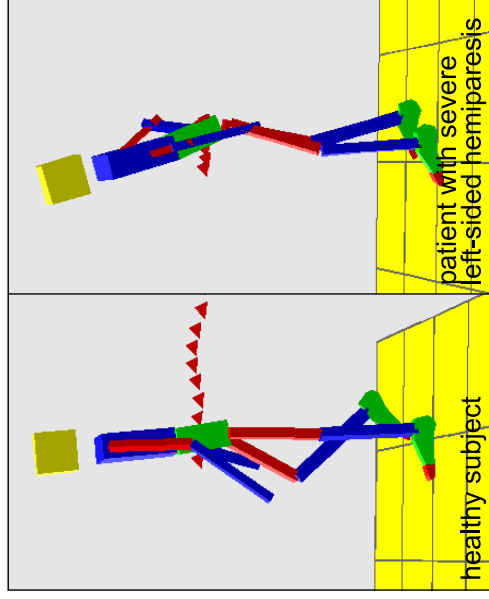


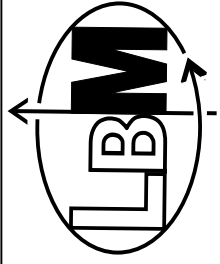
Analysis of Hemiparetic Gait by Using Mechanical Models

Ch. Lutzenberger / F. Pfeiffer

- Gait Analysis
- Mechanical Model of the Human Locomotor Apparatus
- Mathematical Formulation
- Measurements and Verification
- Results
- Future Work



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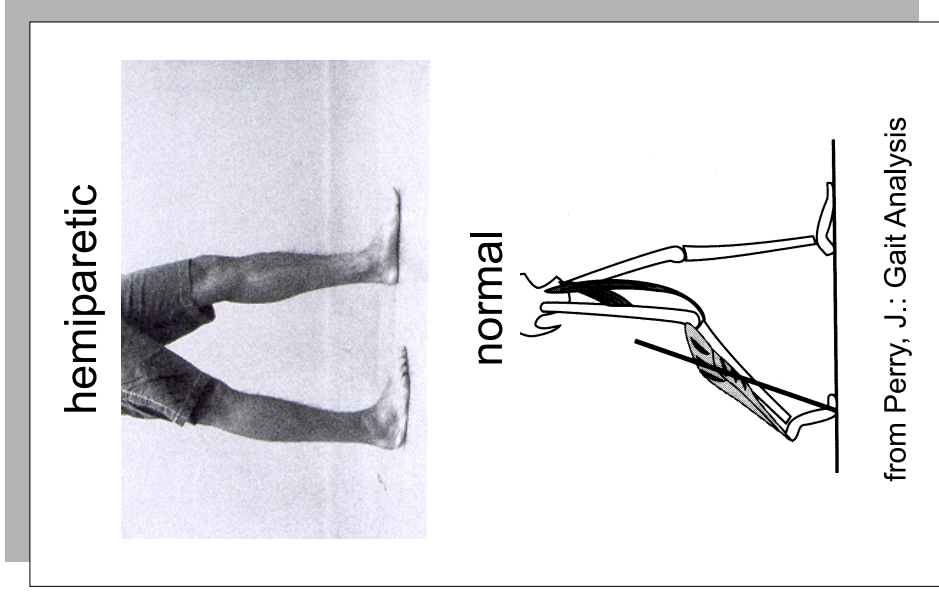
Purpose: reduction of gait deviations

- diagnosis of gait deviations
- definition of therapy
- control and quantization of outcome of therapy

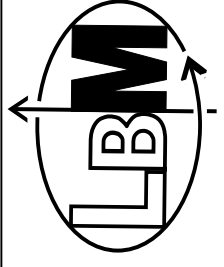
Execution:

- performed by a physical therapist or doctor
- simulation and measurements provide additional information:
 - cadence, step length
 - joint angles
 - forces, torques, ...
 - EMG profiles

