

# Computational model of defibrillation: Importance of fibrotic content in modifying the virtual electrode strengths

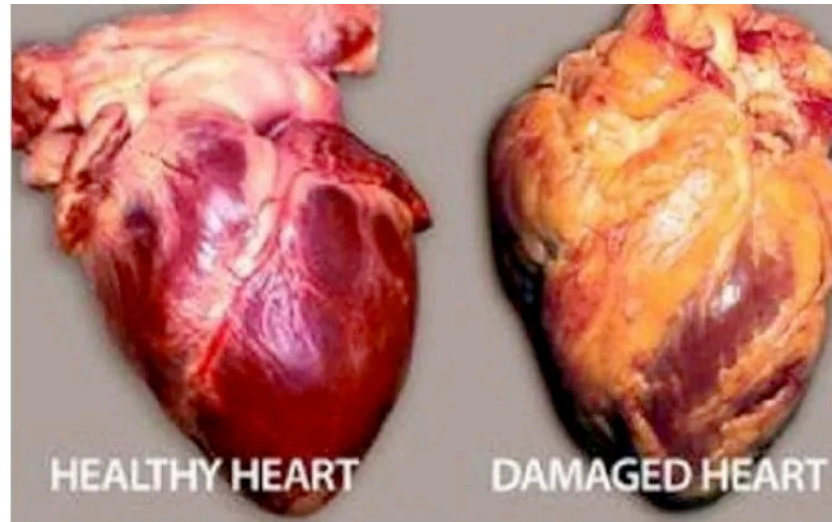
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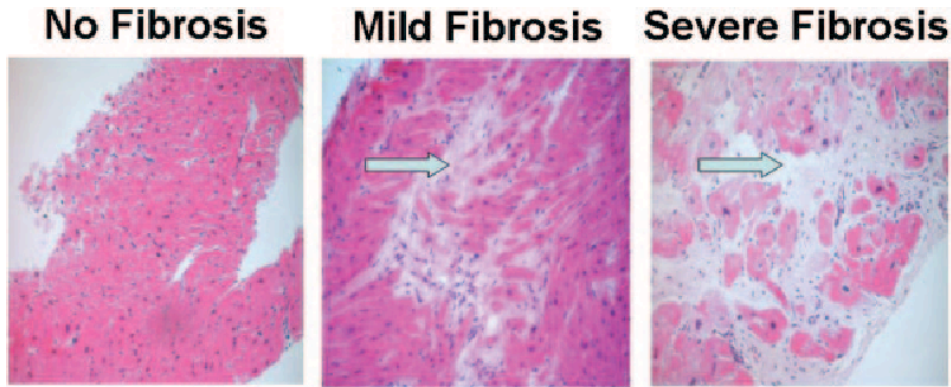
Nora Eccles Harrison Cardiovascular Research and Training Institute,  
& Biomedical Engineering Department,  
University of Utah, Salt Lake City, UT, USA

Are defibrillators working better on a damaged heart ?



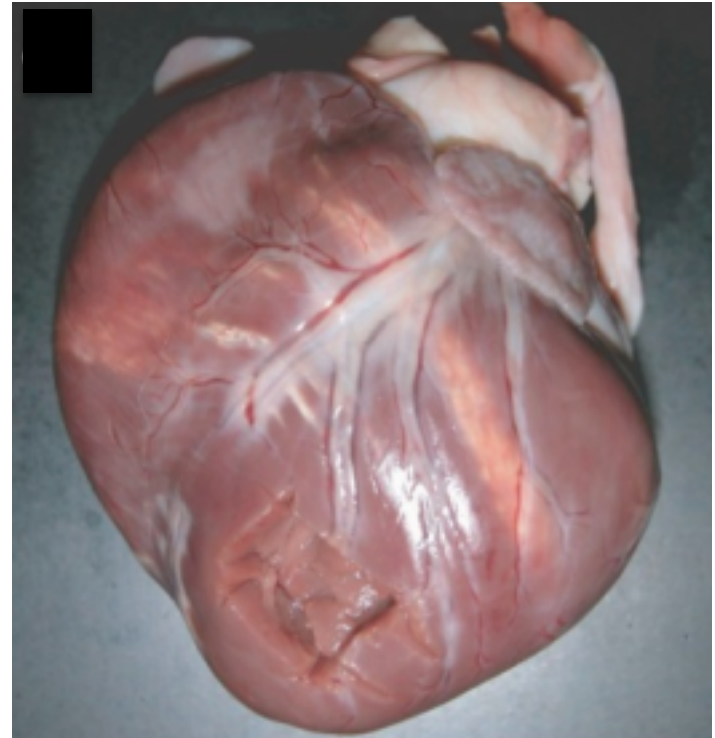
If yes, quantify to which extend ?

Is the defibrillatory shock more efficient in presence of fibrotic tissue ?



Cardiac fibrosis refers to proliferation of cardiac fibroblasts.  
The cardiac muscle is stiffer and it is seen in the progression to heart failures.

Fibrotic (canine) heart





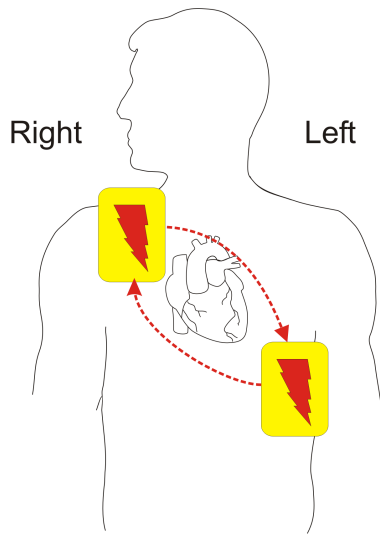
Fibrotic sheep hearts (CVRTI, courtesy of Chao Huang)

# Outline of the talk

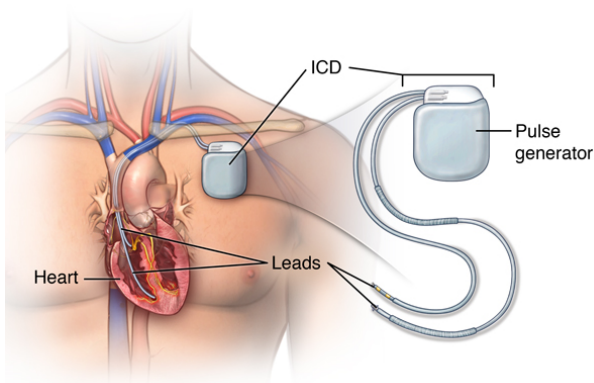
- Introduction & motivations
- The mathematical model and the geometrical set-up  
(1D and 2D)
- Results from the simulations
- Discussions
- Conclusions & outlook

# Cardiac defibrillation to restore the correct function

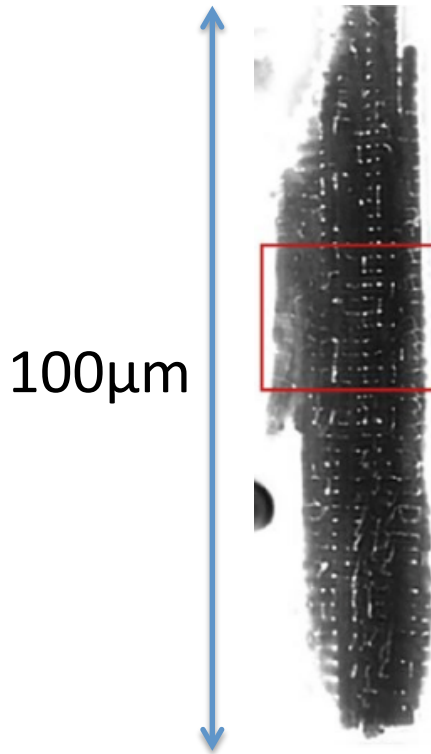
A controlled electric shock is applied to the heart in order to terminate the unstable or pulseless rhythm.



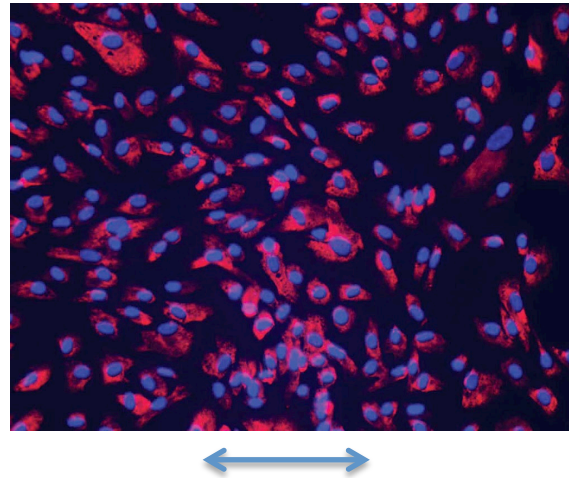
External shock ~ 150 Joules  
Internal shock ~ 25 Joules



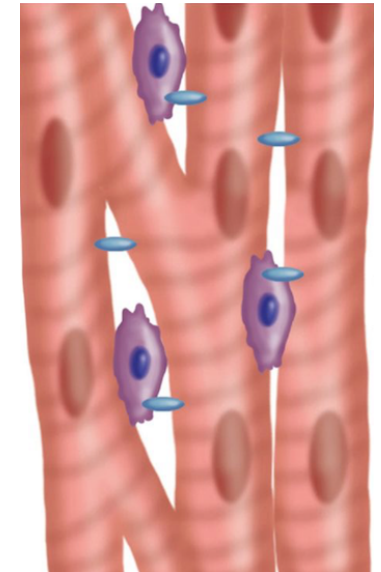
# The cardiac tissue model will contain 3 “species”



