

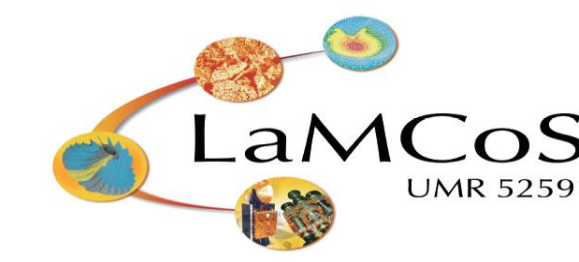


Towards a patient-specific simulation of percutaneous transluminal angioplasty

Bernard AL-Helou¹, Claire Dupont¹, Aline Bel-Brunon², Wenfeng Ye³, Adrien Kaladji¹, Pascal Haigron¹

¹ Université de Rennes 1, CHU Rennes, INSERM, LTSI – UMR 1099, F-35000 Rennes, France
² Univ Lyon, INSA-Lyon, CNRS UMR5259, LaMCoS, F-69621 Lyon, France
³ ANSYS France, F-69100 Villeurbanne, France

Bernard.helou@etudiant.univ-rennes1.fr

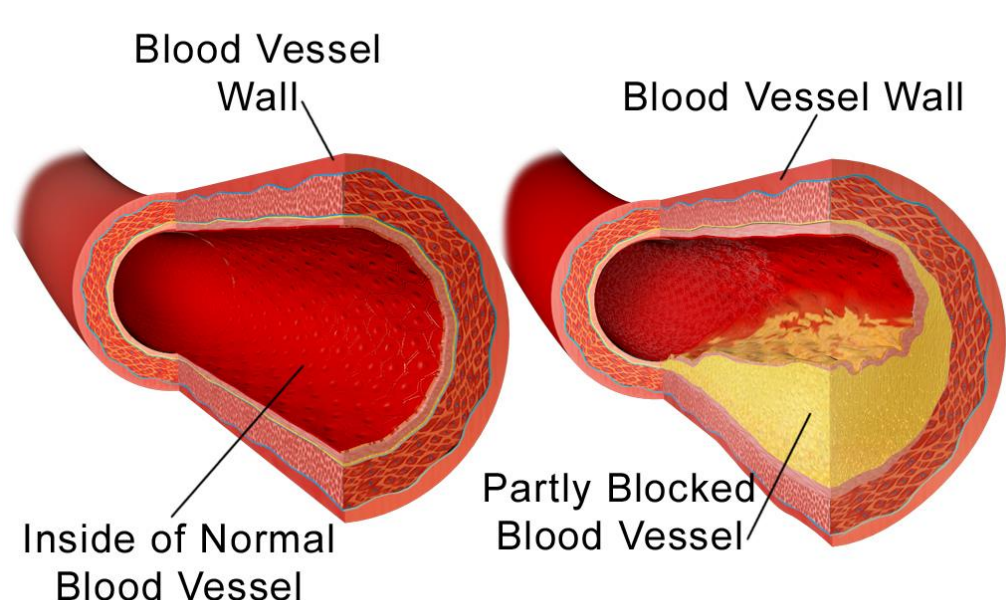


Context & Objectives

Atherosclerotic Plaque

- Accumulation of lipids, calcium and fibrin at the inner wall of the arteries

- Reducing blood flow mobility
- Effecting irrigated organs



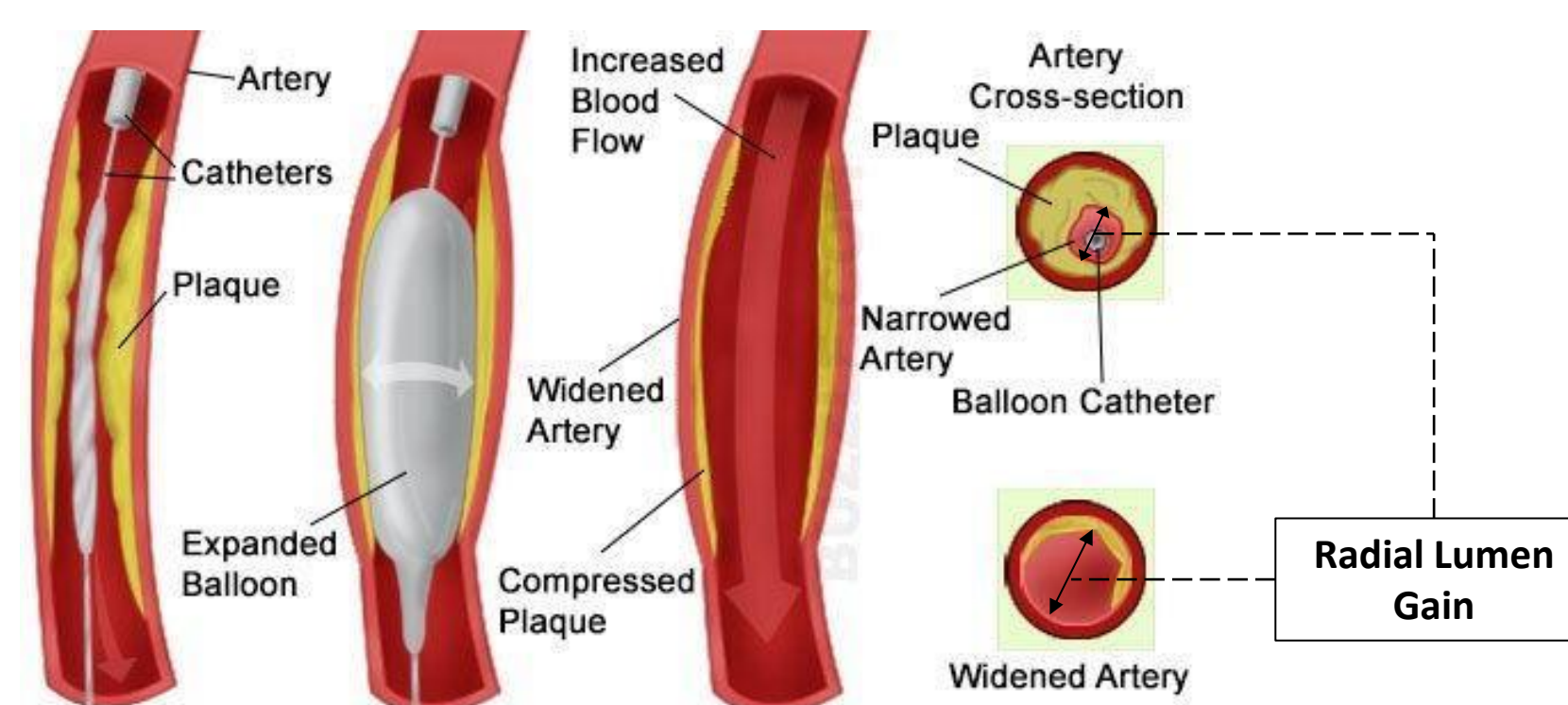
Healthy vessel Stenosed vessel

www.study.com

Localization

- Carotid arteries → 20% of ischemic strokes
- Peripheral arteries → claudication

Percutaneous transluminal angioplasty (PTA)



