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Abstract: - Neurorehabilitation is an important part of getting better for people who have nerve illnesses or accidents. Brain-computer interfaces (BCIs) and robotic exoskeletons have shown promise in better recovery results by allowing focused therapy and making neurons more flexible. This paper gives an outline of the current study on closed-loop control systems that combine robotic exoskeletons and brain-computer interfaces (BCIs) for neurorehabilitation. It also talks about the pros and cons of these systems. Closed-loop control systems try to make two-way communication possible between the user's brain activity (measured by BCIs) and the robotic suit. This way, treatments can be changed in real time based on the user's neurological signs. This method makes it possible for more personalized and flexible therapy plans, which can help people recover their movement skills and become more useful. When BCIs are combined with artificial exoskeletons, they offer many benefits, such as exact control over movement parameters, increased involvement and motivation through immersive feedback, and the chance to induce learning by coordinating brain activity and physical output. To make these systems work better, though, problems like signal processing delay, calibration issues, and the need for user training must be fixed. Recent research has shown that closed-loop control systems can be used and might be helpful in a number of neurorehabilitation situations, such as helping people who have had a stroke or spinal cord injury get their movement skills back and helping people with neurological conditions regain their independence. In the future, researchers should work on improving these systems' algorithms and hardware, running large-scale clinical studies to show that they work, and finding new ways to improve neurorehabilitation results by combining modern technology.

Keywords: Neurorehabilitation, Robotic exoskeletons, Brain-computer interfaces, Closed-loop control, Motor recovery

I. INTRODUCTION

Neurorehabilitation is a very important process for people who are healing from brain accidents or illnesses and want to get their movement and cognitive skills back to normal or better. Repetitive actions, physical treatment, and task-specific training are common parts of traditional neurorehabilitation methods. These can be time-consuming, hard to do, and not always fit the needs of each person [1]. In the past few years, progress in robots and neurotechnology has led to the creation of new ways to retrain that are more effective and tailored to each person's needs. Robotic exoskeletons are devices that can be worn and can help, improve, or even replace a person's movement skills. In neurorehabilitation, they are often used to help with and support the body during training sessions. Robotic exoskeletons can help people do recovery exercises better and with less effort by

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imitating the way joints move naturally and offering different amounts of support. Also, [2] robotic exoskeletons can gather useful information about how the user moves and their progress, which can be used to instantly change the recovery plan. Another cutting-edge device that has shown a lot of promise in neurorehabilitation is brain-computer interfaces (BCIs). With a BCI, the brain and outside equipment can talk to each other directly, without using the usual muscle paths. In the field of neurorehabilitation, BCIs [3] can be used to read brain messages about how someone wants to move and turn them into instructions for robotic exoskeletons. This direct brain-machine link lets people with neurological problems use their thoughts to control robotic exoskeletons. This opens up new ways to help people recover. One of the hardest parts of neurorehabilitation is coming up with personalized treatment plans that can be changed to fit each person's needs. The mental state of each person is different, and how they respond to treatment can also be very different. Closed-loop control systems, which combine robotic exoskeletons with brain-computer interfaces, look like a good way to deal with this problem. By constantly tracking the user's brain activity and how well they can move, these systems can change how much help the exoskeleton gives, making sure that the therapy is always suited to the person's current needs and abilities.



Figure 1: Overview of Closed-Loop Control of Robotic Exoskeletons and Brain-Computer Interfaces

