

A high-performance speech neuroprosthesis

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Speech brain–computer interfaces (BCIs) have the potential to restore rapid communication to people with paralysis by decoding neural activity evoked by attempted speech into text^{1,2} or sound^{3,4}. Early demonstrations, although promising, have not yet achieved accuracies sufficiently high for communication of unconstrained sentences from a large vocabulary^{1–7}. Here we demonstrate a speech-to-text BCI that records spiking activity from intracortical microelectrode arrays. Enabled by these high-resolution recordings, our study participant—who can no longer speak intelligibly owing to amyotrophic lateral sclerosis—achieved a 9.1% word error rate on a 50-word vocabulary (2.7 times fewer errors than the previous state-of-the-art speech BCI²) and a 23.8% word error rate on a 125,000-word vocabulary (the first successful demonstration, to our knowledge, of large-vocabulary decoding). Our participant's attempted speech was decoded at 62 words per minute, which is 3.4 times as fast as the previous record⁸ and begins to approach the speed of natural conversation (160 words per minute⁹). Finally, we highlight two aspects of the neural code for speech that are encouraging for speech BCIs: spatially intermixed tuning to speech articulators that makes accurate decoding possible from only a small region of cortex, and a detailed articulatory representation of phonemes that persists years after paralysis. These results show a feasible path forward for restoring rapid communication to people with paralysis who can no longer speak.

It is not yet known how orofacial movement and speech production are organized in motor cortex at single-neuron resolution. To investigate this, we recorded neural activity from four microelectrode arrays—two in area 6v (ventral premotor cortex)¹⁰ and two in area 44 (part of Broca's area)—while our study participant in the BrainGate2 pilot clinical trial attempted to make individual orofacial movements, speak single phonemes or speak single words in response to cues shown on a computer monitor (Fig. 1a,b; Extended Data Fig. 1 shows recorded spike waveforms). Implant locations for the arrays were chosen using the Human Connectome Project multimodal cortical parcellation procedure¹⁰ (Extended Data Fig. 2). Our participant (T12) has bulbar-onset amyotrophic lateral sclerosis (ALS) and retains some limited orofacial movement and an ability to vocalize, but is unable to produce intelligible speech.

We found strong tuning to all tested categories of movement in area 6v (Fig. 1c shows an example electrode). Neural activity in 6v was highly separable between movements: using a simple naive Bayes classifier applied to 1 s of neural population activity for each trial, we could decode from among 33 orofacial movements with 92% accuracy, 39 phonemes with 62% accuracy and 50 words with 94% accuracy (Fig. 1d and Extended Data Fig. 3). By contrast, although area 44 has previously been implicated in high-order aspects of speech production^{11–14}

it appeared to contain little to no information about orofacial movements, phonemes or words (classification accuracy below 12%; Fig. 1d). The absence of production-related neural activity in area 44 is consistent with some recent work questioning the traditional role of Broca's area in speech^{15–18}.

Next, we examined how information about each movement category was distributed across area 6v. We found that speech could be more accurately decoded from the ventral array, especially during the instructed delay period (Fig. 1e), whereas the dorsal array contained more information about orofacial movements. This result is consistent with resting-state functional magnetic resonance imaging (fMRI) data from the Human Connectome Project¹⁰ and from T12 that situates the ventral region of 6v as part of a language-related network (Extended Data Fig. 2). Nevertheless, both 6v arrays contained rich information about all movement categories. Finally, we found that tuning to speech articulators (jaw, larynx, lips or tongue) was intermixed at the single-electrode level (Fig. 1f and Extended Data Fig. 4) and that all speech articulators were clearly represented within both 3.2 × 3.2 mm² arrays. Although previous work using electrocorticographic grids has suggested that there may be a broader somatotopic organization¹⁹ along precentral gyrus, these results suggest that speech articulators are highly intermixed at a single-neuron level.

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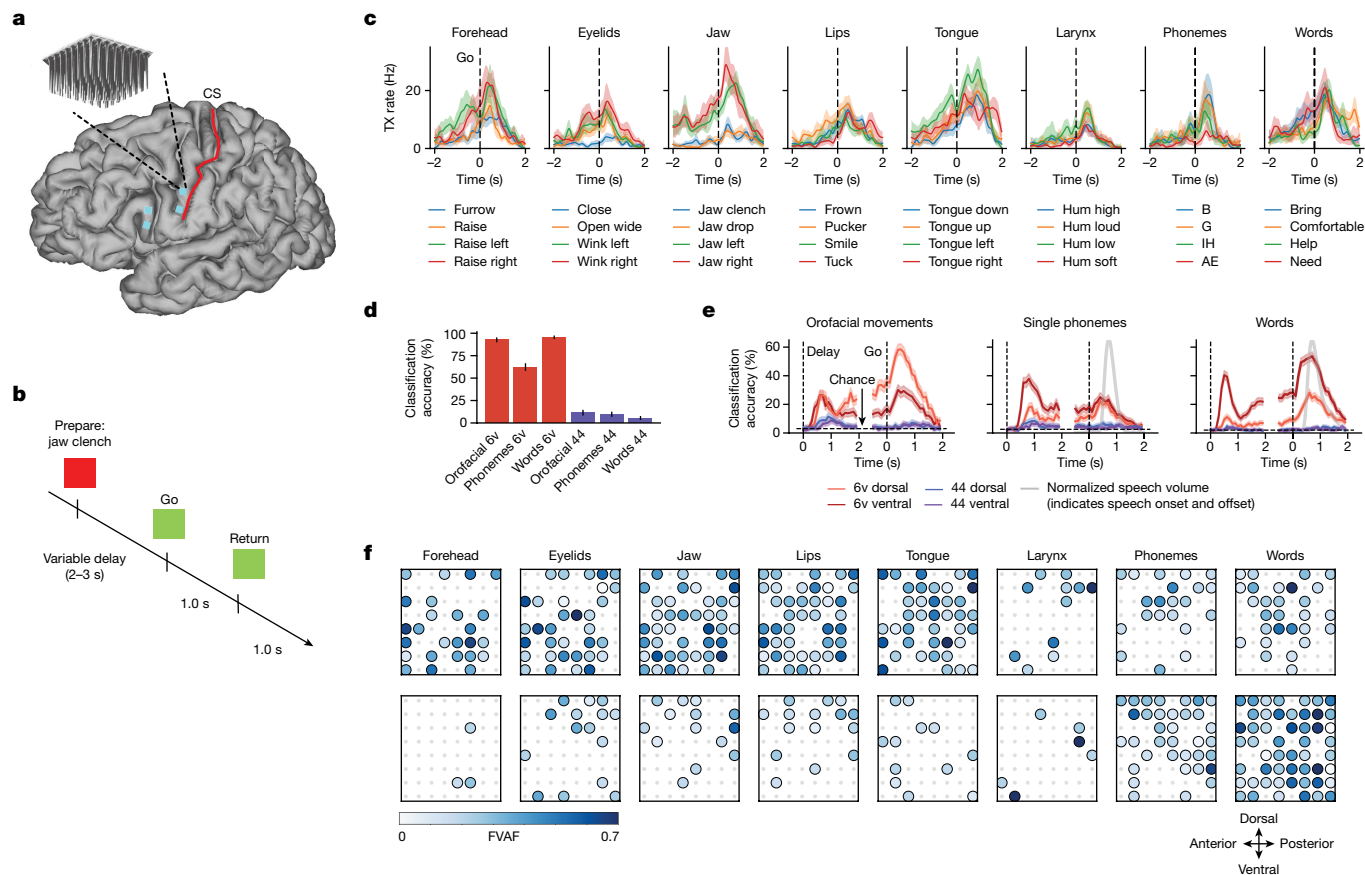