Rabbit ventricular myocytes

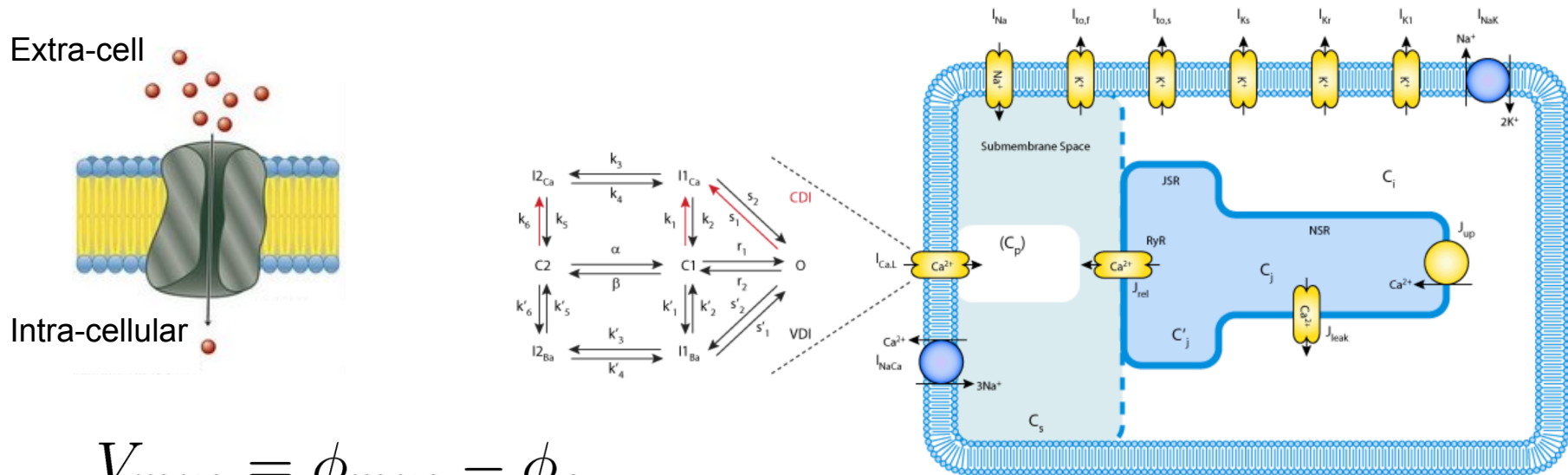


Ventricular cardiac fibroblasts

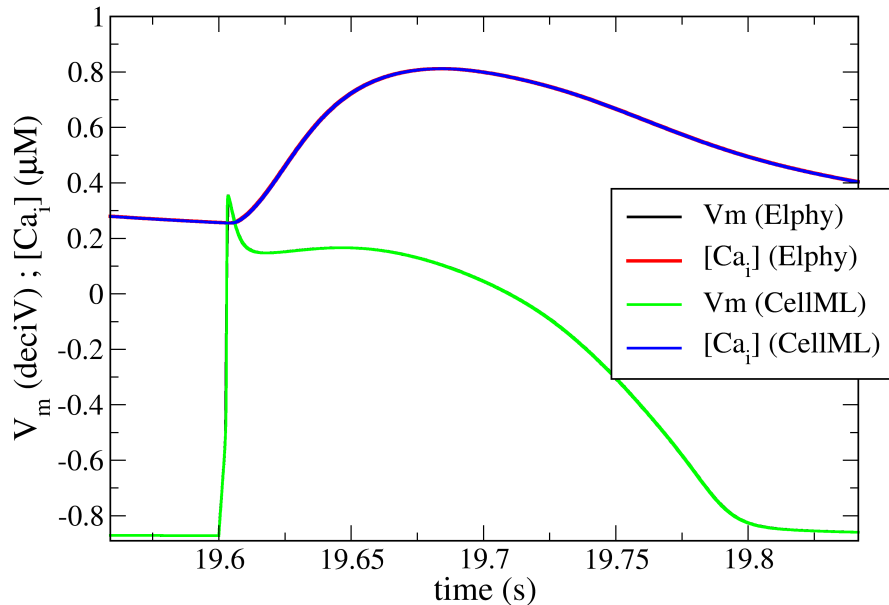


Extra-Cellular Matrix  
(Blood, capillaries, proteins,...)

# We use the Mahajan *et al.* rabbit model to describe the cell membrane for the cardiomyocytes



$$V_{myo} = \phi_{myo} - \phi_e$$



The Mahajan model was developed to model the rabbit myocyte at high pacing.

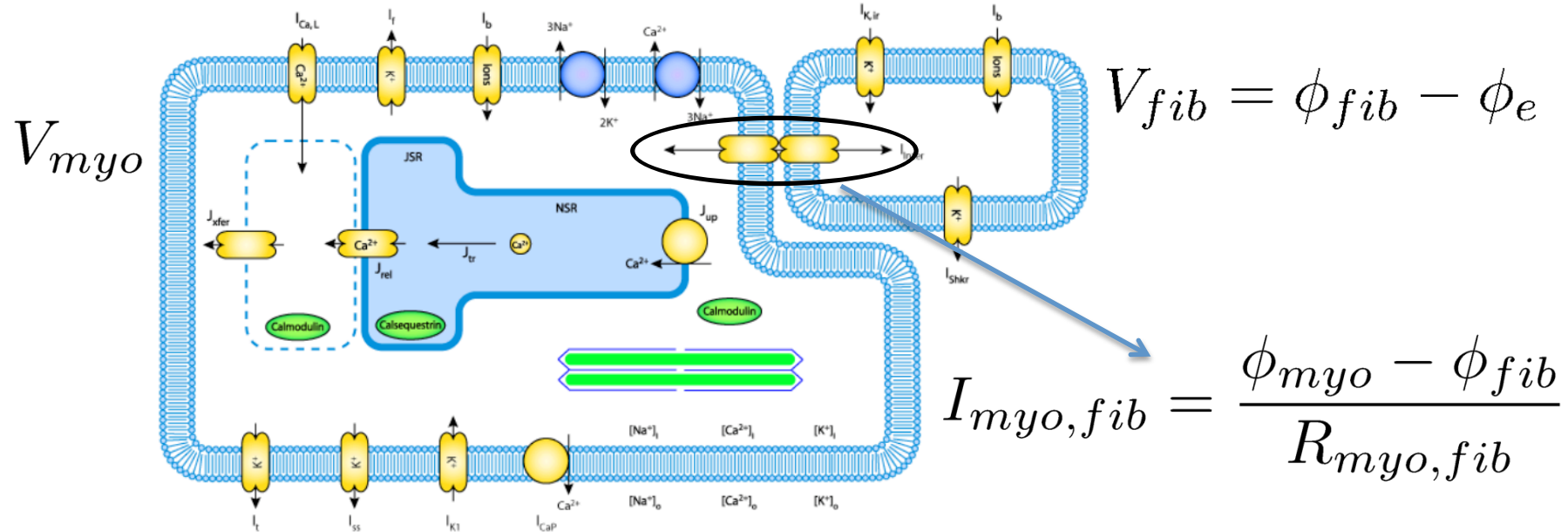
26 State Variables  
 $(V_{myo}) + 16$  gate Variables ( $m, h, j, \dots$ );  
 8 concentration Variables.

Mahajan et al. ,  
 2008 *Biophysical Journal*, 94(2):392-410  
[PubMed ID: 18160660](https://pubmed.ncbi.nlm.nih.gov/18160660/)



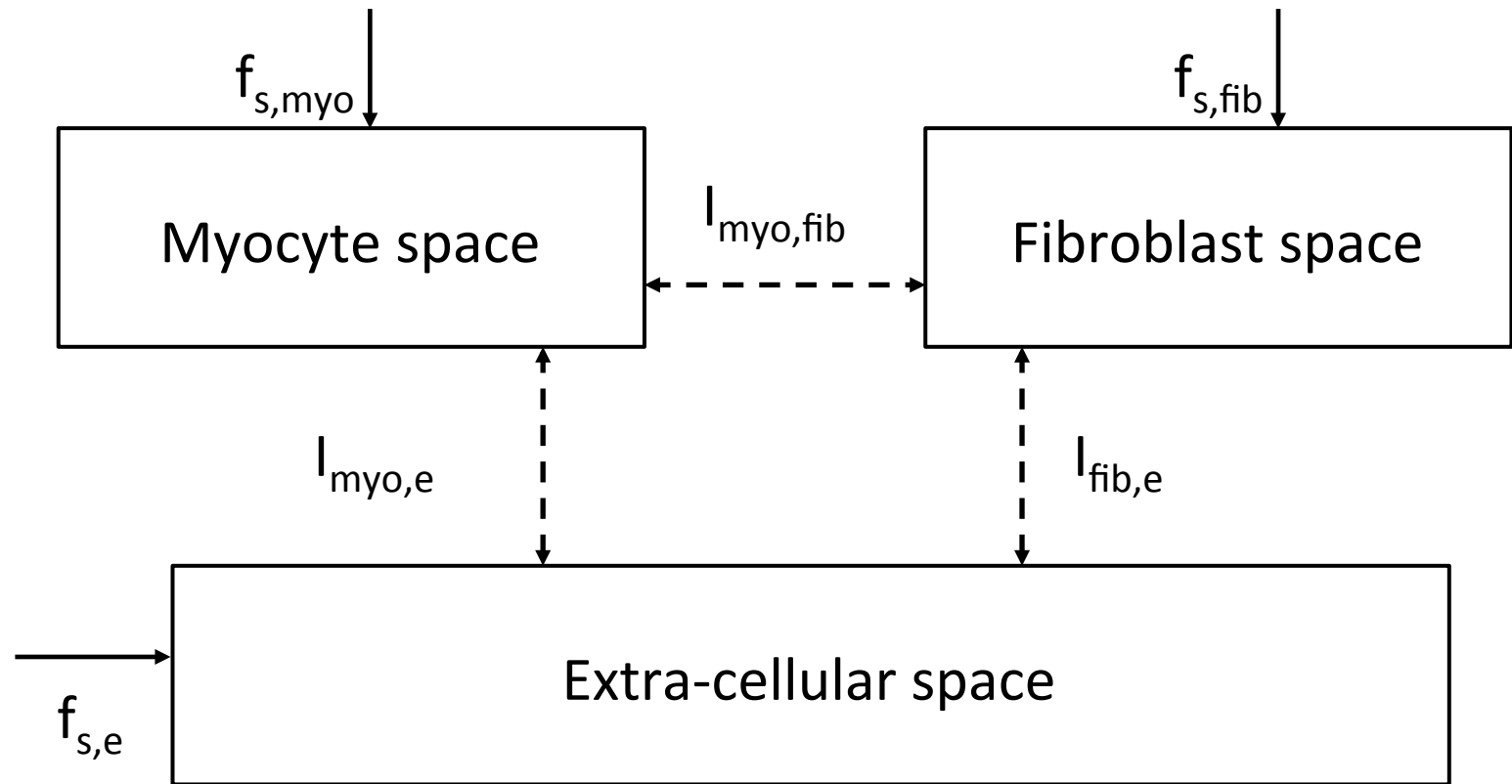
# We use the Sachse *et al.* model to describe the cell membrane for the cardio-fibroblast

NB: The fibroblasts are not excitable cells unlike the cardio-myocytes



The electric coupling term between the myocytes and the fibroblasts is a crucial parameter of our study.  
 $R_{myo,fib}$  is not easily determined experimentally !

