





#### AKTIVE MUSKELMODELLIERUNG AN DER SCHNITTSTELLE VON MEHRKÖRPER- UND KONTINUUMSMECHANIK

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### PART I

## **MULTI-BODY SIMULATIONS**



### **OUR VIEW ON THE BIOLOGICAL MOTOR**

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#### **COMPUTATIONAL MOTOR CONTROL**

**multiple EBDs** (single joint drives)

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Part I Multi-Body Model

Part II Continuum Model

Part III Coupled Model

Part IV Future Potential more complex drives (multi joint drives) well tuned control (all drives) movement tasks (daily living, ...)

account for disturbances (uneven ground, impact forces, ...)



## **DETAILED LUMBAR SPINE MODEL**



Part I **Multi-Body Model** 

Part II **Continuum Model** 

Part III **Coupled Model** 

Part IV **Future Potential** 







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	MAXING.

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#### 452 degrees of freedom

#### 48 mechanical dofs

202 Muscle-tendon complex (active, Hill-type)

#### **58** non-linear ligaments

5 intervertebral discs (non-linear, coupled)











#### **DETAILED LUMBAR SPINE MODEL**



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#### FUTURE DEVELOPMENT OF MULTI-BODY SIM

#### **Biomechanics**

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- Computational motor control should incorporate and evaluate muscle characteristics on control theories.
- The muscle model itselfs should account for transverse contraction and act on realistic muscle paths (via-points).
- The skeletal apparatus should consider realistic joint kinematics, soft tissue movement, and account for flexible bones (flexible rgb systems).

#### Methods

- Model reduction techniques should be applied to enhance multi-scale approach.
- Parallelisation of code should improve simulation time.
- User-friendly movement generation algorithms would open direct dynamics approach to engineers.

#### Part I Multi-Body Model

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### PART II

### **CONTINUUM-MECHANICAL MODELLING**

## Advantages of Continuum-Mechanical Models

Lumped-parameter models of skeletal muscles crudely represent structural properties of skeletal muscle mechanics, e.g. it is not possible

- to include complex muscle fibre distributions,
- to represent the interaction with surrounding tissue, e.g. inter-muscular force transmission,
- to include local muscle activity as obtained by multichannel EMG measurements.

#### **Continuum-Mechanical Skeletal Muscle Model**

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#### Part I Multi-Body Model

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Part IV Future Potential



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## **COMPLEX MUSCLE FIRBE ARCHITECTURE**



Part II Continuum Model

Part III Coupled Model

Part IV Future Potential



Magnitude of total Force at Maxilla 0.00 N (t = 0.00)

#### **Inverse Dynamics**







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## **New/Old Muscle Force Directions**



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### **MULTI-SCALE MUSCLE MODELLING**

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Part IV Future Potential



## NUMERICAL EXAMPLE: COMBINED MODEL

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#### First approach towards an integrated model (Farina, Negro)

- Electrophysiological model of the motoneurons
- Biophysical model of the half-sarcomere active stress
- Mathematical model: nonlinear ordinary differential equations
- Stimulation: noise-superimposed constant excitation



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## **UPSCALING / HOMOGENISATION**

#### Cellular variables at the Gauss points are computed by averaging the cellular variables of the closest grid points







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### **STIMULATION OF TIBIALIS ANTERIOR**

 The mechanical finite element mesh consists of 16 quadratic Lagrange elements.

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Part IV Future Potential

- A single muscle fibre is made up of 90 grid points.
- A total of 1024 "fibres" are embedded within the tibialis muscle.
- 70/30 distribution of muscle fibre Type I/II (slow/fast).
- The simulation captures 275ms. The cellular variables and the resulting deformations are calculated in 1ms increments.



Figure: Superficial (red), deep (gold) tibialis anterior and skin and fat (grey)







### **"EXTERNAL"** STIMULATION

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#### Stimulation protocol defining I<sub>stim</sub>(t) at the nodal locations of the neuromuscular junctions.

O. Röhrle, *"Simulating the Electro-Mechanical Behavior of Skeletal Muscles"*, IEEE Computing in Science and Engineering, DOI 10.1109/MCSE.2010.30





## WORK IN PROGRESS

- Compute virtual EMG signals (for validation and testing).
- Include a mechanical-based spindle model within the electro-mechanical framework.
- Include a biophysical motoneuron model including the feedback from the spindle model.
  - **DT-MRI** for complex muscle fibre distributions.
  - Extend framework to simulate the dynamics of a multi-muscle systems during gait (-> residual limb as FP7 ERC Starting Grant).





Part I Multi-Body Model

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Part IV Future Potential



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#### PART III

## COUPLING MULTI-BODY SIMULATIONS WITH CONTINUUM MECHANICAL MODELS







## FORWARD DYNAMICS FE MODELLING









### **ACTIVATION DRIVEN MOVEMENT**

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Part II Continuum Model

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Part IV Future Potential



Infotag DYNAmore 8.3.2013 In both cases, the activation of the biceps and triceps are simultaneously and linearly increased from 0..1. Left without contact, right with bone-muscle contact.





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## **COUPLING DIFFERENT FRAMEWORKS**

Part I Multi-Body Model

Part II Continuum Model

Part III Coupled Model

Part IV Future Potential

Preferenc	es	
Configura	tion	
Kinematic	input	
Profile	From a local file (without BMG)	:
Motion:		Pick file
Coarse sca	le model	
Profile	Demoa with EMG	:
Project:	«project»	2] Opfinad
Fine scale	model	
Profile:	Cmiss	:
Project:	«project»	t) (upload
	Smulate	
Simulatio	n	213
Results		P









### **FIRST RESULTS**

- Activation-driven musculoskeletal movement
- Activation of the triceps is maintained, while the activation for the biceps is linearly increased.
- Multi-body pre-calculation and corrections from a continuum-mechanical problem that accounts for complex structural arrangements, e.g. fibre distribution, muscle-bone contact.

Part I Multi-Body Model

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### **PART IV**

## POTENTIALS FOR ADVANCED MUSCULOSKELETAL MODELS







### **FUTURE POTENTIALS**

- More realistic (crash) simulations due to activation driven musculoskeletal models:
  - Mechanical properties of joints
  - Force/Stress distribution due to full contact

Continuum Model
Part III

**Coupled Model** 

**Multi-Body Model** 

Part I

Part II

Part IV Future Potential Human factor in pedestrian-car safety Human factor in passenger safety Human factor in comfort/car ergonomics

Ultimate goal: A realistic biomechanical-based avatar







# **THANK YOU!**