

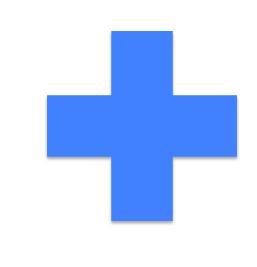
Expanding the scope of human factors in upperlimb prosthetic technology



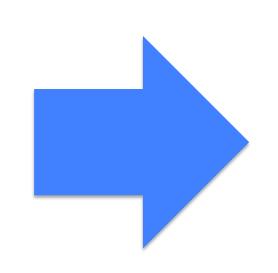
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The Problem:

Users of upper limb prosthetic technology (ULPT) often discontinue using their devices

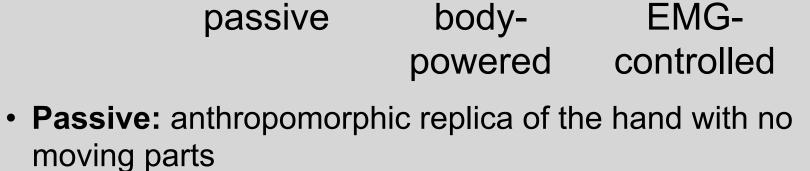


Little consensus about the cause(s) of ULPT abandonment despite current efforts



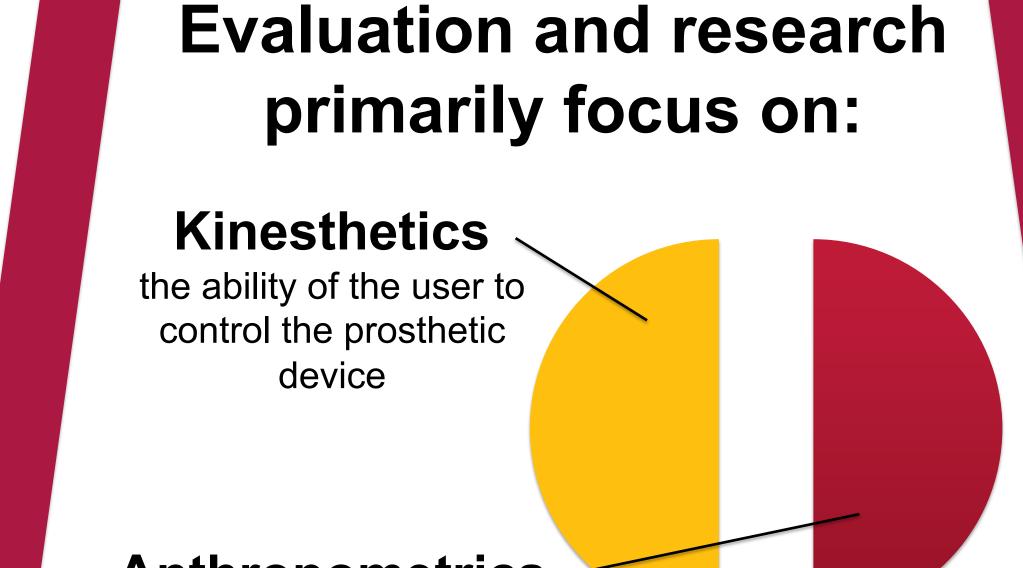
Suggest a deficiency in identifying the underlying determinants of ULPT use and abandonment

5%-90% abandonment rate for ULPTs¹ 100 (%) Rate 60 Rejection EMGbodypassive



- Body-powered: operated using cable and harness systems controlled by body movements (e.g. moving the shoulders or the arm)
- EMG-controlled: operated using electromyographic (EMG) signals recorded from residual limb muscles





Anthropometrics making prosthetic devices a

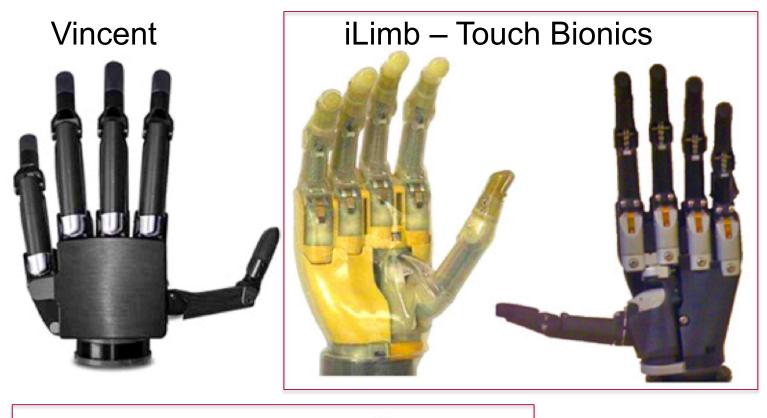
replica of the human model

Examples:

- Assessment of Capacity for Myoelectric Control²
 - assesses ability to perform 24 bimanual activities.
- Prosthetic Upper Extremity Function Index³
 - •assesses ability to perform upper extremity activities with a ULPT.



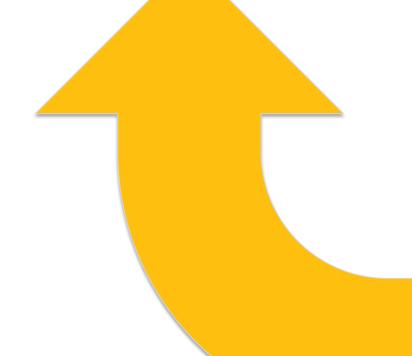
More time, energy, and resources to advance prosthetic technology⁴







Otto Bock



High abandonment rates persist despite using current metrics to assess and build "better" ULPTs

So what's missing?

Hypothesis

Broadening the current "human factors" model beyond (while including) anthropometric and/or kinesthetic aspects will clarify the relationship between ULPT design and evaluation processes and user needs.

Methods

- Identify:
 - existing measures that predict technology adoption, healthcare outcomes, healthcare behaviors, etc.
 - psychosocial factors that relate to ULPT use/ abandonment.
- Embed these psychosocial factors in to current ULPT design and evaluation processes.

Potential Outcomes

- Better predictability of ULPT use and abandonment.
- Guide future ULPT R&D and regulatory processes.

Please scan the QR code for references, contact info, and copy of poster:



