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Systematic review on Neuralink's advances in brain-computer interfaces over the past five years

Revisión sistemática sobre los avances de Neuralink en interfaces cerebro-computadora en los últimos cinco años

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Revisión sistemática sobre los avances de *Neuralink* en interfaces cerebro-computadora en los últimos cinco años

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Abstract

The purpose of this study was to analyze the advances *Neuralink* achieved in brain–computer interface technology over the past five years through a systematic review conducted following the PRISMA 2020 methodology. Scientific literature published between January 2020 and November 2025 was identified and assessed. The results showed that early human trials enabled the control of digital devices through voluntary brain activity, representing a meaningful advancement for individuals with motor limitations or neurological disorders. However, complications such as electrode displacement and uncertainties regarding long-term implant stability were observed, along with ongoing technical, clinical, and ethical challenges related to the direct manipulation of brain data. The review concluded that *Neuralink*'s recent progress constituted an important step toward technologies capable of restoring neurological functions and expanding human–machine interaction, while also highlighting the need to improve safety, durability, and ethical regulation before achieving widespread clinical implementation. These findings indicated that, although the technology remained at an early stage, its evolution had the potential to transform the clinical management of various neurological conditions.

Keywords: brain-computer interface, Neuralink, neural implants, Link

Resumen

El propósito de este estudio fue analizar los avances logrados por *Neuralink* en la tecnología de interfaces cerebro-computadora durante los últimos cinco años, mediante una revisión sistemática realizada conforme a la metodología PRISMA 2020. Se identificó y evaluó la literatura científica publicada entre enero de 2020 y noviembre de 2025. Los resultados mostraron que los primeros ensayos en humanos permitieron el control de dispositivos digitales a través de la actividad cerebral voluntaria, lo que representa un avance significativo para las personas con limitaciones motoras o trastornos neurológicos. Sin embargo, se observaron complicaciones como el desplazamiento de los electrodos e incertidumbres respecto a la estabilidad del implante a largo plazo, junto con desafíos técnicos, clínicos y éticos persistentes relacionados con la manipulación directa de los datos cerebrales. La revisión concluyó que los progresos recientes de *Neuralink* constituyeron un paso importante hacia tecnologías capaces de restaurar funciones neurológicas y ampliar la interacción humano-máquina, al tiempo que destacó la necesidad de mejorar la seguridad, la durabilidad y la regulación ética antes de alcanzar una implementación clínica generalizada. Estos hallazgos indicaron que, aunque la tecnología permanece en una etapa temprana, su evolución tiene el potencial de transformar el manejo clínico de diversas afecciones neurológicas.

Palabras clave: interfaz cerebro-computadora, Neuralink, implantes neurales, Link

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1. Introduction

Can humans truly bring science fiction into reality? This question seems closer than one might think as brain-computer interfaces (BCIs) continue to evolve. BCIs aim to establish a direct connection between the human brain and external devices, looking for a form of human–machine symbiosis (Kumar et al., 2025). Among the companies leading this cutting-edge technology, Neuralink, founded by Elon Musk in 2016, stands out (Shaima et al., 2024). *Neuralink* represents a significant leap in neural interface technology aimed at restoring movement, communication, and sensory perception for individuals with severe neurological impairments.

Neuralink, building upon decades of prior research in neuroscience and neural engineering, represents a significant step toward bridging the brain and electronic devices (Kumar et al., 2025). Over the past five years, the company has made remarkable progress. These advances open the possibility of giving patients greater independence and control of computers and communication systems.

This review will analyze the major developments of Neuralink in the last five years, providing context on BCI research and its evolution.

1.1. What is a BCI?

A brain-computer interface is a method of communication based on neural activity generated by the brain and is independent of its normal output pathways of peripheral nerves and muscles.

1.2. About *Neuralink*

In 2016, Elon Musk registered a start-up named Neuralink, which remained under wraps until 2017, when it was revealed to the world. However, it was not until July 16, 2019, when Neuralink was launched, that Elon Musk stated that the company aimed to understand and treat brain disorders, to preserve and enhance the human brain, and to create a well-aligned future.

1.3. *Neuralink's* BCI

One of Neuralink's main goals is to develop a fully implantable, wireless Brain-Computer Interface, which they have called Link (Sahu, 2025). Elon Musk's BCI methodology involves the implantation of ultra-thin electrodes, referred to as "threads," that connect or go directly into the brain (Shaima et al., 2024). Because they are thinner than a human hair, the threads enhance precision and minimize harm to the patient. The microelectrode arrays contain a total of 3,072 electrodes (Fiani et al., 2021) (Table 1).

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Table 1
Neuralink's BCI threads dimensions

Electrodes per thread	Width	Nominal Thickness	Loop
32	5 µm to 50 µm	4 µm to 6 µm	16 µm² × 50 µm²

Note. Based on Fiani et al. (2021).

