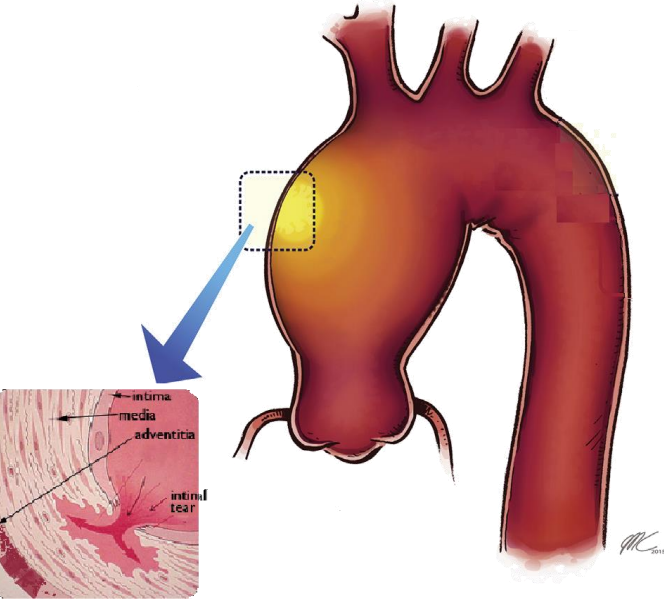


Digital twin: the journey towards better healthcare - Applications in cardiovascular medicine





OUTLINE

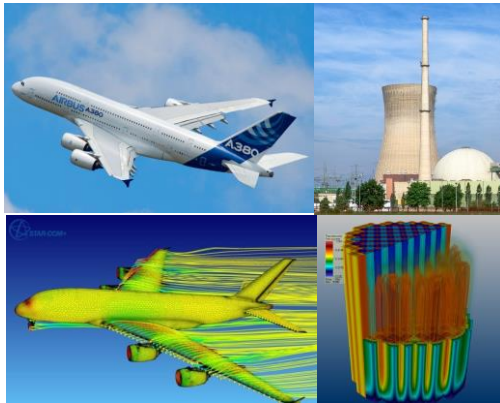
- ❑ PART I: Can computer models predict human health?
- ❑ PART II: The need of combining data driven and mechanistic models in cardiovascular mechanobiology
- ❑ PART III: From computer models to digital twins enabling precision medicine

OUTLINE

- ❑ **PART I: Can computer models predict human health**
- ❑ PART II: The need of combining data driven and mechanistic models in cardiovascular mechanobiology
- ❑ PART III: From computer models to digital twins enabling precision medicine

Numerical simulation was commonplace in automotive and aeronautics industry

In any other industrial sector



Testing is now done mostly with computer simulation

In healthcare

X X X X X X X X
X X X X X X X X
X X X X X X X ✓

Standard test for safety and efficacy of new products is by trial and error

Since 1989: a 30+ years journey



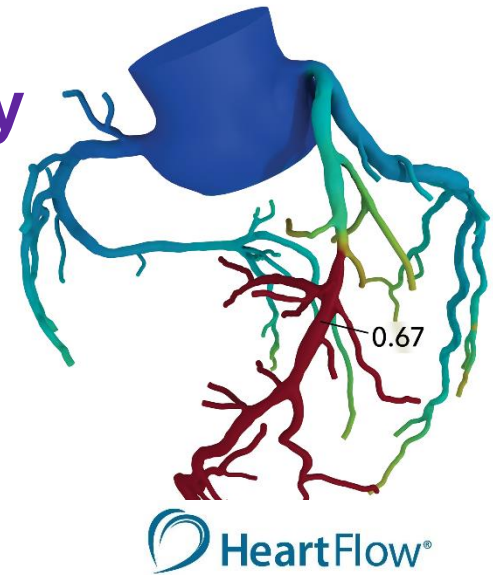
1993: Physiome



2005:
VPH



2007: STEP



2010: VPH Institute

In these 30 years the idea of an In Silico Medicine with Digital Twins for each patient, and In Silico Trials to test new products, moved from science fiction to an industrial reality



2016: Avicenna



Computational models can predict health!!

They even enable decisions everyday in healthcare thanks to ROM and AI



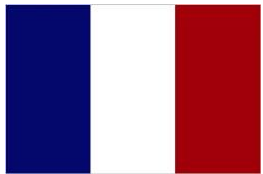
2014: FDA allows marketing of HeartFlow vFFR-CT tool for optimal treatment of coronary stenosis

Gaus S, *et al*, JCCT 2013, 7(5):279-88.



2019: FEops HEARTguide in silico tool for planning transcatheter aortic valve implantation is CE-marked

El Faquir N, *et al* Int J Cardiovasc Imaging 2019



2014: Sim&Cure



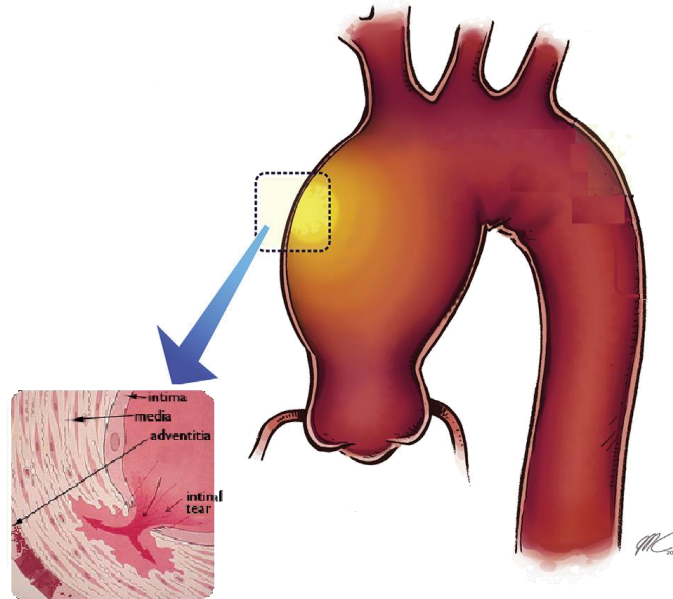
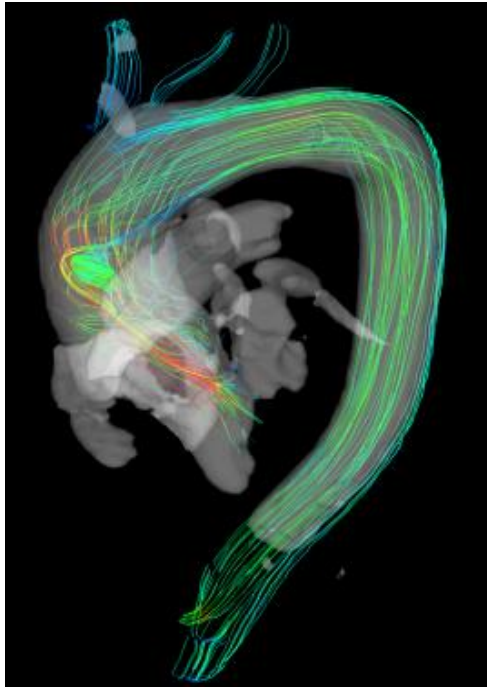
2017: Predisurge



My own experience on aortic aneurysms is the result of strong and historical collaborations with clinicians

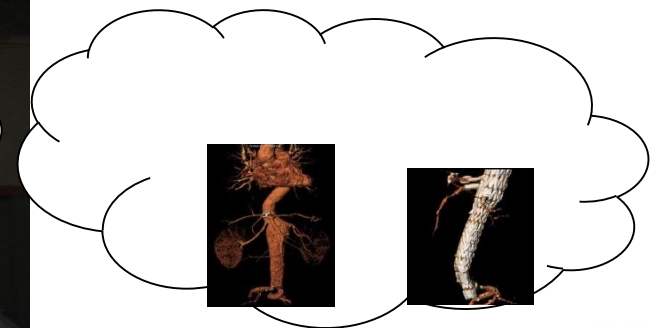
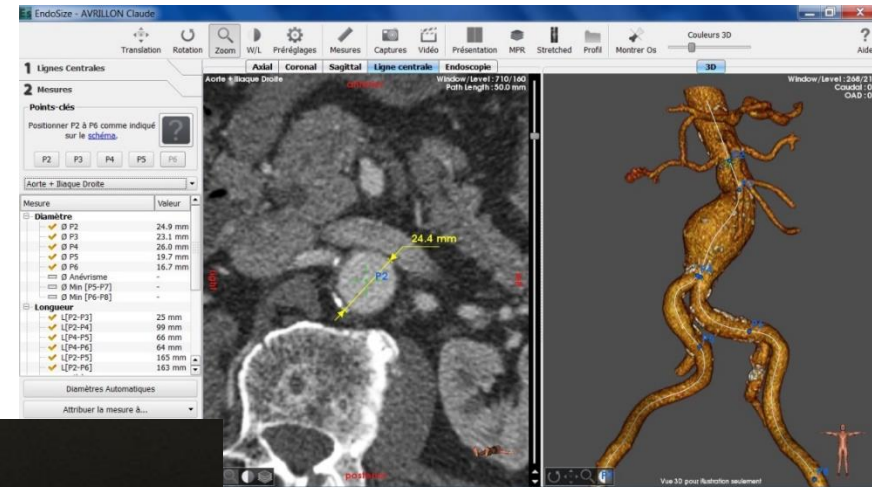
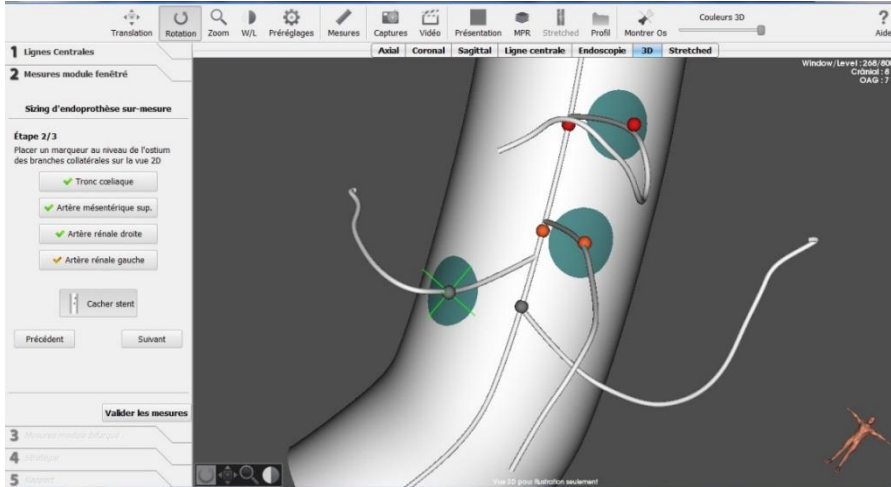


