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ABSTRACT

Modification, Reimplementation and Studies Using the Meisner Model of the Heart

by

Ari Zvi Zivotofsky

The study of left ventricular filling in both the normal and the pathological heart is of great importance. A computer model simulation of the heart with emphasis on mitral flow was designed by Meisner in 1986 and implemented in QuickBASIC. This paper discusses how the original program was altered to be able to perform "Parameter vs. Parameter" runs in which it can be observed how varying an input parameter affects output parameters. The output data is then formatted in such a way that it can be used by QUATTRO PRO, a standard spreadsheet package, to yield graphical outputs.

In addition, the original model was implemented in the circuit simulation package PSPICE. This, coupled with the graphics postprocessor PROBE that accompanies PSPICE, enables the model to yield higher quality graphs, both P-V loops as well as parameters versus time. This also permits additional information to be gained from the model and offers potential for more easily expanding the model.

MODIFICATION, REIMPLEMENTATION AND STUDIES USING THE MEISNER MODEL OF THE HEART

by

Ari Zvi Zivotofsky

A Dissertation Submitted to the Faculty of the Graduate Division of the New Jersey Institute of Technology in partial fulfillment of the requirements for the degree of Master of Science in Electrical Engineering August 1992

APPROVAL PAGE

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C

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For assistance with equipment I am indebted to Essex County College (ECC) for loaning me their licensed copy of PSPICE.

Working at another school, and especially one that has never worked with NJIT in the past, made the work of my advisor all the more essential. For his assistance in guiding me through an NJIT thesis at AECOM I thank Dr. Peter Engler.

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As always, one must thank their family. In this case the assistance of my father was two-fold, both supportive and as a technical "consultant". And lastly, my *ezer* was an *ezer* in more than just being supportive and "there" for those nights that I spent until one and two in the morning in the lab. Nomi participated in all aspects of this thesis from proofreading to her professional cutting and pasting. Thanks for everything Nome.

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CHAPTER I

INTRODUCTION

An understanding of cardiac function is essential for proper diagnosis and treatment of many heart related maladies. One of the least understood and yet essential aspects of heart function is that of diastolic filling and mitral flow. Particularly nowadays, when mitral flow can easily be imaged noninvasively with echocardiography it is essential to understand the significance of various flow patterns. A useful tool for gaining further understanding of this process is through computer simulation and modeling. As part of his doctoral dissertation in the Sue Golding Graduate School of the Albert Einstein College of Medicine of Yeshiva University, Jay Meisner in 1986 developed a model of the heart with a particular emphasis on mitral flow. This model continues to be used as a research tool by Dr. Ed Yellin and the members of his lab, and continues to be regularly upgraded by Meisner. This model was implemented in compiled QUICKBASIC and is designed for single "control" or "control-intervention" runs. Significant modification of the model requires changes in the defining differential equations.

The goal of this thesis is two-fold. First, is to provide for an additional mode of operation of Meisner's original implementation, to be called "parameter vs. parameter" runs. this enables the program to perform multiple intervention runs, one right after the other, and format the data in such a way that it can be graphed using a spreadsheet package. The second goal is to present a totally new implementation of the existing model

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using the PSPICE circuit simulation package. This will then enable the model to be more flexible in terms of additions and modifications, as well as to possibly yield new information even without modification to the model. Both of these goals were accomplished. This thesis contains the background information, including the relevant physiology and modeling, the development of the Meisner model, the methods of accomplishing both goals and examples of the results.

CHAPTER II

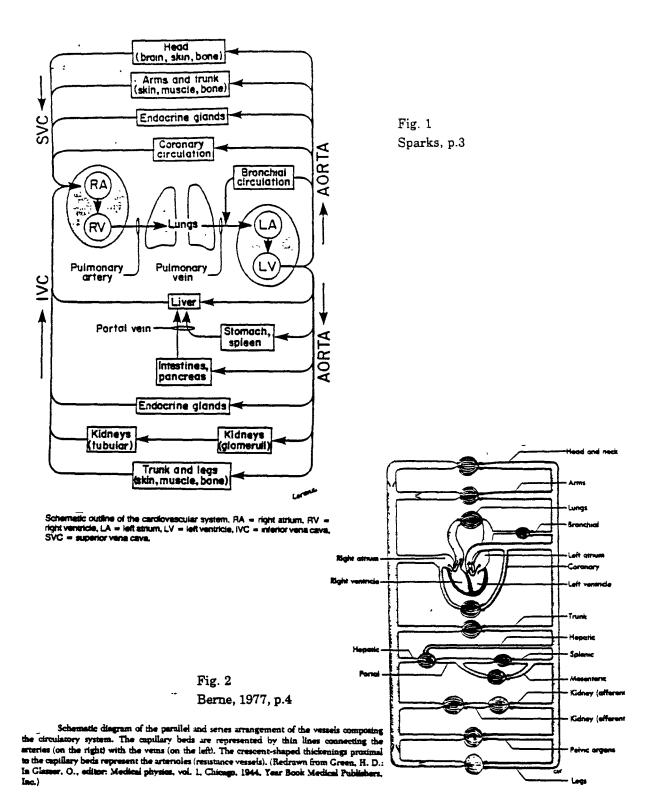
ANATOMY and PHYSIOLOGY:

Introduction: Because the major focus of this paper is modeling the mechanical functioning of the heart, with a particular emphasis on transmitral blood flow, the anatomy and physiology required as background is primarily that of the heart. However, because the heart serves as the principal pump in the body's circulatory system, before discussing the heart it is necessary to briefly describe the overall functioning of the circulatory system.

Almost all physiological processes within the body involve the maintenance of the internal environment, or homeostasis. A number of different body systems, including the endocrine, nervous and circulatory systems, participate in this regulation. The circulatory system serves to transport and distribute essential substances to the tissues and to remove by-products of metabolism. It also shares in humoral communication, the immune response, and the homeostatic regulation of body temperature.

<u>Circulatory system:</u> The circulatory system consists of a pump, a series of distributing and collecting tubes and an extensive system of thin vessels (the capillaries) that permit the rapid exchange between the tissues and these vascular channels. In mammals this system is actually a double system, consisting of two pumps in series, the left and right hearts, and two corresponding distensible, closed vascular systems. These are the <u>pulmonary circulation</u>, originating from the right heart, propelling blood through the lungs for the exchange of oxygen and carbon dioxide, and the <u>systemic circulation</u>, flowing from the left heart, propelling blood to all other tissues of the body.(See figures 1 and 2.) Each system has a distribution manifold (the pulmonary artery and the aorta, respectively) which also acts as a capacitance (storage chamber), and a peripheral circulation which distributes, transports and controls flow, and is predominantly resistive (frictional).

Because the double heart and the lungs constitute a series branch that drives all the parallel connected branches of the entire circulatory system, one can start at any point in tracing the flow of blood. From the left heart, blood is pumped intermittently into the <u>aorta</u>, the largest artery in the body. Although this pumping is intermittent, flow to the periphery is continuous due to the distension of the aorta and its branches during flow out of the heart, which results in the storing of blood, followed by elastic recoil of the aorta and the large arteries while the heart is relaxing, releasing the stored blood and maintaining the continuous flow. The blood moves rapidly through the aorta and into the arteries which branch off from it. These arteries become progressively narrower and their walls become thinner and more muscular. From these the blood proceeds into still narrower, even more muscular and less elastic arterioles, which are characterized by a relatively large resistance to flow. Thus, both pressure and velocity drop significantly at this stage. Many exceedingly thin walled, narrow capillaries branch from each arteriole. Although the capillaries are very narrow, the extraordinary branching ensures that the capillary bed has a greater total cross-sectional area than the rest of the circulatory system and thus guarantees that almost all cells in the body are within a few cell diameters of at least one of these smallest branches of the circulatory system. The capillary walls are only one cell thick, and the blood flow rate at this point is slow --- conditions ideal for diffusion between



the blood and its surrounding tissue, enabling delivery of the needed products and removal of waste. As seen in figures 1 and 2, there are several exceptions to the usual pattern of circulation, most notably the liver and kidneys.

On the return trip to the heart the blood travels through the capillaries and is collected in venules of increasing diameter and cell wall thickness. It proceeds into the veins and eventually into the two largest veins, the <u>superior and inferior vena cavae</u>. This returning blood enters the right side of the heart from where it is pumped into the pulmonary arteries. Parallel to the systemic circulation, blood flows from the pulmonary arteries into arterioles and then into the pulmonary capillaries. These capillaries are all located around alveoli (tiny air-sacs) in the lungs, where the exchange of gases occurs. The blood then makes its way back through the pulmonary venules to the pulmonary veins and into the left heart.

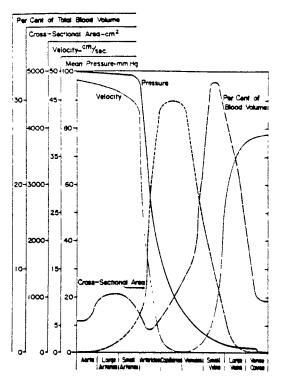
All blood pumped out of the right heart is received by the lungs and then returned to the left heart. Thus, the lungs is the last organ that all blood pumped out of the left heart has passed through. In contrast, peripheral organs and tissues each receive only a small fraction of the blood pumped by the left heart. Accordingly, all blood returning to the right side has not been through any particular organ, for example the kidney or liver.

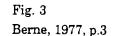
The circulatory system is a closed loop with a constant volume. Any acute increase in volume in one region must be compensated for by a corresponding decrease in an other. Pressure and velocity in the different parts of the circulatory system vary greatly and are determined by many variables, including overall flow rate and volume, vessel thickness, vessel contractibility and compliance. (See figure 3.)

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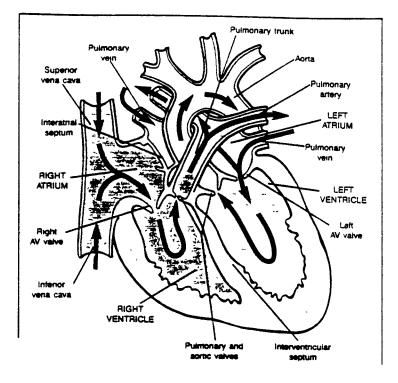
Anatomy of the heart: The heart is a muscular organ that pumps blood through the circulatory system. It consists of a series of four separate chambers, two atria and two ventricles one of each in the right and in the left hearts, that have one-way valves to direct the flow of blood. (See figure 4.) The <u>atria</u> are thin walled, low pressure chambers that, while their pumping has significance, function more as large reservoir conduits of blood for their respective ventricles than as important pumps for the forward propulsion of blood. The <u>ventricles</u> serve as the main pumping chambers of the heart and are responsible for most of the propulsion of the blood. Located between the atrium and the ventricle in each side of the heart are <u>AV (atrioventricular) valves</u> which permit blood to flow from the atrium to the ventricle but not in the other direction. The AV valve in the right heart is called the tricuspid valve and the left AV valve is called the <u>mitral valve</u>. The tricuspid valve consists of three overlapping cusps and the mitral valve two overlapping cusps. The right ventricle pumps into the pulmonary artery with the opening regulated by the <u>pulmonary valve</u>, while the left ventricle leads into the aorta through the aortic valve. These valves both consist of three cuplike cusps and are known as semilunar valves. During contraction of the ventricles these valves permit blood to flow out of the ventricles into the arteries, and they prevent blood from moving in the opposite direction during ventricular relaxation. All four of these valves act primarily in a passive manner; their being open or closed depending primarily upon the pressure difference across them and the flow through them.

In contrast, the veins that lead into the atrium are not capped by valves. Thus at the entrance of the vena cavae into the right atrium and of the pulmonary veins into the left atrium there are no valves and the





Pressure, velocity of flow, cross-sectional area, and capacity of the blood vessels of the systemic circulation. The important features are the inverse relationship between velocity and cross-sectional area, the major pressure drop across the arterioles, the maximal crosssectional area and minimal flow rate in the capillaries, and the large capacity of the venous system.



Vander, 1990, p.363

Fig. 4

Diagrammatic section of the heart. The arrows indicate the direction of blood flow possibility of backflow exists. In actuality, however, during atrial contraction very little blood flows back into the veins. This is explained by three aspects of atrial contraction. First, the pressure generated by atrial contraction is not so large as to cause extensive backflow. Second, atrial contraction causes the veins at their site of entry into the atrium to become constricted, which increases the resistance to backflow; and third, the inertia of the inflowing blood tends to counter any backflow.

Cardiac Cycle:

Introduction: The orderly process of atrial and ventricular contraction and relaxation is controlled by precisely timed electrical signals generated by the cyclical depolarization and repolarization of the cardiac cells. The external recording of these signals produces the electrocardiogram (ECG). This orderly electrical process triggers an orderly mechanical process, known as the <u>cardiac cycle</u>, responsible for pumping the blood. This cycle of events occurs almost simultaneously in the left and right hearts, with higher pressures on the left side. It is therefore adequate to describe the process once, conventionally for the left side.

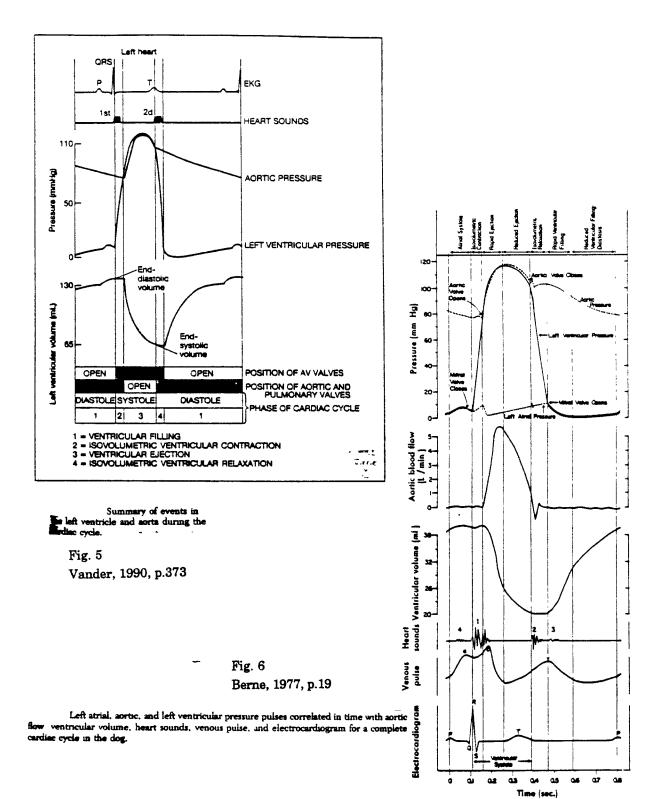
The cardiac cycle is divided into two major phases, both named for events taking place in the ventricle. Specific demarcation of each phase is difficult to define. Roughly, <u>systole</u>, comprising about one-third of the cycle, is when the ventricle is contracting and blood is ejected into the arteries; <u>diastole</u>, occupying the remaining two-thirds of the cycle, is the part of the cycle during which the ventricle relaxes and is filled with blood. Although the major concerns in this paper are mechanical, i.e. pressures, flows, stored volumes, etc., in describing the cardiac cycle the important electrical

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and auditory milestones will be pointed out as well. Figures 5 and 6 show the various events of the cardiac cycle.

<u>Diastole:</u> A significant portion of ventricular filling occurs immediately on the opening of the mitral valve when blood that had returned to and stored in the atrium during the prior ventricular systole is abruptly released into the relaxing ventricle. This period is known as the rapid filling phase and lasts about 100 msec. This phase is preceded by a decrease in ventricular pressure until it is below atrial pressure, allowing for the opening of the AV valve and the inrush of blood. During this phase of rapid filling there is a decrease in both atrial and ventricular pressures as well as a sharp increase in ventricular volume, followed by an increase in pressures causing the two chambers' pressures to equilibrate. This rapid ventricular filling is responsible for the faint third heart sound discernible on a phonocardiogram, and audible in certain physiologic conditions, such as in young people and in athletes with large stroke volumes, and in certain diseased states with large hearts. The flow then oscillates due to oscillations in the pressure gradient and thus, following rapid filling there is a <u>slow filling phase</u> known as <u>diastasis</u>, in which blood returning from the periphery uses the atrium as a conduit to slowly add volume to the ventricle. This phase is characterized by a gradual increase in atrial, ventricular and venous pressures and in ventricular volume. Its duration depends on heart rate, since with higher heart rates the diastolic period shortens more than the systolic.

<u>Atrial systole</u>, which occurs towards the end of the diastolic phase in the cycle, completes ventricular filling by "topping it off" with a final small volume of blood, about 10-15% of the total filling volume -- the "atrial kick". This is the actual pumping of blood by the atrium through the AV values



into the ventricle and is initiated by an electrical stimulus seen as the <u>P</u>-<u>wave</u> on the ECG. Atrial systole causes a further rise of atrial (known as the <u>"a" wave</u>), ventricular and venous pressures and in ventricular volume. The few small vibrations caused by atrial systole together with the concurrent changes in ventricular compliance account for the audible <u>fourth or atrial heart sounds</u> seen only on the phonocardiogram or heard in certain diseased states. Throughout this process of ventricular filling, atrial pressure is never more than only slightly higher than ventricular pressure. Though the pressure gradient across the AV valve is small (about 1-3 mm Hg), it is a large enough gradient to maintain the flow which in turn keeps the valves open.

The actual importance of atrial systole in ventricular filling is a subject of much controversy. Early studies (Harvey, 1628) felt that most of the ventricular filling volume was due to atrial pumping. The first modern investigation (Henderson, 1906) reached the opposite conclusion, suggesting that atrial systole contributed almost nothing. More recent clinical investigations have found a wide range of values for the atrial pump contribution to ventricular filling, all somewhere between these two extremes (Meisner, 1986). Its relative contribution and importance, however, certainly varies with the conditions. For instance, in a slow beating heart in which there is time in diastole to complete the entire rapid filling phase plus some diastasis, atrial systole is certainly less important than in tachycardia where rapid filling may not even have time to be completed, certainly no slow filling occurred. Additionally, in a normal heart in which the AV valves present little resistance, the contribution of atrial systole to ventricular filling should be different than in a case of mitral stenosis, where there is marked narrowing of the valves, allowing for less, more difficult blood flow. Traditionally, it has been assumed that in mitral stenosis the contribution of atrial systole was of greater importance. However Meisner, et al. (1991) have recently demonstrated that atrial systole is in fact less significant in mitral stenosis that in a normal heart.

<u>Systole</u>: Atrial depolarization, the electrical signal originating at the SA node which initiated atrial contraction and is seen as the P wave on the ECG, is followed by an electrically quiet period during which the atrium contracts and the electrical signal, traveling to the ventricle, is delayed by the AV node. This interval, known as the PR interval, is approximately 0.1 seconds long. Upon reaching the ventricle, the electrical signal initiates ventricular contraction, or systole. This signal is seen as the R wave in the <u>QRS complex</u> on the ECG. The ventricular contraction causes a quick, sudden rise in ventricular pressure which, due to the very small pressure gradient that existed across the AV valves, causes an almost immediate change in the direction of the pressure gradient. In general, the healthier the heart the more rapid will be this rise in pressure; dP/dt is higher. Though the change in direction of the pressure gradient is almost immediate, it takes about 25 msec. to overcome the momentum of the inflowing blood and for the mitral valve to actually close (Laniado, 1973). Though this delay in mitral valve closure due to inertia is now well known and accepted, it is important to note that the graphs found in many standard texts, such as the one in figure 6, still do not take this into account, and show the mitral valve closing at the pressure cross-over. The closing of the mitral and the tricuspid valves produces the first audible heart sounds as well as the <u>"c" wave</u>. The mitral and tricuspid valves, though not closing simultaneously, do so so closely in time that in a healthy

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heart they are heard as one heart sound with the mitral valve closure contributing the louder portion. Although the precise definition of the end of diastole is open to debate, by many physiologic definitions it is at this point, the instant the the AV valves close. The quantity of blood in the ventricle at this time, which is the largest volume to be attained during the entire cycle, is therefore called the <u>end diastolic volume</u> (EDV). The pressure rise in the ventricle at the start of systole does not immediately increase the pressure above that of the aortic pressure and it is thus insufficient to force open the aortic valve. With both the mitral and aortic valves closed the volume of blood in the ventricle remains constant for a short period. Since blood, like water, is essentially incompressible, in response to ventricular contraction the ventricular walls develop tension but cannot shorten and the ventricular pressure continues to increase, in a phase known as isovolumetric contraction. The increased pressure within the sealed ventricle is also transmitted to a small degree across the closed aortic valve, resulting in a small increase in aortic pressure.

When ventricular pressure exceeds aortic pressure the aortic valve opens, allowing blood to flow from the ventricle to the aorta. This constitutes the <u>ejection phase</u>. The first, shorter part of the phase is known as the <u>rapid ejection phase</u>. It is characterized by a (continued) sharp rise in ventricular and aortic pressures, a sharp decrease in ventricular volume and a large aortic blood flow. At this time there is also a sudden sharp drop in atrial pressure, because the base of the heart descends allowing the atrium to stretch and reduce its pressure. However, throughout the remainder of ventricular systole, atrial pressure rises gradually because the mitral valve is closed and the atrium is stretching as new venous blood is continually returning to it. After approximately the first third of the ejection phase, aortic flow peaks as runoff of blood from the aorta to the periphery exceeds the ventricular output. Almost immediately thereafter ventricular pressure begins to decrease and rapidly falls below aortic pressure. During this <u>phase of reduced ejection</u> the aortic valve remains open and blood continues to flow even though aortic pressure is now above ventricular pressure. This continued flow is possible due to the forward inertia of the flowing blood. The amount of flow, however, gradually decreases as ventricular pressure falls well below aortic pressure until there is almost no flow and finally the aortic valve is forced closed.

The total volume ejected from the ventricle during systole is called the <u>stroke volume (SV)</u> and is normally about 60% of the EDV; that which remains in the left ventricle after systole, the smallest ventricular volume attained in the cycle, is termed <u>residual volume</u> or <u>end systolic volume</u> (<u>ESV</u>). <u>Cardiac output</u>, another important measure of heart function, is defined as the amount of blood ejected by the heart per unit time. It is therefore the product of heart rate and stroke volume and in an average adult human is about 5 - 6 Liters/minute.

The closing of the aortic and pulmonic valves produces the <u>second</u> <u>audible heart sound</u>. These two closures are physiologically split during inspiration producing a "split sound", and merge during expiration yielding a single second heart sound. Pulmonary venous return which has been flowing into the left atrium throughout systole continues to do so after the closing of the aortic and pulmonic valves. The small increase in atrial pressure that occurs throughout mid-late systole due to this venous return is called the <u>"v" wave</u>. Ventricular repolarization, indicated by the <u>T wave</u> on the ECG, initiates <u>ventricular relaxation</u>. During the early part of ventricular relaxation the valves at both ends of the ventricle are closed. The ventricle thus relaxes with no change in volume, resulting in a precipitous fall in ventricular pressure. This phase is known as <u>isovolumetric relaxation</u>. The ventricular pressure continues to fall until just below atrial pressure, at which time the mitral valve opens and the rapid filling phase occurs again.

<u>Starling's law</u>: An important factor in establishing SV is the force, or pressure, with which blood is ejected when the heart contracts. It has been shown that, similar to skeletal muscle, longer initial length of the cardiac muscle results in an increased force development during contraction. It is possible in experimental conditions to stretch cardiac muscle so far as to begin reducing the developed force. It is rare for this to occur, however, in an intact, operational heart. This length-tension relationship in the heart, which can be viewed as a transfer function relating EDV to force developed in systole, is known as the Frank-Starling relationship or simply <u>Starling's law of the heart</u>. (See figures 7 and 8.)

Three factors which are important in determining stroke volume are preload, afterload and contractility. The load stretching a resting muscle is called the <u>preload</u>. This is what determines the force of contraction according to Starling's law. When the muscle contracts, the load, or impedance, that it then sees, which it did not see before the contraction, is called the <u>afterload</u>. In the heart the afterload is the aortic pressure which is felt only after contraction starts and the aortic valve opens. Figure 9 demonstrates the effect of increased afterload on ventricular pressure and

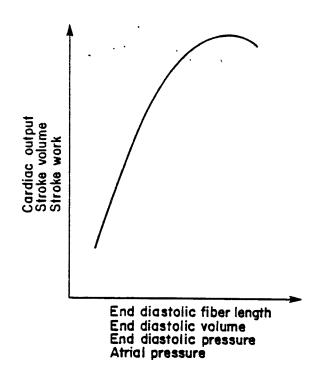
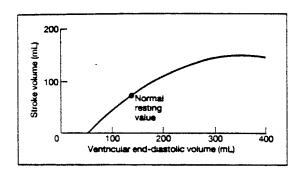


Fig. 7 Sparks, p.61

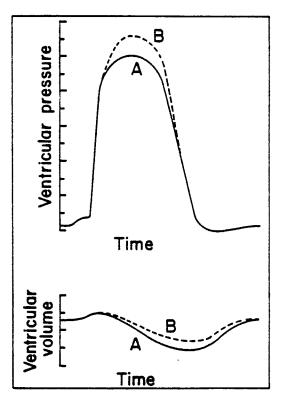
Ventricular function curve. Several combinations of variables can be used to plot the ventricular response curve.

Fig. 9 Sparks, p.69



Relationship between ventricular end-diastolic volume and stroke volume (Starling's law of the heart). The data were obtained by progressively increasing ventricular filling pressure with a heart-lung preparation. The horizontal axis could have been labeled "sarcomere length," and the vertical "contractile force." In other words, this is a length-tension curve.

Fig. 8 Vander, 1990, p.378

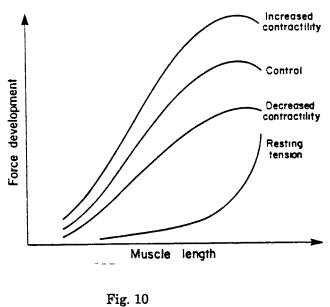


Effect of aortic pressure on ventricular function. normal (A) and elevated (B) aortic pressure.

volume. One more factor in determining SV, <u>contractility</u>, is defined as the force of contraction at any given length, i.e., on which Starling curve is the heart functioning. Therefore, increased contractility translates into increased force at a given length. (See figure 10.)

Unlike the pressure developed in the ventricle during systole, which rises very steeply for small early changes in EDV, the pressure developed during diastole due to the ventricular filling is initially quite flat, indicating that large increases in volume can be accommodated with only a small increase in pressure (See figure 11). However, with greater filling the heart becomes much less distensible, as evidenced by the sharp rise of the diastolic curve at higher volumes. Another factor in determining the pressure in the ventricle is the shape of the ventricular chamber. A good approximation for the relationship between ventricular pressure and ventricular diameter is <u>Laplace's law</u> for the sphere in which stress developed is directly proportional to the radius.

Aortic Flow: Since the primary goal of the cardiac cycle is to efficiently pump blood throughout the body, and since all the blood that will circulate begins by being pumped out of the ventricle into the aorta, it is important to consider the graphs of aortic pressure and flow. As can be seen in Fig. 12, the aortic pressure climbs rapidly at the beginning of systole as the aortic valve opens and blood rushes from ventricle to aorta. This pressure rise and subsequent "cap" in the pressure curve follows the ventricular pressure curve, lagging slightly behind in time. As the left ventricular pressure drops and the aortic valve closes, the compliant and stretched aorta tries to send some blood back towards the ventricle. This attempted backflow, which is stopped by the closed valve, accounts for the notches in the aortic pressure wave at the end of systole. The aortic



Sparks, p.51

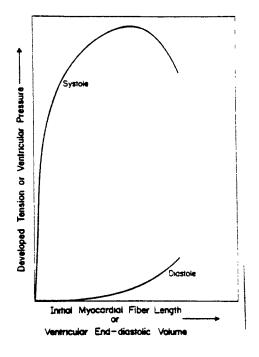


Fig. 11 Berne, 1977, p.76

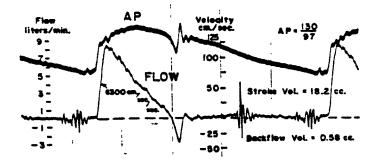


Fig. 12 Aortic Pressure (top) and Flow (bottom) Little, 1989, p.102

pressure then begins to decay, usually from about 120 to 80 mm Hg, at which point the next pulse from the ventricle drives it back up. The aortic flow curve can thus be seen to rise rapidly upon the opening of the aortic valve, decay as the pressure difference decreases and then have a slight apparent negative flow at the end of systole.

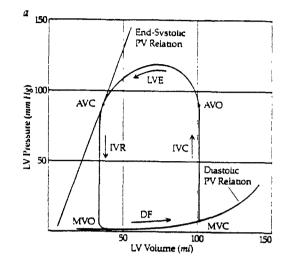
<u>Mitral Flow</u>: Since it is obvious that an empty ventricle cannot eject, an understanding of left ventricular filling, and thus mitral flow, is of importance. As can be seen in the graphs of ventricular volume in Figures 5 and 6 and of mitral flow in Figure 39, immediately upon the opening of the mitral valve there is a tremendous inrush of blood into the ventricle. The system then behaves as an underdamped system, flow decreasing to near zero and then rising up again into another peak. As this flow rate decays for a second time the atrium kicks in producing yet a third peak, which then falls to zero when the mitral valve closes. The peak flow rate through the mitral valve during early filling and during atrial contraction are known, respectively, as the <u>E and A waves</u>. The <u>L wave</u> is the mid-diastolic rebound in flow. The flows through the mitral valve can be imaged and quantified by echocardiography and the echocardiographic E/A ratio is a widely used clinical index of the cardiac condition.

<u>P-V Loops</u>: In contrast to the above discussions in which all flows and pressures were plotted versus time, an alternate, and sometimes very useful, plot is that of left ventricular pressure vs. left ventricular volume (See figure 13). Isovolumetric contraction and relaxation cause changes in pressure at constant volumes and hence appear as vertical lines on the graph. As can be seen on the graph, after the mitral valve opens, although the ventricular volume begins to increase, the pressure initially continues to fall as the ventricle relaxes. Eventually the pressure increases due to the increased volume, though only slightly as discussed above. After the aortic valve opens the ventricular pressure continues to rise for a time as the ventricle is contracting, but eventually it begins to fall, causing the aortic valve to close and isovolumetric relaxation to commence. The area within the closed loop on the p-v graph is the <u>stroke work</u> (SW) of the ventricle. SW is defined as stroke volume x mean atrial pressure (MAP). From some of the other graphs (see figure 14) it can be seen how the p-v loop can be useful in understanding the relation between afterload, preload and the pressures and volumes by comparing the various loops.

Fig. 13 Rubinstein, 1985, II:4,1

Pressure-volume loops depict the relative changes in left ventricular pressure and volume that develop during the cardiac cycle for a normal heart

During the normal cardiac cycle, as the mitral valve closes (MVC), isovolemic contraction (IVC) occurs and the pressure rases until the aortic valve opens (AVO). Left ventricular ejection (LVE) then ensues accompanied by a further increase in ventricular pressure as the left ventricular volume fails. After ejection, the ventricular pressure starts to fall and when the aortic valve closes (AVC), isovolemic relaxation (IVR) takes place with a marked drop in left ventricular pressure. When the mitral valve opens (MVO), diastolic filling (DF) occurs, and volume increases with little change in pressure. The end-diastolic volume and end-diastolic pressure occur just before systole and the closing of the mitral valve. The point at the end of diastole represents the end-diastolic pressure-volume relation, and the point of aortic valve closure represents the end-systolic pressure-volume relation.



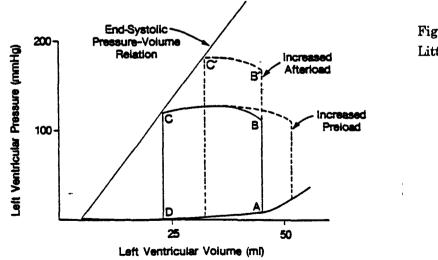


Fig. 14 Little, 1989, p.186

Effect of increased preioad and increased afterload on the normal pressure-volume loop (ABCD)

CHAPTER III

MODELING:

Introduction: The concept of representing the mechanical activities of the heart through the medium of mathematical equations or electrical circuit analogs has been employed for many years, with varied reasons for developing such models. Two basic types of models have been employed -the <u>distributed parameter model</u> and the <u>lumped parameter model</u>. These two varieties of models are the basic two categories universally used in modeling.

<u>Transmission_lines:</u> In electrical engineering the distinctions between and the applications of these two models are well demonstrated in the study of transmission lines. In short transmission lines (less than about 50 miles) lumped parameter models are satisfactory. In medium length lines (between 50 and 200 miles), lumped parameter models may still be used but the system must then be broken down into multiple elements by using T or Π sections. For long lines (greater than 200 miles) lumped parameter models will yield erroneous results for the endpoints and will not provide any information regarding what is taking place along the line. For long lines, therefore, a distributed parameter model must be used. Since herein the concern is with cardiovascular models examples of such models will be used to further illustrate these two basic approaches.

Diastolic Filling Models:

<u>Distributed parameter models</u>: Distributed parameter models designed to study diastolic filling typically use continuum mechanics to characterize various properties of the left ventricle, such as the pressurevolume relationship of the chamber. These models may be useful in understanding the particular relationship they describe, such as providing a choice of relations with which to model the properties of the chambers. However, they often provide little insight into the relation between the physical properties of the biological structure and the dynamics of the mechanical phenomenon occurring within the structure and being studied, such as filling dynamics. Distributed parameter models used in studying left ventricular filling have also used the tools of fluid dynamics. These models shed light on what is occurring throughout the entire interior of the chamber but are more limited in their contribution to the events at the orifices of the chamber. If desired, a model using the governing equations of fluid dynamics can be extended, for instance, by including compliance. This may require imposing additional limitations but may enable the model to provide certain information regarding the relationship between the physical properties of the biological structure and the dynamics of the phenomenon occurring within the structure being studied. One of the few useful distributed parameter models was designed by Peskin (1972) who was able to study the blood flow pattern around heart valves and thus shed light on the physiology of mitral valve closure. The common theme in all distributed parameter models is the consideration of what is taking place at different points, i.e., distributed within the chamber, rather than viewing the chamber as a single unit.

<u>Lumped parameter models</u>: Lumped parameter models are models in which the material properties of a structure are described, possibly by time-varying equations, such that each component of the system is considered to be located at a discrete, "lumped", point and for which values

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of relevant parameters are calculated only for the terminals of the structure and possibly at one interior point of the whole component. Lumped parameter models are well suited for the study of a system such as the cardiovascular system where flows can be modeled as proceeding through "black box" elements which have properties of inertance and compliance (which are equivalent to elastance and storage respectively) and resistance. In such a case pressures and flows are calculated only at the ports. No spatial information regarding the processes taking place within the "black box" element is obtained, such as is gained from the distributed model. Thus, the lumped parameter model cannot be used to study spatial pressure gradients or flow streamlines within a structure, nor can it shed light on mechanisms of valve or regional chamber wall motion, unless these were the actual elements represented by the lumped parameter, in which case many more parameters would be needed. However, these drawbacks are more than compensated for by the advantages of the model when used to study the effect of varying the values of these parameters and to observe their effect on the terminal input and output of the various components. In addition, the solution to these models is readily attainable by solving ordinary differential equations using standard computational methods. This is true even if the model is not limited to classical resistive. inertial and capacitive elements, but also allows non-linear elements whose values are functions of one or more of the quantities within the model or are functions of time. Furthermore, although such models do not deal with the mechanisms of valve motion themselves, digital computer solutions of the models allow for complex sets of criteria for valve opening and closing. Lastly, the values of many of the parameters that would be required in a lumped parameter model are often readily available in the literature. One of the most recently developed lumped parameter models is that of Thomas, (1991) who has been able to shed light on the roles of net atrioventricular compliance and mitral valve impedance on transmitral velocity.

