

Standardization in Platform Stabilometry being a Part of Posturography

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Posturography is not a clearly defined subject. Numerous investigators are working in this field being active in technical laboratories, research institutes and medical departments. Dependent on the intention and the focus of interest the problem statement is formulated and the approach is chosen. So rather different types of equipment are used to measure and study postural stability and body movements either spontaneous or with application of stimuli. One aspect of posturography is the recording of body movements of subjects in standing position. In this restricted sense of the word we will speak about stabilometry. A number of quite different methods are practiced for the stabilometric measurements. Without any claim or suggestion about completeness some sticking proves of inventivity will be mentioned. Supposing certain rigidity in the body a number of authors studied the movements of the head using accelerometers (*Tokita, Watanabe and Fukuda, 1972*), light beams (*Boman and Jalavisto, 1953; Jarrige, 1968; Kapteyn, 1972; Tokumasu and Kawano, 1976*), strings (*Fearing, 1924*) and mechanical structures (*Vierordt, 1864; Tokita, Miyata et al., 1976*) fixed to the head. Other authors measured the movement of the trunk, also using quite different methods as accelerometers (*Thomas and Whitney, 1959*) Light (*Hirasawa, 1973*), sound sources (*Guegen and Leroux, 1973*); *Amblard and Cremieux, 1976*), strings" (*Kuhnke, 1950; Smith, 1957; Neshner, 1971; Gantchev, Draganova and Dune v, 1972*), magnetic coils or video systems (*Kapteyn, 1973; Spaepen, Peeraer and Willems, 1979*). A less direct method for studying the body stability is the recording of the movement of the body's point of pressure to the foot support using a force measuring platform. The displacement of the point of pressure" is not only caused by a possible shift of the body's point of gravity, but also by the acceleration and deceleration forces related to the movements of the inertial mass of the body (*Smith, 1957; Scott and Dzendolet, 1972; Gurfinkel, 1973; Hlavacka and Litvinenkova, 1973; Kapteyn, 1973; Geursen, Aliena et al., 1976; Spaepen, Vranken and Willems, 1978; Massen and Kodde, 1979; Kodde, Caberg and Mol, 1982*). The contribution of this dynamic part is at least as large as that of the static part being the effect of the shift of the point of the body's point of gravity. Besides that such a shift can be caused by a movement of the standing subject as such it also can be caused by a change in configuration of the parts of the body in which case the measured shift is not representative for the subjects stability (*Corti, 1959*). In some platforms the static and dynamic components are separated. (*Thomas and Whitney, "1959; Spaepen, Fortuin and Willems, 1979*). Some platform are sensitive for horizontal shearing forces as well (*Begbie, 1967; Dichgans, Mauritz et al., 1976; Spaepen, Vranken and Willems, " 1978*).

Ask for Standardization

The studies using these different methods and instrumentations deliver data and conclusions while the comparison is

extra hampered by non-uniformity in presentation. At the fifth International Symposium on Posturography in Amsterdam (1979) this subject has been discussed. The general feeling was that posturography only will grow to a generally accepted clinical tool when posturographic investigations in patients suffering from corresponding diseases deliver corresponding results in the various clinical departments. In relation to this a need was felt for general agreements about methods and pre-sensation of results. The meeting decided to appoint a committee for preparing a report on standardization in platform stabilometry to be presented in 1981 at the sixth International Symposium on Posturography on Kyoto. This report, introduced "to the members of the symposium, has been subject of a plenary discussion in the business meeting of the society on Posturography in Kyoto 1981. In this discussion special attention has been given to the result of a questionnaire distributed among 200 ENT physicians of leading hospitals in Japan which nation wide survey delivered 115 responses out of different departments. In this publication the report will be presented step by step, as it was discussed at the meeting with the brief considerations of the committee and the summary of the comment of the meeting.

Propositions on Standardization 1. DEFINITION.

Platform stabilometry measures body movements of subjects in standing position by means of a stabilometer, the assumption being that the stabilometer is a force-measuring platform.

CONSIDERATION: in the extended field of posturography a restricted part has to be fenced off to be called Platform Stabilometry.

COMMENT: none.

