Pupil-DLC: an open-source deep learning pipeline for scalable, markerless tracking of pupil dynamics across conscious and unconscious states

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Abstract

Pupil diameter provides a powerful, non-invasive biomarker of brain state, correlating with arousal, attention, cognitive processing, and level of consciousness. Despite its widespread use, pupillometry remains limited by software tools that lack scalability, robustness, and flexibility across experimental conditions. Here we introduce *Pupil-DLC*, an open-source, DeepLabCut-based pipeline for scalable, markerless tracking of pupil dynamics. Pupil-DLC is trained on 20,550 manually annotated frames selected from over 130 pupil videos of head-fixed and behaving mice spanning wakefulness to diverse drug-induced states of consciousness, including psychedelics, and anesthesia. The pipeline robustly captures state-dependent pupil dynamics, achieving high agreement with human-annotated ground truth data and outperforming an established automated method in both accuracy and detection reliability, while maintaining computational efficiency. Pupil-DLC incorporates a dual-model framework comprising a General Model (GM) for high-throughput analysis of infra-red recorded mouse pupils and an Individual Model (IM) tailored for session-specific optimization, as well as interpretable confidence metrics that enable principled trade-offs between accuracy and data retention. Notably, the model generalizes without retraining to human infrared pupil recordings and, with retraining, extends to human videos acquired under diverse daylight and camera conditions, enabling cross-species pupillometry. Pupil-DLC provides a flexible, reproducible platform for quantifying pupil-linked brain state dynamics across experimental paradigms and species.

Introduction

Changes in pupil diameter, when corrected for luminance and depth of focus, provide a robust index of internal brain state across species[1,2]. Pupil fluctuations track arousal, attention, emotional processing, cognitive load, and autonomic physiology, reflecting strong coupling between central and peripheral

nervous system dynamics[3–9]. During monotonous tasks, such as simulated driving, pupil diameter shows
large fluctuations that accompany drowsiness and performance lapses, whereas emotionally salient
states including fear, stress, or anxiety elicit pronounced pupillary responses[8,10,11]. Even in the absence
of overt behavioral or emotional changes, pupil dynamics track substates of wakefulness[7,12] and capture
moment-to-moment variations in cognitive effort, decision timing, and perceptual selection[13], and can
reveal which of multiple competing sensory streams is being attended[14–16]. Clinically, pupillometry is
increasingly used as a non-invasive biomarker of impairment or loss of consciousness, enabling objective
neurological monitoring and prognostic assessment[17–19]. Together, these findings establish pupil
dynamics as a powerful, non-invasive biomarker of neural state.

Despite the potential role of pupil dynamics as a biomarker for different experimental and clinical
conditions, this measurement is often limited by proprietary or rigid software pipelines that lack
scalability, reproducibility, and flexibility across experimental paradigms. Many existing approaches are
sensitive to lighting variability, require manual correction, or fail to integrate with modern deep learning
frameworks[20]. To address these limitations, we present a customizable, open-source pupil-tracking
pipeline built on DeepLabCut[21] and trained on 20,550 manually annotated frames collected from over
130 videos of head-fixed and behaving mice spanning diverse drug-induced states of consciousness,
including psychedelics and anesthesia. Our method enables high-resolution, markerless pupil tracking
with post-processing tools that improve accuracy and reduce noise, and generalizes robustly to videos
from other species, including humans. By combining this advanced computational method with the
sensitivity of pupillometry to brain state, this platform provides a flexible foundation for studying
arousal, cognition, conscious and unconscious states, and neural dynamics across species.

Methods
57 Experimental procedures followed closely to those described previously in Claar, Rembado, et al., 2023
58 and Russo et al., 2025[22,23]. The methods are summarized below, and additional details are provided for
59 novel procedures.

Mice
C57BL/6J wild-type (n=65) were purchased from The Jackson Laboratory (JAX stock #000664) on
postnatal day 28-35. Mice were housed in the Allen Institute animal facility and used in accordance with
protocols approved by the Allen Institute's Institutional Animal Care and Use Committee (IACUC) under
protocol 25105, 2212 and 2003. All mice were housed in a shared facility with room temperatures
between 20 and 22°C and humidity between 30 and 70%. Mice were maintained on a reverse 12-h light
cycle, and were single-housed following surgery, with *ad libitum* access to food and water.

