

1 **Muscle short-range stiffness can be used to**
2 **estimate the endpoint stiffness of the human arm**

3
4 Xiao Hu^{1,2}, Wendy M. Murray^{1,2,3,4}, Eric J. Perreault^{1,2,3}

5
6 ¹Dept. of Biomedical Engineering, Northwestern University, Evanston, IL, USA

7 ²Sensory Motor Performance Program, Rehabilitation Institute of Chicago, Chicago, IL,
8 USA

9 ³Dept. of Physical Medicine and Rehabilitation, Northwestern University, Chicago, IL, USA

10 ⁴Research Service, Edward Hines, Jr. VA Hospital, Hines, IL, USA

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13 **Running title:** Modeling endpoint stiffness of the human arm

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15 **Corresponding Author:**

16 Eric J. Perreault

17 Department of Biomedical Engineering

18 Department of Physical Medicine and Rehabilitation

19 Northwestern University

20 345. E. Superior St.

21 Chicago, IL, USA 60611

22 e-perreault@northwestern.edu

23 1.312.238.2226

24 1.312.238.2208 (fax)

29 **Abstract**

30 The mechanical properties of the human arm are regulated to maintain stability across many
31 tasks. The static mechanics of the arm can be characterized by estimates of endpoint stiffness,
32 considered especially relevant for the maintenance of posture. At a fixed posture, endpoint
33 stiffness can be regulated by changes in muscle activation, but which activation-dependent
34 muscle properties contribute to this global measure of limb mechanics remains unclear. We
35 evaluated the role of muscle properties in the regulation of endpoint stiffness by
36 incorporating scalable models of muscle stiffness into a three-dimensional musculoskeletal
37 model of the human arm. Two classes of muscle models were tested: one characterizing
38 short-range stiffness, and two estimating stiffness from the slope of the force-length curve.
39 All models were compared to previously collected experimental data describing how
40 endpoint stiffness varies with changes in voluntary force. Importantly, muscle properties
41 were not fit to the experimental data, but scaled only by the geometry of individual muscles
42 in the model. We found that force-dependent variations in endpoint stiffness were accurately
43 described by the short-range stiffness of active arm muscles. Over the wide range of
44 evaluated arm postures and voluntary forces, the musculoskeletal model incorporating
45 short-range stiffness accounted for $98\pm 2\%$, $91\pm 4\%$ and $82\pm 12\%$ of the variance in stiffness
46 orientation, shape and area, respectively, across all simulated subjects. In contrast, estimates
47 based on muscle force-length curves were less accurate in all measures, especially stiffness
48 area. These results suggest that muscle short-range stiffness is a major contributor to
49 endpoint stiffness of the human arm. Furthermore, the developed model provides an
50 important tool for assessing how the nervous system may regulate endpoint stiffness via
51 changes in muscle activation.

52

53 **Key words:** Muscle short-range stiffness, Endpoint stiffness, Musculoskeletal model

54

55

56 **Introduction**

57 We commonly use our hands to move and manipulate objects in different environments.
58 Many of these tasks tend to destabilize arm posture (Rancourt and Hogan 2001).
59 Nevertheless, they can be completed because the central nerve system (CNS) regulates the
60 mechanical properties of the arm to compensate for these instabilities, usually ensuring that
61 the coupled system of the arm and its environment remains stable so that posture can be
62 maintained (McIntyre et al. 1996). Understanding how this regulation occurs and the relative
63 contributions of the nervous system and the intrinsic biomechanics of the arm remains an
64 important problem in motor control.

65

66 Arm mechanics are typically quantified by applying controlled displacements, measuring the
67 corresponding forces, and characterizing the relation between the two using estimates of arm
68 impedance. The static component of impedance, known as stiffness, is thought to be
69 especially important during the maintenance of posture. Estimates of endpoint stiffness are
70 often used to summarize the mechanical properties of the whole arm at the endpoint, or point
71 of contact with the environment (Mussa-Ivaldi et al. 1985). Many physiological mechanisms
72 contribute to the forces measured in these experiments and to the corresponding estimates of
73 endpoint stiffness. Actively controlled mechanisms at a specific arm posture include the
74 intrinsic properties of the muscles within the arm, which are dependent on their steady state
75 or feedforward activation, and transient changes in muscle activation that may occur via
76 feedback pathways such as stretch reflexes or voluntary responses to the imposed
77 displacements. While numerous studies have characterized the behavioral characteristics of
78 endpoint stiffness (Burdet et al. 2001; Darainy et al. 2004; Franklin et al. 2003; Franklin et al.
79 2007; Gomi and Osu 1998; Perreault et al. 2001; Tsuji et al. 1995), and the feedback
80 responses that may modulate this stiffness (Krutky et al. 2010; Perreault et al. 2008), few

81 have directly assessed which muscle properties contribute most to the stiffness properties of
82 an entire limb. This knowledge is essential for understanding how changes in neural
83 activation alter limb stiffness or how impairments to muscular or neuromotor systems may
84 impact the ability to regulate stiffness in a contextually appropriate manner.

