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BALANCE, LOCOMOTION, ORIENTATION, AND NAVIGATION 6 6 falling responses have disappeared by this age. The extent of visually-driven sway decreases rather sharply between 4 and 6 years (Godoi and Barela 2008), indicating a transition away from visual dominance of balance responses which continues through childhood.

BALANCE, LOCOMOTION, ORIENTATION, AND NAVIGATION 1

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editor locomotion and posture in older adults the role of aging and movement disorders editors barbieri fabio augusto vitorio rodrigo eds free preview the first book to address the role of aging and movement disorders on motor control especially on walking and posture multidisciplinary approach about the effects of aging and movement request pdf locomotion and posture in older adults the role of

This book is an attempt to advance the discussion and improve our understanding about the effects of aging and movement disorders on motor control during walking and postural tasks. Despite these activities are performed daily, there is a high requirement of motor and neural systems in order to perform both tasks efficiently. Both walking and posture require a complex interaction of musculoskeletal and neural systems. However, the mechanisms used to control these tasks, as well as how they are planned and coordinated, are still a question of discussion among health professionals and researchers. In addition, this discussion is

more interesting when the effects of aging are included in the context of locomotion and the postural control. The number of older individuals is 841 million in 2015, which is four times higher than the 202 million that lived in 1950. Aging causes many motor, sensorial and neural deficits, which impair locomotion and postural control in the elderly. The severity of this framework is worsened when the aging goes along with a movement disorder, such as Parkinson disease, Chorea, Dystonia, Huntington disease, etc. Therefore, the aim of this book is to highlight the influence of different aspects on planning, controlling and performing locomotion and posture tasks. In attempting to improve current knowledge in this field, invited authors present and discuss how environmental, sensorial, motor, cognitive and individual aspects influence

the planning and performance of locomotor and postural activities. The major thrust of the book is to address the mechanisms involved in controlling and planning motor action in neurological healthy individuals, as well as in those who suffer from movement disorders or face the effects of aging, indicating the aspects that impair locomotion and postural control. In addition, new technologies, tools and interventions designed to manage the effects of aging and movement disorders are presented in the book.

This volume is a collection of reports dealing with geriatrics and gerontology. The first section provides an introduction to

the common medical and non-medical problems of aging. The second section concentrates on one of the most devastating problems of the elderly, that of dementia. Finally, the third section deals with newer topics such as hearing loss, acute and chronic lymphoproliferative disorders, and the use of nerve and muscle stimulation to reduce morbidity and mortality associated with degenerative neurologic diseases. The chapters contained herein represent the transformation of managing older patient problems that commonly impact quality of life after the age of 60 years.

Emerging and currently available technologies offer great promise for helping older adults, even those without serious disabilities, to live healthy, comfortable, and productive lives.

What technologies offer the most potential benefit? What challenges must be overcome, what problems must be solved, for this promise to be fulfilled? How can federal agencies like the National Institute on Aging best use their resources to support the translation from laboratory findings to useful, marketable products and services? Technology for Adaptive Aging is the product of a workshop that brought together distinguished experts in aging research and in technology to discuss applications of technology to communication, education and learning, employment, health, living environments, and transportation for older adults. It includes all of the workshop papers and the report of the committee that organized the workshop. The committee report synthesizes and evaluates the points made in the

workshop papers and recommends priorities for federal support of translational research in technology for older adults.

Recently, studies on aging processes and age-related changes in behavior have been expanding considerably, probably due to the dramatic changes observed in the demographics. This increase in the overall age and proportion of elderly people has heightened the severity of problems associated with the safety and well-being of elderly persons in everyday life. Many researchers working on motor control have thus focused more intensely on the effects of age on motor control. This new avenue of research has led to programs for alleviating or delaying the specific sensory-

motor limitations encountered by the elderly (e.g. falls) in an attempt to make the elderly more autonomous. The aggregation of studies from different perspectives is often fascinating, especially when the same field can serve as a common ground between researchers. Nearly all contributors to this book work on sensory-motor aging; they represent a large range of affiliations and backgrounds including psychology, neurobiology, cognitive sciences, kinesiology, neuropsychology, neuropharmacology, motor performance, physical therapy, exercise science, and human development. Addressing age-related behavioral changes can also furnish some crucial reflections in the debate about motor coordination: aging is the product of both maturational and environmental processes, and studies on aging must

determine how the intricate interrelationships between these processes evolve. The study of aging makes it possible to determine how compensatory mechanisms, operating on different subsystems and each aging at its own rate, compensate for biological degenerations and changing external demands. This volume will contribute to demonstrating that the study of the aging process raises important theoretical questions.

Since the first edition of this very successful book was written to synthesise and review the enormous body of work covering falls in older people, there has been an even greater wealth of informative and promising studies designed to increase our understanding of risk factors and prevention strategies. This

second edition, first published in 2007, is written in three parts: epidemiology, strategies for prevention, and future research directions. New material includes recent studies covering: balance studies using tripping, slipping and stepping paradigms; sensitivity and depth perception visual risk factors; neurophysiological research on automatic or reflex balance activities; and the roles of syncope, vitamin D, cataract surgery, health and safety education, and exercise programs. This edition will be an invaluable update for clinicians, physiotherapists, occupational therapists, nurses, researchers, and all those working in community, hospital and residential or rehabilitation aged care settings.

