At AlterG, we are committed to proper scientific investigation of the potential clinical and athletic performance benefits of using our device. We are pleased to have multiple studies in clinically relevant areas currently underway by independent researchers at highly reputable institutions in the U.S. and Internationally.

Due to the large expansion of the number of installed AlterG Treadmills worldwide, many independently produced studies are proceeding without the knowledge of our company. We encourage researchers to make us aware of concluded studies for inclusion in future Research Summaries.

**WHAT’S NEW:**

- New published clinical research showing effectiveness of the AlterG Anti-Gravity Treadmill in muscular dystrophy, rehabilitation after total knee arthroplasty, high intensity interval speed training, and osteoarthritis
- New basic science research in cardiovascular and pulmonary physiology, including safe cardiovascular response for elderly individuals exercising after total knee arthroplasty
- An interesting first reported measurements of reduced markers of articular cartilage turnover using AlterG Anti-Gravity Treadmill walking.
- EMG comparison of AlterG Anti-Gravity Treadmill vs deep water running
- Multiple prospective clinical studies are continuing data acquisition, including a Level 1 RCT in rehabilitation after total knee arthroplasty.
- Initiating a large randomized trial of AlterG Anti-Gravity Treadmill vs pharmacologic cardiac stress testing in patients unable to do standard cardiac stress testing
- Additional user produced case studies were added to the website, bringing the total number of studies to 45.
- Additional Clinical Protocols were added to the website, now with 11 protocols.

- Studied cardiovascular responses to AlterG Anti-Gravity Treadmill body weight support in 25 healthy males as a prelude to future studies in heart failure patients
- Heart rate decreased, mean arterial pressure unchanged, systolic pressure unchanged, diastolic pressure slight but not significant decrease


- Prospective training program for severely affected muscular dystrophy patients who are unable to do conventional exercise due to weakness
- Improvements in walking distance and dynamic postural balance in all patients
- Supported use of AlterG Anti-Gravity Treadmill as a safe and effective training modality for severely affected individuals with muscular dystrophy


- Prospective pilot study of 29 patients undergoing total knee arthroplasty
- Demonstrated safety and efficacy, with improvements in KOOS, TUG, and pain scores
- High level of compliance by patients with outstanding acceptance from physical therapists
- Foundation for large scale randomized clinical trial which is now underway


- Physiologic study of ventilation correlated to walking speed


- In this interesting observational study, the authors measured serum cartilage oligomeric matrix protein (COMP)- a measure of cartilage catabolism. Participants were measured at their baseline unloaded condition, others were measured with a weighted vest adding 40% body weight, and others were measured on the AlterG Anti-Gravity Treadmill at -40% body weight
- Cardiovascular responses were also measured through heart rate and perceived exertion
- Changes to COMP were noted immediately during exercise
- Walking with unadjusted BW and increased BW resulted in measurable articular cartilage catabolism (via serum COMP); however, walking with decreased BW did not
- It is believed that sustained increases in COMP indicates cartilage breakdown
- AlterG Anti-Gravity Treadmill body weight support for walking may potentially benefit individuals who wish to simultaneously minimize knee joint load and maintain cardiovascular response


- The authors performed a 4 week prospective high intensity interval training program to assess improvements in running speed in trained high level runners
- Participants were randomized to standard treadmill training vs 10% body weight support on the AlterG Anti-Gravity Treadmill
- The 4 week HIIT protocol improved field performance, VO2 max, and submaximal heart rate
- The authors state that AlterG HIIT is an effective method to improve running performance while reducing potentially injurious joint loading seen in standard full body weight HIIT

- Case report of a 57 y.o. male experienced marathon runner with severe knee pain and varus thrust from medial knee osteoarthritis.
- He undertook a 14 week training program on the AlterG Anti-Gravity Treadmill
- At conclusion of the training program, his pain was negligible when running at full body weight and 3-D gait analysis showed improvements in his varus thrust
- He was successfully able to run a marathon without pain at 4 months after training on the AlterG Anti-Gravity Treadmill


