

Towards a foundational model of pathological gait kinemaitcs



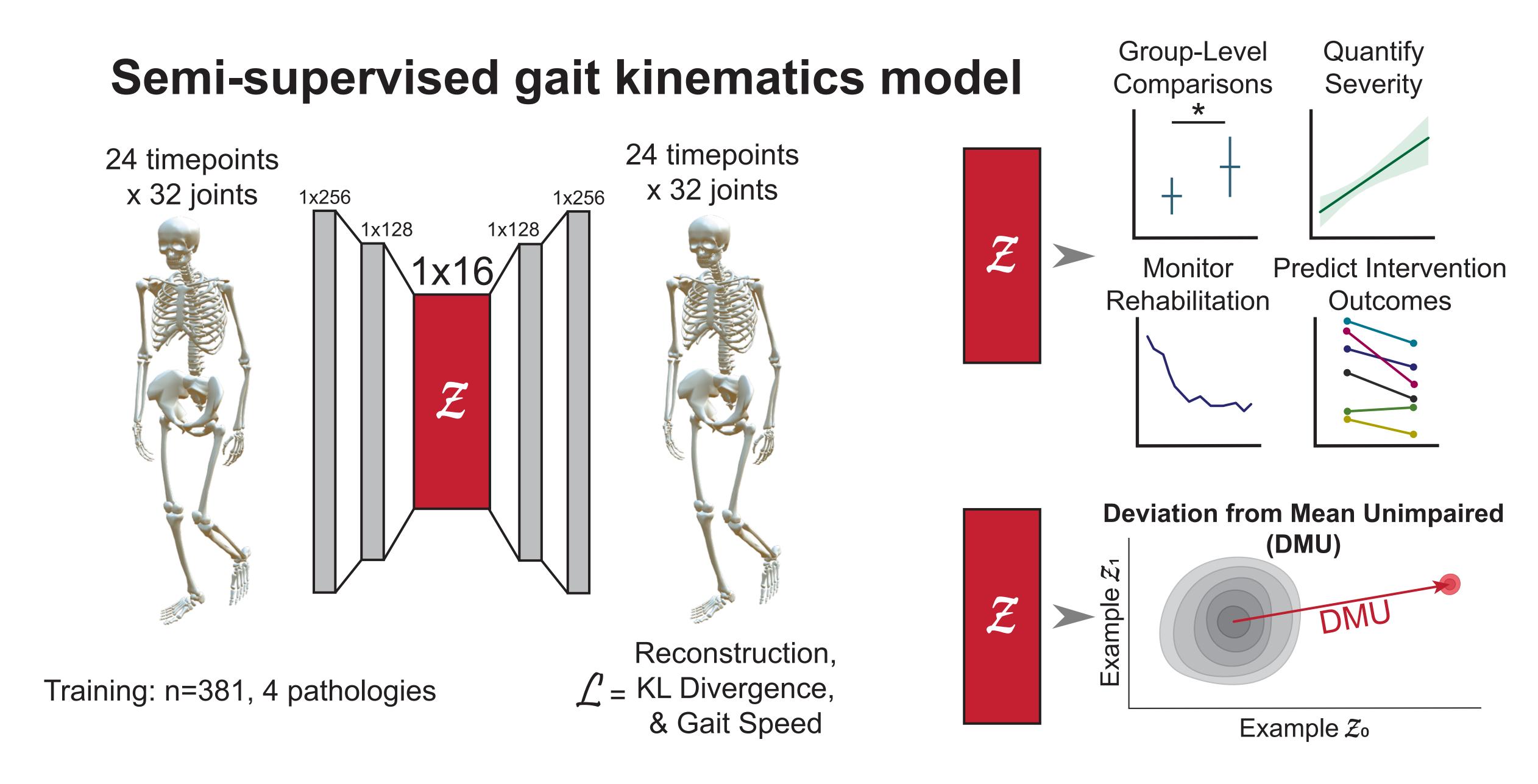
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Introduction Hand-Engineered Single Clinical Task **Feature Space Feature Extraction**

Traditional task-specific modeling

- Recent advancements in markerless motion capture have enabled accurate biomechanics in clinics [1].
- Despite this accessiblity, deriving actionable insights from gait data remains a challenge [2].
- Machine learning models show promise, but require large pathology specific datasets [3], which limits generalizability to unseen pathologies.

We aim to enable automated gait analysis that generalizes across diverse pathologies and supports a range of clincially relevant tasks.



Methods **Unseen conditions Training conditions** Unimpaired (<=65) Parkinson's disease Unimpaired (>65) Myotonic dystrophy Cerebral Palsy Hip osteoarthritis Knee osteoarthritis Post-stroke **Testing 55** n=95 58 **Training** Validation n=381 n=155 73 Training the model

- Aggregated a gait kinematics [4, 5] datasets of varied pathologies
- Includes both markered and markerless datasets
- Variational autoencoder (VAE) [6] for semi-supervised learning
- Auxillary task: predicting gait speed to promote interpretability

Calculating DMU (Deviation from Mean Unimpaired)

Distance from the distribution of healthy gait features [7]

Diverse clinical applications and pathologies

Quantifying severity in Tracking recovery Parkinson's disease post-stroke DMU responds to recovery z predicts clinican and during post-stroke rehabilitation self-reported scores of PD score r = 0.65p < 0.001**S** 40-☐ 30-Predicted Speed(m/s) Gait True UPDRS-III Time (weeks)

z outperforms hand-engineered features of walking Automated *z* features Hand-engineered Zero-shot 10m walk Fine-tuned Nine activities 0.75 0.75 0.68 0.53 ش 0.4-₹ 0.2-Walking Features Multi-activity Features

Identification of

myotonic dystrophy

Impact • Estimates impairment, automates feature selection, and can be improved by fine-tuning with small datasets

- Generalizes to unseen pathologies
- Open source and automatically computed during OpenCap gait analysis

- [2] Simon, 2004. J. Biomech. 37(12): 1869-1880
- [3] Jeon et al., 2022. *JBHI*. 26: 696-703 [4] Werling et al., 2023. *PLoS ONE*. 18(11)
- [5] Rajagopal et al., 2016. *TBME*. 63(10): 2068-2079
- [6] Kingma & Welling, 2013. *arXiv*. [7] Schwartz & Rozumalski, 2008. Gait Posture. 28(3): 351-357