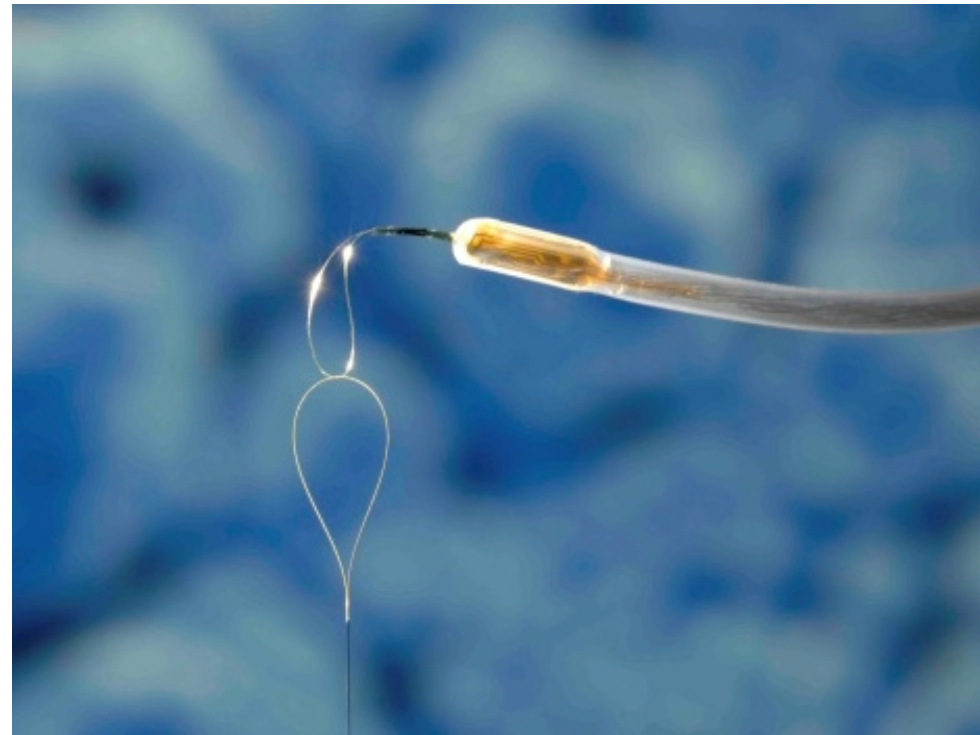

NEUE ENTWICKLUNGEN AUF DEM GEBIET DER NEUROPROTHETIK

Wechselwirkung Zelle/Material – Implantate und Sensoren in der Medizintechnik
Workshop Heraeus Holding GmbH, 21. Januar 2016, Hanau

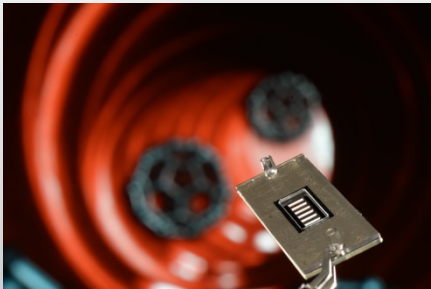

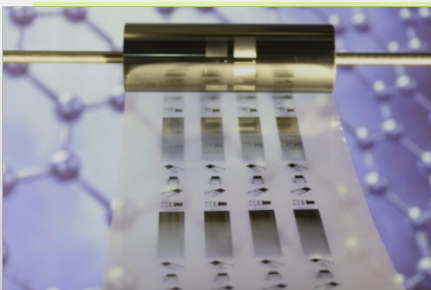




Fraunhofer Institute for Biomedical Engineering IBMT

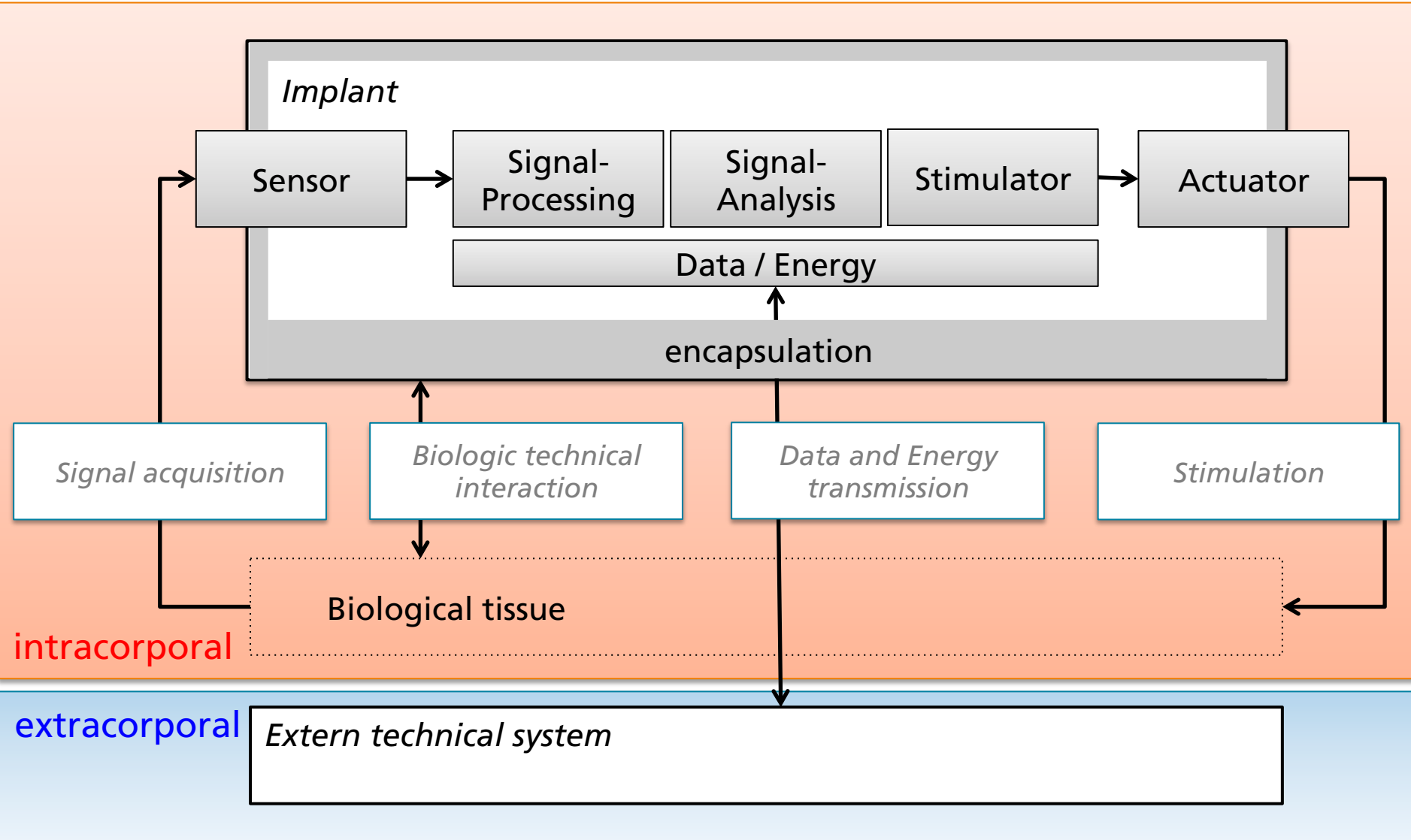
- Largest research and development division in the field of ultrasound within Europe
- World-wide leading developer of cryo technology and biobank design
- Core competences
 - Neuroprosthetics
 - Development of automated in vitro culture systems
 - Molecular and cellular biotechnology
 - Cell-free bioproduction
 - Nanobiotechnology
 - Biochip and point-of-care-technologies
 - (mobile) laboratory
 - Information technology
 - Regulatory affairs of medical systems
- Founded: 1987
- **Headquarter IBMT: Sulzbach**



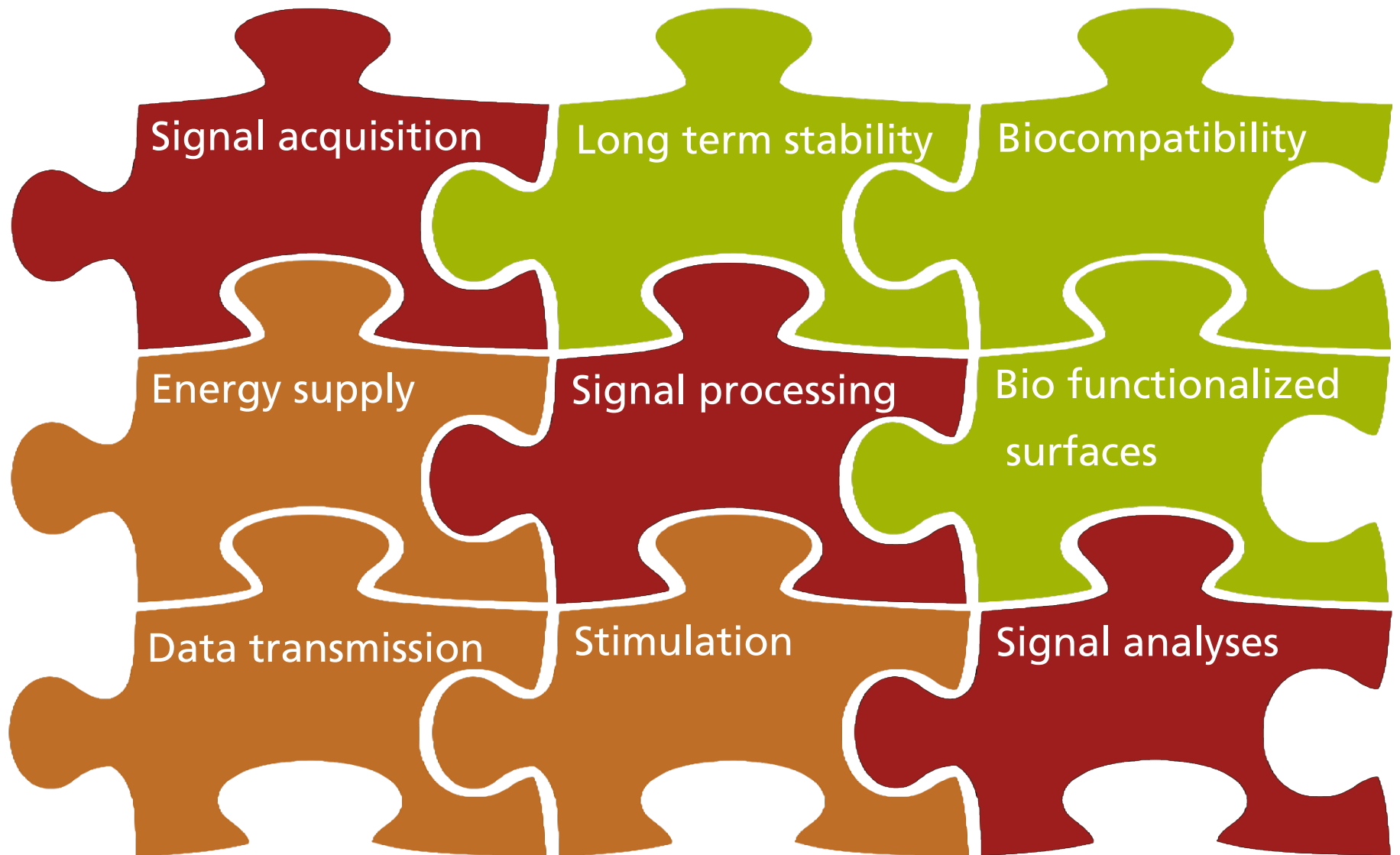
Fraunhofer Institute for Biomedical Engineering IBMT