- Case study of an 81 year old man, 14 months post stroke with poor ambulation and balance
- Trained 4x per week for 4 weeks
- Improved walking speed, stride length, walking kinematics, and reduced fall risk


- This technical note shows that there is less than 5% difference between predicted and actual unloading with the most commonly used body weight unloading percentages from 90% to 40%


- Measurement of VO2 in elite distance runners across a number of speeds and body


- 12 week prospective non-randomized clinical trial
- Participants reported significant improvements in knee joint pain and function and demonstrated significant increases in thigh muscle strength.
- Significant reductions in acute knee pain during full weight bearing treadmill walking and required dramatically less LBPP support to walk pain free on the treadmill.
- Data suggest that an LBPP-supported low-load exercise regimen can be used to significantly diminish knee pain, enhance joint function, and increase thigh muscle strength, while safely promoting pain-free walking exercise in overweight patients with knee OA.

- Confirmed results from other studies demonstrating maintenance of normal muscle firing patterns with body weight support, except for reduced activity during push-off phase
- Also noted that muscle firing patterns revert to pre-exercise within 3 minutes of full reloading


- Observational biomechanics study evaluated specific loading across the foot using in-shoe sensors
- Foot loading patterns were preserved at 80% to 100% body weight, but patterns shifted towards forefoot loading at increasing levels of body weight support


- Observational study of cardiovascular responses to AlterG exercise after unilateral total knee arthroplasty
- Demonstrated cardiovascular safety of AlterG exercise in this population
- Older adults with TKA demonstrated lower heart rate, systolic blood pressure, oxygen consumption and minute ventilation levels when walking under lower body positive pressure conditions.
- AlterG exercise enabled TKA patients to walk at faster speeds and/or to tolerate greater incline which may be important in the rehabilitation of these patients

Published Studies:

Early studies provide the foundation for the biomechanics of running and walking on the AlterG. They also show that for each individual a “metabolic prescription” can be achieved, thus maintaining metabolic load while reducing the ground reaction forces. More recent studies have focused on clinical rehabilitation topics. The principles shown here can be applied to a wide variety of medical and athletic rehabilitation settings. Here are summary findings:

- Jogging at 4.5mph with 50% body weight support produces the same knee joint reaction force as walking with full body weight
- For any given walking or running speed, weight support reduced metabolic demand by the individual
- For any given amount of weight support, metabolic demand can be increased by increasing walking or running speed
- Ground reaction forces are reduced at all levels of weight support
- Surface EMG electrode activity shows that muscle firing patterns and gait mechanics are maintained for all levels of weight support and speeds.
- Anti-gravity muscles show reduced activation with weight support
- Weight support causes no significant change in Heart Rate, Systolic Blood Pressure, Diastolic Blood Pressure and Mean Arterial Pressure
- Individuals who use Heart Rate to create exercise regimens can continue to do so on the AlterG and they should expect a similar metabolic demand from body weight support as with unsupported exercise
- Dramatic improvements in gait mechanics are seen in children with cerebral palsy who use the AlterG for exercise
- AlterG exercise is very well tolerated by individuals with knee osteoarthritis, and results in a reduction in knee pain when ambulating off the AlterG. An average of 12% body weight support is needed to produce pain relief.
CLINICAL RESEARCH UPDATE

- Gait and functional improvements are seen in several adult neurologic conditions such as Parkinson’s Disease and muscular dystrophy


- Prospective training program for severely affected muscular dystrophy patients who are unable to do conventional exercise due to weakness

- Improvements in walking distance and dynamic postural balance in all patients

- Supported use of AlterG Anti-Gravity Treadmill as a safe and effective training modality for severely affected individuals with muscular dystrophy


