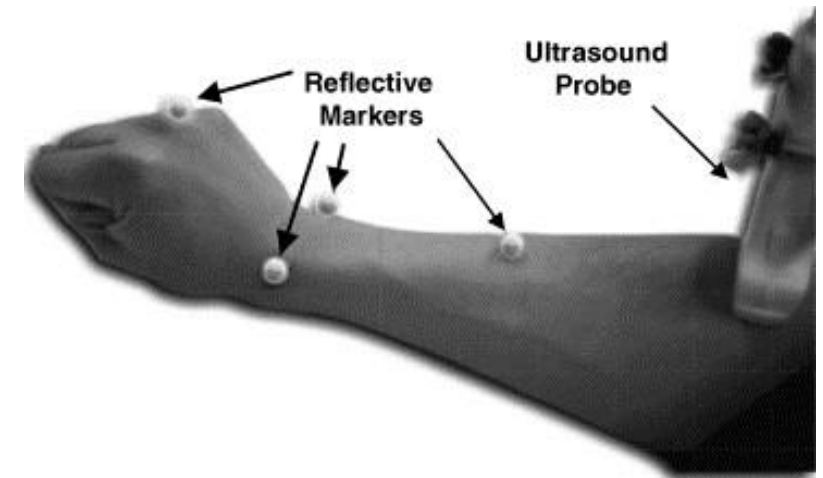
Y.P. Zheng  , M.M.F. Chan, J. Shi, X. Chen, Q.H. Huang

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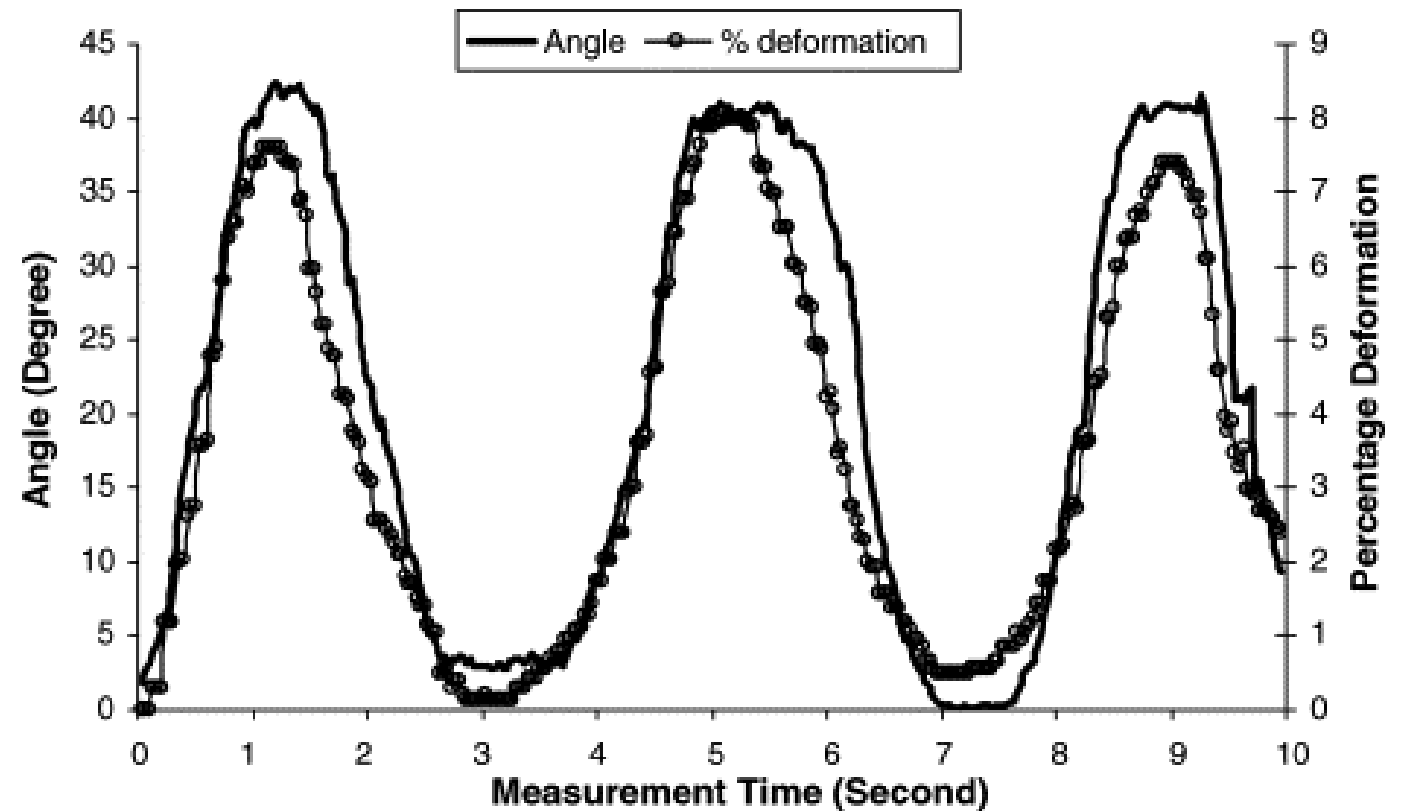
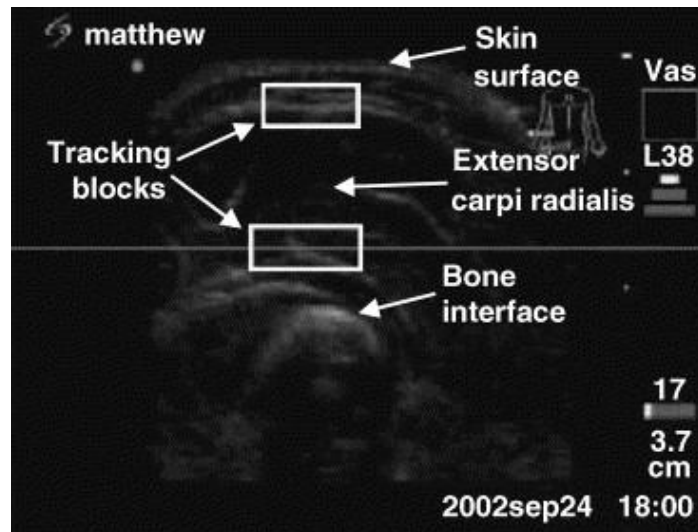
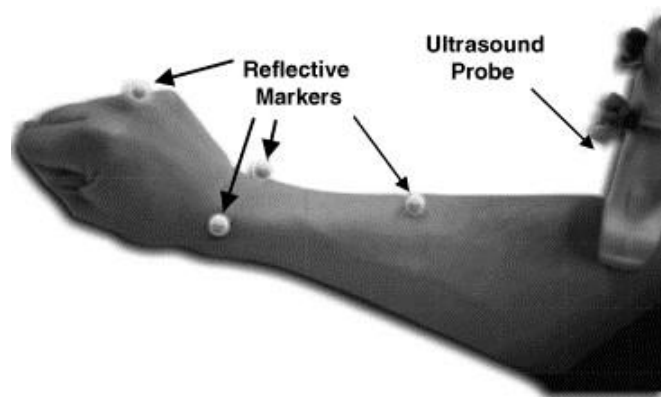
<https://doi.org/10.1016/j.medengphy.2005.07.012>

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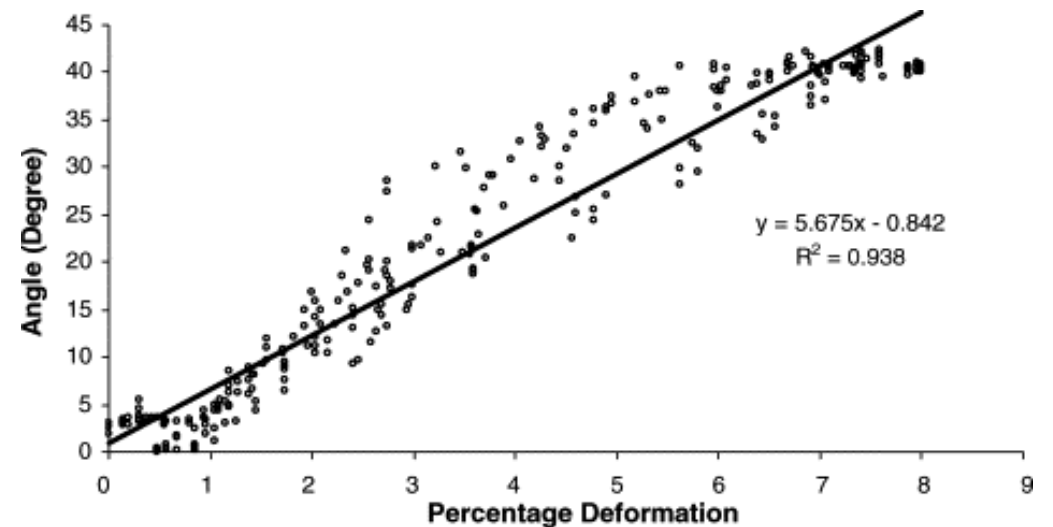
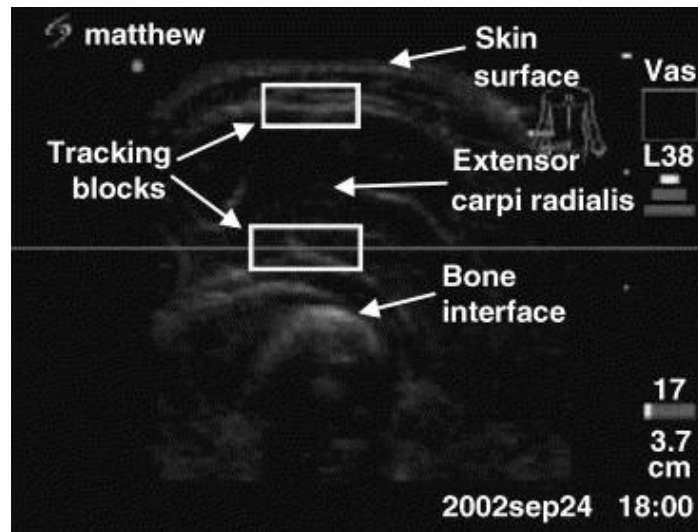
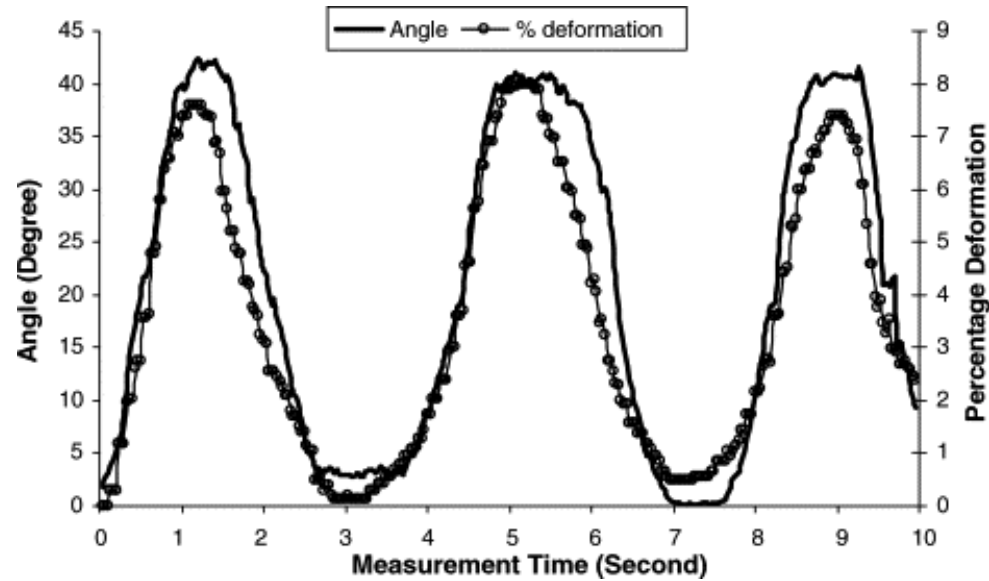
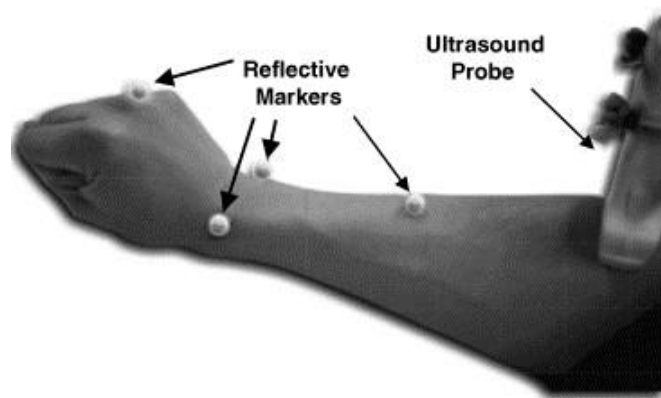


[1] Zheng et al. , Sonomyography: Monitoring morphological changes of forearm muscles in actions with the feasibility for the control of powered prosthesis

First work investigating it in a control perspective



First work investigating it in a control perspective



[1] Zheng et al. , Sonomyography: Monitoring morphological changes of forearm muscles in actions with the feasibility for the control of powered prosthesis

Follow-up B-mode HMI literature

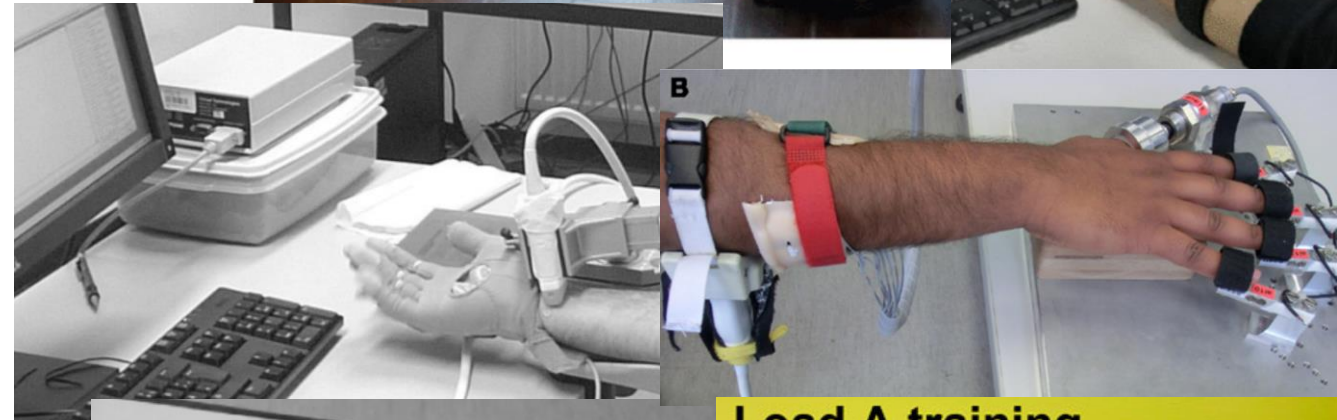
Ultrasound probe

[1]



[4]

[2]



[5]



[3]



[6]

2017	Huang and Yang et al.
2012	Castellini et al.
2019	Yang and Huang et al.
2012	Shi et al.
2014	Sikdar et al.
2016	Huang et al.
2005	Zheng et al.
2016	Akhlaghi et al.
2013	Castellini et al.
2014	Ravindra and Castellini et al.
2017	Jess McIntosh et al.
2017	Khan and Akhlaghi et al.
2019	Akhlaghi et al.
2019	Dhawan and Skidar et al.
2020	Engdahl and Skidar et al.
2021	Engdahl and Skidar et al.
2022	Engdahl and Skidar et al.
2022	Jianmin Li et al.
2021	Alexander et al.
2021	Yang Zheng and Xiaogang Hu et al.

[1] Huang et al.

[2,3] Castellini et al.

[4] Yang et al.

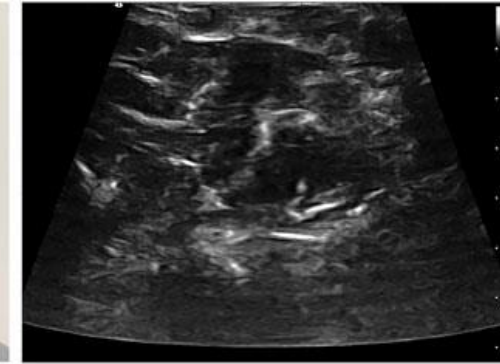
[5] Ravindra et al.

[6] Engdahl et al.

