Effects of Immersive Visual Feedback Distortion on Step Length Symmetry Using Augmented Reality

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INTRODUCTION

Gait Asymmetry

- Caused by neurological disorders, injuries, and/or aging
- Hinders mobility, balance, & energy efficiency

Visual Feedback Distortion (VD)

- Distorts visual feedback by misrepresenting step lengths
- Enhances motor adaptation

Augmented Reality (AR)

- More interactive & engaging
- Keeps feedback within view
- Reduces distractions

Hypothesis: AR-VD will lead to greater gait symmetry adaptation & longer-lasting aftereffects compared to monitor-based VD (M-VD).

METHODS

2 Visual Feedback (VF) Bars

- Right step length (RSL)
- Left step length (LSL)

Step Length Symmetry

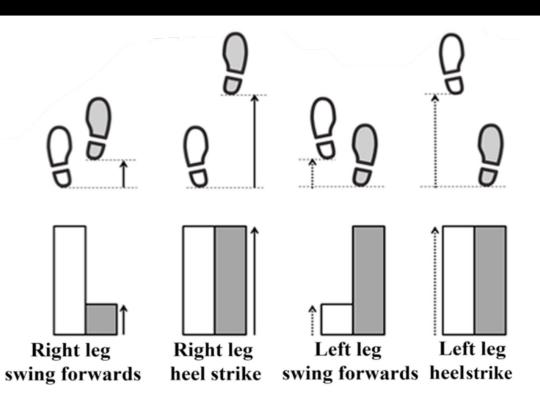
- LSL = RSL
- Equal bar heights at heel strike

1 Healthy Subject

- 1 AR-VD session
- 1 M-VD session







PHASE 1: Baseline

VF: undistorted (2 min)
Instructions: match bar heights

PHASE 2: Adaptation

VF: distorted (10 min)
Instructions: match bar heights

PHASE 3: Post-Adaptation

VF: none (9 min)
Instructions: keep gaze ahead

METHODS

Visual Feedback Distortion (VD)

- Each minute for first 5 minutes of adaptation phase:
 - Increase VD by 3%
 - Decrease RSL bar height by 3% of actual RSL

û %VD

₽ RSL bar

Data Analysis

Step Length Symmetry Ratio (SSR)