PTA main steps

www.hopkinsmedicine.org

Advantages (benefits):

- Endovascular treatment
- Mini-invasive procedure
- Fewer risks

Disadvantages (risks):

- Restenosis
- Dissection (wall tear)
- Perforation (hole development)

Challenging for the surgeons: choosing the adequate balloon, maximizing lumen gain, without damaging the arterial tissue

State of the Art

- Several FEM studies modelled PTA in 2D geometries, others in 3D idealized geometries and few others in Patient-Specific geometries (Sadat et al., 2010; Karimi et al., 2013; Auricchio et al. 2011)

- However, Endov. Treat. Prediction using FEM still limited by:

- Patient-specific stenosed arterial geometry & composition (Several imaging techniques available with each it's own limitations) → CT most commonly used in PTA protocols

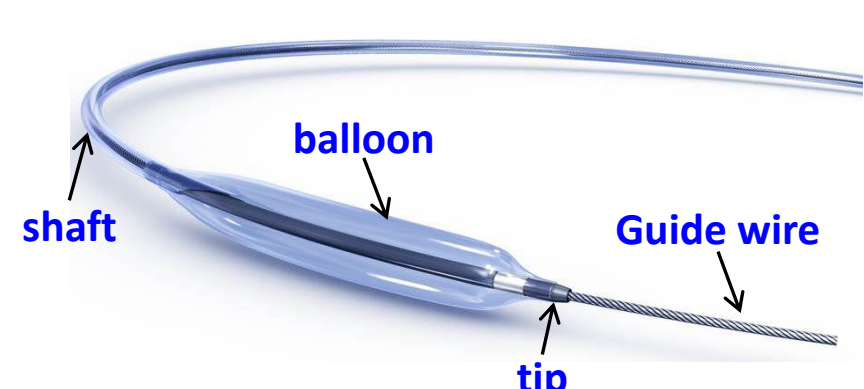
- Plaque material composition and mechanical behavior model

