

Numerical simulation of the electrical activity of the heart

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Jean-Frédéric Gerbeau

Stanford University, USA
INRIA, France

INSTITUT NATIONAL
DE RECHERCHE
EN INFORMATIQUE
ET EN AUTOMATIQUE



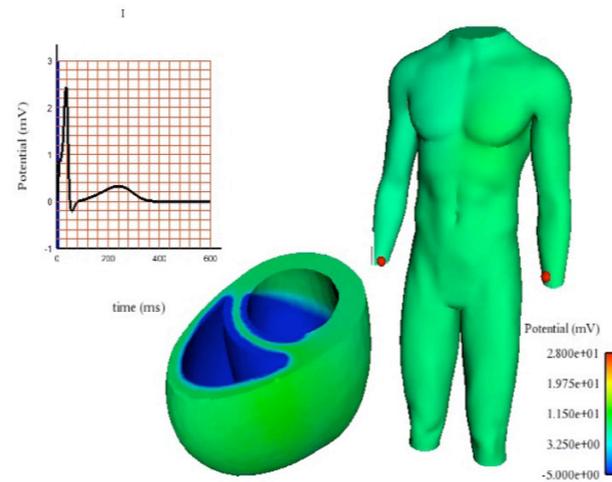
centre de recherche **PARIS - ROCQUENCOURT**



Heart modelling

CardioSense3D (Project-teams Asclepios, Macs, Reo, Sisyphe)

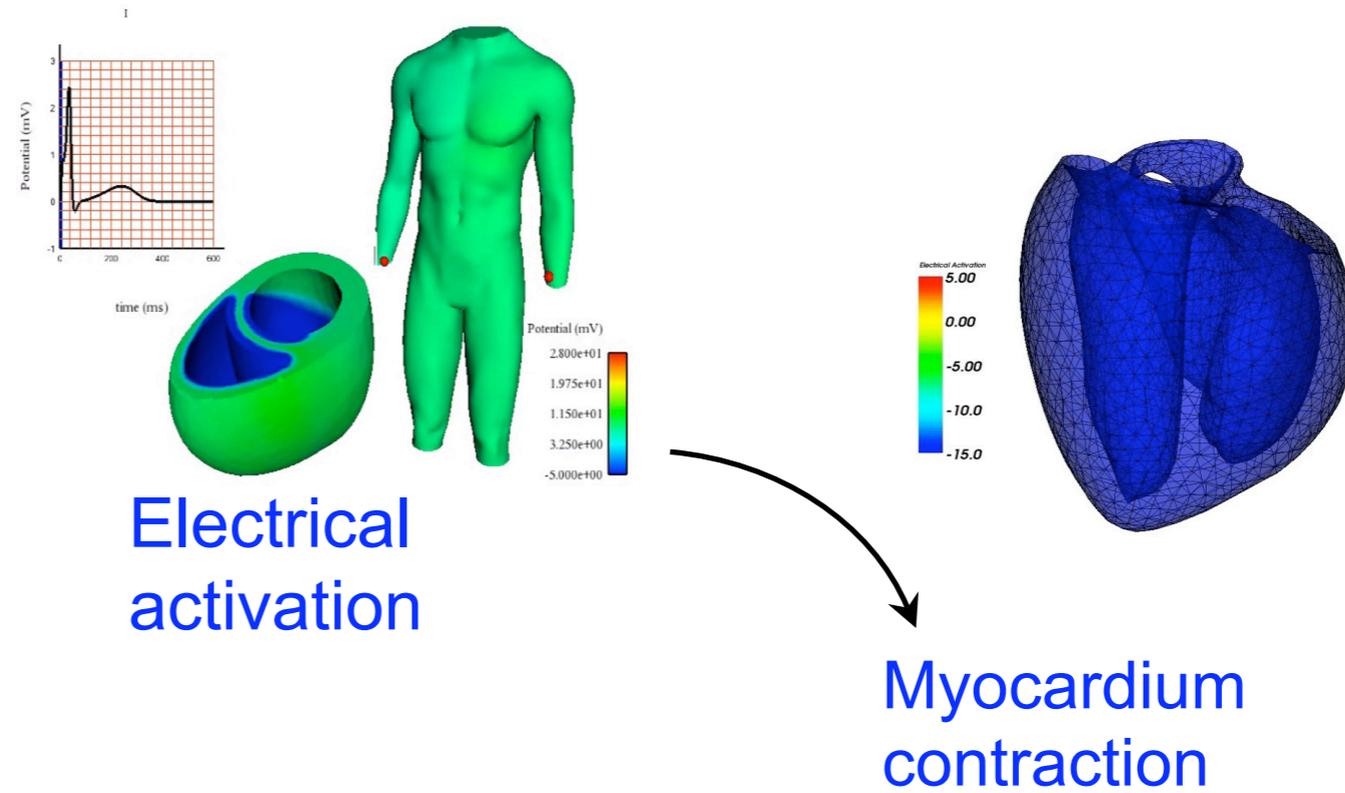
Heart modelling



Electrical
activation

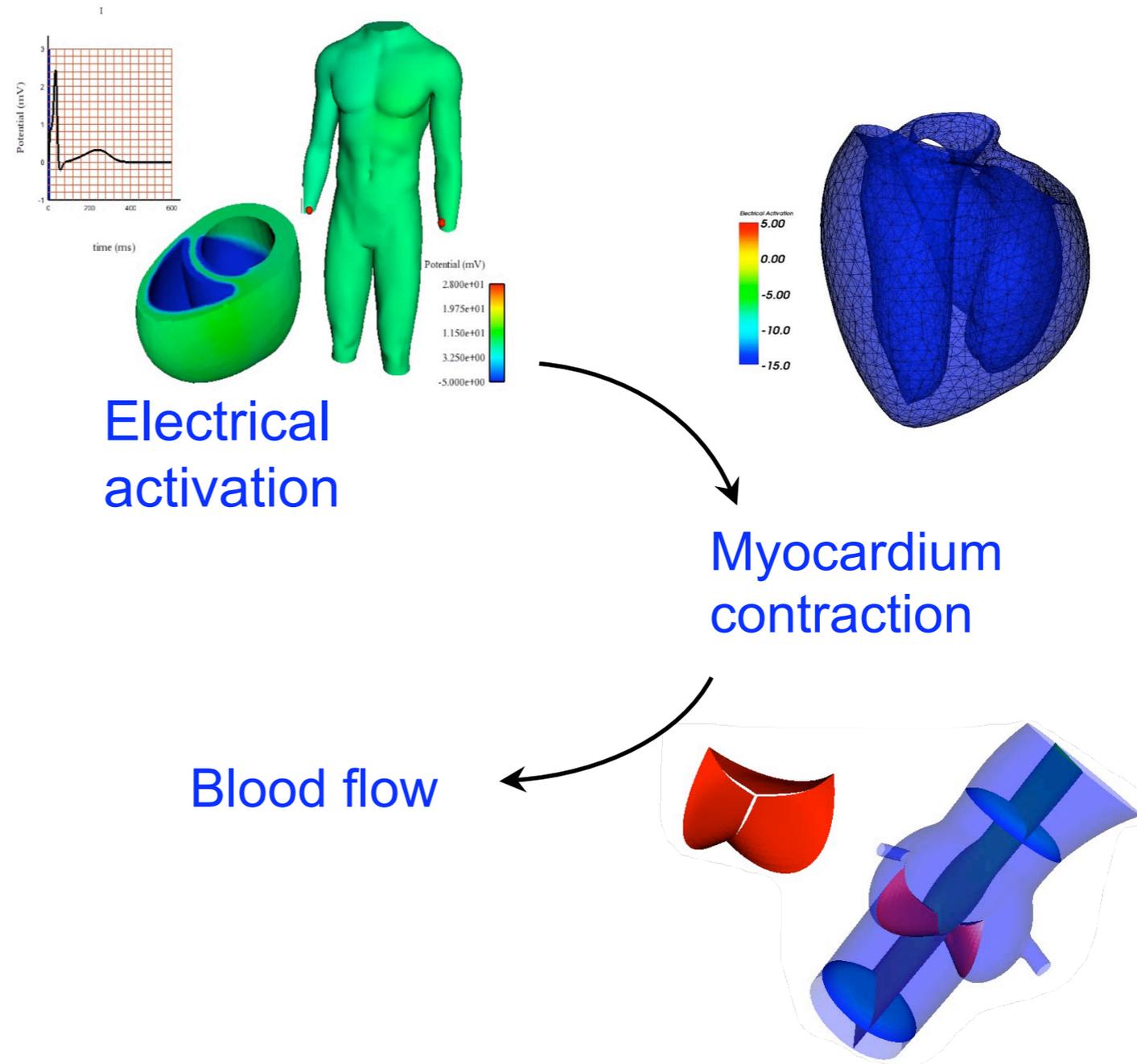
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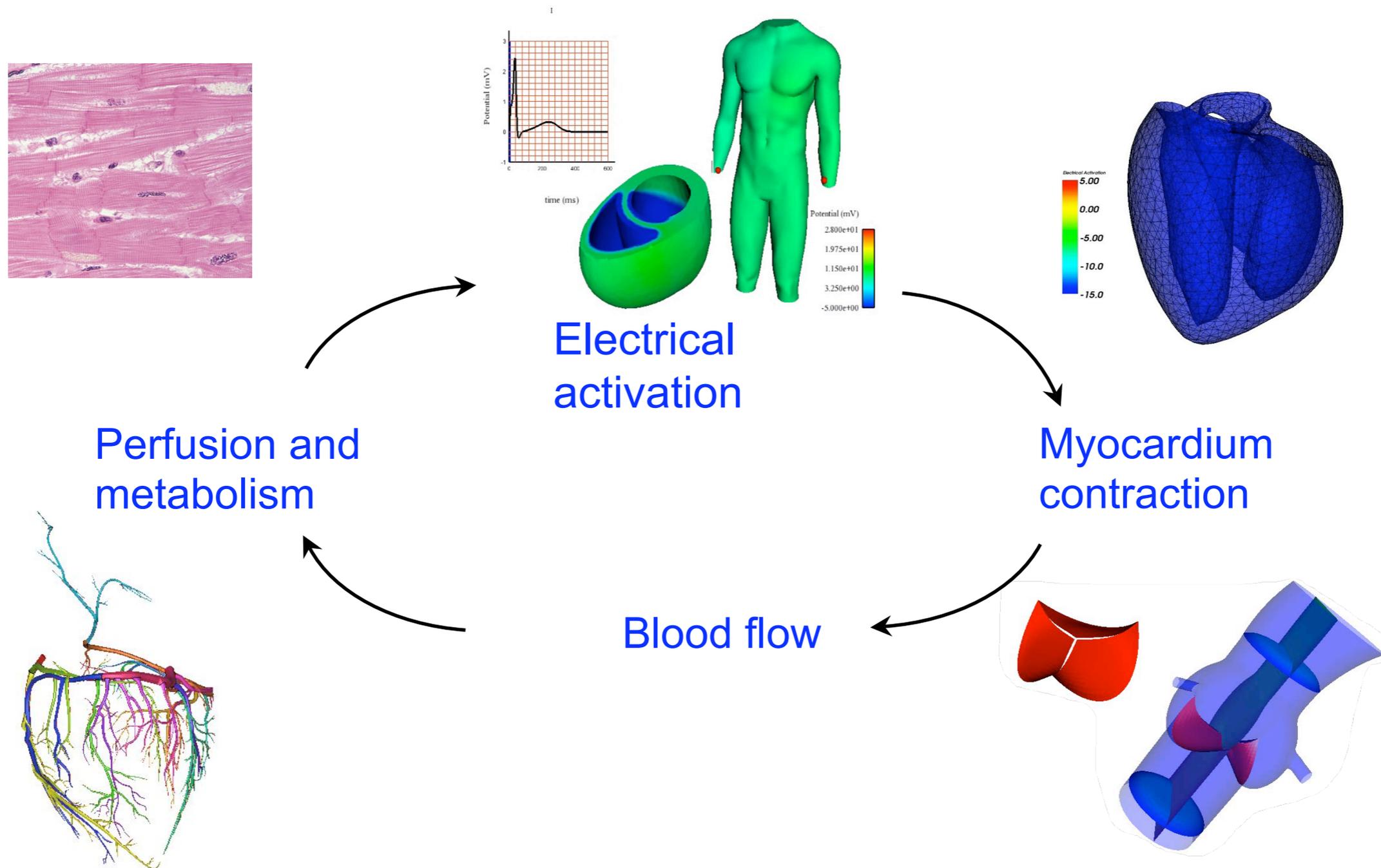
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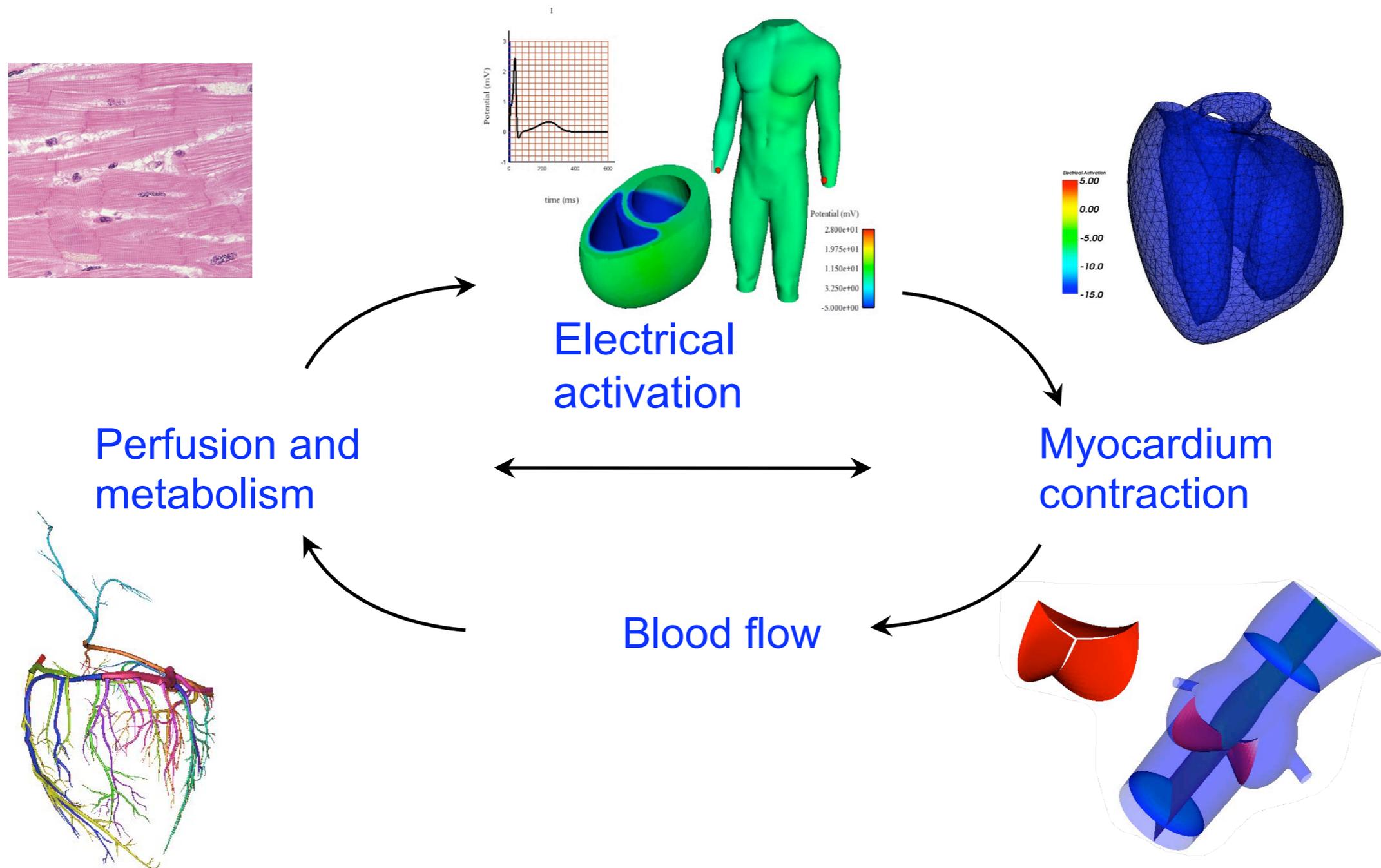
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Electromechanical model

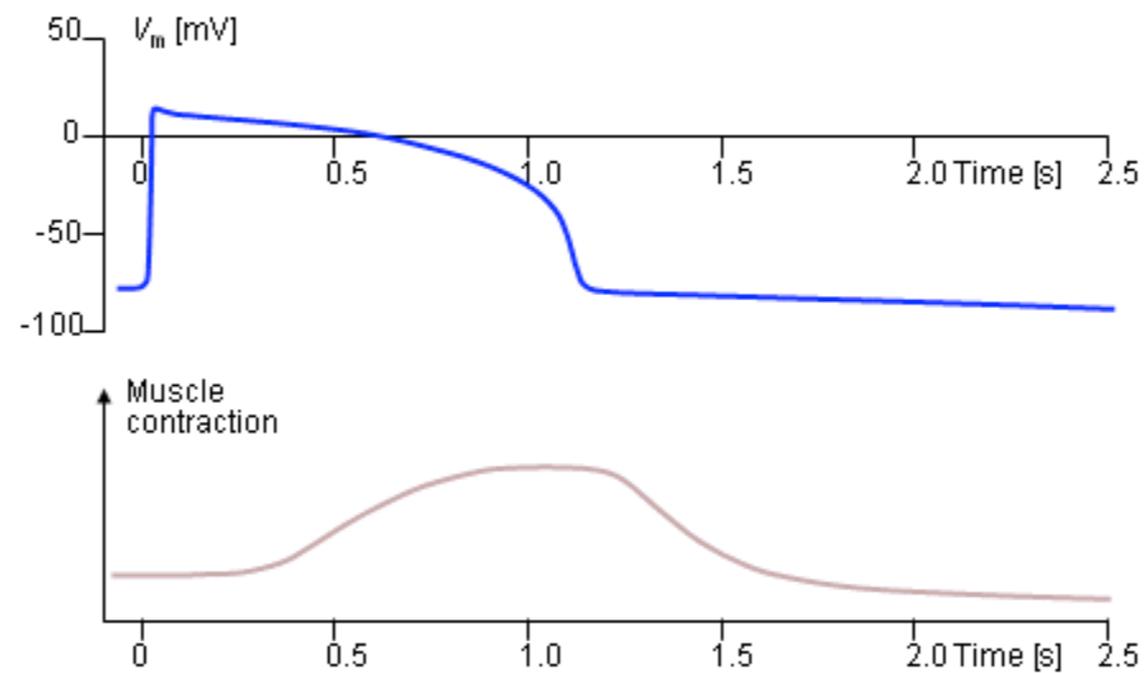
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Electromechanical model

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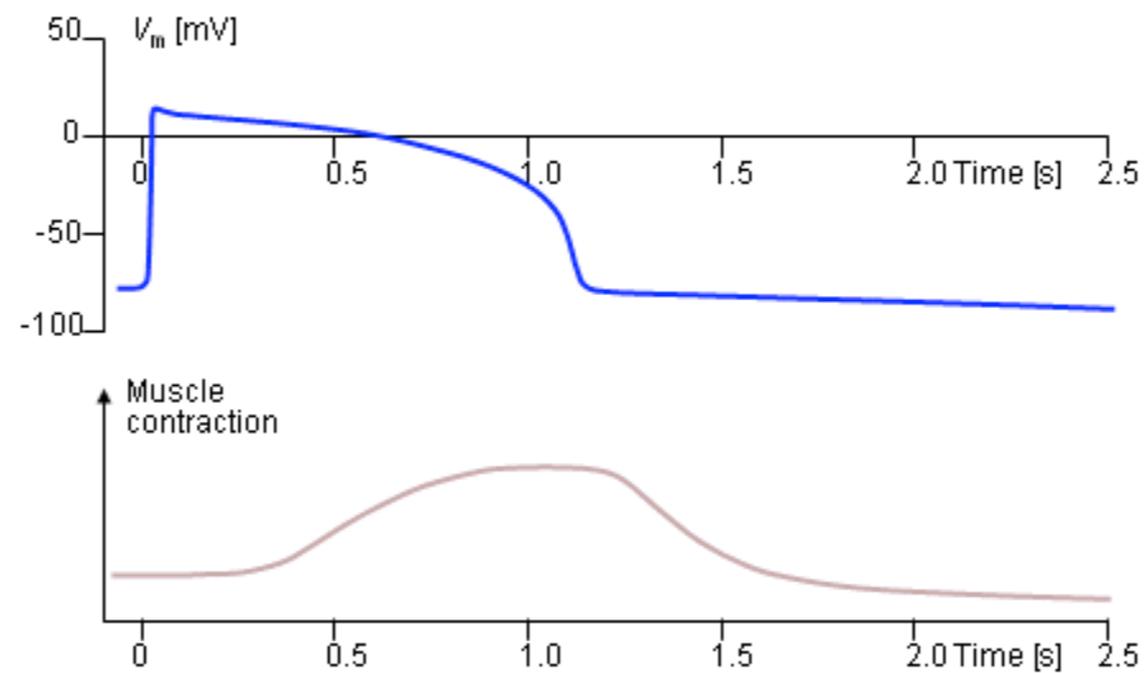
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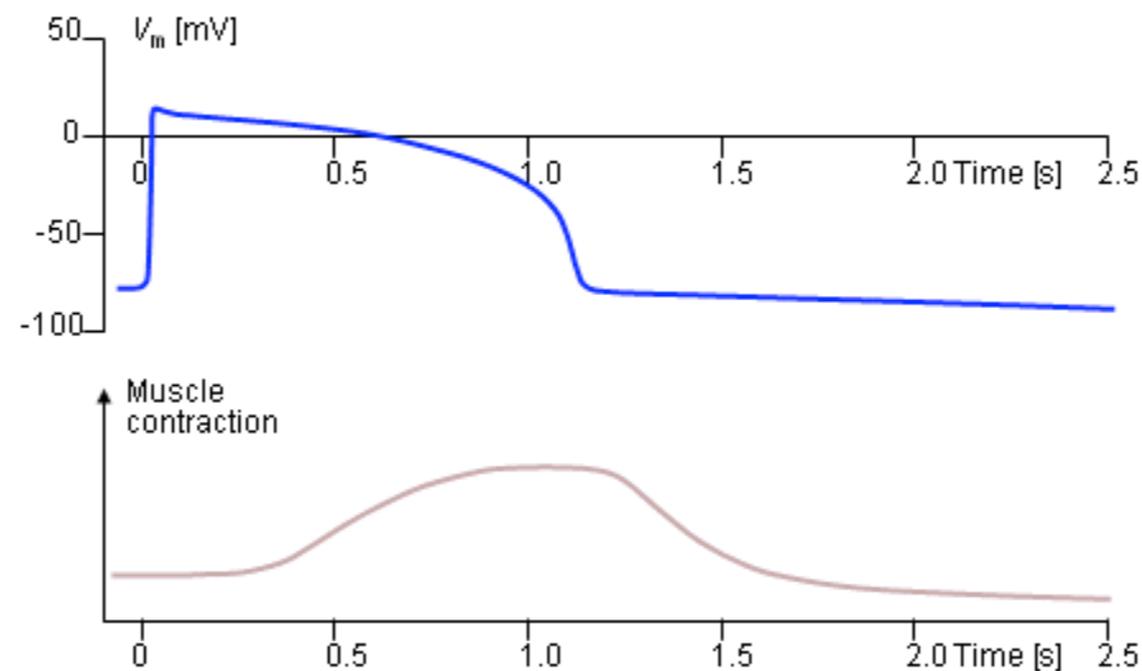
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- Total stress in a fiber

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$$\sigma = \sigma_c + F_P(\epsilon)$$

“contractile” stress

strain

Electromechanical model

- **Fiber scale** : active constitutive law

$$\begin{cases} \dot{\tau}_c &= k_c \dot{\epsilon}_c - (\alpha |\dot{\epsilon}_c| + |u_c|) \tau_c + \sigma_0 |u_c|_+ \\ \dot{k}_c &= -(\alpha |\dot{\epsilon}_c| + |u_c|) k_c + k_0 |u_c|_+ \\ \sigma_c &= \tau_c + \nu \dot{\epsilon}_c \end{cases}$$

(J. Bestel, M. Sorine)

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- If $u_c < 0$: σ_c and k_c decreases \longrightarrow **relaxation**

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- **Tissue scale** :

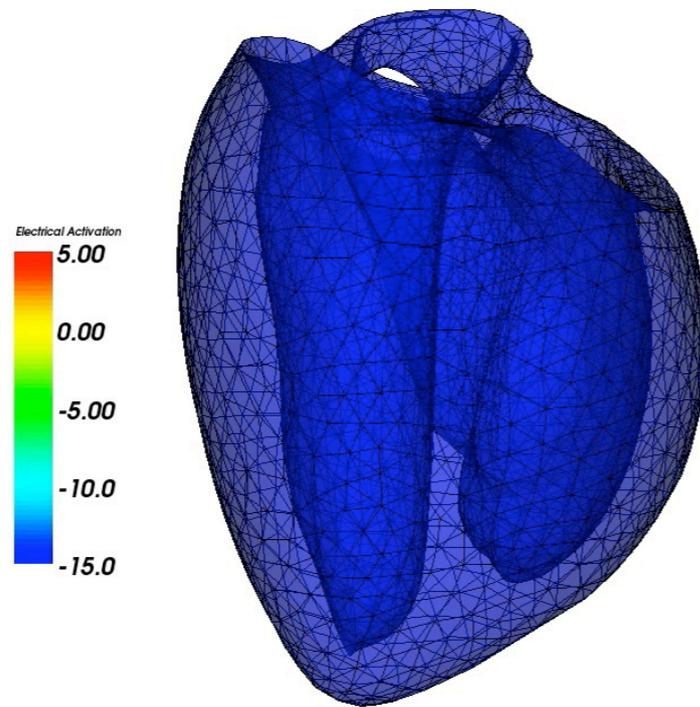
The fiber model is coupled with a 3D nonlinear material

(D. Chapelle, J. Sainte-Marie, Ph. Moireau)

Myocardium contraction

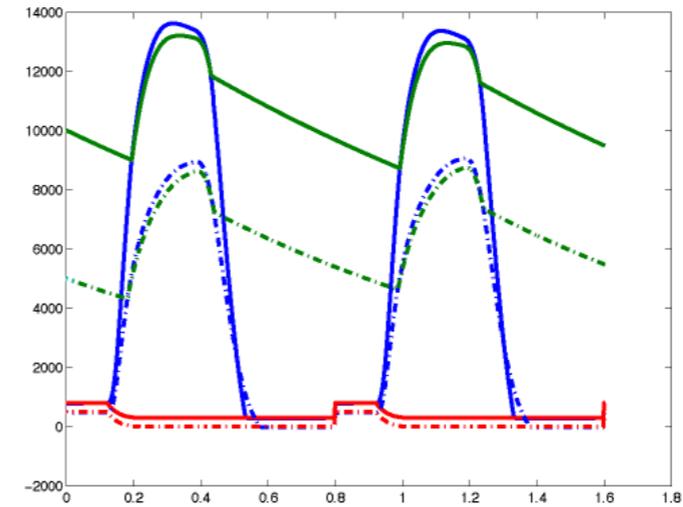
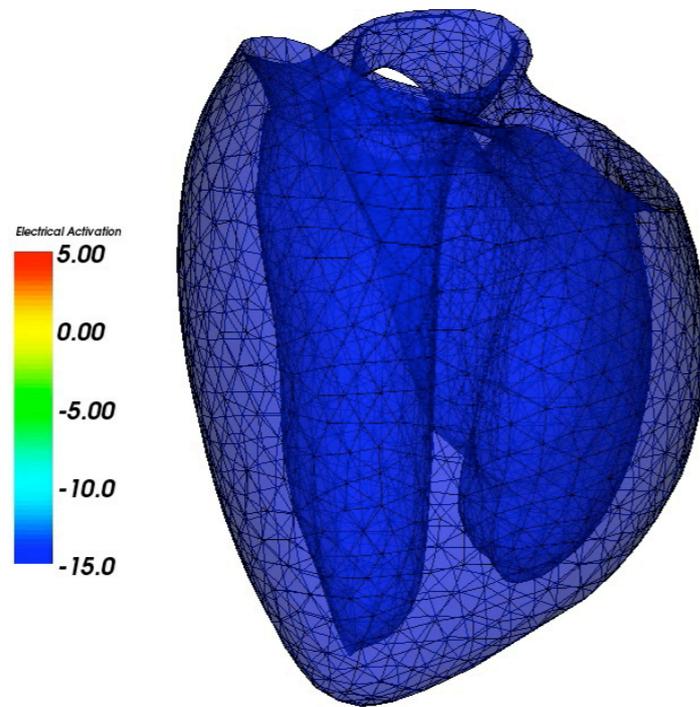
Chapelle, Moireau, Sainte-Marie, 2007

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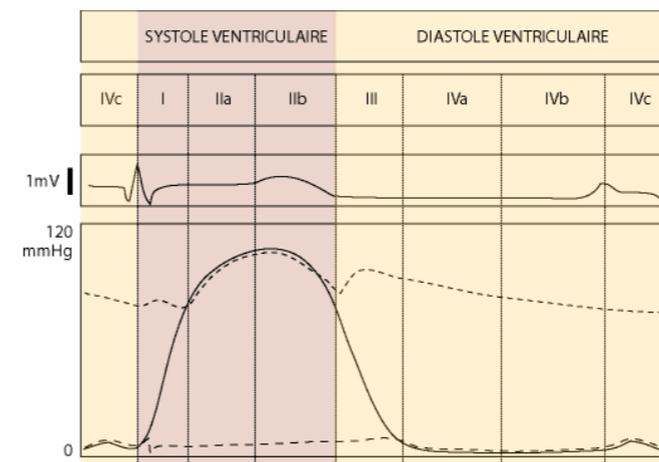
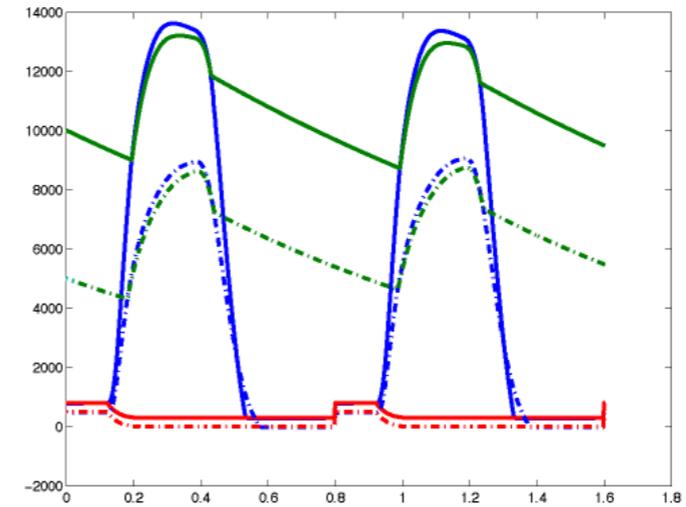
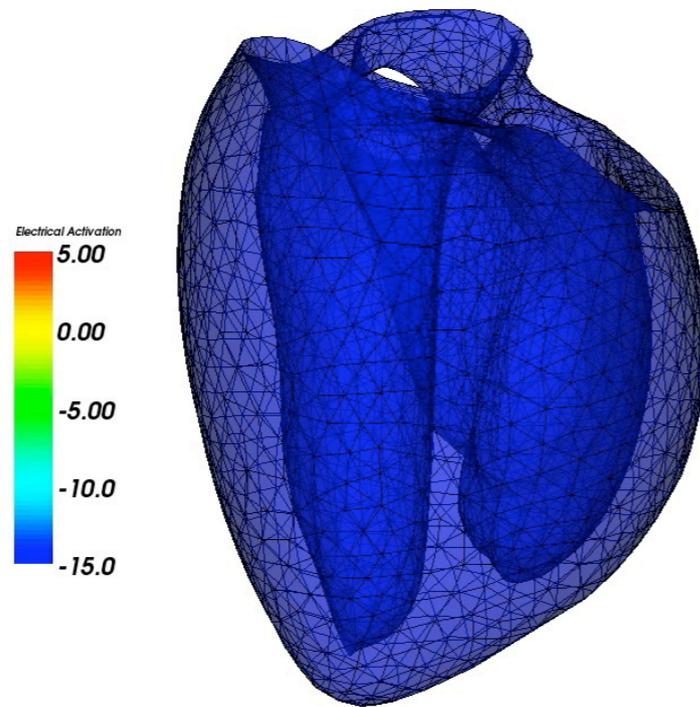
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Outline

- Electrical activity of the heart
 - Electrocardiograms (ECG)
 - Cell scale
 - Tissue scale : the bidomain equations
 - ECG simulation
- Applications
 - Cardiac Resynchronisation Therapy
 - MRI, Magnetohydrodynamics & ECG

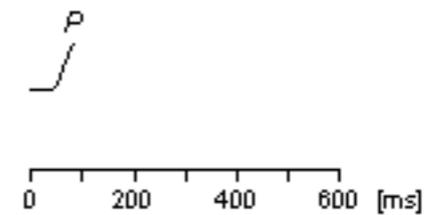
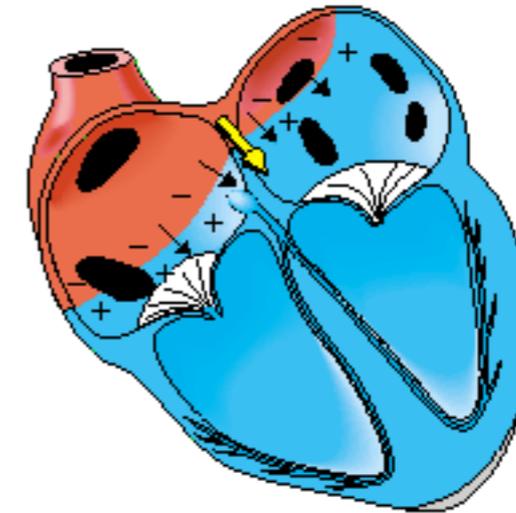
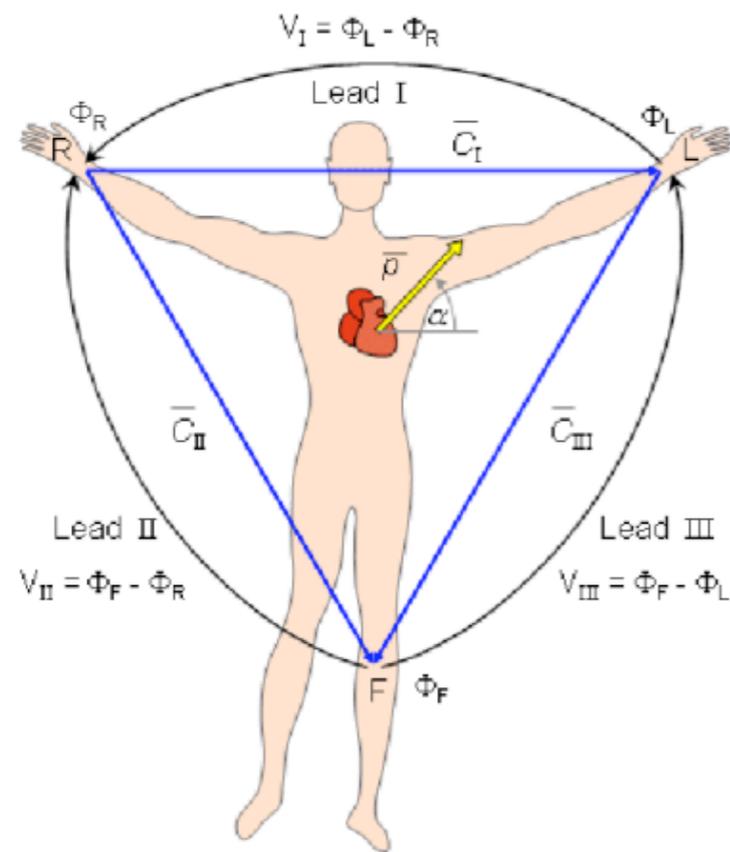
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Electrocardiograms

