Content available at: https://www.ipinnovative.com/open-access-journals

Journal of Education Technology in Health Sciences

JATIVE PUBLICATION

Journal homepage: https://jeths.org/

Short Communication

Wearable technology and digital feedback systems in TBI physiotherapy: An educational framework

Mohammed Sheeba Kauser1*, Subhasis Karmakar2

¹Dept. of Physiotherapy, Saveetha College of Physiotherapy, Saveetha Institute of Medical and Technical Sciences, Chennai, India ²Dept. of Physiotherapy, Dubai, UAE

Abstract

Traumatic Brain Injury (TBI) often results in complex motor, cognitive, and sensory impairments that significantly challenge functional recovery. Physiotherapy plays a critical role in rehabilitation, yet optimizing outcomes requires continuous monitoring, individualized interventions, and high patient engagement. Wearable technology and digital feedback systems have emerged as innovative tools that offer real-time data, improve patient adherence, and enhance clinical decision-making. Beyond their clinical utility, these technologies also serve as powerful educational resources for patients, caregivers, and physiotherapy students. This article proposes an educational framework that integrates wearable devices, motion sensors, mobile applications, and digital biofeedback systems into TBI physiotherapy practice. The framework outlines how wearable-driven data supports teaching, assessment, and communication, ultimately improving patient autonomy and functional outcomes. Opportunities, challenges, and recommendations for implementation in academic and clinical settings are discussed.

Keywords: Traumatic Brain Injury, Physiotherapy, Wearable technology, Digital feedback, Rehabilitation technology, Patient education, Biofeedback, Motor recovery

Received: 14-10-2025; Accepted: 19-11-2025; Available Online: 27-11-2025

This is an Open Access (OA) journal, and articles are distributed under the terms of the Creative Commons Attribution-NonCommercial-ShareAlike 4.0 License, which allows others to remix, tweak, and build upon the work non-commercially, as long as appropriate credit is given and the new creations are licensed under the identical terms.

For reprints contact: reprint@ipinnovative.com

1. Introduction

Traumatic Brain Injury is a major global health concern, resulting in long-term disabilities that affect mobility, coordination, balance, and overall functional independence. Physiotherapy is essential for promoting neuroplasticity and facilitating motor recovery. However, traditional rehabilitation methods often rely on observational assessments, subjective reporting, and limited session-based monitoring.¹

The emergence of wearable technology—including inertial measurement units (IMUs), smartwatches, pressure sensors, and electromyography (EMG) wearables—combined with digital feedback systems such as mobile applications, virtual dashboards, and real-time biofeedback platforms, has transformed how rehabilitation can be delivered and learned. These tools provide objective, continuous data that can support therapeutic decisions and enhance engagement through interactive feedback.²

Importantly, the integration of these technologies does not only improve clinical practice; it also opens new avenues for education, empowering patients in self-management and equipping physiotherapy students with advanced digital competencies. This article presents a structured educational framework for the integration of wearable and digital feedback technologies into physiotherapy rehabilitation for individuals with TBI.³

2. The Role of Wearable Technology in TBI Rehabilitation

Wearable technology offers valuable metrics that support the assessment of motor function. Commonly used devices include:

2.1. Inertial Measurement Units (IMUs)

IMUs measure acceleration, rotation, and movement orientation. In TBI rehabilitation, they help monitor gait deviations, asymmetry, stride length, and postural stability. Physiotherapists can use IMU data to track recovery progress and adjust interventions.²

*Corresponding author: Mohammed Sheeba Kauser Email: sheebaishaq.doc@gmail.com

2.2. Smartwatches and fitness trackers

Smartwatches provide accessible information on daily activity levels, heart rate variability, sleep patterns, and energy expenditure. For TBI survivors—who may experience fatigue, dysautonomia, and irregular sleep—these metrics help regulate therapeutic workload.³

2.3. Pressure-sensing insoles and wearable gait analyzers

These devices measure weight distribution and foot pressure. They are particularly useful for patients with balance impairments or hemiparesis, allowing therapists to detect asymmetries and gait abnormalities.⁴

2.4. EMG wearables

Wearable EMG sensors monitor muscle activation patterns during movement. This helps identify compensatory behaviors, muscle weakness, and neuromotor dysfunction—critical insights for targeted rehabilitation planning.³

2.5. Wearable balance systems

Vest-mounted sensors and waist belts equipped with accelerometers provide real-time feedback on sway, trunk control, and center-of-mass positioning.²

Collectively, these tools supply objective data, enabling physiotherapists to design individualized programs grounded in measurable outcomes rather than solely observational assessment.

