

Modelling and controlling complex dynamics in cardiac networks

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- data driven modelling in cardiac research
- transient chaos in cardiac arrhythmias
- termination of spatio temporal chaos and defibrillation

Data driven modelling in cardiac research

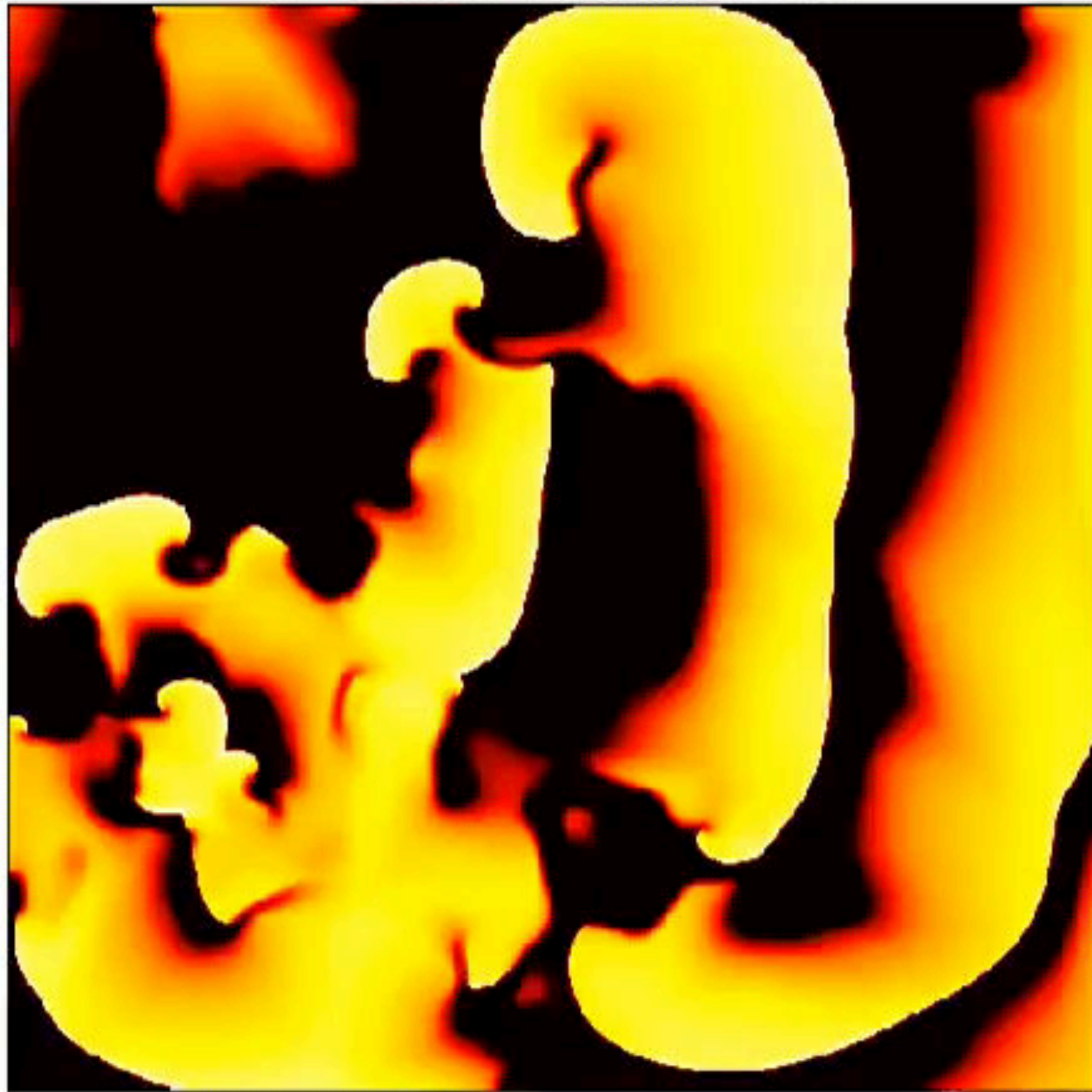
includes:

- data driven **prediction of future evolution** (e.g., membrane voltages, mechanical motion)

Iterated Forecasting of $u(t)$

true

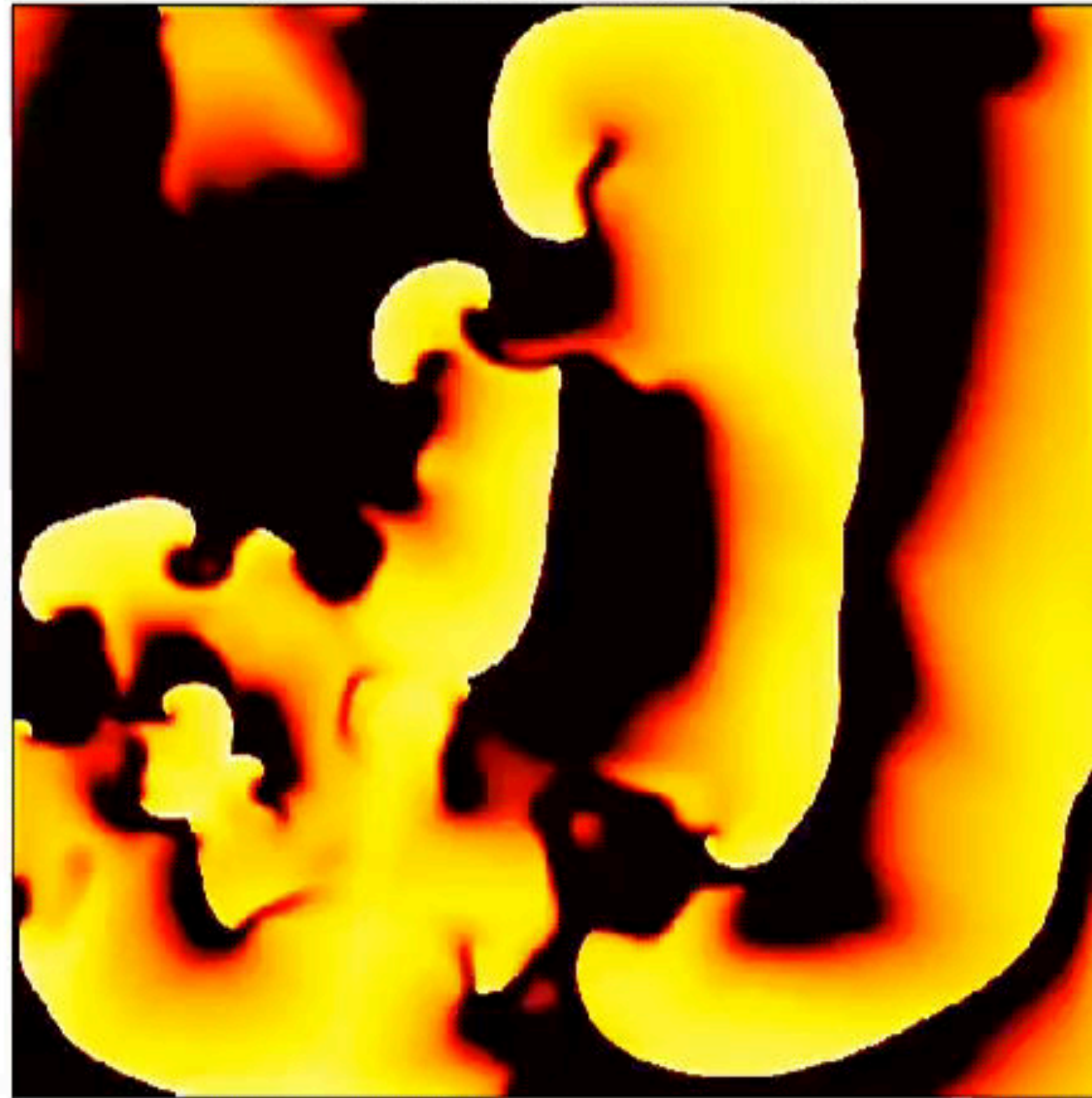
u - BOCF simulation



good for 5 spiral rotations

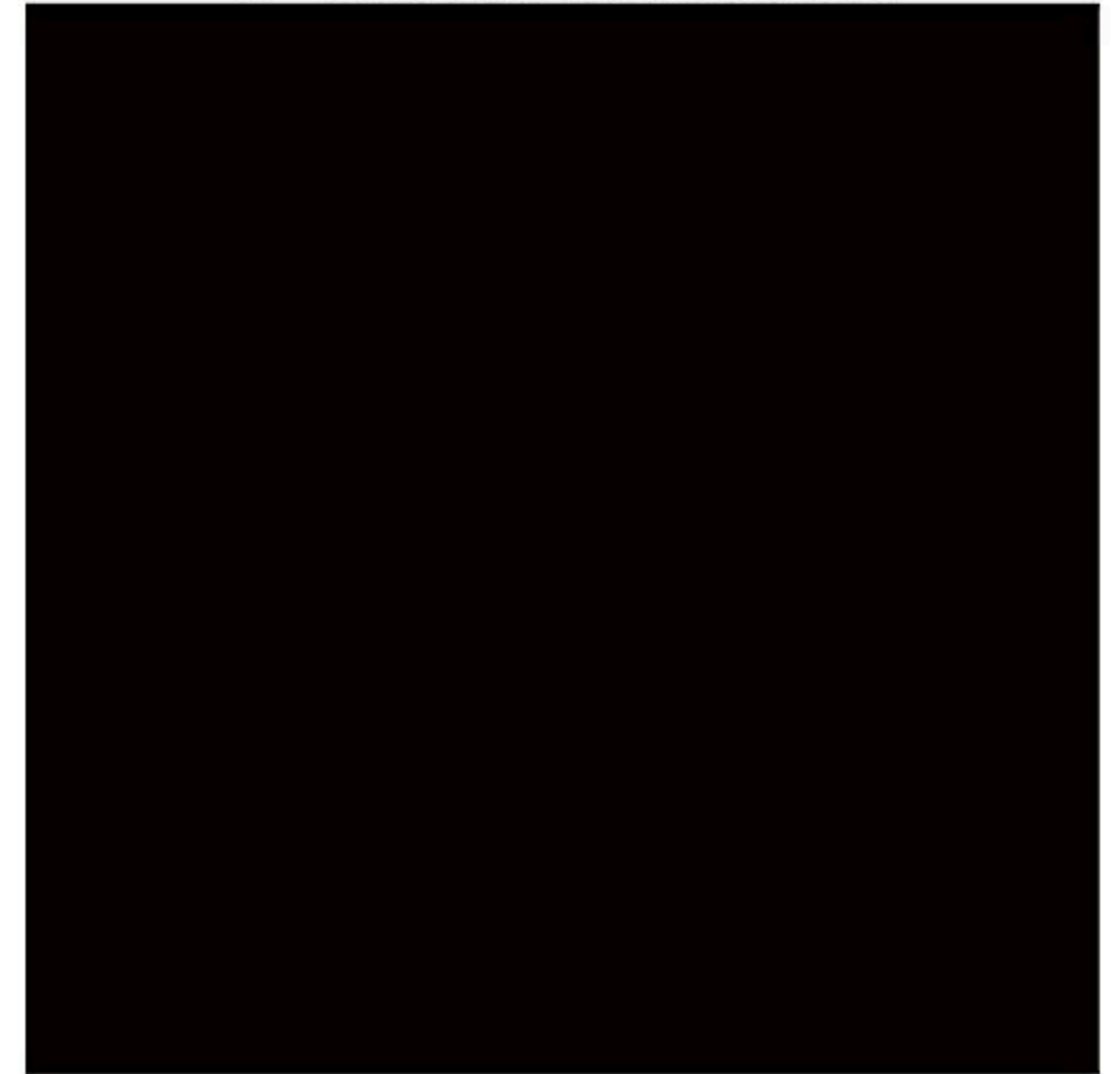
forecast

u - network forecast



difference

u - absolute difference



S. Herzog et al., *Frontiers in Appl. Math. and Statistics* 4, 60 (2018)

Data driven modelling in cardiac research

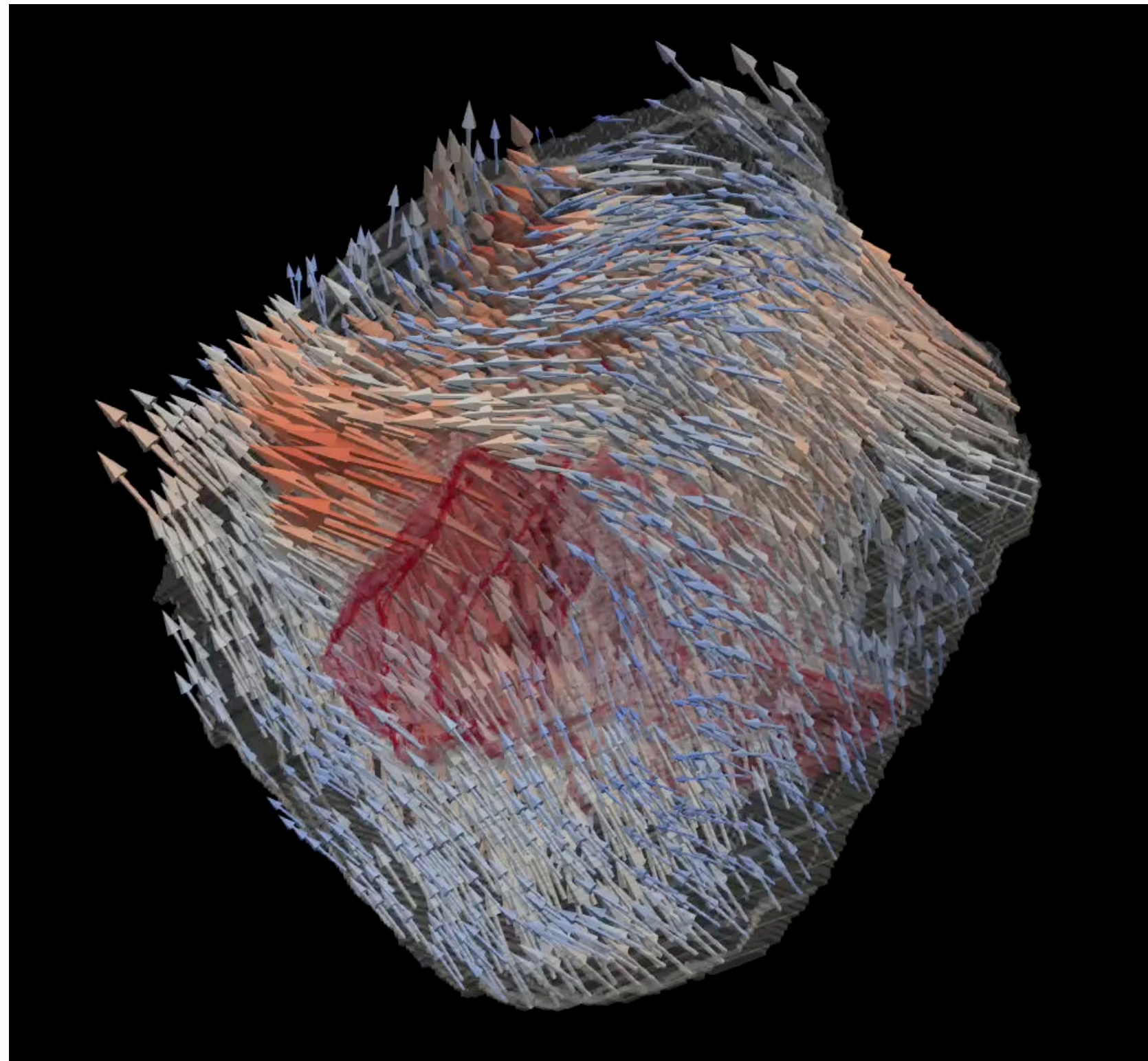
includes:

- data driven **prediction of future evolution** (e.g., membrane voltages, mechanical motion)
- extraction of **relevant features** from (noisy) raw data
(S. Herzog et al., Frontiers Appl. Math. Stat. 6 (2021))
- **classification** (e.g., time series, images, evolution of patterns and shapes)
- **cross estimation of observables that are difficult to measure directly from available data**

Measurement Modalities

mechanical motion

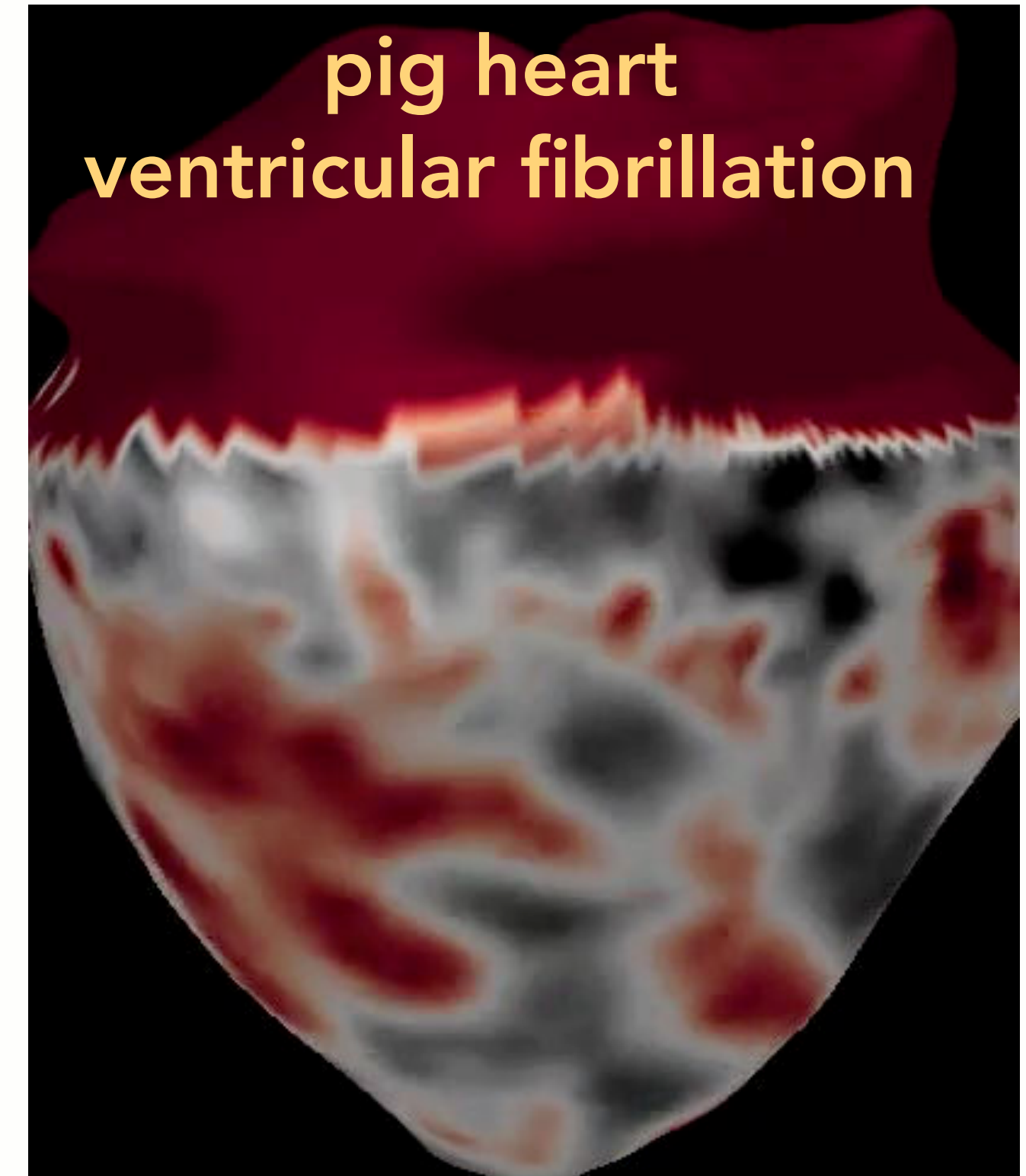
4D ultrasound



- real-time MRI
- multi-camera systems *

electrical excitation

voltage sensitive dyes*



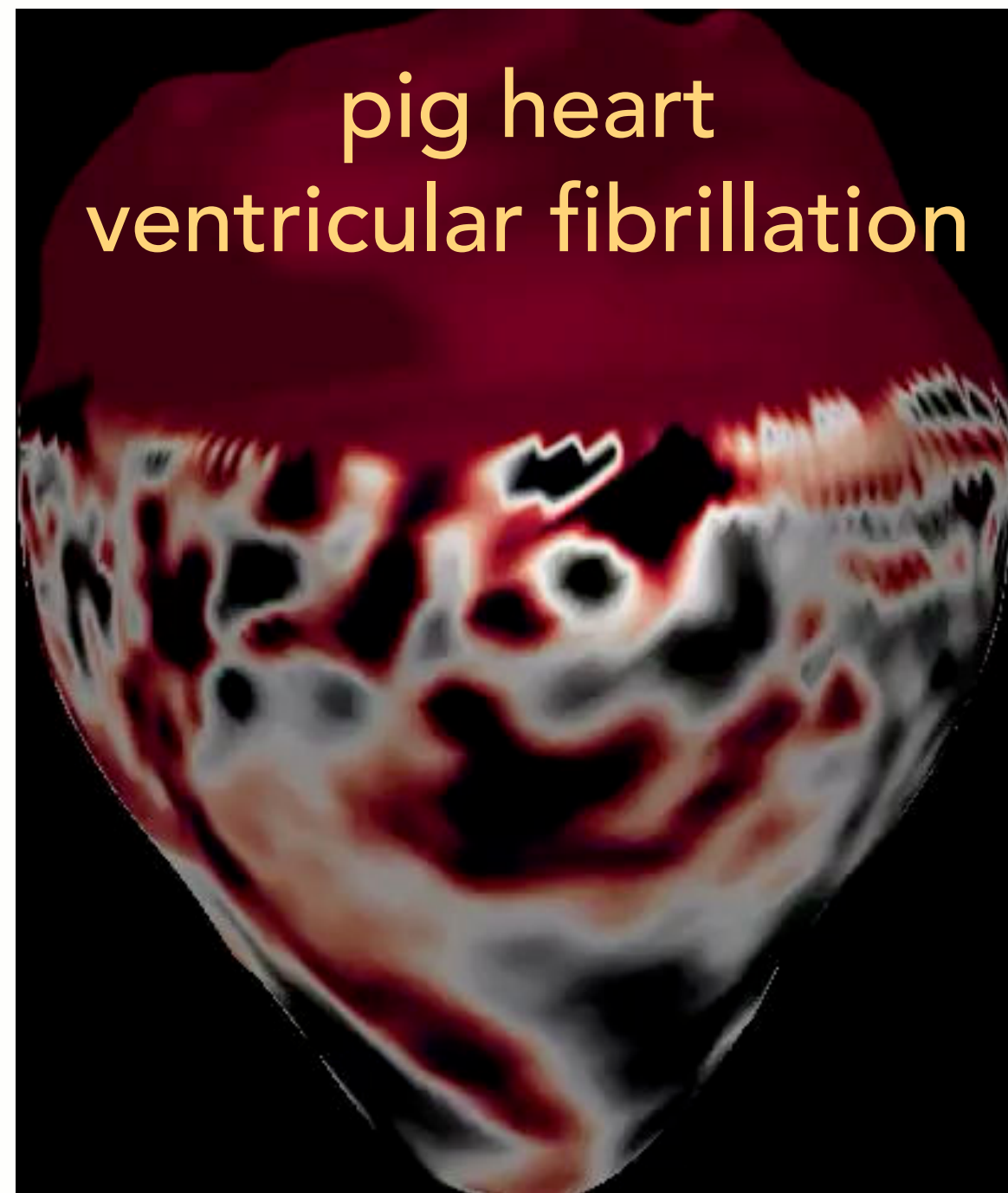
- multichannel - ECG

*surface only!

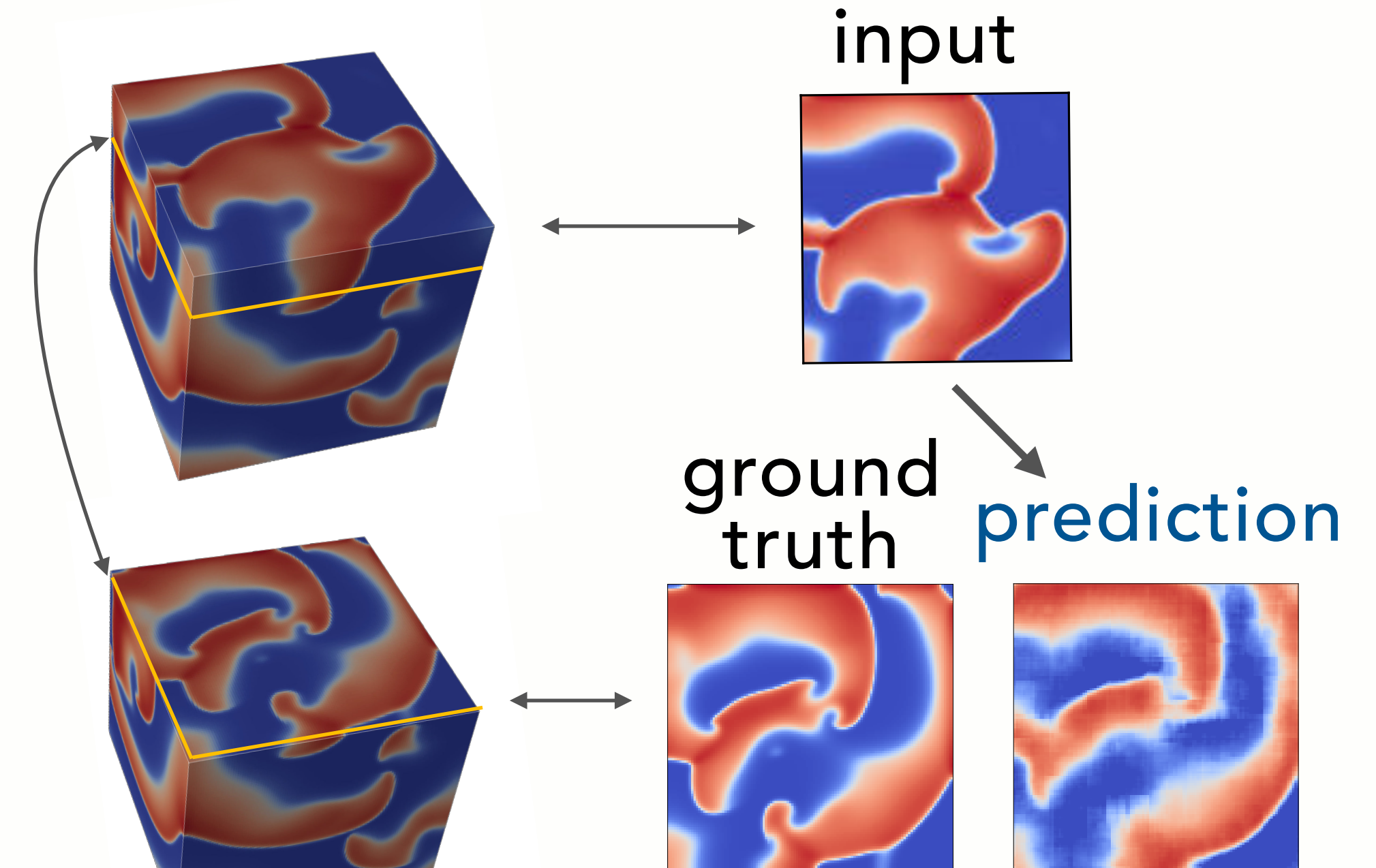
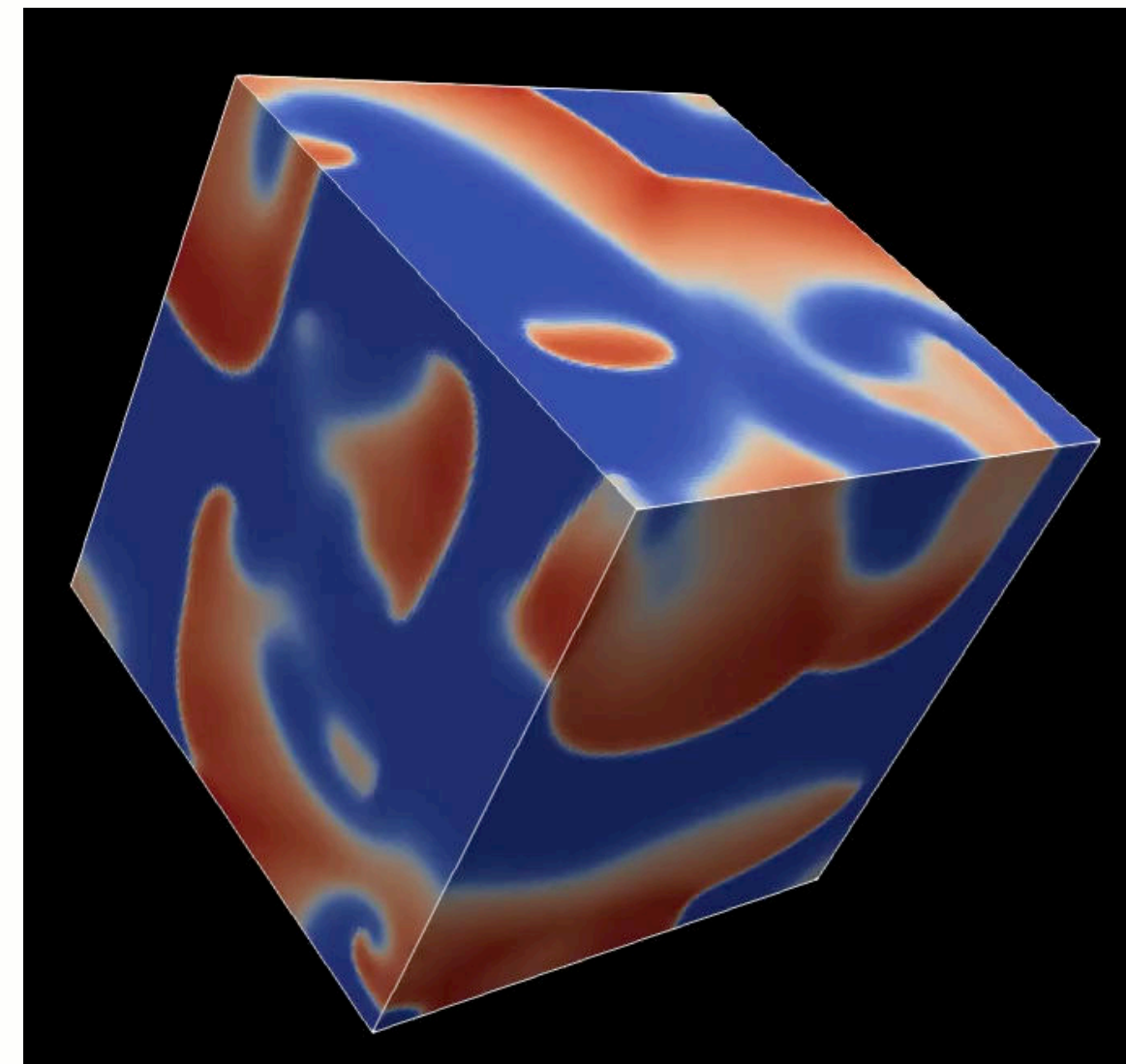
From the surface into the depth

