

**An Overview of Neuroprosthetics and How  
Advancements Will Further Aid in the Field of Medicine**

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## **Abstract**

Neuroprosthetics is an extremely sophisticated field of biotechnical research that incorporates both biomedical engineering and neuroscience studies and knowledge. As a study, it aims to provide those with neurological disabilities to complete and help with natural bodily functions. Prosthetic implants span from limb prosthetics to small stimulating devices such as cochlear implants.

The invention was developed in 1929 as a test demo of oscillating between different voltages to identify how the currents would affect a brain's function; decades later many other scientists pioneered this idea (Adewole); For instance, Liberson, a German researcher originally based in Munich, found a temporary treatment for hemiplegia, which is a disease that produces muscle weakness and partial paralysis of one side of the body. In creating this relatively new treatment, Liberson was able to stabilize those who had compromised brain function. As a result, many new inventions that improved the biotechnology field were created. While the idea of neuroprosthetics has been formally advanced and developed over the past 60 years, there is still space to discover regarding neuroprosthetics.

This article will explore the core principles and designs of various neuroprosthetics,

review the advancements in their applications, and discuss their ethical implications.

## **Methodologies in Neuroprosthetic Research**

We will examine five key methodologies in developing limb neuroprosthetics that highlight the role of neural stimulation and neuroprosthetic research in improving prosthetic functionality. In the case of the study “**Bidirectional Control of Prosthetic Hands via Implanted Peripheral Nerve Interfaces** (Raspopovic et al., 2014)” it was demonstrated the feasibility of bidirectional communication between prosthetic hands and the nervous system through implanted peripheral nerve interfaces. It showed significant advancements in restoring natural hand movements and sensory feedback, paving the way for more intuitive and functional prosthetic devices.

**Davies et. al.**, explored the efficacy of dexterity-controlled electrical stimulation of dorsal root ganglia to enhance motor function in individuals with spinal cord injury in their study “**Enhanced Motor Function with Dexterity-Controlled Electrical Stimulation of Dorsal Root Ganglia** (Davis et al., 2016)”. They revealed significant improvements in hand and arm function, highlighting the potential of targeted neural stimulation for restoring movement in paralyzed limbs.

**Ortiz-Catalan et al** and colleagues developed a closed-loop neuroprosthetic device that allows real-time control of grasp parameters based on neural signals in their study “**Closed-Loop Control of Grasp Parameters Using a Neuroprosthetic Device** (Ortiz-Catalan et al., 2015)” They demonstrated enhanced precision and adaptability in prosthetic hand movements, emphasizing the importance of closed-loop systems in improving user interaction and functionality.

**Chaudhary et al.** explored the feasibility of brain-computer interface (BCI)-based communication in individuals with complete locked-in syndrome (CLIS) in their study “**Brain-Computer Interface-Based Communication in the Completely Locked-In State**” (Chaudhary et al., 2017). Their research revealed promising results, suggesting that BCIs hold potential as a communication tool for individuals with severe motor disabilities, opening new avenues for enhancing quality of life.

**Schiefer et al.** investigated the impact of sensory feedback via peripheral nerve stimulation on task performance in individuals with upper limb loss using myoelectric prostheses in their study “**Sensory Feedback by Peripheral Nerve Stimulation Improves Task Performance in Individuals with Upper Limb Loss Using a Myoelectric Prosthesis**” (Schiefer et al., 2016). Their study demonstrated significant improvements in grasping and manipulation tasks, highlighting the importance of sensory feedback integration for enhancing prosthetic functionality and user experience.

**What part of the brain is neurally stimulated by prosthetic devices, and how do we**

## **measure this?**

Neuroprosthetics assist the nervous system in specific ways to restore lost functions or enhance existing capabilities. These devices, which can be implanted in the brain or attached to limbs, use electrical impulses to stimulate distinct brain regions. One key area often targeted by neuroprosthetic devices is the motor cortex, which is responsible for planning and executing movements. Electrode arrays can be implanted in the motor cortex to help individuals with paralysis control robotic limbs or to control the computer cursors (Roeber). By recording neural activity, these devices decode the brain's intended movements and translate them into actions performed by prosthetic devices, which is known as BCI. (Orenstein)

Another important area is the somatosensory cortex, which processes sensory information from the body. Neuroprosthetic limbs can consist of sensors that detect pressure, temperature, or other stimuli, which then send signals to the somatosensory cortex to create a sensation of touch. Feedback such as this is crucial for users to perform delicate tasks and feel more connected to their prosthetic limbs. To measure the neural stimulation caused by these devices, researchers use techniques like electroencephalography (EEG) and functional magnetic resonance imaging also known as fMRI. An EEG involves placing electrodes on the scalp to record electrical activity in the brain, providing real-time feedback on neural responses. The fMRI, on the other hand, measures changes in blood flow within the brain, highlighting areas activated by neuroprosthetic use. One notable example of neuroprosthetics is the work of the BrainGate research team, which has developed a system that allows paralyzed individuals to control devices using their thoughts. Another key example of something such as this being used in modern-day medicine is the DARPA-funded Revolutionizing Prosthetics program, which created advanced prosthetic limbs

that provide sensory feedback (JHU APL).

