

A Review on Futuristic Technology “Brain Computer Interface (BCI)”

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Abstract – EEG-primarily based mind-managed cell robots can serve as powerful aids for significantly disabled people in their each day existence, mainly to help them move voluntarily. In this paper, we provide a comprehensive review of the entire structures, key strategies, and evaluation problems of mind-managed cell robots together with a few insights into related destiny studies and development troubles. We describe key techniques that are used in these brain-controlled cellular robots which include the mind-pc interface techniques and shared manage strategies. This description is observed by means of an evaluation of the assessment issues of mind-controlled cellular robots such as participants, obligations and environments, and assessment metrics. We finish this paper with a discussion of the current demanding situations and future studies directions.

Index Terms– Bluetooth; Brain-Computer Interfaces; Cerebrum, Signal Processing.

1. INTRODUCTION

Such a system is referred to as a brain-pc interface (BCI). Back within the 60s, con-trolling devices with mind waves become taken into consideration pure technology fiction, as wild and fantastic as warp pressure and transporters. Although recording mind indicators from the human scalp gained some interest in 1929, whilst the German scientist Hans Berger recorded the electric brain activity from the human scalp, the desired technologies for measuring and processing mind signals as well as our expertise of brain characteristic were nevertheless too limited. Nowadays, the state of affairs has modified. Neuroscience research during the last many years has brought about a far better know-how of the mind. Signal processing algorithms and computing energy have advanced so rapidly that complicated actual-time processing of brain alerts does now not require steeply-priced or bulky equipment anymore.

The first BCI became defined through Dr. Grey Walter in 1964. Ironically, this changed into rapidly before the primary Star Trek episode aired. Dr. Walter linked electrodes directly to the motor areas of a patient’s brain. (The patient was

undergoing surgical treatment for different reasons.) The patient requested to press a button to improve a slide projector while Dr. Walter recorded the applicable mind interest. Then, Dr. Walter connected the machine to the slide projector in order that the slide projector superior every time the patient’s mind activity indicated that he wanted to press the button. Interestingly, Dr. Walter discovered that he needed to introduce a delay from the detection of the brain pastime till the slide projector superior due to the fact the slide projector would otherwise enhance before the patient pressed the button! Control before the real movement takes place, this is, manage without motion – the first BCI!

Unfortunately, Dr. Walter did no longer put up this principal step forward. He best presented a communication approximately it to a group called the Ostler Society in London. There turned into little development in BCI studies for most of the time considering the fact that then. BCI research advanced slowly for plenty extra years. By the turn of the century, there have been only one or two dozen labs doing critical BCI research. However, BCI studies developed quick after that, mainly for the duration of the previous couple of years. Every yr, there are more BCI-associated papers, convention talks, products, and media articles. There are at the least a hundred BCI research agencies energetic today, and this quantity is growing.

More importantly, BCI research has succeeded in its initial goal: proving that BCIs can paintings with sufferers who want a BCI to talk. Indeed, BCI researchers have used many extraordinary sorts of BCIs with numerous exceptional sufferers. Furthermore, BCIs are shifting past verbal exchange gear for those who can’t otherwise speak. BCIs are gaining attention for wholesome customers and new dreams such as rehabilitation or hands-loose gaming. BCIs aren’t science fiction anymore. On the other hand, BCIs are some distance from mainstream gear. Most people today nonetheless do now not understand that BCIs are even possible. There are still many sensible demanding situations earlier than a regular

individual can use a BCI without expert assist. There is a protracted way to move from providing verbal exchange for a few unique patients, with sizeable professional help, to supplying quite a number features for any consumer without help.

2. WHAT IS BCI?

Any natural form of verbal exchange or manipulate requires peripheral nerves and muscle groups. The method starts of evolved with the user’s rationale. This rationale triggers a complicated system in which positive mind regions are activated, and as a result alerts are dispatched through the peripheral fearful machine (specifically, the motor pathways) to the corresponding muscle groups, which in flip perform the motion important for the communication or manipulate assignment. The pastime attributable to this system is often known as motor out-put or efferent output. Efferent way conveying impulses from the crucial to the peripheral fearful machine and similarly to an effector (muscle). Afferent, in comparison, describes communication within the different route, from the sensory receptors to the significant apprehensive gadget. For motion manipulate, the motor (efferent) pathway is important. The sensory (afferent) pathway is especially important for learning motor skills and dexterous responsibilities, which includes typing or playing a musical tool.