⇒ more precise gait analysis

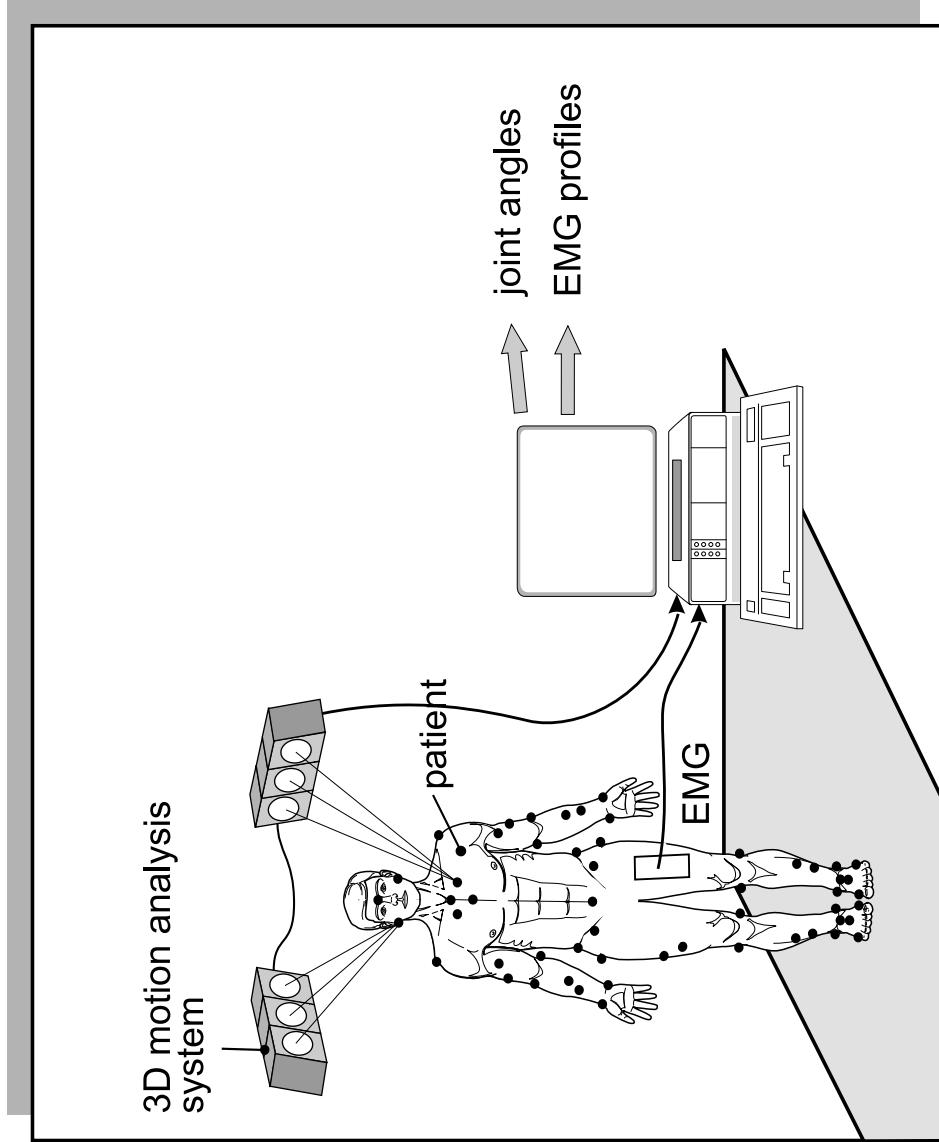


1. Gait Analysis

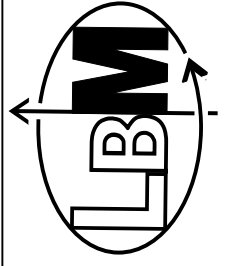


Common

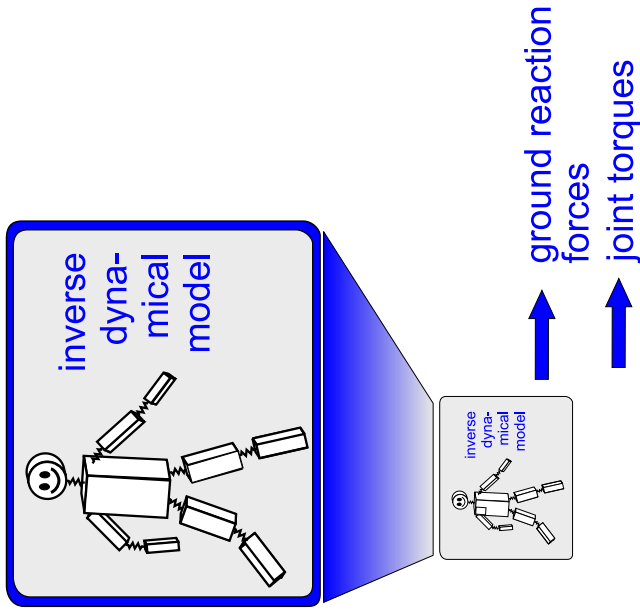
Gait Analysis



1. Gait Analysis



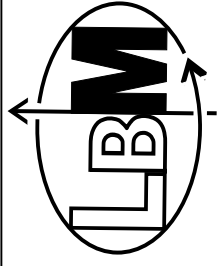
and Extended

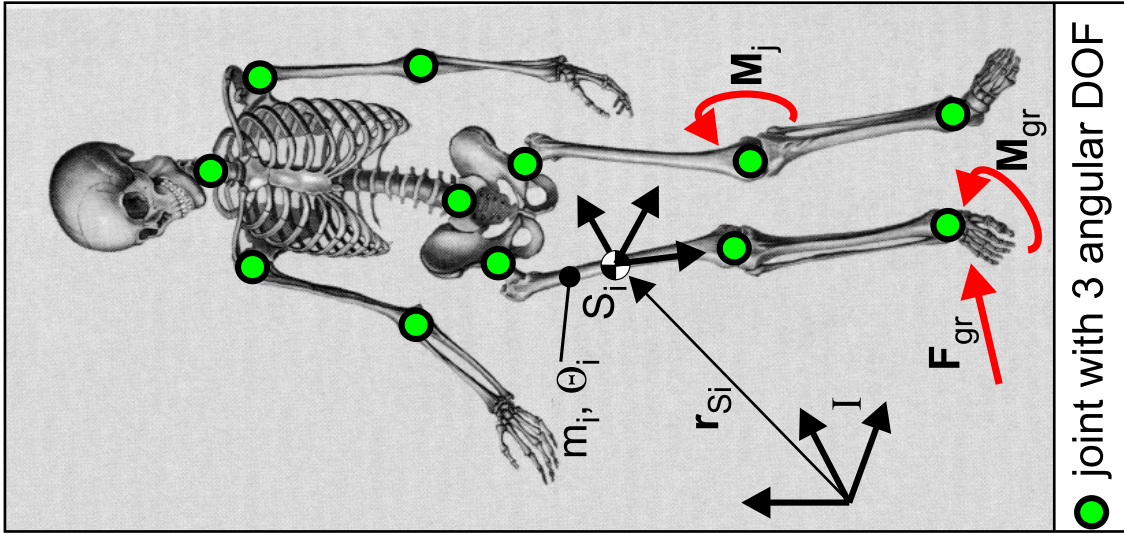


Advantages of the extended approach:

- additional quantities for diagnosis
 - ground reaction forces
 - joint torques, power
- better understanding and therapy of gait deviations
- no force plates needed

1. Gait Analysis

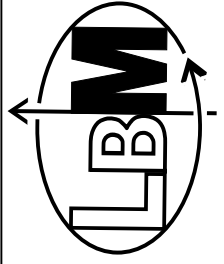




Model properties:

- three-dimensional multibody-system
- 13 rigid bodies
- 12 joints with 3 degrees of freedom each
- 42 degrees of freedom at all
- joint torques M_j
- ground reaction forces F_{gr} and torques M_{gr}
- parameter scaling for each patient

2. Mechanical Model of the Human Locomotor Apparatus



- equations of motion for the single support phase

$$M(q)\ddot{q} - h(q, \dot{q}) = J_T^T F_{gr} + \sum_{k=1}^{12} J_{R,k}^T M_{j,k}$$

- equations of motion for the double support phase

$$M(q)\ddot{q} - h(q, \dot{q}) = \sum_{i=1}^2 \left\{ J_{T,i}^T F_{gr,i} + J_{R,i}^T M_{gr,i} \right\} + \sum_{k=1}^{12} J_{R,k}^T M_{j,k}$$

optimization

$$C = \frac{1}{2} f_{gr}^T C_1 f_{gr} + \frac{1}{2} t_{gr}^T C_2 t_{gr} + \frac{1}{2} t_j^T C_3 t_j$$

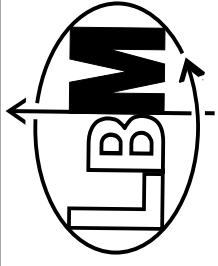
Lagrangian function L

$$L = C + \lambda^T \left\{ \left[J_{T,gr}^T \mid J_{R,gr}^T \right] \left(f_{gr} t_{gr} \right) + J_{R,j}^T t_j - M \ddot{q} + h \right\}$$

- inverse dynamics

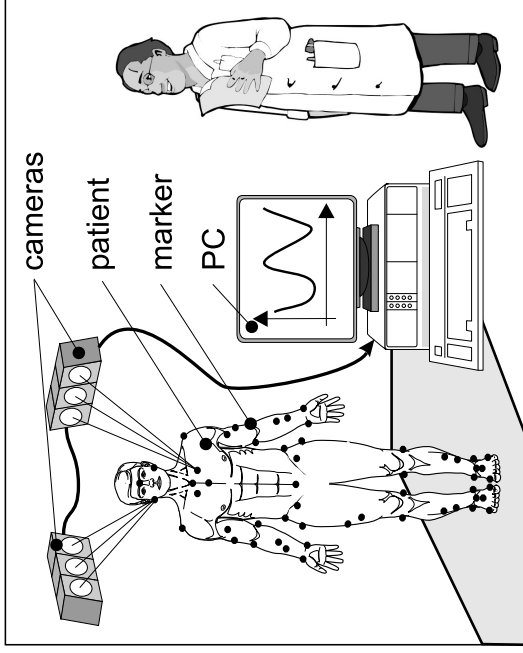
$$q(t), \dot{q}(t), \ddot{q}(t) \rightarrow F_{gr,j}(t), M_{gr,j}(t), M_{j,i}(t)$$

3. Mathematical Formulation

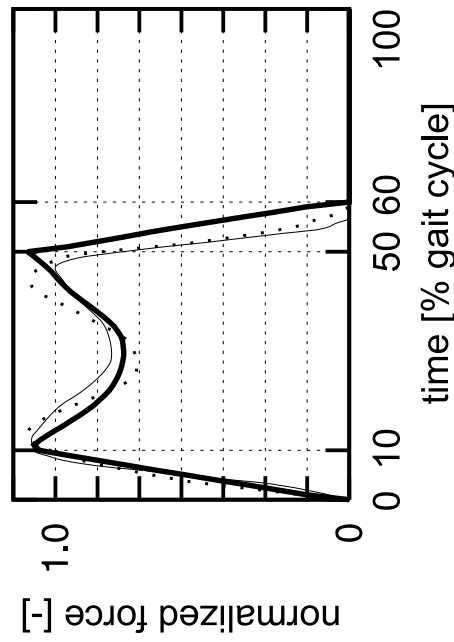


Measurements

- performed in the neurological clinic in Bad Aibling, Germany
- contactless 3D motion analysis system with 58 markers (Optotrak)
- measurement of joint angles
- computation of joint angular velocities and accelerations by differentiation