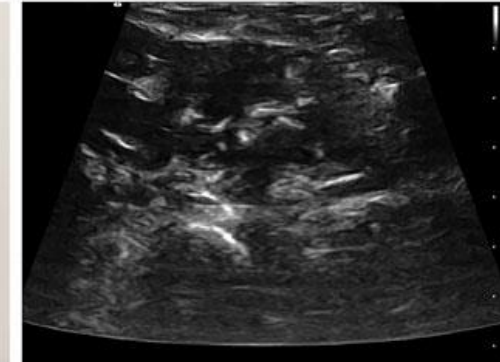
Follow-up B-mode HMI literature



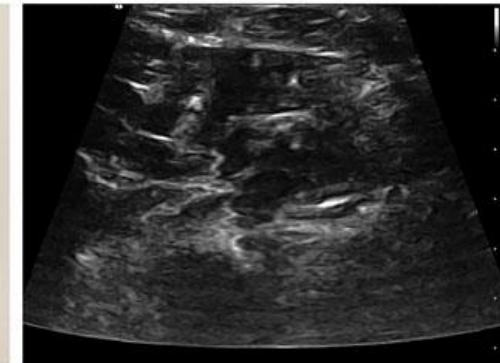
Tripod



Point



Rest



Follow-up B-mode HMI literature



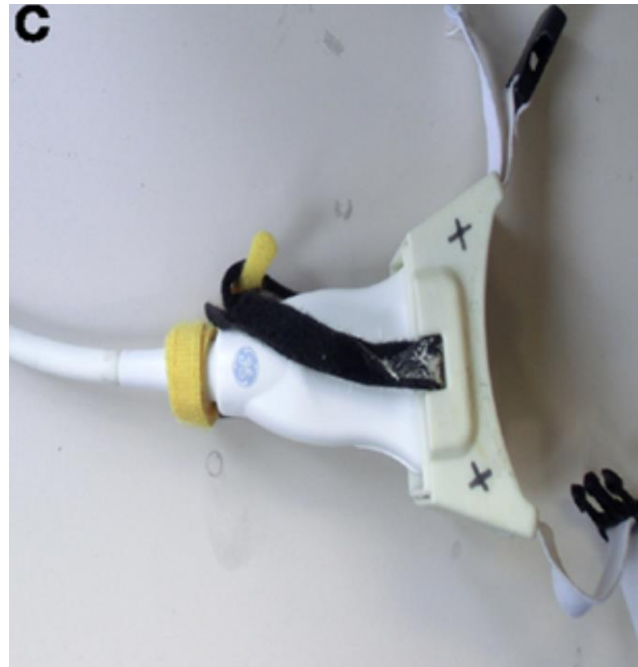
Box and Blocks Test
with sonomyographic prosthesis

Static Training - Load B

Biomedical Imaging Lab
George Mason University

Practical Limitations of B-mode Ultrasound

Issue n° 1 – Probe Size and Weight



[1]

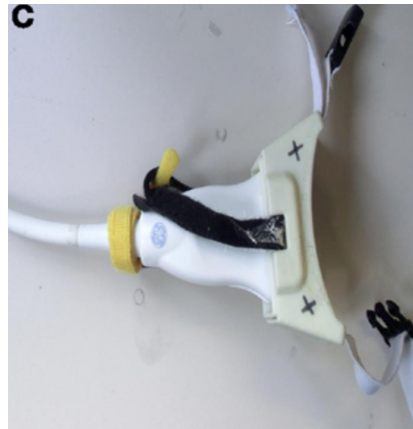


[2]

Traditional Clinical Probes and systems are far too large and bulky for be used as Human Machine Interface Products

Practical Limitations of B-mode Ultrasound

Issue n° 1 – Probe Size and Weight



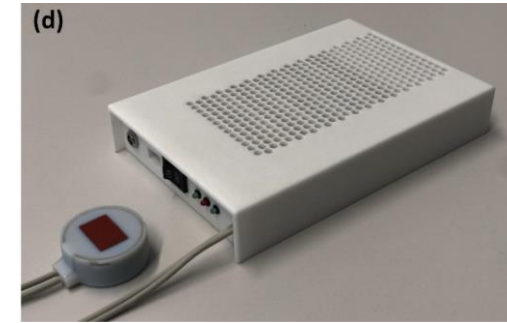
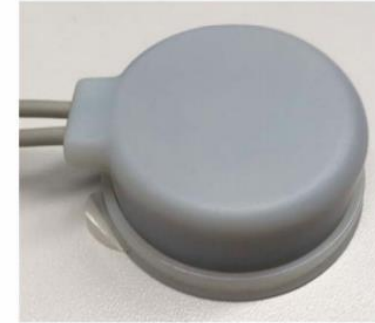
[1]



[2]

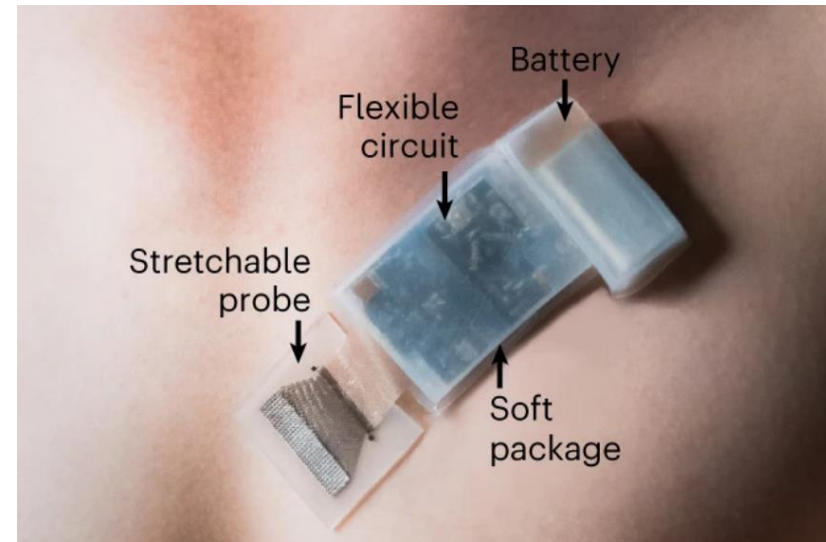


[3]



(d)

Portable Systems



[4]

Fully Wearable Systems

Very Recent Solutions

[1] Ravindra et al

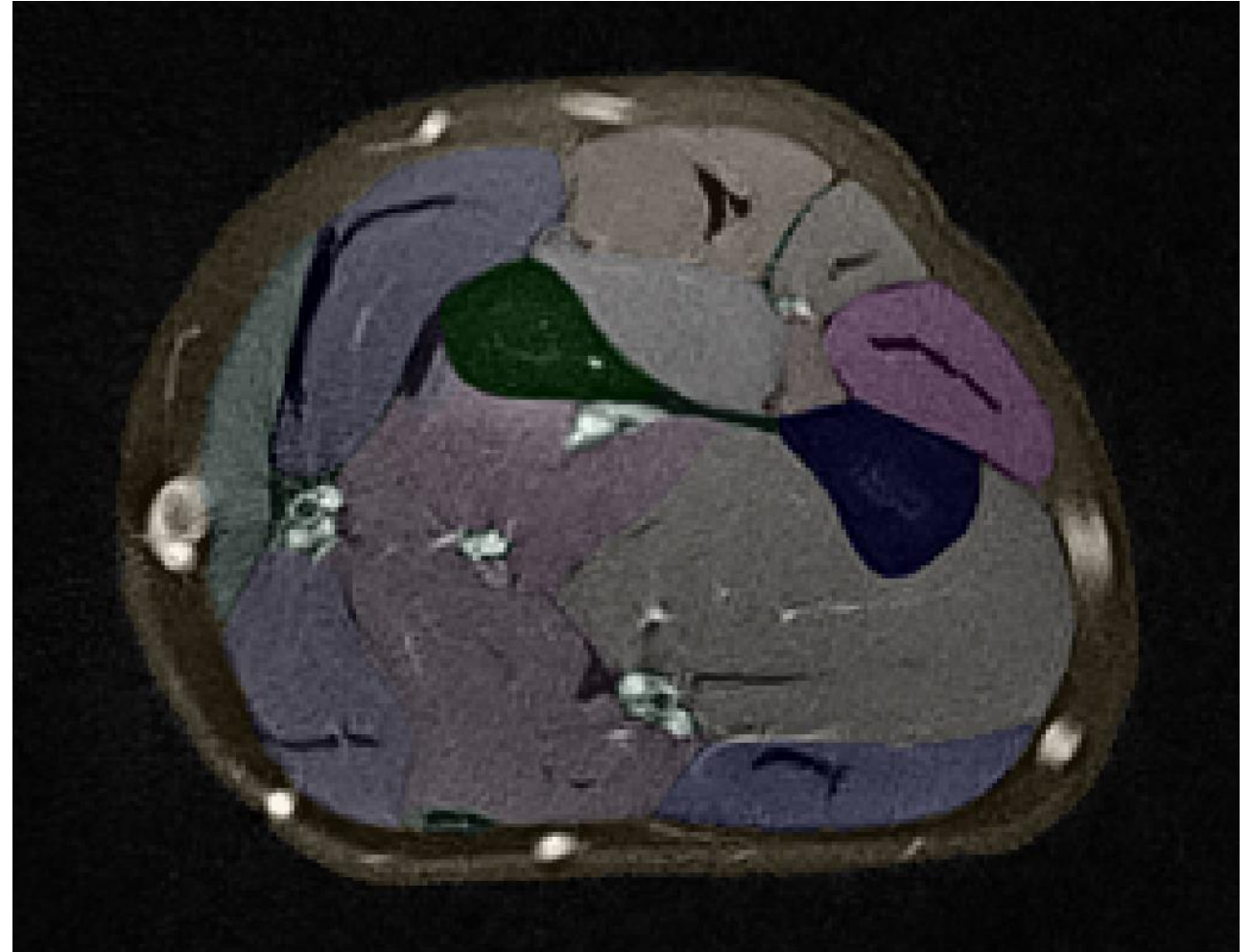
[2] Cannon

[3] Fournelle et al.

[4] Lin et al.

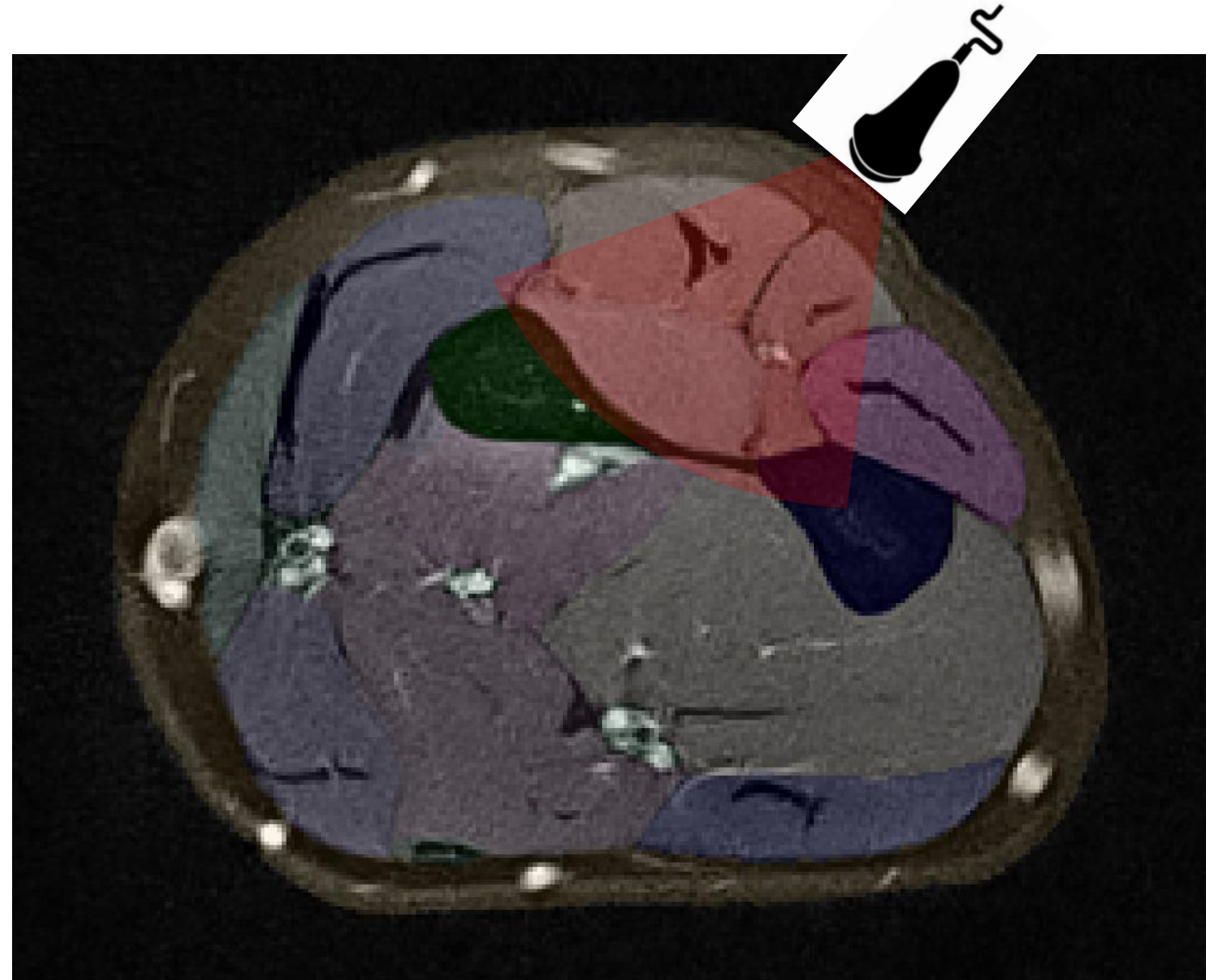
Practical Limitations of B-mode Ultrasound

Issue n° 2 – Limited Field of View



Practical Limitations of B-mode Ultrasound

Issue n° 2 – Limited Field of View



A potential new avenue to wearability



INTERNATIONAL
SOCIETY FOR PROSTHETICS
AND ORTHOTICS

Original Research Report

Towards the application of **one-dimensional sonomyography** for powered upper-limb prosthetic control using machine learning models

Jing-Yi Guo¹, Yong-Ping Zheng², Hong-Bo Xie³ and Terry K Koo¹

A - Mode Ultrasound

Prosthetics and Orthotics International
37(1) 43–49

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DOI: 10.1177/0309364612446652

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A potential new avenue to wearability

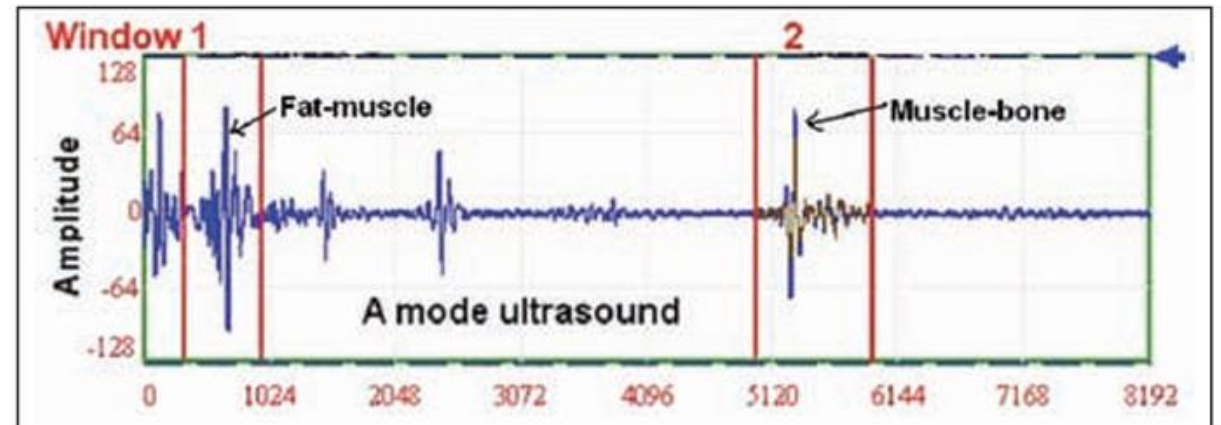
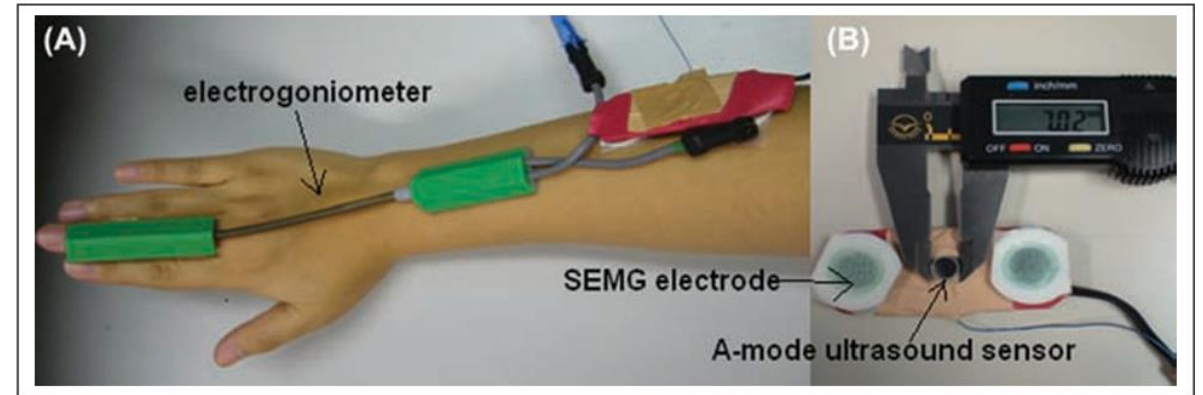


