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Development

Institute for Research in Rehabilitation Medicine and Technology

Schouderbelasting tijdens rolstoelrijden met en zonder power assist

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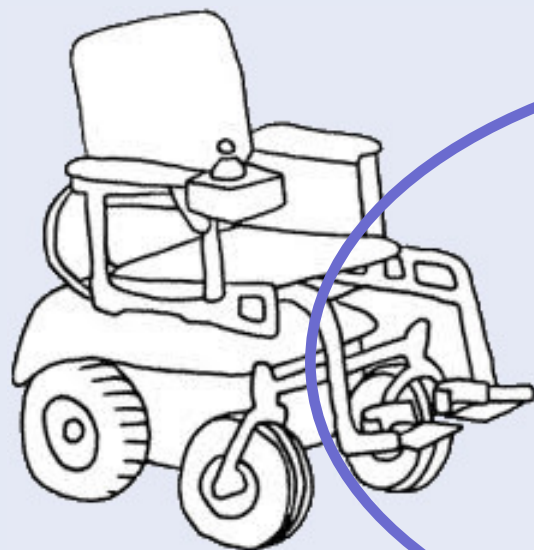
Johan S. Rietman, PhD, MD

Minisymposium, Hoensbroek
September 23, 2011

Platform for medical technology innovation for an aging society

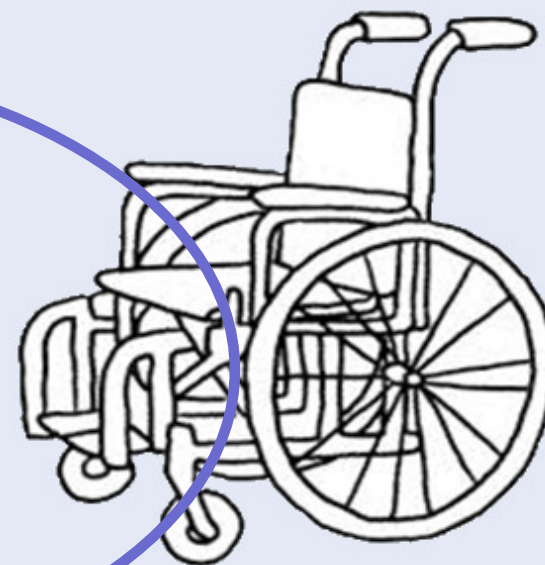
- Laser micro applications for medical techniques
- Active therapeutic devices
- Active assistive devices
 - Active hoist
 - Power assisted wheelchair

Power assisted wheelchair



Powered
wheelchair

Power assisted
wheelchair



Hand rim wheelchair

Power assisted wheelchair

- Power assist during push phase
- Motor at wheelaxis
- Wheels fit on subjects own wheelchair frames





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Project partners



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INTERREG - Grenzregionen gestalten Europa
Europäischer Fonds für Regionale Entwicklung der Europäischen Union
INTERREG - Gensregio's bouwen aan Europa
Europees Fonds voor Regionale Ontwikkeling van de Europese Unie



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Overview research

Shoulder load



Activity



Participation



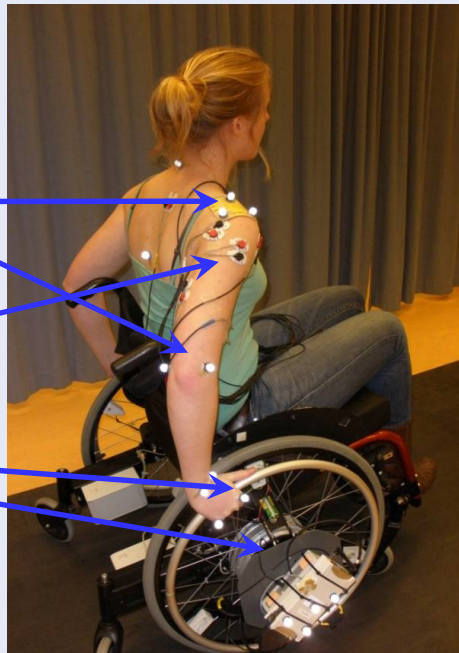
Measurements

Driving a wheelchair with less shoulder load?