2. INDICATIONS OF DIRECTIONS.

Designations used to indicate the direction of body movements during platform-stabilometric measurements should be:

Anterior (A), Posterior (P) Left (L) and Right (R), always defined from the subject's point of view.

CONSIDERATION: Although either Latin or English words can be preferred here has been chosen for a connection to the common use in Neurology, EEG etc.

COMMENT: The recommended terms are preferred above forward backward.

3. THE STABILOGRAM.

The body movements in standing position in one direction (either AP or LR) can be presented as a function of time; this presentation is to be called Stabiogram (symbol Stg). In this presentation the time scale is to be taken horizontally, and

the body movements in anterior and right direction, respectively, should be written on the positive vertical axis, i.e. by an upward excursion in the recording.

CONSIDERATION: *Gurfinkel* c.s. use this notation and since it has grown to common use (*Gurfinkel, Kotz and de Chick, 1965; Helfand, Gurfinkel et al., 1964*).

COMMENT: none.

4. THE STATOKINESIGRAM.

Body movements during standing can be presented as excursions of the body in the horizontal plane; for example as excursions of the body's point of pressure on the supporting platform. This type of presentation should be called Statokinesigram (symbol Skg). In this presentation the UR movements should be written on the horizontal x-axis, writing R in positive direction, i.e. as a deflection to the right in the recording; the AIP movements should be written on the vertical y-axis, writing A in positive direction, i.e. as an upward deflection in the recording.

CONSIDERATION: *Baron* c.s. use this notation. Since it has grown to common use (*Baron, Bobot and Bessineton, 1956; Baron, 1964*).

COMMENT: none.

5. TIME OF RECORDING.

The recording of postural movements should preferably start 10 seconds before the time of analysis (i.e. the effective time interval over which the signal is to be analysed), in order to eliminate transient phenomena. The time of analysis should preferably be 50 seconds.

CONSIDERATION: For a valid analysis the recording should be long enough to eliminate a first part disturbed by possible transient phenomena and to keep th an a period usable for a valid analysis (*Fearing, 1924; Kuhnke, 1950; Smith, 1953; Corti, 1959; Cantrell, 1963; Begbie, 1966, Jarrige, 1968; Sugano and Takeya, 1970; Soames, Atha and Harding, 1976*).

COMMENT: The feeling is that up to now there is no evidence for an optimum length of the period of analysis. In Japanese centres various periods are used for example 20 sec (23 0/0), 30 sec (37 0/0), 50 sec (7 0/0) and 60 sec (30 0/0). The meeting wishes results of studies before making a decision in this.

6. THE MENTIONING OF SCALE UNITS.

In the presentation of Stabilograms, scale units should be defined in Newton-metre-second units. Dependent on the stabilometer used the vertical axis should represent the dimension of force (Newton), moment of force (Newton-metre) or displacement (metre). The presentation should indicate the deflection in the Stabilogram due to a steady moment of force of 1.0 Newton-metre.

CONSIDERATION: Measuring platforms can measure quite different physical units (force, moment of force, displacement). For a good understanding of the presented data the scale units have to be mentioned in a uniform system of reference.

COMMENT: none.

7. THE LOCALIZATION OF THE STATOKINESIGRAM.

In the presentation of the Statokinesigram, the centre of the figure (i.e. the intersection of the two axes) should be defined by the situation in which no moment is exerted on the stabilometer. The dimensions should again be expressed on the axes in Newton-metre-second units. The presentation of a Statokinesigram should state the coordinates of the mean value of the deflections in both directions.

CONSIDERATION: Dependent of the test situation or subject the center of a statokinesigram can be situated outside the calibration point being the place of the recording element when no moment is exerted on the platform. This localisation has to be shown as an essential source of information and should be mentioned expressed in units of the chosen system of reference (*Baron, 1963; Litvinenkova and Baron, 1968*).

COMMENT: none.

