

The Center for Biomedical Technology

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Neuromorphic Speech Processing Lab
Biomedical Technology Center

Campus de Montegancedo, s/n, 28223 Pozuelo de Alarcón,
Madrid, Spain

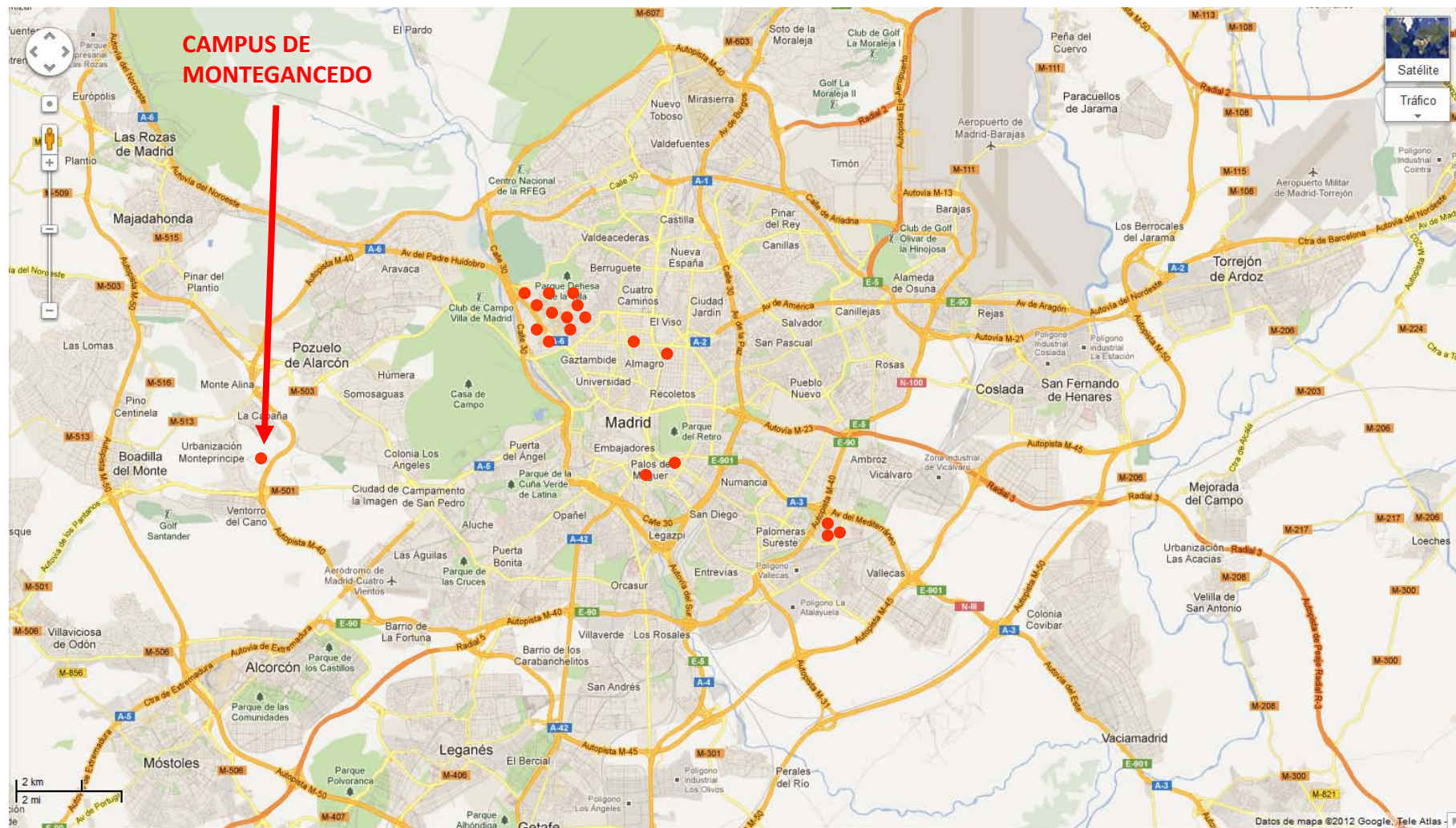
Welcome to CBT



Who are we?

- Research Center from Universidad Politécnica de Madrid
- Incorporating researchers from other Universities and the Superior Council for Scientific Research
- Universidad Politécnica de Madrid is Madrid's Technical University founded in 1973
- Integrated by 20 Schools and Colleges covering all fields of engineering: Civil, Mechanical, Chemical, Agriculture, Forestry, Mining, Naval, Aeronautics & Space, Communications, Computer Science and Sporting
- 6 Research Institutes: Optoelectronics and Microelectronics, Solar Energy, Education Sciences, Nuclear Fusion, Microgravity, Automotive Research
- 13 Research Centers: Transportation, Agricultural and Environment Risks, Materials, Devices for ICT, Industrial Electronics, Automatics and Robotics, Acoustics, Integral Domotics, Biotechnology and Plant Genomics, Biomedical Technology, Laser, Software Technology, Dress Design & Fashion

Where are we?



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- Presentation of the Center for Biomedical Technology UPM
 - Motivations, Objectives, Vision, Premises
 - CTB Main Research Lines
 - GIAPSI and the Neuromorphic Speech Processing Lab
- Topics for Further Discussion

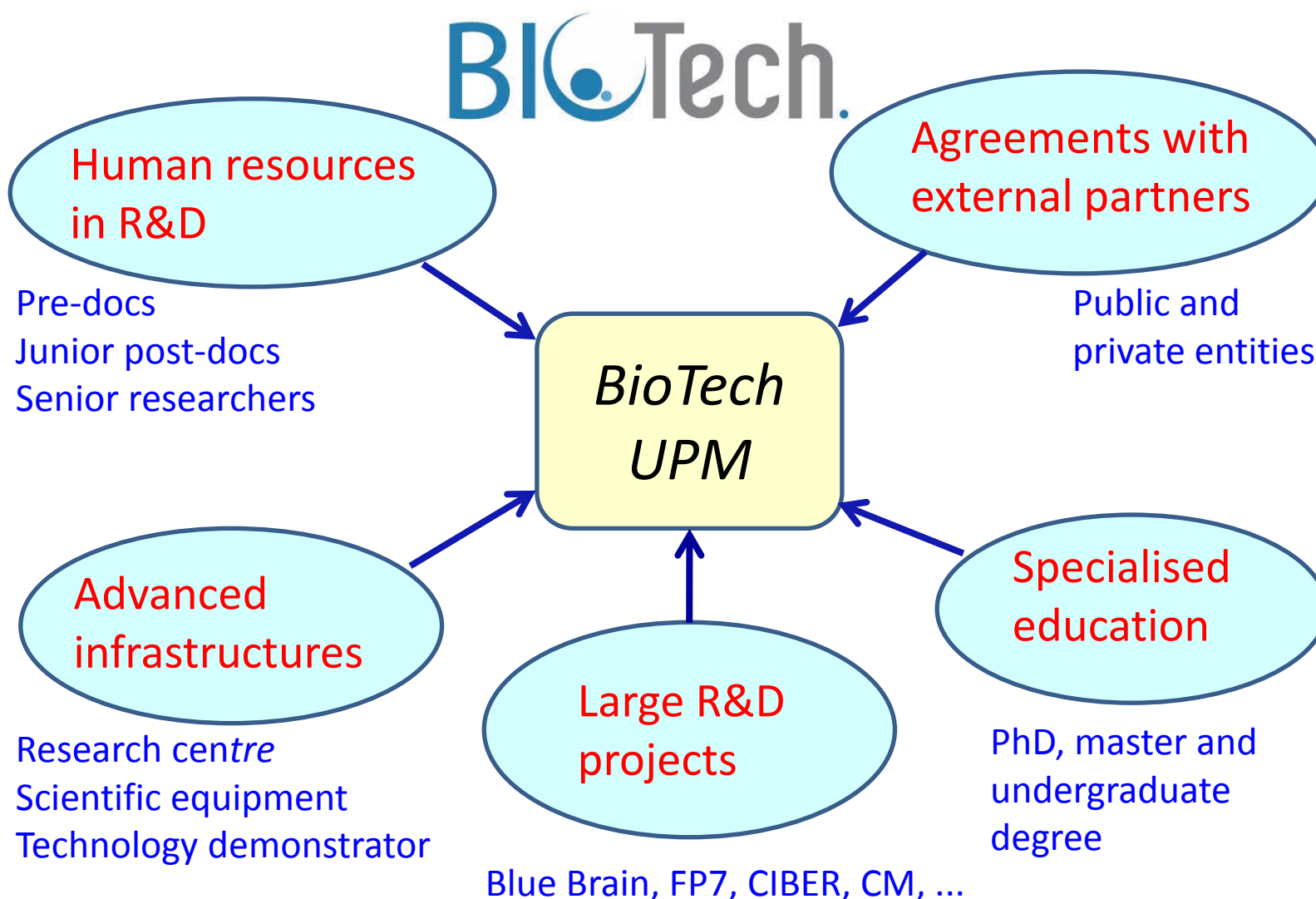
The current healthcare models, whether public or private, are becoming nowadays unsustainable, due to some unquestionable facts:

- The aging of the population.
- Unwieldy and uncoordinated provider systems, threatening economies, which demand urgently new business models.
- Runaway costs and commitments.
- Increased health care demands, both in quality and coverage, including promotion actions and health prevention.

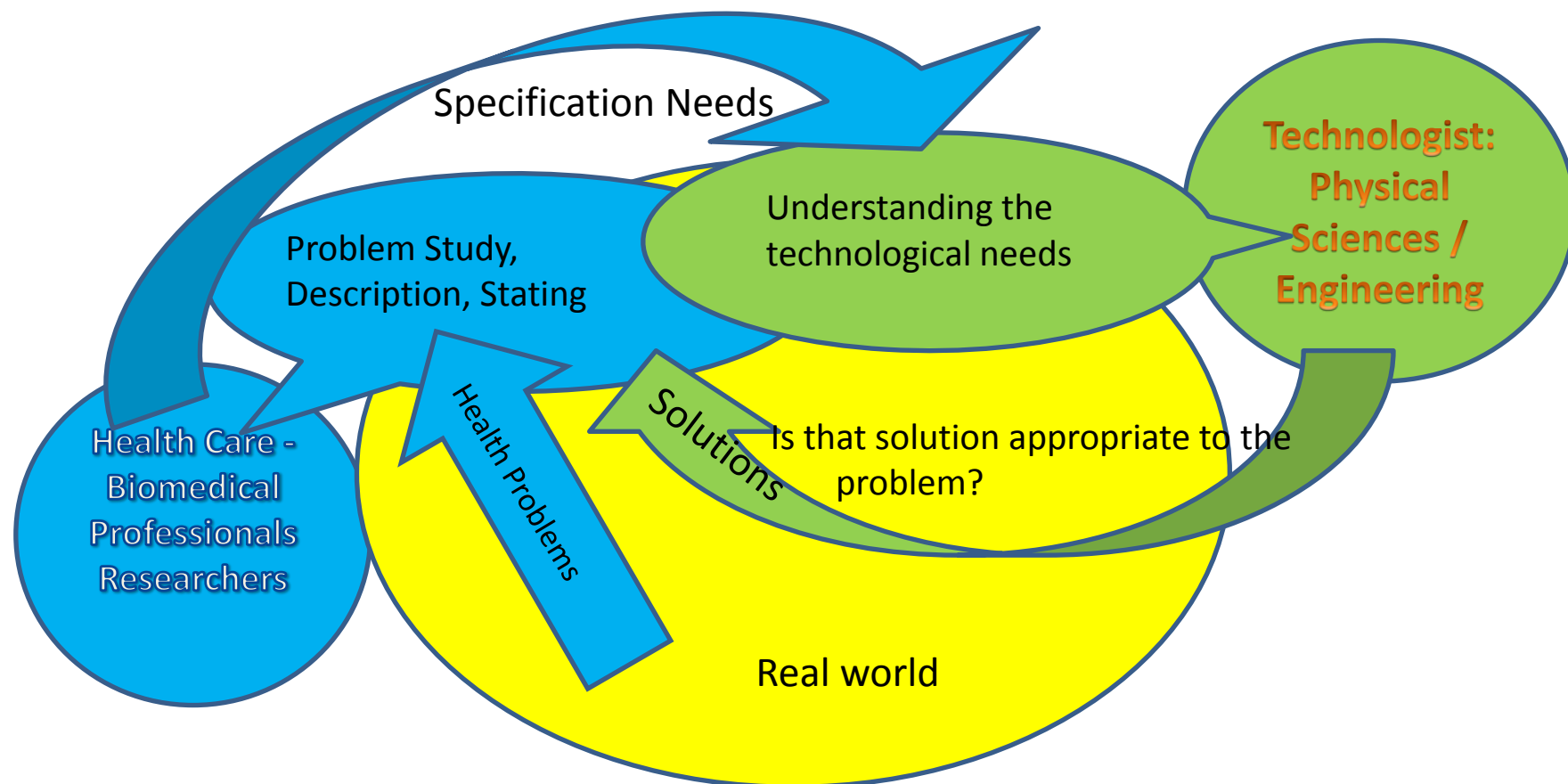
Objectives

Technology is worldwide acknowledged to be an essential component or an indispensable facilitator of the process towards new sustainable healthcare models by providing:

- New systems, devices and sensors for cost-efficient specific niches of diagnosis and therapy.
- New competencies that increases the services value to meet the new environment needs and demands.
- Removal of barriers that hamper the coordination amongst the different and fragmented agents involved.
- Coping with health systems complexity: there are powerful tools to serve that purpose.
- Programs to create talent that incorporate the new necessary skills.
- Personalization of care, achieving the patient's active involvement in his/her own care.
- Business models following criteria based on results, rather than on payment for services, adapted to the global environment.

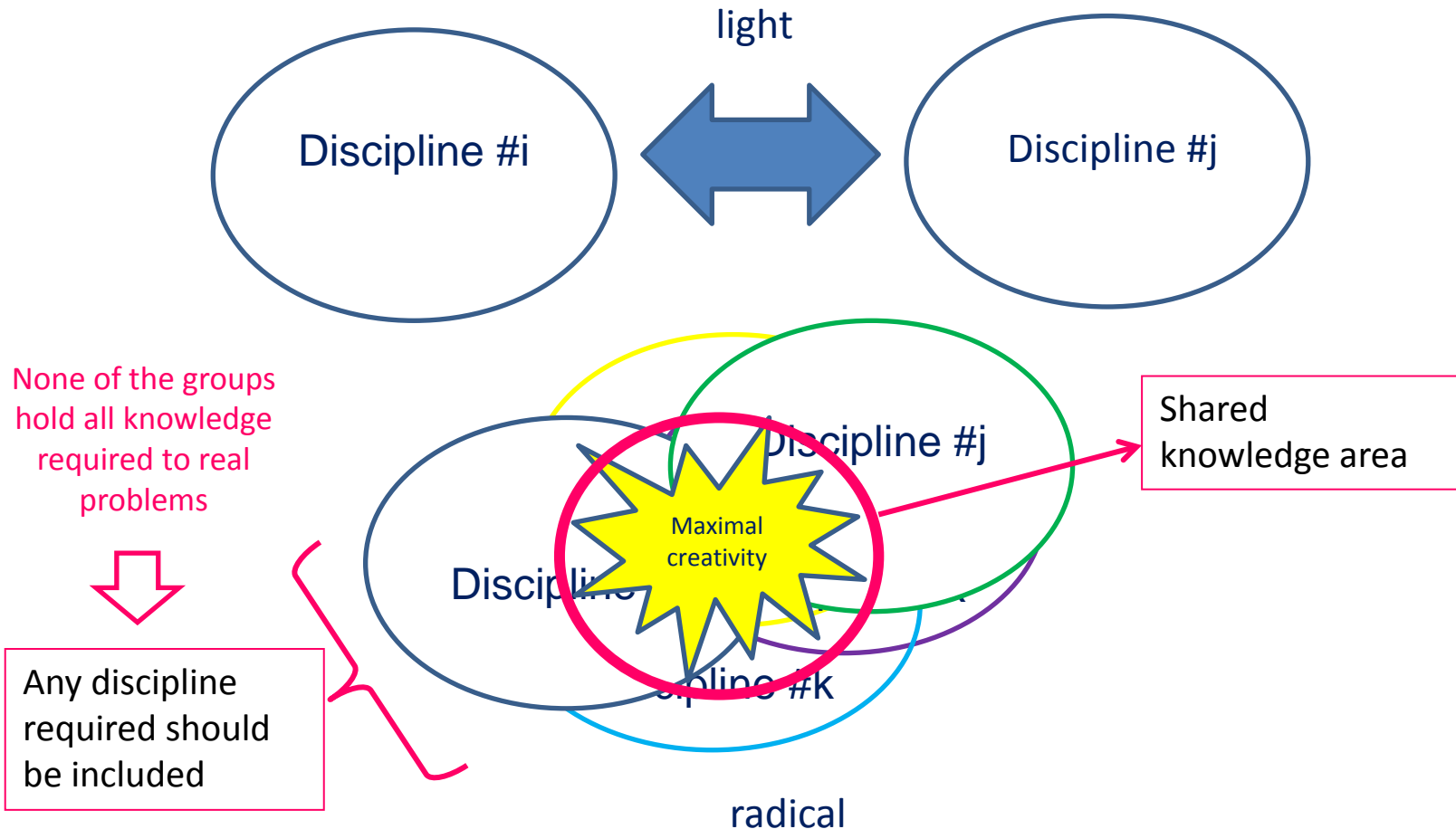


Vision: problem definer – problem solver



Vision: Multidisciplinary

Multidisciplinary vs Interdisciplinary



Bring together outstanding groups of researchers and technologists, from a variety of biomedical and technological disciplines, in a stable environment of multidisciplinary research, with a size and infrastructure appropriate to approach successfully some of principal health and biomedical challenges nowadays.

Having in mind another fact: “important innovation usually shows up at the intersection of disciplines”

1. Technology Transfer

The CTB adopts a clear strategy toward industrial technology transfer: the development of applicable technologies that **translates** basic research into **clinical** solutions

2. Translational Research

The CTB recognizes that generating clinically and commercially useful technologies rely on **clinical validation**.

CTB includes a clinical trial unit to facilitate the design and practical implementation of clinical trials to minimize the high costs always involved and the difficulties to achieve the strict associated requirements recommend.

This single step is a principal functional part of CTB office to support, design and manage clinical trials dedicated to the pre-commercial evaluation of laboratory research reducing the risk of full clinical development.

3. Education and Training

The **training** of CTB researchers and professionals is another important issue. Which will include:

1. A **multidisciplinary multinstitutional and international** Postgraduate Program on Health Sciences Technology:
2. Hopefully coordinated with the **Graduate Degree on Biomedical Engineering**
3. A variety of **courses and seminars** oriented to specific research and professional groups including postgraduate international degrees

Laboratories integrating CBT

- Laboratory of Bioinstrumentation
- Laboratory of Nanobiotechnology (UPM(CTB-ISOM)-UCM)
- Laboratory of Biomedical Image. Neuroimaging (UPM-URJC)
- Laboratory of Cognitive and Computational Neurosciences (UPM-UCM)
- Laboratory of Magnetoencephalography MEG
- Biosignal analysis and modeling: synchronization and inverse engineering
- Laboratory of Clinical Neuroscience
- Laboratory of Computational Systems Biology (UPM-BBVA)
- Laboratory of Biological Networks (UPM-URJC)
- Laboratory on Applied Mathematics to Biomedicine (UPM-URJC)

Laboratories integrating CBT (II)

- Laboratory of Experimental Neurology and Animal Models (UPM-HURyC)
- Laboratory of Cellular Growth
- Laboratory of Biochemistry. Biofunctionalization
- Laboratory of Bioelectromagnetism
 - Unit of celular studies
 - Unit of clinical application
 - Unit of dosimetry electromagnetic fields
- Laboratory Cajal of Cortical circuits (UPM-CSIC: Blue Brain)
- Laboratory of Internet of Things and Social Networks
- Laboratory of Personalised Care
- Laboratory of Internet of Things and Social Networks
- Laboratory of Biomedical Informatics: Data mining and visualization
- **Neuromorphic Speech Processing Laboratory**
- Laboratory of Biomaterials and Tissue Engineering
- Laboratory of Diabetic technology and metabolic modeling

- Clinical and experimental Magnetoencephalography
- Nano-structures and nano-conjugated fabrication for clinical and research applications (CTB-ISOM)
- Physical and functional characterization of nanostructures (CIBER_bbn)
- Remote post-processing of medical images
- Studies of electromagnetic radiations and dosimetry
- Brain electrophysiological activity characterization
- Technology transfer, including spin-off temporal nurturing
- Clinical Trials support
- Postgraduate education area management

CBT Main Research Lines

Advanced Biomedical Imaging
Brain Synchronization Analysis
Alzheimer Disease
Clinical NeuroScience
BioInstrumentation and BioSensors
NanoMedicine
Ramón y Cajal Blue Brain Project
Computational Systems Biology
ConnectioPathies
BioElectroMagnetism
Biomechanics, Biomaterials and Tissue Engineering
Biomedical Informatics: Data Mining and Simulation
Personalized Care: Chronic Disease Managment & Wellness Support
Neuromorphic Speech Processing
Diabetes Technologies
Tele-Rehabilitation Technologies

Target: Neuroimage post-processing to develop new objective biomarkers

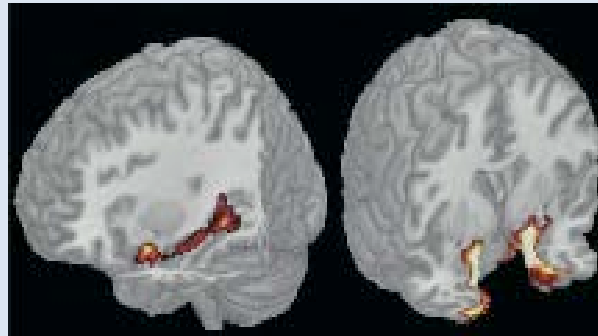
- Neuroimaging. Advanced functional and quantitative techniques → Early diagnosis of neurodegenerative diseases
- Multiscale studies → Early diagnosis of Alzheimer's disease
- Platform development → Advanced processing, integration/fusion of different imaging modalities and decision making tools → Research and Clinical Practice
- Research on neurophysiological basis of pain. MRI compatible pneumatic somatosensorial stimulation
- Image banks and advanced teleradiology environments
- Multimodality cardiovascular imaging technology
- Simulation, virtual reality and image guiding technologies → Training and Planning of Minimally Invasive Surgery

Laboratories:

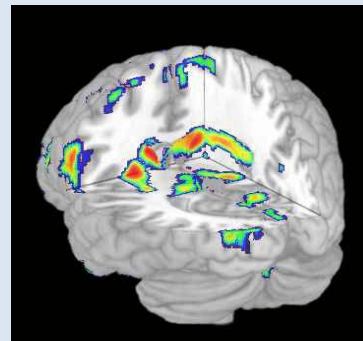
- Neuroimaging
- Cognitive and Computational Neuroscience
- Blue Brain
- Bioelectromagnetism
- Biomedical Imaging
- Molecular Biology and Biochemistry
- Advanced Mathematics applied to Biomedicine

Advanced imaging techniques for Early Diagnosis of Neurodegenerative Diseases

Determining the ties between cognitive assessments and their anatomical correlation, both in grey and white matter.



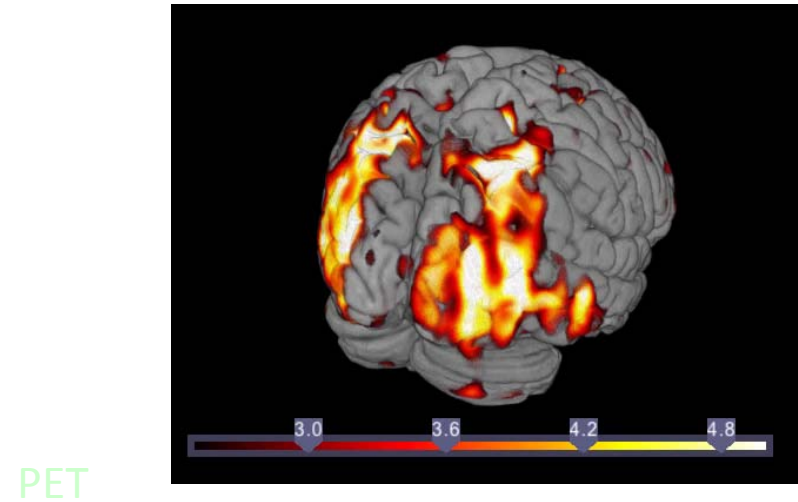
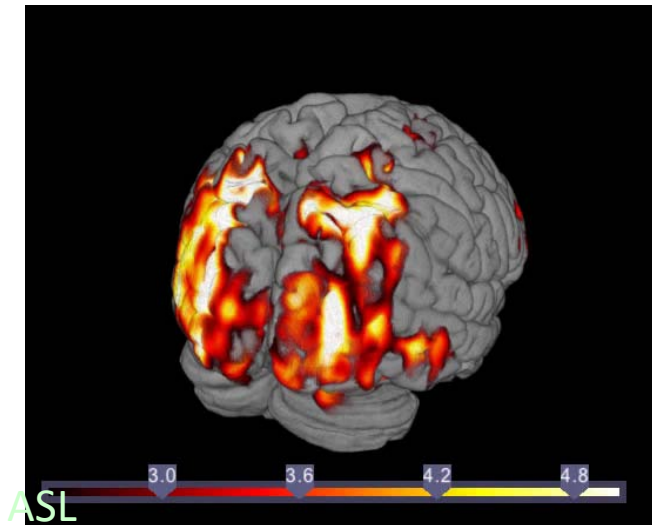
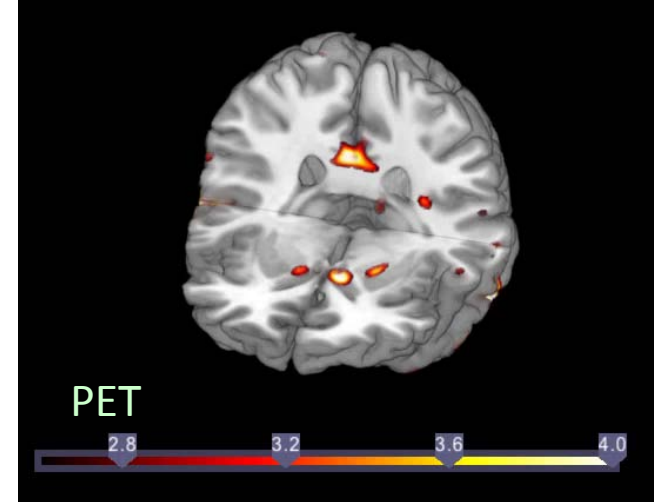
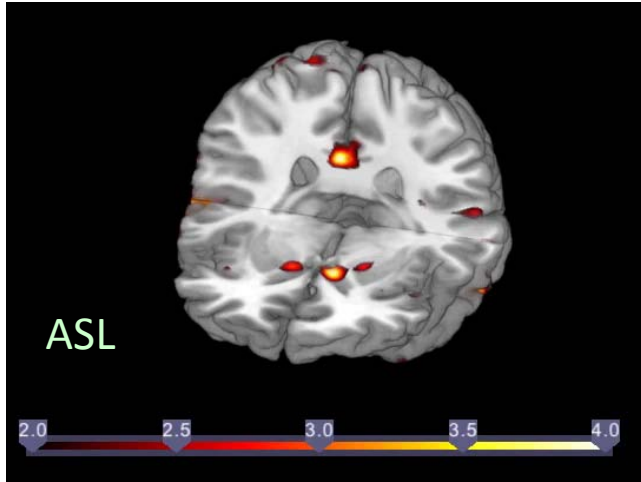
Temporal lobe atrophy in AD in the studied population sample.



Anatomical localizations with volume alterations in psychotic population.

