

**Newly Developed Automatic Control System
for Brain Hypothermia Treatment**

**Biophysical System Engineering
Graduate School of Health Sciences
Tokyo Medical and Dental University**

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Development of Automatic Control System of Hypothermia

- **Accurate Management of Brain Temperature**
Adaptive and Fuzzy Control Processes
- **Release from Heavy Loads**
Physical, Psychological & Economic Burdens
- **Improvement of Medical Condition & Treatment**

Based on “System Engineering”

Simulation \Rightarrow **Experiment**

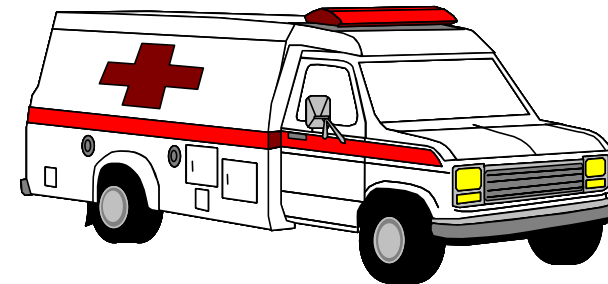
Additional Talk

Concerning Hypothermia Treatment

- **Control of Mechanical Respiration**
- **Optimal Control of Intracranial Pressure**
- **Monitoring and Determination of Physiological State**

Situation

*What's matter with him ?
It's awful. It's terrible.
Hurry up! Bring him to hospital !*

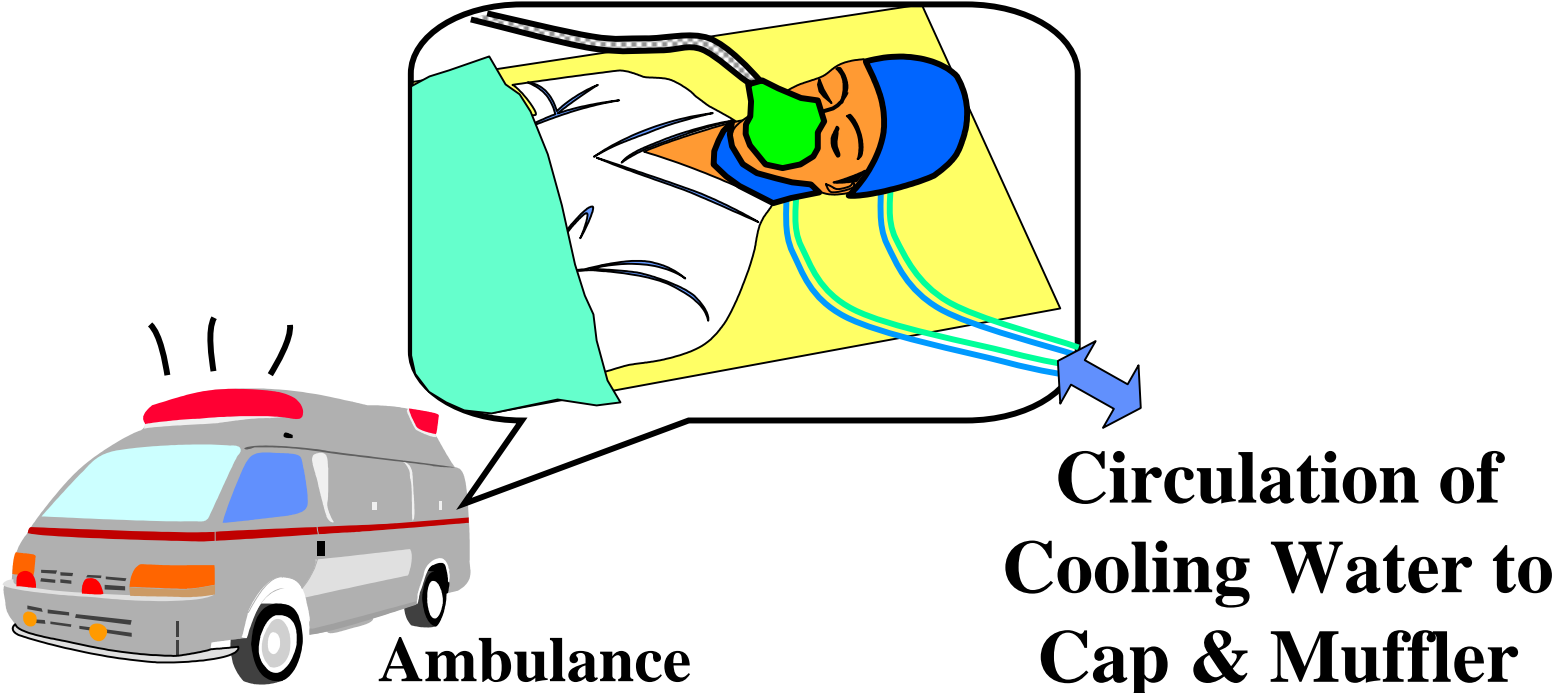


Ambulance



Traffic Accident

Set Quick Cooling Brain Temperature By Using Cooling Cap and Muffler



Brain Injury and/or Inflammation

Increase of Intracranial Pressure

Prevention of Secondary Damage of Brain Tissue

Bruise on the brain

traffic accident

Ischemic stroke

cerebral infarction

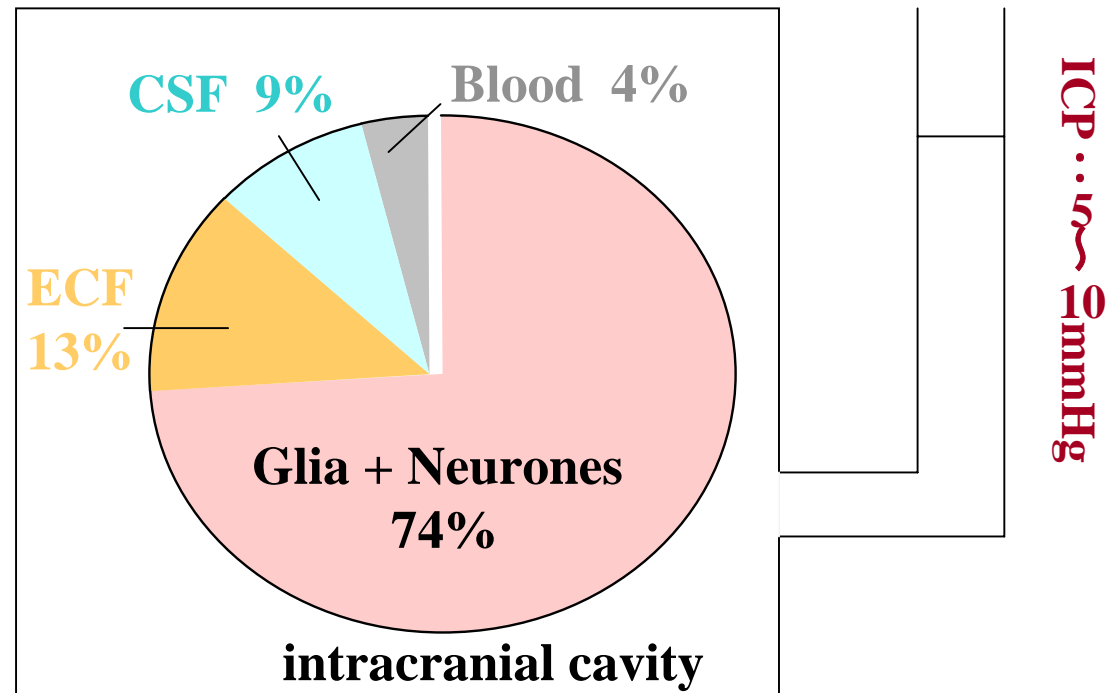
brain hemorrhage (aneurism)

Ischemic heart failure

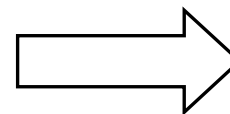
coronary infarction

Brain tumor

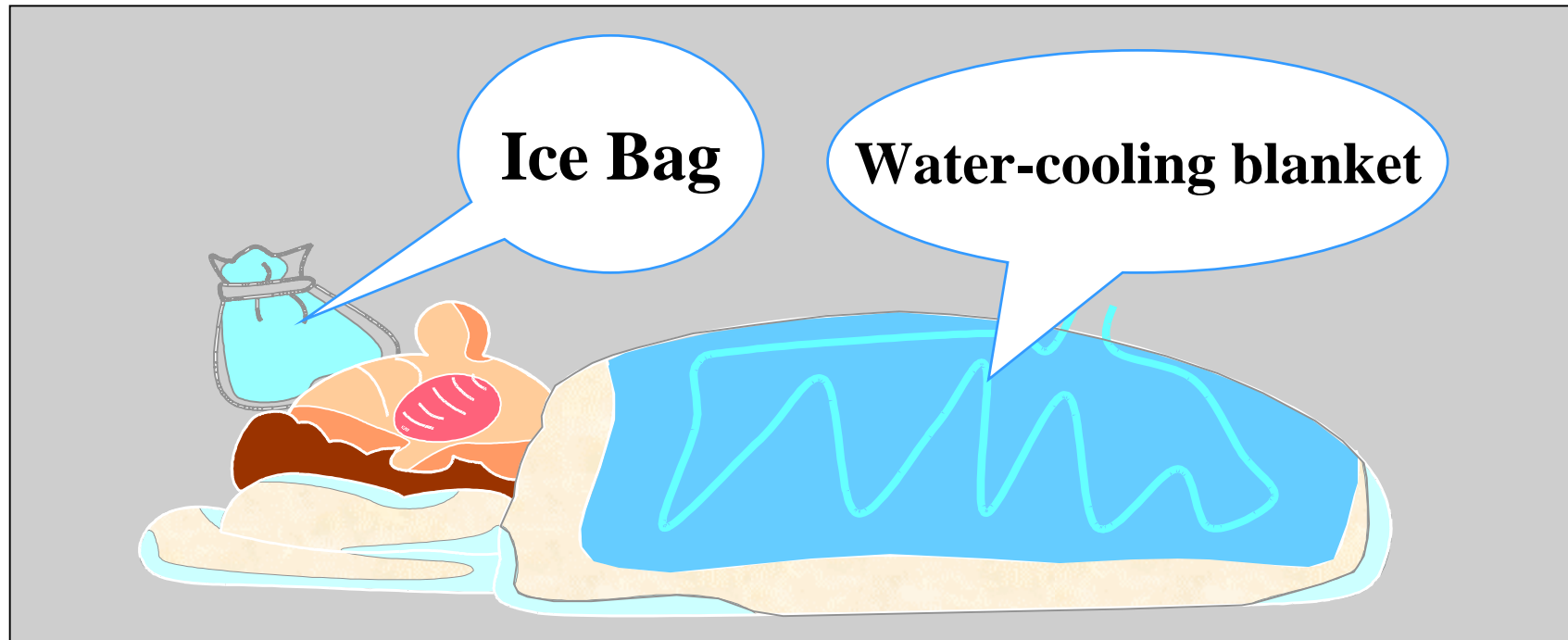
Cause of Intracranial Hypertension



- ✧ **space-occupying lesions** (hematoma)
- ✧ **brain volume** ↑ (brain edema)
- ✧ **blood volume** ↑ (brain swelling)
- ✧ **CSF volume** ↑ (hydrocephalus)

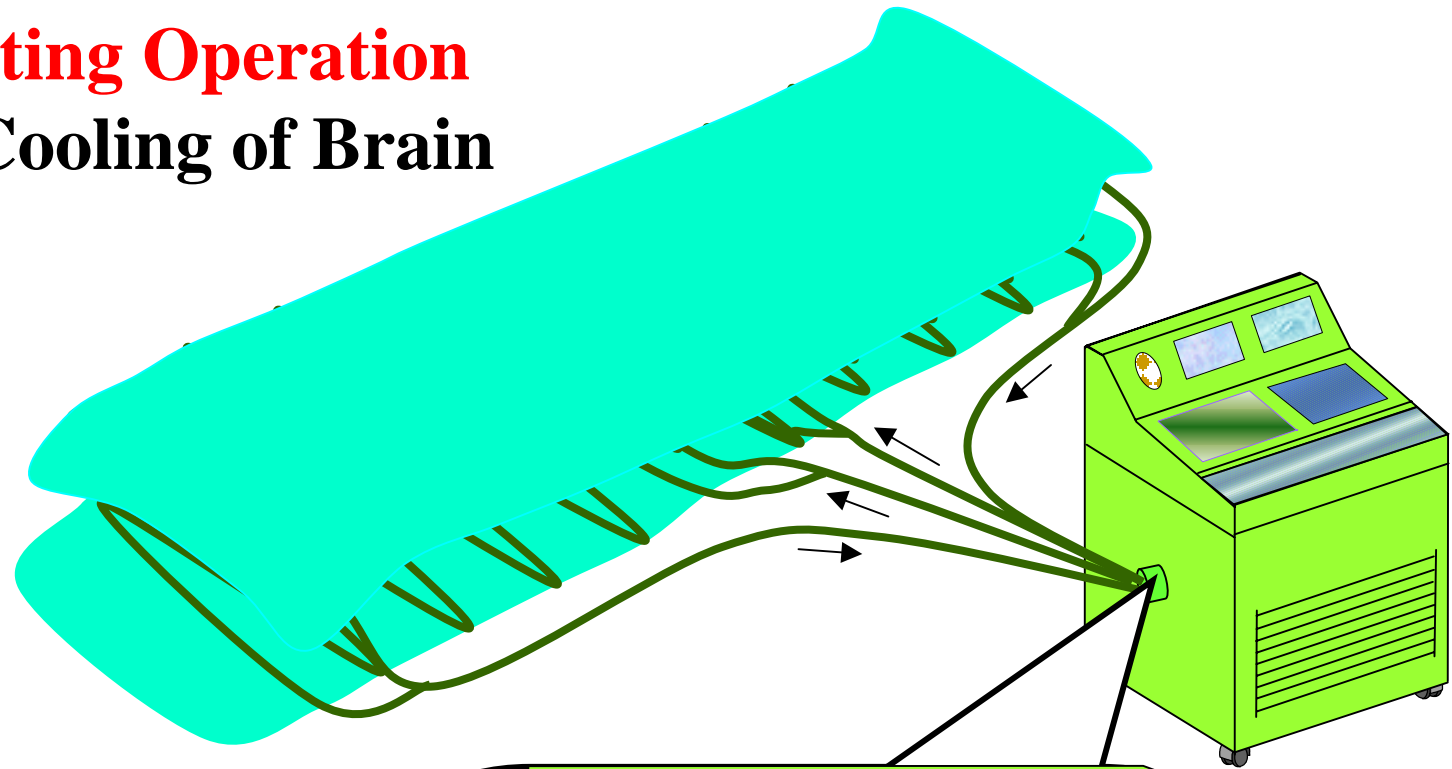


> 15mmHg

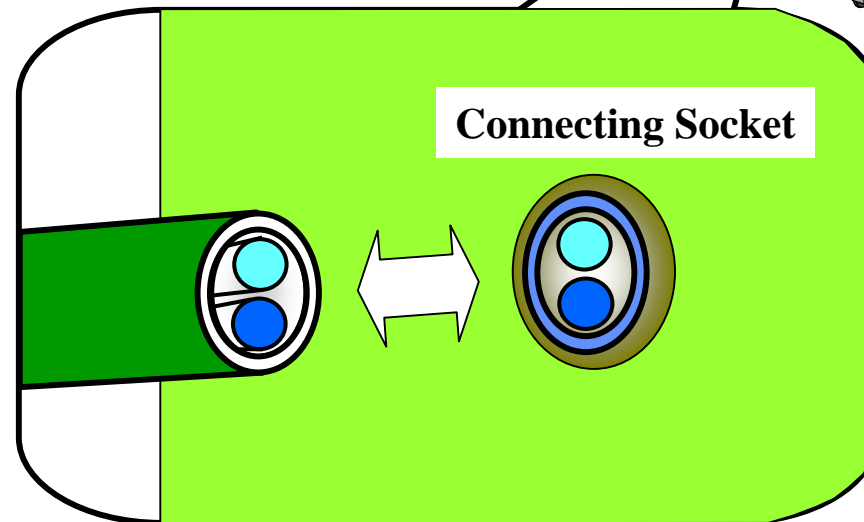


- **Whole Body Cooling is Effective**
- **Head Cooling as Assistance**

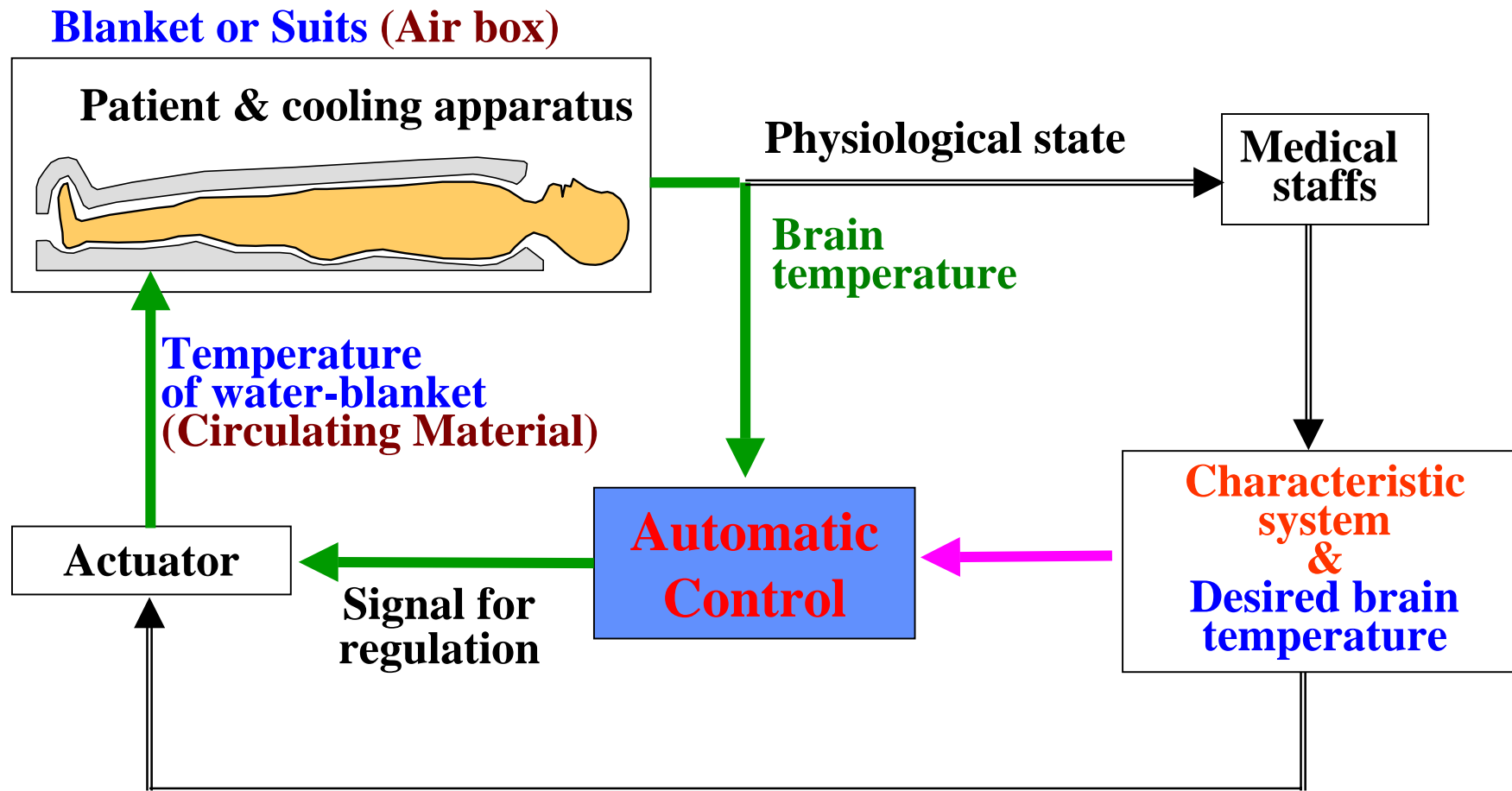
Simple Connecting Operation
Begins Quick Cooling of Brain



