



Prof. T. Fukuda Dept. of Micro/Nano Systems Engineering Nagoya University





• Principal Vascular Diseases • Treatments



Aneurysms in Major Vasculature (Inner Diameter >6mm)

Grafts Implants





(TERUMO) Polyethylene, ePTFE



Stenosis



Aneurysms in Minor Vasculature (Inner Diameter >6mm)

Endovascular Intervention



Catheters



Platinum

Coil



Ballon Catheter





• Need in the Medical Field

1. Medical Training Methods



Simple Model



Experiments in Animal

3. Implants for Minor Vasculature

Grafts Implants Produces :

- Early Occlusion
- Intimal Hypertrophy

2. Quantitative Evaluation Methods



Stress Simulation



Oshima Lab.Tokyo Univ.





Adv. Mater. 2005 Implant combining Cell Culture in Scaffold and Grafts





Patient Specific Vascular Modeling



Specification:

- Information: CT or MRI.
- Modeling Resolution: 13 mm
- Fabrication Time: < 24 hours

[S. Ikeda, JRM 2005]







Patient-Tailored Biological Model of Cerebral Artery

PATIENT-TAILORED MODELING



Patient's Information (CT / MRI Information)

[S. Ikeda, JRM 2005]





Implantation solution for small diameter

Three required conditions for artificial graft with small diameter (less than 6.0 mm)

- Biodegradability, biocompatibility
 Porous structure
- ③: Mechanical properties close
- to native blood vessel's properties.

Problems of previous studies



Only for tubular shape.
 No scaffold imitating the configuration of native blood vessel.





The EVE Nagoya University Micro-Nano Systems Department Fukuda Laboratory



Challenging the Frontier of the Surgical Simulation since 1989





Active Catheters (1989-1996)



•Adds maneuverability to the catheter

• Endovascular techniques are new in minimally invasive surgery

•Need to be compatible wit Xrays

• Requires micro systems as catheters has about 1 mm of lumen



[S.Guo, J. of Robotics Soc. of Japan. 1996]





Force Sensor on catheter tip (1998)





In-Vivo Experiment

•Pressure done by the catheter to an aneurism of canine was measured

• Blood pressure fluctuation was measured

[M. Tanimoto, Trans. of the JSME 1997]

• Prevents the damage of vessel wall

• A pressure sensor detects the force applied to the catheter tip



Force Sensor In Vivo Experiment Results





Telesurgery (1996)

Master Arm





[F. Arai, IEEJ Trans. on Elec. 1997]

Slave Device









Telesurgery (1997)



Telesurgery System

- Reduces the X-rays irradiation to physicians
- Manipulated from outside of the surgical room

[F. Arai, IEEJ Trans. on Elec. 1997]

•First catheter manipulation mechanism using gum rollers

• Master device as human interface for catheter manipulation



Experimentation inside surgical room





Linear Stepping Mechanism 1 (2003)



F. Arai et al., ICRA 2002

Time (sec)





Linear Stepping Mechanism 2 (2003)





Linear Stepping Mechanism 2 (2003)

•Variable speed of insertion and extraction of catheter (Feeding force 2N)

- Variable rotation speed
- •High resolution of discrete linear motion of catheter (up to 0.1 mm/cicle)



Rotation

• Easy to clean



Forward at Variable Speed

F. Arai et al., ICRA 2002



reciprocating distance of grasping unit





Development of Simulator & Construction of Patent







Patient Specific Vascular Modeling



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[S. Ikeda, JRM 2005]







Patient-Tailored Biological Model of Cerebral Artery

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[S. Ikeda, JRM 2005]





Solid Vessel Model



Reproduces the Vessel Lumen with 13 mm Resolution

Patient-Specific Cerebral Arterial Model

<u>Fluoroscopic</u> <u>Information</u>



Membranous Vessel Model



Soft Vessel Model

Patient-Specific Vascular Model with Membranous Structure



<u>Membranous</u> <u>Structure</u> <u>Of Cerebral Artery</u>



Membranous Vessel Structure

[S. Ikeda, JRM 2005]

