# TOWARD AUTOMATING PATIENT-SPECIFIC STRESS ANALYSIS FROM MEDICAL IMAGING



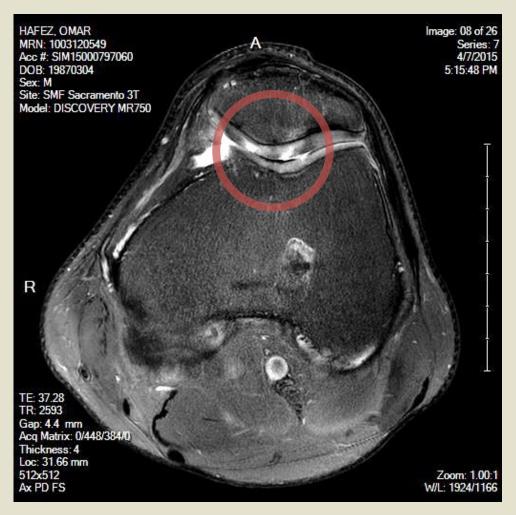
# Omar Hafez UC Davis

DOE CSGF Annual Program Review 28 July 2015 • Arlington, VA



#### A SHORT STORY





# **IN A NUTSHELL**

#### **Medical Imaging**

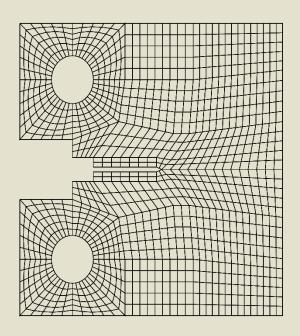
- X-ray, MRI, CT, ultrasound
- Used for diagnostics: identification of tumors, kidney stones, osteoarthritis

#### **Physics-Based Simulation**

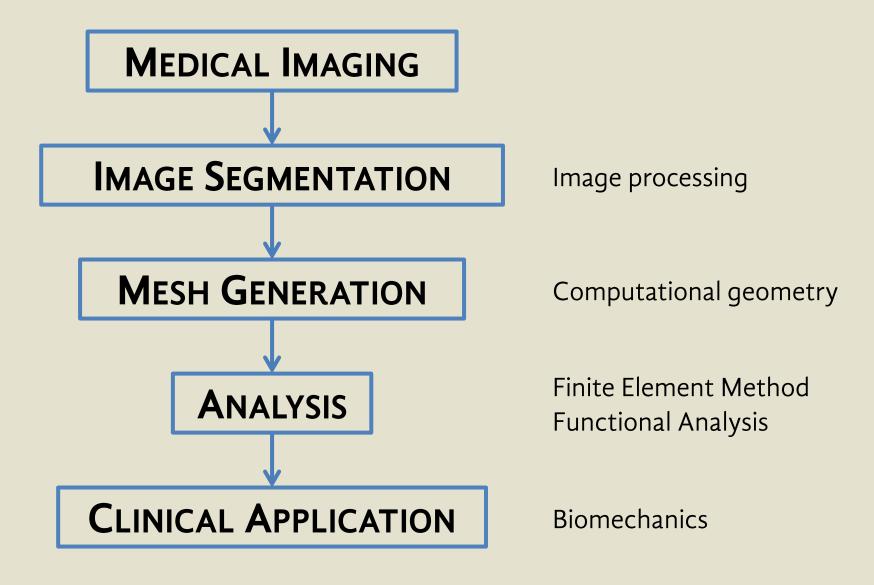
- FEM, meshless methods, finite volumes, finite differences
- Ability to provide engineering guidance to biomechanics problems

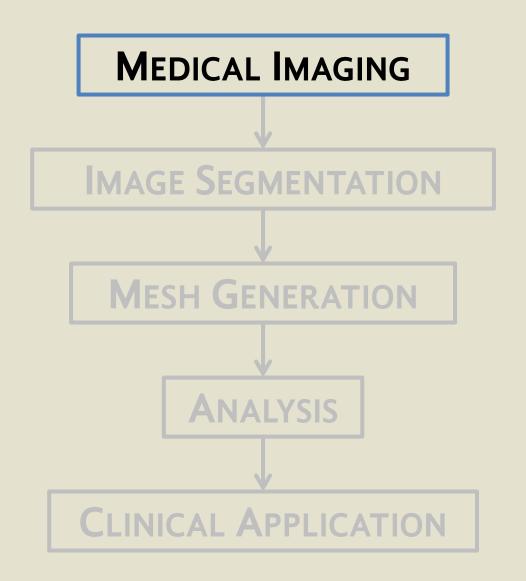






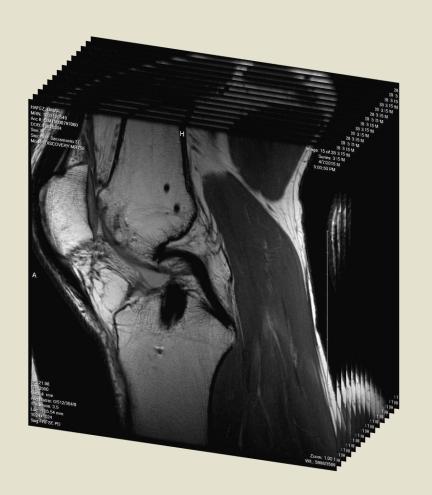
info.blockimaging.com/bid/98700/GE-MRI-Scanner-Cost-Price-Info





# **MAGNETIC RESONANCE IMAGING (MRI)**

- Roughly measures the <u>weighted</u>
   <u>proton density</u> of each point in the field
- Set of 2D slices represent 3D data set
- Image resolution: ~ 0.5 x 0.5 x 3 mm
- MRI essentially provides <u>3D point</u> <u>intensity data</u>



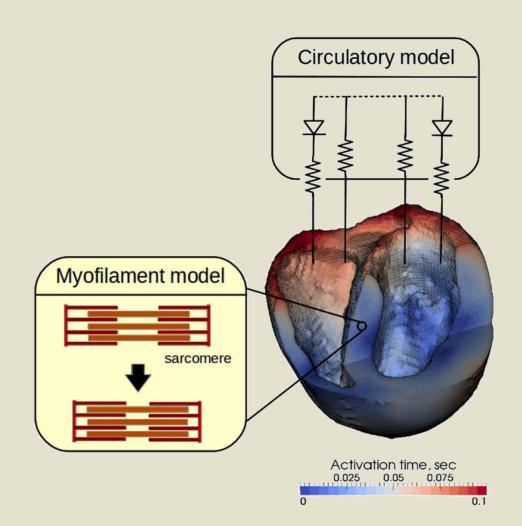
# **CARDIOID**

Joint venture of LLNL and IBM

Sequoia: 20 PFLOPS, 98k nodes, 1.6m processors

 Electrophysiology + mechanics of human heart → mechanisms of sudden cardiac arrest from arrhythmia

