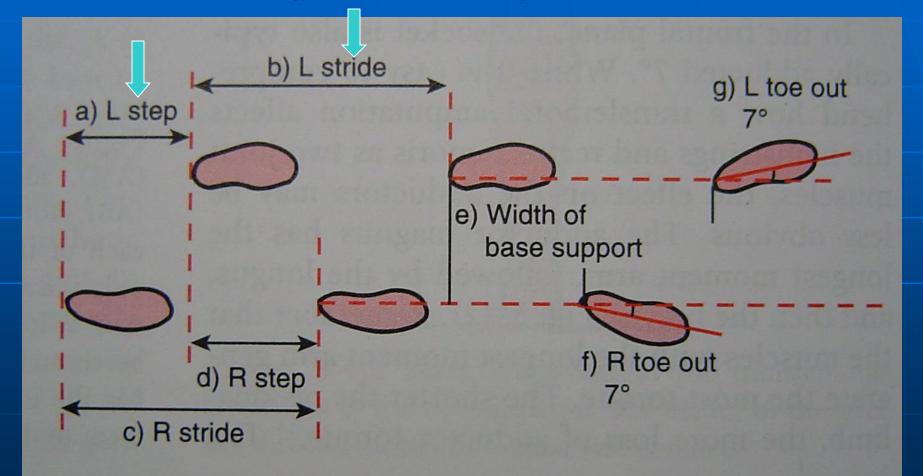
Normal Gait

Heikki Uustal, MD Medical Director, Prosthetic/Orthotic Team JFK-Johnson Rehab Institute Edison, NJ

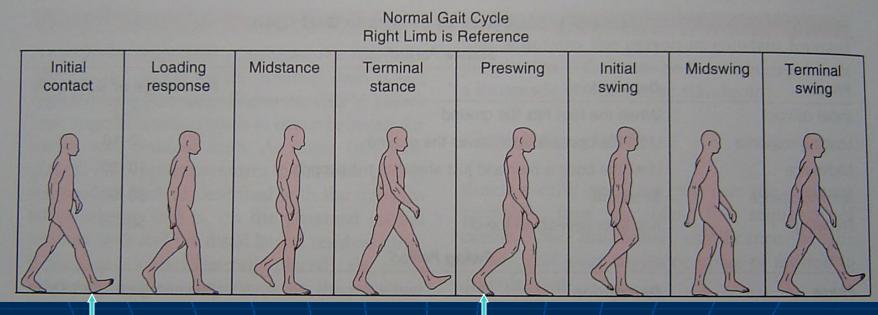
Critical Gait Parameters

Average walking speed = 2-3 mph (60-80m/min) Average cadence = 80-110 steps/min Average step length = 30 cm Average stride length = 60 cm • Stance/swing (1 leg) = 60/40Single/double limb support = 80/20 Running has no double limb support 2

Step or Stride? R step + L step = stride



Phases of the Gait Cycle (1 leg) Stance Phase – 60% Swing Phase – 40%



Comparison of R leg to L leg 80/20 rule

			Table 5	-2. Summa	ary of Gait I	Phases		
R	0-10%	10-30%	30–50%		50-60%	60-73%	73-87%	87-100%
	(10%)	(20%)	(20%)	(10%)	(13%)	(14%)	(13%)
R	Initial & loading	Midstance	Terminal stance		Preswing	Initial swing	Midswing	Terminal swing
L	Preswing	Initial swing	Midswing	Terminal swing	Initial & loading	Midstance	Terminal stance	
L	0-10%	10-23%	23-37%	37-50%	50-60%	60-80%	80-100%	
	(10%)	(13%)	(14%)	(13%)	(10%)	(20%)	(20%)	

Three Important Gait Factors

Forward Progression
 Stance Stability
 Conservation of Energy

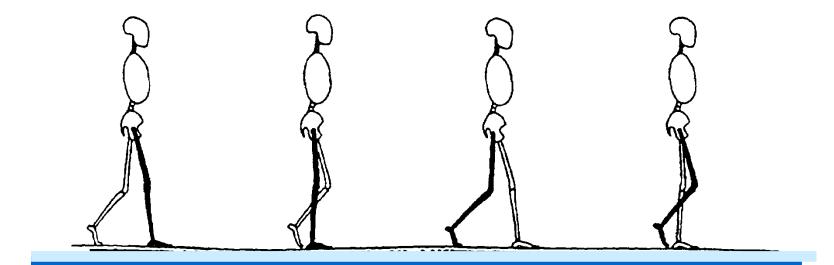
Methods of Analyzing Gait

 Kinematics = observing or measuring the position of joints and segments through each phase of gait (visual gait analysis)

