

Imago

REHAB

Rethinking Rehabilitation:

Improving Function & Inspiring Hope

Kristin Nuckols OTD, MOT, OTR/L
Cofounder & Chief Clinical Officer



800,000 Americans per year*

Stroke doesn't discriminate



<https://www.susanreed.com>



<https://www.instagram.com/jacksmiley>

800,000 Americans per year*

Susan



<https://www.susanreed.com>

Jack



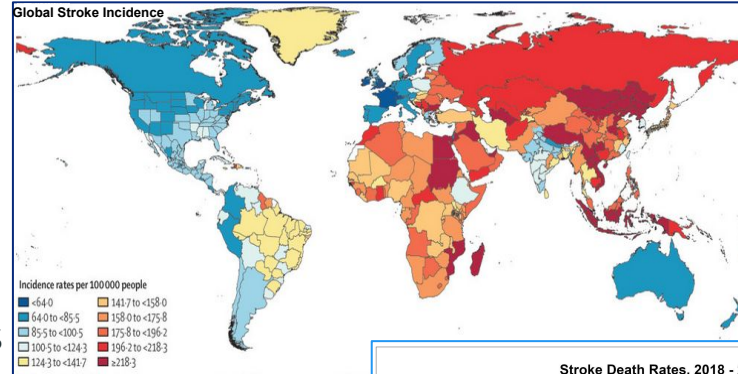
<https://www.instagram.com/jacksmiley>

A global problem

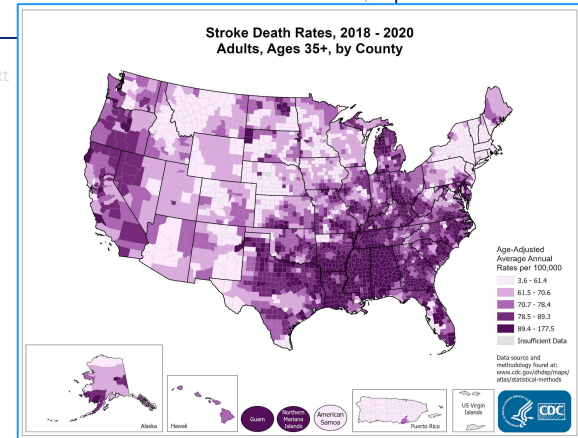
- Leading cause of disability worldwide
- Second leading cause of death
- Risk of stroke +50% in past 20 years
- 1 : 4 people is predicted to have a stroke in their lifetime

Good News → more people are surviving strokes

Not as Good News → more people are living with increased rates of disability (DALY)



[https://www.thelancet.com/journals/laneur/article/PIIS1474-4422\(21\)00252-0/fulltext](https://www.thelancet.com/journals/laneur/article/PIIS1474-4422(21)00252-0/fulltext)



Howard & Howard. Stroke. 2020;51:742-750.
DOI: 10.1161/STROKEAHA.119.024155.

A global problem

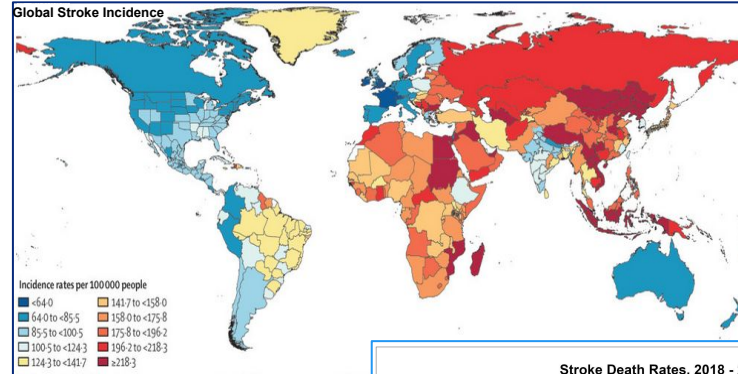
Leading cause of disability worldwide

Second leading cause of death

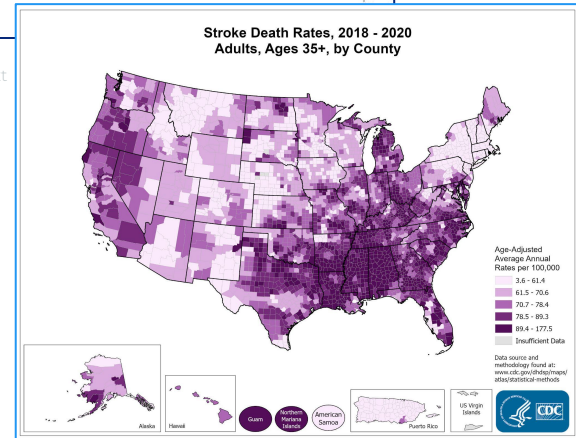
Risk of stroke +50% in past 20 years

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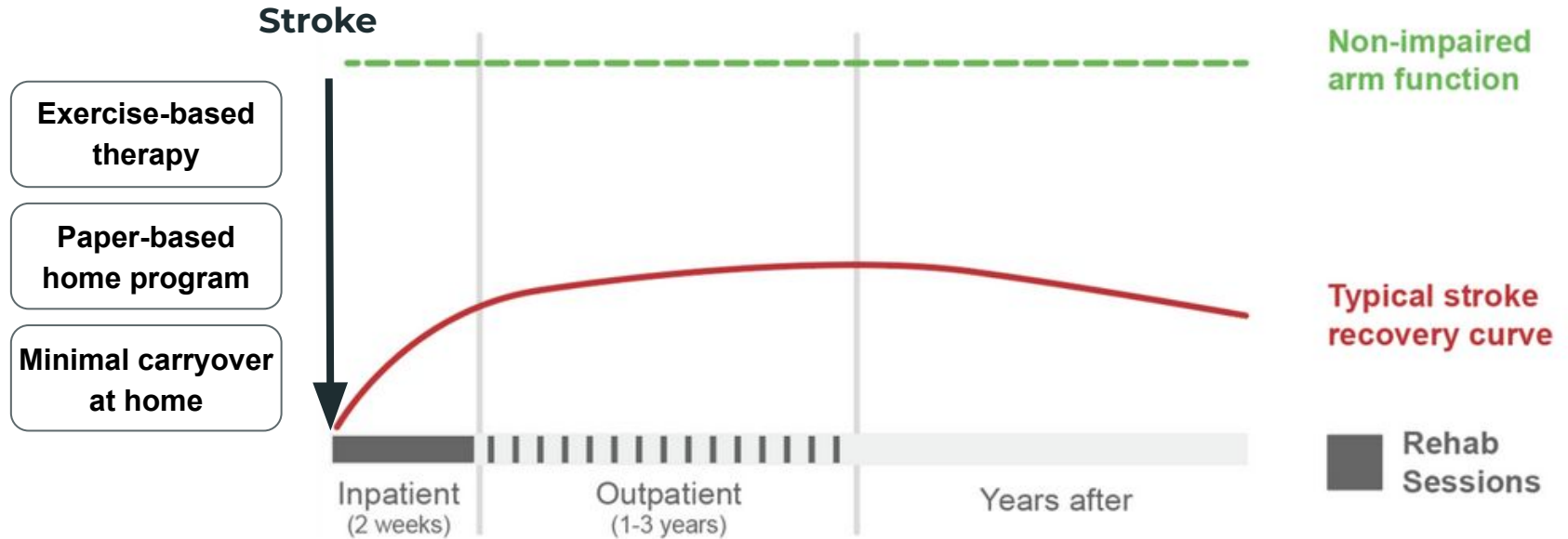