Headframe Implantation Surgery
Prior to undergoing experimental procedures, all mice were implanted with a titanium headframe to
facilitate head fixation *in vivo* [24]. Surgery took place when mice were 4-11 weeks old. Pre-operative
injections of dexamethasone (3-4 mg/kg, IM) and ceftriaxone (100-125 mg/kg, SC) were administered
one to three hours prior to surgery. Mice were deeply anesthetized with isoflurane (5%) in an induction
chamber and then placed on a stereotaxic rig (Model# 1900, KOPF; Tujunga, CA) and maintained at a
surgical level of anesthesia using isoflurane (1.5-2.5%) via nose cone. Breathing was monitored and body
temperature was maintained at 37.5 °C with a heating pad under the animal (TC-1000 temperature
controller, CWE, Inc). Ocular lubricant (Systane, Alcon Inc., Geneva, Switzerland) was applied to the eyes

during anesthesia to maintain hydration. During surgery, skin was removed to expose the skull, and the
skull was leveled with reference to bregma. Using white C&B Metabond (Parkell, Inc., Edgewood, New
York), a custom titanium headframe was secured to the skull, and the rest of the exposed skull was
covered. After surgery, the mouse was given an injection of lactated Ringer's solution (up to 1mL, SC)
and was placed on a heating pad to recover. All animals received analgesics and antibiotics for two days
post-surgery.

Habituation

Five days after headframe implantation surgery, all mice began a 3-week training schedule. Researchers
first habituated mice to handling for 2 days. On subsequent days, mice were placed on a running wheel
where the headframe was fixed in place with two sets of screws[24]. During training, mice were kept head-
fixed on the running wheel for an increasing amount of time, starting with 5-minute sessions and ending
with 90-minute sessions. At the end of the second week of training, the mice scheduled to receive
psilocybin on the experimental day began receiving 2 intraperitoneal (IP) injections of saline during each
training session (method described below). All training and experimental sessions were performed
during the dark cycle.

Experimental Sessions

After mice completed 3 weeks of habituation to the experimental setup, they underwent one recording
a day for three consecutive days. Half of the animals received isoflurane on the first day and psilocybin
on the second day, and the other half experienced the reverse order. The urethane recording always
took place on the third day as it was considered a terminal procedure under our IACUC protocol. During
each recording session, mice were head-fixed on a wheel, and data was collected for 45-120 minutes.
On the isoflurane and psilocybin recording days, there was a period of 30-60 minutes of baseline activity
recorded during the awake state before administering the drug, followed by 30-60 minutes after drug
administration. On the urethane day, there was no awake state baseline period pre-sedation given that
the urethane was administered intravenously via a catheter inserted in its tail vein before setting the
animal on the rig (see below for details). On the experimental day the angular position of the running
wheel was acquired by a dedicated computer with a National Instruments card acquiring digital inputs at
100 kHz, which was considered the master clock. A 32-bit digital "barcode" was sent with an Arduino
Uno (DEV-11021, SparkFun Electronics, Niwot, Colorado) every 30 seconds to synchronize all devices[25].

Psilocybin and Ketanserin Administration

To administer psilocybin, a protocol was developed to give an intraperitoneal (IP) injection while the
animal was head-fixed on the wheel. The researcher would scruff the loose skin over the mouse's back
and immobilize the two hind legs to prevent the mouse from moving. While the animal was restrained,
the researcher administered the injection into the peritoneal cavity on the lower right quadrant of the
mouse's abdomen. During psilocybin recordings, mice received one injection of sterile saline (1 mg/kg,
IP) followed 10-12 minutes later by an injection of psilocybin (1mg/kg, IP; Usona Institute). During
psilocybin+ketanserin recordings, the saline injection was substituted with a ketanserin (1 mg/kg, IP;
S006, Sigma-Aldrich) injection.

Anesthesia Scale

To ensure a reliable and reproducible state of consciousness during both isoflurane and urethane states,
a behavioral scale was developed based on Devor and Zalkind, 2001 to evaluate depth of anesthesia[26].
The scale quantifies the mouse's posture and response to noxious stimuli on a scale of 0-4, where a

higher number corresponded to a minimal or no response, generally observed during deep levels of
anesthesia. The four tests included an assessment of muscle tone and voluntary movement (posture),
withdrawal reflexes of tail and foot when a firm pinch was applied (300-500 grams of force) through a
rodent pincher analgesia meter (IITC Life Science), and response to the presence of a noxious alcohol
swab held near the nose. The sum of the scores from each individual test ranged from 0-16 and
represented 4 states on the continuum of consciousness. On the assumption that a loss of
responsiveness corresponds to a loss of consciousness, a summed score < 6 corresponded to a
"conscious" state, while a score of 6-10 represented a "mildly anesthetized" state. To be considered
unconscious, a mouse needed a score ≥ 11, which corresponds to either a "completely unconscious"
state (11-13) or a "deep anesthesia" state (14-16).

