

Visual servoing for physiological motion compensation

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Outline of the presentation

1. Background on visual servoing
2. Visual servoing and medical robotics
3. Physiological motions
4. Predictive/repetitive control
5. Active robotic filtering
6. Future

1. Visual servoing

Introduction

Definition : *position control of a mechanical device using real-time visual feedback*

Y. Shirai and H. Inoue, "Guiding a robot by visual feedback in assembling tasks", 1973

Hill and Parks, 1979 : use of a projected optical marker

1. Visual servoing

Introduction

Weiss, 1984 : image-based visual servoing

Espiau *et al.*, 1992 : task-function approach

Corke, 1996 : dynamic effects

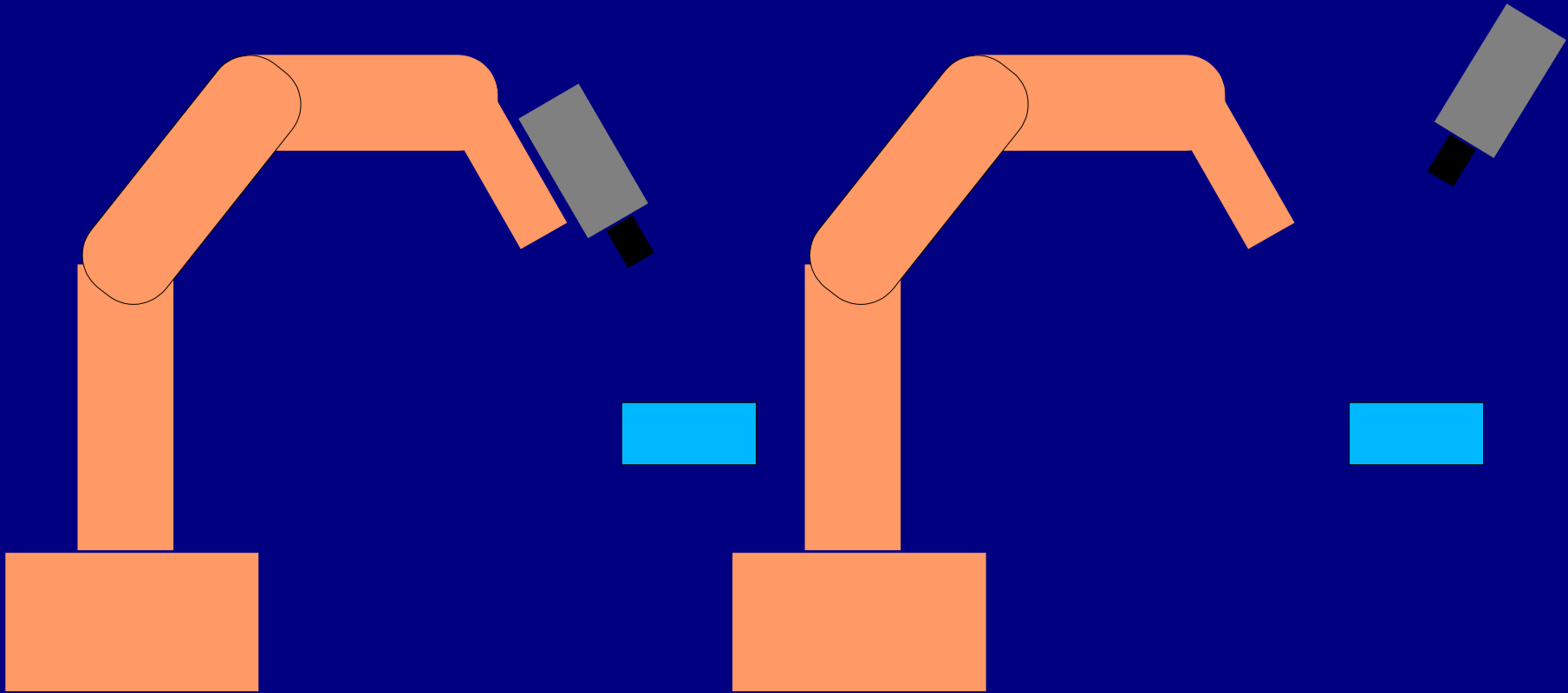
Malis *et al.*, 1998 : 2D1/2 visual servoing

Nakabo *et al.*, 1998 : 1000 Hz visual servoing

Nakamura *et al.*, 2001 : heartbeat
synchronization

1. Visual servoing

The visual sensor

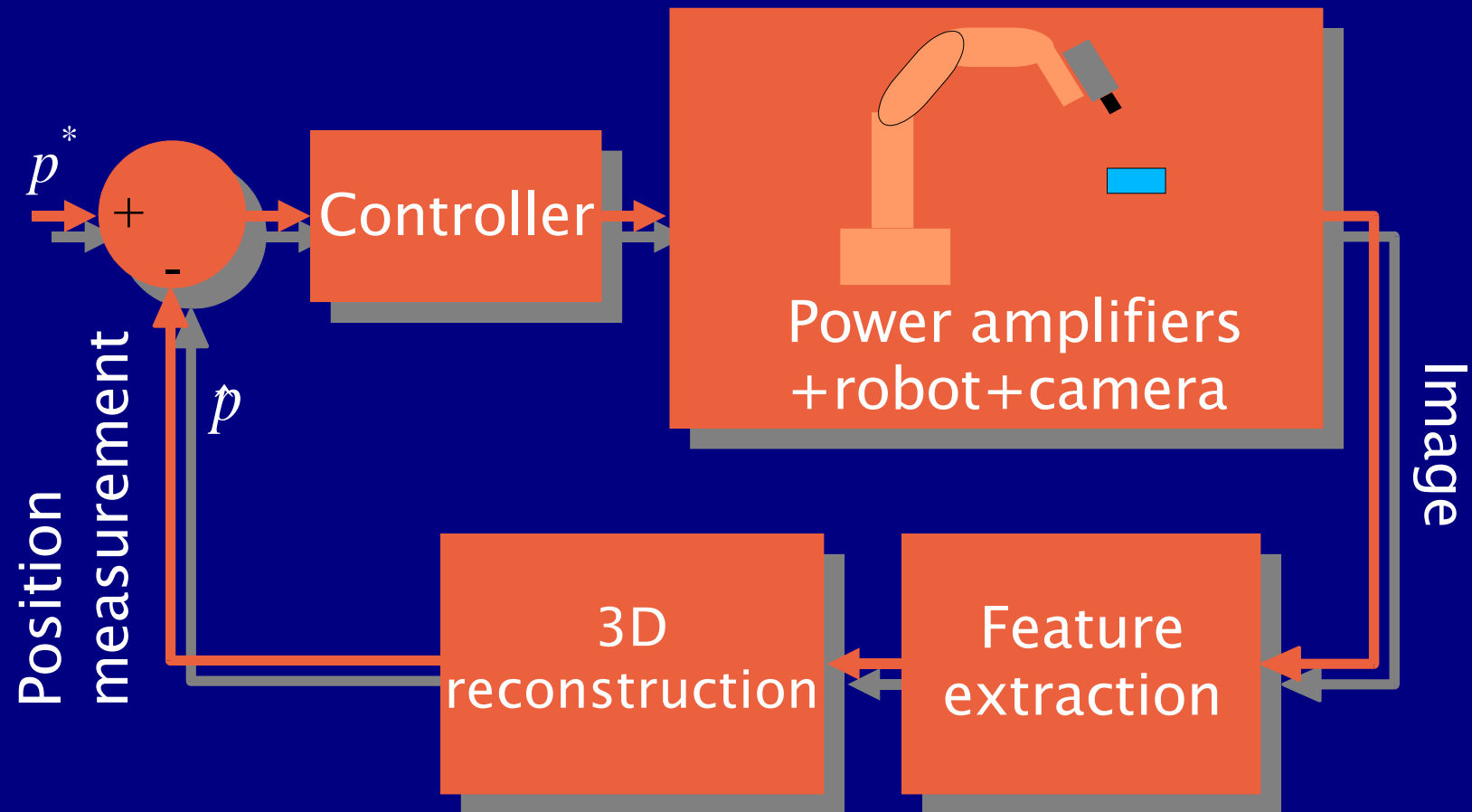


Eye in hand configuration

Eye to hand configuration

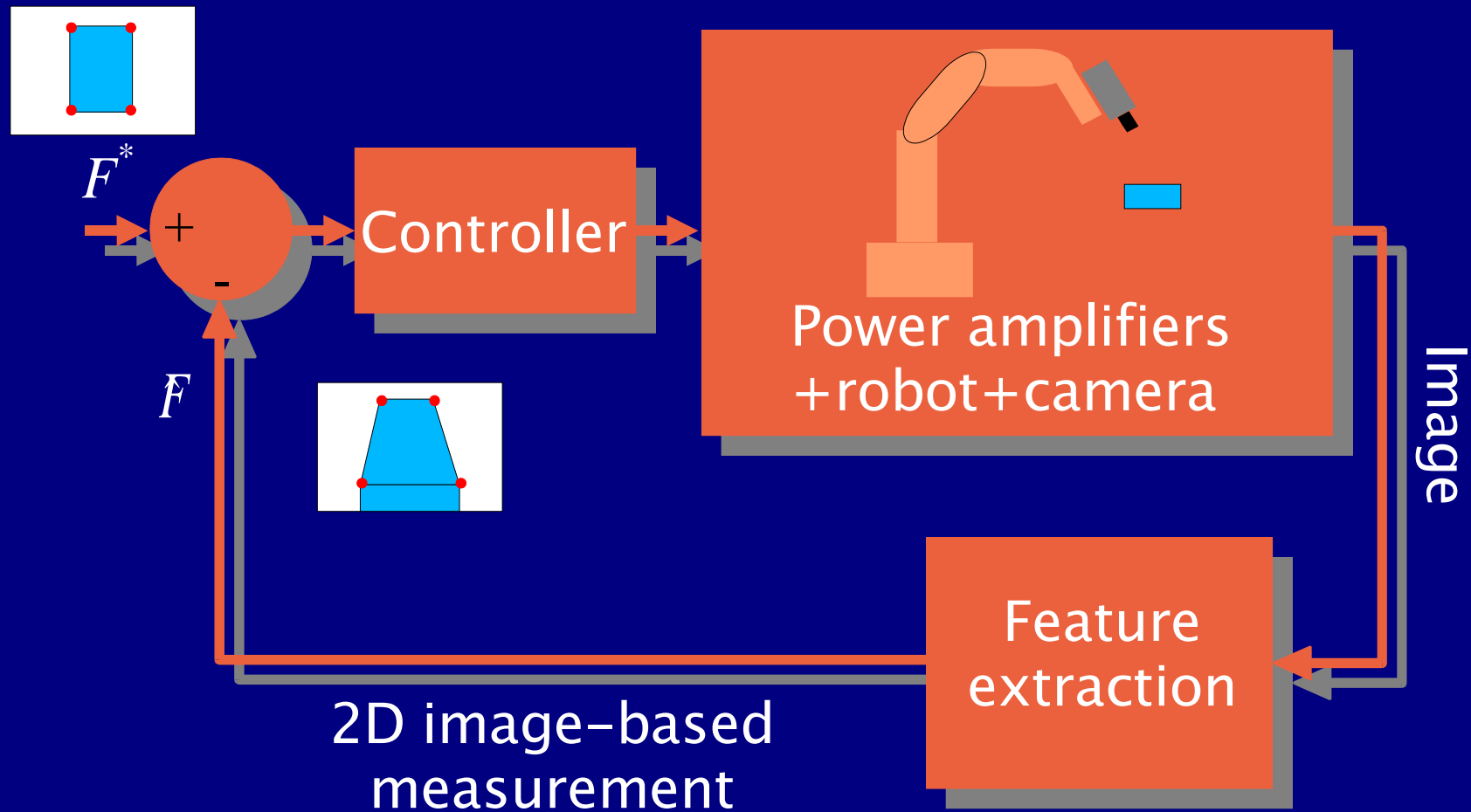
1. Visual servoing

3D vs 2D visual servoing



1. Visual servoing

3D vs 2D visual servoing



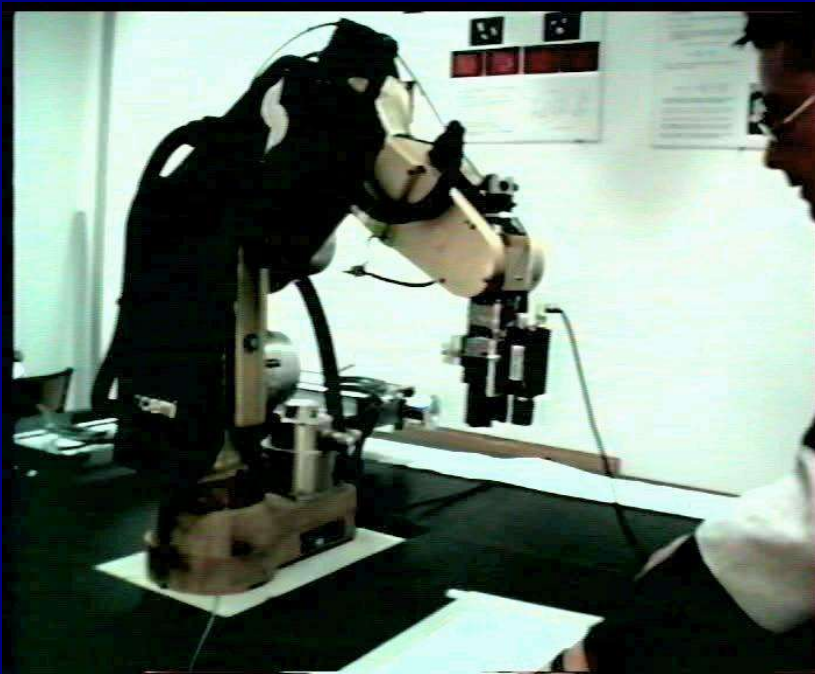
1. Visual servoing

Need for speed

- Need for high dynamic performances :
 - Fast target tracking (tracking of bacterias)
 - Fast sorting (picking up parts on a conveyor)
 - Motion compensation (heartbeat compensation)
- Requirements :
 - Fast camera (> 50 Hz)
 - Fast robot
 - Real-time software environment
 - Accurate model of the dynamics