Aneurysms and Dissections of the aorta

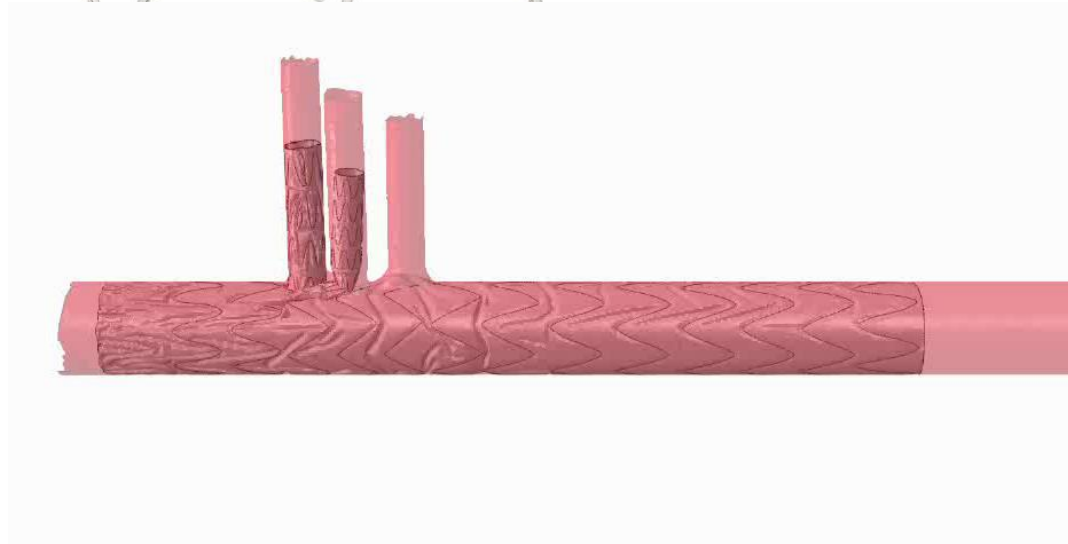
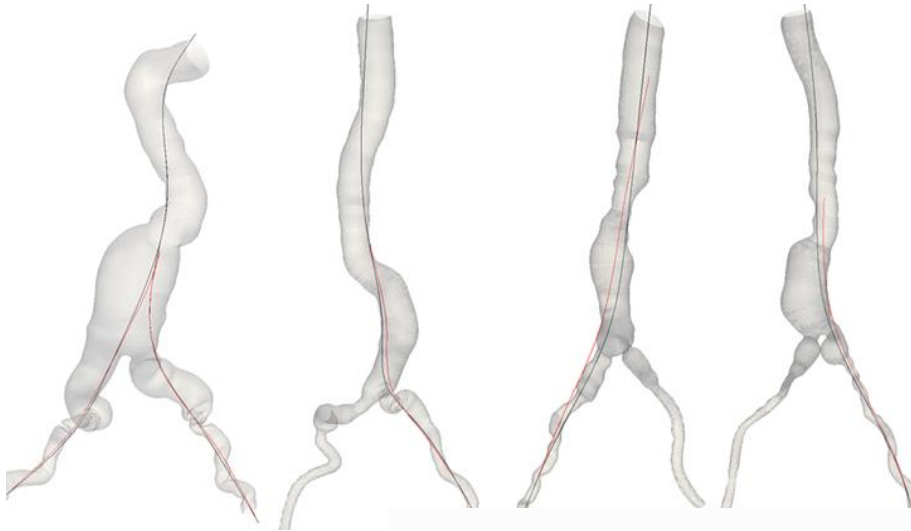


== Devastating complications!

Planification / sizing of fenestrated stent grafts in EVAR procedures



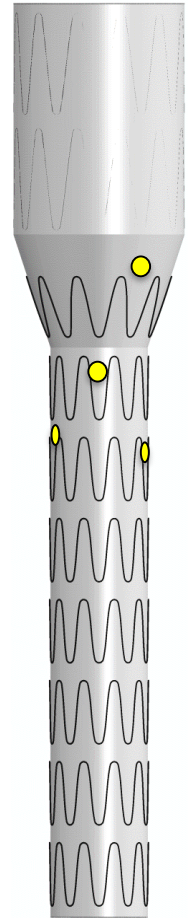
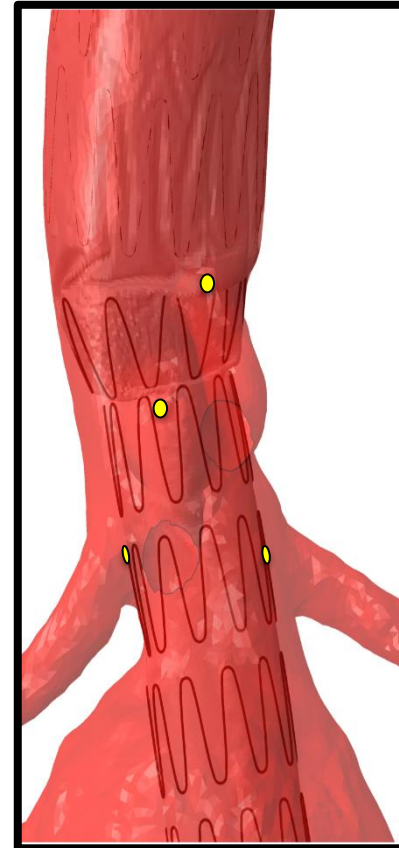
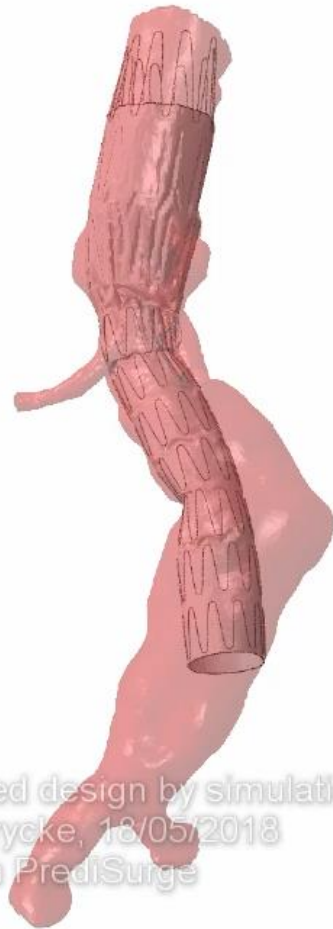
Simulation of stent-graft deployment



Clinically validated for FEVAR Zenith® Cook Medical



ALBERT CHENEVIER - JOFFRE-DUPLYTREN
EMILE ROUX - GEORGES CLEMENCEAU



Cook fenestrated design by simulation
Lucie Derycke, 18/05/2018
With PrediSurge

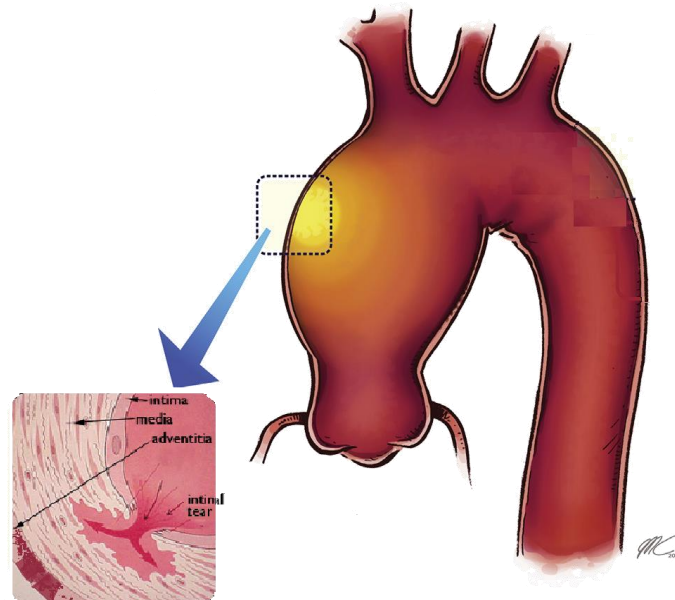
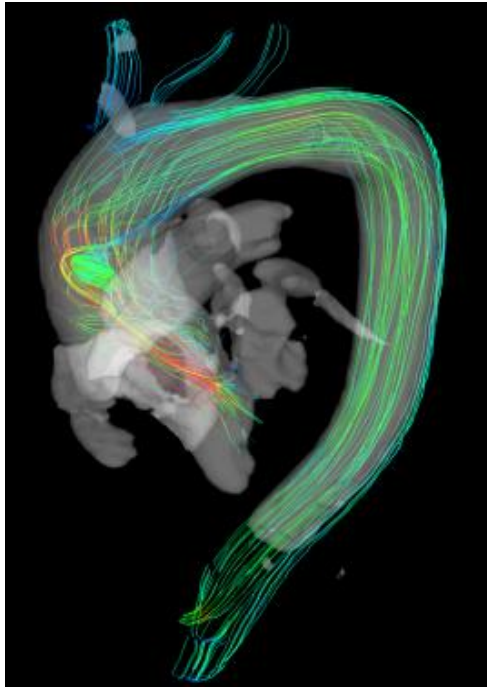
04-00



OUTLINE

- PART I: Can computer models predict human health
- **PART II: The need of combining data driven and mechanistic models in cardiovascular mechanobiology**
- PART III: From computer models to digital twins enabling precision medicine

