

**ROBOVIS 2024**

4<sup>th</sup> International Conference on Robotics, Computer Vision and  
Intelligent Systems

Rome, Italy

25 - 27 February, 2024

# There's Plenty of Room at the Bottom: Opportunities and Challenges for Microrobotics

Arianna Menciassi, PhD  
Scuola Superiore Sant'Anna, Pisa (Italy)

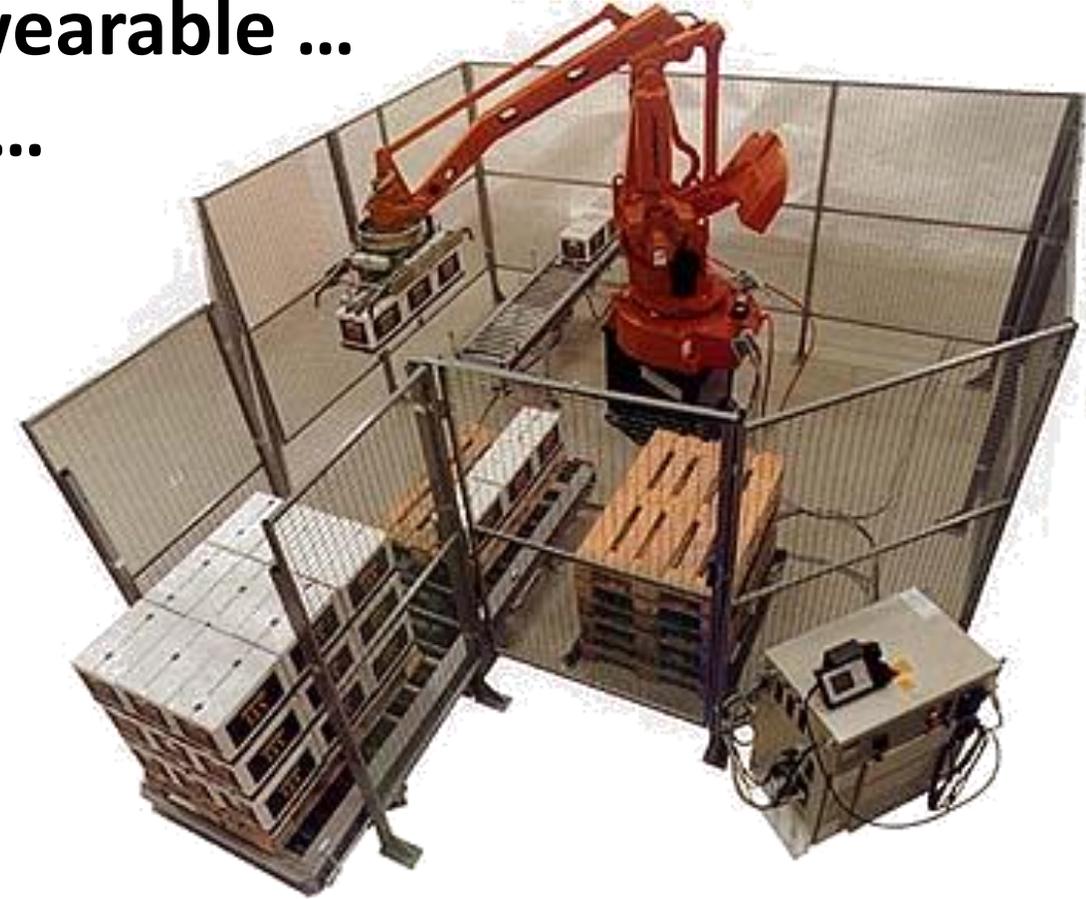
Roma, February 26th 2024



**Robots are more and more outside the cages...  
they can be wearable ...  
and ...**



Dustbot, robot for urban hygiene  
(SSSA)



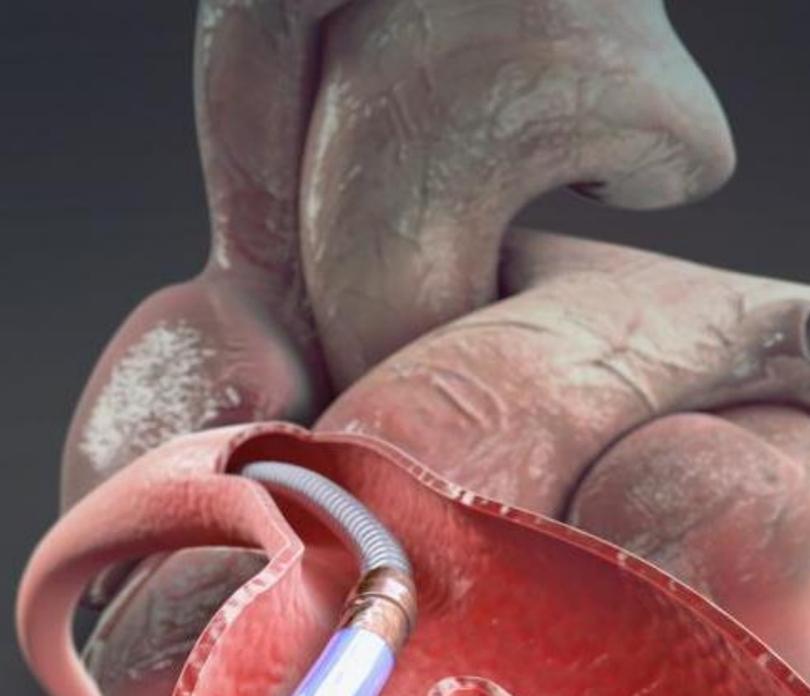
**... robots can work inside the body  
for chronic and acute interventions**

MATE, wearable robot for  
motion augmentation  
(IUVO-COMAU)





**ROBOTS ENTERING  
THE BODY WITH THEIR  
TIPS**



**ROBOTS NAVIGATING  
THE BODY**



**ROBOTS RESIDING IN THE  
BODY**



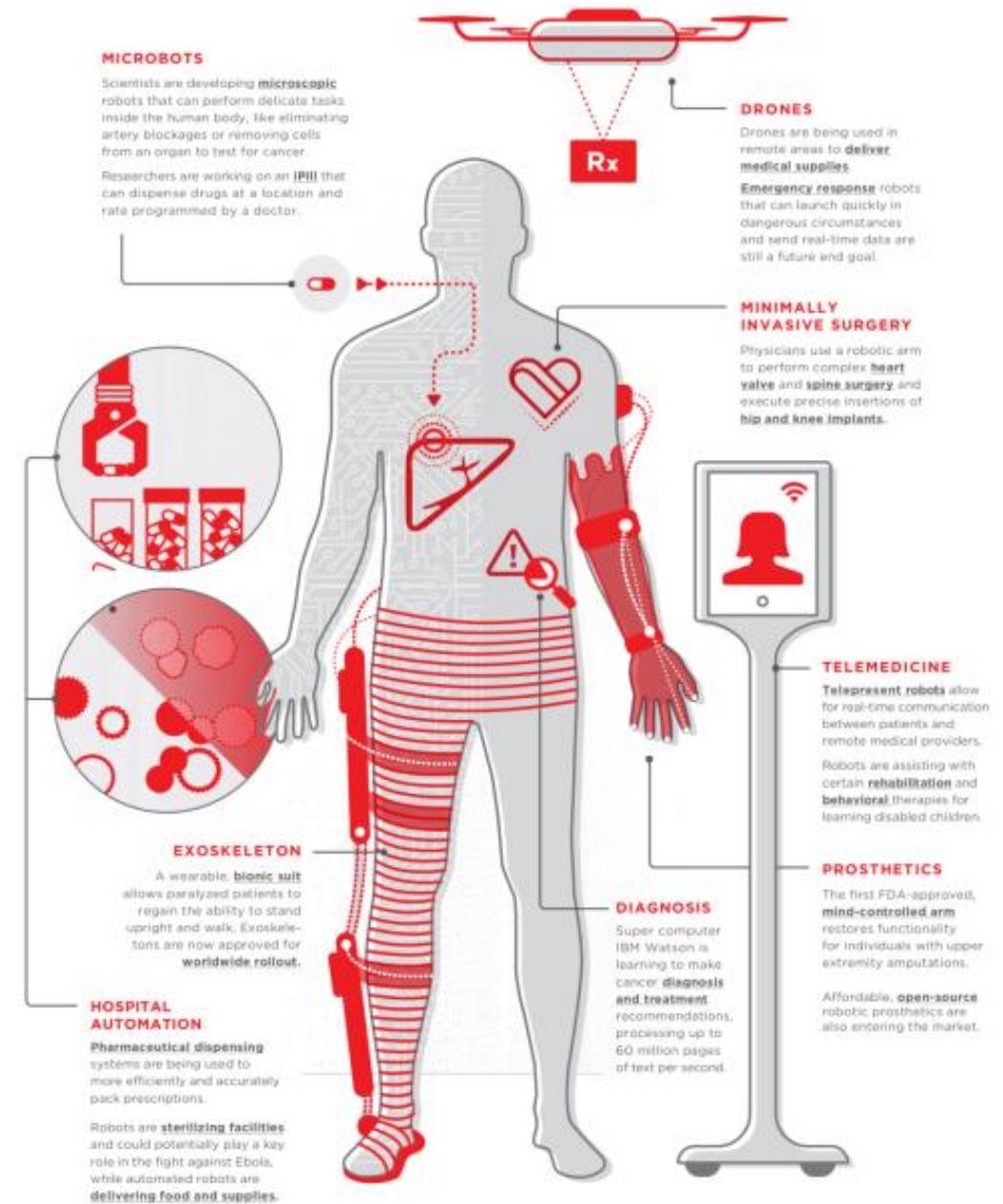
# Health and Robotics ...

No longer science fiction, robotics has emerged as a leading alternative for many healthcare applications



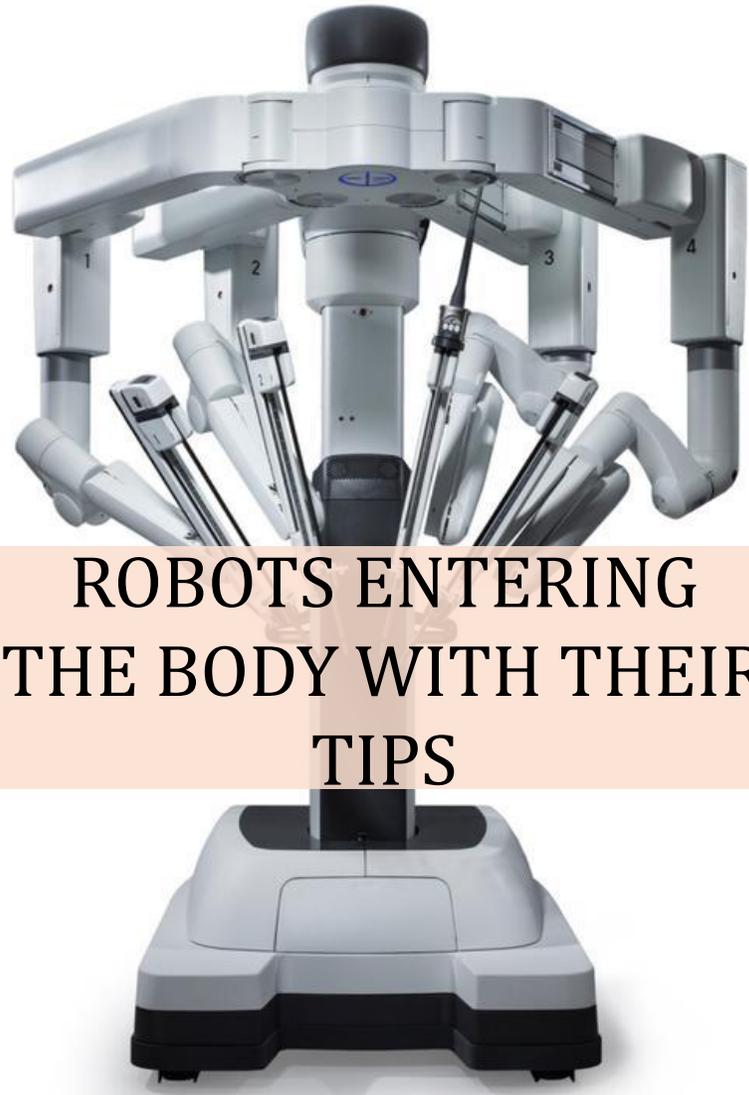
Dr. Daniel Kraft - "What's next in healthcare?"

Daniel Kraft is a physician-scientist, inventor and innovator. He is chair of the Medicine track for Singularity University and Executive Director for FutureMed, a program which explores convergent, exponentially developing technologies and their potential in biomedicine and healthcare



Worrell Infographic, vol. 1, no. 3, figure 01, 2015

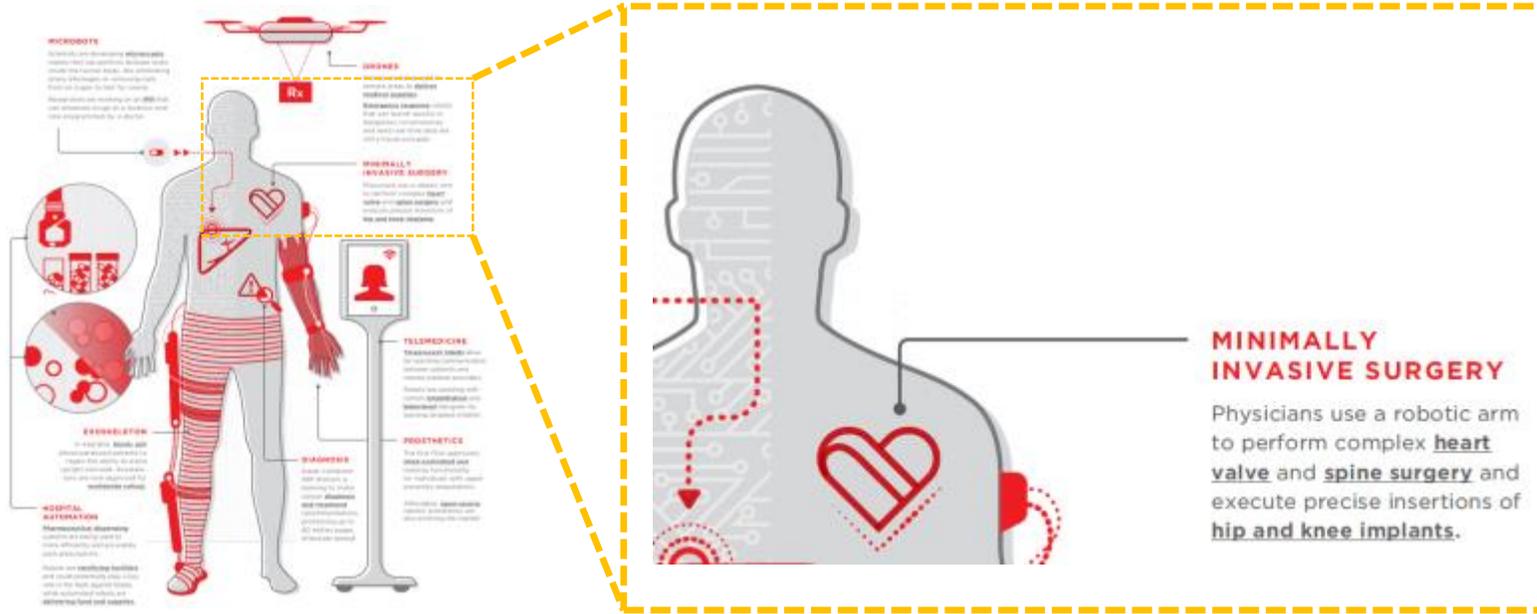




**ROBOTS ENTERING  
THE BODY WITH THEIR  
TIPS**



# Robotics and Minimally Invasive surgery



Catherine Mohr - Intuitive Surgical

Mazor's New Renaissance Robotic Spinal Surgery System



Robotic technologies to make surgery more accurate and less operator depending, to reach unreachable areas of the body without scars...