1. Visual servoing

Examples of high speed tracking



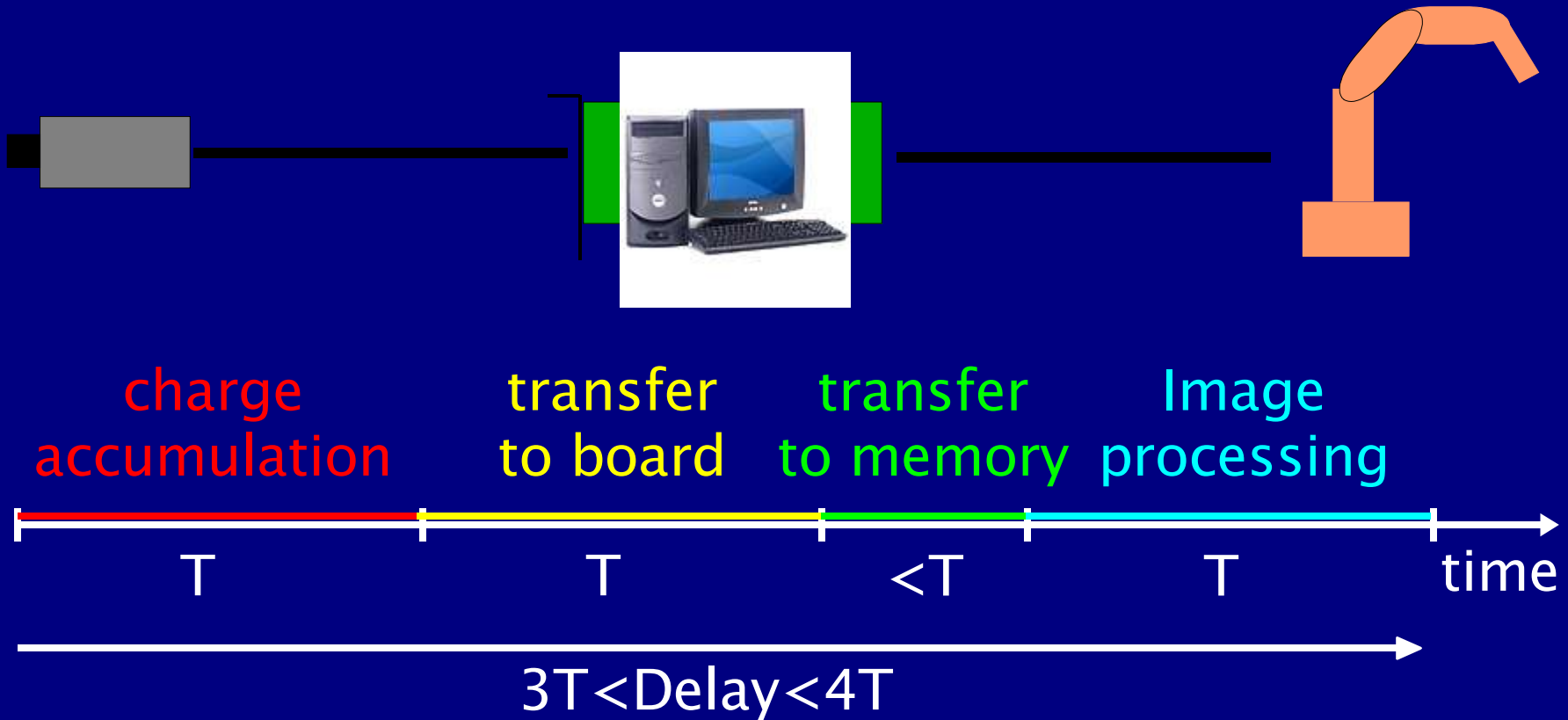
120 Hz
Gangloff *et al.*, 1999



1000 Hz
Nakabo *et al.*, 2000

1. Visual servoing

Dynamics of the image acquisition process



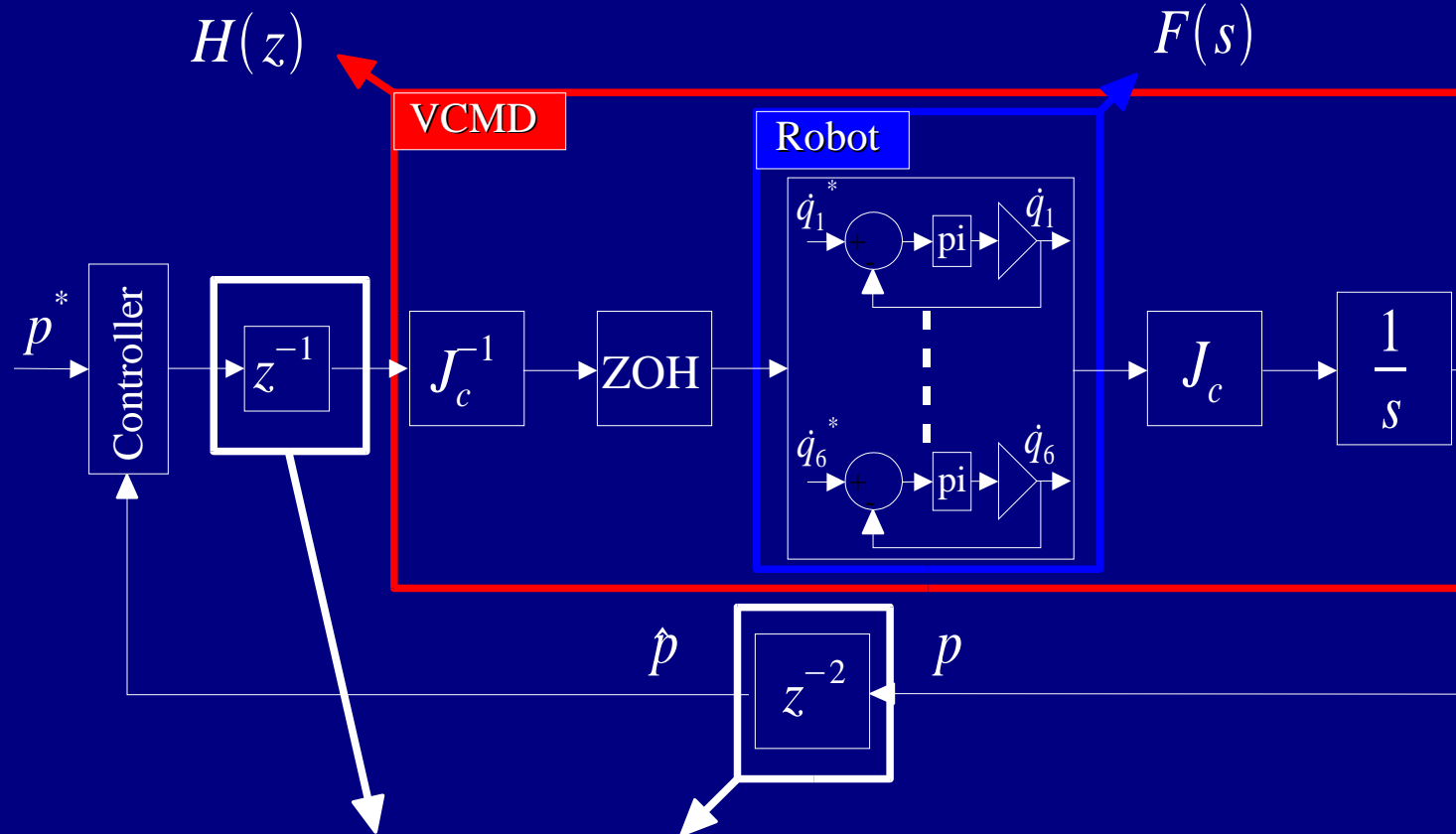
T =sampling period (*e.g.* 2ms with a 500Hz camera)

1. Visual servoing

Dynamics of the manipulator

Model of the virtual robot

Model of the robot



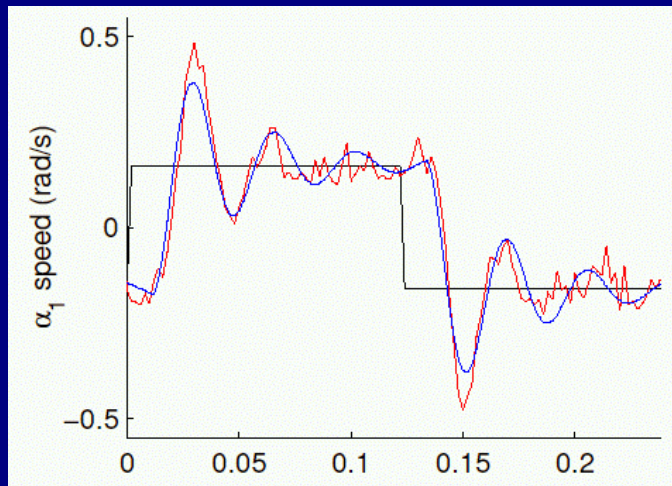
Model of the acquisition process

Gangloff, J. A. and de Mathelin, M. F., High speed visual servoing of a 6 manipulator using multivariable predictive control, *Advanced robotics*, 2003 , 17 , 993-1021.

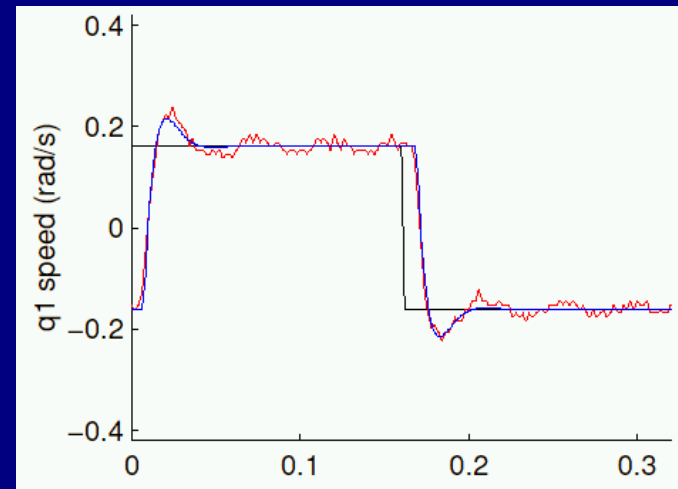
1. Visual servoing

Specific issues with medical robots

- Medical robots must be :
 - SAFE
 - COMPACT
- ⇒ Light structure ⇒ Flexibilities



Flexibilities identified



Flexibilities neglected

2. Applications in the medical field

Robotized laparoscopic surgery – endoscope control

- Taylor *et al.*, 1995
 - Robotic assistant
 - Automatic centering of selected anatomic structures
 - Look then move visual servoing
 - 3D reconstruction by triangulation
- Casals *et al.*, 1995
 - Tool tracking
 - Markers attached to the tools : features = lines
 - 3D visual servoing

2. Applications in the medical field

Robotized laparoscopic surgery – endoscope control

- Uecker *et al.*, 1995
 - Tool tracking
 - Color markers
 - 2D visual servoing : centering and size
- Wei *et al.*, 1997
 - Color markers : green is proven to be optimal
 - Stereo endoscope
 - 3D visual servoing

2. Applications in the medical field

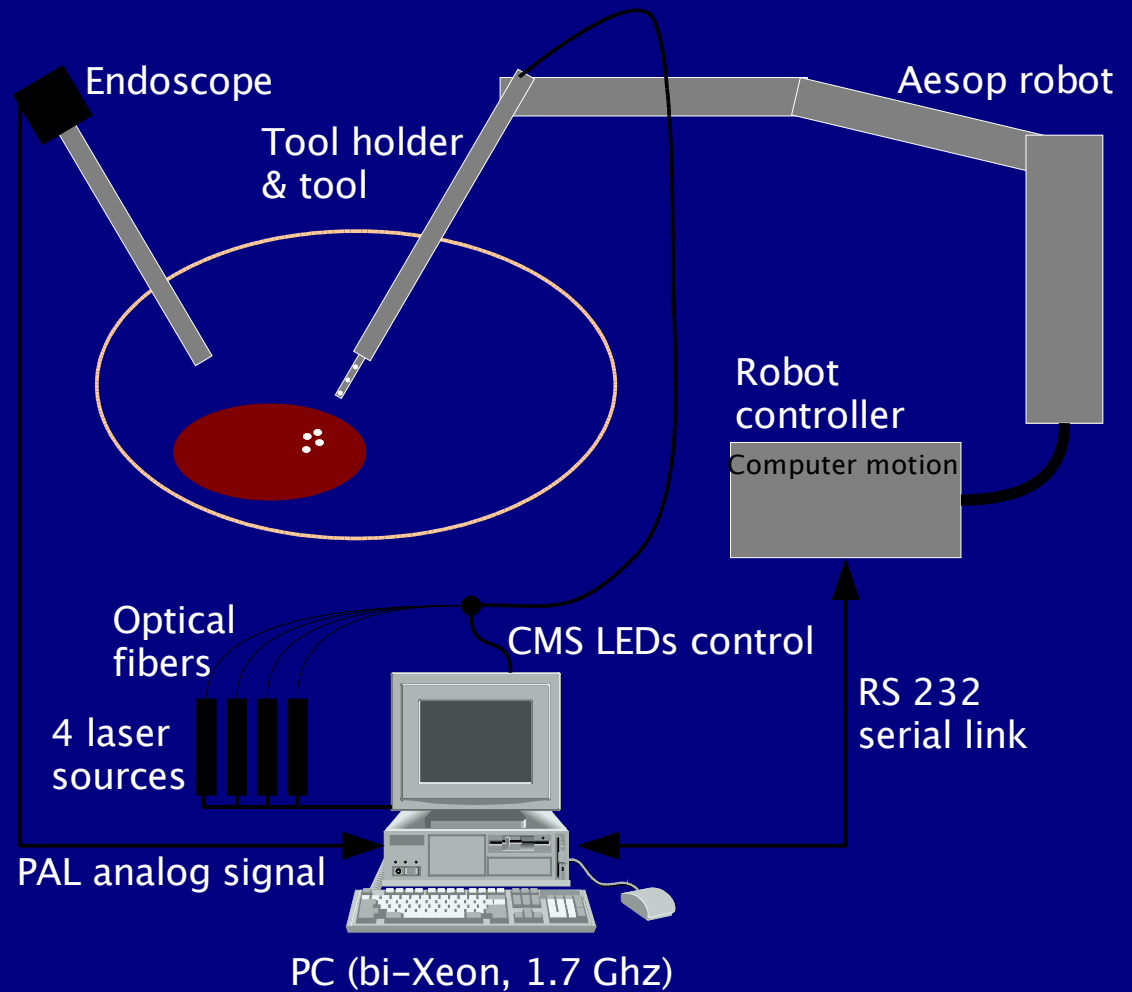
Robotized laparoscopic surgery – tool control