85

86 The intrinsic stiffness of individual muscles is undoubtedly a major contributor to the
87 endpoint stiffness of the human arm. However, there has been little consensus regarding how
88 muscle stiffness should be defined with respect to its contributions to the stiffness of an intact
89 limb. A common approach has been to consider the slope of the force-length curve as the only
90 activation-dependent stiffness component of muscle (Brown and Loeb 2000; Iqbal and Roy
91 2004; Stroeve 1999; Verdaasdonk et al. 2004). The slope of this curve may be scaled
92 uniformly with changes in muscle activation or non-uniformly to represent the increasing
93 length at which peak forces are generated for submaximal contractions (Rack and Westbury
94 1969). While the force-length curve describes the isometric force generated when a muscle is
95 activated at different lengths, it does not describe how muscle force changes when length is
96 changed (Joyce et al. 1969). For small rapid perturbations, the initial forces generated by a
97 muscle can be described in terms of its short-range stiffness (Rack and Westbury 1974),
98 which is thought to depend largely on the stiffness of the active cross-bridges acting in series
99 with the passive structures of the muscle (Morgan 1977). It has been suggested that the
100 short-range stiffness properties of muscle are a major factor in determining the stiffness of a
101 joint (Bunderson et al. 2008; Colebatch and McCloskey 1987; Grillner 1972; Hufschmidt
102 and Schwaller 1987; Joyce et al. 1974; Kirsch et al. 1994; Misiaszek 2006), but the
103 importance of short-range stiffness has not been evaluated directly, particularly in the context
104 of multijoint mechanics.

105

106 The primary objective of this work was to evaluate the hypothesis that the endpoint stiffness
107 of the human arm can be accurately described by the intrinsic short-range stiffness of its
108 active muscles, coupled to a realistic model of musculoskeletal geometry. This hypothesis
109 was evaluated by adding scalable models of short-range stiffness (Cui et al. 2008) to an
110 existing three-dimensional musculoskeletal model of the human upper limb (Holzbaur et al.
111 2005), and comparing the predictions of the resulting model to previously collected
112 experimental data (Cannon and Zahalak 1982; Perreault et al. 2001). The efficacy of this
113 model was compared to models that considered only the force-length properties of muscle.
114 Our results clearly demonstrate that intrinsic muscle properties can account for previously
115 reported variations in arm stiffness when short-range stiffness is considered, but not when
116 using muscle models that consider only force-length properties. These results clarify how
117 intrinsic muscle properties can contribute to the regulation of limb mechanics in the absence
118 of neural feedback. Furthermore, experimental deviations from the model predictions can be
119 used to identify situations in which neural control strategies beyond feedforward muscle
120 activation are required to regulate arm stiffness in a task-appropriate manner. Portions of this
121 work have been presented previously in abstract form (Hu et al. 2009a; Hu et al. 2009b).
122

123 **Methods**

124 *Modeling*

125 To evaluate the extent to which the endpoint stiffness produced during small, rapid
126 perturbations is dominated by the short-range stiffness of active muscles, we performed
127 simulations that coupled a musculoskeletal model of the upper limb with a scalable model of
128 muscle stiffness. This muscle model estimates the short-range stiffness of a given muscle
129 based on its geometry and active force (Cui et al. 2008). We compared these results with
130 simulations that combined the same musculoskeletal model with muscle stiffness estimated
131 using (i) the slope of the isometric force-length relationship during full activation (Zajac
132 1989), and (ii) the slope of the isometric force-length relationship, adjusted based on muscle
133 activation level to reflect the shift in optimal fiber length with activation (Lloyd and Besier
134 2003).

135

136 The musculoskeletal model of the upper limb implemented in our study was adapted from the
137 model described by Holzbaur *et al.* (2005). Our simulations incorporated kinematic
138 representations of the shoulder and elbow joints, and included a total of 37 muscle segments.
139 These segments corresponded to 9 shoulder muscles, separated into 15 segments; 14 elbow
140 muscles, represented by 19 segments; and 2 biarticular muscles, represented by 3 segments.
141 This model was used to obtain parameter values for optimal muscle fiber lengths, maximum
142 isometric muscle forces, tendon slack lengths, and muscle moment arms, as needed for our
143 simulations. Both the moment arms and the isometric force-generating capacity of the
144 muscles estimated using this model vary as a function of joint posture. The parameter values
145 in the musculoskeletal model describing the peak isometric forces for individual muscles
146 were scaled from their original values (which were based on anatomical data collected in
147 cadavers) using recent data describing both muscle volumes (Holzbaur et al. 2007b) and joint

148 strength (Holzbaur et al. 2007a) in the upper limb in the same healthy subjects. Similarly,
149 tendon slack length of the brachioradialis was decreased from the nominal value reported by
150 Holzbaur *et al.* (2005) to reflect recently reported intraoperative measurements (Murray et al.
151 2006). Finally, the flexion moment arm angle relationship of anterior deltoid was replaced by
152 the measurements reported by Kuechle *et al.* (1997), made in a posture more relevant to our
153 simulations; this change decreased the moment arm over the range of interest for this
154 manuscript.

155

156 Muscle short-range stiffness was estimated using the model developed by Cui et. al (2008),
157 for muscles in the cat hindlimb. The model assumes that the short-range stiffness of a
158 muscle-tendon unit, K , results from the stiffness of the muscle fibers, K^m , in series with the
159 stiffness of the tendon, K^t (Eq. 1).

$$K = \frac{K^m K^t}{(K^m + K^t)} \quad (1)$$

160 K^m is a function of muscle force (Eq. 2), F^m , optimal muscle fiber length at maximum
161 activation, l_0^m , and a dimensionless scaling constant $\gamma = 23.4$.

$$K^m = \frac{\gamma F^m}{l_0^m} \quad (2)$$

162

163 K^t was defined by the slope of the generic, dimensionless force-strain curve scaled for each
164 individual tendon (Zajac 1989). This is different than the scaling equation suggested by Cui
165 et al. (2008) since the geometric properties required for the Cui's tendon model were not
166 available for all of the muscles in our model. The impact of using a different tendon model
167 was assessed using the sensitivity analyses described below.

