

INTRODUCTION

Motivation

- The CNS controls motor tasks using a low-dimensional modular organization of muscle activation (muscle synergies) [1] and some synergies might be shared across different behaviors [2].
- Falls-related injuries due to slip have been serious problems for workers and elderly adults [3].
- Knowledge about slip-related muscle synergies in healthy subjects may help understandings of the motor strategy to recover from slip and could be used as a gauge in diagnosis and rehabilitation.

Objectives

- To compare muscle synergies and their activation levels during normal walking and during slip initiation.

Hypotheses

- Some synergies are shared between normal walking and slip.
- Activation levels of the shared synergies are similar before the slip responses.

METHODS

Subjects

- 11 healthy young adults (6 male, 5 female, age=22-33)

Procedures

- Subjects were instructed to walk on a floor with four force plates embedded (Fig. 1).
- Right feet were ensured to hit first and third force plates.
- Four normal walking trials preceded an unexpected slip trial.
- To induce unexpected slip, subjects were informed that the surface would be non-slippery.
- Study was approved by University of Wisconsin-Milwaukee IRB.

Data Collection

- Surface EMGs were measured from 8 leg muscles (Fig. 2)
- Force plate data were collected to identify heel contact.

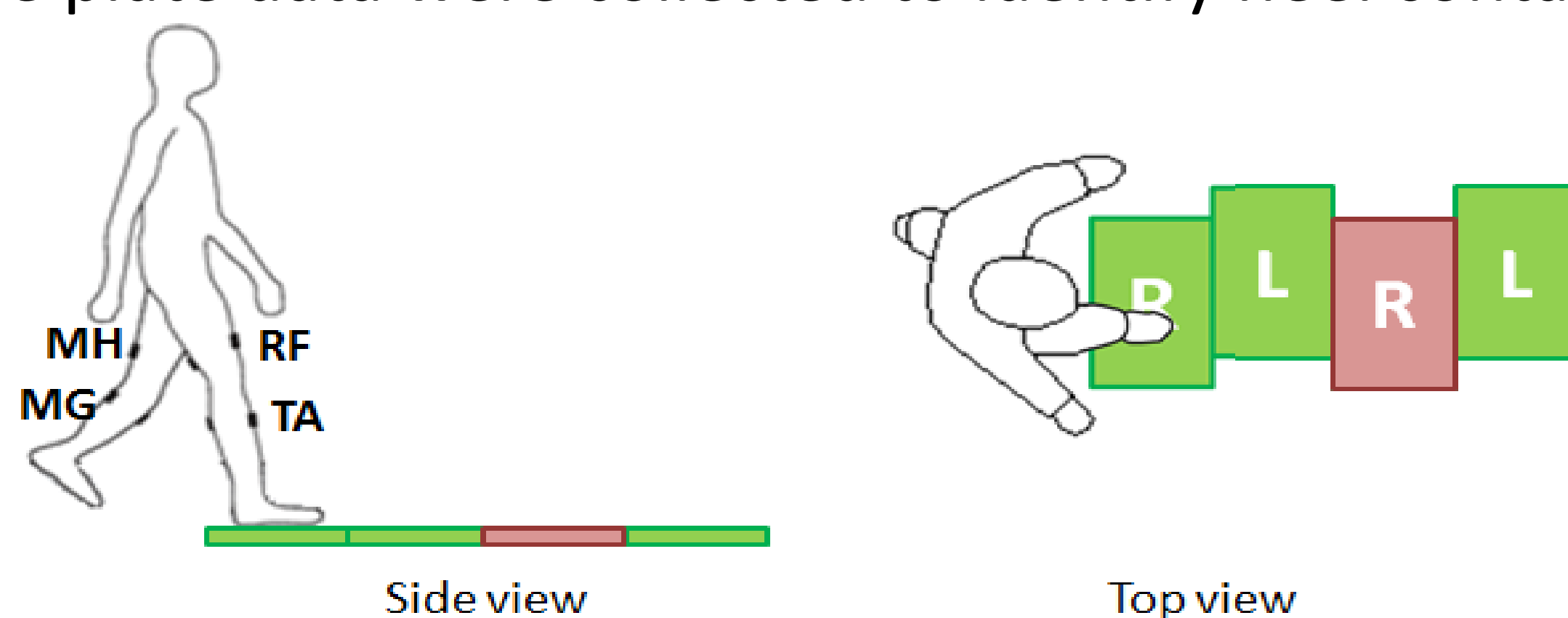


Fig. 1 Force plate setting and foot placements.

