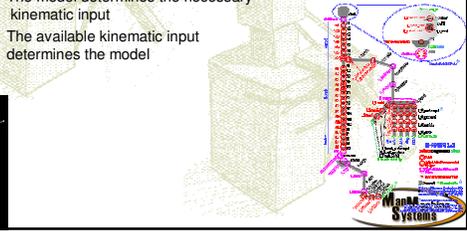


Human motion control Kinematics

Background: Kinematics and (kinematic) models

- What you see is what you get, or
- What you model is what you see
 - Your model of reality determines what you see
 - The model determines the necessary kinematic input
 - The available kinematic input determines the model



What you see is how you look at it

- Interpretation of kinematic data is always dependent on the underlying (implicit) assumptions
- Choice of measurement method is directly related to the underlying (implicit) assumptions about form-function relationships
 - Knee as a hinge...
 - Knee as a four-bar linkage system with cruciate ligaments



kinematic analysis 2-D versus 3-D

- Pro:
 - simple!
 - fast!
- Con:
 - projection error
 - simplification of function



3-D analysis preferable, but not always necessary

Figure 1.8. Lateral displacement of center of mass during a kick. (a) 2-D projection of displacement over the middle of the leg. With a vector which forms a circle with the origin at the knee. (b) 3-D projection with displacement from the origin at the knee. (c) 3-D projection with displacement from the origin at the knee. (d) 3-D projection with displacement from the origin at the knee.

Why not use the standard anatomical motion description?

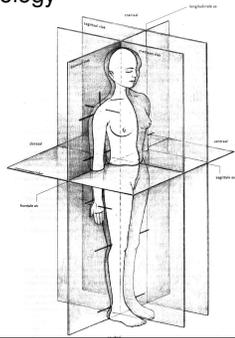
- Medical or clinical terminology unsuitable
 - Anatomical language

Clinical motion description

- Based on anatomical terminology / language
- Goal:
 - Characterising pathology vs healthy
 - Evaluation of intervention
- Use:
 - Judgement: Improvement or deterioration
 - Information exchange between medical professions
 - **Clinical Science**
- Requirements
 - **Uniform, unambiguous**

Clinical terminology

- based on anatomic position
- based on movement in main (perpendicular) planes
- essentially 2-D!
- "Planar thinking"



Clinical terminology is not unambiguous, nor uniform

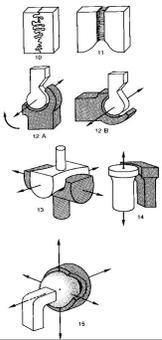
Codman's paradox
Exorotation or endorotation?

'horizontal abduction'?



Juntura Fibrosa - Juntura Cartilaginea

Fibrous connection - Cartilage connection
(Skull bones) - (Pubic bones)



Juntura Synovialis

Hinge joint

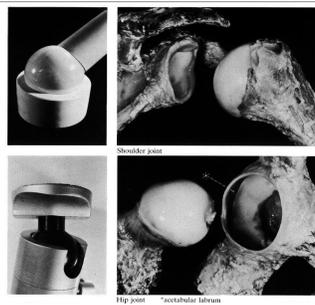
Saddle joint - Pivot joint

Ball-and-socket joint

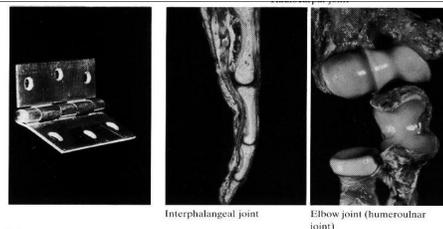
Joint Degrees-of-Freedom

- # Degrees of Freedom joint depends on:
 - Shape of articular surface
 - Number of ligaments
- Model Choice !!
 - Small translations & rotations are neglected