168

169 *Estimation of muscle forces*

170 Optimization was used to estimate the distribution of muscle forces for a specific set of joint
171 torques. The cost function for this analysis was the sum of the squared muscle forces,
172 expressed as a fraction of the maximum force for each muscle (Eq. 3) (Anderson and Pandy
173 2001; Crowninshield and Brand 1981). The problem was constrained such that 1) the
174 resulting muscle forces summed to the specified joint torques (Eq. 4), and 2) muscle forces
175 were positive and less than or equal to the maximum achievable forces at the current arm
176 posture (Eq. 5). In these equations, F_i^m is the actual force and F_{i0}^m is the posture-dependent
177 maximum isometric force for i th muscle respectively, r_{ij} is the posture-dependent moment
178 arm for the i th muscle relative to the j th joint, and TQ_j is the torque about the j th joint. The
179 summation over 37 elements corresponds to the number of muscle segments crossing the
180 elbow and shoulder in our musculoskeletal model. The same cost function has been shown to
181 work well in isometric force regulation tasks at arm postures similar to those used in the
182 present study (Van Bolhuis and Gielen 1999).

$$u = \min \sum_{i=1}^{37} \left(\frac{F_i^m}{F_{i0}^m} \right)^2 \quad (3)$$

$$TQ_j = \sum_{i=1}^{37} r_{ij} \times F_i^m \quad i = 1, \dots, 37; j = 1, 2 \quad (4)$$

$$0 \leq F_i^m \leq F_{i0}^m \quad (5)$$

183

184 *Model-based estimation of arm stiffness*

185 Once muscle forces were estimated, we computed the corresponding joint and endpoint
186 stiffnesses. The estimated force for each muscle (F_i^m) was used to calculate the
187 corresponding short-range stiffness of the muscle-tendon unit, K_i , using Eqs. 1 and 2. Joint

188 stiffness (K^j) was calculated from muscle-tendon stiffness by considering the kinematic
189 relationship between changes in joint angles and changes in muscle-tendon length (Eq. 6)
190 (McIntyre et al. 1996).

$$K^j = J^T \bar{K} J + \frac{\partial J^T}{\partial \theta} \bar{F}^m \quad (6)$$

191
192 where θ is a vector describing the joint angles, J is the Jacobian matrix relating changes in
193 muscle joint angles to changes in muscle length (it contains the moment arms of the muscles
194 about the shoulder and elbow joints at the specified posture), \bar{K} is a diagonal matrix in
195 which the non-zero elements represent the stiffness for each muscle in the model, and \bar{F}^m is
196 the vector of muscle forces. The second term in the equation accounts for how angle
197 dependent changes in muscle moment arms influence joint stiffness.

198
199 As described previously (McIntyre et al. 1996), endpoint stiffness (K^e) was computed from
200 joint stiffness by considering the Jacobian (G) relating changes in joint angles to changes in
201 endpoint displacement (Eq. 7).

$$K^e = (G^{-1})^T \left[K^j - \frac{\partial G^T}{\partial \theta} F^{end} \right] G^{-1} \quad (7)$$

202
203 where F^{end} is the vector of endpoint forces.

204
205 *Simulated experiments*

206 The proposed model was used to simulate the endpoint stiffness measurements made in a
207 previously published study (Perreault et al. 2001). Endpoint stiffness can be visualized as an

208 ellipse (Mussa-Ivaldi et al. 1985). Such representations typically are quantified by area (a
209 measure of magnitude), orientation (the direction of maximal endpoint stiffness), and shape
210 (a measure of stiffness anisotropy). These parameters were computed as described previously
211 (Gomi and Osu 1998) and used to compare the model-based estimates of endpoint stiffness to
212 those measured experimentally.

213

214 The experimental measurements involved estimating endpoint stiffness as subjects exerted
215 constant levels of endpoint force against a rigid manipulator. All measurements were made in
216 the horizontal plane with a shoulder abduction angle of 90° and are described in detail in the
217 original publication (Perreault et al. 2001). In summary, the subjects' hands were positioned
218 either directly in front of the sternum (medial posture), in front of the shoulder (central
219 posture), or lateral to the shoulder (lateral posture). For the purpose of our endpoint stiffness
220 simulations, we selected data corresponding to all five subjects tested in the previous study.
221 We simulated the endpoint stiffness of these subjects at four endpoint force magnitudes,
222 corresponding to 7.5%, 15%, 22.5%, and 30% of the subjects' maximum voluntary
223 contractions. These forces were oriented along one of four directions ($\pm X$, lateral and medial;
224 and $\pm Y$, anterior and posterior). Using the model, joint torques (TQ) were calculated from the
225 measured endpoint forces (F^{end}) using the standard relation shown in Eq.8.

$$TQ = G^T F^{end} \quad (8)$$

226

227 Given these joint torques, a model-based estimate of endpoint stiffness could be obtained by
228 solving Equations 1-7, as described above. Experimental estimates made under passive
229 conditions were used to define the passive properties of the joints within the model.

230

231 We also compared model-based estimates of elbow stiffness to those obtained from the

232 multi-joint experimental study described above and to those measured in a previously
233 published single-joint experiment (Cannon and Zahalak 1982). For these estimates, the
234 model was compared to the previously published group results to obtain estimates of the
235 expected experimental variability across subjects. All predictions were restricted to elbow
236 moments between -20 to 20 Nm, to remain within the range of previously reported
237 experimental results.

238

239 *Model comparisons*

240 As an alternative to characterizing muscle stiffness, K^m , by estimates of short-range stiffness,
241 we also estimated muscle stiffness as the slope of the force-length relationship, and then used
242 Eq. 1 to compute the total stiffness of the muscle-tendon unit. Tendon stiffness was kept the
243 same for both methods. The force-length relationship implemented in SIMM (Delp and Loan
244 2000) was used for muscle stiffness estimation. It uses a force-length relationship defined by
245 a dimensionless curve (Delp and Loan 2000; Zajac 1989). The slope of the curve, scaled by
246 the muscle activation level, was defined as the muscle fiber stiffness. The activation level for
247 a given muscle was specified by the force in the muscle that resulted from the optimization,
248 normalized by the maximum isometric force the muscle could produce at the arm posture of
249 interest, as defined by the musculoskeletal model.

