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Manuscript

Wireless Programmable Recording and Stimulation of Deep Brain Activity in Freely Moving Humans

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1 Abstract

Current implantable devices that allow for recording and stimulation of brain activity in humans 2 3 are not inherently designed for research and thus lack programmable control and integration with wearable sensors. We developed a platform that enables wireless and programmable intracranial 4 electroencephalographic recording and deep brain stimulation integrated with wearable 5 technologies. This methodology, when used in freely moving humans with implanted neural 6 devices, can provide an ecologically valid environment conducive to elucidating the neural 7 mechanisms underlying naturalistic behaviors and developing viable therapies for neurologic and 8 psychiatric disorders. 9

Keywords – Neuroimaging Methods, Human, Intracranial EEG, Deep Brain Stimulation, Wearables,
 Virtual Reality, Augmented Reality

12 Main

Traditional methods for recording and modulating brain activity in humans (e.g., fMRI, MEG, 13 TMS) require immobility and are thus limited in their application during laboratory-based tasks 14 low in ecological validity. Given the recent increase in medical therapies using implanted neural 15 devices to treat and evaluate abnormal brain activity in patients with epilepsy [1] and other 16 neurologic and psychiatric disorders [2-6], recording and modulating deep brain activity during 17 freely moving behavior is now possible. There are already over two thousand individuals with 18 chronic sensing and stimulation electrodes implanted within the brain, with the number expected 19 to increase as additional invasive treatments are proven successful. The range of brain areas 20 available for study in these participants is diverse since electrodes are placed within a variety of 21 cortical (e.g., orbitofrontal, motor, temporal cortices) and/or subcortical (e.g., medial temporal 22

lobe, basal ganglia) areas depending on an individual's clinical prognosis. Patient populations 23 with implanted neural devices thus provide a rare scientific opportunity to directly record from 24 and stimulate a variety of locations within the human brain during freely moving behaviors 25 without the confounds of immobility and motion-related artifacts present in other recording 26 methods [7-9]. A few neuroscientists have begun to capitalize on this opportunity [10][11][12]. 27 However, these recent studies did not provide universally applicable methods for real-time 28 viewing and control nor the ability to stimulate and perform precise synchronization of the 29 intracranial electroencephalographic (iEEG) and externally acquired data during free movement. 30 Here, we provide a first-of-its-kind mobile deep brain recording and stimulation (Mo-DBRS) 31 platform that enables flexible wireless control over chronically implanted neural devices and 32 synchronization with wearable technologies that can record heart rate, respiration, skin 33 conductance, scalp EEG, full-body movement/positional information, and eye movements. 34 Moreover, when used in conjunction with virtual/augmented reality (VR/AR) technologies, the 35 Mo-DBRS platform can provide ecologically valid environments to simulate real-world 36 experiences and open a new area of research in the fields of basic, cognitive, and clinical 37 neurosciences. 38

We implemented, characterized, and validated the components of our Mo-DBRS platform in five research participants (Table S1) previously implanted with the RNS® System (NeuroPace, Inc., Mountain View, Fig. 1a) with electrodes in a variety of medial temporal and frontal regions (Fig. 1b, Table S2) for treatment in accordance with the product labeling. All participants volunteered for the study by providing informed consent according to a protocol approved by the UCLA Medical Institutional Review Board (IRB). A central part of the platform is a set of Research Tools (see online methods for details), which allows for wireless and bioRxiv preprint doi: https://doi.org/10.1101/2020.02.12.946434; this version posted February 13, 2020. The copyright holder for this preprint (which was not certified by peer review) is the author/funder. All rights reserved. No reuse allowed without permission.

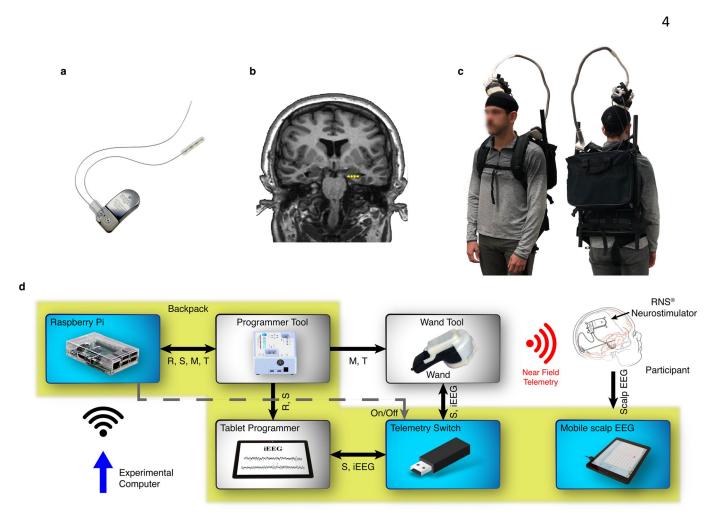


Fig. 1 | **Mobile Deep Brain Recording and Stimulation (Mo-DBRS) platform. a**, Example RNS Neurostimulator model RNS-300M with two leads containing a total of eight depth electrode contacts. **b**, An example participant's magnetic resonance imaging (MRI) scan showing four-electrode contact locations (yellow) in the left hippocampus (electrode locations determined by co-registering a post-implant computerized tomography image (CT). c, Full platform with wearable backpack that carries the **d**, Mo-DBRS Research Tools, which receive commands from an Experimental Computer, including R – *Store*, S – *Stim*, M – *Magnet*, T – *Mark*. A Raspberry Pi serves as an input to the Research Tools, via wireless forwarding of commands to the Programmer Tool. The Wand wirelessly (Near Field Telemetry) transmits the commands and receives data to and from the implanted RNS System. Items highlighted with a yellow background are Research Tools that can be carried in a wearable backpack. Shown is the Tablet Programmer; however, the same setup applies if using the Laptop Programmer. Solid arrows indicate a USB serial connection. A dashed arrow indicates a single wired connection. The black or red Wifi symbols indicate a wireless local network connection or Near Field Telemetry, respectively.

- ⁴⁶ programmable control of the RNS System, including the implanted neurostimulator. The Mo-
- 47 DBRS components can be carried by backpack in a full (weight = \sim 9 lbs, Fig. 1c, d, S1a) or
- lightweight (Mo-DBRS Lite; weight = ~ 1 lbs, Fig. S1b, Fig. S2) wearable platform for use
- 49 during ambulatory (Fig. S1a) or stationary (Fig. S1c) research paradigms.