This brain-computer interface (BCI) contains two main sections: the "sensors" area, which connects to custom chips for signal amplification and acquisition, and the "threads" area, which houses the electrode contacts and traces (Shaima et al., 2024).

1.4. Main Medical Applications

Brain-computer interfaces were originally designed for medical uses, specifically to help people with disabilities regain lost functions or communicate (Devkar et al., 2025).

The ability to directly control external devices using neural signals, enabling communication or patient mobility, is one of the main uses of brain-computer interfaces (BCIs). For example, the control of wheelchairs with BCI systems has been the subject of numerous research studies (Kumar et al., 2025).

Neuralink's vision focuses on optimizing existing systems rather than introducing entirely new approaches. For example, in epilepsy, real-time epileptiform activity detection could facilitate responsive neurostimulation, disrupting seizure propagation (Devkar et al., 2025; Kumar et al., 2025).

The applications of brain-computer interfaces (BCIs) extend beyond the medical field. They can be used as research tools; for example, Neuralink's neural interface and node technology enhance neuroscience research (Devkar et al., 2025; Kumar et al., 2025).

1.5. Advances

1.5.1. Telepathy

Neuralink has developed software capable of controlling digital interfaces, such as computer cursors, keyboards, and mobile devices, allowing users to operate them with their thoughts alone, a feature the company refers to as "Telepathy." The system works by interpreting the neural signals generated in the motor cortex, the

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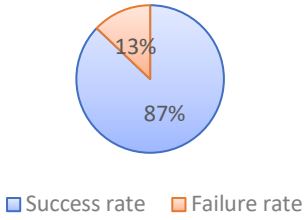
brain region responsible for planning and carrying out physical movements and converting them into cursor movements and click commands (Sahu, 2025).

1.5.2. Surgical Robot

A surgical robot has been created that can insert Neuralink threads, target specific brain regions and avoid superficial vasculature. This robot features different lighting systems, providing improved visualization and optimizing the thread loop's position for needle threading and achieving precise insertion into the cerebral cortex. This robot was tested on 19 rats and demonstrated an average insertion success rate of 87.1% (Figure 1) (Fiani et al., 2021).

Figure 1
Success and failure rates in Neuralink's surgical robot trials



1.5.3. PRIME Study

The Precise Robotically Implanted Brain-Computer Interface Study (PRIME Study) was designed as a feasibility study to evaluate the safety and preliminary effectiveness of the Link device in individuals with quadriplegia due to cervical spinal cord injury or amyotrophic lateral sclerosis (ALS) (Sahu, 2025).

In early 2024, Neuralink achieved a historic breakthrough with the implantation of its first human subject, Noland Arbaugh (Sahu, 2025). The implant enabled him, a quadriplegic patient, to play chess using only mental imagery (Kumar et al., 2025), a watershed moment for both Neuralink and the broader BCI field. This marked the beginning of the PRIME Study (Sahu, 2025).

However, Neuralink's first human clinical trial reported problems with electrode displacement (Kumar et al., 2025), resulting in reduced effectiveness. Neuralink engineers implemented software modifications to optimize the use of the remaining electrodes, demonstrating the system's adaptability but also highlighting the ongoing challenges of maintaining stable, long-term neural recordings (Sahu, 2025).

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Alex, the second PRIME Study participant, had a background in design and engineering and, following a car accident that left him unable to continue his job, used the Link to return to creative pursuits, including computer-aided design (CAD) and graphic design using Adobe Illustrator (Sahu, 2025).

The third PRIME Study participant, Brad, had lost all voluntary movement except for limited eye control. The Link implant has enabled him to communicate via an onscreen keyboard in various lighting conditions, significantly expanding his ability to interact with family and community (Sahu, 2025).

1.5.4. CONVOY Study

The CONVOY Study investigates how the Link can be used to operate external assistive devices, extending its application beyond computers and smartphones. Alex, the study's first participant — also enrolled in the PRIME Study — has successfully demonstrated the capacity to manage an Assistive Robotic Arm (ARA) through the same neural implant (Sahu, 2025).

1.6. Neuralink's Challenges

With such a radical idea as Neuralink, many questions arise regarding its stability and safety, as well as its efficacy in clinical practice. Implanting the device requires both a Neuralink robot and a human neurosurgeon, necessitating extensive training for the neurosurgeon to enhance comfort and safety with the machine (Fiani et al., 2021).

Furthermore, obtaining regulatory authorization for human trials represented a significant challenge for Neuralink. As with all medical device companies, the organization was required to navigate the rigorous approval process established by the U.S. Food and Drug Administration (FDA) prior to conducting studies in human subjects. Following the resolution of regulatory concerns and the presentation of adequate safety data, Neuralink was granted FDA approval to initiate its first human clinical trial in May 2023 (Sahu, 2025).

