

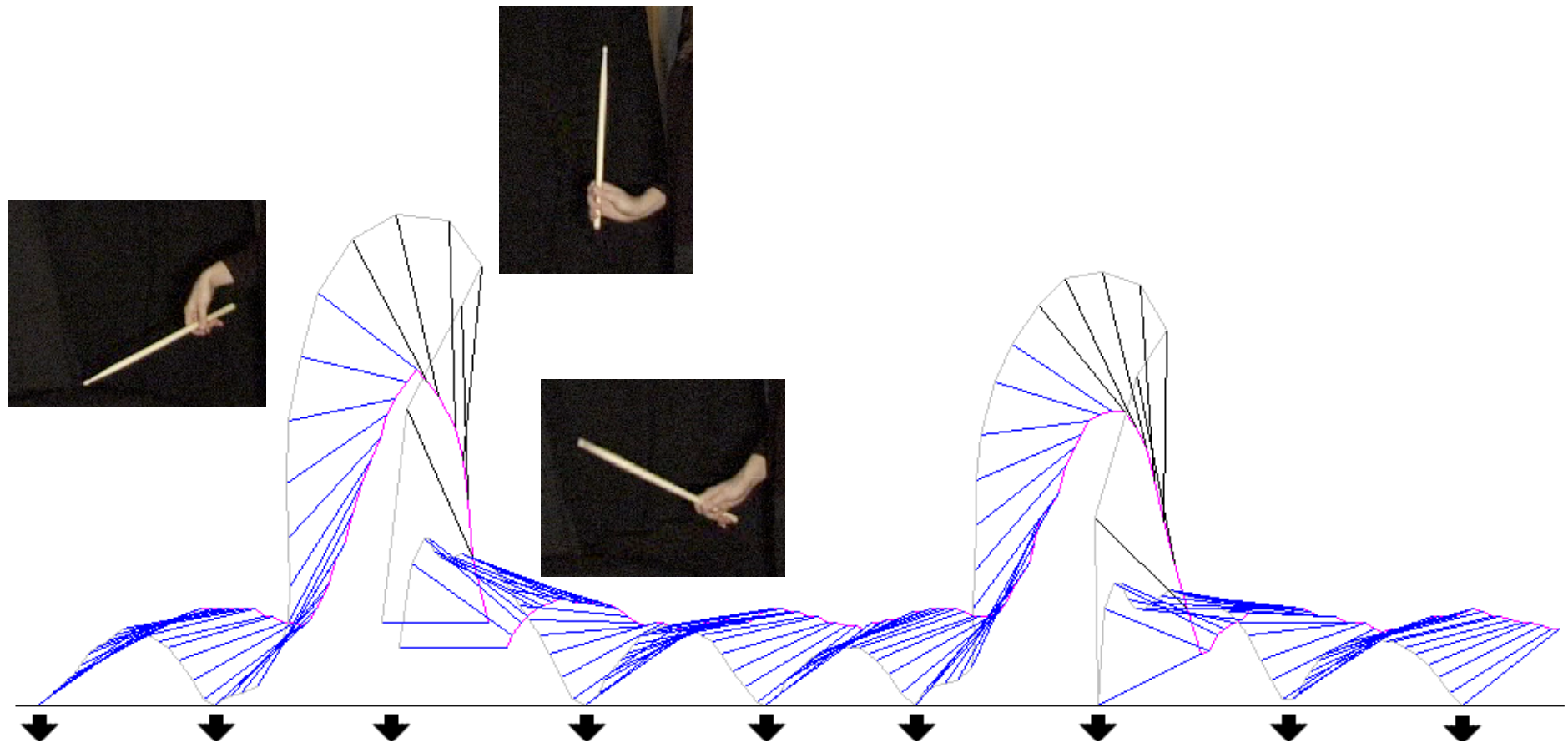


Sofia Dahl

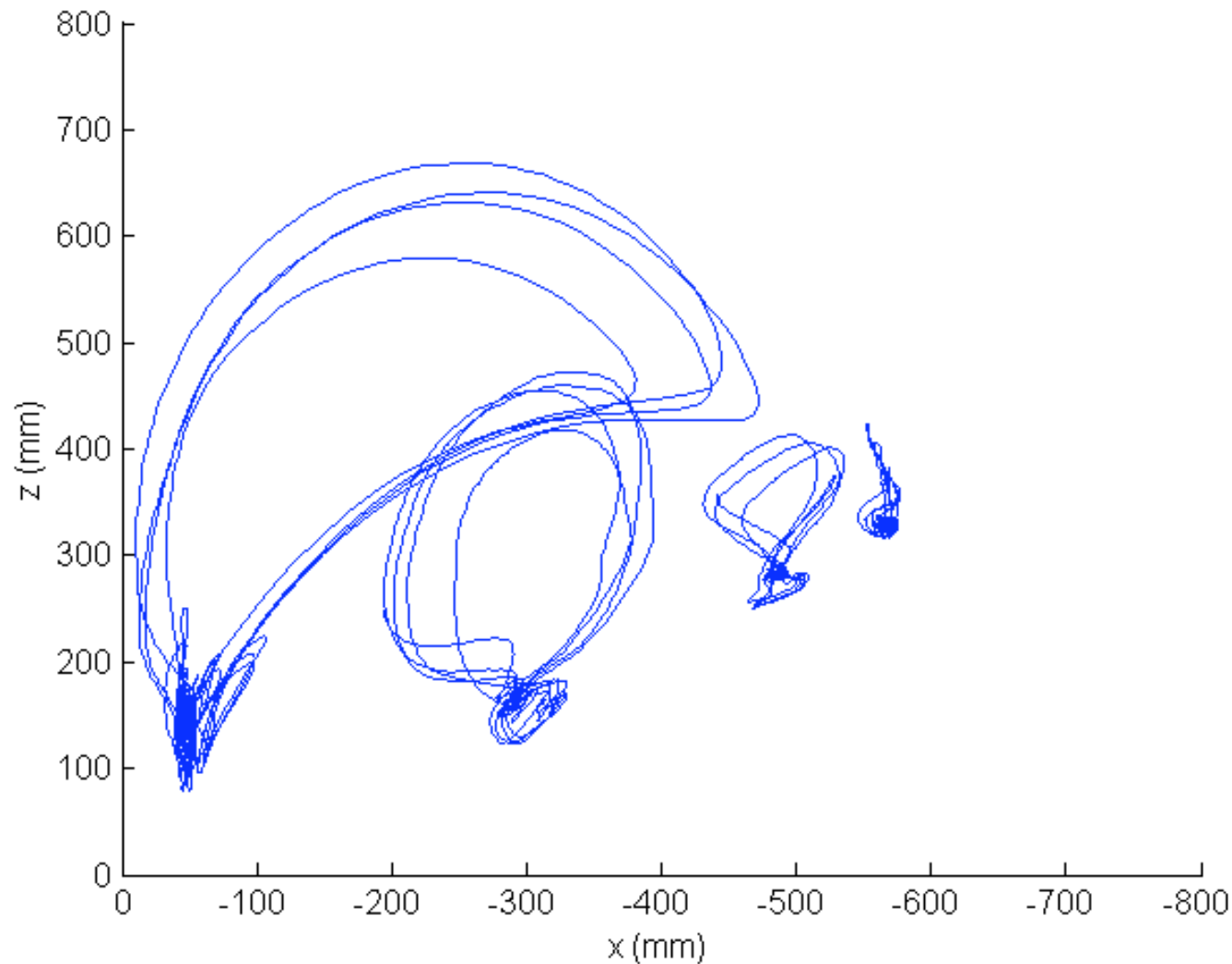
# THE STRIKING MOVEMENT:

## How do percussionists control timing and dynamic level when drumming?

# Stick movements for accented and unaccented drumstrokes

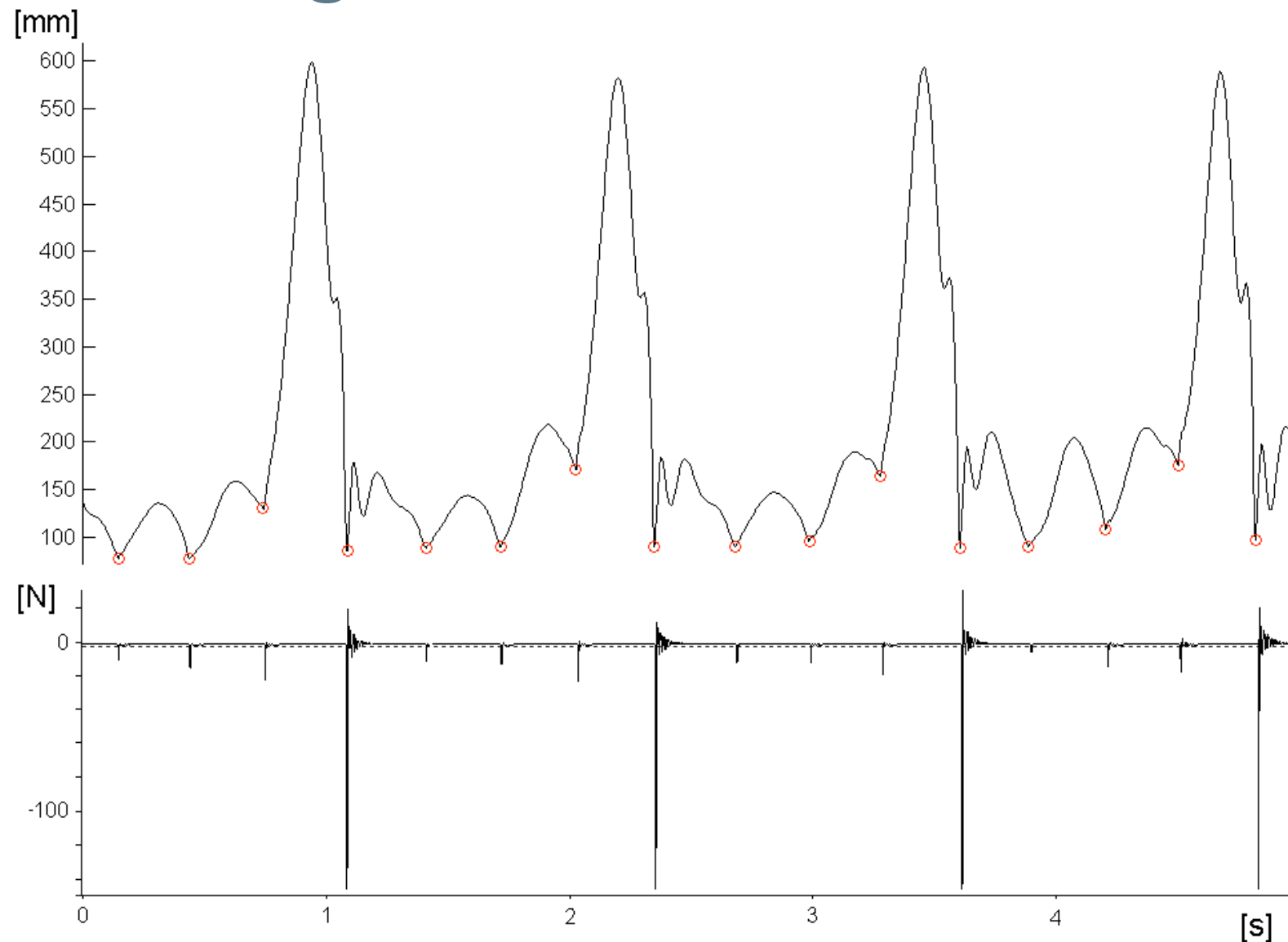


# Whole limb motion trajectory



Dahl, 2004

# Producing force from acceleration

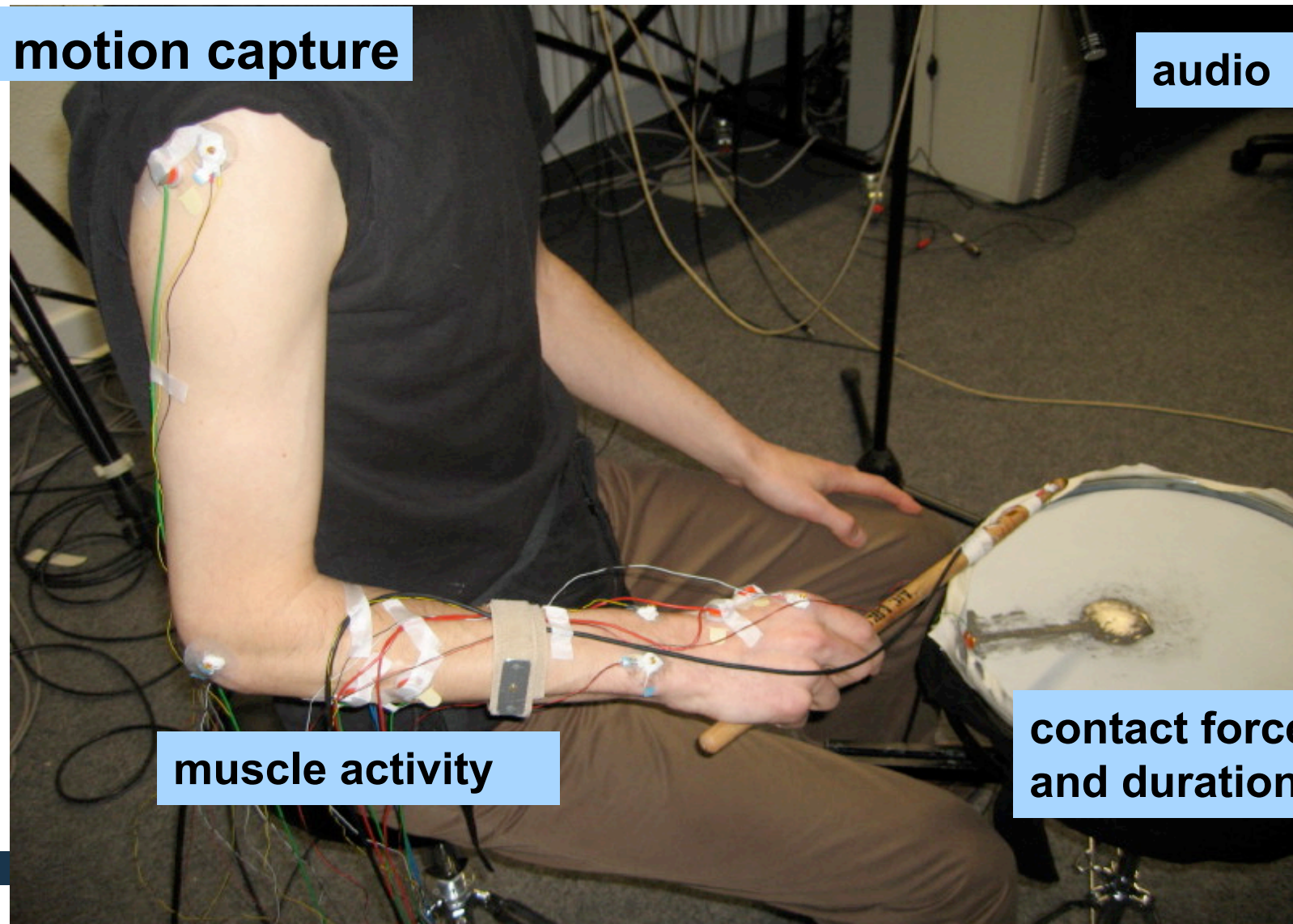


# Dealing with the rebound

- The rebound from the surface can be incorporated in, and be an aid for, the preparation for the nextcoming stroke.
- Necessary in order to play some fast patterns (e.g. rolls)
- Strategies like the “Moeller stroke” also utilizes the rebound
- Accelerating the stick over a longer runway makes louder playing possible.
- ...but if the next stroke is to be softly played the rebound may need to be controlled



