

# wb2432 Rehabilitation Robotics

Dick Plettenburg Richard van der Linde

3mE, BMechE



#### **This lecture**

#### **CONTENT**

- Introduction & definitions
- Robot control schemes
- Identification & diagnostics robots
- Therapy robots
- Assistive robots
- Prosthetics
- The future of rehabilitation robots

Video: ARM

Part 1

Part 2

Part 3

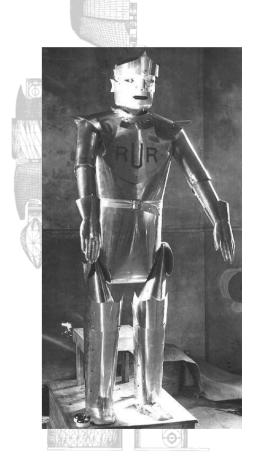


#### Definition of the word *robot*

robota [Czech], play of Karel Capec 1921 means 'work', or 'forced workers', or 'slaves'

#### **Dictionary:**

- 1. A mechanical device that sometimes resembles a human being and is capable of performing a variety of often complex human tasks on command or by being programmed in advance.
- 2. A machine or device that operates automatically or by remote control.
- 3. A person who works mechanically without original thought, especially one who responds automatically to the commands of others.

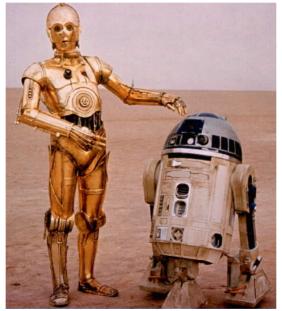




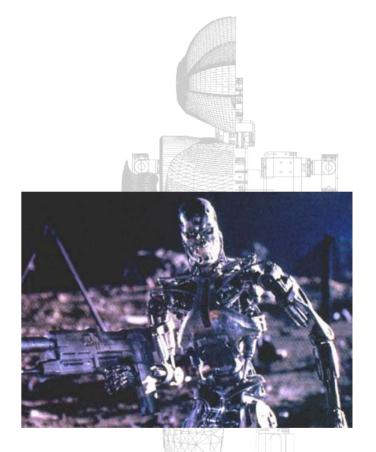
#### **Fiction robots**



1956, Forbidden Planet

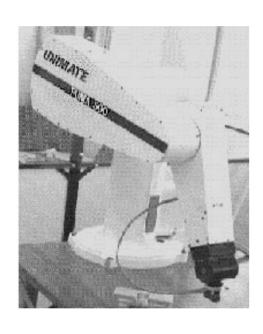


1977, Star Wars



1999, Terminator





1961, first "real" robot

The first industrial robot, called Unimate, GM factory in New Jersey

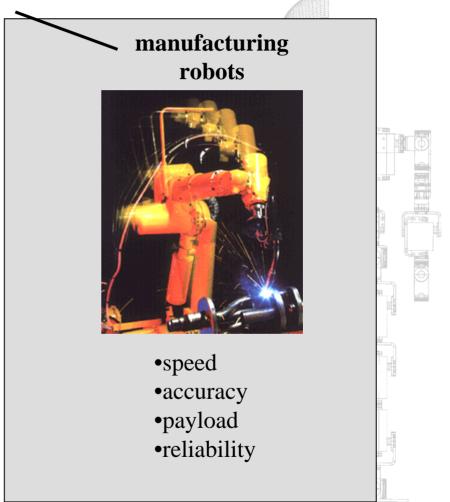


**1970-1999** over 1.100.000 industrial robots installed

**NO human interaction !!!** 









"Service robots are robots which operate semi of fully autonomously to perform services useful to the well-being of humans and equipment, excluding manufacturing operations" (World Robotics 2000, The Int. Fed. of Rob., United Nations)

#### example application areas:

- cleaning robots (tank, floor, window, pipes, etc.)
- inspection robots (power plants, nuclear, etc.)
- domestic robots (vacuum, lawn, etc.)
- medical robots (surgical assistance, equipment holder)
- assistive robots (for disabled persons)
- entertainment



#### Robotics covers an extensive field of research

(sessions on ICRA 2000, San Francisco, USA)

- path planning
- •mapping and localization
- •grasping and manipulation
- •kinematics
- •mechanisms
- •architectures
- micro robots
- •manufacturing system design
- •space robots and rovers
- •autonomous robots
- •space and underwater robots
- •range sensing
- part feeding and fixing
- •rehabilitation robots
- •assembly and motion planning
- •environmental modeling

- •flexible robots
- robot control
- •dexterous manipulation
- robot learning
- •novel transmission methods
- •surgical robots
- •target tracking
- •redundant manipulators
- •mobile robotics
- •reconfigurable robots
- •nonholonomic motion planning
- •neural network systems
- •cooperative robots
- mechatronics
- •parallel manipulators
- •tele-operation

- visual servoing
- fuzzy logic systems
- •humanoids
- navigation and mapping
- •haptic interfaces
- •legged locomotion
- rapid prototyping
- vision based control
- •mems
- •stiffness an compliance
- actuators
- •collision detection
- •novel sensing techniques
- •dynamics and optimization
- biped robots
- •flexible assembly systems



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- •flexible assembly systems



#### Definition of the word rehabilitation

"The entirety of medical and social means, which have the goal to restore the functions of the patients as far as possible"

(Dikke Van Dale)

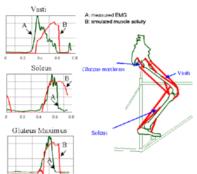
"Rehabilitation robots are service robots which operate semi of fully autonomously to perform services useful to the well-being of disabled humans"

(R.Q. van der Linde, 2003)

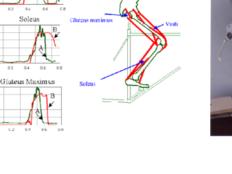


#### 4 functional areas of rehabilitation robots:





identification & diagnostics



therapy assistance





prosthetics





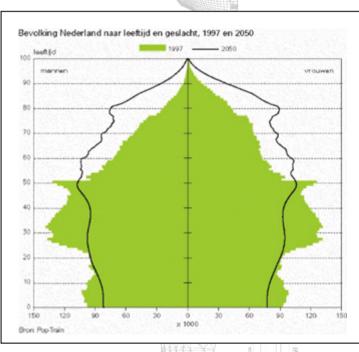
living assistance

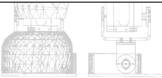


# Why rehabilitation robots?

- We have an increasing need for treatment
  - more elderly people
  - more diseases
- Robot therapy might be effective
  - motivating
  - accurate
  - objective
  - adaptive
- Robot therapy enables home care