Controls Vs EA

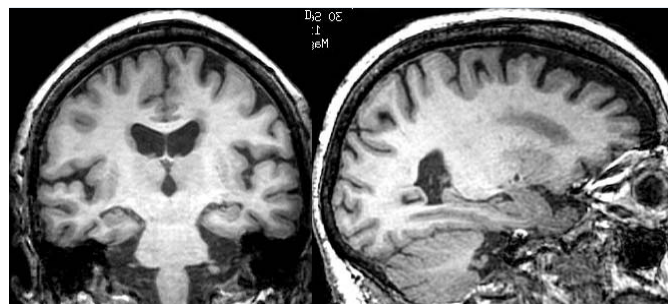
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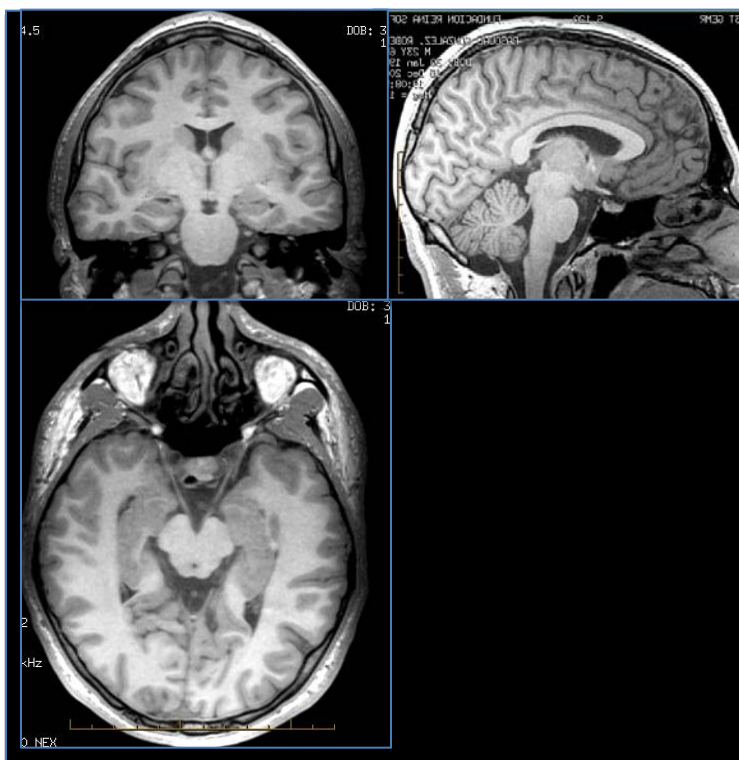
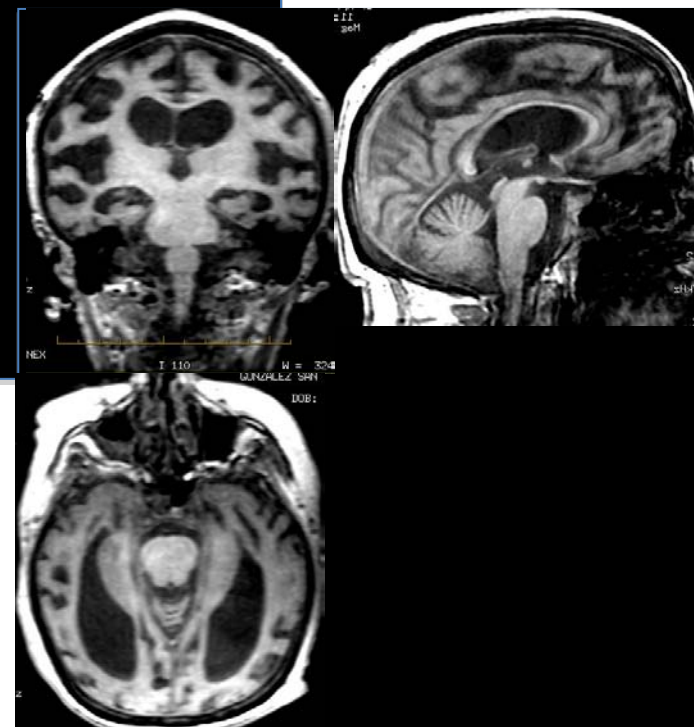
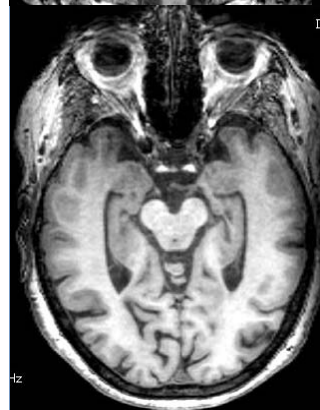
Anatomical Evolution

Population Mapping

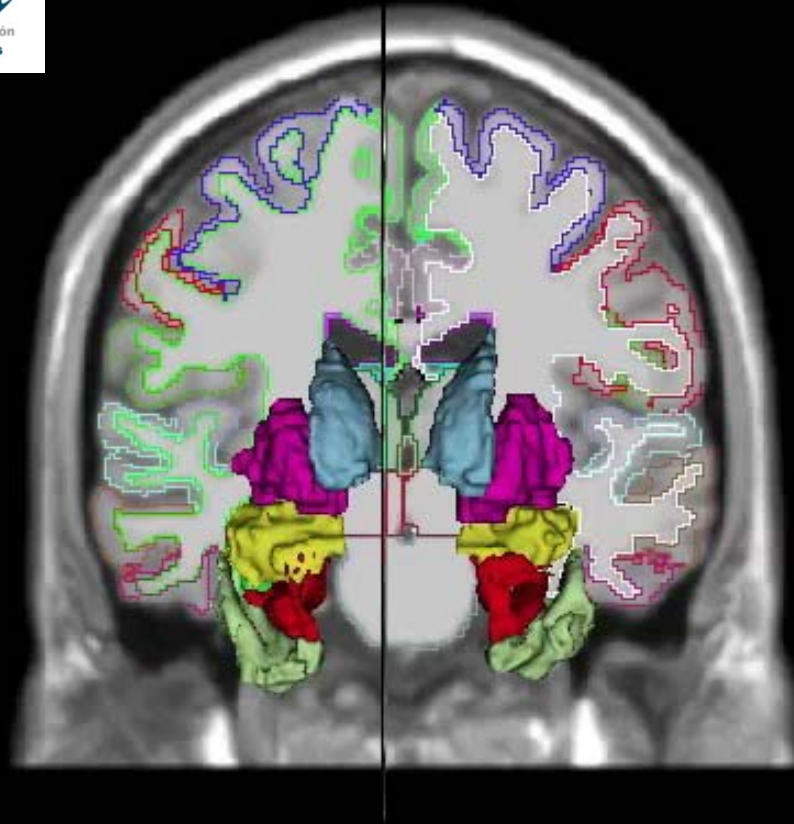
Elder. 83 Years



Alzheimer. 51 Years

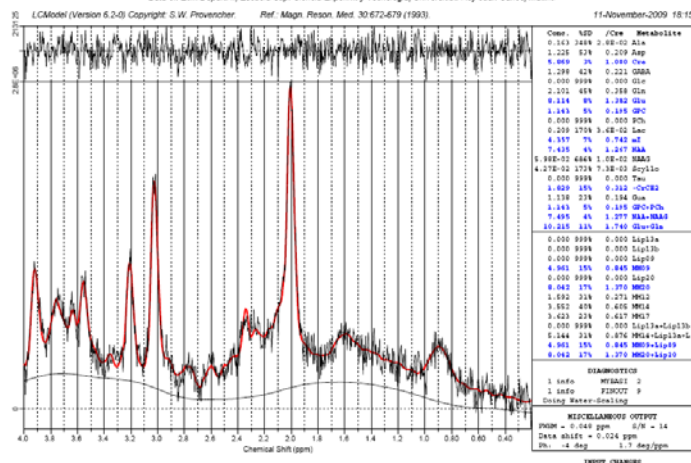


Young. 29 Years



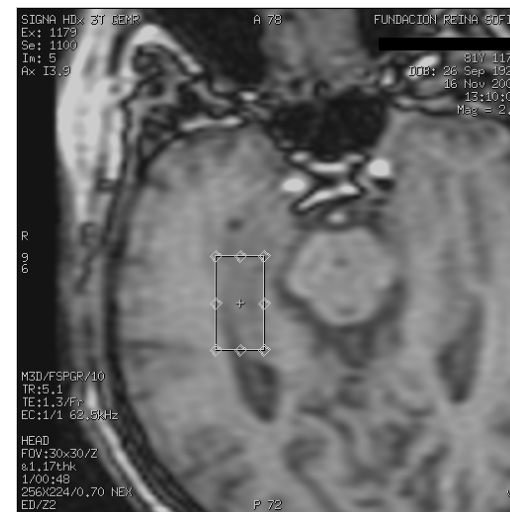
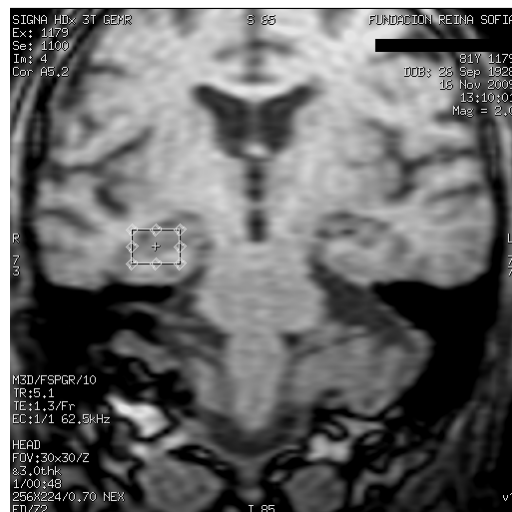
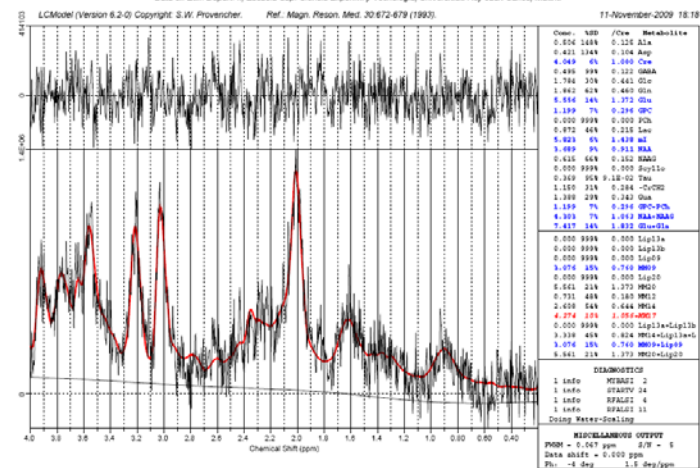
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Voxel dimensions: (19.9, 20.0, 19.569574)

Data of: Edif. Depart. II, Escuela Sup. Ciencia Exprim. y Tecnología, Universidad Rey Juan Carlos, Madrid

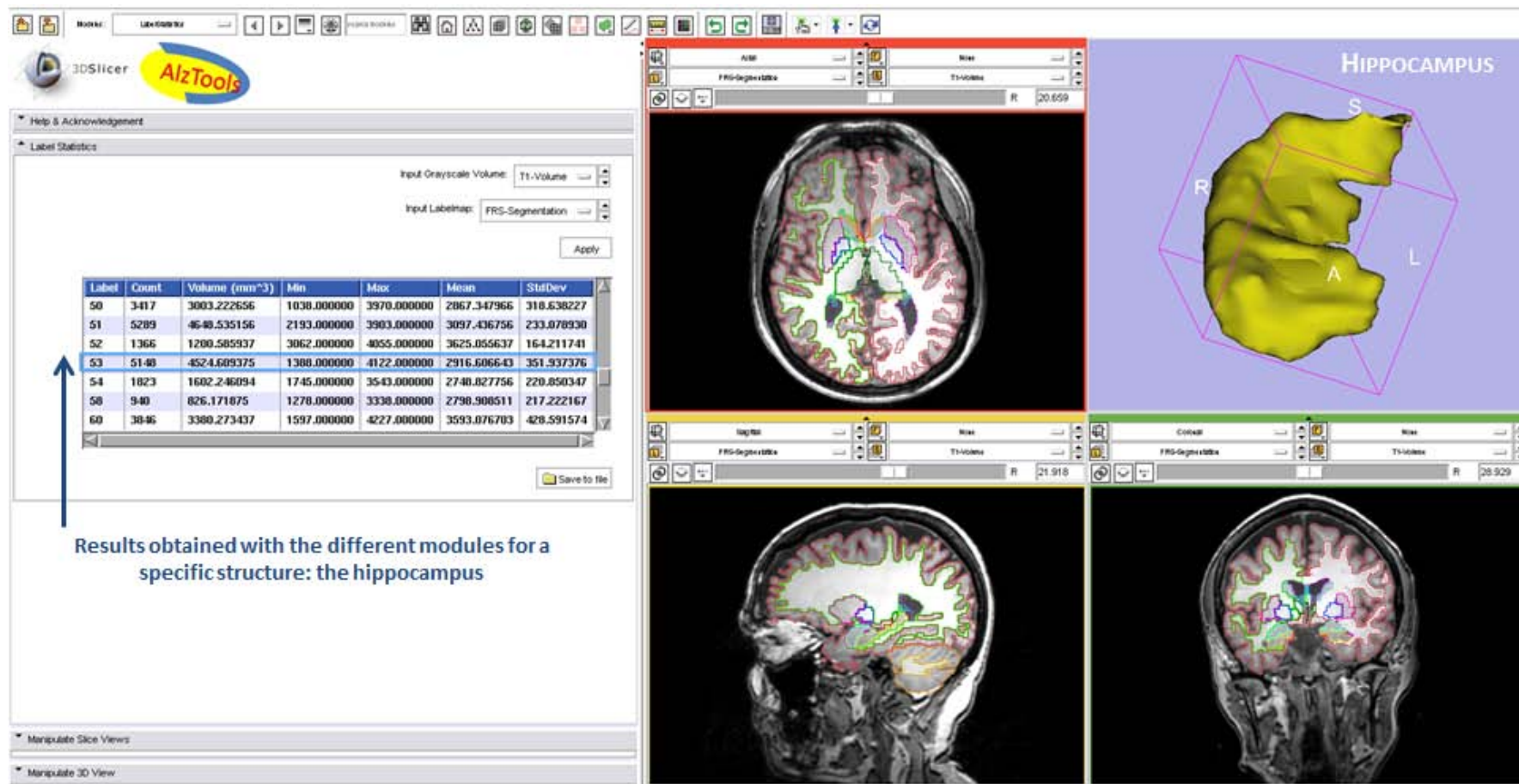


Exam: 664-0 ID=664 12/19/108 15:56 (FUNDACION REINA SOFIA) TE=35 Voxel center: (-27.489925, -24.262608, -15.260301)
Voxel dimensions: (14.233463, 28.1, 9.053295)

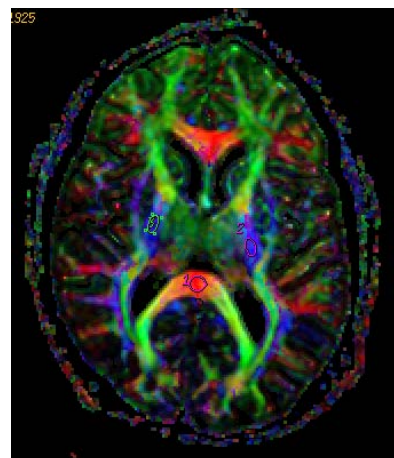
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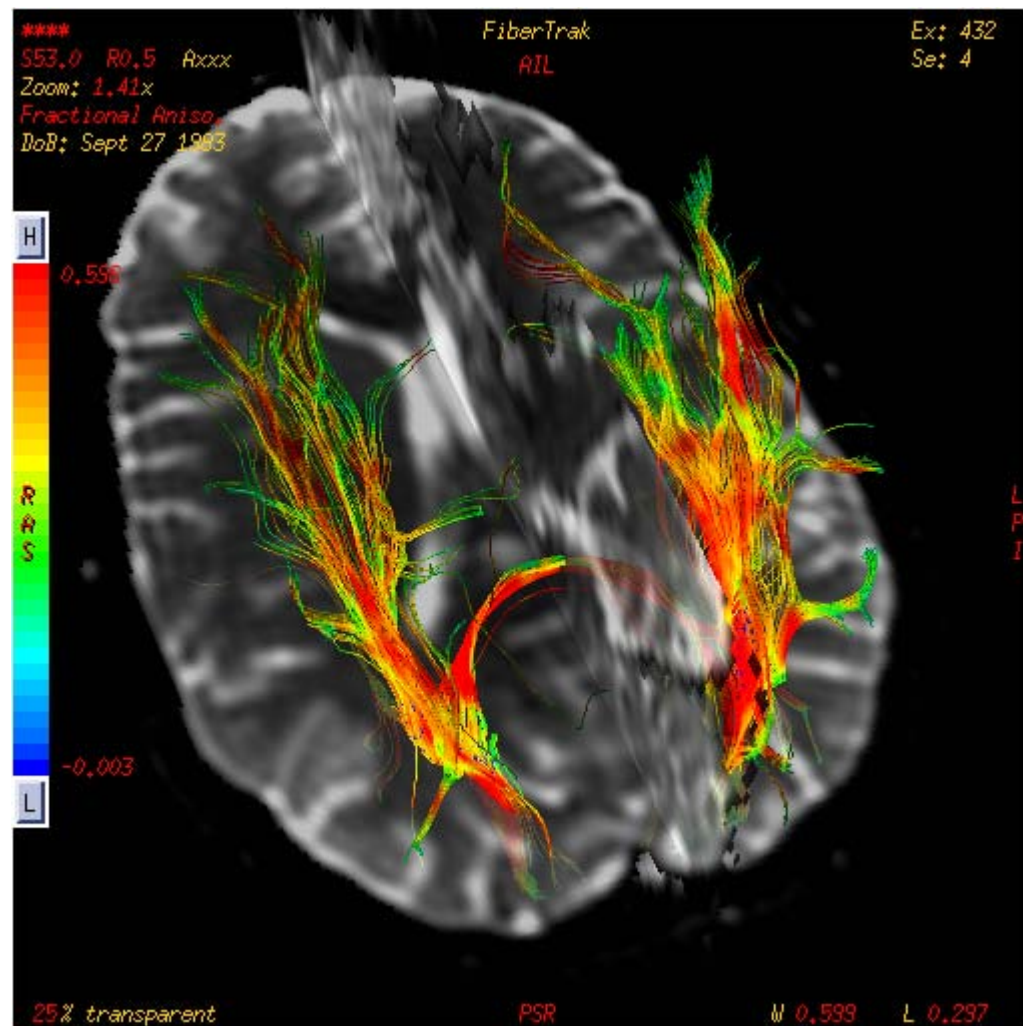
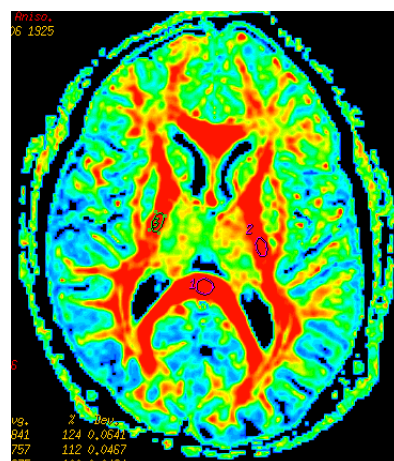
Hippocampal Volumetry



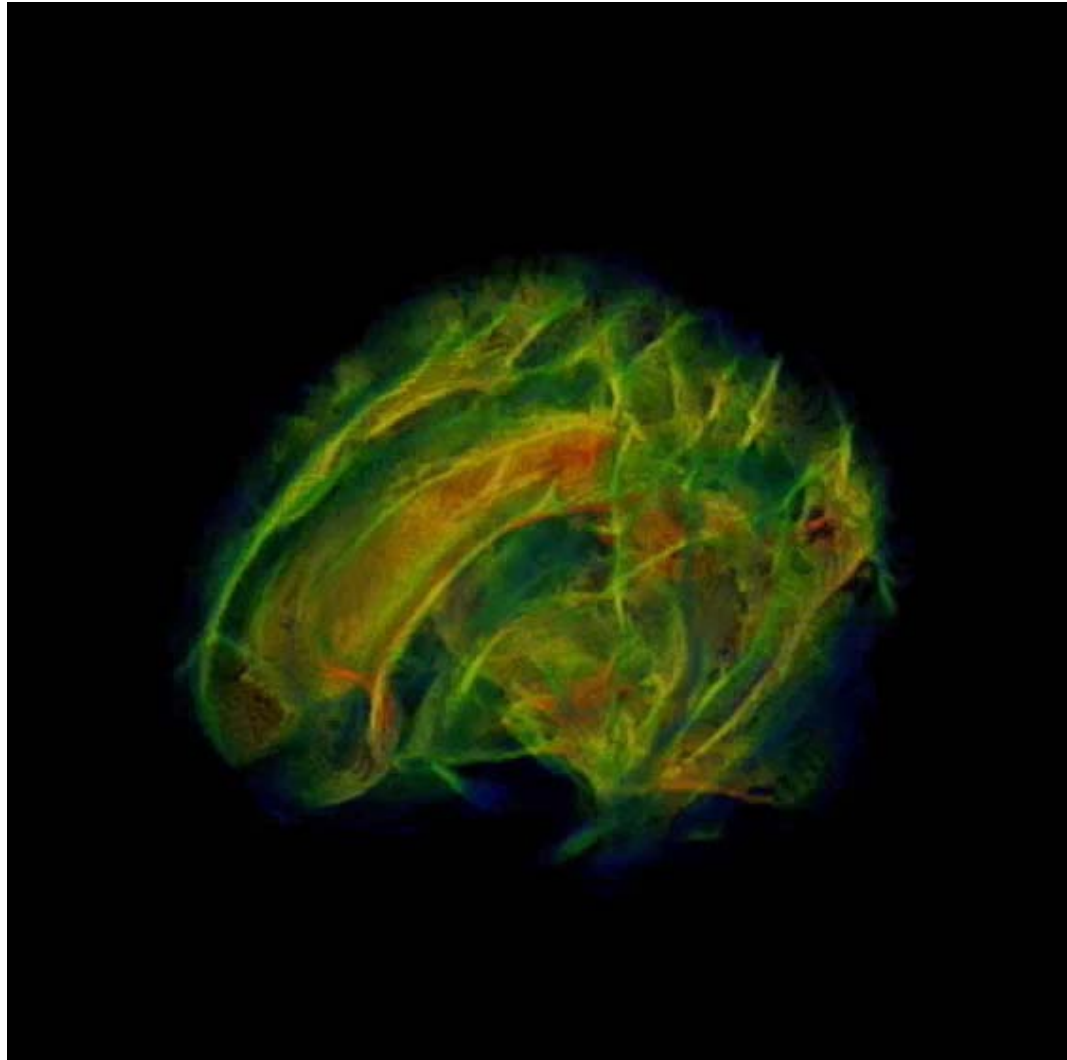
Diffusion Tensor



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3D Imaging



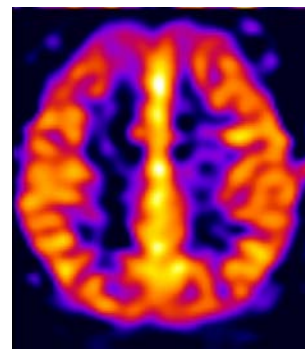
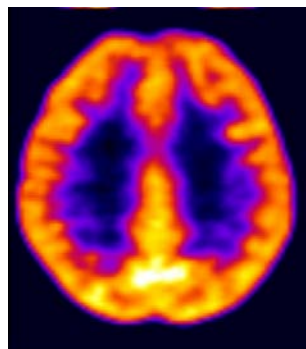
Metabolism and ASL Perfusion

Validating new imaging methods

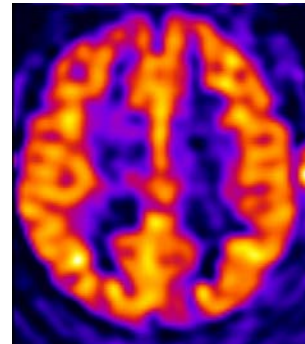
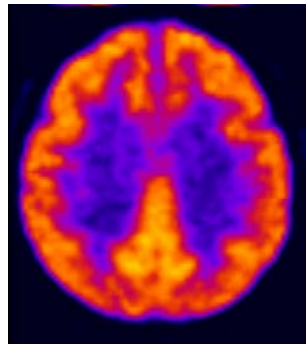
PET

ASL

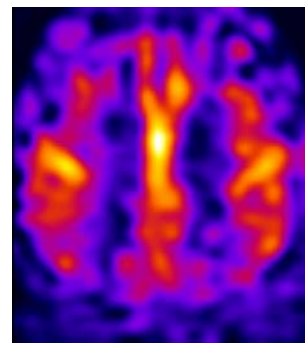
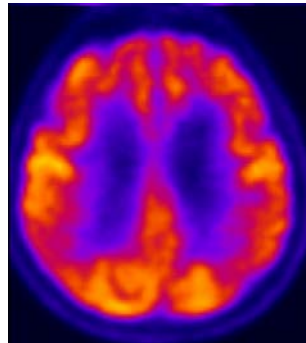
Young. 29 Years



Elder 85 Years Healthy



Elder 84 Years Alzheimer

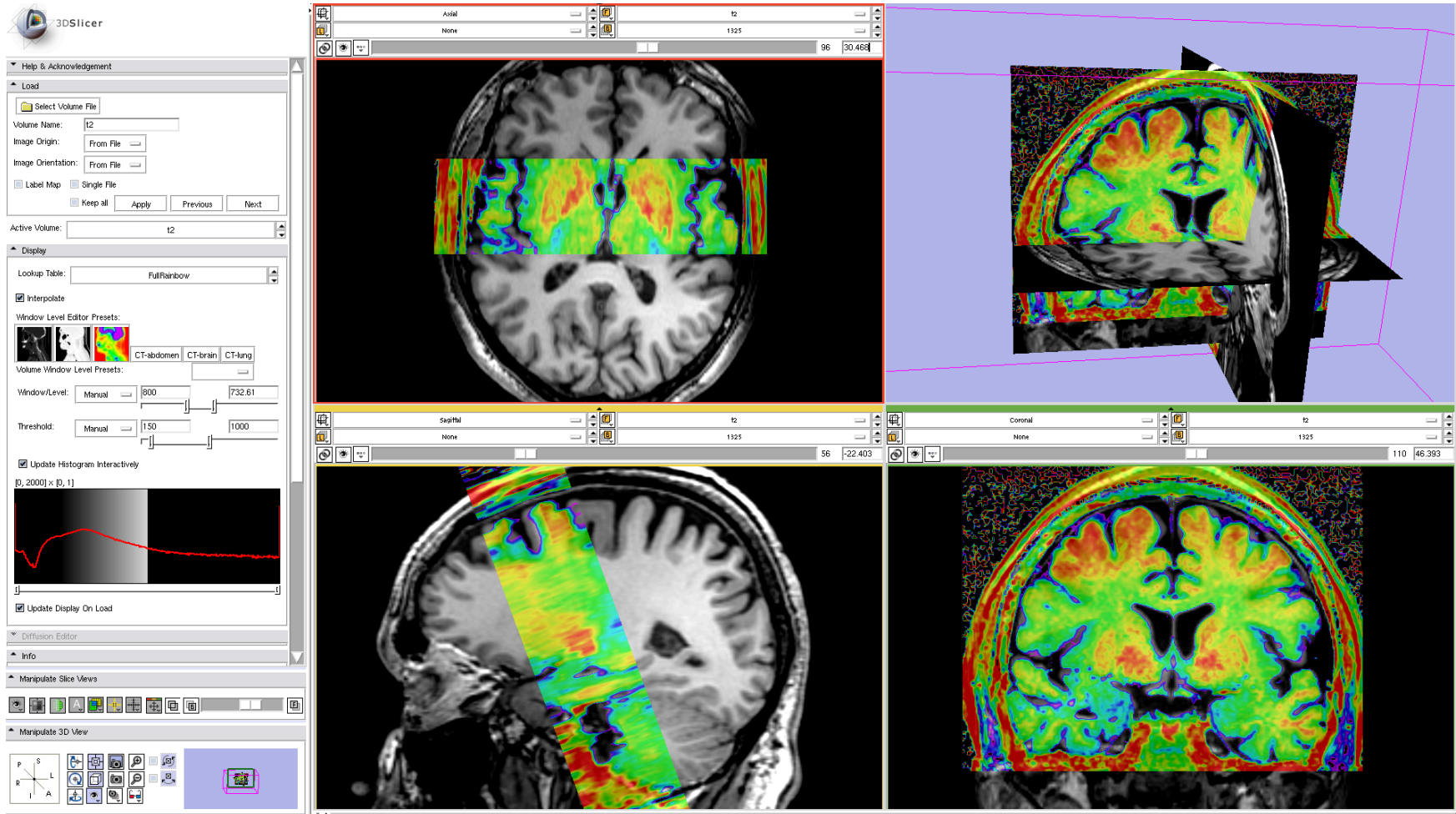


Arterial Spin Labeling (ASL) using gold standards.

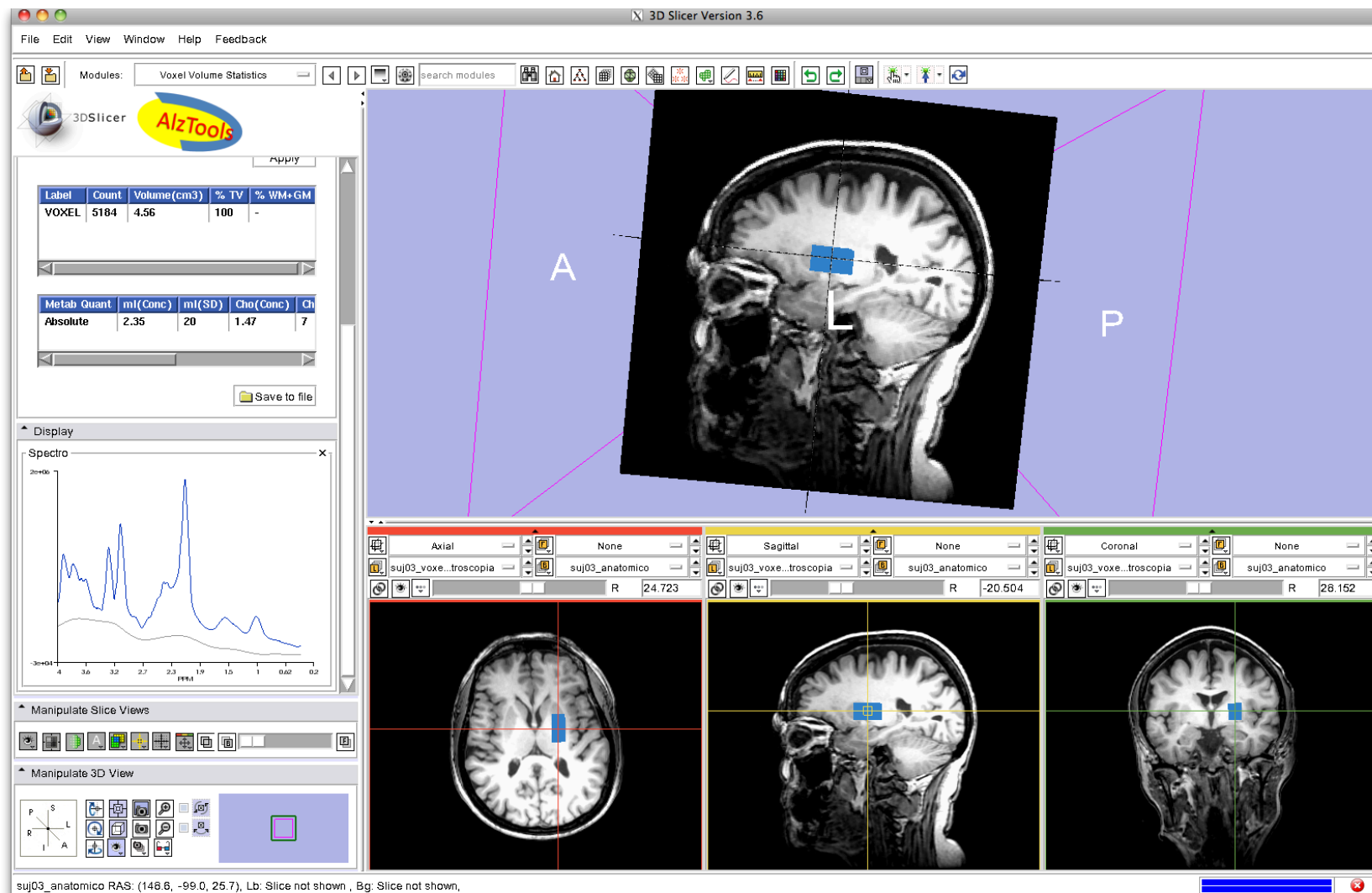
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Second row: an 84-year old healthy male. Left: caption obtained with PET; right: equivalent image obtained with ASL. Third row: images an 85-year old male with Alzheimer's disease.