# Measuring movement and sound in drumming



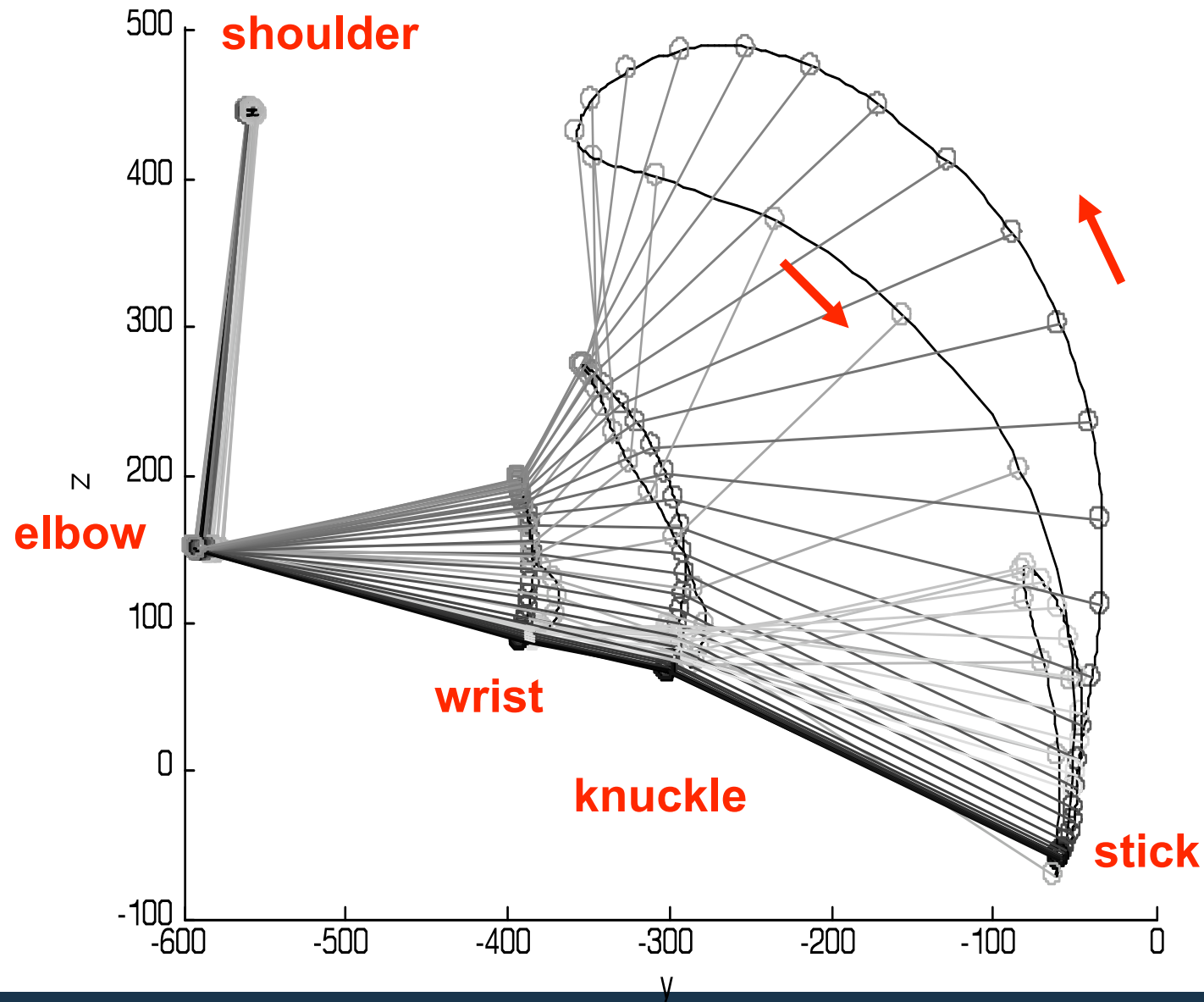
**motion capture**

**audio**

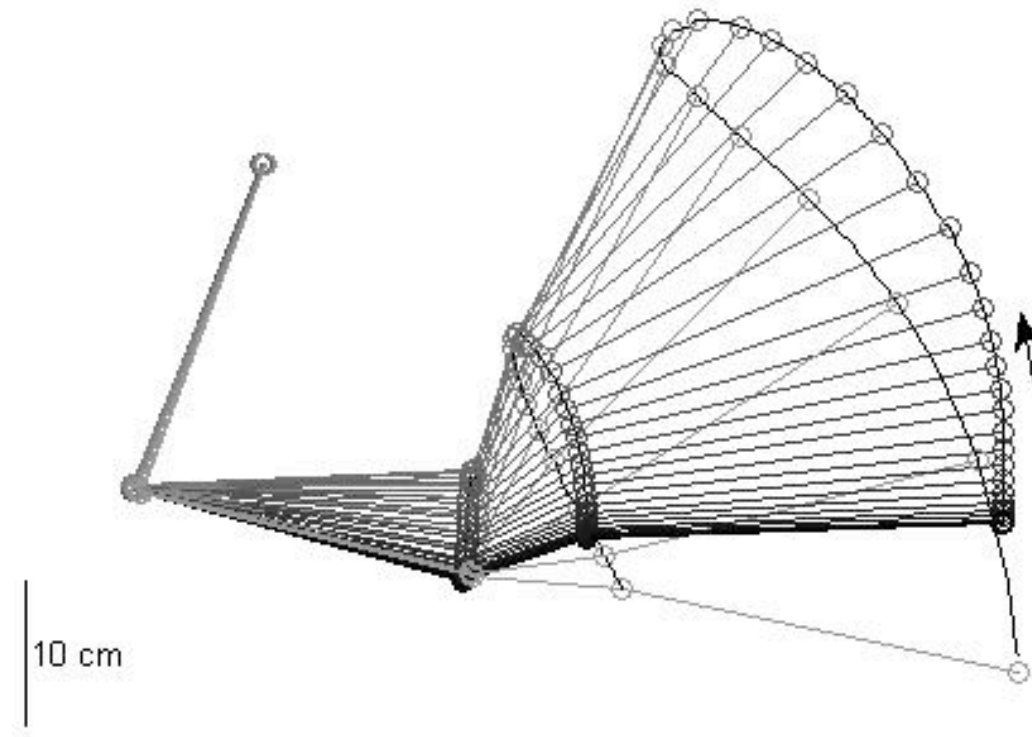
**muscle activity**

**contact force  
and duration**

# Motion capture data for a single *mf* stroke



# Single, isolated stroke at mf



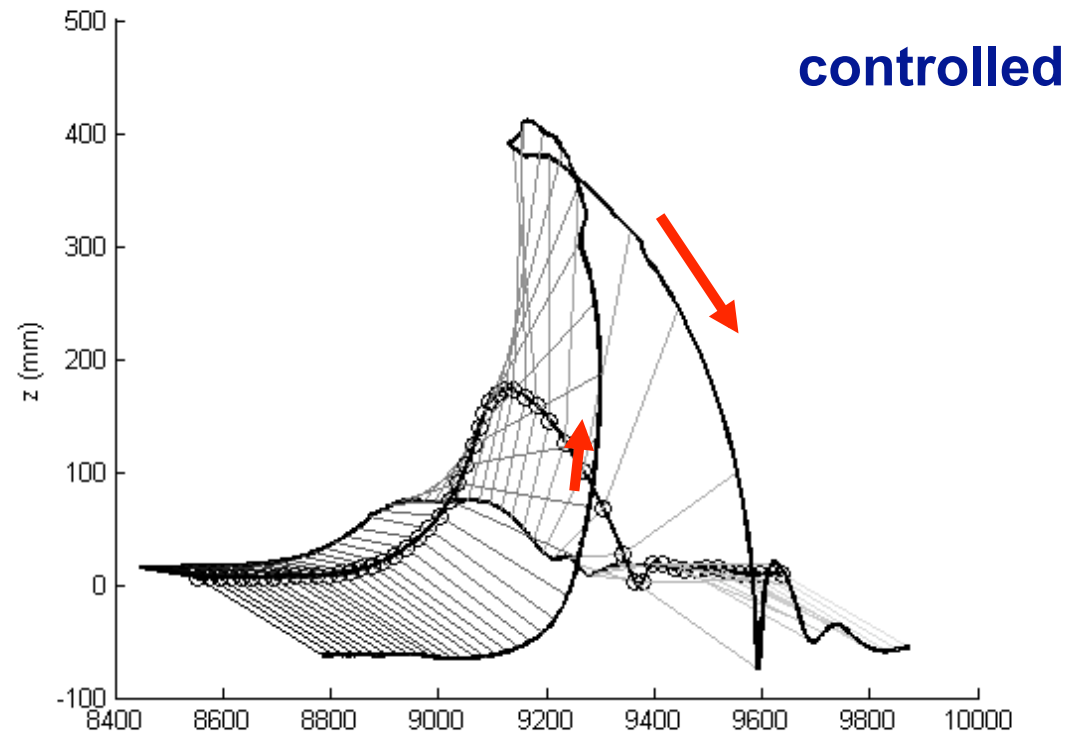
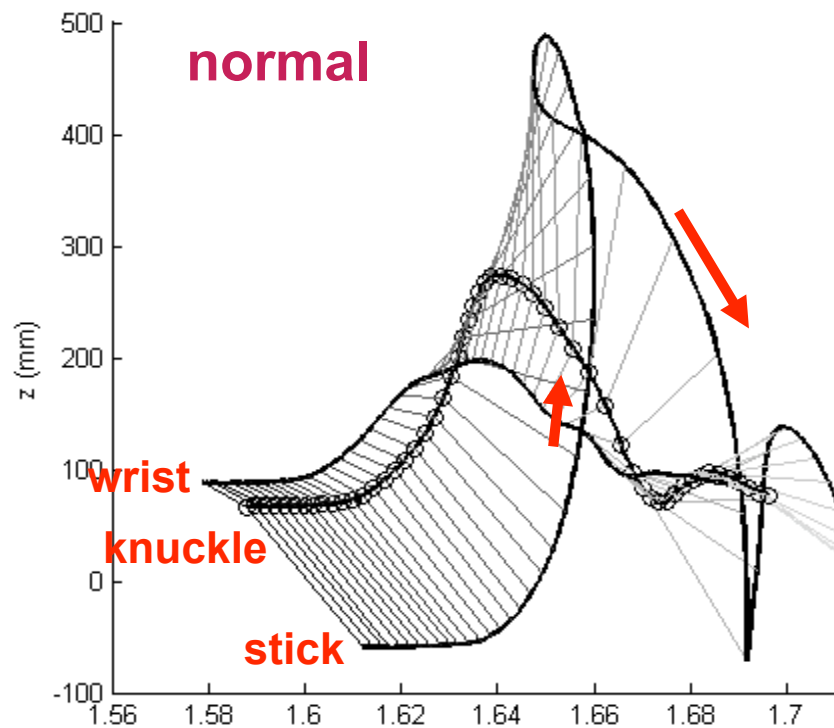
Dahl et al, 2009



# How does controlling the rebound affect the sound?

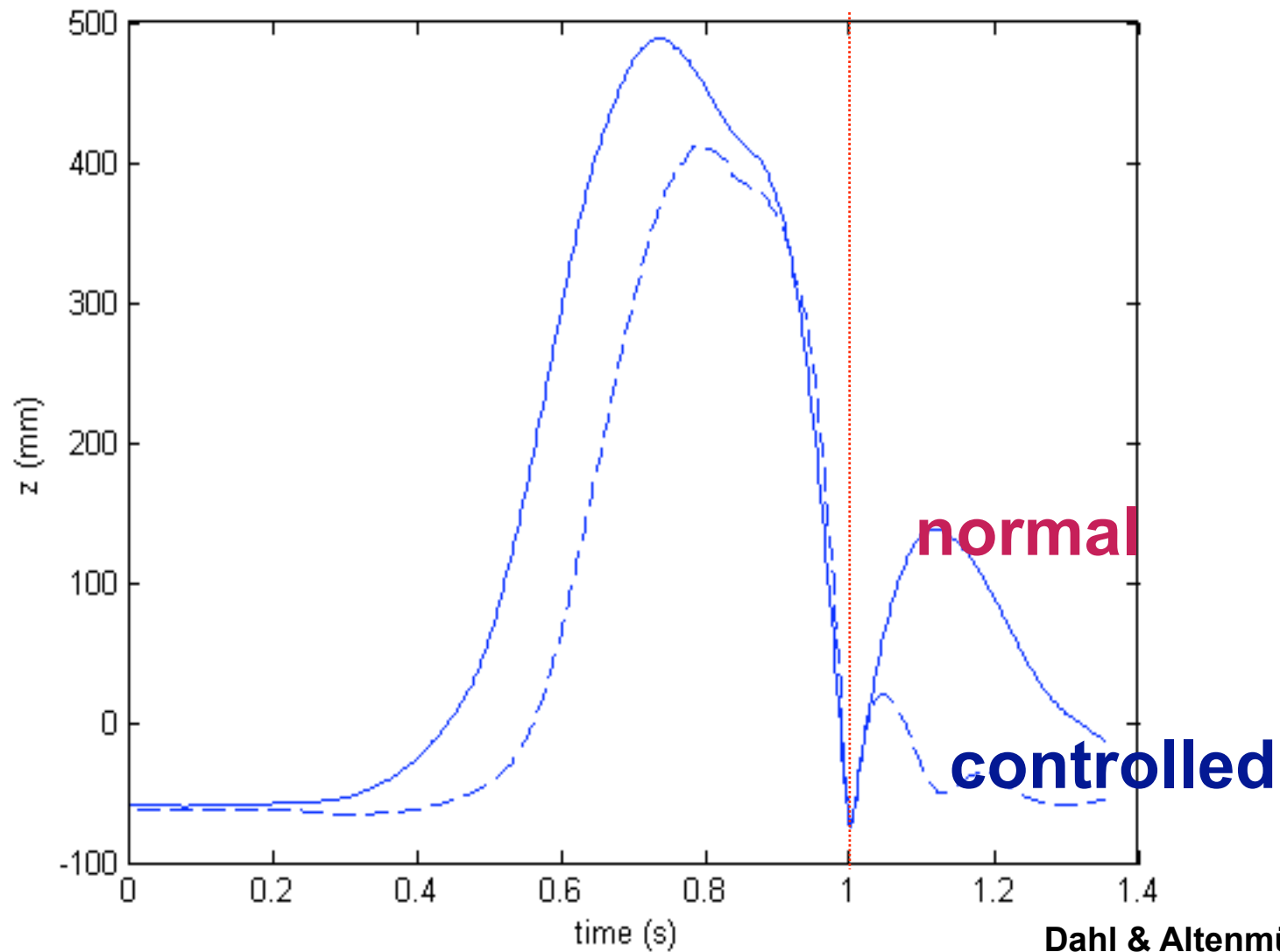
- Separated single *mf* strokes
  - allowed to ring out
- “Normal”
  - play as normal, relaxed, stick free to rebound
- “Controlled”
  - stop stick as close as possible to the drumhead directly after stroke

