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Reduced Order Model for enhanced EVAR Planning and navigation guidance

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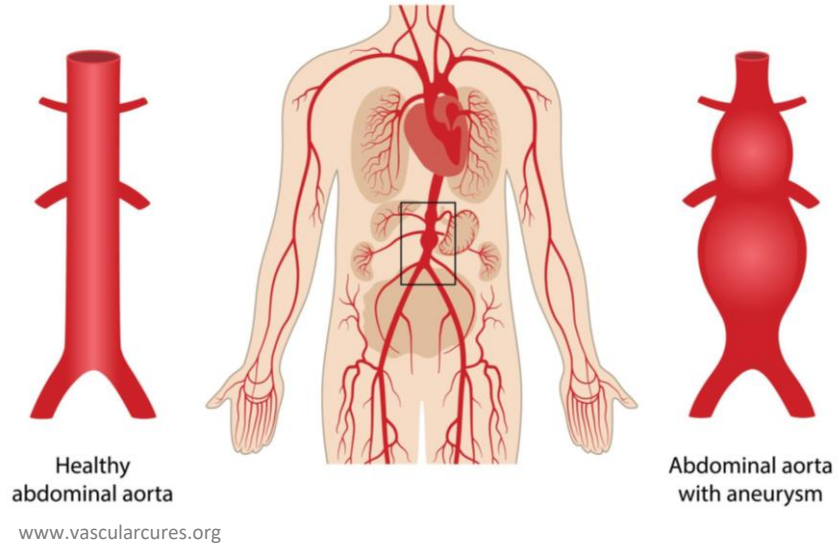
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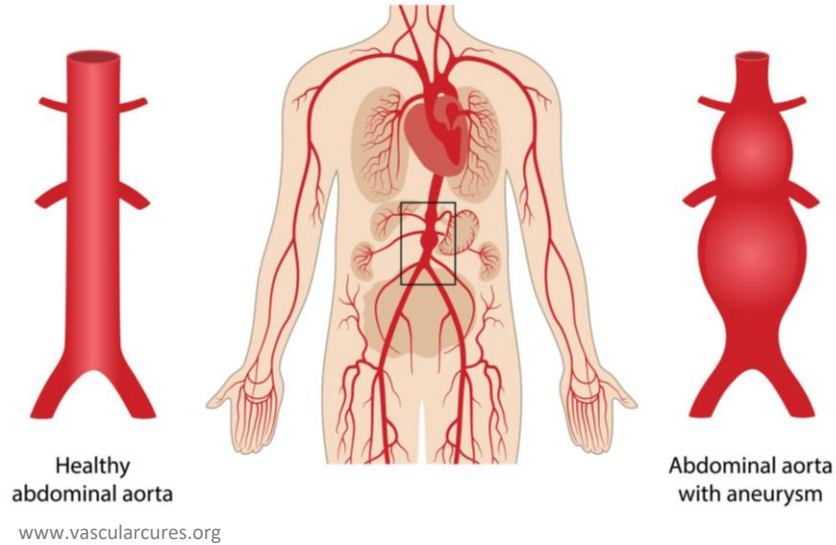
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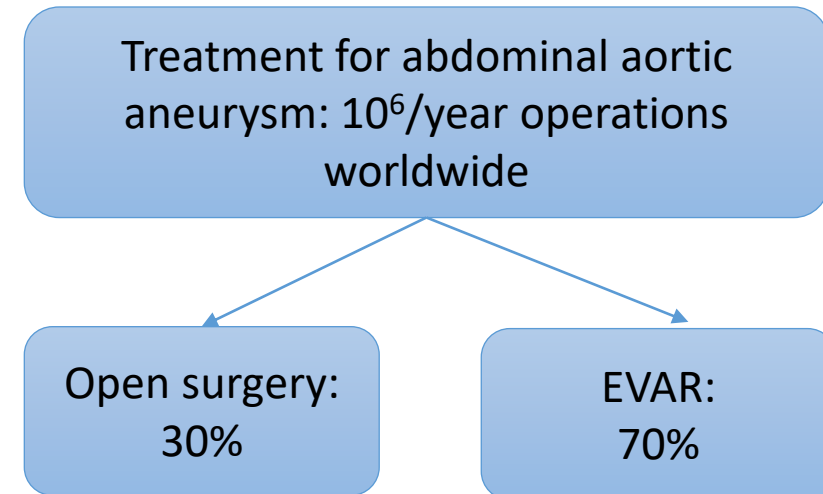


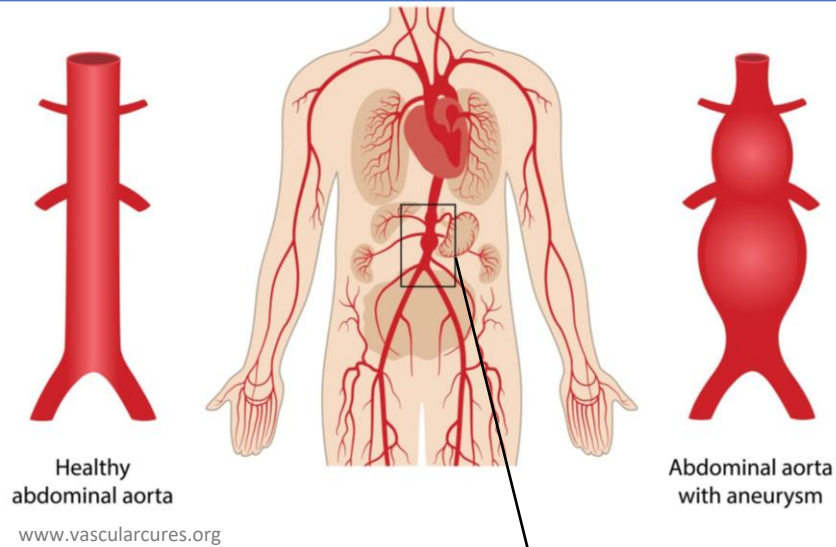


An abdominal aortic aneurysm (AAA) is the bulging or 'ballooning' of the abdominal aorta.

