

Module-Based Analysis of Upper-Limb Movement Post-Stroke



Yasmina Bassi, Joel B. Harley Ph.D., and Jennifer A. Nichols Ph.D.

J. Crayton Pruitt Family Department of Biomedical Engineering and Department of Electrical and Computer Engineering

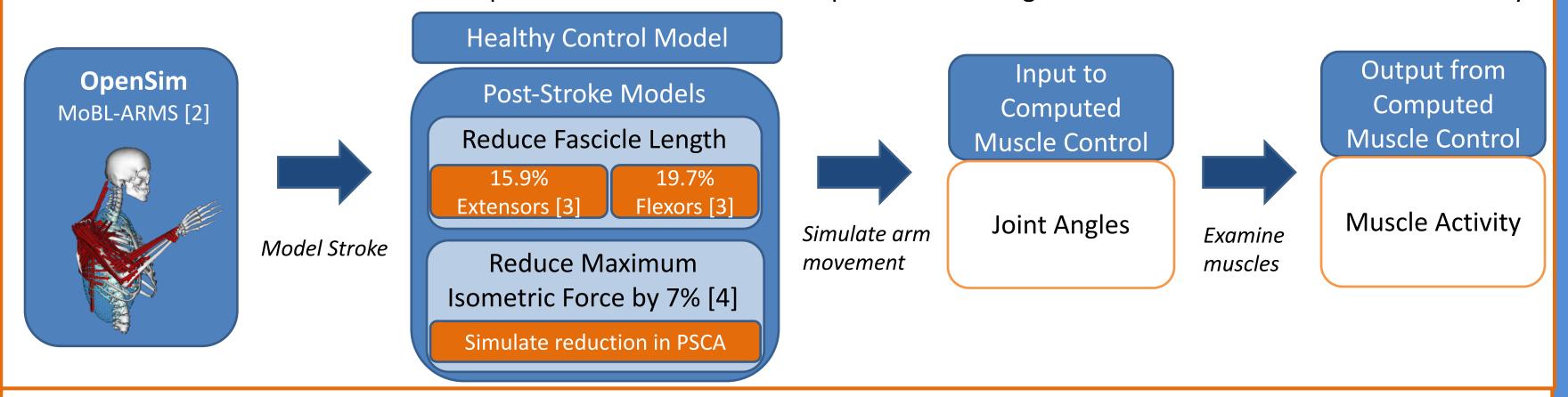
INTRODUCTION

- Muscle modules are groups of muscles that activate together to generate a specific movement.
- The number of modules and their activation timing can describe the level of independent movement that the muscles are capable of producing.
- The number of modules in the lower limb have been shown in vivo to reduce after stroke [1].

Objective: To examine to what extent the number of muscle modules in the upper limb reduce post-stroke.

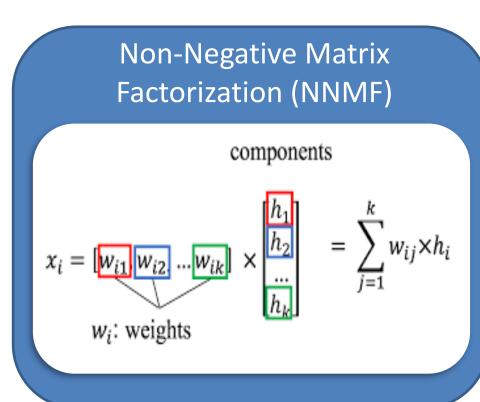
METHODS

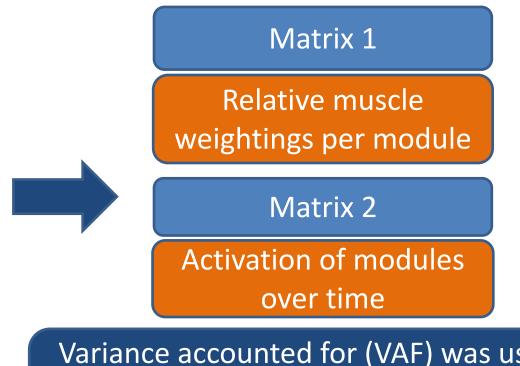
Data Collection: MoBL-ARMS model in OpenSim was used to simulate post-stroke changes to muscles and estimate muscle activity.



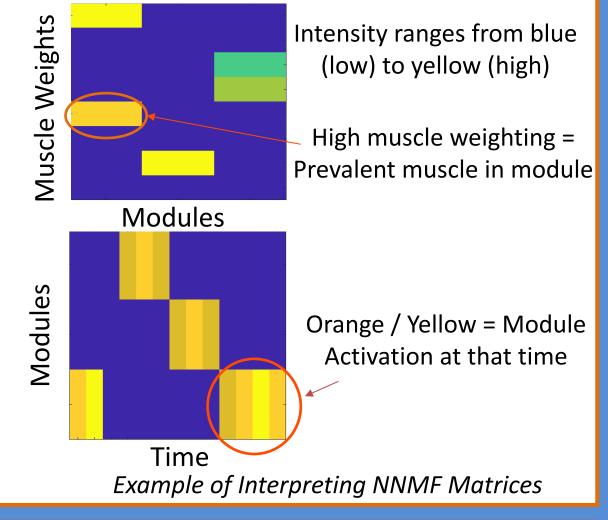
Computational Analysis: Non-negative matrix factorization (NNMF) was used to break down muscle activity into two matrices:

(1) muscle weighting matrix per module and (ii) a module activation over time matrix.