8. RECOMMENDATIONS ABOUT THE TEST CIRCUMSTANCES.

Since the measurement of the subject's stability can be influenced by the circumstances under which it takes place, the following recommendations are made:

a) The subject should remove his shoes and stand on the stabilometer platform with the heels together, at an angle of 30 degrees between the medial sides of the feet.

b) No fixed sound sources should deliver information for spatial orientation in the room used for posturography; the noise level in the room should preferably be below ISO 40 dB(A).

c) The room should be large enough to prevent acoustic spatial orientation, the minimum area being preferably 3 x 4 metres. The stabilometer should be placed at least 1 metre from any wall.

d) During registrations with the eyes open, the subject should focus on a circular area with a diameter of 5 cm, at a distance of 3 metres straight ahead.

e) For recordings of visual postural stabilization the peripheral field of vision should provide information on the vertical, and the room should have normal (diffuse) illumination of at least 40 lux (lumen per square metre).

f) During registrations with the eyes closed, some low-level dim light (about 20 lux) should be presented in the room in order to put the subject at ease and enable the investigator to observe him (her).

CONSIDERATION: Besides the instrumentation and the defined test position the measuring results may be influenced by secondary factors concerning the test circumstances (*Thomas and Whitney, 1959; Cantrell, 1963; Begbie, 1967; Spaepen, Fortuin and Willems, 1979*).

ad. a) the position of the feet and the possible support of shoes will influence the result of the measurement (*Fearing, 1924 a; Begbie, 1967; Owen Black, O'Leary and Wall, 1976; Soames and Atha, 1978; Okubo, Watanabe et al., 1979; Brauer and Seidel, 1980*).

ad. b) a fixed sound source can be a point for orientation and reduce the measure of instability (*Edwards, 1946; Takeya, Sugano and Ohno, 1976; Marné-Karelse and Bles, 1977*).

ad. c) reflection of sound against a wall can deliver spatial orientation as used intensively by blind people (*Edwards, 1942 1946; Takeya, Sugano and Ohno, 1976; Marné-Karelse and Bles, 1977*).

ad. d) the value of a test situation "eyes open" in relation to "eyes closed" depends completely on the usability of the total potential of the visual system. A fixation point must be situated within 5 meters distance from the subjects head (*Bles c.s.*) (*Edwards, 1946; Guegen, Leroux et al., 1976; Bles, Brandt et al., 1978*).

ad. e) The peripheral eye field must be saturated with information about the vertical illuminated at a sufficient level (*Edwards, 1942, 1946; Wapner and Witkin, 1950; Fukuda, 1952; Begbie, 1966; Litvinenkova and Baron, 1968; Hlavacka and Litvinenkova, 1973; Bles and de Wit, 1976; Lee and Lishman, 1976; Amblard and Carblanc, 1978; Kapteyn, Bles et al., 1979*).

Okubo, Watanabe et al., 1979; Seidel and Brauer, 1979; Bles, Kapteyn et al., 1980).

ad. f) subjects feelings of unsteadiness as well as a possible peeping through eyelids have to be prevented (Edwards, 1946; Begbie, 1967).

COMMENT: The foot position and the wearing of shoes has been discussed profoundly. As the basic question has been formulated "What instruction is given to the patient about his way of standing". A situation of relaxed standing is incompatible with a obliged foot position or a put off of the shoes. Especially in "some cultures the last event can be experienced as unpleasant and making the subject uneasy. In the case that the subject is investigated in a special body attitude for example the military attitude the situation can be defined as complete as wished.

Concerning the sound in the testroom, usage of headphones or earplugs has been discussed and rejected. The feeling was that a level of diffuse noise of 40 dB (A) might be tolerable but no spatial orientation might be possible by means of a fixed sound source or reflections of sound against fixed objects.

In Conclusion: The recommendations about the visual aspects got general agreement. The meeting asked for results of studies about the effects of the instruction to the subject about the way of standing on the results of the investigations (Fearing, 1925; Kuhnke 1950; Wapner and Witkin, 1950; Smith, 1953; Corti, 1959).

9. THE STANDARD TEST CONDITION.

The standard stabilographic measurement condition (SC) is defined by the recommendations 8a, b, c, d and e.

CONSIDERATION: "The results of the stabilometric measurements in healthy subjects show a large interindividual difference. So no sharp normal values can be defined and the large standard deviations exclude a sharp criterium (Fearing, 1924 a, b, Kuhnke, 1950; wepner and Witkin, 1950; Cantrell, 1963; Begbie, 1967; Litvinenkova and Baron, 1968; Sugano and Takeya, 1970; Bessineton, Bizzo et al., 1976; Njiokiktjien and van Parys, 1976).