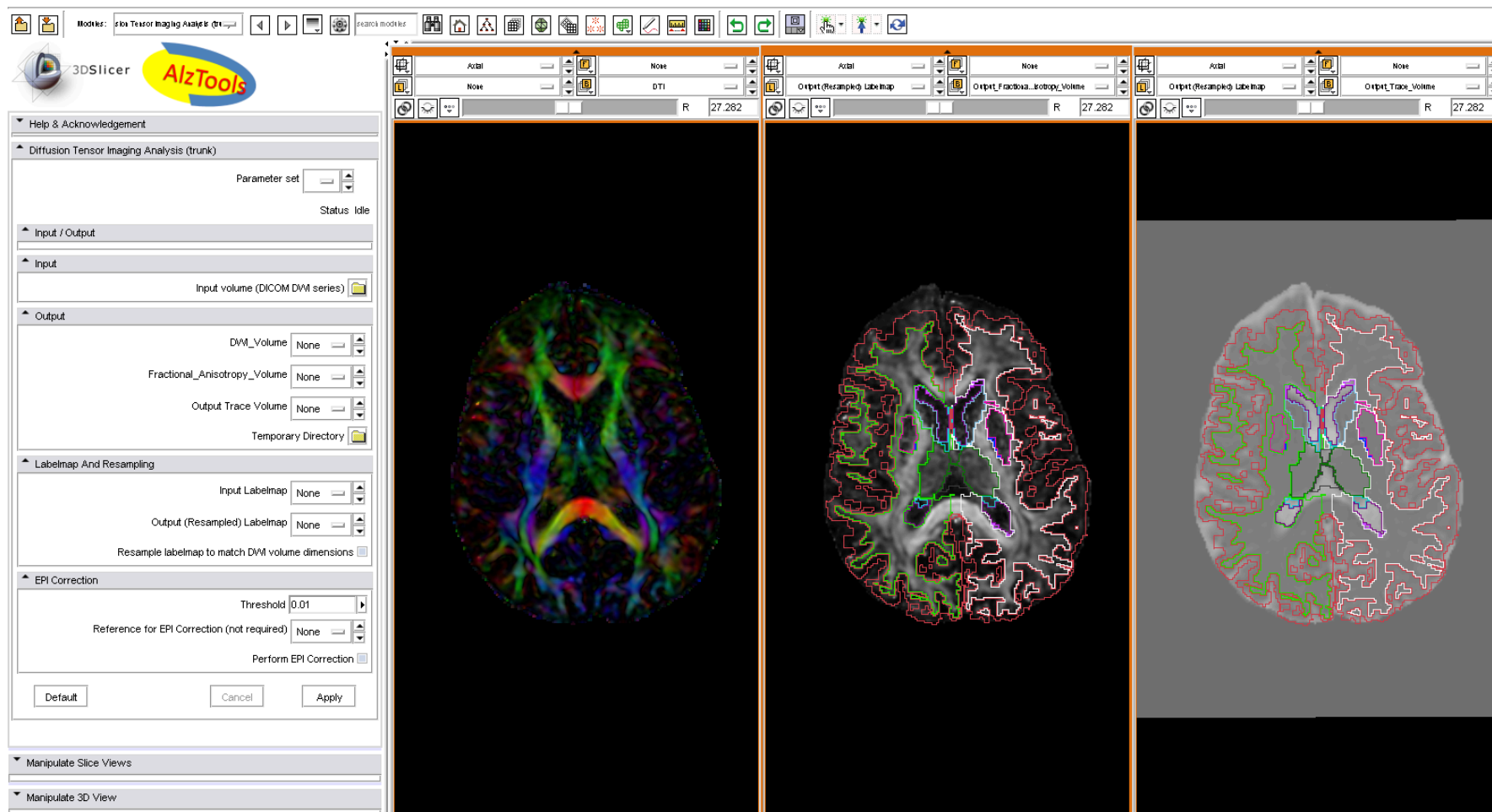
Iron Deposit Quantification



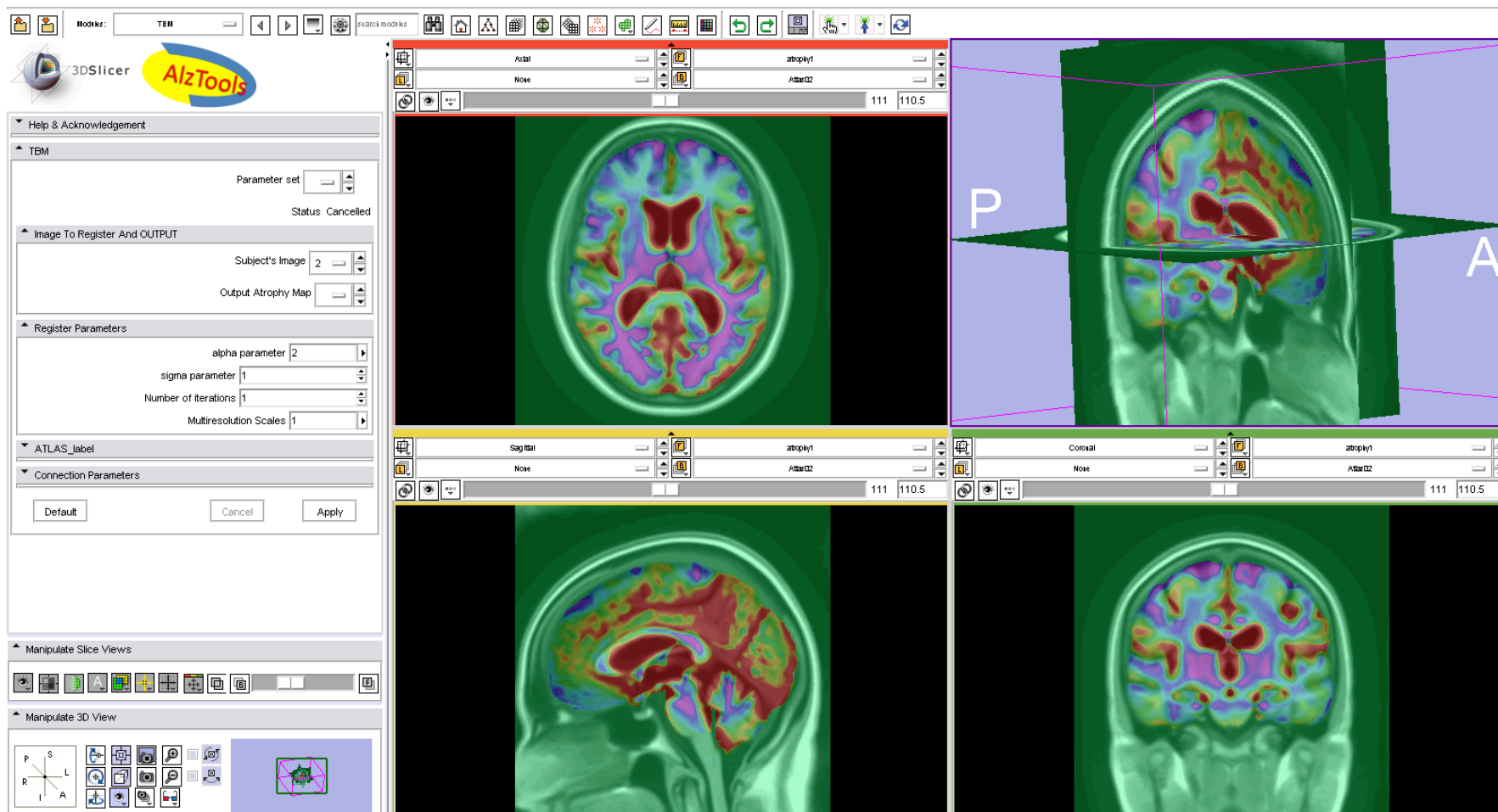
Spectroscopy: Molecular Imaging



Diffusion Imaging



Tensor-based Morphometry



Target: MEG-based imaging and biomarker development. Application to neurological diseases

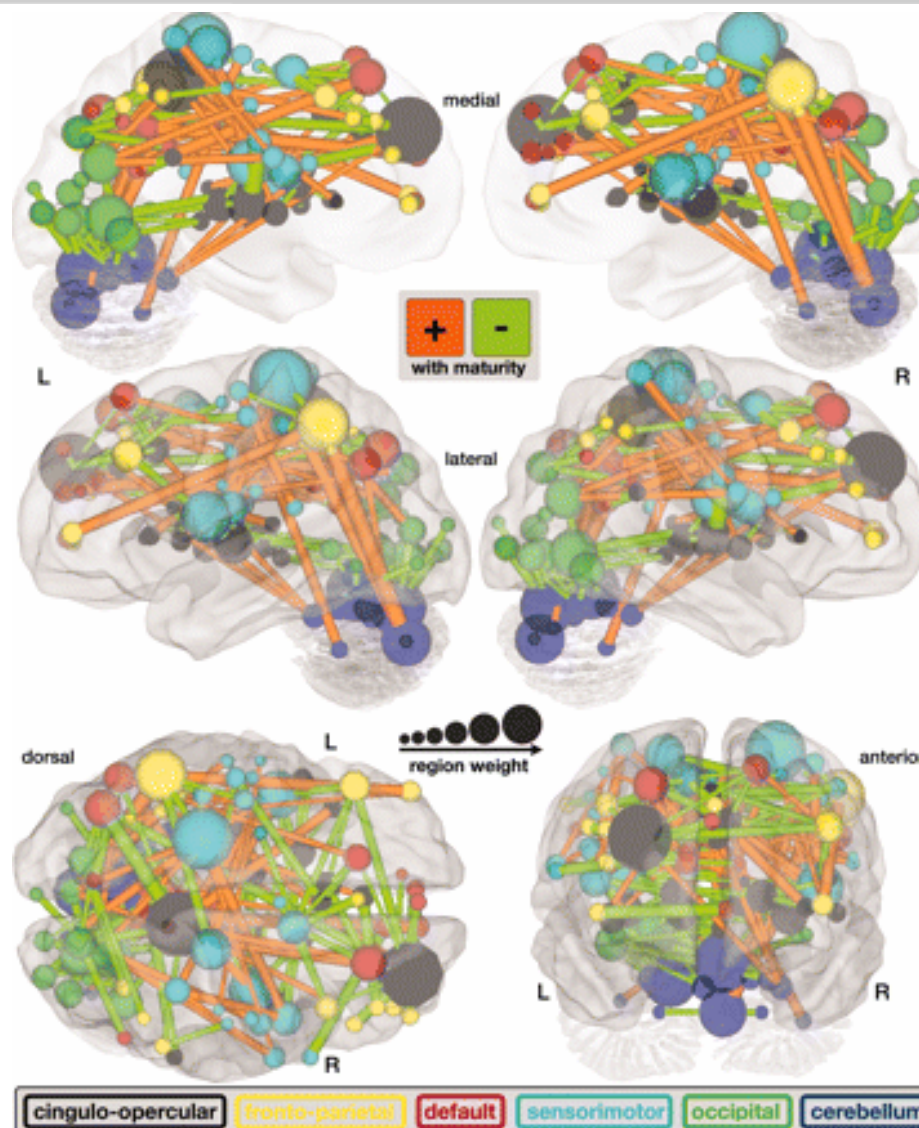
- MEG imaging, multimodality, simulation tools and multivariate and non-linear analysis for cognitive neuroscience and clinical neurology;
- Study of the brain connectivity and synchronization phenomena for cognitive neuroscience and clinical applications. Biomarkers for the early detection of dementia. Functional connectivity in AD and MCI
- Reorganization of functional connectivity as a correlate of recovery in acquired brain injury. Traumatic brain injury and stroke
- Study of emotions and depression
- Working memory and attentional process
- Advanced classification tools to aid decision making
- Source analysis. Inverse problem
- Advanced Technology for MRI-EEG studies with high temporal and spatial resolution. Application to Epilepsy

Laboratories:

- Cognitive and Computational Neuroscience
- Advanced Mathematics applied to Biomedicine
- Computational System Biology

Describing the Brain

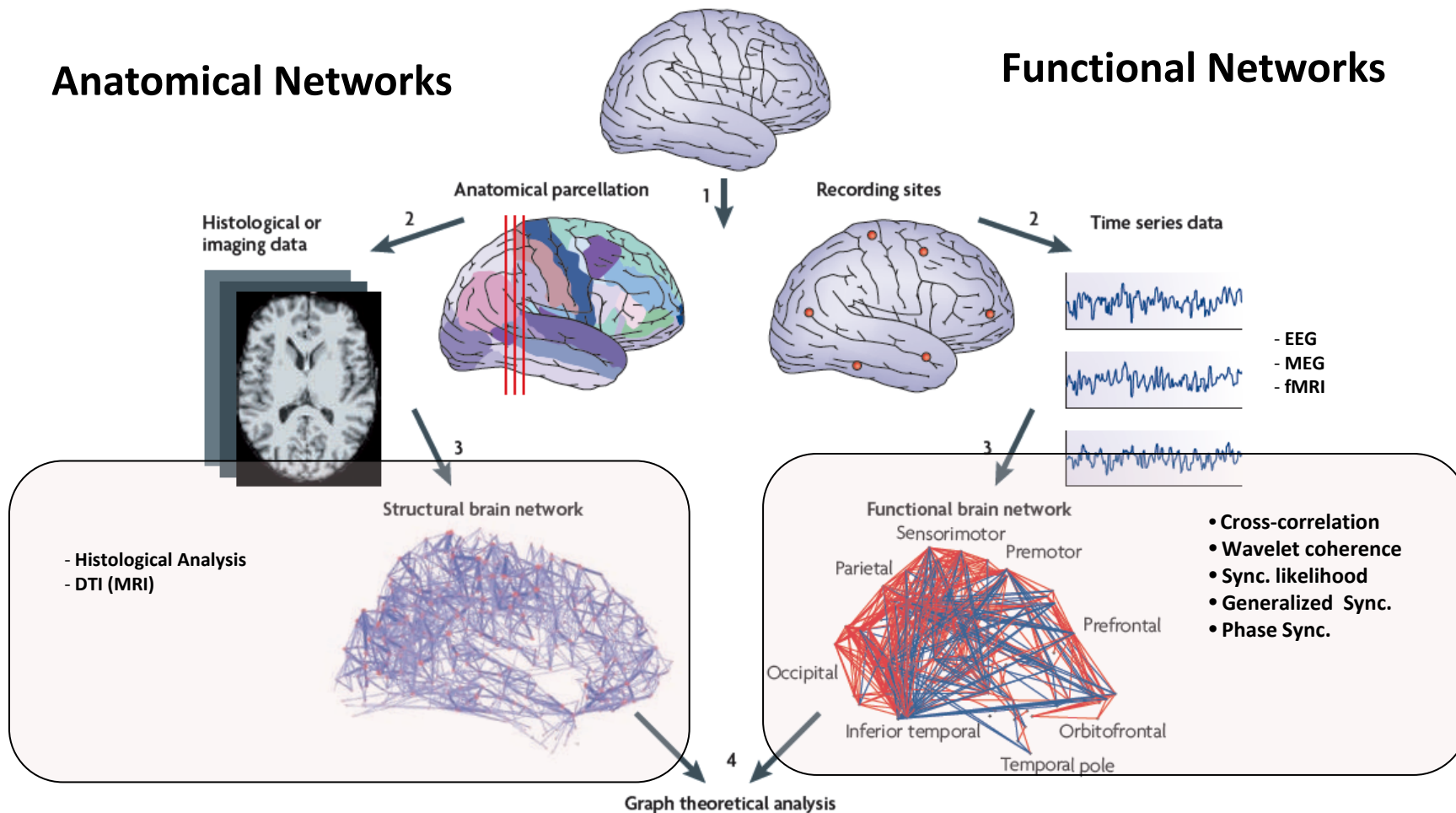
- Functional segregation
- Functional integration:
 - Functional connectivity
 - Effective communication



Describing Brain Connectivity

Anatomical Networks

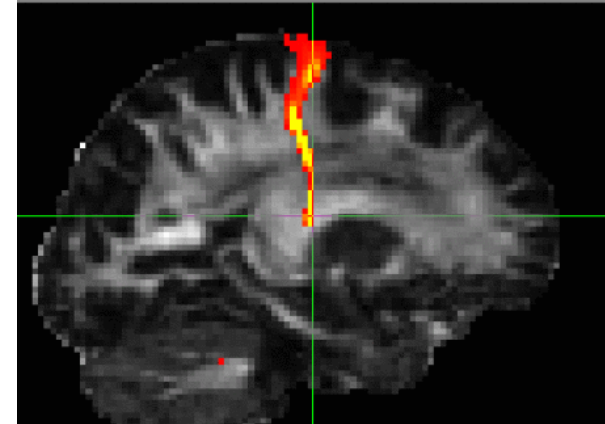
Functional Networks



From Bullmore & Sporns, Nature Rev. 10, 186 (2009)

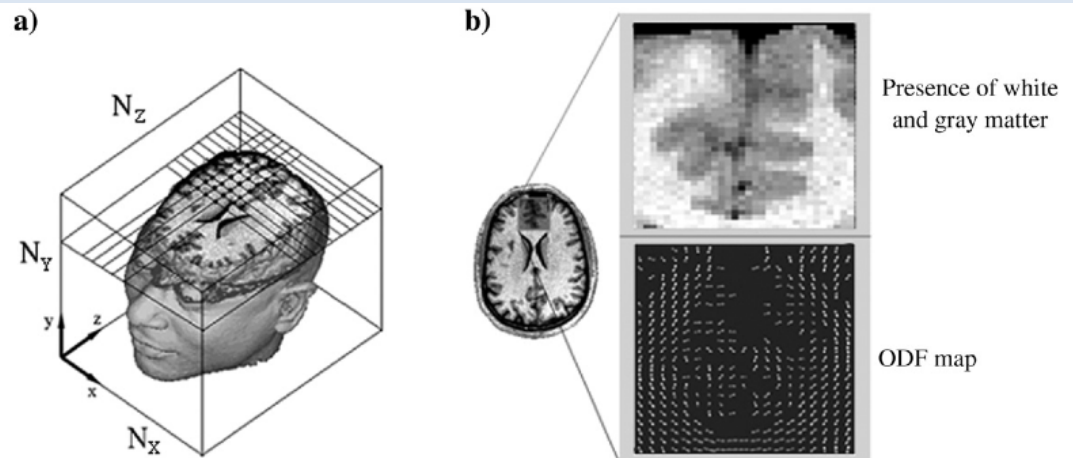
Structural Connectivity: Some Methods

Probabilistic tractography: indicates the probability that two nodes/voxels are connected by a brain tract.



Behrens et al. FMRIB Technical Report TR03TB1

Graph Theory can also be used to search for patterns of anatomical connectivity between regions of grey matter.



Iturria-Medina et al. NeuroImage 36 (2007) 645-660

Definition: Functional connectivity represents the statistical interdependence between two physiological signals, providing information on the functional interactions between different brain regions¹.

Note: long-range synchronization between signals has been proposed as the mechanism for communication and information integration in the brain².

fMRI

- PROs: Good spatial resolution
- CONs: Information is not directly related to neuronal activity
- CONs: Only very low frequency bands

EEG/MEG

- PROs: It covers a higher frequency range
- PROs: It measures neuronal activity in a direct form, through the measurement of electrical or magnetic fields.
- CONs: Solution of the reverse problem

¹ Bajo et al. Journal of Alzheimer's Disease 22 (2010) 183-193

² Fries et al. Trends Cogn Sci 9 (2005) 474-480

Functional Connectivity (fMRI)

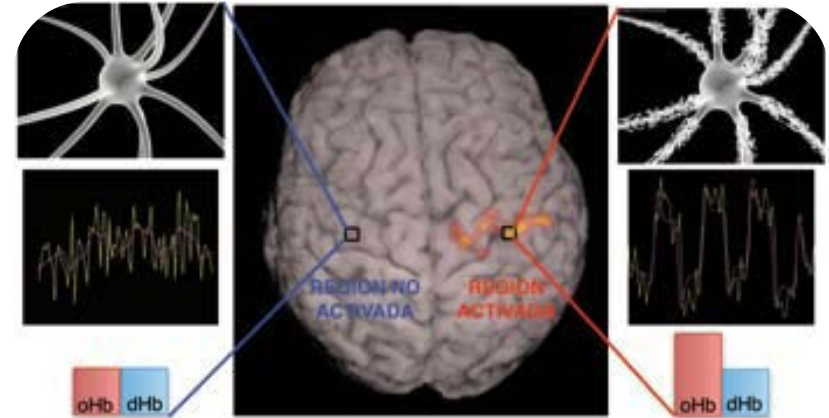
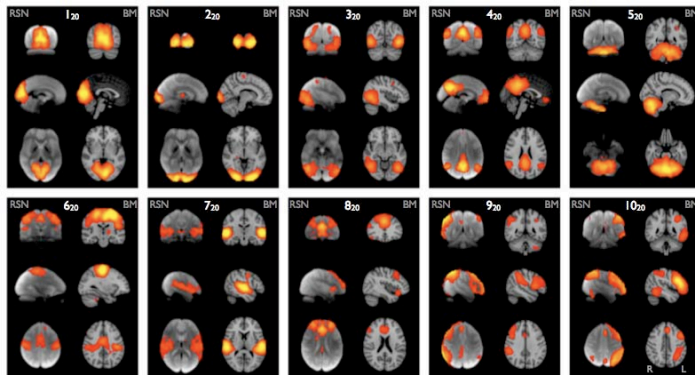
BOLD (Blood Oxygenation Level Dependent) contrast. Indirectly related to neuronal activity. Signal dependent on the blood level oxygenation.

Resting neuronal networks

Functional connectivity

Brain regions that work together in the absence of external stimulation

FMRI studies "resting - state" Spontaneous fluctuations in BOLD signal



Neuronal networks task evoked

Functional connectivity of brain regions that work together with a specific purpose

fMRI studies "task - evoked"
Changes in BOLD signal evoked by task

Related

² Smith et al., PNAS 106-31 (2009) 13040-13045

Signal-image integration

EEG/iEEG/MEG/BOLD

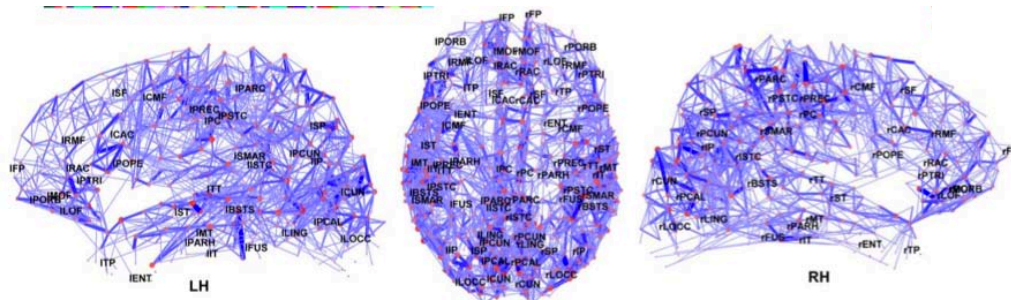


Search for statistical interdependencies (FC) between signals

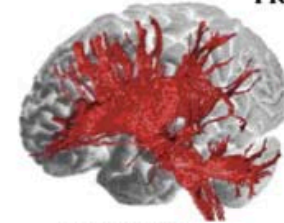
dMRI/SEM



Tracking algorithms. SC extraction



PROJECTION



Corona radiata

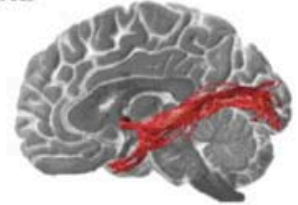


Fornix

COMMISSURAL



Corpus callosum



Anterior commissure

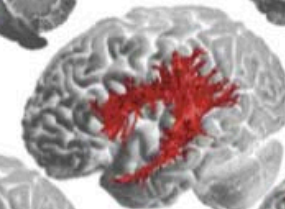
ASSOCIATION



Cingulum



Inferior longitudinal



Arcuate

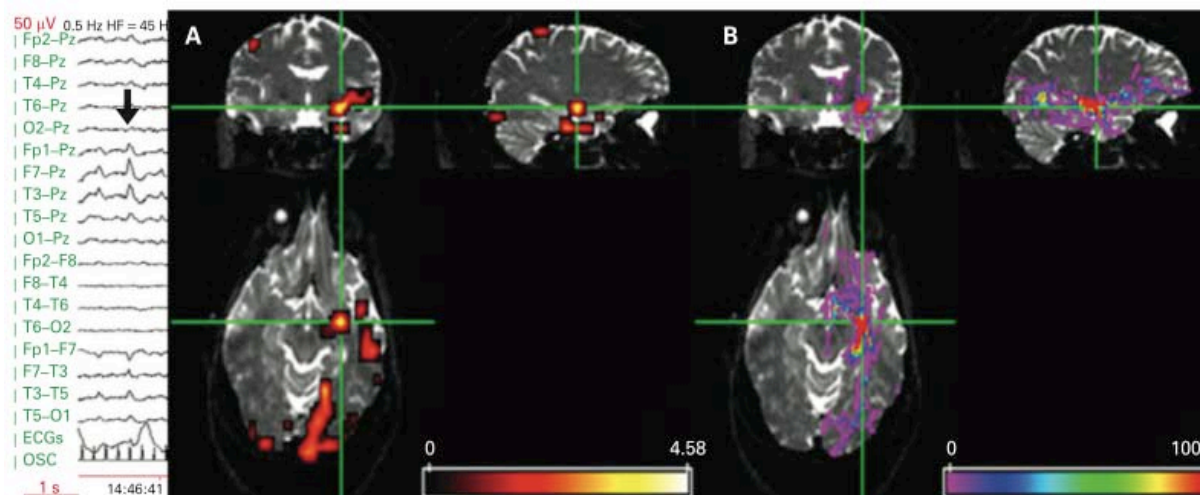
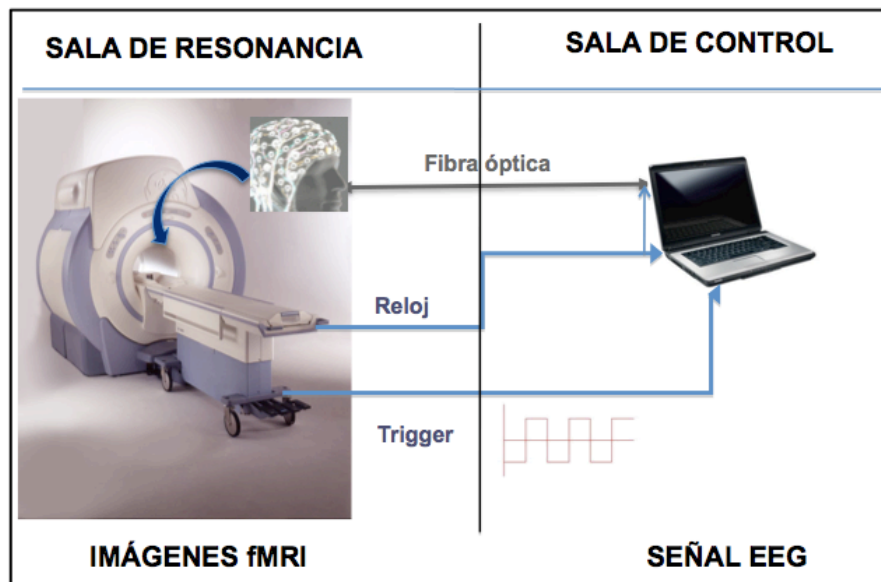


Uncinate



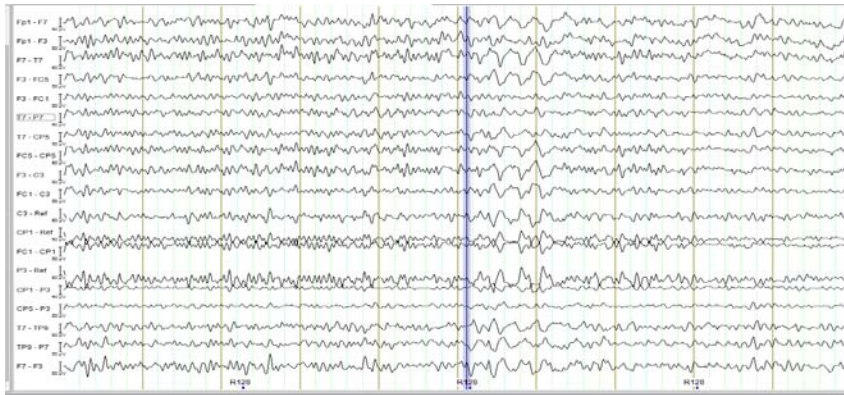
Inferior fronto-occipital

Functional Connectivity (MRI/EEG)

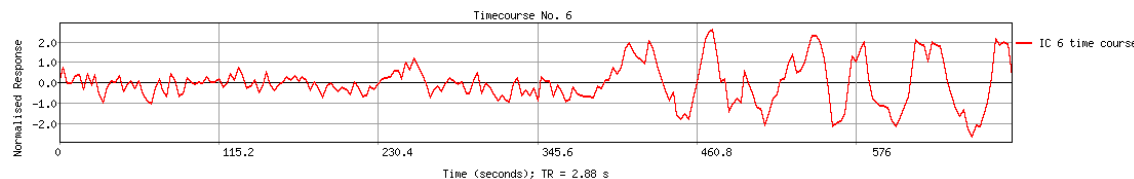
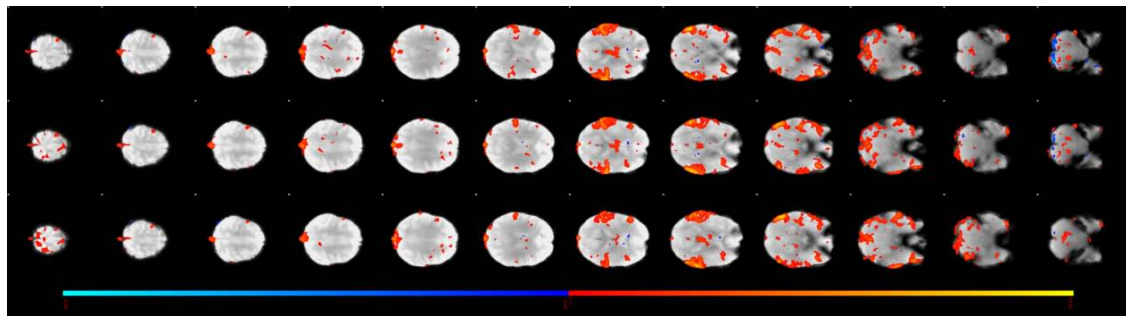


EEG/fMRI: resting state

Study Case: Epileptic patient (vision focus loss)

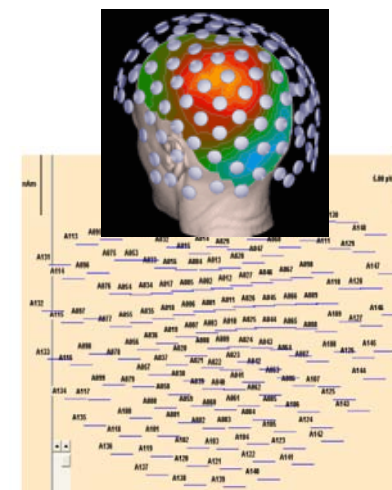
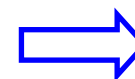
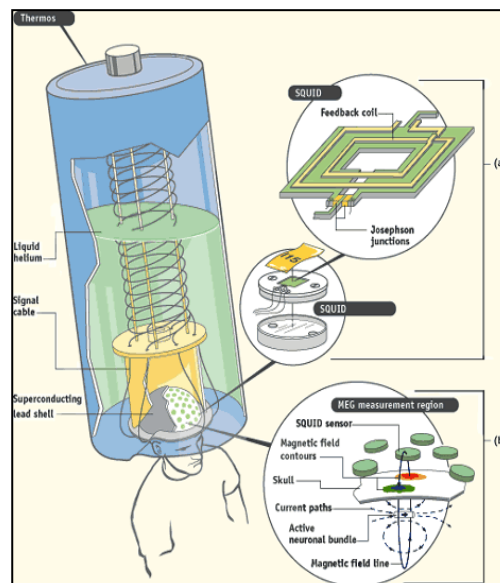
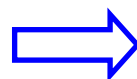


BETA abnormal activity (16 Hz) with eyes closed...