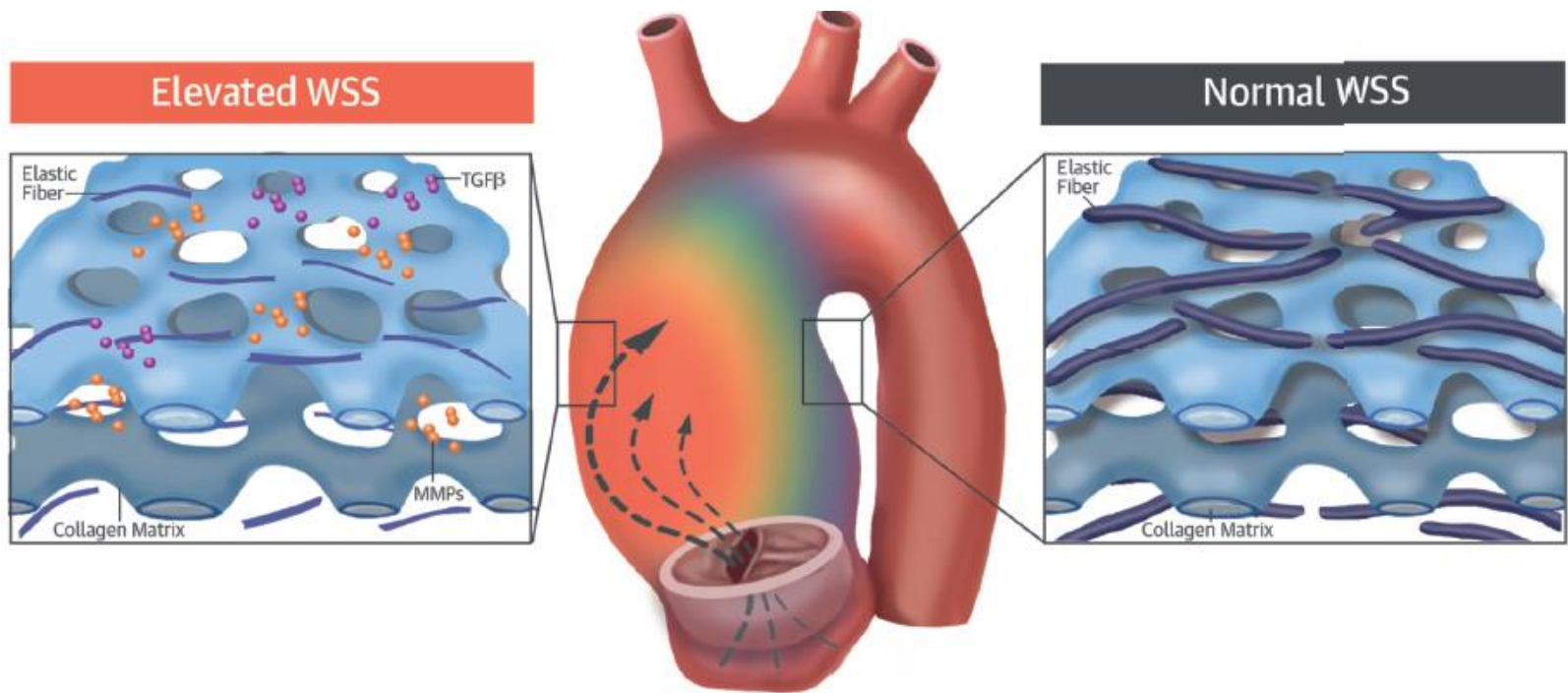
Aneurysms and Dissections of the aorta



Challenge: decision making to avoid aortic dissections!

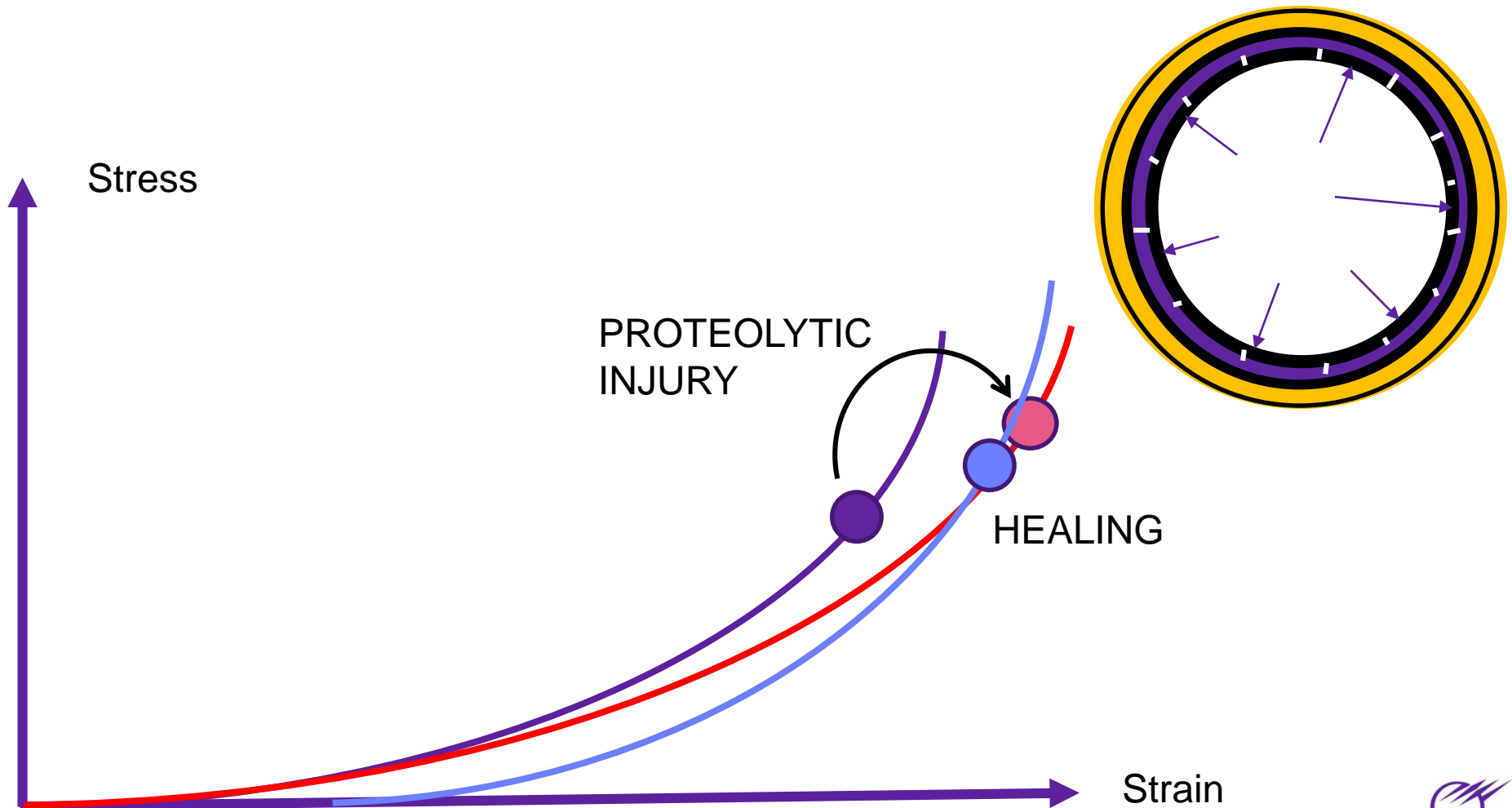
Mechanistic approach

ATAAs are triggered by local proteolytic injury, which induce adaptation in the ascending thoracic aorta



Guzzardi et al, JACC (2014), Condemi et al, IEEE TBME (2019)

Proteolytic injury and tissue adaptation



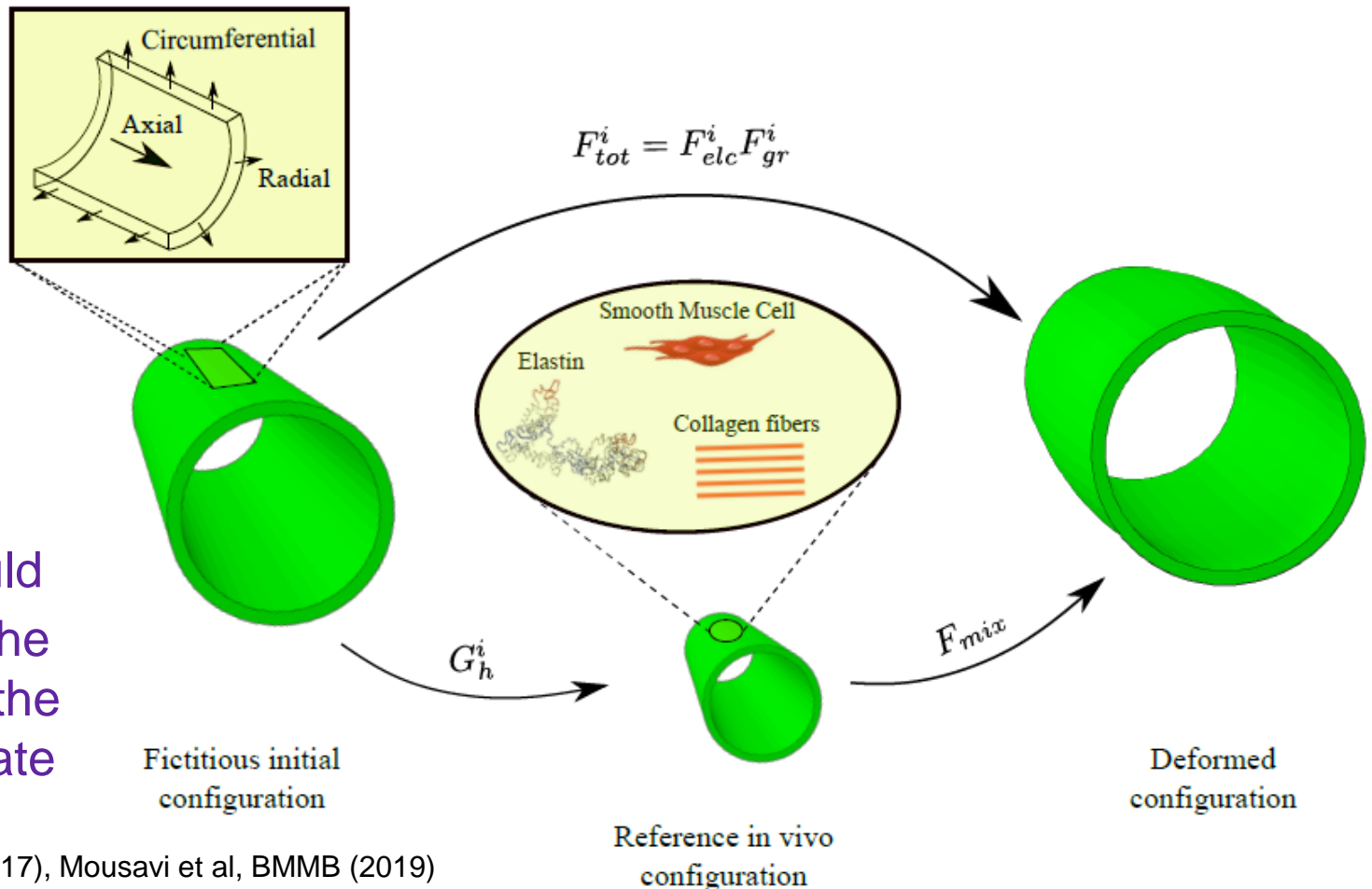
Mechanistic approach

Elastic and inelastic decomposition of deformation gradient

$$\mathbf{F}_{tot}^j = \mathbf{F}_{elc}^j \mathbf{F}_{gr}^j$$

$$\mathbf{F}_{gr}^j = \mathbf{F}_r^j \mathbf{F}_g^j$$

\mathbf{F}_r^j and \mathbf{F}_g^j should be updated if the artery is not in the homeostatic state



