

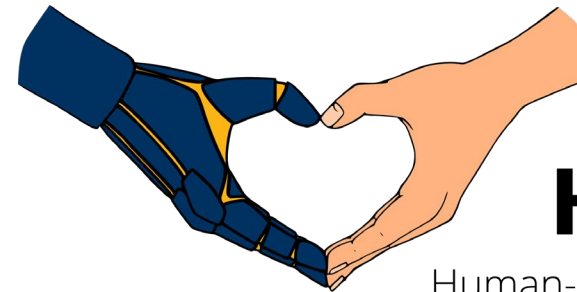
Human Muscle Force Modeling for Enhanced Assistive Device Control

Laura Hallock

Ruzena Bajcsy

BAIR/CPAR/BDD Internal Weekly Seminar

2018.10.26



HART Lab

Human-Assistive Robotic Technologies

Why model musculoskeletal dynamics?

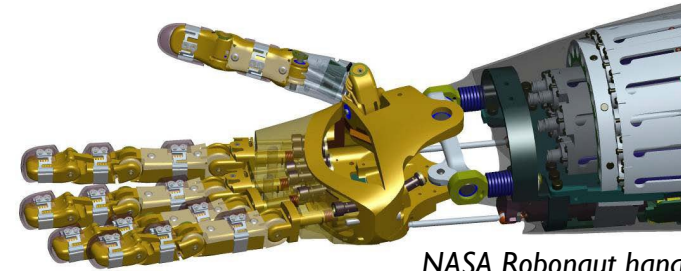
There are many **mechanically** sophisticated, biomimetic devices on the market ...



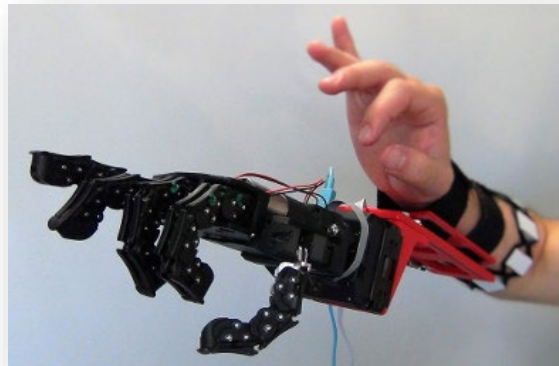
UW "Highly Biomimetic
Anthropomorphic Robotic Hand"



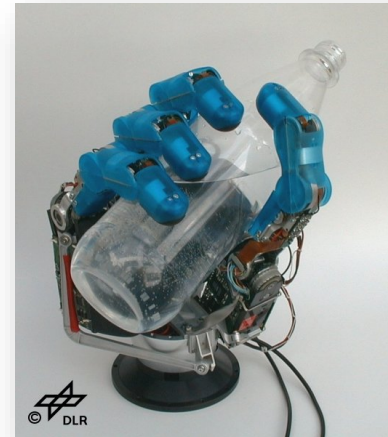
Ottobock Bebionic hand



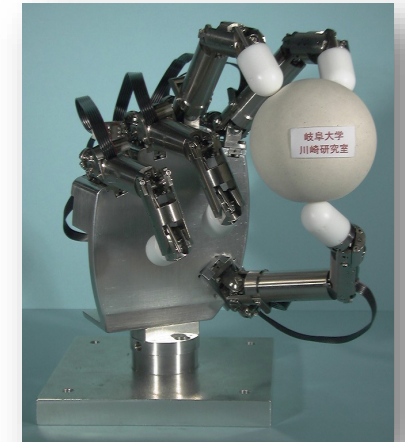
NASA Robonaut hand



PISA-IIT SoftHand



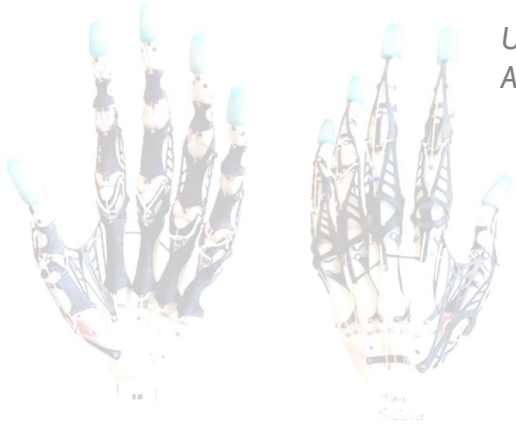
DLR Hand II



Gifu Hand III

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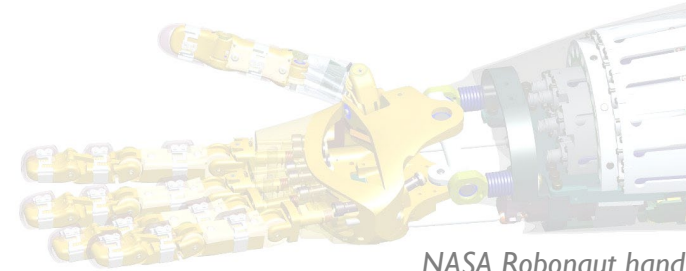
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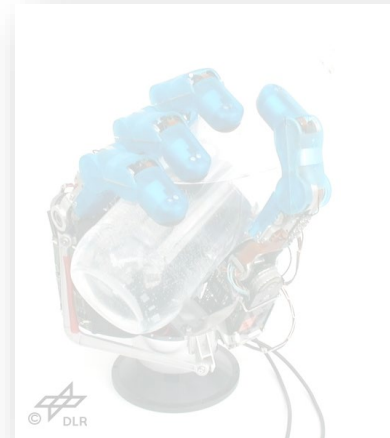
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... but we don't know how to **control** them.

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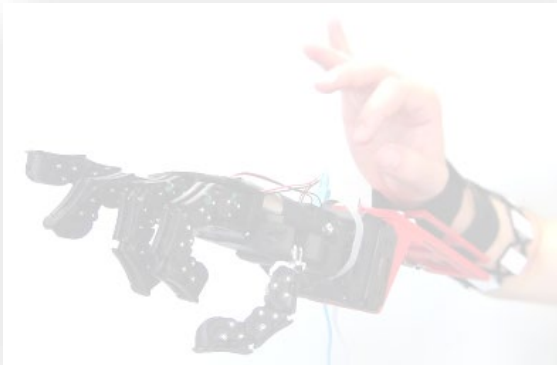
There are many

CHALLENGE

How can a human user control **many degrees of freedom**?

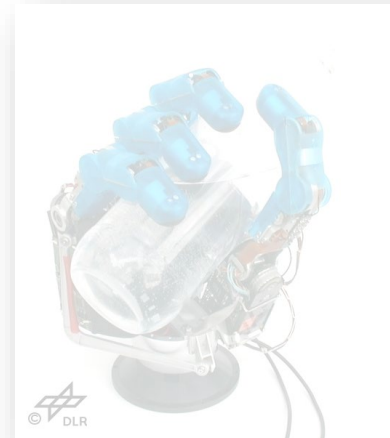


NASA Robonaut hand



PISA-IIT Softhand

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DLR Hand II



Gifu Hand III

... but we don't know how to **control** them.

Why model musculoskeletal dynamics?

There are many

CHALLENGE

How can a human user control **many degrees of freedom?**

KEY IDEA

If we can **measure the output force of each muscle**, we should be able to **control an external device of the same complexity.**

NASA Robonaut hand



Gifu Hand III

PISA-IIT SoftHand

... but we don't know how to **control** them.