...network that does not appear synchronized while the patient remains with her eyes open.

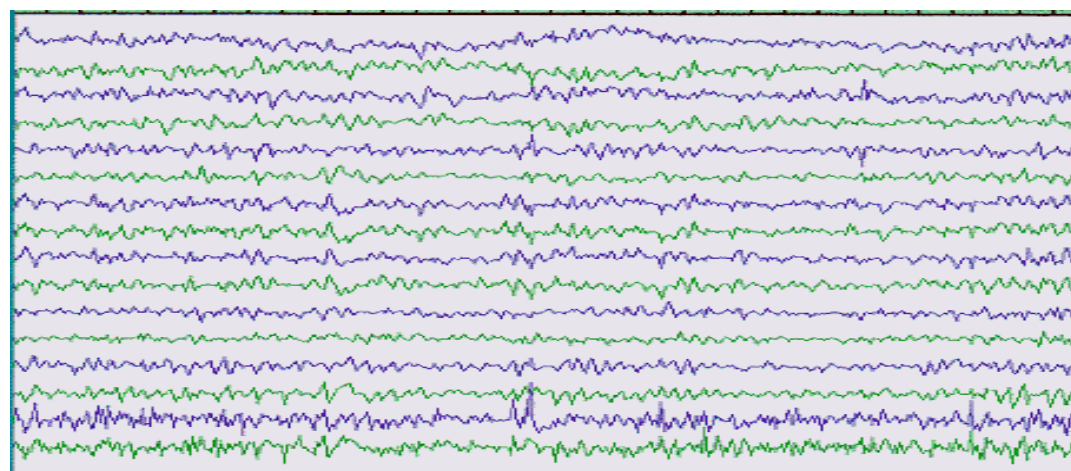
MEG recordings



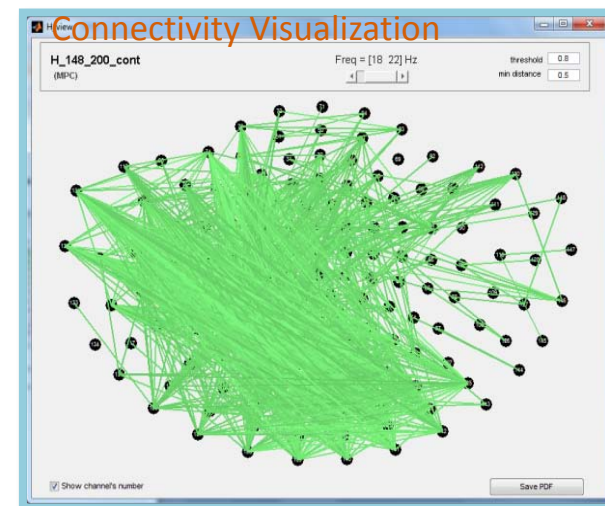
Channel #1

MAGNETIC
FIELD

Channel #340



TIME

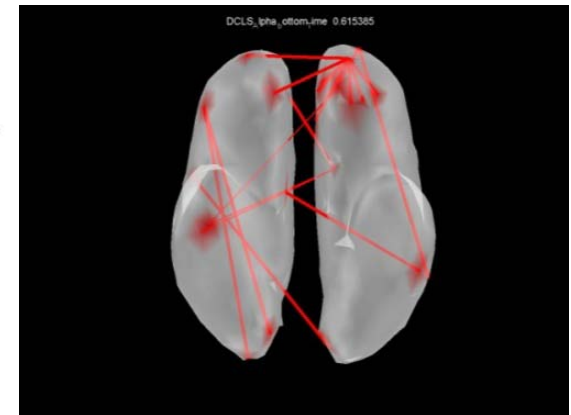
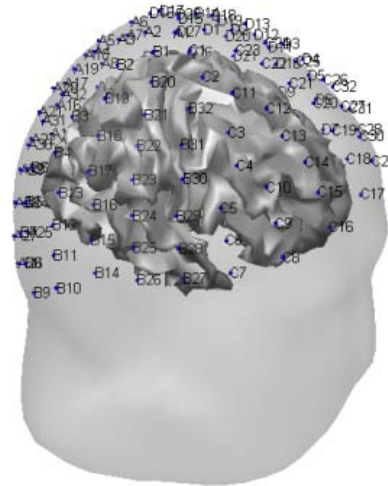
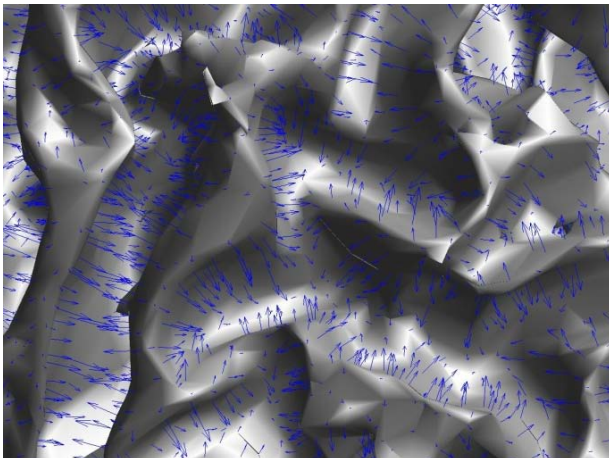


MEG: The Inverse Problem

Study of functional connectivity by synchronization parameters between singal pairs:
"Synchronization Likelyhood", "Phase Locking Values"

In sensor space:

- 306 sensors
- Magnetometers and Gradiometers
- Problems in integration with structural connectivity as they are different spaces



It will be necessary to work in the source space to integrate functional connectivity by MEG

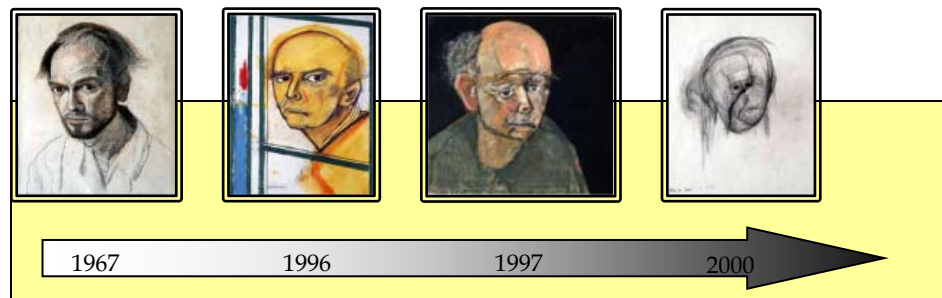
- Around 7000 dipoles, clustering required
- Solution Uniqueness compromised

Alzheimer's Disease

William Utermohlen: a painter diagnosed AD in 1995, who decided to use his work to reflect the steady progression of his mental deterioration

Normal

Memory complaints with normal scores on neuropsychological test: no medical evidence of disease



MCI: Mild cognitive impairment

Alzheimer's disease

Cognitive Continuum



AD Burning Question: Who will develop AD

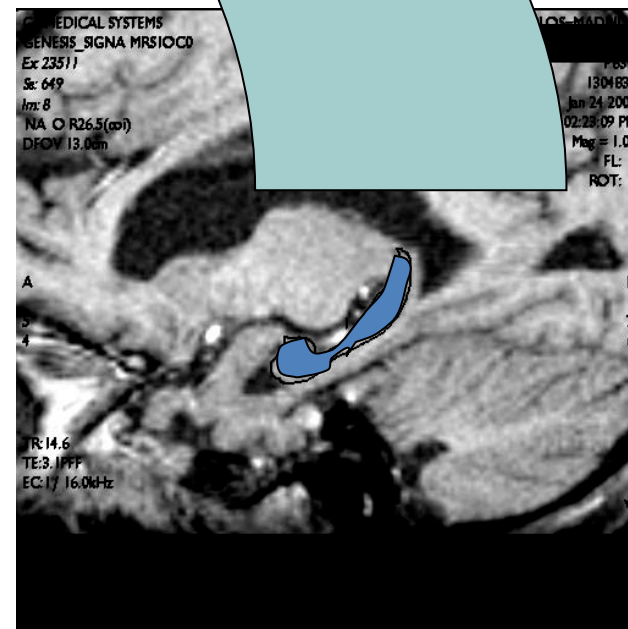
MCI subjects are at higher risk of developing dementia: **10-15% per year**, 2-3% healthy elders

Looking back to the biomagnetic profiles of those patients that develop or not dementia



Predict the progression to dementia

AD



2'5 years



Biosignal analysis: Functional connectivity

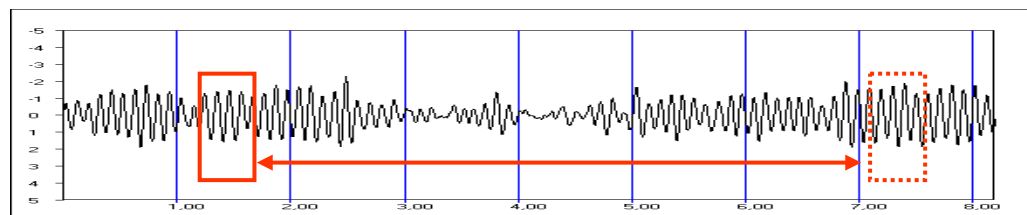
Many options for time-series analysis and dimensionality reduction (classification)

a) Linear algorithms

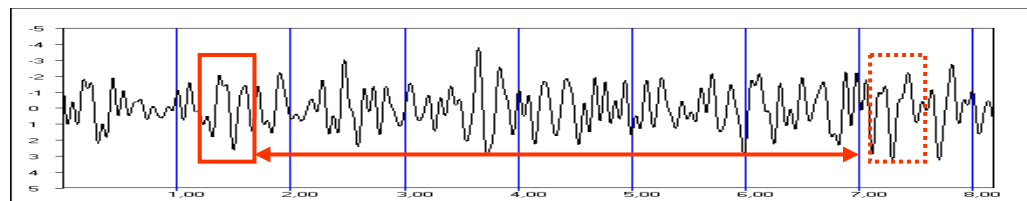
- Correlation
- Covariance
- Coherence

b) Non linear algorithms: Information based

- Mutual information
- Transfer Entropy



(*) Synchronization Likelihood
 Stam & van Dijk, 2002

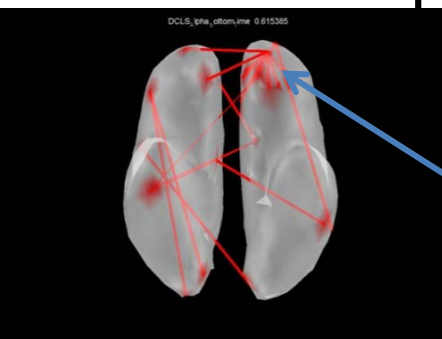


c) Non linear algorithms: Generalized Synchronization

- Mutual prediction
- Synchronization Likelihood (*)

d) Non linear algorithms: Phase Synchronization

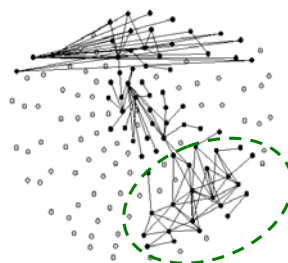
- Phase coherence
- Phase Lag Index



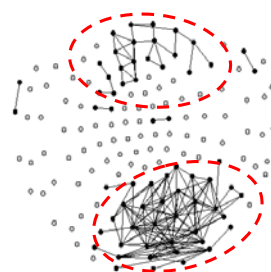
MCI-AD: Synchronization Analysis → BioMarkers

Alpha1 band

MCI develop AD > Control group

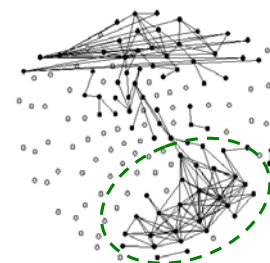


MCI develop AD > MCI no develop AD

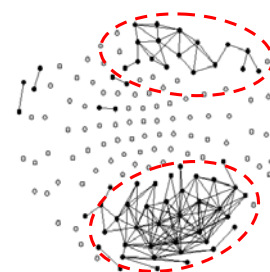


Alpha2 band

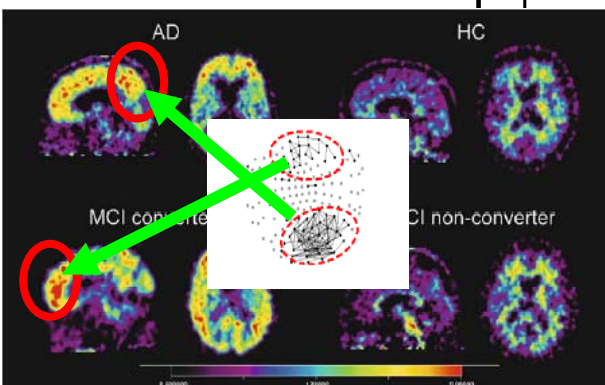
MCI develop AD > Control group



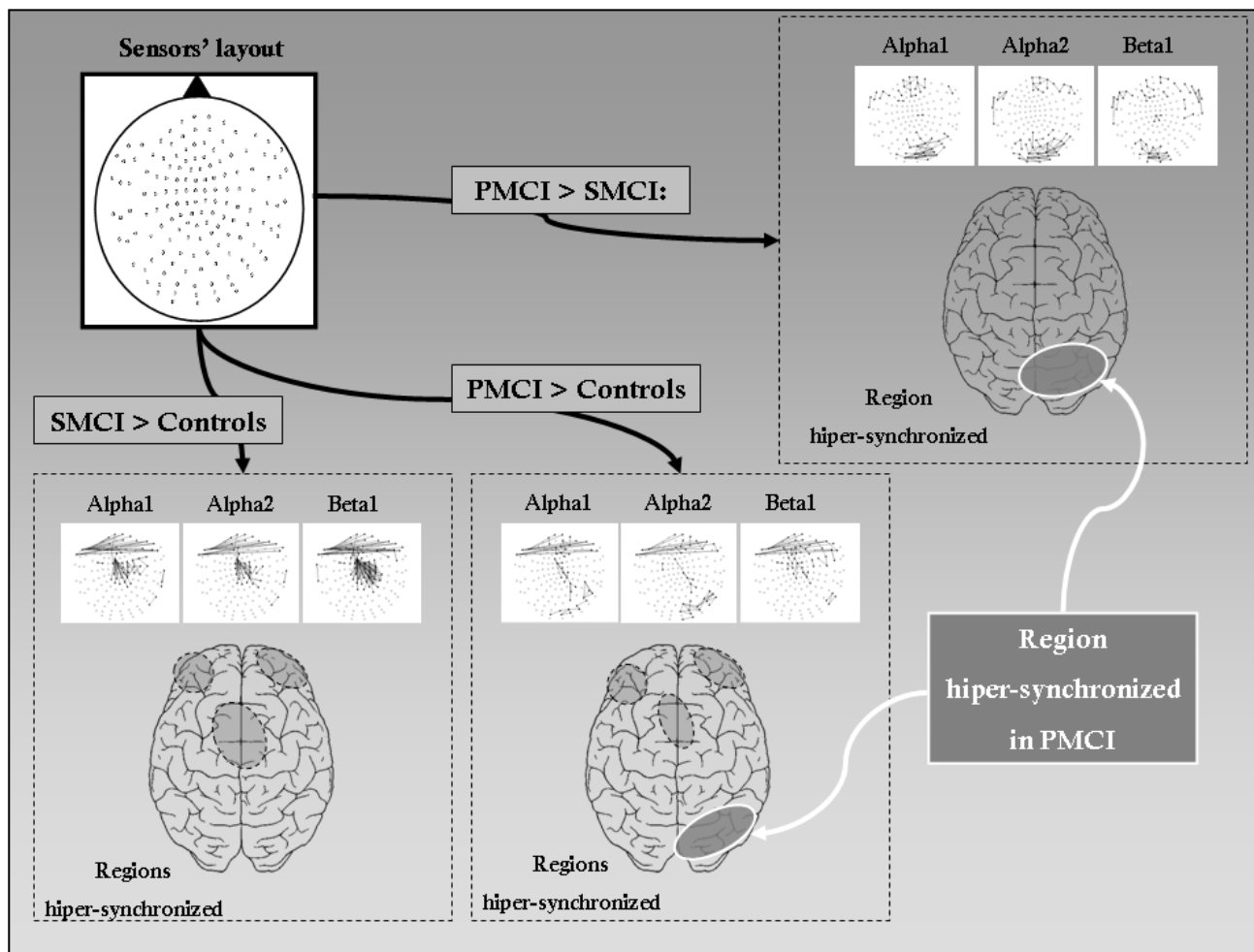
MCI develop AD > MCI no develop AD



Differentiate between MCI and controls describing profiles of those MCI that develop dementia



Alzheimer disease: Biomarkers (SMC)



* Bajo et al., 2011, under review

Cognitive recovery in acquired brain injury

Trauma recovering therapy

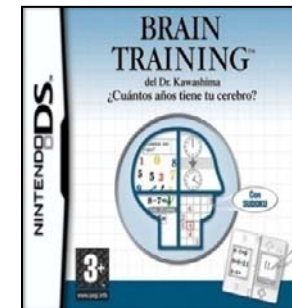
Accident



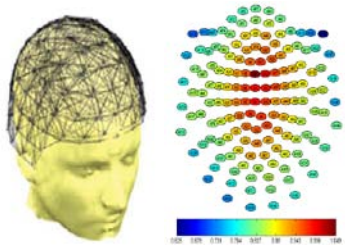
Head Trauma



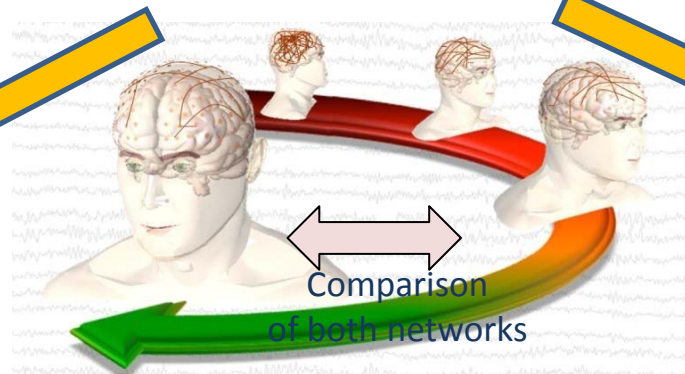
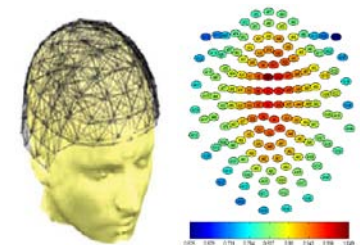
Cognitive Therapy



MEG recording
(after the accident)



MEG recording
(9-14 months of therapy)

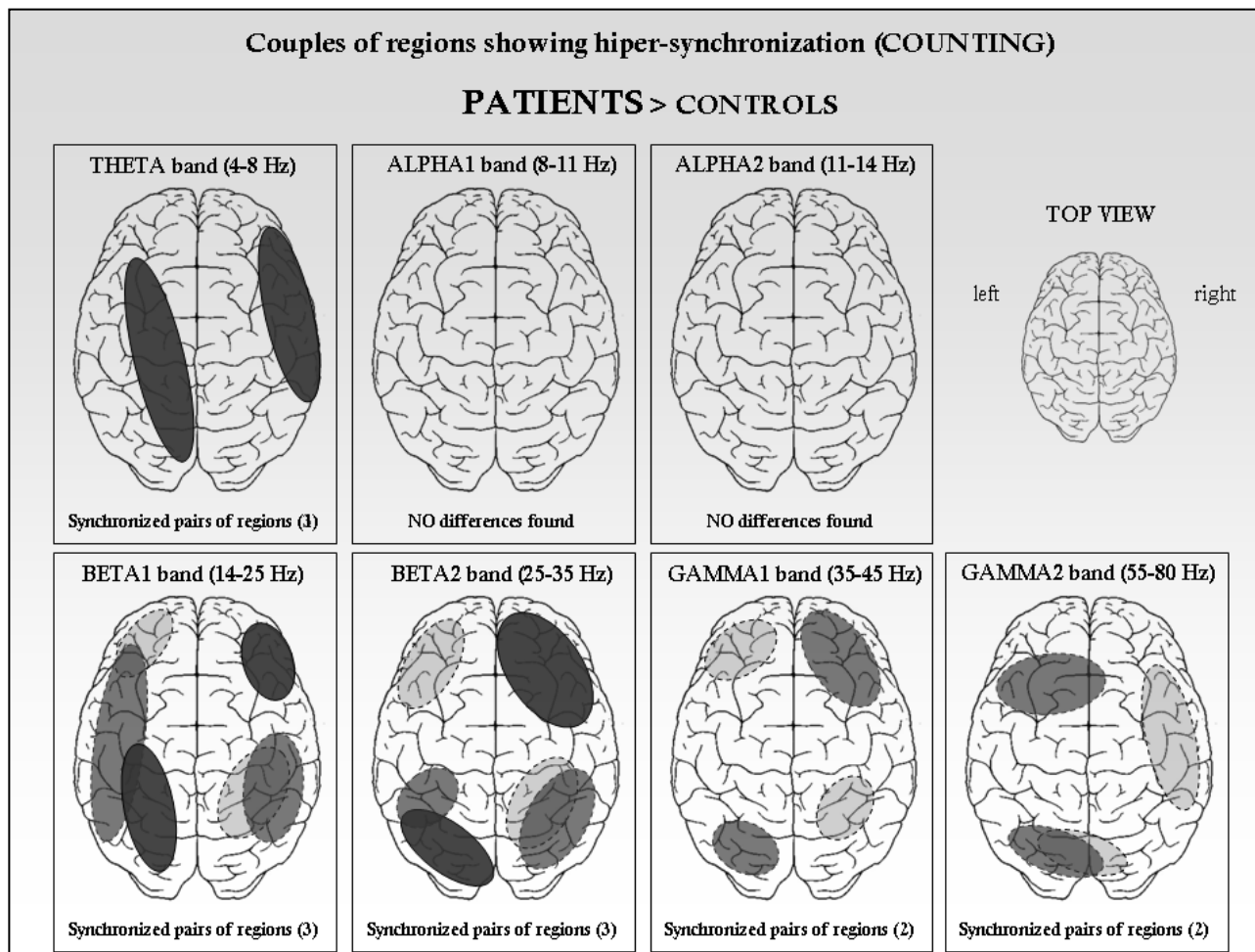


Abnormal synchrony could be one of the causes of the cognitive dysfunction

Correlation between abnormal synchronization and cognitive deficits

Funct. Connectivity biomarkers: Many other applications

* EEG- drug-dependencies effects . *Centro Terapéutico Barajas . Ayto. Madrid*



Target: Multimodal approach to human memory formation in health and disease

Detailed description:

Medial temporal lobe epilepsy

Clinical Neuroscience. Post-traumatic stress disorder (PTSD)

Laboratories:

Clinical Neuroscience

Target: Design of new technologies based sensors and medical devices.

- Biosensors based on nanoparticles for early diagnosis of bacterial diseases and contamination (food, environment).
- New sensors and instruments to measure physiologic variables (glucaemia, vascular pressure, etc.)
- Developing of methodologies for the detection and identification of nanoparticles non-intentional contaminants in humans tissues and the environment.

Laboratories:

Bioinstrumentation

Nanotechnology

Advanced Mathematics applied to Biomedicine

Target: Design and manufacture of biocompatible and stable nanostructures for RMI contrast agents for in vivo early diagnosis of Alzheimer disease, labeling of human neural precursor cells for cellular therapies, and tumor hyperthermia based therapies and drug delivery.

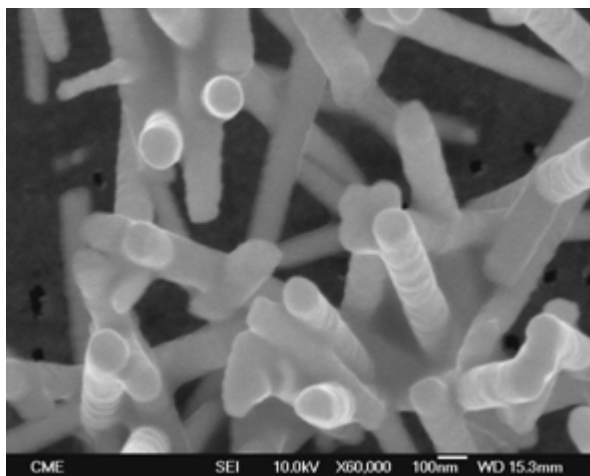
Detailed description

- Design and development of nanostructures, biocompatible and stable in the biological media and their physical and biological characterization
- Development of selective markers, contrast agents, for RMI and MEG. Molecular imaging technology for Alzheimer Disease: Magnetic nanomarkers for in vivo early diagnosis and progression of AD
- Labeling of human neural precursor cells with MNPs for in vivo cell tracking to be used in cellular therapies against neurodegenerative disease (i.e. Parkinson disease)
- Development of nanomarkers for early tumor therapy and diagnosis. Design and fabrication of nanostructures and the supporting instrumentation for hyperthermia and drug delivery applications
- Development of devices based on the guidance and focusing of MNPs for new therapies.

Laboratories:

- Bioinstrumentation and nanotechnology
- Molecular Biology and Biochemistry
- Bioelectromagnetism

Electrodeposition: Biocompatible Nanostructures

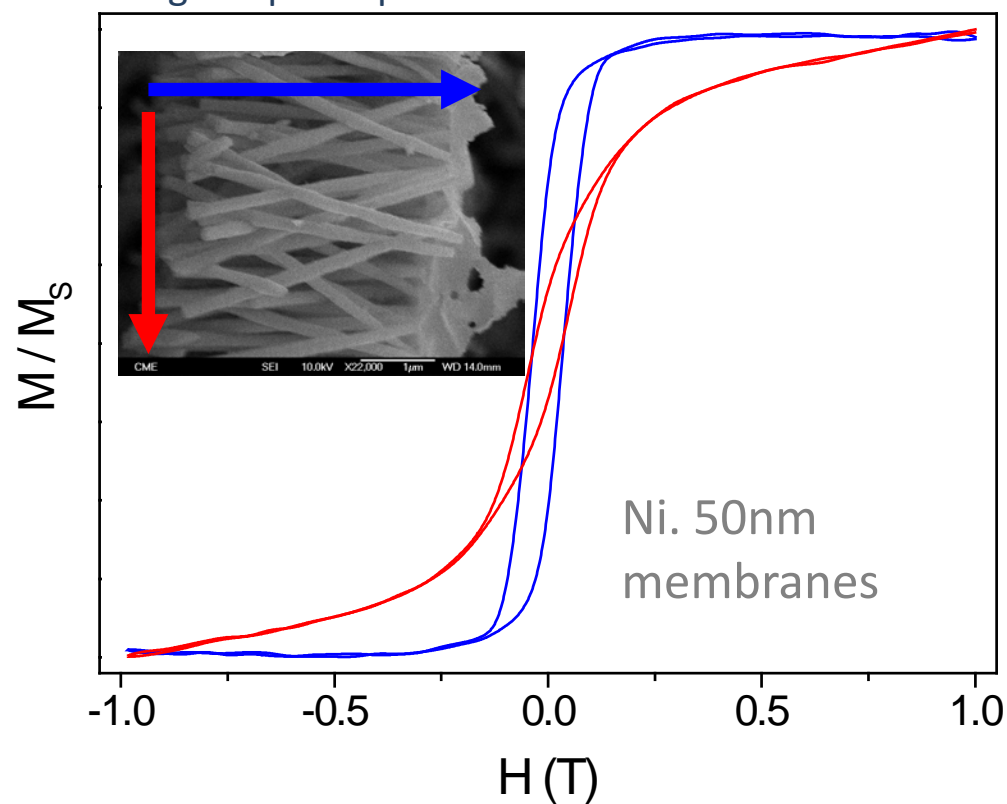


Co. 50nm membranes

Fe, Co, Ni, CoFe, CoNiFe

Diameter: 10,30,50 y 100nm

Length: up to 4 µm



Physical and biological characterization of nanostructures, and nanoconjugates

cíber-66n

**Centro Investigación Biomédica en Red
Bioingeniería, Biomateriales y Nanomedicina**



T1 and T2 Nuclear Magnetic Resonance
Relaxometry (Stelar SmarTRACER + Bruker 2
T electromagnet)

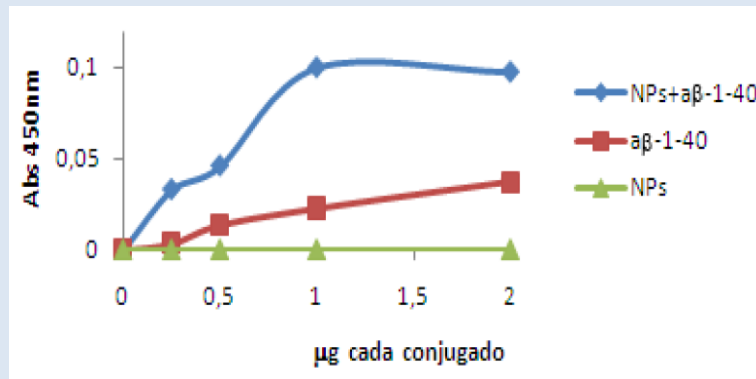


Alternating Gradient Magnetometer:
MicroMag, M²900-4 AGM (Princeton
Measurements Corporation)

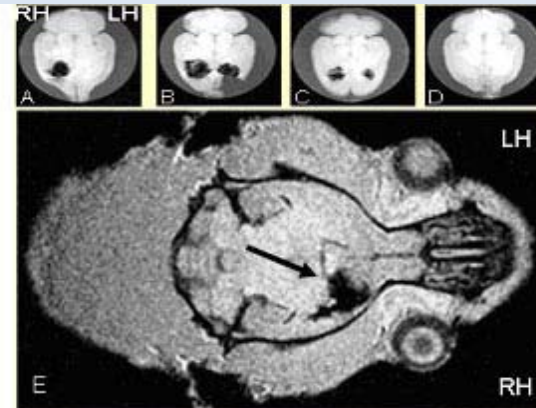
CIBER-bbn www.ciber-bbn.es

Development of selective contrast agents (RMI). Molecular Imaging Technology for Alzheimer Disease

Different peptides have been conjugated with the magnetic nanoparticles to achieve a specific marker of the amyloid plaque. *in vitro* tests to evaluate the specific binding, affinity and toxicity of the conjugates.



