

Can humans perceive the metabolic benefit provided by augmentative exoskeletons?

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The purpose of augmentative exoskeletons is to help people exceed the limitations of their human bodies, but this cannot be realized unless people choose to use these exciting technologies. Although human walking efficiency has been highly optimized over generations, exoskeletons have been able to consistently improve this efficiency by 10% - 15%. However, despite these measurable improvements, exoskeletons today remain confined to the laboratory. To achieve widespread adoption, exoskeletons must not only exceed the efficiency of human walking, but also provide a perceivable benefit to their wearers. In this study, we quantify the perceptual threshold of the metabolic efficiency benefit provided during exoskeleton-assisted locomotion. Ten participants wore bilateral ankle exoskeletons during continuous walking. The assistance provided by the exoskeletons was varied in two minute intervals while participants provided feedback on their metabolic rate. These data were aggregated and used to estimate the perceptual threshold. On average, participants were able to detect a change in their metabolic rate of 22.7% (\pm 17.0%) with 75% accuracy. This indicates that in the short term, wearers are not able to perceive the metabolic benefit from any modern augmentative exoskeletons. If wearers cannot perceive the benefits provided by these technologies, it will negatively affect their impact, including long-term adoption and product viability. Future exoskeleton researchers and designers can use these methods and results to inform the development of exoskeletons that reach their potential.

exoskeleton | metabolic rate | perception | psychophysics | biomechanics

Introduction

The purpose of augmentative exoskeletons is to help people exceed the limitations of their human bodies. These devices apply mechanical assistance to the joints of the legs during locomotion, thereby reducing the physical demands on the wearer's neuromuscular system. The potential uses for these technologies are broad and impactful, including assisting people's abilities to walk, run, jump, and/or carry loads. Consequently, lower-limb exoskeletons may improve the mobility of people with disabilities, as well as those completing sustained, physically demanding activities (e.g. first responders, postal/supply chain workers, and military personnel, among others). Recently developed systems for human augmentation applications are untethered (1–3), lightweight (1, 4, 5), and powerful (6, 7). While recent work has been encouraging, an ongoing challenge has been quantifying the success of these systems; the quantification of an exoskeleton's ability to reduce the metabolic expenditure of walking (i.e. calories burned) has emerged as a focus of the field (8).

Exoskeleton researchers have focused on the reduction of metabolic rate because it is intuitive, measurable, and supported by previous research. State-of-the-art exoskeletons have consistently reduced the metabolic expenditure needed

for walking by approximately 14% relative to not wearing an exoskeleton (2, 5, 9–13). These exoskeletons apply powered assistance at either the ankle joint (5, 9–13) or hip joint (2) and implement control strategies that operate in tandem with the wearer to reduce their metabolic expenditure. Intuitively, if an exoskeleton is successful, the muscular effort required will be reduced, which should be reflected in an upstream reduction in the metabolic power required from the wearer. In addition, metabolic expenditure can be objectively measured in a laboratory setting, meaning it does not have the challenge of quantification that plagues other potentially subjective metrics of success (e.g. comfort, stability, or preference, among others).

There is mounting evidence that humans may be able to 'subconsciously' perceive their metabolic rate, but it is not yet known whether these changes can be perceived *consciously*. Donelan *et al.* showed that people choose step widths that minimize their metabolic rate during walking (14). Subsequently, Selinger *et al.* demonstrated that exoskeleton wearers can re-optimize their gait patterns to minimize their metabolic rate when manipulated externally (with an exoskeleton) (15). That is, the resistance of a knee exoskeleton was varied to incur a metabolic penalty during normative walking patterns, and participants needed to modify their gait patterns to reduce the superimposed metabolic burden. Participants converged to non-normative gait patterns that minimized metabolic rate, but this optimization did not occur spontaneously outside the laboratory (16). Since exoskeleton wearers choose gait patterns that reduce metabolic rate, we believe this indicates

Significance Statement

The past decade has seen a new generation of lower-limb exoskeletons emerge that have the potential to transform human mobility. Reducing the metabolic rate (e.g. calories burned) has become the primary goal driving exoskeleton design and control and the "gold standard" by which they are assessed. While previous research has shown reductions in metabolic rate of 10%-15%, we found that exoskeleton users are unable to reliably perceive reductions less than 23%. Thus, users cannot yet perceive the metabolic benefits provided by any modern exoskeletons. This study provides an important benchmark and underscores alternative metrics that can drive the design and control of these promising technologies.

R.L.M, G.C.T, and E.J.R designed the study; R.L.M performed experiment and analyzed data with input from G.C.T. and E.J.R.; R.L.M, G.C.T, and E.J.R wrote the paper. All authors approved the final version of the manuscript.

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53 people have some ability to sense this quantity (or something
54 correlated). However, since people do not spontaneously stay
55 or return to their lowest rate, it suggests that exoskeleton
56 wearers do not have conscious knowledge of their metabolic
57 rate or its gradient.

58 Conscious perception is a critical part of decision making.
59 For an exoskeleton to appear valuable to its potential
60 wearer, it must provide an experience that illustrates this
61 value. Furthermore, this value must offset the potential "costs"
62 of exoskeleton use. For example, without an intuitive and
63 perceivable understanding of value, potential users may be
64 unlikely to adopt exoskeletons with known disadvantages (e.g.
65 monetary cost, discomfort, or being unfashionable). Previous
66 research in the field of management science has investigated
67 the implications of perceived value in technology adoption;
68 one relevant framework proposed by Davis is the Technology
69 Acceptance Model (TAM) (17). In this model, Davis found
70 a significant correlation between the consciously perceived
71 usefulness of software and users' intent to adopt the software
72 (17). More recently, King and He found that this relation was
73 generalizable across many different technologies (18), such as
74 broadband internet (19), telemedicine (20), and smart watches
75 (21). Thus, when potential exoskeleton users, manufacturers,
76 and others are weighing the choice to adopt or purchase an
77 exoskeleton, the consciously perceived value must outweigh
78 the price, weight, aesthetics, and other costs of wearing a
79 lower-limb exoskeleton.

