The evolution and application of mechanical instruments in brain-computer interface technology

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Abstract. Brain-Computer Interfaces (BCIs) are innovative systems that facilitate direct communication between the human brain and external devices. Leveraging advances in neuroscience and engineering, BCIs can decode neural activity, allowing users to control computers, prosthetics, or even communicate thoughts without the need for peripheral motor activity. While primarily developed for assisting individuals with motor or communication disabilities, the potential applications span from gaming to advanced robotics. Despite rapid progress, challenges remain in achieving high-resolution decoding and ensuring long-term stability. As the field advances, ethical considerations about privacy, security, and human augmentation also emerge. This paper aims to provide an in-depth exploration of the field of BCI technology. The first part illustrates the remarkable evolution undergone by BCI, from electroencephalography (EEG) to functional magnetic resonance imaging (fMRI). The next part mainly describes the principle of BCI and the devices that are used for processing the interface. The following part highlights the challenge faced by BCI and how ethics and security should be deliberated.

Keyword: Brain-Computer Interface Technology, Mechanical Instruments, Communication, Channel.

1. Introduction

Brain-Computer Interfaces (BCIs), often hailed as the next frontier in neuroscience and technology, serve as conduits between the human brain and external devices, blurring the lines between biological cognition and digital computation. Emerging from the tantalizing idea of directly interfacing the brain with machines, BCIs open up avenues that were once the stuff of science fiction. Whether it's the prospect of controlling prosthetic limbs with mere thought, communicating without vocalization, or enhancing cognitive capacities, BCIs stand poised to revolutionize the way we interact with the world and ourselves. Currently, though the upgrading, in terms of surgery application, researchers are investigating and enhance the mobility of amputated through brain-controlled devices. More than this, while detecting the brain activity signal, the development of neurology is processing. The scientists use monitoring and feedback of brain activity to apply restoration of function and neuromodulation, which is an artificial activation of neural pathways to reproduce lost functions. Even though our main limitation in understanding human movements is our poor ability to record in vivo from a large number of neural cells, increased performance in cognitive tasks has been shown to be associated with things like visual tasks and attentional tasks.

Historically, the human desire to understand the brain's enigmatic intricacies has been a driving force behind countless scientific endeavors. However, it was only in the latter half of the 20th century that technology began catching up with ambition, laying the foundation for the development of BCIs. These systems, by translating neuronal signals into machine commands, offer a window into real-time brain activity and a medium to act upon it.

Yet, BCIs are not just about the intersection of brain and machine. They represent a nexus of multiple disciplines, from neurobiology and signal processing to ethics and software engineering. The collaborative essence of BCI research underscores the broader movement towards interdisciplinary innovation in the modern scientific landscape.

As we delve deeper into the realm of BCIs, we are not only exploring technological advancements but also venturing into profound questions about consciousness, identity, and the very nature of experience. This intertwining of technology and philosophy, utility and ethics, makes BCIs one of the most captivating and consequential domains of contemporary research. In this exploration, we will journey through the technical intricacies, transformative applications, and the profound ethical quandaries that BCIs present.

The core part of this article is to show the whole picture about the BCI's development, as well as some components that are installed to run the process. What should be emphasized is the signals detected during the procedure. During the signal acquisition, what sort of methods would be used? Then, when it comes to signal processing, the data about frequencies or some pattern needs to be extracted and classified. The last step is the specific feedback delivered to the user, to what extent should be noticed. As mentioned above, in order to figure it out, the body part will describe some methods by introducing the components and procedures, then seek the answers corresponding. The significance of this is to generate a comprehensive view of BCI and then show its potential to the public.

2. Early Beginnings and Electroencephalography (EEG)

The roots of BCI can be traced back to the late 20th century, when early versions were mainly based on Electroencephalography (EEG) technology[1]. EEG-based systems use electrodes to measure brain waves, which are then amplified and transmitted for data analysis.

Electroencephalography (EEG) is a non-invasive technique used to measure electrical activity of the brain. Key to this method are the electrodes, usually made of silver or gold, that are placed on the scalp to detect electrical potentials generated by neuronal activity [2]. These electrodes are typically arranged based on standardized systems such as the 10-20 system, which specifies their location in relation to anatomical landmarks [3]. Attached to the electrodes is the amplifier, which amplifies the tiny electrical signals to make them recordable [4]. This is followed by the analog-to-digital converter, which translates the analog signals into digital form suitable for computer analysis [5]. Essential to this system is signal processing that aids in filtering out noise, commonly from muscle movements or other external electrical disturbances, and isolating relevant EEG patterns [6]. The processed data is then visualized or recorded through a display system, allowing for real-time monitoring or later analysis [7].