Variance accounted for (VAF) was used to statistically determine the number of modules to best fit the data.



REFERENCES

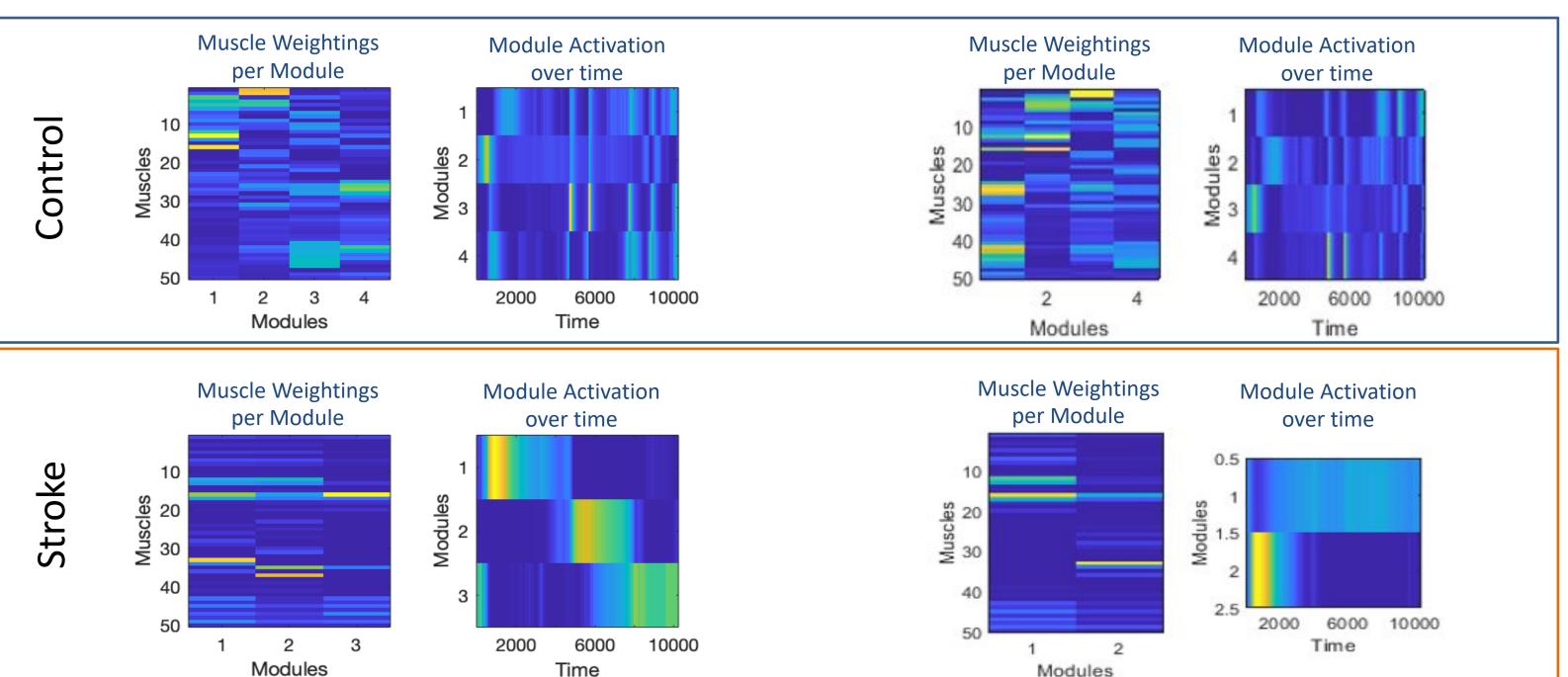
[1] Clark D.J. et al. (2010) J Neurophys, (103): 844-857 [2] Saul K.R. et al. (2015) Comp Methods in Biomechanics and Biomedical Engineering, (18): 1445-58

[3] Nelson C.M. et al. (2018) J SAGE, (32): 799-809. [4] Ryan A.S. et al. (2002) Archives of Physical Medicine, (83): 1703-1707.

RESULTS & DISCUSSION

Reducing FASCICLE LENGTH reduced the calculated number of modules from 4 to 3.

Reducing MAXIMUM ISOMETRIC FORCE reduced the calculated number of modules from 4 to 2.



Fascicle Length

Maximum Isometric Force

Modular activation timing overlaps more extensively post stroke

- Module activation is less distinct over the time it takes to complete the reaching task
- Overlap indicates that muscles are not firing independently

Muscle weightings in modules are altered

- Control: prevalent muscle weightings in each module consisted of parts of the body that typically contracted together in reaching movements (e.g., muscle compartments of the extensor digitorum activated simultaneously)
- Stroke: muscles within the modules were no longer biomechanically related in reaching movement (e.g., triceps long head and flexor digitorum co-activated)

CONCLUSIONS

- The simulations indicate a reduction in the number of modules between the control and stroke states. This finding suggests that the structural changes in muscles following stroke impact how individuals generate movement.
- Future efforts should examine additional factors regarding how upper limb muscle physiology changes post-stroke and should make use of experimental data in order to ensure the simulations represent real-world conditions.