Mousavi & Avril, BMMB (2017), Mousavi et al, BMMB (2019)
Ghavamian et al, Front Bioeng Biotech (2020)

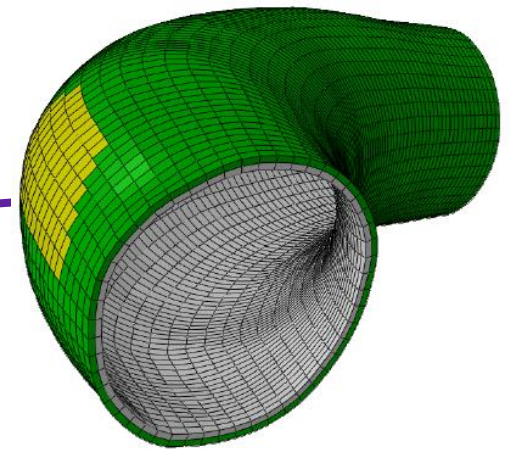
Mechanistic approach

Growth and remodeling of a two-layer patient-specific human ATAAs due to elastin loss

$$W = \varrho_t^e (\bar{W}^e(\bar{I}_1^e) + U(J_{el}^e)) + \sum_{j=1}^n \varrho_t^{c_j} W^{c_j}(I_4^{c_j}) + \varrho_t^m W^m(I_4^m)$$

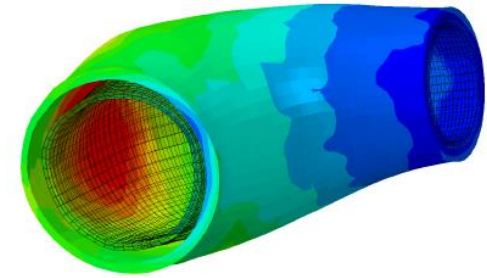
$$\dot{\varrho}^e = -\frac{\varrho^e(\mathbf{X}, t)}{T^e} - \frac{D_{\max}}{t_{\text{dam}}} \varrho^e(\mathbf{X}, 0) e^{-0.5 \left(\frac{X_3}{L_{\text{dam}}} \right)^2 - \frac{t}{t_{\text{dam}}}}$$

Localization function
around the point of
TAWSS max



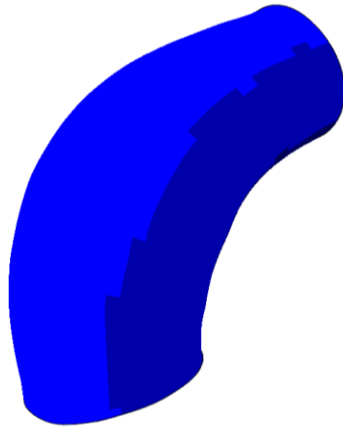
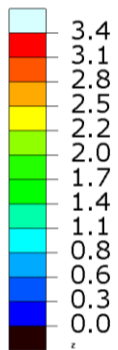
Patient-specific predictions

Growth and remodeling of a two-layer patient-specific human ATAAs due to elastin loss

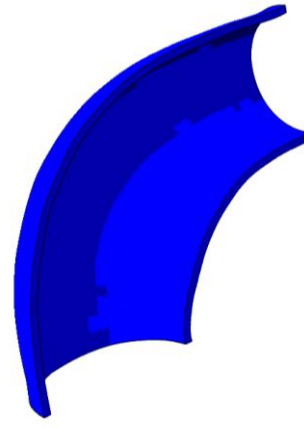
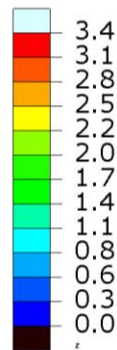


Small growth parameter

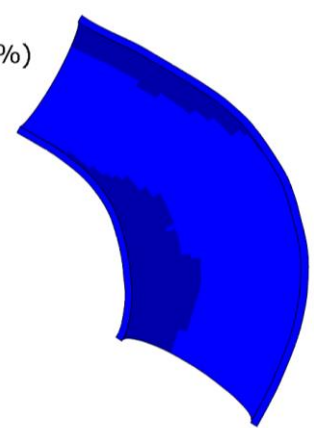
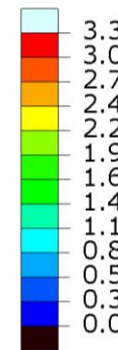
SDV69
(Avg: 75%)



SDV69
(Avg: 75%)



SDV69
(Avg: 75%)



Normalized Thickness

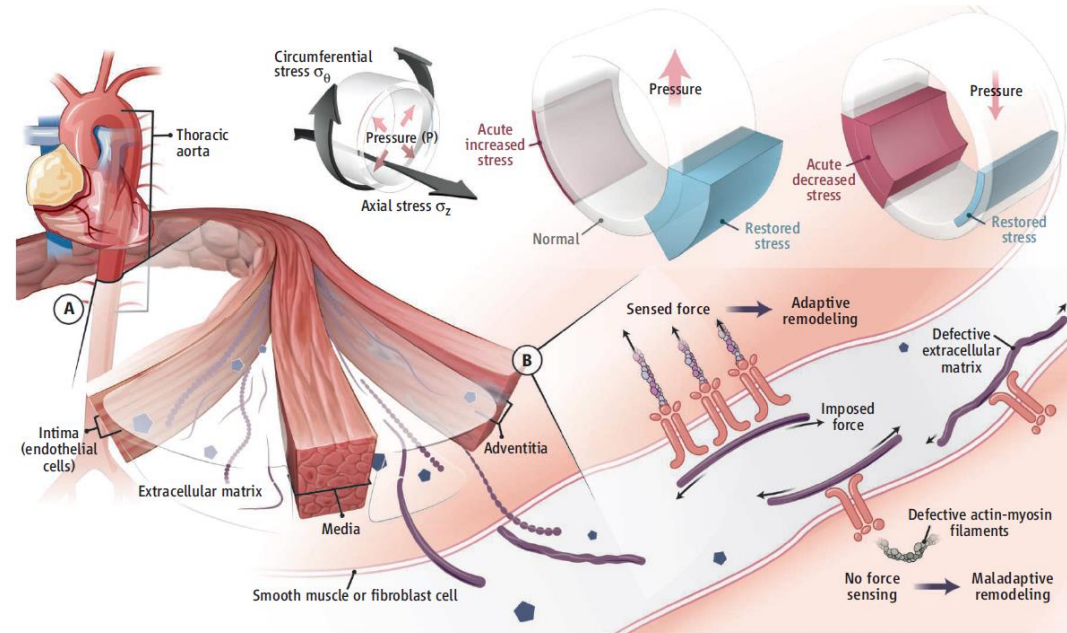
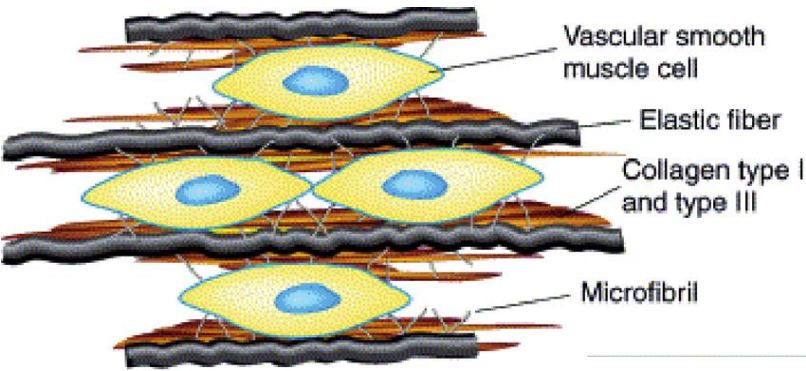
Mousavi et al, BMMB (2019)

Difficulties related to the inter-individual variability of aortic dissections

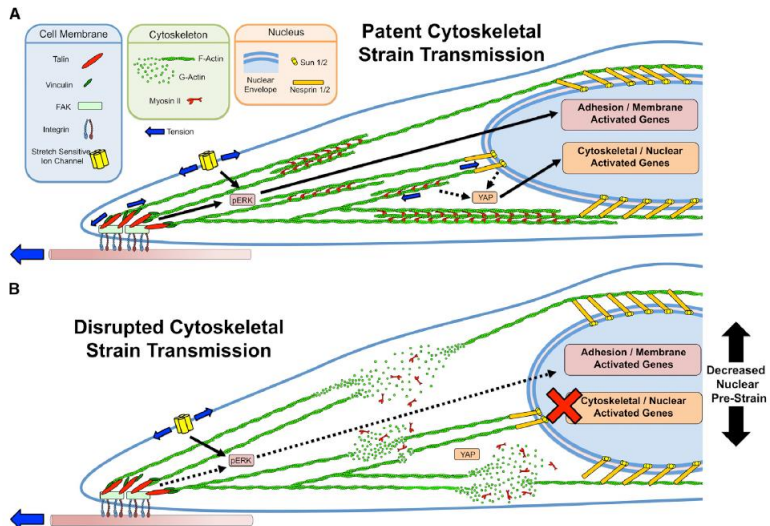
=> uncertain boundary and initial conditions



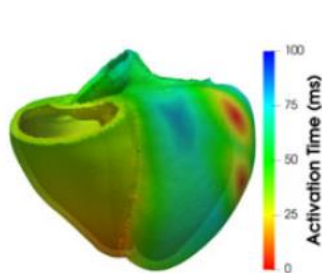
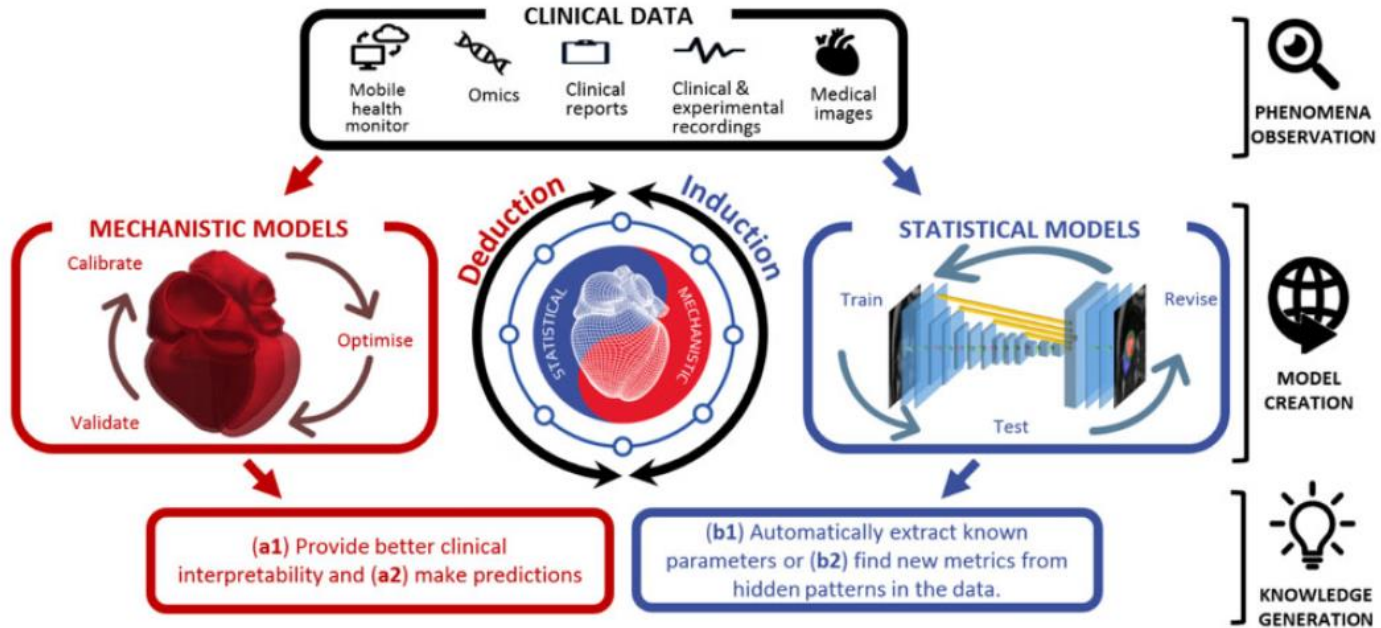
Difficulties related to the uncertainty of molecular and cellular biology