optical mapping using voltage sensitive dyes provides electrical excitation waves only on the surface of the heart

predict activity in deeper layers using Convolutional Neural Network



simulation of a 3D excitable medium



Inga Kottlarz

From Surface To Depth

3D Barkley model

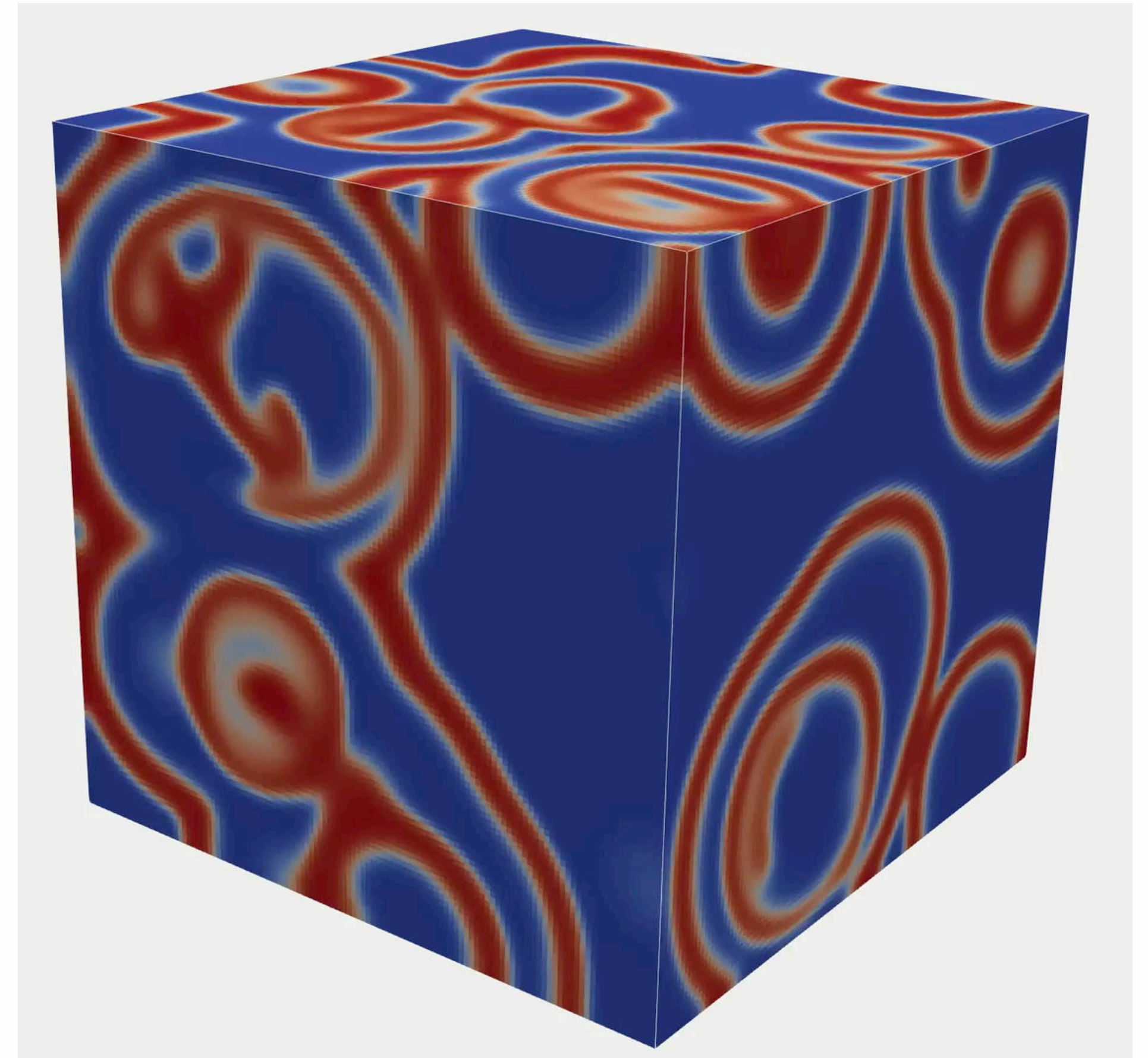
$$\frac{du}{dt} = D\nabla^2 u + \frac{1}{\varepsilon}u(1-u) \left(u - \frac{v+b}{a} \right)$$

$$\frac{dv}{dt} = u^3 - v$$

$$a = 0.75 \quad b = 0.06 \quad \varepsilon = 0.08 \quad D = 0.02$$

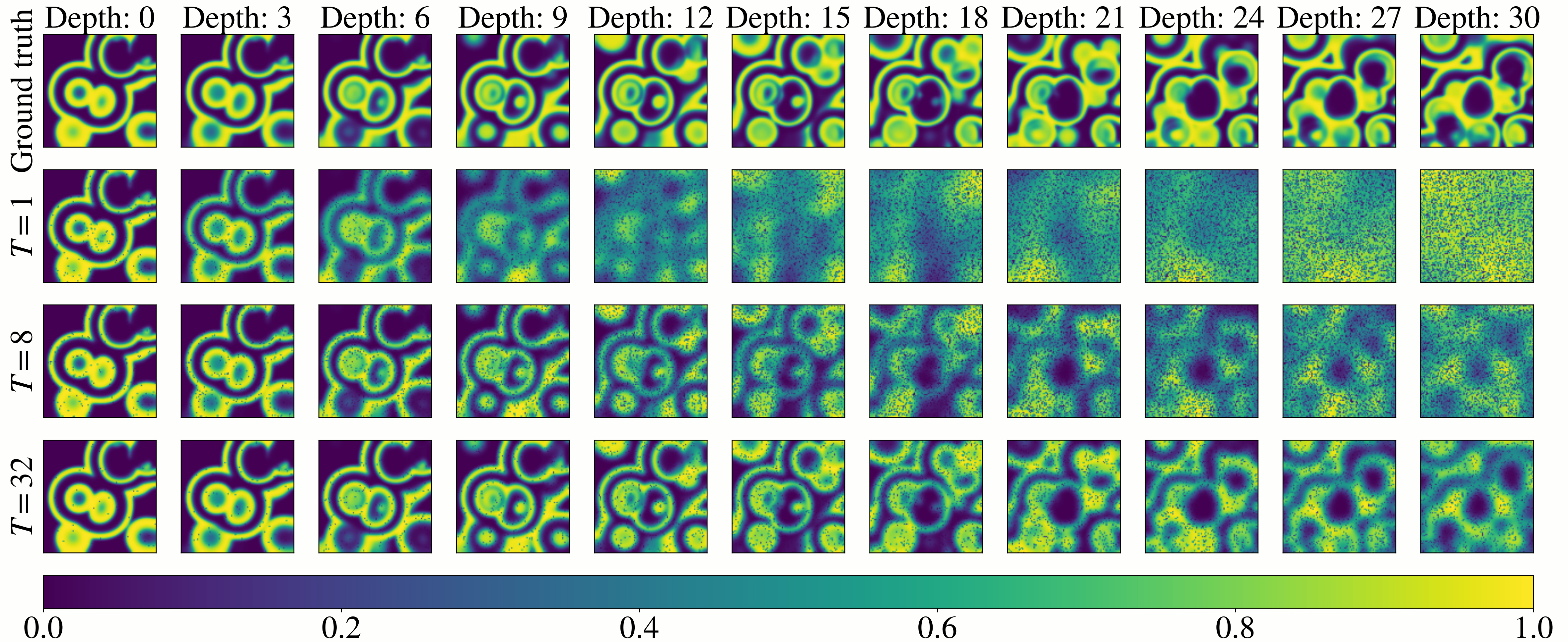
grid: $120 \times 120 \times 120$

predict deeper layers from data at surface
using convolutional neural networks



Inga Kottlarz

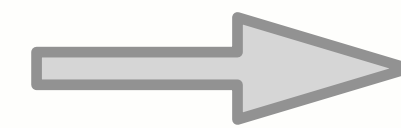
Reconstructions with different input lengths $T \in \{1, 8, 32\}$



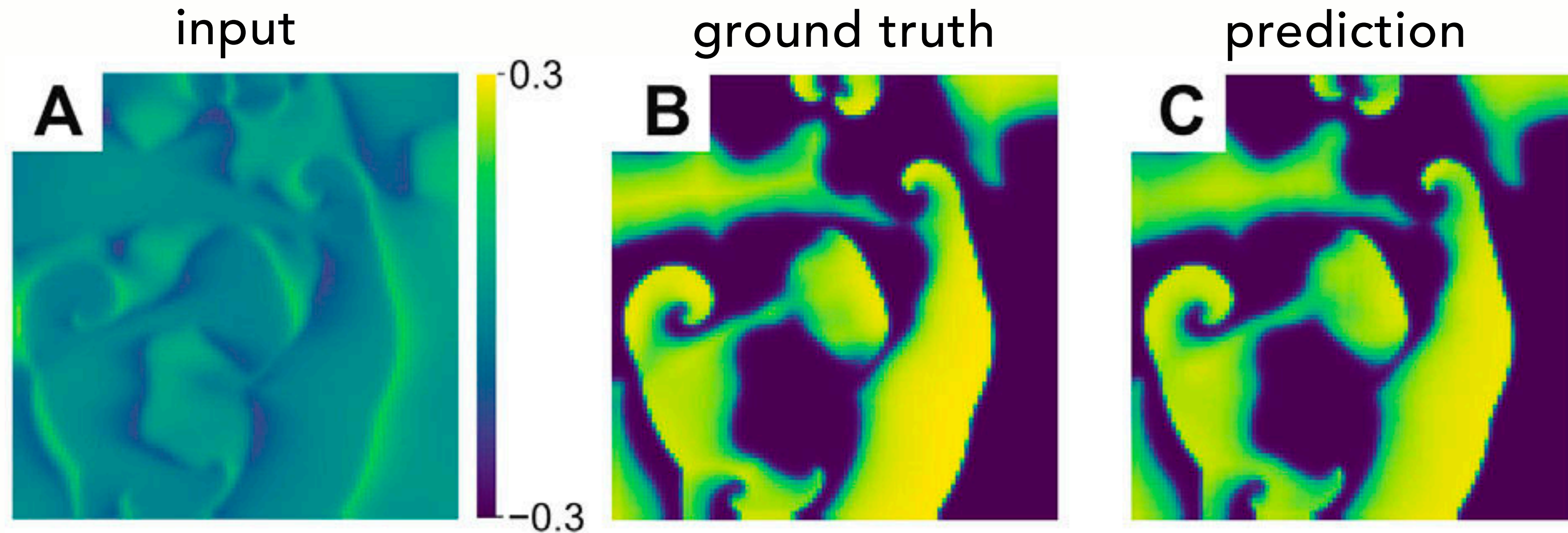
Sebastian Herzog

Electrical excitation from mechanical deformation

mechanical deformation



electrical excitation



Data generated by a conceptual electro-mechanical model (BOCF model driving a mass-spring system)
Convolutional Auto-encoder provides better results than Reservoir Computing)

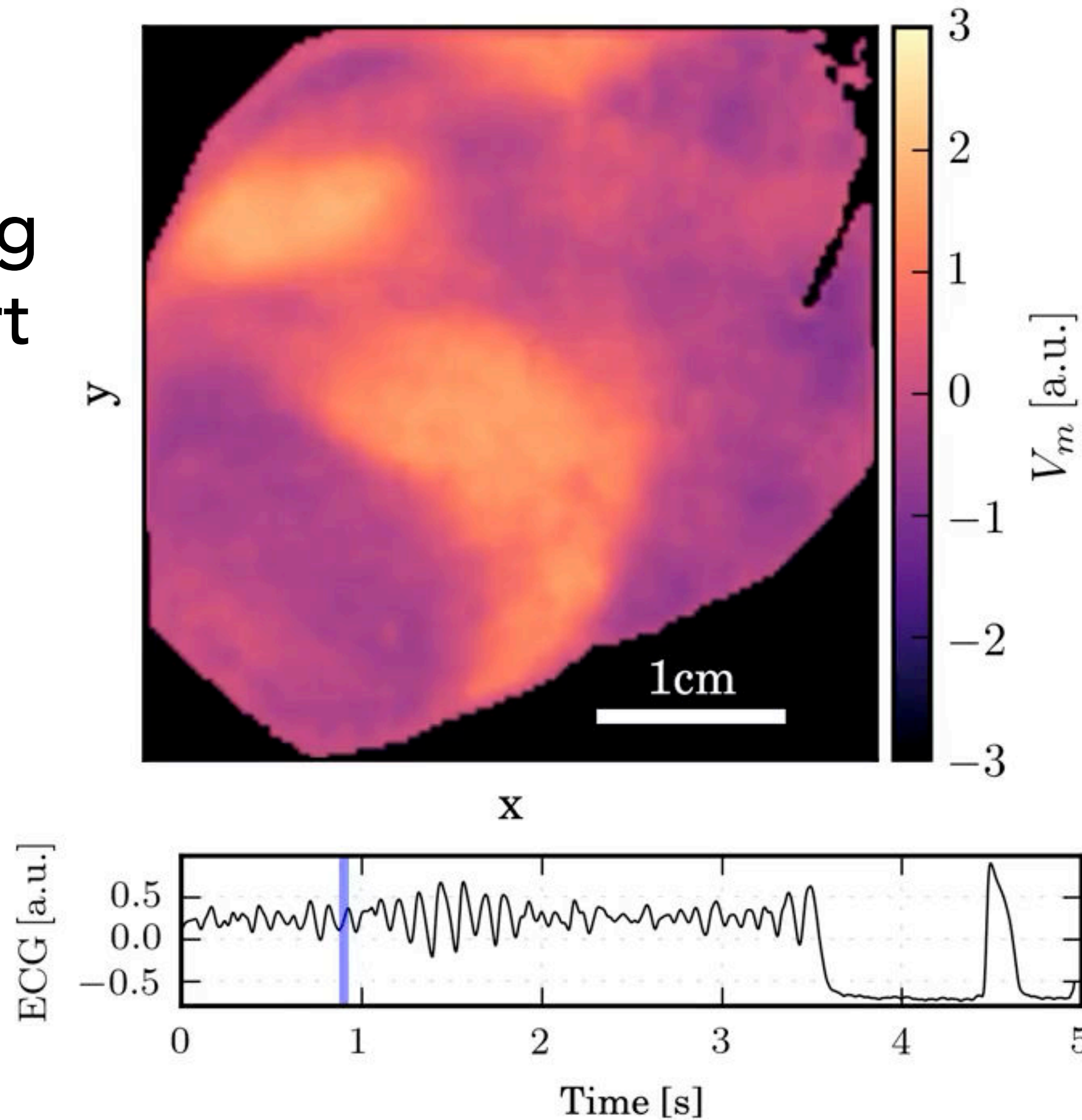
S. Herzog et al., Frontiers Appl. Math. Stat. 6 (2021)