Soft Brain Structure Reproduces the Circumferential Soft Brain Structure

Patient-Specific Vascular Model with Circumferential Brain Structure





Brain Structure around Cerebral Artery





Reproduction of Physical Characteristics

Elastic Property Reproduction

	Young's Modulus [MPa]	Poisson's ratio	
Arterial Model	1.9	0.46	
Arterial Tissue	1~3 (Carotid Artery)	0.45	

Simulation Results



Reproduction of Viscoelastic Vascular Deformation [S. Ikeda, JRM 2005]

Frictional Property Reproduction

	Friction Coefficient	Lubricating Condition
Arterial Model	0.041	Surfactant
Arterial Tissue	0.039	Blood Serum



Reproduction of Aneurismal Pulsation





Clinical Application



Preclinical Testing with Presented Cerebral Arterial Model (Makoto Negoro, Dept. of Neurological Surgery, fujita Health University)

[S. Ikeda, JRM 2005]



Application to Practical Procedure





Procedures that can be simulated:

- Catheter and Guide Wire Insertion
- Aortic Stents Grafts
- Carotid Artery Stenting (CAS)
- Cerebral Artery Embolism with coil or balloon
- Percutaneous Transluminal Angioplasty (PTA) with a balloon or stents.
- •Percutaneous Transluminal Coronary Angioplasty (PTCA)
- Transcatheter Hepatic Artery Embolization (THAE)
 Percutaneous Transluminal
- Recanalization (PTR)

Cerebral Artery Embolism Treatment Simulation







Realtime Stress Visualization







Quantitative Stress Analysis

Formulation: Ratio of Transmitted Light = $4 c_1^2 c_2^2 \sin^2(Re_{ex}/2) \cos^2(Re/2)$ $+ \{ c_1^4 + c_2^4 + 2 c_1^2 c_2^2 \cos(Re_{ex}/2) \} \sin^2(Re/2)$ $+ c_1 c_2 \sin Re \{ (c_1^2 - c_2^2) \sin 2\theta$ $- c_1^2 \sin (2\theta - Re_{ex}/2) \}$

- *Re* : Retardation of object
- Re_{ex} : Retardation of 1λ plate
- θ : Direction of *Re*
- φ : Direction of Re_{ex}
- $c_1 = \sin \varphi, \ c_2 = \cos \varphi$

Calculate for R, G, B respectively

Color-Retardation Correlation [S. Ikeda, in Proc. of MICCAI 2005]







Whole Body Modeling







Robot Manipulation using a Magnetic Tracker





- Follow the catheter with the camera
- Manipulate the camera motion using a MMCS





Robot Manipulation using a Magnetic Tracker



[C.Tercero, JRM 2007]





Robot Manipulation using a Magnetic Tracker

Reference points inside silicone model of vasculature





Motion Capture Data (Maximum error 10mm)



Robot Manipulation with Magnetic Tracker





Robot Teaching using a Magnetic Tracker



Objective

Contribute for Development of an Autonomous Catheter Insertion System for Endovascular Surgery LSM3

•Develop an Aseptic and Efficient Catheter Insertion Mechanism

- •Motion Capture of Catheter Tip
- •Catheter Insertion Path Planning and Reconstruction
- •Avoid Puncture of vascular membrane
- •Reduce the use of the Fluoroscope
- •Create catheter prototypes

Magnetic Tracker (MMCS)







Robot Teaching using a Magnetic Tracker

- Collect coordinates of reference points with the magnetic tracker
- Associate each collected coordinate to a desired command to be sent to LSM at each point.
- Put the tracker inside LSM at the entrance of the model

Sparse

LUT

• Reproduce path automatically

Vector of the Sparse LUT $\vec{P}_n = (p_{yn}, p_{yn}, p_{zn}, C_{0n}, C_{1n}, C_{2n}, C_{3n})$



[C.Tercero, JRM 2007]



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MMCS

Robot Teaching using a Magnetic Tracker

Path given to the robot



Path Reconstruction



Motion Capture of Catheter Trajectory Maximum (Error 6 mm)







Numerical Evaluation of Catheter Performance

Objective:

- Create an in-vitro numerical evaluation method for catheter performance
- Compare numerically MMCS probes to a Medical Use Catheter

Requirements:

- Evaluation field similar to human vasculature
- For each evaluation homogeneous manipulation of the catheters is needed
- A method to register the catheter performance [C.Tercero, IJMRCAS 2007]



Photo-elastic Effect



Linear Stepping Mechanism 3





Numerical Evaluation of Catheter Performance

Method to deduce performance



Experimental Setup and Trajectory



Evaluated Catheters





Numerical Evaluation of Catheter Performance

Local Maxima of Birefringence Captured with all the prototypes



- When birefringence appears the correlation coefficient between consecutive video frames is reduced
- Minimum correlation and average correlation is then calculated and normalized

1) Performance Above Medical use Catheter

2 Performance below Medical use Catheter

C1 Medical use catheter

[C.Tercero, IJMRCAS 2007]



1. Photoelastic Stress Analysis Theory







3. Membrane Thickness Measurement



Relation Between Blue Light Intensity and Laser Microscope Measurements



- $T_c = 1666.66$ $R^2 = 0.99$
- $I_B = Blue Light Intensity$
- $I_{BMax} = Maximum I_B$

[C.Tercero, IEEE/ASME Trans. on Mech 2010]





4. Photoelastic Coefficient Measurement

Stress Measurements in Thin Membrane

• Force Sensing

 $\sigma_1 - \sigma_2 = \frac{1}{LD} = \frac{1}{CD}$

 Photoelastic Stress Analysis

$$\sigma_1 - \sigma_2 = \frac{\text{Re}}{CD}$$

$$C = \frac{\operatorname{Re} L}{F} \Longrightarrow \quad \overline{C} = 1.284 \times 10^{-9} \, Pa^{-1}$$

Re



[C.Tercero, IEEE/ASME Trans. on Mech 2010]



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Measurement System to apply Variable Tension to the Membrane



5. Error Quantification

Stress Measurements in Pipe Model

Using pressure and radial deformation (Reference) 40 $\sigma_1 - \sigma_2 = \frac{2rP}{D} \left(\frac{r - D}{2r - D/2} \right)$ 8 30 % 30 20 **HBPS** Range 10 Photoelastic Stress Analysis $\sigma_1 - \sigma_2 = \frac{\text{Re}}{CD}$ $I_{GN} = \sin^2 \frac{\pi \text{Re}}{\lambda_G}$ 0 20 40 60 80 100 120 140160 180 Pressure(mmHg) - Photoelastic Stress Analysis - Reference Stress 2560 Average Stress in ROI (mmHg) 008 008 009 009 009 009 009 000 000 1920 1280 640 $\sigma_1 - \sigma_2$ (mmHg) HBPS Range Photoelastic Stress Analysis at 189mmHg 100 120 140 160 180 0 20 60 80

[C.Tercero, IEEE/ASME Trans. on Mech 2010]



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Pressure (mmHg)

6. Application to the Carotid Artery Model

• Stress Distribution Correction for each image column

$$(\sigma_1 - \sigma_2)'_{(x,y)} = (\sigma_1 - \sigma_2)_{(x,y)} + k \cos\left(\frac{2\pi y}{40}\right) ((\sigma_1 - \sigma_2)_{AVG(x,ROI)} - (\sigma_1 - \sigma_2)_{\min(x,ROI)})$$



Noise Suppression Filtering



$$S = \sum_{\substack{n=x_{-}5\\n_{=}y_{-}5}}^{x+5} P(n, y-5) + P(n, y+5)$$
$$+ \sum_{\substack{n=y_{-}5\\n_{=}y_{-}5}}^{y+5} P(x-5, n) + P(x+5, n)$$

If the S<1400 then P(x,y) must be zero

[C.Tercero, in Proc. of ISR 2010]





9. Three Dimensional Visualization of Photoelastic Stress Analysis

- Sinograms of Thickness and Retardation were registered using a rotary scan
- Slices of were reconstructed using ML-EM Method