# Why NOT rehabilitation robots?

• Because the QALY factor is low

## **QALY** (Quality Adjusted Life Year)

goal: to measure the value quality of life

definition: 1 year of perfect health-life expectancy is worth 1

QALY = quality of life

examples: -4 year life extension \* 0.1 = 0.4 QALY (rehab)

- 2 year life extension \* 1 = 2 QALY (e.g. pace maker)

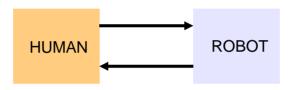
NL: QALY = 25.000 Euro

- Because proven therapy results are required first!
- Because it is complex



## **Technical** issues

Interaction between (disabled) human operator and robot



- what type of motion control is required?
- how to interface with the robot ?
- reliability
- safety



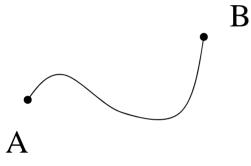




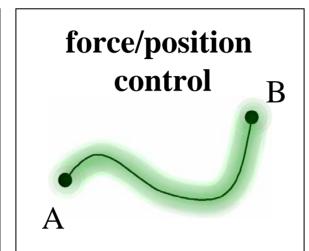


# Types of movement control

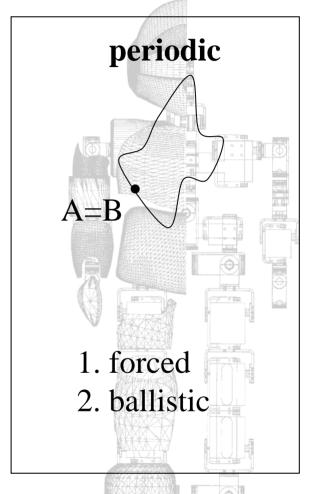
### position control



- 1. position control
- 2. force control



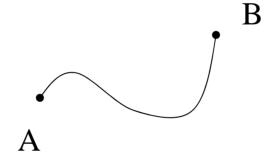
- 1. impedance
- 2. admittance
- 3. intrinsic