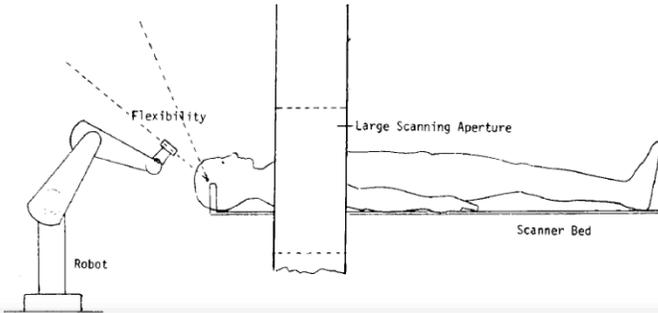
# The beginning: Industrial Robotics meets Clinical Imaging

IEEE TRANSACTIONS ON BIOMEDICAL ENGINEERING, VOL. 35, NO. 2, FEBRUARY 1988

153

## A Robot with Improved Absolute Positioning Accuracy for CT Guided Stereotactic Brain Surgery

YIK SAN KWOH, MEMBER, IEEE, JOAHIN HOU, EDMOND A. JONCKHEERE, SENIOR MEMBER, IEEE, AND SAMAD HAYATI



**Computer Assisted Surgery – CAS**  
**Robotic Assisted Surgery – RAS**  
**Computer Integrated Surgery - CIS**

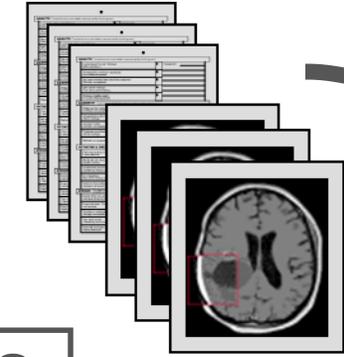


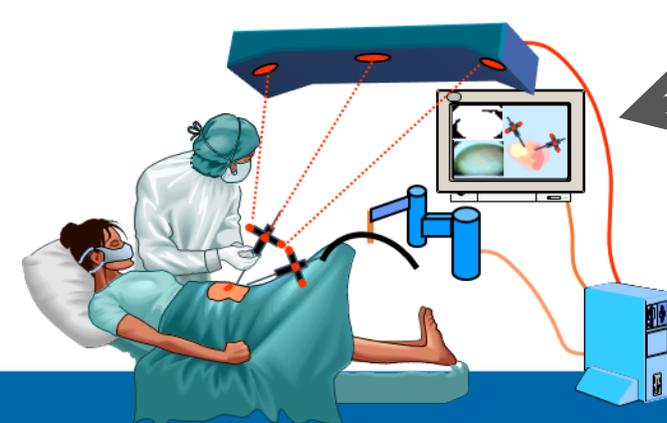
Image Acquisition

Planning in Virtual Environment

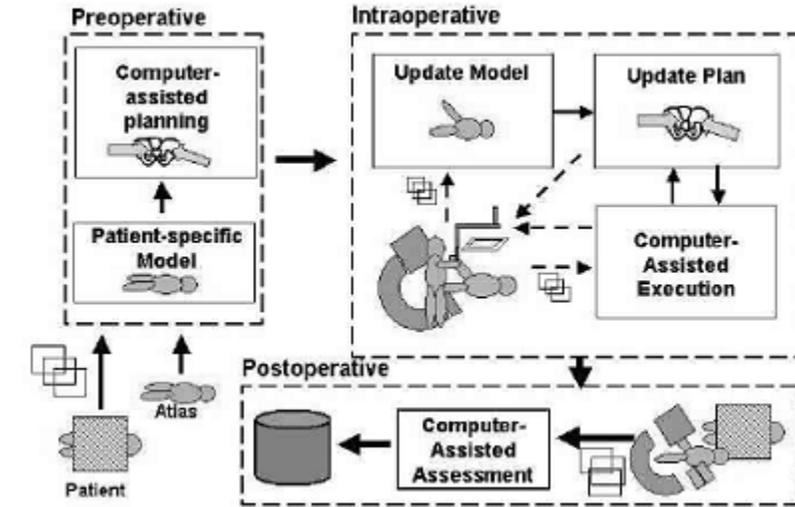
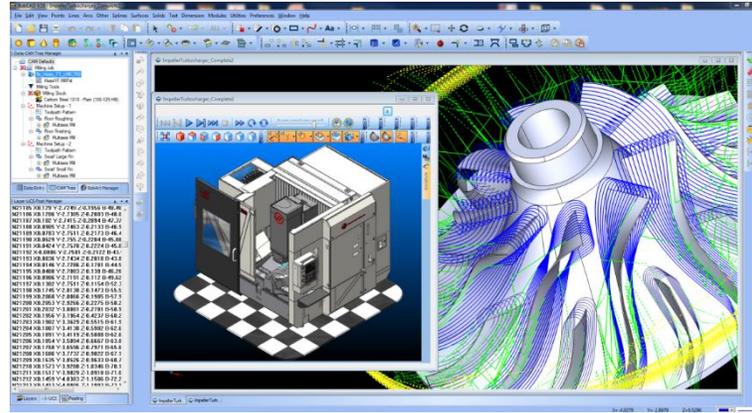


**Abstract**—In this paper, we describe how a Unimation Puma 200 robot, properly interfaced with a CT scanner and with a probe guide mounted at its end effector, can be used for CT-guided brain tumor biopsies. Once the target is identified on the CT picture, a simple command allows the robot to move to a position such that the end effector probe guide points towards the target. This results in a procedure faster than one with a manually adjustable frame. But probably the most important advantage, as we show in this paper, is the improved accuracy that can be reached by proper calibration of the robot.

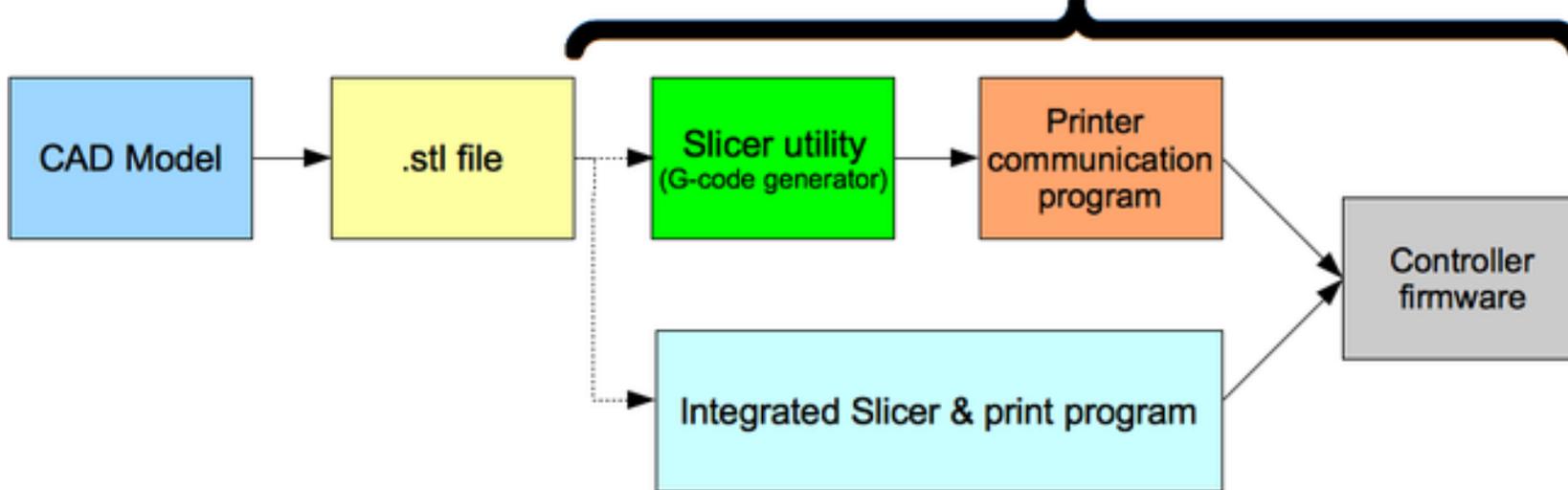
Computer-assisted surgery



# Medical Images make possible the typical CAD-CAM process ... in surgery



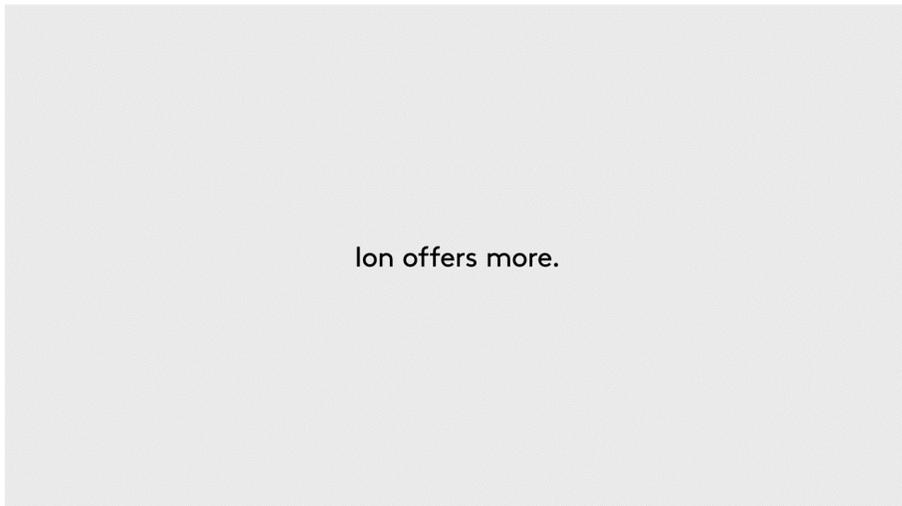
## CAM (Computer Aided Manufacturing) toolchain



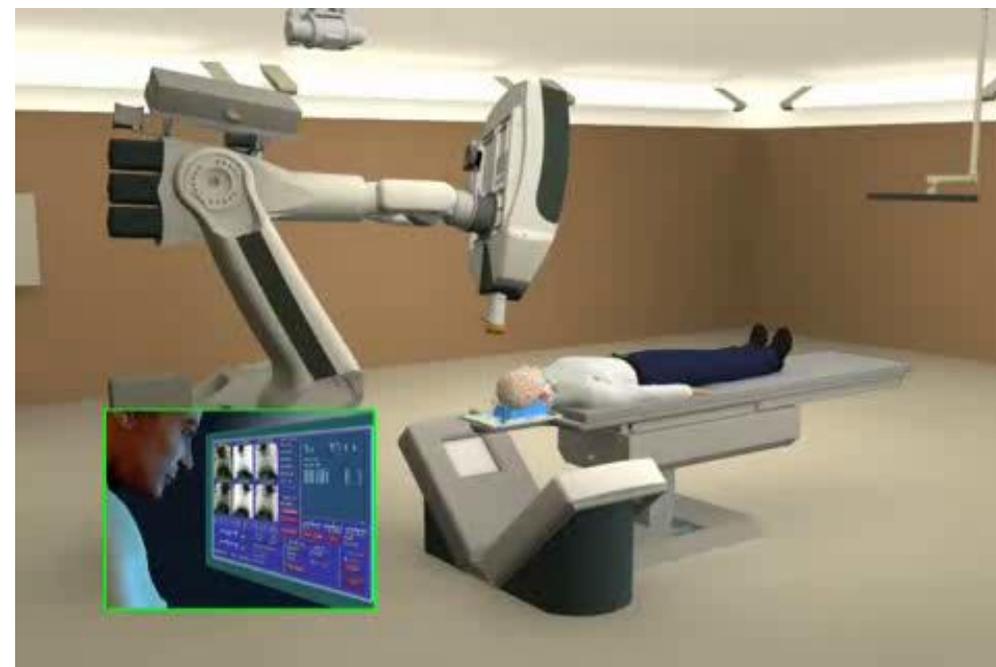
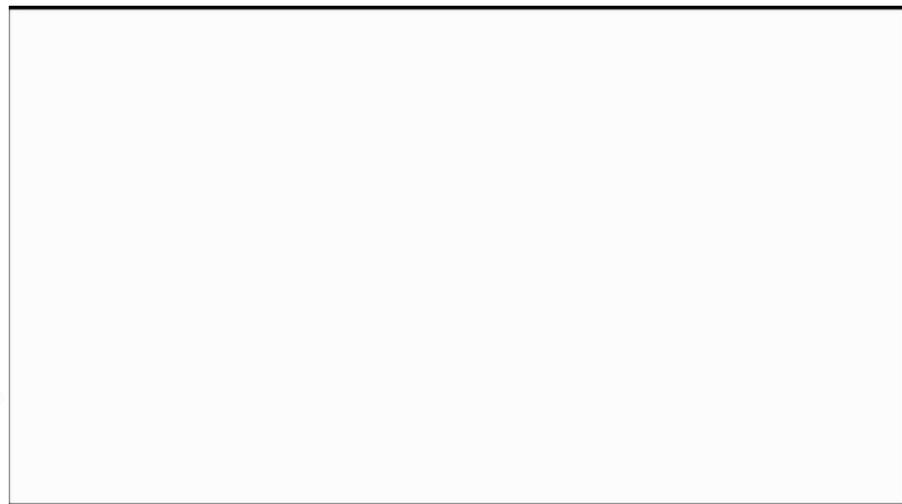
# The framework today



INTUITIVE™



Ion offers more.



