Designing and Evaluating VR Games for Phantom Limb Pain management

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*Phantom limb pain (PLP) is a type of chronic pain caused by limb amputation, brachial plexus avulsion injury (BPA), or spinal cord injury (SCI).

Virtual hands:

mirroring movement of the intact hand through synchronized movement



Ownership: sense that the virtual hands are part of the self

Agency: controlling the movement of the virtual hands and performing a meaningful action

Self-location: feeling the physical body and virtual body are co-located



Left: Study participant: Amputee with phantom limb pain; Right:Basketball Reaching & Shooting Motor Tasks. Participants: 5 in total: 4 BPA, 1 upper limb amputee.

Study Design: This study was a before-after longitudinal study (case study/case series).

Procedures:

	Semi-structured							Embodiment	
	Interview	Pain Evaluation	Motor Imagery & Execution Te	est	VR Interventions	Pain Evaluation	on	Evaluation	
()	5	10	20		50	55	(60 (min)

One sample one-hour session study intervention

(1) before each session: self-reported pain evaluations via the McGill Pain Questionnaire, Visual Analog Scale (VAS) pain ratings. Motor imagery movement time was also measured.

(2) intervention: placement of the VR headset and the controller in the intact hand, and practice the three intervention tasks in order, each for 5 minutes and repeat twice, which includes mirror hand movement and observation, ball -reaching action, and then shooting a basketball action.

(3) after the test, the participants were again asked to fill in their VAS pain ratings, embodiment scores (self-reported SoO & SoA).



Mean VAS rating for all sessions: 19.04% (SD = 13.47%). Mean change in VAS for pre-post each sessions/all participants=-21.23% (SD = 15.95%).

Change in Ownership and Agency

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The mean ratings for SoO increased to 4.0, a change of 66.67%.

The mean for SoA increased to 8.4, a change of 21.74%.



"I had a dream yesterday, and I saw my right hand and arm moving! It felt so good and so vivid that I can still remember."

Patient 5

Three participants spontaneously reported that after the VR therapy, they experienced dreams where they had complete control of their missing or impaired limbs as they had before their injury. 1. A major limitation of this study is the small sample size. Nevertheless, the findings are encouraging since all five participants responded with different reductions of their phantom limb pain and associated improvements in anxiety and depression.

2. Very few studies explored the analgesic effect of multiple VR sessions with more than two or three patients.

3. My study was one of the few that report an improvement of quantitative measures regarding movements of a phantom limb in VR (motor imagery).

4. However, correlational analysis between embodiment and PLP were not analyzed due to small sample size. But from the descriptive data, the patients' sense of embodiment improved after the study.