Original Research Report

Towards the application of one-dimensional sonomyography for powered upper-limb prosthetic control using machine learning models

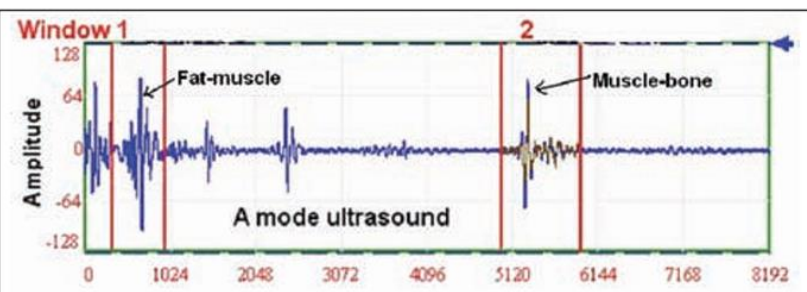
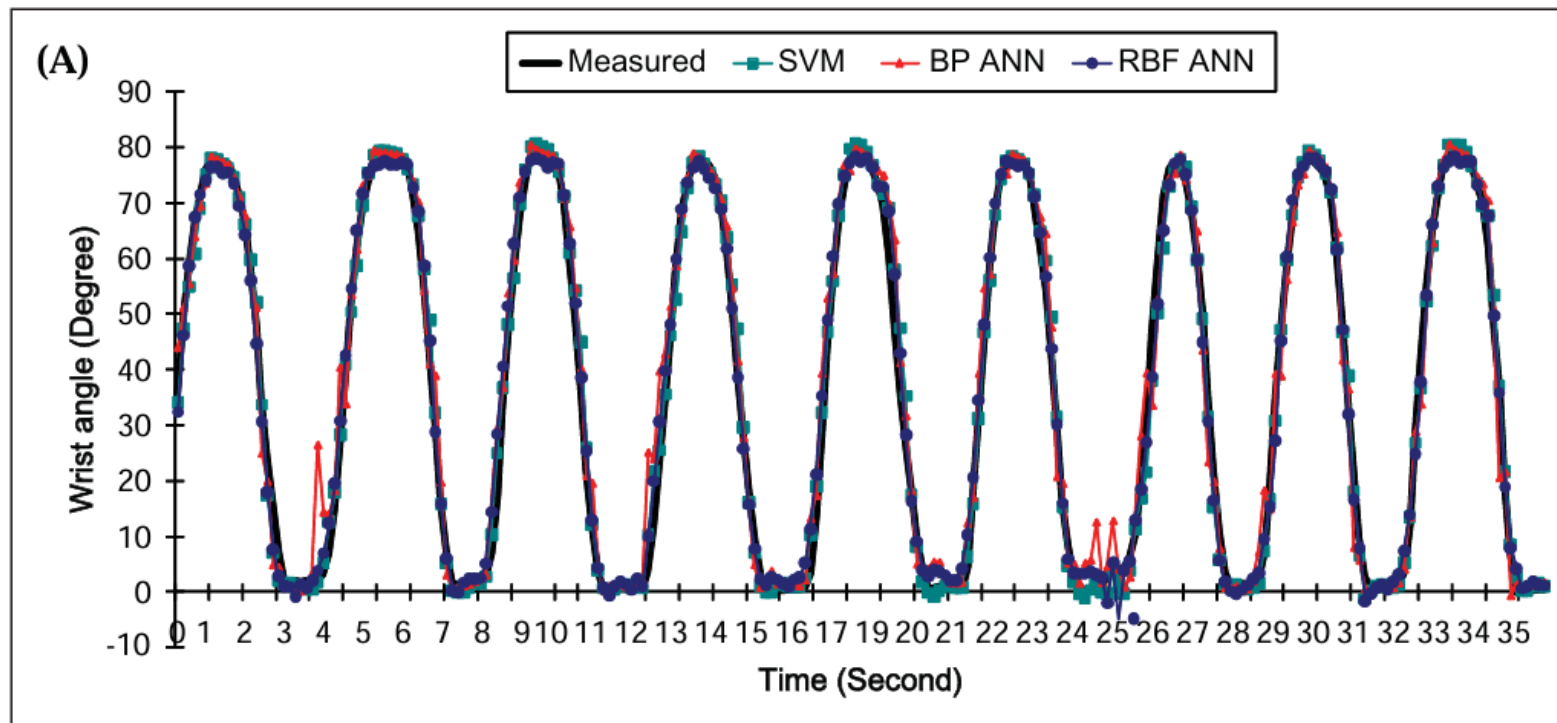
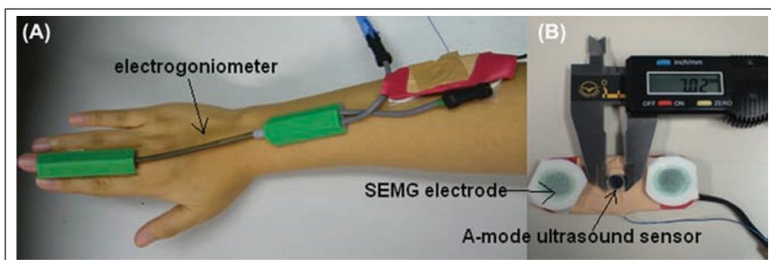
Jing-Yi Guo¹, Yong-Ping Zheng², Hong-Bo Xie³ and Terry K Koo¹

Prosthetics and Orthotics International
37(1) 43–49
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Guo et al. , Towards the application of one-dimensional sonomyography for powered upper-limb prosthetic control using machine learning models

A potential new avenue to wearability

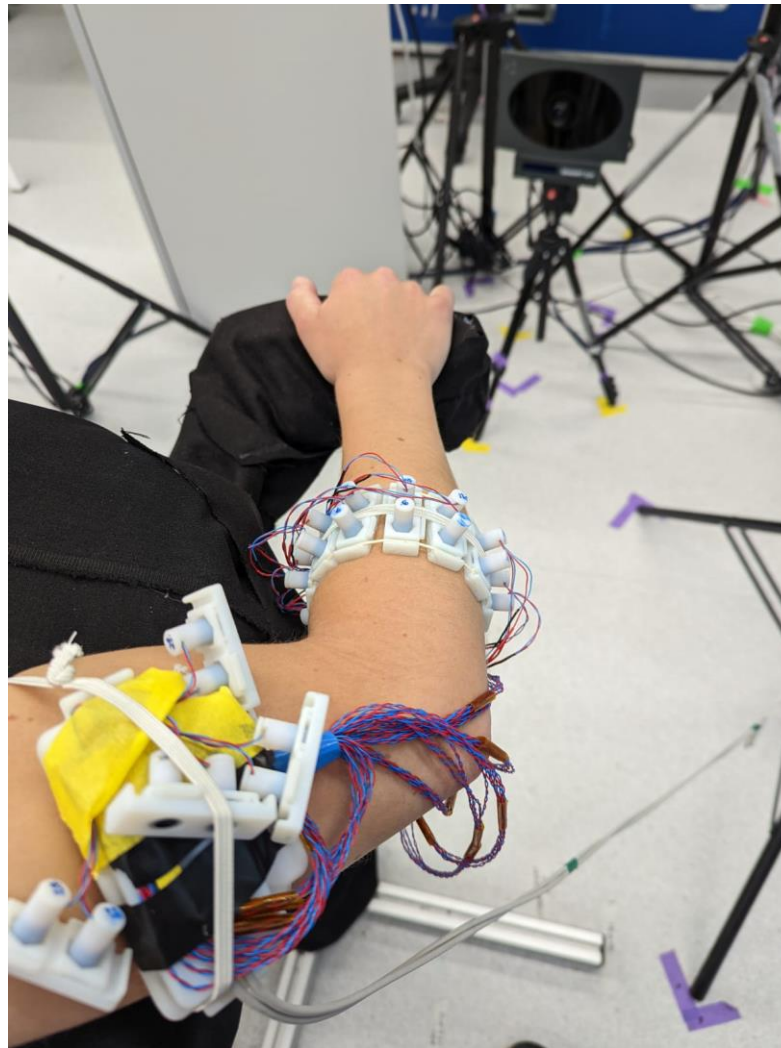
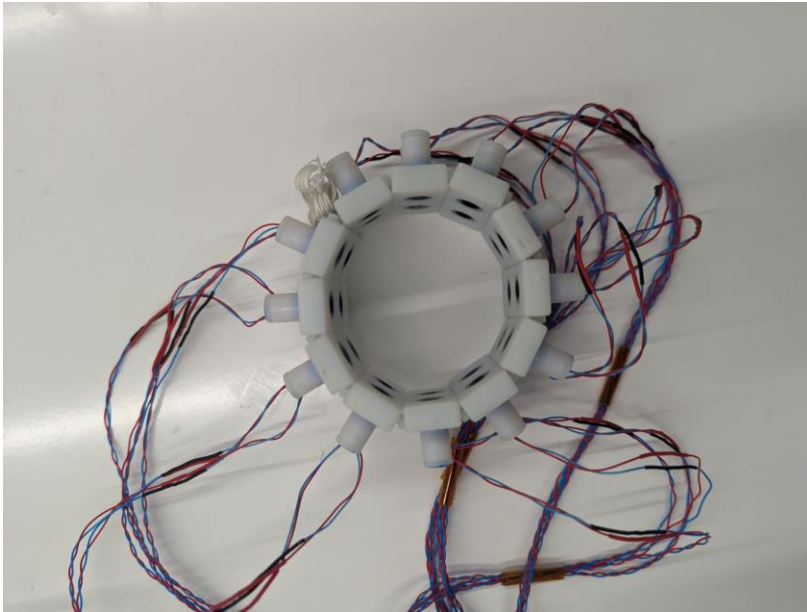


Topics



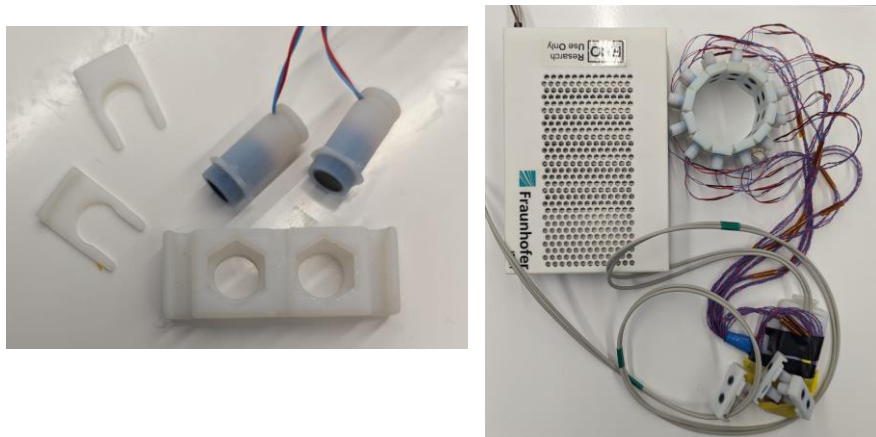
1. Motivation
2. What is Ultrasound?
3. Application 1. Motor Unit Decomposition via Ultrafast Ultrasound
4. Break Time
5. Translational challenges: Laboratory → Real-World
- 6. Application 2. Interfacing with Wearable A-mode Ultrasound**
7. Questions and Answers

Our Prototype Approach



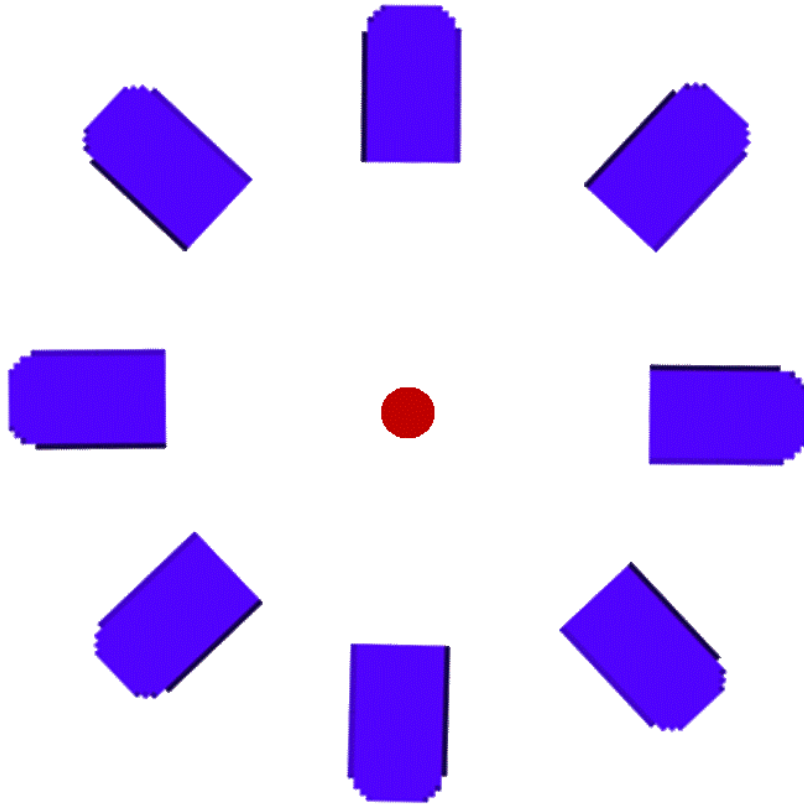
A-Mode Ultrasound bracelet

- 24 channels divided in two circles
- 1 MHz Centre Frequency
- Unfocused, 15° opening angle



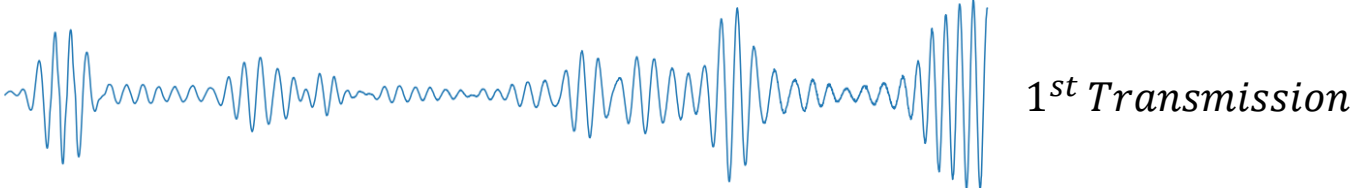
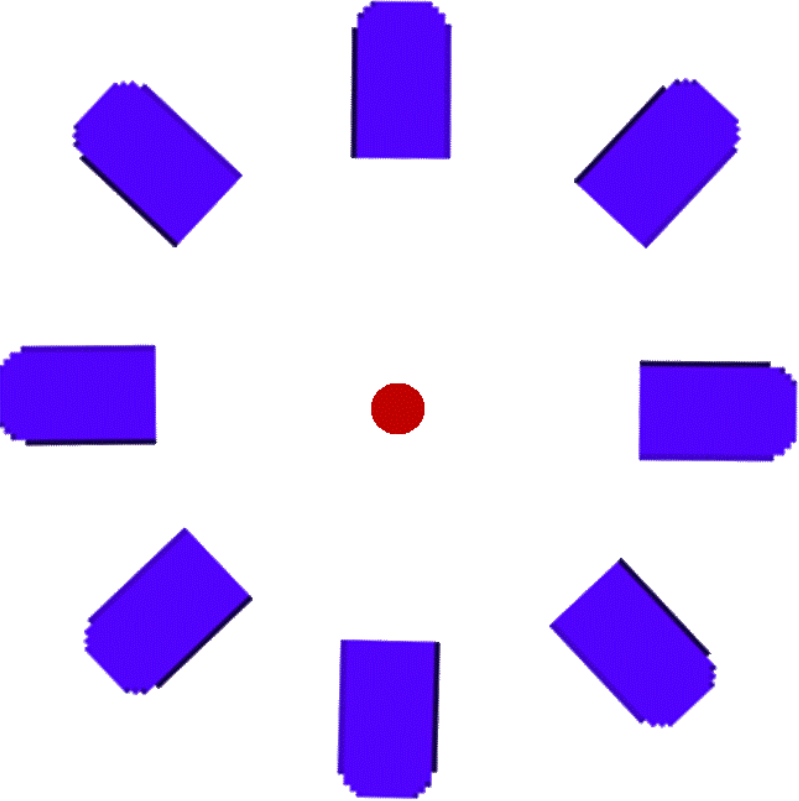
Proposing a different recording method

