App for motion analysis: pilot study

**Uso de aplicativo para análise de movimento: estudo piloto**

Fábio Marcon Alfieri¹, José Augusto Fernandes Lopes², Dhiogo José Corrêa de Sá², Carla de Sousa Lago Moussalli Jorge², Vinicius Delgado Ramos¹, Linamara Rizzo Battistella³

**ABSTRACT**

Alternative and low-cost measures may be important for analyzing human movement. **Objective:** The objective of this study was to verify the agreement of human movement analysis of a monitoring app that uses artificial intelligence compared to three-dimensional movement analysis. **Methods:** Observational cross-sectional case report study in which a healthy volunteer performed arm flexion, elbow flexion, trunk flexion, lateral trunk bending, and sitting and standing. Images of the volunteer were simultaneously captured by a three-dimensional movement analysis system based on infrared cameras and the Linkfit app of two mobile devices (smartphones). The body angles estimated by the Linkfit app were compared with the corresponding angles measured by the three-dimensional movement analysis system. The Granger causality test was used to compare the pairs of angles for each parallel data series. **Results:** The use of smartphone cameras and deep learning techniques for motion detection had an 84% degree of agreement compared to measurements generated by the three-dimensional movement analysis performed in the laboratory. **Conclusion:** The use of smartphone cameras and deep learning techniques is promising for conducting studies for body movement detection compared to the gold standard measures of movement analysis. This technology may become an alternative for movement analysis. Future studies should consider a more significant number of volunteers and model movements to strengthen the results obtained in this study.

**Keywords:** Movement, Smartphone, Telemedicine

**RESUMO**

Medidas alternativas e de baixo custo podem ser importantes para análise do movimento humano. **Objetivo:** Verificar a concordância de análise de movimento humano entre aplicativo de monitoramento por meio de inteligência artificial com análise tridimensional de movimento. **Método:** Estudo transversal observacional no qual voluntário sadio realizou movimentos de: flexão dos braços, flexão de cotovelos, flexão de tronco, inclinação de tronco e sentar e levantar. As imagens foram captadas por meio de sistema de análise tridimensional do movimento por câmeras infravermelhas e pelo aplicativo da Linkfit por meio de dois dispositivos móveis (smartphones). Foram comparados os ângulos estimados pelo aplicativo da Linkfit com os ângulos correspondentes medidos pelo sistema de análise tridimensional do movimento. Para comparar os ângulos da LinkFit com os ângulos mensurados pelo laboratório tridimensional de movimento, o teste de causalidade de Granger foi usado para cada série paralela dos dados. **Resultados:** A utilização de técnicas de visão computacional e deep learning para detecção de movimento utilizando câmeras de celular mostrou um grau de concordância de 84% em relação à medidas geradas por análise tridimensional de movimento realizadas em laboratório. **Conclusão:** A utilização de técnicas de visão computacional e deep learning é promissora para a realização de estudos que envolvem a detecção do movimento do corpo humano, quando comparadas com medidas de padrão-ouro de análise de movimento, podendo ser portanto, uma alternativa. Estudos futuros devem ser realizados utilizando maior número de voluntários e movimentos, com o intuito de consolidar os resultados obtidos nesse estudo.

**Palavras-chaves:** Movimento, Smartphone, Telemedicina
INTRODUCTION

The human movement encompasses several functions such as walking, executing simple daily activities such as personal hygiene, or even the complex and fine movements of high-performance sports. It bears complexity due to the various sensorimotor interactions that it demands.1,2

The development of motion assessment methods to improve accuracy and reliability has yielded useful investigative tools in various areas of research and clinical practice of rehabilitation, ergonomics, sports, and others.3

The principle of analyzing the human body movement via images consists of capturing a sequence of photos (photogrammetry) with one or more cameras, obtaining position and orientation data of the whole body or parts of interest by measurements conducted on these images. Three-dimensional motion analysis may be unfeasible in the clinical environment because it requires ample physical space, complex equipment, the experience of professionals for data collection and analysis, not to mention its high cost.4

Recently, new smartphones applications (apps) are also proposing to assess body movement.4 A systematic review and meta-analysis on the validity and reliability of smartphones apps for assessing spinal kinematics concluded that it is currently possible to use smartphones to measure the range of motion of cervical flexion and extension, lateral flexion, and lumbar flexion. Also, smartphones can evaluate the thoracic region and lumbar extension. However, they report that more studies are needed for the safe use of these instruments as evaluation methods.4 Another study stated that smartphones and apps are important tools for health care; however, they are used without thoroughly understanding their risks and benefits. Furthermore, rigorous evaluation, validation, and development of best practices for healthcare applications are necessary to ensure a proper level of quality and safety when these tools are used.5

Recently, LinkFit developed an app with a series of available physical activities, in which artificial intelligence and computer vision algorithms monitor and correct movements in real-time. The OpenPose algorithm2 is used to obtain the positions of anatomical points during exercises according to images obtained by a smartphone camera. The trajectories of these anatomical points are analyzed through a specially developed algorithm, allowing the orientation and correction of the exercises during their execution and the subsequent analysis by the prescribing professional. It is essential to guarantee the reliability of the anatomical spots obtained by this method, once they are the basis for the correct assessment of the exercises being performed.