80 In this study, we quantify exoskeleton users' conscious
81 perception of their metabolic rate during assisted walking. Un-
82 derstanding the human perceptual ability to sense this change
83 is important because it has emerged as the gold standard
84 by which exoskeletons are designed, controlled, and assessed.
85 If exoskeletons are developed to impact a metric that is not
86 perceivable by the user, it will likely hinder widespread success.
87 To this end, we indirectly imposed different metabolic rates se-
88 quentially during walking by adjusting the assistance provided
89 from bilateral ankle exoskeletons. Simultaneously, we recorded
90 whether users perceived their metabolic rate to have increased
91 or decreased as the control strategy changed. We aggregated
92 these data to estimate the threshold above which users could
93 perceive changes in metabolic rate with 75% accuracy, termed
94 the Just Noticeable Difference. The contribution of this work
95 includes new fundamental knowledge of how metabolic rate
96 can be sensed during locomotion and a new benchmark for
97 future exoskeleton developers who desire perceivable impact
98 on metabolic expenditure. In addition, these results under-
99 score the need for new metrics of exoskeleton success that are
100 aligned with the value and experience of the user.

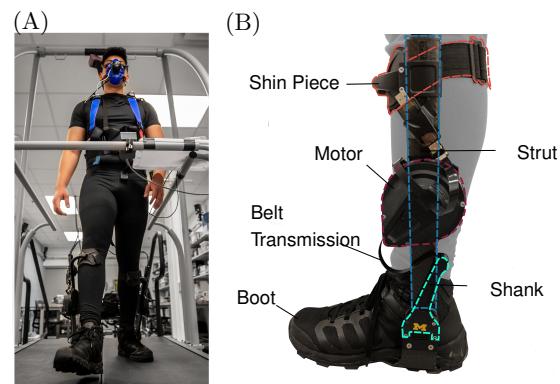
101 Background

102 The field of psychophysics focuses on quantifying human per-
103 ception broadly (22); for example, sensing may involve percep-
104 tion of images, temperatures, sounds (23), or metabolic rate.
105 Forced comparison between two stimuli (such as asking which
106 of two lines appears longer) across different trials is a powerful
107 method for determining how humans can perceive changes
108 in stimuli. This pair of stimuli is composed of a reference,
109 which usually remains constant across trials, and a comparison,
110 which changes from trial to trial. By analyzing large numbers
111 of these comparisons, a perceptual model can be built that
112 encodes and quantifies people's perceptual performance. The

113 input to this model is the true difference between the reference
114 and the comparison, and the output is a probability of the
115 comparison being perceived as different from the reference.
116 The model predicts that stimuli are accurately perceived when
117 the difference between the stimuli is large, but that human
118 perception becomes essentially random when the difference is
119 small. These models are often visualized using a *psychophysical*
120 curve (24), typically a sigmoid function. In general, a
121 single psychophysical curve pertains to the specific reference
122 stimuli about which the test is conducted.

123 The steepness of a psychophysical curve quantifies percep-
124 tual ability; namely, the smallest difference in stimuli that
125 can be perceived reliably. Using a threshold for reliability of
126 75% (25), this delta is known as the *Just Noticeable Difference*
127 (JND). The JND has been used to quantify meaningful
128 differences in visual acuity (26), sound (27), taste (28), and
129 weight (29). Recently, wearable robotics researchers have be-
130 gun to quantify the JND of various factors in the design and
131 control of wearable robotic systems, including perception of
132 prosthetic ankle stiffness by users (30) and clinicians (31), envi-
133 ronment stiffness (32) and viscosity (33), electrical stimulation
134 of the residual limb (34), and vibrations of an osseointegrated
135 prosthesis (35).

136 A helpful concept for describing perceptual thresholds is
137 known as the Weber Fraction. Perceptual thresholds are
138 dependent on the magnitude of the reference stimulus used in
139 the comparisons. The Weber Fraction (WF) (36) is a metric
140 that captures these differences. By definition, the WF is the
141 JND divided by the reference stimulus, thus it represents the
142 percent change from the reference stimulus that is perceivable.
143 For a wide range of stimulus magnitudes, the WF can be
144 modeled by a constant (37).



145 **Fig. 1.** (A) The exoskeleton-human system (picture taken prior to the COVID-19
146 pandemic). Participants walked on a treadmill and experienced different changes to
147 their metabolic rates, which were measured using indirect calorimetry. (B) The Deepy
148 ExoBoot ankle exoskeleton used in the physical experiment. A brushless DC motor
149 mounted on a rigid shank assists the user by generating torque through a belt drive
145 transmission that applies force on a boot-mounted strut. The exoskeleton is securely
146 attached to the user via a shank attachment that transmits the actuator's torque to the
147 leg.