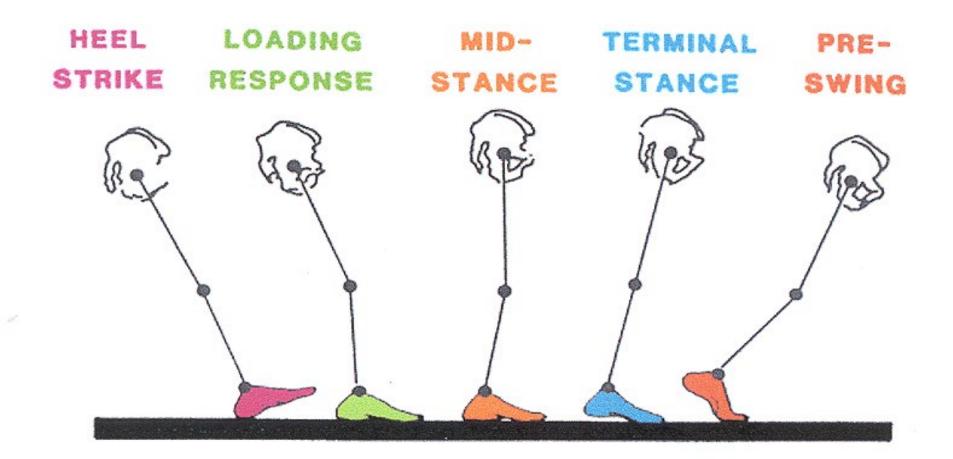
 Kinetics = measuring the Ground Reaction Force at each joint and then calculating the muscle activity or soft tissue resistance present to stabilize the joint

Gait Analysis Basic Training

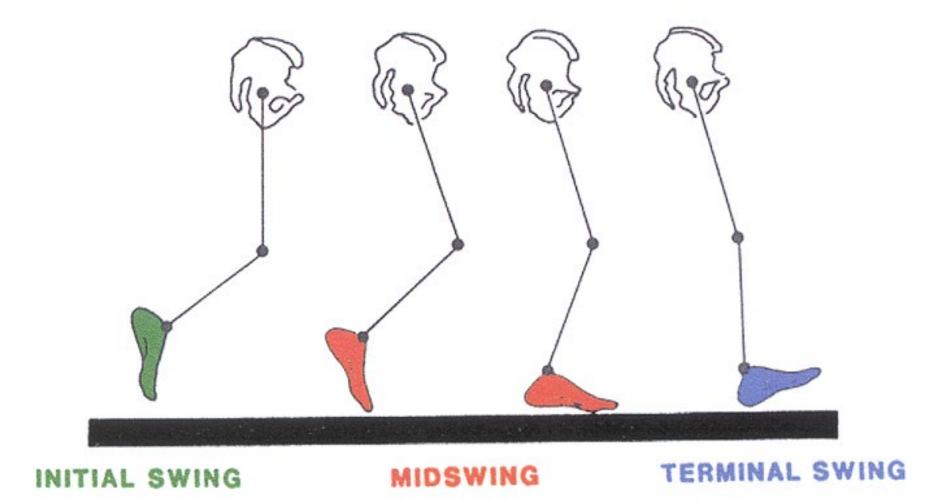
Assess only one joint at a time
 Look at early stance, late stance, then swing
 Separate kinetics from kinematics
 KEEP IT SIMPLE!