The full wearable version of the platform (Mo-DBRS) provides real-time viewing, 50 storage, and synchronization of iEEG with external data, as well as on-demand triggering of deep 51 brain stimulation (DBS). These functionalities can be accessible on a local wireless network 52 through a TCP/IP Socket server running on a small board computer, Raspberry Pi (RP). The 53 implanted RNS Neurostimulator communicates via Near Field Telemetry, thus requiring the 54 Wand to be placed on a participant's head, close to the underlying implanted RNS 55 Neurostimulator (Fig. 1c). The Programmer, when used with the custom-built Programmer Tool, 56 can accept commands for iEEG storage (Store command) and DBS (Stim command). The Wand, 57 when used with the custom-built Wand Tool, allows for the injection of a signal (Mark 58 command) into the Real-Time iEEG data that can be used for synchronization. The Wand Tool 59 can also deliver an electromagnetic pulse (via a Magnet command), which triggers the local 60 storage of iEEG on the implanted RNS Neurostimulator itself. While the Real-Time iEEG data 61 can be transferred to the Programmer in real-time via the Store command, the Magnet command 62 triggers the iEEG data to be saved on the implanted RNS Neurostimulator and then be retrieved 63 at a later time via the Wand. For remote programmable control of the RNS System, the RP can 64 send commands to the Programmer Tool, which are forwarded to the Programmer (Real-Time 65 iEEG Store and Stim) and the Wand Tool (Mark and Magnet). The use of the RP timestamp logs 66 and the Mark command allows for the synchronized time difference between the RP's input and 67 the Real-Time iEEG data to be less than 16 milliseconds (Fig. S3, Fig. S4). During experimental 68 task paradigms, the Real-Time iEEG can be remotely viewed from the Programmer, via screen-69 sharing programs over the network (Figs. S5b, S6). 70

The lightweight version of the platform (Mo-DBRS Lite) uses onboard storage capabilities of the implanted RNS Neurostimulator and the ability to trigger a Magnet command

with a single electromagnet device (Fig. S2a), resulting in a recording-only solution. Mo-DBRS 73 Lite thus requires a separate stand-alone electromagnet device with sufficient driving power that 74 can send a Magnet command, which can be triggered 1) with a physical button press, 2) at a pre-75 configured repeated number of programmable seconds (Fig. S2a), 3) or be fully programmable 76 (Fig. S2b) via a RP server that sends Magnet commands on-demand once a selected message is 77 received from the local network. For all three options, a visible LED worn externally (Fig. S2b) 78 is triggered simultaneously with the Magnet and can be used to synchronize the stored iEEG 79 activity offline with data acquired from external wearable devices. For the 3rd option, the RP 80 timestamp logs can be used in addition to the Magnet command and LED for synchronization 81 purposes. 82

One unique aspect of the Mo-DBRS platform is that it can be used with human 83 participants who can wear on-body sensors and devices (wearables). We, therefore, include in 84 the platform, solutions for synchronization of iEEG, DBS, and wearable technologies including 85 full-body motion capture (Figs. 2b, S1e-f), eye tracking (Figs. 2c, S1a,c), biometrics (heart rate, 86 skin conductance, respiration, Fig. 2d, S1d), and scalp EEG (Fig. 2f). In addition to traditional 2-87 D computer-based tasks (Fig. S1c) and real-world scenarios (Fig. S1a), the Mo-DBRS platform 88 can also allow participants to view synchronized task stimuli on wearable VR/AR headsets (Figs. 89 90 2a,h, S1e-f) that simulate naturalistic real-world experiences, therefore, allowing for full head and body movements under experimental control. 91

Currently, researchers use a variety of stimulus presentation software programs (e.g., Matlab, Python, Unity, etc.) on an Experimental Computer (Fig. 2g) to implement their Experimental Task Paradigms whether stationary or mobile. Nearly all of the software programs allow for script modifications where a TCP/IP Socket client can be added to establish a real-time

⁹⁶ connection and control over an RP. Thus, the Mo-DBRS platform includes open-source code

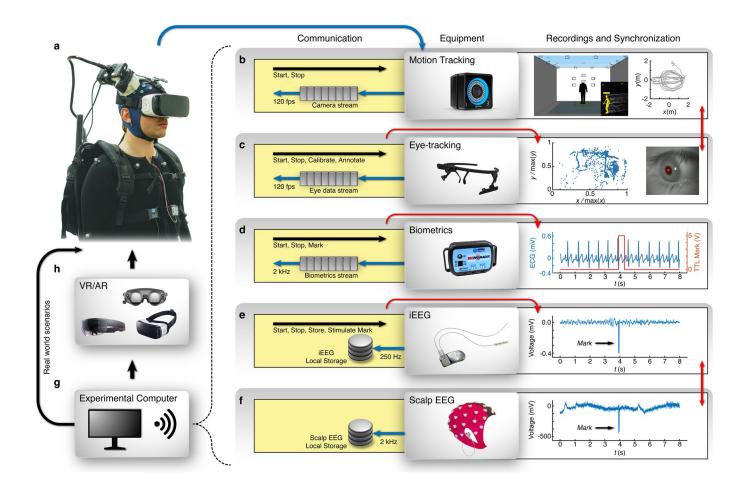


Fig. 2 | Wearable technologies included in the Mo-DBRS platform. On the right (b - f), the wearable measurements are listed, including their wireless connection with the Experimental Computer, a synchronization solution, and an example data trace for each. Yellow boxes reflect the communication flow between the Experimental Computer and the external wearables. Within the yellow boxes, the black arrows show the communication flow (commands sent), blue arrows show the data flow (gray boxes indicate real-time data transfer and gray circles indicate local on-device storage), and red arrows point to one possible synchronization solution between different components. \mathbf{a} , An example participant wearing the full Mo-DBRS platform with a VR headset (also works with an AR or eye-tracking headset). b, Wall-mounted cameras for 3-D full-body motion tracking used to record position and movement streaming in real-time at a rate of 120 fps. Cameras are connected through the local wireless network, and a preconfigured recording is controlled with a start/stop function. In the recording box, there is an example realtime view of the participant's location (left) and an extracted top-down view of the participant's movement (right). c, Wearable eye-tracking system with 120 fps head direction camera and 200 fps eye cameras used for real-world environment studies. Eyetracking is synchronized with wearable or wall-mounted motion capture cameras from within the Experimental Task Paradigm controlled via the Experimental Computer. The eye-tracking headset is connected through the local wireless network awaiting start, stop, calibrate, or annotate commands. In the recording box, there is a snapshot view from one eye tracking camera (right), and a 2D projection of pupil movement (left). d, The wearable biometric system for heart rate, skin conductance, and respiration measurements. In the recording box, there is an ECG recording trace in line with a synchronization signal containing a 400 ms wide synchronization pulse. e, The wireless implantable RNS Neurostimulator, which is connected/synchronized with the Experimental Task Paradigm controlled by the Experimental Computer through the local wireless network via the RP. In the recording box, there is an example of a raw Real-Time iEEG data trace with an example Mark command signal used for synchronization. f, Wearable scalp EEG cap. In the recording box, is an example 2000 Hz sampled scalp EEG data trace with an example Mark command signal used for synchronization. g, Experimental Computer (e.g., laptop, tablet, or phone) running the Experimental Task Paradigm. h, VR/AR headsets integrated and synchronized that are shown include the SMI Samsung Gear VR, Microsoft HoloLens, and Magic Leap, but others can also be used (HTC Vive, Oculus, etc). For studies done in a real-world environment, h step can be bypassed, and eve-tracking goggles shown in c can be used instead.

