## Quantifying Movement

MCEN 4/5228

Modeling of Human Movement

Fall 2021

## Inverse problems

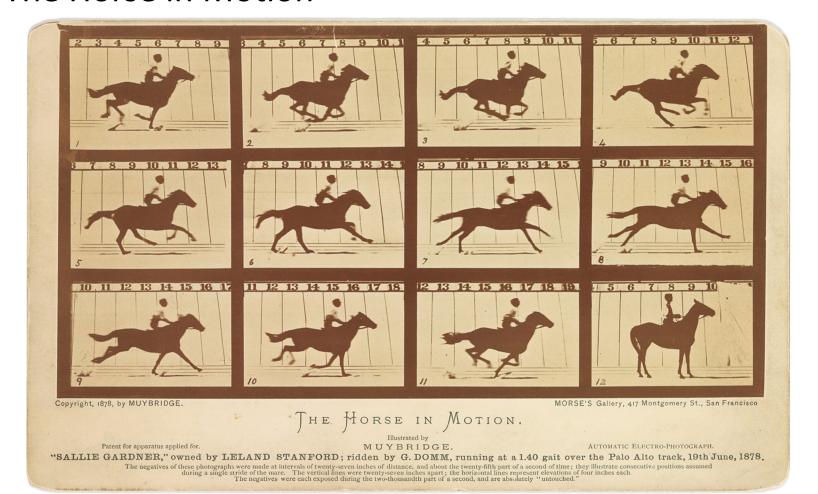
- Involve phenomena that cannot be observed directly, and must use indirect measurements to analyze
- Use observations to understand underlying phenomena responsible
- Most problems in Biomechanics are inverse problems
  - Examples?
- Forward problems: induce a response deliberately and study observed effects

## Quantifying movement

- Measurement techniques
- Unconstrained inverse kinematics
- Constrained inverse kinematics

## Measurement techniques

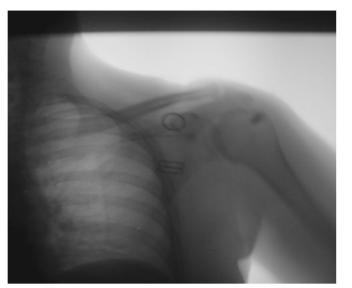
• "The Horse in Motion"

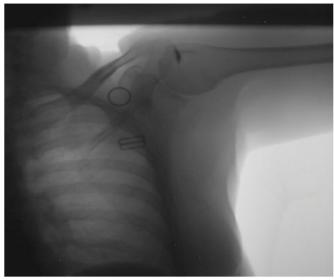


## Video analysis

Remains key component of biomechanical analyses

- Other techniques being developed:
  - Cineflouroscopy: x-ray images taken over time





## Video analysis

- Remains key component of biomechanical analyses
- Other techniques being developed:
  - Cineflouroscopy: x-ray images taken over time
  - Implanting bone-anchored pins
  - IMUs

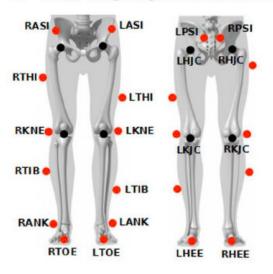
## Motion capture "mocap"

- Current standard
- Use video cameras to track small spherical markers affixed to subject's skin
- Use inverse kinematics to calculate underlying skeletal joint angles