Fig. 1 | Neural representation of orofacial movement and attempted speech.

a, Microelectrode array locations (cyan squares) are shown on top of MRI-derived brain anatomy (CS, central sulcus). **b**, Neural tuning to orofacial movements, phonemes and words was evaluated in an instructed delay task. **c**, Example responses of an electrode in area 6v that was tuned to a variety of speech articulator motions, phonemes and words. Each line shows the mean threshold crossing (TX) rate across all trials of a single condition ($n = 20$ trials for orofacial movements and words, $n = 16$ for phonemes). Shaded regions show 95% confidence intervals (CIs). Neural activity was denoised by convolving with a Gaussian smoothing kernel (80 ms s.d.). **d**, Bar heights denote the classification accuracy of a naive Bayes decoder applied to 1 s of neural population activity from area 6v (red bars) or area 44 (purple bars) across all

movement conditions (33 orofacial movements, 39 phonemes, 50 words). Black lines denote 95% CIs. **e**, Red and blue lines represent classification accuracy across time for each of the four arrays and three types of movement. Classification was performed with a 100 ms window of neural population activity for each time point. Shaded regions show 95% CIs. Grey lines denote normalized speech volume for phonemes and words (indicating speech onset and offset). **f**, Tuning heatmaps for both arrays in area 6v, for each movement category. Circles are drawn if binned firing rates on that electrode were significantly different across the given set of conditions ($P < 1 \times 10^{-5}$ assessed with one-way analysis of variance; bin width, 800 ms). Shading indicates the fraction of variance accounted for (FVAF) by across-condition differences in mean firing rate.

In sum, robust and spatially intermixed tuning to all tested movements suggests that the representation of speech articulation is probably sufficiently strong to support a speech BCI, despite paralysis and narrow coverage of the cortical surface. Because area 44 appeared to contain little information about speech production, all further analyses were based on area 6v recordings only.

Decoding attempted speech

Next, we tested whether we could neurally decode whole sentences in real time. We trained a recurrent neural network (RNN) decoder to emit, at each 80 ms time step, the probability of each phoneme being spoken at that time. These probabilities were then combined with a language model to infer the most probable underlying sequence of words, given both the phoneme probabilities and the statistics of the English language (Fig. 2a).

At the beginning of each RNN performance-evaluation day we first recorded training data during which T12 attempted to speak 260–480 sentences at her own pace (41 ± 3.7 min of data; sentences were chosen randomly from the switchboard corpus²⁰ of spoken English). A computer monitor cued T12 when to begin speaking and what

sentence to speak. The RNN was then trained on these data in combination with all previous days' data, using custom machine learning methods adapted from modern speech recognition^{21–23} to achieve high performance on limited amounts of neural data. In particular, we used unique input layers for each day to account for across-day changes in neural activity, and rolling feature adaptation to account for within-day changes (Extended Data Fig. 5 highlights the effect of these and other architecture choices). By the final day our training dataset consisted of 10,850 total sentences. Data collection and RNN training lasted for 140 min per day on average (including breaks).

After training, the RNN was evaluated in real time on held-out sentences that were never duplicated in the training set. For each sentence, T12 first prepared to speak the sentence during an instructed delay period. When the 'go' cue was given, neural decoding was automatically triggered to begin. As T12 attempted to speak, neurally decoded words appeared on the screen in real time reflecting the language model's current best guess (Supplementary Video 1). When T12 had finished speaking she pressed a button to finalize the decoded output. We used two different language models: a large-vocabulary model with 125,000 words (suitable for general English) and a small-vocabulary model with 50 words (suitable for expressing some simple sentences

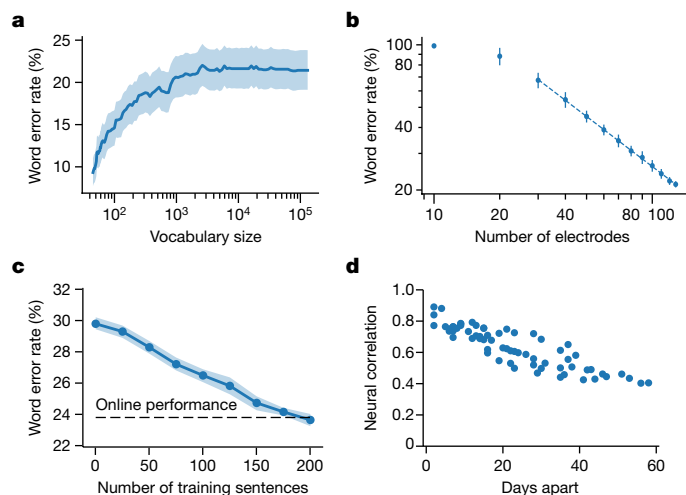


Fig. 4 | Design considerations for speech BCIs. **a**, Word error rate as a function of language model vocabulary size, obtained by reprocessing the 50-word-set RNN outputs with language models of increasingly large vocabulary size. Word error rates were aggregated over the 250 available trials (50 for each of the five evaluation days). The shaded region indicates 95% CI (computed by bootstrap resampling across trials, $n = 10,000$ resamplings). **b**, Word error rate as a function of the number of electrodes included in an offline decoding analysis (each filled circle represents the average word error rate of RNNs trained with that number of electrodes, and each thin line shows s.d. across ten RNNs). There appears to be a log-linear relationship between the number of electrodes and performance, such that doubling the electrode count cuts word error rate by nearly half (factor of 0.57; dashed line represents the log-linear relationship fit with least squares). **c**, Evaluation data from the five vocalized speech-evaluation days were reprocessed offline using RNNs trained in the same way, but with fewer (or no) training sentences taken from the day on which performance was evaluated. Word error rates averaged across ten RNN seeds (blue line) are reasonable even when no training sentences are used from evaluation day (that is, when training on previous days' data only). The shaded region shows 95% CI across the ten RNN seeds (bootstrap resampling method, $n = 10,000$ resamplings). The dashed line represents online performance for reference (23.8% word error rate). **d**, The correlation (Pearson r) in neural activity patterns representing a diagnostic set of words is plotted for each pair of days, showing high correlations for nearby days.

that a detailed articulatory code for phonemes is still preserved even years after paralysis.