97 solutions for the most commonly used programming environments (i.e., Matlab, Unity, and 98 Python), allowing experimenters to adapt and upgrade their Experimental Task Paradigms to 99 work with the Mo-DBRS platform. We also provide a graphical user interface solution for use on 100 a phone/tablet (Fig. S5) in the case of manual non-automated tasks. It must be borne in mind that 101 the specific wearable platform version that is utilized (i.e., Mo-DBRS or Mo-DBRS Lite) affects 102 the system setup and, as such, the tradeoffs must be considered during the design of the 103 Experimental Task Paradigm (see Supplementary Information and Table S3).

All wearable equipment is connected to the same local network, and is synchronized with the Experimental Task Paradigm, by using software timestamping, *Mark* commands, and other task-dependent visual or audio events captured by wearable recording devices. The total synchronization accuracy for the Mo-DBRS platform is ~ 16 ms. An example participant wearing the full Mo-DBRS platform is shown in Figure 2, with the underlying code structure in Fig. S13. However, most Experimental Task Paradigms seldom require all of these components simultaneously and, therefore, can be customized for a specific research study (Fig. S1).

While iEEG allows for recording of activity within specific deep brain structures, scalp 111 112 EEG remains a prominent method to probe the human brain, as it is a more readily available 113 methodology due to its non-invasive nature [9][13]. The Mo-DBRS platform allows for simultaneous iEEG and scalp EEG (Fig. S7)—an opportunity that can elucidate a link between 114 deep and surface brain activity and bridge findings across studies. To enable simultaneous iEEG 115 and scalp EEG, we developed two solutions for minimizing RNS System telemetry-related 116 artifacts in scalp EEG data through the use of a programmable switch for disabling/enabling 117 telemetry (Telemetry Switch, Figs. S8, S9) and signal processing methods for noise reduction 118 (Online Methods, Figs. S10, S11, S12). 119

Currently, in the fields of Cognitive and Clinical Neuroscience, naturalistic behavioral 120 paradigms with rich behavioral data limit the recording of neural data, while paradigms 121 comparatively rich in neural data are almost impossible to carry out in naturalistic settings. The 122 proposed platform provides a new method for modulating and interrogating the human brain 123 during naturalistic behaviors with ecologically valid tasks by enabling wireless and 124 programmable DBS and iEEG recordings synchronized with biological and behavioral data via 125 wearable technologies. While there are clear advantages in adopting the platform in order to 126 provide a unique window into the human brain, new users should be cognizant of limitations 127 related to iEEG recordings in patients with neurologic or psychiatric disorders [9]. We provide 128 the functionalities and details necessary for building and optimizing the Mo-DBRS platform-129 during ambulatory or stationary behavioral paradigms-through real-time wireless control of 130 sensing, stimulation, and synchronization with external devices such as eye-tracking/VR/AR 131 headsets and other external behavioral measurements. Several components of the platform 132 including open-source code provided for wireless programmable synchronization with wearables 133 sensors can be adapted for use with other existing neuroprosthetic devices such as the Medtronic 134 RC+S or others in development. In addition to enabling basic Neuroscience studies, when used 135 in patients with neurologic and psychiatric disorders along with continuous behavioral metrics, 136 the Mo-DBRS platform provides an opportunity to characterize neural mechanisms and develop 137 and test novel treatments, in unprecedentedly data-rich and naturalistic environments. 138

139 **Online content**

See online methods for full details required to build the platform, including example code for remote control and synchronization of components (<u>https://github.com/suthanalab/Mo-DBRS</u>).

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Online Methods

2 Mo-DBRS Platform Components and Setup

We outline below detailed methods needed to re-create the Mo-DBRS platform as well as suggested solutions for proper use, setup, and synchronization of data streams. We also describe the procedures used to validate the platform capabilities as well as characterize synchronization latencies. Corresponding findings are presented in Supplementary Information. Required code and algorithms are publicly available as open-source code and can be downloaded from GitHub (https://github.com/suthanalab/Mo-DBRS).

9 Intracranial EEG (iEEG) Data Acquisition

The FDA approved RNS System (Fig. 1a) includes an implantable neural device (RNS 10 Neurostimulator) used to detect abnormal electrical activity in the brain and respond by 11 delivering imperceptible levels of electrical stimulation to normalize brain activity before an 12 individual experiences seizures. Each participant with an RNS System has one or two implanted 13 depth electrode lead(s) that are 1.27 mm in diameter, each with four platinum-iridium electrode 14 contacts (surface area=7.9 mm², 1.5 mm long) with an electrode spacing of either 3.5- or 10-mm. 15 To localize electrode contacts to specific brain regions, a high-resolution post-implantation CT 16 image is obtained and co-registered to a pre-implantation whole brain and high-resolution MRI 17 for each participant using previous methods [1] (Example Fig. 1b). The RNS System records 18 iEEG activity on up to four bipolar channels at 250 Hz. Onboard Analog filters can be 19 configured to capture the widest possible bandwidth 4 - 120 Hz for the RNS-300M or 1 - 90 Hz 20 for the RNS-320 models. The acquired iEEG data can be stored in real-time (Real-Time iEEG) 21

or transferred at a later time (Magnet-triggered iEEG) to a Laptop or Tablet Programmer device (see *Mo-DBRS Research Tools* below for details). To view Real-Time iEEG activity, a Virtual Network Computing (VNC) TightVNC server was installed on the Laptop Programmer, running while placed in the participant's backpack. Until VNC can be supported on the Tablet Programmer, a phone camera with TeamViewer installed can be used for viewing the real-time data (Fig. S6).

28 Virtual and Augmented Reality (VR/AR)

29 The Mo-DBRS platform currently enables successful synchronization with VR/AR headsets equipped with eye-tracking, including the SMI Samsung gear, TOBII HTC Vive, 30 Microsoft HoloLens, Magic Leap and can be adapted for use with other VR/AR headsets. 31 VR/AR environments are programmed using openly available 3-D modeling and game 32 development tools such as the Unity game engine and the C# language, to implement customized 33 immersive environments with controlled stimuli and functionalities. Using motion capture 34 (wearable or wall-mounted cameras), the participant's location can be mirrored in real-time in 35 the VR/AR application. Example code for this implementation is openly available on GitHub 36 (https://github.com/suthanalab/Mo-DBRS). 37

38 **Biometric Measurements**

Simultaneous Photoplethysmogram (PPG), electrodermal activity (EDA), electrocardiogram (ECG), and respiration (RSP) measurements can be performed using the wireless and wearable Smart Center system (BIOPAC® Systems, Inc.), controlled by the Acq*Knowledge* software interface. The Mo-DBRS platform integrates the BioNomadix Smart Center device, a digital interface with USB connection, that collects data from two BioNomadix

(Fig. 2d) transmitters (First: RSP + ECG; Second: PPG + EDA). The USB-TTL Interface 44 module can be used for millisecond accurate TTL synchronization through a USB serial port. 45

The setup uses three ECG recording electrodes fixed to the left and right upper chest and 46 one on the left lower chest. Two EDA recording electrodes can also be placed on the tips of non-47 dominant hand fingers (Fig. S1d). The BioNomadix and USB-TTL interface module is 48 connected to acquisition modules and an Experimental Computer. Within the Biopac 49 AcqKnowledge software, which is run on the Experimental Computer, all recordings can be 50 configured with a sampling rate of 2 kHz. The Biopac acquisition software can run throughout 51 the experimental session, and the data can be synchronized with the iEEG data and other 52 53 recordings from the Mo-DBRS platform offline.