Main objective

- Modelling Permanent deformations following PTA in stenosed arteries using FEM:
 - Non-compliant balloon simulated in idealized stenosed artery
 - Patient-specific plaques (geom. & comp.) extracted from CT images using segmentation approach

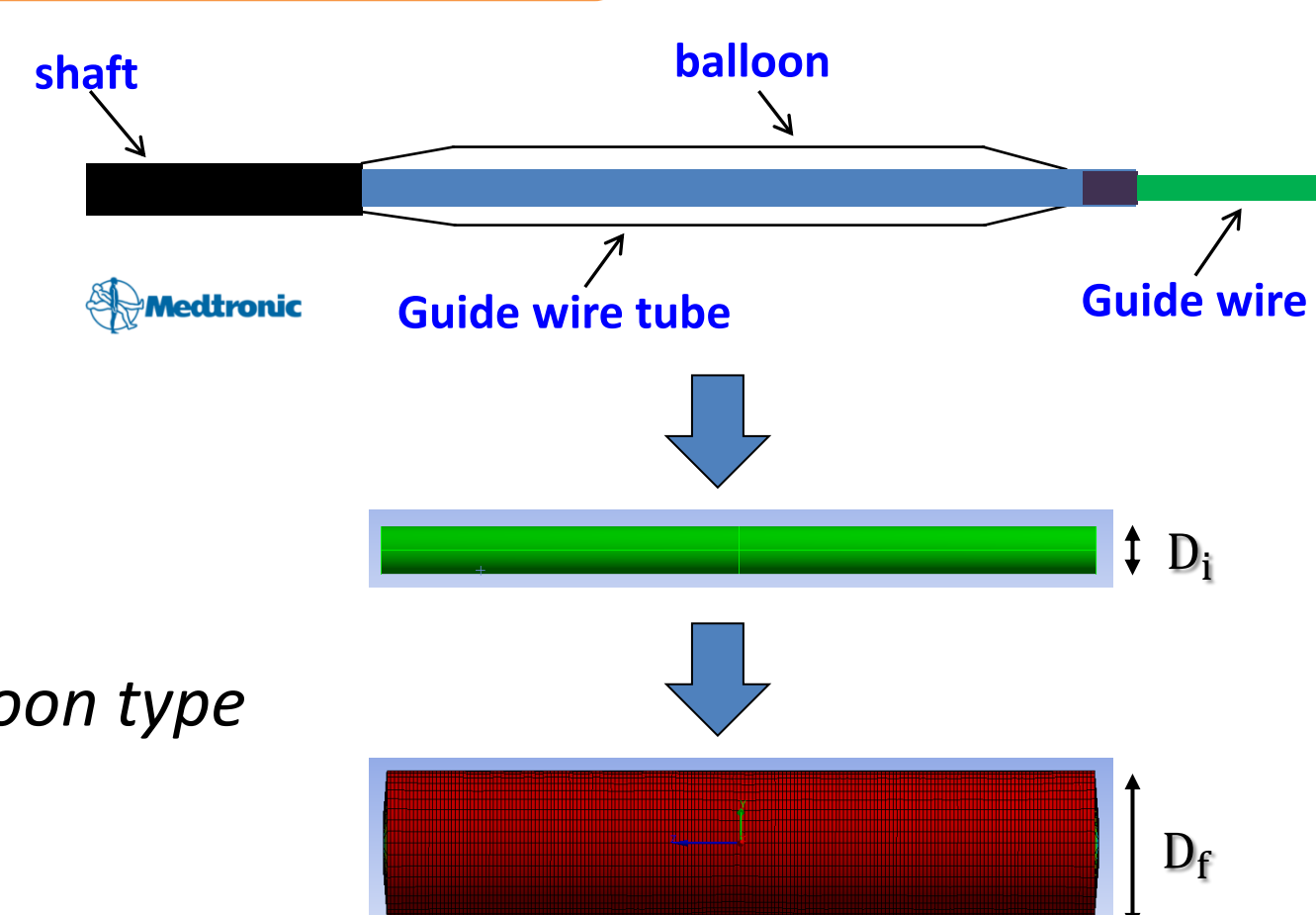
Balloon Catheter Model

Balloon Geometry in reality:

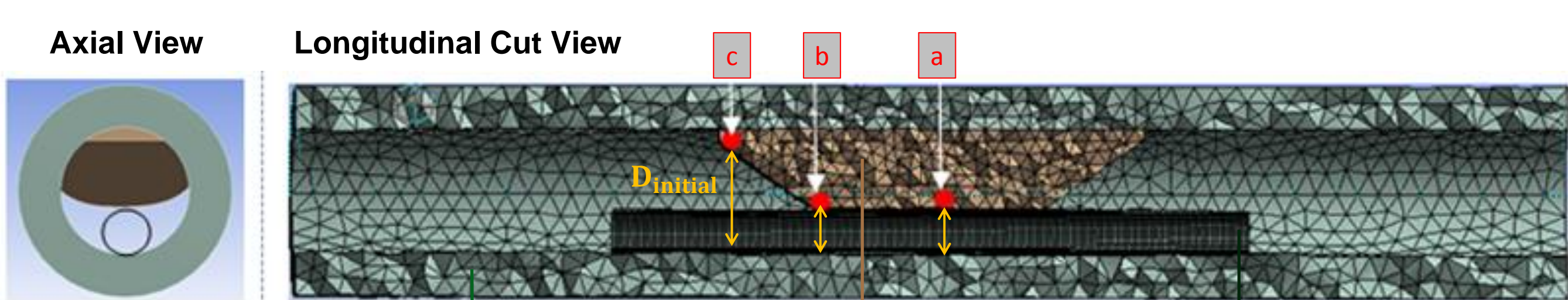


- Displacement-driven balloon → mimicking the Non-compliant (very stiff) balloon type

- Inflation Ratio: $\frac{D_f}{D_i} = 3$



FE simulation of PTA in an idealized stenosed artery



Geometry & Mesh:

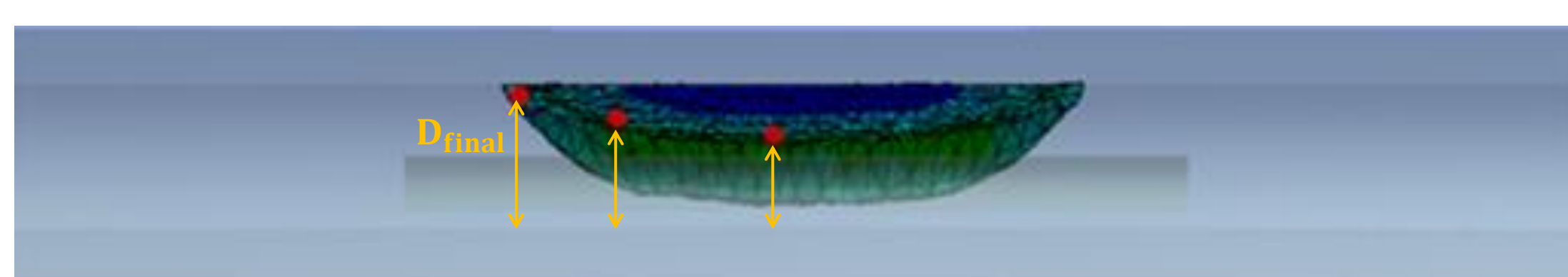
Artery: Tetrahedral solid elements
 Plaque: 60% stenosis, Tetrahedral solid, Calcified vs. Lipid
 Balloon: Quadrilateral shell elements

Material Model:

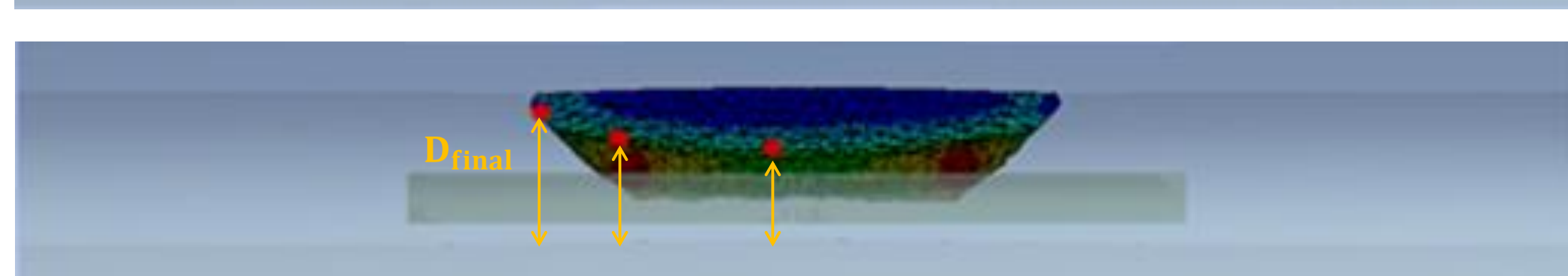
Neo-Hookean (Artery), Bilinear Plastic (Plaque)