Movements

Muscle activity

Force



Measurements

Performing more activities?

- Daily distance travelled
- Used mode
- Performed activities
- Participation in social activities
- Experienced shoulder pain



Measurements

Are activities easier to perform?



Measurements

Less energy necessary for wheelchair propulsion?

- Heart rate
- Energy expenditure





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ZEER INDRUKWEKKEND, COLLEGA

MAAR WERKT
HET OOK IN
THEORIE?

dVRGvT

Measurements shoulder load

- USA 1.4 % and Europe 1.5% of total population

LaPlante 2010; Vignier 2008; Van Drongelen 2002

- High strain on upper extremity

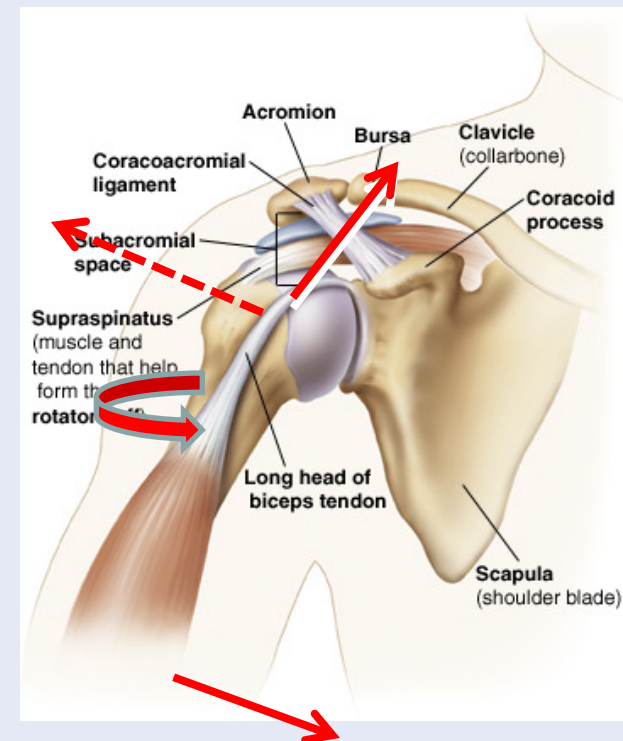
Dyson-Hudson 2004; Van der Woude 2006; Van Drongelen 2005

- Shoulder injuries 50-62%

Curtis 1999; Finley 2004

Work requirements related to shoulder injury

- Repetitive (high) forces and moments
 - Superior force with internal rotation moment
 - Radial force on rim



Boninger 2003; Mercer 2006

Work requirements related to shoulder injury

- Power generation in extreme joint angles
 - extension with internal rotation



Collinger 2008; Corfman 2003



Work requirements related to shoulder injury

- Imbalance in upper extremity muscles
 - Dominance of adduction and internal rotation

Burnham 1993, Lee 2002

Reduced work requirements

- Use a light wheelchair
- Avoid weight gain
- Adjust wheelchair ergonomically
- Optimize propulsion technique