Eve-tracking 54

Many VR/AR headsets currently have built-in eye-tracking (e.g., SMI Samsung gear, 55 TOBII HTC Vive, Microsoft Hololens, Magic Leap), which is automatically synchronized with 56 the VR/AR tasks (for example programmed in the Unity game engine). For real-world tasks in 57 naturalistic environments, the lightweight Pupil-Labs eye-tracking device (Pupil Core headset) 58 [2] can be used, which has an open-source platform for pervasive eye-tracking and mobile gaze-59 based interaction -- providing binocular eve cameras (up to 200 fps), and an external world-view 60 camera (up to 120 fps) (Fig. 2c). An Experimental Computer can control the eye-tracking 61 hardware through ZeroMQ asynchronous messaging over a local network. The Pupil-Labs 62 mobile application and an Android phone that controls the head-mounted eye-tracking device 63 can be used for ambulatory tasks while a direct connection is sufficient for stationary tasks. The 64 Pupil Capture plugin manager can be configured to include: Annotation Capture (software 65

synchronization marks), Blink Detection (online blink detection algorithm), Pupil Remote 66 (allows wireless eye-tracking control and streaming), Time Sync (for network clock 67 synchronization). For calibration, we used the Screen Marker Calibration and Accuracy 68 Visualizer to assess its quality. 69

Scalp EEG 70

71 Participants with chronically implanted neural devices can also wear a scalp EEG cap that allows for ambulatory behaviors. We integrated with the Mo-DBRS platform a mobile 64-72 channel scalp EEG system (Wave Guard and eego[™] mylab system, ANT Neuro, The 73 Netherlands) that includes a lightweight amplifier (~ 2 lbs) which connects to the cap and a small 74 tablet, which can both be carried in a backpack to which data is being transmitted. After the 75 experimental session, electrode digitization can be completed to verify scalp EEG electrode 76 positions relative to the head and underlying brain (if MRI is available). Scalp EEG and iEEG 77 data can then be synchronized (see Mo-DBRS platform synchronization section below) and 78 analyzed offline. 79

Mo-DBRS Research Tools 80

Flexible control over the implanted RNS Neurostimulator, real-time iEEG recording and 81 storage, deep brain stimulation (DBS) delivery, and synchronization of data streams during free 82 movement, requires additional tools that the user can re-create. These Research Tools are listed 83 84 below. Previous studies [3][4][5] have used variations of the Programmer, Programmer Tool, Wand, and Electromagnet (see components 2 - 5 and 8 below). Components with a single 85 asterisk come with the clinical RNS System, and those with a double asterisk are Research Tools 86 87 that were provided by NeuroPace, Inc. The Mo-DBRS platform requires components 1 - 7. The 88 Mo-DBRS Lite platform requires component 8, while component 1 is optional.

89 **1. Experimental Computer**

An experimental device (e.g., laptop or phone) that runs the behavioral or cognitive task of interest (Experimental Task Program) and sends commands over the network to remotely control the RNS System (Fig. 1d).

93 2. Programmer*

A Programmer (Laptop or Tablet version) that comes with the clinical RNS System can 94 bewas used to retrieve, store, and monitor Real-Time iEEG as well as trigger delivery of 95 DBS (Fig. 1d). The Laptop Programmer is only compatible with the older RNS-300M model, 96 and the Tablet Programmer is compatible with both the older RNS-300M and newer RNS-97 320 models. The Tablet Programmer does not require the researcher to manually program 98 data storage commands (i.e., the Store command, see Programmer Tool section below) into 99 their Experimental Task Program (see GitHub link for example code), unlike the Laptop 100 Programmer, since Real-Time iEEG data storage on the Tablet is performed automatically in 101 chunks of a predefined duration (programmable by user) between 60 seconds and 90 minutes. 102 Lastly, the Tablet Programmer is more responsive and thus delivers commands to the 103 implanted RNS Neurostimulator faster (see Mo-DBRS Platform characterization and 104 105 *validation* section) compared to the Laptop Programmer.

106 **3. Programmer Tool****

To control the Programmer's graphical user interface, an Arduino SAM Board (Model "Due", 32-Bit ARM Cortex-M3) can be used, which accepts one ASCII byte from the Experimental Computer and forwards the information to the Programmer or Wand Tool (Fig. 10). There are two firmware versions for the Programmer Tool, one compatible with the

Laptop Programmer and the other one with the Tablet Programmer. The Laptop Programmer 111 Tool allows for a trigger of four valid commands on the Programmer: 1) The Store command 112 stops Real-Time iEEG transmission, stores up to 240 seconds of previously observed data, 113 and then starts Real-Time iEEG again via a mouse click that selects related functions within 114 the Laptop Programmer graphical user interface. 2) The Stim command initiates the Laptop 115 Programmer to trigger delivery of DBS under predefined parameters that can be manually set 116 by the user on the Laptop Programmer. 3) The *Mark* command delivers a timed and visible 117 pattern into the Real-Time iEEG recording, allowing for synchronization with externally 118 acquired data. Specifically, the Mark command triggers the Wand Tool to inject a distinctive 119 noise pattern, 64 ms in duration, into the Real-Time iEEG data (Fig. S3a) that can be 120 analytically distinguished from the ongoing neural signal (see Mo-DBRS platform 121 synchronization section below). 4) The Magnet command delivers a 520 ms wide 122 electromagnetic pulse (Fig. S3b), which triggers iEEG storage on the implanted RNS 123 Neurostimulator. This command allows for an alternative way of storing the iEEG data 124 through the Wand Tool that does not require real-time transmission to the Programmer. 125 However, if using the Magnet command to trigger data storage, the iEEG data needs to be 126 externally downloaded (by interrogating the implanted RNS Neurostimulator via the Wand) 127 before it gets overwritten by another Magnet command (given the RNS System's limited 128 storage space). The RNS-300M (320) model can store up to 7.5 (13) minutes of Magnet-129 triggered iEEG data (from 8 electrodes, 4 bipolar recordings). The RNS System data buffer 130 capacity is increased if recording on fewer channels (e.g., up to 30 minutes [RNS-300M] and 131 53-minutes [RNS-320] recordings on 1 bipolar channel). The Tablet Programmer Tool 132 133 provides a broader range of possible controls in addition to the described four commands