- Hayashibe and Nakamura, 2001
 - High-speed laser-scanner
 - 3D reconstruction of organ surface
 - Automatic positioning of instruments
 - External endoscope/instrument registration
- Krupa *et al.*, 2003
 - Automatic retrieving of instruments
 - Laser pointer
 - Synchronized optical blinking features
 - Hybrid 2D1/2 visual servoing

2. Applications in the medical field

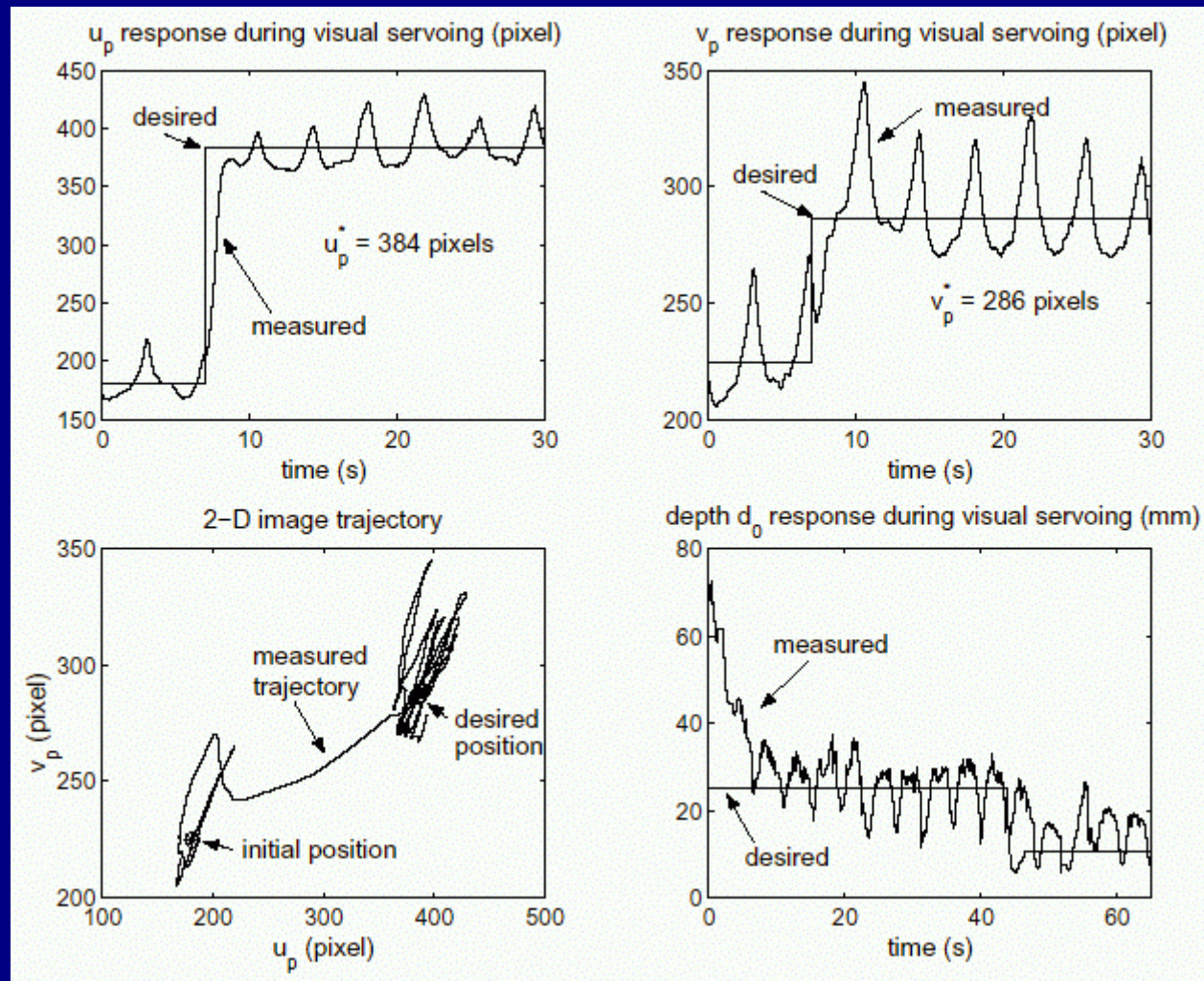
Example : automatic tool positioning

Laser-pointing
tool-holder



2. Applications in the medical field

Example : automatic tool positioning



3. Physiological motions

Overview

- 2 main sources in the body :
 - Respiration
 - Cardiac beating
- Disturbance for the surgeon
- Current workarounds
 - Respiration : stopping the ventilator
 - Cardiac beating : stopping the heart, stabilizers
- Future solution : active robotic filtering

3. Physiological motions

Respiration

Clifford *et al.*, Assessment of Hepatic Motion Secondary to Respiration for Computer Assisted Interventions ***Computer Aided Surgery***, 2002 , 7 , 291–299

Table 1. Hepatic Motion Secondary to Respiration in Nine Human Studies

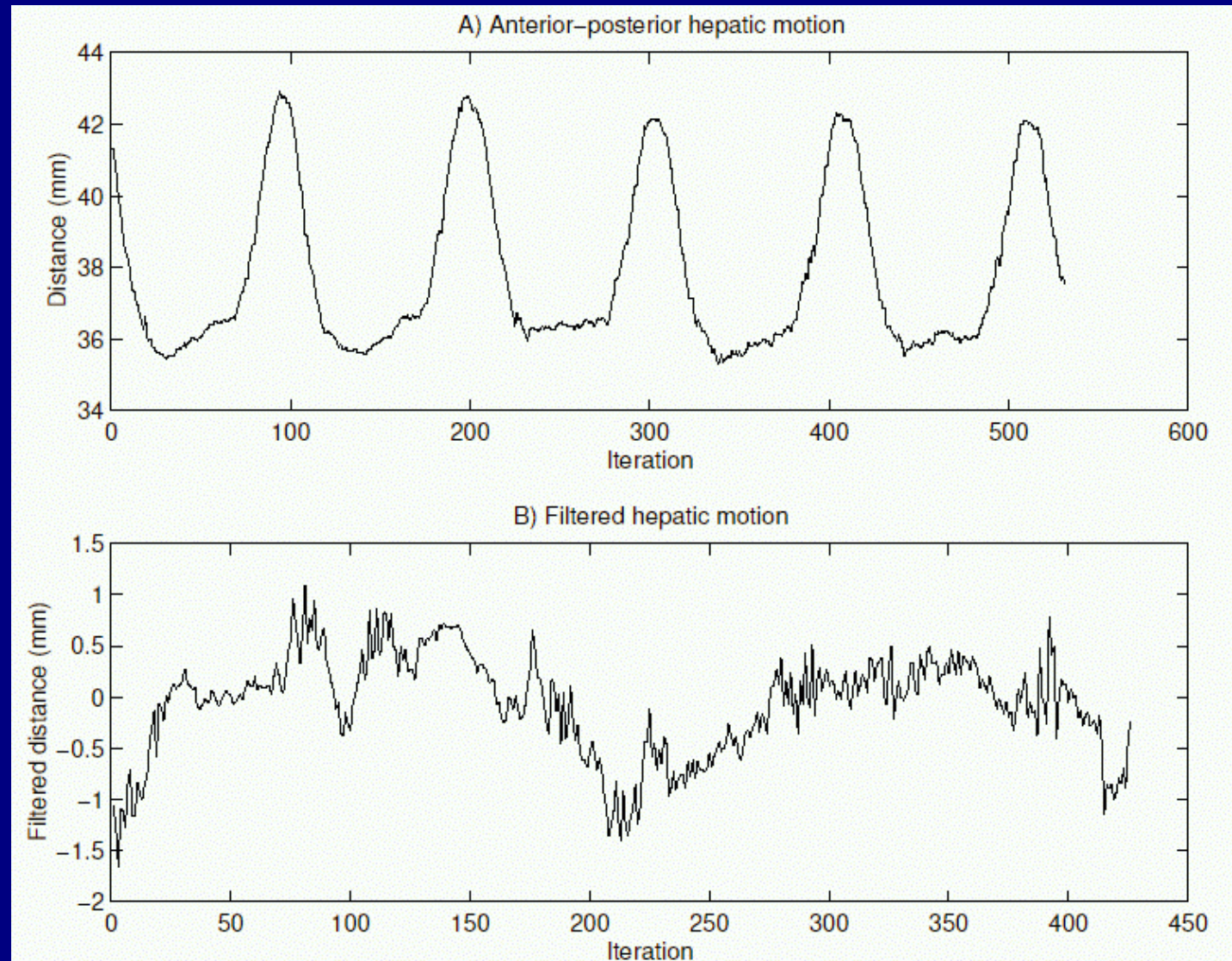
Study/date	Number of subjects	Cranio-caudal (mm)		Anterior-posterior (mm)	Lateral (mm)	Modality
		Quiet inspiration	Deep inspiration			
Weiss (1972) ³²						
(using scintigraphy)	12	11 ± 3	12–75			Scintigraphy
(using fluoroscopy)	25	13 ± 5				Fluoroscopy
Harauz (1979) ³³	51	14				Scintigraphy
Suramo (1984) ³⁴	50	25	55			US
Korin (1992) ³⁵	15	13	39	2.5		MRI
Davies (1994) ²⁷	9	10 ± 8	37 ± 8			US
Herline (1999) ¹³	2	10.8 ± 2.5				Optical tracking
Shimizu (1999) ³⁷	1	21		8	9	MRI
Shimizu (2000) ³⁶	6	10.6 ± 7.0		4.6 ± 1.6	5.2 ± 1.8	MRI
Rohlfing (2001) ³⁸	4	12–26		1–12	1–3	MRI

3. Physiological motions

Respiration – measurements* on a pig

Hepatic motion
measured on
an anesthetized
pig

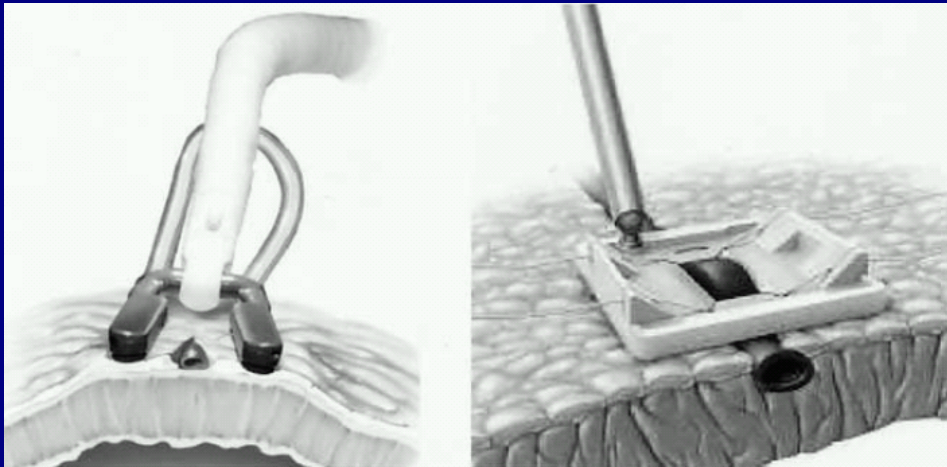
Difference
between
two cycles



* Measurements acquired at 25 Hz with a CCIR camera

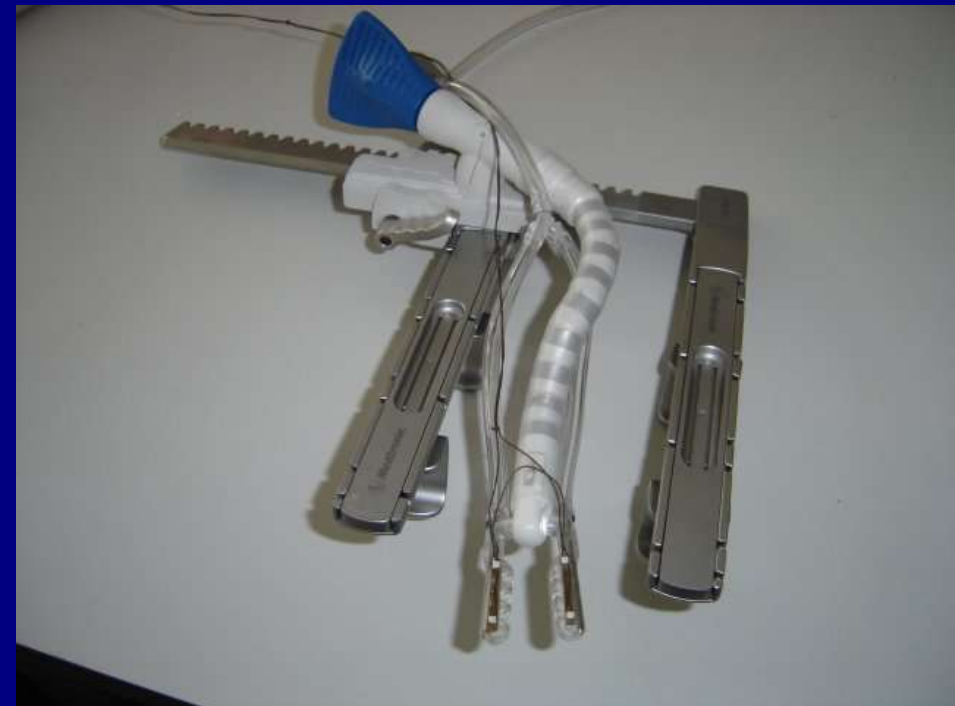
3. Physiological motions

Cardiac beating –stabilizers



Octopus (medtronic) vs
immobilizer (Genzyme)