Isoflurane Administration

To induce isoflurane anesthesia while head-fixed on the wheel, the mouse received inhalant isoflurane
delivered through a small tube placed in front of the mouse's nose. After 2-5 minutes at 5% isoflurane,
the flow was reduced to 1-2% for the remainder of the recording. 10 minutes after the start of
isoflurane, the mouse was given a score based on the anesthesia scale. If the score was lower than 11,
the percentage of isoflurane was increased, and the test was administered again 10 minutes later until
the mouse scored 11 or higher on the scale. Throughout the recording, the precise concentration of
isoflurane being administered was recorded. During anesthesia, a heating pad was placed under the
animal and set at 37.5 °C to maintain thermoregulation. At the end of the recording, the isoflurane was
switched off, and the mouse recovered before being placed back in its home cage.

Urethane Administration

Prior to intravenous (IV) injection of urethane, the mouse was warmed under an infrared heat lamp for
4 minutes to increase body temperature and promote vasodilation. The animal was then anesthetized
using isoflurane inhalant (3-5%) and placed on a gel heating pad to maintain thermoregulation. The tail
was dipped in warm water to increase vasodilation, and an alcohol swab was administered to sterilize
the tail and increase visibility of the lateral tail vein. A beveled 31G needle attached to infusion catheter
tubing (SAI, Infusion Technologies) was held parallel to the mouse's tail and inserted into the lateral
vein. Correct placement of the needle was confirmed by the presence of blood in the infusion tube and
smooth injection of fluid without any resistance on the plunger of the syringe. Once the needle was in
the vein, *Vetbond Tissue Adhesive* (Patterson Veterinary, Loveland, CO) was applied to the exposed area
of the needle to hold it in place. Isoflurane was discontinued, and the mouse was moved to a restrainer
where the urethane (1.5-1.8 mg/kg) was administered via the tail vein catheter at a rate of 0.02mL/min.
The depth of anesthesia was tested 60-90 minutes after the initial urethane injection and if the animal
scored 10 or below, supplemental doses (20% of initial dose) were administered (up to 60% of initial
dose) until the animal achieved a score of 11 or higher. When the IV injection was unsuccessful (10 out
of 32 animals), urethane (1.5-1.8 mg/kg) was administered in two IP injections, each containing half of
the full dose, 15 minutes apart. During anesthesia, a heating pad was placed under the animal and set at
37.5 °C to maintain thermoregulation.

Pupil Video Recordings

Videos of the right eye were acquired with an infrared camera (Mako G-032B PoE 552; Proximity Series
130mm/0.73x; MAX: 000F315C1496) at a sampling rate of 30Hz with a resolution of 640x480 pixels. The
camera was pointing to an infrared dichroic mirror positioned at around 9 cm from the camera,

reflecting the right eye of the animal positioned 3 cm away from the mirror (Fig. 1A). The pupil radius
ranged from a minimum of 10 pixels (radius) to a maximum of 125 pixels, with 77 pixels corresponding
to 1 mm for our specific setup. A black curtain was lowered over the front of the rig, placing the mouse
in complete darkness.

Pupil Video Processing

We employed *DeepLabCut* (DLC, https://www.mackenziemathislab.org/deeplabcut), a non-commercial
marker-less pose estimation toolbox based on deep convolutional neural networks[21], to track pupil
dynamics of mouse eye videos. DLC leverages transfer learning on deep neural networks (ResnNet-50
backbone) to track user-defined keypoints with near human accuracy. To train the network, each frame
was annotated with 12 equidistant points around the pupil's contour, arranged in a clockwise
orientation, and 4 additional reference points along the horizontal and vertical axes of the eye
identifying the medial and lateral commissures of each frame. These annotations served as training data
for two model types: a General Model (**GM**) and an Individual-specific Model (**IM**).