**Single Transmit Single
Receive A-mode**



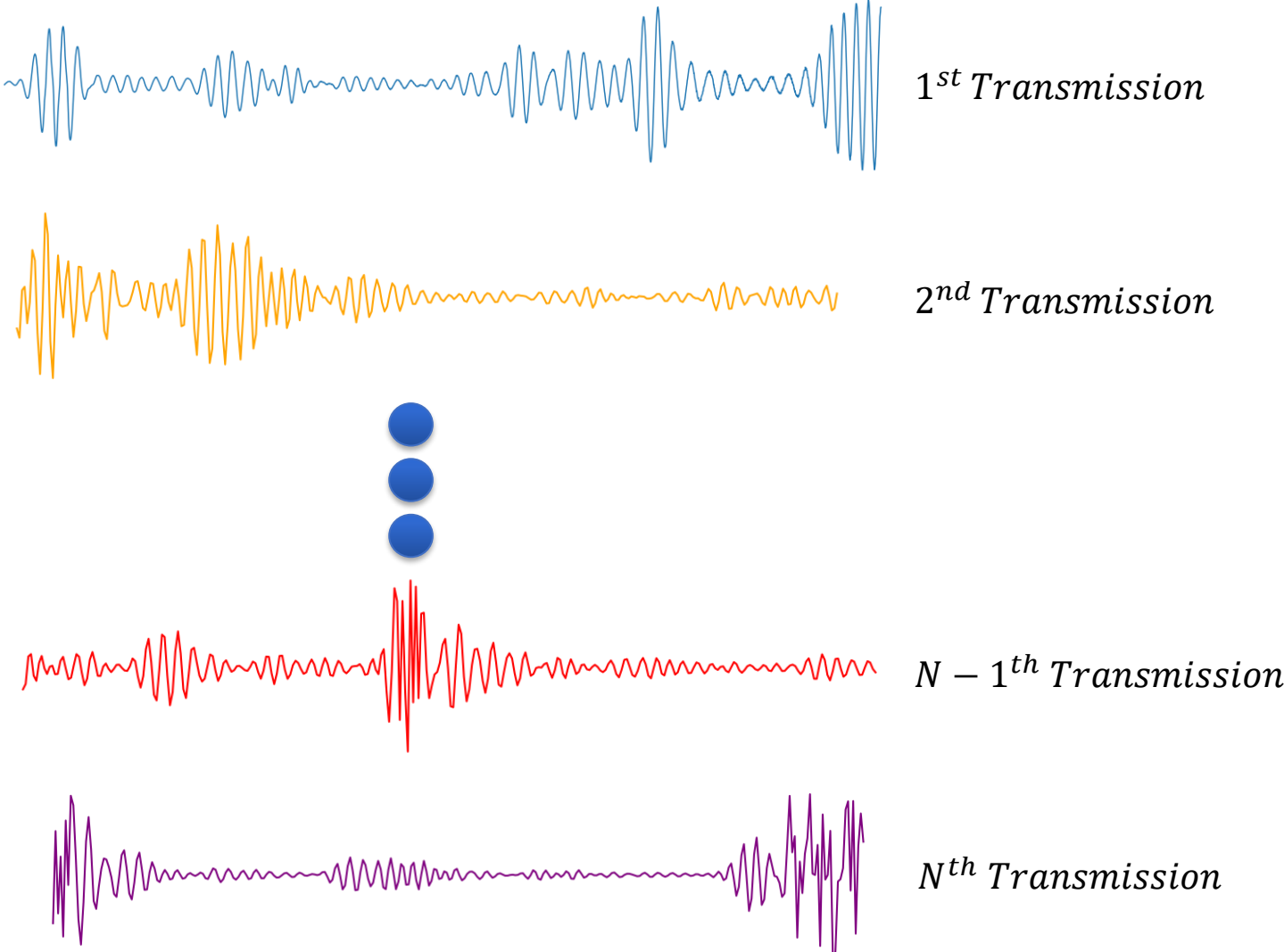
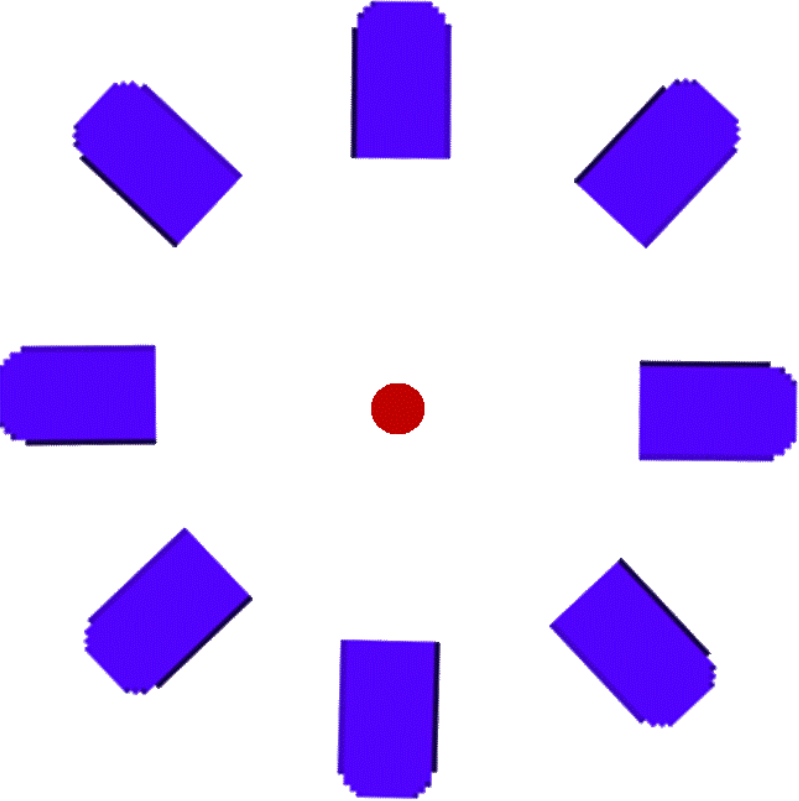
Proposing a different recording method

