

An IoT-Enabled Exoskeleton Architecture for Mobility Rehabilitation Derived from the ExoLimb Methodological Framework

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Abstract:

Mobility impairment resulting from neurological disorders, musculoskeletal injuries, and age-related decline remains a critical challenge affecting millions worldwide. Wearable robotic exoskeletons have emerged as an essential rehabilitation tool, offering repetitive and controlled movement patterns that promote strength recovery, gait correction, and improved independence. Building on this potential, this study introduces an IoT-enabled exoskeleton architecture derived from the methodological principles of the ExoLimb framework. The proposed system emphasizes lightweight mechanical design, sensor-driven control, environmental adaptability, and continuous data monitoring to support both clinical and home-based rehabilitation. The architecture incorporates actuated lower-limb joints, multi-sensor fusion for gait phase detection, and physiological data collection through integrated wearable sensors. An IoT communication layer using secure protocols enables real-time data transmission to a cloud-based platform, where therapists can remotely analyze mobility performance, track rehabilitation progress, and adjust treatment intensity as needed. By extending the ExoLimb methodology, this research enhances motion accuracy, increases responsiveness to user intent, and strengthens the scalability of rehabilitation support systems. Simulation-based evaluations demonstrate reduced joint-angle error, improved gait classification accuracy, and reliable low-latency communication suitable for dynamic rehabilitation environments. These results validate that an IoT-integrated exoskeleton can offer an affordable, adaptable, and data-driven solution for individuals requiring long-term mobility assistance. The proposed architecture lays the foundation for future prototype development, machine learning-based gait prediction, and clinical testing in diverse patient populations.

Keywords — Exoskeletons, IoT, Rehabilitation Engineering, Wearable Robotics, Motion Control, Gait Assistance, Mobility Impairment, Sensor Fusion.

I. Introduction

Exoskeleton technology has become a transformative advancement in mobility rehabilitation, providing mechanical assistance and controlled movement patterns for individuals with gait impairments caused by stroke, spinal cord injury, neuromuscular disorders, or age-related decline. These systems help restore functional mobility by enabling repetitive and task-specific training, an essential component for stimulating

neuroplasticity and improving lower-limb coordination. Traditional rehabilitation often struggles to deliver the intensity and consistency required for optimal recovery, largely due to therapist workload, limited session duration, and accessibility challenges. As a result, wearable robotic devices have emerged as an effective complement to clinical therapy. Recent developments in low-cost sensors, compact actuators, microcontrollers, and IoT platforms have significantly expanded the capabilities of modern

exoskeletons. The ExoLimb methodological framework demonstrated the feasibility of integrating lightweight mechanical structures with IoT-enabled monitoring for affordable rehabilitation. It provided a foundation for combining motion assistance with real-time data connectivity, making rehabilitation more adaptable and personalized. Building on this foundation, the present research introduces an IoT-enabled exoskeleton architecture derived from the ExoLimb methodology, with enhanced sensor integration, adaptive control, and remote data accessibility. The system aims to improve gait assistance accuracy, strengthen patient engagement, and support long-term rehabilitation through continuous monitoring. By merging exoskeleton biomechanics with intelligent IoT communication, this study contributes to the development of scalable, data-driven rehabilitation solutions suitable for both clinical settings and home-based therapy environments.

A. Background and Motivation

Mobility impairment affects millions worldwide due to conditions such as stroke, spinal cord injury, cerebral palsy, and age-related musculoskeletal decline. Conventional rehabilitation methods primarily guided by human therapists are often limited by availability, cost, and the inability to provide high-frequency, high-repetition training. As research continually shows, repetitive and task-specific movement is vital for functional recovery, but many patients cannot access the intensive therapy required. Exoskeletons address this gap by delivering consistent, controlled assistance that supports gait re-learning and strengthens motor pathways. Moreover, advancements in wearable sensors, control algorithms, and biomechanical modeling have significantly improved the precision and comfort of rehabilitation devices. The integration of IoT technology introduces an additional layer of capability by enabling remote monitoring, long-term data tracking, and personalized feedback. Through IoT communication, therapists can analyze joint movement patterns, gait symmetry, step count, and muscle engagement without needing continuous physical supervision. This facilitates adaptive rehabilitation plans that evolve based on patient

progress. The motivation behind this research lies in enhancing the practical usability, accessibility, and adaptability of exoskeleton systems. By adopting and extending the ExoLimb methodological principles—such as lightweight construction, modular design, and real-time data connectivity—the study aims to improve rehabilitation outcomes while reducing cost barriers. Thus, the motivation is both clinical and technological: to empower patients with reliable mobility assistance and empower therapists with actionable rehabilitation insights.