Boninger 2005; Consortium for spinal cord medicine 2005

- Use of a power assist wheelchair

Consortium for spinal cord medicine 2005

Objective pilot

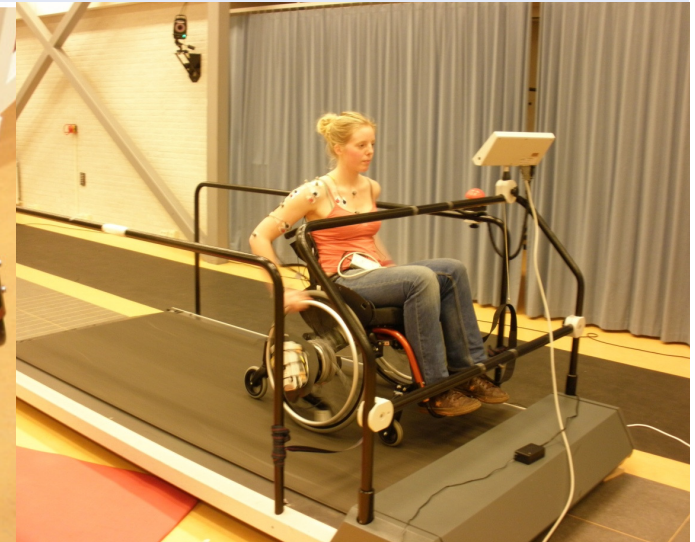
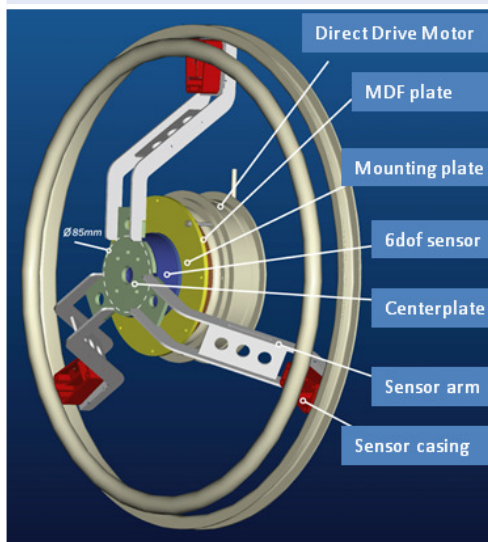
To investigate the influence of power assisted propulsion on shoulder kinematics, kinetics, and muscle activation patterns.