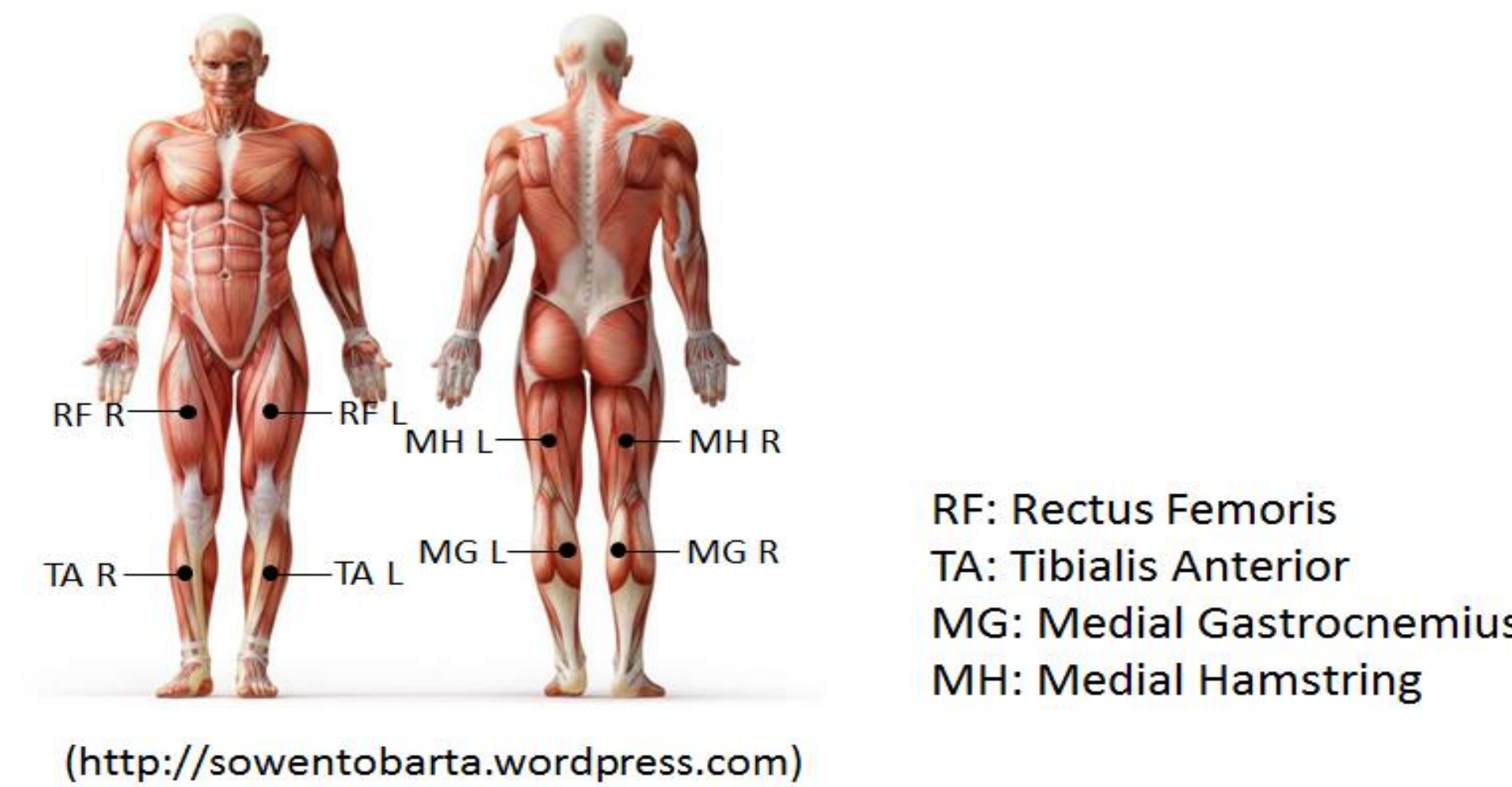


Fig. 2 Leg muscles on which EMG were measured.

Analysis

- Data for the 300 ms interval after heel contact on 3rd force plate were used for data analysis.
- A non-negative matrix factorization technique [4] was used on processed EMG to extract synergies and their coefficients for both conditions.
- Correlation coefficients (r) for all possible combinations of the four normal walking synergies and slip synergies (sixteen “ r ” values for each subject) were calculated.
- One sample t-test was used to check if $r \geq 0.632$ and $r \geq 0.4$ indicating high or marginal similarity between synergies, respectively.
- This procedure was repeated for activation coefficients.