Results obtained by an ELISA test carried out in P96 wells that have been previously treated with 1 µg of αβ1-42 peptide. The nanoconjugate NP-αβ shows an even higher affinity to bind to αβ1-42 than the αβ peptide alone. Interestingly NPs alone do not show any affinity to binding to αβ1-42.

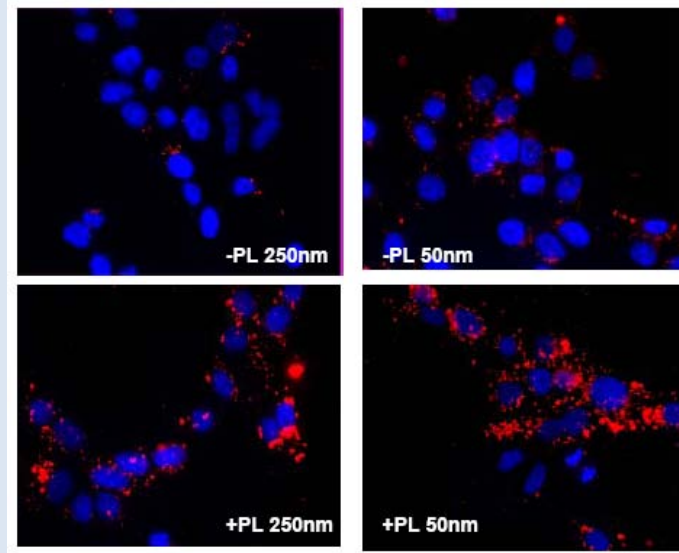


Dextran coated magnetic nanoparticles (MNPs) can be detected efficiently by MRI in *ex vivo* and *in vivo* brains.

Challenges: highly stable *in vivo*; cross the Blood - Brain Barrier (BBB) non-destructively following intravenous injection; bind specifically to plaques with high affinity and produce local changes in tissue contrast detectable by MRI. Animal models: transgenic mice for AD (5xFAD)

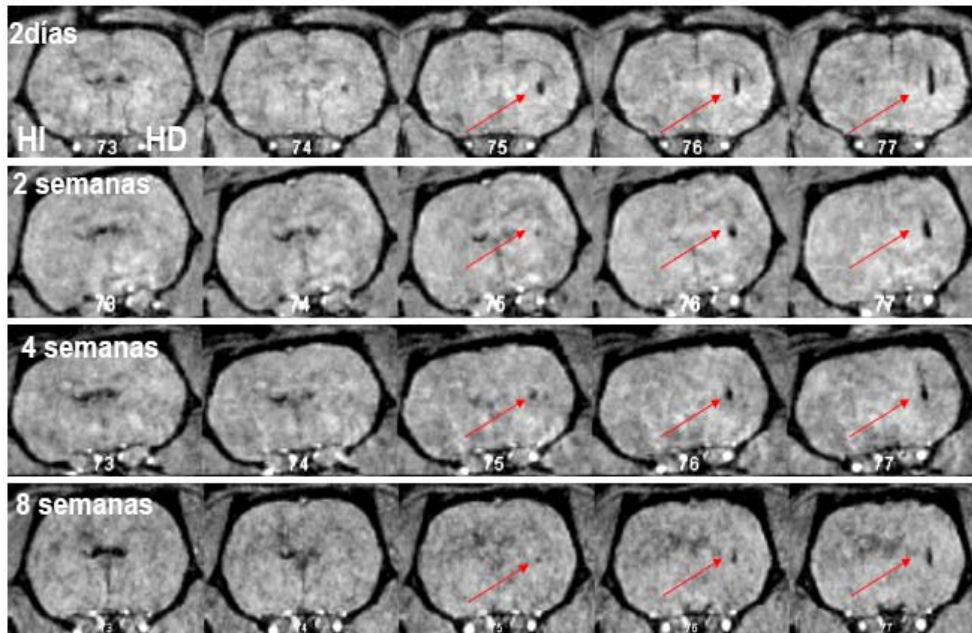
MNP Labeling human neural precursor cells for *in-vivo* cell tracking in cellular therapies against neurodegenerative disease (i.e. Parkinson disease)

Replacing damaged or lost neural cells by transplanting *in vitro*-expanded neural precursor cells (NPCs). MR images indicate the specific place where the transplanted cells are located. PET images will show the maturation and functional state of the transplanted cells, previously labeled with MNPs. The mature and functional cells can replace dopaminergic neuron loss during the progress of Parkinson's disease.

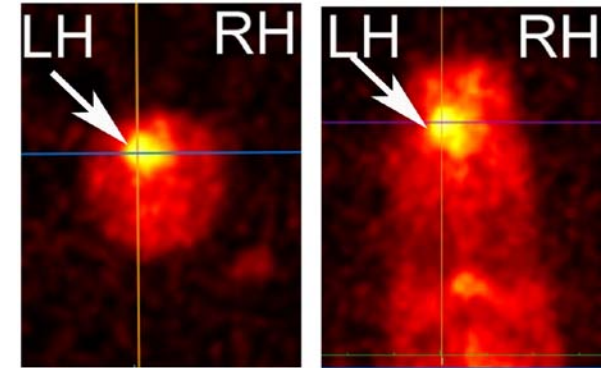


Uptake of MNPs by hNPCs. Protocol developed to label human NPCs using poli-Lysine to improve the internalization of the MNPs by human precursor cells.

MNP Labeling human neural precursor cells for in-vivo cell tracking in cellular therapies against neurodegenerative disease (i.e. Parkinson disease)



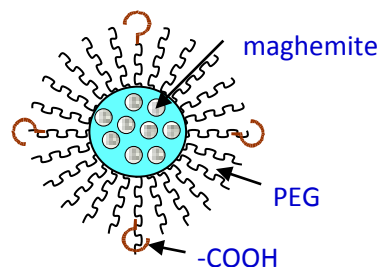
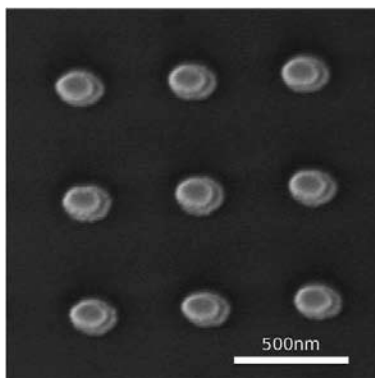
MRI Studies. MNPs-labeled hNPCs stereo-tactically injected into the rat's brain. MNPs-labeled cells were resuspended, washed and transplanted into the right caudate putamen brain. For MR detection 400,000 cells were transplanted into the right striatum. *In vivo* longitudinal MRI studies were carried out using a 4,7T MR scanner. The MNPs-labeled cells (red-arrow) can be reliably detected by MR from early points in time (2 days) to 8 weeks after transplantation.



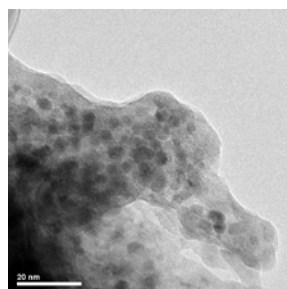
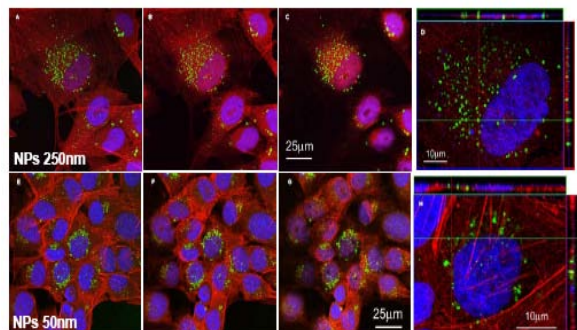
PET studies. Representative summary images (coronal and transversal planes) of studies carried out on the same animal with ^{11}C -DTBZ. The arrows indicate the uptake of ^{11}C -DTBZ by the healthy left striatum (Left hemisphere, LH), no signal is detected in the right lesioned striatum (right hemisphere, RH) demonstrating the validity of this technique to visualize the dopaminergic innervations.

Nanotechnology: Magnetic Hyperthermia

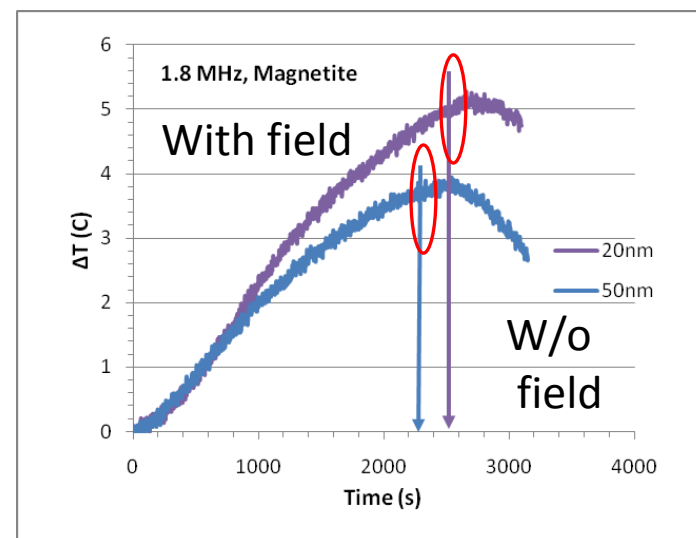
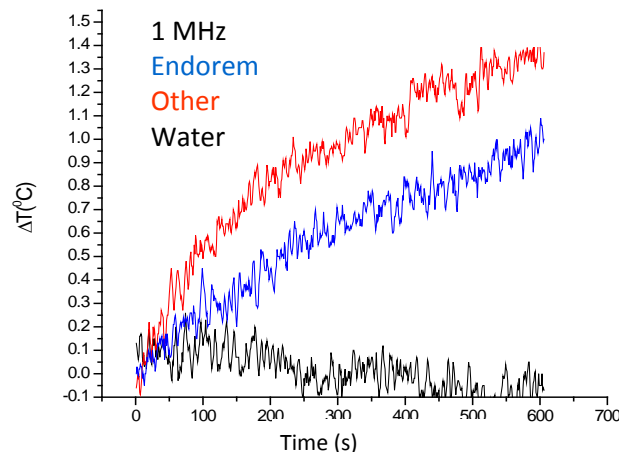
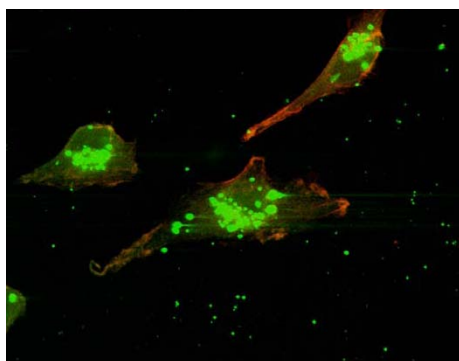
Bilayer
Iron
MNP's



Dh = 70 nm



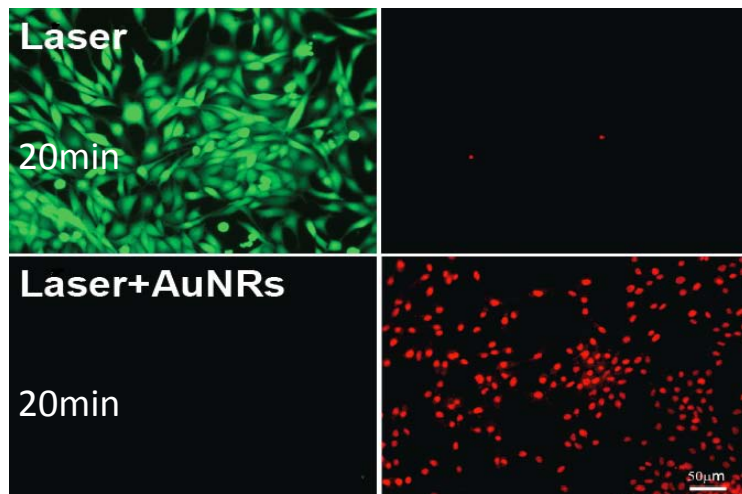
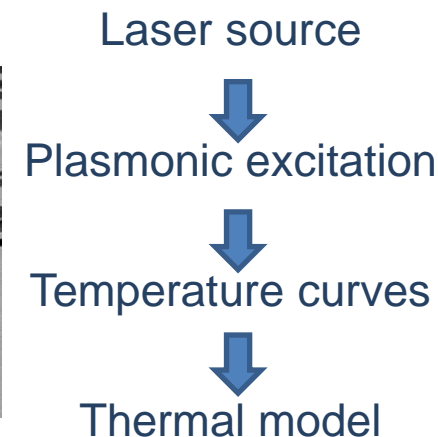
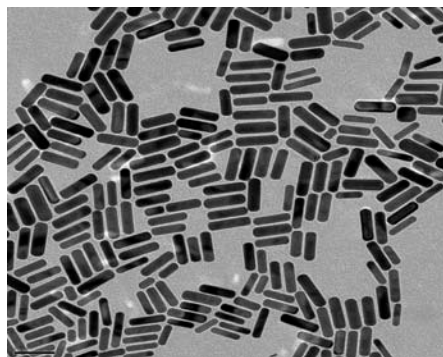
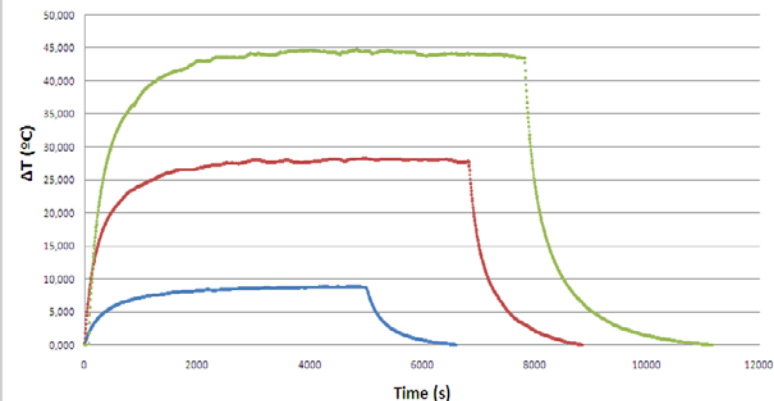
U87 (human
glioblastoma) + NPs
Fe₃O₄-Dextran-Av-FITC
ø 250nm



NANOHYPERTHERMIA: Optic and Magnetic

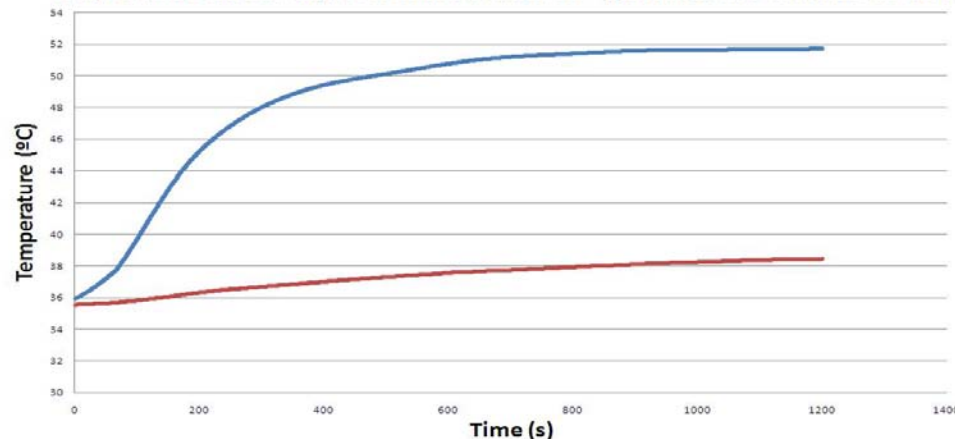
Nanotechnology: Optical Hyperthermia

Thermal characterization curves: gold nanorods warming



IP/Calcein assay in samples of glioblastoma cell lines and GNRs 24 h after the irradiation (alive cells: green-left, dead cells: red-right)

Temperature curves: hyperthermia treatment - glioblastoma cell lines 1321N1



Temperature curves in the culture medium of glioblastoma cell lines irradiated with the laser source (Blue curve: cells + GNRs + laser, red curve: cells + laser)

Ramón y Cajal Blue Brain Project

Target: Study of the brain cortex microrganization and the alterations of cortical circuits in Alzheimer disease.

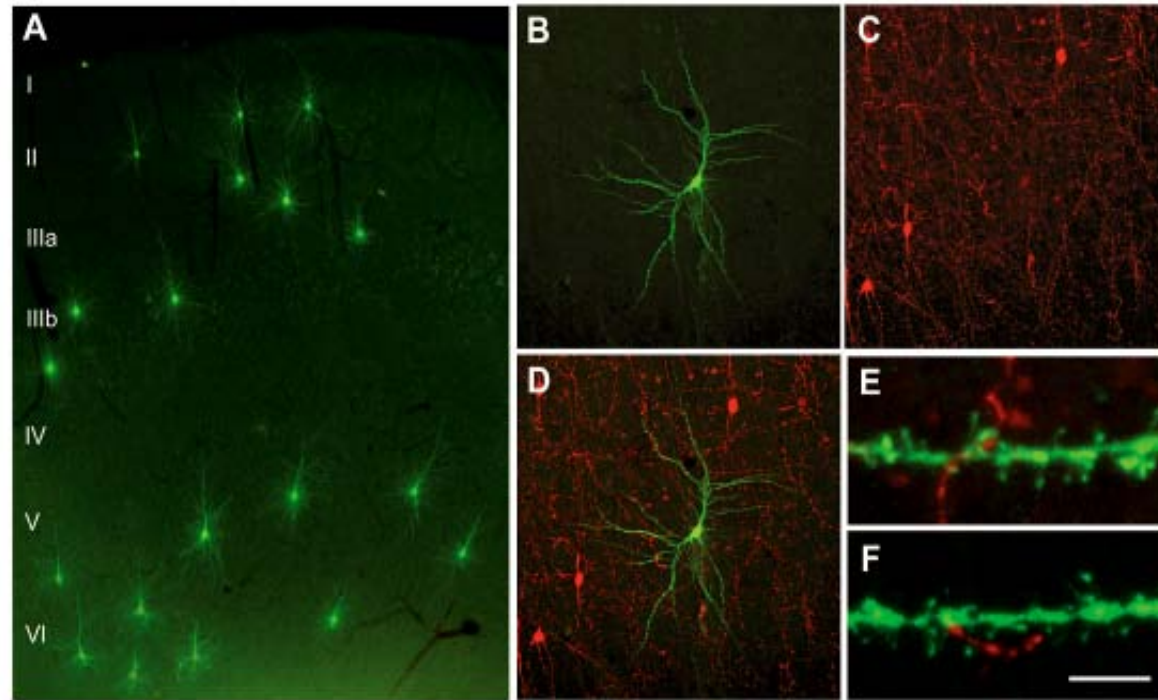
Detailed description

- Study of the structural and functional microrganization of the cortical column as the building block of the cerebral cortex
- Study of the alterations of cortical circuits in Alzheimer disease

Laboratories:

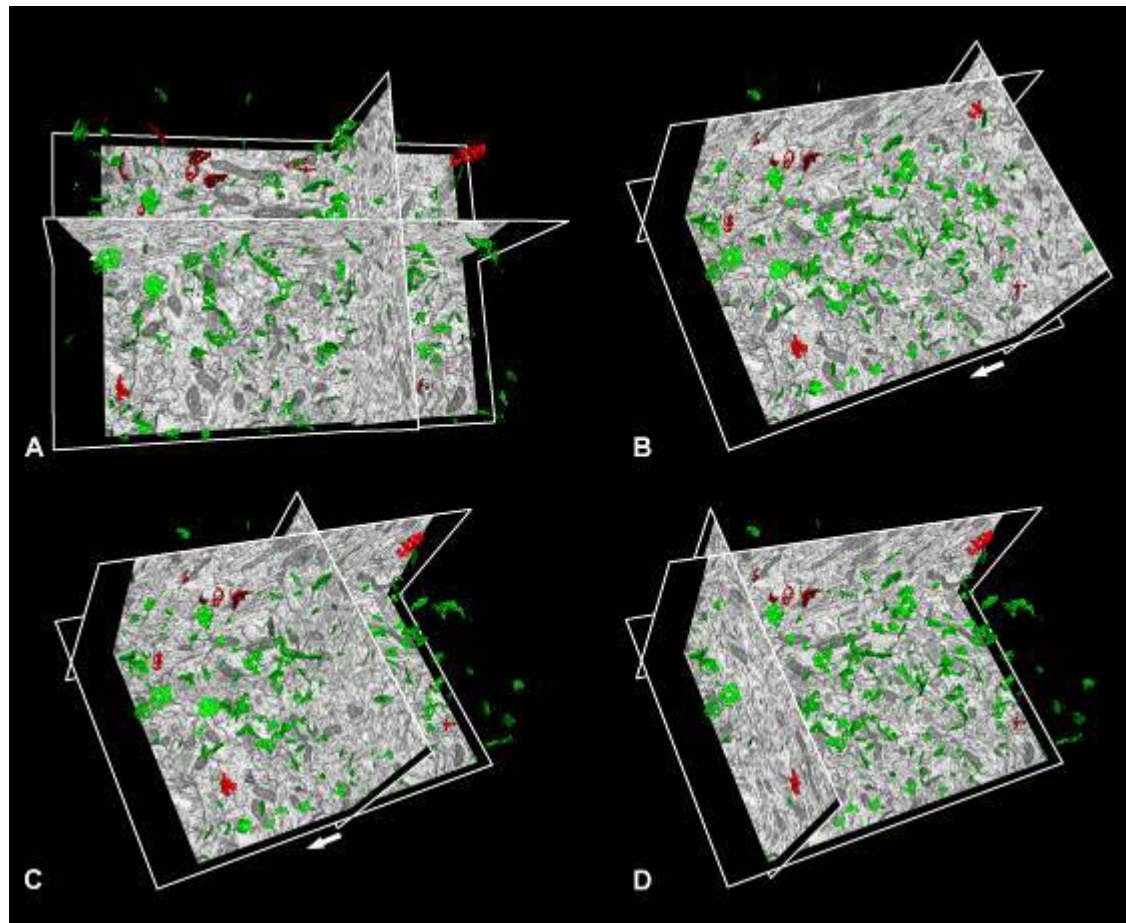
- Blue Brain
- Cognitive and Computational Neuroscience
- Advanced Mathematics applied to Biomedicine
- MIDAS

Brain cortex microrganization: Ramon y Cajal Blue Brain Project



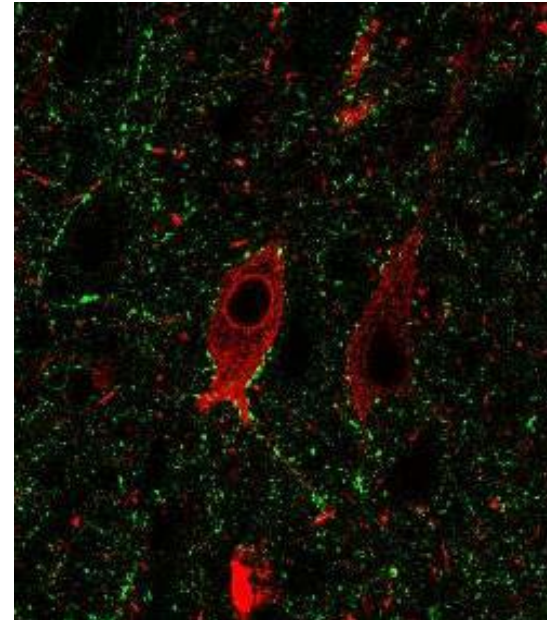
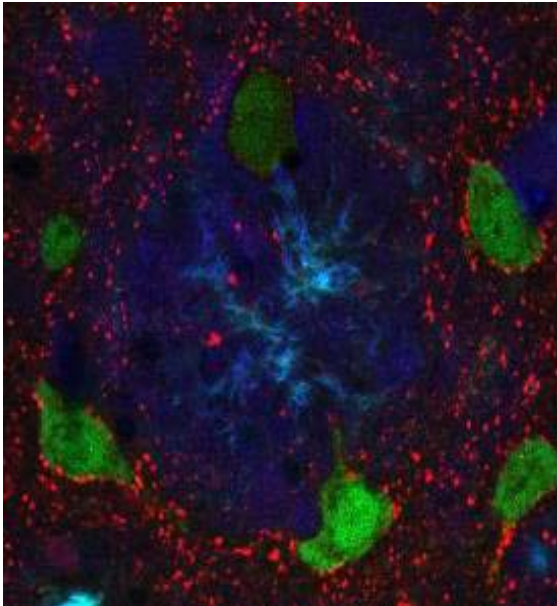
Confocal microscopy images of pyramidal cells in different layers of the human temporal cortex innervated by catecholaminergic fibers (immunocytochemical labeling with antibodies against tyrosine hydroxylase; TH). The pyramidal cells in paraformaldehyde fixed tissue were intracellularly injected with Lucifer yellow, which diffuses throughout the neuron as a result of the direct negative current applied, allowing us to visualize the morphology of the entire cell, including the dendritic spines. *A*, Panoramic view obtained by confocal microscopy showing pyramidal cells in different layers of the cortex. *B*, *C*, Higher magnification confocal microscopy images from layer VI of the same section and field, showing an injected pyramidal cell (*B*), and TH-positive neurons and fibers (*C*). *D*, when merged, both images (*B* and *C*) show the localization of TH-positive axons with respect to the pyramidal cell. *E*, *F*, higher magnifications of sections in panel *D* showing the possible contacts between TH-positive axons and dendritic spines (*E*), or the dendritic shaft (*F*) of the pyramidal cell labeled with Lucifer yellow.

Brain cortex microrganization. Ramon y Cajal Blue Brain Project



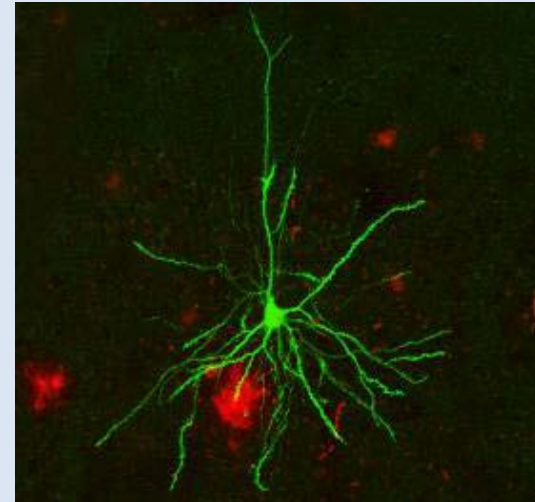
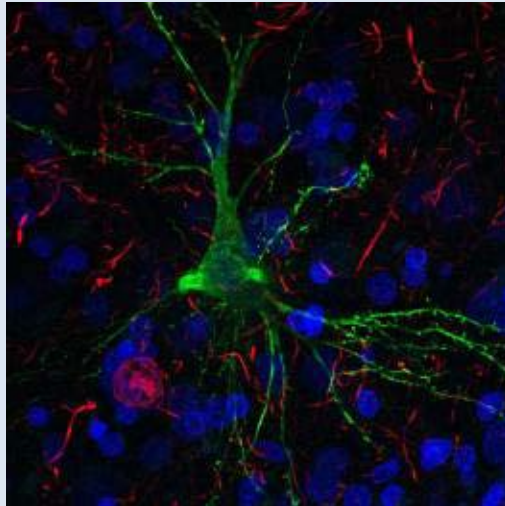
Three-dimensional visualization of synaptic densities within a tissue block reconstructed from a series of images obtained by (FIB/SEM). The segmented asymmetric synapses are represented in green and the symmetric synapses in red. Images A to D show different ways to rotate the virtual tissue block in 3D and different positions of the perpendicular planes of the section. In this respect, every synapse present within the sample can be visualized and located.

Study of the alterations of cortical circuits in Alzheimer disease



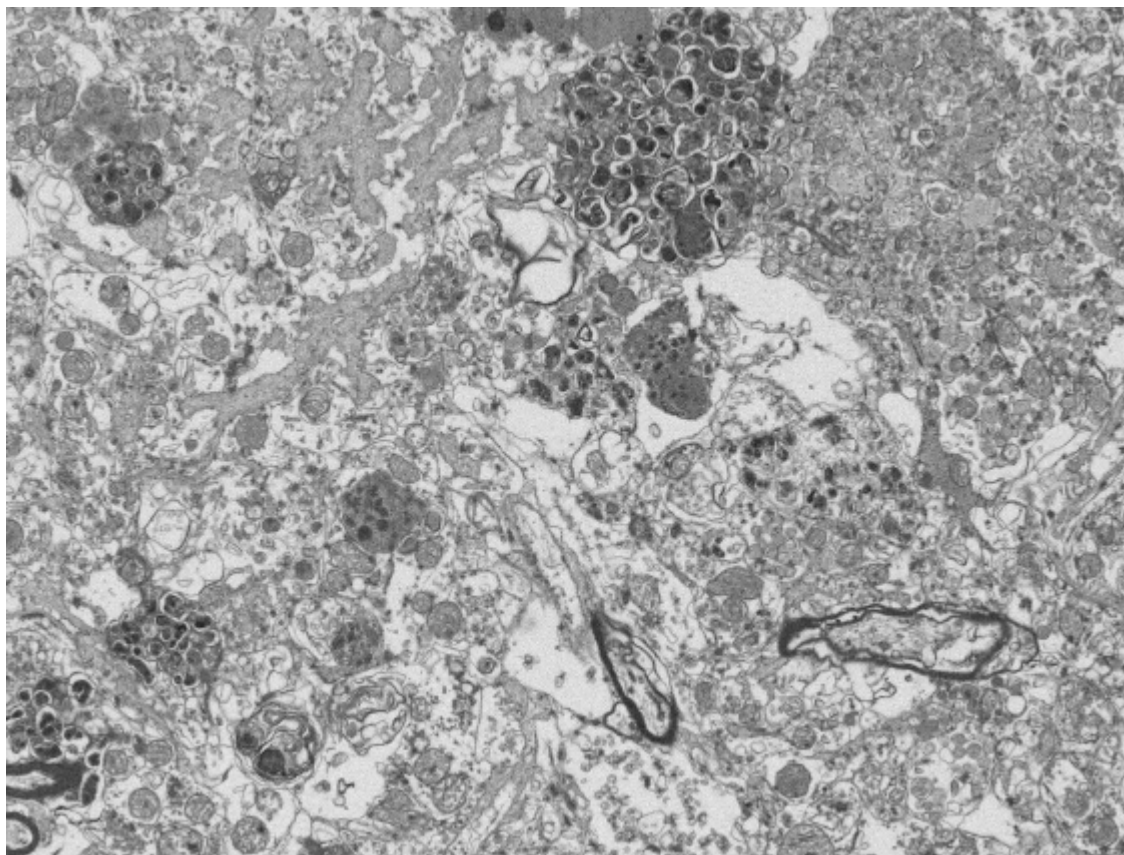
The human cerebral cortex triple stained (left) to study the relationship between plaques (thioflavin; blue), neurons (NeuN; green) and GABAergic axon terminals (vGAT; red). Dual immunocytochemical staining (right) to study the somatic innervation of tau-positive neurons (red) by GABAergic axon terminals (vGAT; green).