OBJECTIVE

The objective of this study was to verify the agreement of the human movement assessment performed by the artificial intelligence monitoring app compared to a three-dimensional movement analysis conducted in a laboratory.

METHODS

This pilot study was conducted under the principles of the Declaration of Helsinki. A male volunteer, staff from the rehabilitation center in which this study was carried out, authorized his participation, which consisted of capturing his movement images. The individual was healthy and did not have musculoskeletal pain or neurological alterations that could hinder the performance of the requested movements.

The volunteer was asked to perform the following movements to capture the movements, as instructed during data collection: 1. arms flexion - raise the extended arm, close to the body, starting the movement with the extended arm downwards, and ending with the extended arm upwards; 2. elbow flexion - with the elbow fixed to the body, flex the forearm; 3. trunk flexion - touch the tips of the fingers in the tips of the toes, without bending the knees; 4. lateral trunk bending - with the arms close to the body and downwards, incline the trunk to the right and then to the left; 5. sit and stand - with the help of a chair, sit and stand without flexing the spine. Five repetitions of each movement were performed and recorded. Chart 1 shows the angles analyzed for each movement performed by the volunteer.

<table>
<thead>
<tr>
<th>Movement</th>
<th>Region of interest</th>
<th>Angle of interest</th>
</tr>
</thead>
<tbody>
<tr>
<td>Arms flexion</td>
<td>Arm and forearm</td>
<td>L_ELBOW</td>
</tr>
<tr>
<td>Elbow flexion</td>
<td>Arm and forearm</td>
<td>FRONT_ELBOW</td>
</tr>
<tr>
<td>Trunk flexion</td>
<td>Trunk</td>
<td>BACK_HIP, FRONT_HIP</td>
</tr>
<tr>
<td>Trunk lateral bending</td>
<td>Trunk</td>
<td>SHOULDER, BACK_HIP, FRONT_HIP</td>
</tr>
<tr>
<td>Sit and stand</td>
<td>Spine and lower limbs</td>
<td>BACK_HIP, FRONT_HIP, BACK_KNEE, FRONT_KNEE</td>
</tr>
</tbody>
</table>

To capture the volunteer’s movements, the three-dimensional movement analysis system installed at the Vila Mariana Unit of the Instituto de Medicina Física e Reabilitação do Hospital das Clínicas da Faculdade de Medicina da Universidade de São Paulo (IMREA/HCFMUSP) was used as the gold standard.

This system comprises eight infrared cameras model Oqus® 300 and 2 hybrid cameras (infrared and color video) model Oqus 210c from Qualisys AB (Sweden), connected to a computer with the Qualisys Track Manager® software version 2.11. This software reconstructs the three-dimensional trajectories of reflective spherical markers applied to the volunteer’s body. Twenty-one markers were applied to anatomical points according to the modified Helen Hayes protocol:7 anterosuperior iliac spines, sacrum, lateral sides of the thighs (distal third), lateral condyles of the femurs, lateral faces of the legs (proximal third), lateral malleolus, calcaneal and second metatarsal heads, acromion, lateral humeral epicondyles, midpoints between the styloid processes of the radius, and ulna. The three-dimensional coordinates of these markers were recorded at a frequency of 100Hz.

Subsequently, the Orthotrak® software version 6.2, from Motion Analysis Corporation (USA), was used to calculate the anatomical points’ three-dimensional trajectories, i.e., the joint angles that would be compared to those obtained by the app.
To capture the movements by the Linkfit app, two mobile devices, one branded Xiaomi® Mi 9 SE with a 48MP camera and a Motorola® G5S Plus with a 13MP camera, were positioned respectively in front (anterior) of and to the side (lateral) the volunteer, capturing the images at a rate of 30 frames per second. With the Openpose® algorithm, which uses deep learning techniques for posture inference, it was possible to capture the 2D position of 18 anatomical points - eyes, ears, nose, neck, shoulders, elbows, wrists, hips, knees, and feet. 13 angles were calculated from these points, as described in Chart 2.