145 Results

146 In this work, we characterized people's conscious perception
147 of their metabolic rate in the context of exoskeleton assisted
148 walking in able-bodied participants. Perception was quantified
149 using the Just Noticeable Difference (JND). Ten participants

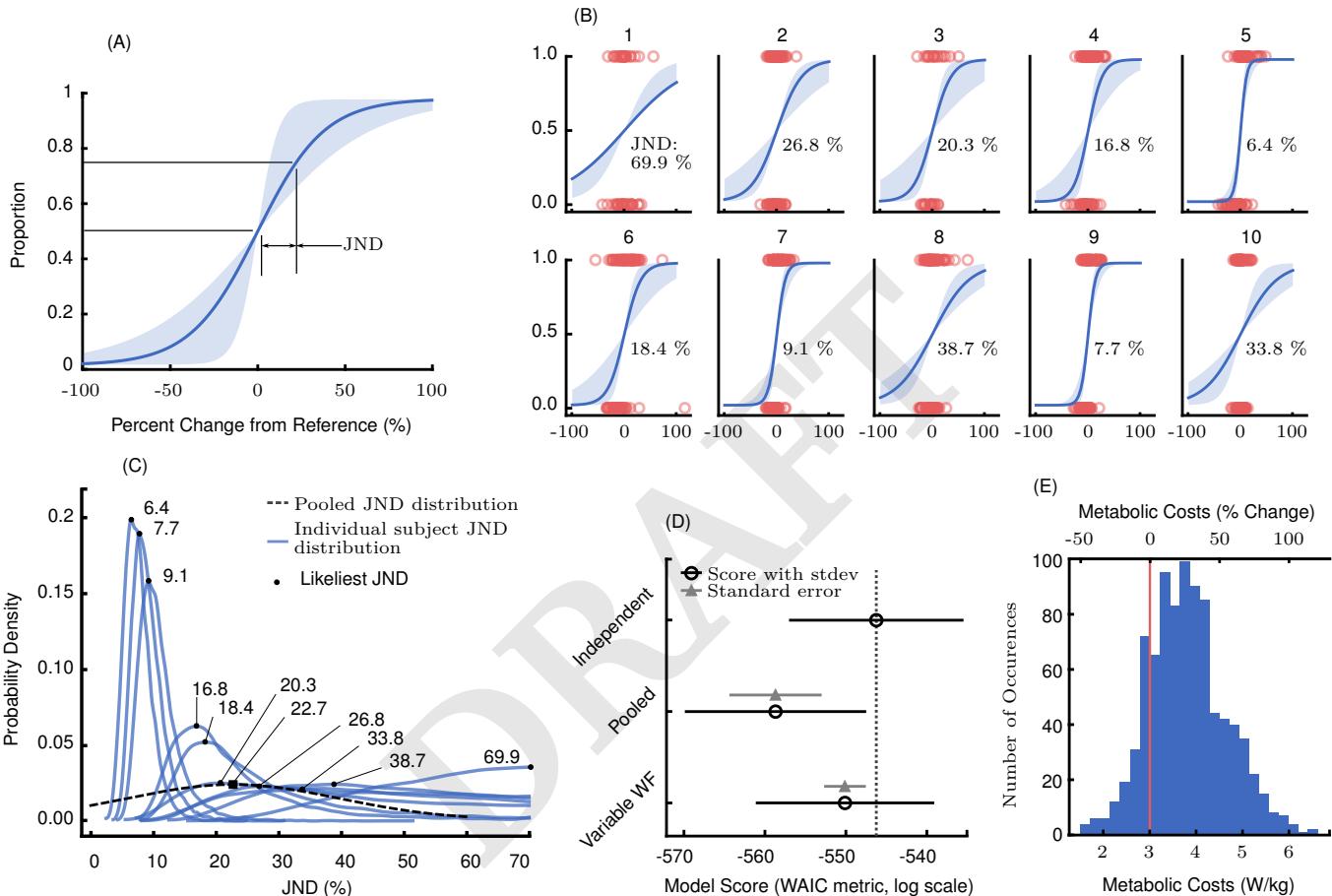


Fig. 2. (A) The psychophysical curve corresponding to the inter-participant average (solid blue, 22.7%) with one inter-participant standard deviation (shaded, $\pm 17.0\%$). (B) Participant-specific data: the likeliest psychophysical curve for each participant (solid blue), participant responses (red circles), and the 95% credible interval of possible curves from the posterior distribution (shaded blue). (C) The posterior distribution for the inter-participant psychophysical curve (dashed black) vs. the posterior distributions for each participant with modeled inter-participant JND differences (blue). The inter-participant model posterior distributions show clear differences between participants and thus proved a better choice of model. (D) A comparison of different JND models using the Watanabe-Akaike Information Criterion (WAIC) metric. A higher WAIC score (black circle, standard deviations given by black lines) indicates a better model. The best model has a light gray dotted line through its empty circle to aid in comparison. Grey triangles indicate the difference in WAIC between that model and the top model (standard error given by grey bars). (E) The absolute range of reference costs aggregated across all participants. The vertical red line denotes the average net cost of walking at 1.25 m/s across different studies (38).

walked on a treadmill at 1.25 m/s while wearing bilateral ankle exoskeletons (see Fig. 1). Different metabolic rates were experienced in sequence and imposed by modifying the assistance provided by the exoskeletons. After each new assistance pattern, participants responded with which of the two most recent assistance patterns were perceived to have a lower metabolic rate, known as a forced-choice paradigm (22). Bayesian statistics were used to model the posterior distribution of the JND estimates for each participant, providing an additional metric of uncertainty (39). Each participant's JND was determined by the most likely JND from this posterior distribution (40).

The average inter-participant JND was 22.7% (standard deviation (SD): 17.0%) (Fig. 2A). Many participants were highly attuned to the changes in their metabolic energetics, while others were less perceptive, as evidenced by the high standard deviation of the estimates (Fig. 2B). We used a one-sample Kolmogorov-Smirnov test in MATLAB to verify that the independent JND estimates from the participants were normally distributed. The lowest estimated JND was 6.4%, while the highest was 69.9%. Our confidence in each participant's JND estimate was given by their respective JND posterior distributions, which represent the distribution over potential JNDs of each participant (Fig. 2C). Differences in the JNDs can then be observed by comparing the shapes of these distributions; for example, a narrow distribution with a defined peak at a low value represents a participant who is highly attuned to changes in energetics, while a flattened distribution with a peak at a high value denotes a participant with a greater JND and less sensitivity.