Humphrey et al, Science 2014



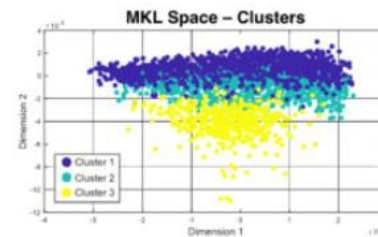
Solution: combining statistical models and the mechanistic approach



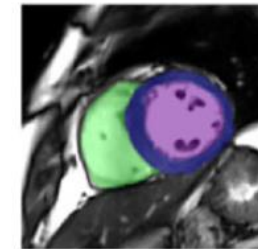
a1) Patient-specific electromechanical computer simulations



a2) A strain-based parameter based on myofiber mechanics simulations can help to predict CRT therapy response

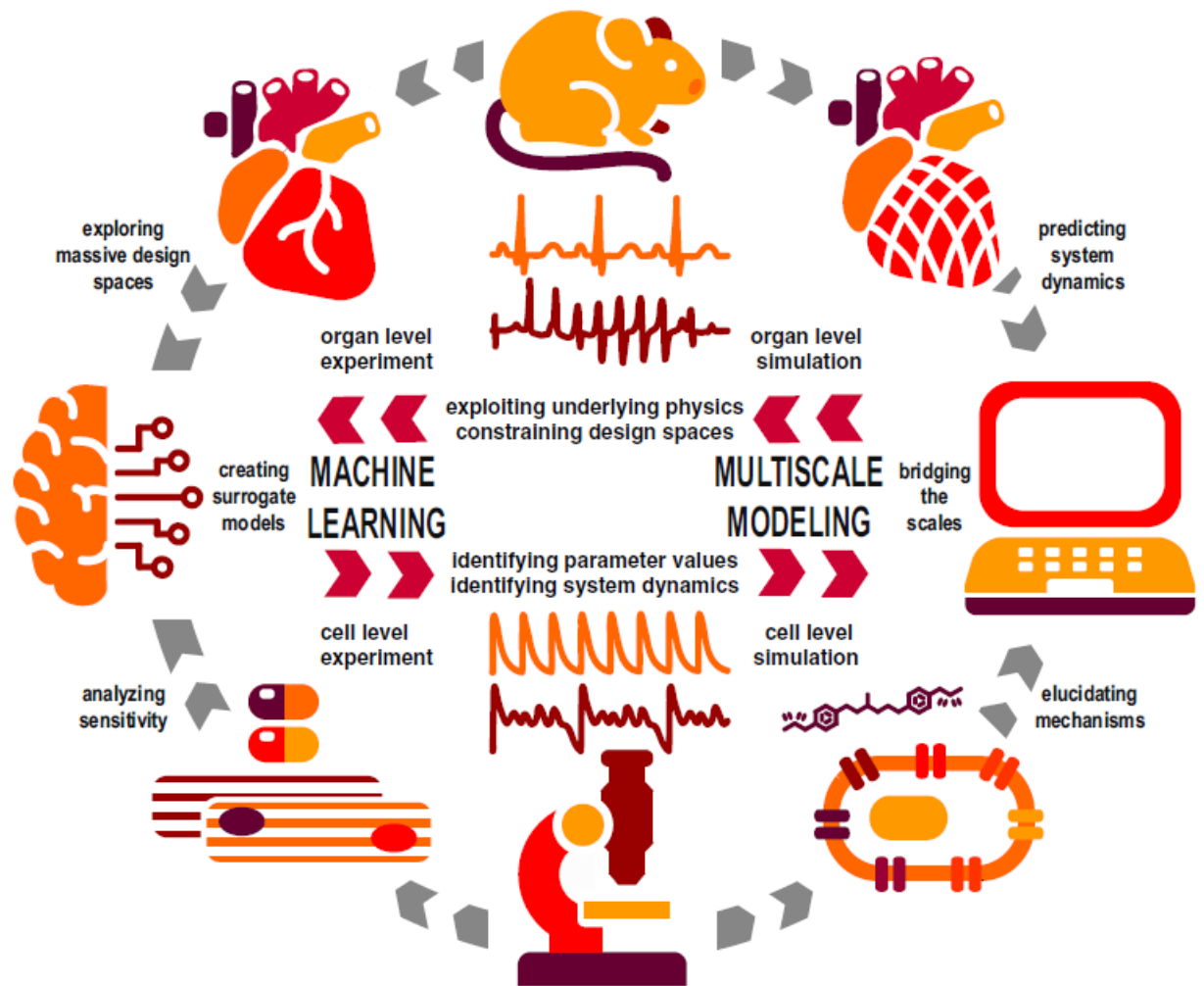


b2) Unsupervised machine learning can integrate clinical data to predict outcomes and categorize patients based on similarity



b1) Automatic cardiac MR segmentation using a deep learning neural network

Combining machine learning and traditional modeling

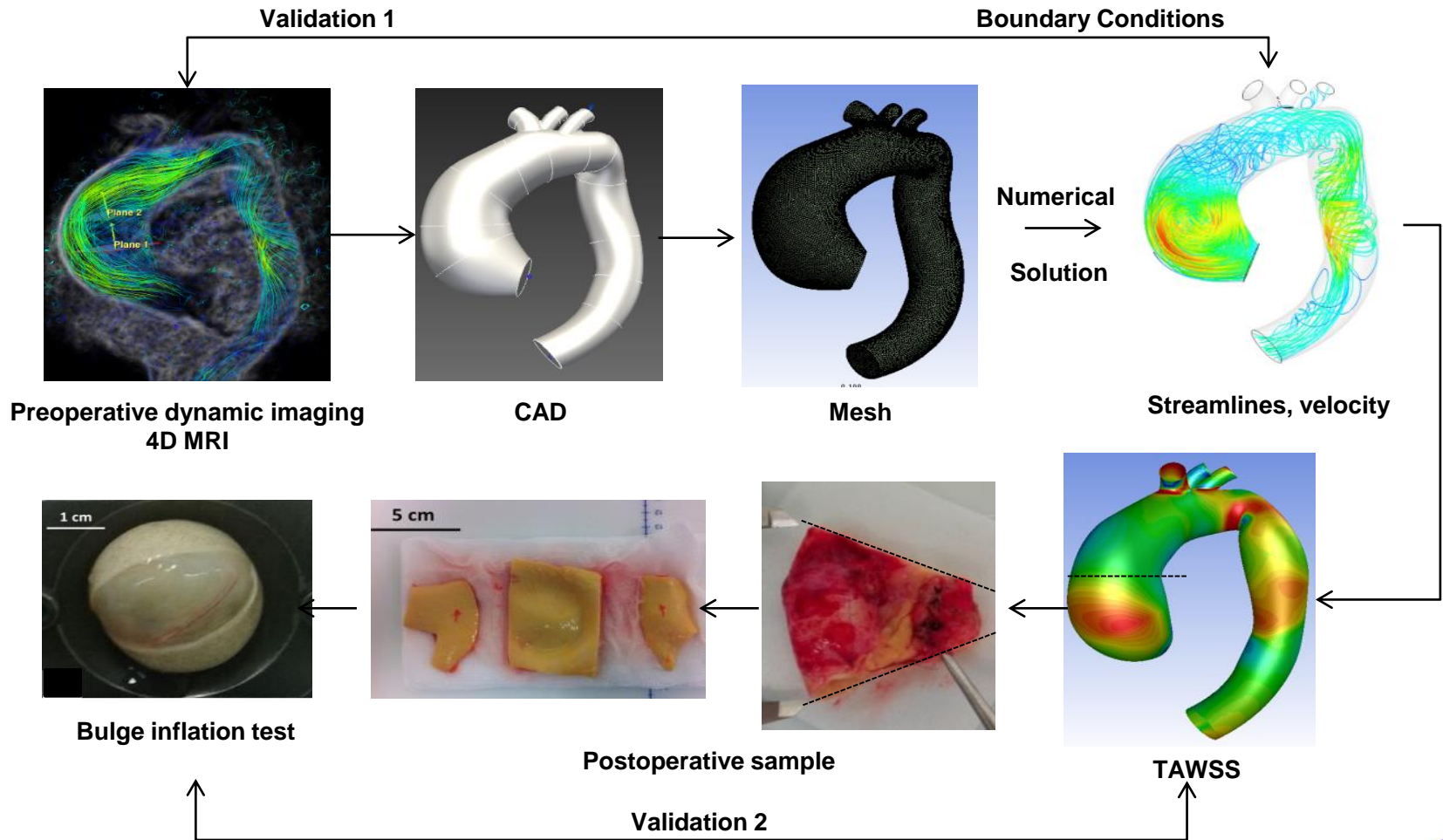


npj | Digital Medicine

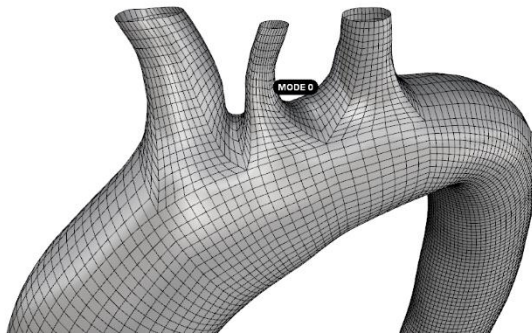
Integrating machine learning and multiscale modeling—
perspectives, challenges, and opportunities in the biological,
biomedical, and behavioral sciences

