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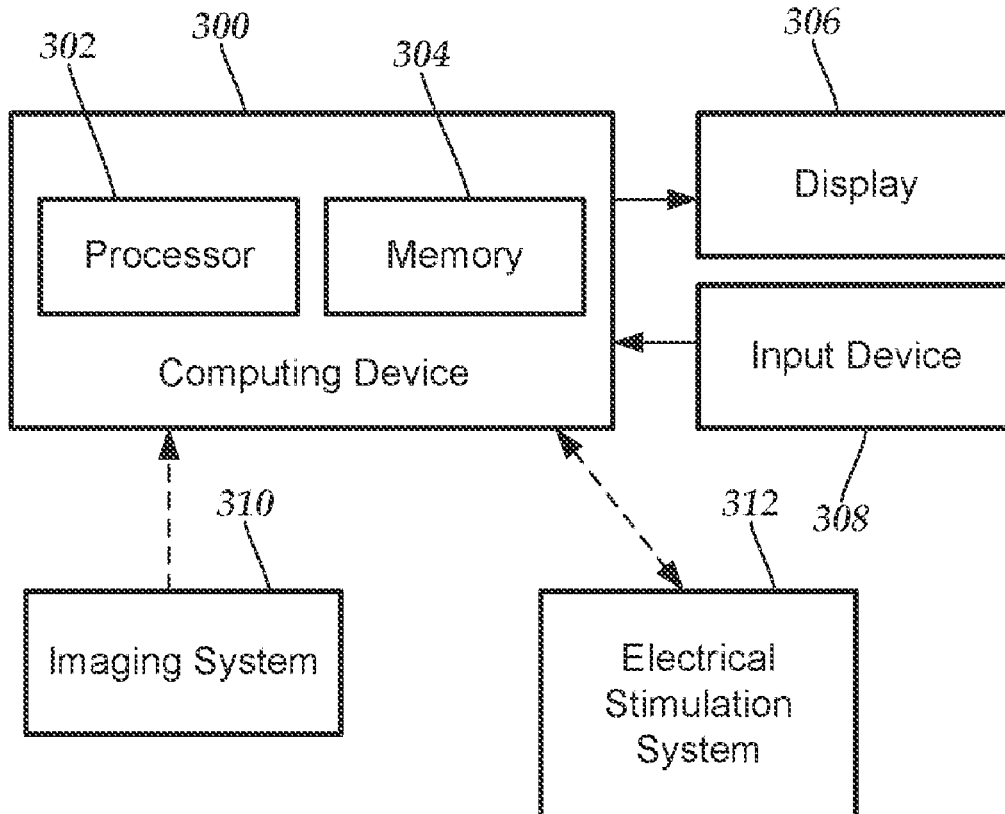
(19) **United States**(12) **Patent Application Publication**
Carcieri et al.(10) **Pub. No.: US 2021/0361947 A1**(43) **Pub. Date: Nov. 25, 2021**(54) **SYSTEMS AND METHODS FOR SELECTING STIMULATION PARAMETERS BASED ON STIMULATION TARGET REGION, EFFECTS, OR SIDE EFFECTS***A61N 1/05* (2006.01)*A61N 1/372* (2006.01)*A61N 1/378* (2006.01)(52) **U.S. Cl.**CPC *A61N 1/36082* (2013.01); *G16H 40/63*(2018.01); *G16H 50/50* (2018.01); *G16H**20/30* (2018.01); *A61N 1/3787* (2013.01);*A61N 1/36071* (2013.01); *A61N 1/36135*(2013.01); *A61N 1/37241* (2013.01); *A61N**1/37247* (2013.01); *A61N 1/0551* (2013.01)(71) Applicant: **Boston Scientific Neuromodulation Corporation**, Valencia, CA (US)(72) Inventors: **Stephen Carcieri**, Los Angeles, CA (US); **G. Karl Steinke**, Valencia, CA (US); **Richard Mustakos**, Simi Valley, CA (US)(21) Appl. No.: **17/393,752**(22) Filed: **Aug. 4, 2021****Related U.S. Application Data**

(60) Continuation of application No. 16/537,136, filed on Aug. 9, 2019, which is a division of application No. 15/194,336, filed on Jun. 27, 2016, now abandoned.

(60) Provisional application No. 62/186,184, filed on Jun. 29, 2015.

Publication Classification(51) **Int. Cl.***A61N 1/36* (2006.01)*G16H 40/63* (2006.01)*G16H 50/50* (2006.01)*G16H 20/30* (2006.01)(57) **ABSTRACT**

A system or method for identifying sets of stimulation parameters can include receiving at least one image of a region of a patient; registering the at least one image with an anatomical or physiological atlas that identifies different anatomical or physiological structures; identifying a desired stimulation region using the at least one image; comparing the desired stimulation region with each of a plurality of predetermined estimated stimulation regions, where each of the estimated stimulation regions is a calculated estimate of a stimulation volume for a corresponding set of electrical stimulation parameters; selecting one of the predetermined estimated stimulation regions based on the comparing; and providing the corresponding set of electrical stimulation parameters for the selected one of the predetermined estimated stimulation regions to a user or an electrical stimulation device. Other systems or methods use functional maps or subregions of a region of synchronous neural activity to identify stimulation parameters.



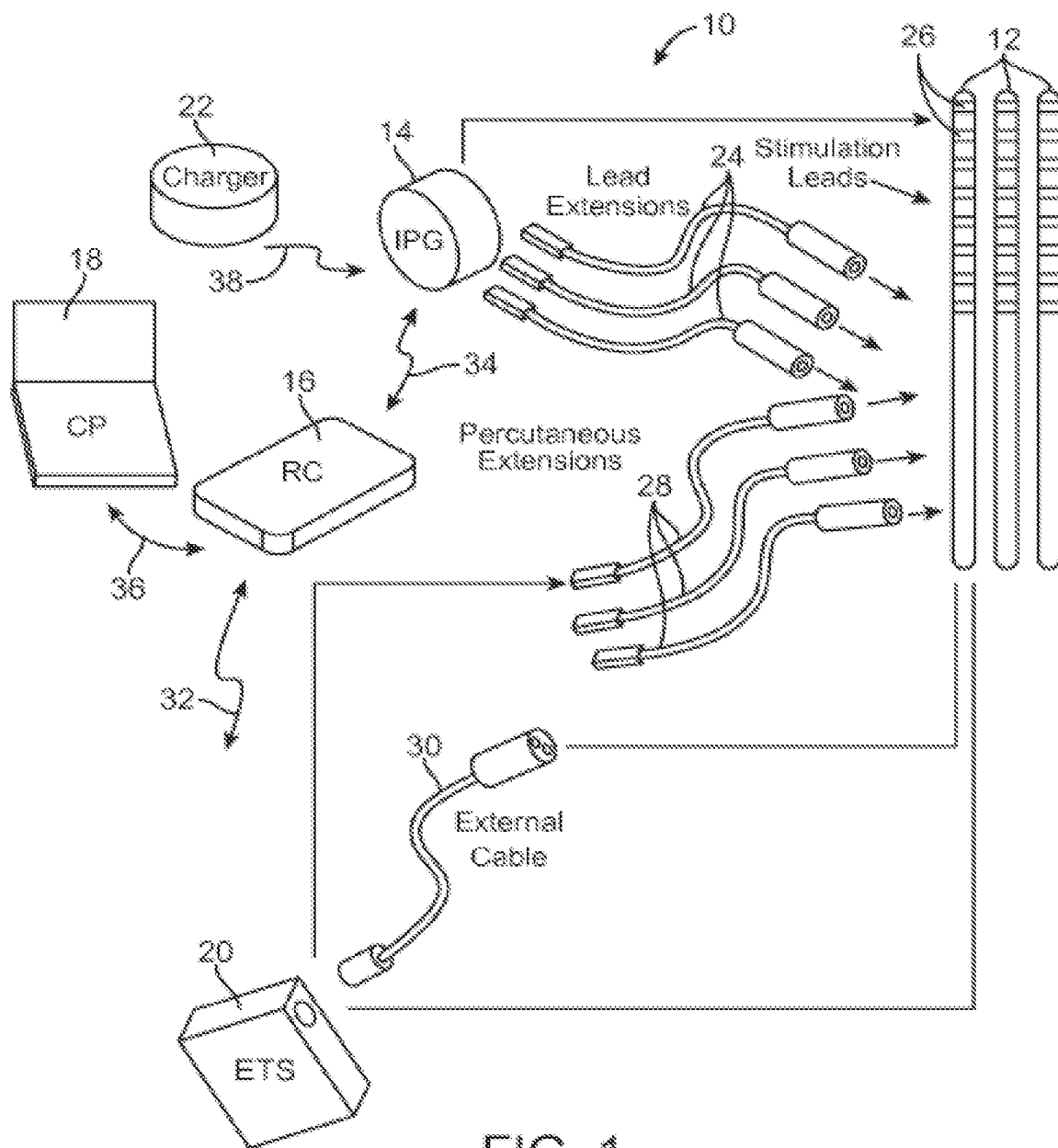
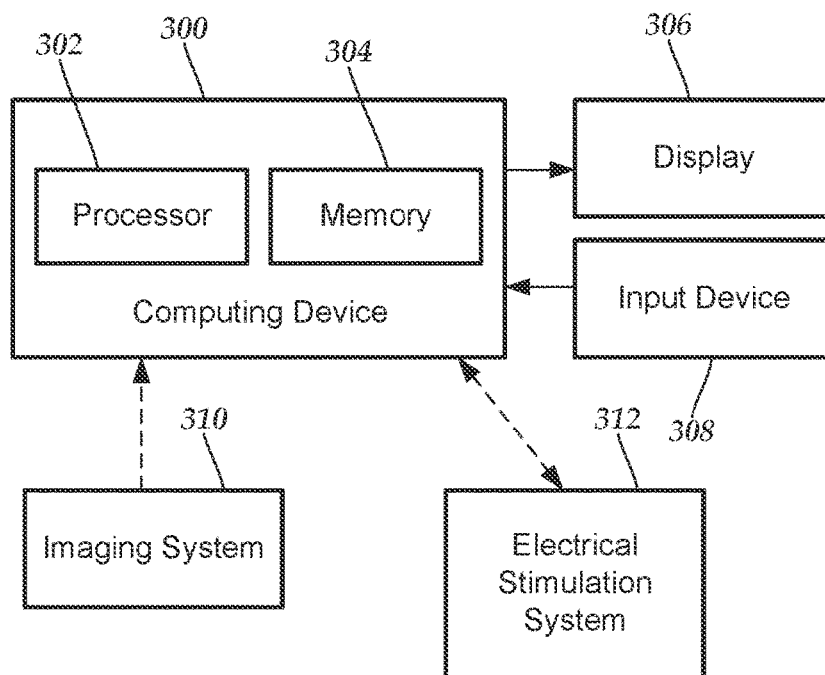
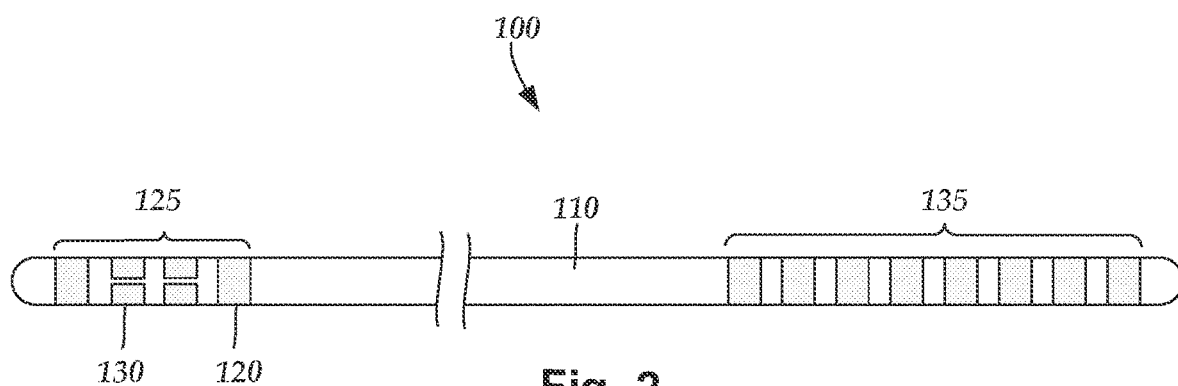