# Two exercises in the last two years: The first one...

SCIENCE ROBOTICS | REVIEW

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## MEDICAL ROBOTS

### A decade retrospective of medical robotics research from 2010 to 2020

Pierre E. Dupont<sup>1\*</sup>, Bradley J. Nelson<sup>2</sup>, Michael Goldfarb<sup>3</sup>, Blake Hannaford<sup>4</sup>, Arianna Menciassi<sup>5</sup>, Marcia K. O'Malley<sup>6</sup>, Nabil Simaan<sup>3</sup>, Pietro Valdastri<sup>7</sup>, Guang-Zhong Yang<sup>8</sup>

Robotics is a forward-looking discipline. Attention is focused on identifying the next grand challenges. In an applied field such as medical robotics, however, it is important to plan the future based on a clear understanding of what the research community has recently accomplished and where this work stands with respect to clinical needs and commercialization. This Review article identifies and analyzes the eight key research themes in medical robotics over the past decade. These thematic areas were identified using search criteria that identified the most highly cited papers of the decade. Our goal for this Review article is to provide an accessible way for readers to quickly appreciate some of the most exciting accomplishments in medical robotics over the past decade; for this reason, we have focused only on a small number of seminal papers in each thematic area. We hope that this article serves to foster an entrepreneurial spirit in researchers to reduce the widening gap between research and translation.



# Two exercises in the last two years: The second one...

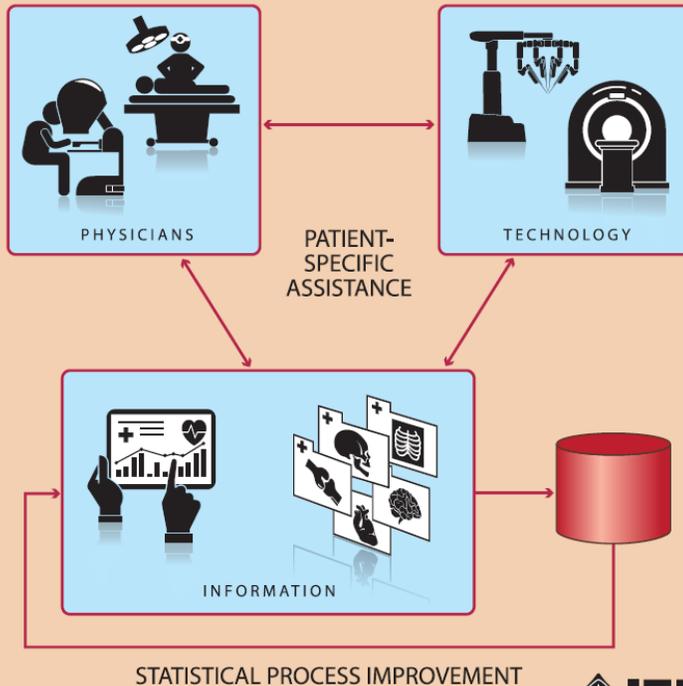
July 2022 | Volume 110 | Number 7

# Proceedings OF THE IEEE

SPECIAL ISSUE

SPECIAL ISSUE

## Surgical Robotics and Computer-Integrated Interventional Medicine



### SURGICAL ROBOTICS AND COMPUTER-INTEGRATED INTERVENTIONAL MEDICINE

Edited by R. H. Taylor, N. Simaan, A. Menciassi, and G.-Z. Yang

#### 835 Robot-Assisted Minimally Invasive Surgery—Surgical Robotics in the Data Age

By T. Haidegger, S. Speidel, D. Stoyanov, and R. M. Satava

|INVITED PAPER| This article summarizes the state of the art in robot-assisted minimally invasive surgery and provides an overview of key emerging technologies associated with next-generation systems.

#### 847 Continuum Robots for Medical Interventions

By P. E. Dupont, N. Simaan, H. Choset, and C. Rucker

|INVITED PAPER| This article provides a unified summary of the state of the art of continuum robot architectures with respect to design for specific clinical applications.

#### 871 Soft Robot-Assisted Minimally Invasive Surgery and Interventions: Advances and Outlook

By K.-W. Kwok, H. Wurdemann, A. Arezzo, A. Menciassi, and K. Althoefner

|INVITED PAPER| This article provides an in-depth overview of recent progress in soft robotics for surgery and outlines remaining challenges in the development of soft robotics technologies for in-body operation, such as materials selection, tunable stiffness, soft design paradigms, and control issues.

#### 893 Robotic Assistance for Intraocular Microsurgery: Challenges and Perspectives

By I. i. Iordachita, M. D. de Smet, G. Naus, M. Mitsuishi, and C. N. Riviere

|INVITED PAPER| This article analyzes the advances in retinal robotic microsurgery, its current drawbacks and limitations, as well as the possible new directions to expand retinal microsurgery to techniques currently beyond human boundaries or infeasible without robotics.

#### 909 Advancement of Flexible Robot Technologies for Endoluminal Surgeries

By J. Kim, M. de Mathelin, K. Ikuta, and D.-S. Kwon

|INVITED PAPER| This article covers the key technical issues in flexible surgical robotics, such as manipulator design, modeling, and control, and it introduces emerging flexible technologies organized according to their target application in the endoluminal surgical field.

#### 932 Image-Guided Interventional Robotics: Lost in Translation?

By G. Fichtinger, J. Troccaz, and T. Haidegger

|INVITED PAPER| This article provides an overview of the state of the art in image-guide surgical systems, together with a discussion of key issues for system developers in the translation of scientific research to clinical application.

#### 951 Robot-Assisted Medical Imaging: A Review

By S. E. Salcudean, H. Moradi, D. G. Black, and N. Navab

|INVITED PAPER| This article provides an overview of the current state of the art and potential research directions for robotic imaging systems, with special emphasis on instances in which the accurate placement and trajectory control of the imaging system using a robot are of paramount importance.

#### 968 State of the Art and Future Opportunities in MRI-Guided Robot-Assisted Surgery and Interventions

By H. Su, K.-W. Kwok, K. Cleary, I. Iordachita, M. C. Cavusoglu, J. P. Desai, and G. S. Fischer

|INVITED PAPER| This article describes challenges and history of robotic systems operating in an MRI environment, and outlines promising clinical applications and associated state-of-the-art MRI-compatible robotic systems and technology.

#### 993 Concepts and Trends in Autonomy for Robot-Assisted Surgery

By P. Fiorini, K. Y. Goldberg, Y. Liu, and R. H. Taylor

|INVITED PAPER| This article provides a unified summary of the state of the art of the continuum robot architectures with respect to design for specific clinical applications and illustrates these themes with examples from current research.

#### 1012 Haptic Feedback and Force-Based Teleoperation in Surgical Robotics

By R. V. Patel, S. F. Atashzar, and M. Tavakoli

|INVITED PAPER| This article examines key challenges associated with the application of haptic feedback and force-based teleoperation for surgical robots, such as instrumentation, fidelity, stability, and force-reflection modalities.

#### 1028 Magnetically Actuated Medical Robots: An *in vivo* Perspective

By B. J. Nelson, S. Gervasoni, P. W. Y. Chiu, L. Zhang, and A. Zemmar

|INVITED PAPER| This article describes magnetically guided medical robots, both tethered and untethered, working at different scales and it analyses the *in vivo* translation with increased control and safety.

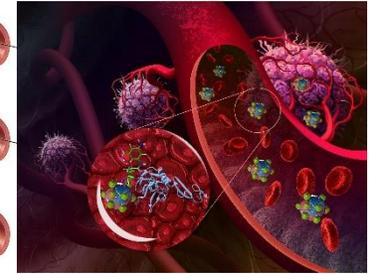
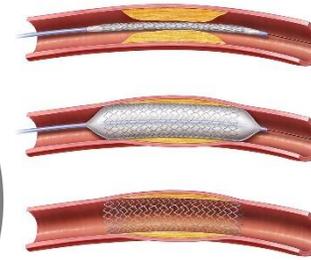
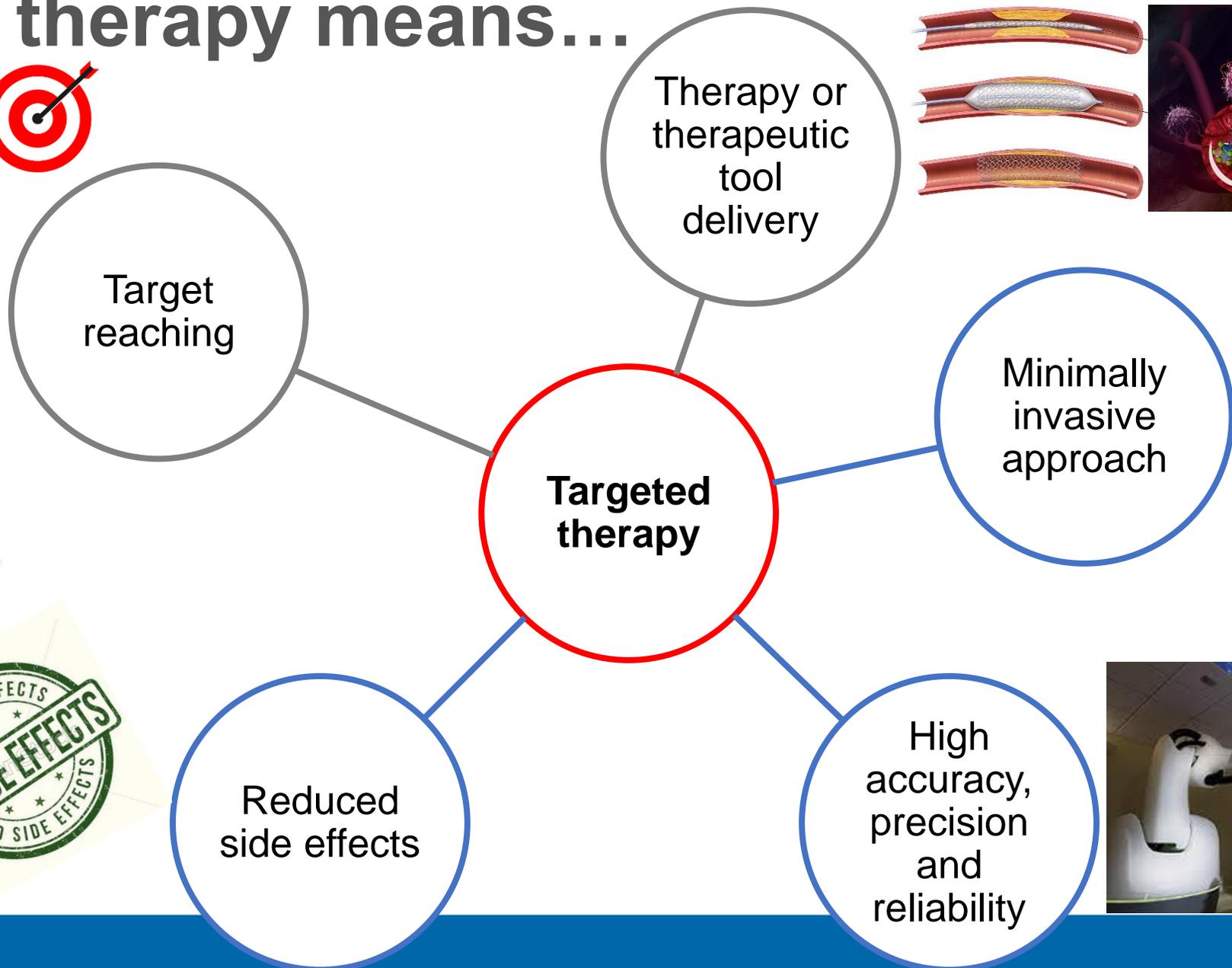
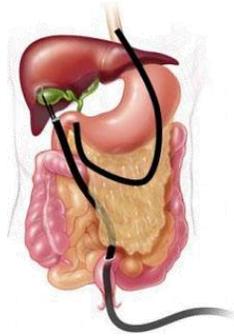
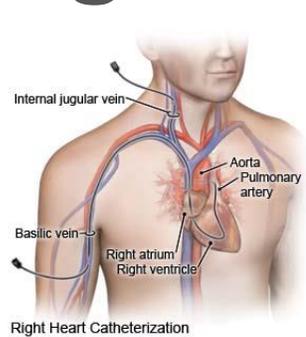