Einthoven assumption
(1895, Nobel prize 1924):

$$\phi_T(M) = \frac{1}{4\pi\epsilon_0} \frac{p \cdot OM}{|OM|^3}$$

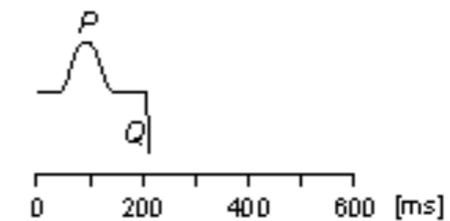
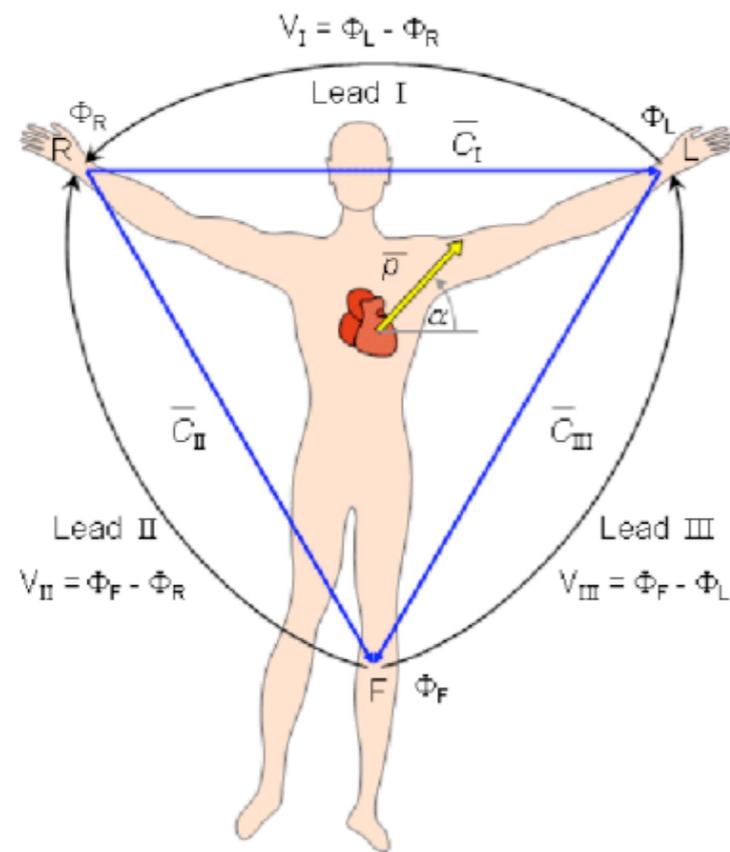


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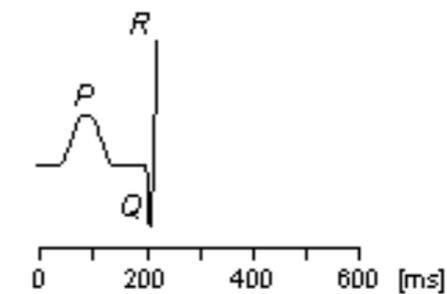
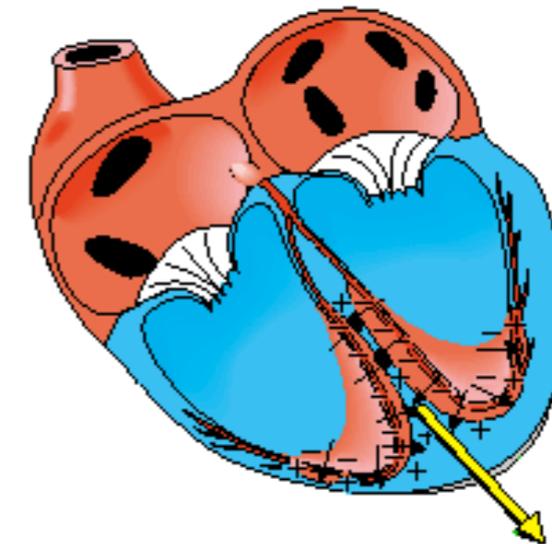
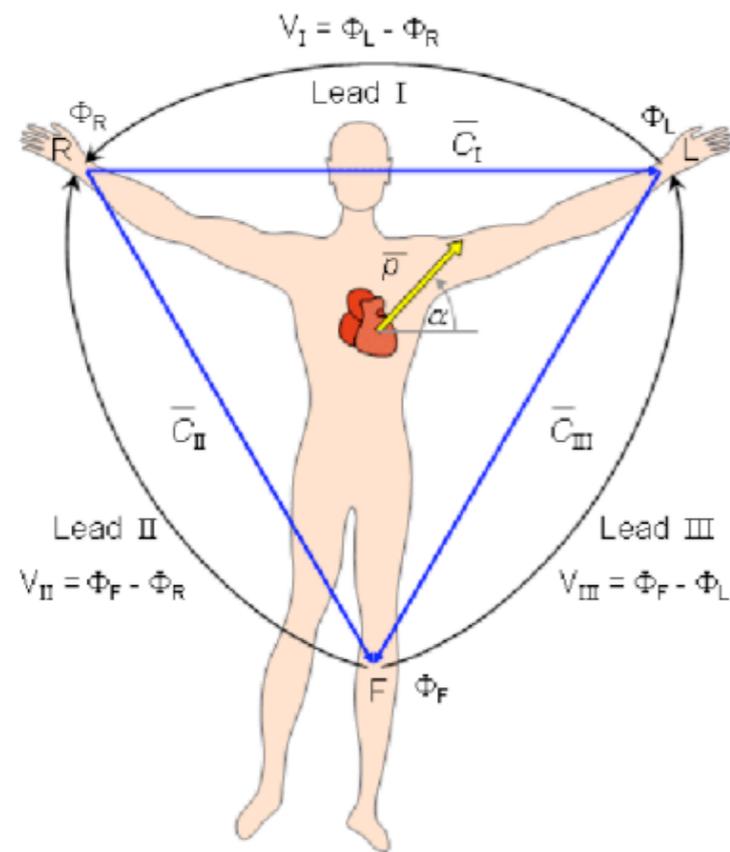


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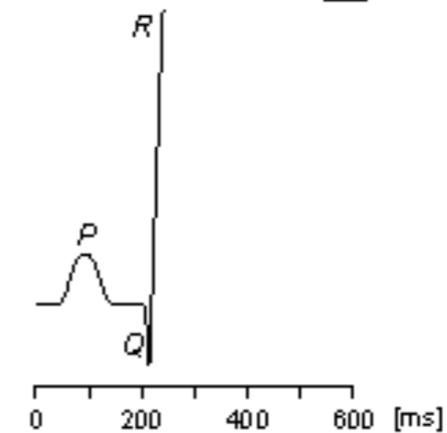
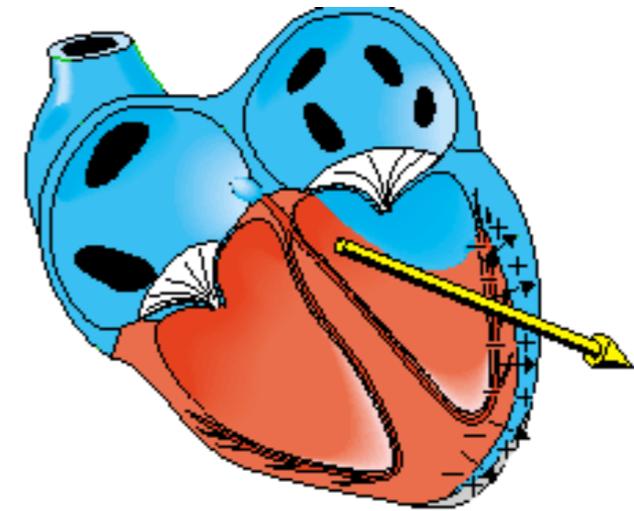
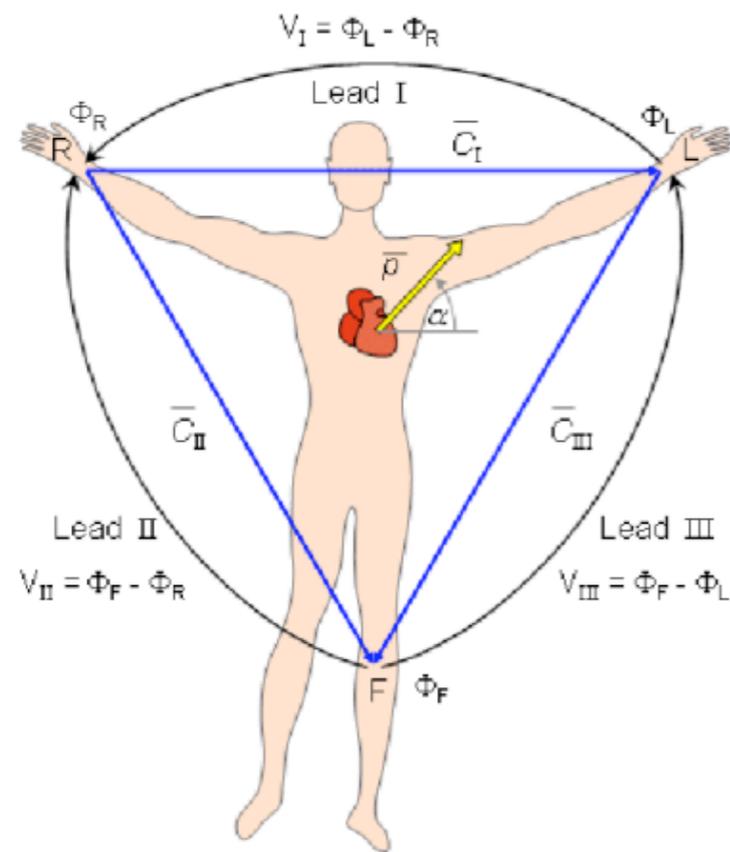


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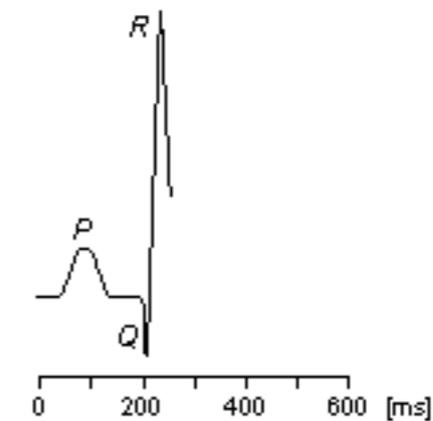
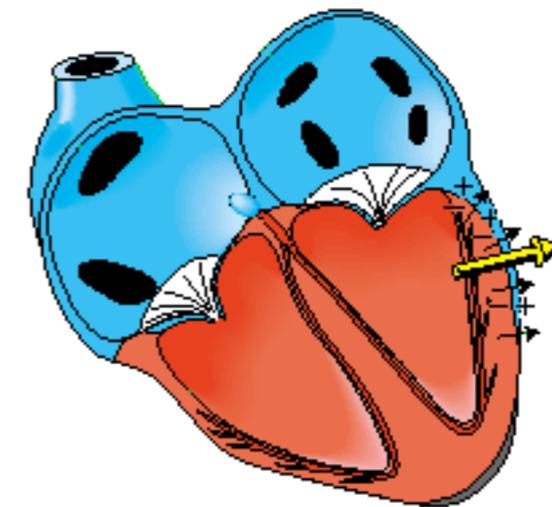
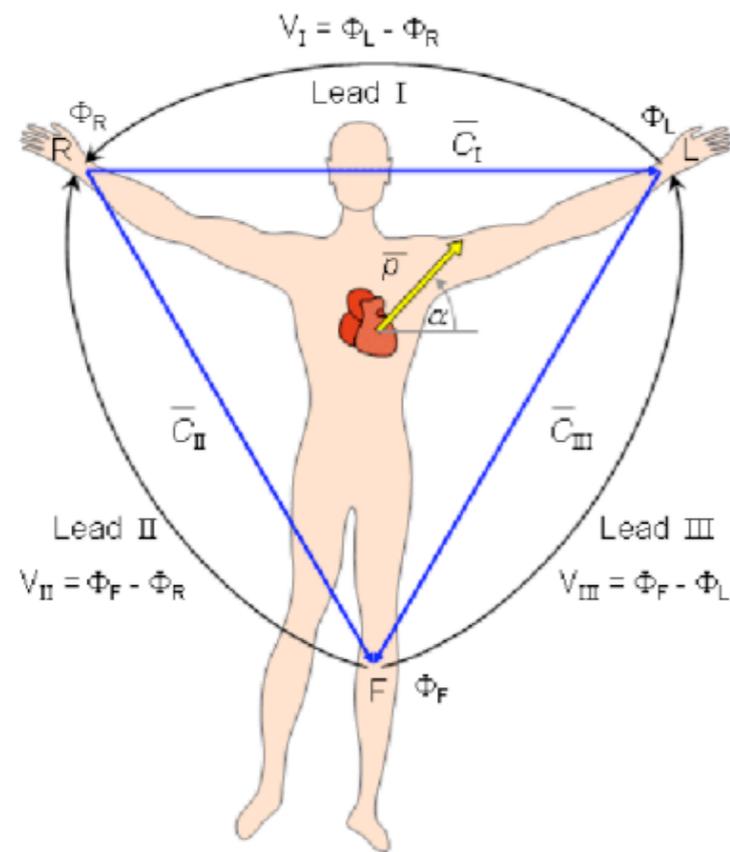


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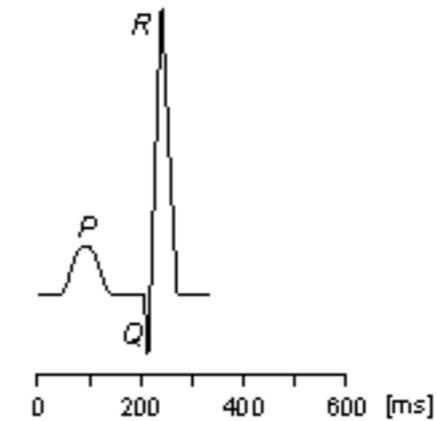
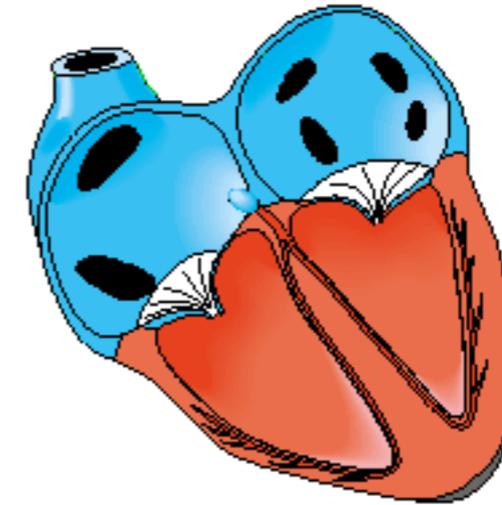
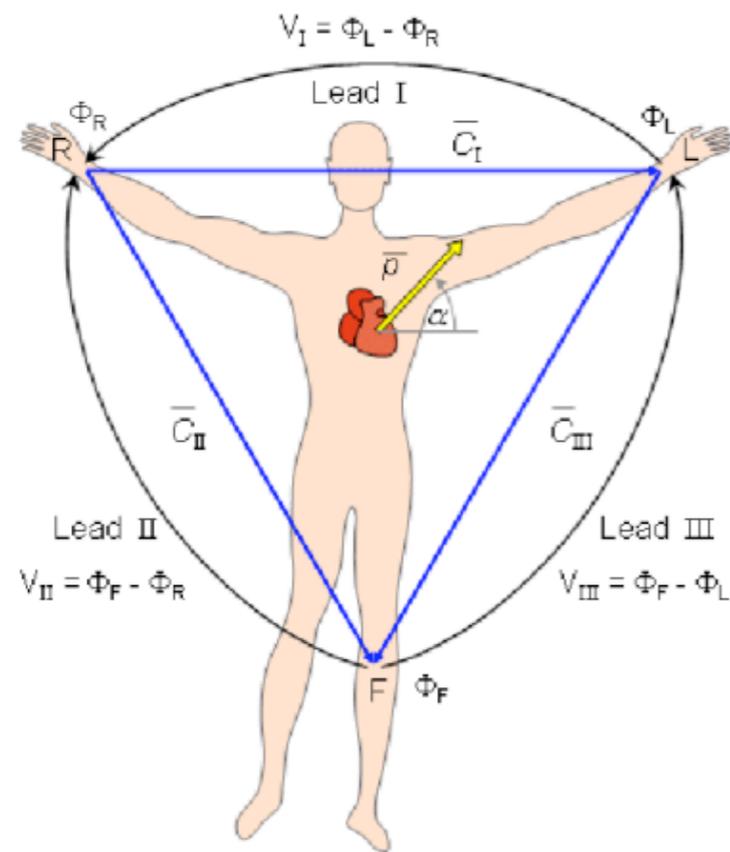


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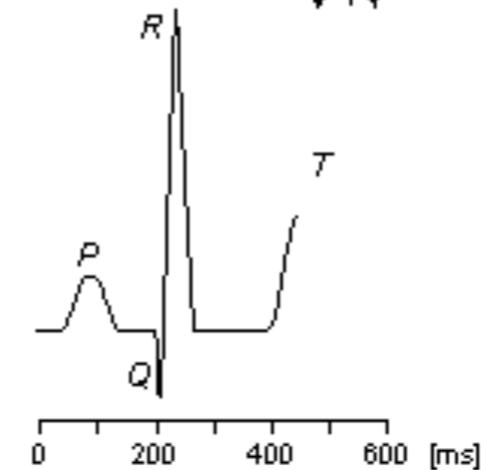
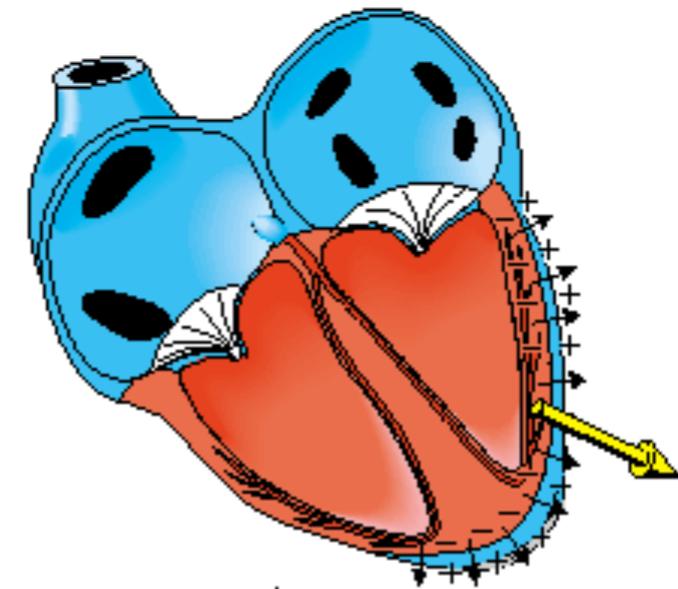
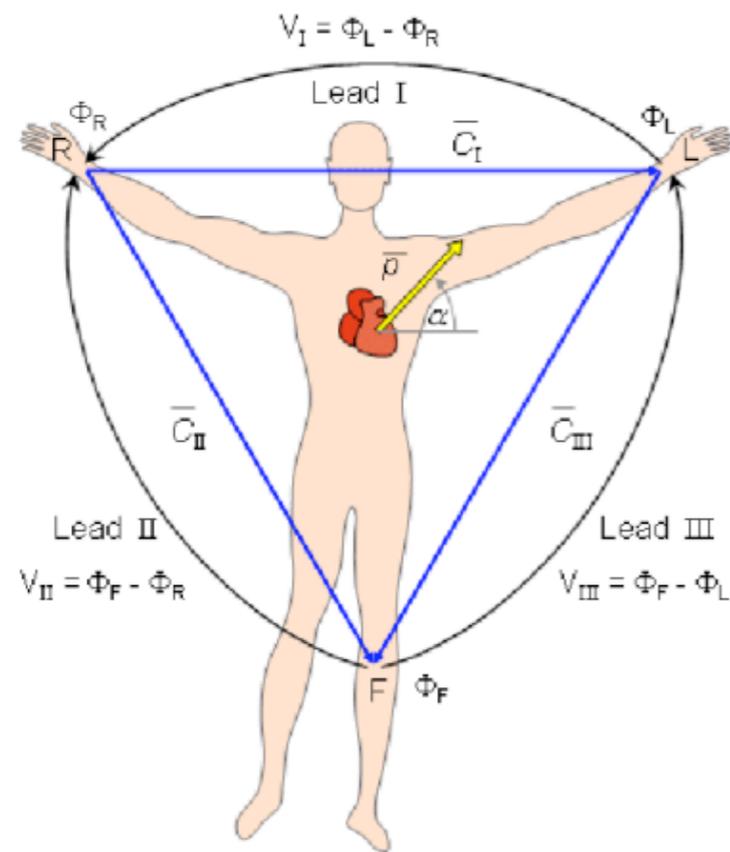


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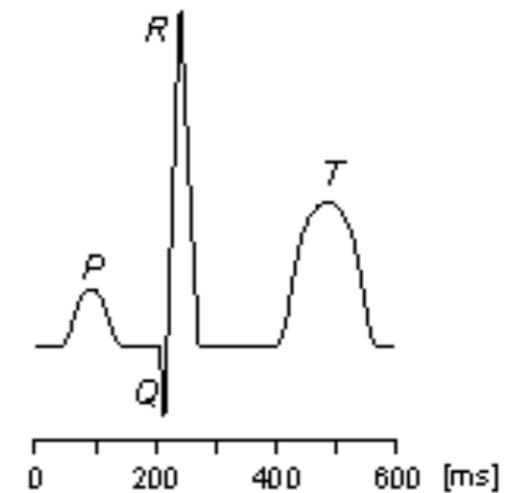
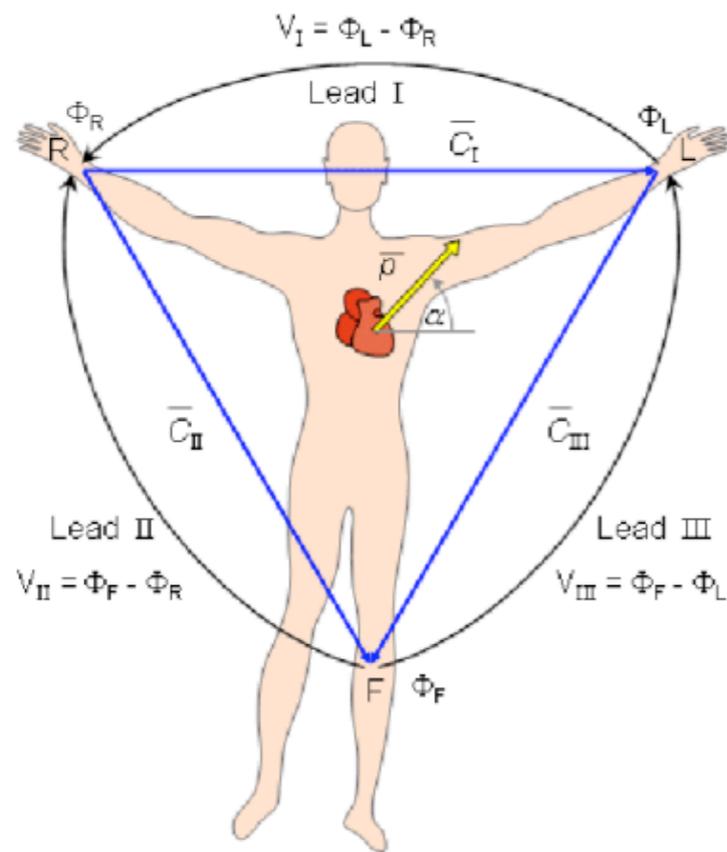


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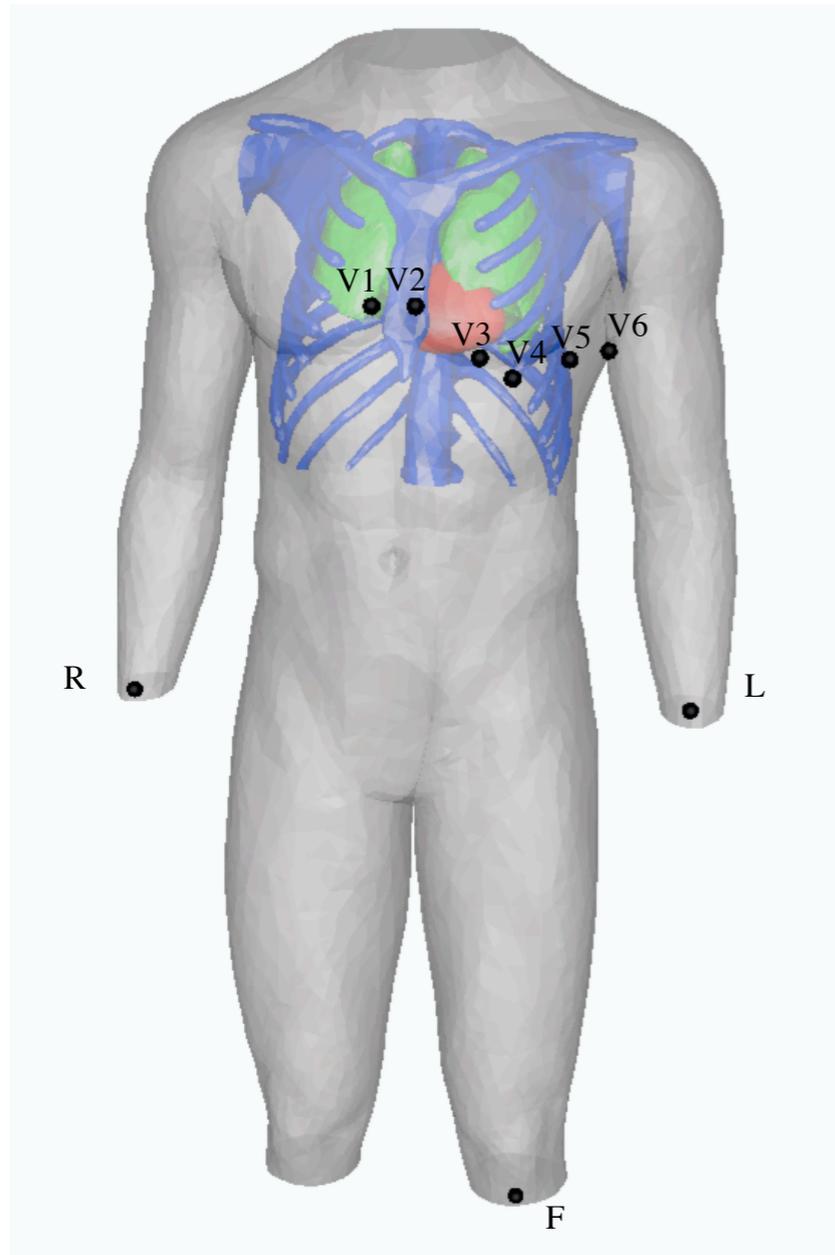
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12-lead electrocardiograms

12 measures of electrical potential on the body surface



$$\begin{aligned} \text{limb leads (Einthoven)} & \begin{cases} \text{I} = u_T(L) - u_T(R) \\ \text{II} = u_T(F) - u_T(R) \\ \text{III} = u_T(F) - u_T(L) \end{cases} \\ u_W & = (u_T(L) + u_T(R) + u_T(F))/3 \end{aligned}$$

$$\text{augmented leads} \begin{cases} \text{aVR} = \frac{3}{2}(u_T(R) - u_W) \\ \text{aVL} = \frac{3}{2}(u_T(L) - u_W) \\ \text{aVF} = \frac{3}{2}(u_T(F) - u_W) \end{cases}$$

$$\text{pre-cordial leads} \begin{cases} V_i = u_T(V_i) - u_W \\ i = 1, \dots, 6 \end{cases}$$

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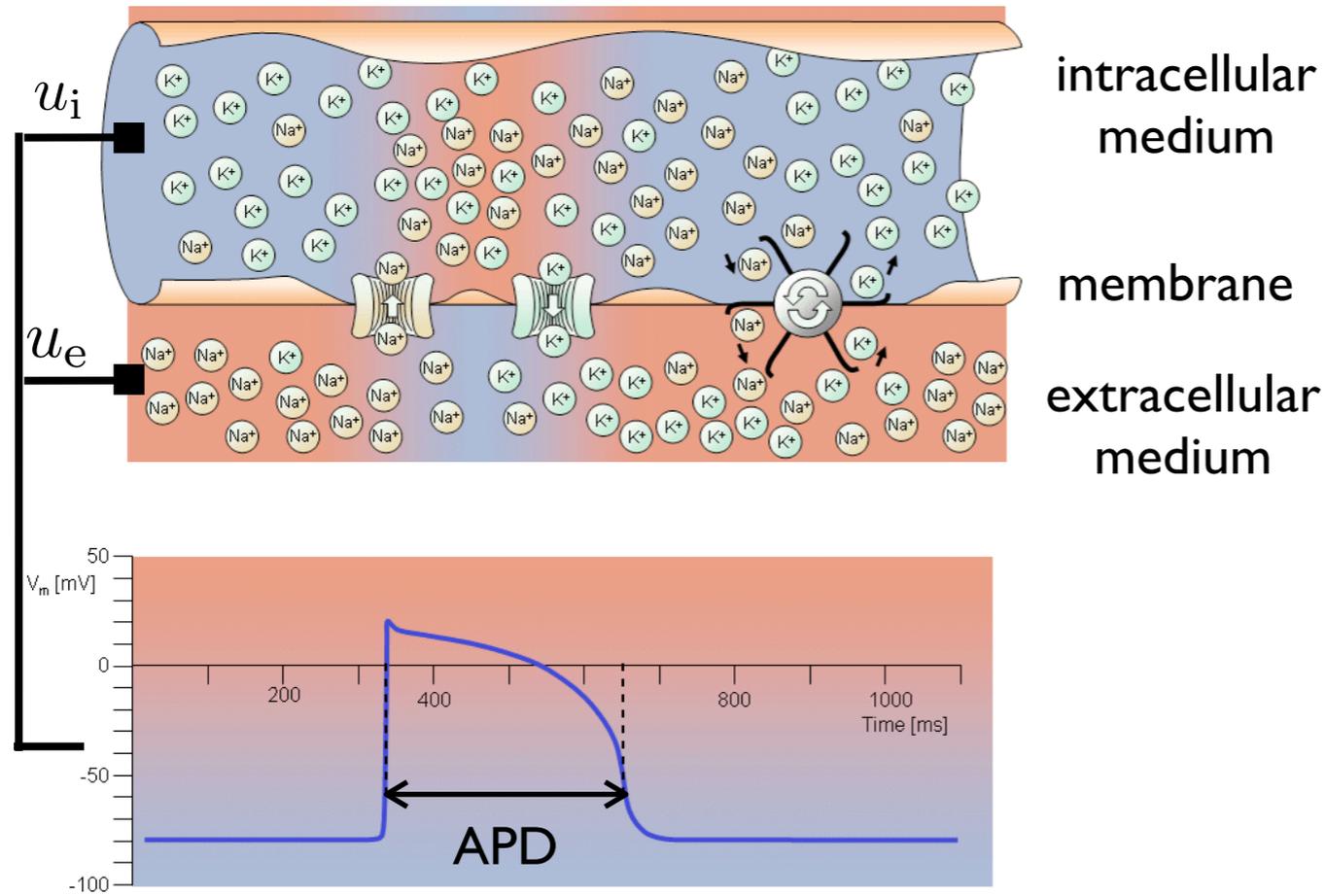
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Cell scale

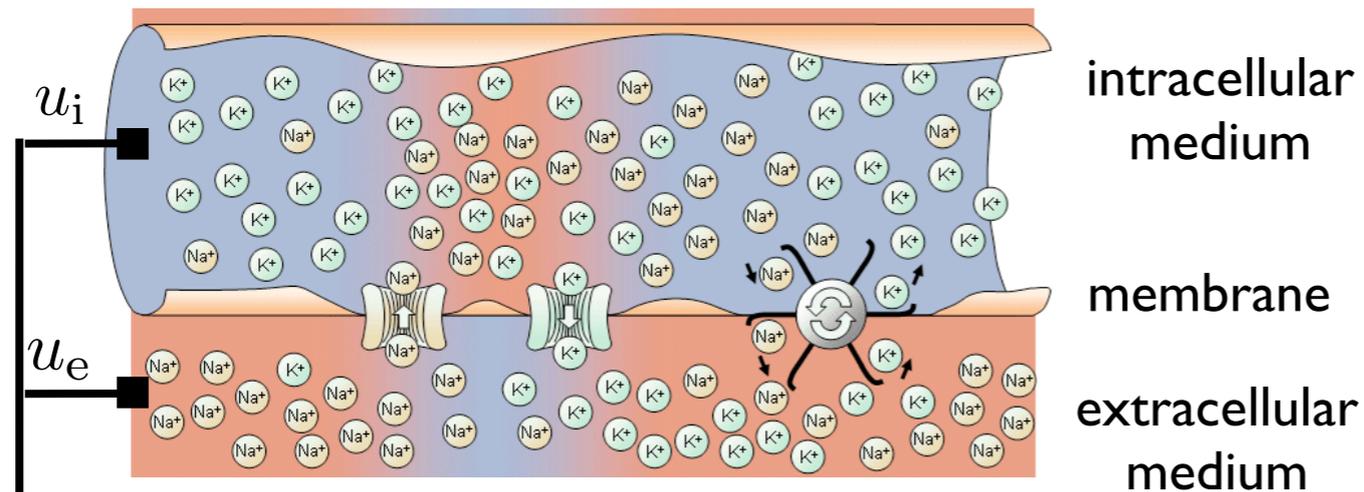


intra-cellular potential u_i

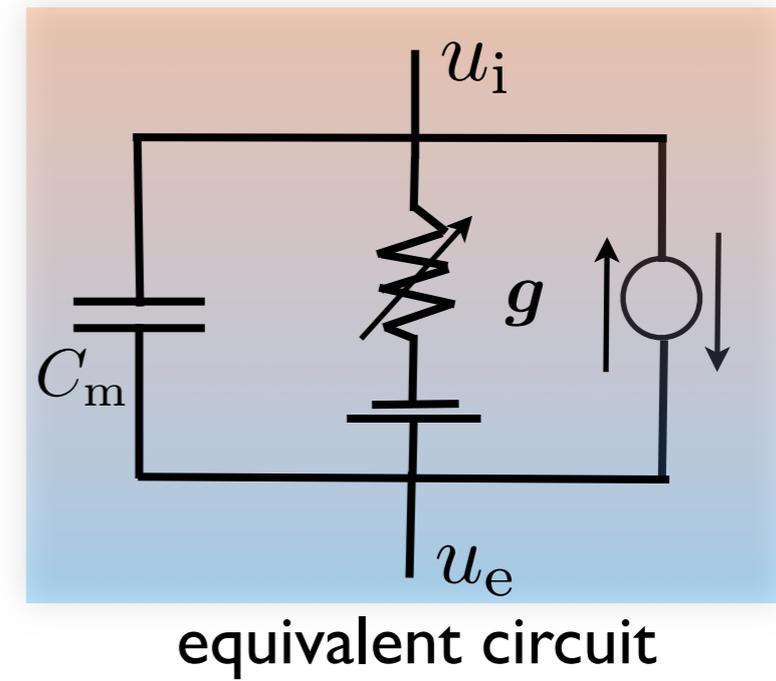
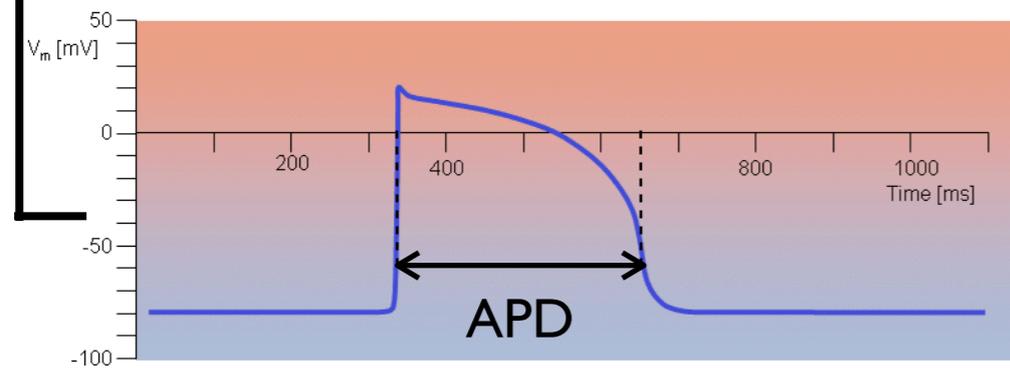
extra-cellular potential u_e

transmembrane potential $V_m = u_i - u_e$

Cell scale



intracellular medium
membrane
extracellular medium



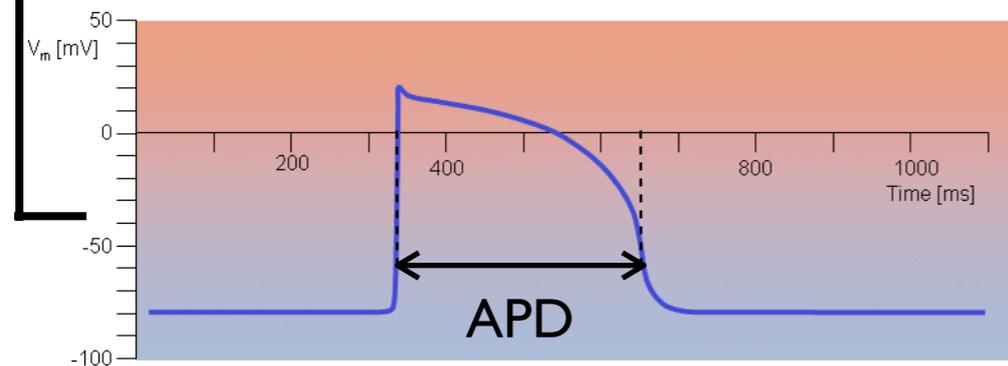
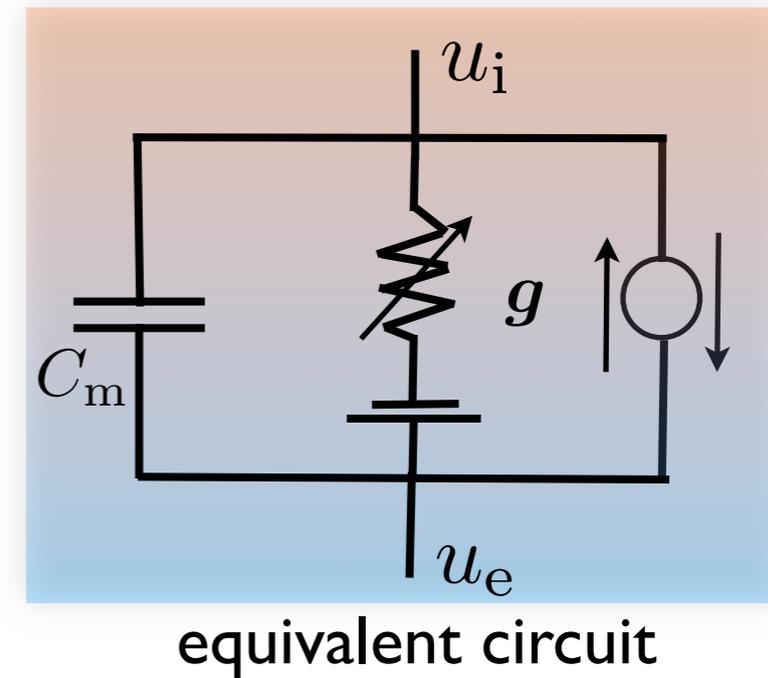
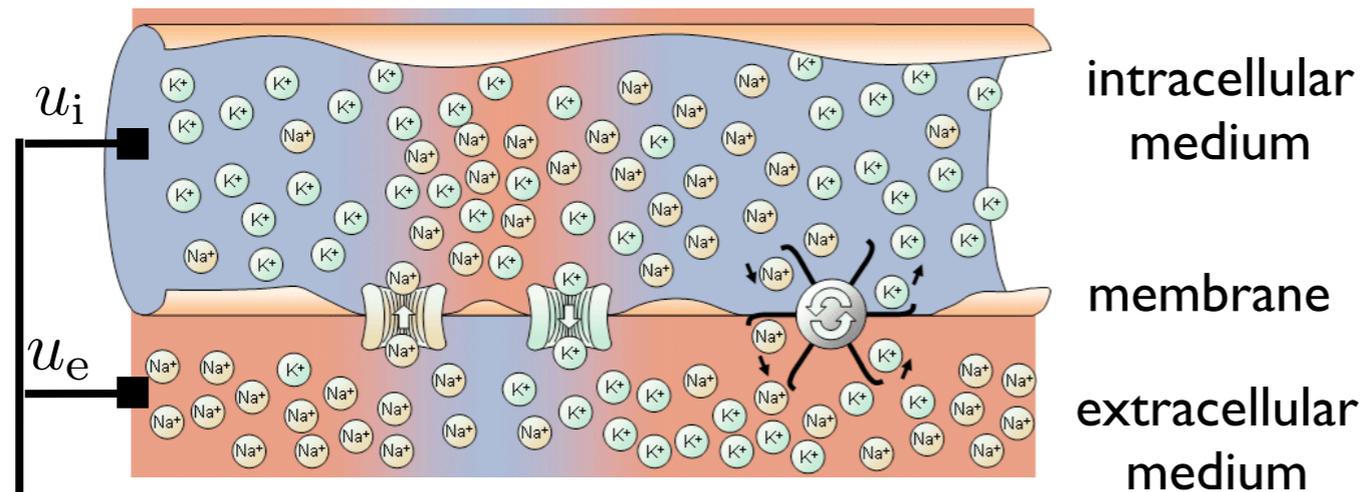
equivalent circuit

intra-cellular potential u_i

extra-cellular potential u_e

transmembrane potential $V_m = u_i - u_e$

Cell scale



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extra-cellular potential u_e

transmembrane potential $V_m = u_i - u_e$

$$\begin{cases} C_m \frac{dV_m}{dt} + I_{\text{ion}}(V_m, \mathbf{g}) = 0 \\ \frac{d\mathbf{g}}{dt} + G(V_m, \mathbf{g}) = 0 \end{cases}$$

(Hodkin-Huxley 52, Cronin 81, Pullan et al. 05, Sundes et al. 06,...)

Cell scale

Cell scale



Physiological models



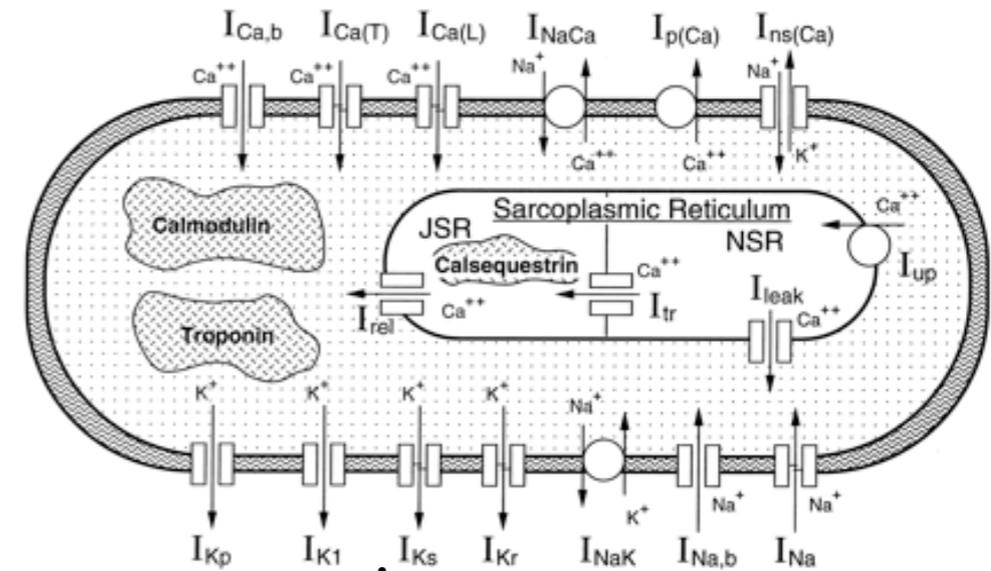
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28 models of cardiac cells !



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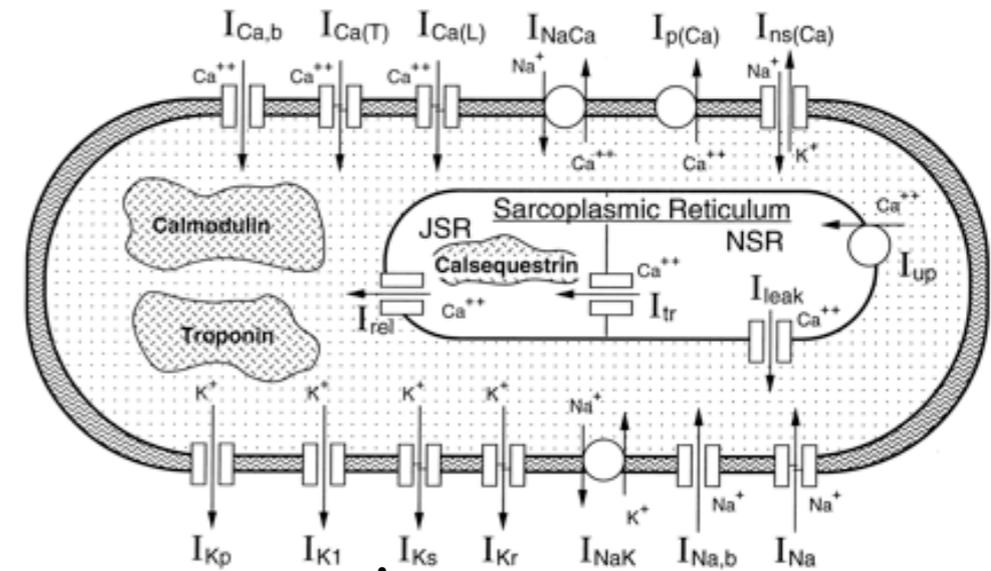
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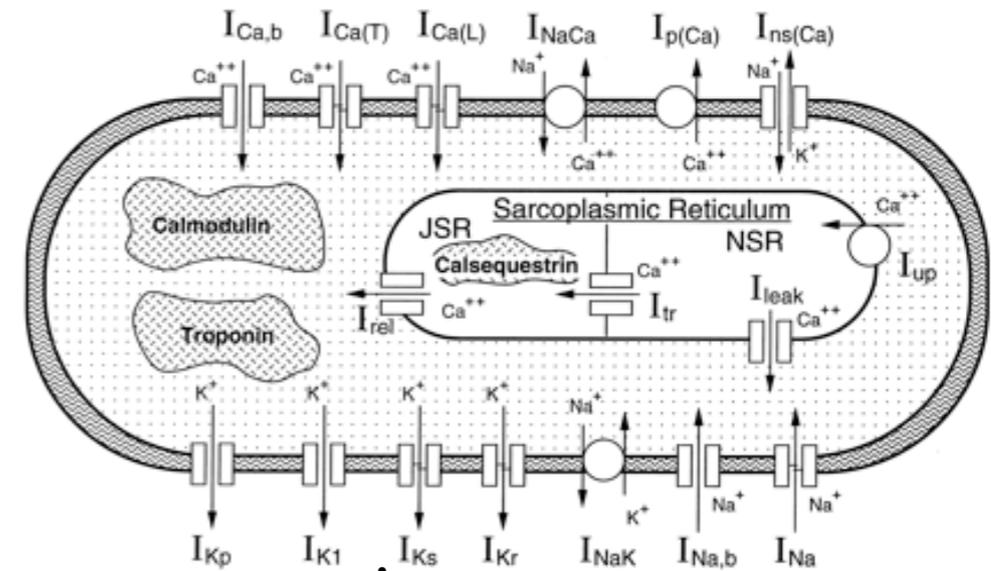


Phenomenological models

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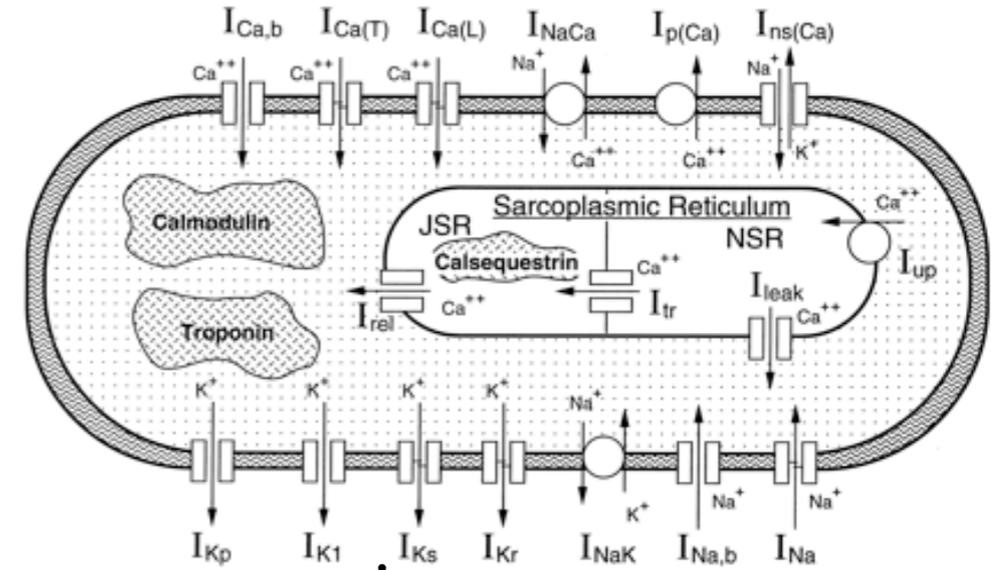
Phenomenological models

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Cell scale

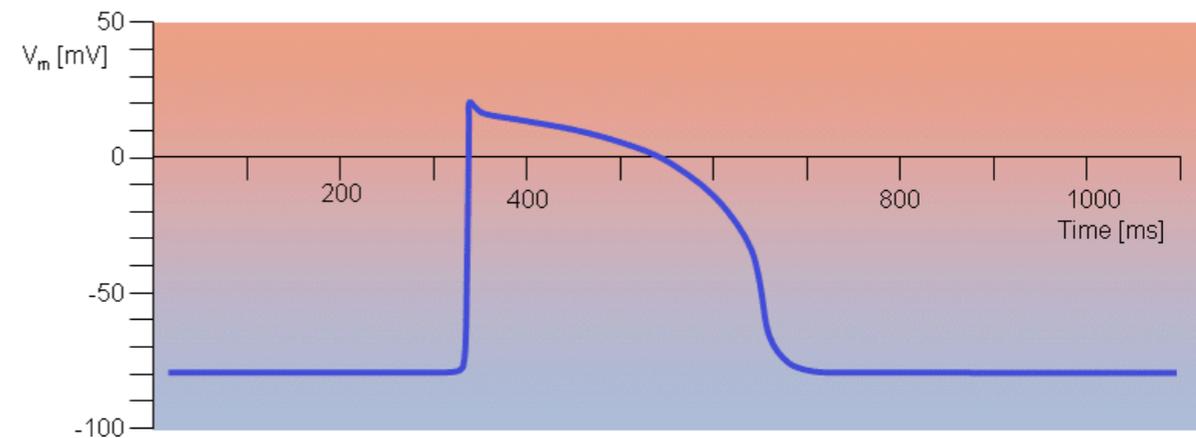
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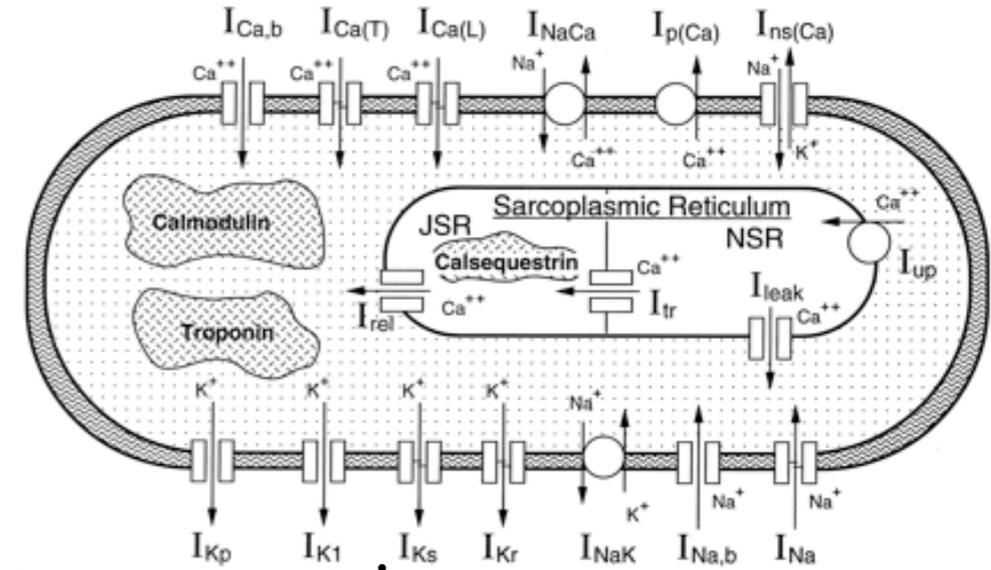
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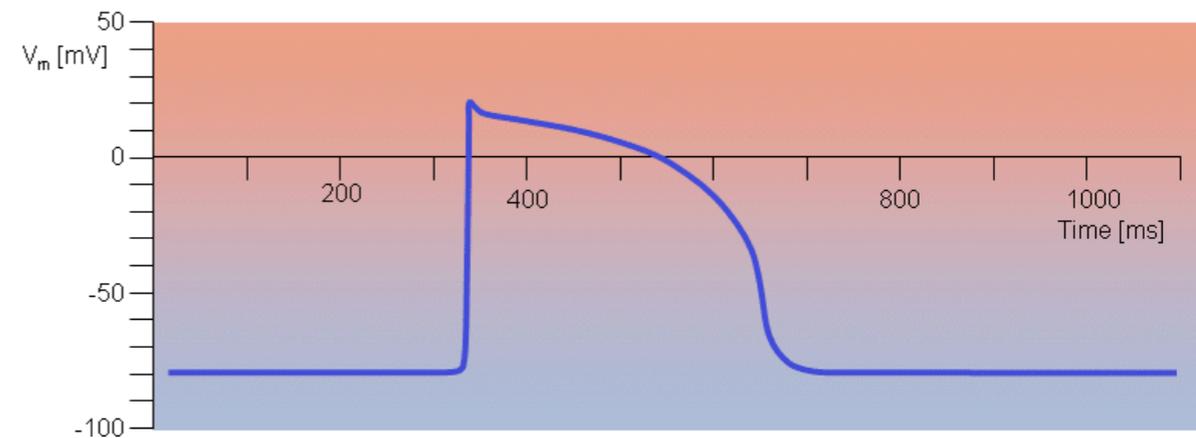
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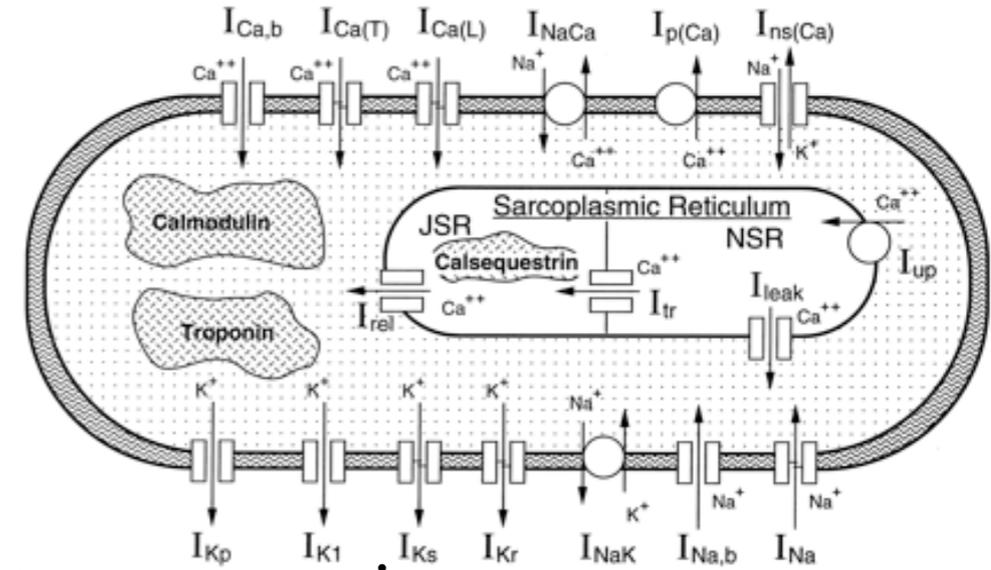
- The purpose is to reproduce the shape of the action potential:
- Typically 2 or 4 state variables



Cell scale

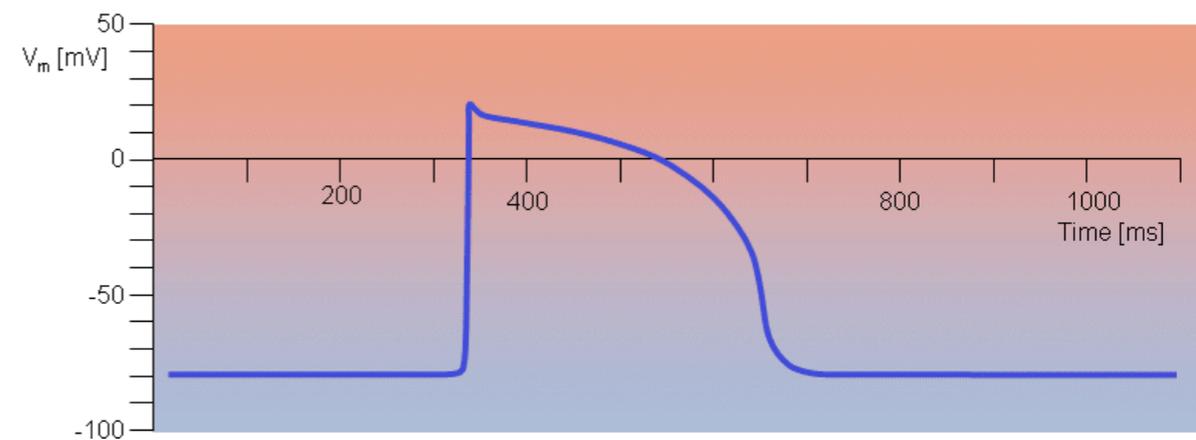
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- In *F. Sachse Springer 2004* : 28 models of cardiac cells !
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Phenomenological models

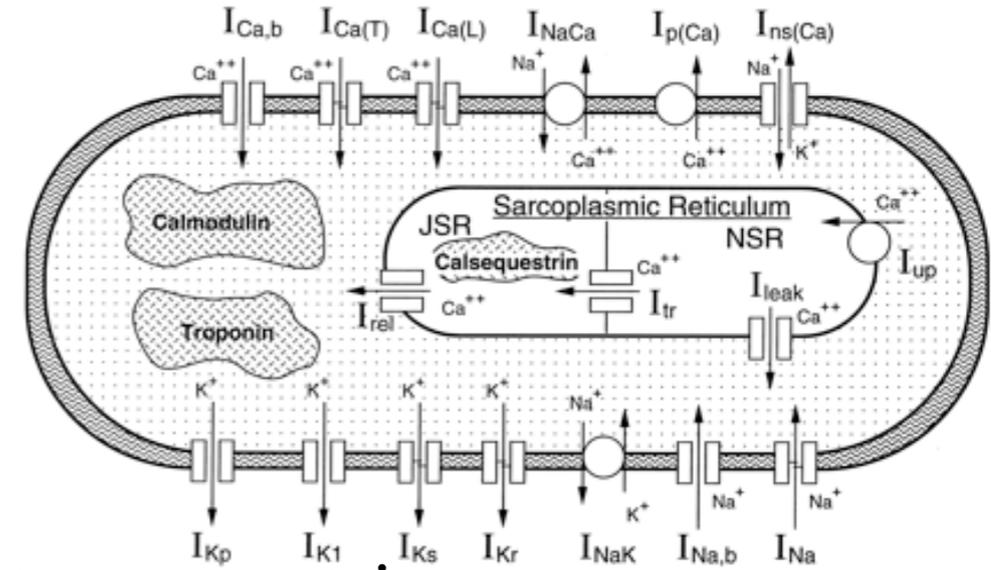
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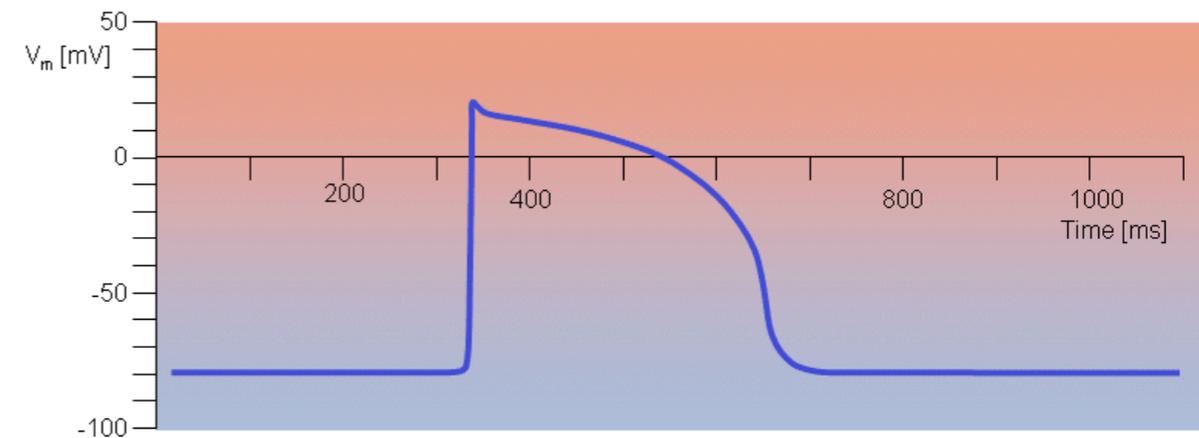
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Phenomenological models

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Fitzhugh-Nagumo model

$$\begin{cases} C_m \frac{dV_m}{dt} + I_{\text{ion}}(V_m, \mathbf{g}) = 0 \\ \frac{d\mathbf{g}}{dt} + G(V_m, \mathbf{g}) = \mathbf{0} \end{cases}$$

$$I_{\text{ion}}(V_m, g) = -V_m(V_m - a)(1 - V_m) + g,$$

$$G(V_m, g) = -\epsilon(V_m - \gamma g),$$

(Fitzhugh 1961)

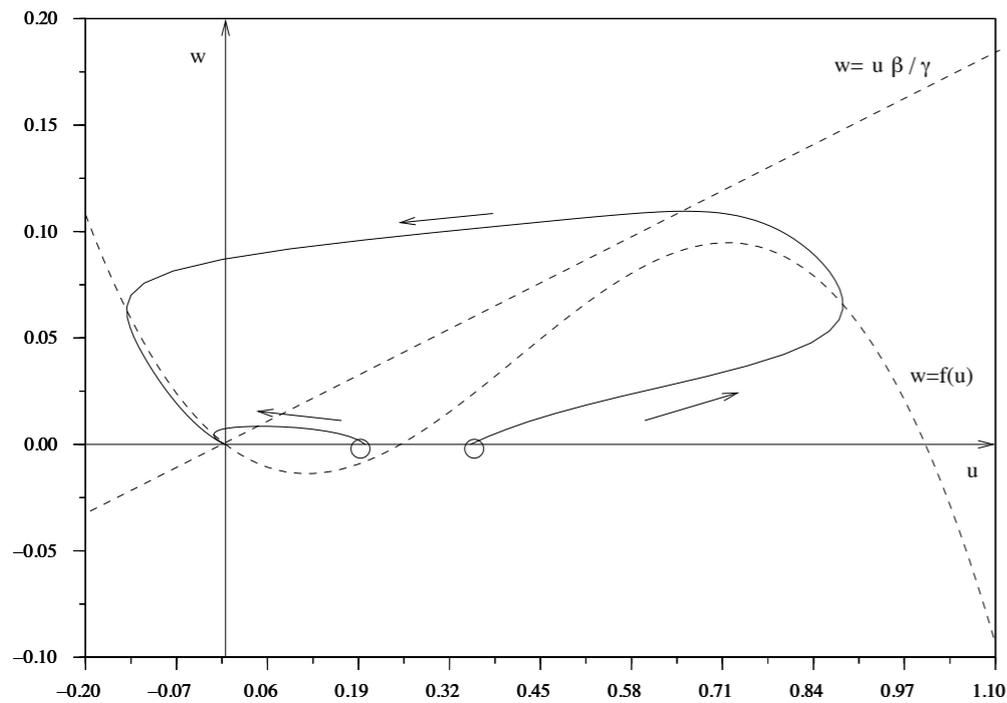
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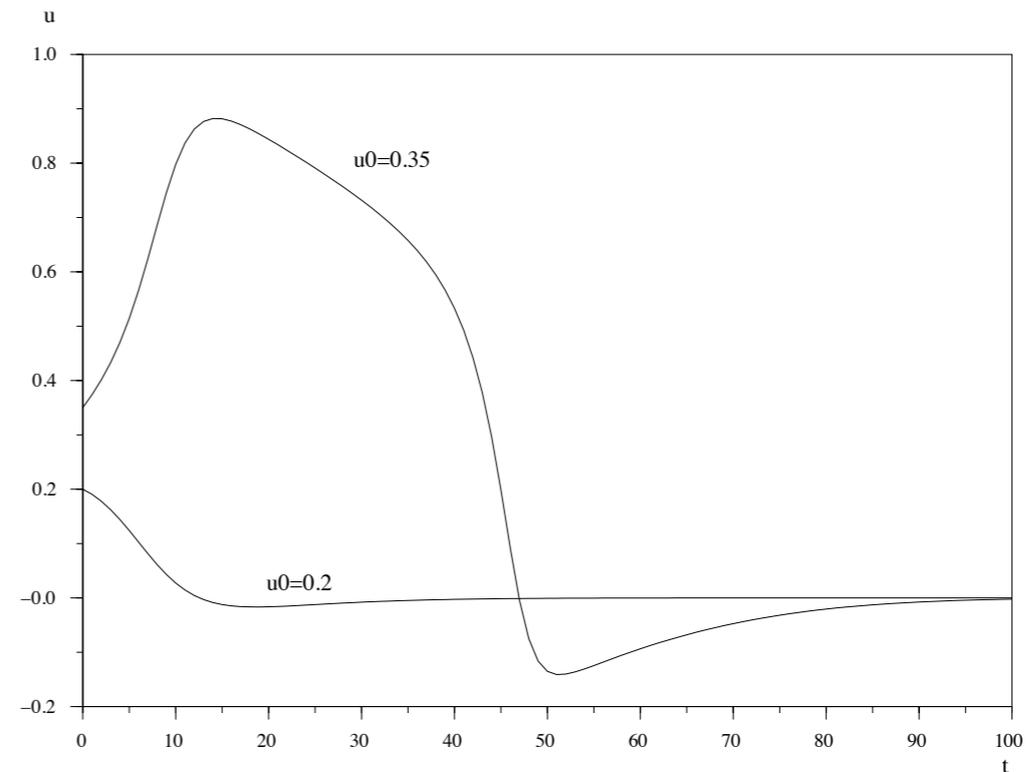
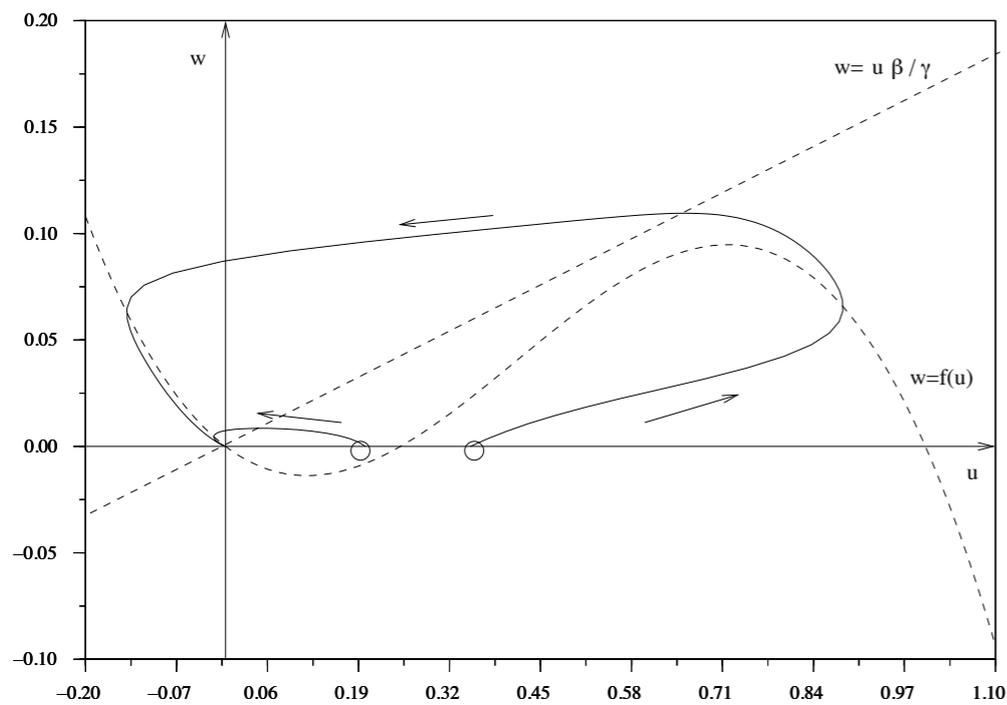
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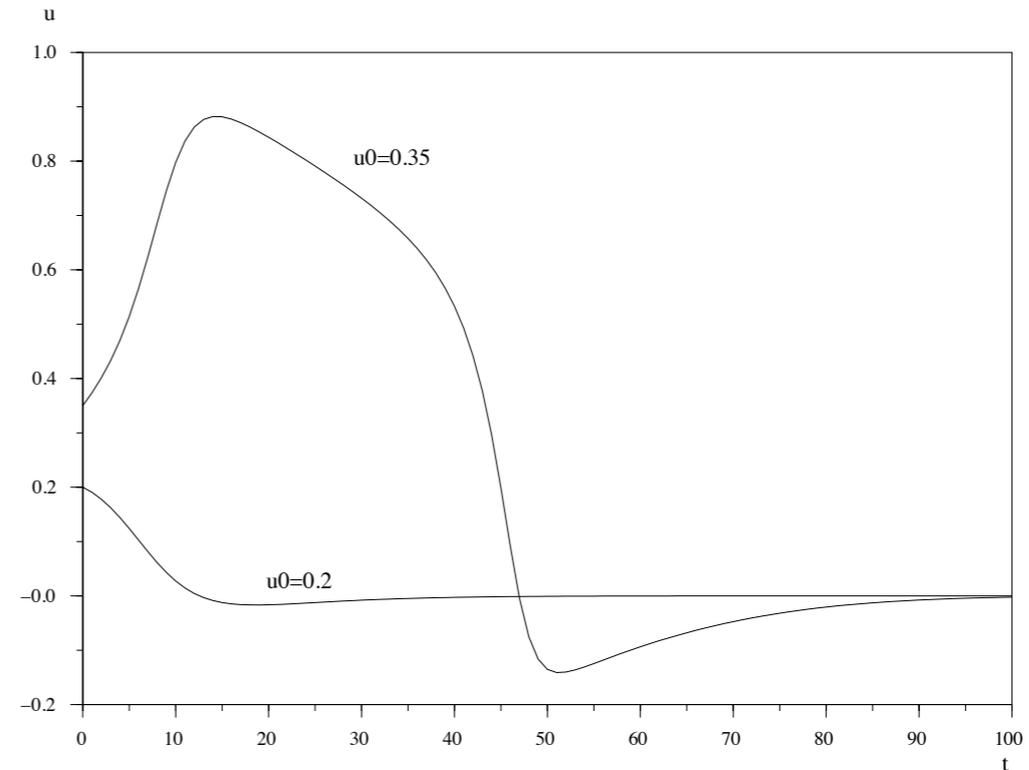
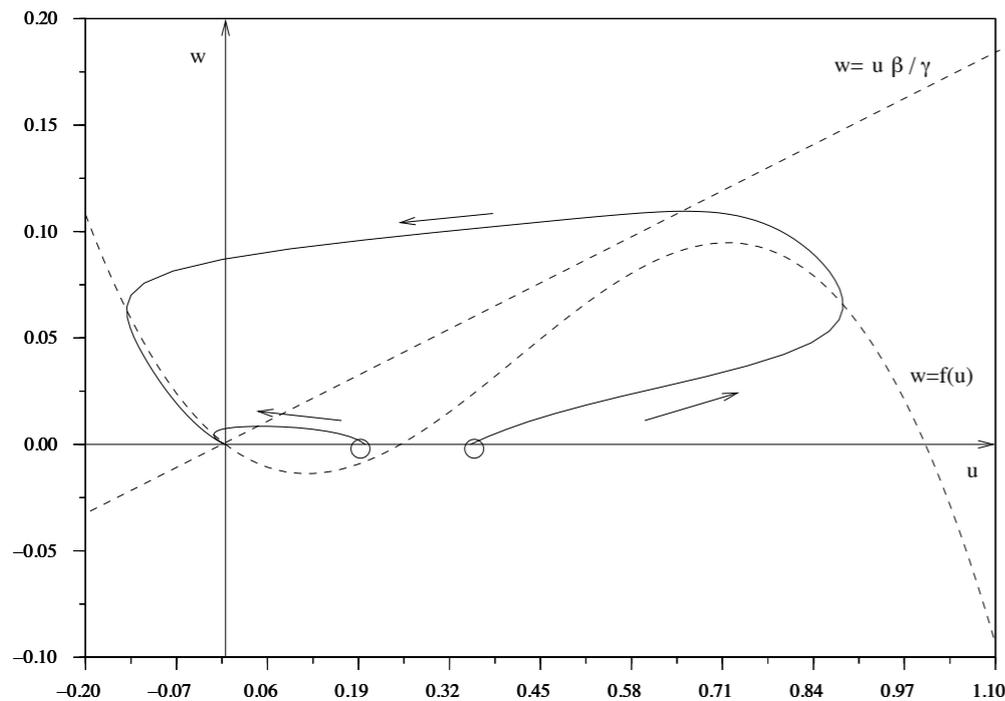
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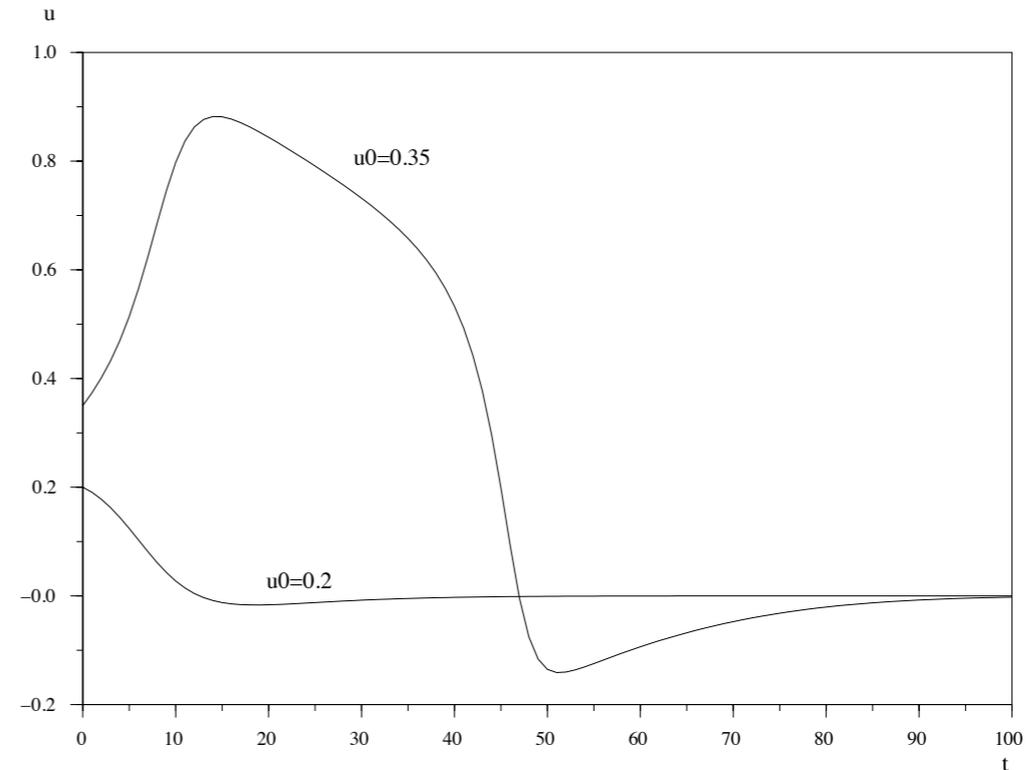
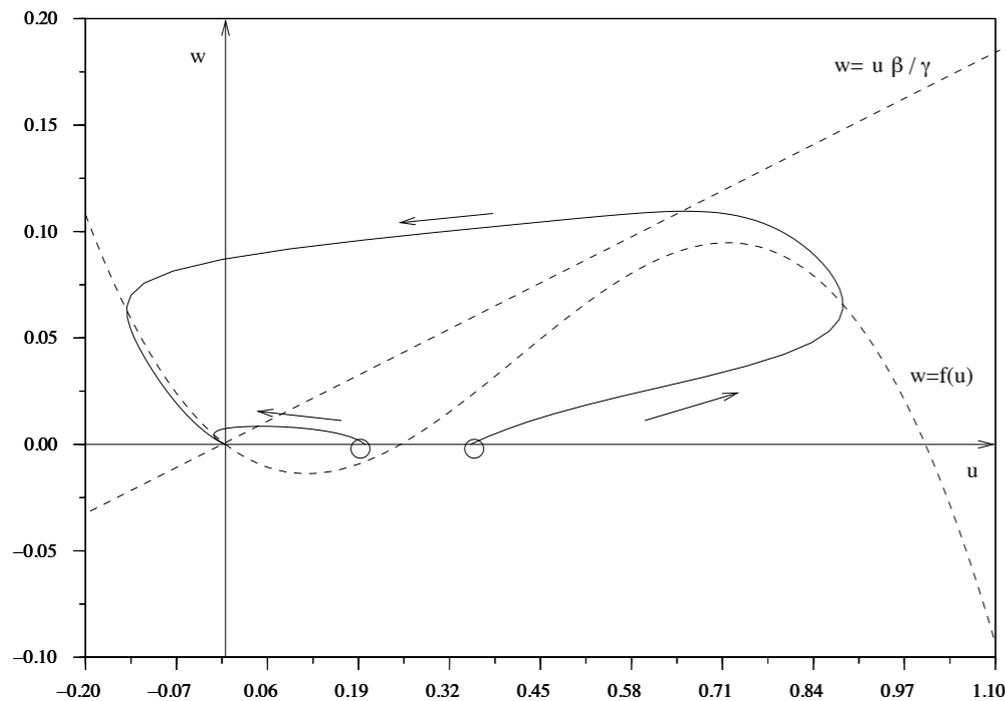
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- ✓ Difficult to set the four phases of the cardiac cycle
(initiation, plateau, decay, recovery)