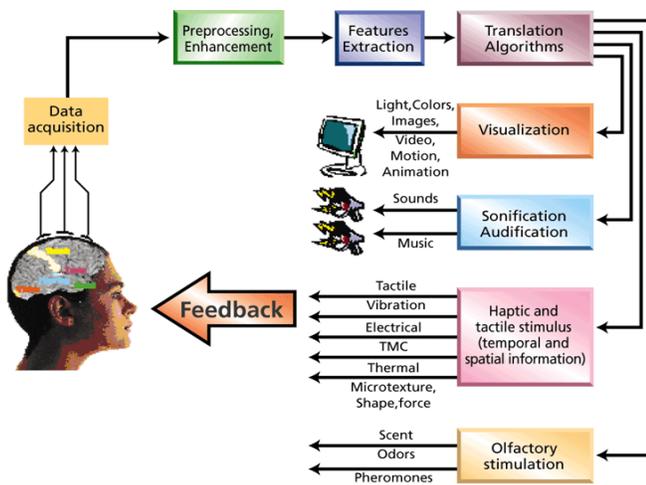


Figure 1 BCI bypasses the ordinary neuromuscular output channels.

A BCI gives an opportunity to natural conversation and manage. A BCI is an artificial gadget that bypasses the body’s ordinary different path ways, that are the neuromuscular output channels. Figure-1 illustrates this functionality. Instead of depending on peripheral nerves and muscle tissues, a BCI without delay measures mind interest related to the person’s motive and translates the recorded mind interest into corresponding manipulate alerts for BCI applications. This translation entails signal processing and pattern popularity,

that is typically carried out by means of a computer. Since the measured hobby originates without delay from the brain and no longer from the peripheral structures or muscles, the machine is referred to as a Brain–Computer Interface.

A BCI have to have 4 components. It must document interest directly from the brain (invasively or non-invasively). It must offer feedback to the consumer, and must achieve this in real time. Finally, the system ought to depend on intentional manage. That is, the consumer must pick out to perform a intellectual project each time s/he wants to accomplish a intention with the BCI. Devices that only passively discover modifications in mind interest that arise with none intent, together with EEG hobby associated with workload, arousal, or sleep, are not BCIs.

Brain–pc interfaces, mind–gadget interfaces (BMIs), direct brain inter-faces (DBIs), neuroprostheses – what is the difference? In truth, there’s no distinction between the first 3 phrases. BCI, BMI, and DBI all describe the equal machine, and they’re used as synonyms.

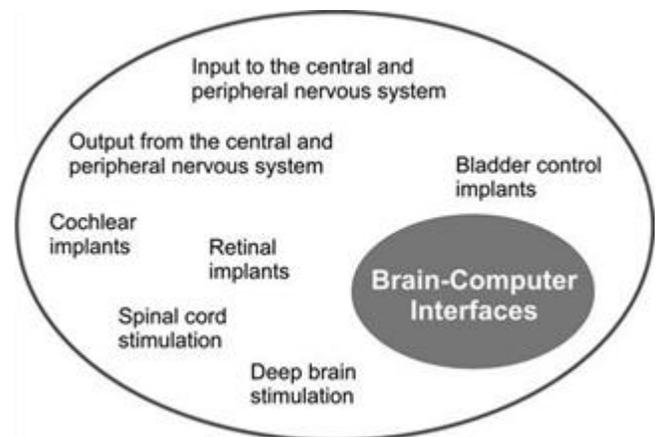


Figure 2 BCIs subcategory that gives synthetic output channel from the vital anxious device.

“Neuroprosthesis,” however, is a extra standard term. Neuroprostheses (additionally called neural prostheses) are gadgets that can’t best get hold of output from the nervous device, however can also offer enter. Moreover, they could engage with the peripheral and the valuable fearful structures. Figure 2 presents examples of neuroprostheses, including cochlear implants (auditory neural prostheses) and retinal implants (visual neural prostheses). BCIs are a unique class of neuroprostheses.

They are, as already defined within the definitions above, direct artificial output channels from the mind. Unlike other human–pc interfaces, which require muscle interest, BCIs provide “non-muscular” verbal exchange. One of the most important reasons that that is sizeable is that present day BCI structures goal to provide assistive devices for human beings

with excessive disabilities that can render people not able to perform physical actions. Radiation accidents like the one inside the Star Trek episode described above are unlikely nowadays, but a few sicknesses can simply result in the locked-in syndrome.

So, a BCI is an synthetic output channel, a right away interface from the mind to a pc or system, which could receive voluntary commands without delay from the mind without requiring bodily moves. A generation that could concentrate to brain activity that may recognize and interpret the rationale of the person? Doesn't this sound like a mind studying system? This false impression is pretty common amongst BCI new-comers, and is possibly also stirred up with the aid of technology fiction and poorly researched articles in popular media. In the following section, we provide an explanation for the simple principles of BCI operation. It should emerge as obvious that BCIs aren't able to study the thoughts.

