



A Brake-based Over-ground Gait Rehabilitation Device for Increasing Paretic Propulsive Force

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BACKGROUND

- Propulsion force is a key contributor in achieving forward progression while walking [1-2].
- Stroke often reduces the ability to produce propulsion force equally between the two legs, causing propulsion force asymmetry [2].
- Reducing propulsion force asymmetry is correlated with positive walking outcomes after stroke [2-3].

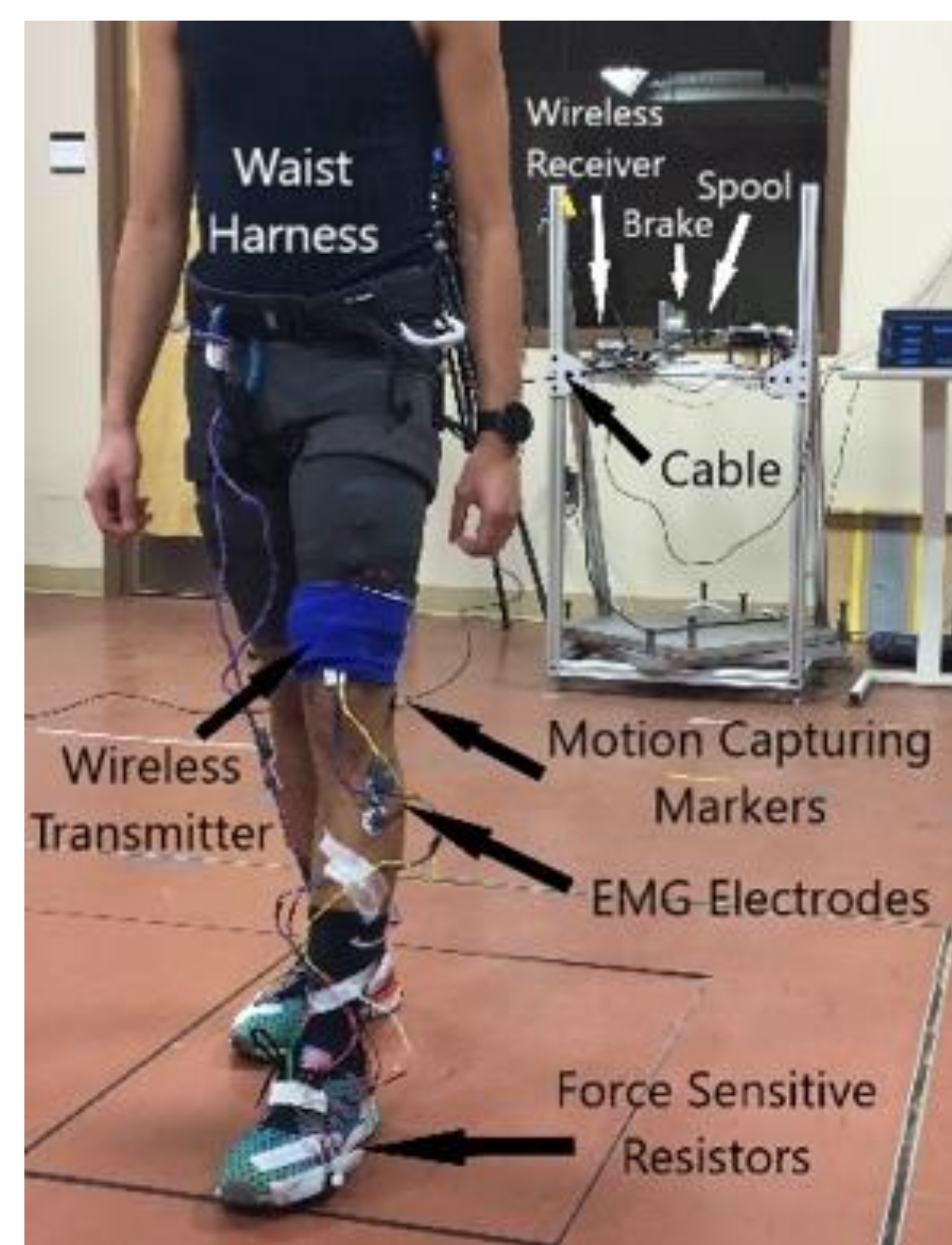
OBJECTIVES

To present a pilot study of the Gait Propulsion Trainer (GPT), a device designed to unilaterally alter propulsion force.

METHODS

DEVICE COMPONENTS:

- A cable spool attaches to a waist-level stand.
- The cable attaches to a belt worn around the hips.
- A rotary brake periodically resists the spool's rotation.
- Force sensitive resistors beneath the shoes send wireless signals to turn the rotary brake on.