Mitchell-Schaeffer's model

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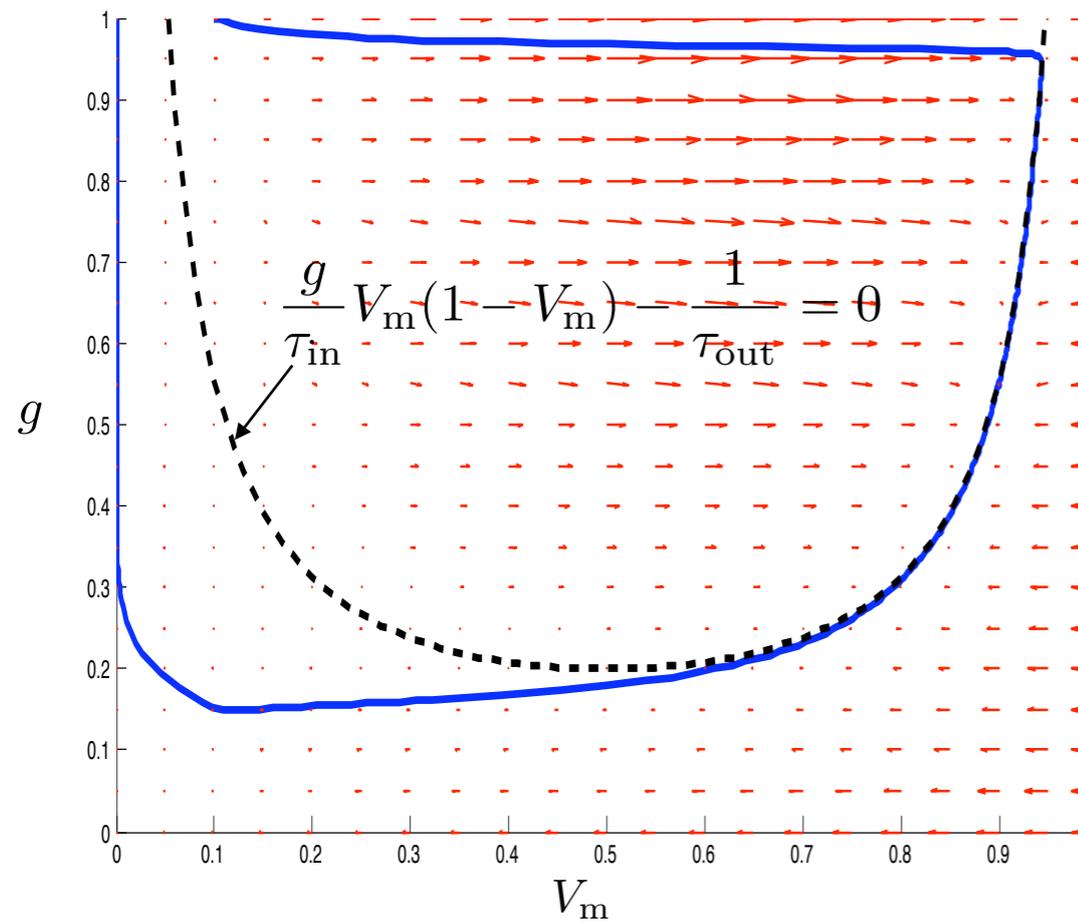
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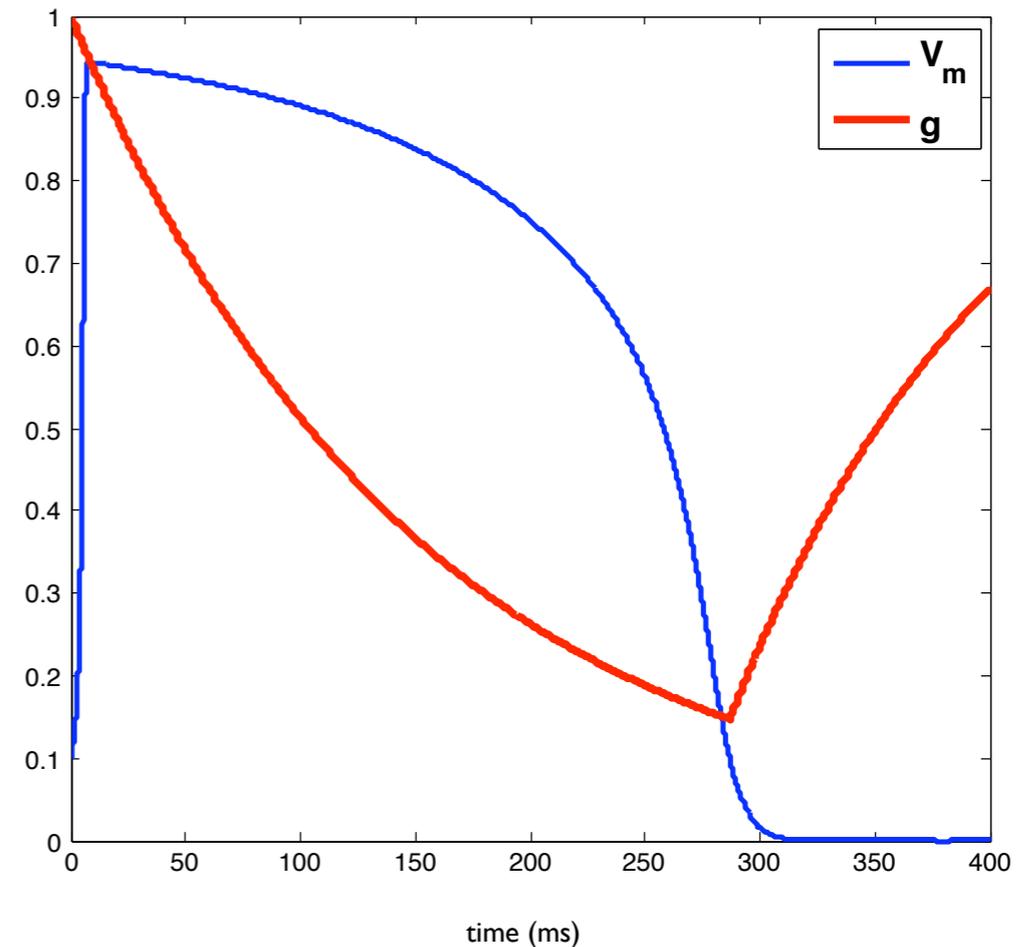
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✓ Ex: Action Potential Duration $APD \approx \tau_{\text{close}} \ln \left(\frac{\tau_{\text{out}}}{4\tau_{\text{in}}} \right)$

Mitchell-Schaeffer's Action Potential



phase Outlinee(V_m, g)

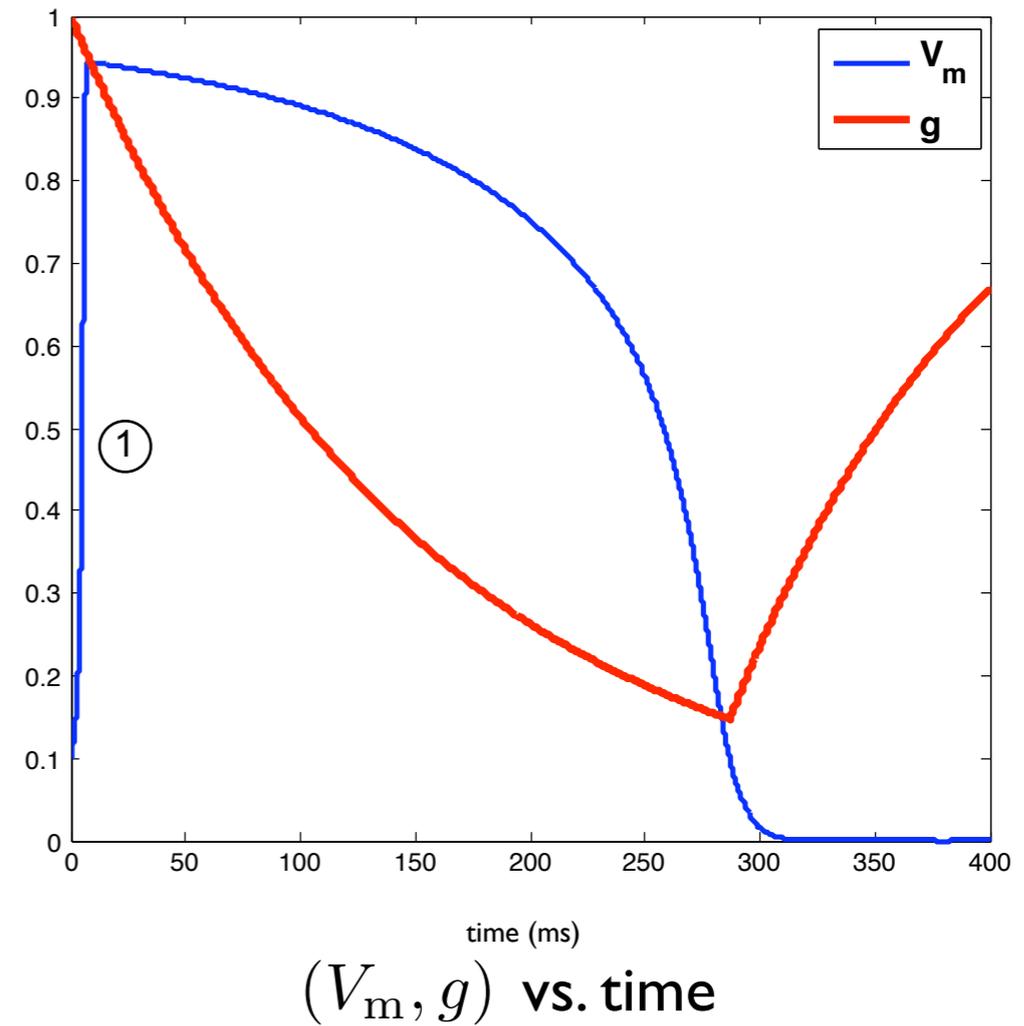
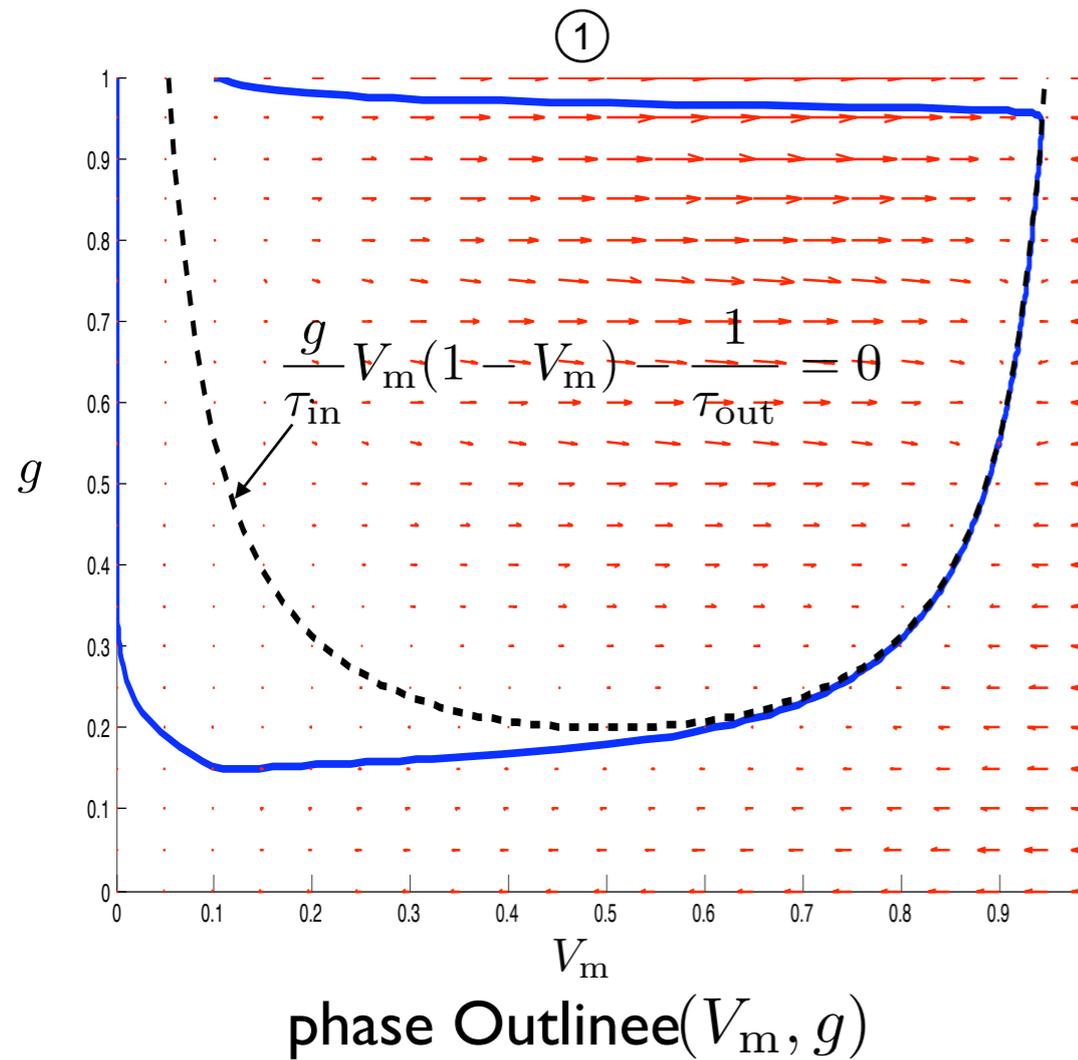


(V_m, g) vs. time

$$C_m \frac{dV_m}{dt} = \frac{g}{\tau_{in}} V_m^2 (1 - V_m) - \frac{V_m}{\tau_{out}}$$

$$\frac{dg}{dt} = \begin{cases} \frac{1-g}{\tau_{open}} & \text{if } V_m \leq V_{cr} \\ \frac{-g}{\tau_{close}} & \text{if } V_m > V_{cr} \end{cases}$$

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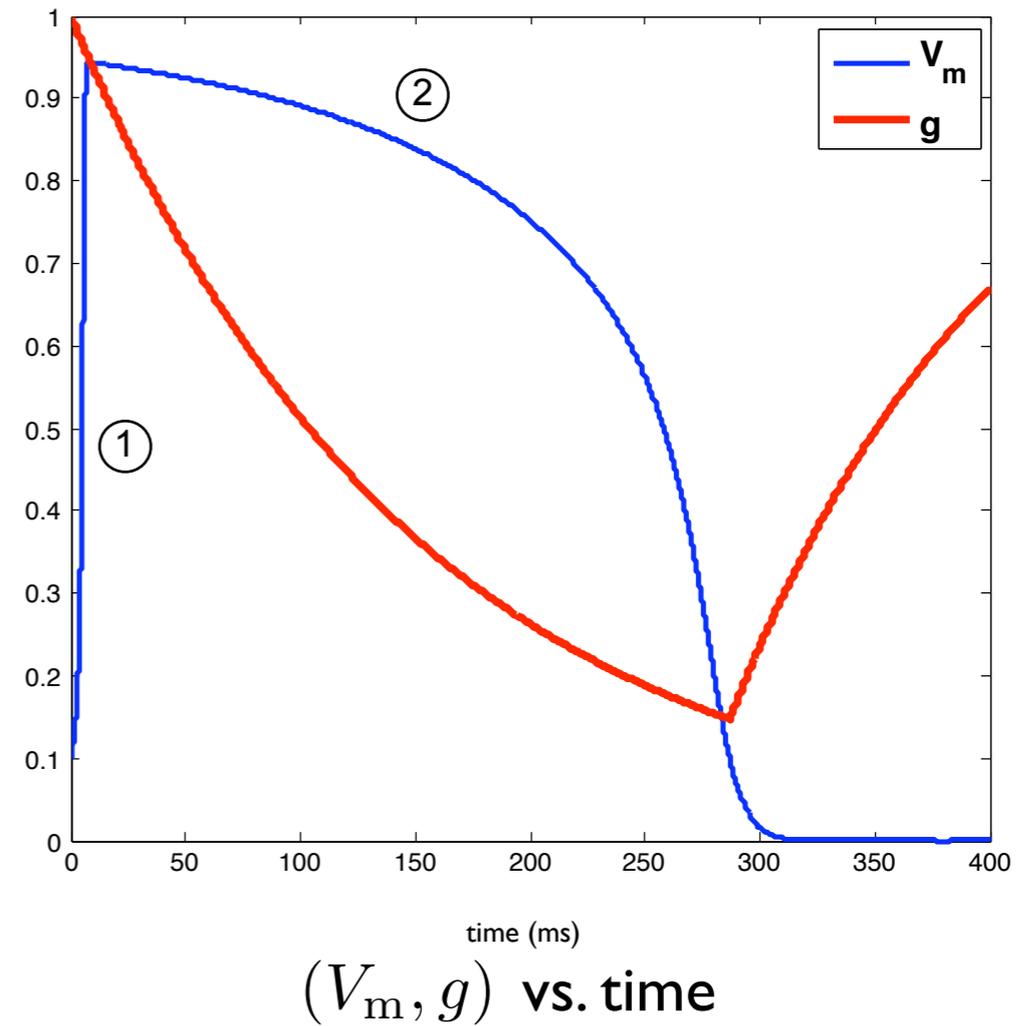
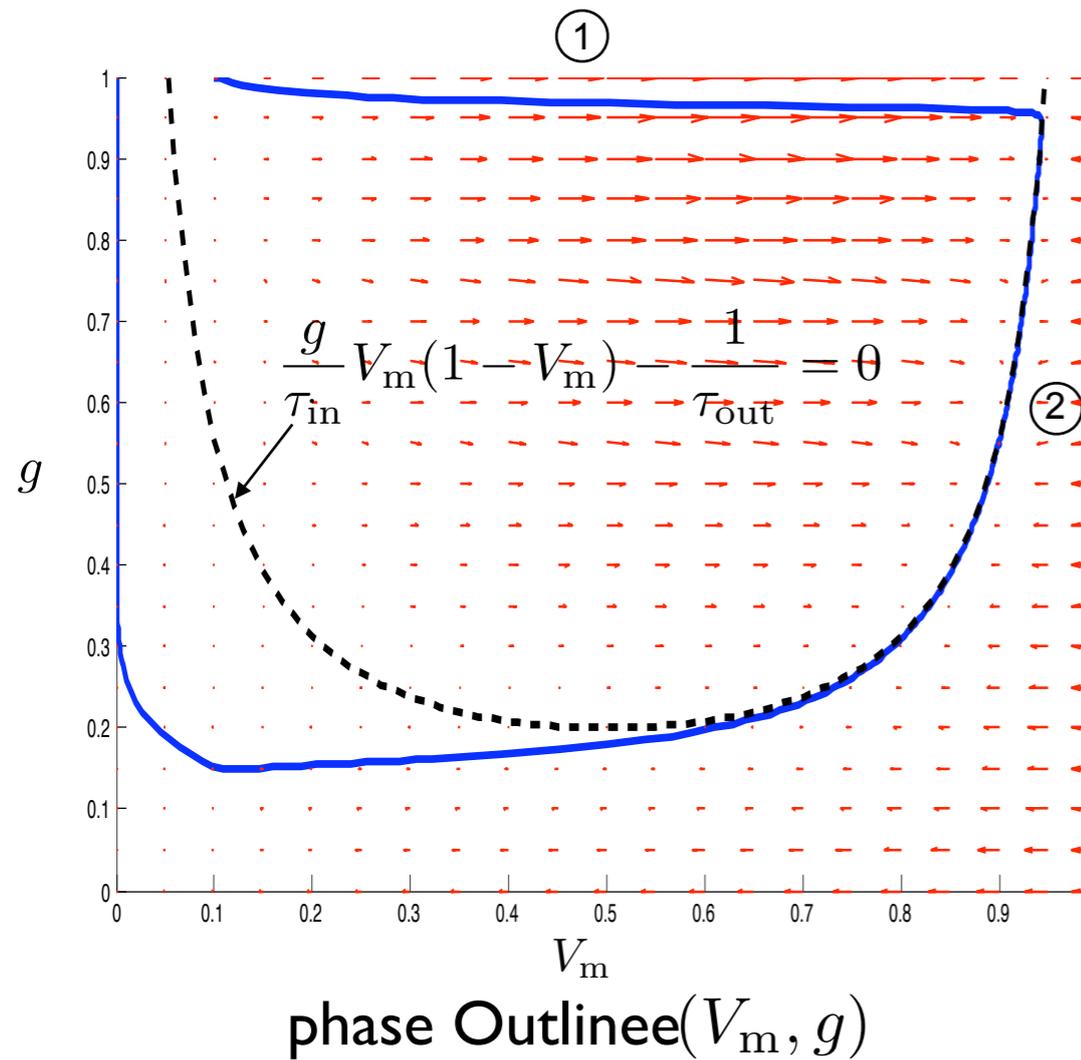


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① Depolarization (time scale τ_{in})

Mitchell-Schaeffer's Action Potential

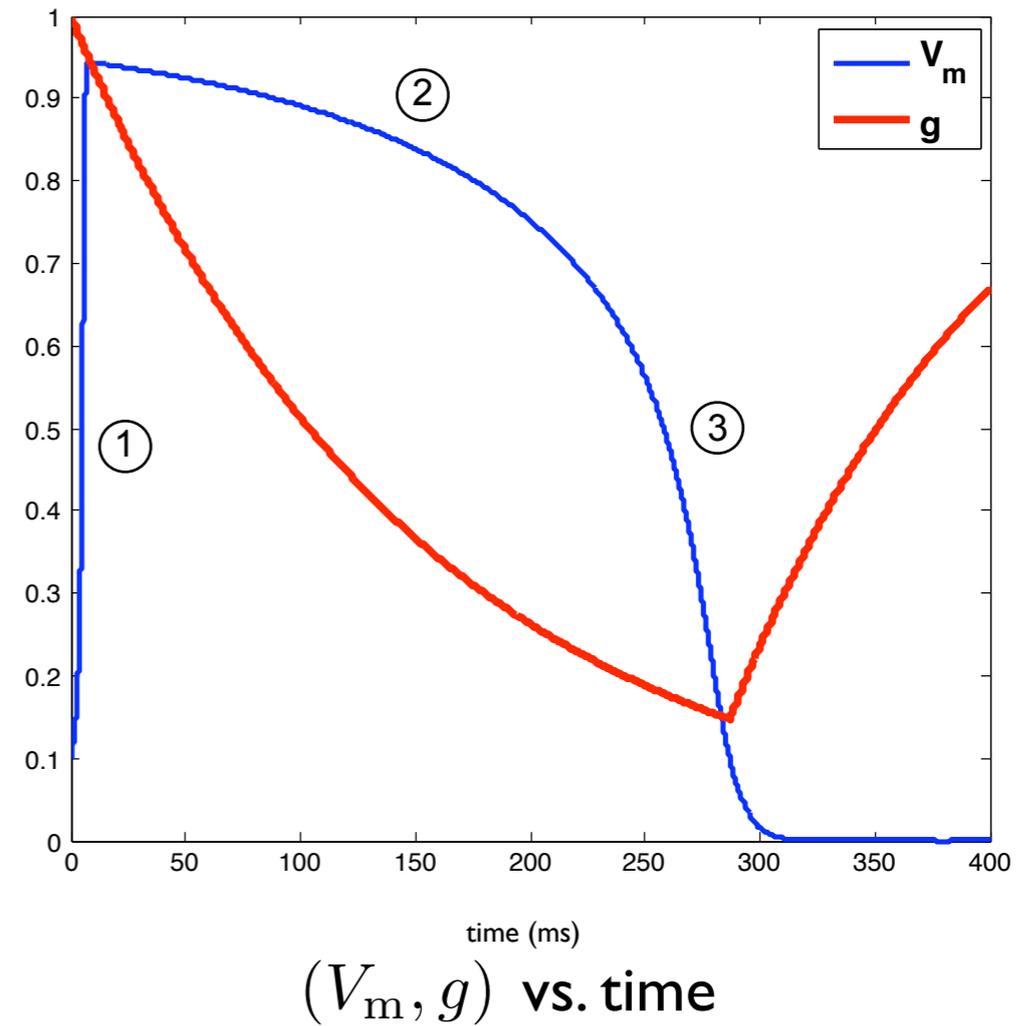
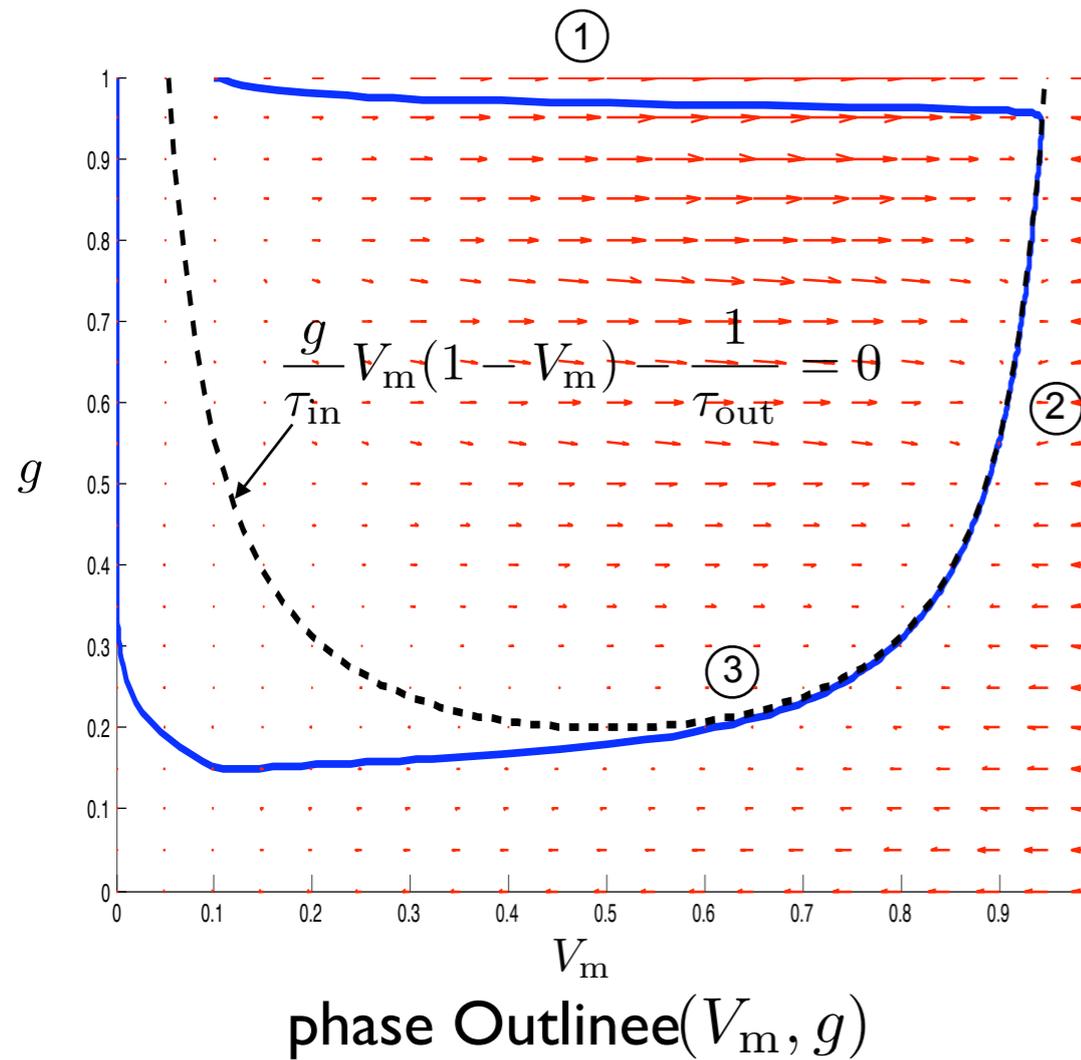


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- ① Depolarization (time scale τ_{in})
- ② Plateau phase (time scale τ_{close})