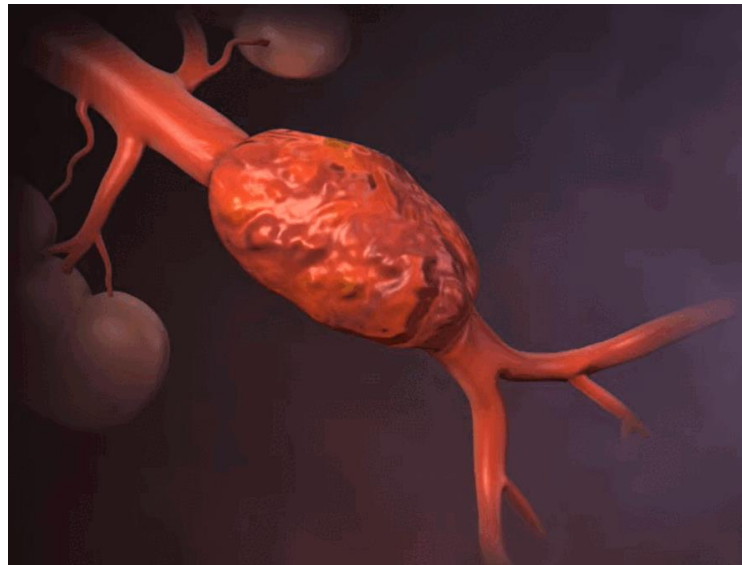


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www.massmed.org/

Treatment for abdominal aortic aneurysm: 10^6 /year operations worldwide

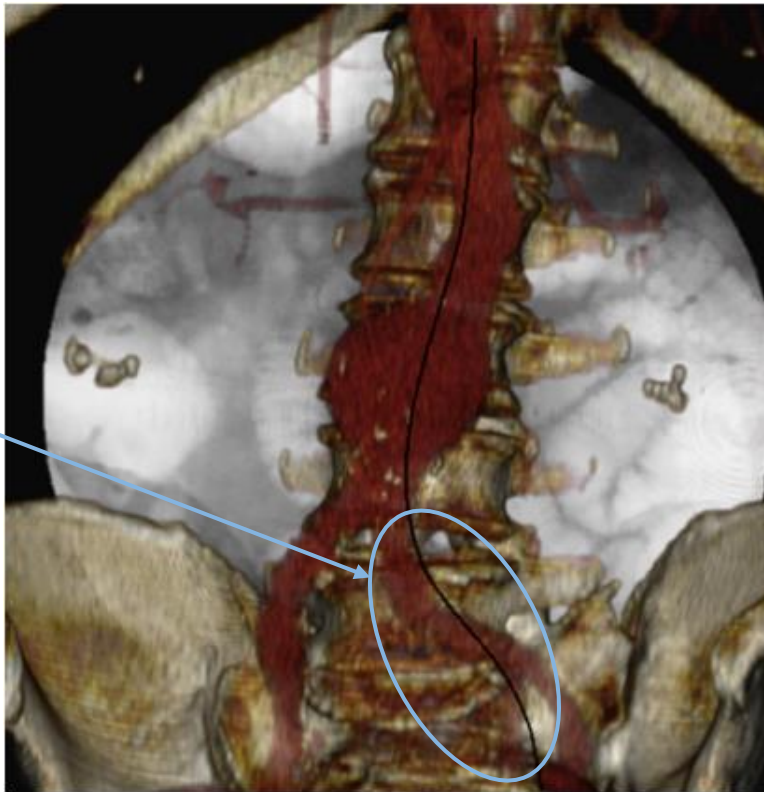
Open surgery:
30%

EVAR:
70%

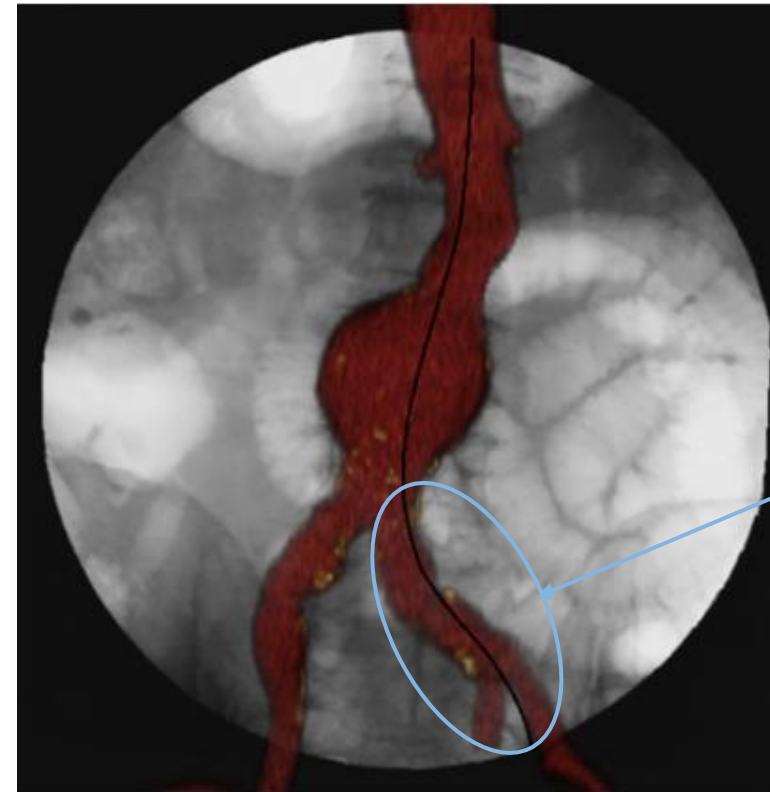
Preoperative volume

Deformed volume

Stiff guidewire
outside of the
aortic boundaries.



Stiff guidewire
within the
aortic
boundaries.

