



WEARABLE/TECHNOLOGY AND

MOBILE HEALTHCARE (WTMH) LAB

Mixed Reality Mirror Therapy System: Integrating Task-Oriented Stroke Rehabilitation with Physical Haptic Feedback and EEG Evaluation

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Abstraction

Stroke is one of the leading causes of disability today, with hemiplegia as its main aftereffect, impairing motor and sensory functions on one side of the body. Mirror therapy uses a mirror to reflect the unaffected healthy hand onto the affected side, utilizing brain illusions to enhance neuroplasticity in rehabilitation. In recent years, VR and AR have been increasingly applied in rehabilitation therapy, each with advantages and limitations in terms of environmental realism and interactivity. This study improves upon the original VRMT system by adding a transparent background for mixed reality, combining mirror therapy, task-oriented rehabilitation, and tactile feedback from physical objects. The enhanced MRMT system was developed and evaluated using EEG, yielding positive results.

Introduction & Objective

In previous research and systems developed by our lab, both VR and AR had areas for improvement in mirror therapy.

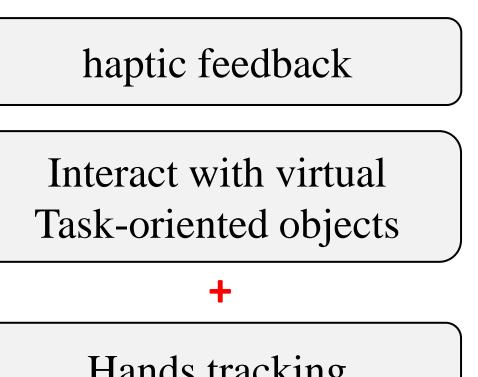


- virtual environment
- inability to change direction
- Lack of tactile feedback



- Unable to interact
- Lack of tactile feedback

Combine the strengths of both VR and AR, while adding a haptic feedback system to create a more realistic and multisensory stroke rehabilitation experience within a mixed reality environment.