 Highly efficient and scalable code → unprecedented exploration



#### **MECHANICS**

- Passive cardiac tissue modeled as a hyperelastic, incompressible material with orthotropic properties
- mixed pressure-displacement finite elements are used to enforce incompressibility
- Active stress is generated by a model with force dependence on length and velocity of muscle shortening

$$\frac{\partial}{\partial X_M} (T_{MN}(\mathbf{x}, p) F_{iN}(\mathbf{x})) + \rho g_i = 0$$

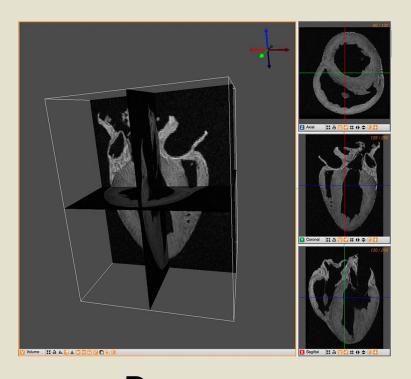
$$J = 1$$

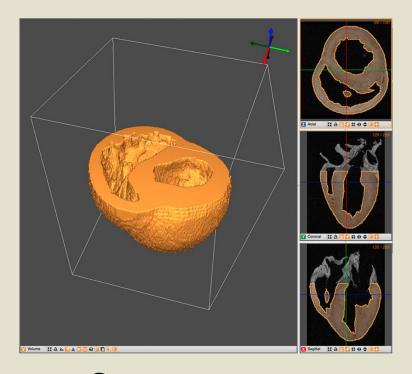
$$T^{\text{active}} = \sigma_a \mathbf{f} \mathbf{f}^{\text{T}}$$
 
$$\frac{\mathrm{d} \mathbf{w}}{\mathrm{d} t} = \mathbf{q}(\mathbf{w}; t_a, \lambda)$$
 
$$\sigma_a \equiv \sigma_a(\mathbf{w}; t_a, \lambda)$$

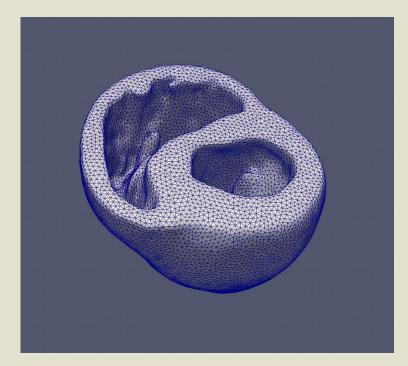
$$\begin{cases} \frac{\mathrm{d}\bar{\mathbf{w}}}{\mathrm{d}t} = \bar{\mathbf{q}}(\bar{\mathbf{w}}, t_a, \mathbf{U}) \\ K(\bar{\mathbf{w}}, \mathbf{U}, \mathbf{P}) = 0 \end{cases}$$

$$\mathcal{J}(\mathbf{U}_{k+1}^{j}, \mathbf{P}_{k+1}^{j}) \begin{bmatrix} \Delta \mathbf{U} \\ \Delta \mathbf{P} \end{bmatrix} = \begin{bmatrix} -\mathbf{r}_{u}(\mathbf{U}_{k+1}^{j}, \mathbf{P}_{k+1}^{j}) \\ -\mathbf{r}_{p}(\mathbf{U}_{k+1}^{j}, \mathbf{P}_{k+1}^{j}) \end{bmatrix}$$

