

Mok, K.-M., Fong, D. T.-P., Krosshaug, T., Hung, A. S. L., Yung, P. S.-H., Chan, K.-M. (2011). An ankle joint model-based image-matching motion analysis technique. *Gait & Posture*, 34, 71-75.

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1 **ABSTRACT**

2 This study presented a model-based image-matching (MBIM) motion analysis
3 technique for ankle joint kinematic measurement. Five cadaveric below-hip
4 specimens were manipulated through a full range of ankle joint motions in bare-foot
5 and shoed conditions. The ankle motions were analyzed by bone-pin marker-based
6 motion analysis and MBIM motion analysis techniques respectively. The root mean
7 square errors of all angles of motion were less than 3 degrees. The average Intraclass
8 Correlation Coefficients (ICCs) for the intra-rater reliability were greater than 0.928
9 and the average ICCs for the inter-rater reliability were greater than 0.948 for all
10 ranges of motion. Excellent validity, intra-rater reliability and inter-rater reliability
11 were achieved for the MBIM technique in both bare-foot and shoed conditions. The
12 MBIM technique can therefore provide good estimates of ankle joint kinematics.

13

14 **INTRODUCTION**

15 Ankle ligamentous sprain is one of the most common injuries encountered in sports
16 (Fong et al., 2007; Fong et al., 2009a). A precise description of the injury situation is a
17 key component to understanding the aetiology and injury mechanism (Bahr and
18 Krosshaug, 2005). The injury mechanisms of ankle ligamentous sprain have been
19 described as a combined inversion and internal rotation of the ankle joint (Safran et al.,
20 1991), or plantarflexion with the subtalar joint adducting and inverting (Vitale &
21 Fallat, 1988). Fong et al. (2009b) reported the ankle joint kinematics from a single
22 accidental ankle supination sprain case under skin-marker motion analysis, the finding
23 is that dorsiflexion instead of plantarflexion was found at injury. A study analyzed the
24 ankle supination sprain injuries using video analysis, Andersen et al. (2004) reported
25 two major injury mechanisms as: (1) impact by opponent on the medial aspect of the

26 leg just before or at foot strike, which resulted in a laterally directed force causing the
27 player to land with the ankle in a an excessive inverted position; and (2) forced
28 plantarflexion when the injured player hit the opponent's foot when attempting to
29 shoot or clear the ball. However, those conclusions only revealed the injury
30 mechanism qualitatively. Although determination of the direct cause of the injury,
31 namely the joint loading, may be difficult based on video analysis (Krosshaug and
32 Bahr, 2005), a recent study on the mechanisms of ACL injuries (Koga et al. 2010)
33 have clearly demonstrated that quantification of the observed kinematics can provide
34 important insight into the mechanism of injury.

35 A direct approach to study such injuries is to analyze video sequences of real ankle
36 sprain injury incidents captured during televised sport events. However, it is not
37 possible to use standard biomechanical method to analyse these video sequences
38 (Krosshaug and Bahr, 2005). Krosshaug and Bahr (2005) introduced a Model-Based
39 Image-Matching (MBIM) technique for reconstructing three-dimensional human
40 motion from uncalibrated video sequences, and successfully employed this technique
41 to analyze anterior cruciate ligament injuries (Krosshaug et al., 2007, Koga et al.,
42 2010).

43 The developed MBIM technique has been validated, but only validated for the hip and
44 knee joints. In order to utilize the MBIM technique to analyze ankle joint motions, it
45 is necessary to first evaluate its validity and reproducibility. Therefore, the purpose of
46 this study was to validate the MBIM technique for estimating ankle joint kinematics
47 in a cadaveric lower limb specimen using bone-pin marker-based motion analysis as
48 the gold standard.