# Main challenges and main needs

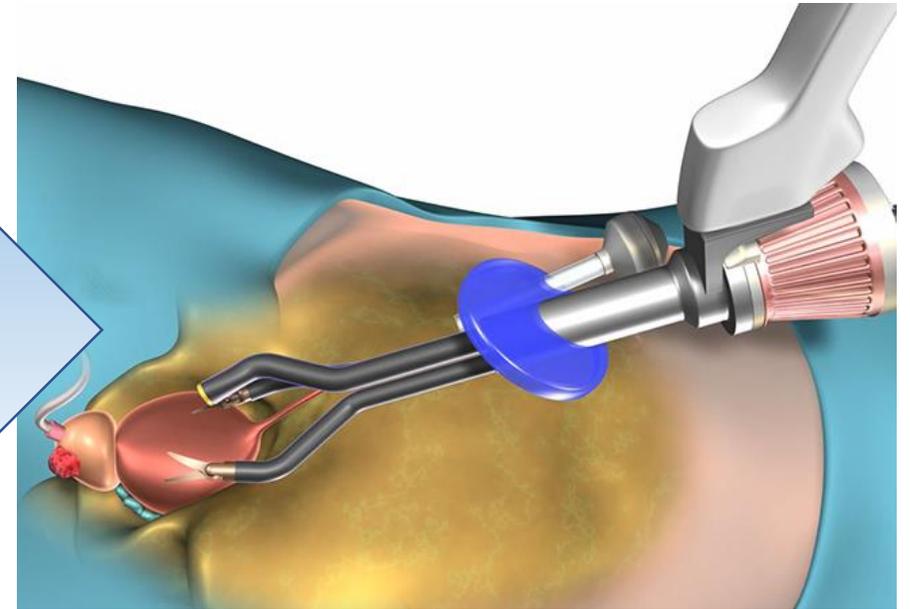
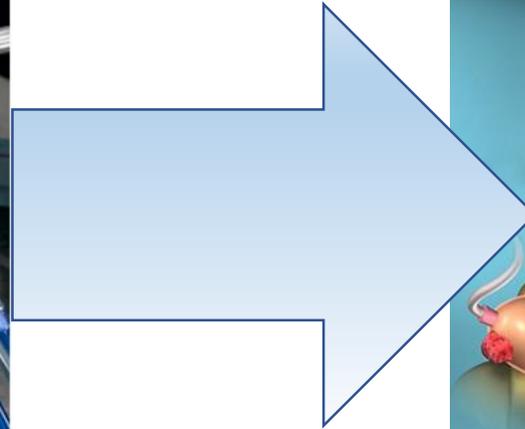
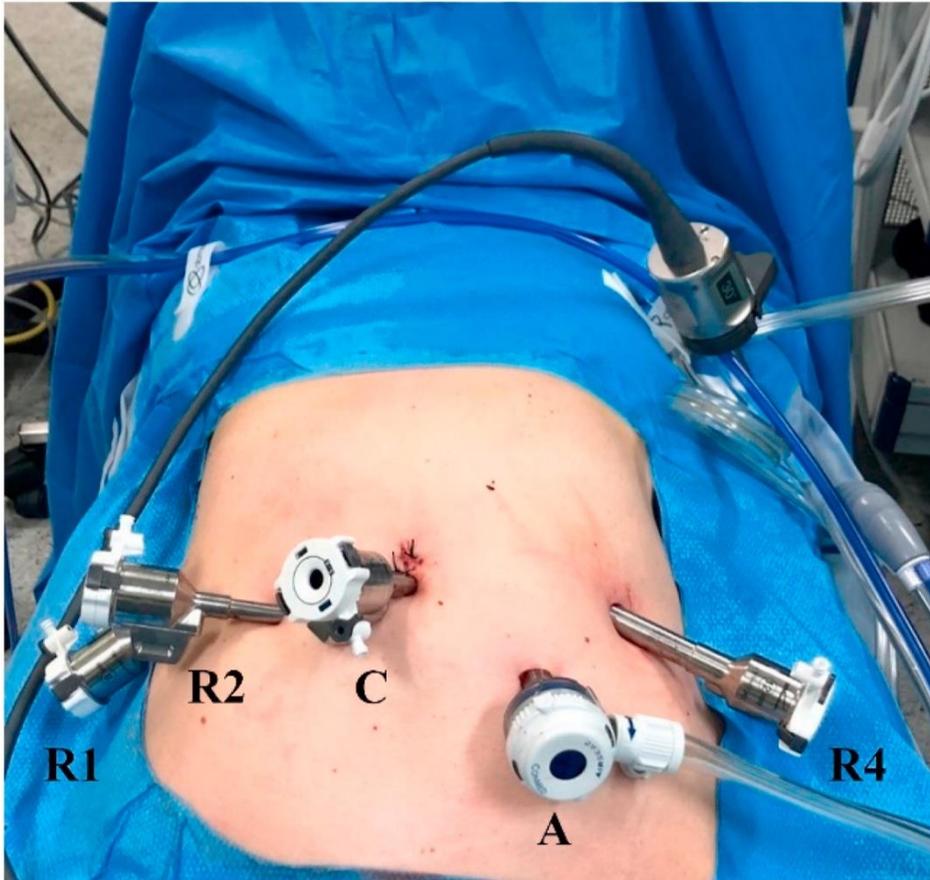
- Being targeted, i.e. helping the surgeon to reach «unreachable» areas – *targeted* therapy
- Bringing dexterity inside the body with minimal access and high performance actuators
- Being safe in interaction
- Moving towards scarless operations



# Targeted therapy means...



# The problem: reducing the invasiveness, augmenting the dexterity at the distal part

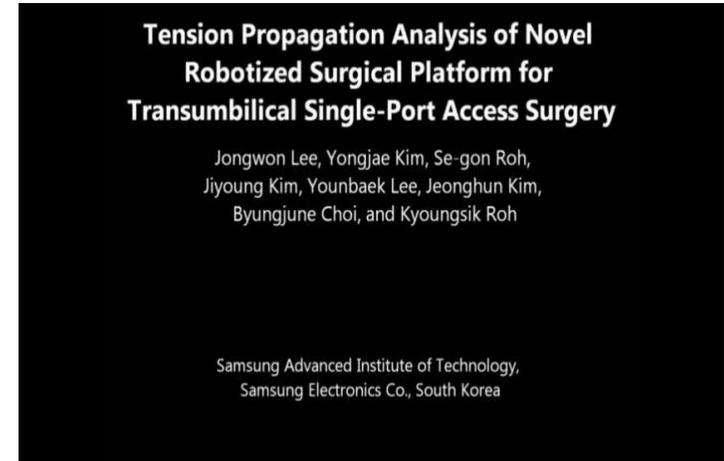
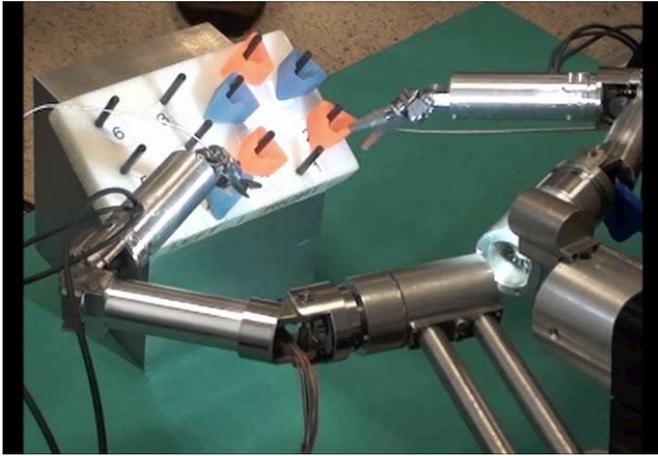


**The problem: reducing the invasiveness,  
augmenting the dexterity in the distal part**

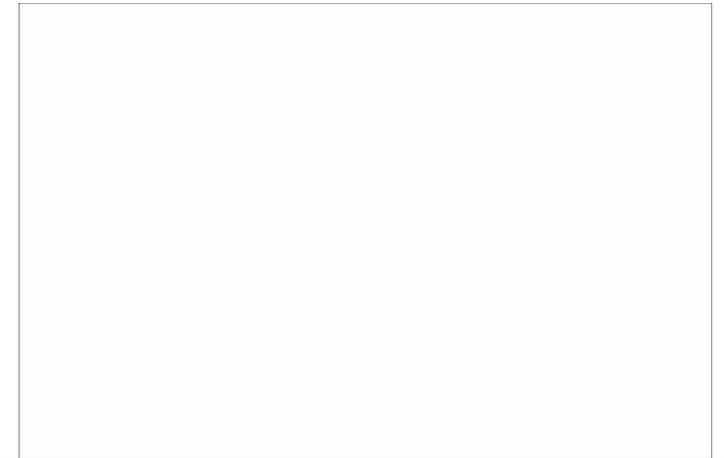
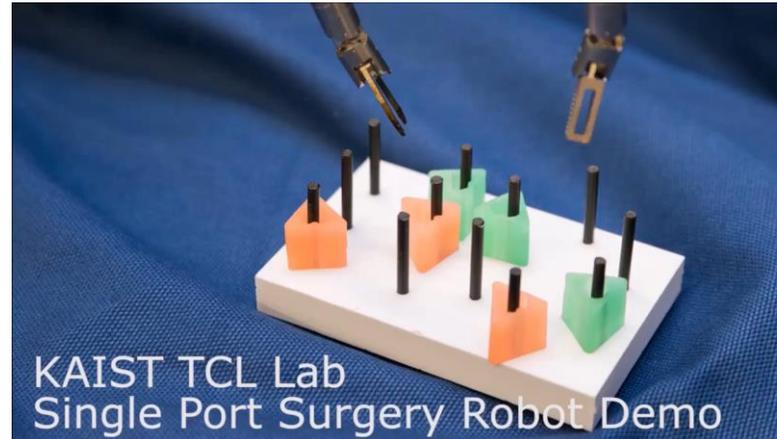


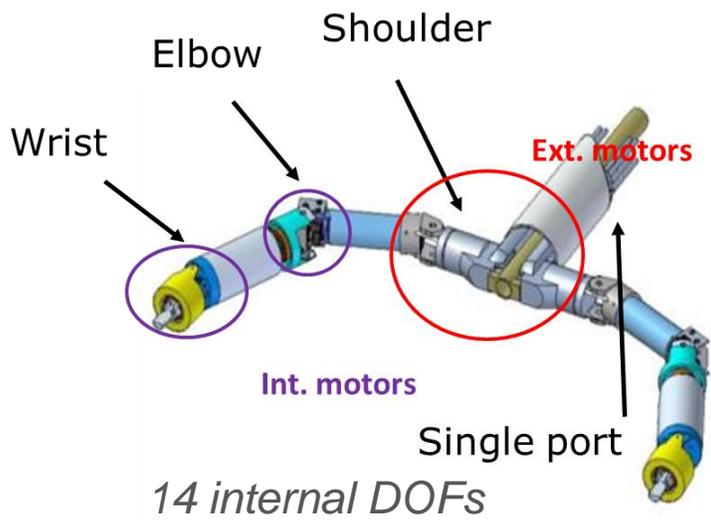
# The problem: reducing the invasiveness, augmenting the dexterity in the distal part

## SINGLE-PORT ROBOTIC SYSTEMS

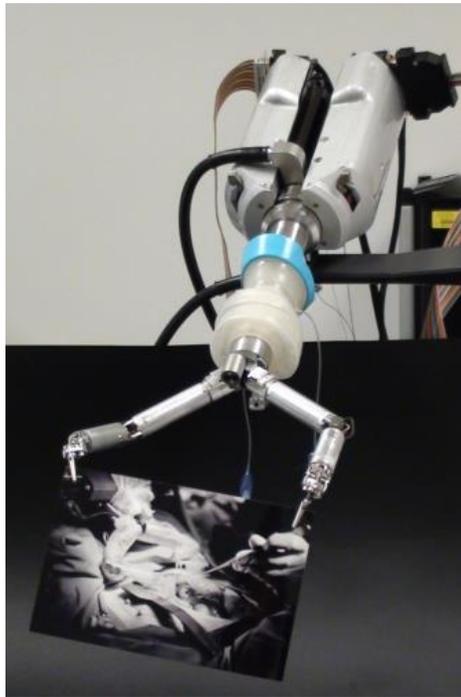


University of Nebraska, USA





**Single port modular surgery:  
how to deploy  
many degrees of  
freedom through  
a small hole**



# Multiarticulated platform for Minimally Invasive Aortic Valve Replacement

## ValveTech: a Novel Robotic Approach for Minimally Invasive Aortic Valve Replacement

Izadyar Tamadon<sup>1</sup>, Virginia Mamone<sup>2</sup>, Yu Huan<sup>1</sup>, Sara Condino<sup>2</sup>, Claudio Quaglia<sup>1</sup>,  
Vincenzo Ferrari<sup>2</sup>, Mauro Ferrari<sup>2</sup>, Arianna Menciassi<sup>1</sup>

## Demo Movie

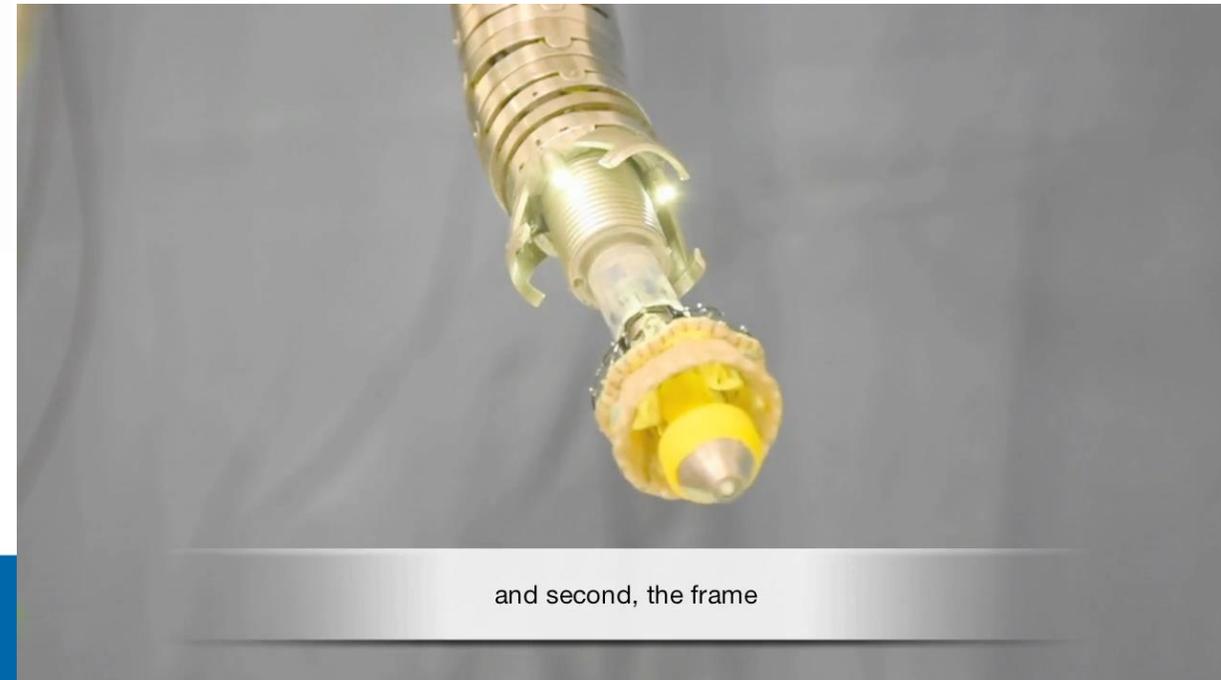


Scuola Superiore  
Sant'Anna

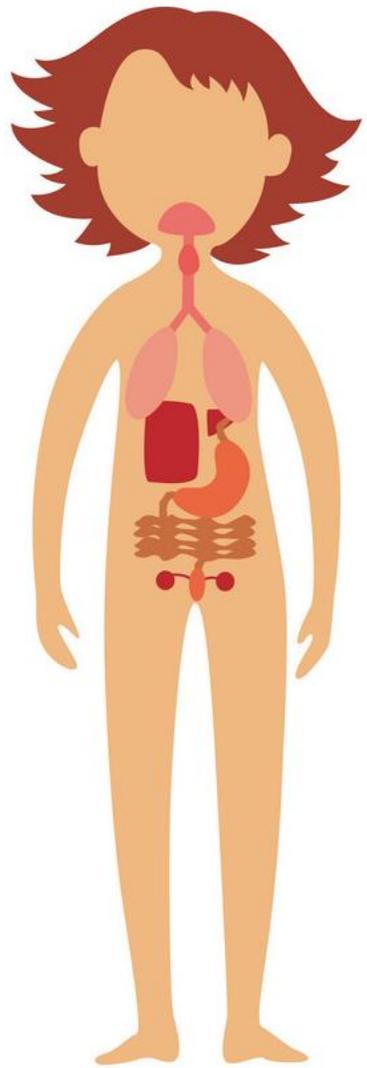


<sup>1</sup>The BioRobotics Institute, Scuola Superiore Sant'Anna, Pontedera, Pisa, Italy.