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Traditional Stroke Recovery



https://www.ahajournals.org/doi/10.1161/STROKEAHA.122.041098?utm_source=miragenews&utm_medium=miragenews&utm_campaign=news

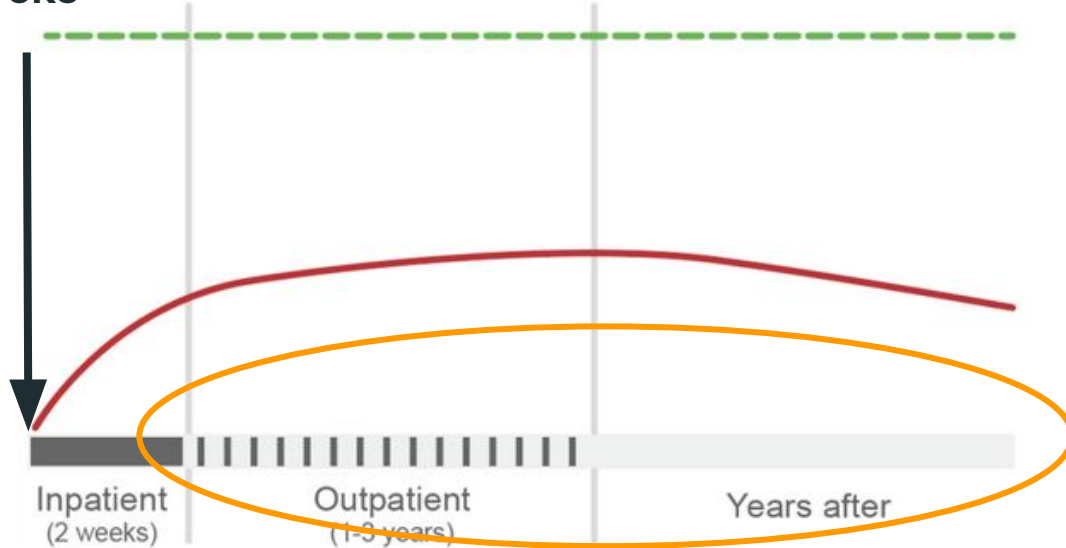
Traditional Stroke Recovery

Within 30 days:
 $\frac{1}{3}$ ➔ **received 0 rehab services**

Within 90 days, clients with stroke received **6-8 sessions** of combined therapy

After 90 days, they received on avg **0- 1.5 sessions**

Stroke



Non-impaired arm function

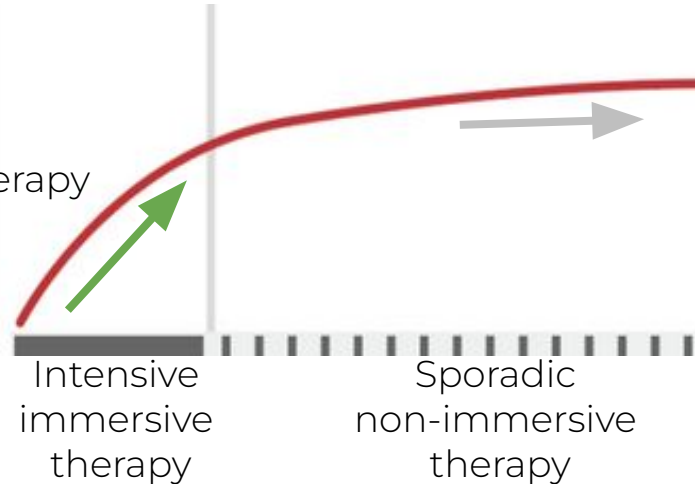
Typical stroke recovery curve

Rehab Sessions

Traditional Stroke Recovery

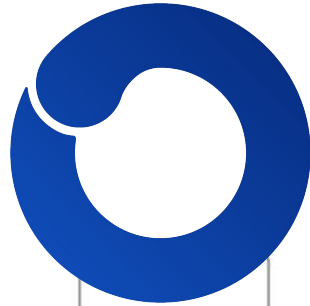
Why such little therapy?

- Accessibility of high quality rehabilitation services
 - Transportation
 - Availability
 - Insurance benefits/cost of therapy
- The dreaded plateau...
 - Is it any surprise?



Are you ready for a better vision for stroke recovery?