COMMENT: none.

10. THE WEIGHT OF THE VISUAL CUES.

The influence of visual information can be expressed in the so called *Romberg* quotient of the measure of stability obtained in the situation defined by 8a, b, c, f and the corresponding measure of stability obtained in the standard condition (SC) (Njiokiktjien and de Rijke, 1972; Njiokiktjien and van Parys, 1976; van Parys and Njiokiktjien, 1976; Owen Black, O'Leary and Wall, 1977).

CONSIDERATION: The weight factor of the visual information in stability is unequal for the different subjects. So it is reasonable to define a relative factor.

COMMENT: none.

11. THE WEIGHT OF SPECIFIC TASKS.

The influence of factors or circumstances on the subject's stability can be related to the standard condition (SC) in a way similar to that described for the *Romberg* quotient.

CONSIDERATION: Just as the influence of visual information the effect of other tasks will be dependent on the situation and personal factors, so its reasonable to define relative measures.

COMMENT: none.

12. INDIVIDUAL DIMENSIONS.

The subject's body weight and height influence the posturographic data, but no distinct correlation has so far been established which could justify a uniform method of correlation. The subject's height and weight should therefore be specified in the presentation, which should also mention the correction used in the analysis in view of these factors.

CONSIDERATION: In literature no general accepted calculation methods are presented concerning corrections for interindividual differences in weight and height reducing the standard deviation of the platform stabilometric data in a population of healthy subjects. Therefore in case of presentation individual stabilometric data the individual weight, height and age should be reported (Fearing, 1925 Hellebrandt, Tepper et al., 1937; Wapner and Witkin, 1950; Thomas and Whitney, 1959; Sugano and Takeya, 1970; Bessineton Bizzo et al., 1976; Kapteyn, 1978; Hlavacka and Saling, 1979).

COMMENT: none.

13. SAMPLING OF THE SIGNAL.

When the posturographic signal is sampled for analysis, the components in the higher frequencies should be eliminated by means of a low-pass filter. The sample rate to be used should be 20 per second, i.e. 1024 samples in 50 seconds and 512 samples in 25 seconds, if it can be managed.

CONSIDERATION: The results of calculations can be influenced by the sample rate with which the signal is digitized: so an agreement is wanted. In making a decision one has to consider the facilities of current instruments and the frequency considered as being the highest valuable component in the stabilometric signal. Taking 10Hz as being the highest valuable component the minimum sample rate is 20 samples per second. For elimination a possible disturbing effect of higher components should be filtered out before the sampling.

COMMENT: The recommended sample-rate has been experienced as being minimal. The cut-off frequency and the steepness of the filter should preferably be mentioned in a publication. The effect of various sample procedures has been mentioned as a subject for study and further discussion at the next symposium

14. MEASURES OF STABILITY.

A measure of stability can be calculated in several ways. Two possibilities are suggested:

a) The line integral per second (L) is the sum of the absolute values of the line segments between two successive samples of the Statokinesigram (SkG), divided by the time of analysis (T). This gives the equation:

$$L = \frac{1}{T} \sum_{i=1}^N \sqrt{(x_i - x_{i-1})^2 + (y_i - y_{i-1})^2}$$

b) The root mean square (RMS) is the root of the quotient of the sum of the squares of the distances of the samples of the SkG to the mean value of these samples and the number of samples.

This gives the equation

$$S = \sqrt{\frac{\sum_{i=1}^N [(x_i - \bar{x})^2 + (y_i - \bar{y})^2]}{N}}$$

CONSIDERATION: Two possible measures for stability are presented as being examples (Agajan, 1967; Sugano and Takeya, 1970; Njikiktjien and de Rijke, 1972; Kapteyn and Bles, 1976; van Parys and Njikiktjien, 1976; Kodde, Caberg and Mol, 1982).

COMMENT: none.

15. FREQUENCY ANALYSIS.

When a frequency analysis is made, for example according to Fourier, the presentation of results should show the frequencies plotted on the horizontal axis in a logarithmic scale between 0.02 Hz and 10Hz; the amplitude of the spectrum should be presented vertically in a linear scale, with dimensions and units indicated.