To Cooling Branket

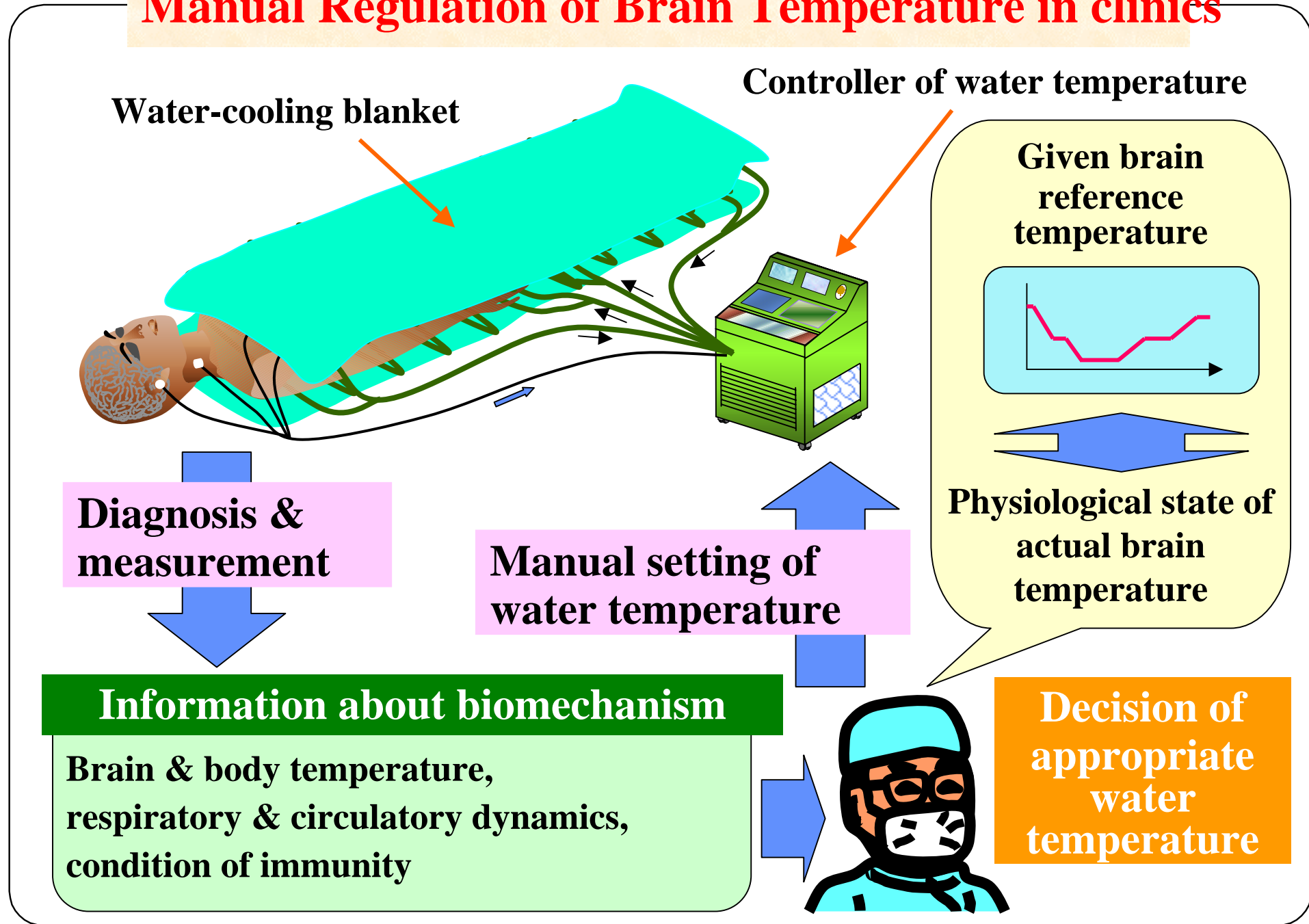


Automatic Control of Brain Temperature

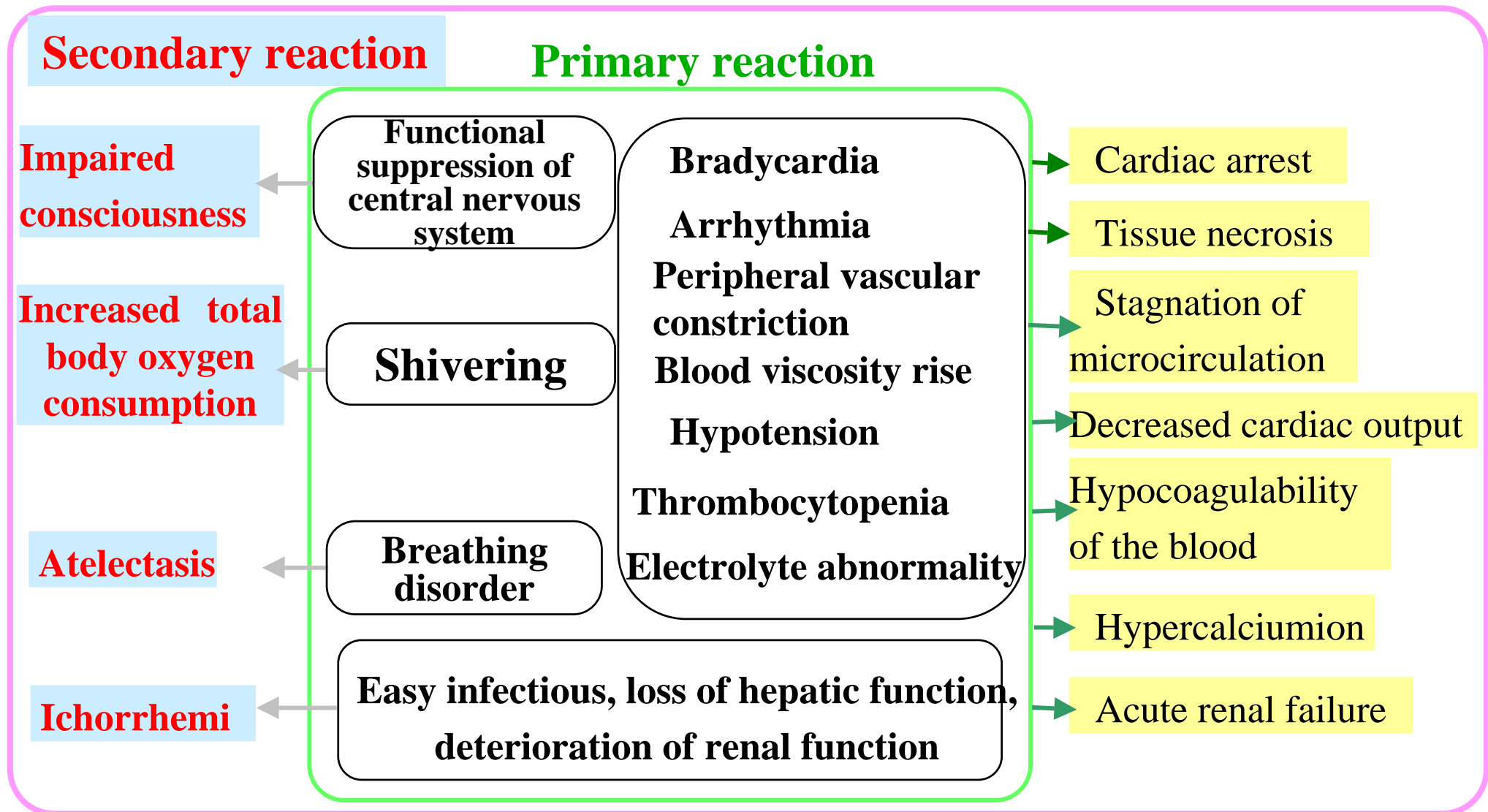


Manual regulation

Manual Regulation of Brain Temperature in clinics



Hypothermia under 32 °C Biological Reaction



➡ Bad effect on circulation , respiration, immunity & nervous function

Protection of Brain Cells by Brain Hypothermia

- **Suppression of Damage caused by Energy insufficiency**

- Improvement of Ca^{2+} homeostasis
- Suppression of oxidation by free radicals
- Activation of antiapoptosis substance
- Suppression of dopamine A10 neural groups

- **Suppression of Hyperfunction of Endocrine System**

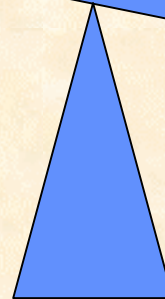
- Suppression of catecholamines hypersecretion

Trade off in Hypothermia

Protection of Brain Tissue



Merit in Hypothermia



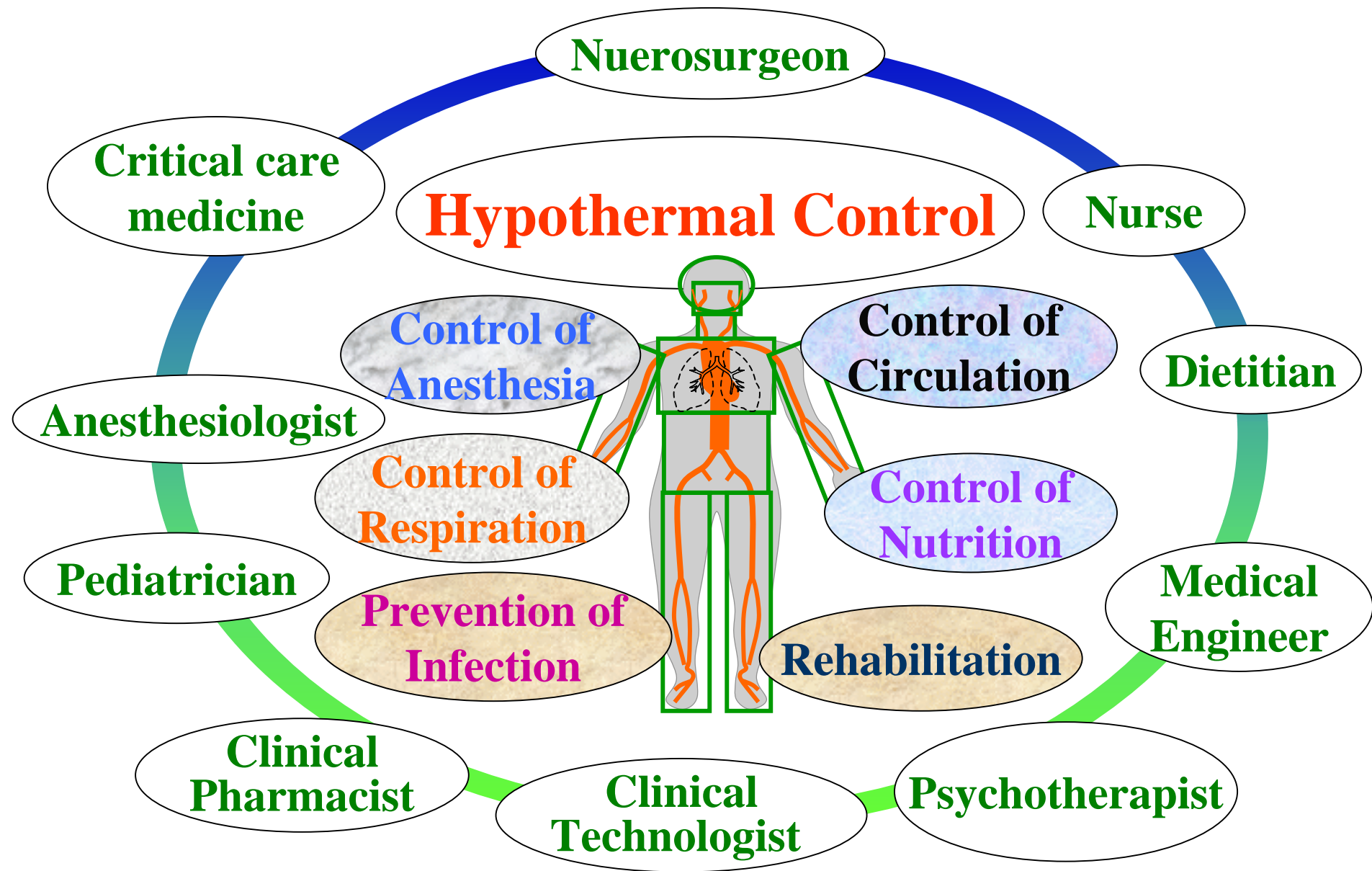
Biological Reaction



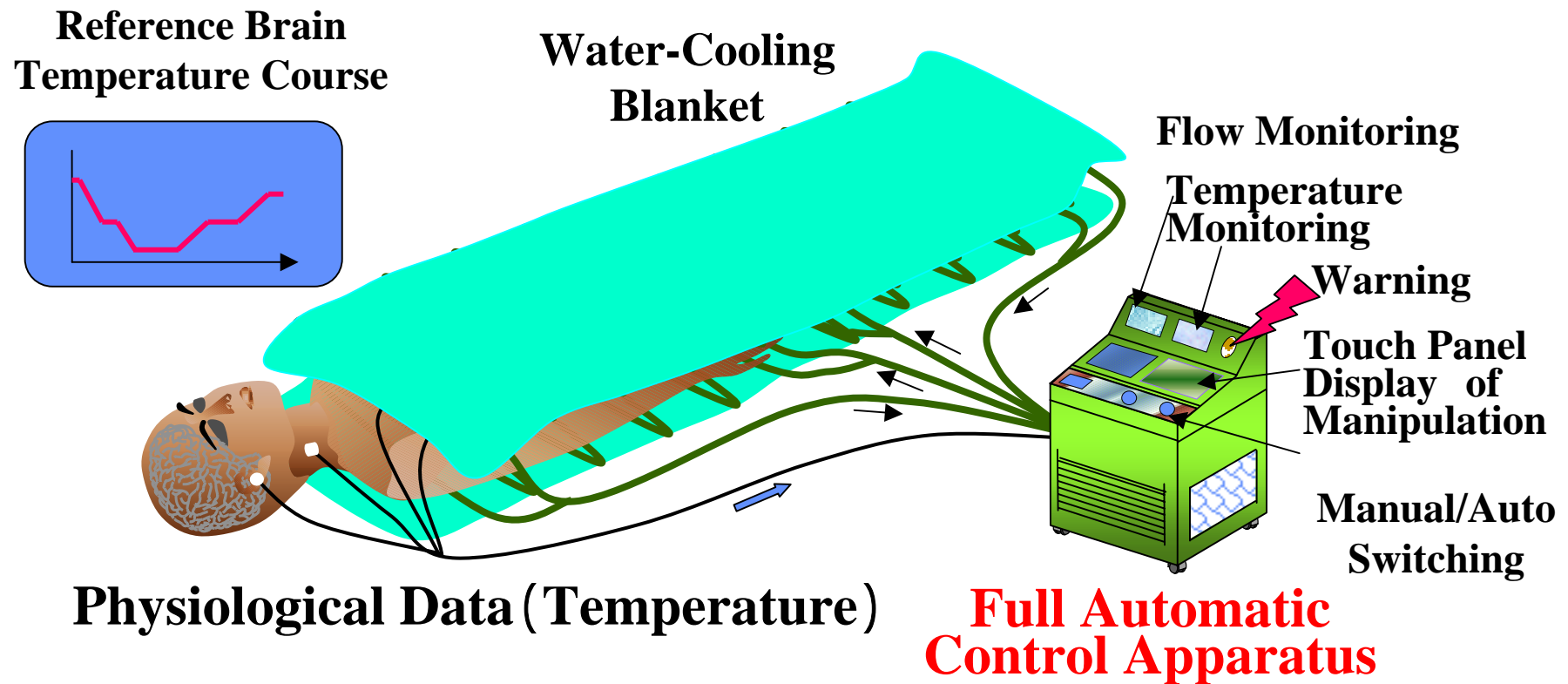
Demerit in Hypothermia

Necessity of precise and accurate control of brain temperature !

Hypothermia Treatment in ICU

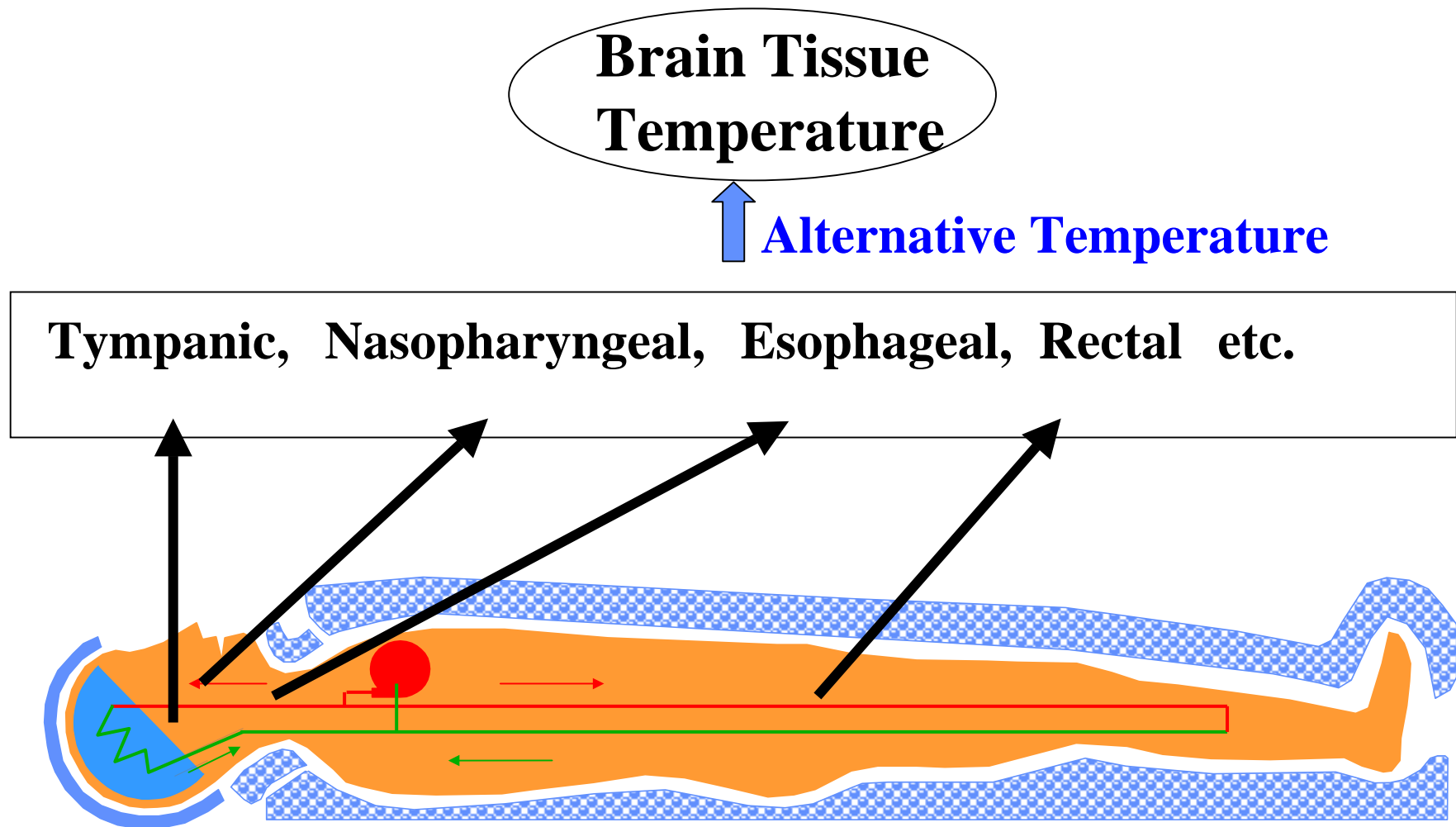


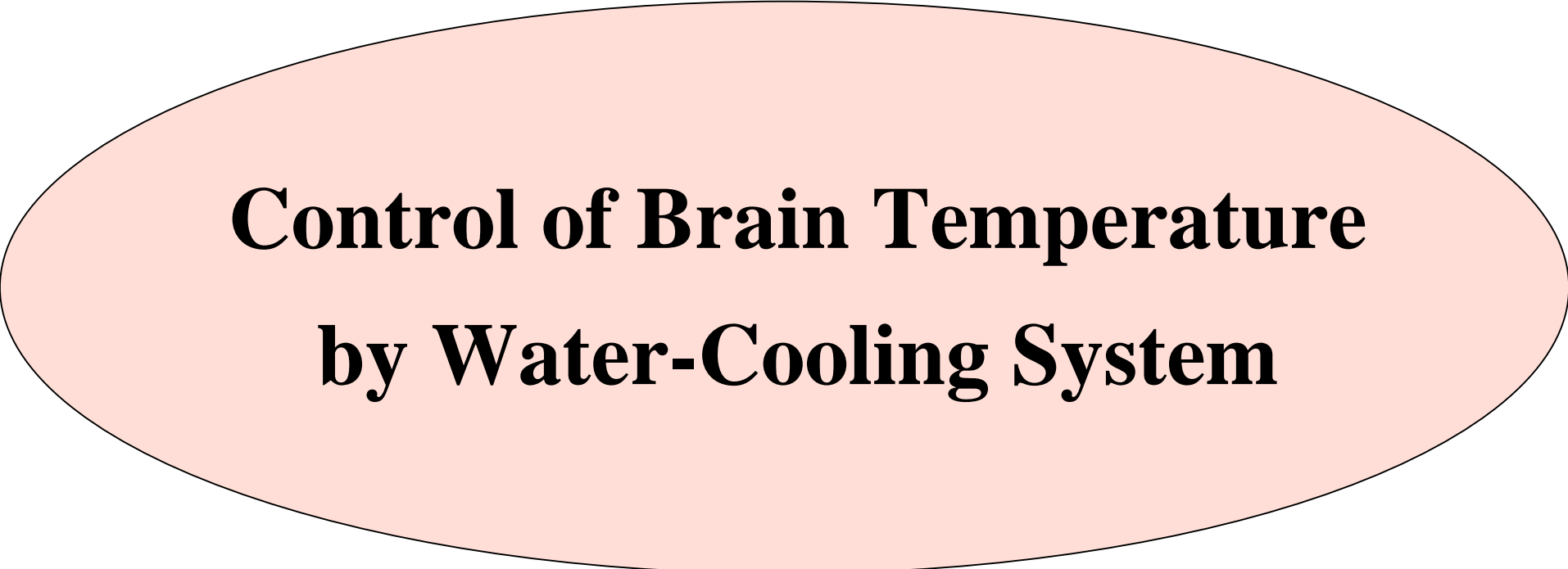
Automatic Control Apparatus of Brain Temperature



