

5. Project Description

Objectives of the project

Background

Exoskeletons have shown promise in assisting human mobility across a range of scenarios, such as supporting coordination for hemiplegic patients, assisting movement during physical rehabilitation, enabling paralyzed individuals to walk again, and even enhancing endurance during demanding activities like hiking or climbing. To achieve such supportive effects, various modeling approaches have been employed, including analytical mathematical models, machine learning-based models, and highly nonlinear deep learning models. The assistance performance of the exoskeleton has proven to be excellent; however, achieving such effectiveness still requires careful personalization for each individual.

Problem

Due to diversity in human physiology and locomotion environments, it takes a long time, large amounts of data, and considerable effort to personalize the exoskeleton model, regardless of the modeling approach used. The user needs to spend a high cost of time to provide the information. This is the main reason why most people hesitate to use exoskeletons in their life, even though they offer significant support. If we want to make exoskeletons a device that everyone can benefit from, it is necessary to collect data across a wide range of unexpected and critical situations. However, acquiring such data remains a significant challenge—yet it is essential for making the exoskeleton model personalized enough to satisfy each user's requirements.

Solution

Our system provides an automated tuning environment (**Figure 1**) to reduce the time consumption of personalizing exoskeleton models. To eliminate the discomfort of wearing sensors and specialized suits, we develop a markless motion capture system (MOCAP, <https://www.youtube.com/watch?v=za70fA9GLbw>). Based on our MOCAP, the data collection process is not only fast and convenient but also capable of capturing fine-grained kinematic parameters of the user. Following this, our system leverages digital twins technology: by constructing a user-specific neuro-musculoskeletal (NMS, https://www.youtube.com/@hip_exo) model in simulation, we can synthesize physiological data across various scenarios and environments—such as stair climbing, running, everyday walking, or even falling. Another simulated model, including both the hardware and software aspects of the exoskeleton, will learn to minimize human-machine interaction (HMI) obstruction through simulated collisions. The information generated from this process will be transmitted via a virtual interface that mirrors the real-world exoskeleton software, ultimately producing a model that has adapted to the user's habitual movement patterns. Once this personalized exoskeleton model is complete, it can be updated to the real exoskeleton. The user can immediately benefit from this exoskeleton model, which is ready to assist with a variety of daily tasks and movement needs.