<p>Cryo & Stem Cell Technology</p> <ul style="list-style-type: none"> Pluripotency & Regeneration Biomedical Optics Automation Processes Marine Biopolymers (Coquimbo/Chile) Cooperation Laboratory EFPIA (Babraham/UK) <p>Bioprocessing & Bioanalytics</p> <ul style="list-style-type: none"> Biomonitoring & Cryobanking Cellular Bioprocessing Preclinical Nanotechnology & Nanotoxicology 	<p>MEDICAL BIOTECHNOLOGY</p>	
<p>Medical Ultrasound</p> <ul style="list-style-type: none"> Ultrasound Systems/Clinical Applications Biomedical Ultrasound Research High-Frequency Piezosystems <p>Technical Ultrasound</p> <ul style="list-style-type: none"> Technical Ultrasound Systems Transducer Development Manufacturing Technology (ISO 9001 & 13485) Simulation 	<p>ULTRASOUND</p>	
<p>Biomedical Microsystems</p> <ul style="list-style-type: none"> Microsensors & Microfluidics Biotelemetry Active Implants <p>Medical Engineering & Neuroprosthetics</p> <ul style="list-style-type: none"> Neuromonitoring Neuroprosthetics Silicone Technology Health Information Systems 	<p>BIOMEDICAL ENGINEERING</p>	
<p>Main Departments</p>		 

Interfaces



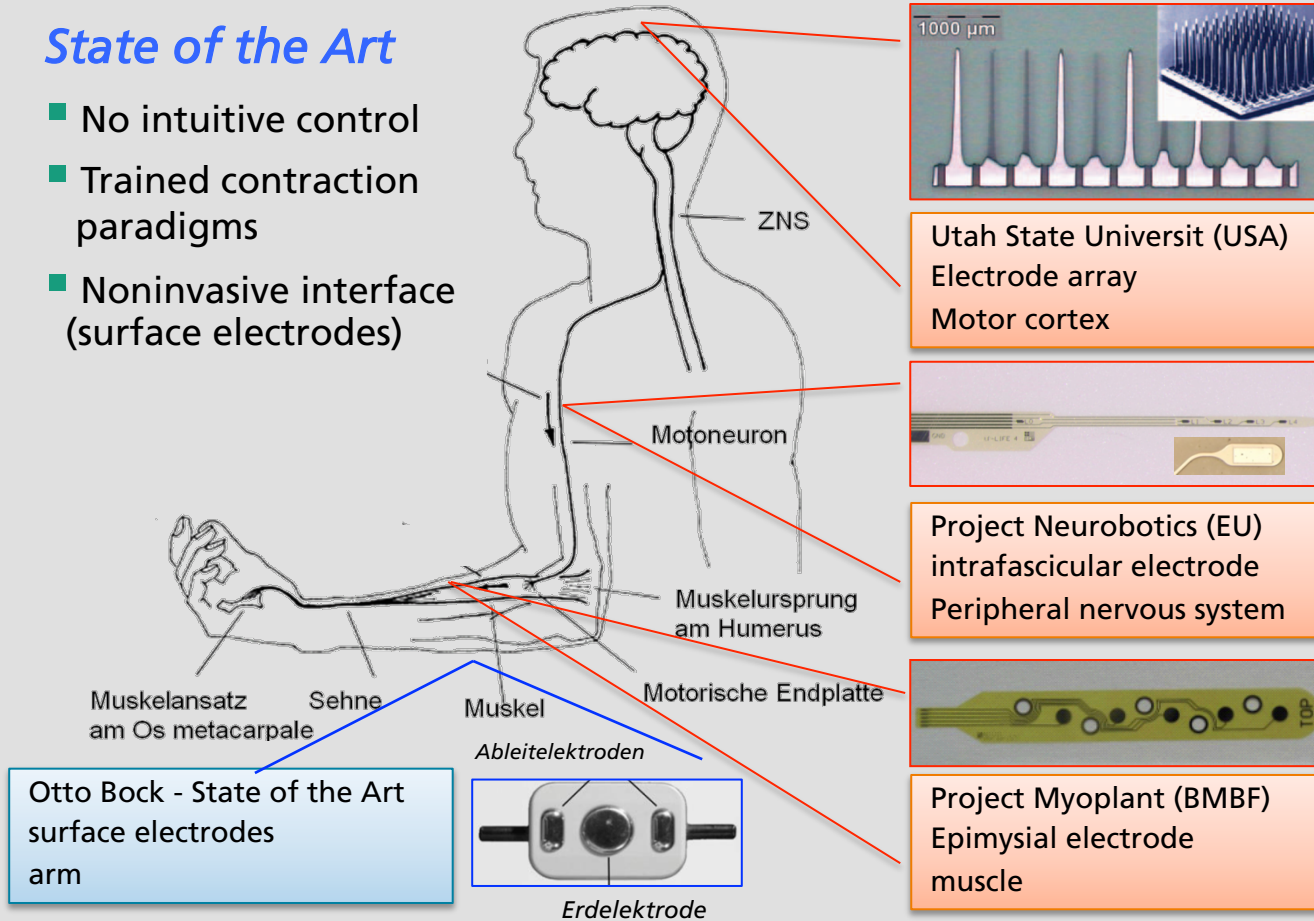
Challenges



(Mind) Controlled Hand Prostheses

State of the Art

- No intuitive control
- Trained contraction paradigms
- Noninvasive interface (surface electrodes)



Research

- Mind controlled
- Association of a movement
- Invasive interface (implantable electrodes)



IBMT



Myoplast

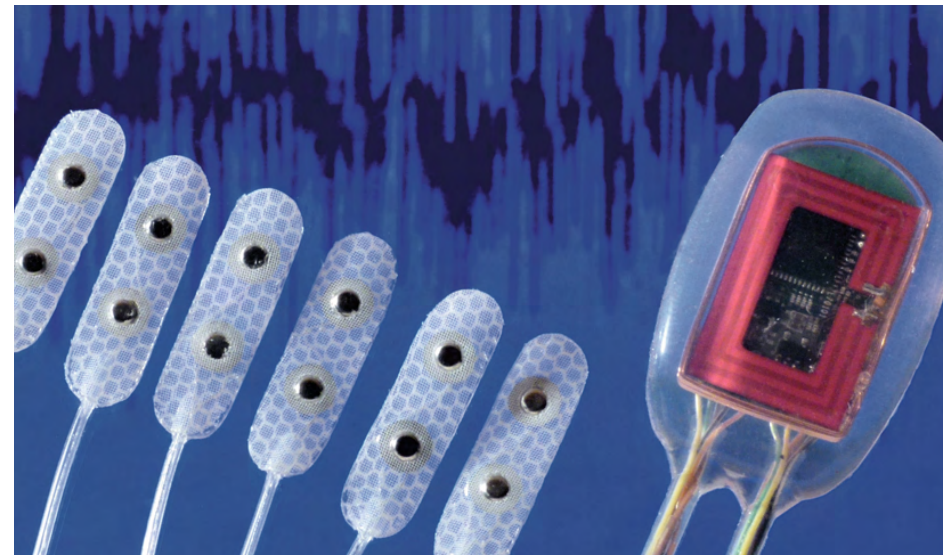
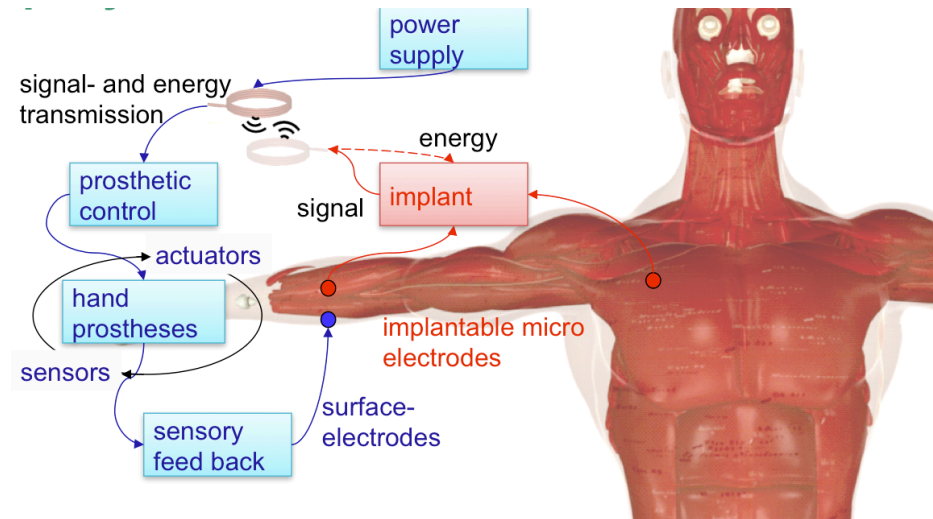
IBMT

[1] Hochberg, L.R. et al.: Neuronal ensemble control of prosthetic devices by a human with tetraplegia, nature Vol 442, 13 July 2006, pp 164-171 (2006).