Since the equations for lumped parameter models are often simpler to solve than those for distributed parameter models, it is sometimes easier to connect many small lumped parameter models together thus providing access to many data points as in a distributed parameter model while still maintaining solvability. An early example of such a model, used in the study of the human cardiovascular system, though not specifically with respect to the study of ventricular filling, was developed by Jager (1965). As part of his approach towards modeling the human "arterial tree" he treated each small section of the arterial tree as a transmission line with parameters unique to that region. He connected all of these transmission lines to form an extensive tree and then used the lumped parameter models already available for the study of transmission lines to study the entire human cardiovascular system.

In order to study ventricular filling itself, a lumped parameter model of the cardiovascular system with an emphasis on the left heart may be developed. The cardiovascular system lends itself to straightforward, mechanical/hydraulic to electrical conversions. In the conversion from hydraulic to electrical conventions all the standard equations and relations can be maintained. Thus, flow of charge, or current, corresponds to flow of fluid; a voltage difference or "drop" corresponds to a pressure gradient; resistance to current corresponds to resistance to flow; capacitance, or storage of charge corresponds to compliance/elastance or storage of fluid; inductance or "storage of flow" corresponds to inertance; and a diode corresponds to a mechanical valve. Figure 15a shows the electrical/hydraulic conventions used by Meisner, and Figure 15b shows the scaled hemodynamic/electrical analogs of Jager.

<u>Cook and Simes Model</u>: Using these analogs, and with the purpose being: "to illustrate biological system simulation to bioengineering students" (Cook), a model was designed by Cook and Simes (1972). (See figure 16 for the circuit schematic and component values.) For simplicity, they reduced the entire cardiovascular system to a three-chamber, twovalve model. The three chambers are: a left ventricle chamber, a chamber for the aorta, and a systemic chamber which includes everything else including the pulmonary system, the right heart, the left atrium and the peripheral circulation. Each chamber is represented by a storage element in the form of a capacitor. The systemic chamber also includes resistance to flow, and the left ventricular chamber is a time-varying, two-state capacitance to account for its varying storage capacity over the duration of the cardiac cycle. Two valves are included, the mitral valve and the aortic valve, each modeled by an ideal diode in series with a resistor. In addition, since the time-varying pumping nature of the right side was omitted, a dc voltage source was inserted between the systemic chamber and the left ventricle chamber (simulating the pressure rise between the vena cavae and the left atrium).

This model was implemented on an analog computer, which necessitated that its amplitudes be scaled to accommodate the expected values. (See figure 17 for the analog computer implementation and scaling.) The outputs (see figure 18) were recorded and compared to known physiological data, to which they bore a similarity. Thus, for the purpose for which this model was designed, to provide a reasonable simulation of the cardiovascular system for the purpose of demonstrating modeling, it

Fig. 15-a Meisner, 1986 (Einstein Quarterly), p.48

Hydraulic Element	Electrical Analog	Sympol	Characterizing Equation $\Delta P = Q \cdot R$ $\Delta P = E \cdot V \text{ or } d\Delta P/dt = E \cdot Q$ $\Delta P = L \cdot dQ/dt$ forward resistance = 0 reverse resistance = infinite	
Resistance Compliance, C or Elastance, E Inertance Valve	Resistor, R Capacitor, C = $1/E$ Inductor, L Diode			

V = volume, Q = dV/dt = flow, $\Delta P = pressure gradient$

Fig. 15-b Jager, 1965, p.78

hemodynamicelectricaltime:1 sec 10^{-3} secimpedance: $\frac{1 \text{ dyne cm}^{-2}}{1 \text{ cm}^3 \text{ sec}^{-1}} = 1 \text{ volt coulomb}^{-1} \text{ sec} = 1 \text{ ohm}$ = 1 g cm^{-4} sec^{-1}

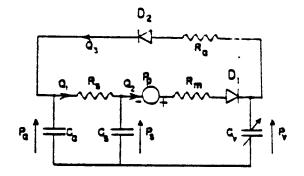
Assuming that a pressure of P mm Hg is equivalent with a voltage of V volts, the equivalent units can be derived :

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hemodynamic
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electrical

pressure	P mm Hg	voltage	V volts
flow	$1 \text{ cm}^3 \text{ sec}^{-1}$	current	$\frac{1}{1.33} \frac{v}{P} 10^{-3}$ amps
volume	1 cm ³	charge	$\frac{1}{1.33} \frac{V}{P} 10^{-6} \text{coulombs}$
time	1 sec	time	10 ⁻³ sec
frequency	1 cps	frequency	1 keps
resistance	1 g cm ⁻⁴ sec ⁻¹	resistance	1 ohm
inertia	1 g cm ⁻⁴	inductance	10 ⁻³ henry
distensibility	1 g ⁻¹ cm ⁴ sec ² .,	capacitance	10 ⁻³ farad
- leakage	1 g ⁻¹ cm ⁵ sec	conductance	1 ohm ⁻¹

Fig. 16 Cook and Simes, 1972, p.97



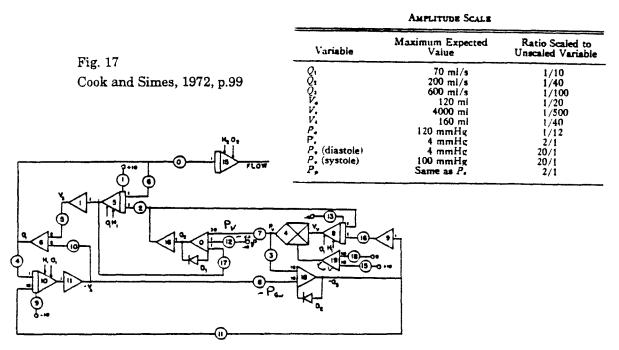
Electrical analog of cardiovascular system. D_2 and D_3 represent the aortic and mitral valve, respectively. Q represents flow; V, volume; P, pressure; C, capacitance; R, resistance. Subscripts: a represents aorta; s, systemic; v, left ventricle; 1, systemic; 2, mitral valve; 3, aortic valve.

RESISTANCE

Flow (ml/s)	Pressure (mmHg)	Resistance (mmHg·s/ml)
. 70		$R_{*}=1.07^{-1}$
100	S	$R_{*}=0.05$ \
100	2	$R_{\rm e} = 1.07$ $R_{\rm e} = 0.05$ $R_{\rm m} = 0.02$

CAPACITANCE

Volume (ml)	Pressure (mmHg)	Capacitanc e (mi/mmHg)	
120	80	$C_{a} = 1.5$	
4000	4	$C_{c} = 1.5$ $C_{c} = 1000$	
160	4	C_{\bullet} (diastole) = 40	
160	80	C_{\bullet} (diastole) = 40 C_{\bullet} (systole) = 2	



Analog computer diagram.

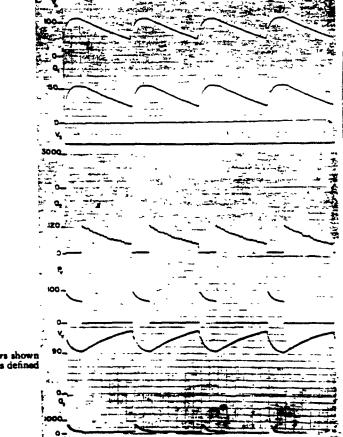


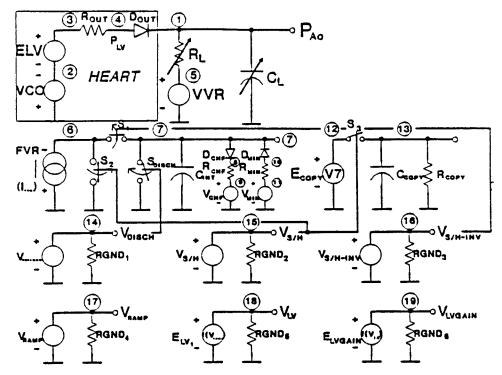
Fig. 18 Cook and Simes, 1972, p.100

Typical output from computer simulation. All flows shown in ml/s, volumes in ml, and pressure in mmHg. Variables defined in Fig. 16 functioned satisfactorily. However, due to the numerous assumptions implicit in its design, the model serves little benefit in further understanding or studying the cardiovascular system. At the same time, though, it does lay the groundwork for future models which follow similar design schemes while taking into account some of the simplifications and assumptions. One of the areas of glaring simplification in the Cook and Simes model was the assumption that the left ventricle has only two states, that these two states jump discretely from one to the other in a discontinuous manner and that these two states always have the same fixed values irrespective of other events in the system.

<u>Goldstein</u> <u>Model</u>: An alternate approach in modeling the cardiovascular system is to choose one particular aspect of the system to model very accurately with the goal and hope that others will then use that model as part of an overall model which will have research benefit. The goal of Goldstein, et. al. (1990) in designing their model (shown in figure 19) was that it should accurately model the left ventricular pressure waveform, including the effect of the beat-to-beat venous return as explained by Starling's law and be constrained by the hemodynamic conditions that cause congestive heart failure (CHF). Their secondary goal was that others will be able to easily incorporate this model into other circuits allowing for sophisticated simulations of cardiovascular hemodynamics. Their model has advantages in its mode of implementation as well as in its avoidance of the over-simplifications of left ventricular function as is found in the Cook and Simes model.

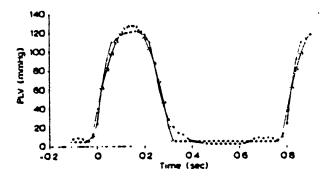
An important advantage of the Goldstein model over the Cook model is its mode of implementation. Cook, et. al., who developed their model in the early nineteen-seventies, perhaps could have used a primitive, slow, cumbersome early digital computer or, as they chose to do, implement it on less accurate, less flexible analog machines. Goldstein, et. al., having developed their model in the early nineteen-nineties, not only had a choice of much faster, more sophisticated digital computers, but also had available a selection of methods of how to implement the model on a computer. They chose to do so by using an electrical circuit simulation program, PSPICE, which provides a great deal of flexibility in using the model. Though PSPICE is not an interactive program, changes can easily be made in the program by commenting code in or out, something they took full advantage of. In addition, since PSPICE is a standard program, the model is easily transportable, thus realizing the goal of being able to incorporate their accurate representation of the left ventricle into more elaborate or useful models. Because of these and other advantages, I chose to implement the Meisner model in PSPICE as well, as is found in a later section.

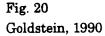
An important over-simplification of Cook's model, that the ventricular compliance is a two-state system and changes from one state to the other instantaneously, is absent in the Goldstein model. Goldstein et. al. suggest that many of the various alternatives commonly used, such as a dc voltage simulating mean arterial pressure, a sinusoidal waveform, a square wave or combinations thereof, are inaccurate, and that even more sophisticated attempts at using rectified rectangular or sine waves are not sufficient. They therefore proposed their own function, and compared it to the actual left ventricular pressure as shown in figure 20. They used a computerized curve fitting program to generate a second order polynomial to represent systole over a .32 second interval and a dc waveform to represent the remaining .48 seconds of diastole. They then use the PSPICE Pulse waveform (shown in figure 21) to create this function by producing a



Schematic diagram of the heart model.

Fig. 19 Goldstein, 1990, p.28



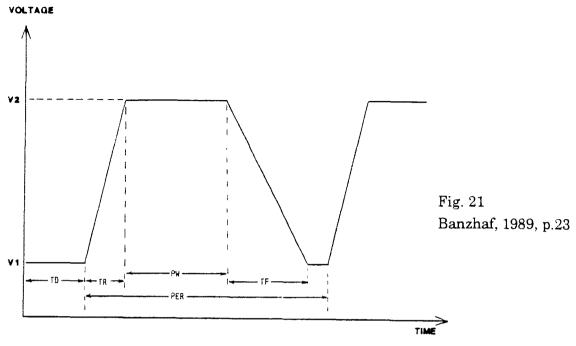


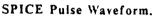
Comparison of actual LVP vs. model. Empirical left ventricular pressure (PLV) versus our second-order hybrid model showing a correlation of $r^2 = 0.985$. (\oplus) Actual; (O) model.

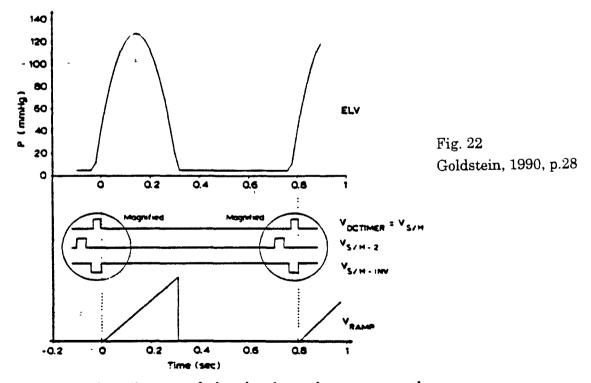
repetitive ramp by assigning a V1 of 0 volts, V2 of .3489, TD of 0 and a rise time, TR, equal to V2, .3489 seconds. This produces a ramp of slope 1 starting at time zero and extending to .3489 as seen in the bottom of figure 22. In order to terminate the ramp they assign an insignificant .1 millisecond to TF and PW. To make it repetitive with a period of .8 seconds they simply set PER equal to .8. They then use this ramp in a second order polynomial to generate the left ventricular pressure function at the top of figure 22.

While implementing the Meisner model, an attempt was made to generate the function used in the Goldstein model in the hope that it could then be tried in the Meisner model and compared to the function used there. The ramp function behaved as expected, producing the graphs shown in figures 23 and 24. However, the attempt at generating the function consistently yielded the problematic results shown in figures 25 and 26, and it is not clear how Goldstein produced the clean function shown in his paper (figure 22).

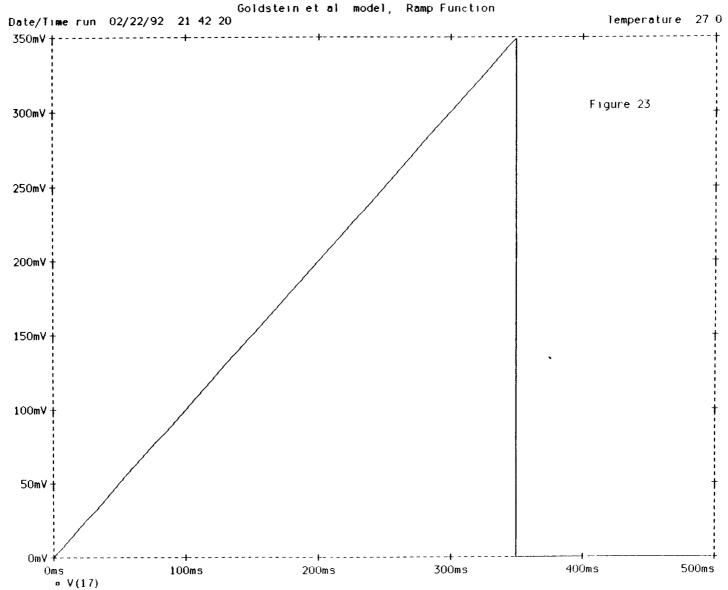
In order to rectify a further problem, the assumption that the values used in one heartbeat are identical in every other beat, a scaling factor based on the Frank-Starling transfer function was introduced to scale the ventricular output as a function of venous return. An example of their output is shown in figure 27.





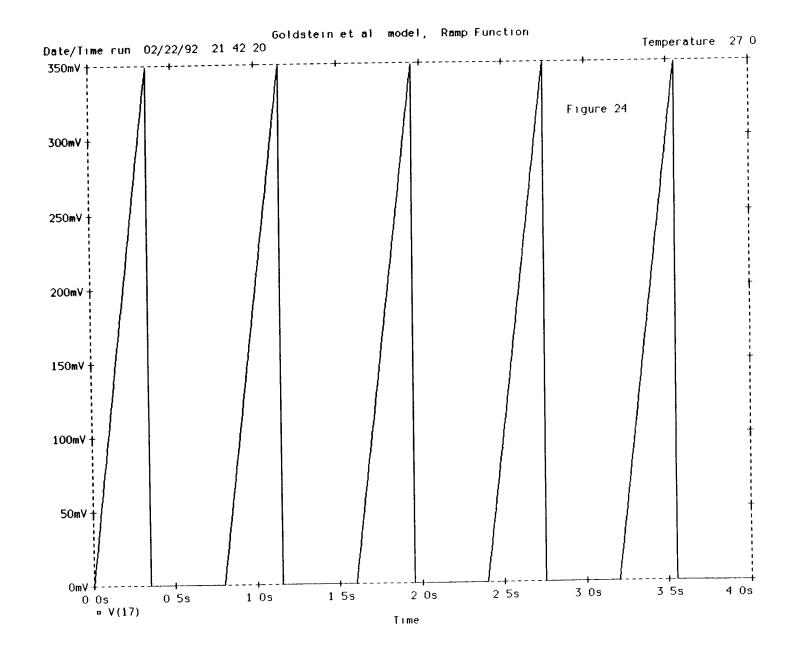


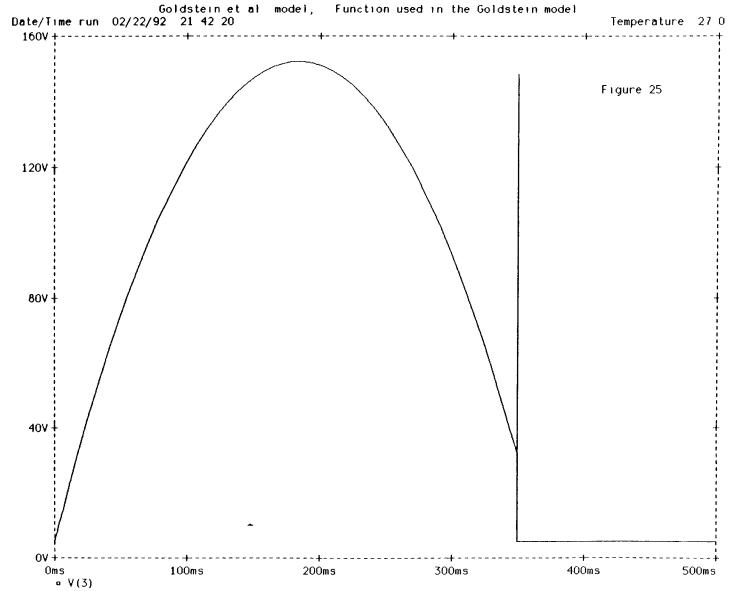
Timing diagram of the signals used to generate the hybrid waveform of left ventricular pressure in the model. The three timing pulses were magnified for clarity.



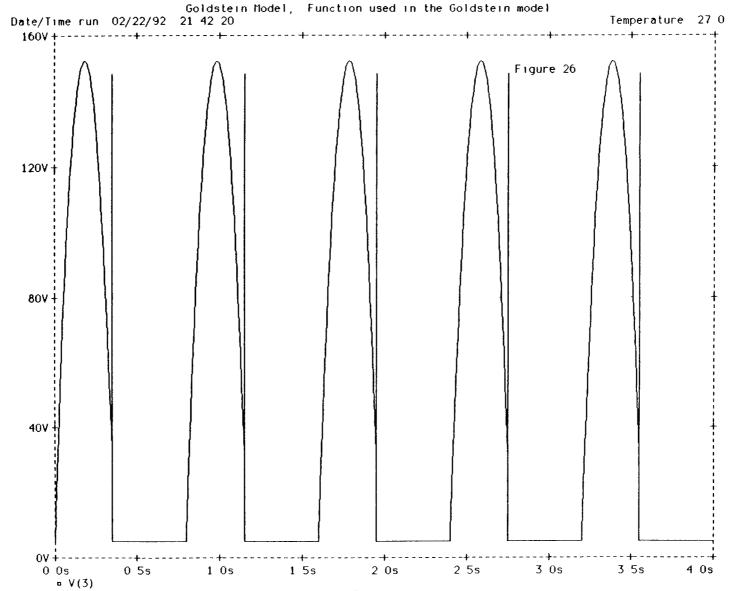
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Tıme





Time



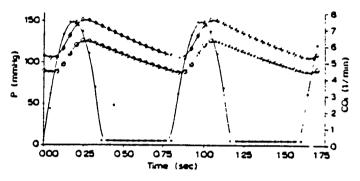
Time

39

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1

Fig. 27 Goldstein, 1990, p.30



Heart model beating into a static load.

(●) ELV (hydromotive pressure) in mm Hg; (○) aortic pressure (mm Hg); (◊) instantaneous cardiac output (COi) in l/min.

CHAPTER IV

MEISNER MODEL:

Introduction: A more formidable goal than simply using the model to demonstrate modeling techniques (as in Cook) or showing that the model can achieve a ventricular output that has a correlation of greater than 97% with the true output (as in Goldstein) is to develop a model that is at least predictive, if not diagnostic. By predictive is meant the ability of the model to adequately predict the effect of a change in material property on cardiac function. For a model to have diagnostic properties means that, given a set of in vivo observations, the model can tell something about the material properties. To create a model with such properties for the entire cardiovascular system is obviously a formidable task which requires beginning with some subset of the whole. Since the proper ejection of the left ventricle is a principle function of the heart, and since proper ejection cannot take place without proper filling, clearly, the filling mechanism of the left ventricle is of vital importance. In normal circumstances, the only way for the left ventricle to fill is via the mitral valve. Transmitral blood flow is therefore one of the essential waveforms that needs to be represented in the model. Furthermore, "the waveform of transmitral blood flow is determined uniquely by the pressure difference between the atrium and ventricle, and by the impedance of the mitral apparatus. The atrioventricular pressure difference, in turn, is determined by the active and passive properties of both left heart chambers, the atrium as well as the ventricle. Transmitral flow patterns should thus provide information regarding the state of the heart." (Yellin, 1991)

Thus, if a model accurately relates the various properties of both left heart chambers as well as those of the mitral apparatus to the correct transmitral flow patterns, it would have many uses. As a research tool it could suggest new areas for investigation, help interpret existing data, determine values for parameters not directly measurable in vivo (e.g., pulmonary vein flow, absolute chamber volumes, local chamber pressures and flows), predict the effect of some interventions not easily performed in vivo (e.g., changes in the rate of left ventricular relaxation, changes in hydraulic parameters), and support and direct in vivo, studies thus minimizing the number of animal or human studies that need to be performed. Furthermore, it can serve as an educational tool both in its development as well as in its final form, in that it can assist, in an interactive way, in the understanding of how the various material properties, flows and pressures in the heart are related. It was with such a goal in mind that Meisner developed his model, the detailed development of which is explained next.

Design: The Meisner model was designed as a lumped parameter model using electrical/hydraulic symmetries and a general approach similar to Cook's. However, unlike the Cook model which models the complete cardiovascular system as a closed loop, the Meisner model simulates only from the pulmonic valve of the right heart through the periphery into which the left ventricle ejects, and does so as an open loop. This is because, unlike Cook's model, the Meisner model is designed to study something specific, mitral flow. The existence of a closed loop would have required additional detail in other parts of the circuit in which we are not as interested. In order to present the total model in an understandable fashion, it will be broken down into six subunits, each of which will be explained individually in some detail (see Figure 32).

Right Ventricle: The input to the model is a right ventricular waveform. This pressure is generated actively, that is, it is an independent pressure, or voltage generator, that actively and independently produces the desired waveform. This is in contrast to most of the model, in which passive elements cause the desired waveform. The need for an active generator is due to the simulation being an open rather than a closed loop. Because charge is dissipated at the output of the model, an independent input voltage is required. The right ventricular waveform occurs once each "heartbeat", simultaneously with the left ventricular contraction. In the original model it was a sine function from 0 to Π radians of 300 ms duration (frequency = 3.333 Hz.) with a peak value, PmaxRV, which was variable, of approximately 25 mm Hg. It was recently modified to be a scaled version of the left ventricular excitation function (described below) with the scaling factor consisting of the same peak value as in the original divided by the peak value attained by the left ventricle, EmaxLV.

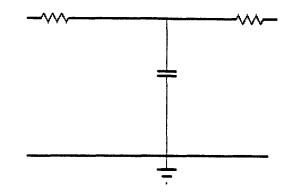
Pulmonary Circulation: The minimum required to model the pulmonary circulation is a compliance connected to the right and left hearts by two resistors, i.e. a simple T-network (see figure 28). This would account for the storage capability, predominantly in the pulmonary arteries, as well as the resistance to flow in the pulmonary network. However, such a model deviates considerably from the physiological and anatomical realities and would probably present less accurate input impedances than a more complex model. In addition, the experimental

data necessary to assign values to the resistive and compliant elements in the more complex model does exist. Thus, the more detailed model (see figure 29) of a pi-network was chosen. This consists of three resistors separated by two compliances, along with two inertances -- one in the input and one in the output. The addition of inertances (inductors) into the model in no way affects steady-state, constant flow analysis or steady-state input impedances. It does, however, play a significant role in the impedance of time-varying flow. This is particularly important in pulmonary venous impedance as seen from the left atrium, in that it may play a major role in preventing a large retrograde flow back up the pulmonary veins when the left atrium contacts (as there is no valve between the pulmonary vein and the left atrium). This section of the total model is treated as a black-box model of the pulmonary circulation and, in general, values are not obtained from within this "box". However correspondence between specific elements in the pulmonary section of the model and true anatomical locations is possible.

Left Atrium: The left atrium is modeled by a time-varying lumped parameter elastance connected at the input to the pulmonary model and at the output to the model of the mitral orifice/valve. This elastance contains both passive and active components. In general, both the passive and active left atrial properties are assumed to be linear; that is the pressure (corresponding to voltage in the electrical analog) of the left atrium is:

$$P = E (V - V_d)$$
 [1]

Minimum Model Required for Pulmonary Circulation





PULMONARY MODEL

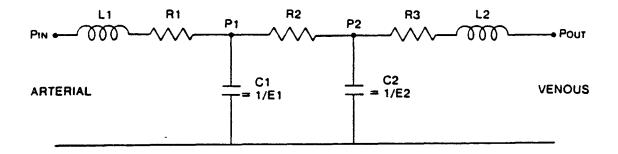


Fig. 29 Meisner, 1986 (Doctoral Thesis), p.101

where E is an activation/deactivation function, V is the instantaneous volume stored in the left atrium (charge on the capacitor), and V_d is an offset or dead volume. The differences between systole and diastole are that in systole E is a variable rather than a constant as in diastole and in diastole V_d is a variable rather than a constant. The change in V_d is minor. In systole it is a constant, called "VD10" in the program, and in diastole it is a sine wave decaying from "VD10" (approximately 20 ml.) to "VD10" - 2, and then rising back to "VD10", i.e. $-\sin(x)$ from 0 to Π , and lasting the duration of atrial contraction, 200 ms. The contribution of varying E is much more significant than that of varying V_d. In diastole E is a constant (approximately 1). In order to simulate atrial contraction the value of E is varied, thereby simulating a varying elastance. It is a sine wave from 0 to Π radians of 200 ms duration starting at the diastolic constant value with a peak of E_{maxLA} and occurring once at the beginning of each "heartbeat".

Mitral Orifice/Valve: Since the main thrust of the Meisner model is the study of blood flow across the mitral valve, it is to be expected that the Mitral Orifice/Valve should be modeled in great detail (see figure 30). Intuitively, it would be expected that the impedance of the mitral orifice should have both inertial and resistive components. In addition, there is also obviously going to be a diode (modeling the valve itself) which permits, with zero resistance, only forward blood flow, that is from the atrium to the ventricle, and which blocks, with infinite resistance, retrograde flow. The forward link between the atrium and ventricle therefore consists of the series connection of a diode, resistance and inertance.

MITRAL ORIFICE / VALVE

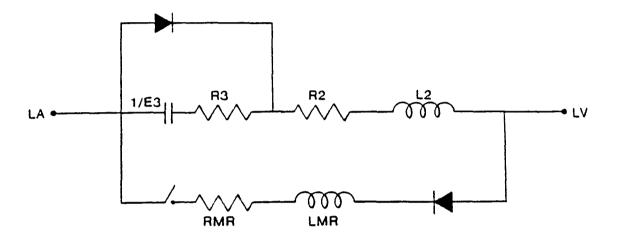


Fig. 30 Meisner, 1986 (Doctoral Thesis)

This forward resistance (R2) was chosen to be nonlinear. If the orifice were very wide, on the order of the diameter of the chambers themselves, then the resistance would be linear, that is the pressure drop is proportional to flow, as in Ohm's law. If the orifice is very narrow then the pressure drop is non-linear and proportional to the square of the flow, that is $V=I^2R$. The normal mitral orifice falls somewhere between these extremes and the impedance can be reasonably modeled by either. However, since under conditions of mitral stenosis only the nonlinear square of flow approximation is valid, it was decided to always model the mitral forward resistance as a nonlinear square of flow pressure drop thus enabling the model to be used in studies of mitral stenosis as well. The total pressure-flow relationship across the mitral orifice in the forward direction is thus represented as:

$$\Delta P = [L]dQ/dt + [R]Q^2 \qquad [2]$$

where ΔP is the atrioventricular pressure difference, [L] (L2 in Fig. 30) and [R] (R2 in Fig. 30) are, respectively, inertial and resistive coefficients (assumed to be constant) and Q is the volume flow.

There is an additional path which links the atrium to the ventricle by by-passing the diode, consisting of an additional resistance (R3) and a compliance (1/E3). (This is how it appears in the schematic - in reality it is a more complex function). This simulates the storage of blood in the viscoelastic mitral valve leaflets as they bulge towards the left atrium when the atrioventricular pressure gradient is negative. It is significant that the retrograde mitral flow associated with this billowing does not represent any true ventriculoatrial blood transfer either *in vivo* or in the model. Rather, this blood is simply stored, in the leaflets *in vivo* and in the storage element in the model, and is recovered when the valve leaflets return to their neutral position immediately preceding their opening in early diastole. There is also potentially one additional path, a mitral regurgitant path (a diode, LMR and RMR). This was included in the model and used for a paper, but will not be further discussed here.

Left Ventricle: The left ventricle, like the left atrium, was modeled (see Fig. 32) by a time-varying lumped parameter elastance, albeit a more complex one, incorporating both the passive and active components. The passive left ventricle has an exponential pressure-volume relationship (see chap.1). However, when the filling rate is high, the viscous and inertial properties raise the pressure to a higher degree than that predicted from a simple exponential. This viscous component was assumed to be proportional to the rate of change of chamber volume (ie, to mitral flow). The total passive, instantaneous left ventricular pressure is thus given by:

$$P = Ae^{\alpha V} + B(dV/dt) + P_{inf}$$
 [3]

where A is the passive elastance coefficient, α is the passive elastance exponent, V is the instantaneous left ventricular volume, B is the viscous coefficient, dV/dt is the mitral flow, and P_{inf} is the left ventricular pressure asymptotic offset, that is, the left ventricular pressure when left ventricular volume is negative infinity and its derivative (mitral flow) is zero. The active left ventricular pressure-volume relationship was modeled (similar to that of the left atrium) by:

$$\mathbf{P} = \mathbf{E} \left(\mathbf{V} - \mathbf{V}_{\mathbf{d}} \right)$$
 [4]

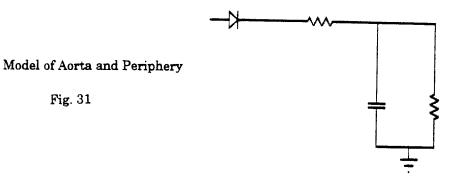
where P is the active left ventricular pressure, V is the instantaneous left ventricular volume, V_d is a "dead volume" offset and E is an activation function. The activation function is a rising sine wave from $3\Pi/2$ to $5\Pi/2$, offset by EmaxLV so that it always starts at zero, lasting 150 ms and starting in each "heart beat" at one PR interval after the start of the beat. After reaching its peak, the activation function decays exponentially with a time constant, τ , which can be varied. The total left ventricular pressure is the sum of equations [3] and [4]. The B term (in equation [3]) can be thought of as a separate resistor and removed from the equation. This is because B is a linear constant of proportionality between the pressure and the change in volume, which is the same as relating pressure to flow or voltage to current, which is precisely what a resistance does.

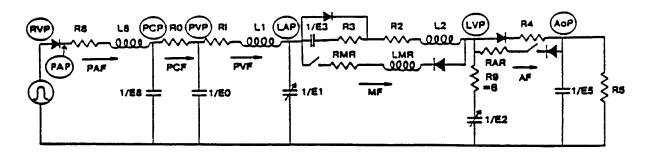
Periphery: Since the primary concern in this model is ventricular filling, the aorta and the periphery were modeled as simply as possible. The aortic valve is modeled by an ideal diode and a resistor, representing valve resistance. The periphery follows immediately and is modeled by an elastance, to account for the storage capacity of the aorta and other large arteries, and a runoff resistance in parallel to it, as shown in Figure 31. Aortic inertance, which would be required in more detailed models of ventricular ejection, is omitted in this model. An additional link is possible from the aorta back to the ventricle, bypassing the ideal diode of the aortic

valve, as in Fig. 32 and including RAR. This would simulate aortic regurgitation, but is not used in the present model.

The complete Meisner model is presented in figure 32.

<u>Implementation</u>: The differential equations (which are shown in figure 33) for this model were solved using the Euler point-slope method at 1 ms. intervals. The program is written in compiled BASIC using Quick BASIC, on an IBM PC. The program is interactive and allows the user to select a set of control parameters (default or otherwise) and, if desired, a set of intervention parameters. The control parameters together with their default values are given in figure 34. The program solves for the control cycle twice, once with atrial systole and once without, thus enabling a comparison of the two, and then it similarly solves for the intervention cycle, also twice. There is a choice of outputs to represent the solutions. Two separate graphs are plotted on the monitor. One plots mitral flow versus time and the other includes both left atrial and left ventricular pressure together versus time. In addition, an entire sequence of graphs of parameters versus time can be plotted for both the control (as in figure 35) and the intervention runs (as in figure 36), either overlaid or side-by-side. Similarly, overlaid or side-by-side plots of the pressure/volume loops for the two runs can be plotted, as in figure 37. And finally, a numerical printout of selected results for both runs, as well as the differences between the runs for these parameters, is available. An example of this is shown in figure 34. Included next to the values on figure 38 are explanations of the various output parameters which are not standardly included in the printout. These parameters are illustrated in figure 39 which displays typical mitral





RIGHT VENTRICLE	PUL MONARY ARTERY	PULMONARY CAPILLARY	PULMONARY VEIN	LEFT ATRIUM	MITRAL VALVE	LEFT VENTRICLE	AORIA	PERIPHERY	
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Fig. 32

Meisner, 1966 (Doctoral Thesis)

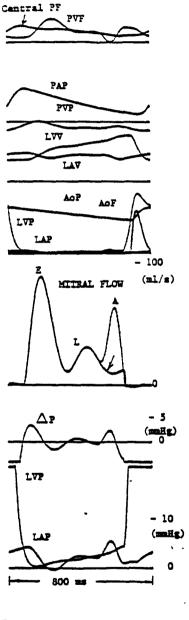
d(PAF)/dt = (RVP - PCP - RS=PAF)/LS d(PCV)/dt = PAF - PCF(note: PCV = VS) PCP = E8*V8d(PVV)/dt = PCF - PVF(note: PVV = V0) $PVP = E0^{\circ}V0$ PCF = (PCP - PVP)/R0 $d(PVF)/dt = (PVP - LAP - PVF^R1)/L1$ d(LAV)/dt = PVF - MF(note: LAV = V1) $d(MF)/dt = (LAP - LVP - R2^{*}MF^{3})/L2$ (value open) d(LVV)/dt = MF - AoF(note: LVV = V2) AoF = (LVP - AoP)/R4Fig. 33 $d(AoP)/dt = (E5)(AoF - AoP^*R5^{-1})$ Yellin, Modified from Meisner, 1991

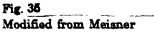
1	0.00400	LS-PA inertance	19	0.00001	R9-LV Viscous res.
2	0.02000	R8-PA resistance	20	0.05000	ALPHA-LV passive exp.
3	0.32000	E8-PA elastance	21	0.55000	A-LV passive coef.
4	0.18000	RO-Pcap resistance	22		Emax-LA
5	0.48000	E0-Pcap elastance	23	0.00000	MR-Res. (0-no MR)
6 7	0.10000	R1-PV resistance	24	0.00200	MR-Inertance
7	0.00200	LL-PV inertance	25	0.00000	MR - LVV dependence
8	0.00010	R2-MV resistance	26	0.00000	AR-Res (O-no AR)
9	0.00200	L2-MV inertance	27	1.00000	MV 0-closed 1-open
10	1280.00000	E3-MV bulge elastance	28	130.00000	PR
11	8.00000	R3-MV bulge resistance	29	800.0000	RR
12	0.10000	R4-Ao resistance	30	8.00000	Emax-LV
13	2.40000	R5-periph resistance	31	25.00000	Pmax-RV
14	1.25000	ES-Ao elastance	32	25.00000	T2U
15	1.00000	K10-LA passive elast.	33	10.00000	con. cycls
16	20.00000	VD10-LA unstrassed vol.	34	8.00000	int. cycls
17	8.00000	VD2-LV unstressed vol.	35	0.00000	co
18	-2.00000	Pinf - LVP asymptote			

The control values of the parameters are shown

most of the components are self explanatory. E1 and E2 are the time varying einstances of the atrium and ventricle, #22 and #30 in the listing. Listed, but not shown in the schematic are: #15, K10, the left atrial passive elastance (linear); #16, VD10, the left atrial equilibrium volume and elastance intercept; #17, VD2, the left ventricular ESPVR intercept; #18, Pinf, the asymptote of the passive left ventricular P-V relation (exponential); #20, ALPHA, the exponent of the left ventricular passive P-V relation; #21, A, the coefficient of the passive left ventricular P-V relation; #23-27, parameters related to mitral regurgitation; #31, Pmax-RV, the peak developed right ventricular pressure; #32, Tau, the time constant of the exponential decay in LV pressure; #34,#35, number of cycles to reach a steady state in the control and intervention runs.

