Breakout Session 2: Track A

Development of Deep Learning-Based Kinematic Data Acquisition

Dr. Shivakeshvan Ratnadurai Giridharan Instructor, Burke Neurological Institute

The Development of Deep Learningbased Kinematic Data Acquisition

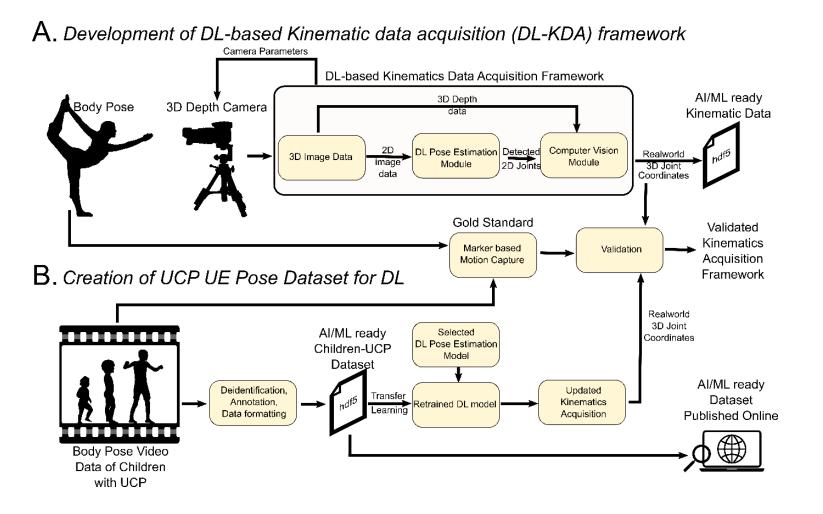
Speaker: Shivakeshavan Ratnadurai-Giridharan, Instructor PI: Kathleen M. Friel, Associate Professor

Burke Neurological Institute / Brain and Mind Research Institute- Weill Cornell Medicine

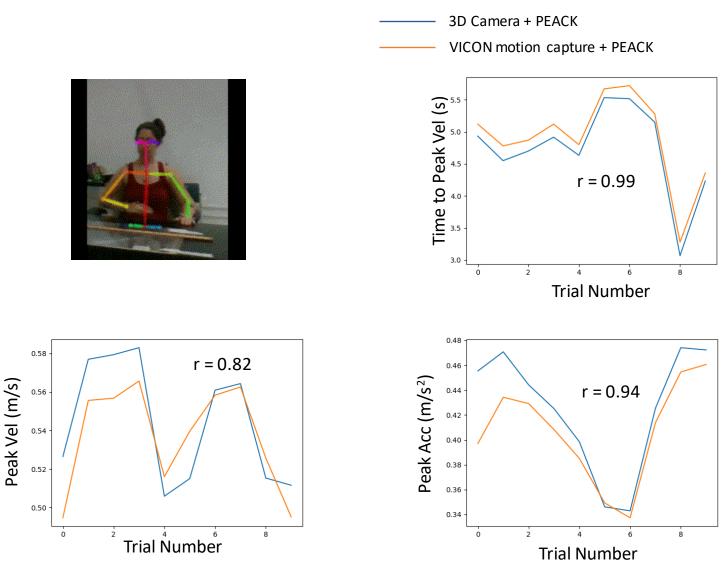
Project Summary

- Determine how to optimally target transcranial direct current stimulation (tDCS) to enhance upper extremity (UE) efficacy training in children with unilateral cerebral palsy (UCP).
- Most existing hand function assessments miss finer details on movement that is reflected in kinematics.
- Critical information from changes in movement kinematics is ignored
- Can help optimize interventions
- Until recently, kinematic data extraction has been expensive and/or unreliable.

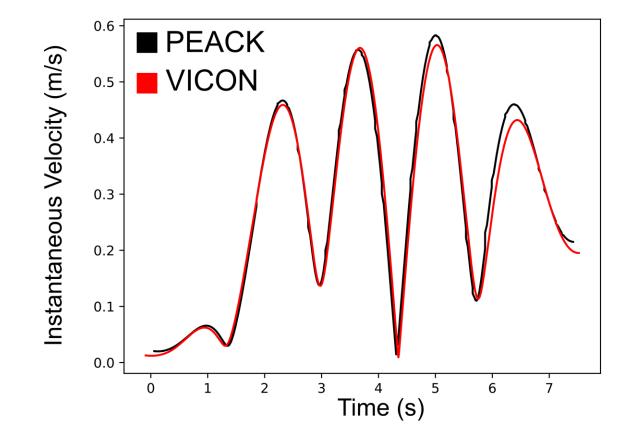
Supplement Project Goals



Validation : Wrist movement during reaching tasks



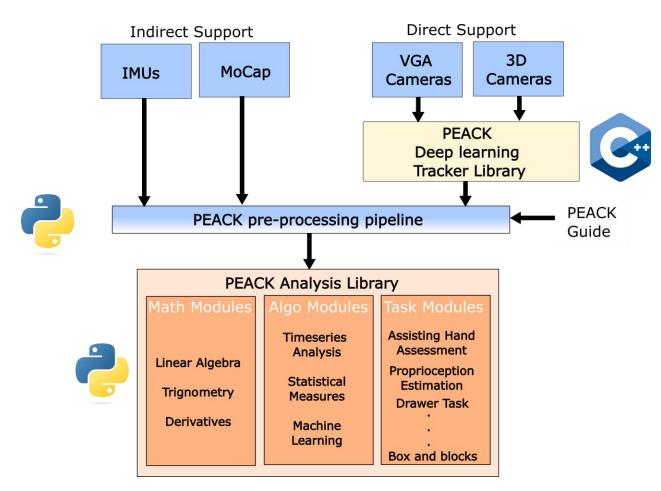
Validation : Wrist movement during reaching tasks



Dataset construction

- Retrospectively obtained and analyzed a total of 135,000 images of 50 children with cerebral palsy performing upper limb movement from a previous cohort (2015-2018).
- Obtained and analyzed a total of 50,000 images of 21 children with cerebral palsy during static poses with upper limbs.
- Obtained and analyzed a total of 72,000 images of 10 children with cerebral palsy during unimanual reaching-grasping task.