The idea of closed-loop control in neurorehabilitation comes from the way healthy muscle control uses natural feedback loops. When a person is healthy, their brain is constantly getting sense feedback from their moves. They [4] use this knowledge to change and improve their muscle orders. For closed-loop control systems, this feedback loop is made to work in a fake way, with the brain getting information about how the robotic body is moving from the BCI. The brain and the exoskeleton can talk to each other in both directions, which makes controlling the device feel more natural and easy. This results in better recovery outcomes. Neurorehabilitation settings include stroke rehabilitation, spinal cord injury rehabilitation, and motor function repair in people with neurological diseases. Closed-loop control methods have been used in these settings. Studies have shown that these systems can help patients recover their movement skills faster, become more involved in their treatment, and achieve better functional results compared to standard therapy methods. There are, [5] however, some problems that need to be fixed before closed-loop control systems can fully be used in neurorehabilitation. Signal processing lag is one of the biggest problems. This is the time it takes for the brain to send an order and the suit to move in response. This delay might be because of the time it takes to get the brain signals, understand them, and figure out what they mean. It may also take time for the suit to react to these signals. Keeping signal processing lag as low as possible is important for natural and easy movement control, since any delay can make the user feel like they don't have control and make them angry. Setting up the BCI and the robotic suit is another problem. BCIs use complicated algorithms to figure out what brain waves mean and send those orders to the robot. These [6] programs need to be taught with data from the user, which can take a long time and needs to be overseen by a professional. To make sure it works best, the exoskeleton also needs to be adjusted to fit the user's body and the way they move. If the setting is wrong, the movement help may not work right, which can make the recovery program less effective. Another important part of closed-loop control systems in neurorehabilitation is training the people who will be using them. People need to learn how to use the BCI and the [7] robotic suit correctly, which can be hard for people who have serious brain problems. To get the most out of closed-loop control systems and make sure they work well in the long term, users must be given thorough training and help. Even with these problems, closed-loop control methods could be very helpful in neurorehabilitation. These systems offer a new way to heal that is customizable, adaptable, and successful by blending the best parts of artificial exoskeletons and BCIs. As more study is done in this area, closed-loop control systems may become normal in neurorehabilitation, which would help millions of people around the world get better and regain their freedom.

II. RELATED WORK

For neurorehabilitation, one important area of study is making closed-loop control devices that combine artificial exoskeletons and BCIs. One study [8] showed how a closed-loop control system can help stroke patients recover their movement skills. The technology used EEG data to figure out when the patient wanted to move and then changed how much help the suit gave them based on that information. Motor function and muscle power got better than with traditional treatment, according to the results. [9] did another study on how BCIs can help people who have had spinal cord injuries move again. The researchers created a closed-loop control system that used EEG data to figure out if a person wanted to walk and then used that knowledge to control an exoskeleton for the lower limb. After training, the people in the study were able to walk with the help of the suit, which was a good sign. Closed-loop control devices have been used for brain recovery as well as physical rehabilitation. One study [10] used a closed-loop BCI device to help people with traumatic brain injuries improve their working memory and attention. The method gave the person input in real time based on how their brain was working, which helped them get smarter over time. The creation of adaptable algorithms for closed-loop control systems is another important area of study.

These programs can change how much help the suit gives based on how well the person is doing and how far they have come. [11] for example, made an adaptable control system for a lower-limb robot that changed how much help the person got based on how they walked. The research showed that the adaptable method made walking faster and easier while also making people less tired compared to a set help mode. There are some problems that need to be fixed before closed-loop control systems can be used more effectively in neurorehabilitation. One problem is making signal processing methods for BCIs that are more reliable and accurate. EEG data, which can be noisy and prone to errors, are used in current BCI systems. To make sure that exoskeletons can be controlled correctly [12] in the future, researchers should work on making signals more reliable and better quality. Making tools for BCIs that are easy to understand and use is another problem. A lot of the modern BCIs need a lot of training and tuning, which can be hard for people who want to use them. Future BCIs should be easier to use and understand, which will make controlling exoskeletons easier and more natural. Closed-loop control of artificial exoskeletons and BCIs has shown a lot of potential in this area of study as a way to improve neurorehabilitation. More study and development needs to be done to solve the problems that are already there and make these tools even more useful in hospital settings.

Method	Approach	Key Finding	Application	Scope
EEG-based BCI [13]	Closed-loop control system	Real-time decoding of movement intention from EEG signals for controlling exoskeletons.	Stroke rehabilitation, spinal cord injury rehabilitation.	Focuses on improving motor function and muscle strength in patients with neurological disorders.
Adaptive control algorithm [14]	Adaptive assistance adjustment	Dynamic adjustment of exoskeleton assistance based on user's gait pattern.	Lower-limb exoskeletons.	Improves walking efficiency and reduces fatigue compared to fixed assistance modes.