3. BRAIN ACTIVITY MEASUREMENT

Brain activity produces electrical and magnetic pastime. Therefore, sensors can discover different kinds of modifications in electrical or magnetic hobby, at exceptional instances over distinct regions of the mind, to take a look at mind hobby.

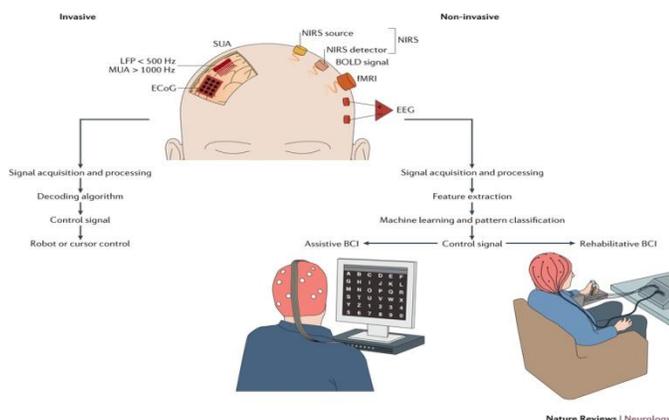


Figure 3 BCI Measurement

Most BCIs rely upon electric measures of mind pastime, and rely upon sensors positioned over the head to measure this pastime. Electroencephalography (EEG) refers to recording electric hobby from the scalp with electrodes. It is a completely properly hooked up technique, which has been used in medical and studies settings for many years. Figure-three indicates an EEG primarily based BCI. EEG equipment is cheaper, lightweight, and comparatively smooth to apply. Temporal resolution, which means the capability to come across adjustments within a sure time interval, is very good. However, the EEG isn't always without disadvantages: The spatial (topographic) resolution and the frequency range are

confined. The EEG is susceptible to so referred to as artifacts, which can be contaminations within the EEG resulting from other electric activities. External electromagnetic sources along with the electricity line also can contaminate the EEG.

Furthermore, despite the fact that the EEG isn't always very technically annoying, the setup procedure may be bulky. To reap ok signal nice, the skin areas that are contacted via the electrodes ought to be cautiously organized with special abrasive electrode-gel. Because gel is required, those electrodes are also referred to as wet electrodes. The wide variety of electrodes required with the aid of modern-day BCI structures variety from only a few to greater than a hundred electrodes. Most organizations try to limit the number of electrodes to reduce setup time and hassle. Since electrode gel can dry out and carrying the EEG cap with electrodes isn't convenient or fashionable, the setting up manner generally must be repeated before each session of BCI use. From a realistic point of view, that is one in all biggest drawbacks of EEG-based totally BCIs. A possible solution is a era referred to as dry electrodes. Dry electrodes do not require pores and skin preparation nor electrode gel. This generation is currently being researched, but a realistic solution which could provide signal first-rate similar to moist electrodes is not in sight for the time being.

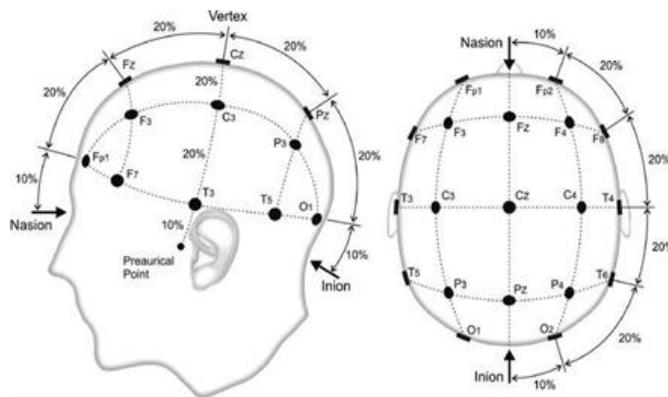


Figure 4 International 10–20 system: left portion suggests the left aspect of the head, and the right portion provides the view from above the pinnacle

A BCI analyzes ongoing mind hobby for mind styles that originate from specific mind regions. To get consistent recordings from precise areas of the head, scientists rely upon a general gadget for correctly placing electrodes, that is called the International 10–20 System. It is broadly used in medical EEG recording and EEG studies in addition to BCI research. The name 10–20 indicates that the maximum typically used electrodes are positioned 10, 20, 20, 20, 20, and 10% of the total nasioninion distance. The different electrodes are positioned at comparable fractional distances. The inter-electrode distances are equal along any transverse (from left to proper) and antero-posterior (from the front to returned)

line and the position is symmetrical. The labels of the electrode positions are usually additionally the labels of the recorded channels. That is, if an electrode is placed at website online C3, the recorded signal from this electrode is usually additionally denoted as C3. The first letters of the labels give a hint of the mind vicinity over which the electrode is placed: Fp – pre-frontal, F – frontal, C – crucial, P – parietal, O – occipital, T – temporal. Figure-4 depicts the electrode placement in line with the ten-20 device.