Muscle Force Inference: State-of-the-Art

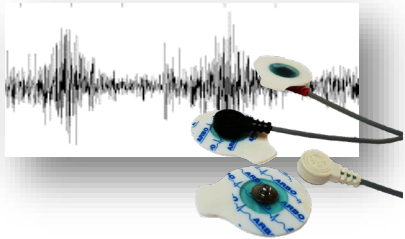
Muscle Output
Force

$$F_m = f(a)$$

Neurological
Activation
 a
via **electro-
myography
(EMG)**

Contraction
Dynamics

$f(\cdot)$



Muscle Force Inference: State-of-the-Art

Muscle Output
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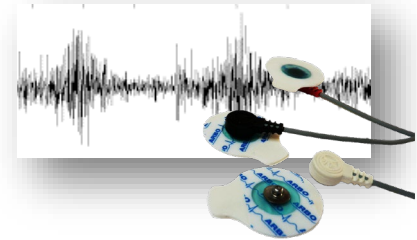
Contraction
Dynamics

$f(\cdot)$



EMG is:

- noisy
- sensitive to electrode placement
- aggregate
- based on neurological signals
(neurological disorder \rightarrow poor signal)

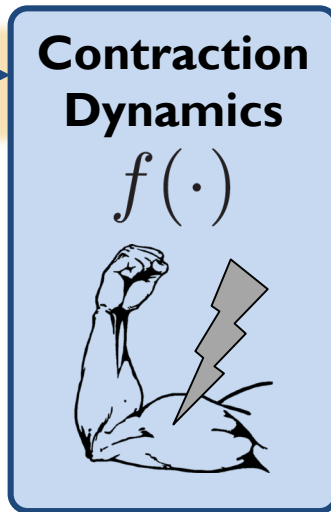


Muscle Force Inference

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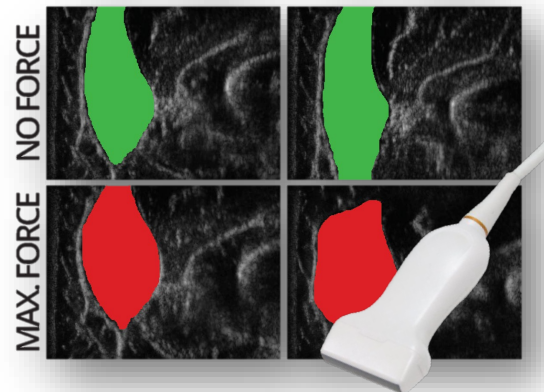


Deformation Dynamics
 $g(\cdot)$

Vibration Dynamics
 $h(\cdot)$

Muscle Deformation
 $D = g(F_m)$

$\theta = 25^\circ$ $\theta = 69^\circ$

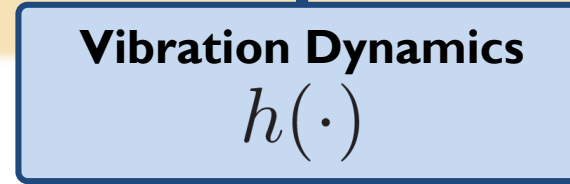
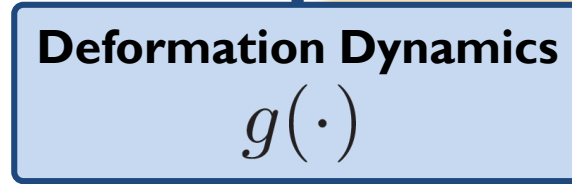
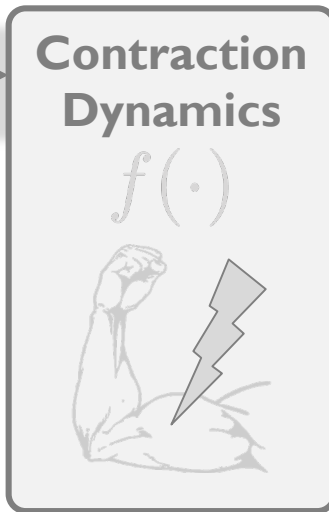


Muscle Vibration
 $V = h(F_m)$



Muscle Force Inference: Our Approach

Neurological
Activation
 a
via **electro-
myography
(EMG)**



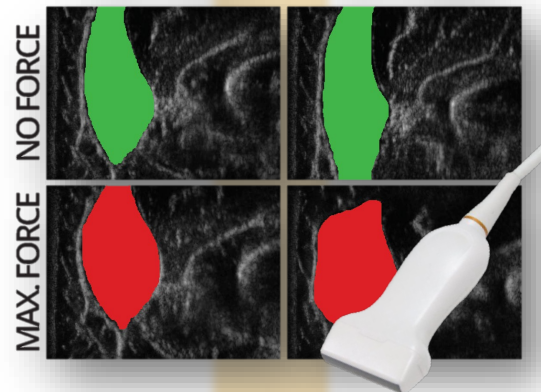
Muscle Output
Force

$$\begin{aligned} F_m &= f(a) \\ &= g^{-1}(D) \\ &= h^{-1}(V) \end{aligned}$$

Muscle Deformation

$$D = g(F_m)$$

$$\theta = 25^\circ \quad \theta = 69^\circ$$



via **ultrasound**

Muscle Vibration

$$V = h(F_m)$$

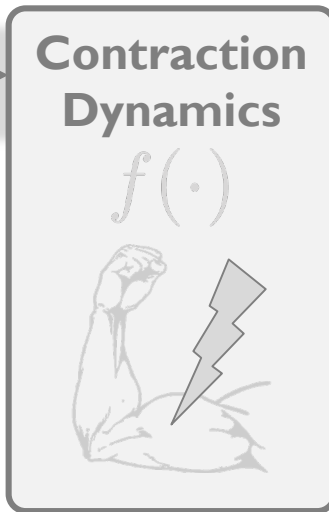


via **acoustic myography (AMG)**

Both deformation and vibration are **mechanical signals**, allowing for measurement of muscle force **without considering the neurological feedback loop**. (Until we want to explicitly study it!)

Muscle Force Inference: Our Approach

Neurological
Activation
 a
via **electro-
myography
(EMG)**



Deformation
Dynamics
 $g(\cdot)$

Vibration
Dynamics
 $h(\cdot)$

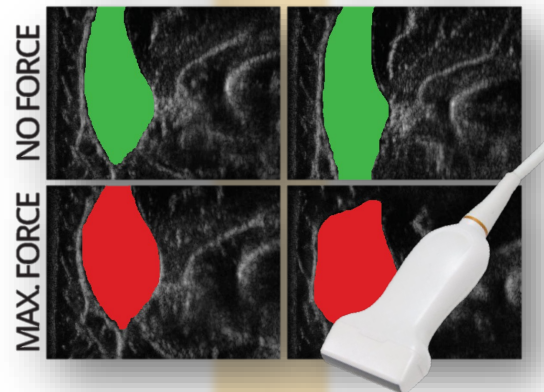
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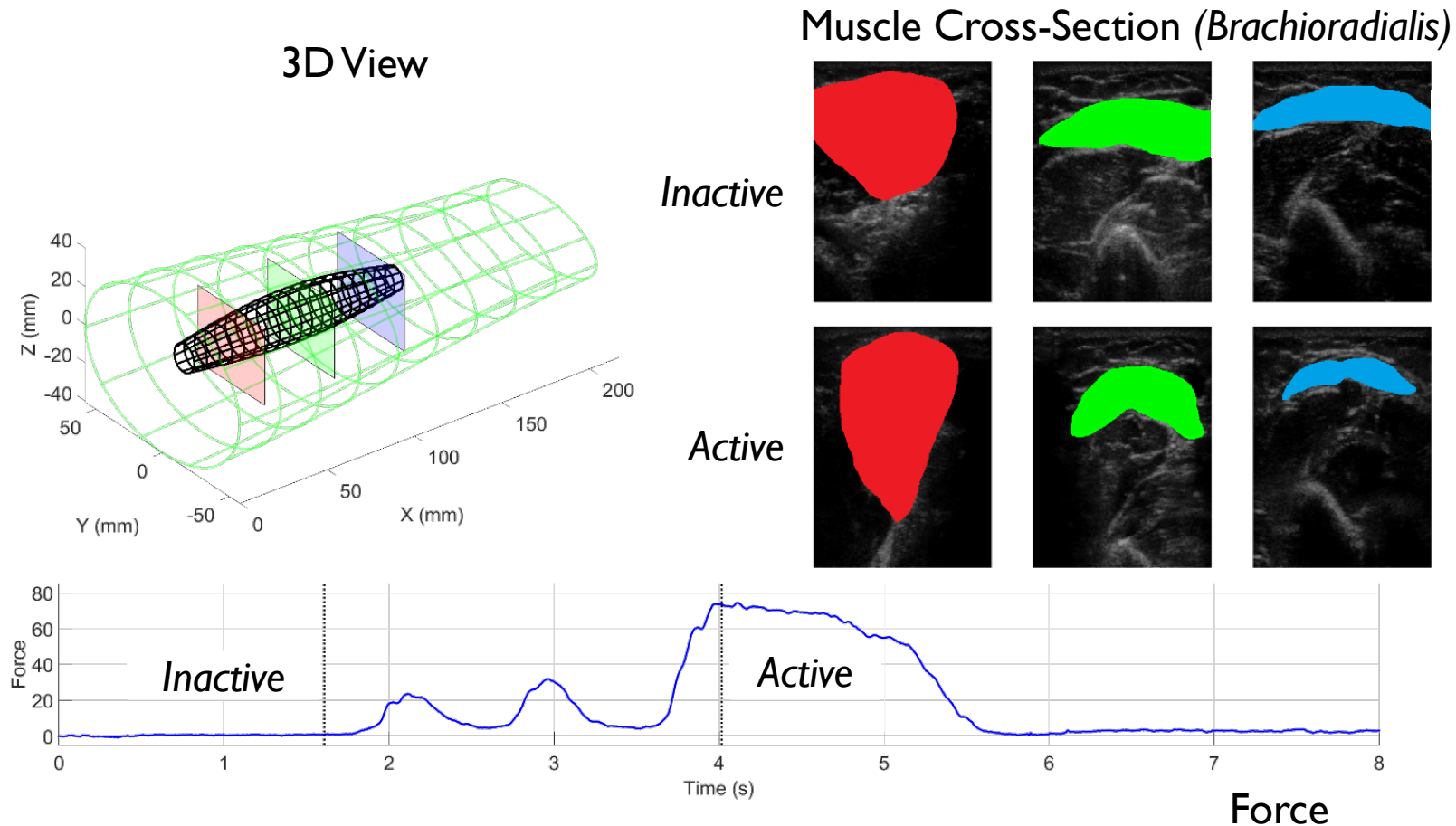
via **acoustic myography (AMG)**