134		enabled with the Laptop Programmer. Specifically, there is added support for: 300M/320
135		mode selection, independent Real-Time iEEG start/stop commands, and software labeling for
136		synchronization and other purposes.
137		The Programmer Tool's input is a USB serial connection (baud rate: 9600 bps Laptop
138		Programmer Tool, 57600 bps Tablet Programmer Tool). It has two outputs, an output USB
139		connection towards the Programmer and a proprietary NeuroPace connection towards the
140		Wand Tool (described below, Fig. 1d). The Programmer Tool is powered with the input USB
141		connection or with a 12 V battery (required for Magnet commands).
142	4.	Wand*
143		A device that comes with the clinical RNS System that every patient has in their possession
144		and is used to communicate wirelessly with the implanted RNS Neurostimulator via Near
145		Field Telemetry when placed on the surface of the head (Fig. 1d).
146	5.	Wand Tool**
147		A device that holds the Wand and produces the command triggered Mark pulses for Real-
148		Time iEEG synchronization and <i>Magnet</i> pulses for Magnet-triggered iEEG storage (Fig. 1d).
149	6.	Wireless Control Device (Raspberry Pi)
150		All of the previously described Research Tools can be used for stationary (tethered)
151		laboratory computer-based Experimental Task Programs. However, to enable a completely
152		wearable solution that allows for free movement such as during spatial navigation of VR/AR
153		or real-world environments, a small single-board computer, such as the Raspberry Pi 3 (RP,
154		Fig. 1d), Model B, running Raspbian GNU/Linux 9.9 (Stretch) distribution, can be used as a
155		wireless bridge between the Experimental Computer and Programmer Tool. The RP was
156		chosen because it satisfies the minimal requirements: onboard wireless (e.g., network

controllers, Bluetooth, or others) and USB peripherals. Basic RP functionality involves 157 running a secure TCP server that forwards commands from the Experimental Computer to 158 the Programmer Tool. If tasks are completed in indoor environments, the RP can be 159 configured with a static IP address and connected to a local wireless network. For our 160 experimental setup, we have used the Asus RT-AC5300 router; we suggest using this router 161 or one with similar performance. For tasks in outdoor environments, the RP can be 162 configured to provide a remote Access Point (Wi-Fi hotspot) [6]. If not explicitly stated 163 otherwise, all example scripts (Github) on the RP are run using Python 2.7 and are available 164 for download. The scripts on the RP run the TCP server to which clients from the 165 Experimental Computer can be connected. Once the connection is established, the server can 166 be put into an idle state (i.e., blocking the read call function) until a command from the client 167 is received. When the acknowledge receipt is received back from the Programmer Tool, a 168 timestamp is logged. Experimental Computer timestamps are also logged before each 169 command, which can be later used to verify synchronization methods. The role of the RP is 170 critical in the following cases: 1) During the Experimental Task Program, the RP is the only 171 communication channel between the Experimental Computer and the Programmer Tool-this 172 connection is necessary to send behaviorally relevant commands to the Programmer Tool; 2) 173 When the Experimental Task Program requires complex command sequences and their 174 delivery at specific times with high precision. In general, partial implementation of these 175 functions at the RP level, rather than on the Experimental Computer, warrants better 176 flexibility and accuracy of timing; 3) When the Experimental Task Program can be entirely 177 implemented on the RP and, thus, the RP can serve the role of the Experimental Computer. 178

179 7. Telemetry Switch

Since the RNS Neurostimulator is a chronically implanted neural device with no externalized 180 wires, it is possible to simultaneously record synchronized scalp EEG (see Mo-DBRS 181 platform synchronization section for details). We provide solutions for noise reduction in the 182 simultaneously recorded scalp EEG. The noise is a result of the Wand's telemetry given that 183 the scalp EEG cap has to be placed in between the Wand and the implanted RNS System. 184 The first solution is the use of the *Magnet* command to trigger iEEG storage, which does not 185 require telemetry to be implemented and thus results in artifact-free scalp EEG recordings. 186 However, this method lacks the temporal precision required for some Experimental Task 187 Programs since the latency is greater than 250 ms. Therefore, the second solution that can be 188 used is to programmatically switch on/off telemetry (experimental Telemetry Switch, via a 189 USB connection) to prevent telemetry artifacts when possible. While this functionality is 190 possible by manually unplugging the Wand USB cable from the programmer, we instead 191 built a custom Telemetry Switch that can be placed between the Programmer and the Wand 192 (Fig. 1d) to enable/disable telemetry when needed (i.e., enabled when sending commands) by 193 controlling the digital input connected to the RP. If scalp EEG is not needed, the switch may 194 remain ON. For circuit details and code required to build the Telemetry Switch, see Fig. S8 195 and GitHub. Telemetry Switch usage is described in the section on Scalp EEG Artifact 196 *Reduction – Telemetry Switch.* An additional solution is to use artifact rejection offline after 197 data acquisition (see section below on *Scalp EEG Artifact Reduction – Offline Processing*). 198 8. Electromagnet** 199 The Mo-DBRS Lite version of the platform can be used as an alternative solution to the full 200

Mo-DBRS platform, through the use of the custom-built experimental electromagnet device, 201 202 which, due to its size, is a more lightweight solution and thus comfortable for participants

who may be physically impaired and/or have limited mobility. The Mo-DBRS Lite platform 203 requires an electromagnet device that produces a pulse with minimum duration of 520 ms 204 (anything shorter cannot be detected by the implanted RNS Neurostimulator) that can be 205 triggered by the custom-built battery-powered wearable control box (see Fig. S2 for circuit 206 details required to reproduce the control box). The electromagnet component (Fig. S2b-c) is a 207 Research Tool provided by NeuroPace. Depending on a predefined length of Magnet-208 triggered stored iEEG data specified by the user in the Programmer prior to the experimental 209 session, the electromagnet device can be set to be triggered at predefined configurable time 210 intervals (e.g., 30/60/90/180 or 240 s in our case). A small LED-located at proximity of the 211 electromagnet—can be configured to turn on simultaneously with the triggered 212 electromagnetic pulse, and thus be captured by external or wearable cameras, which can later 213 be used to synchronize iEEG activity with external data. Manual triggering of the 214 electromagnet and timers can be handled using a PIC controller (see assembly code on 215 GitHub) that requires additional circuitry for power amplification to drive the electromagnet 216 (Fig. S2a,b). For remote and programmatic control of the wearable electromagnet device 217 (including pulse duration and time of delivery), additional circuitry can be added to the RP 218

220

219

Mo-DBRS Platform characterization and validation

(see Fig. S2a,c for full details needed to reproduce).

We tested the Mo-DBRS platform in-vivo in five participants previously implanted with the RNS Neurostimulator (Table S1) for treatment in accordance with the product labeling and ex-vivo (benchside) with a test RNS Neurostimulator (see Supplementary Information for results). For in-vivo tests, all participants volunteered for the study by providing informed

consent according to a protocol approved by the UCLA Medical Institutional Review Board 225 (IRB). To avoid unintended stimulation artifacts in the iEEG activity, stimulation was turned off 226 with the participant's consent and the RNS System was used only to record brain activity during 227 experimental sessions. 228

