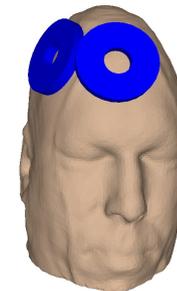
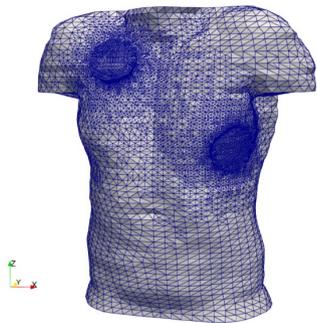
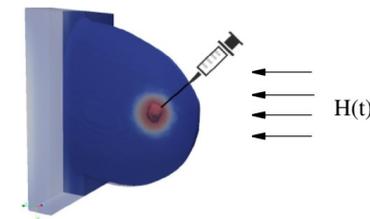
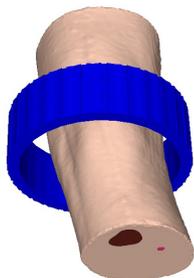


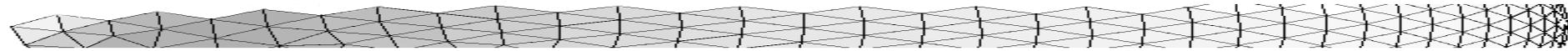
Wyzwania numerycznego modelowania problemów bioelektromagnetyzmu



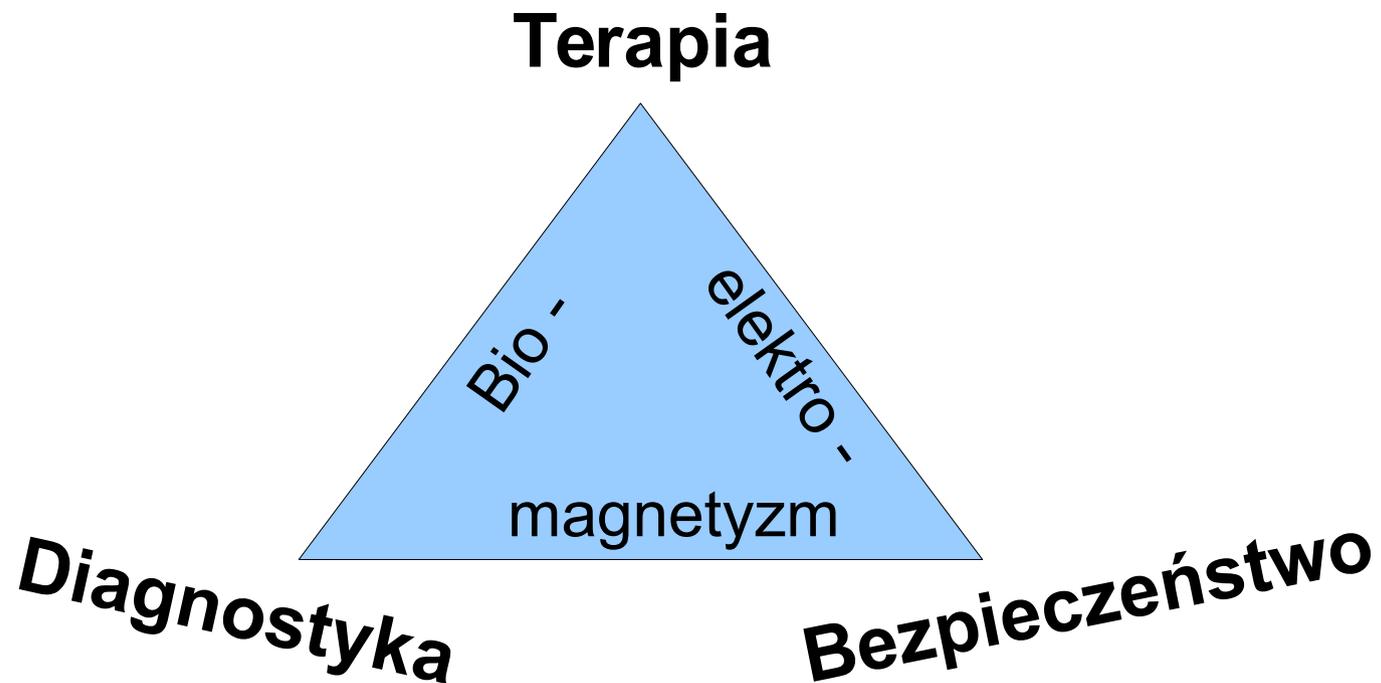
Bartosz Sawicki
Politechnika Warszawska
Wydział Elektryczny



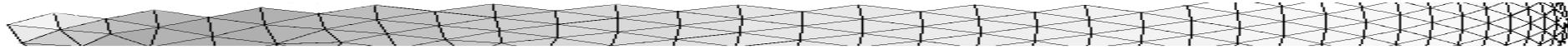
Bioelektromagnetyzm



Oddziaływanie pola elektrycznego i magnetycznego
na organizmy żywe



Bioelektromagnetyzm obliczeniowy

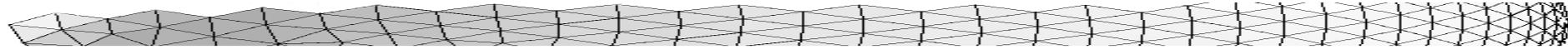


Wykorzystanie **metod komputerowych** do modelowania problemów bioelektromagnetyzmu.

Szeroko stosowane, ma wiele zalet:

- + Mniej problemów etycznych
- + Możliwość zajrzenia do wnętrza ciała
- + Niskie koszty
- + Szybkie eksperymenty

Plan seminarium



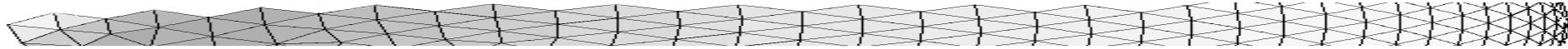
- Wyzwania – krok po kroku, na przykładach
 - Opis medyczny i fizyczny problemu
 - Opis matematyczny zjawiska
 - Model obiektu biologicznego
 - Rozwiązanie numeryczne
 - Analiza wyników
- Wyzwanie główne – wiarygodność wyników

Plan seminarium



- Wyzwania – krok po kroku, na przykładach
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TMS vs ECT



Transcranial Magnetic Stimulation (TMS) is a replacement for ElectroConvulsive Therapy (ECT)

Therapy for clinical depressions, migraine, epilepsy and others.

ECT is used since 1930, despite of strong side effects

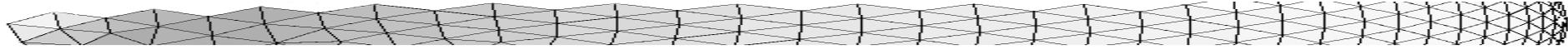


[MRDI webpage]

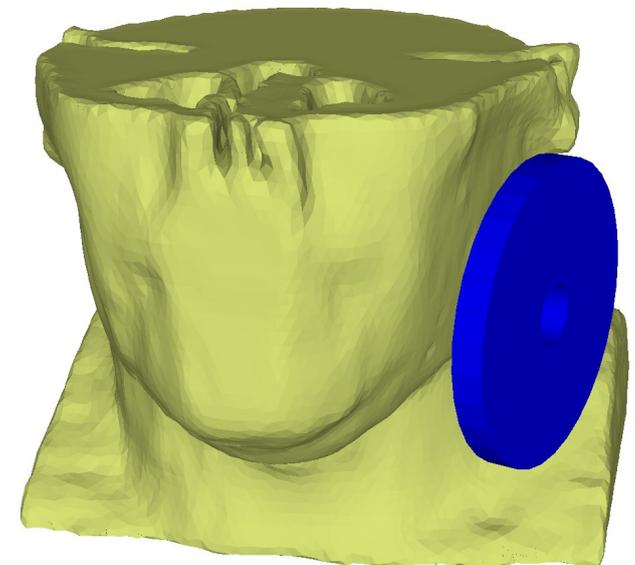
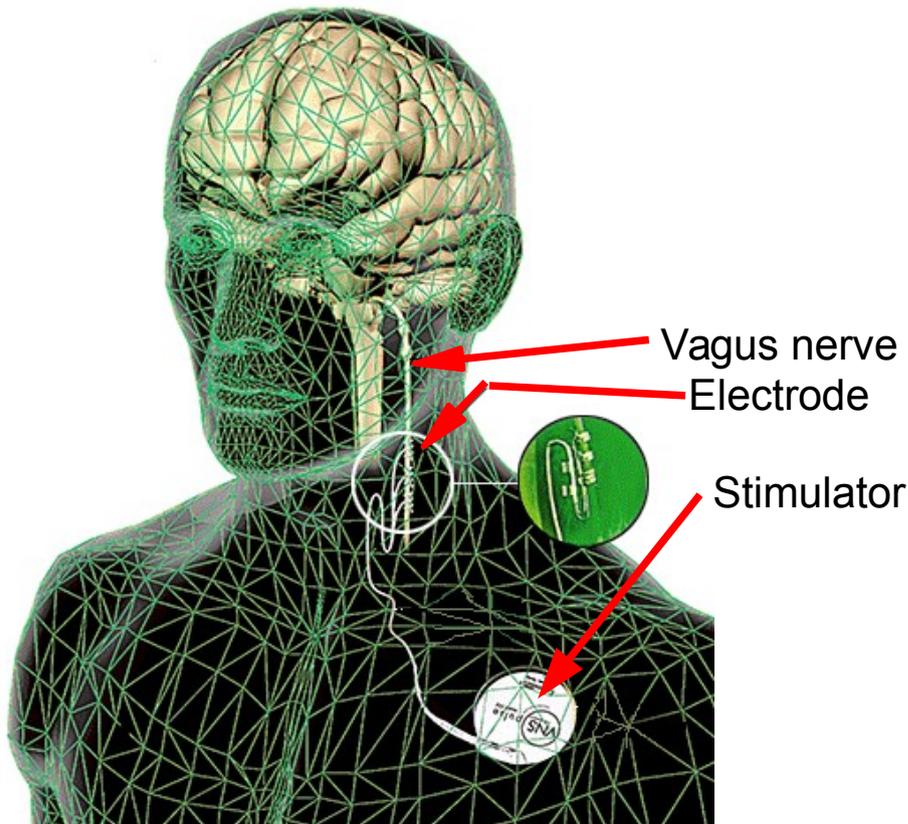


[Princeton University webpage]

Vagus Nerve Stimulation

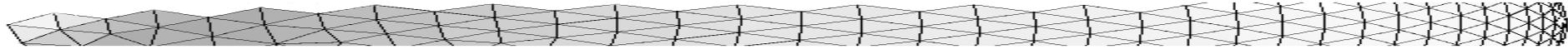


Vagus Nerve Stimulation is a therapy for: **epilepsy**, clinical depressions, heart diseases.

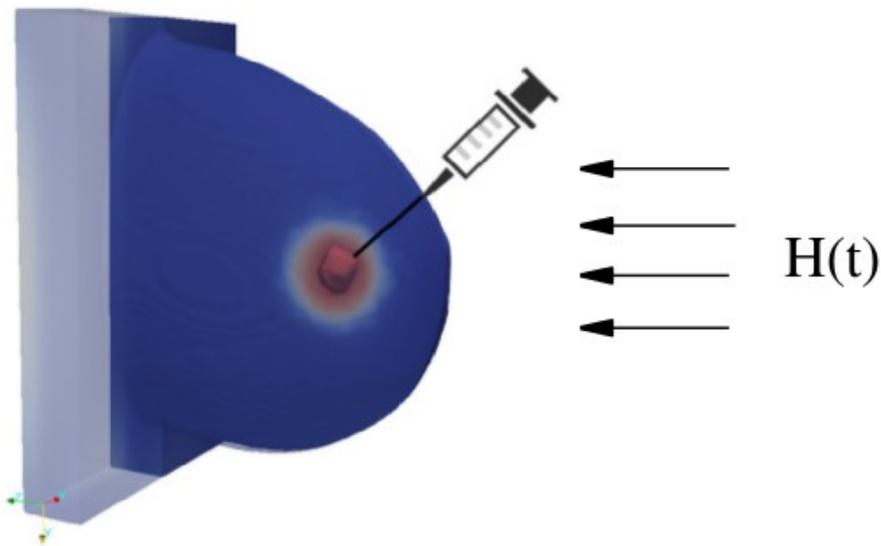


[conceptual device]

Magnetic Fluid Hyperthermia



Hyperthermia is treatment based on overheating ($T > 43\text{ C}$) malicious tissues, which lead to self-destruction (apoptosis).

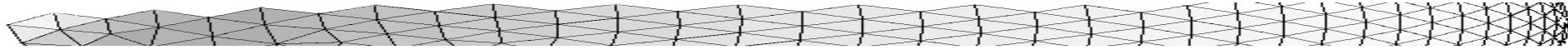


MFH procedure:

1. Magnetic fluid is injected into the tumor.
2. Body is exposed to the low frequency magnetic field.
3. Tumor is precisely overheated.

Based on superparamagnetic heat phenomenon.

Plan seminarium



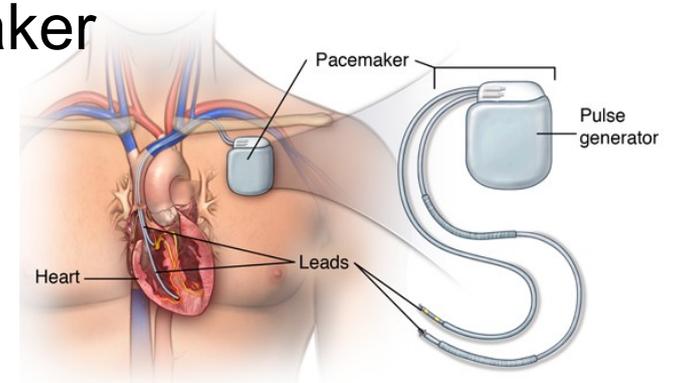
- Wyzwania – krok po kroku, na przykładach
 - Opis medyczny i fizyczny problemu
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 - Rozwiązanie numeryczne
 - Analiza wyników
- Wyzwanie główne – wiarygodność wyników

Electric stimulation



ECT

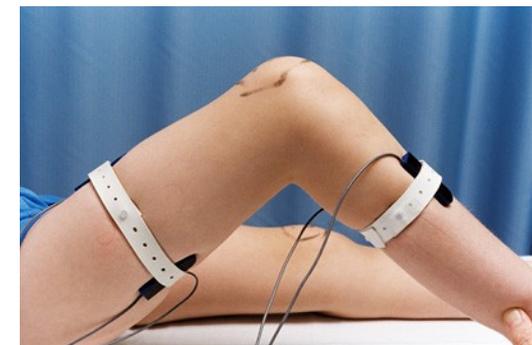
Pacemaker



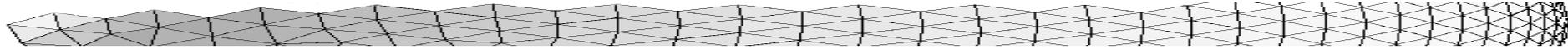
Defibrillation



Muscle stimulation



Electric stimulation



Low frequency (< 2kHz), direct current stimulation

Simple Laplace equation:

$$\nabla \cdot \underline{\sigma} \nabla \varphi = 0$$

Electric scalar potential

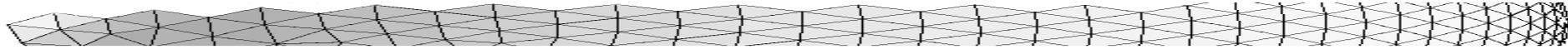
Anisotropic conductivity

$$\vec{J} = -\underline{\sigma} \nabla \varphi$$

Boundary condition:

Source electrode as a Dirichlet BC (fixed potential) is far from reality.