[2] Hoffmann, K.-P., H. Dietl: „Handprothesen: Nach dem Vorbild der Natur“ Deutsches Ärzteblatt 04/10 2010: 11-14

Epimysial Electrode

- Control of upper extremity prostheses by a new type of permanently implanted EMG electrodes
- Implantable telemetric link for signal and energy
- Evaluation of the entire implant system in the animal model
 - Electrodes
 - Data processing
 - Telemetric link (energy and data)

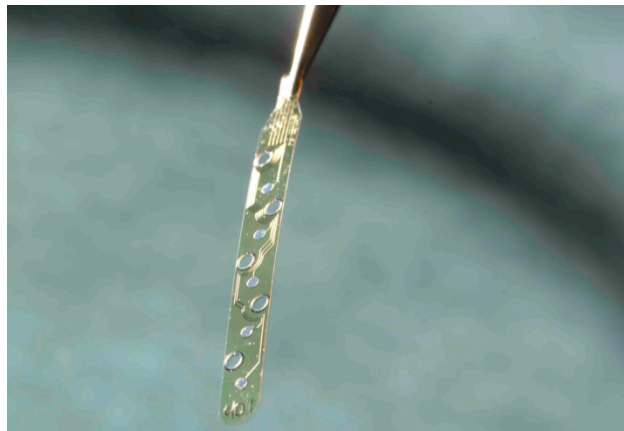


Epimysial Electrode

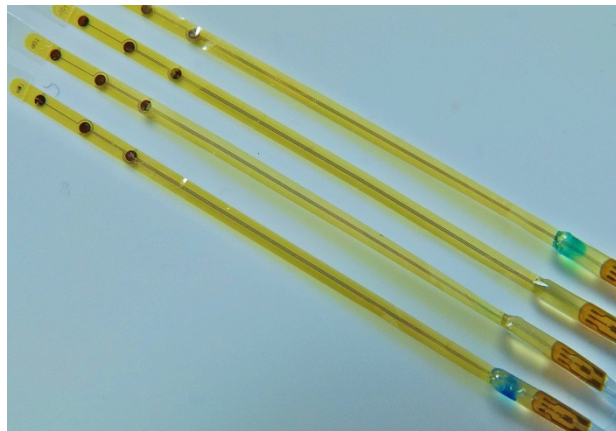
- Typical muscle length contraction ~ 5%
- Mechanical longtime stability
- Optimization of the Electrode design
- Changes in the design, Different materials
- Additional mechanical characterization



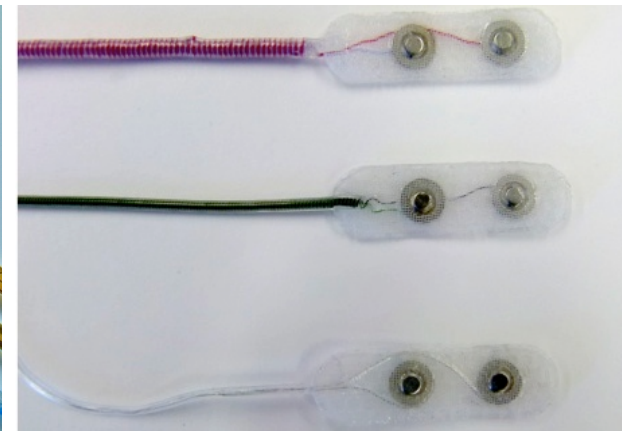
Polyimide



Polyimide

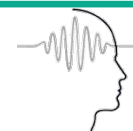
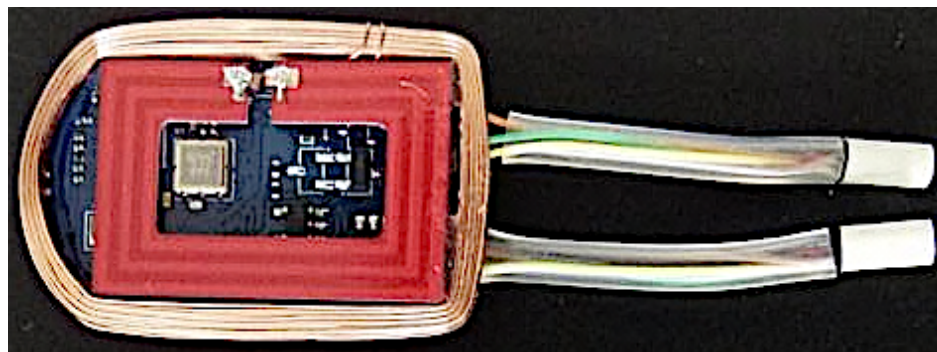
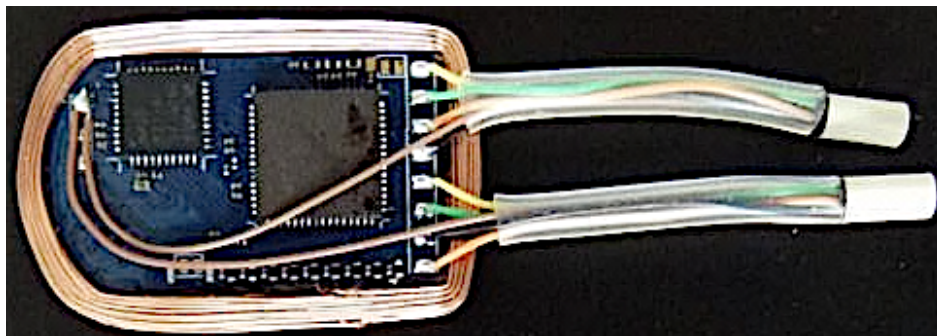


PDMS



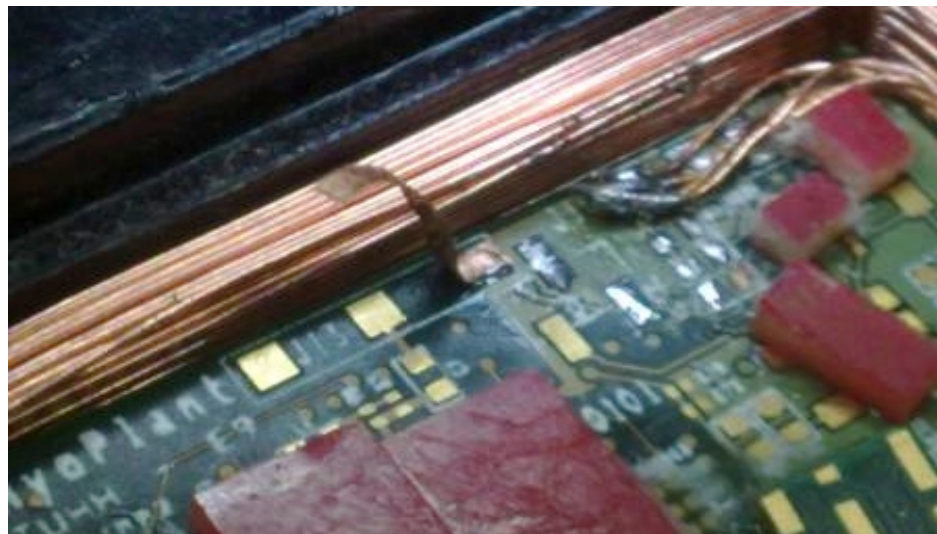
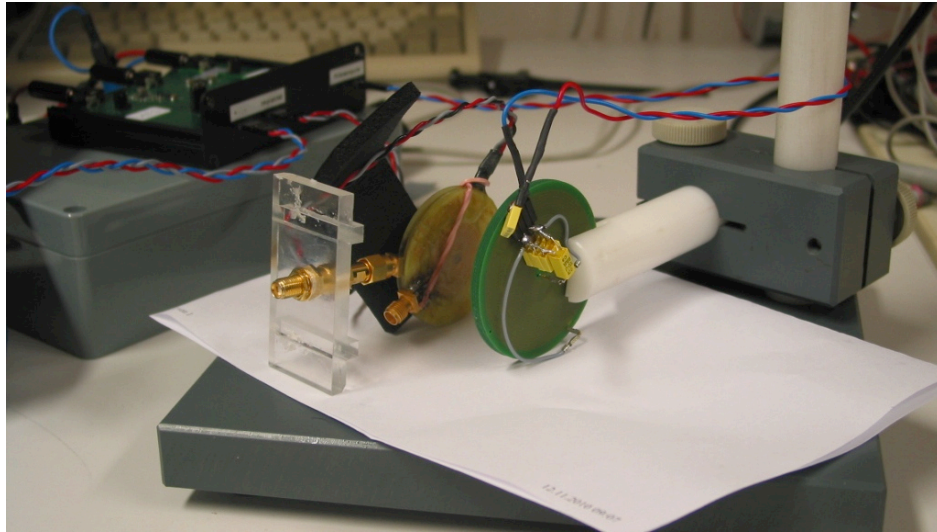
Implant (1)