Single Transmit Single Receive A-mode



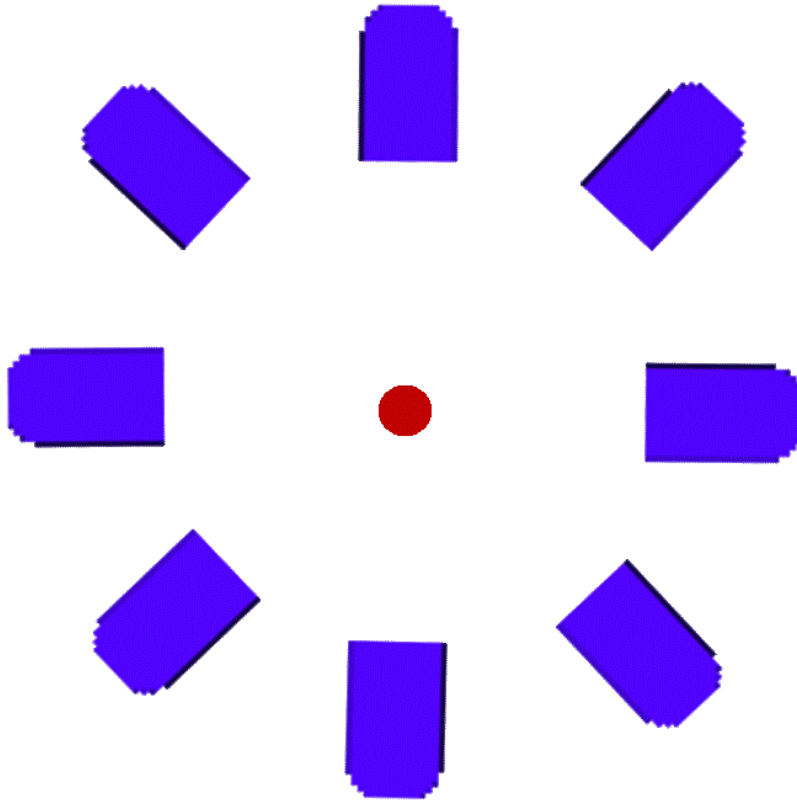
Proposing a different recording method

Single Transmit Single Receive A-mode



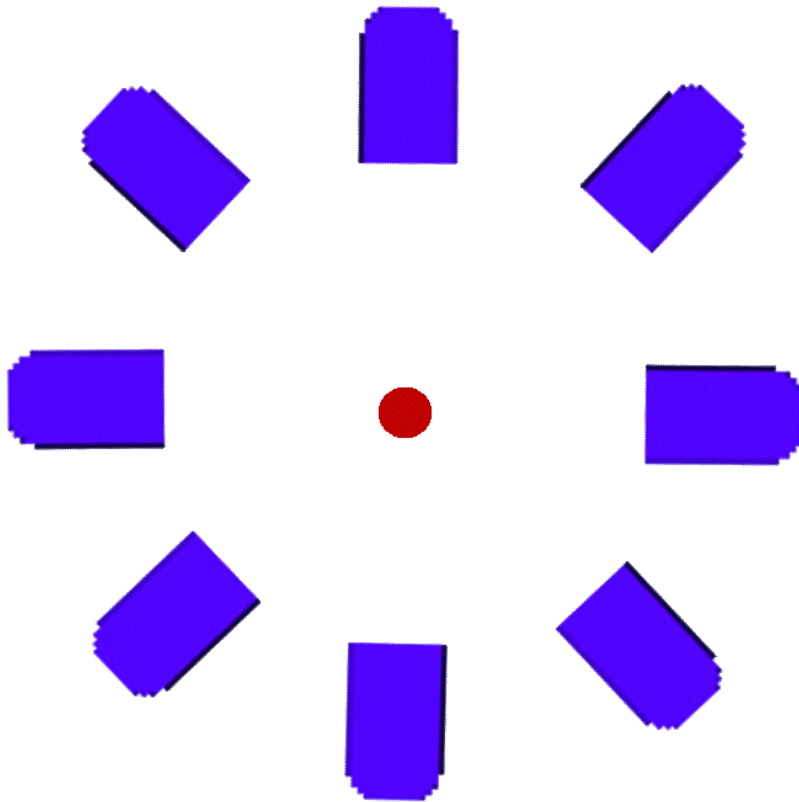
Proposing a different recording method

**Single Transmit Multiple
Receive A-mode**

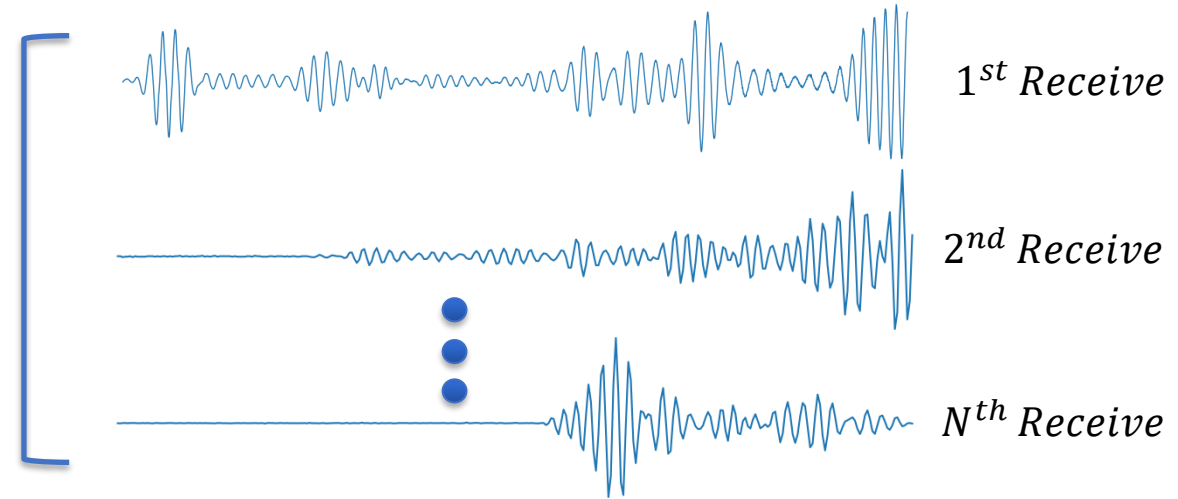


Proposing a different recording method

Single Transmit Multiple Receive A-mode



1st Transmission



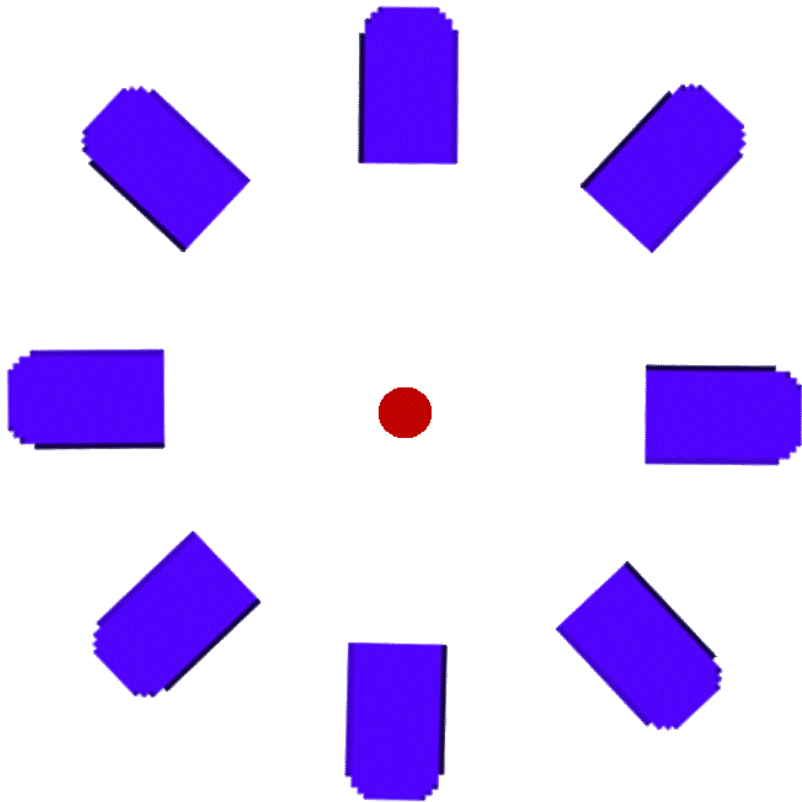
1st Receive

2nd Receive

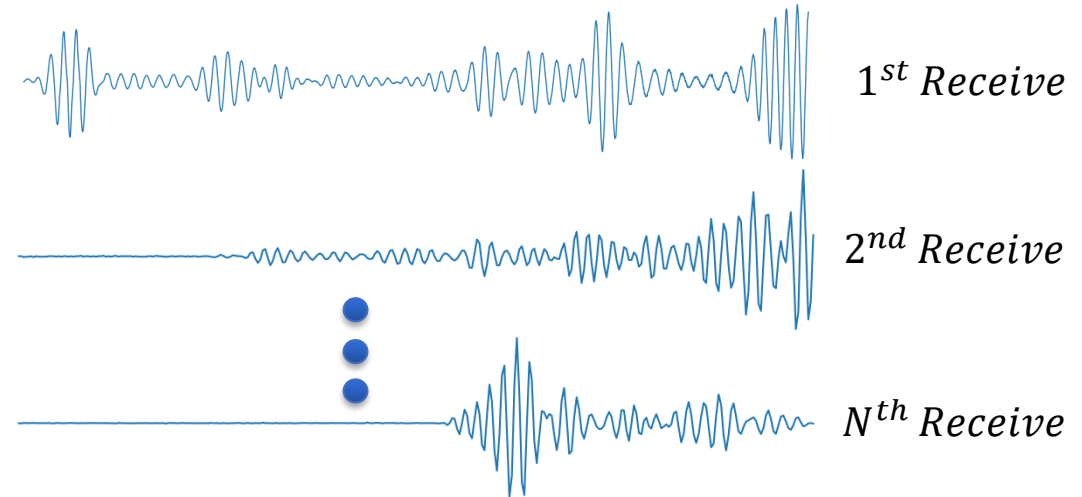
Nth Receive

Proposing a different recording method

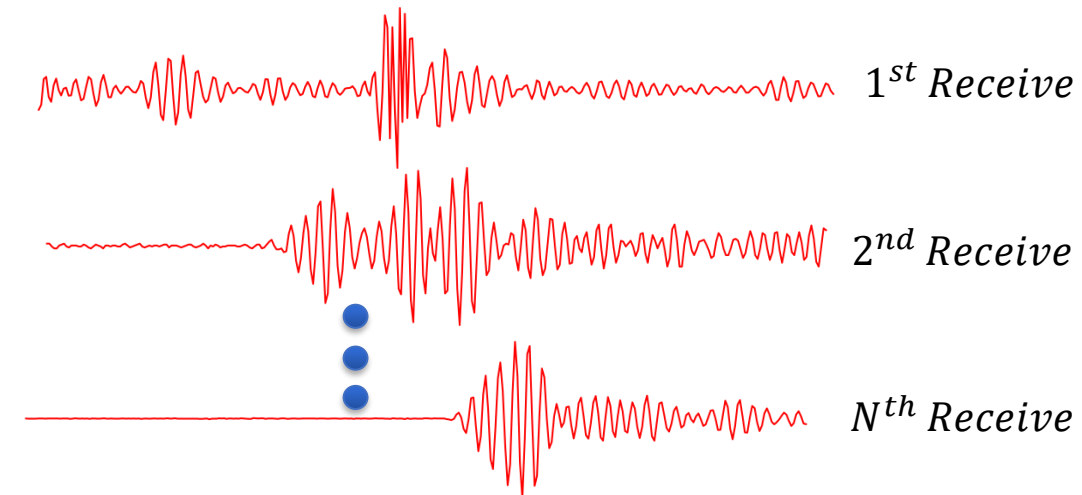
Single Transmit Multiple Receive A-mode



1^{st} Transmission

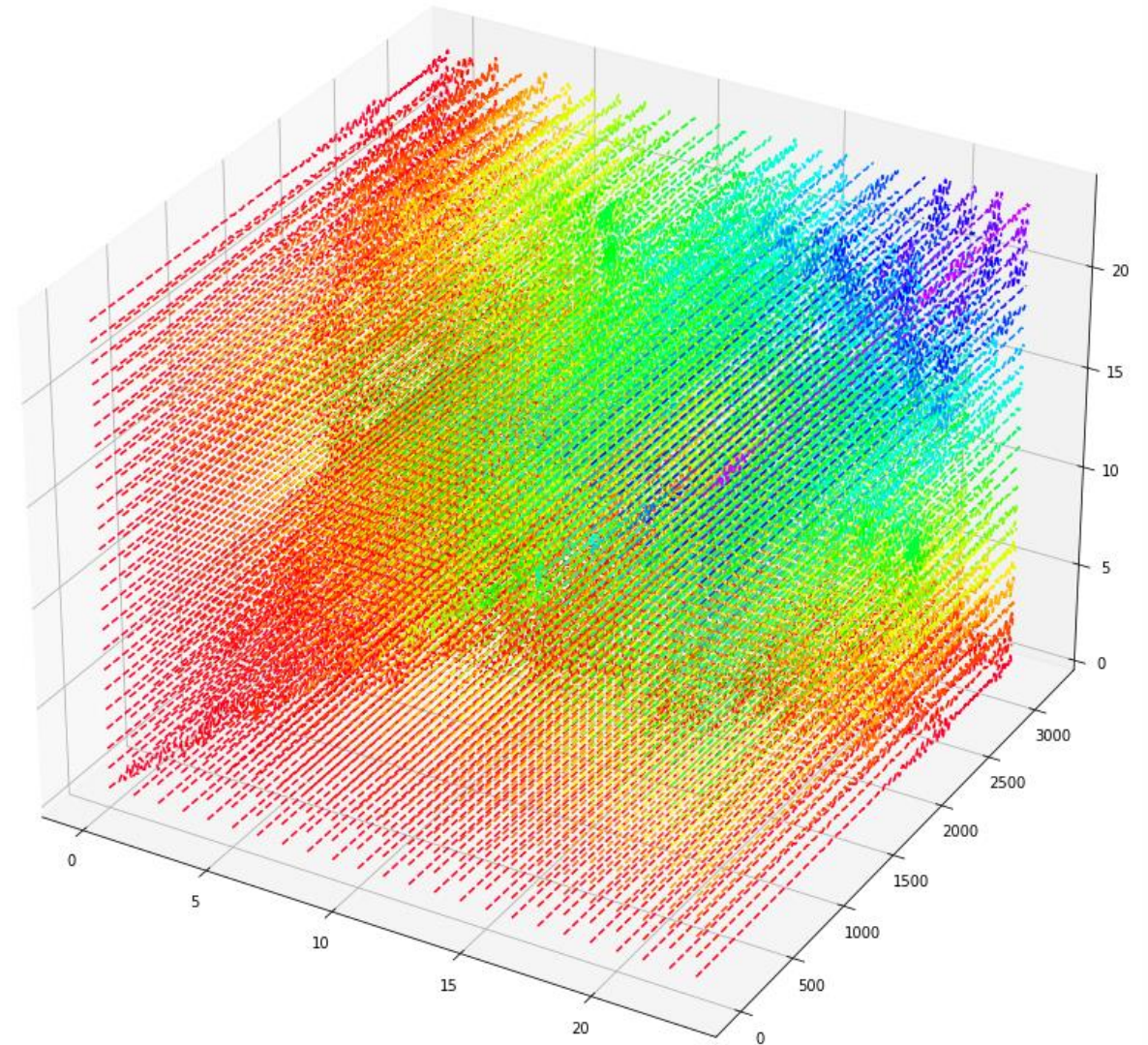
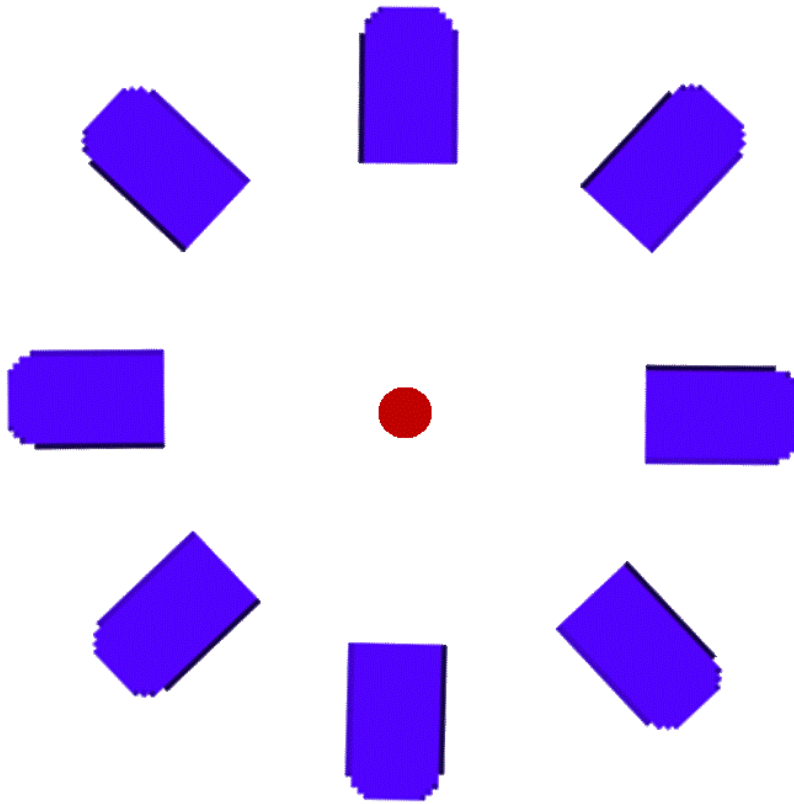


N^{th} Transmission



Proposing a different recording method

Single Transmit Multiple Receive A-mode

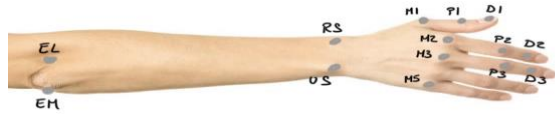


Experiment 1 – Offline



Motion Capture

Experiment 1 – Offline



High Density
surface EMG



Motion Capture



OR

A-mode
Ultrasound



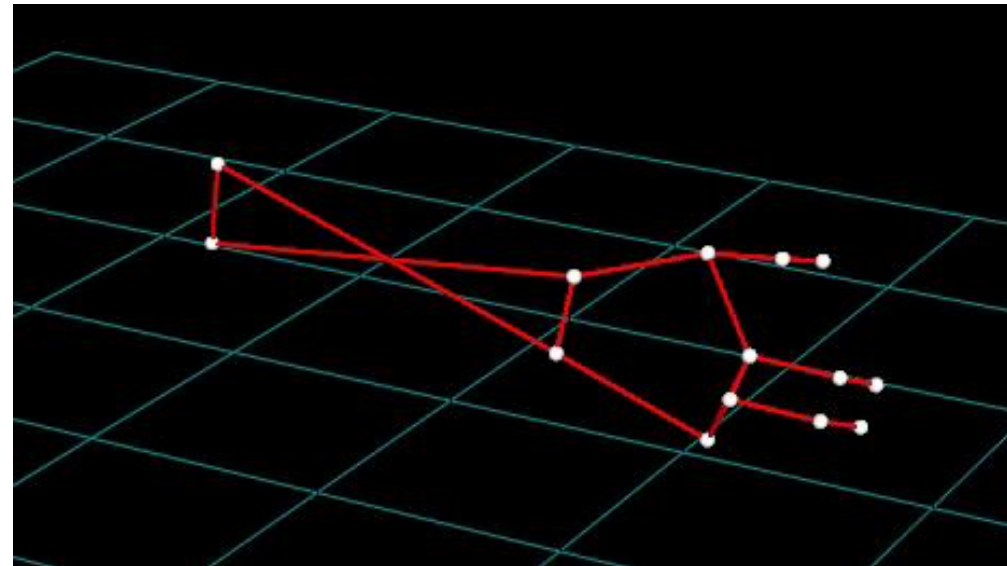
Sgambato et al. High Performance Wearable Ultrasound as a Human-Machine Interface for wrist and hand kinematic tracking

Experiment 1 – Offline

Video for Guidance



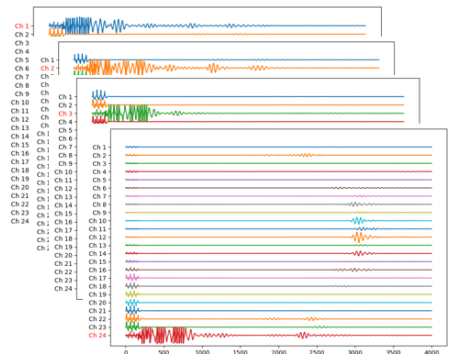
Participant moving



MOCAP regressed 3D XYZ locations

Experiment 1 – Offline

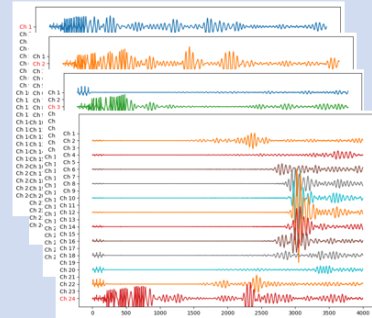
Raw A-mode Ultrasound



24 shots x 24 channels
4000 samples per line

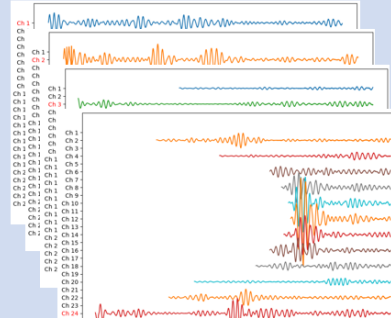
Pre-processing

Channel Selection and TGC



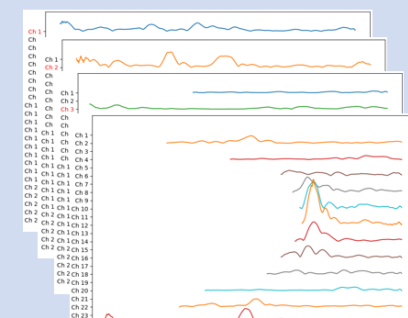
24 shots x 12 channels

Noise and Delay Correction

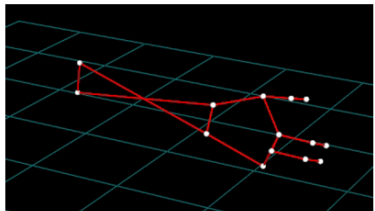


900 - 3200 samples per line

Smoothing and Enveloping



Motion Capture angles

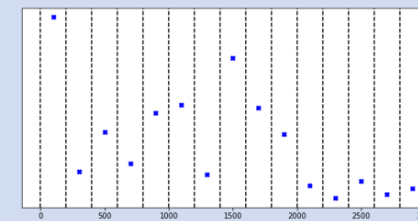


Linear Regression

Feature Extraction

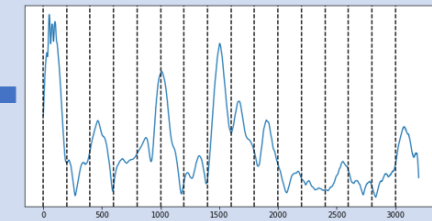
Principal Component Analysis

Root Mean Square



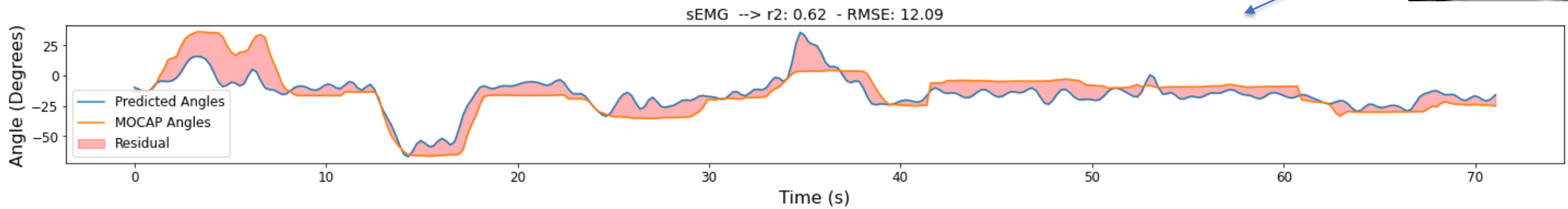
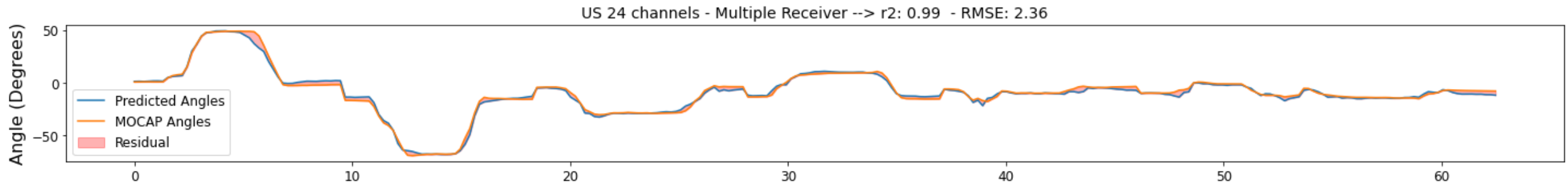
> 3000 features