Mark Alber¹, Adrian Buganza Tepole², William R. Cannon³, Suvarnu De⁴, Salvador Dura-Bernal⁵, Krishna Garikipati⁶,
George Karniadakis⁷, William W. Lytton⁵, Paris Perdikaris⁸, Linda Petzold⁹ and Ellen Kuhl^{10*}

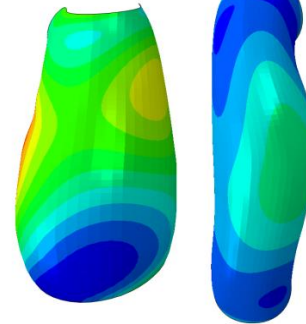
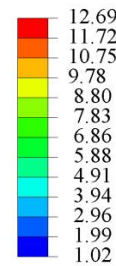
Learn boundary conditions, material properties and initial conditions from image analysis



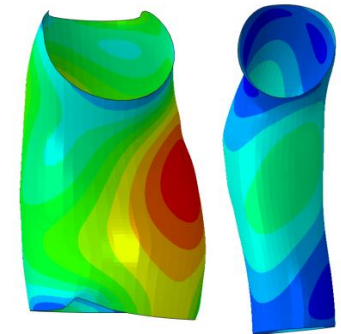
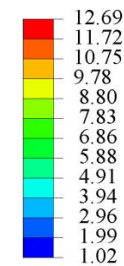
Learn boundary conditions, material properties and initial conditions from image analysis



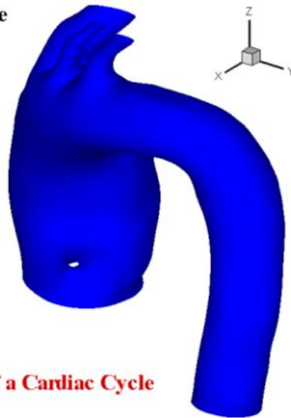
Stiffness [MPa.mm]



Stiffness [MPa.mm]

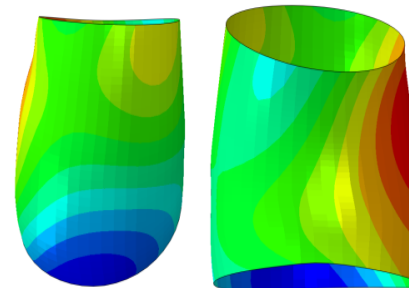
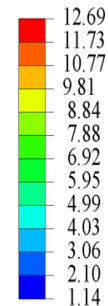


Time= 1th Phase

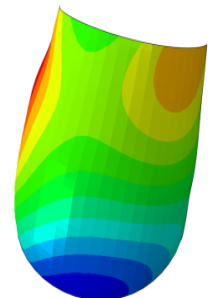
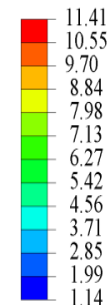


Ten Phases of a Cardiac Cycle

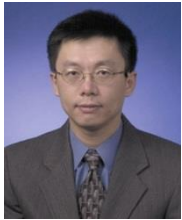
Stiffness [MPa.mm]



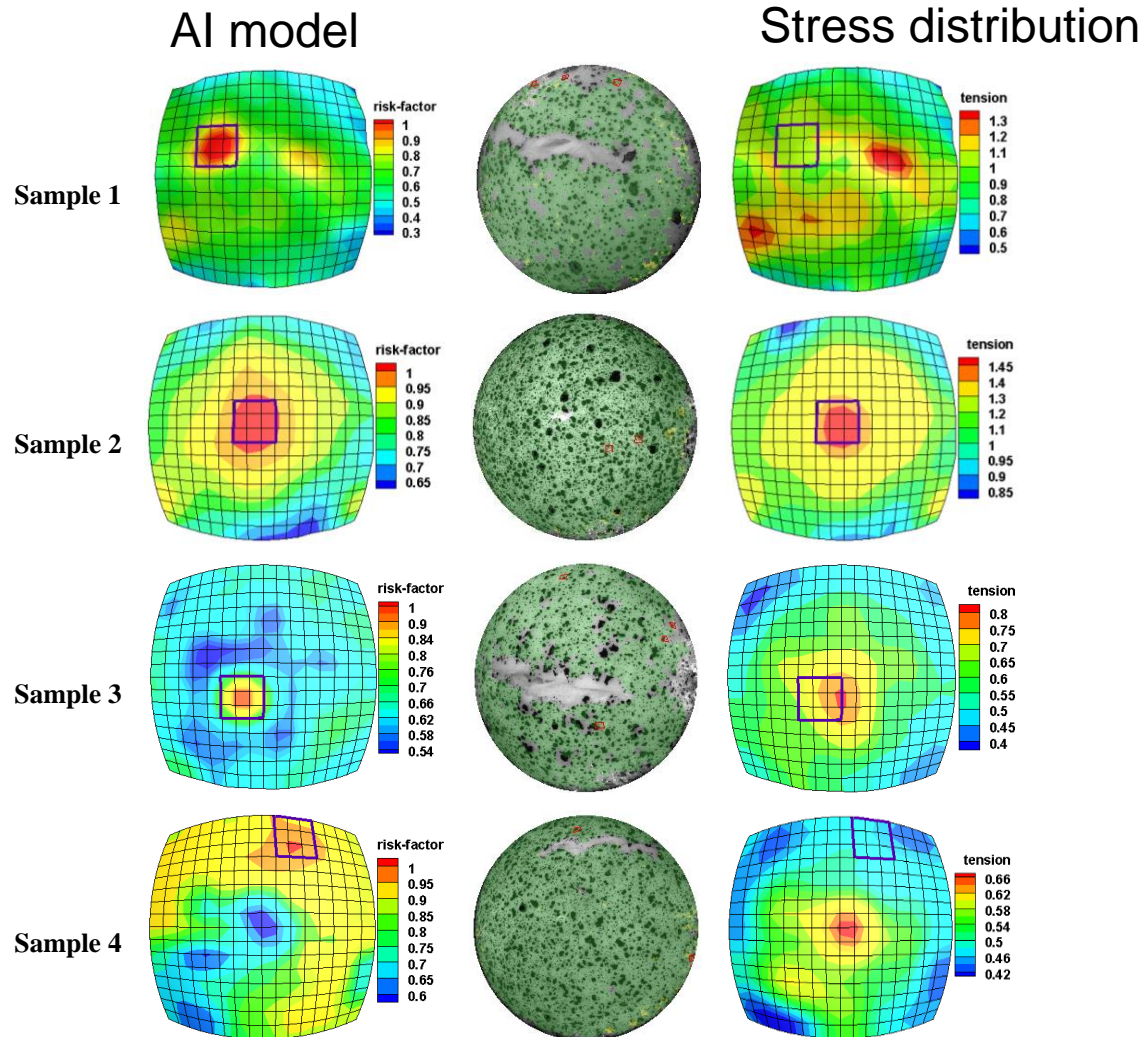
Stiffness [MPa.mm]



AI model of rupture criterion...



He et al. BMMB
– 2020
(Just accepted!)



Defining patient subgroups depending on genetic factors

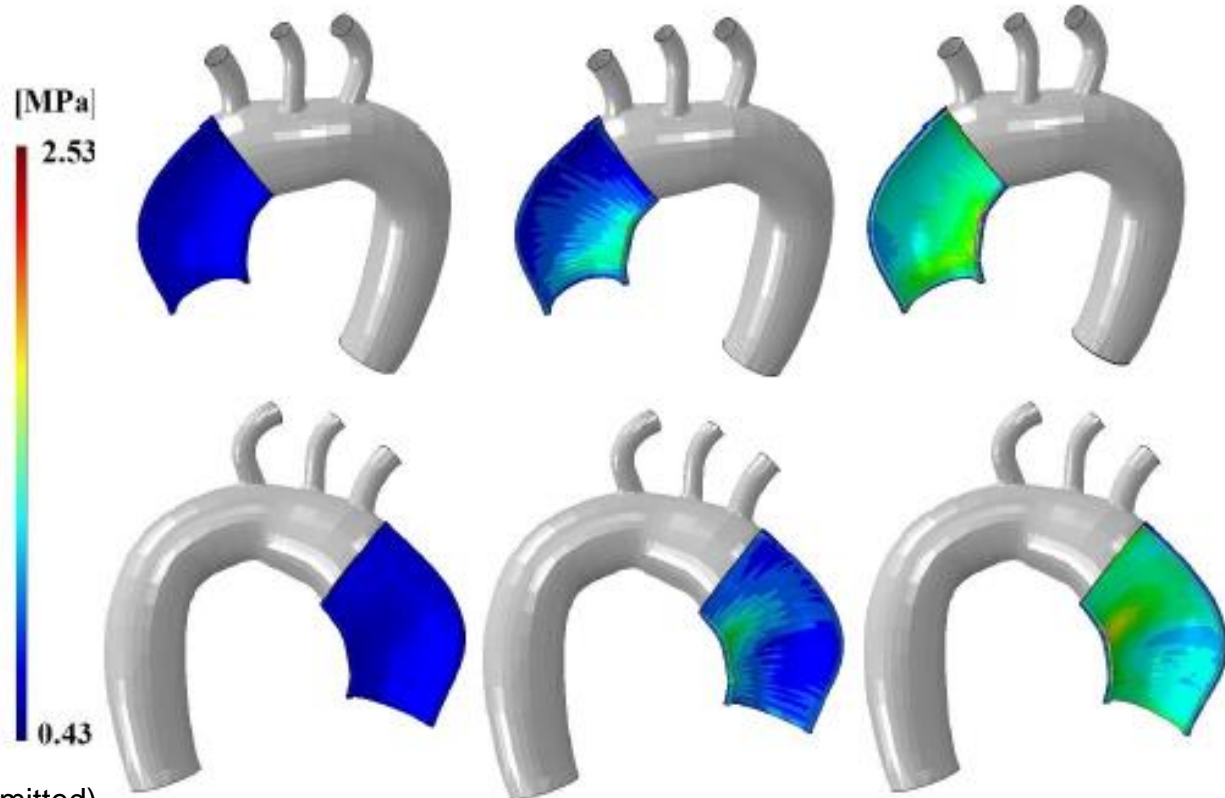
$$\dot{\sigma}^j(t) = \varrho^j(t) k_{\sigma}^j \frac{\sigma^j(t) - \chi * \sigma_h^j}{\chi * \sigma_h^j} + \xi^j(t)$$

$$\chi = 1$$

$$\chi = 1.1$$

$$\chi = 1.25$$

Tangent stiffness after 10 years



Mousavi et al, ABME (2020, submitted)