Calculation & Regulation
of Water Temperature

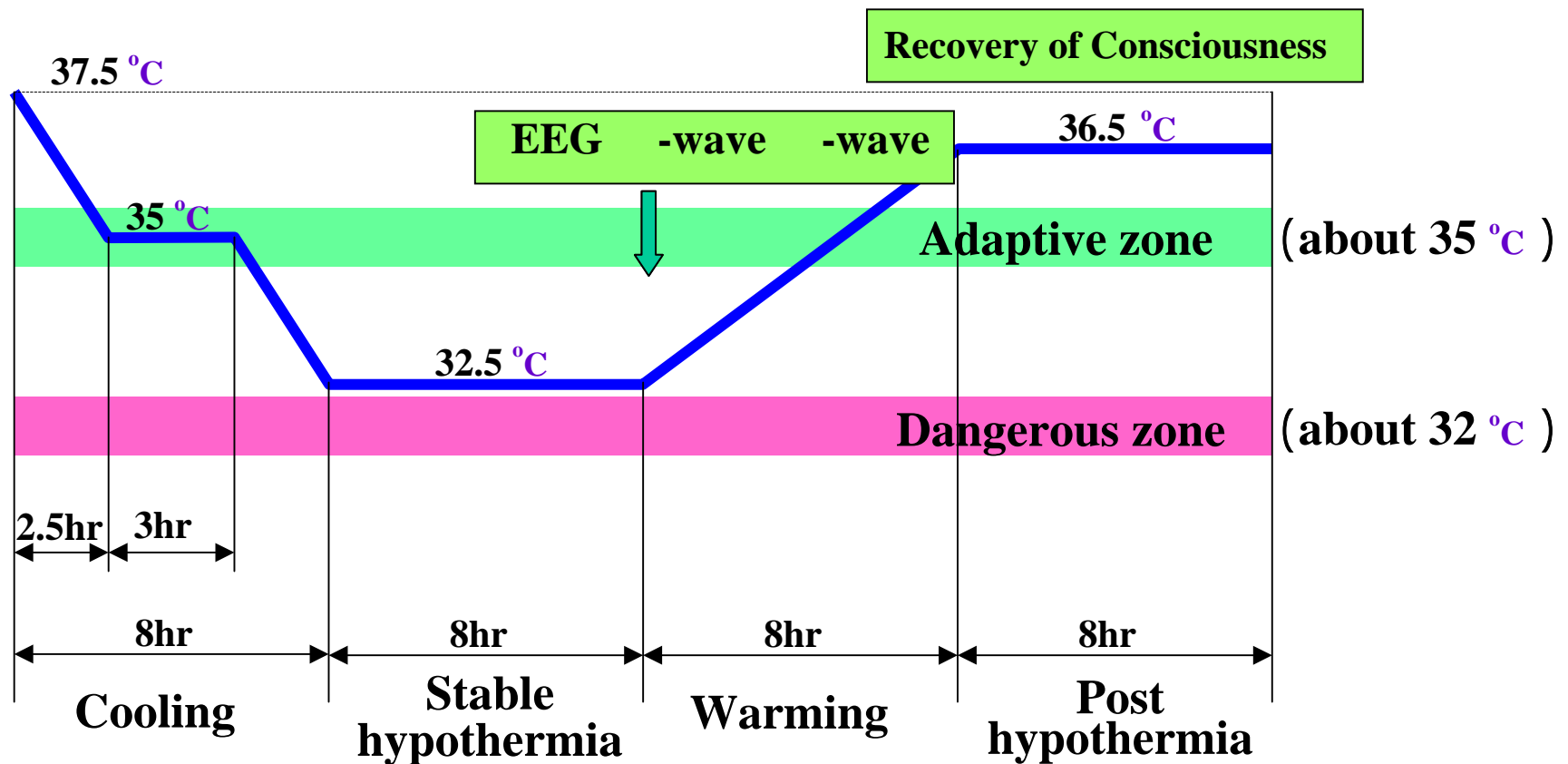
Measurement of Temperature in Hypothermia





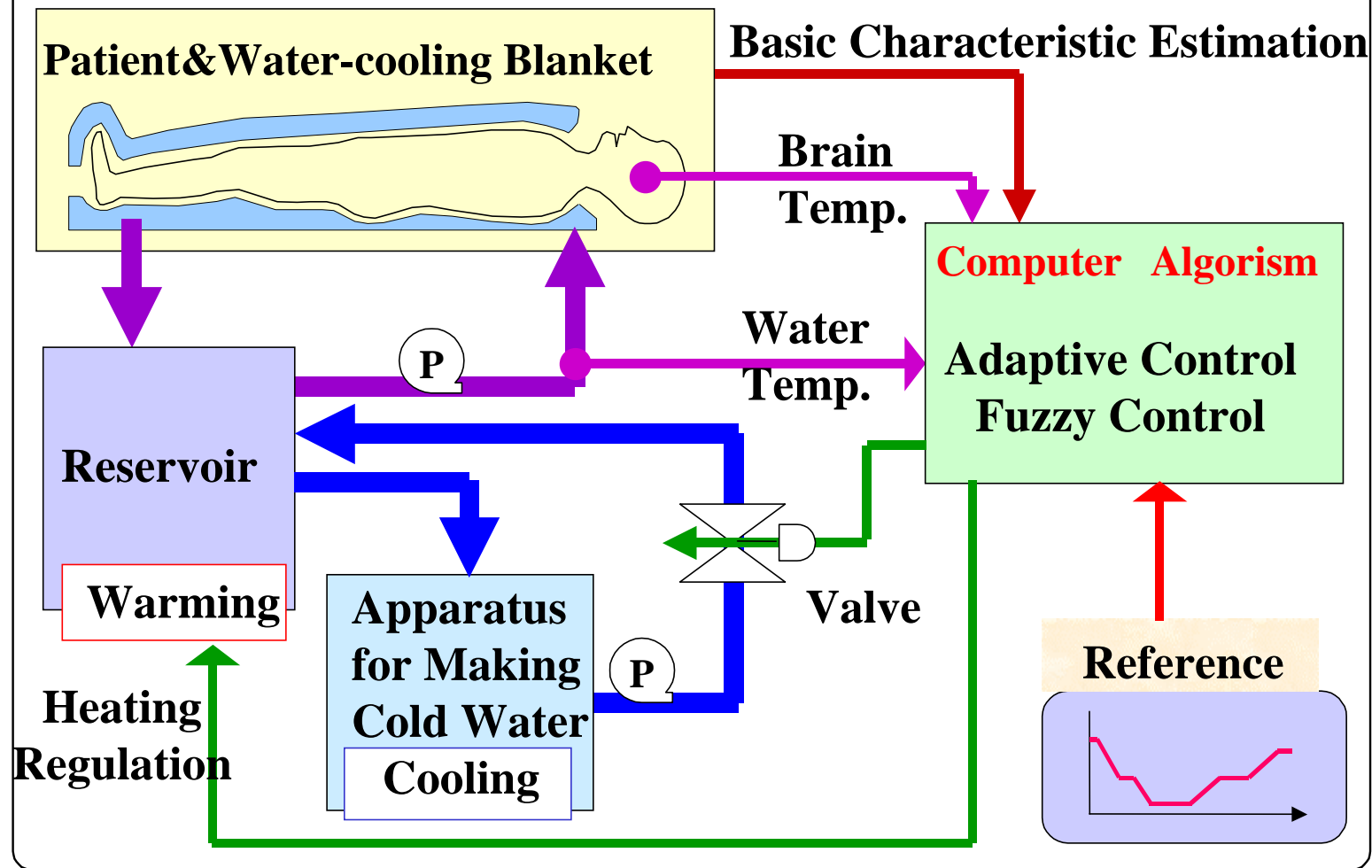
**Control of Brain Temperature
by Water-Cooling System**

Schematic Desired Brain Temperature



Step-by-step Management of Body Temperature

Automatic Controller of Brain Temperature

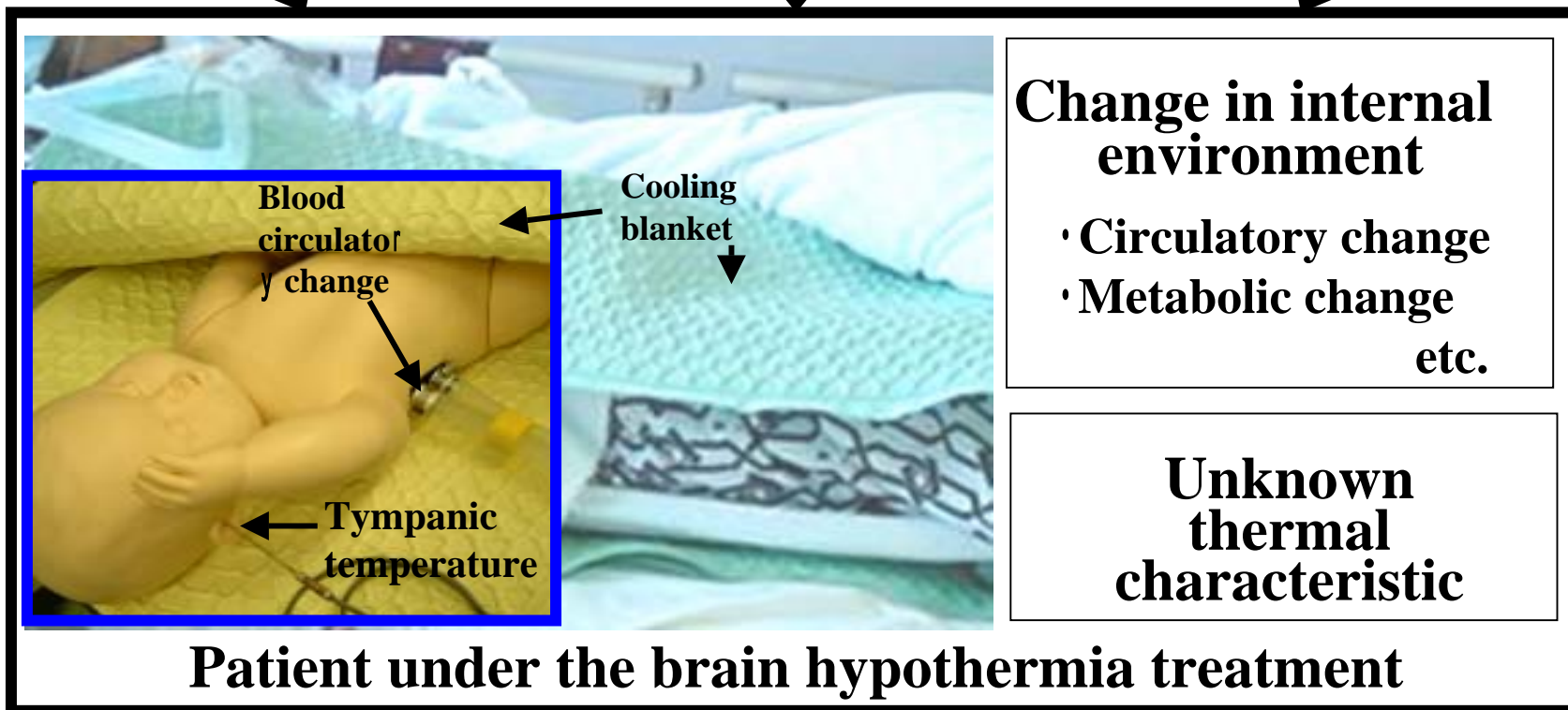


Concept of Adaptive Control Engineering

Different regulation

Various kinds of medical treatment

Change in external environment



Adaptive control

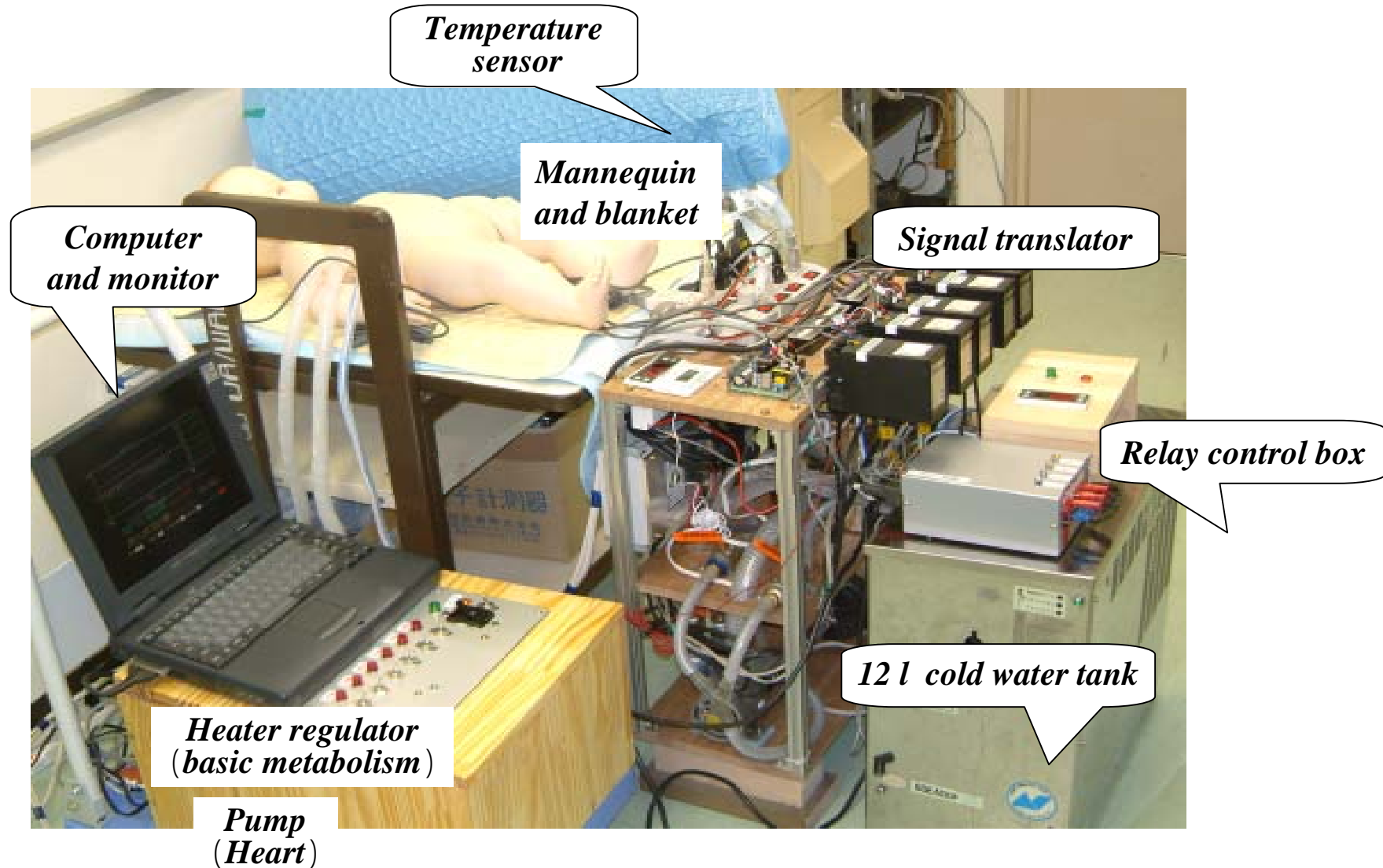
Realization of desired brain temperature

Brain Hypothermia Treatment Using Thermal Mannequin



Mannequin controlled by water circulation (blood flow) and heater (metabolic heat)

Overview of Experimental Equipment

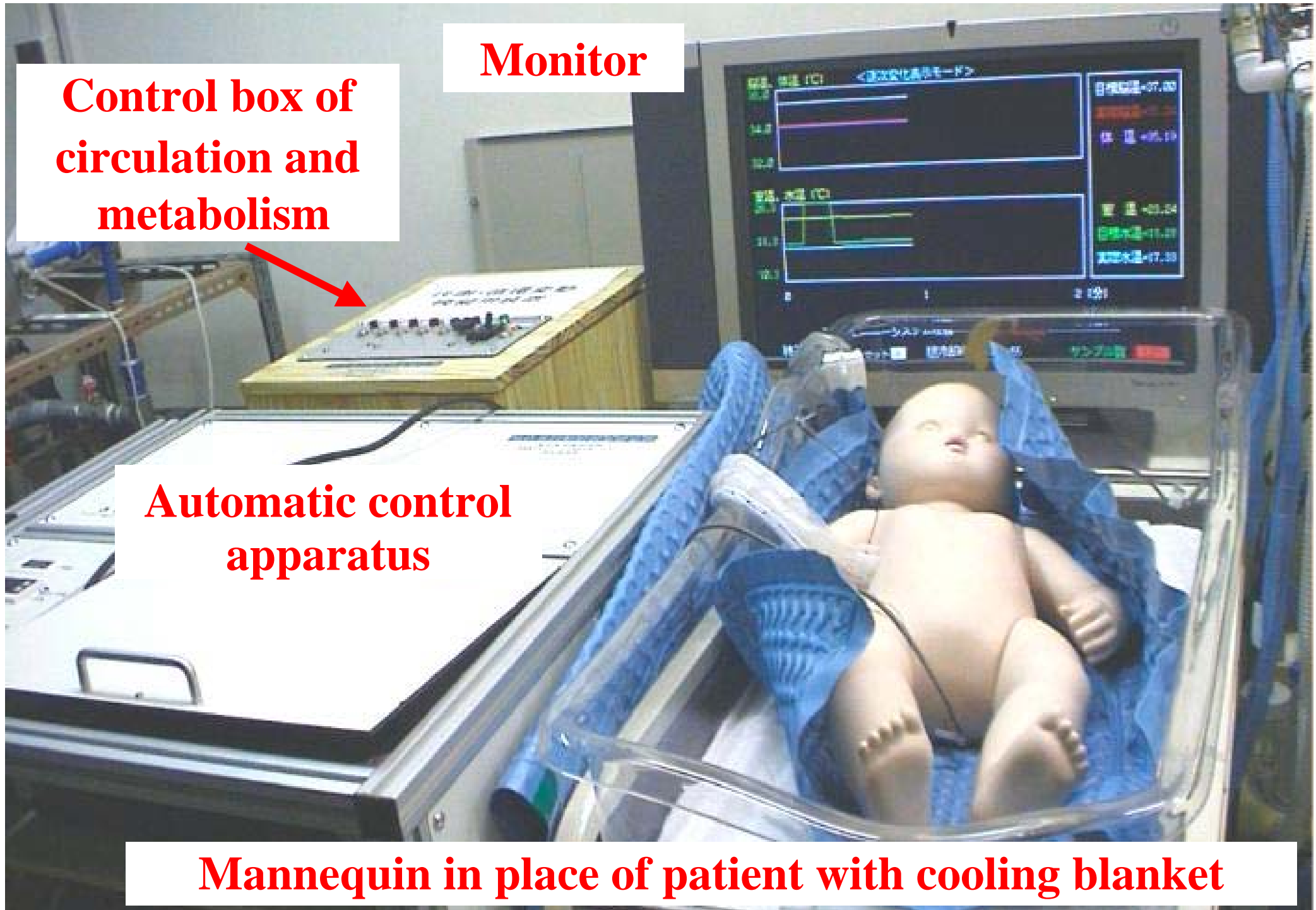


Control box of circulation and metabolism

Monitor

Automatic control apparatus

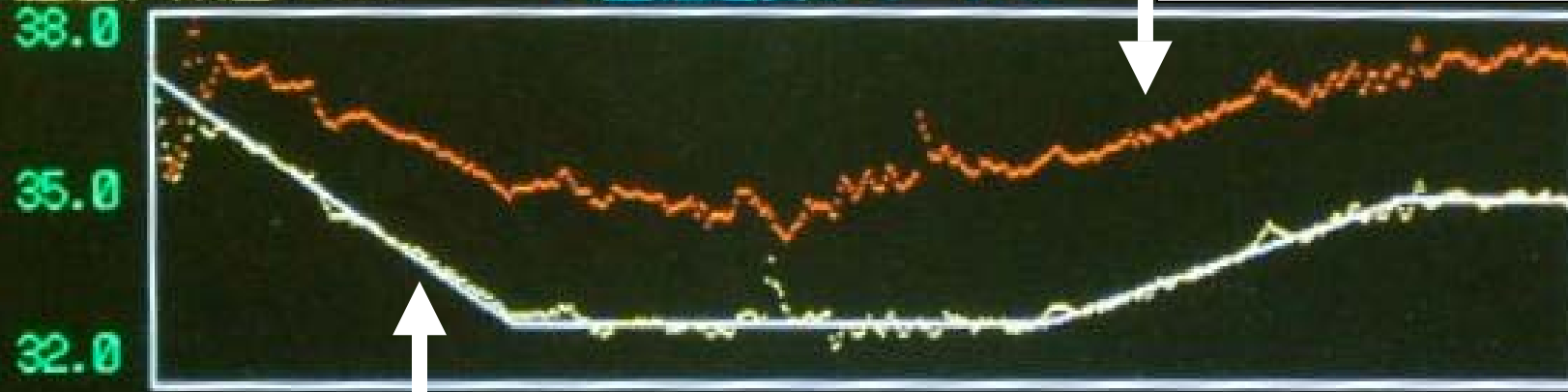
Mannequin in place of patient with cooling blanket