Design considerations for speech BCIs

Finally we examined three design considerations for improving the accuracy and usability of speech BCIs: language model vocabulary size, microelectrode count and training dataset size.

To understand the effect of vocabulary size we reanalysed the 50-word-set data by reprocessing the RNN output using language models of increasingly larger vocabulary size (Fig. 4a). We found that only very small vocabularies (for example, 50–100 words) retained the large improvement in accuracy relative to a large-vocabulary model. Word error rates saturated at around 1,000 words, suggesting that use of an intermediate vocabulary size may not be a viable strategy for increasing accuracy.

Next we investigated how accuracy improved as a function of the number of electrodes used for RNN decoding. Accuracy improved monotonically with a log-linear trend (Fig. 4b; doubling the electrode count appears to cut the error rate nearly in half). This suggests that intracortical devices capable of recording from more electrodes (for example, denser or more extensive microelectrode arrays) may be able to achieve improved accuracies in the future, although the extent to which this downward trend will continue remains to be seen.

Finally, in this demonstration we used a large amount of training data per day (260–440 sentences). Retraining the decoder each day helps the decoder to adapt to neural changes that occur across time. We examined offline whether this amount of data per day was necessary by reprocessing the data with RNNs trained with fewer sentences. We found that performance was good even without using any training data on the new day (Fig. 4c; word error rate was 30% with no retraining). Furthermore, we found that neural activity changed at a gradual rate over time, suggesting that unsupervised algorithms for updating decoders to neural changes should be feasible^{24–27} (Fig. 4d).

Discussion

People with neurological disorders such as brainstem stroke or ALS frequently face severe speech and motor impairment and, in some cases, complete loss of the ability to speak (locked-in syndrome²⁸). Recently, BCIs based on hand movement activity have enabled typing speeds of between eight and 18 words per minute in people with paralysis^{8,29}. Speech BCIs have the potential to restore natural communication at a much faster rate but have not yet achieved high accuracies on large vocabularies (that is, unconstrained communication of any sentence the user may want to say)^{1–7}. Here we demonstrate a speech BCI that can decode unconstrained sentences from a large vocabulary at a speed of 62 words per minute, using microelectrode arrays to record neural activity at single-neuron resolution. To our knowledge, this is the first time a BCI has substantially exceeded the communication rates that can be provided by alternative technologies for people with paralysis (for example, eye tracking³⁰).

Our demonstration is a proof of concept that decoding attempted speaking movements with a large vocabulary is possible using neural spiking activity. However, it is important to note that it does not yet constitute a complete, clinically viable system. Work remains to be done to reduce the time needed to train the decoder and adapt to changes in neural activity that occur across several days without requiring the user to pause and recalibrate the BCI (see refs. 24–27,31 for initial promising approaches). In addition, intracortical microelectrode array technology is still maturing^{32,33} and is expected to require further demonstrations of longevity and efficacy before widespread clinical adoption (although recent safety data are encouraging³⁴ and next-generation recording devices are under development^{35,36}). Furthermore, the decoding results shown here must be confirmed in additional participants, and their generalizability to people with more profound orofacial weakness remains an open question. Variability in brain anatomy is also a potential concern, and more work must be done to confirm that regions of precentral gyrus containing speech information can be reliably targeted.

Importantly, a 24% word error rate is probably not yet sufficiently low for everyday use (for example, compared with a 4–5% word error rate for state-of-the-art speech-to-text systems^{23,37}). Nevertheless, we believe that our results are promising. First, word error rate decreases as more channels are added, suggesting that intracortical technologies that record more channels may enable lower word error rates in the future. Second, scope still remains for optimization of the decoding algorithm; with further language model improvements and, when mitigating the effect of within-day non-stationarities, we were able to reduce word error rate to 11.8% in offline analyses. Finally we showed that ventral premotor cortex (area 6v) contains a rich, intermixed representation of speech articulators even within a small area ($3.2 \times 3.2 \text{ mm}^2$), and that the details of how phonemes are articulated are still faithfully represented even years after paralysis in someone who can no longer speak intelligibly. Taken together, these findings suggest that a higher channel count system that records from only a small area of 6v is a feasible path towards the development of a device that can restore communication at conversational speeds to people with paralysis.

Online content

Any methods, additional references, Nature Portfolio reporting summaries, source data, extended data, supplementary information, acknowledgements, peer review information; details of author contributions and competing interests; and statements of data and code availability are available at <https://doi.org/10.1038/s41586-023-06377-x>.

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Reporting summary

Further information on research design is available in the Nature Portfolio Reporting Summary linked to this article.

Data availability

All neural data needed to reproduce the findings in this study are publicly available on Dryad (<https://doi.org/10.5061/dryad.x69p8czpq>). The dataset contains neural activity recorded during the attempted speaking of 10,850 sentences, as well as instructed delay experiments designed to investigate the neural representation of orofacial movement and speech production. As part of this study we also analysed publicly available electromagnetic articulography data: the USC-TIMIT database (<https://sail.usc.edu/span/usc-timit/>) and the Haskins Production Rate Comparison database (<https://yale.app.box.com/s/cfn8hj2puveo65fq54rp1ml2mk7moj3h>).

Code availability

Code that implements an offline reproduction of the central findings in this study (high-performance neural decoding with an RNN) are publicly available on GitHub at <https://github.com/fwillett/speechBCI>.

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Author contributions F.R.W. led the investigation and wrote the initial RNN decoder and task software. C.F. implemented the language models and finalized RNN software. F.R.W., E.M.K. and C.F. optimized and troubleshooted the real-time decoding pipeline. F.R.W. and E.M.K. analysed the effect of RNN architecture choices and investigated the representation of speech in 6v and 44. D.T.A. was responsible for rig software architecture and hardware. G.H.W. computed saliency vectors for the articulatory representation analysis. E.Y.C. led the collection of MRI scans and applied the Human Connectome Project cortical parcellation procedure that was used to select array location targets, with the assistance of M.F.G. F.R.W., E.M.K., C.F. and F.K. conducted all other data-collection sessions. F.K. was responsible for coordination of session scheduling, logistics and daily equipment setup/disconnection. L.R.H. is the sponsor-investigator of the multisite clinical trial. J.M.H. planned and performed T12's array placement surgery and was responsible for all clinical trial-related activities at Stanford. F.R.W. wrote the manuscript with the help of E.M.K. and C.F. All authors reviewed and edited the manuscript. The study was supervised and guided by S.D., K.V.S. and J.M.H.