Transient Chaos in Cardiac Arrhythmias

Transient Scroll Wave Dynamics during Ventricular Fibrillation

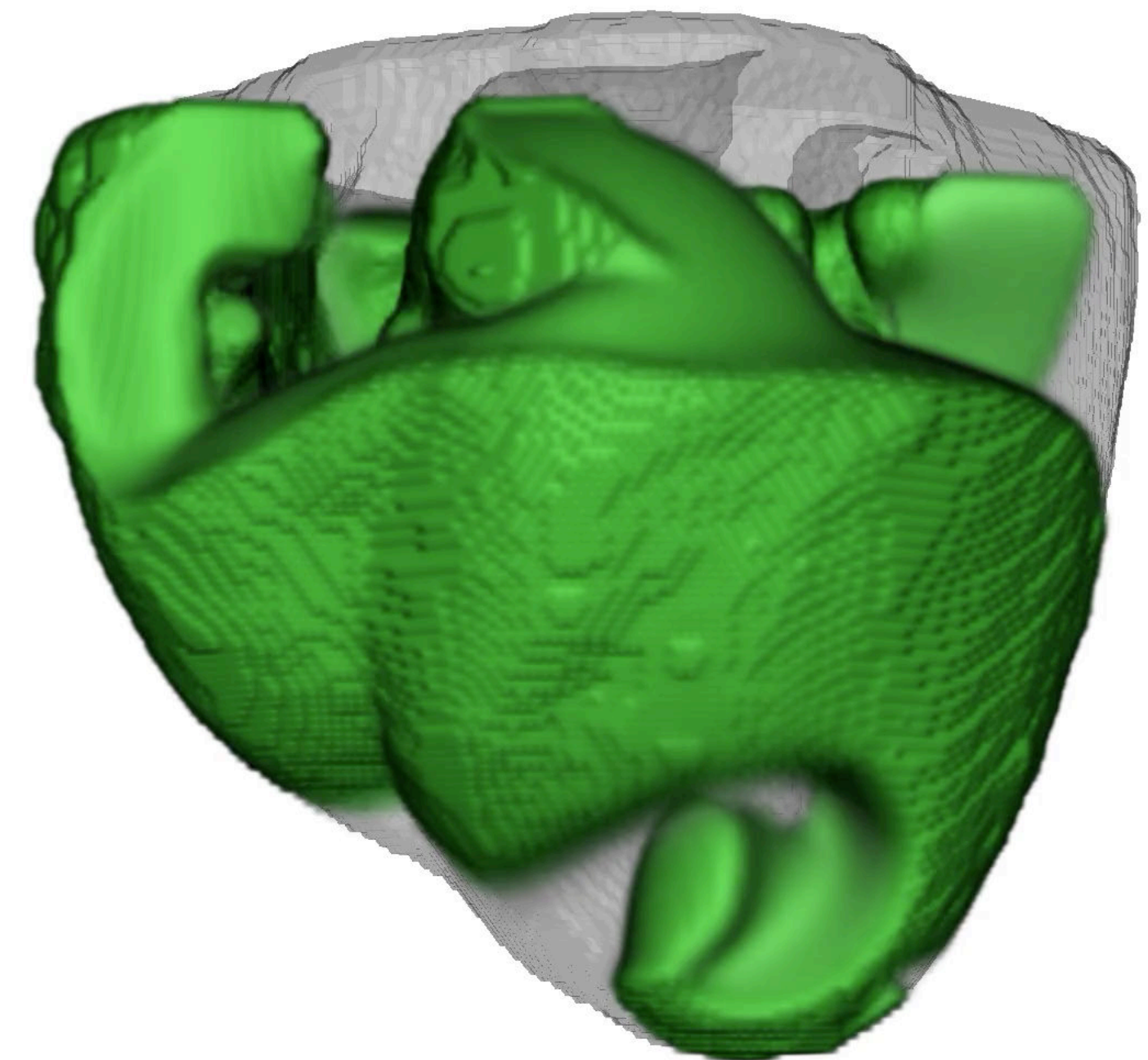
Experiment

Optical mapping of a rabbit heart



Sebastian Berg
Daniel Hornung
Marion Kunze

Simulation
in a rabbit heart geometry



Thomas Lilienkamp

Simulation using the Fenton-Karma model

$$\frac{\partial u}{\partial t} = \nabla \cdot \underline{\mathbf{D}} \nabla u - I_{Ion}(u, \mathbf{h}) / C_m$$

$$\frac{\partial \mathbf{h}}{\partial t} = \mathbf{g}(u, \mathbf{h})$$

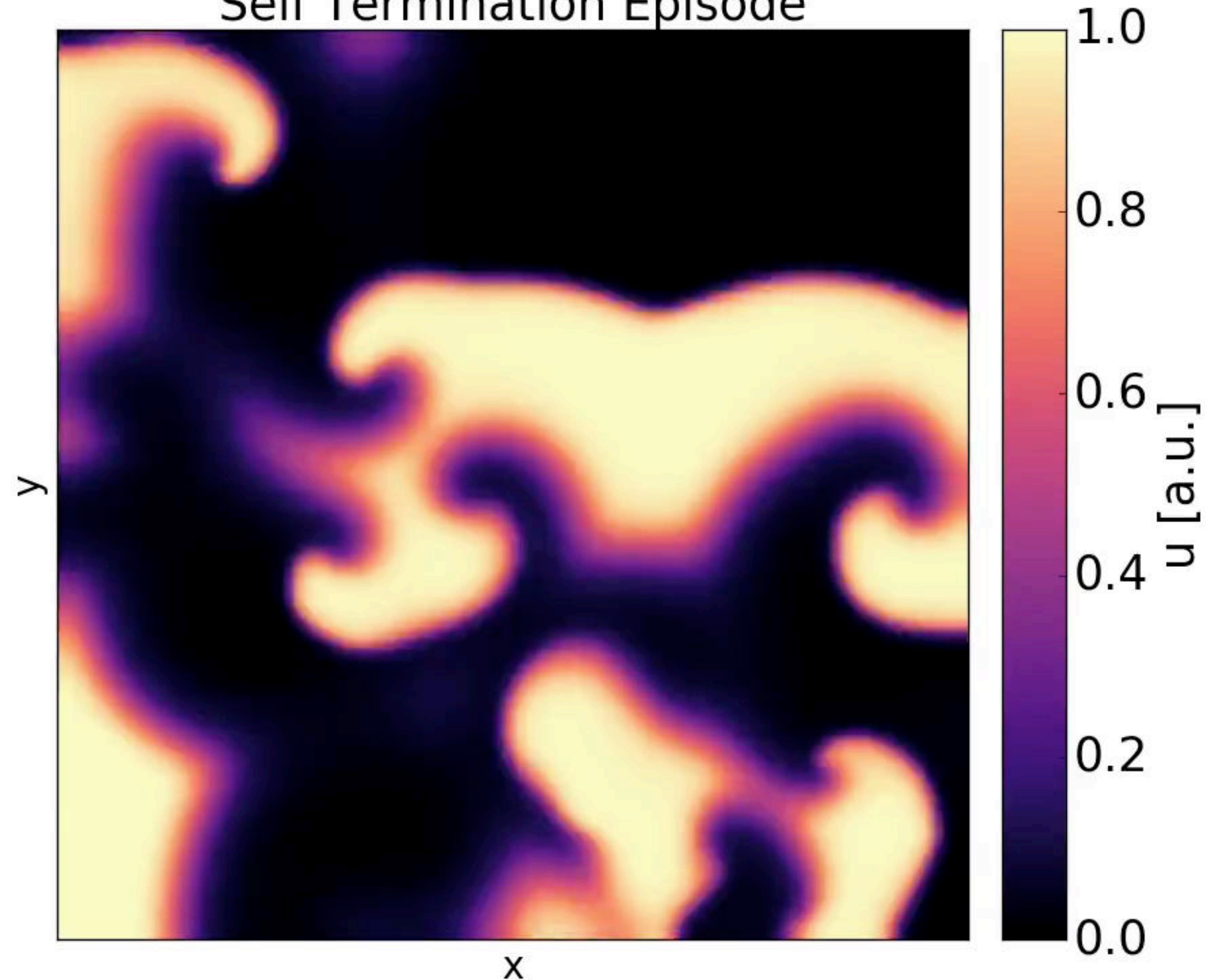
gating variables $\mathbf{h} = (v, w)$

average **transient lifetime** increases **exponentially** with system **size**

T. Lilienkamp et al., Phys. Rev. Lett. 119 (2017)

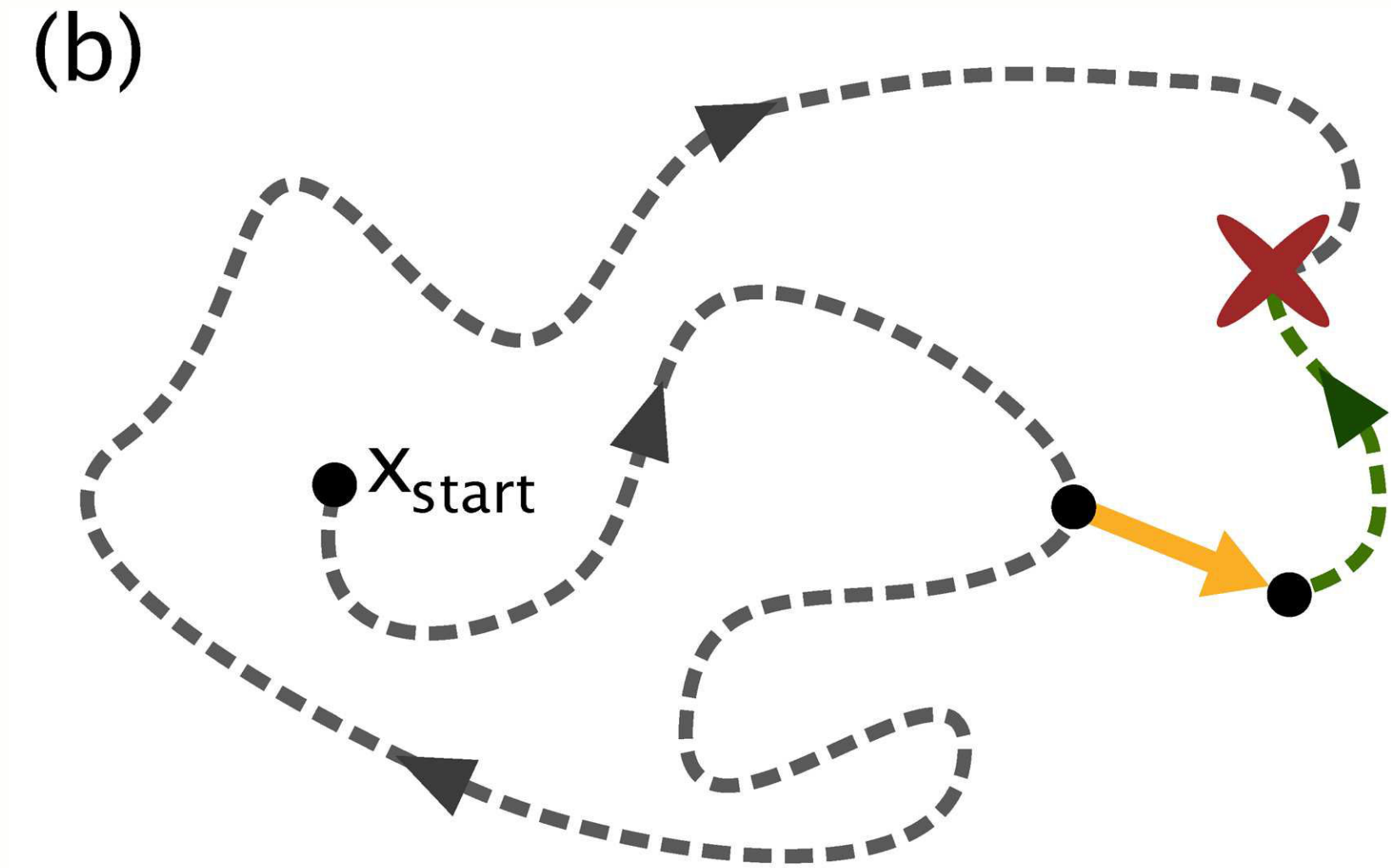
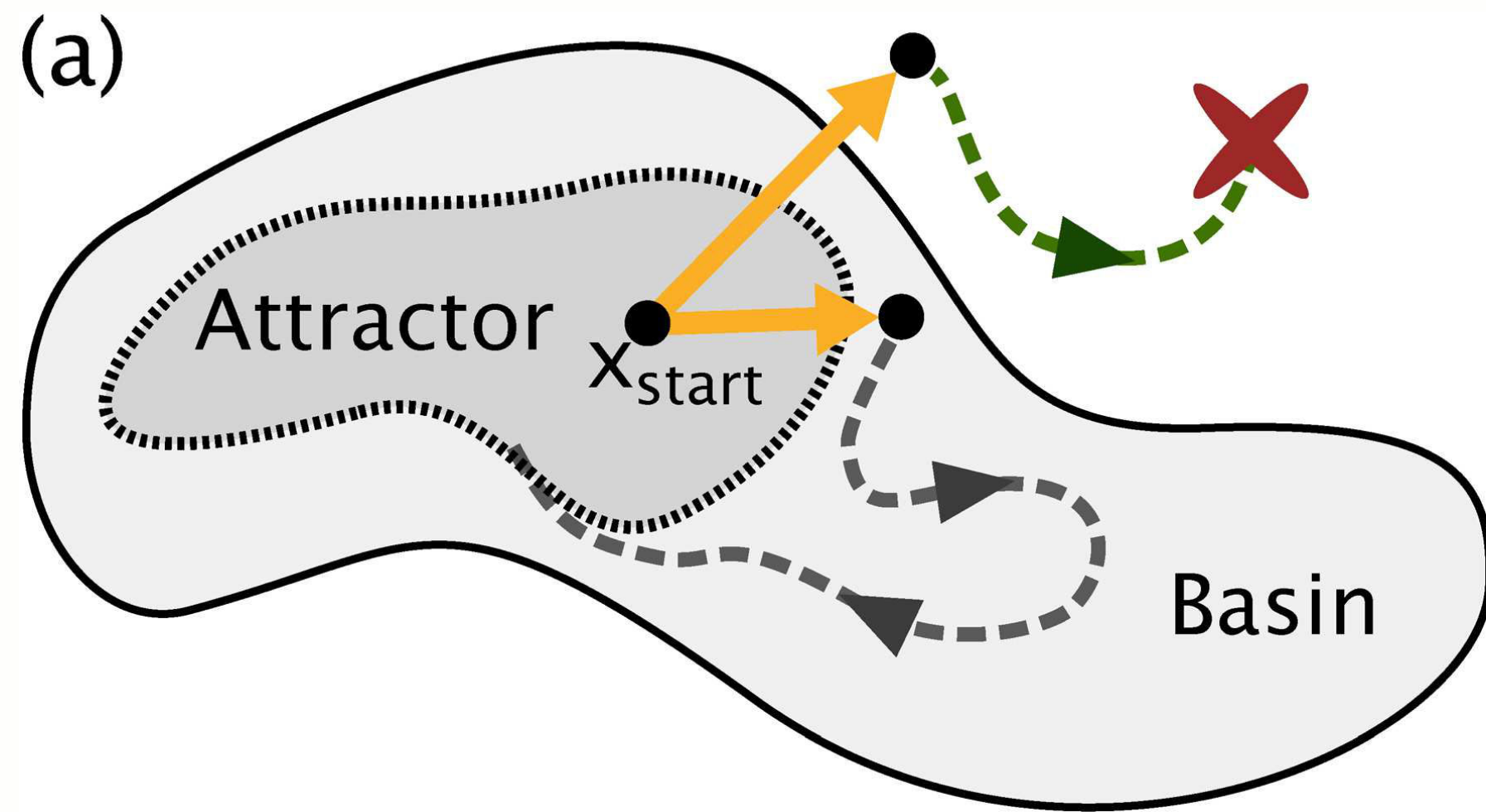
T. Lilienkamp and U. Parlitz, Phys. Rev. Lett. 120 (2018)