Study of the alterations of cortical circuits in Alzheimer's Disease



Confocal microscopy images showing the spiny dendrites (green) of cortical pyramidal cells from a transgenic mouse (left) and from a patient with Alzheimer's disease (right). Pyramidal cells were intracellularly injected with Lucifer yellow (a fluorescent marker, green). *Left;* These transgenic mice develop plaques that contain beta amyloid (red, stained with Congo red) and they are used as a model to study Alzheimer's Disease. *Right;* a pyramidal cell intracellularly labeled to study the relationship between tau (anti-tau immunocytochemical staining, red) and the microanatomical alterations in pyramidal cells. Cell nuclei of neurons and glia are stained in blue with DAPI to analyze the possible neuronal loss and/or gliosis. The alterations to pyramidal cells are related to cognitive impairment

Study of the alterations of cortical circuits in Alzheimer disease



Human cerebral cortex from an autopsy of a patient with Alzheimer's disease, part of a series of images obtained by FIB/SEM that show numerous dystrophic neurites, as well as bundles of amyloid, especially in the upper left corner.

Target: Computational System Biology applied to neuroscience

Detailed description

- Research on classification methods to define objective biomarkers of neurodegenerative diseases
- Complex networks based multivariate and non-linear analysis of neurophysiology signals (MEG)
- Neuronal cell cultures experimental study of the relationship between structure and function of networks. Application to the analysis of feasibility in cell implantation. Applications of neurodegenerative diseases

Laboratories:

- Computational System Biology
- Biological Networks
- Cognitive and Computational Neuroscience
- Advanced Mathematics applied to Biomedicine

Advantages

- ☐ We have information of the brain as a whole and not only of its isolated components.
- ☐ We can relate the information contained in the topology with the dynamical processes occurring in it.
- ☐ We can try to identify differences between healthy and impaired brains in order to understand and prevent different brain diseases.

GOOD NEWS

Possibility of clinical applications

Drawbacks

- ☐ We are projecting the activity of billions of neurons into a few nodes.
- ☐ The activity at each position is strongly influenced by its neighbors.
- ☐ Experiments are expensive and it is difficult to find volunteers.
- ☐ There exists a great variability of the recorded activity between individuals (and even in the same individual).
- ☐ Anatomical and, specially, functional networks are not static.

CAUTION! High risk of GIGO
(Garbage In, Garbage Out)

Modelling Brain Networks: Application to MCI/AD

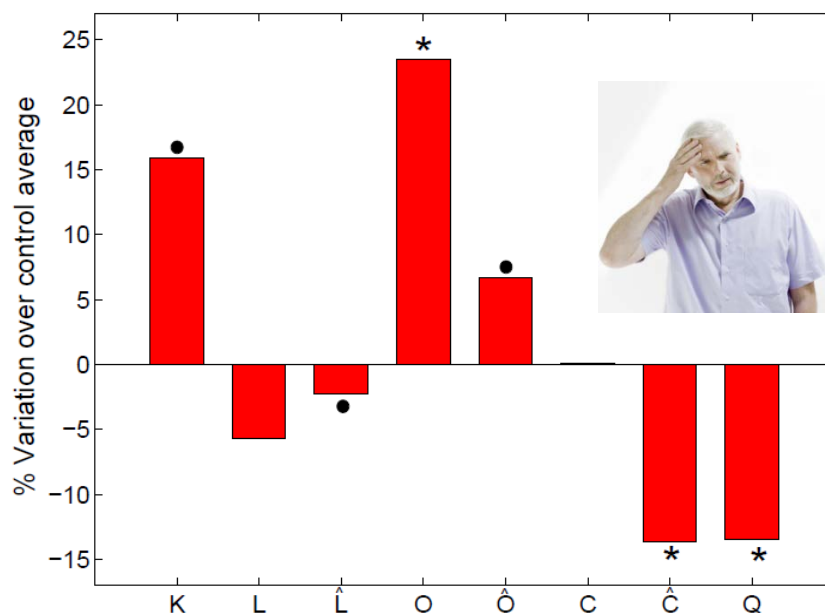
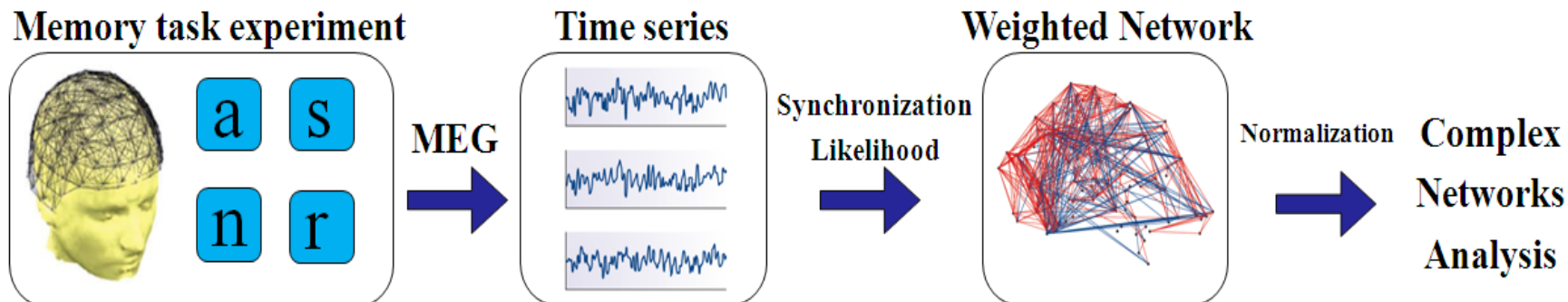


Fig. 4. Percentage of variation and statistical significance. Percentage of variation of the average degree K , average shortest path L and its normalized value $\hat{L} = \frac{L}{L_{ran}}$, network outreach O and normalized outreach $\hat{O} = \frac{O}{O_{ran}}$, clustering C and normalized clustering $\hat{C} = \frac{C}{C_{ran}}$ and network modularity. Circles correspond to $p < 0.03$ and stars to $p < 0.001$, specifically: O ($p = 0.007$), \hat{C} ($p = 0.002$), Q ($p = 0.0033$), K ($p = 0.018$), L_z ($p = 0.025$) and \hat{O} ($p = 0.027$).

- The network strength K increases (+15.9%)
- Network outreach increases (+23.4%)
- The network modularity decreases (-13.5%)
- Normalized clustering decreases (-13.6%)
- Normalized outreach increases (+6.7%)

Modelling Brain Networks: Application to MCI/AD

□ Degree, clustering, outreach and knn distributions:

- MCI networks have nodes with **higher connectivity**.
- The **clustering increases** with the degree (in both Control and MCI).
- For the same degree, **outreach is higher** at the MCI group.
- Networks are **assortative**

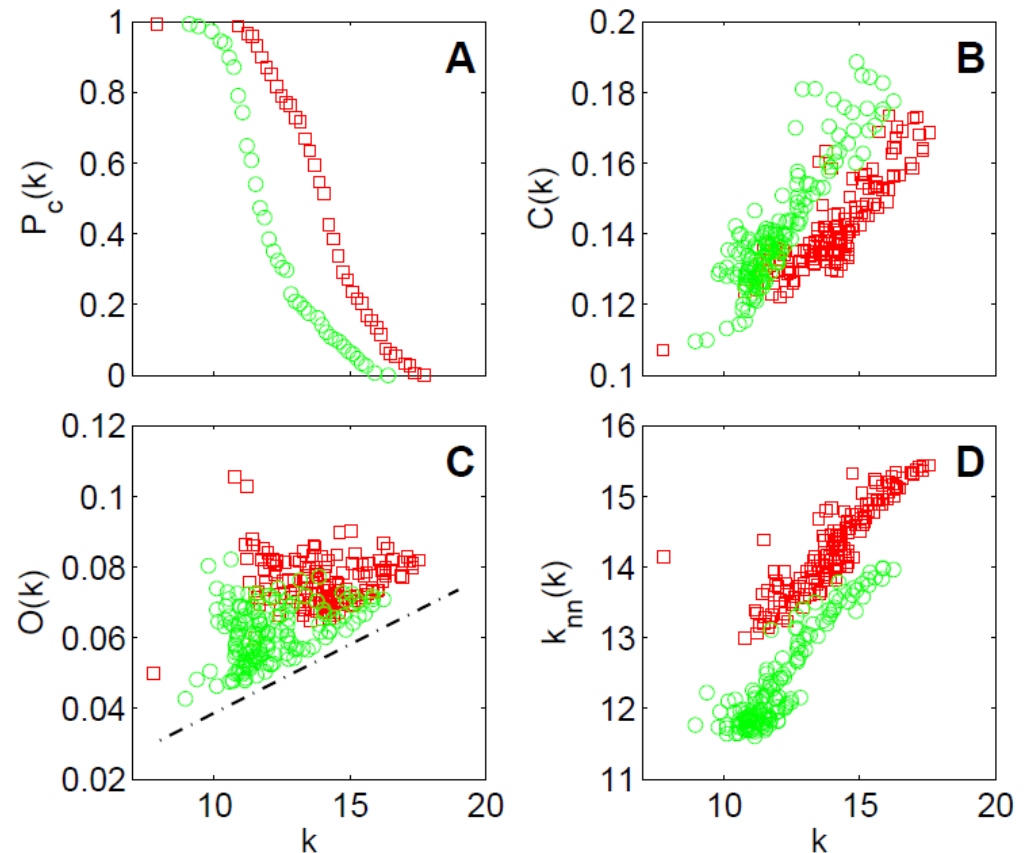


Fig. 3. Several network parameter distributions for the control (green circles) and MCI (red squares) groups. (A) Probability distribution of finding a node with a degree higher than k , (B) clustering coefficient $C(k)$, (C) outreach $O(k)$ and (D) average nearest neighbors degree $k_{nn}(k)$.

Modelling Brain Networks: Application to MCI/AD

From macroscopic (network) to microscopic (node) analysis

□ Within module degree:

$$z_i = \frac{k_i - \bar{k}_{c_i}}{\sigma_{k_{c_i}}}$$

□ Participation coefficient:

$$p_i = 1 - \sum_{c=i}^{N_c} \left(\frac{k_{c_i}}{k_i} \right)^2$$

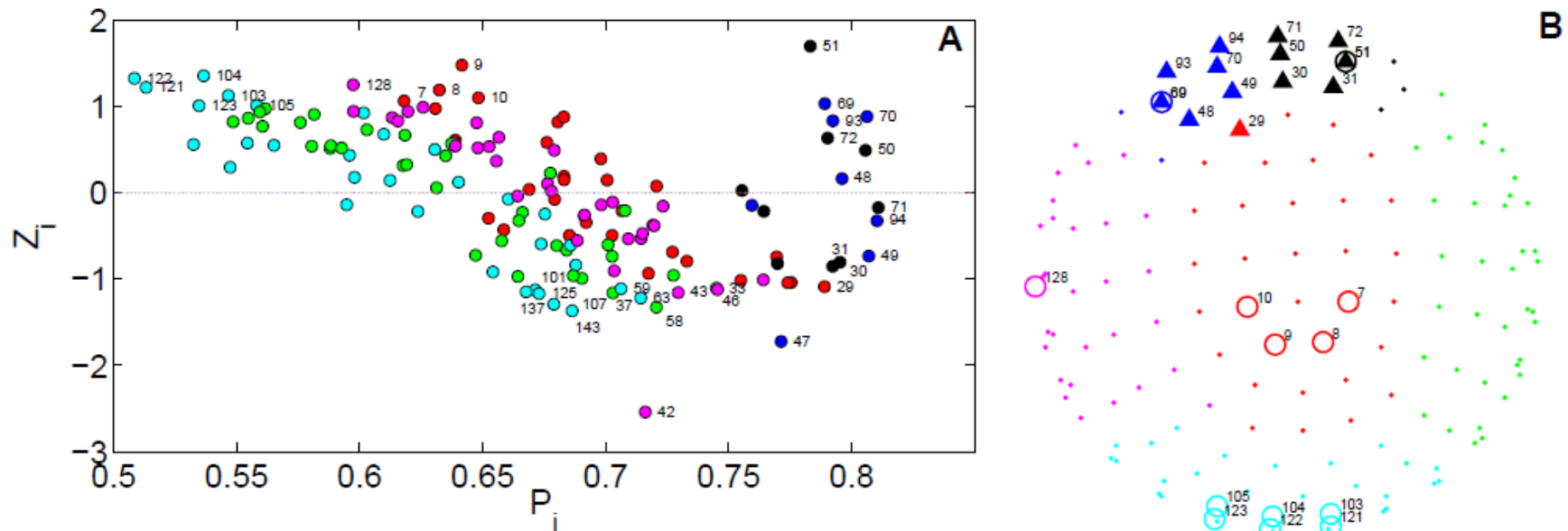
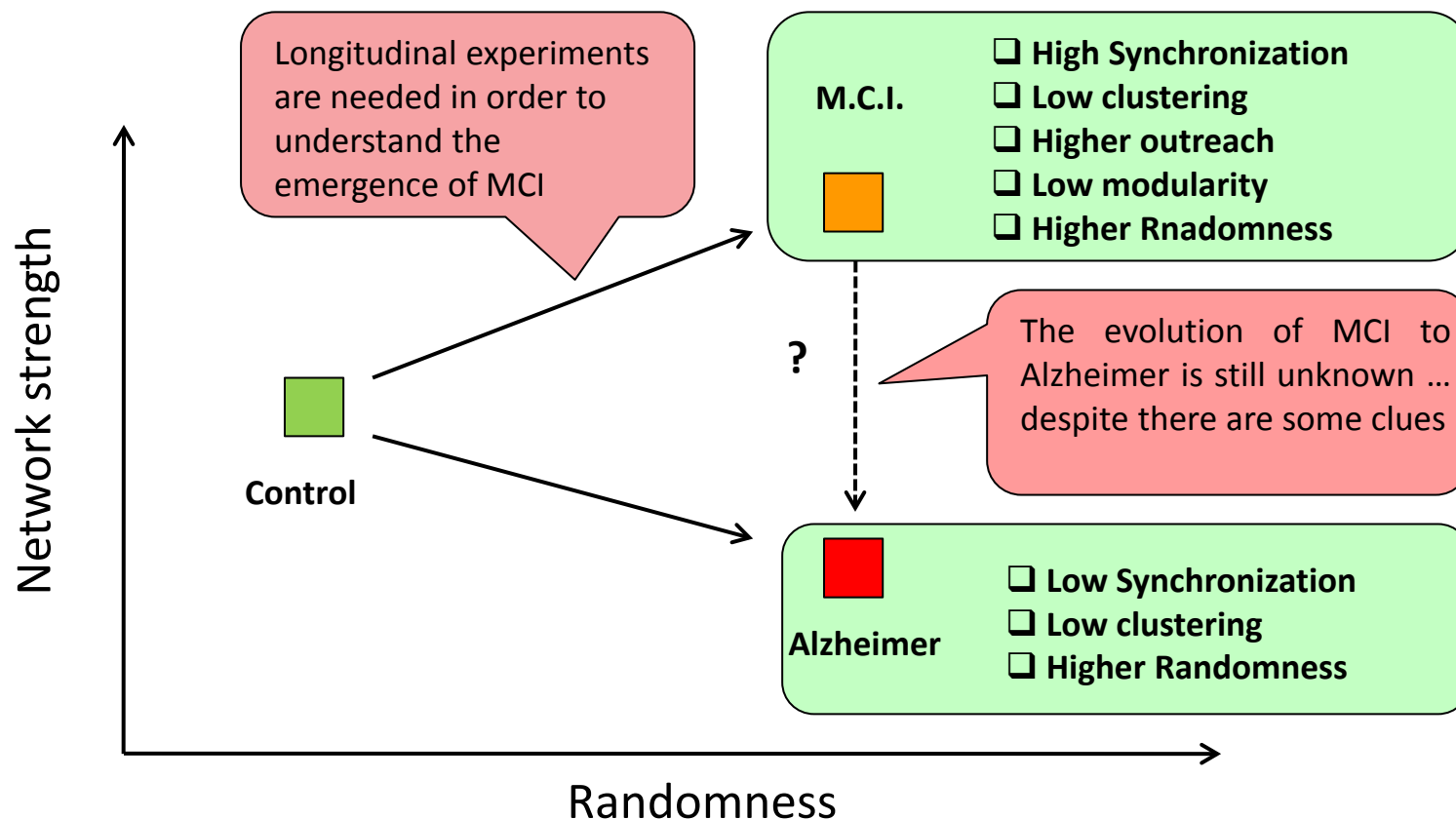


Fig. 6. Community structure and roles. (A) Within-module degree z_i for each node in the network of the control group as a function of its corresponding participation coefficient p_i . Only the first 13 nodes with the highest z_i and p_i are labelled. Their positions within the corresponding lobe are marked in (B) with circles for those with the highest z_i and with triangles for those with the highest p_i .

MCI/AD: Complex network methods give useful information about functional brain networks

One must be cautious since there is a high variability in the results

Network parameters give hints about how brain functional connectivity is affected by different diseases. In the case of Mild Cognitive Impairment:



Network models to explain spontaneous emergence and adaptation of modularity and heterogeneity in complex networks

Balance of **segregation** and **integration** processes:

- **Segregation** (tendency to cluster synchronization) is necessary for maximizing the parallel functioning;
- **Integration** is essential to perform the different parallel tasks in a coordinated way.

Simultaneously, these networks exhibit peculiar structural properties: they are very **heterogeneous** (displaying in most cases a **scale-free distribution** in the connectivity), and they are generally **modular** (displaying the formation of **community structures**).

The question: Is it possible to encompass all these features as emergent structures in a simple model of networking units?

The scales of a network:

Microscale - The scale of a node and its neighborhood

Statistical property of the graph connectivity

Major adaptation mechanisms (Hebbian learning, homeostatic plasticity)

Mesoscale – The scale of a cluster, or community structure

Modules and motifs

Clustering properties, loop properties

Segregation processes and cluster synchronization

Macroscale – The scale of the whole network

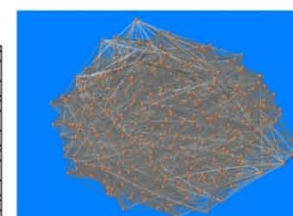
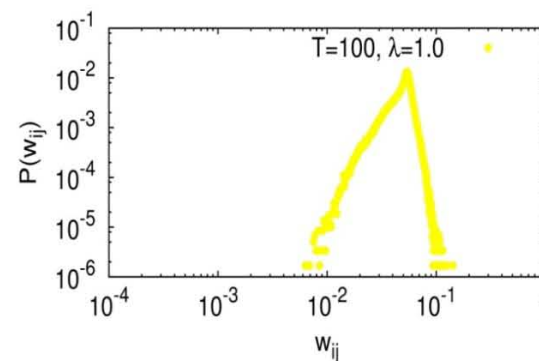
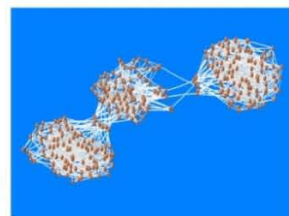
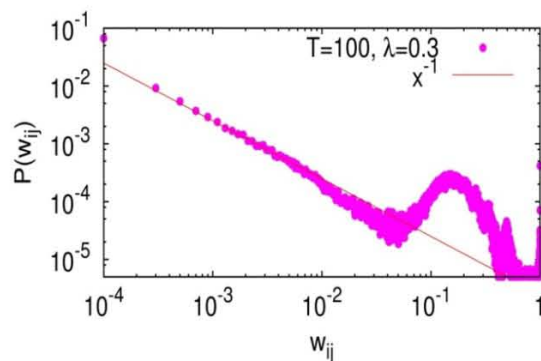
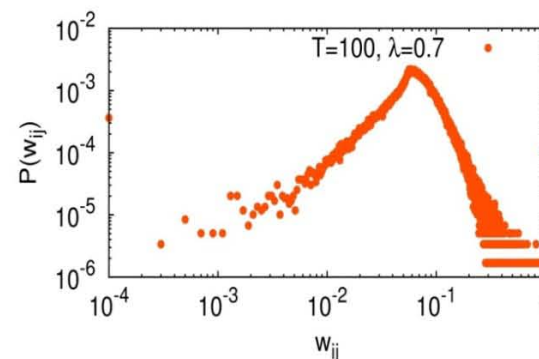
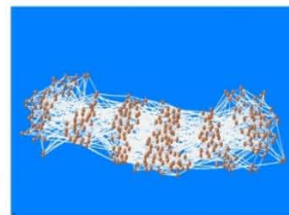
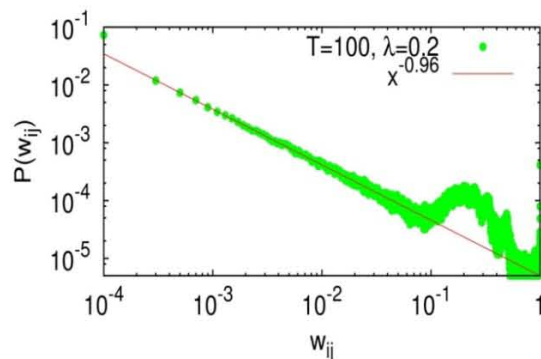
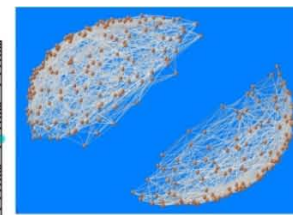
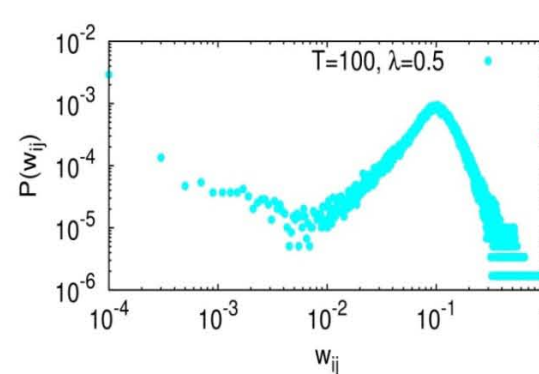
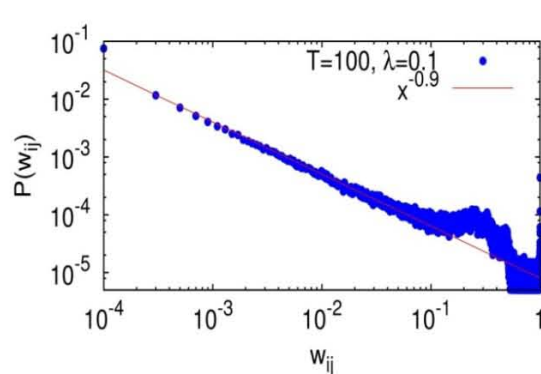
Diameter, shortest path, small world properties

Efficiency, vulnerability

Integration mechanisms

The result: Local adaptation processes and coevolution of nodes and links yield spontaneous emergence of modularity and scale-free properties (inhomogeneity)!

Adaptation and spontaneous emergence of modularity and heterogeneity in complex networks



Adaptation and spontaneous emergence of modularity and heterogeneity in complex networks

In the brain, **synchronization** is at the core of the physical mechanisms governing **the transfer and processing of information** at the level of neuronal synapses as well as in the development of cognitive tasks. Synchronization phenomena also **affect the structural features** of the brain, thus playing a crucial role in shaping the neuronal circuitry and in the organization of the axonal pathways.

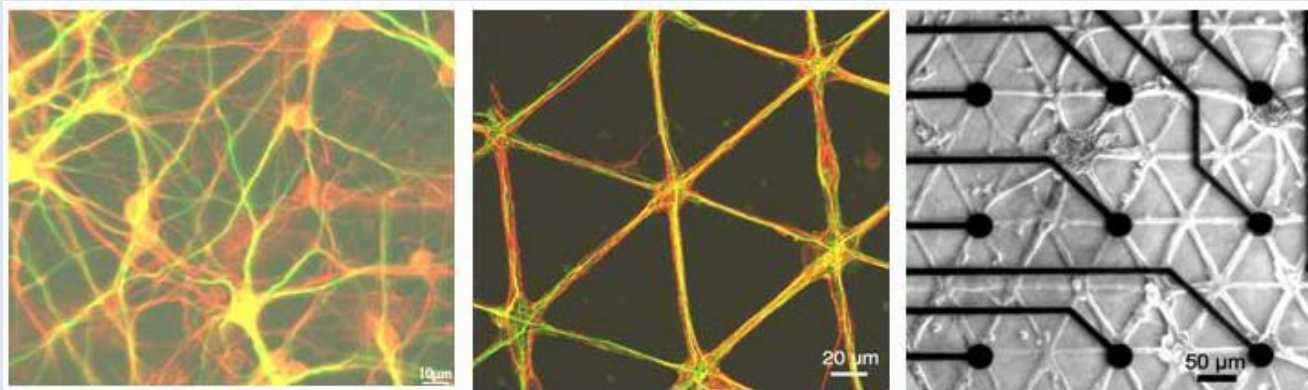
In classical approaches, the ties between units strengthen as their dynamical states become more and more correlated. In theoretical neuroscience this mechanism is known as **Hebbian learning**.

In fact, in real systems the enhancement of some synapses is seen to be counter-balanced by the weakening of others. Such competition, usually denoted as **homeostatic plasticity**, plays a crucial role in counter-acting the positive feedback effects associated with Hebbian learning, as well as in conferring stability to neuronal networks during their development.

It has been demonstrated that a model of an adaptive network of phase oscillators, in which both mechanisms of Hebbian learning and competition are taken into account, reproduces all at once the typical features of real brain dynamics

Neuronal cell cultures: regeneration, learning

Study of the relationship between structure and function of networks. Application to the analysis of feasibility in cell implantation applications of neurodegenerative diseases



Random and patterned networks. Double-immunostaining of dendrites (red) and axons (green). (Left) – Example of free-forming (random) cultured neural network. (Middle) Patterned cultured networks with 6-fold lattice-like symmetry generated using a novel lithography technique. A few neurons are located at each node of the network and the links are composed of dendrites and axons. (Right) Similar patterned network grown on multi-electrodes-array for recording of the electrical activity. Courtesy of Prof. Eshel Ben Jacob (Tel Aviv University).

Target: Human diseases caused by dysfunction in connexins

Detailed description

- Role of Connexin-36 in Epilepsy and Genesis of Brain Rhythms upon Physiological and Pathological conditions
- Pathogenic Mechanism in Myelin Disorders caused by Mutations in Connexin-46.6 and Connexin-43
- Role of Connexins in the Hematopoietic Stem Cell Niches . Neurogenic potential of Bone Marrow Mesenchymal Stem Cells . Explore the pluripotential ability of mesenchymal stem cells and progenitors (MSC/P) to re-establish functional recovery in a model of brain injury.

