

INCONSPICUOUS ANKLE FOOT ORTHOSIS (AFO) DEVICE FOR TEEN

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PROBLEM STATEMENT

Ankle-foot orthoses (AFOs) help support dorsiflexion during walking. For adolescents with Facioscapulohumeral Dystrophy (FSHD), weakened ankle control can increase fall risk. Our project aims to design a brace that improves safety by assisting dorsiflexion, while staying lightweight, discrete, and flexible to allow natural movement.

The primary goals of the device are to enable dorsiflexion to combat foot-drop, to minimize mediolateral movement to stabilize the foot, and to ensure the device is sleek and inconspicuous.

CONDITION & IMPACT

Client: Debbie Eggleston, a physical therapist and activist for FSHD.

Patient: A high school student with FSHD.

FSHD:

- Progressive muscle weakness.
- Many patients develop foot drop due to weakened dorsiflexion

Global Impact: Could be made custom to other patients. Increases research on FSHD.

Existing AFOs:

- Passive-Dynamic AFO
 - Flexible energy-absorbing design
 - Extremely visible and bulky
- Supramalleolar Orthosis (SMO)
 - Made from thin plastic Can be worn in shoes
 - Does not support dorsiflexion
- Jointed AFO
 - Hinge joint supports full range of motion
 - Extremely bulky

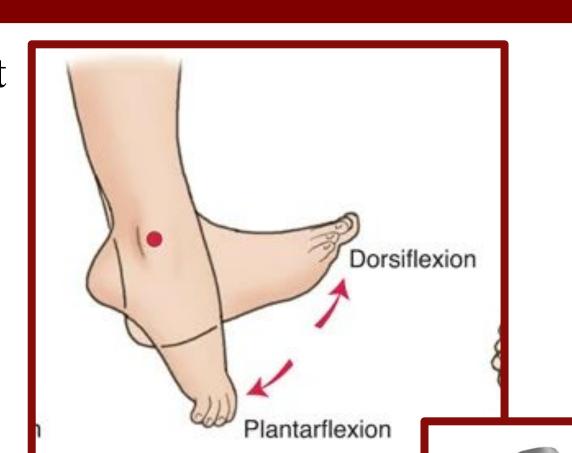


Figure 1: Dorsiflexion Diagram [4]



Figure 2: Supramalleolar



Figure 3: Passive-Dynamic AFO [1]

Figure 4: Jointed AFO [3]

DESIGN SPECIFICATIONS

- Eliminate excess plantarflexion by assisting in dorsiflexion
- Deliver approximately 5–10 Nm of counteracting torque for every 10° of plantarflexion [5]
- Must provide an observable heel-strike stage of gait.
- Minimize pressure points, prevent skin irritation, and distribute forces evenly across the foot and ankle.
- Needs to be easy to assemble to ensure they can use it independently without relying on others.

REFERENCES

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Previous Work

FINAL DESIGN

Iteration 1 (Fall 2024)

Patient testing did not

Minimal success seen

with bungee supports

utilized

occur

- Focused on Nylon straps and
- **Figure 5:** Fall 2024 Final Design
- dorsiflexion support PLA supports were

Figure 6: Spring 2025 Final Design

medial side, then reconnected to the lateral side via velcro

Iteration 2 (Spring 2025)

- Focused on inversion prevention
- PLA with 50% carbon fiber infill used
- Prototype sent to client, not tested in person
- Effective in inversion, but one support broke near the malleolus

Figure 12: Stress vs. Strain curve

Polyester
Thin TPU
Thick TPU

MATERIALS TESTING

MTS Analysis

- Performed MTS tensile testing on polyester and TPU straps
- Neither strap failed under test load
- TPU slipped out of the MTS grips before failure
- Polyester strap showed greater stiffness compared to TPU

Elastic Modulus

- Polyester: 64.8 MPa
- Thin TPU: 20.7 MPa
- Thick TPU: 9.09 MPa

• 3D-printed medial and lateral sides of brace with slits for straps • 2 layers of mesh padding were sewn together and super-glued to

sides of brace

Fabrication Process:

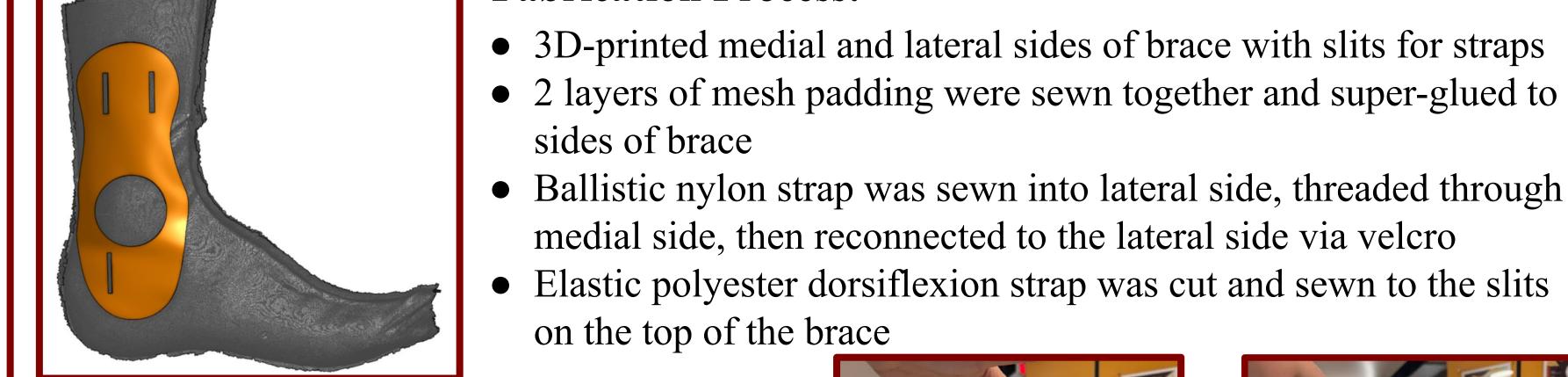


Figure 7: OnShape model of AFO on 3D modeled foot

Design Features:

adjustability

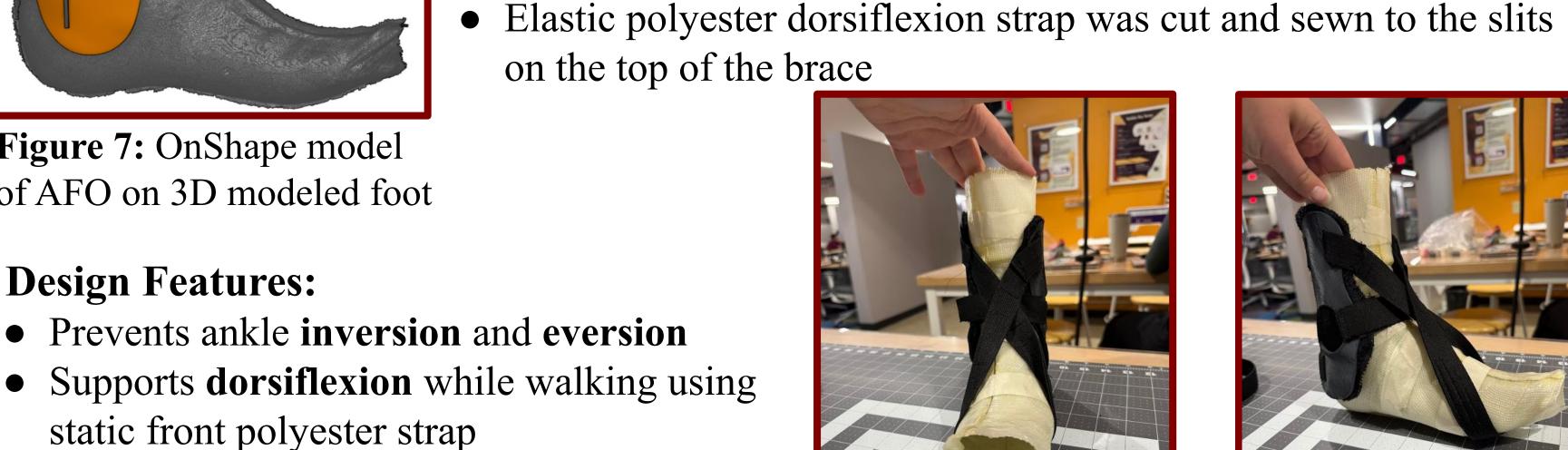


Figure 8: View of final prototype from the front

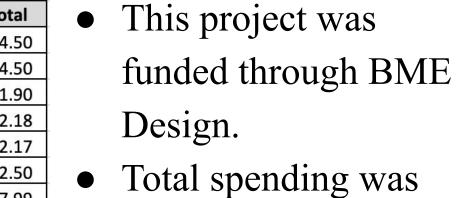


Figure 9: View of final prototype from lateral side

Costs D printed for testing of mediolateral support

Xtreme Sight Line

Table 1: Costs of all spending throughout the semester



\$45.42, with \$37.43 covered through the Grainger Design

DISCUSSION

Limitations

- Only one weekend to perform testing with the patient
- Could not test comfort with the altered design
- Limited materials available
- Only 3D printing can be done to match the organic shape of the brace
- Changes made to the design but still concerns about strength

• Did it work?

- Testing showed noticeable improvement in dorsiflexion
- Foot drop during gait also decreased
- Testing showed increased stability while standing
- The design is noticeably more sleek and concealable than it was previously

FUTURE WORK

- Extend mediolateral supports to the floor to reduce downward slippage.
- Test TPU strip integration to improve dorsiflexion support.
- Evaluate performance of multiple strap lengths to optimize effectiveness.
- Potentially connect with the University of Michigan to collaborate with them and keep the prototype up to date, fix any damages to the brace, and overall, make it easier to collect testing data, as the patient and client are in Michigan, 15 minutes from Ann Arbor.

ACKNOWLEDGEMENTS

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CLIENT TESTING AND RESULTS

Force Plate & Balance Testing Summary

• Double padded for maximum comfort

• Ballistic nylon straps for attachment and

Gait Results

- Without a brace, the patient showed a large imbalance between heel-strike and toe-off forces.
- Both braces reduced this difference, bringing the patient closer to a typical gait
 - Red brace: ~80 N improvement
- **Black brace:** ~50 N improvement (best performance)
- After normalizing for weight:
- The brace condition showed **reduced loading** (9.546 N/kg vs. 10.719 N/kg without brace)
- Impact loading became more controlled and consistent
- Effect size analysis indicated moderate-large positive improvements, despite small sample size. Cohen's d value of .837 indicates effectiveness, despite a higher p value of .263 between the control data and the best data.

Balance Results

- Stabilograms confirmed greater sway on the affected right side.
- With the black brace, sway **decreased**, indicating improved postural stability.
- Cohen's d values suggested meaningful practical improvements, especially in right-leg performance.

Dorsiflexion Assistance

• Without any assistance, the ankle sits at 145 degrees. With assistance of the elastic polyester strap, the degree of foot drop decreases to 106 degrees, providing adequate support for the foot.

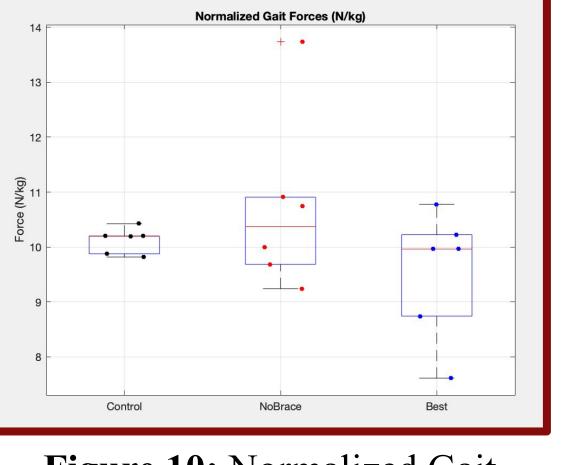


Figure 10: Normalized Gait Analysis of the Patient



Figure 11: Degree of Dorsiflexion Assistance