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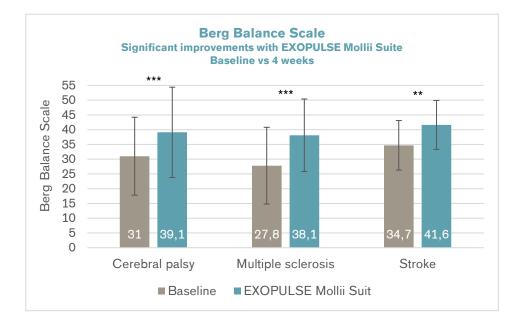
Effects of a full-body electrostimulation garment application in a cohort of subjects with cerebral palsy, multiple sclerosis, and stroke on upper motor neuron syndrome symptoms

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Products	EXOPUI	SE Mollii Suit						
Major Findings	With EXOPULSE Mollii Suit:							
	→ Positive effects on static and dynamic balance, fall risk, mobility, health utility, upper extremity function (for subjects with Berg Balance Score <45 at baseline)							
		Il reduction in spasticity re	elated pain afte	er 4 weeks (f	or subjects			
	•	Cerebral Palsy (CP): - 35.8%						
	•	Multiple Sclerosis (MS): - 26.5%						
	•	Stroke:	- 29.1%					
	→ Functional and clinical improvements (effect size Cohen´s d)*:							
			СР	MS	Stroke			
	Berg B	alance Scale (BBS)	1.64	1.83	1.28			

	CP	MS	Stroke
Berg Balance Scale (BBS)	1.64	1.83	1.28
Functional Gait Assessment	1.59	1.28	0.89
10m walk test	0.76	1.07	0.92
Wolf Motor Function Test	1.00	0.93	0.71
Timed Up and Go	0.29	0.83	0.78
EQ 5D 5L	0.50	1.11	1.26
Pain (Subscale of EQ 5D 5L)	1.28	0.78	0.78

* Small effect size < 0.3; medium effect size = 0.3-0.8; large effect size > 0.8



Population

า		<u>All subjects</u>	<u>BBS < 45 at baseline</u>
	Subjects:	72 (44 female, 28 male)	44 (24 female, 20 male)
	Etiology:	CP (N = 29)	CP (N = 16)
		MS (N = 23)	MS (N = 16)
		Stroke (N = 20)	Stroke ($N = 12$)
	Mean age:	36.64 ± 19.8 years	39.16 ± 19.9 years
	GMFCS:	1-3	1-3

Study Design

Observational study:



¹The suit (without stimulation); In case any aid (primarily orthotics) was used by participants during daily living, they were worn also during all assessments.

²Use of the suit for 60 minutes daily or every other day during the entire trial period and no change of lifestyle, routine or other applied medical interventions, e.g. physical therapy, should be made during their participation in the study.

For six outcome measures the recorded data were stratified by etiology (CP, MS, Stroke) and a Berg Balance Score <45 at baseline. The results of the pain subscale of EQ 5D 5L were stratified by etiology (CP, MS, Stroke) and subjects reporting pain at baseline. The effect sizes (Cohen's d) were classified as "large" if $d \ge 0.8$.

Results

Body Functions		Activity				Participation	Environment	Others	
Biomechan- ical (ROM)	Medical (Pain / Injuries)	Other	Upper extremity function	Lower extremity function	Safety	Activity, Mobility, ADLs	Preference, Satisfac- tion, QoL	Health Economics	Technical aspects

Category	Outcomes	Results for Baseline vs EXOPULSE Mollii Suit					
			Base- line (T0)	60 min (T1)	4 weeks (T2)	Effect size (T0 vs T2)	T0 vs T2
Medical (Pain / Injuries)	Pain (Subscale of EQ 5D 5L)	СР	2.79	2.22	1.79	1.28	***
		MS	3.06	2.00	2.25	0.78	**
		Stroke	2.58	1.83	1.83	0.78	*
Upper extremity function	Wolf Motor Function Test	СР	53.1	56.1	59.1	1.00	***
		MS	64.2	71.7	71.7	0.93	*
		Stroke	28.6	30.6	38.3	0.71	+
Lower extremity function	Functional Gait As- sessment	СР	11.0	15.5	16.6	1.59	***
		MS	11.3	16.7	18.3	1.28	**

Category	Outcomes	Results for Baseline vs EXOPULSE Mollii Suit					Sig.*
			Base- line (T0)	60 min (T1)	4 weeks (T2)	Effect size (T0 vs T2)	T0 vs T2
		Stroke	14.17	16.5	19.0	0.89	+
	10m walk test	СР	0.96	1.0	1.1	0.76	+
	[m/s]	MS	0.66	0.76	0.8	1.07	***
		Stroke	0.57	0.67	0.76	0.92	**
Safety	Berg Balance Scale	СР	31.0	36.3	39.1	1.64	***
		MS	27.8	34.1	38.1	1.83	***
		Stroke	34.7	40.8	41.6	1.28	**
	Timed Up and Go [s]	СР	26.4	22.0	23.2	0.29	*
		MS	29.7	23.3	21.3	0.83	***
		Stroke	36.0	25.7	22.3	0.78	**
Quality of life	EQ 5D 5L	СР	0.76	0.87	0.87	0.5	*
		MS	0.55	0.77	0.73	1.11	**
		Stroke	0.54	0.66	0.75	1.26	*

* no difference (0), positive trend (+), negative trend (-), significant (*: p<0.5, **: p<0.01, ***: p<0.001), not applicable (n.a.)

Effect size Cohen's d: Small effect size < 0.3; medium effect size = 0.3-0.8; large effect size > 0.8

Author's Conclusion "Individualized multi-site transcutaneous electrical stimulation seems to increase ambulation-related skills in subjects with upper motor neuron syndrome stemming from infantile cerebral palsy, multiple sclerosis and stroke. These results obtained with an improved full-body electrostimulation garment show encouraging effects on static and dynamic balance, fall risk and mobility. Upper extremity improvement may be observed as well as an overall increase in health utility and a reduction in spasticity-related pain. Effects are immediate (after one hour of stimulation) as well as sustained (1 month of application) with stimulation applied for 60 minutes daily or every other day. Outcomes being sensitive to such improvements could be identified. The results may improve the quality of individual trial fittings as well as inform controlled trials that are most clearly warranted in this context." (Hahn, not yet published)

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