Windowing

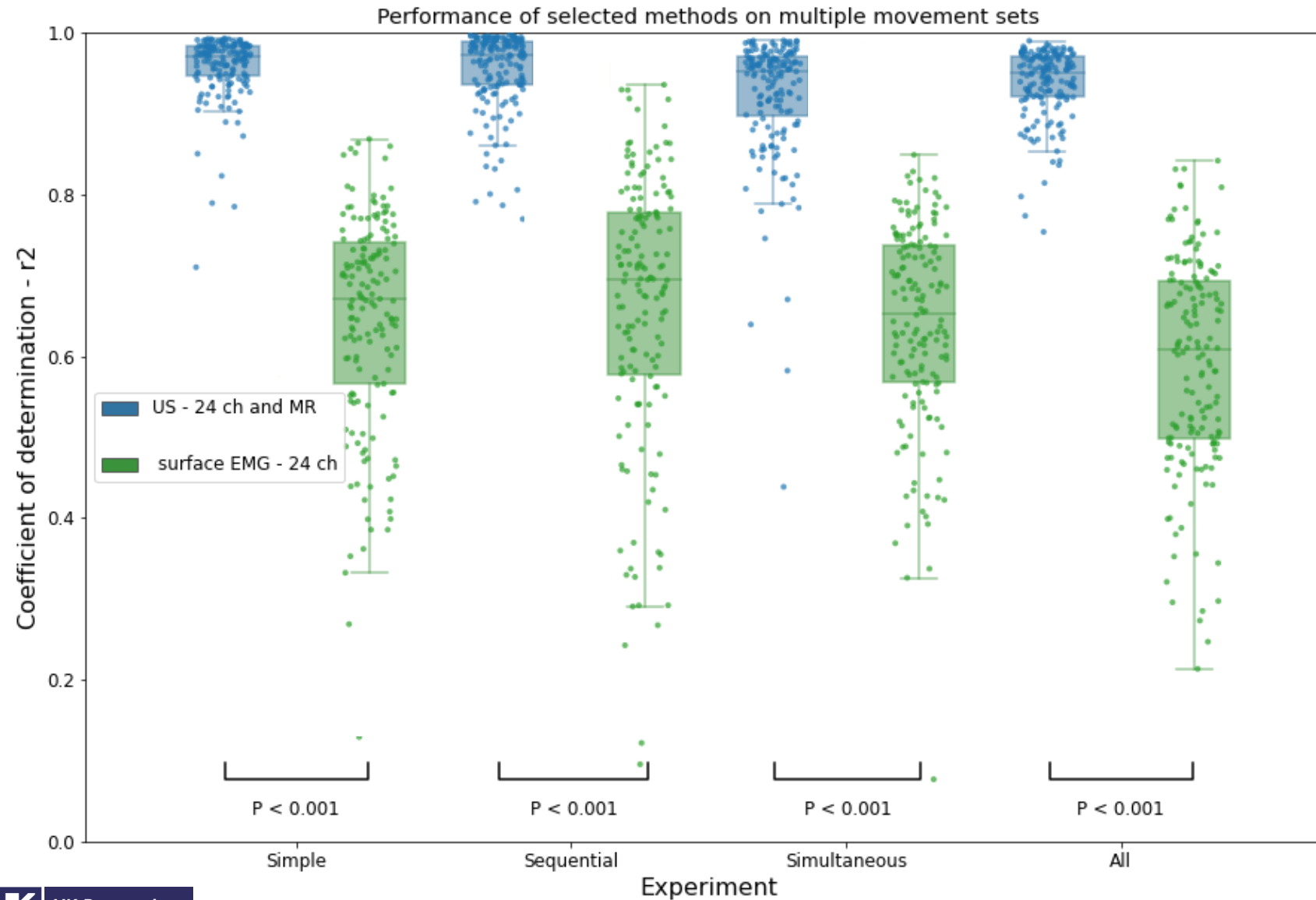


Windows of 200 samples

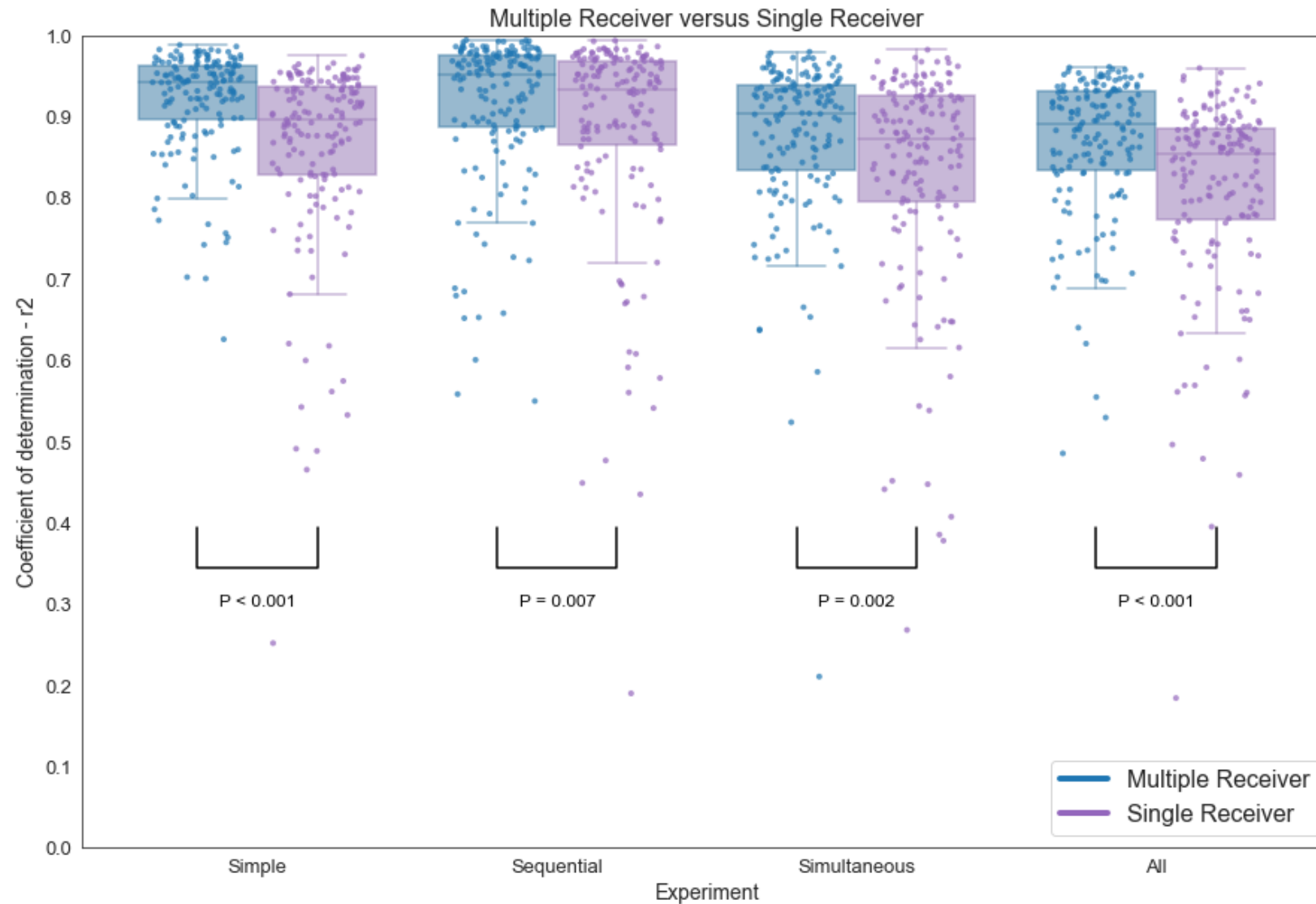
Experiment 1 – Offline



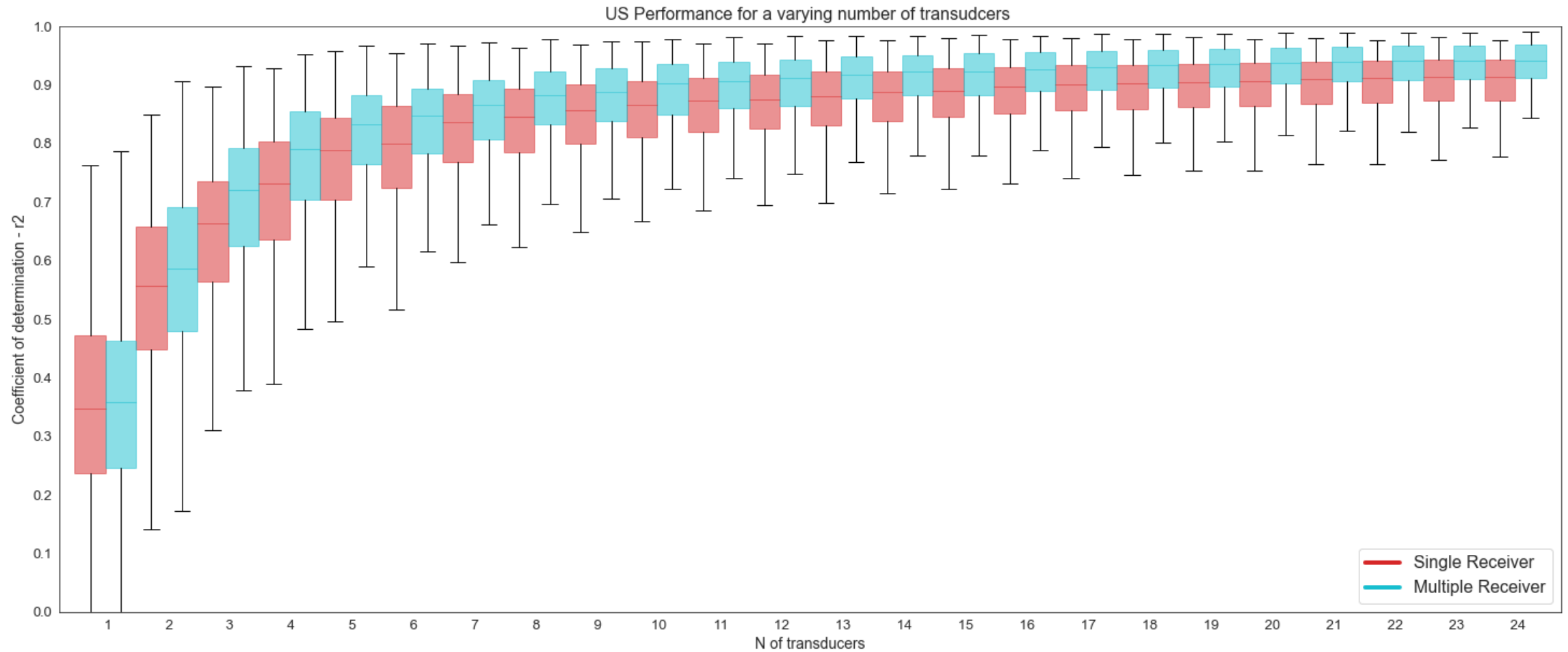
Experiment 1 – Offline



Experiment 1 – Offline



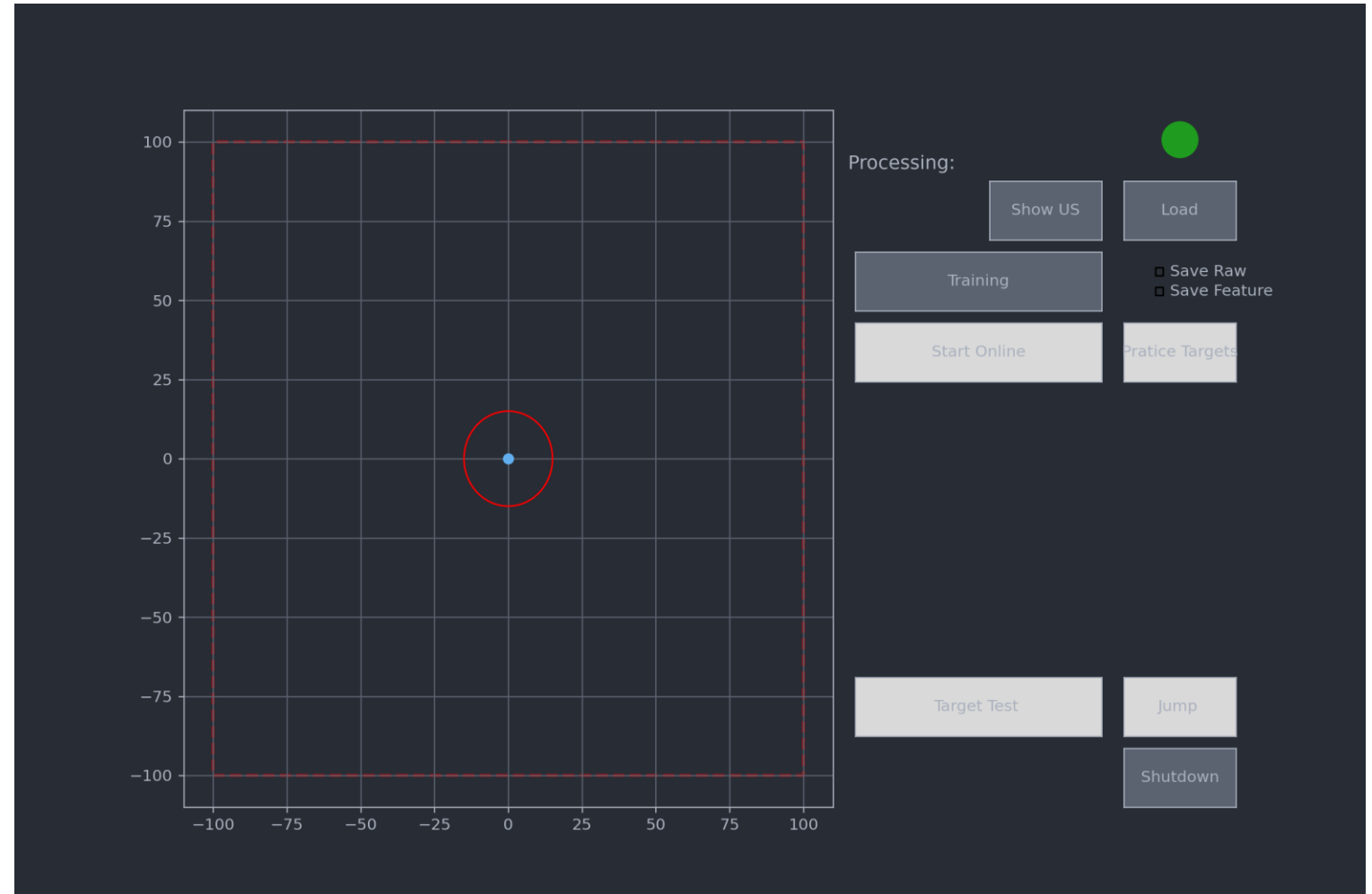
Experiment 1 – Offline



Single Receiver
Multiple Receiver

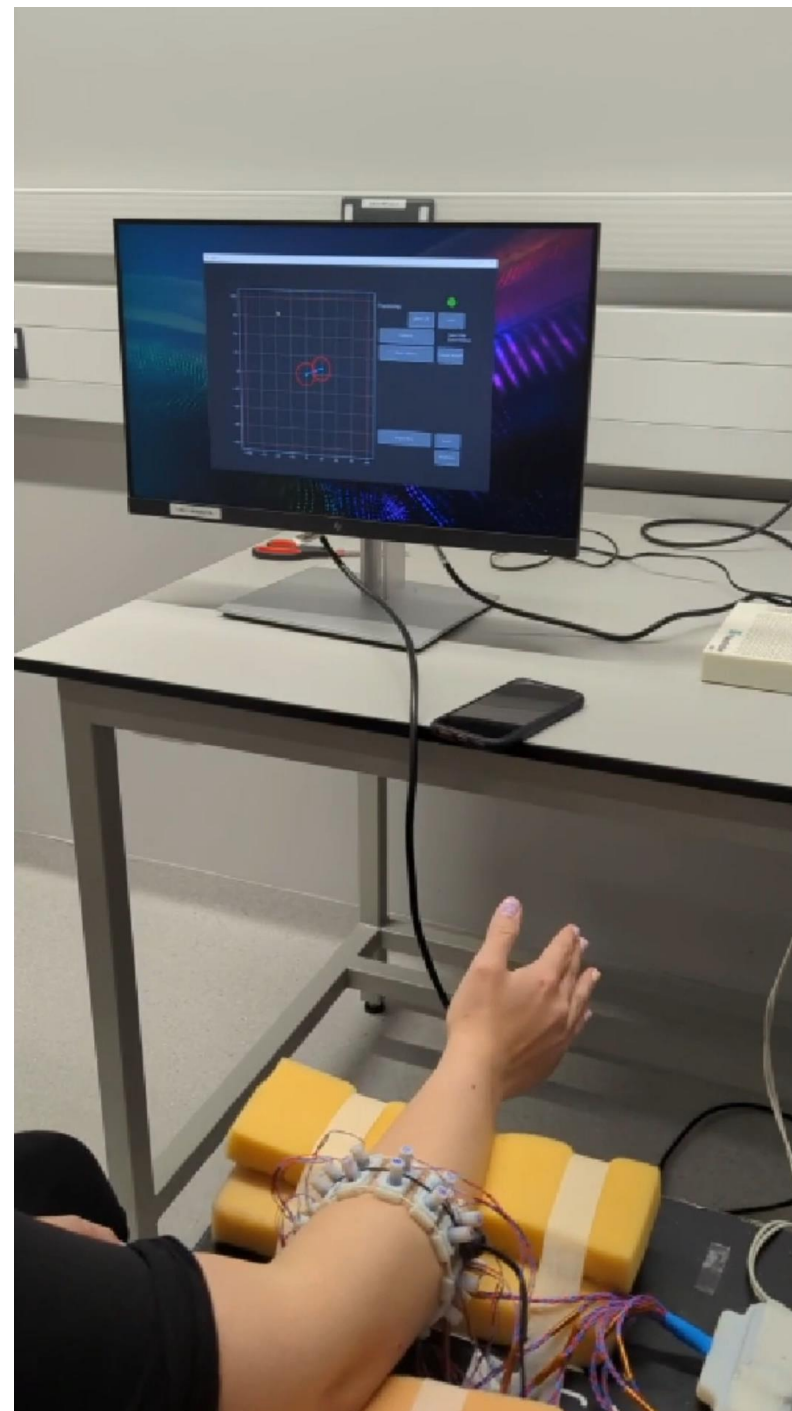
Experiment 2 - Online

- Simultaneous 3 DoF control
 - Flex-Ext
 - Pro-Sup
 - Hand Open-Close
- 8 Participants
- Target Achievement Test
 - 26 targets
 - 30s to reach – stay for 0.5s
- Requiring simultaneous activation of 1 DoF, 2 DoF and 3 DoF