RESULTS

- Four synergies were extracted for both walking and slipping (Fig. 3,4).
- There was one shared synergy (W1) between conditions ($r=0.82$, $p=0.002$) and one marginally shared synergy (W2) ($r=0.62$, $p=0.024$), (Fig. 3).
- Before reaction time of brain (200 ms) [5], a significant correlation for activation levels of the first shared synergy between two tasks was observed ($r=0.84$, $p=0.004$). A marginally strong correlation was observed for the activation of second pair of shared synergies ($r=0.59$, $p=0.026$), (Fig. 4a).
- Two peaks for activation coefficient in response to slip after 200 ms were observed for the shared synergy (Fig. 4a) [5].
- Primary peak (first arrow, Fig. 4a) was to flex knee and dorsiflex ankle, achieved by first shared synergy.
- Secondary peak (second arrow, Fig. 4b) is knee extension and hip flexion, and is achieved by activation of the second shared synergy.
- Task specific synergies were responsible for the propulsive power of the support leg and dorsiflexion on the support leg for normal walking (W3,4 walk Fig. 3 b), while for the slip, their function is to stabilize the leading foot and create a dorsiflexion on the support leg (W3,4 slip Fig. 3b).

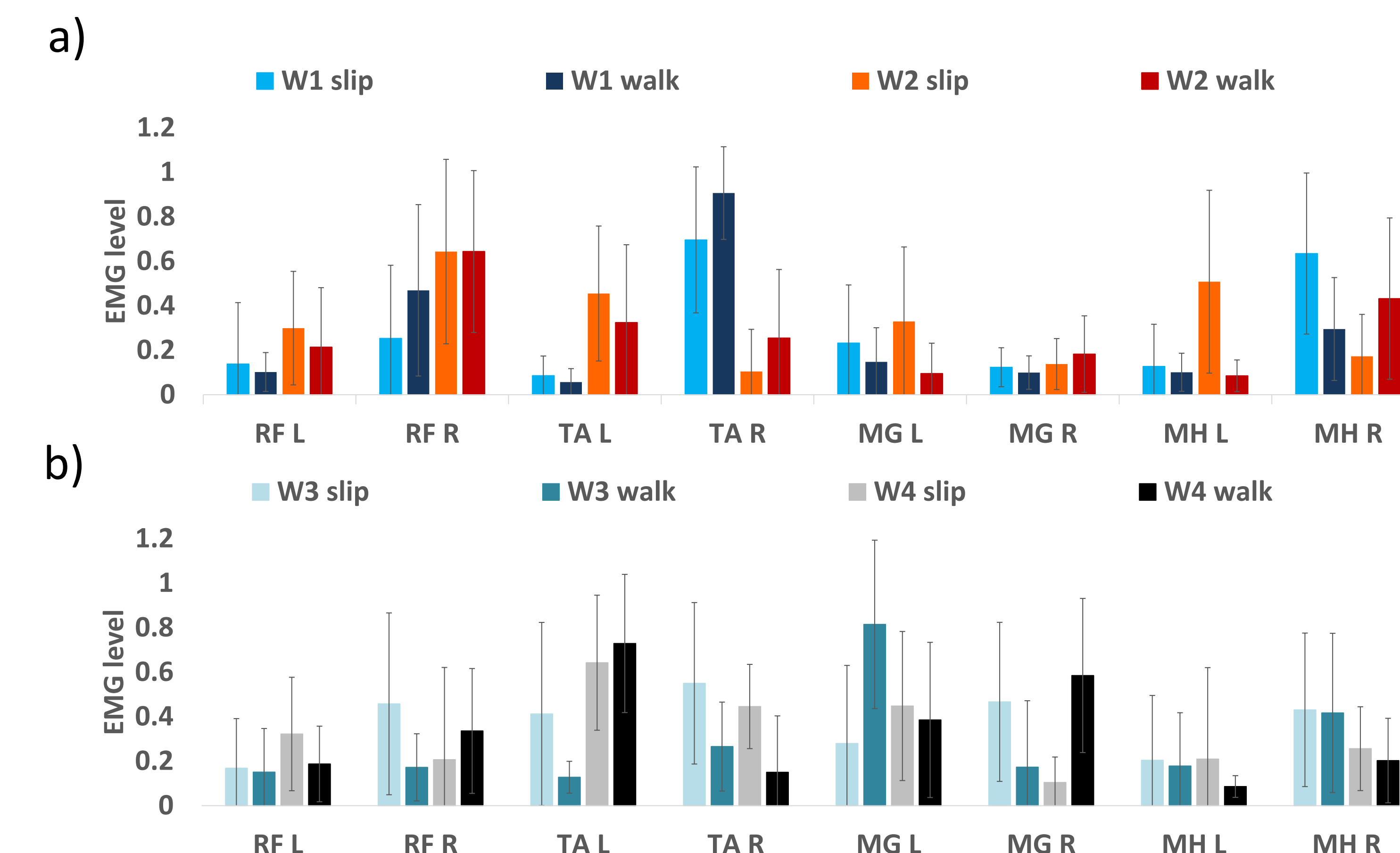


Fig. 3 Shared Synergies (a) and task-specific (non-shared) synergies (b) between conditions. Error bars are equal to one standard deviation. Different colors show synergies