3. Functional Near-Infrared Spectroscopy (fNIRS)

Another non-invasive technique that gained prominence in the 21st century is Functional Near-Infrared Spectroscopy (fNIRS). This method uses light to measure changes in brain blood flow [8].

Functional Near-Infrared Spectroscopy (fNIRS) is a non-invasive neuroimaging technique that gauges brain activity by monitoring changes in blood oxygenation. Central to fNIRS consist of light-emitting sources and detectors. These optodes, positioned on the scalp, transmit and subsequently measure near-infrared light, which traverses the skull and becomes absorbed by oxygenated and deoxygenated hemoglobin [9]. The raw data predominantly represent alterations in concentrations of these hemoglobins, providing indications of regional cerebral activity [10]. The differential pathlength factor is another critical component, accounting for the variable path taken by light depending on the age and the specific cortical region studied [11]. Signal processing fNIRS includes the steps of noise filtering, artifact correction, and extraction of the pertinent hemodynamic responses [12]. Modern

instrumentation also integrates multiplexing and modulation techniques to enhance signal-to-noise ratios and to simultaneously measure from multiple channels [13].

In some applications where extreme accuracy is needed, intracranial electrodes are used [14]. These electrodes are surgically implanted into the brain and provide a high level of precision in recording neural activity. They are instrumental in the diagnosis and treatment of epilepsy [15], allowing for the localization of seizure foci. Furthermore, intracranial electrodes contribute significantly to advancing our understanding of cognitive processes, memory formation, and brain disorders [16]. Their use enables the study of neural activity at a level of detail unmatched by non-invasive methods, making them indispensable in both medical practice and neuroscience research.

4. Challenges and Future Prospects

BCIs promise a revolutionary link between the human brain and external devices, yet they exist with a multitude of technical challenges. Signal acquisition remains a primary concern: non-invasive methods often yield noisy data, with external interferences such as muscular activity or electronic devices confounding the true neural signal. Even invasive methods, which provide clearer signals, carry risks of infection and long-term stability issues due to tissue scarring [17]. Data interpretation is another hurdle, given the brain's complexity. Decoding and translating the myriad of neural activities into actionable commands in real-time requires sophisticated algorithms that can adapt to the user's unique neural patterns and potential changes over time[18]. Additionally, the challenge of achieving high information transfer rates, user comfort, and system portability concurrently remains unresolved, limiting the practical application of BCIs outside the laboratory setting [19].

BCI stands at the crossroads of neuroscience and technology, giving rise to profound ethical implications. One of the primary concerns is privacy. As BCIs can read and interpret neural activity, there's potential for unauthorized access to one's innermost thoughts and emotions, raising questions about cognitive liberty and mental privacy [20]. The possibility of manipulating these signals further introduces the threat of cognitive or emotional control by external entities. Accessibility and fairness come into play as well; as BCI technologies advance, there's potential for socio-economic divides if only a privileged few can access or afford them, leading to enhanced cognitive or communicative abilities in select populations [21]. Additionally, long-term usage might alter fundamental aspects of human identity, blurring the line between human and machine and leading to existential dilemmas regarding authenticity and agency.

5. Conclusion

BCI represents a confluence of biotechnology, neuroscience, and computational advancements, holding transformative potential for the future of human-machine interaction. As a bridge between the neural substrate and external systems, BCIs offer possibilities ranging from rehabilitation tools for patients with neural dysfunctions to enhancing human capabilities in ways previously relegated to the realm of science fiction. Their potential to restore lost sensory modalities, enable communication for the locked-in, and enhance cognitive processing presents a beacon of hope and an avenue for groundbreaking innovations.

However, the journey towards realizing the full potential of BCIs is fraught with challenges, both technical and ethical. From ensuring high-resolution signal acquisition and real-time data interpretation to confronting privacy concerns and the risks of cognitive manipulation, BCIs exemplify the delicate balance required when interfacing technology with the human psyche. Their evolution underscores the necessity of interdisciplinary collaboration, merging the expertise of neuroscientists, engineers, ethicists, and policymakers.

Furthermore, as BCIs become more integrated into society, broader societal implications will emerge. The risk of socio-economic divides based on access to BCI technology, as well as the philosophical dilemmas about human identity in an era of intertwined biological and machine components, necessitates a proactive approach to regulation and public discourse.

In conclusion, BCIs stand as a testament to the human endeavor's audacity and innovation. They beckon a future where the barriers between mind and machine dissolve, offering vast potentialities but also demanding conscientious stewardship. As we inch closer to this future, a collective commitment to responsible development, informed by both scientific rigor and ethical reflection, becomes paramount. The legacy of BCIs will not only be measured by the technological marvels they produce but also by the maturity with which society navigates their profound implications.