# Types of movement control

# position control

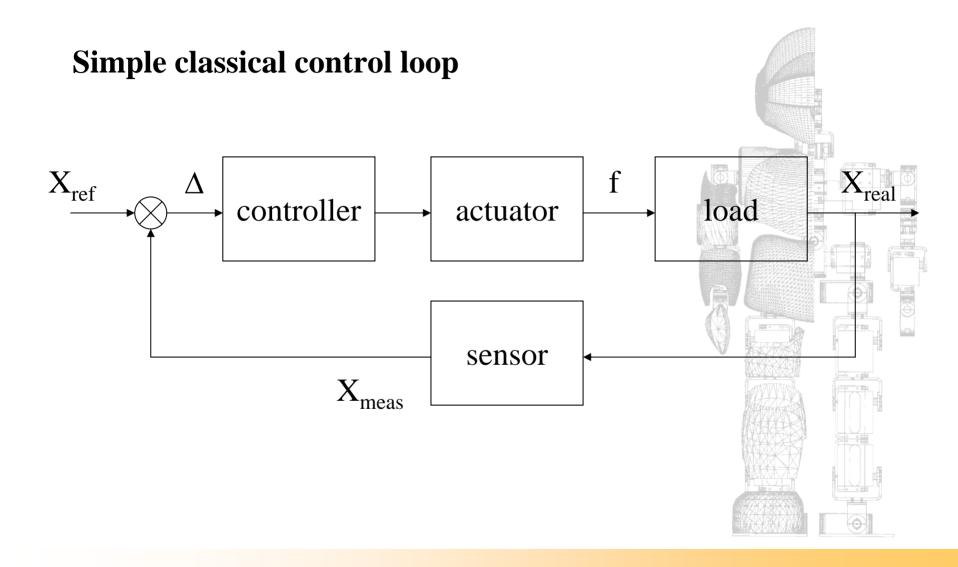


#### When?

•prescribed displacement, e.g. movement of manipulators

•prescribed force, e.g. pinching





κ=damping



#### **Position control**

## **Example: simplest control loop**

suppose 2<sup>nd</sup> order load

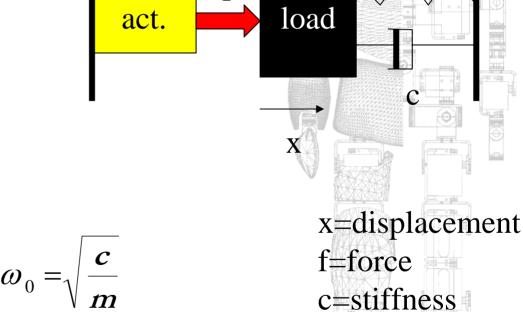
$$m\ddot{x} = f - \kappa \dot{x} - cx$$

rewriting

$$\frac{x}{f} = \frac{1}{ms^2 + \kappa s + c}$$

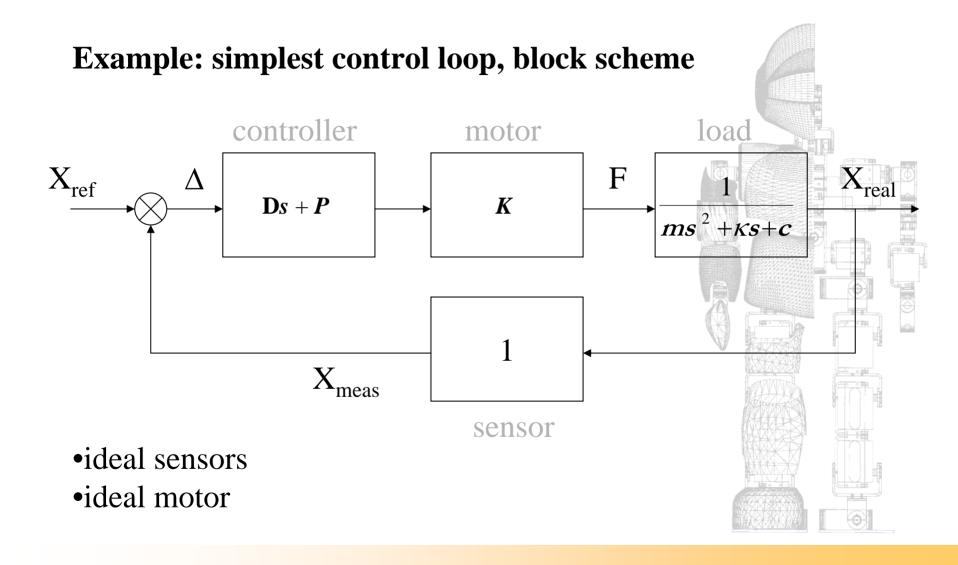
or

$$\frac{\mathbf{x}}{\mathbf{f}} = \frac{1/\mathbf{c}}{\frac{\mathbf{s}^2}{\omega_0^2} + 2\beta \frac{\mathbf{s}}{\omega_0} + 1}$$



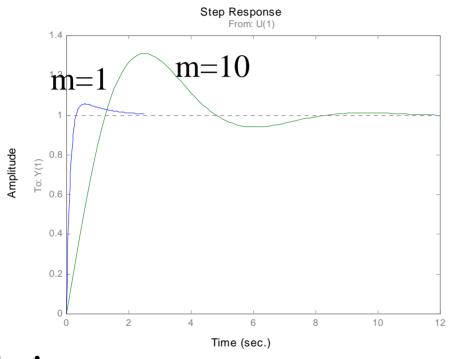
act.







Example: simplest control loop, high & low load



settings:

$$b = 0.3$$

$$C = 0$$

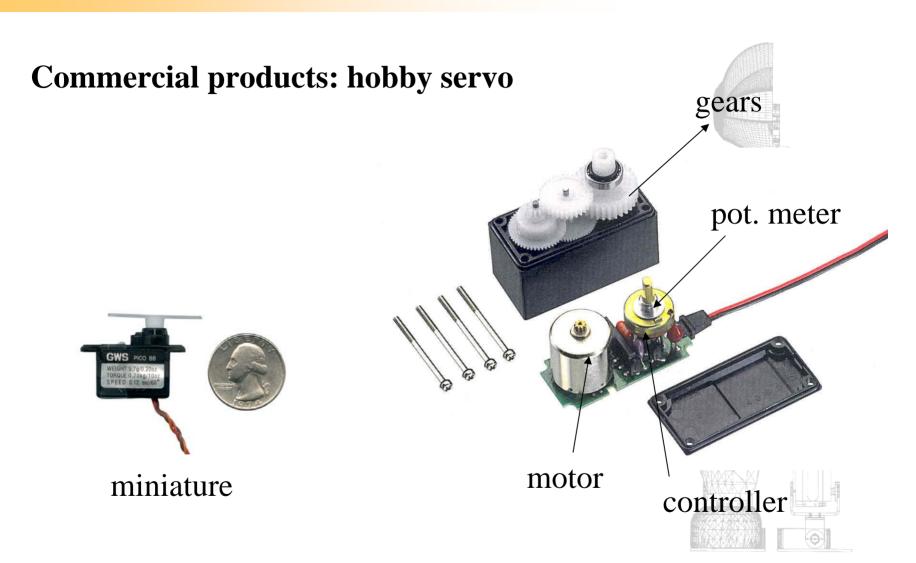
$$P = 10$$

$$D=9$$

#### **Conclusion:**

Safe & optimal control loop settings depend on load!!