Ball-and-socket joint

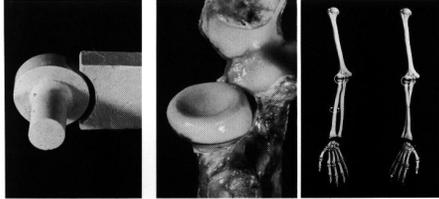


Hinge joint



14

Pivot joint



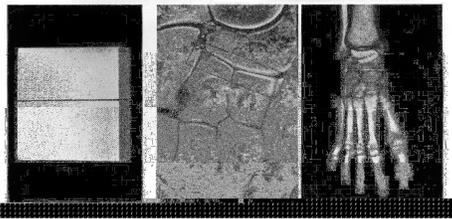
Radoulnar joint: left: head of radius, right: radial notch of ulna Supinated Pronated

Saddle joint

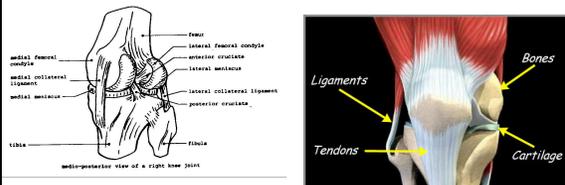


Carpometacarpal joint of the thumb

Plane joint



Constraints knee joint



Degrees-of-Freedom joint depends on:

- shape of articular surface
- number of ligaments

Kinematics overview

- Marey (1830 - 1904)



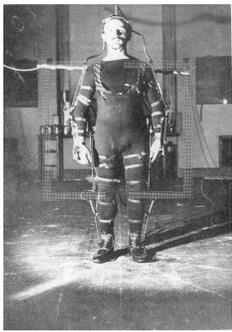
Kinematics overview

- E. Muybridge (1830 - 1904)

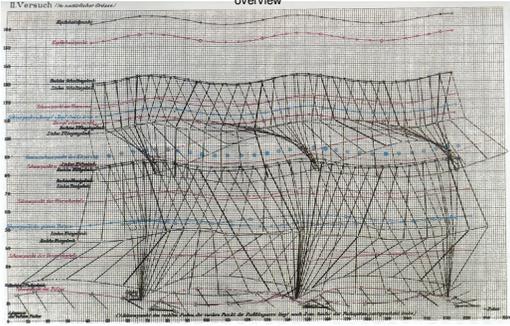


Kinematics overview

- Braune & Fischer ~ 1890 - 1900
 - two camera-view
 - stereo x-ray
 - mathematical reconstruction
 - extremely laborious

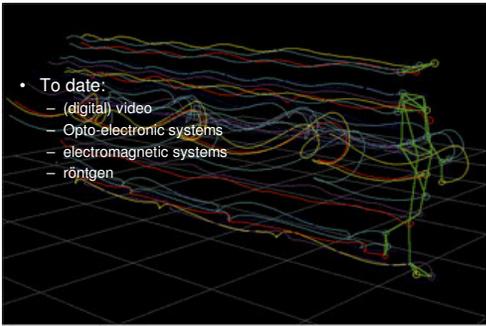


Kinematics overview



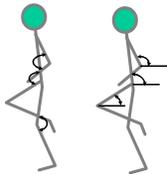
Kinematics overview

- To date:
 - (digital) video
 - Opto-electronic systems
 - electromagnetic systems
 - röntgen

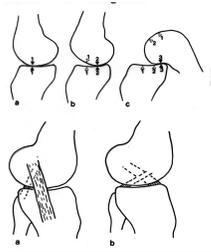


Side step: Arthrokinematics and osteokinematics

- Arthro-kinematics
 - Description of motion in a joint, often described as the motion of articular surfaces with respect to each other:
 - Roll
 - Slip
 - Spin
- Osteo-kinematics
 - Segment motions (w.r.t. outside world)
 - Joint motions (w.r.t. proximal bone)



Arthro-kinematics



Description of motion of articular surfaces with respect to each other:

- Roll
- Slip
- Spin

**Not well possible in vivo
Mainly from cadaver recordings**

Again: what you see is how you look at it

- Interpretation of kinematic data is always dependent on the underlying (implicit) assumptions
- Choice of measurement method is directly related to the underlying (implicit) assumptions about form-function relationships
 - Knee as a hinge...
 - Knee as a four-bar linkage system with cruciate ligaments



If Clinical terminology is inadequate for 3-D movement analysis, what is?