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Methods

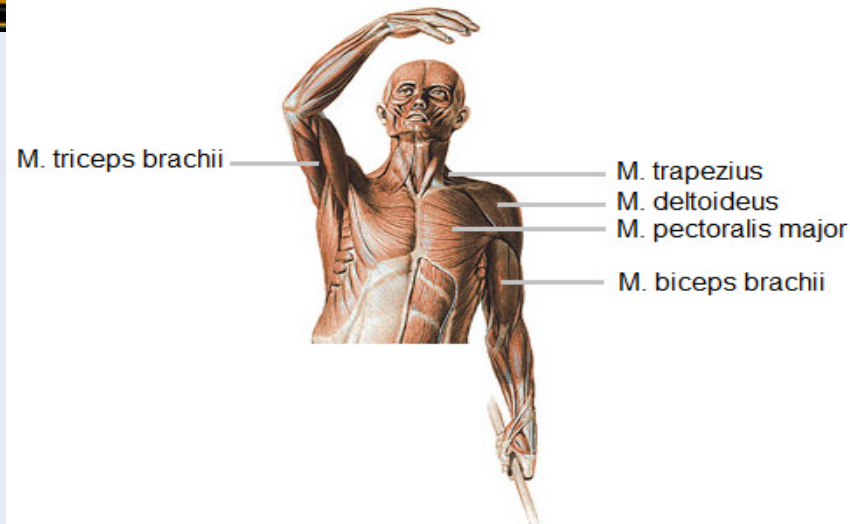
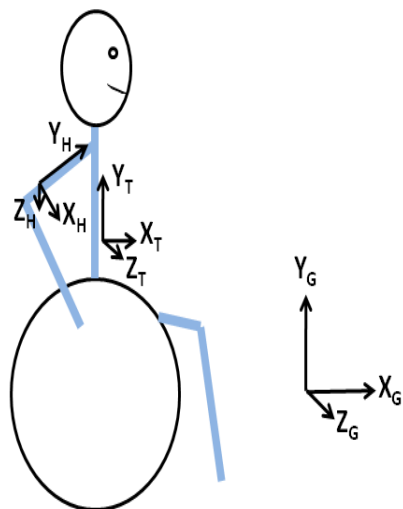
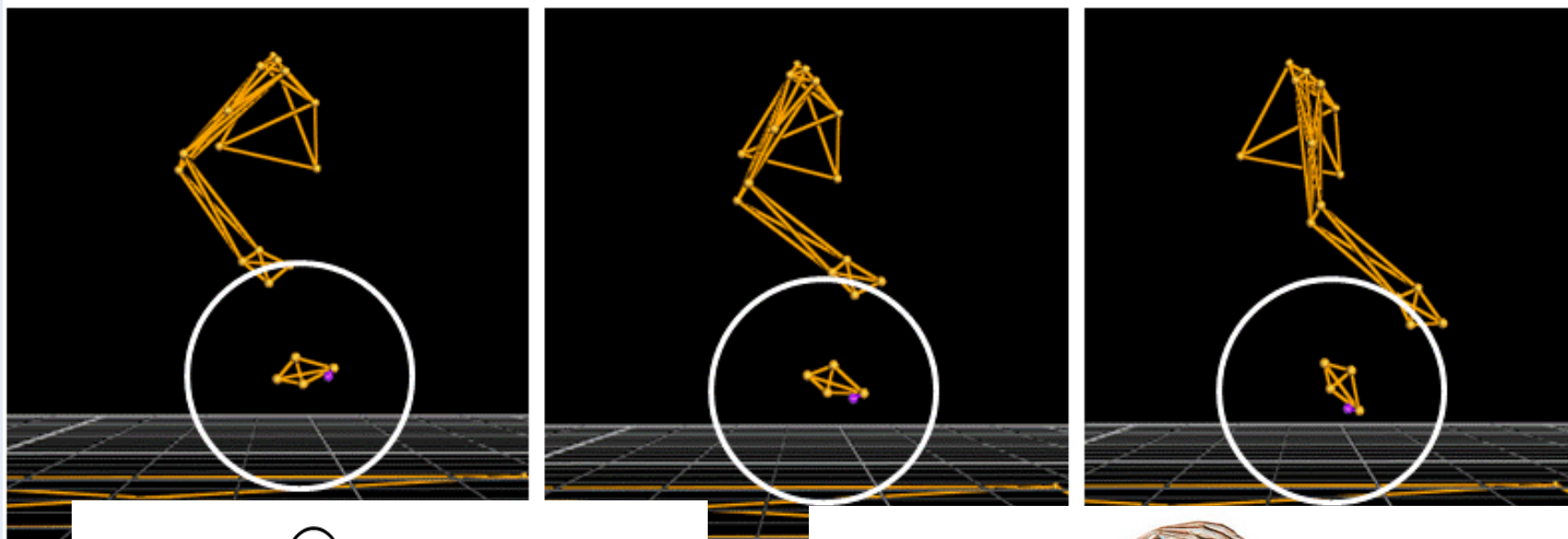
- 9 healthy subjects
- Instrumented wheelchair
- Propulsion on treadmill at 0.9 m/s