While maximum BCIs rely upon sensors located out of doors of the pinnacle to detect electrical activity, different styles of sensors have been used as nicely. Magneto encephalography (MEG) facts the magnetic fields associated with mind interest. Functional magnetic resonance imaging (fMRI) measures small changes in the blood oxygenation level-established (BOLD) indicators related to cortical activation. Like fMRI also close to infrared spectroscopy (NIRS) is a hemodynamic based totally approach for assess-ment of functional activity in human cortex. Different oxygen degrees of the blood bring about one of a kind optical residences which may be measured by means of NIRS. All those techniques were used for mind-computer communication, however all of them have draw-backs which lead them to impractical for maximum BCI programs: MEG and fMRI are very huge gadgets and prohibitively high-priced. NIRS and fMRI have negative temporal resolution, and NIRS is still in an early degree of development.

4. SHARED CONTROL OVERVIEW

Shared Control is a fundamental component of BCI-managed mobility aids, as it will shape the closed-loop dynamics between the user and the brain-actuated device in a manner that obligations may be done as effortlessly and effectively as viable. The concept is to integrate the user's intellectual commands with the contextual statistics cap-tured by using the wise mobility device, so that you can lessen the consumer's workload in reaching the target destination or to correct for intellectual commands in essential situations. In different phrases, the actual instructions despatched to the tool and the remarks to the person will adapt to the context and inferred goals. In the sort of way, shared manipulate could make goal-oriented control less difficult, can inhibit useless intellectual commands which include riding zigzag, and might help to generate meaningful movement sequences.

Being mobile is aside from verbal exchange and manipulation an important want of motor-impaired quit-users for participation in social lifestyles. Wheelchairs are the maximum common assistive device to allow for in-house mobility and also outdoor the home surroundings. Persons with extreme motor disabilities are dependent on electrical wheelchairs managed through hand- or chin-operated manual joysticks. If not enough residual moves are feasible, eye-gaze or suck-and-puff control devices may additionally function a

wheelchair user interface. Suck-and-puff control is in particular based totally on four kinds of instructions. If air is blown into/sucked from the tool with excessive stress/vacuum, the controller interprets this as a ahead/backward power signal. If a low stress or vacuum is implemented, the wheelchair drives right or left. With this alternatively simple manipulate scheme customers are capable of carry out maximum navigation duties with their wheelchair.

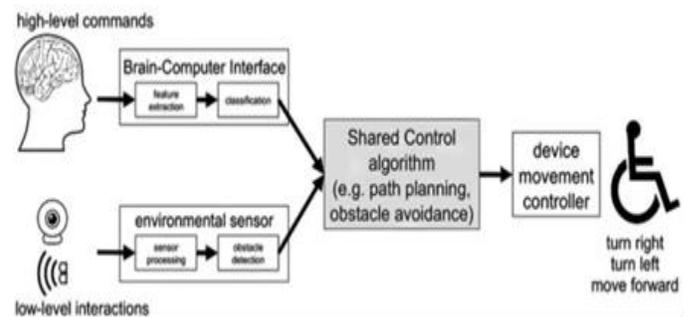


Figure 5 Overview of the shared control structure

Though the thresholds for low/excessive strain are individually calibrated, the stop-consumer have to be capable of reliably generate two distinct ranges of air strain/ vacuum over a sustained period of time to achieve a good degree of control. Since those stipulations aren't found in all quit-customers, BCIs may additionally represent an alternative control option. As already mentioned within the preceding subchapters, at the moment all varieties of non-invasive BCIs provide most effective a restricted command fee and are insufficient for dexterous control of complex programs. Thus, before the a hit utility of control interfaces with low command quotes – such as BCIs – in mobility devices, shrewd manage schemes should be applied. Ideally, the person handiest has to trouble fundamental navigation commands consisting of left, proper, and ahead, that are interpreted by way of the wheelchair controller integrating contextual statistics obtained from environmental sensors. Based on these interpretations the wheelchair would carry out wise maneuvers such as impediment avoidance and guided turnings. In conclusion, in such a manage scheme the responsibilities are shared among the person, who gives excessive-degree instructions, and the device, which executes low-degree interactions with extra or fewer tiers of autonomy. With this so-known as shared control principle, researchers have validated the feasibility of mentally controlling complicated mobility devices by way of non-invasive BCIs, in spite of its sluggish information switch price (Flemisch et al. 2003; Vanhooydonck et al. 2003; Carlson and Demiris 2008).

