



DESIGNING FOR **GAIT ASSISTANCE**
IN PARKINSON'S DISEASE

FINAL MASTER PROJECT M2.1 SEMESTER

STUDENT JOÃO PAULO LAMMOGLIA
COACH DR. J. (JUN) HU PDENG MENG
ASSESSOR DR.IR. M.J. (MARK) DE GRAAF

18-06-2015

Full report is available upon request.

DESIGNING FOR GAIT ASSISTANCE IN PARKINSON'S DISEASE

FINAL MASTER PROJECT M2.1 SEMESTER

STUDENT JOÃO PAULO LAMMOGLIA

COACH DR. J. (JUN) HU PDENG MENG

ASSESSOR DR.IR. M.J. (MARK) DE GRAAF

18-06-2015

ABSTRACT

The project revolves around the Freezing of Gait (FOG) phenomenon occurring among elderly patients with Parkinson's disease (PD). FOG is the temporary, involuntary inability to move and it can be experienced on turning, in narrow spaces, whilst reaching a destination, and in stressful situations. FOG is one of the most disabling and common mobility disorder in PD, and is usually observed in the advanced stages of the disease (Nieuwboer, 2013). Gait impairment and FOG seriously affect the quality of life of patients as it can lead to an unpredictable loss of control over movement and can result into falls.

The effectiveness of the Sensory cueing in improving gait in PD patients has been established by different researchers (Bagley, 1991) (Freedland, 2002). Sensory cueing can be defined as the use of external temporal or spatial stimuli to facilitate movement, gait initiation and continuation (Nieuwboer, 2007). It can be divided into three modalities: visual cueing; auditory cueing; and tactile cueing. Visual cues help to enlarge the stride length and generate sufficient amplitude movement (Azulay, 1999), while auditory cues help to stabilize the gait timing (Freedland, 2002).

The goal for this project is to combine the established scientific knowledge on FOG and Sensory cueing with an in-depth User Research into the design of an intelligent product/service that can assist a more independent lifestyle for PD patients with FOG symptoms.

In this document I will describe my vision and connected to it motivation for my FMP proposal. After, information about the context and project can be found. I will illustrate the project development, design approach, outcomes and future steps.

Full report available upon request.

REFERENCES

IMAGES

[1] <http://agilidas.com.au/agilidas-parkinsons/>

[2] <http://www.walkwithpath.com/>

[3] <http://www.upc.edu/saladepremisa/al-dia/mes-noticies/the-first-portable-system-for-monitoring-patients-with-parkinsons-disease-is-being-tested-on-50-people-from-different-countries>

[4] <http://www.accessibleconstruction.com/services/walkers/parkinson-walker.html>

[5] <http://www.accessibleconstructionblog.com/ada-standing-aids/laser-cane-parkinson-disease/>

BIBLIOGRAPHY

[1] Nieuwboer A, Giladi N. Characterizing freezing of gait in Parkinson's disease: models of an episodic phenomenon. 2013.

[2] <http://www.thewomansnetwork.com/eve-ensler-embody/>

[3] Tan T, Almeida Q, Rahimi F. Proprioceptive deficits in Parkinson's disease patients with freezing of gait. 2011.

[4] S. Bagley, B. Kelly, N. Tunnicliffe, G. I. Turnbull, and J. M. Walker. The effect of visual cues on the gait of independently mobile parkinson's

disease patients. *Physiotherapy*. 1991.

[5] J. P. Azulay, S. Mesure, B. Amblard, O. Blin, I. Sangla, and J. Pouget. Visual control of locomotion in parkinson's disease. 1999.

[6] G.C McIntosh, S.H. Brown, R.R. Rice, and M.H. Thaut. Rhythmic auditory-motor facilitation of gait patterns in patients with parkinson's disease. *J. Neurol. Neurosurg*. 1997.

[7] Fahn, S. The freezing phenomenon in parkinsonism. *Adv Neurol* 67: 53–63. 1995.

[8] Factor S, Jennings DL, Molho ES, Marek KL. The natural history of the syndrome of primary progressive freezing gait. 2002.

[9] Giladi N. Freezing of gait. Clinical overview. *Adv Neurol* 87:191–197. 2001.

[10] Sara J. Czaja and Joseph Sharit. *The Aging of the Population: Opportunities and Challenges for Human Factors Engineering. Technologies for Aging Population*. 2009.

[11] G. N. Lewis, W. D. Byblow, and S. E. Walt. Stride length regulation in parkinson's disease: the use of extrinsic, visual cues. 2000.

[12] N. Ito, A. Hayshi, W. Lin, N. Ohkoshi, M. Watanabe, and S. Shoji. *Integrated human brain science: theory, method, application (music)*, chapter Music therapy in parkinson's disease: Improvement of Parkinsonian gait and depression with rhythmic auditory stimulation. 2000.

[13] Website: <http://www.upc.edu/saladepremesa/al-dia/mes-noticies/the-first-portable-system-for-monitoring-patients-with-parkinsons-disease-is-being-tested-on-50-people-from-different-countries>

[14] Takac, B. *Context-aware Home Monitoring System for Parkinson's Disease Patients*. 2014.

[15] Cubo E, Moore CG, Leurgans S, Goetz CG. Wheeled and standard

walkers in Parkinson's disease patients with gait freezing. *Parkinsonism Rel Disord* 10:9–14. 2003.

[16] Cubo E, Leurgans S, Goetz CG. Short-term and practice effects of metronome pacing in Parkinson's disease patients with gait freezing while in the "on" state: randomized single blind evaluation. *Parkinsonism Rel Disord* 10:507–510. 2004

[17] Dietz MA, Goetz CG, Stebbins GT. Evaluation of a modified inverted walking stick as a treatment for parkinsonian freezing episodes. *Mov Disord* 5:243–247. 1990.

[18] Ferrarin M, Brambilla M, Garavello L et al. Microprocessor-controlled optical stimulating device to improve the gait of patients with Parkinson's disease. *Med Biol Eng Comput* 42: 328–332. 2004.

[19] Jiang Y, Norman KE. Effects of visual and auditory cues on gait initiation in people with Parkinson's disease. *Clin Rehabil* 20:36–45. 2006.