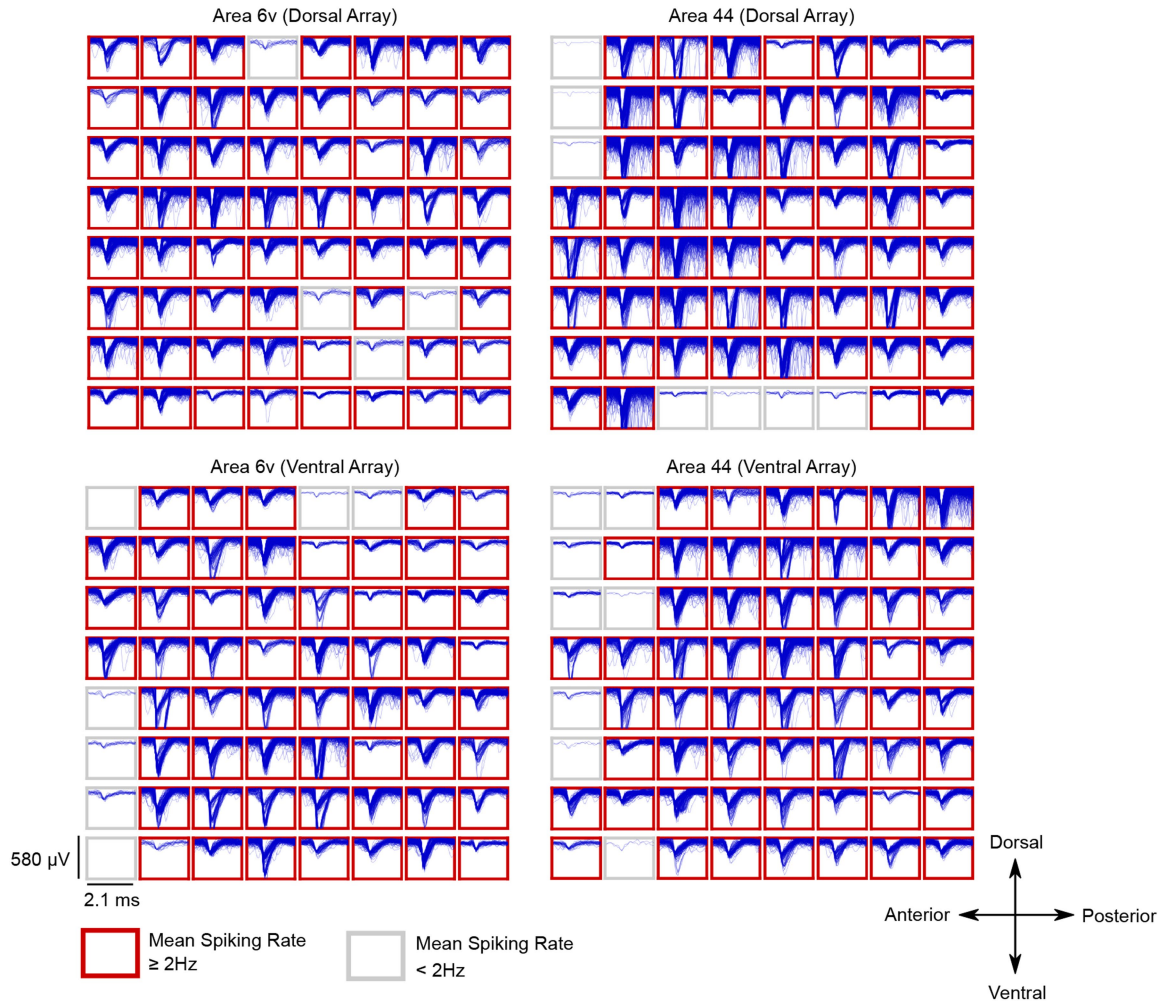
Competing interests The MGH Translational Research Center has a clinical research support agreement with Neuralink, Axoft, Reach Neuro and Synchron, for which L.R.H. provides consultative input. J.M.H. is a consultant for Neuralink, serves on the Medical Advisory Board of Enspire DBS and is a shareholder in Maplight Therapeutics. K.V.S. consults for Neuralink and CTRL-Labs (part of Facebook Reality Labs) and is on the scientific advisory boards of MIND-X, Inscopix and Heal. The remaining authors declare no competing interests.

Additional information

Supplementary information The online version contains supplementary material available at <https://doi.org/10.1038/s41586-023-06377-x>.