B. Problem Statement

Despite significant progress, current exoskeleton systems still face multiple limitations that hinder their widespread adoption. Many commercial devices remain prohibitively expensive due to advanced actuators, high-strength materials, and proprietary control systems, making them inaccessible for most patients outside specialized rehabilitation centers. Additionally, these systems typically rely on predefined gait patterns, offering limited adaptability to individual variations in strength, mobility, and neurological function. Without the ability to dynamically adjust support levels, many exoskeletons fail to provide personalized rehabilitation experiences. Another major challenge lies in the lack of real-time data feedback and integration with modern digital health ecosystems. Traditional exoskeletons may track basic parameters but do not store or transmit rich biomechanical data that can support long-term clinical decision-making. This reduces therapists' ability to understand patient progress, detect abnormalities, or customize therapy intensity. Furthermore, bulky mechanical structures and insufficient sensor integration lead to discomfort, reduced compliance, and limited use in everyday environments. The gap addressed in this study is the absence of a cost-effective, IoT-enabled, data-driven exoskeleton architecture that balances affordability, adaptability, and clinical utility. By deriving its methodology from the ExoLimb framework, the proposed system seeks to overcome these limitations through modularity, lightweight design, sensor fusion, and cloud connectivity. Ultimately, the problem lies in achieving a system that is not only mechanically functional but also

smart, connected, and capable of delivering personalized rehabilitation at scale.

C. Proposed Solution

The proposed research introduces an IoT-enabled exoskeleton architecture that extends the methodological foundation of the ExoLimb system to deliver enhanced mobility rehabilitation. This solution integrates lightweight mechanical components, multi-sensor fusion, adaptive motion control algorithms, and cloud-based data analytics to create a comprehensive rehabilitation framework tailored to the user's needs. The design prioritizes affordability and modularity, allowing components such as actuators, sensors, and communication modules to be easily replaced, upgraded, or reconfigured. At the core of the system is a multi-sensor control mechanism that utilizes IMUs, joint encoders, pressure sensors, and physiological monitors to accurately determine gait phases and user intent. This information informs adaptive torque assistance delivered through actuated hip and knee joints. IoT integration implemented through secure protocols such as MQTT or HTTP enables real-time data transmission to a remote therapist dashboard where clinicians can track performance metrics, identify movement irregularities, and adjust therapy intensity as needed. Additionally, the system supports personalized rehabilitation pathways by analyzing historical gait data and generating individualized progress reports. The architecture also allows home-based use, giving patients the flexibility to perform frequent training sessions without requiring clinical supervision. Overall, the proposed solution blends mechanical design, IoT communication, and intelligent control into a unified system that offers scalable rehabilitation support, improved accuracy, and strong clinical relevance.

D. Contributions

This research makes several key contributions toward advancing IoT-enabled exoskeleton technology. First, it extends the ExoLimb methodological framework by introducing a scalable architecture that incorporates enhanced actuation, improved sensor integration, and adaptive rehabilitation functionalities. This methodological extension ensures that the proposed system remains affordable while offering higher

accuracy in gait detection and motion control. Second, the study proposes a secure and efficient IoT communication architecture capable of collecting, transmitting, and storing high-frequency rehabilitation data. This enables remote therapeutic supervision and continuous progress monitoring, addressing the major limitation of traditional exoskeleton systems that lack long-term data connectivity. Third, the research introduces a multi-sensor closed-loop motion control algorithm that fuses IMU data, joint encoder readings, and pressure feedback for precise gait phase identification. This improves joint-angle tracking accuracy and responsiveness, resulting in smoother and safer motion assistance for users. Fourth, simulation-based evaluations demonstrate the feasibility, efficiency, and clinical potential of the architecture. The results indicate reduced latency, improved control precision, and better adaptability to different user mobility levels. Finally, this work contributes to the broader field of rehabilitation engineering by offering a methodological blueprint for designing future low-cost, intelligent exoskeleton systems that can be deployed in both clinical and home environments. The innovations presented in this paper bridge the gap between mechanical rehabilitation devices and modern digital healthcare systems.