250

251 It is well known that the peak of the force-length curve for a muscle shifts to longer muscle
252 lengths at submaximal levels of activation (Rack and Westbury 1969; Roszek et al. 1994). To
253 take this characteristic into account, the following relationship developed by Lloyd and
254 Besier (2003) was also evaluated in this study:

$$l_o^m(t) = l_o^m \left[\lambda(1 - a(t)) + 1 \right] \quad (9)$$

255 where λ is the percentage change in optimal fiber length, $a(t)$ the activation at time t , $l_o^m(t)$

256 the optimal fiber length at time t and activation $a(t)$. λ was chosen as 0.15, which means the
257 optimal fiber length is 15% longer at zero activation (Lloyd and Besier 2003).

258

259 The activation $a(t)$ in Eq. 9 was determined in a different way from that used for
260 activation-independent force-length curve. First, for each muscle, the force resulting from the
261 optimization was used in a force balance equation to calculate the force in the tendon and,
262 therefore, the tendon length. Next, muscle fiber length was determined by subtracting the
263 calculated tendon length from the musculotendon length, which was explicitly defined by the
264 musculoskeletal model as a function of arm geometry. The combination of muscle force and
265 fiber length that resulted from this process uniquely determined activation.

266

267 *Sensitivity analysis*

268 Due to the unavoidable variability in physiologic parameters, Monte Carlo analyses (Hughes
269 and An 1997; Santos and Valero-Cuevas 2006) were conducted to evaluate the sensitivity of
270 our model-based estimates of endpoint stiffness to four types of model parameters: muscle
271 moment arms, tendon stiffness, joint angles, and the maximum isometric force of each
272 muscle. This analysis was done at the maximum endpoint forces measured in the
273 experimental study (30% MVC) along each of the four voluntary force directions ($\pm X$ and
274 $\pm Y$). For each set of simulations, model parameters were selected from a normal distribution
275 centered about the nominal parameter values defined by our model with a standard deviation
276 that was equal to the plausible range over which these parameters could be expected to vary
277 across different individuals, as defined by experimental data reported in the literature.
278 Standard deviations for tendon stiffnesses and muscle moment arms were set to 25% and
279 20% of the nominal parameter values, respectively (Murray et al. 2002; Zajac 1989).
280 Standard deviations for joint angles were set to 4 degrees, the accuracy with which joint

281 posture can be measured with a goniometer (Fish and Wingate 1985; Grohmann 1983).

282

283 The plausible range of peak muscle forces was estimated by typical variations in muscle
284 volume. The maximum force a muscle can produce is determined by its physiological
285 cross-sectional area (PCSA). PCSA is a measure of the muscle's total volume, normalized by
286 fiber length and adjusted by pennation angle so that the maximum isometric force-generating
287 capability of muscles with different lengths and orientations of fibers can be compared
288 directly, based only on anatomical measurements (Spector et al. 1980). When comparing the
289 same muscle (i.e., the triceps brachii from a small female to the triceps brachii of a large
290 male), differences in muscle volume dominate inter-subject variability. For example, the
291 relative variance (standard deviation/mean) of triceps volume was 47% in a study of 10
292 healthy subjects spanning a large size range (Holzbaur et al. 2007b). In contrast, optimal
293 fascicle length in triceps long head varied by only 17% in a cadaver study that included a
294 comparable range of specimen sizes (Murray et al. 2000). Total muscle volume in the upper
295 limb varied threefold across young healthy subjects, while volume fraction (defined as
296 individual muscle volume/total muscle volume) had a standard deviation of approximately
297 20 percent on average (Holzbaur et al. 2007b). Variation in volume fraction was used to
298 assess the sensitivity of our stiffness estimates to the uncertainty in our parameters defining
299 relative muscle strength within a given subject. Changes in absolute strength across subjects
300 were assessed separately, as described below.

301

302 The influence of variability in moment arms, tendon stiffness, joint angles, and muscle
303 volume fraction on our results was assessed independently. Three hundred simulations were
304 performed per set, for a total of 1,200 simulations (4 parameter types x 300 individual
305 simulations). In each individual simulation, the parameter of interest was selected randomly

306 for each muscle (or joint for simulations that explored variability in joint posture).

307

308 The results of these simulations were summarized by the standard deviation of the endpoint
309 stiffness characteristics described previously: area, orientation and shape. The sensitivity of
310 each model output to a given parameter was reported as the standard deviation of the output
311 across the 300 Monte Carlo simulations performed for each parameter. The standard
312 deviations of estimated stiffness area and shape were normalized by their nominal values.
313 The standard deviation of the estimated endpoint stiffness orientation, however, was
314 described in absolute units since the nominal values depend on the defined coordinate system
315 orientation and are not meaningful for these purposes.

316

317 The isometric strength of our model is based on average data describing young, healthy male
318 subjects (Holzbaur et al. 2007a). To examine the influence of variations in absolute strength
319 on our results, we scaled the muscle volumes in the nominal model (total muscle volume =
320 3600.6 cm^3) to reflect 3 sets of subject-specific data reported in the literature (Holzbaur et al.
321 2007b). (smallest female subject, total muscle volume = 1426.9 cm^3 ; smallest male subject,
322 total muscle volume = 2954.8 cm^3 ; and largest male subject, total muscle volume = 4426.8
323 cm^3). These results are reported independently from the Monte Carlo analyses.

