Design Analysis and Circuit Topology Optimization for Programmable Magnetic Neurostimulator

Majid Memarian Sorkhabi*, Frederick Gingell, Karen Wendt, Moaad Benjaber, Kawsar Ali, Daniel J. Rogers, and Timothy Denison

Abstract— Transcranial magnetic stimulation (TMS) is a form of non-invasive brain stimulation commonly used to modulate neural activity. Despite three decades of examination, the generation of flexible magnetic pulses is still a challenging technical question. It has been revealed that the characteristics of pulses influence the bio-physiology of neuromodulation. In this study, a second-generation programmable TMS (xTMS) equipment with advanced stimulus shaping is introduced that uses cascaded H-bridge inverters and a phase-shifted pulse-width modulation (PWM). A low-pass RC filter model is used to estimate stimulated neural behavior, which helps to design the magnetic pulse generator, according to neural dynamics. The proposed device can generate highly adjustable magnetic pulses, in terms of waveform, polarity and pattern. We present experimental measurements of different stimuli waveforms, such as monophasic, biphasic and polysahic shapes with peak coil current and the delivered energy of up to 6 kA and 250 J, respectively. The modular and scalable design idea presented here is a potential solution for generating arbitrary and highly customizable magnetic pulses and transferring repetitive paradigms.

I. INTRODUCTION

Transcranial Magnetic Stimulation (TMS) uses electromagnetic induction to modulate neural activity. It is used as both an FDA-approved treatment for depression and major depressive disorder [1] as well as an important diagnostic tool for neurological disorders. The stimulation coil is positioned over the appropriate cortex site and a high voltage pulse is applied to it. The induced magnetic field drives a brief current in the brain which either directly generates action potentials through depolarization or modifies the state of cortical excitability [2].

Altering stimulation parameters such as pulse magnitude and pulse rate gives increased flexibility to investigate the brain in a safe, non-invasive manner. However, conventional TMS systems are limited by the lack of flexibility of their electrical architecture, and therefore can only produce damped cosine pulses [1]. For each pulse, a thyristor triggers an energy-storage capacitor (C) to discharge the inductive stimulation coil (L), generating a short, fixed cosine magnetic pulse. The values of L and C control the resonance frequency, and thus the pulse duration. Over time, several modifications to this architecture have been suggested. Notably, the controllable TMS (cTMS) devices [3] can achieve a slightly wider variety of near-rectangular pulses by using insulated-gate bipolar transistors (IGBTs) to deliver variable width pulses.

A proof-of-concept solution, able to produce an even broader range of pulse shapes, has been described in our first programmable TMS (pTMS) concept [4]. It uses an H-bridge with switching elements that utilize a pulse width modulation (PWM) technique to approximate any arbitrary voltage pulse within its magnitude. An RC circuit model was used to estimates the intrinsic neural response to a PWM-equivalent pulse [5] [6], which was shown to be close to the neural response to a conventional TMS pulse of the same magnitude. Although it expanded the range of possible pulse shapes, our first pTMS prototype was not able to achieve higher voltage pulses. The peak voltage of a 2.5 kHz conventional biphasic TMS pulse reached around 1000 V, which is equal to 63% of the maximum stimulator output (MSO) for standard TMS devices. Increasing the DC-link voltage could exceed the breakdown voltage of high current IGBTs and cause a collector-to-emitter breakdown.

This provides a motivation to investigate whether, by adding more H-bridges to the inverter, the second-generation of the programmable TMS (xTMS) device could mimic these higher voltage TMS pulses, as well as providing higher accuracy pulses. The ‘x’ aims to represent the increased range of pulses this second-generation device can achieve. The extent to which increasing the number of H-bridges (called cascaded H-bridge inverter or CHB) will improve the xTMS system performance is investigated in this paper. A simulation is created to compare the 3-level system (one CHB) against a 5-level (two CHB) and a 7-level (three CHB) system. The result is then used to inform the design of a second prototype.