Mitchell-Schaeffer's Action Potential

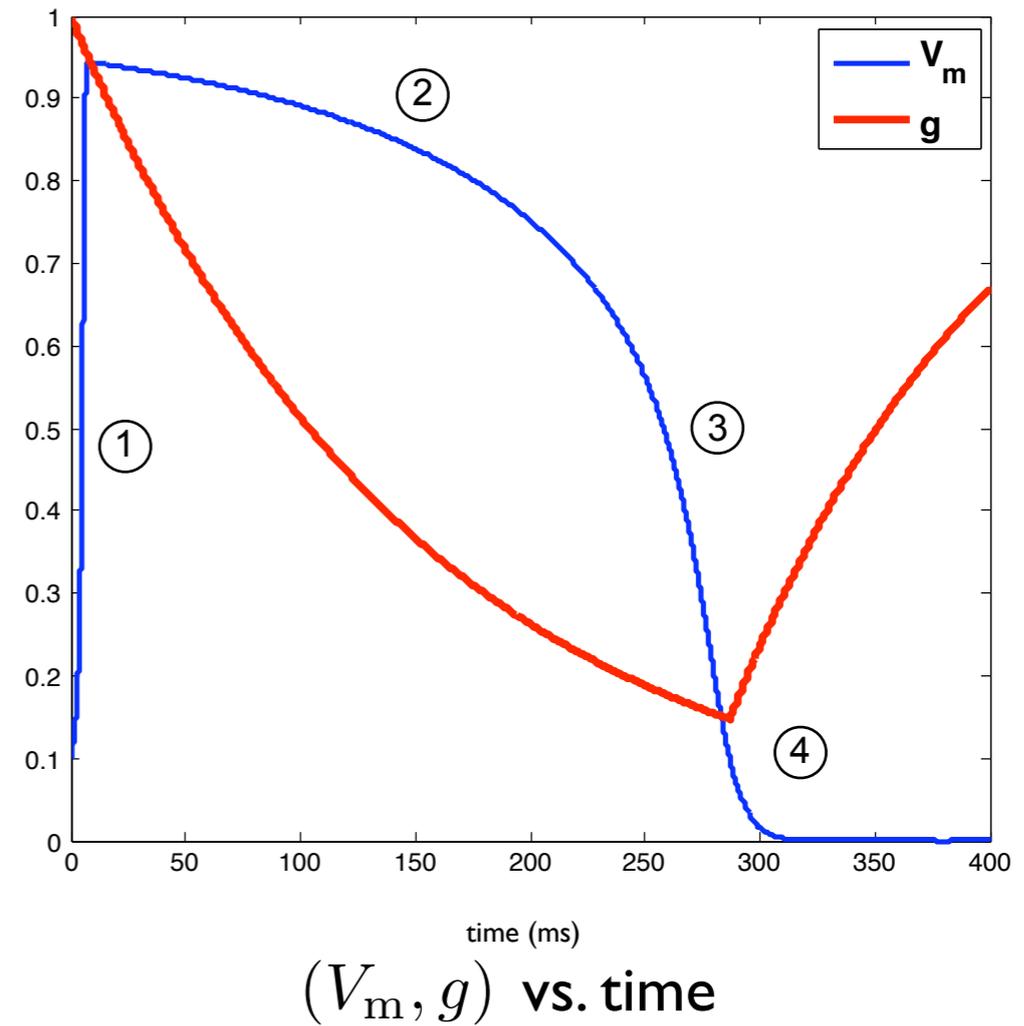
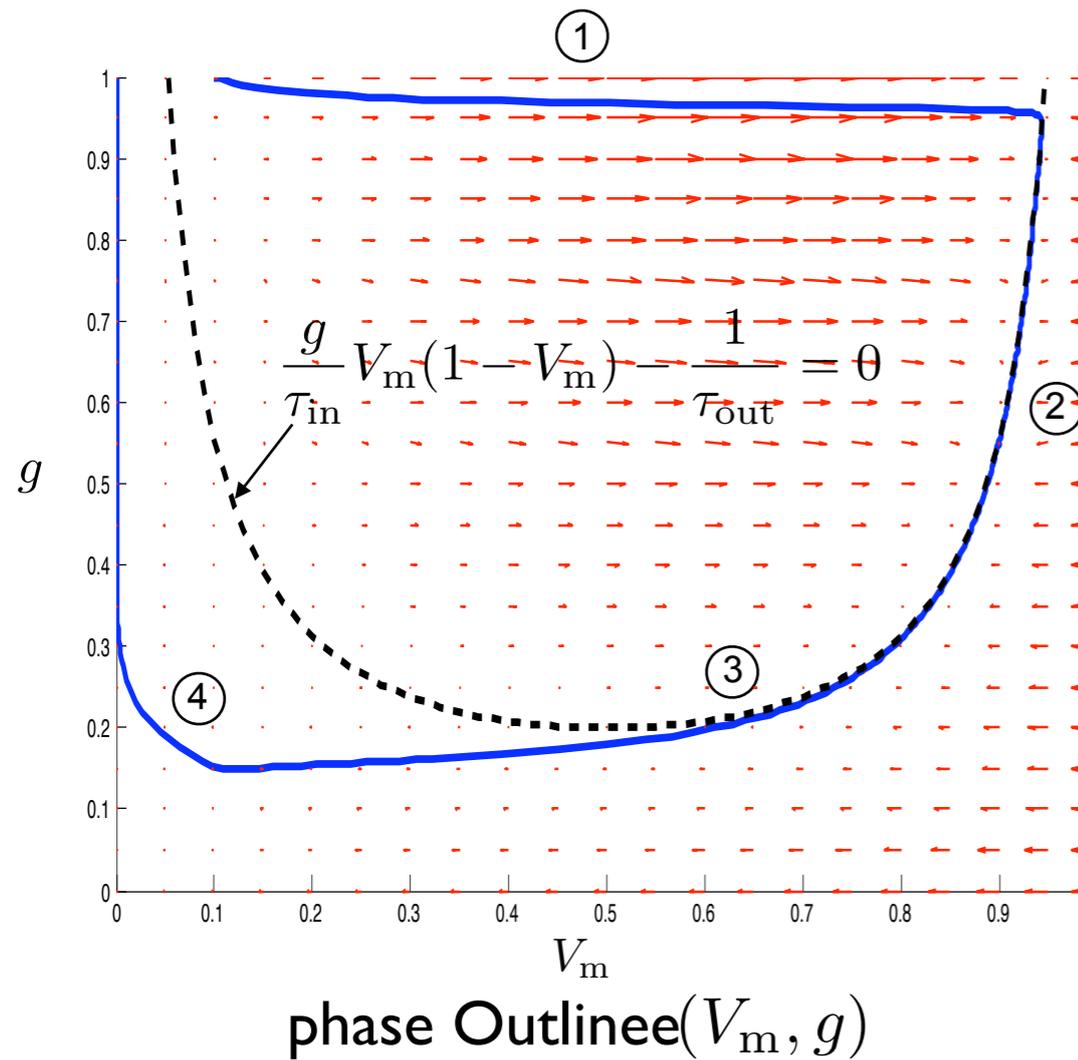


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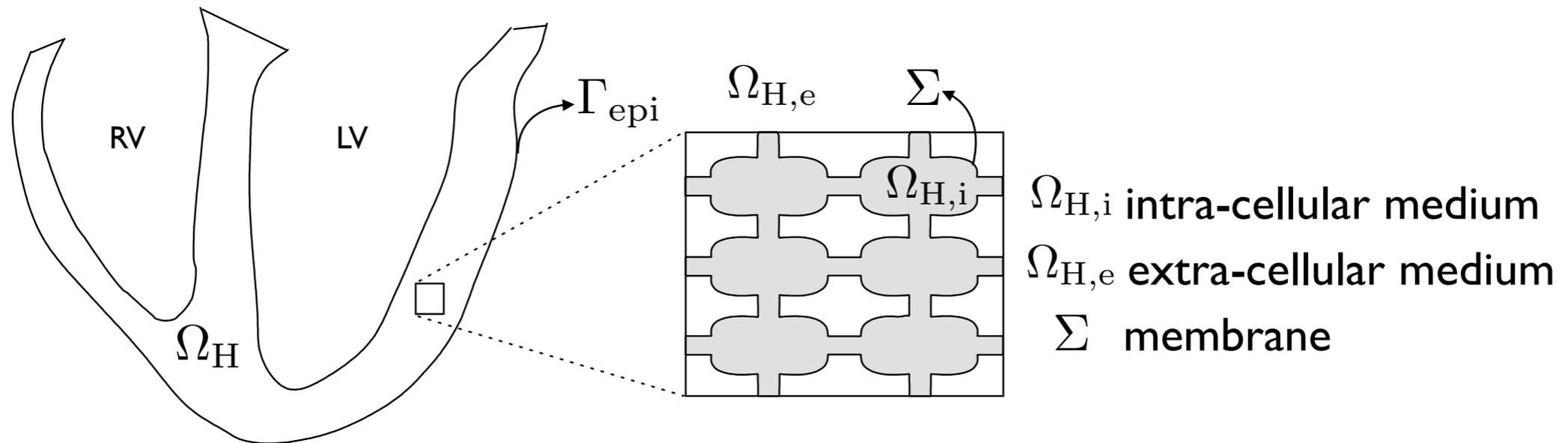
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- ② Plateau phase (time scale τ_{close})
- ③ Repolarization (time scale τ_{out})
- ④ Recovery (time scale τ_{open})

Outline

- Electrical activity of the heart
 - Electrocardiograms (ECG)
 - Cell scale
 - **Tissue scale : the bidomain equations**
 - ECG simulation
- Applications
 - Cardiac Resynchronisation Therapy
 - MRI, Magnetohydrodynamics & ECG

Tissue scale



σ_i, σ_e intra and extra-cellular conductivity

Electrical balance

$$\operatorname{div}(\sigma_i \nabla u_i) = 0, \quad \text{in } \Omega_{H,i}$$

$$\operatorname{div}(\sigma_e \nabla u_e) = 0, \quad \text{in } \Omega_{H,e}$$

$$\left. \begin{aligned} \sigma_i \nabla u_i \cdot \mathbf{n} &= \sigma_e \nabla u_e \cdot \mathbf{n} \\ \sigma_i \nabla u_i \cdot \mathbf{n} &= C_m \frac{\partial V_m}{\partial t} + I_{\text{ion}}(V_m, \mathbf{g}) \end{aligned} \right\} \quad \text{on } \Sigma$$

Tissue scale : homogenization

Microscopic scale

Tissue scale

(Tung 78, Krassowska-Neu 93, Colli Franzone-Savaré 02)

Tissue scale : homogenization

Microscopic scale

$$\Omega_{H,i} \text{ and } \Omega_{H,e}$$



Tissue scale

$$\Omega_H = \Omega_{H,i} = \Omega_{H,e}$$

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Tissue scale : homogenization

Microscopic scale

$$\Omega_{H,i} \text{ and } \Omega_{H,e}$$

$$\sigma_i \nabla \phi_i \cdot \mathbf{n} = \sigma_e \nabla \phi_e \cdot \mathbf{n}$$



Tissue scale

$$\Omega_H = \Omega_{H,i} = \Omega_{H,e}$$



$$-\operatorname{div}(\sigma_i \nabla \phi_i) = \operatorname{div}(\sigma_e \nabla \phi_e)$$

(Tung 78, Krassowska-Neu 93, Colli Franzone-Savaré 02)

Tissue scale : homogenization

Microscopic scale

$$\Omega_{H,i} \text{ and } \Omega_{H,e}$$

$$\sigma_i \nabla \phi_i \cdot \mathbf{n} = \sigma_e \nabla \phi_e \cdot \mathbf{n}$$

$$C_m \frac{\partial V_m}{\partial t} + I_{\text{ion}} = -\sigma_i \nabla \phi_i \cdot \mathbf{n}$$



Tissue scale

$$\Omega_H = \Omega_{H,i} = \Omega_{H,e}$$

$$-\text{div}(\sigma_i \nabla \phi_i) = \text{div}(\sigma_e \nabla \phi_e)$$

$$A_m \left(C_m \frac{\partial V_m}{\partial t} + I_{\text{ion}} \right) = \text{div}(\sigma_i \nabla \phi_i)$$

(Tung 78, Krassowska-Neu 93, Colli Franzone-Savaré 02)

Tissue scale

- Bidomain equations :

$$\left\{ \begin{array}{ll} A_m \left(C_m \frac{\partial V_m}{\partial t} + I_{\text{ion}}(V_m, \mathbf{g}) \right) - \text{div}(\boldsymbol{\sigma}_i \nabla u_i) = A_m I_{\text{app}}, & \text{in } \Omega_H \\ \text{div}(\boldsymbol{\sigma}_e \nabla u_e) = - \text{div}(\boldsymbol{\sigma}_i \nabla u_i), & \text{in } \Omega_H \\ \frac{\partial \mathbf{g}}{\partial t} + G(V_m, \mathbf{g}) = 0, & \text{in } \Omega_H \\ \boldsymbol{\sigma}_i \nabla u_i \cdot \mathbf{n} = 0, & \text{on } \Gamma_{\text{epi}} \\ \boldsymbol{\sigma}_e \nabla u_e \cdot \mathbf{n} = 0, & \text{on } \Gamma_{\text{epi}} \end{array} \right.$$

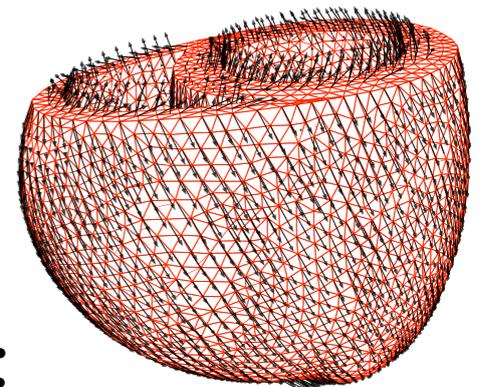
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- Anisotropic conductivity

$$\boldsymbol{\sigma}_{i,e}(x) = \sigma_{i,e}^t I + (\sigma_{i,e}^l - \sigma_{i,e}^t) \mathbf{a}(x) \otimes \mathbf{a}(x)$$



- If the anisotropy is the same in both media :
mono-domain equations

Heart-torso coupling

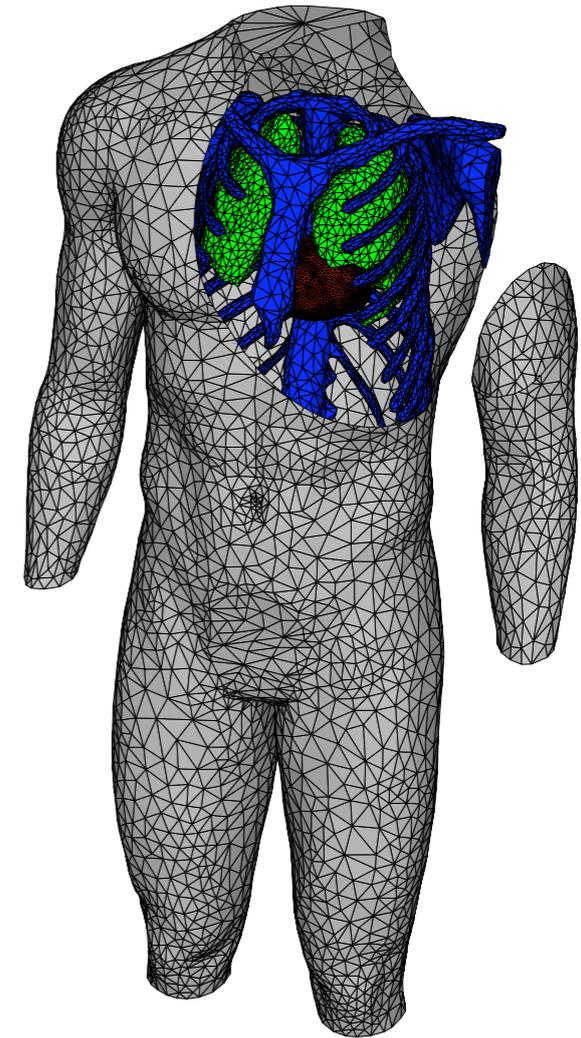
- Bidomain model in the heart

- Torso:

$$\begin{cases} \operatorname{div}(\boldsymbol{\sigma}_T \nabla u_T) = 0, & \text{in } \Omega_T \\ \boldsymbol{\sigma}_T \nabla u_T \cdot \boldsymbol{n}_T = 0, & \text{on } \Gamma_{\text{ext}} \end{cases}$$

- Coupling conditions:

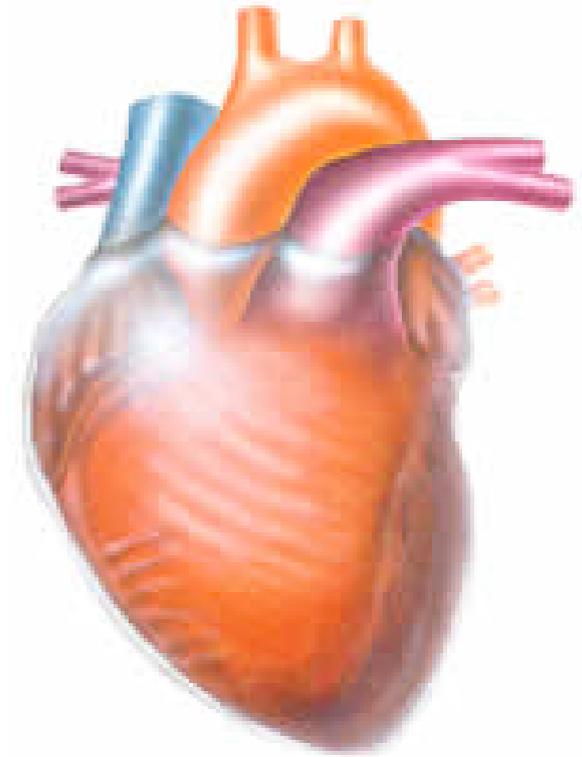
$$\begin{cases} u_e = u_T, & \text{on } \Gamma_{\text{epi}} \\ \boldsymbol{\sigma}_e \nabla u_e \cdot \boldsymbol{n} = \boldsymbol{\sigma}_T \nabla u_T \cdot \boldsymbol{n}, & \text{on } \Gamma_{\text{epi}} \end{cases}$$



(Krassowska-Neu 94, Clements et al. 04, Pierre 05, Lines et. al 06,...)

Other heart-torso coupling conditions

- A possible simplification:

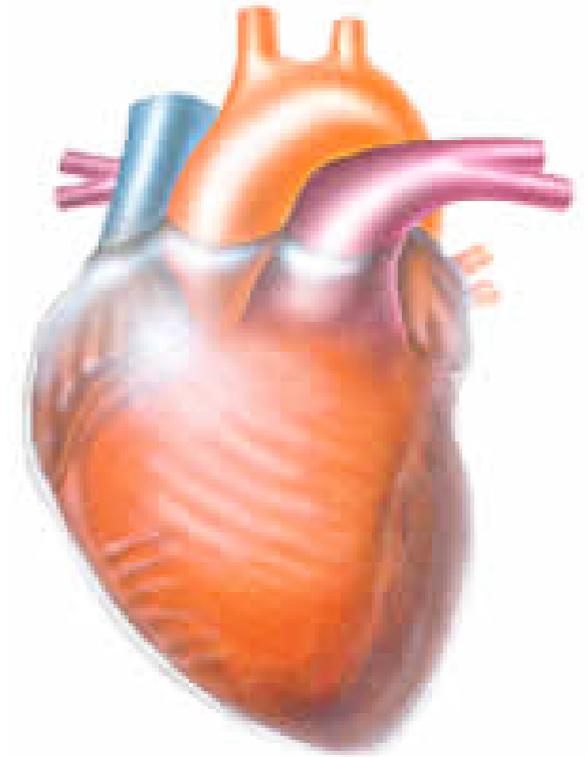


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If we neglect the impact of the torso:

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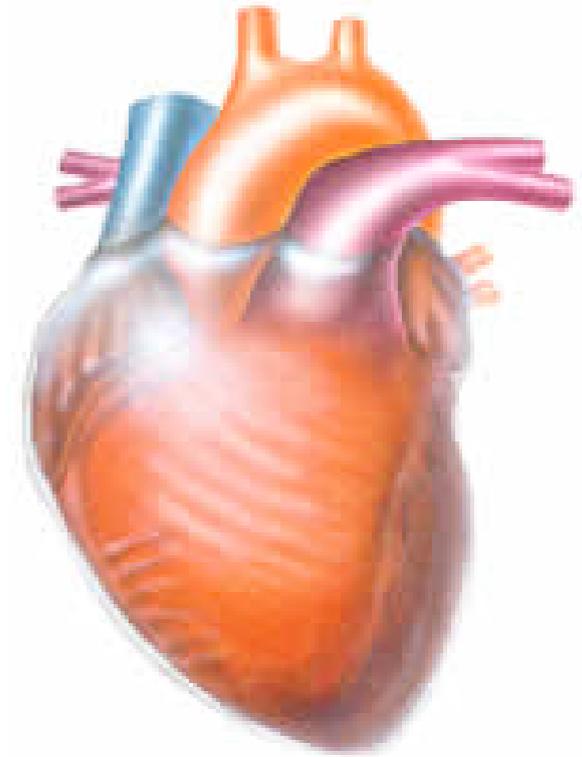


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- Pericardium resistive-capacitor effect:

$$\begin{cases} \sigma_e \nabla u_e \cdot \mathbf{n} = C_{\text{peri}} \frac{\partial}{\partial t} (u_T - u_e) + \frac{1}{R_{\text{peri}}} (u_T - u_e), & \text{on } \Gamma_{\text{epi}} \\ \sigma_T \nabla u_T \cdot \mathbf{n} = \sigma_e \nabla u_e \cdot \mathbf{n}, & \text{on } \Gamma_{\text{epi}} \end{cases}$$

R_{peri} : pericardium resistance

C_{peri} : pericardium capacitance

(Boulakia-Fernandez-JFG-Zemzemi FIMH07)

The heart-torso coupled problem

- $$V_m = u_i - u_e$$

$$\left\{ \begin{array}{l} A_m \left(C_m \frac{\partial V_m}{\partial t} + I_{\text{ion}}(V_m, \mathbf{g}) \right) - \text{div}(\boldsymbol{\sigma}_i \nabla u_i) = I_{\text{app}}, \quad \text{in } \Omega_H \\ \text{div}(\boldsymbol{\sigma}_e \nabla u_e) = -\text{div}(\boldsymbol{\sigma}_i \nabla u_i), \quad \text{in } \Omega_H \\ \boldsymbol{\sigma}_i \nabla u_i \cdot \mathbf{n} = 0, \quad \text{on } \Gamma_{\text{epi}} \\ \\ \frac{\partial \mathbf{g}}{\partial t} + G(V_m, \mathbf{g}) = 0, \quad \text{in } \Omega_H \\ \\ \text{div}(\boldsymbol{\sigma}_T \nabla u_T) = 0, \quad \text{in } \Omega_T \\ \\ \left\{ \begin{array}{l} u_e = u_T, \quad \text{on } \Gamma_{\text{epi}} \\ \boldsymbol{\sigma}_e \nabla u_e \cdot \mathbf{n} = \boldsymbol{\sigma}_T \nabla u_T \cdot \mathbf{n}, \quad \text{on } \Gamma_{\text{epi}} \end{array} \right. \end{array} \right.$$

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- It involves:

- 2 degenerated non-linear reaction-diffusion equations
- a system of ODE's and a diffusion equation

The heart-torso coupled problem

- $$V_m = u_i - u_e$$

$$\left\{ \begin{array}{l} A_m \left(C_m \frac{\partial V_m}{\partial t} + I_{\text{ion}}(V_m, \mathbf{g}) \right) - \text{div}(\boldsymbol{\sigma}_i \nabla V_m) - \text{div}(\boldsymbol{\sigma}_i \nabla u_e) = I_{\text{app}}, \quad \text{in } \Omega_H \\ \text{div}(\boldsymbol{\sigma}_i \nabla V_m) + \text{div}((\boldsymbol{\sigma}_i + \boldsymbol{\sigma}_e) \nabla u_e) = 0, \quad \text{in } \Omega_H \\ \boldsymbol{\sigma}_i \nabla V_m \cdot \mathbf{n} + \boldsymbol{\sigma}_i \nabla u_e \cdot \mathbf{n} = 0, \quad \text{on } \Gamma_{\text{epi}} \\ \\ \frac{\partial \mathbf{g}}{\partial t} + G(V_m, \mathbf{g}) = 0, \quad \text{in } \Omega_H \\ \\ \text{div}(\boldsymbol{\sigma}_T \nabla u_T) = 0, \quad \text{in } \Omega_T \end{array} \right.$$

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Well-posedness analysis

- Isolated bidomain model (no coupling with torso):

Colli Franzone et al. 02, Bendahmane et al. 06, Bourgault et al. 06, Veneroni 06

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- We consider here two kind of ionic models:

- Generalized FitzHugh-Nagumo:

$$I_{\text{ion}}(V_m, g) = f_1(V_m) + f_2(V_m)g$$

$$G(V_m, g) = g_1(V_m) + g_2g$$

- Regularized Mitchell-Schaeffer

$$I_{\text{ion}}(V_m, g) = -\frac{g}{\tau_{\text{in}}} f_1(v) + \frac{V_m}{\tau_{\text{out}}}, \quad G(V_m, g) = \left(\frac{1}{\tau_{\text{close}}} + \frac{\tau_{\text{close}} - \tau_{\text{open}}}{\tau_{\text{close}}\tau_{\text{open}}} h_{\infty}(V_m) \right) (g - h_{\infty}(V_m))$$

$$h_{\infty}(v) = \frac{1}{2} \left[1 - \tanh \left(\frac{v - V_{\text{cr}}}{\eta} \right) \right], \quad \eta > 0$$

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Theorem: (Boulakia-Fernandez-JFG-Zemzemi 07)

Under the assumptions

$$\begin{cases} |f_1(v)| \leq c_1 + c_2|v|^3, & f_1(v)v \geq a|v|^4 - b|v|^2 \\ f_2(v) = p + qv, & |g_1(v)| \leq c_3 + c_4|v|^2 \end{cases}$$

the coupled heart-torso problem has a global weak solution

$$V_m \in L^2(0, T; H^1(\Omega_H)), \quad \partial_t V_m \in L^2(0, T; (H^1(\Omega_H))'), \quad g \in H^1(0, T; L^2(\Omega_H)), \quad (u_e, u_T) \in L^2(0, T; H^1(\Omega))$$

Uniqueness holds for the FitzHugh-Nagumo model.

Well-posedness analysis

- Isolated bidomain model (no coupling with torso):

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- We consider here two kind of ionic models:

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Theorem: (Boulakia-Fernandez-JFG-Zemzemi 07)

Idea of the proof:

1. Faedo-Galerkin to an approximate non-degenerate system: we add

$$\frac{1}{n} \partial_t u_i^n, \quad -\frac{1}{n} \partial_t u_e^n,$$

2. *A priori* energy estimates independent of n

3. Compactness

$(0, T; H^1(\Omega))$

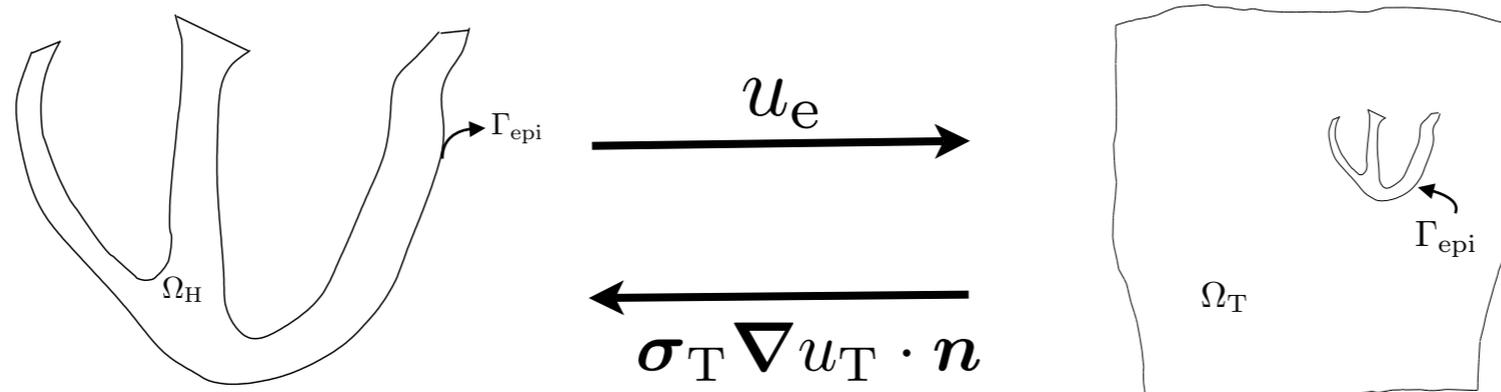
Outline

- Electrical activity of the heart
 - Electrocardiograms (ECG)
 - Cell scale
 - Tissue scale : the bidomain equations
 - **ECG simulation**
- Applications
 - Cardiac Resynchronisation Therapy
 - MRI, Magnetohydrodynamics & ECG

Discretization and solution procedure

- \mathbb{P}_1 finite elements in space
- Semi-implicit BDF2 scheme in time
- Coupling with torso:

$$\begin{cases} u_e = u_T, & \text{on } \Gamma_{\text{epi}} \\ \sigma_e \nabla u_e \cdot \mathbf{n} = \sigma_T \nabla u_T \cdot \mathbf{n}, & \text{on } \Gamma_{\text{epi}} \end{cases}$$



Dirichlet-to-Neumann iterations

“Standard” numerical methods :

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The real difficulty is modelling !

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Options :

- Monodomain or bidomain ?
- Physiologic or phenomenologic ?
- Fibers ?
- Strong coupling with the torso ?
- Cellular heterogeneity ?
- His bundle modelling ? Initialization ?

“Standard” numerical methods :

The real difficulty is modelling !

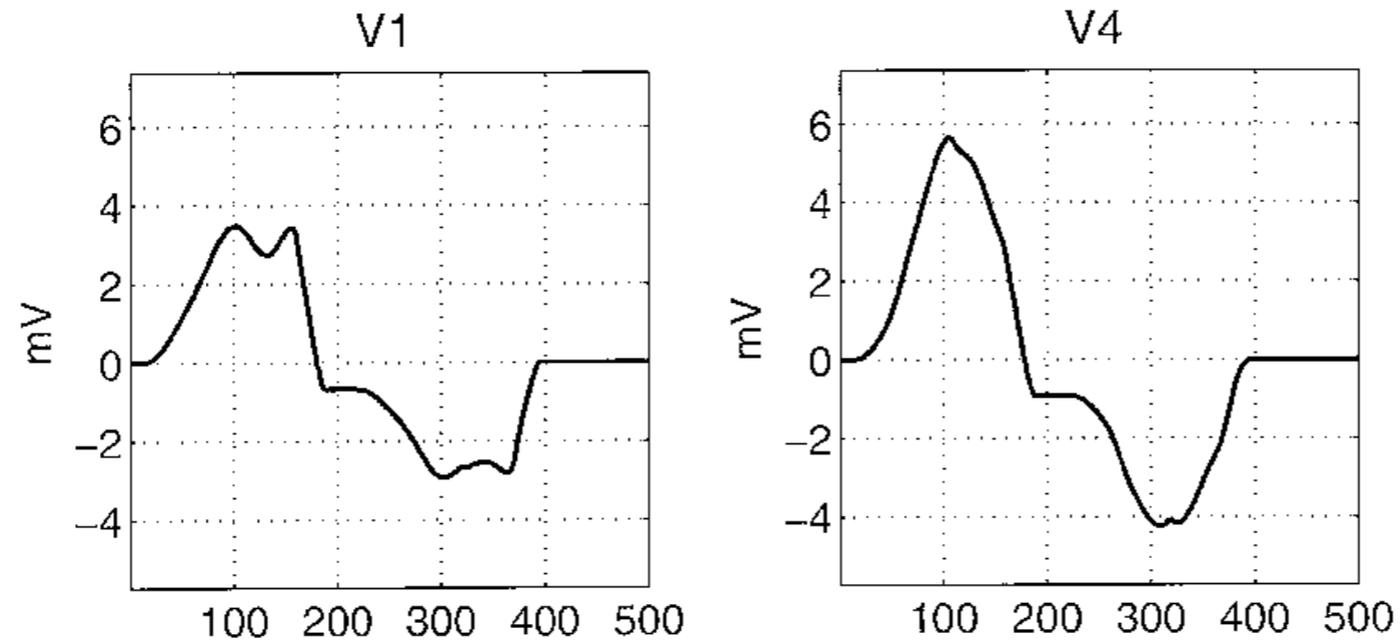
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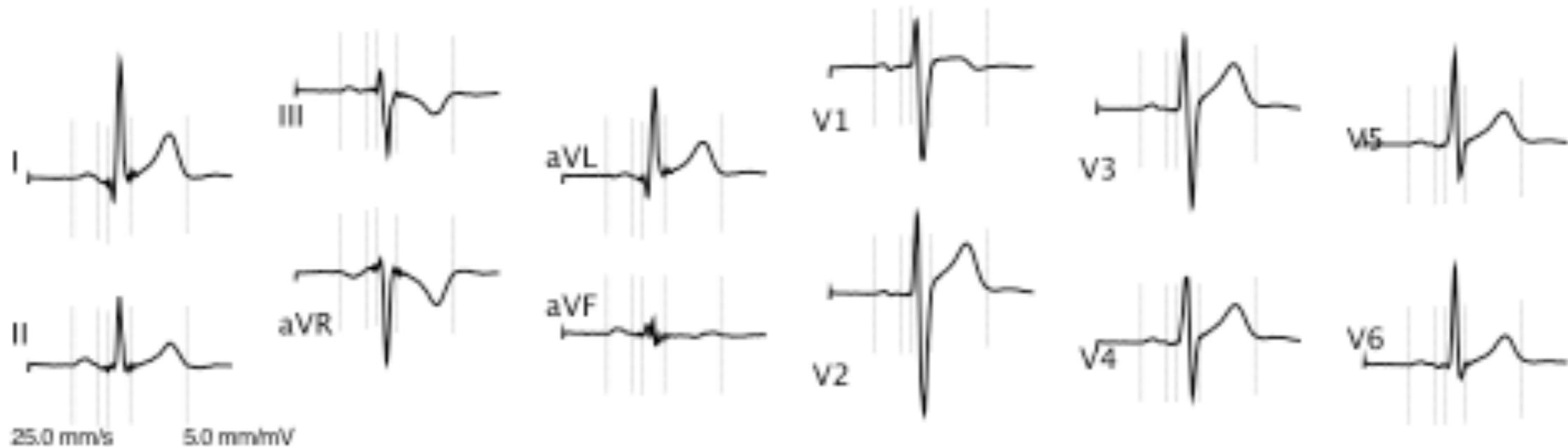
Guideline :

- Devise “a simplest” model which provides a good ECG
- Forget anything which does not affect the ECG

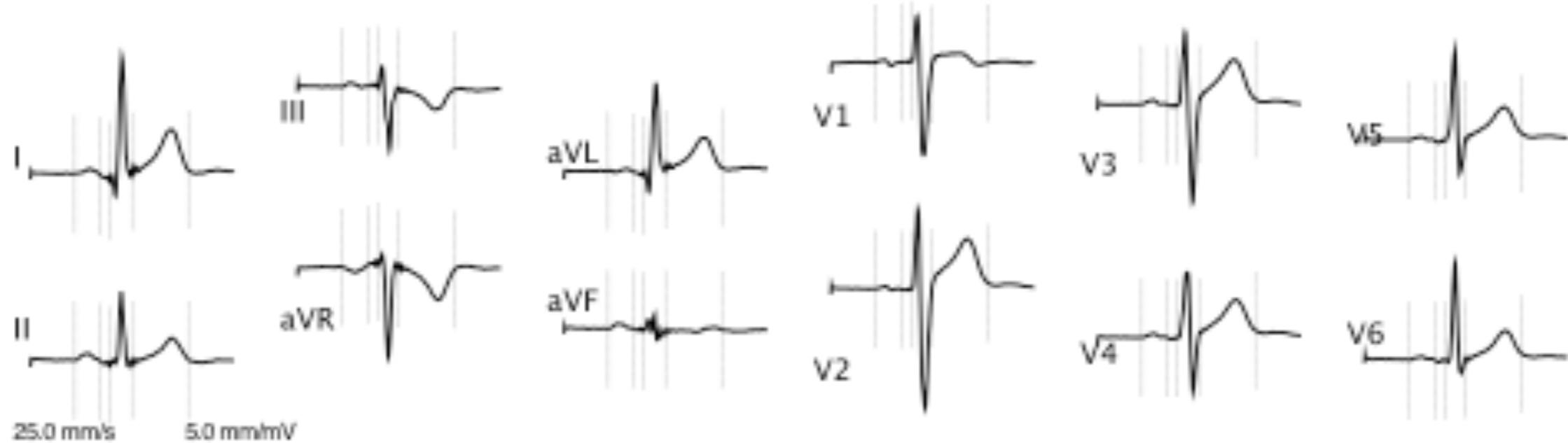
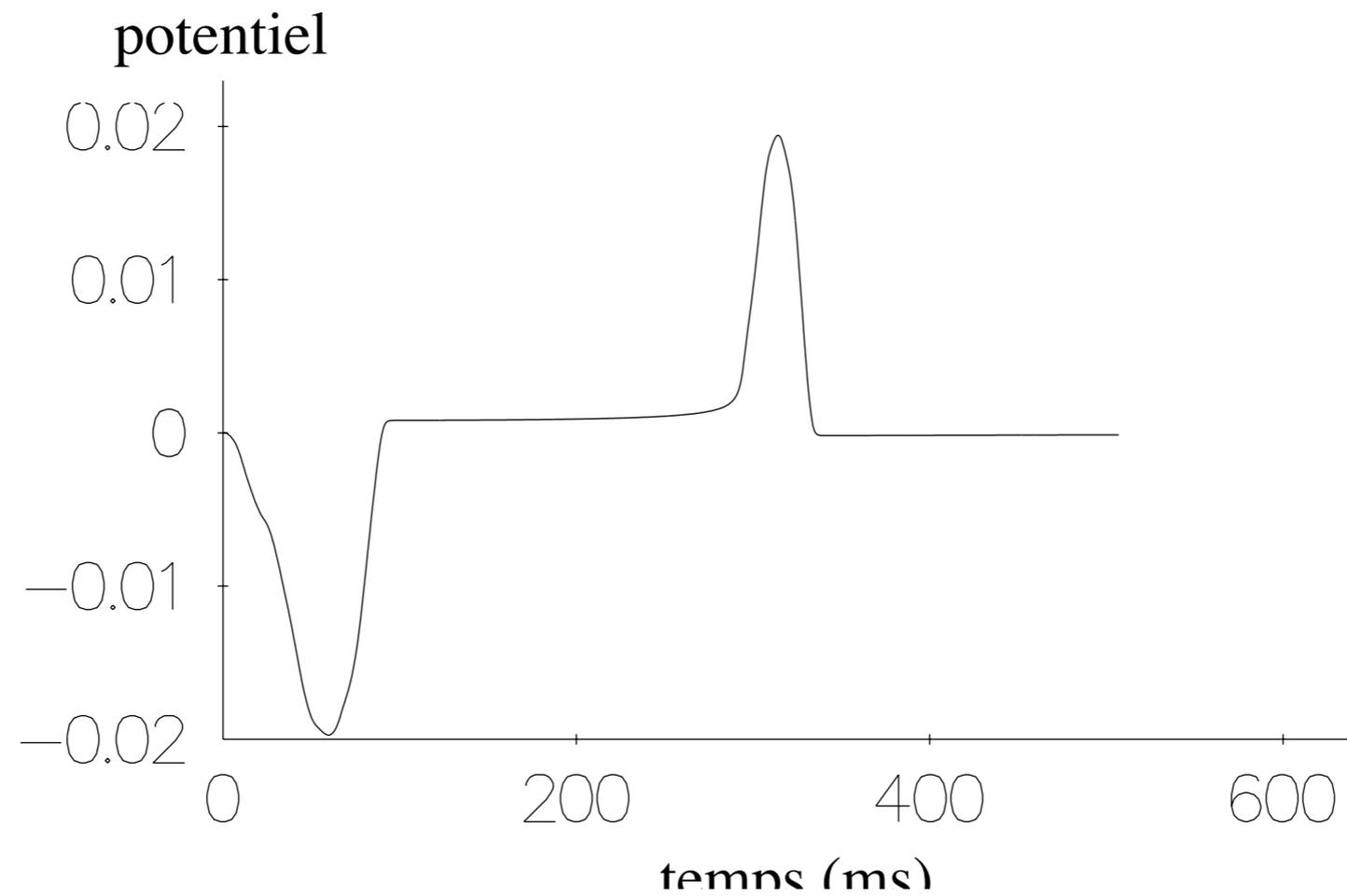
An example from the literature