324

325 **Results**

326 *Model-based estimation of elbow stiffness*

327 The developed model characterized many important features of how elbow stiffness varied
328 with changes in elbow torque. The simulated elbow stiffness increased with increasing elbow
329 torque and was larger in flexion than in extension, as has been documented experimentally
330 (Figure 1). For all simulated subjects, the predictions of how elbow stiffness varied with
331 changes in elbow flexion torque fell within the 95% confidence intervals for the average data
332 reported in two experimental studies (Cannon and Zahalak 1982; Perreault et al. 2001). The
333 model-based estimates of elbow stiffness during flexion were at most $13\pm 2\%$ and $21\pm 3\%$
334 higher than the average experimental results reported by Cannon and Perreault, respectively.
335 Larger differences were found for the predictions of how elbow stiffness varied with changes
336 in elbow extension torque. For extension, the model-based estimates were lower than the
337 experimental results reported by Cannon and Perreault by up to $21\pm 1\%$ and $30\pm 1\%$,
338 respectively.

339

340 *Model-based estimation of endpoint stiffness*

341 The model-based estimates of endpoint stiffness were similar to the experimental results in
342 orientation, shape and area over the full range of tested forces and postures across all subjects.
343 Typical model estimates for a single subject (No.4) is shown in Figure 2. On average, the
344 model accounted for $98\pm 2\%$ of the variation in stiffness orientation across all tested
345 conditions. Over the same range of conditions, the model accounted for an average of $91\pm 4\%$
346 and $82\pm 12\%$ of the variability in stiffness shape and area, respectively (Table 1).

347

348 *Stiffness estimation from the force-length relationship*

349 Model-based stiffness estimates based on the slope of the force-length curve dramatically

350 underestimated the magnitude of joint and endpoint stiffness. For elbow joint stiffness,
351 estimations from the force-length relationship were much lower than the 95% confidence
352 intervals reported in both experimental studies (Cannon and Zahalak 1982; Perreault et al.
353 2001) (Figure 3A, typical data of subject No. 4). The simulated elbow stiffness was up to
354 $82\pm 3\%$ and $82\pm 1\%$ lower than the experimental stiffness for both flexion and extension.
355 Small improvements were observed when using the modified force-length relationship
356 (Lloyd and Besier 2003). These improvements were largely for elbow flexion, although these
357 model-based estimates were still lower than the experimental estimates by more than $69\pm 8\%$.
358 No substantial improvements were observed for elbow extension, in which the model-based
359 estimates remained more than $79\pm 2\%$ lower than the experimental estimates.

360

361 The model-based estimates of endpoint stiffness obtained using the slope of the force-length
362 curve also were much smaller than the experimental estimates (Figure 3B, typical data of
363 subject No. 4). Specifically, the estimation only accounted for $13\pm 2\%$ of variance in the area
364 of stiffness ellipses at the central arm position, though it accounted for $84\pm 7\%$ and $57\pm 22\%$
365 of variance in the orientation and shape at the same arm position (Table 1). Applying the
366 coupled force-length relationship gave similar results, accounting for only $20\pm 6\%$ of
367 variance in the area. The area of ellipses represents the magnitude of endpoint stiffness, thus
368 the estimation from both types of force-length relationships greatly underestimated the
369 magnitude of the measured endpoint stiffness.

370

371 *Sensitivity analysis*

372 The model-based estimates of endpoint stiffness were relatively insensitive to changes of
373 model parameters. The maximum expected errors in the estimated endpoint stiffness
374 orientation, shape and area were 6.3 degrees, 22% and 23%, respectively (Table 2).

375 Model-based estimates of endpoint stiffness generally were most sensitive to errors in model
376 moment arms, volume fraction and joint angles. The model-based estimates were
377 approximately an order of magnitude less sensitive to errors in the estimated tendon
378 properties. Orientation was most sensitive to changes in joint angles, although even this
379 sensitivity was small, resulting in a maximum expected orientation error of less than 7
380 degrees. Endpoint stiffness shape and area were most sensitive to uncertainty in moment arm
381 values. Again, these sensitivities were small, resulting in expected errors less than 25% for
382 parameter errors at the maximum of the plausible range.

383

384 Changes in total muscle volume also did not substantially influence the model predictions.
385 From smallest (M1) to the largest (M5) male subjects (total muscle volume increased by
386 50%), the variation in the model output relative to the nominal parameter values was lower
387 than 2 deg for the orientation (Figure 4A) and 10% for the shape and the area (Figure 4B).
388 For the smallest female (F1), the variation in the model output was about 4 deg for endpoint
389 stiffness orientation (Figure 4A) and 15% for the shape and the area (Figure 4B). Though the
390 model worked best with male subjects, which the nominal parameter values represented, it
391 also gave reasonably good estimates for the smallest female subject (~4 deg variation in the
392 orientation and ~15% variation in the shape and the area), whose total muscle volume was
393 approximately only 40% of the average male subject represented by our model.

394

395 **Discussion**

396 The purpose of this study was to quantify the degree to which the endpoint stiffness of the
397 human arm could be attributed to the short-range stiffness of the active muscles within the
398 arm. This was accomplished by combining scalable models of short-range stiffness with a 3D
399 musculoskeletal model of the upper limb and evaluating how well this combined model
400 could explain previously collected experimental data. We found that the combined model
401 accurately described the variation in endpoint stiffness across a range of arm postures and
402 voluntary forces. Importantly, these predictions were made without fitting any model
403 parameters to the experimental data. In contrast, muscle stiffness estimates obtained from the
404 slope of the force-length curve were unable to describe the experimentally measured
405 variations in endpoint stiffness. These results suggest that the short-range stiffness of
406 muscles within the arm is a major contributor to endpoint stiffness. Furthermore, the model
407 we have developed provides an important tool for assessing how the nervous system can
408 regulate endpoint stiffness via changes in muscle co-contraction in addition the reciprocal
409 activation needed to generate the forces for a specific task.