# **TOOLCHAIN**







**RAW DATA** 



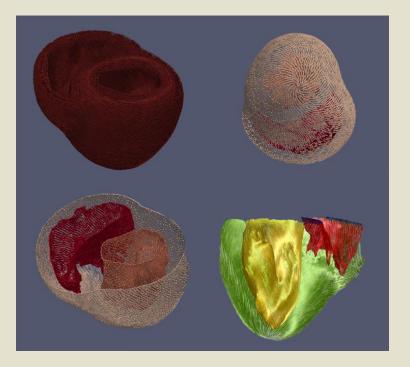
**SEGMENTATION** 

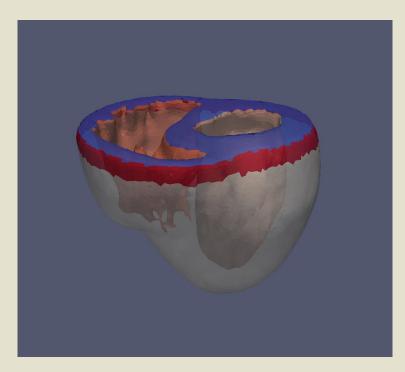


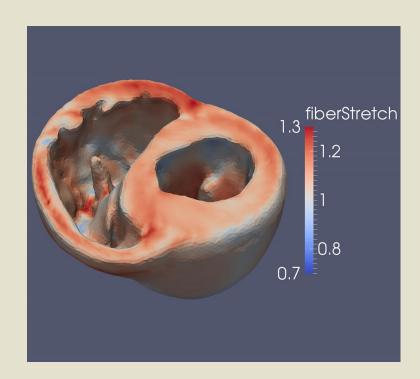
VOLUME MESH →



# **TOOLCHAIN**





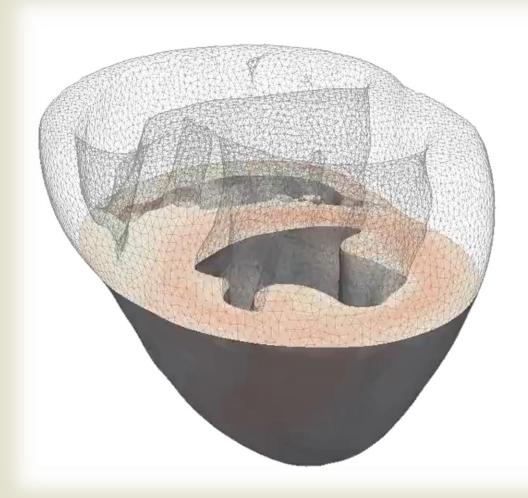


**FIBER GENERATION** 

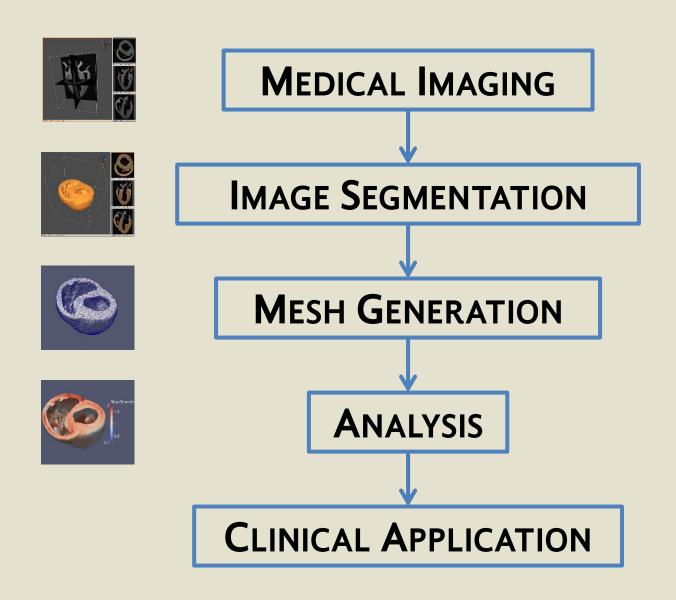
→ Boundary Conditions →

