

### **Robotics in Healthcare**

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2000s

## Moment of Great Opportunities



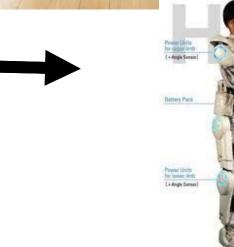






tor Reaction Force Servers











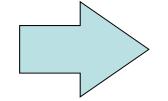






Structured Environment
 Human-Robot
 Separation

Factories designed for robots

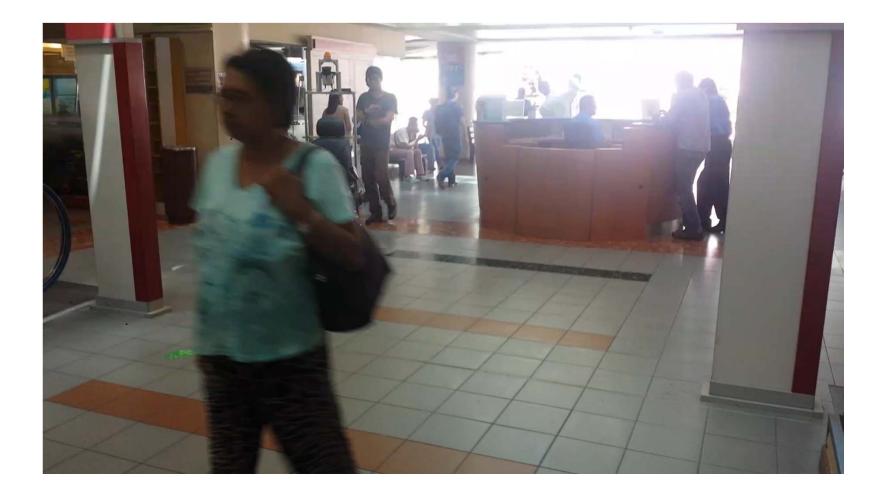


♦ Unstructured Environment♦ Human-Robot Interaction

Intelligent Robot Adapting to Spaces Designed for Humans







### Autonomous Wheelchair in a Hospital Environment





### Local Planning – our mobility scooter

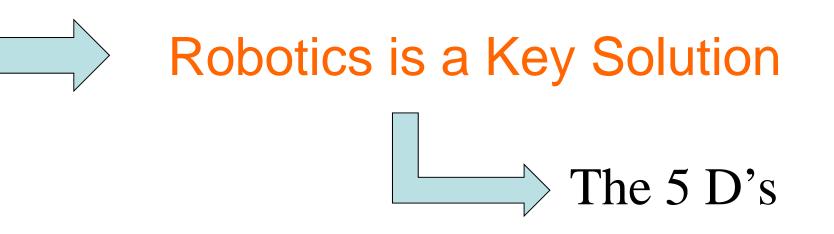






### **Critical Needs**

# Improving Productivity Ageing Population Manpower for Higher Value Added Services

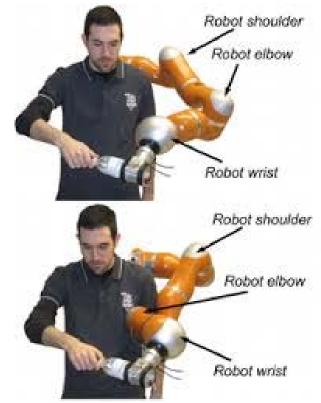






## Human-Centered Collaborative Robotics

- Develop the generic scientific foundations, technologies and experimental platforms that enable natural interaction and collaboration between robots and humans
  - -What is the right level of autonomy?
  - -How best to interact and collaborate?
- ♦ Apply them to compelling areas
  - high societal and economic impact







Industrial Robots: From Structured Environments to Unstructured & Human Environments

Is Precision Motion Control Enough?
What is the role of Force Control?
Do we need new Design of Robots?
Do we needed higher forms of intelligence?





## Robotics in our daily lives

 $\diamond$ Activities of Daily Living ♦ Social companionship  $\diamond$ Assistive Devices  $\diamond$ Exercise Devices  $\diamond$ Anytime, anywhere  $\diamond$ Hospital  $\rightarrow$  Community  $\rightarrow$  Workplace  $\rightarrow$  Home





## What's needed?

### ♦ Robotic Mechanisms

- -Inherently safe
- -Friendly
- -Easy to use

### ♦Intelligence

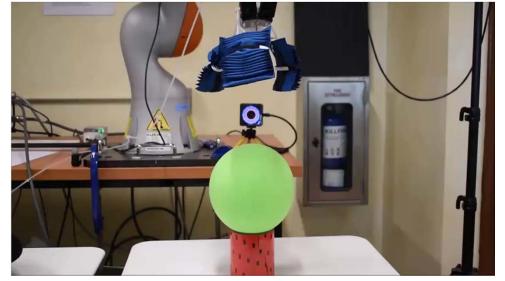
- -Sensing and perception
- -Intelligent decisions and actions
- -Learning from experience (continuously)