410

411 *Muscle properties contributing to endpoint stiffness*

412 Our results suggest that short-range stiffness is a major contributor to the endpoint stiffness
413 of the human arm. It is important, however, to consider the experimental conditions used to
414 estimate endpoint stiffness. Isolated muscles exhibit short-range stiffness when stretched less
415 than 2-3% of the muscle fiber length or through movements covering approximately 3-4% of
416 the physiological range (Rack and Westbury 1974). The perturbations used in the
417 experiments we considered (Perreault et al. 2001) did not exceed this range. Those
418 perturbations had peak-to-peak amplitudes of 2 cm, which generated maximum movements
419 of approximately 3 degrees at the shoulder and 2 degrees at the elbow. These joint rotations

420 represent approximately only 2% of the range of motion for these joints within the horizontal
421 plane, well within the limits of short-range stiffness. It is likely that experiments
422 incorporating larger perturbations would not be so well characterized by our current model.
423 Indeed, it has been demonstrated that the estimated stiffness of single and multijoint systems
424 decreases with increasing perturbation amplitude (Kearney and Hunter 1982; Shadmehr et al.
425 1993), as would be expected when muscle exceed their region of short-range stiffness (Rack
426 and Westbury 1974). Beyond this range, more complex models that consider the dynamics of
427 cross-bridge cycling would likely be necessary.

428

429 Endpoint stiffness cannot be described by the slope of the force-length curve, even though
430 this has commonly been assumed to approximate the stiffness properties of individual
431 muscles. The force-length curve represents the isometric force that a muscle can generate at a
432 specific length, rather than the change in muscle force that occurs with rapid changes in
433 length, as are required to estimate stiffness. These two properties are known to differ (Joyce
434 et al. 1969). The force-length properties are determined largely by the overlap of the actin
435 and myosin filaments at different muscle lengths (Gordon et al. 1966), whereas the
436 short-range stiffness properties are thought to arise from the number of bound cross-bridges
437 (Morgan 1977; Rack and Westbury 1974). In contrast to the slope of the force-length curve,
438 short-range stiffness is length-independent and changes primarily with changes in muscle
439 force (Morgan 1977), which greatly simplifies the problem of estimating muscle
440 contributions to limb mechanics at different postures.

441

442 It is important to note that stiffness is only one component of muscle and limb impedance.
443 Inertial, viscous and higher order properties also contribute substantially to the mechanical
444 properties of a limb. Our model focuses only on limb stiffness, which has been proposed to

445 play an important role in the control of posture and movement (Hogan 1985), and to
446 contribute to limb stability during different tasks that destabilize limb posture (Burdet et al.
447 2001; Selen et al. 2009). We have demonstrated how muscle short-range stiffness contributes
448 to the limb stiffness of the entire limb. Identifying a similar relationship for limb viscosity
449 would allow for a more complete description of how intrinsic muscle properties contribute to
450 the mechanical properties of a limb in the absence of changes in muscle activation resulting
451 from neural control.

452

453 *Influence of muscle activation on estimates of endpoint stiffness*

454 Short-range stiffness scales with muscle force and the accuracy of our endpoint stiffness
455 model depends upon the accuracy with which individual muscle forces can be estimated. Due
456 to the redundant nature of the musculoskeletal system, we used optimization to estimate the
457 individual muscle forces contributing to the endpoint forces measured during the
458 experimental studies. We selected a common cost function that minimizes the relative
459 activation of all muscles (Anderson and Pandy 2001; Crowninshield and Brand 1981) and
460 which has been shown to work well during isometric the force regulation tasks (Van Bolhuis
461 and Gielen 1999) relevant to our study. Such a cost function, however, does not predict
462 co-contraction of antagonistic muscles (Collins 1995), and is certain to be inadequate in tasks
463 that require co-contraction, thereby altering limb stiffness without corresponding changes in
464 net joint torque (Gomi and Osu 1998; Milner et al. 1995). These limitations may have
465 contributed to the low values of elbow stiffness predicted by our model during extension
466 tasks. Nevertheless, the majority of our predictions were surprisingly accurate given that our
467 model was not fit to the experimental data. This is likely due to the presence of minimal
468 co-contraction in the experiments we attempted to replicate in simulation. For tasks with
469 substantial co-contraction, different methods will be needed for estimating individual muscle

470 forces, such as EMG assisted optimization (Cholewicki and McGill 1994).

471

472 *Sensitivity of model predictions to parameter errors*

473 Our predictions of endpoint stiffness were robust with respect to changes in model
474 parameters that were within the range of plausible variations. Endpoint stiffness predictions
475 were most sensitive to changes in model geometry, such as moment arms and joint angles,
476 emphasizing the need to use realistic musculoskeletal models when assessing the
477 contributions of muscle properties to endpoint stiffness. Our model was not sensitive to
478 changes in total muscle volume and was moderately sensitive to the volume fraction of
479 individual muscles. The latter sensitivity is likely due to the optimization algorithm used to
480 estimate muscle forces. Crowninshield and Brand (1981) noted that the optimization
481 algorithm we employed tended to allocate more force to stronger muscles. This redistribution
482 would alter the relative contributions of synergistic muscles to the net joint torques and also
483 stiffness. This redistribution of synergistic forces would affect limb stiffness only for muscles
484 with different geometric properties, such as fiber lengths (Eq. 2) or moment arms (Eq. 6).

485

486 Model predictions were least sensitive to changes in tendon stiffness. This is likely due to the
487 fact that short-range stiffness is dominated by muscle stiffness at low activation levels (Cui et
488 al. 2007), and that the maximum endpoint forces assessed in this study never exceeded 30%
489 of the maximum strength. Tendon stiffness may play a more important role at higher force
490 levels and for muscles with relatively long tendons, such as those in the distal parts of the
491 upper and lower limbs. In those cases, our assumption of uniform material properties for all
492 tendons, which is known to be incorrect (Bennett et al. 1986; Cui et al. 2009; Zajac 1989),
493 may lead to larger prediction errors.