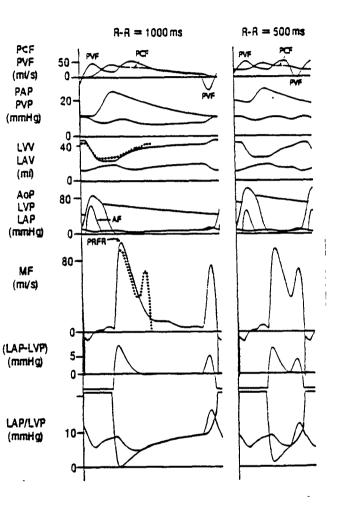
> Fig. 34 Yellin, Modified from Meisner, 1991







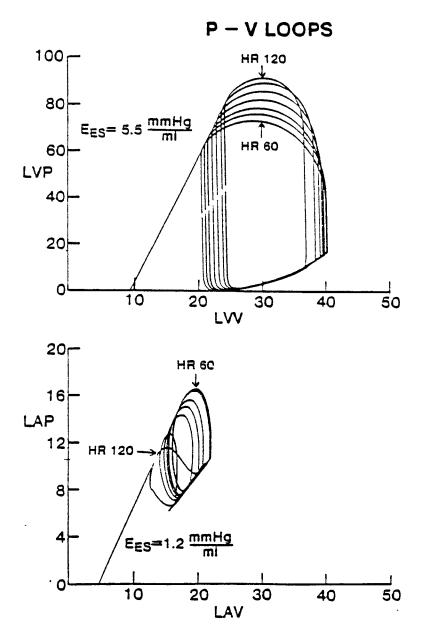
Meisner, 1986 (Doctoral Thesis)



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From top to bettoms pulmonary capillary flow (PGF), pulmonary vein flow (PTF), pulmonary artery presoure (PAF), pulmonary vein pressure (PTF), left ventricular volume (LVV), left atrial volume (LAV), sortis pressure (AoF), left ventricular pressure (LTF), left atrial pressure (LAF), sortis flow (AF), mitrai flow (HOF), left atrial pressure (LAF), sortis flow (AF), mitrai flow (HOF), left atrial pressure (LAF), and left ventricular pressure (LAF-LTF), left atrial pressure (LAF), and left ventricular pressure (LAF-LTF), left atrial pressure (LAF), and left ventricular pressure (LAF-LTF). Pask rapid filling rate, which is the same as peak mitrai flow, is denoted by PEFE. The left trace is at an RE interval of 1000 ms (heart rate = 60 /minute) and the right trace is at RE interval of 560 ms (heart rate = 120 /minute). The dotted lines on the left plot are superimposed data from the right plot (drawn by hand).

Fig. 37 Meisner, 1986 (Doctoral Thesis)



pressure-volume (P-V) plots for ventricle (upper) and atrium (lower) at heart rates of 60, 70, 80, 90, 100, 110, and 120. The end-systolic pressure-volume ratio (E) line is drawn in both plots. Note that the slope of the diastolic ventricular pressurevolume relationship increases with increasing ventricular volume and deviates slightly from an exponential during atrial systole (immediately preceding ventricular contraction) due to the ventricular viscous wall properties. At slow heart rates, the ventricular pressure-volume loop is short and wide. This is because filling is large and afterload is low pressure to fall to a low lavel - the mechanisms are complex and interrelated.

INTERVENTION parame K10-LA passive		00000		
Parameter	c	I	I-C	(I-C)/C
PCO	4.0 mmHg	5.5	1.5	0.388 AV pressure crossover
LVPmin	0.3	0.3	0.1	0.261 minimum LV pressure
LVEDP	4.3	3.9	-0.4	
LVEDV	38.3 ml	37.2	-1.1	-0.029 end diastolic LV volume
EF	53.3	52.8	-0.5	-0.010 ejection fraction
(LAP-LVP) max	3.3 mmHg	3.6	0.3	0.103 maximum AV pressure difference
PLVP	100.0	95.8	-4.2	-0.042 peak LV pressure -0.394 mean AV diastolic press. diff.
M-(LA-LV)-diast	0.28	0.17	-0.11	-0.394 mean AV diastolic press. diff.
MLAP	2.25	2.75	0.51	0.225 mean LA pressure
MLAP-diast	2.20	2.13	-0.07	-0.031 mean LA diastolic pressure 0.829 mean LA systolic pressure
MLAP-SYST	2.36	4.32	1.96	0.829 mean LA systolic pressure
LVP-a-min	2.6	2.7	0.1	0.048 LVP at minimum LA pressure
LAP-a-max	5.3	A A	-0 9	TO 165 THE on marks 1 - remain
LAV-a-min	22.13	20.90	-1.23	-0.056 LA volume prior to A-wave
PMF	90.3 ml/s	70.8	-19.5	-0.216 peak mitral flow (E-wave)
MF-a-min	21.3		-0.1	
MF-a-max	64.3	44.5	-19.8	-0.308 Desk A-wave
MF-a-max/PMF	0.712	0.629	-0.083	-0.117 A/E ratio
FV	20.4 ml	19.6	-0.8	-0.038 filling volume (=stroke vol)
FV-PMF	4.6	2.5	-2.1	-0.458 filling volume prior to E-wave
FV-a-min	15.0	15.9	0.9	0.058 filling volume prior to A-wave
FVA (Yellin)	3.6	1.3	-2.3	-0.630 filling due to A-wave -0.310 filling during A-wave
FVA (clin)	5.4	3.7	-1.7	-0.310 filling during A-wave
FV-lost after MF=0		0.0	0.0	0.000 filling loss due to valve closure
FVA(Y)/FV	0.176	0.068	-0.109	-0.615 "true" atrial pump contribution
FVA(Y)-FVlost/FV	0.176			-0.617 (ignore, not useful)
FV-PMF/FV	0.223	0.126	-0.097	-0.436 Zfilling prior to E-wave
t-LVPmin	68 ms	83	15	0.221 time to minimum LVP
t-(LAP-LVP) max	40	28	-12	-0.300 time to peak AV gradient
t-PMF	94	67	-27	-0.287 time to E-wave
t-MF-a-min	396	405	9	0.023 time to start of A-wave
t-MF-a-max	484	461	-23	-0.048 time to A-wave
DFP-f	536	537	1	0.002 filling time based on flow
DFP-p	526	535	9	0.017 filling time based on pressure
DFP-f/RR	0.715	0.716	0.001	0.002 normalized by RR interval
·				(a questionable approach)

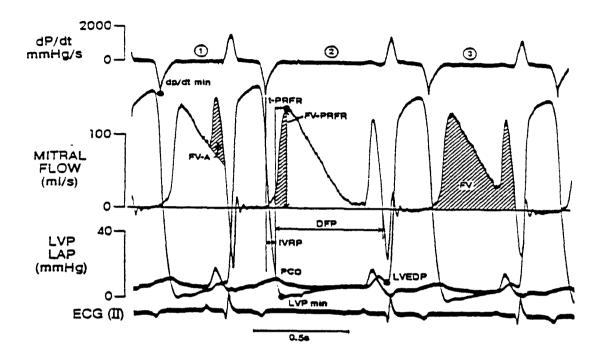
model analysis printont for intervention

The columns are

(from left to right): parameter names, control values, intervention values, intervention values minus control values (change from control to intervention), and intervention values minus control values divided by control values (fractional change from control to intervention).

Fig. 38

Yellin, Modified from Meisner, 1991



Oscillographic record from a conscious dog defining several indices of diastolic function. FV, filling volume; FV-A, filling volume due to atrial contraction; FV-PRFR, filling volume to peak rapid filling rate; t-PRFR, time from onset of flow to PRFR; IVRP, isovolumic relaxation period; DFP, diastolic filling period; PCO, first diastolic atrioventricular pressure crossover; LVPmin, minimum left ventricular pressure; LVEDP, left ventricular end diastolic pressure. (Unpublished observation, courtesy of Drs. Takako Tamura and Koichi Tamura.)



flow, LAP and LVP waveforms from a dog. The text below the graphs describes which parameters are illustrated so that this graph can assist in visualizing how they are related.

Verification: Before a model can be used as a research or teaching tool it must be validated by comparing its predictions with in vivo observations. By the very definition of the statement of purpose of the Meisner model, there are many measurements obtainable via the model which cannot be measured directly in vivo. Conversely, by definition of a lumped parameter model such as this, there are many data points which can be taken within a structure in vivo which are not available via the model. An example of this is demonstrated by Courtois, et. al. (1988), who measured left ventricular pressure at several locations within the left ventricular cavity, while the Meisner model gives only one value for left ventricular pressure. In addition, there are areas where the model will show more detail than can be seen in *in vivo* experiments and there are measurements which give much more precise readings than the model can accommodate. Thus, no authentication of a model can unequivocally attest to the "correctness" of the model and guarantee that it will be correct for all runs over a wide range of values. Nevertheless, it is important to verify, to whatever extent possible, that the model is performing as expected, and then, to actually use the model with an eye open for flaws. This was and is done with the Meisner model (Meisner, 1986, pp. 138-139). A thorough and detailed experiment was performed using the model and the results were compared with previously obtained in *in vivo* results. This extensive test, along with using the model as a research tool for a number of years, verified the integrity of this model, and thus legitimized its further and expanded use.

CHAPTER V

Parameter vs. Parameter Runs:

<u>Background</u>: One important area in which the model can be useful is in varying the values of physical parameters and predicting their effects on the resulting flow and pressure patterns. In other words, one may want to vary one of the approximately thirty input parameters over a range in small steps and see how this affects one of the approximately thirty-five output parameters. In order to do this with the original program it was necessary to run the model with the desired input value changed, record the output values by hand or keep the output hardcopy, rerun the program with the value changed again, again either record by hand the values or keep the output hardcopy, and repeat this as many times as desired. This information could then all be transcribed in tabular form or plotted by hand (as was done by Meisner).

Implementation: It was decided that this type of study, which the model should be able to simulate so simply and straightforwardly, should be performed in a more direct manner. This necessitated two tasks. First, the interactive program which runs the model had to be modified, and second, there needed to be some program which could accept the output of the modified program and present it in tabular and graphical form.

Before changing the inner workings of the program it was necessary to provide for the background subroutines to enable the running of a "parameter vs. parameter" run. This included ascertaining early in the run the desire to perform the parameter vs. parameter run. Thus, this was inserted as an early option in the running of the program. If the response is negative, which is the default response (if nothing is entered and the return key is struck) then the program runs as before with no changes; that is, it permits either just a control run, or a control and intervention, and still permits all the various output forms. If the response is affirmative, that is, a parameter vs. parameter run is desired, then all the other options are suppressed and the only type of run permitted is a parameter vs. parameter run. In such a case, all the other forms of output are then non-functional and only the thirty-five or so output variables will be available for each of the increments. No graphs will be plotted by the BASIC program. The program then requests information regarding which input parameter is to be varied, over what range (as specified by a starting and ending value) and in what increments. The increment given can be either positive or negative but it must agree with the direction of change from starting to ending value or the program will run only one intervention, the starting value. This sequence of prompts is shown in Figure 40.

The original program first solves the differential equations for the control run, stores the output variables and then resets itself to perform the intervention run. In a parameter vs. parameter run the program runs the normal routine for the control run but then opens an output file called "bigfile.dat" and stores the values there as well. Then, instead of arriving at the intervention value in the usual way it looks at the starting, ending and increment values that had been input. The first intervention run is always the starting value. It then stores the output values of that run in the same "bigfile.dat", returns to the beginning of the intervention section, resets itself, and, if the expression (current parameter value + increment < final value) is true, it increments the intervention parameter and then runs again. Thus, at the end it has always ended on or below the value input for

CONTROL Param	eter Set-Up Routine	flas	ning=non-de	efault
1 0.00400	L8-PA inertance	19	0.00001	R9-LV viscous res.
	R8-PA resistance	20		ALPHA-LV passive exp.
	E8-PA elastance			A-LV passive coef.
4 0.18000	R0-Pcap resistance			Emax-LA
	E0-Pcap elastance	23	0.00000	MR-Res. (0=no MR)
6 0.10000	R1-PV resistance	24	0.00200	MR-Inertance
7 0.00200	L1-PV inertance			MR-LVV dependence
	R2-MV resistance	26	0.00000	AR-Res (0=no AR)
	L2-MV inertance	27	1.00000	MV 0=closed 1=open
10 1280.00000	E3-MV bulge elastance	28	130.00000	PR
11 8.00000	R3-MV bulge resistance		750.00000	RR
12 0.10000	R4-Ao resistance	30	8.00000	Emax-LV
	R5-periph resistance	31	25.00000	Pmax-RV
14 1.25000	E5-Ao elastance	32	20.00000	tau
	K10-LA passive elast.			con. cycls
	VD10-LA dead vol.		10.00000	int. cycls
17 8.00000	VD2-LV dead vol.	35	0.00000	CO
18 -4.00000	Pinf - LVP asymptote			
Enter # to be	changed or 36 to defa	ult a	ll or <ret< td=""><td>URN> to END?</td></ret<>	URN> to END?

i i

parameter vs parameter run ? (N)?

what parameter do you want to vary ?

what parameter do you want to vary ? 32 starting value? 10 end value? 100 step? 8

the final value. At the conclusion of all the runs, the value of the parameter being altered, along with all the output values, are stored for each incremental run in the one big file, "bigfile.dat". In that file are also stored some additional pieces of information which are useful when the file is uploaded into the package used to display the data. Once all of the needed information is stored in one file, QuickBASIC and the model simulation program are no longer needed and are exited. The complete modified QUICK BASIC program can be found in Appendix A.

Display of Results: The package chosen to display the data was QUATTRO PRO, a commercially available spreadsheet program designed to run on any IBM XT, AT, PS/2 or fully compatible computer which uses DOS 2.0 or a later version operating system, has at least 512K of RAM and a hard drive with at least 3MB of available space. In choosing to use a spreadsheet program it enables us to not only obtain quick, quality graphs, but it also has the ability to manipulate and analyze the data such as by performing regression analyses.

In order to access and graph the data which is stored in "bigfile.dat", QUATTRO PRO is run. Under the menu of options is the possibility of importing a stored file. The file that is desired is "bigfile.dat", which is in the subdirectory from which the BASIC program was run. The sequence of commands necessary to import the file is shown in Figure 41. When this file is loaded in, all the data appears readily usable. The row representing the changing parameter can be graphed versus any one or more of the output parameters, or all or part of the data can be printed out in tabular form.

63

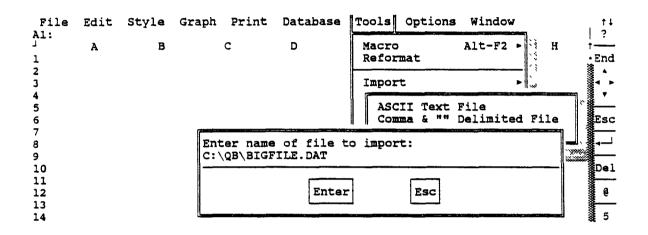


Fig. 41

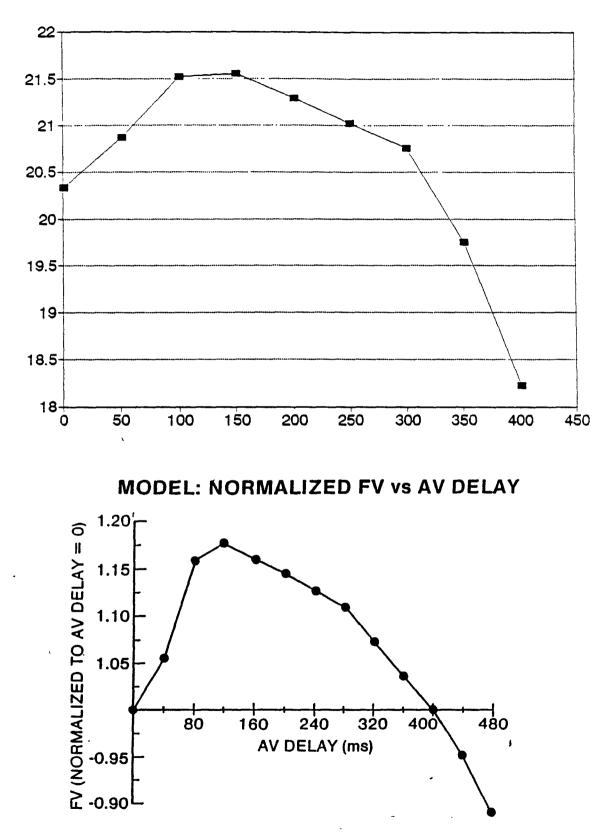
At present, only one parameter can be varied at a time and then any output parameter can be plotted against this varied input. A future goal is to enable the BASIC program to vary two of the input parameters concurrently and plot, in a 3-D graph of the type QUATTRO PRO can handle, any output parameter vs. the two varied input parameters.

Results: In order to demonstrate that the new program was functioning correctly it was decided to redo the massive experiment that Meisner had originally done to verify his model and thus to show that the current results agree with his, which in turn had agreed with his in vivo results. The program was run with the PR interval varying from 1 to 402ms. (the control is 130 ms.) in steps of 50 ms. The numerical output is presented in figure 42. Two of the graphs that Meisner plotted by hand in his thesis were of FV (filling volume) vs. PR interval, and DFP-f (filling time based on flow) vs. PR interval. He had shown that his model results for these two graphs agreed with his in vivo dog results. Figure 43 shows the results for FV (filling volume) vs. PR interval as generated by the new program (top) and as drawn by Meisner. Figure 44 shows a similar presentation for DFP-f (filling time based on flow) vs. PR interval. Following those, figures 45 and 46 show the new programs results for LVPa-min (LVP at minimum LA pressure) vs. PR interval and PLVP (peak LV pressure) vs. PR interval, respectively.

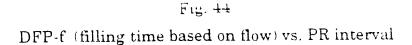
this run vaPR		. to	402	in ste	9 50			
output contro								
130	1 51			201	251	301	351	401
	2.284 2.949		3.076			4.264		
		-1.71						
	2.275 2.284					2.603		2.57
	38.21 38.23				39.49		38.61	39
	53.23 54.57							46.73
(LAP-LVP)ma4.122								4.95
	98.97 101.9							
M-(LA-LV)-d 0.31							0.09	0.208
	1.943 1.53							1.682
MLAP-diast 0.819								1.081
	4.804 3.233							3.335
	2.269 1.893							
	7.986 4.614					3.507		
	15.45 15.13			13.87				
PMF 105.3	115.8 112.2	2 103	106.6	112	117.9	122.7	123.1	121.6
MF-a-min 15.51	15.45 10.4	10.53	21.68	35.1	31.22	11.39	14.99	65.99
MF-a-max 57.78	1 49.49	9 60.87	54.83	51.56	63.63	76.74	72.3	38.55
MF-a-max/PM0.549	0.009 0.44	L 0.591	0.514	0.46	0.54	0.625	0.587	0.317
FV 21.66	20.34 20.8							18.22
FV-PMF 5.031	5.614 5.35	7 4.918	5.091	5.269	5.518	5.745	5.653	5.606
FV-a-min 17	20.1 18.7	17.21	16.81	15.97	14.81	14.26	13.83	11.76
FVA(Yellin)2.982	0.014 1.21	3 2.915	2.928	2.806	2.417	2.277	2.302	2.088
FVA(clin) 4.656	0.242 2.1	3 4.307	4.743	5.319	6.216	6.496	5.923	6.466
FV-lost aft 0.01	0.01 0.0	1 0.01	0.137	0.78	1.237	1.873	2.981	4.179
FVA(Y)/FV 0.138	*****0.05	3 0.135	0.136	0.132	0.115	0.11	0.117	0.115
FVA(Y) - FV100.137	0.000 0.05	3 0.135	0.13	0.095	0.056	0.019	-0.03	-0.11
FV-PMF/FV 0.232	0.276 0.25	7 0.229	0.236	0.248	0.262	0.277	0.286	0.308
t-LVPmin 59	58 5	ə 60	60	60	61	61	61	61
t-(LAP-LVP) 36	40 3	7 37	36	36	36	36	35	36
t-PMF 88	91 8	3 89	88	87	87	86	85	86
t-MF-a-min 412	541 49			344	296	247	197	147
t-MF-a-max 501	1 55	3 528	481	427	370	328	291	173
DFP-f 553	567 57		536	488	438	392	353	322
DFP-p 542	542 54		543	545	547	548	548	548
		6 0.751						

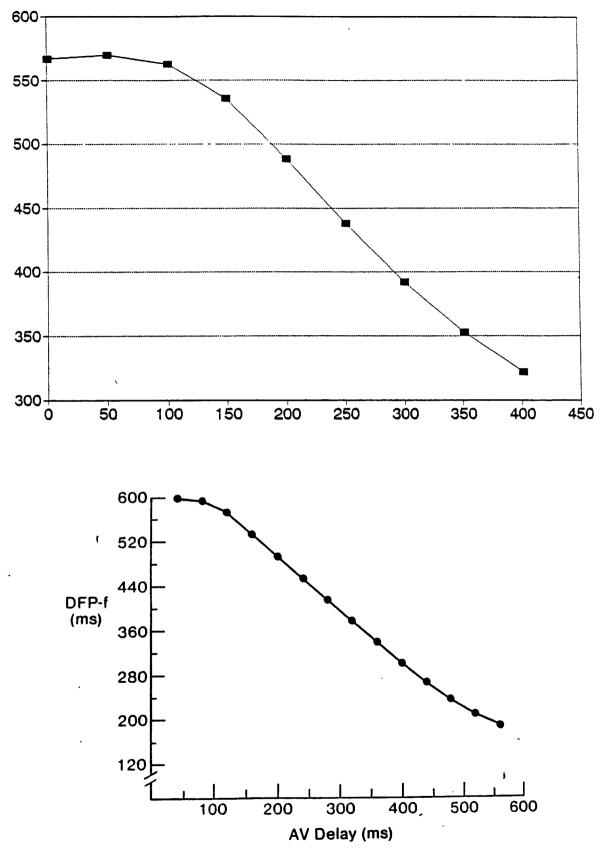


FV (filling volume) vs. PR interval

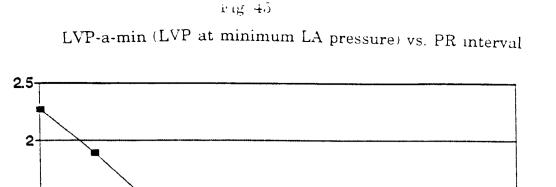


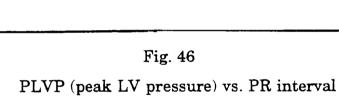
Meisner, 1986 (Doctoral Thesis)





Meisner, 1986 (Doctoral Thesis)





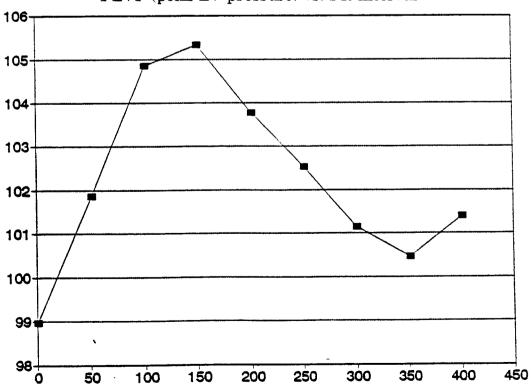
,300

1.5

0.5

0.

-0.5|



Vary Emax-LA: The next series of results were designed to do an experiment for which the results, though not presented in Meisner's work, should intuitively be clear enough to determine whether they are correct or not. Figure 47 presents the tabular results of varying Emax-LA, that is increasing the degree to which the LA contracts, from 1 to 3 (the control value is 2) in steps of .2. Following the numerical data, are four graphs showing MF-a-max (peak A-wave) vs. Emax-LA (figure 48), LAP-a-max (LAP at peak A-wave) vs. Emax-LA (figure 49), PMF (peak mitral flow - E wave) vs. Emax-LA (figure 50) and FVA (filling due to A-wave) vs. Emax-LA (figure 51). Since the strength of the atrial contraction is increasing it makes sense that the first three graphs should all be rising. And since the A-wave is increasing it follows the the fourth graph, PMF, should be decreasing.

this run vaEmax- output contr		to	3	in st	: 0.2				
2		1.4	1.6	1.8	2	2 2	2 4	26	2.8
	3.33 3.15	3.03	2.97	2.96	2.91	2 93	2 89	2 97	2.9
LVPmin -1.7	-1.6 -1.7	-1.7	-1.7	-1.7	-1.7	-1.7	-1 7	-1 7	-1 7
LVEDP 3.14	2.81 2.89	2.94	3.01	3.11	3.11	3.14	3.17	3.24	3.19
	39.6 39.8								
	53.8 53.9								
(LAP-LVP)ma4.12							4.07		
PLVP 106		105	105	106	106	106	106	106	106
M-(LA-LV)-d0.31						0.3	0.28		
MLAP 1	1.24 1.14	1.06	1.02	1.01	0.97	0.96	0.95	0.98	0.94
MLAP-diast 0.82	0.9 0.86	0.82	0.82	0.82	0.79	0.78	0.77	0.79	0.75
MLAP-syst 1.47								1.49	
LVP-a-min 1.47	1.59 1.53	1.47	1.46	1.47	1.44	1.44	1.43	1.47	1.43
LAP-a-max 3.96	2.9 3.13	3.33	3.54	3.78	3.93	4.11	4.28	4.51	4.59
LAV-a-min 14	14.1 14	14	14		13.9		13.9	14	
PMF 105	110 108	106	106	106	105	105	104	106	105
MF-a-min 15.5	15 15.4							15.6	15.7
	36.9 42.9								
MF-a-max/PM0.55		0.45	0.48	0.52	0.55	0.57	0.6	0.62	0.64
	21.3 21.5						21.7	21.9	21.8
	5.21 5.12						4.97		4.99
	17.6 17.4				17			17.1	17
FVA(Yellin)2.98							3.11	3.2	3.21
FVA(clin) 4.66	3.67 4.06	4.3	4.46	4.63	4.69	4.71	4.77	4.78	4.78
FV-lost aft0.01									
	0.09 0.11								
FVA(Y)-FV100.14									0.15
	0.24 0.24					0.23		0.23	
t-LVPmin 59	60 60	60	60	60	59	59	59	59	59
t-(LAP-LVP), 36	36 37		37	37	36	36	36	36	36
t-PMF 88	87 88		89	89	88	88	88	88	88
t-MF-a-min 412	414 414	413	413	413	412	412	412	412	412
t-MF-a-max 501	510 510	507	505	503	501	499	497	496	495
DFP-f 553	561 560	558	557	556	553	551	549	546	544
DFP-p 542	544 544	543	543	543	542	542	542	542	542
DFP-f/RR 0.74	0.75 0.75	0.74	0.74	0.74	0.74	0.73	0.73	0.73	0.73

Fig. 47

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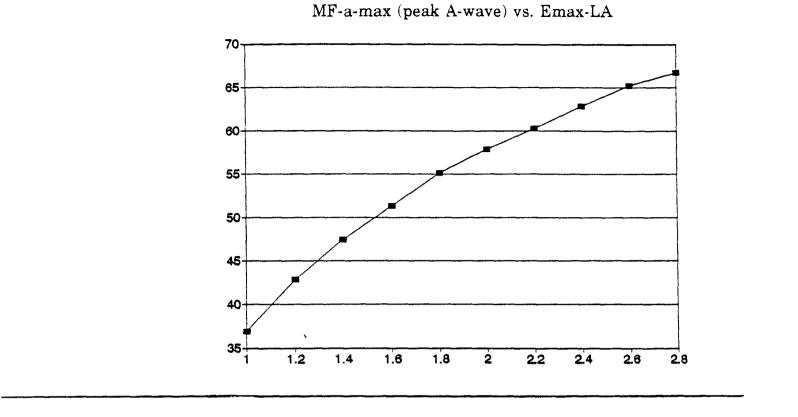
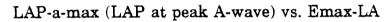
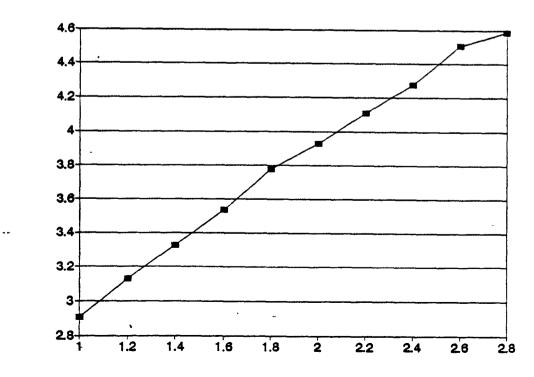


Fig. 49





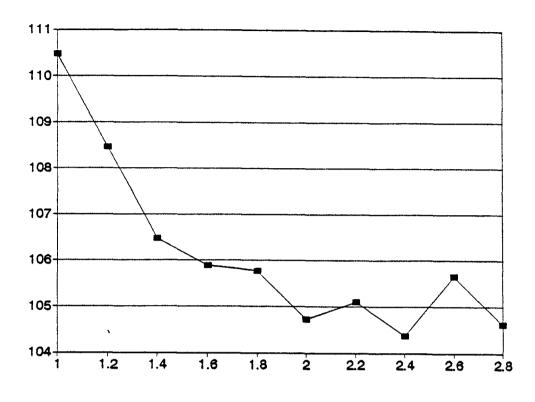
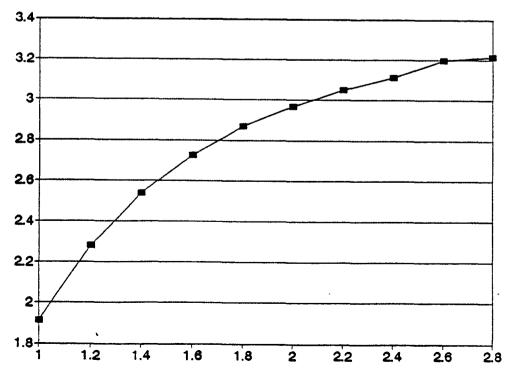


Fig. 50 PMF (peak mitral flow - E wave) vs. Emax-LA

Fig. 51

FVA (filling due to A-wave) vs. Emax-LA



<u>Vary Tau</u>: A second experiment of the above genre was performed, this time varying tau (the time constant of relaxation of the LV following a contraction) from 10 to 100 ms (the control is 20 ms) in increments of 8 ms. The tabular results are presented in figure 52. Following that are the graphs of MF-a-max/PMF (A/E ratio) vs. tau (figure 53), MLAP (mean LA pressure) vs. tau (figure 54) and (LAP-LVP)max (maximum AV pressure difference) vs. tau (figure 55). Since the ventricle is relaxing much slower it makes sense that its pressure drop is slower and less precipitous, thus maintaining a raised MLAP. This also leads to a significant rise in the A/E ratio as well as a decrease in the maximum pressure difference.

	this run va output	itau cont		n 10	to	100	in s	s 8						
	Jachac	20	10	18	26	34	42	50	58	66	74	82	90	98
	PCO	- 3	2.1		_	3.94			5.4		6.4	6.9		7.7
	LVPmin	-2	-2	-2		-0.8			0.7	1.3	1.8	2.1	2.4	2.7
	LVEDP	3.1	2.6	3		3.72	4		4.4		4.6	4.7	4.7	4.9
	LVEDV	40	39	40		41.8	42	43	43	43	44	44	43	43
	EF	54	53	54		54.2	54	54	55	55	55	55	55	55
	(LAP-LVP) ma	4.1	4.2	4.1										3.2
	PLVP	106				110						116		115
	M-(LA-LV)-d													0.6
	MLAP					1.66						3.8		4.6
	MLAP-diast								2.3		3	3.5	3.8	4.3
	MLAP-syst	1.5	0.8	1.3	1.8	2.25	2.7	3	3.3	3.6	3.9	4.2	4.5	4.8
	LVP-a-min	1.5	1	1.4	1.6	1.76	1.9	1.9	1.9	1.9		2.2	2.4	2.7
	LAP-a-max	4	3.5	3.9	4.1	4.08	4.2	4.3	4.5	4.6	4.8	5	5.2	5.6
	LAV-a-min	14	14	14	14	14.3	15	15	15	15	15	15	16	16
	PMF	105	97	104	108		110	109	107	105	103	101	98	95
	MF-a-min	16	10	14		27.6	31	32	33	34	36	39	42	44
	MF-a-max	58	58	58		56.2	59	63	67	71	76	81	86	92
	MF-a-max/PM	10.5	0.6		0.5	0.51	0.5	0.6		0.7		0.8	0.9	1
	FV	22	21	22		22.6	23	23	24	24	24	24	24	24
	FV-PMF	5				5.65				5.8	5.8	5.7	5.5	5.3
	FV-a-min	17	16	17		17.5	18	17	17	17	17	16	15	15
	FVA(Yellin)					3.13			3.1	3	3.1	3	3	3
	FVA(clin)	4.7				5.11							8.3	8.9
	FV-lost aft												0.0	0.0
	FVA(Y)/FV	0.1				0.14								0.1
	FVA(Y)-FV1					0.14							0.1	0.1
	FV-PMF/FV	0.2				0.25					0.2		0.2	0.2
	t-LVPmin	59	39	57	69	79	88	96		114			248	258
	t-(LAP-LVP)		27	35	40	43	46		48	49	49	49	49	49
	t-PMF	88	81	87	92	96	99		103	104	105		106	
	t-MF-a-min		439		397		359		323	306	290		261	
	t-MF-a-max		526		486			422					341	
	DFP-f	553			538						430			393
	DFP-p	542			527				-		420		391	379
•	DFP-f/RR	0.7	0.8	0.7	0.7	0.69	0.7	0.6	0.6	0.6	0.6	0.6	0.5	0.5