We use the extended bidomain model to implement the spatial coupling between the model constituents

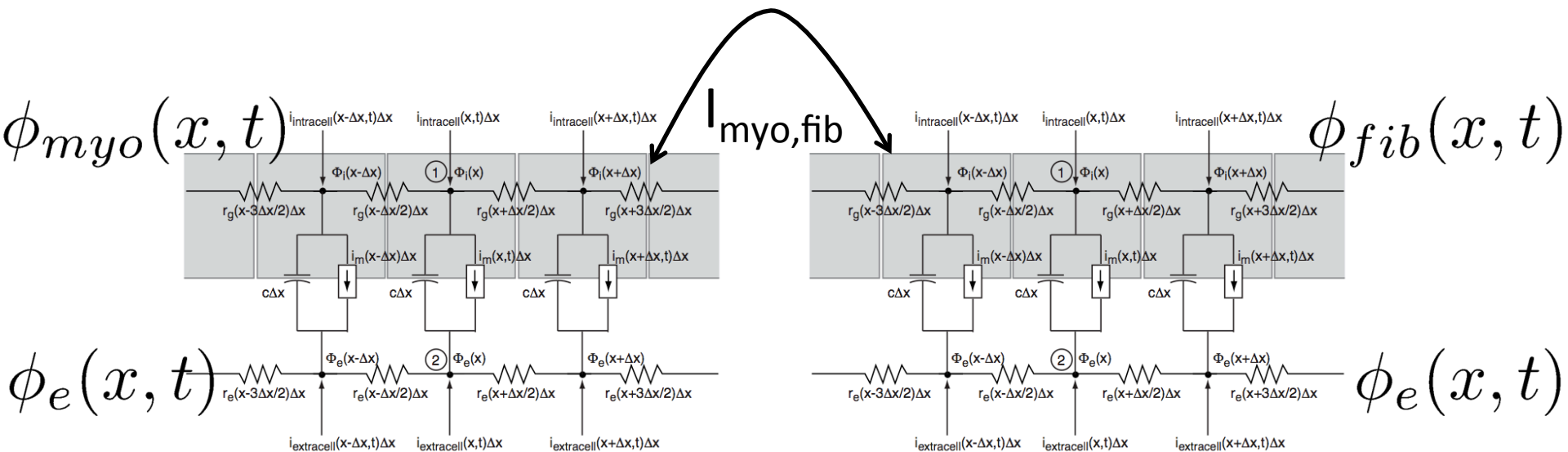


# Extended Bidomain model at the tissue level

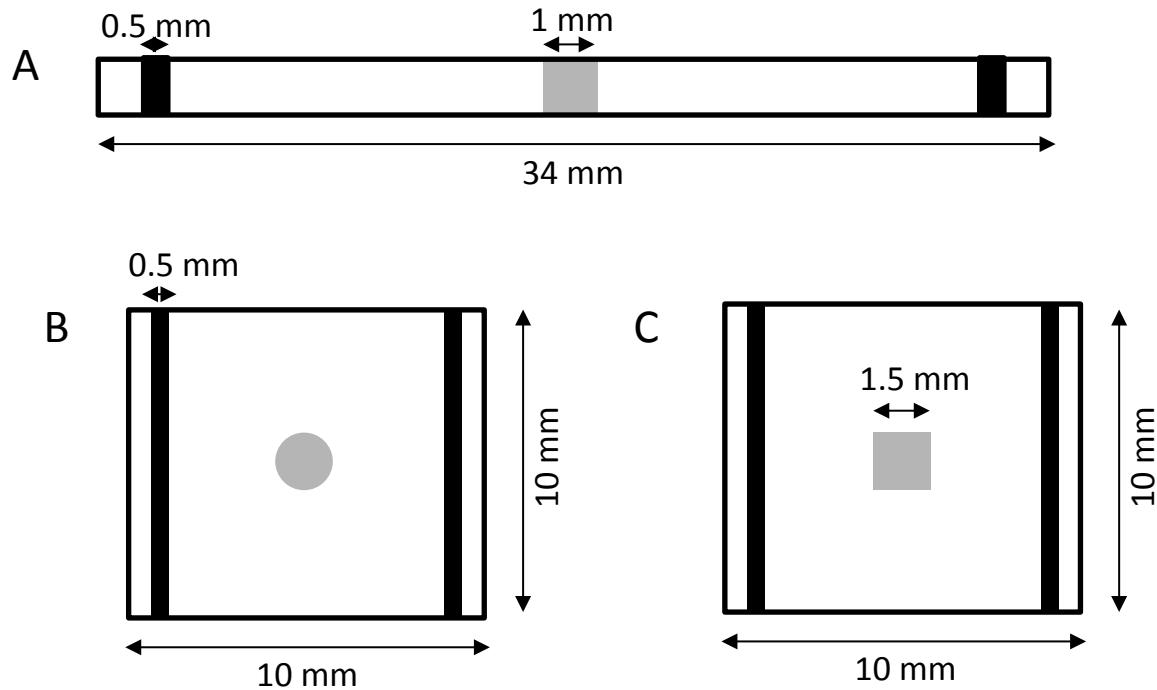
Based on current conservation (Kirchhoff's laws)

we can write 3 Poisson equations (1 for each domain)

$$\left\{ \begin{array}{l} \nabla \cdot (\sigma_{myo} \nabla \phi_{myo}) = -f_{s,myo} + \beta_{myo,fib} I_{myo,fib} + \beta_{myo} I_{myo,e} \\ \nabla \cdot (\sigma_{fib} \nabla \phi_{fib}) = -f_{s,fib} - \beta_{myo,fib} I_{myo,fib} + \beta_{fib} I_{fib,e} \\ \nabla \cdot (\sigma_e \nabla \phi_e) = -f_{s,e} - \beta_{myo} I_{myo,e} - \beta_{fib} I_{fib,e} \end{array} \right.$$



# The geometrical set-ups



We will study 1D and 2D fibrotic patches immersed in a normal “control” tissue. The characteristic of the fibrotic patch are determined by the volume fractions of the 3 species.

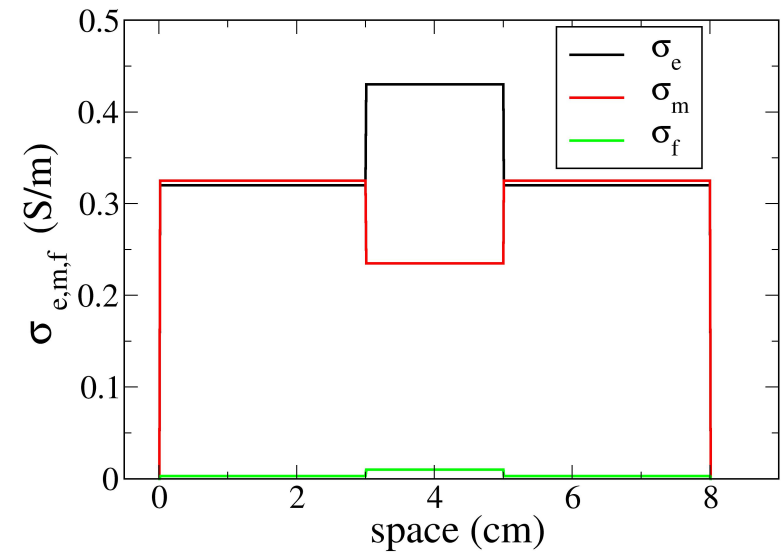
The conductivities are assumed to vary linearly with the volume fractions.

$$\sigma_{fib} = Vol_{fib} \bar{\sigma}_{fib}$$

# The 3 sets of parameter values

Volume fractions used here

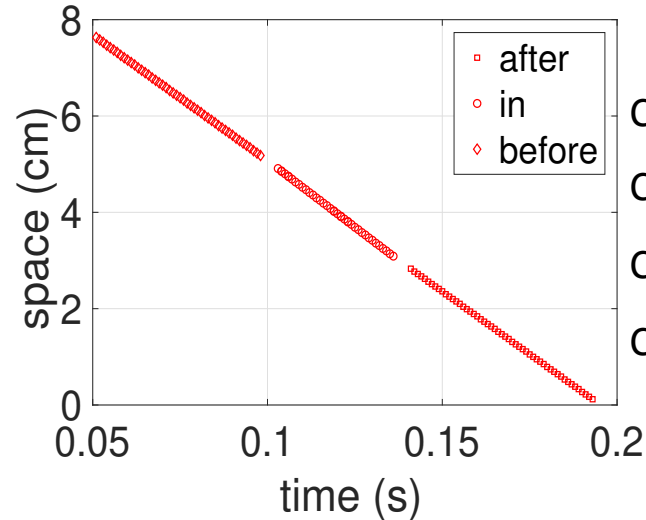
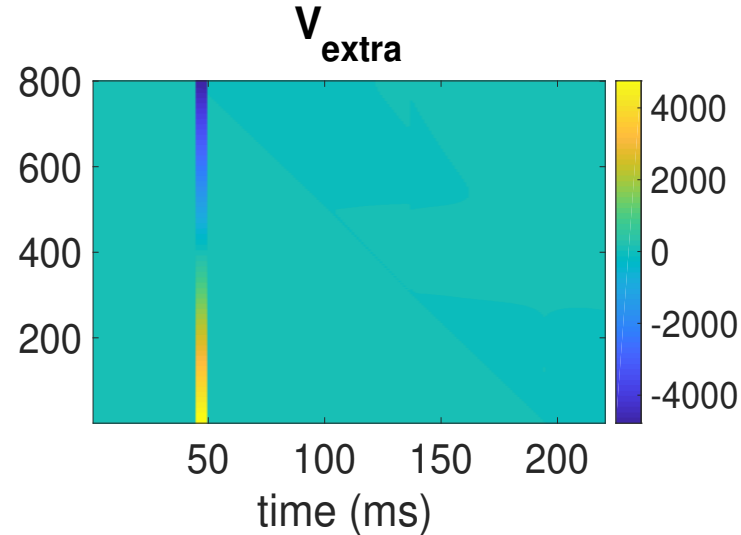
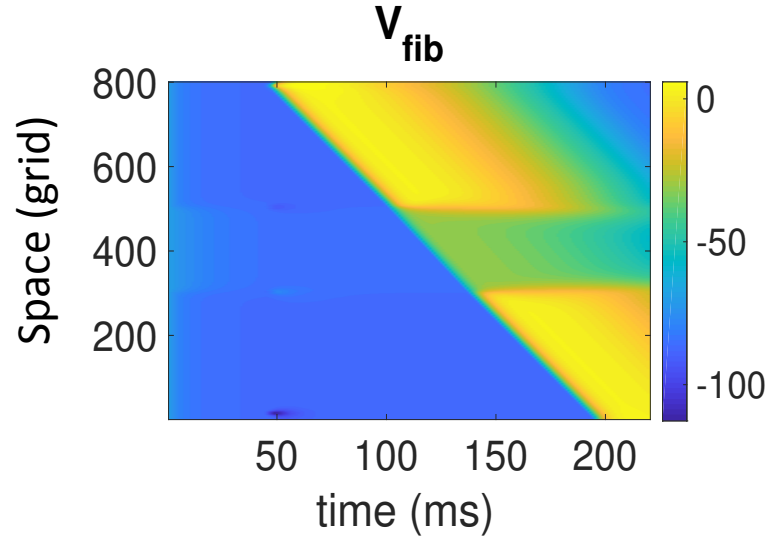
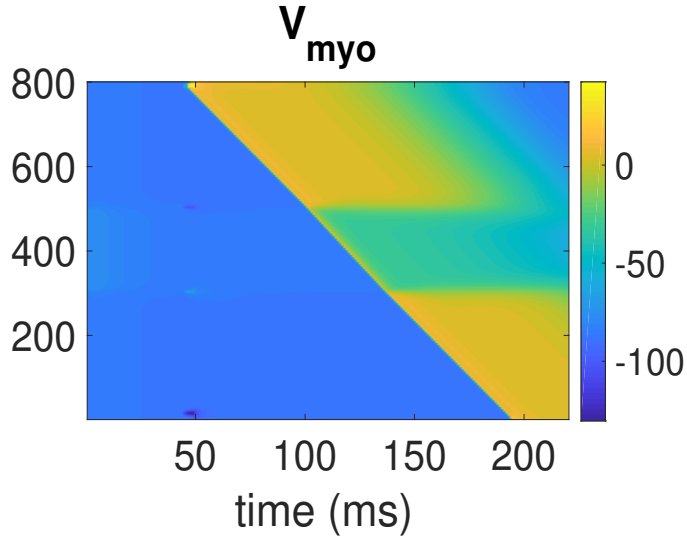
Domain	Control	Patch (mild)	Patch (severe)
Extra.	0.32	0.43	0.60
Myo.	0.65	0.47	0.20
Fib.	0.03	0.10	0.20