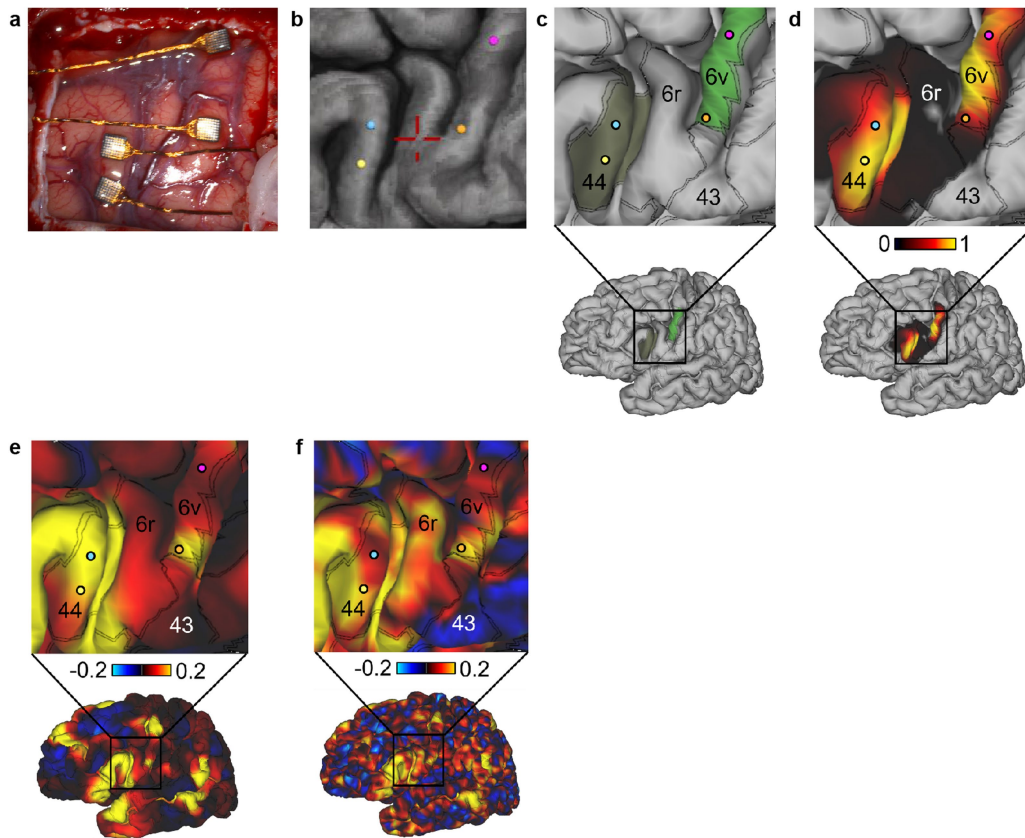
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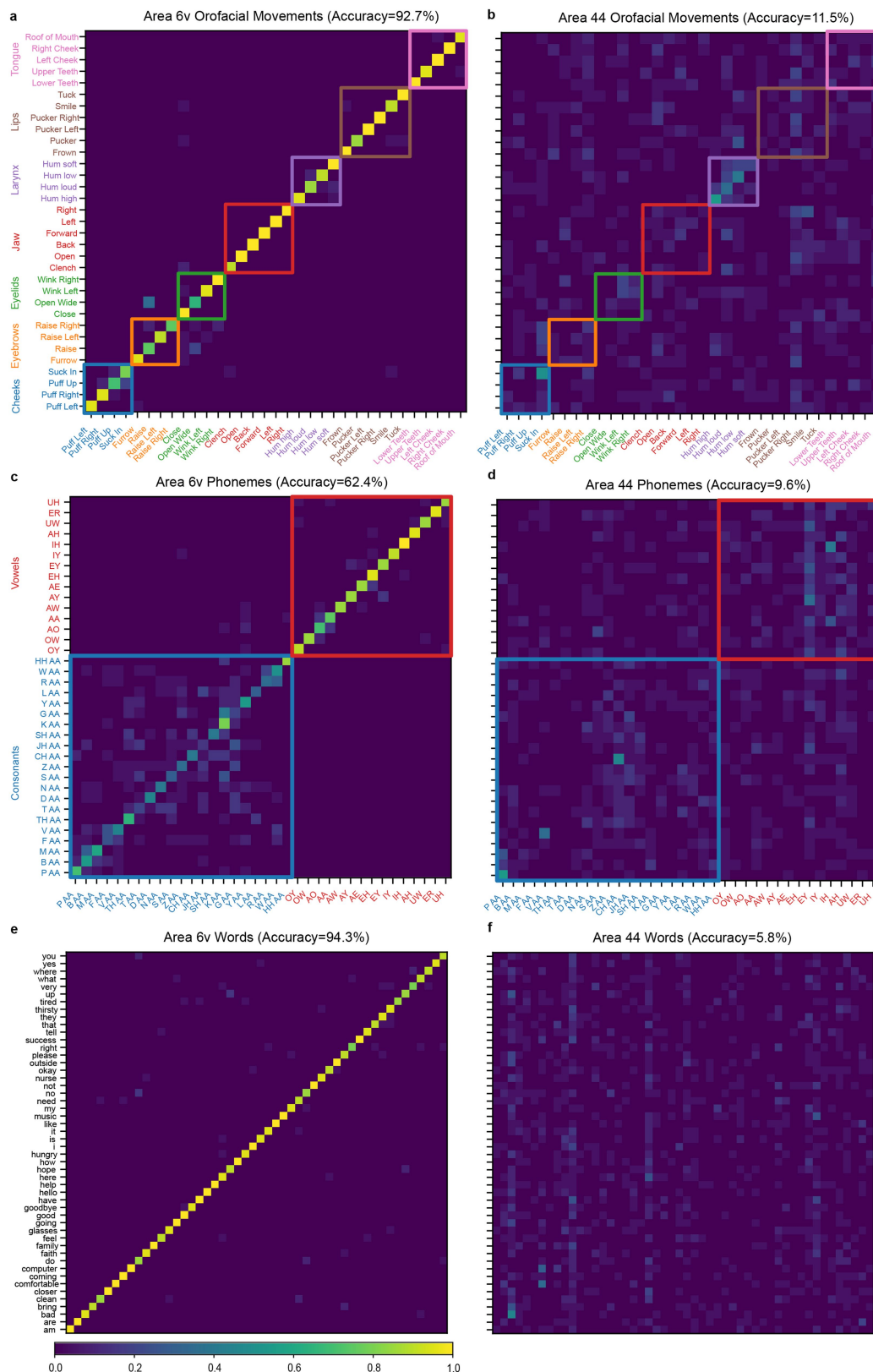
Extended Data Fig. 1 | Example spiking activity recorded from each microelectrode array. Example spike waveforms detected during a 10-s time window are plotted for each electrode (data were recorded on post-implant day 119). Each 8x8 grid corresponds to a single 64-electrode array, and each rectangular panel in the grid corresponds to a single electrode. Blue traces show example spike waveforms (2.1-ms duration). Neural activity was band-pass filtered (250–5000 Hz) with an acausal, 4th order Butterworth filter. Spiking events were detected using a –4.5 root mean square (RMS) threshold, thereby excluding almost all background activity. Electrodes with a mean

threshold crossing rate of at least 2 Hz were considered to have ‘spiking activity’ and are outlined in red (note that this is a conservative estimate that is meant to include only spiking activity that could be from single neurons, as opposed to multiunit ‘hash’). The results show that many electrodes record large spiking waveforms that are well above the noise floor (the y axis of each panel spans 580 μ V, whereas the background activity has an average RMS value of only 30.8 μ V). In area 6v, 118 electrodes out of 128 had a threshold crossing rate of at least 2 Hz on this particular day (113 electrodes out of 128 in area 44).