Both deformation and vibration are **mechanical signals**, allowing for measurement of muscle force **without considering the neurological feedback loop**. (Until we want to explicitly study it!)

Deformation signal is **highly localized!**

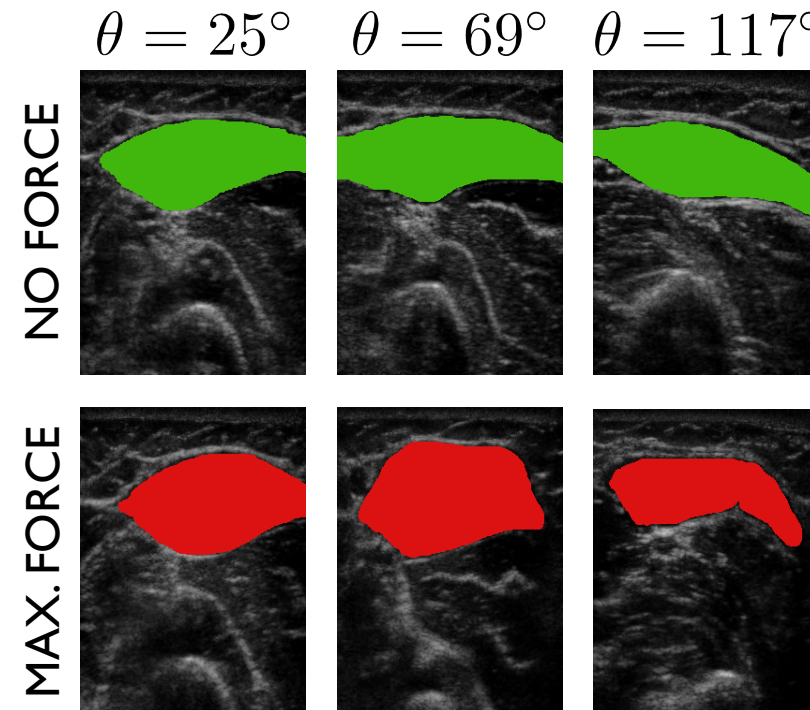
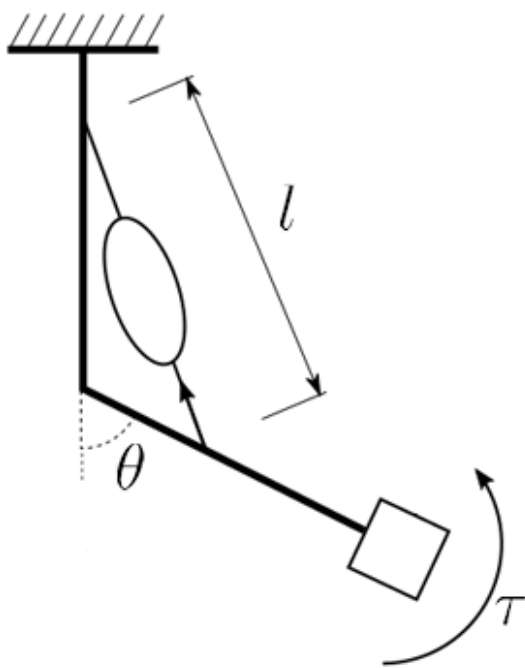
Deformation Modeling Challenges

I. Observed deformation **varies substantially with sensor location**.



Deformation Modeling Challenges

1. Observed deformation **varies substantially with sensor location**.
2. Deformation occurs under changes in both **kinematic configuration** and **force output**.



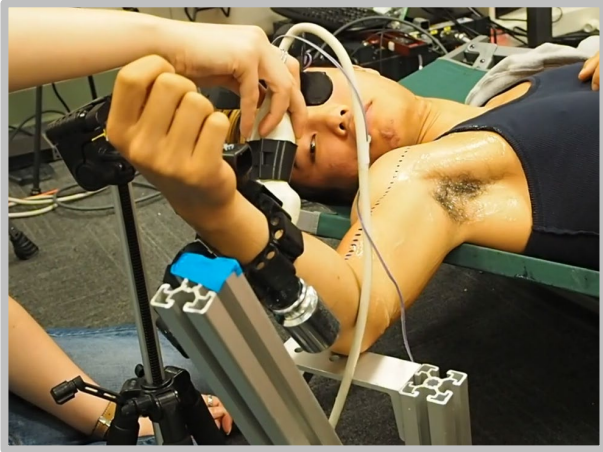
Deformation Modeling Challenges

1. Observed deformation **varies substantially** with **sensor location**.
2. Deformation occurs under changes in both **kinematic configuration** and **force output**.

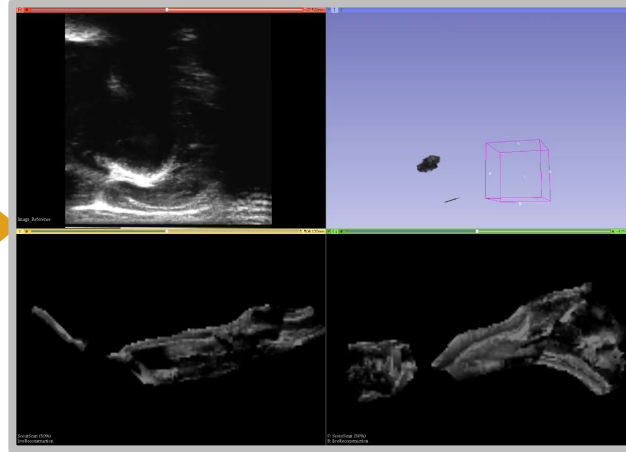
To build a model that can robustly infer muscle force, we need to observe the **entire muscle** under **multiple** (ideally, factorial) **joint positions** and **loading conditions**.

Approach: Ultrasound + Motion Capture

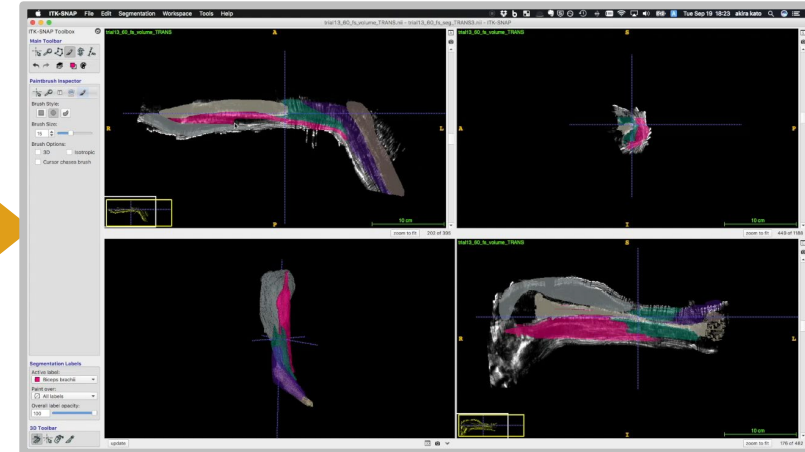
Raw Data Collection
via Ultrasound & Motion Capture