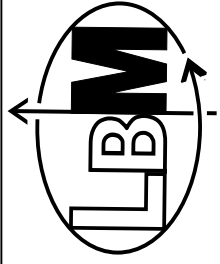


Verification of the Model



⇒ good agreement of simulation results (bold solid line) with measurements (dotted line) and calculations (solid line) from literature

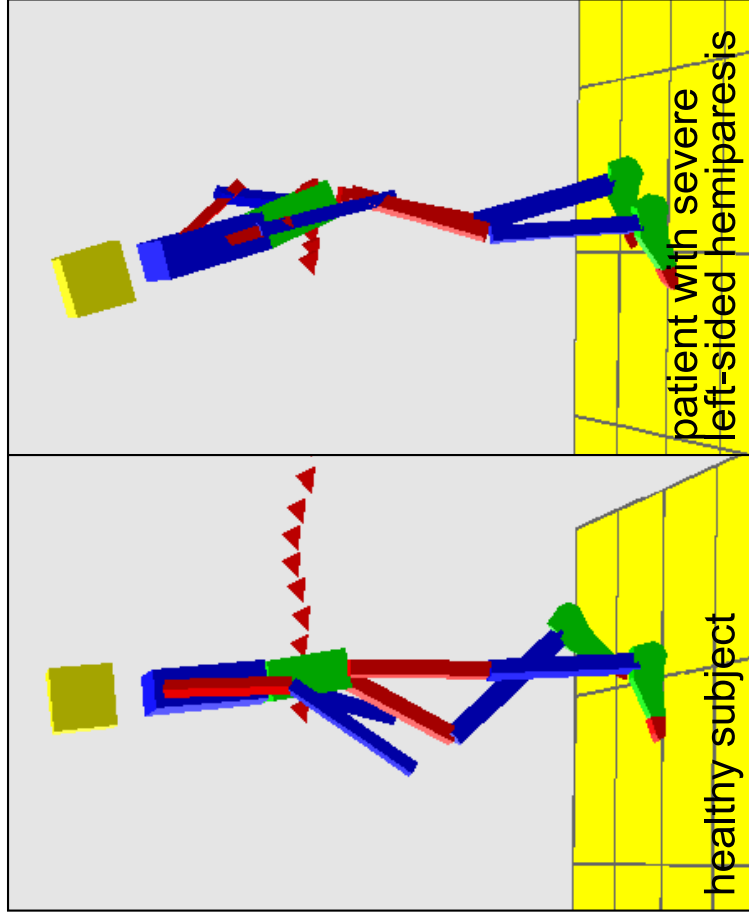
4. Measurements and Verification



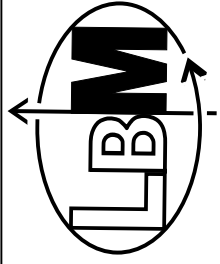
Animation

Advantages compared to common recording techniques:

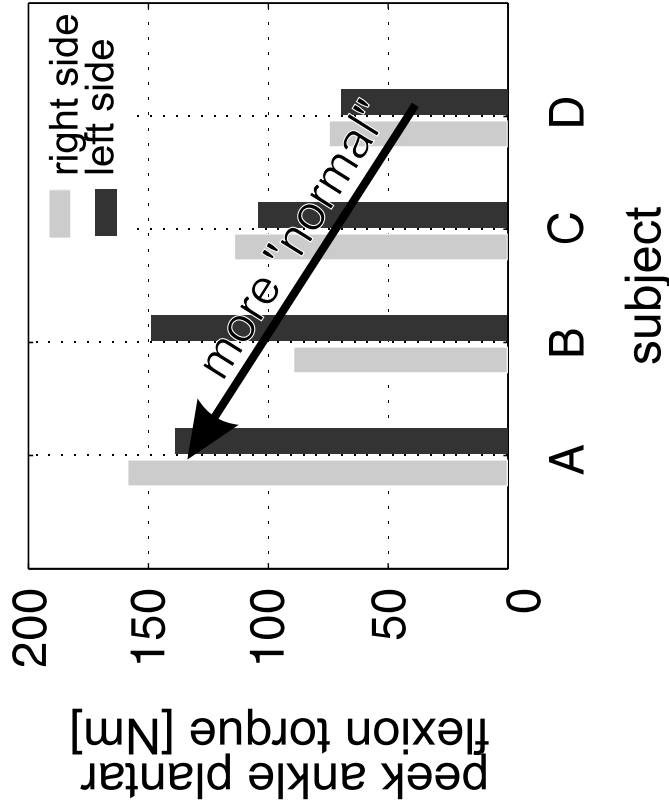
- view the disturbed gait pattern under different angles
- zoom on details
- oppose the impaired to a healthy gait pattern
- facil storage



