

A systematic review of the analytical approaches and methodological quality of studies evaluating the measurement properties of Dartfish (video-based) two-dimensional movement analysis.

Ze Lu, MSc,¹ Joy C. MacDermid, PT, PhD^{1,2}

KEY FINDINGS

- Dartfish can provide reliable and valid movement kinematic indicators describing simple uniplanar movements; complex movements pose more challenges.
- Particular effort should be taken on quantifying the dynamic or multi-planar movement using Dartfish.

Background

- The barriers to using 3D motion analysis in real world contexts lead some to develop video-based solutions to measuring movement¹.
- It is important to evaluate the psychometric properties of 2D motion analysis enabling researchers to measure movement in different populations without the limitations of a strict laboratory setting^{2,3}.

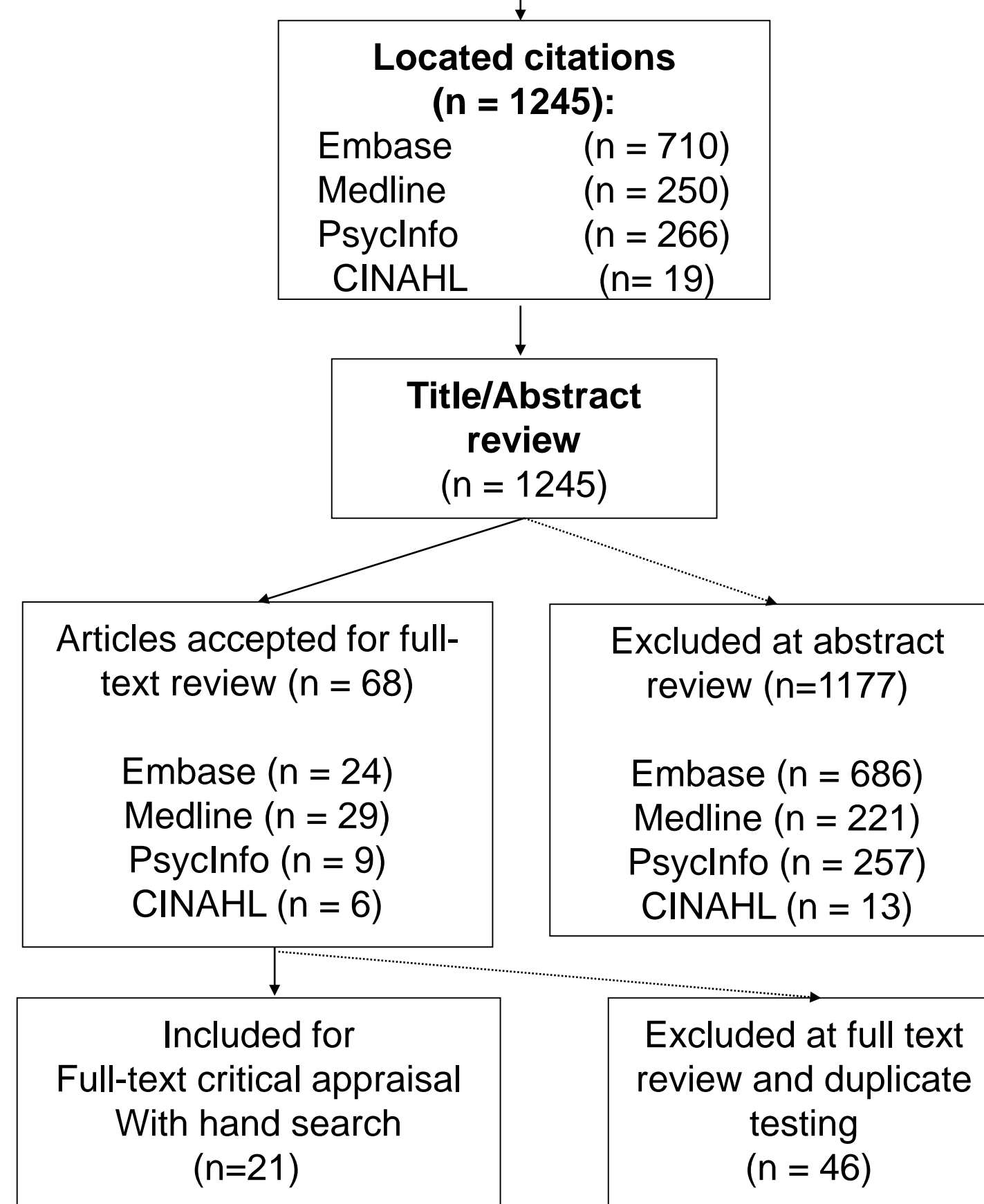
Objective

- The purpose of this systematic review was to describe the contexts in which Dartfish psychometrics has been evaluated, critically appraise the methodological quality of the studies, and synthesize the psychometric properties reported.

Methods

Search Strategy

Key words: (2 –d motion analysis OR Dartfish OR video motion analysis) AND (reliability OR validity OR psychometric OR responsiveness OR MDC)
 Dates: January 1999 to Dec 2018
 Other: Google searches and hand searches of retrieved study references lists



Full-text review Criteria:

- Inclusion:**
1. One of the movements must have been measured using Dartfish software.
 2. The purpose and analyses must have addressed at least one psychometric property.
- Exclusion:**
1. Studies using Dartfish for non-measurement research questions
 2. Range of movement has not been analyzed with Dartfish.

Results

Author, Publication Year	Population Movement studied	Sample Size	Mean Age Years ± SD (range)	Interest variable	Camera Position (2D)	Measurement Property Assessed	Quality score
Stensrud et al., 2011	Healthy female SLS,SLVDJ,VDJ	184	22±4	Angle	Frontal	Test-retest reliability ICC 0.57-0.89	63
Bart Dingenen et al., 2013	Healthy female LTM,SLS,SLVDJ	15	21.1±3.4	Angle	Frontal	Intra-rater reliability ICC 0.98-0.99	77
Junya et al., 2015	Spinal deformity patients Walking	40	60.1	Angle	Sagittal	Concurrent validity DARTFISH vs SVA r=-0.642 DARTFISH vs X-ray r=0.742	32
Andrew Miller et al., 2008	Healthy Step-up, SLVDJ, Single-leg spring	24	23.7 (21.2–26.3)	Angle	Sagittal	Test-retest reliability ICC 0.64-0.75	71
Beth S Norris et al., 2011	Healthy female Mechanical lift task	15	21–39	Angle	Sagittal	Intra-rater ICC 0.98-0.99 Inter-rater ICC 0.91-0.98 Test-retest ICC 0.79 & 0.91	92