We used the Watanabe-Akaike Information Criterion (WAIC) (41) to identify the psychophysical model that best describes our data (Fig. 2D). This metric evaluates the predictive power of each psychometric model (42) and corrects for the number of parameters to favor parsimony; using this metric, we can compare different models to data and evaluate their goodness of fit. We evaluated three different models: i) Independent - assuming each participant has a single independent JND (and a constant WF), which allows for inter-participant differences in JND posterior distributions ii) Pooled - assuming all participant JNDs arose from a single posterior distribution, and which therefore does not allow for inter-participant differences (this model also features a constant WF), and iii) Variable WF - assuming each participant can have two JNDs. The first JND was calculated using the metabolic data that corresponded to absolute reference costs in the lower half of that participant's reference cost magnitudes, and the second JND was calculated using the metabolic data in the upper half of reference magnitudes. Thus, this model featured a non-constant WF in which the JND varies based on the absolute magnitude of the reference cost. The best model was the independent-JND model with a constant WF (described in *i* above), which obtains the highest WAIC score and is outside the standard error regions of both competing models.

We examined the range of absolute metabolic rates experienced by participants in our protocol and verified that the metabolic rates humans experience while walking with an assistive exoskeleton ($\sim 10\%$ reductions from unassisted walking) were included in this range (Fig. 2E). In conjunction with our constant-WF assumption, this allows the JNDs calculated here to also characterize the perception of energetics when humans are walking with reduced costs due to an exoskeleton.

Discussion

Most modern augmentative exoskeletons do not yet provide a metabolic benefit sufficient to exceed the perceptual threshold of human energetics. We demonstrated that the inter-participant average JND of metabolic rate was $22.7\% \pm 17.0\%$. This is substantially greater than the typical reductions obtained using state-of-the-art exoskeletons over the past decade (see Fig. 3) (8). While some studies have shown metabolic reductions greater than 15% (43–45), most research has demonstrated more modest reductions. The mean reduction in metabolic rate over the past decade is $\sim 9.6\% \pm 4.5\%$ (averaged from studies in Fig. 3). Based on the inter-participant psychophysical curve obtained in this work, there is a 61% likelihood an average user would perceive a 9.6% change in metabolic rate, when compared to walking without an exoskeleton (50% accuracy would be a random guess). Thus, based on the metabolic rate reductions provided to date (8), these benefits cannot yet be a critical factor in the short-term, conscious perception of exoskeleton use. The perceptual threshold presented in this work (*i.e.* the JND) can act as a useful benchmark for future exoskeletons designed to noticeably improve walking energetic efficiency.

For augmentative exoskeletons to demonstrate value to their wearers, the benefits provided should be perceivable in the short term. Given that state-of-the-art exoskeletons cannot yet exceed the perceptual threshold of metabolic rate (*i.e.* $> 23\%$), this reduction in metabolic rate is not likely to be the driving factor for why users choose to wear these technologies. Given the short-term nature of the trials in this study, it is possible the reduction in metabolic rate is more perceivable over an extended period of use. While this could positively impact user experience, perception over a longer duration may also lead to challenges in experience and adoption. Prior work in economics has demonstrated that a benefit provided in the future is less valuable when compared to a more immediate benefit (*i.e.* temporal discounting) (46–52). Thus, we believe exoskeletons will be most successful if the metrics used to develop these technologies are aligned with what is perceivable and valuable to the user in the short term. Understanding if and how longer-term energetic reductions are perceivable, in addition to the impact of temporal discounting, are important avenues of future study.

Metabolic rate reduction is currently the "gold standard" for augmentative exoskeletons, which is supported by its role in the reduction of joint mechanical power, previous biomechanical studies, and its objective measurability. However, our results demonstrate that the current reductions in metabolic rate are not yet broadly perceptible in the short term. The difficulty of perceiving changes to metabolic rate motivates the consideration of alternative metrics which may be more clearly perceivable by users, including reduction of muscle fatigue (53–55), peak joint forces in arthritic joints (54, 56, 57), and user preference (58–61). The development of perceivable and meaningful metrics to quantify success in future exoskeletons is an important challenge for the field.

Previous work investigating the perception of exertion has shown lower thresholds for exertion during exercise cycling (62). Haile *et al.* applied the method of adjustment (22) to cycling intensity, arriving at a threshold of $0.15 \text{ L/min } V\dot{O}_2$, but did not provide a resting metabolic rate for their participants. Using the resting rate estimates provided in (63), this