Normal Human Locomotion: Sagittal Plane Gait Kinematics

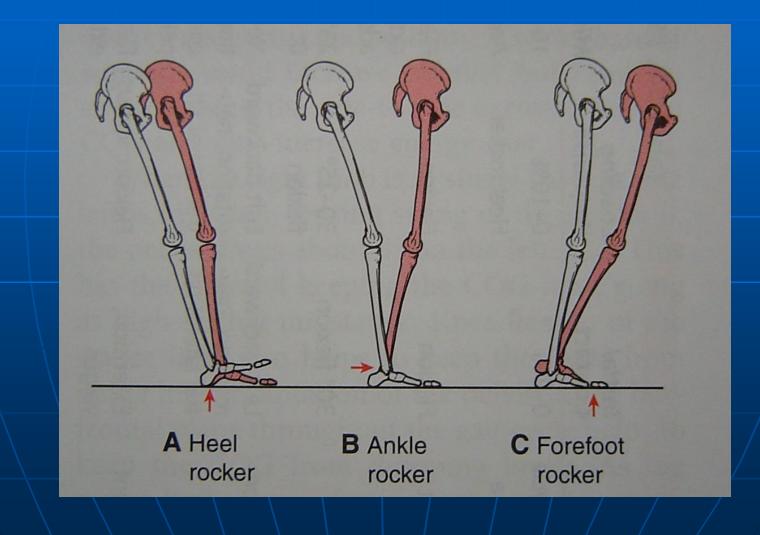


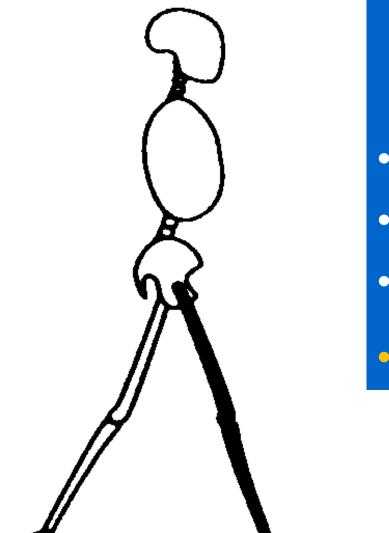
STANCE PHASE



SWING PHASE

Rockers or Pivot Points in Stance





Initial Contact:

•Double Support

•Hip = Flexed 30^*

•Knee = Extended

•Ankle = Neutral

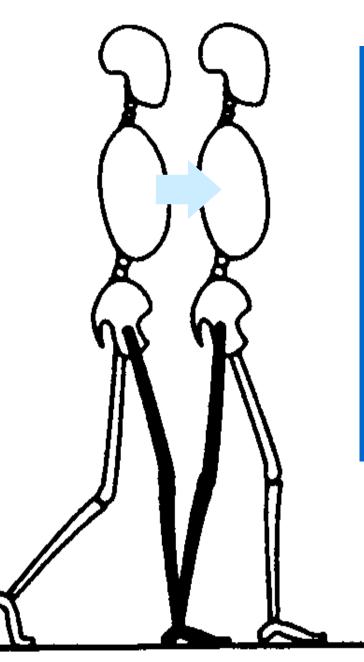
•Goal = Begin Stance

Initial Contact



Loading Response: •Double Support •Hip = Flexed•Knee = Flexing $5-10^*$ •Ankle = Plantarflexing to 20* •Goals = Weight Acceptance, Shock Absorption, Advance body over Heel Rocker

Loading Response

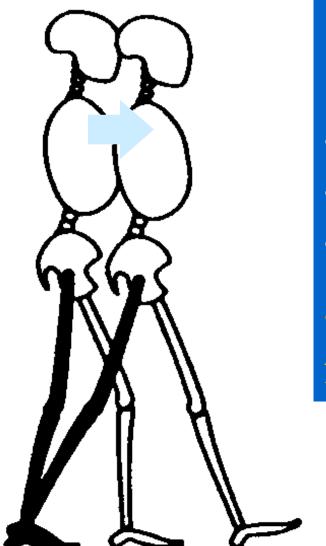


Mid Stance:

•<u>Single</u> Support

Hip = Extending
Knee = Flexed 5-10*
Ankle = Dorsiflexing

•Goal = Advance body over stationary foot, ankle rocker



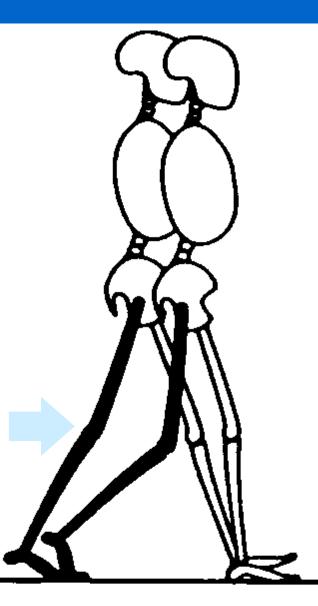
Terminal Stance:

•Single Support

•Hip = Extending 15-30*
•Knee = Extend, then Flex
•Ankle =15* DF to Neutral

•Goal = Advance body over forefoot rocker

Terminal Stance



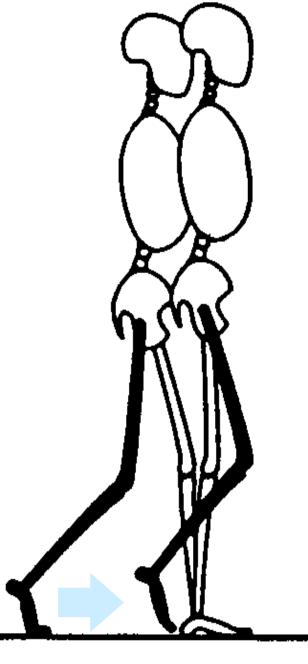
Pre-Swing

Pre Swing:

•Double Support

Hip = Flexing
Knee = Flexing 30-40*
Ankle = Plantarflexing 20-30*

•Goal = Prepare for Swing, transfer load to other limb



Initial Swing

Initial Swing:

•<u>Single</u> Support

Hip = Flexing
Knee = Flexing up to 65*
Ankle = Dorsiflexing to 0*

•Goal = Clear foot and advance limb

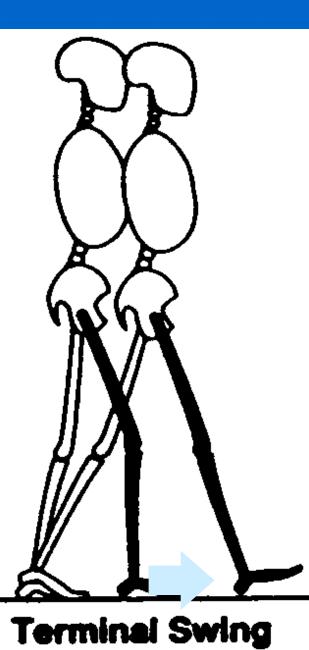


Mid Swing:

•Single Support

Hip = Flexing to 30*
Knee = Extending
Ankle = Dorsiflexing to 0*

•Goal = Advance limb and clear foot

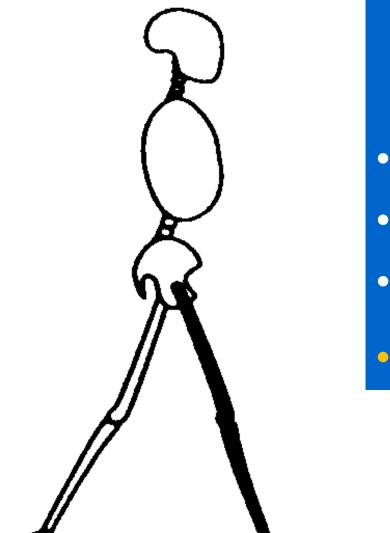


Terminal Swing:

•<u>Single</u> Support

Hip = Flexed 30*
Knee = Extending
Ankle = Neutral

•Goal = Advance limb



Initial Contact:

•Double Support

•Hip = Flexed 30^*

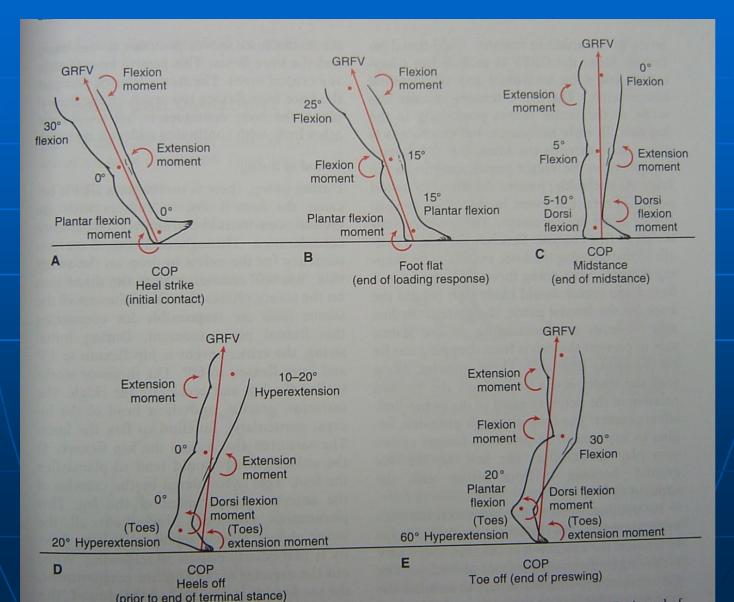
•Knee = Extended

•Ankle = Neutral

•Goal = Begin Stance

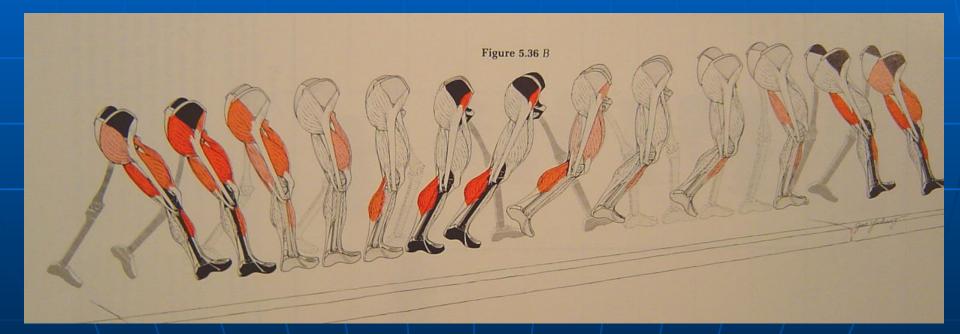
Initial Contact

Kinetics of Stance Phase

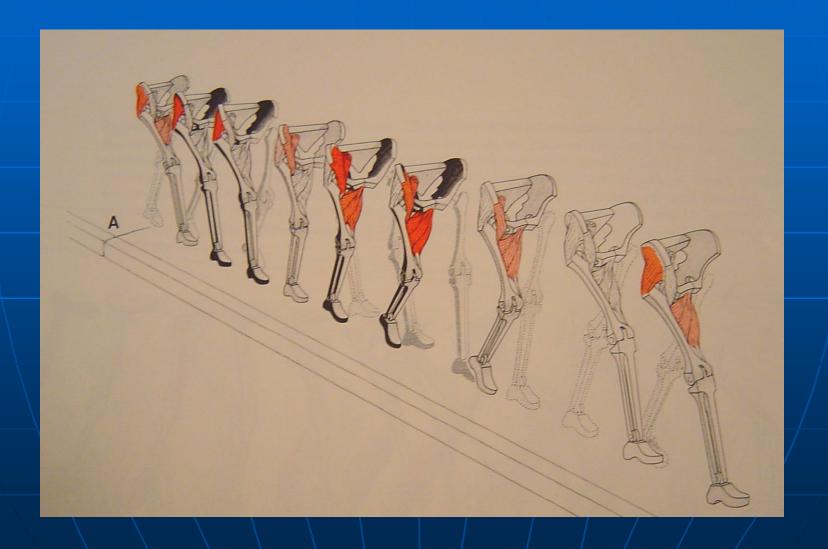


22

Activity of All Major Muscles



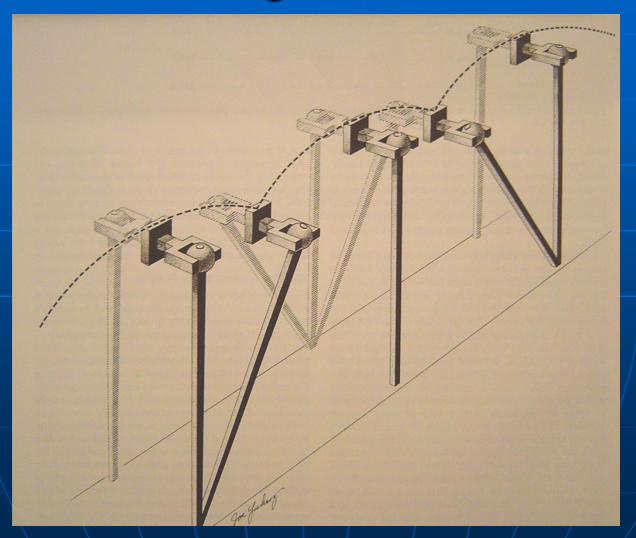
Activity of All Major Muscles



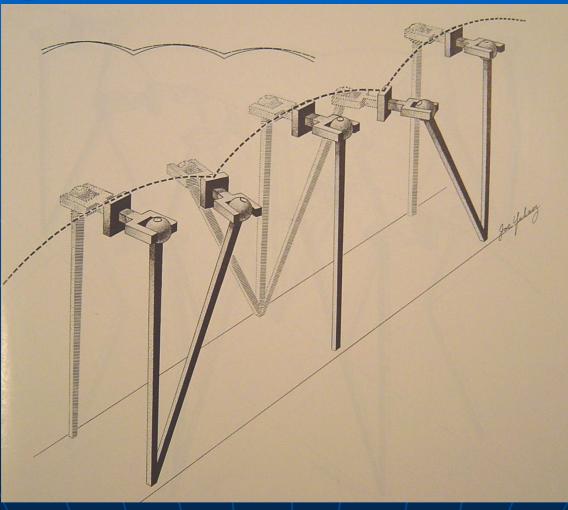
Hip Abductor Activity



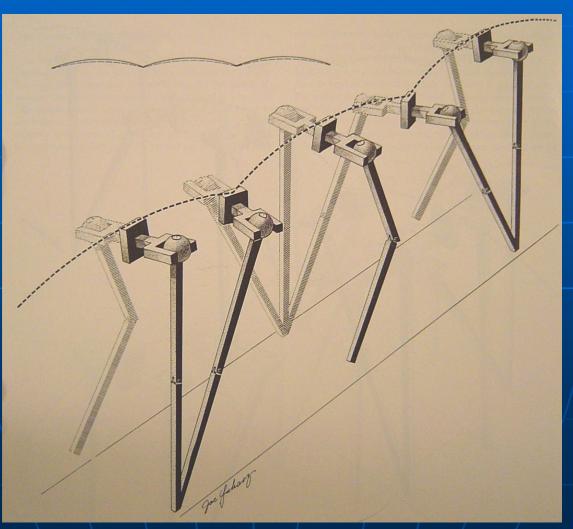
Determinants of Gait Stick Figure Model



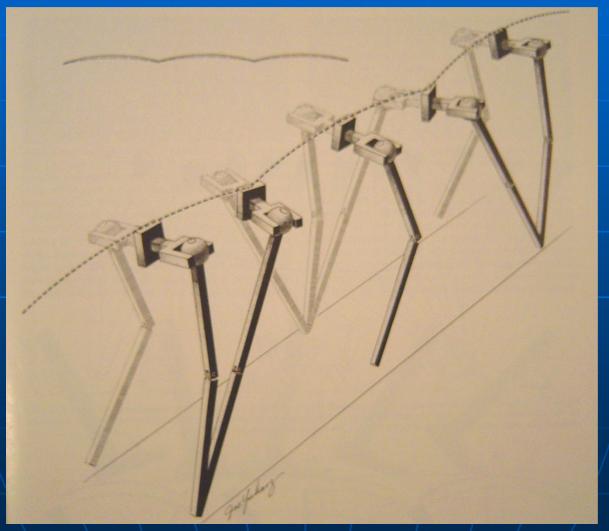
1.Pelvic Rotation Lengthens Limb at IC and PS



2.Pelvic Tilt Shortens Limb at MS