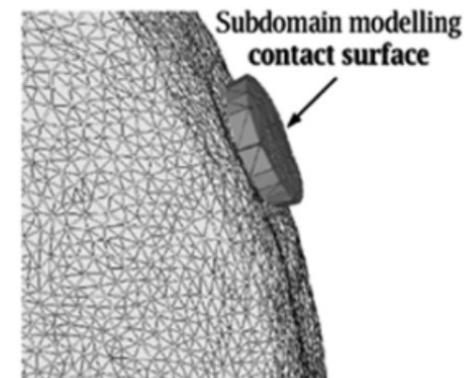
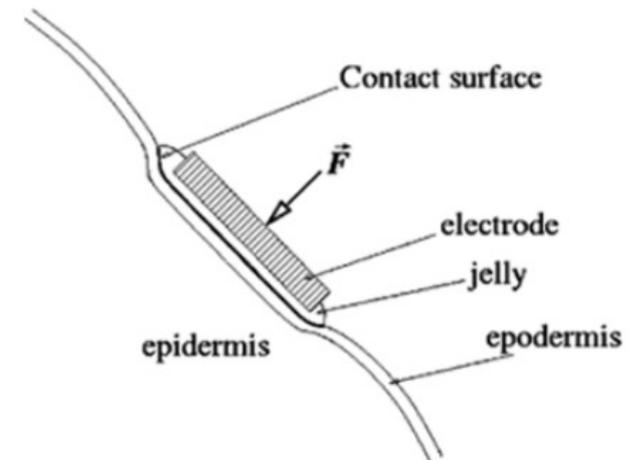
Electrode model



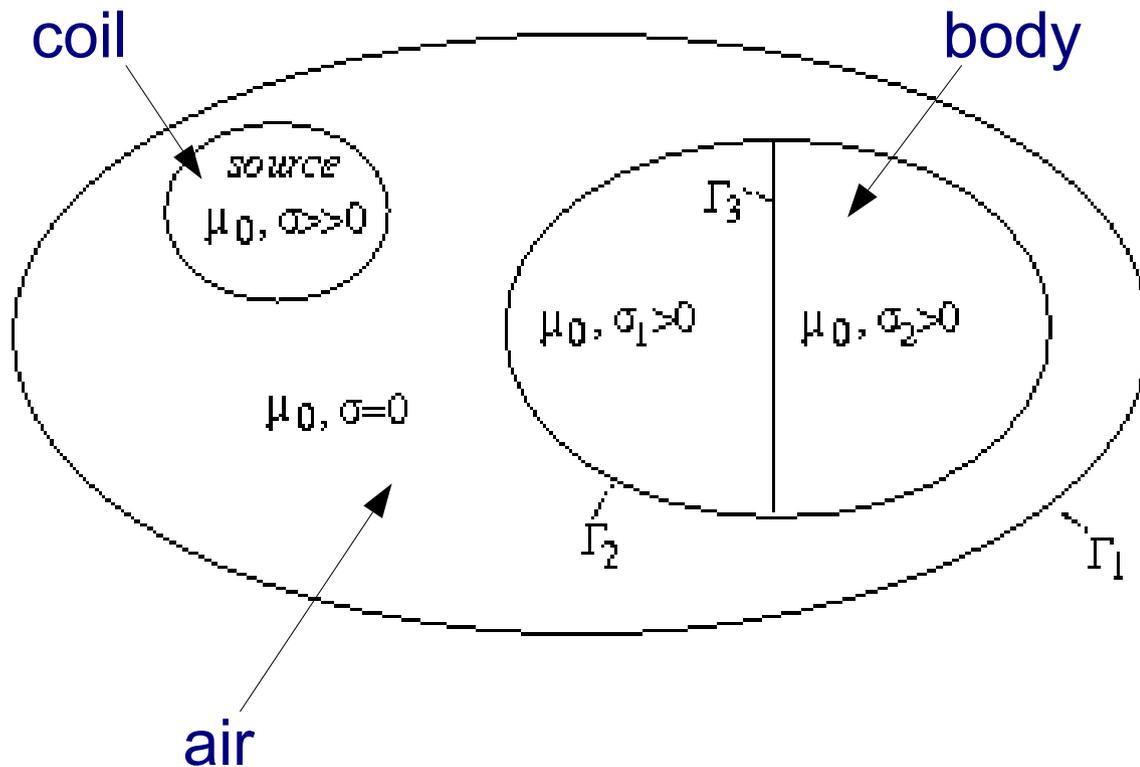
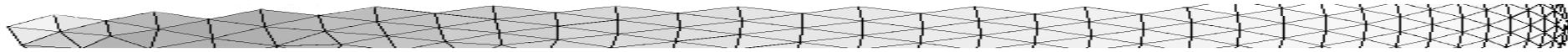
Complete electrode model:

All electrodes:
$$\phi + z_\ell \frac{\partial \phi}{\partial \mathbf{n}} = V_\ell$$

Active electrodes:
$$\int_{S_\ell} \sigma \frac{\partial \phi}{\partial \mathbf{n}} ds = I_\ell$$



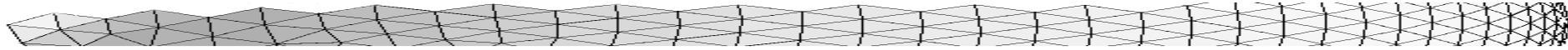
Magnetic stimulation



Assumptions:

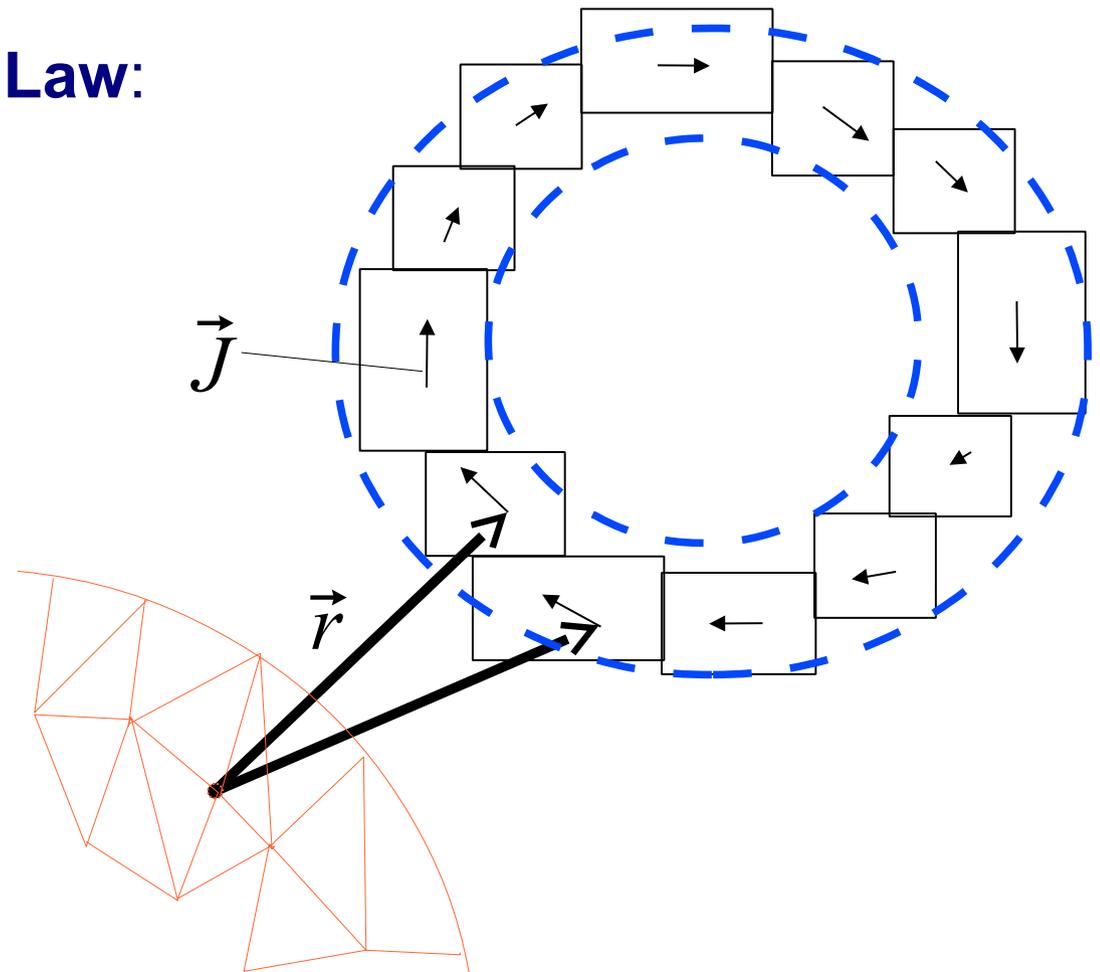
- source is separated from the body
- body is low conducting ($< 1 \text{ S/m}$)
- exciting field is ELF ($< 2\text{kHz}$)
- magnetic permittivity is constant

External magnetic field 1



Calculated using **Biot-Savarte Law**:

$$\vec{B} = \frac{\mu_0}{4\pi} \int \frac{\vec{J} \times \vec{r}}{r^3} dv$$



External magnetic field 2



Magnetic field produced by the coil is solved using vector Laplace operator for magnetic vector potential \mathbf{A} :

$$-\nabla^2 \mathbf{A} = \mu_0 \mathbf{J}_c$$

$$\mathbf{H} = \frac{1}{\mu_0} \nabla \times \mathbf{A}$$

where \mathbf{J}_c is exciting coil current density vector.

Eddy currents model



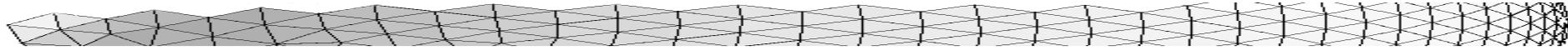
Eddy currents in low conducting media can be described by **Faraday's Induction Law**:

$$\nabla \times \vec{E} = -\frac{\partial \vec{B}}{\partial t}$$

We **introduce potentials** for simple BC and smooth solution:

	electric	magnetic
scalar potentials:	φ	Ω
vector potentials:	$\nabla \times \vec{T} = \vec{J}$	$\nabla \times \vec{A} = \vec{B}$

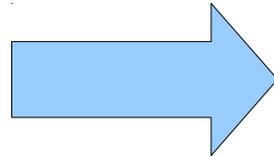
Electric scalar potential



Eddy currents described using **electric scalar potential**:

$$\nabla \times \vec{E} = -\frac{\partial \vec{B}}{\partial t}$$

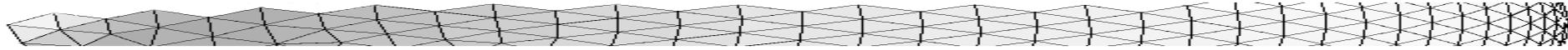
$$\nabla \times \vec{A} = \vec{B}$$



$$\vec{E} = -\nabla \varphi - \frac{\partial \vec{A}}{\partial t}$$

$$\nabla \times \nabla \varphi = 0$$

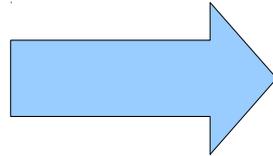
Electric scalar potential



$$\vec{E} = -\nabla \phi - \frac{\partial \vec{A}}{\partial t}$$

$$\vec{J} = \sigma \vec{E}$$

$$\nabla \cdot \vec{J} = 0$$



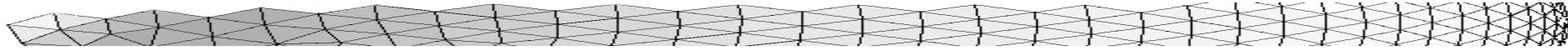
Main PDE:

$$\nabla \cdot \sigma \nabla \phi = -\nabla \cdot \sigma \frac{\partial \vec{A}}{\partial t}$$

Boundary conditions:

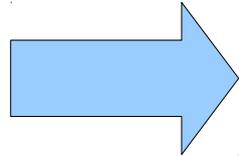
$$\frac{\partial \phi}{\partial n} = -\frac{\partial \vec{A}_n}{\partial t}$$

Electric vector potential



Eddy currents described using **electric vector potential**:

$$\begin{aligned}\nabla \times \vec{E} &= -\frac{\partial \vec{B}}{\partial t} \\ \vec{J} &= \nabla \times \vec{T} \\ \vec{J} &= \sigma \vec{E}\end{aligned}$$



Main PDE:

$$\nabla \times \frac{1}{\sigma} \nabla \times \vec{T} = -\frac{\partial \vec{B}}{\partial t}$$

$$\nabla \times \frac{1}{\sigma} \nabla \times \vec{T} - \nabla \left(\frac{1}{\sigma} \nabla \cdot \vec{T} \right) = -\frac{\partial \vec{B}}{\partial t}$$

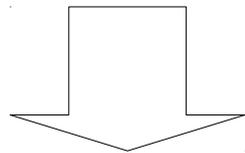
Coulomb gauge term
(for uniqueness and robustness)

Electric vector potential

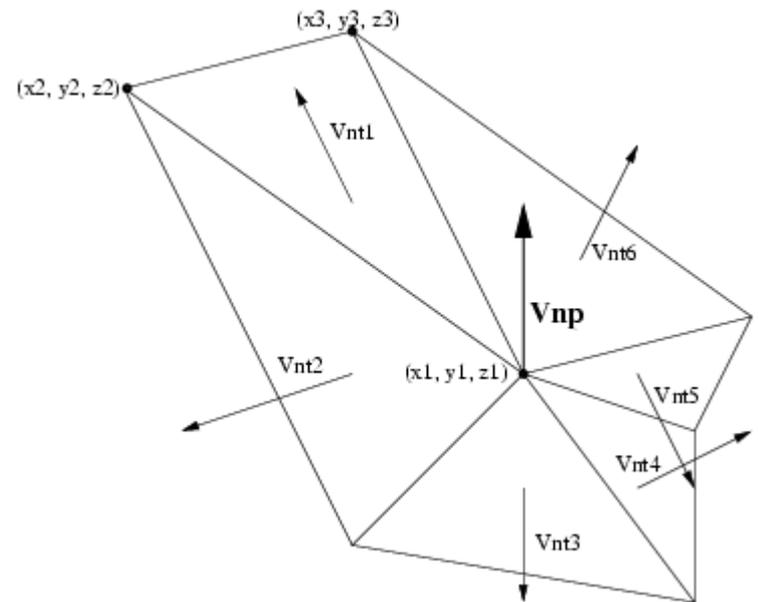


Boundary conditions:

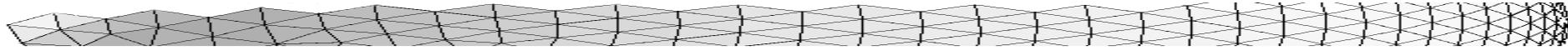
$$\vec{J} \cdot \vec{n} = 0 \quad \nabla \cdot \vec{T} = 0$$



$$T_t = T_w = 0, \quad \frac{\partial T_n}{\partial n} = 0$$



Scalar potential vs. vector potential



Scalar potential:

1 DOF per node

problems on material
boundary

Vector potential:

3 DOF per node

problems on material
boundary

ready for magnetic field
calculation:

$$\vec{H} = \vec{H}_s + \vec{T} - \nabla \Omega$$

The same eddy currents results.