3. Digital Feedback Systems and their Rehabilitation Impact

Digital feedback systems convert sensor data into meaningful visual, auditory, or tactile cues. Their educational and therapeutic benefits include:

3.1. Real-time biofeedback

Real-time motion capture and display systems allow patients to see how well they perform specific movements. For TBI patients who struggle with motor planning, this immediate reinforcement improves motor learning and accelerates neuroplastic changes.⁵

3.2. Gamified rehabilitation platforms

Gamification motivates patients through progress scores, task challenges, and goal-based rewards. Enhanced engagement is particularly beneficial for individuals with cognitive or motivational deficits following TBI.⁴

3.3. Mobile Health (mHealth) applications

Apps integrated with wearable data can:

- 1. Track home exercise programs
- 2. Send reminders
- 3. Monitor fatigue
- 4. Visualize trends over time
- 5. Communicate results to clinicians

These features support self-management and enhance adherence.

3.4. Tele-rehabilitation feedback loops

Remote monitoring systems allow clinicians to review patient data and provide feedback outside traditional clinic visits. This is particularly valuable for rural populations, where access to specialized neuro-rehabilitation may be limited.

3.5. Educational Framework for integrating wearables and feedback systems in TBI physiotherapy

3.5.1. Pillar 1: Patient and caregiver education

Wearable technologies act as powerful educational tools to improve patient engagement, understanding of goals, and adherence.

- 1. Enhancing self-awareness through data: Visual dashboards help patients recognize:
 - a. Gait deviations
 - b. Balance difficulties
 - c. Muscle activation deficits
 - d. Progress over time

By understanding their own biomechanics, patients become active participants in rehabilitation, which improves motivation and outcomes.

- Facilitating home exercise programs: Wearable-guided home programs reduce dependence on clinic visits. Patients can perform exercises confidently with real-time feedback, while therapists can track compliance.⁶
- 3. Educating caregivers for better support: Caregivers often assist with daily mobility tasks. Digital feedback provides them with insight on:
 - a. Safe handling techniques
 - b. Optimal exercise assistance
 - c. Warning signs of fatigue or decline

This supports continuity of therapy at home.

3.5.2. Pillar 2: Physiotherapy student education

Digital tools enhance professional training by offering objective, measurable insights into human movement.

- 1. **Data-driven learning:** Students can analyze wearable-derived data to:
 - a. Identify gait abnormalities
 - b. Study compensatory movement patterns
 - c. Learn clinical reasoning based on objective measures

This strengthens diagnostic and analytical skills.

- 2. Clinical simulation and skill development: Digital environments allow for safe practice:
 - a. Students can simulate TBI-related impairments
 - b. Practice therapeutic techniques with wearable feedback
 - c. Understand how technology influences treatment planning

- 3. **Interdisciplinary training:** Wearables encourage collaboration between:
 - a. Physiotherapists
 - b. Occupational therapists
 - c. Biomedical engineers
 - d. IT specialists

This prepares students for increasingly tech-driven healthcare ecosystems.

3.5.3. Pillar 3: Clinical Education and Decision-Making for Therapists

Therapists benefit from advanced data that supports personalized rehabilitation.

- 1. **Individualized treatment planning:** By interpreting wearable-derived metrics, therapists can tailor:
 - a. Intensity
 - b. Frequency
 - c. Type of exercise
 - d. Progression criteria

Such precision enhances outcomes and reduces the risk of overexertion.

