

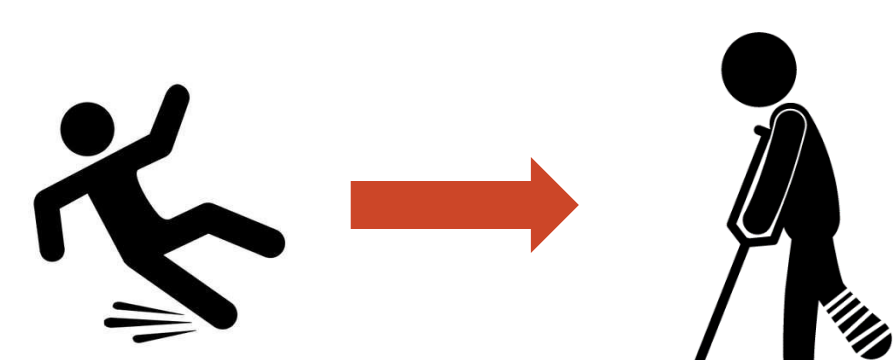


Introduction



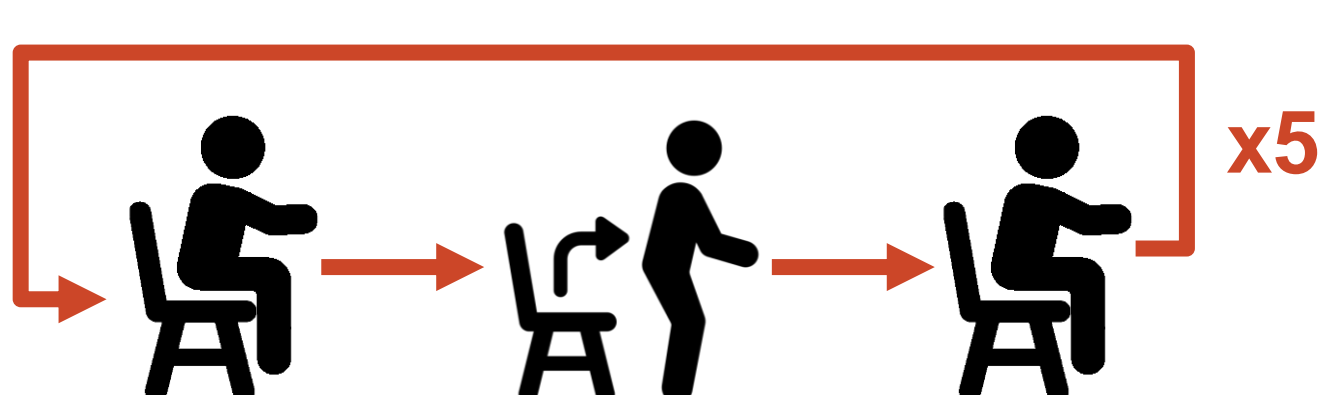
1 in 3 adults over 65 fall each year [1]

Falls lead to injury, reduced mobility and a lower quality of life



Five Times Sit-To-Stand test (5xSTS) is an evaluation muscle strength, balance and fall risk.

5 Times Sit-to-Stand



5xSTS time to completion, does not provide insight to movement strategy

Movement strategy differences across the lifespan could improve guidance of fall prevention

Are muscle coordination strategies different in older and younger adults during the 5 Times Sit-to-Stand?

