

Augmented Gravity: Making bodily interaction natural

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Created in LATEX

Anders Stengaard Sørensen Augmented Gravity

About me



Anders Stengaard Sørensen

Ph.D. Associate Professor Head of Training Technology Lab

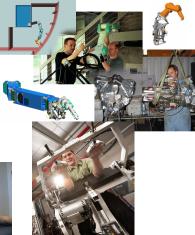
Expert in computer control

- Sensors
- Robots
- Electronics
- Physics

Curious outsider in

- Training
- Rehabilitation
- HRI





Why do gravity need augmentation? SDU 5

Consider this scenario



Jesper Kiersgaard is Training his Biceps and Triceps (june 2011)

How much "weight" is he pulling here?

(Hint: I can pull 15-20kg)

Gravity is 1...200% too strong!



How much weight is he pulling?

Gravity is 1...200% too strong!

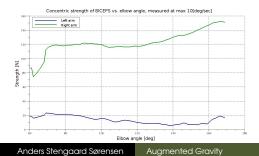


How much weight is he pulling?

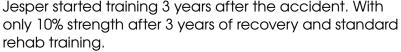
Answer: $\simeq 1 kg$

... and the robot is lifting the remaining 1kg of his arm

He is 90% paralyzed in left arm (motorcycle accident)



Robotrainer — procedure



Procedure:

- The robot "removes" gravity
- But provide resistance like friction
- It creates an illusion of the arm working
- That stimulates growth of neural pathways
- Jesper has been training $\simeq 3 \times 20$ minutes / week for 6 months.





Robotrainer — does it work?



Lets look at the data



Film: 3D-data Today, Jesper can use his arm — but shoulder is still lame

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Robotrainer — next step



Exoskeletons - exotic



Simpler alternatives



Film: Universal Robotrainer

We want to develop feasible technology for ordinary people

- Cost
- Ease of use
- Acceptance

Generic robot training



A center with 10 Universal RoboTrainers



And $\simeq 2$ therapists Can perform 100-200 specialized sessions per day

Generic robot training



A center with 10 Universal RoboTrainers



And \simeq 2 therapists Can perform 100-200 specialized sessions per day But not at home — too expensive. Let's go simpler still.

Robotrainer-Light



An interactive crane assisting with the training





50% of the effect — for 1% of the price ... maybe

At 500EUR, it is feasible for home use, specialized for

- Stroke victims
- Accident victims
- Neurological diseases
- Muscle-skeletal impairments

film

High performance low-level controller SDU

- Implemented in FPGA
- Using TOS-NET framework
- Detailed control of motor switching
- Ultra fast DSP and control loop (800kHz)

- Optional link btw 15 robots
- USB connection to PC
- High level control on PC
- GUI on PC, Tactile UI on Robot

Gravity assistance — single limb





- 0...30 kg weight relief
- Full range of motion calibration
- Hysteresis control to counter spasticity
- Works with paralysis victims with 2...20% remaining strength

Film:

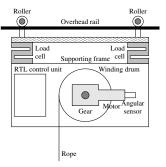
Full body





Film:

- Refurbished commercial lift
- 0...200kg relief
- Straight Walking
- Sit to stand
- Stair walking



Integrated Robot Training





- Case: 45 year stroke victim
- Left side paralysis
- $\simeq 2$ years of good rehab training
- Prognosis: Wheelchair for life
- Prognosis: Useless arm
- Training 3×90 min weekly
- For 16 weeks

Film:

Too little gravity?







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Augmented Gravity

No gravity?





- Astronaut training
- Simulated microgravity
- Pulleys and long ropes
- Robots simulate 0...0.5*g*
- Normal strengths exercises

Film:

This research inspired the Tarzan device recently commisioned by ESA



Augmented Gravity appear to be effective and versatile

- Accident victim
- Stroke victim
- Astronauts
- Elite athletes

We will continue by:

- Creating a Clinic: RoboTrainer-Academy
- Collaborate with hospitals in taking in on more patients
- Collaborate with Danish Olympic Teams to train athletes
- Expand collaboration with Danish Aerospace Company
- Securing international partners for commercialisation