Spatial Artifact Detection for Multi-channel EMG-based Speech Recognition

Till Heistermann, Matthias Janke, Michael Wand and Tanja Schultz

Cognitive Systems Lab, Institute for Anthropomatics, Karlsruhe Institute of Technology, Karlsruhe, Germany

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Abstract:

We introduce a spatial artifact detection method for a surface electromyography (EMG) based speech recognition system. The EMG signals are recorded using grid-shaped electrode arrays affixed to the speakers face. Continuous speech recognition is performed on the basis of these signals. As the EMG data are highdimensional, Independent Component Analysis (ICA) can be applied to separate artifact components from the content-bearing signal. The proposed artifact detection method classifies the ICA components by their spatial shape, which is analyzed using the spectra of the spatial patterns of the independent components. Components identified as artifacts can then be removed. Our artifact detection method reduces the word error rates (WER) of the recognizer significantly. We observe a slight advantage in terms of WER over the temporal signal based artifact detection method by (Wand et al., 2013a).

1 INTRODUCTION

Communication is the exchange of knowledge between people and thus may be considered a fundamental root of civilization. While there are many ways to express thoughts and feelings, speech undoubtedly is the most expressive communication method available. Furthermore, while speech evolved as a means of face-to-face conversation among at most a small group of persons, modern technological enhancements, for example cell phones and speechbased computer interfaces, have made it not only an ubiquitous means of communication between humans across the entire world, but also a method to control technical devices.

This development has been a great progress, but it also brought about problems since speech needs to be clearly audible and cannot be shielded, resulting in disturbance for bystanders, lack of privacy, and deterioration of communication in noisy environments. Furthermore, speech-disabled persons are often excluded from using speech-based computer interfaces. These challenges are tackled by Silent Speech Interfaces, which are systems enabling speech communication to take place without the necessity of emitting an audible acoustic signal, or when an acoustic signal is unavailable. In their survey article, (Denby et al., 2010) provide an overview about the state of the art in Silent Speech Interfaces, and the strengths and limitations of different modalities (Electromyography, Ultrasound, Non-Audible Murmur, etc.).

We report on a surface electromyography (EMG) based Speech Recognition System, where electrical activity of the articulatory muscles is captured by EMG electrodes attached to the speaker's face, and the corresponding speech is decoded and output as text. This method allows speech to be recognized even when it is produced silently, i. e. mouthed without any vocal effort, as demonstrated by (Jorgensen et al., 2003). Most current approaches to EMG based speech recognition use single electrodes for the recording of facial electromyographic signals (Deng et al., 2012), (Jorgensen and Dusan, 2010), (Freitas et al., 2012). However our EMG acquisition system uses *electrode arrays*, as used by (Wand et al., 2013b) for continuous speech recognition and by (Kubo et al., 2013) for vowel discrimination. While single electrodes can be placed precisely to capture activity from a specific muscle, they require manual setup and one cable for every electrode. Electrode arrays capture signals from a larger area of the speaker's face than single electrodes. This makes them less flexible regarding the positioning, but allows us to locate the exact positions of muscle activities computationally using array processing methods. (Wand et al., 2013b) proposed to apply Independent Component Analysis (ICA) (Hyvärinen and Oja, 2000) as a means to improve the signal quality, and showed that the recog-

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In Proceedings of the International Conference on Bio-inspired Systems and Signal Processing (BIOSIGNALS-2014), pages 189-196 ISBN: 978-989-758-011-6 nition accuracy of the system can be improved by extending the ICA method with an artifact removal algorithm. ICA decomposes an N-dimensional signal into N statistically independent components. We can interpret these components as theoretical source signals, of which we only observe a linear superposition. The idea of artifact removal algorithms is to take a set of ICA source components, and to heuristically separate signal from artifact components, while keeping the signal removing the artifact components. ICA has been used for some time to decompose EEG signals (Jung et al., 2000), (Viola et al., 2009). Studies from medical EMG processing suggest that ICA is also well applicable to EMG electrode arrays (Nakamura et al., 2004), (Ren et al., 2006). Yet to our knowledge (Wand et al., 2013a) were the first to use ICA to reduce artifacts in EMG electrode array based speech recognition. This paper improves upon that work, which used a temporal signal based approach to artifact detection. We study a different kind of artifact detection algorithm which does not consider the computed signal components by themselves, but directly analyzes the ICA decomposition matrix. Our approach uses spatial information, which is complementary to the temporal information used in the temporal signal based method. We therefore expect it to detect other types of artifacts, which suggests a possible benefit from fusing these two detection approaches in future work. We show that our method slightly outperforms, albeit not significantly, the temporal signal based method in terms of speech recognition accuracy.