A better vision for stroke and brain injury rehabilitation

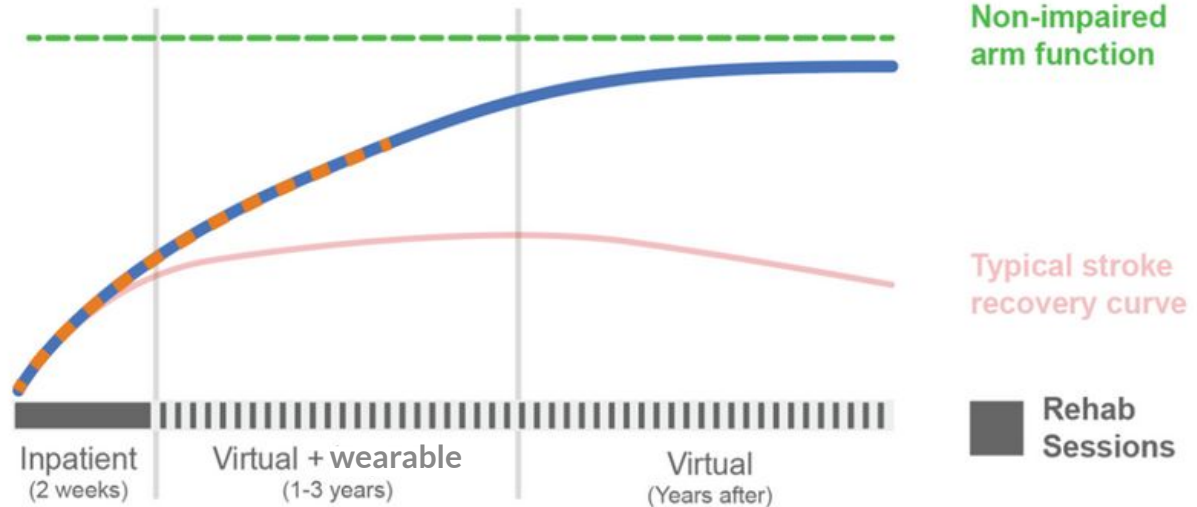


Home-based
Technologies



Digital
Therapeutic

Activity Based
Therapy



Non-impaired
arm function

Typical stroke
recovery curve

Rehab
Sessions

A better vision for stroke and brain injury rehabilitation



Home-based
Wearable
Technologies



Digital
Therapeutics



Activity Based
Therapy

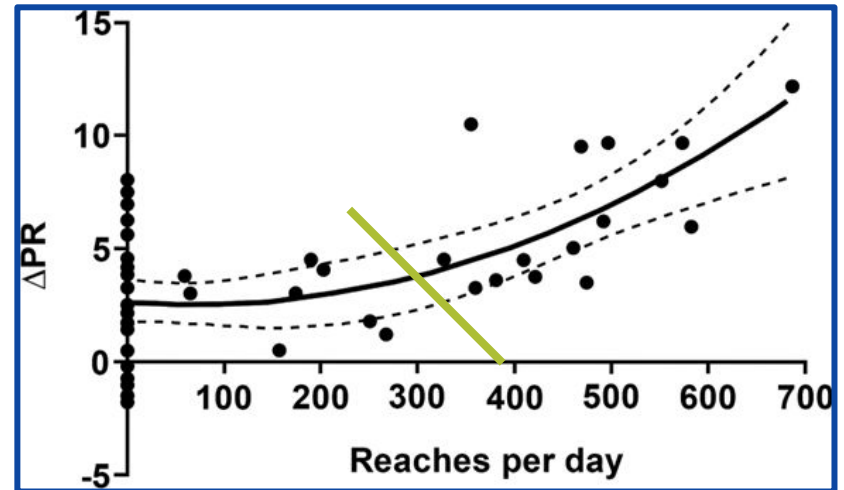
What is needed to change the brain post-stroke?

32 reps per session

vs

300 reps per session

Category or subcategory	% (no.) of sessions observed in*	Repetitions/ session
Upper extremity		
Active exercise	36 (13)	38.8
Passive exercise	47 (17)	33.9
Purposeful	44 (16)	12.0
Sensory	17 (6)	2.5



Lang et al. 2007

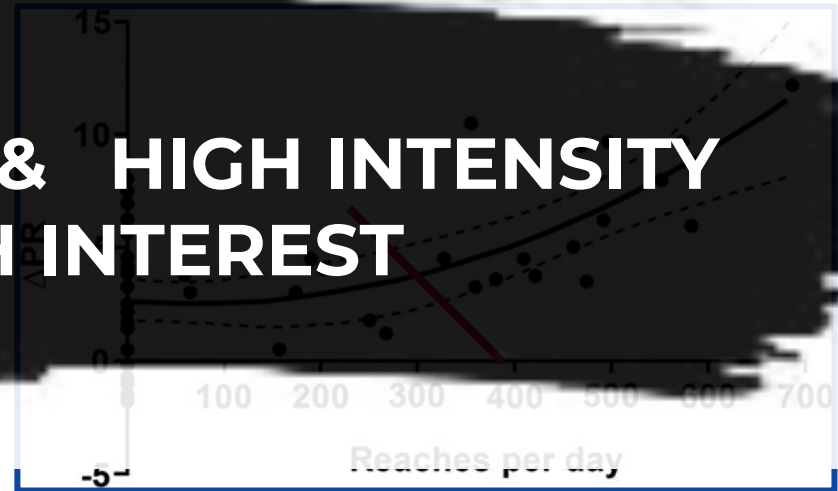
Jeffers et al. 2018

What is needed to change the brain post-stroke?

32 reps per session vs 300 reps per session

Category or category	% (no.) of sessions observed in 2 sessions	Repetitions/ session
Upper extremity		
Active exercise	36 (13)	33.9
Passive exercise	47 (17)	12.0
Purposeful	44 (16)	2.5
Sensory	17 (6)	

HIGH DOSAGE & HIGH INTENSITY & HIGH INTEREST



Lang et al. 2007

Jeffers et al. 2018

“Best Case” Clinical Therapy



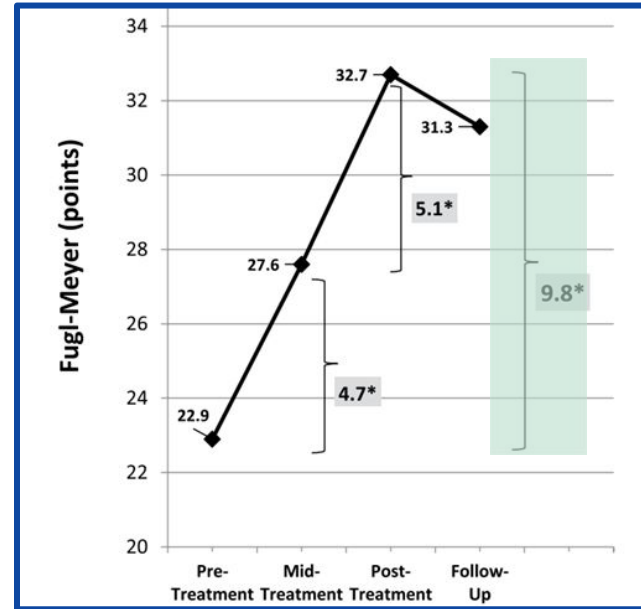
Chronic stroke



Moderate or more spasticity



Technology-based care
with functional electrical
stimulation and
arm/hand robotics



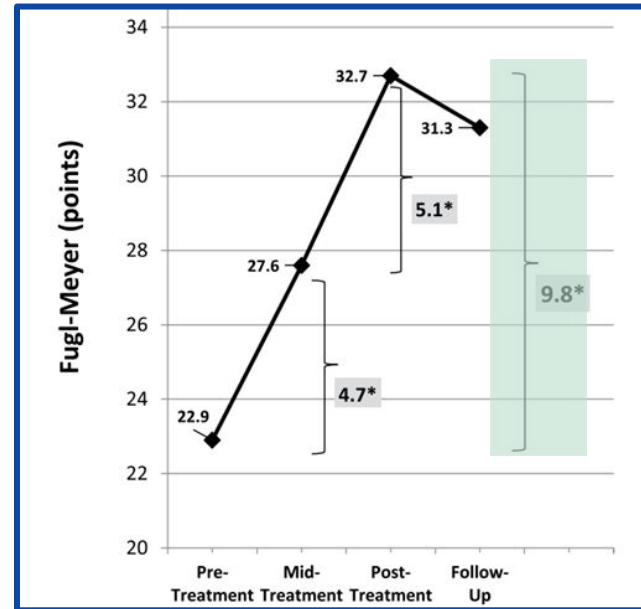
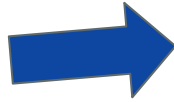
Daly et al. NNR 2019

“Best Case” Clinical Therapy

Chronic stroke

Moderate or more
spasticity

Excellent change
on assessments!