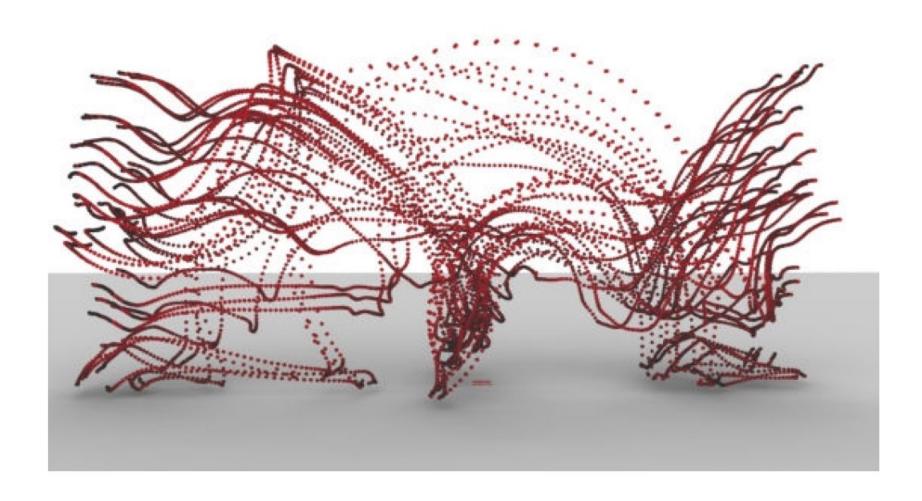


#### (a) Lower-body Plug-in-Gait market set

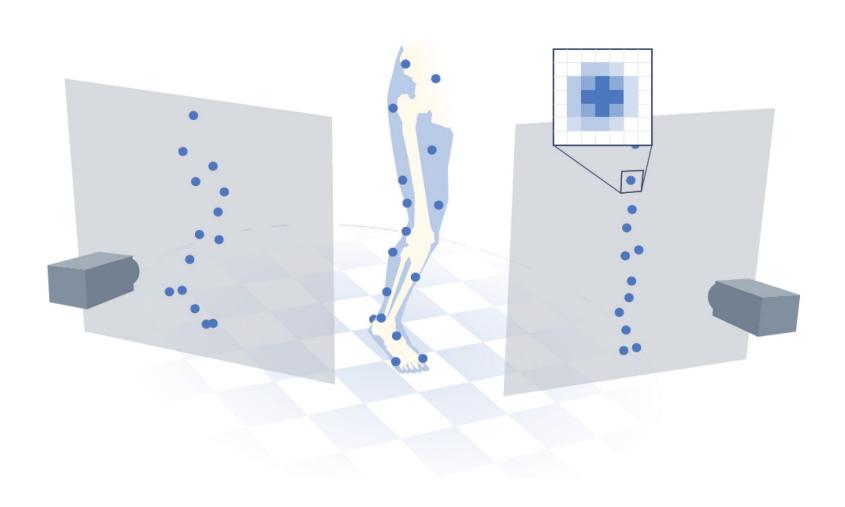








## Mocap challenges



## Mocap Challenges

- Marker occlusion
- Motion artifact
- Marker labelling errors

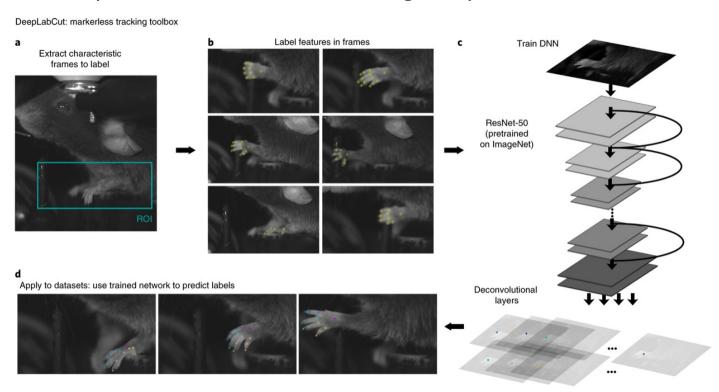
- Solutions:
  - Virtual markers
  - Filtering
  - Interpolation

## Mocap → Joint angles

Prepare for experiment Collect marker Calibrate mocap system trajectories Affix markers to subject Pre-process data: Label markers Correct aberrations Low-pass Filter Compute joint angles over time using inverse kinematics

## The future

- Markerless motion capture
  - DeepLabCut
    - http://www.mousemotorlab.org/deeplabcut