Slices of Stress in pipe at different pressures





3D Scanner and Blood Vessel Model

3D Visualization of Photoelastic Stress Analysis of Pipe Segment



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[M. Matsushima, IROS2010]



Hybrid Pump

Objective:

Reproduce Human blood flow and pressure variation using a Hybrid Pump

Requirements:

- •Low inertia to allow fast changes on the flow rate.
- •Sustain a minimum pressure of 90 mmHg
- •Do not introduce vibration on the vascular model







Hybrid Pump

Piston Head Mechanism



- ABS Plastic body and lobes
- Stainless Shafts and Transmission
- Stainless Bearings
- Gearbox

[C. Tercero, SYROCO 2009]



Hybrid Pump and Photoelastic Stress Analysis

System Setup

Human Blood Pressure Simulation

Human Pressure

Guide Wire and Human Pressure Simulation

Hybrid Pump and Photoelastic Stress Analysis

Human Pressure Simulation

Time

Catheter +Human Pressure Simulation

[C. Tercero, IJAT 2009]

Hybrid Pump For Scaffold Evaluation

		I					
	160			1	٦	<u>۸</u>	
1mHg)	140				h f		
	120		$ \land \land$			_\/	
	100					\'	
re (n	80	/	· V ·	- V			V
Pressur	60 40	~~~~~		- Refe	erence Signa	l (Polynomial)]
	-0	•					
	20						
	0		1	1	1	1	1
		0 1.03	2.06	3.08	4.09	5.11	6.13
				Time(s)			

Waveform	command signal		PLCL Scaffold Evaluation			
Average Error (mmHg)	5.07	I				
Maximum Pressure (mmHg)	154.35	Diastolic	Systolic	Systolic Diameter		
Minimum Pressure	83.79		and the second second	(mm)		
(mmHg)			and the second second	Diastolic Diameter		
Maximum Error	15.55			(mm)		
(mmHg)				Diameter at relaxation		
<u>C. Tercero, SYR</u>	OCO 2009]			state (mm)		

Response to pressure waveform

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6.11

5.94

5.3

Final goal of this research

Implantation of tailor-made artificial blood vessel, fabricated in-vitro, in the place of diseased blood vessel.

Three steps to achievement the goal

Development of small diameter scaffold, which is

①Small diameter scaffold three dimensional and tailor-made

2 Multi layer scaffold imitating human blood vessel

(3) Three dimensional cell culture to grow patient's cells on the scaffold

Fabrication method of scaffold

Macro technology

Relation between porosity and Young Modulus

Fabrication method of the 3D carotid arterial scaffold

Developed porous scaffold

- Porous scaffold replicating the shape of a carotid artery
 Replicates human blood vessel elasticity (Young Modulus: 1.8 MPa)
- •Porous structure, which was constructed by elusion of salt particles, was confirmed.

Observation by SEM

Inner diameter of: Entrance 7.0 mm Exit 4.0 mm

[T. Uchida, J. of Biotech 2008]

Smooth muscle cell(SMCs)

Benefits of bi-layered scaffold

Elastic layer for withstanding blood pressure.High porosity layer as the base for ECs and SMCs.

[H. Oura, in Proc. of Robomec 2008]

Fabrication of bi-layered scaffold by Salt-leaching method

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Cross section of scaffold

Evaluation of porosity by image processing

Image processing

[H. Oura, in Proc. of Robomec 2008]

Experimental conditions

Chloroform:PLCL

NaCl : PLCL for inner layer

	NaCI : PLCL for outer layer				0:10 (Wt%)		
	Sample number			N=10			
	(%	30 25 20				 inner outer 	
	Porosity (15 10 5					
ar	ea	0 C	8:2 Soncentratio	6:4 n of NaCl :	4:6 PLCL for	2:8 1 st solution	

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100 : 5 (wt%)

8:2, 6:4, 4:6, 2:8(wt%)

10 (10/)

Blood Vessel Simulator and Surgical Operation System

T. Fukuda et al., IEEE Industrial Electronics Magazine, Vol. 4, pp. 13-22, 2010.

"In vitro" Realization of "In vivo" Environment ~Blood vessel~