Table 1:	Summary	of	related	work
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Trajectory tracking [15]	Mimicking natural joint movements	Replicates natural joint movements to assist users in performing rehabilitation exercises.	Motor rehabilitation.	Provides targeted therapy and enhances neural plasticity.
EEG-based neurofeedback [16]	Real-time feedback based on brain activity	Provides real-time feedback to improve attention and working memory.	Cognitive rehabilitation, traumatic brain injury.	Helps patients improve cognitive function over time.
EMG-based control [17]	Muscle activity detection	Uses EMG signals to detect muscle activity and control exoskeletons.	Upper-limb rehabilitation.	Focuses on improving upper- limb motor function and dexterity.
Combined EEG-EMG control [18]	Hybrid brain-muscle control	Combines EEG and EMG signals for more accurate and robust control of exoskeletons.	Comprehensive neurorehabilitation.	Offers more natural and intuitive control of exoskeletons.
Virtual reality integration [19]	Immersive rehabilitation environments	Integrates virtual reality with exoskeletons to enhance user engagement and motivation.	Various neurorehabilitation settings.	Provides a more engaging and effective rehabilitation experience.
Machine learning algorithms [20]	Improved signal processing and decoding	Uses machine learning to improve signal processing and decoding of brain signals.	Various neurorehabilitation applications.	Enhances the accuracy and reliability of BCI systems.
Hybrid exoskeletons	Combination of robotic and passive elements	Integrates robotic and passive elements to provide tailored assistance based on user's needs.	Rehabilitation of multiple body parts.	Offers more flexibility and adaptability in rehabilitation protocols.
Longitudinal studies	Long-term effects of closed-loop systems	Investigates the long-term impact of closed-loop systems on neurorehabilitation outcomes.	Extended rehabilitation programs.	Explores the sustainability and effectiveness of closed-loop systems over time.

Usability studies	User experience and acceptance	Assesses the usability and acceptance of closed-loop systems by patients and clinicians.	Clinical settings.	Evaluates the practicality and feasibility of implementing closed-loop systems in real- world scenarios.
Cost- effectiveness analysis	Economic impact of closed-loop systems	Analyzes the cost- effectiveness of implementing closed-loop systems in healthcare settings.	Healthcare policy and decision- making.	Provides insights into the economic viability of adopting closed- loop systems in neurorehabilitation.

III. ROBOTIC EXOSKELETONS IN NEUROREHABILITATION

A. Explanation of robotic exoskeletons and their role in neurorehabilitation

Robotic exoskeletons are devices that can be worn and attached to a person's body to help them move or make their actions better. Robotic exoskeletons are an important part of neurorehabilitation because they help people with nerve problems regain their muscle function and movement. The idea behind these devices is that they should move like a person's joints do naturally. They are meant to support and help people do therapeutic exercises and daily tasks. One of the best things about artificial exoskeletons for neurorehabilitation is that they can focus treatment. Most of the time, traditional ways of rehab involve broad workouts that might not work well for certain muscle groups or ways of moving. Robotic exoskeletons, on the other hand, can be designed to give each person the exact amount of help and support they need. This makes sure that their treatment is tailored to their specific condition and goals. One more good thing about robotic exoskeletons is that they can offer different amounts of help. As people get better, they may need more or less help as their recovery goes on. Robotic exoskeletons are easy to change so they can give more or less support depending on what is needed. This makes it possible to create a personalized and gradual recovery program.



Figure 2: Illustration of robotic exoskeletons in neurorehabilitation systems

Robotic exoskeletons are [12] also helpful because they give feedback in real time. These gadgets can give instant feedback on the user's performance by tracking their movements and muscle activity. This helps them fix their

moves and get better at controlling their muscles. This real-time feedback can be especially helpful for people who have nerve problems and have trouble controlling their moves. Neuronal plasticity is the brain's ability to change how it works by making new nerve connections. Robotic exoskeletons can also help this process. Robotic exoskeletons can help stimulate the brain's motor center and make it easier to learn new motor skills by moving in specific ways over and over again. This can be especially helpful for people who have had a stroke or spinal cord injury because it can help them relearn movement skills they lost. Robotic exoskeletons can also help patients become more interested and motivated. The process of rehabilitation can be long and hard, and many people may give up or stop trying. By giving patients direct feedback and letting them keep track of their progress, robotic exoskeletons can make treatment more fun and interesting. This can help people stay with their recovery program longer, which can lead to better results in the long run.

Robotic exoskeletons can help patients' physical health as well as their ability to help them physically. Being immobile for a long time can weaken muscles, make joints stiff, and cause other problems. Because they allow people to move around more, robotic exoskeletons can help avoid these secondary problems and improve general health.