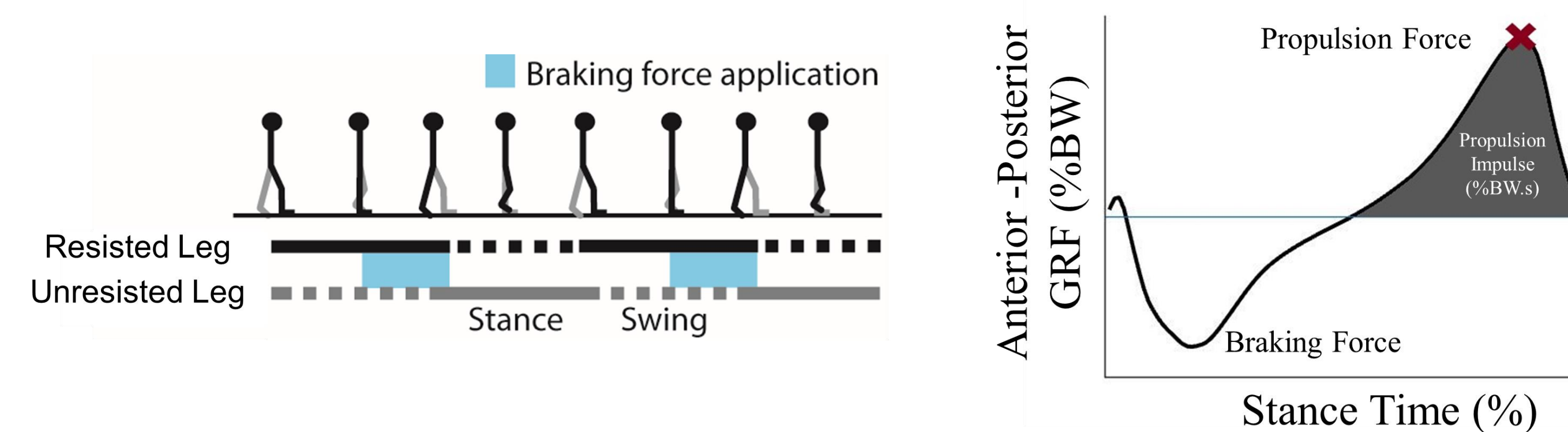
PILOT PARTICIPANTS:

- 50-year-old female with stroke (19.8 N BL Peak Propulsion).
- 30-year-old male healthy control (133.3 N BL Peak Propulsion).

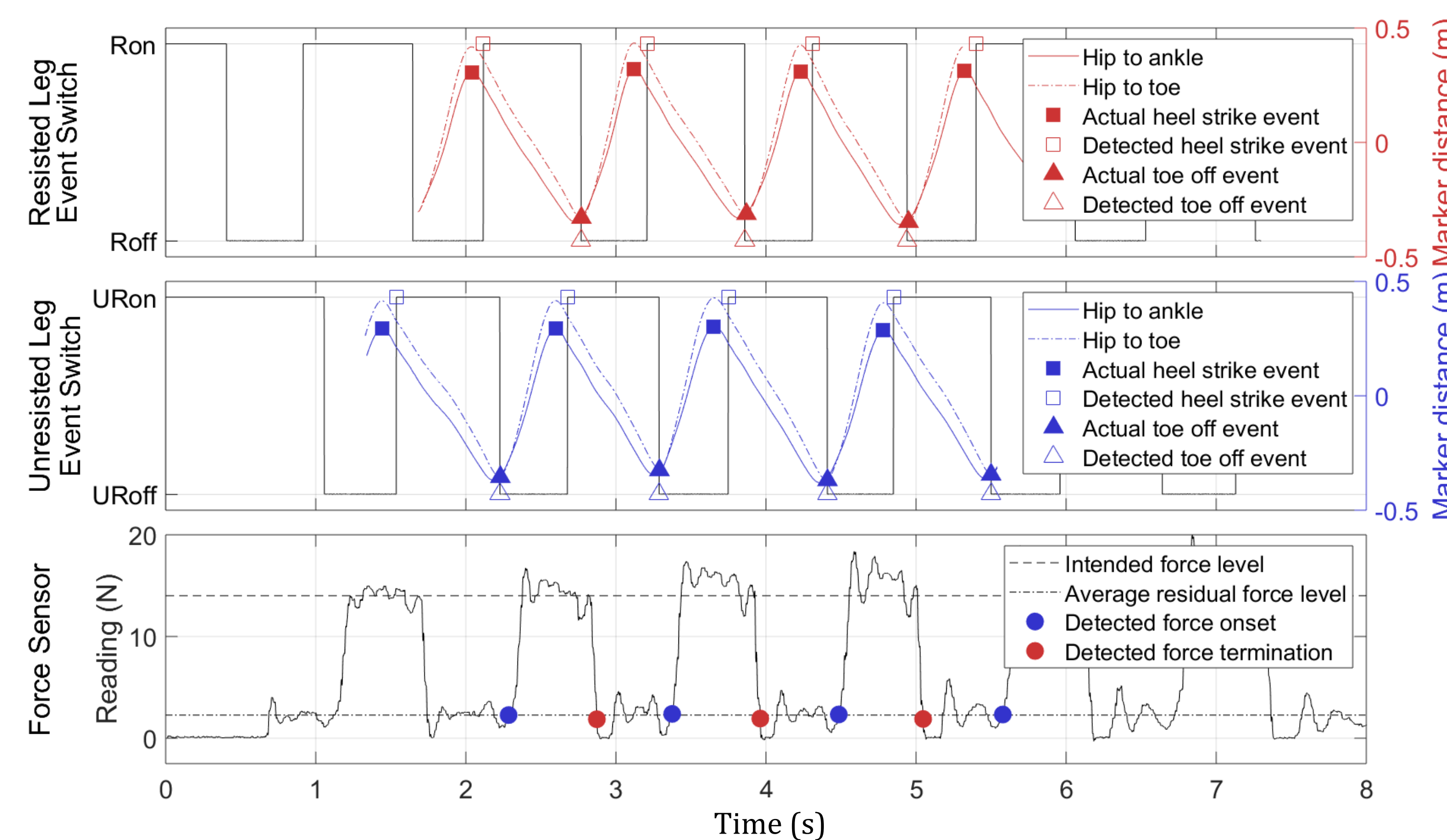
Table 1. Experimental Design.