Fig. 52

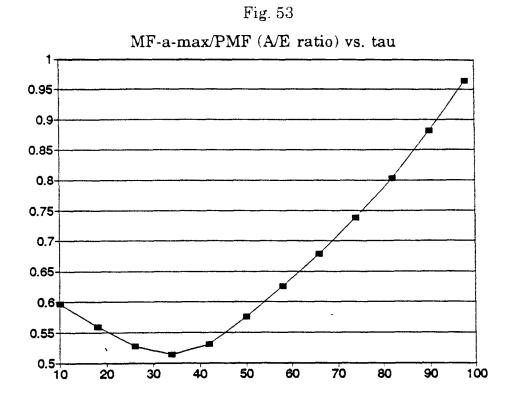
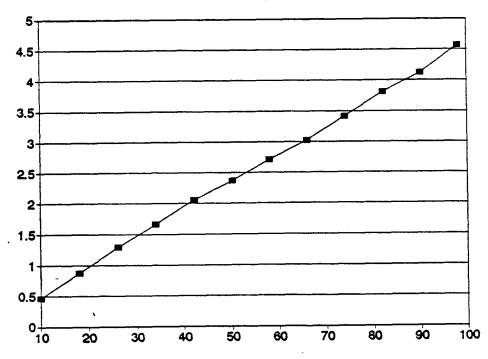


Fig. 54

MLAP (mean LA pressure) vs. tau



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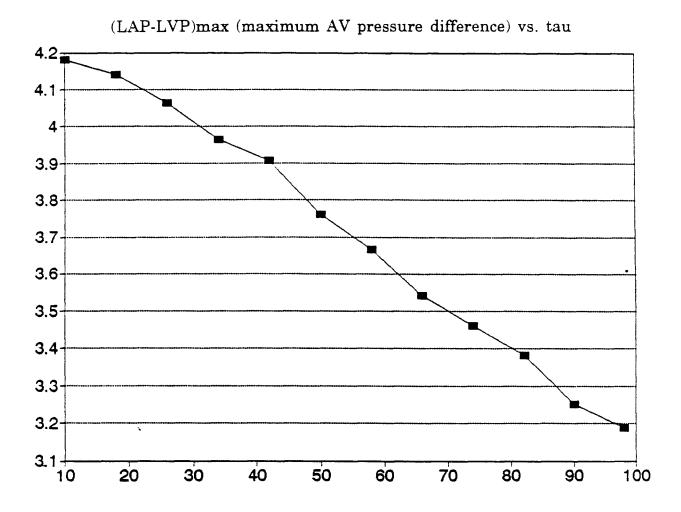


Fig. 55

Affect of Tau on MLAP: The final series of experiments was designed to see how MLAP (Mean Left Atrial Pressure) is affected by tau under a variety of conditions. Thus, all the graphs presented below are of MLAP vs. tau. In addition to changing certain of the control parameters in each run a second variable was added. Under each set of conditions two runs were performed, one in which the CO was permitted to settle to whatever value it settled, and a second run in which cardiac output was maintained at a constant 1736 ml. Many such runs were performed, though only a few of these are presented below. The first two are the control conditions. Figures 56 and 57 present the tabular results of the control run for C0=0 and C0=1736 respectively. Figures 58 and 59 are the respective graphs for those two runs. The first intervention shown is that of changing Pinf from its control value of -4 to -1, thus shifting up the entire passive response curve of the LV. Figures 60 and 61 present the numerical results of this run and figures 62 and 63 contain the graphical results. In the next experiment Emax-LV was lowered to 4 (control = 8) thus causing the strength of ventricular contraction to decrease. The numerical results are shown in figures 64 and 65 and the graphical results are presented in figures 66 and 67.

this run vatau		20	to	100	in st	: 10			
output conti		~ ~							
20		30							
	2.91				5.64		6.73		
	-1.7								
	3.11								
	40.4								
	53.7								
(LAP-LVP)ma4.12									
PLVP 106	106	109		114		116		115	115
M-(LA-LV)-d0.31								0.55	0.6
	0.97								
MLAP-diast 0.82									
	1.46								
LVP-a-min 1.47	1.44	1.67	1.83	1.89	1.97	1.99	2.18	2.41	2.83
LAP-a-max 3.96	3.93	4.02	4.13	4.32	4.56	4.67	4.97	5.24	5.75
	13.9	14.1	14.6					15.6	16.1
PMF 105			110					97.9	
MF-a-min 15.5	15.8	25	30.4	32.4	32.9	34.8	38.3	41.9	44.9
MF-a-max 57.8	57.8	56.2	57.6	62.9	68.2	73.5	79.8	86.5	93.8
MF-a-max/PM0.55	0.55	0.52	0.52	0.58	0.64	0.71	0.79	0.88	0.99
FV 21.7	21.7	22.4	23	23.5	23.8	23.8	23.9	23.8	23.6
FV-PMF 5.03	5	5.42	5.77	5.88	5.87	5.81	5.67	5.44	5.29
FV-a-min 17	17	17.4	17.6	17.5	17.4	16.8	16.3	15.4	14.5
FVA(Yellin)2.98	2.97	3.1	3.07	3.12	3.1	3	3.04	3	3.02
FVA(clin) 4.66	4.69	4.97	5.4	5.96	6.41	6.94	7.61	8.34	9.09
FV-lost aft0.01	0.01	0.01	0.01	0.01	0.01	0.01	0.01	0.01	0.01
	0.14								0.13
FVA(Y) - FV100.14							0.13		0.13
	0.23						0.24		0.22
t-LVPmin 59	59	74	86	97	106	122	232	248	259
t-(LAP-LVP) 36	36	42	45	48	48	49	50	49	50
t-PMF 88					103	105	106	105	106
t-MF-a-min 412	412	387	363	341	319	298	280	261	246
t-MF-a-max 501	501	475	448	423	400	378	360	341	326
DFP-f 553	553	528	503	480	458	438	421	404	390
DFP-p 542	542	517	493	471	449	428	410	391	376
	0.74				0.61				

Control Parameters, CO = 0

Fig. 56

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this run vatau output contr	from	30	to	100	in ste	e 10		
20		40	50	60	70	80	90	100
PCO 3.383			4.283					
	-1.16					1.225		2.016
LVEDP 3.508		3.136				3.222		3.65
	40.48							40.11
	53.73					53.86		54.02
(LAP-LVP) ma4.376						3.021		2.857
	106.2					105.6		105.3
M-(LA-LV)-d0.325						0.439		0.535
MLAP 1.245		1.48				2.746		3.785
MLAP-diast 1.061						2.392		3.529
MLAP-syst 1.739								4.05
LVP-a-min 1.728		1.303						2.052
	3.661						3.986	
	13.92					14.52		15.25
PMF 110.2	106.4	104.1	101	97.75	94.48	91.77	89.12	86.92
MF-a-min 14.58	24.28	29.62	30.51	30.58	32	34.76	38.03	41.03
MF-a-max 60.17	53.91	53.68	57.38	62.02	66.81	72.31	78.77	86.16
MF-a-max/PM0.546	0.507	0.516	0.568	0.634	0.707	0.788	0.884	0.991
	21.75					21.69		21.67
	5.296						4.991	4.883
	16.96						13.99	
FVA(Yellin)3.113						2.649	2.643	2.696
FVA(clin) 4.748					6.43	7.013	7.696	8.441
FV-lost aft 0.01				0.01	0.01	0.01	0.01	0.01
	0.138							
FVA(Y) - FVlo 0.14					0.122		0.121	
,	0.243	0.253	0.25	0.25	0.245			0.225
t-LVPmin 59		87	99	112	210	244	258	262
t-(LAP-LVP) 36		45	47	48	49	49	49	49
t-PMF 87		99	102	105	106	107	106	106
t-MF-a-min 413		363	340	318	297	278	260	244
t-MF-a-max 502		447	421	398	377	358	340	325
DFP-f 553		503	480	458	438	420	404	389
DFP-p 543		493	470	448	427	408	390	374
DFP-f/RR 0.737	0.704	0.671	0.64	0.611	0.584	0.56	0.539	0.519

Control Parameters, CO = 1736

Fig. 57

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Fig. 58

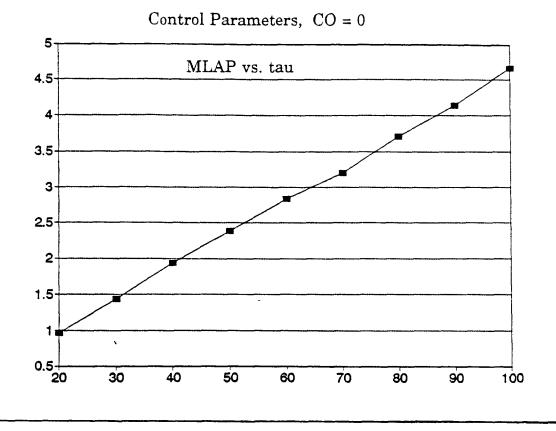
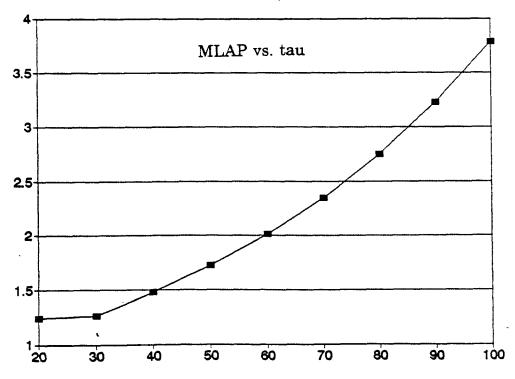


Fig. 59 Control Parameters, CO = 1736



this run vatau output contro	from	30	to	100	in ste	e 10		
20	30	40	50	60	70	80	90	100
	4.752			6.487			8.144	
LVPmin 0.926		1.794	2.326	2.85		3.782		4.46
LVEDP 4.703	5.04		5.604			6.063		6.364
LVEDV 36.59				39.45		39.89		39.42
EF 52.83	53.47		53.98			54.41	54.3	54.41
(LAP-LVP)ma2.948	2.978		2.959			2.767		2.619
	97.47			103.7		105.2		104.1
M-(LA-LV)-d0.253		0.306				0.466		0.567
MLAP 2.639			3.767					5.85
MLAP-diast 2.708	3.025		3.713					5.943
MLAP-syst 2.475	2.992		3.868					
LVP-a-min 3.085		3.339		3.494	3.605	3.82		4.511
LAP-a-max 6.025	6.068	6.132	6.406	6.649	6.921	7.223	7.569	8.041
LAV-a-min 15.67	15.9	16.27	16.6	16.75	16.86	17.02	17.24	17.59
PMF 79.94	85.38	87.64	89.24	88.33	86.94	85.81	83.54	81.34
MF-a-min 17.63	24.87	28.52	28.74	28.38	29.8	32.38	35.27	38.35
	68.82		76.3		86.77			103.2
MF-a-max/PM0.868						1.069	1.163	1.268
FV 19.33	20.08					21.7		21.45
	4.439		4.888	4.983	4.923	4.862	4.777	4.666
FV-a-min 13.78	14.22		14.35		13.92	13.54	12.84	12.09
FVA(Yellin)3.899	3.908	3.888	3.872	3.848	3.838	3.842	3.844	3.849
FVA(clin) 5.556			6.743			8.163	8.733	9.362
FV-lost aft 0.01	0.01	0.01	0.01	0.01	0.01	0.01	0.01	0.01
FVA(Y)/FV 0.202	0.195			0.18	0.178			0.179
FVA(Y)-FV100.201			0.183	0.18	0.177			0.179
FV-PMF/FV 0.208	0.221		0.232		0.228	0.224	0.221	
t-LVPmin 60	75	87	98	110	129	242	257	259
t-(LAP-LVP) 38	42	46	48	49	49	50	50	50
t-PMF 93	97	102	104	107	107	108	108	109
t-MF-a-min 408	381	356	333	311	289	271	252	237
t-MF-a-max 496	468	440	416	393	371	353	335	320
DFP-f 548	521	495	472	450	429	412	394	381
DFP-p 538	511	486	463	441	419	401	382	367
DFP-f/RR 0.731	0.695	0.66	0.629	0.6	0.572	0.549	0.525	0.508

Control Parameters except Pinf = -1, CO = 0

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this run vata output co	u from ontrol	30	to	100	in ste	e 10		
	20 30	40	50	60	70	80	90	100
PCO 5.	273 5.600		6.434				8.355	
		2.047					4.152	
	091 5.97					6.089		6.52
	0.31 40.02					39.95		39.8
	.16 54.29						54.41	
(LAP-LVP)ma 3								2.671
	06.9 105.0							105.3
M-(LA-LV)-d0.							0.511	0.567
	466 3.598							6.039
MLAP-diast 3.								6.098
MLAP-syst 3.				4.46				5.995
LVP-a-min 4.								4.62
LAP-a-max 7.								
	5.53 16.49					17.06		17.73
PMF 96	5.06 95.74	4 94.96	93.05	90.62	88.25	85.97	84.06	82.34
MF-a-min 16	5.78 25.10	5 29.37	29.44	28.87	29.82	32.27	35.39	38.48
	7.31 73.28							103.7
MF-a-max/PM0.	805 0.76	5 0.778	0.834	0.905	0.98	1.063	1.156	1.259
				21.73				21.69
	631 4.90							4.689
	5.88 15.6							12.3
FVA(Yellin)4.								3.902
FVA(clin) 5.								9.391
FV-lost aft (0.01			0.01
FVA(Y)/FV = 0.								0.18
FVA(Y) - FVlo0.								
	.212 0.22		0.232			0.224		0.216
t-LVPmin	59 7		98	111	139	244	260	260
t-(LAP-LVP)	36 43		47		50	49	50	50
t-PMF	89 9		103		107			108
t-MF-a-min		4 359	335		292	272	255	239
t-MF-a-max	498 47		418		374			322
DFP-f	549 523		473		432	413		382
DFP-p	540 51		465	443	422	402	385	369
DFP-f/RR 0.	.732 0.69	7 0.664	0.631	0.603	0.576	0.551	0.529	0.509

Control Parameters except Pinf = -1, CO = 1736

Fig. 61

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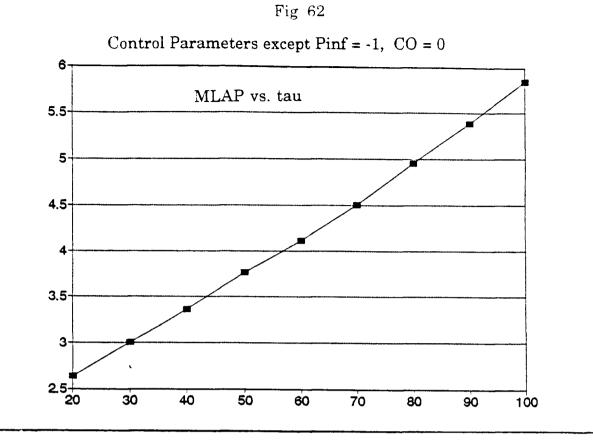
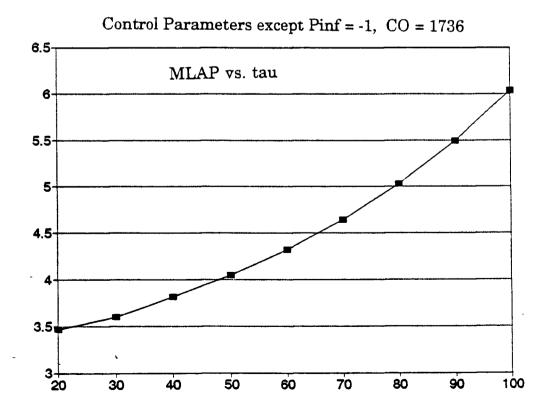


Fig. 63



this run vatau		30	to	100	in ste	e 10		
output contro								
20			50		-		90	100
		5.598					8.445	
LVPmin -0.05					3.21			
LVEDP 5.851					8.063			
		47.97						
		41.02						41.52
(LAP-LVP)ma3.827								3.03
	91.14				97.21			
M-(LA-LV)-d0.232								0.434
		3.745			5.081			6.162
MLAP-diast 2.745								
		3.856						
		4.147						
		7.326						9.143
LAV-a-min 16.04								18.14
PMF 95.83	100.9	101.2				96.43	94.23	91.67
	15.18		29.51			24.86		25.12
		65.54						98.8
MF-a-max/PM0.738								1.078
FV 18.6	19.32	19.68	20.18	20.44	20.68	20.79	20.85	20.66
FV-PMF 4.362	4.865	5.098	5.179	5.297	5.197	5.179	5.087	5.015
		14.42				13.59		12.69
FVA(Yellin)3.786								
FVA(clin) 4.863								
FV-lost aft 0.01							0.01	
FVA(Y)/FV 0.204	0.209	0.209	0.204	0.198	0.194	0.192	0.192	0.194
FVA(Y) - FV100.203	0.208	0.208	0.203	0.198	0.194	0.192	0.191	0.194
FV-PMF/FV 0.235	0.252	0.259	0.257	0.259	0.251	0.249	0.244	0.243
t-LVPmin 53	65	74	80	85	90	93	96	99
t-(LAP-LVP) 35	41	45	47	48	50	50	50	51
t-PMF 85	91	96	98	101	102	103	104	105
t-MF-a-min 413	389	366	344	323	303	283	265	247
t-MF-a-max 500	477	452	427	403	382	363	345	328
DFP-f 549	525	501	477	455	435	415	399	382
DFP-p 543	519	496	474	453	433	413	395	377
DFP-f/RR 0.732	0.7	0.668	0.636	0.607	0.58	0.553	0.532	0.509

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Control Parameters except EmaxLV = 4, CO = 0

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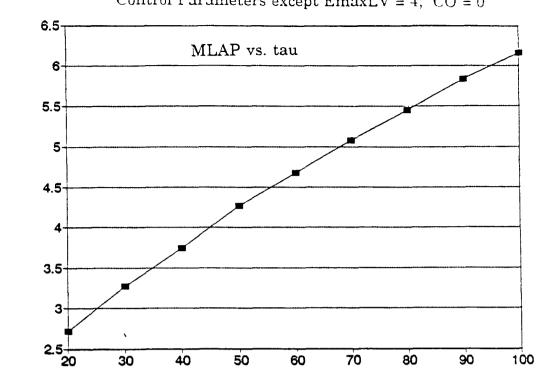
this run vatau output contr		30	to	100	in ste	e 10		
20	30	40	50	60	70	80	90	100
	6.963				8.672		9.508	
	1.497					4.529		5.697
	9.375							9.82
	51.71							
EF 41.8			41.82					41.96
(LAP-LVP)ma5.065								3.267
PLVP 100.9	101.7	102.3	102.5	102.5	102.5	102.3	102.2	102
M-(LA-LV)-d0.264	0.297	0.321	0.318	0.318	0.332	0.357	0.394	0.439
MLAP 4.636	4.98	5.33	5.597	5.83	6.07	6.35	6.689	7.099
MLAP-diast 4.682								7.096
MLAP-syst 4.535								7.12
	5.888						5.519	5.789
LAP-a-max 10.19							9.9	10.31
LAV-a-min 18.32					18.83			19.09
PMF 120					105.8			
	10.52							26.28
MF-a-max 87.61		76.86			84.99			103.6
MF-a-max/PM 0.73								1.068
FV 21.51								21.7
FV-PMF 5.261					5.565			
	16.09							
FVA(Yellin)4.536								4.3
	5.526							
FV-lost aft 0.01					0.014			0.01
FVA(Y)/FV 0.211								
FVA(Y) - FVlo 0.21								
	0.256							0.24
t-LVPmin 52		71	77	83	88	92	94	97
t-(LAP-LVP) 35		43	45	47	49	50	50	51
t-PMF 82		92	95	98	101	102	103	104
t-MF-a-min 417		370	348		307	288	269	253
t-MF-a-max 502		457	432	408	386	367	349	333
DFP-f 549		502	479		437	419	401	386
DFP-p 547		500	478	457	437	418	399	383
DFP-f/RR 0.732	0.7	0.669	0.639	0.609	0.583	0.559	0.535	0.515

Control Parameters except EmaxLV = 4, CO = 1736

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Control Parameters except EmaxLV = 4, CO = 0

Fig. 67

Control Parameters except EmaxLV = 4, CO = 1736 7.5-MLAP vs. tau 7. 6.5-6 5.5-5-4.5|- 20 80 90 100 60 70 30 40 50

CHAPTER VI

PSPICE Implementation:

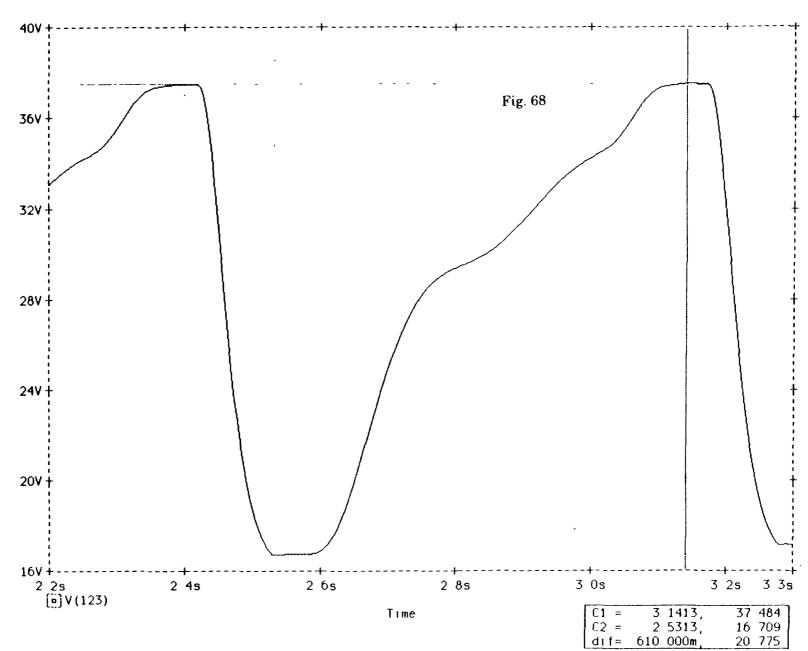
Motivation: Up to this point, the method used to implement the Meisner model of the cardiovascular system was a general method of solving differential equations, equally applicable to an electric circuit or an hydraulic system. This approach, though using a schematic diagram of the type frequently used by electrical as opposed to mechanical engineers, did not specifically demonstrate that this was an electrical model of a mechanical system. An alternate approach to the implementation of this model is to treat it purely as an electrical circuit and to implement it using a circuit analysis program. Thus, the circulation was modeled and treated as an electrical circuit using the simulation program PSPICE, version 4.05 (MicroSim Incorporated, Irvine, CA). The program uses standard network theory to analyze electrical circuits and is available for IBM, IBM compatible and Macintosh microcomputers.

<u>Use of PSPICE</u>: To simulate a circuit using PSPICE, each node in the circuit diagram needs to be labeled with a number and the entire circuit needs to be described to PSPICE in an input file by describing which circuit element(s) (resistor, capacitor, inductor, voltage and/or current source, etc.) are located between the various nodes. In addition to the information which describes the circuit, PSPICE requires other information which is described on "control lines". These include the type of analysis to be performed, in this case transient, as well as other controlling information to be described below. PSPICE reads this input file and then uses Kirchhoff's Current Law to create a system of equations for the circuit, where the voltages at each node are the unknowns and the admittances of each branch are the knowns. The resulting simultaneous equations are formed into an admittance matrix which is solved using the Newton-Raphson method. There is a student version of PSPICE available which performs many of the basic functions and analyses of the full version. However there were some functions and features needed for this implementation that could not be done on the student version but required the full version of PSPICE.

The file containing the circuit description and the control lines must be stored in a file called ****.cir. The circuit describing the Meisner model is called mod17a.cir. When this file is operated on by running PSPICE.BAT the output is stored in two files. One. called mod17a.out, is an output file which contains a copy of the input file as well as a numerical list of time versus any values requested in a ".PRINT" statement in that input file. The second output file, called PROBE.DAT, is a data file which is available to PROBE.EXE (Which is run automatically when the batch file is run.) and can be stored under a different name, thus making it available for later recall even after another run has taken place. When PROBE is run, it reads in this massive data file which contains all of the currents and voltages at every node in the circuit for all time increments through which the program was run and asked to store. It is an interactive routine which permits plots of all of the circuit voltages and currents to be graphed versus time. A voltage between node "X" and ground is represented by V(X), while the voltage between nodes "X" and "Y" is represented by V(X,Y). Thus, looking at the circuit diagram in figure 88, it can be seen that the left ventricular pressure corresponds to the voltage at node 110 and would be referred to as V(110) by PROBE, while the drop across the mitral resistance would be called V(90,100). Current through the element Xi is similarly represented by I(Xi) and the mitral flow, which is the flow through R2, would be I(R2). In addition, PROBE permits the scales of the x and y axes to be manipulated enabling any part of the graphs that are of interest to be observed, as well as allowing the use of cursors to accurately measure values. Figure 68 shows how this can be used to calculate EDV, ESV and FV from the graph of LVV.

Implementation: If the circuit used to simulate the heart had contained only standard elements, then the above description of how to simulate a circuit in PSPICE is all that would have been required -- to very simply and straight forwardly describe the circuit by listing the various elements along with their corresponding nodes, as well as several control lines. In this circuit, those straightforward elements account for the majority of the components, but are actually an insignificant portion of the work and the PSPICE code. The elements that need to be handled in a more complex manner are presented below with a description of how they were implemented.

Right ventricle: The right ventricle, as discussed above, is likened to an independent input voltage source occurring once each "heartbeat". As discussed above in the Meisner model, the right ventricular waveform was originally a rectified sine. Thus, this is what is now described. However, it has since been changed to a scaled version of the left ventricle. (That is V(62) is now simply a scaled version of V(82) in the PSPICE implementation.) Generating a voltage source in the form of a sine wave is not difficult since PSPICE can generate five kinds of time-dependent functions for use in independent sources, one of them being a sinusoidal

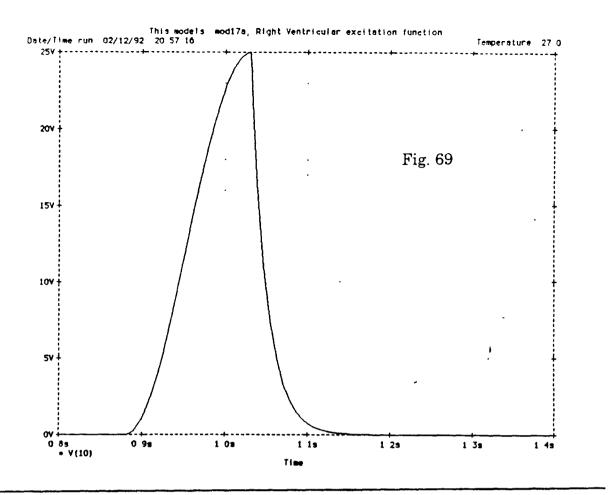


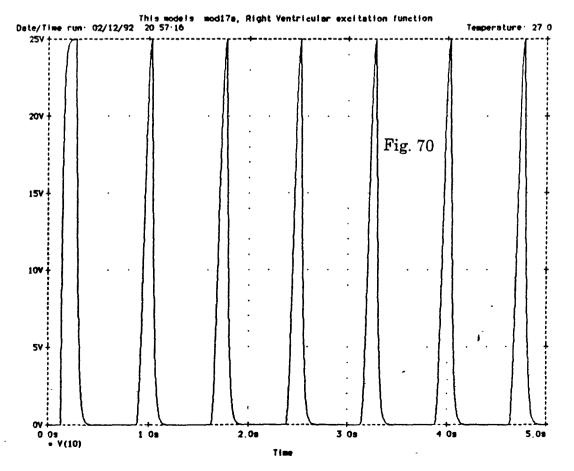
This models mod17a

source. The problem is that once the frequency of a sine wave is specified, that obviously determines at what interval the wave repeats. For the right ventricle, the duration of 300 ms determines a frequency of 3.3333 Hz. However, once the 0 to Π radians section of the wave is complete the wave is not desired again until the next "heartbeat" which is an RR interval (about 750 ms) away.

It was thus necessary to start the pulse chain by generating just one pulse of the right ventricle waveform rather than a repetitive, continuous wave. This was accomplished by producing the required sine wave and multiplying it by a pulse that was zero everywhere except for the 300 ms duration of that first pulse, where it is one. Once this was created, as shown in figure 69, another problem (which was also faced in the left atrium and ventricle) needed to be overcome, namely how to create a pulse train, of the type shown in fig. 70, out of these pulses. Three methods were successfully attempted. At this point it is not yet certain which method has the fastest run time nor which is the most precise, though, as will be clear soon, it is obvious which is the easiest to implement.

The first method entailed simply generating another equivalent pulse later in time by the identical method used for the first: generating a sine wave, generating a pulse, and then multiplying the two, but this time starting everything integer-multiples of the RR interval later. This was repeated over and over and then all of these pulses were added together. This clearly entails an inordinate amount of programming and, since generating a pulse with a rapid rise time requires small-stepped, slow calculations, probably is slow in running as well. This method is illustrated in Figure 71. The left side shows the creation of four right ventricular





*Creates function used in the right ventricle SUBCKT RV 299 298 PARANS: PMAXRV=25 VSIN1 201 0 SIN(0 (PMAXRV) 1.66666666667 (PR)) VCHOP1 202 0 PULSE(0 1 (PR) 10 10 (2*PR) 40) EPROD1 203 0 POLY(2) 201 0 202 0 0 0 0 1 R201 201 0 1G R202 202 0 1G R203 203 0 1G VSIN2 211 0 SIN(0 (PMAXRV) 1.66666666667 (PR+RR)) VCHOP2 212 0 PULSE (0 1 (PR+RR) 10 10 (2*PR) 40) EPROD2 213 0 POLY(2) 211 0 212 0 0 0 0 1 ESUM2 219 0 POLY(2) 203 0 213 0 0 1 1 R211 211 0 1G R212 212 0 1G R213 213 0 1G R219 219 0 1G VSIN3 221 0 SIN(0 (PMAXRV) 1.66666666667 (PR+(2*RR)) VCHOP3 222 0 PULSE(0 1 (PR+(2*RR)) 10 10 (2*PR) 40) EPROD3 223 0 POLY(2) 221 0 222 0 0 0 0 1 ESUN3 229 0 POLY(2) 219 0 223 0 0 1 1 R221 221 0 1G R222 222 0 1G R223 223 0 1G R229 229 0 1G VSIN4 231 0 SIN(0 (PMAXRV) 1.6666666667 (PR+(3*RR)) VCHOP4 232 0 PULSE(0 1 (PR+(3*RR)) 10 10 (2*PR) 40) EPROD4 233 0 POLY(2) 231 0 232 0 0 0 0 1 ESUN4 239 0 POLY(2) 229 0 233 0 0 1 1 R231 231 0 100K 8232 232 0 100K R233 233 0 100K R239 239 0 100K EQUT 299 298 VALUE=(V(239)) R299 299 0 10K 2298 298 0 10K .ENDS

*CREATES function used in LEFT VENTRICLE SUBCKT LV 399 398 PARANS: EMAXLV=8 VSIN1 201 0 SIN((EMAXLV/2) (EMAXLV/2) 3.3333333 (RR-(.5*PR))) VCHOP1 202 0 PULSE(0 1 (RR+PR) 10 10 (PR) 40) EPROD1 203 0 POLY(2) 201 0 202 0 0 0 0 1 VEXP1 204 0 EXP(0 (EMAXLV) (RR+PR) 8M (RR+(2*PR)) (TAU)) VCOP1 205 0 PULSE(0 1 (RR+(2*PR)+ 000001) 1U 1U (RR+(2*PR)) 50) EPOD1 206 0 POLY(2) 204 0 205 0 0 0 0 1 ESUN1 207 0 POLY(2) 203 0 206 0 0 1 1 R201 201 0 10K R202 202 0 10K 8203 203 0 10K R204 204 0 10K 8205 205 0 10K R206 206 0 10K 8207 207 0 10K VSIN2 211 0 SIN((EMAXLV/2) (EMAXLV/2) 3.333333333 ((2*RR)-(.5*PR))) VCHOP2 212 0 PULSE(0 1 ((2*RR)+PR) 10 10 (PR) 40) EPROD 213 0 POLY(2) 211 0 212 0 0 0 0 1 VEXP2 214 0 EXP(0 (EMAXLV) ((2*RR)+PR) 8M ((2*RR)+(2*PR)) (TAU)) VCOP2 215 0 PULSE(0 1 ((2*RR)+(2*PR)+.000001) 1U 1U (RR-(2*PR)) 50) EPOD2 216 0 POLY(2) 214 0 215 0 0 0 0 1 ESUN2 217 0 POLY(2) 213 0 216 0 0 1 1 ETOTAL 218 0 POLY(2) 217 0 207 0 0 1 1 R211 211 0 10K R212 212 0 10K R213 213 0 10K R214 214 0 10K R215 215 0 10K R216 216 0 10K 8217 217 0 104 R218 218 0 10K EOUT 399 398 VALUE=(V(218)+.001) 298 398 0 10K 200 399 0 10K

.ENDS

Fig. 71

...

pulses. On the right side, taking as much code as the left side, the creation of only two left ventricular pulses is shown.

The other two methods involve the use of transmission lines, which in PSPICE can be lossless, ideal time delay elements. An important consideration when using transmission lines, particularly more than one originating from a common source, is the need to terminate them properly in order to avoid reflections which do occur in PSPICE and can seriously alter the originally intended signal. The second method involved using many transmission lines which all originated from the first voltage source, each delayed by one RR interval more than the previous one. This generated a whole series of pulses which were then added together to form the desired pulse train. This method required one transmission line for each heartbeat in the simulation, but only one summer, all the way at the end. This method is illustrated in Figure 72, where twenty right ventricle pulses are produced. Since the implementation of transmission lines is considered time consuming in PSPICE analysis, this is not, except for very small trains, the fastest method either.

The third method builds the pulse train in exponential form. First, one transmission line delays the original pulse one RR interval. These two pulses are added to form a train of two pulses. This whole new train is now delayed by two RR intervals yielding an identical train starting two RR delays after the first train. When these two trains are added together, the result is a train of four pulses. This whole train is now delayed four RR intervals, the new delayed train and the existing train are added producing a new train of eight pulses, etc. This method is illustrated in Figure 73 where sixty-four ventricular pulses are produced. Thus to produce a train n pulses long, just $\log_2(n)$ transmission lines and adders are required. This

*Creates function used in the right ventricle

. ENDS

Creates function used in the right ventricle .SUBCKT RV 299 298 VSIN1 201 0 SIN(0 (PMAXRV) {1/(2(RVDUR/1000))} (PR)) VCHOP1 202 0 PULSE(0 1 {PR} 1U 1U {RVDUR/1000} 50) EPROD1 203 0 POLY(2) 201 0 202 0 0 0 0 1 201 0 10K R201 R202 202 O 10K R203 203 400 10K

 T11
 400
 0
 301
 0
 Z0=10K
 TD=(RR)

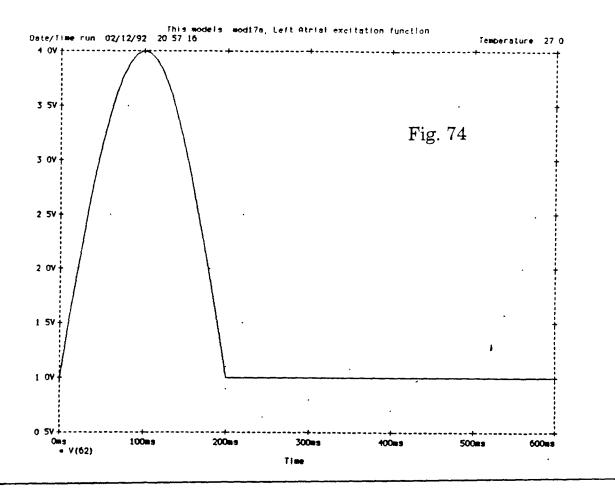
 ES1
 308
 0
 POLY(2)
 203
 0
 301
 0
 1
 2

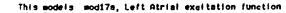
 R301 301 0 10K R308 308 313 10K T12 313 0 317 0 Z0=10K TD={2*RR} ES2 318 0 POLY(2) 308 0 317 0 0 1 2 R317 317 0 10K R318 318 323 10K T13 323 0 327 0 Z0=10K TD={4*RR} ES3 328 0 POLY(2) 318 0 327 0 0 1 2 R327 327 0 10K R328 328 333 10K T14 333 0 337 0 Z0=10K TD={8*RR} ES4 338 0 POLY(2) 328 0 337 0 0 1 2 R337 337 0 10K R338 338 343 10K T15 343 0 347 0 Z0=10K TD={16*RR} ES5 348 0 POLY(2) 338 0 347 0 0 1 2 R347 347 0 10K R348 348 353 10K T16 353 0 357 0 Z0=10K TD={32*RR} Fig. 73 ES6 358 0 POLY(2) 348 0 357 0 0 1 2 R357 357 0 10K R358 358 0 10K EOUT 299 298 VALUE={V(358)} 299 0 10K R299 R298 298 0 10K . ENDS

method requires the least programming, especially as the trains get longer, and is, for any run other than for very small trains, the fastest of the methods. For the right ventricle each of these methods was attempted, each yielded the required pulse train and each could be used in a final version. However, all runs presented herein used the third method. The right ventricle pulse train is V(10) in all of the PSPICE implementations.