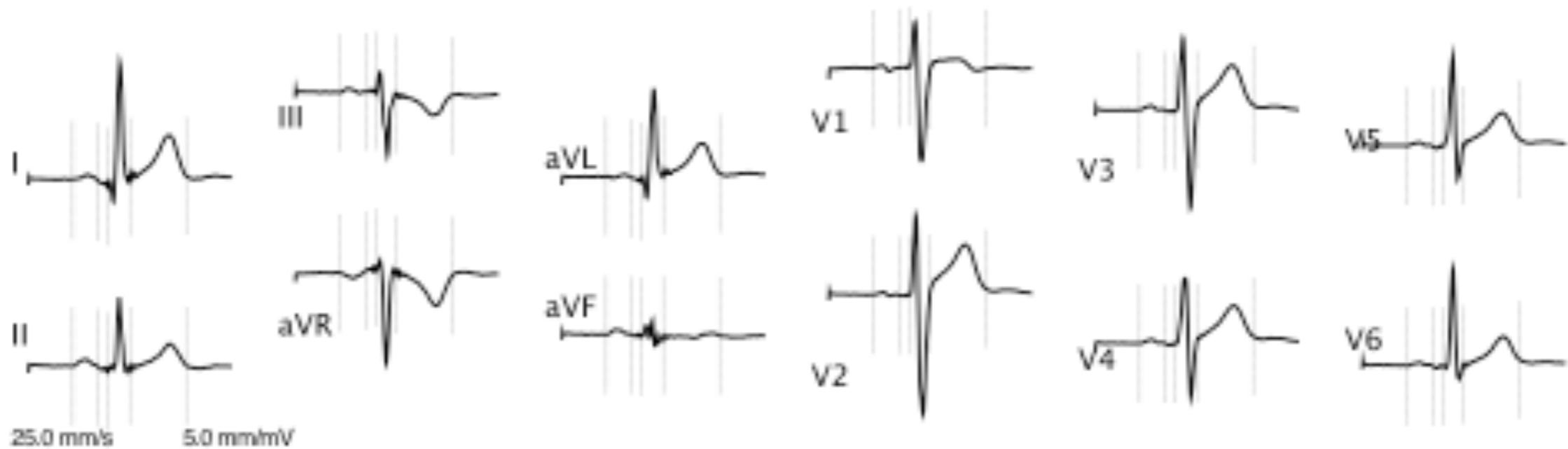
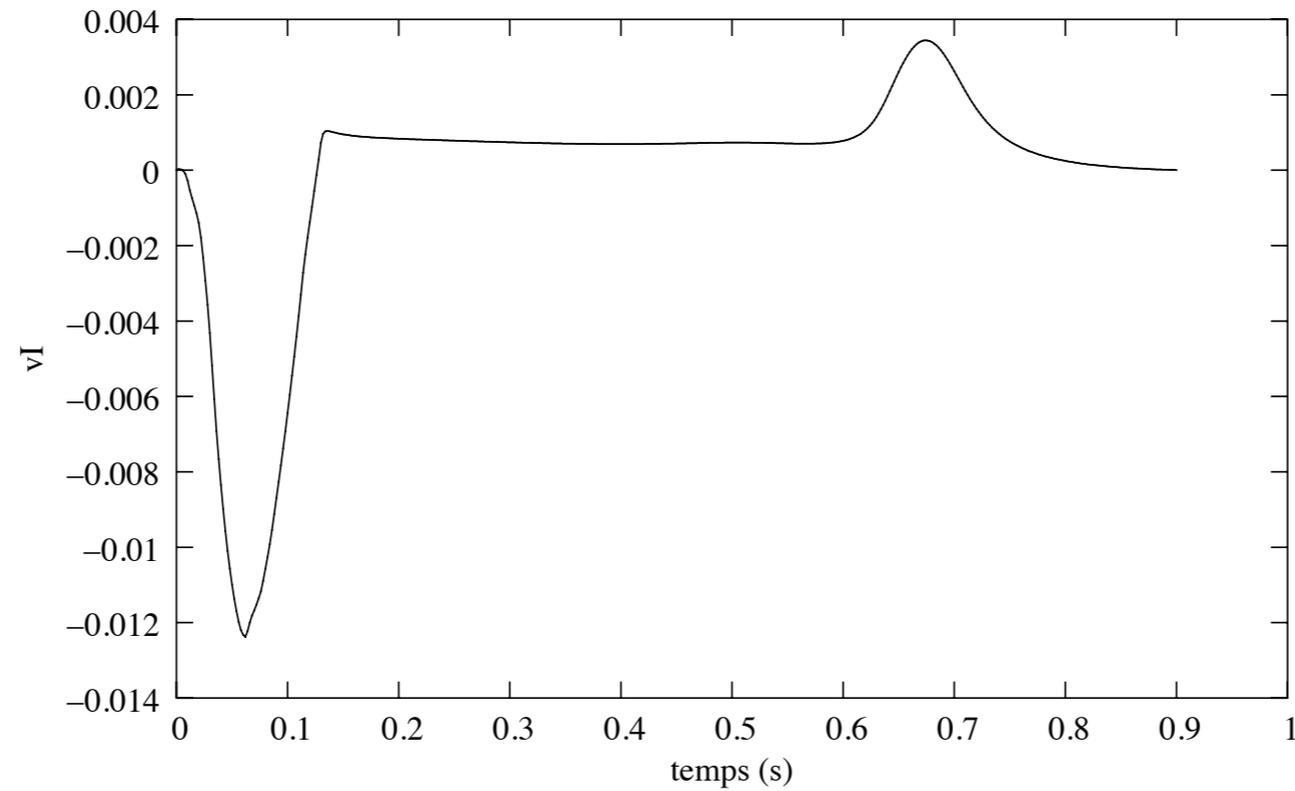
(Sundnes et al., Springer 2006)



1st example: Fitzhugh-Nagumo



2d example: physiological ionic model

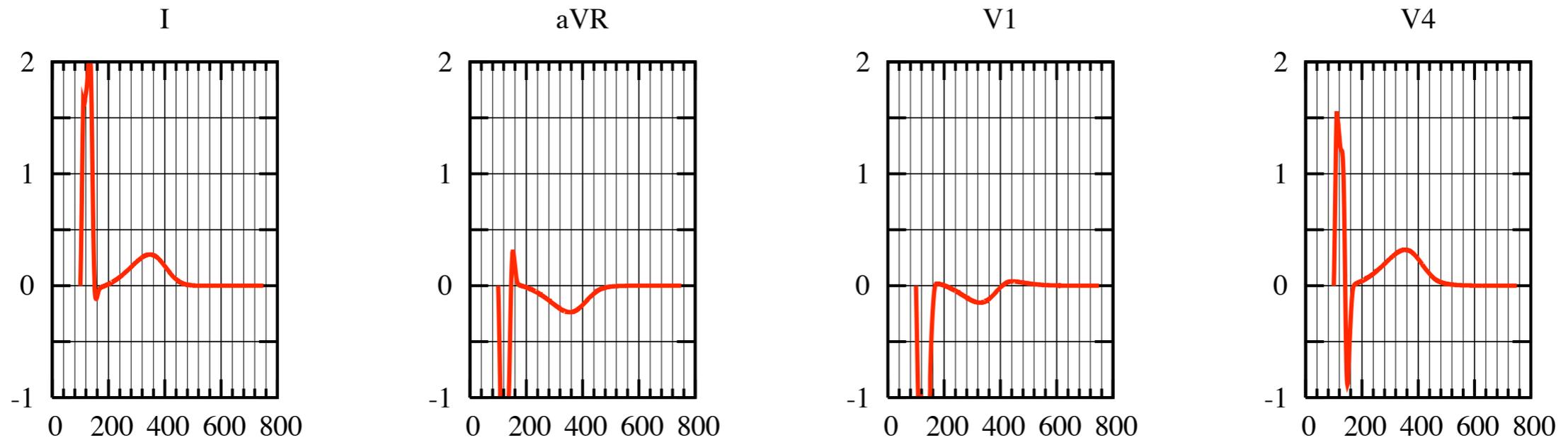


Discussion :

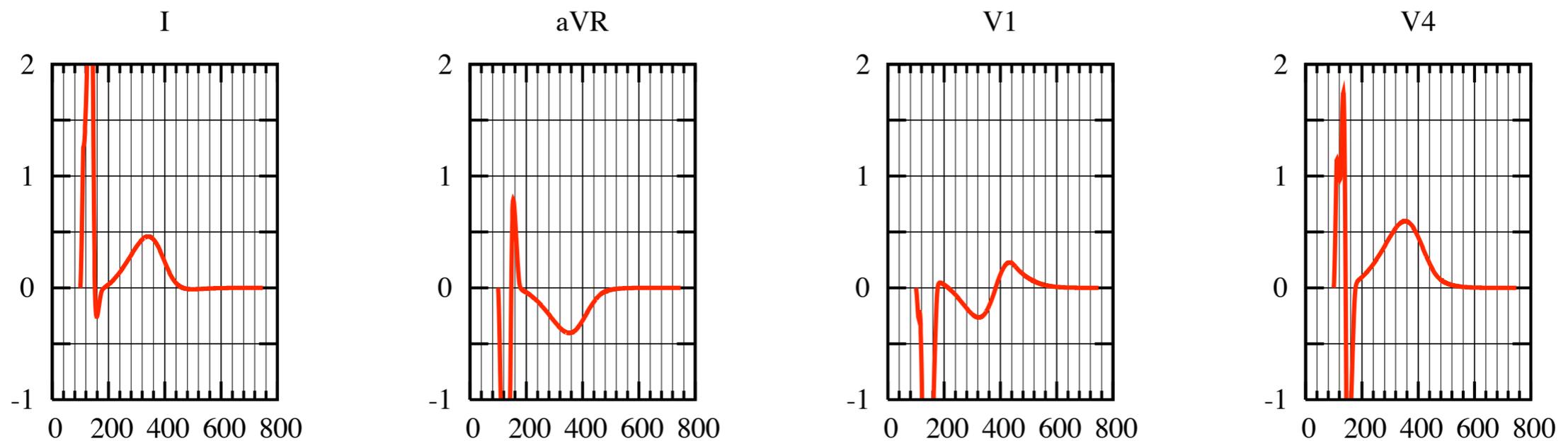
- Impact of heart-torso coupling
- Impact of ionic models
- Cellular heterogeneity

Impact of heart-torso uncoupling

- Full heart-torso coupling:

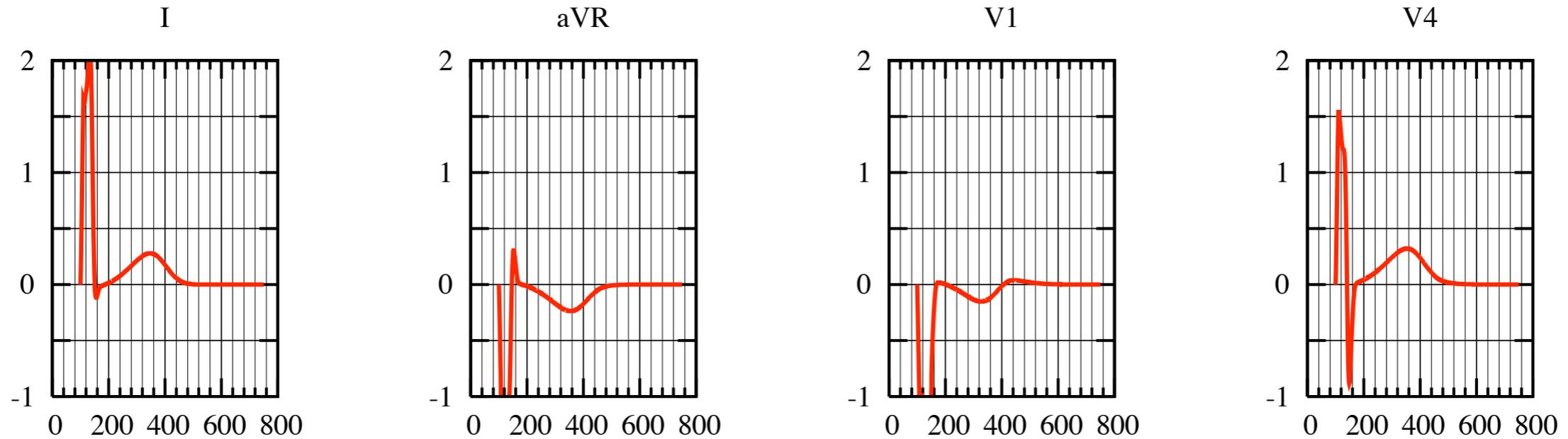


- Uncoupled heart-torso (isolated heart):

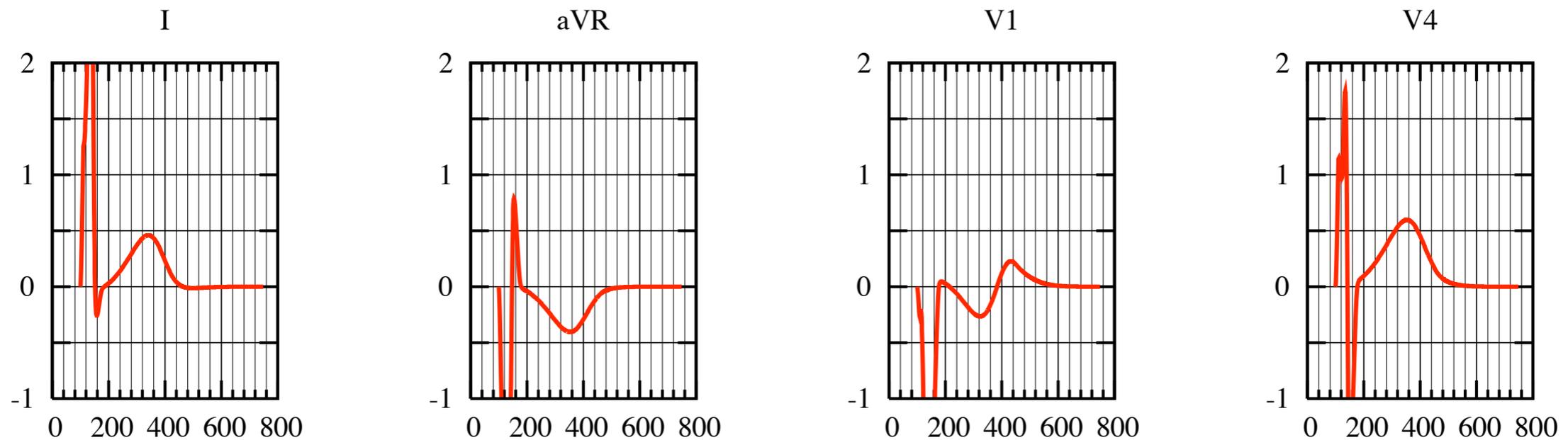


Impact of heart-torso uncoupling

- Full heart-torso coupling:



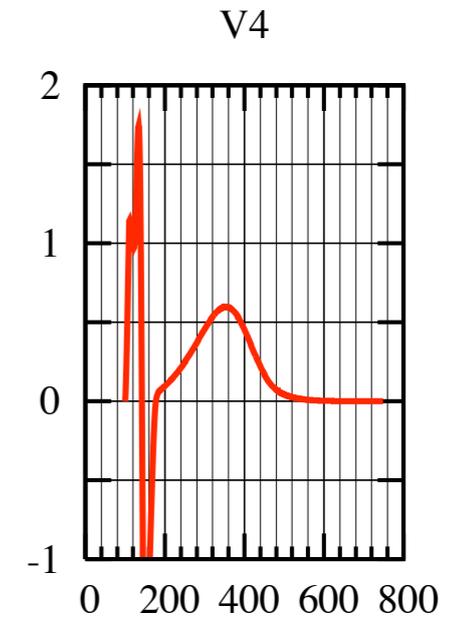
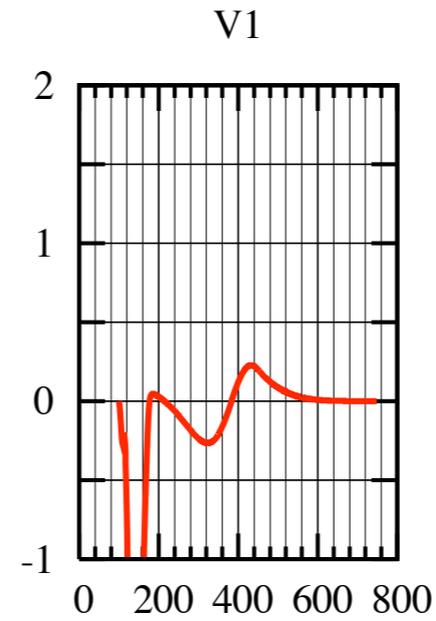
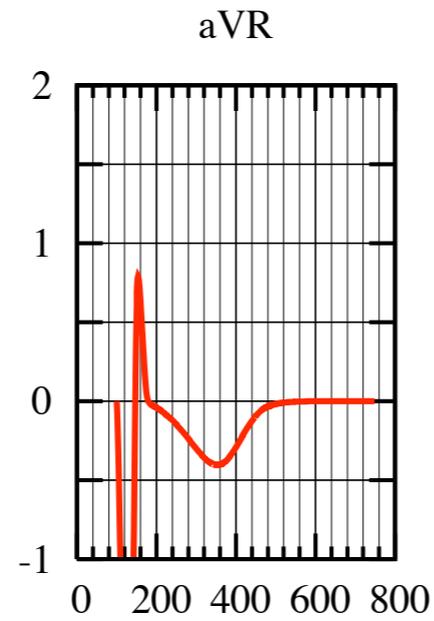
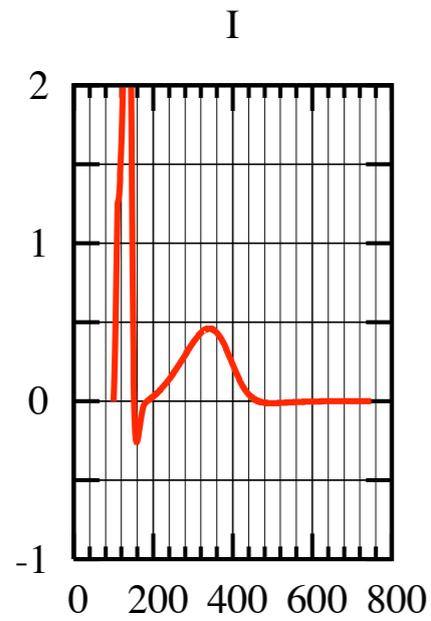
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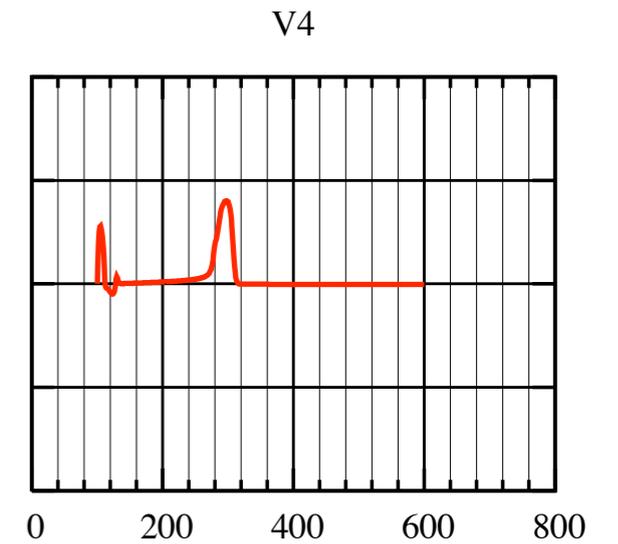
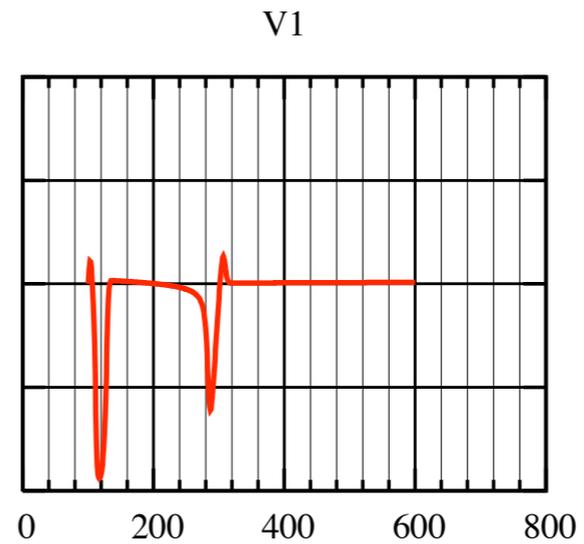
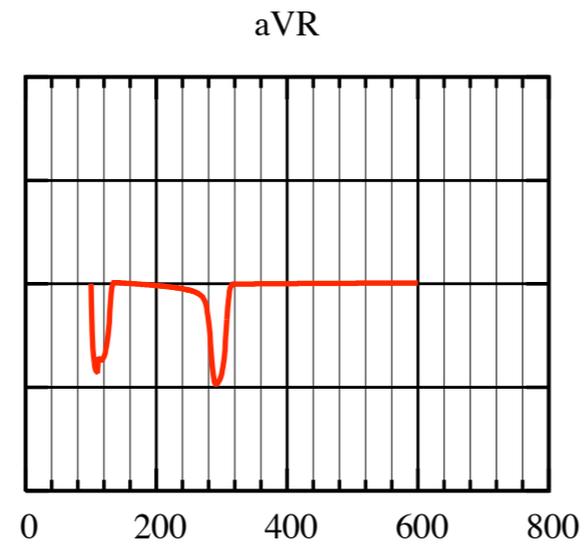
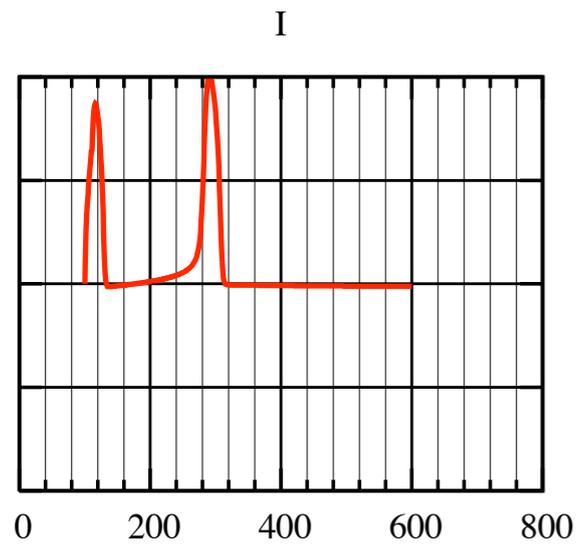
In “agreement” with *Pullan et al. 05*

Impact of ionic model

- Mitchell-Schaeffer:

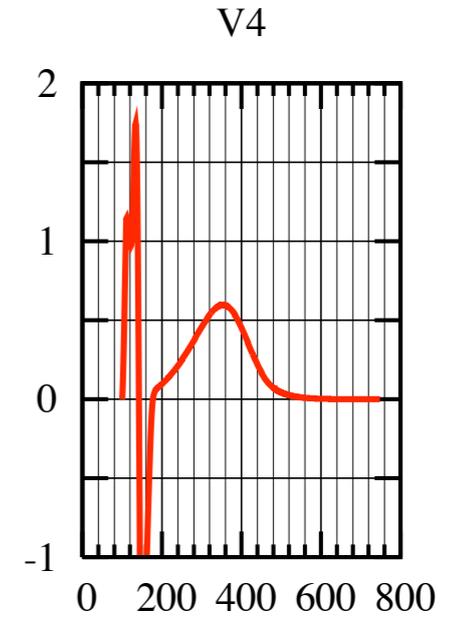
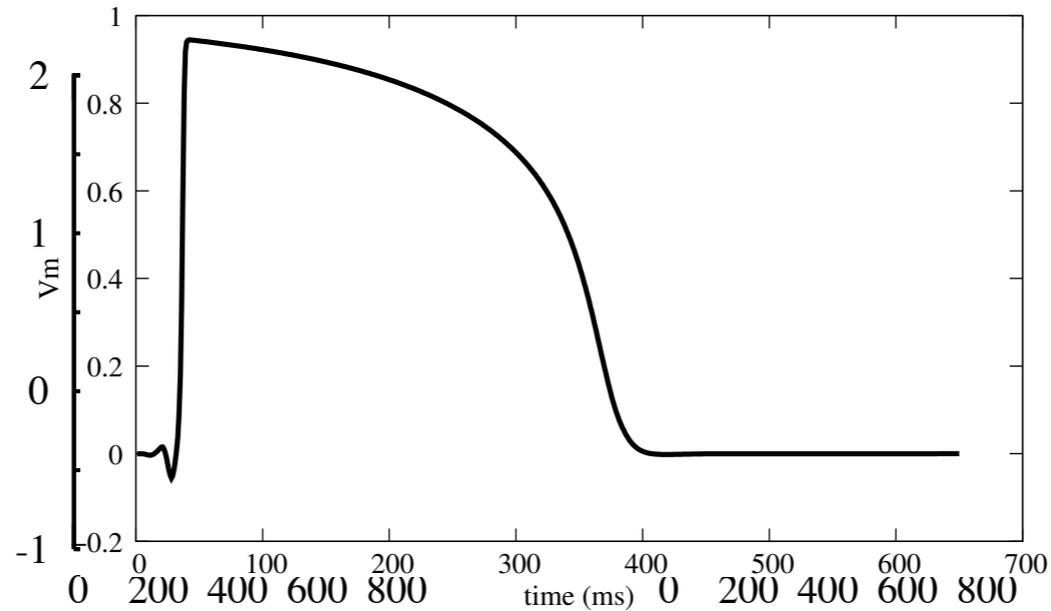
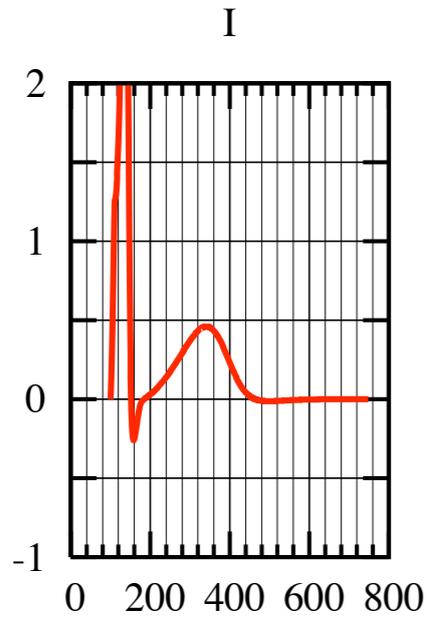


- FitzHugh-Nagumo:

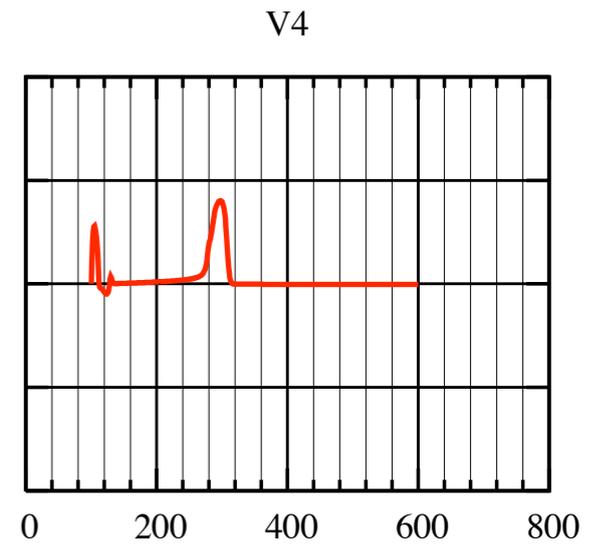
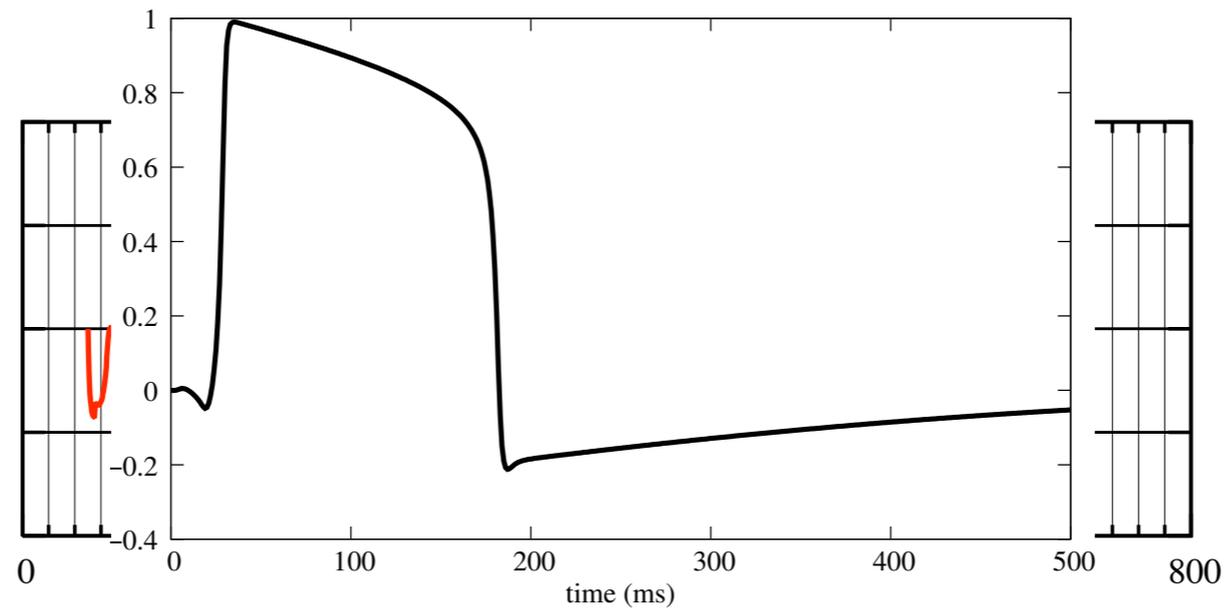
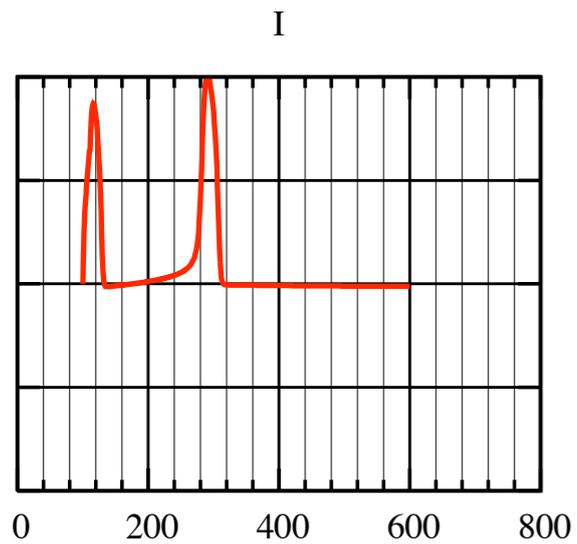


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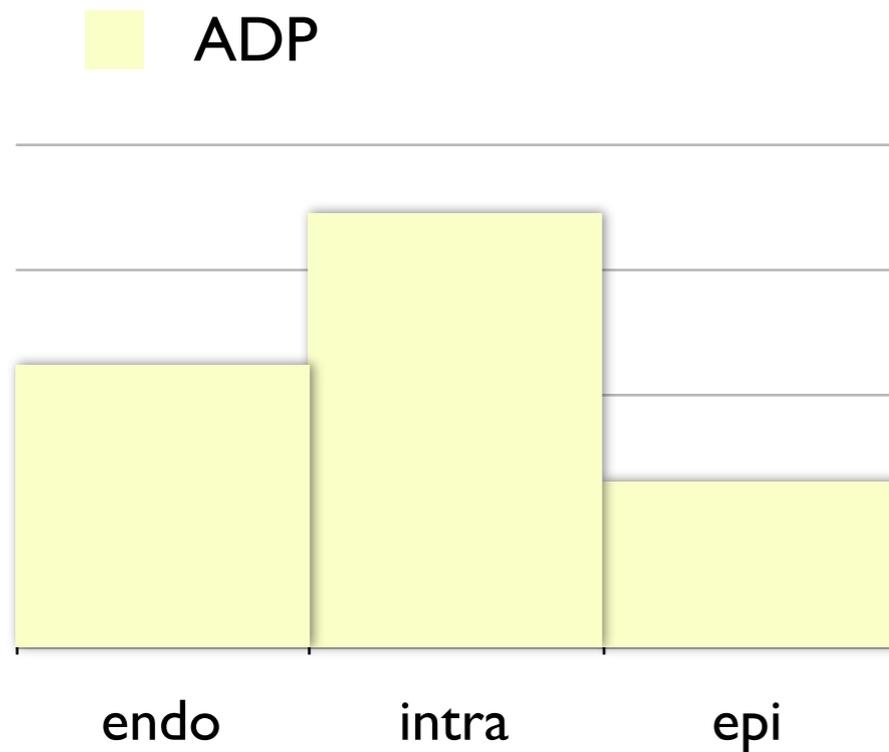
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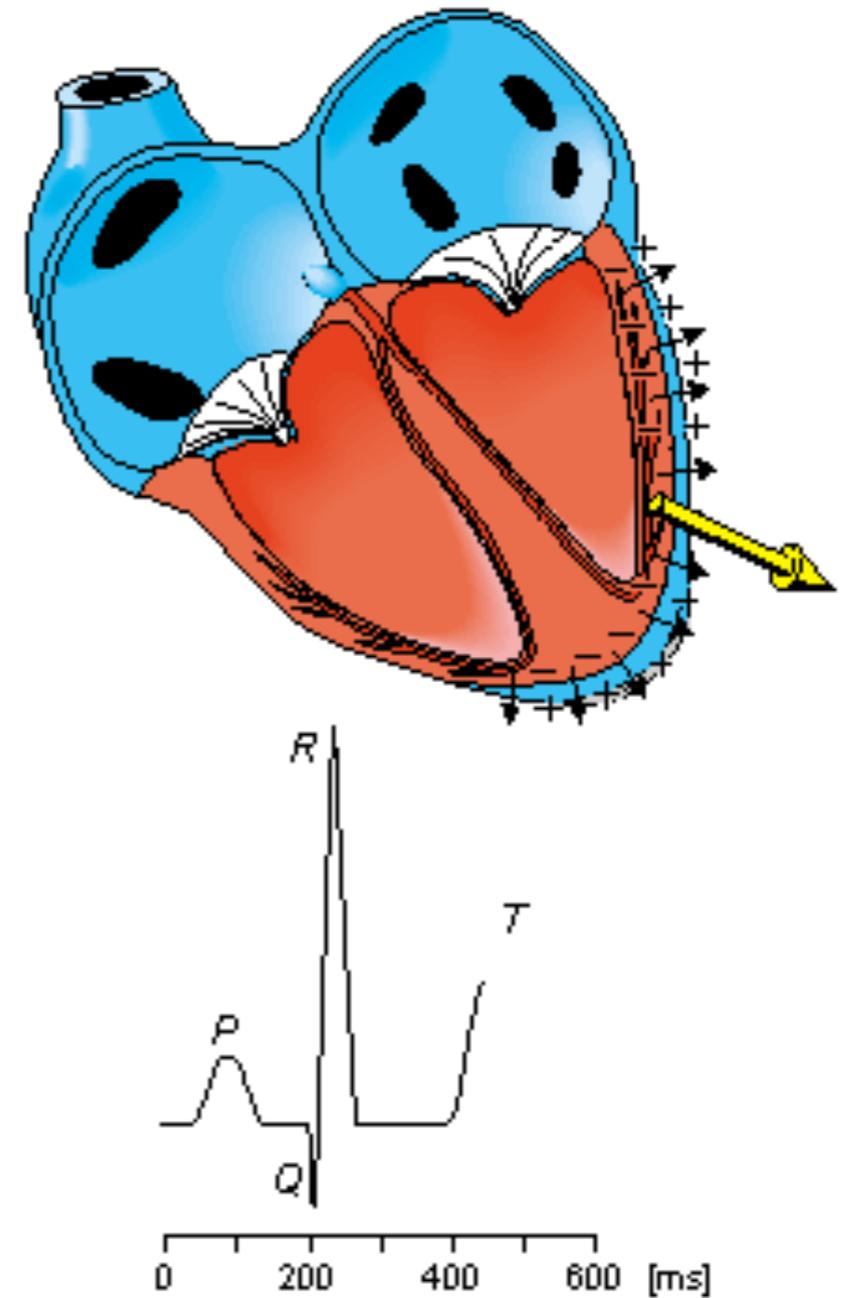
Cell heterogeneity