- Physiologic study of ventilation correlated to walking speed


- 25 obese adults with moderate knee osteoarthritis pain participated in a 12 week AlterG exercise program, twice a week for 25 minutes each session

- A mean level of 17.9% LBPP (i.e. 16.1 kg) was effective in reducing knee joint pain during initial walking

- Strength levels for the quadriceps and hamstring muscle groups increased significantly following the 12-week program

- Significant improvements were found in all KOOS subscales, indicating a reduction in knee OA symptoms and improvement in functional abilities

- Knee pain during walking significantly decreased, with some participants experiencing complete pain relief. Pain was reduced to a point where the addition of LBPP support was no longer required to reach minimal pain levels

- This thesis is being prepared for publication in a peer-reviewed journal

Evans, JM et al: Cardiovascular regulation during body unweighting by lower body positive pressure. Aviat Space Environ. Med. 2013, 84:1140-1146

- Investigated specific role of sympathetic control of cardiovascular function with lower body positive pressure


- Authors also measured pressure in mmHg at various body weight reductions for each subject. Pressure required will of course vary by subject’s weight and body mass, but roughly 30-40mm Hg pressure is needed for a 20% reduction in body weight.

- Fluid shifts from the legs to the abdomen and thorax with lower body positive pressure support. There was a slight increase in systolic blood pressure, no change in diastolic blood pressure, slight decrease in heart rate, all of which can be expected with the fluid shift.


- Removal of up to 20% bodyweight did not alter metabolic responses (VO2, HR, RER) during jogging. Prescribed cardiovascular training intensities can be achieved with a reduction in ground reaction forces in individuals who are overweight, obese or injured.

• The American College of Sports Medicine established equations used to predict VO2 for individuals walking or running at 100% body weight.

• The current study was designed to measure actual VO2 with body weight support on the AlterG at 100%, 90%, and 80% body weight.

• Measured VO2 with body weight support was significantly less than predicted for the 100% body weight condition, thus the ACSM equations cannot be used accurately on the AlterG.


• VO2 is maintained on the AlterG at speeds relevant to the elite runner. Previous studies on other treadmills questioned whether the elite runner could maintain VO2 with body weight support.

• Overspeed running mechanics are maintained.

• The AlterG offers the additional advantage over conventional training of reduced joint impact forces, theoretically preserving joint health over the long-term.


• The authors performed a 4 week prospective high intensity interval training program to assess improvements in running speed in trained high level runners.

• Participants were randomized to standard treadmill training vs 10% body weight support on the AlterG Treadmill.

• The 4 week HIIT protocol improved field performance, VO2 max, and submaximal heart rate.

• The authors state that AlterG HIIT is an effective method to improve running performance while reducing potentially injurious joint loading seen in standard full body weight HIIT.


• For walking up to 3.5mph: a 25% reduction in body weight requires approximately a 0.5 mph increase in walking speed for the same VO2.

• For running up to 9.0mph: a 25% reduction in body weight requires a 3mph increase in running speed for the same VO2.

• Relationship between HR and VO2 is not changed with support, thus runners who use HR as an indicator of training intensity can continue to do so on AlterG with weight support.


• Compared lower body positive pressure on AlterG Anti-Gravity Treadmill to head-up tilt for fluid volume shifts, cardiac output, blood pressure, heart rate.
• LBPP consistently shifts fluid from lower extremities to the thorax
• Cardiac output maintained, systolic blood pressure increases, stroke volume decreases
• LBPP advantageous over HIT if dynamic activity is necessary


• LBPPS treadmill training resulted in significant changes in the walking spatiotemporal kinematics and balance. After training the children had a faster preferred walking speed, spent less time in double support, more time in single support, had improved overall balance, and improved walking balance. Furthermore, there was a trend for increased strength of the lower extremity anti-gravity musculature.


• LBPPS treadmill training utilizing the AlterG is an effective treatment for improving the walking biomechanics and balance of children with CP. The AlterG offered other advantages over conventionally used harness systems and was very well accepted by the children.