Methods

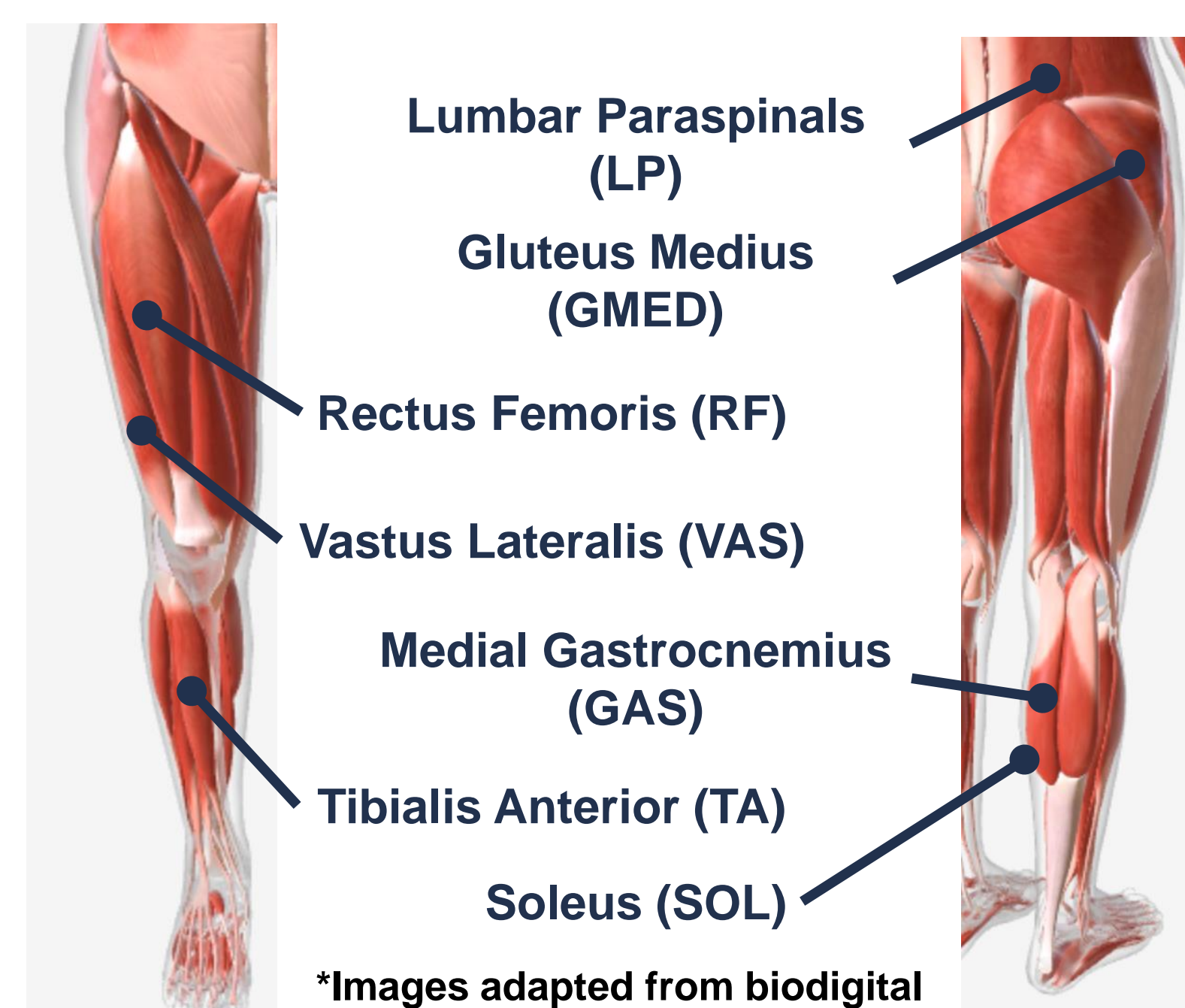
Participant Demographics

	Younger (n=11)	Older (n=11)
Age (years)	23.8 ± 5.0	62.1 ± 7.8
Height (in)	68.5 ± 2.3	66.9 ± 2.3
Weight (lb)	151 ± 27.8	178 ± 47.4
Sex	5F/6M	7F/4M

Participants active and healthy, no reported falls in the last year. *(±σ)