CONSIDERATION: The recommended presentation is a consolidation of what has been grown as common use (Agajan, 1967; Sugano and Takeya, 1970; Aggashyan, 1972; Scott and Dzendolet, 1972; de Wit, 1972; Gueguen and Leroux, 1973; Leifer and Meyer, 1-975; Owen Black, O'Leary and Wall, 1976; Matsuoaka 1977; Taguchi, 1978; Brauer and Seidel, 1979; Watanabe, Okubo and Ishida, 1980).

COMMENT: none.

16. FREQUENCY BANDS.

The frequency content of an analysis can be presented by an integration of the amplitudes within frequency bands, the limits of these bands being 0.02 Hz, 0.2 Hz, 2 Hz and 10 Hz.,

CONSIDERATION: The selectivity of a frequency-analysis depends of a number of factors and the sharpness of a peak is not necessarily indicative for a diagnostic event. In connection to this it may be useful to integrate the spectrum within frequency bands related to physiological movements or specific diagnoses.

COMMENT: Before a possible decision about frequency bands, more basic studies have to be made about sample rate, time of analysis and methods of frequency analysis. A profound discussion should be prepared to be held, at the seventh symposium in Houston. (Wapner and Witkin, 1950; Thomas and Whitney, 1959; Helfand, Gurfinkel et al., 1964; Begbie, 1967; Gentshev, Draganova and Dune v, 1972; Leroux, Baron et al., 1973; Dichgans, Mauritz et al., 1976; Njikiktjien and van Parys, 1976; van Parys and Njikiktjien, 1976; Soames, Atha and Harding, 1976; Tokite, Miyata et al., 1976; Seidel, Brauer et al., 1978).

17. MENTIONING OF THE RECOMMENDATIONS ABOUT STANDARDIZATION.

A presentation of a stabilometric study should state whether the above mentioned recommendations were or were not followed. If not, then the experimental conditions should be described in detail.

CONSIDERATION: The use and mention of the recommendations will promote the standardization.

COMMENT: The meeting agrees the intention for growing to standardization in stabilometry and recommends studies about subjects mentioned before for having a useful and good prepared discussion at the Houston Symposium in 1983.

THE COMMITTEE FOR STANDARDIZATION OF STABILOMETRIC METHODS AND PRESENTATIONS,

T .S. Kapteyn (et President ISP)
Ch. J. Nijkoktjien (Secretary ISP)
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REFERENCES