Jennifer N et al., 2015	Healthy Runners Treadmill running	24	19.9±1.3	Angle	Frontal	Intra-rater reliability ICC 0.95-0.98	86
Constance M. Mier et al., 2011	Healthy SR, PSLR	60	25.0±9.3 M 23.7±7.9 F	Angle	NA	Intra-rater ICC 0.99 Test-retest ICC 0.79-0.99	88
Kathryn E Sinden et al., 2016	Firefighters Firefighting high-rise lifting task	12	40.5±8.3	Angle, Distance	Frontal Sagittal	Intra-rater ICC 0.72-0.97	88
Islam Mahmoud et al., 2015	Healthy children Vertical jump	38	(3 – 12)	Distance	Sagittal	Internal consistency Cronbach's alpha=0.953 Concurrent validity R2=0.85	41
S. Borel et al., 2011	Children with spastic cerebral palsy Gait	12	8.9	Angle, Distance, Time	Frontal Sagittal	Cohen kappa(95%CI) 0.81 (0.509–1.109)	50
Justin C. Paul et al., 2015	Healthy Walking Lower extremity: Rotation, forward, left and right side bend	10	24.5±2.4 (23–30)	Angle, Distance	Sagittal	Inter-rater reliability ICC 0.71-.97 MDC Angle: 2° ~12.6° Distance: 2.5–4.8 cm	55
Christopher Melton et al., 2011	Healthy + Shoulder injured AE, AAE	21	27 ± 6 H 29 ± 9 S	Angle, Velocity	Sagittal	Inter-rater reliability Angle ICC 0.70-0.99 Velocity ICC 0.52	68
Constance M. Mier et al., 2013	Healthy SR	30	25.6 ± 7.6 M 22.4 ± 2.2 F	Angle	Sagittal	Intra-rater ICC 0.87-0.97 Inter-rater ICC 0.82-0.97 Test-retest ICC 0.84-0.97 Internal consistency ICC 0.95-0.99	79
François Fourchet et al., 2012	Male athlete Flexibility of eight lower limb muscle groups	10	15.3 ± 1.6	Angle	Sagittal Overlook	Reliability ICC 0.51-0.93	75
Leenesh Khadilkar et al., 2014	Healthy ADL	10	29 ± 5	Angle	Coronal Sagittal	Inter-rater ICC 0.68-1.00 Test-retest ICC 0.45-0.94	75
Caria N. et al., 2013	Healthy VDJ	16	25.5 ± 2.0	Angle, Distance	Frontal	ICC-intra=0.95& 0.96 ICC-inter=0.82& 0.86	63
Y. NAGANO et al., 2008	Healthy female Treadmill running	28	21 ± 1	Angle	Frontal	Concurrent Validity R2 0.34-0.41	79
Richard B. Souza et al., 2015	Healthy Propelling wheelchair	256	42.3 ± 10.9(17-80) M 41.9 ±9.7(20-65) F	Angle	Back	Intra-rater ICC 0.81-0.95 Inter-rater ICC 0.88-0.93	79
Redler et al., 2016	Athlete participant Professional observers	267	14.5 (11–17)	Distance	Frontal	Inter-rater κ = 0.92 Intra-rater κ = 0.55	82
Milgrom et al., 2016	Spinal cord injury and ambidextrous	5	N/A	Angle, Distance	Frontal	Concurrent validity ICC 0.47-0.95	71
S. Paul et al., 2016	Healthy People with Parkinson disease STS,Single leg stance; Acutely induced dizziness	45	Healthy 26.5 (4.3) 67.3 (7.1) PD 71.0 (7.1)	Angle, Distance, Time	Front Sagittal	Criterion validity ICC 0.59-0.99 Cohen's kappa: 0.95 & 1.00 Test-retest 0.98-1.00 Inter-rater 0.61-1.00	80

