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Authors:



Roland Beisteiner
Medical University of Vienna



Mark Hallett



Andres M. Lozano

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Abstract and Figures

Within the last decade, ultrasound has been "rediscovered" as a technique for brain therapies. Modern technologies allow focusing ultrasound through the human skull for highly focal tissue ablation, clinical neuromodulatory brain stimulation, and targeted focal blood-brain-barrier opening. This article gives an overview on the state-of-the-art of the most recent application: ultrasound neuromodulation as a new brain therapy. Although research centers have existed for decades, the first treatment centers were not established until 2020, and clinical applications are spreading rapidly.



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Ultrasound Neuromodulation as a New Brain Therapy

Roland Beisteiner, Mark Hallett, and Andres M. Lozano*

Within the last decade, ultrasound has been “rediscovered” as a technique for brain therapies. Modern technologies allow focusing ultrasound through the human skull for highly focal tissue ablation, clinical neuromodulatory brain stimulation, and targeted focal blood-brain-barrier opening. This article gives an overview on the state-of-the-art of the most recent application: ultrasound neuromodulation as a new brain therapy. Although research centers have existed for decades, the first treatment centers were not established until 2020, and clinical applications are spreading rapidly.

1. Introduction

Within the last decade, ultrasound has been “rediscovered” as a technique for brain therapies. Notably, the very first medical applications of ultrasound were neurological applications: Pohlmann et al.^[1] tried to treat patients with neuralgia, and Dusik et al.^[2] generated the first ultrasound image, showing the lateral ventricles of the human brain. Modern technologies allow focusing ultrasound through the human skull and enable non-invasive stimulation or ablation of brain tissue. Clinical neuroscientific studies have shown that: a) highly focal tissue ablation (e.g., tremor therapy); b) clinical neuromodulatory brain stimulation (e.g., Alzheimer’s therapy); and c) targeted focal blood-brain-barrier opening (e.g., focal drug transfer) are possible. Meanwhile, ultrasound surgery and, just recently, ultrasound neuromodulation have entered routine clinical therapy.^[3,4] The rapidly

R. Beisteiner
Department of Neurology
Functional Brain Diagnostics and Therapy
High Field MR Center
Medical University of Vienna
Spitalgasse 23, Vienna 1090, Austria
E-mail: roland.beisteiner@meduniwien.ac.at

M. Hallett
Human Motor Control Section
National Institute of Neurological Disorders and Stroke
National Institutes of Health
10 Center Drive, Bethesda, MD 20892–1428, USA

A. M. Lozano
Division of Neurosurgery
Department of Surgery
University of Toronto
Toronto, ON M5T 2S8, Canada

The ORCID identification number(s) for the author(s) of this article can be found under <https://doi.org/10.1002/adv.202205634>

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ongoing methodological and clinical progress opens completely novel perspectives for ultrasound brain therapy. This is important since brain diseases are one of the most urgent problems in our rapidly ageing society. Effective medications are often missing (e.g., for dementias) and application of surgery is limited due to its invasiveness, particularly in the elderly. In light of increasing therapeutic applications of ultrasound neuromodulation and therapeutic patient requests, this article focuses on ultrasound neuromodulation as a new brain therapy. Although research centers have existed for decades, the first treatment centers were established in 2020 and currently no detailed overview over clinically applicable technologies, current therapeutic results, and therapeutic benefits compared to electromagnetic therapies exist.

2. Methodology of Clinical Ultrasound Neuromodulation

Three technical approaches have been used to modulate human brain activity. The first approach comprises standard diagnostic systems built for Transcranial Doppler Sonography to monitor and diagnose the intracerebral blood flow situation. Although they have a limited field of view, they cannot be focused to small brain areas. The second approach is highly focused system which can target stimulation to very small brain areas. The third approach is highly focused and individually navigated system which allow us to precisely target individual brain areas on individual magnetic resonance (MR) images. Since every brain is different and pathologies may result in gross morphologic brain changes, precise targeting capabilities are essential. Therefore, highly focused navigated systems are clearly state-of-the-art for clinical ultrasound neuromodulation.