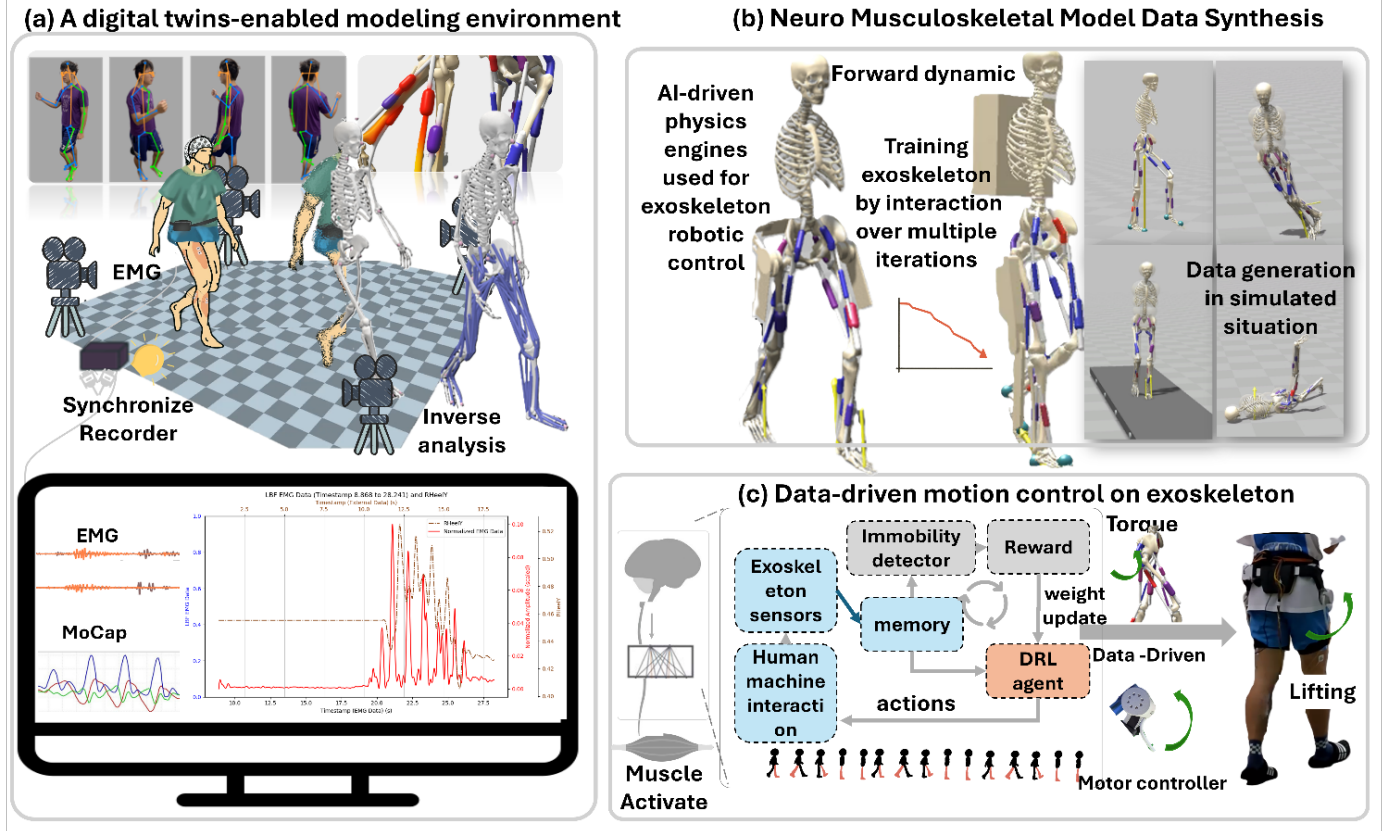


Figure 1. Overview of personalized neuro-muscular exoskeleton control system. (a) A digital twins-enabled modeling environment. Through markerless MOCAP and inverse analysis, an NMS model that matches the subject's fully NMS characteristics, and the movements are reconstructed on this digital twins. (b) NMS Data Synthesis. Subject movement data that was not recorded can be synthesized under different simulated scenarios in simulation. (c) Data-driven coordination of motion control on exoskeleton. Deep Reinforcement Learning (DRL) is the core of our data-driven model training framework. Once trained, the model can be deployed to real hardware.

Feature design and technologies used

This approach consists of two major components:

- *A personalized digital twins modeling pipeline:* an NMS model is built based on our MOCAP, while electromyography (EMG) recordings are still needed for a one-time calibration (**Figure 2**). We further extend the model using forward dynamics to synthesize training data for different motion scenarios, including walking, stair climbing. This framework potentially lays the groundwork for what could be considered a virtual cerebellum. Importantly, the virtual environment, in turn, allows us to analyze this agent from a top-down, omniscient perspective, providing insights that are difficult to obtain in real-world settings.