Providing a solid foundation in the normal development of functional movement, Functional Movement Development Across the Life Span, 3rd Edition helps you recognize and understand movement disorders and effectively manage patients with abnormal motor function. It begins with coverage of basic theory, motor development and motor control, and evaluation of function, then discusses the body systems contributing to functional movement, and defines functional movement outcomes in terms of age, vital functions, posture and balance, locomotion, prehension, and health and illness. This edition includes more clinical examples and applications, and updates data relating to typical performance on standardized tests of balance. Written by physical therapy

experts Donna J. Cech and Suzanne "Tink" Martin, this book provides evidence-based information and tools you need to understand functional movement and manage patients' functional skills throughout the life span. Over 200 illustrations, tables, and special features clarify developmental concepts, address clinical implications, and summarize key points relating to clinical practice. A focus on evidence-based information covers development changes across the life span and how they impact function. A logical, easy-to-read format includes 15 chapters organized into three units covering basics, body systems, and age-related functional outcomes respectively. Expanded integration of ICF (International Classification of Function) aligns learning and critical thinking with current health care models. Additional clinical examples

help you apply developmental information to clinical practice. Expanded content on assessment of function now includes discussion of participation level standardized assessments and assessments of quality-of-life scales. More concise information on the normal anatomy and physiology of each body system allows a sharper focus on development changes across the lifespan and how they impact function.

This book gathers the proceedings of the IV International Conference on Biomedical and Health Informatics (ICBHI 2019), held on 17-20 April, 2019, in Taipei, Taiwan. Contributions span a range of topics, including medical imaging, biosignal processing, biodata management and analytics, public and personalized health systems, mobile

health applications and many more. The IV conference edition gave a special emphasis to cybersecurity issues and cutting-edge medical devices, as it is reflected in this book, which provides academics and professionals with extensive knowledge on and a timely snapshot of cutting-edge research and developments in the field of biomedical and health informatics.

"The high prevalence of stroke among the elder population is of particular concern and poses serious challenges to daily functions such as locomotion. In light of these challenges, the use of haptic stimuli has been developed as a strategy to help stabilize gait and posture. These stimuli come in difference forms - from earth-fixed surfaces to elaborate wearable

devices promoting stability. Many methods involve some form of contact or weight bearing to bring on a somatosensory stimulus, while much fewer investigate external forces brought on to the body. The present study offered a novel approach by applying haptic tensile forces on the hand, in the direction of locomotion, to study changes in gait outcomes. Changes in these gait parameters would support the hypothesis that haptic tensile forces bring on locomotor adaptation and post-adaptation effects in chronic stroke and healthy non-stroke individuals. These adaptation and post-adaptation effects could eventually develop into an effective rehabilitation strategy for clinicians. To investigate this prospect, a proof-of-concept study was first designed involving 13 healthy young adults who walked on a self-paced

treadmill in a virtual environment with a robotic-powered leash in hand to investigate haptic tensile effects of the leash on steady-state walking outcomes, during and after a 10 or 20N force application, relative to baseline walking. The main findings were significant increases in gait velocity with accompanying stride length and double limb support time changes. These findings suggested that the application of force was enough to bring on transient changes in spatiotemporal gait parameters of healthy individuals during and after force exposure. In light of the evidence found in the first study, the question remained if an older chronic stroke population also had the ability to change gait parameters in a similar way and if these changes promote dynamic stability from a kinematic perspective. To address this question, 14

older chronic stroke and healthy age-matched control subjects were recruited. Similar to the pilot study, both chronic stroke and control groups increased gait velocity by over 0.1 m/s when 10 or 15N forces were introduced for one minute. Changes in gait velocity remained above baseline for an additional minute after force removal. Also, stride lengths increased as stride times decreased for both groups. In terms of dynamic stability, double limb support time was significantly decreased for both groups during and after force exposure, while step width did not seem to be significantly altered by tensile forces. In terms of postural control, most subjects also tended to shift their center of mass towards the paretic side for stroke subjects and non-dominant side for controls. In order to develop a rehabilitation strategy that may prove

beneficial to the stroke population, it would be necessary to compare how the leash strategy changes gait spatiotemporal, postural and coordination parameters compared to a very common walking aid such as the cane. Hence, for the third study, both stroke and control groups completed walking trials with the leash and with an instrumented cane. The stroke group was stratified into lower functioning stroke and higher functioning stroke. As in the previous two studies, gait velocity was then maintained above baseline after force removal to an extent comparable to walking with a cane, suggesting a post-adaptation effect. The lower limb coordination of the paretic leg (stroke) revealed increases of both hip and foot flexion and greater angular velocity of the limb during leash walking relative to baseline levels. In light of all findings, future work is

warranted to maximize the efficacy of the haptic leash strategy for possible use in the clinical setting." --