FIG. 1



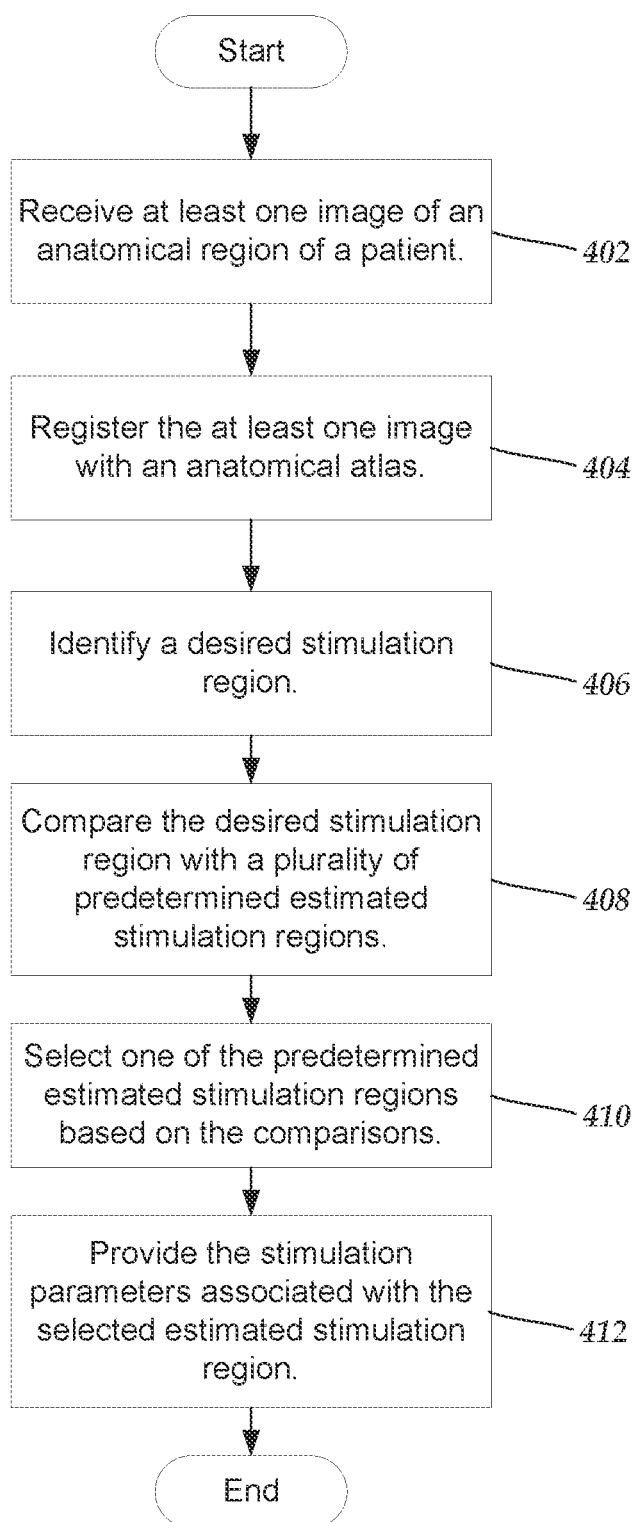
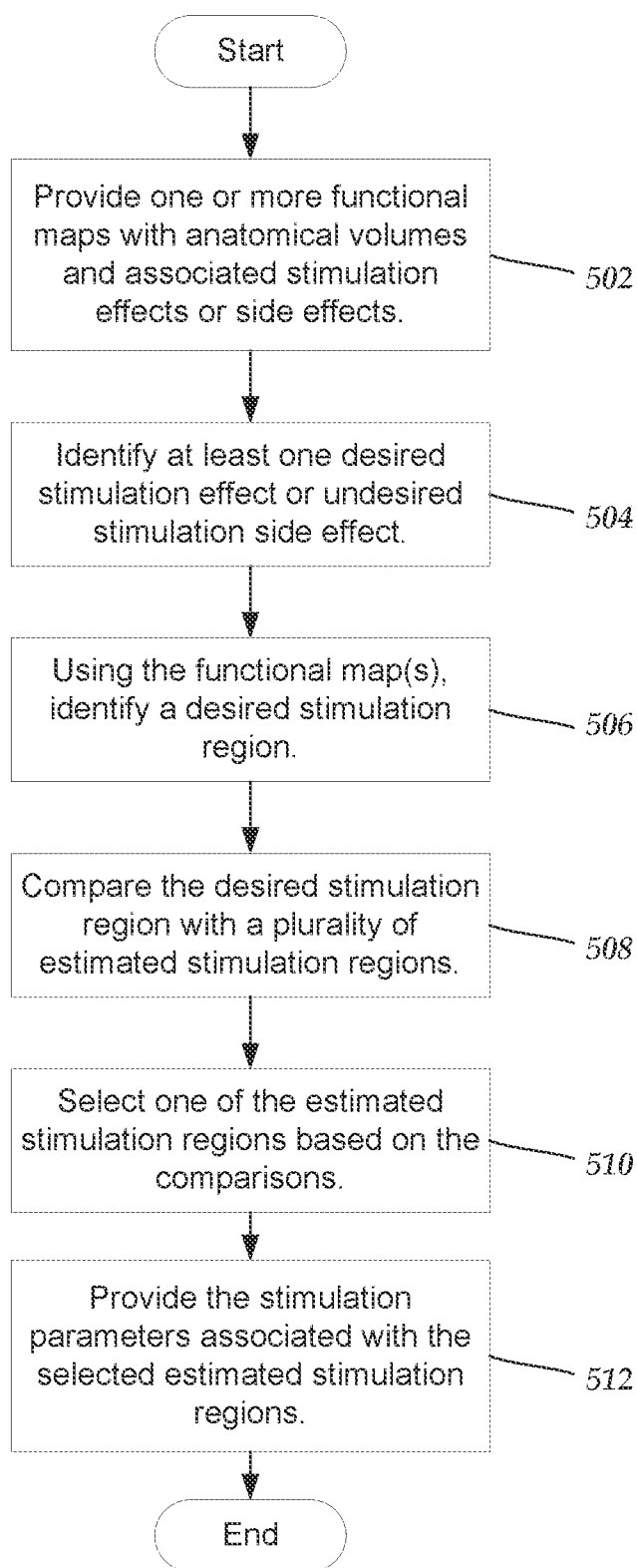