Volumetric Reconstruction
via PLUS Toolkit



Tissue Segmentation
in ITK-SNAP



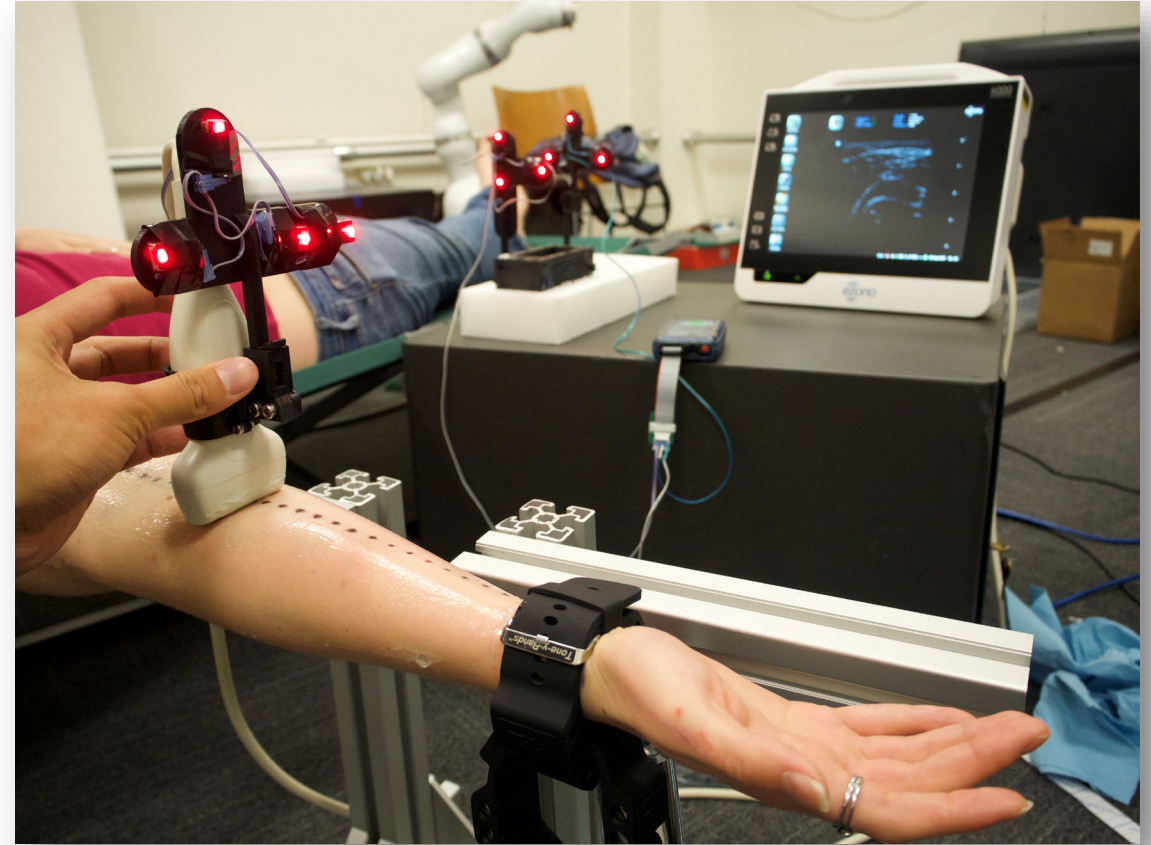
Using **motion capture** to track the **ultrasound probe position**, we can generate **full 3D scans** of the arm under **static conditions**.

Approach: Data Selection

Model target: elbow flexors (*biceps brachii*, *brachialis*, *brachioradialis*)

Data set:

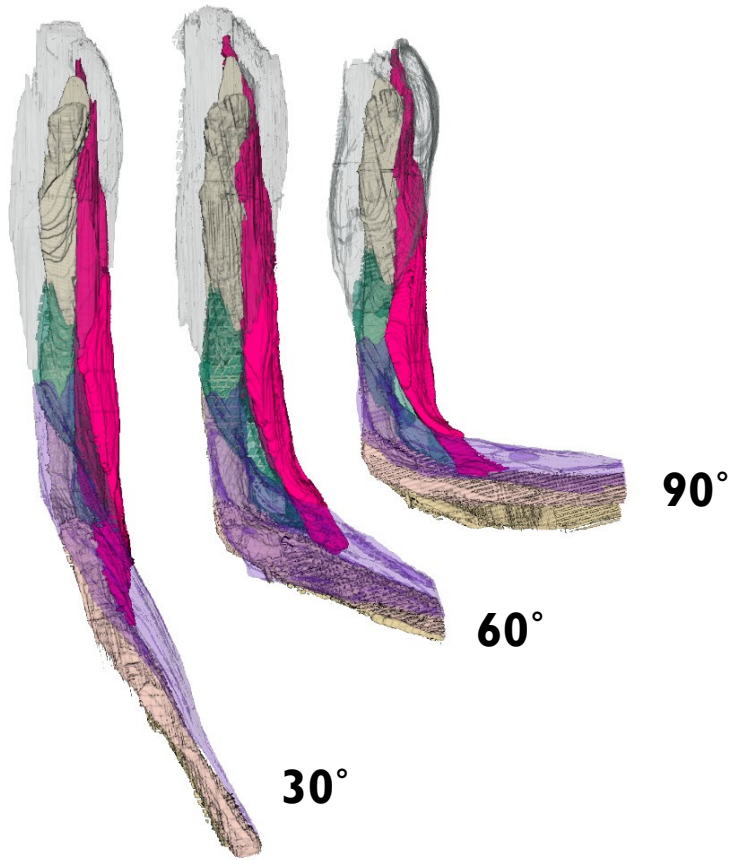
- 3 subjects (1 F, 2 M)
- full arm ultrasound volumetric scan
- 4 elbow flexion angles, 0–90°
- 5 loading conditions
 - **FS**: fully supported
 - **GC**: gravity compensation only
 - **LF**: light wrist weight (~225g)
 - **MF**: medium wrist weight (~725g)
 - **HF**: heavy wrist weight (~950g)



Ultrasound volumetric data collection, HART Lab 2017

Preliminary Results: Qualitative

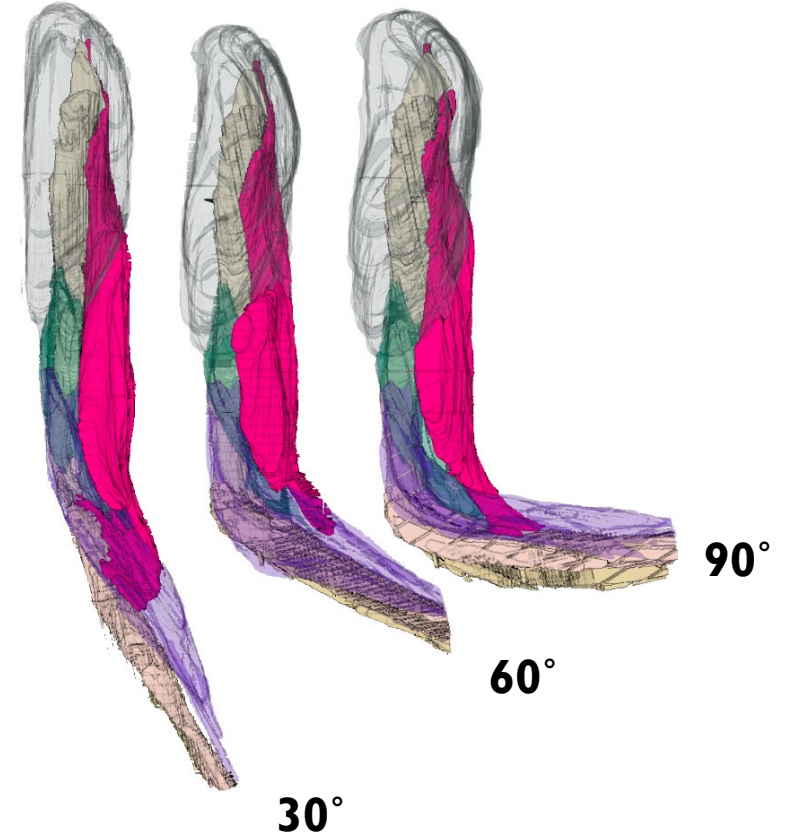
FS
("Fully Supported")