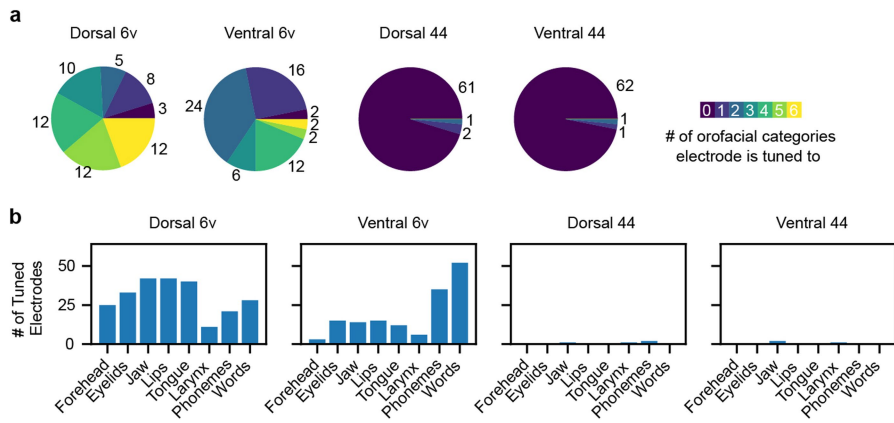
Extended Data Fig. 2 | Array implant locations and fMRI data shown relative to HCP-identified brain areas. (a) Array implants shown directly on the brain surface during surgery. (b) Array locations shown on a 3D reconstruction of the brain (array centers shown in blue, yellow, magenta, and orange circles) in StealthStation (Medtronic, Inc.). (c) approximate array locations on the participant's inflated brain using Connectome Workbench software, overlaid on the cortical areal boundaries (double black lines) estimated by the Human

Connectome Project (HCP) cortical parcellation. (d) approximate array locations overlaid on the confidence maps of the areal regions. (e) A language-related resting state network identified in the Human Connectome Project data (N = 210) and aligned to T12's brain (f) the same resting state network shown in T12's individual scan. The ventral part of 6v appears to be involved in this resting state network, while the dorsal part is not. This resting state network includes language-related area 55b, Broca's area and Wernicke's area.



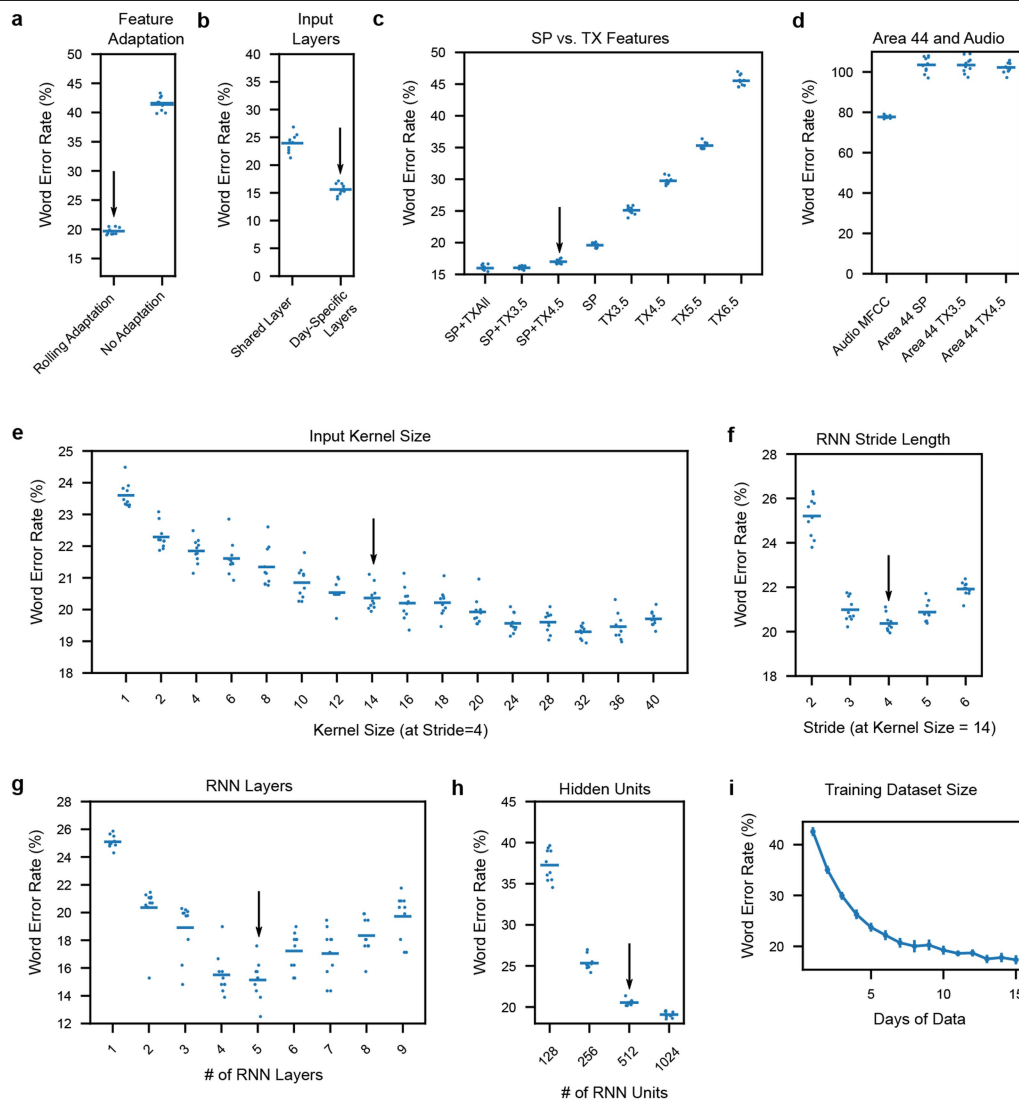
Extended Data Fig. 3 | Classification confusion matrices for orofacial movements, individual phonemes, and individual words. (a, b) Confusion matrices from a cross-validated, Gaussian naïve Bayes classifier trained to classify amongst orofacial movements using threshold crossing rates averaged in a window from 0 to 1000 ms after the go cue. Each entry (i, j) in the matrix is colored according to the percentage of trials where movement j was decoded

(of all trials where movement i was cued). (c, d) Same as a, b but for individual phonemes. (e, f) Same as a, b but for individual words. Matrices on the left show results from using only electrodes in area 6v, while matrices on the right show results from using electrodes in area 44. Although good classification performance can be observed from area 6v, area 44 appears to contain little to no information about most movements, phonemes and words.



