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Effect of multi-grip myoelectric prosthetic hands on daily activities, pain-related disability and prosthesis use compared with single-grip myoelectric prosthesis: a single case study

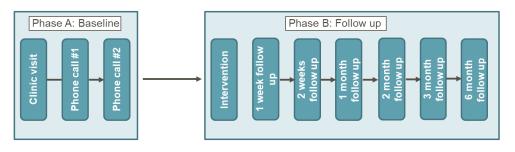
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Products	Bebionic hand				
Major Findings	With bebionic compared to single-grip prosthetic hands:				
	→ Performance and Satisfaction in COPM* increased significantly (compared to baseline measurement) The person-centered COPM (*Canadian Occupational Performance Measure) scores for performance and satisfaction increased significantly and for all individuals after using the bebionic multi-grip hand.				
	COPM mean value compared to baseline				
	0 1 month 2 months 3 months 6 months Performance — Satisfaction				

Population	Subjects:	9 (5 males, 4 females)
	Previous single-grip hand:	7x Ottobock VariPlus Speed,
		1x Ottobock Transcarpal hand,
		1x Ottobock Electric hand 2000
	Amputation causes:	7 congenital, 2 not stated
	Mean age:	31.8 ± 15.5 years
	Mean time since amputation	not stated
	Experience of prosthesis use	e: 18.7 ± 13.4 years
	MFCL:	n.a.

Study Design

Single-case AB design:



<u>Clinic visit:</u> Study specific questionnaire, Baseline data: self-reported assessment of COPM, PDI* and prosthesis wearing time

Phone call: Baseline data: self-reported assessment of COPM, PDI* and prosthesis wearing time

Intervention: Fitting of multi-grip hand and 2 days of intensive (STAIR*)-training; modified SHAP* test, filming ACMC* activities (set table and mixing pudding)

1 week follow up: phone call for follow up of home training

<u>**2 weeks follow up:**</u> self-reported assessment of PDI and prosthesis wearing time; modified SHAP test, filming ACMC activities

<u>1</u>, <u>2</u>, and <u>3</u> month follow up: self-reported assessment of COPM, PDI and prosthesis wearing time, modified SHAP test, filming ACMC activities</u>

<u>6 month follow up:</u> self-reported assessment of COPM, PDI and prosthesis wearing time, usefulness and actual use of the 11 grip types; modified SHAP test, filming ACMC activities

*)**ACMC**: Assessment of Capacity of Myoelectric Control; **PDI**: Pain Disability Index; **SHAP**: Southampton Hand Assessment Procedure; **STAIR**: Stepwise Training for an Advanced and Integrated Prosthetic Routine

Body Function		Activity			Participation	Others	
Mechanics	Pain	Grip patterns / force	Manual dex- terity	daily living	Satisfaction and Quality of life (QoL)	Training	Technical as- pect

Results

Category	Outcomes	Results for bebionic (6 months to baseline) Mean (95% CI)	Sig.*
Pain	PDI	Pain reduction of -7.7 (-14.0 to -1.3) points	
	PDI (n=5)**	Pain reduction of -13.8 (-21.8 to -5.8) points	
Grip patterns/ force	Use of grip types [% of users]	Used to the maximum: Tripod pinch 78% Power grip 67% Lateral pinch 33% Column grip, relaxed hand, finger point 22% Open palm 11%	n.a.
	Usefulness of grip types [% of users]	Rated as extremely useful: Tripod pinch 67% Power grip 33% Lateral pinch 44% Column grip, relaxed hand 22% Finger point, open palm, computer mouse grip 11%	n.a.
Manual dexterity	Modified SHAP (light objects) [s]	Faster trial: 6.5 (-5.2 to 18.1)	0
	Modified SHAP (heavy objects) [s]	Faster trial: -3.7 (-13.4 to 6.0)	0
	ACMC	Decrease of prosthetic control: -2.5 (-7.8 to 2.8)	0
Activities of daily living (ADL)	Prosthesis wearing time [h/day]	1.9	n.a.
	COPM Performance	Improvement of: <u>1 month:</u> 3.0 (2.1 to 3.8) points <u>2 months</u> : 3.5 (2.9 to 4.0) points <u>3 months</u> : 3.9 (3.2 to 4.6) points <u>6 months</u> : 4.3 (3.6 to 4.9) points	++
Satisfaction and Quality of life (QoL)	COPM Satisfaction	Improvement of: <u>1 month</u> : 3.8 (2.7 to 4.9) points <u>2 months</u> : 4.5 (3.6 to 5.4) points <u>3 months</u> : 4.9 (4.0 to 5.7) points <u>6 months</u> : 4.8 (3.9 to 5.7) points	++

* no difference (0), positive trend (+), negative trend (-), significant (++/--), not applicable (n.a.) ** includes only the 5 patients who reported pain-related disability in the PDI at the baseline measurements

Author's Conclusion "In conclusion, a multi-grip myoelectric hand prosthesis can be more useful than a single-grip model for performance of specific, individually chosen activities. Use of the multi-grip functions may reduce pain-related disability. Multi-grip prosthetic hands may thus fill a gap in prosthetic rehabilitation, but a durable single-grip hand may still be needed for heavier physical activities. With structured training a standard 2-site electrode control system can be used to operate a multi-grip hand." (Widehammar,2022)

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