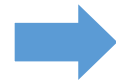


Kaladji A, et al., Comput Med Imaging Graph. 2013

Issue: Difficulty in the estimation of guidewire-induced deformations



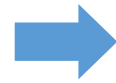
Challenge: Provide clinicians with a fast and accurate tool for predicting guidewire-induced deformations



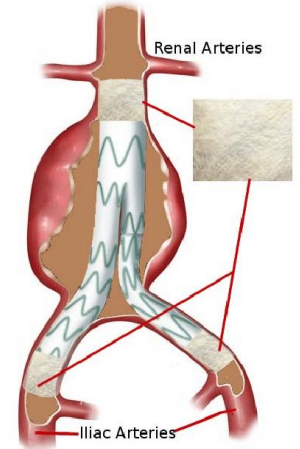
Radiations and contrast ↑



Risk of failure ↑



Post-operative complications ↑

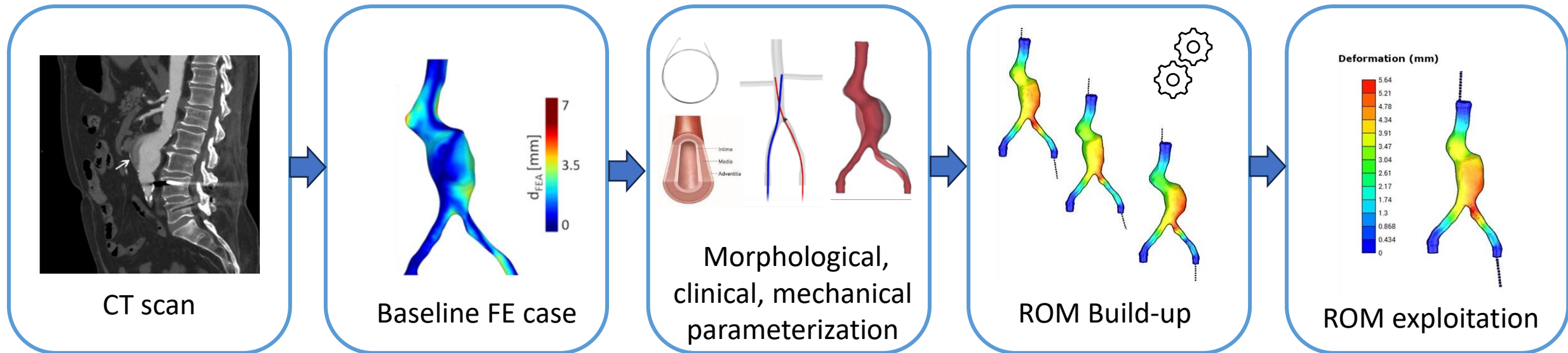


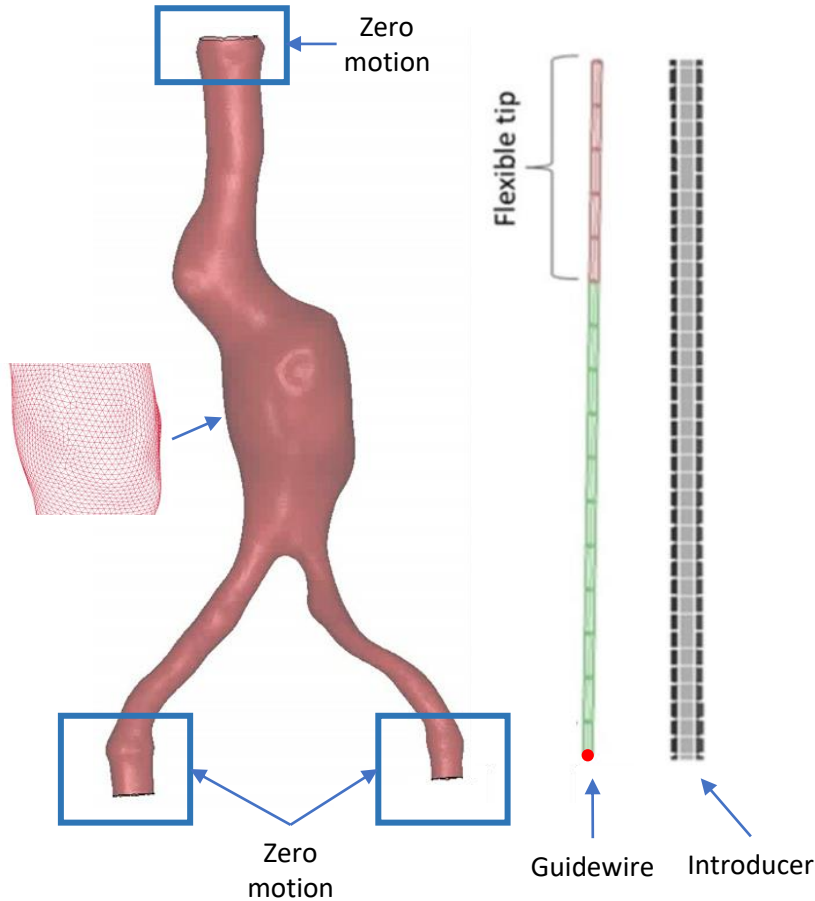
Pre-operative CTA

Intra-operative CBCT



Koutouzi et al., Eur. J. Vasc Surgery, 2019





Discretization:

	Aortic wall	Guidewire	Introducer
Element type	Shell	Beam	Shell
Element size (mm)	1.4	4	1

Details:

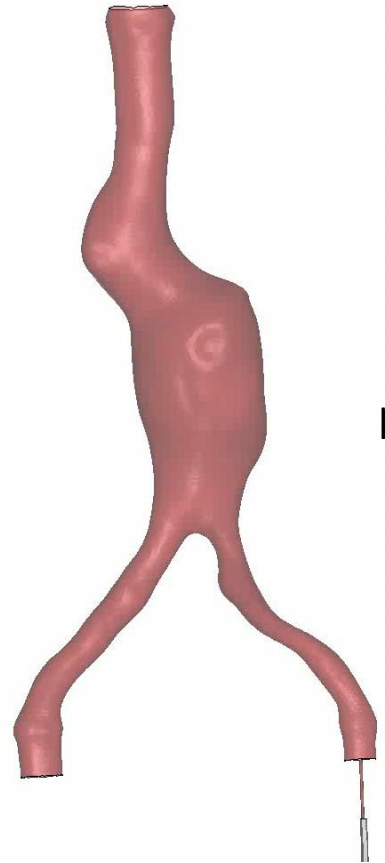
- Aortic wall mesh: C^0 triangular shell elements with 2.5 mm thickness
- Guidewire: Beam elements Hughes-Liu with cross-section integration
- Flexible tip: gradually decreasing elastic modulus, ranging from 1 to 50 GPa.