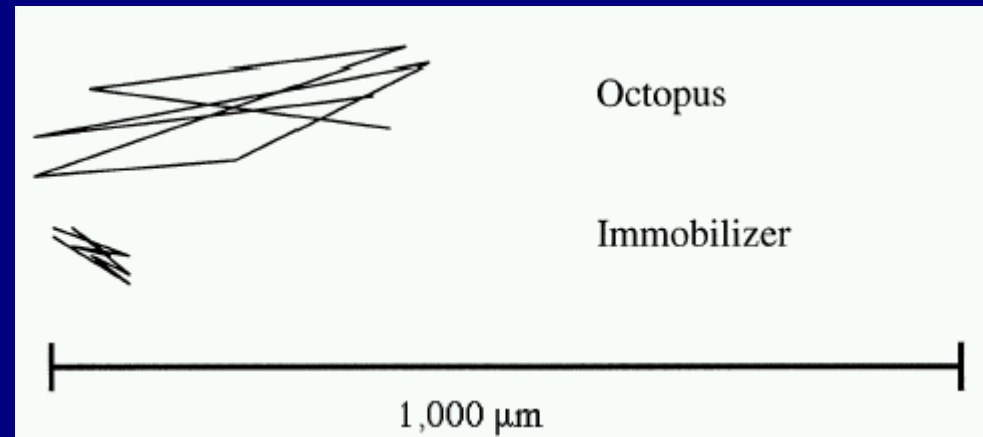
Medtronic
Octopus 4.3



3. Physiological motions

Cardiac beating – measurements on human heart

Detter *et al.*, Comparison of two stabilizer concepts for off-pump coronary artery bypass grafting, *Ann Thorac Surg*, 2002, 74:497–501.



Two-dimensionnal cardiac surface motion.

Technique using reflected polarized light.

Resolution : 1 μm

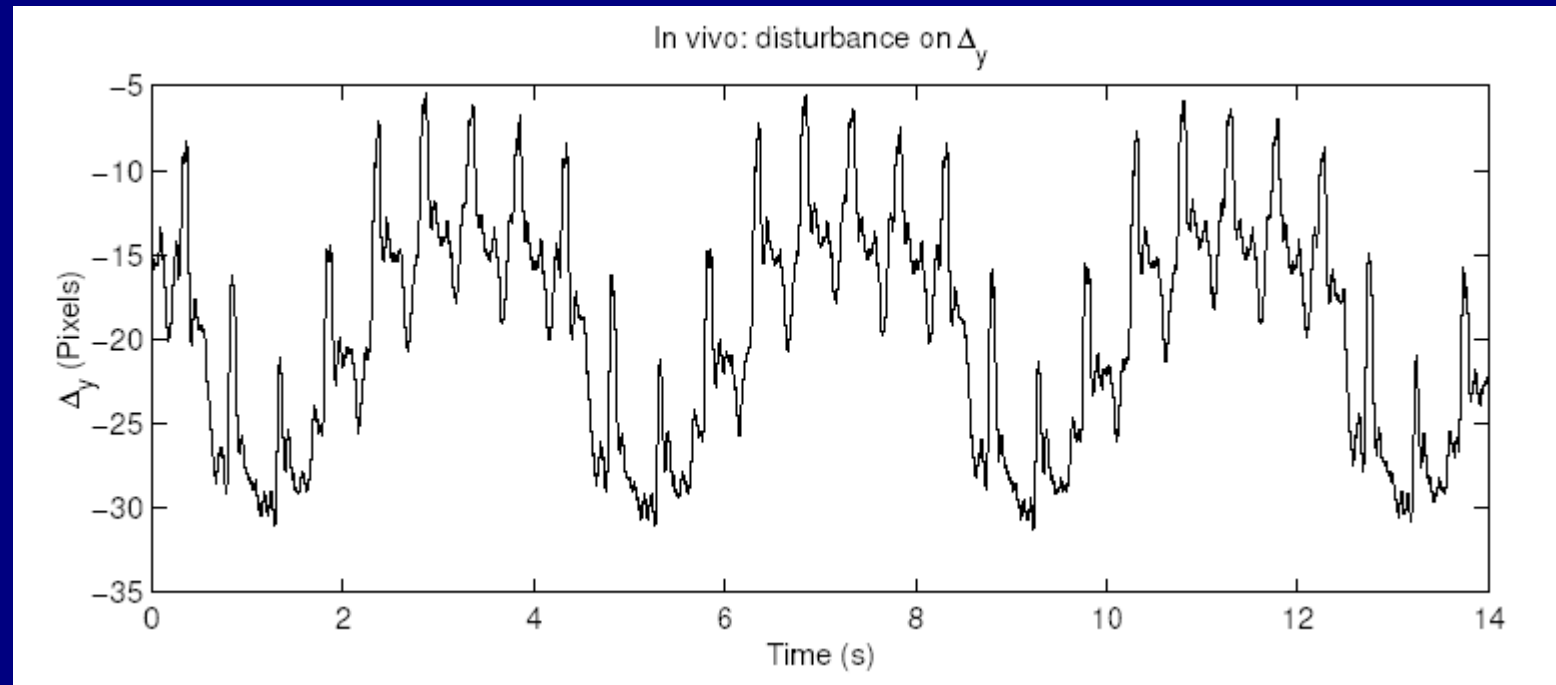
Octopus : $423 \pm 129 \mu\text{m}$

Immobilizer : $109 \pm 32 \mu\text{m}$

3. Physiological motions

Cardiac beating – measurements on a pig

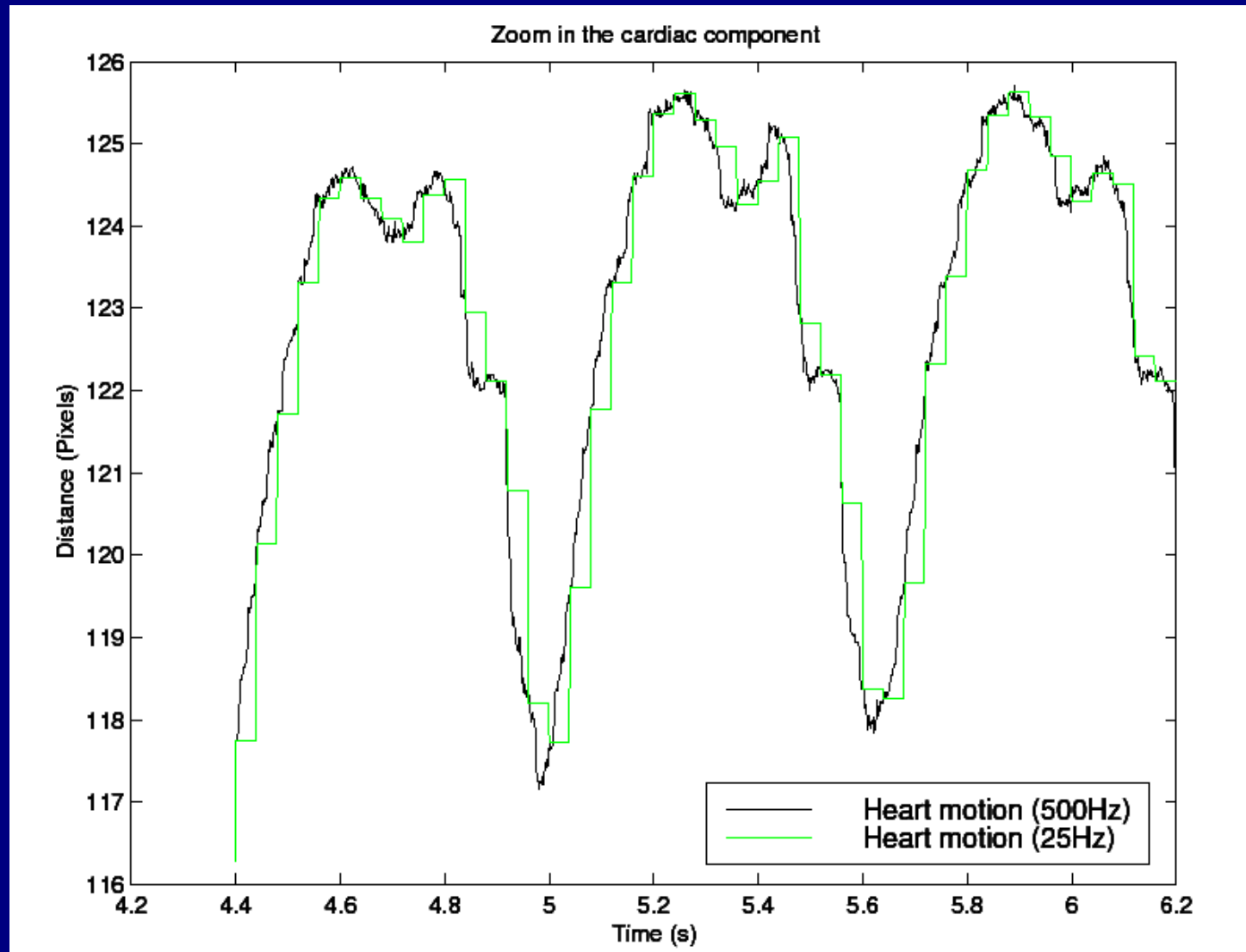
Lateral motion
of the heart
of an
anesthetized
pig



Measurements acquired at 500 Hz with a high-speed camera. Ratio pixel/distance : 40 pixels/cm

3. Physiological motions

Cardiac beating – choice of the sampling frequency



3. Physiological motions

Conclusion

- Physiological motions are **repetitive**
- Respiration motion :
 - Slow
 - Forced by external ventilator \Rightarrow perfectly periodic
 - Large displacements of many organs
- Heart motion :
 - Fast
 - Combination of respiration motion and heartbeat motion
 - Small displacements restricted to the heart

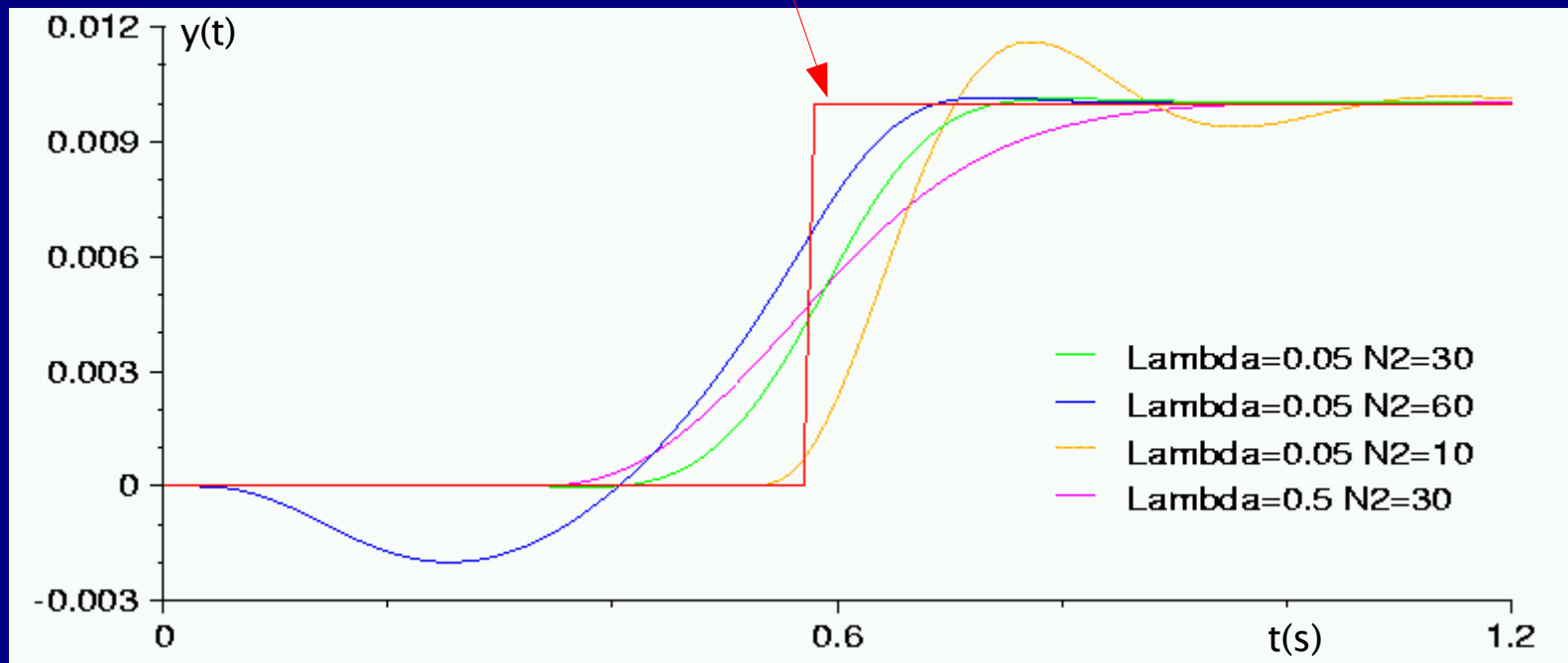
4. Predictive/Repetitive control

Introduction

Minimization of :

$$\sum_{j=N_1}^{N_2} [y(t+jT) - r(t+jT)]^2 + \lambda \sum_{j=1}^{N_u} [\Delta u(t+(j-1)T)]^2$$

measurement \nearrow $y(t+jT)$ \nwarrow reference $r(t+jT)$ \nwarrow control increment $\Delta u(t+(j-1)T)$