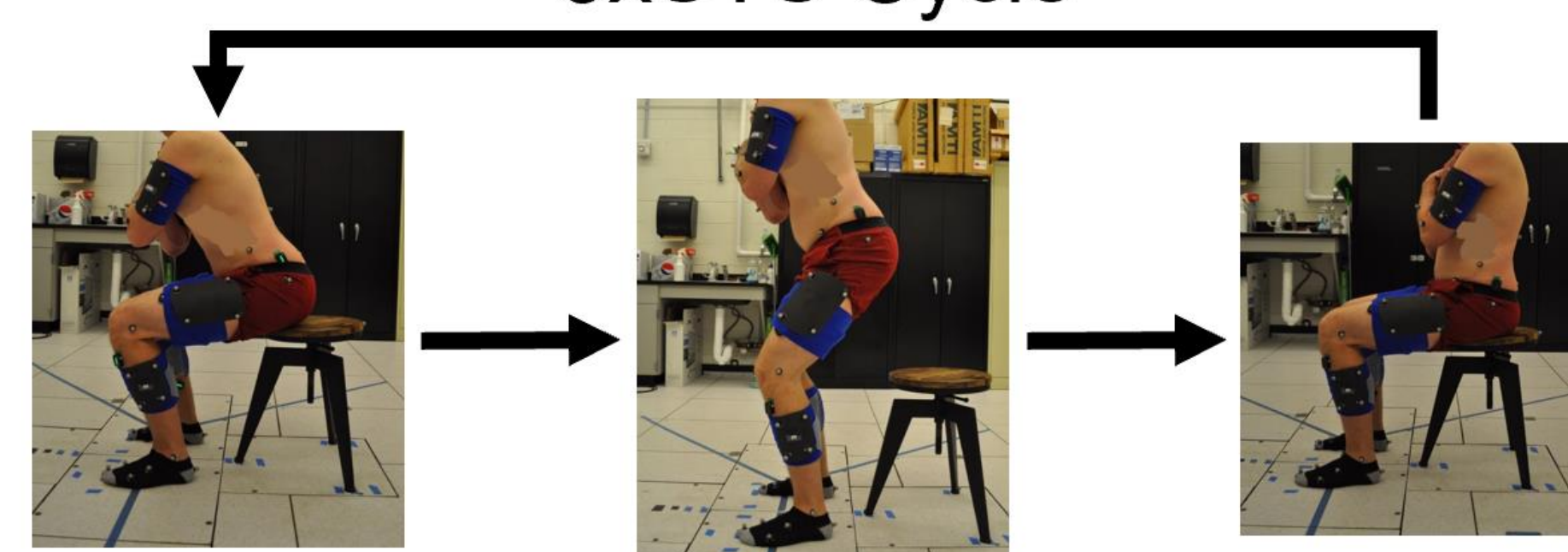
Experimental Data Collection

- Optical Motion Capture (Qualisys, $f_s=200$ Hz)
- In-Ground Force Plates (AMTI, $f_s=2000$ Hz)
- Electromyography (Delsys, $f_s=2000$ Hz)