Numerical set-up:

- Central difference time integration scheme
- Dampers with a damping coefficient of 10^{-7}
- Time step size of $5 \cdot 10^{-6}$ s

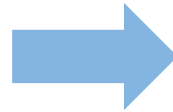
Boundary Conditions:

- Imposed velocity $v(t)$ to the most distal node of the guidewire
- Frictionless contact algorithm (Automatic beams to surface LS-DYNA type) between the guidewire and the vessel
- standard penalty formulation contact type between the guidewire and the introducer



High-fidelity Finite Element simulation

Problem parameterization



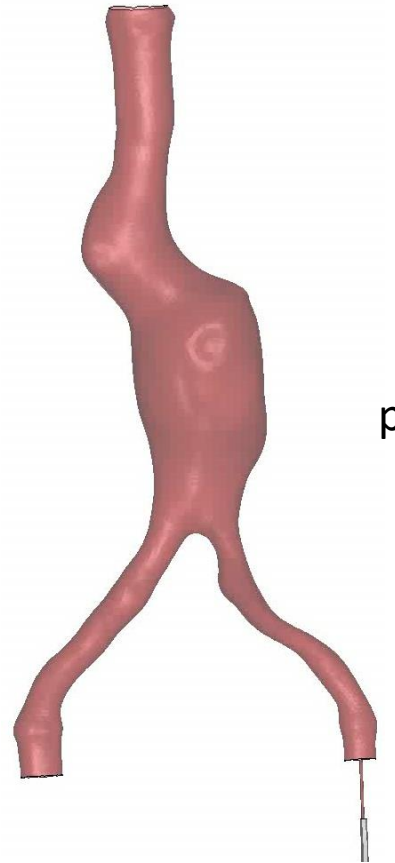
Mechanical parameters

Aortic elasticity

Guidewire's stiffness

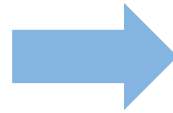
→ $0.8 \text{ MPa} \leq E_{\text{aorta}} \leq 3 \text{ MPa}$