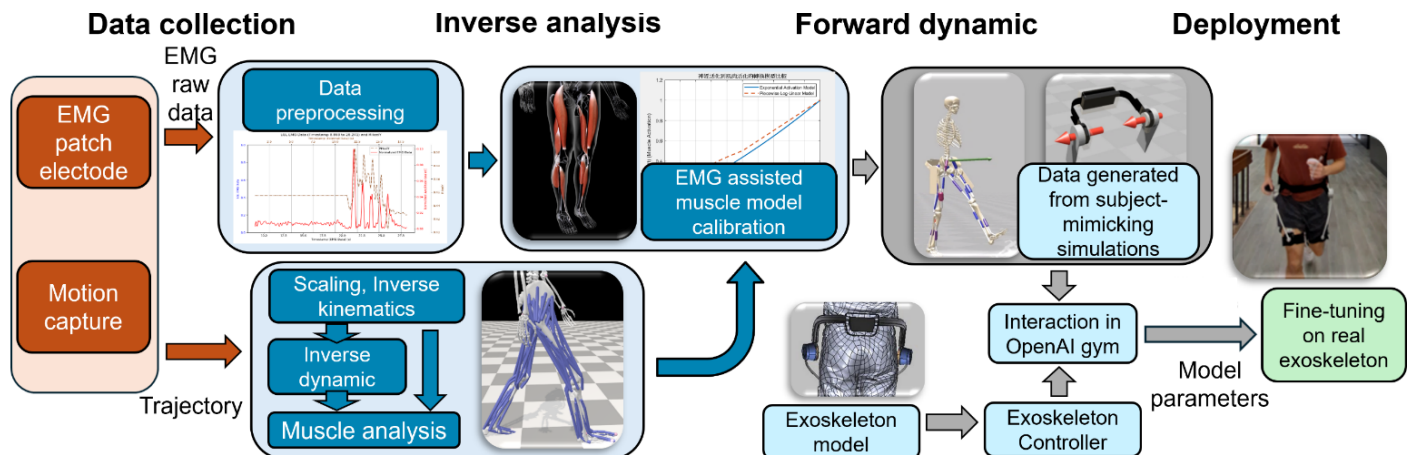


Figure 2. Pipeline of building the subject's digital twins and deploying it to an Exoskeleton. The pipeline starts with data collection using MOCAP and EMG to track joint trajectories and muscle activation. Inverse

analysis scales a generic model to the subject's biomechanics, estimating joint torques and muscle forces via inverse dynamics, muscle analysis, and EMG-assisted modeling is utilized to merge the motion and EMG outcomes. Forward dynamics simulations synthesis additional movement data, which is used to train the exoskeleton controller in a simulated environment (OpenAI Gym). Finally, the trained model parameters are fine-tuned and deployed to a real exoskeleton for effective control.

- *A DRL automatically training framework:* This framework teaches the model to optimally assist the user while preventing unexpected falls caused by exoskeleton misalignment, abrupt halts, and other disturbances. One of the key advantages of this data-driven approach is its ability to proactively predict user-specific intent, enabling the creation of a personalized control system that supports more sophisticated motion. After training, the controller is deployed on the exoskeleton hardware and fine-tuned during real-world use if still needed. It eliminates the need for prolonged user participation and manual parameter tuning.

Safety precaution

A detailed, individualized model is essential for effective assistance. By combining biomechanics, data-driven methods, AI, robotics, and training models, this project advances precision medicine. The NMS model also serves as a safety mechanism, automatically stopping the motor if force or joint angle exceeds human tolerance, ensuring safe assistance.

Preliminary Results

Our system offers general responses to a wide range of gait patterns, catering to everyone from everyday individuals to athletes, and including those with pathological gaits. We have achieved personalized solutions tailored to each individual's needs, through a well-established pipeline as shown in **Figure 4**. **Figure 5** illustrates a more detailed process of transitioning from real-world motion to its virtual counterpart.

We have preliminarily verified the system's ability to provide personalized gait prediction and correction, even under complex pathological conditions (**Figure 6**, https://www.youtube.com/@hip_exo), which also highlights the necessity of incorporating NMS models for individualized control. Naturally, the same framework is fully capable of adapting to general users, offering customized support, making it a universally applicable solution for improving mobility and overall well-being. In the next step, we returned to MOCAP environment and clearly observed the difference when we compared the model's assistive performance before and after personalization as shown in **Figure 7**, highlighting the significant improvements achieved through individualized adaptation.