• 10 healthy women, average age 70, participated in an 8 week AlterG exercise study
• All women in this series demonstrated improvements in balance, mobility, and lower extremity strength
• This study provides the foundation for follow-on studies focused on specific physical impairments


• The purpose of this study is to investigate how lower extremity muscles are influenced by body weight (BW) support during running at different speeds. Reducing BW leads to a reduction in muscle activity with no changes in muscle activity patterns.


• This technical note shows that there is less than 5% difference between predicted and actual unloading with the most commonly used body weight unloading percentages from 90% to 40%


• Measurement of VO2 in elite distance runners across a number of speeds and body weight support levels
• The results were consistent with prior research, which found that while running on an AlterG Anti-Gravity Treadmill, 1) metabolic cost significantly decreases with increasing levels of BWS, 2) metabolic cost significantly increases with increasing velocity, and 3) there is attenuation in the decrease in metabolic cost as BWS increases.
• Outcomes in this study are consistent with previous studies performed in non-elite runners

- Muscle activation in water is dependent on running style
- No difference in muscle activation of gastroc and tibialis anterior with any deep water running style vs. AlterG Anti-Gravity Treadmill
- No difference in muscle activation of rectus femoris in deep water running with high knee style and AlterG Anti-Gravity Treadmill


- EMG activity of rectus femoris, biceps femoris, gastrocnemius, and tibialis anterior
- Increased speed at any given body weight support level increased muscle activity for all groups
- Increased body weight support at any given speed decreased muscle activity of the rectus, gastroc, and tibialis anterior but had no significant effect on the biceps femoris


- Compared EMG activity of lower extremity muscles with deep water running and AlterG body weight support, as well as different running styles
- Showed no significant differences in rectus femoris and biceps femoris activity as long as stride frequency was equalized using cross country running style
- Showed increased rectus femoris activity in high knee running style in deep water running


- Evaluated stride rate and stride length with varying levels of AlterG body weight support in experienced runners

- With increasing support stride rate decreases and stride length increases
- Runners wishing to use AlterG training to translate to overground training may consider using a metronome on the AlterG to maintain stride rate


- The e-Knee study from Scripps Clinic La Jolla shows a direct correlation between knee joint vertical reaction force as a function of AlterG body weight support, treadmill speed, and incline. An equation relating these variables is provided by the authors.
- Jogging at 4.5mph with 50% body weight support provides the same vertical knee joint reaction force as walking with full body weight.
- Able to reduce ground reaction force for walking and running in proportion to the amount of unweighting
- AlterG body weight supported activity is placed within the context of other daily and sports activities previously studied by the authors.


- 12 week prospective non-randomized clinical trial
- Participants reported significant improvements in knee joint pain and function and demonstrated significant increases in thigh muscle strength.
- Significant reductions in acute knee pain during full weight bearing treadmill walking and required dramatically less LBPP support to walk pain free on the treadmill.
- Data suggest that an LBPP-supported low-load exercise regimen can be used to significantly diminish knee pain, enhance joint function, and increase thigh muscle strength, while safely promoting pain-free walking exercise in overweight patients with knee OA.

• Possible to achieve VO2max with body weight unloading
• Ground reaction forces reduced
• Significant increase in time to exhaustion with AlterG training
• Improves running economy


• Confirmed results from other studies demonstrating maintenance of normal muscle firing patterns with body weight support, except for reduced activity during push-off phase
• Also noted that muscle firing patterns revert to pre-exercise within 3 minutes of full reloading


• Individuals are able to perform closed chain walking and jogging early on in the postoperative period after Achilles tendon repair, maintaining a training effect in spite of partial weight bearing
• Authors proposed 85% BW as a benchmark to return patients to unsupported training