# Soft Robotics

## Mechanical Intelligence

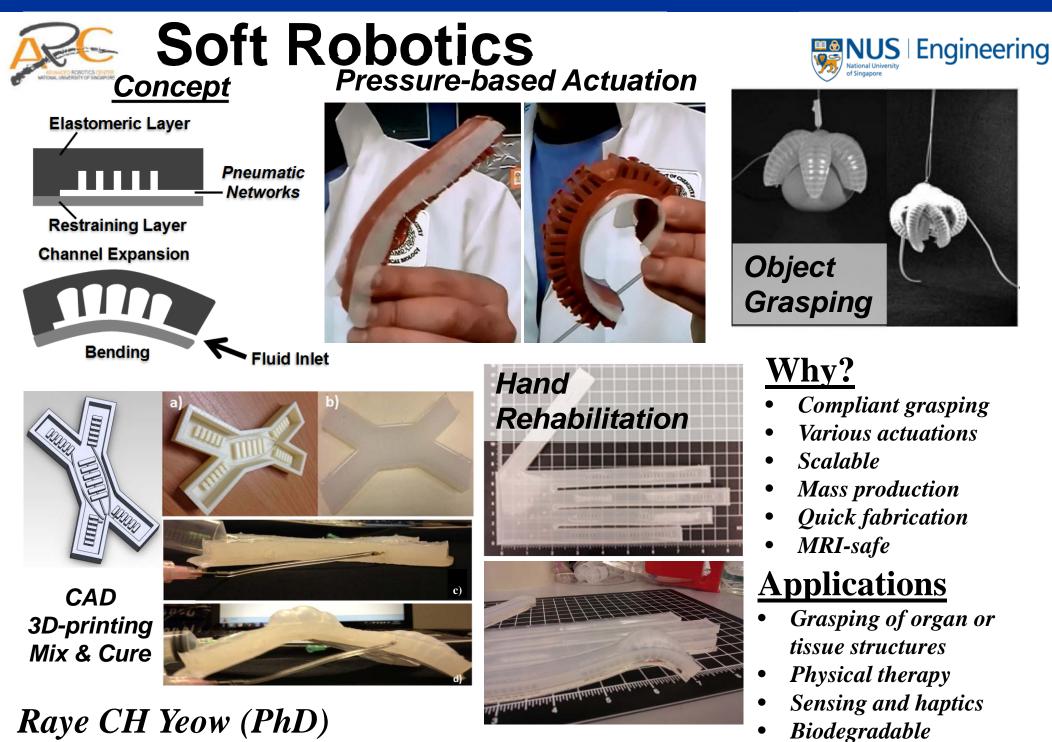
- Physical Embodiment
  - Intelligent Mechanics
  - Physically Soft and Compliant
  - Naturally comply to contact with environment (including humans)
  - Inherently safe