Condition	Subject Wearing GPT	Control GPT Resistance Level	Participant with Stroke GPT Resistance Level
Baseline (BL)	No	Not Applicable	-
0 % BL	Yes	0 N	0 N
20% BL	Yes	26.7 N	4.5 N
30% BL	Yes	40.0 N	5.8 N
40% BL	Yes	53.3 N	8.0 N
50% BL	Yes	66.7 N	-
60% BL	Yes	93.3 N	-
Post-Training	Yes	0 N	0 N

INTENDED DEVICE OPERATION



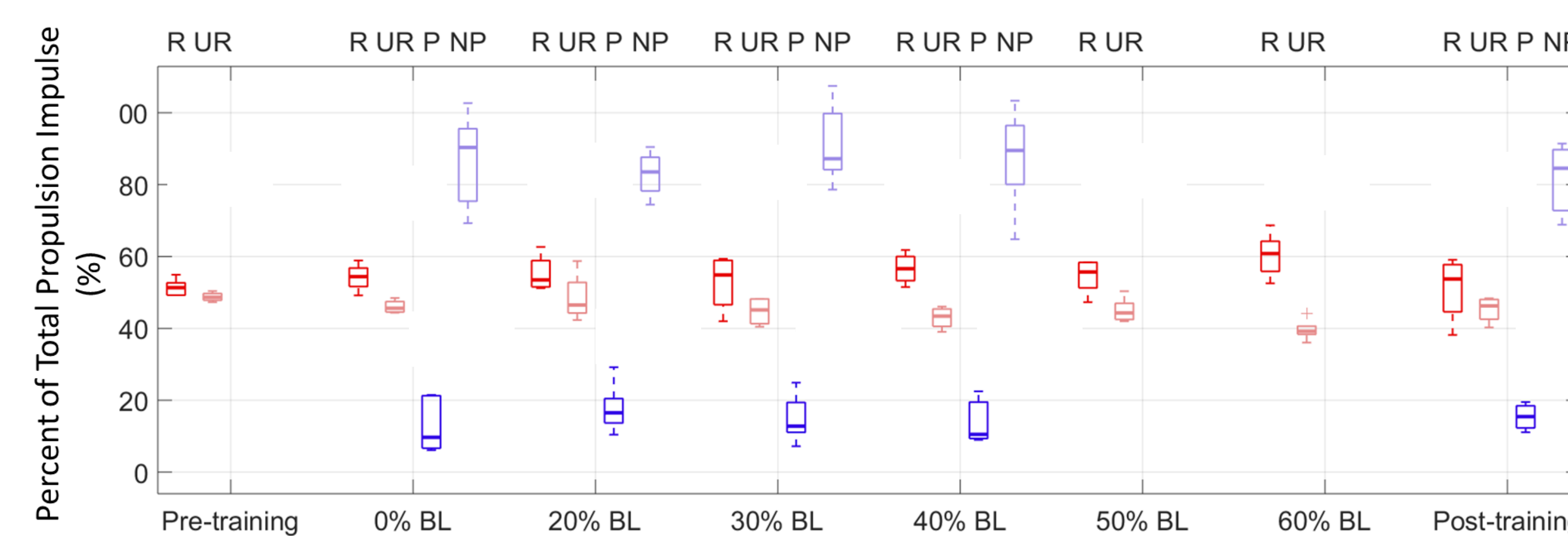
ACTUAL DEVICE OPERATION



A single trial of the healthy participant demonstrates the timing of GPT resistance application in the gait cycle.

