



Objectives: To test the hypothesis that reducing vertical center of mass (COM) displacement will lower the metabolic cost of human walking. To examine changes in joint work associated with increasing and decreasing vertical COM movement during gait.

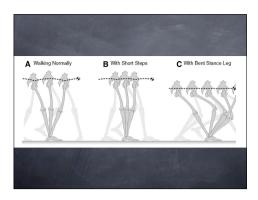
Design: Randomized repeated measures.

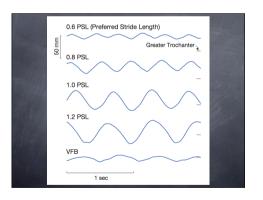
Setting: Human Neuromechanics Laboratory, University of Michigan.

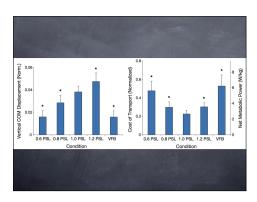
Participants: Able-bodied subjects (N=10).

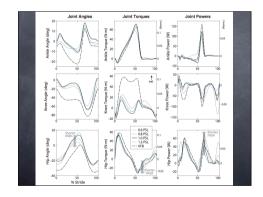
Interventions: Subjects walked at 1.2m/s on a treadmill and overground. Subjects marplated vertical COM displacement overground. Subjects marplated vertical COM displacement control of the c

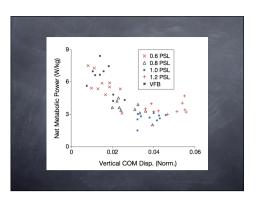
	Energy Expenditure	Vertical COM	Lateral COM	Ankle Work Per	Knee Work Per	Hip Work Per	
0.6 PSL 0.8 PSL 1.0 PSL 1.2 PSL VFB ANOVA	(Cost of Transport) 0.47±0.10* 0.29±0.05* 0.22±0.03 0.30±0.04* 0.52±0.11* 7.4E-13	Displacement (% L) 1.60±0.56* 2.85±0.67* 3.82±0.52 4.75±0.76* 1.88±0.55* 3.6E-12	Displacement (% L) 1.08±0.27* 1.83±0.47* 3.31±0.44 4.37±0.40* 3.74±0.40 2.5E-7	Stride (J) 2.86±2.44* 1.00±1.46* -0.10±1.00* 0.41±0.77* 2.43±1.58* 0.022	Stride (J) -8.63±2.56* -6.07±2.18* -3.32±1.28* -2.39±1.04* -8.57±2.88* 9.3E-04	Stride (J) 8.18±2.45* 5.62±1.38* 3.87±1.26* 2.72±1.35* 4.48±2.34 0.0015	
				3//2			

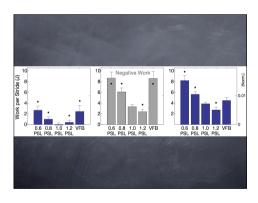












Results: Increasing and decreasing vertical COM displacement beyond subjects' preferred range resulted in increases in the metabolic cost of walking. When vertical COM displacement was reduced, corresponding increases in positive ankle and hip work and negative knee work were observed.

Conclusions: Humans are capable of walking in a manner that will reduce COM displacement from normal. Decreasing vertical COM movement results in increases in metabolic energy costs because of greater mechanical work performed at the hip, knee, and ankle joints. Thus, reducing vertical COM movement is not a successful strategy for improving either metabolic or mechanical energy economy during normal walking by able-bodied subjects.

OBJECTIVE—Diminished daily physical activity explains, in part, why obesity and diabetes have become worldwide epidemics. In particular, chair use has replaced ambulation, so that obese individuals tend to sit for ~2.5 h/day more than lean counterparts. Here, we address the hypotheses that free-leiving daily walking distance is decreased in obesity compared with lean subjects and that experimental weight gain precipitates decreased daily walking.

RESEARCH DESIGN AND METHODS—During weight-main-tenance feeding, we measured free-living walking using a validated system that captures locomotion and body movement for 10 days in 22 healthy lean and obsee sedentary individuals. These measurements were then repeated after the lean and obsee subjects were overfed by 1,000 kcal/day for 8 weeks.

