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Title: Image Guided Robot-Assisted Medical Interventions

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MINIMALLY INVASIVE SURGERIES

Minimally invasive surgeries have emerged as an alternative to traditional open surgeries, since they contribute to improving patient management and cost effectiveness. Among the important factors for their further advancement are robust, scalable and efficient computational methodology for integrating (i) multimodal sensing (including real-time imaging), (iii) controlled robotic manipulators, and (iii) the interventionalist or controlled robotic manipulators, and (iii) the interventionalist or operator (e.g., surgeon, cardiologist etc).

Motivated by the aforementioned potential impact of minimally invasive surgeries in the present and future healthcare, and within the framework of this CPS, we are pursuing the development of a novel cyber-physical system for performing Multimodal Image-guided RObot-assisted Surgeries (MIROS).

SCIENTIFIC DIRECTIONS

The scientific directions and the associated specific research objectives of the MIROS project is its reliance on true sensing of the physical world with multi-contrast imaging and distributed force/bending-sensors, to maneuver a steerable surgical robotic manipulator inside the continuously changing environment of a patient while offering a comprehensive perception of the Area of Operation (AoO) to the operator via a

GRADUATE STUDENTS

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EMERGING TRENDS IN INTERVENTIONAL MEDICINE

1. Use of new non-traditional modalities for guidance MRI, Optical Imaging Multimodality Approaches
 Complementary information about pathology

Real-time Imaging
 On-the-fly adjustment of the acquisition protocol

Robotic Manipulator Assistance
 Automated Real-time image Processing

WHY MRI GUIDANCE?

1. Excellent Soft Tissue Contrast

Lack of Ionizing Radiation
 Bridgenous "absolute" coordinate system of the MR

scanner
4. True 3D or multislice 2D and arbitrary definition of imaging

anes/volumes . On-the-fly: adjustment of imaging planes and/or contrast

WHY ROBOTIC MANIPULATORS?

1. Access to the patient who remains inside the scanner during the entire or part of the procedure 2. Real-time Image Guidance

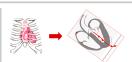
On-the-fly adjustment of the trajectory.

Multi-modality co-registration (optical imaging, US,

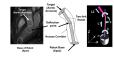
Use with High Field (1 - 4 + Tesla) Scanners!

INTRACARDIAC SURGERY

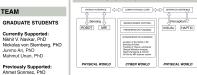
- 1. Follow a non-linear path of Access to the target or targets
- Access and intervene to moving tissue (i.e. heart)
 MR-Compatible steerable catheters
- MR Image based real-time tissue tracking



CARDIAC SURGERIES ON BEATING HEART



SYSTEM OVERVIEW



THIRD YEAR AREAS OF FOCUS

COMPUTATIONAL CORE

Backbone Planning/Control Code Surgical Planning and Visualization
 New Algorithms for Force-Feedback Rendering

 Image-based generation of 4D Access Corridor in moving tissues for Robot Maneuvering Multi-threaded implementation for real-time image processing and robot control

HAPTIC INTERFACE

- Robot assisted Molecular Level MR/Optical Imaging

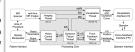
Probe Dynamic MR Raw Data Collection Strategies

ENABLING METHODOLOGY Robot for Cardiac Surge

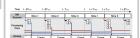
SUPPORTING METHODOLOGY

Actuated cardiac-motion mimicking Phantom

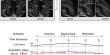
ARCHITECTURE OF CURRENT COMPUTATIONAL CORE

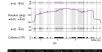


Computational framework for an image-guided robotassisted telemanipulated surgical system for cardiac interventions. Integrates physical components (MR scanner. slave robotic manipulator, operator's interface consisting of GUI and force-feedback equipped master controllers) with cyber components consisting of routines for on-the-fly image processing, virtual fixture generation, robot guidance and control, and rendering visual-force-feedback information to the operator interfaces.



Representative example of image processing by the imaging







(a) Representative results of the recorded stream of the simulated surgical task of transapical aortic valve implantation (b) Five selected frames from the recorded stream



Comparison of the position of the end effector and its projection measured for a surgical task with and without quidance fixture (and quidance).

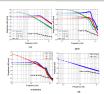
Average errors measured over the duration of a surgical task for the four guidance lift for the life

HAPTIC INTERFACE



Photographs of the prototype and its different sub-assem





Open loop frequency response of the device vs. the vibration detection threshold of the hand for (a)yaw, (b)pitch, (c) translation, (d)roll and (e)tip bending axes, scaled by the corresponding DC motors' maximum continuous torque

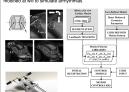
ENABLING METHODOLOGY "Robot for Cardiac Surgery"

A new 6 DoF MR-comaptible robot under development for surgical and interventional procedures with real-time MF guidance. An important innovation we are pursuing is a new method of actuation that resembles pneumatic/hydraulic actuators but without air or fluid! This we anticipate that successful development of this actuation may offer a unique



SUPPORTING METHODOLOGY "Actuated cardiac-motion mimicking Phantom"

Purpose: To mimic the motion of cardiac landmarks pertinen to a transapical surgery under controlled laboratory conditions The trajectories are extracted from MR images, as well as car



The Dimensions and range of motion are those of the human

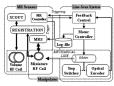
3D Model of the Actuated Phantom

SENSOR LEVEL WORK: THE "RoboScanner" PROJECT

Purpose: Develop an approach for biosensing at the molecular and near-cellular level compatible with robotic

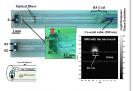
Approach: Implement a method that mechanically scans miniature MR and optical sensors so the raw data are





MRS: magnetic resonance spectroscopy









Intellectual Property:

Nikolaos V. Tsekos and Ahmet Sonmez "Devices, systems and methods for multimod biosensing and imaging", US Patent Application Filing Date: Sep 8, 2011 (number 13/1997-41: Publication number: US 2012/00/63/22-4.

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