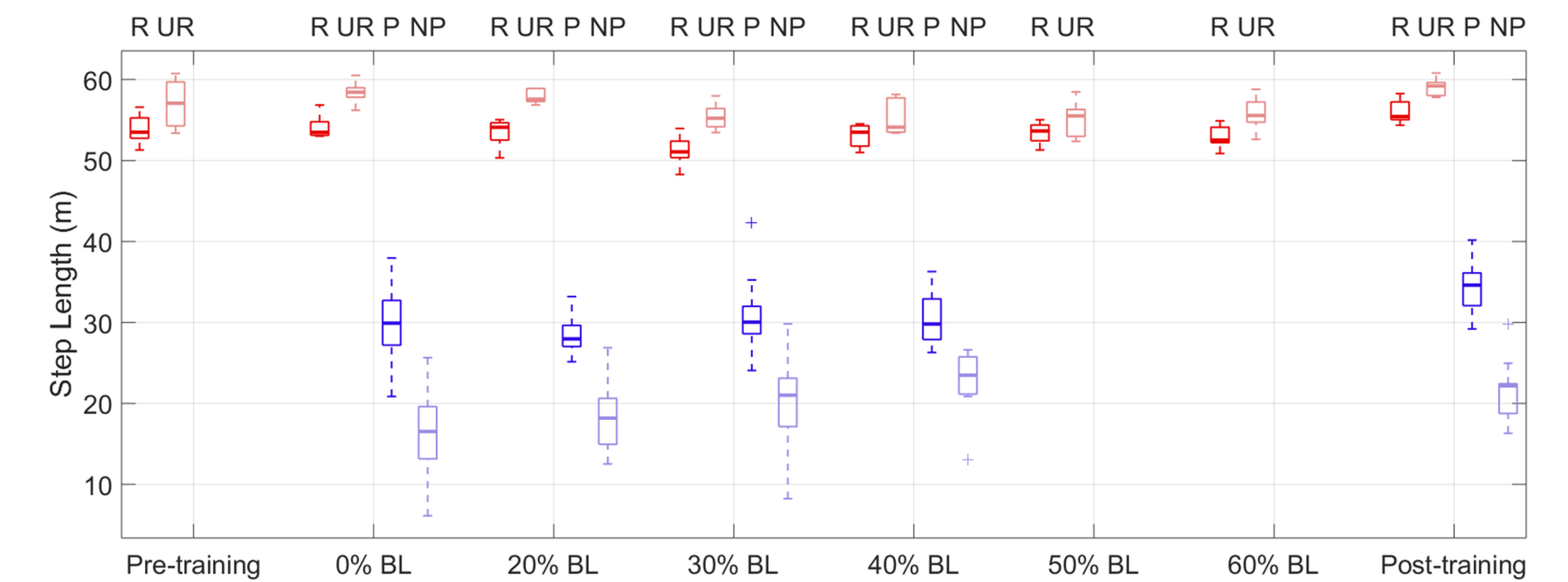
RESULTS

R = Resisted Leg; UR = Unresisted Leg; P = Paretic Leg; NP = Non-paretic Leg Control Stroke



- Resisted leg propulsion impulse of the healthy participant increased with higher GPT resistance.
- Paretic leg propulsion impulse is reduced in the stroke participant's first exposure to GPT resistance.

RESULTS



- Step length was not largely altered on either leg throughout the experiment for the healthy control.
- Step length of the non-paretic leg of the stroke participant increased as GPT resistance increased, producing a surprising result of increasing step length symmetry.

CONCLUSIONS

- This pilot experiment allowed us to verify the accuracy of the timing of GPT resistance.
- Propulsion impulse symmetry was successfully altered in the healthy control participant.
- Propulsion impulse symmetry was reduced upon GPT resistance exposure in the stroke participant, but this reduction did not scale with resistance magnitude.
- Step length symmetry in our stroke participant increased as GPT resistance magnitude increased.

ACKNOWLEDGEMENTS

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