Fig. 4

**Fig. 5**

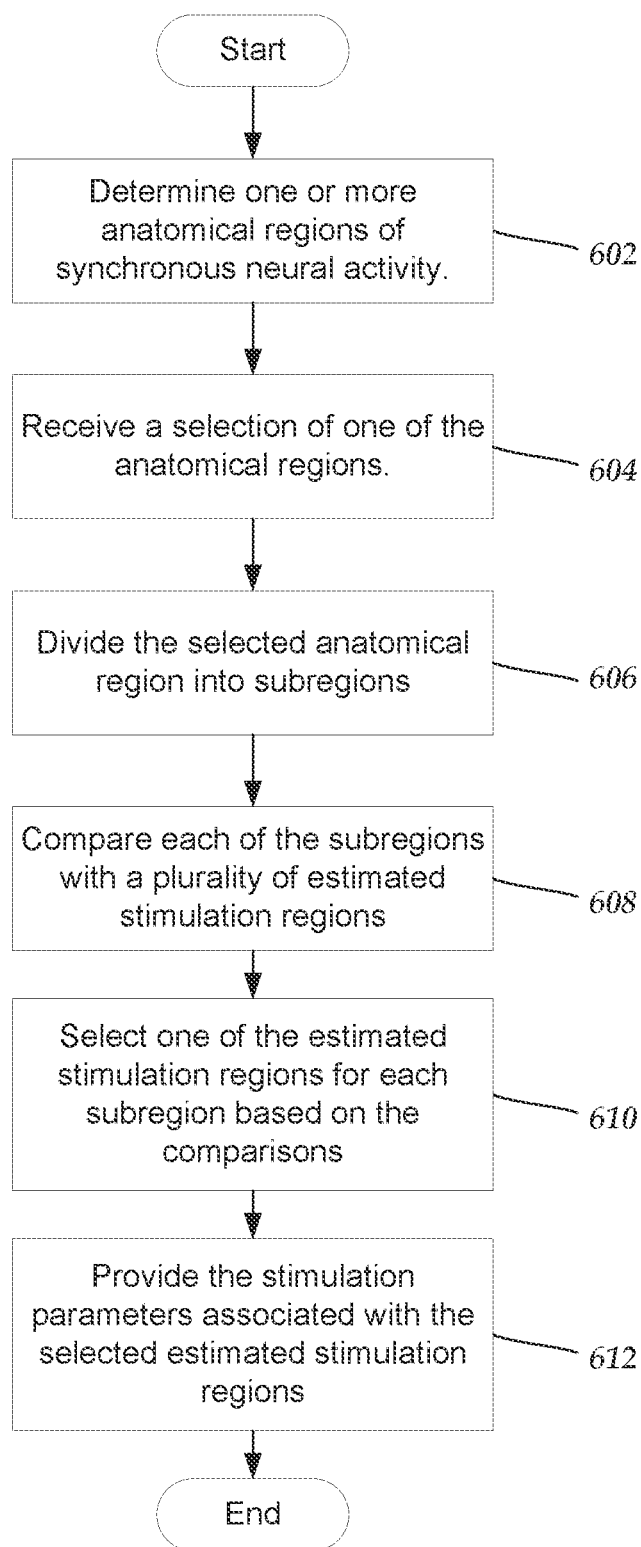


Fig. 6

SYSTEMS AND METHODS FOR SELECTING STIMULATION PARAMETERS BASED ON STIMULATION TARGET REGION, EFFECTS, OR SIDE EFFECTS

CROSS-REFERENCE TO RELATED APPLICATIONS

[0001] This application is a continuation of U.S. patent application Ser. No. 16/537,136, filed Aug. 9, 2019, which is a divisional of U.S. patent application Ser. No. 15/194,336, filed Jun. 27, 2016, which claims the benefit under 35 U.S.C. § 119(e) of U.S. Provisional Patent Application Ser. No. 62/186,184, filed Jun. 29, 2015, all of which are incorporated herein by reference.

FIELD

[0002] The present invention is directed to the area of implantable electrical stimulation systems and methods of making and using the systems. The present invention is also directed to methods of selecting stimulation parameters based on desired stimulation effects or undesired stimulation side effects.

BACKGROUND

[0003] Implantable electrical stimulation systems have proven therapeutic in a variety of diseases and disorders. For example, spinal cord stimulation systems have been used as a therapeutic modality for the treatment of chronic pain syndromes. Peripheral nerve stimulation has been used to treat chronic pain syndrome and incontinence, with a number of other applications under investigation. Functional electrical stimulation systems have been applied to restore some functionality to paralyzed extremities in spinal cord injury patients. Stimulation of the brain, such as deep brain stimulation, can be used to treat a variety of diseases or disorders.

[0004] Stimulators have been developed to provide therapy for a variety of treatments. A stimulator can include a control module (with a pulse generator), one or more leads, and an array of stimulator electrodes on each lead. The stimulator electrodes are in contact with or near the nerves, muscles, or other tissue to be stimulated. The pulse generator in the control module generates electrical pulses that are delivered by the electrodes to body tissue.

BRIEF SUMMARY

[0005] One embodiment is a system for identifying a set of stimulation parameters, the system includes a computer processor configured and arranged to perform the following actions: identifying a desired stimulation region; comparing the desired stimulation region with each of a plurality of predetermined stimulation regions, where each of the stimulation regions can be a defined region or a calculated estimate of a stimulation volume for a corresponding set of electrical stimulation parameters using an electrical stimulation lead; selecting one of the predetermined stimulation regions based on the comparing; and providing the corresponding set of electrical stimulation parameters for the selected one of the predetermined stimulation regions to a user or an electrical stimulation device.

[0006] Another embodiment is a non-transitory computer-readable medium having processor-executable instructions for identifying a set of stimulation parameters, the proces-

sor-executable instructions when installed onto a device enable the device to perform actions, including: identifying a desired stimulation region; comparing the desired stimulation region with each of a plurality of predetermined stimulation regions, where each of the stimulation regions can be a defined region or a calculated estimate of a stimulation volume for a corresponding set of electrical stimulation parameters using an electrical stimulation lead; selecting one of the predetermined stimulation regions based on the comparing; and providing the corresponding set of electrical stimulation parameters for the selected one of the predetermined stimulation regions to a user or an electrical stimulation device.

[0007] Yet another embodiment is a method for identifying a set of stimulation parameters. The method includes identifying a desired stimulation region; comparing the desired stimulation region with each of a plurality of predetermined stimulation regions, where each of the stimulation regions can be a defined region or a calculated estimate of a stimulation volume for a corresponding set of electrical stimulation parameters using an electrical stimulation lead; selecting one of the predetermined stimulation regions based on the comparing; and providing the corresponding set of electrical stimulation parameters for the selected one of the predetermined stimulation regions to a user or an electrical stimulation device.

[0008] In at least some embodiments of the system, non-transitory computer-readable medium, or method described above, the actions further comprise: receiving at least one image of an anatomical or physiological region of a patient; and registering the at least one image with an anatomical or physiological atlas that identifies a plurality of different anatomical or physiological structures; where identifying a desired stimulation region comprises identifying a desired stimulation region using the at least one image. In at least some embodiments of the system, non-transitory computer-readable medium, or method described above, receiving at least one image includes receiving an image with the electrical stimulation lead implanted within the anatomical or physiological region. In at least some embodiments of the system, non-transitory computer-readable medium, or method described above, receiving at least one image includes receiving a first image of an anatomical or physiological region and a second image of the anatomical or physiological region with the electrical stimulation lead implanted within the anatomical or physiological region.

[0009] A further embodiment is a system for identifying a set of stimulation parameters, the system includes a computer processor configured and arranged to perform the following acts: providing at least one functional map identifying anatomical or physiological volumes that, when stimulated, produce at least one stimulation effect or stimulation side effect in at least one patient along with an estimate of a likelihood that the anatomical or physiological volume will produce the at least one stimulation effect or stimulation side effect; identifying at least one desired stimulation effect or undesired stimulation side effect; using the at least one functional map, identifying a desired stimulation region that produces the at least one desired stimulation effect at a predetermined threshold likelihood or avoid the undesired stimulation side effect at a predetermined threshold likelihood; comparing the desired stimulation region with each of a plurality of stimulation regions, where each of the stimulation regions is a calculated estimate of a

stimulation volume for a corresponding set of electrical stimulation parameters using an electrical stimulation lead; selecting one of the stimulation regions based on the comparing; and providing the corresponding set of electrical stimulation parameters for the selected one of the stimulation regions to a user or an electrical stimulation device.

[0010] Another embodiment is a non-transitory computer-readable medium having processor-executable instructions for identifying a set of stimulation parameters, the processor-executable instructions when installed onto a device enable the device to perform actions, including: providing at least one functional map identifying anatomical or physiological volumes that, when stimulated, produce at least one stimulation effect or stimulation side effect in at least one patient along with an estimate of a likelihood that the anatomical or physiological volume will produce the at least one stimulation effect or stimulation side effect; identifying at least one desired stimulation effect or undesired stimulation side effect; using the at least one functional map, identifying a desired stimulation region that produces the at least one desired stimulation effect at a predetermined threshold likelihood or avoid the undesired stimulation side effect at a predetermined threshold likelihood; comparing the desired stimulation region with each of a plurality of estimated stimulation regions, where each of the estimated stimulation regions is a calculated estimate of a stimulation volume for a corresponding set of electrical stimulation parameters using an electrical stimulation lead; selecting one of the estimated stimulation regions based on the comparing; and providing the corresponding set of electrical stimulation parameters for the selected one of the estimated stimulation regions to a user or an electrical stimulation device.