Plastic strain after Balloon deflation

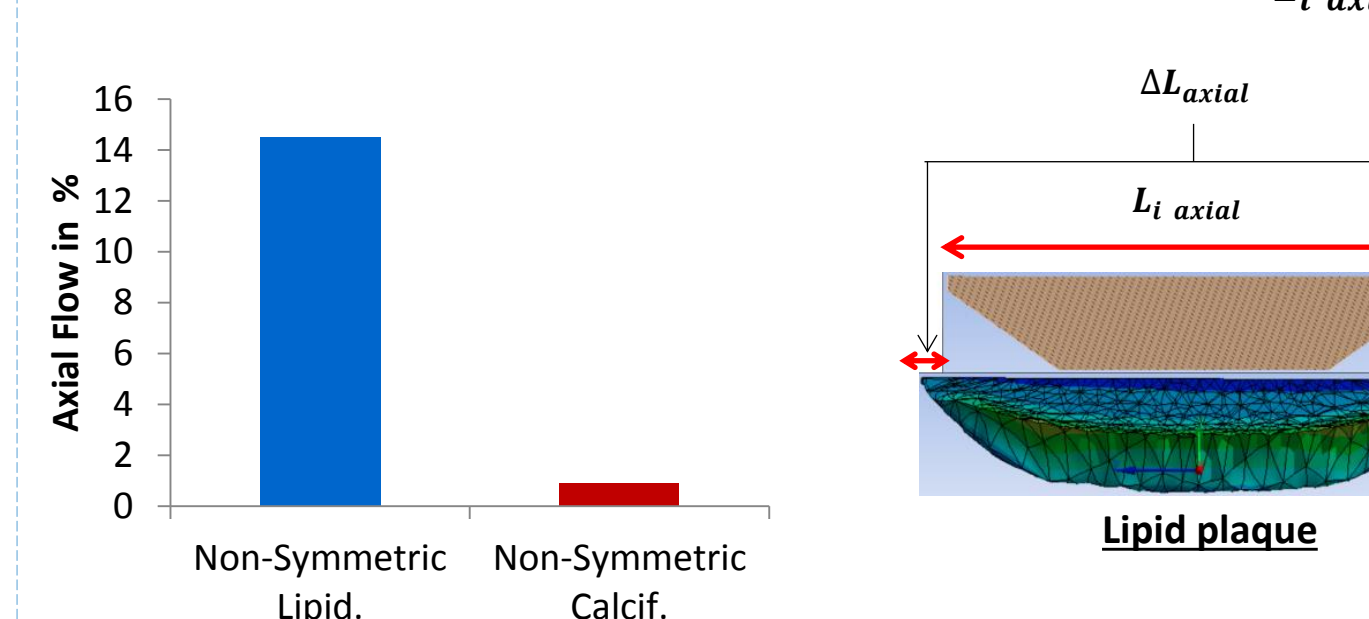
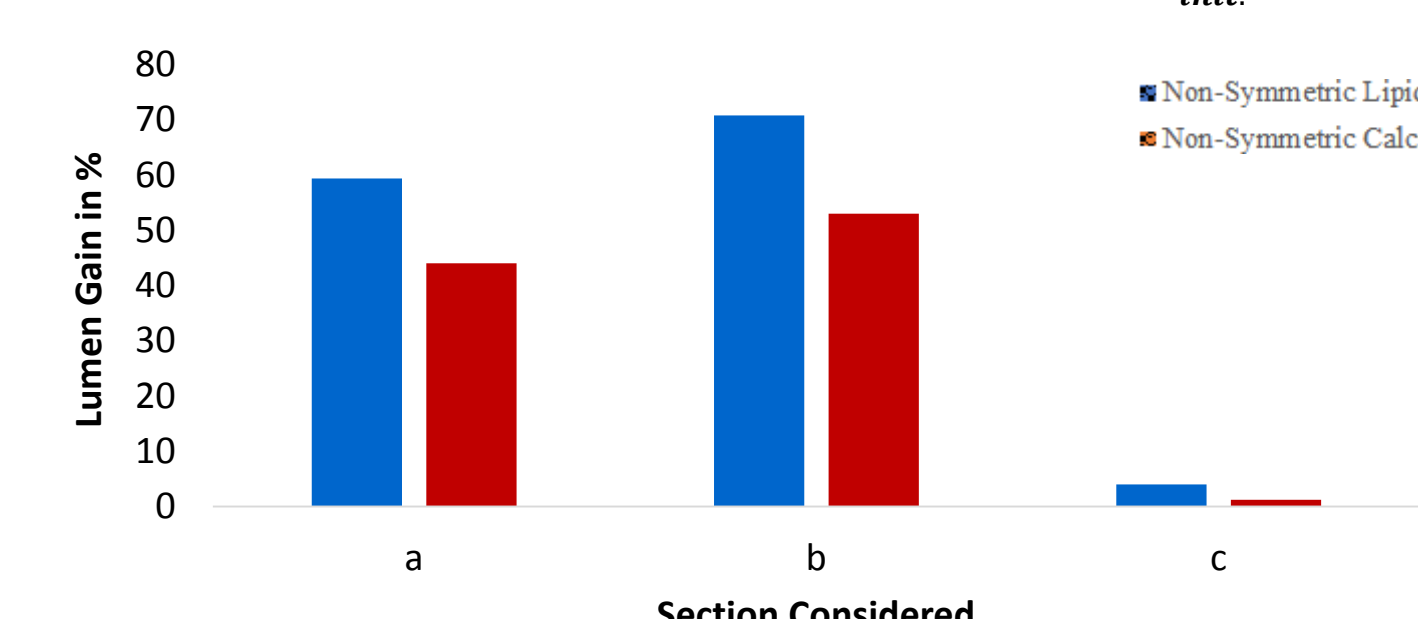
Lipid Plaque