• Observational biomechanics study evaluated specific loading across the foot using in-shoe sensors
• Foot loading patterns were preserved at 80% to 100% body weight, but patterns shifted towards forefoot loading at increasing levels of body weight support


• Study evaluated pain responses to exercise for individuals with knee osteoarthritis on AlterG Anti-Gravity Treadmill
• Pain relief consistently achieved; on average required 12% body weight support


• Observational study of cardiovascular responses to AlterG exercise after unilateral total knee arthroplasty
• Demonstrated cardiovascular safety of AlterG exercise in this population
• Older adults with TKA demonstrated lower heart rate, systolic blood pressure, oxygen consumption and minute ventilation levels when walking under lower body positive pressure conditions.
• AlterG exercise enabled TKA patients to walk at faster speeds and/or to tolerate greater incline which may be important in the rehabilitation of these patients


- Investigated cardiovascular responses to lower body positive pressure for Mars and Moon gravities
- Cardiovascular responses were predictable and consistent for normovolemic and hypovolemic subjects
- AlterG Anti-Gravity Treadmill is a suitable modality to study cardiovascular effects in reduced gravity

Premarketing Studies and Technology Validation Prove Safety and Effectiveness of the AlterG Anti-Gravity Treadmill®

The concept of using advanced differential air pressure technology for weight support was originally conceived by Dr. Robert Whalen and Dr. Alan Hargens while they were studying the biomechanics of exercise in space as part of an effort to design effective exercise regimens for NASA’s astronauts. These early studies specifically using patented AlterG technology show that the machine is:

- Capable of accurate and precise unweighting across a variety of body types
- Comfortable and safe for most individuals, including those with stable cardiac, vascular, and respiratory disorders
- Able to reduce ground reaction force for walking and running in proportion to the amount of unweighting
- Effective in reducing pain in individuals whose lower extremity pain is related to full weight bearing ambulation or exercise


Submitted Studies Under Editorial Review:


Kurz, M., Deffeyes, J.E., Karst, G.M., Stuberg, W.A.: Influence of Lower Body Pressure Support on the Walking Patterns of Healthy Children and Adults. Accepted for publication to Journal of Applied Biomechanics, In Press
The lower extremity joint angles and activity of the lower extremity anti-gravity muscles of children did not differ from those of adults.

Lower body positive pressure support resulted in reduced activation of the anti-gravity musculature, and reduced range of motion of the knee and ankle joints.

The magnitude of the changes in the lower extremity joint motion and anti-gravity muscle activity was dependent upon an interaction between body weight support and walking speed. Generally speaking, for any given amount of body weight support, knee and ankle joint ranges of motion are smaller with slower walking speeds.

Amount of body weight support is used as a target for the patient's body weight reduction.

Deffeyes, J., Stuberg, W., Karst, G., Kurz, M.: Coactivation of Lower Leg Muscles During Body Weight Supported Treadmill Walking Decreases With Age In Adolescents. Accepted for publication to Human Movement Science, In Press

It unknown how use of a body weight supported treadmill device affects coactivation, which is important as these devices are commonly used for therapy and rehabilitation of individuals with musculoskeletal or neurological disorders.

Coactivation was found to be higher in adolescents than in adults, but only for the lower leg muscles. These results show the importance of using age-matched controls in adolescent studies of pathologic agonist/antagonist coactivation of lower leg muscles during walking.

Microfracture surgery requires a period of non-weightbearing (NWB) or toe-touch weightbearing (TTWB) for several weeks, followed by progressive weightbearing. Phases are outlined in this rehabilitation protocol. Beginning in approximately week number 4 postoperative (termed the Transition Phase by the authors), and continuing on until full functional recovery, the AlterG may be used to provide safe protected increases in weightbearing, which promotes improvements in muscle control and function. This is an outstanding review of the science behind microfracture rehabilitation.