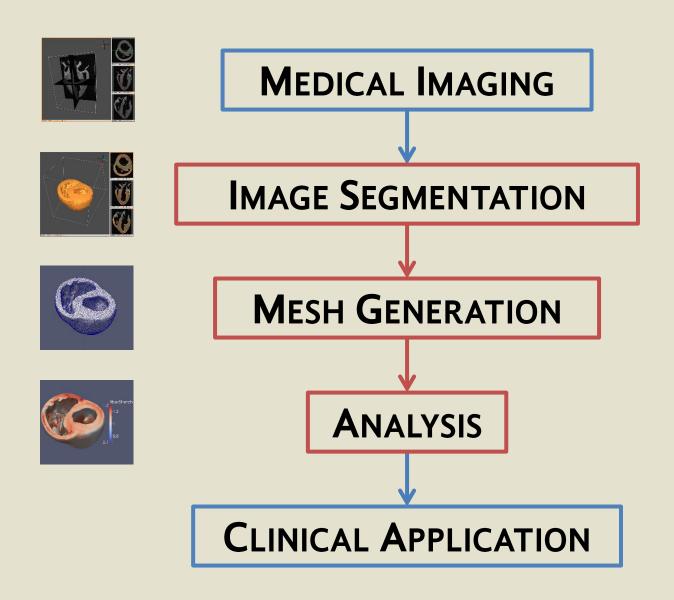
**A**NALYSIS

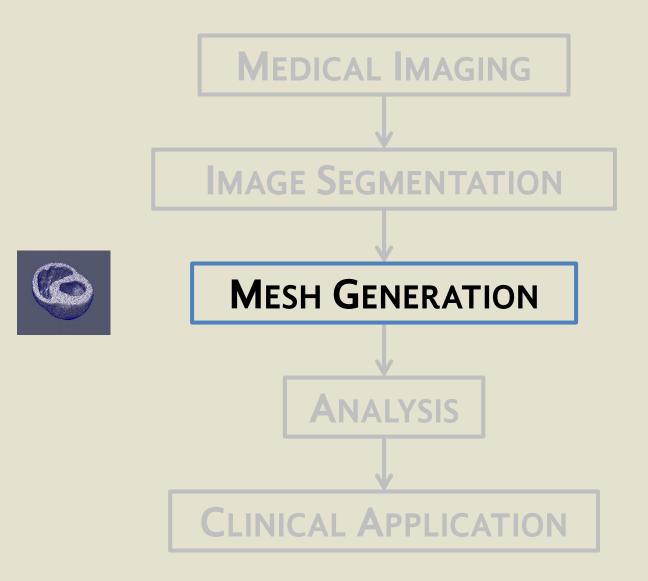
# **RESULTS**

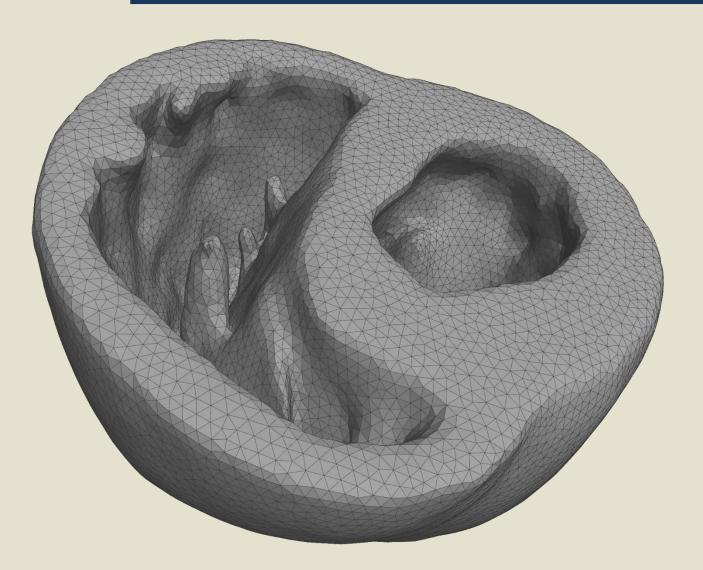




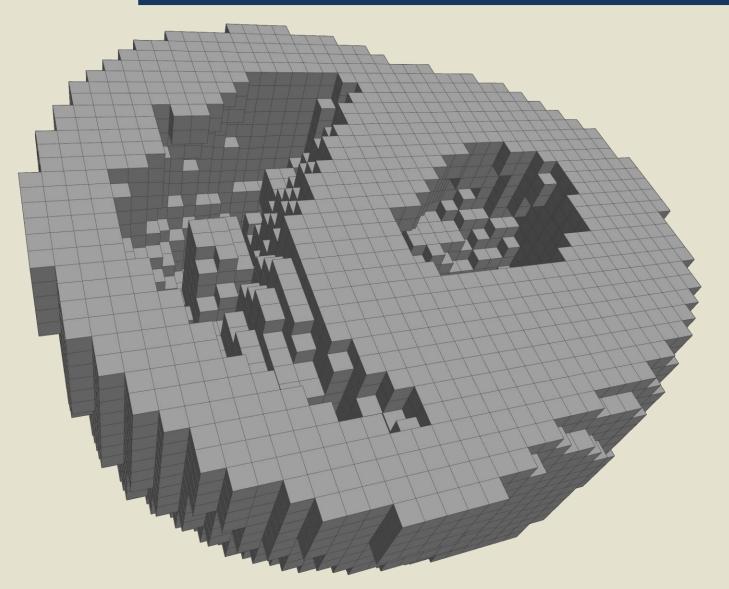




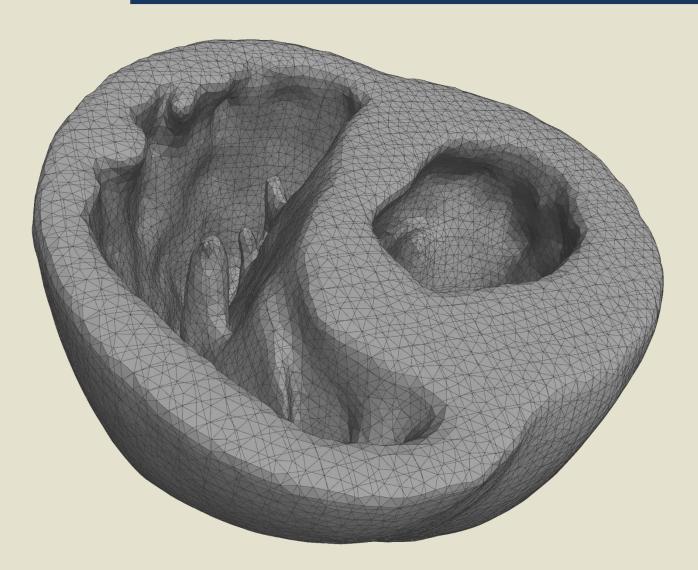




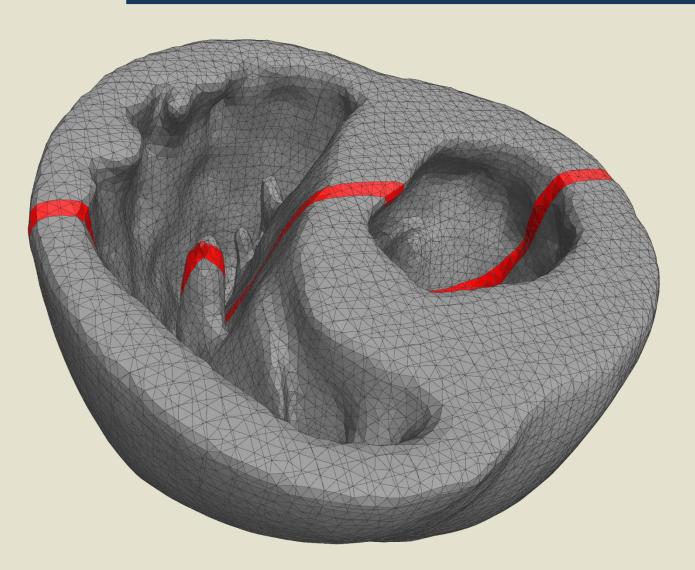
Given a
 boundary
 representation
 (b-rep) of the
 object