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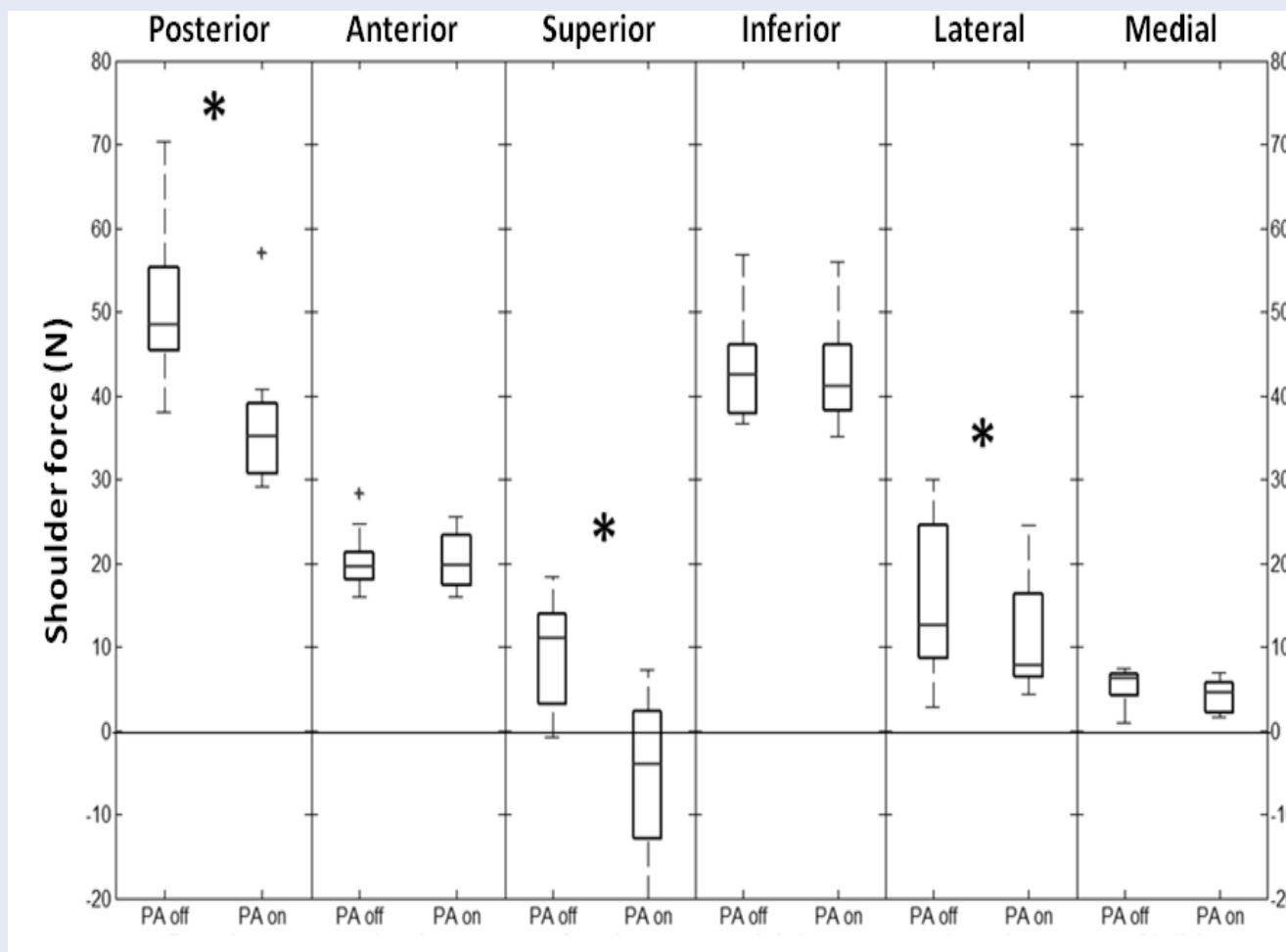
Methods