[0011] Yet another embodiment is a method for identifying a set of stimulation parameters. The method includes providing at least one functional map identifying anatomical or physiological volumes that, when stimulated, produce at least one stimulation effect or stimulation side effect in at least one patient along with an estimate of a likelihood that the anatomical or physiological volume will produce the at least one stimulation effect or stimulation side effect; identifying at least one desired stimulation effect or undesired stimulation side effect; using the at least one functional map, identifying a desired stimulation region that produces the at least one desired stimulation effect at a predetermined threshold likelihood or avoid the undesired stimulation side effect at a predetermined threshold likelihood; comparing the desired stimulation region with each of a plurality of estimated stimulation regions, where each of the estimated stimulation regions is a calculated estimate of a stimulation volume for a corresponding set of electrical stimulation parameters using an electrical stimulation lead; selecting one of the estimated stimulation regions based on the comparing; and providing the corresponding set of electrical stimulation parameters for the selected one of the estimated stimulation regions to a user or an electrical stimulation device.

[0012] In at least some embodiments of the system, non-transitory computer-readable medium, or method described above, identifying the desired stimulation region includes selecting the desired stimulation region to produce the at least one desired stimulation effect and to avoid any stimulation side effects above a threshold likelihood. In at least some embodiments of the system, non-transitory computer-readable medium, or method described above, identifying the desired stimulation region includes selecting the desired

stimulation region to produce the at least one desired stimulation effect and to avoid at least one identified stimulation side effect above a threshold likelihood. In at least some embodiments of the system, non-transitory computer-readable medium, or method described above, providing at least one functional map includes providing at least one functional map with scores associated with the anatomical or physiological volumes, each score being associated with at least one of the stimulation effects or stimulation side effects.

[0013] A further embodiment is a system for identifying a set of stimulation parameters that includes a computer processor configured and arranged to perform the following acts: identifying a region of synchronous neural activity; dividing the region into a plurality of subregions; comparing the plurality of subregions with each of a plurality of estimated stimulation regions, where each of the estimated stimulation regions is a calculated estimate of a stimulation volume for a corresponding set of electrical stimulation parameters using an electrical stimulation lead; selecting, for each of the subregions, one of the estimated stimulation regions based on the comparisons such that each of the selected estimated stimulation regions overlaps with any of the other selected estimated stimulation regions by no more than a predetermined threshold; and providing the corresponding set of electrical stimulation parameters for each of the selected estimated stimulation regions to a user or an electrical stimulation device.

[0014] Another embodiment is a non-transitory computer-readable medium having processor-executable instructions for identifying a set of stimulation parameters, the processor-executable instructions when installed onto a device enable the device to perform actions, including: identifying a region of synchronous neural activity; dividing the region into a plurality of subregions; comparing the plurality of subregions with each of a plurality of estimated stimulation regions, where each of the estimated stimulation regions is a calculated estimate of a stimulation volume for a corresponding set of electrical stimulation parameters using an electrical stimulation lead; selecting, for each of the subregions, one of the estimated stimulation regions based on the comparisons such that each of the selected estimated stimulation regions overlaps with any of the other selected estimated stimulation regions by no more than a predetermined threshold; and providing the corresponding set of electrical stimulation parameters for each of the selected estimated stimulation regions to a user or an electrical stimulation device.

[0015] Yet another embodiment is a method for identifying a set of stimulation parameters. The method includes identifying a region of synchronous neural activity; dividing the region into a plurality of subregions; comparing the plurality of subregions with each of a plurality of estimated stimulation regions, where each of the estimated stimulation regions is a calculated estimate of a stimulation volume for a corresponding set of electrical stimulation parameters using an electrical stimulation lead; selecting, for each of the subregions, one of the estimated stimulation regions based on the comparisons such that each of the selected estimated stimulation regions overlaps with any of the other selected estimated stimulation regions by no more than a predetermined threshold; and providing the corresponding set of

electrical stimulation parameters for each of the selected estimated stimulation regions to a user or an electrical stimulation device.

[0016] In at least some embodiments of the system, non-transitory computer-readable medium, or method described above, identifying a region of synchronous neural activity includes receiving the region from a user. In at least some embodiments of the system, non-transitory computer-readable medium, or method described above, dividing the region includes dividing the regions into the plurality of subregions, wherein each subregion overlaps by no more than a predetermined threshold percentage with any other of the plurality of subregions. In at least some embodiments of the system, non-transitory computer-readable medium, or method described above, each of the selected estimated stimulation regions overlaps with any of the other selected estimated stimulation regions by no more than a predetermined threshold percentage. In at least some embodiments of the system, non-transitory computer-readable medium, or method described above, each of the selected estimated stimulation regions does not overlap with any of the other selected estimated stimulation regions.

[0017] In at least some embodiments, any of the systems described above further includes the electrical stimulation device which includes the electrical stimulation lead. In at least some embodiments, any of the systems described above further includes an implantable pulse generator and providing the corresponding set of electrical stimulation parameters includes providing the corresponding set of electrical stimulation parameters to the implantable pulse generator.

[0018] In at least some embodiments of any of the systems, non-transitory computer-readable media, or methods described above, selecting one of the estimated stimulation regions includes selecting the one of the estimated stimulation regions based on at least one selection criterion supplied by the user. In at least some embodiments of any of the systems, non-transitory computer-readable media, or methods described above, selecting one of the estimated stimulation regions includes selecting the one of the estimated stimulation regions based on at least one threshold criterion supplied by the user.

BRIEF DESCRIPTION OF THE DRAWINGS

[0019] Non-limiting and non-exhaustive embodiments of the present invention are described with reference to the following drawings. In the drawings, like reference numerals refer to like parts throughout the various figures unless otherwise specified.

[0020] For a better understanding of the present invention, reference will be made to the following Detailed Description, which is to be read in association with the accompanying drawings, wherein:

[0021] FIG. 1 is a schematic view of one embodiment of an electrical stimulation system, according to the invention;

[0022] FIG. 2 is a schematic side view of one embodiment of an electrical stimulation lead, according to the invention;

[0023] FIG. 3 is a schematic block diagram of one embodiment of a system for determining stimulation parameters, according to the invention;

[0024] FIG. 4 is a flowchart of one embodiment of a method of determining stimulation parameters, according to the invention;

[0025] FIG. 5 is a flowchart of a second embodiment of a method of determining stimulation parameters, according to the invention; and

[0026] FIG. 6 is a flowchart of a third embodiment of a method of determining stimulation parameters, according to the invention.

DETAILED DESCRIPTION

[0027] The present invention is directed to the area of implantable electrical stimulation systems and methods of making and using the systems. The present invention is also directed to methods of selecting stimulation parameters based on desired stimulation effects or undesired stimulation side effects.

[0028] Suitable implantable electrical stimulation systems include, but are not limited to, a least one lead with one or more electrodes disposed on a distal end of the lead and one or more terminals disposed on one or more proximal ends of the lead. Leads include, for example, percutaneous leads and paddle leads. Examples of electrical stimulation systems with leads are found in, for example, U.S. Pat. Nos. 6,181,969; 6,516,227; 6,609,029; 6,609,032; 6,741,892; 7,244,150; 7,450,997; 7,672,734; 7,761,165; 7,783,359; 7,792,590; 7,809,446; 7,949,395; 7,974,706; 8,175,710; 8,224,450; 8,271,094; 8,295,944; 8,364,278; 8,391,985; and 8,688,235; and U.S. Patent Applications Publication Nos. 2007/0150036; 2009/0187222; 2009/0276021; 2010/0076535; 2010/0268298; 2011/0005069; 2011/0004267; 2011/0078900; 2011/0130817; 2011/0130818; 2011/0238129; 2011/0313500; 2012/0016378; 2012/0046710; 2012/0071949; 2012/0165911; 2012/0197375; 2012/0203316; 2012/0203320; 2012/0203321; 2012/0316615; 2013/0105071; and 2013/0197602, all of which are incorporated by reference. In the discussion below, a percutaneous lead will be exemplified, but it will be understood that the methods and systems described herein are also applicable to paddle leads.

[0029] A percutaneous lead for electrical stimulation (for example, deep brain or spinal cord stimulation) includes stimulation electrodes that can be ring electrodes or segmented electrodes that extend only partially around the circumference of the lead or any combination thereof. The segmented electrodes can be provided in sets of electrodes, with each set having electrodes circumferentially distributed about the lead at a particular longitudinal position. For illustrative purposes, the leads are described herein relative to use for deep brain stimulation, but it will be understood that any of the leads can be used for applications other than deep brain stimulation, including spinal cord stimulation, peripheral nerve stimulation, or stimulation of other nerves and tissues.

[0030] Turning to FIG. 1, one embodiment of an electrical stimulation system 10 includes one or more stimulation leads 12 and an implantable pulse generator (IPG) 14. The system 10 can also include one or more of an external remote control (RC) 16, a clinician's programmer (CP) 18, an external trial stimulator (ETS) 20, or an external charger 22.

[0031] The IPG 14 is physically connected, optionally via one or more lead extensions 24, to the stimulation lead(s) 12. Each lead carries multiple electrodes 26 arranged in an array. The IPG 14 includes pulse generation circuitry that delivers electrical stimulation energy in the form of, for example, a pulsed electrical waveform (i.e., a temporal series of elec-

trical pulses) to the electrode array **26** in accordance with a set of stimulation parameters. The implantable pulse generator can be implanted into a patient's body, for example, below the patient's clavicle area or within the patient's buttocks or abdominal cavity. The implantable pulse generator can have eight stimulation channels which may be independently programmable to control the magnitude of the current or voltage stimulus from each channel. In some embodiments, the implantable pulse generator can have more or fewer than eight stimulation channels (e.g., 4-, 6-, 16-, 32-, or more stimulation channels). The implantable pulse generator can have one, two, three, four, or more connector ports, for receiving the terminals of the leads.

