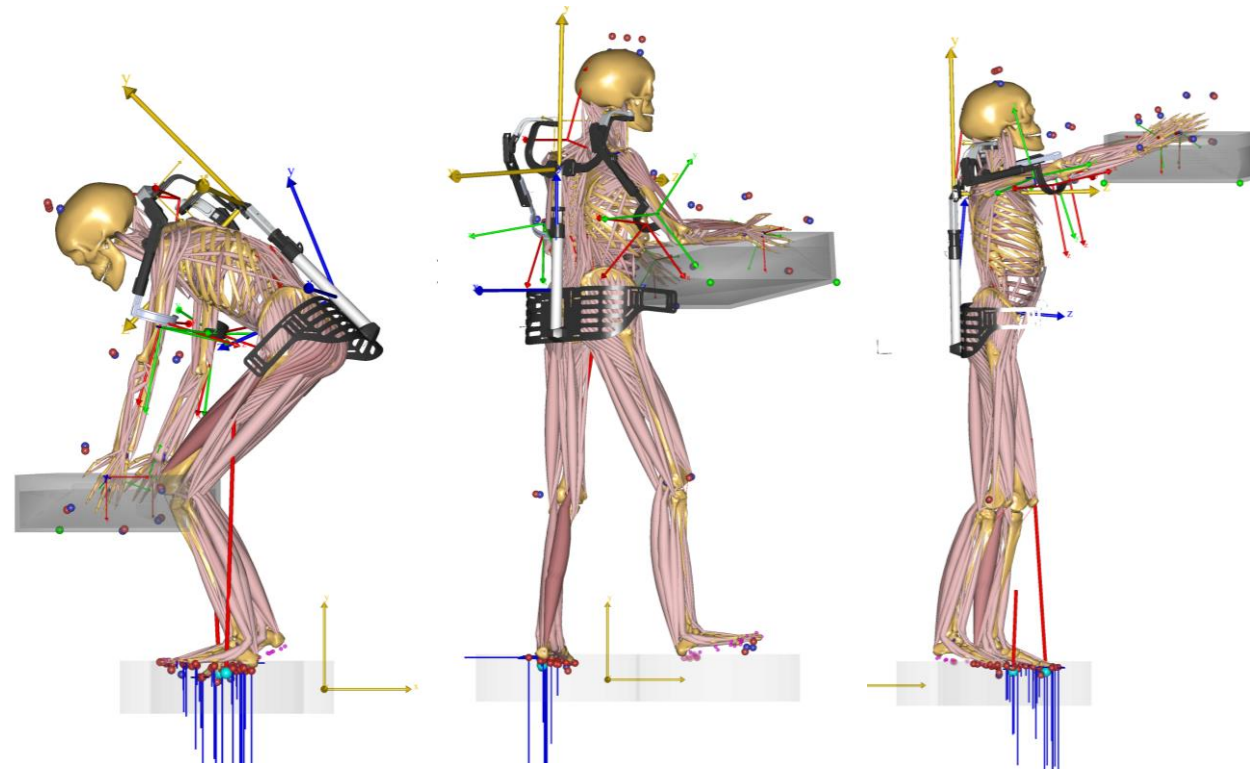


The webcast will begin shortly...

Biomechanical investigation of a passive upper extremity exoskeleton for manual material handling - A computational parameter study

January 12th , 2021



Outline

- General introduction to the AnyBody Modeling System
- Presentation by Bo Eitel Seiferheld
 - *Biomechanical investigation of a passive upper extremity exoskeleton for manual material handling - A computational parameter study*
- Question and answer session



Presenter:
Bo Eitel Seiferheld,
M.Sc. Sports Technology,
Aalborg University, Denmark



Host:
Kristoffer Iversen
R&D Engineer
AnyBody Technology

Control Panel

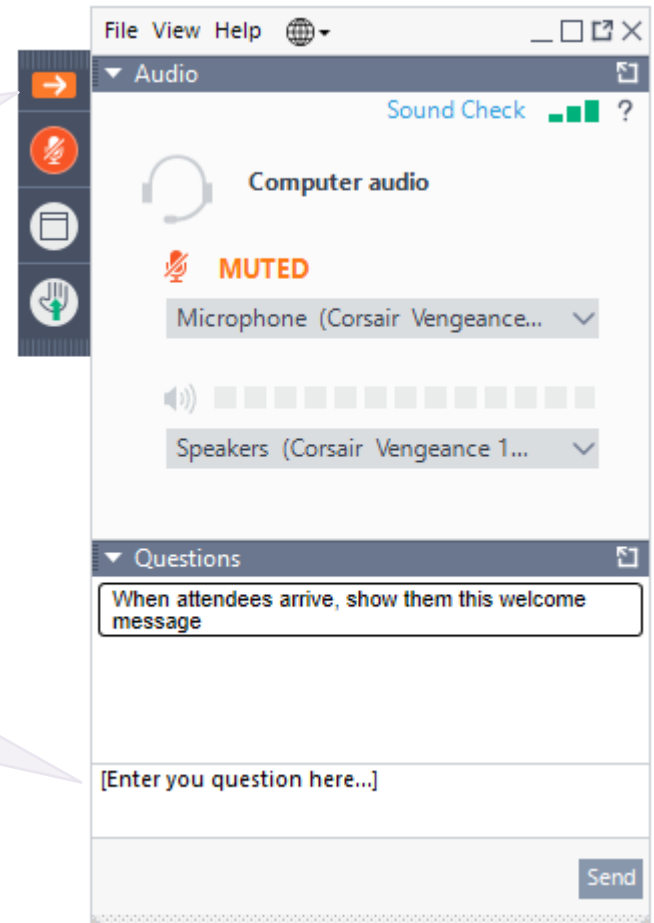
The Control Panel appears on the right side of your screen.

Submit questions and comments via the Questions panel.

Questions will be addressed at the end of the presentation. If your question is not addressed, we will do so by email.