5. Results



Evaluation of Degree of Hemiparesis

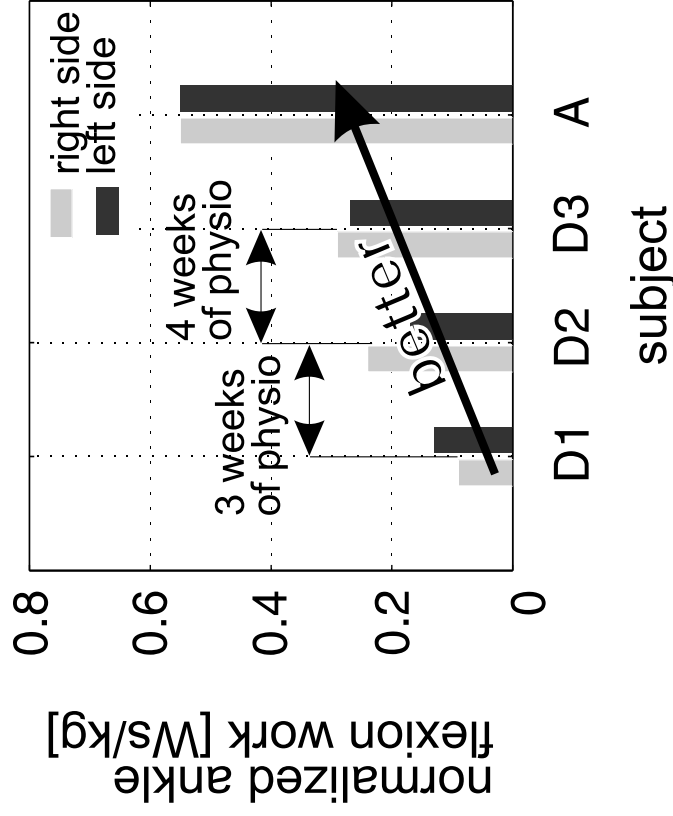


A: healthy subject

B: patient with moderate hemiparesis

C, D: patients with severe hemiparesis

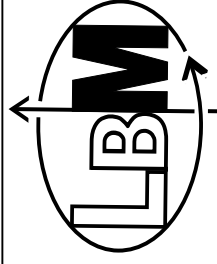
Outcome of Therapy



A: healthy subject

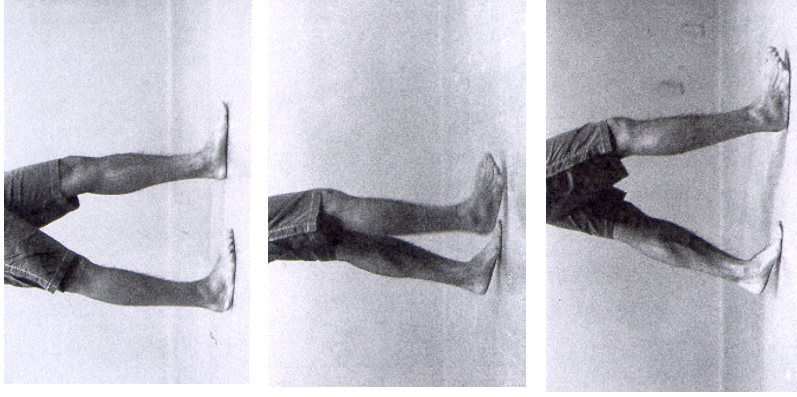
D1, D2, D3: patient D in different stages of physiotherapy (physio)