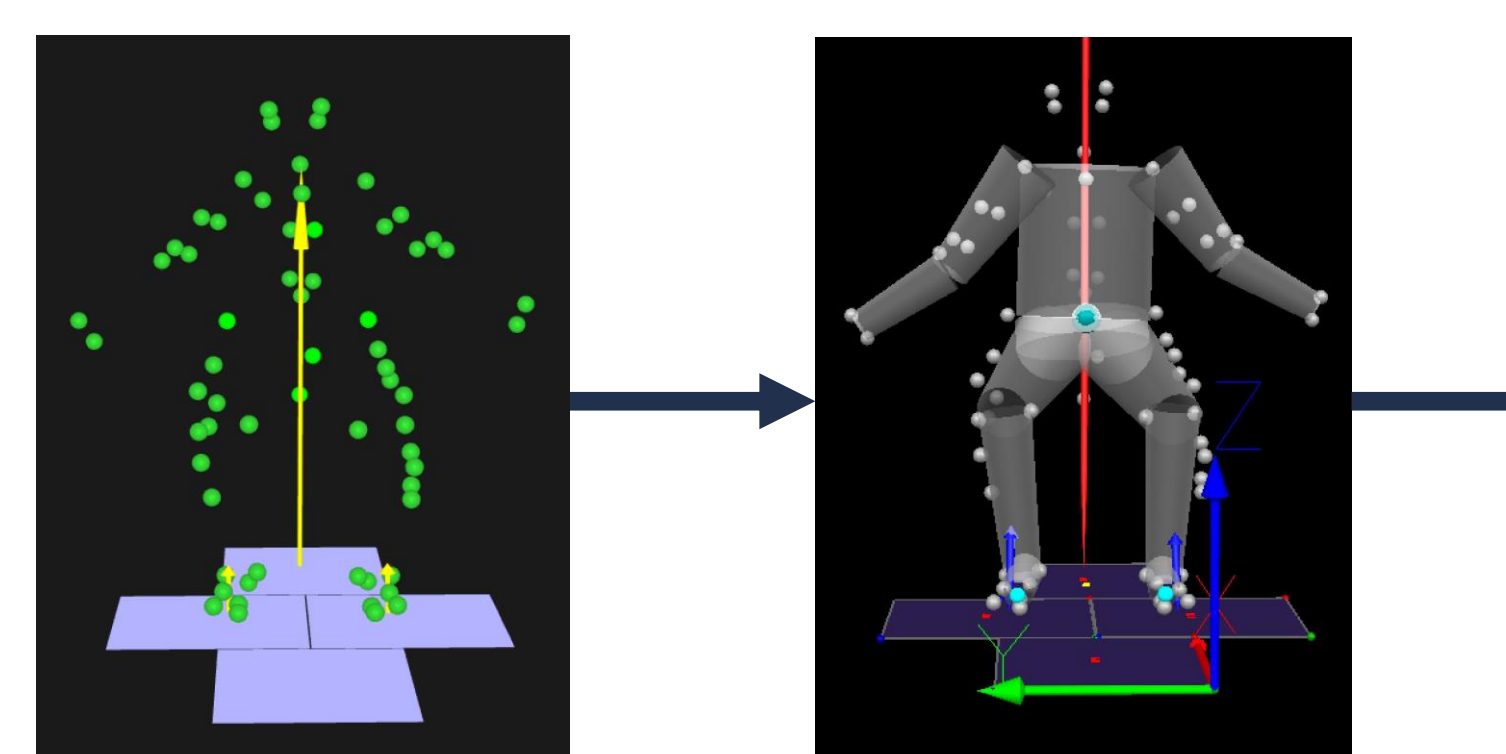


Data Processing

5xSTS Cycle

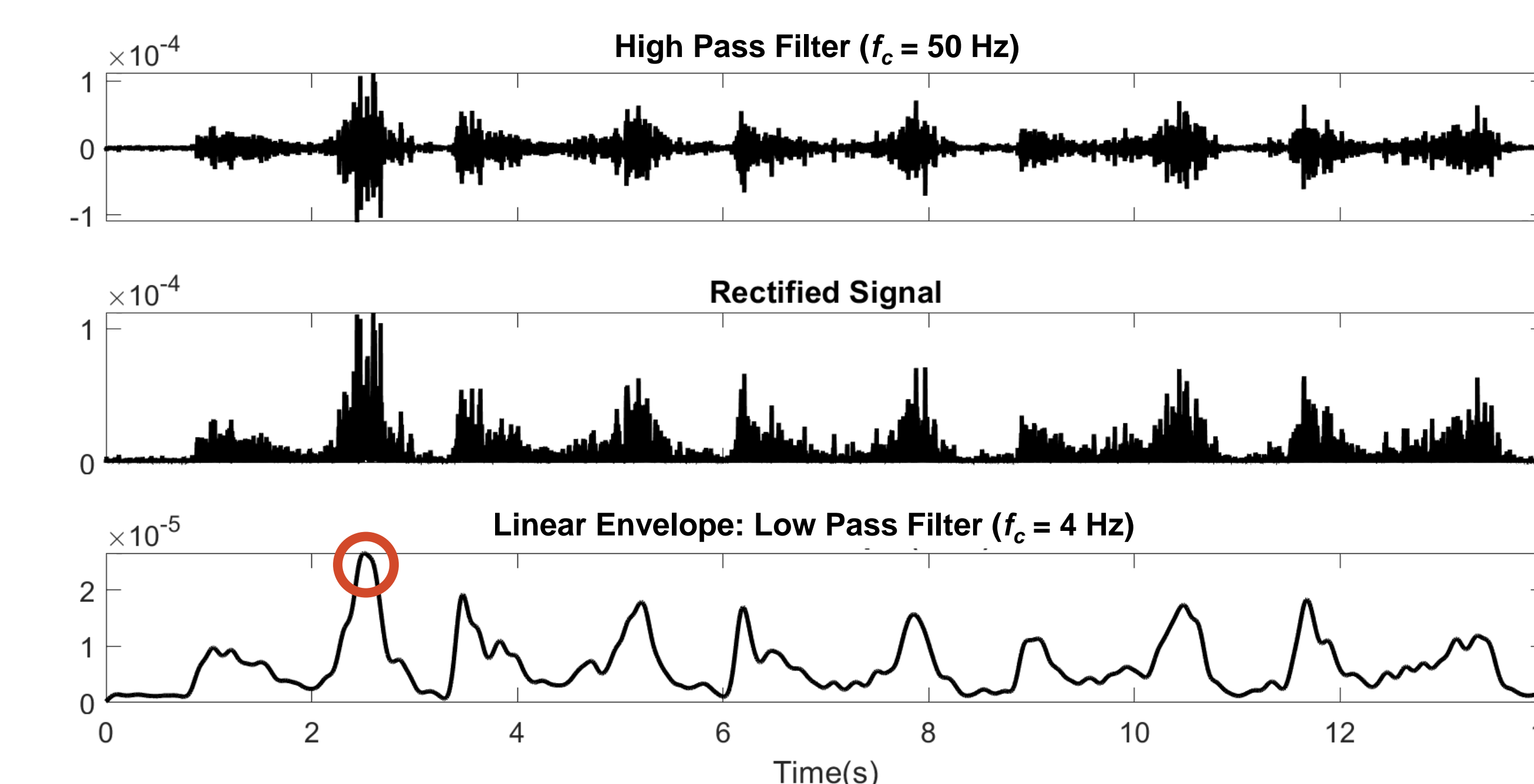


Seat Off Full Stance Seat On
 One 5xSTS trial was conducted per participant.



Marker Trajectory Filter (low pass $f_c=6$ Hz)
 GRFs Filter (low pass $f_c=6$ Hz)
 Seat On and Seat Off Threshold (Weight of the stool)
 Time to Completion (First seat off to last seat on)
 Joint Moments (Third cycle of 5xSTS)
 Hip, knee, & ankle, peak flexion & extension

EMG Processing



$$iEMG = \int_{t(\text{First Seat Off})}^{t(\text{Last Seat On})} \frac{5xSTS \text{ EMG Signal}}{\text{Max } 5xSTS \text{ EMG}} dt$$