5. SIGNAL PROCESSING

A BCI measures mind alerts and procedures them in real time to detect certain patterns that replicate the user's rationale. This signal processing could have three tiers: preprocessing,

feature extraction, and detection and type. Preprocessing objectives at simplifying subsequent processing operations without losing applicable records. An vital intention of preprocessing is to improve signal fine with the aid of enhancing the so-known as sign-to-noise ratio (SNR). A awful or small SNR means that the mind styles are buried inside the relaxation of the sign (e.G. Background EEG), which makes relevant styles hard to locate. A right or large SNR, on the other hand, simplifies the BCI's detection and type challenge. Transformations combined with filtering techniques are often hired in the course of preprocessing in a BCI. Scientists use these strategies to transform the signals so unwanted signal components can be eliminated or at least reduced. These techniques can enhance the SNR.

The brain styles utilized in BCIs are characterized with the aid of sure functions or right-ties. For example, amplitudes and frequencies are crucial features of sensorimotor rhythms and SSVEPs. The firing fee of man or woman neurons is an vital function of invasive BCIs using intracortical recordings. The feature extraction algorithms of a BCI calculate (extract) those capabilities. Feature extraction may be seen as any other step in preparing the alerts to facilitate the subsequent and ultimate sign processing level, detection and classification.

Detection and category of mind styles is the middle signal processing venture in BCIs. The user elicits sure mind styles by way of performing intellectual tasks in keeping with intellectual strategies, and the BCI detects and classifies those patterns and translates them into appropriate instructions for BCI programs.

This detection and classification process can be simplified when the person communicates with the BCI most effective in well described time frames. Such a time frame is indicated by using the BCI by way of visible or acoustic cues. For instance, a beep informs the person that s/he may want to ship a command throughout the approaching time frame, which might final 2–6 s. During this time, the person is supposed to perform a selected mental challenge. The BCI attempts to classify the mind alerts recorded in this time frame. This kind of BCI does no longer remember the possibility that the person does no longer wish to talk something at some stage in such a time frames, or that s/he desires to talk out of doors of a unique time frame.

This mode of operation is called synchronous or cue-paced. Correspondingly, a BCI using this mode of operation is called a synchronous BCI or a cue-paced BCI. Although those BCIs are tremendously smooth to expand and use, they're impractical in lots of actual-world settings. A cuepaced BCI is rather like a keyboard that can simplest be used at sure times.

In an asynchronous or self-paced BCI, customers can have interaction with a BCI at their leisure, with out annoying about well described time frames. Users might also ship a

signal, or pick now not to use a BCI, each time they need. Therefore, asynchronous BCIs or self-paced BCIs ought to examine the brain signals constantly. This mode of operation is technically greater stressful, however it gives a greater herbal and convenient shape of interaction with a BCI.

6. MOTOR IMAGINARY

Moving a limb or even contracting a single muscle changes brain hobby in the cortex. In truth, already the training of motion or the imagination of movement additionally exchange the so-referred to as sensory motor rhythms. Sensorimotor rhythms (SMR) confer with oscillations in brain hobby recorded from somatosensory and motor regions (see Fig. 6). Brain oscillations are generally categorized in line with specific frequency bands which might be named after Greek letters (delta: < 4 Hz, theta: 4–7 Hz, alpha: 8–12 Hz, beta: 12–30 Hz, gamma: > 30 Hz). Alpha pastime recorded from sensorimotor areas is also called mu interest. The decrease of oscillatory hobby in a specific frequency band is called Event-related desynchronization (ERD). Correspondingly, the growth of oscillatory interest in a selected frequency band is called Event-related synchronization (ERS). ERD/ERS patterns can be volitionally produced with the aid of motor imagery, that is the imagination of movement without definitely appearing the motion. The frequency bands which are most crucial for motor imagery are mu and beta in EEG indicators. Invasive BCIs regularly additionally use gamma hobby, that is hard to discover with electrodes established outdoor the top.

Topographically, ERD/ERS styles follow a homuncular organisation. Activity invoked by way of right hand movement imagery is maximum distinguished over electrode place C3. Left hand movement imagery produces pastime most prominent over C4. That is, pastime invoked via hand motion imagery is located on the contralateral (opposite) side. Foot movement imagery invokes hobby over Cz. A distinction between left and proper foot motion is not viable in EEG because the corresponding cortical regions are too near. Similarly, ERD/ERS styles of individual arms can not be discriminated in EEG. To produce styles that can be detected, the cortical areas concerned have to be massive enough so that the resulting activity is satisfactorily distinguished in comparison to the final EEG (history EEG). Hand areas, foot regions, and the tongue region are relatively large and topographically one-of-a-kind. Therefore, BCIs had been managed by imagining transferring the left hand, proper hand, toes, and tongue.

