

TRAMA: Bruxelles (15 janvier 2008)  
"Motion analysis and clinics: why to set up a motion analysis lab".

J. Duysens

A gait lab to study more than gait

Motor Control Laboratory  
Research Center for Movement Control and  
Neuroplasticity  
Dep. of Biomedical Kinesiology (FaBeR)  
K.U. Leuven, Belgium  
And : SMK-RDE,  
Nijmegen , The Netherlands

---

---

---

---

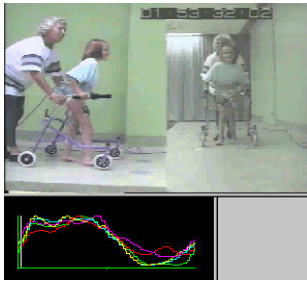
---

---

---

---

### Example: clinical gait analysis Cerebral Palsy



---

---

---

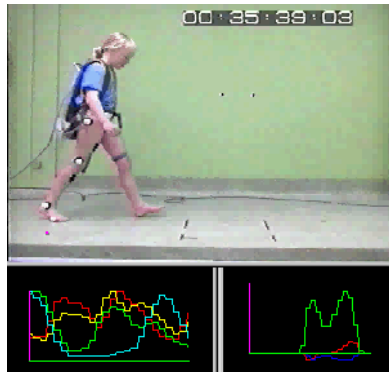
---

---

---

---

---



---

---

---

---

---

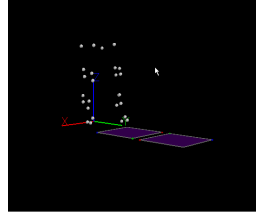
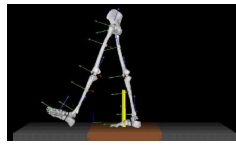
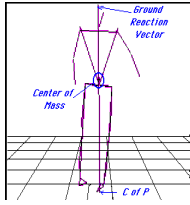
---

---

---

## Nijmegen Motor Unit

AMTI force plate



---

---

---

---

---

---

---

---

## SPLIT-BELT

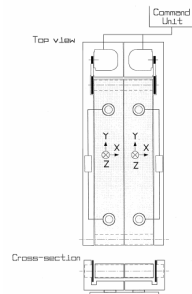
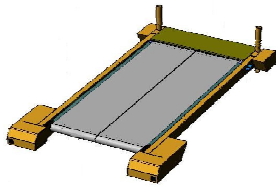


Fig. 1. Diagram of the treadmill ergometer.

---

---

---

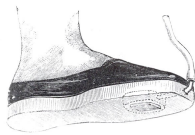
---

---

---

---

---



---

---

---

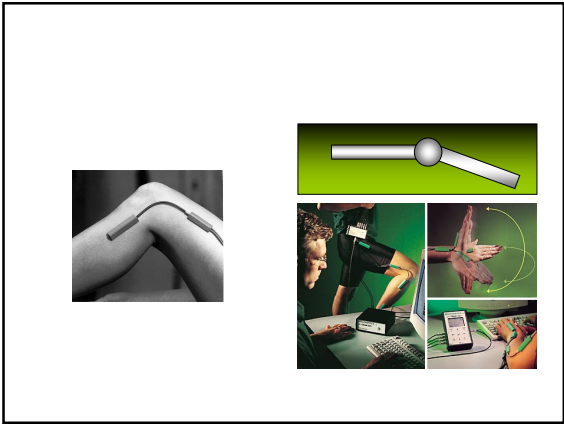
---

---

---

---

---




---

---

---

---

---

---

---

---

**EMG**  
EMG stands for electromyography. It is the study of muscle electrical signals.

Electrodes are placed on the skin overlying the muscle. Alternatively, wire or needle electrodes are used and these can be placed directly in the muscle.

When EMG is acquired from electrodes mounted directly on the skin, the signal is a composite of all the muscle fiber action potentials occurring in the muscle(s) underlying the skin. These action potentials occur at somewhat random intervals so at any one moment, the EMG signal may be either positive or negative voltage. Individual muscle fiber action potentials are sometimes acquired using wire or needle electrodes placed directly in the muscle.

