Cardiac Digital Twins: from Code to Care



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IMPERIA

What is atrial fibrillation?

Atrial fibrillation (AF) is a fast, irregular heart rhythm caused by chaotic activity in the upper chambers of the heart (the atria).

AF in the NHS



AF leads to an increased risk of stroke and heart failure.

More new cases of AF are diagnosed each year than the four most common types of cancer combined.





Direct expenditure on AF in the NHS has increased to over £2.2 billion a year.

The AF patient

During AF, the chaotic electrival activity in the atria prevents effective pumping of blood and causes a rapid, irregular heart rate.



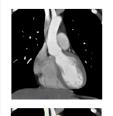


Healthy heart

Aim

Improve clinical outcomes for AF patients by using mathematical models of the heart to find the optimal treatment strategy.

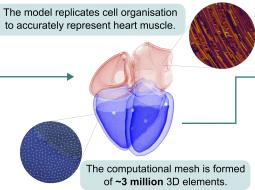
Generating a virtual heart



(3D medical image) of patient's heart.

CT scan





A cohort of patient-specific AF heart models Age [years] 63 ± 10







60% M 40% F





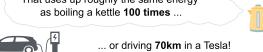
Calibrating the models ...

To create accurate virtual heart models, we need to calibrate them so they simulate healthy behaviour correctly. However, with hundreds of interacting parameters, finding the right combination is difficult and would require lots of trial and error.

The problem:

Each simulation takes ~5 hours on a supercomputer.

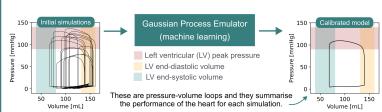
That uses up roughly the same energy



... using machine learning.

The solution:

We can use a powerful and efficient Al tool called a Gaussian Process **Emulator**. This is a mathematical model which we train to predict the results of the expensive simulations using relatively few examples.



Treating AF



Treatment strategies

Rate control aims to slow the heart rate.

Rhythm control aims to restore normal rhythm and contraction.

Comparing AF Treatment Strategies

We can simulate treatment strategies like rate and rhythm control by varying the heart rate, rhythm and atrial contraction in the models.



What does this mean for the NHS?

Personalised, computational models of the heart allow us to compare therapies for AF in specific patients. This paves the way for more targeted and effective therapeutic strategies, improving clinical outcomes for AF patients and relieving pressure on the NHS.