Self Termination Episode



Potential Implications of Transient Chaos for Defibrillation

Persistent chaos vs. Transient chaos



Desired State:  Perturbations:  Trajectories: 

control: kick state into basin of another attractor

kick state to neighbouring orbit with (much) shorter transient time

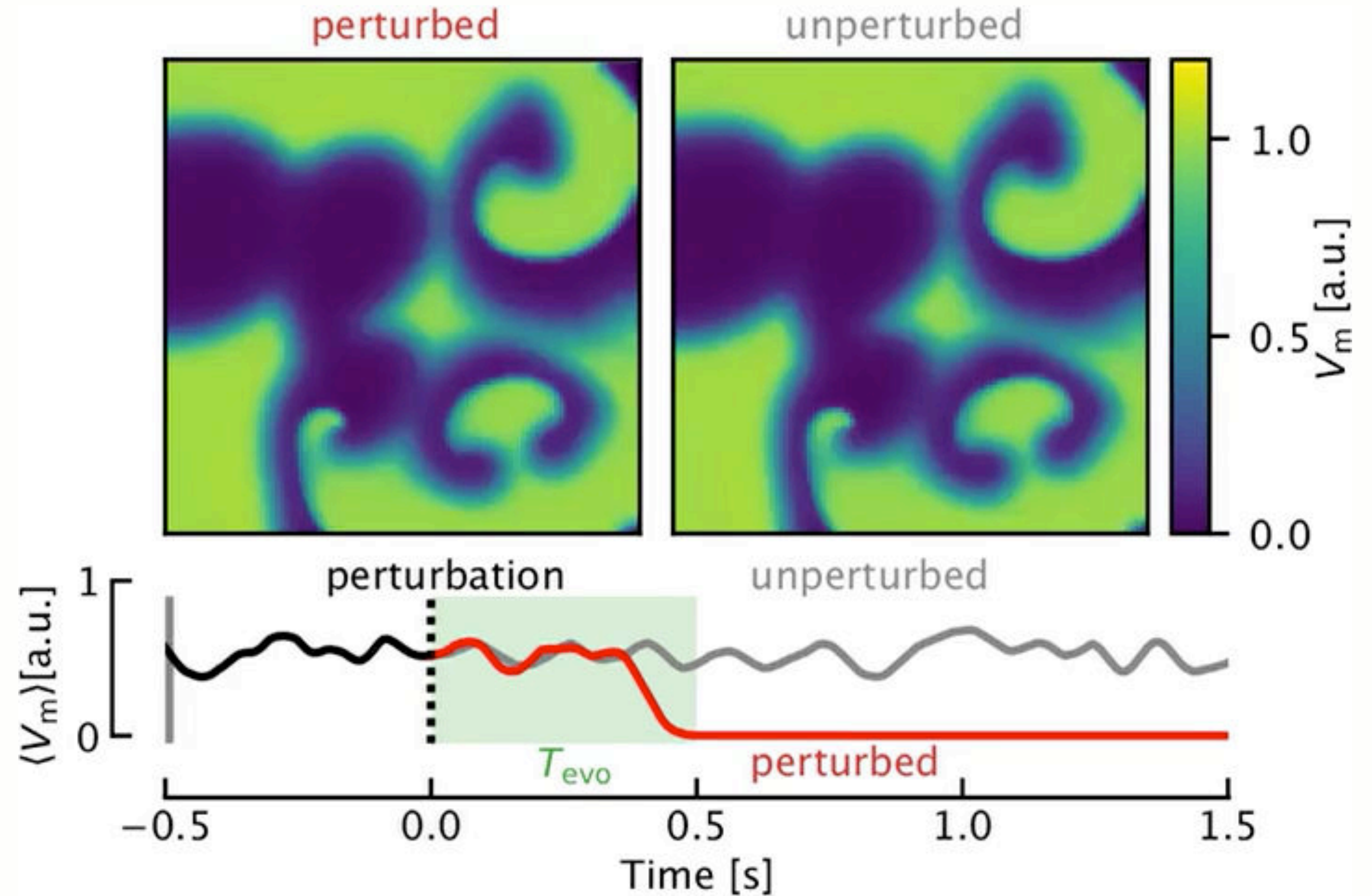
minimal perturbation strength required

can be achieved with (very) small perturbations

Terminating spiral wave chaos with a few single perturbations

Fenton-Karma model

$$T_{\text{evo}} = 500 \text{ ms}$$



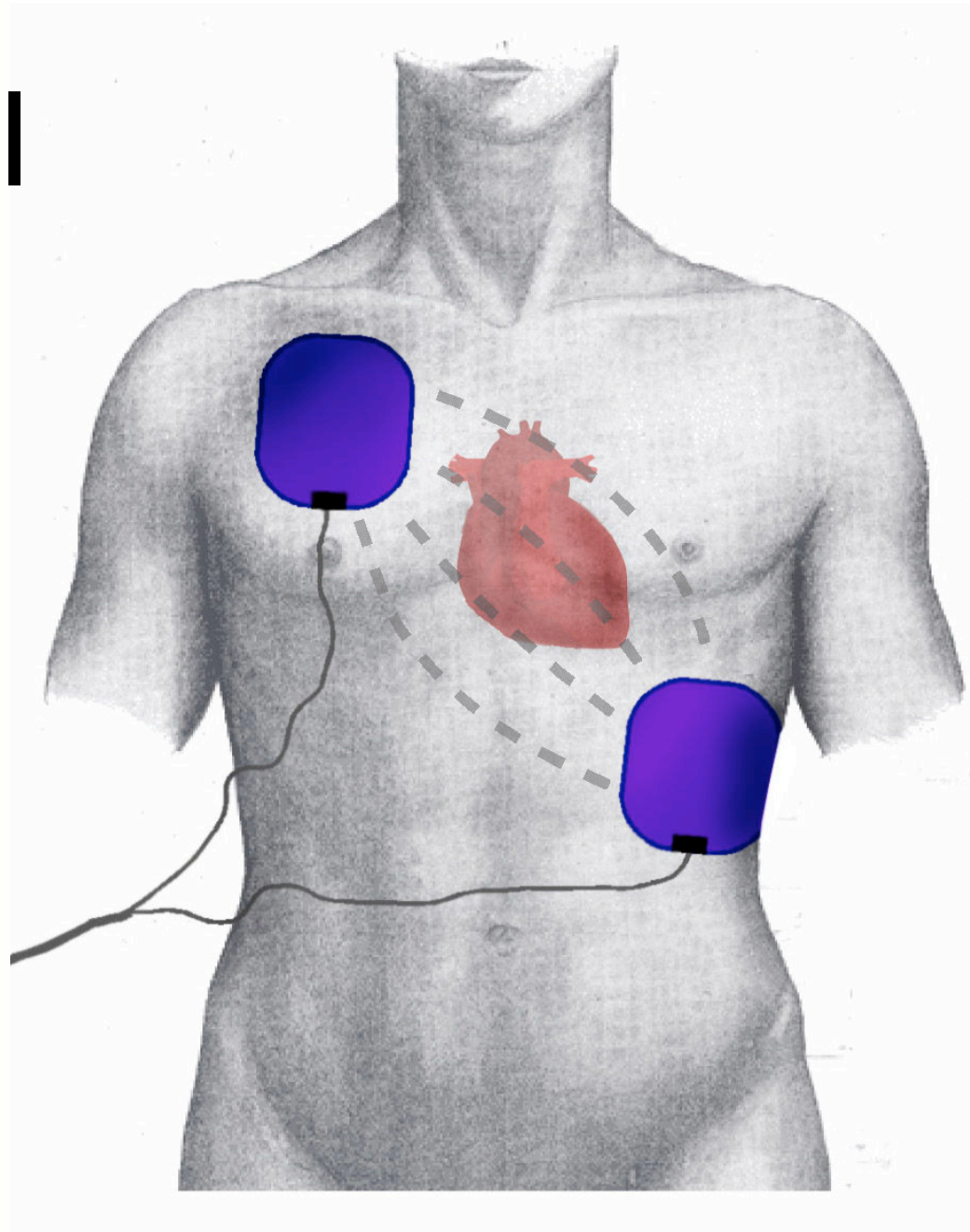
T. Lilienkamp and U. Parlitz,
Chaos 30, 051108 (2020)

Terminating Cardiac Arrhythmias (Defibrillation)

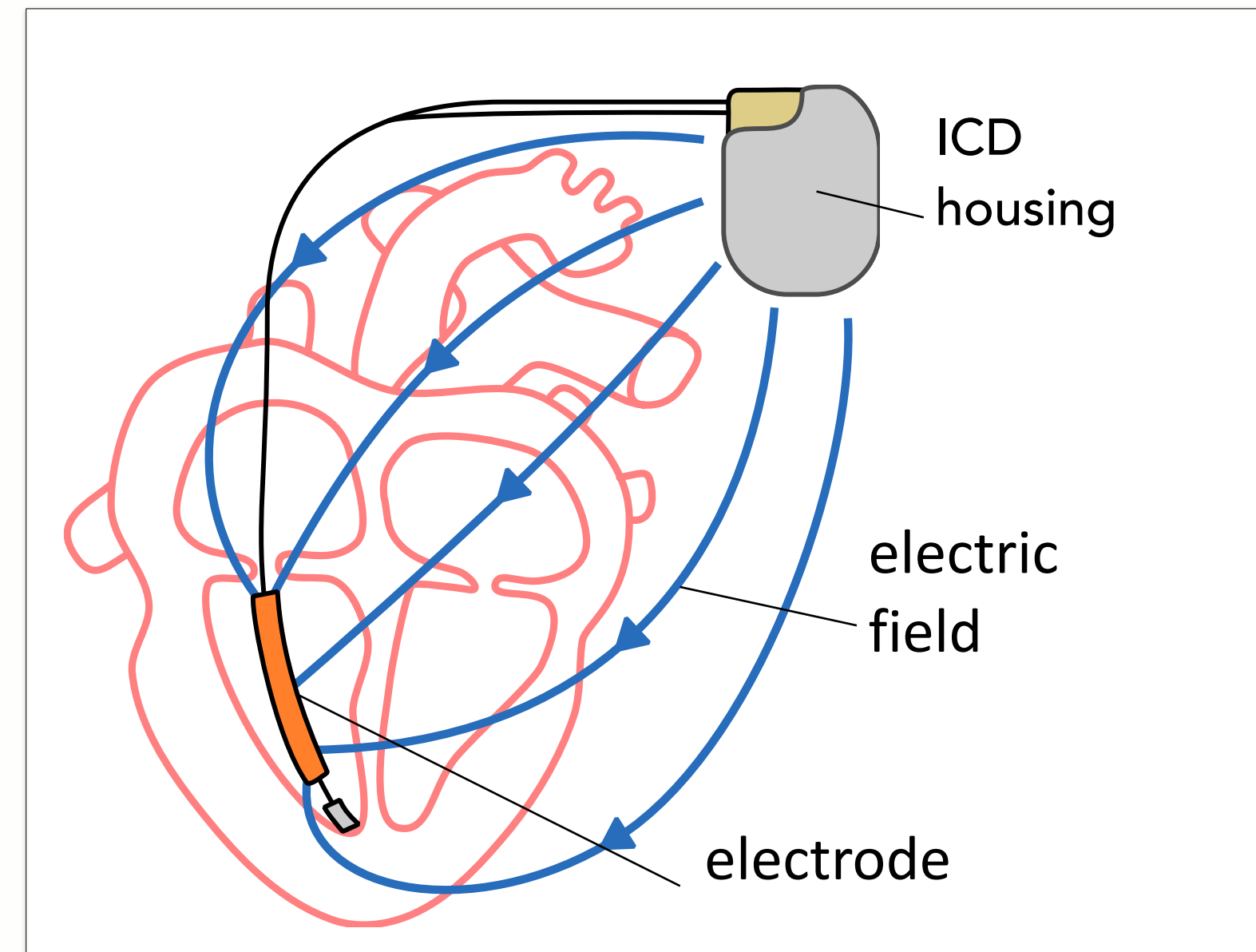
Defibrillation

Principle: Reset electrical activity of all cells by synchronous excitation

external



internal

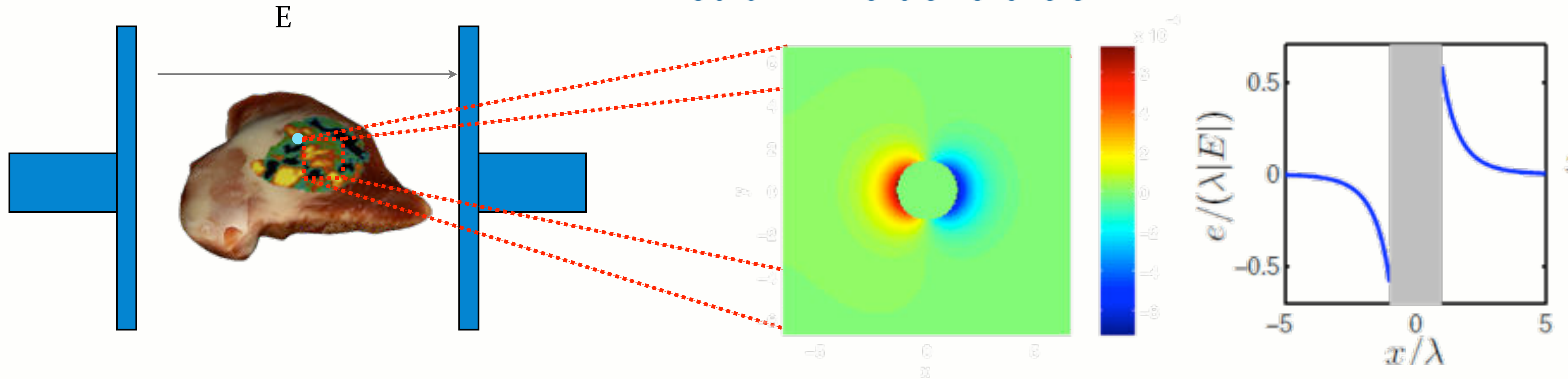


Electric shocks: energy 360J (external) 40 J (internal) 1000 V 30 A 12 ms
Severe side effects: tissue damage - traumatic pain