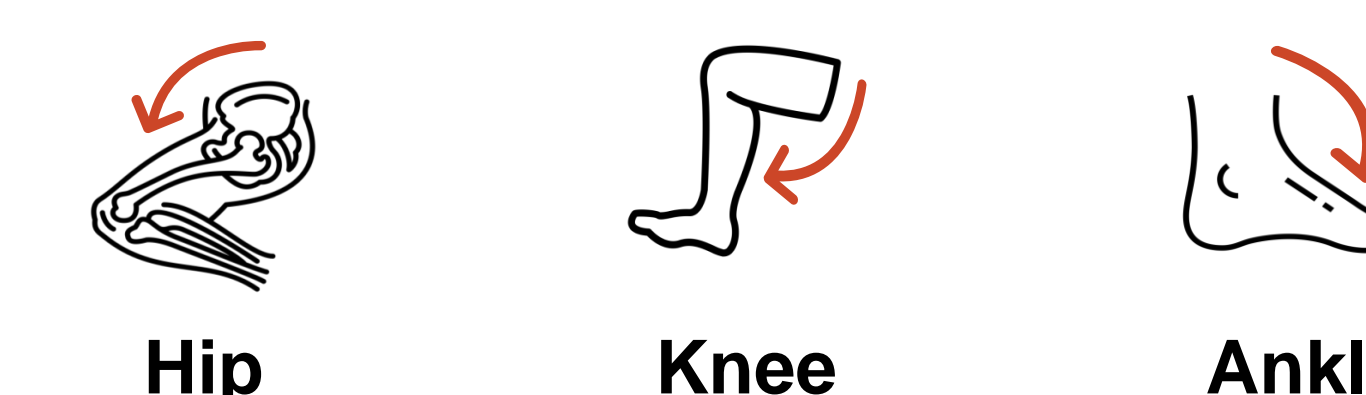
Statistical Analysis

Unpaired t-test ($\alpha=0.05$) between younger and older groups for:

Time to Completion

Muscle iEMG

Peak Joint Moments (Third Cycle)