### **How do neuroprosthetics work, and what are they exactly made out of?**

As has been already stated, neuroprosthetics at their core are extremely advanced devices that target certain parts of the body and help in aiding by either increasing sensory function or mobile/physical function. Generally, electrodes made of biocompatible metals like platinum or gold are used for their excellent conductivity and stability, the electrodes capture neural signals and send them to external processors that decode the information into commands, such as controlling a prosthetic limb or a computer cursor. The electrodes are often part of microelectrode arrays, minuscule grid-like structures made from materials such as silicon, allowing for precise detection and stimulation of neurons. To ensure both durability and biocompatibility, insulation materials like perylene or silicone are used to protect the electrodes and prevent electrical short circuits. In specific applications like deep brain stimulation (DBS) for Parkinson's disease, electrodes are implanted in areas such as the subthalamic nucleus to deliver precise electrical impulses that modulate neuronal activity, alleviating symptoms such as tremors. In cochlear implants, electrode arrays inserted into the cochlea directly stimulate the auditory nerve, enabling hearing in individuals with severe hearing loss. Similarly, other retinal implants use electrode arrays placed on the retina to stimulate retinal neurons, sending visual information to the brain and partially restoring vision. When these neuroprosthetics stimulate neurons, they cause ions like sodium and potassium to move across cell membranes, generating electrical impulses that trigger the release of neurotransmitters. These chemical and electrical

signals allow neuroprosthetic devices to effectively communicate with the nervous system, enabling users to regain lost sensory and motor functions.

### **Efficacy and Challenges of Neuroprosthetics**

The efficacy of neuroprosthetics can be seen in devices like brain-computer interfaces (BCIs), which allow paralyzed individuals to control robotic arms or computer cursors using their thoughts. By implanting electrodes in the motor cortex, these devices capture neural signals related to movement intentions and translate them into commands that control external devices. Studies have shown that users can achieve a high degree of control and precision, significantly improving their independence and quality of life (BrainGate). Deep brain stimulation (DBS) is another highly effective neuroprosthetic application, particularly for treating neurological disorders such as Parkinson's disease. In DBS, electrodes implanted in specific brain regions, like the subthalamic nucleus, deliver targeted electrical impulses that modulate abnormal neuronal activity. This intervention has been proven to reduce symptoms like tremors and rigidity, enhancing motor function and reducing reliance on medication (Mayo Clinic). However, the development and implementation of neuroprosthetics come with significant challenges. One major issue is material biocompatibility. Implants must be made from materials that the body does not reject, such as platinum for electrodes and biocompatible polymers like silicone for insulation. Ensuring long-term stability and preventing tissue damage are ongoing concerns (Cleveland Clinic). Signal processing and integration with the body's natural neural networks also pose difficulties. Accurately decoding neural signals and translating them into precise

movements or sensory feedback requires advanced algorithms and substantial computational power. The complexity of neural networks means that even minor inaccuracies can lead to significant functional issues.

Additionally, the risk of infection at the implantation site and the need for regular maintenance and calibration of the devices add to the challenges. These factors, along with the high cost of neuroprosthetic devices, limit their accessibility to a broader population. Continued research is focused on developing more durable materials, improving signal processing techniques, and reducing costs to make these life-changing technologies more widely available.