2 DATA CORPUS

We use the same data corpus as (Wand et al., 2013b) and (Wand et al., 2013a), therefore we follow these authors in the description of the recording process and the resulting corpus. For EMG recording the EMG-USB2 multi-channel EMG amplifier was used, which was produced and distributed by OT Bioelettronica, Italy (www.otbioelettronica.it). The set of electrode arrays was obtained from the same vendor. The recording configuration for the experiments is shown in figure 1. Two types of arrays were used: A chin array with a row of 8 electrodes with 5 mm interelectrode distance (IED), and a cheek array with 4×8 electrodes with 10 mm IED. In order to minimize common-mode artifacts, a bipolar measurement configuration was chosen, where the potential difference between two adjacent channels in a row was measured. This means that out of 4×8 cheek electrodes and 8 chin electrodes, $(4+1) \cdot 7 = 35$ signal channels



Figure 1: Positioning of the EMG array during recording. One 4×8 array is affixed to the speaker's cheek and one 1×8 array is affixed underneath the chin. Image taken from (Wand et al., 2013b) with permission.

were obtained in total. The EMG signals were sampled at 2048 Hz. The audio signal was recorded with a standard close-talking microphone in parallel to the EMG recordings. An analog marker system was used to synchronize the EMG and audio recordings. The EMG signal was delayed by 50 ms compared with the audio signal, to adjust the anticipatory properties of EMG signal (Cavanagh and Komi, 1979) (Jou et al., 2006).

The recording protocol follows (Schultz and Wand, 2010): We used 7 sessions recorded by 6 speakers, where each session consisted of 50 phonetically balanced English sentences: a set of 10 base sentences, which was kept fixed across sessions and used for testing, and a set of 40 training sentences which varied across sessions. The sentences belong to the Broadcast News domain and were read in normal, audible speech. Note that the corpus also contains larger sessions, as well as recordings of silently mouthed speech, which were not used in this study. All experiments were session-dependent, i. e. training and testing was performed separately for each session. The 7 sessions have an average length of 191 seconds each, whereof 149 s are training and 42 s are testing utterances.

3 BASELINE RECOGNITION SYSTEM

3.1 Feature Extraction

Before any features are extracted, the data are preprocessed by synchronizing the EMG with the audio recordings, and by normalizing all 35 EMG channels with respect to mean and variance. The normalization step is necessary because of varying electrode resistances at each channel.

If no Independent Component Analysis (ICA) is applied, features are extracted from each of the channels. When ICA is applied, the ICA transformation matrix is computed session-wise on the training data, resulting in a set of ICA components. We use the Infomax ICA algorithm according to (Bell and Sejnowski, 1995), as implemented in the Matlab EEGLAB toolbox (Delorme and Makeig, 2004), to compute the ICA decomposition. For a thorough introduction to the theory of Independent Component Analysis, we would like to refer the reader to (Cardoso, 1998) and (Hyvärinen and Oja, 2000). For the subsequent artifact removal, (Wand et al., 2013a) introduced two methods:

- The *direct method* means that artifact components are removed, and features are extracted *on the remaining ICA components*.
- The *back-projection* method consists of taking the ICA decomposition, setting detected artifact channels to zero, and then applying the inverse of the ICA transformation. This "back-projects" the signal representation into its original domain, but suppresses the detected noise. Features are then extracted on the back-projected data.

We compare our results with two baseline systems: First, a baseline system without any ICA application or artifact removal. Second, we perform the ICA decomposition, but do not remove any components. In all cases, features are extracted on each channel or component separately. We use the timedomain feature extraction proposed by (Jou et al., 2006) and also used by (Wand et al., 2013a).