## The Role of Free-Living Daily Walking in Human Weight Gain and Obesity

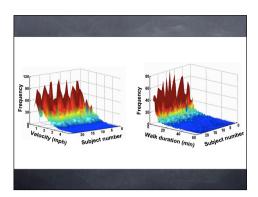
James A. Levine, Shelly K. McCrady, Lorraine M. Lanningham-Foster, Paul H. Kane, Randal C. Foster, and Chinmay U. Manohar

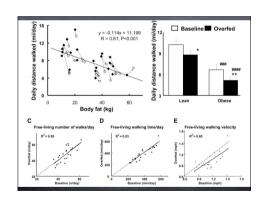
Diabetes 57:548-554, 2008

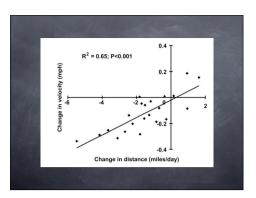
Subject	Sex	Age (years)	Weight maintenance energy intake (kcal/day)	BMI (kg/m²)	Change in BN (kg/m²)
		(Jeans)	(Montany)	(ng/m /	(Agrii )
Lean (BMI <25 kg/m <sup>2</sup> )					
1	W	44 39	1,815	19 20	1.55 0.54
2 3		39	2,360	20	
3	M	33 27	2,710	21	2.27
4	M W		2,037	22 22	0.24
5		41	2,142	22	0.24
6	M	34	2,706	23	0.87
7	w	29	2,354	23	2.13
8	M	53	2,589	24	0.77
9	W	55	1,904	25	2.17
10	M	29	2,628	25	1.22
Obese (BMI >29 kg/m <sup>2</sup> )					
11	M	40	2,885	29	1.73
12	M	29	3,068	31	1.13
13	w	47	2,428	32 32	1.11
14	w	42	2,402	32	1.01
15	w	41	2,423	33	0.48
16	M	36	3,470	33	2.25
17	w	38	2,551	34	1.01
18	w	41	3,220	35	1.41
19	w	41	2,362	35	1.00
20	M	41	2,303	35	2.09
21	M	27	4,266	37	1.35
22	w	31	2,623	38	1.02



	Walking	Time engaged in walking	Average distance of a walking bout	Free-living walking
	bouts			
	(n/day)	(minutes/day)	(miles)	velocity (mph)
Baseline				
Lean	46 + 8	448 + 111	0.22 + 0.04	1.19 + 0.21
Obese	47 + 5	339 + 74"	0.14 + 0.04ts	1.10 + 0.20
TOTAL	47 + 6	389 + 106	0.18 + 0.06	1.14 + 0.20
Overfed				
Lean	48 + 11	459 + 119	0.19 + 0.06*	1.09 + 0.28
Obese	47 + 9	334 + 794	0.11 + 0.03******	0.96 + 0.15**
TOTAL	47 + 10	391 + 116	0.15 + 0.06****	1.02 + 0.20*****
Change with				
overfeeding				
Lean	1.6 + 5	11 + 43	-0.03 + 0.04	-0.10 + 0.14
Obese	-0.3 + 7	-5 + 51	-0.03 + 0.05	-0.14 + 0.15
TOTAL	0.6 + 6	2 + 47	-0.03 + 0.04	-0.12 + 0.14



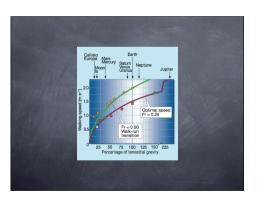






**RESULTS**—We found that free-living walking comprises many (-47) short-duration  $(<15 \, \mathrm{min})$ , low-velocity  $(-1 \, \mathrm{mph})$  walking bouts. Lean subjects walked 3.5 miles/day more than obese subjects  $(n=10,103\pm2.5\,\mathrm{vs}, n=12,6.7\pm1.8\,\mathrm{miles/day}, P=0.0009)$ . With overfeeding, walking distance decreased by 1.5 miles/day compared with baseline values  $(-1.5\pm1.7\,\mathrm{miles/day})$  the relating observations of the control o

CONCLUSIONS—Walking is decreased in obesity and declines with weight gain. This may represent a continuum whereby progressive increases in weight are associated with progressive decreases in walking distance. By identifying walking as pivotal in weight gain and obesity, we hope to add credence to an argument for an ambulatory future. Diabetes 67:548–554, 2008



## Disponibili tirocini, tesi triennale e specialistica

- Bioenergetica & biomeccanica del nordic walking;
- bioenergetica & biomeccanica della locomozione acquatica;
- bioenergetica & biomeccanica dell'inline skating;
- bioenergetica & biomeccanica dell'hand-cycling;
- bioenergetica & biomeccanicadel del long bed rest;
- bioenergetica & biomeccanica del trekking delle alpi;

## Disponibili tirocini, tesi triennale e specialistica (2)

- costo emg della locomozione;
- review dei sistemi misura portatili dell'attività fisica e dei dispendio metabolico; e
- salto in lungo da fermo con masse aggiunte e allenamento.