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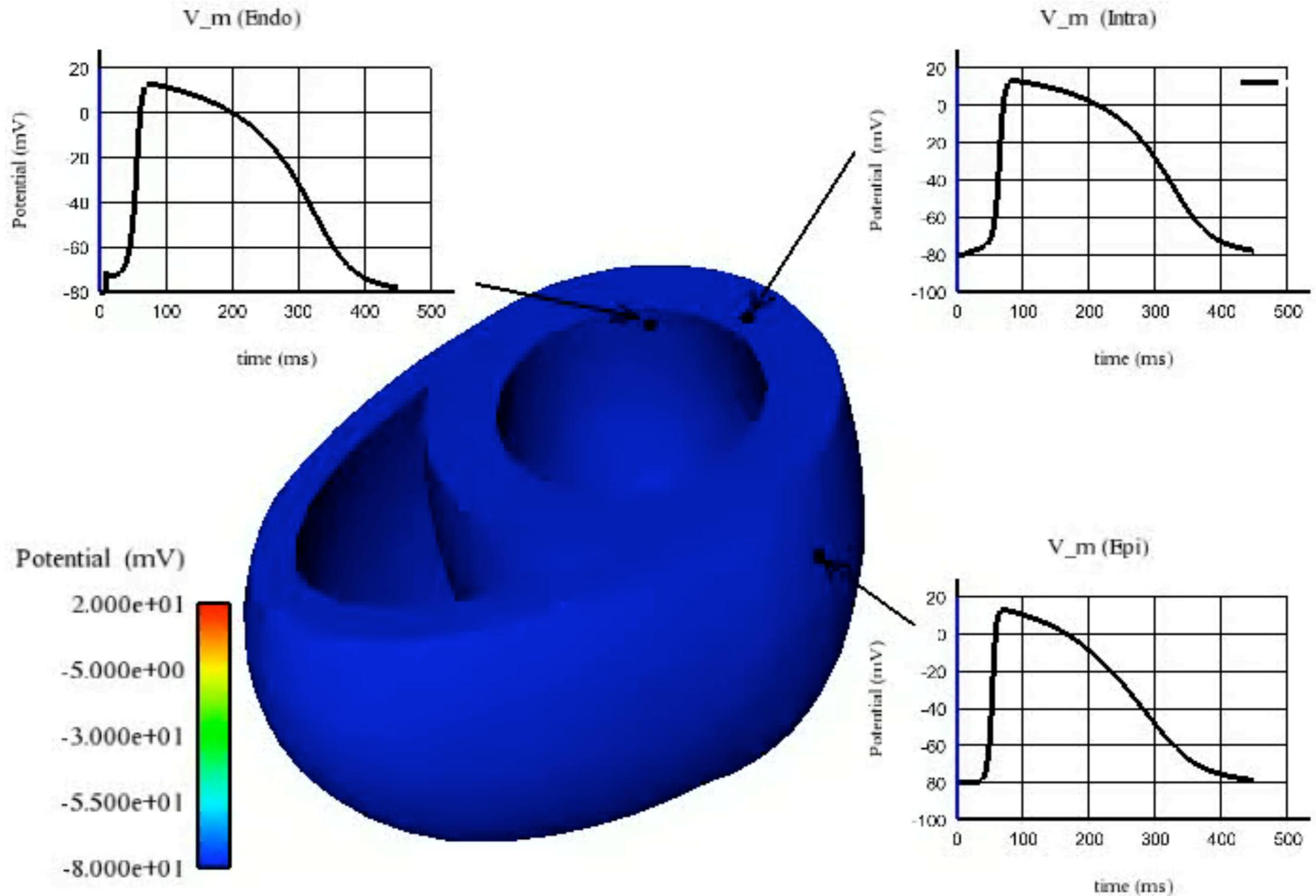
- We cannot consider only one cell type !
- Transmural LV cell heterogeneity



(Drouin et al. 95, Trudel et al. 04, Sampson-Henriquez 05)

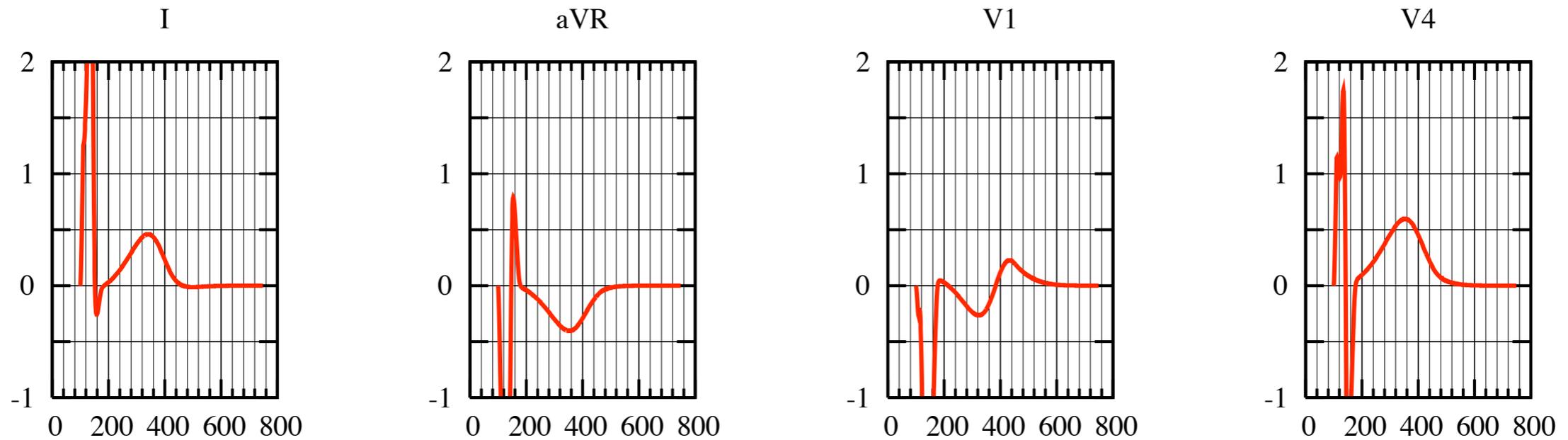


Transmembrane potential

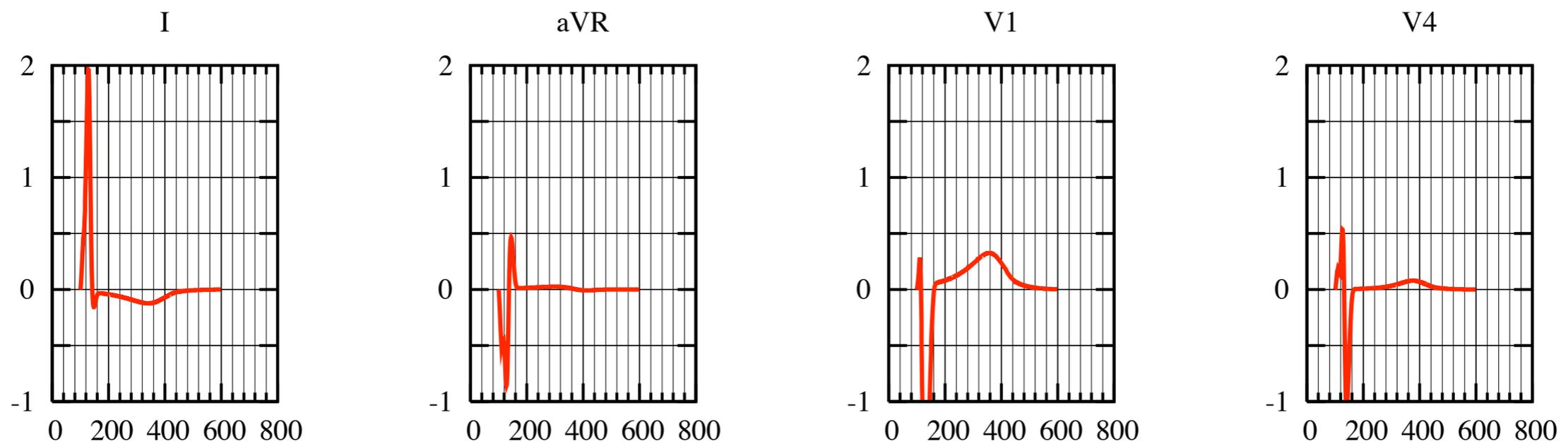


Impact of cell heterogeneity

- Transmural left ventricle APD heterogeneity:



- Homogeneous APD:

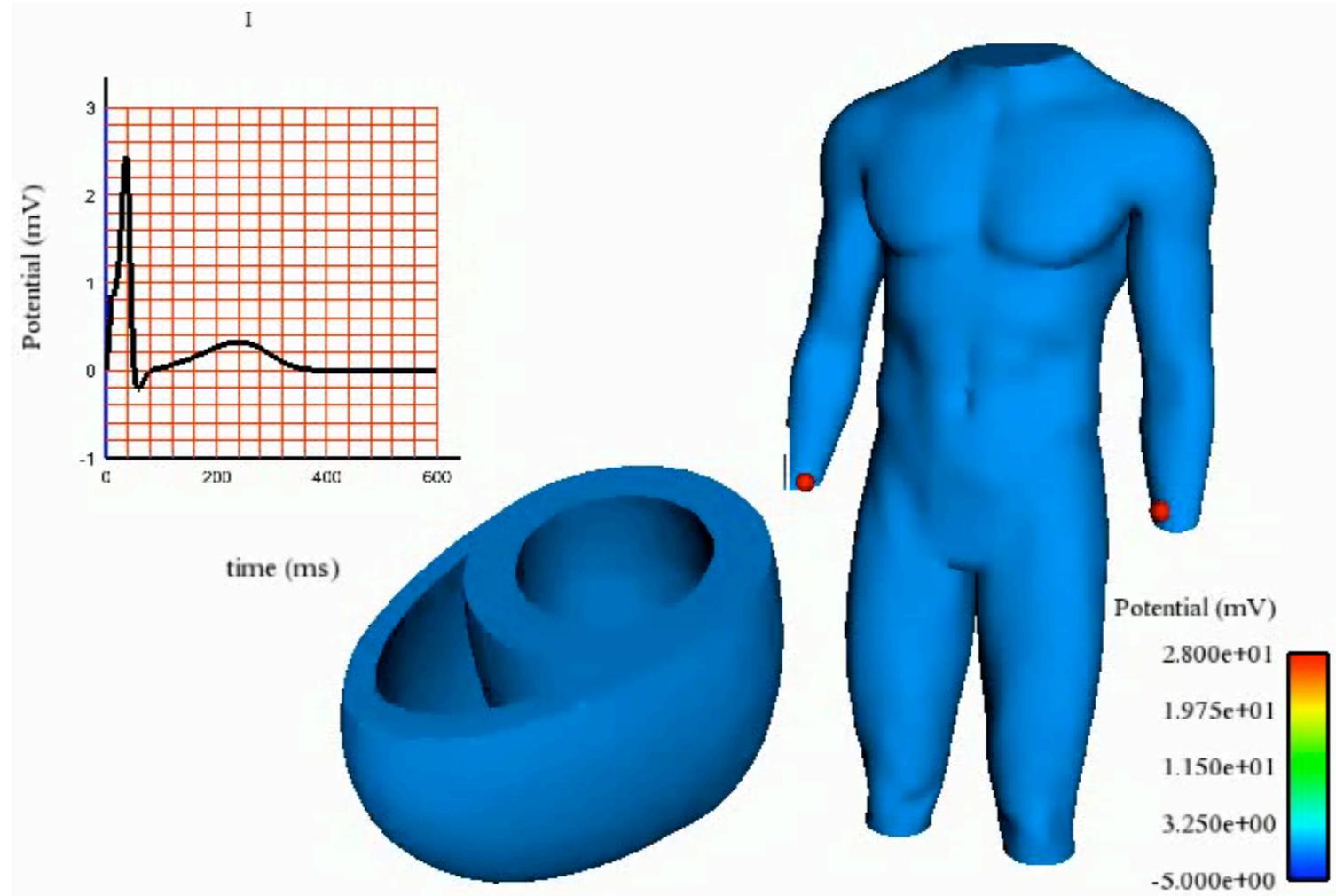


Our modelling choices

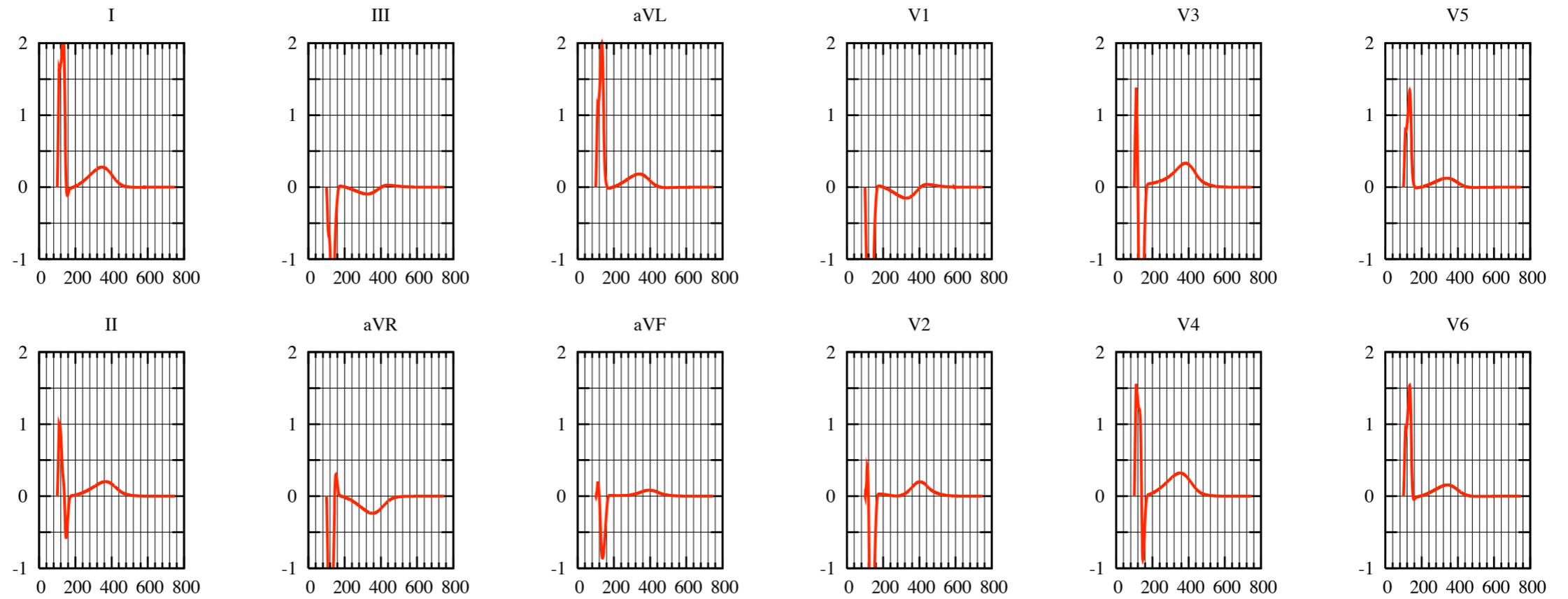
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- 3 different cells
- Bidomain equations and fibers
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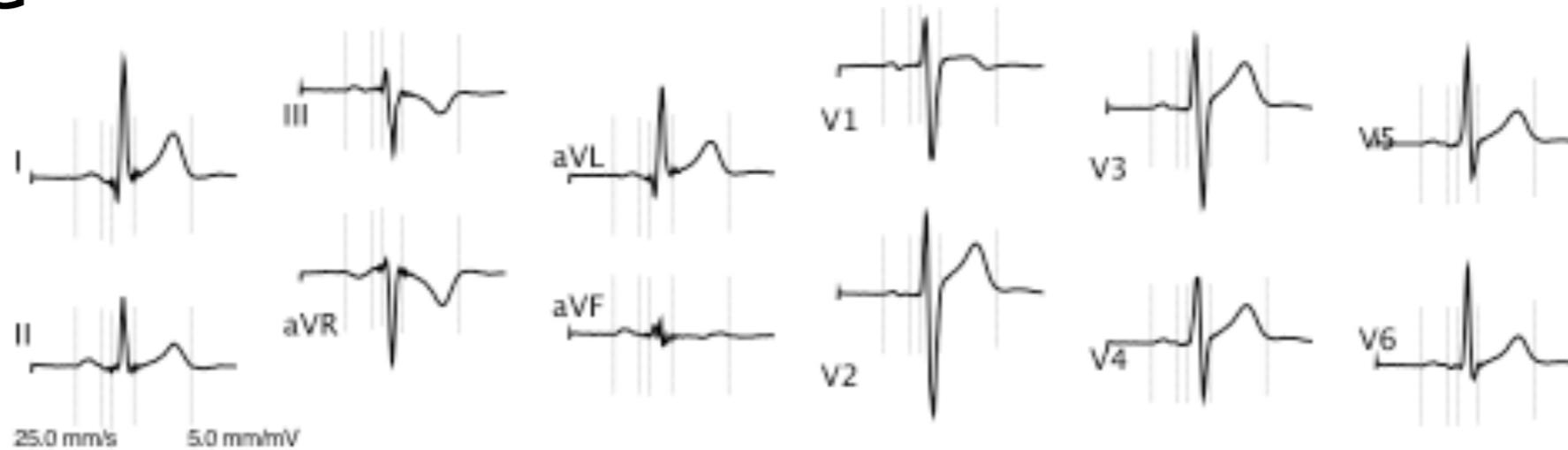
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- Simulated ECG



- Real ECG



ECG simulations

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Is the model relevant ?

- Difficult to answer... at least it can model a healthy case
- One positive point :

When we simulate a bundle branch block (left or right), our cardiologist can recognise it on our ECG !

Outline

- Electrical activity of the heart
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 - Tissue scale : the bidomain equations
 - ECG simulation
- Applications
 - **Cardiac Resynchronisation Therapy**
 - MRI, Magneto hydrodynamics & ECG

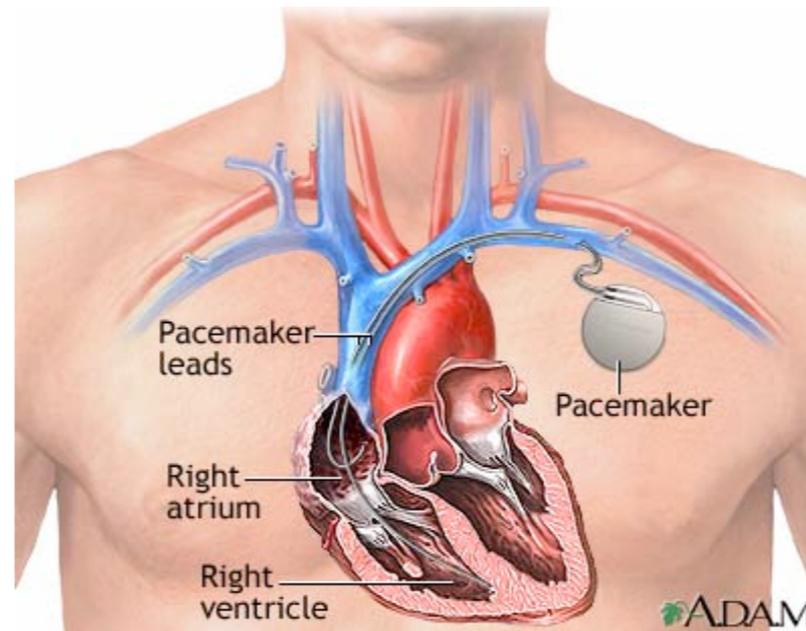
An application: Cardiac Resynchronisation Therapy

An application: Cardiac Resynchronisation Therapy

- Heart dyssynchrony yields a decrease of cardiac efficiency

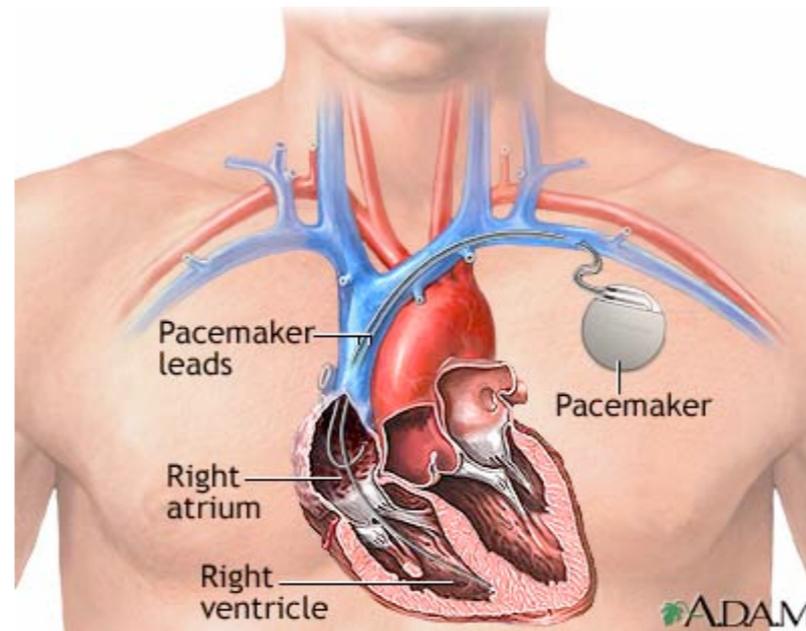
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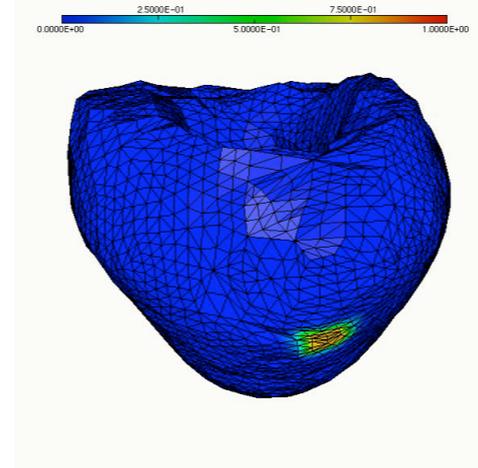
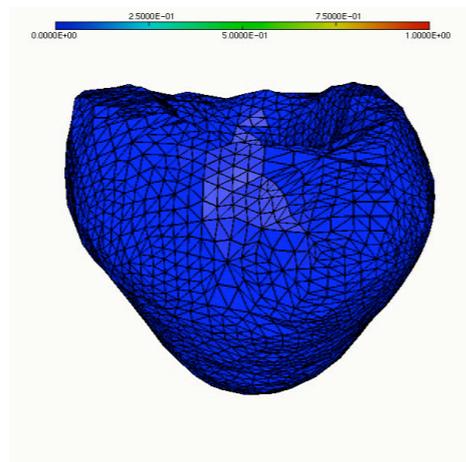


- **Pacing : where ? when ?**

Cardiac Resynchronisation Therapy

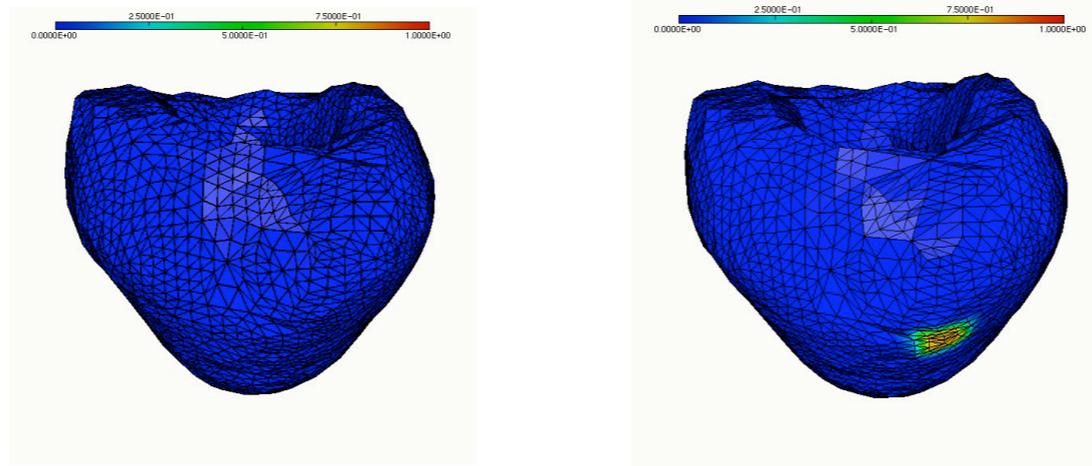
Cardiac Resynchronisation Therapy

- Simulation of a reference and a pathological case



Cardiac Resynchronisation Therapy

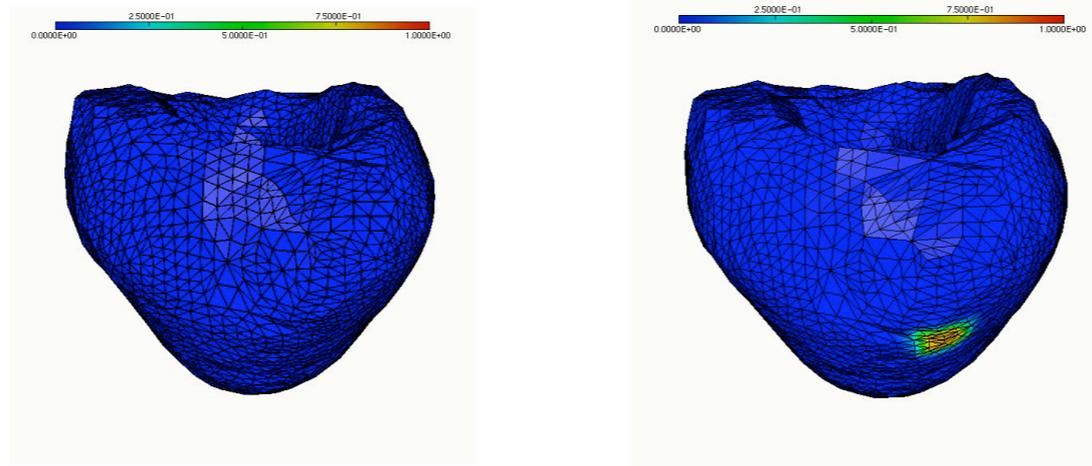
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Cardiac Resynchronisation Therapy

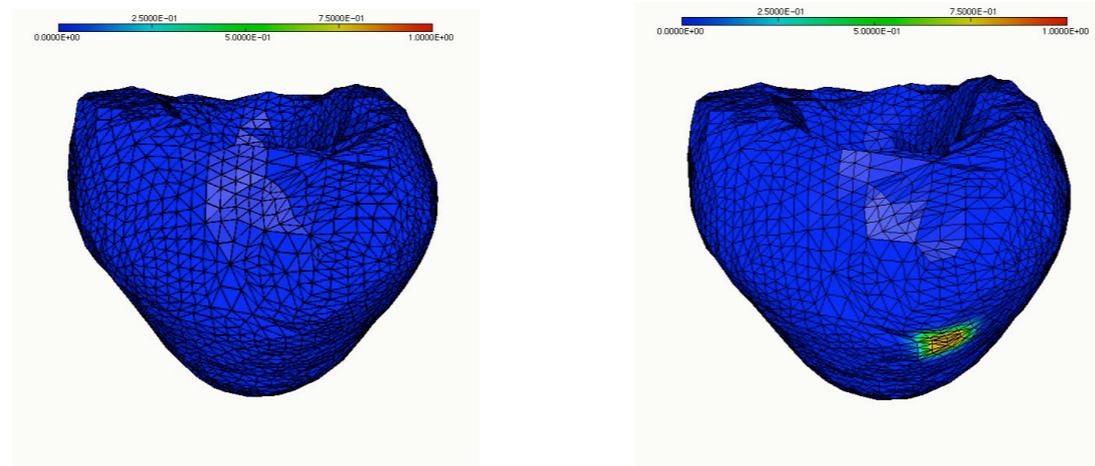
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Cardiac Resynchronisation Therapy

- Simulation of a reference and a pathological case



- Optimization of the location of the lead by genetic algorithms
- Choice of a cost function

$$J_1 = |T_{\text{ref}}^* - T_{\text{path}}^*|$$

$$T^* = \inf \{t \geq 0, \text{Volume}(\Omega_t) \geq 0.95 \text{Volume}(\Omega_H)\}$$

$$\Omega_t = \{x \in \Omega_H, V(t, x) > V_s\}$$

Optimization with one lead

- Healthy case : $T_{\text{ref}}^* = 28.5 \text{ ms}$
- Pathological case : $J_1 = 73 \text{ ms}$
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El Alaoui, Dumas, JFG

Optimization with one lead

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Other possible choices for the cost function:

- ECG : $J_2 = \sum_{i=1}^{12} \left(\sum_{n=1}^{N_f} |L_{\text{ref},i}^n - L_{\text{path},i}^n|^2 \right)^{\frac{1}{2}}$,
- Mechanical criteria...

Outline

- Electrical activity of the heart
 - Electrocardiograms (ECG)
 - Cell scale
 - Tissue scale : the bidomain equations
 - ECG simulation
- Applications
 - Cardiac Resynchronisation Therapy
 - **MRI, Magneto hydrodynamics & ECG**

Artifact MHD and MRI



Philips MRI, 3 Teslas

Artifact MHD and MRI



Philips MRI, 3 Teslas

- Permanent uniform magnetic field (typically 1.5 Teslas)
- Today: 3 Teslas (human), 10 Teslas (animals)
- Tomorrow : 10 Teslas (human), 17 Teslas (animals)

Magnetohydrodynamics (MHD)

Magneto hydrodynamics (MHD)

- ECG are used to synchronize MRI sequences (“gating”)

Magneto hydrodynamics (MHD)

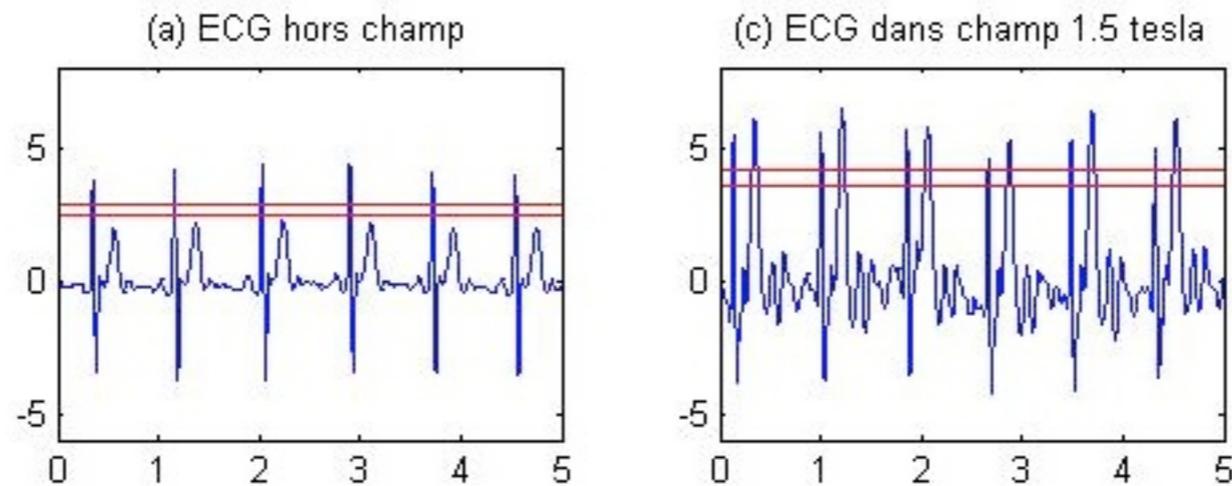
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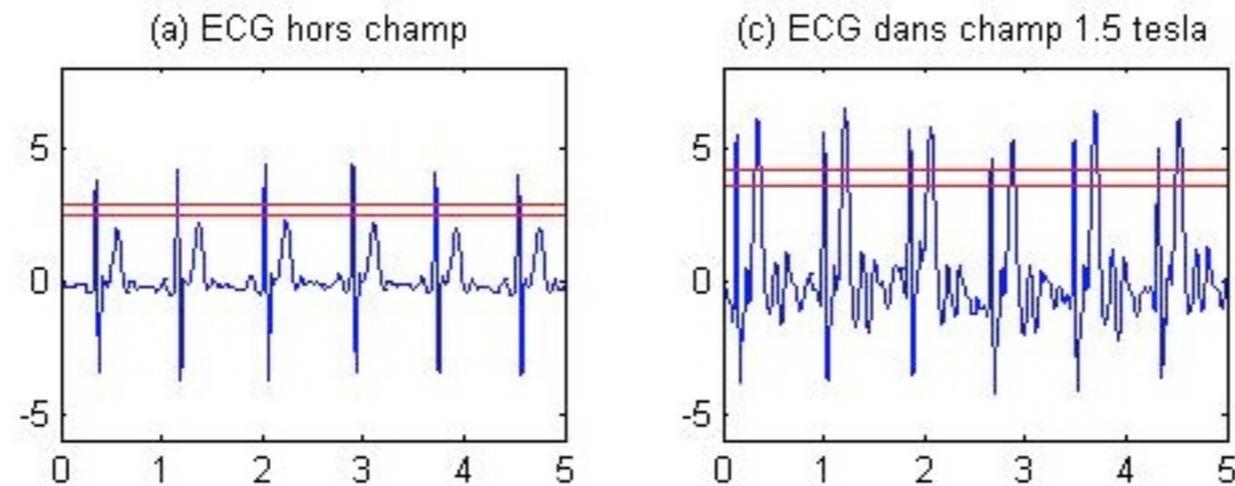
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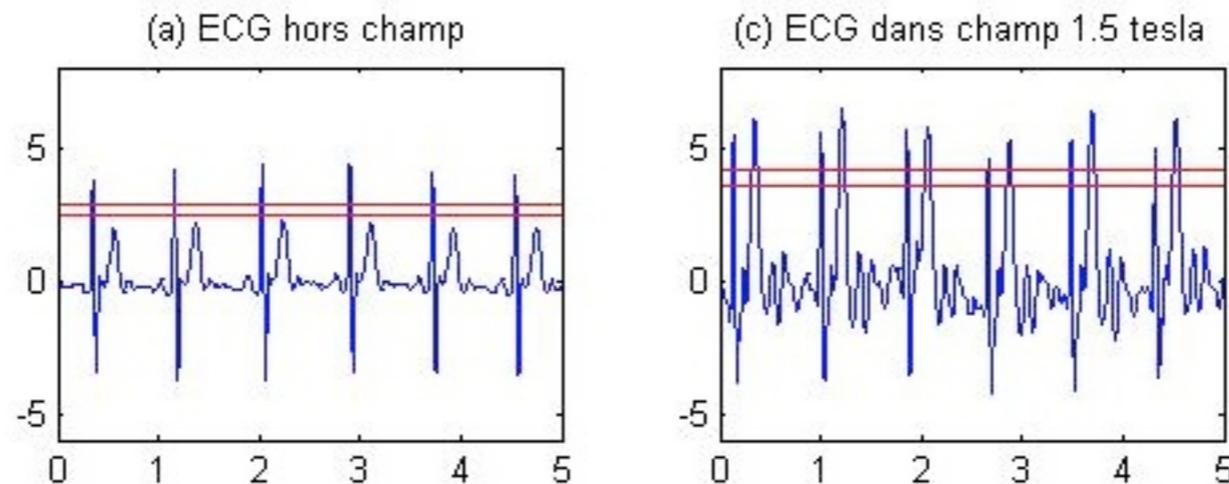
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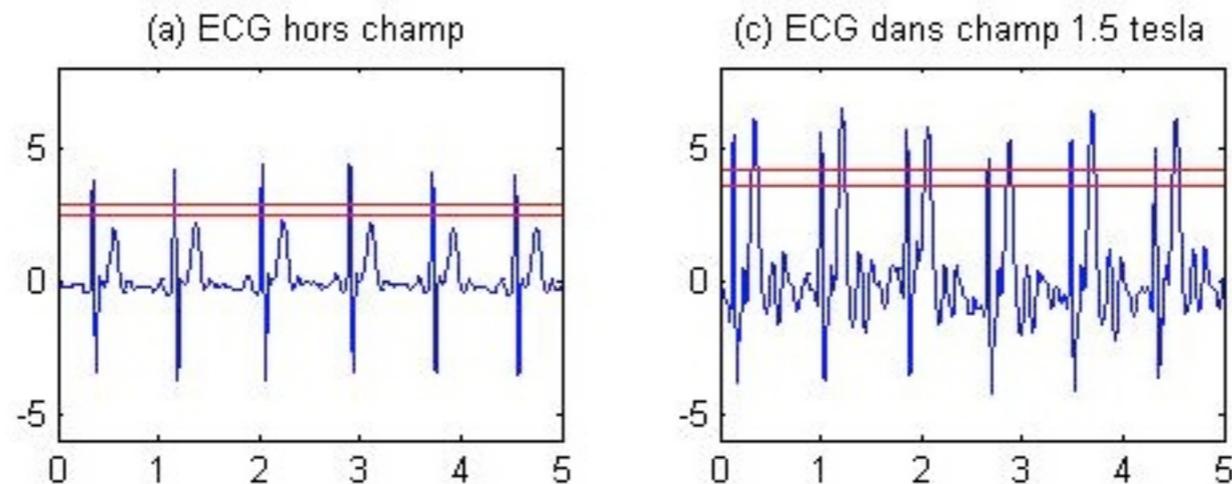
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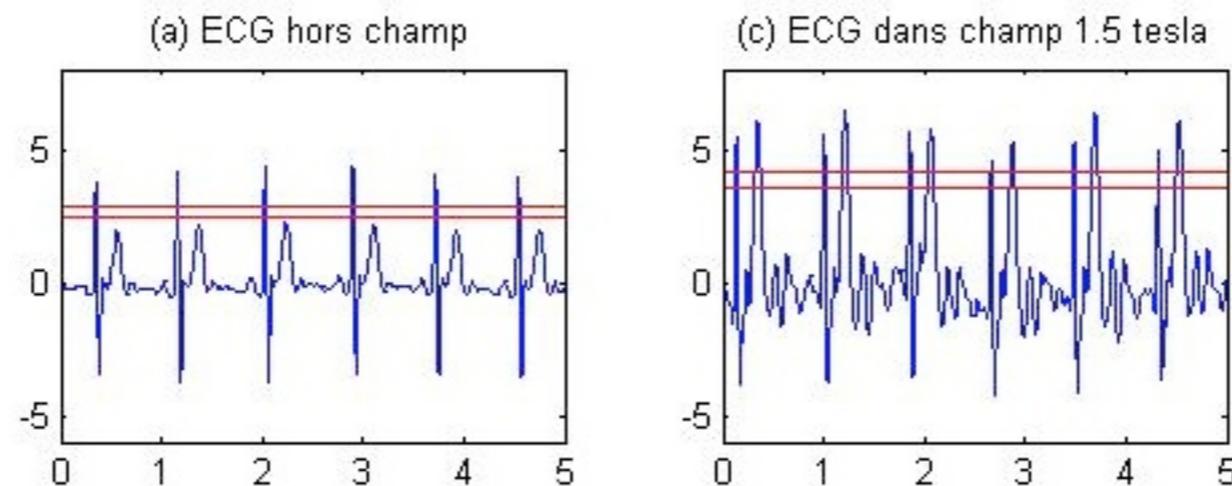
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MHD and blood flows