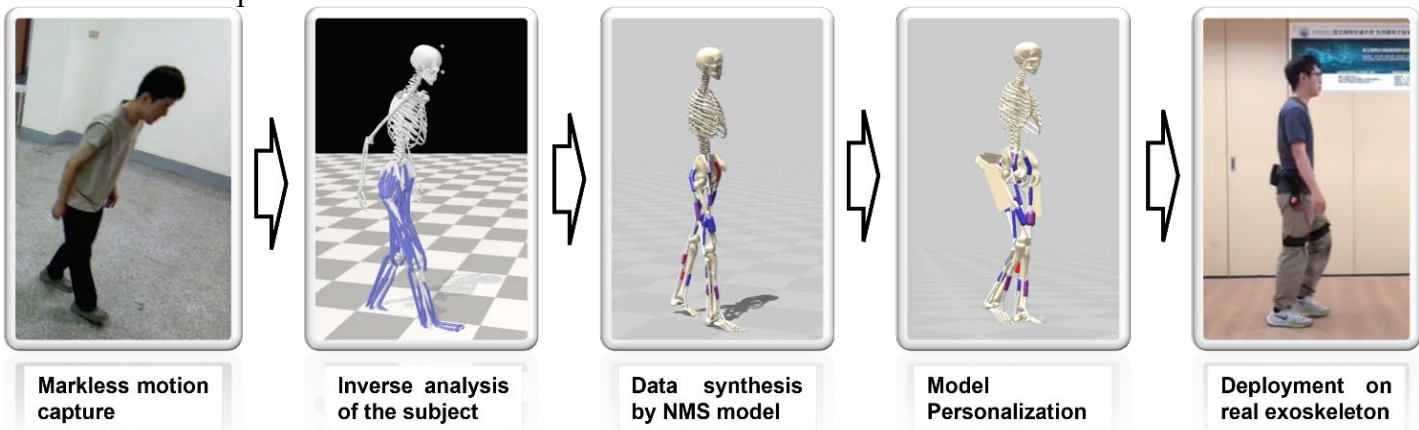


Figure 4 Implementation of a Personalized Solution Pipeline.

