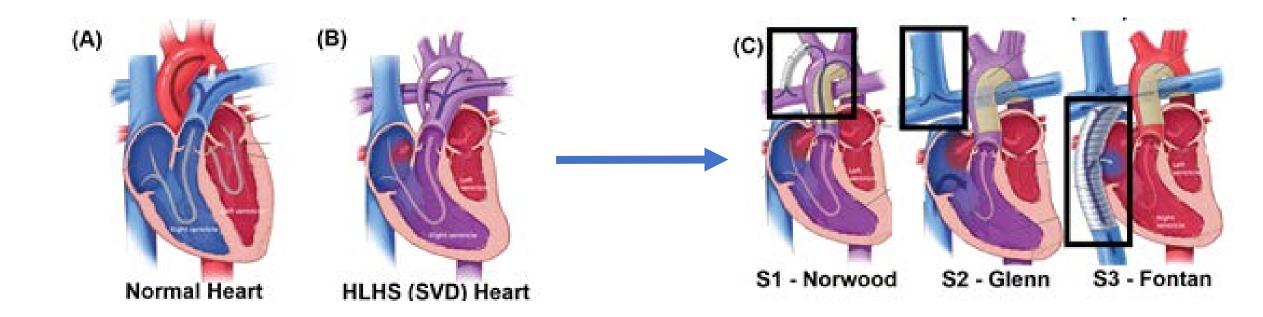
Computational Fluid Modelling for Surgical Planning of Single Ventricle Congenital Heart Defects

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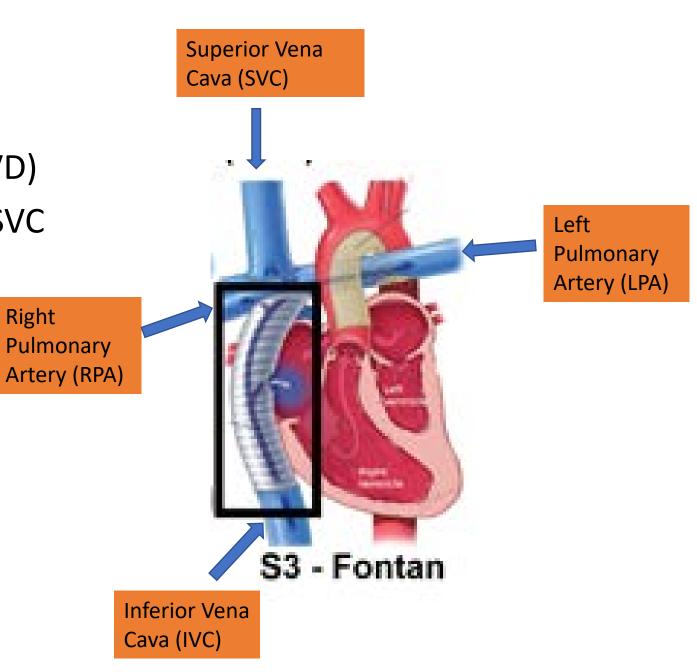
Introduction

• Single Ventricle Defects (SVD)



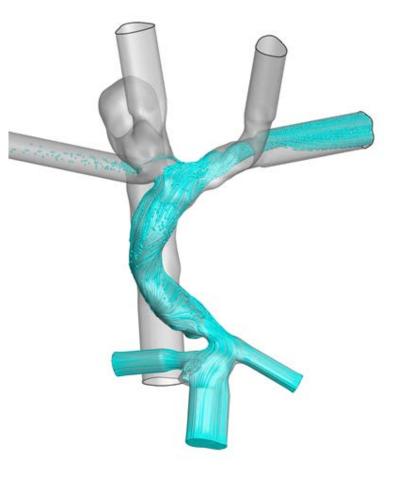
Introduction

- Single Ventricle Defects (SVD)
- Fontan: Single or Bilateral SVC



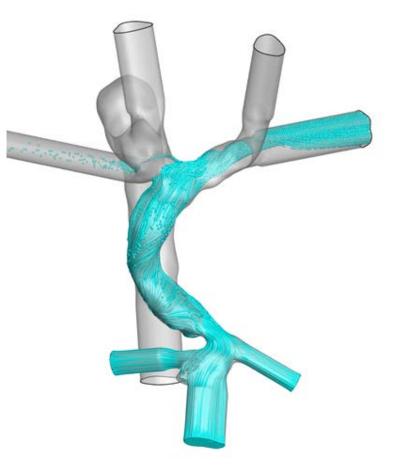
Introduction – Hepatic Flow Distribution

- Venous flow from liver
- Important to be well distributed
- Pulmonary Arteriovenous Malformations (PAVMS) (Srivastava et al.)



