



Evgenii K.
ExoAtlet's pilot,
diagnosis: SCI, C6-C7

"Thanks to the ExoAtlet exoskeleton and a bodyweight support system I was able to feel this wonderful sensation of walking again after being in a wheelchair for ... years."



Sergei Kotov
Professor, Advanced Doctor
of Medical Sciences, Russia.

"We have tried to rehabilitate our patients by using an advanced rehabilitation method – an exoskeleton. Both patients with severe conditions, who were unable to walk independently, and patients with mild disorders showed very good results. Together, we managed to start restoration of their locomotor functions. Notably, their EDSS index reduced after training and, most importantly, stayed the same on the third month after therapy."



Elena Shapkova
Ph.D., Leading Researcher
at the Laboratory of Clinical
Neurophysiology and
Neurorehabilitation
Technologies, Russia.

"Our patients completed three rehabilitation programs and the outcomes are impressive – they improved their walking skills, improved emotional condition. Moreover, there was a tremendous increase in muscle strength in completely paralyzed patients."



Mikhail Lebedev
Ph.D., Senior Research
Scientist at Duke University,
the USA.

"ExoAtlet is the best solution not only for practical tasks of my patients' rehabilitation but also for research on the motor control of posture and locomotion – the fundamental studies that eventually lead to new clinical applications. With the aid of a brain-machine interface, human participants can simply give commands to the exoskeleton by thinking about it. Moreover, we have been investigating how such a brain-to-exoskeleton link could contribute to functional restoration and rehabilitation of patients suffering from lower-limb paralysis."



Miguel Pais-Vieira
Professor, PhD., Doctor
at Católica University,
Portugal.

"ExoAtlet exoskeleton allowed me to test my scientific hypothesis, answer the questions that would remain unanswered otherwise, and state new questions. With its help, I compared patterns of neural activity occurring in the human brain in healthy and pathological conditions. For example, the use of the exoskeleton during brain-machine interface control tests revealed fundamentally different dynamics of neural activity occurring in different patterns of locomotion."

EXOATLET II
IS DESIGNED AS
A GAIT TRAINING
AND REHABILITATION
DEVICE TO IMPROVE
WALKING FUNCTION
AND INDEPENDENCE
IN PATIENTS WITH **SCI**,
MULTIPLE SCLEROSIS,
CEREBRAL PALSY, **THE**
EFFECTS OF A STROKE,
AND THOSE RECOVERING
FROM **ARTHROPLASTY**.

CE Mark and ISO 13485:2016 certified,
pending FDA market clearance.

Please visit www.exoatlet.lu
for further information.

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2020



**EXOSKELETON
FOR MEDICAL
REHABILITATION**

EXOATLET II



EXOATLET II

EXOATLET

IT ALL
BEGINS
WITH THE
FIRST
STEP



IT ALL
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WITH THE
FIRST
STEP



Key features

- The movement can be initiated by the patient's efforts;
- Adaptive movement support according to the patient's abilities;
- Complete analytics and training reporting;
- A large number of anthropometric settings (13 position), including adduction-abduction of the thigh and inversion-eversion of the foot – the eksoskeleton geometry is restored as correctly as possible, so that the load on the joints occurs in the most physiological way;
- Walking the stairs;
- FES module compatibility.

Training and maintenance

We provide a complimentary training course for end-users' staff upon delivery. Full and fast service is available by our trained specialists.

80% of the cases are closed in less than 4 days.
60 satisfied clients in 6 countries worldwide.


ExoAtlet is used in more than **70 hospitals** worldwide




IT ALL BEGINS WITH THE FIRST STEP



EXOATLET

 pilot's weight should not exceed **100 kg**

 pilot's height from **160 to 190 cm**

Ways of control

- ExoCrutch for patients (the control panel on a crutch);
- Tablet for medical staff or assistant;
- Ergonomic handles with control buttons.

Clinical trials

ARTHROPLASTY
20 patients, 1 clinic
 Since 2019

STROKE
29 patients, 3 clinics
 Since 2017

CEREBRAL PALSY
46 patients, 3 clinics
 Since 2018

MULTIPLE SCLEROSIS
72 patients, 1 clinic
 Since 2016

TRAUMATIC BRAIN INJURY
7 patients, 3 clinics
 Since 2017

SPINAL CORD INJURY
481 patients, 16 clinics
 Since 2015