Published Review Of Current Anterior Cruciate Ligament Reconstruction Rehabilitation Principles Includes The AlterG Anti-Gravity Treadmill®:


The authors present state-of-the-art techniques in rehabilitation after anterior cruciate ligament reconstruction. AlterG can be used very effectively in the early phases of rehabilitation to relieve pain, promote proper closed kinetic chain gait mechanics, improve motion, and promote independent activity.

Published Review On Knee Microfracture Postoperative Rehabilitation Shows Clinical Effectiveness Of The AlterG Anti-Gravity Treadmill®:


Presentations at National or International Meetings:

Athletic Performance

This study showed the following key points:

- Experienced runners at high speeds can achieve VO2 max with reduced body weight by increasing incline
- Body weight support was accompanied by reduced ground reaction force
- The economy of running was significantly improved as shown by a large increase in time to exhaustion (642 seconds) compared to full body weight running (477 seconds)
- Authors conclude that AlterG training is a relevant tool for healthy runners to reduce joint loading while maintaining or even improving the aerobic stimulus


- AlterG running with body weight support consistently showed longer times needed to achieve the same level of blood lactate level rise as with full body weight running

Rickert, BJ, Moran, MF, Greer, BK: Effect of Weight Support on Tibial Accelerations During a Lower-Body Positive Pressure Treadmill Cadence-Controlled Run

- Presented at ACSM 2014
- Tibial shock reduces with each 10% reduction in body weight while running on the AlterG Anti-Gravity Treadmill
- AlterG Anti-Gravity Treadmill can be a useful modality for runners recovering from tibial stress fracture

Basic Science: Biomechanics


- This study has been accepted for publication, see Hoffman, M.D. and Donaghe, H.E.: Exercise responses during partial body-weight supported treadmill walking and running in healthy individuals. Arch Phys Med & Rehab, 2011


- This study showed that maintained horizontal ground reaction forces are most likely responsible for the normal gait patterns seen with all levels of weight support.
- Vertical ground reaction forces are decreased with weight support but horizontal ground reaction forces are maintained, thus leading to normal gait patterns at all levels of support
- Joint loads are reduced at the knee and ankle, with knee reduced slightly more than the ankle (data estimated)
- Surface EMG activity reveals reduced muscle contraction amplitudes with weight support, quadriceps and gastroc/soleus are reduced more than hamstrings and tibialis anterior

Basic Science: Cardiovascular


Liebenberg, J., Scharf, J., Forrest, D., Dufek, J., Mercer, J.A.: Muscle Activity During Running at Reduced Body Weight (University of Nevada, Las Vegas) Presented at Southwest Meeting of ACSM, San Diego, October 2009

- Ground reaction forces are reduced for running with weight support
- Running mechanics are maintained with weight support
- Surface EMG activity reveals normal muscle firing patterns during running
- Muscle EMG peak amplitude is decreased with reduced body weight but can be maintained with increased running speed
- Pressure inside the AlterG does not change muscle firing patterns by itself


- Gastroc/soleus and tibialis anterior activity are unchanged with deep water running and AlterG
- Rectus femoris activity is higher with high-knee running in deep water but is not different from AlterG with cross-country running style.


- Body weight support causes runners to increase stride length and decrease stride frequency. Author suggests that runners in training consider using a metronome to maintain appropriate cadence as support increases.

Neurologic: Parkinson's Disease


- Significant gains were made in mobility, bilateral lower extremity strength, fall reduction and depression


- Presenting at Gait and Clinical Movement Analysis Society 2014
- Single 10 minute training session for Parkinson's patients on AlterG treadmill
- Performed as proof of concept prior to prospective training study
- Improvements seen in step length, cadence, and velocity

Orthopaedics: Achilles Tendon


- Presented at American College of Foot and Ankle Surgeons Annual Conference, Las Vegas, Nevada, February 2010

- Individuals are able to perform closed chain walking and jogging early on in the postoperative period after Achilles tendon repair, maintaining a training effect in spite of partial weight bearing
- Authors proposed 85% BW as a benchmark to return patients to unsupported training

