

ATLAS-BASED FAST PATIENT-SPECIFIC SIMULATIONS OF THE PULMONARY ARTERY

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We present a novel method to enable fast patient-specific simulations, combining image analysis, computational fluid dynamics and model order reduction.

- From a preliminary set of individual geometries, a representative template (*atlas*) of the pulmonary artery shape is created.
- Full CFD simulations of the blood flow are carried out only on the atlas geometry. Flow information is compressed into a basis for model order reduction (*proper orthogonal decomposition*), creating a precomputed flow database.
- Individual patient geometries are registered to the atlas, and the *precomputed* basis functions are mapped onto the individual meshes, generating a patient specific *reduced order flow model*.

ATLAS COMPUTATION

The pulmonary artery of each patient was segmented from MR angiography. The generated meshes were then pre-processed for CFD simulations. From a preliminary mesh set, an unbiased template (*atlas*) of the artery shape was constructed using the forward method proposed in [1]. This approach is particularly suited for our purposes, as shapes are represented by *currents*, which can be used for meshes without point correspondence.

COMPUTATIONAL FLUID DYNAMICS

Using a finite element method, blood flow on the atlas geometry is simulated solving numerically the Navier-Stokes equations for blood pressure (p) and velocity (\mathbf{u}):

$$\rho_f \partial_t \mathbf{u} + \rho_f \mathbf{u} \cdot \nabla \mathbf{u} + \nabla p - \mu \Delta \mathbf{u} = 0$$

