

Group 21: Robotic Soft Tissue Manipulation Assessment

Seminar Presentation

"Quantitative Evaluation of Phonomicrosurgical Manipulations Using a
Magnetic Motion Tracking System"

Chen et al. 2014

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Overview

- Project Summary
- Introduction
- Why I selected the paper
- Benefit of the study
- Experimental Design
- Parameters Developed
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- Relevance to our study



Project Summary

- Assess and prove through subjective expert analysis that robotic assisted laryngeal surgery is more effective than mere manual surgery
- Use GALEN robot to assist in the laryngeal cyst removal surgery in animal larynx to mimic real surgery

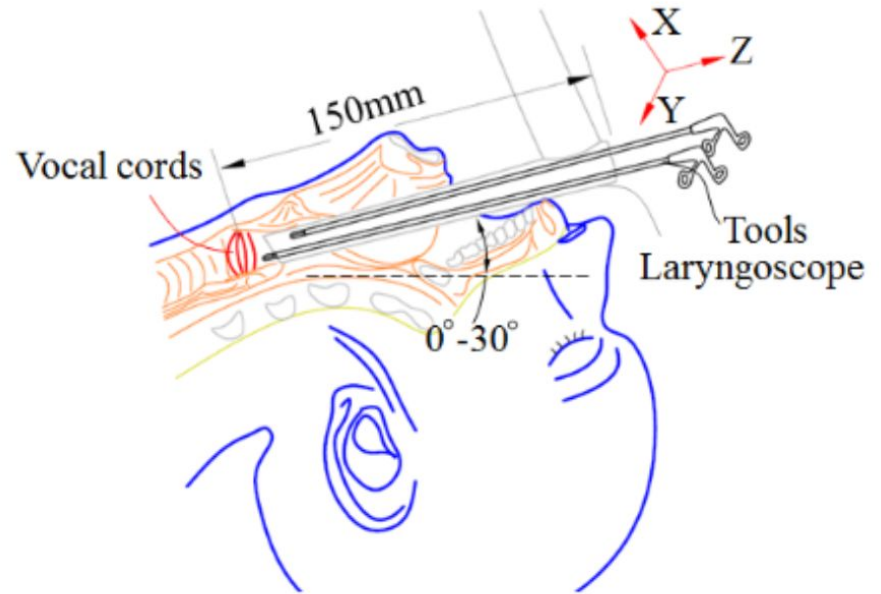


Figure 1: Microlaryngeal Phonosurgery

Introduction

- Laryngeal diseases affect millions of people
- Vocal cords are extremely delicate as they define mucosal wave propagation and normal vibratory function in humans
 - Requires delicate and accurate surgical approach
- Traditionally surgeons are trained in an apprentice style where they observe and perform procedures under supervision
- Ability to objectively evaluate and provide feedback to surgeons would enhance consistency of surgical education
- Simulative training provides benefit for public health



Why I selected this paper

- Our analyses currently consist only of subjective parameters
- Very insightful look at how to objectively set up analyses parameters
 - Maintenance of motion smoothness
 - Minimization of Tremor
 - Compact and continuous spatial motion of the tip of an instrument
 - Coordination of two hands



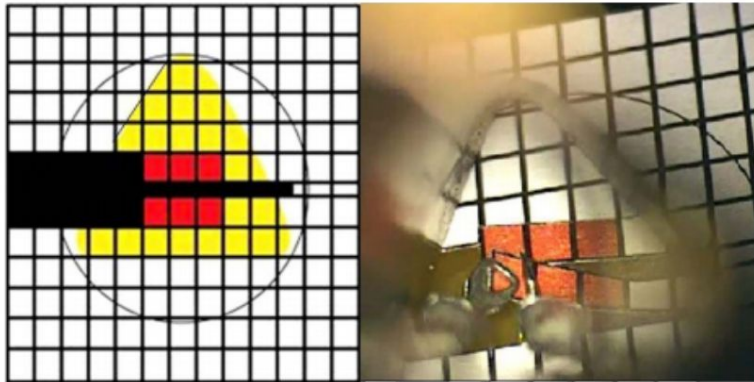
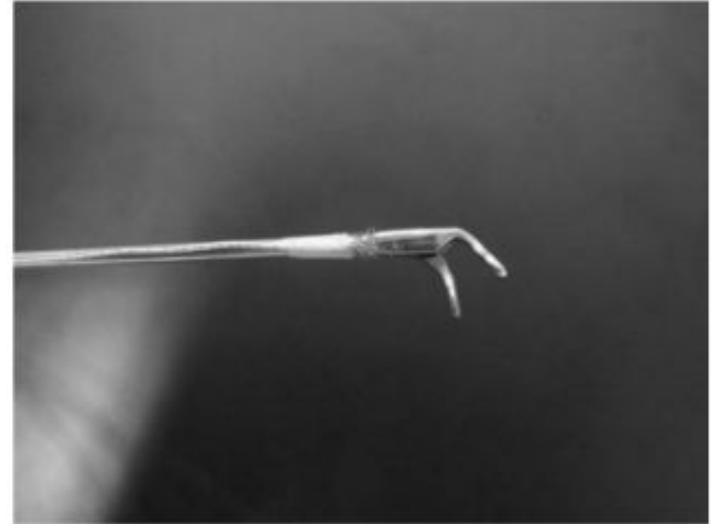
Benefit of this study

- Using the objective metrics, simulation training systems could be put in place which would help surgeons in training develop better skills.