- Electronics capsuled in silicone (Size 38x25x8 mm)
- Application specific integrated circuit (ASIC)
 - Two stage differential amplifier with adjustable gain
 - Band-pass 6 – 1500 Hz
- Microcontroller (Texas Instruments MSP430)
- Signal transmission with RF transceiver: Zarlink ZL70101
 - Nearly real-time transmission up to a rate ~70kBit/s
 - MICS band between 402 and 405 MHz
- Inductive coupled energy supply



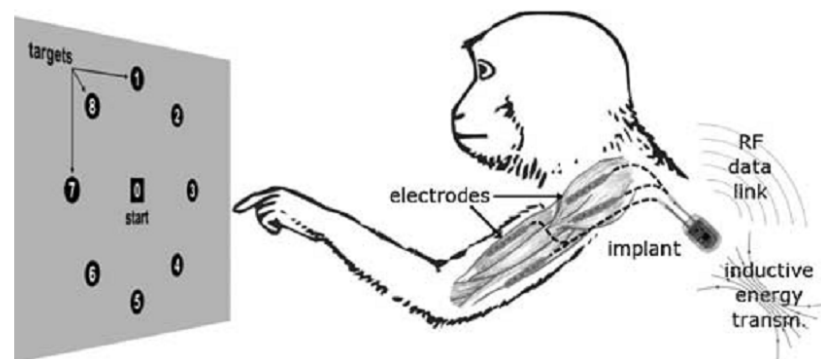
Implant (2)

- Two multipolar connectors (NCP-06, Omnetics Connector Corporation)
- Intra-operatively sealed with silicone (MED2000, Nusil)
- IBMT Configuration for data transfer
 - Transfer rate: ~260 kBit/s
 - Error rate: ~1% (optimal link)
 - Latency (Signal acquisition, conditioning and transmission): ~23 ms \pm 7ms
 - Up to 10 channels digitized with 10 bit resolution



Experimental Setup

- Rhesus macaque (7 years old)
- Implantation into the musculus deltoideus
- Electrode placement
 - (sub-) epimysial
 - Longitudinal
- The animal was trained to touch the visual cues
- Moving its hand to the respective peripheral target position (from the central to one of the eight peripheral positions and back to the central)

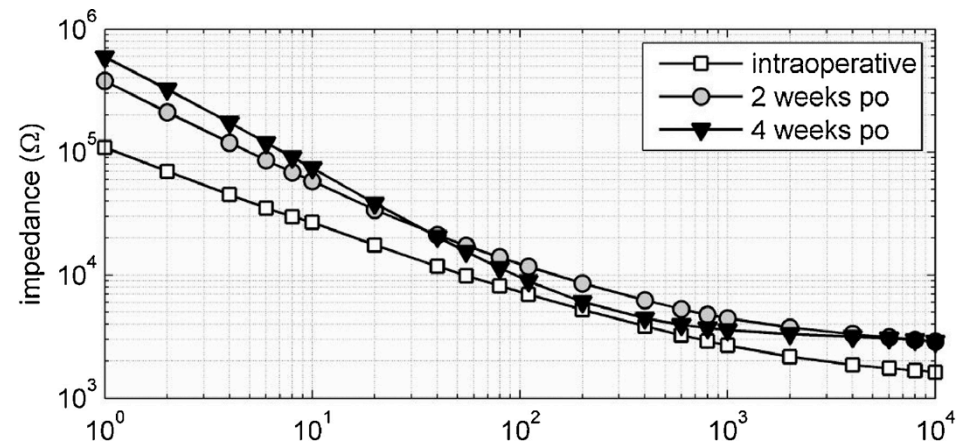


[1] Ruff, R., et. al: Acquisition of Myoelectric Signals to Control a Hand Prosthesis with Implantable Epimysial Electrodes, Pceedings 32nd Annual IEEE EMBS Conference, 31.08.-04.09.2010, Buenos Aires (Argentinien).

[2] Lewis, S. et al.: Impedance of implanted myo-electrodes. Impedance of implanted myo-electrodes 10th Vienna International Workshop on FES and 15th IFESS Annual Conference, 08.09.-12.09.2010, Wien (Österreich).

Electrode impedance

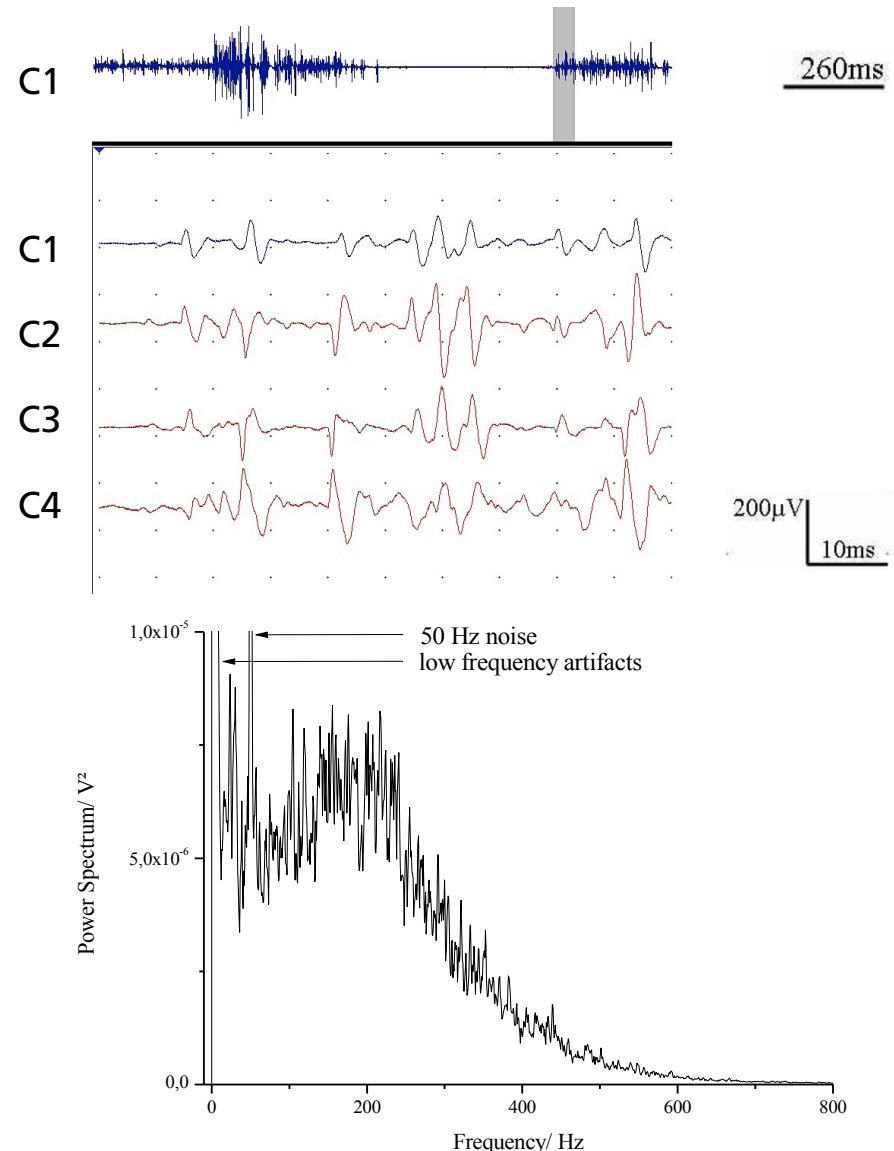
- Bode plot of electrode impedance at three time periods after implantation
 - After implantation: very similar to measurements in physiologic saline
 - After two weeks: increase over the whole frequency range
 - After four weeks: further increase for frequencies below 35Hz and slightly reduced for higher frequencies
 - Later: no further changes
 - Encapsulation has reached a steady state after four weeks.





Epimysial Electrode

- First results
- Frequency range: 100 Hz to 10 kHz
- Sampling rate: 20 kHz
- Two different movements:
 - From the central to the peripheral position
 - Back to the central position
- Frequency spectrum
 - Filter: 1 Hz – 10 kHz
 - Sampling rate: 20 kHz
 - Two main signal components in the power spectrum
 - Lower frequency: 10 - 40Hz
 - Higher frequency: 100 - 500Hz

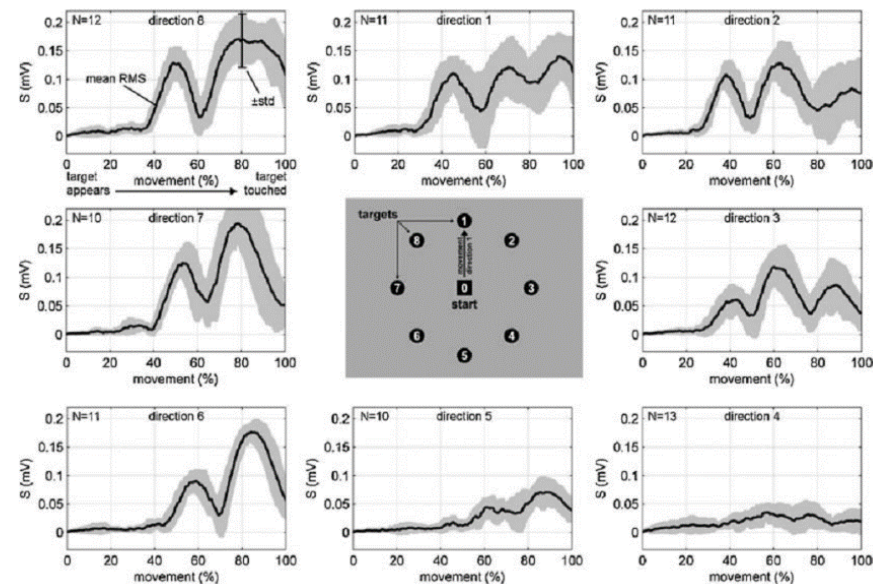


[1] Ruff, R., et. al: Acquisition of Myoelectric Signals to Control a Hand Prosthesis with Implantable Epimysial Electrodes, Pceedings 32nd Annual IEEE EMBS Conference, 31.08.-04.09.2010, Buenos Aires (Argentinien).