---

---

---

---

---

---

---

---

**Telemetric EMG**

---

---

---

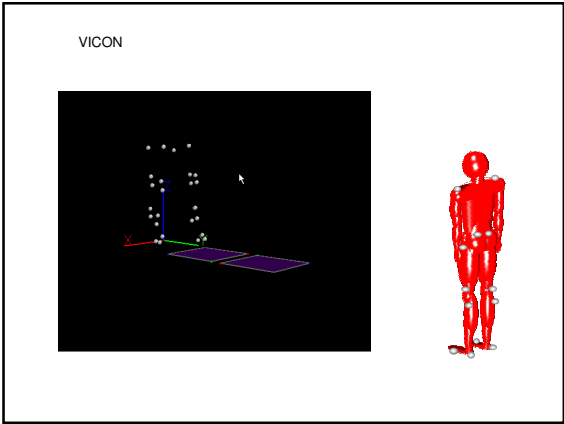
---

---

---

---

---




---

---

---

---

---

---

---

---




---

---

---

---

---

---

---

---

TRAMA: Bruxelles (15 janvier 2008)  
 "Motion analysis and clinics: why to set up a motion analysis lab".

J. Duysens

A gait lab to study more than gait

Motor Control Laboratory  
 Research Center for Movement Control and  
 Neuroplasticity  
 Dep. of Biomedical Kinesiology (FaBeR)  
 K.U. Leuven, Belgium  
 And : SMK-RDE,  
 Nijmegen , The Netherlands

---

---

---

---

---

---

---

---

## Project 1 Freezing in PD



Anke Snijders 16-01-07

---

---

---

---

---

---

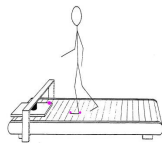
---

---

## Research question

- How to INDUCE freezing of gait on a treadmill?

- Obstacles



Anke Snijders 16-01-07

---

---

---

---

---

---

---

---



---

---

---

---

---

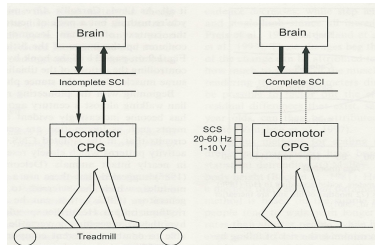
---

---

---

## Project 2: EM-SCI

- International Multi-Center study



---

---

---

---

---

---

---

---



---

---

---

---

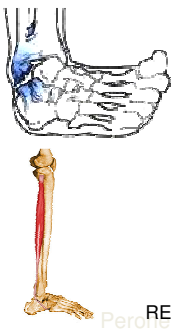
---

---

---

---

## Project3: SPORTS injury nr 1



Ankle sprains

REFLEXES AS DEFENSE?

---

---

---

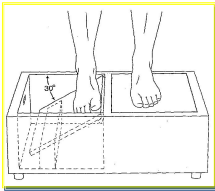
---

---

---

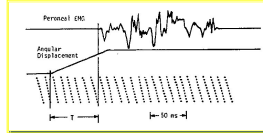
---

---



PREVIOUS STUDIES: STANDING  
INVERSION 30 DEG.

JOHNSON ET JOHNSON, 1993  
ISAKOV ET AL., 1986



---

---

---

---

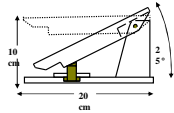
---

---

---

---

### Closer to real life



50% inverting, 50 % non-inverting

Grüneberg, Nieuwenhuijzen and Duysens, JPhysiol., 2003

---

---

---

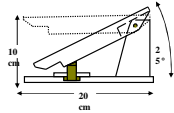
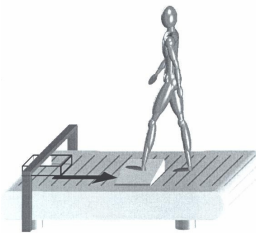
---

---

---

---

---



50% inverting, 50 % non-inverting

Nieuwenhuijzen and Duysens, 2007 (JN, in press)