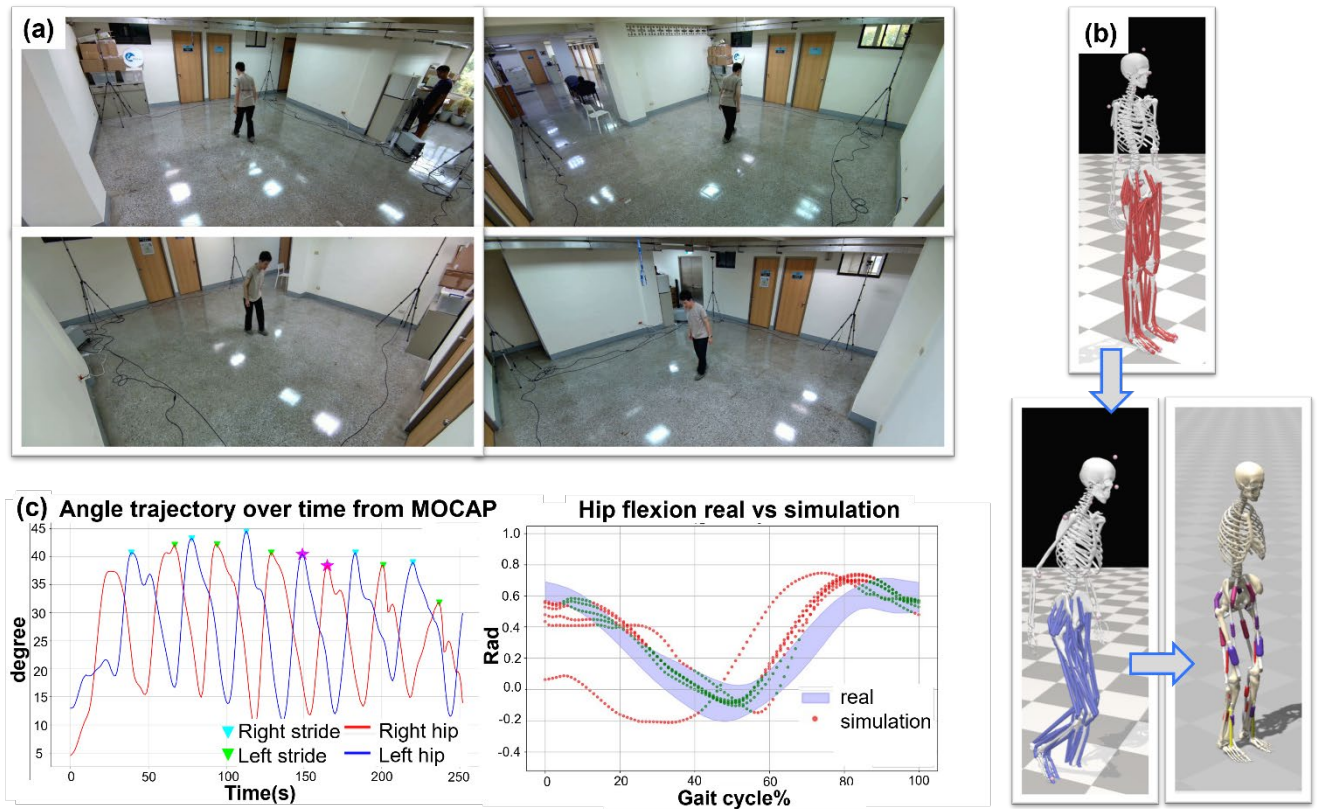


Figure 5 MOCAP-to-simulation workflow. (a) Real-world walking trials captured using our MOCAP. (b) NMS model calibration driven by MOCAP data, embodies the subject's unique gait patterns through our tuning. (c) Angle trajectories validation between real data and simulation.

This system serves as a rapid personalization tool for exoskeletons, leveraging our MOCAP and NMS digital twins' technology to enable widespread usability. It allows exoskeletons to go beyond athletic or healthy users and address the needs of individuals with pathological conditions or undergoing rehabilitation, achieving a level of generalizability not possible with conventional systems.

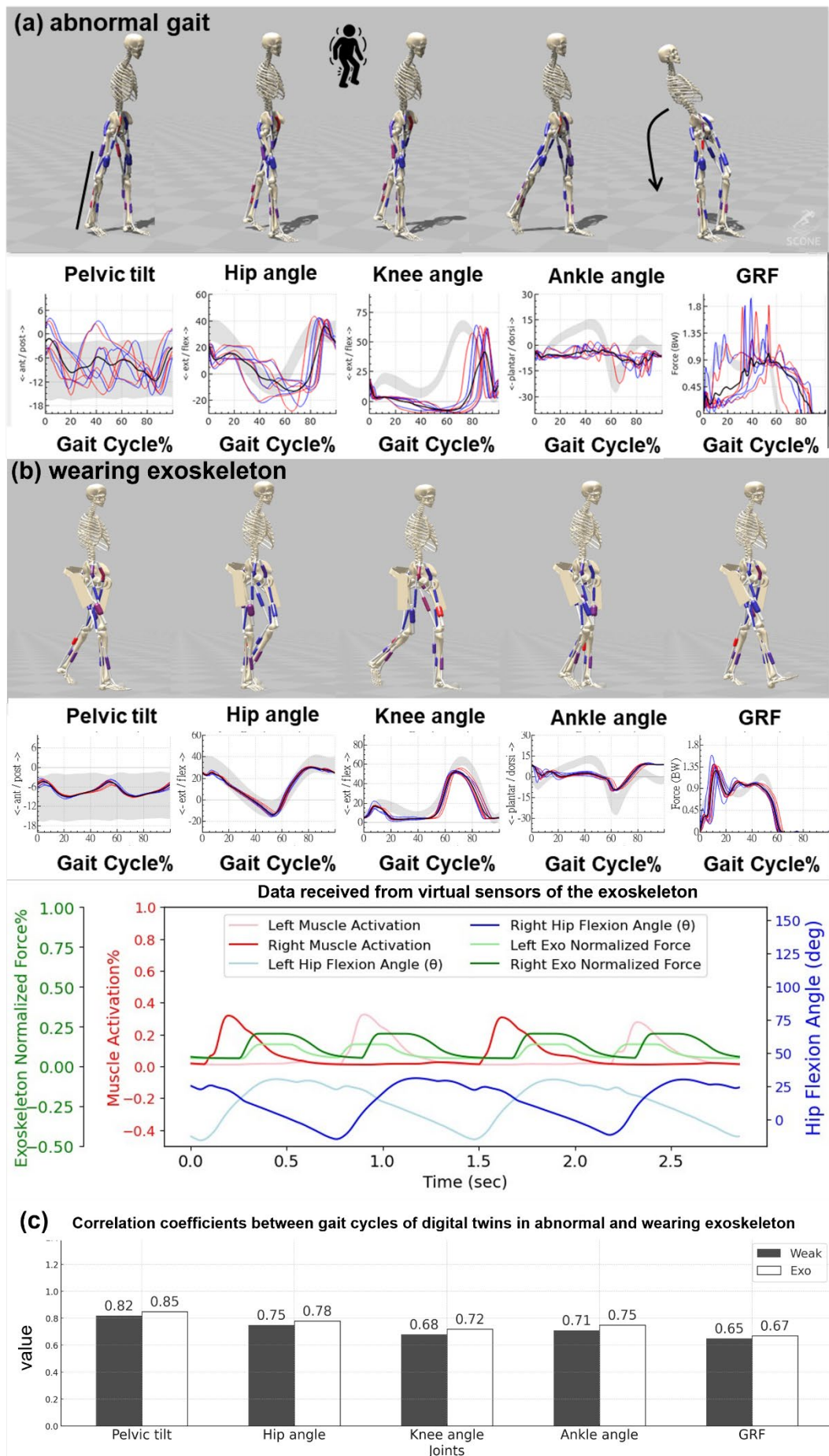
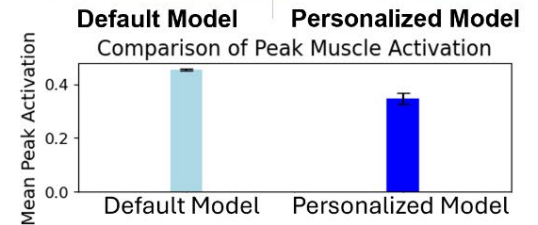