II. METHOD

A. Principle of operation

The conceptual block diagram of the proposed xTMS device is shown in Figure 1. The key architectural feature of the proposed system is the use of PWM to imitate an arbitrary

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waveform stimulus [5]. The desired reference waveform is the input to a controller, which uses Unipolar PWM (U-PWM) to trigger IGBTs in a stacked H-bridge layout [6]. The voltage produced is a multi-step approximation to the reference waveform. The core components are similar to traditional AC-AC inverters, which first transform input AC voltage up to a higher voltage level by a step-up transformer(s), then rectify it, before connecting to the high capacitance DC link capacitor(s), which maintain a certain input voltage for the inverter [7]. The generated trigger pulses, which are based on the U-PWM approach, continuously turn on/off the CHBs’ switches and mimic the desired pulse. The structure of the H-bridge and the inductive load can return the delivered energy from the coil to the DC capacitors and improve the efficiency of the proposed TMS system.

Modularity at the inverter level is one of the key concepts enabling scalability, flexibility and leads to standardization of modules of the TMS solution. Increasing the number of CHB modules and DC links improves the number of stimulus voltage levels; a cascade of ‘n’ H-bridges can produce \(2n + 1\) voltage levels at the PWM-based stimulus. Although increasing the circuit elements makes the system bulkier and more complex, the shape of the generated stimulus will ideally be closer to the desired reference waveform.

B. Simplified circuit topology

The three circuits for the 3/5/7-level xTMS circuits were modelled in MATLAB Simulink software (Powergui blockset). The D70 remote coil (Magstim Company Ltd, Wales) with a 15.5 \(\mu\)H inductance and a 20 m\(\Omega\) parasitic resistance is set for all structures. The H-bridge module is shown in Figure 1 inset. The IGBTs are modelled as non-ideal switches with equivalent parasitic internal resistance \(R_{on}=1.5\ m\Omega\) and local capacitors between collector-emitter (1 \(\mu\)F). The DC-link is modelled as a current source which, given the high capacitance of the DC link capacitor, is equivalent to an AC-DC converter. The DC-link capacitance was chosen for each circuit to ensure that voltage \(V_{DC}\) would remain above 95\% of its initial charged value throughout a standard 400 \(\mu\)s biphasic stimulus.

In order to compare the 3-level, 5-level and 7-level configurations, each controller followed the same reference pulse, a 2.5 kHz 1000 \(V_{pp}\) cosine wave. Note that due to circuit losses, the magnitude of a conventional biphasic TMS wave reaches around only 80\% of its initial voltage by the end of the pulse. The switching frequency for each H-bridge was chosen to be 10 kHz. Thus, the effective switching frequency is 20 kHz for the 5-level simulation, and 30 kHz for the 7-level simulation. An increase in switching frequency indicates that unwanted harmonics are being pushed to higher frequencies as the number of H-bridges increases.

C. Neural response model

An important characteristic of the neural membrane is the filtering of high-frequency voltages. The physiological response to the xTMS PWM stimulus was therefore modelled as a low-pass filter to estimate the membrane voltage change after a magnetic stimulation. Barker et al. estimated the time constant of the neural membrane as \(\tau = RC = 150\ \mu s\), where \(R\) represents the membrane effective resistance and \(C\), the effective membrane capacitance [8]. This simple model allows us to compare the predicted physiological response of a conventional TMS system to a xTMS \((2n+1)\)-level PWM variant.

D. Simulation results

Figure 2 compares the ideal reference and actual xTMS output pulse for both the coil voltage \(V_{COIL}\), and the modelled membrane voltage change \(\Delta V\) for reference (ideal) and the 3, 5 and 7-level xTMS configurations for a 2.5 kHz biphasic pulse. It is noteworthy that the pTMS technology can mimic different pulse waveforms such as near-rectangular, monophasic, and biphasic pulses, which are generated by other TMS devices. The \(L^2\) norm of the dissimilarity between the reference pulse and the PWM-equivalent pulse is tabulated in Table 1 for quantitative comparison, where the \(L^2\) norm for the coil voltage is:

\[
\|D_{coil}\|_2 = \sqrt{\int_{t_1}^{t_1} |V_{REF}(t) - V_{COIL}(t)|^2 dt}
\]

and the \(L^2\) norm for the membrane voltage change is:

\[
\|D_{membrane}\|_2 = \sqrt{\int_{t_1}^{t_1} |\Delta V_{REF}(t) - \Delta V_{PWM}(t)|^2 dt}
\]

where \(\Delta V_{REF}(t)\) and \(\Delta V_{PWM}(t)\) are the membrane voltage changes for the ideal reference pulse and the PWM-equivalent pulse, respectively. A value closer to 0 indicates that the xTMS generates a similar response to that of the defined (smooth) reference.
E. Cost-Benefit analysis

Table 2 compares the efficiency of each of the systems considered. The power switch loss includes Thyristor conduction loss (conventional TMS) or IGBT switching/conduction losses ((2n+1)-level PWM). The total loss also includes coil copper losses. To reduce the current stress on the IGBTs, three switches are in parallel in each leg of the H-bridge.

The cost of each system’s switching components, which is one of the main hardware costs, is used in Table 2 to compare total build cost; this is the thyristor (conventional TMS) or the IGBTs ((2n+1)-level PWM). The simulated circuits demonstrate both costs and benefits of increasing the number of H-bridges beyond the singular H-bridge. Although accuracy of waveform and total achievable voltage magnitude increases with the number of H-bridges, power loss and cost-to-build increases as well. These trade-offs are summarized in Table 2. It should be noted that the cost of DC capacitor chargers is not included in this table. By increasing the number of H-bridges, the number of required chargers will also increase.

The efficiency of the xTMS decreases with the increase in number of H-bridges, since the switching and conduction losses of each module are increased by growing the circuit size. Evidently, the cost-to-build increases with the number of CHBs. The maximum voltage of a conventional TMS is 1650V [9] [10], and so the 5-level xTMS and the 7-level xTMS are both able to reach the conventional TMS pulses. The 7-level system is more accurate at replicating the reference waveform, despite the decrease in supply voltage as a result of extra impedances in the third CHB.

The modeling results and calculations show that changing the number of PWM voltage levels from 3 to 5 can have a significant positive effect on the similarity of the PWM-based TMS pulse and reference pulse, as well as on the membrane voltage changes. Increasing further up to 7-level PWM system, however, does not show any notable improvement of the L² norm compared to a 5-level PWM system. On the other hand, the use of the three cascaded power modules to build a 7-level PWM system increases the complexity, cost-to-build and dimensions of the final device. A 7-level system, therefore, is more suited for high power applications. For conventional 1650V TMS applications, choosing a 5-level PWM-based TMS device for prototyping seems optimal.

III. IMPLEMENTED NEUROSTIMULATOR

The details of implementing the proposed xTMS device to generate 5-level PWM magnetic pulses are as follows. The primary circuit components used in the implementation are

<table>
<thead>
<tr>
<th>Reference stimulus shape</th>
<th>3-level</th>
<th>5-level</th>
<th>7-level</th>
</tr>
</thead>
<tbody>
<tr>
<td>Biphasic</td>
<td>[D_{\text{out}}]</td>
<td>0.31</td>
<td>0.15</td>
</tr>
<tr>
<td></td>
<td>[D_{\text{membrane}}]</td>
<td>0.058</td>
<td>0.021</td>
</tr>
<tr>
<td>Monophasic</td>
<td>[D_{\text{out}}]</td>
<td>0.28</td>
<td>0.17</td>
</tr>
<tr>
<td></td>
<td>[D_{\text{membrane}}]</td>
<td>0.046</td>
<td>0.036</td>
</tr>
<tr>
<td>Square</td>
<td>[D_{\text{out}}]</td>
<td>0.13</td>
<td>0.13</td>
</tr>
<tr>
<td></td>
<td>[D_{\text{membrane}}]</td>
<td>0.013</td>
<td>0.011</td>
</tr>
<tr>
<td>Half Sine</td>
<td>[D_{\text{out}}]</td>
<td>0.16</td>
<td>0.083</td>
</tr>
<tr>
<td></td>
<td>[D_{\text{membrane}}]</td>
<td>0.050</td>
<td>0.057</td>
</tr>
</tbody>
</table>