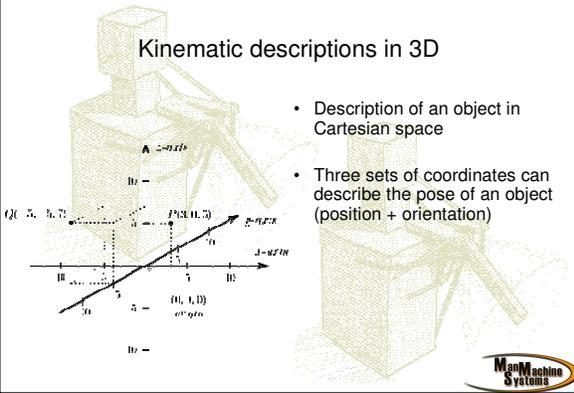
- Technical motion description
 - Pose, position and orientation
 - Unambiguous, specific

(But technical motion description is not the language that clinicians and movement scientists speak!)

Technical description of motion

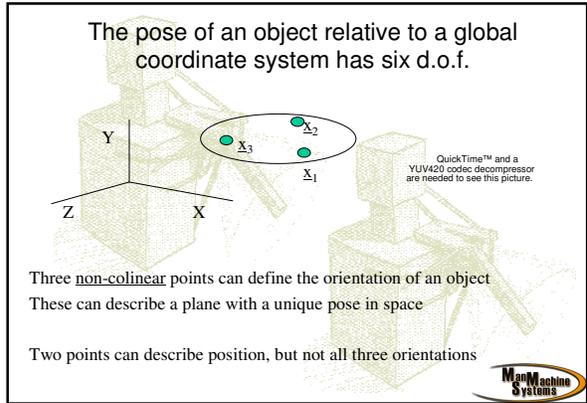
- Rotation matrix and translation vector
- 6 Independent parameters:
- 3 rotations, 3 translations, parameterized by
 - Euler angles
 - Screw axis or helical axis

Kinematic descriptions in 3D



- Description of an object in Cartesian space
- Three sets of coordinates can describe the pose of an object (position + orientation)

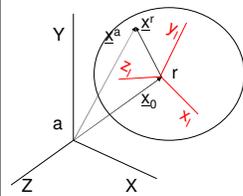
The pose of an object relative to a global coordinate system has six d.o.f.



Three non-collinear points can define the orientation of an object
These can describe a plane with a unique pose in space

Two points can describe position, but not all three orientations

A Rotation matrix can describe the relation between global and local coordinate systems

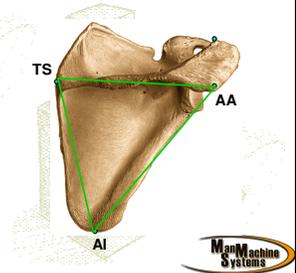


$$\begin{aligned} \mathbf{x}^g &= \mathbf{x}_0^g + \mathbf{R}^{g'} \cdot \mathbf{x}' \\ &= \mathbf{x}_0^g + \begin{bmatrix} \cos(x, X) & \cos(y, X) & \cos(z, X) \\ \cos(x, Y) & \cos(y, Y) & \cos(z, Y) \\ \cos(x, Z) & \cos(y, Z) & \cos(z, Z) \end{bmatrix} \cdot \mathbf{x}' \\ &= \mathbf{x}_0^g + [u_1 \ u_2 \ u_3] \cdot \mathbf{x}' \end{aligned}$$

with $\det(\mathbf{R}^{g'}) = 1$

Construction of a local coordinate system in 3D

- Orientation definition of a segment requires three markers
- These three markers describe a plane
- In motion analysis these points can be landmarks or technical markers



Construction of a local coordinate system in 3D

- From x-y-z global coordinates markers markers we can construct a local coordinate system (or: frame)
- Frame describes its orientation and position (= pose) in global space