DLC General Model Training

The GM of pupil-DLC was trained on a large, diverse dataset comprising 20,550 manually annotated
frames selected from over 130 videos of different head-fixed mice undergoing distinct conscious and
unconscious states, including: urethane anesthesia, isoflurane anesthesia, awake, psilocybin, and
psilocybin with ketanserin pretreatment. This training dataset included both active (e.g., running) and
quiescent (e.g., resting) conscious states, thereby equipping the model with the ability to generalize
across different eye sizes and shapes. GM training was performed using DLC's ResNet-50 architecture
for 1,000,000 iterations. The GM allows one to analyze new pupil videos without requiring per-session
retraining, offering fast, high-throughput and reproducible pupil tracking across experimental
paradigms.

DLC Individual Model Training

184 For experiments requiring animal or session-specific precision, a tailored IM was used. For each new
185 video, 150 frames were randomly sampled throughout the whole recording and manually annotated
186 using the same 12-point pupil scheme described above. A separate ResNet-50 model was then fine-
187 tuned for 500,000 iterations. This approach ensures high accuracy even in videos with atypical lighting,
188 eye positioning, or artifact presence. The resulting model was then used to analyze the full video.

Post-training and Ellipse Fitting

Once the full video was processed through the IM or GM, DeepLabCut produced, for each frame, the
predicted pupil boundary keypoints (x_i, y_i) together with a confidence value p_i. Only keypoints with
confidence $p_i \geq 0.9$ were retained for geometric estimation. For each frame, ellipse fitting proceeded
only when at least six high confidence pupil boundary points were available. Frames that did not meet
these criteria were excluded from ellipse fitting and all ellipse derived outputs for those frames were
recorded as Not a Number (NaN).

The pupil contour in each frame was approximated by fitting a single ellipse to the retained boundary
points using a least squares estimator. An ellipse in the image plane is fully defined by five geometric
parameters: the center coordinates (x_c, y_c), the semi major and semi minor radii (a, b) and the
orientation angle θ. Because five independent parameters must be estimated, a minimum of five non

collinear points is required to uniquely determine an ellipse. In practice, using six or more points yields a
reliable approach that improves robustness to noise and local boundary deviations.

Ellipse fitting was performed using the *EllipseModel* implementation in scikit image[27], which estimates
ellipse parameters by minimizing the algebraic distance between the observed boundary points and the
implicit ellipse model. Given a set of $n \geq 5$ observed points (x_i, y_i), the ellipse is represented as a conic
section

$$Ax^2 + Bxy + Cy^2 + Dx + Ey + F = 0$$

206 subject to the constraint that the conic corresponds to an ellipse. The model parameters are estimated
207 using a direct least squares solution, after which the conic representation is converted into the
208 geometric ellipse parameters (x_c, y_c, a, b, θ).

209 From the fitted ellipse, pupil size was quantified using the ellipse radii. In all primary analyses we
210 reported pupil size as the pupil radius defined as the largest of the two semi axis lengths:

$$r = \max (a, b)$$

211 which provides a robust estimate of pupil size, insensitive to small deviations from circularity. Pupil
212 diameter can be approximated as $2r$ when required, and pupil area can be computed as $A = \pi 2r$.

213 For training the models and fitting the ellipse a Windows 11 Pro desktop computer with the following
214 specifics was used: AMD Ryzen Threadripper 3960X 24-Core CPU @ 3.80 GHz; RAM: 128GB; Graphics
215 card: 2x NVIDIA GeForce RTX 3090 Ti.

Accuracy Assessment and EyeLoop

To assess the accuracy of the outputs from either GM or IM, we compared the extracted pupil diameters
with ground-truth (GT) manually measured pupil diameters obtained using imageJ[28]. Notably, due to the
manual nature of ground-truth assessment, these measurements are inherently subject to variability in
the order of a few pixels. Moreover, we compared the outputs of our pipeline with the output of
EyeLoop[29], an open-source, Python‐based, real-time eye‐tracking toolkit designed for high‐speed
pupil detection using a vectorized contour-detection algorithm, operating entirely on consumer-grade
CPUs. Its modular architecture allows integration of custom importers and extractors, supports multiple
species (including rodents), and is optimized for closed‐ and open‐loop experimental paradigms. In our
study, EyeLoop served as a benchmark to demonstrate comparison to our pupil-DLC pipeline outputs in
terms of accuracy and processing speed.

Statistical differences between estimates were assessed using a Student's *t*-test when assumptions of
normality and homogeneity of variance were satisfied, as verified by Shapiro–Wilk and Levene's tests,
respectively. When the normality assumption was not met, differences were evaluated using the Mann–
Whitney U test.