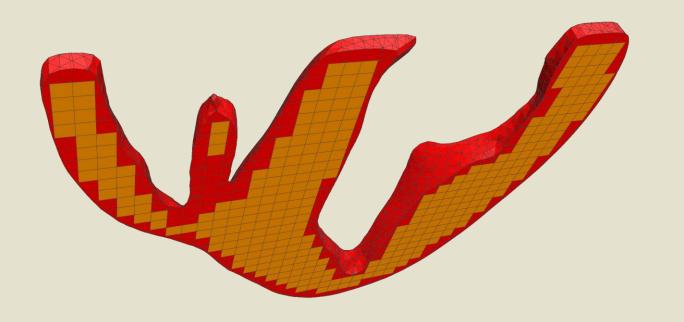


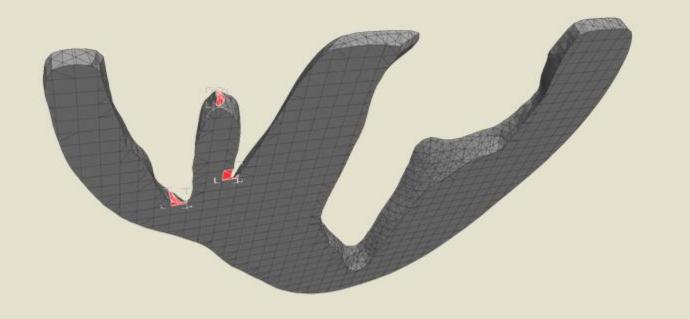
2. Create bounding hex mesh



3. "Sculpt" the hex mesh with the b-rep















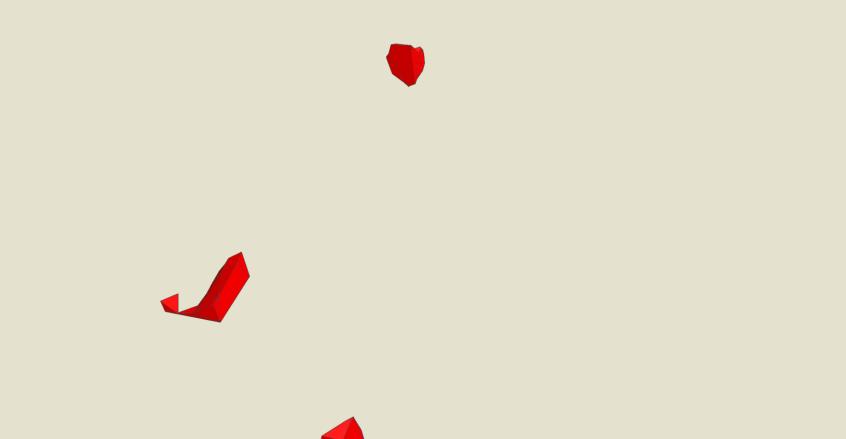


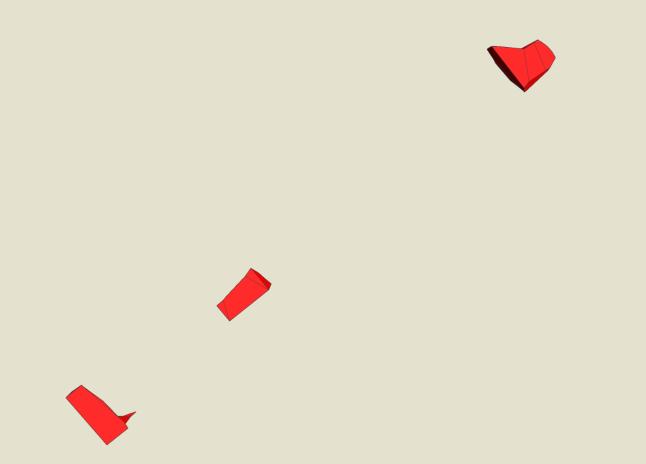






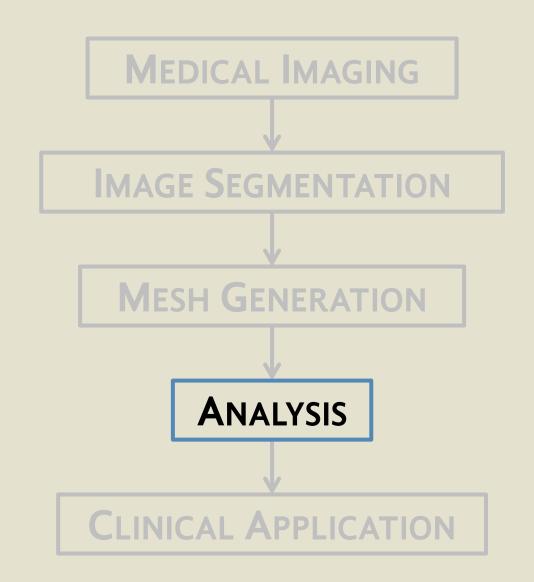


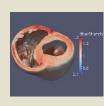




# **COMPARISON**

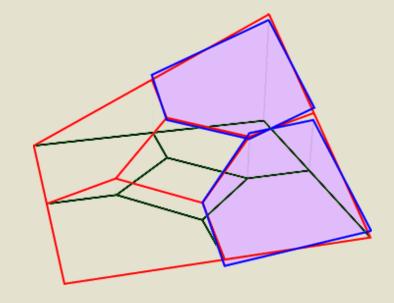
- Quadratic tetrahedra: 856k DOF
- Comparable polyhedral elements: 106k DOF
- Generally get order of magnitude reduction in system compared to tets!
- Heterogeneous conventional meshes can have their own (stability related) issues

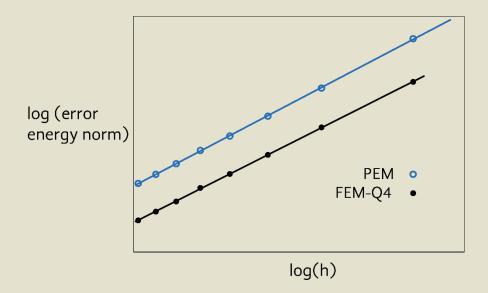


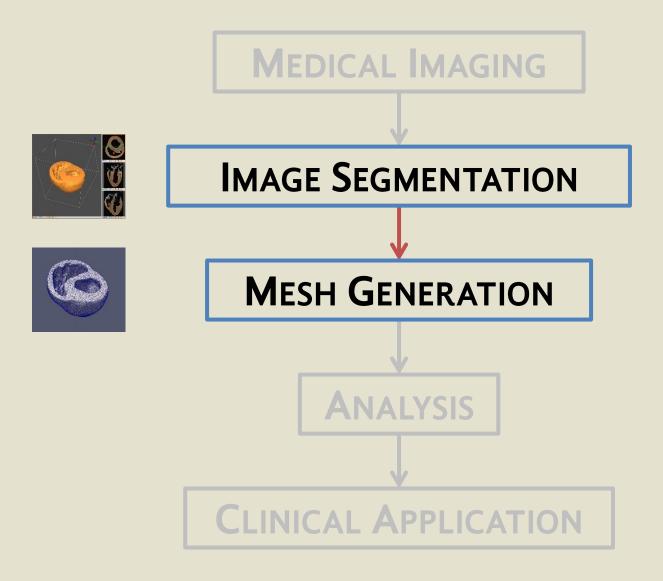


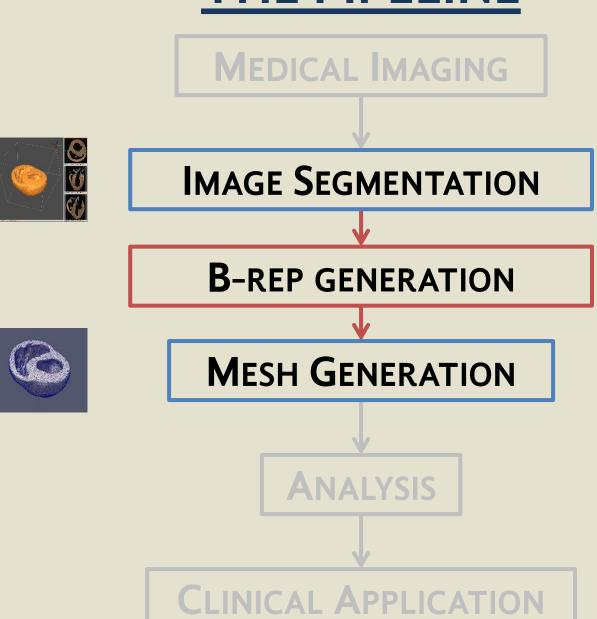
#### THE PARTITIONED ELEMENT METHOD

- A new, FE-like method that accommodates essentially arbitrary polyhedral elements
- Allows for fast, robust meshing no longer a bottleneck
- Shape functions are discrete discontinuous, piecewise linear functions over partitions of physical element
- Converges at the same rate as FEM
- PEM enjoys FEM-like BC enforcement and quadrature efficiency, without the strict topological restrictions on elements