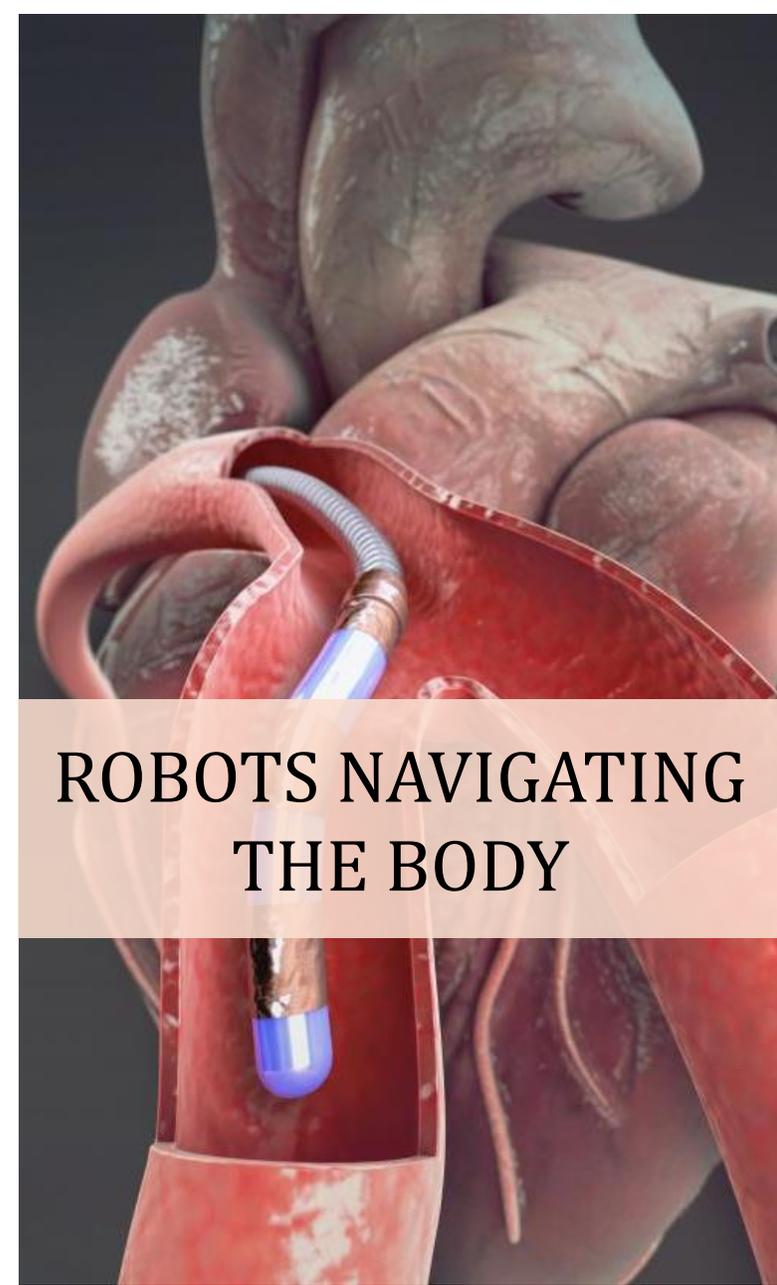
<sup>2</sup>EndoCAS Center for Computer-Assisted Surgery, Università di Pisa, Italy.



and second, the frame



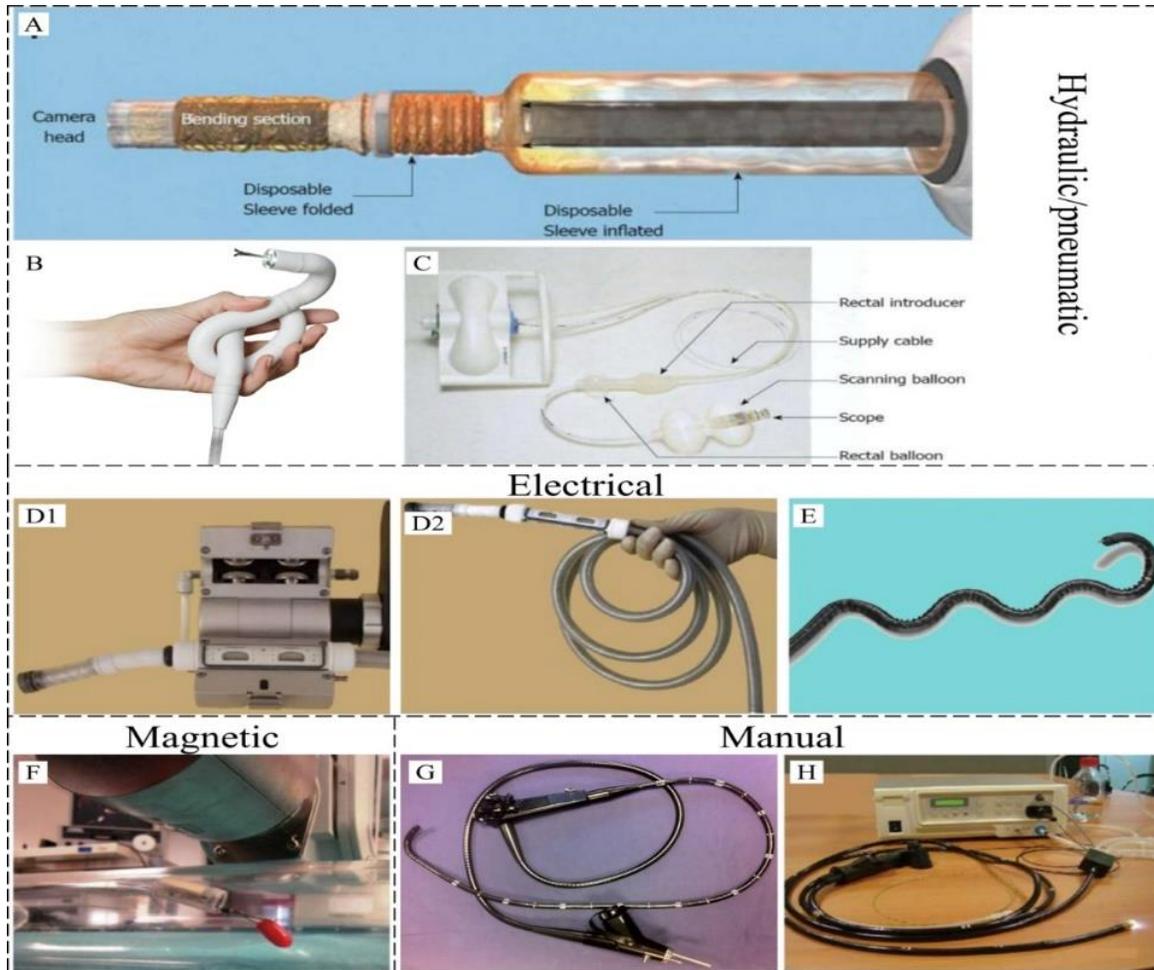
**The easiest navigation environment without incisions  
- Miniature robots navigating in the GI tract...**



**ROBOTS NAVIGATING  
THE BODY**



# Smart flexible endoscopes

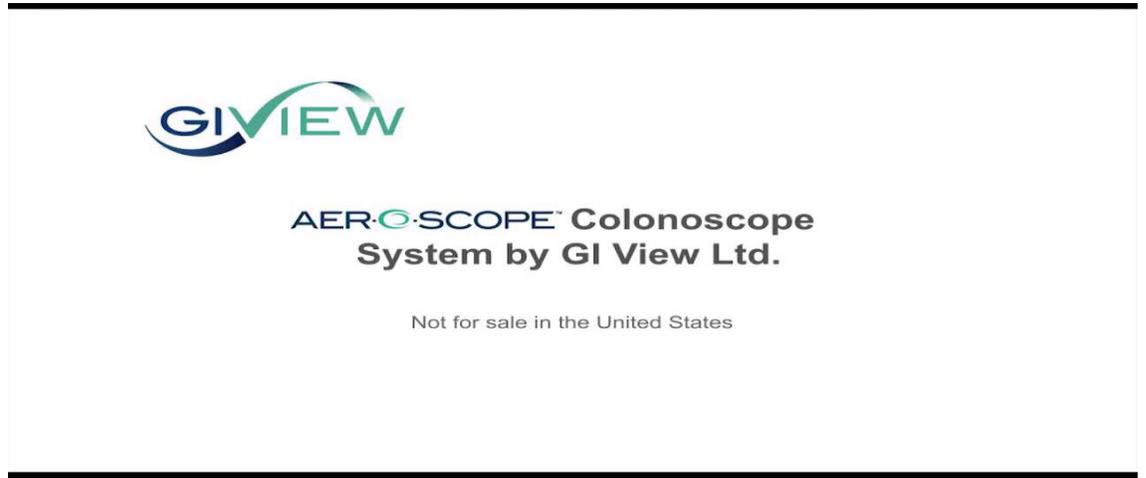


Hydraulic/pneumatic

Electrical

Magnetic

Manual



Aer-O-Scope



Invendo™ endoscope



# An endoscope with biomimetic locomotion (2000-2010)

ENDOTICS® SYSTEM  
DISPOSABLE ROBOTIC PROBE

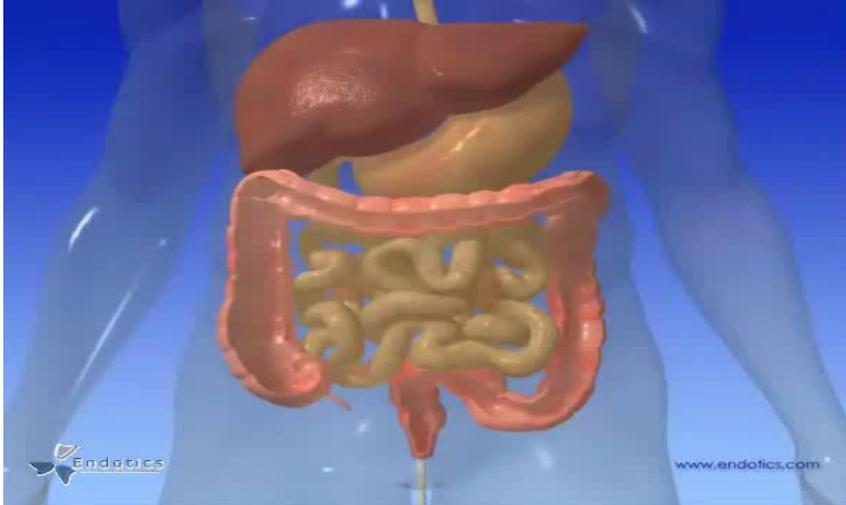


EXTREME FLEXIBILITY

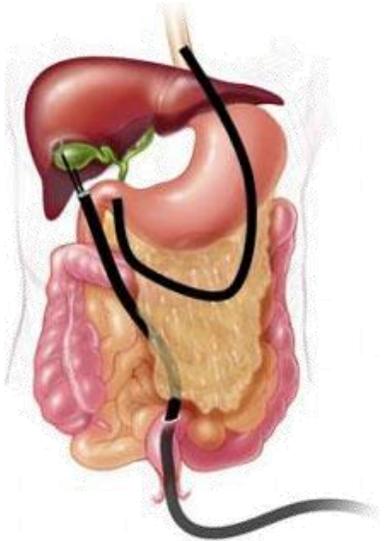
FITTING COLON CURVES

NO MESENTERIES STRETCHING

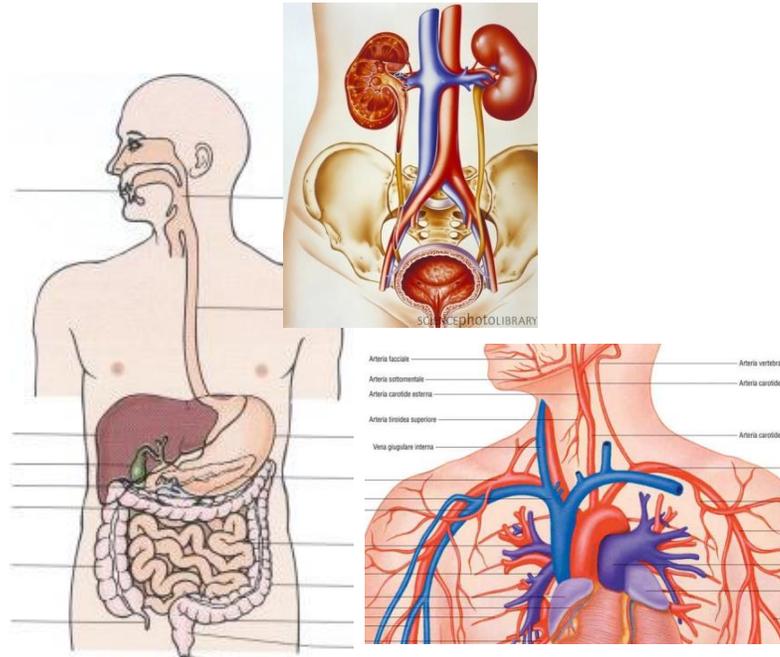
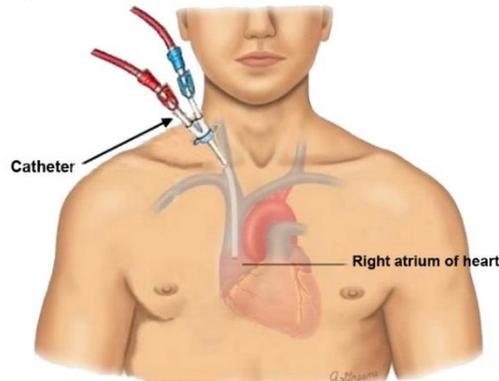
COMFORT  
FOR PATIENTS  
FOR OPERATORS



# Endoscopes and surgical tools without tails... the trend to capsule-like robots



Flexibility of traditional wired devices limits access to some target areas (i.e. limitation to targeted therapy)



Small diameter and remote districts can be reached **only by wireless or softly tethered devices**