	Myocyte	Fibroblast	Extra-cellular
Conductivity (S/m)	0.5	0.1	1
Beta (cm) <sup>(-1)</sup>	2500	16800	-

$V_{\text{fib}} = 0.268 \text{ pL}$   
 $R_{\text{myo-fib}}$  varied ( $\text{M}\Omega$ — $\text{T}\Omega$ )  
 $\text{Stim}_{\text{duration}} = 5 \text{ ms}$   
 $E_{\text{applied}} = 0.546 \text{ (V/cm)}$   
 $\delta x = 0.01 \text{ cm}$   
 $\delta t = 0.001 \text{ ms}$   
 $C_m = 1 \text{ }\mu\text{F/cm}^2$   
 $\text{Elect}_{\text{width}} = 0.5 \text{ mm}$

# A benchmark simulation (mild fibrotic patch)



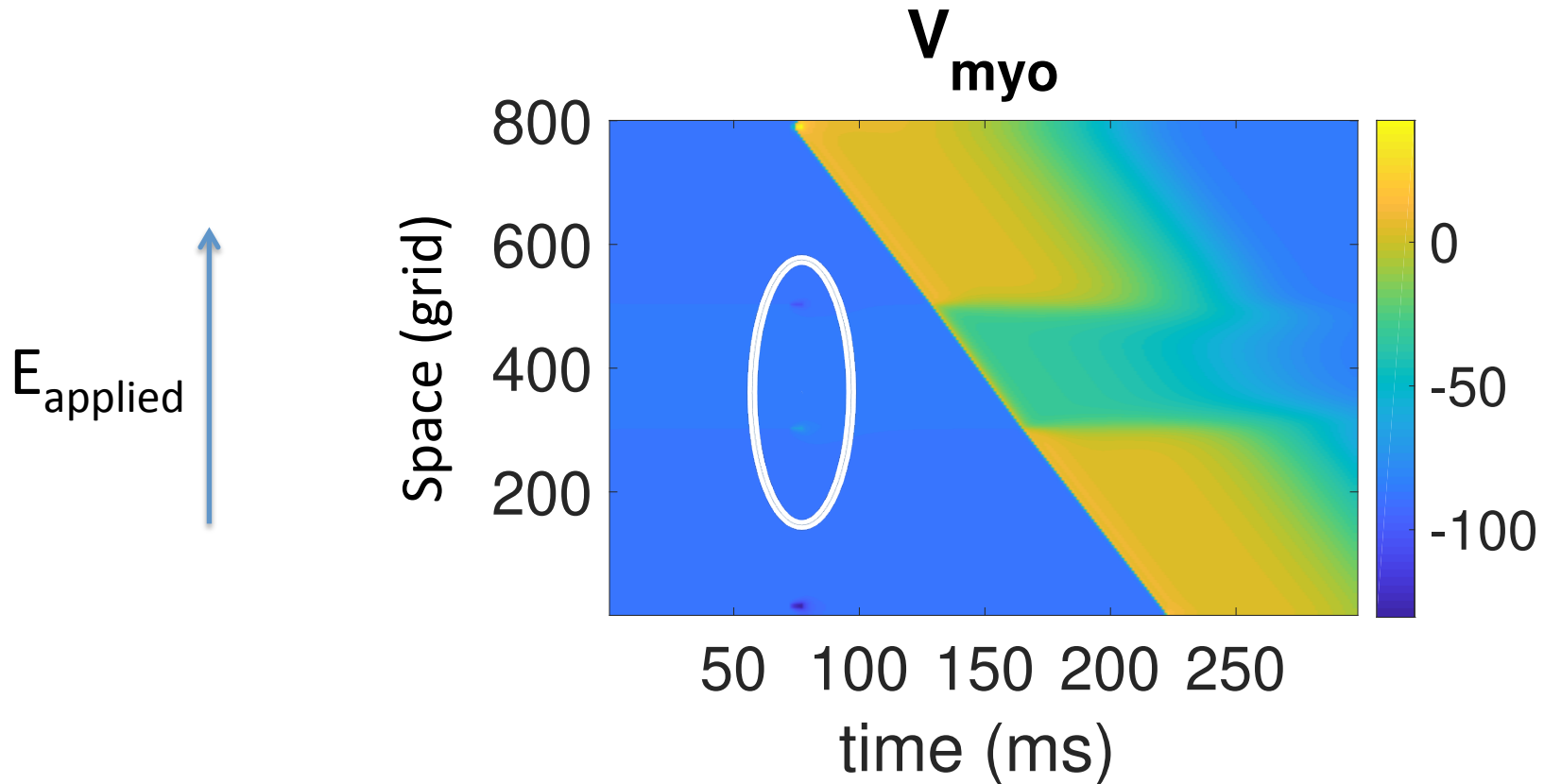
$C_{\text{myo}}$  (bef.) = 52.14 (cm/s)

$C_{\text{myo}}$  (in) = 55.26 (cm/s)

$C_{\text{myo}}$  (after) = 52.07 (cm/s)

$\text{CPU}_{\text{time}} = 92$  s (single proc.)

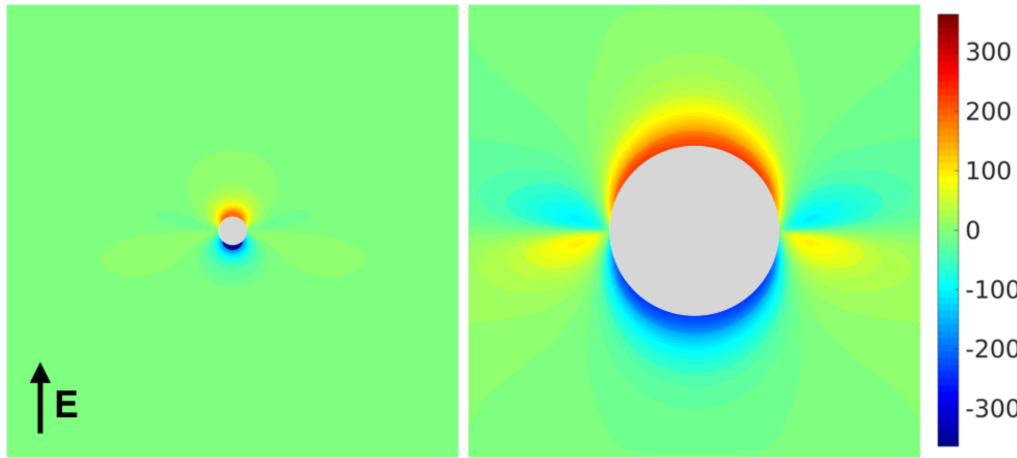
2 virtual electrodes (VE) are created at the patch boundaries during the shock stimulus



$$\frac{\partial V_{myo}}{\partial t} \propto -(\nabla \sigma_{myo}) \cdot E + \sigma_{myo} \nabla^2 \phi_e$$

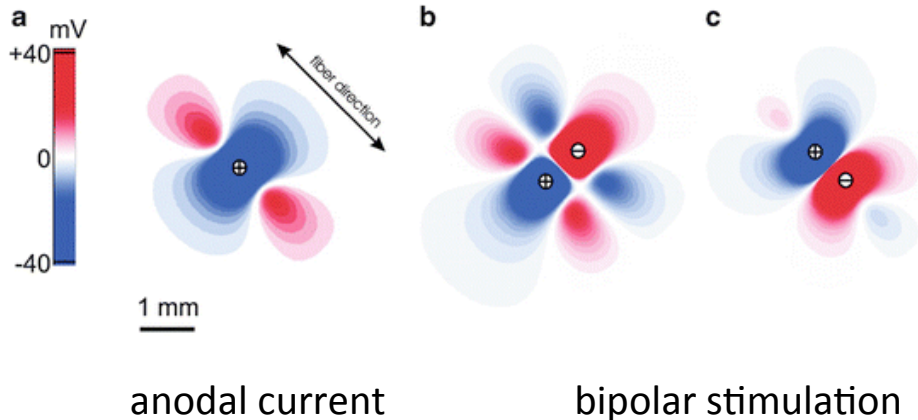
These VE are susceptible to elicit new action potentials during a defibrillatory shock

# Virtual electrodes (VE) are important actors in defibrillation



## Reference 1

“Virtual electrodes around anatomical structures and their roles in defibrillation”  
Plos One 2017,  
Adam Connolly , Edward Vigmond, Martin Bishop

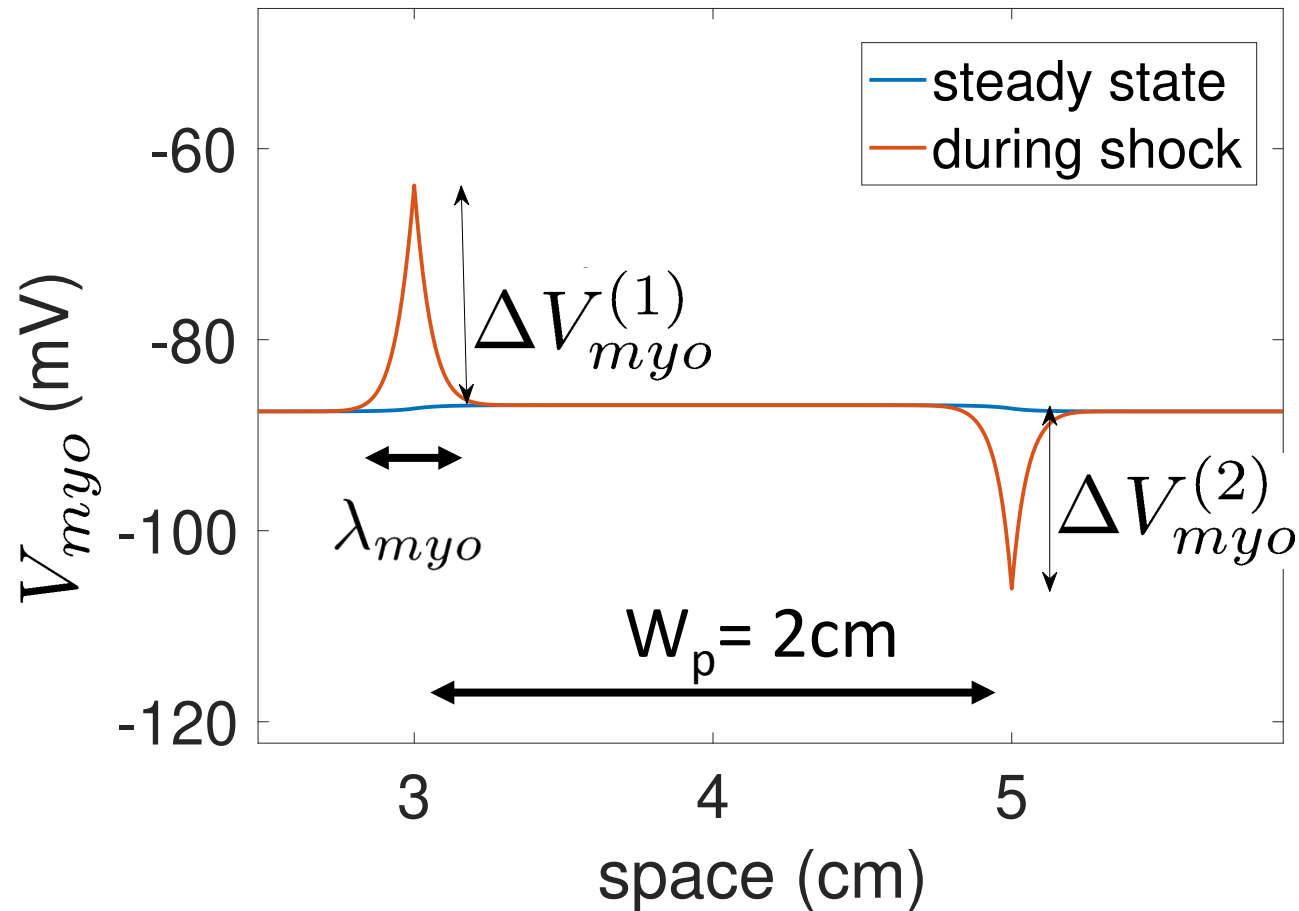


## Reference 2

Imaging of Ventricular Fibrillation and Defibrillation:  
The Virtual Electrode Hypothesis  
Advances in Experimental Medicine and Biology,  
Boukens B.J., Gutbrod S.R., Efimov I.R. (2015)