494

495 *Feedback contributions to endpoint stiffness*

496 Our model predicts how steady-state changes in muscle activation, such as those usually
497 attributable to voluntary feedforward motor commands, contribute to changes in endpoint
498 stiffness. The model does not explicitly represent contributions from feedback pathways. As
499 a result, it may fail to characterize endpoint stiffness estimated using protocols in which
500 transient feedback responses to an applied perturbation contribute substantially to the net
501 endpoint force. The modeled experiments (Perreault et al. 2001) used continuous stochastic
502 perturbations to estimate endpoint stiffness. The fact that our model accurately described the
503 stiffness estimated in those experiments suggests either that feedback contributions were
504 small, as has been reported previously for perturbations with a high average velocity
505 (Kearney et al. 1997), or that the muscle contractions were largely fused. During fused
506 contractions, feedback would largely serve to increase the tonic force level.

507

508 Feedback responses to transient perturbations of endpoint position can be large (Krutky et al.
509 2010; Perreault et al. 2008), and protocols that use transient perturbations to estimate
510 endpoint stiffness (Burdet et al. 2001; Darainy et al. 2004; Franklin et al. 2007) may not be
511 well represented by our model. Deviations between our model predictions and stiffness
512 estimates made using transient perturbations may be useful for beginning to assess reflex
513 contributions to the regulation of endpoint stiffness.

514

515 *Comparison with other models of endpoint stiffness*

516 Due to its importance in understanding how the nervous system regulates the mechanical
517 properties of the arm, there have been numerous attempts to develop models of endpoint
518 stiffness. While each has contributed to our understanding of stiffness regulation, we are
519 unaware of any that have incorporated 3D musculoskeletal geometry or that have directly

520 assessed which muscle properties are most relevant to stiffness regulation. Many models
521 have considered stiffness regulation only at the joint level (Flash and Mussa-Ivaldi 1990;
522 Gomi and Osu 1998; Tee et al. 2004). Those models that have directly incorporated muscles
523 (Osu and Gomi 1999; Shin et al. 2009; Tee et al. 2010), have considered only a reduced
524 muscle set and constant moment arms, at times selected for computational simplicity or to
525 best fit the experimental data. While these assumptions have been sufficient for the intended
526 purposes, they may not readily allow for generalization to novel situations, especially given
527 our finding that stiffness estimates are most sensitive to the geometric properties of the
528 model.

529

530 Models also have been developed that incorporate more complex mechanisms, including
531 muscle dynamics in the form of Hill-type models and feedback pathways to represent reflex
532 behaviors (Gribble et al. 1998; Stroeve 1999). Neither model incorporated short-range
533 stiffness. While both models have been shown to generalize across conditions, their
534 complexity makes it difficult to assess which of the modeled mechanisms are most relevant
535 to the simulated behaviors. Interestingly, Stroeve (1999) suggested that reflexes are a major
536 contributor to the simulated endpoint stiffness, but noted that the Hill-type models used in his
537 simulations do “not fully represent the intrinsic, low-frequency components of the
538 impedance.” Wagner & Blickhan (1999) reached similar conclusions, by evaluating how
539 muscle properties contribute to postural stability during standing. They concluded that
540 simple Hill-type models were not able to maintain stability. Stable postures could be obtained
541 only with sufficiently large parallel stiffness, as could be provided by the short-range
542 stiffness of active cross-bridges, or with sufficient feedback control. Our model provides a
543 direct means to evaluate the contributions that can be expected from the intrinsic stiffness of
544 muscle in the absence of feedback. Failure to incorporate these intrinsic properties of muscle

545 may lead to an overestimation of the role that feedback plays in the regulation of limb
546 mechanics and stability.

547

548 In contrast to previous models of endpoint stiffness, we have developed a mechanistically
549 simple model that is able to replicate measures of endpoint stiffness without explicitly fitting
550 any parameters to the experimental data. This was done by incorporating experimentally
551 validated, scalable models of muscle short-range stiffness into a realistic musculoskeletal
552 model of the human arm. This provides us with a means to assess how the nervous system
553 may regulate endpoint stiffness via changes in the steady-state activation of arm muscles.

554

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692

693

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697

698

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702

703

704 **Disclosures**

705 No conflicts of interest (financial or otherwise) are declared by the authors.

706

707 **Figure legends**

708 Figure 1 Single joint elbow stiffness predictions from short-range stiffness (SRS) model,
709 compared with two experimental measurements (Cannon and Zahalak 1982; Perreault et al.
710 2001). The kinematic parameters of the model were matched to those of subject 4 in Perreault
711 (2001). Negative torque is extension; positive torque is flexion. The experimental data shown
712 are averages across all the subjects in each study. The elbow stiffness reported in Perreault's
713 study was transformed from measured endpoint stiffness of the human arm. Shaded areas
714 show the 95% confidence intervals of the experimental data. The 95% confidence interval of
715 Cannon's study (1982) was computed based on the data of 10 subjects.

716

717 Figure 2 Endpoint stiffness predictions from short-range stiffness (SRS) model at three arm
718 positions (the medial, the central and the lateral position), compared with one previous
719 experimental study (Perreault et al. 2001). The kinematic parameters of the model were
720 matched to those of subject 4 in the experimental study. Each ellipse is centered at a location
721 proportional to the endpoint force direction and magnitude the subject was exerting.

722

723 Figure 3 **A, B** Elbow joint stiffness and endpoint stiffness model estimates based on the
724 slope of the force-length relationship. The experimental data show Figure 1 are repeated here
725 for comparison (Cannon and Zahalak 1982; Perreault et al. 2001). **A** shows the elbow joint
726 stiffness estimation. **B** shows the endpoint stiffness estimation at the central arm position.