$$\text{div } \mathbf{u} = 0$$

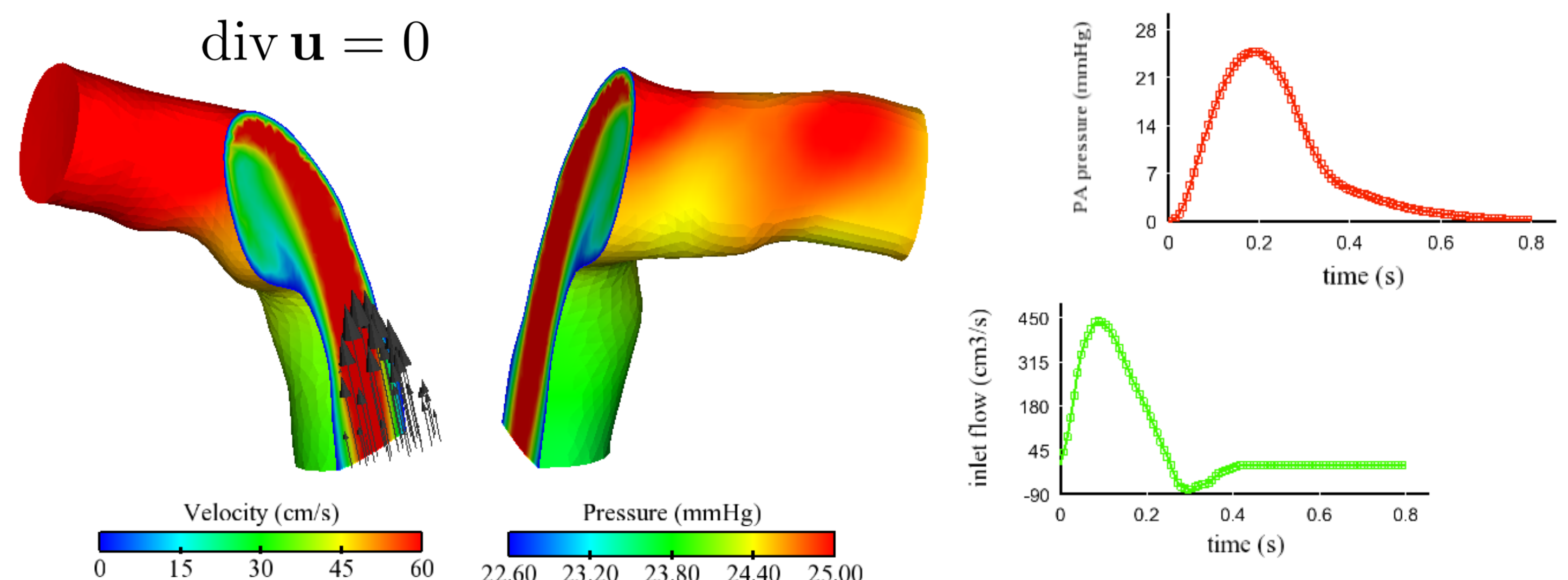


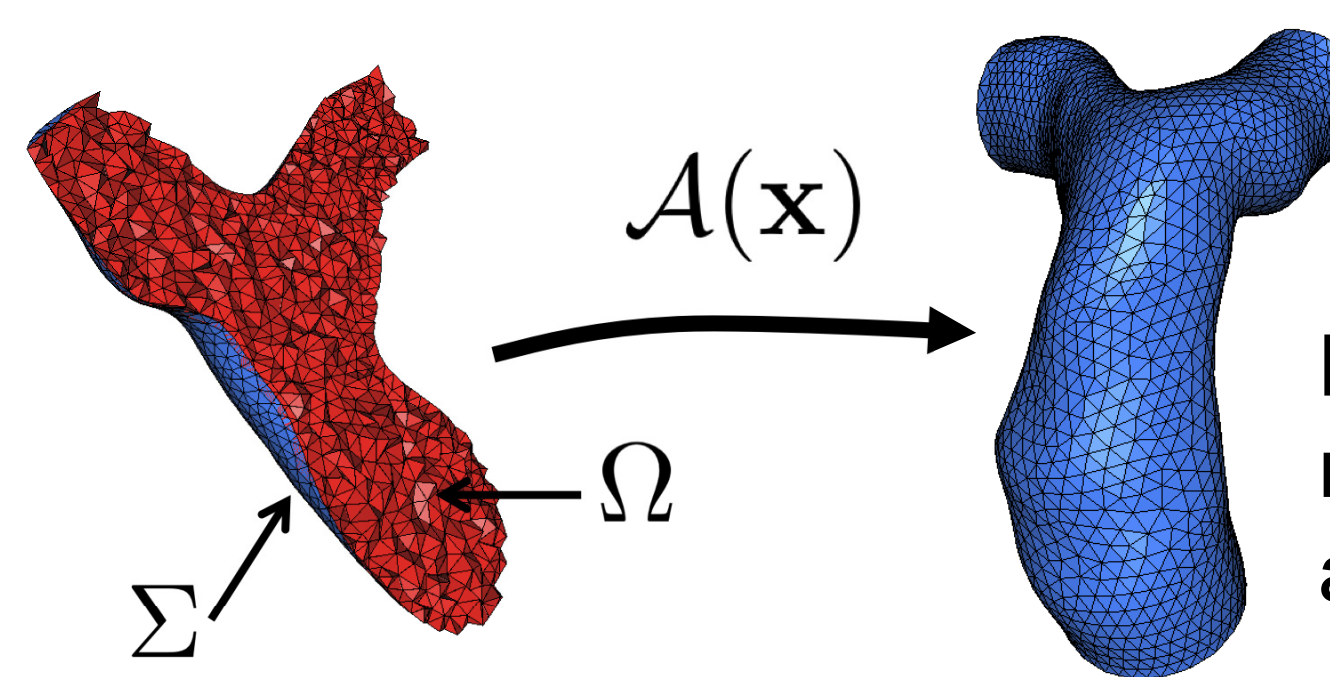
Fig. 1. Snapshot of a CFD simulation. Inlet flow of 4.2L/min. Outlet pressure (pulmonary artery) between 0 - 25mmHg, imposed through a Windkessel model.

Proper orthogonal decomposition

From a set of snapshots of the atlas solution at different instants of time, we compute a basis of a proper orthogonal decomposition (POD) [2] for velocity and pressure, which consists of a reduced number of functions able to describe the fluid solution with high accuracy.

FAST PATIENT-SPECIFIC SIMULATIONS

1. Registration and 3D-deformation. The atlas surface is *registered* to each patient, establishing a one-to-one correspondence between surface points. Surface maps are then harmonically extended to the atlas volume mesh, describing *three-dimensional patient meshes as deformation of the atlas*.



$$\Delta \mathcal{A} = 0, \text{ in } \Omega$$

$$\mathcal{A}|_{\Sigma} = \mathbf{d}_{\Sigma}$$

Fig. 2. The surface map (\mathbf{d}_{Σ}), obtained after registration, serves as boundary condition to compute a 3D deformation \mathcal{A} by harmonic extension.