B. Challenges and limitations of robotic exoskeletons

The price of robotic exoskeletons is one of their biggest problems. It can be pricey to make and keep up these gadgets, which keeps many people who could benefit from them from getting them. The general cost of using robotic exoskeletons in therapy programs is also increased by the cost of teaching healthcare workers how to use and take care of these devices.

- The fact that robotic exoskeletons are hard to understand is another problem. There are many mechanical and computer parts in these devices that all need to work together perfectly for them to help. Any problem or imbalance with these parts can have a big effect on how well and safely the device works.
- On top of that, artificial exoskeletons' size and weight can be problems. Some exoskeletons are big and heavy, which makes them hard to wear for long amounts of time. This can be especially hard for people who aren't very strong or mobile because the extra weight and size of the armor can make it hard for them to move and feel comfortable.
- Another problem with robotic exoskeletons is that they can't be changed to fit different body types and sizes. Most exoskeletons are made to fit a certain range of body sizes, which means that not all people may be able to use them. This can be a big problem because body form and size differences can make it hard for some people to wear the armor comfortably, which could make it less useful. Also, both patients and healthcare workers may find it hard to handle robotic exoskeletons because they are so complicated. It might be hard for patients to figure out how to use the suit properly, and it might be hard for healthcare workers to set the device to help each patient in the right way.
- Another problem is that there aren't many long-term studies that look at how well robotic exoskeletons work for neurorehabilitation. More research is needed to find out how these gadgets affect patients' motor function, movement, and quality of life over the long run, even though short-term studies have shown positive results. Also, robotic exoskeletons might not be right for all people who have neural problems. Some people may not be able to use these gadgets safely or successfully because of health problems or physical limits. Also, people with serious cognitive problems might find it hard to understand and use the robotic suit, which limits its usefulness in these groups [21].

Even with these problems and restrictions, robotic exoskeletons are still very promising for neurorehabilitation. As technology improves, exoskeletons that are lighter, more flexible, and easier to use are being made. These will help solve many of the problems that exist now. As more study is done in this area, robotic exoskeletons are likely to become an even more important way to help people with nerve problems get their movement and independence back.

IV. BRAIN-COMPUTER INTERFACES IN NEUROREHABILITATION

A. Explanation of BCIs and their role in neurorehabilitation

Brain-computer interfaces, or BCIs, are high-tech systems that let the brain talk directly to outside devices, without using the usual muscle paths. Brain-computer interfaces (BCIs) are very important in neurorehabilitation

because they help people with neurological problems recover their freedom, physical function, and communication skills. Brain-computer interfaces (BCIs) pick up and make sense of brain messages that have to do with movement planning, physical awareness, or mental processes [11]. Then, these messages are turned into orders that can run outside devices like computer interfaces, robotic exoskeletons, or artificial limbs. In neurorehabilitation, BCIs are often used to help people who have movement problems like cerebral palsy, stroke, or spinal cord injury get back control of their actions and make their lives better. One of the most important things that BCIs do in neurorehabilitation is help people who have serious movement problems communicate. With a BCI, these people can use only their brain activity to direct communication tools like computer screens or text-to-speech software. This can make it a lot easier for them to connect with their surroundings and talk to other people, which can improve their quality of life and freedom [15].

On top of that, BCIs can help people who have problems with their muscles regain control over their actions. BCIs can help people move by reading brain signals that tell them they want to move and controlling outside devices like robotic exoskeletons or functional electrical stimulation systems to help them do it. People who have nerve problems may be able to do therapy exercises, daily living tasks, and even walk again with this help, which can improve their movement and functional freedom. Additionally, BCIs can give us important information about how the brain changes and adapts. Brain signs can help researchers learn more about how the brain changes after an accident or illness by looking at them before and after recovery. This knowledge can help guide the creation of better therapy plans and methods, which will ultimately lead to better results for people with neurological disabilities.



Figure 3: Step wise process for Brain-Computer Interfaces in Neurorehabilitation

B. Benefits of BCIs in rehabilitation

Brain-computer interfaces (BCIs) have many important benefits in neurorehabilitation. They have changed the way people with brain illnesses or accidents can get back to normal and make their lives better. Some of these perks are:

• Better Communication: One of the most important effects of BCIs in therapy is that they help people with serious movement problems communicate. It is possible for these people to use their brain activity to directly handle communication devices like computer screens or text-to-speech software. This can make it a lot easier for them to connect with other people and do normal things.