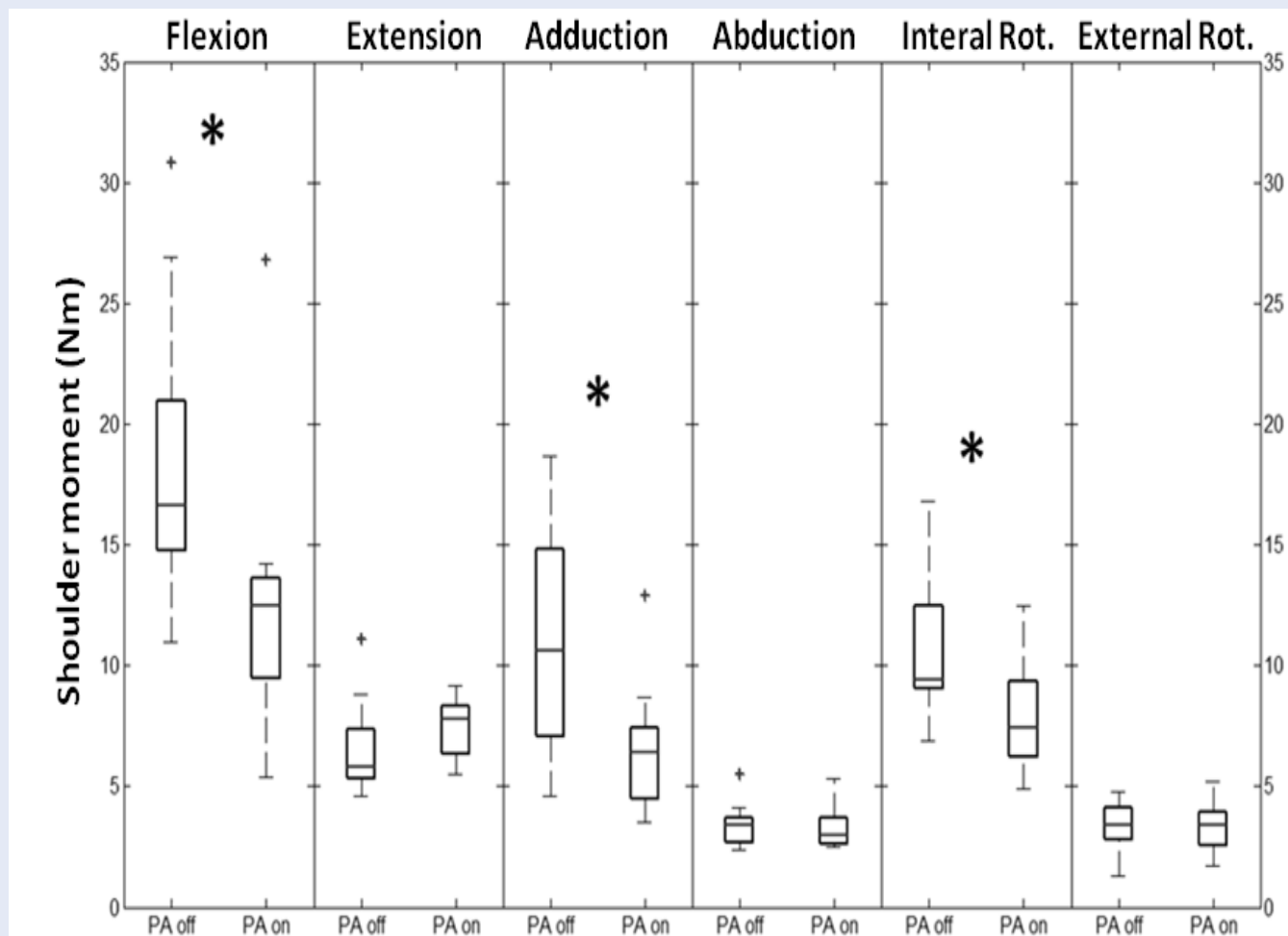
Results kinematics

Kinematic outcome measures	Mean (SD)	Mean (SD)	Significance level
	without PA	with PA	
Propulsion frequency (strokes / min)	60.6 (14.1)	63.2 (14.7)	.314
Maximal flexion (°)	22.1 (6.8)	14.9 (5.5)	.015
Maximal extension (°)	40.4 (6.2)	40.9 (6.9)	.678
Minimal abduction (°)	25.8 (4.7)	24.5 (6.2)	.678
Maximal abduction (°)	37.7 (5.3)	35.8 (5.2)	.314
Maximal external rotation (°)	6.2 (7.7)	9.8 (8.2)	.066
Maximal internal rotation (°)	20.4 (12.2)	12.8 (11.3)	.008

Results kinetics: Forces acting on the shoulder



Results kinetics: Moments acting around the shoulder



Results surface EMG

Decreased area under the curve

Muscles	Change in RMS (%)	<i>Significance level</i>
Anterior deltoid	10.8	.260
Middle deltoid	2.5	.594
Posterior deltoid	12.3	.015
Pectoralis major	27.0	.038
Trapezius	6.4	.314
Biceps	13.5	.066
Triceps	13.4	.021



Implications & impact on rehabilitation medicine

Repetitive (high) forces and moments

Power generation in extreme joint angles

Imbalance in upper extremity muscles

Implications & impact on rehabilitation medicine

Repetitive (high) forces and moments

- Unaltered stroke frequency
- Reduced posterior, superior, and lateral forces at the shoulder
- Reduced flexion, adduction, internal rotation moments around the shoulder



Implications & impact on rehabilitation medicine

Power generation in extreme joint angles

- Decreased maximal flexion and internal rotation angles

Implications & impact on rehabilitation medicine

Imbalance in upper extremity muscles

- Surface EMG decreased
 - M. deltoideus pars spinalis
 - M. pectoralis major
 - M. triceps brachii caput longum

Conclusion

In healthy subjects a power assisted wheelchair can intervene in risk factors of shoulder injury.



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Thank you for your attention

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INDES
CONSULTANCY - DESIGN - MANAGEMENT

Use-Lab



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