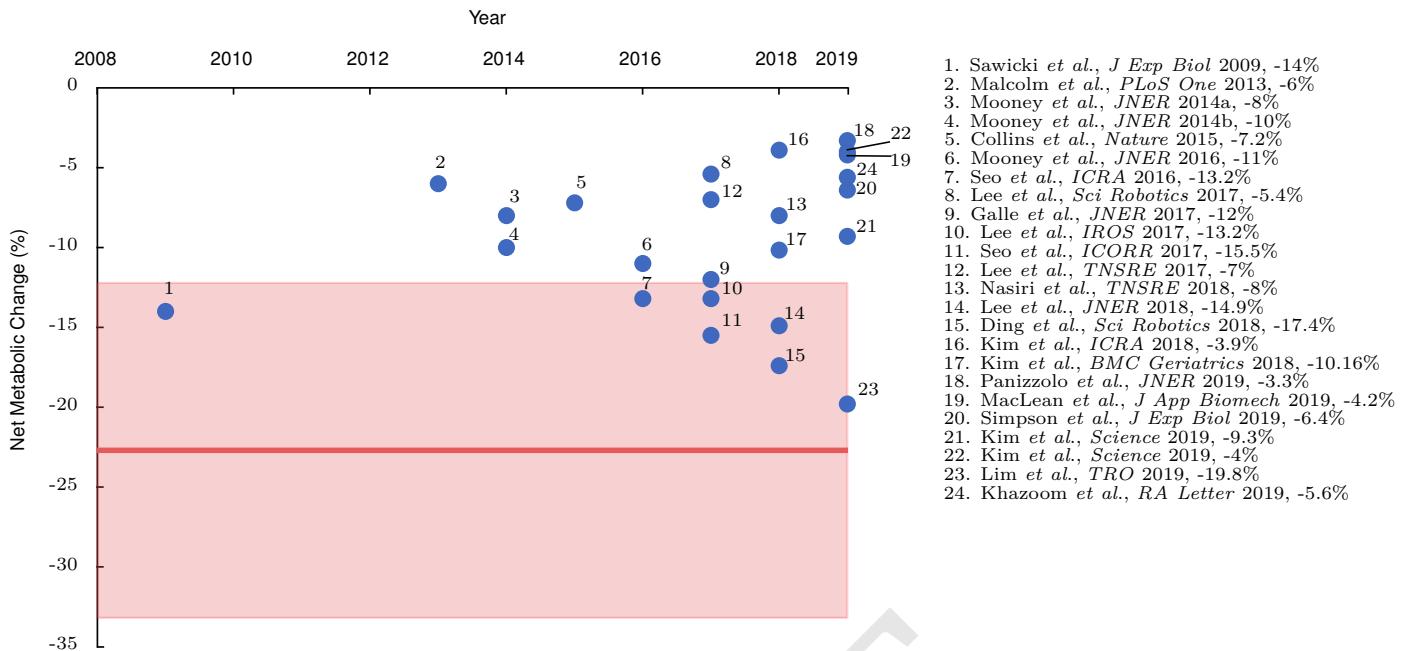


Fig. 3. The average JND magnitude (solid red) plotted against the state-of-the-art in exoskeleton-driven metabolic rate reductions. The 95% confidence interval is shown (shaded red). As of the date of writing, no published device (to the authors' knowledge) exists that would cause a perceivable short-term energetic benefit to the average wearer. Data reproduced with permission from (8).

equates to a JND of $\sim 10\%$. There are several possible explanations for the differences from our results. For example, the method of adjustment can lead to lower JND estimates (64), and is known to be less reliable (65–67) than forced-choice experiments. Additionally, the exertion levels tested were substantially greater than what was tested in our experiment, and thus might have occurred in the perceptual regime where the Weber Fraction was non-constant. Lastly, their method of moderating exertion used only a single variable (cycling resistance), which is susceptible to confounding factors. That is, cycling resistance will vary proportionally with muscle loading, which can be more easily sensed through the Golgi tendon organs, mechanoreceptors, and other mechanisms. Thus, any perceptual thresholds calculated using these sensations could be confounded to underestimate the true JND of exertion because the participants could intuit a mapping between the easier-to-perceive cycling resistance and the harder-to-perceive metabolic effort.

Researchers have established that humans will seek energetically optimal gaits, even when metabolic rate changes are far below our estimate of the perceptual threshold for metabolic rate (*i.e.* $\sim 5\%$ rather than 22.7%) (15, 68). One potential explanation for these differences is that our experiment measures *conscious* perception of changes in metabolic rate, whereas this prior work has allowed for potential sensing contributions from the autonomic or *subconscious* nervous system (69, 70). The literature suggests that humans rely on a combination of different afferent signals, such as heart rate or muscular strain, to generate a gestalt perception of exertion in ways that are not yet fully understood (71–75). It is also not yet known whether the observed changes in locomotor mechanics that are correlated with metabolic rate are causally linked to those

changes.

Participants varied greatly in their ability to perceive changes to their metabolic rate. In this study we investigated whether the JND was more appropriately modeled as a constant value or a person-specific value. Using the WAIC metric—a modern Bayesian tool for comparing the quality of models—we found that the data were better fit by the model where each participant had their own independent JND (see Fig. 2.D). While the inter-participant mean JND value was greater than the metabolic benefits provided by modern exoskeletons, our participant pool included three participants who had JNDs below 9.6% and thus would likely perceive benefits from these technologies (8) (see Fig. 2.C). Future work is needed to study both the physiological mechanisms that underlie this keener perception of energetics, as well as discovering methods to identify those users who may have better perception.

Our results confirm that the Weber Fraction (WF)—the ratio of the JND (in absolute units of W/kg) to its corresponding reference—is constant with respect to reference magnitude. To this end, we again used the WAIC metric to compare a model with and without a WF dependence on reference magnitude, and found the constant WF model superior. This result indicates that metabolic rate perception in the inter-participant range from ~ 1.5 to 6.6 W/kg (see Fig. 2E) is not near the perceptual extremes where the WF is known to change drastically (36). The magnitude of this range, in conjunction with the flatness of the WF over this range, also indicates that the perception of metabolic rate penalties is similar to that of metabolic rate improvements.