Equally important, the artificial nature of BCIs raises ethical questions regarding consent and privacy. The idea of direct interaction with the brain, especially in cases of cognitive enhancement, could generate concerns about autonomy, mental privacy, and the potential for misuse or manipulation of brain data (Devkar et al., 2025).

2. Method of research

For the following review, different techniques were used to find truthful and clear information on the subject. In this paper, the PubMed and Google Scholar databases were used, specifically articles published between 2020 and

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2025, employing the Boolean operators AND, OR, and NOT appropriately. The search yielded many articles; after a thorough review, only a portion was selected based on inclusion and exclusion criteria (Table 2).

Table 2
Boolean operators used

Database	Combination of terms and Boolean operators	Articles found
PubMed	(neuralink AND elon musk) OR (neuralink AND brain computer interface) OR (neuralink AND patients) OR (neuralink AND first human trials) NOT (ethical considerations)	61
Google Scholar	"neuralink"+"elon musk" OR "neuralink"+"brain computer interface" OR "neuralink"+"patients"	352

A total of 413 articles were found.

2.1. Inclusion and exclusion criteria

Inclusion criteria:

- Articles must focus exclusively on *Neuralink*'s brain-computer interfaces (BCIs) and their latest advances.
- Articles published in English with full-text availability.
- Only peer-reviewed articles released between January 2020 and November 2025.

Exclusion criteria:

- Articles that include information beyond *Neuralink*'s latest BCI advances.
- Books, magazines, and conference proceedings.
- Documents in languages other than English or without full-text access.

The systematic search conducted across the two electronic databases, PubMed and Google Scholar, yielded a combined total of 413 records (PubMed: n = 61; Google Scholar: n = 352). Following the initial identification phase, 54 duplicate records were removed prior to screening, resulting in 359 records screened for relevance based on title and abstract. Of these, 305 records were excluded due to insufficient relevance to the research question, leaving 54 reports sought for retrieval. All 54 reports were successfully retrieved and subsequently assessed for eligibility. During this phase, 49 reports were excluded based on predefined exclusion criteria, resulting in a final selection of 5 studies included in the review. The Rayyan program was utilized throughout this process to facilitate the identification and removal of duplicate records, as well as to support the systematic screening and selection of eligible articles, ultimately yielding 5 of the initial 413 identified records (Figure 2).

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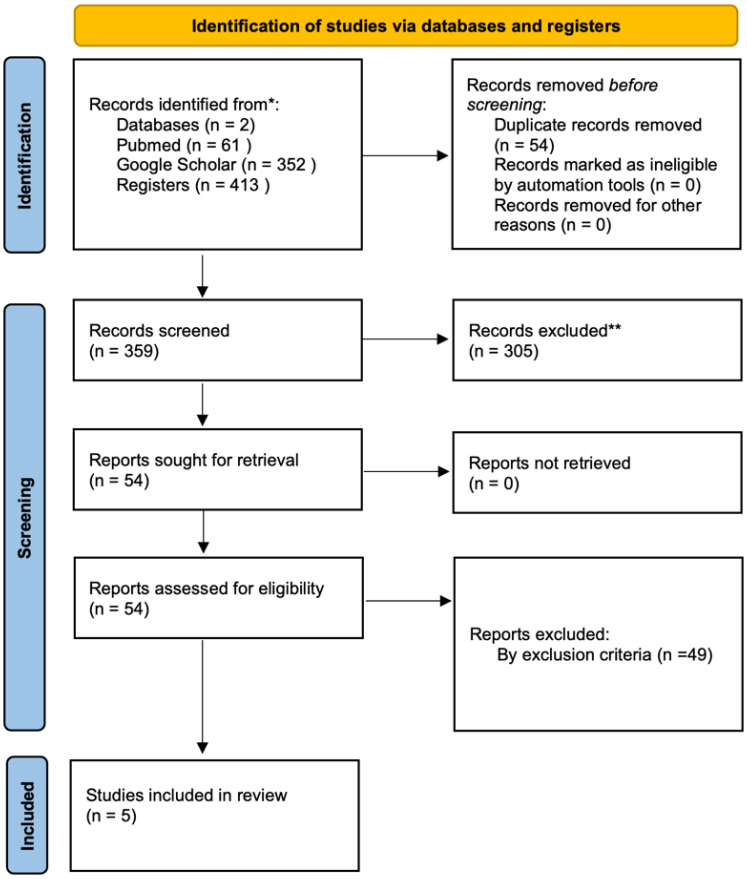
Figure 2
PRISMA 2020 flow diagram



3. Results

As previously described, 413 articles were found between PubMed and Google Scholar; only 5 were appropriate for this paper, representing 1.21% of all results. Exclusion reasons were described for some of the non-included articles (Table 3).

