

Maria F Pena Prieto¹, Ying Lu², Seda Bilaloglu^{3,4}, Chelsea Tymms⁵, Megan Caughey³, Matthew Bird¹, Manuel A. Anaya¹, Esther Gardner⁶, Preeti Raghavan^{1,3}

1. Department of Physical Medicine and Rehabilitation, Johns Hopkins University School of Medicine, Baltimore, MD; 2. Department of Rehabilitation Medicine, and Humanities, NYU Steinhardt, New York, NY; 3. Department of Rehabilitation Medicine, and Humanities, NYU Steinhardt, New York, NY; 3. Department of Rehabilitation Medicine, and Humanities, NYU Steinhardt, New York, NY; 3. Department of Rehabilitation Medicine, and Humanities, NYU Steinhardt, New York, NY; 3. Department of Rehabilitation Medicine, and Humanities, NYU Steinhardt, New York, NY; 3. Department of Rehabilitation Medicine, and Humanities, NYU Steinhardt, New York, NY; 3. Department of Rehabilitation Medicine, and Humanities, NYU Steinhardt, New York, NY; 3. Department of Rehabilitation Medicine, and Humanities, NYU Steinhardt, New York, NY; 3. Department of Rehabilitation Medicine, and Humanities, NYU Steinhardt, New York, NY; 3. Department of Rehabilitation Medicine, and Humanities, NYU Steinhardt, New York, NY; 3. Department of Rehabilitation Medicine, and Humanities, NYU Steinhardt, New York, NY; 3. Department of Rehabilitation Medicine, and Humanities, NYU Steinhardt, New York, NY; 3. Department of Rehabilitation Medicine, and Humanities, NYU Steinhardt, New York, NY; 3. Department of Rehabilitation Medicine, and Humanities, NYU Steinhardt, New York, NY; 3. Department of Rehabilitation Medicine, and Humanities, NYU Steinhardt, New York, NY; 3. Department of Rehabilitation Medicine, and Humanities, NYU Steinhardt, New York, NY; 3. Department of Rehabilitation Medicine, and Humanities, NYU Steinhardt, New York, NY; 3. Department of Rehabilitation Medicine, and Humanities, NYU Steinhardt, New York, NY; 3. Department of Rehabilitation Medicine, and Humanities, NYU Steinhardt, NY; 3. Department of Rehabilitation N New York University School of Medicine, New York, NY; 5. Department of Computer Science, New York University, New York, NY; 5. Department of Neuroscience and Physiology, and NYU Neuroscience Institute, New York School of Medicine, New York, NY.

Introduction

Surface texture is important for haptic perception to adapt fingertip forces and prevent use of inadequate or excessive forces during object manipulation.^{1,2} Previous work has used surfaces that do not have quantifiable tactile features limiting our understanding of texture perception.³ In this study, we used 3-D printed textures of precise surface geometry to examine the mechanisms of tactile roughness perception and grasping behavior. The 3-D printed textures were affixed to the grasping surface of a precision grip instrument which measured grip and load forces applied during a grasp and lift manual dexterity task, to permit quantitative analyses of grasping behavior.

Objectives

The objective of the study was to examine the extent to which object weight and texture parameters - texton size and wavelength - explain adaptation and execution of fingertip grip and load forces.

Materials and Methods

We created 8 different 3-D surface textures, where the texture elements, Textons, were truncated cones with texton diameters (d) of 0.1, 0.3, or 0.5 mm, spaced at wavelengths (λ), the center-to-center distance between the texton tip diameters, of 0.75, 1.0, or 1.25 mm apart. Ten healthy adult subjects grasped the instrument grip device using bare hands. The eight different textures were used with the grip device weighing 250 g, 450 g, and 650 g. The grip and load forces were measured at a sampling rate of 400 Hz, and the grip force rates and load force rates were computed.



Texton diameter (d), mm

Adaptation of grasping behavior to 3D printed surface textures



Mean values of the variables representing grasping behavior across all subjects for the three weights and texton sizes (d=0.1, 0.3 and 0.5) arranged by wavelength (λ). Note that load has a strong effect on all grasping variables. At a given load and wavelength, there is a general trend that as texton size increases, the log pGFR and grip force at lift increase. This effect appears to be strongest at a wavelength of 1 mm.

Results



At a wavelength of 1, an increase in texton size increases the grip force rate by 12% as suggested by the slope (b=0.589, p<0.001). Similarly, there is linear relationship between texton size and grip force at lift-off, which is also the strongest when the wavelength of the surface texture is 1mm (b=2.387, p<0.001). These relationships are much weaker at wavelengths of 0.75 mm and 1.25 mm.

- Load has a strong effect on all grasping variables, but texton size shows a linear effect on grip force scaling and execution, which is strongest at a wavelength of 1 mm
- These results confirm that texture information from the fingertips is coded independently of load information for sensorimotor integration.
- Next steps will examine the relationship between texture properties and roughness perception on grasping behavior.

1. Johansson, R.S. and G. Westling, Roles of glabrous skin receptors and sensorimotor memory in automatic control of precision grip when lifting rougher or more slippery objects. Exp Brain Res, 1984. **56**(3): p. 550-64.

Brain Res, 1984. **53**(2): p. 277-84.

Funding acknowledgement: R01HD071978, R21AG064452





Linear relationship between grasping behavior strongest at $\lambda = 1$

Conclusion

• Grip force rates scaled to object loads and the parameterized textures.

References

- 2. Westling, G. and R.S. Johansson, *Factors influencing the force control during precision grip*. Exp
- 3. Bilaloglu, S., et al., Effect of blocking tactile information from the fingertips on adaptation and execution of grip forces to friction at the grasping surface. J Neurophysiol, 2016. 115(3): p. 1122-31.

Email: Maria Pena (mpenapr1@jhmi.edu)