334 **Limitations.** The posterior distributions for those participants
335 with low and high JNDs were differently shaped, reflecting a
336 limit on the maximum metabolic rate changes possible via ex-
337 oskeleton assistance. The exoskeleton used in this experiment
338 was capable of providing a peak torque of approximately 30
339 Nm (~ 10 J per stride), which limited the available metabolic
340 rates that could be experienced. The ability to induce a wide
341 array of metabolic rates is important for sampling the psychometric
342 function. To obtain estimates of these functions
343 that have low uncertainty, they must be sampled across both
344 the constant and transitory regions of the psychometric curve
345 (22). The quality of the measurements is reflected in the pos-
346 terior distributions for the JND estimates, with high quality
347 measurements resulting in narrow posterior distributions. For
348 participants with smaller JNDs, the limitation on available
349 metabolic rates enabled the sampling of the majority of the
350 relevant areas of the psychometric curve. This allowed us to
351 exclude both excessively large and small estimates for those
352 participants. In contrast, for participants with high JNDs, the
353 imposed energetics spanned a comparatively narrower region
354 of the psychometric function, which only excluded lower JNDs.
355 The posterior distributions for participants with high JNDs
356 was asymmetric, and thus contained greater uncertainty in
357 the upper bound of the threshold. Consequently, any error
358 would likely bias the true JND to be greater than what was
359 measured in this study.

360 The indirect nature of manipulating energetics via an
361 exoskeleton increased variability in each participant's JND
362 distribution. In conventional psychophysical studies, re-
363 searchers have more deterministic control over the applied
364 stimulus under investigation. While exoskeletons are known
365 to influence energetics indirectly through several controllable
366 (11, 12, 76, 77) aspects of the torque profile, metabolic rate also
367 depends on many uncontrollable factors that appear noise-like
368 (63, 78, 79). This added noise results in sub-optimal sampling
369 of the psychophysical curve that reduces certainty in the cor-
370 responding JND estimates (80). This uncertainty is reflected
371 in the width of the posterior distributions of each participant.

372 The uncertainty of our results also stems from an experi-
373 mental limitation in how many trials are feasible. Conventional
374 best practice in the psychophysics literature would recommend
375 ~ 300 trials (81) when estimating the underlying psychophysical
376 curve; however, in this study we were able to obtain ~ 100
377 trials for each participant. The relatively low number of trials
378 was due to the time necessary to obtain responses. In this
379 protocol, participants experienced different metabolic rates
380 in sequence, each of which requires two minutes to estimate
381 the participant's metabolic rate. To obtain the necessary data
382 for this experiment, participants walked during three sessions
383 spread across three days, with each session lasting four hours.
384 This is in contrast to many studies of human perception, which
385 can obtain experimental data without the time delay of the hu-
386 man cardiopulmonary system ($\tau_r = 42$ s (82)). Consequently,
387 the uncertainty of our estimates was increased by approxi-
388 mately 60% (80) due to the lower number of samples, which
389 is reflected in the inter-participant distribution of the JNDs.

390 We found that despite the uncertainty in JND estimates,
391 these estimates were relatively insensitive to assumptions in
392 our approach. We used a uniform prior distribution in our
393 analysis that encompassed available JNDs between 0% and
394 70%. We investigated the sensitivity of our results to the

395 bounds of this prior distribution (*i.e.* 0% and 70%). We chose
396 our lower bound to reflect perfect human perception, while
397 the upper bound was informed by the reasonable assumption
398 that a human could consistently detect changes in energetics
399 just under those that result from switching from walking to
400 running (a $\sim 100\%$ change (83)). When the bounds of our
401 uniform prior distribution were changed to [0%, 60%] and
402 [0%, 80%], we found that the average inter-participant JND
403 estimate shifted from 22.7% to 21.9% and 23.2%, respectively.
404 These small shifts in the mean JND estimate indicate that our
405 approach is robust to the exact shape of our prior distributions,
406 and are thus well-informed by our sampled data.

407 Participants responded to questions about exertion, but
408 we are unable to know what specifically drove their answers.
409 Our study relies on participants honestly reporting perceived
410 exertion and not confounding this report with other percep-
411 tions, which could include perceptions of assistive torque and
412 assistance timing, as well as higher-level perceptions of the
413 helpfulness of the actuation profile. Our study was designed
414 to mitigate these confounding factors. Participants read a
415 predefined script to help elucidate the concepts of metabolic
416 rate and exertion. The prompt was designed using vocabu-
417 lary consistent with the Borg Scale, used to assess exertion
418 (73, 75, 84). Additionally, the torque profile was designed to be
419 intentionally complex (see Methods). That is, the participant's
420 metabolic rate was induced by the complex interaction of three
421 controller parameters, obscuring any foreseeable relationship
422 with metabolic rate (*i.e.* "it feels more powerful when it is
423 stronger, which must lower my exertion"). However, if partici-
424 pant's JNDs were affected by additional informative sources,
425 this would also bias the true JND of metabolic perception to
426 be greater than what was estimated.

Conclusion

427 Motivated by the need to develop augmentative exoskeletons
428 that can realize their potential to impact society, we quan-
429 tified the human ability to perceive the metabolic impact
430 of these technologies. Participants were able to perceive a
431 22.7% ($\pm 17.0\%$) change in their metabolic rate with 75%
432 accuracy. Thus, the average user cannot consciously perceive
433 the metabolic benefits from any modern exoskeletons, which
434 may hinder translation and adoption of these technologies.
435 Our results provide a new benchmark for augmentative ex-
436 oskeletons that will enable perceivable value to their users.
437 The relatively insensitive perception of metabolic rate also
438 suggests that alternative metrics for exoskeleton success, such
439 as reduced muscle fatigue, loading, or user preference, may be
440 more significant to user experience and exoskeleton success.