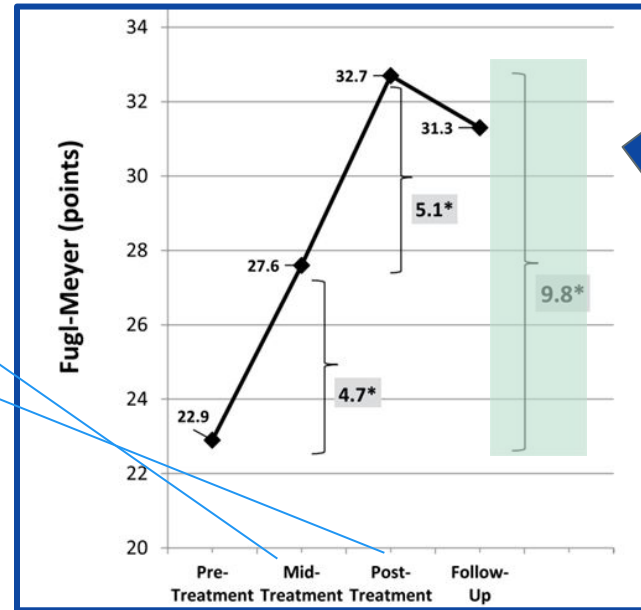
Daly et al. NNR 2019

“Best Case” Clinical Therapy

Mid-Treatment: **150 hours** of therapy (6 wks)

Post-Treatment: **300 hours** of therapy (12 wks)

5 hours of therapy per day
5 days a week



Excellent change in FMA-UE!

Daly et al. NNR 2019

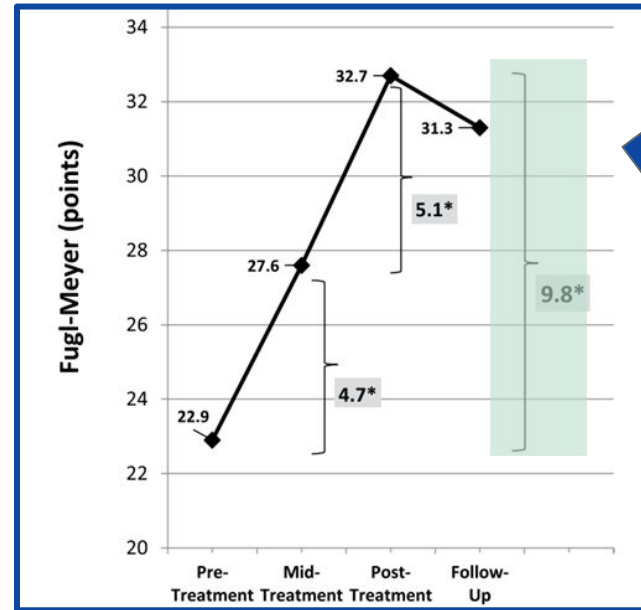
“Best Case” Clinical Therapy

5 hours of therapy per day

5 days a week

Over 6 weeks =

45,000 reps?



Excellent change
in FMA-UE!

Daly et al. NNR 2019

“Best Case” Clinical Therapy..in reality

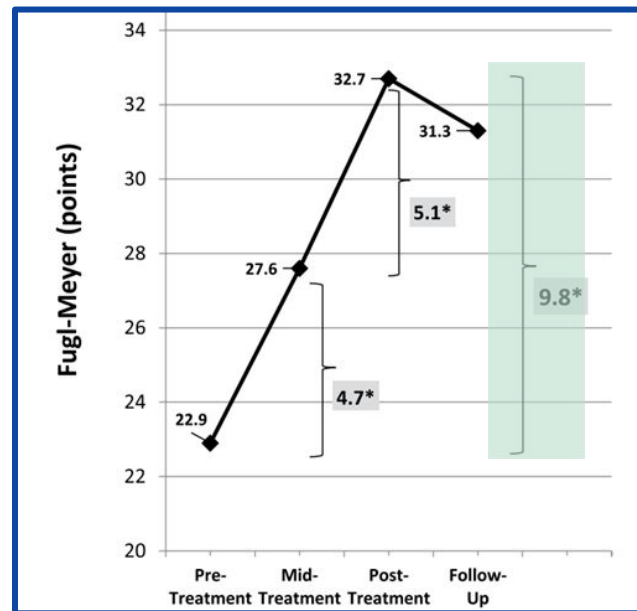
60 car rides to and from
hospital facility

Care partner time and effort

6 weeks spent out of work, home,
family routines to do therapy

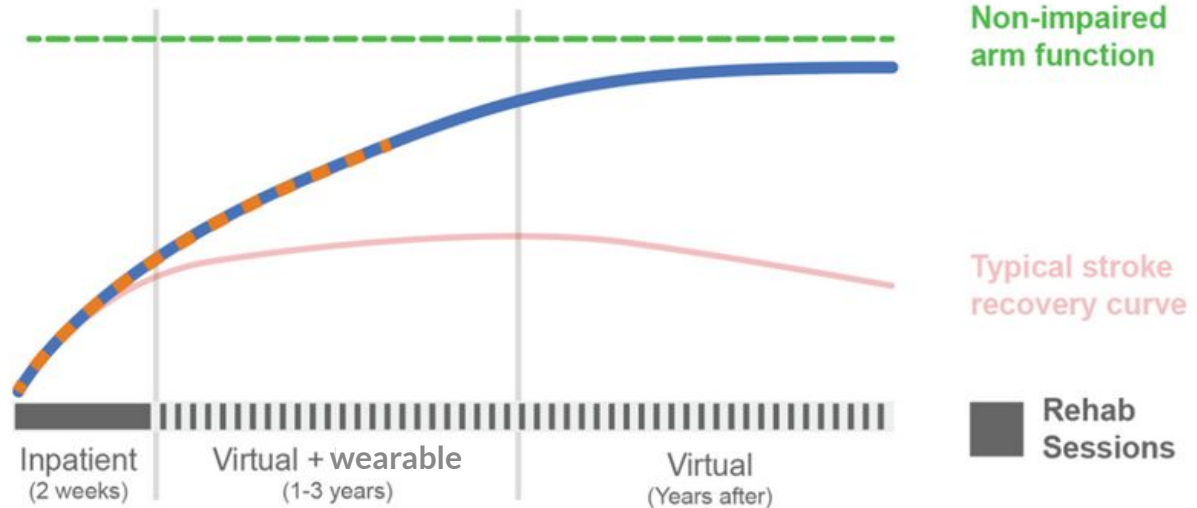
No known carryover to
activities of daily living

\$5,000 cost of therapy model
(per authors)



Daly et al. NNR 2019

A better vision for stroke and brain injury rehabilitation



Rehabilitation of the future

People need MORE rehab.