TABLE 1 L² NORM FOR DIFFERENT PULSE SHAPES

<table>
<thead>
<tr>
<th>(Biphasic pulse) 400 μs</th>
<th>Power switch loss per pulse (J)</th>
<th>Total loss per pulse (J)</th>
<th>Efficiency (%)</th>
<th>Achievable max coil voltage (V) (peak)¹</th>
<th>MSO (Joules)²</th>
<th>Cost of high voltage switches (£)³</th>
</tr>
</thead>
<tbody>
<tr>
<td>Conventional TMS</td>
<td>3.5</td>
<td>52</td>
<td>93</td>
<td>1650</td>
<td>250</td>
<td>91</td>
</tr>
<tr>
<td>3-level PWM</td>
<td>7.9</td>
<td>57</td>
<td>92</td>
<td>1000</td>
<td>100.4</td>
<td>1432</td>
</tr>
<tr>
<td>5-level PWM</td>
<td>16</td>
<td>65</td>
<td>91</td>
<td>1920</td>
<td>380</td>
<td>2865</td>
</tr>
<tr>
<td>7-level PWM</td>
<td>24</td>
<td>73</td>
<td>90</td>
<td>2880</td>
<td>775</td>
<td>4300</td>
</tr>
</tbody>
</table>

¹Based on 20% safety margin for the selected-IGBT collector-emitter breakdown voltage.
²Achievable Maximum device output (regardless of the nominal IGBT current)
³High voltage switches in a conventional TMS include one thyristor (£91 [11]) and in the xTMS include 6 IGBT modules (£238.78 each [12]) per full H-bridge.

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shown in Table 3 and the laboratory xTMS setup is represented in Figure 3. An autotransformer is used to adjust the charging voltage of the DC capacitors and the intensity of the magnetic stimulus. Control buttons are utilized to energize the autotransformer (start button), to start charging the DC capacitors (arm button) and to de-energize the autotransformer and discharge the DC capacitors (discharge button). Panel meters measure the DC link voltages and the capacitor charging currents. The emergency stop button is used to cut off the input power and mains supply and to discharge the DC capacitors. The xTMS system has been designed to comply with the BS EN 60601-1:2006+A12:2014 (Medical electrical equipment - Part 1: General requirements for basic safety and essential performance) and BS IEC 60601-1-4-2000 (General Requirements for Safety - Collateral Standard: Programmable Electrical Medical Systems) standards. The coil temperature was monitored by reading the temperature sensors embedded in each side of the coil.

A. AC/DC converter stage:

The two isolated AC/DC converters contain step-up transformers, full-wave diode rectifiers, and pulse (energy storage) capacitors. These capacitors are charged up to $V_{DC} = 800$ V and the output pulse amplitude (stimulation intensity) is adjusted by the variable autotransformers.

B. DC/AC inverter stage

The proposed xTMS device uses 32 IGBTs in the form of two cascaded H-bridges (3 parallel IGBT modules in each leg, totaling 12 modules for the DC/AC inverter block) whose outputs are connected to the stimulation coil, as shown in Figure 1. Custom-designed gate drivers are used to drive the parallel-connected IGBTs and to reinforce equal current sharing between the parallel-connected switches, more details can be found in [13]. The Micro Lab Box commercial control system is used to generate trigger pulses for the drivers at a precision of 10 ns.