4. Predictive/Repetitive control

Repetitive control

Model of the dynamics in the ARIMAX form :

$$A(q^{-1})y(t) = q^{-1}B(q^{-1})u(t) + \frac{C(q^{-1})}{D(q^{-1})}\xi(t)$$

filtering of the noise \uparrow \uparrow white noise

Repetitive control : $D(q^{-1}) = (1 - q^{-1})(1 - \alpha q^{-T})$
 $0 < \alpha < 1$ $T = \text{period of the disturbance}$

Further reading :

Camacho, E. F. and Bordons, C. Model predictive control
Springer Verlag, 1999

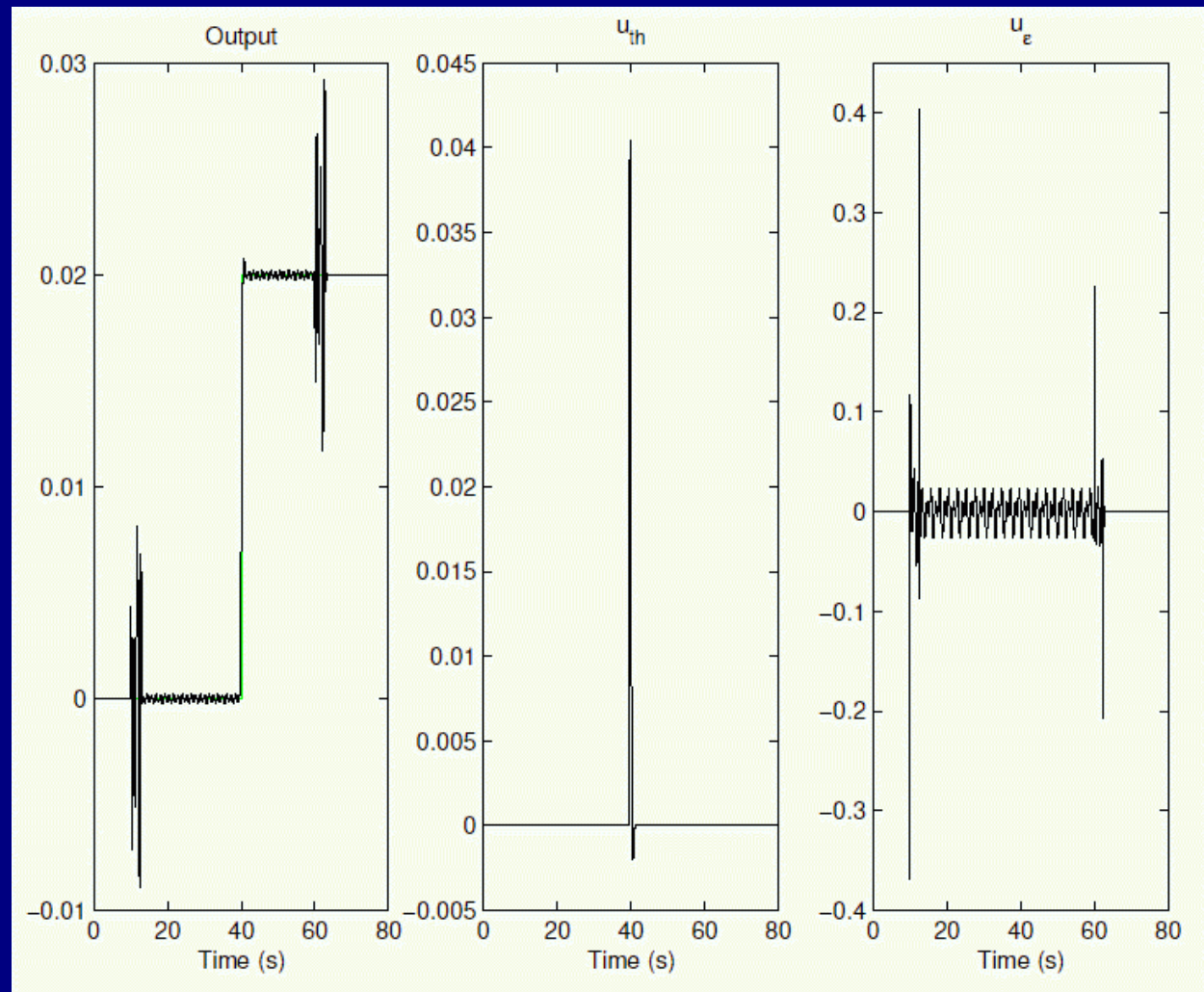
4. Predictive/Repetitive control

Repetitive control

Separation of the control in two components :

u_{th} reference tracking

u_e disturbance rejection



4. Predictive/Repetitive control

Potential applications

- Predictive control :
 - Telemanipulation
 - Noise observer \Rightarrow anticipation of the disturbance
 - Automatic execution of predefined tasks
- Repetitive control :
 - Compensation of cyclic disturbances
 - Separation of disturbance rejection and reference tracking.

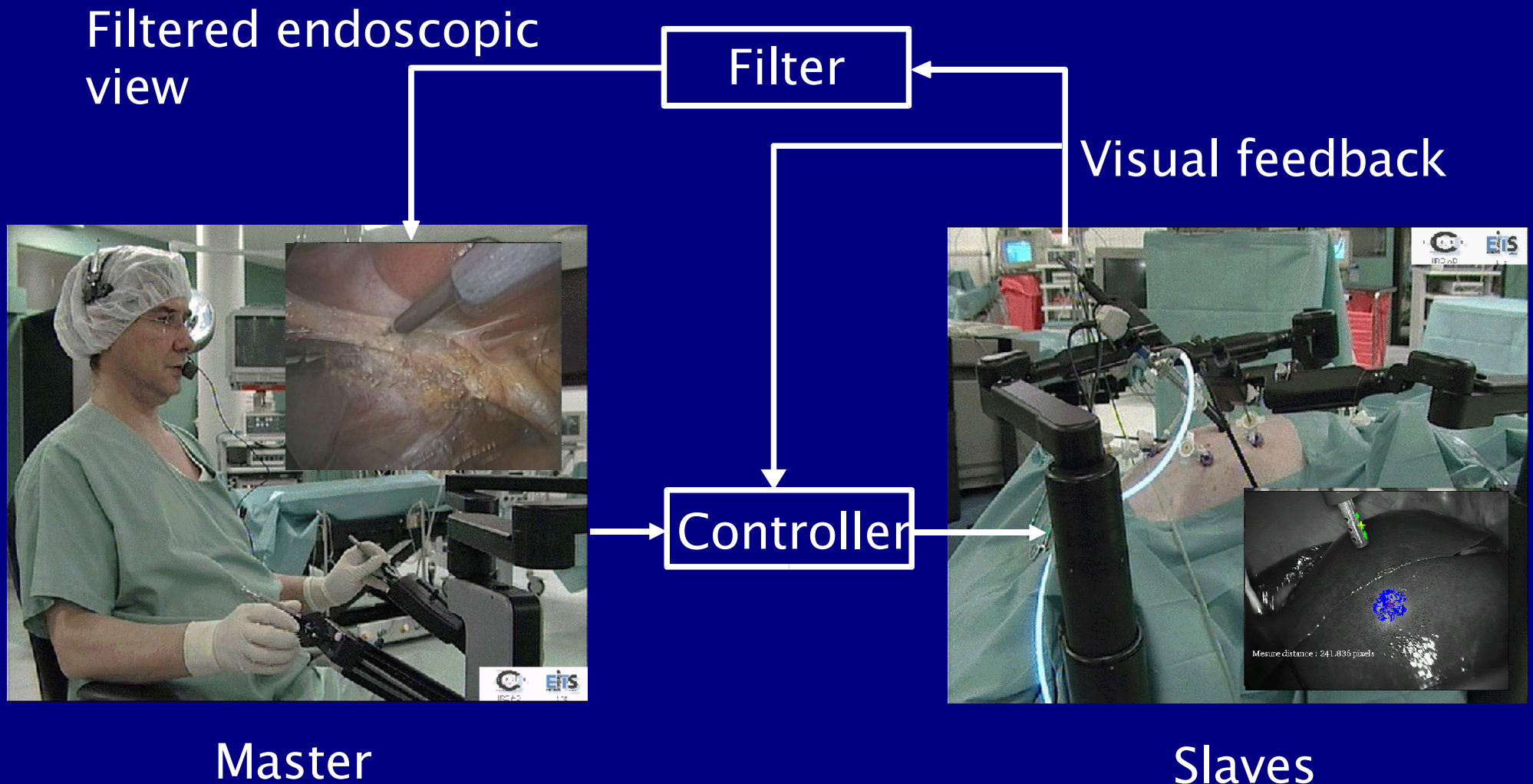
5. Active robotic filtering

Some existing works

- Riviere *et al.*, 1998
 - Tremor cancellation
 - Active instrument
- Thakral *et al.*, 2001
 - Rat heart wall motion analyze with fiber optic probe
 - Disturbance estimator : based on Fourier coefficients estimation
- Nakamura *et al.*, 2001
 - Heartbeat synchronization
 - 1000 Hz heart tracking experiment