OUTLINE

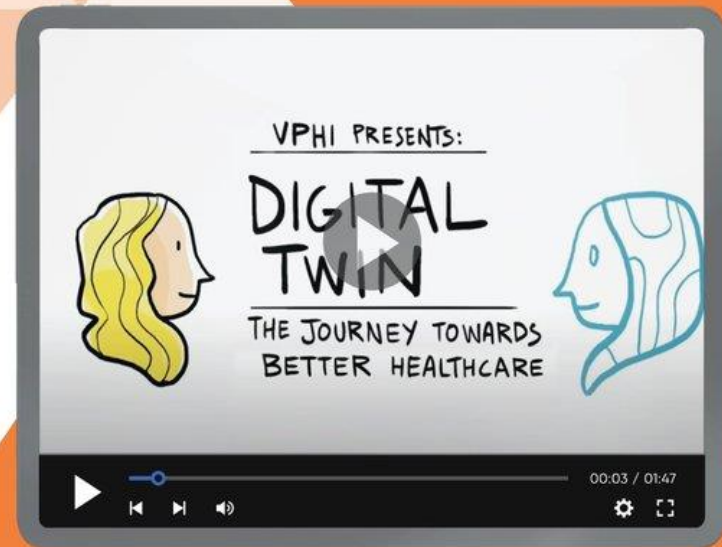
- ❑ PART I: Material stiffness is a predictor for aortic rupture
- ❑ PART II: The need of combining data driven and mechanistic models in cardiovascular mechanobiology
- ❑ **PART III: From computer models to digital twins enabling precision medicine**

Collaborative initiatives



A quick video to explain the **Digital Twin** in very simple terms

CLICK TO WATCH

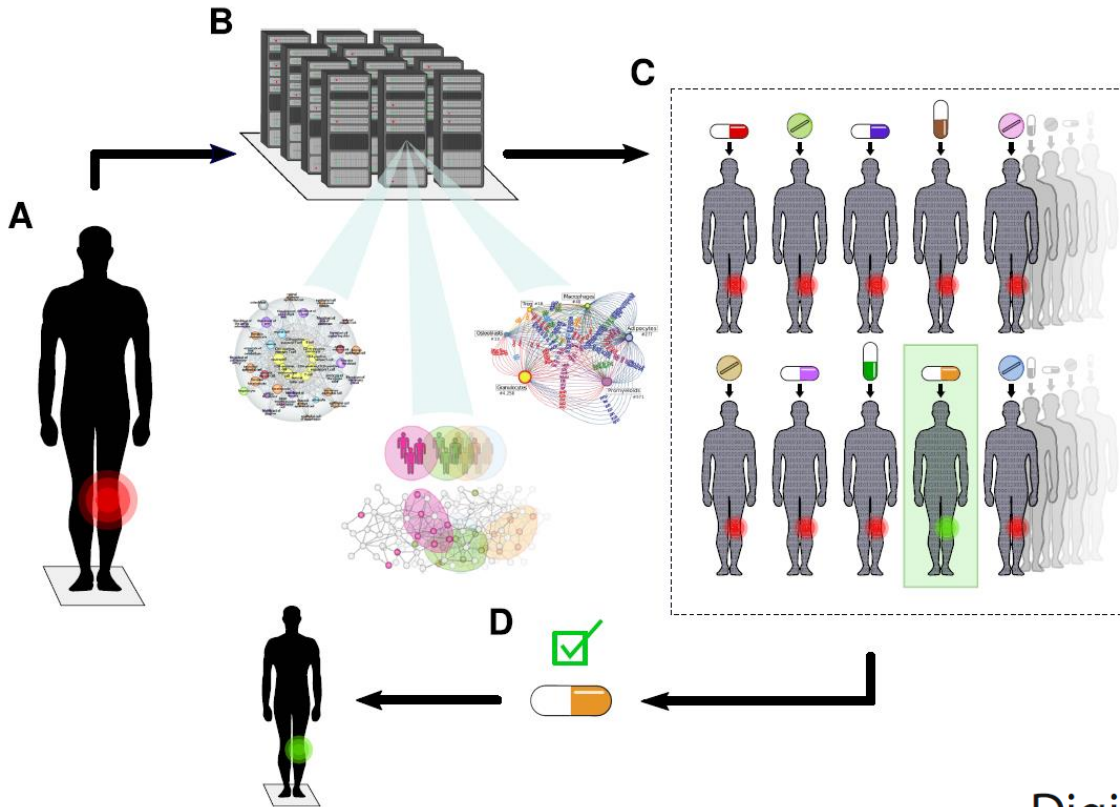


Collaborative initiatives



MEDITATE

<https://meditate-project.eu/>



ESC
European Society
of Cardiology

European Heart Journal (2020) 0, 1–11
doi:10.1093/eurheartj/eha159

CLINICAL REVIEW
Frontiers in cardiovascular medicine

The 'Digital Twin' to enable the vision of precision cardiology

Jorge Corral-Acero¹, Francesca Margara², Maciej Marciniak³,
Cristobal Rodero³, Filip Loncaric⁴, Yingjing Feng^{5,6}, Andrew Gilbert⁷,
Joao F. Fernandes³, Hassaan A. Bukhari^{6,8}, Ali Wajdan⁹,
Manuel Villegas Martinez², Mariana Sousa Santos¹⁰, Mehrdad Shamohammadi¹¹,
Hongxing Luo¹¹, Philip Westphal¹², Paul Leeson¹³, Paolo DiAchille¹⁴,
Viatcheslav Gurev¹⁴, Manuel Mayr¹⁵, Liesbet Geris¹⁶, Pras Pathmanathan¹⁷,
Tina Morrison¹⁷, Richard Cornelussen¹², Frits Prinzen¹¹, Tammo Delhaas¹¹,
Ada Doltra⁴, Marta Sitges^{4,18}, Edward J. Vigmond^{5,6}, Ernesto Zacur¹,
Vicente Grau¹, Blanca Rodriguez², Espen W. Remme², Steven Niederer³,
Peter Mortier¹⁰, Kristin McLeod⁷, Mark Potse^{5,6,19}, Esther Pueyo^{8,20},
Alfonso Bueno-Orovio², and Pablo Lamata^{9*}

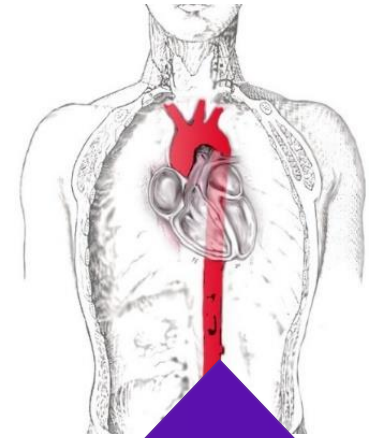
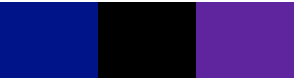
Genome Medicine

Digital twins to personalize medicine

Berthor Björnsson¹, Carl Borrebaeck², Nils Elander³, Thomas Gasslander¹, Danuta R. Gawle¹,
Rebecka Jörnsten⁶, Eun Jung Lee^{4,7}, Xinxu Li⁴, Sandra Lilja⁴, David Martínez-Enguita⁵, And
Per Sandström¹, Samuel Schäfer⁴, Margaretha Stenmarker^{10,11}, X. F. Sun³, Oleg Sysoev¹², H
Mikael Benson^{4,13,14*} and on behalf of the Swedish Digital Twin Consortium

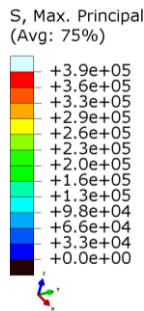


Need to monitor the biological counterpart



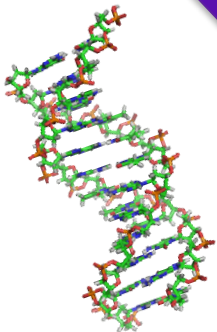
Monitoring mechanical regulation and epigenetics