## Example projects with hobby servos



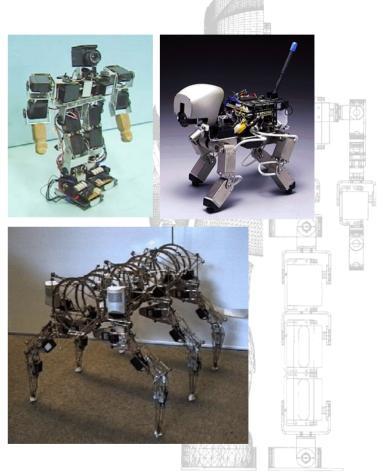
Morph





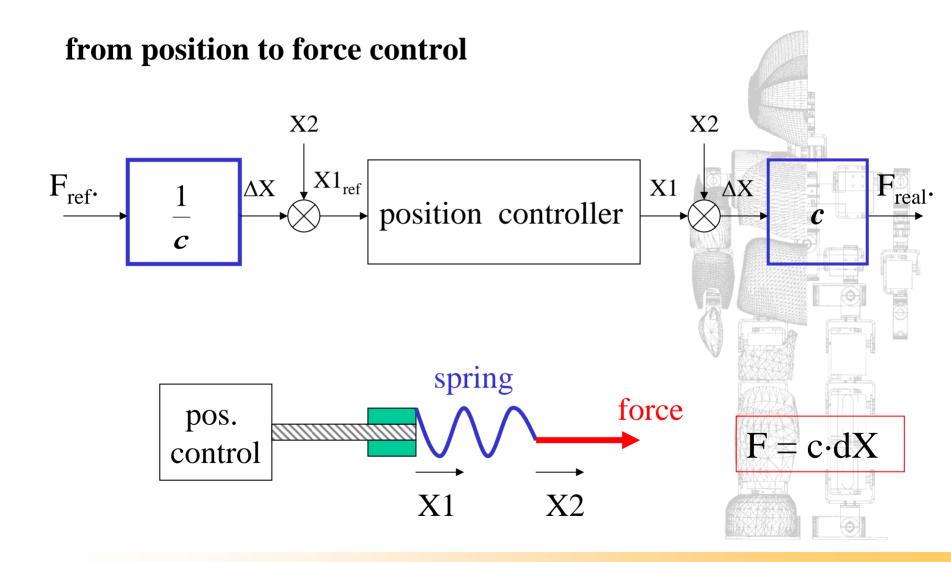


Dappie





#### Force control





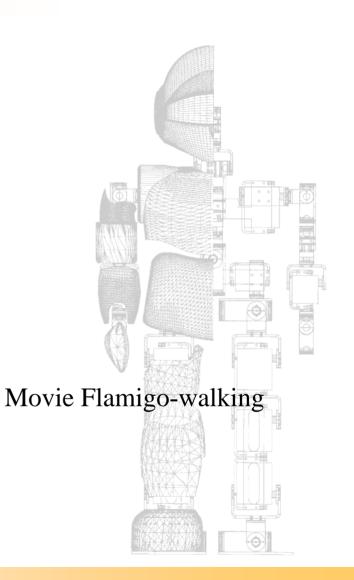
#### **Force control**

## series elastic actuators [Pratt G. 1997]

- -improve shock tolerance
- -use cheap motors
- -use energy storage



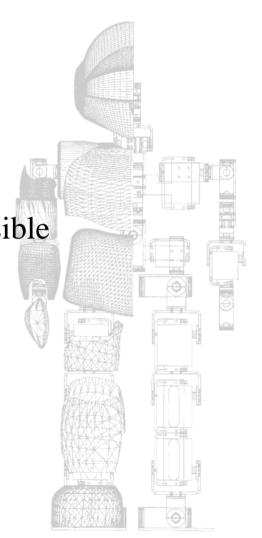






## **Discussion position control loop**

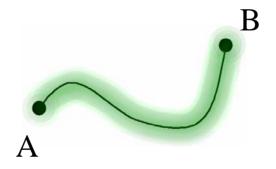
- Simple & effective technique = cheap !!
- Easy extension to trajectory control
- Parallel control loops for multiple DOFs possible
- Most frequently used type of control
- More complex control algorithms possible
- Also usable for speed & force control
- Optimal gain settings depend on the load





# Types of movement control

# force/position control

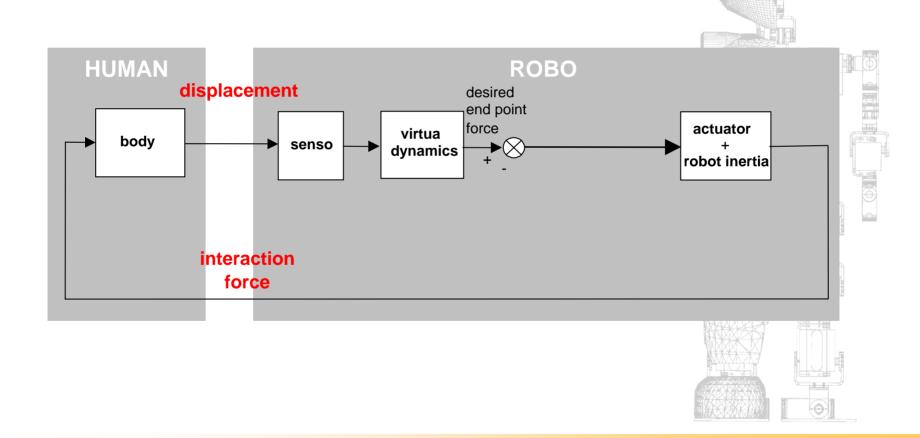


#### When?

•simultaneous control of force & position e.g. reaching, human interaction



## Impedance control loop



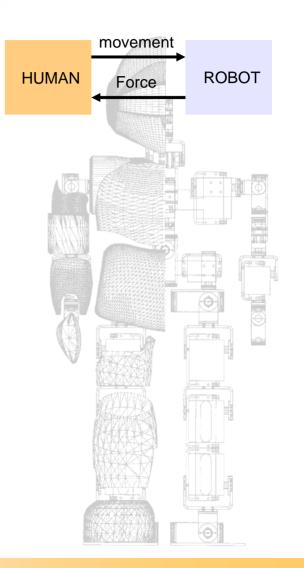


## Discussion impedance control loop

- •no elimination of robot inertia
- •no elimination of mechanical friction
- •measure displacement before giving force
- •no force sensor required

#### conclusion:

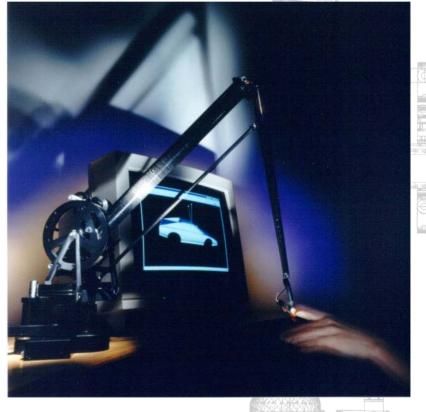
good for soft & light tasks, high safety!



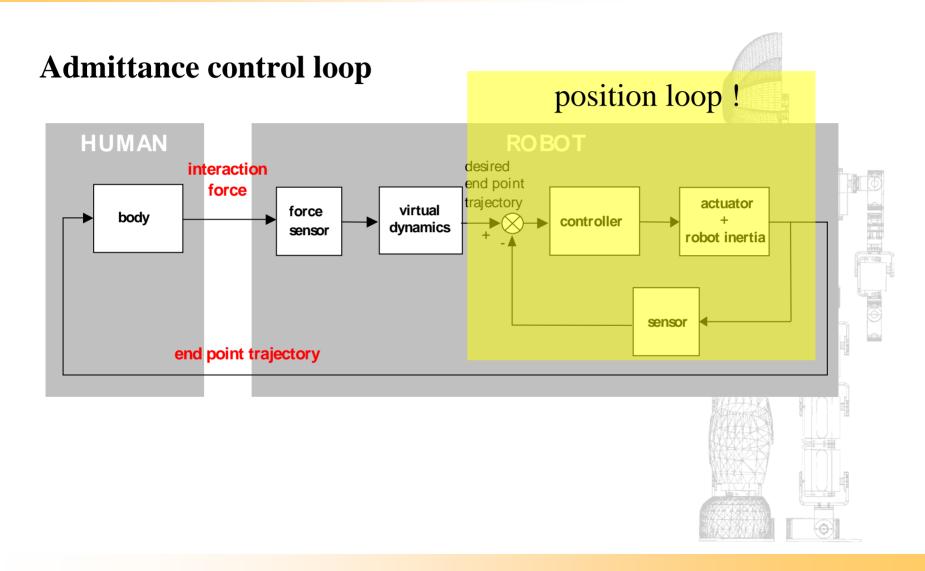


## **Example impedance controlled devices**









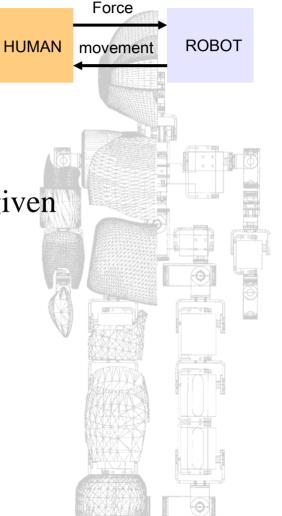


#### Discussion admittance control loop

- •limited elimination of robot mass & inertia
- •measure force change before displacement given
- •force sensor required
- •instability for very high gains