- Assistive Technology: BCIs can be used as assistive technology to help people who have trouble moving their bodies control outside equipment. BCIs can handle artificial arms, exoskeletons, or functional electrical stimulation systems, which lets people do more of their daily tasks and therapy routines on their own.
- Helping People Get Back Their Motor Function: BCIs [21] can help people who have brain problems get back their motor function. By reading brain patterns to figure out what the user wants to do, BCIs can handle outside gadgets that help with moving. This can help people get back control of their movements and make it easier for them to move around.
- Better neuroplasticity: BCIs can help neuroplasticity, which is the brain's ability to change how it works by making new links between neurons. BCIs can help people heal by stimulating the brain's motor cortex with focused, repeated moves that make it easier to learn new motor skills.
- Real-Time Feedback: Brain-computer interfaces (BCIs) give real-time feedback on brain activity, which lets patients and doctors see how they're doing and change their treatment plans as needed. This real-time feedback can help people understand and improve their brain control, which makes therapy programs more successful.
- Individualized treatment: Based on a person's brain activity, BCIs allow for individualized treatment plans. By looking at brain patterns, BCIs can make sure that recovery routines are tailored to the needs of each patient, which makes treatment more effective.
- Increased Independence: BCIs can help people with movement disabilities be more independent and live better lives by letting them handle external gadgets. Patients can do daily things like eating and getting dressed on their own, which makes them feel more independent.
- Research and Understanding: BCIs help us understand how the brain works and how it can change. Researchers can learn more about how the brain responds to injury or illness by looking at brain signs before and after therapy. This can lead to better ways to do rehabilitation.

BCIs have many benefits in neurorehabilitation, such as better communication and helpful technology, as well as better muscle function repair and retraining. These improvements could make a big difference in the lives of people with brain illnesses or accidents, giving them new ways to heal and be independent.

Problems with and limits of BCIs

While BCIs show a lot of promise in neurorehabilitation, they also have some problems that need to be fixed before they can reach their full potential:

Brain-Computer Interfaces (BCIs) depend on being able to accurately and reliably pick up brain signals. But brain messages can be loud and prone to errors, which makes it hard to get useful information from them. Improving data processing methods is a must if we want to make BCIs more reliable.

- Training and Adaptation for Users: It can be hard for people to learn how to use a BCI well, so they need a lot of training and adjusting. To handle the gadget, patients have to learn how to change the way their brains work, which can be hard and take a lot of time.
- Less Control and Accuracy: Compared to standard muscle paths, BCIs may not give you as much control and accuracy. Some patients may have trouble with fine motor skills or making exact moves, which can make BCIs less useful in some situations.
- Cost and Accessibility: Building, maintaining, and using a BCI can be pricey, which keeps many people who could benefit from them from getting one. Getting rid of hurdles related to cost and making BCIs easier to get is necessary to make sure that a lot of people use them for recovery.
- Moral and Privacy Issues: Brain-computer interfaces (BCIs) make people think about the right way to gather and use brain data, as well as their own privacy. For the responsible use of BCIs in professional situations, it is important to protect patient rights and data.
- Long-Term Durability and Reliability: If BCIs are to be used in therapeutic settings for a long time, they need to be durable and reliable. Making sure that BCIs last as long as possible and don't need a lot of upkeep is important for their usefulness and efficiency.
- Connecting to Current Technologies: BCIs need to work well with current therapy technologies and methods. Compatibility and compatibility problems can make it hard for BCIs to be used in professional situations.

• Regulatory and Legal Considerations: When it comes to developing, approving, and using BCIs, there are regulatory and legal things that need to be thought about. For BCIs to be widely used in neurorehabilitation, it is important to make sure they meet government standards and deal with legal problems.

V. CLOSED-LOOP CONTROL SYSTEMS

A. Closed-Loop Control Systems in Neurorehabilitation

In neurorehabilitation, closed-loop control systems are high-tech systems that let the user's brain signals (read by a BCI) and the movement of a robotic body talk to each other in real time. These systems create a closed-loop feedback system by using the user's brain activity to change how much help the suit gives. This lets the person handle the suit more precisely and in a way that adapts to their wants and abilities.