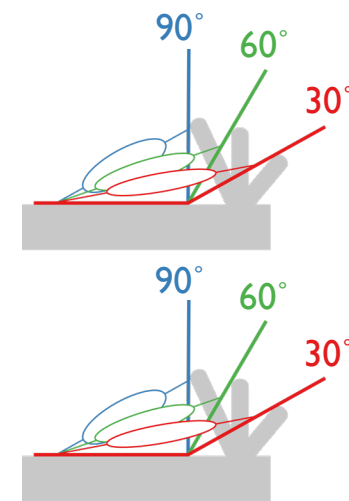
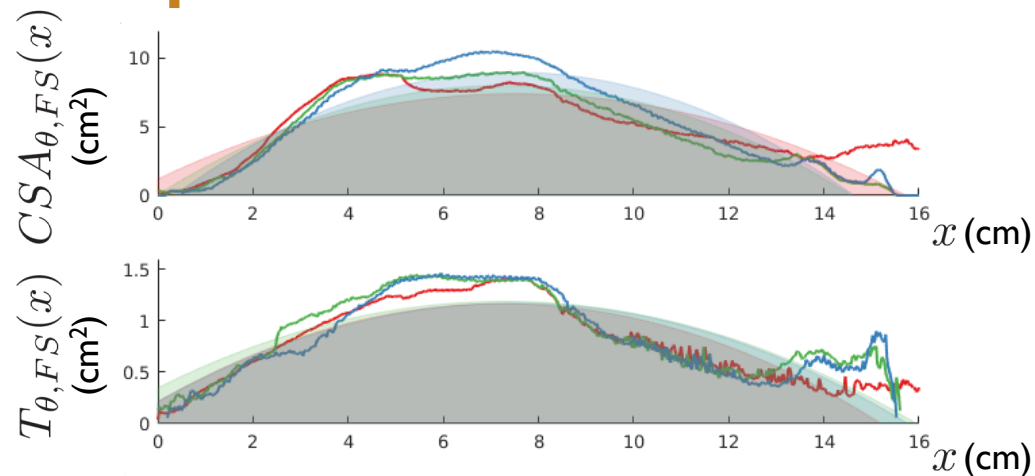
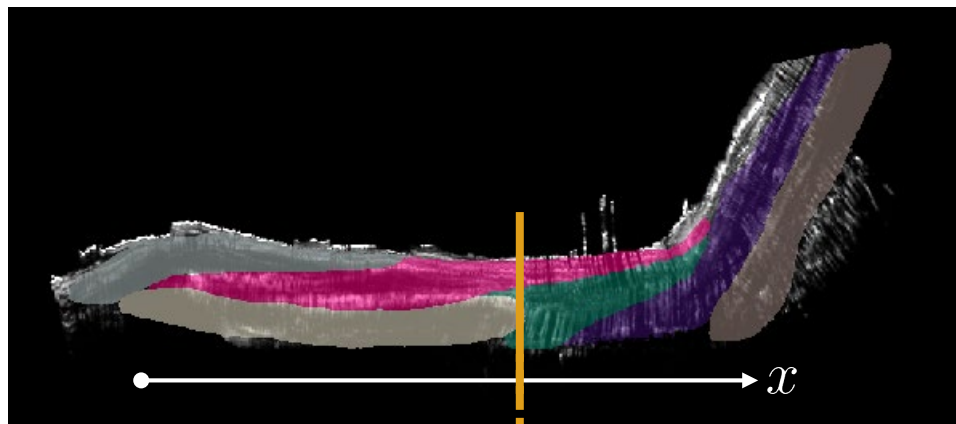
LF
("Low Force")



HF
("High Force")

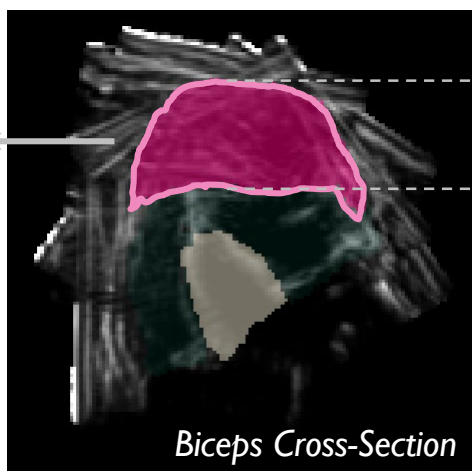
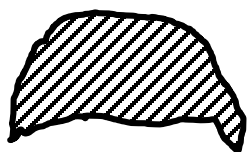


Preliminary Results: Simplest Models



Cross-Sectional Area

$CSA_{\theta,LC}(x)$

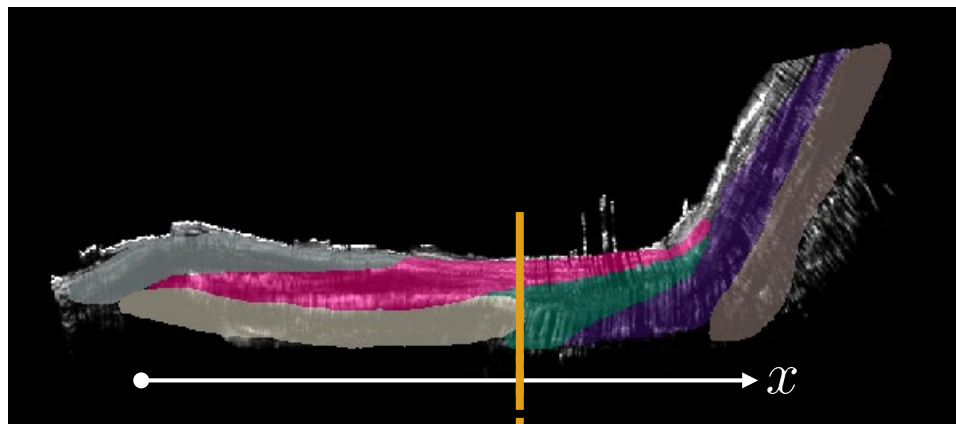


Thickness

$T_{\theta,LC}(x)$

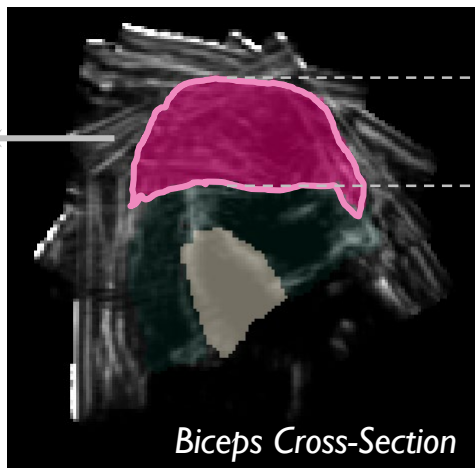
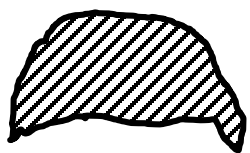
Biceps Cross-Section