- Agajan G.C. Von (1967). *Untersuchung und Modellierung des Mechanismus der Vertikalen Körperhaltung des Menschen*. Wissenschaftliche Zeitschrift der Karl-Marx-Universität Leipzig, 16 Jahrgang.
- Aggashyan R.V. (1972). *On Spectral and Correlation Characteristics of Human Stabilograms*. Agressologie, 13, 0 : 63-69.
- Amblard B. & Carblanc A. (1978). *Rôle des informations fovéales et périphériques dans le maintien de l'équilibre postural chez l'homme*. Agressologie, 19, A : 21-22.
- Amblard B. & Crémieux J. (1976). *Rôle de l'information visuelle du mouvement dans le maintien de l'équilibre postural chez l'homme*. Agressologie, 17, C 25-35.
- Baron J.B., Bobot J. & Bessineton J.C. (1956). *Statokinésimétrie*. Presse Med., 64, 36 : 863.
- Baron J.B. (1963). *Les troubles oculo-moteurs, origine des déséquilibres du syndrome subjectif post-commotionnel*. Excerpta Medica International Congress series, 62, Amsterdam.
- Baron J.B. (1964). *Présentation d'un appareil pour mettre en évidence les déplacements du centre de gravité du corps dans le polygone de sustentation. Applications pratiques*. Arch. Malad. Profes., 25, 1-2 : 41-49.
- Begbie G.H. (1966). *The Effects of Alcohol and Varying Amounts of Visual Information on a Balancing Test*. Ergonomics, 9, 4 : 325-333.
- Begbie G.H. (1967). *Some Problems of postural Sway*. "Myotatic, Kinesthetic and Vestibular Mechanisms", Ciba Symposium Foundation (Eds A. VS. de Reuck & J. Knight) (pp 80-92), Churchill, London.
- Bessineton J.C., Bizzo G., Pacifici M. & Baron J.B. (1976). *Statokinésigramme, taille, poids, sexe, reproductibilité*. Agressologie, 17, B : 49-54.
- Bles W. & de Wit G. (1976). *Study of the Effects of Optic Stimuli on Standing*. Agressologie, 17, C : 1-5.
- Bles W., Brandt Th., Kapteyn T.S. & Arnold F. (1978). *Le vertige de hauteur, un vertige de distance par une déstabilisation visuelle ?* Agressologie, 19, B : 63-64.
- Bles W., Kapteyn T.S., Brandt Th. & Arnold F. (1980). *The Mechanism of Physiological Height Vertigo*. 11 *Posturography*. Acta Otolaryngol., 89 : 534-540.
- Boman K. & Jalavisto E. (1953). *Standing Steadiness in Old and Young Persons* Ann. Med. Exp. Biol., 31 : 447-453.
- Brauer D. & Seidel H. (1979). *Time Series Analysis of Postural Sway*. Agressologie, 20, B : 111-112.
- Brauer D. & Seidel H. (1980). *The autogressive Structure of postural Sway*. Agressologie, 21, E: 101-104.
- Cantrell R.P. (1963). *Body Balance Activity and Perception*. Percept. Motor Skills, 17 : 431-437.
- Corti U.A. (1959). *Erschütterungsmessungen am Lebenden*. Schweiz. Med. Wch., 89, 22 : 577-
- Dichgans J., Mauritz K.H., Allum J.H.J. & Brandt Th. (1976). *Postural Sway in Normals and Atactic Patients: Analysis of the Stability and Destabilizing Effect of Vision*. Agressologie, 17, C : 15-24.