Introduction – Computational Fluid Dynamics

- Very difficult for surgeons to predict
 - Anatomical variations
- Computational Fluid Dynamics (CFD)
- 1. CAD model
- 2. Apply boundary conditions
- 3. Processing
- 4. Post-Processing



Purpose



Make custom scripts to speed post-processing



Evaluate effects of various parameters on Hepatic Flow Distribution

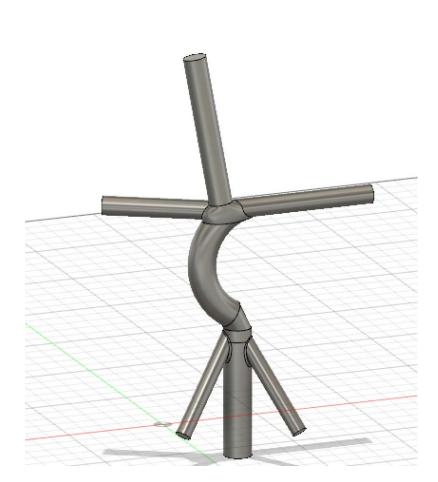
Methods – Custom Scripts

- Compute power loss, flow distributions, etc.
- Tecplot macros
- GUI
- Post-processing reduced by 2 hours



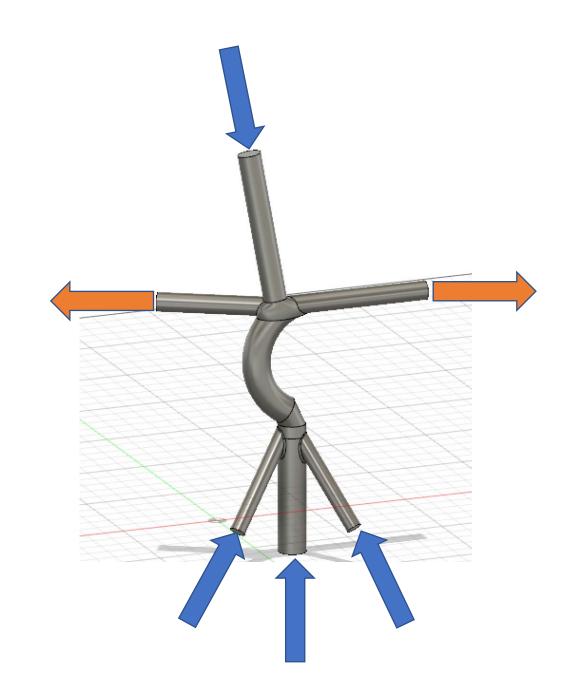
Methods – Idealized Geometry

- Reason: isolate variables
- Measurements from patient imaging for realistic sizes
- Fusion 360 CAD
- Assume cylindrical, uniform diameter
- Vary factors in series: Fontan curvature, vascular diameters, and fontan positioning



Methods – CFD

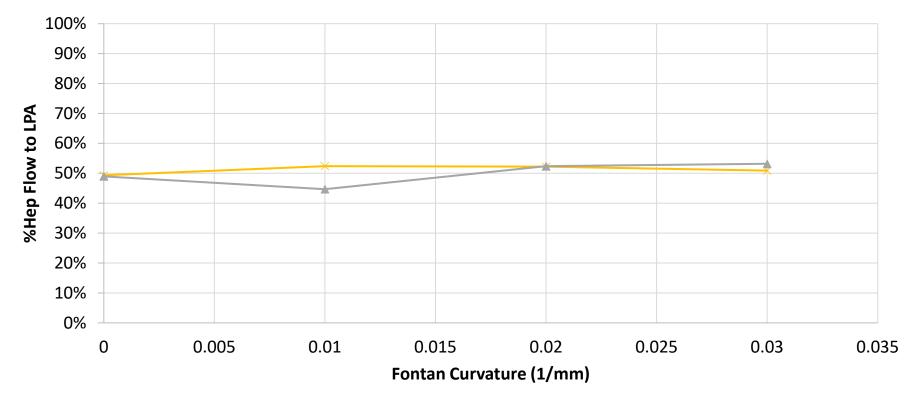
- Assumptions: Incompressible, Laminar, No-slip, Newtonian Viscosity
- Fluent[®] Solver
- Flow Boundary Conditions varied
 - Ratio between SVC to IVC flow
- Hepatic flow considered 25% of total flow



Results

• Fontan curvature series

% Flow to LPA with varying curvature



Limitations

- Idealized geometries may not be fully accurate
- Rigid wall assumption
- Steady flow assumption

Next Steps



Finish running simulations on Fontan positioning, SVC diameter 2

Perform virtual surgery using significant parameters

References

• Srivastava, D., Preminger, T., Lock, J.E., Mandell, V., Keane, J.F., Mayer Jr, J.E., Kozakewich, H. and Spevak, P.J., 1995. Hepatic venous blood and the development of pulmonary arteriovenous malformations in congenital heart disease. *Circulation*, *92*(5), pp.1217-1222.