### **Conflicting Views on Neuroprosthetics**

Although neuroprosthetics have proved to be advantageous in the disabled community and are always developing algorithmic models to be efficient each day, many scientists have opposing perspectives on this technology. Doctors may have medical concerns which include the complex implantation process, susceptibility to mechanical malfunctions, and the risk of infections. The surgical implantation of neuroprosthetics is a complex procedure that carries inherent risks, such as damage to surrounding tissues and neural structures. Additionally, these devices can be prone to mechanical or technical failures, which may require further surgeries or interventions to repair or replace the device. The risk of infection could be another problem, especially with implanted devices that breach the skin and create pathways for bacteria to enter the body (however not as likely). Beyond these medical issues, there are ethical and practical concerns surrounding neuroprosthetics. Ethical concerns revolve around the potential for misuse, such as enhancing human capabilities beyond natural limits, which raises questions about



fairness and inequality. The high cost of developing and producing neuroprosthetics also limits accessibility, potentially widening the gap between those who can afford such technologies and those who cannot. There are also challenges related to personal identity and free will, as the integration of neuroprosthetics with the human body blurs the line between human and machine. For instance, Dr. Rafael Yuste, a neuroscientist at Columbia University, had expressed concerns about the ethical implications of neuroprosthetics. He worries about the potential for these devices to be used for mind control or surveillance, raising significant privacy and autonomy issues. Similarly, Dr. Miguel Nicolelis from Duke University highlighted the cost and production barriers. He argued that while neuroprosthetics offer tremendous benefits, their high development costs limit accessibility, potentially widening the socioeconomic gap. Dr. Martha Farah, a cognitive neuroscientist at the University of Pennsylvania, raised significant theoretical and practical challenges regarding personal identity and free will. She questions how integrating neuroprosthetics with the human brain might alter a person's sense of self and agency, considering whether actions driven by these devices are truly self-directed or influenced by external programming. Dr. Nita Farahany, also from Duke University, echoed these concerns, emphasizing the need to consider the long-term psychological impacts on individuals who rely on neuroprosthetics.

### **Further Research/Advancements with Final Conclusions**

Neuroprosthetics represent a remarkable intersection of biomedical engineering and neuroscience, offering a beacon of hope and opportunities for individuals with neurological disabilities. Through the integration of advanced technologies and innovative methodologies,

significant progress has been made in restoring lost functions and enhancing the quality of life for millions worldwide. Studies like those by Raspopovic et al., Davis et al., and Ortiz-Catalan et al. showcase the transformative potential of bidirectional communication interfaces, dexterity-controlled stimulation, and closed-loop systems in improving motor function and user interaction. However, challenges persist, ranging from material biocompatibility to ethical considerations surrounding personal identity and accessibility issues. Despite these challenges, ongoing research endeavors have been focused on overcoming these barriers. For instance, advancements in material science aim to develop more durable and biocompatible materials for neuroprosthetic devices, while improvements in signal processing algorithms strive to enhance the precision and reliability of neural decoding. Additionally, efforts to address ethical concerns and ensure equitable access to neuroprosthetic technologies are underway. Collaborative initiatives between researchers, policymakers, and ethicists seek to establish guidelines for responsible development and deployment of neuroprosthetics, considering the broader societal implications. Recent developments in neuroprosthetics continue to push the boundaries of what is possible. A key example of this is Neuralink, the Neuralink project led by Elon Musk aims to develop implantable brain-computer interfaces with unprecedented levels of precision and bandwidth, potentially revolutionizing the field. Similarly, initiatives like the NIH BRAIN Initiative and the European Human Brain Project are driving interdisciplinary research efforts to unravel the complexities of the brain and develop next-generation neuroprosthetic technologies. In essence, while challenges remain, the ongoing research and advancements in neuroprosthetics hold promise for transforming lives and shaping the future of medicine. By leveraging cutting-edge technologies and fostering ethical, inclusive innovation, we can unlock new

frontiers in neural engineering and empower individuals to overcome neurological disabilities.

### **About the Authors :**

We are a group of young, ambitious students who dedicated four months to this passion project.

Our goal was to apply the knowledge gained from a neuroscience program at Stanford and consolidate our research into a comprehensive paper. Despite the challenge of coordinating meetings across various international time zones, we persevered and completed the project. With the invaluable guidance of Professor Vega, our team was able to articulate our ideas in great detail, culminating in this article. Here is some background information about each of us.

Krish Madhavan is a 17-year-old high school rising senior from California, who intends to pursue education and a career in the medical field and is keen on understanding the world of Neurology and Cardiology.

Teodor Bal is an 18-year-old from Hungary, he finds enjoyment in doing mixed martial arts and also computer programming, his key involvement in this project was providing the team with resources on the data processing that goes into neuroprosthetics.

MaLéna Ramirez an 18-year-old from Texas contributed to the article heavily by reviewing and tweaking aspects of the paper, she will also be attending Purdue University.

Maria Kovleva an 18-year-old from Moscow Russia, used her knowledge from working in a lab internship to supply our team with info regarding the clinical aspects of neuroprosthetic trials and the ethical implications too.

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