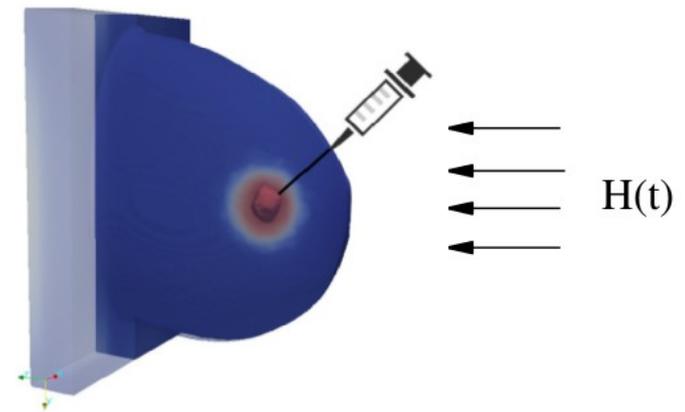
Magnetic Fluid Hyperthermia



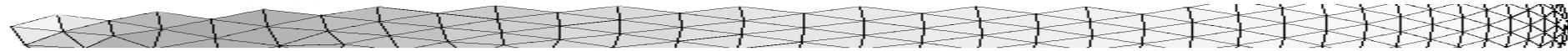
Superparamagnetic heat phenomenon

The superparamagnetic heat phenomenon is essential base of MFH. Power dissipation from magnetic nanoparticles could be expressed as:

$$Q = \pi\mu_0\chi_0\mathbf{H}^2f\frac{2\pi f\tau}{1 + (2\pi f\tau)^2}, \quad (1)$$



Magnetic Fluid Hyperthermia



Pennes equation

Heat transfer equation for human body (H. Pennes, 1948):

$$\rho c \frac{\partial T}{\partial t} = \nabla \cdot (k \nabla T) + \rho_b c_b \omega (T_b - T) + Q_{met} + Q_{ext} \quad (7)$$

Boundary condition

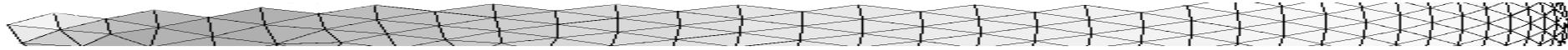
Skin heat exchange could be described by a convection and imposed in the form of Robin boundary condition:

$$\frac{\partial T}{\partial n} = h(T_{ext} - T), \quad (8)$$

where h is heat transfer coefficient and T_{ext} is external temperature.

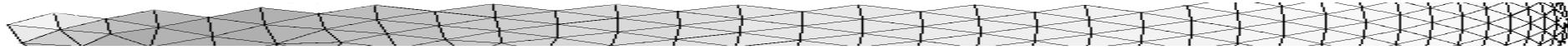
for skin, $h \approx 9.5 [W/m^2/K]$.

Wyzwania



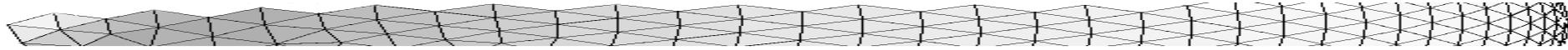
- Uwzględnienie istotnych zjawisk
 - Które są istotne, a które można pominąć?
- Wybór odpowiedniego, efektywnego opisu matematycznego
 - Dobry opis potrafi znacznie przyspieszyć i ułatwić modelowanie.

Plan seminarium

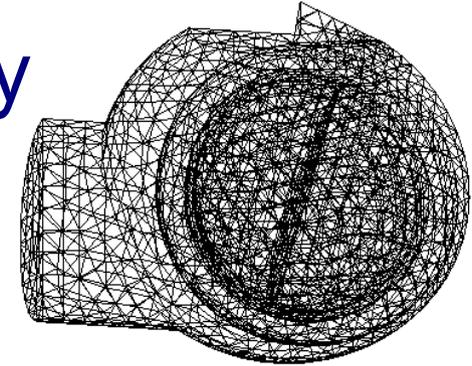


- Wyzwania – krok po kroku, na przykładach
 - Opis medyczny i fizyczny problemu
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 - Analiza wyników
- Wyzwanie – wiarygodność wyników

3D Models



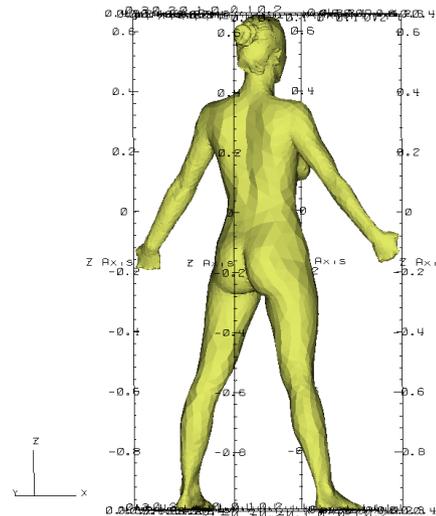
CSG – Constructive Solid Geometry



BR – Boundary Representations

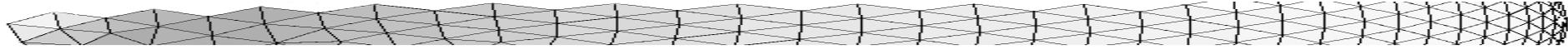
3D Scanners

3D Graphics Modelers



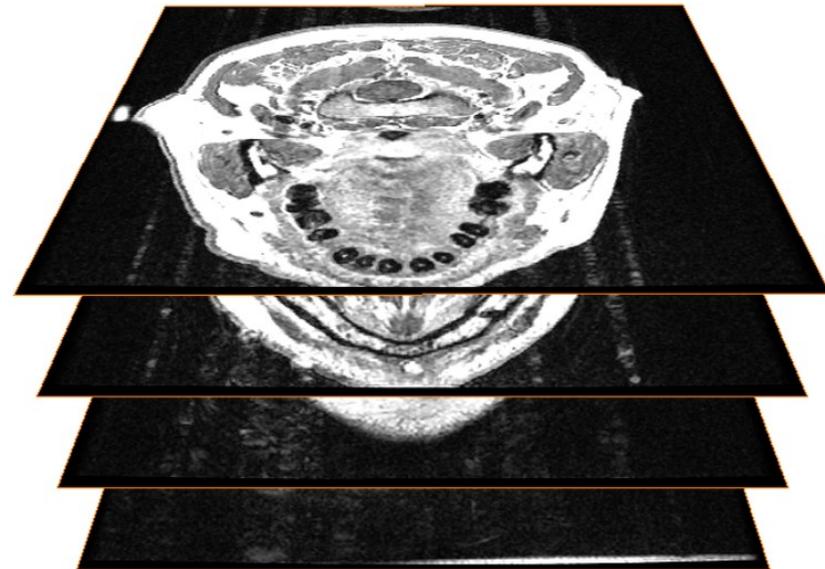
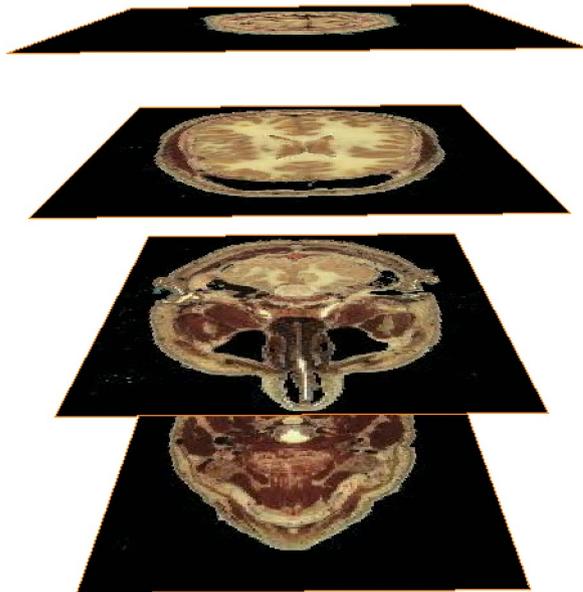
Volume models, voxels

3D Models

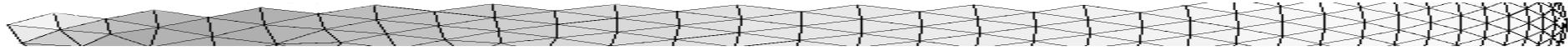


Data acquisition (slides sets):

MRI, CT, Anatomical

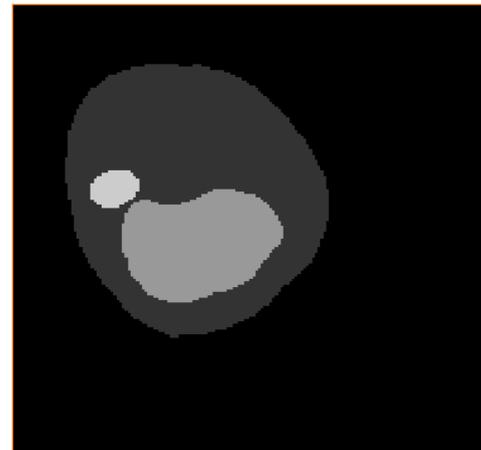
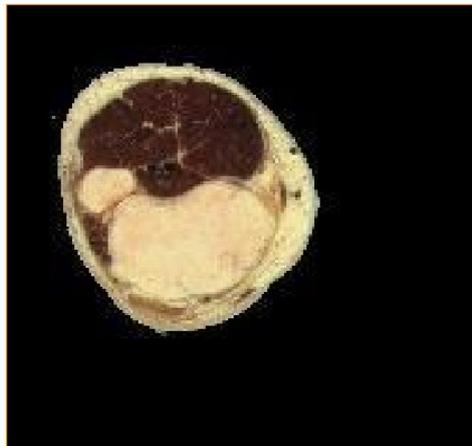


3D Models

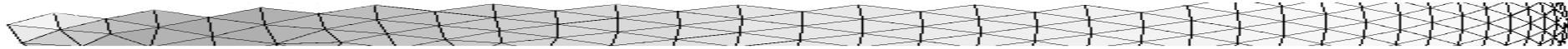


Segmentation:

- the aim is to mark subdomains with different tissues,
- lack of fully automated methods



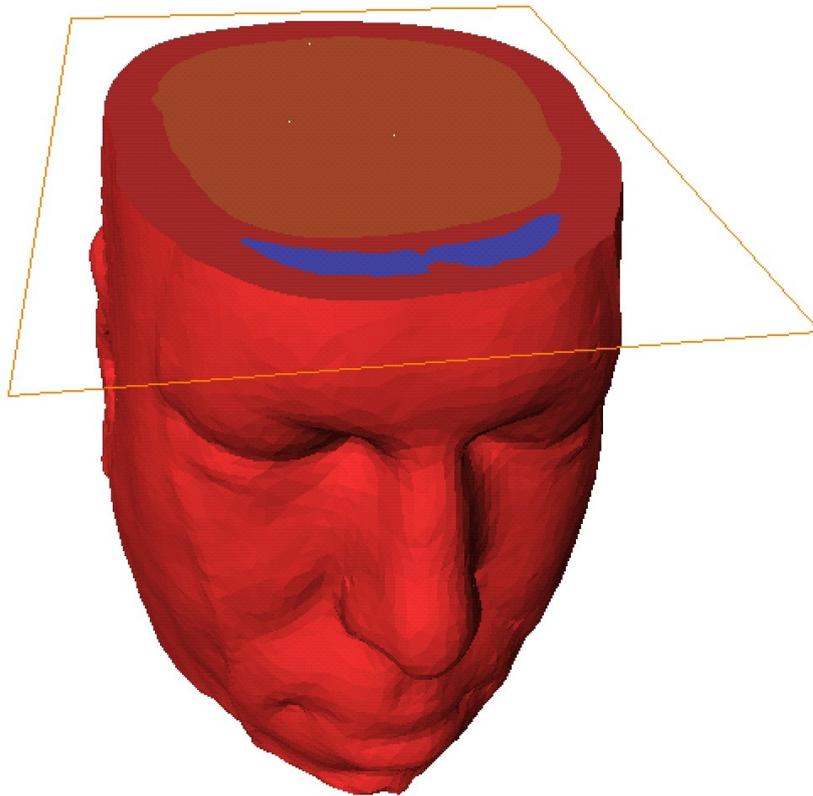
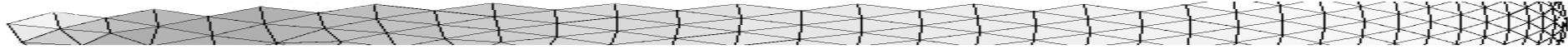
3D Models



3D volume mesh generation (for FEM):

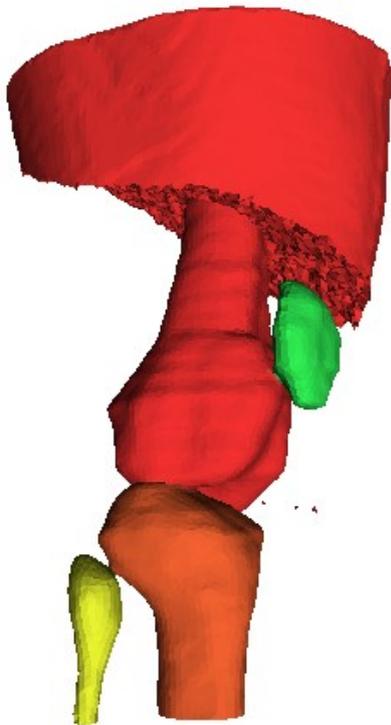
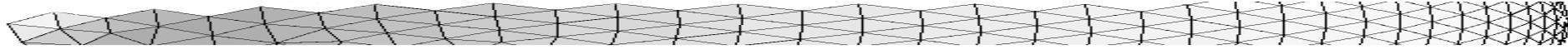
- Subdomain boundary detection
 - smooth and generate surface meshes (eg. using alg. MarchingCubes)
- Mesh generation in each subdomain
- Mesh quality improvement.