脳温、体温 [°C]

<全経過表示モード>

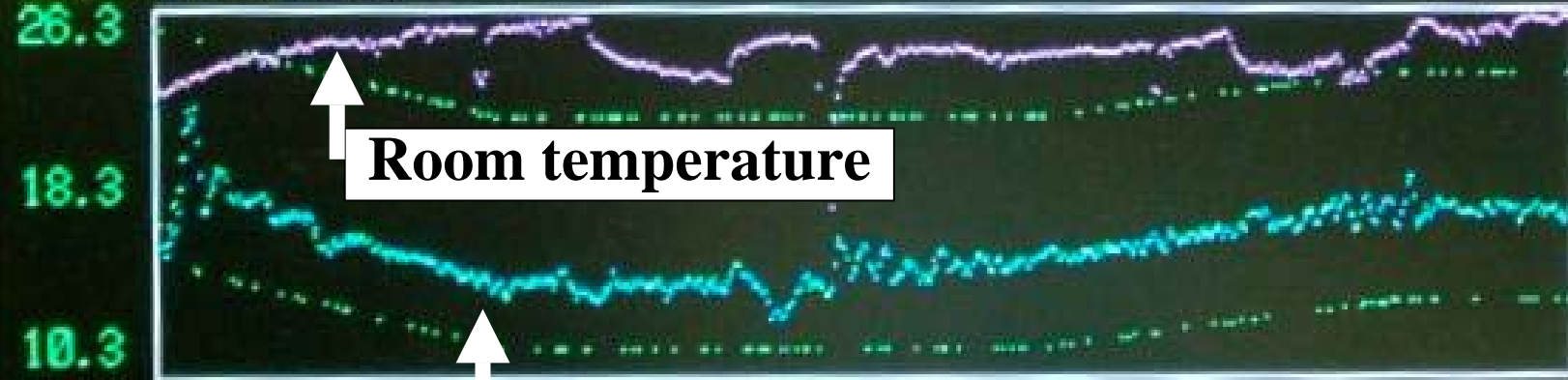
Body temperature



目標脳温=35.00
 実際脳温=35.00
 体温=37.44

Tracking of of brain temperature for desired brain temperature schedule

室温、水温 [°C]



室温=26.17
 目標水温=23.61
 実際水温=18.87

Room temperature

Water temperature of blanket

0 16 32 [時間]

Experimental time 32:00:00

終了 [ESC]

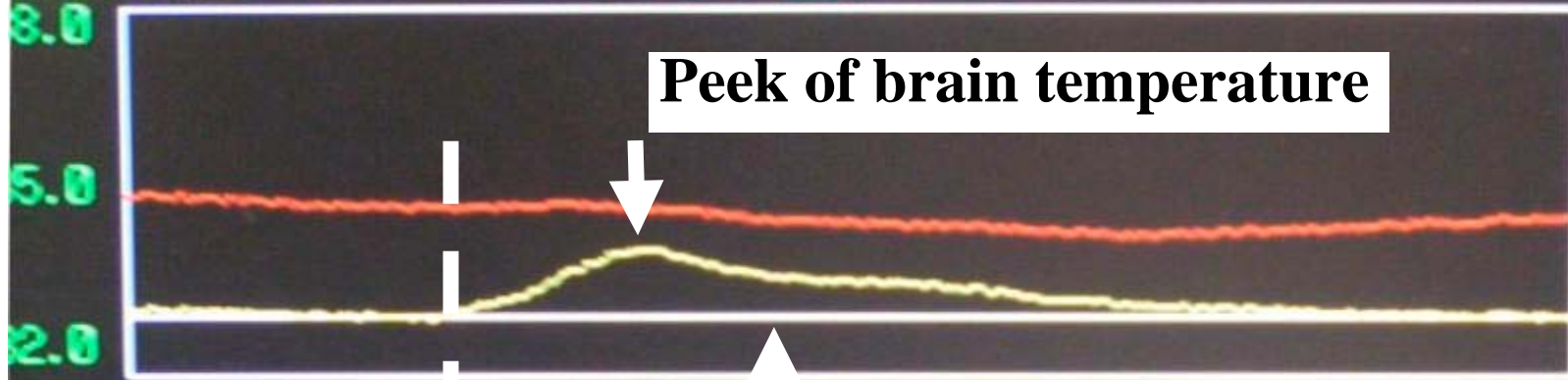
リセット [R]

サンプル数

2887

室温、体温 [°C]

<トレンド表示モード>



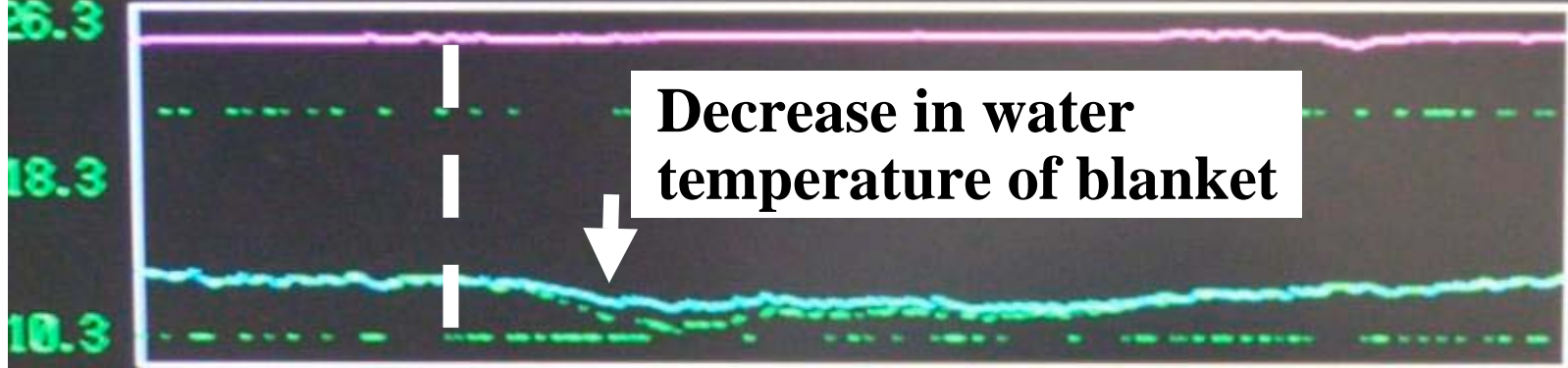
目標脳温=33.00

実際脳温=32.95

体温=34.56

Desired brain temperature schedule

室温、水温 [°C]



室温=25.05

目標水温=14.36

実際水温=14.36

Heater SW ON

0 30 60 [分]

システム状態 規範方式冷却

終了

リセット

Experimental time 14:25:03

サンプル数

12976

脳温、体温 [°C]

<トレンド表示モード>

Body temperature

Brain temperature

目標脳温=33.00
 実際脳温=32.85
 体温=35.05

室温、水温 [°C]

Decrease in room temperature

室温=24.02
 目標水温=15.15
 実際水温=15.09

Opening the door

Water temperature of blanket

-----システム状態-----規範方式冷却-----

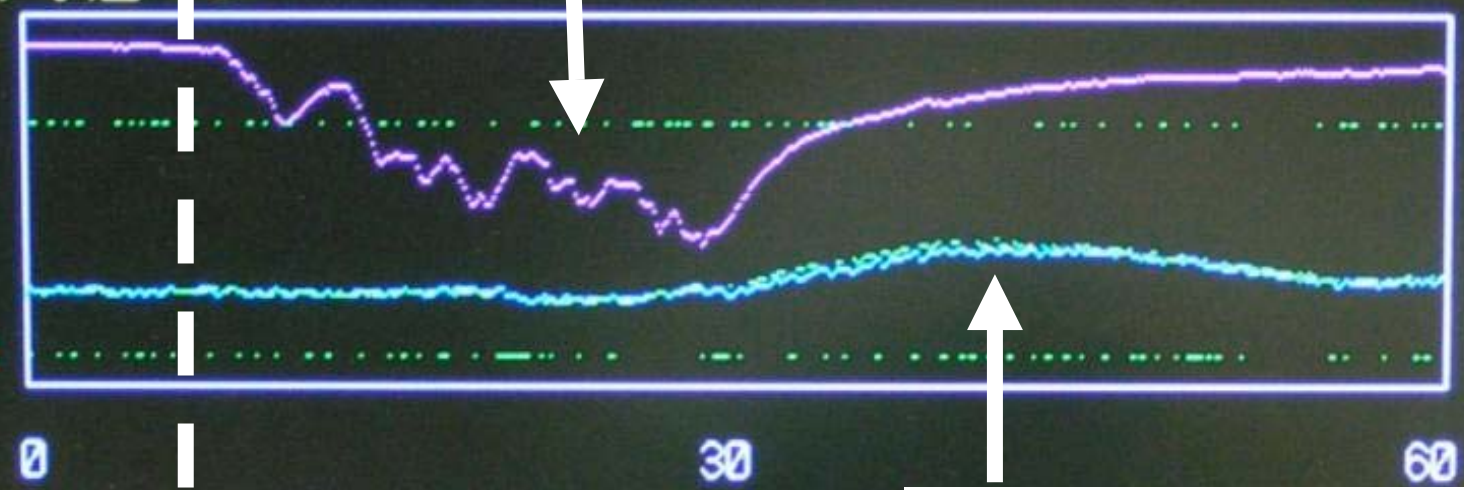
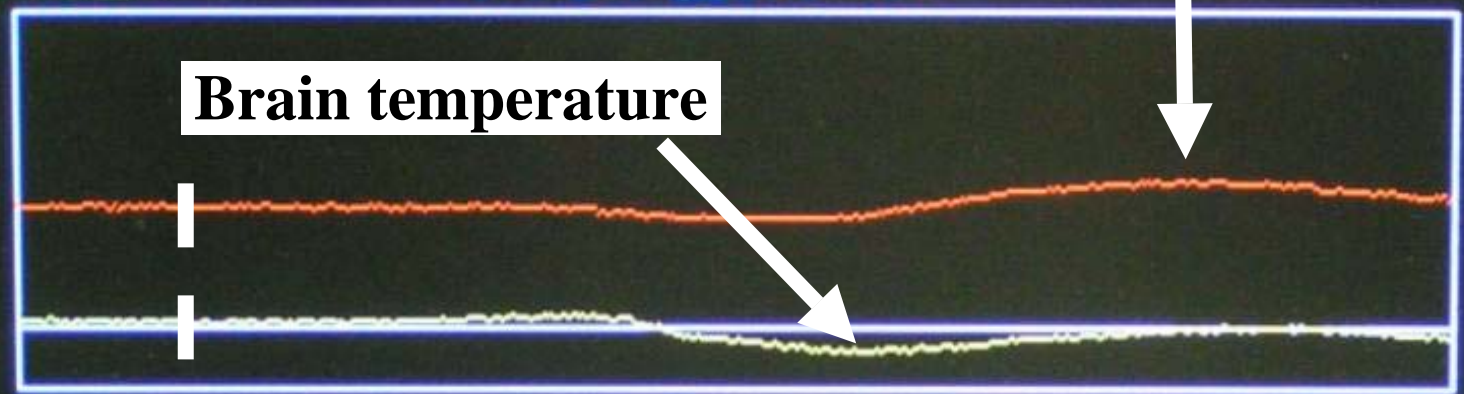
終了 EBC

リセット R

Experimental time 15:38:50

サンプル数

14083



**Fuzzy Control of Brain Temperature
by Water-Cooling System**

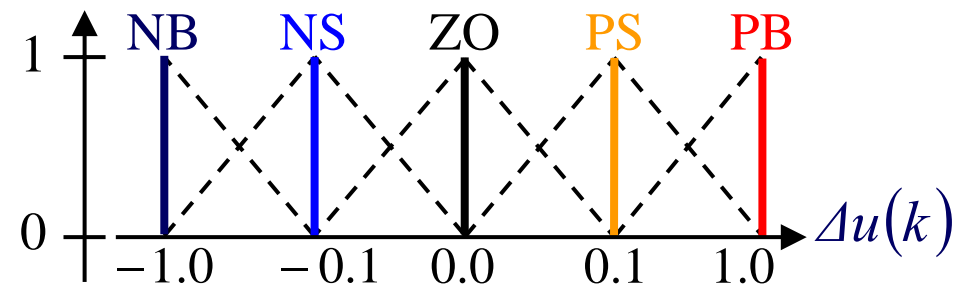
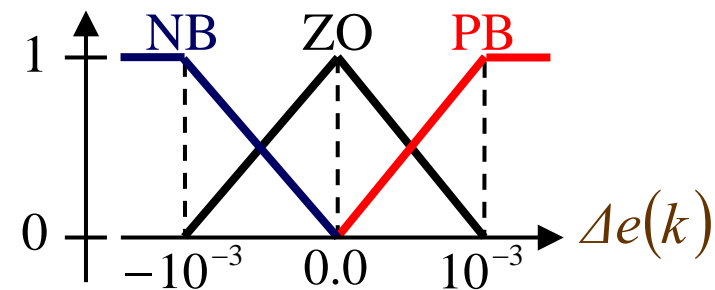
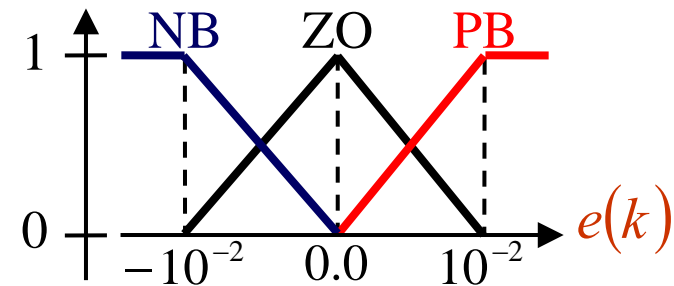
Membership functions and Fuzzy rule

For fuzzy controller-1

The antecedent

$\Delta u(k)$		$e(k)$			
		PB	ZO	NB	
$\Delta e(k)$	PB	PB	PS	ZO	
	ZO	PS	ZO	NS	
	NB	ZO	NS	NB	

The consequent

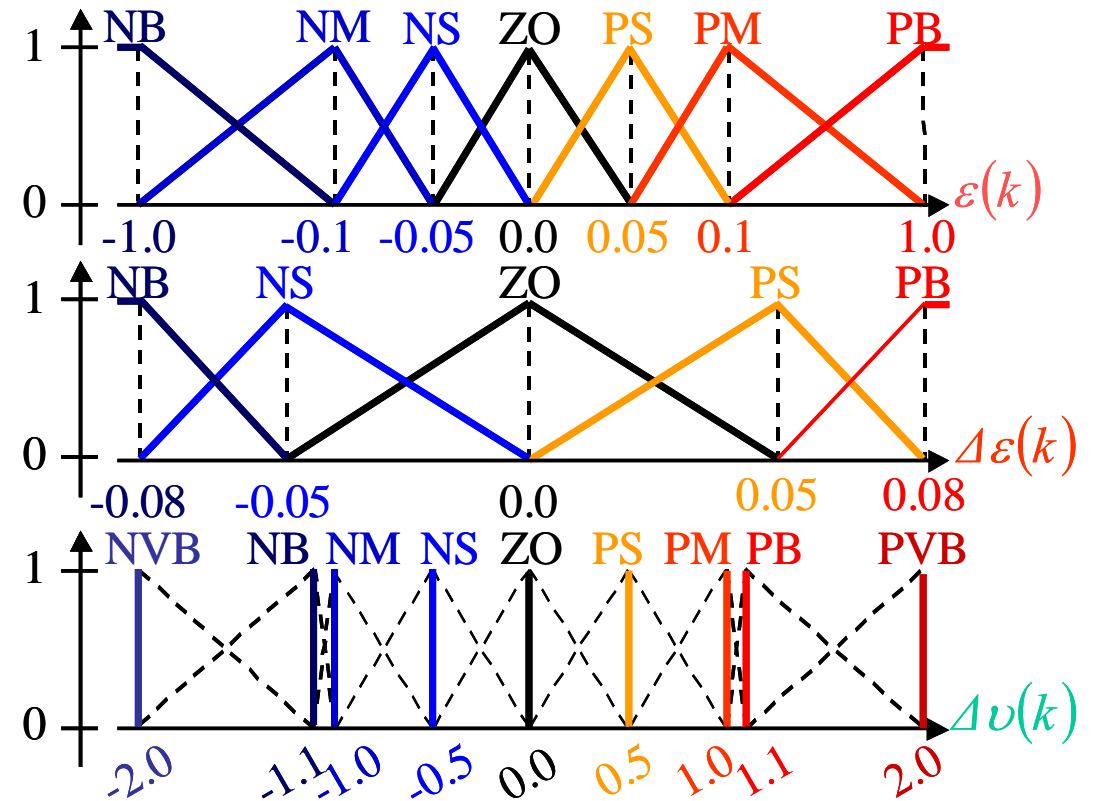


Membership functions and Fuzzy rule

For fuzzy controller-2

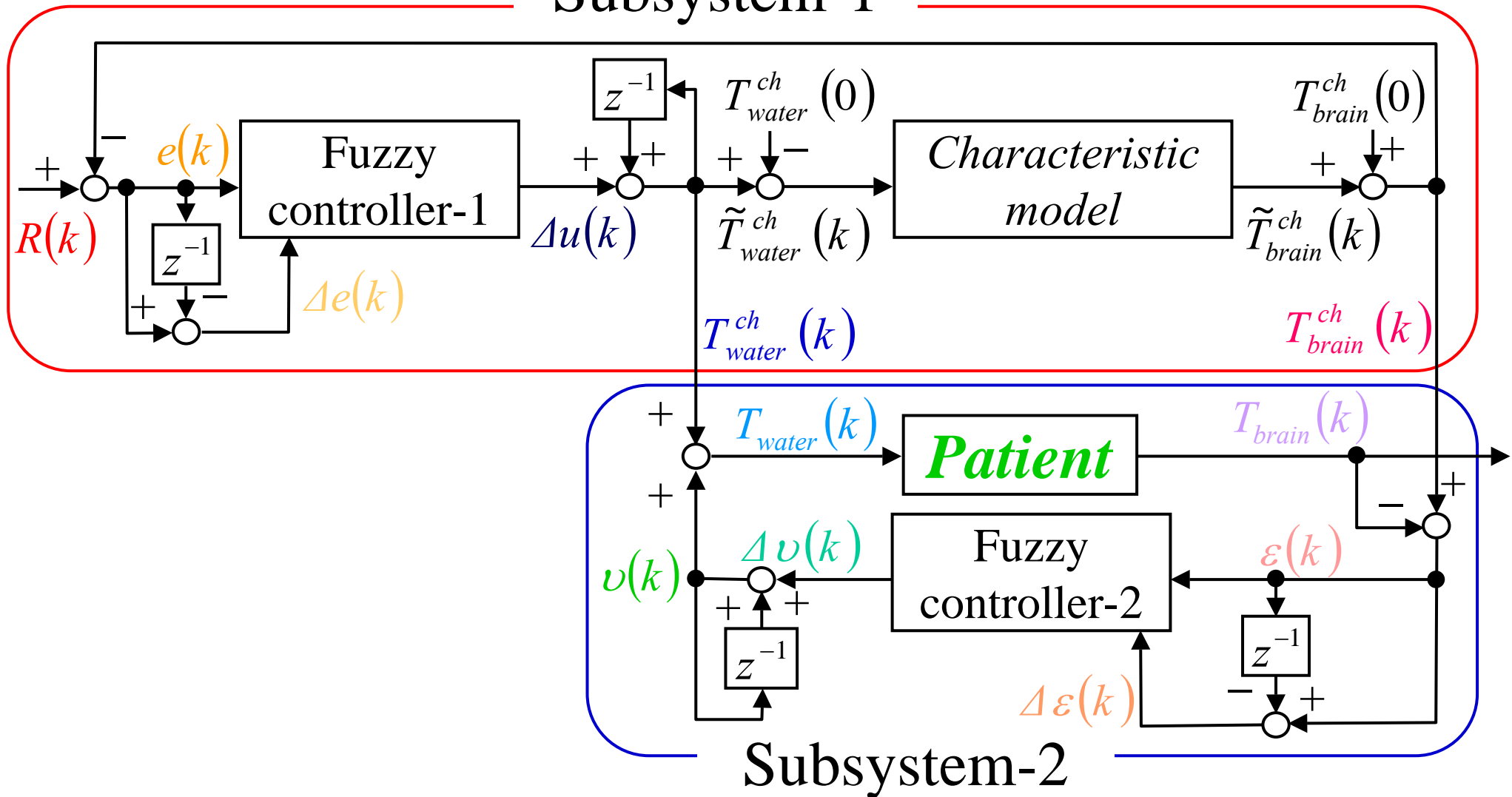
The antecedent

<i>The antecedent</i>		$\Delta v(k)$	$\varepsilon(k)$						
			PB	PM	PS	ZO	NS	NM	NB
<i>The antecedent</i>	$\Delta \varepsilon(k)$	PB	PVB	PVB	PS	ZO	PVB	PVB	NM
		PS	PVB	PVB	PS	ZO	PM	PB	NB
		ZO	PVB	ZO	ZO	ZO	ZO	ZO	NVB
		NS	PB	NB	NM	ZO	NS	NVB	NVB
		NB	PM	NVB	NVB	ZO	NS	NVB	NVB
			<i>The consequent</i>						