#### conclusion:

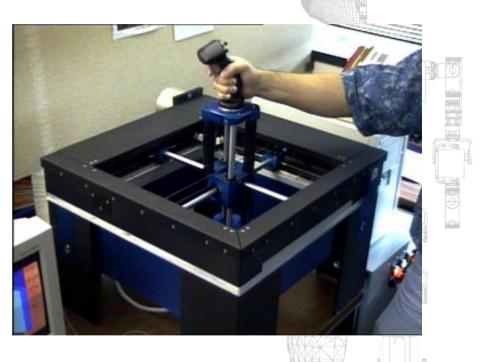
good for hard & heavy tasks, lower safety



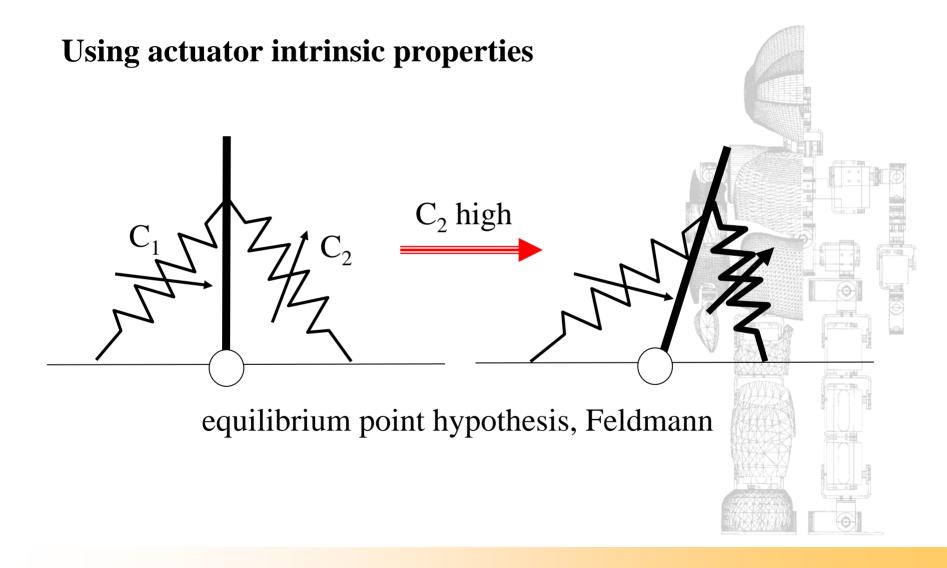


## **Example admittance controlled devices**











## **Example**



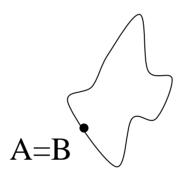


DUT, DBL 6 muscles, 4 DOF



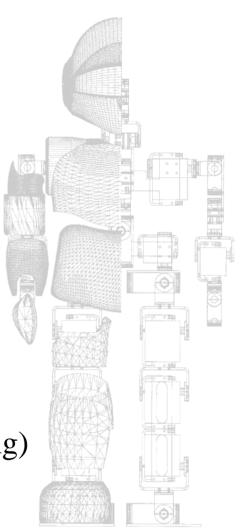
# Types of movement control

# periodic control



When?

•repetitive motion (e.g. walking)