→ $60 \text{ GPa} \leq E_{\text{wire}} \leq 200 \text{ GPa}$



High-fidelity Finite Element simulation

Problem parameterization



Mechanical parameters

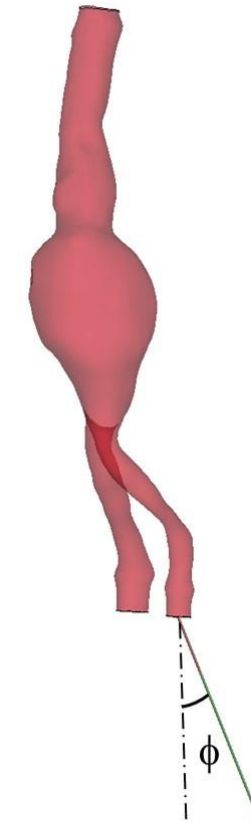
Aortic elasticity

Guidewire's stiffness

Clinical parameters

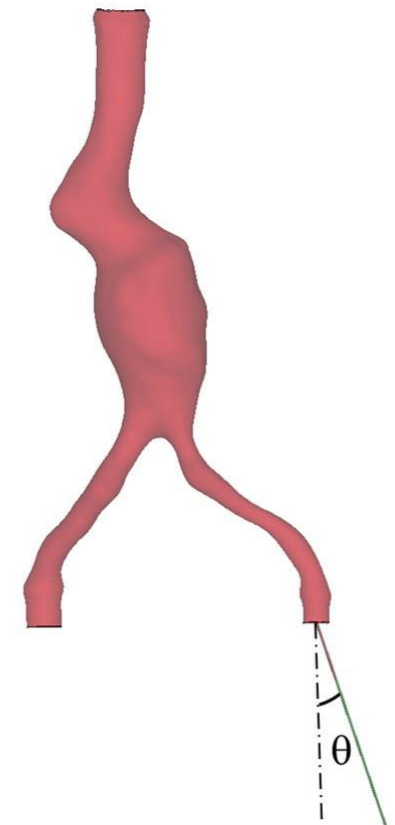
Insertion angles

Sagittal view

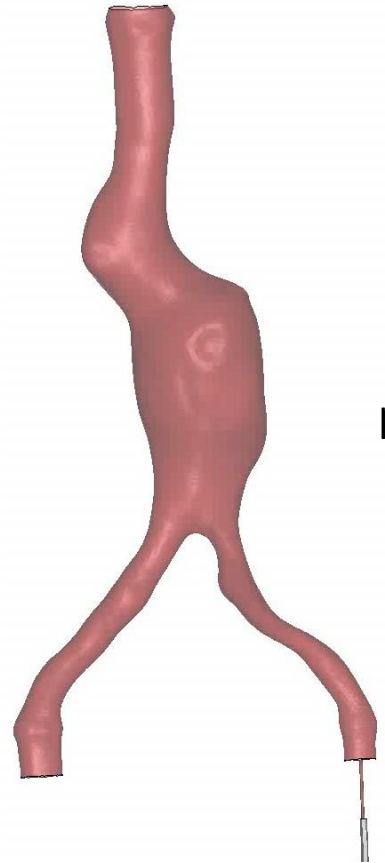


$$-25^\circ \leq \varphi \leq 0^\circ$$

Frontal view

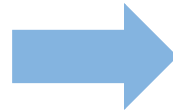


$$0^\circ \leq \theta \leq 20^\circ$$



High-fidelity Finite Element simulation

Problem parameterization



Mechanical parameters

Aortic elasticity

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Clinical parameters