Realistic 3D meshes



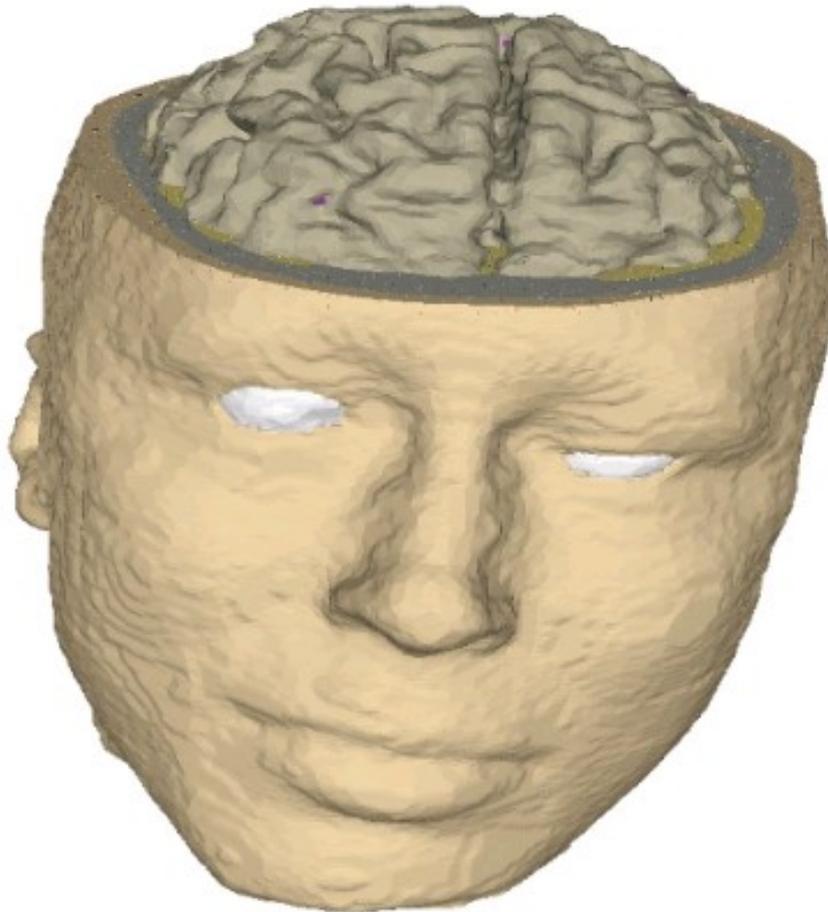
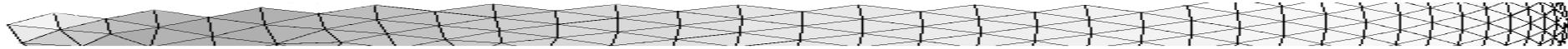
Head model:
120 000 nodes
670 000 tetrahedral
5 tissues

Realistic 3D meshes



Knee joint model:
160 000 nodes
930 000 tetrahedral
5 subdomains

Realistic 3D meshes



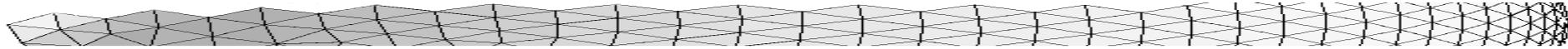
Brain model:

470 000 nodes

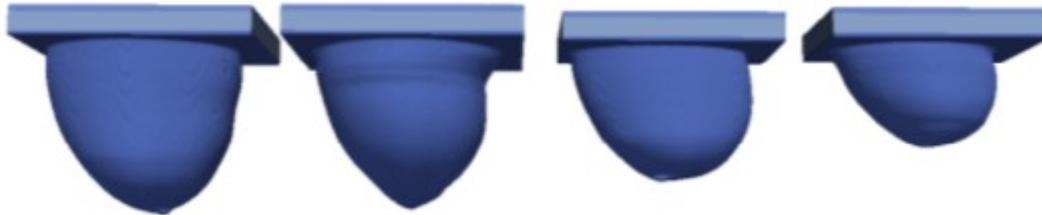
2 700 000 tetrahedral

7 tissues

Realistic breasts models



From UWCEM Numerical Breast Phantoms Repository



- class 1 - mostly fatty
- class 2 - scattered fibroglandular
- class 3 - heterogeneously dense
- class 4 - very dense

Anisotropic conductivity [S/m]



Isotropic material:

$$\underline{\sigma} = 0.4 \mathbf{I}_3 = \begin{bmatrix} 0.4 & 0 & 0 \\ 0 & 0.4 & 0 \\ 0 & 0 & 0.4 \end{bmatrix}$$

(brain)

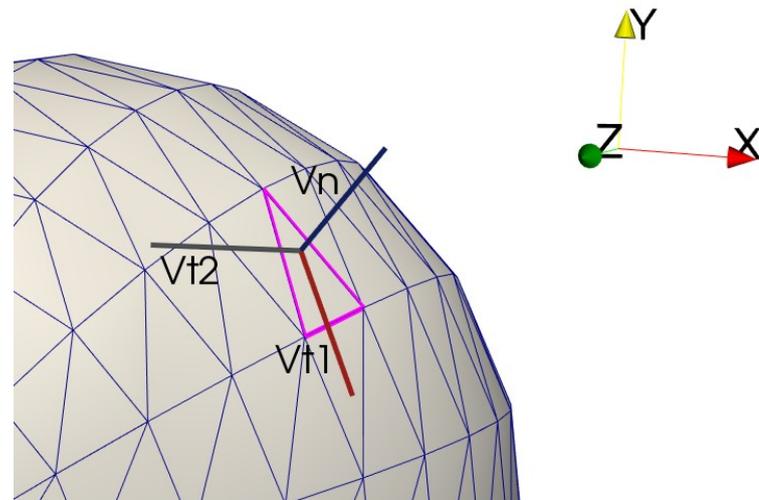
Anisotropic material:

$$\underline{\sigma} = \mathbf{V} \mathbf{S} \mathbf{V}^T$$

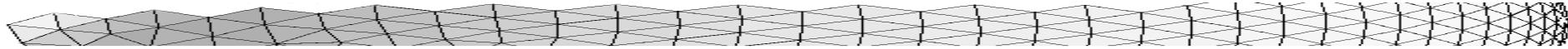
$$\mathbf{S} = \begin{bmatrix} 0.0057 & 0 & 0 \\ 0 & 0.057 & 0 \\ 0 & 0 & 0.057 \end{bmatrix}$$

(bones, skull)

$$\mathbf{V} = \begin{bmatrix} vn_x & vn_y & vn_z \\ vt1_x & vt1_y & vt1_z \\ vt2_x & vt2_y & vt2_z \end{bmatrix}$$



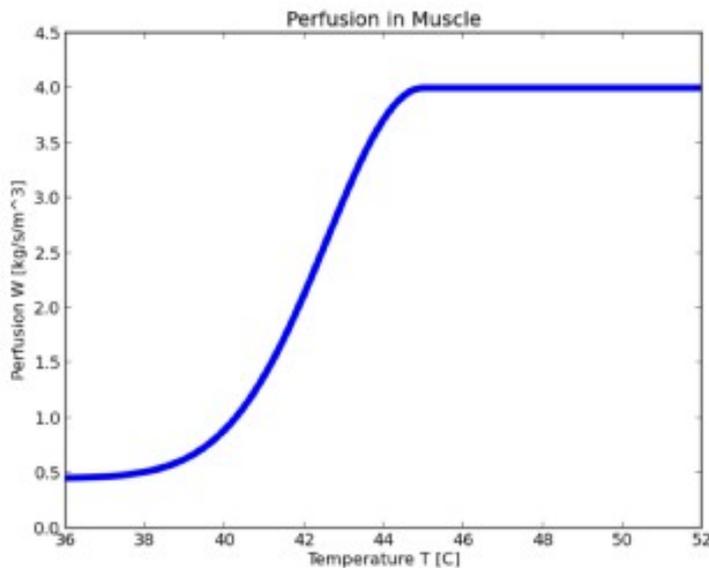
Nonlinear blood perfusion



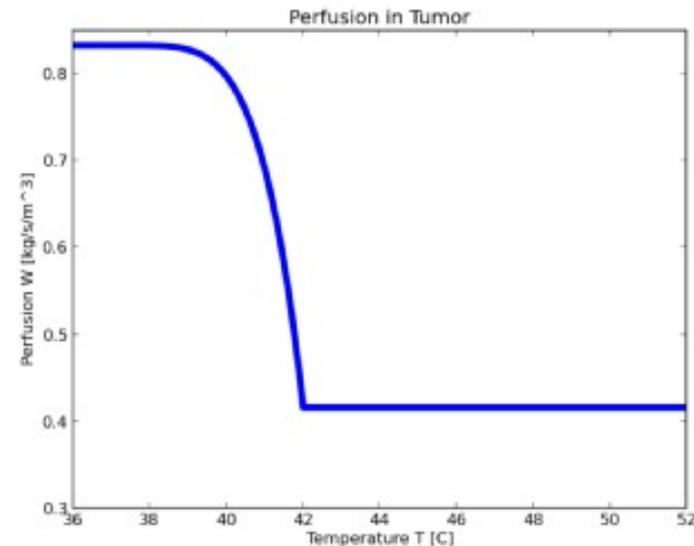
Blood perfusion (cooling factor) is nonlinear, tissue dependent.

$$W_{\text{muscle}} = \begin{cases} 0.45 + 3.55 \exp\left(-\frac{(T-45.0)^2}{12.0}\right), & T \leq 45.0 \\ 4.00, & T > 45.0. \end{cases}$$

$$W_{\text{tumor}} = \begin{cases} 0.833, & T < 37.0 \\ 0.833 - (T - 37.0)^{4.8} / 5.438E + 3, & 37.0 \leq T \leq 42.0 \\ 0.416, & T > 42.0. \end{cases}$$

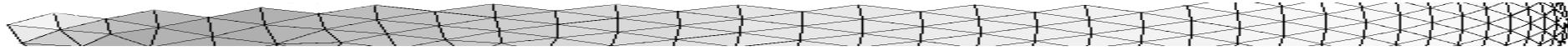


Healthy muscle tissue

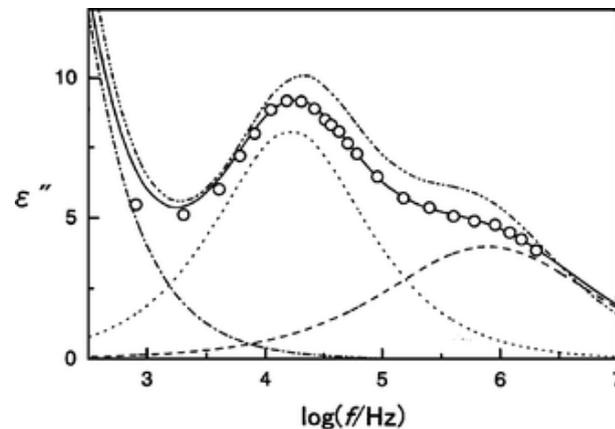
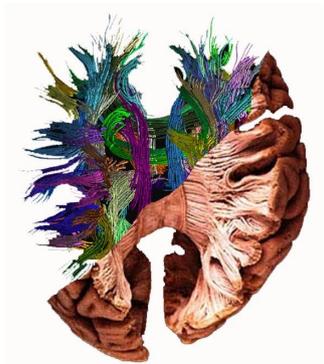


Tumorous tissue

Wyzwania



- Skomplikowane kształty i struktura ciała ludzkiego
- Parametry materiałowe tkanek żywych:
 - Anizotropowe, nieliniowe, zmienne w czasie, ...

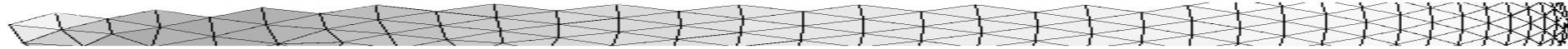


Plan seminarium



- Wyzwania – krok po kroku, na przykładach
 - Opis medyczny i fizyczny problemu
 - Opis matematyczny zjawiska
 - Model obiektu biologicznego
 - Rozwiązanie numeryczne
 - Analiza wyników
- Wyzwanie główne – wiarygodność wyników

Finite Element Method



Finite Element (FEM) was chosen:

very flexible mesh geometry and element size,
low frequency field, quasi-static problem,

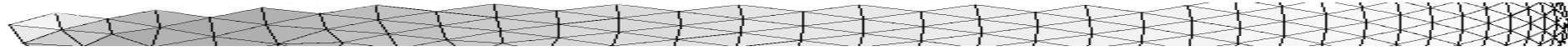
Other popular is Finite Difference (FDM, FDTD, SPFD)

natural for voxel/cubic mesh,
time-domain calculations, high frequency.

Main difference:

FEM is an approximation to the solution,
FDM is an approximation to the differential equation.

FEM: Poisson's equation



$$\nabla^2 u = f$$

Weighted residual

$$\hat{u} = \sum_{j=1}^M u_j N_j(x)$$

$$\int_{\Omega} N_i (\nabla^2 u - f) dx = 0$$

Variational spaces

$$\int_{\Omega} \nabla v \cdot \nabla u dx = \int_{\Omega} v f dx$$

$$\hat{u} = \sum_{j=1}^M u_j N_j(x), \quad \hat{v} = \sum_{i=1}^M v_i N_i(x)$$

Linear eqn. system

$$A u = b$$

$$A_{ij} = \int_{\Omega} \nabla N_i \cdot \nabla N_j dx$$

$$b_i = \int_{\Omega} N_i f dx$$

Linear solvers



$$A u = b$$

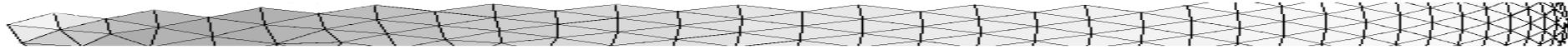
Preconditioners:

Jacobi, ILU, SSOR, AMG

Solvers:

Iterative (Krylov): BiConjugate Gradients, GMRES

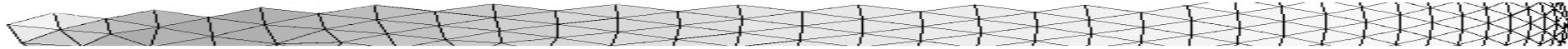
Adaptive Mesh Refinement



- Solve problem with initial mesh
- Estimate error
- Until (satisfied or limited):
 - Mark cells for refinement
 - Refine mesh
 - Solve problem for refined mesh
 - Estimate error

$$e_i = \sum_{j=0}^3 s_j (\mathbf{J}_i \cdot \mathbf{n}_j)$$

Mesh refinement



Three ways to improve the mesh:

h-refinement -- split elements

Computational geometry problem

p-refinement -- higher order elements

Difficulties with local refinement

r-refinement -- move vertices, smooth mesh

Problem with material boundaries

Mesh quality



Thin elements lead to errors in solution:

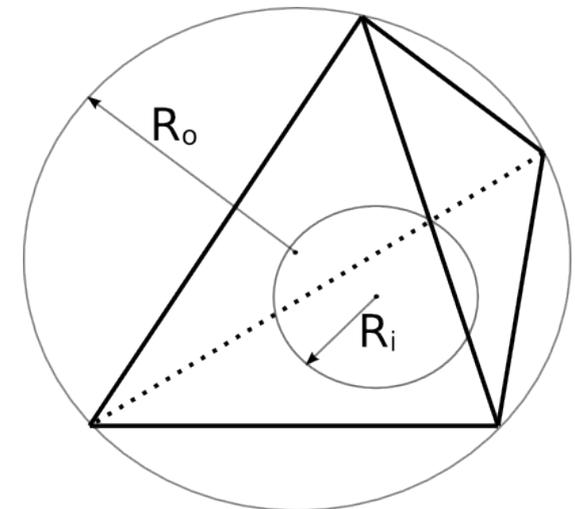


Element quality measured by:

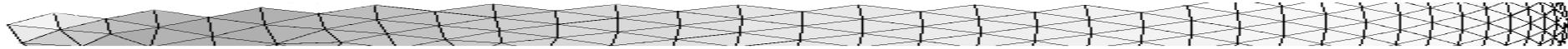
Inscribed to circumscribed sphere
radii ratio

Maximum/minimum angle, ...