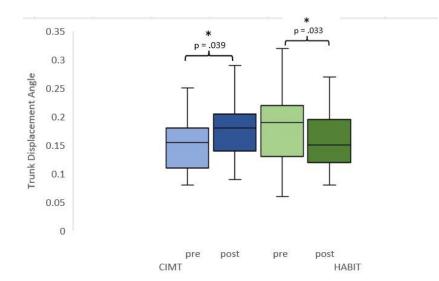
Current PEACK framework



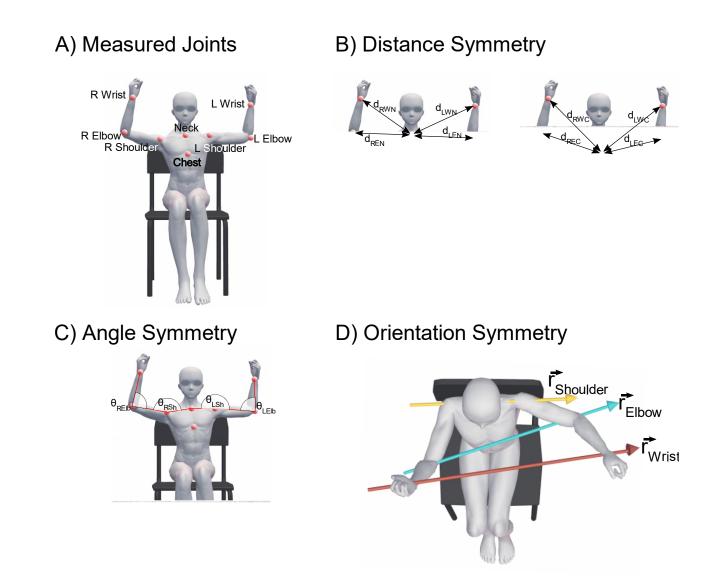
https://github.com/shivak7/PEACK

Using PEACK to study Trunk movement during Assisting Hand Assessment

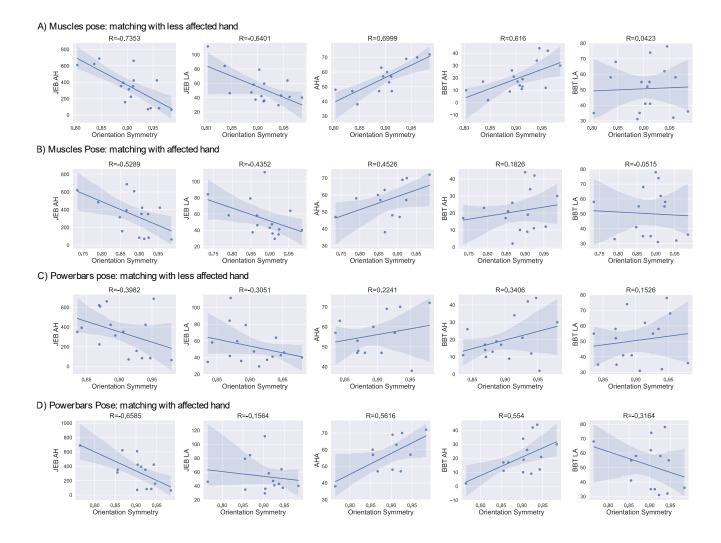




Using PEACK for studying proprioceptive position sense



Using PEACK for studying proprioceptive position sense



Challenges

- 1. General noise in marker-less kinematic data
- Careful filtering of data to adjust for body tracking artifacts introduced by the Deep Learning tracker.
- High pass filtering (5th order, 5Hz cut off) followed by median filtering with a window between 0.1 to 1 times the sample period.
- Filter parameters should be adjusted depending on the task.
- 2. Noise from additional individuals appearing in background
- Unique identification of each individual is still a challenging problem in DL trackers.
- Implemented a semi-supervised heuristic method of tracking a single person.
- 3. Nature of typical tasks has view of lower limbs missing in recordings and kinematics
- Make initial dataset focus specifically on upper limbs.
- Add views of entire individual during assessments.

Challenges

- 4. Increase dataset size of annotated images of children with cerebral palsy.
- Use semi-supervised labeling methods.
- Include image data from other studies (collaborators) of children with cerebral palsy.

- 5. Validating hand movement kinematics in upper limbs using marker based mocap.
- Participants are conscious of markers and adhesive contact with the skin.
- Hand movements are more unnatural.
- Use smaller markers and/or adhesives which can stretch with skin.

Future Work

- Collect full body movement videos from children with cerebral palsy.
- Retrain DL body tracker libraries with updated dataset.
- Implement multi-camera support within the PEACK framework.
- Add DL depth estimation support to try extracting 3D kinematics from 2D videos.
- Add DL Frame interpolation support to improve video quality and decrease error in extracted kinematics.
- Expand PEACK support to other available modes of body tracking.

Thank you!