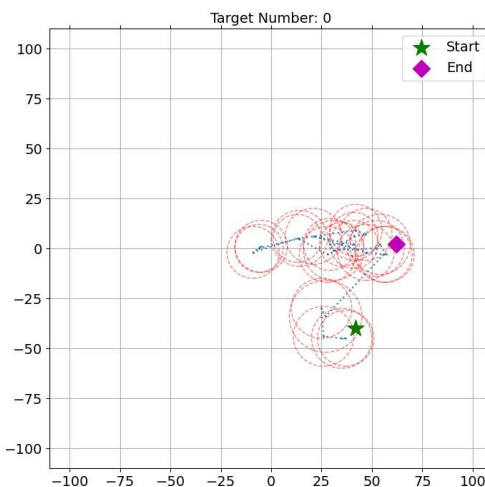
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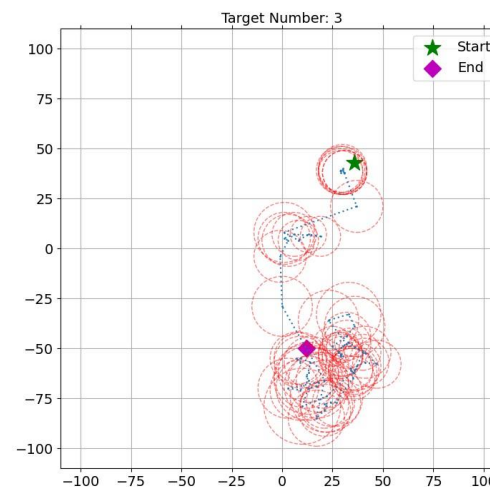


Experiment 2 - Online

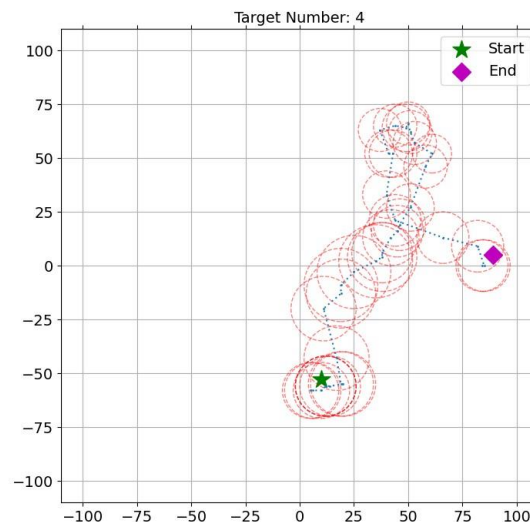
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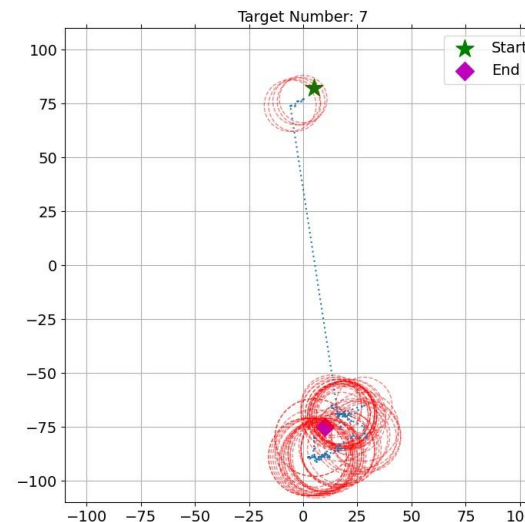
(A)



(B)



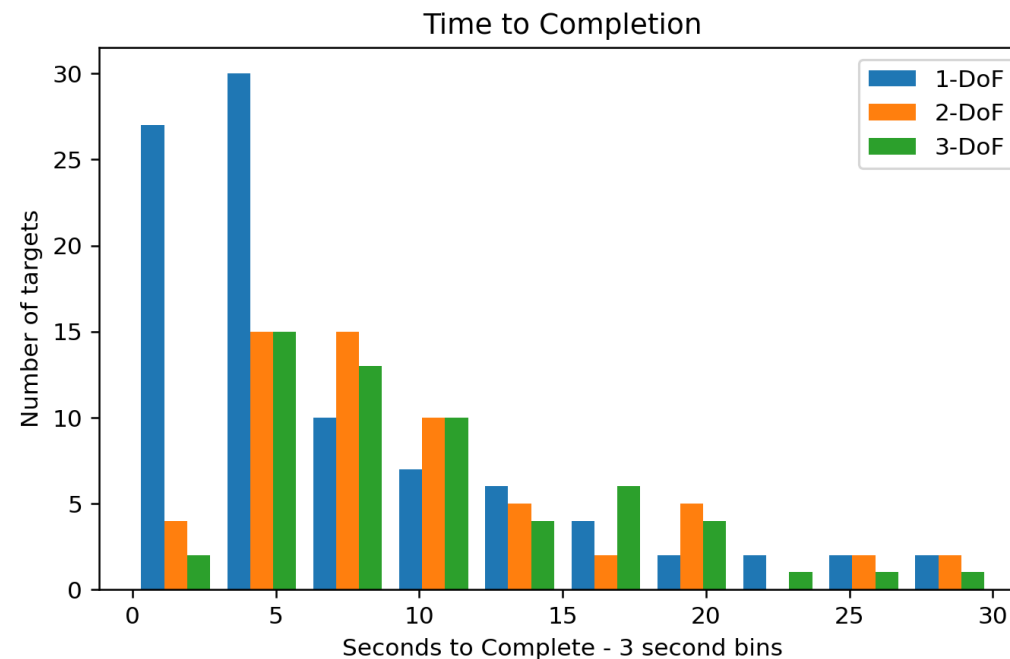
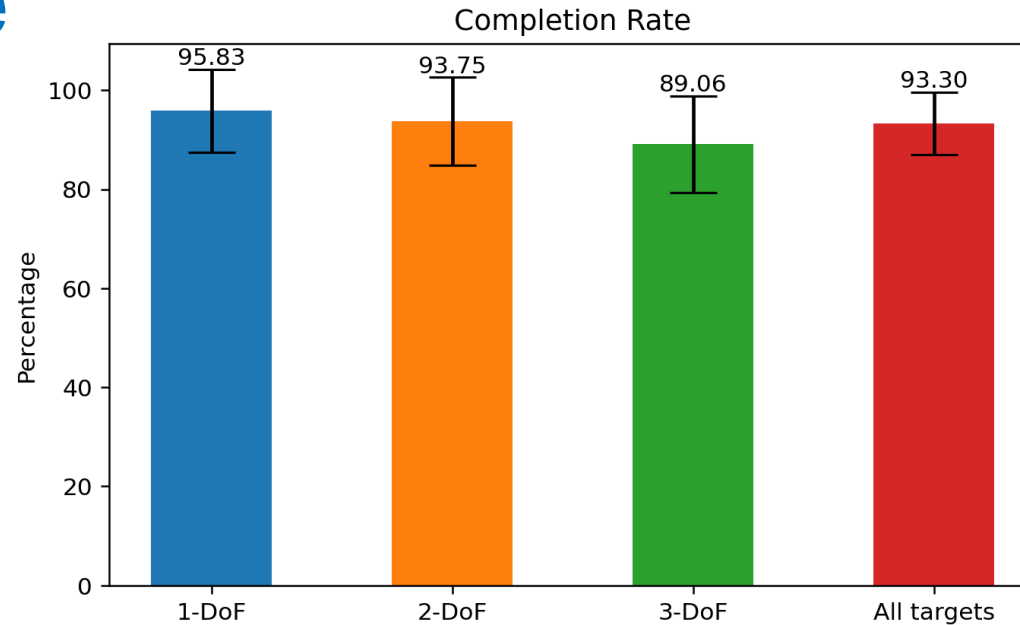
(C)



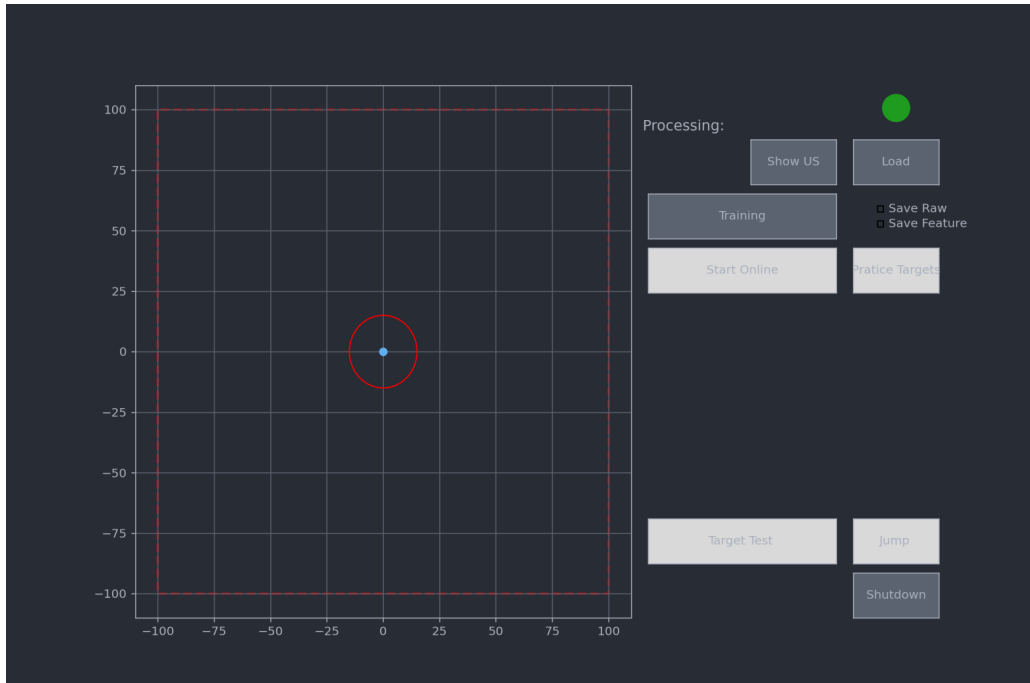
(D)

Experiment 2 - Online

- Simultaneous 3 DoF control
 - Flex-Ext
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 - Hand Open-Close
- 8 Participants
- Target Achievement Test
 - 26 targets
 - 30s to reach – stay for 0.5s
- Requiring simultaneous activation of 1 DoF, 2 DoF and 3 DoF



Towards validation on Prosthesis



[1]



[2]



[3]

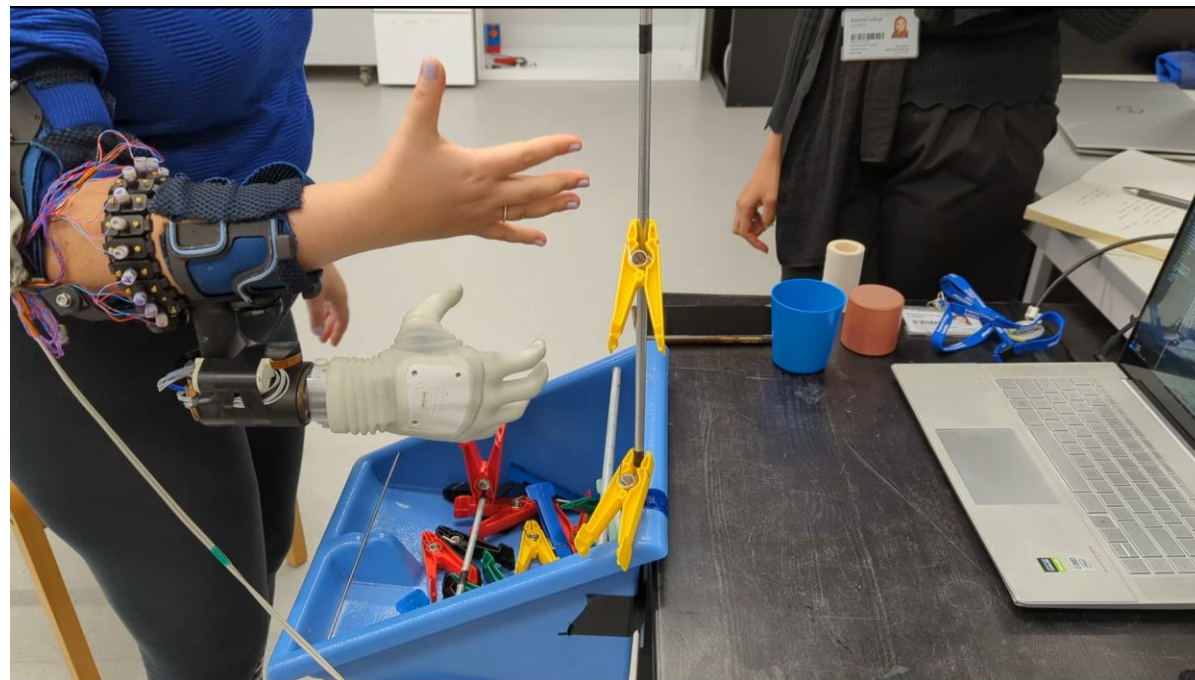


[4]

[1] Ossur i-Limb
[2] TASKA Hand

[3] OtoBock
Michelangelo
[4] Prensilia IH2
Azzurra

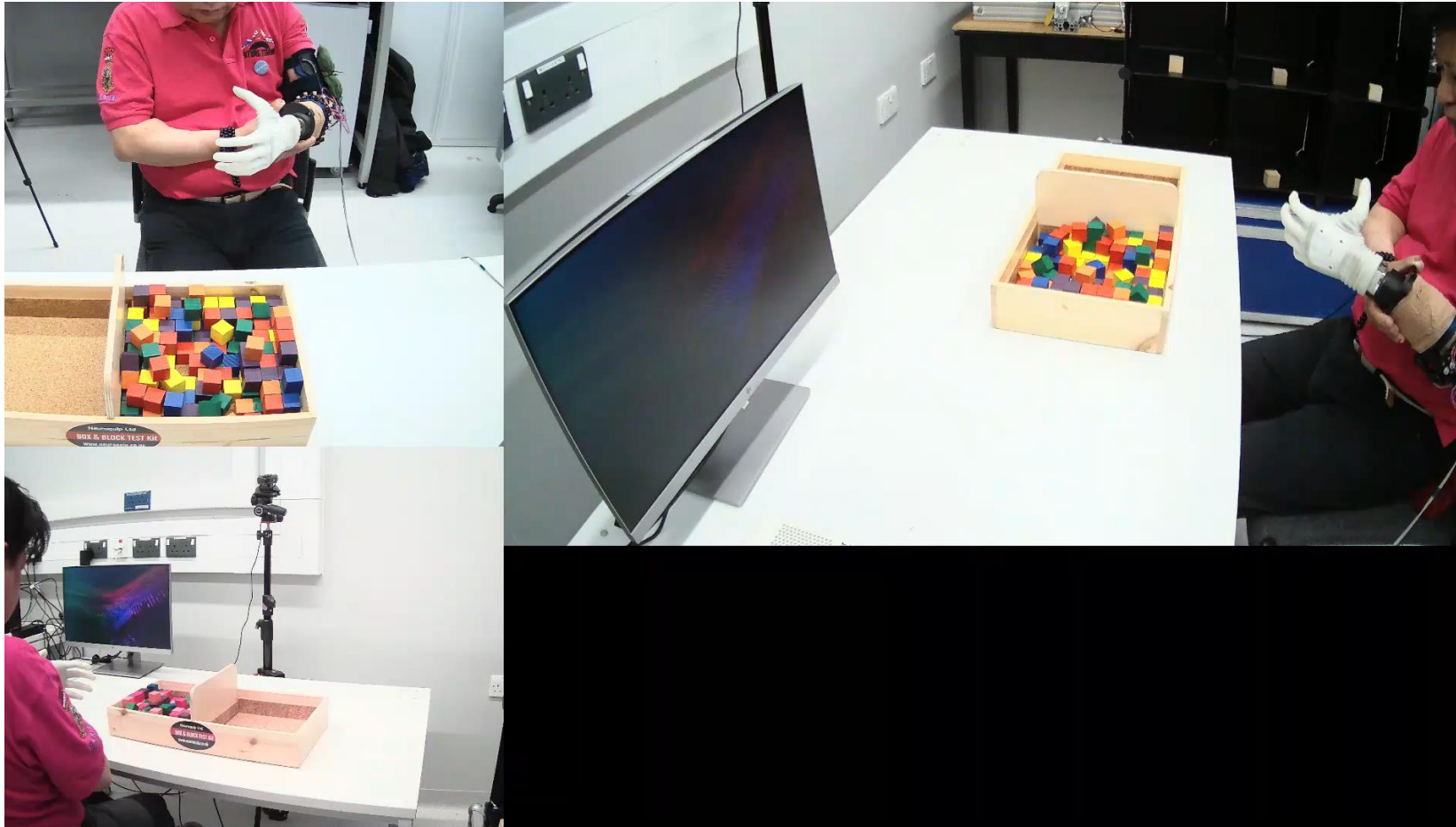
Towards validation on Prosthesis



Towards validation on Prosthesis



Towards validation on Prosthesis



Issues:

- Unsatisfactory socket fit
- Limited space for sensors
- Poor coverage of stump
- Sensor slippage

Towards validation on Prosthesis

Traditional Thermoplastic Socket Fabrication

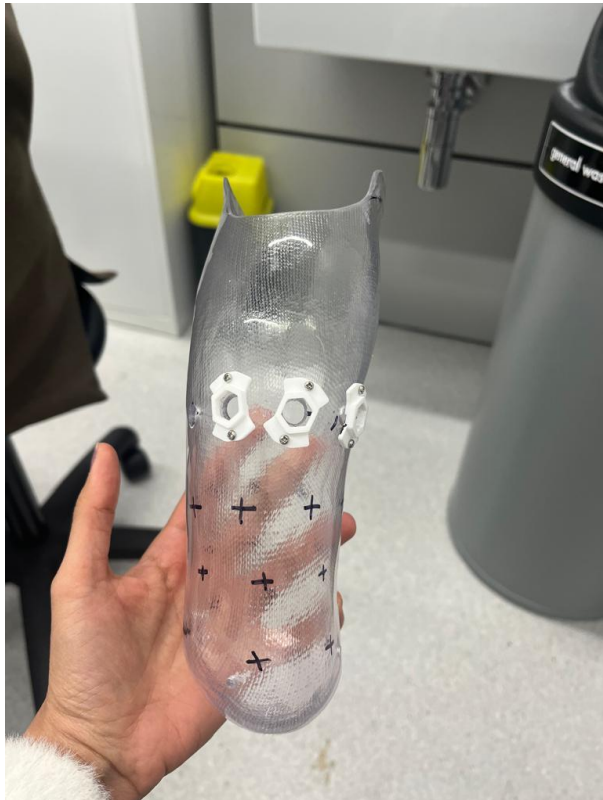


Towards validation on Prosthesis

Traditional Thermoplastic
Socket Fabrication



Individualised design of a
“constellation of sensors”

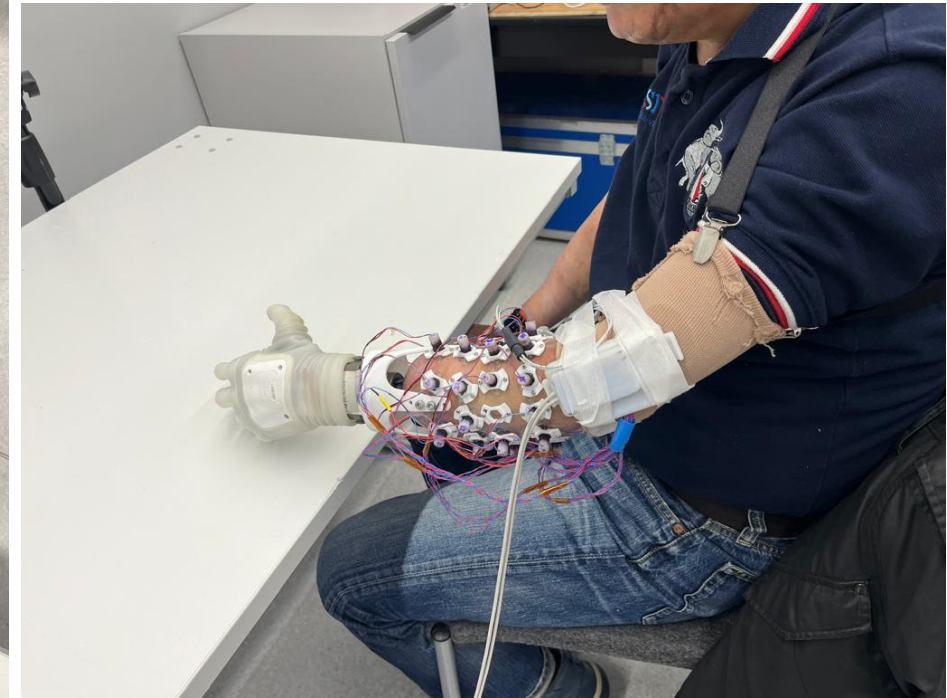
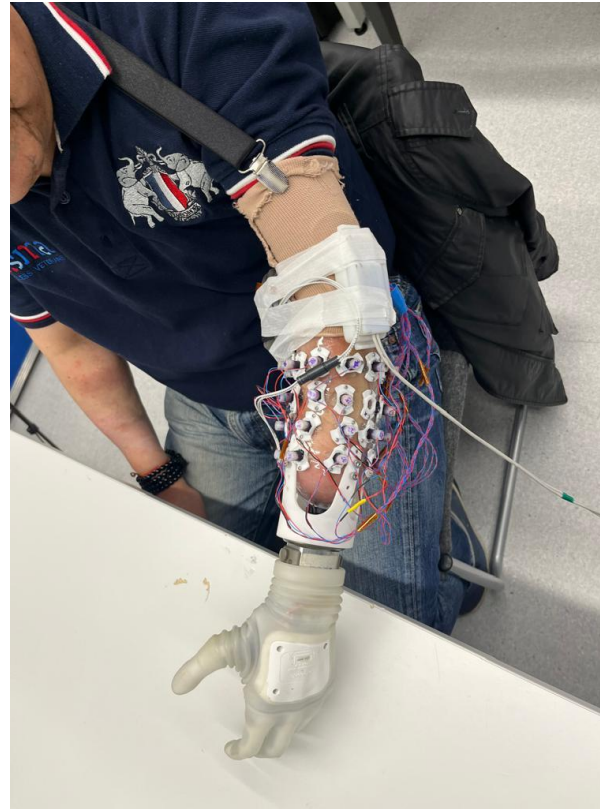
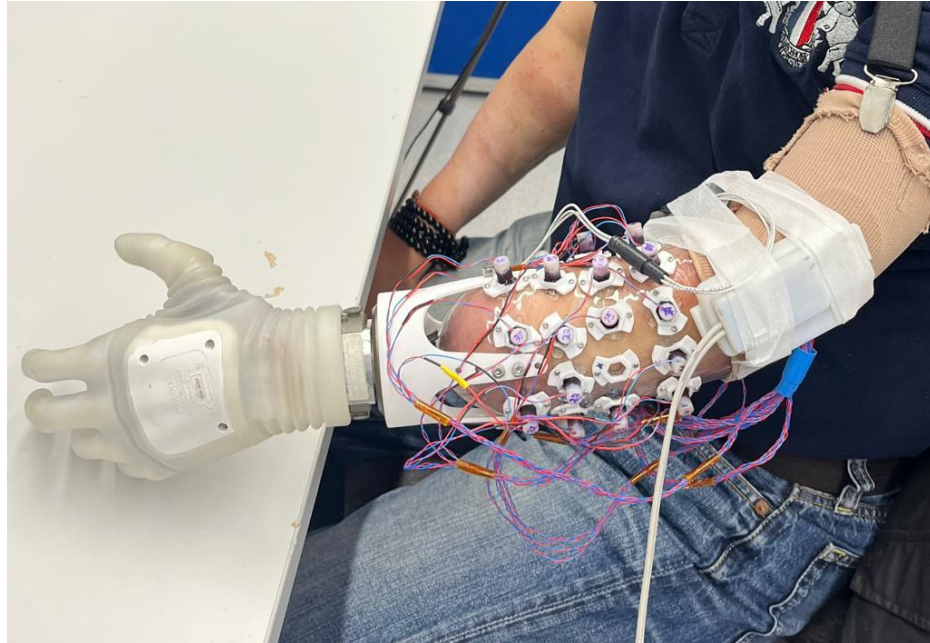


Towards validation on Prosthesis

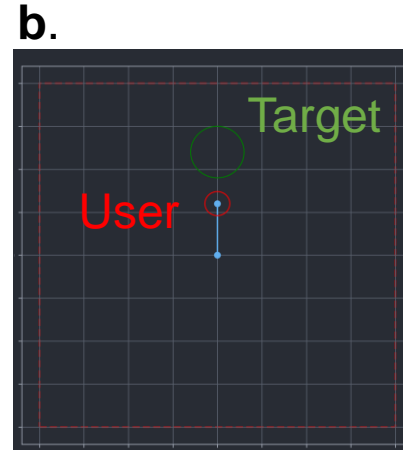
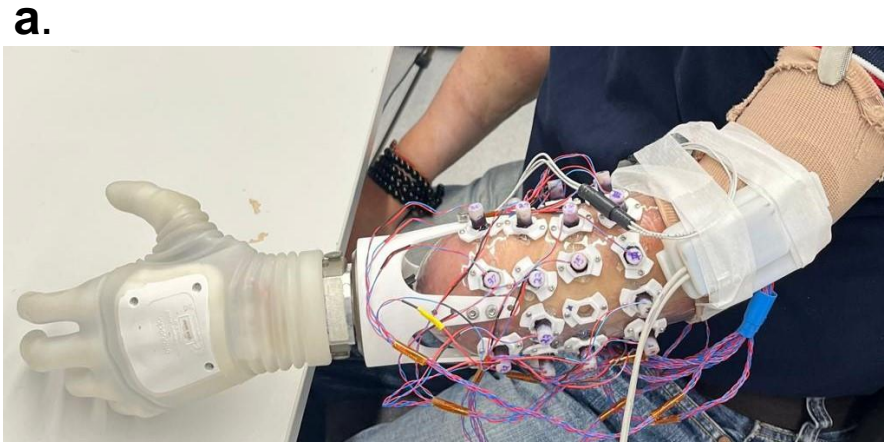
Traditional Thermoplastic
Socket Fabrication



Individualised design of a
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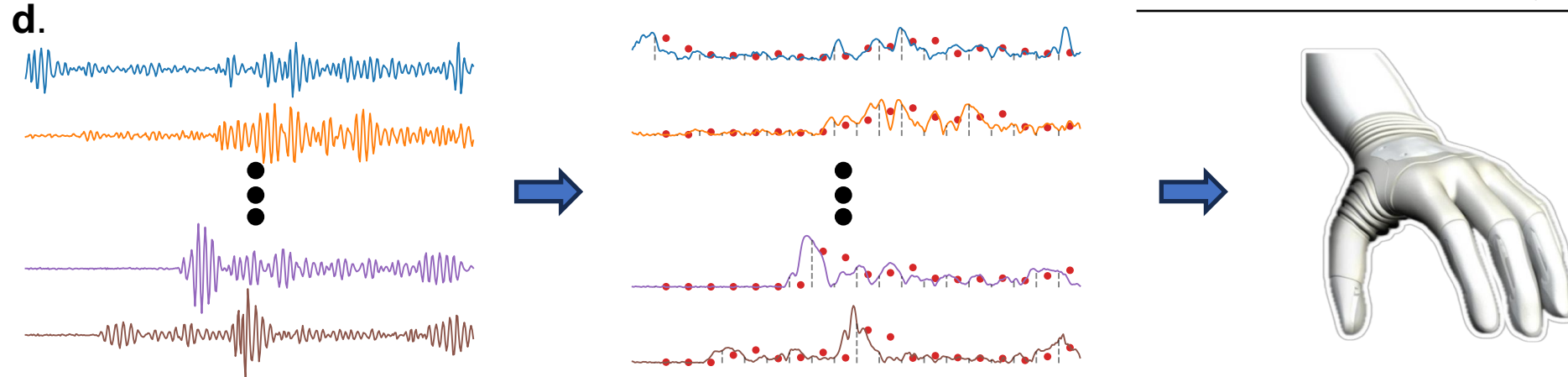


Towards validation on Prosthesis



c.

	Participant Results
Offline	$0.66 \pm 0.12 r^2$
TAC Test	11 out of 18 Targets (61%)
Box and Blocks	7 ± 1 blocks in 60 seconds
Clothespin Relocation	15 ± 3 seconds per clothespin (9 successes out of 10)



Towards validation on Prosthesis



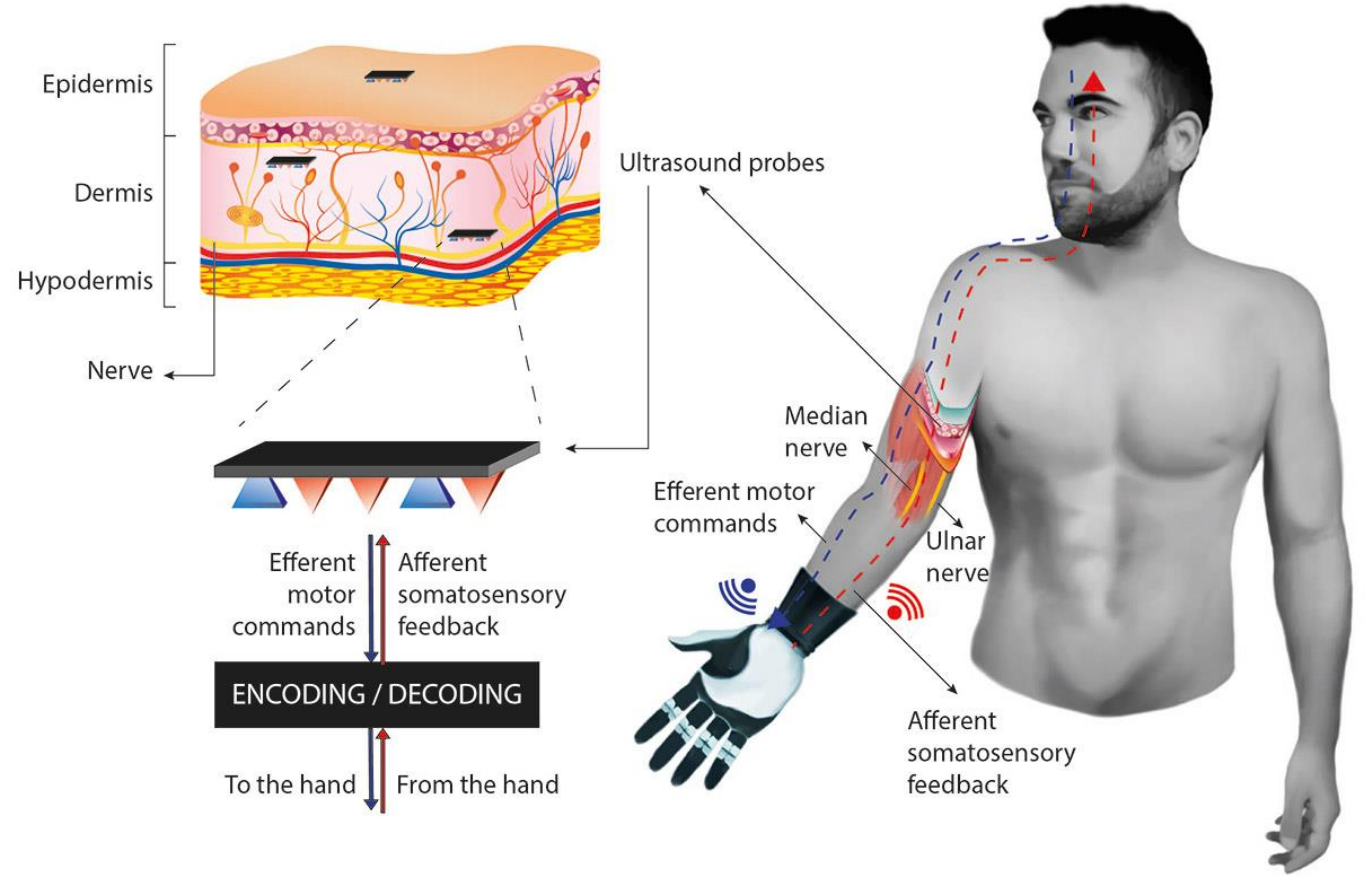
Topics



1. Motivation
2. What is Ultrasound?
3. Application 1. Motor Unit Decomposition via Ultrafast Ultrasound
4. Break Time
5. Translational challenges: Laboratory → Real-World
6. Application 2. Interfacing with Wearable A-mode Ultrasound
- 7. Questions and Answers**



Acknowledgment



Thank you for the Attention

Questions?

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- Loredana Zollo
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- Dario Farina

And many others!!!