A Three-dimensional Phase-field Model for Multiscale Modeling of Thrombus Biomechanics in Blood Vessels

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Introduction Thromboembolism is associated with detachment of small thrombus pieces from the bulk in the blood vessel. These detached pieces, also known as emboli, travel through the blood flow and may block other vessels downstream, e.g., they may plug the deep veins of the leg, groin or arm, leading to venous thromboembolism (VTE). VTE is a significant cause of morbidity and mortality and it affects more than 900,000 people in the United States and result in approximately 100,000 deaths every year. Mechanical interaction between flowing blood and a thrombus is crucial in determining the deformation of the thrombus and the possibility of releasing emboli. In this study, we developed a combined framework with particle-based method and phase-field method to simulate the development of a thrombus from platelet aggregation to its subsequent viscoelastic responses to various shear flows. Informed by clinical data, this framework can be used to predict the risk of diverse thromboembolic events under physiological and pathological conditions.

Method We propose a fully-Eulerian, three-dimensional, phase-field model of thrombus that is calibrated with existing *in vitro* experimental data. This phase-field model considers spatial variations in permeability and material properties within a single unified mathematical framework derived from an energy perspective, thereby allowing us to study effects of thrombus microstructure and properties on its deformation and possible release of emboli under different hemodynamic conditions. Moreover, we combine this proposed thrombus model with a particle-based model which simulates the initiation of the thrombus.

Results Calibration of model parameters was achieved by comparing the simulation results with existing *in vitro* experimental data for the poro-viscoelastic behavior.

The proposed 3D phase-field model can be combined with FCM to simulate the process from platelet activation and deposition to subsequent deformation while exposed to steady or pulsatile blood flow.

Conclusion Guided by patientspecific clinical data, such as lesion geometry and the local blood flow rate, this multiscale framework has the potential to predict the risk of thrombotic-embolic events, which are responsible for significant morbidity and mortality. We are working on solving this set of governing equations with PINNs (physics informed neural network) and inferring the mechanical properties of the thrombus (permeability and visco-elastic modulus).

Figure 1: Physiologic phase-field modeling of thrombus deformation in an idealized aneurysm. Contours of thrombus volume fraction in the aneurysm shown using the phase-field variable at different time and locations.

Reference

 Tierra G, Pavissich JP, Nerenberg R, Xu Z, Alber MS, 2015.