For any given frame \mathbf{f} , $\mathbf{\bar{f}}$ is its frame-based timedomain mean, $\mathbf{P_f}$ is its frame-based power, and $\mathbf{z_f}$ is its frame-based zero-crossing rate.

For an EMG signal with normalized mean x[n], we obtain a low-pass filtered signal w[n] by using a double nine-point moving average:

$$w[n] = \frac{1}{9} \sum_{k=-4}^{4} v[n+k]$$
(1)

where
$$v[n] = \frac{1}{9} \sum_{k=-4}^{4} x[n+k].$$
 (2)

The complementary high-frequency signal is p[n] = x[n] - w[n], and the rectified high-frequency signal is r[n] = |p[n]|.

Let $S(\mathbf{f}, n)$ be the stacking of adjacent frames of feature \mathbf{f} in the size of 2n + 1 (-n to n) frames. The feature **TD**n, for one EMG channel or ICA component, is now defined as follows:

$$\mathbf{TD}n = S(\mathbf{TD}0, n), \tag{3}$$

where
$$\mathbf{TD0} = [\bar{\mathbf{w}}, \mathbf{P}_{\mathbf{w}}, \mathbf{P}_{\mathbf{r}}, \mathbf{z}_{\mathbf{p}}, \bar{\mathbf{r}}],$$
 (4)

i. e. a stacking of adjacent feature vectors with context width $2 \cdot n + 1$ is performed, with varying *n*. Finally,

the combination of all channel-wise feature vectors yields the **TD**n feature vector. Frame size and frame shift are set to 27 ms and 10 ms, respectively.

After this step, we apply Principal Component Analysis (PCA) on the resulting extended feature vectors, reducing their dimensionality to 700. This step is followed by Linear Discriminant Analysis (LDA) to obtain a final feature vector with 32 coefficients. (Wand et al., 2013b) showed that the PCA step is necessary in order to obtain robust results: For a small amount of training data relative to the sample dimensionality, the LDA within-scatter matrix becomes sparse (Qiao et al., 2009), which causes the LDA computation to become inaccurate. ¹ As LDA is a supervised method, we need to assign classes to every feature vector of the training set. An acoustical speech recognizer is used to align a most likely sequence of sub-phonemes to the simultaneously recorded audio sequence. As the audio and EMG data are recorded simultaneously, these subphonemes can be used as classes for the EMG training data, between which LDA maximizes discriminability. In total, 136 different classes are used.

3.2 Training and Decoding

We perform EMG-based *continuous* speech recognition. For this purpose, models of words or utterances must be constructed from smaller units. While in conventional acoustic speech recognition, these units are normally context-dependent subphones (Lee, 1989), we follow (Schultz and Wand, 2010) and use Bundled Phonetic Features (BDPFs) as foundation for our modeling. Phonetic Features represent properties of phones, like the place or manner of articulation. Phonetic feature bundling means that *dependencies* between these features are taken into account. Each such BDPF model is represented by a mixture of Gaussians. The knowledge from the different phonetic features is merged using a *multi-stream* model (Metze and Waibel, 2002) (Jou et al., 2007).

Otherwise, our recognizer follows a standard pattern. We use three-state left-to-right fully continuous Hidden Markov Models (HMM), where the emission

¹LDA essentially consists of a maximization problem $\frac{w^T S_B w}{w^T S_W w}$, where S_W is the within scatter matrix and S_B is the between scatter matrix. The optimization is performed by means of an eigenvalue analysis. Numerical instability arises when the denominator of the above fraction is singular, which happens if S_W has zero eigenvalues. Note that for the PCA computation, this is not a problem since for PCA, one maximizes a single term $w^T Cw$ (*C* is the sample covariance matrix) instead of a fraction and all samples are used for covariance estimation.

probabilities are modeled using multi-stream Bundled Phonetic Features, as described above. Recognizer training consists of generating models for nonbundled phonetic features, running the phonetic feature bundling, and then retraining the models using the newly generated BDPF structure. See (Schultz and Wand, 2010) for a detailed description. For this training, phone-based time alignments of the EMG data are required. Since we record the acoustic speech in parallel to the EMG data, these time-alignments can be generated by forced-aligning the audio data with a standard acoustic speech recognizer, according to (Jou et al., 2006).