Results

Pupil-DLC robustly captures pupil dynamics across conscious and unconscious states

We trained Pupil-DLC on a large and diverse library of pupil videos from head-fixed mice (Figure 1A) spanning multiple drug-induced states of consciousness. Across conditions, pupil size (reported as the largest radius of the estimated ellipses, see Methods) exhibited clear and reproducible state-dependent differences. During awake and psilocybin conditions, pupils were larger on average and showed pronounced temporal fluctuations throughout the recordings, with a more dilated pupil during running compared to resting conditions (Figure 1C). In contrast, urethane and isoflurane anesthesia were associated with smaller pupil diameters and markedly reduced variability (Figure 1C). During urethane sedation, pupil size alternated between two distinct substates: a more aroused state characterized by pupil dilation and a less aroused state marked by sustained constriction (Figure 1C, D), consistent with previous reports[30]. These state-dependent differences were evident at the level of individual animals (Figure 1C) and remained robust when pooled across sessions and subjects (Figure 1D).

Probability density distributions of pupil diameter further highlighted these effects, with conscious states exhibiting broader distributions shifted toward larger diameters, whereas unconscious states showed narrower distributions concentrated around smaller pupil sizes (Figure 1D). These distributions were consistent across mice, indicating that the observed effects were not driven by individual variability. Together, these results demonstrate that the Pupil-DLC pipeline reliably captures physiologically meaningful pupil dynamics across distinct levels of consciousness and underscores the breadth of the dataset used to train GM. In total, the dataset comprised 95 recordings during awake condition pre drug administration, 35 recordings collected during isoflurane anesthesia, 32 during urethane sedation, and 35 following psilocybin administration (with or without ketanserin pre-treatment) (Figure 1E).

Pupil-DLC achieves high accuracy relative to human ground truth and existing methods

To assess measurement accuracy, pupil size estimates obtained with the Pupil-DLC GM and IM were compared against human-annotated ground truth and an established automated method, EyeLoop[29]. Across extended recordings, both Pupil-DLC models closely tracked GT measurements over time, faithfully capturing rapid pupil dynamics and remaining aligned across behavioral transitions. When comparing the raw pupil traces detected by the different methods, EyeLoop produced noisier traces with systematic deviations from GT (Figure 2A). Quantitative analyses confirmed these observations: median pupil size estimates from both Pupil-DLC models were substantially closer to GT values than those obtained with EyeLoop, with error distributions showing minimal deviation from GT for Pupil-DLC and markedly and significantly larger discrepancies for EyeLoop (mean±STD difference in pixels to GT for GM: 1.28±1.09; IM: 1.22±1.04; EL: 23.81±16.85; Figure 2B). All the methods detected the pupil in nearly all frames, resulting in negligible frame loss (Figure 2C).

Despite its superior accuracy, IM incurred a ~100-fold increase in computational cost. In contrast, GM preserved computational efficiency comparable to EyeLoop while maintaining high accuracy (mean±STD

270 minutes for GM: 25.57±9.14; IM: 423.84±33.53; EL: 31.00±11.50; Figure 2D). Together, these results
271 demonstrate that Pupil-DLC enables accurate, robust, and computationally efficient pupil tracking over
272 long-duration recordings.

Pupil-DLC confidence metrics reliably capture measurement quality and accuracy

We next examined how the internal confidence estimates provided by the Pupil-DLC pipeline relate to
measurement quality and accuracy. Across all frames, both GM and IM assigned consistently high
confidence values, indicating reliable pupil detection (mean±STD confidence value for GM: 0.97±0.035;
IM: 0.98±0.033; Figure 3A).

Model confidence values closely matched human-based assessments of frame quality. Frames labeled as
high quality by human observers were associated with higher confidence scores, whereas lower-quality
frames showed systematically reduced confidence, validating the confidence metric as a meaningful
proxy for visual measurement reliability (Figure 3B).

Systematic variation of ellipse-fitting confidence thresholds revealed a clear trade-off between frame
retention and measurement accuracy. By adjusting restraining parameters as defined by the minimum
number of points required for ellipse fitting and the confidence threshold assigned to each point, we
evaluated performance in terms of frame loss and deviation from ground truth. Increasing confidence
thresholds and the minimum number of points reduced the number of retained frames (i.e. increased
frame loss) but resulted in smaller average pixel deviation from ground truth, whereas more permissive
thresholds increased frame retention at the expense of greater measurement error (Figure 3C).
Together, these results demonstrate that Pupil-DLC enables flexible tuning of analysis parameters to
balance data completeness and accuracy according to experimental needs.