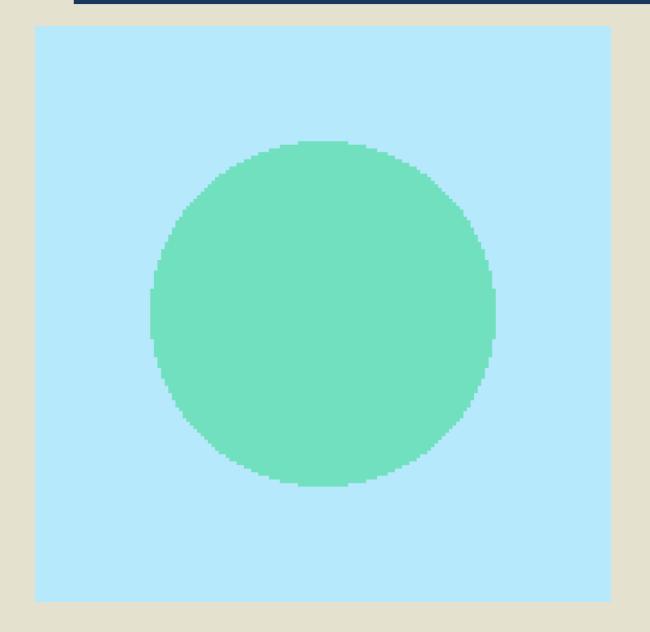




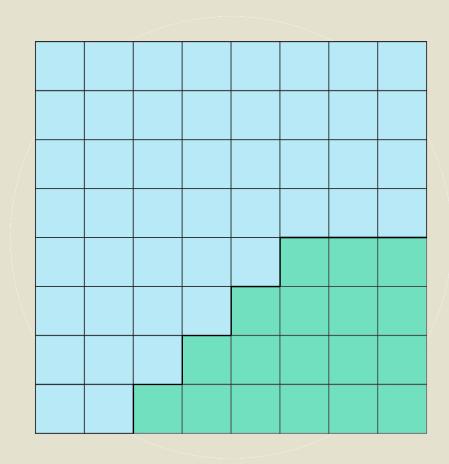


# **OBJECTIVES**

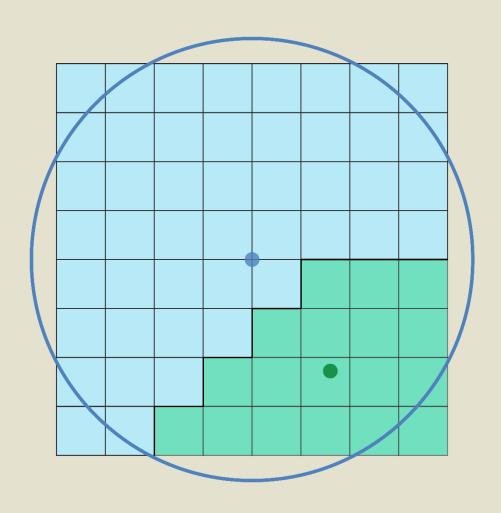
- Given 3D point intensity values, seek to
  - identify the different materials in a scan (segmentation) and
  - define their facetized boundaries (b-rep generation)
- Seek to:
  - 1. Minimize user interaction
  - 2. Produce an explicit definition of a facetized, watertight boundary representation
  - 3. Robust and reproducible
- For now, assume segmentation as input (manual, level sets, etc.)



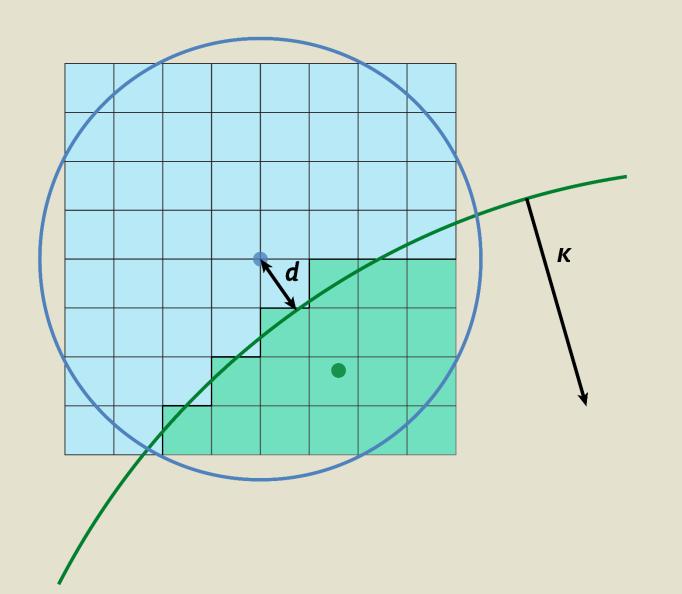
Use segmented image as input – each voxel assigned a region



Consider a window in the segmented image



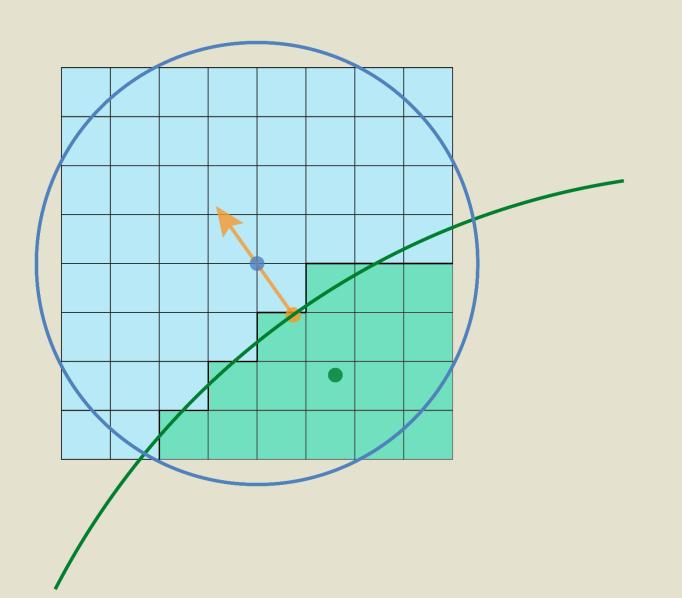
Identify a disc that shares the same area and centroid of the entire window



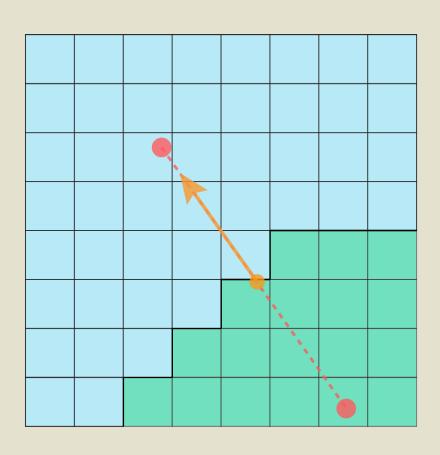
Approximate interface with circular arc

Match the area and centroid of material with the area and centroid of the intersecting disc.