People need BETTER rehab.

Rehab needs to happen at HOME.

“Best Case” Clinical Therapy = Imago Rehab’s reality

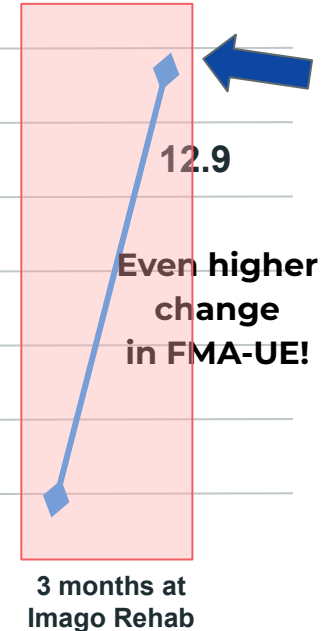
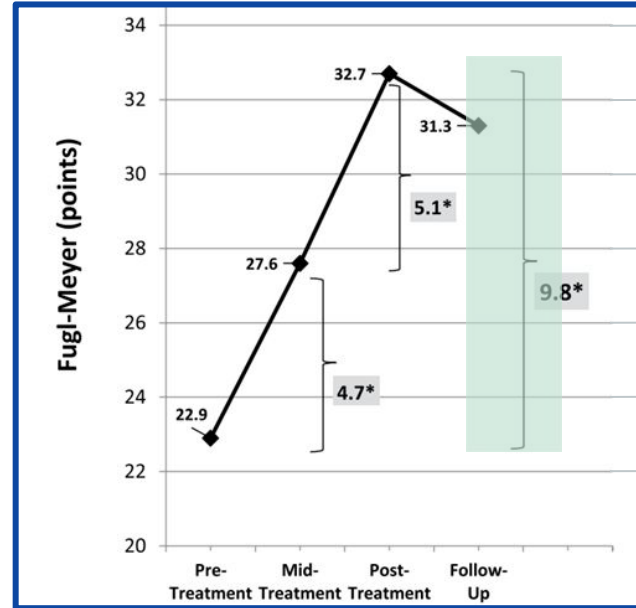
Therapy from home

Minimal care partner time and effort

Therapy embedded into your work, home, and family routines

Significant carryover to activities of daily living

2x week therapy at cost of your insurance plan therapy provision



Daly et al. NNR 2019

Introducing a *different* kind of robot



Harvard University: [Bioinspired Robotics: Smarter, Softer, Safer](#)

Wearable Technology for Stroke Rehabilitation



<https://biodesign.seas.harvard.edu/>



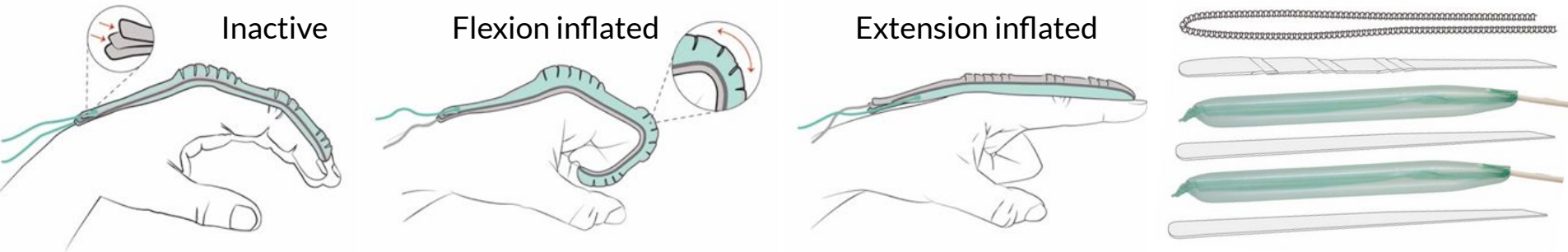
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Pneumatic Actuation of the Hand

Inflatable chambers sandwiched with flexible and inflexible fabrics

- Unobtrusive when “off”
- Helpful, safe, comfortable when “on”
- Mimics the biological structure



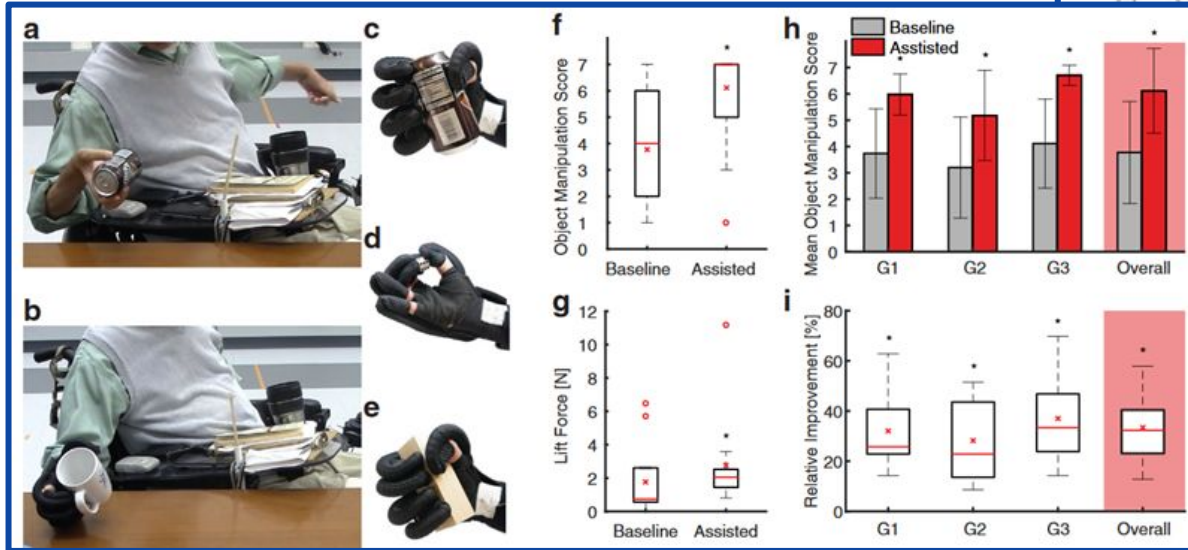
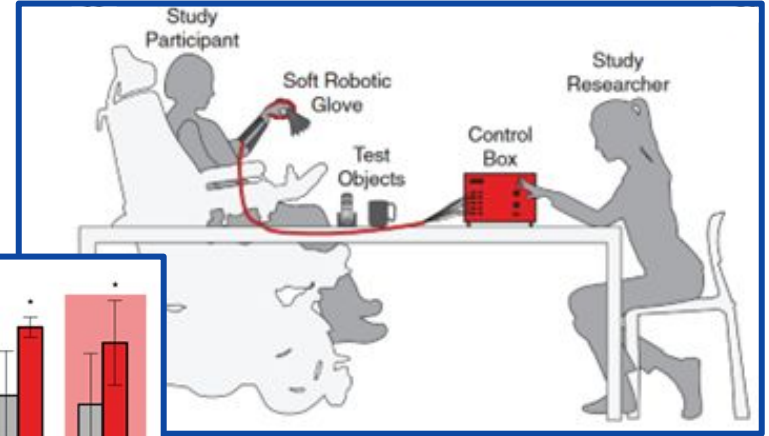
After a **stroke**, people can develop **physical impairments** in their **hand** that make **daily activities difficult**.