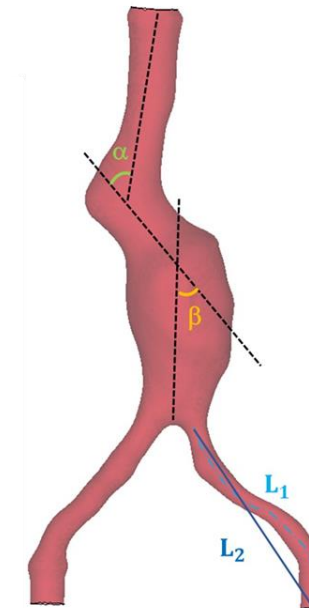
Insertion angles

Morphological parameters

Supra-renal neck angle α

Infra-renal neck angle β

Left iliac artery tortuosity τ



$$30^\circ \leq \alpha \leq 55^\circ$$

$$25^\circ \leq \beta \leq 60^\circ$$

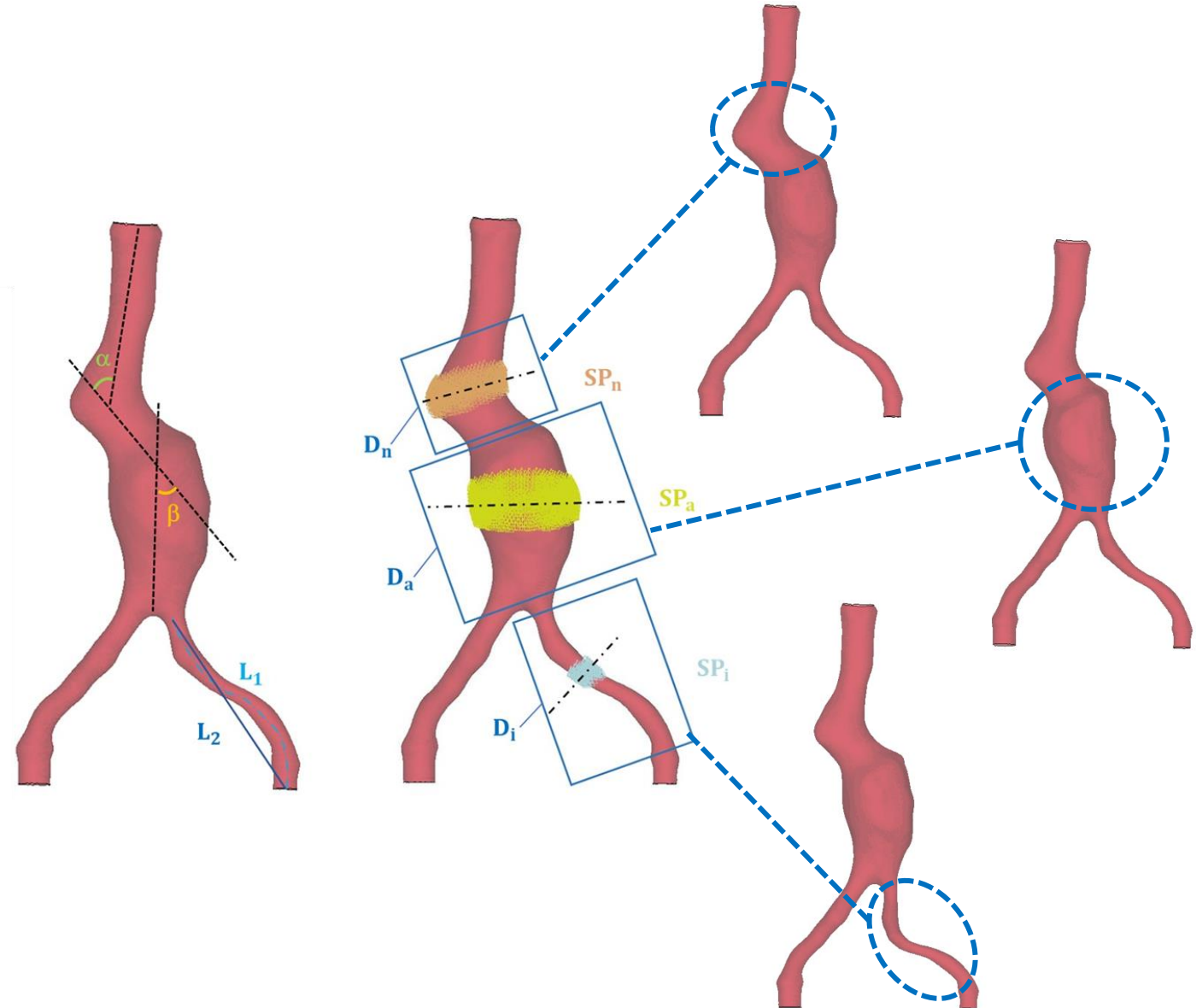
$$0.09 \leq \tau \leq 0.15$$

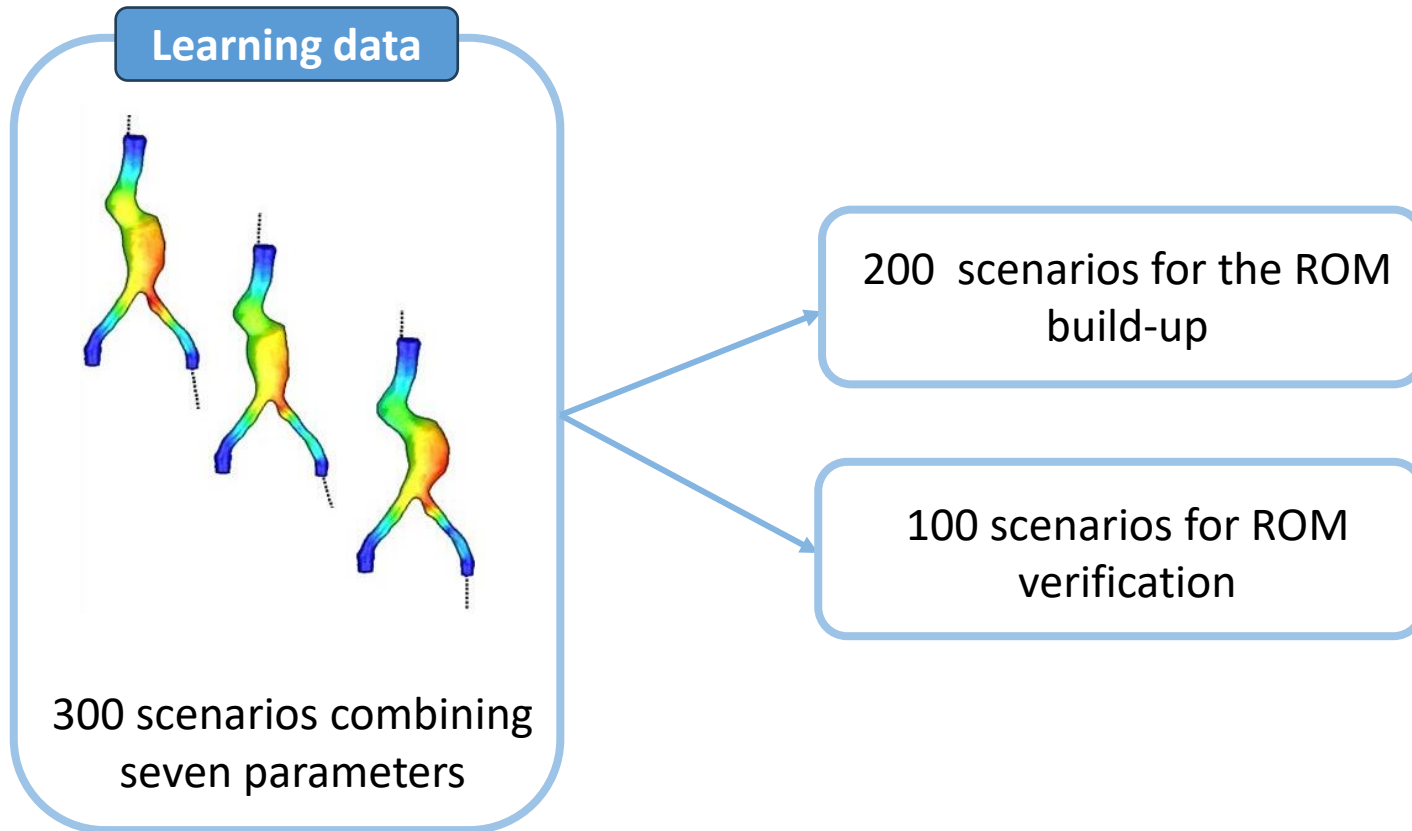
$$\tau = \frac{L_1}{L_2} - 1$$

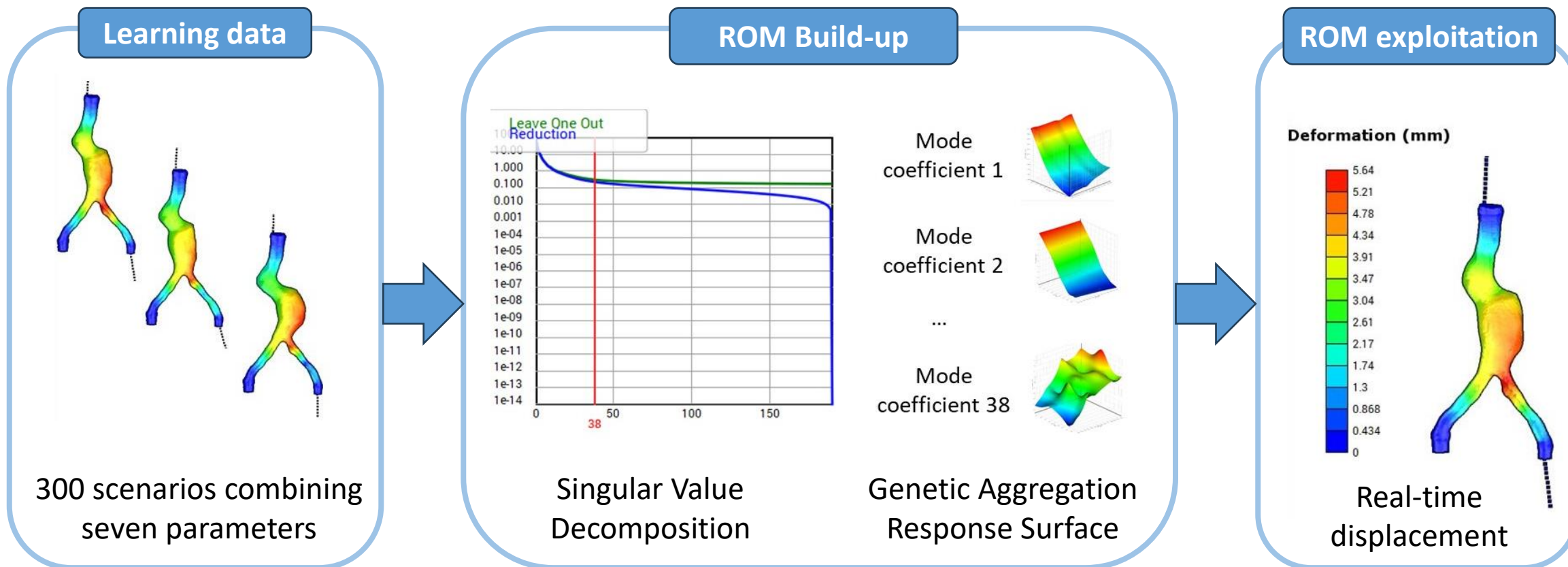


- 3 Shape modifiers
- 3 categories of source points (SP)
- 3 categories of domains (D)

The combination of the shape modifiers enabled us to explore a broad spectrum of possible aortic configuration