G.P. Walcott et al., Resuscitation 59, 59-70 (2003)

Terminating Cardiac Arrhythmias

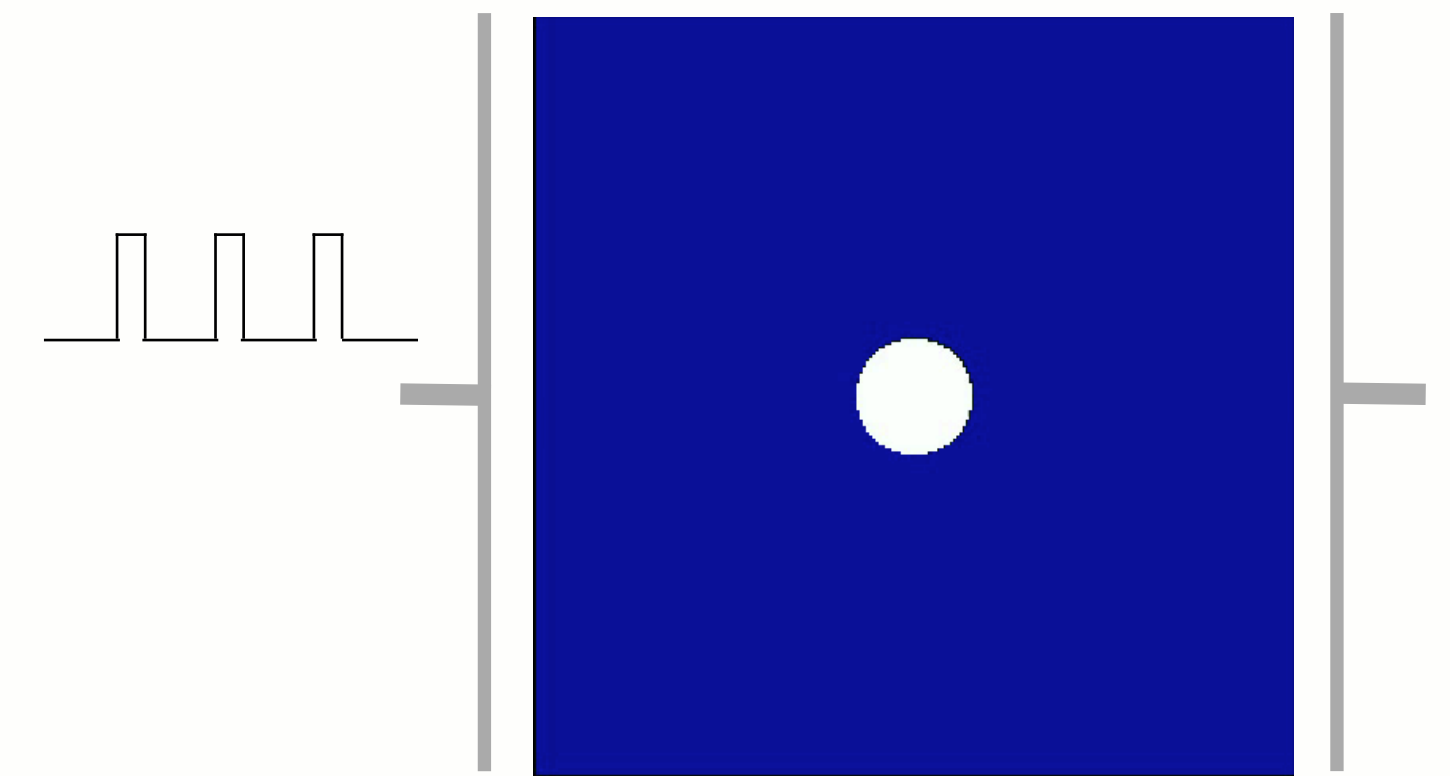
Virtual Electrodes



Blood vessels, scars, fatty tissue

- are obstacles to electrical conduction
- may act as **virtual electrodes**

Super-threshold depolarization leads to **wave emission** if a short **rectangular electric field pulse** is applied.



A. Pumir and V. Krinsky, J. Theor. Biol. 199, 311 (1999); P. Bittihn et al., Phys. Rev. Lett. 109, 118106 (2012)

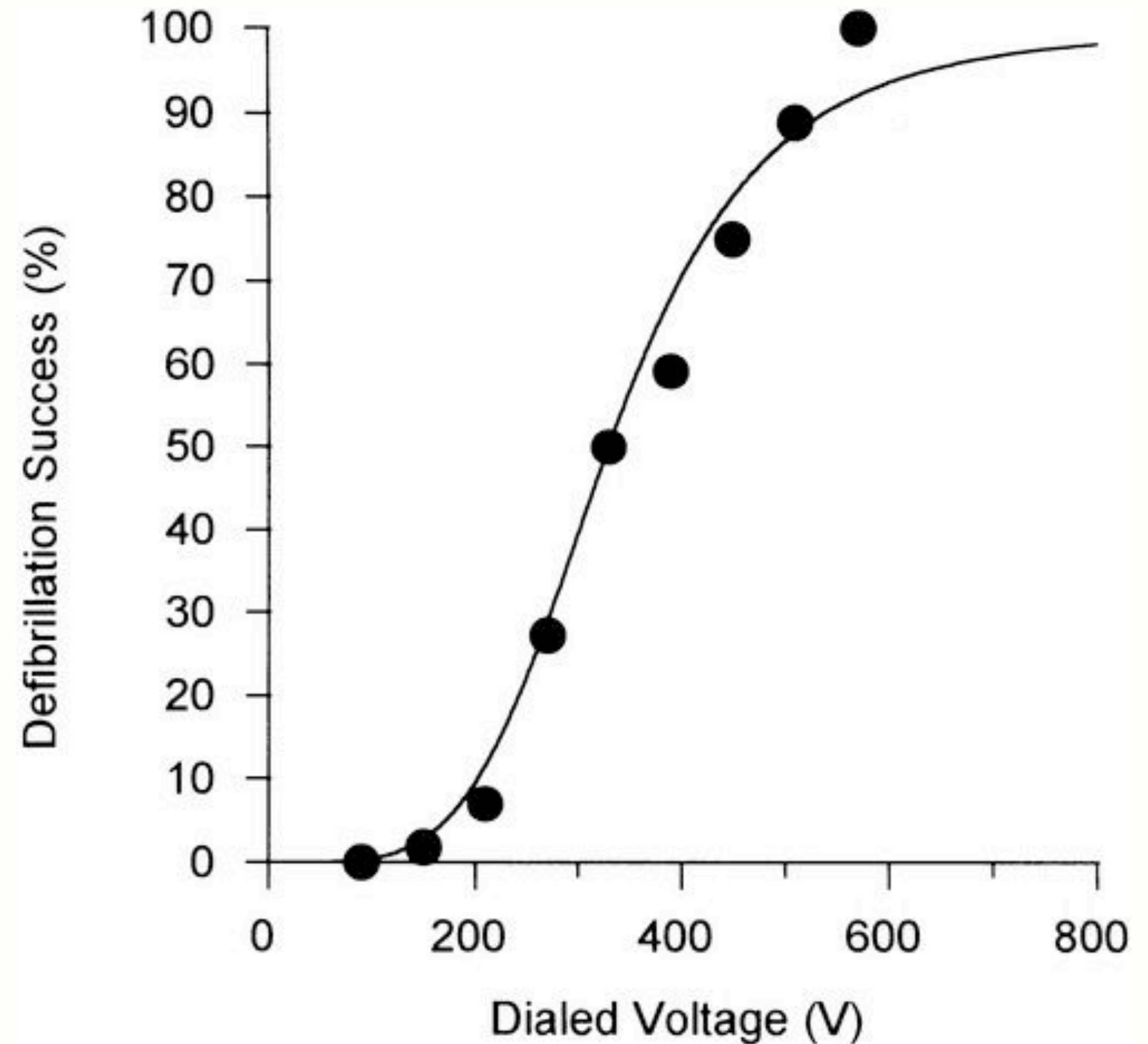
Terminating Cardiac Arrhythmias

Termination with a single electrical pulse - conventional defibrillation

Probability of defibrillation versus shock voltage for 273 shocks in 23 hearts

sigmoid dose-response curve

from: K.F. Kwaku and S.M. Dillon,
Circulation Research 79, 957–973 (1996)



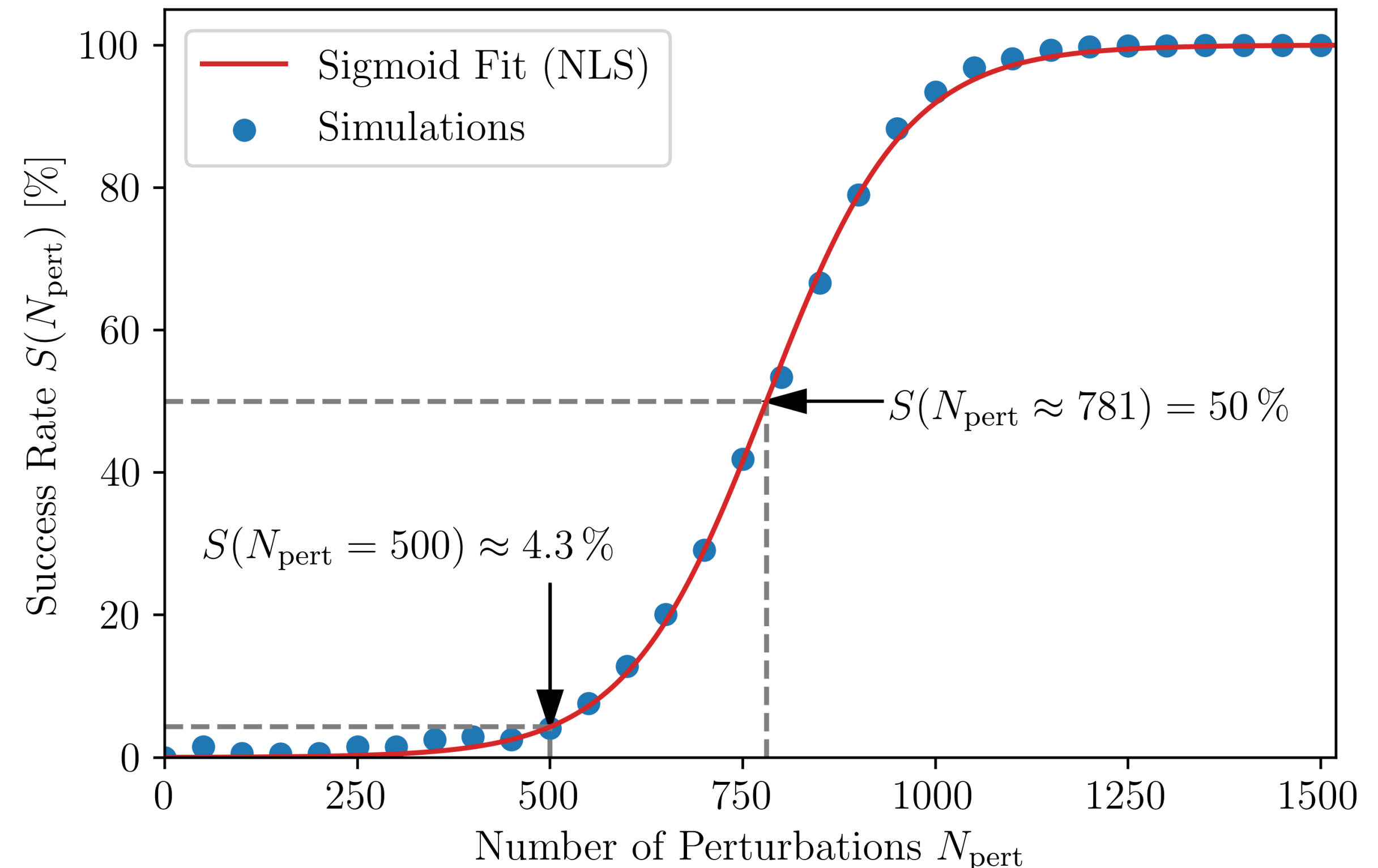
Terminating Cardiac Arrhythmias

Pulse timing matters

simulation study with virtual electrodes simulated by local current injection

- 50 random configurations of N_{pert} perturbations sites acting like virtual electrodes
- 20 realisations (initial conditions)
- compute average success rate from 1000 examples for different numbers N_{pert} of activated virtual electrodes
- larger N_{pert} corresponds to higher field strengths of applied pulses

dose-response curve



Terminating Cardiac Arrhythmias

Success of termination attempts strongly depends on current state of the system

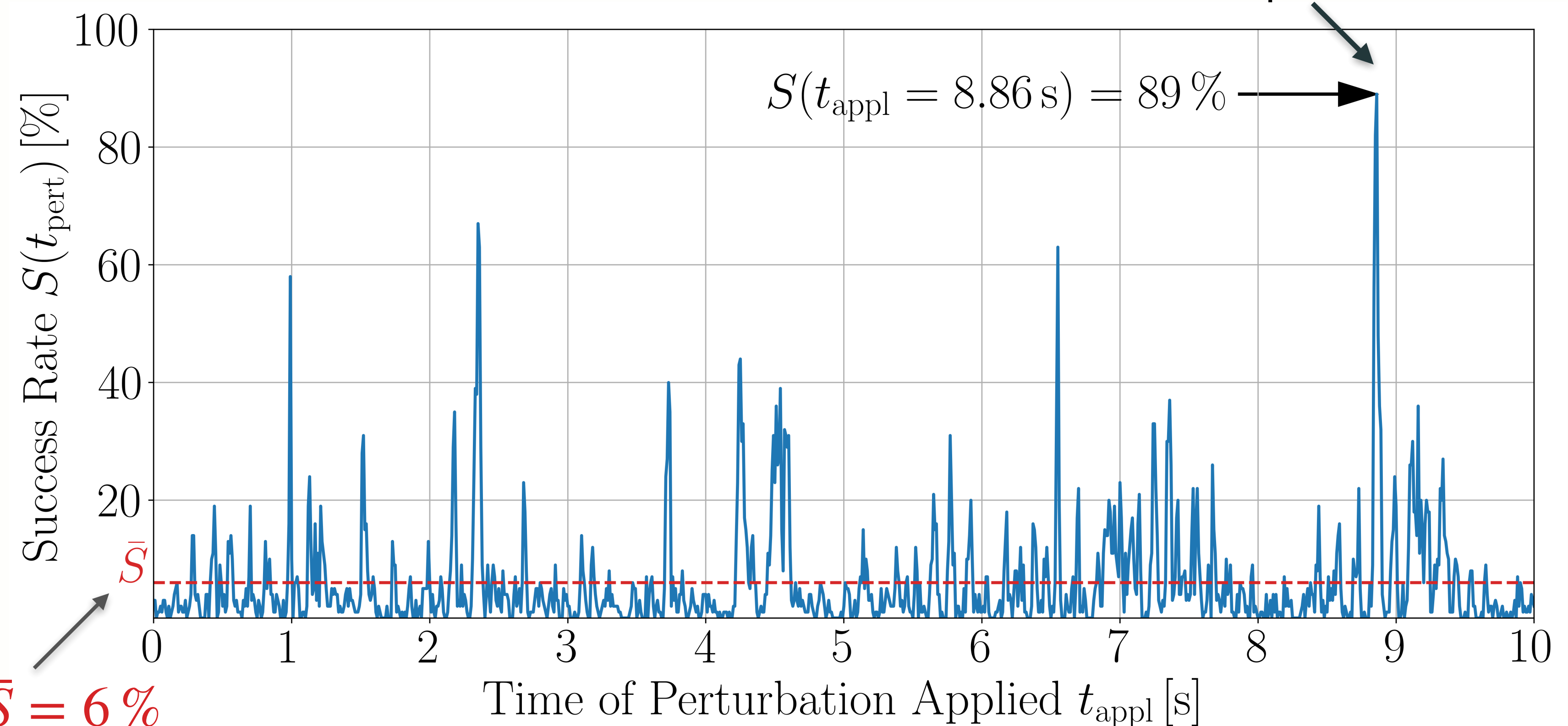
(i.e., time when pulse is applied)