# “Normal” and “Controlled” strokes



Dahl & Altenmüller, 2008

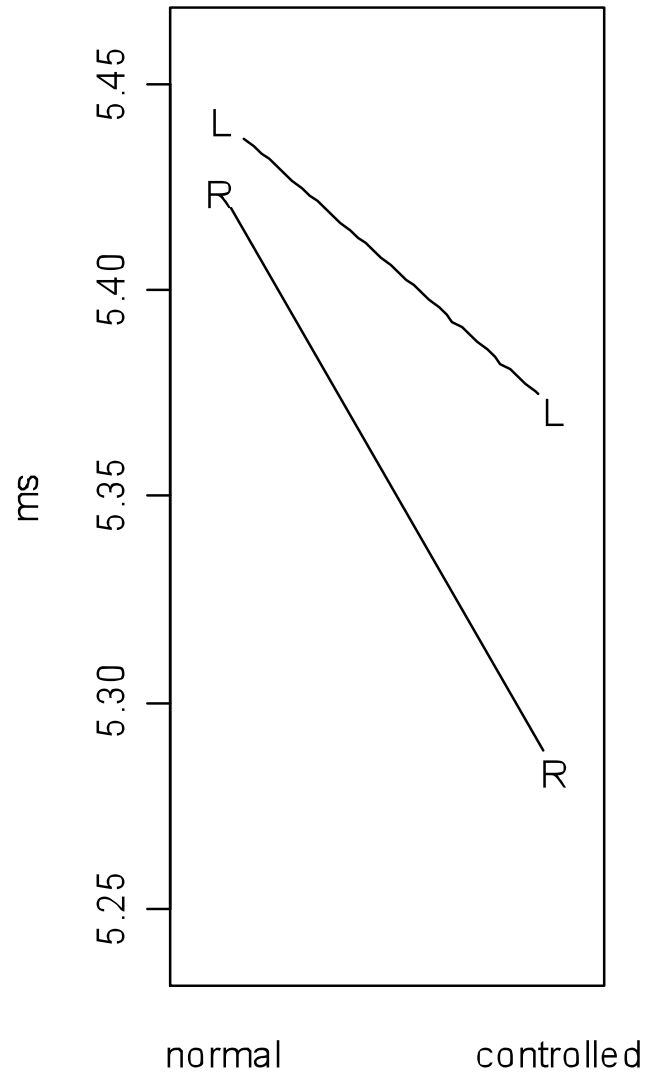
# Vertical displacement of stick marker



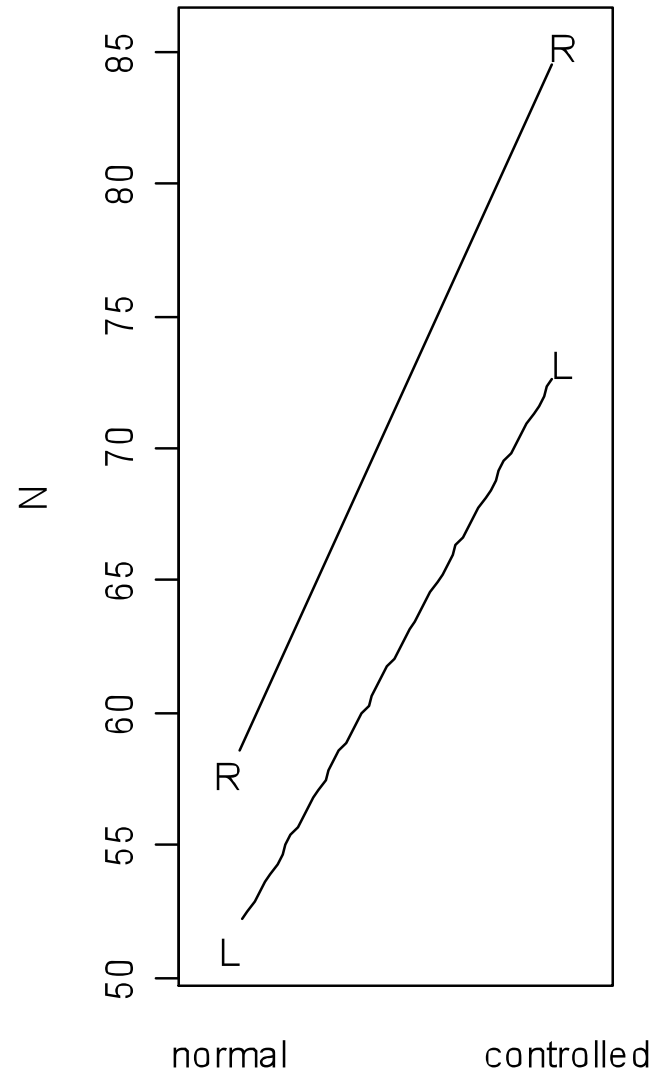
Dahl & Altenmüller, 2008

# Contact force and duration

contact duration

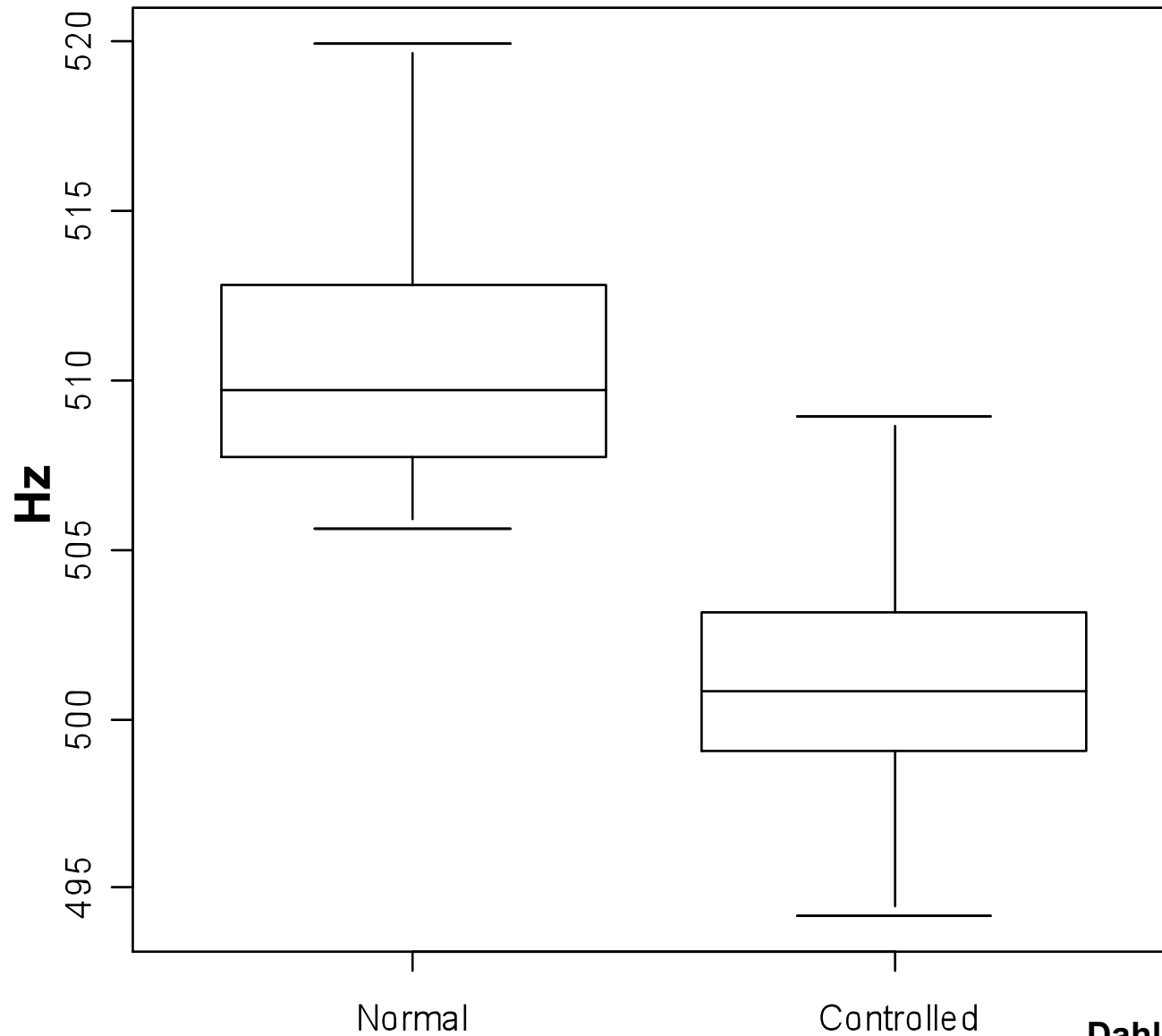


peak force



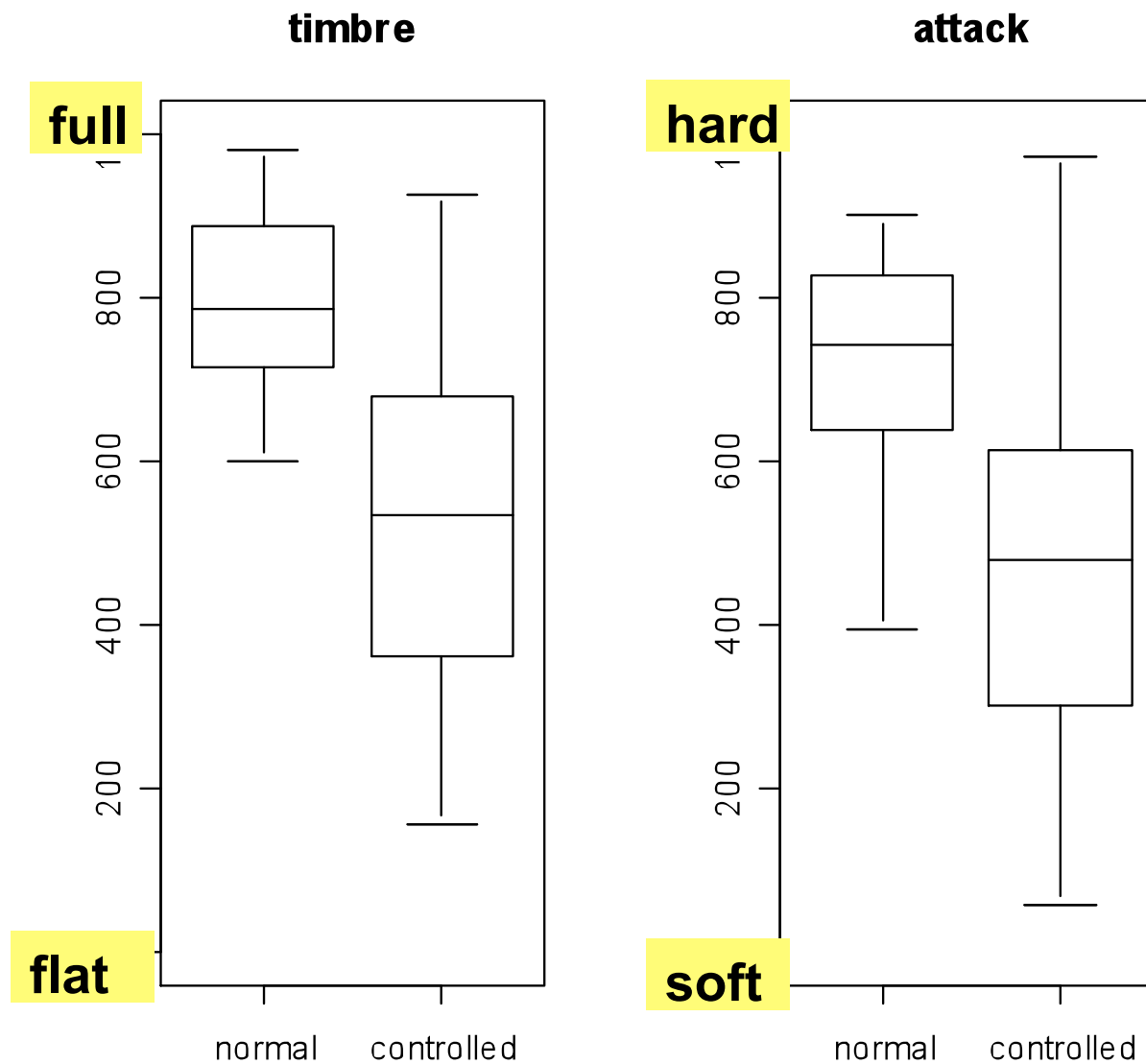
Dahl & Altenmüller, 2008

# Spectral centroid (considering 16-1000 Hz)



Dahl & Altenmüller, 2008