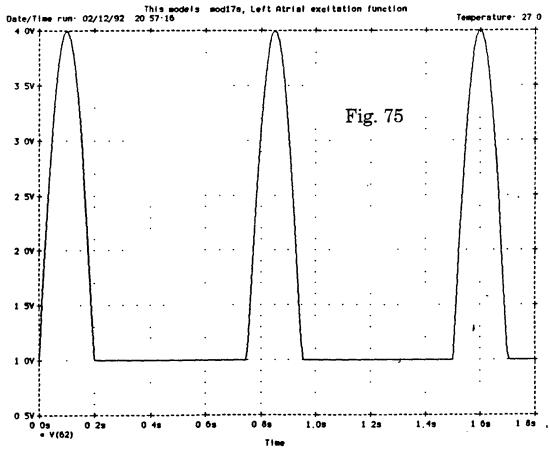
Left Atrium: The total voltage (pressure) in the left atrium is, as described above (in equation 1): $P = E (V - V_d)$ where E is an activation function, V is the instantaneous volume, and V_d is the "dead volume", which is a volume offset that differs from diastole to systole. In order to implement such a function in PSPICE it was expanded into two separate components: 1) E * V and 2) - (E * V_d).

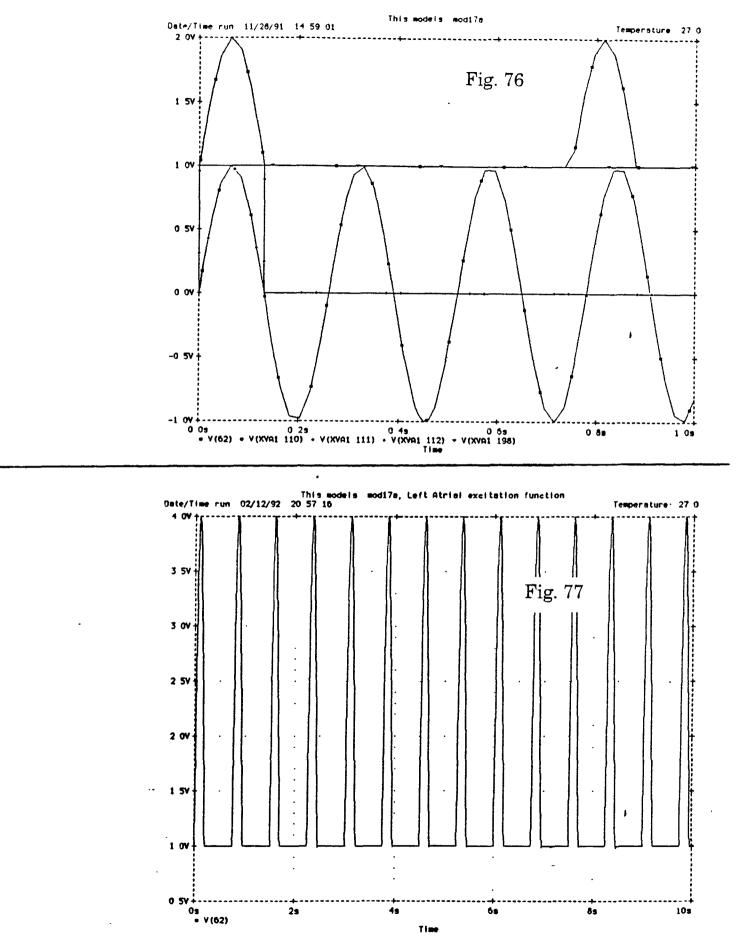
Since the activation function E appears in both terms, it is generated first. A single pulse of it is shown in fig.74, and three identical pulses in fig.75. It is a rectified sine function from 0 to Π radians with a peak of EmaxLA, a duration of 200 ms and baseline of K10. In order to generate the first pulse, an almost identical method as that used for the right ventricle was used. In addition, for the pulse train the same three possible methods as described for the right ventricle were used. A sine pulse of amplitude (EmaxLA-K10) and duration 200 ms was generated and then multiplied by a pulse that was zero everywhere except during the 200 ms for which it was desired. This pulse was the pulse that was then recreated or delayed in time to create the pulse train. Finally, once this long train was created, a dc source of K10 amplitude was added to the entire function to yield the desired pulse train. The creation of the first pulse is illustrated in Figure





Temperature: 27.0





76. The final pulse train, always designated as V(62) in the model, is illustrated in Figure 77.

The second component of the left atrium, $(-(E * V_d))$, is an independent voltage source consisting of the pulse train E multiplied by V_d . However, since V_d in actuality varies very little it was decided to treat it as a constant, called LAV0 in the PSPICE code. This term is therefore just a voltage source which looks like an inverted and scaled version of E.

The first term, (E * V), is somewhat more complicated since it involves the instantaneous volume of the chamber. However, if the mechanical/electrical analogs are kept in mind it becomes much simpler. This term calls for the pressure (=voltage) to be a linear function of the volume (=stored charge). This is the exact relationship of a capacitor, where Q = C * V. Thus if P = E * V, all that is needed is to use a variable capacitor where the capacitance varies as 1/E, and then this relationship is automatically implemented. The complete left atrial branch is shown in Figure 78. Implementing a variable capacitance in PSPICE entails providing the controlling function, E in this case, and a reference value capacitance, chosen to be 1 Farad in this program, to a standard subroutine called "yx", which is provided by MicroSim (the producer of PSPICE). (This is not as straightforward and simple as it sounds.)

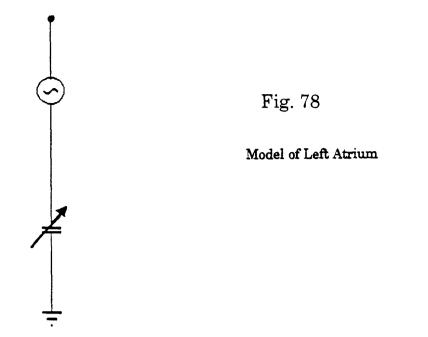
Mitral Orifice: In the mitral orifice/valve section of the model the only non-standard component is that of mitral resistance, which does not follow the usual V = IR relationship but rather, follows the non-linear V = I^2R . Therefore, instead of putting a resistor in that location in the PSPICE model, which would produce a linear pressure drop, the drop itself was inserted by using a current controlled voltage source. In such a source the voltage across it is of the form $V(x,y) = a + b * I(z) + c * I(z)^2 + d * I(z)^3 + \dots$. Therefore, in order to simulate the resistance of the mitral value a "dead" voltage source was inserted immediately following the mitral value in order to measure the mitral current. A current-controlled voltage source with I(z) being the current through the "dead" voltage source and all the coefficients being zero except for c (which was the value of the resistance) was used in place of the resistor. This form has the added advantage that if it is later desired to simulate the resistance not solely as a function of the square of the flow but also with constant, linear or higher order terms it is as simple as changing the values of those zeros.

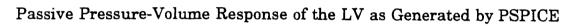
Left Ventricle: Simulating the left ventricle in PSPICE presented a number of problems due to the number and types of terms present in the total pressure equation. The total pressure of the left ventricle is represented, as described earlier, by the sum of equations 3 and 4 to yield:

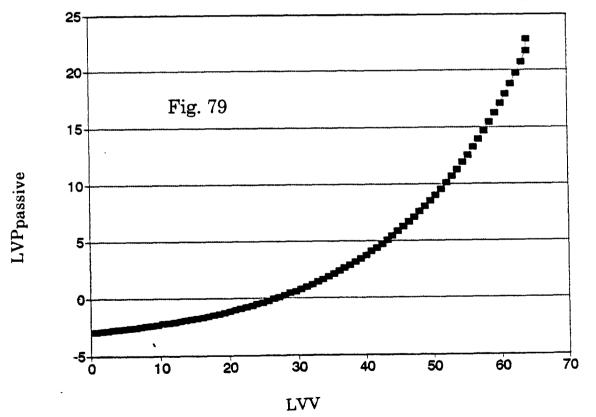
$$P = Ae^{\alpha V} + B(dV/dt) + P_{inf} + E(V-V_d)$$
 [5]

where A is the passive elastance coefficient, α is the passive elastance exponent, V is the instantaneous left ventricular volume, B is the viscous coefficient and P_{inf} is the left ventricular pressure asymptotic offset, E is an activation function and V_d is a "dead volume" offset. The last term represents the active component while the first three terms represent the passive response. This passive response, as generated by PSPICE, is shown in fig. 79.

In order to describe this to PSPICE it was expanded and subdivided into 5 distinct terms which were each handled separately.







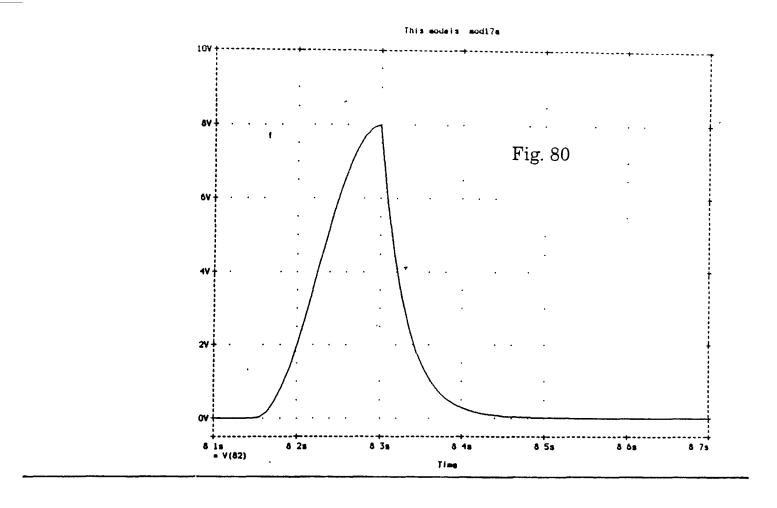
1) The easiest term is the P_{inf} which is represented as a constant dc source, a battery, of value P_{inf} , which is changeable at the beginning of the program.

2) The B(dV/dt) term relates the rate of change of left ventricular volume to the pressure by a linear multiplier B. Since rate of change of volume is flow, this is the equivalent of V = IR where the value of the resistance is B. Thus a resistance was placed in series with the battery.

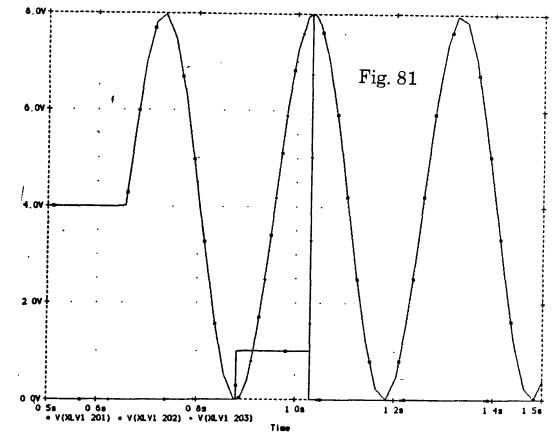
3&4) The E(V-V_d) term was expanded into two terms:

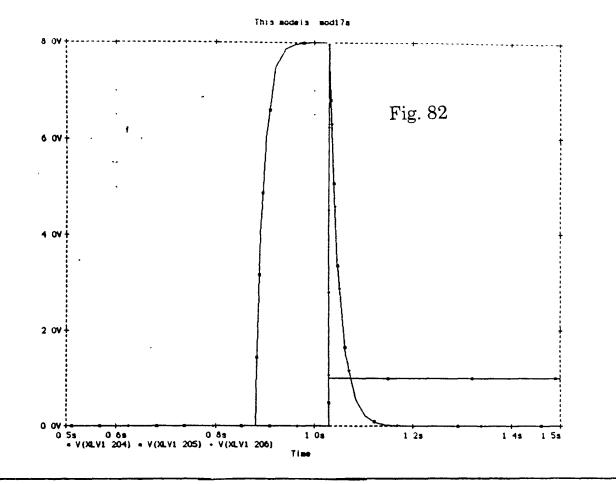
3) E * V and 4) -(E *Vd). Since both terms contain the activation function E it was necessary to generate that first. The same three methods used for both the right ventricle and the left atrium were employed in creating the train of pulses for this function. However, creating the first one was much more difficult. The first problem involved the fact that the rising section of this function begins after 3/4's of a sine wave have elapsed. The sine wave has a frequency of 3.3333 Hz which means that the function picks it up 225 ms after it has begun. The first occurrence of this pulse is expected at one PR interval after the start of the program, about 130 ms. Since PSPICE cannot be "tricked" into thinking that a pulse has started at a negative time it is impossible to create the first pulse at the point in time where the first pulse should appear (using this particular activation function). The first occurrence of this pulse was therefore created at one PR interval after the start of the second "heartbeat", one RR interval after time zero. In order that there not be such a long interval before the first ventricular contraction, an alternate activation function, consisting of a rising as well as a decaying exponential, was inserted for the first pulse in the pulse train of E. Once the pulse train for E was complete, it was then possible to simulate the E * V and $-(E * V_d)$ terms in the same way as was done in the left atrium. This completed pulse train consisted of the first pulse being not quite correct, the second pulse, which was the first correct pulse, and many copies of the correct second pulse created using one of the three methods described above following these first two. An example of a completed correct pulse appears in Figure 80. The process of building the first half of the pulse, i.e., the rising sine, is illustrated in Figure 81, and the process of building the second half of the pulse is illustrated in Figure 82. The completed pulse train, referred to in the model as V(82), is shown in Figure 83. Thus, a variable capacitor and a variable voltage source were appended in series with the resistor and battery.

5) The Ae^{αV} term presented a new challenge in that, in order to implement the exponential term, it is required to know the instantaneous left ventricular volume (LVV), which is equivalent to the charge stored across the variable capacitor. That value is not accessible in PSPICE. In addition to being a significant quantity in terms of producing the final pressure term, the charge across the capacitor, representing LVV, is an important term in its own right in that one of the important parameters that should be looked at in any model of the heart is left ventricular volume, considering its time course and absolute values. It was therefore quite important, for two reasons, to be able to determine the left ventricular volume. The solution to this problem was to include another, very large, fixed value capacitor in series with the variable capacitor. Since when two capacitors are in series the total effective capacitance is the reciprocal of the sum of the reciprocals, if one of the two is many orders of magnitude greater than the other, the larger one will have a negligible effect on the effective overall capacitance. This is demonstrated in Figures 84 and 85, where the voltage across the large capacitor, V(114,115), is plotted on the same axis as the

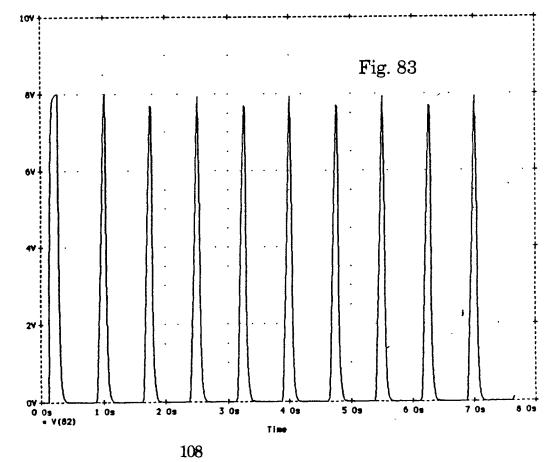


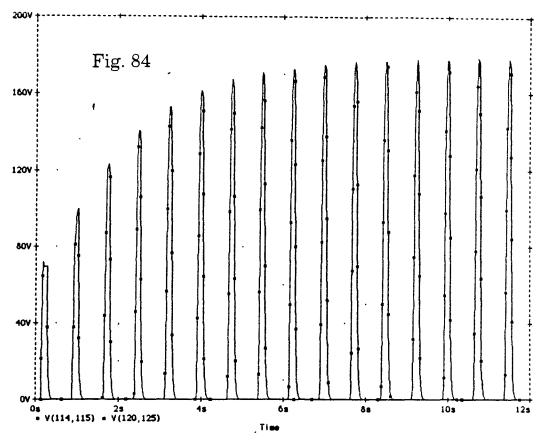




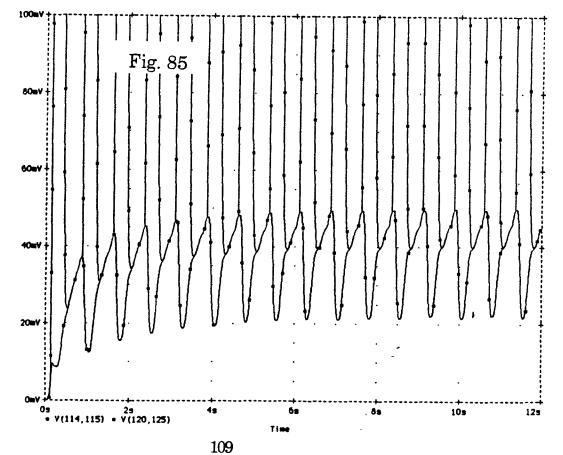


This models mod17a





This models mod17a



This models modi7a

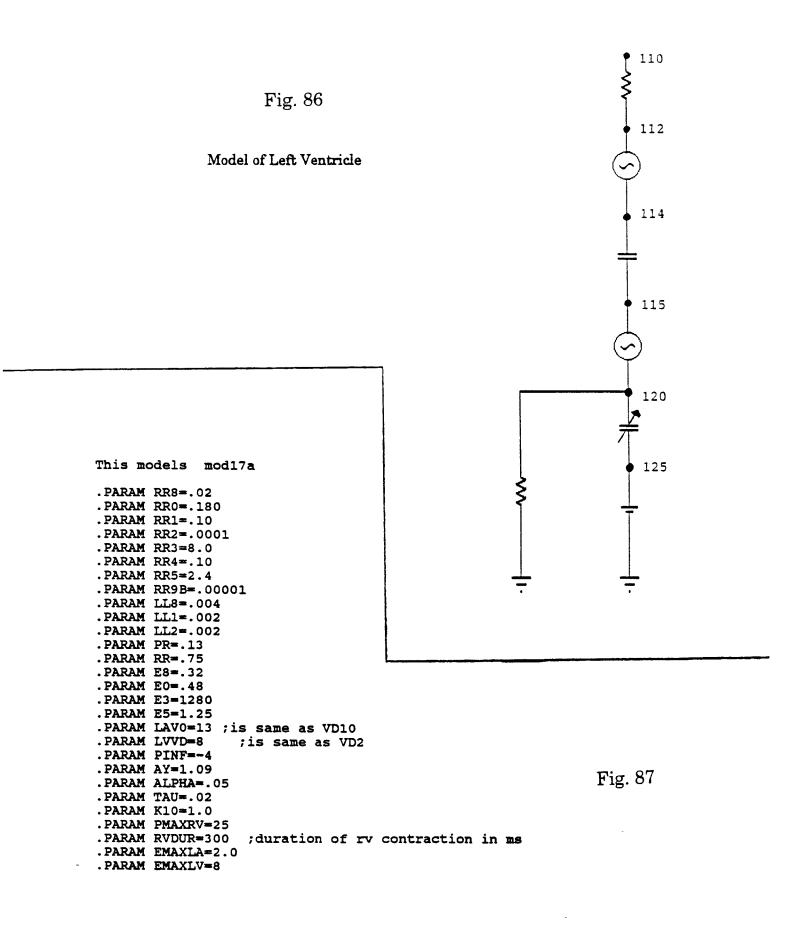
voltage across the variable capacitor, V(120, 125). Figure 84 is scaled such that all of the voltage across the variable capacitor is visible, and it is seen that on this scale the large capacitor can not even be seen. Figure 85 is scaled appropriately for the large capacitor and it can be seen how truly negligible it is in comparison to the variable capacitor. In addition, when two capacitors are in series the charge stored on each of them is the same. Therefore this very large capacitor which was added will not affect the total capacitance, will have the same charge stored on it as the variable capacitor, that is charge equal to left ventricular volume, and the value of the charge is readily accessible. This is true because Q = C * V and C is a known fixed value and V across any component is readily accessible to PSPICE. The implementation of the term $(Ae^{\alpha V})$ consisted therefore of inserting a large capacitor in series with the variable capacitor and inserting a variable voltage source with output $Ae^{\alpha(value of capacitor * voltage)}$ across capacitor) in series with it all. In order to satisfy the PSPICE requirement that all nodes have a path to ground, which the nodes between the two capacitors do not have, a large resistor was placed from between the capacitors to ground. The total left ventricle branch is shown in Figure 86.

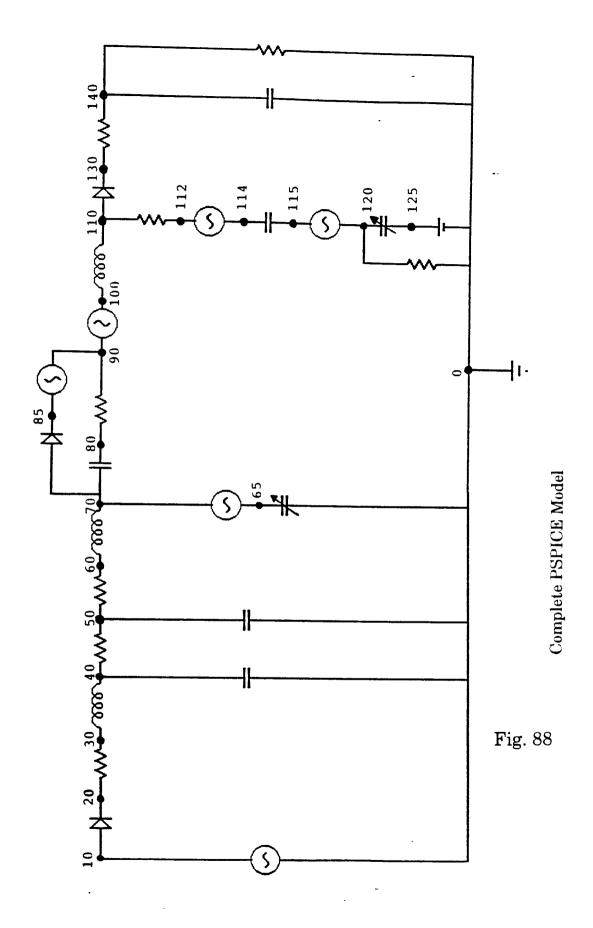
With all of the above details included in the PSPICE circuit, it was possible to run it. Upon running the program two outputs are generated. One is an output file which contains a numerical list of time versus any values requested in a ".PRINT" statement. The second output is a data file which is available to PROBE and is storable and thus available for later recall as well. When PROBE is run, it reads in this massive data file which contains all the currents and voltages at every node in the circuit for all time increments through which the program was run and asked to store. Any combination of currents and voltages can then be plotted on common axes, and the x and y scales can be manipulated to observe any part of the graphs that are of interest.

Most of the important variables in the circuit, for the most part the same ones that were available as interventions in the BASIC program, are easily changeable here as well. This is done by assigning them all "parameter" names in PSPICE and placing the entire list at the top of the program, as shown in Figure 87. To change any of the values, all that is needed is to change the value at the top of the program before running it. In addition it is not difficult to alter the various activation functions that were used throughout. This is because each pulse is only generated once (and then delayed many times) and therefore the elements of the function appear only once and are thus easily changed.

The complete circuit diagram for the PSPICE implementation of the Meisner model is shown in figure 88.

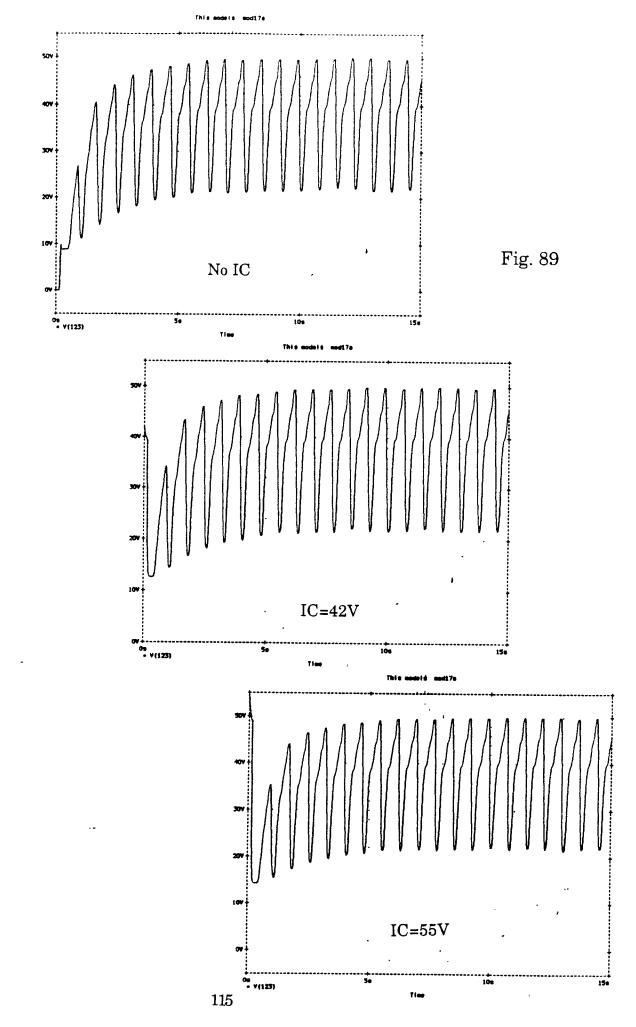
The complete PSPICE implementation is given in Appendix B.

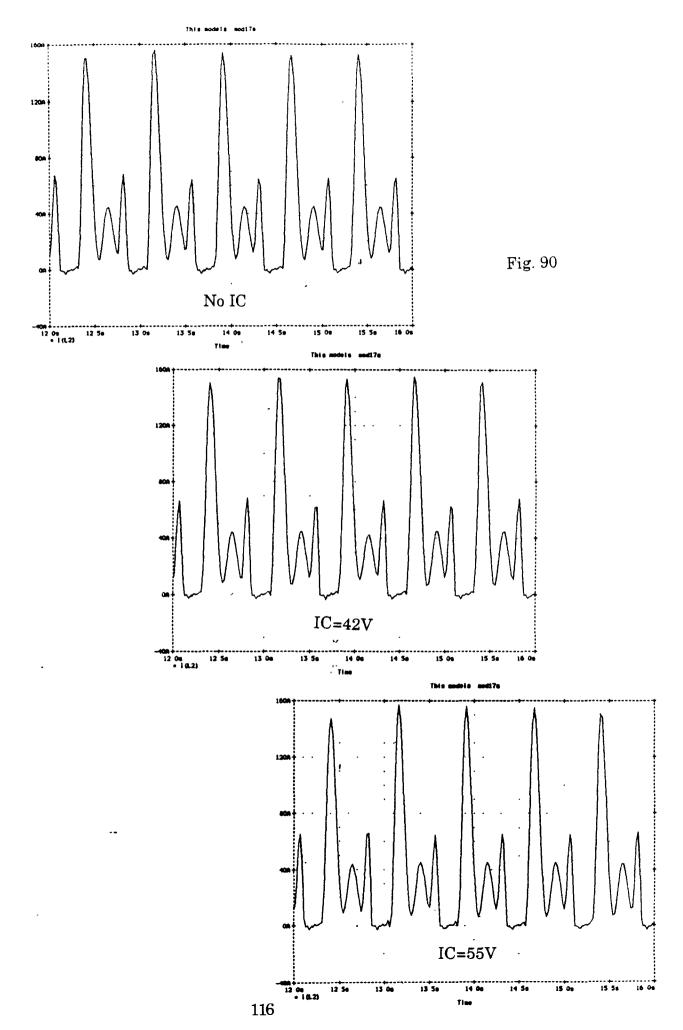




CHAPTER VII

PSPICE RESULTS: Before the PSPICE implementation could be used it must be demonstrated that it is behaving as expected. Two important aspects of this behavior are the fact that the various results are converging to a steady state and that the placing of initial conditions of current (flow) through inductors and charge (volume) on capacitors will not affect the final values of the steady state. This since assumption is not at all obvious due to the presence of non-linear elements within the model. Many such tests were run, all confirming the desired and expected result. Figure 89 illustrates the left ventricular volume waveforms over time with initial conditions of zero, 42, and 55 volts across the LV variable capacitor. As can be seen, a final steady state condition is reached in all three cases, with no difference due to the initial condition. Figure 90 shows similar results for mitral flow, again starting with the above three initial conditions on left ventricular volume.





Varying the PR Interval: In order to verify that the model was functioning properly it was decided that along with running a control run, a number of runs varying the PR interval should be run, thus repeating the Meisner experiment that had already been done three times; once *in vivo*, once by Meisner in his thesis and once earlier in this thesis in the parameter vs. parameter section. Thus, presented below are the graphs of LVP & LAP, MF, LVV and LAV for PR intervals of 1 ms., 130 ms. (control), and 240 ms., as well as graphs of the atrial V(62) and ventricular V(82) excitation functions as the PR interval is varied. For each PR interval these five graphs are shown, with the first always demonstrating the PR interval by means of the excitation functions. Figures 91-95 are for PR=1 ms., fig. 96-100 are of PR=130 ms. and figure 101-105 show a PR of 240 ms.