49

50 **MATERIALS AND METHODS**

51 **Experimental setup**

52 Five cadaveric below-hip specimens (shank length = 32.4 ± 1.9 cm, shank
53 circumference = 24.6 ± 1.4 cm, foot length = 22.5 ± 0.7 cm, foot width = 8.2 ± 0.6 cm)
54 were prepared for testing. The shank length was defined as the distance between the
55 lateral femoral epicondyle and lateral malleolus. Shank circumference was defined
56 as the maximum circumference along the shank. Foot length was defined as the
57 anterior-posterior length measurement from the lateral calcaneus to the tip of the long
58 toe; foot width was defined as the maximal medial-lateral distance measured
59 perpendicular to the long axis of the foot. These anthropometrical measurements were
60 used to customize the skeleton model used in the Model-Based Image-Matching
61 technique. The Achilles tendon and surrounding soft tissues around the ankle joint
62 were dissected to increase joint range of motion, given that basic structure was intact.

63 **Bone-pin marker based video motion analysis**

64 Hofmann II external fixation 5.0mm bone-pins (Stryker, USA) with triads of
65 reflective markers were drilled into the posterolateral side of the calcaneus and into
66 the tibia through the lateral tibial condyle (Reinschmidt et al., 1997a). Figure 1
67 showed the bone-pin markers on cadavers with two testing conditions, bare-foot and
68 shod. A hole on the lateral posterior side of the shoe was prepared for the penetration
69 of bone-pins, given that there is no interference between the bone-pins and shoes.
70 Four video cameras (Casio EX-F1, Tokyo, Japan) were used to record the ankle
71 motion at 30Hz with 640x480 resolutions from different views. A static calibration
72 trial in the anatomical position served as the offset position to determine the segment
73 embedded axes of the shank and foot segment. The foot coordinate system was
74 aligned with the Laboratory Coordinate System (LCS) (Reinschmidt et al., 1997b).
75 Reflective skin markers were attached to the lateral femoral epicondyle, medial

76 femoral epicondyle, lateral malleolus and medial malleolus to define knee and ankle
77 joint centers (Wu et al., 2002). These markers were removed after the static
78 calibration. The line connecting the knee joint centre and the ankle joint centre was
79 defined as the longitudinal axis of the shank segment (X1). The anterior-posterior axis
80 of the shank segment (X2) was the cross product between X1 and the line joining the
81 lateral femoral epicondyle and medial femoral epicondyle. The medial-lateral axis of
82 the shank segment was the cross product of X1 and X2. Full-range
83 plantarflexion/dorsiflexion, inversion/eversion and relative circular motion between
84 the two shank and foot segments were performed manually on the ankle joint. The
85 video recordings from the four video cameras were analyzed by a video motion
86 analysis system (Ariel Performance Analysis System, USA) which was used to
87 calculate the reflective marker's three-dimensional coordinates. A singular value
88 decomposition method was employed to calculate the transformation from triad
89 reference frame to anatomical shank and foot reference frame (Sodervist and Wedin,
90 1993). Joint kinematics were resolved by the Joint Coordinate System (JCS) method
91 (Grood and Suntay, 1983).

92 **Model-Based Image-Matching motion analysis**

93 The videos were analyzed using the MBIM technique (Figure 3). The matchings were
94 performed using the commercially available program Poser[®] 4 and the Poser[®] Pro
95 Pack (Curious Labs Inc., Santa Cruz, California, USA). First, models of the
96 surroundings were manually matched to the background for each frame in every
97 camera view, using a key frame and spline interpolation technique, by adjusting the
98 camera calibration parameters (position, orientation and focal length). The
99 surroundings were modeled using points, straight lines, for instance, the boundaries of
100 the mechanical jig. We utilized a skeleton model from Zygote Media Group Inc.