- Tracking outcomes and adjusting interventions:
 Objective data enables earlier detection of plateaus or regressions, prompting timely intervention changes.
- 3. Enhancing communication with the healthcare team: Wearable data is easily shareable among multidisciplinary teams, improving coordinated care across neurology, physiatry, and mental health services.

4. Benefits of Technology Integration in TBI Rehabilitation

- 1. **Continuous monitoring:** Wearables provide 24/7 data collection, offering insights that clinic-based assessments may miss.
- 2. **Enhanced patient engagement:** Gamification, visual feedback, and goal setting foster motivation—often challenging in TBI populations.
- 3. **Improved safety:** Real-time monitoring can alert patients and therapists of instability or fatigue, preventing falls.
- 4. **Objective assessment:** Reduces reliance on subjective reporting and increases accuracy of clinical decisions.
- Greater accessibility: Tele-rehab and app-based feedback expand physiotherapy beyond geographical and mobility barriers.

5. Challenges to Implementation

Despite strong potential, several obstacles exist:

- 1. **Cost and accessibility:** Advanced wearables may be expensive or unavailable in low-resource settings.
- Data management: Handling large volumes of movement data requires robust software and trained personnel.

- User training needs: Patients with cognitive deficits may require simplified interfaces or caregiver assistance.
- 4. **Privacy and ethical concerns:** Secure data storage and informed consent procedures are essential.
- 5. Clinical acceptance: Some practitioners may be hesitant to adopt new technologies due to unfamiliarity or skepticism.

6. Conclusion

Wearable technology and digital feedback systems are transforming the landscape of TBI physiotherapy rehabilitation. By providing real-time data, enhancing patient engagement, and supporting objective clinical decision-making, these tools are reshaping how therapy is delivered and learned. The proposed educational framework demonstrates how wearables can empower patients, enrich physiotherapy student training, and support clinicians in evidence-based practice. As technology becomes more accessible and refined, its integration into TBI rehabilitation will become increasingly essential—offering new pathways to improved functional outcomes and long-term independence. §

7. Source of Funding

None.

8. Conflict of Interest

None.

References

- Murphy T.H, Corbett D. Plasticity during stroke recovery: From synapse to behaviour. *Nat Rev Neurosci*. 2009;10(12):861–72. https://doi.org/10.1038/nrn2735
- Graver CJ, Adams KM. Textbook of Traumatic Brain Injury. Edited by JM Silver, TM McAllister, SC Yudofsky: A review of: "Textbook of Traumatic Brain Injury." Clin Neuropsychol. 2007;21(4):712–6. https://doi.org/10.1080/13854040601025568
- Center for Disease Control and Prevention 2014. Traumatic Brain Injury in the United States: Fact sheet. Available from: http://www.cdc.gov/traumaticbraininjury/get_the_facts.html
- Casella EM, Thomas TC, Vanino DL, Fellows-Mayle W, Lifshitz J, Card JP, et al. Traumatic Brain Injury alters long-term hippocampal neuronal morphology in juvenile, but not immature, rats. *Childs Nerv* Syst. 2014;30(8):1333–42. https://doi.org/10.1007/s00381-014-2446-z
- Kraus JF, Fife D, Conroy C. Pediatric brain injuries: The nature, clinical course, and early outcomes in a defined United States population. *Pediatrics*. 1987;79(4):501–7.
- Burda JE, Sofroniew MV. Reactive gliosis and the multicellular response to CNS damage and disease. *Neuron*. 2014;81(2):229–48. https://doi.org/10.1016/j.neuron.2013.12.034
- Nahmani M, Turrigiano G.G. Adult cortical plasticity following injury: Recapitulation of critical period mechanisms? *Neurosci*. 2014;283:4–16. https://doi.org/10.1016/j.neuroscience.2014.04.029
- Carmichael ST. Plasticity of cortical projections after stroke. Neuroscientist. 2003;9(1):64–75.

Cite this article: Kauser MS, Karmakar S. Wearable technology and digital feedback systems in TBI physiotherapy: An educational framework. *J Educ Technol Health Sci.* 2025;12(3):98–100.