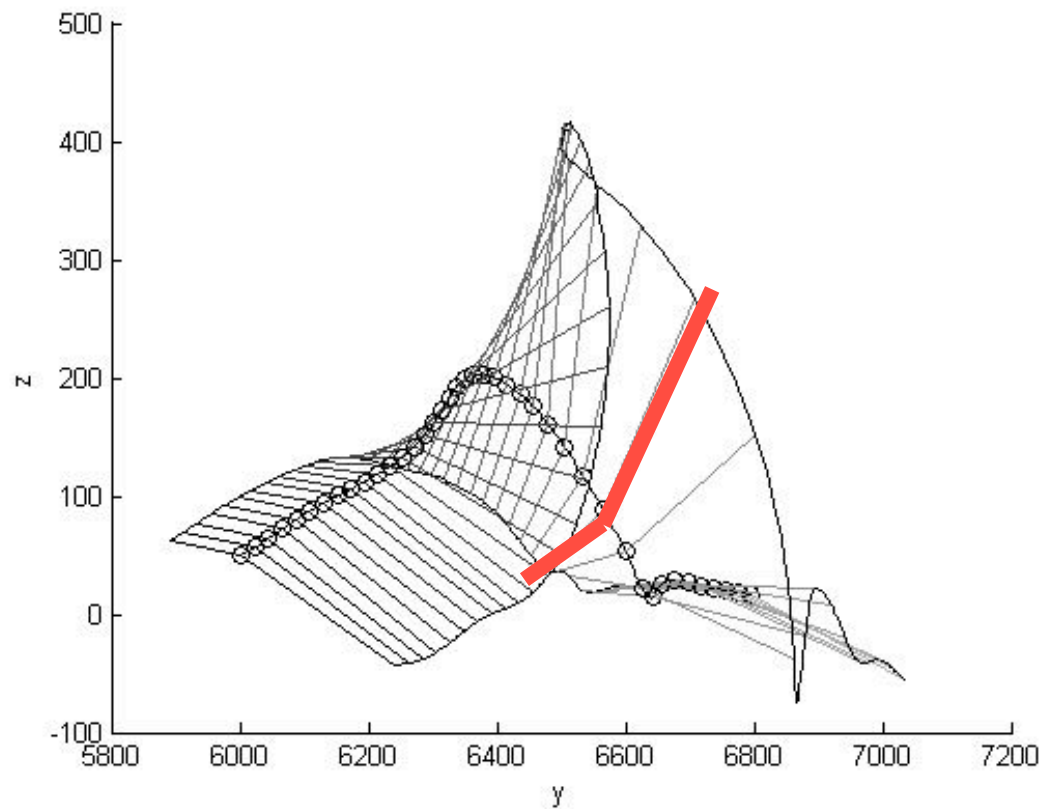
# Ratings for timbre and attack: results



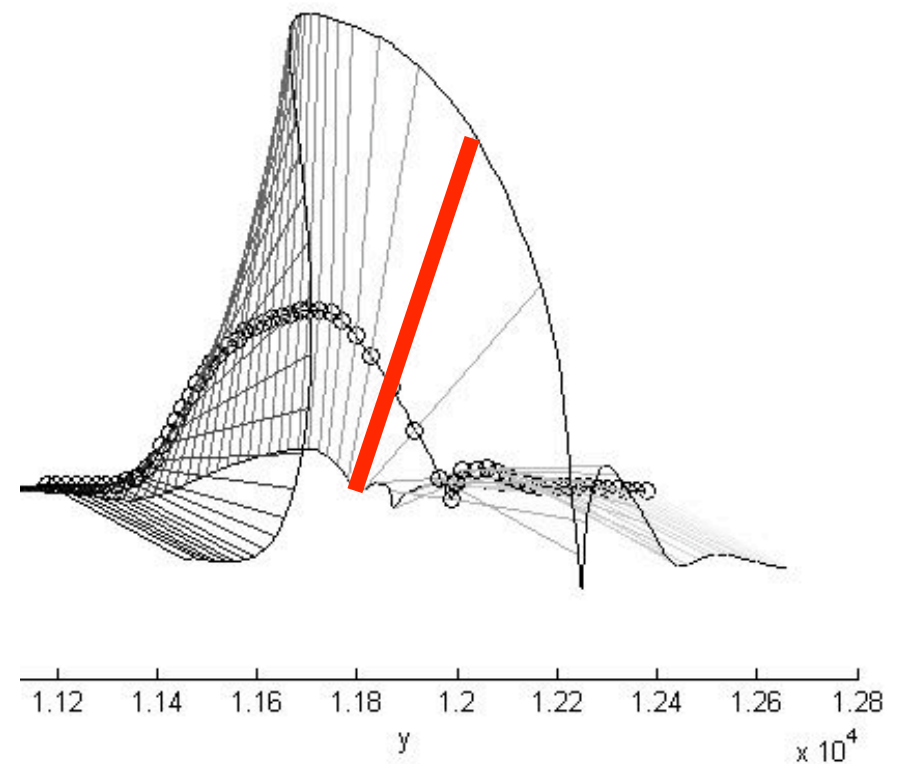


# An “appropriate” strategy?

## Player 1



## Player 2



# Musicians' focal dystonia

Defined as (painless) loss of voluntary motor control in highly trained movements (e.g. curling in/ over-extension of fingers).

Neurological disorder

Task-specific

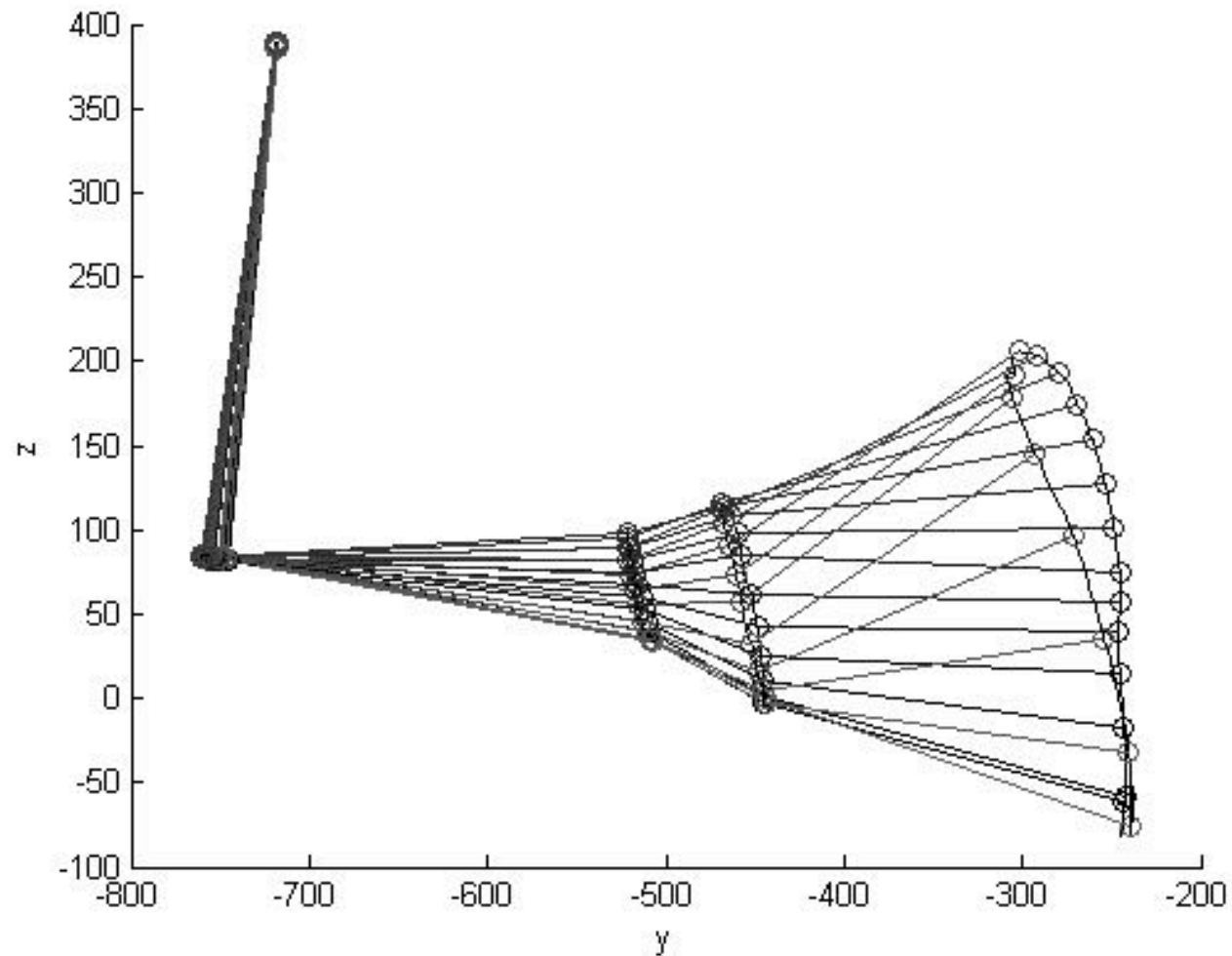


(Altenmüller, Hand Clin., 2003)