101 (Provo, Utah, USA) for the athlete matching of the leg. The model for lower extremity
102 consisted of 9 rigid segments with a hierarchical structure, using the pelvis as the
103 parent segment. In our study, 5 rigid segments were enough for one side. The pelvis
104 motion was described by three rotational and three translational degrees of freedom.
105 The motion of the remaining segments was then described with three rotational
106 degrees of freedom relative to their parent, e.g., the foot relative to the shank. The
107 matching procedure has been described in detail by Krosshaug and Bahr (2005). Two
108 researchers, A and B, performed the manual skeleton matching process five times on
109 each specimen. Both researchers possessed good human biomechanics knowledge and
110 were trained to implement the MBIM technique by following the same protocol
111 (Figure 2). Because the default ankle joint center of the Zygote skeleton model was
112 not located at the mid-point between the malleoli, the ankle joint centre was adjusted
113 in the Joint Editor Section of the Poser software. The centre of ankle joint were preset
114 as right side [-0.045 0.030 -0.008] and left ankle side [0.045 0.030 -0.008] according
115 to the joint centre definition in ISB recommendation (Wu et al., 2002). After the initial
116 matching was completed, the motions of the skeleton model were reassessed and
117 adjusted frame by frame to ensure a smoothed motion.

118 **Statistical analysis**

119 The differences between bone-pin marker-based motion analysis and MBIM
120 technique were quantified using Root Mean Square (RMS) error. Bivariate Pearson
121 correlations were calculated to compare the similarity of the trends between the two
122 techniques. Intra-rater reliability and inter-rater reliability within the MBIM technique
123 were assessed using Intraclass Correlation Coefficients (ICCs). Since the MBIM
124 technique provide continuous joint angle time histories, ICCs with two-way mixed
125 model average measures were calculated to evaluate reliability (Hopkins, 2000).

126 Fleiss (1986) suggested that an ICC coefficient of >0.75 was considered as evidence
127 of good agreement. However, in the present study, we defined that an ICC coefficient
128 of >0.90 was required to achieve excellent reliability.

129

130 **RESULTS**

131 **Validity**

132 In both testing conditions, the RMS errors were less than three degrees for all angles
133 of motion (plantar/dorsiflexion, inversion/eversion, internal/external rotation). The
134 measurement difference, standard deviation of difference, 95% limits of agreement
135 and related statistical results were reported in table 1. The Pearson's correlations were
136 higher than 0.946 for all angles of motion and conditions. In general, the MBIM
137 technique achieved excellent accuracy and correlation with the results from the
138 bone-pin marker-based motion analysis.

139 **Intra-rater reliability**

140 Results of ICC coefficients on three angles of motion were shown in table 2. In both
141 bare-foot and shoed conditions, the ICC coefficients for intra-rater reliability
142 demonstrated excellent correlation (ICC coefficient >0.955) for all angles of motion.
143 Intra-rater reliability was considered to have been achieved as all ICC coefficients
144 were greater than 0.950, and the analysis was reproducible from a single researcher.

145 **Inter-rater reliability**

146 Results of ICC coefficients on three angle of motion were shown in table 3. In both
147 testing conditions, the ICC coefficients for inter-rater reliability demonstrated
148 excellent correlation (ICC coefficient >0.952) for angles of motion between two
149 investigators. Inter-rater reliability was considered to have been achieved as all ICC
150 coefficients were greater than 0.90, and the analysis was reproducible for different

151 researchers.

152

153 **DISCUSSION**

154 Skin-marker based motion analysis is the most common present approach to
155 investigate joint kinematics. Previous studies comparing skin markers compared to
156 bone-pin markers gave RMS error of 4.7° for plantarflexion/dorsiflexion angle, 4.6°
157 for inversion/eversion angle and 3.6° for internal/external rotation angle under slow
158 speed running (Reinschmidt et al., 1997a). For MBIM motion analysis technique, the
159 RMS errors of the three angles of motion were less than 3° for the entire testing
160 motion (Table 2), the expected improvement in accuracy using bone pins was evident,
161 although a direct comparison was not possible since neither in the running or ankle
162 manipulation studies were both recorded concurrently. In our study, bare-foot and
163 shoed conditions were also tested. Basketball shoes was chosen because basketball
164 shoes had high tops which covered the whole ankle joint, and this made the most
165 difficult situation for the skeleton matching process. By visual inspection, there was
166 shear movement between the foot and shoe, the underlying movement of foot segment
167 was hidden. Nevertheless, the accuracy of MBIM technique in shoed conditions is
168 still very good. Regarding the reliability of the MBIM technique, the average ICC
169 coefficients for the intra-rater reliability were greater than 0.928 for all ranges of
170 motion and the average ICC coefficients for the inter-rater reliability were greater than
171 0.948. These results implied that different trained researchers can produce the same
172 results with excellent reliability.