For highly focused ultrasound systems two different classes exist. The first class builds on diagnostic ultrasound and uses sinus tones (single ultrasound frequencies) in the range of several hundred kilohertz. This approach is described as Focus Ultrasound (FUS). Typically, FUS sinus tones are presented in a pulsed mode, which means short trains of ultrasound (e.g., 100 ms) are followed by silence (e.g., 300 ms). The relationship between the ultrasound train and the following pause before the next ultrasound train defines the duty cycle (here 25%). In the literature an extraordinary variability in sonication schemes has been described, including a blocked presentation of duty cycles which may then be paused for a longer time (seconds) and then generate longer second order stimulation pulses (e.g.,^[5]). For neuromodulatory effects, such sonication patterns are used over several minutes. Meanwhile, various FUS systems are in human

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... The tFUS renaissance has also spurred exciting developments in human neuroscience research 21 , increasing its potential for addressing clinical challenges [21] [22] [23] . In addressing the medical challenge of disorders of consciousness (DOC), Cain et al. applied low-intensity focused ultrasound to the central thalamus in a cohort of DOC patients 24

... The data were z-scored with respect to the 200 ms pre-stimulus baseline. N200 powers were computed by applying timefrequency Morlet waveform power transformation to the 100 to 250 ms post-stimulus window for theta (4)(5)(6)(7) (8), alpha (8 - 12 Hz), beta (12)(13)(14)(15)(16)(17)(18)(19)(20)(21) (22) (23)(24)(25)(26)(27)(28)(29)(30), and low gamma (30-40 Hz) frequencies (Fig. 3). Linear mixed-effect models were fitted to N200 powers as a function of experimental condition (Eq. ...

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... Two classes of technologies are currently available for navigated focal stimulation, low-intensity transcranial focused ultrasound (e.g., tFUS, LIFUS) and transcranial pulse stimulation (TPS). While tFUS is administered in intermittent trains of ultrasound pulses using sinus tones, TPS applies ultrashort (3 μ s) pressure pulses with a range of different frequencies which are repeated at 1 to 8 Hz (for review see Beisteiner et al., 2023) . Both techniques result in an elongated elliptical ultrasound beam with an axial resolution of approximately 4 cm and a transversal resolution of approximately 4 mm full width at half maximum for typical carrier frequencies of 500 kHz for tFUS and 250 kHz for TPS (Beisteiner et al., 2019;Truong et al., 2022). ...

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... tFUS is an emerging, non-invasive neuromodulation tool for deep brain stimulation that has shown promise in treating various neurological and psychiatric conditions [14][15] [16] . Following its FDA approval for Parkinson's disease and essential tremor, tFUS has seen significant advancements in clinical validation [17]. There is an increasing urgency to optimize tFUS therapeutic applications through expanding research. ...

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... TPS may play an important role in the restoration of brain function in individuals with CNS diseases (35). Application of ultrasound to the brain is a revolutionary therapeutic approach for patients with neuropsychiatric symptoms (37, 38). Since transcranial pulse stimulation (TPS) is a relatively new noninvasive brain stimulation (NIBS) technology, only four studies thus far have been conducted in clinical populations. ...

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Current state of clinical ultrasound neuromodulation

June 2024 · Frontiers in Neuroscience

[Eva Matt](#) · [Sonja Radjenovic](#) · [Michael Mitterwallner](#) · [Roland Beisteiner](#)

Unmatched by other non-invasive brain stimulation techniques, transcranial ultrasound (TUS) offers highly focal stimulation not only on the cortical surface but also in deep brain structures. These unique attributes are invaluable in both basic and clinical research and might open new avenues for treating neurological and psychiatric diseases. Here, we provide a concise overview of the expanding ... [\[Show full abstract\]](#)

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Safety of Clinical Ultrasound Neuromodulation

September 2022 · Brain Sciences

[Sonja Radjenovic](#) · [Gregor Dörl](#) · [Martin Gaal](#) · [Roland Beisteiner](#)

Transcranial ultrasound holds much potential as a safe, non-invasive modality for navigated neuromodulation, with low-intensity focused ultrasound (FUS) and transcranial pulse stimulation (TPS) representing the two main modalities. While neuroscientific and preclinical applications have received much interest, clinical applications are still relatively scarce. For safety considerations, the ... [\[Show full abstract\]](#)

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Human Ultrasound Neuromodulation: State of the Art

February 2022 · Brain Sciences

[Roland Beisteiner](#)

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