TECHNOLOGICAL ADVANCEMENTS IN PROSTHETICS – HOW FAR CAN WE GO?

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WORLD HEALTH ORGANIZATION

"With the aid of technologies, people with a loss in functioning are better able to live independently and participate in their societies"



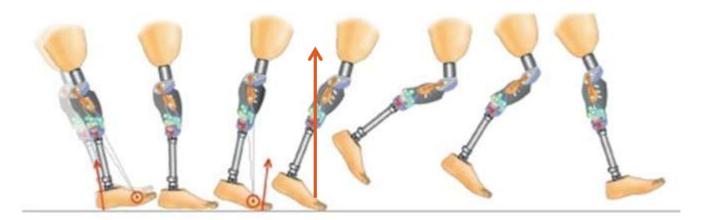
TRAINING PROGRAM

- October 2015
- Otto Bock Science Centre, Berlin
- Otto Bock Competence Centre Headquarters, Duderstadt
- To acquire and update the knowledge on cutting-edge prosthetic technology



TRANSFEMORAL AMPUTEE

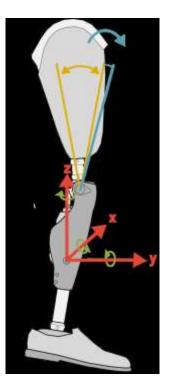
- Less than 30% of new transfemoral amputees fitted with prostheses (2010-2014, P&O/COC Internal Data)
- Physical conditions and other constraints
- The prostheses are unable to fulfill the needs of the patients (functions and safety)
- > The knee joint of the prosthesis is the biggest hurdle



MICROPROCESSOR CONTROLLED KNEE



- Built in acceleration sensors and gyroscope
- Parameters measured: Knee angle and angular velocities, extension moment, linear acceleration, orientation of shank in space, etc.
- Adjust joint movement on a real-time as-needed basis



LATEST DEVELOPMENT

- Optimized physiological gait
- Improve balance & reduce risk of fall
- Improve slope- and stair-walking ability
- Walking speed
- Sports mode
- Training mode
- > Waterproof





TRANSTIBIAL AMPUTEE

- High level of mobility
- Less demand on mechanical/electronic ankle joint
- Foot and ankle complex
- Performance over safety





MICROPROCESSOR CONTROLLED ANKLE JOINT

- Amputee who are low to moderately active (K2-3 level) and want to maintain an active lifestyle.
- Provide powered propulsion
- Automatically adjust the plantar flexion angle
- Faster walking speed
- Reduce energy expenditure
- More natural gait





SPORTS PROSTHESES

- Advancements in technology help to create prostheses adapting the different features of sports
- Factors to be considered: component selection, weight of prosthesis, energy rebound capacity, suspension, shock dampening, skin friction, etc.
- Sports: running, dancing, diving, cycling, golf, skiing, etc.

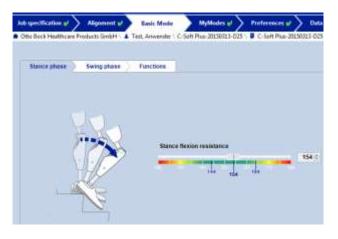




ROLES OF PROSTHETIST

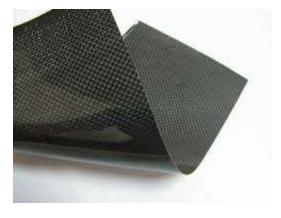
- Prosthetic prescription
- Biomechanical consideration in socket design
- Socket/skin interface
- Calibration of electronic components
- Dynamic alignment setting
- Sports mold setting
- Gait training
- To maximize the functions of the prosthesis to fit the needs/activities of individual amputee





MATERIALS SCIENCE AND TECHNOLOGY

- Carbon fiber
- Thin, lightweight but strong prosthetic socket
- Foot and ankle complex with excellent rebound capability
- Gel liners as socket interface: Thermoplastic elastomer, Polyurethane and Silicone
- Cushioning and evenly distributing the pressure
- Reduce skin friction and avoid breakdown when playing vigorous activities
- Suspension





UPPER EXTREMITY AMPUTEE

- Complexity of hand function
- High dropout rate, especially body power control hand user (mechanical)

"53% of dropout rate of paediatric myoelectric hand users" (Routhier 2001)

Prevalent practice is fitting of cosmetic hand



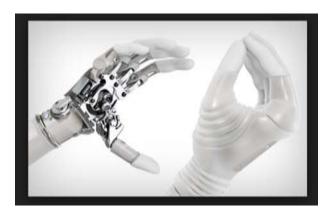






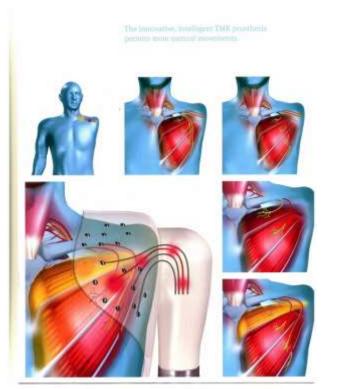
MYOELECTRIC HAND

- Has been made available in the market for more than 40 years
- Simple three jaw chuck opening and closing, wrist supination and pronation
- Latest development:
- i-limb
- Michelangelo hand
- Multi-axial movement, e.g. lateral pinch, lateral power grip, finger abd/adduction, tripod pinch, opposition power grip, open palm, neutral position





TARGETED MUSCLE REINNERVATION (TMR)



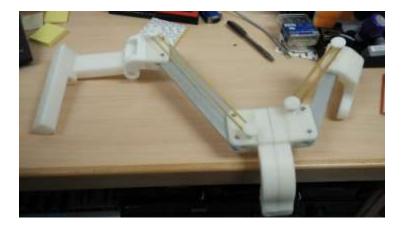
Otto Bock HealthCare GmbH

- Connect the functioning nerves from the residual limb to other target muscles (selective nerve transfer)
- As the muscles contract, the resulting electric signals are measured by electrodes > translate them into the intended movement.
- 3 degrees of freedom controlled simultaneously

3D PRINTING AND CAD CAM TECHNOLOGY

- Additive manufacturing technology
 - Synthesize a three dimensional object
- Local experiences
 - Maxillofacial prosthesis (ear)
 - Prosthetic socket
 - Mechanical exoskeleton robotic arm
- Germany: Partnership with NGO and open to the community
 - Private project or experiment
 - Provide training and assistance
- Allowed to use 3D printers and other expensive equipment





WHAT IS THE GAP?

Knowledge and skill

- Overseas training
- Certificate (e.g. Genium, Utah arm, Michelangelo hand)
- Heavily subsidized by the government
- Basic and essential
- Patients' choice items
- Easy access to information of high-end products but difficult to get appropriate recommendations / solutions from professionals
- Limited exposure and practice
- Confidence and motivation

WHERE ARE WE?







Standard of provision

- Validated assessment tools for prescription
- AMP and K-Levels
- Basic but appropriate
- From product manufacturing to comprehensive healthcare services
- Functional assessment, training and outcome evaluation

THE WAY AHEAD ...

- Consider to set up Regional Prosthetic Center in Hospital Authority
- Continuously review the coverage of the Samaritan Fund and Medical Fee Assistance scheme
- Partnership with NGO and Patient selfhelp groups, e.g. Hong Kong Amputees Sport Association
- Cooperate with the developers / P&O enterprises



Duderstadt, Germany