Materials and Methods

442 **Participants.** In this study, ten able-bodied participants ($N = 10$, 2
443 female, 8 male; age = 22.5 ± 3.17 years; mass = 70.9 ± 11.9 kg,
444 Table 1) walked using bilateral ankle exoskeletons on a treadmill.
445 The required number of participants was chosen based on a power
446 analysis to quantify a JND of 15% with 80% power and 5% type 1
447 error rate. We chose 15% as this was representative of the reductions
448 achieved by the best performing lower-limb exoskeletons (43–45). All
449 participants provided written informed consent before participation.
450 The study protocol was approved and overseen by the Institutional
451 Review Board of the University of Michigan Medical School.

Table 1. Participant Data

Participant	Number of Responses	Gender	Weight	Age
1	53	M	52.2	20
2	100	M	74.0	23
3	34	F	72.0	21
4	100	M	86.0	24
5	100	M	78.5	21
6	100	M	74.0	23
7	100	M	82.5	24
8	100	M	59.0	19
9	100	F	53.5	20
10	100	M	77.0	30

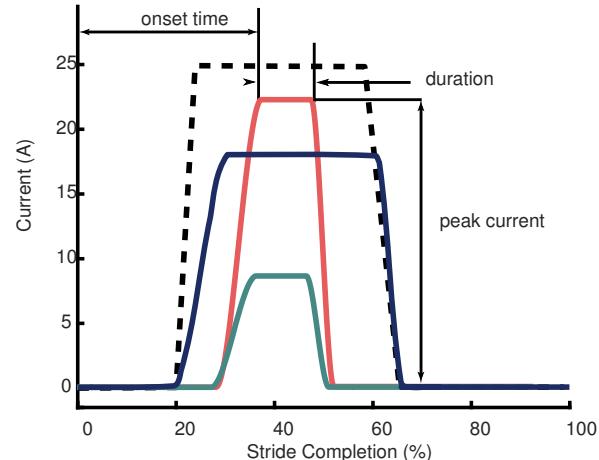


Fig. 4. Sample exoskeleton current profiles used in this experiment (colored lines). The profiles resembled square pulses and were parametrized using the following parameters: the peak current of the profile, the onset time of the profile, and the duration of the profile. The total bounds of possible current profiles are delineated by the black dashed line. The profiles' currents were mapped to motor torques through the motor torque constant and exoskeleton's transmission.

The current profiles were described using the stride completion percentage to mitigate any variations in step length or cadence that occurred during the trial. Thus, we inferred the stride completion percentage using heel-strike events. We detected these events by thresholding the onboard accelerometers (MPU-9250, Invensense, San Jose, CA) (88, 89).

Metabolic Rate Sensing. Participants walked with a randomized torque profile for two minutes, which produced a first-order dynamic response in metabolic rate (90). We measured participant metabolic rates through indirect calorimetry (79) (COSMED K5, Rome IT) (Fig. 1A). We estimated the user's steady state metabolic rate by fitting a first-order response (76, 90) to the breath-by-breath transient data gathered over the two minutes for each trial, with the steady state value representing the trial's metabolic rate. Prior to undergoing the walking protocol, participants stood still for four minutes to obtain their baseline metabolic rates. Each participant's standing metabolic rate was computed as the average rate over this four-minute interval. The standing metabolic rate was subtracted from each trial's metabolic rate measurement to isolate the metabolic effects of exoskeleton assisted locomotion (*i.e.* net metabolic rate).

Psychophysical Function Fitting. To estimate the Just Noticeable Difference (JND) of metabolic rate, which denotes the magnitude of change necessary for consistent perception, our experimental protocol requires the normalization of metabolic rates. That is, to compare across sequential trials with differing references, normalization is needed to combine these data to obtain a single JND for each subject under the assumption of a constant Weber Fraction (see Limitations subsection) (80). For normalization, consider a sequential pair of metabolic rates A then B; we normalized B (the comparison) as a percent change in rate from A. Note that rate A is the reference that changes from trial to trial. We used the normalized metabolic rate differences and corresponding participant responses to fit a psychometric function. The psychometric function then provided JNDs with units of percent change of metabolic rate (rather than absolute units (W/kg)). The JND is then equivalent to the WF expressed as a percentage.

A logistic psychometric function was used to model participant responses. This model predicted the probability that the participant would choose "the comparison is greater" as a function of the normalized metabolic rate difference between the two trials. Using the convention from above, the psychophysical curve predicts the probability that rate B is greater than rate A, as a function of the relative difference between A and B. The logistic function of

Experimental Protocol.

Walking Protocol. Participants experienced numerous metabolic rate changes in sequence that stemmed from the assistance provided by the ankle exoskeletons. Participants walked for 20 minute blocks, where each block consisted of 10 trials in series. Following each pair of trials, participants responded regarding which condition they perceived had a higher metabolic rate by agreeing or disagreeing to the binary question "*is the current level of exertion higher than the previous level of exertion?*". Participants responded non-verbally with either a 'thumbs up' or a 'thumbs down'. Thus, each block consisted of nine comparisons across ten trials and participants completed approximately 11 blocks across three to four days of data collection. We chose the two minute walking duration for each trial to balance metabolic estimation quality with experiment duration; Zhang *et al.* demonstrated that the metabolic estimation error with two minutes of data is approximately 2% (85). The two-minute trial duration also allowed the participants adequate time to experience and react to each walking condition.

Prior to the experiment, participants familiarized themselves with several aspects of the experimental protocol. Participants read a lay explanation of metabolic rate to familiarize themselves with the concept. Next, participants were primed to react to their feeling of general exertion by reading the instructions of the Borg Rating of Perceived Exertion (84, 86). We chose to have the participants read information on the Borg Scale because it has previously been demonstrated to produce accurate estimates of exertion (75). Finally, participants underwent a four-minute acclimatization period in which they were exposed to different representative exoskeleton behaviors that spanned what could be encountered during the experiment.