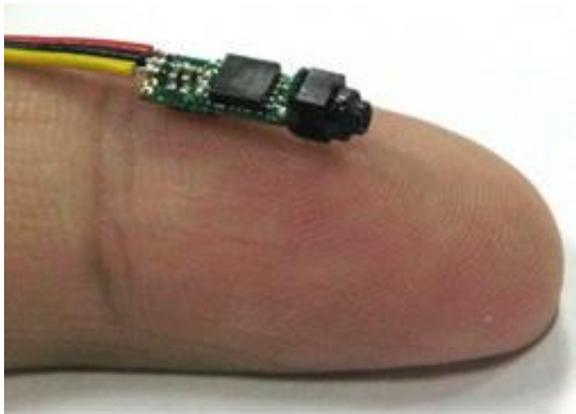


# The idea of bringing therapeutic and advanced diagnostic solutions where they are needed: the endoscopic capsule

Available wireless capsules: visual investigation of normally not explored areas



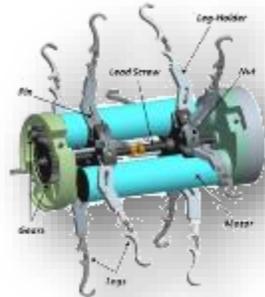
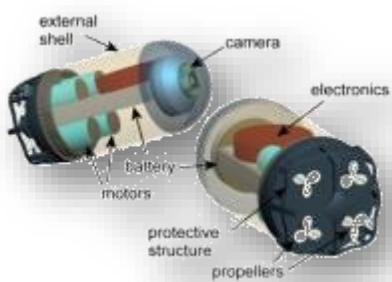
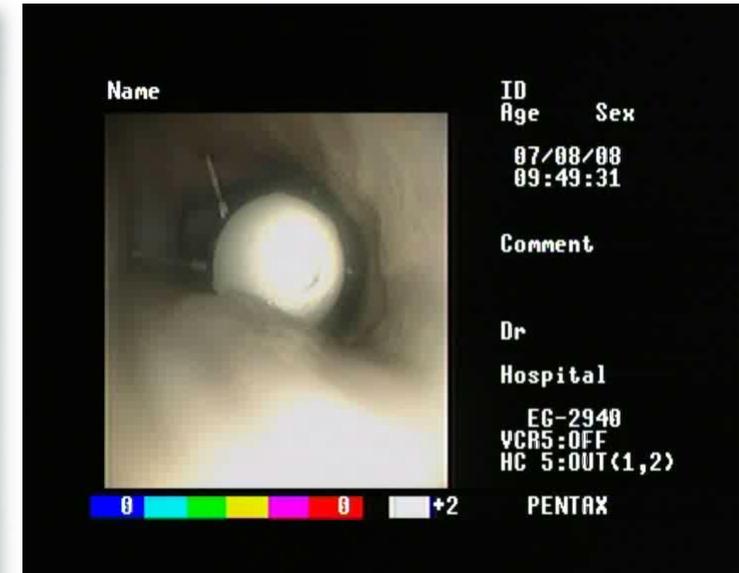
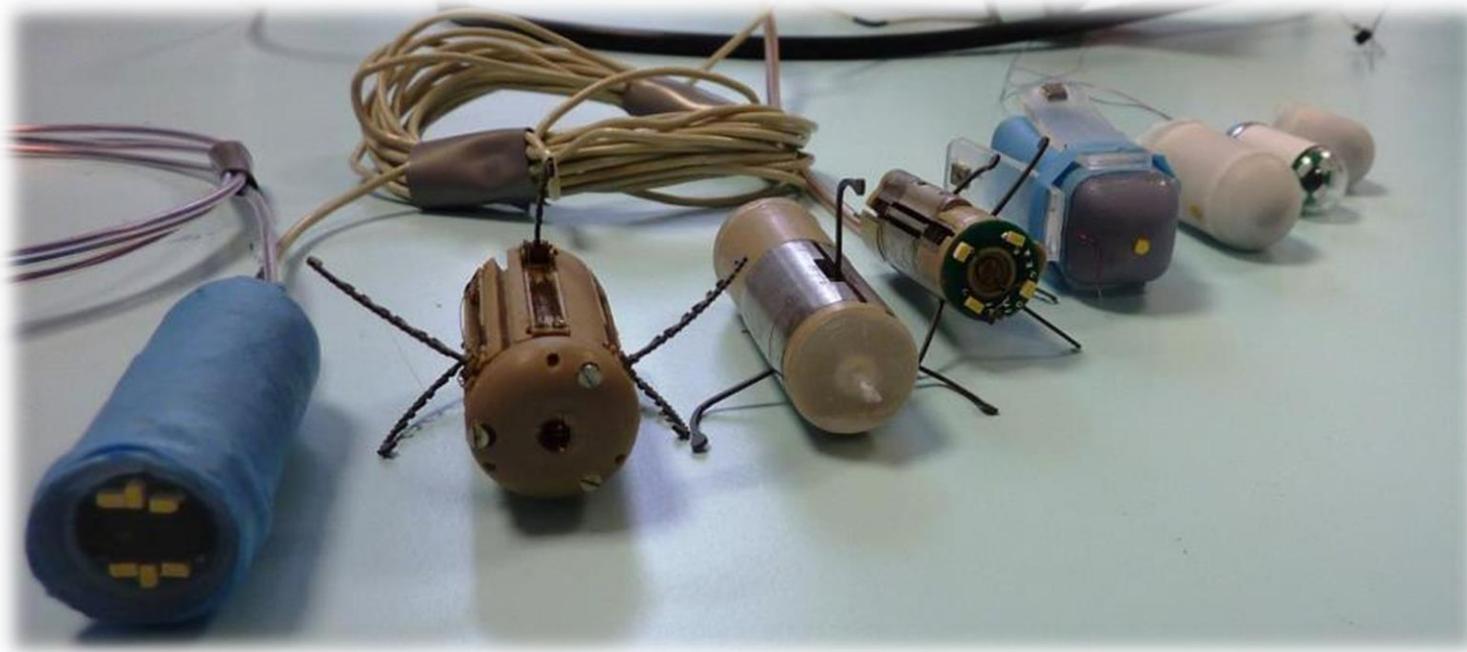
G. Iddan and P. Swain. History and development of capsule endoscopy. *Gastrointestinal Endoscopy*. 14: 1-9 (2004)



Active/teleoperated locomotion for giving “legs” to advanced diagnostic and therapeutic solutions



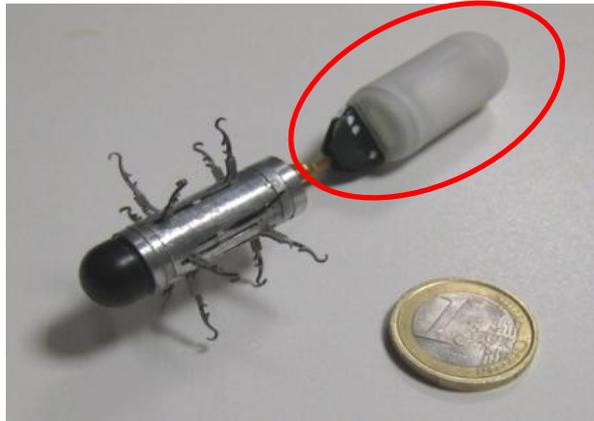
# ACTIVE capsules with on-board PROPULSION



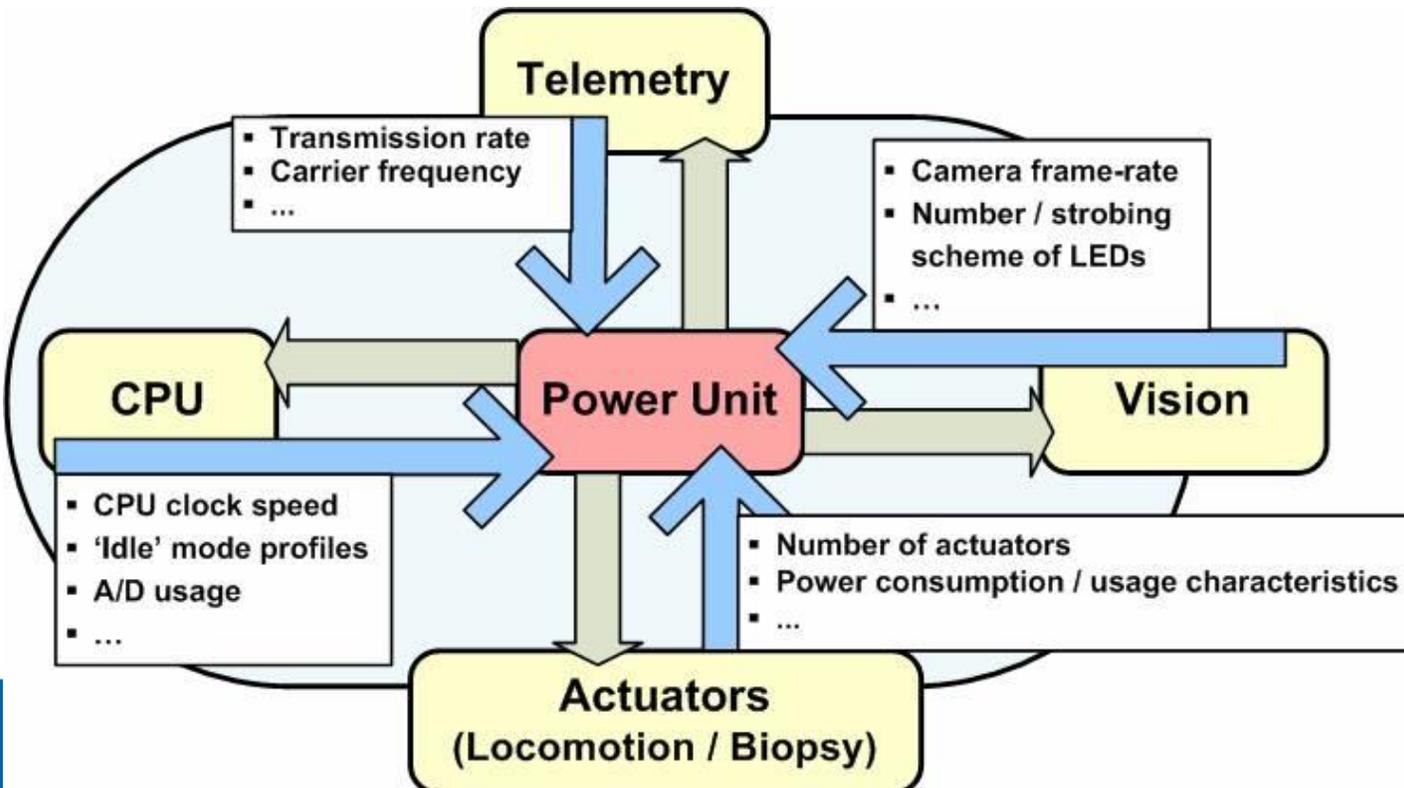
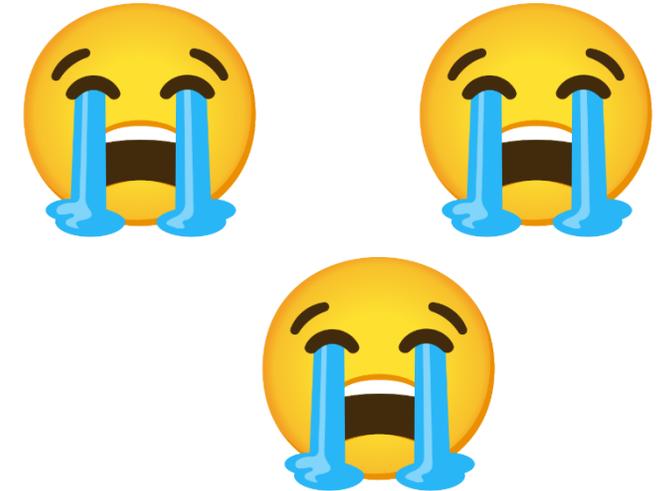
The EU VECTOR Project  
Korean IMC Project



# Bottleneck for active on-board propulsion



**POWER!**



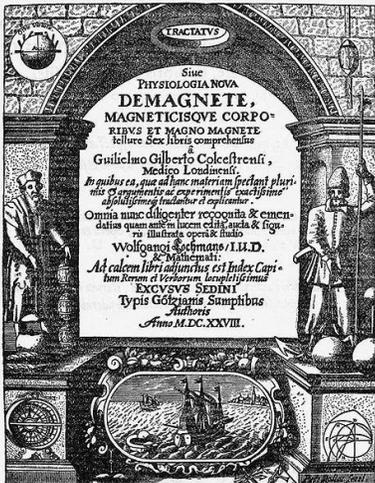
A legged capsule incorporating state-of-art batteries could only walk for less than 30 minutes along the GI tract



# Which solutions for a real scarless intervention and limiting actuation/powering problems at distal level?



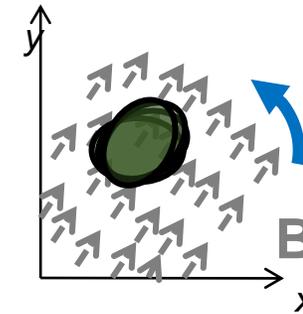
# Which solutions for a real scarless intervention and limiting actuation/powering problems at distal level?



**William Gilbert , 1600**  
De Magnete, Magneticisque Corporibus, et de Magno Magnete Tellure (*On the Magnet and Magnetic Bodies, and on That Great Magnet the Earth*)

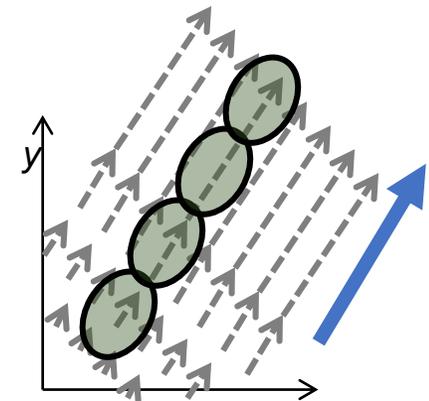
Magnetic endoscopic capsules, magnetic retraction systems, magnetic catheters, magnetic particles for drug delivery and drug targeting...