We quantify the virtual electrode strengths at the fibrotic patch boundaries



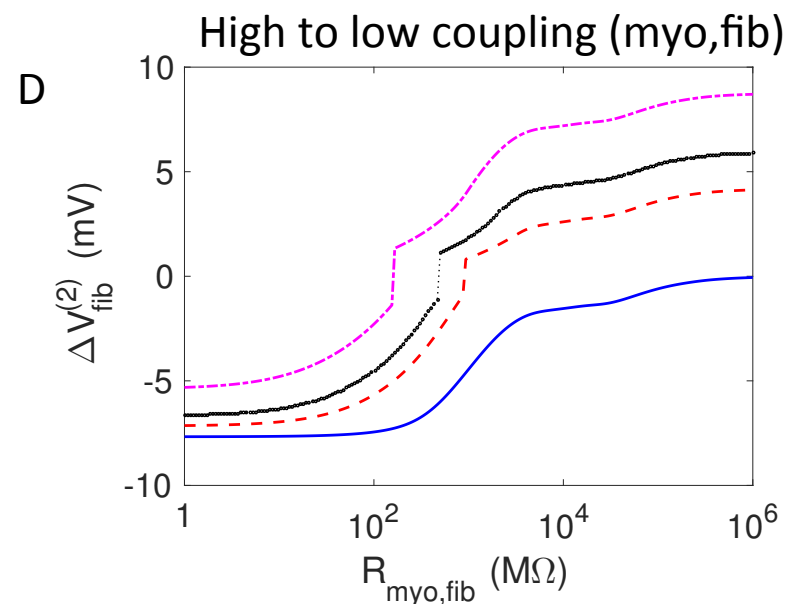
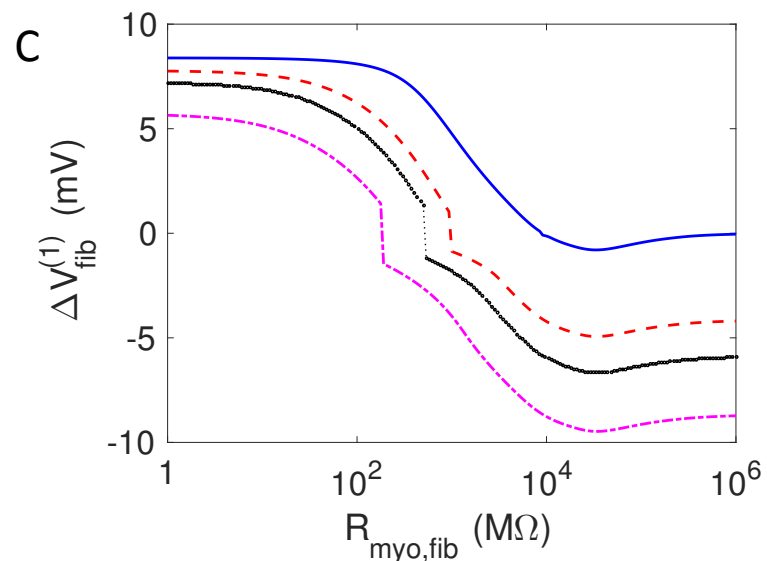
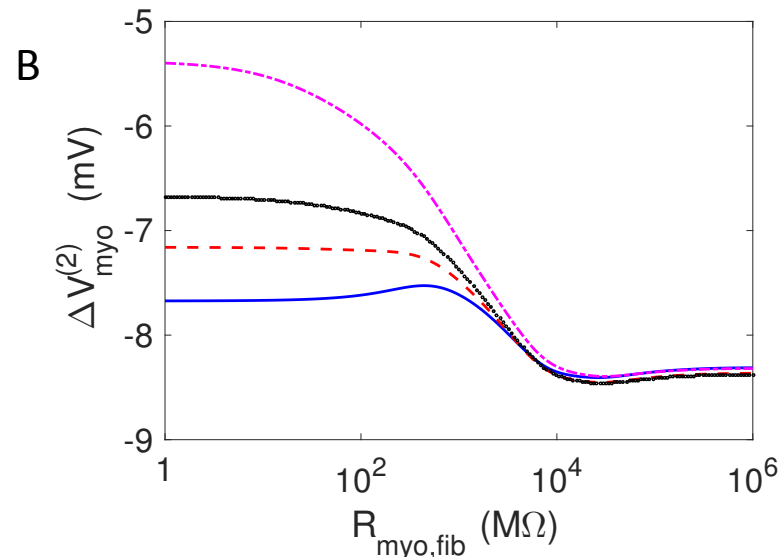
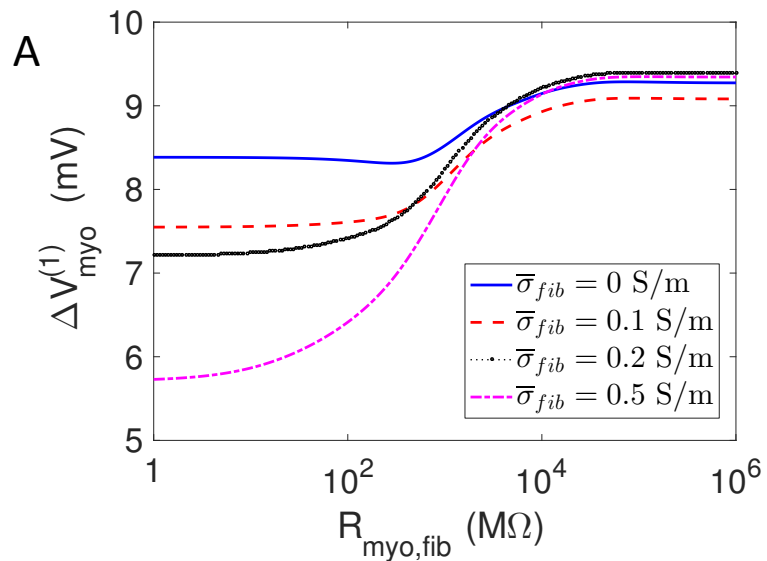
$\lambda_{myo}$  is the electrotonic constant for the myocytes ( $\approx 0.6$  mm)

# Results for the virtual electrode strengths

Protocol:

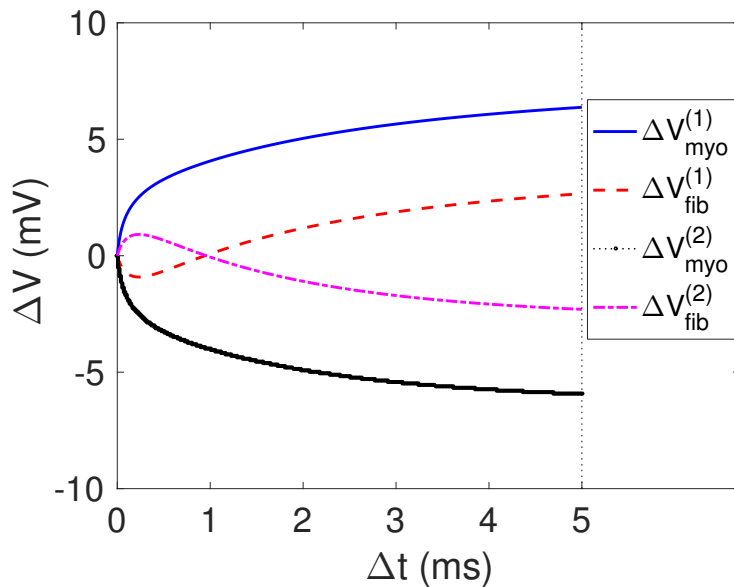
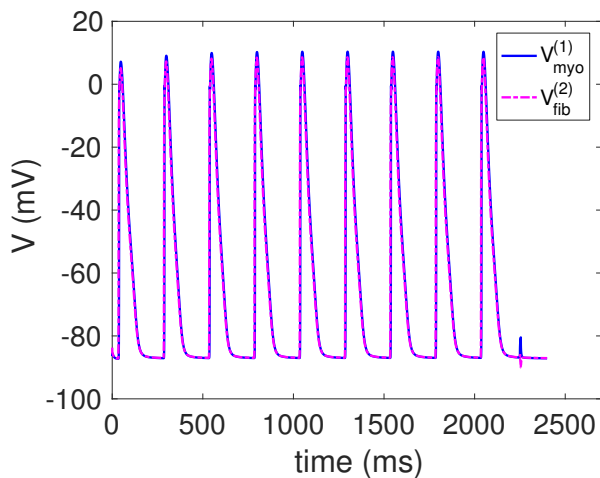
Transient of 9 waves followed by a sub-threshold excitation with current of  $0.7e+5$  (A/m<sup>3</sup>) where we measure VE strengths

# Average fibrotic patch results

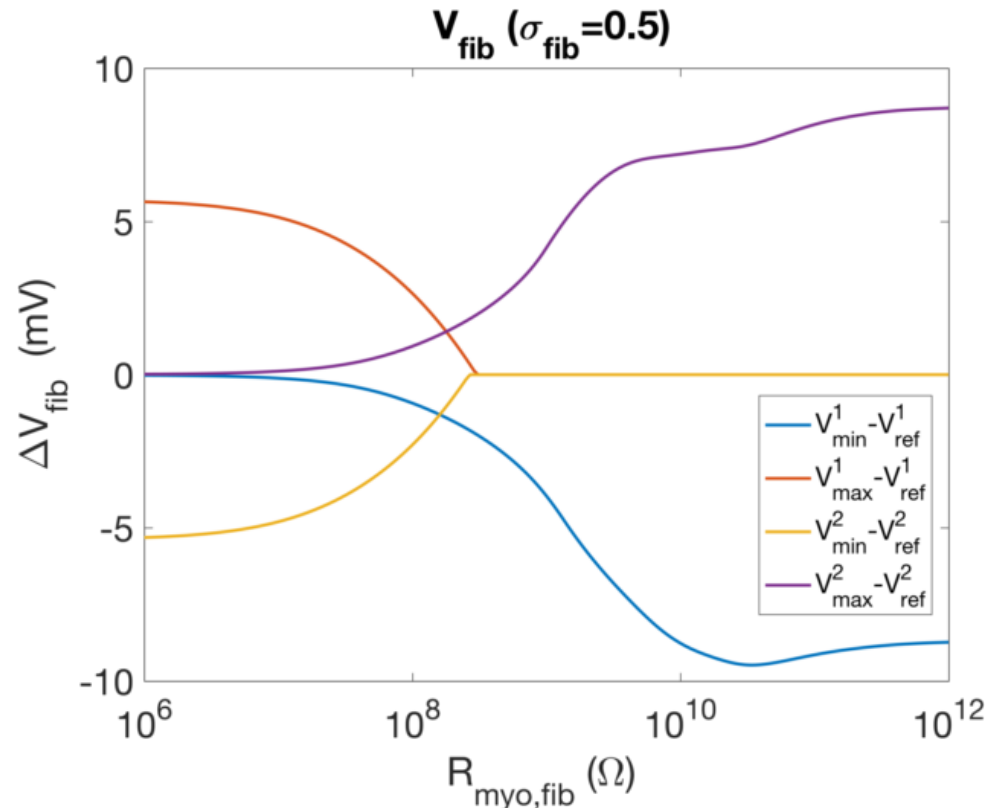


Increased electrical coupling of myocytes with fibroblasts reduced the virtual electrode strength.