---

---

---

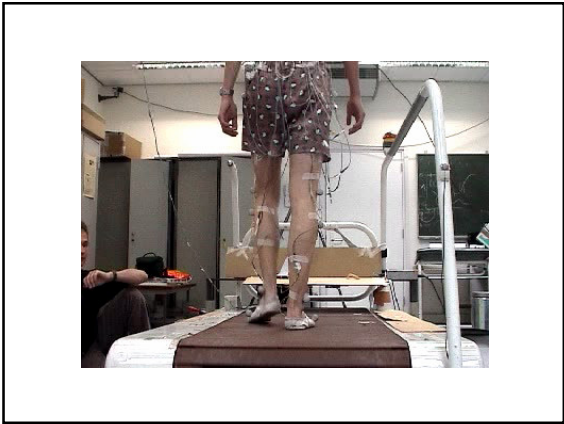
---

---

---

---

---



---

---

---

---

---

---

---

---

Project 4



---

---

---

---

---

---

---

---

**Project 4: Falls/  
Eurokinesis**



---

---

---

---

---

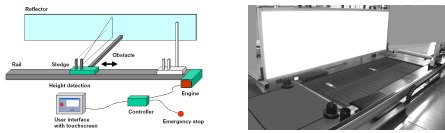
---

---

---



### Project 4: Eurokinesis



---

---

---

---

---

---

---

---

### Learn how to fall



---

---

---

---

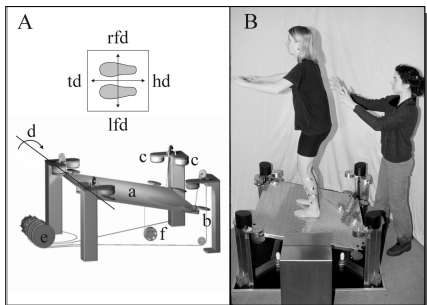
---

---

---

---

### Project 5: Balance (Lars Oude Nijhuis/Bas Bloem)



---

---

---

---

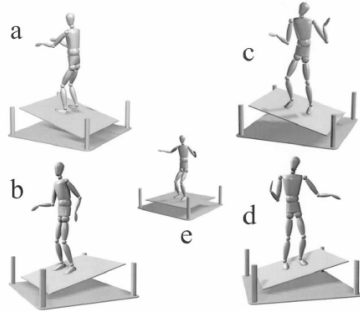
---

---

---

---

Examples : postural responses



---

---

---

---

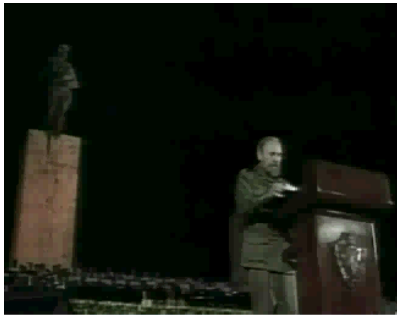
---

---

---

---

### Project 6



---

---

---

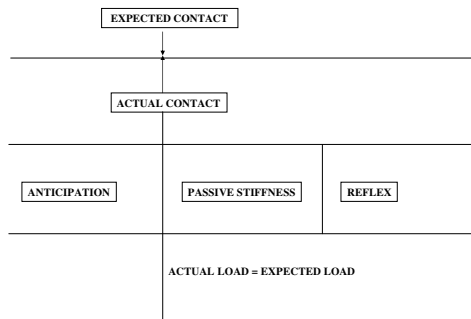
---

---

---

---

---



---

---

---

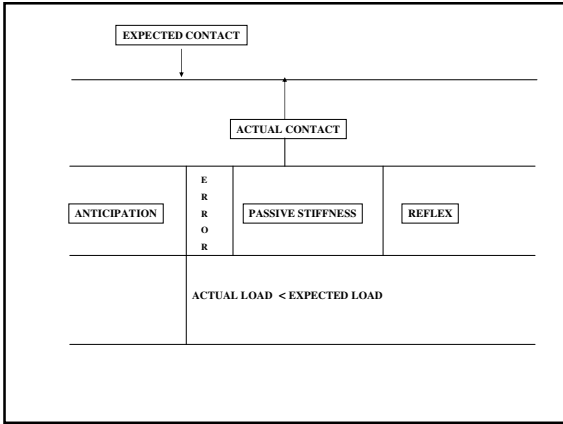
---

---

---

---

---




---

---

---

---

---

---

---

---

- Lowering of support surface
- Lower visual field occluded
- Cadence standardized
- Infrared beam to detect expected foot contact
- Pressure plate detects touchdown

---

---

---

---

---

---

---

---

### Protocol

Expected Level	EL	EL 1... EL 10
Unexpected Level	UL	UL 1.... UL 7-10 UD 1, UL 1.... UL 7-10 UD 2, UL 1.... UL 7-10 :
Unexpected Down	UD	UD 10
Expected Down	ED	ED 1 ... ED 10

