Sensorimotor transformations in perturbed walking

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I. INTRODUCTION

In response to perturbations during human movement, the nervous system processes sensory information to generate descending motor commands to activate muscle to control balance. In standing balance, this sensorimotor transformation can be described by delayed feedback of center of mass (COM) kinematics. Changes in muscle activity in response to a perturbation can be reconstructed with delayed feedback of COM kinematics [1]. This indicates that the nervous system integrates sensory information from multiple systems to derive relevant feedback information about the motor task.

In walking, it is unclear if task-level feedback of COM kinematics can also explain this sensorimotor transformation. In response to sagittal plane perturbations, humans mainly control balance by adjusting center of pressure location with the ankle moment [2]. This ankle strategy is however not included in current neuromechanical models of walking, that control balance using stepping strategies [3]. First, we showed that delayed feedback from COM kinematics can explain reactive muscle activity in publicly available datasets of perturbed walking. We used different perturbation modalities, support surface translations [4,5] and pelvis pushes [2], that excited the neuromechanical system in multiple ways. We then used the same datasets to identify the parameters of an supra-spinal feedback additional pathway in а neuromechanical model of walking [3].

II. METHODS

COM position and velocity feedback gains (K_p, K_v) were estimated from the measured deviation in COM kinematics (ΔCOM) , joint moments (ΔT) and muscle activity (ΔEMG) by solving a least-squared regression. A neural delay of 100 ms was used for the joint moment (τ_T) and 70 ms for reactive muscle activity (τ_m) .



kinematics and the change in ankle joint moment in response to surface and pelvis push perturbations ($R^2 = 0.81$, Fig. A). A similar correlation was found for reactive activity of the muscles around the ankle joint (soleus: $R^2 = 0.39$ and tibialis anterior: $R^2 = 0.50$), which shows that this is at least a partially active control mechanism. In addition, we found that the COM based feedback gains are modulated during the gait cycle (Fig. B) and with gait speed.

$$\begin{split} \Delta \mathbf{T}(\mathbf{t}) &= \mathbf{K}_{\mathrm{p}} \Delta \mathrm{COM}(\mathbf{t} - \tau_{T}) + \mathbf{K}_{\mathrm{v}} \Delta C \dot{O} M(t - \tau_{T}) \\ \Delta \mathrm{EMG}(\mathbf{t}) &= \mathbf{K}_{\mathrm{p}} \Delta \mathrm{COM}(\mathbf{t} - \tau_{m}) + \mathbf{K}_{\mathrm{v}} \Delta C \dot{O} M(t - \tau_{m}) \end{split}$$

The phase-dependent modulation of the feedback gains in the

Incorporating COM feedback as an additional feedback loop in a model of walking [3] improved the simulation of the ankle moment in response to a support surface perturbation (Fig. C). We believe that integrating this additional feedback loop in the control of exoskeletons [6] or protheses will improve balance of the user.

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