average success rate of 100 different configurations of $N_{\text{pert}} = 500$ perturbations independently applied every 10 ms

perturbation was successful if there are no phase singularities left after 500ms

average success rate $\bar{S} = 6\%$

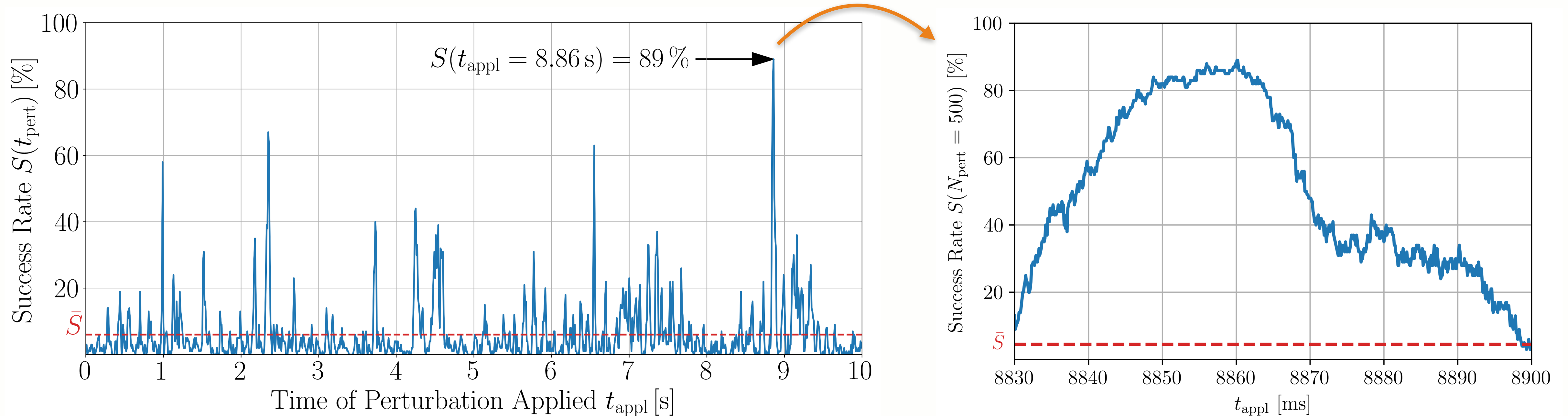
80% / 6% - 14.3 times higher probability



Terminating Cardiac Arrhythmias

Width of the peaks

$N_{\text{pert}} = 500$ perturbation sites (\sim virtual electrodes)



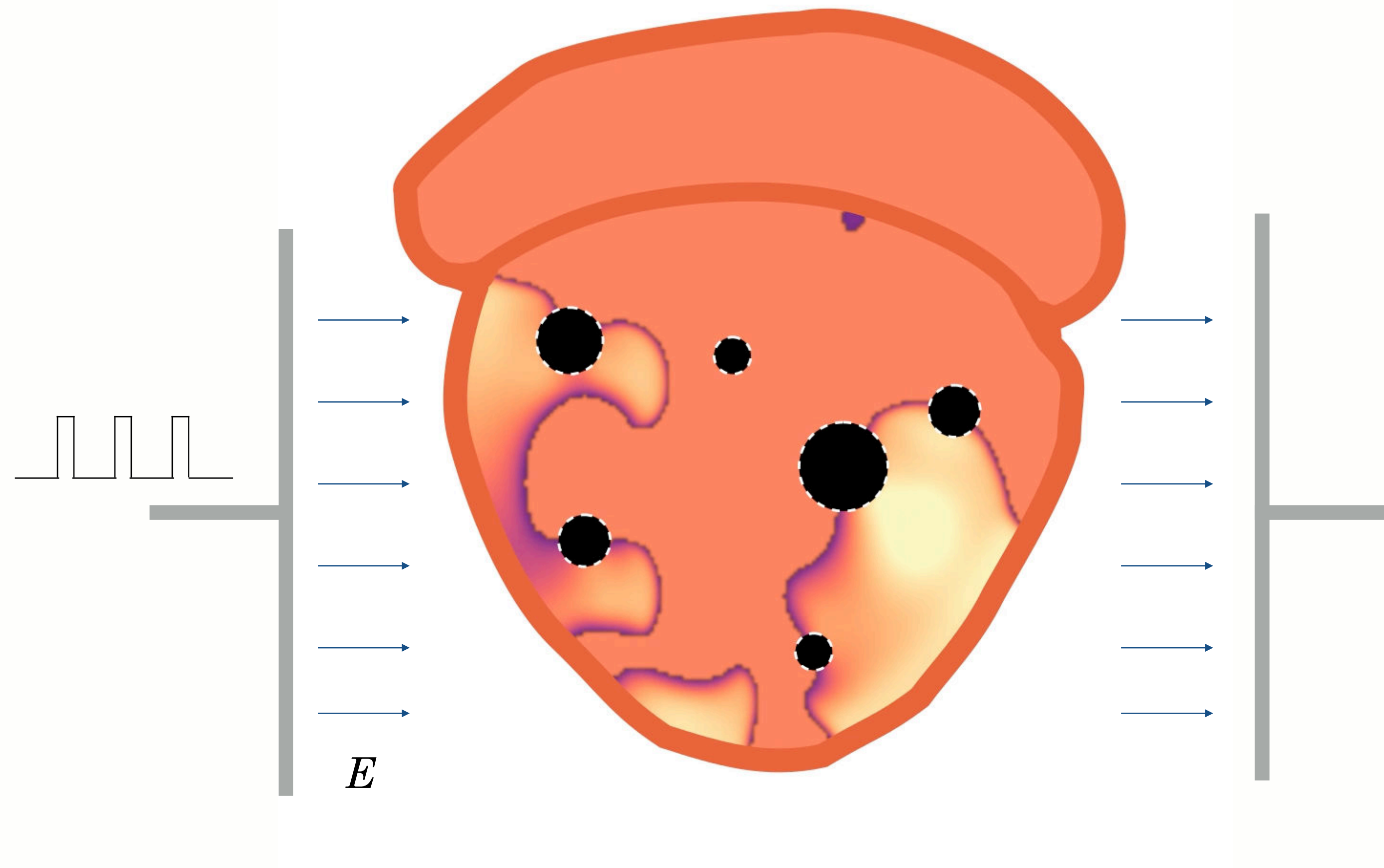
There are **short windows in time** where the termination of chaos (\sim fibrillation) is possible with **low N_{pert}** (\sim low energy).

Challenge: Detect these windows using information from observable time series, only!

Terminate with a **sequence of (weak) pulses**
instead of a single strong shock

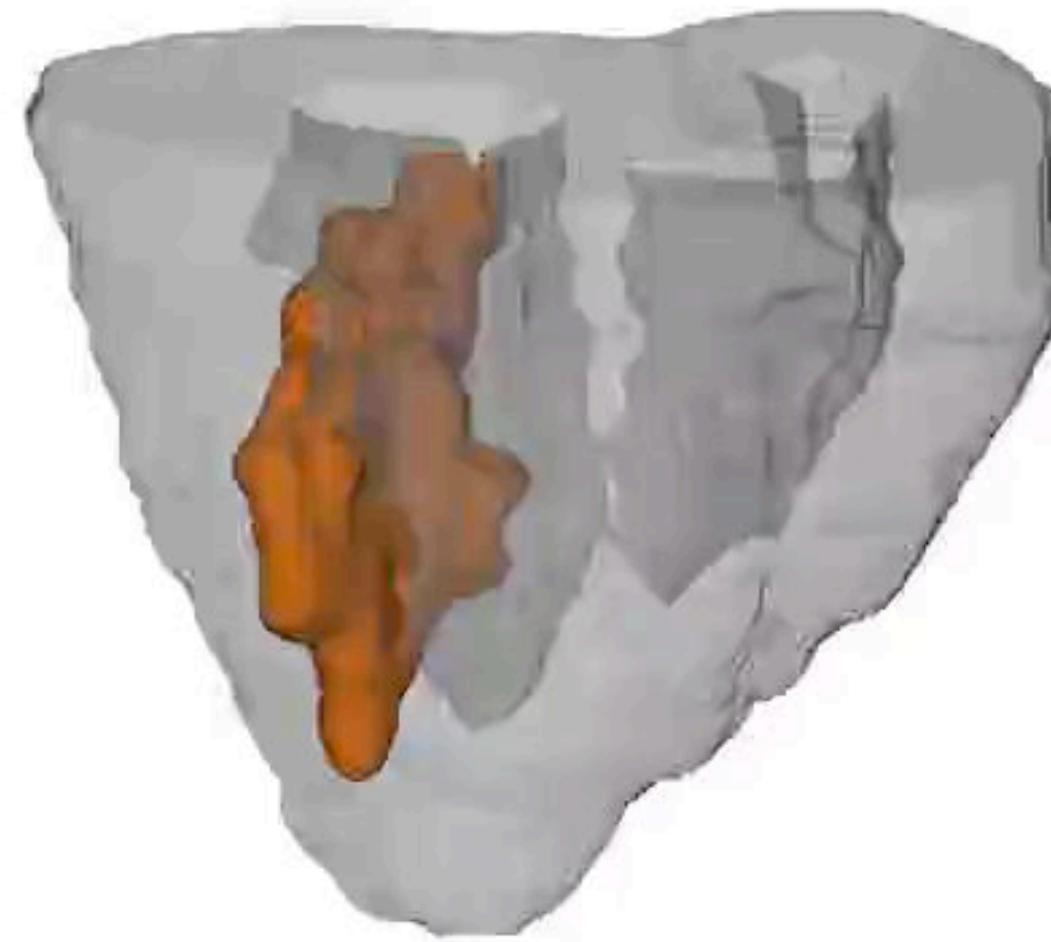
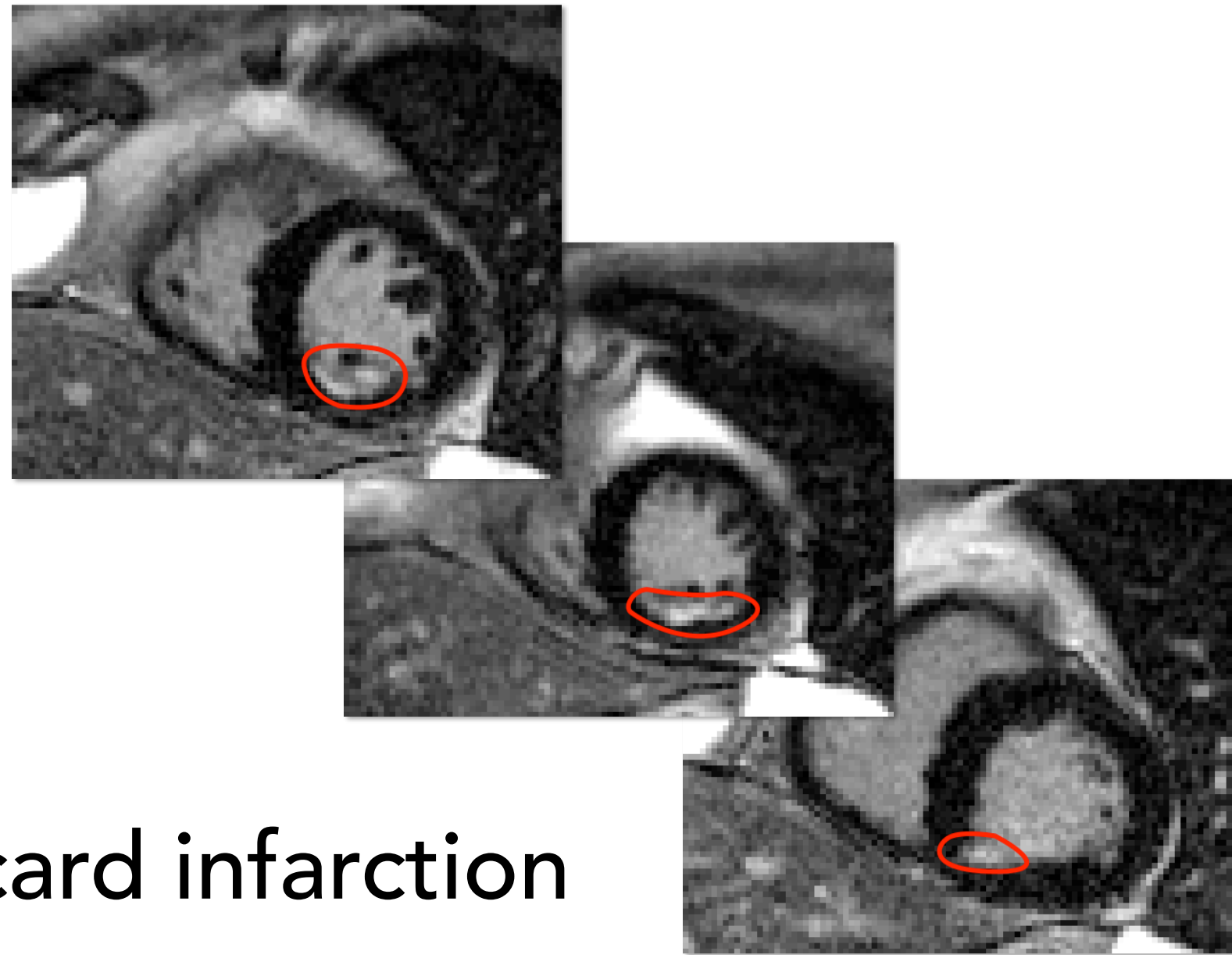
Terminating Cardiac Arrhythmias