Figure 6. Personalized model tuning in simulation. (a) Abnormal gait shows initial knee stiffness, delayed movement, large step variability, and ends in a fall. (b) Wearing an exoskeleton improves gait stability significantly. The exoskeleton receives data in a virtual sensor that mirrors what would be obtained from a real exoskeleton, enabling a smooth transition from simulation to reality. (c) We use correlation coefficients to quantify the differences between gait cycles digital twins in abnormal and wearing exoskeleton.

(a) MOCAP model validation environment



(b) Comparison of default and personalized model



(c) Validation of personalization performance

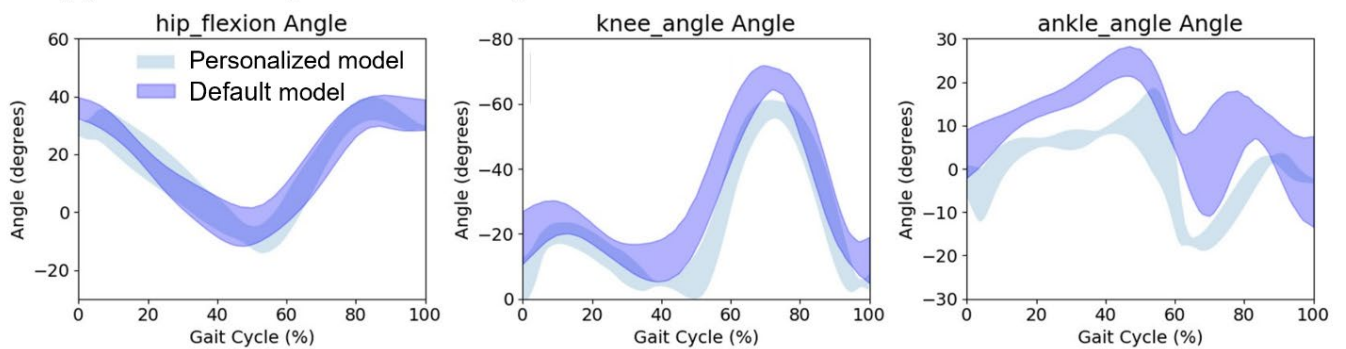


Figure 7. Validation and Comparison of Default vs. Personalized Models. (a) The MOCAP system is also used as a validation environment to assess model accuracy. (b) A clear example is observed during stair climbing: the default model required hand support, while the personalized model adapted well to the terrain. The reduction in peak muscle activation further demonstrates improved biomechanical efficiency. (c) Inverse kinematics analysis shows that the personalized model enables more fine-grained joint coordination than the default model, resulting in gait patterns that better reflect individual movement habits.