Video credit: Wyss Institute, John A Paulson School of Engineering and Applied Sciences

Glove Research Phase 1

Researcher controlled the glove for either grasp or pinch assistance



30% improvement
9 individuals with
C4-7 SCI

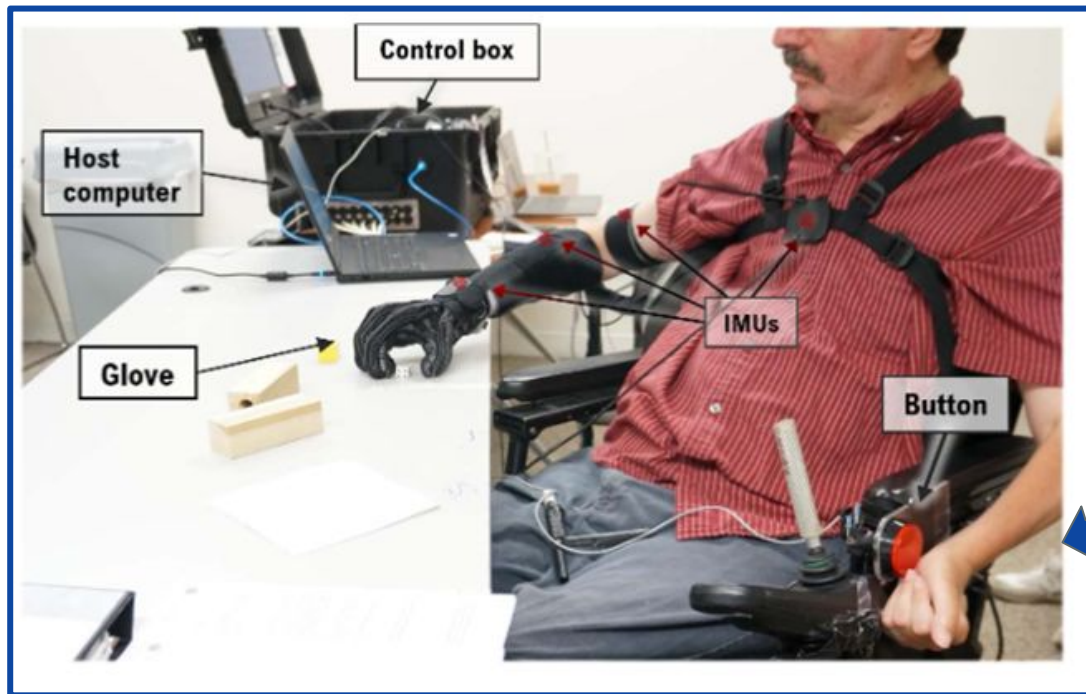
Cappello *et al.* (2018)



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Glove Research Phase 2



Grasp strength \uparrow 2 lbs

Significant increase in ROM

50% \uparrow managing objects

Glove controlled by user



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Glove Research Phase 3



Introduction

- Stroke is a leading global **healthcare burden** (Benjamin, Circ, 2018)
- 80% of survivors have **lasting physical impairments** (Chen & Winstein, Jr Neuro PT, 2009)
- Limitations in access to rehabilitation (O'Brien, Phy Ther, 2013), have created a need for **at-home therapy devices**
- Wearable devices such as **soft robotics** are poised to fill this gap in treatment

Methods

Population: Four participants with chronic stroke

Study design: Pre-and-post intervention

Outcomes:

- Modified Ashworth Scale (MAS)
- Range of Motion (ROM)
- Grip Strength via dynamometer
- Grip Termination via finger flexor EMG

Intervention:

- Baseline, Training Visits 1-6, Post Intervention
- Training included:
 - 1) Cyclic stretching of flexors x 120
 - 2) Active-assisted exercise of flexors/extensors x 12
 - 3) Repetitive task-oriented training x 60



Results

Modified Ashworth Scale

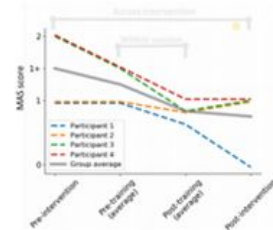


Figure 1: Upper extremity MAS score progression throughout the study

MAS scores decreased by 1 point across the study

Range of Motion

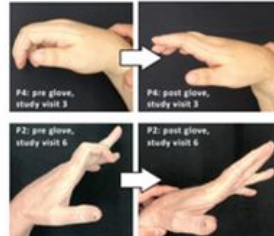


Figure 2: Change in maximum voluntary extension within one training visit

Maximum MCP extension angle increased by 18.5° within session

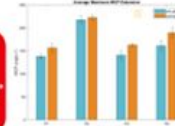


Figure 3: Change in maximum degree of MCP extension pre- and post-glove, averaged through 6 training visits

Grip Termination

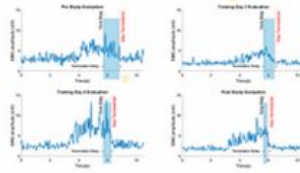


Figure 5: Sample EMG data from Participant 3 showing grip termination (flexor muscle relaxation) after hearing an auditory tone

Decreased time to terminate grip; for further exploration

Grip Strength

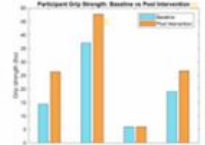


Figure 4: Grip strength change from Baseline to Post Intervention visits

Grip strength increased by 7.4 lbs (33N)