727

728 Figure 4 **A, B** The comparison between the average total muscle volume of male subjects
729 and the subject-specific total muscle volume of subject F1, M1 and M5. **A** indicates the
730 variations of stiffness orientation in absolute unit (degrees). **B** indicates the variations of
731 stiffness shape and area normalized by their nominal values.

732 **Table legends**

733 Table 1 Comparison of experimental and model-based estimates of endpoint stiffness.

734

735 Table 2 Expected variation of model outputs over the range of plausible model parameters.

736

737

738 **Tables**

739 Table 1: Comparison of experimental and model-based estimates of endpoint stiffness.

740

		Arm Position	VAF (%)		
			Orientation	Shape	Area
Short-range stiffness model		Medial	97±2	88±6	80±19
		Central	99±1	93±1	85±4
		Lateral	98±1	91±3	81±11
F-L relationship		Central	84±7	57±22	13±2
Coupled F-L relationship		Central	82±10	55±20	20±6

741 Values in the table are means ± SD.

742

743

744 Table 2: Expected variation of model outputs over the range of plausible model parameters.

	Orientation (deg)	Shape (%)	Area (%)
Moment arm	6.0	22	23
Tendon stiffness	0.6	2	3
Joint angle	6.3	13	11
Volume fraction	3.4	14	14

745

746

747

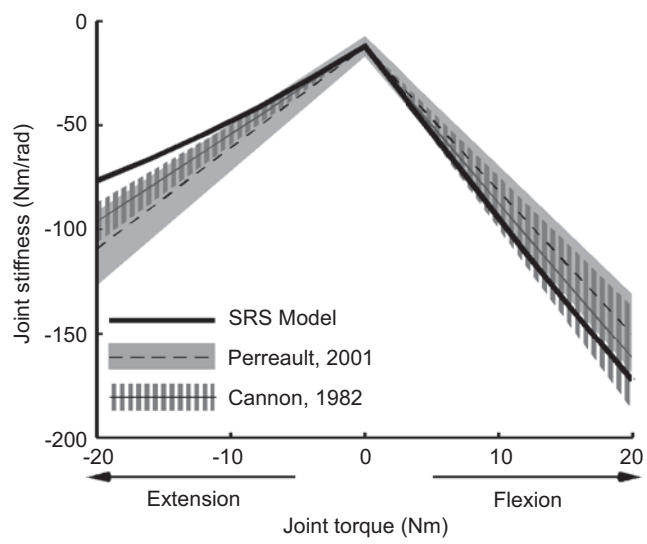


Fig 1

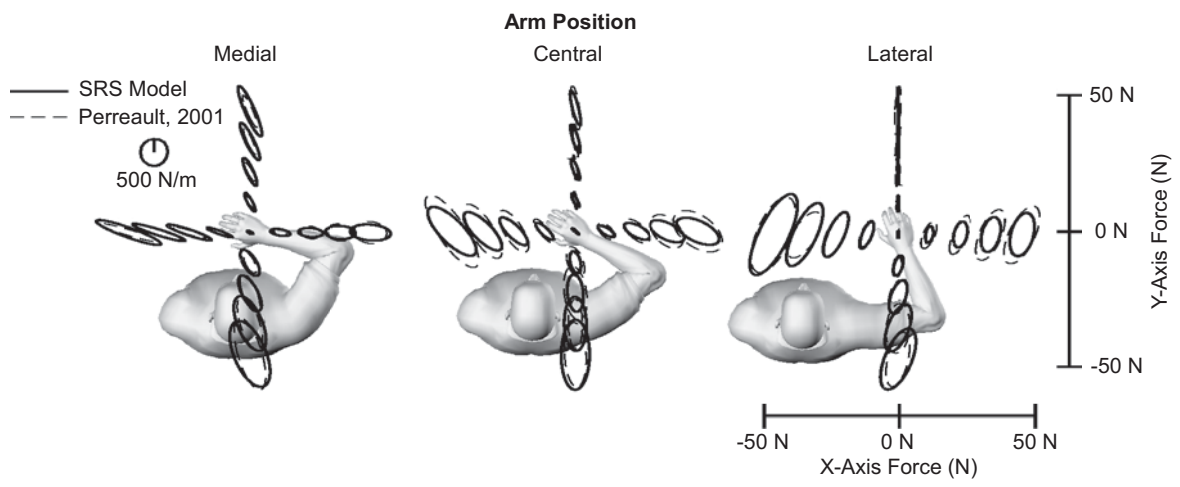


Fig 2

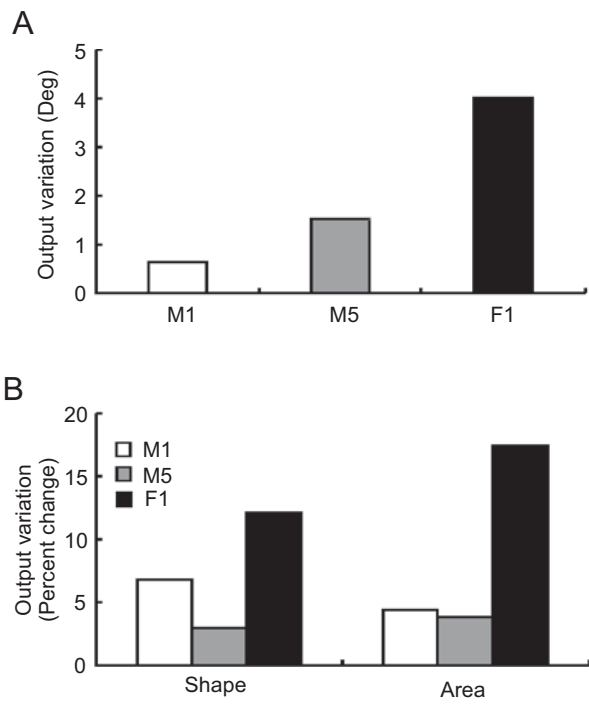


Fig 4