**Chart 2. Angles of interest, description, and camera position**

<table>
<thead>
<tr>
<th>Angle name</th>
<th>Description</th>
<th>Camera position</th>
</tr>
</thead>
<tbody>
<tr>
<td>FRONT_HIP</td>
<td>Anterior view angle formed by the shoulder, hip, and knee</td>
<td>lateral</td>
</tr>
<tr>
<td>BACK_HIP</td>
<td>Posterior view angle formed by the shoulder, hip, and knee</td>
<td>lateral</td>
</tr>
<tr>
<td>R_HIP</td>
<td>Right lateral view angle formed by the shoulder, hip, and knee</td>
<td>anterior</td>
</tr>
<tr>
<td>L_HIP</td>
<td>Left lateral view angle formed by the shoulder, hip, and knee</td>
<td>anterior</td>
</tr>
<tr>
<td>FRONT_KNEE</td>
<td>Frontal view angle formed by the hip, knee, and ankle</td>
<td>lateral</td>
</tr>
<tr>
<td>BACK_KNEE</td>
<td>Posterior view angle formed by the hip, knee, and ankle</td>
<td>lateral</td>
</tr>
<tr>
<td>R_KNEE</td>
<td>Right lateral view angle formed by the hip, knee, and ankle</td>
<td>anterior</td>
</tr>
<tr>
<td>L_KNEE</td>
<td>Left lateral view angle formed by the hip, knee, and ankle</td>
<td>anterior</td>
</tr>
<tr>
<td>FRONTAL_ELBOW</td>
<td>Frontal view angle formed by the shoulder, elbow, and wrist</td>
<td>lateral</td>
</tr>
<tr>
<td>BACK_ELBOW</td>
<td>Posterior view angle formed by the shoulder, elbow, and wrist</td>
<td>lateral</td>
</tr>
<tr>
<td>R_ELBOW</td>
<td>Right lateral view angle formed by the shoulder, elbow, and wrist</td>
<td>anterior</td>
</tr>
<tr>
<td>L_ELBOW</td>
<td>Left lateral view angle formed by the shoulder, elbow, and wrist</td>
<td>anterior</td>
</tr>
<tr>
<td>SHOULDER</td>
<td>Right lateral view angle formed by the shoulder, neck, and x-axis</td>
<td>anterior</td>
</tr>
</tbody>
</table>

A pairing was made between the angles generated by the Linkfit app and the corresponding angles measured at the three-dimensional movement analysis laboratory to enable the comparison, as shown in Chart 3.

**Chart 3. Equivalence between the angles generated by the Linkfit app and those generated at the movement analysis laboratory**

<table>
<thead>
<tr>
<th>Linkfit app angles</th>
<th>Movement analysis laboratory angles</th>
</tr>
</thead>
<tbody>
<tr>
<td>FRONT_HIP</td>
<td>L_HIP Flex ANG</td>
</tr>
<tr>
<td>BACK_HIP</td>
<td>R_HIP Flex ANG</td>
</tr>
<tr>
<td>R_HIP</td>
<td>R_HIP Abd ANG</td>
</tr>
<tr>
<td>L_HIP</td>
<td>L_HIP Abd ANG</td>
</tr>
<tr>
<td>FRONT_KNEE</td>
<td>L_KNEE Flex ANG</td>
</tr>
<tr>
<td>BACK_KNEE</td>
<td>R_KNEE Flex ANG</td>
</tr>
<tr>
<td>R_KNEE</td>
<td>R_KNEE Abd ANG</td>
</tr>
<tr>
<td>L_KNEE</td>
<td>L_KNEE Abd ANG</td>
</tr>
<tr>
<td>FRONTAL_ELBOW</td>
<td>L_Elbow_Ang</td>
</tr>
<tr>
<td>BACK_ELBOW</td>
<td>R_Elbow_Ang</td>
</tr>
<tr>
<td>R_ELBOW</td>
<td>R_Elbow_Ang</td>
</tr>
<tr>
<td>L_ELBOW</td>
<td>L_Elbow_Ang</td>
</tr>
<tr>
<td>SHOULDER</td>
<td>Trunk_Lat_Tilt</td>
</tr>
</tbody>
</table>

**Figure 1. Data collection and preparation flow for image analysis**

with the rolling mean of the series. To correct and match the start of the lab and Linkfit recordings, we transposed the time series of the Linkfit data, combining the two global maxima from each series.