Preliminary Results: Simplest Models



Cross-Sectional Area

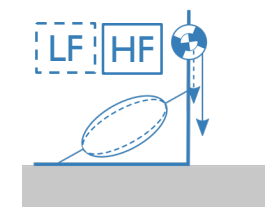
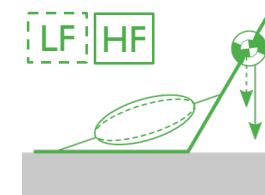
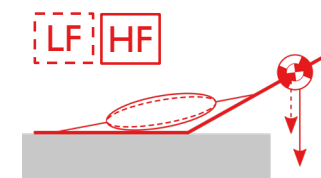
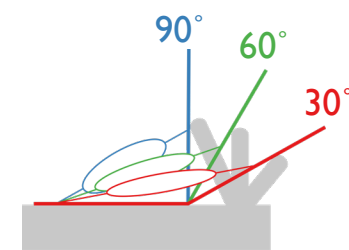
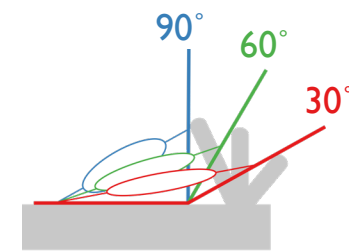
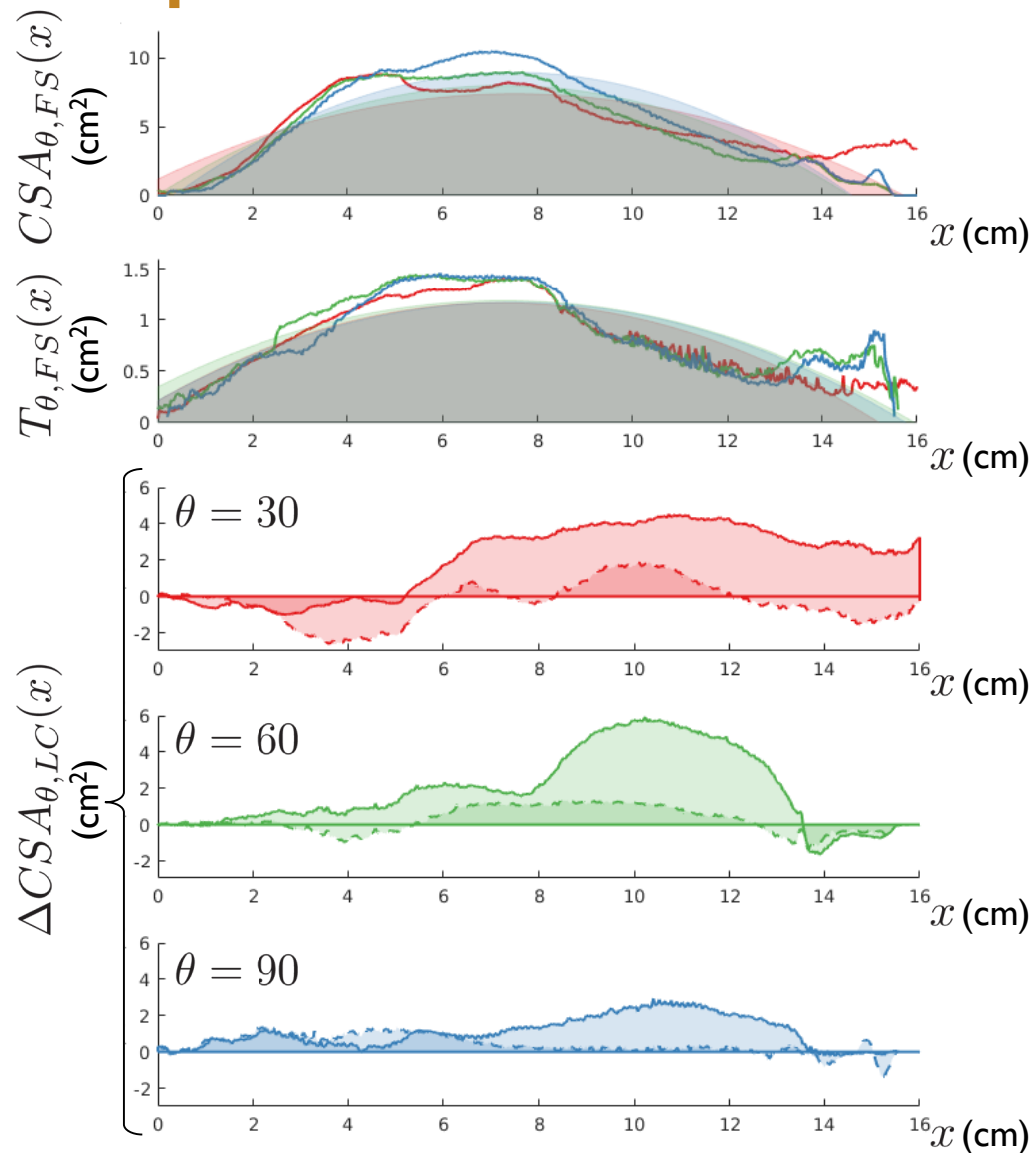
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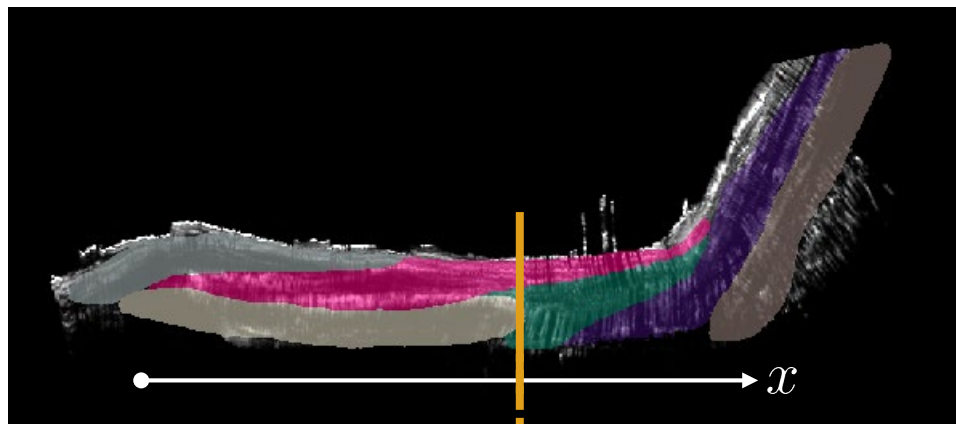
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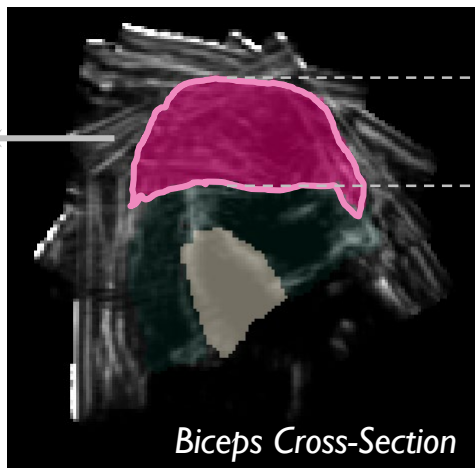
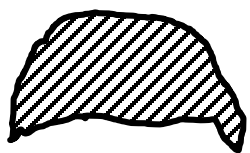