[2] Lewis, S. et al.: Impedance of implanted myo-electrodes. Impedance of implanted myo-electrodes 10th Vienna International Workshop on FES and 15th IFESS Annual Conference, 08.09.-12.09.2010, Wien (Österreich).

Results

- 4 weeks after implantation
- Recording system is triggered by visual cue.
- Strong correlation between recorded signals and goal directed arm movement
- Intuition of movement could be detected by signal analysis
- Six classifiers and seven time and frequency domain features were investigated
- Signals could be clustered
- All experimental procedures were conducted in accordance with German laws governing animal care.

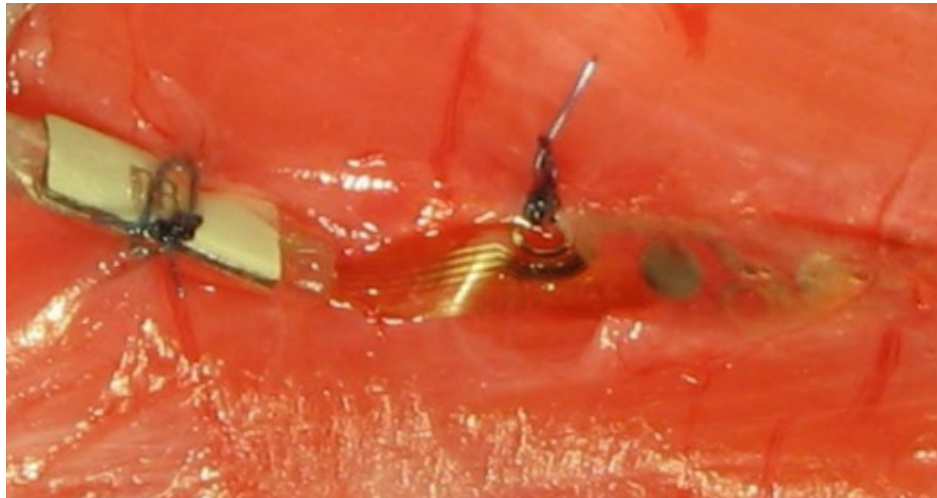


[1] Ruff, R., et. al: Acquisition of Myoelectric Signals to Control a Hand Prosthesis with Implantable Epimysial Electrodes, Pceedings 32nd Annual IEEE EMBS Conference, 31.08.-04.09.2010, Buenos Aires (Argentinien).

[2] Lewis, S. et al.: Impedance of implanted myo-electrodes. Impedance of implanted myo-electrodes 10th Vienna International Workshop on FES and 15th IFESS Annual Conference, 08.09.-12.09.2010, Wien (Österreich).

Advantages of Signal Acquisition

- Electrodes are placed at the epimysium of the muscle
- Fixed electrode position (epimysial)
- More selective compared with surface electrodes
- Less invasive compared with nerve electrodes
- Muscles as “biological amplifier” for nerve signals
- High amplitude (approx. 200 μV)
- Low frequency range (up to 600 Hz)
- Small transfer rate
- Less artefacts, high signal-to-noise ratio (approx. 80 dB at 200 Hz)
- Application longer than 8 month

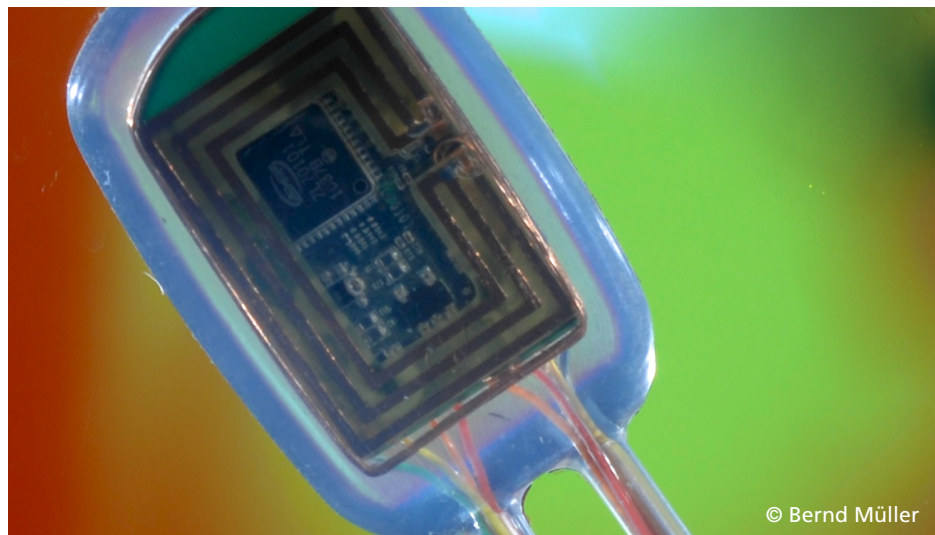
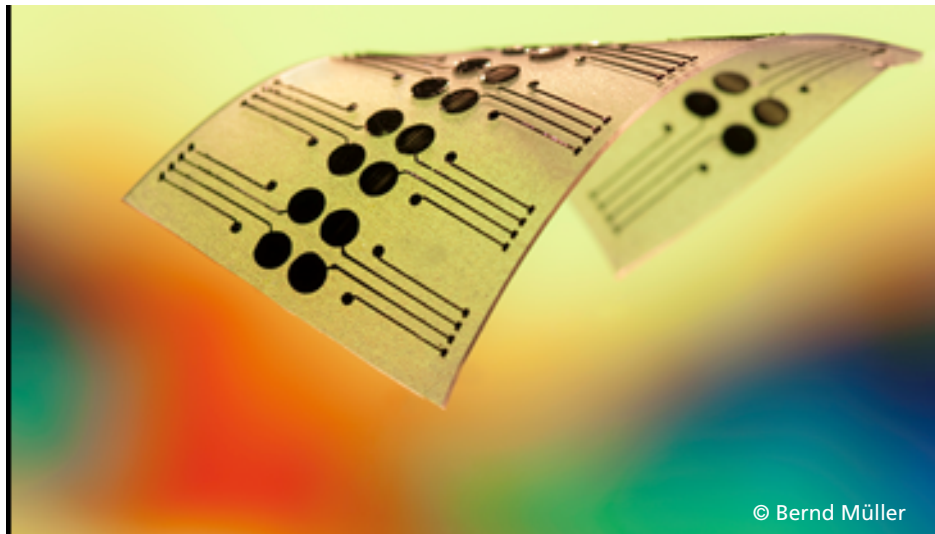


Summary

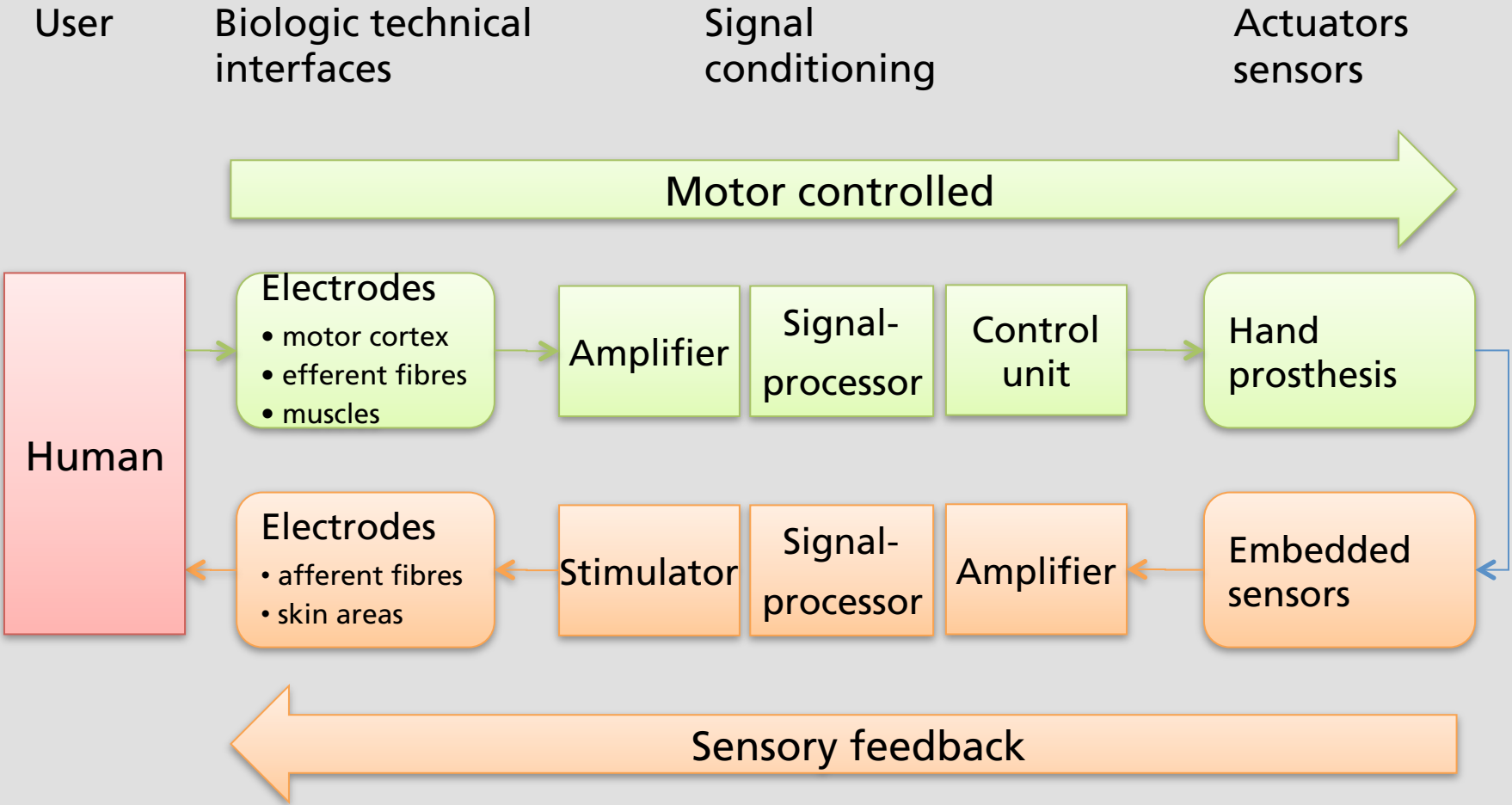
- Key components of the fully implantable system
 - Implantable flexible **micro electrode** for the invasive acquisition of muscle activities.
 - Signal conditioning, **signal pre-processing**.
 - **Telemetry module** for inductive energy and signal transmission.
 - Pattern recognition and **classification of the signals**.
 - Signal processing and detection of the **desired hand movement**.
 - Artificial **limb control**.
 - Hand prosthesis including actuators and sensors.
 - **External charging** unit for energy supply of the implant, the artificial limb, and sensory feedback.
 - **Regulatory affairs** including quality and risk management.