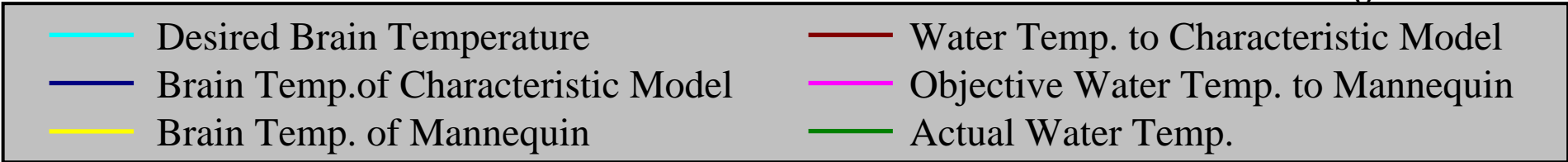
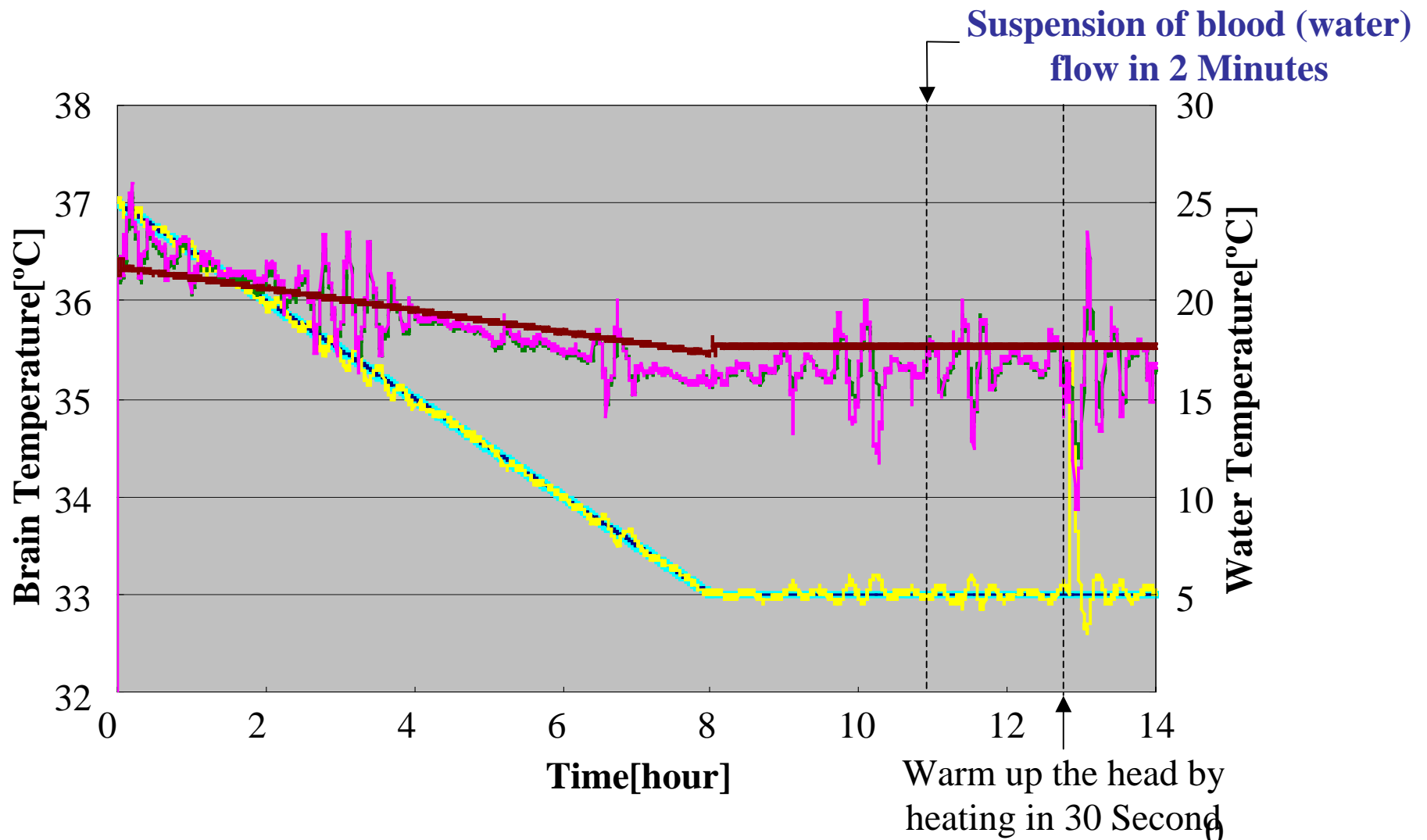


Block Diagram of Fuzzy Control System

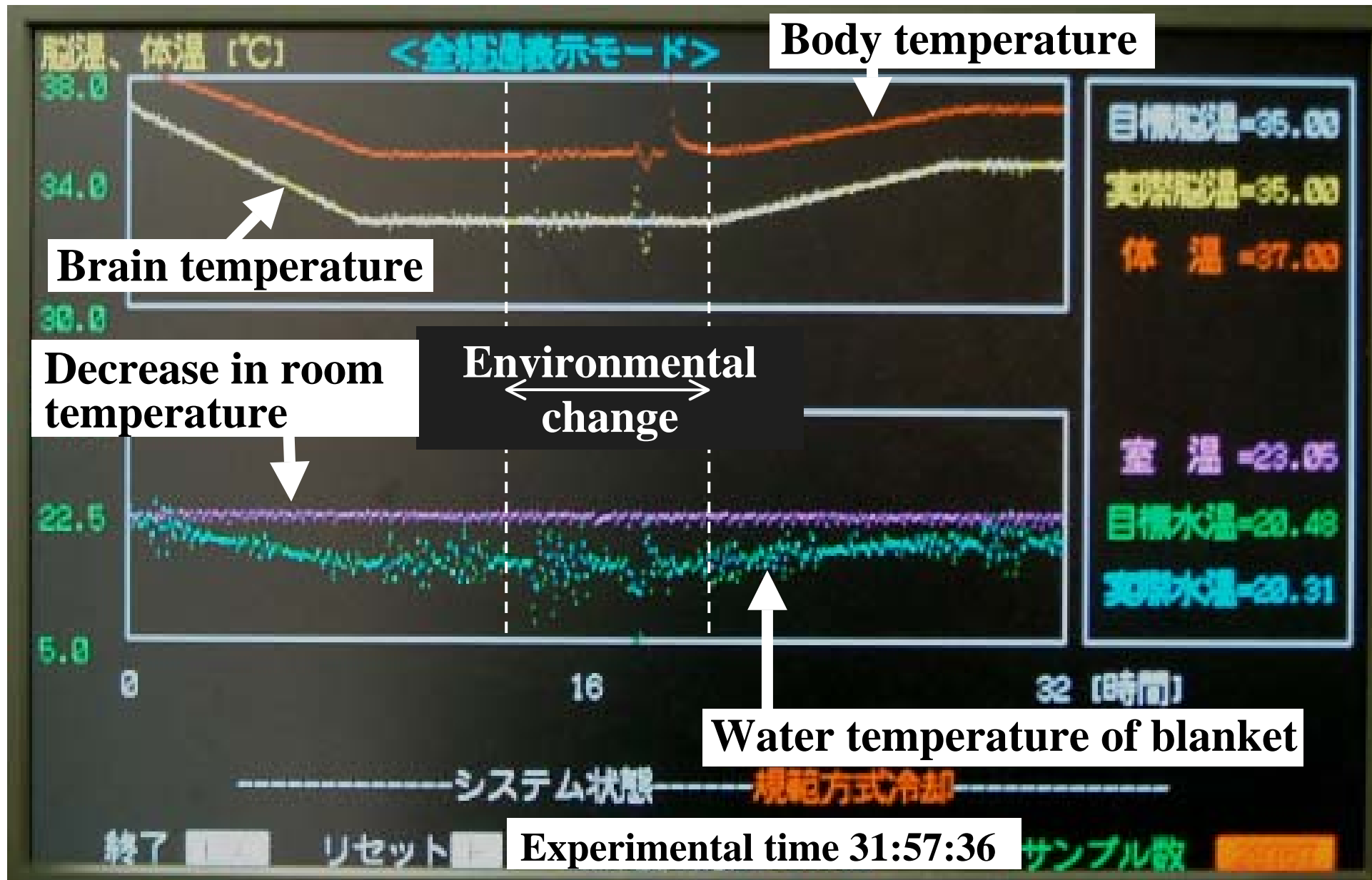
Subsystem-1



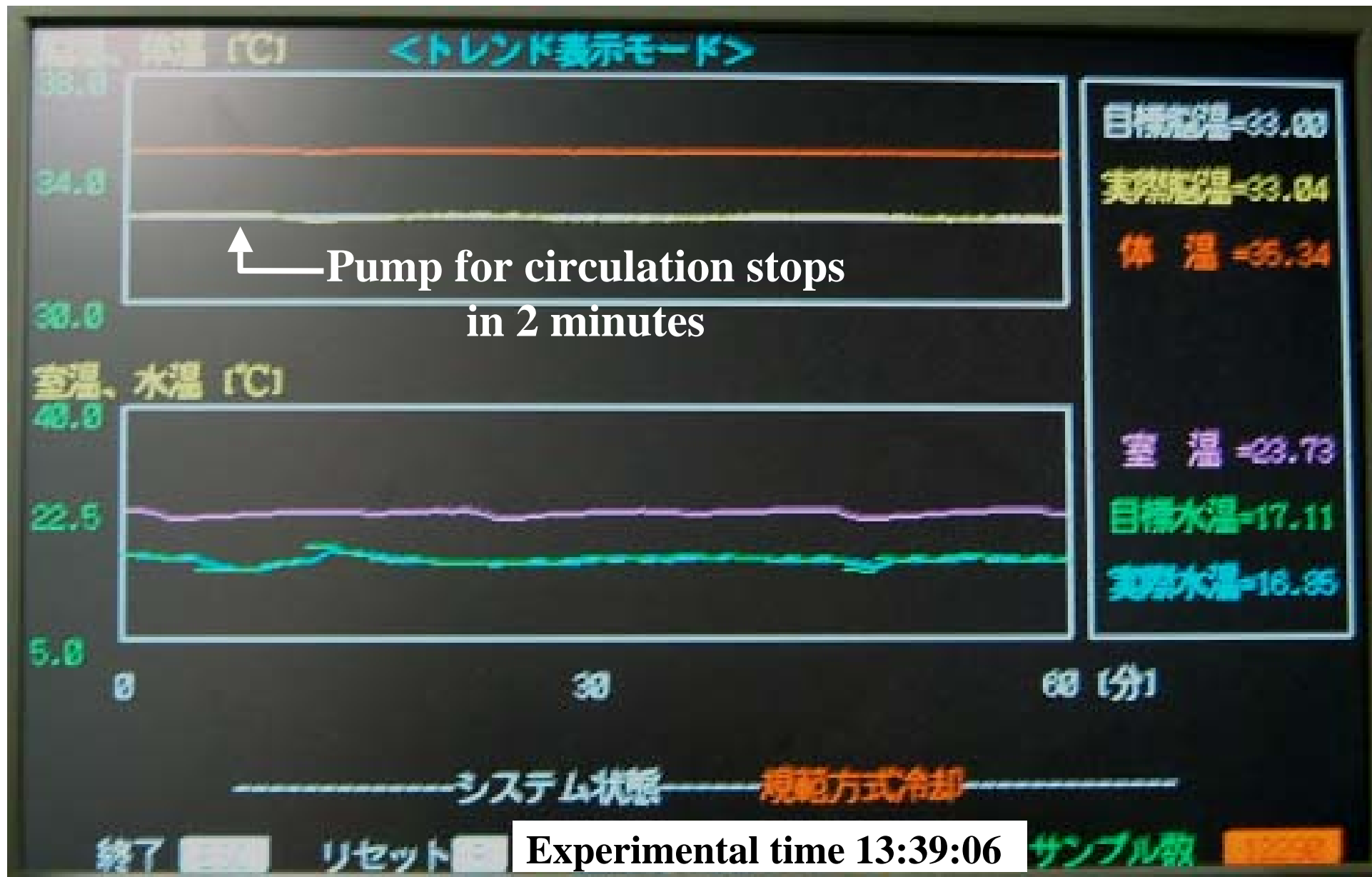
Experimental Result during Cooling and Stable Period



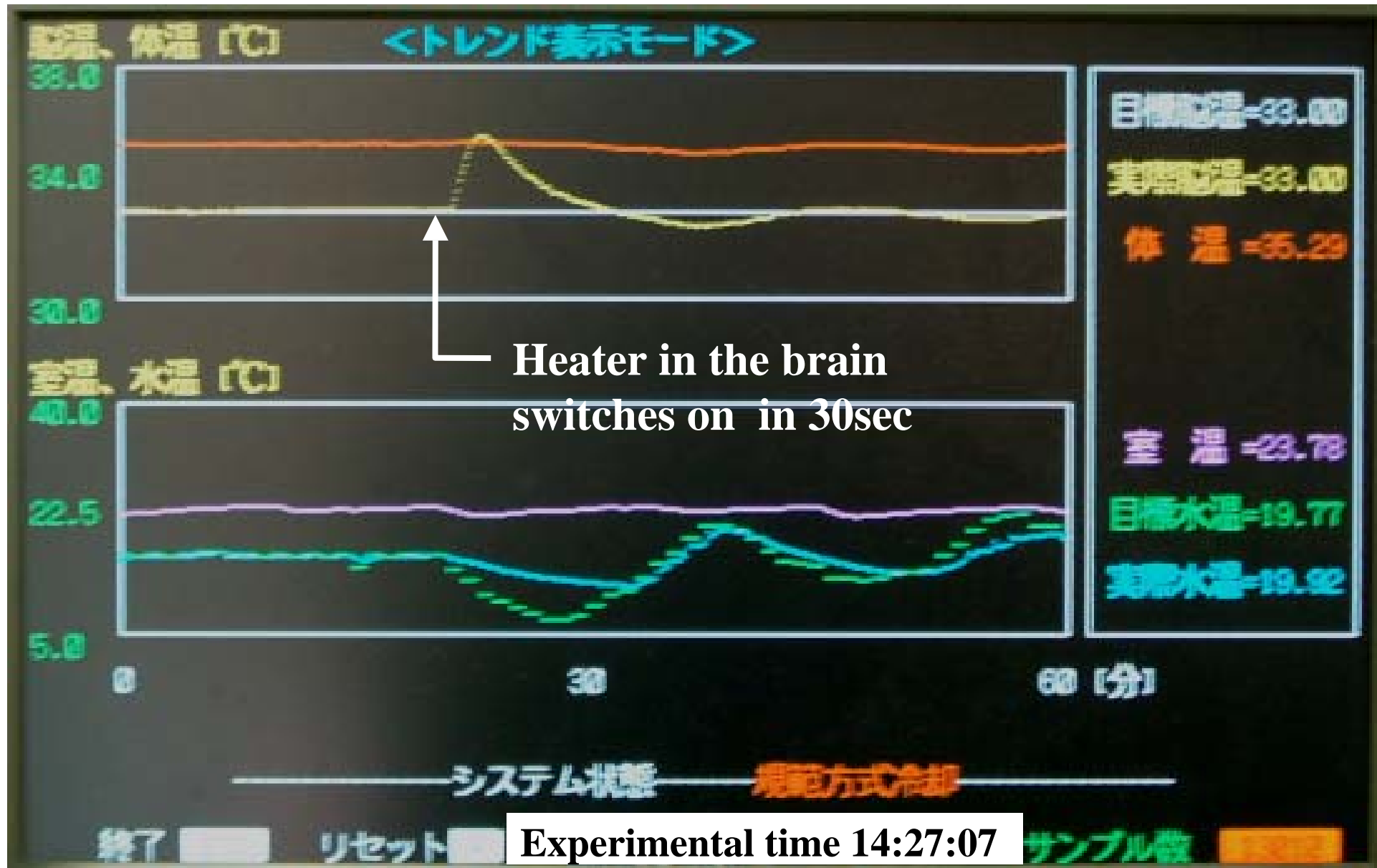
Whole Experimental Result



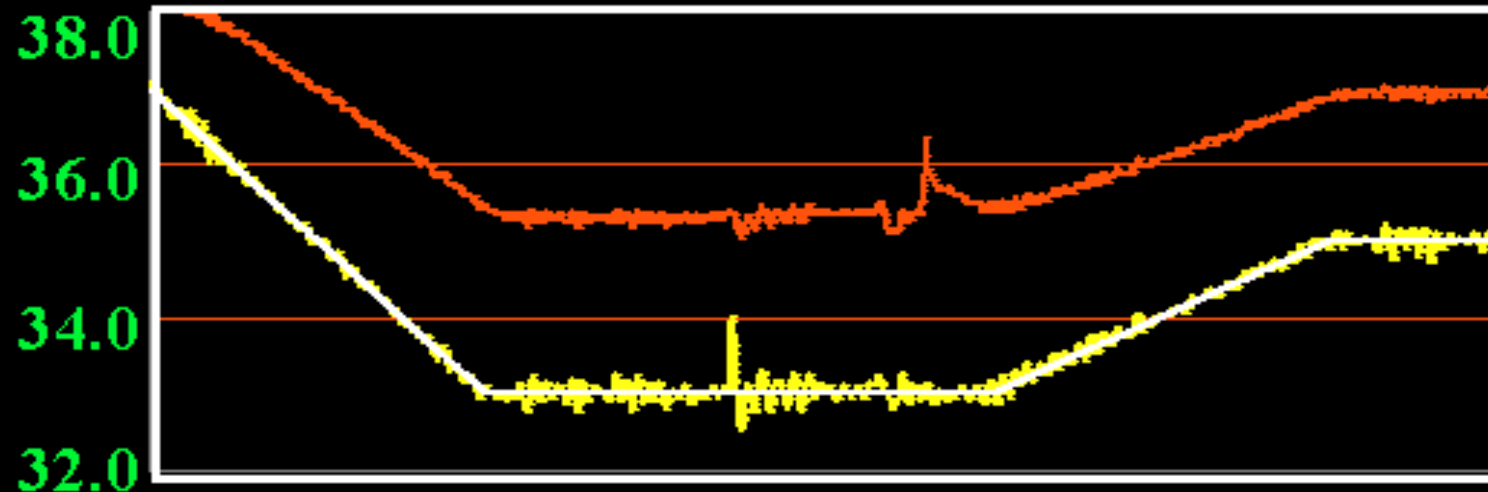
Blood Flow Change



Metabolism Change in Brain



脳温、体温[°C] <全経過表示モード>

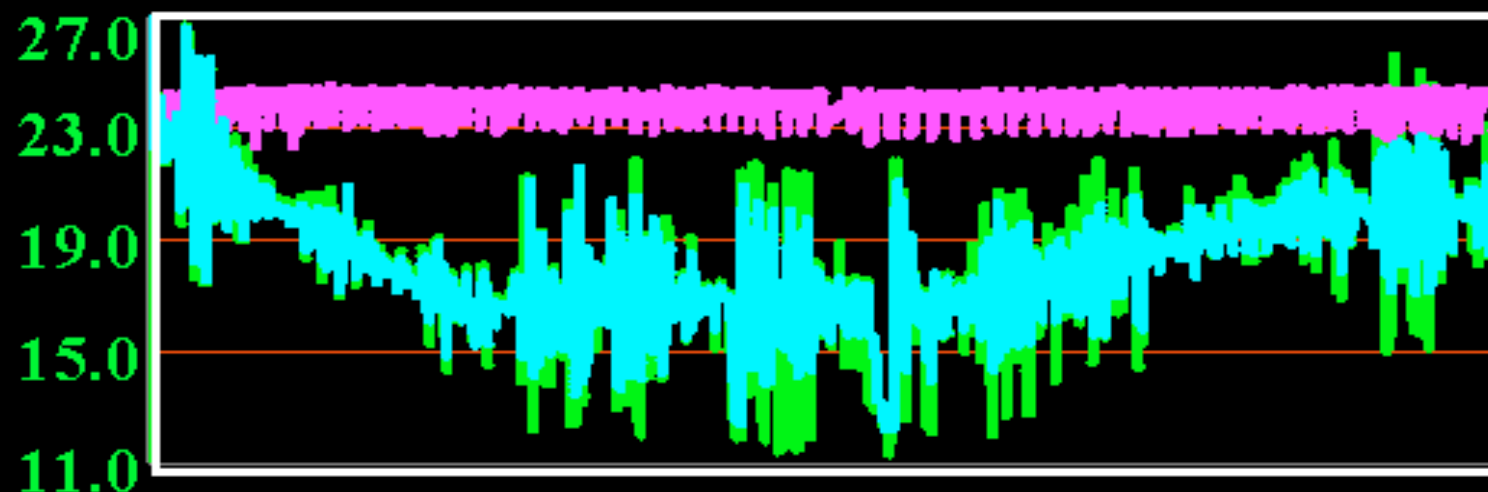


目標脳温=35.00

実際脳温=35.05

体温 =36.95

室温、水温[°C]