Preliminary Results: Simplest Models



Cross-Sectional Area

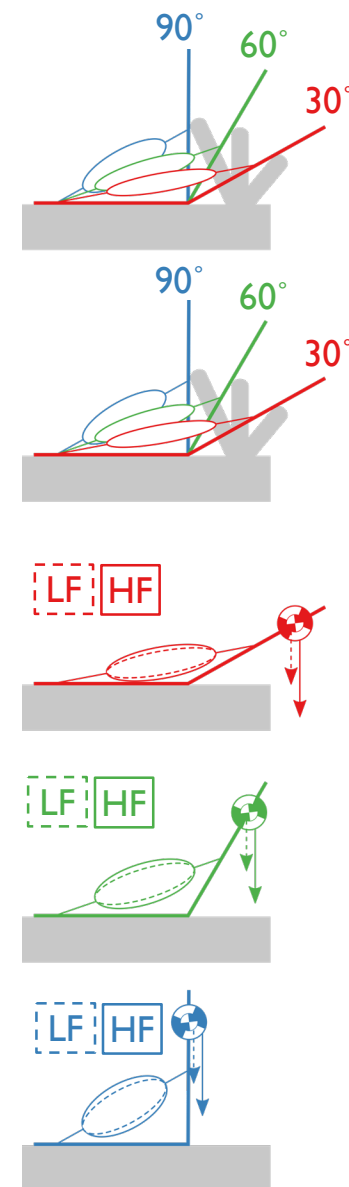
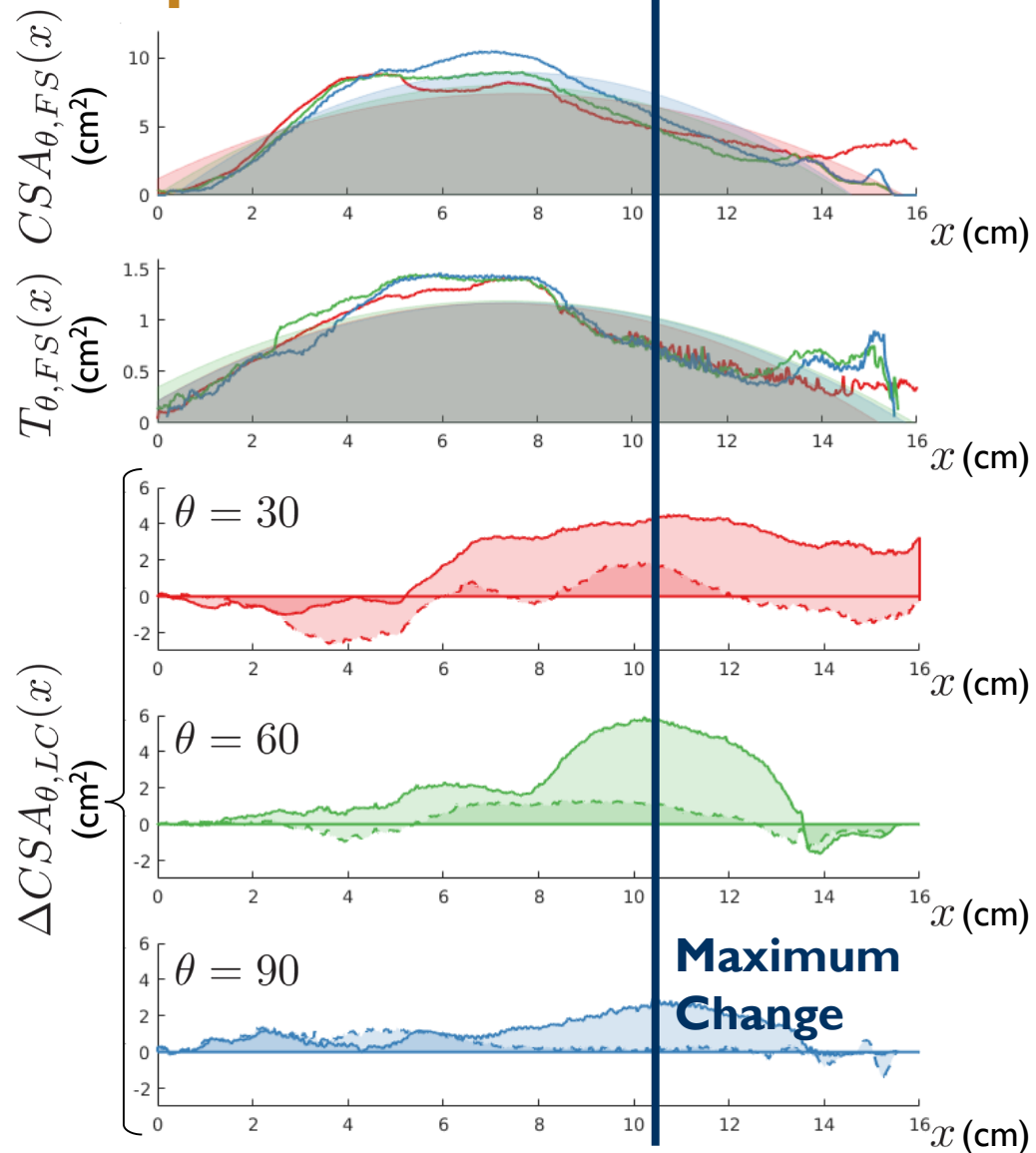
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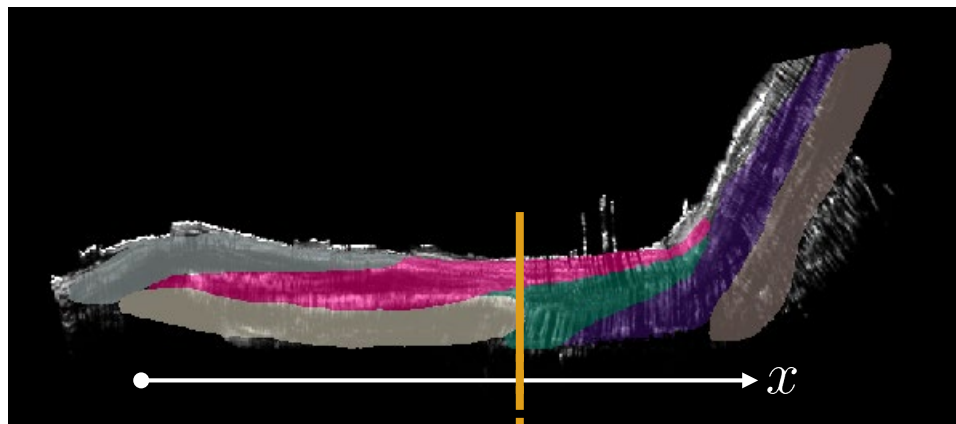
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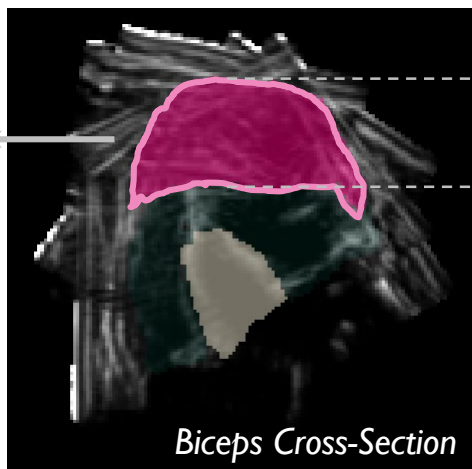
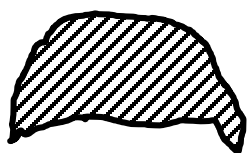


Preliminary Results: Simplest Models

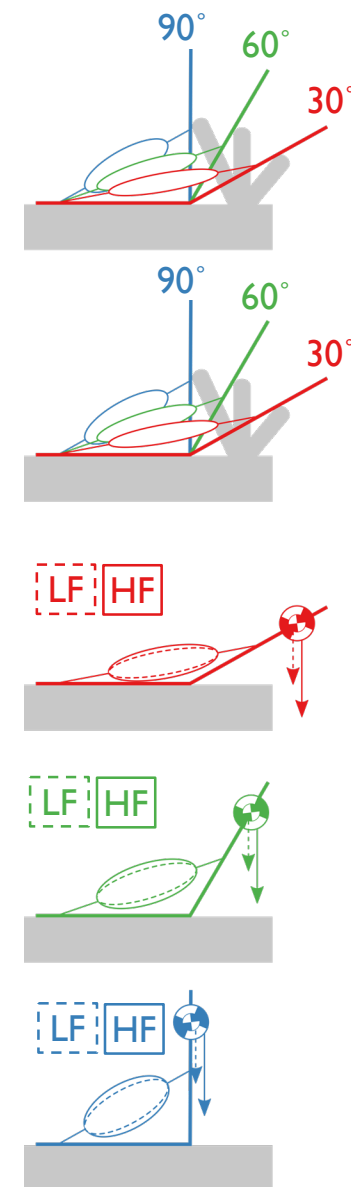
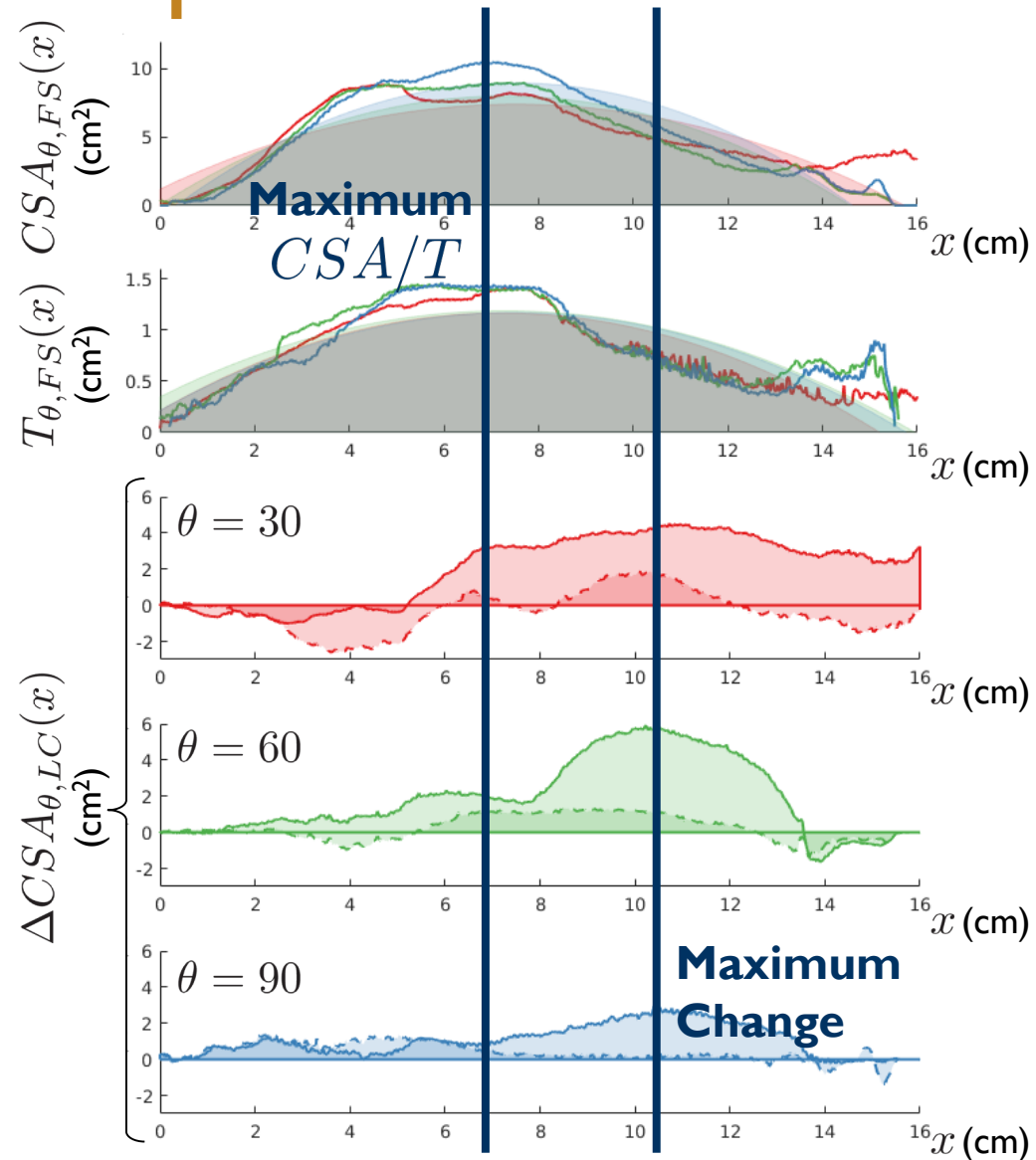