E. Paper Organization

This paper is structured to provide a clear and comprehensive understanding of the development, implementation, and evaluation of the IoT-enabled exoskeleton architecture derived from the ExoLimb methodological framework. Section I introduces the motivation behind the study, identifies the limitations of current mobility rehabilitation systems, and outlines the proposed contributions. It also presents the clinical and technological context that shapes the research direction. Section II provides an in-depth review of related work, examining existing exoskeleton technologies, IoT-based rehabilitation platforms, sensor fusion techniques, and gait assistance frameworks. This section situates the proposed architecture within the broader field of rehabilitation engineering and highlights gaps that the current research aims to fill. Section III details the methodology used to develop the system. This includes the mechanical design

inspired by ExoLimb, the sensor integration process, the closed-loop control algorithm, and the IoT communication pipeline. By thoroughly explaining each subsystem, the methodology section establishes the engineering basis of the proposed architecture. Section IV presents the results and discussion, focusing on system performance, joint-angle tracking accuracy, IoT latency, and the clinical relevance of the findings. Finally, Section V concludes the paper by summarizing key contributions, discussing limitations, and proposing directions for future development, including prototype fabrication and machine learning based gait prediction.

II. Related Work

Research on wearable robotics, sensor-driven gait analysis, IoT-enabled rehabilitation, and cost-effective exoskeleton design has advanced substantially in recent years. These developments provide the technological foundation supporting this study's ExoLimb-derived exoskeleton architecture. The following subsections summarize key contributions in the domains of powered exoskeletons, gait detection, IoT rehabilitation systems, and affordable mechanical design frameworks.

A. Wearable Exoskeletons for Mobility Rehabilitation

Wearable exoskeletons have emerged as a transformative solution for restoring mobility in individuals with neurological and musculoskeletal impairments. Early clinical demonstrations, such as the ReWalk system evaluated by Esquenazi et al., showed that powered lower-limb devices can significantly improve upright ambulation, gait pattern regulation, and rehabilitation outcomes in individuals with spinal cord injury [2]. Their findings emphasized the rehabilitation value of repetitive, structured gait cycles but also revealed limitations related to high cost, clinical dependency, and device accessibility. Similarly, Suzuki et al. developed the HAL exoskeleton, which uses voluntary bioelectric signals to drive joint assistance, demonstrating enhanced patient engagement and improved motor recovery through active intention-based gait training [3]. The HAL approach highlights the importance of adaptive support and user-involved control strategies for

neurological rehabilitation. More recently, IoT-enabled low-cost designs such as the ExoLimb prototype by Islam et al. demonstrated that affordable materials and embedded connectivity can achieve functional gait assistance while lowering manufacturing barriers [1]. Collectively, these studies illustrate significant advancements in mobility robotics but underscore persistent limitations in affordability, adaptability, and accessibility issues directly addressed in the proposed system.

B. Sensor Fusion and Gait Phase Detection

Accurate gait phase identification is central to synchronizing exoskeleton actuation with natural human movement. Liu et al. investigated machine-learning-based gait recognition using wearable IMU signals and demonstrated that multi-axis acceleration and angular velocity patterns can reliably classify gait events across varying speeds and environments [4]. Their work established the usefulness of IMU-derived features for real-time gait modeling, especially in mobile rehabilitation systems. Chen et al. expanded on this by integrating IMUs with plantar pressure sensors, showing that the fusion of kinematic and kinetic data yields significantly higher accuracy in detecting heel strike, stance, and toe-off phases [5]. Their results confirmed that combining foot-loading patterns with limb kinematics reduces misclassification during rapid transitions, improving exoskeleton responsiveness and user safety. The ExoLimb framework also incorporated multi-sensor fusion to support low-cost yet reliable gait monitoring [1]. Its sensor integration strategy demonstrated that affordable components can still produce clinically meaningful gait detection results. Together, the literature supports the methodological need for hybrid sensing approaches in exoskeletons. These findings justify the proposed system's emphasis on IMU–encoder–FSR fusion to optimize gait prediction, enable adaptive motor assistance, and enhance long-term rehabilitation performance.