ERD/ERS styles produced by using motor imagery are comparable of their topography and spectral behavior to the patterns elicited by way of real actions. And considering that those patterns originate from motor and somatosensory regions, which are at once connected to the regular neuromuscular output pathways, motor imagery is a par-

ticularly suitable mental approach for BCIs. The manner how motor imagery ought to be accomplished to excellent use a BCI may be special. For instance, a few BCIs can inform if the users are considering transferring your left hand, right hand, or ft. This can cause a BCI that allows 3 indicators, which might be mapped on to instructions to transport left, proper, and choose. Another sort of motor imagery BCI relies on more summary, challenge-particular styles of moves. Over the route of numerous training sessions with a BCI, people can learn and expand their personal motor imagery approach. In a cursor movement venture, for example, human beings analyze which styles of imagined moves are best for BCI manipulate, and reliably move a cursor up or down. Some topics can learn how to circulate a cursor in two or even 3-dimensions with similarly training.

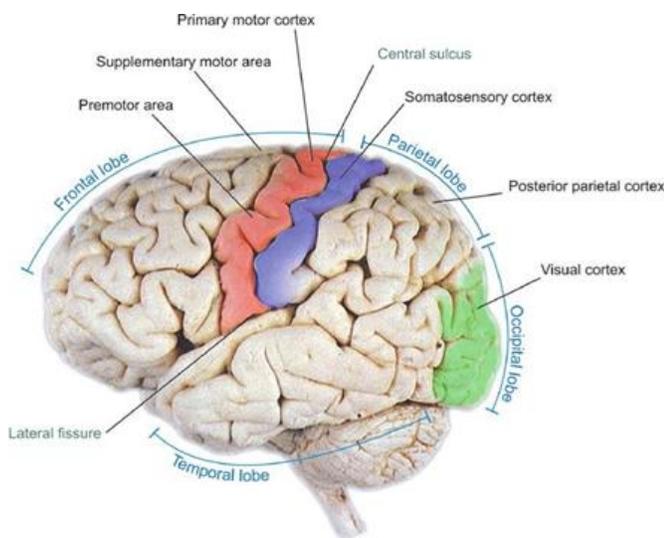


Figure 6 Overview parts of Cerebrum

In assessment to BCIs primarily based on selective interest, BCIs based on motor imagery do no longer rely upon outside stimuli. However, motor imagery is a skill that must be discovered. BCIs primarily based on motor imagery typically do now not paintings thoroughly in the course of the first consultation. Instead, not like BCIs on selective attention, a few training is necessary. While overall performance and education time range throughout topics, most subjects can acquire exact manage in a 2-choice assignment with 1–4 h of schooling (see chapters “The Graz Brain–Computer Interface”, “BCIs in the Laboratory and at Home: The Wadsworth Research Program”, and “Detecting Mental States by means of Machine Learning Techniques: The Berlin Brain–Computer Interface” in this ebook). However, longer training is often essential to gain enough control. Therefore, schooling is an important factor of many BCIs. Users learn via a manner referred to as operant conditioning, that’s a fundamental term in psychology. In operant conditioning, humans learn to accomplice a positive movement with a

reaction or impact. For instance, humans examine that touching a hot stove is painful, and by no means do it once more. In a BCI, a consumer who wants to circulate the cursor up might also research that mentally visualizing a positive motor mission inclusive of a clenching one’s fist is much less effective than thinking about the kinaesthetic experience of any such movement. BCI studying is a special case of operant conditioning because the consumer isn’t acting an action in the classical feel, when you consider that s/he does no longer circulate. Nonetheless, if imagined movements produce results, then conditioning can nevertheless occur. During BCI use, operant conditioning entails training with feedback this is generally offered on a laptop display. Positive comments suggests that the brain alerts are modulated in a desired manner. Negative or no remarks is given when the person turned into now not capable of carry out the preferred task. BCI studying is a kind of comments known as neuro comments. The comments indicates whether the user done the intellectual undertaking properly or didn’t achieve the preferred intention via the BCI. Users can utilize this feedback to optimize their mental duties and improve BCI performance. The comments may be tactile or auditory, but most usually it is visible. Chapter “Neuro remarks Training for BCI Control” on this e book affords greater details about neuro-comments and its significance in BCI studies.