Pupil-DLC generalizes to human pupil videos across recording conditions

Finally, we evaluated whether Pupil-DLC pipeline generalizes beyond its training domain by applying it to
human pupil recordings acquired under infrared illumination and publicly available[31] (Figure 4A). The
dataset was recorded using a state-of-the-art dark-pupil, head-mounted eye tracker equipped with a
PointGrey Chameleon3 USB3.0 camera, modified to capture high-speed video at 95 frames per second.
Recordings were collected across a variety of everyday indoor and outdoor environments, encompassing
diverse illumination conditions (natural and artificial lighting) and a wide range of camera–eye angles.
Some participants wore contact lenses or glasses, introducing realistic challenges such as reflections and
partial occlusions, thereby increasing both the diversity and ecological validity of the dataset. We
randomly selected ten human pupil recordings of various quality from this dataset to test Pupil-DLC
performance. When video quality was high and reflections and occlusions were minimal, GM reliably
detected and tracked the pupil in these human videos despite substantial variability in eye morphology
and recording conditions, producing stable ellipse fits across frames (Figure 4A). Under these good
conditions, both GM and IM yielded pupil size estimates that closely matched ground truth values
(mean±STD pupil size value in pixels for GM: 57.55 ± 11.15; IM: 57.50 ± 11.09; GT: 59.18 ± 11.64; Figure

4A). In contrast, for very low-quality videos at the limit of human visibility, GM failed to detect the pupil
entirely (Figure 4B). However, IM still provided estimates closely aligned with ground truth, with a mean
difference of only 3 pixels, well within the variability of the ground truth assessment (mean±STD pupil
size value in pixels for IM: 24.92 ± 3.08; GT: 27.20 ± 2.90; Figure 4B). To further test the pipeline's
generalizability, we evaluated pupil tracking in two markedly different human videos recorded under
natural light conditions using common smartphones (Figure 4C). The videos differed in duration (10 vs.
30 seconds) and sampling rate (60 vs. 30 frames per second). As expected, GM failed to track the pupil
under these conditions, whereas IM closely matched ground-truth measurements (Figure 4C). We next
asked whether retraining GM using a small subset of frames (40 frames) from each video could recover
performance. Notably, the retrained model (GM-RT) not only outperformed the original GM but also
achieved accuracy comparable to the IM (mean ± SD pupil size difference from ground truth, in pixels:
GM, 11.32 ± 7.39; IM, 0.89 ± 0.79; GM-RT, 1.51 ± 1.70; Figure 4C).

Together, these results demonstrate that GM trained exclusively on mouse data generalizes to
previously unseen recordings from different species without additional retraining when video quality
closely matches the original training conditions. Under lower-quality or heterogeneous recording
conditions, IM provides a reliable alternative, and retraining GM with a small, video-specific dataset
substantially extends its tracking fidelity. Collectively, these findings support the broad applicability of
Pupil-DLC for cross-species pupillometry across diverse recording conditions.

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Figure 1. Pupillometry measurements in head-fixed mice undergoing different conscious and unconscious states. A)
Experimental setup schematic of the head-fixed mouse on a rotating wheel (to monitor locomotion). The infrared camera
points to a dichroic mirror reflecting the right eye of the animal utilized to track pupillometry. B) Pupil-DLC pipeline overview.
Two main paths are provided by the pipeline: a general model (GM), trained on 20,550 manually annotated frames from over
130 videos of 65 mice, and an individual model (IM) trained on 150 frames of any one session. C) Left: Time courses of pupil size
(in pixels, px) over a 10-minute recording session under four conditions: awake (green), after administration of psilocybin
(purple), under urethane anesthesia (blue), and under isoflurane anesthesia (brown). Right: Probability density distributions of
pupillometry across awake-resting, awake-running, and urethane states from a representative mouse. D) Probability density

distributions of pupillometry across conscious and unconscious states. E) Summary bar-plot showing the total number of
sessions in each state used to train the pupil-DLC general model pooled over 130 videos from 65 mice. Note that for our mouse
setup, the minimal pupil diameter of 10 pixels corresponds to 1/8 of a mm.