- Edwards A.S. (1942). *The Measurement of Static Ataxia*. Ann. J. Psych., 55 : 151-188.
- Edwards A.S. (1946). *Body Sway and Vision*. J. Exp. Psych., 36: 526-535.
- Fearing F.S. (1924 a). *The Factors Influencing Static Equilibrium. An Experimental Study of the Influence of Height, Weight, and Position - of the Feet on Amount of Sway, etc.* J. Comp. Psych., 4 : 91-121.
- Fearing F.S. (1924 b). *The Factors Influencing Static Equilibrium. An Experimental Study of Effects of Practice Upon Amount and Direction of Sway*. J. Comp. Psych., 4 : 163.
- Fearing F.S. (1925). *The Factors Influencing Static Equilibrium. An Experimental Study of the Effect of Controlled and Uncontrolled Attention Upon Sway*. J. Comp. Psychol., 5, 1 : 1-24.
- Fukuda T. (1952). *Vision and Posture*. Pract. Otol. (Kyoto), 54 : 85.
- Gantchev G.N., Draganova N. & Dunev S. (1972). *The Role of Visual Information and Ocular Movements for the Maintenance of Body Equilibrium*. Agressologie, 13, B : 55-61.
- Guegen G. & Leroux J. (1973). *Identification d'un modèle représentant les déplacements du centre de gravité de l'homme*. Agressologie, 14, C : 73-77.
- Guegen J., Leroux J., Domenger J.C. & Poulard G. (1976). *Sur l'influence du retour visuel sur la régulation de la posture*. Agressologie, 17, C : 63-66.
- Geursen J.B., Altena D., Massen C.H. & Verduin M. (1976). *A Model of the Standing Man for the Description of his Dynamic Behaviour*. Agressologie, 17, B : 63-69.
- Gurfinkel V.S. (-1973). *Physical Foundations of Stabilography*. Agressologie, 14, C : 9-14.
- Gurfinkel V.S., Kots J.M. & de Chick M.L. (1965). *Regulatzia pozy tchecosloveka*. Nauka, Moscou.
- Helfand M.M.I.M., Gurfinkel V.S., Kots Y.M., Krinski V.L., Tsetline M.L. & de Chick M.L. (1964). *Biophysique des systèmes complexes. Modèles mathématiques. Etude de l'activité posturale*. Biophysique, 9 (pp 475-486). Académie des Sciences d'URSS, Moscou.
- Hellebrandt F.A., Tepper R.H., Braun G. & Elliott M.C. (1937). *The Location of the "Cardinal Anatomical Orientation Planes Passing Through the Center of Weight in Young Adult Women*. Amer. J. Physiol., 121 : 465-470.
- Hirasawa Y. (1973). *Study on Human Standing Ability*. Agressologie, 14, C : 37-44.
- Hlavacka F. & Litvinenkova V. (1973). *First Derivative of the Stabilogram and Posture Control in Visual Feed-Back Conditions in Man*. Agressologie, 14, C : 45-49.
- Hlavacka "F. & Saling M. (1979). *Influence of the artificially increased Body Weight on upright Posture*. Agressologie, 20, B : 161-162.
- Jarrige P. (1968). *Présentation d'un appareil de mesure automatique des déplacements au cours du test de Romberg*. Arch. Mal. Prof. Med. Travail Sécurité Sociale (Paris), 29, 1-2 : 43-50.
- Kapteyn T.S. (1972). *Data Processing of Posturographic Curves*. Agressologie, 13, B : 29-34.
- Kapteyn T.S. (1973). *Afterthought about the Physics and Mechanics of the Postural Sway*. Agressologie, 14, C : 27-35.
- Kapteyn T.S. (1978). *Observations on the Analysis in Stabilometry*. Agressologie, 19, A : 11-12.
- Kapteyn T.S. & Bles W. (1976). *Effects of Optic and Vestibular Stimuli on the Stabilograms of Patients with Dizziness Complaints*. Agressologie, 17, O : 25-29.
- Kapteyn T.S., Bles W., Brandt Th. & Wist E.R. (1979). *Visual Stabilization of Posture: Effect of light Intensity and stroboscopic Surround Illumination*. Agressologie, 20, C : 191-192.
- Kodde L., Caberg H.B. & Mol J.M.F. (1982). *An Application of Mathematical Models in Posturography*. J. Biomed. Engin., 4 : 44.
- Kuhnke E. (1950). *Ueber die menschlichen Körper schwankungen und Ihre Veriinderung im Laufe liingeren Stehens*. Pflugers Archiv., 252, S : 590-598.
- Lee D.N. & Lishman J.R. (1976). *Vision The most efficient Source of proprioceptive Information for Balance Control: A film on visual Kinaesthesia*. Agressologie, 17, O : 67-72.
- Leifer L.J. & Meyer M. (1975). *Postural Mode Description by Correlation and Transferfunction Measurement*. Proceedings of 75 IEEE. Systems, Man, and Cybernetics, San Francisco USA.
- Leroux J., Baron J.B., Bizzo G., Bessineton J.C., Guegen C., Noto R. & Parifici M. (1973). *Etude spectrale des déplacements spontanés antéro-postérieurs et latéraux du centre de gravité de l'homme en orthostatisme*. Agressologie, 14, C : 57-63.
- Litvinenkova V. & Baron J.B. (1968). *Variations de la régulation posturale en fonction des informations visuelles et oculomotrices*. C.R. Soc. Biol. (Paris), 162,7: 1294-1299.
- Marne-Karelse A.M. & Bles W. (1977). *Circular Vection and Human Posture. II Does the Auditory System play a role?* Agressologie, 18, 6 : 329-333.
- Massen C.H. & Kodde L. (1979). *A Model for the Description of Left-Right Stabilograms*. Agressologie, 20, B : 107-108.
- Matsuoka T. (1977). *Quantitative Analysis of the Body Sway while Standing*. Pratica Otol. (Kyoto), 70, suppl. 1191.
- Nashner L.M. (1971). *A Model Describing Vestibular Detection of Body Sway Motion*. Acta Otolaryng., 72 : 429-436.
- Njiokiktjien Ch. & Rijke W. de (1972). *The Recording of Romberg Test and its Application in Neurology*. Agressologie, 13, C : 2-7.
- Njiokiktjien Ch. & Parys J.A.P. van (1976). *Romberg's Sign Expressed in a Quotient II. - Pathology*. Agressologie, 17, O : 19-24.
- Okubo J., Watanabe I., Takeyda T. & Baron B. (1979). *Influence of Foot Position and visual Field, Condition in the Examination for Equilibrium Function and Sway of the Center of Gravity in normal Persons*. Agressologie, 20, 2 : 127-132.
- Owen Black F.O., O'Leary D.P. & Wall III C. (1976). *The Vestibulospinal Stability Test: Normal Limits*. ORL-549.
- Parys J.A.P. van & Njiokiktjien Ch. J. (1976). *Romberg's Sign Expressed in a Quotient*. Agressologie, 17, B : 95-100.
- Scott D.E. & Dzendolet E. (1972). *Quantification of Sway in Standing Humans*. Agressologie, 13, B : 35-40.
- Seidel H. & Brauer D. (1979). *Effects of Visual Information, Conscious Control and Low-Frequency Whole-Body" Vibration on Postural Sway*. Agressologie, 20, C : 189-190.
- Seidel H., Brauer O., Bastek R. & Issel I. (1978). *On the Reproducibility and Changes of Stabilograms in Investigations with Long-Term Performance*. Agressologie, 19, B : 93-94.
- Smith J.W. (1953). *The act of standing*. Acta Orthoped., 3 : 159-168.
- Smith J.W. (1957). *The Forces Operating at the Human Ankle Joint. During Standing*. J. Anat. (London), 91 : 545-564.
- Soames R.W. & Atha J. (1978). *Antero-Posterior and lateral Sway in young Men and Women*. Agressologie, 19 A : 13-14.
- Soames R.W., Atha J. & Harding R.H. (1976). *Temporal Changes in the Pattern of Sway as Reflected in Power Spectral Density Analysis*. Agressologie, 17, B : 15-20.
- Spaepen A.J., Fortuin J.M. & Willems E.J. (1979). *Comparison of the Movements of the Center of Gravity and the Center of Pressure in Stabilometric Studies. Comparison with Fourier analysis*. Agressologie, 20, B : 115-166.
- Spaepen A.J., Peeraer L. & Willems E.J. (1979). *Center of Gravity and Center of Pressure in Stabilometric Studies. A comparison with Film Analysis*. Agressologie, 20, B : 117-118.
- Spaepen A.J., Vranken M. & Willems E.J. (1978). *Comparaison des déplacements du centre de pression et du centre de gravité chez des sujets normaux et des patients scoliotiques*. Agressologie, 19, B : 75-76.
- Sugano H. & Takeya T. (1970). *Measurement of Body Movement and its Clinical Application*. J. Physiol. (Lond.), 20, 3 : 296-308.
- Taguchi K. (1978). *Spectral Analysis of the Movement of the Center of Gravity in vertiginous and ataxic Patients*. Agressologie, 19, B : 69-70.