3.Knee Flexion in Stance Shortens Limb at MS



4&5.Foot and Ankle Motion Lengthens and Shortens Limb

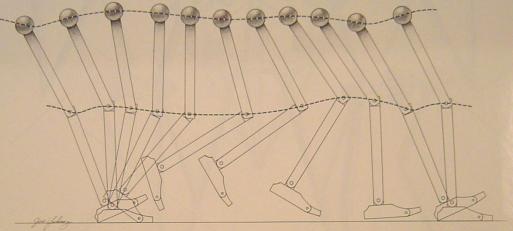


Figure 1.7. Pathway of knee in walking at moderate speed. Note that there is a slight elevation immediately after heel strike, but for the remainder of stance phase the pathway is relatively straight and shows only a slight declination from the horizontal. (Reproduced, with permission, from Saunders et al. J. Bone Joint Surg. 35-A:543, 1953.)

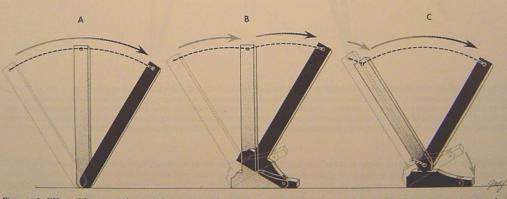
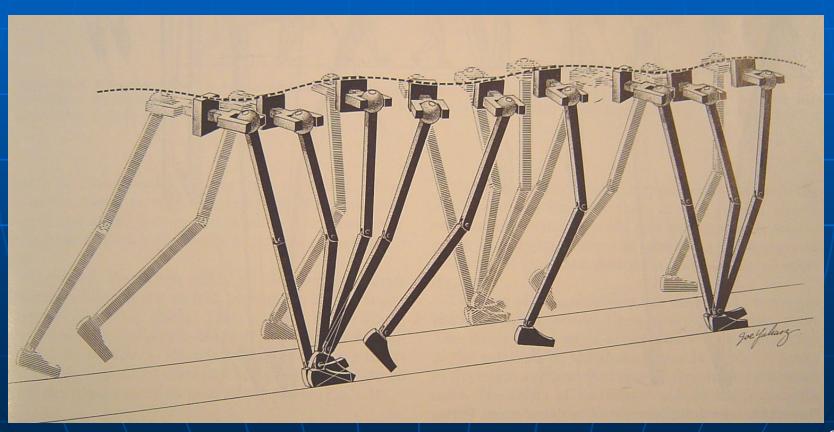
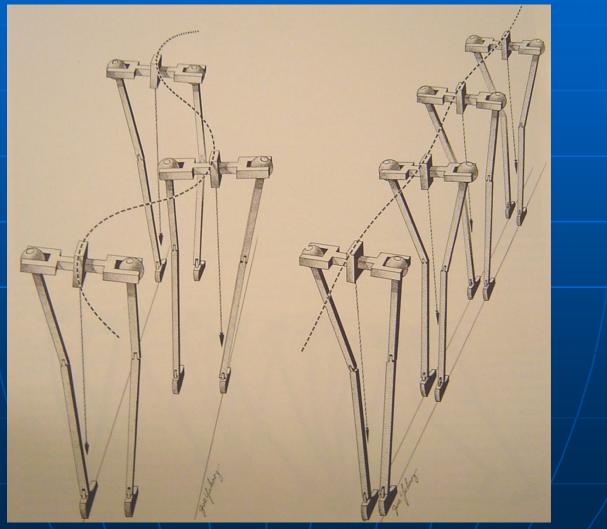