Calcified Plaque



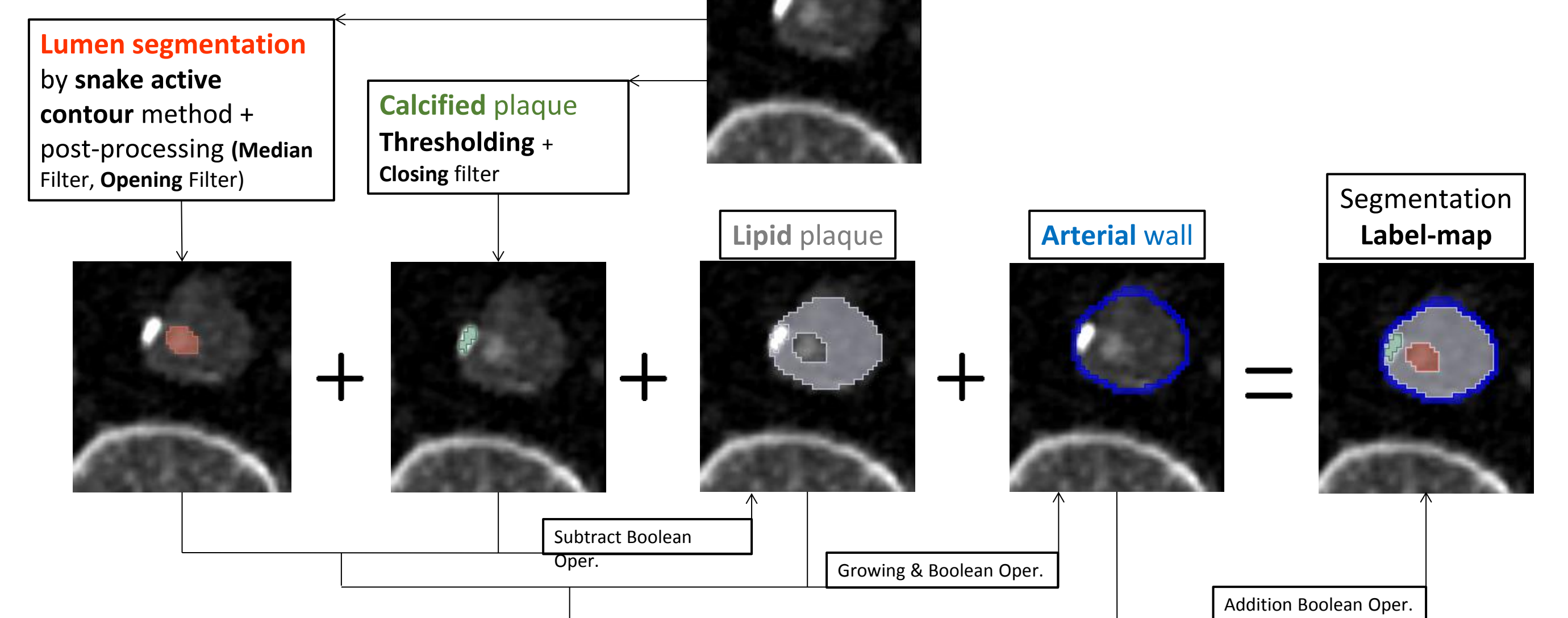
Lumen Gain in % after balloon deflation: $LG = \left(\frac{D_{final}}{D_{init}} - 1\right) \times 100$
 Plaque Axial Flow in % after balloon deflation: $AF = \frac{\Delta L_{axial}}{L_i \text{ axial}} \times 100$