**Figure 2. Performance evaluation of Pupil-DLC pipeline in measuring pupillometry across states compared to other
approaches.** A) Representative 60-minutes long pupillometry trace obtained from EyeLoop (EL, orange), General Model (GM,
blue), and Individual Model (IM, magenta), compared to human-measured ground truth (GT, red). The inset shows a zoomed-in
segment (4 seconds corresponding to 120 frames) to illustrate the close agreement between GM and IM with GT. B) Left:
Absolute pupil size values (pixels) measured by GM, IM, and EL. Statistical test: Student t-test. Right: Difference between GT
measurements of frames compared to other methods. Statistical test: Mann-Whitney U test. C) Percentage of retained frames
(i.e., frames in which the algorithm measured the pupil) for each method. D) Computation time per video for each method.
Statistical test: Mann-Whitney U test. Statistical significance: n.s p>0.05; * p<0.05; ** p<0.01; *** p<0.001.

Figure 3. Performance evaluation as function of Pupil-DLC pipeline quality parameters. A) Confidence values assigned by the General Model (GM, blue) and the Individual Model (IM, magenta) across all frames averaged per video (n = 9 videos). B) GM confidence values as function of binary human-based frame quality assessment (n= 15 frames per each quality category). C) Left: Percentage of frames retained based on the minimum number of annotated points as a function of confidence value per point. Right: Pixel difference to GT as a function of the ellipse fitting parameters (number of minimum points and minimum confidence value per point). Statistical test: Mann-Whitney U test. Statistical significance: n.s p>0.05; * p<0.05; ** p<0.01; *** p<0.001.

Figure 4. Pupil-DLC generalizes to unseen human pupil videos. A) Left: Representative frames from two good quality human pupil video recordings[31], showing the pupil tracked by Pupil-DLC (GM) (dark blue ellipse overlayed). Middle: Short time-series (2 seconds, 180 frames) of estimated pupil size (in pixels) by Pupil-DLC (GM, dark blue; IM, magenta), compared to ground truth (GT, green). Right: Pupil size estimation by GM, IM and GT across eight good quality human pupil videos (n=20 frames per

video). B) Left: Representative frames from two bad quality human pupil video recordings[31], showing the pupil tracked by Pupil-
DLC (IM) (magenta ellipse overlayed). Middle: Short time-series (2 seconds, 180 frames) of estimated pupil size (in pixels) by
Pupil-DLC (IM, magenta), compared to ground truth (GT, green). Right: Pupil size estimation by IM and GT across 2 bad quality
human pupil videos (n=20 frames per video). Note GM failed to track the pupil. C) Left: Representative frames from two self-
recorded human pupil videos, showing the pupil tracked by Pupil-DLC re-trained GM (GM-RT) (cyan ellipse overlayed). Middle:
Short time-series (2 seconds, 180 frames) of estimated pupil size (in pixels) by Pupil-DLC (GM, dark blue; IM, magenta; GM-RT,
cyan; GT, green). Right: Pupil size estimation difference from GT by GM, IM, and GM-RT across 2 human pupil videos (n=20
frames per video). Statistical test: Mann-Whitney U test. Statistical significance: n.s. p>0.05; * p<0.05; ** p<0.01; *** p<0.001.

Discussion

In this study, we introduce *Pupil-DLC*, an open-source, DeepLabCut-based pipeline designed to
overcome key limitations of existing pupillometry software and enable accurate extraction of pupil
dynamics from video recordings. Pupil-DLC is trained on a large dataset of head-fixed mouse pupil
videos spanning multiple drug-induced states of consciousness, with the explicit goal of providing
scalable, markerless tracking that generalizes across experimental conditions and video quality.

A central finding is that Pupil-DLC robustly captures state-dependent pupil dynamics across awake,
psychedelic, and anesthetized conditions, consistent with the established view that pupil diameter
reflects brain state, autonomic regulation, and state of consciousness[3–7,9]. In our dataset, pupil size
distributions differed systematically between conscious and unconscious states, where more aroused
states such as during running show a dilated pupil compared to resting states, and urethane sedation
exhibited alternating substates of dilation and constriction (Figure 1), in line with prior reports[12,30].

Beyond capturing biologically meaningful structure, Pupil-DLC achieved high agreement with human-
annotated ground truth and outperformed a standard method, *EyeLoop*, in accuracy and precision
(Figure 2). Across the heterogeneous conditions in our dataset, EyeLoop produced noisier estimates, and
systematic deviations from ground truth, as opposed to the accuracy provided by both the Pupil-DLC
General and Individual models, referred to as GM and IM respectively (Figure 2B). These performance
differences likely reflect the advantages of a learned keypoint-based representation of pupil geometry,
which remains robust to changes in pupil shape, partial eyelid occlusions, cornea reflections and imaging
artifacts, conditions that commonly challenge classical contour-based methods.