# Non-monotonous behavior for $V_{\text{fib}}$ during the shock

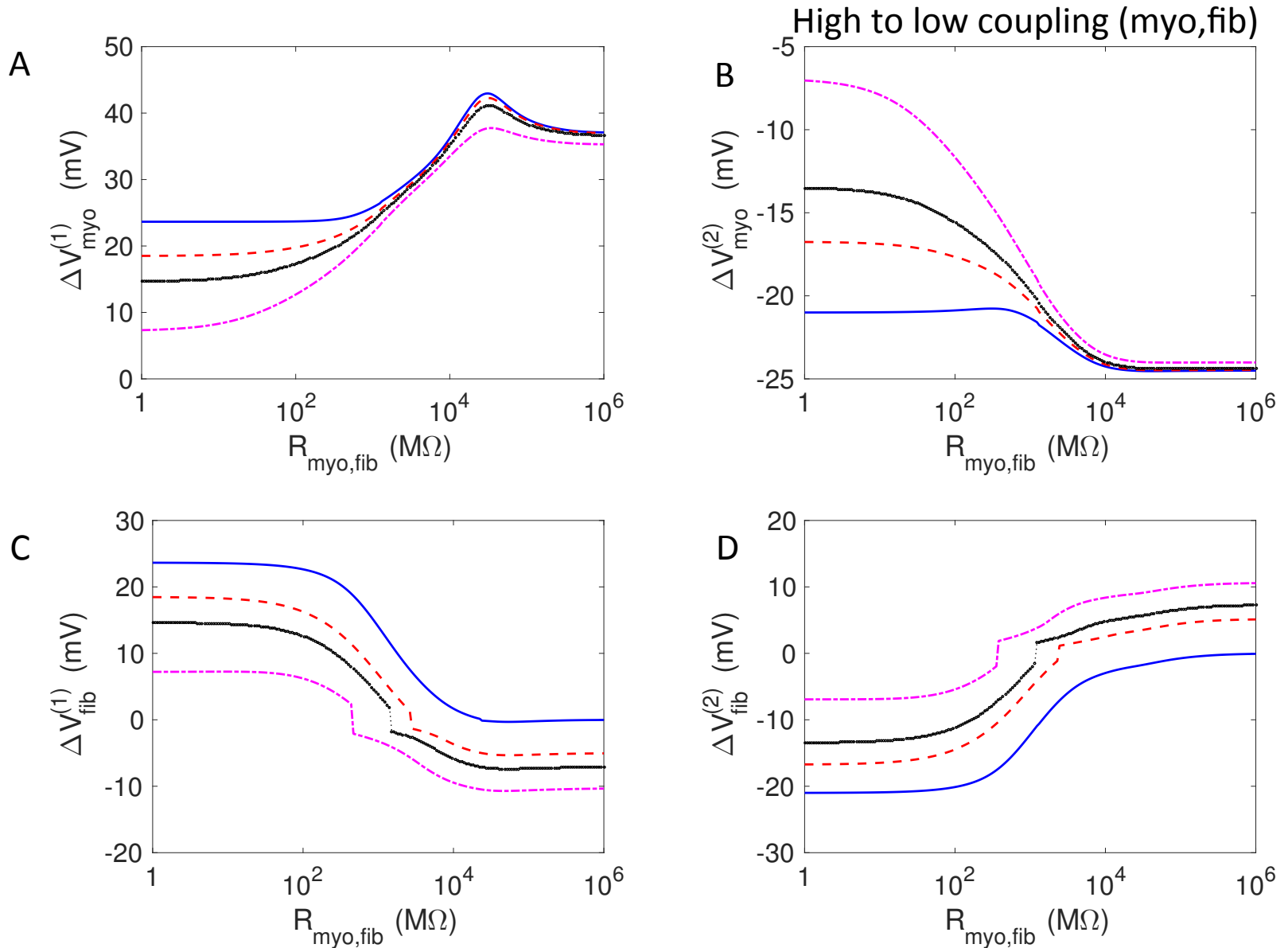


←  $R_{\text{myo,fib}} = 1e+8 \Omega$



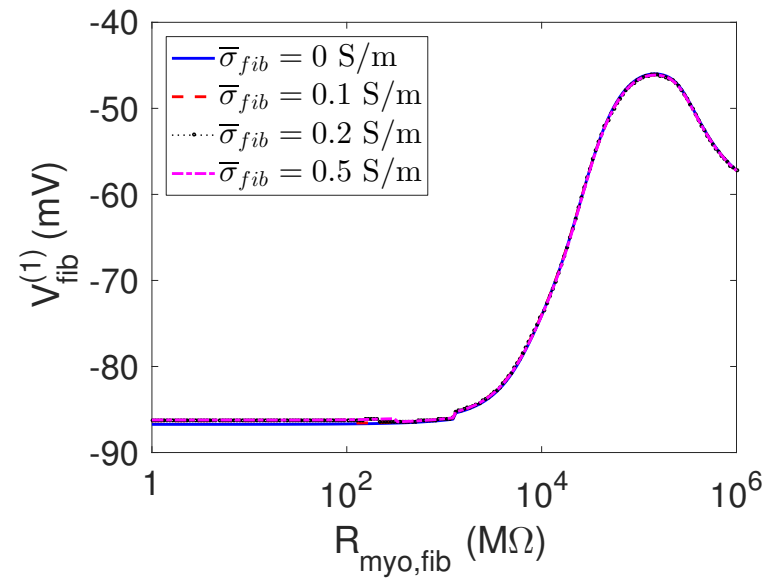
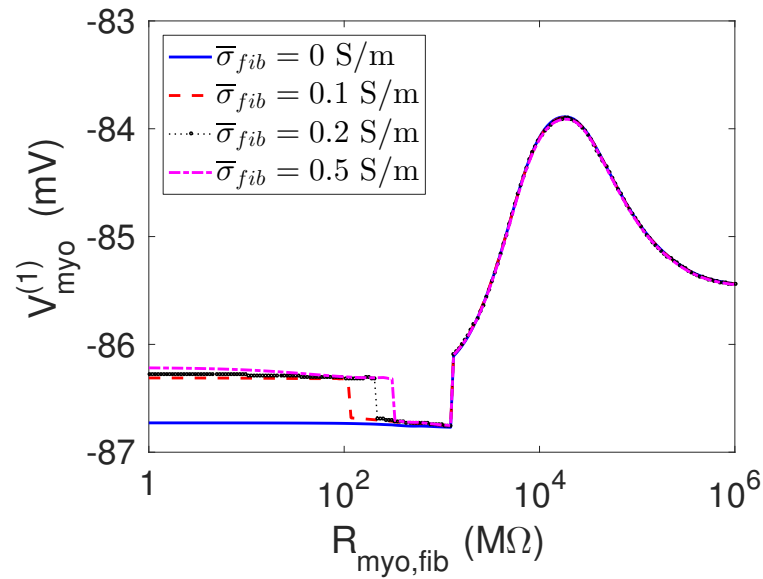
This is a result of different terms with different time scales that are competing