Exoskeleton Control. We used bilateral ankle exoskeletons (Dephy ExoBoot, Dephy Inc. Maynard MA) to manipulate the metabolic rate of the wearer. The exoskeleton (Fig. 1B) used electric motors (~300 W) and flat cable transmission (~15:1) to apply plantarflexion assistance during walking. The assistance was governed by parameterized current profiles that resembled a square pulse (see Fig. 4). The current profiles were governed by three parameters; we manipulated the onset timing, pulse magnitude, and pulse duration. We chose i) onset timings from a uniform distribution bounded between 25% and 50% of stride time, ii) pulse magnitudes from a uniform distribution bounded between 15 A and 25 A (corresponding to approximately 12 and 20 Nm with the ExoBoot's nonlinear transmission), and iii) pulse durations from a uniform distribution with variable bounds. The variable bounds for the pulse duration depended on the sample drawn from the onset timing distribution such that the square pulse had a minimum duration of 10% of stride, and a maximum duration of 60% of stride time. Onset timings that occurred earlier than 30% of stride were additionally constrained to have a minimum pulse duration of 20% of stride, which was imposed to prevent excessive device wear. We chose these bounds as they have been shown to significantly alter participant metabolic rate, and thus allow us to sample as wide an energetic range as possible (12, 76, 87) while balancing device integrity and user safety.

551 (reference-normalized) stimulus x had the following form,

$$\Psi(x, \alpha, \beta, \gamma, \lambda) = \gamma + \frac{1 - \lambda - \gamma}{1 + e^{-\beta(x-\alpha)}} \quad [1]$$

553 where $\Psi(x)$ was parametrized by the following variables: the experimental lapsing rate λ , which was fixed at the commonly used value of 0.02 (22); the false positive rate γ , which was fixed at the lapsing rate since participants underwent a stimulus discrimination task (22, 81); the logistic function's threshold point α on the x-axis, which anchors the center of the logistic curve and was set to 0; and the parameter β which governs the slope of the logistic function and is the only degree of freedom estimated during the fitting procedure.

561 Using the modeled psychometric curve, we quantified the Just Noticeable Difference (JND) which represents the minimum change in metabolic rate that must occur before an observer can reliably perceive with 75% accuracy (91). The JND is calculated by taking the difference between the values of x at $\Psi(x) = 0.75$ and $\Psi(x) = 0.25$ and dividing the difference by two. By fixing the other parameters of $\Psi(x)$ at the values specified, the JND thus depended only on β

$$\text{JND} = k/\beta, \quad [2]$$

570 with a scale constant k in terms of the fixed parameters,

$$k = \frac{1}{2} \ln \left[\frac{(0.75 - \gamma)(1 - \lambda - 0.25)}{(1 - \lambda - 0.75)(0.25 - \gamma)} \right]. \quad [3]$$

572 Shallower slopes (indicating less sensitivity) caused higher JNDs, while steeper slopes (indicating higher sensitivity) caused lower JNDs. A separate logistic model was fit for each participant using Bayesian analysis (39). This approach yielded a posterior distribution of JND estimates for each participant. From this posterior distribution, we extracted the maximum likelihood estimate for each participant, which was considered the estimated JND.

579 Statistics and Comparisons

580 Our approach of using Bayesian estimation enables quantification of both the JND value for each subject in addition to the uncertainty about our estimates. We chose Bayesian estimation because preliminary work indicated the conventional Maximum Likelihood Estimation approach could fail to converge (92). We conducted our Bayesian analysis using the PyMC3 library in Python (93). Each participant's prior distribution of JND estimates was chosen as a uniform distribution between 0% and 70%, representing a plausibly large range of perceptual abilities.

589 The posterior JND distributions were obtained by updating our prior distributions using the participant response data. We used the No-U-Turn Sampler (NUTS) (94) strategy—a Markov Chain Monte Carlo (MCMC) algorithm—to numerically approximate the posterior distribution of possible JND values; we used four sampling chains with 8000 tuning iterations and 4000 posterior predictive samples. We chose these values to balance computation time and accuracy. The JND with the highest likelihood in the posterior distribution was the nominal JND estimate. Each posterior also yielded a 95% credible interval for the JND estimates.

599 Our approach using Bayesian statistics enabled investigation of several assumptions made about the JND distributions. We 600 compared three different JND models using the Watanabe-Akaike 601 Information Criterion (WAIC) metric, which evaluates the predictive 602 power of models and corrects for the number of model parameters 603 to favor parsimony (41). The three competing models were: i) a 604 pooled model that featured a single JND parameter and posterior 605 distribution that applied to all participants; ii) an independent 606 model that assumed each participant had a different JND; and iii) a 607 variable Weber Fraction (WF) model that allowed for multiple 608 JND estimates per participant depending on the magnitude of the 609 reference data. In each model, our parameter estimates were 610 informed by the data, yielding posterior distributions over all possible 611 parameter estimates. In the pooled model, the single JND estimate 612 predicted the responses of all participants; in the independent 613 model, each participant's responses were predicted by individual 614 JND distributions which we estimated; and in the variable-WF 615 model, each participant had two different JNDs for references above 616 or below the average reference value. The pooled model featured 617 2000 tuning iterations and 2000 posterior predictive samples for 618

619 reduced computational time, given the greater number of responses 620 used as input. The remaining models used our default settings of 621 8000 tuning samples and 4000 posterior predictive samples due to 622 the relative sparsity of the data and the complexity of the models.

623 **Tables.** In addition to including your tables within this 624 manuscript file, PNAS requires that each table be uploaded to the 625 submission separately as a “Table” file. Please ensure that 626 each table .tex file contains a preamble, the \begin{document} 627 command, and the \end{document} command. This is necessary 628 so that the submission system can convert each file to PDF.

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