[0032] The ETS **20** may also be physically connected, optionally via the percutaneous lead extensions **28** and external cable **30**, to the stimulation leads **12**. The ETS **20**, which has similar pulse generation circuitry as the IPG **14**, also delivers electrical stimulation energy in the form of, for example, a pulsed electrical waveform to the electrode array **26** in accordance with a set of stimulation parameters. One difference between the ETS **20** and the IPG **14** is that the ETS **20** is often a non-implantable device that is used on a trial basis after the neurostimulation leads **12** have been implanted and prior to implantation of the IPG **14**, to test the responsiveness of the stimulation that is to be provided. Any functions described herein with respect to the IPG **14** can likewise be performed with respect to the ETS **20**.

[0033] The RC **16** may be used to telemetrically communicate with or control the IPG **14** or ETS **20** via a uni- or bi-directional wireless communications link **32**. Once the IPG **14** and neurostimulation leads **12** are implanted, the RC **16** may be used to telemetrically communicate with or control the IPG **14** via a uni- or bi-directional communications link **34**. Such communication or control allows the IPG **14** to be turned on or off and to be programmed with different stimulation parameter sets. The IPG **14** may also be operated to modify the programmed stimulation parameters to actively control the characteristics of the electrical stimulation energy output by the IPG **14**. The CP **18** allows a user, such as a clinician, the ability to program stimulation parameters for the IPG **14** and ETS **20** in the operating room and in follow-up sessions.

[0034] The CP **18** may perform this function by indirectly communicating with the IPG **14** or ETS **20**, through the RC **16**, via a wired or wireless communications link **36**. Alternatively, the CP **18** may directly communicate with the IPG **14** or ETS **20** via a wired or wireless communications link (not shown). The stimulation parameters provided by the CP **18** are also used to program the RC **16**, so that the stimulation parameters can be subsequently modified by operation of the RC **16** in a stand-alone mode (i.e., without the assistance of the CP **18**).

[0035] For purposes of brevity, the details of the RC **16**, CP **18**, ETS **20**, and external charger **22** will not be further described herein. Details of exemplary embodiments of these devices are disclosed in U.S. Pat. No. 6,895,280, which is expressly incorporated herein by reference. Other examples of electrical stimulation systems can be found at U.S. Pat. Nos. 6,181,969; 6,516,227; 6,609,029; 6,609,032; 6,741,892; 7,949,395; 7,244,150; 7,672,734; 7,761,165; 7,974,706; 8,175,710; 8,224,450; and 8,364,278; and U.S. Patent Application Publication No. 2007/0150036, as well as the other references cited above, all of which are incorporated by reference.

[0036] FIG. 2 illustrates one embodiment of a lead **110** with electrodes **125** disposed at least partially about a circumference of the lead **110** along a distal end portion of the lead and terminals **135** disposed along a proximal end portion of the lead.

The lead **110** can be implanted near or within the desired portion of the body to be stimulated such as, for example, the brain, spinal cord, or other body organs or tissues. In one example of operation for deep brain stimulation, access to the desired position in the brain can be accomplished by drilling a hole in the patient's skull or cranium with a cranial drill (commonly referred to as a burr), and coagulating and incising the dura mater, or brain covering. The lead **110** can be inserted into the cranium and brain tissue with the assistance of a stylet (not shown). The lead **110** can be guided to the target location within the brain using, for example, a stereotactic frame and a microdrive motor system. In some embodiments, the microdrive motor system can be fully or partially automatic. The microdrive motor system may be configured to perform one or more the following actions (alone or in combination): insert the lead **110**, advance the lead **110**, retract the lead **110**, or rotate the lead **110**.

[0037] In some embodiments, measurement devices coupled to the muscles or other tissues stimulated by the target neurons, or a unit responsive to the patient or clinician, can be coupled to the implantable pulse generator or microdrive motor system. The measurement device, user, or clinician can indicate a response by the target muscles or other tissues to the stimulation or recording electrode(s) to further identify the target neurons and facilitate positioning of the stimulation electrode(s). For example, if the target neurons are directed to a muscle experiencing tremors, a measurement device can be used to observe the muscle and indicate changes in tremor frequency or amplitude in response to stimulation of neurons. Alternatively, the patient or clinician can observe the muscle and provide feedback.

[0038] The lead **110** for deep brain stimulation can include stimulation electrodes, recording electrodes, or both. In at least some embodiments, the lead **110** is rotatable so that the stimulation electrodes can be aligned with the target neurons after the neurons have been located using the recording electrodes.

[0039] Stimulation electrodes may be disposed on the circumference of the lead **110** to stimulate the target neurons. Stimulation electrodes may be ring-shaped so that current projects from each electrode equally in every direction from the position of the electrode along a length of the lead **110**. In the embodiment of FIG. 2, two of the electrodes **120** are ring electrodes **120**. Ring electrodes typically do not enable stimulus current to be directed from only a limited angular range around of the lead. Segmented electrodes **130**, however, can be used to direct stimulus current to a selected angular range around the lead. When segmented electrodes are used in conjunction with an implantable pulse generator that delivers constant current stimulus, current steering can be achieved to more precisely deliver the stimulus to a position around an axis of the lead (i.e., radial positioning around the axis of the lead). To achieve current steering, segmented electrodes can be utilized in addition to, or as an alternative to, ring electrodes.

[0040] The lead **100** includes a lead body **110**, terminals **135**, and one or more ring electrodes **120** and one or more sets of segmented electrodes **130** (or any other combination

of electrodes). The lead body **110** can be formed of a biocompatible, non-conducting material such as, for example, a polymeric material. Suitable polymeric materials include, but are not limited to, silicone, polyurethane, polyurea, polyurethane-urea, polyethylene, or the like. Once implanted in the body, the lead **100** may be in contact with body tissue for extended periods of time. In at least some embodiments, the lead **100** has a cross-sectional diameter of no more than 1.5 mm and may be in the range of 0.5 to 1.5 mm. In at least some embodiments, the lead **100** has a length of at least 10 cm and the length of the lead **100** may be in the range of 10 to 70 cm.

[0041] The electrodes **125** can be made using a metal, alloy, conductive oxide, or any other suitable conductive biocompatible material. Examples of suitable materials include, but are not limited to, platinum, platinum iridium alloy, iridium, titanium, tungsten, palladium, palladium rhodium, or the like. Preferably, the electrodes are made of a material that is biocompatible and does not substantially corrode under expected operating conditions in the operating environment for the expected duration of use.

[0042] Each of the electrodes can either be used or unused (OFF). When the electrode is used, the electrode can be used as an anode or cathode and carry anodic or cathodic current. In some instances, an electrode might be an anode for a period of time and a cathode for a period of time.

[0043] Deep brain stimulation leads may include one or more sets of segmented electrodes. Segmented electrodes may provide for superior current steering than ring electrodes because target structures in deep brain stimulation are not typically symmetric about the axis of the distal electrode array. Instead, a target may be located on one side of a plane running through the axis of the lead. Through the use of a radially segmented electrode array (“RSEA”), current steering can be performed not only along a length of the lead but also around a circumference of the lead. This provides precise three-dimensional targeting and delivery of the current stimulus to neural target tissue, while potentially avoiding stimulation of other tissue. Examples of leads with segmented electrodes include U.S. Patent Application Publications Nos. 2010/0268298; 2011/0005069; 2011/0130803; 2011/0130816; 2011/0130817; 2011/0130818; 2011/0078900; 2011/0238129; 2012/0016378; 2012/0046710; 2012/0071949; 2012/0165911; 2012/197375; 2012/0203316; 2012/0203320; 2012/0203321, all of which are incorporated herein by reference.

[0044] An electrical stimulation lead can be implanted in the body of a patient (for example, in the brain or spinal cord of the patient) and used to stimulate surrounding tissue. It is useful to estimate the effective region of stimulation (often called a volume of activation (VOA) or stimulation field model (SFM)) given the position of the lead and its electrodes in the patient’s body and the stimulation parameters used to generate the stimulation. Any suitable method for determining the VOA and for graphically displaying the VOA relative to patient anatomy can be used including those described in, for example, U.S. Pat. Nos. 8,326,433; 8,675,945; 8,831,731; 8,849,632; and 8,958,615; U.S. Patent Application Publications Nos. 2009/0287272; 2009/0287273; 2012/0314924; 2013/0116744; 2014/0122379; and 2015/0066111; and U.S. Provisional Patent Application Ser. No. 62/030,655, all of which are incorporated herein by reference. Several of these references also disclose methods and systems for registering an atlas of body structures to

imaged patient physiology. As used herein, unless indicated otherwise, the term “estimated stimulation region” can refer to a VOA; a SFM; an estimate of an electric field, potential field, activating function field, Hermitian of an activating function, or any combination thereof or the like.

[0045] In conventional systems, a VOA is determined based on a set of stimulation parameters input into the system. The VOA can then be modified by the user by modifying the stimulation parameters and determining the new VOA from the modified stimulation parameters. This allows the user to tailor the stimulation volume.

[0046] In contrast to these conventional systems which determine the VOA from user-selected stimulation parameters, in at least some embodiments, the present systems or methods allow the user to define the volume of tissue that is desired for stimulation and then the systems or methods determine a set of stimulation parameters based on that volume. There are a number of different methods for selecting a desired stimulation volume described below. In some embodiments, the user selects the volume directly. In other embodiments, the user selects the volume indirectly by indicating one or more stimulation effects to achieve or stimulation side effects to avoid. Alternatively, the user or system can select a volume based on regions with synchronous neural activity.

[0047] FIG. 3 illustrates one embodiment of a system for determining electrical stimulation parameters. The system can include a computing device **300** or any other similar device that includes a processor **302** and a memory **304**, a display **306**, an input device **308**, and, optionally, the electrical stimulation system **312**. The system **300** may also optionally include one or more imaging systems **310**.