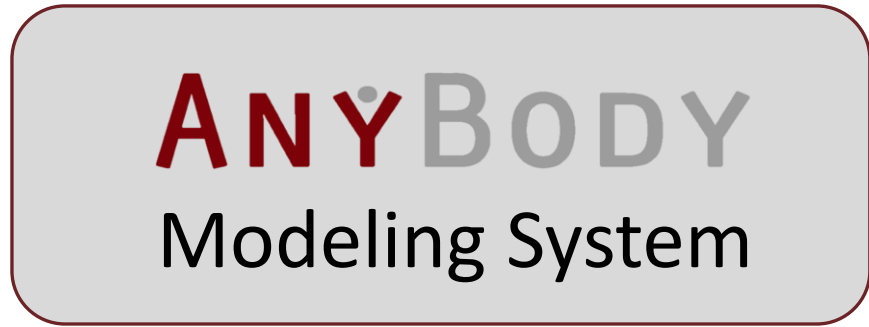
Expand/Collapse the Control Panel

Ask a question during the presentation



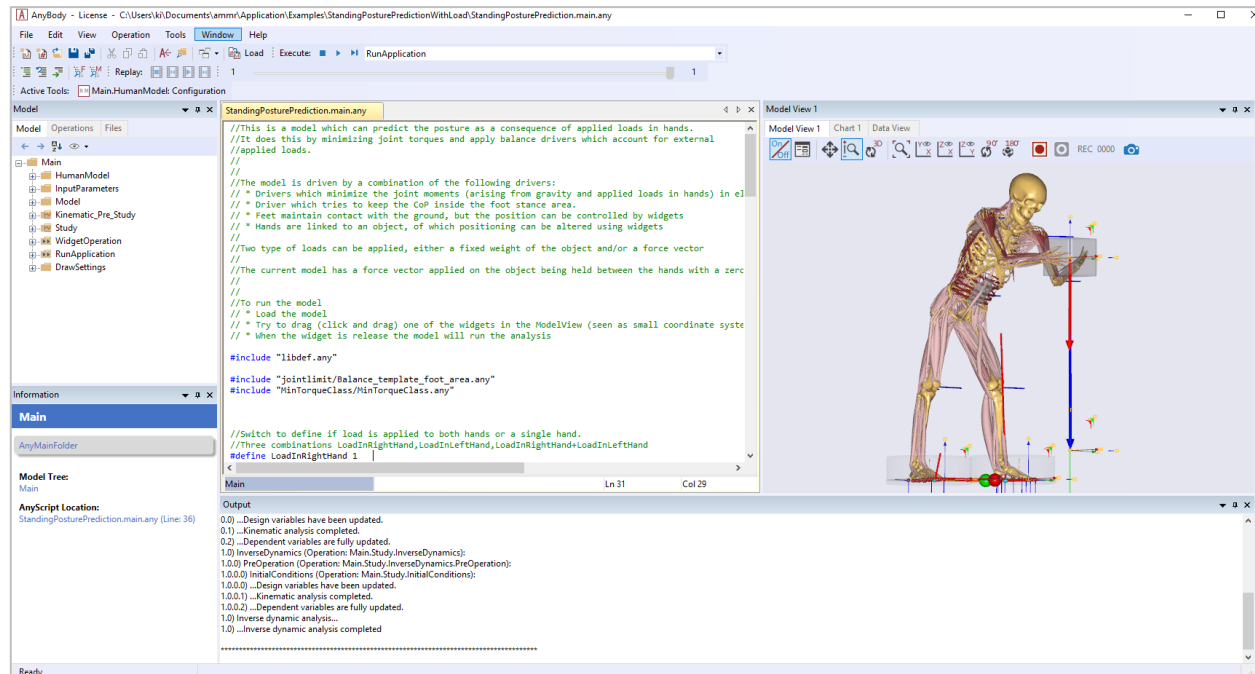
Musculoskeletal Simulation

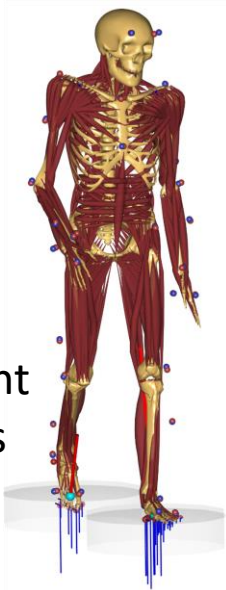
Motion Data
Kinematics and Forces



Body Loads

- Joint moments
- Muscle forces
- Joint reaction forces

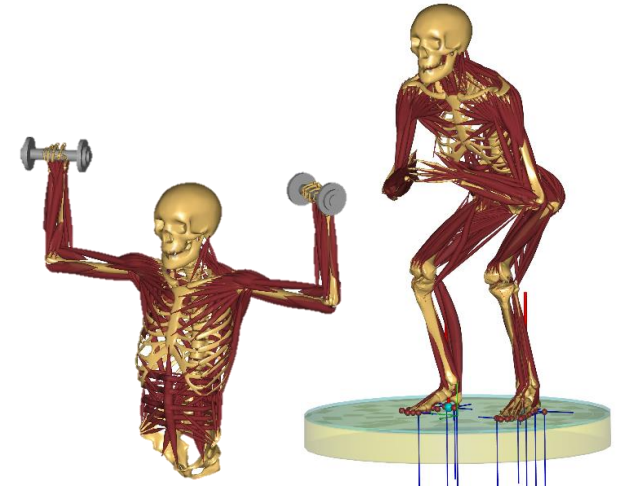




Movement
Analysis



Product optimization design

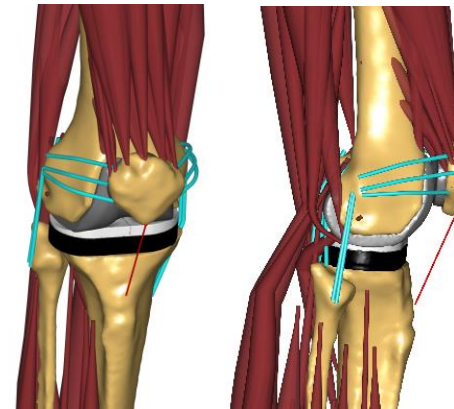
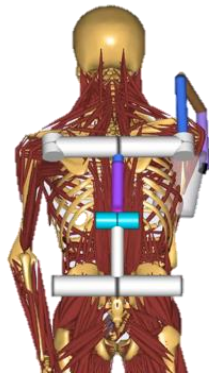


Sports

ANYBODY
Modeling System

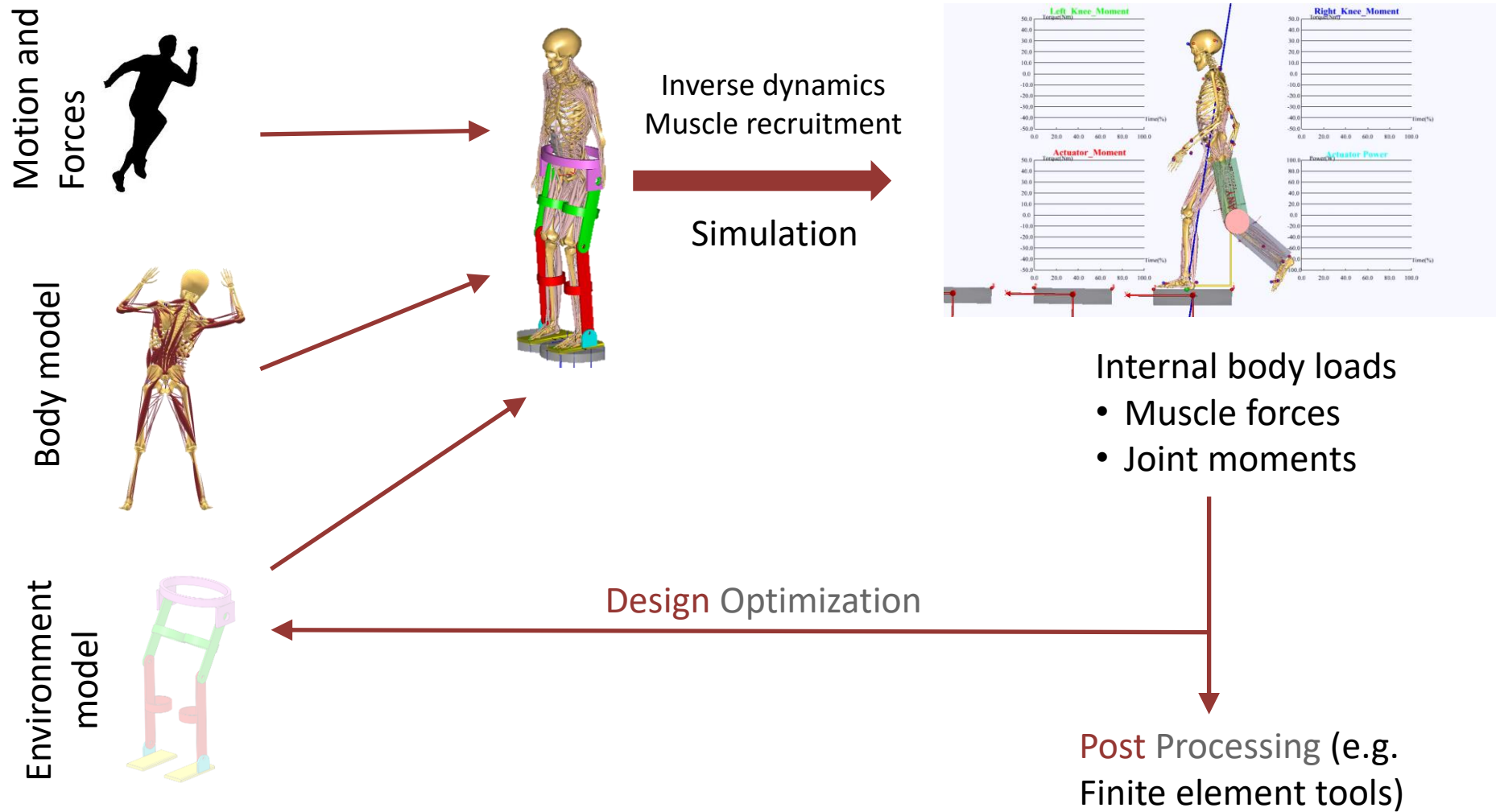


Assistive
Devices



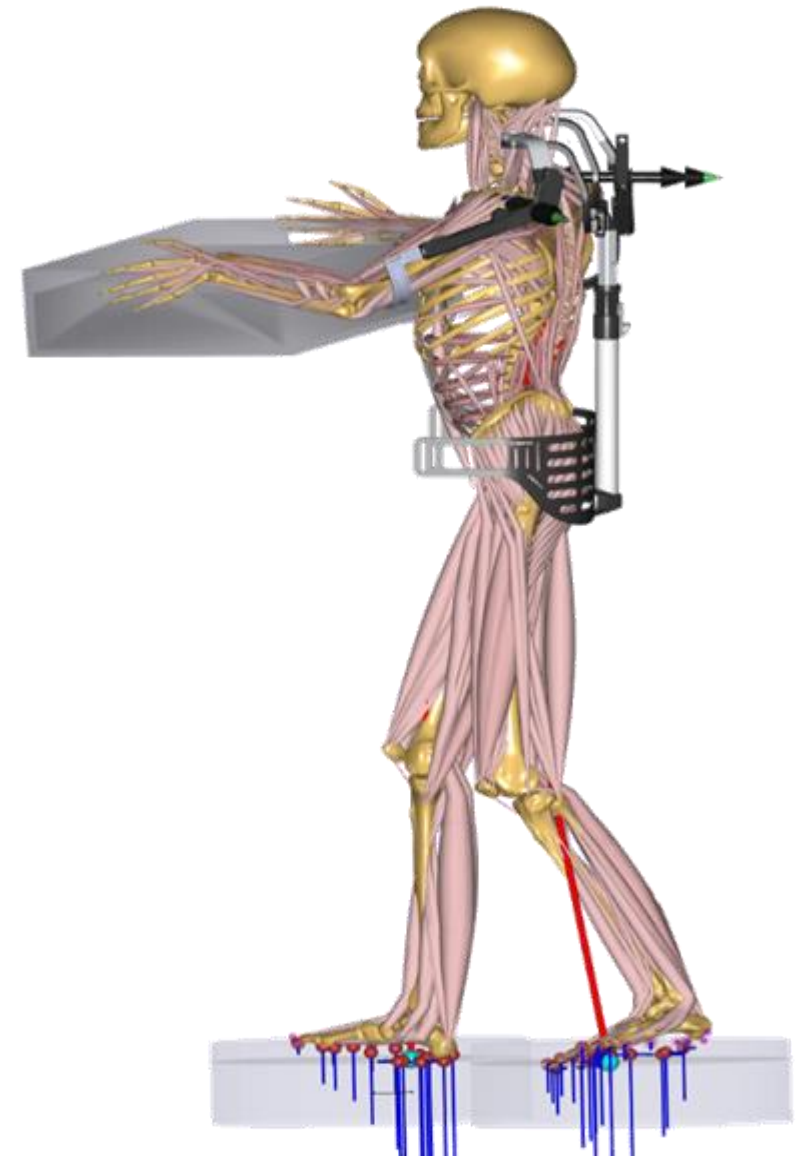
Orthopedics
and rehab

AnyBody Modelling System



Biomechanical investigation of a passive upper extremity exoskeleton for manual material handling - A computational parameter study