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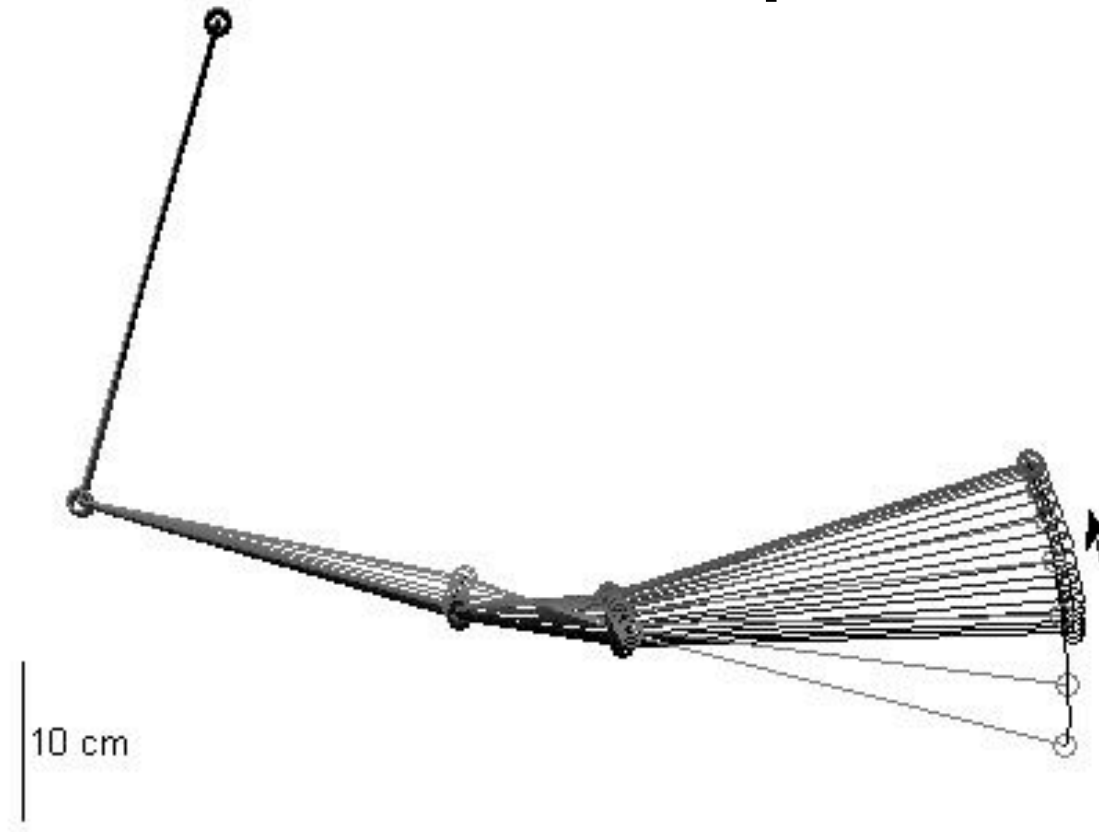
# General movement patterns: healthy player