Five steps to define a local frame

- step 1: define the first axis
- Step 2: define a support axis to define the plane orientation
- Step 3: define a second axis perpendicular to the plane
- Step 4: orthogonize your system: calculate the axis in the plane perpendicular to the first two
- Step 5: construct the orientation matrix

$$\bar{z}_u = \frac{AA - TS}{\|AA - TS\|}$$

Five steps to define a local frame

- step 1: define the first axis
- Step 2: define a support axis to define the plane orientation
- Step 3: define a second axis perpendicular to the plane
- Step 4: orthogonize your system: calculate the axis in the plane perpendicular to the first two
- Step 5: construct the orientation matrix

$$\bar{z}_u = \frac{AA - TS}{\|AA - TS\|}$$

$$\bar{y}_{temp} = \frac{AA - AI}{\|AA - AI\|}$$

Five steps to define a local frame

- step 1: define the first axis
- Step 2: define a support axis to define the plane orientation
- Step 3: define a second axis perpendicular to the plane
- Step 4: orthogonize your system: calculate the axis in the plane perpendicular to the first two
- Step 5: construct the orientation matrix

$$\bar{z}_u = \frac{AA - TS}{\|AA - TS\|}$$

$$\bar{y}_{temp} = \frac{AA - AI}{\|AA - AI\|}$$

$$\bar{x} = \bar{y}_{temp} \times \bar{z}_u, \quad \bar{x}_u = \frac{\bar{x}}{\|\bar{x}\|}$$

Five steps to define a local frame

- step 1: define the first axis
- Step 2: define a support axis to define the plane orientation
- Step 3: define a second axis perpendicular to the plane
- Step 4: orthogonize your system: calculate the axis in the plane perpendicular to the first two
- Step 5: construct the orientation matrix

$$\bar{z}_u = \frac{AA - TS}{\|AA - TS\|}$$

$$\bar{y}_{temp} = \frac{AA - AI}{\|AA - AI\|}$$

$$\bar{x} = \bar{y}_{temp} \times \bar{z}_u, \quad \bar{x}_u = \frac{\bar{x}}{\|\bar{x}\|}$$

$$\bar{y} = \bar{z}_u \times \bar{x}_u, \quad \bar{y}_u = \frac{\bar{y}}{\|\bar{y}\|}$$

Five steps to define a local frame

- step 1: define the first axis
- Step 2: define a support axis to define the plane orientation
- Step 3: define a second axis perpendicular to the plane
- Step 4: orthogonize your system: calculate the axis in the plane perpendicular to the first two
- Step 5: construct the orientation matrix = all three axes / direction vectors

$$\bar{z}_u = \frac{AA - TS}{\|AA - TS\|}$$

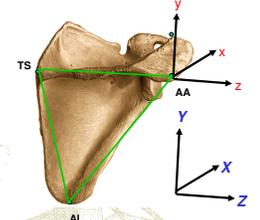
$$\bar{y}_{temp} = \frac{AA - AI}{\|AA - AI\|}$$

$$\bar{x} = \bar{y}_{temp} \times \bar{z}_u, \quad \bar{x}_u = \frac{\bar{x}}{\|\bar{x}\|}$$

$$\bar{y} = \bar{z}_u \times \bar{x}_u, \quad \bar{y}_u = \frac{\bar{y}}{\|\bar{y}\|}$$

$$R = [\bar{x}_u \quad \bar{y}_u \quad \bar{z}_u]$$

- The resulting 3x3 matrix describes the **orientation of a segment** in the global system
- The matrix contains the three direction vectors,
- Each direction vector defines the angle of that axis with the three axes of the global coordinate system



2.3.3. Scapula coordinate system—X, Y, Z, (see Fig. 1 and 4)

O_s: The origin coincident with AA.

Z_s: The line connecting TS and AA, pointing to AA.

X_s: The line perpendicular to the plane formed by AI, AA, and TS, pointing forward. Note that because of the use of AA instead of AC, this plane is not the same as the visual plane of the scapula bone.

