

The Synergistic Effects of Transcutaneous Spinal Stimulation and Exoskeleton Assisted Walking after Spinal Cord Injury



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INTRODUCTION

We explored the immediate effects of transcutaneous spinal stimulation on exoskeleton-assisted walking after spinal cord injury (SCI).

We hypothesized that the addition of stimulation would acutely improve exoskeleton walking performance.

METHODS

- Six individuals with chronic (>1 year) SCI participated in the study.
- Participants used an exoskeleton mode appropriate for their level of motor function.
- Order of stimulation was counterbalanced across 4 sessions.
- Outcomes measured 2x/session, with and without stimulation.

ID	Age	Time since injury (yrs)	Injury level	Injury severity	LEMS (0-50)	Stimulation amplitude (mA)
1	32	10	T8	C	3/50	80-90
2	25	7	T12	C	12/50	30-35
3	58	15	C5	D	40/50	110
4	49	18	C5	C	7/50	110-140
5	55	3	T9	A	0/50	60-90
6	50	2	C8	D	47/50	30-50

LEMS: Lower Extremities Motor Score

Two Different Exoskeleton Modes Used

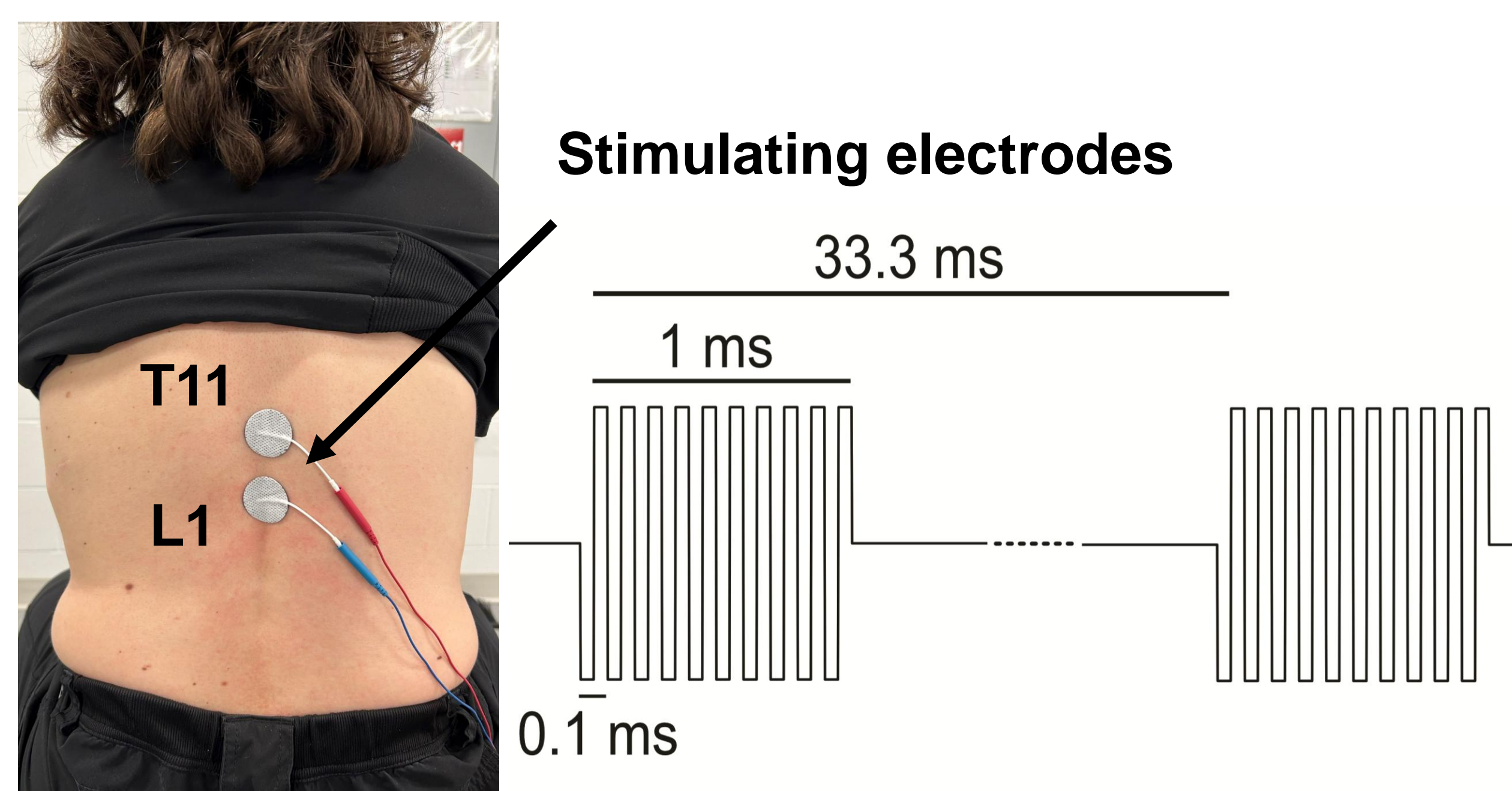
Prostep+

High-degree of control over speed and path of step trajectory

2Free

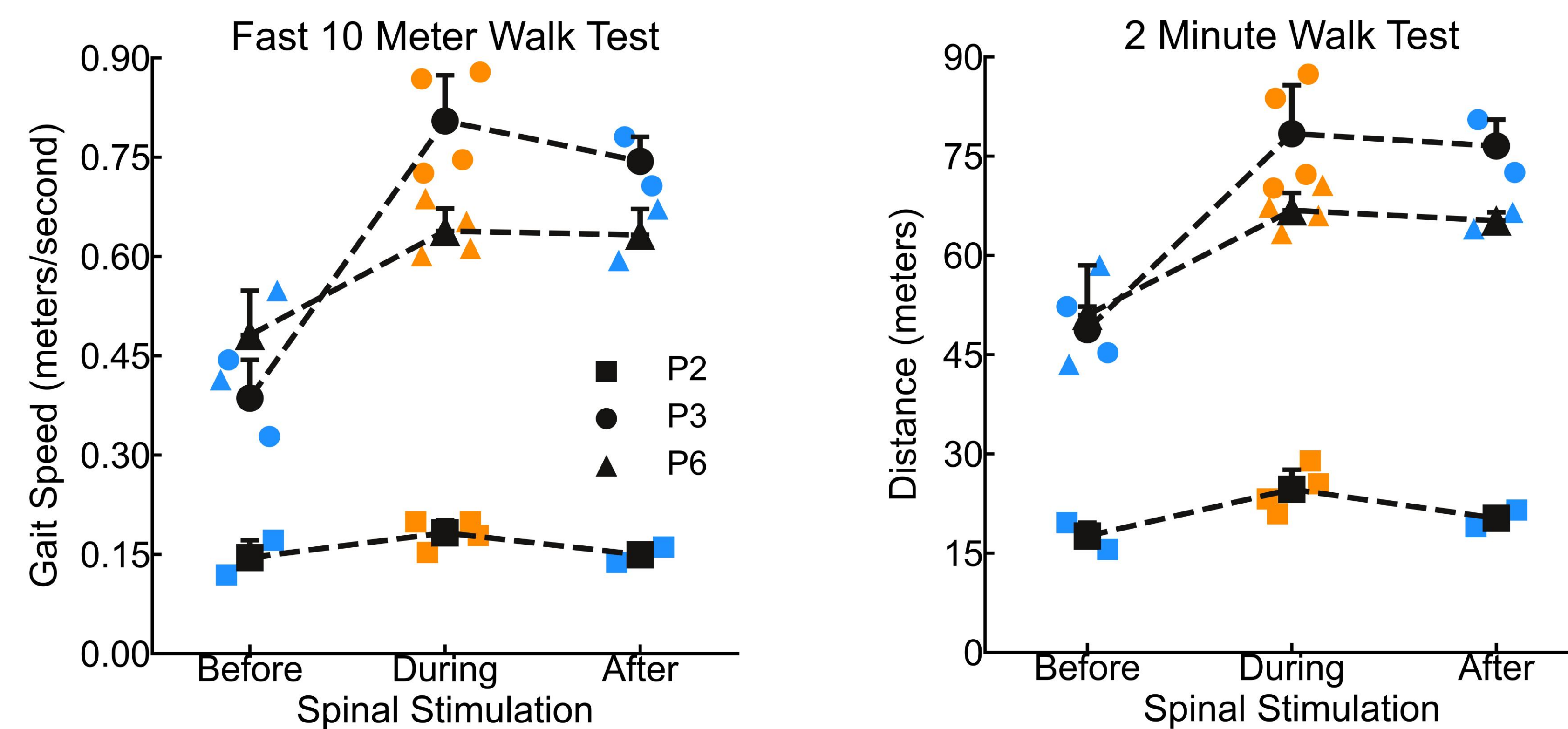
No control over step trajectory

Stimulation Setup and Waveform

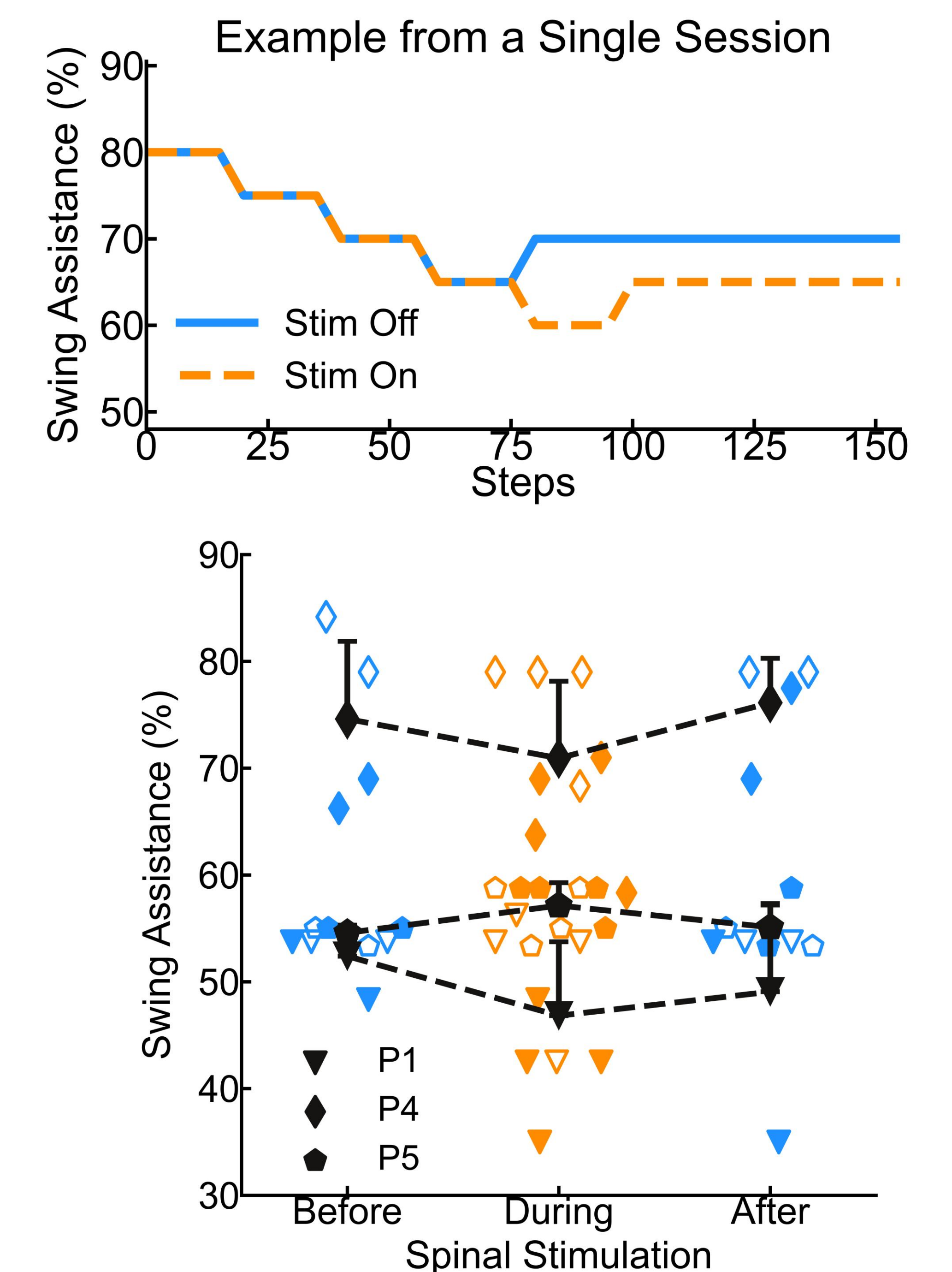


RESULTS