5. Active robotic filtering

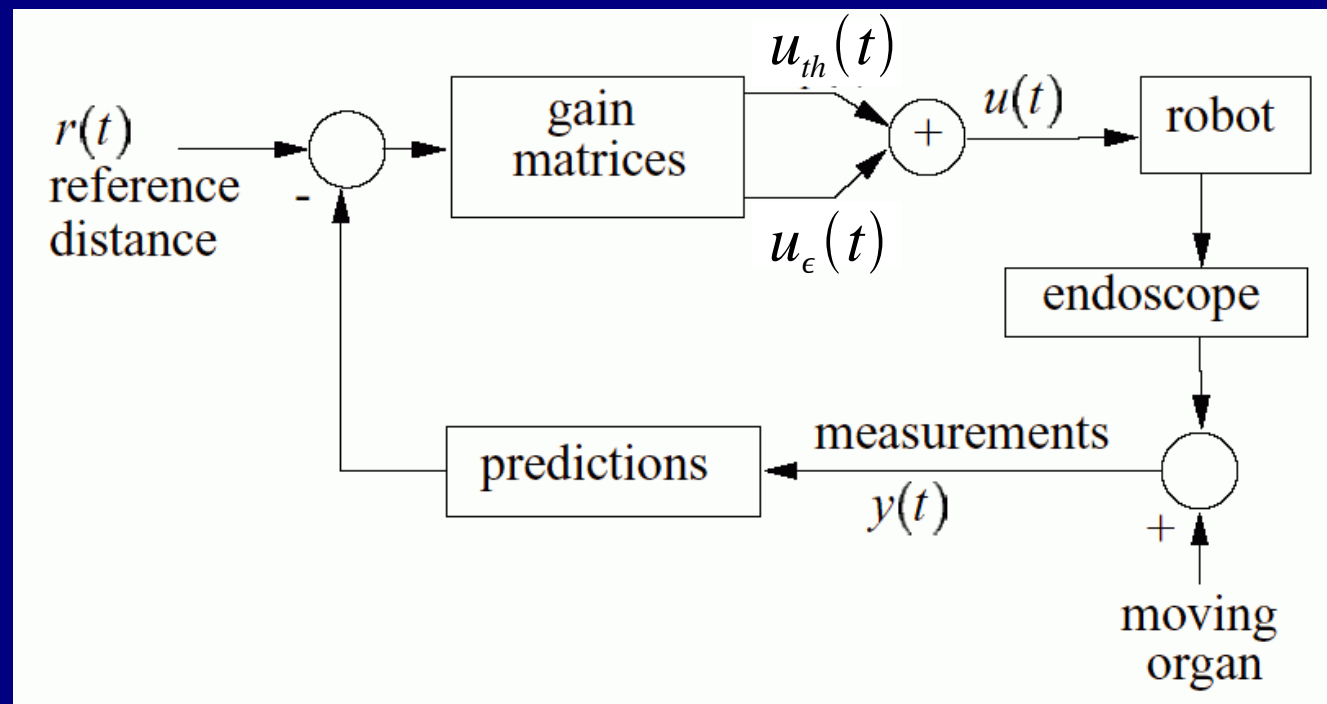
Goal



5. Active robotic filtering

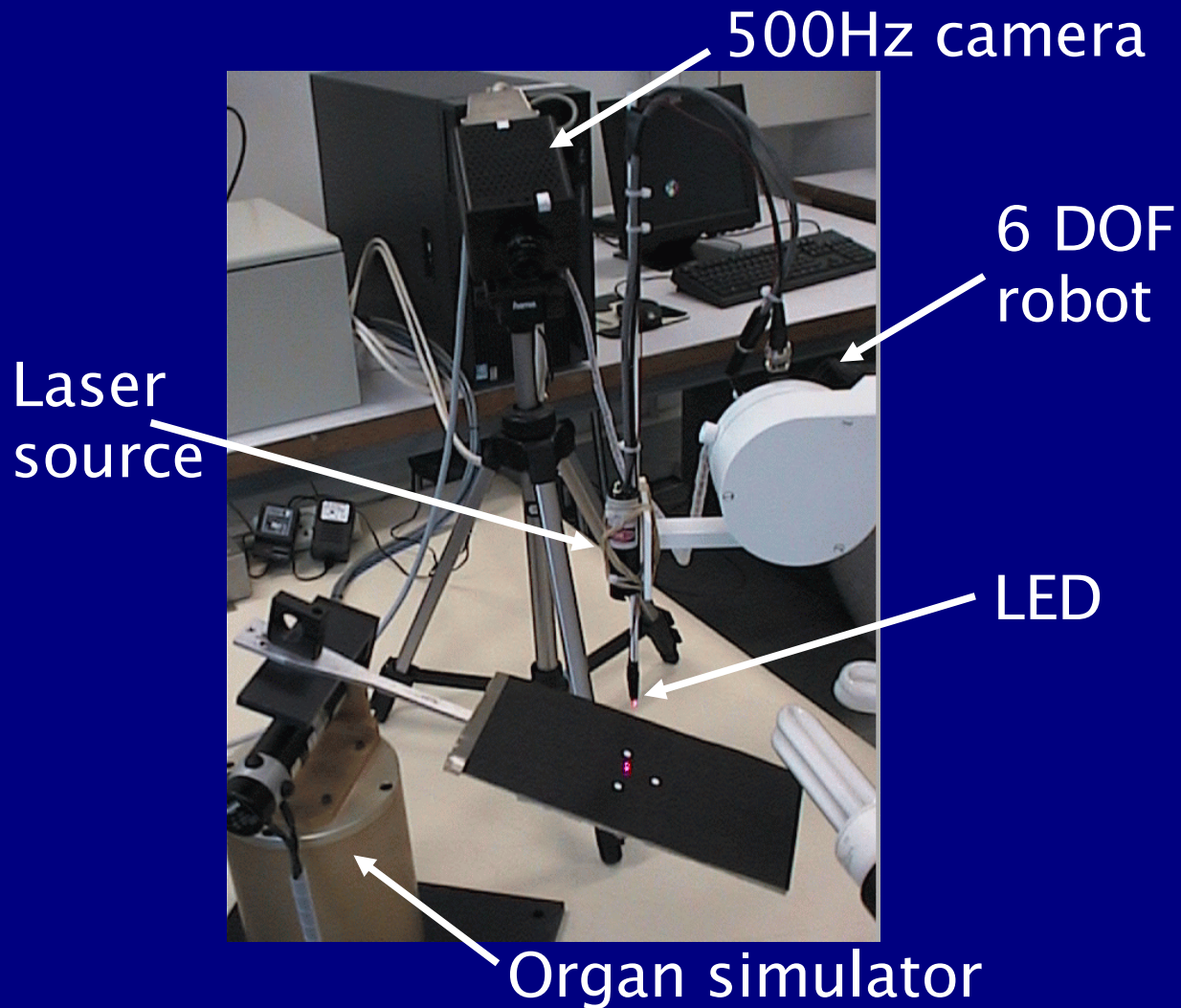
Respiration – bloc diagram

- Anesthetized patient + artificial ventilation
 - Periodic motion
 - Repetitive control

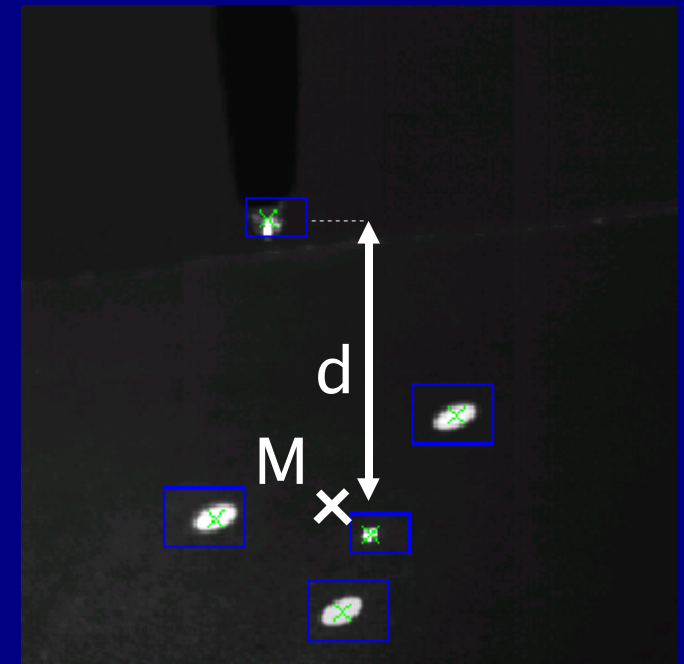


5. Active robotic filtering

Respiration – testbed



Visual feedback



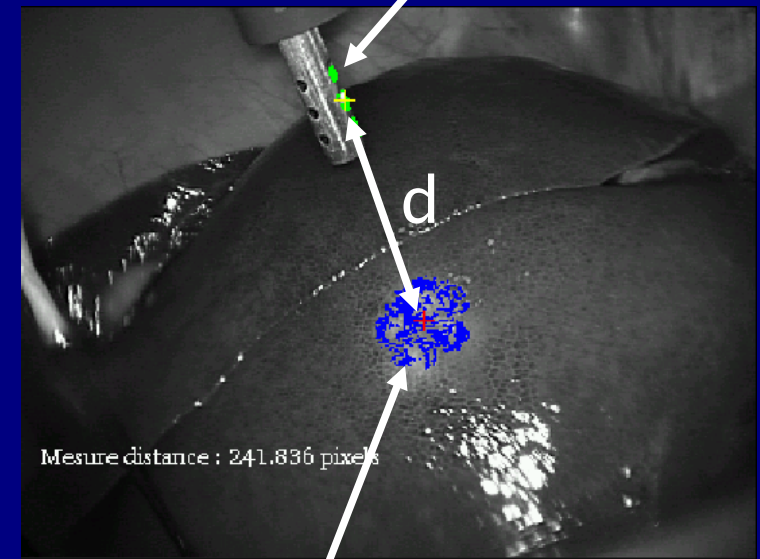
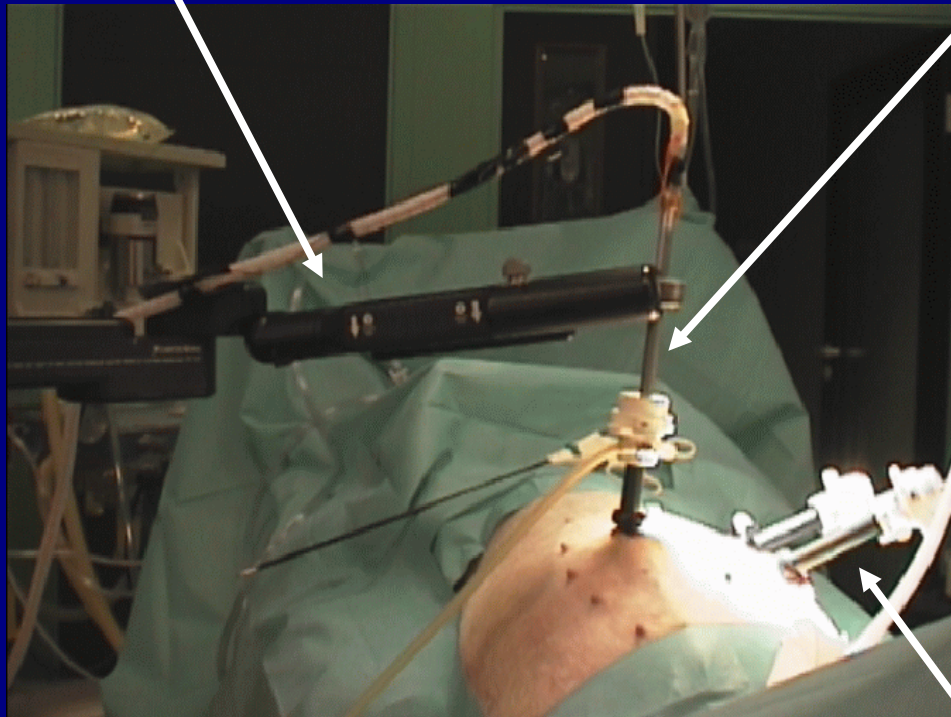
5. Active robotic filtering

Respiration – *in vivo*

Aesop arm (computer motion)

Tool

LEDs



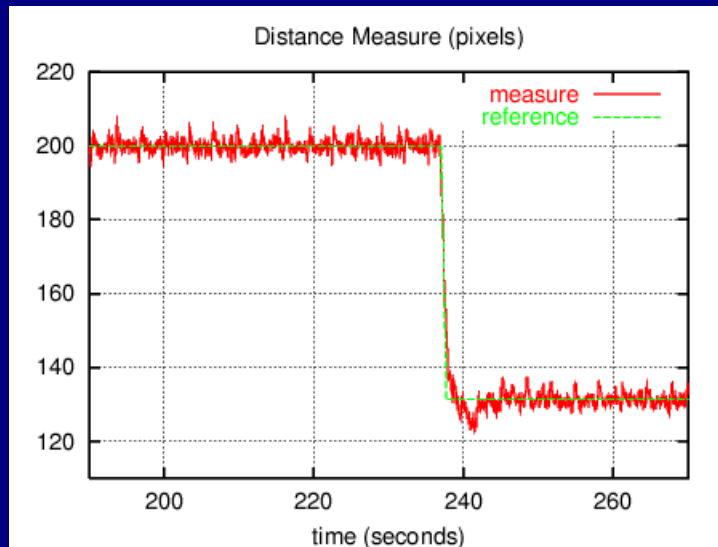
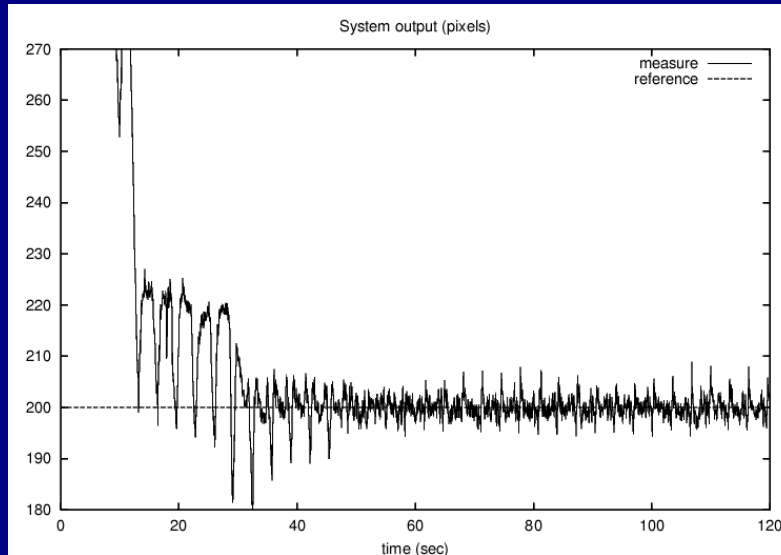
Laser spot

Endoscope trocar

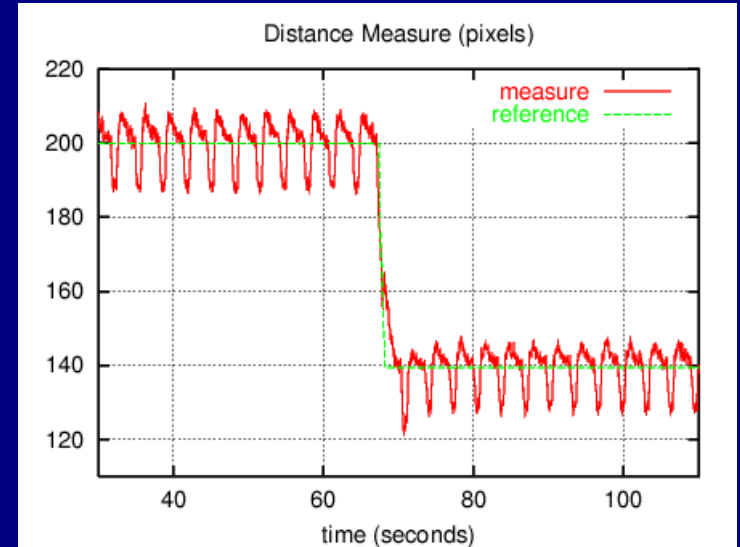
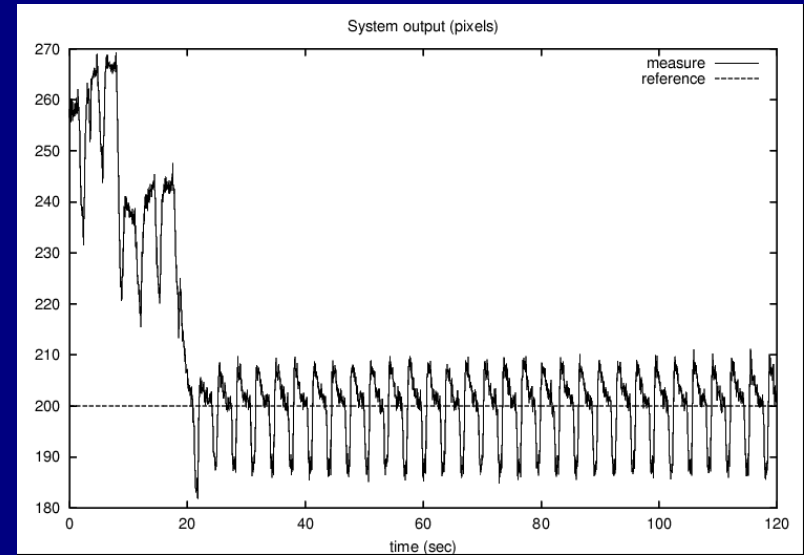
5. Active robotic filtering