Figure 4: Representation of closed-loop control systems neurorehabilitation

B. Integration of Robotic Exoskeletons and BCIs in Closed-Loop Control Systems

With closed-loop control systems, BCIs read the user's brain waves to figure out what they want to do. After the signals are translated, they are used to direct how a robotic body moves, for example by changing how much help it gives during a recovery activity. There is sense input from the exoskeleton's moves that is sent back to the BCI. This feedback loop lets the system keep changing how much help the suit gives based on the user's performance and progress. This makes the recovery process smooth and flexible.

C. Advantages of Closed-Loop Control Systems over Traditional Rehabilitation Approaches

Help that is tailored to your needs and abilities: Closed-loop control systems offer tailored help based on the current needs and abilities of the user. Traditional ways of rehab often offer answers that work for everyone, but they might not work for all people.

- Real-Time Feedback and Changes: Closed-loop control systems give real-time feedback on how the person is doing, so the recovery program can be changed right away. If you compare this to standard methods, where input is often delayed, therapy may work better and faster.
- Better Motor Learning: Closed-loop control systems can improve motor learning and brain development by giving exact and adaptable help. Users can get better at controlling their moves over time with the help of the real-time feedback loop.
- Better Motivation and Engagement: Because closed-loop control systems are engaging, they can make users more interested and motivated during recovery. With the ability to see effects right away, patients may be more likely to stick with their rehab routine.

- Targeted treatment: Compared to traditional methods, closed-loop control systems can focus on certain muscle groups or movement patterns, making treatment more targeted. This focused method can help people get better faster and more effectively.
- Lower Risk of Injury: Closed-loop control systems can help users with recovery routines, which lowers the risk of injury. The system can tell when the user is having trouble or is about to overwork themselves and change how much help they get accordingly.

VI. APPLICATIONS OF CLOSED-LOOP CONTROL SYSTEMS IN NEUROREHABILITATION

There is a lot of hope that closed-loop control methods can make neurorehabilitation more successful and efficient. These systems use brain signs from the user to change how much help robotic exoskeletons give, making therapy more personalized and flexible. This part talks about current research and studies that use closed-loop control systems, as well as case studies and examples of how these systems have been used successfully and how they have affected the results of neurorehabilitation.

A. Overview of Current Research and Studies

A lot of research has been done on the use of closed-loop control systems in neurorehabilitation, looking at a wide range of brain accidents and illnesses. The studies and showed that a closed-loop control system can help with stroke recovery. EEG readings were used by the system to figure out when the person wanted to move, and a robotic suit was changed to help them move. Compared to traditional treatment, the results showed big gains in muscle power and motor function.

- In another study that looked at how closed-loop control systems can be used to help people who have had spinal cord injuries get better. Researchers created a system that could read EEG data to figure out if a person wanted to walk and then use that knowledge to control a robot for the lower limb. After training, the people in the study were able to walk with the help of the suit, which was a good sign.
- In Another Study, looked into how closed-loop BCIs can be used to help people with serious brain injuries recover their cognitive abilities. A BCI system gave real-time input based on the user's brain activity, which helped them get better at paying attention and using their memories. The study showed that cognitive ability got better over time, which shows that closed-loop BCIs could be useful in cognitive recovery.

B. Case Studies and Examples of Successful Applications

Several case studies and examples show that closed-loop control systems can be used successfully in neurorehabilitation. Ian Burkhart, a paraplegic person who got the ability to move his hand again with the help of a closed-loop BCI, is one example of this. The system read his brain messages and used them to control an electrical treatment system that worked, which let him use his hand to grab and move things. One more example is how closed-loop control systems are used in the recovery of children. In the study that showed how a closed-loop device could help kids with cerebral palsy improve their hand movement. The method gave the child input in real time based on how their brain was working, which helped them get better at motor skills and hand-eye coordination.

C. Impact of Closed-Loop Control Systems on Neurorehabilitation Outcomes

Closed-loop control systems have made a big difference in the success of neurorehabilitation and are better than older methods in many ways. One of the best things about it is that it lets you give personalized, flexible help based on the user's current wants and skills. This can make therapy more efficient and effective because the system can change how much help it gives based on the user's growth and performance. It has also been shown that closed-loop control methods improve brain development and muscle learning. Users can get better at controlling their moves over time with the help of these systems, which give exact and flexible help. This can help people with brain illnesses or accidents have better long-term results and be more functionally independent. Overall, closed-loop control methods have shown a lot of potential in making neurorehabilitation work better. These systems can help people with brain diseases or accidents recover function and improve their quality of life by giving them personalized and adaptable help. As more study is done in this area, closed-loop control systems are expected to become more important in neurorehabilitation, opening up new ways for people to heal and get better.

