

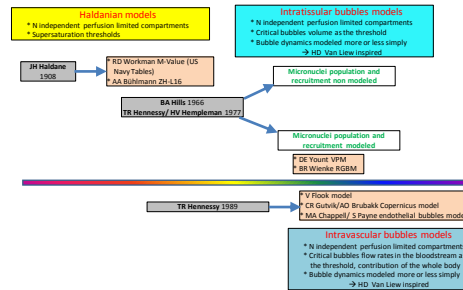
– Background of Scientific Research –

- Mathematical models of decompression allow the determination of safe decompression procedures for a limited range of exposures (pressure, duration, breathing gas)
- Most of the time, models contain parameters non related to a biophysical reality → parameters tuned to fit at best tested/safe decompression profiles
- An extrapolation of these models to any type of exposition remains hazardous
- It is deemed that a biophysical approach of decompression can produce a relevant model for DCS prevention and DCS risk prediction

→ A critical review of the biophysical foundations of existing models has been conducted by BF-SYSTEMES (micronuclei population recruitment, microbubbles dynamics, tissue saturation/desaturation asymmetry due to bubbles)

→ A biophysical model merging the best hypothesis of existing models has been elaborated and preliminary validated by BF-SYSTEMES

- These last years there is a will to build biophysical models using Doppler detections as valuable data for parameters estimation [1][2]

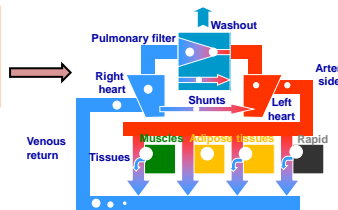


Relations between intravascular bubbles detected by Doppler and decompression sickness demonstrated in 1991 [3]

– BORA Biophysical Model –

Objective : determine and limit the global volume of microbubbles flowing through the right heart and accumulated in the pulmonary filter on a given period of time

Interest : the biophysical model can be correlated using risk database and experimental measurements through Doppler detections



$$\frac{dP_t}{dt} = k[f(P_{amb} - P_{H2O}) - P_t] - \frac{1}{RTS_1} \left[V_b \frac{dP_{amb}}{dt} + (P_{amb} - \beta) \frac{dV_b}{dt} \right]$$

recruitment of pre-existing gas nuclei populations in tissues, transformed in microbubbles (depends on the supersaturation extent)

$$P_{sz} = P_t - P_{amb} + \beta \frac{2V_d}{P_{sz,max}}$$

$$N_{microbubbles} = N_{max} e^{\frac{2V_d}{P_{sz,max}}}$$

microbubbles dynamics and their transfer in the blood

$$\frac{dR}{dt} = \frac{RTD_{t-1} P_{sz}}{R} - \frac{R}{P_{amb}} \frac{dP_{amb}}{dt}$$

– References –

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- Sawatzky K.D. The relationship between intravascular Doppler-detected gas bubbles and decompression sickness after surface diving in humans, Thesis, York University, Toronto, 1991.
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– Database & Calibration Method –

- The data set analyzed (Z) contains N=444 exposures selected amongst 48 different diving profiles [4][5]. For each exposure i we know the actual depth profile followed during the dive and we measure Doppler grade Z_i (in a discrete scale from 0 to 4, Spencer scale).

We assume that bubble grades correspond to a quantification of the peak total gas volume produced by the body tissues :

$$Z_i = k \leftrightarrow \max_{t \in [S_p, S_{k+1}]} V(t) = S_0 = 0, S_5 = \infty$$

- All parameters of the biophysical model are assumed known except two ($\alpha = [A, N_{max}]$). Moreover, the thresholds that define the discrete observed bubble grades are also unknown. Our goal is to infer the distribution of α , $p(\alpha)$, as well as the value of thresholds S_1, \dots, S_4 based on the observations Z .
- We approximate the probability distribution of biophysical parameters A and N_{max} by a discrete measure, allocating weight w_{ij} at the point $\alpha_{ij} = (A_i, N_{max,j})$, $i, j = 1, \dots, K$:

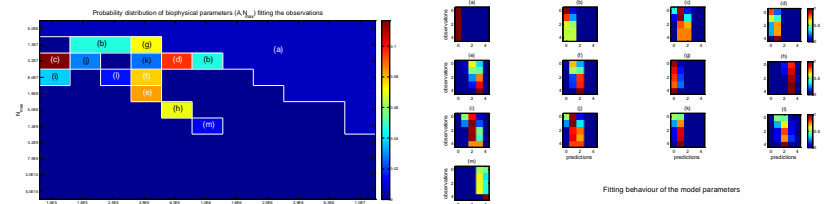
$$p(\alpha) = \sum_{i,j=1}^K w_{ij} \delta(\alpha - \alpha_{ij})$$

$K=11$ is the dimension of the (logarithmic) grid defined over the biophysical parameter space.

- Let θ denote the complete set of unknown parameters : $[A, N_{max}, S_1, \dots, S_4]$. We estimate θ by maximum likelihood, by searching the maximum of :

$$\mathcal{L}(Z, w, \theta) = \Pr(Z|w, \theta) = \prod_{i=1}^N \Pr(Z_i|w, \theta).$$

– Results –



– Conclusion & Perspectives –

- Based on a data set Z of moderate size, we were able to reproduce the observed dispersion of bubble grades using the estimated discrete probability distribution of the biophysical model parameters.
- Future work : characterize accuracy of prediction; characterize the dispersion of a larger set of parameters; increase model complexity (with additional tissues); extend to non-discrete distribution of model parameters; estimate the probability of DCS for a given diving profile; use of continuous Doppler signals for parameters estimation (dynamics of bubbling and not only peaks)

