Project of playful and automatized assessment of motor function in patients with NMD: MFM-Digital study


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The Motor Function Measure (MFM) is a valid and sensitive tool composed of 32 items, applicable to ambulant and non-ambulant patients with neuromuscular disorders (NMD). It is currently used as outcome measure in clinical studies. By using digital technologies, we want to create an automated MFM assessment. The objectives are to improve the MFM reliability and its acceptability by including the assessment in a serious game. Feasibility studies assessing the relevance of digital systems to capture postures and motions during a MFM test have shown that on 32 items of the MFM, 14 could be captured by the Kinect and 3 by a digital tablet. Here we present studies to the conception of the assessment with digital tools.

RESULTS MFM-KINET

119/140 records were interpretable. Some digital data were not analyzed because of capture problems with distortion skeleton. For example, patients with small amplitude movements or sitting on a wheelchair were hardly captured. On interpretable records, a great agreement between items scoring by a therapist and items blind scoring on captured digital data were found (75.6%). Differences between both studies concern as well concordance than interpretable capture.

RESULTS MFM-DIGITAL TABLET

99 patients were included in the MFM-tablet study, with 25 DMD, 17 SMA, 15 Myotonic Dystrophy, 13 Progressive Muscular Dystrophy, 9 Neuropathies and 20 others. Median age of patients were 16.1 year [IQR: 11.3-43.9] and median of % MFM total score were 77.1% [IQR: 53.1-85.4]. The agreement between scoring on paper vs tablet is excellent (>0.81) for items 18 and 22, good (k=0.61-0.8) for item 19.

DISCUSSION and CONCLUSION

Results are encouraging to support the development of an automatized MFM. Additional work is needed to improve Kinect capture for weaker patients and to find new digital technologies able to capture additional items. In study 2, MFM-Kinet protocol was included in a long list of tests during NatHeS-SMA; which could explain result differences between studies. The MFM-tablet results validate the use of a tablet during the completion and give us the possibility to included it easily in a game, particularly for children who showed a greater interest for the tablet application.

The next steps are to implement algorithms to provide an automatized scoring based on digital data to help the therapist to score and to turn the assessment in a playful scenario in order to improve engagement of children.


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