Orthopaedics: Total Knee Arthroplasty Rehabilitation


- Prospective pilot study of 29 patients undergoing total knee arthroplasty
- Demonstrated safety and efficacy, with improvements in KOOS, TUG, and pain scores
- Foundation for large scale randomized clinical trial which is now underway
Overweight/Obesity:

- 25 obese adults with moderate knee osteoarthritis pain participated in a 12 week AlterG exercise program, twice a week for 25 minutes each session
- A mean level of 17.9% LBPP (i.e. 16.1 kg) was effective in reducing knee joint pain during initial walking
- Strength levels for the quadriceps and hamstring muscle groups increased significantly following the 12-week program
- Significant improvements were found in all KOOS subscales, indicating a reduction in knee OA symptoms and improvement in functional abilities
- Knee pain during walking significantly decreased, with some participants experiencing complete pain relief. Pain was reduced to a point where the addition of LBPP support was no longer required to reach minimal pain levels
- This thesis is being prepared for publication in a peer-reviewed journal


- AlterG pretraining showed significant improvements over traditional exercise in weight loss, fat loss, free fat mass, and body fat
- There is an overall significant effect for weight loss and fat loss irrespective of diet


- Patients with moderate (Grade 3) osteoarthritis and moderate obesity exercised on the AlterG Anti-Gravity Treadmill.
- Percentage of body weight support required to reliably produce pain relief was recorded.
- Patients required on average 12.3% body weight support to achieve pain relief.
- The amount of body weight support is used as a target for the patient’s body weight reduction.

Yearwood, L, Kral, JG: Metabolic Study Of Weight-Supported Treadmill Exercise in Young Caribbean-Black Obese Women In Brooklyn

- Presented at The Obesity Society, 2013
- Proof of concept study prior to prospective training study
- Demonstrated high compliance with exercise regimen in a high-risk population
- Evaluating metabolic effects of exercise in the obese
- Improved fasting and 2-hour plasma glucose after training sessions

Urology:

- 16 healthy individuals between ages 23-69 were studied using a VAS for urinary urgency during and exercise session on the AlterG.
- Body weight was incrementally decreased to 80%, and then increased back up to 100%
• 100% of subjects experienced urinary urgency with weight support
• 87.5% continued to have some urgency as weight support was removed

Conclusions:
• Authors recommend that all individuals void prior to using the AlterG
• Individuals with a history of bladder incontinence should exercise with a pad or diaper
• Authors speculate that AlterG training might be beneficial in training for better bladder control for individuals with a history of stress incontinence or urgency

Ongoing Studies:

Orthopaedics: Total Knee Arthroplasty
• A multicenter prospective randomized trial is commencing comparing AlterG rehabilitation with conventional therapy. This trial will enroll approximately 360 patients and will continue enrollment and data collection through the end of 2015.

Orthopaedics: Usage of Tibial Shock as a Predictor of Tibial Stress Fracture
• Investigators are using surface mounted tibial accelerometers to measure tibial shock, a validated predictor of tibial stress fracture. The AlterG is used to modify tibial shock to safe levels and thus minimizing risk of stress fracture.

Geriatric Conditioning: Effects of AlterG Treadmill Training on Balance, Mobility, and Lower Extremity Strength of Physically Impaired Community-Dwelling Adults
• Certain geriatric conditions result in a loss of independent ambulation, loss of strength, and increased fall risk. The second part of a planned multi-part investigation is a pilot study of strength and functional gains in older adults with specific physical impairments.