A key practical contribution of this framework is the explicit separation between a GM, optimized for
high-throughput analysis, and an IM, designed for session-specific optimization. Note that IM can be
sufficiently trained on only 150 frames, in videos that can last over an hour or more, depending on the
quality variability of the recording. GM is trained to analyze new videos without per-session retraining,
enabling rapid, scalable, and reproducible processing across experiments (Figure 1B). However, in cases
where recording conditions or video quality deviate substantially from the training data, performance of
the GM may degrade. To address this, Pupil-DLC provides an IM that can be fine-tuned to new
recordings, achieving high accuracy at the cost of increased computational time (Figure 2D). In practice,
this design supports a tiered analysis strategy in which GM is used for large-scale screening and routine
processing, while IM is reserved for challenging datasets or analyses requiring maximal precision.

An additional strength of Pupil-DLC is the availability of interpretable confidence metrics that closely
align with human judgments of frame quality and can be leveraged to tune analysis stringency (Figure

3). Confidence values corresponded well with binary human-based assessments of frame quality, and
systematic variation of ellipse-fitting thresholds revealed a clear trade-off between measurement
accuracy and frame retention (Figure 3). This provides a principled framework for parameter selection
depending on whether the priority is maximizing data yield or maximizing agreement with ground truth.
Such flexibility is particularly valuable for long-duration recordings, where missing data can bias brain-
state estimates, and for studies requiring stringent filtering to resolve fine-grained pupil dynamics.

An unexpected and notable result was the cross-species generalization observed when applying the
Pupil-DLC pipeline, trained exclusively on mouse data, to human pupil recordings acquired under
infrared illumination and publicly available[31]. Despite substantial differences in eye morphology and
recording conditions, GM produced stable ellipse fits and pupil size estimates that closely matched
human-annotated ground truth across multiple high-quality human videos (Figure 4A). In contrast, for
poor-quality videos in which pupil detection was challenged by reflections and occlusions, GM failed to
detect the pupil. However, IM successfully tracked the pupil even under these extreme conditions,
deviating from manually estimated ground truth (itself subject to variability) by an average of only 3
pixels (Figure 4B). Furthermore, we tested Pupil-DLC on two diverse and self-recorded human videos
under natural light. While the GM failed, IM closely matched ground truth, and retraining GM on a small
subset of frames (GM-RT) restored performance to levels comparable to IM (Figure 4). These results
highlight the flexibility of Pupil-DLC in bridging controlled laboratory recordings and real-world human
data. The ability of a model trained exclusively on mouse pupil videos to generalize to human recordings
underscores shared visual and geometric features across species when imaging conditions are
comparable. Importantly, the complementary roles of GM and IM, together with rapid retraining using
minimal data, provide a practical strategy for maintaining high tracking fidelity under heterogeneous
recording conditions. This adaptability positions Pupil-DLC as a scalable tool for extending pupillometry
beyond tightly controlled settings and into diverse experimental and translational contexts.

A few limitations should be acknowledged. First, the present study focuses on head-fixed recordings
acquired under specific infrared imaging geometry. Performance may differ in freely moving conditions,
at extreme gaze angles, or under variable illumination. However, the availability of the IM provides a
flexible mechanism to adapt the pipeline to new recording conditions through targeted retraining.
Second, pupil size outputs are reported in pixel units. While videos from any setup can be directly
analyzed, conversion to physical units and comparisons across rigs require calibration of camera
geometry and appropriate scaling.

In summary, Pupil-DLC is an open-source, scalable pupillometry pipeline that combines high accuracy,
minimal frame loss, tunable quality control, and cross-species generalization. By lowering technical
barriers to robust pupil tracking, this framework enables reproducible measurement of pupil-linked
brain state dynamics across diverse experimental contexts, spanning basic neuroscience in mice and
translational applications in humans.

Code and Data Availability

439 Pupil-DLC is freely available online: https://github.com/Valyriverse/Pupil-DLC.

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Competing Interests Statement

CK holds an executive position, and has a financial interest, in *Intrinsic Powers, Inc.,* a company whose purpose is to develop a device that can be used in the clinic to assess the presence of consciousness in patients. The remaining authors declare no competing interests.

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