Presented by Bo Eitel Seiferheld



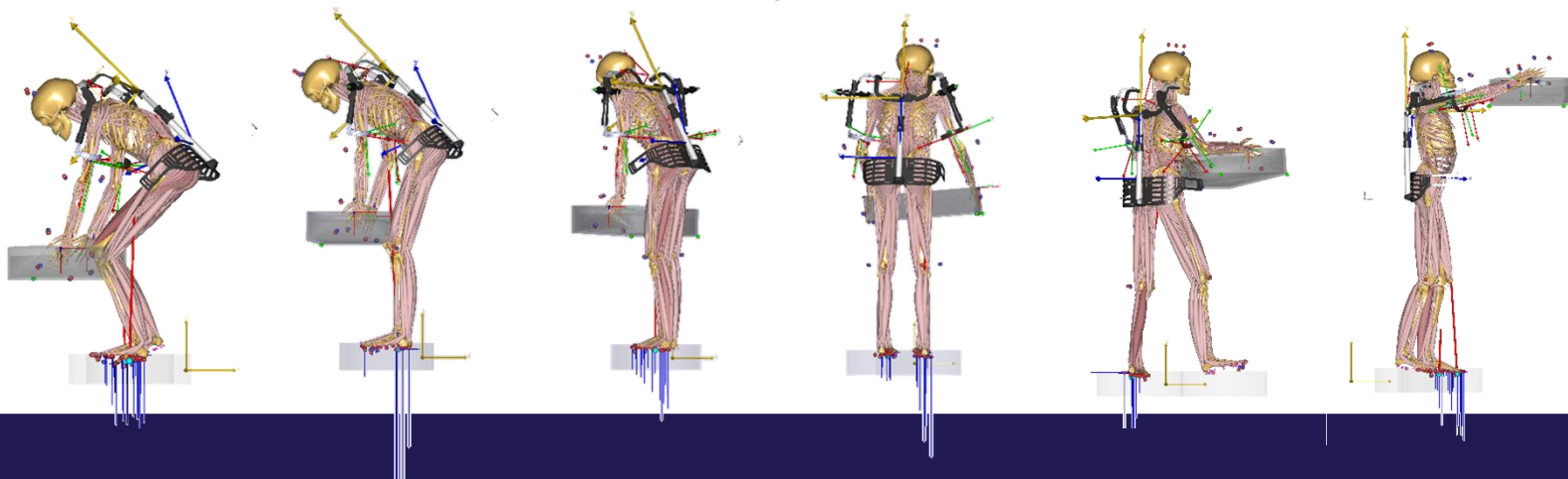
Biomechanical investigation of a passive upper extremity exoskeleton for manual material handling – A computational parameter study

Bo E. Seiferheld¹, Jeppe Frost¹, Mathias Krog¹, Sebastian Skals^{1,2}, Michael S. Andersen³

¹*Department of Health Science and Technology, Aalborg University, Denmark*

²*National Research Centre for the Working Environment, Copenhagen East, Denmark*

³*Department of Materials and Production, Aalborg University, Denmark*



Work-related musculoskeletal disorders

Strong evidence for the association between work-related musculoskeletal disorders (WMSDs) and manual material handling (MMH) tasks¹

Especially^{2,3}

- Repetitive motions
- Awkward postures
- High forces



Highly prevalent in the supermarket sector⁴

- Approximately 40% grocery workers suffer from shoulder and/or lower back disorders and pain



Exoskeletons – The new ergonomic tool?



MATE



Levitate airframe



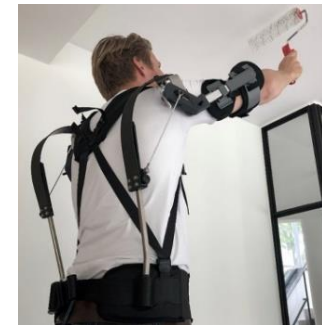
ShoulderX



PAEXO



EksoWorks Vest



Skelex 360-XFR



EXHAUSS Stronger



Robo-mate



Steadicam Fawcett Exoskeletal vest

How is it related?

Pros

- Reduced shoulder flexor muscle activity and increased endurance⁵⁻¹⁶.



- Reduced spinal loading¹⁷



- Increased productivity^{11,12}



Cons

- Altered kinematics^{14,15}



- Additional muscle activity^{9,13}



- Increased spinal loading^{7,13,17}



- Increased error^{7,13}



AIM:

WE WANTED TO DESIGN A METHOD TO EVALUATE THE BIOMECHANICAL RISK FACTORS ASSOCIATED WITH USING AN EXOSKELETON BASED ON INERTIAL MOTION CAPTURE DATA OF MMH PERFORMED IN TWO SUPERMARKETS.



Experimental procedures

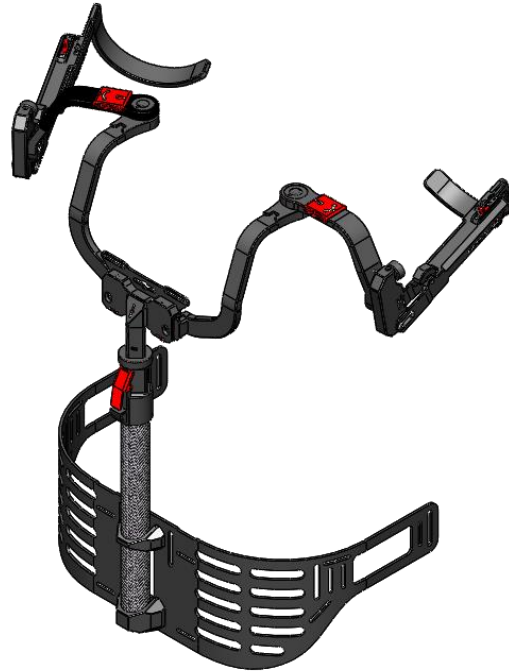
- This study was a part of a larger project aimed at determining the biomechanical loads, muscular demands and working postures during MMH in the Danish supermarket sector.



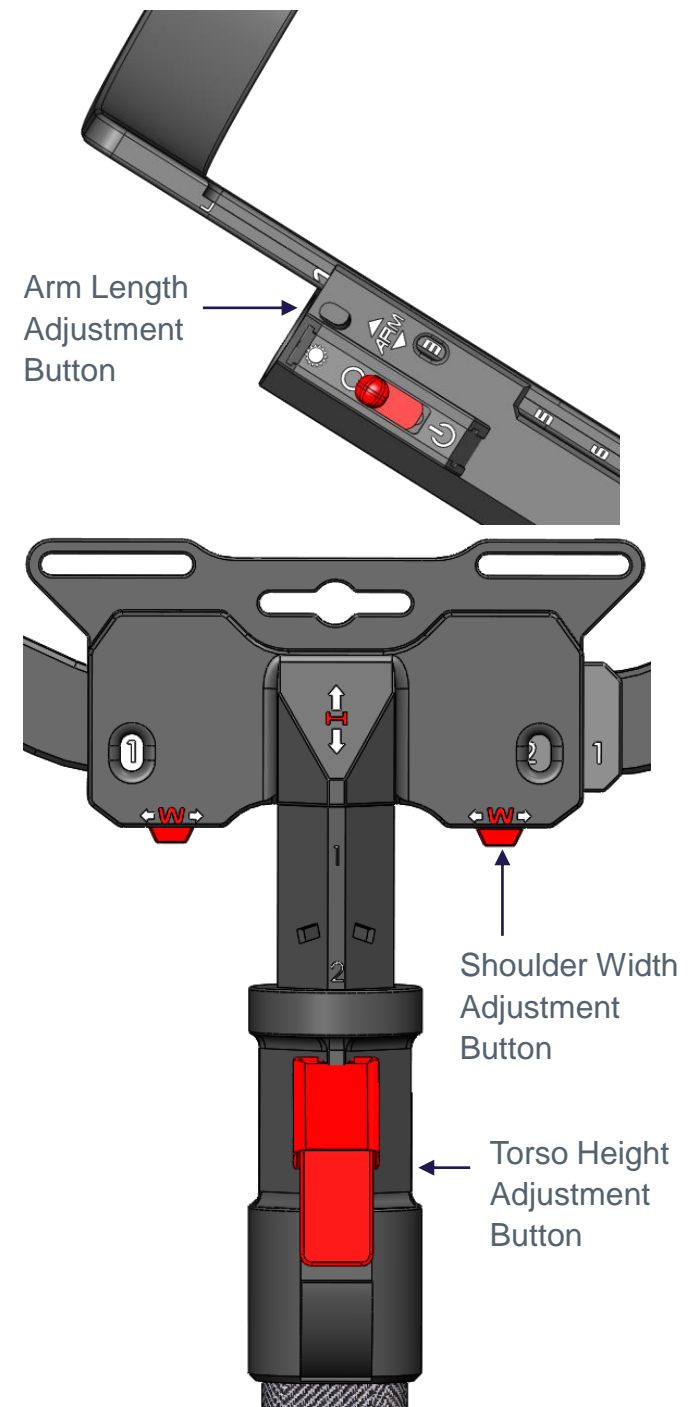
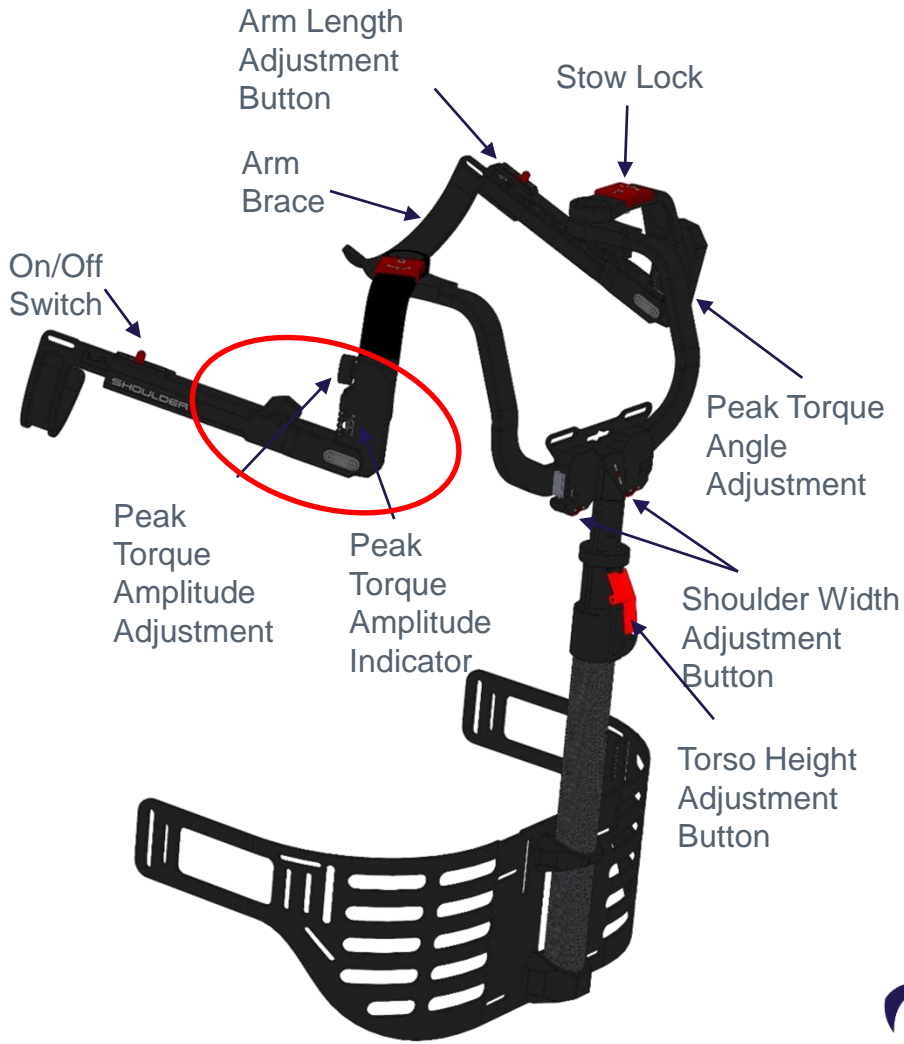
See previous webcast
(https://www.youtube.com/watch?v=Xk1_YgXgVqg&t=667s&ab_channel=AnyBodyTechnology) or
journal paper¹⁸ for more information.