[0048] The computing device **300** can be a computer, tablet, mobile device, or any other suitable device for processing information. The computing device **300** can be local to the user or can include components that are non-local to the computer including one or both of the processor **302** or memory **304** (or portions thereof). For example, in some embodiments, the user may operate a terminal that is connected to a non-local computing device. In other embodiments, the memory can be non-local to the user.

[0049] The computing device **300** can utilize any suitable processor **302** including one or more hardware processors that may be local to the user or non-local to the user or other components of the computing device. The processor **302** is configured to execute instructions provided to the processor, as described below.

[0050] Any suitable memory **304** can be used for the computing device **302**. The memory **304** illustrates a type of computer-readable media, namely computer-readable storage media. Computer-readable storage media may include, but is not limited to, nonvolatile, non-transitory, removable, and non-removable media implemented in any method or technology for storage of information, such as computer readable instructions, data structures, program modules, or other data. Examples of computer-readable storage media include RAM, ROM, EEPROM, flash memory, or other memory technology, CD-ROM, digital versatile disks (“DVD”) or other optical storage, magnetic cassettes, magnetic tape, magnetic disk storage or other magnetic storage devices, or any other medium which can be used to store the desired information and which can be accessed by a computing device.

[0051] Communication methods provide another type of computer readable media; namely communication media. Communication media typically embodies computer-readable instructions, data structures, program modules, or other data in a modulated data signal such as a carrier wave, data signal, or other transport mechanism and include any information delivery media. The terms “modulated data signal,” and “carrier-wave signal” includes a signal that has one or more of its characteristics set or changed in such a manner as to encode information, instructions, data, and the like, in the signal. By way of example, communication media includes wired media such as twisted pair, coaxial cable, fiber optics, wave guides, and other wired media and wireless media such as acoustic, RF, infrared, and other wireless media.

[0052] The display **306** can be any suitable display device, such as a monitor, screen, display, or the like, and can include a printer. The input device **308** can be, for example, a keyboard, mouse, touch screen, track ball, joystick, voice recognition system, or any combination thereof, or the like.

[0053] One or more imaging systems **310** can be used including, but not limited to, MRI, CT, ultrasound, or other imaging systems. The imaging system **310** may communicate through a wired or wireless connection with the computing device **300** or, alternatively or additionally, a user can provide images from the imaging system **310** using a computer-readable medium or by some other mechanism.

[0054] The electrical stimulation system **312** can include, for example, any of the components illustrated in FIG. 1. The electrical stimulation system **312** may communicate with the computing device **300** through a wired or wireless connection or, alternatively or additionally, a user can provide information between the electrical stimulation system **312** and the computing device **300** using a computer-readable medium or by some other mechanism. In some embodiments, the computing device **300** may include part of the electrical stimulation system, such as, for example, the IPG, CP, RC, ETS, or any combination thereof.

[0055] The methods and systems described herein may be embodied in many different forms and should not be construed as limited to the embodiments set forth herein. Accordingly, the methods and systems described herein may take the form of an entirely hardware embodiment, an entirely software embodiment or an embodiment combining software and hardware aspects. Systems referenced herein typically include memory and typically include methods for communication with other devices including mobile devices. Methods of communication can include both wired and wireless (e.g., RF, optical, or infrared) communications methods and such methods provide another type of computer readable media; namely communication media. Wired communication can include communication over a twisted pair, coaxial cable, fiber optics, wave guides, or the like, or any combination thereof. Wireless communication can include RF, infrared, acoustic, near field communication, Bluetooth™, or the like, or any combination thereof.

[0056] Stimulation is one type of neuromodulation. Types of neuromodulation can include, for example, stimulation (application of a stimulating field or drug), activation (activating neurological tissue), depression (reducing the likelihood of activation of the neurological tissue), silencing (preventing the activation of the neurological tissue), or other forms of neuromodulation. Although stimulation is referred to in the embodiments below, it will be recognized

that any other type of neuromodulation can be substituted for stimulation unless indicated otherwise. Moreover, multiple forms of neuromodulation as described previously may be used in various combinations in the methods and systems described herein, with varying temporal order or relation, on the same target or targets. The intervention can be accomplished using electrical stimulation, optical stimulation, drug stimulation, or the like or any combination thereof. The one or more targets may be selected with respect to the desired type of intervention, for example, one or more targets can be selected for activation, one or more targets for depression, and one or more targets for silencing, or any combination thereof. When multiple targets are identified, the targets may be selected for the same type of intervention or different targets may be selected for different types of intervention.

[0057] FIG. 4 is a flowchart illustrating one method for determining a set of stimulation parameters based on a user-selected stimulation volume. In step **402**, at least one image of an anatomical or physiological region of a patient is received. The image can be any suitable image such as a MRI, CT, ultrasound, or other image. At least one image preferably also includes an implanted electrical stimulation lead within the image so that the position, and, preferably, the orientation, of the lead relative to the patient tissue can be identified. In at least some embodiments, more than one image can be received. For example, in at least some embodiments, a MRI image of an anatomical or physiological region, such as the brain, spinal cord, or other organ or tissue, or a portion thereof, can be obtained to show soft tissue portions of the region. A CT or MRI scan can also be obtained for the anatomical or physiological region with the electrical stimulation lead implanted to identify the position and orientation of the lead. In at least some embodiments, the two or more images may be registered with each other.

[0058] In other embodiments, an image is not used, but the user or system estimates the position or orientation of the lead within the patient. This estimation may be based on, for example, surgical results, a surgical plan, external observations, or the like. In at least some embodiments, the estimate is based on a proposed position of a lead in the patient. The lead may or may not have been actually implanted in the patient. In some embodiments, the system can be used to plan a surgical implantation of a lead by investigating different placements or orientations. In the remainder of the discussion regarding the embodiment of FIG. 4, reference will be made to at least one image, but it will be understood that instead of an image an estimate of position or orientation or a proposed position or orientation of the lead can be used.

[0059] In step **404**, the at least one image received in step **402** is registered with an anatomical or physiological atlas, such as a neuroanatomical atlas, to associate anatomical or physiological structures from the atlas with the at least one image. In at least some embodiments, the registered image (s) can be segmented into volume units that can, for example, each correspond to specific anatomical or physiological structures, or portions of anatomical or physiological structures, or correspond to any other division of the imaged region. In at least some embodiments, the anatomical or physiological structures or segmented volumes can be labeled, numbered, or otherwise differentiated for the user on, for example, a display for review by the user.

[0060] In step **406**, the user identifies a desired stimulation region. In embodiments in which at least one image is

received the desired stimulation region can be identified within, or at least partially within, the imaged anatomical or physiological region. In at least some embodiments, a user can select the desired stimulation region by drawing or otherwise indicating the region on a display or other device. In at least some embodiments, a user can select the desired stimulation region by entering the name of one or more anatomical or physiological structures or by selecting one or more anatomical or physiological structures on a list. Any other suitable method for selecting a desired stimulation region can be used.

[0061] In step 408, the desired stimulation region is compared to multiple predetermined estimated stimulation regions. The system may utilize any number of predetermined estimated stimulation regions, such as at least 10, 25, 50, 100, 200, or 500 predetermined estimated stimulation regions. These estimated stimulation regions are each associated with a set of stimulation parameters and can be predetermined using any method of calculation or estimation, including those disclosed in the references cited above, using the corresponding set of stimulation parameters. Additionally or alternatively, the desired stimulation region can be compared to one or more estimated stimulation regions that are calculated or estimated after selection of the desired stimulation region.

[0062] In at least some embodiments, the estimated stimulation regions are estimated or determined with respect to the lead and then those estimated stimulation regions are registered to the anatomical or physiological atlas, images, or the desired stimulation region based on the position or orientation of the lead within the patient. In at least some embodiments, the comparisons between the desired stimulation regions and the multiple predetermined estimated stimulation regions include, for example, a quantitative determination of the fit of the identified stimulation region with one or more of the estimated stimulation regions.

[0063] In some embodiments, the system can reject an estimated stimulation region that fails to have a predetermined amount or percentage of overlap, or fails any other acceptance criteria, with respect to the identified stimulation region. In some embodiments, the system can reject an estimated stimulation region that fails to overlap with a predetermined amount or percentage of the identified stimulation region. The system may include other threshold determinations or, in at least some embodiments, the user may select one or more threshold requirements.

[0064] The comparison may include reporting comparative information on a display or other device to the user. Such comparative information can include one or more of, for example, the amount or percentage coverage of the desired stimulation region by the estimated stimulation region, the amount or percentage of the desired stimulation region that is outside the estimated stimulation region, the amount or percentage of the estimated stimulation region that covers the desired stimulation region, the amount or percentage of the estimated stimulation region that is outside the desired stimulation region, other anatomical or physiological structures that may be stimulated by the estimated stimulation region, or the like. Alternatively or additionally, the desired stimulation region and the estimated stimulation region can be displayed to illustrate the overlap between the two. In some embodiments, the system may only report comparative information on one or more, but less than all, of the estimated stimulation regions or display only one or

more, but less than all, of the estimated stimulation regions. The selection of which estimated stimulation regions to include in the report or display may be by the best fit or other criteria that the system or user determines.

[0065] In step 410, one of the predetermined estimated stimulation regions is selected based on the comparisons. In some embodiments, one of the predetermined estimated stimulation regions is selected by a user, preferably based on comparative information provided by the system to the user. In some embodiments, one of the predetermined estimated stimulation regions is selected by the system based on the comparisons. In at least some embodiments, the user can set selection criteria such as, for example, one or more thresholds for overlap, non-overlap, or the like or may provide rules or criteria for selecting among estimated stimulation regions that meet the thresholds, such as priority selection factor(s) or weighting of comparative information. As an example, the system may determine a “goodness-of-fit” based on the difference between the desired stimulation region and the estimated stimulation region and the system selects the estimated stimulation region with the best “goodness-of-fit”. In at least some embodiments, the system may allow the user to override the automatic selection by the system so that the user can select another estimated stimulation region.