5. Results



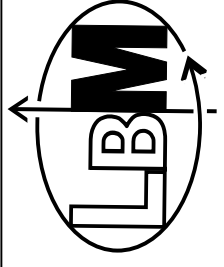
Kinematic Characteristics of Hemiparetic Gait

- excessive lateral movement of body's center of mass
- high lateral ground reaction forces on the affected side
- low peak torques in all joints of the lower limb
- lower peak torques on the affected than on the unaffected side
- energy for propulsion results mainly from the unaffected side



from Perry, J.: Gait Analysis

5. Results



Model-based Functional Electrical Stimulation (FES) for Therapy of Hemiparesis

Therapy of hemiparetics

- physiotherapy
- treadmill walking
- new treatment: **FES**

FES:

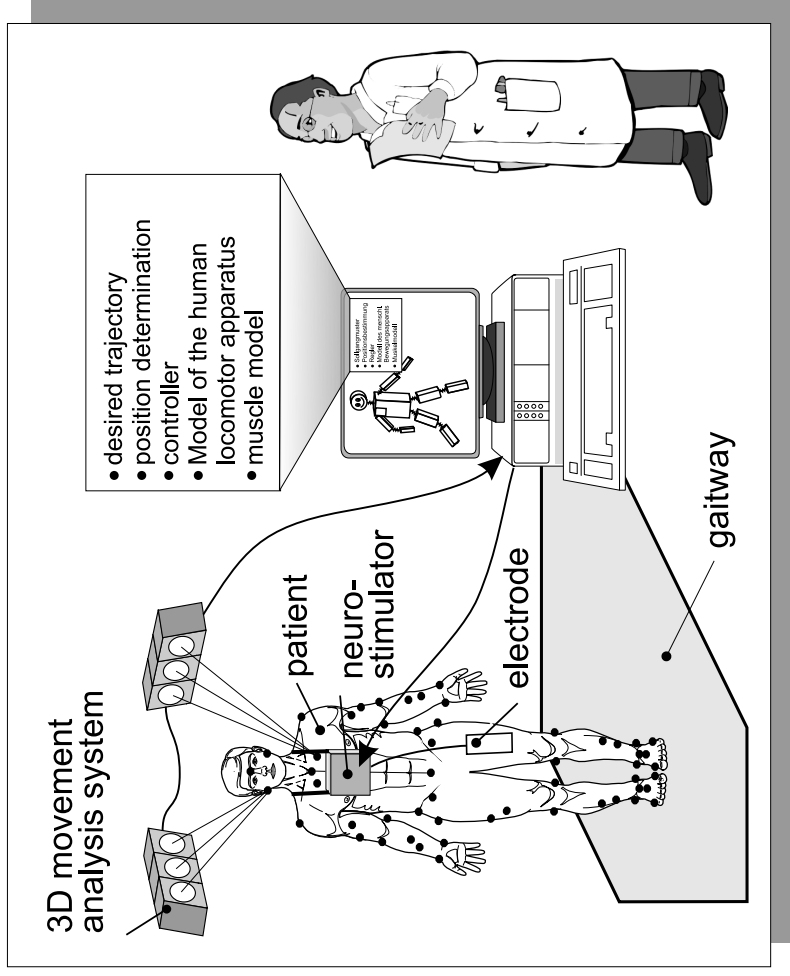
artificial stimulation of muscles on the affected side of the patient

Advantage:

significant improvement of therapy

Goal:

correct the impaired gait pattern



6. Future Work