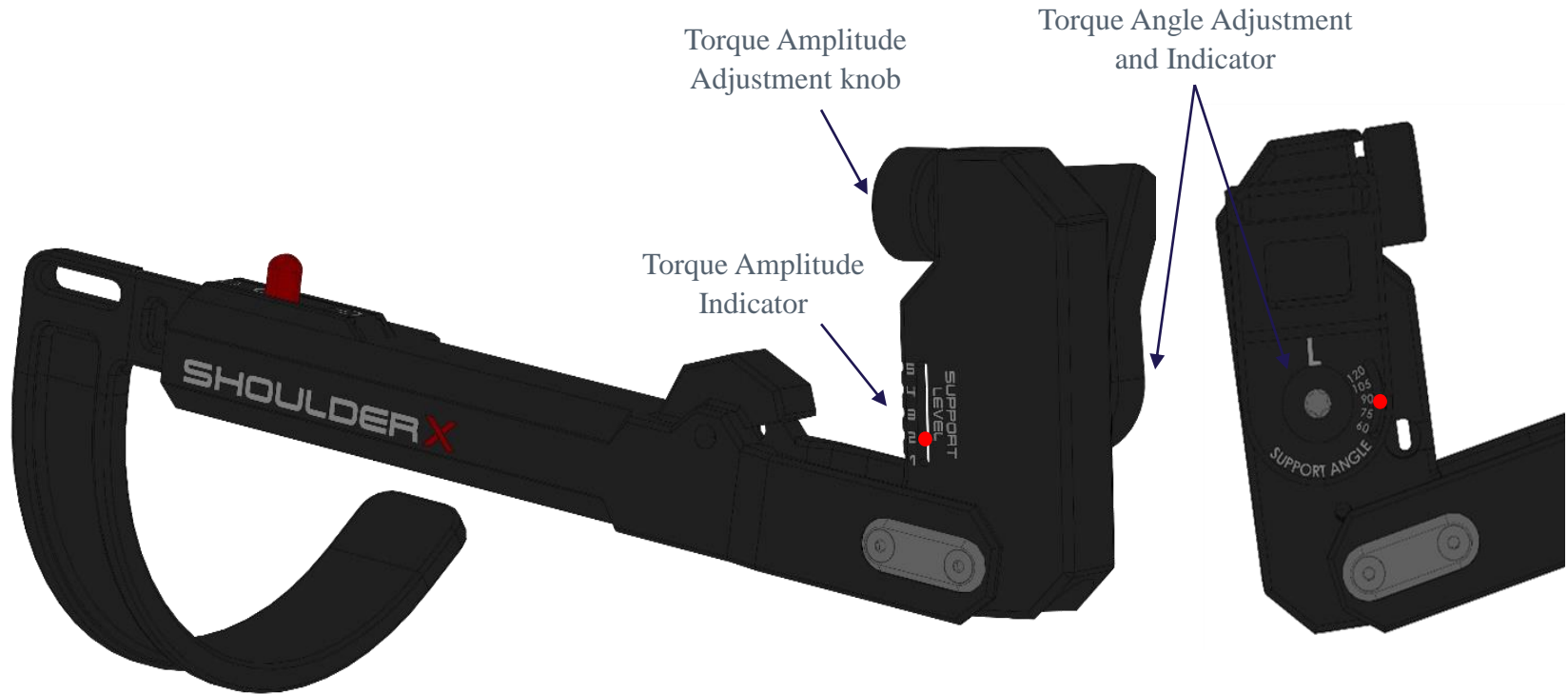
ShoulderX from SuitX



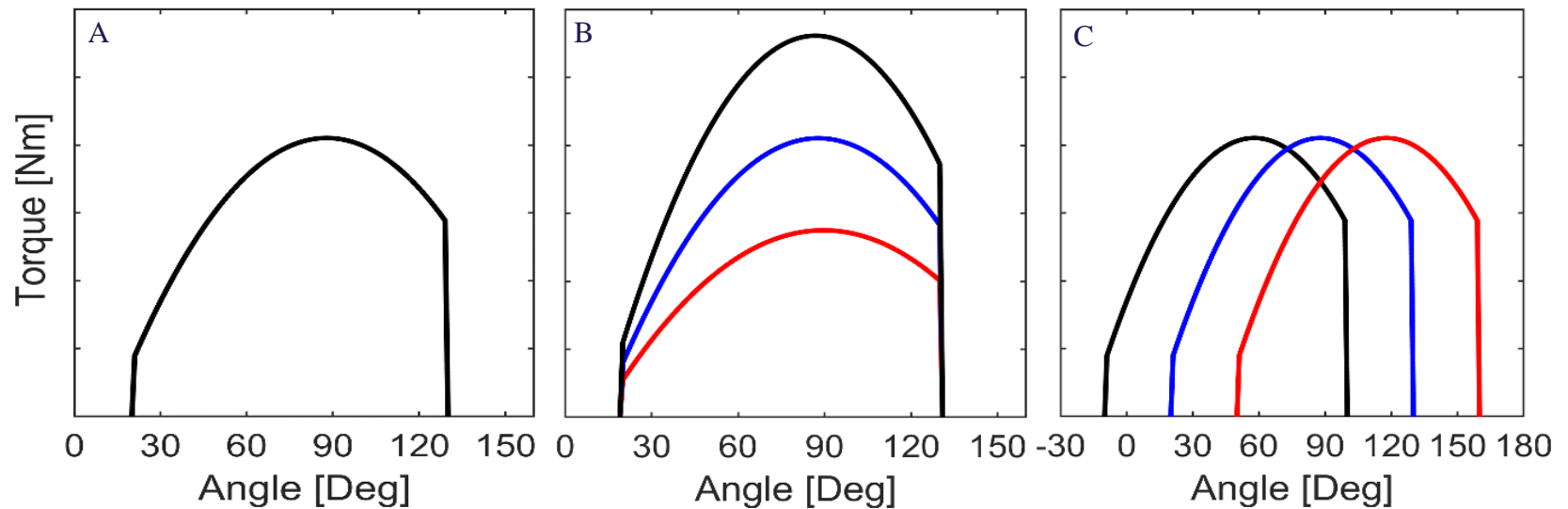
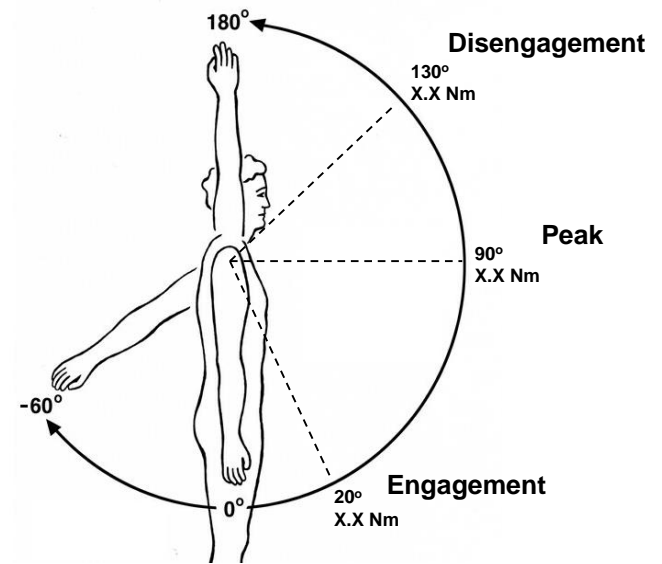
ShoulderX from SuitX