Next steps

- Further **miniaturization** of the system.
- Improving **long-term stability** by evaluating different encapsulation and housing technologies.
- Optimizing **power management**.
- Including **sensory feedback** for the patients using neural stimulation electrodes.
- New electrode materials and new microfabrication technologies (**All Polymer Electrodes**).
 - High mechanical stability combined with optimized electrochemical characteristics.



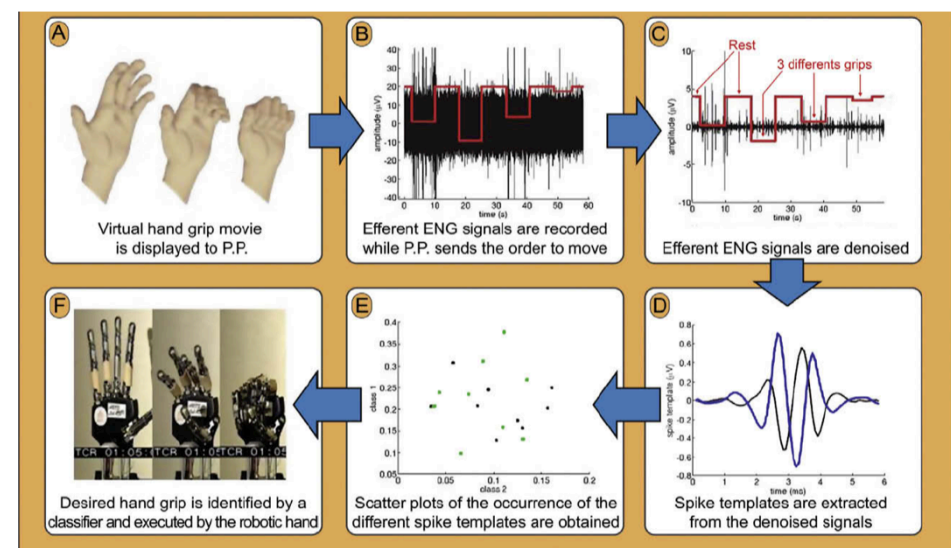
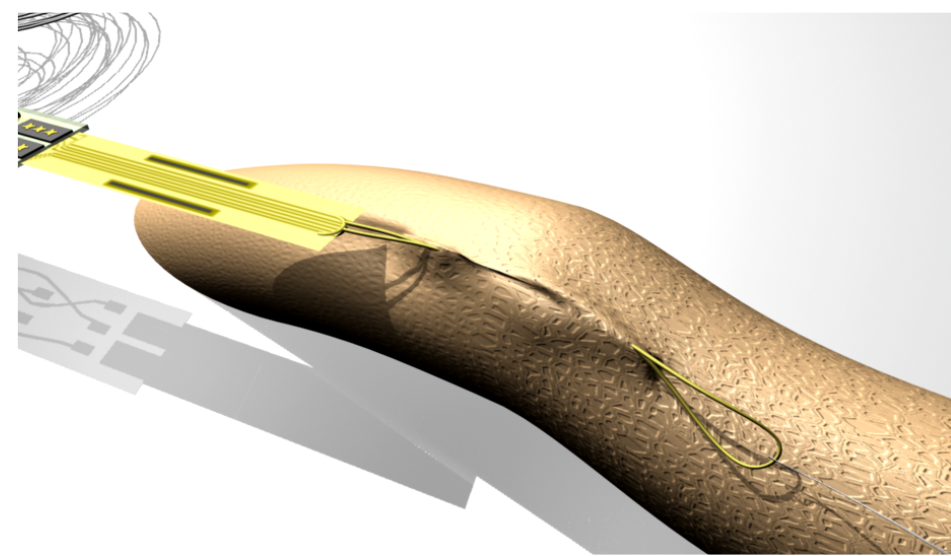
Bidirectional Interfaces for Hand Prostheses



[1] Hoffmann, K.-P., H. Dietl: „Handprothesen: Nach dem Vorbild der Natur“ Deutsches Ärzteblatt 04/10 2010: 11-14

Intrafascicular Electrode (tf-LIFE)

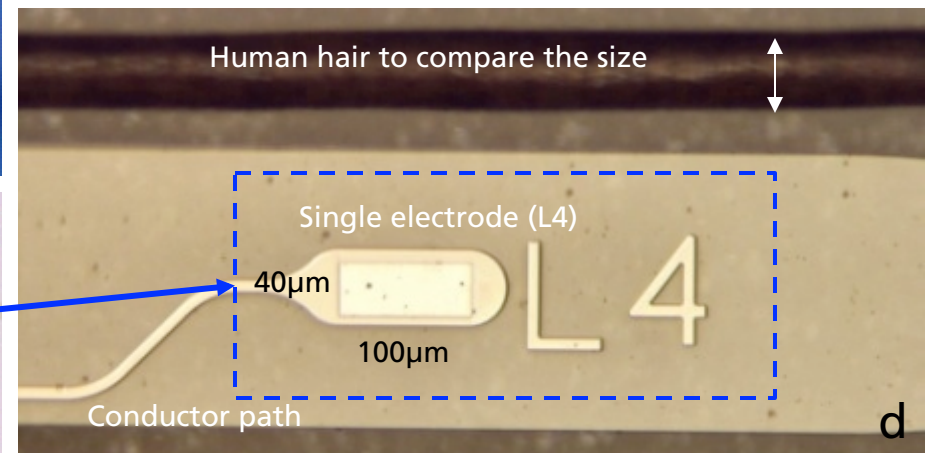
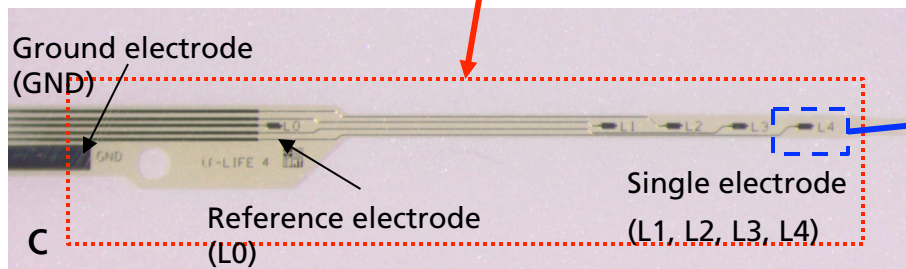
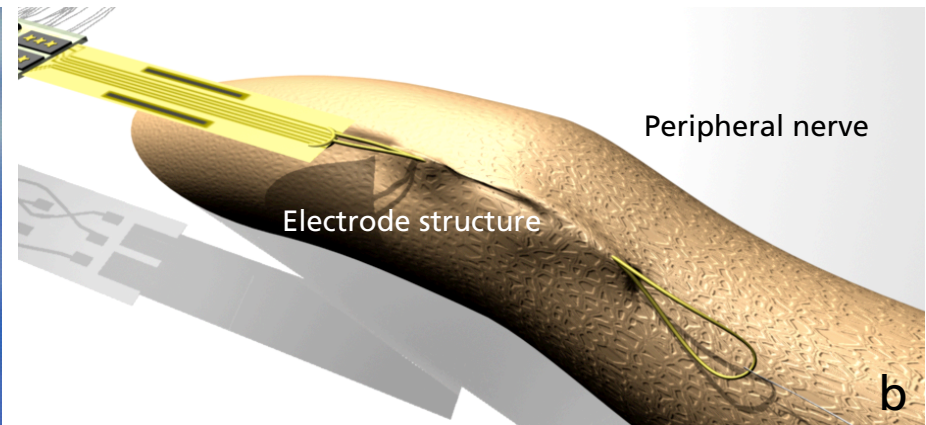
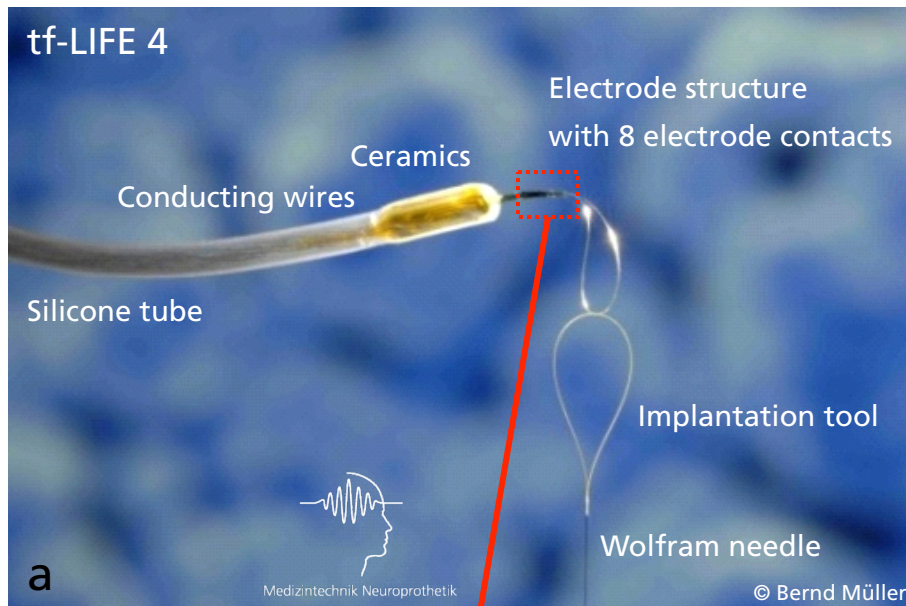
- tf-LIFE („thin-film longitudinal intrafascicular electrode“)
- Combination of a loop-shaped thin-film multi-channel electrode and a second loop with a thin needle
- Using the needle, the electrode can be pulled longitudinally through the nerve
- Only the thin-film electrode remains inside the nerve
- High selectivity can be achieved (depending on the placement of the electrode)



[1] Rossini, P.M., et al.:Double Nerve Intraneural Interface Implant on a Human Amputee for Robotic Hand Control“ Clin Neurophysiol. 121, 5 2010: 777-783.