## Part1: Left, 120 bpm, mf

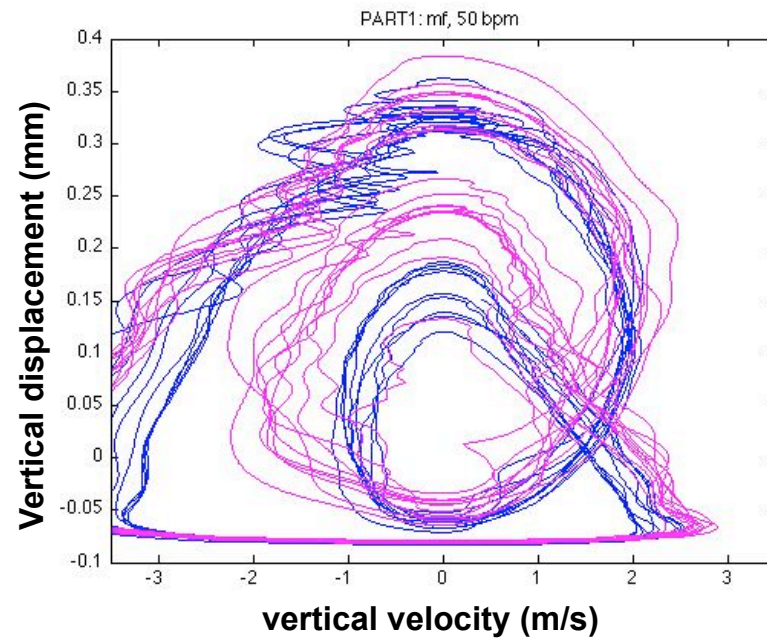


# General movement patterns: dystonic patient

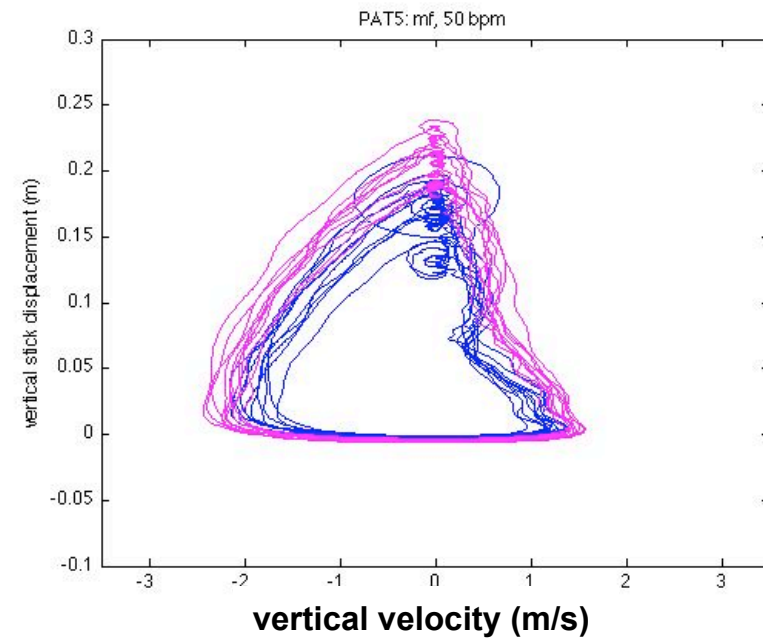
**Pat5: Left, 120 bpm, mf**



# Comparing left and right – phase plots

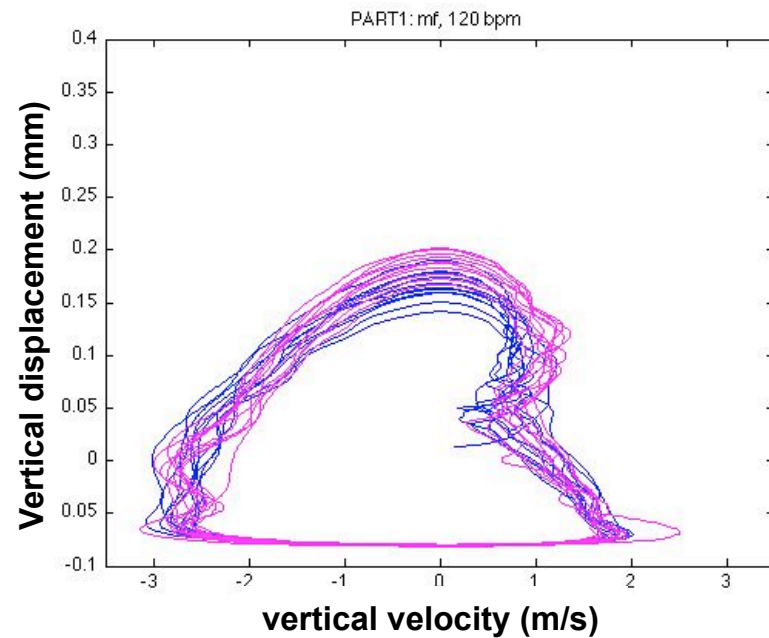


**healthy**  
**50 bpm**  
**mf**

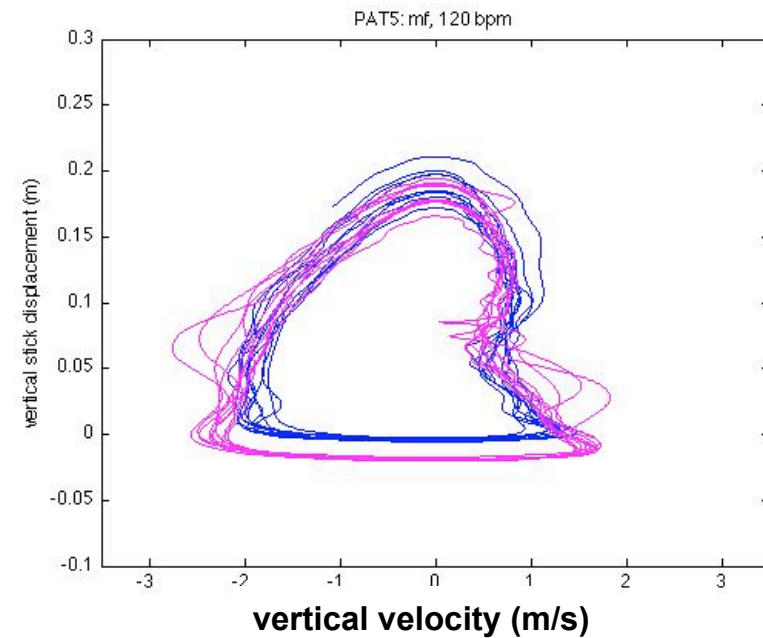


**dystonic**  
**50 bpm**  
**mf**

# Comparing left and right – phase plots



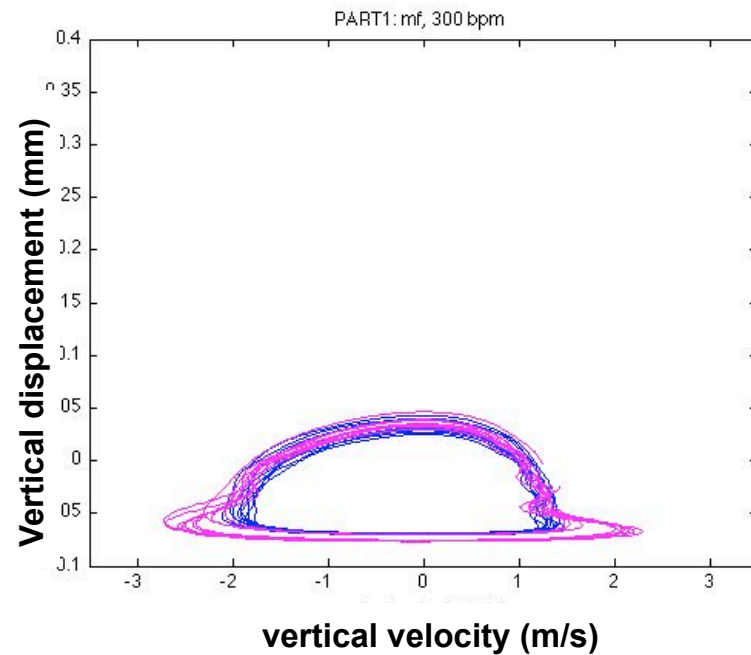
**healthy**  
**120 bpm**  
**mf**



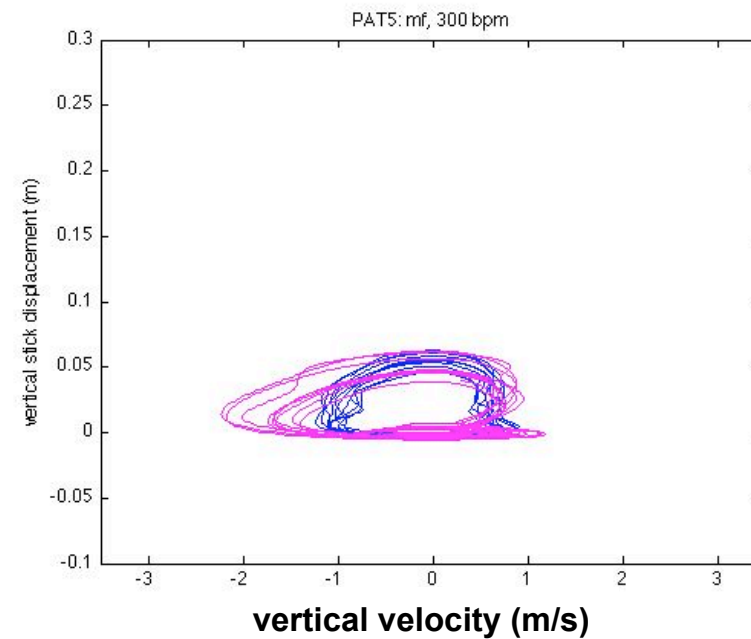
**dystonic**  
**120 bpm**  
**mf**



# Comparing left and right – phase plots



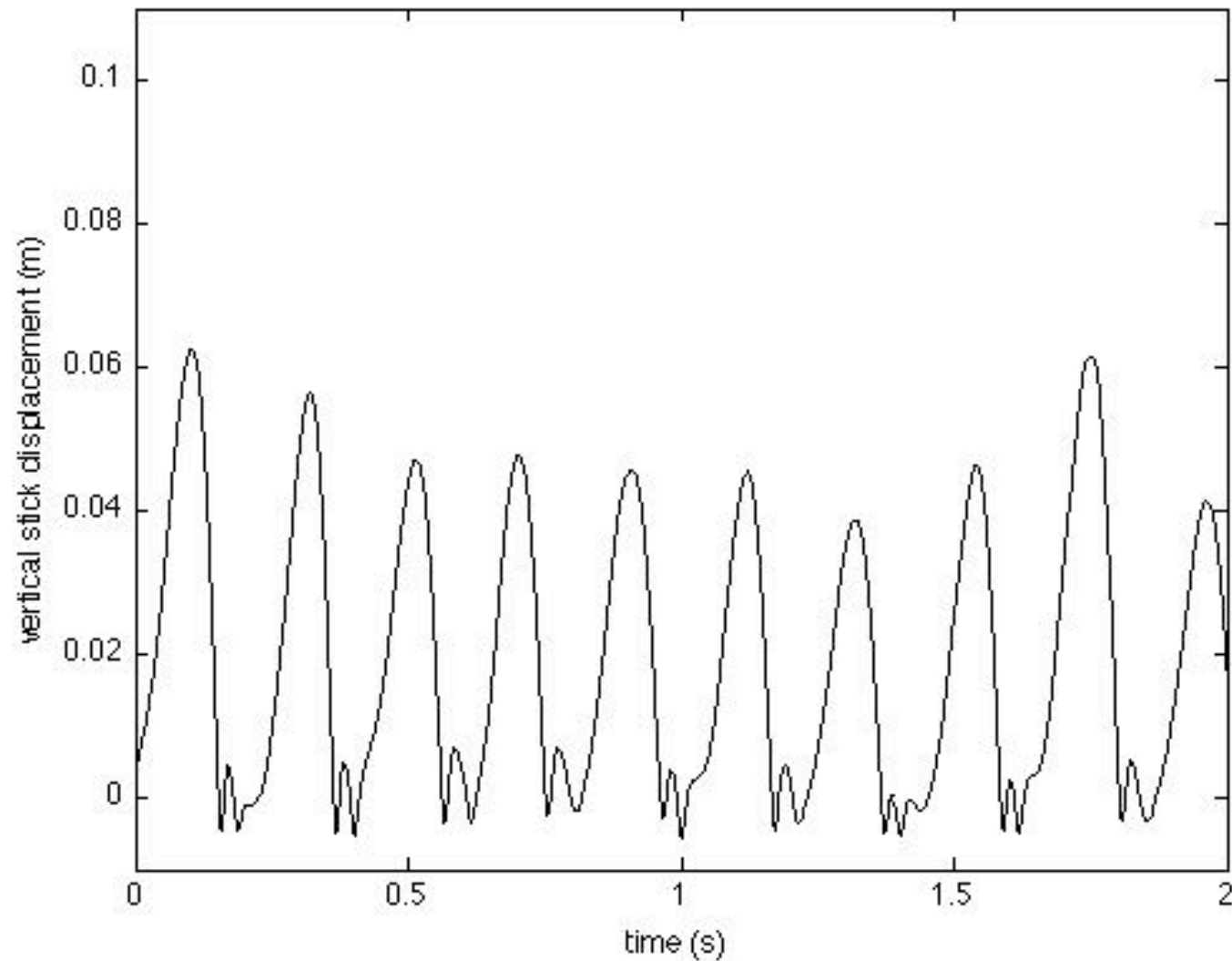
**healthy**  
**300 bpm**  
**mf**



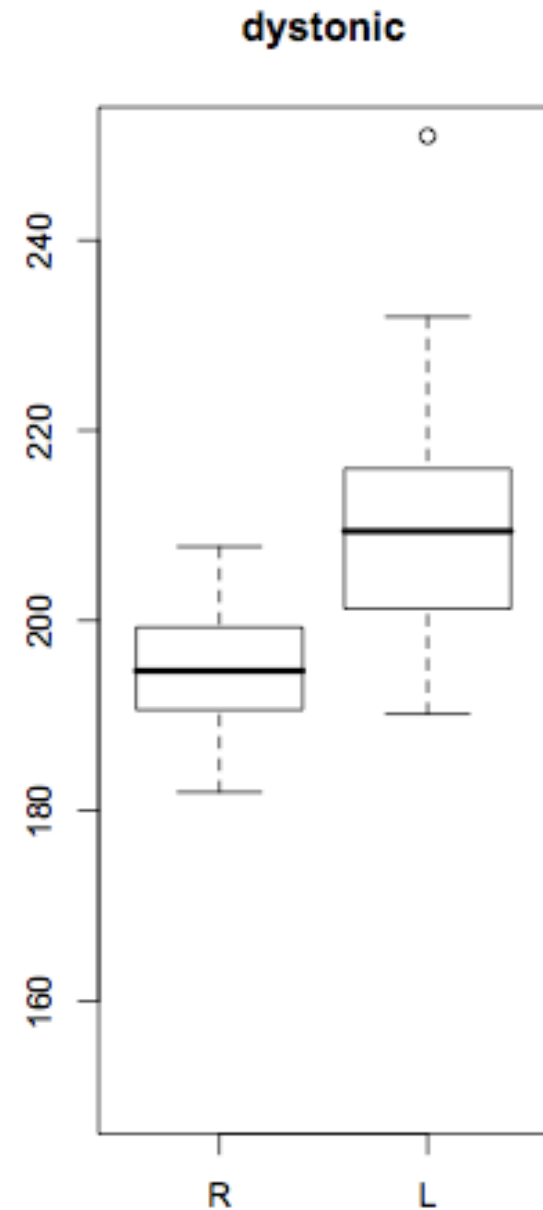
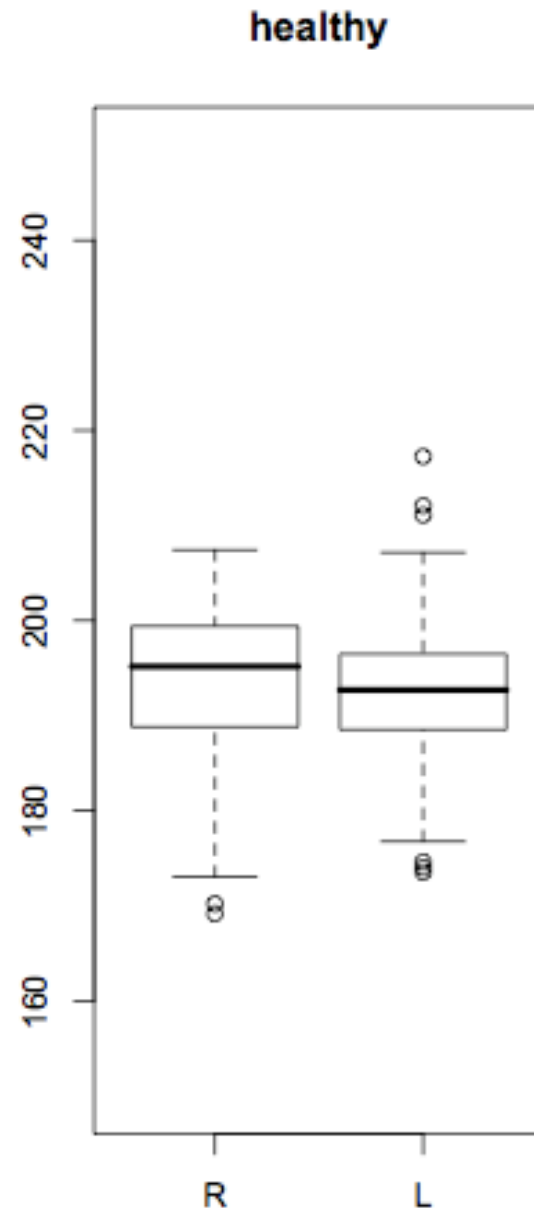
**dystonic**  
**300 bpm**  
**mf**