Respiration – results

Repetitive control



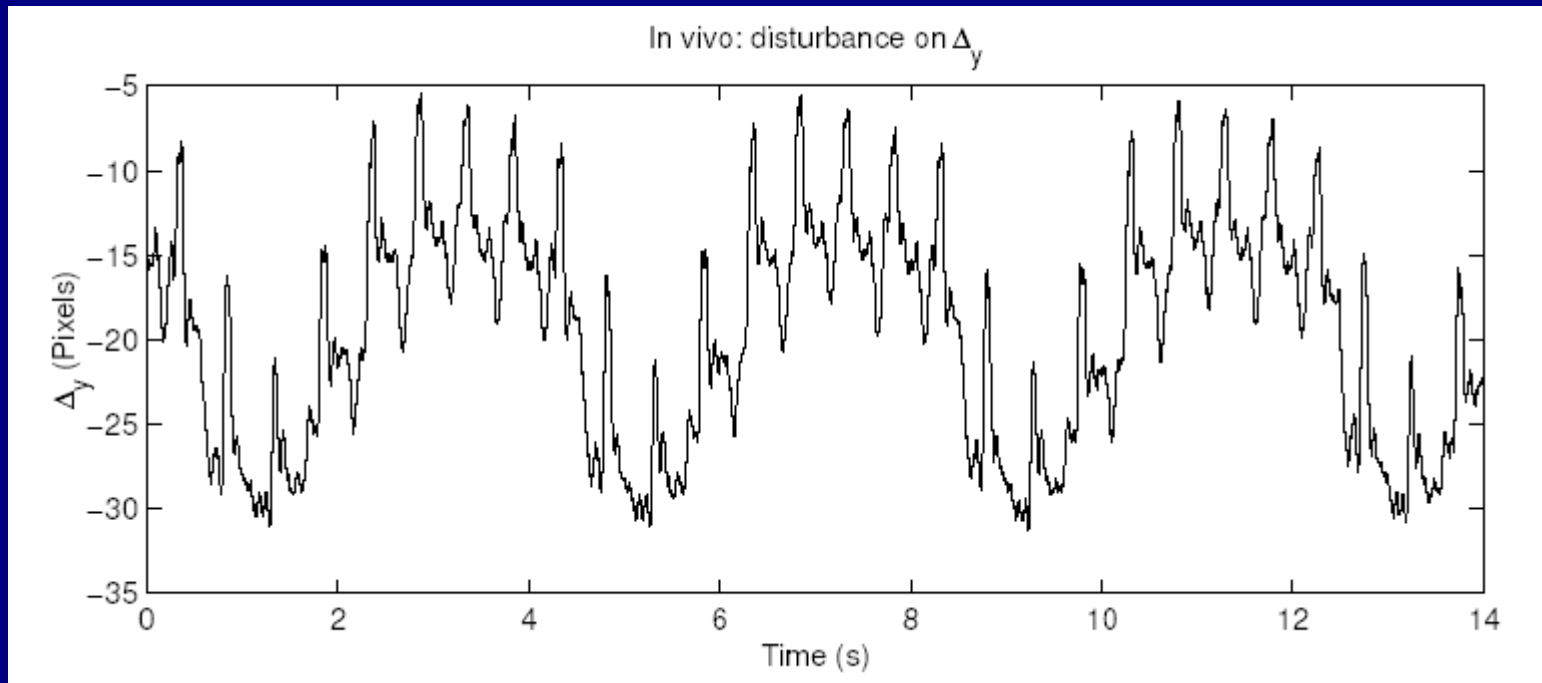
Standard control



5. Active robotic filtering

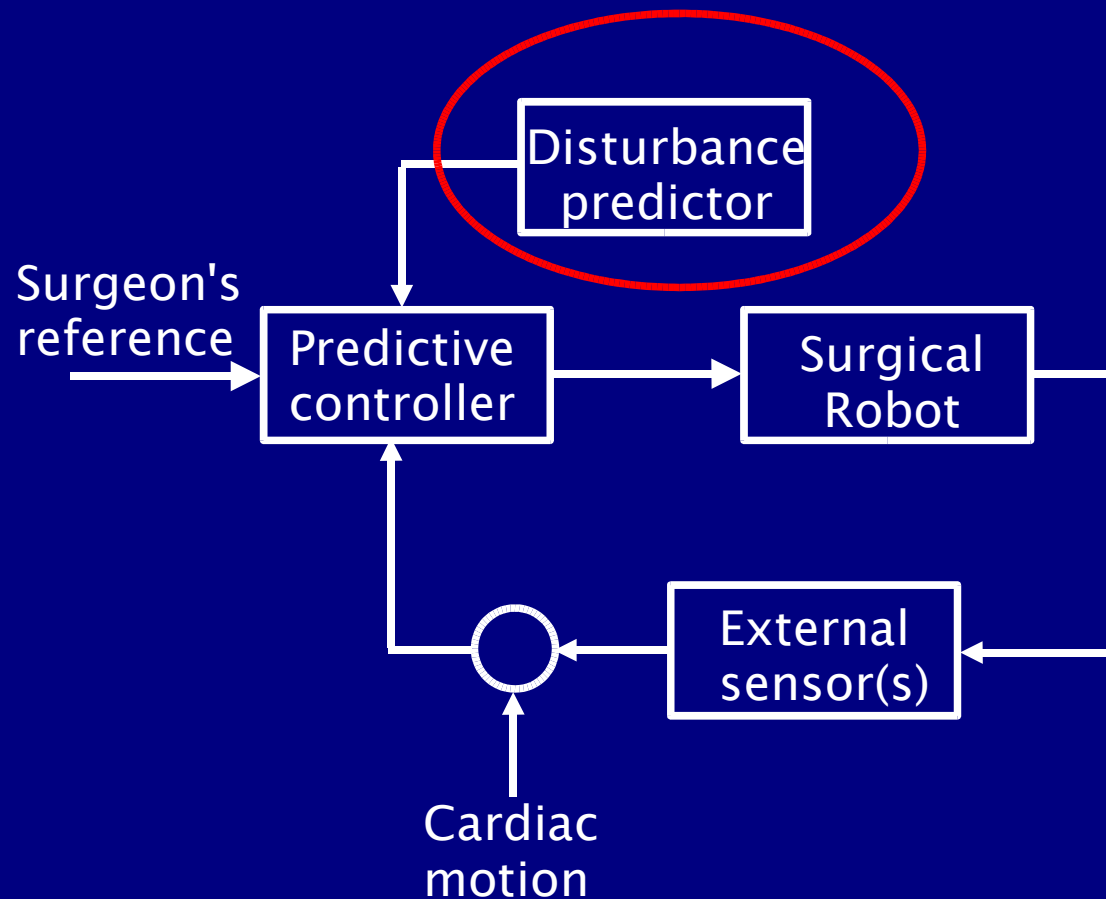
Cardiac motion

- Two non-harmonic periodic motions :
 - Respiration
 - Cardiac beating



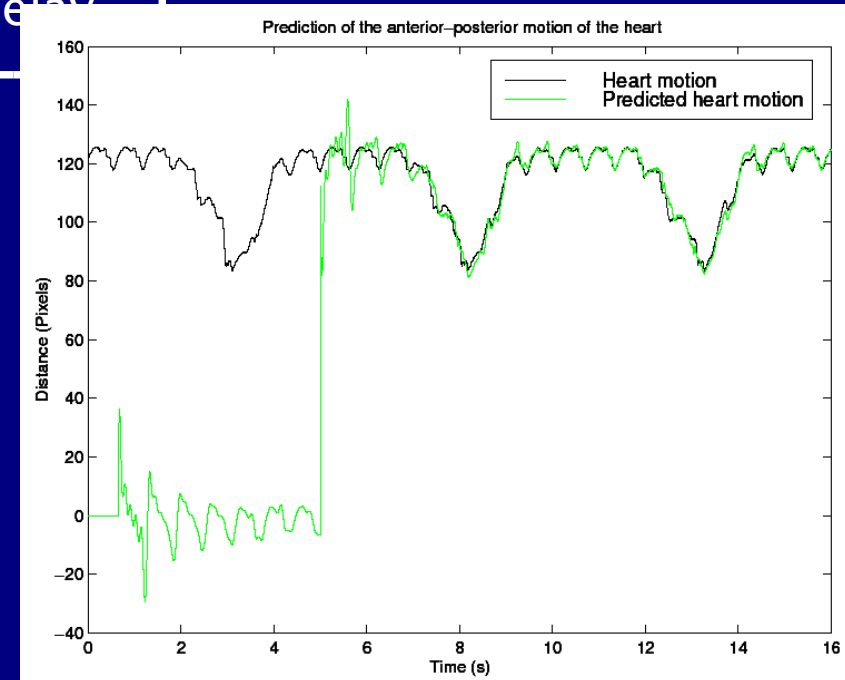
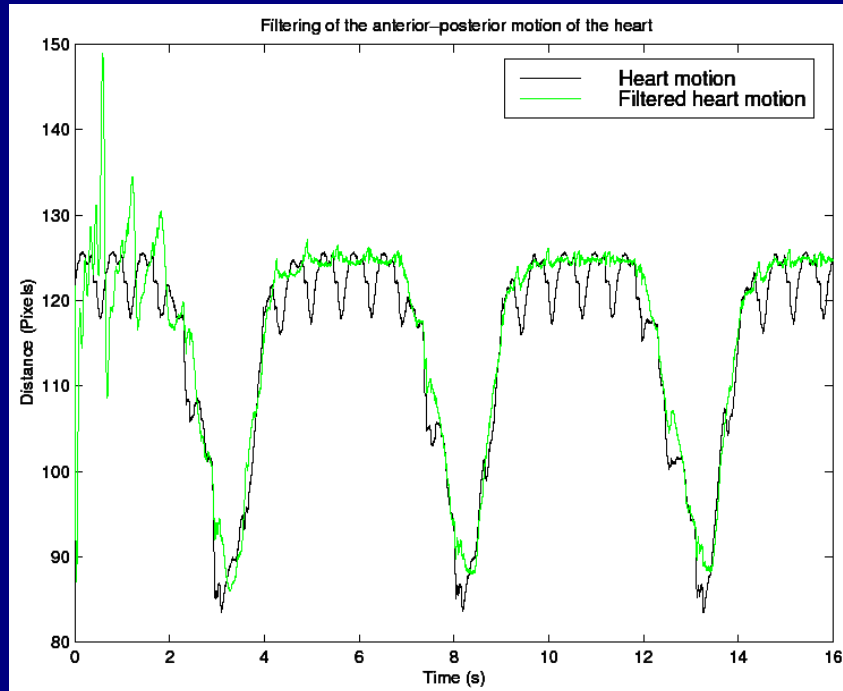
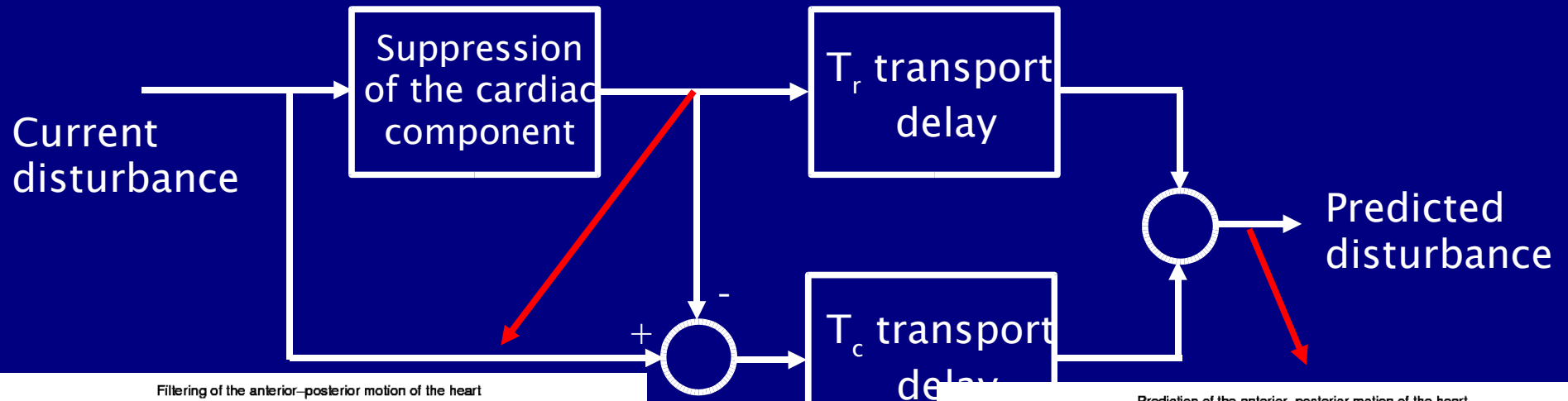
5. Active robotic filtering