[0066] In step 412, stimulation parameters for the selected estimated stimulation region can be provided to the user or directly to an implantable pulse generator, external trial stimulator, or other device that generates the electrical stimulation. These parameters can be provided by a wired connection, a wireless connection, or in any other suitable manner. In some embodiments, the system may allow a user to modify the stimulation parameters.

[0067] FIG. 5 is a flowchart illustrating one method for determining a set of stimulation parameters based on a user-selected stimulation effects or side effects. In step 502, one or more functional maps can be provided with each functional map identifying anatomical or physiological regions that produce one or more stimulation effects or stimulation side effects (collectively, “clinical effects”) when electrically stimulated.

[0068] One example of a method for forming a functional map includes registering patient images (for example, MRI images) into a common atlas space. Based on this registration, the therapeutic and side effects of various stimulation parameters applied to the patients can be associated with anatomical or physiological structures or other volume units in the common atlas space. The individual anatomical or physiological structures or other volume units into which the atlas space is divided can be referred to as “voxels”. For each set of stimulation parameters, an estimated stimulation region can be calculated or estimated. Stimulation effects or side effects that are identified by the user or patient when stimulated using the set of stimulation parameters can then be associated with the voxels in the estimated stimulation region. In at least some embodiments, a score can be associated with any clinical effect associated with the voxel. The score may be based on any suitable rating scale (for example, the Unified Parkinson’s Disease Rating Scale (UPDRS)).

[0069] In at least some embodiments, these mapped clinical effects can be aggregated across patients (for example, at least 5, 10, 20, 25, 50, or 100 patients or more) to generate an estimation of the likelihood for achieving a certain

clinical effect given activation of a voxel at a given location in the common atlas space. For example, $p(R \geq 2|v)$ could be the estimated probability of at least a 2-point therapeutic improvement in rigidity (R) given activation of voxel v , where this estimated probability is derived directly from the number of patients for which voxel v was stimulated. As an example of this estimated probability, if a total of 40 patients had voxel v stimulated and 30/40 of them experienced a rigidity improvement of 2 points or greater, $p(R \geq 2|v) = 0.75$. One or more (or even all) of the voxels in the atlas space can be labeled with multiple probabilities of being associated with multiple clinical effects, including stimulation effects and stimulation side effects.

[0070] In step 504, the user identifies at least one desired stimulation effect or undesired stimulation side effect. In at least some embodiments, the user can select from a list of stimulation effects or stimulation side effects. In other embodiments, the user may input an effect or side effect and the system may correlate the input with a list of effects or side effects.

[0071] In step 506, the system identifies a desired stimulation region using the one or more functional maps based on the at least one selected stimulation effect or stimulation side effect. For example, a stimulation region for a tremor-dominant patient might be selected by choosing voxels with a high probability of tremor improvement above a certain probability threshold, with the most probable voxels for achieving that improvement automatically selected and labeled as part of the desired stimulation region. In at least some embodiments, the user or system could combine numerous voxels with the desired clinical effects and exclude voxels with having a likelihood above a threshold likelihood (for example, at least 10, 20, 25, 50, or 75 percent) of side effects (in general or specifically selected side effects) to generate the desired stimulation region.

[0072] In step 508, the desired stimulation region is compared to multiple estimated stimulation regions. The system may utilize any number of estimated stimulation regions, such as at least 10, 25, 50, 100, 200, or 500 estimated stimulation regions. These estimated stimulation regions are each associated with a set of stimulation parameters and can be determined using any method of calculation or estimation, including those disclosed in the references cited above, using the corresponding set of stimulation parameters. In at least some embodiments, the desired stimulation region can be compared to one or more estimated stimulation regions that are calculated or estimated after selection of the desired stimulation region. In at least some embodiments, the estimated stimulation regions can be predetermined prior to the selection of the desired stimulation region or prior to any other step in this method.

[0073] In at least some embodiments, the estimated stimulation regions are estimated or determined with respect to the lead and then those estimated stimulation regions are registered to the anatomical or physiological atlas, images, or the desired stimulation region based on the position or orientation of the lead within the patient. In at least some embodiments, the comparisons between the desired stimulation regions and the multiple estimated stimulation regions include, for example, a quantitative determination of the fit of the identified stimulation region with one or more of the estimated stimulation regions.

[0074] In some embodiments, the system can reject an estimated stimulation region that fails to have a predeter-

mined amount or percentage of overlap with the identified stimulation region. In some embodiments, the system can reject an estimated stimulation region that fails to overlap with a predetermined amount or percentage of the identified stimulation region. The system may include other threshold determinations or, in at least some embodiments, the user may select one or more threshold requirements.

[0075] The comparison may include reporting comparative information on a display or other device to the user. Such comparative information can include one or more of, for example, the amount or percentage coverage of the desired stimulation region by the estimated stimulation region, the amount or percentage of the desired stimulation region that is outside the estimated stimulation region, the amount or percentage of the estimated stimulation region that covers the desired stimulation region, the amount or percentage of the estimated stimulation region that is outside the desired stimulation region, other anatomical or physiological structures that may be stimulated by the estimated stimulation region, or the like. Alternatively or additionally, the desired stimulation region and the estimated stimulation region can be displayed to illustrate the overlap between the two. In some embodiments, the system may only report comparative information on one or more, but less than all, of the estimated stimulation regions or display only one or more, but less than all, of the estimated stimulation regions. The selection of which estimated stimulation regions to include in the report or display may be by the best fit or other criteria that the system or user determines.

[0076] In step 510, one of the estimated stimulation regions is selected based on the comparisons. In some embodiments, one of the estimated stimulation regions is selected by a user, preferably based on comparative information provided by the system to the user. In some embodiments, one of the estimated stimulation regions is selected by the system based on the comparisons. In at least some embodiments, the user can set selection criteria such as, for example, one or more thresholds for overlap, non-overlap, and the like and may provide rules or criteria for selecting among estimated stimulation regions that meet the thresholds, such as priority selection factor(s) or weighting of comparative information. As an example, the system may determine a “goodness-of-fit” based on the difference between the desired stimulation region and the estimated stimulation region and the system selects the estimated stimulation region with the best “goodness-of-fit”. In some of these embodiments, the system may allow the user to override the automatic selection by the system so that the user can select another estimated stimulation region.

[0077] In step 512, stimulation parameters for the selected estimated stimulation region are provided to the user or directly to an implantable pulse generator, external trial stimulator, or other device that generates the electrical stimulation. These parameters can be provided by a wired connection, a wireless connection, or in any other suitable manner. In some embodiments, the system may allow a user to modify the stimulation parameters.

[0078] FIG. 6 is a flowchart illustrating one method for determining a set of stimulation parameters based on a user- or system-selected stimulation region utilizing information regarding synchronous neural activity. It has been found that stimulating subpopulations of neurons that exhibit synchronous neural activity can be used to treat a disease or disorder associated with the synchronous neural activity. U.S. Pat.

Nos. 8,000,794 and 8,280,514 and U.S. Provisional Patent Applications Ser. Nos. 62/053,414; 62/053, 427; 62/053, 501; 62/053,509; and 62/053,589, all of which are incorporated herein by reference, describe methods of performing such stimulation. In at least some embodiments, the stimulation of different subpopulations of neurons can eliminate or reduce the synchronous neural activity. In at least some instances, the stimulation can produce a coordinated reset of the neural subpopulations.

[0079] In step **602**, one or more regions of synchronous neural activity are determined. For example, local field potentials (LFPs) could be measured to map a region of synchronous neural activity, such as pathological coupling of oscillations in different regions of the brain. In other embodiments, the region of synchronous neural activity may be estimated by observation of patient symptoms or using information from other patients. In at least some embodiments, at least one image of an anatomical or physiological region of a patient is received. The image can be any suitable image such as a Mill, CT, ultrasound, or other image. At least one image preferably also includes an implanted electrical stimulation lead within the image so that the position of the lead relative to the patient tissue can be identified. In at least some embodiments, more than one image can be received. For example, in one embodiment, a MRI image of an anatomical or physiological region, such as the brain or spinal cord or other organ, can be obtained to show soft tissue portions of the region. A CT scan can also be obtained for the anatomical or physiological region with the electrical stimulation lead implanted to identify the position and orientation of the lead. In at least some embodiments, the two or more images may be registered with each other.

[0080] In some embodiments, the regions of synchronous neural activity can then be registered to the at least one image of the patient. Alternatively or additionally, the at least one image of the patient of the regions of synchronous neural activity can be registered to an anatomical or physiological atlas.

[0081] In step **604**, one of the anatomical or physiological regions, if there is more than one, determined in step **602** or a portion of the anatomical or physiological region is selected. The selection may be made by a user or can be automatically made by the system.

[0082] In step **606**, the selected anatomical or physiological region is divided into multiple subregions. In at least some embodiments, the subregions do not overlap. In other embodiments, the subregions may overlap by no more than a threshold percentage, such as, for example, 1, 5, 10, or 25% in volume.