**Data analysis**

To compare the angles measured by Linkfit to the angle measurements of the laboratory, the Granger Causality test was used for each combined series. The Granger test is widely used for predicting time series. In this study, we hypothesize that knowing that both methods measure the same event with the same objectives, they should be the same in the optimal case, therefore, the causality should be maximum. A Granger test was implemented for each series and its angles, accepting the null hypothesis (where one series does not g-cause the other), with a p-value of 0.005. Finally, we calculated the number of times in which hypothesis one was denied – where one series g-causes the other – divided by the total amount of series.
RESULTS

The results obtained in this study show a suitable causal relationship between the angles captured by the gold standard, which was the three-dimensional analysis of movement at a movement laboratory and the software proposed by Linkfit.

Table 1 shows, for each angle analyzed, the percentage of times the Granger causality was positive, i.e., the null hypothesis was rejected.

<table>
<thead>
<tr>
<th>Angle</th>
<th>% of g-causes</th>
</tr>
</thead>
<tbody>
<tr>
<td>FRONT_HIP</td>
<td>75%</td>
</tr>
<tr>
<td>BACK_HIP</td>
<td>83%</td>
</tr>
<tr>
<td>FRONT_KNEE</td>
<td>80%</td>
</tr>
<tr>
<td>BACK_KNEE</td>
<td>100%</td>
</tr>
<tr>
<td>L_ELBOW</td>
<td>75%</td>
</tr>
<tr>
<td>FRONT_ELBOW</td>
<td>80%</td>
</tr>
<tr>
<td>SHOULDER</td>
<td>100%</td>
</tr>
<tr>
<td>Mean</td>
<td>84%</td>
</tr>
</tbody>
</table>

As presented previously, each exercise was used to measure specific body angles. Therefore, considering the arm and the forearm, we found 75% for L_ELBOW and 80% for FRONT_ELBOW (causality average of 77.5%) during the exercises of arm flexion and elbow flexion. Considering the trunk, we found 75% for FRONT_HIP, 83% for BACK_HIP, and 100% for SHOULDER (causality average of 86%) during trunk flexion exercises and lateral trunk bending. Regarding spine and lower limbs, we found 75% for FRONT_HIP, 83% for BACK_HIP, 80% for FRONT_KNEE, and 100% for BACK_KNEE (causality average of 84.5%), during the sit to stand exercise.

DISCUSSION

Movement is an essential aspect of human life. It is essential for various daily activities such as locomotion, feeding, work, and physical or sports activities. It is known that the individuals move to obey the demands of any task being realized within a specific environment.

During sports practice or any physical activity, the correct movement must be performed so that the activity effectively promotes gains, without adverse events such as injuries that the wrong posture can cause during the execution of specific movements. Therefore, in this study, the comparison between the movement analysis performed by a movement laboratory and the measurements performed by the smartphone app becomes very important. Although this study is a case report, our results show promising course smartphone cameras combined with machine learning and deep learning models for motion analysis in a more accessible way.

Despite the algorithm’s limitations, the use of cell phone cameras should bring great accessibility to motion analysis solutions. Consequently, this technology may help identify difficulties in executing movements or even aid the assessment of diseases in which movement is compromised. The agreement observed between the movement analysis performed by the gold standard (three-dimensional movement laboratory) and the Linkfit app is relevant once it is possible to infer that the adjustments suggested by the app’s artificial intelligence during the execution of the movements are based on reliable measurements. Therefore, safety and efficiency in executing movements can be adequately provided.

Our results agree with a review on the use of smartphones for motion analysis. This review concluded that these devices demonstrated relevant capability as non-invasive motion monitoring. Furthermore, studies have shown that when movement detection components are used, the device can estimate various movements with potential applications for healthcare.

These results are also compatible with those obtained in a study that compared motion analysis algorithms by video cameras, including Openpose, to a reference method with markers in a three-dimensional movement analysis laboratory. In that study, systematic differences were obtained in the calculated positions of joint centers that ranged from 1mm to 50mm, depending on the joint and movement studied. They concluded that, regardless of the reliability limitations of their data, the image analysis methods without body markers are promising for applications in environments outside the laboratory, provided that these limitations are resolved.

Some limitations of the present study include the inclusion of only one volunteer and a restricted set of simple movements and the need for adjustments to allow comparison between measurements made by different instruments. Nonetheless, this methodology allowed the verification of reasonable compatibility between the measurements obtained by both systems. Consequently, the potential for using a technique that is easier to access than the traditional method of a three-dimensional movement analysis laboratory could be stated.

Therefore, future studies to analyze apps the reliability of apps to evaluate performances of more complex movements or even verify the effectiveness of exercise programs guided by this type of system are essential and desirable.

CONCLUSION

This study concluded that the angles measured by images captured with smartphone cameras, if processed as described in the methods described in this study, could be effectively compared with measurements of a three-dimensional movement analysis laboratory 84% of the time.

REFERENCES


