Deformable modeling

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Overview

- Motivation
 - Why deformable models
- Types of deformable models
 - Most commonly encountered
 - Variants
 - Examples in the literature
- Key research issues

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Why deformable models?

- Human tissues are soft
- Need to model their appearance and mechanical properties in a realistic fashion
- Need to compute reaction forces for haptic feedback



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An ideal deformable model

- Fast
 - » Visual update rate: >= 10Hz
 - » Haptic update rate: >= 1000Hz (approximation/interpolation schemes can reduce this somewhat)
- Realistic
 - » Tissues are inhomogeneous
 - » Interaction with other organs, tools
- Facilitate cutting and suturing

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Types of deformable models

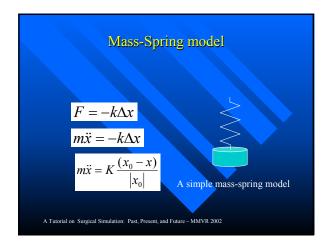
- Non-physics based models
 - Splines, patches, snakes, free-form deformation
 - Parameters required to deform model may not be intuitive
 - May be sufficient for some simulations
 - Example
 - » [MOCCOZET97] used free-form deformation to model hand deformation

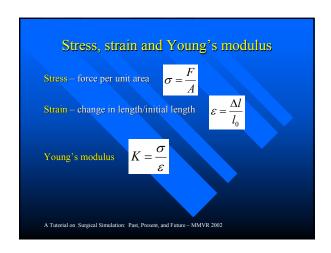


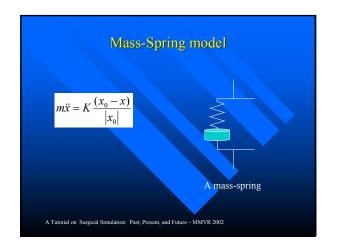
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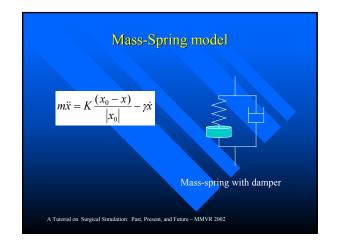
Types of deformable models

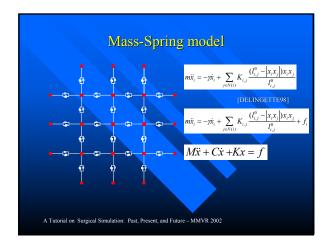
- Physics-based models
 - Incorporates physical properties of model
 » Pulling, cutting, tearing/breaking
 - More realistic deformations
 - » Model deforms intuitively according to applied force
 - Mass-springs, Finite-elements

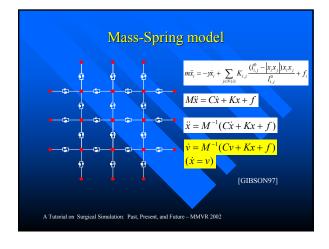




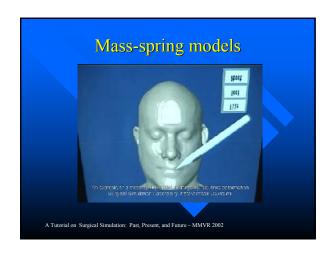




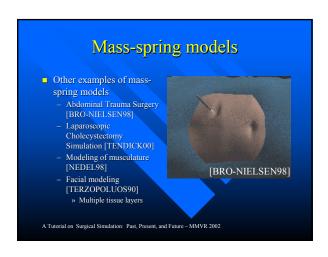


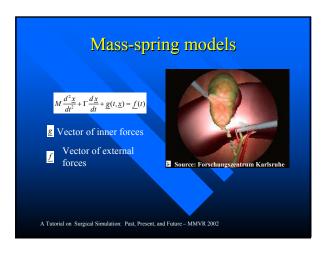


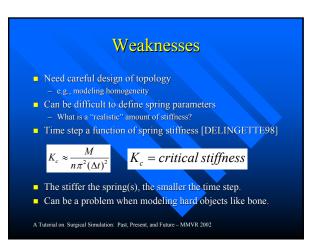








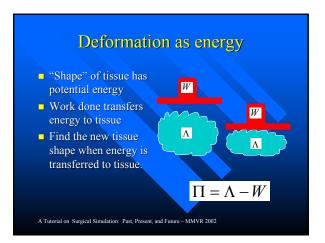




Weaknesses

- Not an accurate physical model for tissue properties
 - Many tissues are not collections of springy tendons
- Becomes progressively less accurate for large deformations
- Need a framework that permits general physical principals to be represented

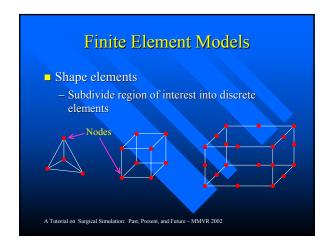
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Finite Element Models

- Relate potential energy to displacement of tissue from rest position.
 - Strain energy
- Relate work done as a function of tissue displacement.
- Compute tissue shape when Π is at minimum
 - Equilibrium
- Defined by
 - Shape elements, shape function, energy function