References

[1]   Wolpaw, J. R., Birbaumer, N., McFarland, D. J., Pfurtscheller, G., & Vaughan, T. M. (2002). Brain–computer interfaces for communication and control. Clinical Neurophysiology, 113(6), 767-791.

[2]   Nunez, P. L., & Srinivasan, R. (2006). Electric fields of the brain: The neurophysics of EEG. Oxford Univesity press. New York

[3]   Jasper, H. H. (1958). The ten-twenty electrode system of the International Federation. Electroencephalography and Clinical Neurophysiology, 10, 371-375.

[4]   Teplan, M. (2002). Fundamentals of EEG measurement. Measurement Science Review, 2(2), 1-11.

[5]   Luck, S. J. (2014). An Introduction to the Event-Related Potential Technique. Cambridge, MA

[6]   Widmann, A., Schröger, E., & Maess, B. (2015). Digital filter design for electrophysiological data – a practical approach. Journal of Neuroscience Methods, 250, 34-46.

[7]   Sanei, S., & Chambers, J. A. (2007). EEG signal processing. Chichester, UK: John Wiley & Sons.

[8]   Naseer, N., & Hong, K. S. (2015). fNIRS-based brain-computer interfaces: a review. Frontiers in Human Neuroscience, 9, 3.

[9]   Obrig, H., & Villringer, A. (2003). Beyond the visible—Imaging the human brain with light. Journal of Cerebral Blood Flow & Metabolism, 23(1), 1-18.

[10]   Boas, D. A., Elwell, C. E., Ferrari, M., & Taga, G. (2014). Twenty years of functional near-infrared spectroscopy: Introduction for the special issue. NeuroImage, 85, 1-5.

[11]   Duncan, A., Meek, J. H., Clemence, M., Elwell, C. E., Tyszczuk, L., Cope, M., & Delpy, D. T. (1996). Optical path length measurements on adult head, calf and forearm and the head of the newborn infant using phase resolved optical spectroscopy. Physics in Medicine & Biology, 40(2), 295

[12]   Scholkmann, F., Kleiser, S., Metz, A. J., Zimmermann, R., Pavia, J. M., Wolf, U., & Wolf, M. (2014). A review on continuous wave functional near-infrared spectroscopy and imaging instrumentation and methodology. NeuroImage, 85, 6-27.

[13]   Gervain, J., Mehler, J., Werker, J. F., Nelson, C. A., Csibra, G., Lloyd-Fox, S., ... & Aslin, R. N. (2011). Near-infrared spectroscopy: A report from the McDonnell infant methodology consortium. Developmental Cognitive Neuroscience, 1(1), 22-46.

[14]   Schalk, G., & Leuthardt, E. C. (2011). Brain–computer interfaces using electrocorticographic signals. IEEE Reviews in Biomedical Engineering, 4, 140-154.

[15]   Bauer, P. R., Reitsma, J. B., Houweling, B. M., Ferrier, C. H., & Ramsey, N. F. (2017). Can fMRI safely replace the Wada test for preoperative assessment of language lateralisation? A meta-analysis and systematic review. Journal of Neurology, Neurosurgery & Psychiatry, 88(11), 958-966.

[16]   Rutishauser, U., Ross, I. B., Mamelak, A. N., & Schuman, E. M. (2010). Human memory strength is predicted by theta-frequency phase-locking of single neurons. Nature, 464(7290), 903-907

[17]   Nicolelis, M. A., & Lebedev, M. A. (2009). Principles of neural ensemble physiology underlying the operation of the brain–machine interfaces. Nature Reviews Neuroscience, 10(7), 530-540.

[18]   He, B., & Wu, D. (2014). Transfer of brain-computer interface technology into clinical applications. Brain-Computer Interfaces, 1(4), 231-240.

[19]   Lebedev, M. A., & Nicolelis, M. A. (2006). Brain–machine interfaces: Past, present and future. Trends in Neurosciences, 29(9), 536-546.

[20]   Yuste, R., Goering, S., Bi, G., Carmena, J. M., Carter, A., Fins, J. J., ... & Rommelfanger, K. S. (2017). Four ethical priorities for neurotechnologies and AI. Nature News, 551(7679), 159.

[21]   Kellmeyer, P., Cochrane, T., Müller, O., Mitchell, C., Ball, T., Fins, J. J., & Biller-Andorno, N. (2016). The effects of closed-loop medical devices on the autonomy and accountability of persons and systems. Cambridge Quarterly of Healthcare Ethics, 25(4), 623-633.