Discussion

- Reduction in **hyperexcitability** of finger muscles both within session and pre-to-post
- Increase in **finger extension ROM** within session
- Increase in **grip strength** in 75% of subjects within session and pre-to-post
- **Grip termination** trends were inconclusive between subjects but worth further exploration

Future Work

- Intuitive control strategies using sensors
- Fully portable system
- Randomized controlled trial

Our vision for individualized home-based therapy with a portable, intuitive wearable system

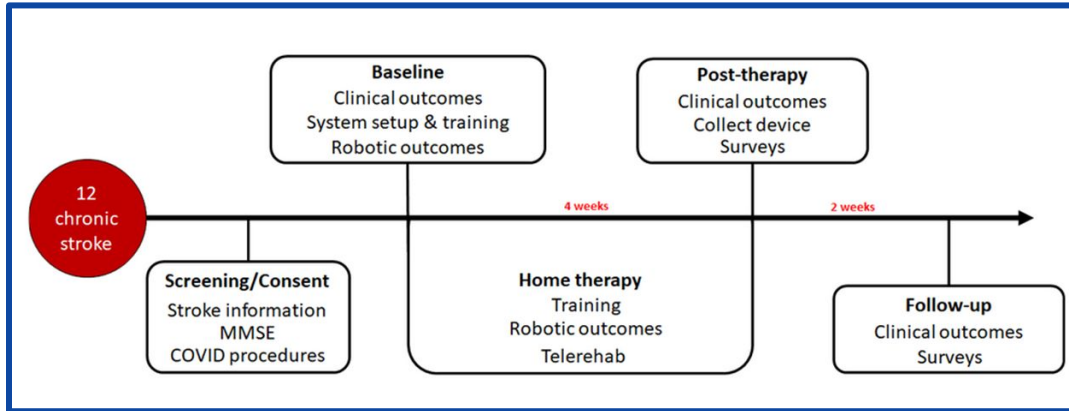


Acknowledgements

Funding was provided by the Wyss Institute for Biologically Inspired Engineering at Harvard University. This study was approved by the Harvard Medical School IRB Protocol BIR-CS-0006. We want to thank Tim Walsh, the Clinical Research team, and our participants for their time and effort.



Glove Research Phase 4



4-week intervention in the home
Telerehab + Home Program
Positive changes in hand/arm function!



Pneumatic Actuation of the Arm

Inflatable chambers
sandwiched with flexible and
inflexible fabrics



Inflatable soft wearable robot for reducing therapist fatigue during upper extremity rehabilitation in severe stroke

O'Neill C.* , Proietti T.* , Nuckols K., Clarke M., Hohimer C., Cloutier A., Lin D., Walsh C.



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* Indicates equal contributions.



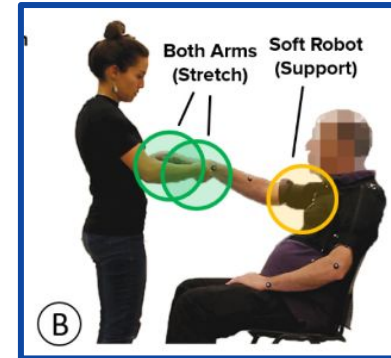
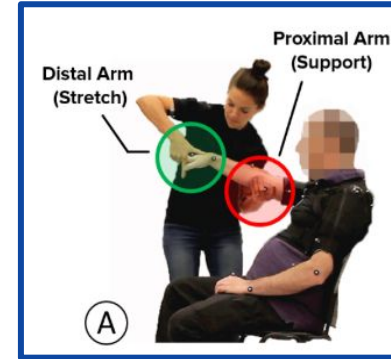
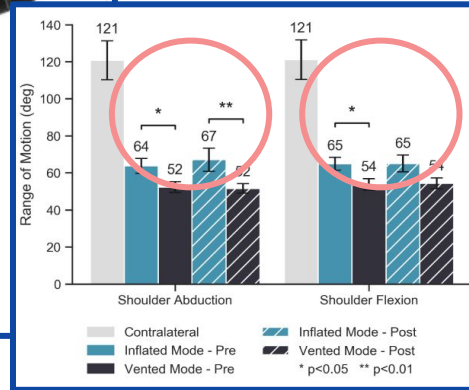
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Stroke Upper Limb Research Phase 1

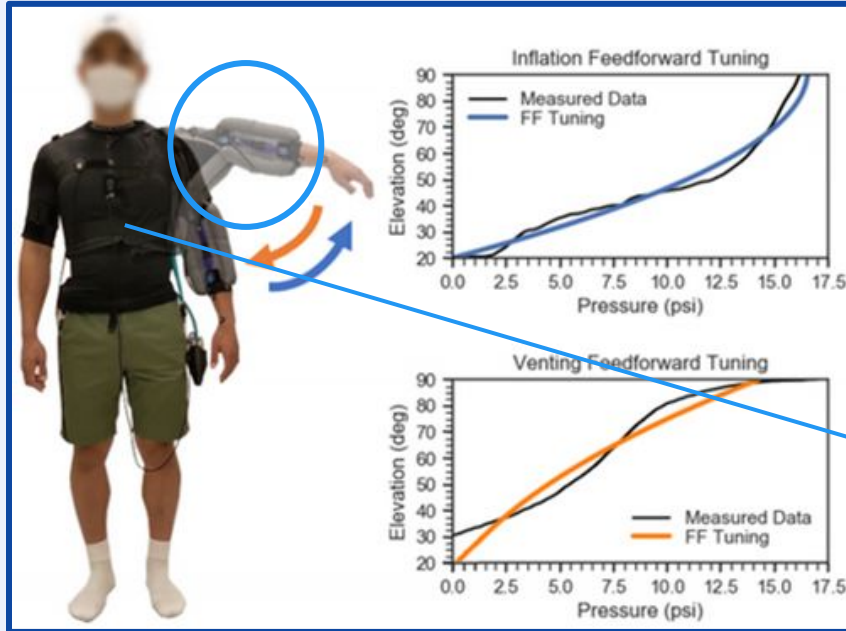


Assisting clients with severe impairments with and without robotic assistance



Stroke Shoulder Assist Research Phase 2

Added to the robotic assistance capabilities with sensing and elbow actuation



Stroke Upper Limb Research Phase 2

Increased arm
Torque 60%!

Reduce trunk
Compensation

Portable!!!