Hands tracking

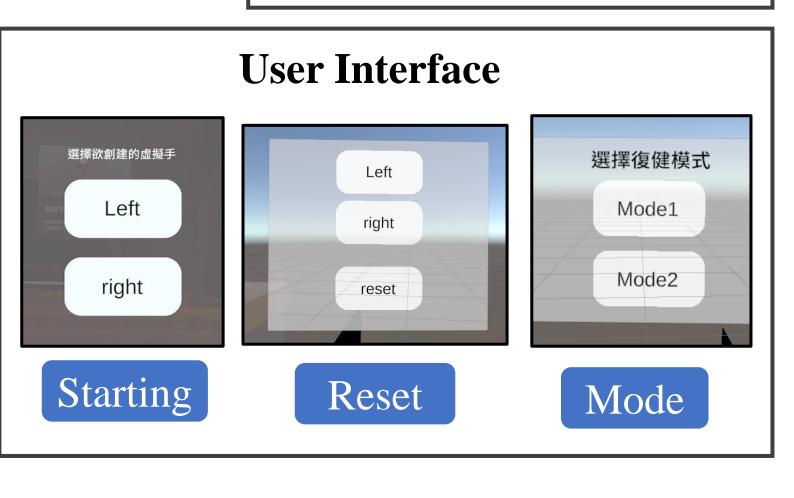
Passthrough mode With 360° view

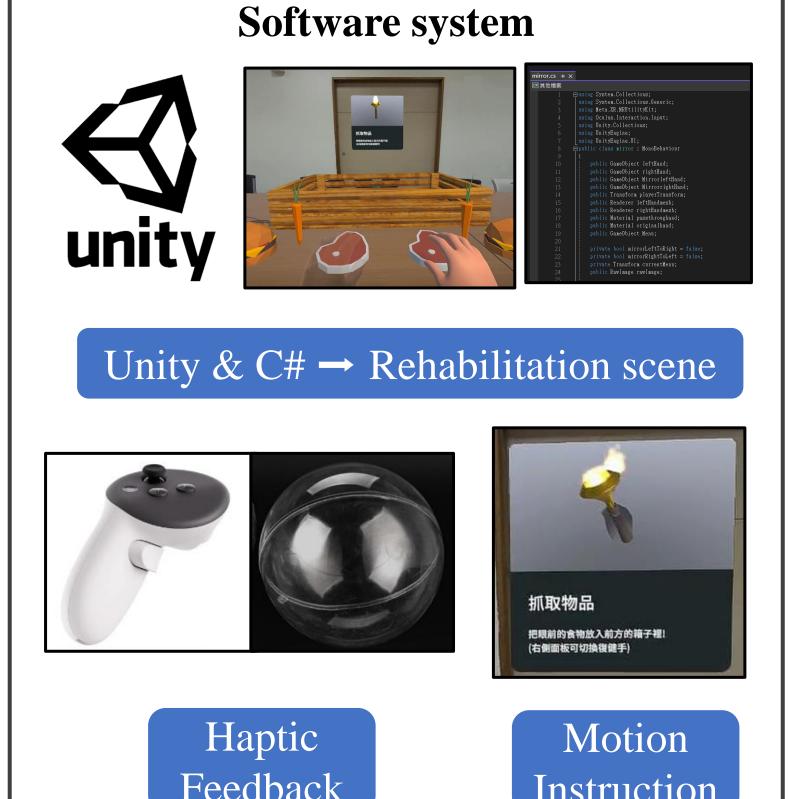


Method

System









Passthrough mode

Meta MR Utility kit

Haptic feedback

Simultaneous hands and controllers

Controller as

reference point

Generate virtual

object &

mirrored object



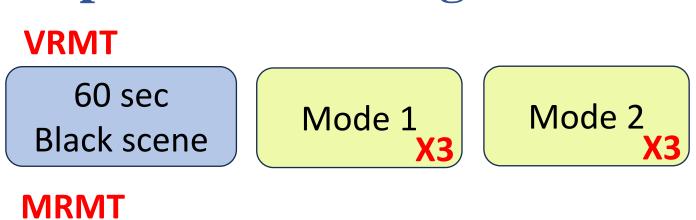
3D model

Unity Asset

Create

Render/Collider

Experimental Design



Mode 1

• Mode2: Mirror therapy + physical shell and projection

• Mode1 : Mirror Therapy + task-oriented object

- All modes consisted of 30 seconds of rehabilitation, followed by 30 seconds of black screen rest
- No physical objects in VRMT Mode 2, virtual object used to mimic the movements of MRMT.