For decoding, we use the trained HMM together with a trigram Broadcast News language model. The test set perplexity is 24.24. We restrict our decoding vocabulary to the 108 words that appear in the test set. In this paper we follow (Wand et al., 2013a), where the corpus which we use was first introduced. The small vocabulary size is due to the limited amount of training data, it has been shown for example in (Deng et al., 2012) that much larger vocabularies can be used if more training data is available.

3.3 Evaluation Metric

We evaluate our recognition systems using the Word Error Rate (WER). The Word Error Rate indicates which percentage of spoken words is recognized wrongly, thus lower WER values indicate better recognition performance. It is widely used in speech recognition. The Word Error Rate for continuous speech recognition tasks is defined as follows. The speech recognition hypothesis and the correct reference sentence are compared by computing the optimal alignment with respect to word-based edit distance. Over all utterances in the test set, the number of word *substitutions (#S), insertions (#I),* and *deletions (#D)* is counted, and divided by the total number of words (#T) in the references.

WER =
$$\frac{\#S + \#I + \#D}{\#T}$$
. (5)

4 METHODS OF ARTIFACT DETECTION

The goal of artifact detection algorithms is to decide which ICA-components of the EMG signal represent speech-related muscle activities and which represent artifacts. We distinguish between *temporal signal based* and *spatial* methods. In temporal signal based artifact detection, as introduced by (Wand et al., 2013a), components are classified by the spectral properties of the post-ICA signal. We introduce spatial artifact detection as a new approach to artifact detection for EMG arrays. Here, each independent component is classified by the pattern of its spatial filter, i. e. the distribution of source dimensions contributing to the component. All components that are detected as artifacts are removed before applying the further preprocessing steps described in section 3.1.

4.1 Temporal Signal based Artifact Detection Heuristics

In their approach to temporal signal based artifact detection, (Wand et al., 2013a) designed three classification measures to recognize different kinds of artifact signal components. All training utterances are transformed separately using the ICA matrix. If at least one of the three measures classifies a component as an artifact on more than $50\%^2$ of the training utterances, this component is considered an artifact by the temporal signal based heuristic. The authors use the following per-utterance classification measures:

- Autocorrelation measure: This method typically identifies regular artifacts, like power line noise. The autocorrelation of the component signal is computed and if the value of the first peak exceeds a threshold of 0.5, this component is deemed an artifact.
- High-frequency noise detection: The surface EMG signal has a range of 0 500 Hz (Zhao and Xu, 2011). Therefore, components with distinct high-frequency parts are likely to be artifacts. The signal is transformed into the frequency domain and split into a high and low frequency part at 500 Hz. If the ratio between high-frequency signal energy and low frequency signal energy is larger than a threshold of 0.75, the component is considered an artifact.
- EMG signal range: The main energy of the EMG signal is found between 50 and 150 Hz. If the energy of this band is less than fourfold the energy of the remaining frequency bands, a component is deemed an artifact.

4.2 Artifact Detection based on Spatial Filters

We first introduce the term **spatial pattern**. A spatial pattern (Blankertz et al., 2008) is a matrix of the

²(Wand et al., 2013a) found a consensus threshold of 50% as optimal for the *direct method*, and a threshold of 10% as optimal for *back-projection* setups.



Figure 2: Typical spatial patterns for artifact components (left) and EMG signal components (right). Red pixels indicate positive channel weights and blue pixels indicate negative channel weights.

same size as the electrode array that was used for the recording. Each spatial pattern is a compact representation of a single independent component. It is obtained by remapping the column of the inverse ICA matrix A that corresponds to the independent component. The spatial pattern visualizes in which electrodes the hidden signal component will be present by which amount. Note that each channel can contribute with a positive or negative weight to each component. Figure 2 shows exemplary spatial patterns for the 28channel signal measured from the cheek array, where we manually labeled the ICA components as artifacts or EMG-like. One can see six spatial patterns, corresponding to six independent components. Each spatial pattern has been computed by taking one row of the inverted ICA matrix and reshaping it into the form of the original EMG array. The spatial patterns on the right hand side are three typical signal components, each exhibiting a visible region of EMG activity, with only gradually changing intensity. The lefthand side shows three typical artifact components: Either the spatial pattern of that component appears random (bottom left), or the pattern is dominated by only a few single components (top/middle left). These are often caused by single disconnected electrodes. Note that this observation only applies to the spatial pattern of the cheek array: On the chin array, we observed no direct connection between artifact components and their spatial patterns. We assume this is because the chin array with its eight electrodes is too small to perform a meaningful analysis of spatial spectra.