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$$\left\{ \begin{array}{l} \frac{\partial \mathbf{u}}{\partial t} + \mathbf{u} \cdot \nabla \mathbf{u} - \frac{1}{Re} \Delta \mathbf{u} + \nabla p = -\frac{Ha^2}{Re} \nabla \Phi_T \times \mathbf{B} + \frac{Ha^2}{Re} (\mathbf{u} \times \mathbf{B}) \times \mathbf{B}, \\ \text{div } \mathbf{u} = 0, \\ \text{div} \left(\frac{\sigma}{\sigma_0} \nabla \Phi_T \right) = \text{div} \left(\frac{\sigma}{\sigma_0} \mathbf{u} \times \mathbf{B} \right) \end{array} \right.$$

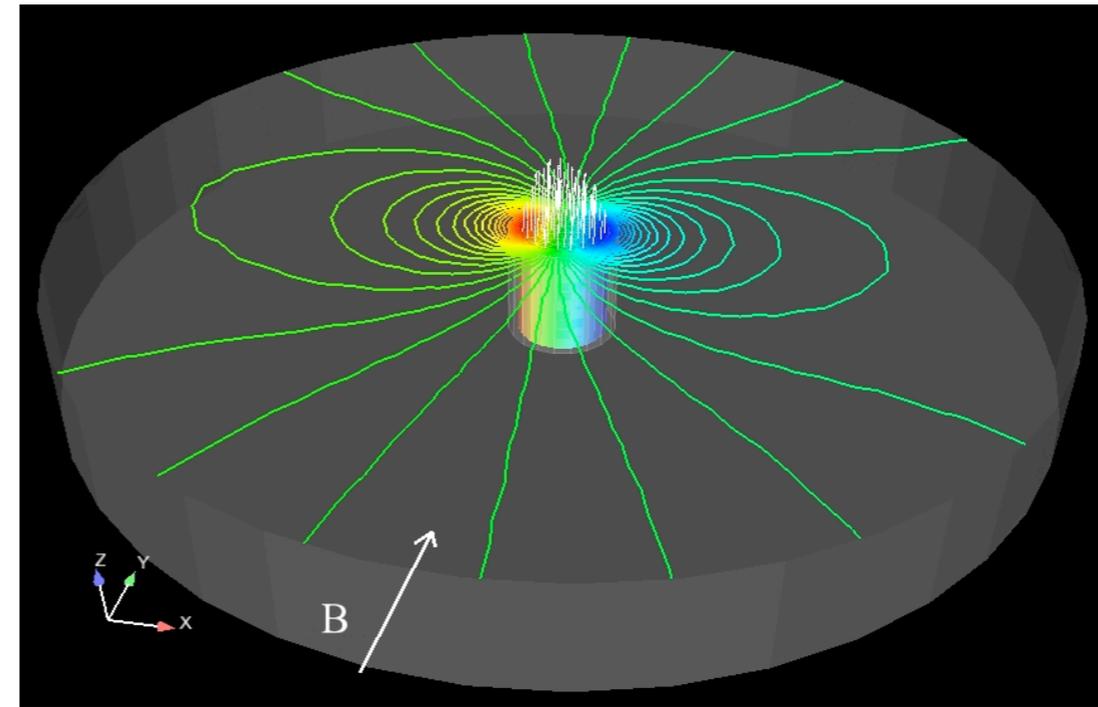
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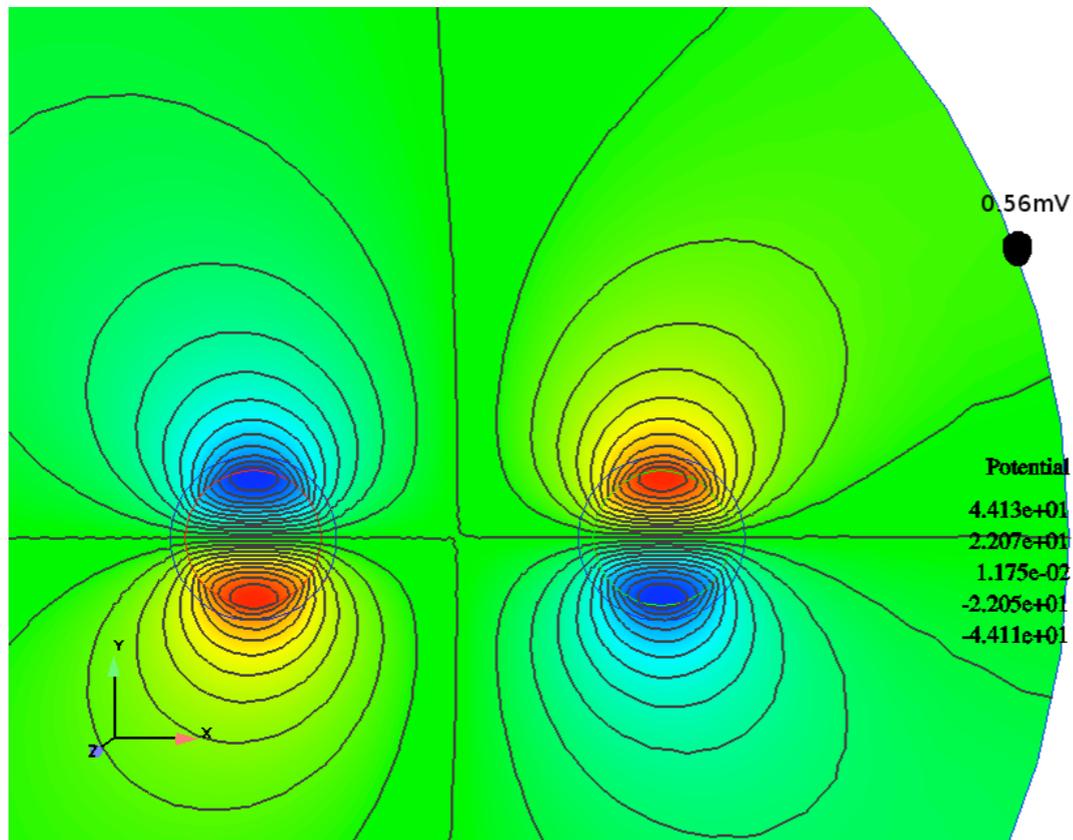
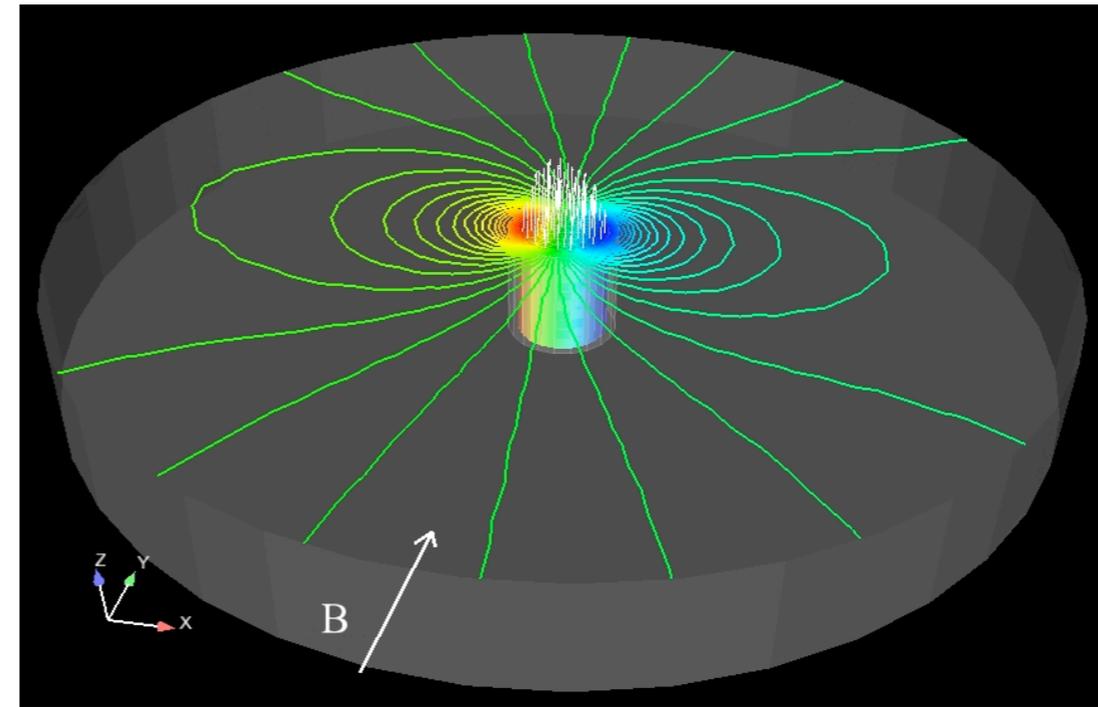
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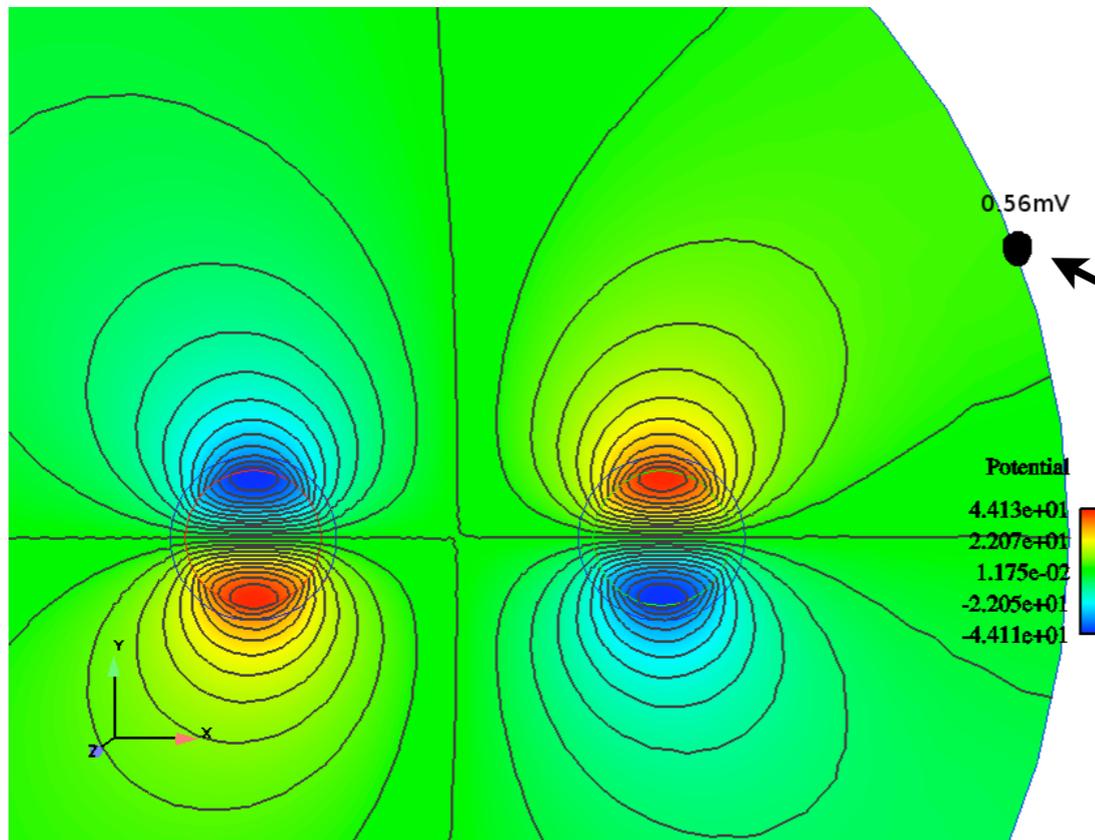
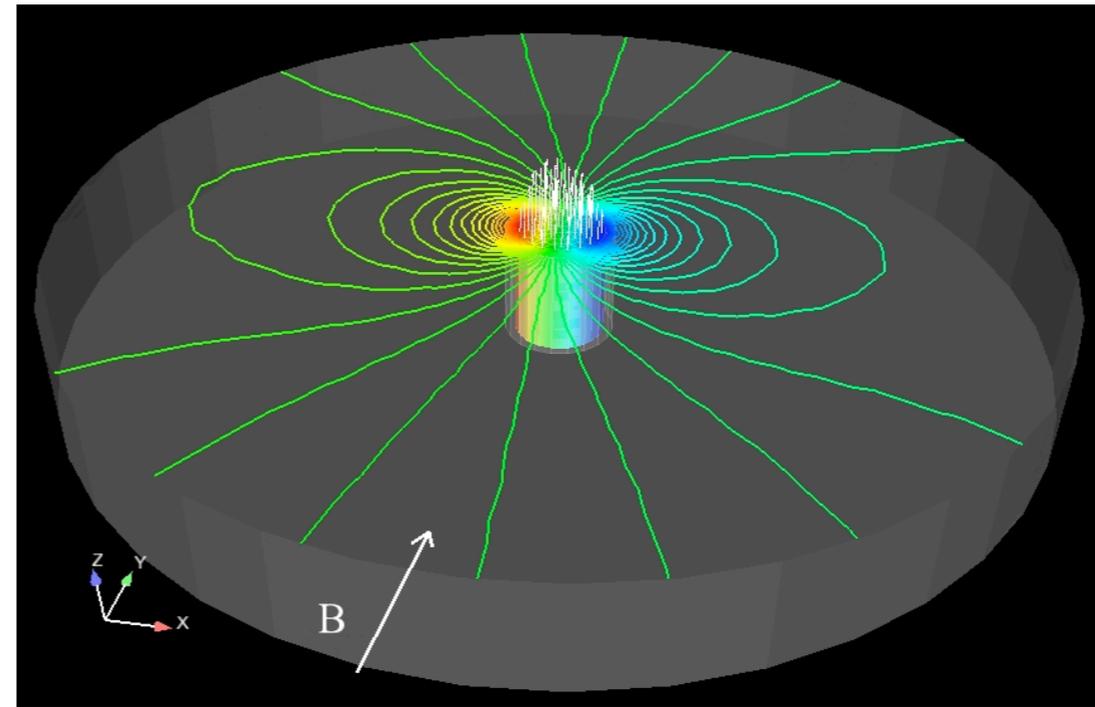
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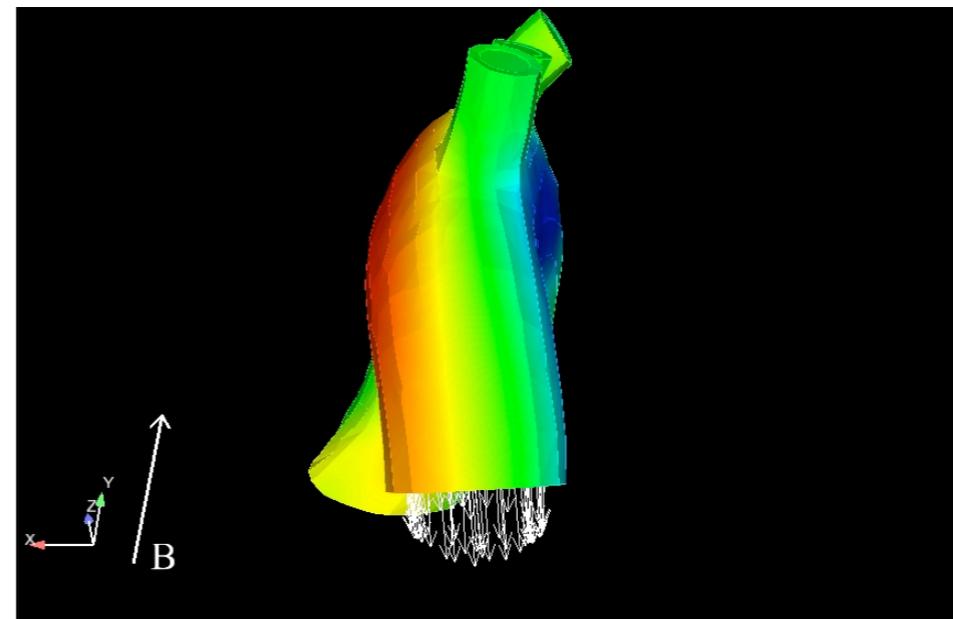
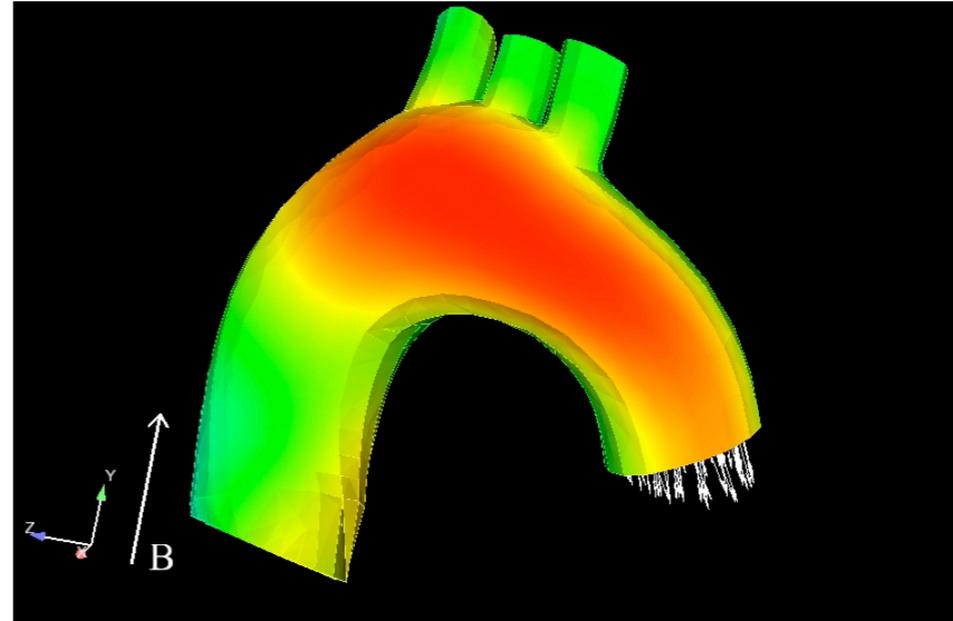
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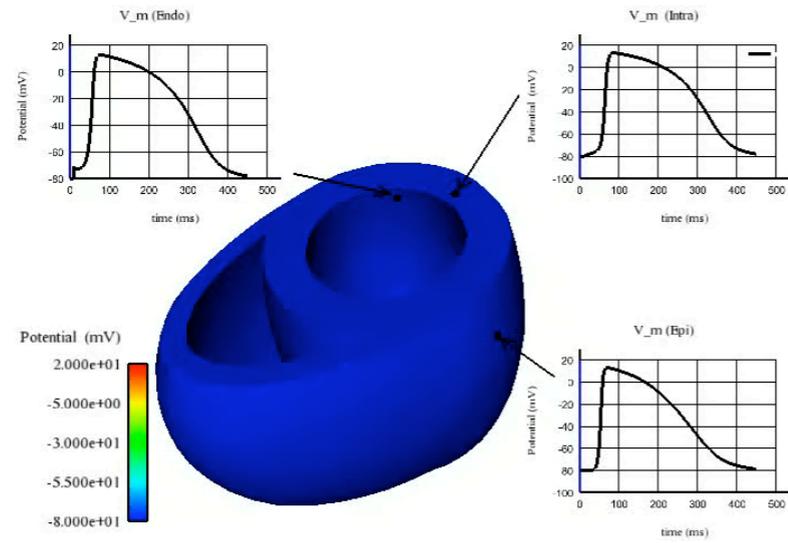
2D value = 0.57 mV

MHD in blood flows

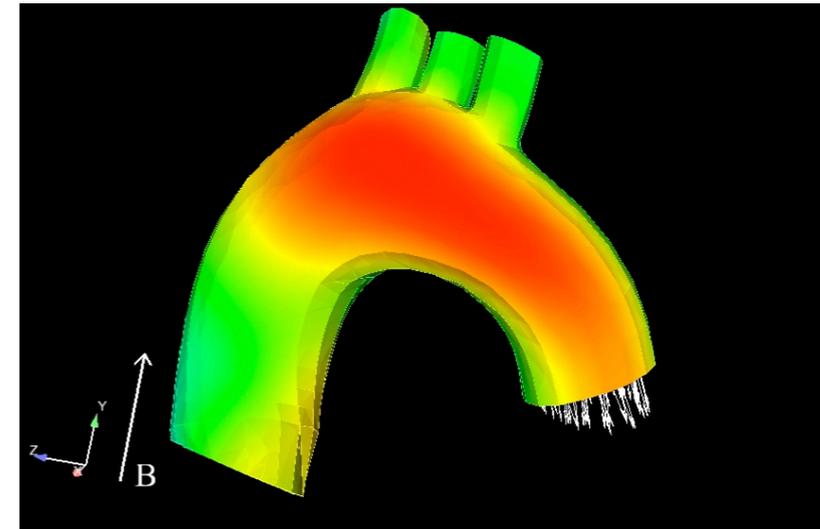
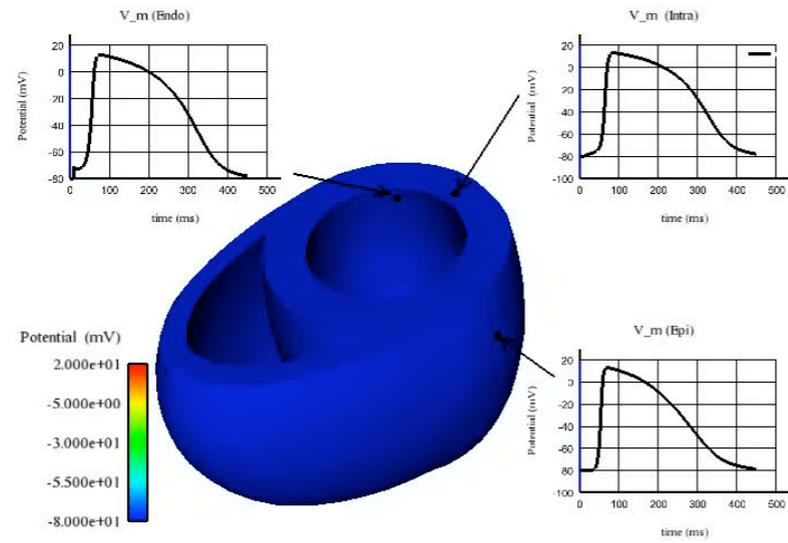
- Preliminary results:



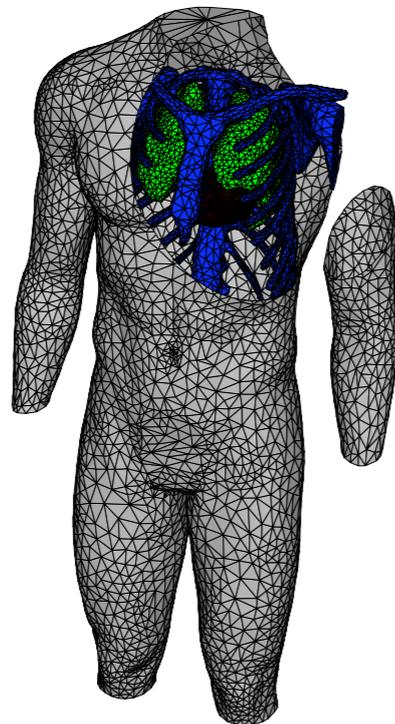
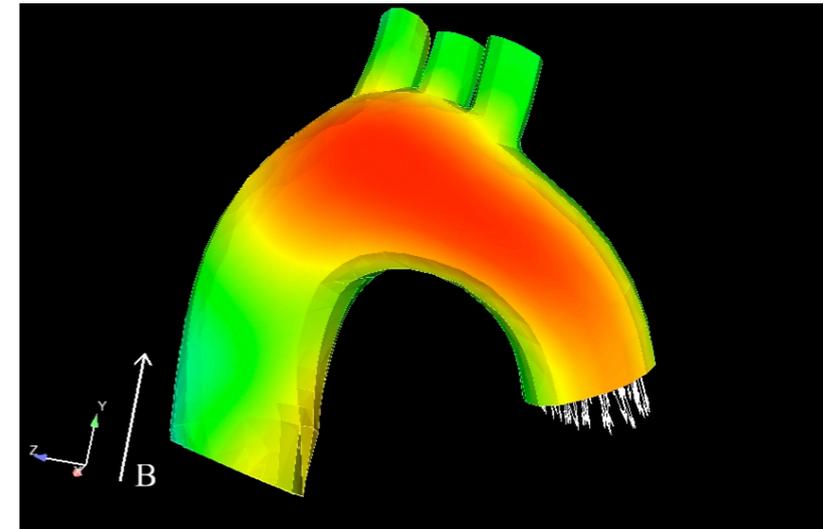
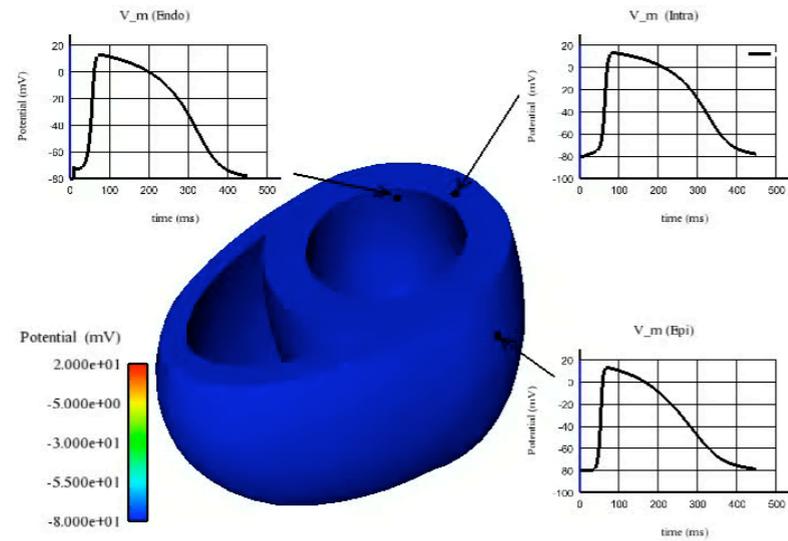
MRI & MHD : summary



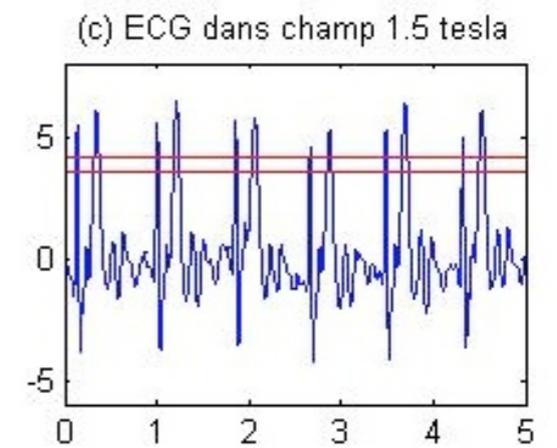
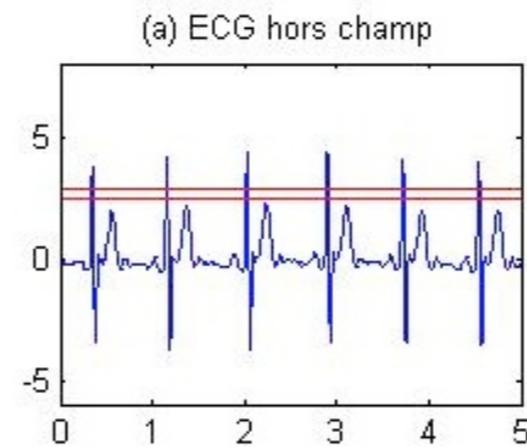
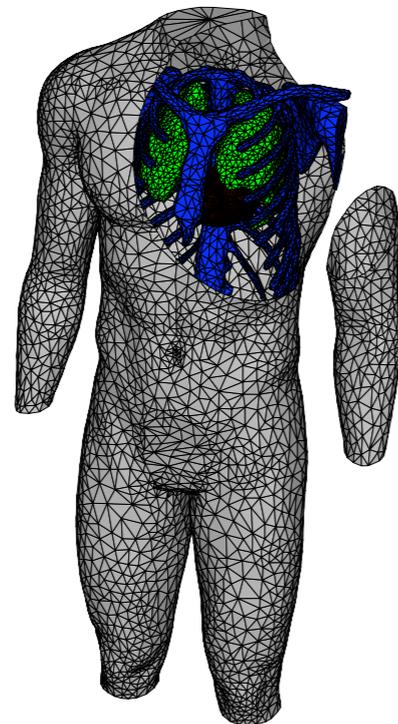
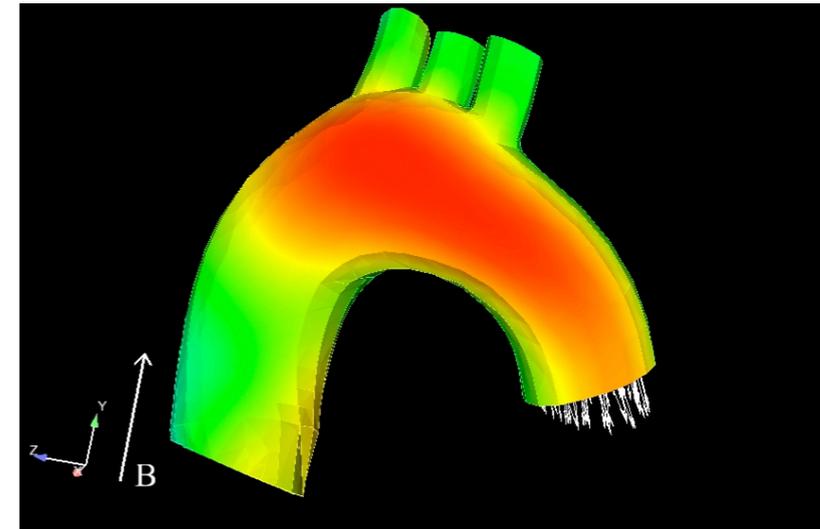
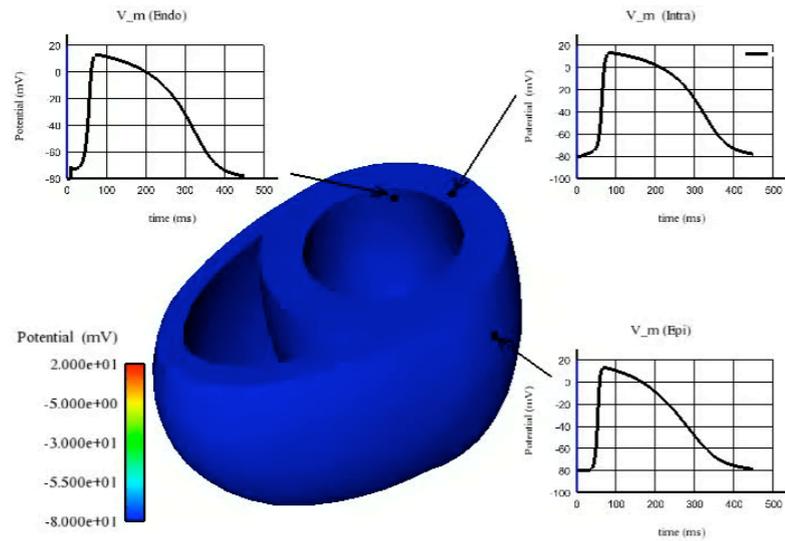
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Collaborators

- M. Astorino
- M. Boulakia
- N. Diniz dos Santos
- L. Dumas
- L. El Alaoui
- G. Ebrard
- M.A. Fernandez
- C. Grandmont
- V. Martin (*UTC*)
- O. Pantz (*Ecole Polytechnique*)
- E. Phé (*INRIA, Macs/Reo*)
- K. Traoré
- M. Thiriet
- I. Vignon-Clementel
- M. Vidrascu (*INRIA, Macs*)
- N. Zemzemi



The REO team, june 2007 (INRIA Paris-Rocquencourt / Univ. Paris 6)