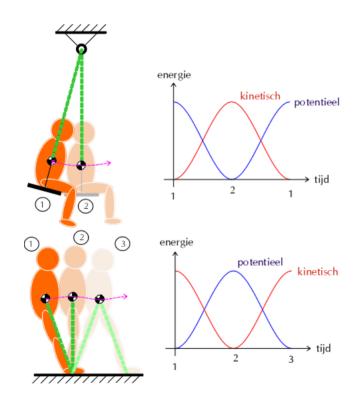


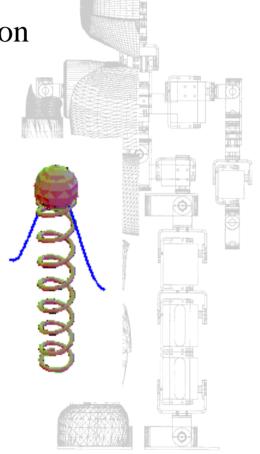


#### **Periodic control**

#### Intrinsic periodic movement

use mass-spring properties to generate oscillation





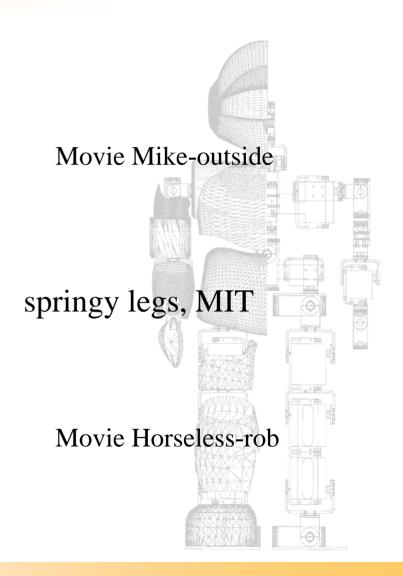


#### **Periodic**

## **Examples**

"passive" walking, DUT

Movie Museonside



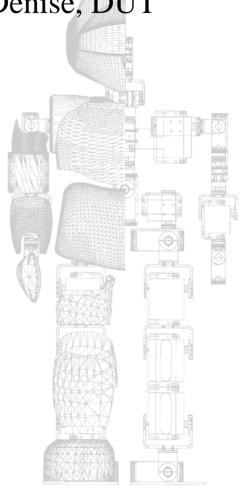


## **Periodic**

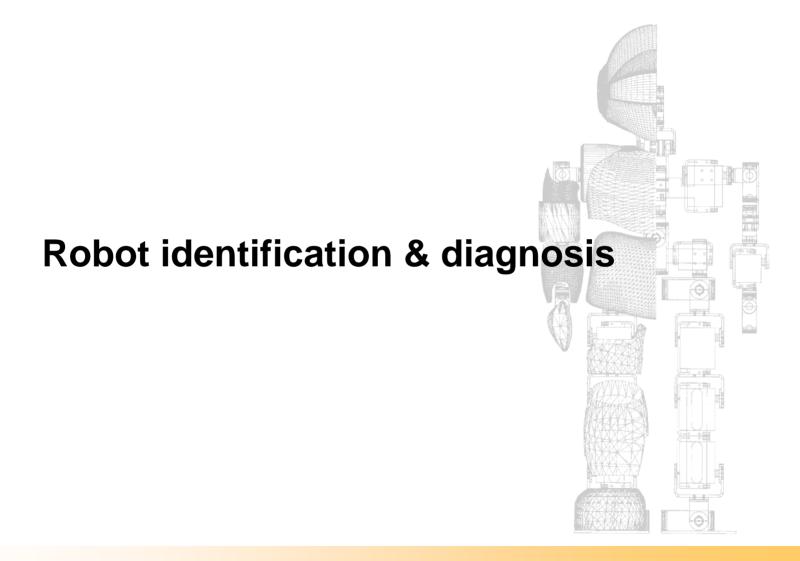


Example: "passive" walking, Denise, DUT

Movie Denise-3







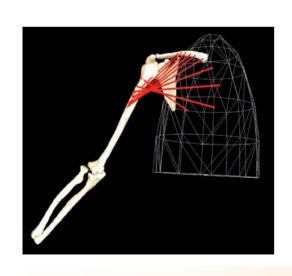


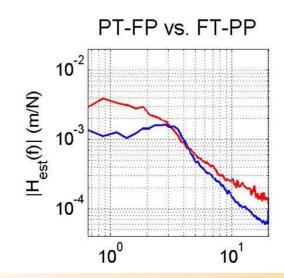
# **Delft University**

## **Delft Shoulder Group**

- •neuro-muscular modeling
- parameter identification by perturbation
- •frequency domain approach
- •new diagnosis tools?

#### Admittance controlled devices



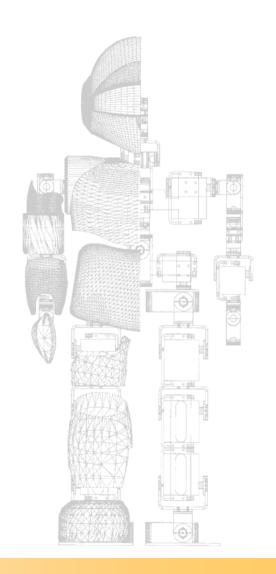








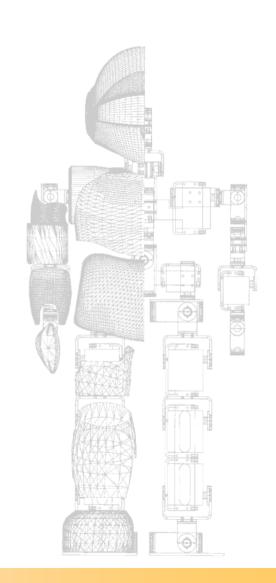
# robot therapy





# Gentle

Movie Gentle





#### Gentle

#### Goal

The aims of GENTLE/S will require established stroke rehabilitation practices to be altered to accommodate machine mediated therapies

#### **Results**

- •8 subjects found therapy motivating
- •no clinical data available yet

#### Admittance controlled device



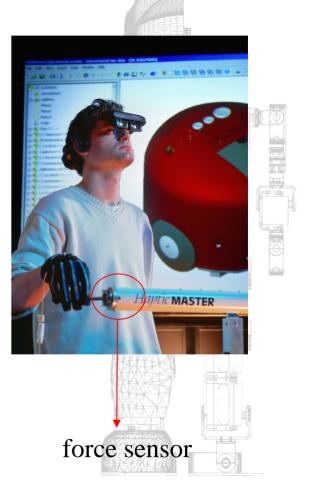
set up (4 DOF)



## Gentle

mechanics Haptic Master







### **MIT MANUS**

#### goal:

The goal of the project is to develop, implement and test a robotic system for physical therapy and neurological rehabilitation.

#### motivation:

- •Some 700,000 US citizens suffer strokes every year
- •Cost of care 30 B\$
- •Of these, some 500,000 require therapy for problems with language, memory or movement.
- The MIT robot focuses on the last of these



set up (3DOF)

### Impedance controlled device



# Rutgers Ankle

#### **Motivation**

The Rutgers ankle is for patients that need ankle and knee rehabilitation, both for orthopedic and stroke diagnoses



interface



6 DOF Steward platform



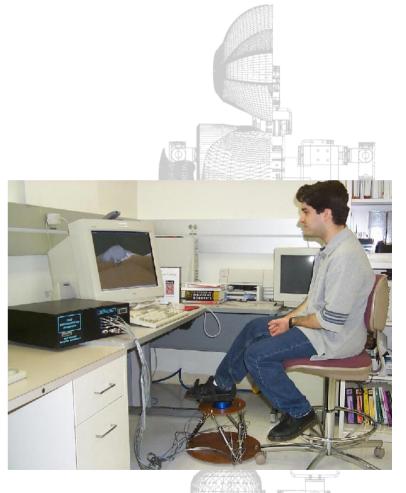
# Rutgers Ankle

## experiments:

3 ankle sprain subjects

#### results:

- •improvements in range of motion
- •improvements in torque generation cap.
- •improvements in ankle work



set up



## Lokomat

#### Hacoma, Zurich

- •commercial device!
- •gait generation (no impedance, just position!)
- •spinal cord injuries
- •mainly research applications