Torque profiles



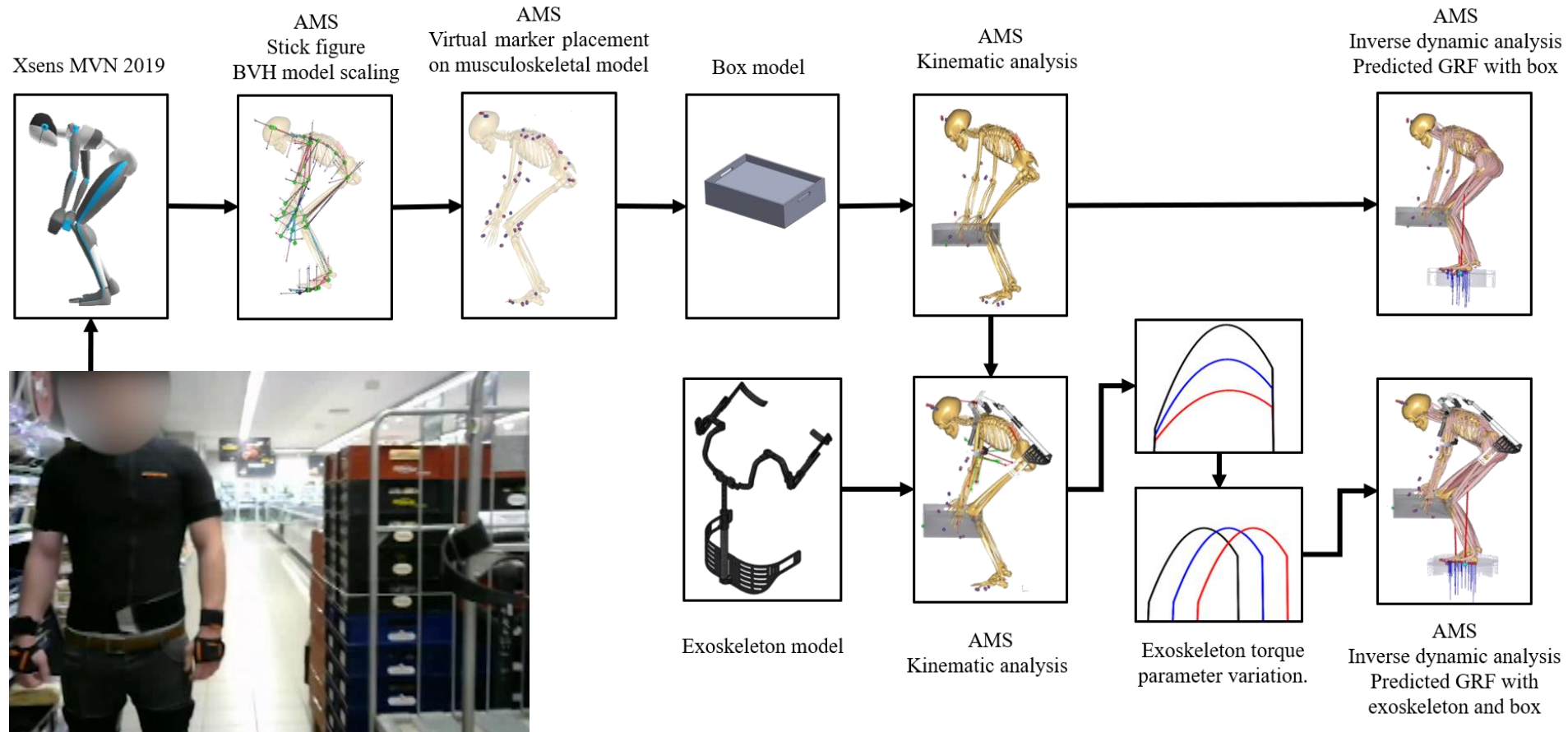
Torque profiles



Additional information can be found here¹⁹

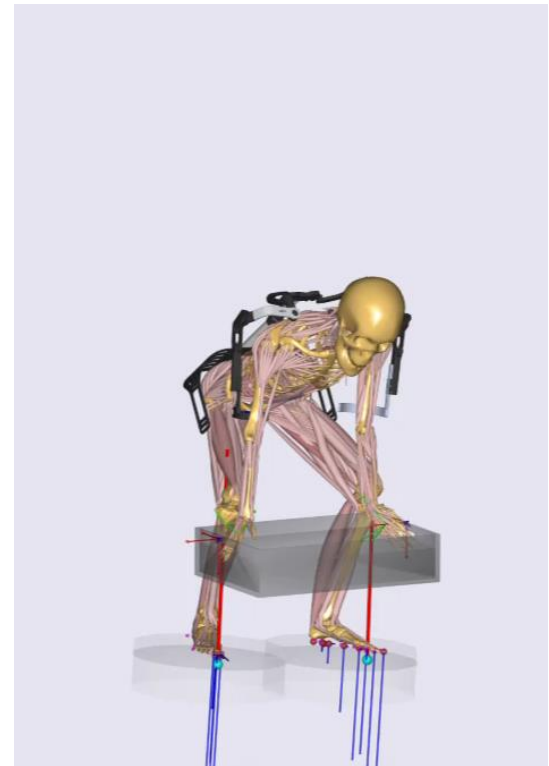
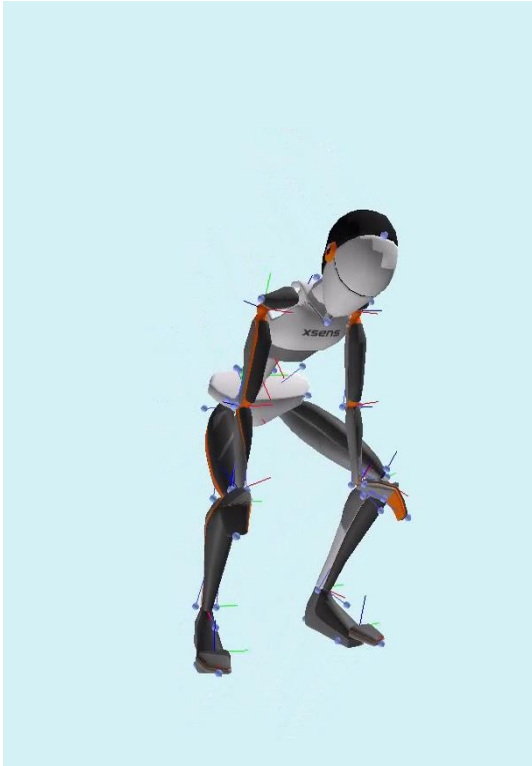


Experimental procedures



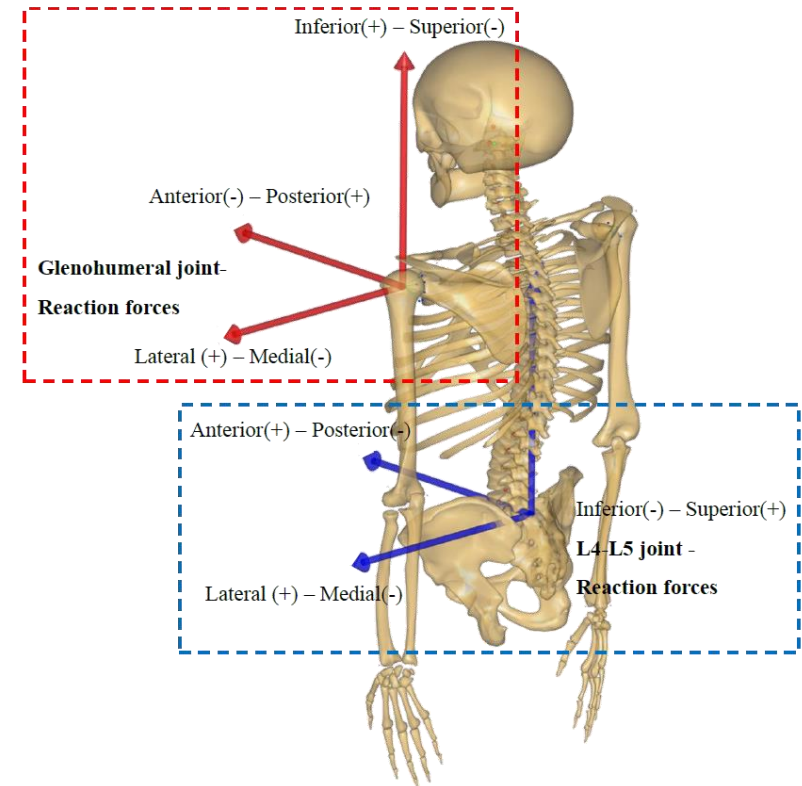
- 15 full-time employees
- Two-handed lift.
- 7.9 kg rye bread.
- Starting position of 15 cm
- End position at shelf height approx. 145.5 cm.