Y_s: The common line perpendicular to the X_s and Z_s axis, pointing upward.

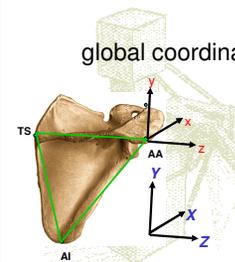
$$R_{scapula} = \begin{bmatrix} \cos(x, X) & \cos(y, X) & \cos(z, X) \\ \cos(x, Y) & \cos(y, Y) & \cos(z, Y) \\ \cos(x, Z) & \cos(y, Z) & \cos(z, Z) \end{bmatrix}$$

$$P_{scapula} = AA_{global} + R_{scapula} \cdot X_{local} =$$

with $\det(R_{scapula}) = 1$

$AA_{global} = \text{Origin scapula frame}$

global coordinates \Leftrightarrow local coordinates



$$x_{scapula}^G = AA^G + R^{L \rightarrow G} \cdot x_{scapula}^L$$

$$R^{L \rightarrow G} = \begin{bmatrix} \cos(x, X) & \cos(y, X) & \cos(z, X) \\ \cos(x, Y) & \cos(y, Y) & \cos(z, Y) \\ \cos(x, Z) & \cos(y, Z) & \cos(z, Z) \end{bmatrix}$$

$$x_{scapula}^L = R^{G \rightarrow L} \cdot (x_{scapula}^G - AA^G) =$$

$$= \begin{bmatrix} \cos(X, x) & \cos(Y, x) & \cos(Z, x) \\ \cos(X, y) & \cos(Y, y) & \cos(Z, y) \\ \cos(X, z) & \cos(Y, z) & \cos(Z, z) \end{bmatrix} \cdot (x_{scapula}^G - AA^G)$$

$$R^{G \rightarrow L} = \text{inverse of } R^{L \rightarrow G}$$

Definition of local coordinate systems in Movement Studies

- Use of *anatomical landmarks* for axis definitions
- Easily defined
 - If chosen well: more or less coincident with axes and centers of rotation
 - Mostly easy to define

QuickTime™ en een TIFF (ingesloten) afbeelding afspelen
 zip versie of afbeelding afspelen wordt gegeven.

Definition of local coordinate systems in Movement Studies



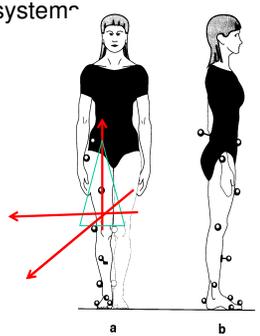
- Different **use of landmarks** influences unit vectors and thus matrix R
- Different **order of axis definition** influences unit vectors and thus matrix R

Helen Hayes marker set

Vaughan marker set

Order preference when defining local coordinate system

- First axis: long axis
- Second axis: perpendicular to the plane through three landmarks
- Third axis perpendicular to 1 and 2.



Example thigh

$$y = \frac{xyz_hip - xyz_knee}{|xyz_hip - xyz_knee|}$$

$$\bar{y} = \frac{y}{\|y\|}$$

$$z_{temp} = \frac{xyz_LE - xyz_ME}{|xyz_LE - xyz_ME|}$$

$$x = y \times z_{temp}$$

$$\bar{x} = \frac{x}{\|x\|}$$

$$z = x \times y$$

$$\bar{z} = \frac{z}{\|z\|}$$

$${}^L R^G = [\bar{x} \ \bar{y} \ \bar{z}]$$

Parameterization of orientation matrices

- Order of rotation
 - Euler angles
 - Segment kinematics versus joint kinematics

$$\begin{bmatrix} \cos(\alpha)\cos(\beta) & \cos(\alpha)\sin(\beta) & \sin(\alpha) \\ -\sin(\alpha)\cos(\beta) & -\sin(\alpha)\sin(\beta) & \cos(\alpha) \\ 0 & 0 & 1 \end{bmatrix} \begin{bmatrix} \cos(\gamma) & \sin(\gamma) & 0 \\ -\sin(\gamma) & \cos(\gamma) & 0 \\ 0 & 0 & 1 \end{bmatrix}$$