Experimental Design

- Magnetic Motion Tracking System called microBIRD
- Simulative Task included cutting out small squares using laryngeal microscissors



Parameters Developed

Motion Smoothness

$$S = \frac{1}{T} \sqrt{\frac{1}{2} \int_0^T j^2 dt}$$

Path Length

$$p = \sum_0^T \sqrt{(dx)^2 + (dy)^2 + (dz)^2}$$

Depth Perception

$$D = |(x_1 - x_2) \cdot \cos(42^\circ) - (Z_1 - Z_2) \cdot \sin(42^\circ)|$$

Quality

$$Q = \sum_{k=1}^n (A - A_k) / n * A$$



Results

TABLE I.
Comparison of Dominant-Hand Parameters.

	S			P	D
	x-axis	y-axis	z-axis		
Novices	0.294 ± 0.1870	0.366 ± 0.1918*	0.381 ± 0.2256	40.080 ± 22.4007	15.600 ± 9.1191
Experts	0.261 ± 0.1391	0.146 ± 0.0377*	0.373 ± 0.1628	38.020 ± 16.2938	13.490 ± 5.9172

*Statistically significant differences in a one-tailed *t* test ($P < .05$).
D = depth perception; P = path length; S = smoothness.

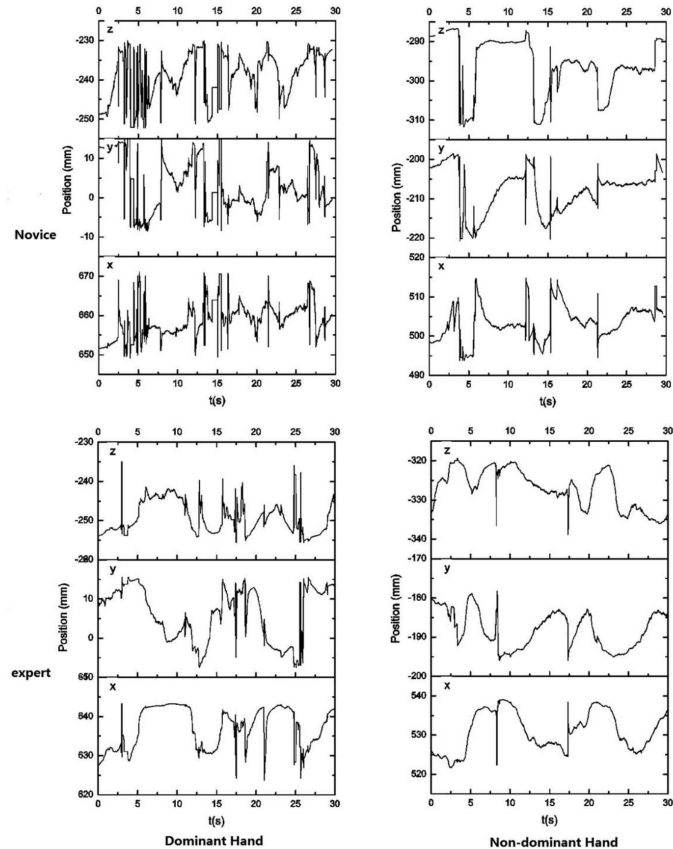
TABLE II.
Comparisons of Nondominant-Hand Parameters.

	S			P	D
	x-axis	y-axis	z-axis		
Novices	0.188 ± 0.0870*	0.211 ± 0.0907*	0.220 ± 0.0952*	21.536 ± 6.8449*	9.109 ± 3.2757*
Experts	0.101 ± 0.0696*	0.116 ± 0.0596*	0.098 ± 0.0519*	14.747 ± 3.0808*	6.057 ± 1.5502*

*Statistically significant differences in a one-tailed *t* test ($P < .05$).
D = depth perception; P = path length; S = smoothness.



Results



Results

- Found differences in kinematic parameters between experts (trained 5 trials) and novices (trained 4 trials)
- Experts had significantly better motion smoothness along the y-axis for the dominant hand and all 3 axes for non-dominant hand



Relevance to our study

- Team developed a novel approach to use magnetic fields to measure the movement of the tip of an instrument during a surgical procedure and provide quantitative feedback
- Possible next step would be to actually do a simulated surgery on soft tissue (what we are trying to accomplish)
- If we could integrate an objective measure in our study, it would make our final deliverable much more crisp.



References

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Questions