2. POD mapping. Using the 3D deformation, POD basis functions can be mapped onto the individual meshes [3]. Velocity basis functions on the patient geometry (\mathbf{w}) have been computed using a *Piola transform*, a vector fields map preserving locally the incompressibility condition:

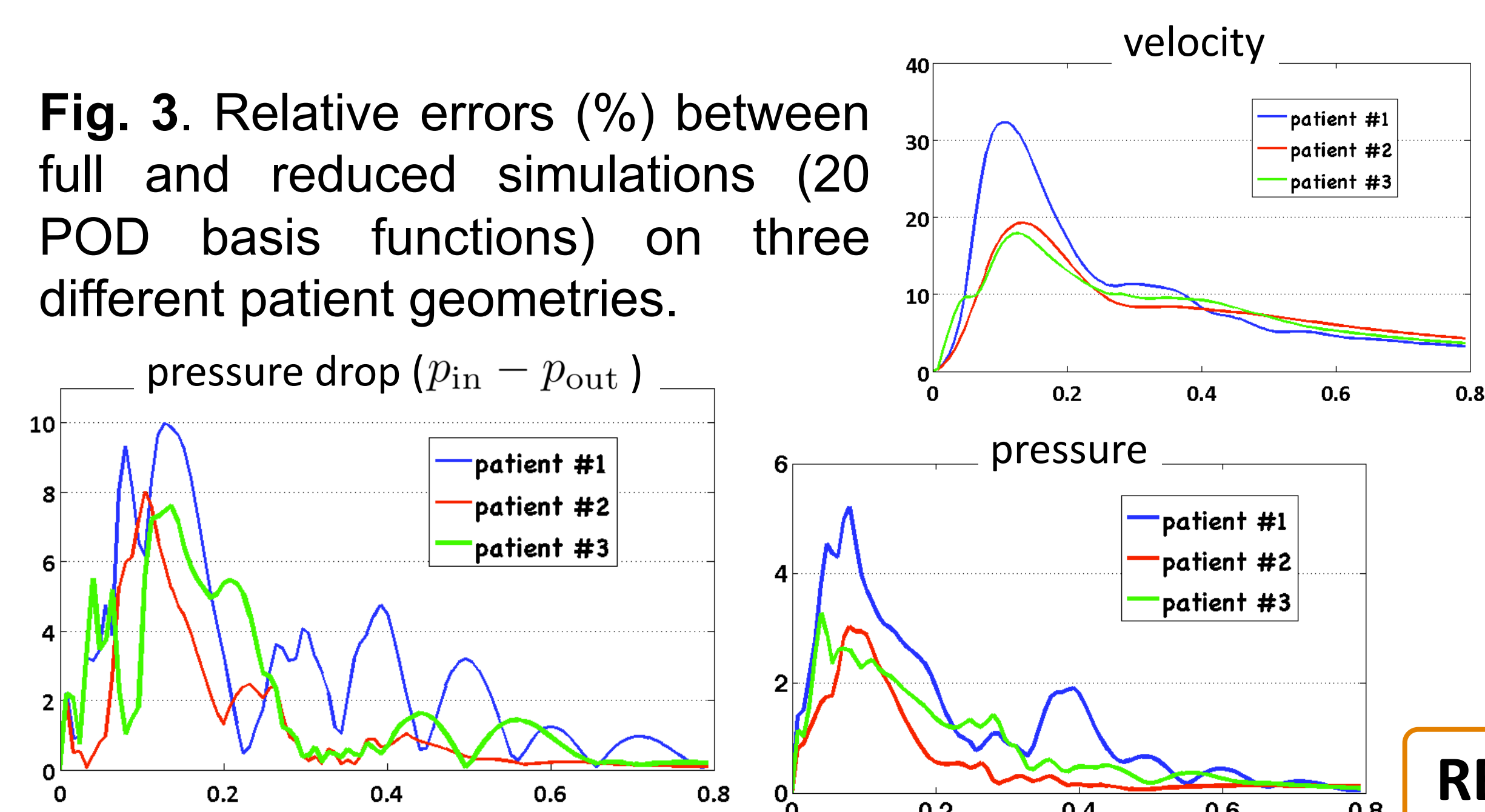
$$\mathbf{w}_{\text{patient}}(\mathbf{y}) = \frac{1}{|\det F(\mathbf{x})|} F(\mathbf{x}) \mathbf{w}_{\text{atlas}}(\mathbf{x}), \mathbf{y} = \mathcal{A}(\mathbf{x}), F = \nabla \mathcal{A}$$

This generates *patient-specific reduced models* for fast individual simulations.

RESULTS

The method has been validated on a set of three *Tetralogy of Fallot* patients. We compared *full* simulations, i.e. solving numerically the Navier-Stokes equations on patient geometries, and our *reduced* approach.

Fig. 3. Relative errors (%) between full and reduced simulations (20 POD basis functions) on three different patient geometries.



The reduced order model, with a smaller amount of unknowns, exhibits good approximation properties.

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