Laboratories:

- Experimental and Computational Neurology
- Biomechanics, Biomaterial and Tissue Engineering

Target: Research on brain communication mechanisms with very low frequency and intensity pulsed magnetic fields. Neurophysiologic basis of pain

Detailed description

- Research on brain communication mechanisms with very low frequency and intensity pulsed magnetic fields
- New devices and magnetic actuators, fMRI compatible, for clinical applications of low electromagnetic fields: Fibromyalgia, trigeminal neuralgia, migraine, etc.
- Pulsed Magnetic Field Stimulation to enhance Neurite Growth.
- Environmental EMF Dosimetry

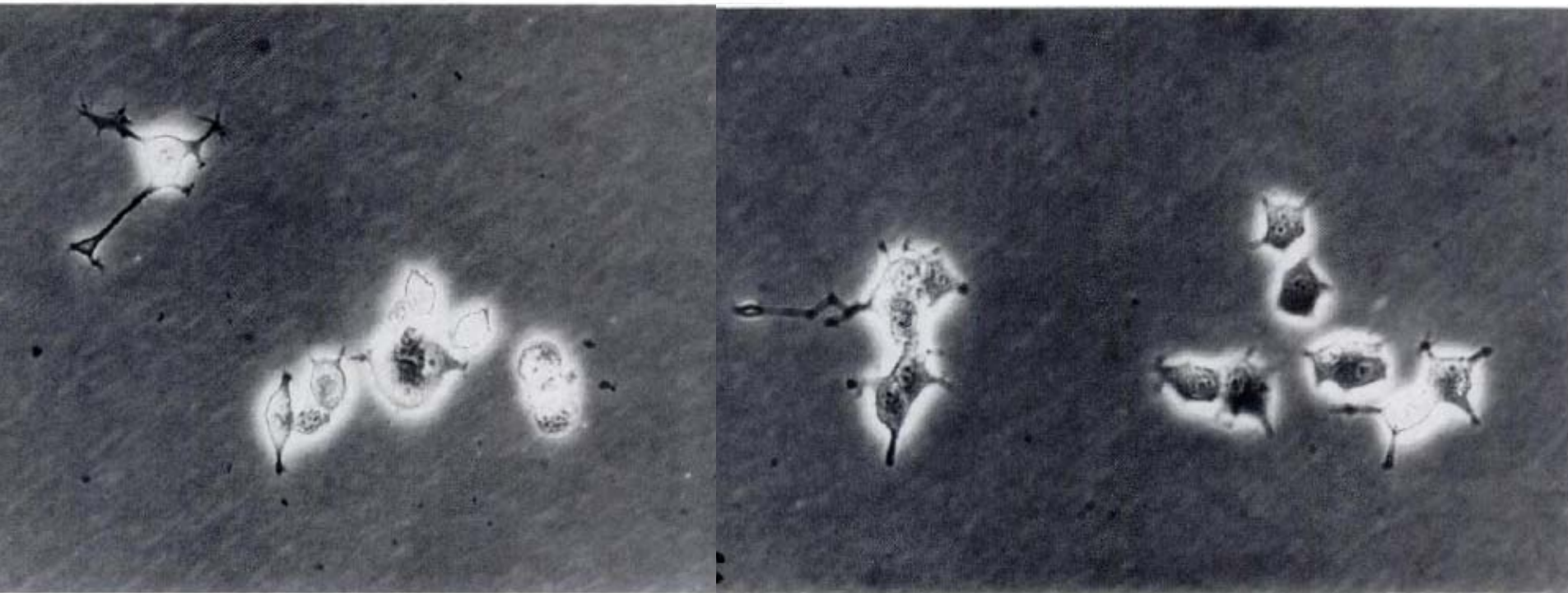
Laboratories:

- Bioelectromagnetism
- Molecular Biology and Biochemistry
- Neuroimaging

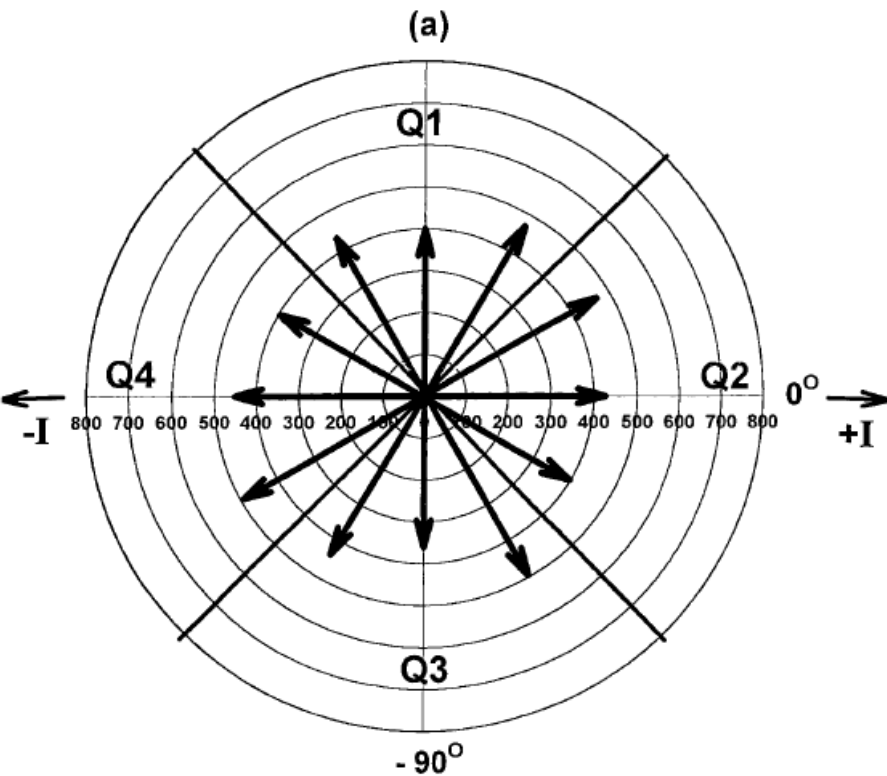
Contac: Ceferino Maeztú Unturbe

Electromagnetic Field-Induced Axonal Growth

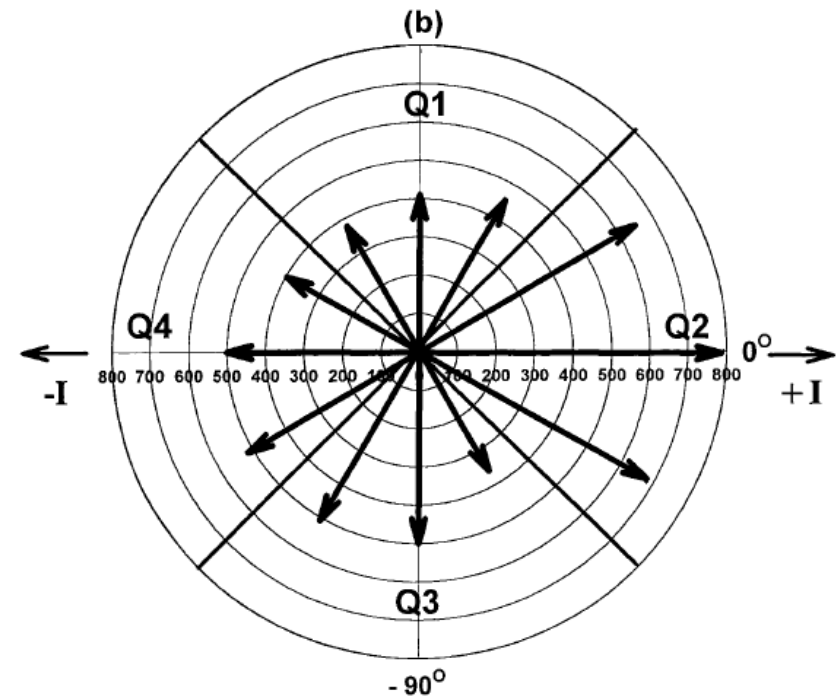
Evidence For Direct Effect Of Magnetic Fields On Neurite Outgrowth, Blackman et Al. 1993



“Directed and Enhanced Neurite Growth with Pulsed Magnetic Field Stimulation”, Macias, Battocletti et. Al. 2000

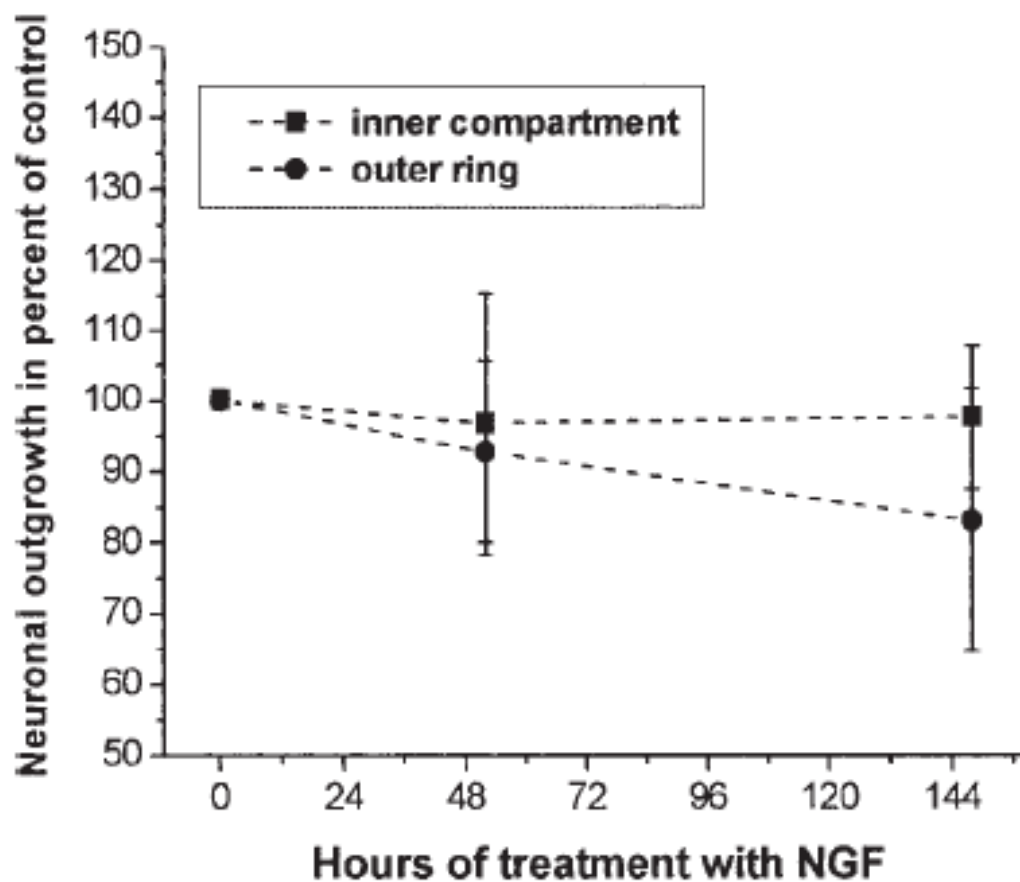


No magnetic field

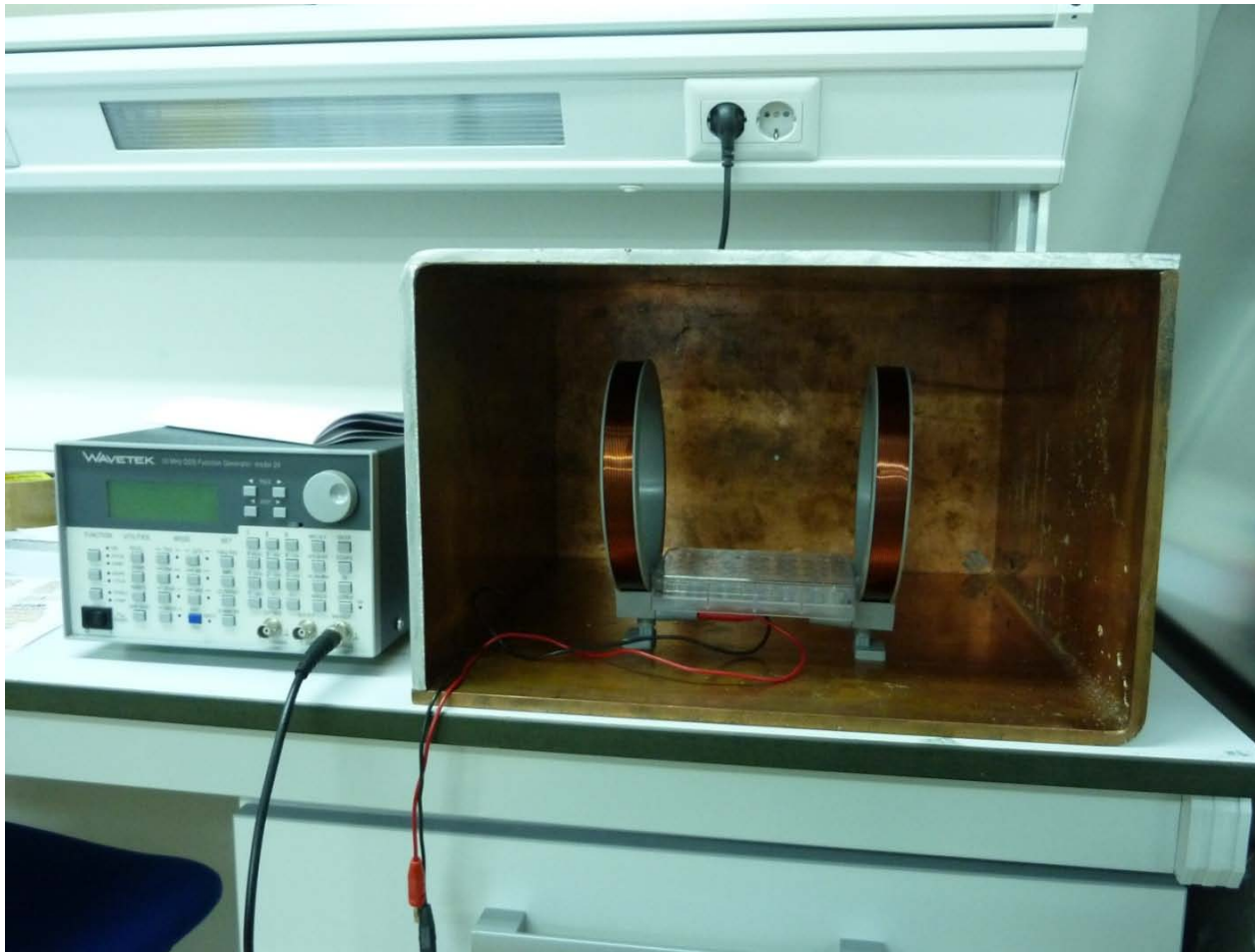


With pulsed magnetic field

“Neuronal Outgrowth of PC-12 Cells After Combined Treatment With Nerve Growth Factor and a Magnetic Field: Influence of the Induced Electric Field Strenght”, Schimmelpfeng et. Al. 2004



Experimental Set for Cellular Stimulation



Target: New bioinspired fibers for biomedical applications, collagen-based materials applied to biostructural prosthesis and cell mechanics. Scaffolds to package stem cells

- New bioinspired fibers for biomedical applications
- Collagen-based materials applied to biostructural prosthesis
- Cell mechanics
- Design and manufacturing of biocompatible materials with controlled topologies (single fibers, arrays and networks) derived from both natural (silkworm silk fibroin) and synthetic materials (PLA-PGA copolymers) as method to encapsulate and packaging bone marrow mesenchymal stem cells and progenitors

Laboratories:

- Biomechanics, Biomaterial and Tissue Engineering
- Experimental and Computational Neurology

Target: Integration of multiscale heterogeneous information and artificial intelligence techniques for helping early diagnose of neurodegenerative diseases.

- Learning Health System development
- Integration of genomic and clinical databases
- Medical Artificial Intelligence
- Mathematical and computational tools to extract biologically and clinically relevant information from large data sets
- Web services for medical applications

Laboratories:

- MIDAS
- Cognitive and Computational Neuroscience
- Ramón y Cajal Blue Brain Project

Personalized Care: Chronic Disease Management and Wellness Support

Target: Novel devices and systems for habits and daily activities monitoring, and intelligent environments for personalized and ubiquitous health care.

- Novel devices for habits and daily activities monitoring
- Intelligent environments for personalized and ubiquitous health care
- Knowledge extraction. Pattern assessment. Habit assessment
- Personalized health services
- Low cost technologies to support the health of rural isolated communities (EHAS program)

Laboratories:

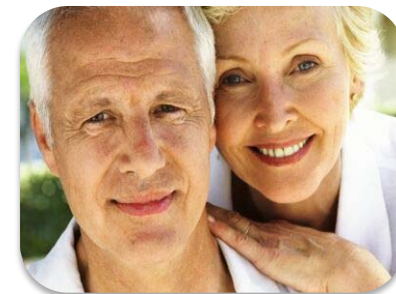
- Personal Health Care Systems (PHealth)
- Internet of things and social networks

Environmental Intelligence

p-Health



AAL



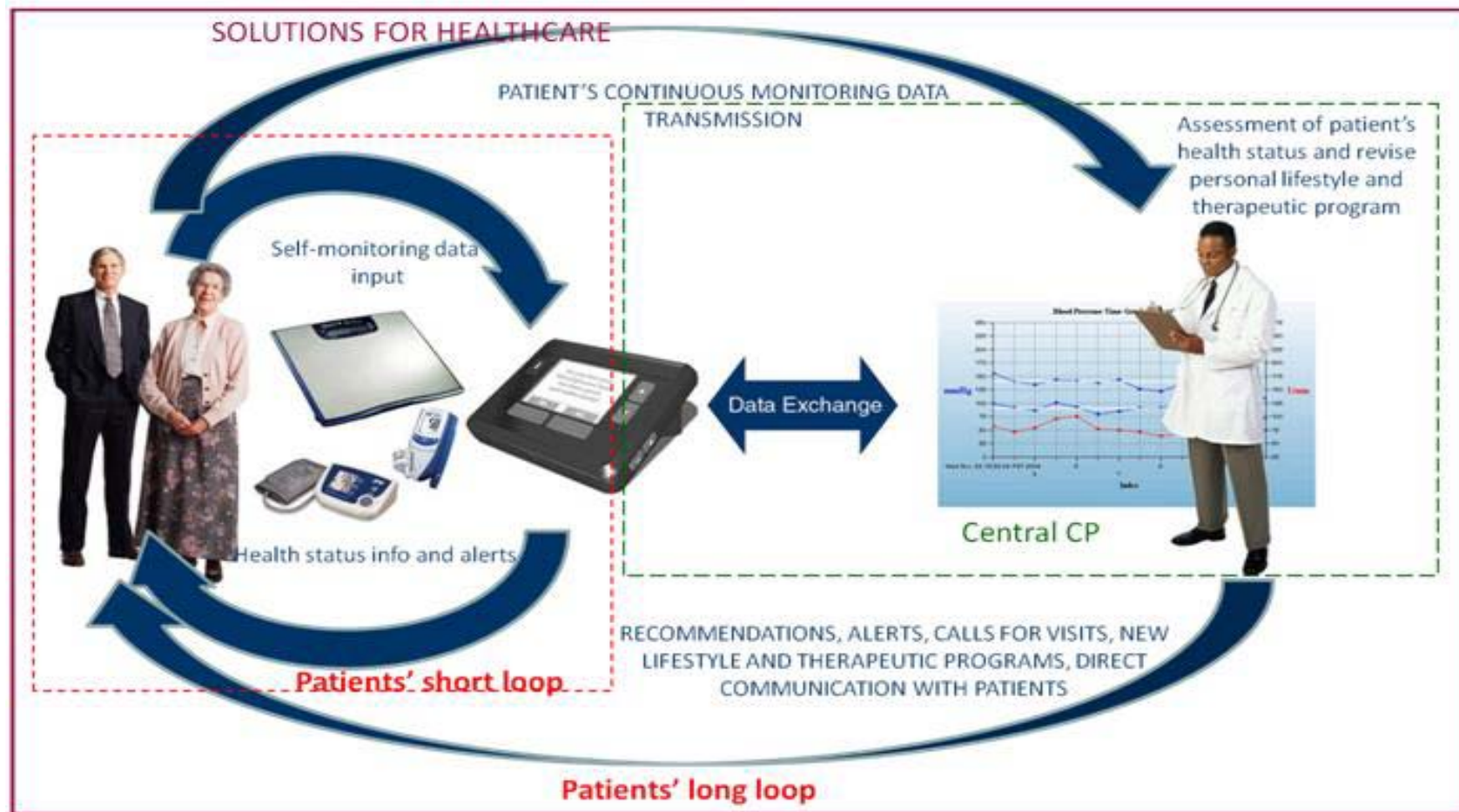
Active and Healthy Aging



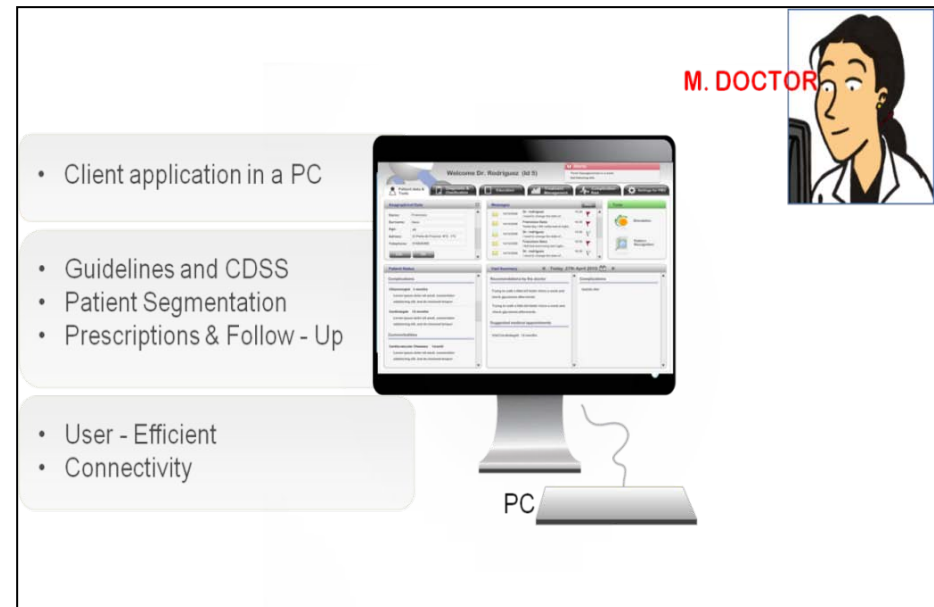
e-Learning



e -Inclusion



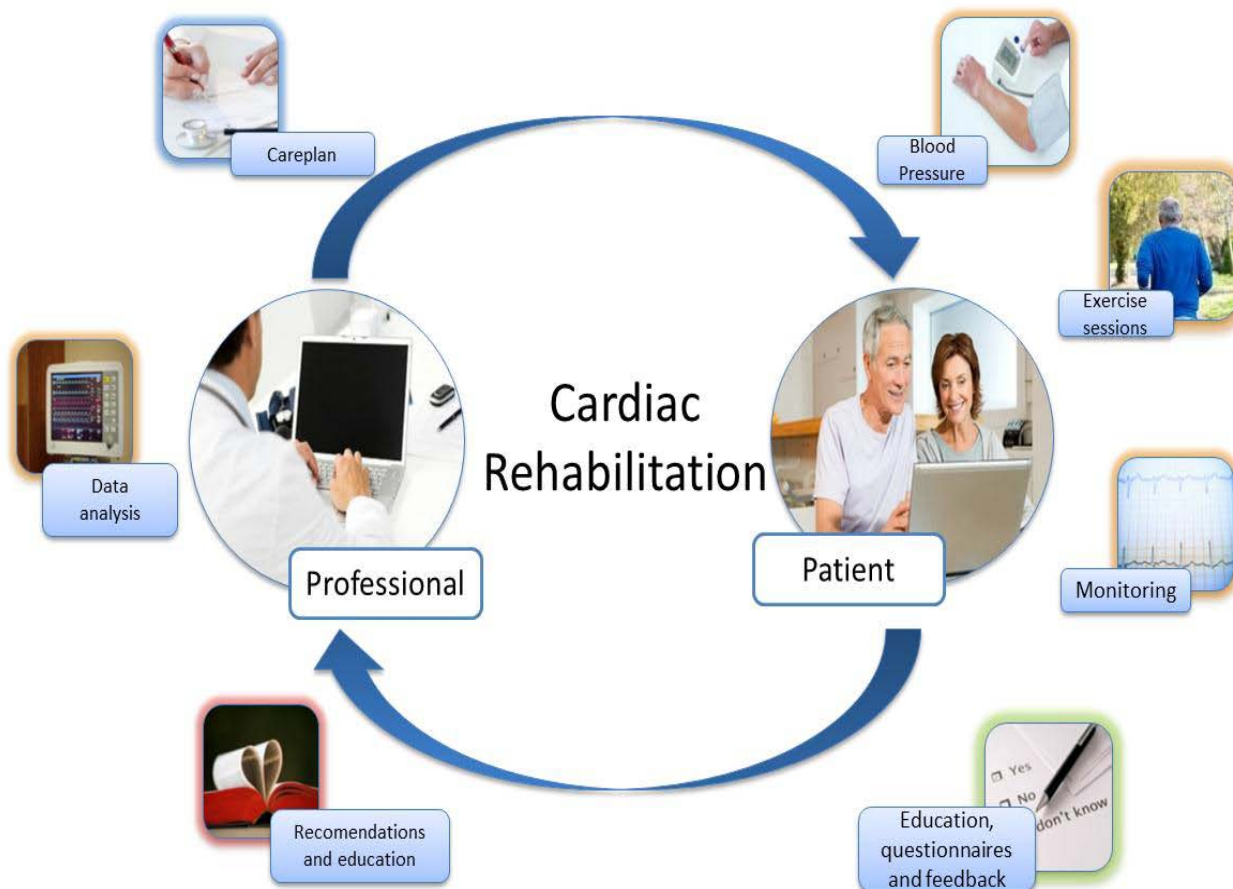
Technology for Chronical Patient Management: Diabetes



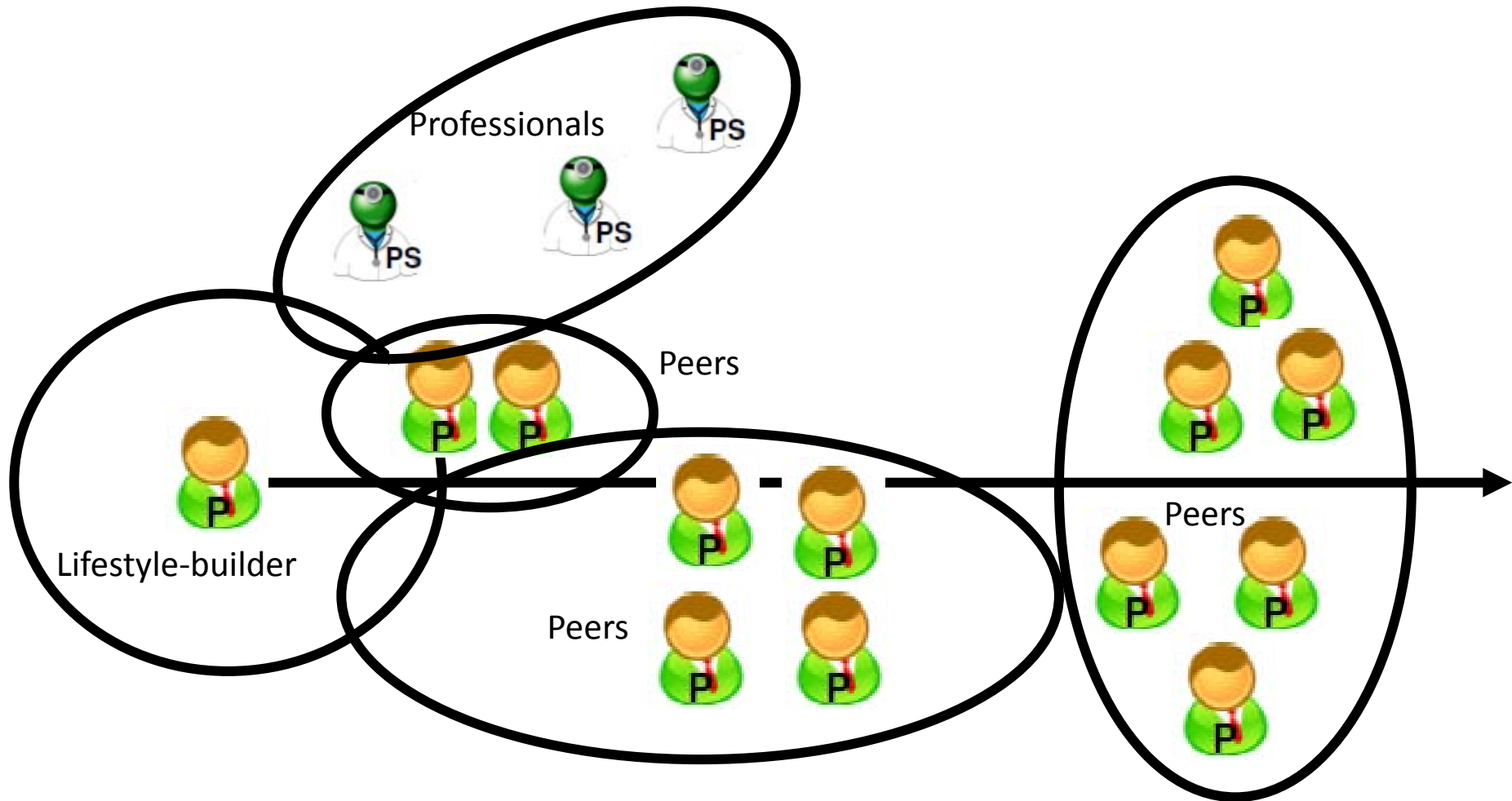
Technology for Chronical Patient Management: Parkinson's Disease



Technology for Chronical Patient Management: Cardio



Use of Social Networks in Health

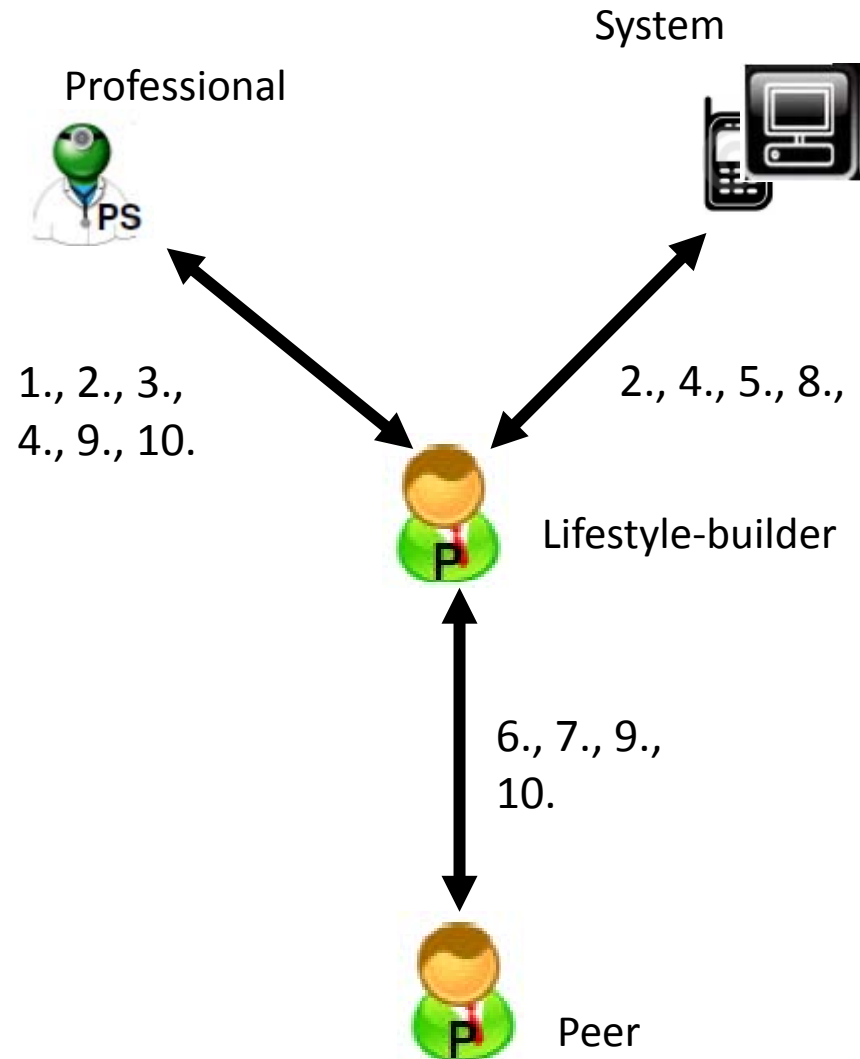


1. Prescribe lifestyle and action plan.
2. Configure lifestyle and action plan.
3. Contact with professional.
4. Exchange encouraging guidance.
5. Learn from sound sources
6. Contact with peer.
7. Exchange challenges.
8. Make healthy daily choices.
9. Get involved into healthy groups.
10. Get involved into healthy events.