Using spatial patterns to visualize and classify independent components is a common technique in EEG applications (Blankertz et al., 2008). Viola et al. (Viola et al., 2009) proposed a semi-automatic technique for clustering independent components and identification in EEG, which is based on comparing all independent components with a user-provided template pattern, and scored them by component similarity. We use a similar approach for classification of the EMG components, however we use a weaker definition of component similarity, which also takes position shifts of the components into account. Given that activity of a single articulatory muscle is usually recorded at a number of neighboring array electrodes, we expect that *good* signals are likely to originate from a whole region of the electrode array. In contrast, many components that correspond to signal artifacts, for instance a broken channel that carries mains hum or other noise, often originate from a single electrode of the array.

We apply this observation to design an artifact detection algorithm that prefers *smooth* patterns containing predominantly large regions over *non-smooth* patterns with frequent or abrupt changes. These two classes can be separated well by looking at the *spectral domain* of the spatial patterns. We therefore introduce the *Spatial Spectral Correlation* as a measure for image similarity and show how it can be applied to measure the existence of smooth regions in the distributions of independent components in EMG arrays.

4.3 Spatial Spectral Correlation as a Measure for Image Similarity

Given two image matrices I_1 and I_2 of the size $M \times N$, we define the **Spatial Spectral Correlation** (SSC) as the correlation between the two log-magnitude spectra of the image matrices. Let

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$$SSC(I_1, I_2) := \\ \langle \log | DFT^2 \{ I_1 \} |, \log | DFT^2 \{ I_2 \} | \rangle \quad (6)$$

where $\langle \cdot, \cdot \rangle$ denotes the scalar product of two matrices

$$\langle A,B\rangle = \sum_{u=1}^{M} \sum_{\nu=1}^{N} A_{u,\nu} \cdot B_{u,\nu}$$
(7)

and $DFT^2{I}$ denotes the finite two-dimensional Discrete Fourier Transform of an image matrix $I \in \mathbb{R}^{M \times N}$:

$$DFT^{2}\{I\}_{u,v} = \sum_{y=0}^{N-1} (\sum_{x=0}^{M-1} I_{x,y} \cdot e^{-j2\pi \frac{ux}{M}}) \cdot e^{-j2\pi \frac{vy}{N}}$$
(8)

The SSC between two images is high if the images have a similar magnitude spectrum, but low for images with diverging magnitude spectra. As this similarity measure uses only the magnitude spectrum and discards the phase information, a circular shift of the image or any harmonic frequency does not change the value of the SSC score, as all position information is encoded in the phase spectrum. SSC therefore measures how well the frequency histograms of two images match.



Figure 3: The reference template for the spatial pattern of an ideal, spatially distributed component with dominant low frequencies. Red pixels indicate positive weights and blue pixels indicate negative weights.

4.4 Using SSC to Select Artifact Components

We can now use SSC to assign a score to the patterns of the independent components. This score represents the similarity between the magnitude spectrum of the component's spatial pattern and the magnitude spectrum template pattern. This template pattern can be chosen to match the specific spatial patterns to look for. For our heuristic, we chose a template pattern adhoc to contain dominant low-frequency components and only weak high-frequency components, similar to those observed in the manually classified components. Figure 3 shows this reference pattern.

We classify the independent components as signal or artifact components using two approaches and compare these: The first is an *absolute threshold* for the SSC scores, the second is choosing a fixed number of high-scoring components (*k-best approach*). Note that while we applied *positive selection* by choosing components with high SSC to actual signal components, one could also apply *negative selection* by discarding components with high similarity to prototypical artifact components.

5 EXPERIMENTS AND RESULTS

We find that the base system without ICA has an average *Word Error Rate* (WER) of 46.3%. If we apply ICA without removing any components, the WER is slightly reduced to 45.3%. We refer to this configuration as "*with ICA*".