Figure 1.8. Effect of foot on pathway of knee. A, Arc described when there is no foot. B, Effect of foot without ankle. Note that the pathway now comprises two intersecting arcs. However, it does not fall abruptly at the end of stance and begins to resemble the normal pathway. C, Effect of foot with flail ankle. (Reproduced, with permission, from Saunders et al. J. Bone Joint Surg. 35-A:543, 1953.)

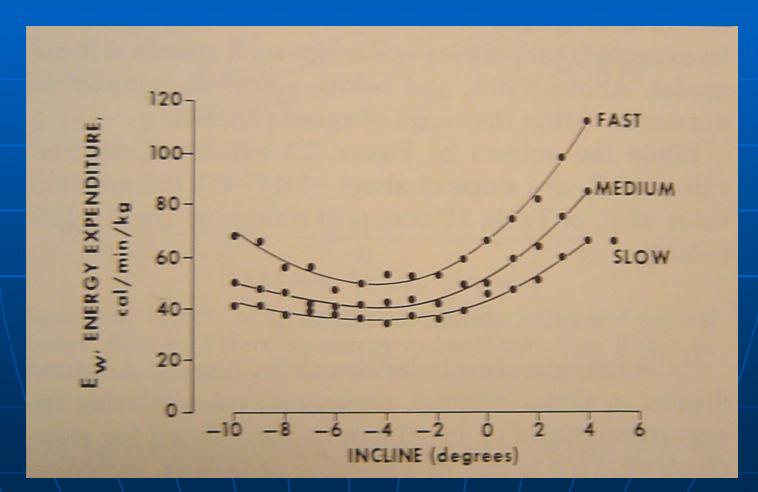
Sinusoidal Motion of the COG



6.Narrow Base of Support to Minimize Horizontal Motion

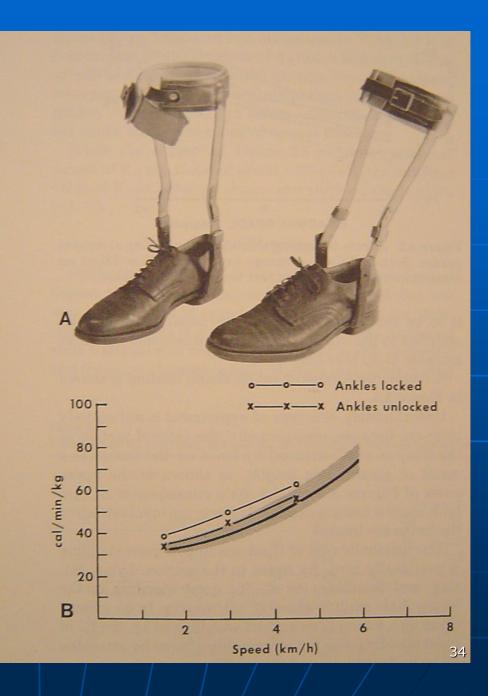


Effect of Incline on Energy

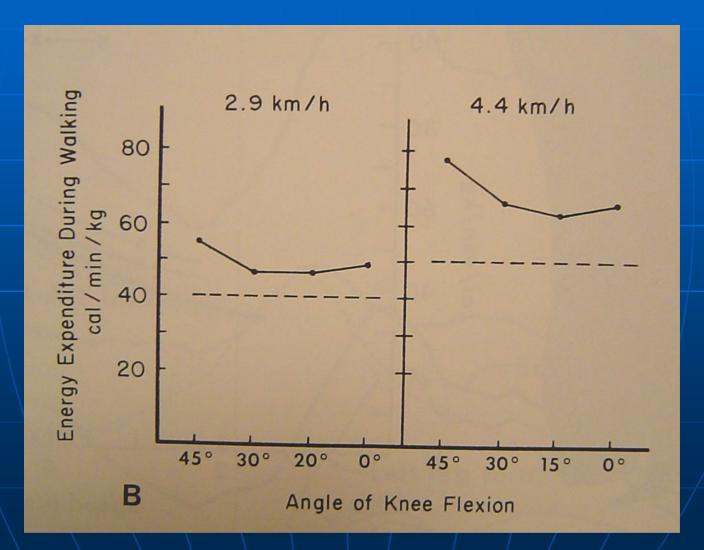


33