Supervision / non-supervision.

Mobile scenario / home scenario.

On-line mode / off-line mode.



Neuromorphic Speech Processing

Target: Description of functional circuits in brain for speech perception and production. Foundations for Advanced Voice Quality Analysis in Neurodegenerative Disease Monitoring.

Detailed description

- Voice Processing Tools for the detection and monitoring the organic and neurologic pathology in Speech
- Modeling Speech Perception in Higher Auditory Pathways for Phonetic Unit Representation Spaces and Phonemic Parsing
- Modeling Voice Production Neurologic Pathways
- Altered Emotion State Detection in Voice and Speech

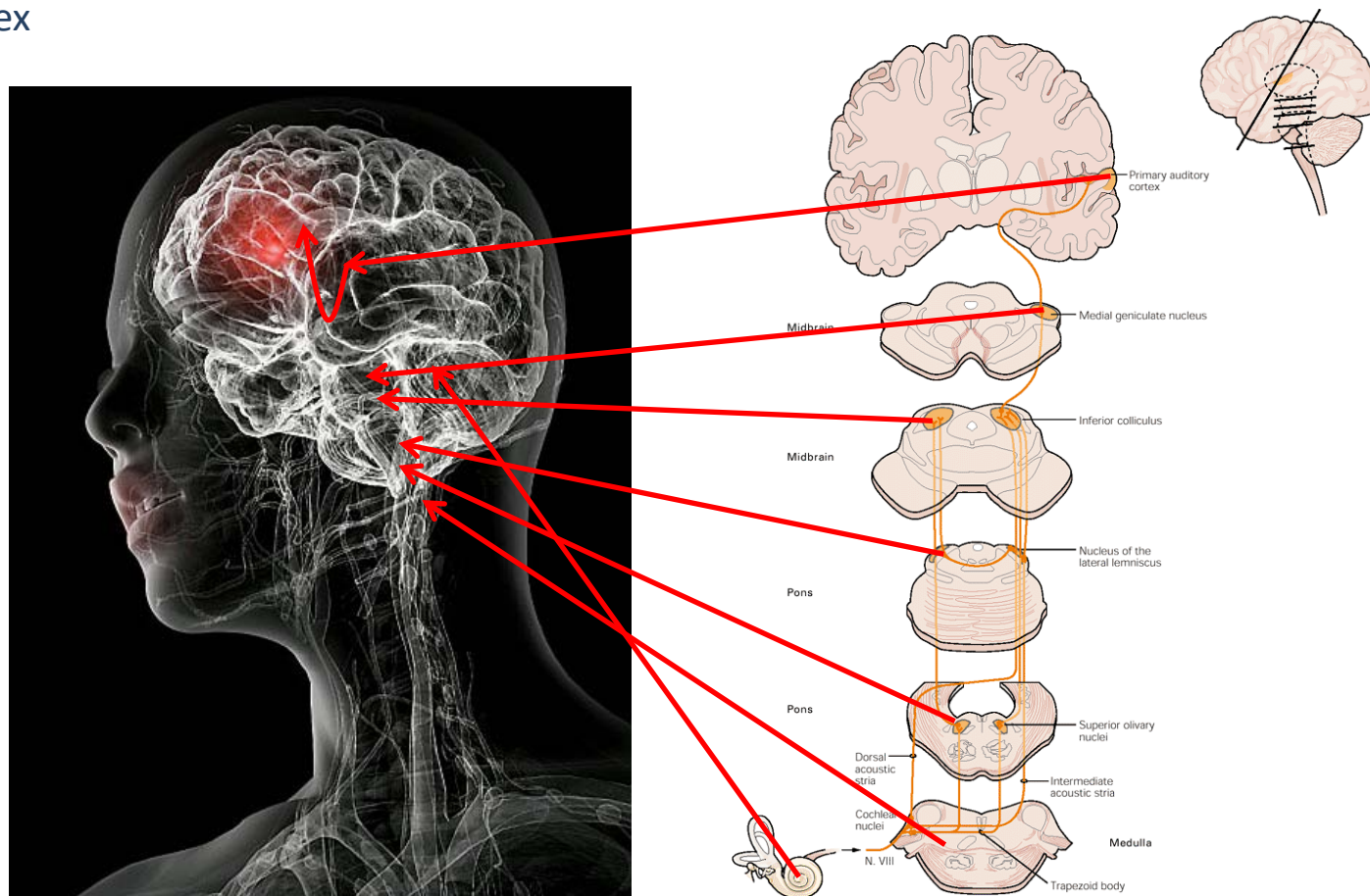
Laboratories:

- Neuromorphic Speech Processing Lab
- Oral Communication Lab “Robert W. Newcomb”

Contact: Pedro Gómez Vilda

Auditory Perception

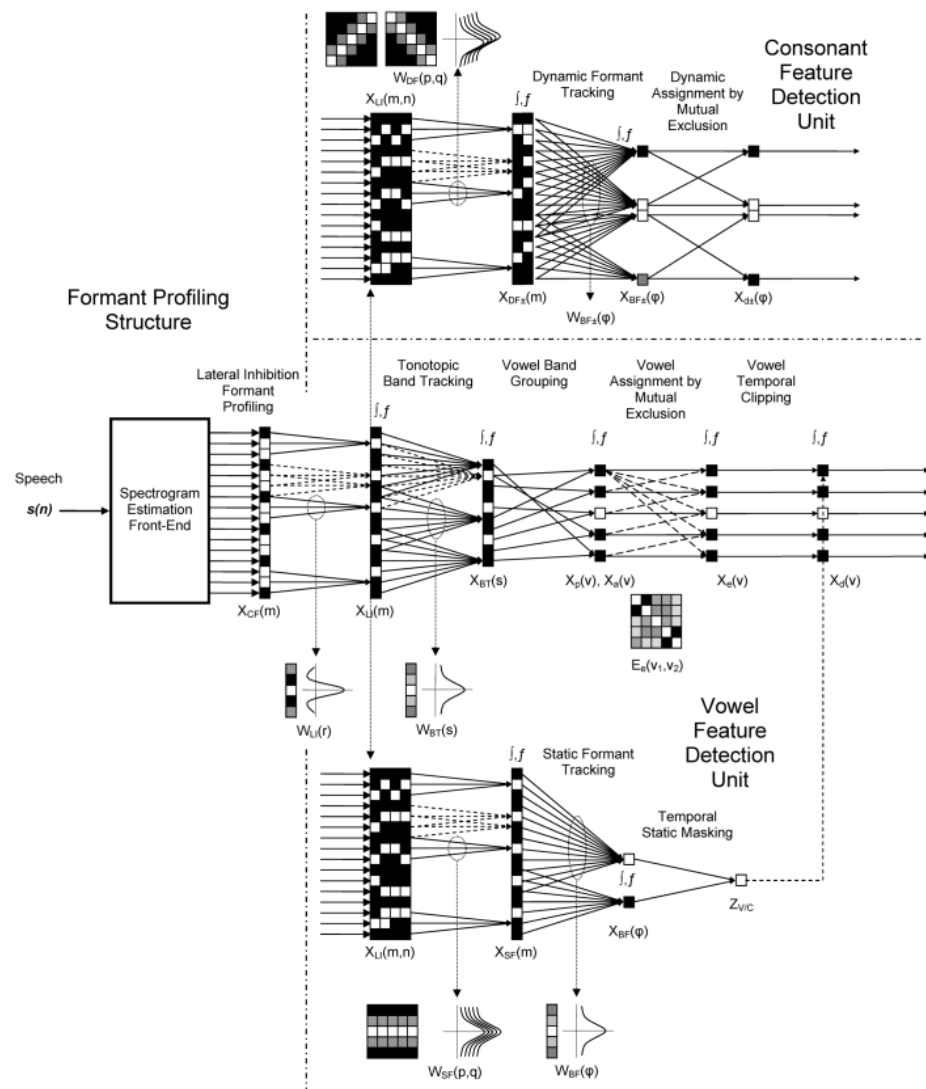
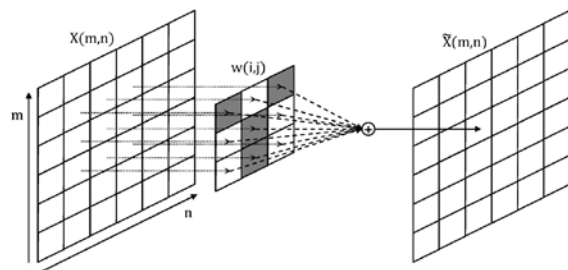
It is based on the description of the Outer and Inner Ear in the Temporal Bone, the Cochlear Nuclei (Spine), Superior Olivary Complexes and Nuclei of the Internal Lemniscus (Brain Stem), the Inferior Collicula and the Medial Geniculate Bodies (Midbrain) and the Wernicke and Broca areas in the Brain NeoCortex



Neuromorphic Speech Processing Architectures

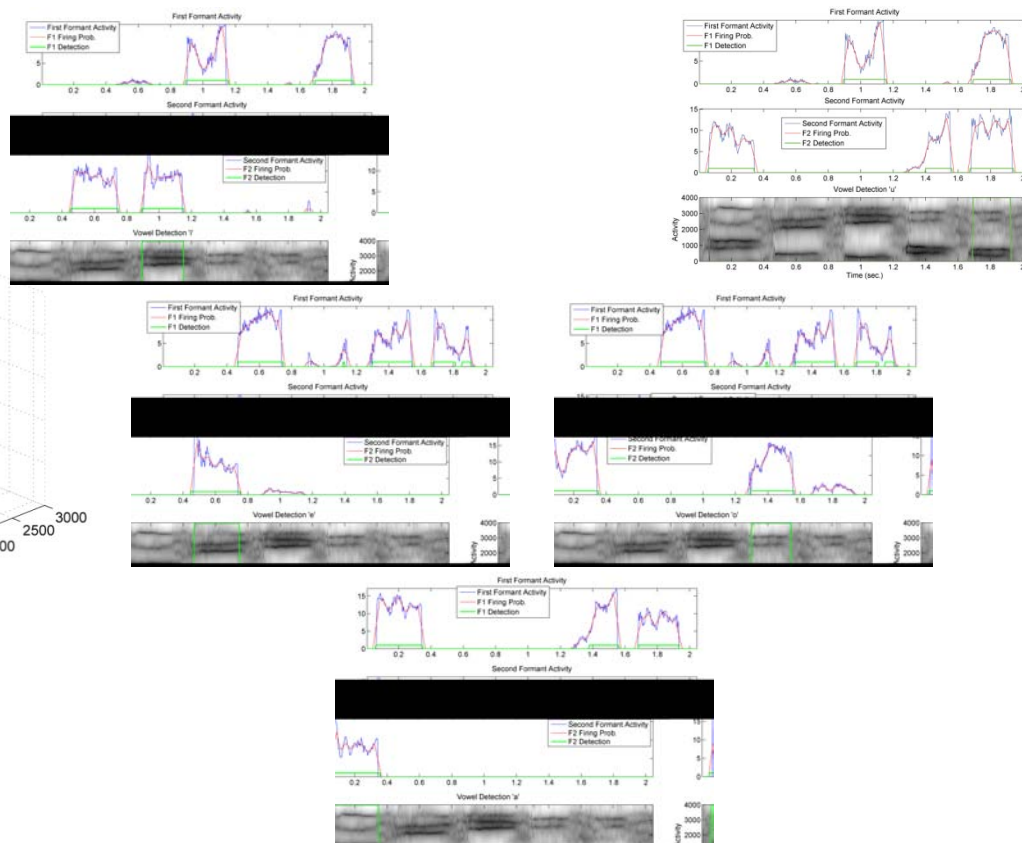
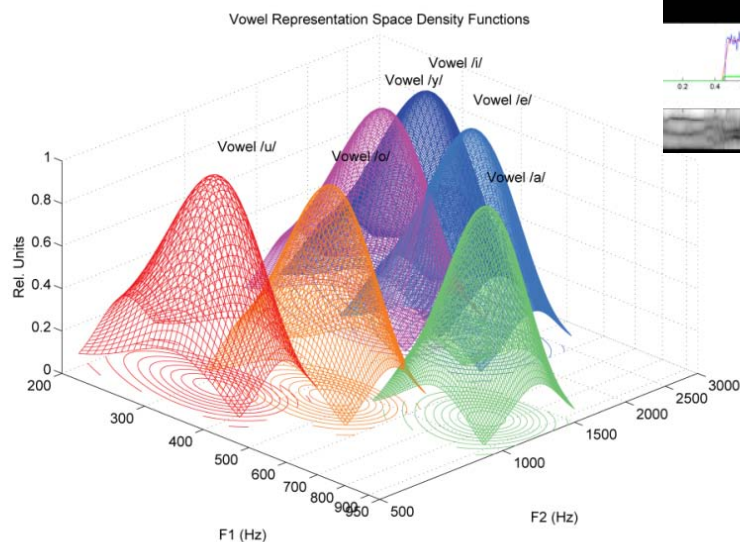
Neural spike train signals are implicitly transformed to what Paiva et al. describe as the Reproducing Kernel Hilbert Space framework which allows subsequent Signal Processing to be simulated by common Simplified Hebbian Units. Simplified Hebbian Units implement the Membrane Function as the Thresholded Inner Product between the Input Activity Vector and the Synaptic Weight Matrix. The NSPA is based on the massive and parallel implementation of HPU's.

Hebb-Paiva Units



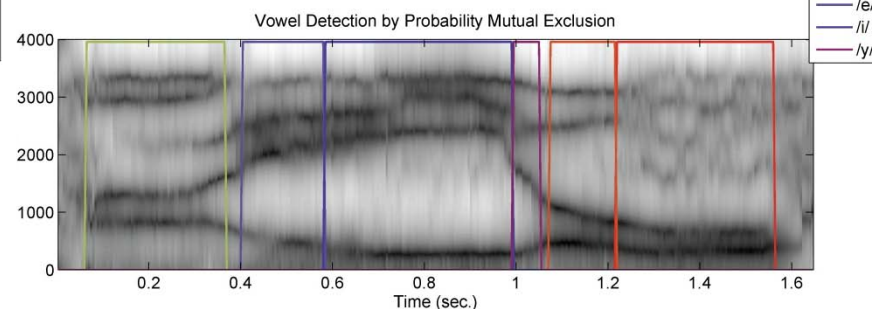
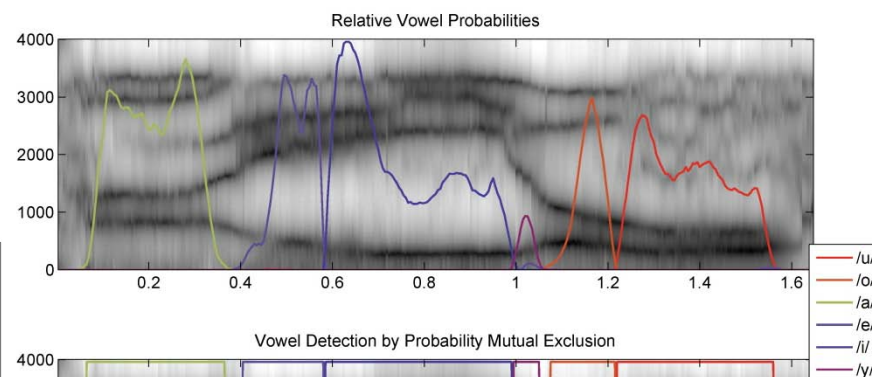
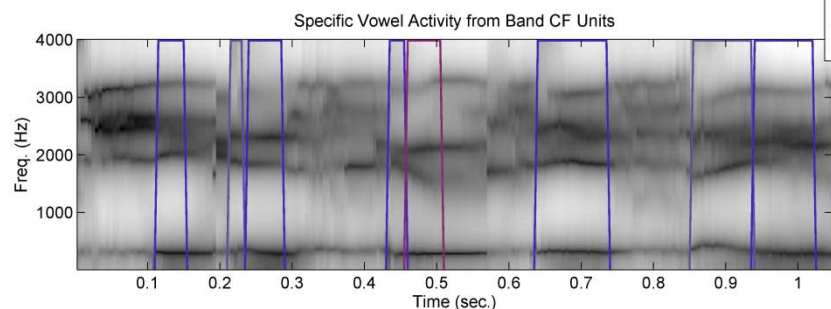
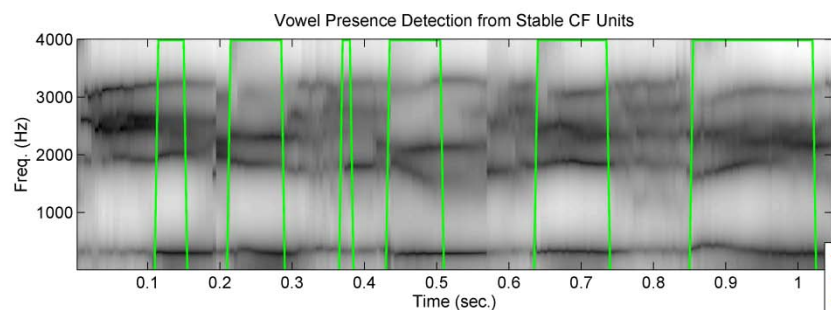
Vowel Space Representations, Speech Segmentation

Vowel Representation Spaces are specific Units found in Wernicke's Area which are reactive to specific associations of Formant Pairs (CF-CF Units). These Units map to secondary Units which are mutually exclusive, designated as Vowel Category Units.



Speech Segmentation

The main tasks implemented in this field are voice activity detection, vowel-consonant separation, dyphthong detection, vowel characterization, dynamic vowel onset characterization, VCV and CVC triphone description, etc.



Clinical Voice Quality Assessment

Study Case:

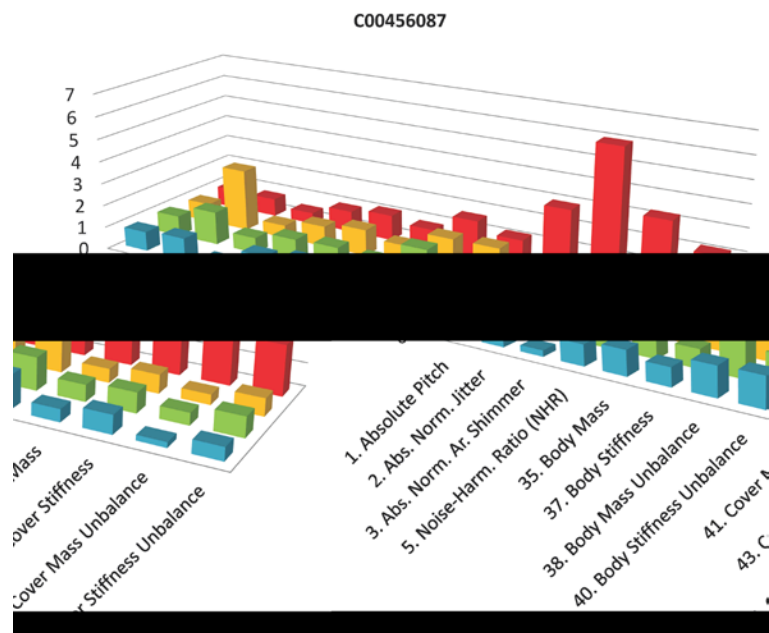
Female patient 65 years-old

Post-Thyroidectomic Vocal Fold Recurrent Paralysis (pTVFRP)

Treated by infiltration of fat from the patient in the vocal folds

The patient's voice was examined during almost a year (2011):

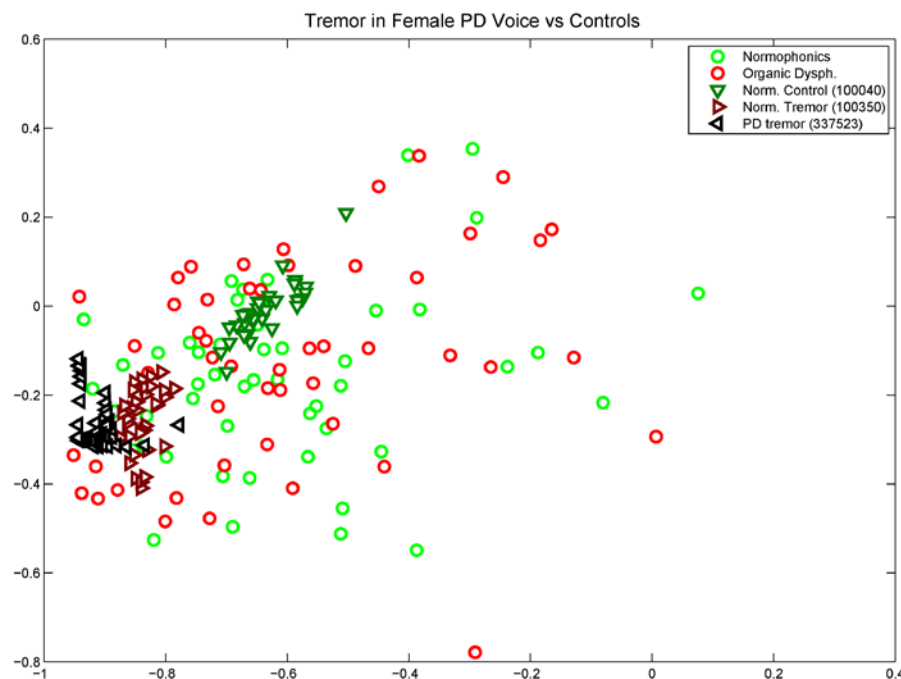
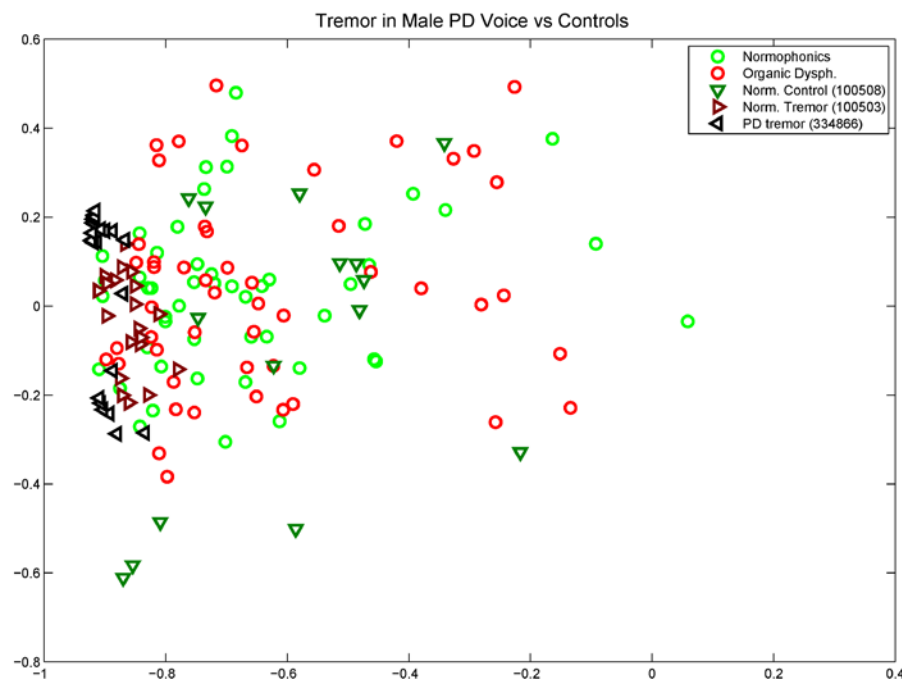
Once before the intervention (pre: March) and three times after the intervention (post1: May; post2: September; and post3: November).



Parameter	Pre	Post1	Post2	Post3
2-Jitter (%)	2.8	5.4	0.6	0.6
3-Shimmer (%)	10.5	3.3	1.5	1.0
38-Body M. Unb. (%)	4	21	<1	<1
40-Body S. Unb. (%)	10	30	1	1
41-Cover M. (mg)	26	8	8	6
43-Cover S. (g.s⁻²)	91,746	24,228	14,175	11,808
44-Cover M. Unb. (%)	47	14	2	1
46-Cover S. Unb. (%)	43	26	3	3

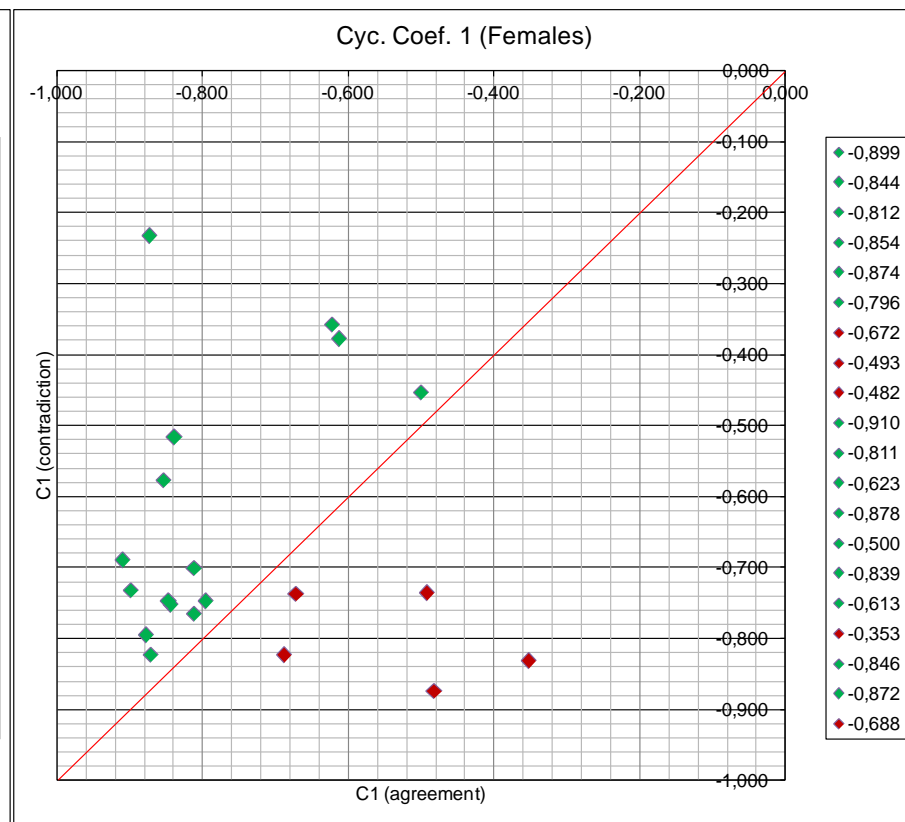
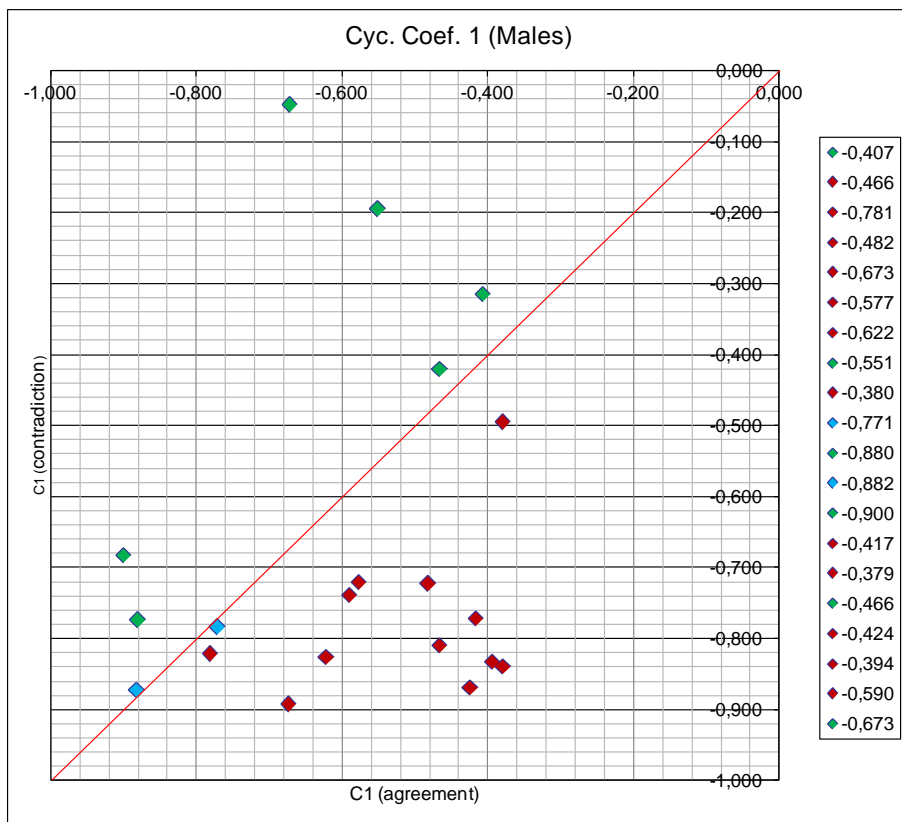
Neurological Disease Monitoring by Voice

Intra- and inter-subject scatter plots (c_2 vs c_1) for female control and tremor affected Parkinson's Disease Patients



Emotional State Detection from Tremor in Voice

Essential tremor perturbation may serve as an index to Emotional State Alterations in normophonic subjects



Target: Telemedical artificial pancreas and closed/semi closed-loop algorithms and glucose predictive models and prevention of Diabetes Mellitus and cardio metabolic risk.

- Telemedical Artificial Pancreas
- Closed and semi closed-loop algorithms and Glucose predictive models
- Risk management and decision support tools
- Prevention of Diabetes Mellitus and Cardio Metabolic Risk
- Computational modeling of autoimmune response of type 1 diabetes

Laboratories:

Diabetes technologies

Target: Neurorehabilitation processes modeling, dysfunctional models and hybrid bionics, smart monitoring of cognitive and physical rehabilitation, interactive virtual environments, telemedicine.

- Neurorehabilitation processes modeling, dysfunctional models and hybrid bionics
- Smart monitoring of cognitive and physical rehabilitation
- Interactive virtual environments and content creation and management technologies in neurorehabilitation
- Modeling and smart adaptation of upper-limb neurorehabilitation therapies
- Knowledge management and Data Mining in Neurorehabilitation for the generation of clinical evidence
- Medical imaging based analysis and standardization of structural alterations in acquired brain injury
- Neurorehabilitation Telemedicine

Laboratories:

Simulation, virtual reality and image guiding technologies

Topics for Further Discussion

Topics for discussion:

- Brief presentation of Biomedical Technology Center (BTC-CTB), Universidad Politécnica de Madrid
- Hot research fields in BTC-CTB of interest for SupCom
- Possible ways to establish cooperative research
- Participation of Tunisia and Spain in mutual international programs
- Visits and interchanges of faculty and students
- Others

Pedro Gómez-Vilda, PhD
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