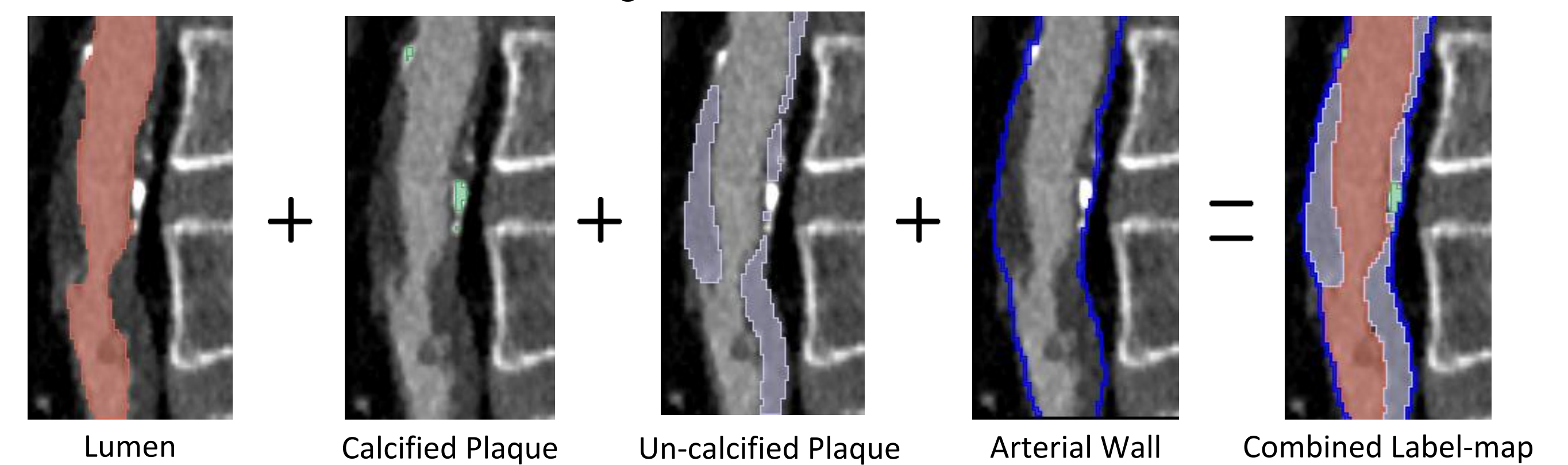
- Higher lumen gain (LG) along lipid plaque (at a, b and c: blue vs. orange): softer plaque
- LGs are of high values at sections a and b while low at c → Plaque thickness highly influences LGs
- Higher axial flow in lipid plaque: lower deformation resistance → Importance of PTA 3D modeling