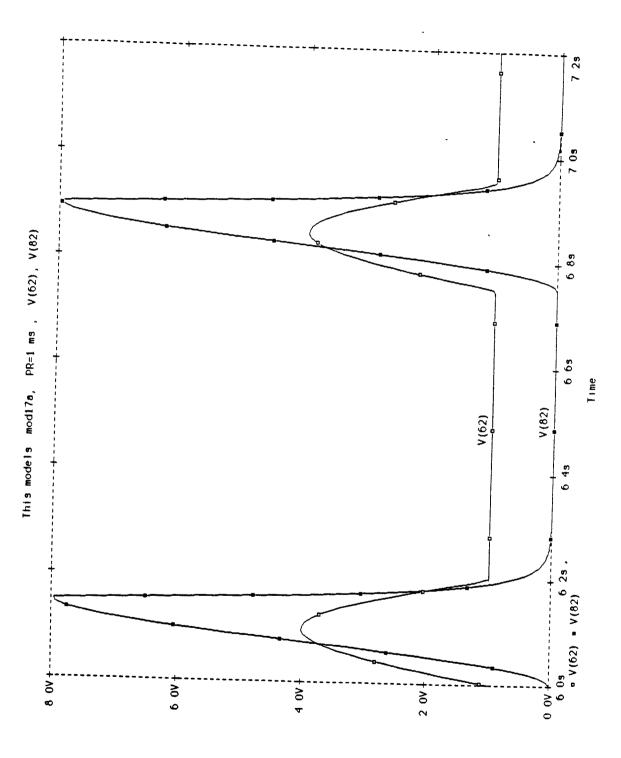


Fig. 91

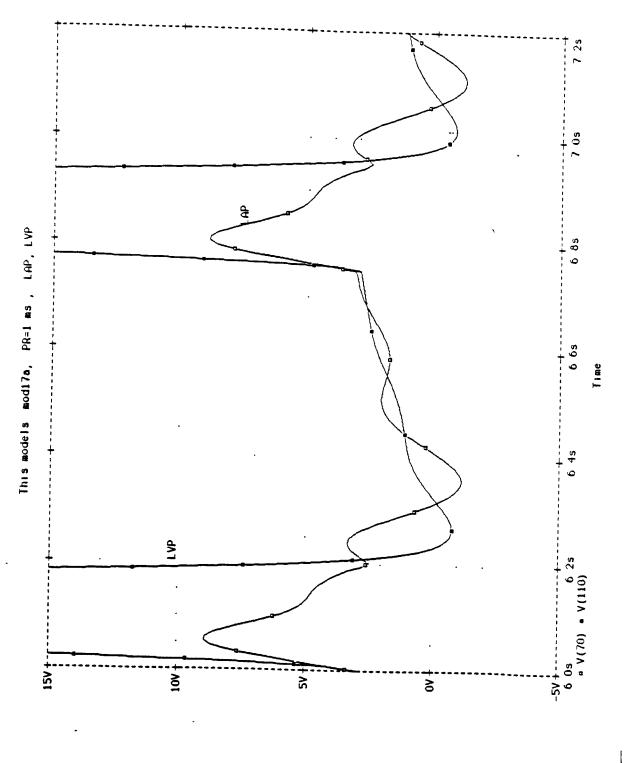


Fig. 92

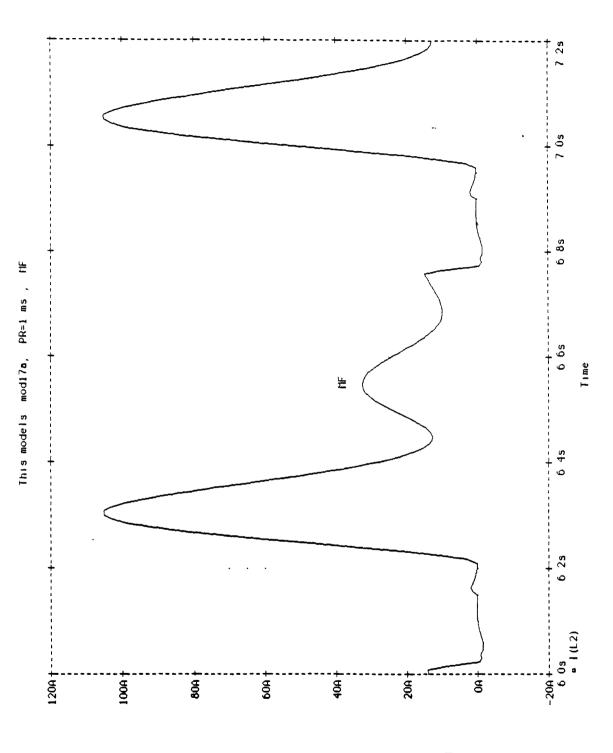


Fig. 93

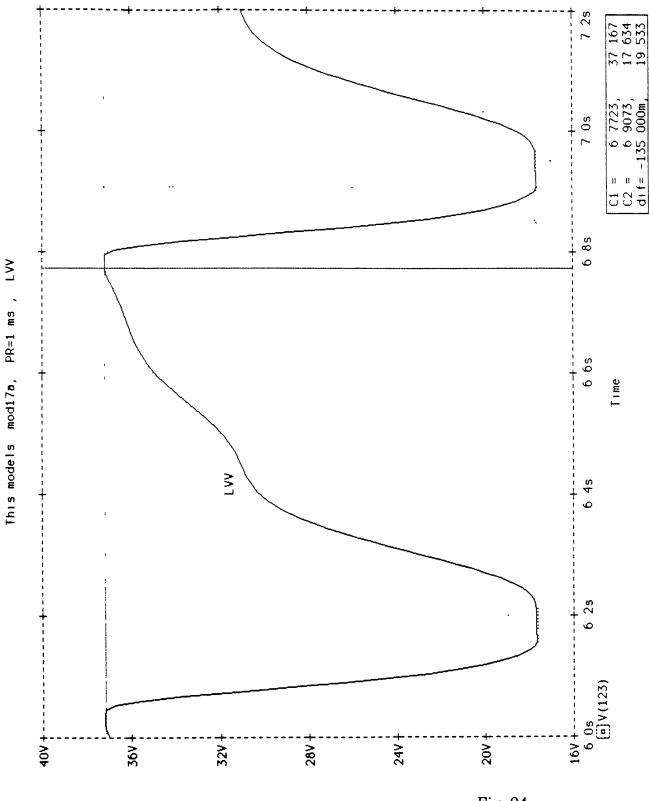


Fig. 94

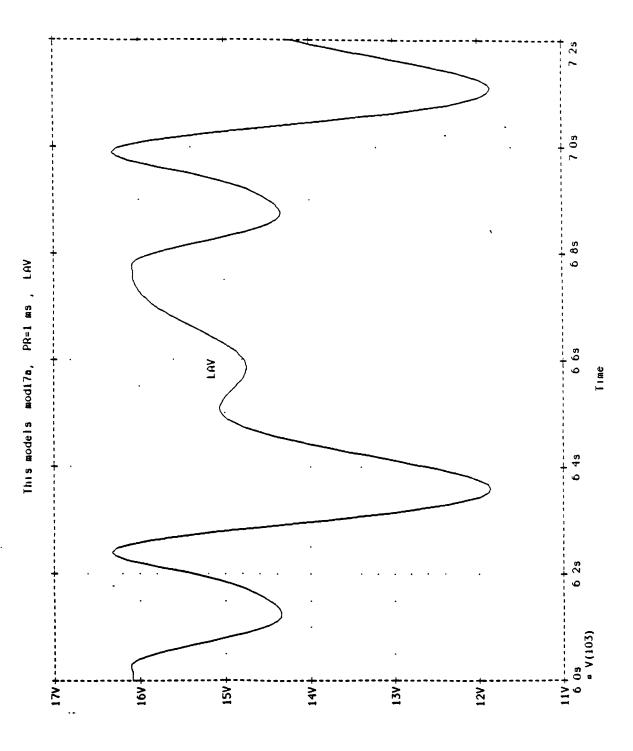


Fig. 95

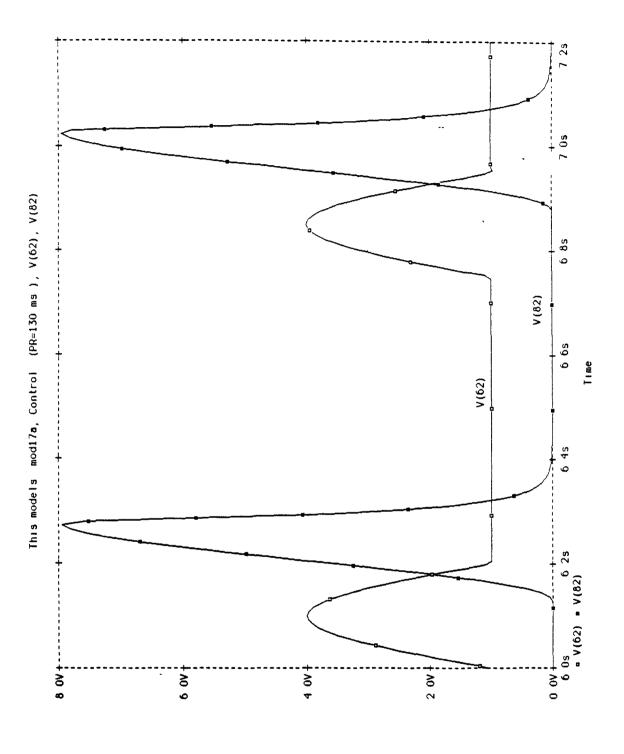


Fig. 96

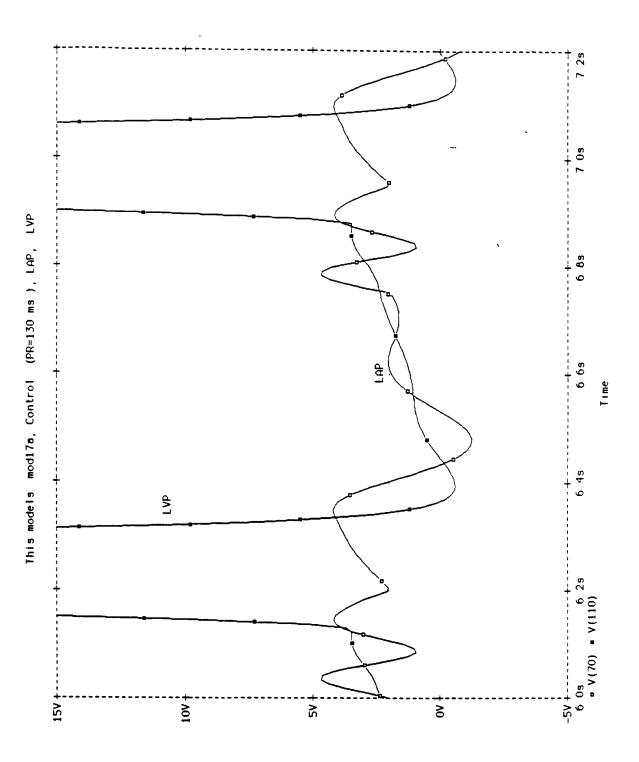


Fig. 97

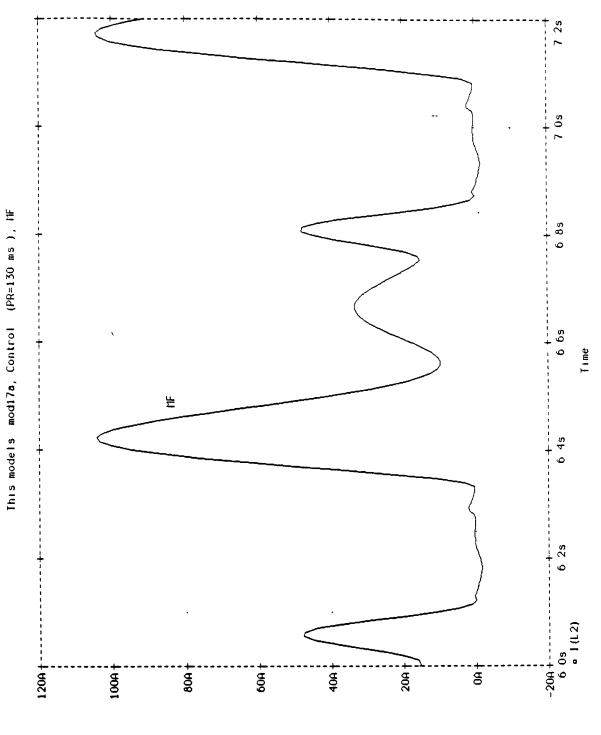
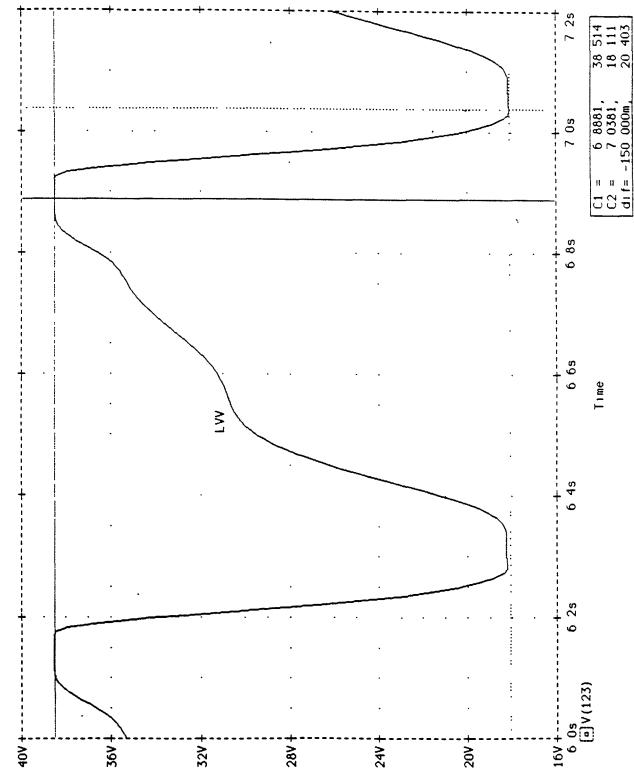


Fig. 98



This models modi7a, Control (PR=130 ms), LVV

Fig. 99

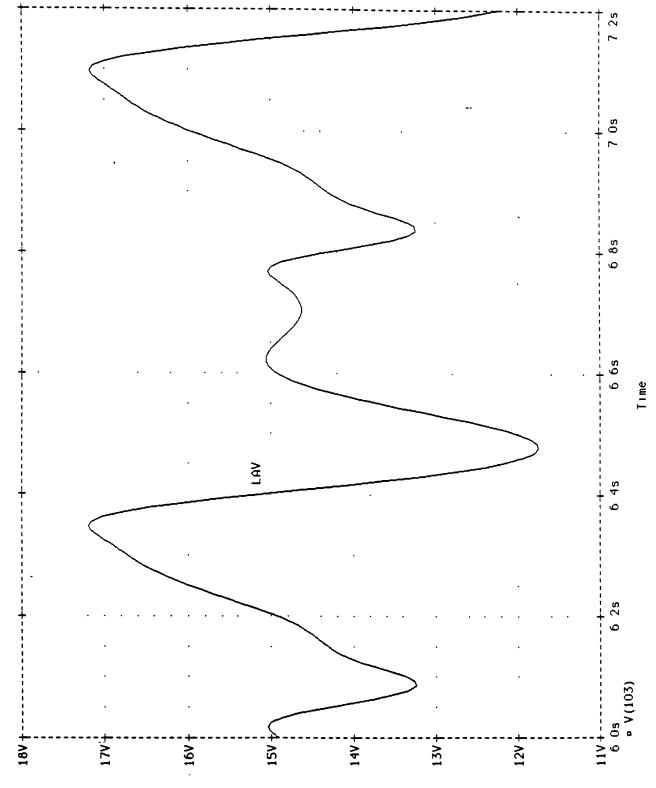
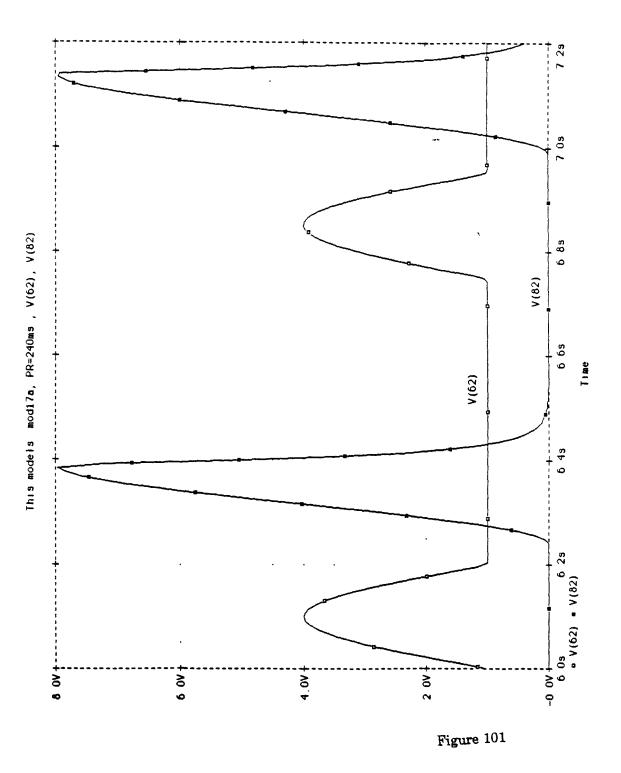




Figure 100





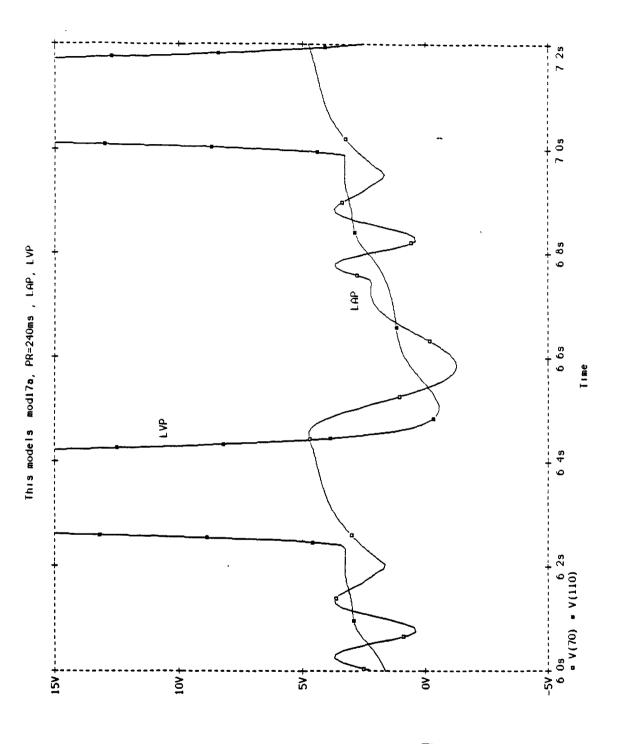


Figure 102



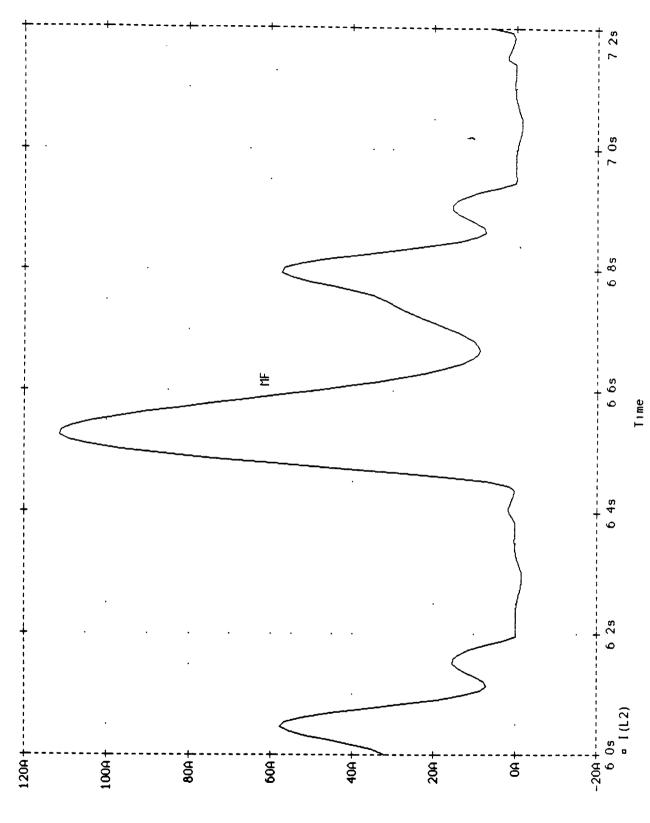


Figure 103

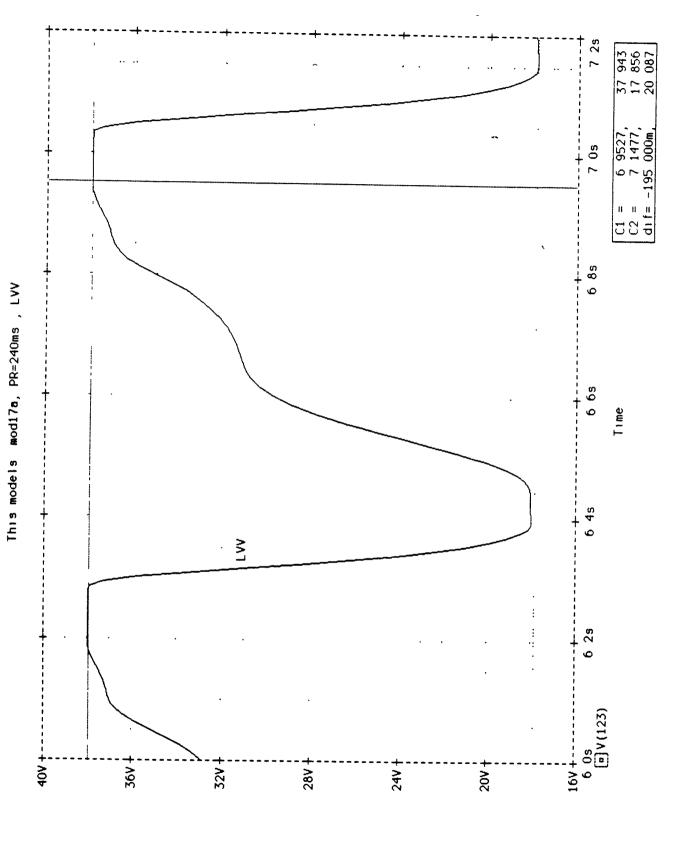
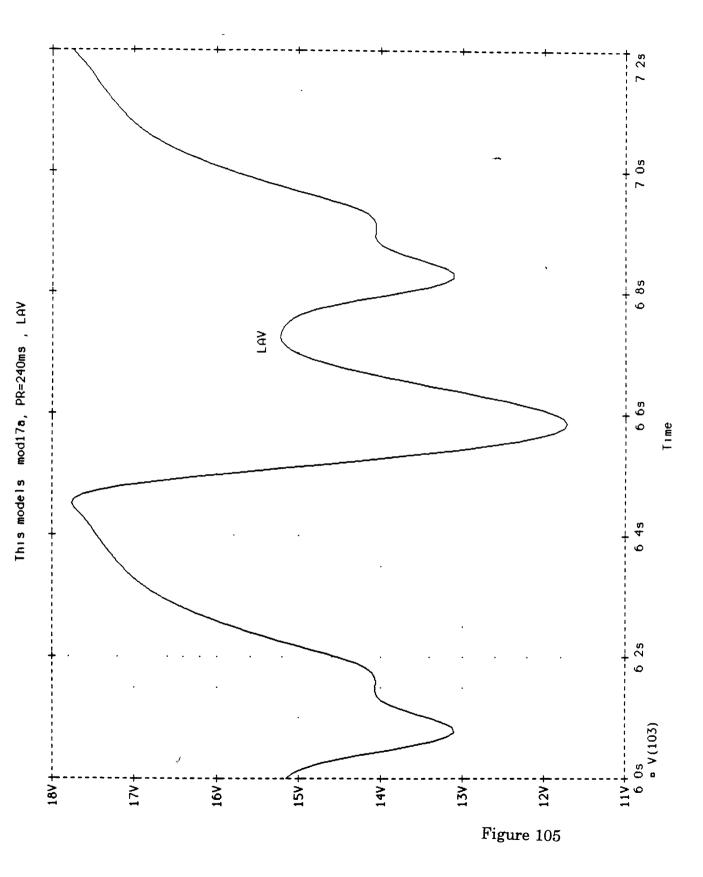
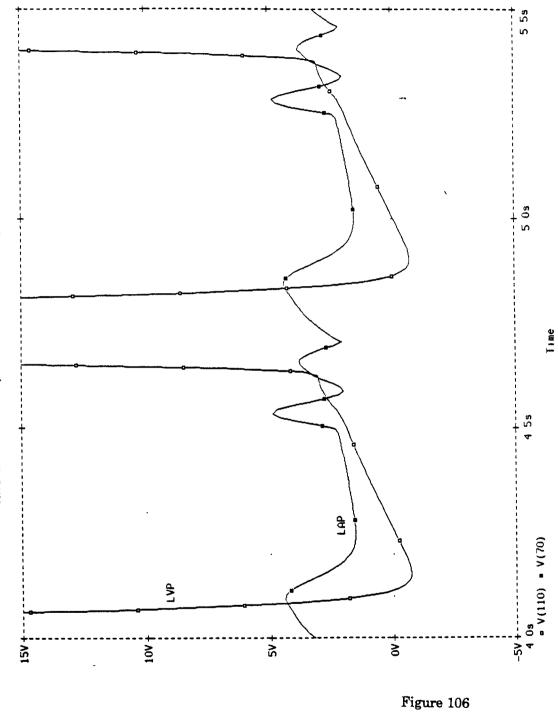


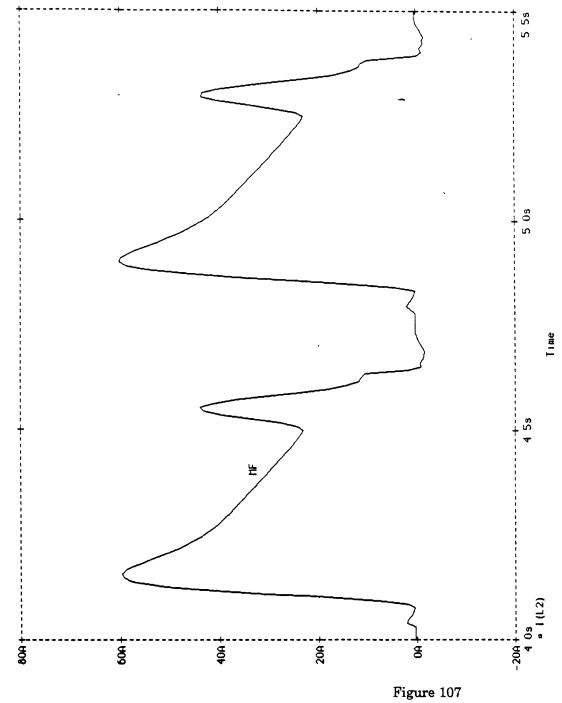
Figure 104



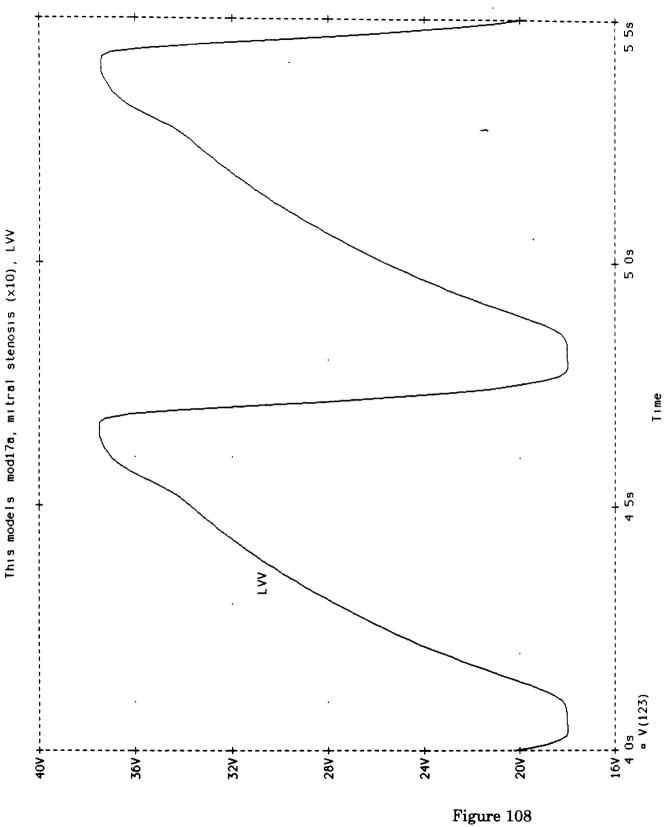
<u>Mitral Stenosis and No Atrial Contraction</u>: The following graphs present the results of two more experiments that were run on the PSPICE model. They include the graphs of LVP & LAP, MF, LVV and LAV for two non-control conditions. The first series of four graphs, figures 106-109, show a simulation of mitral stenosis which was accomplished by increasing the mitral resistance (R2) ten fold. The second group of four graphs, figures 110-113, show a simulation of no atrial contraction, which was done by setting Emax-LA equal to K10-LA (the passive elastance). In both scenarios the model behaves as would be expected, attesting to the validity of the model.

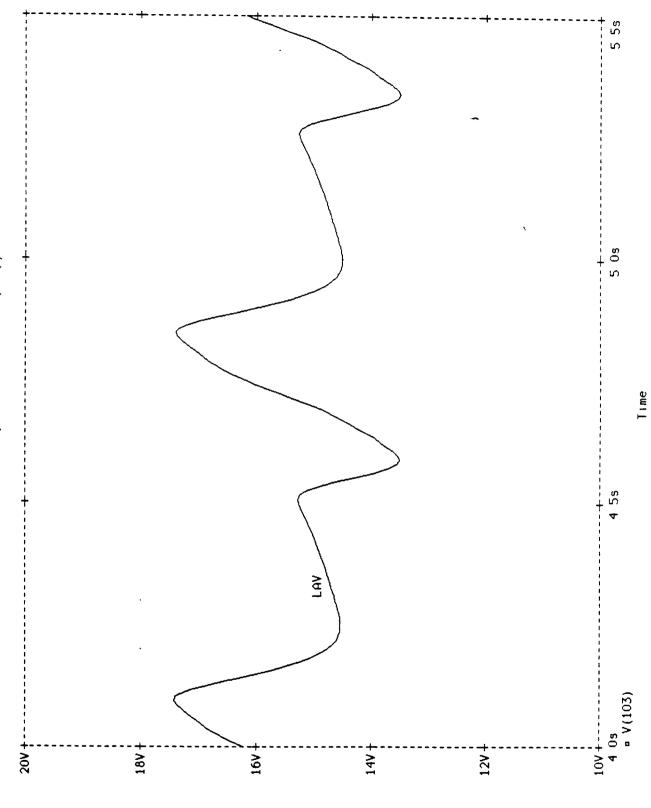


This models modila, mitral stenosis (x10), LVP,LAP $% \left({{\left({{{\bf{A}}} \right)}} \right)$



This models modi7a, witral stenosis (x10), ΠF





This models modi7a, mitral stenosis (x10), LAV

Figure 109

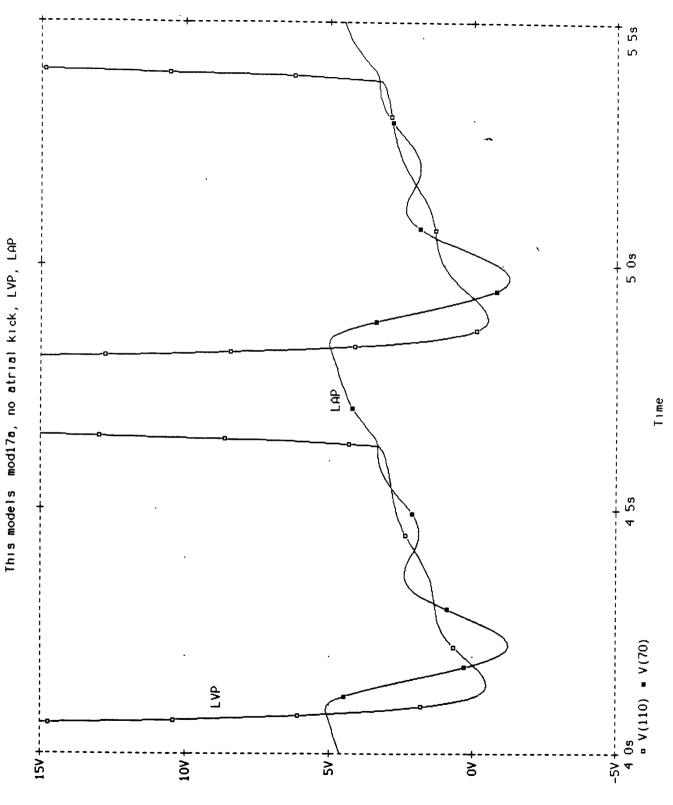
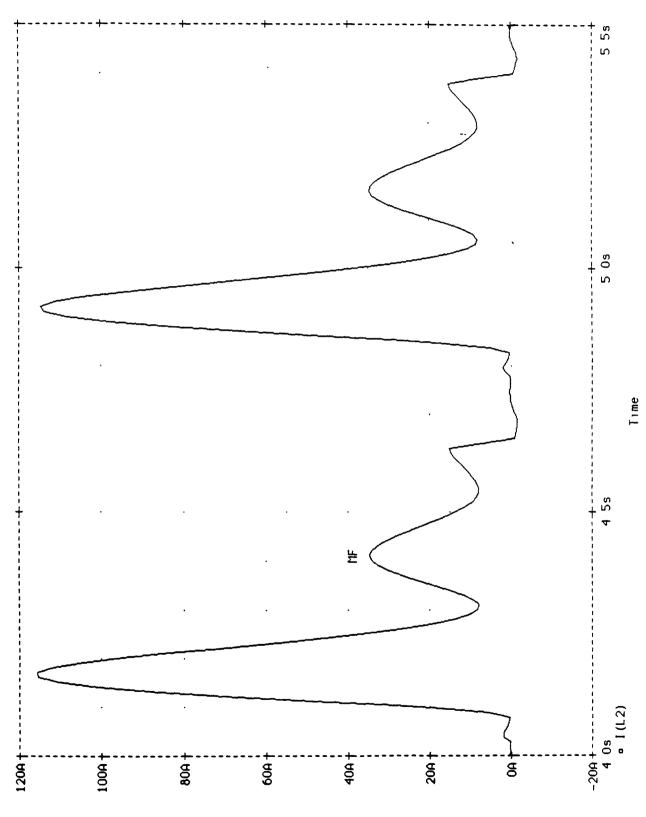


Figure 110

This models modi7a, no atrial kick, MF





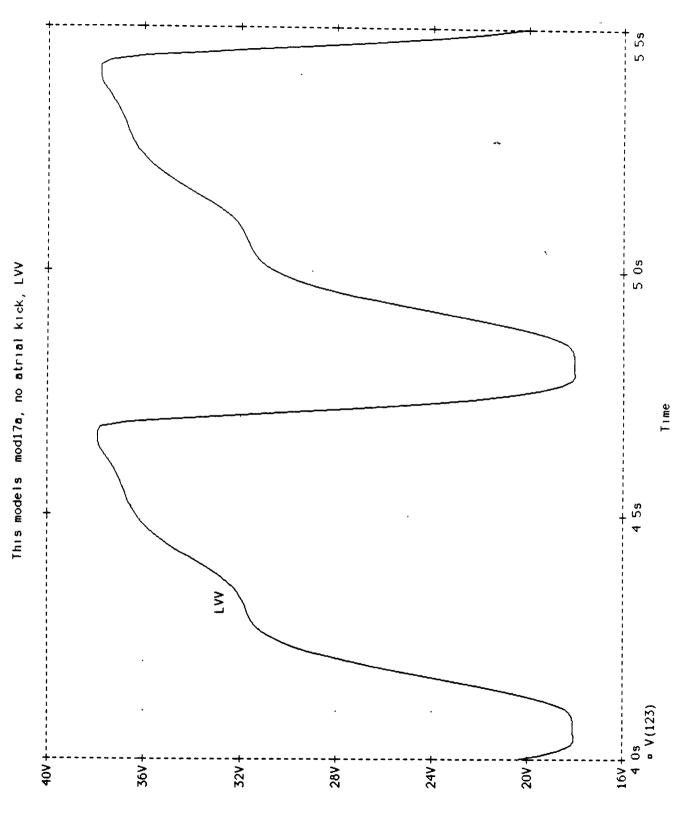


Figure 112

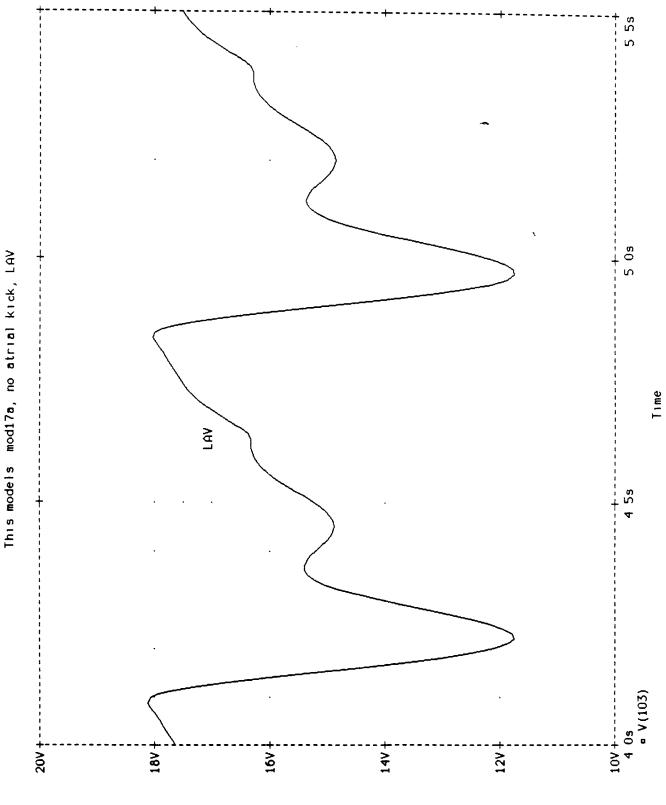


Figure 113

CHAPTER VIII

CONCLUSION:

In the introduction it was asserted that the goal of this thesis was two-fold. One of these goals included modification of the original Meisner program to be able to perform parameter vs. parameter runs in such a way that the output would be usable by a standard spreadsheet package and yield valuable graphs of how output parameters varied with input parameters. The methodology for this was presented in chapter five. Examples of graphs produced by QUATTRO PRO, the spreadsheet package chosen to do the plotting, were also provided in order to validate and demonstrate the success of the modification. Though this first goal was satisfactorily accomplished, there are some further modifications and improvements that could be done to this program. These include appending to the QuickBASIC program a section that would enable the entire set of original run parameters to be formatted so as to be stored in the same "bigfile.dat" as the the experimental output currently is, and sent to QUATTRO PRO. In addition, since QUATTRO PRO has the ability to plot three dimensional graphs, it would be useful if the QuickBASIC program could be further modified to enable the simultaneous variation of two different input parameters.

The second major goal of the thesis involved implementing the model in PSPICE. The lengthy process of this implementation was documented in chapter six and some very successful runs, attesting to the validity of the implementation, were presented in chapter seven. Now that it has been demonstrated that PSPICE can be used to implement this model, including generating the required excitation functions and using them to control variable capacitors, it leaves opens the door for further improvements. Among the more important ones is figuring out some way to get the PSPICE program to run faster. It currently can take upwards of ten minutes for one run on a 386 with a 33 MHz clock. This is extremely slow and limits the number of experiments that can be performed. A second major improvement involves the ability to more readily vary the excitation functions. Although PSPICE does provide the ability to easily vary all the input parameters that were variable in the original QuickBASIC implementation, modifying an excitation function is a lot more difficult. The imprecise nature of the excitation functions causes that to be an area in which further research should and will be done, and thus to be able to vary them more easily is important.

Finally, everything done herein utilized, except for minor discrepancies, the existing Meisner model. Within that model there is room for modification and addition. These changes could be made in either or both PSPICE and Basic implementations, though for many of these changes it may initially be easier to implement them in PSPICE. Some possible modifications include adding more detail in areas that exist but were "neglected" the first time around, such as aortic inertance, as well as additions of entire new sections such as a right heart.