---

---

---

---

---

---

---

---

CONTROL subject HH 44 y



---

---

---

---

---

---

---

---

EXPECTED CONTACT

90 ms

ACTUAL CONTACT

ANTICIPATION

E  
R  
R  
O  
R

PASSIVE STIFFNESS

REFLEX

ACTUAL LOAD < EXPECTED LOAD

---

---

---

---

---

---

---

---

Young adults

---

---

---

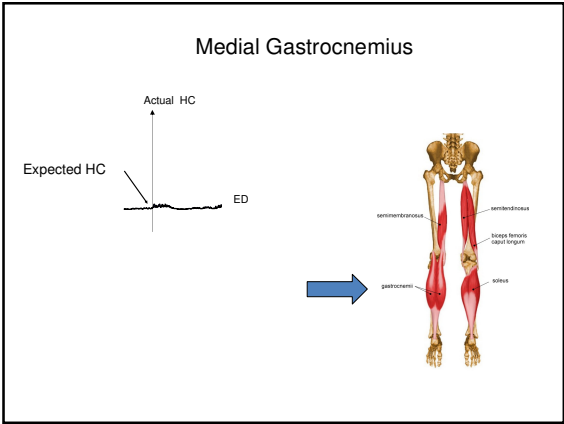
---

---

---

---

---




---

---

---

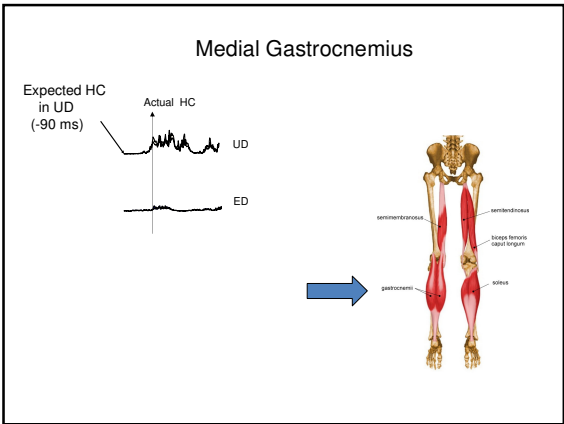
---

---

---

---

---




---

---

---

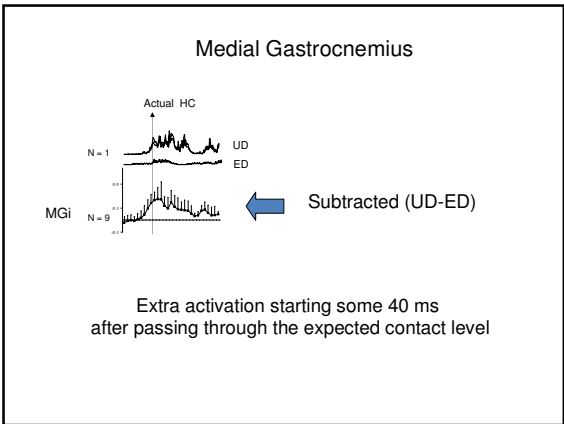
---

---

---

---

---




---

---

---

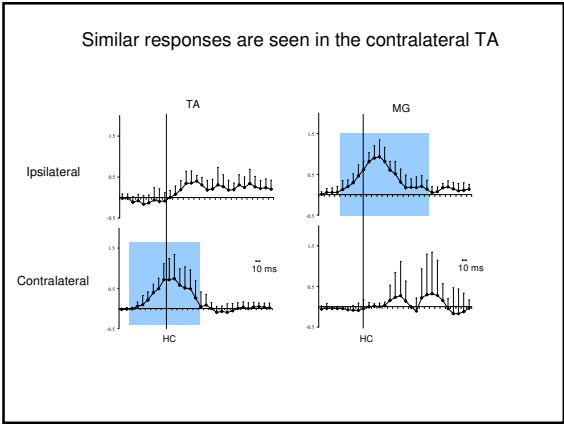
---

---

---

---

---




---



---



---



---



---



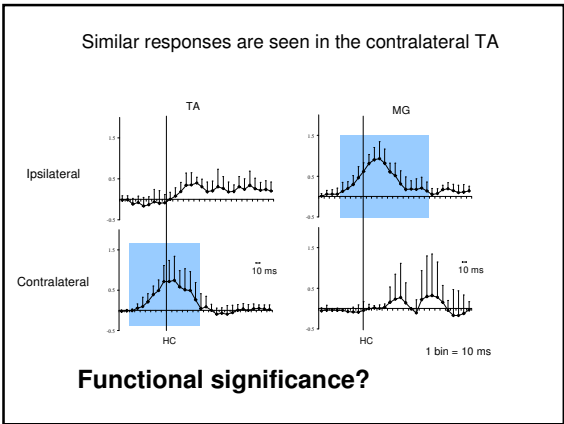
---



---



---




---



---



---



---



---



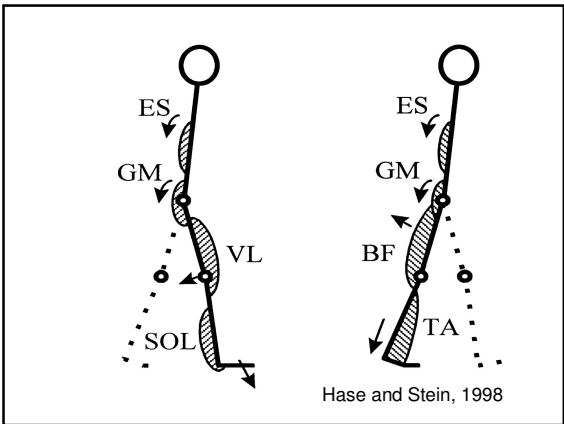
---



---



---




---



---



---



---



---



---



---