$$\begin{bmatrix} \cos(\alpha)\cos(\beta) & \cos(\alpha)\sin(\beta) & \sin(\alpha) \\ -\sin(\alpha)\cos(\beta) & -\sin(\alpha)\sin(\beta) & \cos(\alpha) \\ 0 & 0 & 1 \end{bmatrix} \begin{bmatrix} \cos(\gamma) & \sin(\gamma) & 0 \\ -\sin(\gamma) & \cos(\gamma) & 0 \\ 0 & 0 & 1 \end{bmatrix}$$

Rotation is not a vector

rot(z') + rot(y') ≠ rot(y') + rot(z')

(order of rotation can not be interchanged)

Standard matrices for rotation of a vector

$$R_z = \begin{bmatrix} \cos \gamma & -\sin \gamma & 0 \\ \sin \gamma & \cos \gamma & 0 \\ 0 & 0 & 1 \end{bmatrix} \quad R_y = \begin{bmatrix} \cos \beta & 0 & \sin \beta \\ 0 & 1 & 0 \\ -\sin \beta & 0 & \cos \beta \end{bmatrix} \quad R_x = \begin{bmatrix} 1 & 0 & 0 \\ 0 & \cos \alpha & -\sin \alpha \\ 0 & \sin \alpha & \cos \alpha \end{bmatrix}$$

- Can be used to rotate a vector to a given position in a plane over angle γ (R_z), β (R_y) or α (R_x)

Parameterization of orientation matrices

Agreement within scientific field!!

- Euler angles
 - z-x-z: x-convention (applied mechanics)
 - z-y-z: y-convention (quantum mechanics, nuclear physics)
 - x-y-z: Cardan angles (astronomy, aerospace, biomechanics)
- screw axis or helical axis
- Cayley-Klein parameters
- Euler parameters

B09-47

Measuring Angles

Relative Angles
(joint rotations)

The angle between the longitudinal axis of two adjacent segments.

$R = R_{prox} * R_{dist}$

Absolute Angles
(segment rotations)

The angle between a segment and the right horizontal of the distal end.

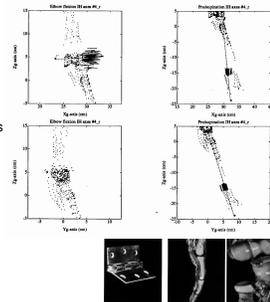
$R = R_g * R_{seg}$

What decomposition order is the most suitable?

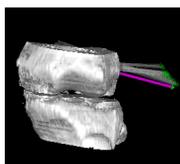
- Many different orders of rotations
 - xyz, zxy, yxz, yzx, zxy, zyx
 - yxz, xzx, yxy, yzy, zxz, zyz
- Preference of order in standardization:
 - As much as possible resembling clinical rotations (flexion/extension, abduction/adduction, etc)
 - Last rotation axial rotation around longitudinal axis of segment
 - Then the first two rotations determine the orientation of the segment
 - Gimbal Lock orientations should be avoided

Parameters from segmental motions are **not** pure joint rotations!

- Euler, or Cardan angles are rotations around coordinate systems of segments
- Local coordinate axes do (mostly) not equal joint kinematic axes
 - Elbow, FE-axis is not the line EM-EL
- Improvement possible, by determining kinematic joint axes and choosing these as local segment axes.
- Even then: rotation is not the same as motion **in the joint**



Joint Motion description: screw axes



Can be used for estimation of kinematic axis (or center) of rotation, which can then be used as the basis for the local coordinate systems

Effect of positioning error of landmarks on knee angles

Epicondyl-marker 9 mm too much anterior or posterior: $\sim 5^\circ$ deviation on local coordinate system

Rotation van 5° around the long axis of the leg induces effects on especially the abduction-adduction axis (blue). These are artificial and angle dependent!

