Longitudinal Study of the Effects of an Adjustable Ergonomic Keyboard on Upper Body Musculoskeletal Symptoms

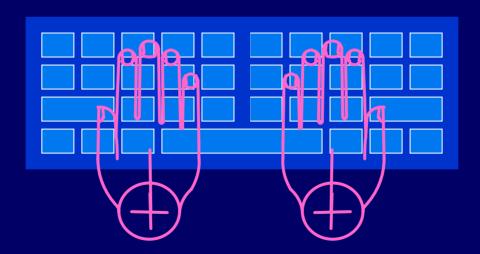
Alan Hedge et al.

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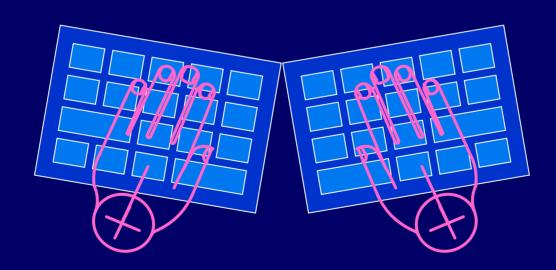
Research Team

- Mark Goldstein, Goldtouch technologies Inc.
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- Cari Varner, Cornell University
- Don Silva, Blue Cross Blue Shield
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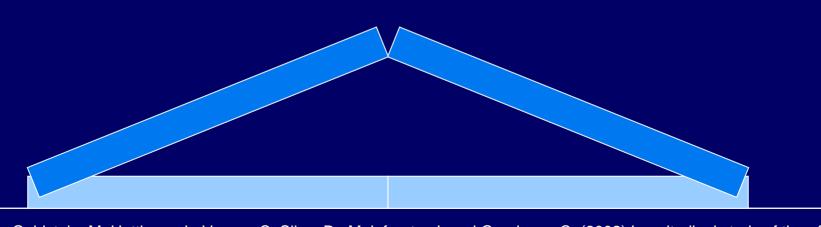
Conventional keyboards – keypad is linear and can encourage ulnar deviation



 Splayed keyboards – keypad is halved and each half laterally rotated to minimize ulnar deviation



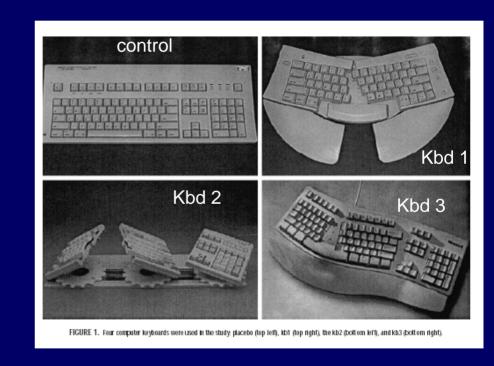
Tented keyboards – keypad halves are angled to an apex to minimize wrist pronation



- □ Fixed designs splay and tent angles are fixed
- Adjustable designs splay and tent angles are adjustable

Alternative Keyboards Field Studies

- ☐ Tittiranonda et al. (1999)
 - Tested 4 keyboards with 80 users for 6 months (20 per kbd)
 - Results most positive for kbd2 (adjustable), but 9 dropouts from sample – unreliable results
 - Kbds 1&3 showed some improvements in pain compared with control
 - Users may experience decreased hand pain after several months of using alternative geometry keyboard



Research Issues

Does the use of an adjustable keyboard over an extended period of time result in an effect on symptoms of upper body musculoskeletal disorders (MSDs)?

Research Study

- □ Site large, urban insurance office
- Subjects 80 subjects selected and allocated into 2 groups based on results from a wellness survey. Subjects matched for age, gender and initial MSD reports.

Complete data for 73 subjects:

- Test group 37 subjects
- Control group 34 subjects

Research Design

- Baseline survey all subjects completed an initial survey of computer use and MSDs.
- All subjects received instruction and guidance on setting up their office workspace (chair use, desk surface height, etc.)
- Control group no other intervention
- Test group subjects provided with an adjustable keyboard and given some instruction on how to adjust and use this keyboard.