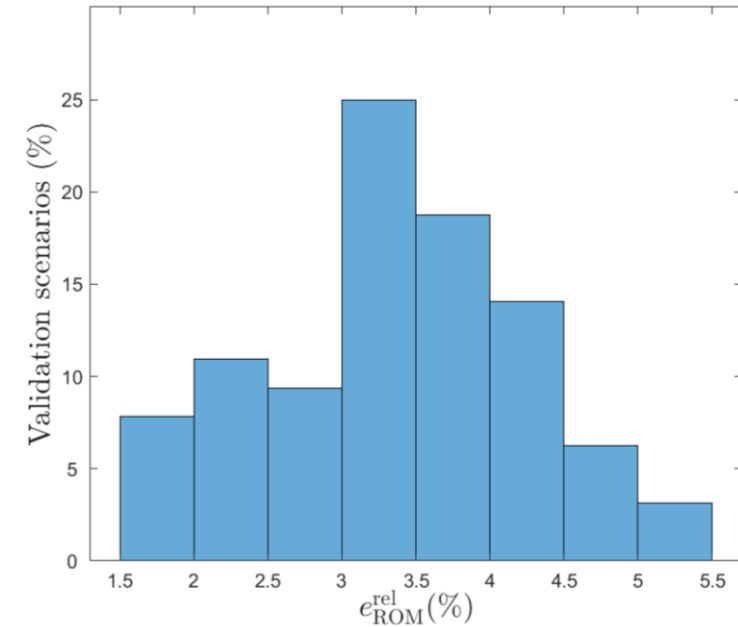
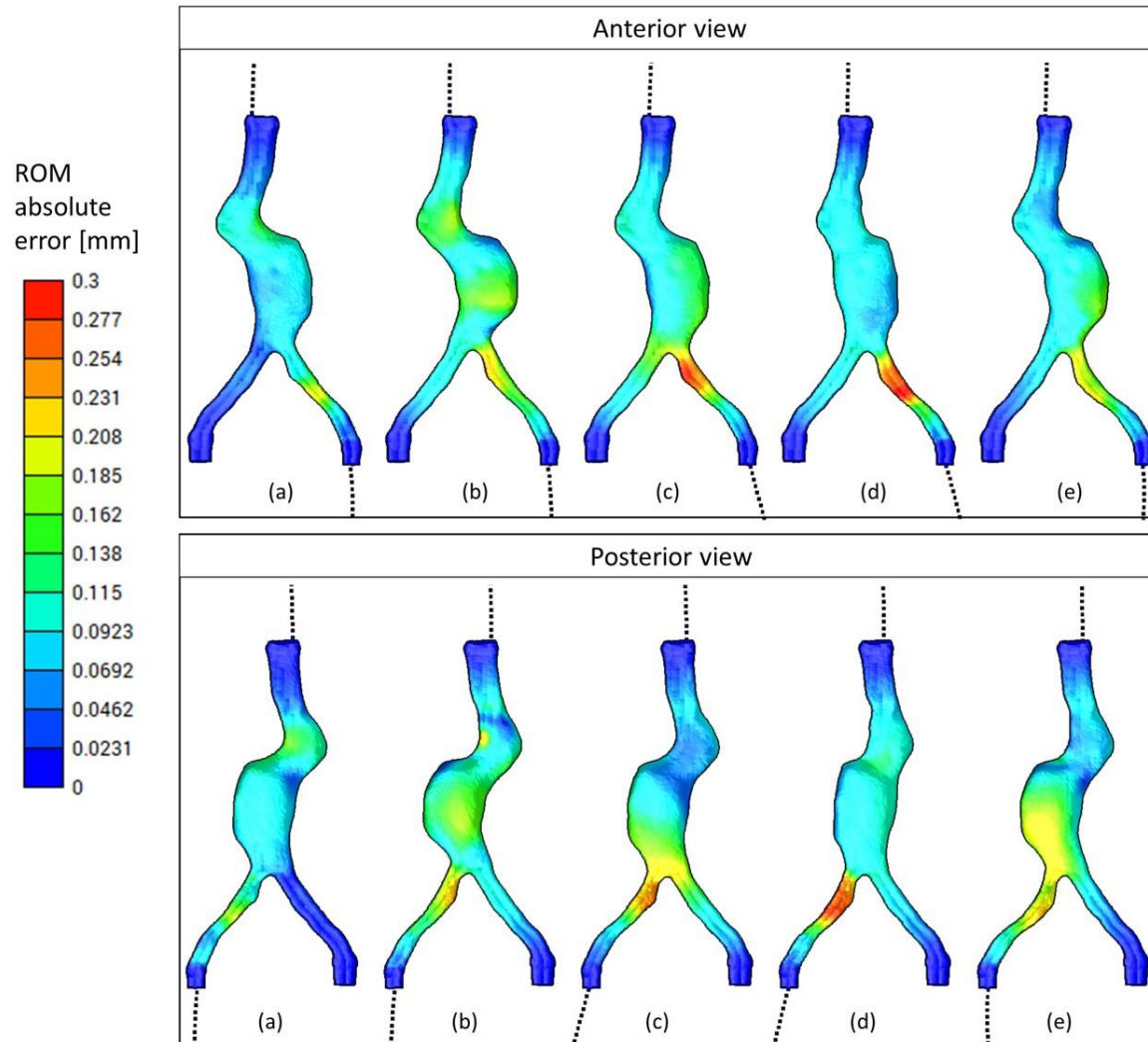