SLS: Single leg squat; **SLVDJ:** single-leg vertical drop jump; **VDJ:** two-leg vertical drop jump; **LTM:** lateral trunk motion; **SR:** test: sit-and-reach; **PSLR:** Passive Straight-Leg Raise Test; **SLR:** Straight-Leg Raise Test; **AE:** active elevation(Shoulder); **AAE:** active assisted elevation(Shoulder); **ADL:** Activity of daily living tasks; **PR:** Push and Release task; **STS:** Sit-to-stand;

Conclusion

- About 14% of studies had substantial methodologic flaws (quality <50%).
- Studies varied on movements studied (with less focus on the upper limb), indicators extracted (angles most used) and reference standard.
- Dartfish can provide reliable and valid kinematic data for lower extremity uniplanar motion; complex movement have more measurement error.



Discussion

- Dartfish has potential to enhance mobility assessments that physical therapists perform in a variety of clinical and real-world contexts.
- An important concern in 2D analysis is perspective error, strategies to mitigate this error require more attention.
- Upper extremity protocols are insufficiently defined.

Reference

1. Piriyaaprasarth P, Morris ME. Psychometric properties of measurement tools for quantifying knee joint position and movement: A systematic review. *Knee*. 2007;14(1):2-8. doi:10.1016/j.knee.2006.10.006
2. Khadilkar L, MacDermid JC, Sinden KE, Jenkyn TR, Birmingham TB, Athwal GS. An analysis of functional shoulder movements during task performance using Dartfish movement analysis software. *Int J Shoulder Surg*. 2014;8(1):1-9. <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC4049033/>.
3. Sinden KE, MacDermid JC. Evaluating the Reliability of a Marker-Less, Digital Video Analysis Approach to Characterize Fire-fighter Trunk and Knee Postures During a Lift Task: A Proof-of-Concept Study. *J Ergon*. 2016;06(01):1-10. doi:10.4172/2165-7556.1000145