室温 =23.44

目標水温=20.48

実際水温=20.26

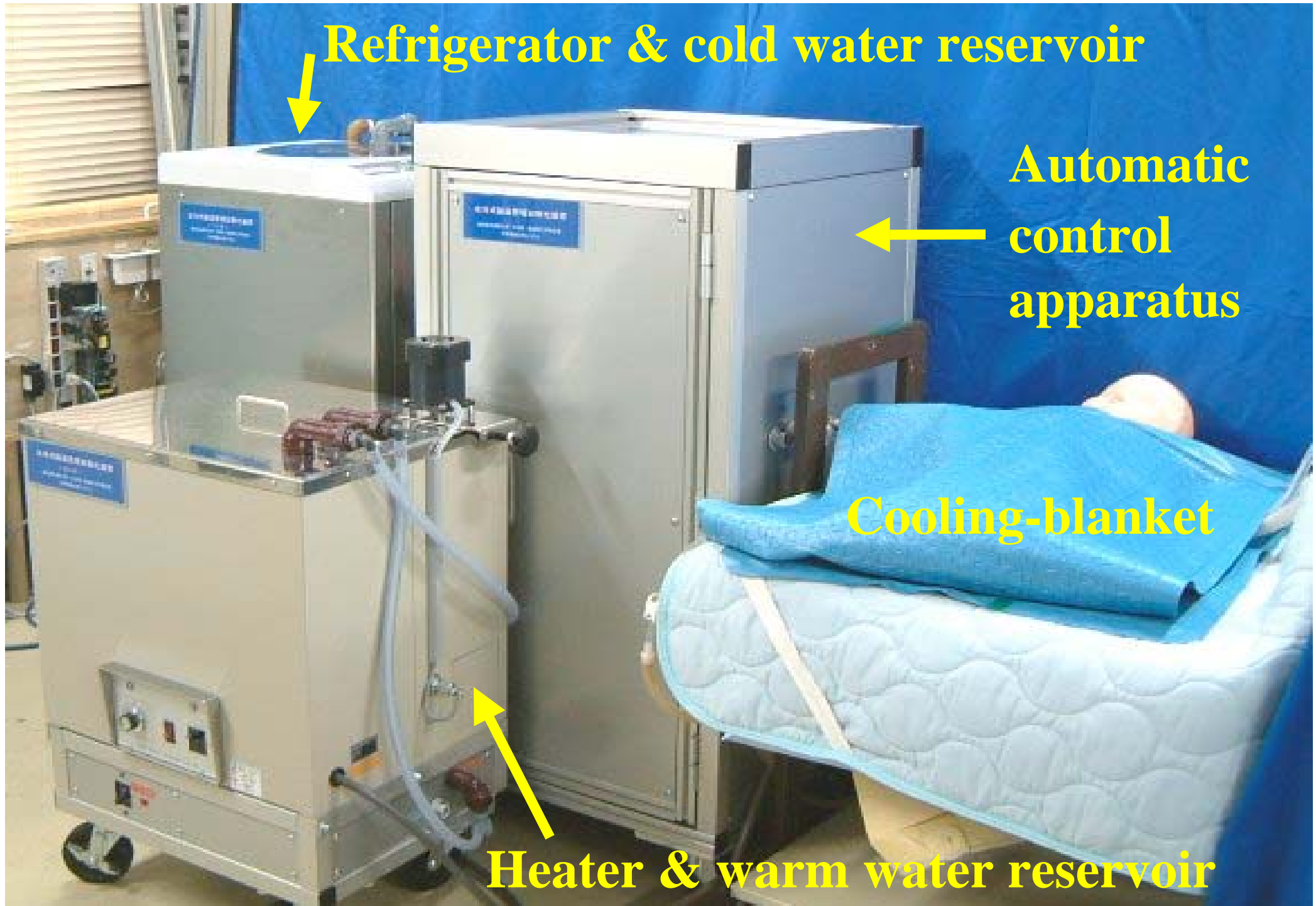
0 16 32 [時間]

終了 ESC

リセット R

Experimental time 32:00:00

サンプル数 28827



Refrigerator & cold water reservoir

**Automatic
control
apparatus**

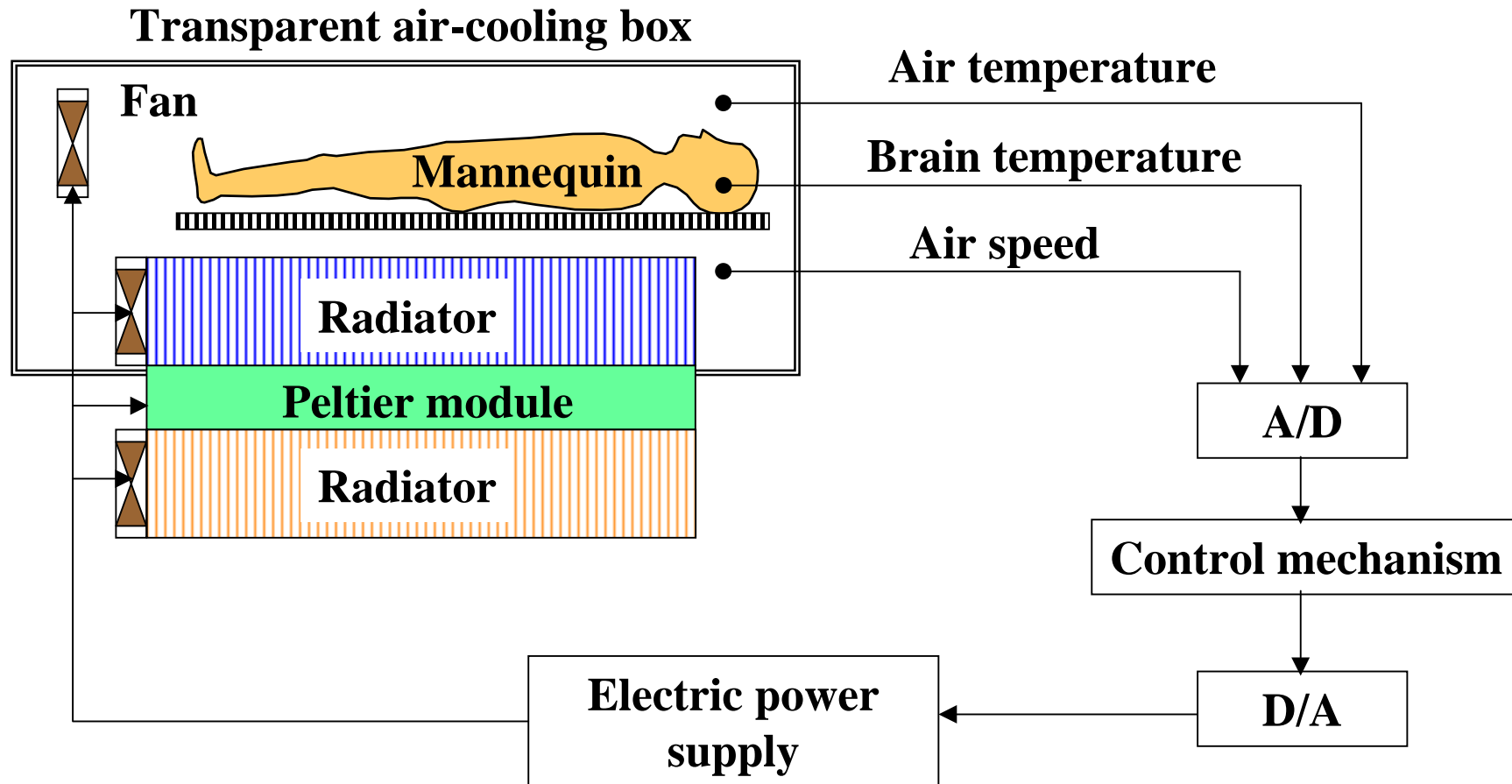
Cooling-blanket

Heater & warm water reservoir



**Control of Brain Temperature
by Air-Cooling System**

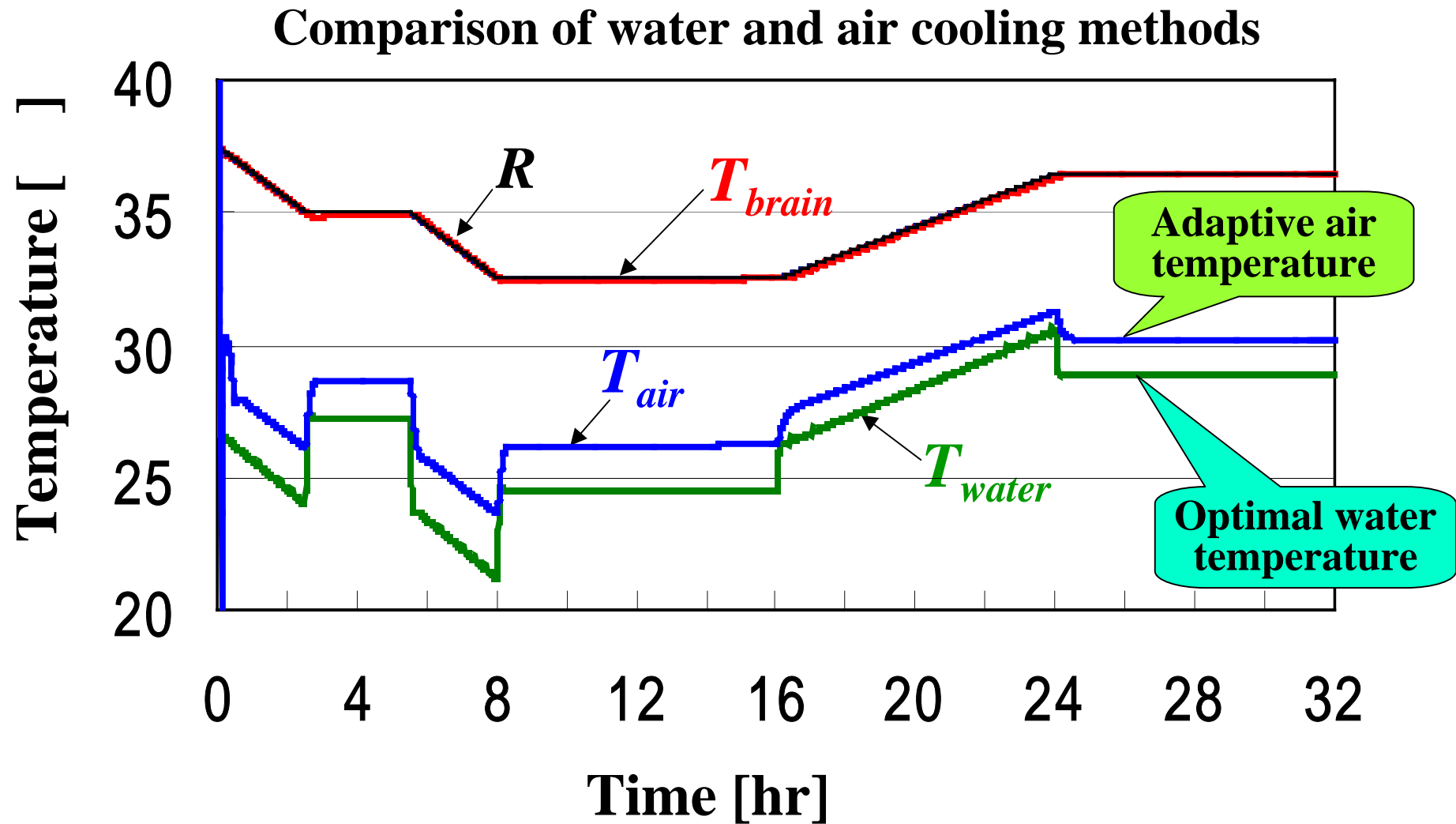
Air-cooling Incubating System



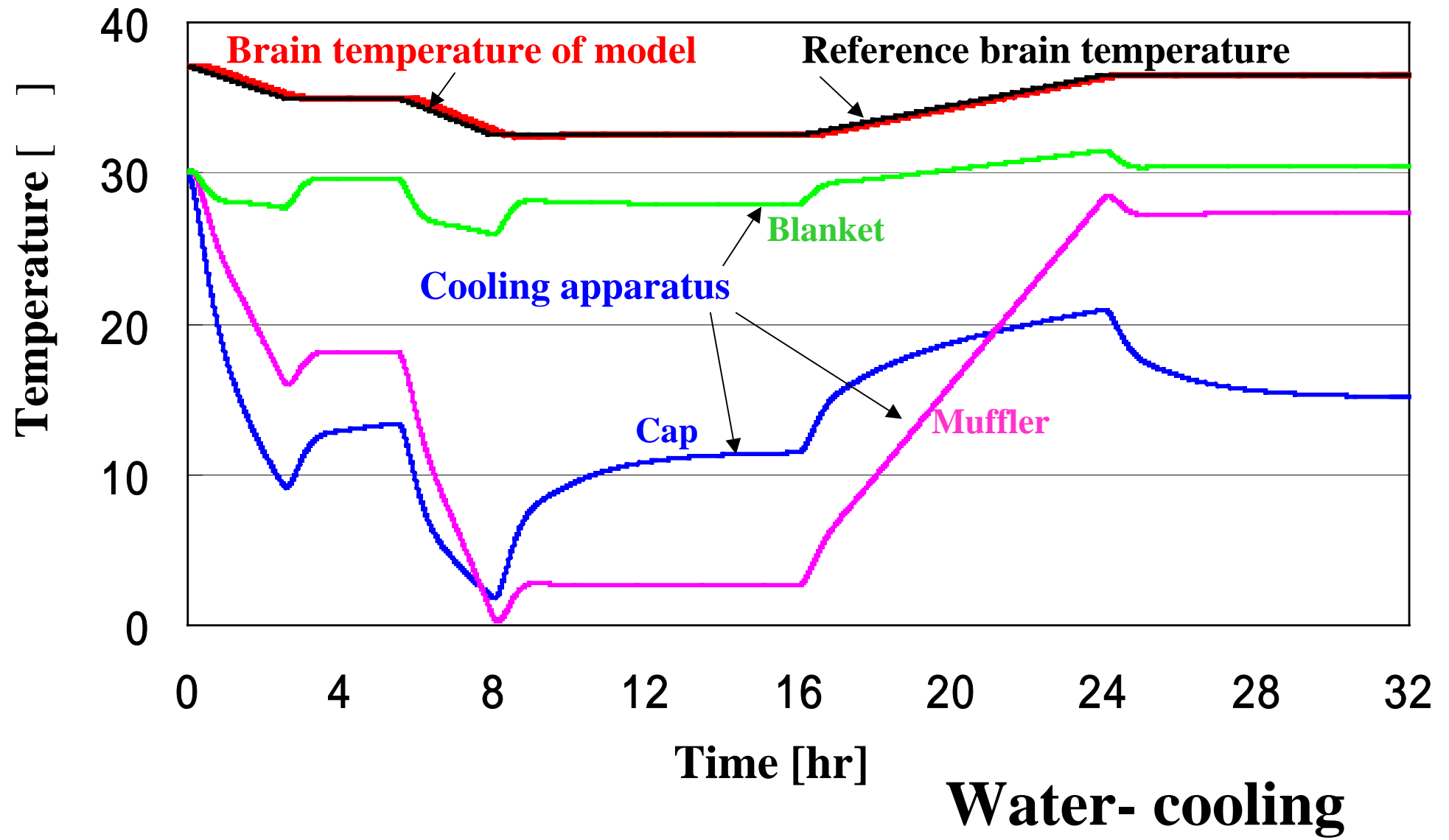
Automatic Air-Cooling Incubating System for Brain Hypothermia Treatment



Simulation Result



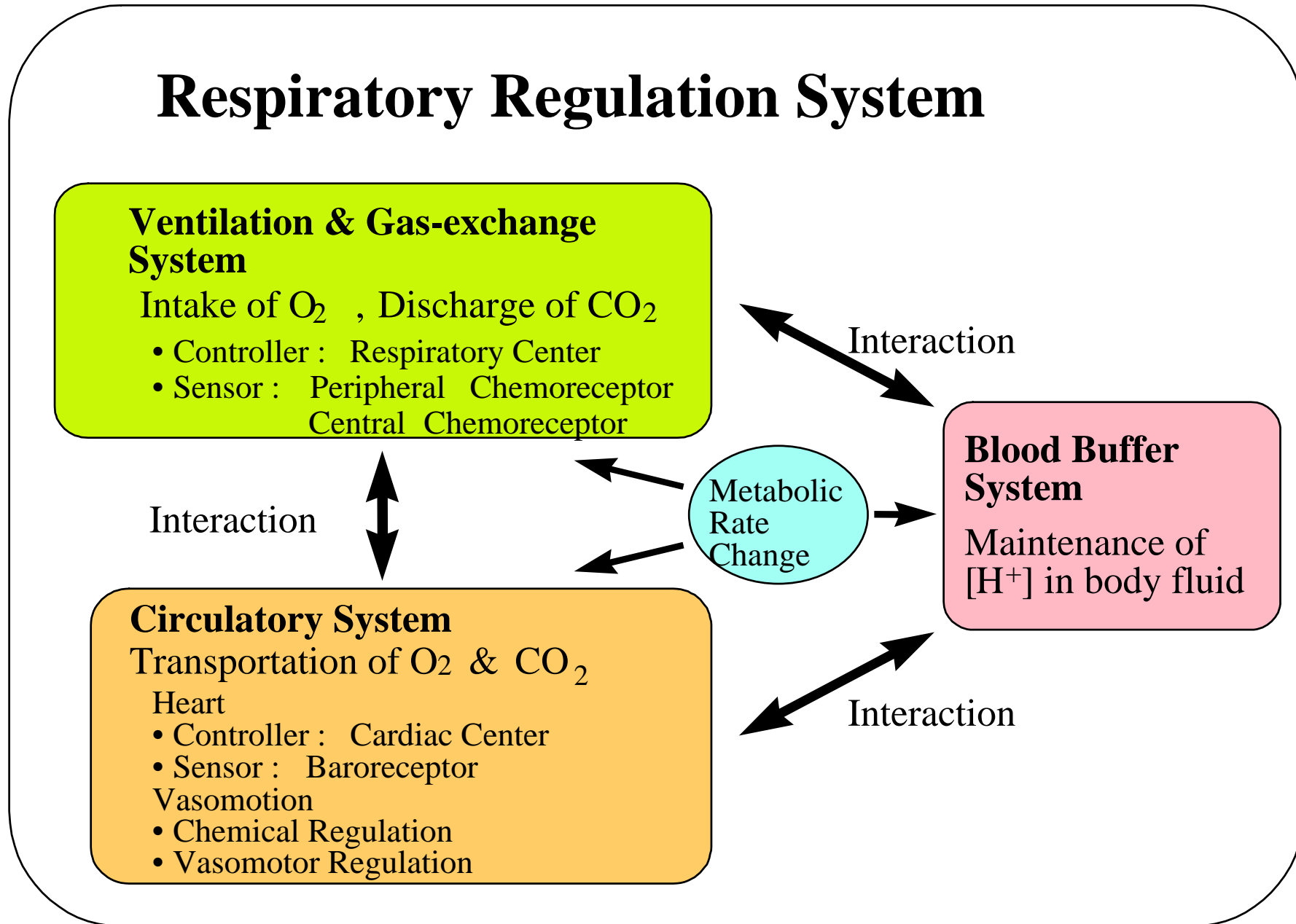
Control using Solution by Optimal Calculation





**Automatic Control of Respiration to Deal
with Difference of Individual
Characteristics**

Respiratory Regulation System



Points of Design of the Control System

Respiratory Regulation System

- Non-linearity
- Chronic Change
- Individuality
- **Change of Environment**

↓ In order to control

- Understanding by Detection of Its Characteristics
- Design of Control System based on Detected Characteristics

**Deviations of the Parameters
of the Mathematical Model**

**Introduction of an
“Adaptive System”**

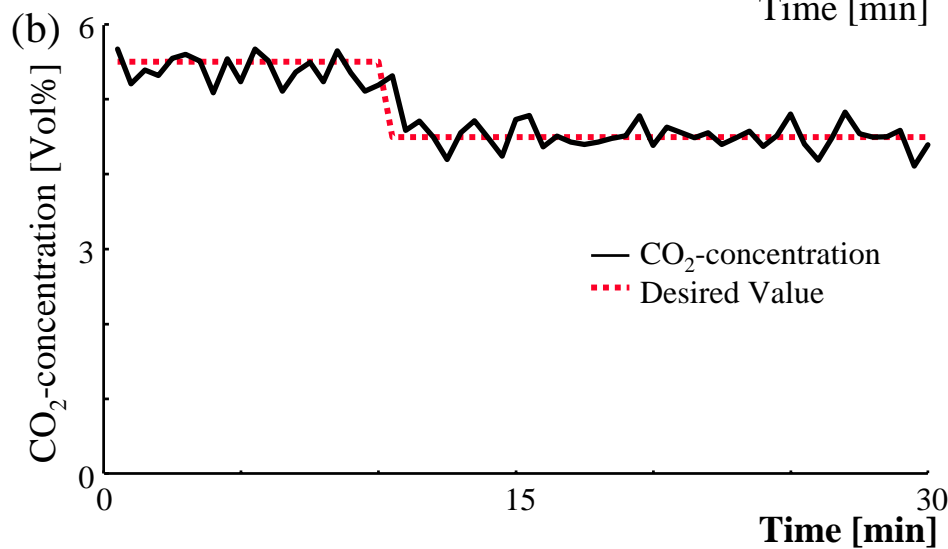
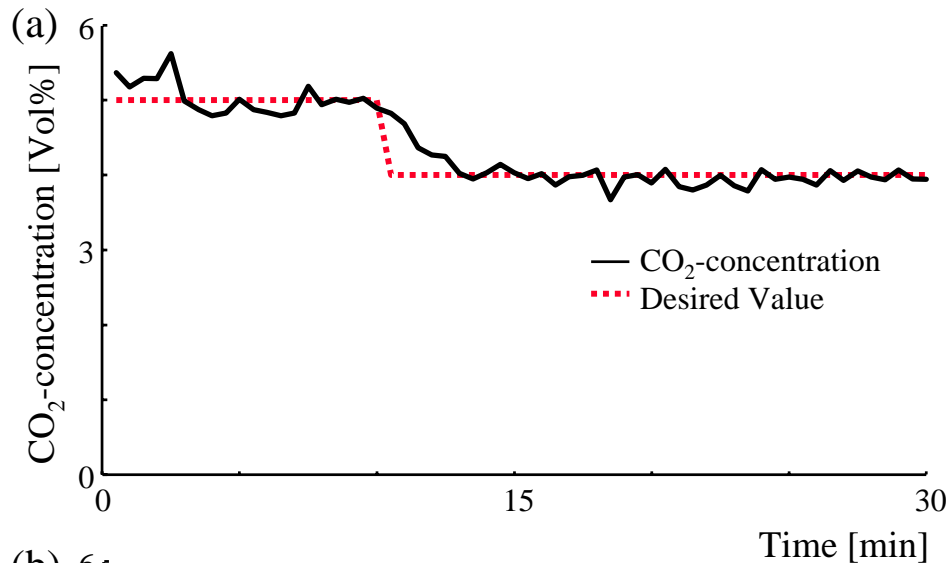