Soft Robotics





**Evolution Innovation Laboratory, Biomedical Engineering/SP-ARC** 

## Soft Actuators



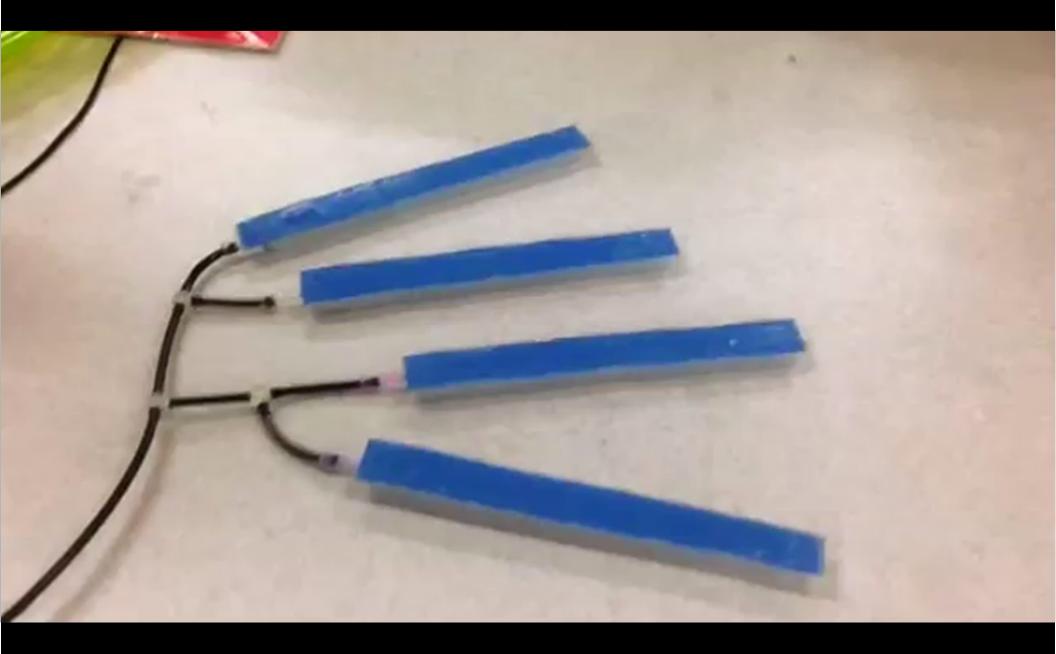
Evolution Innovation Lab

Evolution Innovation Lab

## Soft Robotics. Extending.



## Soft Robotics. Bending.

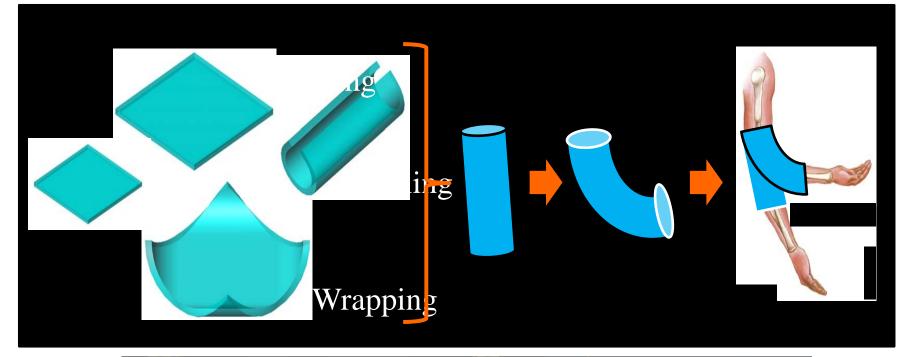


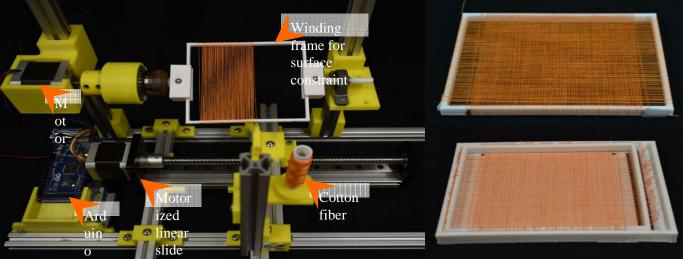
## Soft Robotics. Crawling.











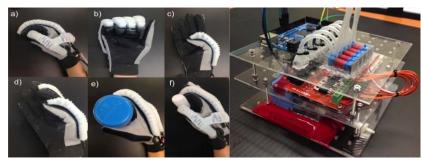




#### Soft Myoelectric Robotic Glove for Assistive Applications













Soft Sensor-Robotic Gloves for Mirror Therapy



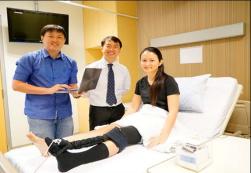






#### Robot-assisted Ankle Therapy







Department of Biomedical Engineering Faculty of Engineering







Soft Sensor-Robotic Socks for Mirror Therapy

### Controlling of Robotic Sock using contralateral limb with IMU







## **Soft Grippers**





## 3D Printing – "Ninjaflex"

## Grip-hold-release tasks with 3D-printed soft robotic gripper









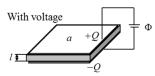
## Fully-Fabric Soft Robotic Tail

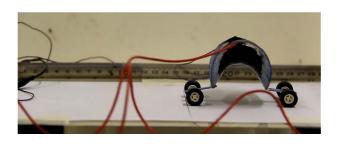


## Hardware: Intelligent Mechanics

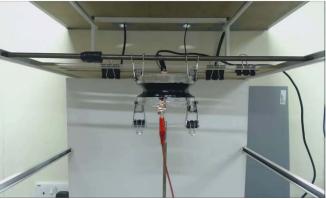
#### Dielectric Elastomers 3M VHB 9610 (double sided tape)