Adjustable Keyboard

Test keyboard with adjustable splay and tent angles



Adjustable Keyboard

Test keyboard with adjustable splay and tent angles







Research Measures

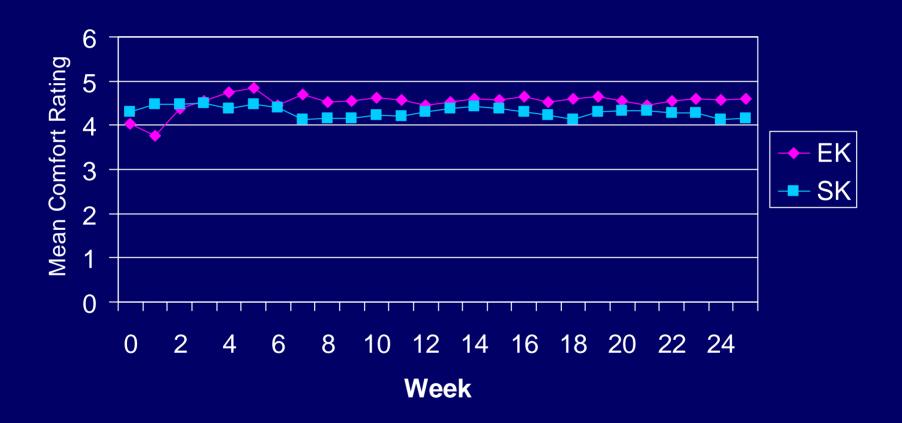
- Baseline survey results
- Weekly "keyboard evaluation survey" results gathered for both groups for a 6 months period
- □ Terminal Interviews Test subjects were interviewed at the end of the study

Results

- Data from a total of 1,442 surveys were analyzed
- Subjects in both groups were full-time keyboard users (median weekly keyboard use = 30 hours)
- Over the course of the study MSDs were reported by all users:
 - 50% lower back pain
 - 43% neck pain
 - 40% shoulder/forearm/wrist pain

Mean Keyboard Comfort Ratings

• No significant difference in comfort ratings at the 0.5 level after 6 months

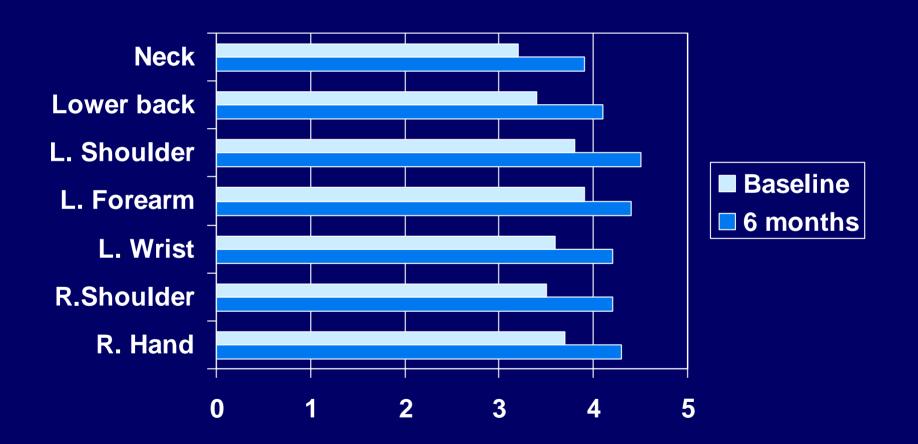


Effects on MSDs

- 6 month MSD ratings were compared with those at baseline
- No significant changes in MSDs were found for the control group
- Several significant changes were found for the test group

Test Group MSD changes (P<0.05)

(1=great discomfort.....7=great comfort)



Hedge, A, Goldstein, M, Hettinger, L, Varner, C, Silva, D., Malafronte, J, and Goodyear, C. (2002) Longitudinal study of the effects of an adjustable ergonomic keyboard on upper body musculoskeletal symptoms. Proceedings of the Human Factors and Ergonomics Society 46th Annual Meeting, Sept. 30-Oct. 4, Baltimore, MD: 602-606

Terminal Interviews and Post-study Behavior

- Over 80% of test groups subjects were enthusiastic about their use of the adjustable keyboard by the end of the study
- 36 of the 37 subjects were continuing their use of the adjustable keyboard at 6 months after the end of the study

Conclusions

- Upper limb musculoskeletal discomfort ratings showed some significant improvements with the use of the adjustable keyboard by the end of the study
- Keyboard comfort ratings were not substantially higher for the adjustable keyboard than the conventional keyboard
- □ Results agree with those of Tittiranonda et al. (1999) that beneficial effects of some alternative keyboard designs may appear after longer-term field use.