We compare the new spatial approach with the following reference systems: As the first reference, we use "with ICA", the best baseline setup without artifact removal at a WER of 45.3%. As the second reference, we use the results of the best temporal signal based method by (Wand et al., 2013a), using the parameters found optimal in their study. This direct temporal signal based approach yields a WER of 40.8%.

From manual inspection of the data we observed that about one third of the 28 independent components in the cheek array correspond to artifacts. We chose the parameters for the spatial artifact detection heuristic accordingly: We evaluated the k-best approach choosing the 16 and 20 best-scoring components (In figure 4, these are denoted as *16-best* and *20-best*). For the absolute threshold approach, we evaluated thresholds of -5 and -10 for the SSC score with the template pattern. These thresholds classified 6.5 and 9.4 components as artifacts on average.

Note that we do not apply the spatial heuristics to the small chin array: To ensure comparability with the other setups, the artifact removal algorithm of (Wand et al., 2013a) is applied to the 7 components of the chin array. These setups were evaluated using the recognition system described in section 3.2 on our data corpus.

Figure 4 shows the WERs for the respective artifact reduction variants used during preprocessing. Using direct spatial artifact detection and an absolute SSC threshold of -5 yields a WER of 36.07%, which is a 20.45% relative improvement compared with the best setup without artifact removal. Compared with the temporal signal based artifact removal method by (Wand et al., 2013a), the WER is reduced by a relative 11.68%. Using the back-projection approach and an SSC threshold of -10, the WER is 42.14%, which corresponds to a relative improvement of 7% compared with the "with ICA" setup. Note that the reported values of the word error rates probably overestimate the actual improvement in WER, as the parameters for the artifact detection method were chosen on the corpus data used for evaluation. Therefore we expect a slightly higher WER when the artifact detection is applied to yet unseen data.

All observed performance improvements were tested for statistical significance using paired t-tests: For all *direct* spatial methods, the improvement with respect to the "with ICA" baseline method is significant with a confidence level of > 99%. However, when comparing the spatial with the temporal signal based approach from (Wand et al., 2013a), the observed improvement has a confidence of only 85.74%, which is not significant. The difference between the *absolute threshold* and the *k-best* methods for spatial artifact detection is statistically not significant, even though the threshold-based methods perform slightly better.

6 **DISCUSSION**

Achieving a WER of 36.1%, the artifact reduction pushes the performance of our EMG array based recognition system towards the range of 20 - 30%,



Figure 4: Word-Error-Rates (WER) using the direct and the back-projection method, using no artifact detection (red), temporal signal based artifact removal (blue), spatial artifact removal with absolute thresholds (dark green), or spatial artifact removal with k-best (light green)

which is what (Wand and Schultz, 2011) report for the same session lengths and vocabulary sizes for *single electrode based* continuous speech recognition.

Using about 7 times as much training data, (Wand and Schultz, 2011) achieve an error rate of 10.45%. At the same time, using about 30 times as much training data, (Deng et al., 2012) achieve an error rate of 3.1%. We thus expect that Word Error Rates for our array based system will drop further if more training data are used.

However, please note that it is difficult to compare the results of EMG based speech recognition approaches between research groups quantitatively, as the difficulty of the problem at hand varies with sensor positioning, session length, vocabulary size, the language used and if isolated words or continuous speech are recognized.

7 CONCLUSIONS

We have shown that the proposed spatial artifact removal reduces the WER of an EMG array based speech recognition system significantly. Furthermore, the spectrum of spatial patterns provides a promising feature to classify ICA components in EMG arrays: It discriminates spatially smooth components well from components that consist only of a few distinct channels. The spatial method capitalizes on the continuity of EMG signals recorded in close proximity, as opposed to technical artifacts which usually occur in isolated channels. Our experiments show that the spatial method performs at least as good as existing temporal signal based artifact detection methods.

Concerning the back-projection of ICA components vs. their direct use, we found out that the direct approach is preferable. We thus conclude that the application of an ICA transformation seems to have a positive effect for itself, even without any removed artifacts. This confirms results by (Wand et al., 2013a), who examined the same question using their temporal signal based artifact detection method.

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