APPENDIX A

Complete QuickBasic Program

```
'SDYNAMIC
DECLARE SUB PLOTPV ()
DECLARE SUB PLOTT ()
DECLARE SUB JOFF (i!, OFFSET!, J!)
DECLARE SUB printcontrol ()
DECLARE SUB printall ()
DECLARE SUB ANALYSIS ()
DECLARE SUB SETOUT ()
DECLARE SUB SETVENTION ()
DECLARE SUB INITIALIZATION ()
DECLARE SUB SETPAR ()
DECLARE SUB parnames ()
DECLARE SUB outnames ()
DECLARE SUB reiterate (reit, sv, ev, st)
DECLARE SUB setven2 (st, sv, ev, reit1, paramchg)
DECLARE SUB ITERATION (istep)
DECLARE SUB SAVEITER ()
DECLARE SUB SAVCON ()
DECLARE SUB INTERVENTION ()
DECLARE SUB activation ()
COMMON SHARED PLOT, id$, NUMPAR, it, CI, mfww, INRTOT, L8, R8, E8, R0, E0, R1, L
COMMON SHARED MV, VF, avf, AF, v0, V8, V1, V2, P3, P5, P1, P2, P3ST, v0ST, V8ST,
COMMON SHARED RVP, paf, F80, P0, P8, MVST, sv, ev, st, reit, reit1, outprt, part
COMMON SHARED paramchg, cj
DIM SHARED K1(1000), K2(1000), VD1(1000), q11(1000)
DIM SHARED parvpar(40, 50), nmq$(50)
DIM SHARED nm$(50), prm(50), CHNGD(50), INR(50), inrval(50), nmp$(50), NMI$(50),
DIM SHARED YLAV(1000, 1 TO 2), YLAP(1000, 1 TO 2), Ylvv(1000, 1 TO 2), YLVP(1000
DIM SHARED YPVF(1000, 1 TO 2), YF80(1000, 1 TO 2), YPAF(1000, 1 TO 2), YP0(1000,
DIM SHARED LVEDV(2), LAPMX(2), LAPMEN(2), LAPMED(2), LAPMES(2), LAPRE(2), LALVMD
DIM SHARED pco(2), FV(2), FVA(2), FVA1(2), FVPCO(2), FVPMF(2), TMFA(2), TMFA1(2)
******
                               'LEFT HEART MODELING PROGRAM FOR SIMULATION OF PHYSIOLOGIC EXPERIMENTS.
'THIS REPRESENTS A MODIFICATION OF PROGRAMS: AMOD16 AND BMOD16, BOTH
'COPYRIGHT 1987, J.S. MEISNER.
'MODIFICATIONS INCLUDE: * VARIABLE TIME CONSTANT OF LV RELAXATION
                      * LOWER LIMIT OF HEART RATE = 40
                      * ON-SCREEN PLOT OF VARIABLES VERSUS TIME
                      * ABILITY TO CHANGE HR OR PR AS INTERVENTIONS
                      * ABILITY TO PLOT RESULTS ON HP LASER PRINTER
                      * ABILITY TO DO PARAMETER VS PARAMETER RUNS
CALL parnames
CALL outnames
'Master do-while loop to rerun program
DO
'INITIAL CONDITIONS
```

```
CALL INITIALIZATION
'SET PARAMETERS
CALL SETPAR
'option to vary avariable over a range
CALL reiterate(reit, sv, ev, st)
'SET INTERVENTIONS (IF ANY)
IF reit <> 1 THEN
        CALL SETVENTION
        'SET OUTPUT OPTIONS
        CALL SETOUT
END IF
IF reit = 1 THEN
       paramchg = sv
       FOR drt = 1 TO 1500: ql1(drt) = 0: NEXT
       CLS
       PRINT "running the control before the reiterations"
END IF
'LA/LV ACTIVATION FUNCTION SETUP
CALL activation
'CONTROL MODEL RUN FOR ccycle CYCLES/STORE ccycle INTO ARRAY 1 (CONTROL)
CI = 1
mfww = 0
IF OUTSCR = 1 THEN
        SCREEN 8
        COLOR 8
        LOCATE 1, 25: PRINT "CONTROL Cycle # "
        LINE (30, 0)-(30, 200): LINE (30, 179)-(639, 179): LINE (30, 100)-(639,
        LINE (0, 25)-(29, 25): LINE (0, 129)-(29, 129): PSET (0, 32): PRINT "100
END IF
FOR it = 1 TO ccycles
COUNTER = 3
        IF OUTSCR = 1 THEN LOCATE 1, 43: PRINT it
        FOR istep = 1 TO RR
                CALL ITERATION (istep)
                IF COUNTER < 3 THEN
                         COUNTER = COUNTER + 1
                ELSEIF it = ccycles THEN
                         COUNTER = 0
                         y = INT(609 / 1500 * istep)
                         X1 = 100 - INT(avf * .75)
                         IF X1 > 199 THEN X1 = 199
                         IF X1 < 0 THEN X1 = 0
                         X2 = 179 - INT(P1 * 5)
                         IF X2 > 199 THEN X2 = 199
                         IF X_2 < 104 THEN X_2 = 104
                         X3 = 179 - INT(P2 * 5)
                         IF X3 > 199 THEN X3 = 199
                         IF X3 < 104 THEN X3 = 104
                         IF OUTSCR = 1 THEN
                                 PSET (y + 30, X1), 9
                                 PSET (y + 30, X2), 9
PSET (y + 30, X3), 9
                         END IF
```

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146
```

```
END IF
        NEXT istep
NEXT it
'CONTROL RUN NO-ATRIAL-CONTRACTION CYCLE/STORE MITRAL FLOW RESULT INTO ARRAY 1
'FIRST, RESET ATRIAL ACTIVATION FUNCTIONS K1, VD1
'NOTE: FUNCTION IS RESET ONLY AFTER POSSIBLE SECOND PORTION OF AC
IF PR > -150 AND PR < 50 THEN
        FOR i = (51 - PR) TO RR
                 K1(i) = K10
                 VD1(i) = VD10
        NEXT i
        ELSE
        FOR i = 1 TO RR
                 K1(i) = K10
                 VD1(i) = VD10
        NEXT i
END IF
CI = 1
mfww = 1
        FOR istep = 1 TO RR
                 CALL ITERATION(istep)
        NEXT istep
'RESET PRE-NO-ATRIAL-CONTRACTION CYCLE 10
        V1 = YLAV(1, 1)
        P1 = YLAP(1, 1)
        V2 = ylvv(1, 1)

P2 = YLVP(1, 1)
        AF = YAF(1, 1)
        avf = YMF(1, 1)
        VF = YPVF(1, 1)
        F80 = YF80(1, 1)
        paf = YPAF(1, 1)
        PO = YPO(1, 1)

P8 = YP8(1, 1)
        P5 = YP5(1, 1)
        P3 = P3ST
        v0 = v0ST
        V8 = V8ST
        RVP = rvpST
        MV = MVST
'ANALYSIS OF CONTROL
CI = 1
CALL ANALYSIS
IF reit = 1 THEN CALL SAVCON
'CHANGE INTERVENTIONAL PARAMETERS AND RERUN LA/LV ACTIVATION FUNCTION
cj = 0
DŐ
IF reit = 1 THEN
        CALL setven2(sv, st, ev, reit1, paramchg)
END IF
```

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and the second se
```

```
IF INRTOT > 0 THEN
        CALL INTERVENTION
        CALL activation
'INTERVENTION MODEL RUN FOR icycles CYCLES
CI = 2
mfww = 0
IF OUTSCR = 1 THEN
        COLOR 8
        LOCATE 1, 25: PRINT "Intervention Cycle #
        LINE (30, 0)-(30, 200): LINE (30, 179)-(639, 179): LINE (30, 100)-(639,
END IF
FOR it = 1 TO icycles
        COUNTER = 3
        IF OUTSCR = 1 THEN LOCATE 1, 56: PRINT it
        FOR istep = 1 TO RR
                CALL ITERATION (istep)
                IF COUNTER < 3 THEN
                        COUNTER = COUNTER + 1
                ELSE
                         COUNTER = 0
                         y = INT(609 / 1500 * istep)
                         X1 = 100 - INT(avf * .75)
                         IF X1 > 199 THEN X1 = 199
                         IF X1 < 0 THEN X1 = 0
                         X2 = 179 - INT(P1 * 5)
                         IF X2 > 199 THEN X2 = 199
                         IF X_2 < 104 THEN X_2 = 104
                         X3 = 179 - INT(P2 * 5)
                         IF X3 > 199 THEN X3 = 199
                         IF X3 < 104 THEN X3 = 104
                         IF OUTSCR = 1 THEN
                                 PSET (y + 30, X1), 13
                                 PSET (y + 30, X2), 13
                                 PSET (y + 30, X3), 13
                         END IF
                END IF
        NEXT istep
NEXT it
'RESET INTERVENTION PRE-NO-ATRIAL-CONTRACTION CYCLE 10
        V1 = YLAV(1, 2)
        P1 = YLAP(1, 2)
        V2 = ylvv(1, 2)
        P2 = \tilde{Y}LVP(1, 2)
        AF = YAF(1, 2)
        avf = YMF(1, 2)
        VF = YPVF(1, 2)
        F80 = YF80(1, 2)
        paf = YPAF(1, 2)
                           --
        PO = YPO(1, 2)
        P8 = YP8(1, 2)
        P5 = YP5(1, 2)
        P3 = P3ST
        v0 = v0ST
        V8 = V8ST
        RVP = rvpST
        MV = MVST
```

'RUN NO-ATRIAL-CONTRACTION CYCLE/STORE MITRAL FLOW RESULT INTO ARRAY 1

```
'FIRST, RESET ATRIAL ACTIVATION FUNCTIONS K1, VD1
'NOTE: FUNCTION IS RESET ONLY AFTER POSSIBLE SECOND PORTION OF AC
IF PR > -150 AND PR < 50 THEN
        FOR i = (51 - PR) TO RR
K1(i) = K10
                 VD1(i) = VD10
        NEXT i
        ELSE
        FOR i = 1 TO RR
                Kl(i) = Kl0
                VD1(i) = VD10
        NEXT i
END IF
CI = 2
mfww = 1
        FOR istep = 1 TO RR
                CALL ITERATION (istep)
        NEXT istep
END IF
'ANALYSIS OF INTERVENTION (IF DONE)
IF INRTOT > 0 THEN
        CI = 2
        CALL ANALYSIS
END IF
'PRINTER ANALYSIS OF CONTROL/INTERVENTION, IF REQUESTED
IF outprt = 1 THEN
        IF INRTOT < 1 THEN
                CALL printcontrol
        ELSE
                CALL printall
        END IF
END IF
'PLOTTER OUTPUT OF CONTROL/INTERVENTION VS TIME, IF REQUESTED
IF PLTVAR = 1 OR PLTVAR = 2 THEN
        PLOT = 1
        CI = 1
        CALL PLOTT
        IF INRTOT > 0 THEN
                PLOT = 2
                 CI = 2
                 CALL PLOTT
        END IF
ELSEIF PLTVAR = 3 OR PLTVAR = 4 THEN
'PV LOOP ROUTINE
        CI = 1
        CALL PLOTPV
        IF INRTOT > 0 THEN
                 IF PLTVAR = 4 THEN
                         LOCATE 23, 1: PRINT ;
LOCATE 23, 1: INPUT "Change plotter paper now and press
                END IF
                         CI = 2
                         CALL PLOTPV
        END IF
END IF
```

```
IF reit = 1 THEN
       cj = cj + 1
       CALL SAVEITER
       IF sv <= ev AND st > 0 THEN
                'PRINT "sv<=ev"; sv, ev;
                paramchg = paramchg + st
                IF paramchg > ev THEN reit = 0
                'PRINT paramchg, reit
        ELSEIF sv > ev AND st < 0 THEN
                'PRINT "sv>ev"; sv, ev;
                paramchg = paramchg + st
                IF paramchg < ev THEN reit = 0
                'PRINT paramchg, reit
        ELSE
                PRINT "will not end, step is wrong sign"
                EXIT DO
       END IF
END IF
LOOP WHILE reit = 1
IF cj > 0 THEN
        CLS
        QQ\$ = CHR\$(34)
        'QQ$ is now a double quote
        OPEN "bigfile.dat" FOR OUTPUT AS #1
        PRINT "this run varied "; nm$(reit1)
        PRINT #1, QQ$; "this run varied"; QQ$; QQ$; nm$(reit1); QQ$; QQ$; "from"
        PRINT #1, QQ$; "output"; QQ$; QQ$; "control"; QQ$
        PRINT #1, QQ$; ""; QQ$;
        FOR y = 0 TO 35
        FOR \dot{x} = 0 TO cj
                PRINT parvpar(y, x);
                PRINT #1, USING "###.######"; parvpar(y, x);
                PRINT #1, ",";
                IF x = cj THEN WRITE #1, ""
        NEXT
        PRINT
        PRINT #1, QQ$; nmq$(y + 1); QQ$;
        NEXT
        CLOSE #1
END IF
LOCATE 23, 1
DO
        INPUT "When you are done, enter 1 to run program again, or 0 for DOS (0)
LOOP WHILE atorerun < 0 OR atorerun > 1
LOOP WHILE atorerun = 1
END
REM $STATIC
SUB activation
'DEVELOPMENT OF NEW ACTIVATION FUNCTIONS - WITH EXPONENTIAL LV DEACT.
pi = 3.141593
IF PR < -150 THEN PR = RR + PR
'Generate LA elastance and dead volume
IF PR <= 50 THEN
                FOR i = 1 TO (51 - PR)
                        x = (149 + PR + i) * 2 * pi / 200 + 3 * pi / 2
                        Kl(i) = K10 + (SIN(x) + 1) * (EMAXLA - K10) / 2
```

```
x = (149 + PR + i) * pi / 200
                        VD1(i) = VD10 - SIN(x) + 2
                NEXT i
                FOR i = (51 - PR) TO (RR - 150 - PR)
                        K1(i) = K10
                        VD1(i) = VD10
                NEXT i
                FOR i = (RR - 149 - PR) TO RR
                         x = (i - (RR - 149 - PR)) + 2 + pi / 200 + 3 + pi / 2
                         K1(i) = K10 + (SIN(x) + 1) * (EMAXLA - K10) / 2
                         x = (i - (RR - 149 - PR)) * pi / 200
                         VD1(i) = VD10 - SIN(x) * 2
                NEXT i
       ELSE
                FOR i = 1 TO (RR - 150 - PR)
                         K1(i) = K10
                         VD1(i) = VD10
                NEXT i
                FOR i = (RR - 150 - PR) TO (RR - 150 - PR + 200)
                         \dot{x} = (i - (RR - 149 - PR)) + 2 + pi / 200 + 3 + pi / 2
                         K1(i) = K10 + (SIN(x) + 1) * (EMAXLA - K10) / 2
                         x = (i - (RR - 149 - PR)) * pi / 200
                         VD1(i) = VD10 - SIN(x) * 2
                NEXT i
                FOR i = (RR - 149 - PR + 200) TO RR
                         K1(i) = K10
                         VD1(i) = VD10
                NEXT i
        END IF
'Generate LV elastance
        FOR i = 1 TO (RR - 150)
                K2(i) = emaxlv * EXP((-1 * (i - 1)) / tau)
        NEXT i
        FOR i = (RR - 149) TO RR
                x = 3 * pi / 2 + (i - (RR - 149)) * 2 * pi / 300
                K2(i) = emaxlv / 2 * (SIN(x) + 1)
        NEXT i
'Generate pulmonary flow function if Cardiac Output (Cout) Specified
IF cout > 0 THEN
        hr = 60000 / RR
        FOR i = 1 TO 150
                x = pi / 2 + (i / 150 * pi / 2)

q11(i) = SIN(x) * pi / 2 / .3 * cout / hr
                NEXT i
        FOR i = 151 TO RR - 151
                qll(i) = 0
        NEXT i
        FOR i = (RR - 150) TO RR
                x = (i - (RR - 150)) / 150 * pi / 2
                 qll(i) = SIN(x) * pi / 2 / .3 * cout / hr
        NEXT i
END IF
END SUB
SUB ANALYSIS
```

. . . .

```
'Subroutine for Analysis of control or intervention (CI=1/2)
i = 0
DO
         i = i + 1
LOOP WHILE YLAP(i, CI) < YLVP(i, CI) AND i < RR
IF i >= RR THEN BEEP: PRINT "ERROR 101": STOP
pco(CI) = YLAP(i, CI)
TX(CI) = i
TX = i
LAPMEN = 0
FOR i = 1 TO RR
         LAPMEN = LAPMEN + YLAP(i, CI)
NEXT i
LAPMEN(CI) = LAPMEN / RR
LAPMED = 0
LALVMD = 0
FOR i = TX TO RR - 150
        LAPMED = LAPMED + YLAP(i, CI)
LALVMD = LALVMD + YLAP(i, CI) - YLVP(i, CI)
NEXT i
LAPMED(CI) = LAPMED / (RR - 150 - TX + 1)
LALVMD(CI) = LALVMD / (RR - 150 - TX + 1)
LAPMES = 0
FOR i = 1 TO TX
         LAPMES = LAPMES + YLAP(i, CI)
NEXT i
FOR i = RR - 150 TO RR
         LAPMES = LAPMES + YLAP(i, CI)
NEXT i
LAPMES(CI) = LAPMES / (TX + 150)
lvpmn = 100
i = TX
DO
         i = i + 1
LOOP WHILE YLVP(i + 1, CI) < YLVP(i, CI) AND i < RR
IF i >= RR THEN BEEP: PRINT "Error 102": STOP
lvpmn(CI) = YLVP(i, CI)
TLVPMN(CI) = i - TX
i = TX
DO
         i = i + 1
LOOP WHILE (YLAP(i + 1, CI) - YLVP(i + 1, CI)) > (YLAP(i, CI) - YLVP(i, CI)) AND
IF i >= RR THEN BEEP: PRINT "Error 103": STOP
LALVMX(CI) = YLAP(i, CI) - YLVP(i, CI)
TLALVMX(CI) = i - TX
i = TX + 10
DO
         i = i + 1
LOOP WHILE YMF(i + 1, CI) > YMF(i, CI) AND i < RR
IF i >= RR THEN BEEP: PRINT "Error 104": STOP
PMF(CI) = YMF(i, CI)
TPMF(CI) = i - TX
LVEDP(CI) = YLVP(RR - 150, CI)
LVEDV(CI) = ylvv(RR - 150, CI)
FVPMF(CI) = ylvv(TPMF(CI) + TX, CI) - ylvv(TX, CI)
FVA1(CI) = yIVV(RR - 150 - PR, CI) - yIVV(TX, CI)
MFA1(CI) = YMF(RR - 150 - PR, CI)
```

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i = RR - 150 - PR + 25
DO
        i = i + 1
LOOP WHILE i < RR AND (YMF(i + 1, CI) > YMF(i, CI) OR YMF(i, CI) < .2 * PMF(CI))
IF i >= RR THEN
        MFA(CI) = 1
        TMFA(CI) = 1
        TMFA(CI) = 1
        LPRINT "UNABLE TO FIND MF-A"
ELSE
        MFA(CI) = YMF(i, CI)
        TMFA(CI) = i - TX
        TMFA = \hat{1} - TX
END IF
i = RR - 150 - PR + 25
DO
        i = i + 1
LOOP WHILE YMF(i, CI) > 0 AND i < RR
IF i >= RR THEN
        TMFEND = RR - 150 - TX
        TMFEND(CI) = TMFEND
        BEEP: LPRINT "Unable to find MFEND"
ELSE
        TMFEND = i - TX
        TMFEND(CI) = i - TX
END IF
MFASUB(CI) = .01
MFASUB1(CI) = .01
FOR i = (RR - 150 - PR) TO (TMFEND + TX - 1)
        MFASUB(CI) = MFASUB(CI) + .0005 * (ymfa(i, CI) + ymfa(i + 1, CI))
NEXT i
FOR i = (TMFEND + TX) TO (RR - 150)
        MFASUB1(CI) = MFASUB1(CI) + .0005 * (ymfa(i, CI) + ymfa(i + 1, CI))
NEXT i
FVA(CI) = ylvv(TMFEND + TX, CI) - ylvv(RR - 150 - PR, CI) - MFASUB(CI)
TMFA1(CI) = RR - 150 - PR - TX
DFPP(CI) = RR - 150 - TX
i = RR - 120
DO
        i = i + 1
LOOP WHILE YLVP(i + 1, CI) > YLVP(i, CI) AND i < RR
IF i >= RR THEN
        PLVP(CI) = 1
        LPRINT "Unable to find PLVP"
ELSE
        PLVP(CI) = YLVP(i; CI)
END IF
LAPRE(CI) = YLAV(RR - 150 - PR, CI)
i = RR - 150 - PR
DO
        i = i + 1
LOOP WHILE YLAP(i + 1, CI) > YLAP(i, CI) AND i < RR
IF i >= RR THEN
        TLAPMX(CI) = 1
```

```
LAPMX(CI) = 1
        LPRINT "Unable to find LAP-A"
ELSE
        LAPMX(CI) = YLAP(i, CI)
        TLAPMX(CI) = 1 - TX
END IF
FV(CI) = ylvv(TMFEND + TX, CI) - ylvv(TX, CI)
LVPAMN(CI) = YLVP(RR - 150 - PR, CI)
END SUB
SUB INITIALIZATION
MV = 1
VF = 10
avf = 0
AF = 10
v0 = 30
V8 = 20
V1 = 20
V2 = 40
P3 = .001
P5 = 60
paf = 10
F80 = 10
P0 = 10
P1 = 10
P2 = 50
P8 = 11
END SUB
SUB INTERVENTION
FOR i = 1 TO NUMPAR
         IF INR(i) = 1 THEN
                  SELECT CASE i
                  CASE 1
                  L8 = inrval(i)
                  CASE 2
                  R8 = inrval(i)
                  CASE 3
                  E8 = inrval(i)
                  CASE 4
                  R0 = inrval(i)
                  CASE 5
                  E0 = inrval(i)
                  CASE 6
                  Rl = inrval(i)
                  CASE 7
                  L1 = inrval(i)
                  CASE 8
                  R2 = inrval(i)
                  CASE 9
                  L2 = inrval(i)
                  CASE 10
                  E3 = inrval(i)
                  CASE 11
                  R3 = inrval(i)
                  CASE 12
                  R4 = inrval(i)
                  CASE 13
                  R5 = inrval(i)
```

```
CASE 14
                E5 = inrval(i)
                CASE 15
                K10 = inrval(i)
                CASE 16
                VD10 = inrval(i)
                CASE 17
                VD2 = inrval(i)
                CASE 18
                PINF = inrval(i)
                CASE 19
                R9 = inrval(i)
                CASE 20
                ALPHA = inrval(i)
                CASE 21
                ALV = inrval(i)
                CASE 22
                EMAXLA = inrval(i)
                CASE 23
                RMR = inrval(i)
                CASE 24
                LMR = inrval(i)
                CASE 25
                DMR = inrval(i)
                CASE 26
                ARR = inrval(i)
                CASE 27
                MVCLOSE = inrval(i)
                CASE 28
                PR = inrval(i)
                CASE 29
                RR = inrval(i)
                CASE 30
                emaxlv = inrval(i)
                CASE 31
                pmaxrv = inrval(i)
                CASE 32
                tau = inrval(i)
                CASE 33
               REM change in control cycles not allowed
                CASE 34
                REM change in intervention cycles not alllowed
                CASE 35
                cout = inrval(i)
                END SELECT
        END IF
NEXT i
END SUB
SUB ITERATION (istep)
'Differentiation/Iteration Subroutine
IF paf > 0 THEN
        DPAFDT = (RVP - P8 - paf * R8) / L8
ELSE
        DPAFDT = (RVP - P8) / L8
        IF DPAFDT < 0 THEN DPAFDT = 0
END IF
DV8DT = paf - F80
```

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DVODT = F80 - VF
DVFDT = (PO - P1 - VF * R1) / L1
DV1DT = VF - avf
IF MV = 1 AND avf < 0 THEN MV = 0
IF MV = 0 AND P3 >= 0 AND avf > 0 THEN MV = 1
IF RMR > 0 AND MV = 0 THEN
        DAVFDT = (P1 - P2 + avf * avf * (RMR - DMR * V2 / 50 * RMR)) / LMR
        DP3DT = 0
        P3 = .001
ELSEIF MV = 1 THEN
        DAVFDT = (P1 - P2 - avf * avf * R2) / L2
        DP3DT = 0: P3 = .001
        ELSE
                 avf = (P1 - P2 - P3) / (R2 + R3)
                DAVFDT = 0
                DP3DT = E3 * avf
END IF
DV2DT = avf - AF
DP5DT = E5 * (AF - P5 / R5)
RVP = pmaxrv * K2(istep) / emaxlv
IF cout > 0 THEN
        paf = qll(istep)
ELSE
        paf = paf + DPAFDT * .001
END IF
V8 = V8 + DV8DT * .001
v0 = v0 + DV0DT * .001
VF = VF + DVFDT * .001
P8 = E8 * V8
PO = EO * vO
F80 = (P8 - P0) / R0
V1 = V1 + DV1DT * .001
avf = avf + DAVFDT * .001
P3 = P3 + DP3DT * .001
V2 = V2 + DV2DT * .001
IF ARR > 0 AND P2 < P5 THEN
        AF = (P2 - P5) / ARR
ELSE
        AF = (P2 - P5) / R4
        IF AF < 0 THEN AF = 0
END IF
IF AF < 0 THEN AF = 0
P5 = P5 + DP5DT * .001
P1 = K1(istep) * (V1 - VD1(istep))
P2 = ALV * (EXP(ALPHA * V2) - 1) + K2(istep) * (V2 - VD2) + R9 * avf + PINF
IF (it = ccycles AND CI = 1) OR (it = icycles AND CI = 2) THEN
        YLAV(istep, CI) = V1
        YLAP(istep, CI) = P1
        ylvv(istep, CI) = V2
        YLVP(istep, CI) = P2
YAF(istep, CI) = AF
        YMF(istep, CI) = avf
        YPVF(istep, CI) = VF
        YF80(istep, CI) = F80
        YPAF(istep, CI) = paf
        YPO(istep, CI) = PO
        YP8(istep, CI) = P8
        YP5(istep, CI) = P5
```

```
IF istep = 1 THEN
                 P3ST = P3
                 vOST = vO
                  V8ST = V8
                 rvpST = RVP
                 MVST = MV
        END IF
END IF
IF mfww = 1 THEN ymfa(istep, CI) = avf
END SUB
SUB JOFF (1, OFFSET, J)
J = (i - OFFSET) / 3
END SUB
SUB outnames
nmq\$(1) = "PCO": nmq\$(2) = "LVPmin": nmq\$(3) = "LVEDP": nmq\$(4) = "LVEDV" nmq\$(5) = "EF": nmq\$(6) = "(LAP-LVP)max": nmq\$(7) = "PLVP"
nmq\$(14) = "LAV-a-min"
nmq$(15) = "PMF": nmq$(16) = "MF-a-min": nmq$(17) = "MF-a-max"
nmq$(18) = "MF-a-max/PMF"
nmq$(19) = "FV": nmq$(20) = "FV-PMF": nmq$(21) = "FV-a-min": nmq$(22) = "FVA(Yel
nmq$(23) = "FVA(clin)": nmq$(24) = "FV-lost after MF=0"
nmqS(25) = "FVA(Y)/FV": nmqS(26) = "FVA(Y)-FVlost/FV"
nmq\$(27) = "FV-PMF/FV"
nmq$(28) = "t-LVPmin": nmq$(29) = "t-(LAP-LVP)max": nmq$(30) = "t-PMP"
nmq\$(31) = "t-MF-a-min": nmq\$(32) = "t-MF-a-max"
nmq$(33) = "DFP-f": nmq$(34) = "DFP-p": nmq$(35) = "DFP-f/RR"
END SUB
SUB parnames
'Subroutine for Parameter and Initial Condition Name Set-Up
nmp$(1) = "L8": nmp$(2) = "R8": nmp$(3) = "E8": nmp$(4) = "R0"
nmp$(5) = "E0": nmp$(6) = "R1": nmp$(7) = "L1": nmp$(8) = "R2"
nmp$(9) = "L2": nmp$(10) = "E3": nmp$(11) = "R3": nmp$(12) = "R4"
nmp$(13) = "R5": nmp$(14) = "E5": nmp$(15) = "K10": nmp$(16) = "VD10"
nmp$(17) = "VD2": nmp$(18) = "Pinf": nmp$(19) = "R9": nmp$(20) = "ALPHA"
nmps(21) = "ALV": nmps(22) = "Emax-LA": nmps(23) = "MR-R": nmps(24) = "MR-L"
nmp$(25) = "MR-LVVdep": nmp$(26) = "AR-R": nmp$(27) = "MVclosed"
nmp$(28) = "PR": nmp$(29) = "V-V": nmp$(30) = "Emax-LV": nmp$(31) = "Pmax-RV": n
nmp$(33) = "#Con": nmp$(34) = "#Int": nmp$(35) = "CO"
NMIS(1) = "MFic": NMIS(2) = "VFic": NMIS(3) = "AVFic": NMIS(4) = "AFic"
NMI$(5) = "VOic": NMI$(6) = "V8ic": NMI$(7) = "V1ic": NMI$(8) = "V2ic"
NMI$(9) = "DUMMY": NMI$(10) = "P3ic": NMI$(11) = "P5ic"
END SUB
SUB PLOTPV
'Subroutine to Plot P-V Loops
                                   LA and LV
OPEN "COM1:9600,S,7,1,RS,CS65000,DS,CD" FOR RANDOM AS #1
PRINT #1, "SP1;IP500,500,4500,6000;SC100,0,0,50;PU100,0;PD0,0;PD0,50;PU;"
PRINT #1, "PU"; : PRINT #1, USING "###.##"; YLVP(1, CI); : PRINT #1, ","; : PRIN
FOR i = 1 TO RR
```

```
PRINT #1, "PD"; : PRINT #1, USING "####.####"; YLVP(i, CI); : PRINT #1,
NEXT i
PRINT #1, "PU;"
PRINT #1, "P0;"

PRINT #1, "SP1;IP5500,500,9500,6000;SC20,0,0,50;PU20,0;PD0,0;PD0,50;PU;"

PRINT #1, "PU"; : PRINT #1, USING "###.##"; YLAP(1, CI); : PRINT #1, ","; : PRIN

FOR i = 1 TO RR
         PRINT #1, "PD"; : PRINT #1, USING "#####.#####"; YLAP(i, CI); : PRINT #1,
NEXT i
PRINT #1, "PU;"
CLOSE #1
END SUB
SUB PLOTT
'Subroutine to Plot Data vs. Time
nm$(1) = "L8
                  11
nm\$(2) = "R8
                 н
nm$(3) = "E8
                  .
                 n
nm$(4) = "R0
nm$(5) = "E0
                 n
nm$(6) = "R1
                  н
                  11
nm$(7) = "L1
nmS(8) = "R2
                  11
nm$(9) = "L2
                  11
nm$(10) = "E3
                  . 98
        = "R3
                   H
nm$(11)
nm$(12) = "R4
                   н
nm$(13) = "R5
                   n
nmS(14) = "E5
                   11
nm$(15) = "K10
                   ....
nmS(16) = "VD10 "
nm$(17) = "VD2
                   ....
nm$(18) = "Pinf "
nmS(19) = "R9
                   et
nm$(20) = "ALPHA"
nm$(21) = "Acoef"
nm\$(22) = "EmxLA"
nm$(23) = "MR-R "
nm$(24) = "MR-I "
nm$(25) = "MR-D "
nm$(26) = "AR-R "
nm$(27)
        = "MV 0 "
nm$(28) = "PR
                   ...
nm$(29) = "RR
                   n
nmS(30) = "EmxLV"
nm$(31) = "PmxRV"
nm$(32) = "tau"
OPEN "COM1:9600,S,7,1,RS,CS65000,DS,CD" FOR RANDOM AS #1
'Separate windows are used for each variable
PRINT #1, "SP1;"
IF PLOT = 2 AND PLTVAR = 1 THEN
         OFFSET = RR + 3 + 100
ELSE
         OFFSET = 0
END IF
'LAP
PRINT #1, "IP8000,0,9750,7000;SC17.8,-4,0,7000"
PRINT #1, "PUO,"; 3 + OFFSET; "; PDO,"; RR * 3 + OFFSET; ";"
```

```
PRINT #1, "SP2;"
PRINT #1, "PU"; YLAP(1, CI); ","; 3 + OFFSET; ";": FOR i = 3 + OFFSET TO RR * 3
'LVP
PRINT #1, "SP1; PU; IP8000, 0, 9750, 7000; SC17.8, -4, 0, 7000"
y = YLVP(1, CI)
IF y > 20 THEN y = 20
PRINT #1, "PU"; y; ","; 3 + OFFSET; ";": FOR i = 3 + OFFSET TO RR * 3 + OFFSET S
PRINT #1, "PD"; : PRINT #1, USING "###.##"; y; : PRINT #1, ","; i; ";": NEXT i
'DELTA P
PRINT #1, "IP6500,0,8000,7000;SC10,-8.75,0,7000"
PRINT #1, "PU0,"; 3 + OFFSET; ";PD0,"; RR * 3 + OFFSET; ";"
GHTY = YLAP(1, CI) - YLVP(1, CI)
IF GHTY > 9.99 THEN
           GHTY = 9.99
ELSEIF GHTY < -4 THEN
           GHTY = -4
END IF
PRINT #1, "PU"; GHTY; ","; 3 + OFFSET; ";": FOR i = 3 + OFFSET TO RR * 3 + OFFSE
PRINT #1, "PD"; : PRINT #1, USING "##.##"; y; : PRINT #1, ","; i; ";": NEXT i
'REM MF
PRINT #1, "IP4800,0,6800,7000;SC80,-20,0,7000"
PRINT #1, "PUO,"; 3 + OFFSET; ";PDO,"; RR * 3 + OFFSET; ";"
PRINT #1, "PU"; YMF(1, CI); ","; 3 + OFFSET; ";": FOR i = 3 + OFFSET TO RR * 3 +
PRINT #1, "PD"; : CALL JOFF(i, OFFSET, J): PRINT #1, USING "###.##"; YMF(J, CI);
DO WHILE partplot = 0
'AOP=YP5
           PRINT #1, "IP3000,0,4200,7000;SC120,0,0,7000"
PRINT #1, "PU"; YP5(1, CI); ","; 3 + OFFSET; ";": FOR i = 3 + OFFSET TO
           PRINT #1, "PD"; : CALL JOFF(i, OFFSET, J): PRINT #1, USING "###.##"; YP5
'AF
           PRINT #1, "IP3000,0,4200,7000;SC600,0,0,7000"
           PRINT #1, "SP1; PU0,"; 3 + OFFSET; "; PD0,"; RR * 3 + OFFSET; ";"
PRINT #1, "SP2; PU"; YAF(1, CI); ","; 3 + OFFSET; ";": FOR i = 3 + OFFSET
'LOW GAIN LVP
           PRINT #1, "SP1;IP3000,0,4200,7000;SC120,0,0,7000"
PRINT #1, "PU"; YLVP(1, CI); ","; 3 + OFFSET; ";": FOR i = 3 + OFFSET TO
'dP/dt (derived here)
           REM PRINT #1, "SP1; IP2900, 0, 3500, 7000; SC750, -750, 0, 7000"
           REM PRINT #1, "PU"; (1000/TIMSTP*(YLVP(TIMSTP+1)-YLVP(1,CI)));","; (TSTART+
           REM FOR I=TSTART+1 TO TSTART+999 STEP TIMSTP:GOSUB 1800:PRINT #1, "PD";:Y
'LOW GAIN LAP
           PRINT #1, "SP1; IP3000,0,4200,7000; SC120,0,0,7000"
PRINT #1, "PU"; YLAP(1, CI); ","; 3 + OFFSET; ";": FOR i = 3 + OFFSET TO
'LVV
           PRINT #1, "SP1;IP2000,0,3000,7000;SC50,0,0,7000"
PRINT #1, "PU0,"; 3 + OFFSET; ";PD0,"; RR * 3 + OFFSET; ";"
PRINT #1, "PU"; ylvv(1, CI); ","; 3 + OFFSET; ";": FOR i = 3 + OFFSET TO
'LAV
           PRINT #1, "SP2; IP2000,0,3000,7000; SC50,0,0,7000"
           PRINT #1, "PU"; YLAV(1, CI); ","; 3 + OFFSET; ";": FOR i = 3 + OFFSET TO
1 PVF
           PRINT #1, "IP0,0,1000,7000;SC100,-50,0,7000"
PRINT #1, "PU0,"; 3 + OFFSET; ";PD0,"; RR * 3 + OFFSET; ";"
PRINT #1, "PU"; YPVF(1, CI); ","; 3 + OFFSET; ";": FOR i = 3 + OFFSET TO
'F80
           PRINT #1, "SP2; IP0,0,1000,7000; SC100,-50,0,7000"
PRINT #1, "PU"; YF80(1, CI); ","; 3 + OFFSET; ";": FOR i = 3 + OFFSET TO
'P0
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PRINT #1, "PU"; YP8(1, CI); ","; 3 + OFFSET; ";": FOR i = 3 + OFFSET TO
IF nac = 1 THEN
                     'MF-A
                     PRINT #1, "SP2; IP4800,0,6800,7000; SC80,-20,0,7000"
PRINT #1, "PU"; ymfa(1, CI); ","; 3 + OFFSET; ";": FOR i = 3 + 0
PRINT #1, "PD"; : PRINT #1, USING "###.##"; ymfa(J, CI); : PRINT
                     PRINT #1, "SC;SP1;PU500,6100;SI;DI0,1;"
          END IF
LOOP
PRINT #1, "SC;SP1;PU500,6100;SI;DI0,1;"
IF PLOT = 2 OR (PLOT = 1 AND INRTOT = 0) THEN
          PRINT #1, "IP800,0,9750,7000;"
PRINT #1, "LBJSM MODEL V.17"; CHR$(3)
          PRINT #1, "CP;LB"; DATE$; CHR$(3)

PRINT #1, "CP;LB"; : PRINT #1, USING "RR ######"; RR; : PRINT #1, CHR$(3)

PRINT #1, "CP;LB"; : PRINT #1, USING "PR #####"; PR; : PRINT #1, CHR$(3)

PRINT #1, "CP;CP;LB"; id$; CHR$(3); "CP;";
          OPEN "param1.dat" FOR INPUT AS #2
                     FOR i = 1 TO NUMPAR
                                INPUT #2, prm(i), CHNGD(i)
                     NEXT i
          CLOSE #2
          PRINT #1, "CP;LBC:"; CHR$(3)
FOR i = 1 TO NUMPAR
                     IF CHNGD(1) = 1 THEN
                                PRINT #1, "CP;LB"; : PRINT #1, USING "& ###.######; nmS(
                     END IF
          NEXT i
          IF INRTOT > 0 THEN
                     PRINT #1, "CP;CP;CP;LBI:"; CHR$(3)
                     FOR i = 1 TO NUMPAR
                                IF INR(i) = 1 THEN
                                          PRINT #1, "CP;LB"; : PRINT #1, USING "& ###.####
                                END IF
                     NEXT i
          END IF
END IF
CLOSE #1
END SUB
SUB printall
'Subroutine to print control, intervention, and their differences
LPRINT "JSM MODEL V.17 ANALYSIS - CONTROL AND INTERVENTION";
LPRINT USING "
                       RR=##### ms HR=### bpm PR=#### ms"; RR; 60000! / RR; PR
LPRINT id$
OPEN "param1.dat" FOR INPUT AS #2
FOR i = 1 TO NUMPAR
          INPUT #2, prm(i), CHNGD(i)
NEXT i
```