Interior view of the all-built-in-one type respirator



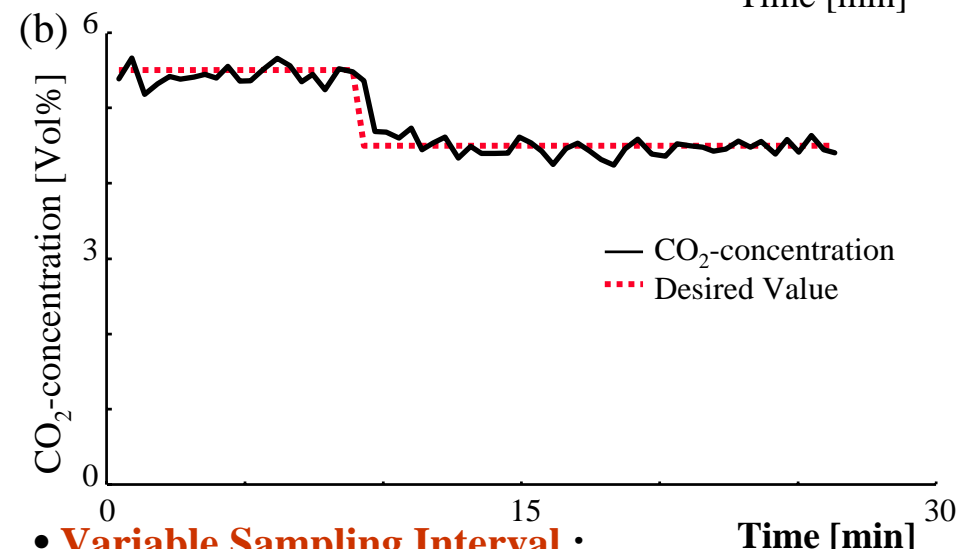
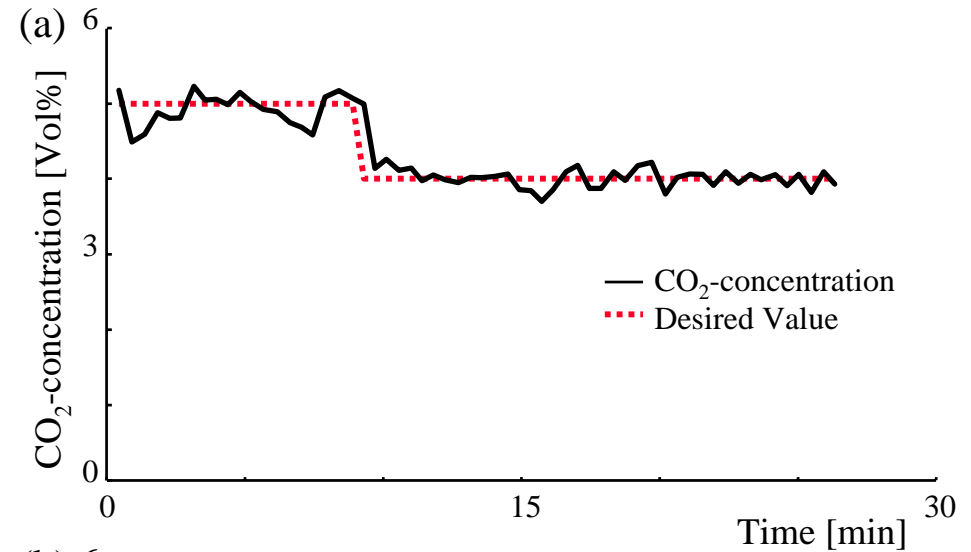
Developed all-built-in-one type respirator

Controlled Respiration



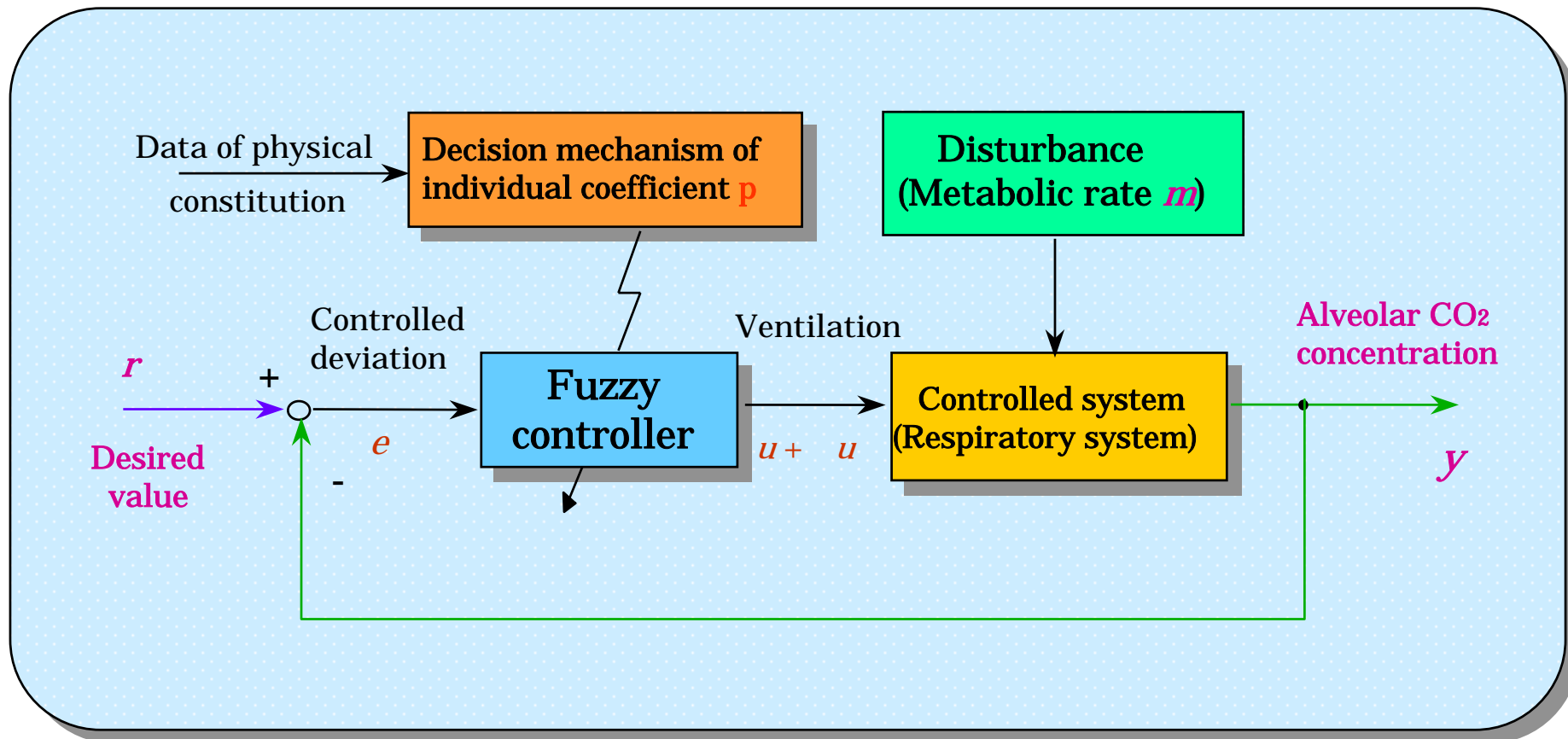
- **Sampling Interval** : 30 [sec]
- **Respiration Rate** : 16 [times/min]
- **Period of Experiment** : 30 [min]

Assisted Respiration

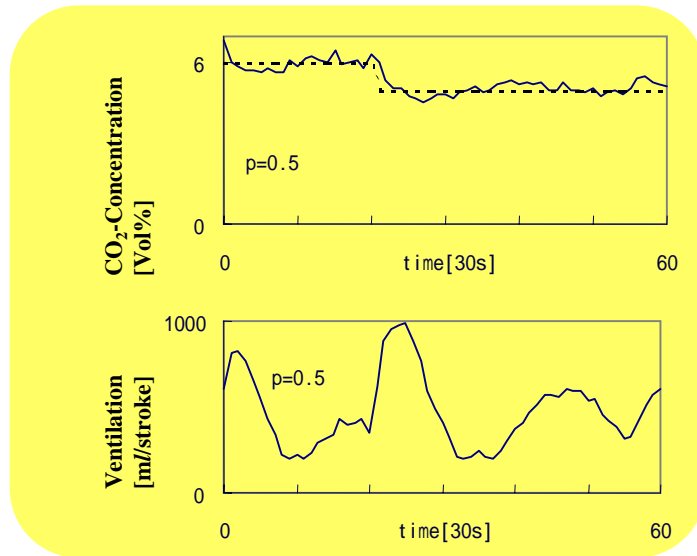


- **Variable Sampling Interval** :
Every 7 Ventilatory Periods (23.3 ~ 30.0 [sec])
- **Respiration Rate** :
Changed at Random from 14 to 18 [times/min]

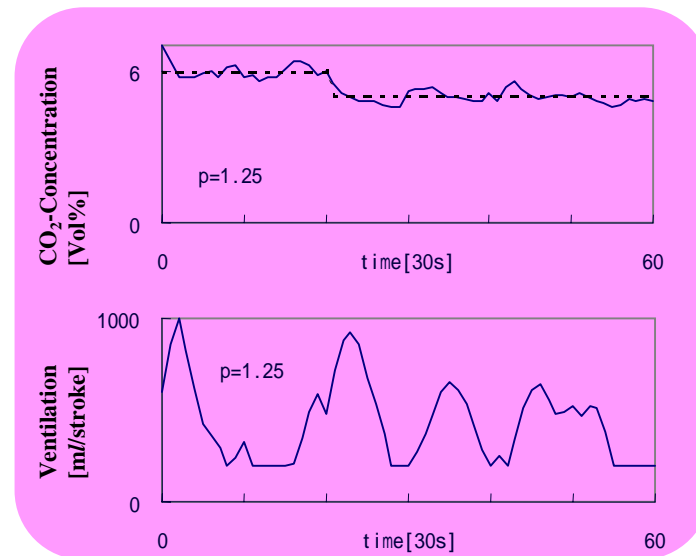
Fuzzy respiratory control system with respect to difference of individuals



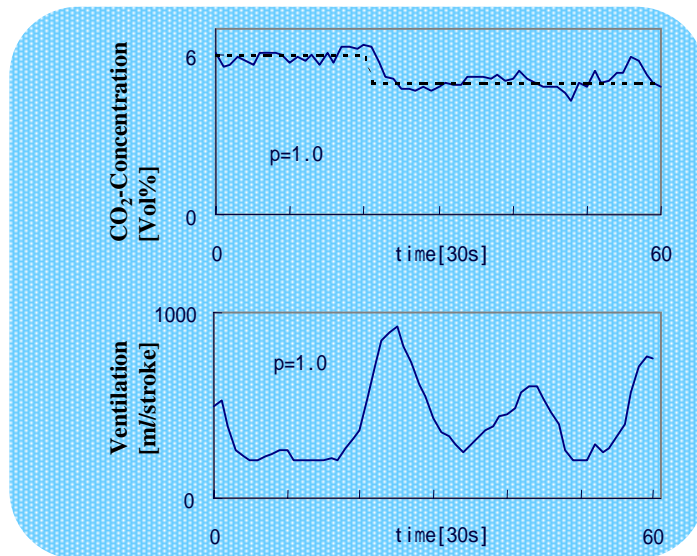
Fuzzy control of the same subject with different constitutional coefficients



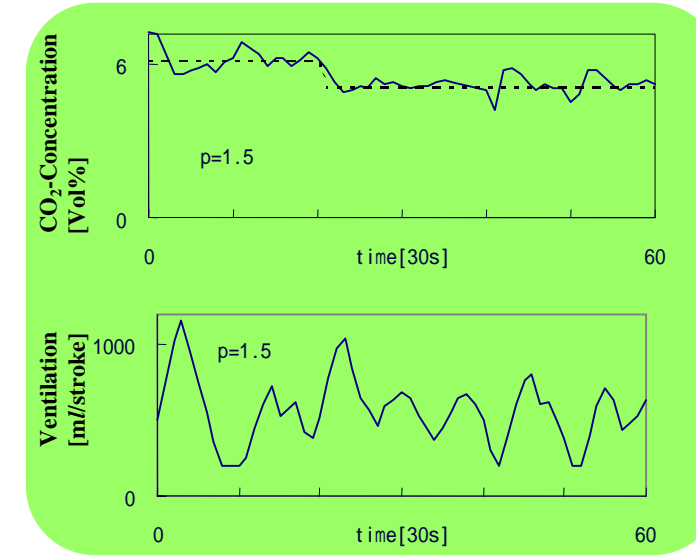
(a) $p=0.5$



(c) $p=1.25$



(b) $p=1.0$



(d) $p=1.5$

**Control of Intracranial Pressure
by Administration of Mannitol based
on Mathematical Model**

Background and Aim

(Traumatic brain injuries , brain tumors, etc.)

Intracranial hypertension caused by brain edema

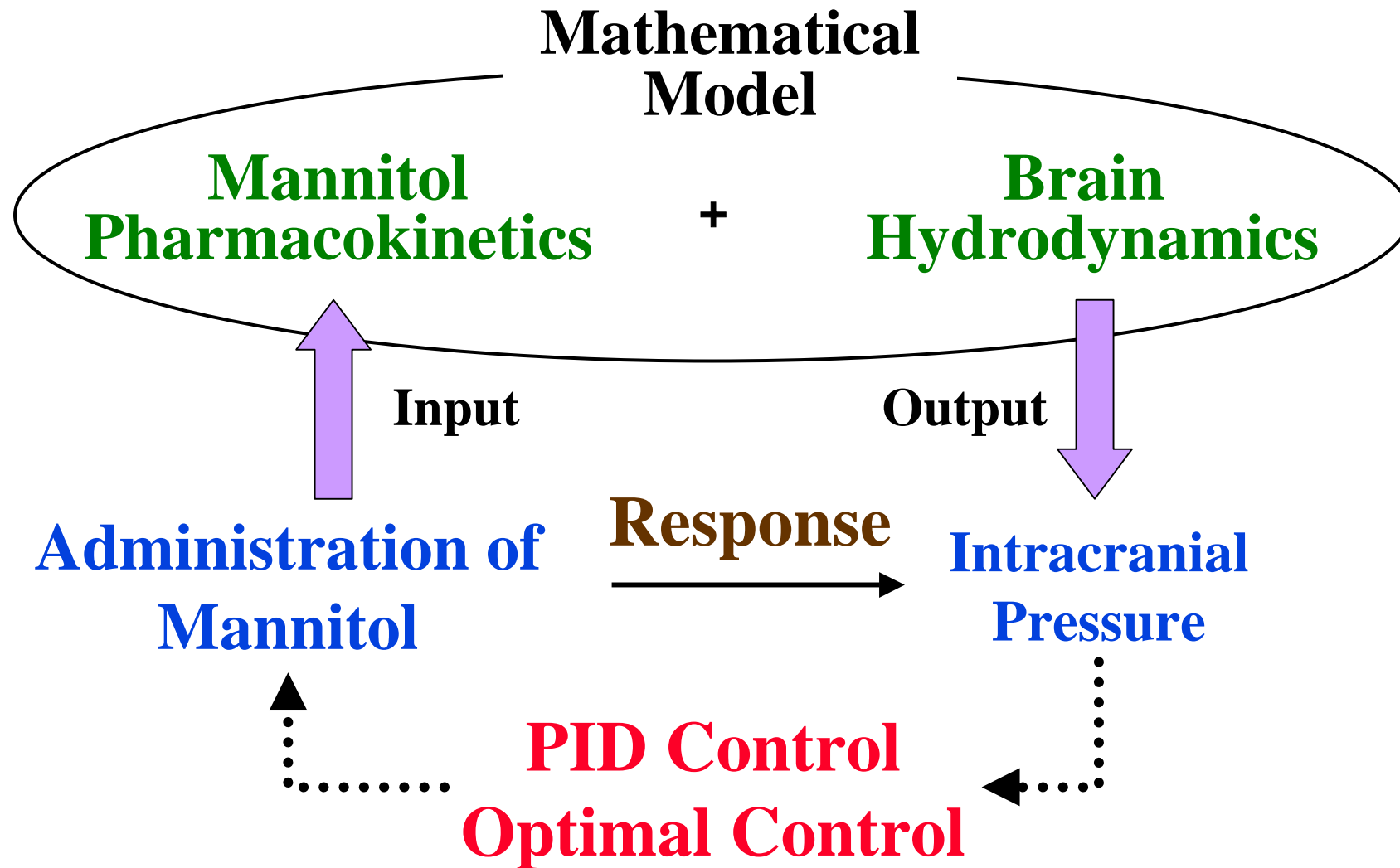
Iterative administration based on experience of doctors



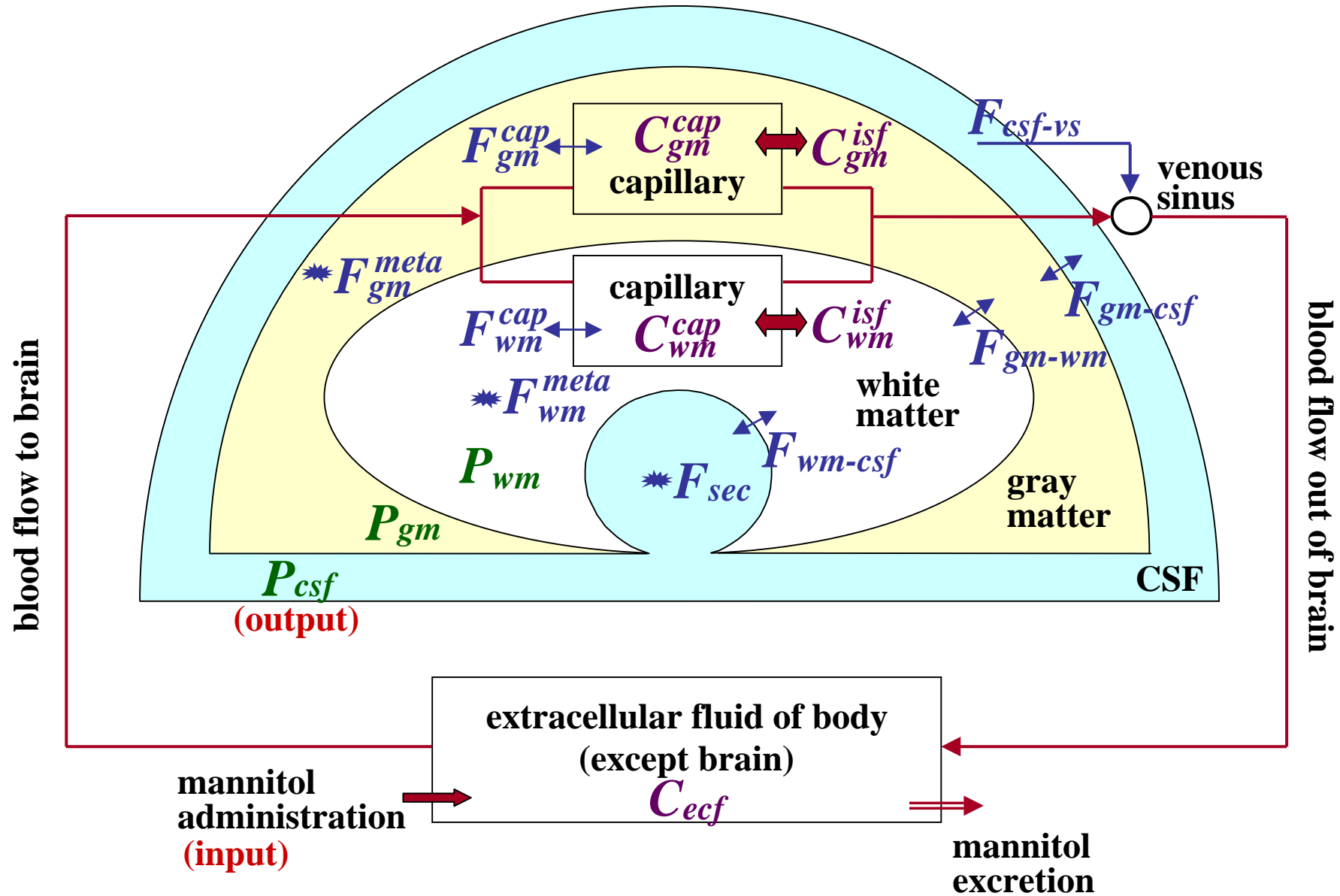
**Theoretical
Analysis**

- **Determination of most effective administration process**
- **Dynamical prediction of intracranial pressure**