**Torque**



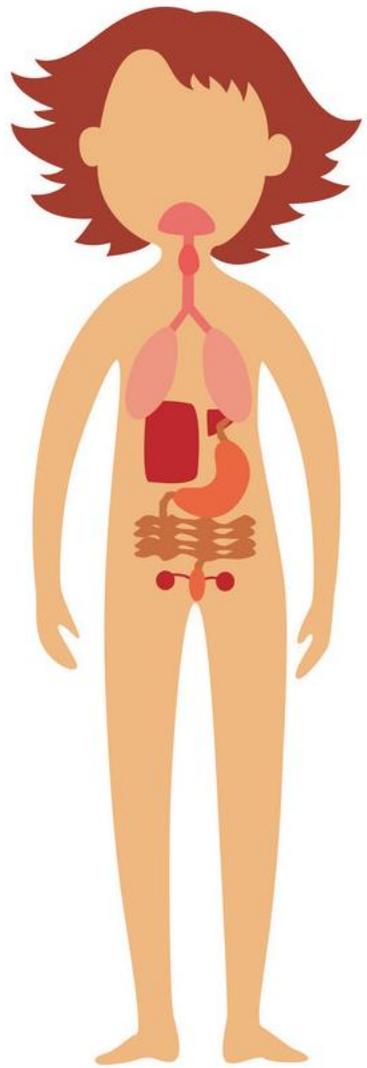
$$\vec{\tau} = V\vec{M} \times \vec{B}$$

**Force**

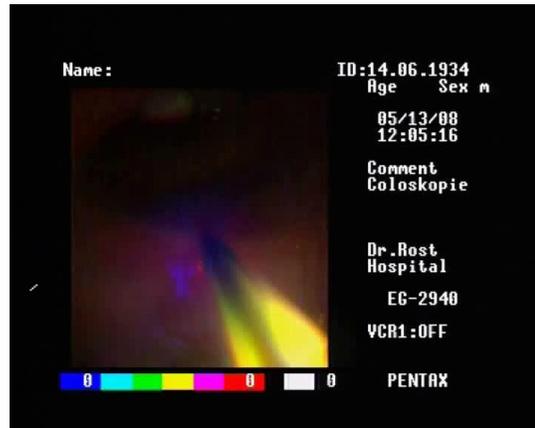
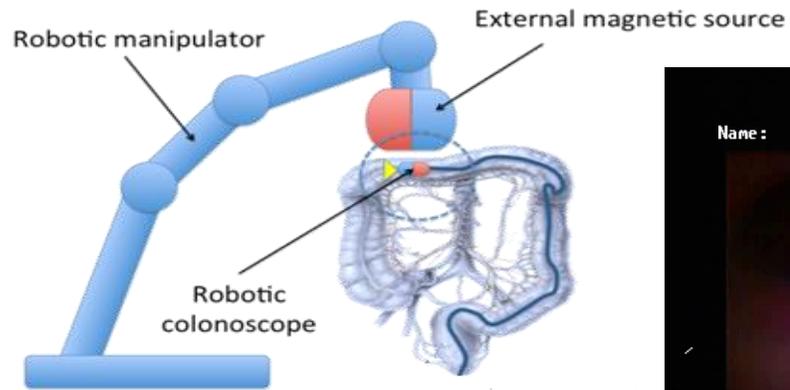


$$\vec{F} = V\nabla(\vec{M} \cdot \vec{B})$$

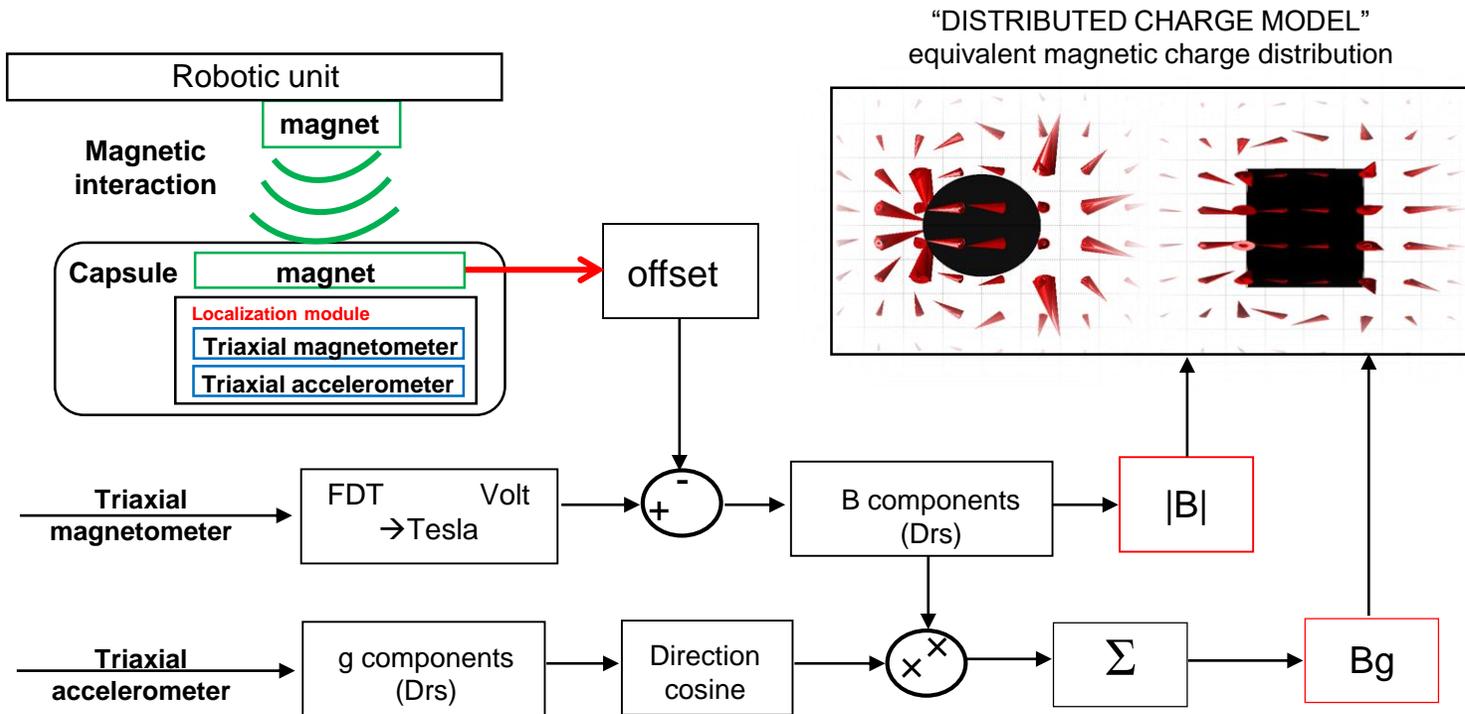
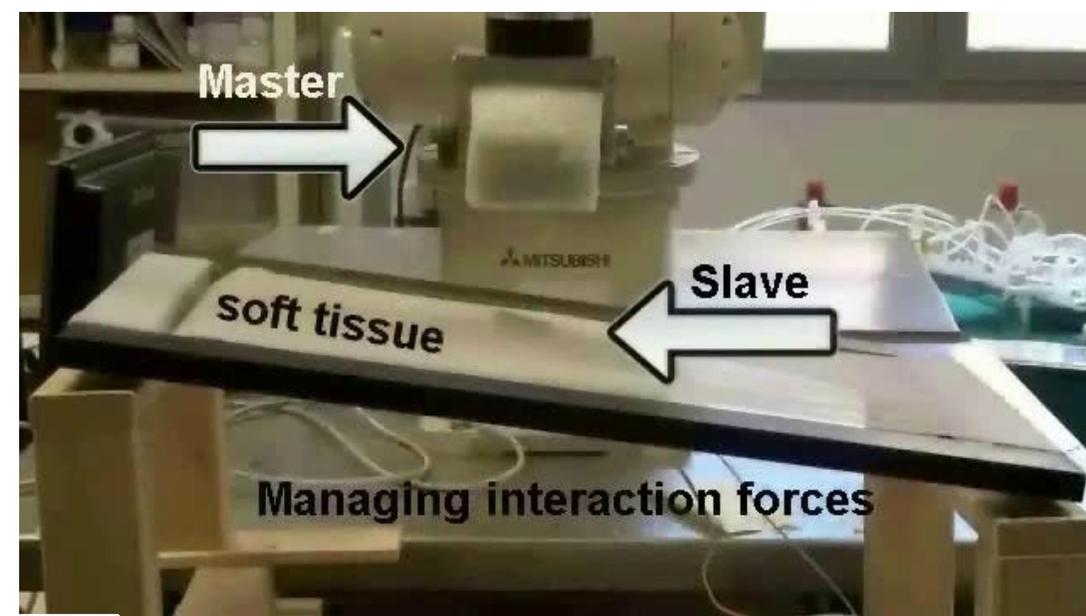




# The easiest navigation environment - Miniature robots navigating in the GI tract...



# ...wireless magnetic dragging is not for free: localization issues open!



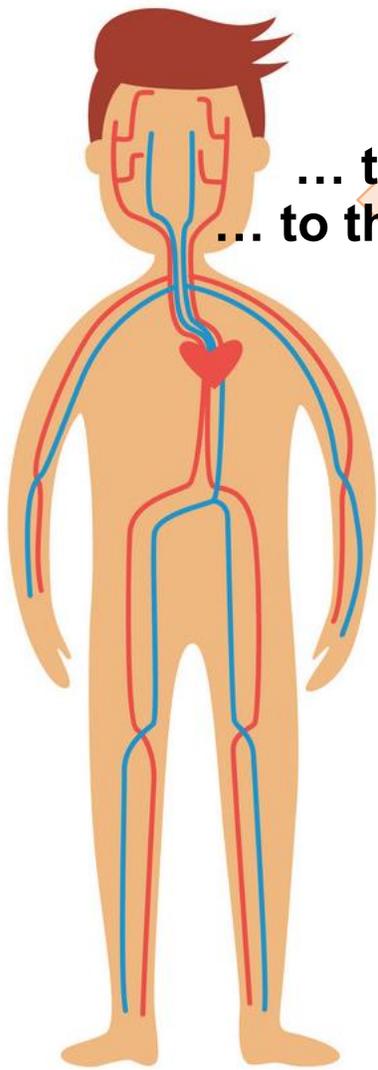
*M. Salerno et al., «A discrete-time localization method for capsule endoscopy based on on-board magnetic sensing», Measurement Science and Technology 23 (1), 2011*

*and also Jake Abbott, Pietro Valdastrì, etc...*

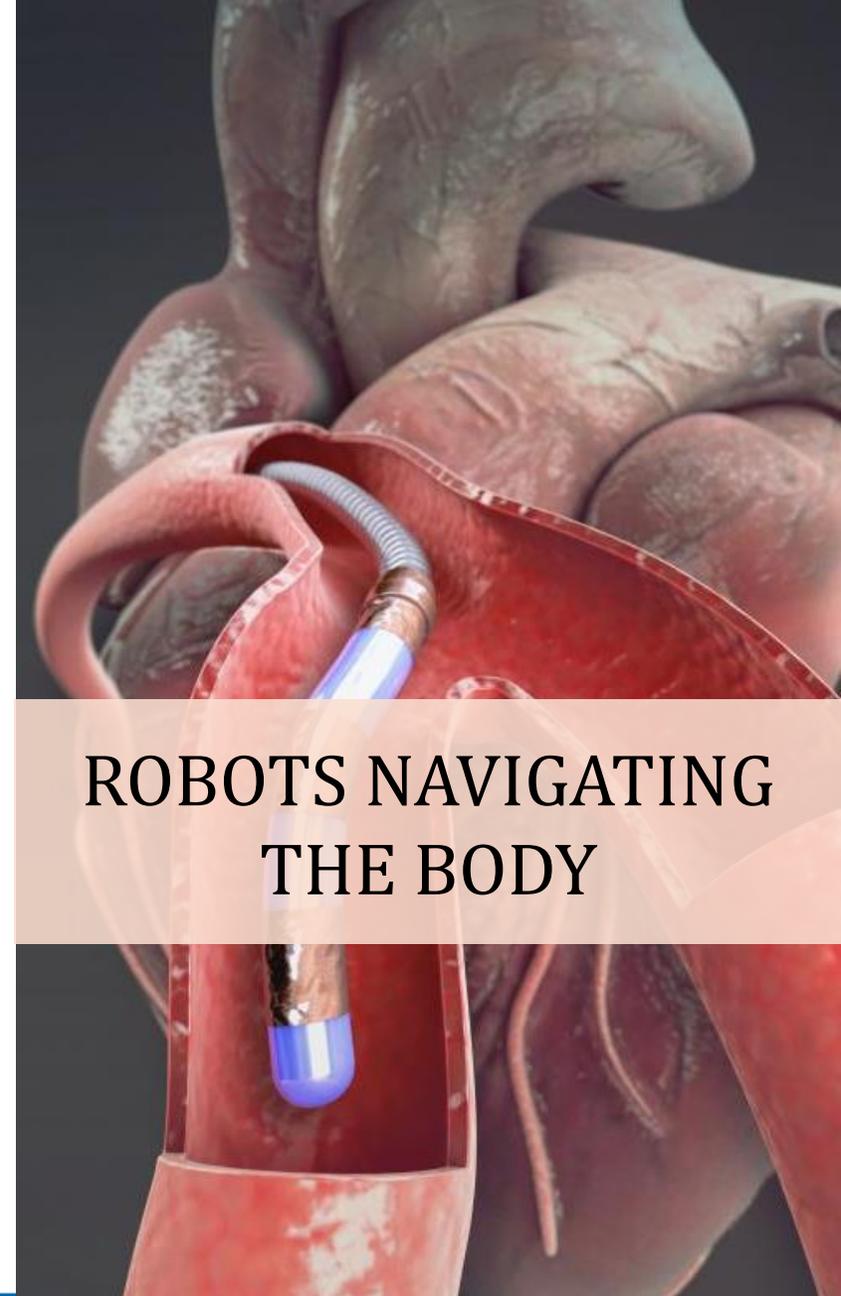




**From the GI tract...  
from cm-size lumen...**

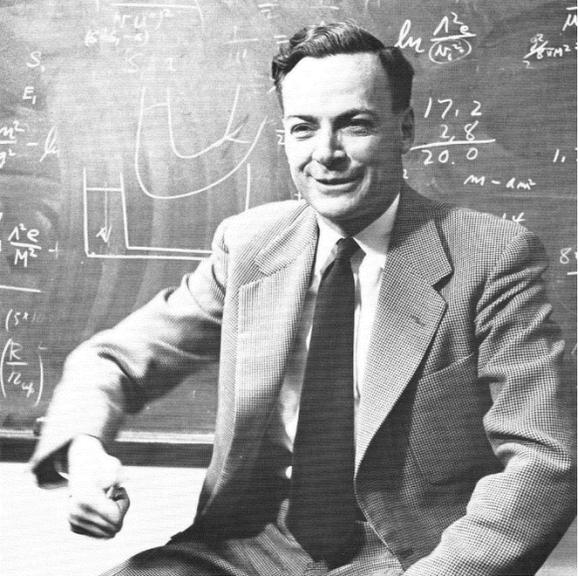


**... to mm-size lumen  
... to the vascular system**



## ROBOTS NAVIGATING THE BODY





# There's Plenty of Room at the Bottom

Richard P. Feynman

Imagine experimental physicists must often look with envy at men like Kamerlingh Onnes, who discovered a field like low temperature, which seems to be bottomless and in which one can go down and down. Such a man is then a leader and has some temporary monopoly in a scientific adventure. Percy Bridgman, in designing a way to obtain higher pressures, opened up another new field and was able to move into it and to lead us all along. The development of ever higher vacuum was a continuing development of the same kind.

I would like to describe a field, in which little has been done, but in which an enormous amount can be done in principle. This field is not quite the same as the others in that it will not tell us much of fundamental physics (in the

dots on the fine half-tone reproductions in the Encyclopaedia. This, when you demagnify it by 25 000 times, is still 80 angstroms in diameter—32 atoms across, in an ordinary metal. In other words, one of those dots still would contain in its area 1000 atoms. So, each dot can easily be adjusted in size as required by the photoengraving, and there is no question that there is enough room on the head of a pin to put all of the Encyclopaedia Britannica.