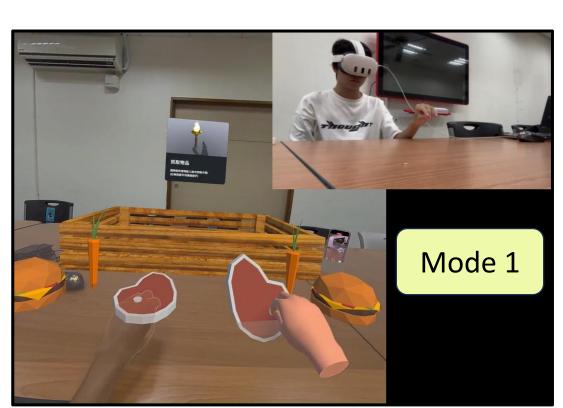


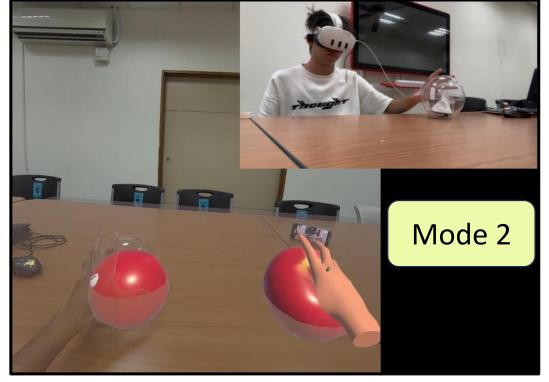
60 sec

Black scene

Results

MRMT System







Grasp and place fruits

Grasp and transport apples

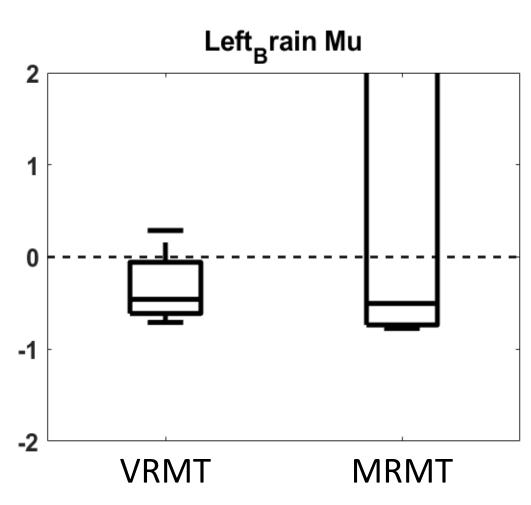
EEG Result

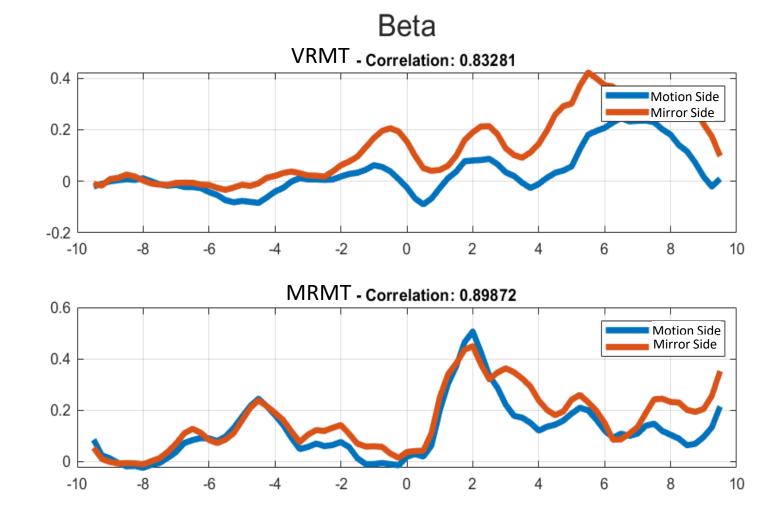
• In the mu wave, there was no significant difference, but both showed a trend of suppression, indicating activation of the motor cortex.

Mode 2

• In the beta wave, high correlation in both hemispheres, with more pronounced synchronization in MRMT, suggesting potentially better rehabilitation outcomes.

Conclusion & Future Work





EEG Evaluation

Software Design

Capture

hand joint points

Calculate reflected

position/rotation

Respect to camera center

Generate

mirrored hand

Mirror projection

Meta XR Interaction SDK

• 15 channels EEG: Fp1, Fp2, F3, Fz, F4, T3, C3, Cz, C4, T4, P3, Pz, P4, O1, O2.

Detect object

that

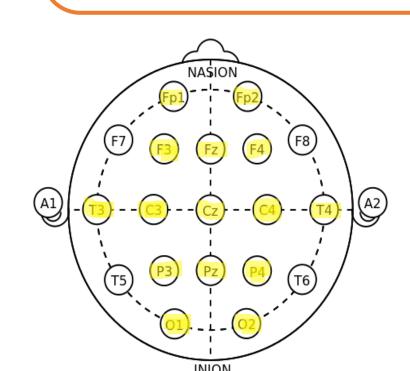
Hand grasping

Move

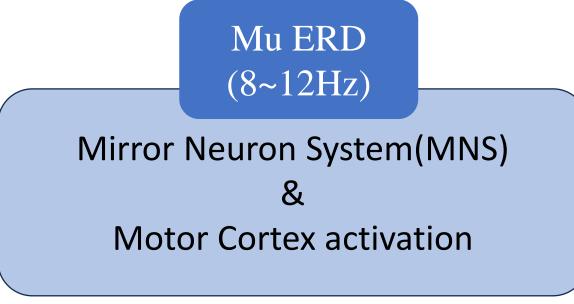
mirrored object

For mirrored hand

• Preprocessing(Independent Component Analysis(ICA), Filtering(2~50Hz))







Beta ERD (13~30Hz)Interhemispheric Imbalance Wider range of brain activation

Conclusion

- Combining the advantages of AR and VR, complete a MRMT rehabilitation system.
- Features:
 - ➤ Interact with virtual oriented objects
 - ➤ Hand tracking
 - ≥360° & Passthrough environment
- ➤ Haptic feedback
- EEG result:
 - Activation in motor-related brain areas
 - ➤ MRMT has higher bilateral synchronization response

Future Work

- System:
 - Enhance game design
 - ➤ Use object detection replace controller locating
- Evaluation:
 - ➤ Increase number of participants
 - ➤ Additional EEG evaluations beyond **ERD**
 - ➤ Include stroke patients for comparison