## The future

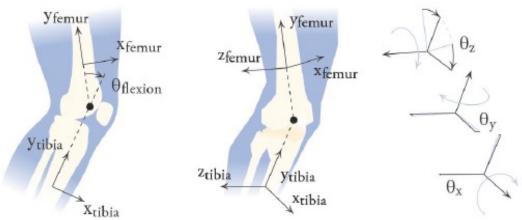
- Markerless motion capture
- IMUs
  - Integrated into clothing
  - Smart phones

## Quantifying movement

- Measurement techniques
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## Unconstrained inverse kinematics

- Goal is to estimate joint angles from marker trajectories
- Must establish a reference frame based on positions of markers on segments
- Compute joint angle over time by comparing orientations of reference frames fixed to adjacent segments



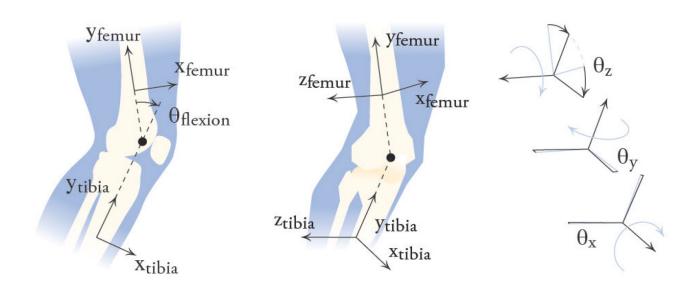
## Unconstrained inverse kinematics

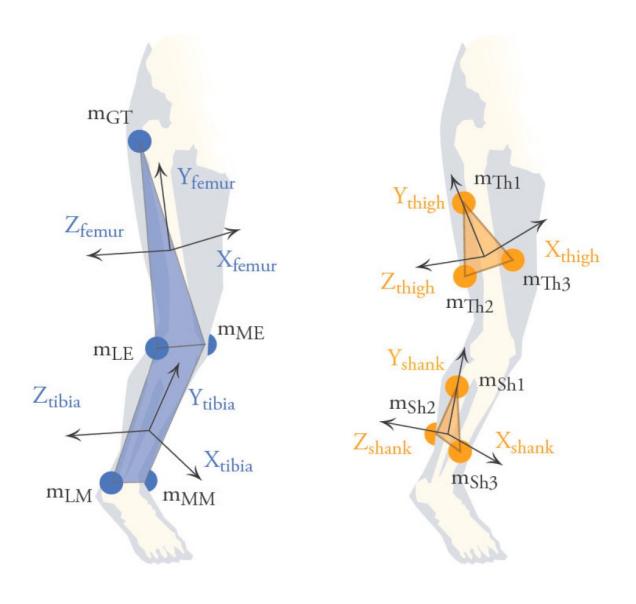
- Goal is to estimate joint angles from marker trajectories
- Must establish a reference frame based on positions of markers on segments
- Compute joint angle over time by comparing orientations of reference frames fixed to adjacent segments
- "unconstrained" because no limits imposed on limb lengths or underlying skeletal model
- What about joint angular velocities and accelerations?

## Joint angle analysis

## Challenges...

- Ideally track reference frames on femur and tibia
- BUT... markers do not track anatomical segments
- Must transform transform marker motion to anatomical segment motion

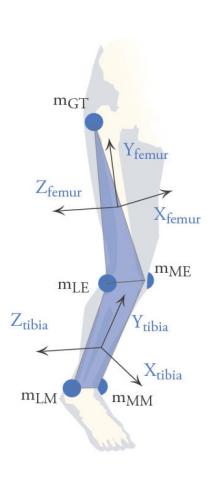




**Anatomical Reference Frame** 

Tracking (marker) Reference Frame

## Anatomical reference frame



Represent underlying skeletal structure

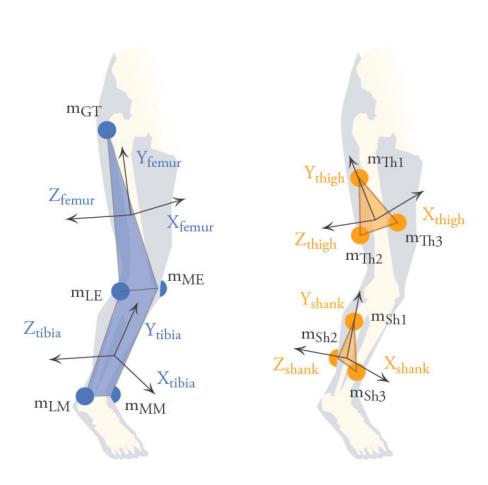
Defined by placing maker on anatomical landmarks (left)