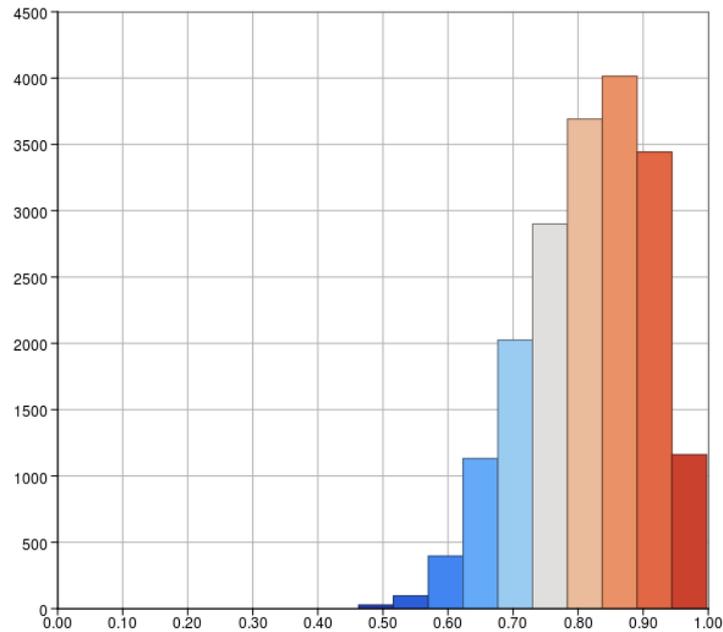
$$q = \frac{R_i}{R_o}$$



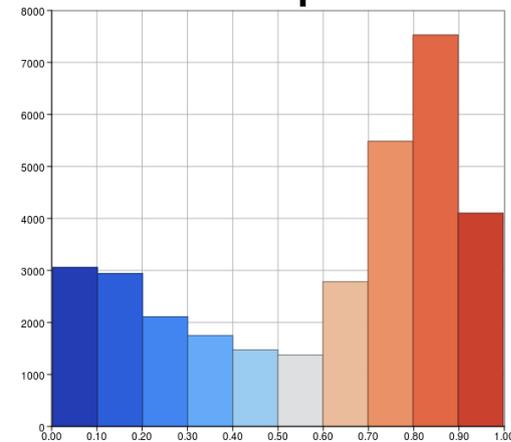
Mesh quality



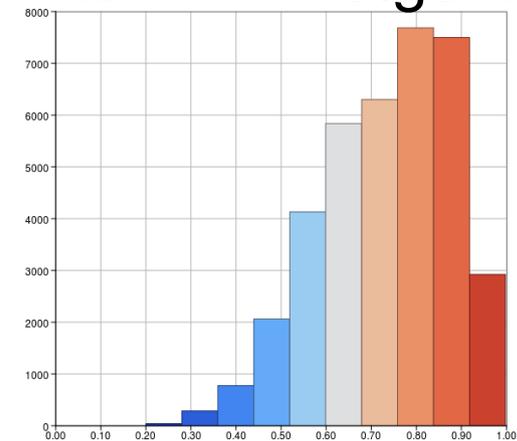
Original mesh histogram



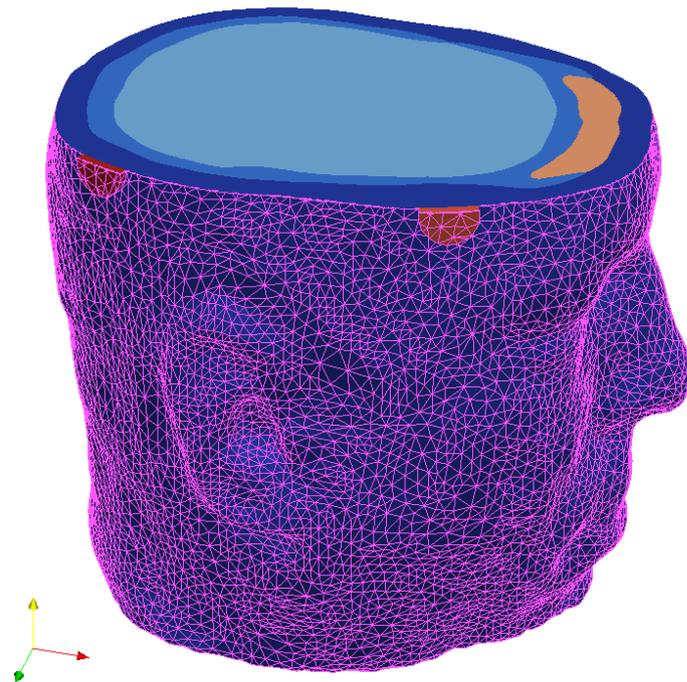
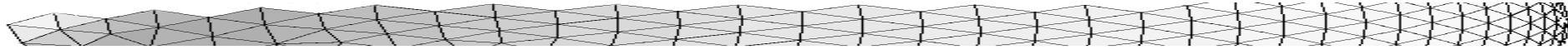
After simple bisection



After LEPP algorithm



Head electrodes



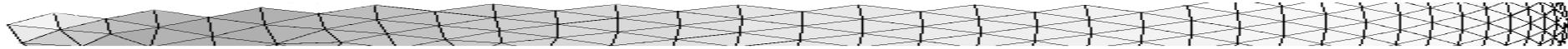
Head model:

- from VisibleHuman dataset,
- 600k elements,
- 5 tissues

Electrodes:

1. active current electrode
(5 mA, 30 [A/m²])
2. grounding electrode
(zero Dirichlet BC)

Solvers



Solver comparison:

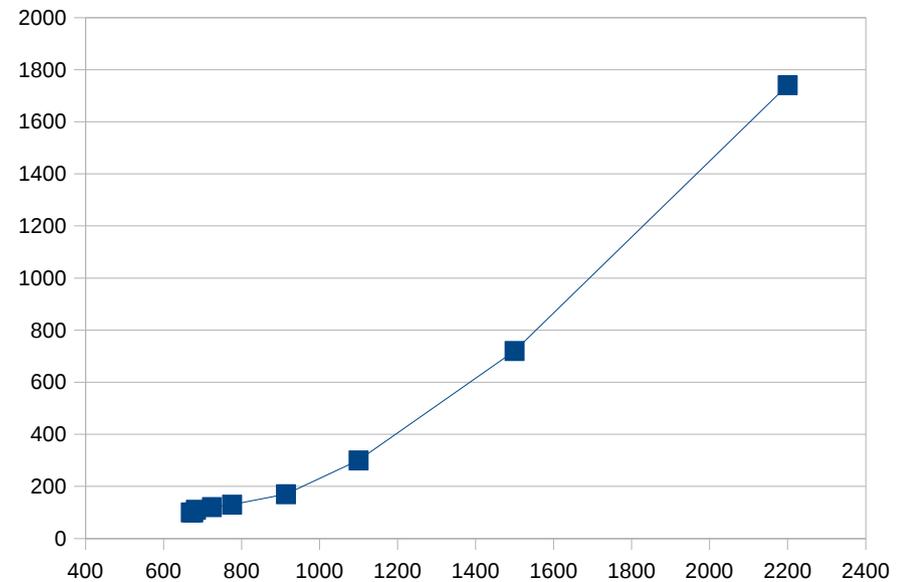
- Laplace equation, 300k unknowns

Summary of timings	Average time	Iterations
Petsc: gmres, ilu	42.46	1534
Petsc: bicgtab, ilu	11.40	255
Petsc: bicgtab, icc	10.03	268
Petsc: bicgtab, sor	8.19	195
Petsc: cg, ilu	7.29	323
Petsc: cg, sor	5.86	276
Petsc: cg, AMG	14.96	11

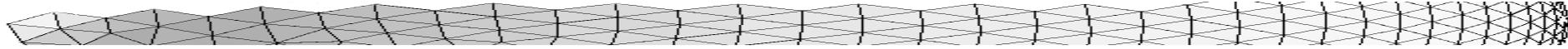
Solver timings



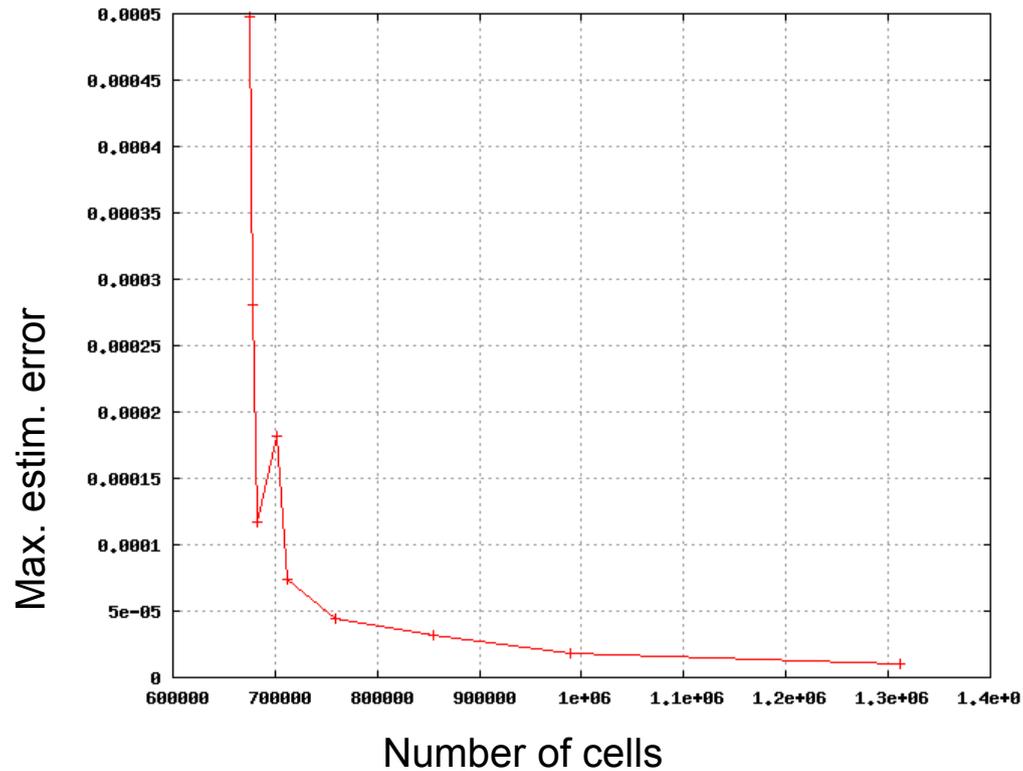
	No. cells	Total iter.-time
Iteration 0	670k	100s
Iteration 1	676k	100s
Iteration 2	683k	110s
Iteration 3	724k	120s
Iteration 4	776k	130s
Iteration 5	914k	170s
Iteration 6	1100k	300s
Iteration 7	1500k	720s
Iteration 8	2200k	1740s
		3490s



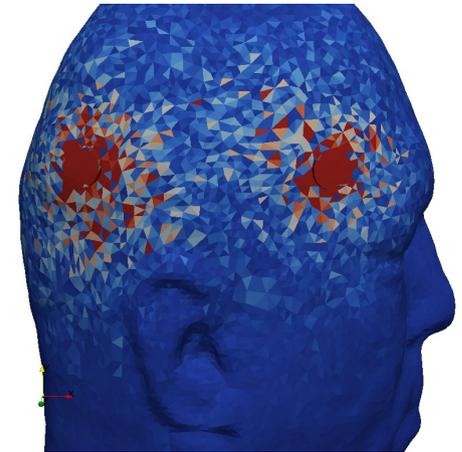
AMR convergence



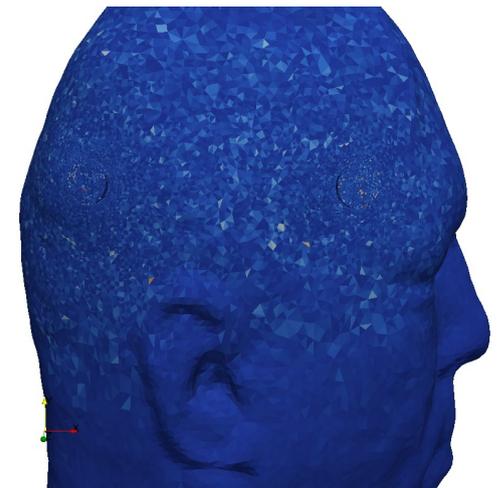
Estimated error convergence:



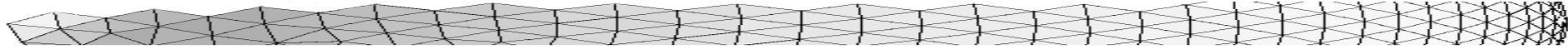
Before:



After:

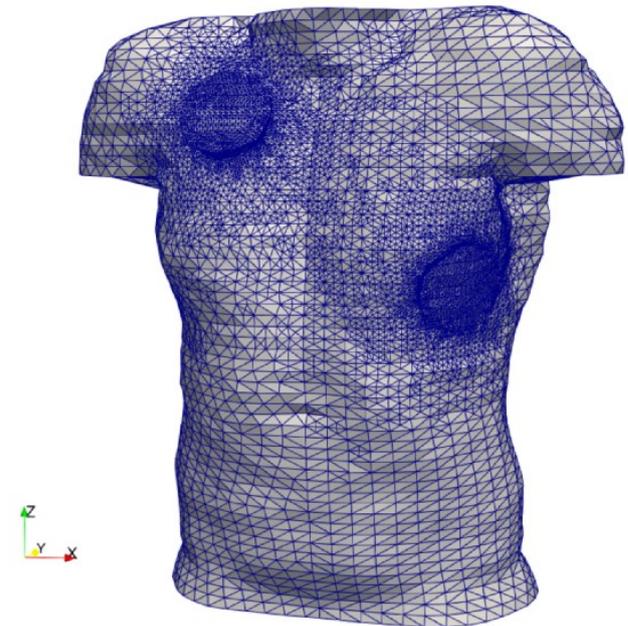
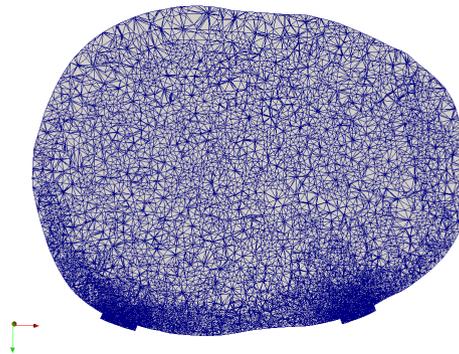
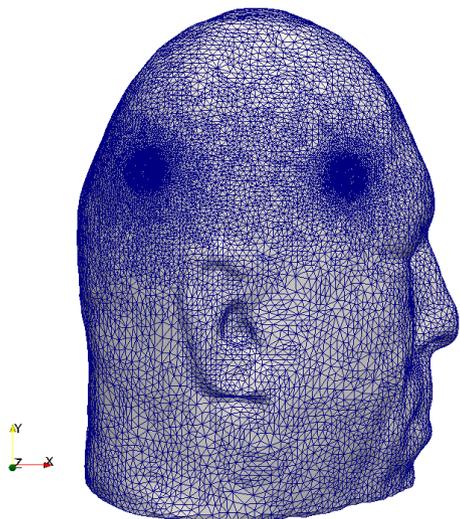