Effect of Ankle Immobilization on Gait

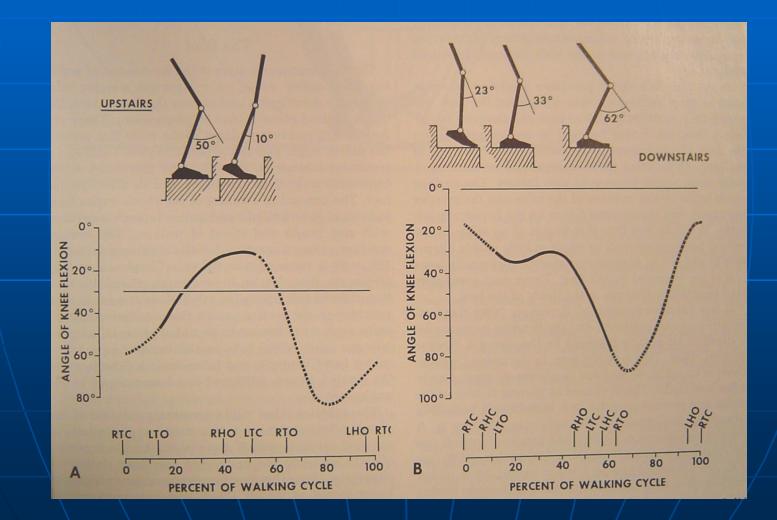


Effect of Knee Immobilization



35

Up and Down Stairs



Center of Gravity Line

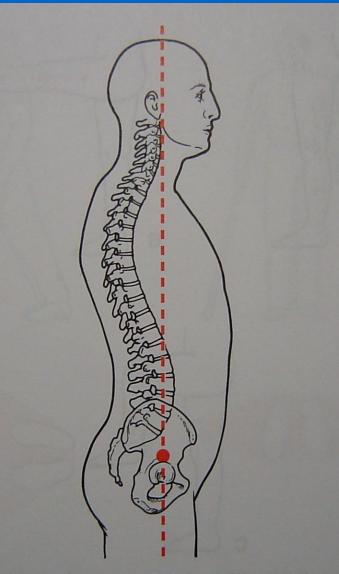


Figure 5-24. Location of the COG. In the average adult, the COG lies anterior to S2.

Base of Support

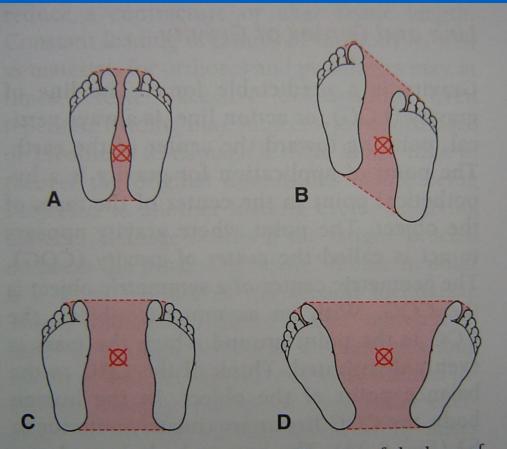


Figure 5-26. Base of support. The size of the base of support varies with a change in foot position.

Base of Support

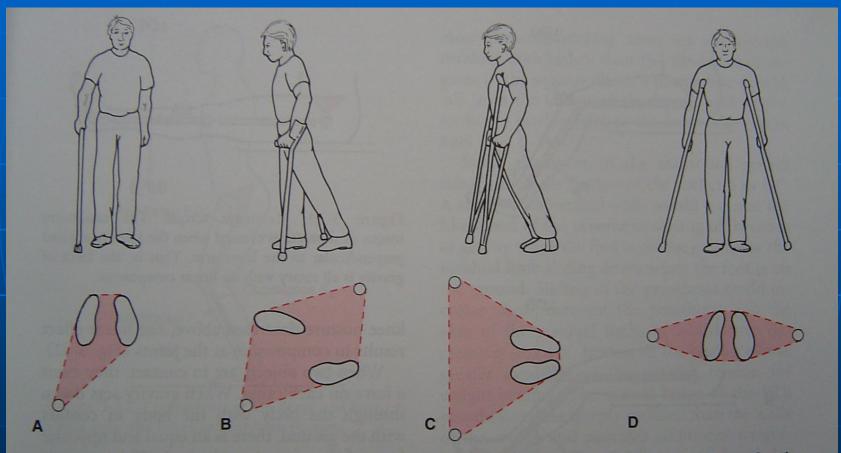


Figure 5-27. Base of support. The size of the base of support varies with the use of a cane or crutches and with placement of the assistive device.

Thank You