#### Example (Femur):

- The origin is midway between the greater trochanter marker (mGT) and the knee joint center (midpoint between femoral epicondyle markers, mLE and mME)
- Z<sub>femur</sub> is parallel to the knee joint axis, which is defined as the vector from the medial to lateral femoral epicondyle markers, normalized to unit length
- X<sub>femur</sub> is the cross product of Z<sub>femur</sub> and a vector from the mGT to one
  of the femoral epicondyle markers, normalized to unit length.
- Y<sub>femur</sub> is the cross product of Z<sub>femur</sub> and X<sub>femur</sub> which completes the right-handed reference frame.

Knee flexion angle: orientation of the tibia reference frame relative to the femur reference frame in the sagittal plane

## Tracking reference frame



- Also fixed to body segments
- But may not be aligned with anatomically relevant axes
- Are defined by at least three makers on each segment
- Placed in locations that remain visible with small amounts of soft tissue motion
- Allow more convenient placement of markers

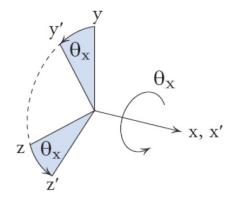
## Transformation matrices

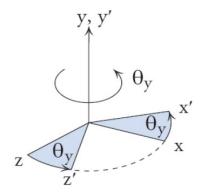
$$R^{x} = \begin{bmatrix} 1 & 0 & 0 \\ 0 & \cos \theta_{x} & -\sin \theta_{x} \\ 0 & \sin \theta_{x} & \cos \theta_{x} \end{bmatrix}$$

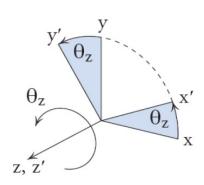
$$R^{y} = \begin{bmatrix} \cos \theta_{y} & 0 & \sin \theta_{y} \\ 0 & 1 & 0 \\ -\sin \theta_{y} & 0 & \cos \theta_{y} \end{bmatrix}$$

$$R^{z} = \begin{bmatrix} \cos \theta_{z} & -\sin \theta_{z} & 0\\ \sin \theta_{z} & \cos \theta_{z} & 0\\ 0 & 0 & 1 \end{bmatrix}$$

- Use transformation matrices to describe anatomical joint angles from mocap data.
- Any spatial rotation can be expressed as a sequence of elementary rotations.

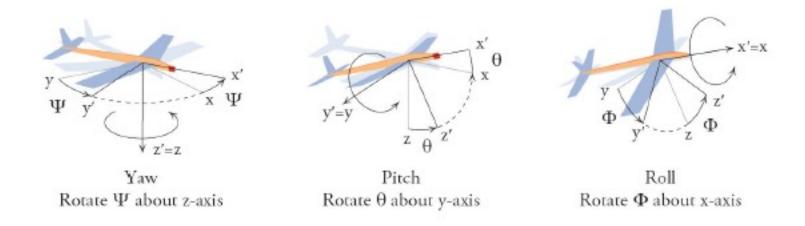






## Euler angles

- Three angles are required to describe the orientation of one reference frame in space to another
- When these three parameters are the angles of three elementary rotations, they are called Euler angles
- A common sequence of rotations (z-y-x):