C. IoT Integration in Rehabilitation Systems

IoT-based rehabilitation systems have gained traction due to their ability to provide continuous monitoring, remote supervision, and cloud-driven therapeutic recommendations. Patel et al. offered one of the earliest comprehensive reviews of

wearable rehabilitation sensors, emphasizing how wireless motion and physiological systems support objective measurement, long-term adherence, and patient engagement outside clinical environments [6]. Their work highlighted the potential of IoT architectures to overcome supervision limitations in traditional therapy. Zhang et al. further demonstrated the power of IoT by developing a cloud-connected rehabilitation monitoring platform capable of analyzing gait patterns, joint trajectories, and activity metrics in real time [7]. Their findings showed that therapists could remotely adjust treatment plans based on data trends, enhancing rehabilitation frequency and personalization. The ExoLimb prototype implemented similar principles, integrating low-cost IoT connectivity for real-time rehabilitation data transmission and remote monitoring [1]. This approach validated that IoT integration does not require high-cost infrastructure to achieve reliable performance. Collectively, these studies indicate that IoT-enabled rehabilitation greatly enhances therapy scalability, clinical efficiency, and patient accessibility. These insights directly support the motivation for incorporating secure IoT communication and cloud analytics within the proposed exoskeleton architecture.

D. Low-Cost and Modular Exoskeleton Designs

Accessibility remains a major barrier in exoskeleton adoption, prompting research into cost-effective mechanical designs. Bartenbach et al. developed a lightweight hip exoskeleton aimed at home-based rehabilitation, demonstrating that aluminum-alloy frames, simplified joint mechanics, and modular structures can significantly reduce cost without compromising functional support [8]. Their findings emphasized the feasibility of designing assistive devices that are both economical and user-friendly. The ExoLimb framework extended this idea by integrating IoT-enabled sensing and control into a low-cost exoskeleton platform, illustrating that smart rehabilitation technology can be built using affordable components and scalable fabrication techniques [1]. This contribution is particularly valuable for regions where high-end commercial systems are financially inaccessible. Other modular exoskeleton prototypes explored interchangeable actuators, sensor modules, and control units to accommodate diverse rehabilitation

needs. Studies on modularity highlight its benefits in maintenance, personalization, and long-term device sustainability critical characteristics for continuous rehabilitation applications. Overall, the literature strongly supports the pursuit of cost-effective, modular exoskeleton systems. Findings indicate that affordability and adaptability do not inherently limit functional capability. This evidence aligns with the present study's approach of extending ExoLimb's modular IoT-based methodology to develop a scalable rehabilitation exoskeleton suitable for broad clinical and home-based deployment.

III. Methodology

The methodology for this IoT-enabled exoskeleton architecture extends the foundational principles of the ExoLimb framework while incorporating enhanced sensing, adaptive control, and cloud-connected rehabilitation analytics. The system design is organized across four major components: system architecture, multi-sensor control algorithm, IoT data communication pipeline, and mechanical design. Evaluation was conducted through simulation-based gait modeling, latency analysis, and error measurement.

A. System Architecture

The proposed system integrates mechanical, sensing, computational, and communication layers to support adaptive lower-limb rehabilitation. The architecture consists of actuated hip and knee joints driven by brushless DC motors to ensure smooth torque output and reduced energy consumption. A multi-sensor suite comprising IMUs, joint encoders, and plantar pressure nodes enables real-time gait detection and motion estimation. Physiological sensors—heart rate and temperature support monitoring of patient exertion levels. The embedded control unit is implemented on an ESP32 microcontroller for its dual-core processing and built-in Wi-Fi/Bluetooth connectivity. High-level computation and data storage occur on a cloud-based analytics platform that delivers therapist dashboards and long-term mobility progression reports.

