



THE UNIVERSITY OF UTAH **DEPARTMENT OF BIOMEDICAL ENGINEERING**

Introduction

• Hemiparesis, paralysis of one side of the body, is a disability that can occur after stroke

 Current electromyography (EMGcontroled) assistive devices are limited to binary control (open or close, no inbetween)



Goal: Test feasibility of proportional control from paretic electromygraphy (EMG)

Mimicked Movements Used to Collect EMG Activity

- 4 Degrees of Freedom (DOFs) were recorded and tested
- We compared EMG and kinematics predictions from a modified Kalman Filter



• The Movements included: Grasp/Extend, Tripod Grasp/Extend, Wrist Flexion/Extensiion, and **Pronation/Supination**



Proportional Electromyographic Control of a Bionic Arm in Participants with Chronic Hemiparesis, Muscle Spasticity, and Impaired Range of Motion

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Healthy EMG Follows Kinematic Cue Better than Paretic EMG



• Healthy EMG more closely follows kinematic trace, paretic traces are more varied, and delayed

Healthy Signal-to-Noise Ratio (SNR) Tend to be Higher than Paretic

- Higher SNR normally better signal
- Grouped not significant, was significant in individual participants

N=4, grouped, *p*=0.375,

Kalman Filter Predictions from Healthy EMG More Closely Align with Intended Kinematics





Movement cue participant is attempting to follow

Healthy EMG Feature Paretic EMG Feature





 Intended Movement root mean square error (RMSE) measures accuracy of prediction in intended DOF

 Unintended Movment RMSE measures accuracy of prediction looking at the DOFs that should be at rest

• More analysis needed to provide accurate realtime control of bionic limbs or exoskeletons

Conclusion/Future Work

• Validate analyses with additional participants and task performance

• Explore other EMG-control algorithms

• Use control algorithms in a state-of-the-art exoskeleton with paretic EMG

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Healthy Predictions Tend to be Better than **Paretic Predictions**