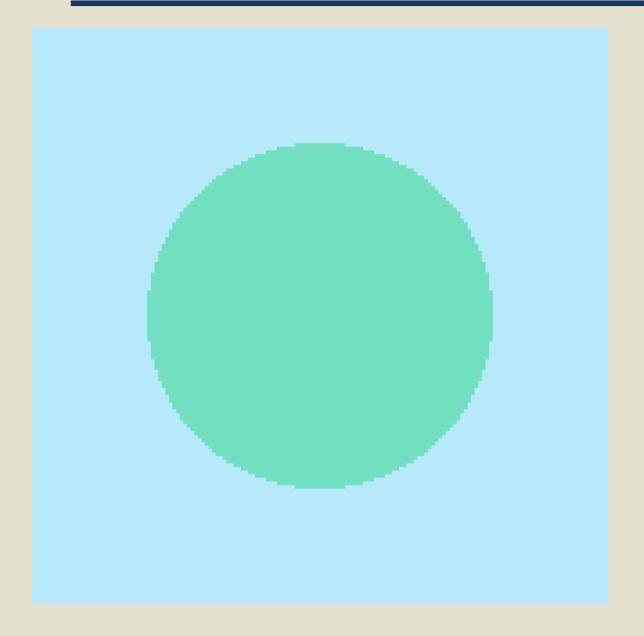
Results in nonlinear system of equations in **d** and **K**.

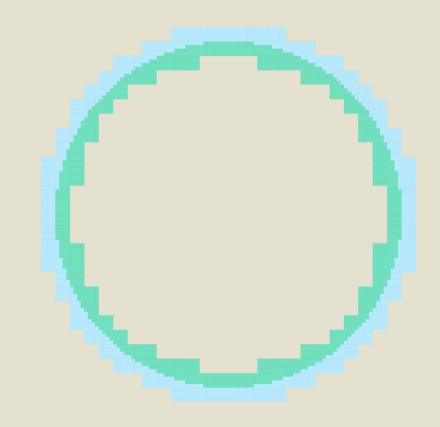


Identify the discrete point-direction pair defined by these geometric constructs

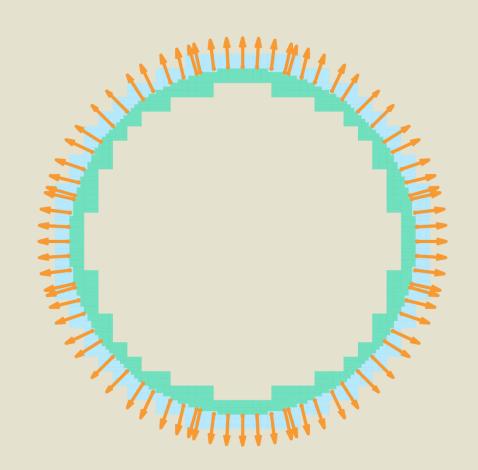


Introduce Voronoi site pair based on point-direction pair

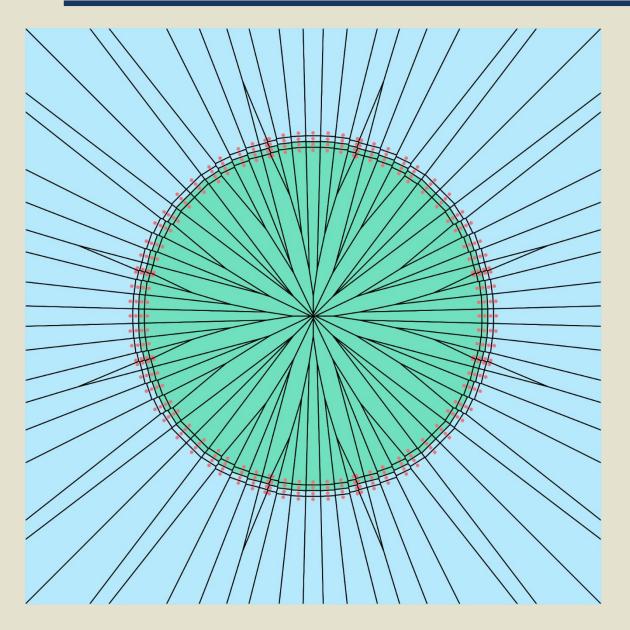




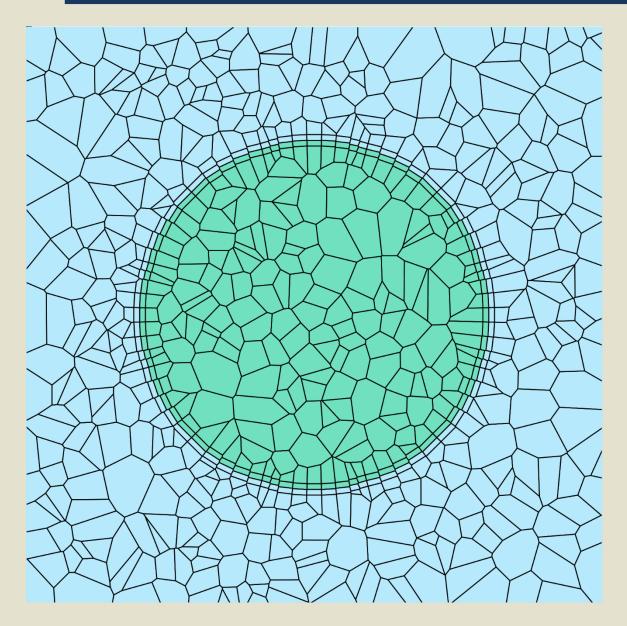
Identify windows that have multiple materials