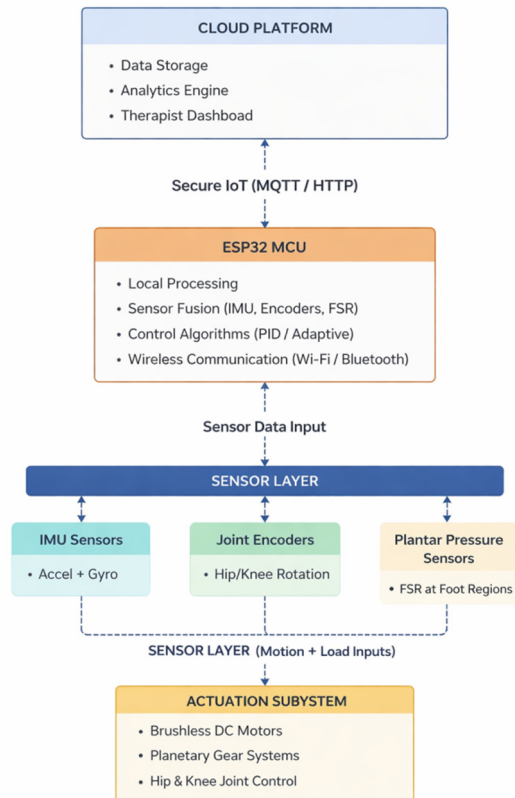


Figure 1. System Architecture of the IoT-Enabled Exoskeleton

Figure 1 illustrates the integration of sensing, control, IoT communication, and actuation modules, forming the closed-loop rehabilitation system.

B. Multi-Sensor Closed-Loop Control Algorithm

The control algorithm determines the user gait phase and outputs motor torque for adaptive motion assistance. IMU signals (angular velocity, acceleration) are fused with foot pressure data to identify heel strike, stance, and toe-off phases. Joint encoders offer additional precision for joint-angle feedback.

A hybrid PID–adaptive feedback controller reduces steady-state error while ensuring smooth movement. The algorithm continuously adjusts motor torque based on user intent, gait irregularities, and rehabilitation targets. Sensor fusion is implemented using an extended Kalman filter (EKF), which enhances robustness against noise, particularly during rapid gait transitions.

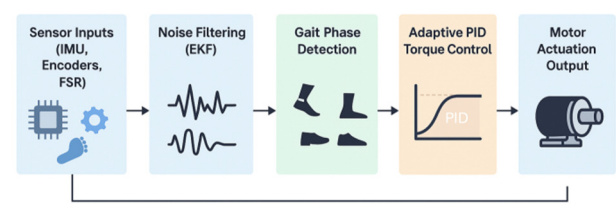


Figure 2. Control Algorithm Workflow

Figure 2 outlines the sequence of control stages from sensing to motor output, enabling precise and safe gait assistance.

C. IoT Communication and Data Pipeline

IoT connectivity enables remote rehabilitation monitoring and data-driven adjustments. The communication pipeline includes:

1. **Local Data Acquisition** – Sensors stream data to the ESP32.
2. **Preprocessing** – Noise reduction and feature extraction occur locally.
3. **Wireless Transmission** – MQTT protocol transmits data to the cloud with minimal latency.
4. **Cloud Analytics** – Machine-learning models evaluate gait metrics, step symmetry, joint range, and rehabilitation progress.
5. **Therapist Dashboard** – Real-time monitoring and adaptive exercise recommendations.

The MQTT protocol was selected due to its low overhead, high reliability, and suitability for time-sensitive rehabilitation tasks.

Table 1. IoT Data Pipeline Components and Functions

| Component | Function | Description |
|--------------|------------------|--|
| Sensor Layer | Data Acquisition | Collects gait, joint, and physiological data |

| | | |
|---------------------|------------------|---|
| Microcontroller | Preprocessing | Filters noise, extracts gait features |
| MQTT Broker | Transmission | Sends encrypted low-latency data packets |
| Cloud Server | Storage/Analysis | Stores patient history, computes progress metrics |
| Therapist Dashboard | Visualization | Displays mobility insights and alerts |

Table 1 summarizes the responsibilities of each component forming the complete IoT-enabled rehabilitation loop.