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Finite element models

- Shape function
 - Displacement of a point in the element is given as a function of displacement of the element's associated nodes
 - Typically polynomial
 - Equivalent to expressing strain of a point as a function of strain in nodes

$$\varepsilon(\vec{x}) = \sum_{i} f_{i}(\vec{x})\varepsilon_{i}$$

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Strain energy

For linear elastic case, \mathcal{E} can be expressed in terms of displacement \overline{u} by the following differential equations

$$\begin{split} \varepsilon_{x} &= \frac{\partial \widetilde{u}}{\partial x} \\ \varepsilon_{y} &= \frac{\partial \widetilde{u}}{\partial x} + \frac{\partial \widetilde{u}}{\partial y} \\ \varepsilon_{y} &= \frac{\partial \widetilde{u}}{\partial y} \\ \varepsilon_{z} &= \frac{\partial \widetilde{u}}{\partial z} \\ \varepsilon_{z} &= \frac{\partial \widetilde{u}}{\partial z} \\ \end{split} \quad \varepsilon_{yz} = \frac{\partial \widetilde{u}}{\partial y} + \frac{\partial \widetilde{u}}{\partial z}$$

Finite element models

- Consider the energy function of one element
 - Strain energy of finite element
 - Work done to element
- At equilibrium, their sum is at a minimum
- Express this sum in terms of displacement

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Strain energy

$$\Lambda = \frac{1}{2} \int_{V} \sigma^{T} \varepsilon \ \partial V = \frac{1}{2} \int_{V} \varepsilon^{T} D \varepsilon \ \partial V$$

[GIBSON97]

D = matrix of stress/strain components

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Strain energy

$$\Lambda = \frac{1}{2} \int_{V} \sigma^{T} \varepsilon \ \partial V = \frac{1}{2} \int_{V} \varepsilon^{T} D \varepsilon \ \partial V$$

$$(\varepsilon = BU)$$

$$\Lambda = \frac{1}{2} U^T (\int_{\mathcal{A}} B^T DB \ \partial V) U$$

[GIBSON97]

D = matrix of stress/strain components

U = composite vector of node displacements

B = matrix of differential equations relating position to strain

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Work done

$$W = \int_{V} u \cdot f \, \partial v$$

$$W = U^T F$$

U = composite vector of node displacements

F = composite vector of forces integrated over the object volume

= composite vector of equivalent forces acting at node points

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At equilibrium

Computing the minimum of

$$\Pi = \frac{1}{2}U^{T}(\int B^{T}DB \ \partial V)U + U^{T}F$$

yields

$$KU = F$$

K = stiffness matrix over the volume

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□ But!

- Medical simulation is dynamic
- Previous derivation is for static systems
- Extend to consider
 - Inertia
 - Damping
 - Similar to mesh-spring case

$$M\ddot{U} + C\dot{U} + KU = F$$

Strengths

- Can model complex soft tissue deformations more accurately
- Capable of modeling non-linear tissue properties
 - Resultant deformations are more realistic

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Weaknesses

- Straightforward implementation is S-L-O-W
- Considerably slower than mesh-spring approach
 - But see various speed-up methods
 - » Condensation
 - » Preprocessing
 - » Adaptive FEM
 - » Hybrid methods [COTIN00]

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Condensation

IBRO-NIELSEN96

- □ Idea
 - Internal nodes not visible/do not interact directly with observer
 - » Not interesting
 - Can we not compute their displacements?
- Recall for (one element) in static case

$$Ku = f$$

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Condensation

Rewrite linear system as a block matrix

$$\begin{bmatrix} K_{ss} & K_{si} \\ K_{is} & K_{ii} \end{bmatrix} \begin{bmatrix} u_s \\ u_i \end{bmatrix} = \begin{bmatrix} f_s \\ f_i \end{bmatrix}$$

 We want new expression involving only surface nodes

$$K_{ss}^* \vec{u}_s = \vec{f}_s^*$$

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Condensation

■ From block matrix

$$K_{ss}^* = K_{ss} - K_{si} K_{ii}^{-1} K_{is}$$
$$\vec{f}_s^* = \vec{f}_s - K_{si} K_{ii}^{-1} \vec{f}_i$$

If there are no forces applied to internal nodes, then $\vec{f}^* = \vec{f}$

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Preprocessing [COTIN99]

- Preprocess "elementary deformations" for each free (movable) surface node.
- Apply combinations of linear deformations to achieve final deformation in realtime.



Adaptive meshes

- Preprocess to get hierarchy of mesh resolutions and FEM matrices
- Adaptively refine based on threshold
 - Stress concentration
 - Displacement field
 - Optimized posterior error estimator
 - Stress gradient

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Current research issues

- Accuracy
 - Fidelity to the ways tissues actually behave

 - » Inhomogeneous models
 - How do tissues actually behave?
- - Haptic rendering, visual realism
 - » Preprocessing
- Change in topology
 - Cutting and suturing

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What is the purpose of your simulation?

- Develop motor skills
 - Laparoscopy, bronchoscopy, etc.
- Learning to do a procedure
 - Diagnostic peritoneal lavage, pericardiocentesis, central line placement, chest tube insertion
 - Practice for minimally invasive surgery
- Not every simulation needs absolutely realistic deformation modeling

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