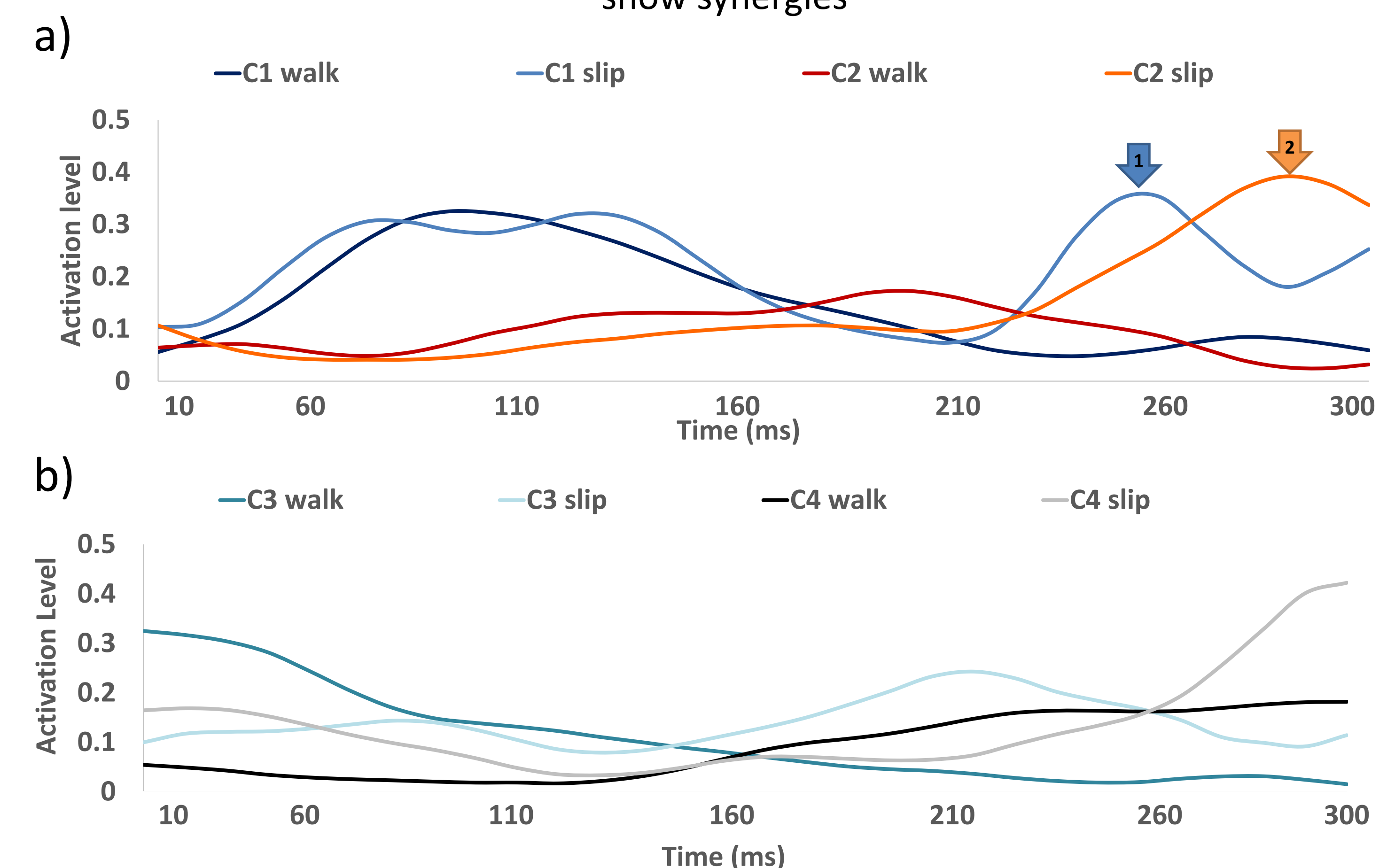


Fig. 4 Activation coefficients for shared (a) and task-specific (b) synergies. Each time step stands for 10 ms.

CONCLUSION

- Two shared and two task specific synergies were found between normal walking and slip condition.
- The activation levels of the shared synergies match among conditions before reaction of the brain.
- Future studies can further investigate subjects based on severity of the slip to identify the causes.

References

- [1] d'Avella A, et al. *Nature neuroscience* **6**, 300-308, 2003.
- [2] d'Avella A, et al. *PNAS* **102**, 3076-3081, 2005.
- [3] Beschoner et al., *IE Occ Ergo and Hum Fact*, 1(1), p31-37, 2013
- [4] Ting LH, et al. *J Neurophysiology* **93**, 609-613, 2005.
- [5] Chambers AJ, et al. *Gait and Posture* **25**, 565-572, 2007