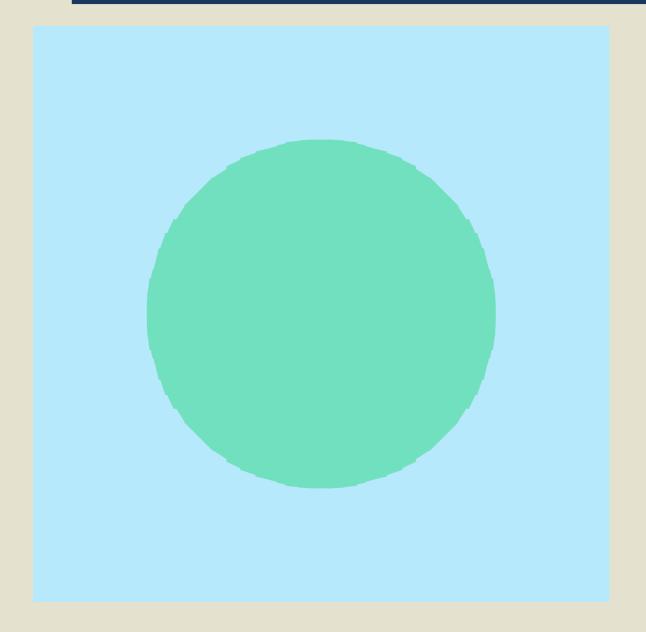
Compute discrete point-direction pair for each window



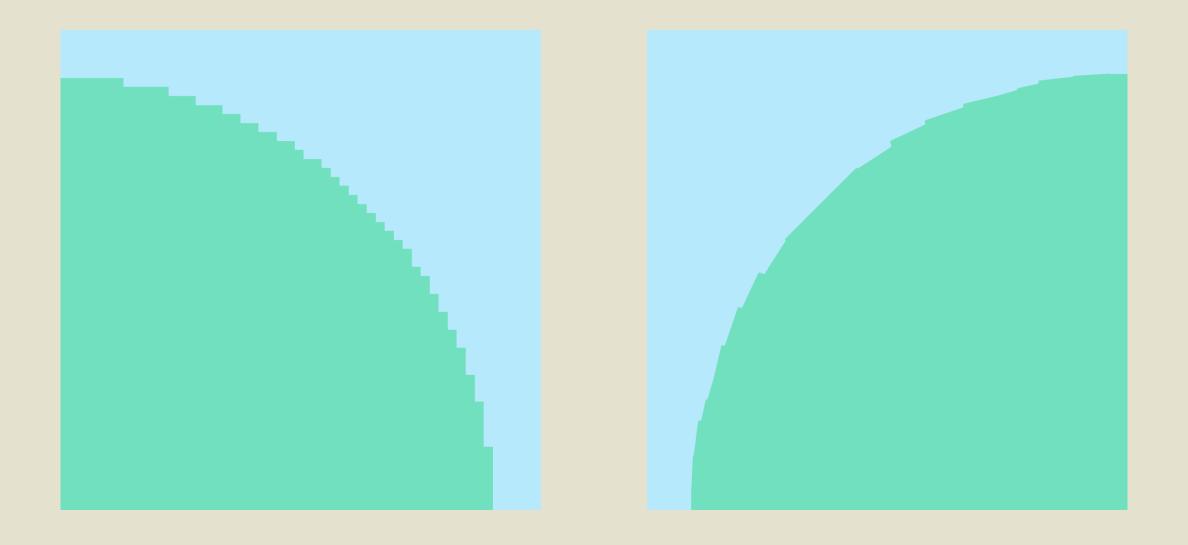
Introduce site pairs



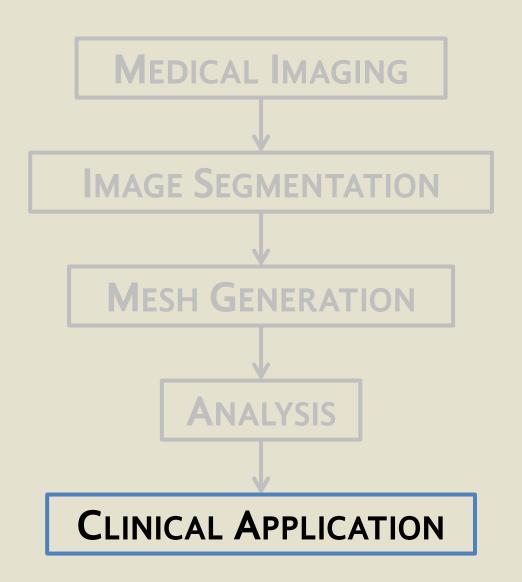
Introduce additional sites and perform Voronoi partition



Resulting material labeling from Voronoi partition

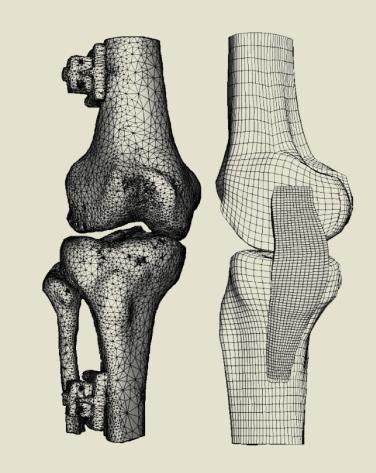


### THE PIPELINE



### **CLINICAL APPLICATION**

- Potential for to play important analytic and predictive role in medical applications
  - Improved diagnosis and treatment
  - Identify causes of pathology
  - Surgical design/planning
  - Computer-assisted surgery (real-time)
  - Haptic technologies/surgeon training



Gardiner JC, Weiss JA. Subject-specific finite element analysis of the human medial collateral ligament during valgus knee loading. Journal of Orthopaedic Research, vol. 21, pp. 1098-1106, 2003

### "CLINICAL COMPUTATION"

- An automated, patient-specific process provides the means to run lots of simulations quickly, and get lots of data
- Clinical trials via simulation
- Additional considerations needed:
  - Material properties
  - Boundary conditions
  - UQ, V&V
  - HPC

#### One day:

"With a 95% confidence level, changing the drilling angle by 3% for an ACL graft reduces the average patellofemoral stress 10-15%"

# THANK YOU

# UNIVERSITY OF CALIFORNIA, DAVIS

**MARK RASHID** 

#### **CELERIS LLC**

ANDREW BALDWIN ALIPASHA SADRI

# LAWRENCE LIVERMORE NATIONAL LABORATORY

FRED STREITZ
DAVID RICHARDS
JEAN-LUC FATTEBERT

# INTERNATIONAL BUSINESS MACHINES

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#### **KRELL INSTITUTE**

**TOO MANY TO LIST!** 

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