Experimental procedures

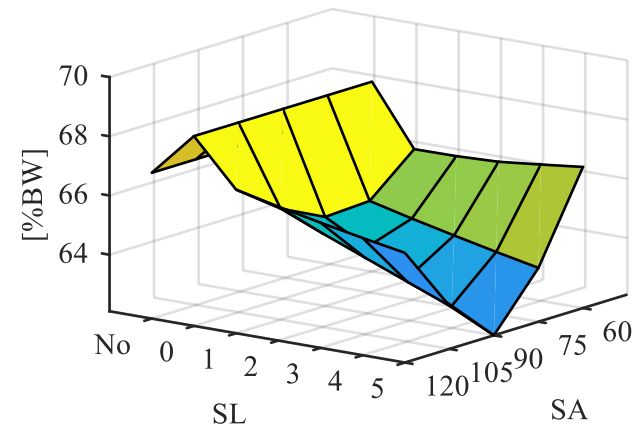
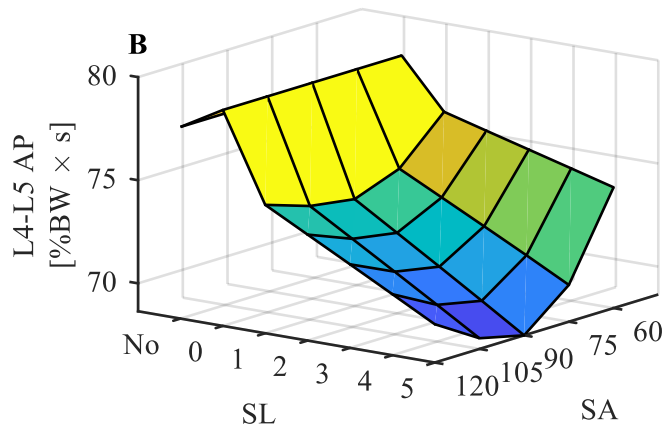
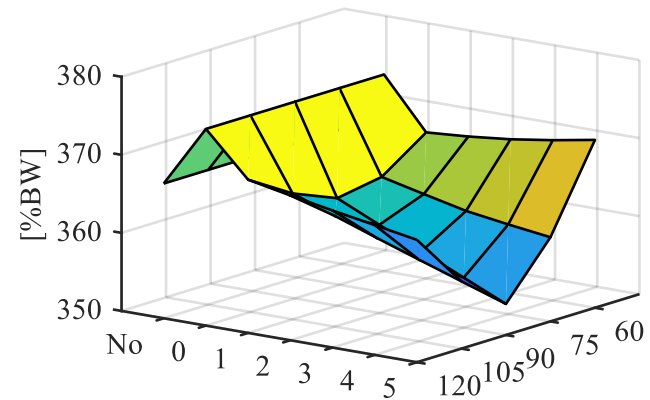
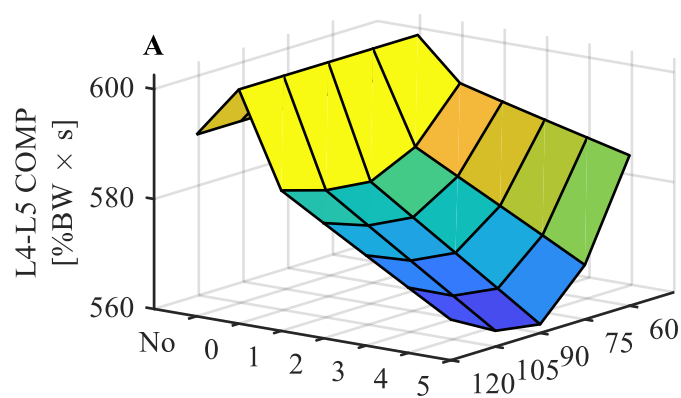


Data

- Torque profile variation - 27 settings
 - 5x5 exoskeleton settings
 - 1 With exoskeleton but no support
 - 1 No exoskeleton
- Extracted
 - Joint reaction forces
 - L4-L5
 - Glenohumeral joint
 - Muscle forces
 - Deltoideus
 - Upper Trapezius
 - Latissimus Dorsi
 - ...
- Impulse ($\%BW \cdot s$) and Peak forces ($\%BW$)



L4-L5



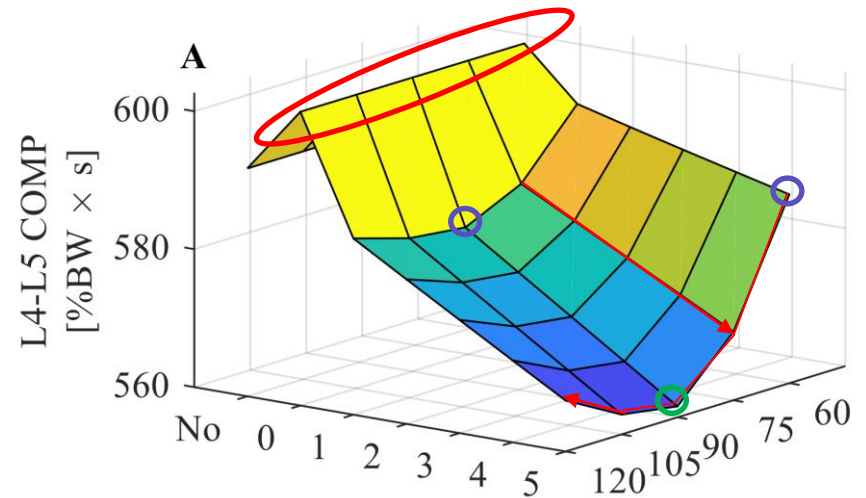
SL (support level) refers to the different torque outputs with (No: no exoskeleton, 0: exoskeleton with no torque, 1-5: lowest to highest torque output on the device).

SA (peak support angle) refers to the different peak support angles and their corresponding engagement and disengagement angles.



L4-L5

- Increased loadings, no support
- Regulating settings
- Best setting (90°, 5)

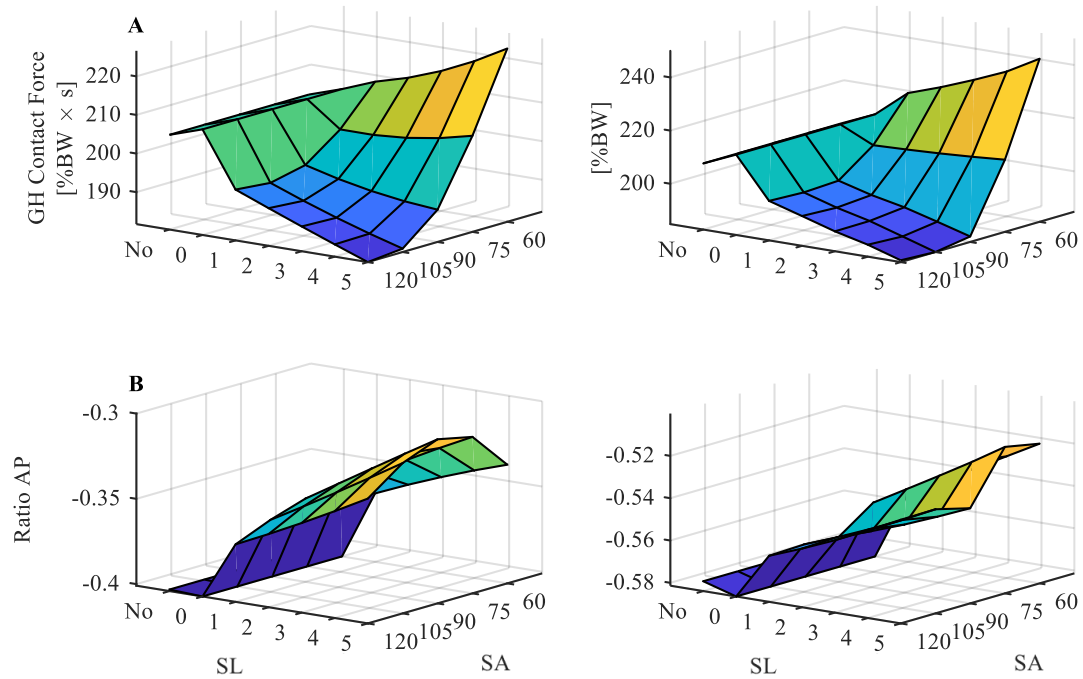


Recommendations

- 3400N Compression⁵
- 700N Shear⁶
 - Average subject (74.1 kg).
 - Without exoskeleton: maximum peak at 367%BW (≈2670N) and 67%BW (≈490N).
 - Best exoskeleton setting: maximum peak at 354%BW (≈2575N) and 62%BW (≈450N).
- Expands beyond worker safety and wellbeing

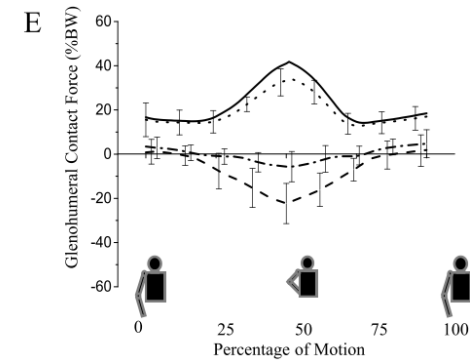
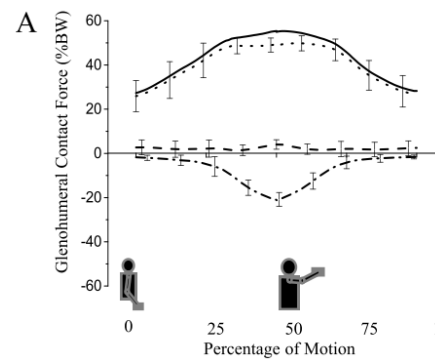


Glenohumeral joint



Glenohumeral joint

- Resultant forces
 - 209%BW without exo
 - 246%BW with worst settings
 - 184%BW best setting
 - Two-three times daily activity^{25,26}

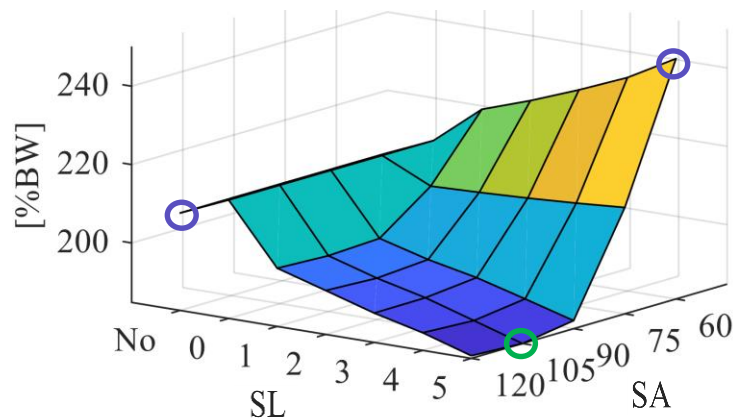


Activity	Force components & resultant F (%BW)			
	F_x	F_y	F_z	F
Lifting 1.4 kg coffeepot, straight arm	38	-91	31	103
Putting 2.5 kg into shelf,	20	-64	17	69



More information see paper^{25,26}

- Our vs. Anglin et al. (2000)²⁷
 - 5 kg box shoulder, 10 kg suitcase laterally
- High glenohumeral forces