## Euler angles

 Rotation matrix that related orientations of the original and final frames is:

$$R = R^{z} \begin{vmatrix} R^{y} | \theta_{z} = \psi & R^{x} | \theta_{y} = \theta & R^{x} | \theta_{z} = \phi$$

$$= \begin{bmatrix} \cos(\theta)\cos(\psi) & \sin(\phi)\sin(\theta)\cos(\psi) - \cos(\phi)\sin(\psi) & \cos(\phi)\sin(\theta)\cos(\psi) + \sin(\phi)\sin(\psi) \\ \cos(\theta)\sin(\psi) & \sin(\phi)\sin(\theta)\sin(\psi) + \cos(\phi)\cos(\psi) & \cos(\phi)\sin(\theta)\sin(\psi) - \sin(\phi)\cos(\psi) \\ -\sin(\theta) & \sin(\phi)\cos(\theta) & \cos(\phi)\cos(\theta) \end{bmatrix}$$

$$= \begin{bmatrix} r_{xx} & r_{xy} & r_{xz} \\ r_{yx} & r_{yy} & r_{yz} \\ r_{zy} & r_{zy} & r_{zz} \end{bmatrix}$$

$$\begin{split} R &= R^{z} \bigg|_{\theta_{z} = \psi} R^{y} \bigg|_{\theta_{y} = \theta} R^{x} \bigg|_{\theta_{x} = \phi} \\ &= \begin{bmatrix} \cos(\theta)\cos(\psi) & \sin(\phi)\sin(\theta)\cos(\psi) - \cos(\phi)\sin(\psi) & \cos(\phi)\sin(\theta)\cos(\psi) + \sin(\phi)\sin(\psi) \\ \cos(\theta)\sin(\psi) & \sin(\phi)\sin(\theta)\sin(\psi) + \cos(\phi)\cos(\psi) & \cos(\phi)\sin(\theta)\sin(\psi) - \sin(\phi)\cos(\psi) \\ -\sin(\theta) & \sin(\phi)\cos(\theta) & \cos(\phi)\cos(\theta) \end{bmatrix} \\ &= \begin{bmatrix} \mathbf{r}_{xx} & \mathbf{r}_{xy} & \mathbf{r}_{xz} \\ \mathbf{r}_{yx} & \mathbf{r}_{yy} & \mathbf{r}_{yz} \\ \mathbf{r}_{zx} & \mathbf{r}_{zy} & \mathbf{r}_{zz} \end{bmatrix} \end{split}$$

 Can calculate the z-y-x Euler angles from an arbitrary rotation matrix by equating last two equations.

$$\phi = \operatorname{atan2}(r_{32}, r_{33})$$

$$\theta = \operatorname{atan2}(-r_{31}, \sqrt{r_{11}^2 + r_{21}^2})$$

$$\psi = \operatorname{atan2}(r_{21}, r_{11})$$

## Transformation matrices

- If reference frames A and B are fixed to adjacent body segments
  - An arbitrary point expressed in frame B ( $[p]_B$ ) can be expressed in frame A ( $[p]_A$ ):

$$[p]_A = {}^AR_B [p]_B$$

 Where the columns of <sup>A</sup>R<sub>B</sub> are the coordinates of unit vectors pointed along frame B's xyz axes when expressed in frame A.

## When the origins don't coincide

 Relationship between frames can be described by a 4x4 transformation matrix that captures their relative position and orientation:

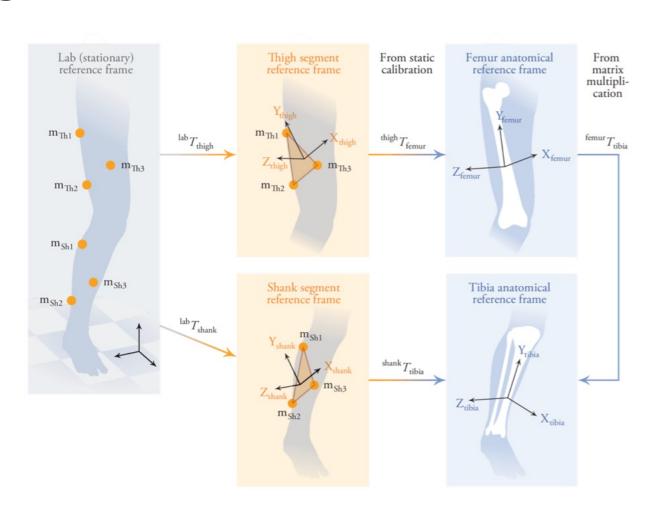
$${}^{\mathbf{A}}T_{\mathbf{B}} = \begin{bmatrix} {}^{\mathbf{A}}R_{\mathbf{B}} & \begin{bmatrix} p^{\mathbf{A}_{\mathbf{o}}\mathbf{B}_{\mathbf{o}}} \end{bmatrix}_{\mathbf{A}} \\ \hline 0 & 0 & 1 \end{bmatrix}$$