# Comparing left and right – phase plots



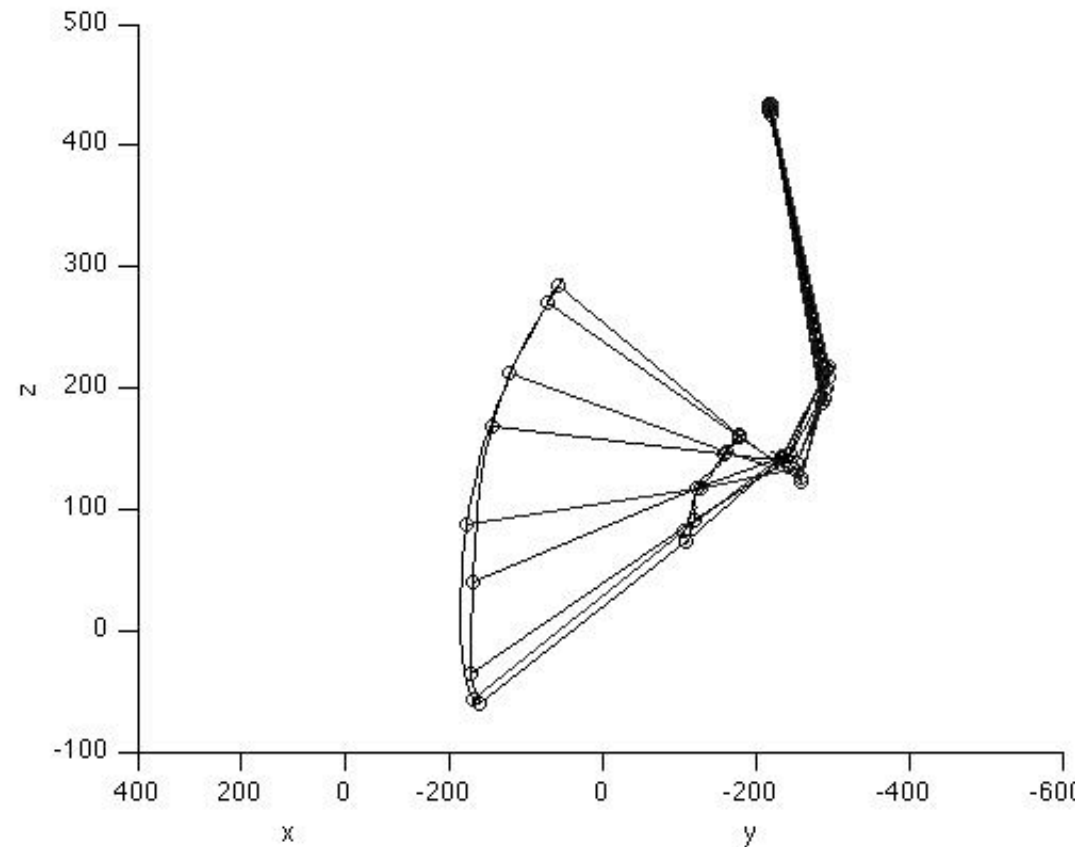
## Comparing left – right (120 and 300 bpm )



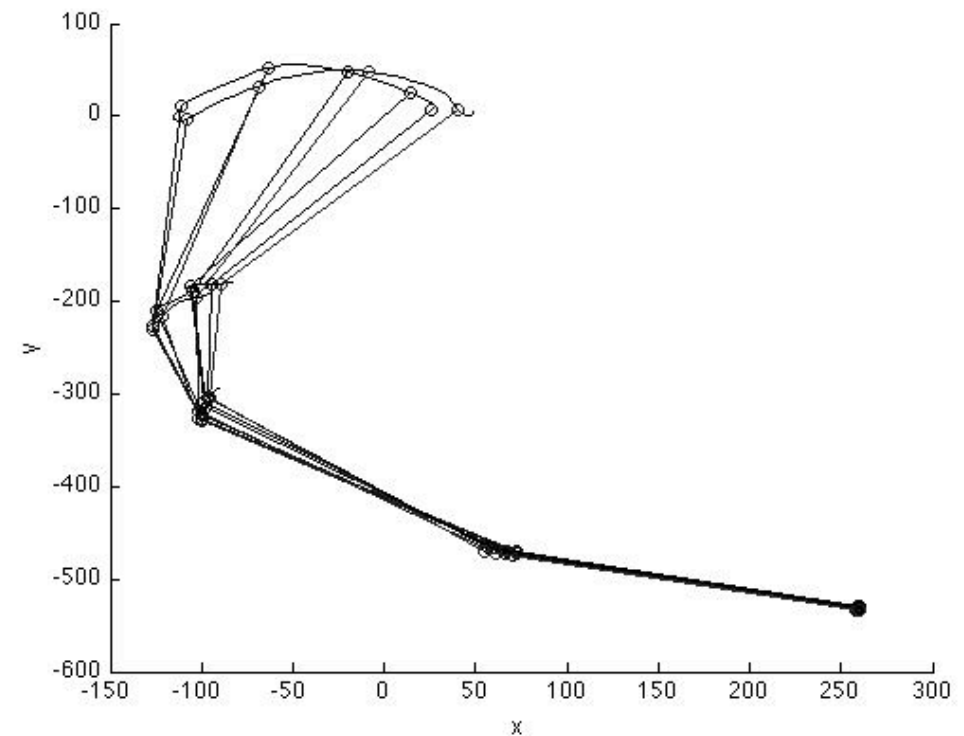
# Patient I, left arm, f, 300 bpm



front view



top view



# Learning to play

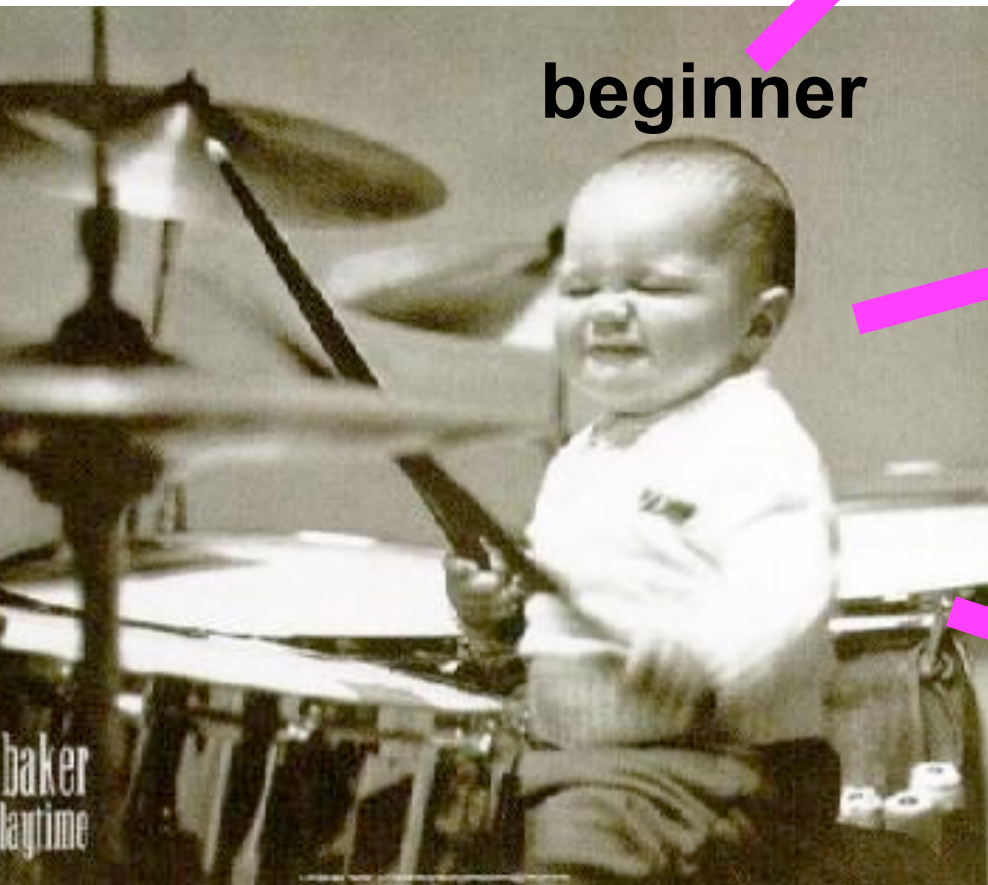
Playing for fun

beginner

Professional



Drop out



# Acknowledgements

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Musicians' medicine, Hanover



Hochschule  
für Musik und Theater  
Hannover

Thanks to all our participants playing and  
participating in the listening tests.

# Thank you!