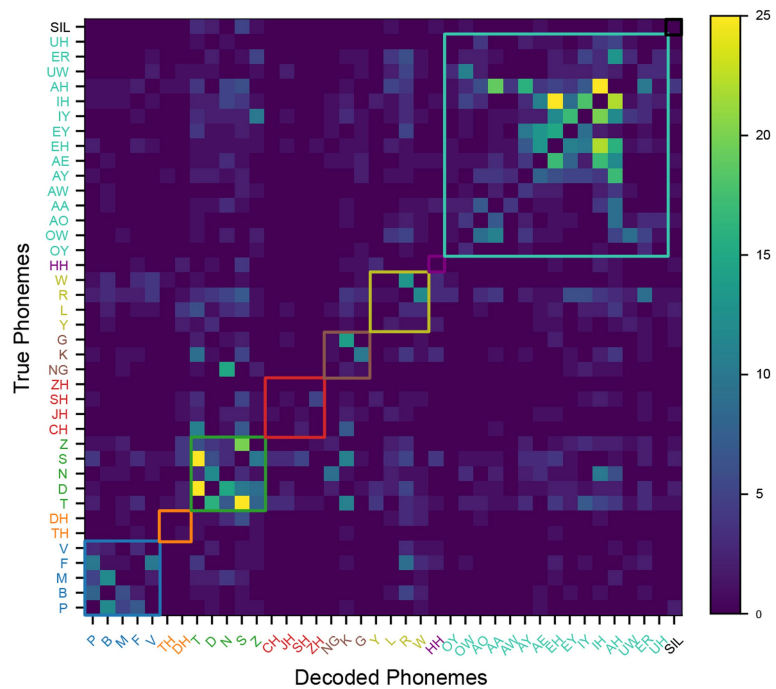
Extended Data Fig. 4 | Individual microelectrodes are tuned to multiple categories of orofacial movement. (a) Pie charts summarizing the number of electrodes that had statistically significant tuning to each possible number of movement categories (from 0 to 6), as assessed with a 1-way ANOVA ($p < 1e-5$). On the 6v arrays, many electrodes are tuned to more than one orofacial movement category (forehead, eyelids, jaw, lips, tongue, and larynx). (b) Bar

plots summarizing the number of tuned electrodes to each movement category and each array. The ventral 6v array contains more electrodes tuned to phonemes and words, while the dorsal 6v array contains more electrodes tuned to orofacial movement categories. Nevertheless, both 6v arrays contain electrodes tuned to all categories of movement.



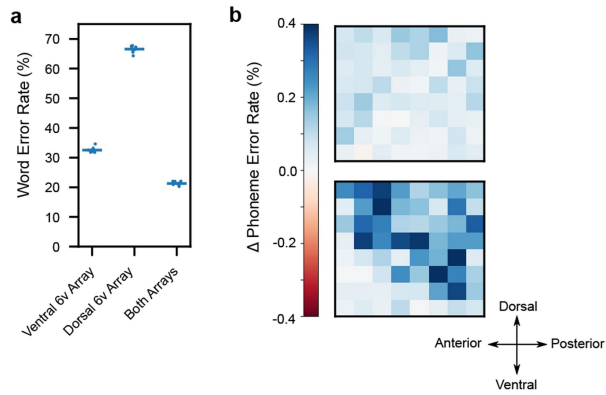
Extended Data Fig. 5 | Offline parameter sweeps show the effect of RNN parameters and architecture choices. Black arrows denote the parameters used for real-time evaluation. Blue open circles show the performance of single RNN seeds, while thin blue bars denote the mean across all seeds. **(a)** Rolling z-scoring improves performance substantially relative to no feature adaptation (when testing on held-out blocks that are separated in time from the training data). **(b)** Training RNNs with day-specific input layers improves performance relative to using a shared layer across all days. **(c)** RNN performance using different neural features as input (SP=spike band power, TX=threshold crossing). Combining spike band power with threshold crossings performs better than either alone. It appears that performance could have been improved slightly by using a -3.5 RMS threshold instead of -4.5 . **(d)** RNN performance using audio-derived mel frequency cepstral coefficients (“audio

MFCC”) or neural features from the area 44 arrays. While the MFCCs yield poor but above-chance performance, word error rates from IFG recordings appear to be at chance level ($\sim 100\%$). **(e)** RNN performance as a function of “kernel size” (i.e., the number of 20 ms bins stacked together as input and fed into the RNN at each time step). It appears that performance could have been improved by using larger kernel sizes. **(f)** RNN performance as a function of “stride” (a stride of N means the RNN steps forward only every N time bins). **(g)** RNN performance as a function of the number of stacked RNN layers. **(h)** RNN performance as a function of the number of RNN units per layer. **(i)** RNN performance as a function of the number of prior days included as training data. Performance improves by adding prior days, but with diminishing returns. The blue line shows the average word error rate across 10 RNN seeds and 5 evaluation days. Vertical lines show standard deviations across the 10 seeds.