# Extreme fibrotic patch results

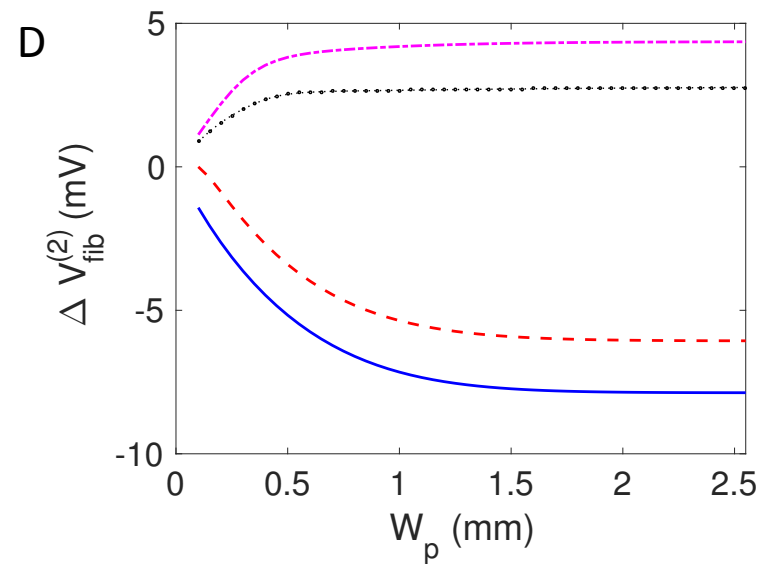
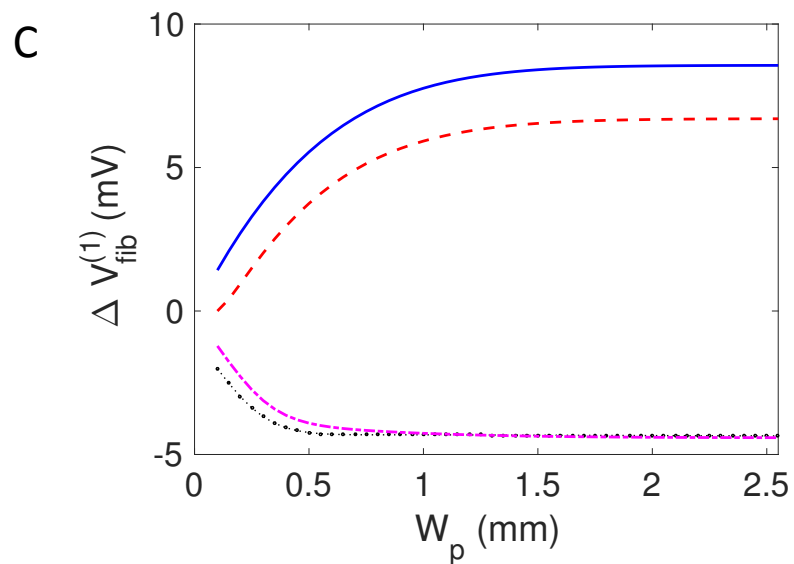
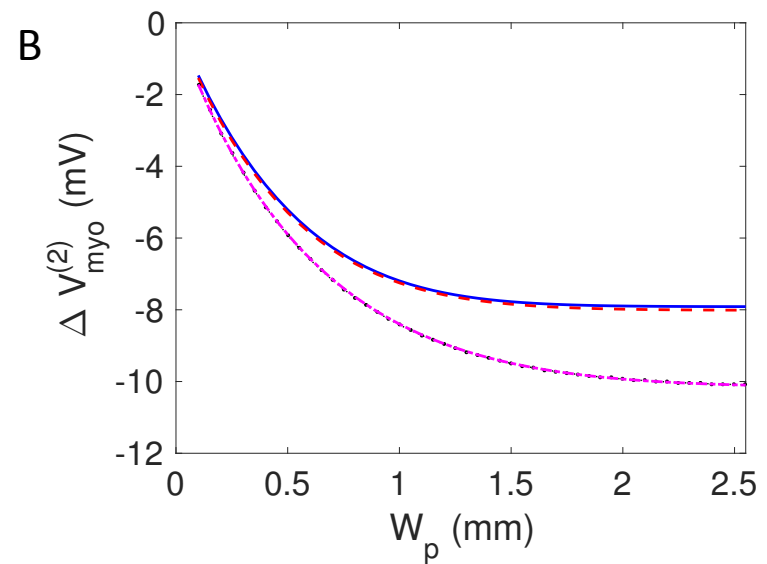
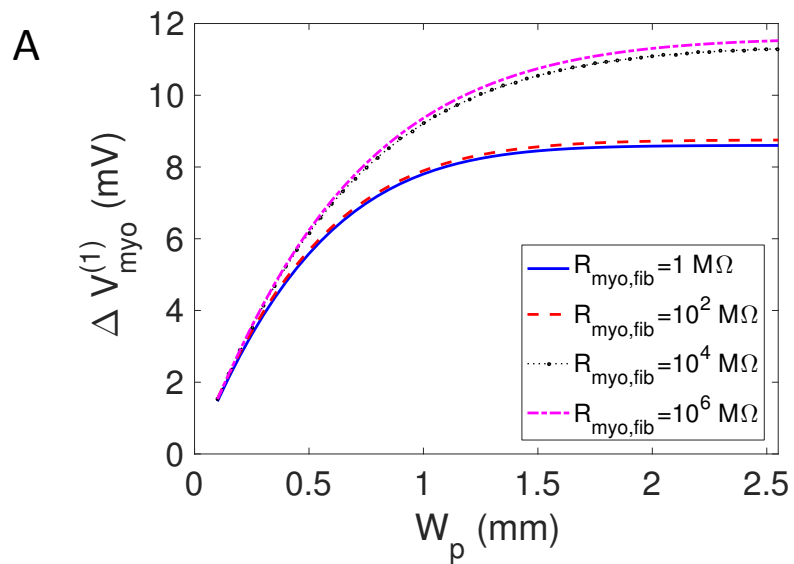


Intra-fibroblast coupling reduced VE strength in case of high myocyte-fibroblast coupling.

Extremum for  $\Delta V_{myo}^{(1)}$  is explained by different initial states before applying the shock



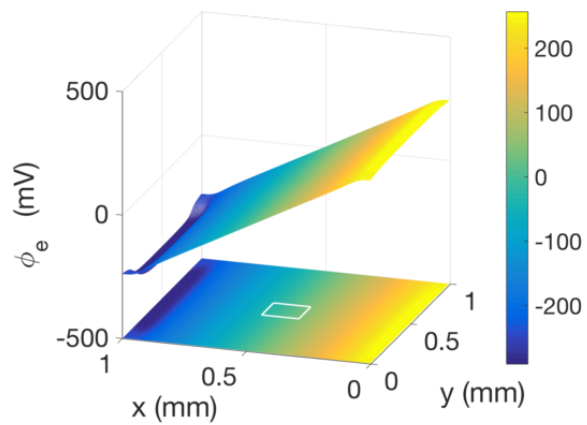
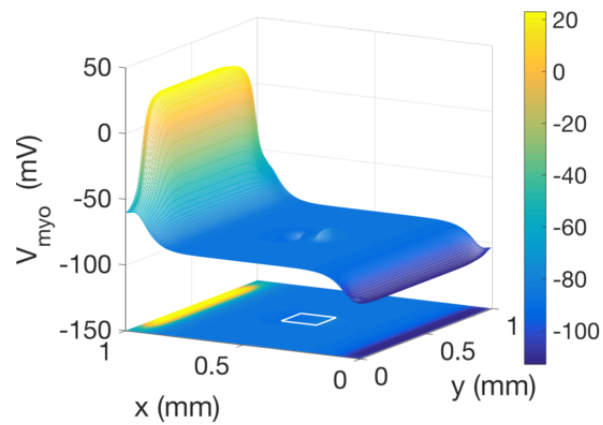
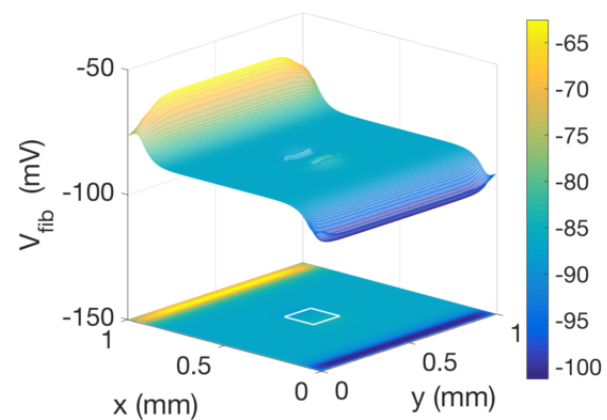
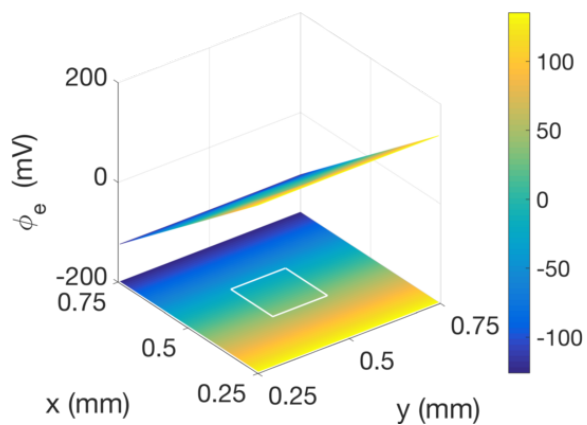
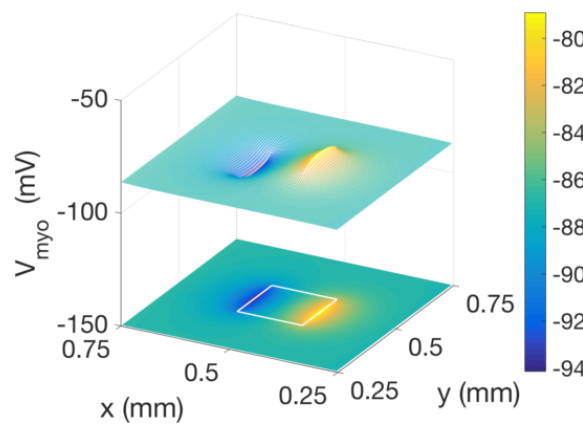
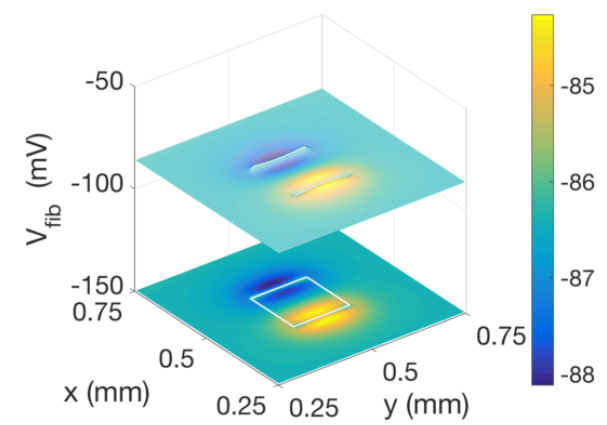
# Fibrotic patch size $W_p$ is a crucial parameter



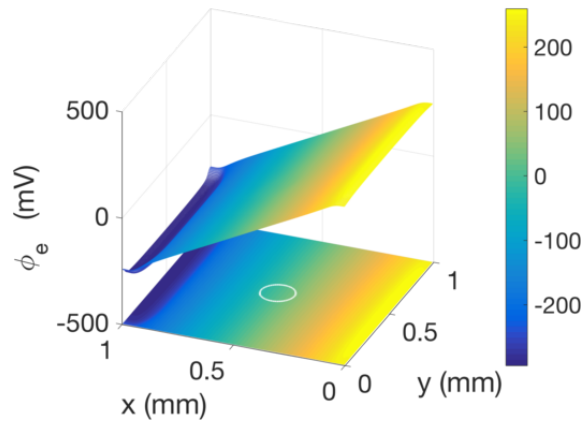
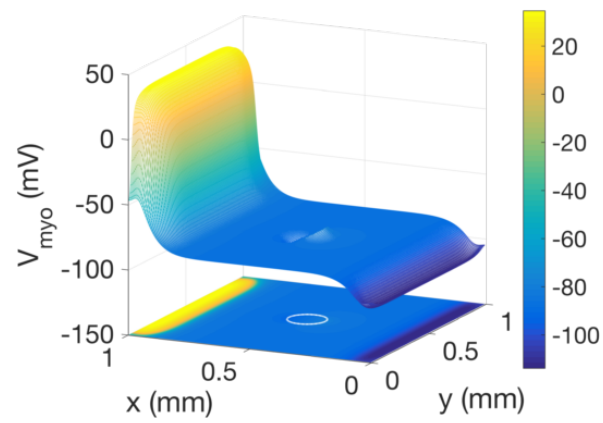
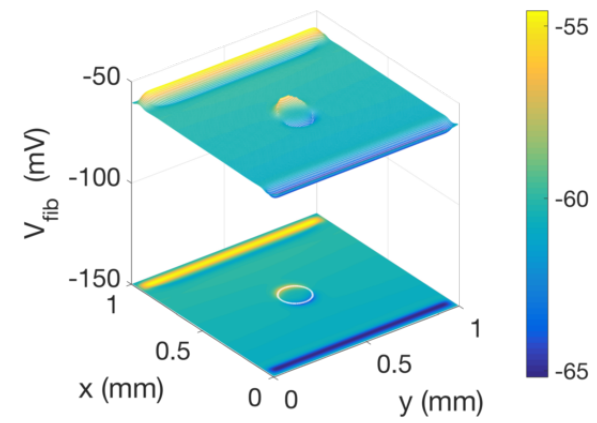
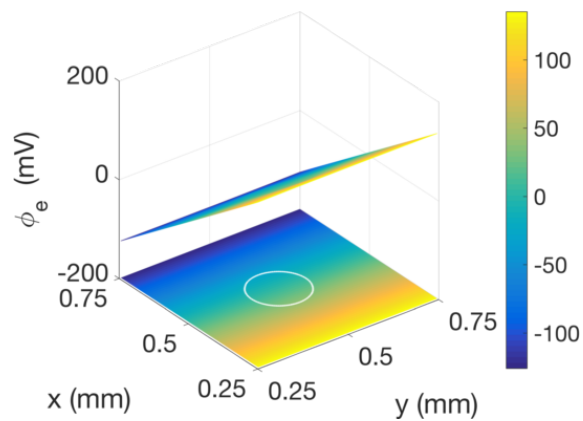
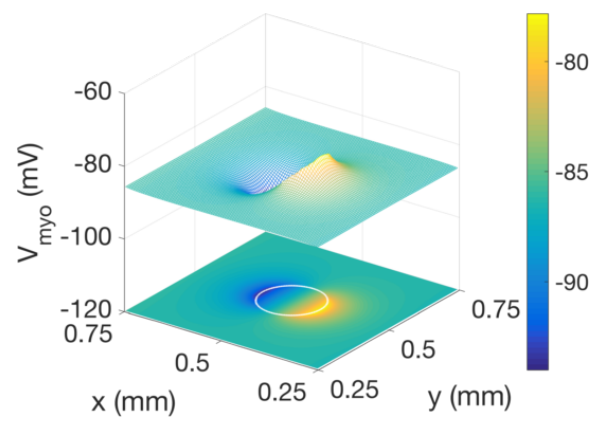
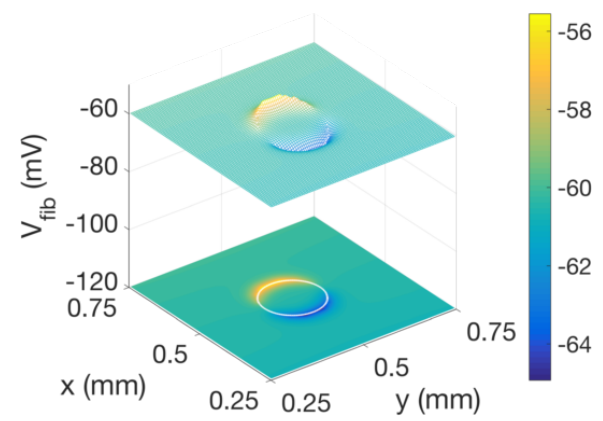
2D simulations