Refined mesh

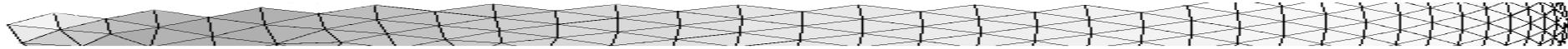


Refined mesh

400k vertices, 2 mln cells



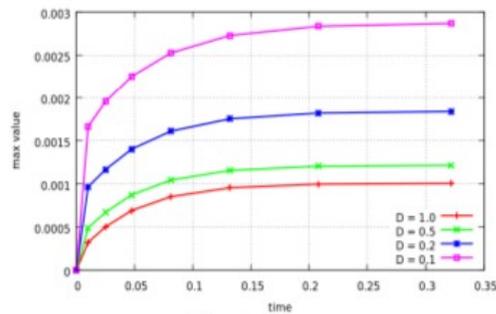
Transient solutions



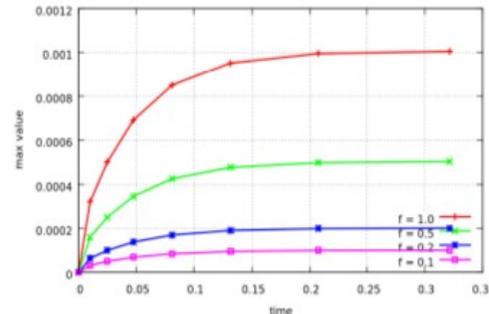
Stiff problem

$$\frac{\partial u}{\partial t} = \nabla \cdot (D \nabla u) - E(u)u + f, \quad -\frac{\partial u}{\partial n} = -Hu$$

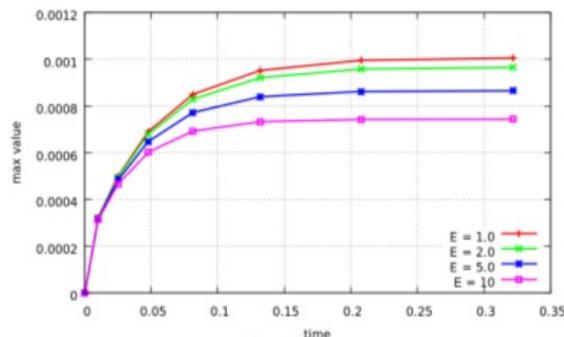
Trial solutions for unified coefficients:



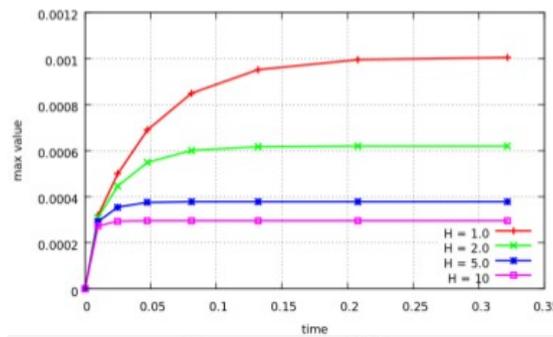
Diffusivity (D)



Source (f)

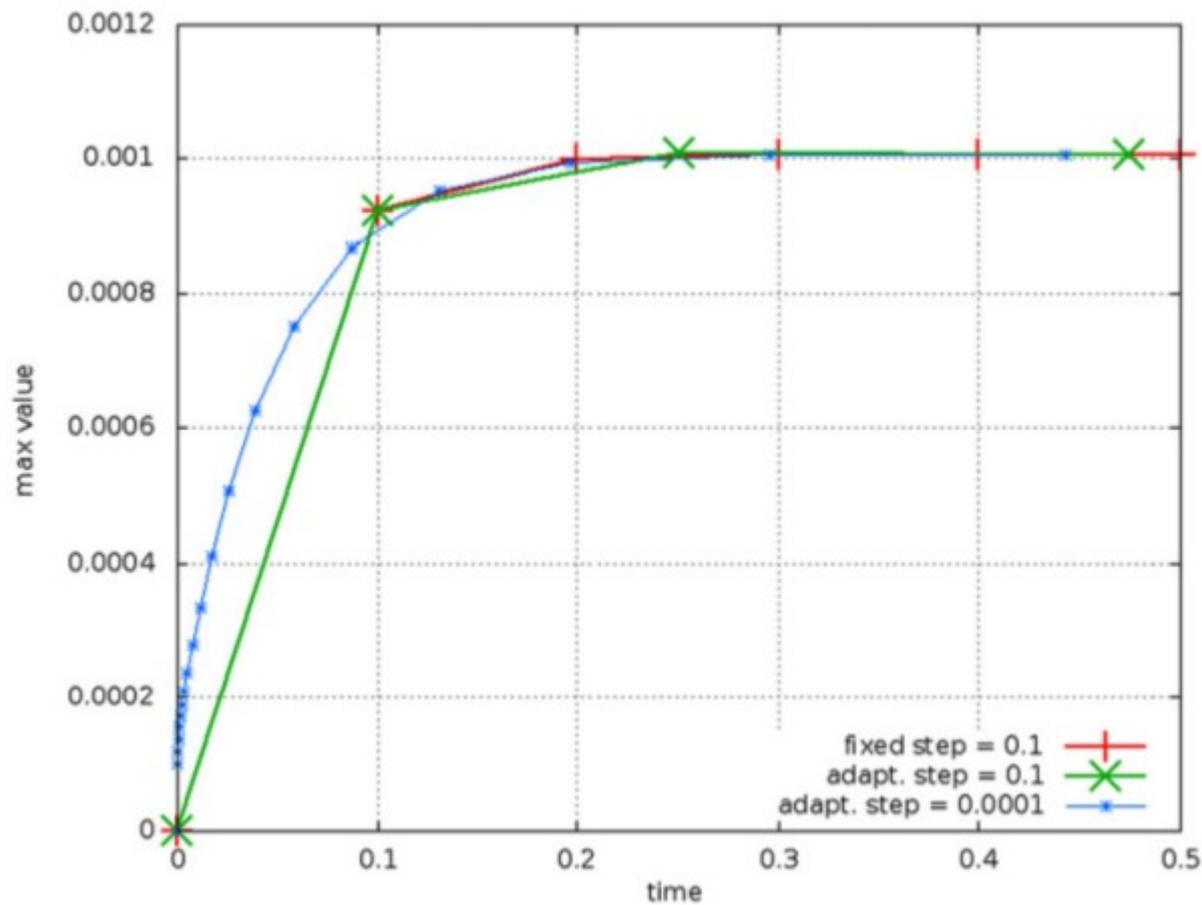
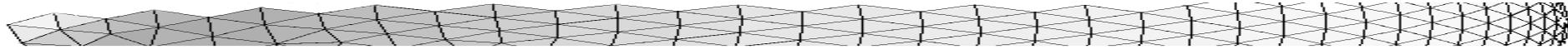


Perfusion (E)



Convection (H)

Time adaptivity

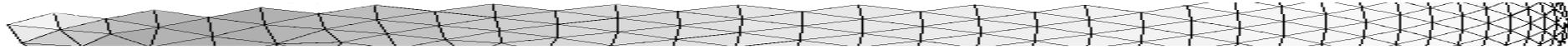


Wyzwania



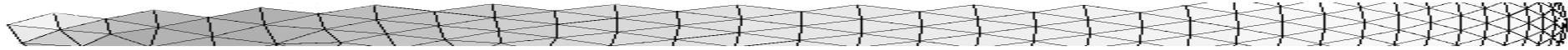
- Wydajne metody do układów równań liniowych
- Zmniejszanie błędu rozwiązania poprzez metody adaptacyjne
- Iteracyjne algorytmy dla problemów nieliniowych
- Rozwiązanie po czasie
 - metody wielokrokowe, zmienny krok

Plan seminarium

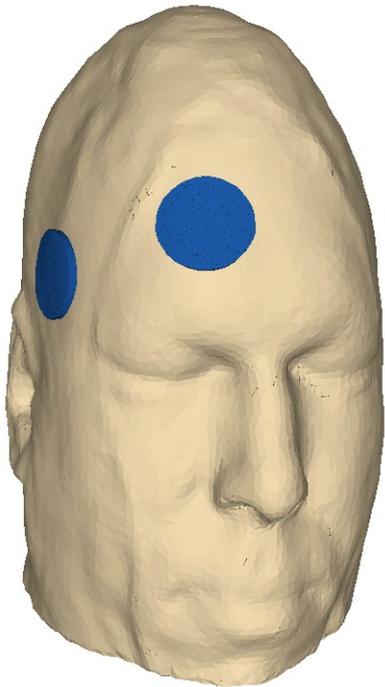


- Wyzwania – krok po kroku, na przykładach
 - Opis medyczny i fizyczny problemu
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- Wyzwanie główne – wiarygodność wyników

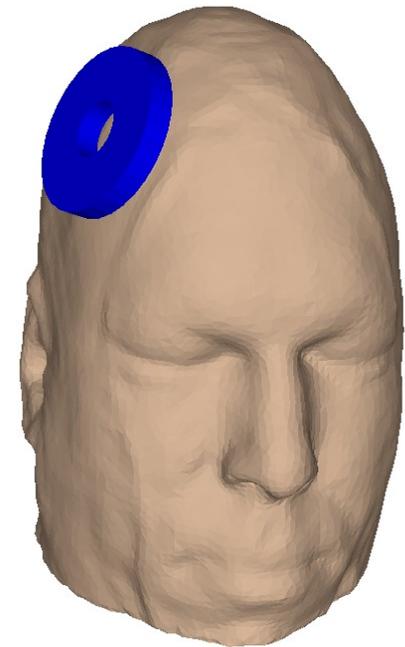
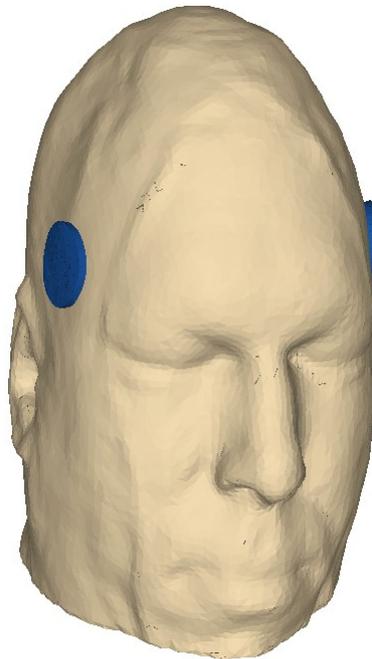
Transcranial Magnetic Stimulation



Can TMS replace controversial ETC?

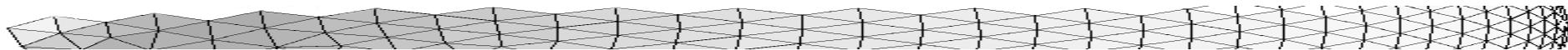


ECT



TMS

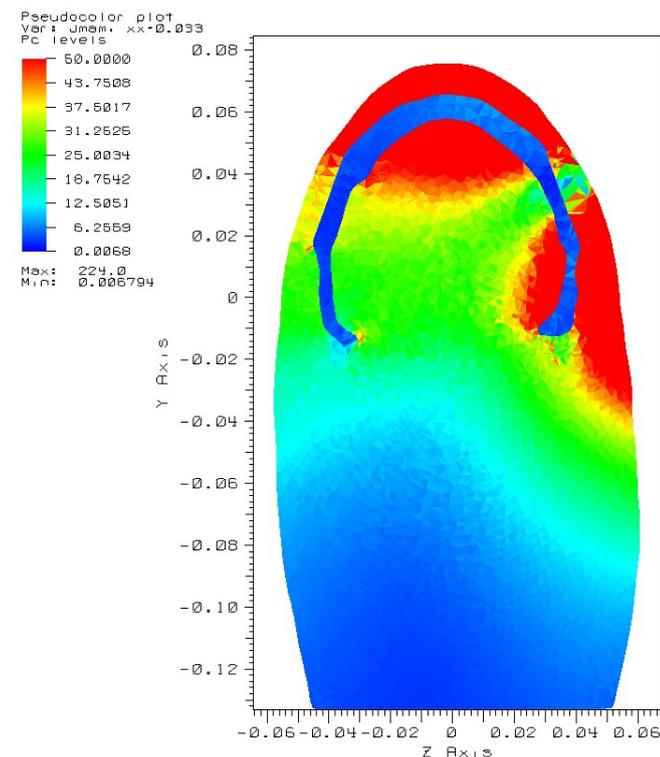
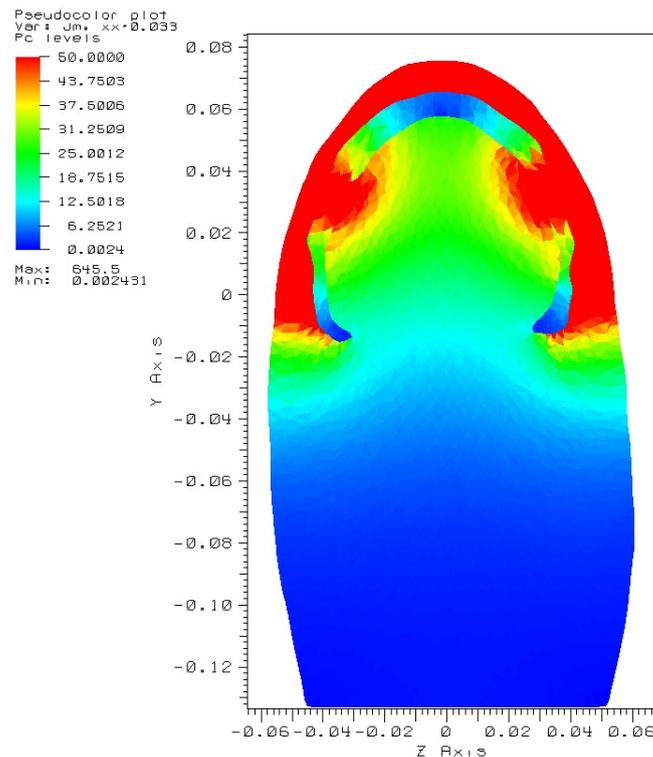
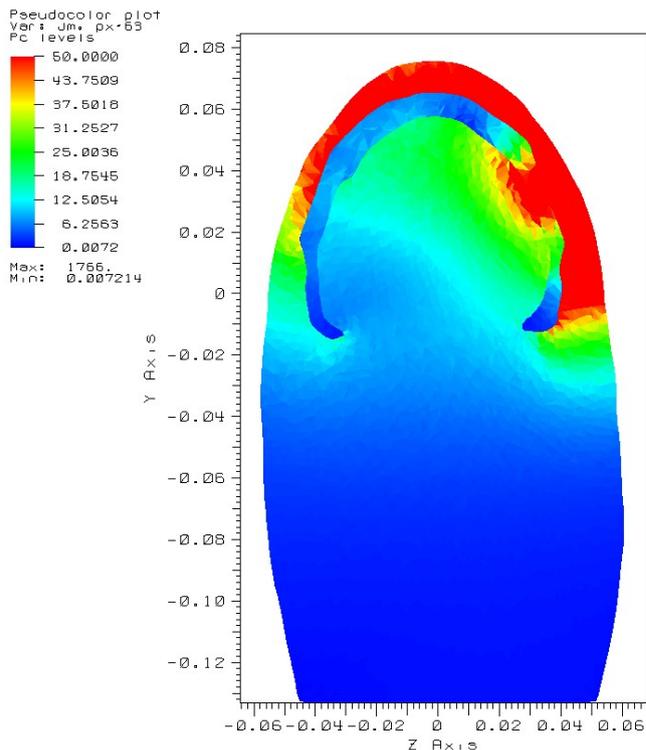
Transcranial Magnetic Stimulation



ECT (min):
forehead-temple

ECT (min):
temple-temple

TMS (max):



Transcranial Magnetic Stimulation



Maximal eddy current density for each tissue:

		ECT-FT			ECT-TT			TMS-1		
		min	avg	max	min	avg	max	min	avg	max
Skin	J_{\max} [A/m ²]	917	3778	7557	604	2416	4843	9	50	210
Skull		129	517	1034	75	296	933	0,7	4	20
Brain		70	287	575	101	443	1538	3	10	120