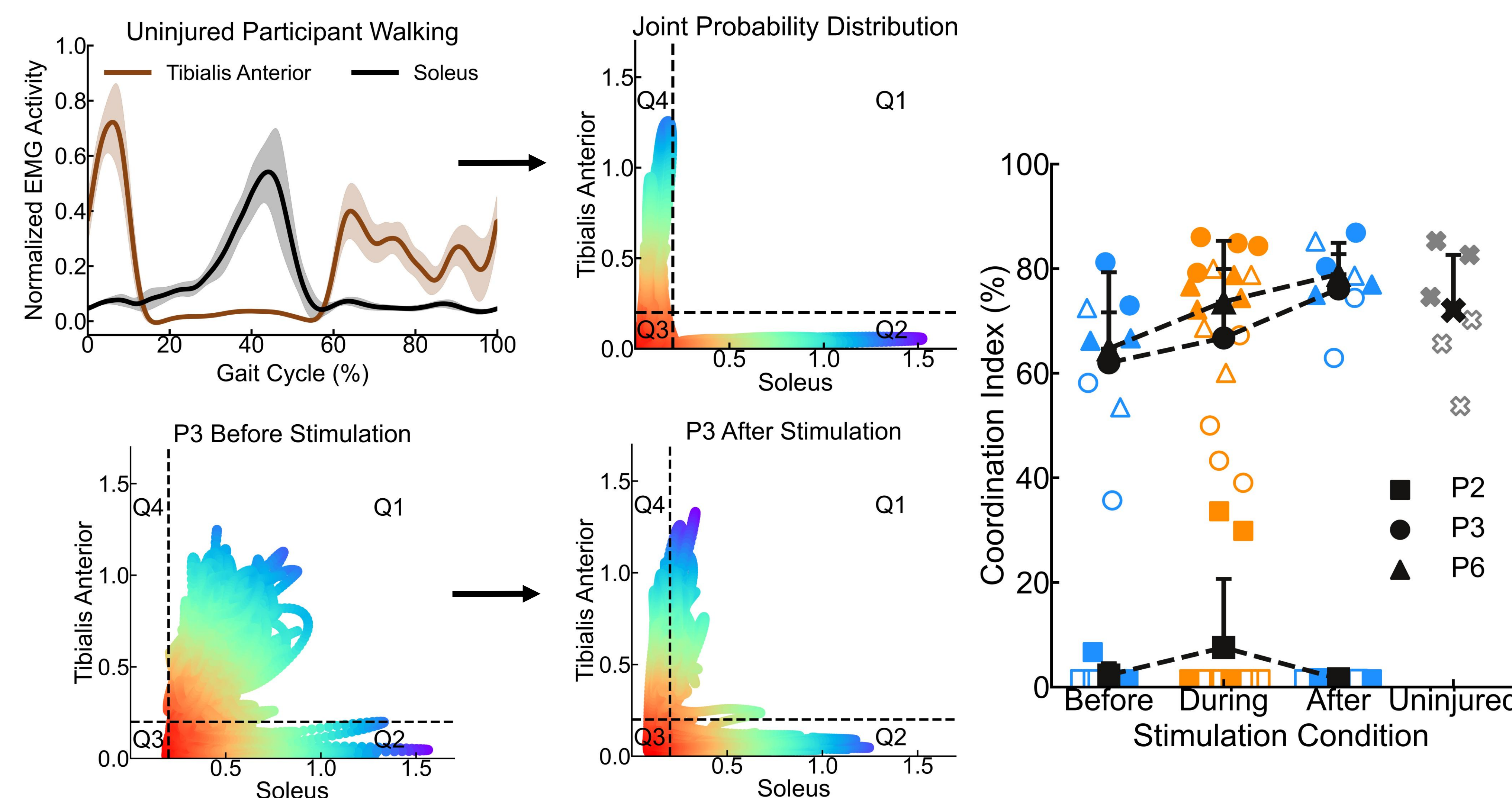
Stimulation Improves Gait Speed, Distance, and Kinematics



Changes in Exoskeleton Assistance with Stimulation



Stimulation Improved Muscle Coordination During the 2MWT



CONCLUSION

Our results highlight the potential of enhancing robotic exoskeleton gait training with transcutaneous spinal stimulation for walking recovery after SCI.

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