PRINT #1, "SP1;IP1000,0,2000,7000;SC18,6,0,7000;" PRINT #1, "PU6,"; 3 + OFFSET; ";PD6,"; RR * 3 + OFFSET; ";" PRINT #1, "PU"; YP0(1, CI); ","; 3 + OFFSET; ";": FOR i = 3 + OFFSET TO

'p8

CLOSE #2 LPRINT "Non-default CONTROL parameter(s):" FOR 1 = 1 TO NUMPAR IF CHNGD(i) = 1 THEN LPRINT USING " & ###.#####"; nm\$(i); prm(i) END TE NEXT i IF INRTOT > 0 THEN LPRINT "INTERVENTION parameter(s):" FOR i = 1 TO NUMPAR IF INR(i) = 1 THEN LPRINT USING " & ###.#####"; nm\$(i); inrval(END IF NEXT i END IF LPRINT LPRINT "Parameter (I-C)/C"С т T-C LPRINT ##.###"; pco(1); p ###.# ###.# ####.# LPRINT USING "PCO mmHq LPRINT USING "LVPmin ##.###"; lvpmn(1); ###.# ###.# ####.# ##.###"; LVEDP(1); LPRINT USING "LVEDP ###.# ###.# ####.# LPRINT USING "LVEDV ##.###"; LVEDV(1); ###.# ml ###.# ####.# i = 100 * FV(1) / LVEDV(1) J = 100 * FV(2) / LVEDV(2) LPRINT USING "EF ##.# ##.# ##.###"; i; J; J -##.# LPRINT USING "(LAP-LVP)max ##.###"; LALVMX(1) ****.* ###.# mmHg ###.# LPRINT USING "PLVP ###.# ###.# ####.# ##.###"; PLVP(1); LPRINT USING "M-(LA-LV)-diast ###.## ***.** ****.** ##.###"; LALVMD(1) ##.###"; LAPMEN(1) LPRINT USING "MLAP ###.## ###.## ####.## LPRINT USING "MLAP-diast ###.## ***.** ****.** ##.###"; LAPMED(1) LPRINT USING "MLAP-syst ##.###"; LAPMES(1) ***.** ***.** ****.** LPRINT USING "LVP-a-min ##.###"; LVPAMN(1) ***.* ***.* ****.* LPRINT USING "LAP-a-max ###.# ##.###"; LAPMX(1); ###.# ****.* LPRINT USING "LAV-a-min ***.** ****.** ##.###"; LAPRE(1); ###.## LPRINT ###.# LPRINT USING "PMF ###.# ml/s ****.* ##.###"; PMF(1); P LPRINT USING "MF-a-min ##.###"; MFA1(1); ###.# ###.# ####.# LPRINT USING "MF-a-max ##.####; MFA(1); M ###.# ###.# ####.# i = MFA(1) / PMF(1)J = MFA(2) / PMF(2)LPRINT USING "MF-a-max/PMF #.### #.### ##.### ##.###"; i; J; J -LPRINT LPRINT USING "FV ###.# ###.# ####.# ##.###"; FV(1); FV ml ##.###"; FVPMF(1); LPRINT USING "FV-PMF ###.# ###.# ####.# LPRINT USING "FV-a-min ##.###"; FVA1(1); ###.# ###.# ####.# LPRINT USING "FVA (Yellin) ##.###"; FVA(1); F ###.# ###.# ###.# i = FV(1) - FVA1(1)J = FV(2) - FVA1(2)LPRINT USING "FVA (clin) ###.# ***.* ****.* ##.###"; i; J; J i = MFASUB1(1)J = MFASUB1(2)LPRINT USING "FV-lost after MF=0 ###.# ##.###"; i; J; J -**** #.### #.### ##.### ##.###"; 1; J; J i = (FVA(1) - MFASUB1(1)) / FV(1) J = (FVA(2) - MFASUB1(2)) / FV(2)LPRINT USING "FVA(Y)-FVlost/FV #.### ##.### ##.###"; 1; J; J -#.### i = FVPMF(1) / FV(1)

```
J = FVPMF(2) / FV(2)
LPRINT USING "FV-PMF/FV
                                      #.###
                                                     #.### ##.### ##.###"; i; J; J; -
LPRINT
                                                                    ##.###"; TLVPMN(1)
                                    ###
                                                   ***
                                                          ####
LPRINT USING "t-LVPmin
                                            ms
                                                                    ##.###"; TLALVMX(1
LPRINT USING "t-(LAP-LVP)max
                                    ###
                                                   ***
                                                          ***
                                                                    ##.###"; TPMF(1);
LPRINT USING "t-PMF
                                    ###
                                                   ###
                                                          ****
LPRINT USING "t-MF-a-min
                                                                    ##.####; TMFA1(1);
                                    ###
                                                   ###
                                                          ****
                                                                    ##.###"; TMFA(1);
##.###"; TMFEND(1)
LPRINT USING "t-MF-a-max
                                                   ###
                                                          ****
                                    ###
LPRINT USING "DFP-f
                                                   ###
                                                          ####
                                    ###
LPRINT USING "DFP-p
                                                                    ##.###"; DFPP(1);
                                    ***
                                                   ###
                                                          ****
i = TMFEND(1) / RR
J = TMFEND(2) / RR
LPRINT USING "DFP-f/RR
                                                     #.### ##.### ##.###"; 1; J; J -
                                      #.###
END SUB
SUB printcontrol
'Subroutine to print control only
LPRINT "JSM MODEL V.17 ANALYSIS - NO INTERVENTION";
LPRINT USING " RR=#### ms HR=### bpm PR=#### ms"; RR; 60000! / RR; PR
LPRINT ids
OPEN "param1.dat" FOR INPUT AS #2
FOR i = 1 TO NUMPAR
         INPUT #2, prm(i), CHNGD(i)
NEXT i
CLOSE #2
LPRINT "Non-default CONTROL parameter(s):"
         FOR i = 1 TO NUMPAR
                 IF CHNGD(i) = 1 THEN
                          LPRINT USING "
                                               & ###.#####"; nm$(i); prm(i)
                  END IF
         NEXT i
LPRINT
                                    ###.# mmHg"; pco(1)
###.#"; lvpmn(1)
LPRINT USING "PCO
LPRINT USING "LVPmin
LPRINT USING "LVEDP
                                     ###.#"; LVEDP(1)
LPRINT USING "LVEDV
                                    ###.# ml"; LVEDV(1)
i = 100 * FV(1) / LVEDV(1)
                                   ##.# percent"; i
###.# mmHg"; LALVMX(1)
####.#"; PLVP(1)
LPRINT USING "EF
LPRINT USING "(LAP-LVP)max
LPRINT USING "PLVP
LPRINT USING "M-(LA-LV)-diast
                                    ###.##"; LALVMD(1)
LPRINT USING "MLAP
                                     ###.##"; LAPMEN(1)
LPRINT USING "MLAP-diast
                                     ###.##"; LAPMED(1)
LPRINT USING "MLAP-syst
                                    ###.##"; LAPMES(1)
LPRINT USING "LVP-a-min
                                     ###.#"; LVPAMN(1)
LPRINT USING "LAP-a-max
                                    ###.#"; LAPMX(1)
LPRINT USING "LAV-a-min
                                    ###.## ml"; LAPRE(1)
LPRINT
LPRINT USING "PMF
                                    ###.# ml/s"; PMF(1)
LPRINT USING "MF-a-min
                                     ###.#"; MFA1(1)
LPRINT USING "MF-a-max
                                    ###.#"; MFA(1)
                                      #.###"; MFA(1) / PMF(1)
LPRINT USING "MF-a-max/PMF
LPRINT
LPRINT USING "FV
                                    ###.# ml"; FV(1)
                                     ###.#"; FVPMF(1)
LPRINT USING *FV-PMF
LPRINT USING "FV-a-min
                                     ###.#"; FVA1(1)
LPRINT USING "FVA (Yellin)
                                    ###.#"; FVA(1)
LPRINT USING "FVA (clin.)
                                    ###.#"; FV(1) - FVA1(1)
IF MFASUB1(1) = .01 THEN
```

```
LPRINT
ELSE
         LPRINT USING "FV-lost after MF=0 ###.#"; MFASUB1(1)
END IF
                                           #.###"; (FVA(1) - MFASUB1(1)) / FV(1)
#.###"; FVA(1) / FV(1)
#.###"; FVPMF(1) / FV(1)
LPRINT USING "FVA(Y)-FVlost/FV
LPRINT USING "FVA(Y)/FV
LPRINT USING "FV-PMF/FV
LPRINT
LPRINT USING "t-LVPmin
                                         ###
                                                 ms"; TLVPMN(1)
LPRINT USING "t-(LAP-LVP) max
LPRINT USING "t-PMF
                                         ###"; TLALVMX(1)
                                         ###"; TPMF(1)
LPRINT USING "t-MF-a-min
                                         ###"; TMFA1(1)
                                         ###"; TMFA(1)
LPRINT USING "t-MF-a-max
                                        ####"; TMFEND(1)
LPRINT USING "DFP-f
LPRINT USING "DFP-p
                                        ####"; DFPP(1)
LPRINT USING "DFP-f/RR
                                           #.###"; TMFEND(1) / RR
END SUB
SUB reiterate (reit, sv, ev, st)
LOCATE 23, 1: PRINT "
LOCATE 23, 1: PRINT "parameter vs parameter run ? (N)";
INPUT r$
IF r$ = "y" OR r$ = "Y" THEN reit = 1 ELSE reit = 0
IF reit = 1 THEN
          LOCATE 23, 1: PRINT " ";
          INPUT "what parameter do you want to vary "; reitl
          INPUT ; "starting value"; sv
          INPUT ; " end value"; ev
          INPUT "
                         step"; st
END IF
END SUB
SUB SAVCON
PRINT "running savcon"
parvpar(0, 0) = prm(reit1)
parvpar(1, 0) = pco(1)
parvpar(2, 0) = lvpmn(1)
parvpar(3, 0) = LVEDP(1)
parvpar(4, 0) = LVEDV(1)
parvpar(5, 0) = 100 * FV(1) / LVEDV(1)
parvpar(6, 0) = LALVMX(1)
parvpar(7, 0) = PLVP(1)
parvpar(8, 0) = LALVMD(1)
parvpar(9, 0) = LAPMEN(1)
parvpar(10, 0) = LAPMED(1)
parvpar(11, 0) = LAPMES(1)
parvpar(12, 0) = LVPAMN(1)
parvpar(13, 0) = LAPMX(1)
parvpar(14, 0) = LAPRE(1)
parvpar(15, 0) = PMF(1)
parvpar(16, 0) = MFA1(1)
parvpar(17, 0) = MFA(1)
parvpar(18, 0) = MFA(1) / PMF(1)
parvpar(19, 0) = FV(1)
parvpar(20, 0) = FVPMF(1)
parvpar(21, 0) = FVA1(1)
```

parvpar(22, 0) = FVA(1) parvpar(23, 0) = FV(1) - FVA1(1) parvpar(24, 0) = MFASUB1(1) parvpar(25, 0) = FVA(1) / FV(1) parvpar(25, 0) = (FVA(1) - MFASUB1(1)) / FV(1) parvpar(27, 0) = FVPMF(1) / FV(1) parvpar(28, 0) = TLVPMN(1) parvpar(28, 0) = TLVPMN(1) parvpar(29, 0) = TLALVMX(1) parvpar(30, 0) = TMFF(1) parvpar(31, 0) = TMFF(1) parvpar(32, 0) = TMFA1(1) parvpar(33, 0) = TMFEND(1) parvpar(34, 0) = DFPP(1) parvpar(35, 0) = TMFEND(1) / RR

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END SUB

SUB SAVEITER

parvpar(0, cj) = paramchg
parvpar(1, cj) = pco(2)
parvpar(2, cj) = lvpmn(2)
parvpar(3, cj) = LVEDP(2)
parvpar(4, cj) = LVEDV(2)
parvpar(5, cj) = 100 * FV(2) / LVEDV(2)
parvpar(6, cj) = LALVMX(2)
parvpar(7, cj) = PLVP(2)
parvpar(8, cj) = LALVMD(2)
parvpar(9, cj) = LAPMEN(2)
parvpar(10, cj) = LAPMED(2)
parvpar(11, cj) = LAPMES(2)
parvpar(12, cj) = LVPAMN(2)
parvpar(13, cj) = LAPMX(2)
parvpar(14, cj) = LAPRE(2)
parvpar(15, cj) = PMF(2)
parvpar(16, cj) = MFA1(2)
$parvpar(17, c_{j}) = MFA(2)$
parvpar(18, cj) = MFA(2) / PMF(2)
parvpar(19, cj) = FV(2)
parvpar(20, cj) = FVPMF(2)
parvpar(21, cj) = FVA1(2)
parvpar(22, cj) = FVA(2)
parvpar(23, cj) = FV(2) - FVA1(2)
parvpar(24, cj) = MFASUB1(2)
parvpar(25, cj) = FVA(2) / FV(2)
parvpar(26, cj) = (FVA(2) - MFASUB1(2)) / FV(2)
parvpar(27, cj) = FVPMF(2) / FV(2)
parvpar(28, cj) = TLVPMN(2)
parvpar(29, cj) = TLALVMX(2)
parvpar(30, cj) = TPMF(2)
parvpar(31, cj) = TMFA1(2)
parvpar(32, cj) = TMFA(2)
parvpar(33, cj) = TMFEND(2)
parvpar(34, cj) = DFPP(2)
parvpar(35, cj) = TMFEND(2) / RR

```
END SUB
SUB SETOUT
'Quiery for output options
CLS
                                   MODEL OUTPUT OPTIONS"
PRINT "
LOCATE 5, 1: PRINT "Screen monitoring? (Y)";
INPUT a$
IF a\$ = "N" OR a\$ = "n" THEN OUTSCR = 0 ELSE OUTSCR = 1
LOCATE 5, 1: PRINT "
LOCATE 5, 1: PRINT "Output to printer? (Y)";
INPUT a$
IF a\$ = "N" OR a\$ = "n" THEN
        outprt = 0
ELSE
        outprt = 1
END IF
PLTVAR = 0
LOCATE 5, 1: PRINT "Output plots to plotter/laser printer? (Y)";
INPUT a$
IF a$ <> "N" AND a$ <> "n" THEN
        DO
                       LOCATE 14, 40: PRINT "
LOCATE 7, 1
                                                        11
                       PRINT "Plot
                                     1. Variables versus time with control/interven
                       PRINT "
                                     2. Variables versus time with control/interven
                       PRINT "
                                     3. Atrial and ventricular pressure-volume loop
                       PRINT "
                                                control/intervention on separate pag
                       PRINT "
                                     4. Atrial and ventricular pressure-volume loop
                       PRINT "
                                                control/intervention overlayed"
                       LOCATE 14, 25: INPUT "Enter choice (1)"; a$
                       IF a = "" THEN PLTVAR = 1 ELSE PLTVAR = VAL(a )
         LOOP WHILE PLTVAR > 4
         DO
                 LOCATE 16, 33: PRINT "
                 LOCATE 16, 1: INPUT "Enter plotter time step in ms (4) "; a
                 IF a = 0 THEN a = 4
                 TIMSTP = INT(a)
         LOOP WHILE TIMSTP < 1 OR TIMSTP > 50 OR TIMSTP <> a
         LOCATE 16, 33: PRINT "
         LOCATE 16, 1: INPUT "Plot no-atrial contraction baseline? (Y)"; a$
         IF a$ <> "N" AND a$ <> "n" THEN nac = 1 ELSE nac = 0
        LOCATE 16, 33: PRINT " "
LOCATE 16, 1: INPUT "Plot ONLY LAP/LVP/MiF? (N)"; a$
IF a$ <> "Y" AND a$ <> "y" THEN partplot = 0 ELSE partplot = 1
END IF
IF PLTVAR > 0 OR outprt = 1 THEN
         DO
                  LOCATE 16, 50: PRINT "
                  LOCATE 16, 1: INPUT "Enter identifier for printout (up to 10 cha
         LOOP WHILE LEN(id$) > 10
END IF
END SUB
SUB SETPAR
```

```
SCREEN 0
              SETS UP PARAMETERS FOR JSM MODEL
'SETPAR1
'TO ADD PARAMETERS, CHANGE NUMPAR
NUMPAR = 35
nm$(1) = "L8-PA inertance"
nm$(2) = "R8-PA resistance"
nm$(3) = "E8-PA elastance"
nm$(4) = "RO-Pcap resistance"
nm$(5) = "E0-Pcap elastance"
nm$(6) = "R1-PV resistance"
nm$(7) = "L1-PV inertance"
nm$(8) = "R2-MV resistance"
nm$(9) = "L2-MV inertance"
nm$(10) = "E3-MV bulge elastance"
nm$(11) = "R3-MV bulge resistance"
nm$(12) = "R4-Ao resistance"
nm$(13) = "R5-periph resistance"
nm$(14) = "E5-Ao elastance"
nm$(15) = "K10-LA passive elast."
nm$(16) = "VD10-LA dead vol."
nm\$(17) = "VD2-LV dead vol."
nm$(18) = "Pinf - LVP asymptote"
nm$(19) = "R9-LV viscous res."
nm$(20) = "ALPHA-LV passive exp."
nm$(21) = "A-LV passive coef."
nm$(22) = "Emax-LA"
nm$(23) = "MR-Res. (0=no MR)"
nm$(24) = "MR-Inertance"
nm$(25) = "MR-LVV dependence"
nm$(26) = "AR-Res (0=no AR)"
nm$(27) = "MV O=closed l=open"
nm$(28) = "PR"
nm$(29) = "RR"
nm$(30) = "Emax-LV"
nm$(31) = "Pmax-RV"
nm$(32) = "tau"
nm$(33) = "con. cycls"
nm$(34) = "int. cycls"
nm$(35) = "CO"
OPEN "paraml.dat" FOR INPUT AS #1
        FOR i = 1 TO NUMPAR
                 INPUT #1, prm(i), CHNGD(i)
        NEXT i
CLOSE #1
CLS
PRINT "CONTROL Parameter Set-Up Routine
                                                flashing=non-default": PRINT
FOR i = 1 TO NUMPAR
        IF i > 18 THEN
                 I1 = i - 18
                 J = 40
        ELSE
                 II = i
                 J = 1
        END IF
        LOCATE I1 + 3, J
```

```
COLOR 15
        PRINT USING "## "; 1;
IF CHNGD(i) = 1 THEN
                 COLOR 31
        ELSE
                 COLOR 15
        END IF
        PRINT USING "######## "; prm(i);
         COLOR 15
         PRINT nm$(i);
NEXT i
DO
        DO
                  COLOR 15
                 LOCATE 23, 64
PRINT "
                  LOCATE 23, 1
                  PRINT "Enter # to be changed or "; NUMPAR + 1; " to default all
                  INPUT a
        LOOP WHILE a < 0 OR a > (NUMPAR + 1)
         SELECT CASE a
                 CASE NUMPAR + 1
prm(1) = .004: prm(2) = .02: prm(3) = .32: prm(4) = .18:
= 13: prm(17) = 8: prm(18) = -4: prm(19) = .00001
                          prm(20) = .05: prm(21) = 1.09: prm(22) = 2: prm(23) = 0:
FOR i = 1 TO NUMPAR
                                   CHNGD(i) = 0
                          NEXT i
                          OPEN "paraml.dat" FOR OUTPUT AS #1
                                   FOR i = 1 TO NUMPAR
                                            PRINT #1, prm(i); CHNGD(i)
                                   NEXT i
                          CLOSE #1
                          FOR i = 1 TO NUMPAR
                                   IF CHNGD(i) = 1 THEN
                                            COLOR 31
                                   ELSE
                                            COLOR 15
                                   END IF
                                   IF i > 18 THEN
                                            II = i - 18
                                            J = 40
                                   ELSE
                                            Il = i
                                            J = 1
                                   END IF
                                   LOCATE I1 + 3, J
                                   PRINT USING "## ####.##### &"; i; prm(i); nm$(i)
                          NEXT i
                CASE 1 TO (NUMPAR + 1)
                          LOCATE 23, 1
                          PRINT "
                          INPUT B1
                          b(1) = .004: b(2) = .02: b(3) = .32: b(4) = .18: b(5) = .18
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19) = .00001: b(20) = .05: b(21) = 1.09: b(22) = 2
                            b(23) = 0: b(24) = .002: b(25) = 0: b(26) = 0: b(27) = 1
IF b(a) = B1 THEN
                                      CHNGD(a) = 0
                                      ELSE
                                      CHNGD(a) = 1
                            END IF
                            prm(a) = B1
                            OPEN "paraml.dat" FOR OUTPUT AS #1
                            FOR i = 1 TO NUMPAR
                                      PRINT #1, prm(i); CHNGD(i)
                            NEXT i
                            CLOSE #1
                            IF a > 18 THEN
                                      I1 = a - 18
J = 40
                            ELSE
                                      I1 = a
                                      J = 1
                            END IF
                            IF CHNGD(a) = 1 THEN COLOR 31 ELSE COLOR 15
                            LOCATE 11 + 3, J
PRINT USING "## #####.##### &"; a; prm(a); nm$(a);
                            LOCATE 23, 1
                            PRINT
                            END SELECT
LOOP WHILE a <> 0
L8 = prm(1)
R8 = prm(2)
E8 = prm(3)
R0 = prm(4)
E0 = prm(5)
R1 = prm(6)
L1 = prm(7)
R2 = prm(8)
L2 = prm(9)
E3 = prm(10)
R_3 = prm(11)
R_4 = prm(12)
R5 = prm(13)
E5 = prm(14)
K10 = prm(15)
VD10 = prm(16)
VD2 = prm(17)
PINF = prm(18)
R9 = prm(19)
ALPHA = prm(20)
ALV = prm(21)
EMAXLA = prm(22)
RMR = prm(23)
                               ....
LMR = prm(24)
DMR = prm(25)
ARR = prm(26)
PR = prm(28)
RR = prm(29)
emaxlv = prm(30)
pmaxrv = prm(31)
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tau = prm(32)
ccycles = prm(33)
icycles = prm(34)
cout = prm(35)
END SUB
SUB setven2 (sv, st, ev, reit1, paramchg)
INRTOT = 0
OPEN "param1.dat" FOR INPUT AS #1
FOR i = 1 TO NUMPAR
                 INR(i) = 0
                 INPUT #1, prm(i), CHNGD(i)
        NEXT i
CLOSE #1
PRINT "performing a parameter vs. parameter run"
PRINT "reiterating:"; INT(ABS((sv - paramchg) / st)) + 1; "out of"; INT(ABS((sv
PRINT
FOR i = 1 TO NUMPAR
        IF i > 18 THEN
                 Il = i - 18
                 J = 40
        ELSE
                 II = i
                 J = 1
        END IF
NEXT i
         a = reitl
         INRTOT = INRTOT + 1
         INR(a) = 1
         inrval(a) = paramchg
IF a > 18 THEN
         I1 = a - 18
         J = 40
        ELSE
         I1 = a
         J = 1
         END IF
END SUB
SUB SETVENTION
INRTOT = 0
OPEN "param1.dat" FOR INPUT AS #1
        FOR i = 1 TO NUMPAR
                  INR(i) = 0
                  INPUT #1, prm(i), CHNGD(i)
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NEXT i
CLOSE #1
CLS
PRINT "INTERVENTION - Parameter Set-Up Routine
                                                         flashing=INTERVENTION": PRIN
FOR 1 = 1 TO NUMPAR
        IF i > 18 THEN
                 I1 = i - 18
                 J = 40
        ELSE
                 II = i
                 J = 1
        END IF
        LOCATE I1 + 3, J
        PRINT USING "## "; i;
PRINT USING "####.##### "; prm(i);
PRINT nm$(i);
         COLOR 15
NEXT i
DO
         DO
                  COLOR 15
                 LOCATE 23, 1
                  PRINT "
                  LOCATE 23, 1
                  PRINT "Enter INTERVENTION # or <RETURN> to END ";
                 INPUT a
         LOOP WHILE a < 0 OR a > (NUMPAR + 1) OR a = 33 OR a = 34
         IF a > 0 THEN
                  INRTOT = INRTOT + 1
                  INR(a) = 1
LOCATE 23, 1
                  PRINT "
                  LOCATE 23, 1
                  PRINT "Enter INTERVENTION value for "; nm$(a);
                  INPUT inrval(a)
                  IF a > 18 THEN
                           I1 = a - 18
                           J = 40
                  ELSE
                           I1 = a
                           J = 1
                  END IF
                  IF INR(a) = 1 THEN COLOR 31 ELSE COLOR 15
                  LOCATE 11 + 3, J
PRINT USING "## #####.###### &"; a; inrval(a); nm$(a);
                  LOCATE 23, 1
                  PRINT
         END IF
LOOP WHILE a > 0
END SUB
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APPENDIX B

Complete PSPICE Program

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This models mod17a .PARAM RR8=.02 .PARAM RRO=.180 .PARAM RR1=.10 .PARAM RR2=.0001 .PARAM RR3=8.0 .PARAM RR4=.10 .PARAM RR5=2.4 .PARAM RR98=.00001 .PARAM LL8=.004 .PARAM LL1=.002 .PARAM LL2=.002 .PARAM PR=.13 .PARAM RR=.75 .PARAM E8=.32 .PARAM E0=.48 .PARAM E3=1280 .PARAM E5=1.25 .PARAM LAVO=13 ; is same as VD10 .PARAM LVVD=8 ; is same as VD2 .PARAM PINF=-4 .PARAM AY=1.09 .PARAM ALPHA=.05 .PARAM TAU=.02 .PARAM K10=1.0 .PARAM PMAXRV=25 ;duration of rv contraction in ms .PARAM RVDUR=300 .PARAM EMAXLA=2.0 .PARAM EMAXLV=8 XIN 10 0 RV DA 10 20 DA R8 20 30 (RR8) L8 30 40 {LL8} IC=100 C8 40 0 {1/E8} IC=6.667 R0 40 50 (RR0) -C0 50 0 {1/E0} IC=15 R1 50 60 (RR1) L1 60 70 (LL1) IC=25 XC1 101 102 103 65 0 yx CREF 103 0 1 ELA2 101 102 VALUE={1/V(62)} RH1 101 0 10K RH2 102 0 10K XVA1 62 0 LA R62 62 0 10K ELA1 70 65 VALUE={(-LAV0) * (V(62))} C3 70 80 {1/E3} R3 80 90 (RR3) DB 70 80 DA VZERO 80 90 0 *R2 90 100 .0001 HIR2 90 100 POLY(1) VZERO 0 0 .0001 L2 100 110 (LL2) IC=30

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XLV1 82 0 LV R82 82 0 10K R9 110 112 (RR9B) EEXLV 112 114 VALUE=(AY*EXP(ALPHA*(10000*V(114,115)))) COMEASURE 114 115 10K ELV1 115 120 VALUE={(-LVVD)*(V(82))} RHUGE 120 0 100G XC2 121 122 123 120 125 yx CREF2 123 0 1 ELV2 121 122 VALUE= $\{1/V(82)\}$ 121 0 100K RH3 RH4 122 0 100K EVPINF 125 0 VALUE={PINF} DC 110 130 DA R4 130 140 (RR4) C5 140 0 {1/E5} R5 140 0 (RR5) .SUBCKT yx 1 2 3 4 5 ECOPY 3 6 POLY (2) (1,2) (4,5) 0 0 0 0 1 FOUT 4 5 VSENSE 1 RIN 1 2 1G VSENSE 0 6 0 .ENDS yx *This models an ideal diode .MODEL DA D(N=.001) *Creates function used in the right ventricle .SUBCKT RV 299 298 VSIN1 201 0 SIN(0 {PMAXRV} {1/(2*(RVDUR/1000))} {PR}) VCHOP1 202 0 PULSE(0 1 (PR) 1U 1U (RVDUR/1000) 14) EPROD1 203 0 POLY(2) 201 0 202 0 0 0 0 1 R201 201 0 10K R202 202 0 10K R203 203 400 10K T11 400 0 301 0 Z0=10K TD={RR} ES1 308 0 POLY(2) 203 0 301 0 0 1 2 R301 301 0 10K R308 308 313 10K T12 313 0 317 0 Z0=10K TD={2*RR} ES2 318 0 POLY(2) 308 0 317 0 0 1 2 R317 317 0 10K R318 318 323 10K T13 323 0 327 0 Z0=10K TD={4*RR} ES3 328 0 POLY(2) 318 0 327 0 0 1 2 R327 327 0 10K R328 328 333 10K

T14 333 0 337 0 Z0=10K TD=(8*RR) ES4 338 0 POLY(2) 328 0 337 0 0 1 2 R337 337 0 10K R338 338 0 10K 299 298 VALUE={V(338)} EOUT R299 299 0 10K 298 0 10K R298 . ENDS *creates function used in the left atrium .SUBCKT LA 299 298 VSIN1 110 0 SIN(0 (EMAXLA-K10) (1/(2*PR))) VCHOP1 111 0 PULSE(0 1 0 1U 1U {PR} 14) EPROD1 112 0 POLY(2) 110 0 111 0 0 0 0 1 110 0 10K R10 R11 111 0 10K R12 112 300 10K T11 300 0 301 0 Z0=10K TD={RR} ES1 308 0 POLY(2) 112 0 301 0 0 1 2 R301 301 0 10K R308 308 313 10K T12 313 0 317 0 Z0=10K TD=(2*RR) ES2 318 0 POLY(2) 308 0 317 0 0 1 2 R317 317 0 10K R318 318 323 10K T13 323 0 327 0 Z0=10K TD={4*RR} ES3 328 0 POLY(2) 318 0 327 0 0 1 2 R327 327 0 10K R328 328 333 10K T14 333 0 337 0 Z0=10K TD={8*RR} ES4 338 0 POLY(2) 328 0 337 0 0 1 2 R337 337 0 10K R338 338 0 10K VK10 198 0 {K10} ETOTAL 199 0 POLY(2) 198 0 338 0 0 1 1 R98 198 0 10K R99 199 0 10K 299 298 VALUE={V(199)} EOUT 298 0 10K R298 R299 299 0 10K . ENDS *CREATES function used in LEFT VENTRICLE .SUBCKT LV 399 398 VSIN1 201 0 SIN((EMAXLV/2) (EMAXLV/2) 3.33333333 (RR+PR-.225)) VCHOP1 202 0 PULSE(0 1 (RR+PR) 1U 1U .15 15) EPROD1 203 0 POLY(2) 201 0 202 0 0 0 0 1 *THIS LINE IS: 0, 0, RR+PR+.15, EMAXLV, RR+PR+.15+(DELAY), EMAXLV *VLINE 707 0 PWL(0 0 1.03 0 1.030001 8 1.079999 8 1.08001 0)



*ADD the delay to the second to last term VEXP1 204 0 EXP(0 (EMAXLV) (RR+PR) 15M (RR+PR+.15) (TAU)) *add the delay to the third term VCOP1 205 0 PULSE(0 1 (RR+PR+.15+.000001) 1U 1U (RR-(2*PR)) 15)
 EPOD1
 206
 0
 POLY(2)
 204
 0
 205
 0
 0
 0
 1

 ESUM1
 207
 0
 POLY(2)
 203
 0
 206
 0
 1
 1
 201 0 10K R201 R202 202 0 10K 203 0 10K R203 R204 204 0 10K 205 0 10K R205 R206 206 0 10K *R707 707 O 10K R207 207 500 10K T11 500 0 301 0 Z0=10K TD={RR} ES1 308 0 POLY(2) 207 0 301 0 0 1 2 R301 301 0 10K R308 308 313 10K T12 313 0 317 0 Z0=10K TD={2*RR} ES2 318 0 POLY(2) 308 0 317 0 0 1 2 R317 317 0 10K R318 318 323 10K T13 323 0 327 0 Z0=10K TD={4*RR} ES3 328 0 POLY(2) 318 0 327 0 0 1 2 R327 327 0 10K R328 328 333 10K T14 333 0 337 0 Z0=10K TD=(8*RR) ES4 338 0 POLY(2) 328 0 337 0 0 1 2 R337 337 0 10K R338 338 0 10K VFIRST 688 0 EXP(0 (EMAXLV) (PR) 18M (PR+.15) (TAU)) *V122 688 0 PWL(0 0 15 0) R688 688 0 10K ESUM10 689 0 POLY(2) 338 0 688 0 0 1 1 R689 689 0 10K EOUT 399 398 VALUE={V(689)+.001} R98 398 0 10K R99 399 0 10K . ENDS .TRAN .02 8 0 .02 UIC *.PLOT TRAN V(70) *.PRINT TRAN V(70) V(110) . PROBE

.OPTIONS NOPAGE ITL4=20 ITL5=0 ABSTOL=1U RELTOL=.01 VNTOL=.5M PIVTOL=.01F CHGTO .END

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