[0083] In step **608**, the identified subregions are each compared to multiple estimated stimulation regions. The system may utilize any number of estimated stimulation regions, such as at least 10, 25, 50, 100, 200, or 500 estimated stimulation regions. These estimated stimulation regions are each associated with a set of stimulation parameters and can be using any method of calculation or estimation, including those disclosed in the references cited above, using the corresponding set of stimulation parameters. In at least some embodiments, the desired stimulation region can be compared to one or more estimated stimulation regions that are calculated or estimated after selection of the subregions. In at least some embodiments, the estimated stimu-

lation regions can be predetermined prior to the selection of the desired stimulation region or prior to any other step in this method.

[0084] In at least some embodiments, the estimated stimulation regions are estimated or determined relative to the lead and then those estimated stimulation regions are registered to the anatomical or physiological region and the identified subregions based on the position and orientation of the lead within the patient. The comparison include, for example, a quantitative determination of the fit of the subregions with each of the estimated stimulation regions. In some embodiments, the system can reject an estimated stimulation region that fails to have a predetermined amount or percentage of overlap with the subregion. In some embodiments, the system can reject an estimated stimulation region that fail to overlap with a predetermined amount or percentage of the subregion.

[0085] The comparison may include reporting comparative information on a display or other device to the user. Such comparative information can include one or more of, for example, the amount or percentage coverage of the subregion by the estimated stimulation region, the amount or percentage of the subregion that is outside the estimated stimulation region, the amount or percentage of the estimated stimulation region that covers the subregion, the amount or percentage of the estimated stimulation region that is outside the subregion, or the like. Alternatively or additionally, the subregion and the estimated stimulation region can be displayed to illustrate the overlap between the two.

[0086] In step **610**, one of the estimated stimulation regions is selected for each subregion based on the comparison. In some embodiments, one of the estimated stimulation regions is selected by a user, preferably based on comparative information on the display. In some embodiments, one of the estimated stimulation regions is selected by the system based on the comparisons. The user may set selection criteria including thresholds for overlap, non-overlap, and the like and may provide rules or criteria for selecting among estimated stimulation regions that meet the thresholds, such as priority selection factor(s) or weighting of comparative information. In some of these embodiments, the system may allow the user to override the automatic selection by the system so that the user can select another estimated stimulation region. In at least some embodiments, the individuals estimated stimulation regions for the subregions activate non-overlapping (or only slightly overlapping by no more than a threshold percentage, for example, no more than 1, 5, 10, or 25%), synchronized neuronal populations. This can allow the user or system to generate a desynchronizing pattern of stimulation pulses, aimed at a coordinated reset of the synchronized neural activity.

[0087] In step **612**, stimulation parameters for the selected estimated stimulation region for each subregion are provided to the user or directly to an implantable pulse generator, external trial stimulator, or other device that generates the electrical stimulation. These parameters can be provided by a wired connection, a wireless connection, or in any other suitable manner.

[0088] It will be understood that the system can include one or more of the methods described hereinabove with respect to FIGS. 4-6 in any combination. The methods, systems, and units described herein may be embodied in many different forms and should not be construed as limited

to the embodiments set forth herein. Accordingly, the methods, systems, and units described herein may take the form of an entirely hardware embodiment, an entirely software embodiment or an embodiment combining software and hardware aspects. The methods described herein can be performed using any type of processor or any combination of processors where each processor performs at least part of the process.

[0089] It will be understood that each block of the flowchart illustrations, and combinations of blocks in the flowchart illustrations and methods disclosed herein, can be implemented by computer program instructions. These program instructions may be provided to a processor to produce a machine, such that the instructions, which execute on the processor, create means for implementing the actions specified in the flowchart block or blocks disclosed herein. The computer program instructions may be executed by a processor to cause a series of operational steps to be performed by the processor to produce a computer implemented process. The computer program instructions may also cause at least some of the operational steps to be performed in parallel. Moreover, some of the steps may also be performed across more than one processor, such as might arise in a multi-processor computer system. In addition, one or more processes may also be performed concurrently with other processes, or even in a different sequence than illustrated without departing from the scope or spirit of the invention.

[0090] The computer program instructions can be stored on any suitable computer-readable medium including, but not limited to, RAM, ROM, EEPROM, flash memory or other memory technology, CD-ROM, digital versatile disks ("DVD") or other optical storage, magnetic cassettes, magnetic tape, magnetic disk storage or other magnetic storage devices, or any other medium which can be used to store the desired information and which can be accessed by a computing device.

[0091] The above specification provides a description of the structure, manufacture, and use of the invention. Since many embodiments of the invention can be made without departing from the spirit and scope of the invention, the invention also resides in the claims hereinafter appended.

What is claimed as new and desired to be protected by Letters Patent of the United States is:

1. A method of providing electrical stimulation of a patient, the method comprising:

providing at least one functional map identifying anatomical or physiological volumes that, when stimulated, produce at least one stimulation effect or at least one stimulation side effect in at least one patient, wherein the at least one functional map includes an estimate of a likelihood that the anatomical or physiological volumes will produce the at least one stimulation effect or the at least one stimulation side effect; identifying at least one desired stimulation effect or at least one undesired stimulation side effect;

using the at least one functional map, identifying a desired stimulation region that produces the at least one desired stimulation effect at a first predetermined threshold likelihood or avoids the at least one undesired stimulation side effect at a second predetermined threshold likelihood;

based on the desired stimulation region, identifying an estimated stimulation region that is an estimate of a

stimulation volume for a corresponding set of electrical stimulation parameters using an electrical stimulation lead; and

delivering electrical stimulation to the patient according to the corresponding set of electrical stimulation parameters for the estimated stimulation region.

2. The method of claim 1, further comprising providing the corresponding set of electrical stimulation parameters for the selected one of the estimated stimulation regions to an electrical stimulation device.

3. The method of claim 2, wherein the electrical stimulation device comprises an implantable pulse generator and an electrical stimulation lead that is coupled to the implantable pulse generator and comprises a plurality of electrodes, wherein the delivering the electrical stimulation comprises delivering the electrical stimulation by the implantable pulse generator through at least one of the electrodes of the electrical stimulation lead according to the corresponding set of electrical stimulation parameters for the estimated stimulation region.

4. The method of claim 2, wherein the electrical stimulation device comprises an external trial stimulator and an electrical stimulation lead that is coupled to the external trial stimulator and comprises a plurality of electrodes, wherein the delivering the electrical stimulation comprises delivering the electrical stimulation by the external trial stimulator through at least one of the electrodes of the electrical stimulation lead according to the corresponding set of electrical stimulation parameters for the estimated stimulation region.

5. The method of claim 1, wherein the identifying the at least one desired stimulation effect or the at least one undesired stimulation side effect comprises identifying both the at least one desired stimulation effect and the at least one undesired stimulation side effect.

7. The method of claim 1, wherein the providing at least one functional map comprises providing the at least one functional map with scores associated with the anatomical or physiological volumes, each score being associated with at least one of the at least one stimulation effect or the at least one stimulation side effect.

7. The method of claim 1, wherein the identifying the estimated stimulation region comprises

comparing the desired stimulation region with each of a plurality of potential estimated stimulation regions, wherein each of the potential estimated stimulation regions is an estimate of a stimulation volume for a corresponding set of electrical stimulation parameters using an electrical stimulation lead; and

selecting one of the potential estimated stimulation regions as the estimated stimulation region based on the comparing.

8. The method of claim 7, further comprising receiving at least one selection criterion, wherein the selecting the one of the potential estimated stimulation regions comprises selecting the one of the potential estimated stimulation regions based on the at least one selection criterion.

9. The method of claim 7, further comprising automatically rejecting any of the potential estimated stimulation regions that fails to have a predetermined amount of overlap with the desired stimulation region.

10. The method of claim 7, further comprising obtaining the plurality of possible estimated stimulation regions by calculating each of the possible estimated stimulation regions.

11. The method of claim 7, further comprising obtaining the plurality of possible estimated stimulation regions from a memory of a device.

12. The method of claim 7, wherein the comparing comprises determining a difference between the desired stimulation region and each of the plurality of possible estimated stimulation regions.

13. The method of claim 1, further comprising determining an amount or percentage of the estimated stimulation region outside the desired stimulation region.

14. The method of claim 1, further comprising presenting, on a display, the desired stimulation region and the estimated stimulation region.

15. The method of claim 14, further comprising determining, and displaying on the display, at least one of the following: an amount or percentage coverage of the desired stimulation region by the estimated stimulation region, an amount or percentage of the desired stimulation region that is outside the estimated stimulation region, an amount or percentage of the estimated stimulation region that covers the desired stimulation region, or an amount or percentage of the estimated stimulation region that is outside the desired stimulation region.

16. The method of claim 1, wherein the providing the at least one function map comprises registering at least one patient image into a common atlas space.

17. The method of claim 1, further comprising providing the corresponding set of electrical stimulation parameters for the selected one of the estimated stimulation regions to a user.

18. The method of claim 1, wherein the functional map represents an aggregate of clinical effects across at least 10 patients.

19. The method of claim 1, wherein the identifying the at least one desired stimulation effect or the at least one undesired stimulation side effect comprises identifying both the at least one desired stimulation effect and a plurality of the undesired stimulation side effects.

20. A method of providing electrical stimulation of a patient, the method comprising:

identifying a region of synchronous neural activity;

dividing the region into a plurality of subregions;

comparing the plurality of subregions with a plurality of estimated stimulation regions, wherein each of the estimated stimulation regions is a calculated estimate of a stimulation volume for a corresponding set of electrical stimulation parameters using an electrical stimulation lead;

selecting, for each of the subregions, one of the estimated stimulation regions based on the comparisons such that each of the selected estimated stimulation regions overlaps with any of the other selected estimated stimulation regions by no more than a predetermined threshold; and

delivering electrical stimulation to the patient according to the corresponding set of electrical stimulation parameters for each of the selected estimated stimulation regions.

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