VI. CHALLENGES AND FUTURE DIRECTIONS

A. Signal Processing Latency

The delay between brain signals being picked up and the robotic body making the appropriate action is one of the biggest problems with closed-loop control systems. This delay is called signal processing latency. This delay can make the system less fast and accurate, which results in less-than-ideal performance.

To cut down on data processing delay, experts are looking into a number of different approaches, such as:

- We are working on optimizing signal processing methods so that they work better and can process brain data more quickly without losing accuracy.
- Hardware optimization means using fast computer parts, like GPUs, to speed up data processing and lower delay.
- Parallel Processing: Using methods for parallel processing to split up signal processing jobs among several processing units, which lowers delay even more.
- Predictive Modeling: Using methods for predictive modeling to guess what the user will do next based on past brain signs, which cuts down on the need for processing in real time.
- Feedback Optimization: Making the feedback loop between the BCI and the robotic suit work better so that the system responds faster generally.

B. Calibration of BCIs and Robotic Exoskeletons

Another problem is that BCIs and artificial exoskeletons need to be calibrated to make sure they work correctly and reliably. BCIs need to be calibrated so that they can correctly interpret what the user is trying to do, and robotic exoskeletons need to be adjusted so that they offer the right amount of support or pressure. They are looking into automated testing methods that can adapt to changes over time in the user's brain waves or moving patterns in order to solve this problem. The goal of these methods is to reduce the amount of human tuning that needs to be done. This will make the system easier to use and more efficient.

C. User Training and Support for Optimal Use of Closed-Loop Control Systems

For closed-loop control systems to work best in neurorehabilitation, users must be trained and given help. Patients need to be taught how to use the system correctly and understand what the BCI and artificial suit are telling them. Researchers are working on engaging training tools and user interfaces that can help patients through the tuning process and give them real-time feedback on how they're doing. This will improve user training and support. Closed-loop control methods in neurorehabilitation can also work well in the long run if patients and therapists get continued support and education.

D. Future Research Directions and Potential Advancements in the Field

Closed-loop control methods for neurorehabilitation will be studied more in the future in a number of important areas, such as:

- Better Signal Processing: Working on better signal processing methods that can get more information from brain data and cut down on processing time.
- Enhanced Neurofeedback: Using more advanced neurofeedback methods to give people feedback that is more useful and instructive, which helps them gain more control over the system.
- Multimodal Interfaces: Looking into how multimodal interfaces, like mixing EEG with other bodily data or imaging techniques, can be used to make BCIs more accurate and reliable.
- Long-Term Adaptation: Making systems that can adjust to changes in the person's brain messages or movement patterns over time so that they can keep working at their best while they are recovering.
- Clinical Validation: Running large-scale clinical studies to prove that closed-loop control systems work and are safe in a range of neurorehabilitation settings and patient groups.

VIII. CONCLUSION

Putting closed-loop control systems together with robotic exoskeletons and brain-computer interfaces (BCIs) is a completely new way to help people recover from brain injuries. These systems help people with neurological

illnesses or accidents in a unique, flexible, and real-time way based on their brain messages. This helps them recover their movement skills and general quality of life. Traditional methods of recovery have problems like not being able to change, not giving feedback in real time, and using standard training tools. Closed-loop control systems solve these problems. These systems encourage neuroplasticity, improve motor learning, and make therapy more successful by giving personalized and adaptable help. Several studies and real-life examples have shown that closed-loop control systems can be used successfully in neurorehabilitation. People with serious physical disabilities have been able to regain their mobility and function thanks to these systems have also shown promise in the rehabilitation of children, the rehabilitation of brain disorders, and the rehabilitation of spinal cord injuries. This shows how flexible they are and how they might help a wide range of neurological conditions. The next step in study into closed-loop control systems for neurorehabilitation will be to find solutions to problems like signal processing delay, calibration, and user training. It is believed that progress in these areas will make closed-loop control systems even more useful and effective, which will make them a valuable tool in neurorehabilitation.

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