

Automating Workflows for Creating Digital Twins of Cardiac Electrophysiology from non-invasive Data

Gillette, K.K.¹, Grandits, T.², Pezzuto, S.³, Pock, T.^{2,4}, Plank, G.^{1,4}

¹Medical University of Graz, Gottfried Schatz Research Center, Biophysics, Graz, Austria

²Graz University of Technology, Institute of Computer Graphics and Vision, Graz, Austria

³Center for Computational Medicine in Cardiology, Euler Institute, Università della Svizzera italiana, Lugano, Switzerland

⁴BioTechMed Graz, Graz, Austria

1. Abstract

Computational models of cardiac electrophysiology (EP) are an important tool supporting the quantitative analysis of experimental data, but are increasingly considered in clinical applications. These rely on the ability of models to replicate seen clinical observations and, for making predictions on the acute therapeutic responses, to account for relevant EP mechanisms. Models offering these capabilities are referred to as cardiac digital twins (CDTs) – digital replicas of patient hearts derived from clinical data that match like-for-like all available observations. Their development and clinical validation poses numerous challenges.

Currently used CDT workflows are laborious and computationally expensive. These must be advanced to fully automate the generation of cardiac anatomy models and the personalization of their EP function, using, ideally, non-invasive data only. Novel techniques for the functionalization of high dimensional models are needed that facilitate the unattended alteration of complex parameter fields influencing cardiac EP simulation outcomes, such as the ventricular conduction system, orthotropic conduction in the ventricles and heterogeneity in action potential shape and duration in a given individual.

We report on the development of an automated workflow for building CDTs using tomographic imaging and non-invasive ECG recordings. The workflow consists of three major stages; generation of a finite-element mesh from clinically-attained 3D whole heart and torso MRIs, physiologically-constrained functionalization of the models according to a feature vector consisting of both global and spatially-dependent parameters, and a fast-forward model of cardiac EP for simulation of ECGs to guide parameter identification. We demonstrate feasibility of our workflow to automatically generate CDTs compatible for clinical use by generating a virtual cohort of 13 CDTs from volunteer subjects [1]. An initial proof of concept of the unattended generation of an EP CDT is given for one subject using both a stochastic sampling approach [1,2] and a gradient-based optimization method [3,4].

2. References

- [1] Gillette K, Gsell MAF, Prassl AJ, et al. A Framework for the generation of digital twins of cardiac electrophysiology from clinical 12-leads ECGs. *Med Image Anal.* 2021;71:102080.
- [2] Gillette K, Gsell MAF, Prassl AJ, et al. Automated Framework for the Inclusion of His-Purkinje System in Digital Twin Models of Cardiac Electrophysiology. *Ann Biomed Eng.* 2021 (accepted)
- [3] Grandits T, Gillette K, Neic A, et al. An inverse Eikonal method for identifying ventricular activation sequences from epicardial activation maps. *J Comput Phys.* 2020;419.
- [4] Grandits T, Efland A, Pock T, Krause R, Plank G, Pezzuto S. GEASI: Geodesic-based Earliest Activation Sites Identification in cardiac models. *Int J Numer Method Biomed Eng.* 2021 25:e3505.