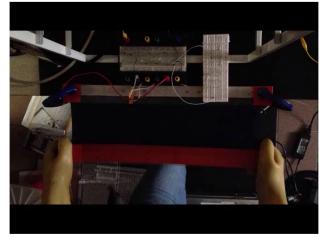
Without voltage With





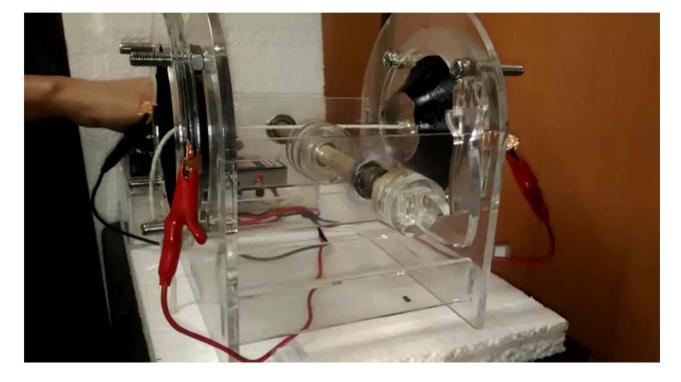
With Zhu Jian and Adrian Koh











with Adrian Koh Soo Jian









**Domenico Campolo Nanyang Technological University** *School of Mechanical and Aerospace Engineering* 

Simone Krager\* and Marcelo H Ang Jr National University of Singapore Advanced Robotics Centre



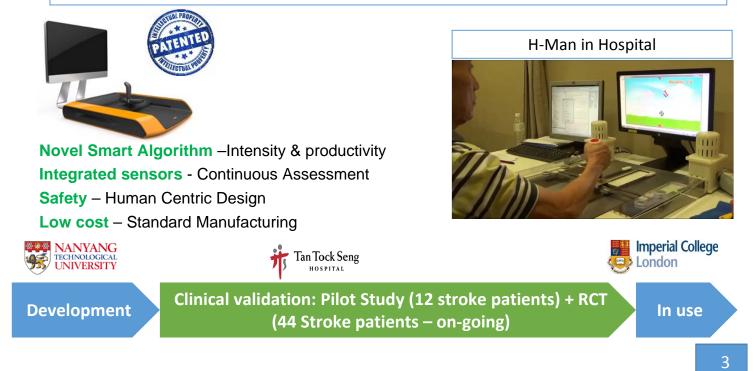
A novel, compact planar robot for (semi-) independent rehabilitation of upper limb sensorimotor impairments

- Light-weight (< 7 kg)
- Max 30 N at the end-effector
- Table top / portable
- Cost-effective
- Easy to control and program
- Assistive/resistive tasks
- Intrinsically safe



#### The H-Man

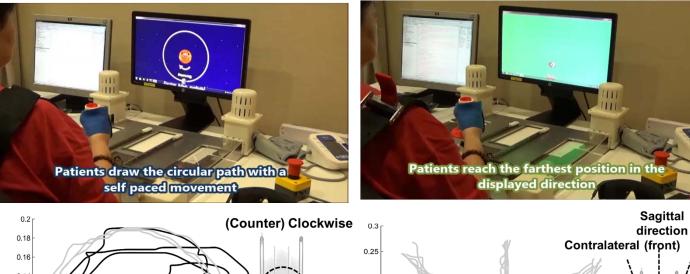
Low-cost planar robot for upper-limb rehabilitation in a safe, productive and effective manner, backed by clinical validation

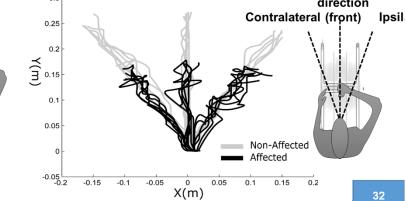


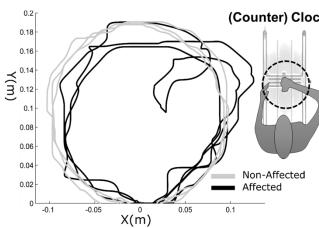
#### H-Man and Quantitative Sensorimotor Assessment

Coordination

#### **Range of Motion**

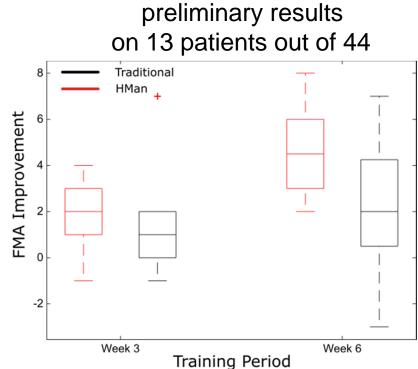






#### Training with H-Man

- 6 Stroke patients on H-Man
- 7 Stroke patients on traditional 1-1 therapy
- Equivalent to traditional therapy after completion of randomized control trial



#### Towards Commercialization

Clinically Validated Pain to Gain

#### **1. Intensive Training**

> 6 times more smart repetitions than conventional methods, 50 vs 300.



**3. Continuous Assessment** Clinically validated metrics with integrated sensors

#### 2. Enhanced Productivity

1 therapist > multiple patients, validated smart algorithm.



**4. Safe & Portable** table top design with clinically validated safety in feasibility study.

#### H-Man Team



Domenico CAMPOLO



Sara CONTU





Mohammad ESMAEILI



.



HUSSAIN



Paolo TOMMASINO



Muhammad Azhar



PHAN Gia Hoang



Kumudu GAMAGE



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