In-vivo testing 229

Five participants wore the Mo-DBRS platform and maneuvered freely through an indoor 230 environment, where wall-mounted motion capture cameras were used to monitor position and 231 232 full-body movements with sub-millimeter precision (Fig. 2b). Eye position and movements were recorded with the Pupil Core eye-tracking headset (Fig. 2c) worn and carried with the Pupil 233 Mobile phone device inside of a wearable backpack (Fig. 1c, Fig. S1a). Heart rate (ECG) was 234 measured from the participant's chest, and skin conductance via sensors from the fingers (Fig. 235 2a,d, Fig. S1d). Participants also wore a scalp EEG cap and were asked to carry a sturdy 236 backpack in which we placed necessary equipment (e.g., Mo-DBRS Research Tools, scalp EEG 237 amplifier and data acquisition tablet). Participants were able to wear the setup comfortably for 238 several hours throughout the day. The Wand and Wand Tool were tightly strapped together with 239 a 'Wand holder' (iPhone holder was used; Fig. 1c, Fig. 2a, Fig. S1) using Velcro tape and a 240 rubber band to ensure a stable connection and prevent misalignment between the Wand and 241 Wand Tool, which if not done properly would have led to missed Marks. The flexible metal 242 Wand holder was secured to the backpack to relieve the weight of the Wand and Wand Tool on 243 the participant's head and to provide stability and movement flexibility. Lastly, the Wand was 244 angled close to the implanted RNS Neurostimulator location, and once Real-Time iEEG 245 telemetry was established, it was fixated to the scalp EEG cap using Velcro tape placed on the 246 side of the Wand Tool that was secured to the participant's head (Fig. 1c, Fig. 2a, Fig. S1). We 247

tested both the full Mo-DBRS and Mo-DBRS Lite versions of the platform, which differed in 248 how iEEG data was handled (see Table S3 and Mo-DBRS (Real-Time iEEG) versus Mo-DBRS 249 Lite (Magnet-triggered iEEG) trade-offs section in Supplementary Information for results). Mo-250 DBRS uses the Store command to save streamed Real-Time iEEG on the Programmer (Fig. 2e) 251 and the Mark command for synchronization. The Mo-DBRS Lite version, on the other hand, uses 252 the Magnet command to save iEEG on the implanted RNS Neurostimulator and the same Magnet 253 command for offline synchronization. In parallel, the Experimental Computer (Fig. 2g) acquires 254 other streams of data by running the Experimental Task Program (e.g., in Matlab or Unity), eye-255 tracking software, motion capture software, and biometric measurements (Fig. 2b - d). The 256 Experimental Task Program controls the flow of the experiment based on collected streams of 257 data in real-time. Closing the loop toward the participant in order to control a VR/AR 258 environmental scene, depending on the body and head position, can be achieved by updating the 259 VR/AR headsets (Fig. 2h) or sending Audio/Video messages in real-time. Equipment can be 260 connected through a local wireless network, which allows real-time control, storage, streaming 261 (Fig. 2b-f - communication on the left), and synchronization (Fig. 2b-f - recordings and 262 synchronization on the right) with accuracy of below 16 ms for the full Mo-DBRS platform 263 version. The synchronization fixation points are Mark events for the full Mo-DBRS platform and 264 Magnet events when using the Mo-DBRS Lite version. 265

All commands were sent from the Experimental Computer using Unity software (see GitHub for example code). After the experimental session, all data is then collected, synchronized, and scalp EEG can be cleaned using the methods described in the *scalp EEG Telemetry Artifact Rejection* section. In order to characterize the reliability of command delivery, we tested the four wireless commands (*Store, Stim, Mark*, and *Magnet*) using the Research Tools

and in the following order:

272	•	<i>Mark</i> and <i>Store</i> : 2×240 s iEEG blocks (via <i>Store</i> command) with 100 <i>Mark</i> commands
273		each, delivered every 2 s.

Store, Magnet, and Stim: 3 × 240 s iEEG blocks (via Store and Magnet commands) each
 with 16 DBS pulses (Stim command) with 100 ms burst duration, 0.5 mA output current,
 each at every 1.8 s, 2 s, and 2.2 s.

- Store, Magnet, and Stim: 3 × 240 s iEEG blocks (via Store and Magnet commands) each
 with 16 DBS pulses (Stim command) with 2000 ms burst duration, 0.5 mA output
 current, each at every 3.8 s, 4.2 s, and 5 s.
- Store, Magnet, and Stim with the Telemetry Switch: 2×240 s iEEG blocks (via Store and Magnet commands) each with 8 DBS pulses (Stim command) with 100 ms burst duration, 0.5 mA output current, done with the Telemetry Switch on/off, $t_0 = 5$ s; $t_1 = 7$ s; $t_2 = 3$ s; $t_3 = 5$ s (for t_i definitions see the Scalp EEG Artifact Reduction – Telemetry Switch section below).
- Store, Magnet, and Stim with telemetry switch: 1×240 s iEEG block (via Store and Magnet commands) each with 16 DBS stimulation trials with 100 ms burst duration, 0.5 mA output current, done with the Telemetry Switch on/off, $t_0 = 4.8$ s; $t_1 = 3.9$ s; $t_2 = 0$ s; $t_3 = 5$ s.

289 Ex-vivo testing

Latency measurements were performed on a test RNS-300M Neurostimulator (benchside ex-vivo). The same set of commands was sent as in the in-vivo section, but in this case from the RP instead of the Experimental Computer. Command delivery triggered from the RP was

estimated by executing a send function while simultaneously changing the state of the RP's 293 GPIO. The command delivery could be directly observed on the test RNS-300M device's 294 recording contacts and compared with the RP's GPIO output using an oscilloscope. The network 295 latencies between the Experimental Computer and the RP were measured directly in code using 296 time libraries (i.e., Python and C language). The Asus RT-AC5300 Wireless Router was used, 297 which provided a reliable connection within the range of 20 meters. Due to different clocks on 298 the test RNS System and external equipment, the RP timestamps and RNS timestamps were 299 synchronized by aligning the first Mark appearance in both recordings and setting the RP 1/f 300 slope to the linear fit of the RNS slope. 301

In addition to characterizing the latencies of individual commands, we also estimated the 302 temporal offsets between the Mark command events and the Real-Time iEEG data (i.e., the 303 synchronization/storage accuracy). By sending a simultaneous Mark and a voltage pulse (offset 304 at the source = $22.5 \pm 41.17 \ \mu$ s) to one of the test RNS Neurostimulator electrode contacts, we 305 were able to measure their relative distance in time (Fig. S3e,f). The voltage pulse was generated 306 on the RP's GPIO, attenuated from 3.6 V to 2.6 mV using a resistor divider, recorded by analog 307 frontends, filtered, and digitized into the Real-Time iEEG. The Real-Time iEEG also contained 308 Mark command artifacts. Ten trials of the Mark command showed a discrepancy in the range of 309 12 - 16 ms (Fig. S3f). This offset came from the recording frontend, digitization (250 Hz 310 sampling), and wireless telemetry. 311

Mo-DBRS platform synchronization 312

We detail here an example solution for utilizing the Mark command for synchronization. 313 Specifically, Marks are delivered right after the Store command, while the Real-Time iEEG data 314

is viewed in real-time to detect any loss of telemetry (Wand connection with the implanted RNS 315 Neurostimulator) in which case the corresponding Real-Time iEEG data can be discarded. Marks 316 are then detected using cross-correlation (no normalization) between iEEG data and each of 4 317 Mark signal templates, including a 3-spike template (Fig. S3a) and three versions of a 2-spike 318 template (if 1 of the 3 spikes are missing). Marks are identified as the time points where the 319 correlation coefficient between the iEEG data and at least one of the four Mark templates is 320 higher than 90% of the maximum determined correlation coefficient. These time points are then 321 used to verify that the corresponding iEEG signal value is at a minimum (maximum absolute 322 value of a signed 10-bit iEEG sample is 512) at the same time points. This cross-correlation 323 procedure is repeated for the three versions of the 2-spike Mark template in cases where the full 324 3-spike Mark signal was not captured completely. The Marks that are detected using these 2-325 spike templates are appropriately shifted in time to account for the missed spike given that the 326

predicted time between *Mark* template spikes is known. Using this method, we were able to detect all delivered *Mark* signals in the Real-Time iEEG that contain at least 2 spikes. For synchronization of Magnet-triggered iEEG see the *Mo-DBRS (Real-Time iEEG) versus Mo-DBRS Lite (Magnet-triggered iEEG) trade-offs* section.