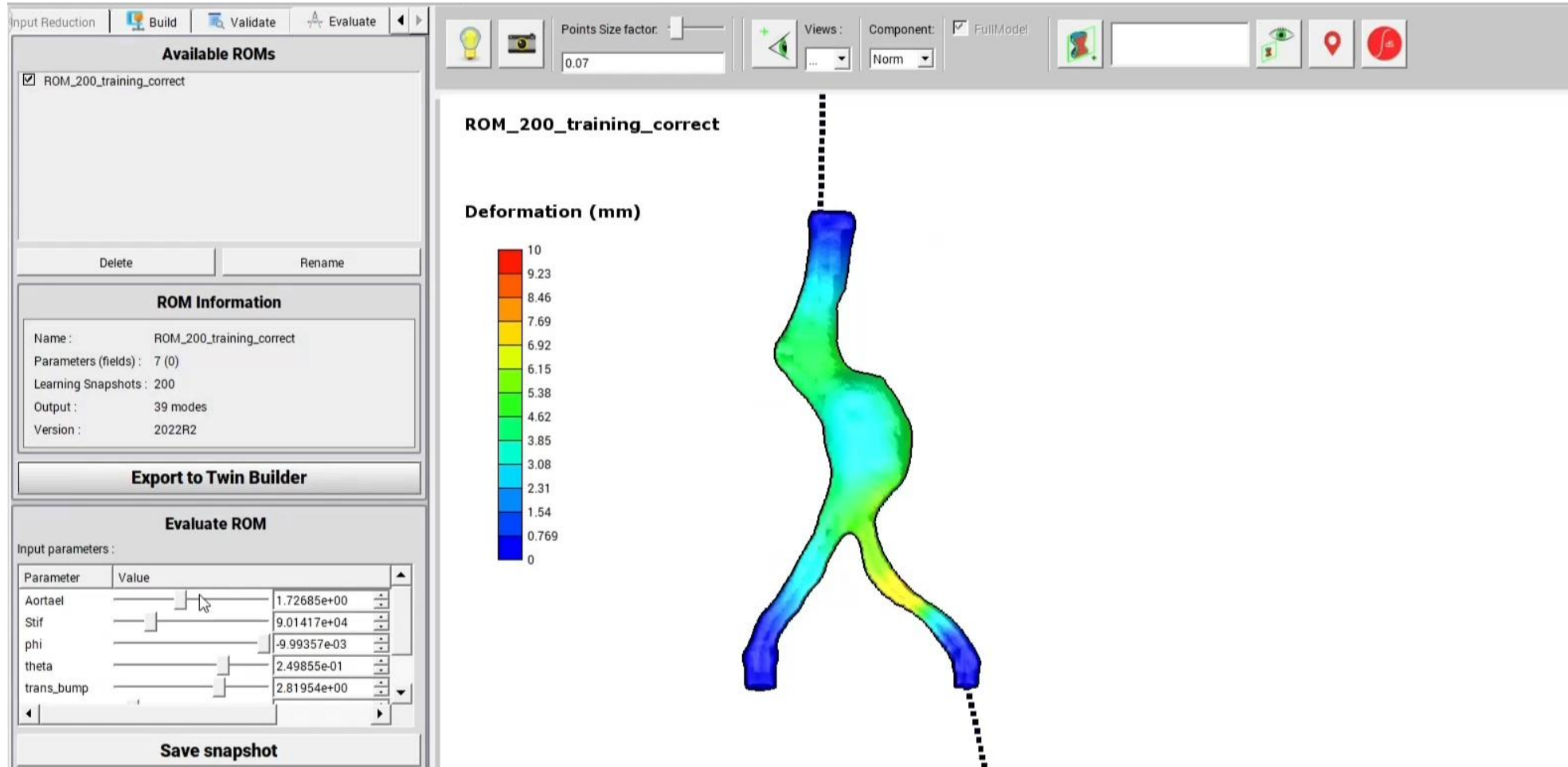


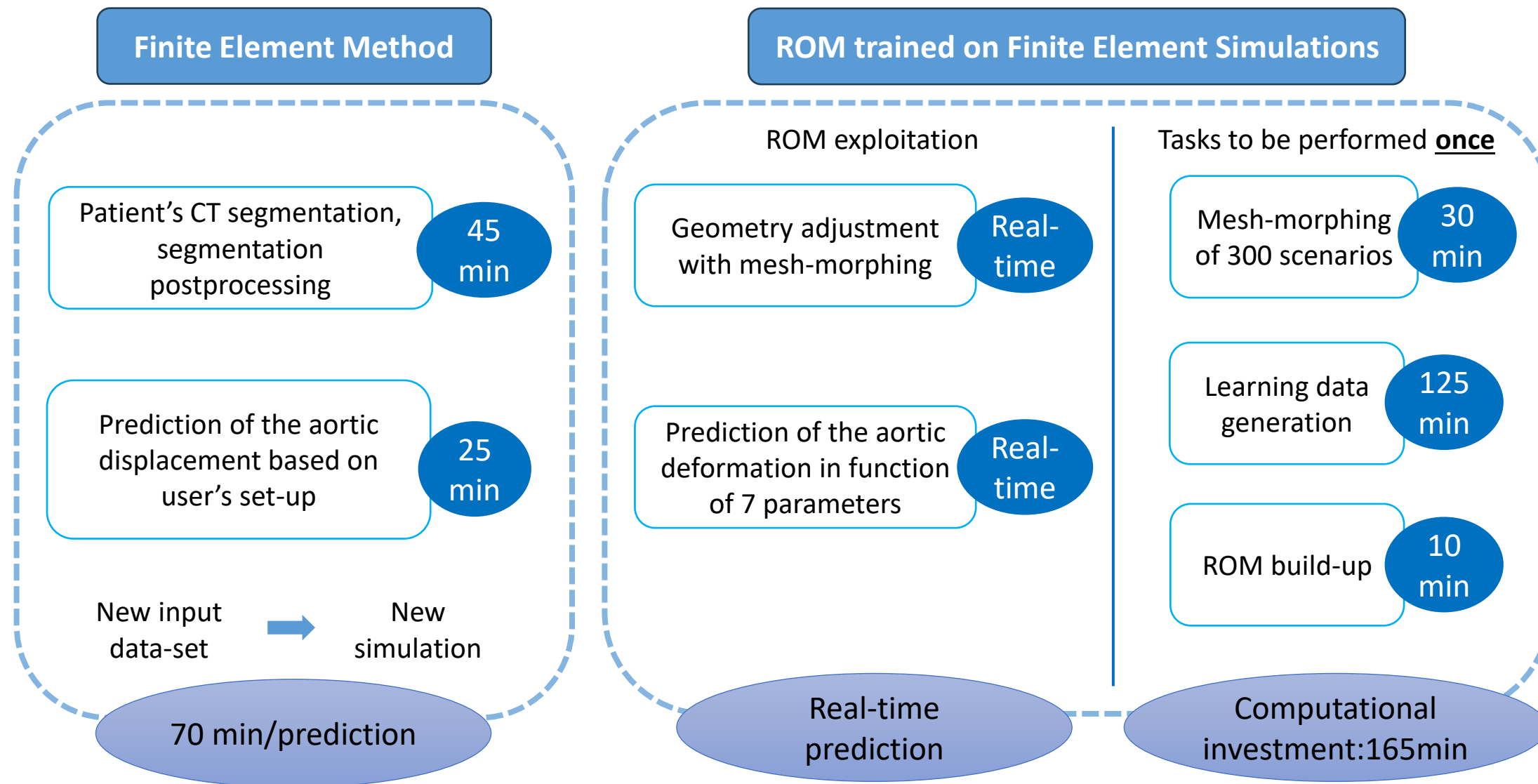
$$\text{ROM absolute error} = |\text{FE}_{\text{sol}} - \text{ROM}_{\text{pred}}|$$

$$e_{\text{ROM}}^{\text{rel}} = |\text{FE}_{\text{sol}} - \text{ROM}_{\text{pred}}| / |\text{ROM}_{\text{pred}}| * 100\%$$



The ROM is able to predict the guidewire-induced aortic displacement with sufficient accuracy





A comprehensive framework which fuses the **ROM approach** and the **RBF mesh morphing** for the **prediction of the guidewire-induced deformations** was presented

Research Highlights

- ✓ ROM build-up within **3 hours and 15 minutes** starting from CT images.
- ✓ Exploration of a wide spectrum of scenarios, varying seven **mechanical, morphological and clinical parameters**.
- ✓ Fast ROM execution compatible with **pre- and intra-operative** timeframe.

Limitations & Future Directions

- Inclusion of more **learning scenarios**
- Application of the workflow to more **challenging anatomies**
- Adoption of more **realistic boundary conditions** and **material model** for aortic tissue

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Thank you for your attention!



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(**rbf-morph**)™