- Takeya T., Sugano H. & Ohno Y. (1976). *Auditory and Visual Feed-back of Postural Sway*.
Agressologie, 17, C : 71-74.
- Thomas D.P. & Whitney R.J. (1959). *Postural Movements During Normal Standing in Man*.
J. Anat. (London), **93** : 524-539.
- Tokita T., Miyata H., Matsuoka T., Taguchi T. & Shimada R. (1976).
Correlation Analysis of the Body Sway in Standing Posture.
Agressologie, 17, B : 7-14.
- Tokita T., Watanabe J. & Fukuda T. (1972). *Telemetering of Eye and Head Movements in Ballet Rotation*.
Agressologie, 13, B : 21-27.
- Tokumasu T. & Kawano R. (1976). *Head Sway during Stepping in old and young Adults*.
Agressologie, 17, B : 1-6.
- Vierordt R. (1864). *Grundzüge der Physiologie des Menschen*, Berlin.
- Wapner S. & Witkin H.A. (1950). *The role of visual Factors in the Maintenance of Body-Balance*.
Amer. J. Psychol., **63** : 385-408.
- Watanabe I., Okubo J. & Ishida A. (1980). *Significance of Velocity Power-Spectrum Analysis in Postural Reflex and Equilibrium Oys-function*.
Agressologie, **21**, E : 105-111.
- Wit G. de (1972). *Optic versus Vestibular and Proprioceptive Impulses, Measured by Posturometry*,
Agressologie, 13, B : 75-79.