For synchronization with the eye tracking system, ZeroMQ API provides annotations for eye-tracking synchronization (~ 10 ms accuracy) with other streams of data. Software annotations can be delivered from the Experimental Task Program (running the behavioral paradigms) to the Pupil-Labs software (Pupil Capture), which runs in parallel on the Experimental Computer. Annotation makers can be sent to the Pupil-Labs software each time the *Mark* command is sent to the implanted RNS System. Additional and redundant synchronization can be achieved by having a small LED placed on the edge of the outward-facing camera on the

eve tracking headset that can turn on for a short period of time (50 ms) simultaneously with the 338 Mark command. The LED can be connected and controlled by the RP. 339 Synchronization, monitored by the Experimental Task Program (Fig. 2, Fig. S13), is 340 summarized as follows: 341 • Depending on the task, the iEEG, biometric measurements, and eve-tracking data can be 342 synchronized using simultaneous Mark commands sent by the Experimental Task 343 Program. 344 iEEG/scalp EEG data can be synchronized with a *Mark* (or *Magnet*) command in the Mo-345 DBRS (Mo-DBRS Lite) platform. 346 Due to pipeline delays with the eye-tracking software annotations, an LED indicator can 347 be connected to the RP and turned on whenever a Mark or Magnet command is being 348 received on the RP (Fig. S13). Similarly to the electromagnet device, we used a 50 ms 349 pulse from the RP to turn on an LED that was captured by the motion capture and eye-350 tracking cameras. 351 There are two challenges in terms of synchronizing scalp EEG and iEEG data, as well as 352 minimizing artifacts due to wireless communication with the implanted RNS System (see 353 Telemetry Switch section above). Synchronization can be done via the Mark or Magnet 354 command, as the resulting signal patterns detected in the nearby scalp EEG electrodes are, in 355 fact, beneficial and can be used to align the scalp EEG and the iEEG data streams. On the other 356

hand, noise patterns resulting from DBS or Real-Time iEEG transmission can be avoided using
 the Telemetry Switch or removed offline using signal processing methods (see *Scalp EEG Telemetry Artifact Reduction* section below).

We performed referential recordings from all accessible channels in the scalp EEG, at 2000 Hz. A higher sampling rate was necessary in order to capture the full frequency range of the RNS Wand telemetry signals in order to model the artifacts that are later used in the cleaning procedure. The referential input signal range is up to 1000 mV_{pp}, which was again useful for capturing large telemetry artifacts and for preventing amplifier saturation. For more information on the amplifier specification, see [7].

Scalp EEG data was processed and synchronized with iEEG data using Matlab 2018a with the Wavelet, Signal Processing, and DSP System Toolboxes. We first began with the raw, unfiltered scalp EEG data from all 64 channels sampled at 2 kHz, denoted as $\mathbf{R}_{C\times Nr}$ (C – number of channels; N_r – number of sample points per task). Each row of **R** was standard score normalized independently.

Next, we located the distinctive noise patterns ("synchronization artifacts") that were created by either *Marks* (Fig. S3a) or *Magnets* (Fig. S3b), depending on whether the Mo-DBRS or Mo-DBRS Lite was used. To do this, we created *Magnet* \mathbf{M}_{Nm} (N_m = 1040 points at 2 kHz) and *Mark* \mathbf{T}_{Nt} (N_t = 128 points at 2 kHz) templates using scaled absolute values of their respective waveforms (e.g., Fig. S3b, and Fig. S3a). Similarly to the *Mark* detection in Real-Time iEEG, exact positions of the artifacts were extracted using raw cross-correlation with no normalization between each channel's time series and templates. For positive side coefficients:

$$\rho_{c,m} = \sum_{n=0}^{N_r - m - 1} R_{c,n+m} T / M_n, \qquad m = 0, \dots, N_r - 1$$
378

Out of 64 channels, 10 with the highest scaling factor (i.e., standard deviation) were chosen for the synchronization artifact detection due to their proximity to the Wand. Since artifacts across the channels vary only in amplitude, it is best to detect from those with the highest artifact to

signal ratio. Additionally, we made three assumptions: 1) each of the 10 selected channels 382 contained all of the delivered Marks or Magnets, 2) within a single channel the Marks and 383 Magnets all had the same amplitude, and 3) the scalp EEG signal amplitude during Magnets and 384 Marks was by far larger than at any other times, including periods of Real-Time iEEG 385 transmission. In practice, Magnet scalp EEG artifacts (Fig. S7b) have the largest amplitude, 386 followed by Mark scalp EEG artifacts (Fig. S7a). Based on these assumptions, we chose a 387 threshold of 10% lower than the maximum observed correlation per channel. This automated 388 method for synchronization had a 98 % success rate confirmed by using manual inspection of 3 389 sample scalp EEG/iEEG datasets and comparing to the RP time logs of command delivery as 390 ground truth. The incorrect 2% were all false positives that identified some of the telemetry 391 artifacts as Marks. Example figures showing artifacts in scalp EEG used for synchronization can 392 be found in Supplementary Information (Fig. S7). 393

As each Magnet command saves 2/3 of the chosen iEEG data before and 1/3 after the 394 Magnet event, we extracted 160 s before and 80 s after the detected Magnet timepoint in the 395 scalp EEG data (in this case of preconfigured 240 s Magnet iEEG storage duration). The rest of 396 the data was discarded, and a new scalp EEG matrix $S_{1,T\times C\times Ns}$ (T – number of trials; C – number 397 of channels; N_s – number of sample points per each 240 s block, e.g., 2000 Hz × 240 s) was 398 synchronized with stored Magnet-triggered iEEG data. When Real-Time iEEG was used, we sent 399 a Mark command 1 s before and after the Store command. Scalp EEG data in between two 400 detected Marks, ~238 s apart, was extracted as one trial dataset and turned into the same scalp 401 EEG matrix $S_{1,T\times C\times Ns}$ (N_s -2000 Hz \times 238 s), aligned with the Real-Time iEEG data. Lastly, 402 resulting matrices were again standard score normalized per channel. If the Stim command was 403 used, iEEG data (stored via *Store* or *Magnet*), could also be synchronized by manual detection of 404

DBS artifacts in iEEG and scalp EEG. Of course, DBS synchronization is only feasible when 405 DBS artifacts are present in the scalp EEG data (Fig S9c, Fig. S7c). 406