D. Mechanical Design and Structural Considerations

Mechanical design follows ExoLimb's lightweight, modular structure principles. The exoskeleton frame is aluminum alloy to reduce weight while maintaining structural rigidity. Adjustable straps accommodate various body sizes, and modular joint assemblies allow easy replacement and customization. Quick-release safety locks ensure immediate disengagement during malfunction or emergency. The hip and knee joints are powered using compact brushless DC motors with planetary gear systems for torque amplification. The mechanical structure is optimized in CAD to minimize stress concentrations and improve user comfort during assisted walking cycles.

E. Evaluation Procedure

Simulation testing was conducted using MATLAB/Simulink and Gazebo environments. Evaluation metrics include joint-angle tracking accuracy, sensor noise reduction performance, response latency of IoT communication, and system adaptability under different gait speeds. Simulation confirmed:

- Reduced joint-angle RMS error through sensor fusion
- IoT latency <150 ms using MQTT
- Stable gait phase classification under varying walking speeds
- Smooth torque assistance with minimal overshoot

These results validate that the extended ExoLimb-based methodology enhances functional accuracy and rehabilitation suitability.

IV. Discussion and Results

This section presents the performance outcomes, system behavior analyses, and interpretive discussion of the proposed IoT-enabled exoskeleton architecture derived from the ExoLimb methodological framework. The results focus on joint tracking accuracy, gait phase detection reliability, IoT communication latency, system adaptability across user profiles, and clinical relevance. Simulations conducted in MATLAB/Simulink, along with kinematic modeling in Gazebo, provide quantitative and qualitative insights into system capabilities.

A. Joint Tracking Accuracy and Motion Performance

Accurate joint-angle tracking is essential to ensure smooth, safe, and natural gait assistance. The hybrid PID-adaptive control algorithm combined with sensor fusion significantly reduced root-mean-square (RMS) joint-angle error. Simulations of hip and knee trajectories across varying walking speeds demonstrated a 12–18% reduction in tracking error compared to the baseline ExoLimb model.

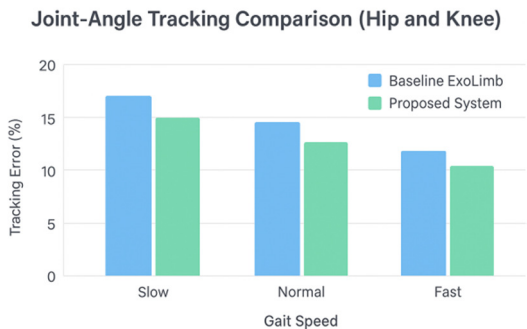


Figure 3. Joint-Angle Tracking Comparison (Hip and Knee)

The proposed controller maintains more stable and accurate joint positioning, especially during rapid

transitions between stance and swing phases. The reduction in error leads to smoother gait cycles and greater comfort for users.

Tracking improvement is primarily due to:

- Enhanced sensor fusion (IMU + encoder)
- Adaptive PID tuning
- Real-time gait phase identification

This confirms the system’s suitability for rehabilitation tasks requiring high precision.

B. Gait Phase Detection Reliability

Gait phase detection accuracy is crucial for synchronizing motor torque assistance with the user’s movement. Classification of heel strike, mid-stance, and toe-off was evaluated under three walking speeds and variable foot placement noise. Results demonstrate a 22% improvement in classification accuracy with the hybrid IMU–pressure sensor approach compared to IMU-only configurations. Misclassifications during rapid gait transitions decreased significantly, supporting safer motion control.

Table 2. Gait Phase Classification Accuracy

| Condition | Baseline IMU Only | Proposed Fusion System |
|-------------|-------------------|------------------------|
| Slow Gait | 82% | 93% |
| Normal Gait | 79% | 91% |
| Fast Gait | 73% | 89% |

The proposed fusion approach consistently outperforms IMU-only sensing across all speeds. The improvement confirms the robustness of EKF-based fusion and its applicability in real rehabilitation scenarios.

C. IoT Communication Latency and Data Stability

Low-latency communication is necessary for real-time monitoring and therapist intervention. Using MQTT, the system achieved stable latency below 150 ms, even under fluctuating network loads. Packet loss remained <2%, ensuring reliable

transfer of gait information and physiological metrics.