7. CONCLUSION

Taken collectively, BCI studies has made first-rate development in recent years and give up-customers gain from BCI-controlled Assistive Technologies in the software domain names of communication, mobility aids, and neuroprosthesis control. However, BCIs are not yet geared up for impartial home use. To establish BCIs as AT ultimately-person’s home, 3 gaps want to be bridged: (1) the usability, (2) the reliability, and (3) the translational hole. In popular, the setup and managing of modern-day BCI systems is tremendously complicated as compared to traditional AT and wishes the presence of technical specialists. Thus, BCIs need to be improved to a stage at which end-users collectively with their caregivers are able to follow the structures independently at home. A key aspect for attaining this intention is the supply of easier to handle, gel-much less electrodes providing enough signal fine. Only long-time period studies with cease-users will permit us to demonstrate the reliability of BCIs and in addition improve the structures. With the considerable implementation of sensible shared control mechanisms, uncertainties and non-stationarities, which can be inherent to non-invasive MI-BCI structures, may be partly tackled. Nevertheless, a MI-BCI need to now not be taken into consideration as an add-on to existing user interfaces for actual-time neuroprosthesis manipulate, if the preliminary BCI overall performance is low and now not stable over classes. The relatively new concept of the hybrid BCI holds promise that BCIs seamlessly integrate into traditional person

interfaces and may make bigger the organization of potential customers. First research incorporating the hybrid BCI technique show that a preferred setup of the gadget in one-of-a-kind end-user agencies does no longer exist. In reality, the opportunity of a customised configuration – some thing very not unusual to the AT field might be critical for the fulfillment of BCIs as manage interface for ADs.

Most critical, greater translational research regarding give up-customers at their homes are needed to cope with the troubles and problems arising from applications out of doors studies labs. Adopting the consumer-focused approach in BCI studies and increase-ment allows us – in an iterative technique between builders and users – to in addition enhance BCI and to address the particular wishes and necessities of cease-customers.