407

Scalp EEG Artifact Reduction – Telemetry Switch

We tested the functionality of the Telemetry Switch, which only enabled telemetry 408 communication at specific time points, for instance, when sending a Store, Stim, or Mark 409 command (Magnet command does not need telemetry). Here, despite losing continuous Real-410 Time iEEG, a *Magnet* command can be used to store the iEEG data since telemetry is disabled. 411 As an example, we performed an experimental session that involved sending a train of DBS 412 bursts, which required cycles of On/Off telemetry. One DBS cycle included enabling telemetry, 413 which took t_0 seconds to get recognized by the Graphical User Interface on the Programmer 414 (scalp EEG remains unaffected by telemetry until t_0). Once telemetry was enabled, the Stim 415 command was sent, which required t_1 for delivery. Telemetry was then disabled for an arbitrary 416 period of t_2 immediately after the DBS was delivered, providing clean scalp EEG. The last 417 relevant timing parameter was the time between the DBS cycle preceding the triggering of data 418 storage (t_3) (Fig. S9a). This operation resulted in synchronized iEEG/scalp EEG recordings (Fig. 419 S9b, Fig. S9c). The procedure for sending other commands was done similarly with enabling 420 telemetry (same t_0) and varying t_1 values. Minimal timings were determined in in-vivo 421 experiments (Supplementary Information - Telemetry Switch characterization and validation 422 423 section).

Scalp EEG Artifact Reduction – Offline Processing 424

425

We provide here an offline solution for scalp EEG noise reduction to eliminate any

artifacts that remain during enabled telemetry, such as: 1) Telemetry restart artifacts (Type I); 2) DBS artifacts (Type II), and 3) and Real-Time iEEG artifacts (Type III) (Fig. S9c). Type I artifacts appear as a series of alternating segments of two and three spikes, followed by a larger bi-spike (Fig. S10a). Similarly, Type II artifacts consist of segments with two spikes, followed by a bi-spike (Fig. S10b). Spike duration and their relative distance in time were deterministic and fixed– a property that was capitalized upon in our artifact rejection procedure (Spike: 4 samples; bi-spike: 16 samples at 2 kHz). Type III artifacts were spikes at 125 Hz (and

433 harmonics) (Fig. S10c).

Following the automated synchronization method for scalp EEG with iEEG, we 434 normalized the *Magnet/Mark*-free scalp EEG $S_{T\times C\times Ns}$. To do this, we first flattened the input 435 matrix to $S_{C \times T \cdot Ns}$ (in the same order as it came from the raw data in order to simplify analysis) 436 and then applied the same technique to detect Type I and Type II artifacts as we did with 437 Magnets and Marks. By observing scalp EEG recordings, we constructed binary templates C_{Nc} 438 ($N_c = 3174$ points at 2 kHz) and D_{Nd} ($N_d = 2824$ points at 2kHz), following respective artifact 439 waveforms from Fig. S9c, 10a, and Fig. S9c, 10b. Note, that 3174 samples or 1.587 s of C_{Nc} 440 template plus 2824 samples or 1.412 s of \mathbf{D}_{Nd} template correspond to a portion of defined t_1 441 containing artifacts. With no Marks/Magnets, we made the same three assumptions used for 442 synchronization and detected two types of artifacts using correlation. Again, for detection, we 443 used ten channels with the highest physical proximity to the Wand. Manual inspection confirmed 444 a 100 % success rate in detection across 3 separate scalp EEG datasets, with RNS time logs of 445 command delivery serving as the ground truth. Once the Marks/Magnets were detected, we 446 extracted trials and exact sample points, which resulted in matrices A_{Na×C×Nc} and A_{Na×C×Nd} (Fig. 447 S10e - 1 and Fig. S10f) for the two types of artifacts (N_a corresponds to number of detected 448

artifacts per observed channel). We then applied PCA on scalp EEG N_c and N_d time series across 449 all channels for each detected artifact separately, while skipping PCA application on adjacent 450 channel pairs [8]. The first 3 PCA components were sufficient to capture the artifacts' shape 451 shared across different channels. We then eliminated clean scalp EEG during non-spike periods 452 by point multiplication $PC_{i,Nc} \times C_{Nc}$ (and $PC_{i,Nd} \times D_{Nd}$) per each channel and each detected 453 sequence, and applied vertical offset correction for each artifact spike so that it started from 0 454 (example Fig. S10d). For each segment and channel, we fitted artifact templates to corresponding 455 segments in A matrices and subtracted them from it (Fig. S10e - 2). Using previously obtained 456 synchronization timestamps, we reconstructed data into a matrix of original dimensions S_{2,T×C×Ns}. 457 In order to clean Type III artifacts, we filtered each time series within the S₁ matrix with a low 458 pass Chebyshev Type I infinite impulse (IIR) filter of order eight and with a cut-off frequency of 459 125 Hz, and then downsampled data by a factor of 8 from 2 kHz to 250 Hz. 460

Further artifact rejection can be done using methods reported in [9]. In brief, we used a single channel artifact rejection algorithm in the time-frequency domain. First, the input 250 Hz sampled data were standard score normalized, and then Stationary Wavelet Transform (SWT) was performed (level = 10; Haar base wavelet). Artifact detection was done for approximation and detail coefficients separately. We examined D_8 , D_9 , D_{10} , and A_{10} coefficients for the input scalp EEG frequency band. Empirically determined thresholds detected outstanding discrepancy from scalp EEG's approximatively Gaussian distribution for each set of coefficients:

$$T_i = k_{A/D} \frac{\text{median}(|A/D_i|)}{0.6745} \sqrt{2 \, \ln N}$$

468

where *N* is number of points in input sequence and $k_A = 0.75$, $k_D = 5$. Coefficients identified as potentially containing artifacts were thresholded using the Garrote threshold function, after

which inverse SWT was applied to reconstruct cleaned signal. This method was applied to each 471 Ns-point time-series within input $S_{2,T\times C\times Ns}$, resulting in output $S_{3,T\times C\times Ns}$ (Fig. S10e – 3). For more 472 details, see (GitHub) and [9]. 473

Finally, due to high pass filters with low cut-off frequency integrated into scalp EEG 474 equipment, the presence of artifacts caused a voltage drift in raw data (visible slow transients on 475 Fig. S10e -1,2,3). To account for this we applied IIR high pass filter (order = 8; passband ripple 476 = 0.2; cut-off frequency = 2 Hz) on $S_{3,T\times C\times Ns}$ resulting in clean scalp EEG matrix $S_{4,T\times C\times Ns}$ (Fig. 477 S10e - 4 and Fig. S10g). To quantify the reduction of artifacts, we calculated the root mean 478 square value (RMS) for S_{1,T×C×Ns}, S_{4,T×C×Ns}, and portions of S_{1,T×C×Ns} with clean scalp EEG. All 479 RMS values were scaled with a maximum RMS value in $S_{1,T\times C\times Ns}$ for given channel (Fig. S10h, 480 i). Additional cleaning results can be seen in Fig. S11 and Fig. S12. Bad channels and channels 481 not containing artifacts were omitted from processing. A total of 17 such channels in the 482 presented case were detected visually and by having SC×T·Ns - CNc/ DNd correlation of less 483 than 0.1 on portions of scalp EEG already identified as artifactual. correlation of less than 0.1 on 484 portions of scalp EEG already identified as artifactual. 485

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