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The current definition of the application of gait analysis to clinical medicine should be clarified by a position statement with respect to what people are doing and what parts of clinical medicine gait analysis is currently accepted clinical practice. I think there are specifically some areas that are fairly clear, such as in the treatment of cerebral palsy. There are other areas where there is come what less experimental applications in clinical medicine. Getting some definition of where gait analysis is in its current application to clinical medicine would be a useful statement for people planning the formation of laboratories at the level of hospitals.

There is a need for research agencies especially funding agencies such as the NIH and private funding agencies to have a sense of where in the area of development gait analysis laboratories currently are. Again, in this area it is my feeling that gait analysis development is far enough advanced that this is really in the realm of the commercial state and that commercial companies should be encouraged to continue this development. Except for some rare exceptions, this should not be a current area of federally funded research. Also there is such a wide clinical application that gait laboratories should largely be planned and funded by hospitals and other care providers as a part of their provisions of clinical services with those services being paid for by the patient or their third party payers. This kind of infrastructure spending I also do not feel should be part of federal funding.

There clearly are areas of research which would encourage gait analysis to grow and encourage its more rational application. Specifically, I feel that some federal funding directed at understanding how to use gait analysis for outcome research and funding directed at fostering communication and developing ways for data sharing so that larger groups of patients can be identified to evaluate outcome research is something that should be encouraged. The understanding of how technical outcomes as measured by gait analysis are reflected in the patient’s overall functional outcome also needs to be evaluated.

We need to define a list of problems that are currently addressed by clinical gait laboratories in the area of what is preventing them from functioning best for patients. Some of these which I have experienced are a lack of trained personnel which is especially true of physicians understanding gait analysis techniques, a lack of standardization in gait analysis and gait analysis laboratories, still the continuing struggle to obtain funding from third party payers because they do not understand the technology, and the reluctance for investment by hospitals and other clinical care providers into this technology.