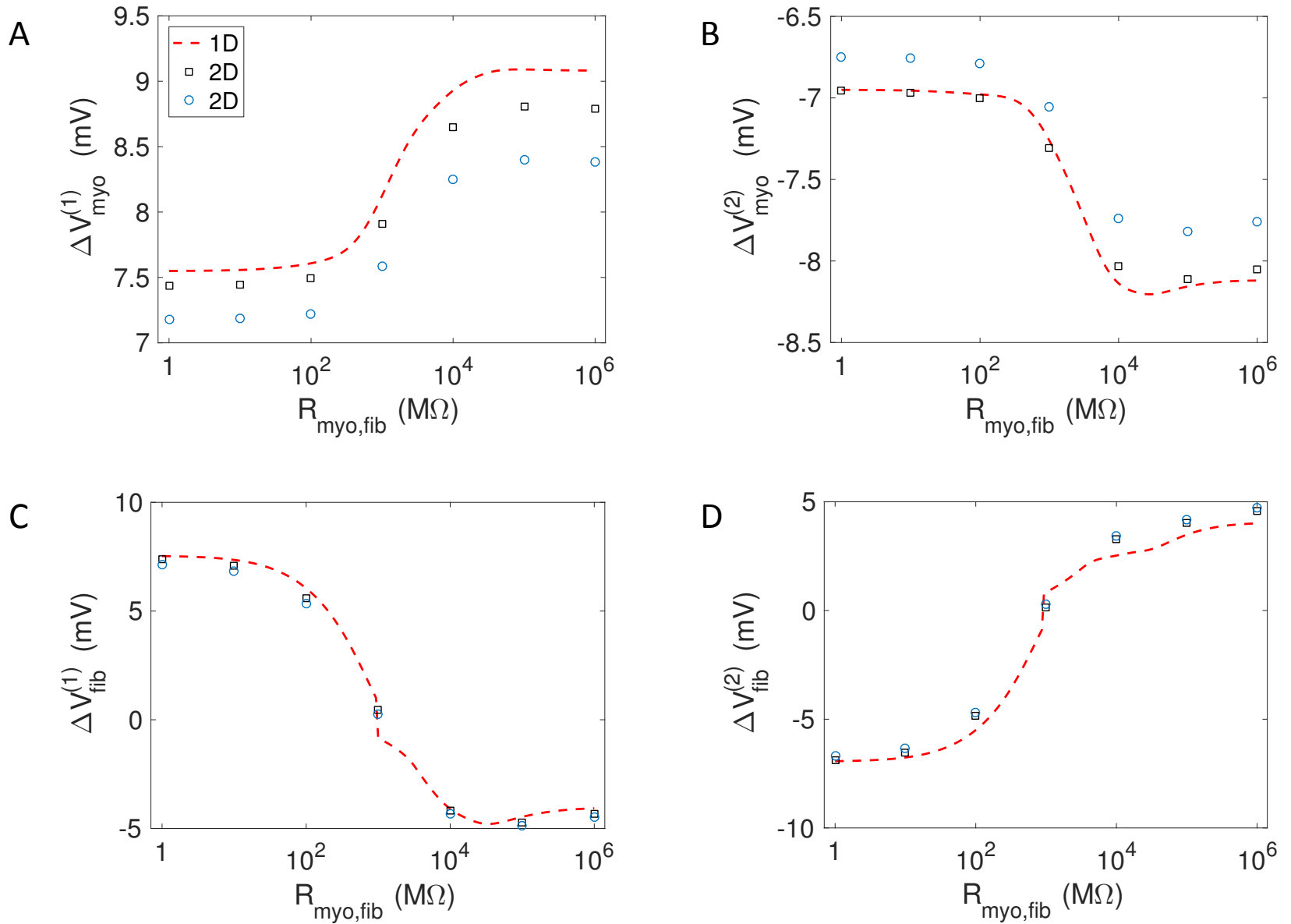
# Square patch

**A** $\Phi_e$ **B** $V_{myo}$ **C** $V_{fib}$ **D****E****F** $R_{myo,fib} = 1G\Omega$

# Circular patch

**A** $\Phi_e$ **B** $V_{\text{myo}}$ **C** $V_{\text{fib}}$ **D****E****F** $R_{\text{myo,fib}} = 1T\Omega$

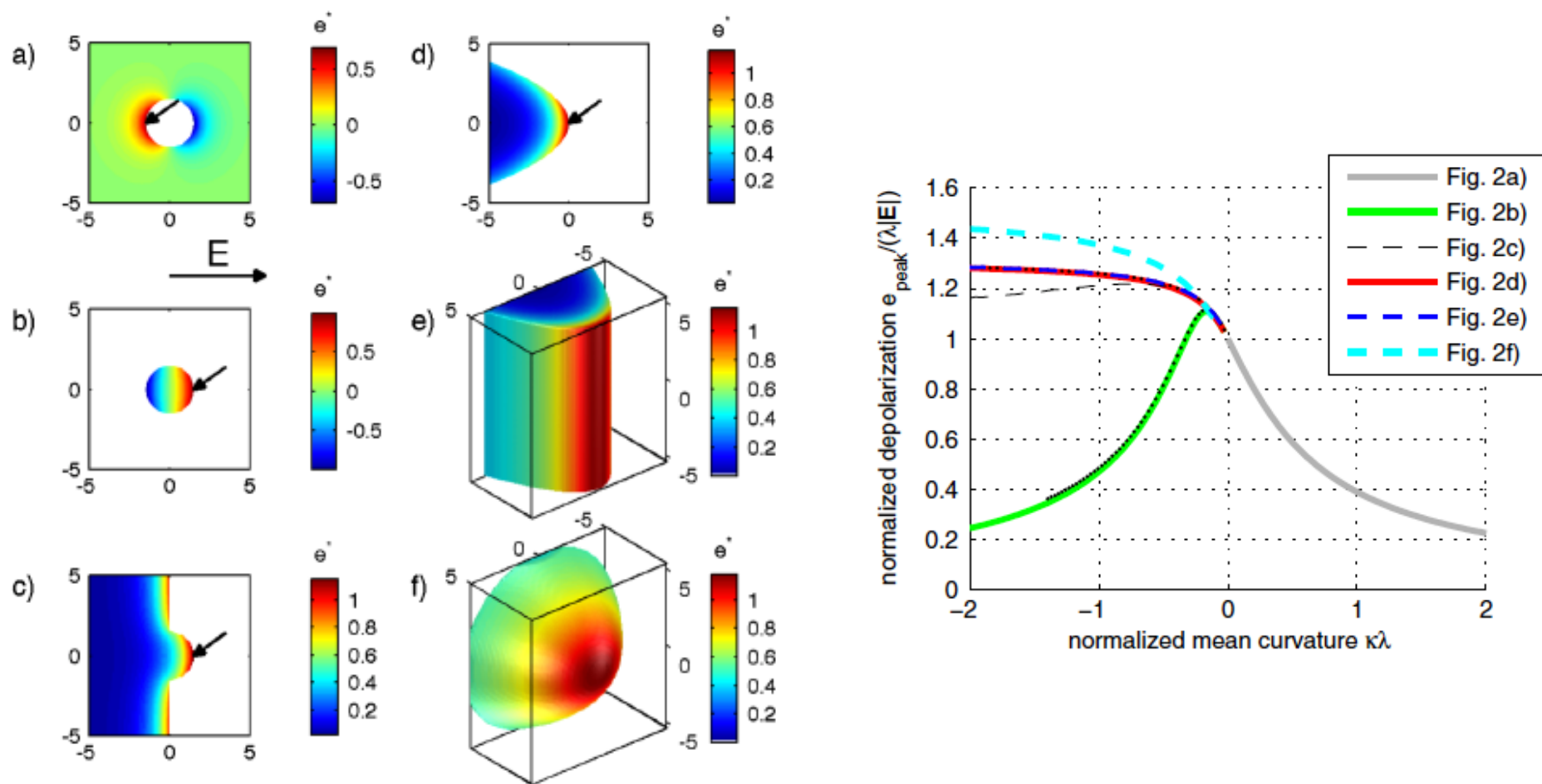
# Comparison between the 1D and 2D results





## Negative Curvature Boundaries as Wave Emitting Sites for the Control of Biological Excitable Media

Philip Bittihn,<sup>1,2,3,\*</sup> Marcel Hörning,<sup>4,5</sup> and Stefan Luther<sup>1,2,3,6</sup>



# Conclusions

- Fibrotic patches constitute potential sites for wave initiation in response to defibrillation.
- Our study showed that an increased degree of fibrosis and an increased size of the fibrotic patch cause an increased strength of virtual electrodes.
- Increased electrical coupling of myocytes with fibroblasts reduced the virtual electrode strength.
- Intra-fibroblast coupling reduced virtual electrodes in case of high myocyte-fibroblast coupling.
- Geometrical (curvature) factors are important
- Future...better design for optimized “low energy” defibrillation.

# Acknowledgements

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Utah CVRTI (F.B. Sachse, A.C. Sankarankutty, ...)

Max Planck Göttingen (A. Witt, S. Luther,...)

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