Recruiting Networks of Virtual Electrodes for Terminating Cardiac Arrhythmias



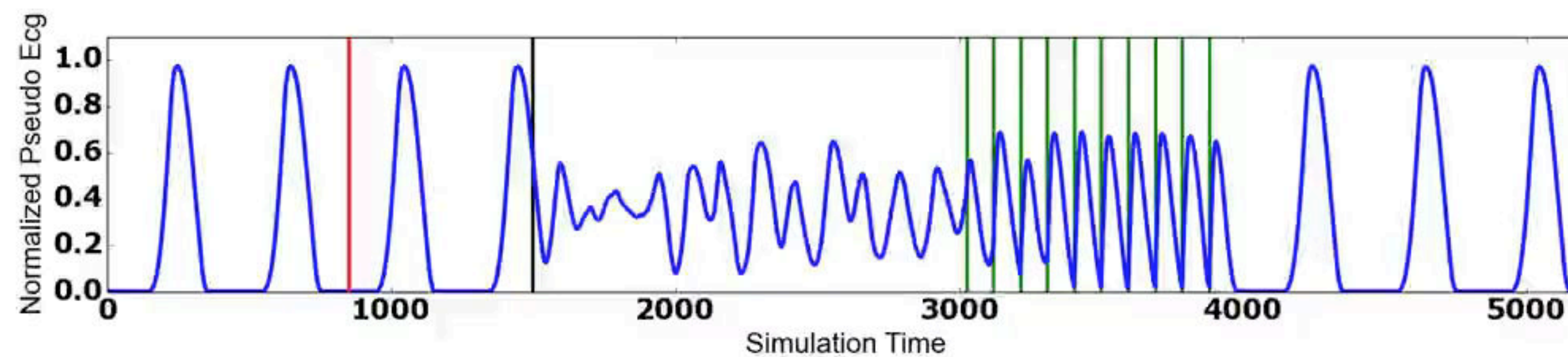
Animation: T. Lilienkamp

Simulation using a MRT-based heart model



myocard
myocard infarction

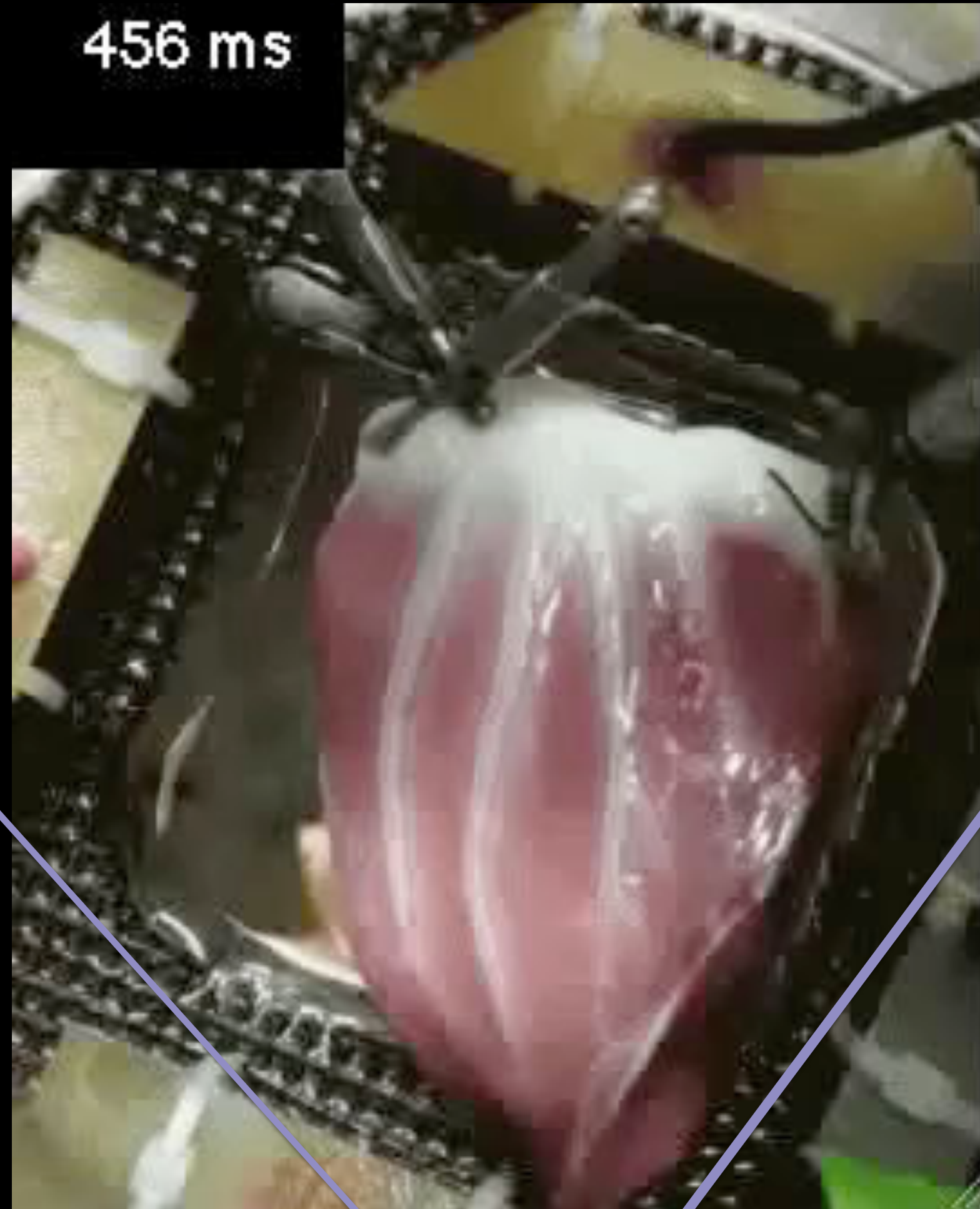
membrane potential
-80 mV 120



T. Lilienkamp

Low-Energy Anti-Fibrillation Pacing (LEAP)

456 ms



Pulse Generator
Power Amplifier

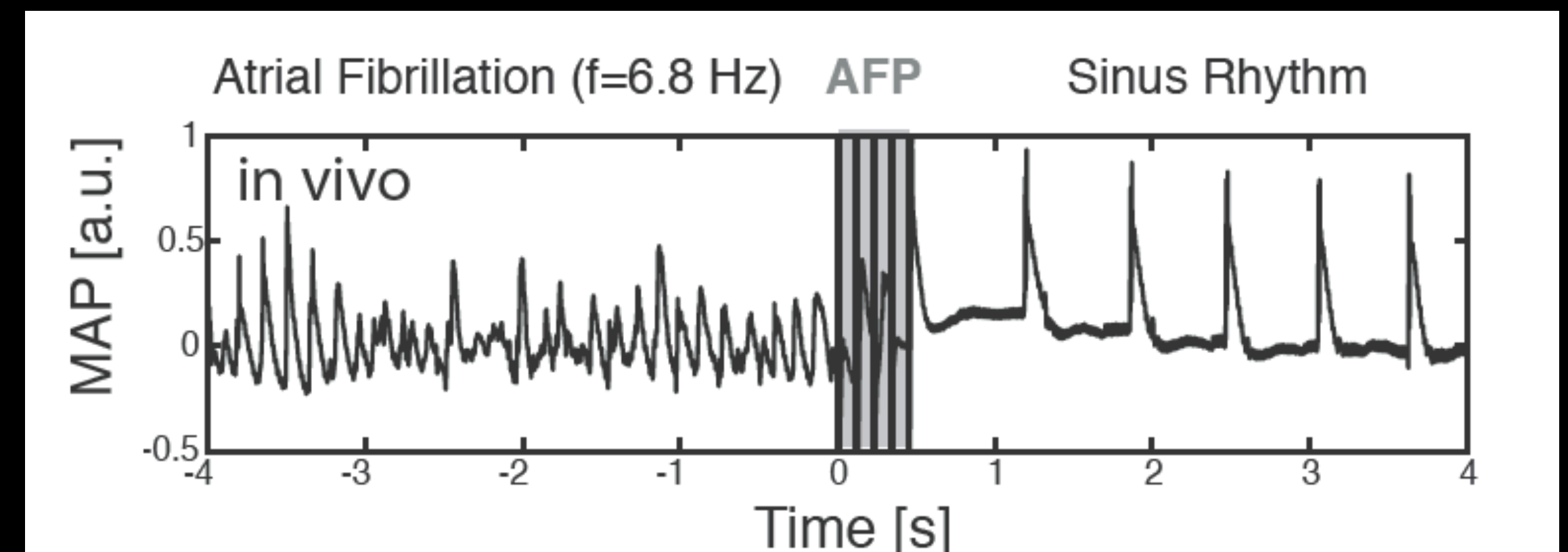
Membrane Potential



N = 5 low energy pulses

E = 1.4 V/cm

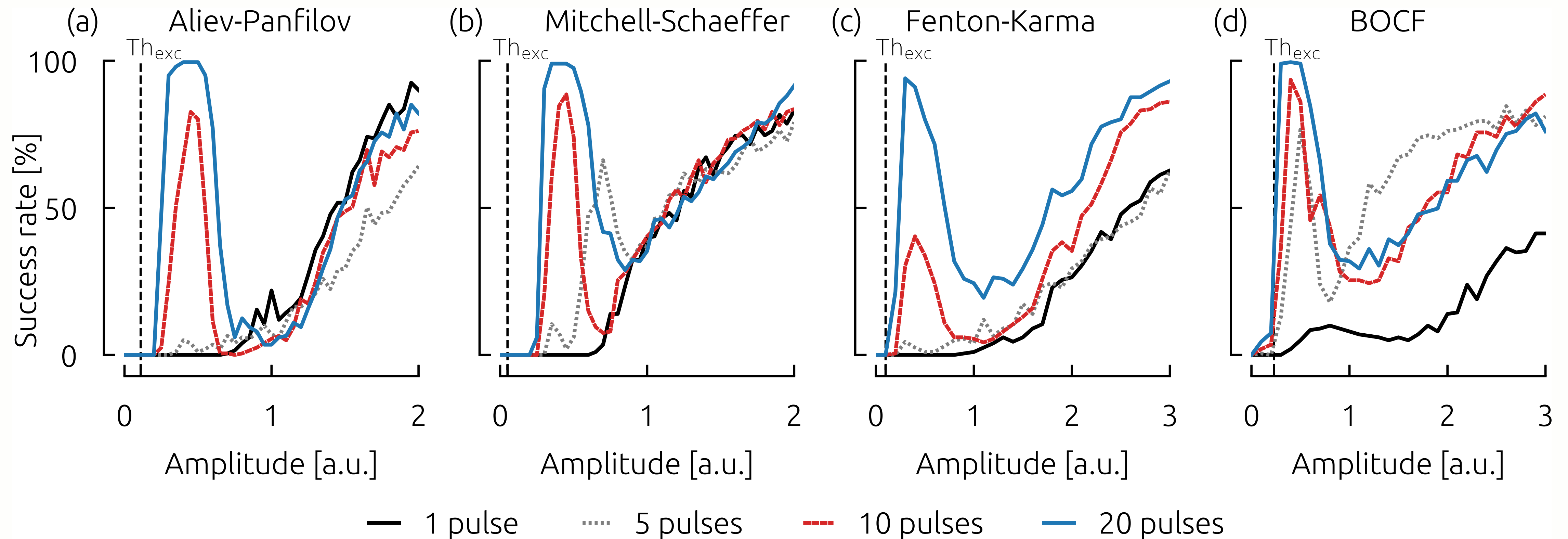
dt = 90 ms



S. Luther et al., Nature 475, 235 (2011)

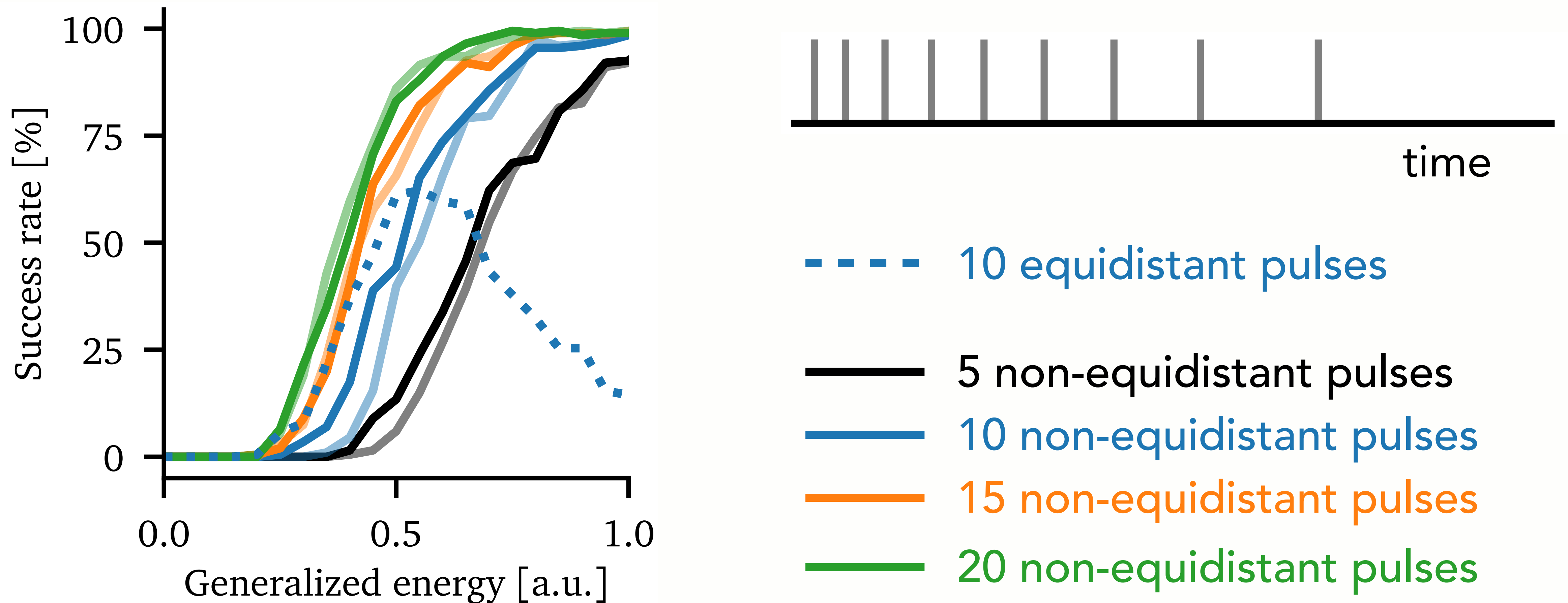
Terminating Cardiac Arrhythmias

Using sequences of pulses may result in **non-monotonous dose-response curves** and a peak of high termination probability at low pacing energy



T. Lilienkamp et al., Scientific Reports 12, 12043 (2022)

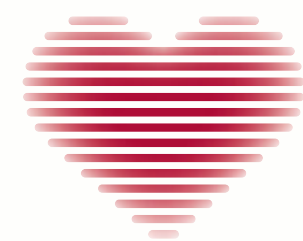
Use non-equidistant pulse sequences: Deceleration Control



- **data driven modelling** is a promising approach to **predict excitable cardiac dynamics** and to **reconstruct quantities** that are **difficult observe directly**
- complex cardiac dynamics can be governed by **transient chaos**
- simulation results indicate that **pulse timing** is crucial for efficient termination of arrhythmic activity
- (decelerated) **pulse sequences of low energy** may provide an alternative for defibrillation avoiding strong shocks with adverse side effects

Acknowledgement

Collaboration and support of Stefan Luther, Thomas Lilienkamp, Sebastian Herzog, Alexander Schlemmer, all members of the Research Group Biomedical Physics at the Max Planck Institute for Dynamics and Self-Organization, Göttingen, our clinical partners at the University Medical Center Göttingen (UMG), and many other colleagues and friends is gratefully acknowledged.



DZHK
DEUTSCHES ZENTRUM FÜR
HERZ-KREISLAUF-FORSCHUNG E.V.



Thank you!