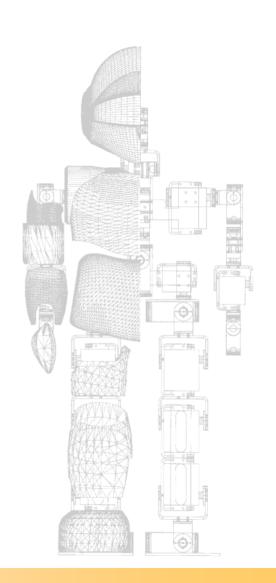






## Lokomat

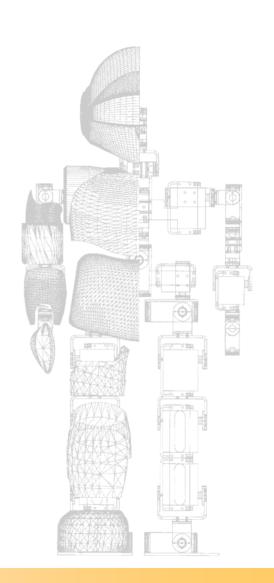
Movie Locomat I





## Lokomat

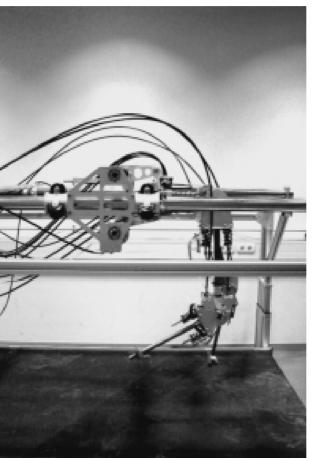
Movie Locomat II

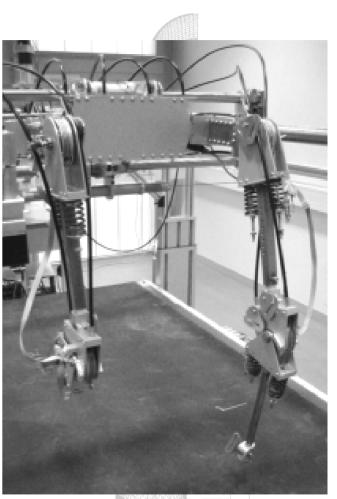




# **Lopes – University of Twente**



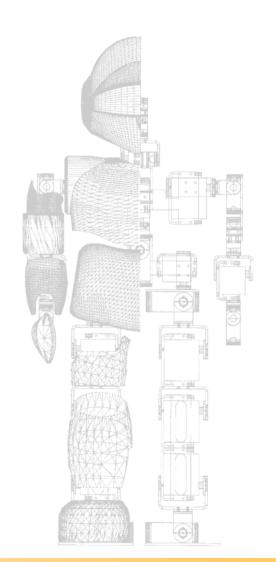






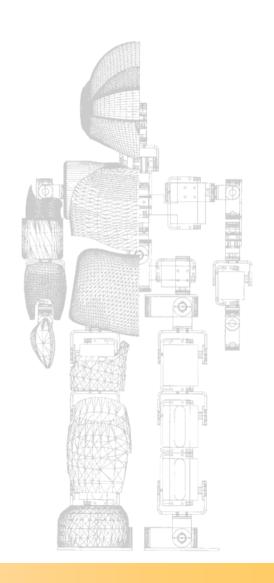
# **Lopes – University of Twente**

Movies Lopes I & II





## assistive robots





### Wheelchair robots

#### **Uses:**

- self care
- cooking
- shopping
- scratching
- ..

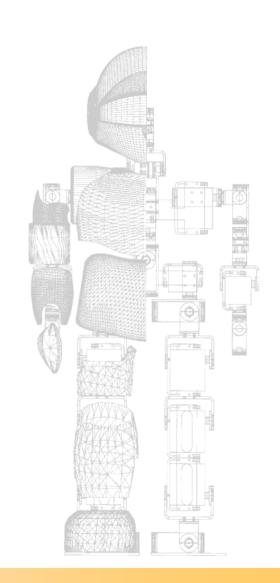
Autonomy!





## Wheelchair robots

Movie Beyond





#### Wheelchair robots

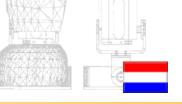
## Design criteria

- stability
- Joystick input
- End point control
- Safety (close to the face)
- Movement repertoire
  - -eating
  - -page turning
  - -pouring
- (Voice recognition)
- price (below 30k Euro)
- autonomous



"Manus ARM", Exact Dynamics

2 kg load 20 kg weight 25.000 Euro







Care-O-bot Fraunhofer IPA



Movie Care-O-bot



Carebot Gecko Systems

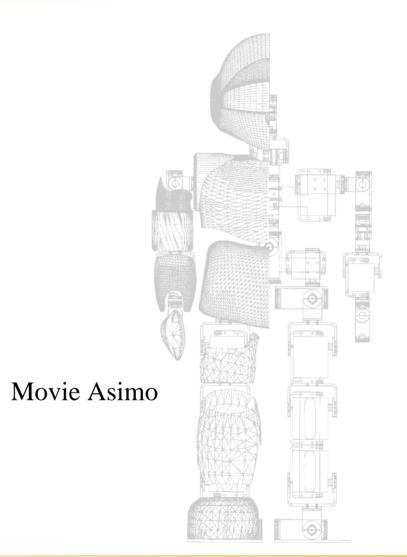


#### **HONDA Humanoid**

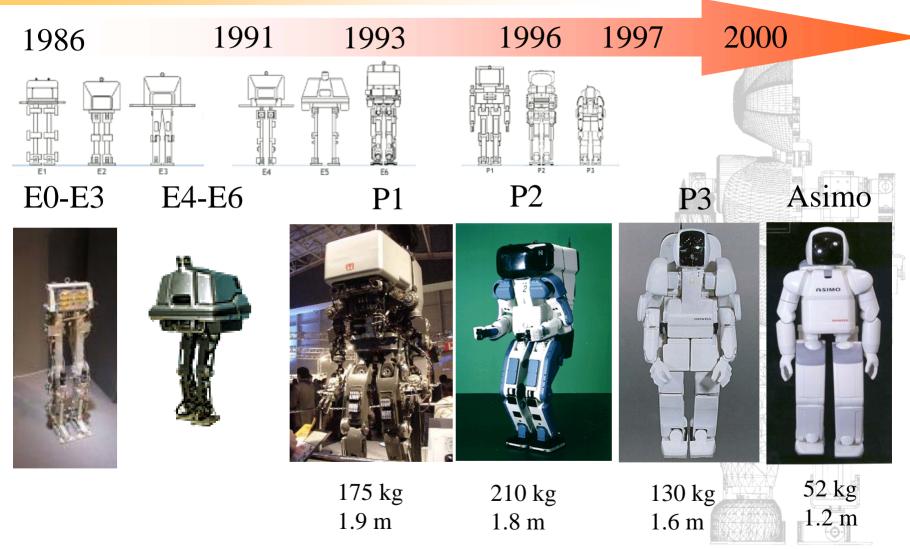
- Fully assistive household (future)
- Remote controlled operations