Cardiac motion – predictive control strategy



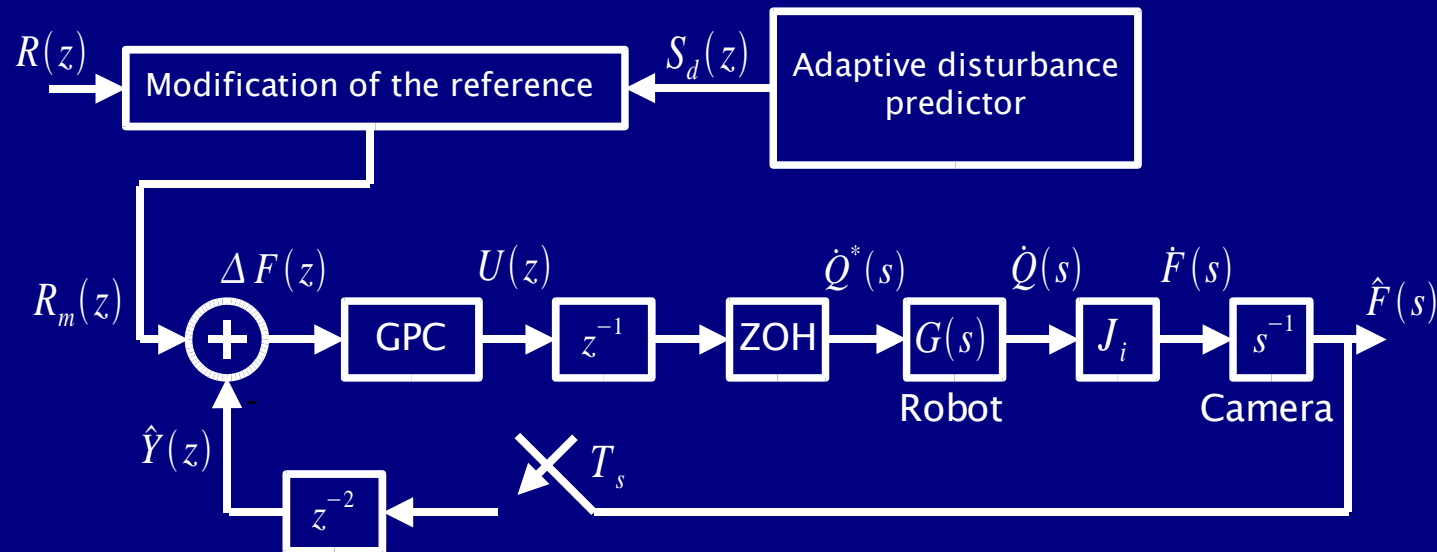
5. Active robotic filtering

Cardiac motion – disturbance predictor



5. Active robotic filtering

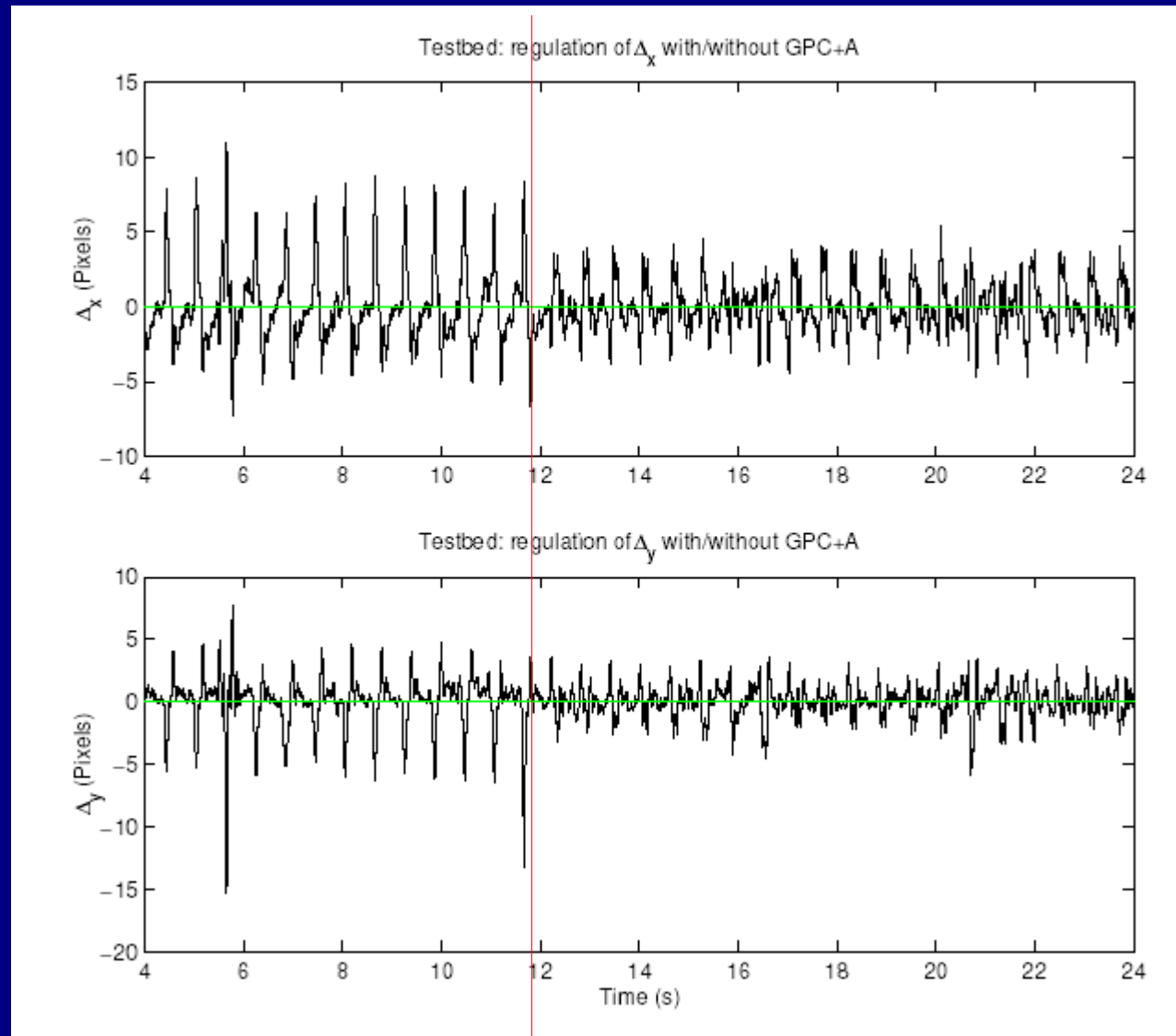
Cardiac motion – bloc diagram



$$\frac{\hat{Y}(z)}{U(z)} = z^{-3} \mathbf{Z} \left(\frac{J_i G(s)}{s^2} \right)$$

5. Active robotic filtering

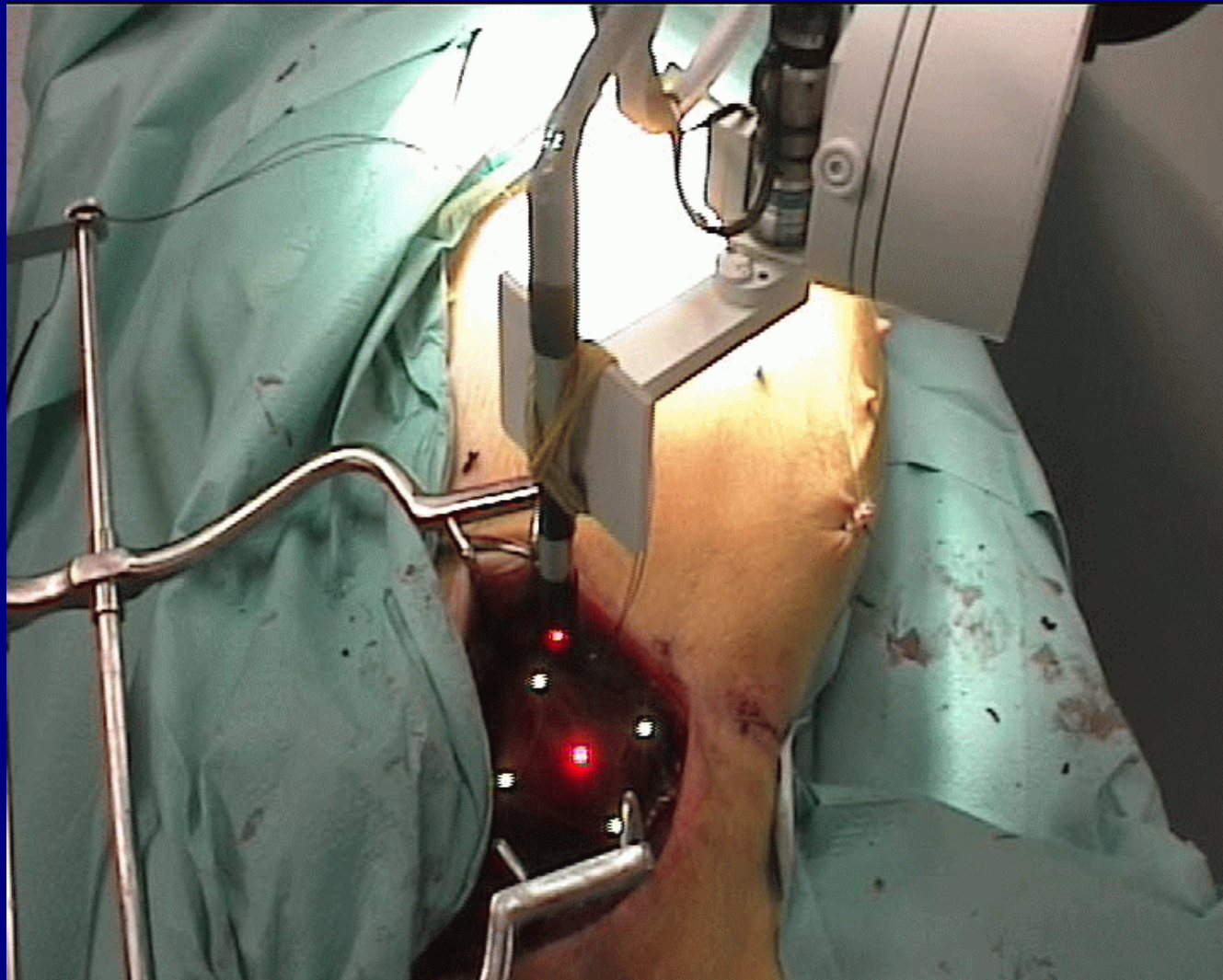
Cardiac motion – testbed results



Disturbance estimator is switched on

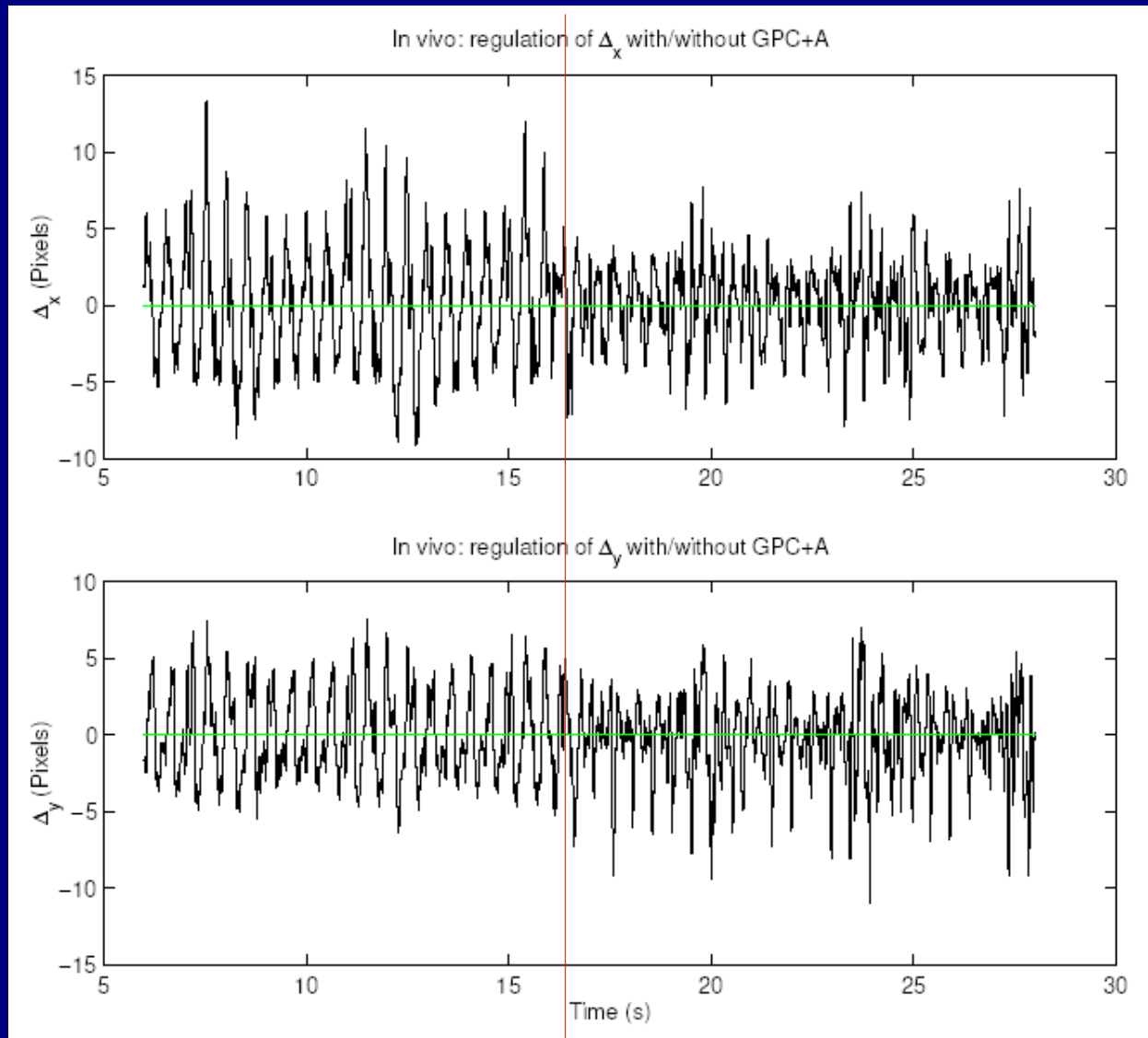
5. Active robotic filtering

Cardiac motion – *in vivo* experiment



5. Active robotic filtering

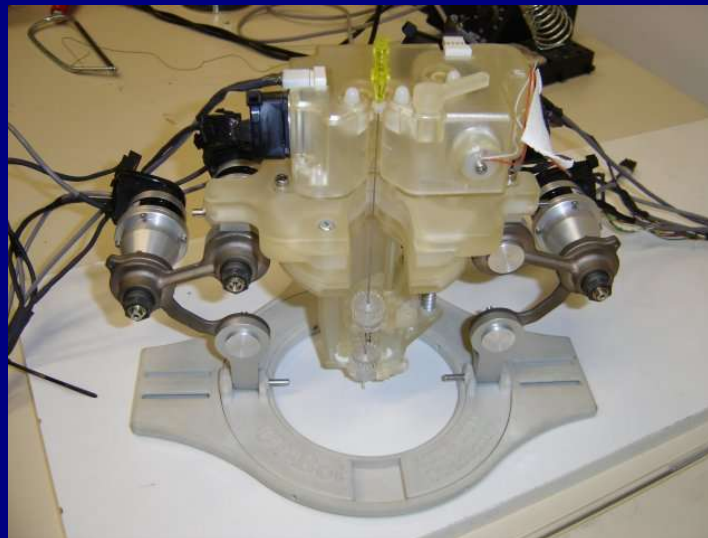
Cardiac motion – *in vivo* results



Disturbance estimator is switched on

6. Future

- Respiration compensation :
 - Use of pressure signals from the ventilator
 - Fusion of multiple measurement sources (*e.g.* external camera + CT scan)
 - Fields of applications : laparoscopic surgery, interventional US, MRI or CT-scan, radiosurgery, ...



6. Future

- Cardiac motion compensation :
 - Use of ventilator pressure and ECG signals
 - Design of a dedicated structure
 - Adaptation to semi-endoscopic and totally-endoscopic constraints
 - Use of force feedback
 - Potential applications : MICABG, interventions inside the heart.