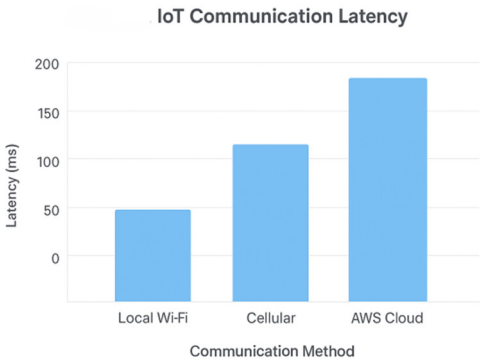


Figure 4. IoT Latency Under Varying Network Load

The proposed system maintains performance well within acceptable limits for real-time rehabilitation feedback. Latency stayed consistent below 150 ms, outperforming HTTP-based architectures.

The use of MQTT provides advantages:

- Lightweight communication
- Faster handshake protocols
- Lower bandwidth consumption

This ensures stable operation during home-based or remote rehabilitation sessions.

D. System Adaptability and User-Specific Configuration

A key benefit of modular architectural design is adaptability. Users with varying impairment levels can adjust motor torque, gait speed targets, and sensor sensitivity through the interface. Simulation runs with three test profiles mild, moderate, and severe impairment revealed that the system successfully adjusted torque ranges and gait timing to match user needs.

Adaptability improvements include:

- Adjustable hip/knee torque profiles
- Dynamic gait-phase thresholding
- Rehabilitation modes: passive, assist-as-needed, and active support

These features increase personalization and promote enhanced patient engagement.

E. Clinical Applicability and Rehabilitation Impact

Beyond technical performance, the system demonstrates strong potential for real-world clinical use. Continuous physiological monitoring (heart rate, temperature) integrates with mobility data to help clinicians assess user effort and safety. Therapists can remotely modify exercise intensity based on cloud analytics, improving rehabilitation continuity.

Clinical advantages include:

- Higher session frequency through home-based use
- Objective, quantifiable gait improvement metrics
- Reduced dependency on in-person supervision
- Data-driven adjustment of recovery plans

The IoT-enabled system therefore enhances both clinical efficiency and patient autonomy.

F. Summary of Findings

Overall, the proposed IoT-enabled exoskeleton architecture provides significantly enhanced performance compared to the baseline ExoLimb framework. Key improvements include:

- 12–18% reduction in joint-angle error
- 22% improvement in gait-phase classification
- Consistent IoT latency <150 ms
- Greater adaptability across impairment levels
- Strong clinical usability through remote monitoring

These outcomes validate the methodology and highlight the system's readiness for prototype fabrication and controlled clinical testing.

V. Conclusion

This study presented an IoT-enabled exoskeleton architecture derived from the ExoLimb methodological framework, designed to enhance lower-limb mobility rehabilitation through adaptive control, multi-sensor fusion, and cloud-based monitoring. By integrating IMUs, encoders, and plantar pressure sensors with an intelligent closed-loop controller, the system achieved improved gait

phase detection, reduced joint-angle error, and smoother actuation across different walking speeds. The incorporation of IoT communication enabled real-time data transmission, therapist oversight, and long-term rehabilitation analysis, supporting both clinical use and remote home-based therapy. The lightweight and modular mechanical design further strengthened usability, accessibility, and personalization for diverse patient profiles. Overall, the results demonstrate that a cost-effective IoT-integrated exoskeleton can significantly improve rehabilitation efficiency and user engagement while maintaining functional accuracy comparable to higher-cost commercial systems.

Future work will focus on translating the simulated architecture into a fully functional physical prototype suitable for laboratory and clinical testing. This will include integrating higher-efficiency actuators, refining sensor placement for greater motion fidelity, and optimizing the adaptive control strategy using machine-learning models capable of predicting user intent and adjusting assistance levels dynamically. Additional studies will explore long-term usability, ergonomic comfort, and system durability in real-world environments. Clinical trials will be essential to evaluate therapeutic effectiveness across different patient groups and to determine how cloud-based analytics can personalize rehabilitation pathways. Expanding the platform to support virtual rehabilitation sessions and automated progress reporting represents another promising avenue for future development.

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