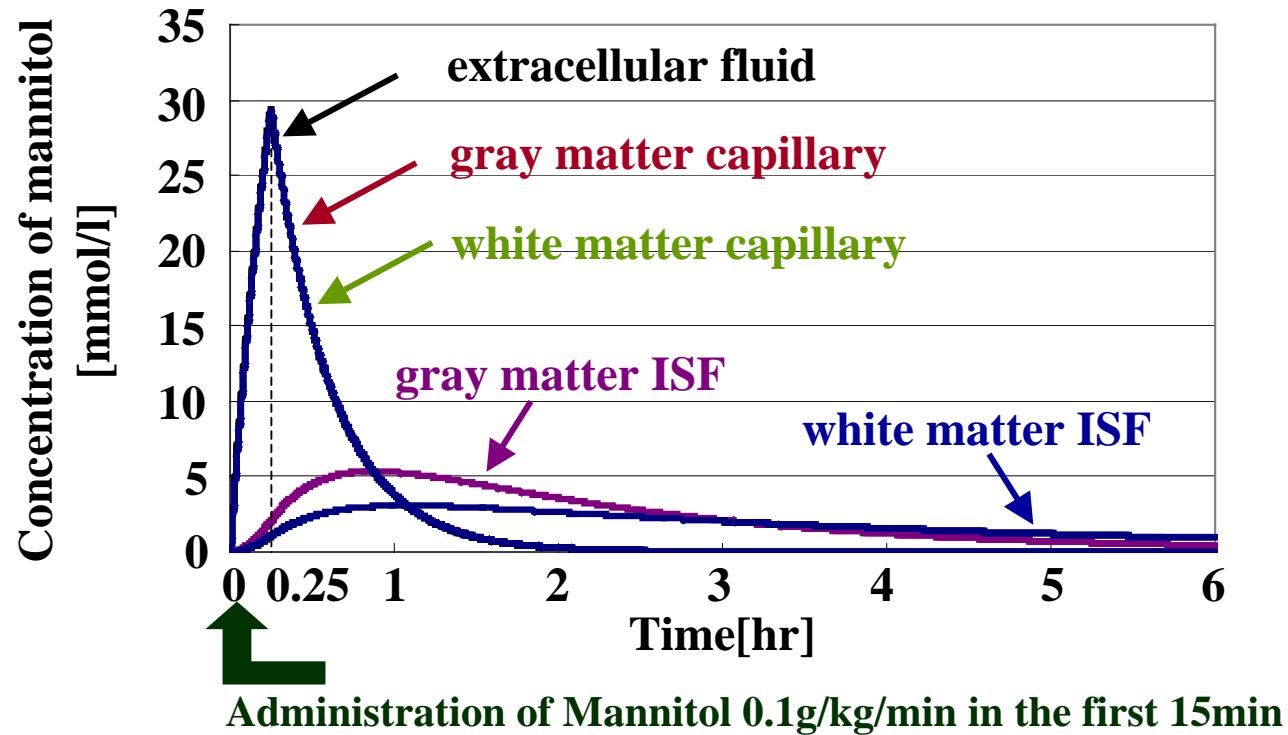
Method



Schematic Representation of Model

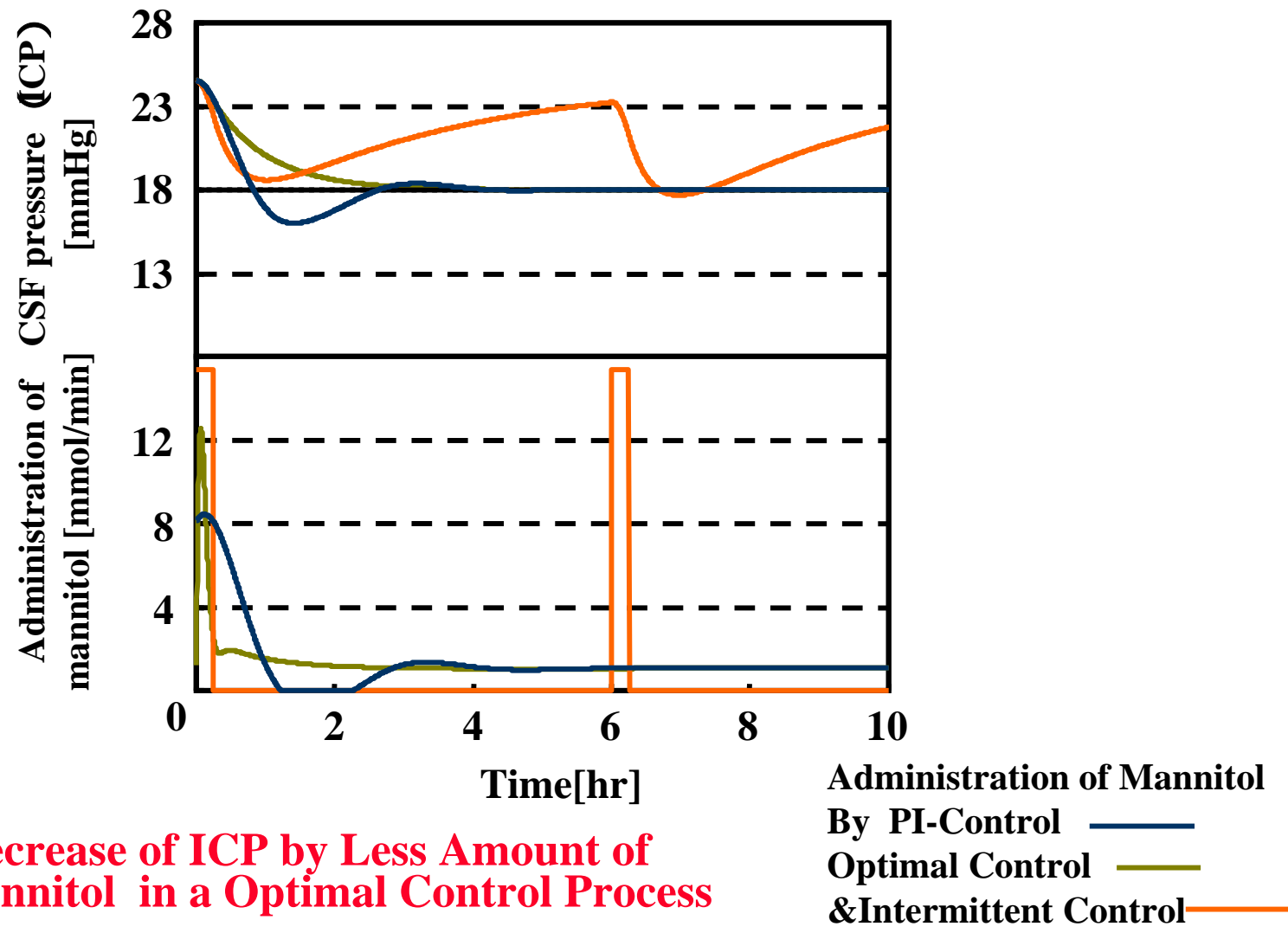


Dynamics of Mannitol Concentration in a Bolus Administration



Mannitol concentration of extracellular fluid, gray matter capillary and white matter capillary. They decrease exponentially after their peak on the last moment of infusion.

Comparison of Different Methods by Simulation



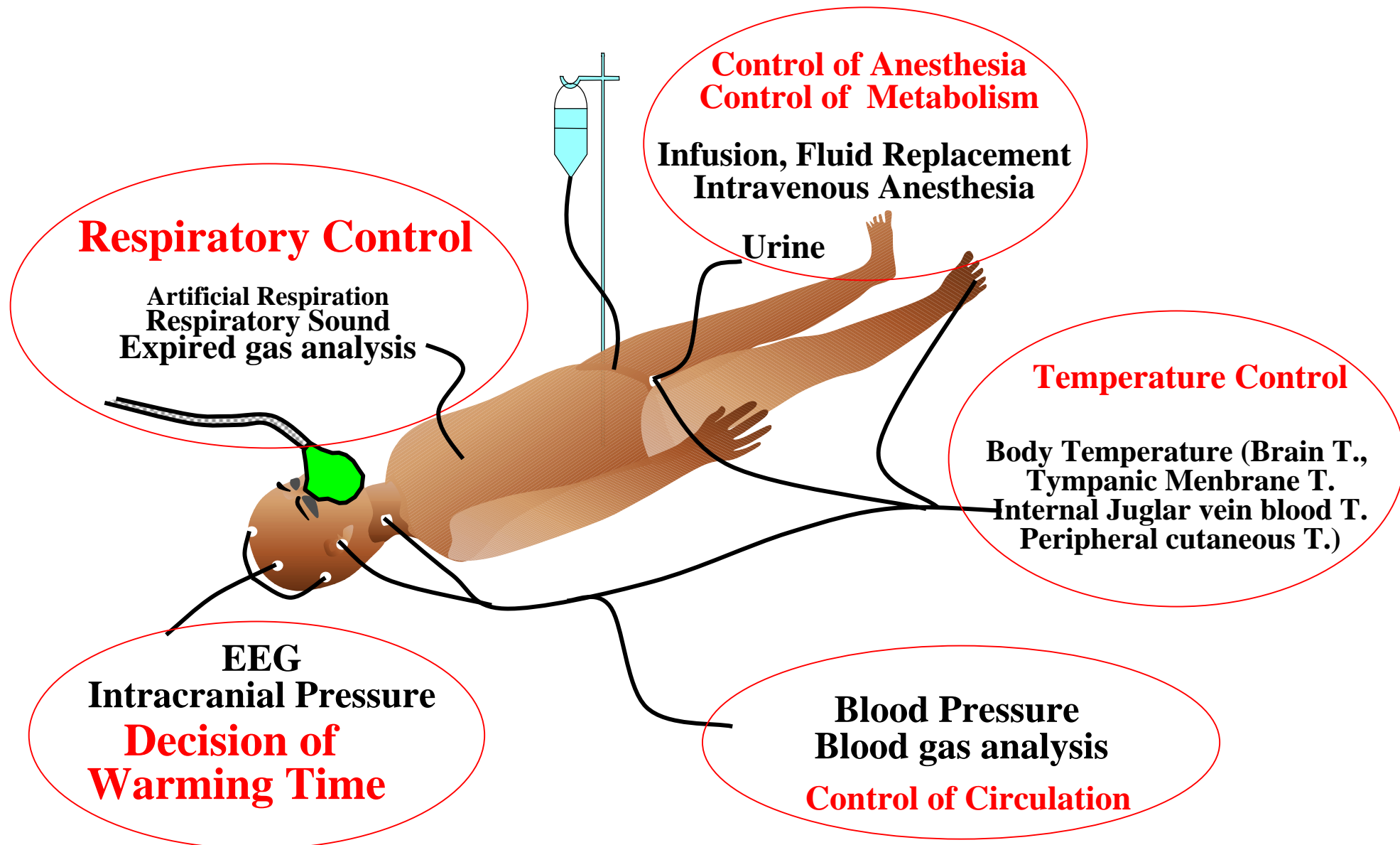


**On-line Monitoring of parallel
Physiological Data**



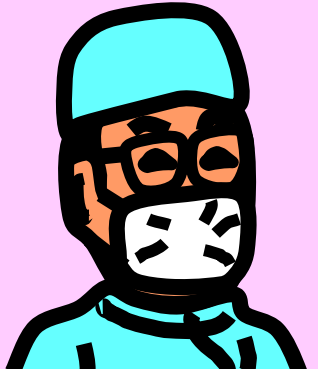
Monitoring System of Parallel Physiological Data

Conventional Monitoring of Physiological State

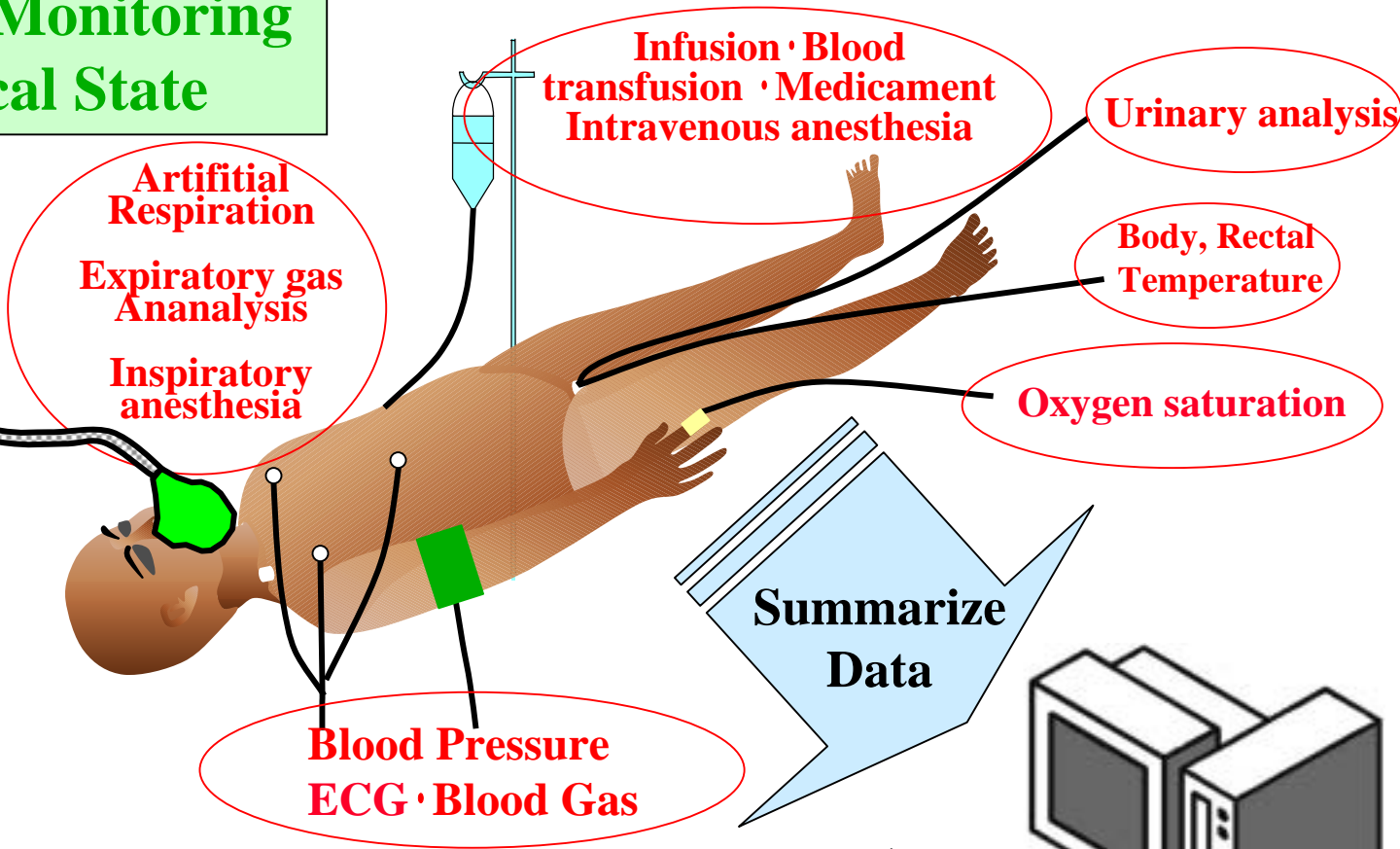


Comprehensive Monitoring of Physiological State

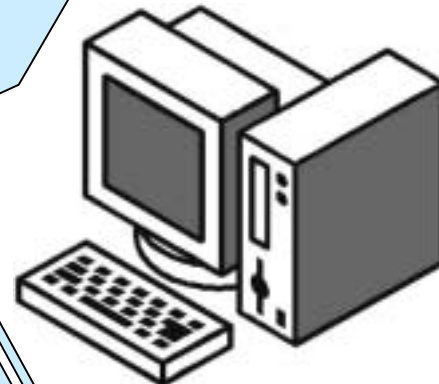
Final Decision and Treatment



Anesthesiologist



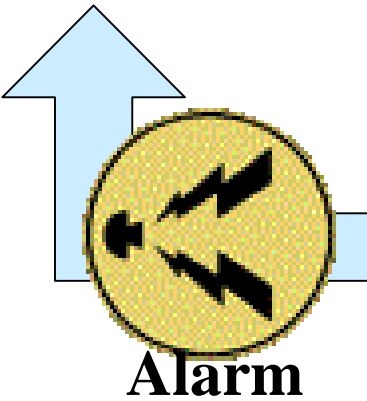
Summarize Data

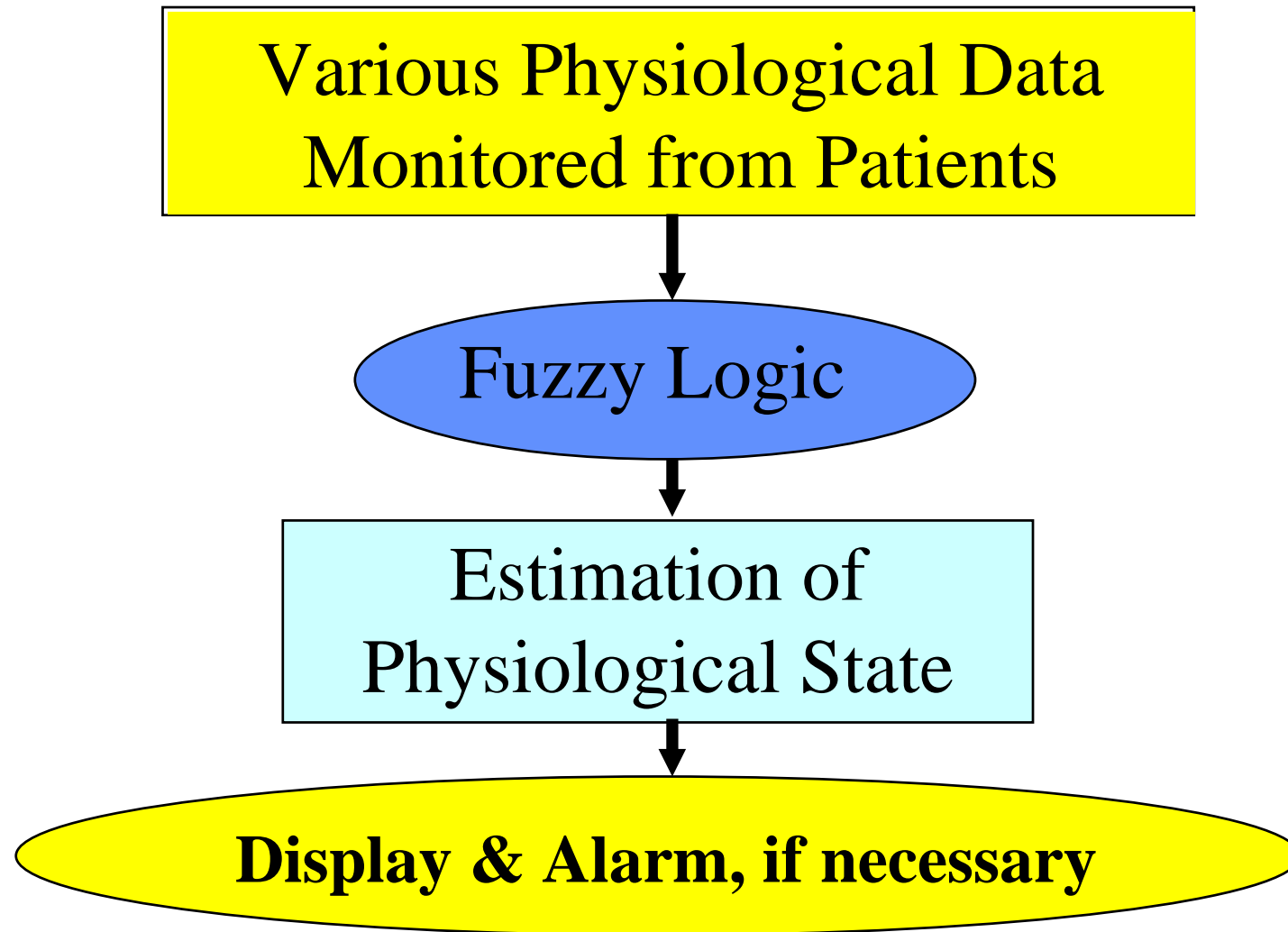


Physiological State

Inference, Decision & Description

Indication by Simple Expression





Evaluation and Alarming System