Patient-specific plaque geometry segmentation

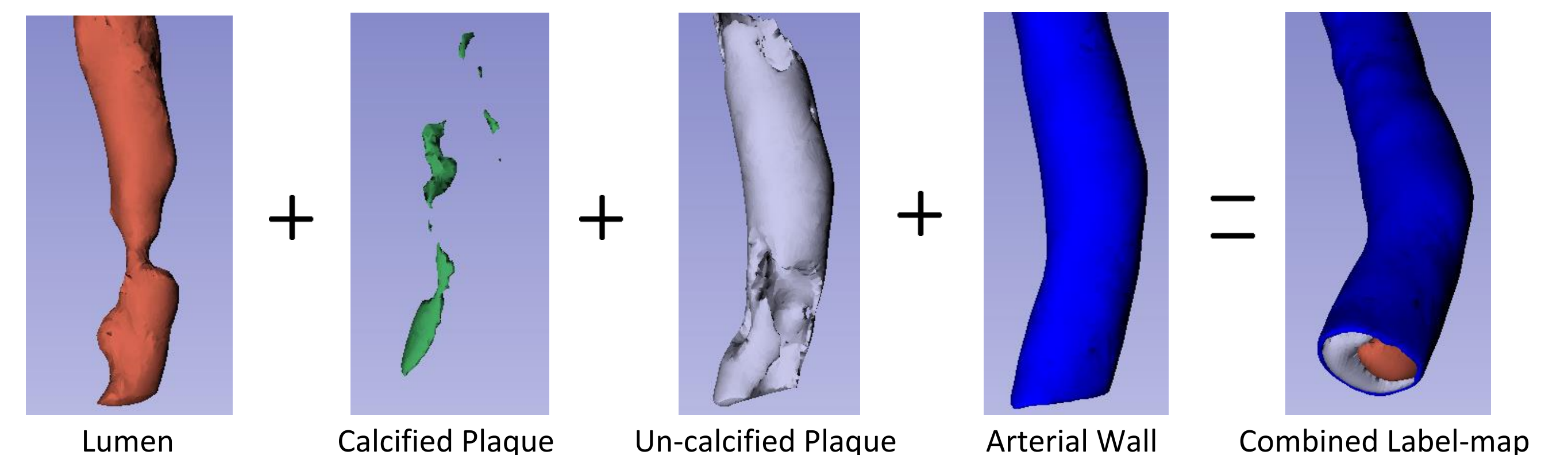
Segmentation method:



Sagittal cross sections

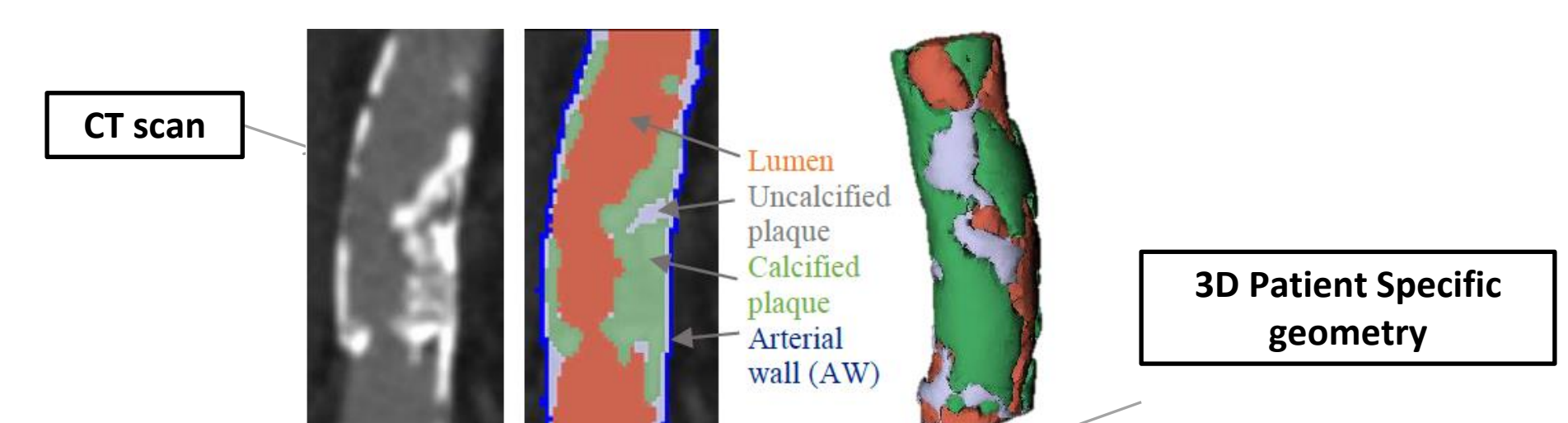


3D model of Patient with Slightly calcified Plaque



Conclusion and Perspectives

- Patient-Specific Balloon Angioplasty simulations in stenosed arteries
- Pre- and Post- operative medical images would be required



→ A step towards predictive simulation for the planning of endovascular treatment of stenosis