---

Do these fast responses depend on fast afferents?

Experiments on adults

-age-matched controls

-hereditary motor and sensory neuropathy; HMSNIa

---

---

---

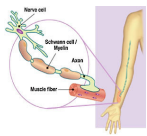
---

---

---

---

**Project 6: Hereditary motor and sensory neuropathy**  
Why frequent falls?



---

---

---

---

---

---

---

HMSNIa subjectRM 44y



---

---

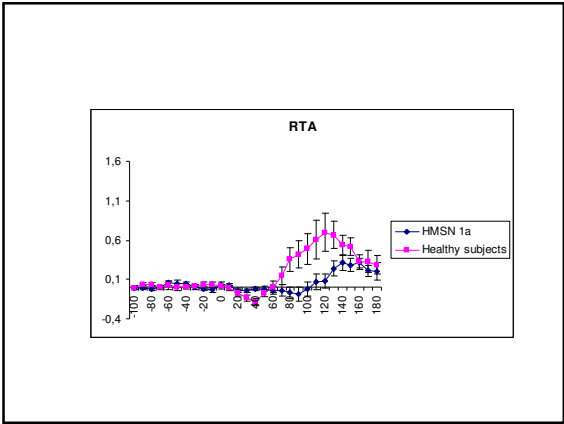
---

---

---

---

---




---

---

---

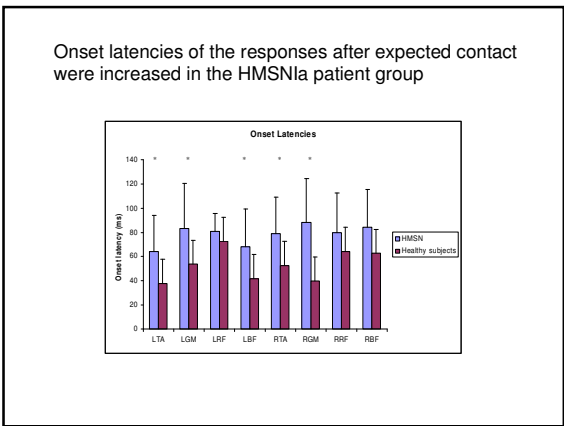
---

---

---

---

---




---

---

---

---

---

---

---

---

**Co-workers:**

M. Van der Linden  
P.H.J.A. Nieuwenhuijzen  
V. Weerdesteyn  
C. Bastiaanse  
C. Grüneberg  
B. Smits-Engelsman  
G.P. van Galen,  
B. Nienhuis,  
B. Groen,  
R. Den Otter  
I. Schillings  
C. Hofstad

---

---

---

---

---

---

---

---





The End

---

---

---

---

---

---

---