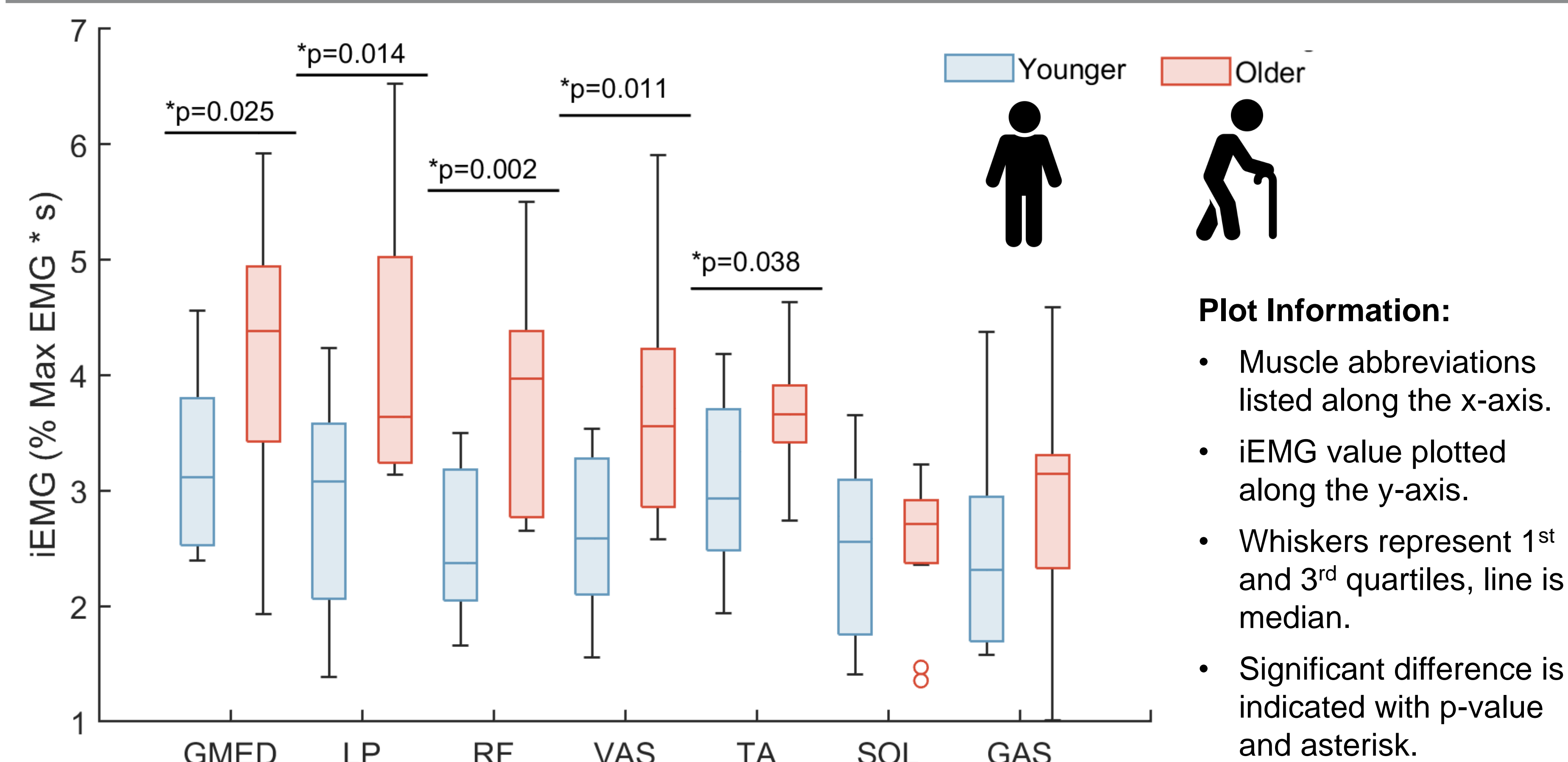


Results

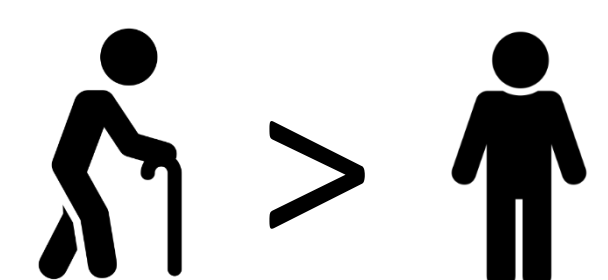
Time to Completion

No difference between the groups ($p = 0.473$).

Muscle iEMG



iEMG for GMED, LP, RF, VAS, & TA:

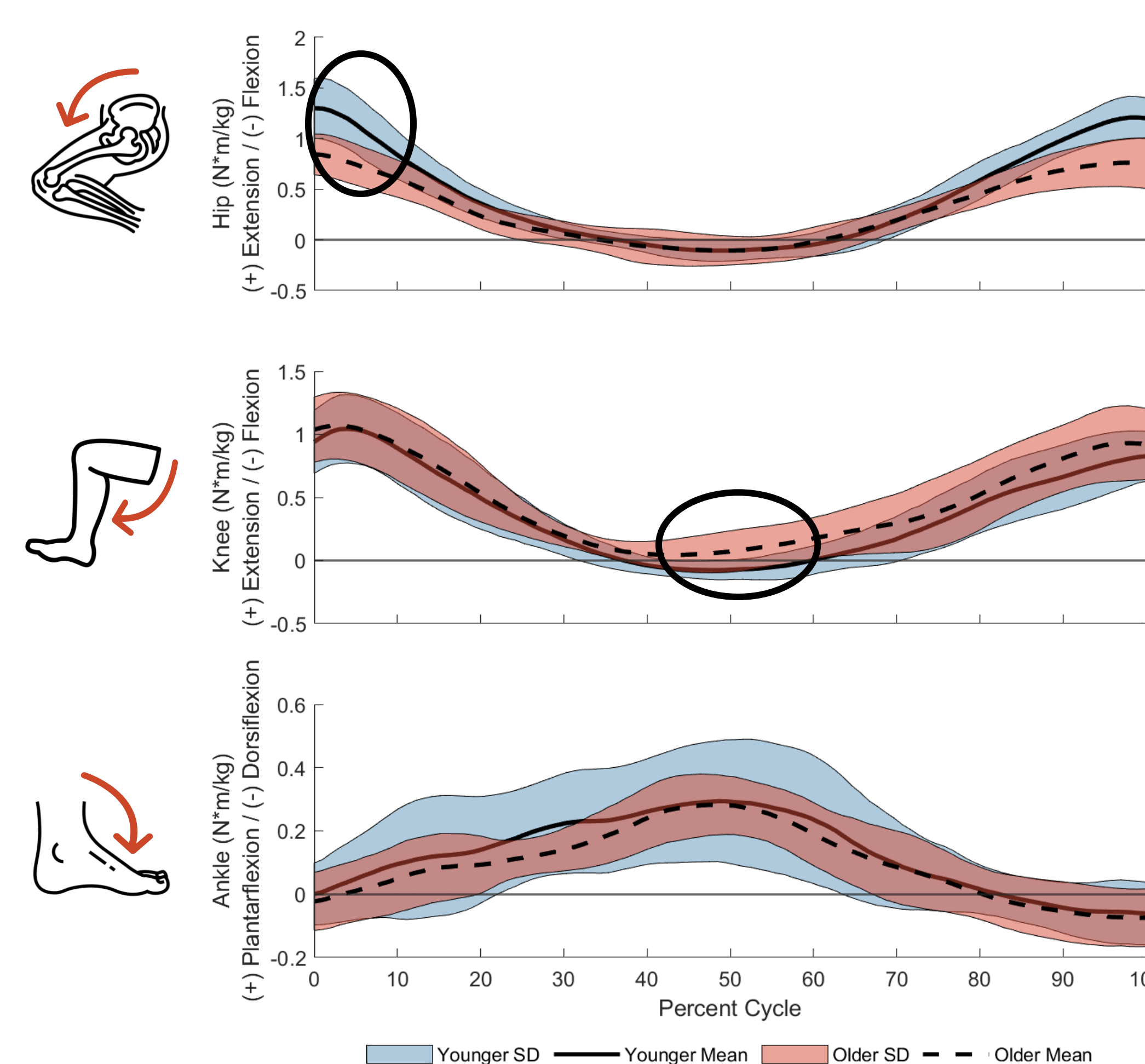


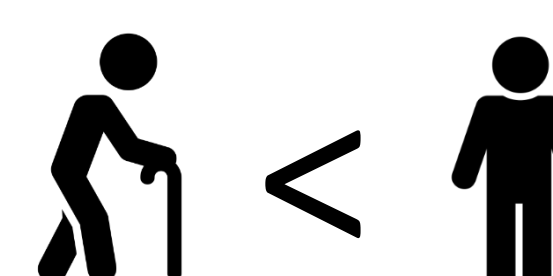

May indicate a compensation due to muscle weakness or muscle activation timing [2,3].

SOL & GAS: no difference

Likely caused by feet planted during the task.

Peak Joint Moments (Third Cycle)



Peak Hip Extension ($p<0.001$) & Knee Flexion ($p=0.013$):  < 
 Peak Ankle, Knee Extension, & Hip Flexion: no difference
 *Circled in plots above.

Conclusions

Older adults required greater muscle iEMG to complete the 5xSTS task in a similar amount of time as the younger participants.

Younger adults have greater or similar peak hip, knee, and ankle joint moments during 5xSTS.

Altered rising strategy in older adults

Time to complete task does not explain the difference in iEMG

Fall risk prevention training may be improved by assessing muscle coordination during the 5 Times Sit-to-Stand.

Acknowledgments

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References

- [1] "WHO global report on falls prevention in older age," WHO, 2007.
- [2] M. Arvin, et al., 2017
- [3] P. C. Santos, et al., 2021