	Box	Suitcase
Average CF (\times BW) (all trials and subjects)	1.8	2.4

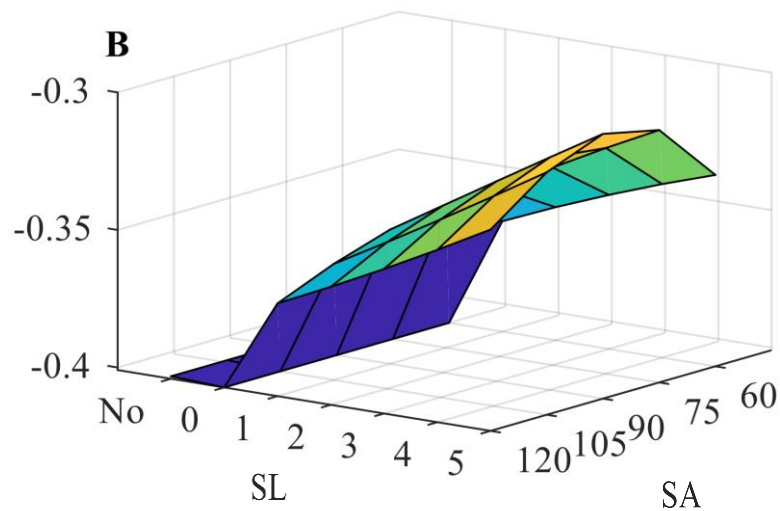
More information see paper²⁷



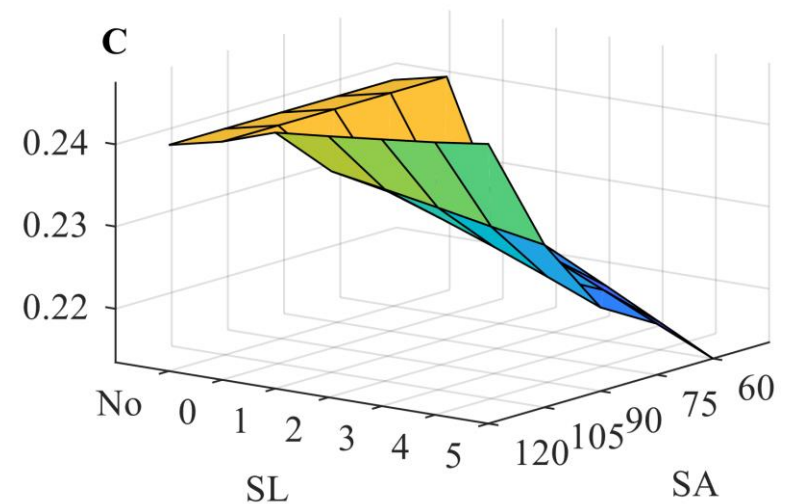
Glenohumeral ratios

- Resultant force leads to information loss, ratio help predict risk of injuries²⁵
- Where reduced compression forces and increased shear forces are indicative of instability²⁸

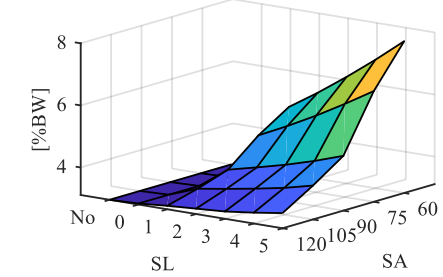
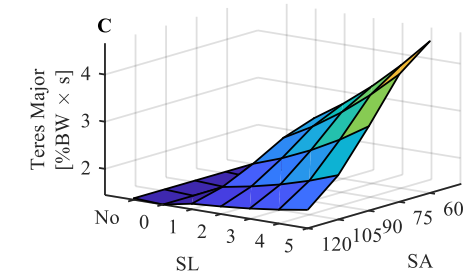
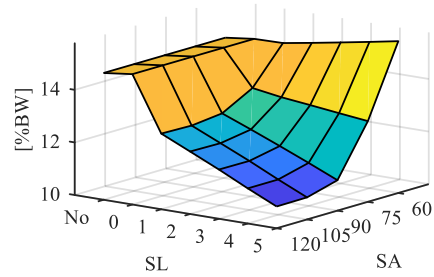
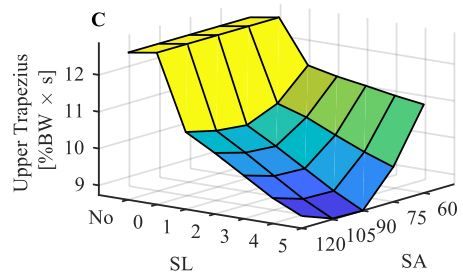
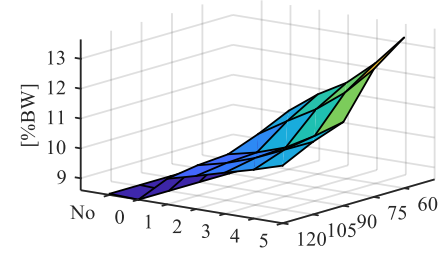
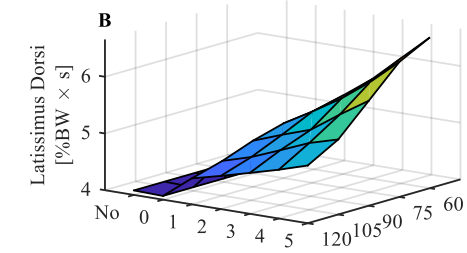
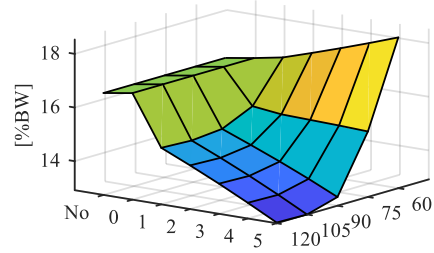
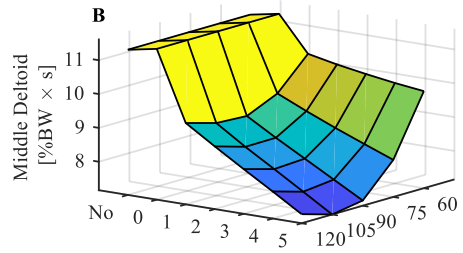
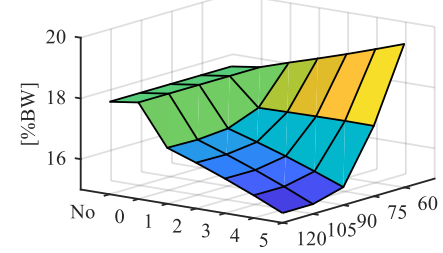
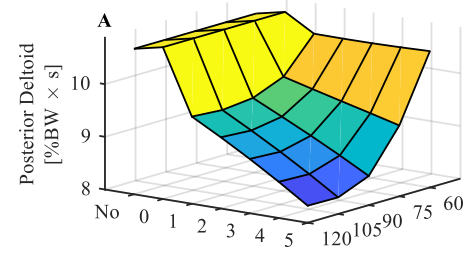
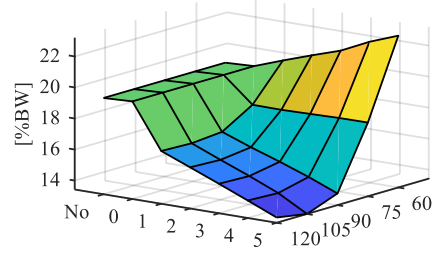
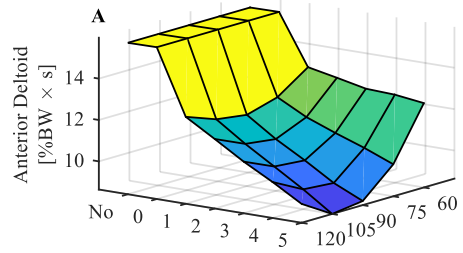
Ratio of glenohumeral compression force to anteroposterior shear force



Ratio of glenohumeral compression force to superoinferior shear force

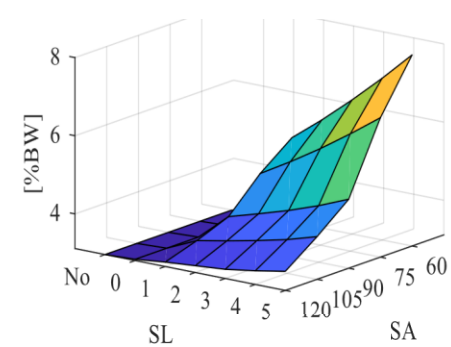
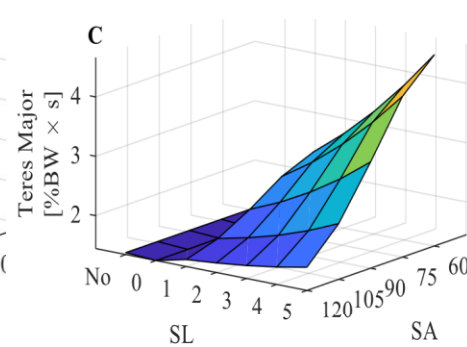
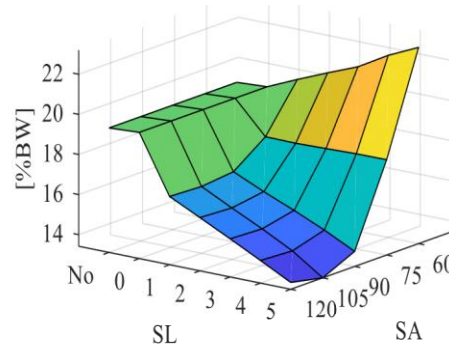
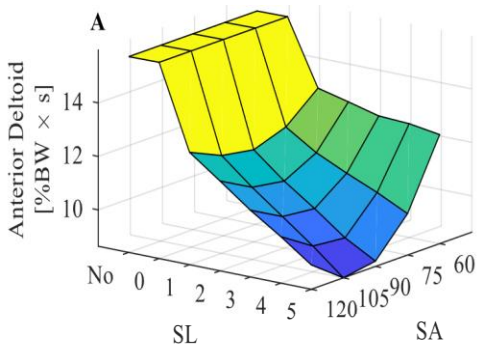