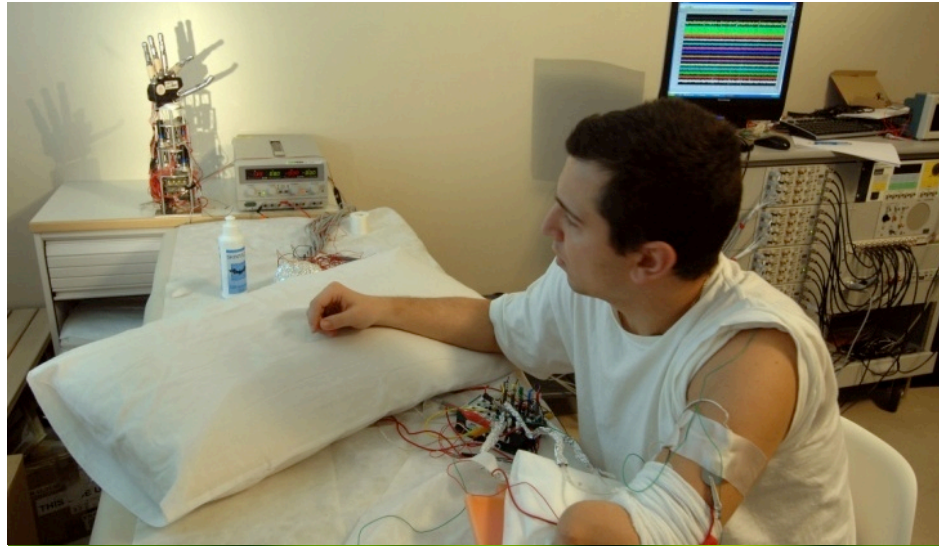
Bidirectional Interface

■ tf-LIFE 4 (thin film - Longitudinal IntraFascicular Electrode)



Results

- 24 days experiment
- Bidirectional implanted interface
 - tf-LIFE 4
- Application
 - N. medianus
 - N. ulnaris
- Signal acquisition (32 channels)
 - Intuitive motor control
 - Precision grip
- Stimulation (32 channels)
 - Sensory feedback
 - Perceive the amputated hand

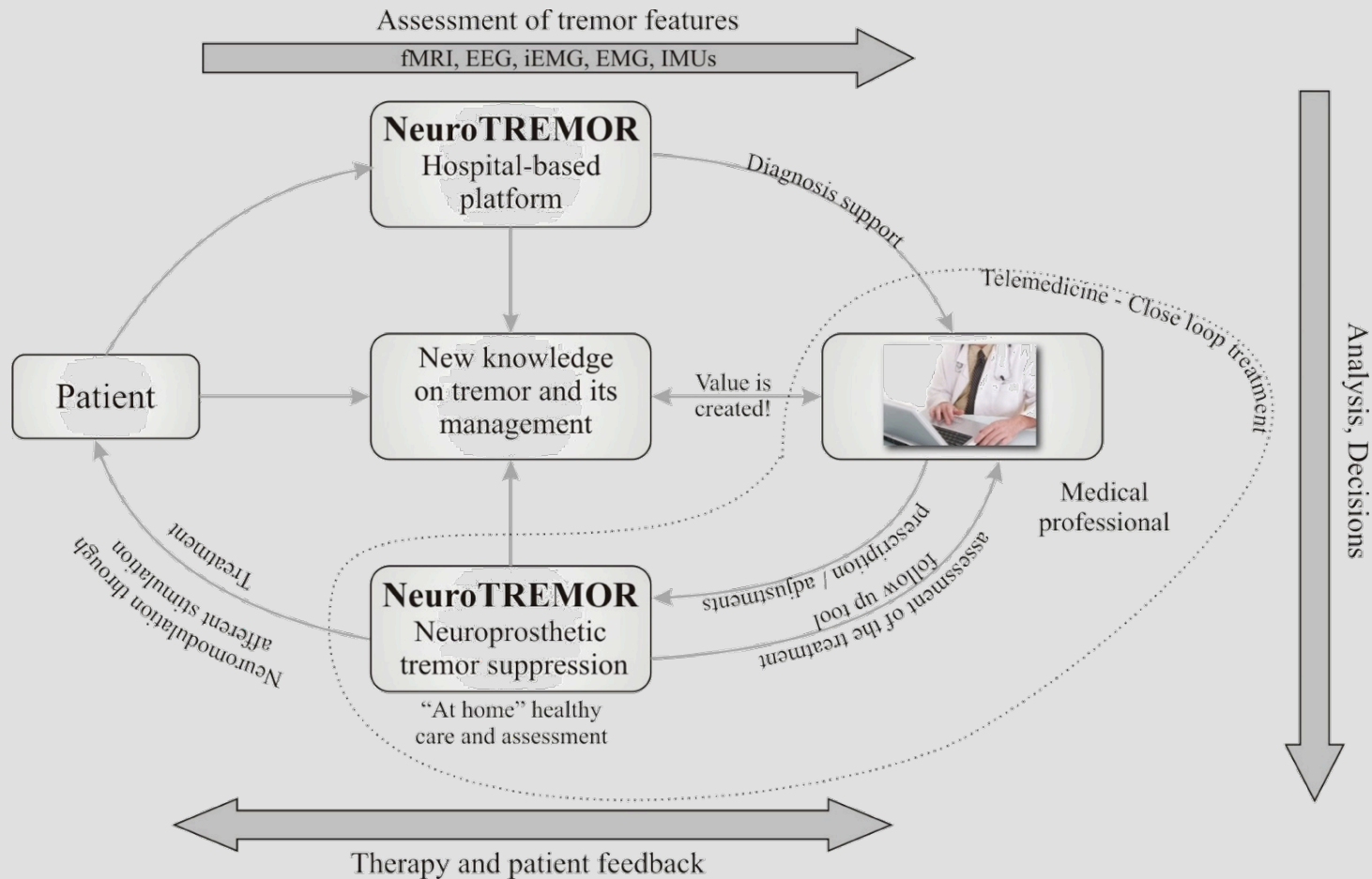


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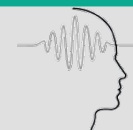
[1] Rossini, P.M., et al.: "Double Nerve Intraneural Interface Implant on a Human Amputee for Robotic Hand Control" Clin Neurophysiol. 121, 5 2010: 777-783.

[2] Benvenuto, A. et al.: "Intrafascicular thin film multichannel electrodes for sensory feed-back: evidences on a human amputee. Proceedings 32nd Annual IEEE EMBS Conference, 31.08.-04.09.2010, Buenos Aires

A novel concept for support to diagnosis and remote management of tremor



EU Project NeuroTREMOR: FP7-ICT-2011-7-287739



Background of the project

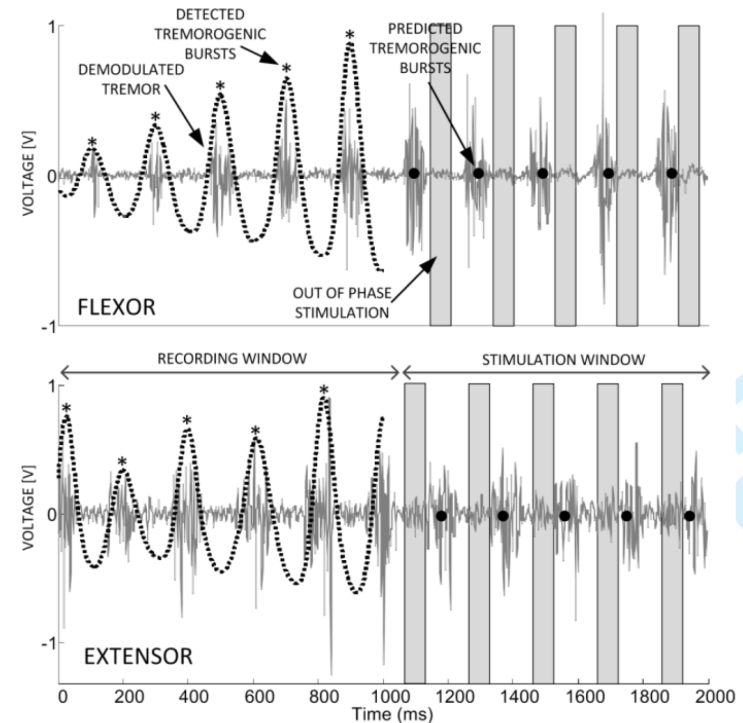
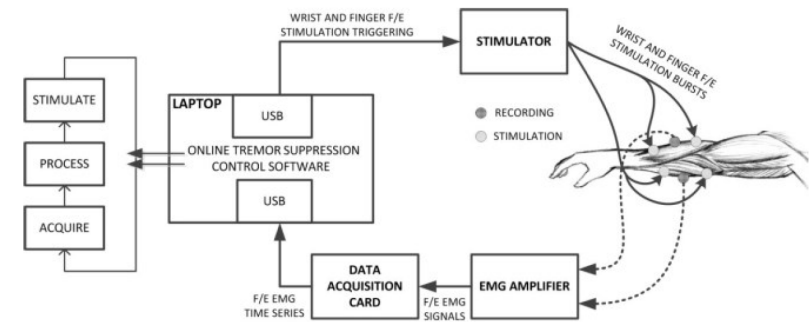
- Pathological tremor:
 - Involuntary rhythmic contraction of counteractive muscle groups
 - Most frequent movement disorder (up to 15% of people >50)
- Various conditions and diseases may cause pathological tremor
 - E. g. Parkinson's Disease (PD), Essential Tremor (ET)
 - Misdiagnosis quite common: 30-50% of ET patients do not have ET (Benito-León et al., 2006)
 - Treatment of tremor is disease-specific