DIGITAL



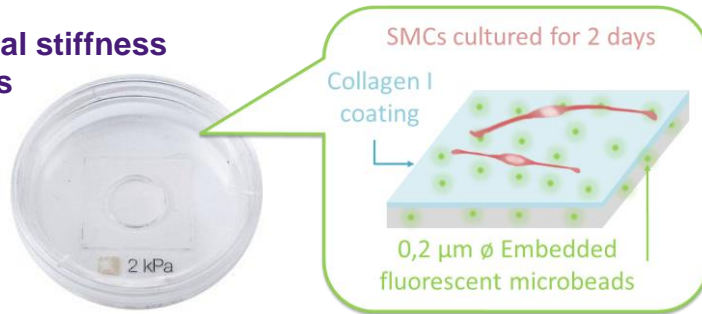
TWIN

Predicting patient-specific pathophysiology and drug effects

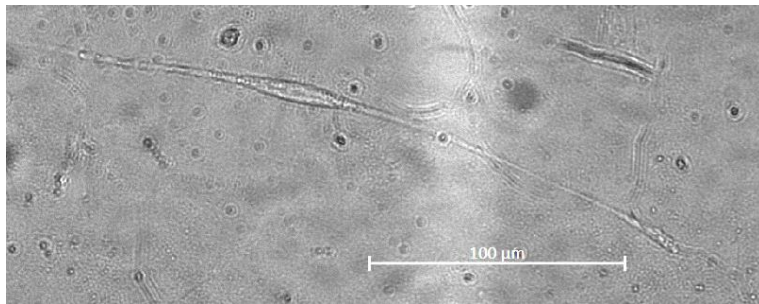


Monitoring mechanobiology *in vivo*

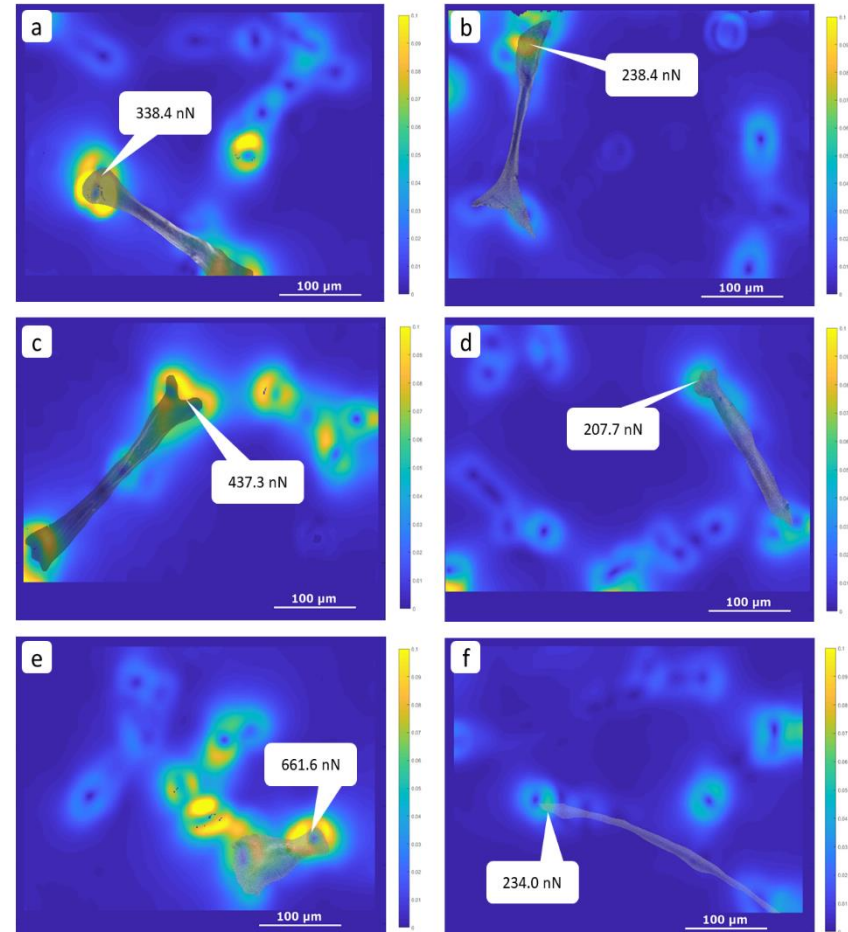
Several stiffness values



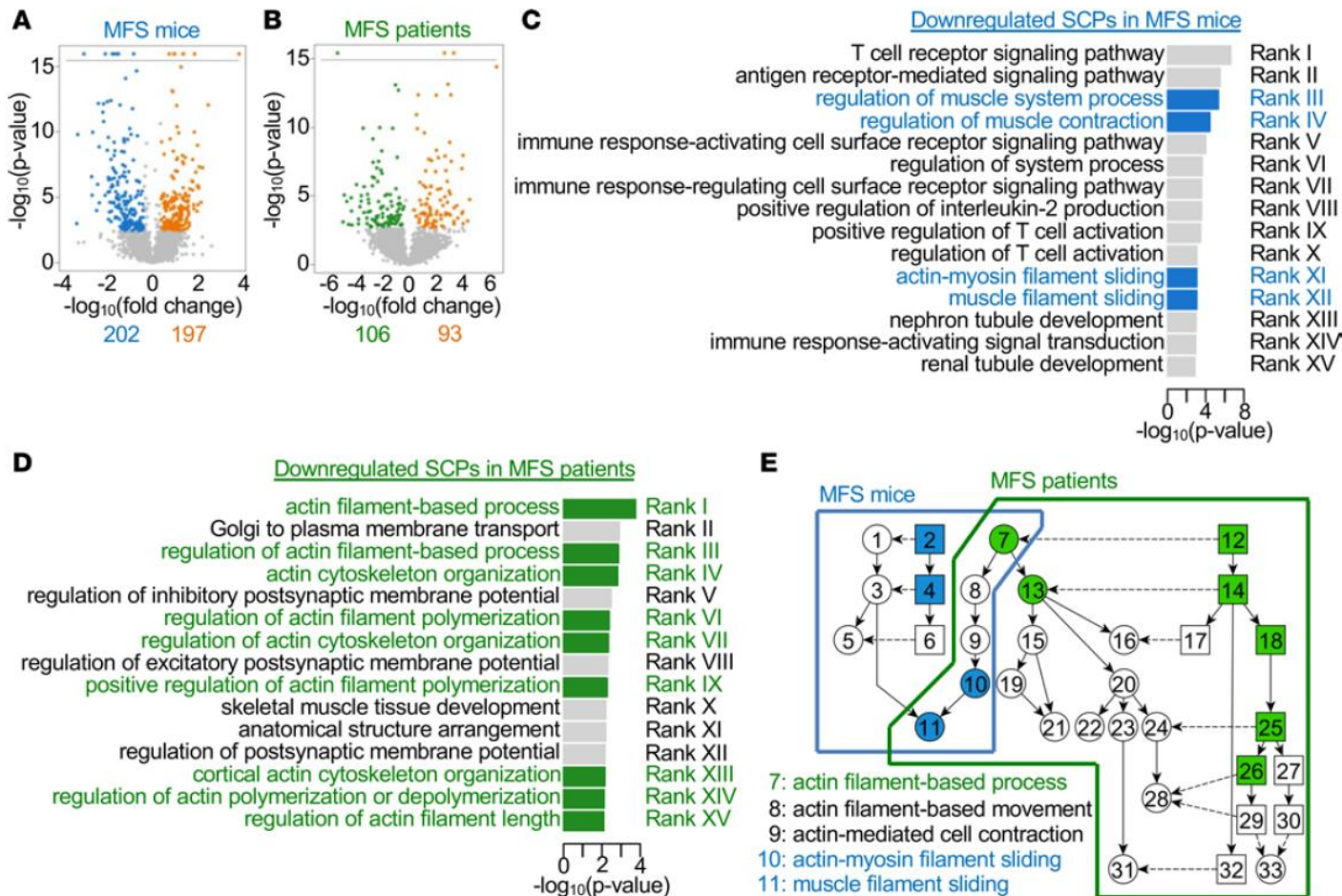
Aortic SMCs from human primary culture (AoSMC, Lonza), passages 5-7, cultured in a differentiating medium (SmBM, Lonza)



- **Fluorescent microscopy + DIC** : track the displacement of fluorescent microbeads
- **Cell unbinding method (with trypsin)** : assess the homeostatic state of single SMCs



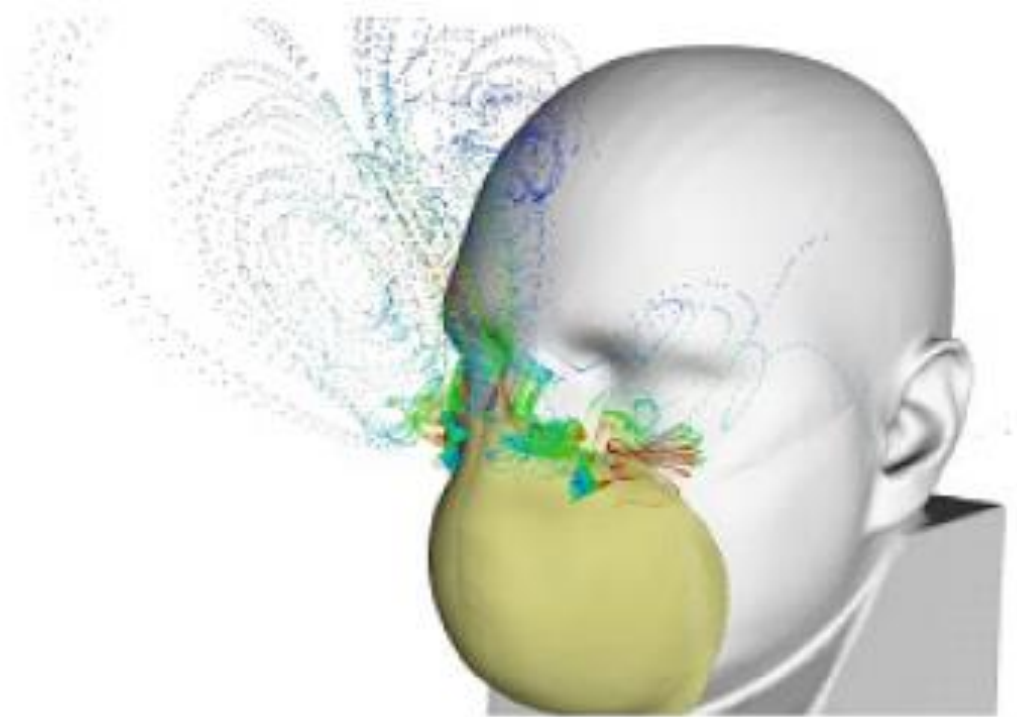
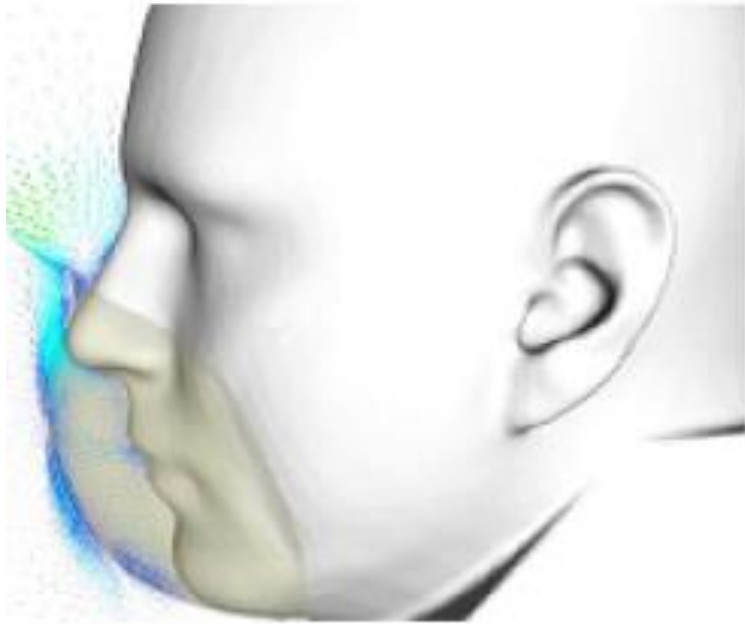
Systems pharmacology-based integration of human and mouse data for drug repurposing to treat thoracic aneurysms



SUMMARY AND FUTURE WORK

- ❑ Computational models combining AI and mechanics are now used commonly in healthcare for developing medical devices and drugs
- ❑ Major challenges still need to be overcome to go beyond the virtual patient and establish digital twins of oneself
- ❑ Simple mechanistic models will always be useful!!

Wear a mask!



Acknowledgements

- Olfa Trabelsi
- Aaron Romo
- Jin Kim
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- Baptiste Pierrat
- Laurent Navarro
- Joan Laubrie
- Claudie Petit
- Miquel Aguirre
- Ali Kharkaneh
- Ataollah Ghavamian
- Tristan Maquart

- Ambroise Duprey
- Jean-Pierre Favre
- Jean-Noël Albertini
- Salvatore Campisi
- Magalie Viallon
- Pierre Croisille

- Chiara Bellini
- Matthew Bersi
- Jay Humphrey
- Jia Lu
- George Karniadakis
- Katia Genovese



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