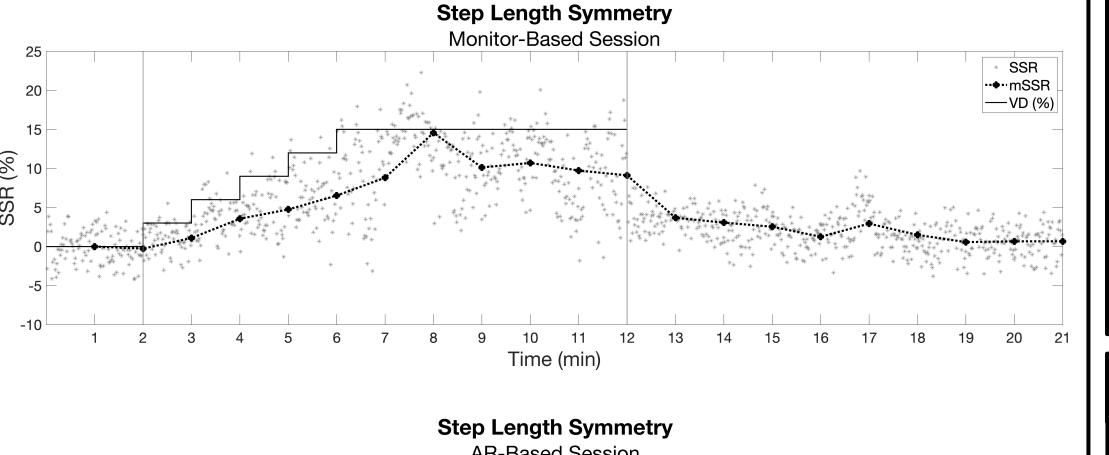
Calculated for each gait cycle

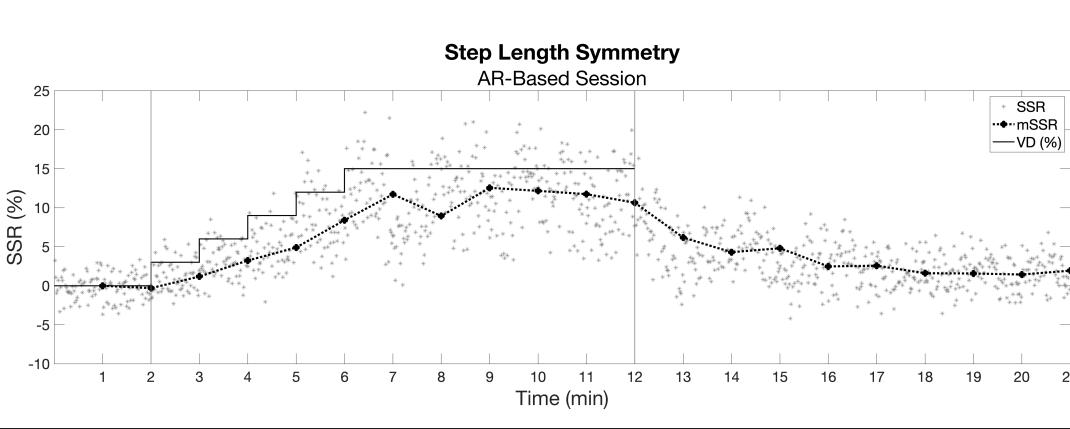
Mean SSR (mSSR)

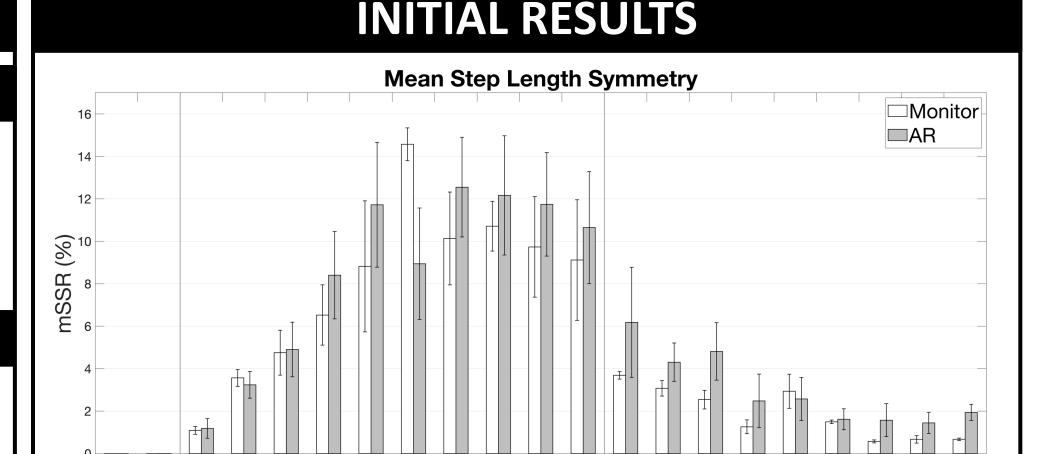
Average SSR each minute

$$SSR(\%) = \frac{RSL - LSL}{\frac{1}{2}(RSL + LSL)} \times 100$$

INITIAL RESULTS







1. Baseline Phase

■ $SSR \approx 0\%$ → $RSL \approx LSL$

2. Adaptation Phase

- SSR > 0% → RSL > LSL
- ↑% VD, ↑ SSR

3. Post-Adaptation Phase

- SSR > 0% → RSL > LSL
- SSR smaller than in adaptation phase
- SSR larger than in baseline phase

AR-VD vs. M-VD

- Generally, larger mSSR with AR-VD
- Slower aftereffect decay with AR-VD

企 % VD

 $\mathop{\rm \, \mathbb{l} } \operatorname{RSL} \operatorname{bar}$

û SSR

♣ Symmetry

CONCLUSIONS

Initial results suggest AR-VD leads to greater gait symmetry adaptation & longer-lasting aftereffects compared to M-VD.

 AR-VD holds potential to improve rehabilitation outcomes & functional independence for individuals with gait asymmetry

Future Directions:

- ↑ sample size
- Incorporate metric to quantify subject engagement