<https://mmcneuro.files.wordpress.com/2013/01/essential-tremor-is-characterized-by-sporadic-and-postural-tremor-on-hands.jpg>

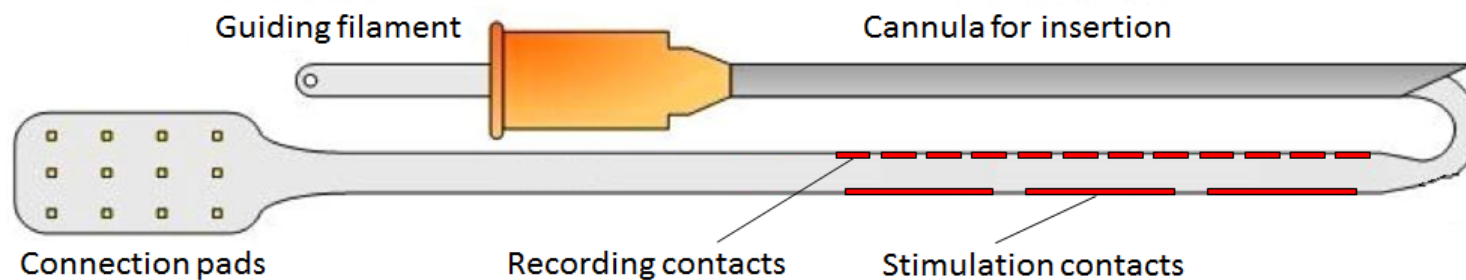
Strategy

- Tremor detection using EMG recording of the respective muscles
- Counteracting by electrically stimulating the antagonist in an out-of-phase manner
- Tremor suppression even possible with sub-motor threshold stimulation
 - Less side effects such as muscle fatigue and discomfort for the patients
- Suitable, highly selective interfaces are required

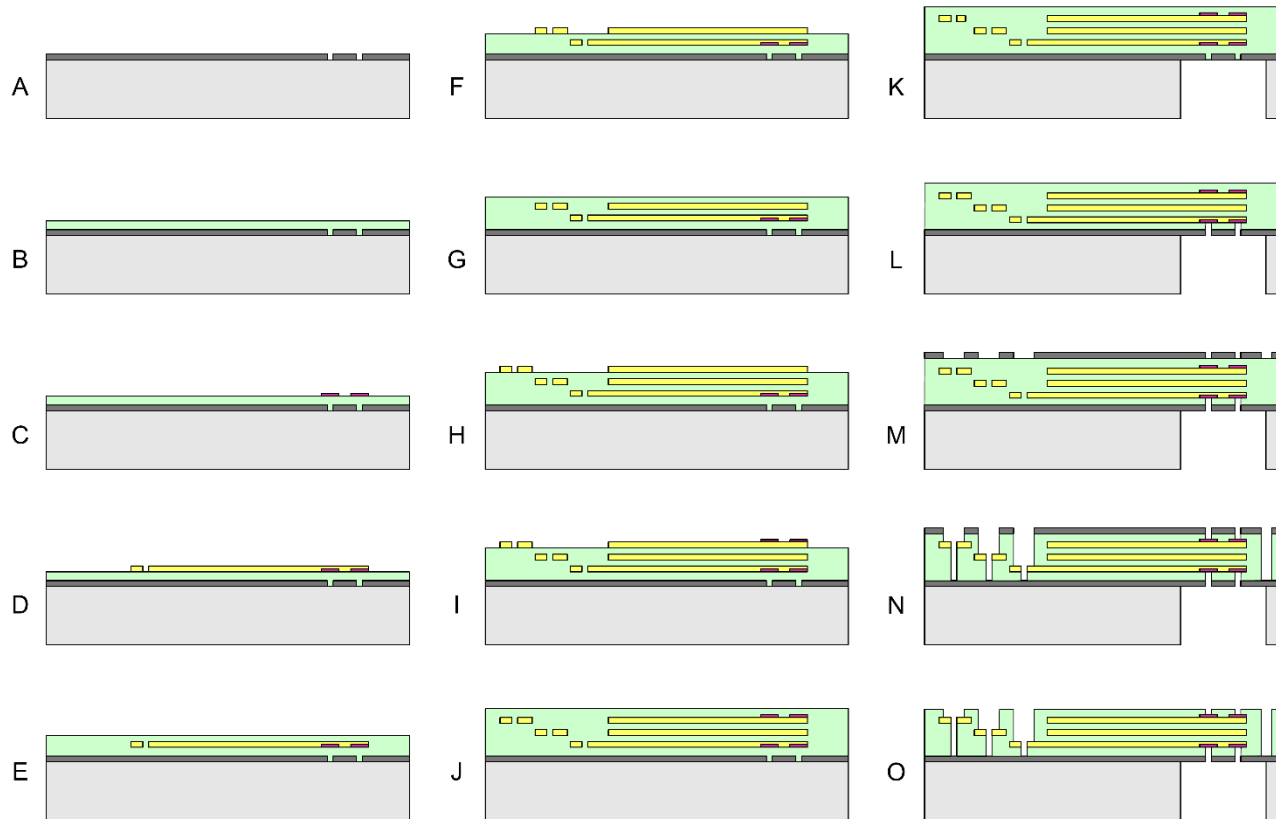


Electrode design

- Insertion with the help of a cannula (25 G)
- Total length: 6.8 cm; foil thickness: 20 μm
- Width of the filament including the electrode contacts: 420 μm
- 12 recording contacts (area 5,257 μm^2)
- 3 stimulation contacts (area 1.1 mm^2)
- Optional: integration of a shielding layer for suppression of stimulation artefacts



Double-sided polyimide process



Etch mask (Al or Pt)

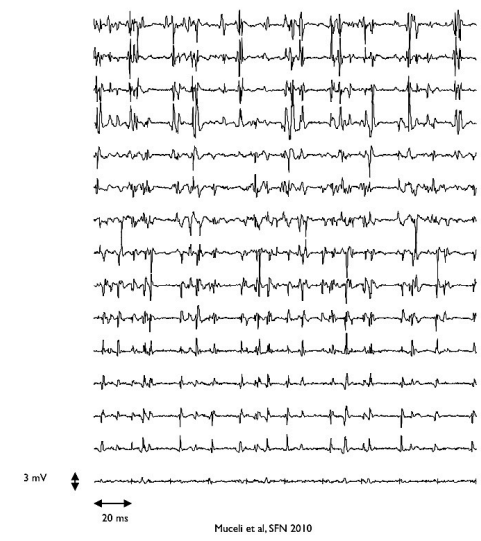
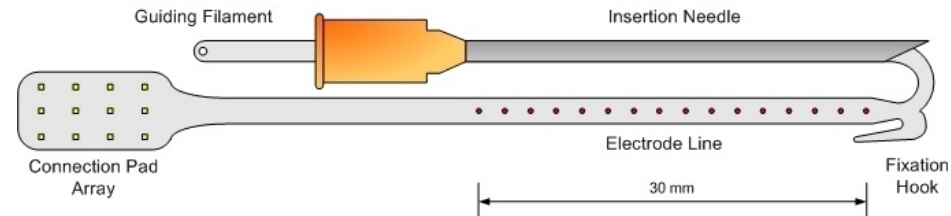
Material for tracks and shielding (Pt or Au)

Polyimide (PI 2611)

Material for electrode contacts (Pt or IrOx)

Muscle: Intramuscular electrode

- Intramuscular EMG recording
- Electrode is inserted with the help of a needle
- 16 channels for high-resolution EMG
- Recording of high-resolution intramuscular EMG
- Decoding the neural code of human movements
- Development of new human-machine interfaces
- Demove: Decoding the neural drive to muscles for advanced assistive technologies



[1] Poppendieck, W., S. Muceli, C. Welsch, M.-O. Krob, A. Sossalla, K. Yoshida, D. Farina, K.-P. Hoffmann: „Development of multi-channel intramuscular EMG recording electrodes“ Proceedings of 3-Ländertagung D-A-CH (BMT) 2013, Graz (Österreich) 2013

Discussion and next steps

- Successful tests of the double-sided multi-channel electrode for recording and stimulation in patients
- Reduction of tremor by electrical stimulation
- Next steps:
 - Expansion of the system for other muscle groups
 - Development of a fully implantable system for treatment of tremor including implantable electronics, energy supply and wireless data transmission



Outlook, Vision and Ideas

- Alternative Stimulation
- New materials, new technologies (PDMS), all Polymer electrodes
- Multimodal flexible implantable sensors, moveable structures
- Mechanical, optical and biochemical functionalization of different materials
- Drug delivery systems
- Closed loop systems with different sensors and actuators including signal and energy transmission
- Complete implantable interactive systems for functional assistance