C. Experimental measurements and results

Measurement results of three different stimulus waveforms are exhibited in Figure 4. The coil voltage and coil current were measured via a high-voltage differential probe (TA044, PICO TECHNOLOGY, UK) and a Rogowski current probe.

| TABLE 3 KEY COMPONENTS OF THE XTMS CIRCUIT |
|-----------------|-----------------|-----------------|-----------------|
| **Component**   | **Nominal Rating** | **Part #**      | **Manufacturer** |
| Step-up transformer | Output: 570 VAC, 10 A Class-E insulation | Custom manufactured | Eastern Transformers, UK |
| Full bridge diode rectifier | 1200 V, Ultrafast recovery diode $I_{RPM}^{\frac{\alpha}{\beta}} = 600$ A | STTH9012TV1 | STMicroelectronics |
| Energy storage capacitors | 10000 μF, 500 VDC Aluminum Capacitor | ALS70A103NT500 | KEMET Electronics |
| IGBT power module | 1.2 kV, $I_{RPM}^{\frac{\alpha}{\beta}} = 1.8$ kA | SEMIxB603GB12E4p | Semikron, Germany |
| IGBT gate driver core | $V_{GE (on)} = 15$ V, $V_{GE (off)} = -8$ V Gate peak current $= \pm 6$ A | 2SC0106T2A-12 | Power Integrations |
| Stimulation coil | 15.5 μH | D70 Remote Coil | Magstim, UK |
| Digital controller | PWM generation resolution: 10 ns | Micro Lab Box, includes Power PC Dual Core 2 GHz processor, DS1202, DS1302 I/O | dSPACE, Germany |

a. Repetitive peak forward current, $t_p = 5$ μs, $f = 5$ kHz square
b. Peak current value at collector output during pulse operation
Similar to the total harmonic distortion (THD) concept in modulation-based power converters, in the proposed xTMS system, a lower $L^2$ norm means that the inverter block generates a more accurate reproduction of a reference pulse. Increasing the number of CHB leads to the stimulus being closer to the reference signal and reduces the $L^2$ norm. However, because of the hardware cost and the system complexity, the H-bridge count can only be increased up to a certain number. On the other hand, the results obtained by the mathematical study of the RC neuron model, reveal that the distortion of a PWM stimulus waveform has a limited effect on the neural behavior and can induce an almost identical membrane potential on the neuron, compared to conventional pulses.

Recent experimental research has shown that the activation dynamics of a neuronal population are influenced by the stimulus waveform, pulse width and direction [14] [15]. The induced neuroplastic aftereffects are significantly affected by stimulus parameters such as the pulse shape [16] [17]. A methodical exploration of the effects of different pulse shapes requires the magnetic stimulator to be able to generate the desired pulses with higher flexibility and to combine arbitrary stimuli in repetitive paradigms.

Adding a second H-bridge to the previous generation of this technology (pTMS) increased the maximum output energy of the device from 100.4 J to 250 J and reduced the voltage stress on the IGBTs. One restriction in the cTMS equipment is the high current stress on the power switches as reported in [3]. Although current overload does not necessarily cause the instant failure of the IGBTs, they have been observed to substantially reduce the lifetime of the power switches and to raise the risk of failure [18]. As proposed, paralleling the IGBTs reduces the current stress of the switches and contributes to the reliability and safety of the magnetic pulse generator.

Peterchev et al. utilized two IGBT modules with voltage classes of 1.5 kV and 3.3 kV in the cTMS3 device [3]. Although this selection reduces the required number of IGBT modules and the complexity of the final system, comparing the cost of high voltage class switches with lower voltage ones that are cascaded together, has shown that the cascades topologies are more cost-effective for TMS systems. In addition, cascaded structures, such as the proposed CHB design, give more freedom in generating arbitrary magnetic pulses.

V. CONCLUSION

This study presents the unique potential of the cascaded H-bridge inverter topologies to generate an arbitrary magnetic stimulus. In particular, the implemented xTMS equipment can produce more flexible and programmable magnetic pulses and protocols, compared to the state-of-art TMS equipment. The modular property of the proposed system allows further improvement of the magnetic waveform by cascading H-bridges. The PWM switching patterns enable maximum recovery of the energy transferred to the treatment coil, which permits the generation of rapid rTMS protocols. Non-invasive neurostimulation technologies are moving towards more programmable approaches. Future developments of this versatile xTMS device to apply new modulation paradigms may support novel treatments of neurological and psychiatric disorders.

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