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Table 3
Non-included Studies.

Excluded Study Reference	Reason
(Waisberg et al., 2024)	The article contains information beyond *Neuralink*'s advancements.
(Hurley, 2024)	The article focuses primarily on ethical concerns surrounding *Neuralink*.
(Youssef et al., n. d.)	The article focuses primarily on ethical concerns surrounding *Neuralink*.

However, the selected articles provide sufficient information to outline how Neuralink has developed over the last five years. Nevertheless, it was not possible to identify articles from every year within the period spanning January 2020 to November 2025, which may introduce bias into this review, as no available evidence was found for certain years within that range. The publication years and references of the selected articles are presented for further characterization (Table 4).

Table 4
Selected articles

Year	Title	Reference
2021	An Examination of Prospective Uses and Future Directions of *Neuralink*: The Brain-Machine Interface	(Fiani et al., 2021)
2024	Elon Musk's *Neuralink* Brain Chip: A Review on 'Brain-Reading' Device	(Shaima et al., 2024)
2025	The Neural Revolution: A Review of Brain-Machine Interfaces and *Neuralink*'s Contribution	(Devkar et al., 2025)
2025	The potential power of *Neuralink* - how brain-machine interfaces can revolutionize medicine	(Kumar et al., 2025)
2025	*Neuralink* and Its Advantages: Advancements in Brain-Computer Interface Technology	(Sahu, 2025)

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Furthermore, only 1 of the 5 selected articles provides an extensive discussion of Neuralink's human trials (Sahu, 2025), one of the most significant advancements recorded within the period spanning January 2020 to November 2025, which may introduce potential bias in the representation of this milestone.

The limited information available regarding *Neuralink's* advancements, largely restricted to data disclosed by the company itself, constrains the scope of this review and prevents a comprehensive understanding of *Neuralink's* true progress and the actual functioning of the Link, its brain-computer interface.

4. Discussion

The findings retrieved in this review suggest that Neuralink's BCI technology has achieved meaningful progress in both clinical and technical domains. The most extensively documented outcomes correspond to the PRIME Study, in which a human participant demonstrated the ability to control digital interfaces, including cursor movement, computer-aided design software, and graphic design applications, solely through neural signals via the Link. Additional evidence points toward broader applications of BCI technology, including the control of external assistive devices, management of neurological and visual disorders, and potential uses beyond the medical field, such as the operation of a surgical robot evaluated in a preclinical model of 19 rats. Collectively, these findings indicate that Neuralink's technology holds considerable promise across a range of clinical and non-clinical applications.

To obtain results with better reliability and transparency, this systematic review was performed according to the PRISMA guidelines, with the systematic selection process resulting in the final retrieval of five articles published in the last five years. The selected articles collectively indicate that the company has significantly accelerated the development of BCIs, transforming ideas once considered science fiction into tangible technological advancements. The evidence reviewed suggests a mostly promising trajectory.

Nevertheless, the evidence included in this review is subject to significant limitations. Only one of the five selected articles provided an extensive discussion of Neuralink's human trial outcomes, while the remaining articles addressed related but distinct applications, introducing inconsistency in the scope of the evidence base. Furthermore, the reviewed literature is largely derived from information disclosed by Neuralink itself, which represents a considerable source of bias and limits the objectivity of the findings. The absence of independent, peer-reviewed studies, combined with the small number of available articles and the limited sample sizes reported, introduces imprecision that constrains the generalizability of the conclusions. Future independent research with larger, more diverse patient populations and standardized outcome measures will be essential to validate these preliminary findings.

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5. Conclusion

This systematic review examined both the clinical and technical advancements associated with Neuralink's brain-computer interface technology, with a particular focus on its most recent developments and human trial outcomes. Following the PRISMA guidelines, the selection process yielded five eligible articles published between 2020 and 2025, which together indicate that the company has substantially accelerated the development of BCIs, turning ideas once considered science fiction into tangible technology.

However, the information available regarding Neuralink's advancements is considerably limited, which introduces a significant risk of bias. The vast majority of the data accessible for this review was sourced directly from the company itself, which resulted in the systematic review drawing predominantly from a single article.

Future studies should prioritize greater transparency in data disclosure, enabling the scientific community to independently compare, replicate, and critically evaluate the performance and safety of this brain-computer interface. Furthermore, expanding public access to trial data and publishing long-term follow-up results across larger and more diverse patient populations will be essential to establishing an unbiased evidence base for Neuralink's technology.

In conclusion, while the current body of evidence remains limited, Neuralink's recent advancements represent a meaningful contribution to the evolution of brain-computer interfaces and hold considerable potential for transforming the treatment of neurological disorders in the years ahead.

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