[p<sup>AoBo</sup>]<sub>A</sub> is the position vector from the origin of frame A to the origin of frame B, expressed in frame A.

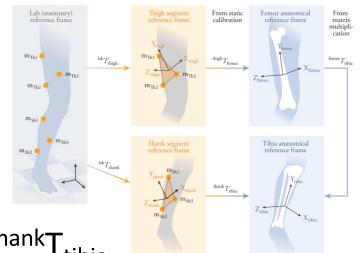
Point expressed in frame B can be expressed in frame A

$$\begin{bmatrix} [p]_{A} \\ 1 \end{bmatrix} = {}^{A}T_{B} \begin{bmatrix} [p]_{B} \\ 1 \end{bmatrix}$$

# Calculating anatomical joint angles



# Calculating anatomical joint angles



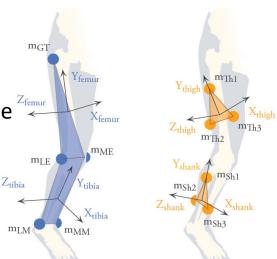
 $\mathsf{femurT}_{\mathsf{tibia}} = \mathsf{femurT}_{\mathsf{thigh}} \, \mathsf{thighT}_{\mathsf{lab}} \, \mathsf{labT}_{\mathsf{shank}} \, \mathsf{shankT}_{\mathsf{tibia}}$ 

labT<sub>shank</sub>: Calculated from shank markers in lab reference frame

 $^{\text{lab}}\text{T}_{\text{thigh}}$ : Calculated from thigh markers in lab reference frame

shankT<sub>tibia</sub>: Calculated from tibia markers in lab reference frame Next, transformed to shank reference frame

thigh T<sub>femur</sub>: Calculated from femur markers in lab reference frame Next, transformed to thigh reference frame



## Quantifying movement

- Measurement techniques
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- Constrained inverse kinematics

## Constrained inverse kinematics (IK)

#### Unconstrained IK limitations

- Body segments can change length during movement
- Leads to error in dynamics calculations

#### Constrained IK

- Uses global optimization to minimize the distance between the locations of experimental markers and analogous markers on underlying skeletal model.
- Model is composed of rigid bodies, connected by joints that only allow physiological motion.



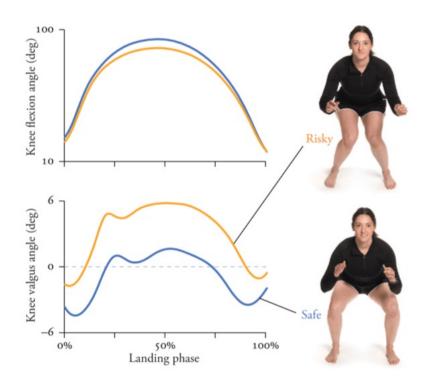
$$J = \min_{\underline{q}} \left\{ \sum_{k \in \text{Markers}} w_k \left\| \underline{x}_k^{\text{exp}} - \underline{x}_k(\underline{q}) \right\|^2 \right\}$$

## **Applications**

- Joint angles useful for computing joint moments and muscle forces
- Also intrinsically useful
  - distinguish between normal and pathological gait patterns
  - Monitor rehabilitation during stroke recovery
  - Predict injury risk in athletes and prescribing training programs

## ACL injury risk example

- Knee kinematics during landing for a female soccer player
- Increased knee valgus angle → injury risk



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### For next class

Download OpenSim

https://opensim.stanford.edu

https://simtk.org/frs/?group\_id=91