Possibilities of a Body-Region Separately Weighing System in Healthcare

Noriko Kurata

Chuo University, Japan

Masakazu Ohashi

Chuo University, Japan

Hiroshi Ichikawa

Otsuma Women's University, Japan

Mavumi Hori

Hakuoh University, Japan

Sumiko Kurata

Tokyo Kasei-Gakuin University, Japan

Tadao Kurata

Niigata University of Pharmacy and Applied Life Sciences, Japan

INTRODUCTION

In this chapter, a newly developed system for regional weight measurement of the human body; "body-region separately weighing system" (BRSW-system); was shown to be potentially applicable for self-measurement of regional weights of own body to use the measurement data for personalized health management.

The BRSW-system is the world's first regional body weight measuring system devised by Kurata, and patented in Japan (JP Patent No.4290704, 2009), US (US Patent No.8540649, 2013), EU (EP Patent No.1985978, 2014), and other countries; however, it is not commercially available currently.

BACKGROUND

The human body consists of the following six main regions: the head, the upper extremities, the torso and the lower extremities. Each of these body regions has its own functions and consists of its own set of tissues, such as connective tissue and muscle tissue, needed to perform those functions. As the weight of the tissues forming the various body regions differ from one region to another, the weights of the body regions themselves also differ.

From a kinesiological perspective, the two hands, two lower extremities, trunk and head participate in various movements and thus can be broadly regarded as components of the musculoskeletal system. Knowing the weight (or the mass, to be exact) of each body region is very important when scientifically assessing the mechanical role of each body region during movement and their contribution to postural control. Studies that measured the weights of body regions, however, have all been based on data from

DOI: 10.4018/978-1-4666-9978-6.ch058

cadavers in which the weight of each body region was measured after it was dismembered from the body (Dempster & Gaughran, 1967; Mozumdar & Roy, 2004), and no reports on the weighing of body segments on living bodies could be found. Thus, while the current way of measuring body weight throughout the world is to stand on a scale to determine whole body weight, the weights of and weighing methods of one's separate body regions, which is more important information as far as body movements in everyday life are concerned, are at present largely unknown.

Meanwhile, the rate of aging is accelerating in Japan,, as shown in Table 1, and according to the Ministry of Internal Affairs and Communications, the number of people aged 65 years or older is 32.96 million as of September 2014, accounting for an unprecedented 25.9% of the total population, with one in eight people now aged 75 years or older.

The average life expectancy of a Japanese person is long; 79.55 years for men and 86.30 for women as of 2010 according to the Ministry of Health, Labour and Welfare. However, healthy life expectancy is estimated to be 70.42 years for men and 73.62 years for women. Healthy life expectancy is the period in which an individual lives without health problems, so men have approximately nine years of life with health problems and women have approximately 12 years. The reasons behind reduced independence, being bedridden, or the need for assistance or long-term care are musculoskeletal disorders (23%), cerebrovascular disorders (22%), cognitive impairment (15%), debility (14%), and other problems (26%) (Ministry of Health, Labour and Welfare, 2012), thereby revealing the importance of health of the musculoskeletal system. Maintaining a healthy musculoskeletal system therefore greatly contributes to prolonging healthy life expectancy.

The musculoskeletal system is composed of the bones, joints, muscles, nerves, etc., in the body regions such as the upper and lower extremities that are necessary in order to freely move the body. The various parts of the musculoskeletal system all work together, so if any one of them deteriorates, the entire body will not move well. Reduced locomotive function of the body due to musculoskeletal impairment is called "locomotive syndrome" (LS), which may lead to an increased risk for requiring long-term care if it progresses. In other words, LS is a condition in which one or several of the various musculoskeletal tissues such as muscles, bone, joints, cartilage and intervertebral discs are impaired, thereby disrupting gait or other activities of daily living, and is a concept that was proposed by the Japanese Orthopaedic Association in 2007 following projections for Japan's future with its aging society.

Simple methods of managing health are therefore needed at the individual level in order to extend healthy life expectancy and maintain health until individuals reach the average life expectancy. Moreover, a simple method of quantitatively assessing muscles is required, although a method has yet to be established.

Table 1. Changes in the elderly population in Japan

Year	Total Population	Aged People (Over 65 Years of Age)	Percentage of Aged People (%)
1970	103,720,000	7,330,000	7.1
1980	117,060,000	10,650,000	9.1
1990	123,610,000	14,930,000	12.1
2000	126,930,000	22,040,000	17.4
2010	128,060,000	29,480,000	23.0
2020	124,100,000	36,120,000	29.1
2030	116,620,000	36,850,000	31.6

Data source: Bureau of Statistics, Ministry of Internal Affairs and Communications, 2014.

9 more pages are available in the full version of this document, which may be purchased using the "Add to Cart" button on the publisher's webpage:

www.igi-global.com/chapter/possibilities-of-a-body-region-separatelyweighing-system-in-healthcare/152000

Related Content

A Review of Existing Applications and Techniques for Narrative Text Analysis in Electronic Medical Records

Alexandra Pomares-Quimbaya, Rafael A. Gonzalez, Santiago Quintero, Oscar Mauricio Muñoz, Wilson Ricardo Bohórquez, Olga Milena Garcíaand Dario Londoño (2016). *Encyclopedia of E-Health and Telemedicine (pp. 796-811).*

www.irma-international.org/chapter/a-review-of-existing-applications-and-techniques-for-narrative-text-analysis-in-electronic-medical-records/152004

Design and Build a Wizard of Oz (WOZ) Telemedicine Simulator Platform

Aric Katzand Avraham Shtub (2016). *Encyclopedia of E-Health and Telemedicine (pp. 128-141).* www.irma-international.org/chapter/design-and-build-a-wizard-of-oz-woz-telemedicine-simulator-platform/151952

Mobile Health Applications and Cloud Computing in Cytopathology: Benefits and Potential Stavros Archondakis, Eleftherios Vavoulidis, Maria Nasioutziki, Ourania Oustampasidou, Angelos Daniilidis, Anastasia Vatopoulou, Alexios Papanikolaouand Konstantinos Dinas (2019). *Mobile Health Applications for Quality Healthcare Delivery (pp. 165-202).*

 $\underline{www.irma-international.org/chapter/mobile-health-applications-and-cloud-computing-in-cytopathology/219859}$

The Urine Drug Screen in the Emergency Department: Overuse, Technical Pitfalls, and a Call for Informed Consent

Megan Yuand Charles Desmond Donohoe (2022). *International Journal of Health Systems and Translational Medicine (pp. 1-11).*

www.irma-international.org/article/the-urine-drug-screen-in-the-emergency-department/282703

GAN-Based Medical Images Synthesis: A Review

Huan Yangand Pengjiang Qian (2021). *International Journal of Health Systems and Translational Medicine* (pp. 1-9).

www.irma-international.org/article/gan-based-medical-images-synthesis/277366