173

174 A detailed protocol for the matching is suggested in this study, which we believe is
175 crucial for the excellent results. During the skeleton matching process, researchers

176 should be carefully in identifying the longitudinal axis orientations of the shank and
177 the foot segments. Inversion/eversion, it was highly dependant on the orientation of
178 the foot segment. The foot segment could be regarded as a rectangular board. The
179 orientation of the plantar foot would be key information to match the foot skeleton on
180 the video images. Using the top view camera and front view camera in Poser, the
181 detailed orientation of the foot segment could be seen and further fine tuning was
182 possible. In the previous validation study of Krosshaug and Bahr (2005) a relatively
183 large discrepancy in internal/external rotation of the knee joint was obtained between
184 the Poser method and the reflective marker based method. This was identified to
185 originate from the thigh segment, likely due to soft tissue artifacts of the thigh relative
186 to the underlying bone (Krosshaug & Bahr, 2005). Similarly, the shank was
187 comparably difficult to be perfectly matched. In the matching of the tibia model on
188 the images, the patellar position and the anterior edge of the shank were the decisive
189 landmarks to define the internal rotation orientation of the shank. Those two
190 anatomical landmarks were chosen because the underlying soft tissue was relatively
191 thin, and they could precisely reflect the rotation orientation of the tibia. Lastly,
192 researchers were suggested to reassess the motion of the skeleton model for the whole
193 video and adjusted frame by frame to ensure a smooth matched motion.

194 The MBIM motion analysis technique is a novel approach to reconstruct the
195 three-dimensional kinematics from uncalibrated video sequences, however the authors
196 would like to point out several directions for the MBIM technique to be further
197 developed. Firstly, more than four commercial softwares were employed in the whole
198 analysis. It would be more user-friendly and time-effective if an all-in-one software
199 was developed. Secondly, the skeleton matching process was extremely
200 time-consuming to the researcher. The process could be more time-saving if camera

201 position estimation and edge detection technique were implemented (Oe et al., 2005).
202 The camera position estimation technique could help matching the virtual
203 environment in a more precise and faster manner, and the edge detection technique
204 could objectively outline the segment boundary for skeleton matching. However, this
205 kind of development was currently not possible on the MBIM motion analysis
206 technique because of the dependence on commercial softwares. The kinematics can be
207 further analyzed by to figure out the internal stress and liagmentous tension (Chao et
208 al., 2007). MBIM motion analysis technique may potentially be developed into a
209 sophisticated video analysis for research or clinical uses, such as the mechanisms of
210 injuries captured on tape.

211

212 **CONCLUSION**

213 Excellent validity, intra-rater reliability and inter-rater reliability were achieved for the
214 MBIM technique in both bare-foot and shoed conditions. The MBIM motion analysis
215 technique can therefore provide excellent estimates of ankle joint kinematics.

216

217 **ACKNOWLEDGEMENT**

218 This research project was made possible by resources donated by The Hong Kong
219 Jockey Club Charities Trust.

220

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285

286 **FIGURE LEGENDS**

287 Figure 1. Bone-pin makers on cadavers with two testing conditions, bare-foot and
288 shoed

289 Figure 2. An example of finished skeleton matching using MBIM motion analysis
290 technique, skeleton model on video images

291 Figure 3. Protocol of the ankle joint model-based image-matching motion analysis
292 technique

293