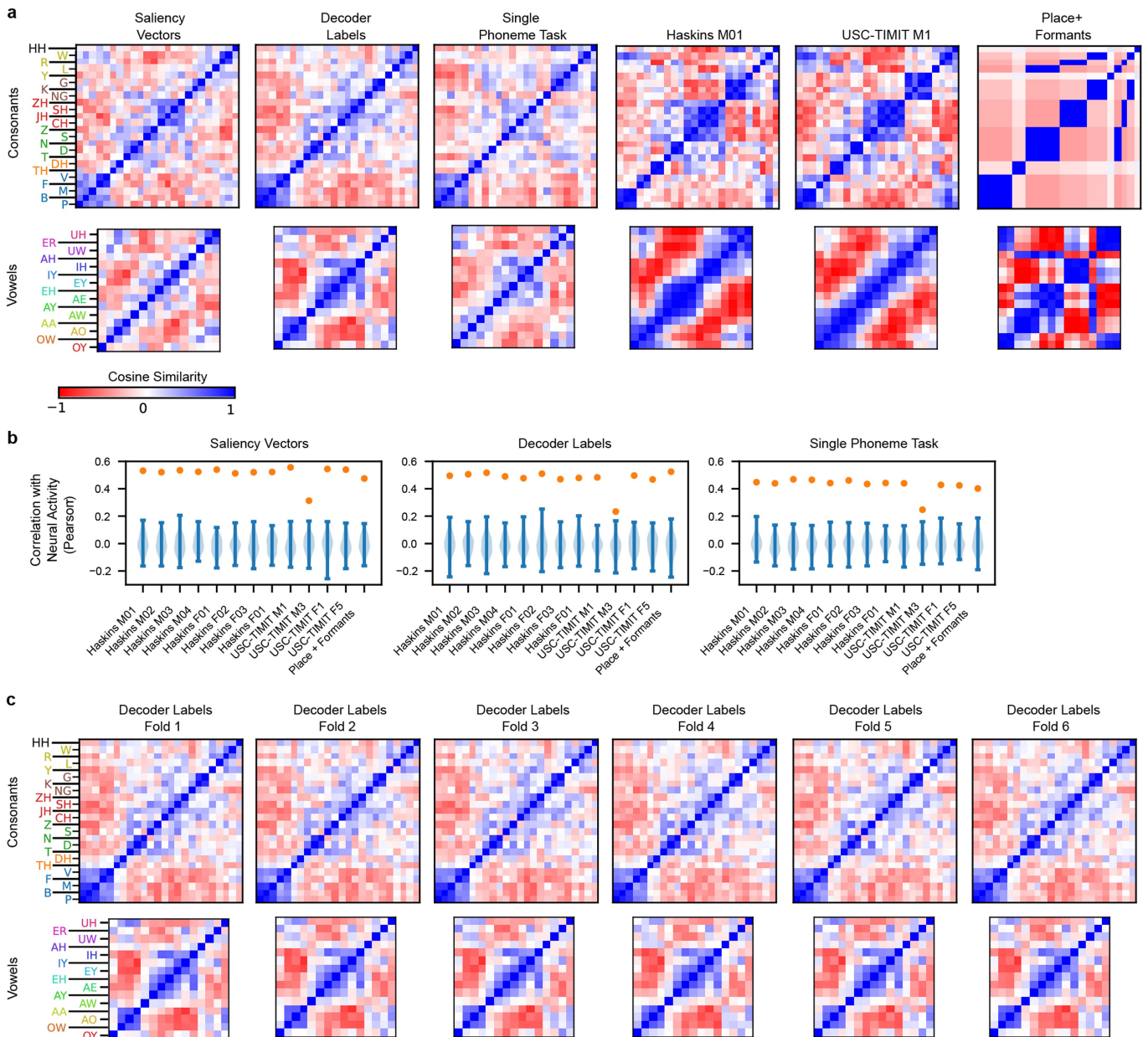


Extended Data Fig. 6 | Phoneme substitution errors observed across all real-time evaluation sentences. Entry (i,j) in the matrix represents the substitution count observed for true phoneme i and decoded phoneme j . Substitutions were identified using an edit distance algorithm that determines

the minimum number of insertions, deletions, and substitutions required to make the decoded phoneme sequence match the true phoneme sequence. Most substitutions appear to occur between phonemes that are articulated similarly.



Extended Data Fig. 7 | Contribution of each array and microelectrode to decoding performance. (a) Word error rates for a retrospective offline decoding analysis using just the ventral 6v array (left column), dorsal 6v array (middle column), or both arrays (right column). Each circle indicates the word error rate for one of 10 RNN seeds. Word error rates were aggregated across 400 trials. Horizontal lines depict the mean across all 10 seeds. (b) Heatmaps depicting the (offline) increase in phoneme error rate when removing each electrode from the decoder by setting the values of its corresponding features to zero. Results were averaged across 10 RNN seeds that were originally trained to use every electrode. Almost all electrodes seem to contribute to decoding performance, although the most informative electrodes are concentrated on the ventral array. The effect of removing any one electrode is small (<1% increase in phoneme error rate), owing to the redundancy across electrodes.



Extended Data Fig. 8 | Additional methods and able-bodied subjects provide further evidence for an articulatory neural code. (a) Representational similarity across consonants (top) and vowels (bottom) for different quantifications of the neural activity (“Saliency Vectors”, “Decoder Labels”, and “Single Phoneme Task”) and articulator kinematics (“Haskins M01”, “USC-Timit M1”, “Place + Formants”). Each square in a matrix represents pairwise similarity for two phonemes (as measured by the cosine angle between the neural or articulatory vectors). Consonants are ordered by place of articulation (but with approximants grouped separately) and vowels are ordered by articulatory similarity (as measured by “USC-TIMIT M1”). These orderings reveal block-diagonal structure in the neural data that is also reflected in articulatory data. “Haskins M01” and “USC-Timit M1” refer to subjects M01 and M1 in the Haskins and USC-Timit datasets. “Place + Formants” refers to coding consonants by place of articulation and to representing vowels

using their two formant frequencies. (b) Correlations between the neural representations and the articulator representations (each panel corresponds to one method of computing the neural representation, while each column corresponds to one EMA subject or the place/formants method). Orange dots show the correlation value (Pearson r), and blue distributions show the null distribution computed with a shuffle control (10,000 repetitions). In all cases, the true correlation lies outside the null distribution, indicating statistical significance. Correlation values were computed between consonants and vowels separately and then averaged together to produce a single value. (c) Representational similarity matrices computed using the “Decoder labels” method on 6 different independent folds of the neural data. Very similar representations across folds indicates that the representations are statistically robust (average correlation across folds = 0.79).

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Software and code

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Data collection

The software for running the experimental tasks, recording data and real-time sentence decoding was a custom developed system using MATLAB, Simulink Real-Time, and Python. Software packages used included tensorflow 2.10.0, gp2_en 2.1.0, WeNet, SRILM and Kaldi.

Data analysis

Data was analyzed using custom MATLAB and Python code. Code is publicly available on GitHub here: <https://github.com/fwillett/speechBCI>

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All neural data needed to reproduce the findings in this study are publicly available on Dryad here: (link & DOI to be added - under review at Data Dryad now). The dataset contains neural activity recorded during the attempted speaking of 10,850 sentences, as well as instructed delay experiments designed to investigate the neural representation of orofacial movement and speech production. As part of this study, we also analyzed publicly available electromagnetic articulography data:

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Reporting on sex and gender	This study included data from one participant, T12, who is a biological female and identifies as a woman. This information was self-reported. No sex or gender based analyses were performed given there was only a single participant and the study was assessing brain-computer interface performance.
Reporting on race, ethnicity, or other socially relevant groupings	This study assessed brain-computer interface performance for a single participant. No variables relating to race, ethnicity or other socially relevant groupings were reported or analyzed.
Population characteristics	This study includes data from one participant (identified as T12) who gave informed consent and was enrolled in the BrainGate2 Neural Interface System clinical trial (ClinicalTrials.gov Identifier: NCT00912041, registered June 3, 2009) but this study did not report clinical trial results. T12 is a left-handed woman, 67 years old during data collection with bulbar ALS that began approximately 9 years prior to enrollment.
Recruitment	Participant T12 was enrolled in the BrainGate 2 clinical trial after meeting inclusion criteria based in part on disease characteristics. Inclusion and exclusion criteria are available online (ClinicalTrials.gov).
Ethics oversight	The BrainGate2 Neural Interface System clinical trial was approved under an Investigational Device Exemption (IDE) by the US Food and Drug Administration (IDE #G09003). Permission was also granted by the Institutional Review Board of Stanford University (protocol #20804). All research was performed in accordance with relevant guidelines/regulations.

Note that full information on the approval of the study protocol must also be provided in the manuscript.

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All studies must disclose on these points even when the disclosure is negative.

Sample size	No sample-size calculation was performed. Data were collected in a single participant to characterize the performance of a brain-computer interface. Uncertainty in performance estimates were quantified with confidence intervals, and show a robust result.
Data exclusions	This study is based on brain-computer interface performance evaluation data collected over a series of days. All days are reported in the study and all relevant data is included.
Replication	This study assessed brain-computer interface performance with a single participant. Results were replicated across eight independent days of performance evaluation.
Randomization	Randomization into groups is not relevant for this study as only one participant is included in the study.
Blinding	Blinding is not relevant to this study as only one participant was included to assess the performance of a brain-computer interface.

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