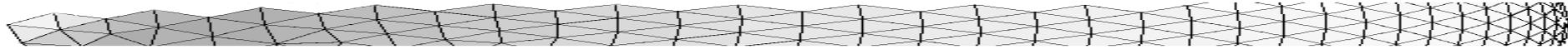
Observations:

ECT produce much (10-100 times) **stronger field**

Similar values of current density are observed only for minimal ECT and maximal TMS. (marked with yellow)

Safety limits are below **0.1** [A/m²]

Transcranial Magnetic Stimulation



Comparison with other authors results:

[1] M. Nadeem et al.: *Computation of Electric and Magnetic Stimulation in Human Head Using the 3-D Impedance Method*, IEEE TM, 2003

ECT: 140-570 A/m², TMS: 30-130 A/m²

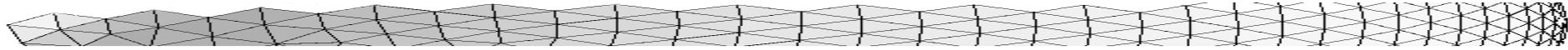
[2] M. Sekino, S. Ueno: *Comparison of current distributions in electroconvulsive therapy and transcranial magnetic stimulation*, Journal of Applied Physics, 2002

ECT: 266 A/m², TMS: 322 A/m²

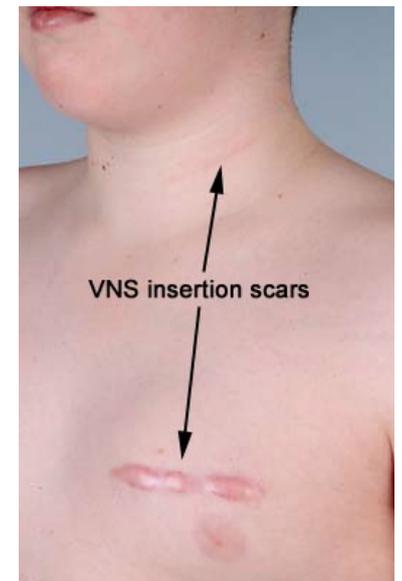
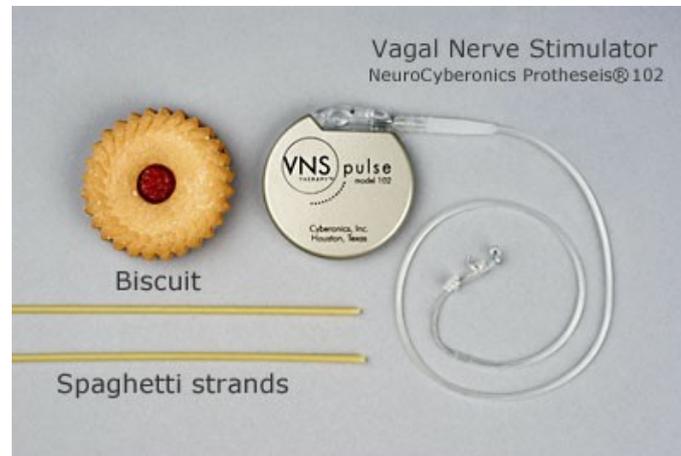
Our results from previous slide:

ECT: 70-1500 A/m², TMS: 3-120 A/m²

Vagus Nerve Stimulation

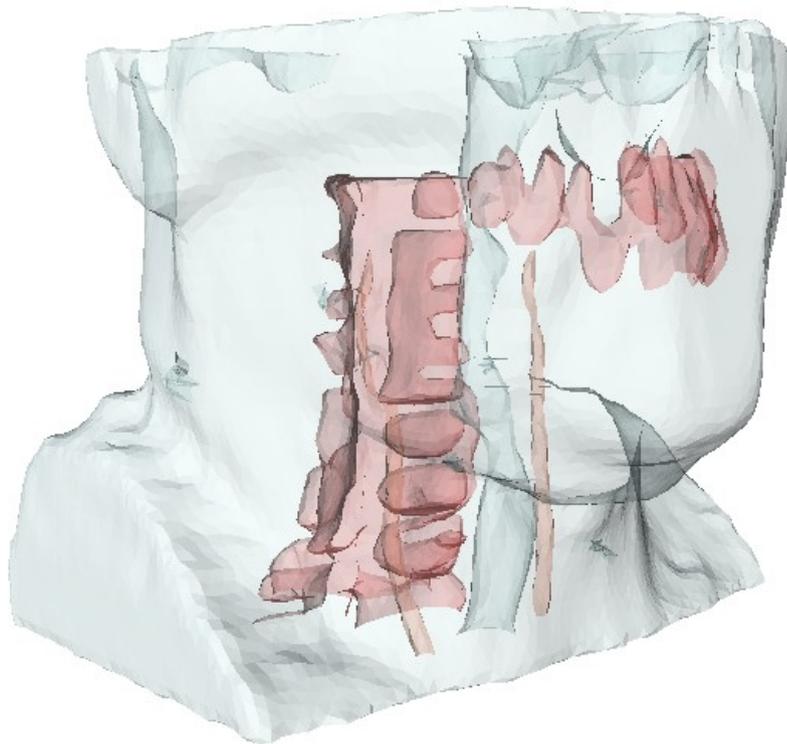
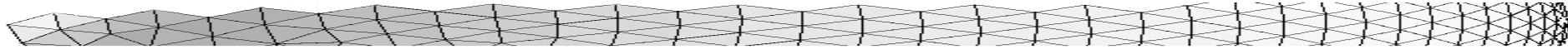


Can we replace electric VNS by magnetic stimulation?



The VNS is a modern treatment (approved in 1994).
Magnetic VNS is just a concept.

Vagus Nerve Stimulation



Neck model:

110,000 nodes

620,000 elements

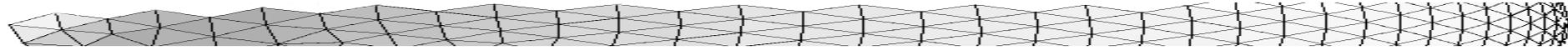
Stimulation :

Number of terms - 7

Current - 7 kA

Raise time – 100 μ s

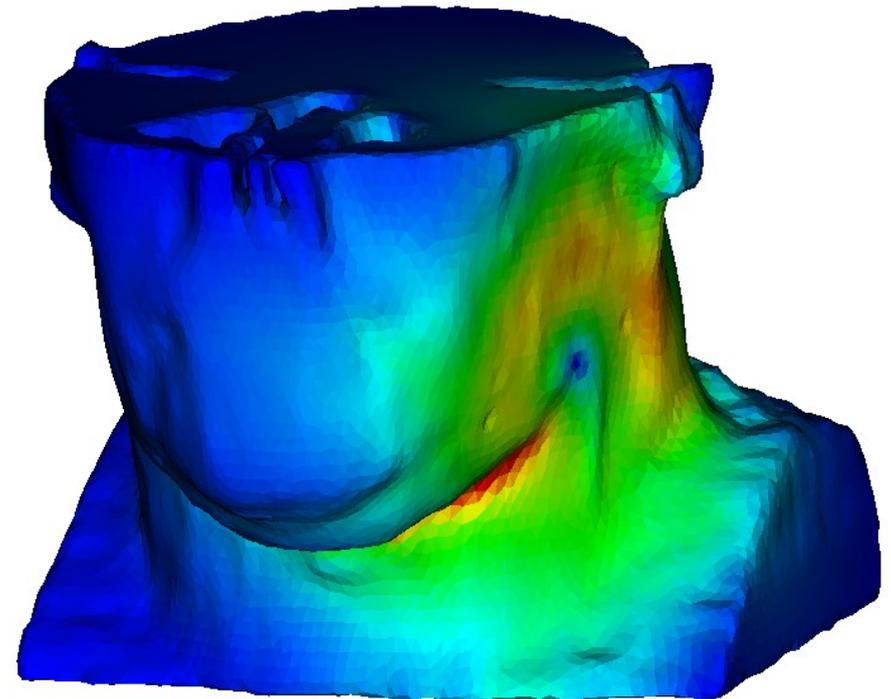
Vagus Nerve Stimulation



Stimulation by electrodes

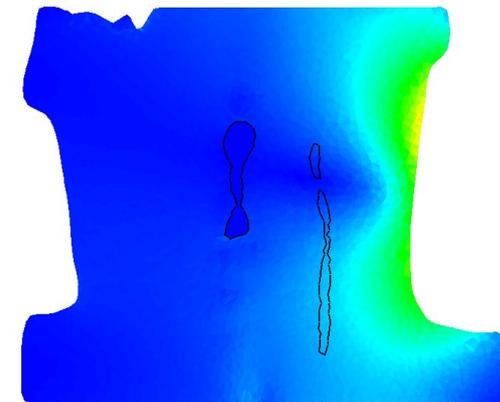
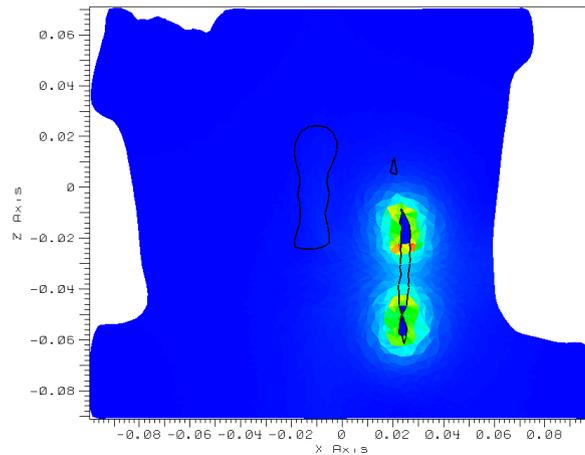
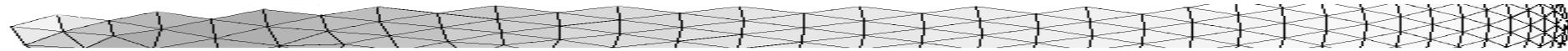


Stimulation by coil



Eddy currents magnitude on the skin surface.

Vagus Nerve Stimulation

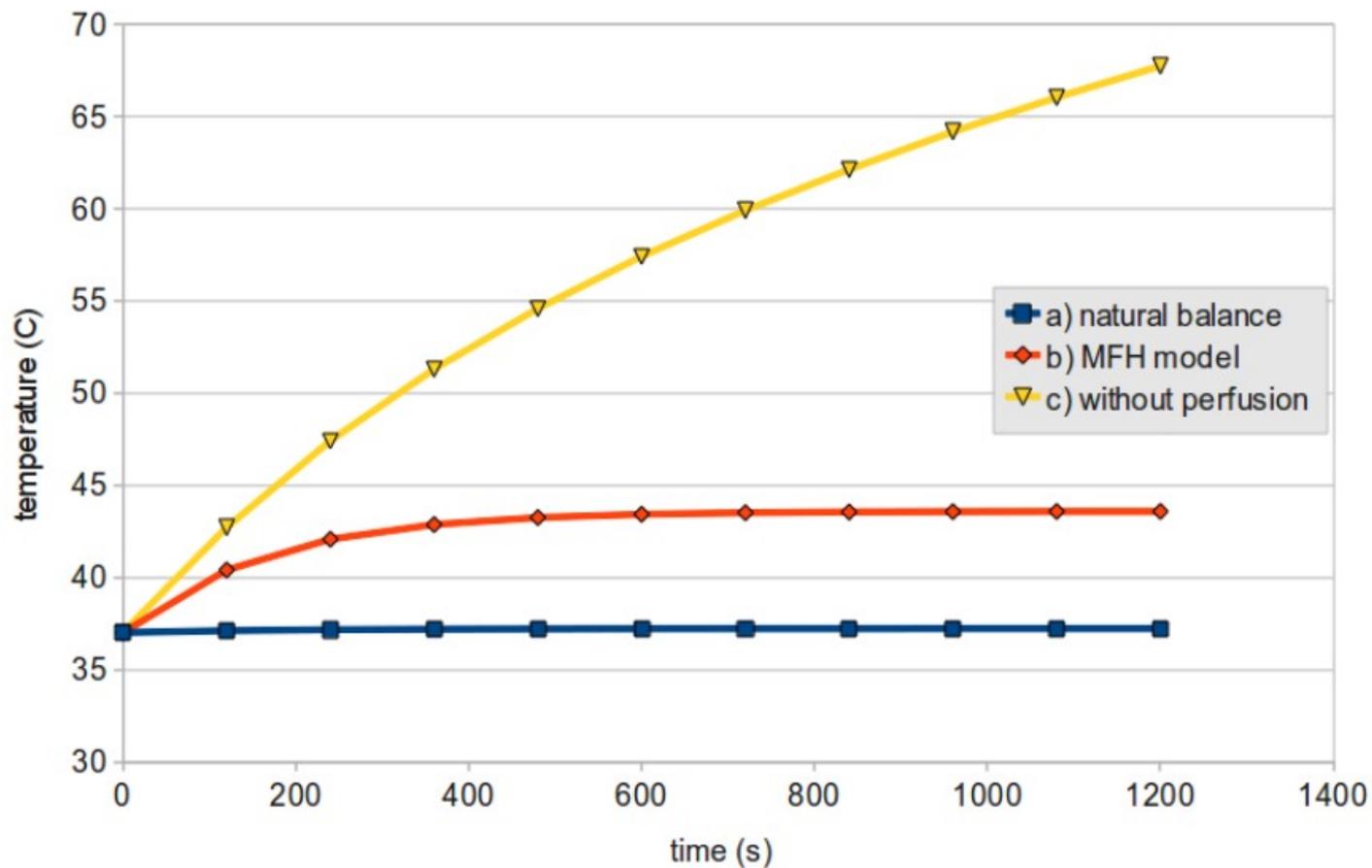


Maximal current density magnitude:

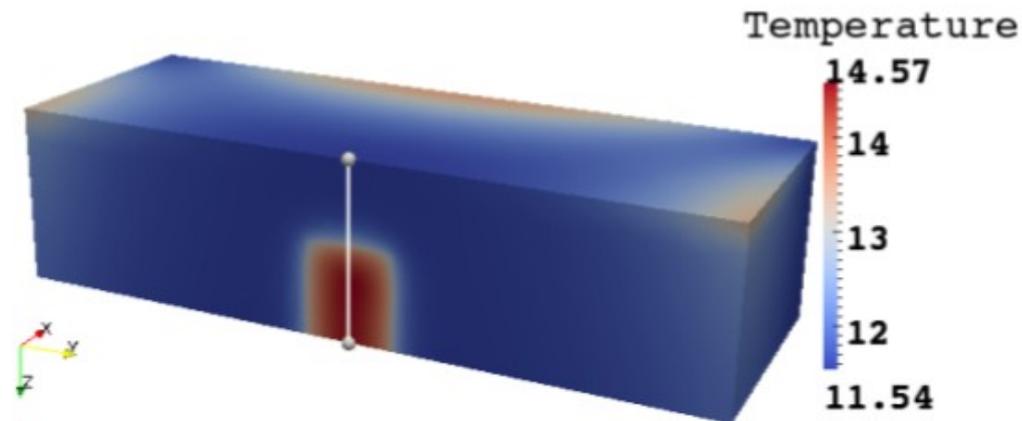
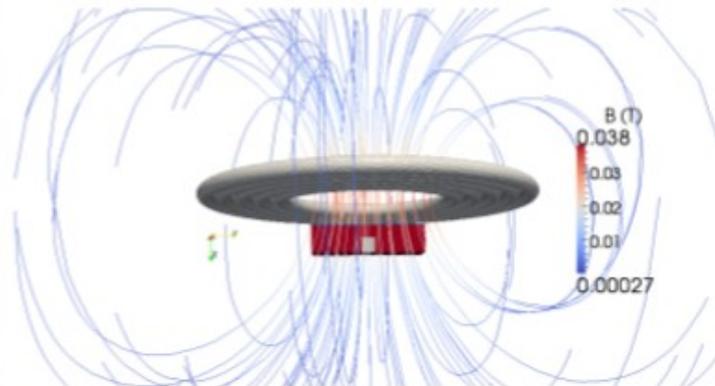
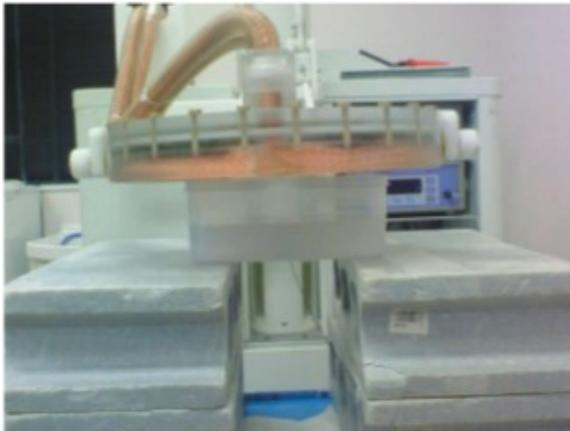
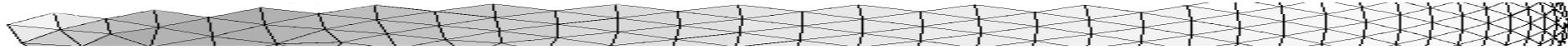
	Electr.	Magn.
Vagus nerve	330	150
Whole neck model	335	500

$$\left[\frac{A}{m^2} \right]$$

Magnetic Fluid Hyperthermia



Magnetic Fluid Hyperthermia



Magnetic Fluid Hyperthermia



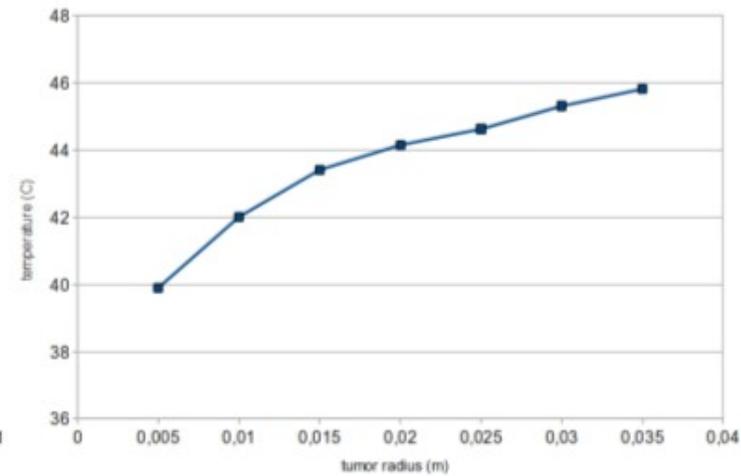
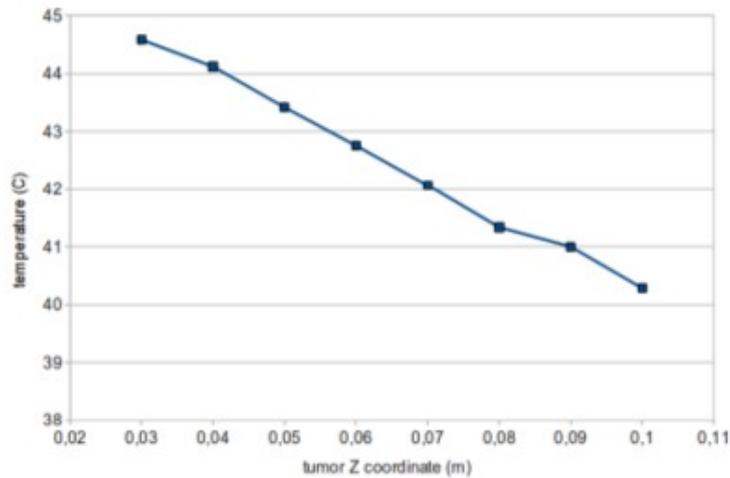
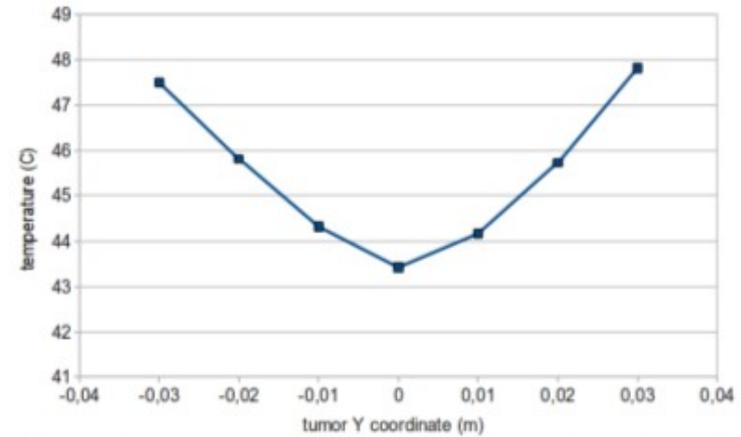
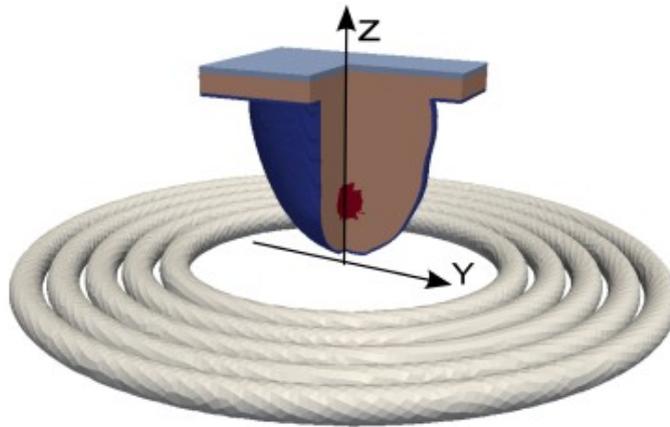
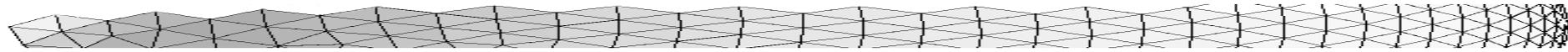
Temperature after 30 minutes exposition: max. 43.6 C



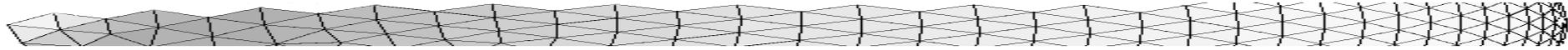
Conclusion:

Therapy is unaffected by breast class and shape.

Magnetic Fluid Hyperthermia

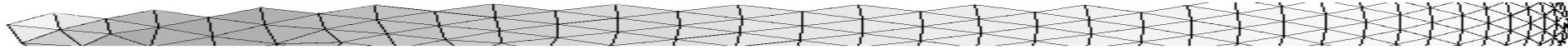


Wyzwania



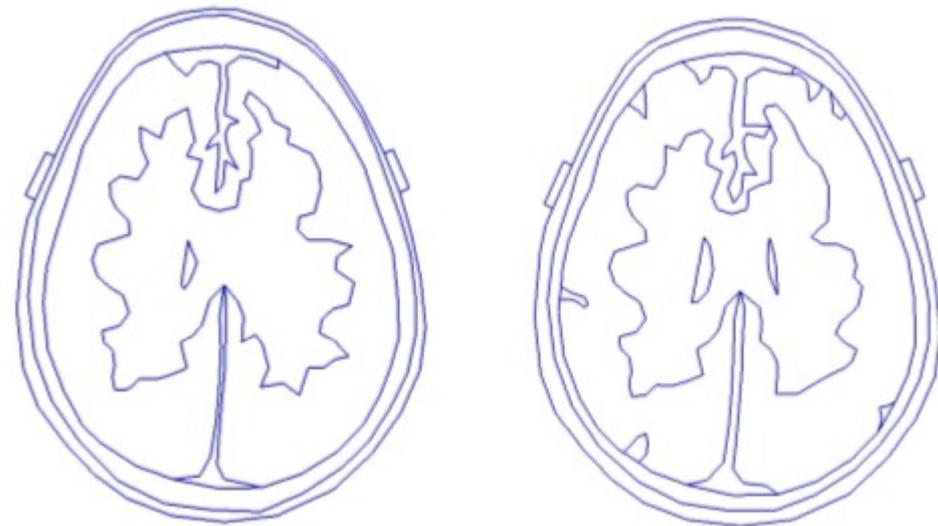
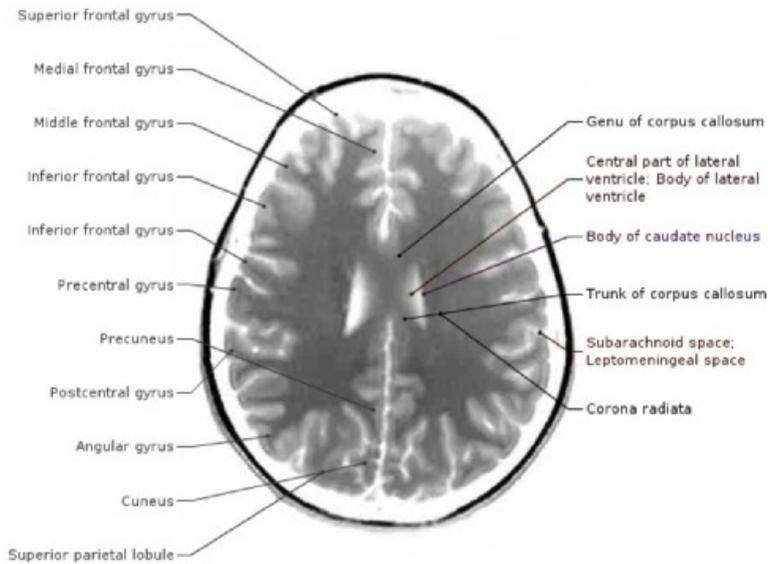
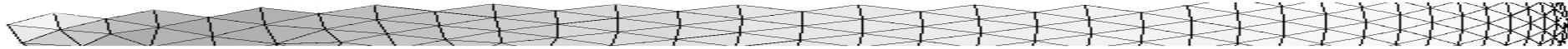
- Eksperymentalne potwierdzenie wyników
 - Trudności z pomiarami rzeczywistych wartości
- Interpretacja wyników
 - Niezbędna wiedza i doświadczenie medyczne

Plan seminarium



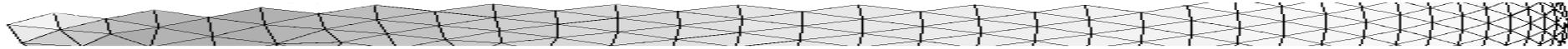
- Wyzwania – krok po kroku, na przykładach
 - Opis medyczny i fizyczny problemu
 - Opis matematyczny zjawiska
 - Model obiektu biologicznego
 - Rozwiązanie numeryczne
 - Analiza wyników
- Wyzwanie główne – wiarygodność wyników

Segmentation uncertainty



Two different segmentations of the same MRI head scan.

Tissue uncertainty



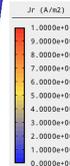
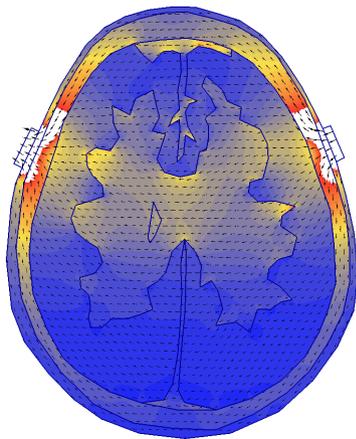
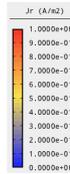
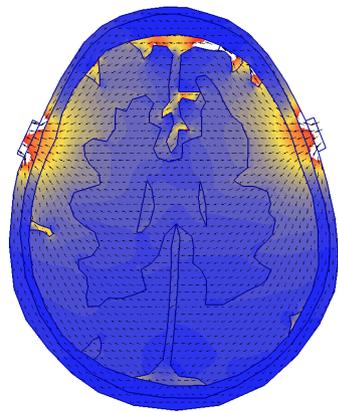
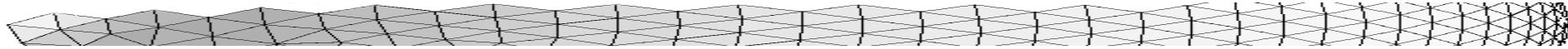
Tissue properties:

inhomogeneous, time-varying, patient specific, non-linear, ...

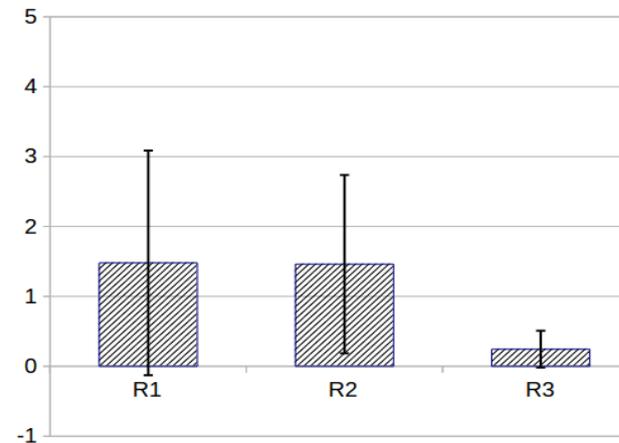
Conductivity [S/m]	Average	Std. dev.	Min	Max
Brain (White Matter)	0.37	0.34	0.05	1.12
Brain (Grey Matter)	0.19	1	0.08	0.26
Bone	0.1	1	0.02	1.17
Skin	0.00121	0.000078	0.00043	0.002
Cerebrospinal Fluid	1.80	0.21	1.59	2.00
Muscle	0.29	0.18	0.04	0.60

Low frequency values from IT'IS literature review published on 01.08.2014.

Sensitivity analysis



Result	Average	Std. dev.
J in the center of the brain [A/m ²]	1.47	1.61
J in the vicinity of electrode [A/m ²]	1.46	1.28
Total power loss [W]	0.24	0.26



Sources of uncertainty



Source of uncertainty	Level	Type	How to reduce?
Mathematical & physical model	unknown	cognitive	Develop advanced mathematical models.
Tissue properties	1000% - 3000%	cognitive and stochastic	Measurements of in-vivo tissue parameters are nearly impossible.
Geometry	10-50%	stochastic and cognitive	Improve techniques for internal imaging and segmentation algorithms.
Numerical errors	1-5%	stochastic	Apply advanced numerical techniques.

Podsumowanie



- Modelowanie numeryczne jest **szeroko stosowane** w bioelektromagnetyzmie.
- Techniki obliczeniowe szybko dają precyzyjne wyniki, jednak ich **wiarygodność jest ograniczona**.
- Wysoka zmienność parametrów ciała ludzkiego wymusza **podejście stochastyczne** i statystyczną analizę wyników.

Dziękuję



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