## A Mixed Filtering Approach for Real-Time Seizure State Tracking Using Multi-Channel Electroencephalography Data

Alexander G. Steele<sup>®</sup>, *Graduate Student Member, IEEE*, Sankalp Parekh, Hamid Fekri Azgomi<sup>®</sup> Mohammad Badri Ahmadi, Alexander Craik, *Graduate Student Member, IEEE*, Sandipan Pati<sup>®</sup>, Joseph T. Francis, Jose L. Contreras-Vidal<sup>10</sup>, *Fellow, IEEE*, and Rose T. Faghih<sup>®</sup>, *Member, IEEE* 

we make multiple seizure state estimations using a mixedfilter and multiple channels found over the entire sensor

Manuscript received February 11, 2021; revised August 1, 2021 and September 10, 2021; accepted September 12, 2021. Date of publication September 20, 2021; date of current version October 8, 2021. This work was supported in part by NSF grants 1942585-CAREER: MINDWATCH: Multimodal Intelligent Noninvasive brain state Decoder for Wearable AdapTive Closed-loop arcHitectures, 1755780-CRII: CPS: Wearable-Machine Interface Architectures to RTF, and 1527558-NRI: Collaborative Research: Multimodal Brain Computer Interface for Human-Robot Interaction, NIH grant 1R01NS092894-01-Towards an Autonomous Brain Machine Interface: Integrating Senand NSF IUCRC BRAIN award 1650536 to JLC. Rose T. Faghih served as the senior author. This article was presented in part at the proceedings of the Asilomar Conference on Signals, Systems, and Computers [DOI: 10.1109/IEEECONF44664.2019.9048990]. (Corresponding author: Rose T. Faghih.)

This work involved use of existing publicly available human subject data, and the information was recorded so subjects cannot be identified. Hence, this human subject data is exempt from review board approval.

Alexander G. Steele, Jose L. Contreras-Vidal, and Rose T. Faghih are with the Department of Electrical and Computer Engineering, University of Houston, Houston, TX 77004 USA, and also with the NSF IUCRC BRAIN Center, University of Houston, Houston, TX 77004 USA (e-mail: agsteele@uh.edu; jlcontreras-vidal@uh.edu; rtfaghih@uh.edu).

Sankalp Parekh, Hamid Fekri Azgomi, and Alexander Craik are with the Department of Electrical and Computer Engineering, Univerhfekriazgomi@uh.edu; arcraik@uh.edu).

Mohammad Badri Ahmadi is with the Department of Biomedical Engineering, University of Houston, Houston, TX 77004 USA (e-mail: mbadri-ahmadi@uh.edu).

Sandipan Pati is with the Department of Neurology, McGovern Medical School, The University of Texas Health Science Center at Houston, Houston, TX 77030 USA (e-mail: sandipan.pati@uth.tmc.edu).

and the Department of Electrical and Computer Engineering, University of seizure types, which vary from person-to-person [6], [7]. of Houston, Houston, TX 77004 USA (e-mail: jtfranci@uh.edu).

This article has supplementary downloadable material available at Digital Object Identifier 10.1109/TNSRE.2021.3113888

Abstract—Real-time continuous tracking of seizure state single seizure state estimation made up of these individual is necessary to develop feedback neuromodulation ther- estimations. Using a modified wrapper feature selection, apy that can prevent or terminate a seizure early. Due we determine two optimal features of mixed data type, one to its high temporal resolution, high scalp coverage, and continuous and one binary analyzing all available channels. non-invasive applicability, electroencephalography (EEG) is These features are used in a state-space framework to a good candidate for seizure tracking. In this research, model the continuous hidden seizure state. Expectation maximization is performed offline on the training and validation data sets to estimate unknown parameters. The space; then by applying a Kalman filter, we produce a seizure state estimation process is performed for multiple channels, and the seizure state estimation is derived using a square-root Kalman filter. A second expectation maximization step is utilized to estimate the unknown square-root Kalman filter parameters. This method is tested in a realtime applicable way for seizure state estimation. Applying this approach, we obtain a single seizure state estimation with quantitative information about the likelihood of a seizure occurring, which we call seizure probability. Our results on the experimental data (CHB-MIT EEG database) validate the proposed estimation method and we achieve an average accuracy, sensitivity, and specificity of 92.7%, sorimotor Reward Modulation and Reinforcement Learning to JTF, 92.8%, and 93.4%, respectively. The potential applications of this seizure estimation model are for closed-loop neuromodulation and long-term quantitative analysis of seizure treatment efficacy.

> Index Terms—Electroencephalography (EEG), epilepsy, Kalman filter, neurofeedback, real-time detection, state estimation, state-space methods.

## I. INTRODUCTION

PPROXIMATELY 50 million people live with epilepsy worldwide [2]. In the US alone, the National Institutes of Health spends over \$150 million each year on epilepsy sity of Houston, Houston, TX 77004 USA (e-mail: sparekh2@uh.edu; research. This accounts for roughly 82% of research that is not coming from industry sources [3]. Epilepsy is a neurological disorder which can occur at any age, currently has no cure, and is characterized by seizures that can happen without noticeable warning [3]. This can lead to other health problems such as brain injury from falling, psychiatric conditions, and a reduc-Joseph T. Francis is with the Department of Biomedical Engineering tion in quality of life [4], [5]. It is a spectrum with a wide range For example, a focal seizure is one that is triggered by a https://doi.org/10.1109/TNSRE.2021.3113888, provided by the authors. localized portion of the brain, while a general seizure can be triggered in multiple parts of the brain [7].

This work is licensed under a Creative Commons Attribution 4.0 License. For more information, see https://creativecommons.org/licenses/by/4.0/

IEEE TRANSACTIONS ON NEURAL SYSTEMS AND REHABILITATION ENGINEERING, VOL. 29, 2021

medications [8]. While most patients find that their symp- may assist in developing feedback therapy (adaptive neurotoms are well controlled with a drug regimen, more than modulation) [28], [29]. In this study, we define the likelihood 90% still experience seizures [8], [9]. These medications also of a seizure occurring as seizure probability. One practical

Treatments for epilepsy currently focus on anti-epileptic state as they evolve and progress is clinically relevant as they