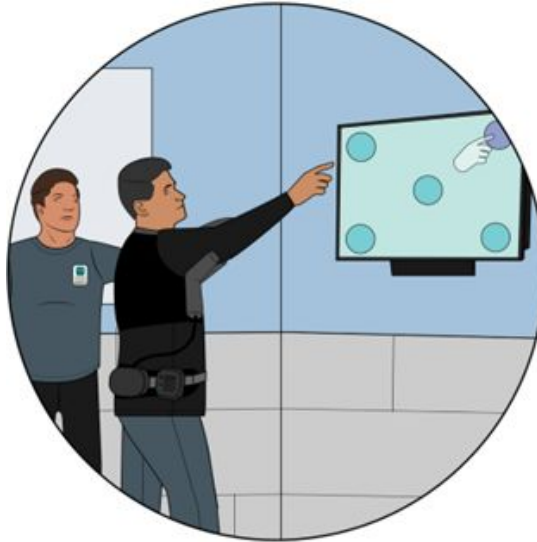






Stroke Shoulder Assist Research Phase 3

Autonomy



National
Science
Foundation



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“Discoveries can’t change the world if they never leave the lab”



55 startups
“Lumineers”

1700+ jobs
created by startups

**2.2B startup
venture funding**

4, 232 patents filed
1,314 issued

2,883 publications

“Discoveries can’t change the world if they never leave the lab”

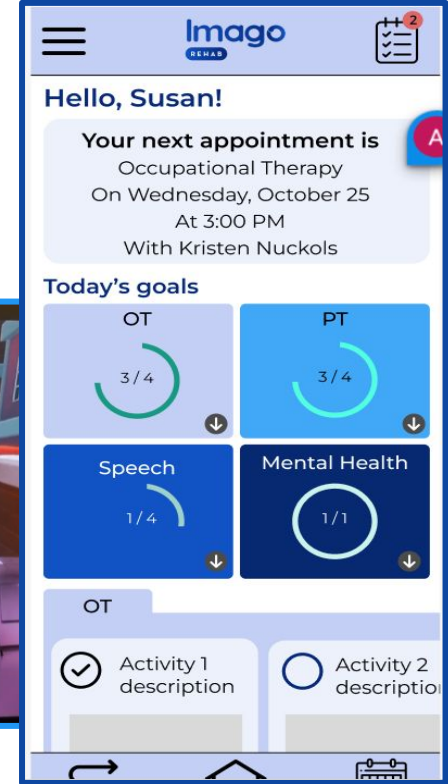
- Launched in 2021 in MA
- Expanded into 5 more states for virtual OT (including VA!)
- Expanded to include Speech and PT
- Covered by Medicare and commercial payers
- Piloting home-based technology use



Pre-FDA Currently studied under
Investigational Device Use IRB

Tech Development, Cont...

- Digital home program
- Virtual support and engagement
- Gamified therapy
 - RXGames beta pilot*
 - Virtual gaming + tele-rehab as effective as in-clinic CIMT therapy



*[https://www.thelancet.com/journals/eclinm/article/PIIS2589-5370\(21\)00520-4/fulltext](https://www.thelancet.com/journals/eclinm/article/PIIS2589-5370(21)00520-4/fulltext)

Remember Susan & Jack?



Before working with
Imago Rehab

Rethinking Rehabilitation

People need MORE rehab.

People need BETTER rehab.

Rehab needs to happen at HOME.

Imago Rehab is committed to making this vision a reality!

www.imagorehab.com

Thank you for your attention!



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Fax: 617-250-8243

References

- Cappello, L., Meyer, J.T., Galloway, K.C. *et al.* Assisting hand function after spinal cord injury with a fabric-based soft robotic glove. *J NeuroEngineering Rehabil* 15, 59 (2018). <https://doi.org/10.1186/s12984-018-0391-x>
- Correia, C., Nuckols, K., Wagner, D., Zhou, Y., Clarke, M., Orzel, D., Solinsky, R., Paganoni, S., & Walsh, C. IEEE Transactions On Neural Systems and Rehabilitation Engineering. 28(6). (2020)
- Daly, J. J., McCabe, J. P., Holcomb, J., Monkiewicz, M., Gansen, J., & Pundik, S. (2019). Long-Dose Intensive Therapy Is Necessary for Strong, Clinically Significant, Upper Limb Functional Gains and Retained Gains in Severe/Moderate Chronic Stroke. *Neurorehabilitation and neural repair*, 33(7), 523–537. <https://doi.org/10.1177/1545968319846120>
- Harvard University. "Bioinspired Robotics: Smarter, Softer, Safer." <https://www.youtube.com/watch?v=RuLAn3XpYAU&t=9s> (2015)
- Jeffers, M. S., Karthikeyan, S., Gomez-Smith, M., Gasinzigwa, S., Achenbach, J., Feiten, A., & Corbett, D. (2018). Does Stroke Rehabilitation Really Matter? Part B: An Algorithm for Prescribing an Effective Intensity of Rehabilitation. *Neurorehabilitation and neural repair*, 32(1), 73–83. <https://doi.org/10.1177/1545968317753074>
- Lang, C. E., MacDonald, J. R., & Gnip, C. (2007). Counting repetitions: an observational study of outpatient therapy for people with hemiparesis post-stroke. *Journal of neurologic physical therapy : JNPT*, 31(1), 3–10. <https://doi.org/10.1097/01.npt.0000260568.31746.34>
- O'Neill, C., Proietti, T., Nuckols, K., Clarke, M., Hohimer, C., Cloutier, A., Lin, D., and Walsh, C. Inflatable soft wearable robot for reducing therapist fatigue during upper extremity rehabilitation in severe stroke. *IEEE Robotics and Automation Letters*, 5(3), pp. 3899-3906. (2020).
- Proietti, T., O'Neill, C., Gerez, L., Cole, T., Mendelowitz, S., Nuckols, K., Hohimer, C., Lin, D., Paganoli, S., & Walsh, C., Restoring arm function with a soft robotic wearable for individuals with amyotrophic lateral sclerosis. *Science Translational Medicine*. 15; 681. (2023). DOI: [10.1126/scitranslmed.add1504](https://doi.org/10.1126/scitranslmed.add1504)
- Proietti, T., O'Neill, C., Hohimer, C., Nuckols, K., Clarke, M., Zhou, Y., Lin, D., & Walsh, C. Sensing and Control of a Multi-Joint Soft Wearable Robot for Upper-Limb Assistance and Rehabilitation. *IEEE Robotics and Automation Letters*, vol. 6, no. 2, pp. 2381-2388, (2021)
- Proietti, T., Nuckols, K., Grupper, J., Schwertz de Lucena, D., Inirio, B., Porazinski, K., Wagner, D., Cole, T., Glover, C., Mendelowitz, S., Herman, M., Breen, J., Lin, D., & Walsh, C. Combining soft robotics and telerehabilitation for improving motor function after stroke. *Wearable Technologies*. 5, e1. doi:10.1017/wtc.2023.26