Neurologic
• Parkinson's Disease Randomized Clinical Trial – University of California, San Francisco
  • Does exercise on the AlterG improve functional indices, fall risk, and quality of life for patients with mild to moderate Parkinson’s Disease?
  • Does exercise on the AlterG improve functional indices, fall risk, and quality of life for patients with acute and chronic stroke?
• Parkinson's Disease Randomized Clinical Trial – University of Copenhagen, Denmark
• Muscular Dystrophy Training Study- University of Copenhagen, Denmark
• Multiple Sclerosis Randomized Clinical Trial- Tel Aviv, Israel

Obesity
• The overweight individual must deal with a number of issues that make exercise very difficult, such as poor cardiovascular conditioning at baseline, and presence of painful lower extremity joints due to osteoarthritis. Modalities such as aquatic therapy, bicycle, and full body weight walking are commonly recommended, in addition to nutritional modification and lifestyle changes. It is believed that the AlterG enables overweight individuals to exercise in ways they could not otherwise.
  • The ability to "feel what their body is like at a lower weight" is highly motivational
  • Unweighting allows them to exercise in a pain free range
  • Metabolic demand can be maintained even with unweighting by increasing walking speed
  • Measuring metabolic markers of health: glucose tolerance, plasma lipids, liver fat, muscle fat

Cardiac Stress Testing
• In urban U.S. cardiac testing centers it is estimated that about 50% of individuals referred for testing are clinically obese, and a substantial portion of those patients are unable to perform standard modified Bruce protocol cardiac stress testing
Current methods call for those patients unable to do standard testing to go through pharmacologic testing, however, it is widely accepted that pharmacologic testing is not as accurate or reliable as exercise-based testing. The hypothesis in this large randomized study is that patients scheduled for pharmacologic testing may be able to perform exercise-based testing on the AlterG Treadmill, enabling the cardiologist to have a better measurement of cardiac risk. Enrollment is underway, with testing expected to be completed in mid-2016.

**Fully-Referenced Case Reports:**


- A 57 y.o. male presented with persistent right medial knee pain. An active runner since 13 y.o., he was running 60 miles per week and 3 marathons annually. The patient could not run without severe pain, despite avoiding impact activity for 2 months with NSAIDs and traditional physical therapy. The patient underwent a 14 week training program on the AlterG Anti-Gravity Treadmill beginning at 30% body weight and progressing to full body weight. After training the patient’s pain was negligible, with results maintained to the follow up conclusion at 4 months. He successfully completed a marathon at 4 months after training.


- Case study of 81 year old man, 14 months post stroke with poor ambulation and balance
- Trained 4x per week for 4 weeks
- Improved walking speed, stride length, walking kinematics, and reduced fall risk


- A highly motivated physician/runner successfully used AlterG training within one week of an acute lumbar disc herniation when he was experiencing considerable pain with unsupported walking and lower extremity weakness. He continued its use until he adequately improved to allow return to his regular over-ground running program. This case demonstrates how partial body-weight support can allow aggressive running training early after a lumbar disc injury when normal impact forces cannot be tolerated and when leg weakness is a limitation.


- This case study examined the effects of a 14 wk walking program on one extremely obese (BMI 69.2) Caucasian 44 year-old female utilizing the AlterG Anti-Gravity Treadmill. At the conclusion of the study, exercise tolerance time increased 3-fold while caloric expenditure increased 10-fold without an increase in heart rate or perceived pain in her lower extremities. The participant demonstrated a 2.75% weight reduction, a decrease in upper body circumference measurements and lower extremity edema of her knees and ankles, and a 9.7% decrease in fasting blood glucose (102mg/dL). Overall, the AlterG Anti-Gravity Treadmill enabled the participant to exercise and walk pain-free at a distance, intensity level, and speed that she could not accomplish while walking on her own.


- Published case report documents the training regimen for an elite level Division 1 runner with pelvic stress fracture
- The runner was able to maintain running form and cardiovascular fitness while training at reduced body weight on AlterG during the healing phase of her stress fracture
- At 10 weeks after injury onset the runner was able to compete pain free in the NCAA 10k championships.
- Authors believe that AlterG training allowed this runner to return to competition in a much faster fashion than she would have with conventional rehabilitation.