#### **Specs**

- Walking & turning (i-walk)
- Maneuvering (e.g. stairs)
- Stereo vision
- 26 DOFs
- Intelligence ?
- 250.000 Euros



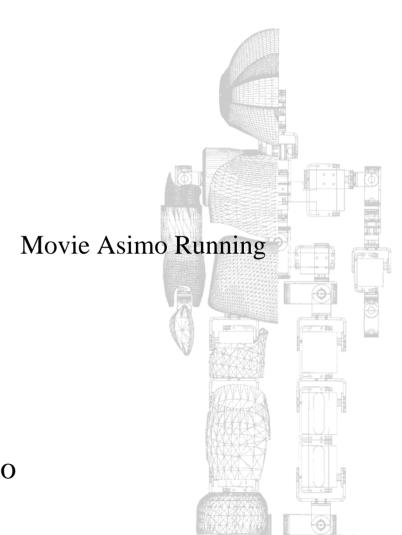






Movie Asimo on Stairs

Honda Asimo





# **Cleaning & domestic**

### **Specialized functions:**

- Vacuum cleaning
- Lawn mowing
- Window cleaning
- Floor cleaning

## **Key technologies:**

- Obstacle avoidance
- Environmental map making
- Path planning
- (Energy supply)

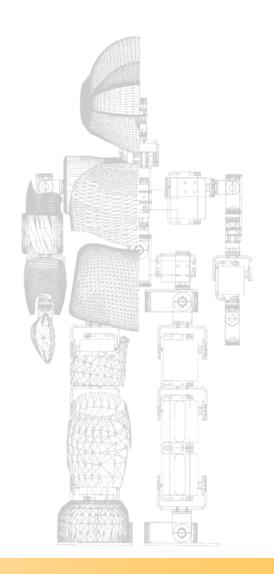








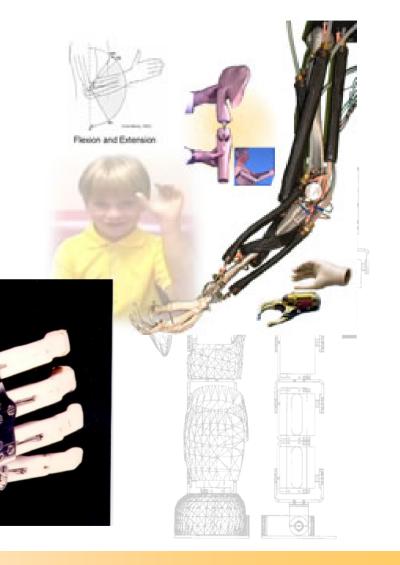
## **Prosthetics**





#### **Main issues**

- •communication with the human body
- •weight (stump load, energy consumption)
- •controllability
- •cosmesis
- durability





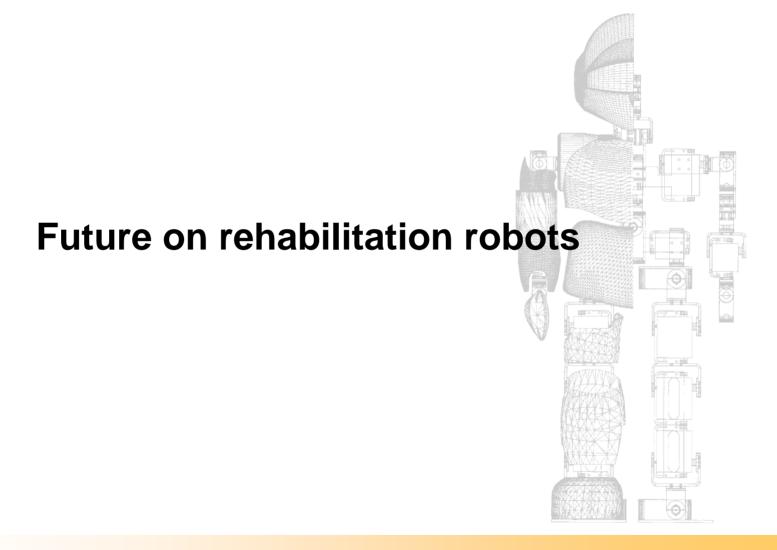
#### storing energy in elastic deformation





electronically controlled knee







#### **Numbers & trends**

## predicted number of service robots installed

(World Robotics 2002, 2006; The Int. Fed. of Rob., United Nations)

total	6.600	319.400	± 3x10 <sup>6</sup>
other	1.300	4.300	12.000
entertainment			$1x10^{6}$
domestic	3.000	310.000*	1.9x10 <sup>6**</sup>
rehabilitation	200	200	n.a.
medical	800	5.000	3475
underwater	900	200	5680
cleaning	400	700	5370
segment	up to 1999	2000-2003	2005

<sup>\* = 270.000</sup> vacuum cleaning

 $<sup>** = 1.8 \</sup>times 10^6$  vacuum cleaning



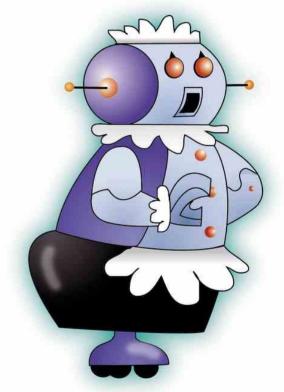
# **Future perspective**

### Activities in the field announce an exciting future:

- Robotic technology is evolving rapidly
- Robotic systems in the (toy) store
- Robotic systems in the operating room
- Robotics systems at home
- Robotic systems in the media
- Robotic (sub-) technologies in other fields

Robotic systems are entering our life!

But rehabilitation robots ...



...many questions to be answered



# **Future perspective**

#### Rehabilitation robots is still a small market because:

- QALY is very low (so cheap technology is required)
- therapy: no proven efficiency yet, upcoming
- identification: complex, needs a lot of research
- prosthetics: too complex, relative small population has benefit
- assistive: due to large market great future

#### **Change drivers:**

- aging population
- technology advancement



# Wheelchair robots: ARM

Movie ARM