Muscle forces



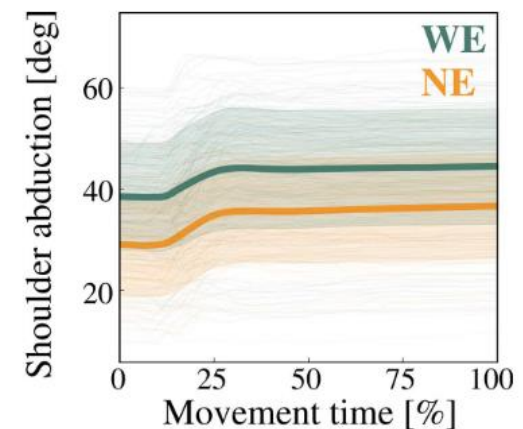
Muscle forces

- Increasing torque amplitude at appropriate angles
- Relative changes were up to 45% reduction
 - Similar findings in literature for peak and median muscle activity with the ShoulderX⁵ and Levitate Airframe^{6-7,10}
- Consequently, higher torque amplitude provoked additional force generation in latissimus dorsi and teres major.
 - However, very small changes as demonstrated previously⁵



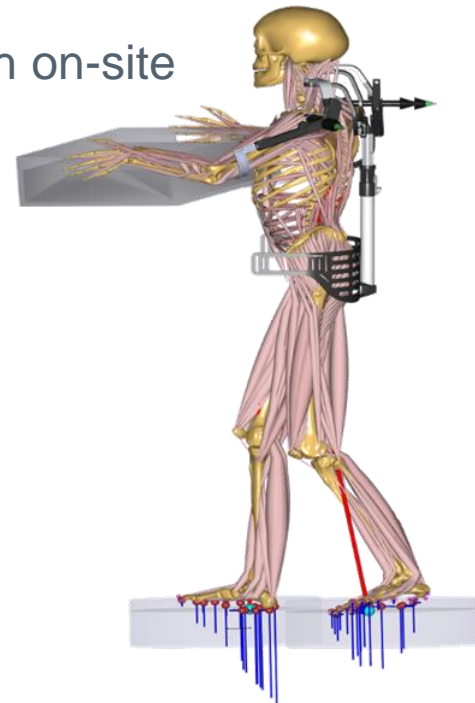
Limitations

- Measurement errors from IMU-based motion capture
 - However, satisfying agreement²⁹
- Virtual marker tracking errors²¹
- Box and exoskeleton kinematics
- Potentially altered kinematics¹⁴⁻¹⁵
- Correct modelling of the contacts elements (human-box, human-exoskeleton).



Summary

- Spinal and shoulder loads were reduced with the ShoulderX exoskeleton.
- Muscle force were reduced for agonist muscles.
- Additional antagonist muscle force.
- Optimal exoskeleton setting.
 - Detrimental to the protective effect of the device.
- Demonstration of musculoskeletal modelling in tandem with on-site kinematic data.



Brief introduction to ERGOTA

- Who are we?
 - Brand new start-up company
 - Burning passion to improve working conditions
 - Prevent musculoskeletal disorders and pain
- What do we do?
 - We perform ergonomic risk-assessments
 1. Problematics
 2. Load risks and injury occurrence
 3. Alleviate strain to retain workers

Follow us on LinkedIn: ERGOTA

Contact: info@ergota.dk



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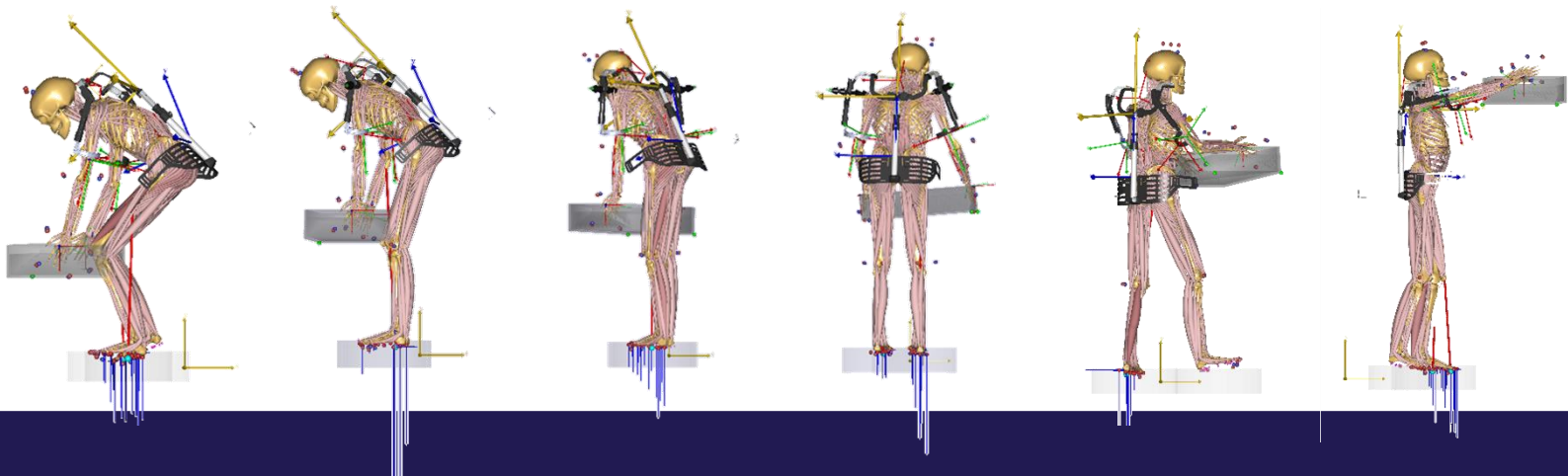
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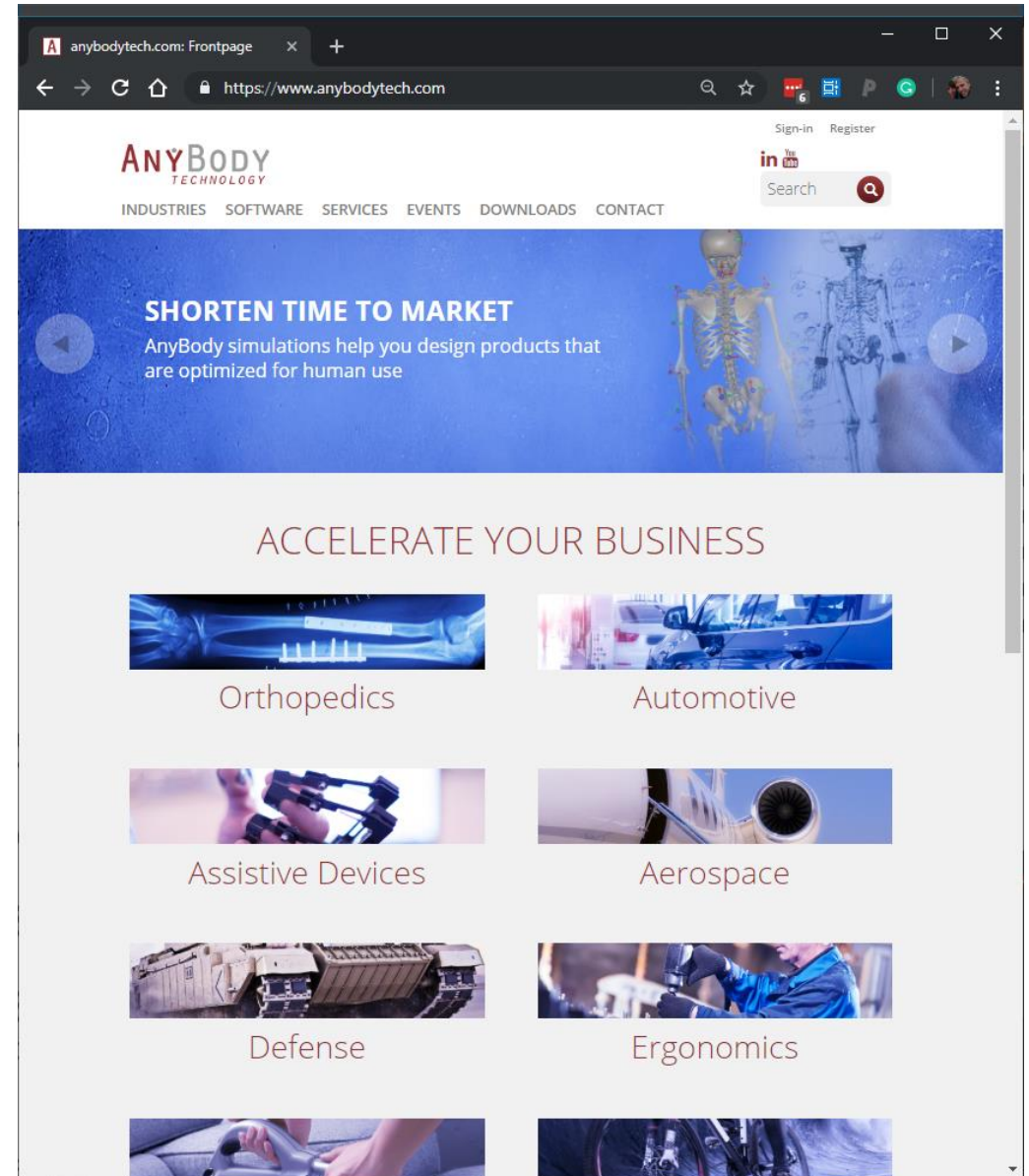
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