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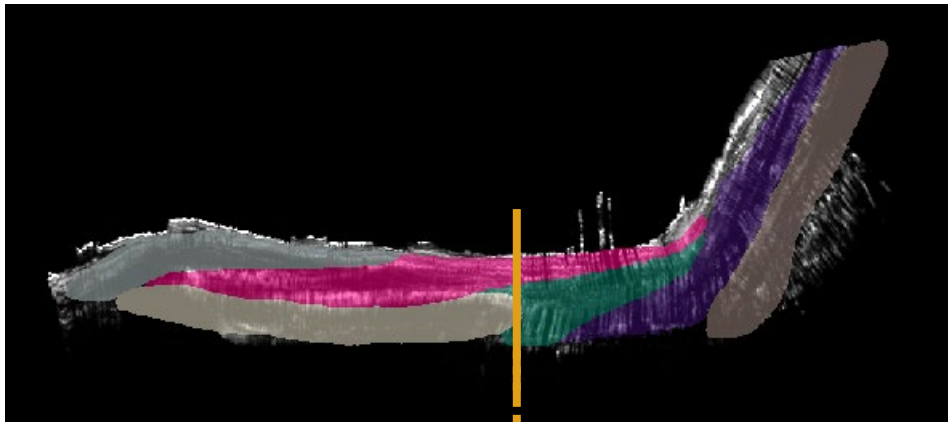
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Thickness
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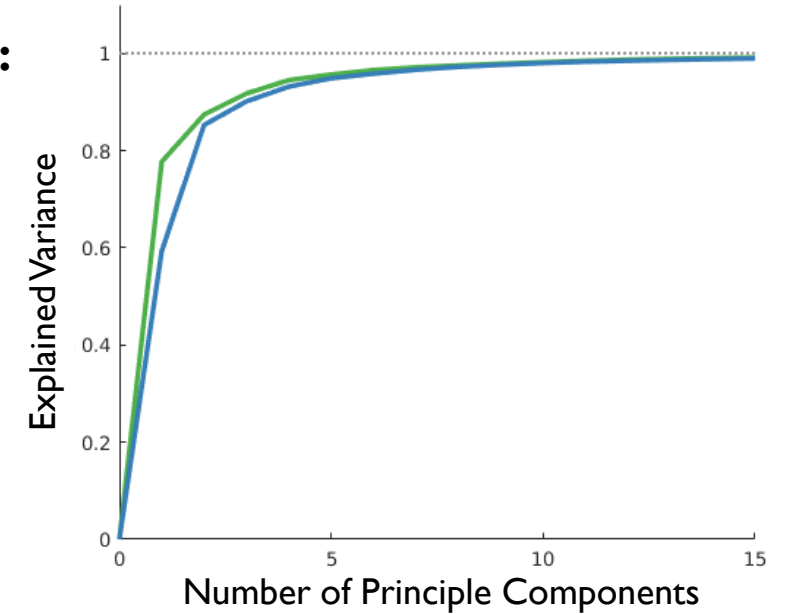


Preliminary Results: Statistical Shape Modeling



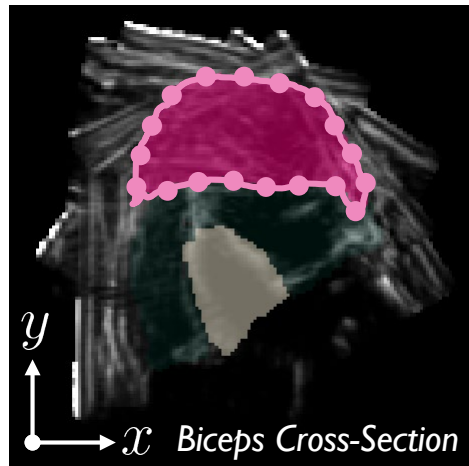
SHAPE DECOMPOSITION :

$$S = \underbrace{\bar{S}}_{\text{mean shape}} + \underbrace{P}_{\text{eigenvectors of covariance}} \underbrace{b}_{\text{weight vector}}$$



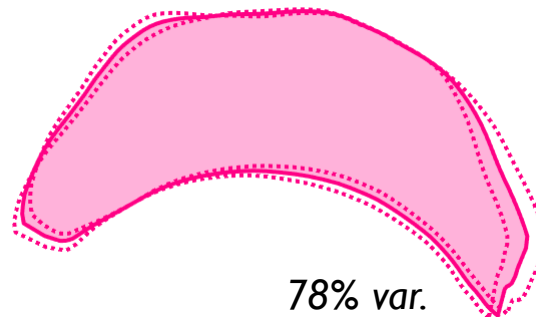
Shape

$$S = \begin{bmatrix} x_1 \\ \vdots \\ x_n \\ y_1 \\ \vdots \\ y_n \end{bmatrix}$$



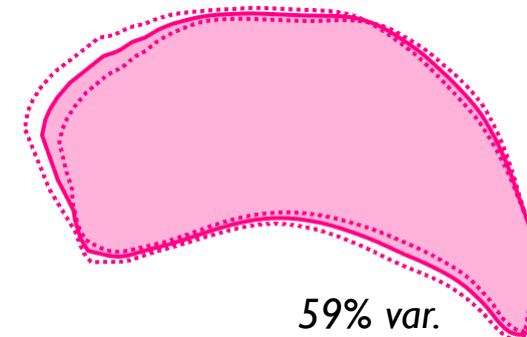
First Shape Modes

No Force, Vary Angle



78% var.

30° Angle, Vary Force



59% var.

Current / Future Work: Big Questions

- **Translational**: If we measure kinematic configuration using other sensors (e.g., motion capture), can we **infer a clean relationship between force and deformation** that can be used as a control signal?
- **Basic**: Can these muscle force measures be used to **build better models of neuromuscular contraction dynamics** and **better interpret {EMG, fMRI, EEG, etc.} signals**?

Current / Future Work: Big Questions

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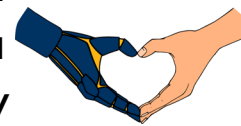
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THANKS TO:

Gregorij Kurillo
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Daniel Ho
Ian McDonald

Yonatan Nozik
Sai Mandava
Chris Mitchell
Thomas Li
David Wang
Sachiko Matsumoto
Nandita Iyer

Stella Seo
Prerana Kiran
Shivani Sharma
Michelle He
Evan Shu
Jason Liu
Aaron Sy



Download the full data set at
hart.berkeley.edu/datasets

Papers

L.A. Hallock, A. Kato, and R. Bajcsy. “Empirical Quantification and Modeling of Muscle Deformation: Toward Ultrasound-Driven Assistive Device Control.” *IEEE International Conference on Robotics and Automation (ICRA)*, 2018.

L.A. Hallock and R. Bajcsy. “A Preliminary Evaluation of Acoustic Myography for Real-Time Muscle Force Inference.” *International Conference of the IEEE Engineering in Medicine and Biology Society (EMBC)*, 2018. (late-breaking report)

L.A. Hallock, R.P. Matthew, S. Seko, and R. Bajcsy. “Sensor-Driven Musculoskeletal Dynamic Modeling.” *International Conference of the IEEE Engineering in Medicine and Biology Society (EMBC)*, 2016. (late-breaking report)

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