REFERENCES

- [1] Blankertz, B., G. Dornhege, M. Krauledat, K.R. Müller, V. Kunzmann, F. Losch, and G. Curio. 2006. The Berlin brain-computer interface: EEG-based communication without subject training. *IEEE Transactions on Neural Systems and Rehabilitation Engineering* 14(2): 147–152. doi:10.1109/TNSRE.2006.875557.
- [2] Borenstein, J., and Y. Koren. 1991. The vector field histogram – Fast obstacle avoidance for mobile robots. *IEEE Transactions on Robotics and Automation* 7(3): 278–288.
- [3] Bradberry, T.J., R.J. Gentili, and J.L. Contreras-Vidal. 2010. Reconstructing three-dimensional hand movements from noninvasive electroencephalographic signals. *Journal of Neuroscience* 30(9): 3432–3437. doi:10.1523/JNEUROSCI.6107-09.2010.
- [4] Carlson T., and Y. Demiris. 2008. Human-wheelchair collaboration through prediction of intention and adaptive assistance. In *Proceedings of the IEEE International Conference on Robotics and Automation (ICRA)*, Pasadena, CA.
- [5] Carlson, T., and J.d.R. Millán. 2013. Brain-controlled wheelchairs: A robotic architecture. *IEEE Robotics and Automation Magazine* 20(1): 65–73.
- [6] Cincotti, F., D. Mattia, F. Aloise, S. Bufalari, G. Schalk, G. Oriolo, A. Cherubini, M.G. Marciani, and F. Babiloni. 2008. Non-invasive brain-computer interface system: Towards its application as assistive technology. *Brain Research Bulletin* 75(6): 796–803. doi:10.1016/j.brainresbull.2008.01.007.
- [7] Clauzel, G., B. Kaltner, C. Breitwieser, and G.R. Müller-Putz. 2012. Combining Hybrid BCI and signal quality monitoring to improve user experience. Paper presented at the 1st international DECODER workshop, Boulogne-Billancourt, France, 11 March 2012.
- [8] Collinger, J.L., B. Wodlinger, J.E. Downey, W. Wang, E.C. Tyler-Kabara, D.J. Weber, A.J.C. McMorland, M. Velliste, M.L. Boninger, and A.B. Schwartz. 2013. High-performance neuroprosthetic control by an individual with tetraplegia. *The Lancet* 381(9866): 557–564.
- [9] Crago, P.E., W.D. Memberg, M.K. Usey, M.W. Keith, R.F. Kirsch, G.J. Chapman, M.A. Katorgi, and E.J. Perreault. 1998. An elbow extension neuroprosthesis for individuals with tetraplegia. *IEEE Transactions on Rehabilitation Engineering* 6(1): 1–6.
- [10] Creasey, G.H., K.L. Kilgore, D.L. Brown-Triolo, J.E. Dahlberg, P.H. Peckham, and M.W. Keith. 2000. Reduction of costs of disability using neuroprostheses. *Assistive Technology* 12(1): 67–75. doi:10.1080/10400435.2000.10132010.
- [11] Dambock, D., M. Kienle, K. Bengler, and H. Bubb. 2011. The H-metaphor as an example for cooperative vehicle driving. Paper presented at the Proceedings of the 14th international conference on Human-computer interaction: Towards mobile and intelligent interaction environments – Volume Part III, Orlando, FL.
- [12] Dietz, V., and A. Curt. 2006. Neurological aspects of spinal-cord repair: Promises and challenges. *Lancet Neurology* 5(8): 688–694. doi:S1474-4422(06)70522-1.
- [13] Eimer, M. 2000. Event-related brain potentials distinguish processing stages involved in face perception and recognition. *Clinical Neurophysiology* 111(4): 694–705. doi:S1388-2457(99)00285-0.
- [14] Enzinger, C., S. Ropele, F. Fazekas, M. Loitfelder, F. Gorani, T. Seifert, G. Reiter, C. Neuper, G. Pfurtscheller, and G.R. Müller-Putz. 2008. Brain motor system function in a patient with complete spinal cord injury following extensive brain-computer interface training. *Experimental Brain Research* 190(2): 215–223. doi:10.1007/s00221-008-1465-y.
- [15] Farwell, L.A., and E. Donchin. 1988. Talking off the top of your head: Toward a mental prosthesis utilizing event-related brain potentials. *Electroencephalography and Clinical Neurophysiology* 70(6): 510–523.
- [16] Allison, B.Z., R. Leeb, C. Brunner, G.R. Müller-Putz, G. Bauernfeind, J.W. Kelly, and C. Neuper. 2012. Toward smarter BCIs: Extending BCIs through hybridization and intelligent control. *Journal of Neural Engineering* 9(1): 013001. doi:10.1088/1741-2560/9/1/013001.
- [17] Anderson, K.D. 2004. Targeting recovery: Priorities of the spinal cord-injured population. *Journal of Neurotrauma* 21(10): 1371–1383.
- [18] Bensch, M., A.A. Karim, J. Mellinger, T. Hinterberger, M. Tangermann, M. Bogdan, W. Rosenstiel, and N. Birbaumer. 2007. Nessi: An EEG-controlled web browser for severely paralyzed patients. *Computational Intelligence and Neuroscience* 71863. doi:10.1155/2007/71863.
- [19] Gan, L.S., and A. Prochazka. 2010. Properties of the stimulus router system; a novel neural prosthesis. *IEEE Transactions on Biomedical Engineering* 57(2): 450–459. doi:10.1109/TBME.2009.2031427.
- [20] Ganzini, L., W.S. Johnston, and W.F. Hoffman. 1999. Correlates of suffering in amyotrophic lateral sclerosis. *Neurology* 52(7): 1434–1440.
- [21] Gollee, H., I. Volosyak, A.J. McLachlan, K.J. Hunt, and A. Graesser. 2010. An SSVEP-based brain-computer interface for the control of functional electrical stimulation. *IEEE Transactions on Bio-medical Engineering* 57(8): 1847–1855. doi:10.1109/TBME.2010.2043432.
- [22] Gordon, T., and J. Mao. 1994. Muscle atrophy and procedures for training after spinal cord injury. *Physical Therapy* 74(1): 50–60.
- [23] Gourab, K., and B.D. Schmit. 2010. Changes in movement-related beta-band EEG signals in human spinal cord injury. *Clinical Neurophysiology* 121(12): 2017–2023. doi:10.1016/j.clinph.2010.05.012.
- [24] Guger, C., S. Daban, E. Sellers, C. Holzner, G. Krausz, R. Carabalona, F. Gramatica, and G. Edlinger. 2009. How many people are able to control a P300-based brain-computer interface (BCI)? *Neuroscience Letters* 462(1): 94–98. doi:10.1016/j.neulet.2009.06.045S0304-3940(09)00819-2.
- [25] Halder, S., M. Rea, R. Andreoni, F. Nijboer, E.M. Hammer, S.C. Kleih, N. Birbaumer, and A. Kübler. 2010. An auditory oddball brain-computer interface for binary choices. *Clinical Neurophysiology* 121(4): 516–523. doi:10.1016/j.clinph.2009.11.087 S1388-2457(09)00751-2.
- [26] Hart, R.L., K.L. Kilgore, and P.H. Peckham. 1998. A comparison between control methods for implanted FES hand-grasp systems. *IEEE Transactions on Rehabilitation Engineering: A Publication of the IEEE Engineering in Medicine and Biology Society* 6(2): 208–218.