Furthermore, it can be read if it is so written. Let's imagine that it is written in raised letters of metal; that is, where the black is in the Encyclopaedia, we have raised letters of metal that are actually  $1/25\ 000$  of their ordinary size. How would we read it?

If we had something written in such a way, we could

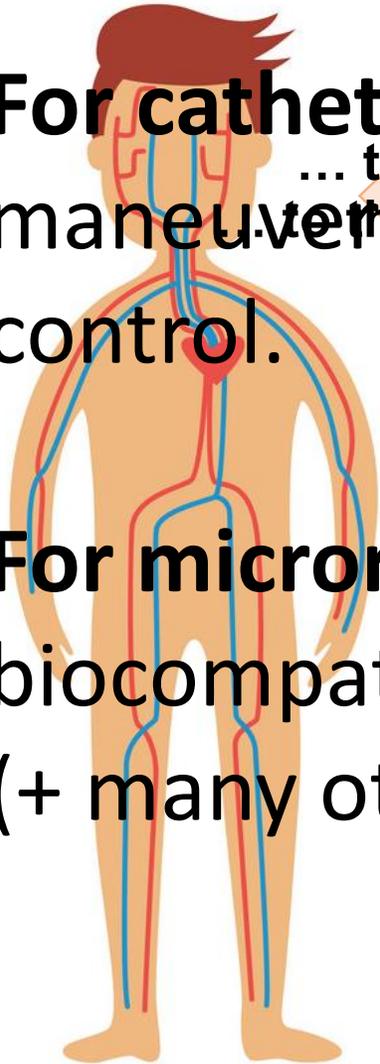


# Main Challenges:

From the GI tract...

From the circulatory system...

- **For catheters:** flexibility, maneuverability and tip control.  
... to mm-size lumen in the vascular system
- **For microrobots:** control, biocompatibility, tracking (+ many others!)



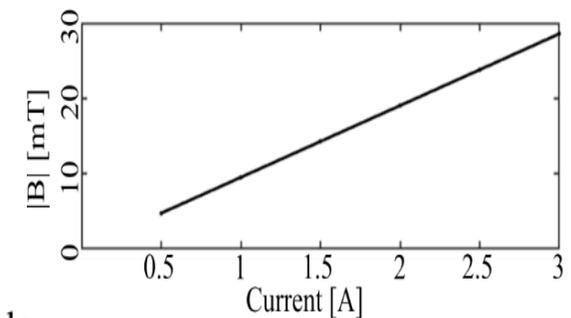
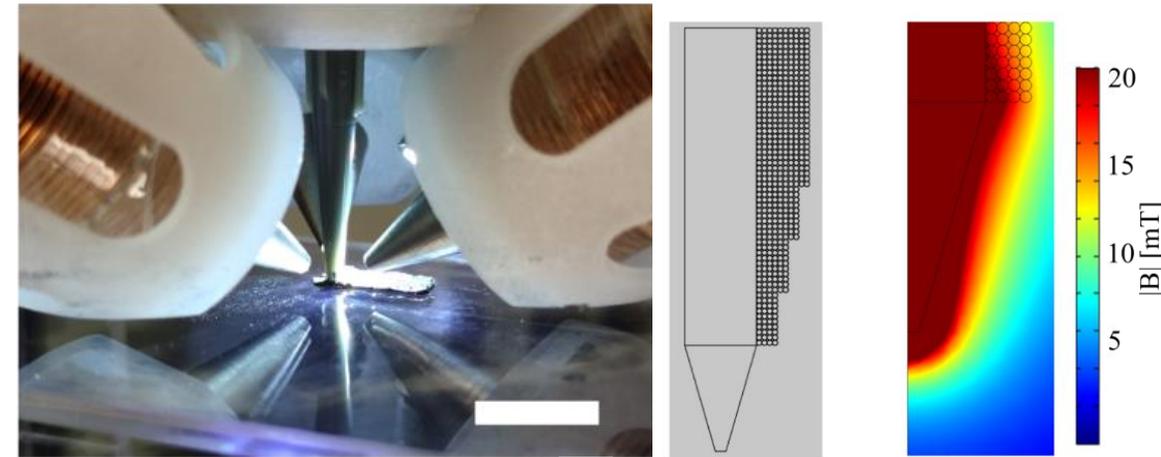
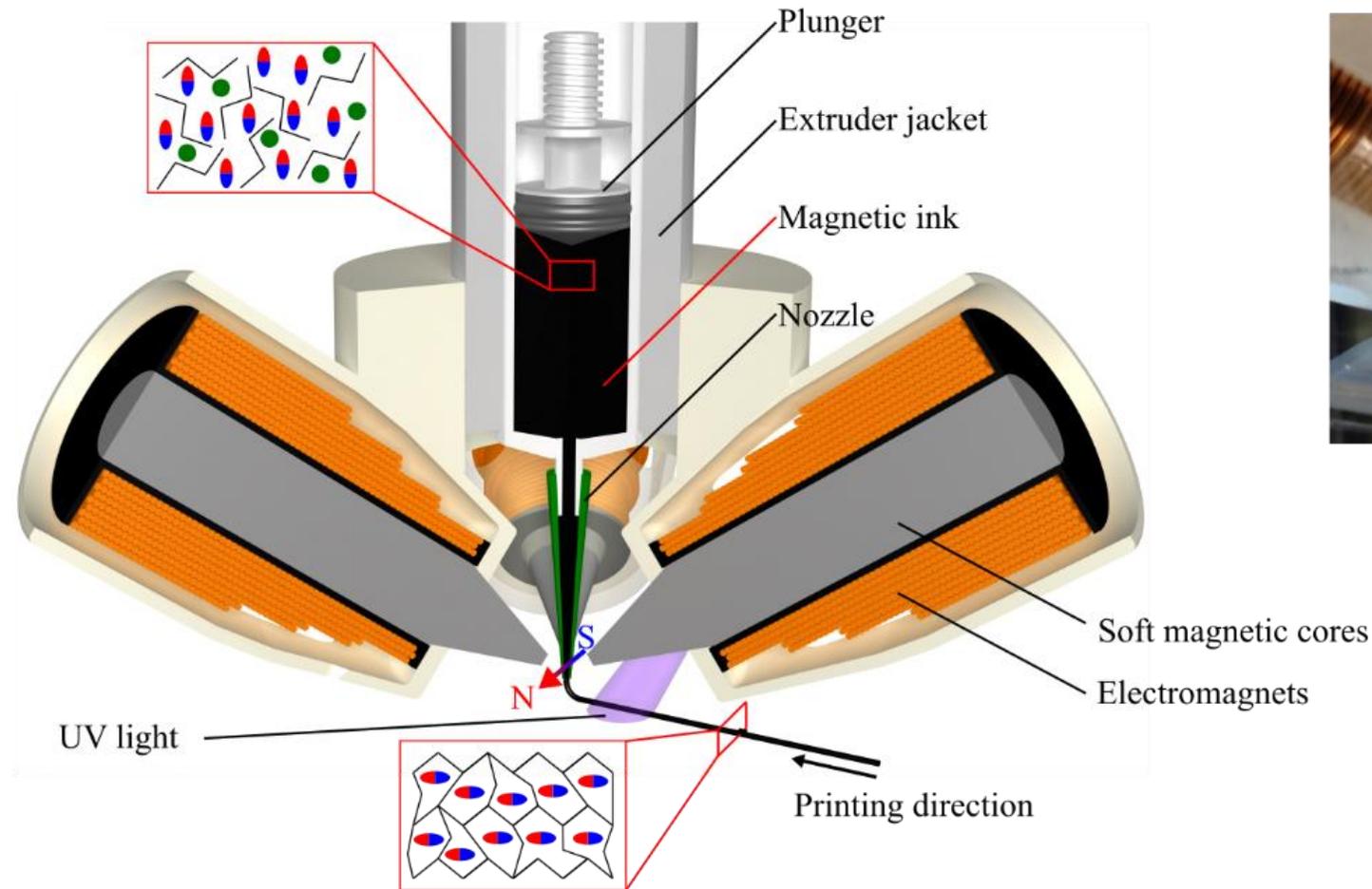
*NAVION, ETH*



*Microparticles in the blood flow (Fantastic Voyage)*



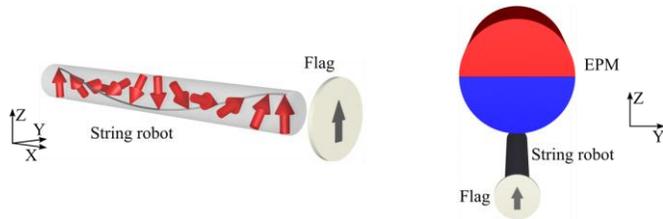
# 3D Printing of Small-Scale Soft Robots with Programmable Magnetization



- Polymer
- Magnetic particle
- Photoinitiator



# 3D Printing of Small-Scale Soft Robots with Programmable Magnetization

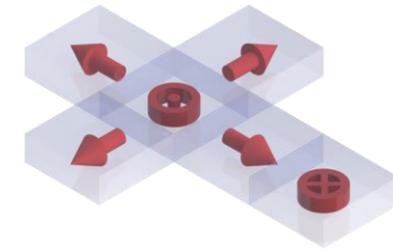


3D Printing of Small-Scale Soft Robots with Programmable Magnetization

Mohammad Hasan Dad Ansari, Veronica Iacovacci, Stefano Pane, Mouloud Ourak, Gianni Borghesan, Izadyar Tamadon, Emmanuel Vander Poorten, Arianna Menciassi

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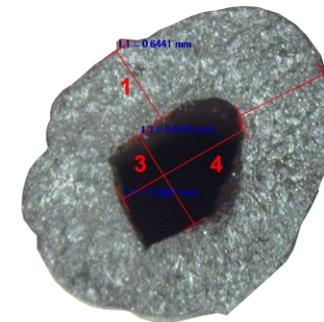
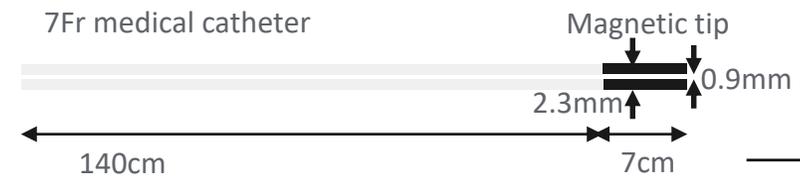
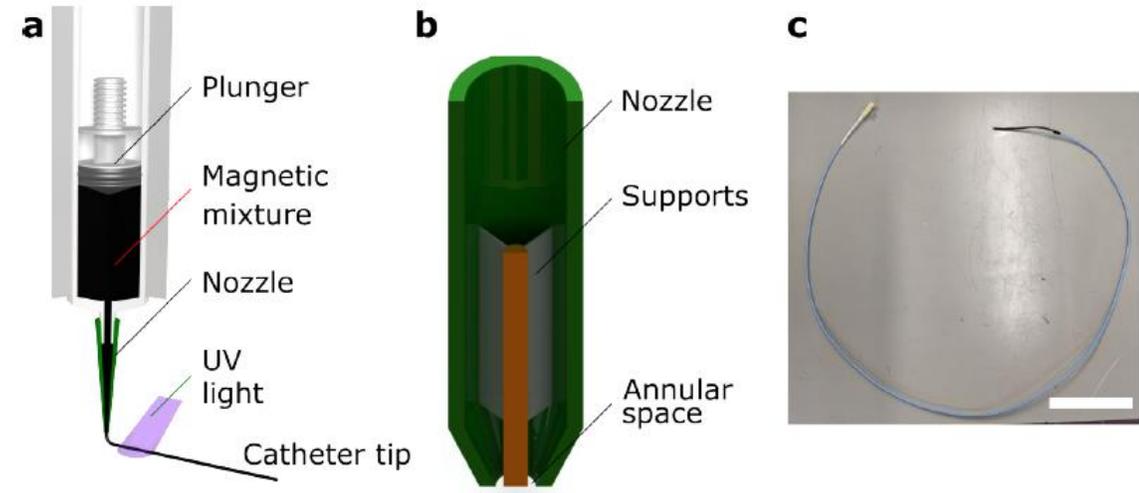
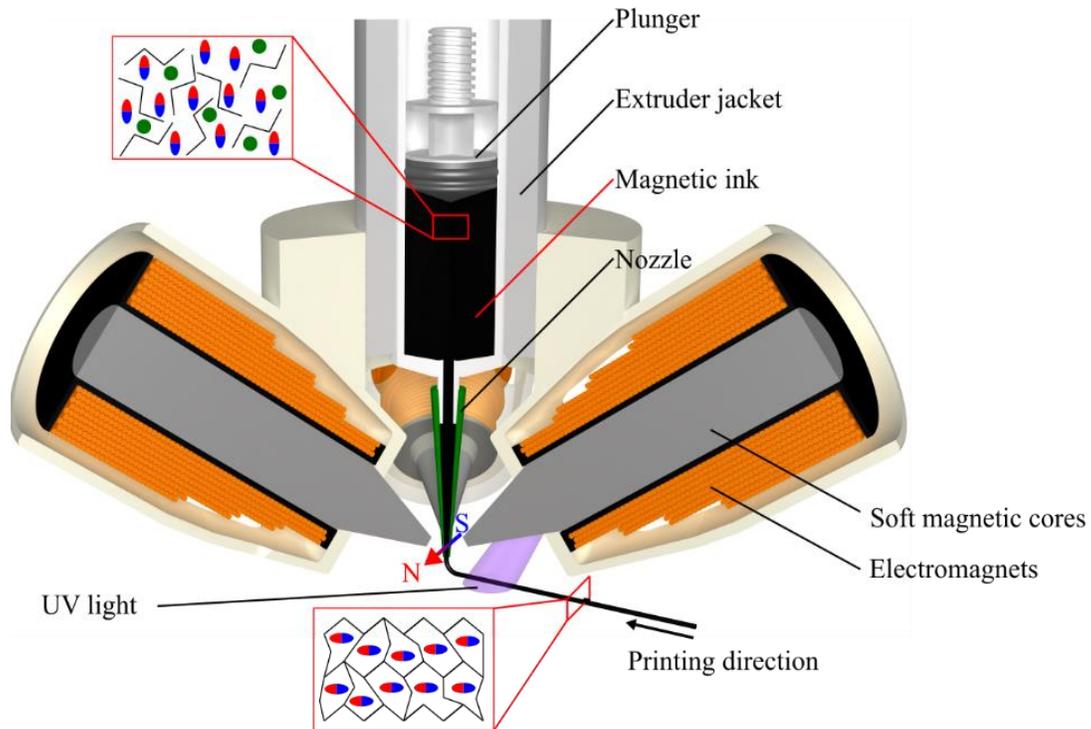
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# Magnetic catheters with programmable magnetization

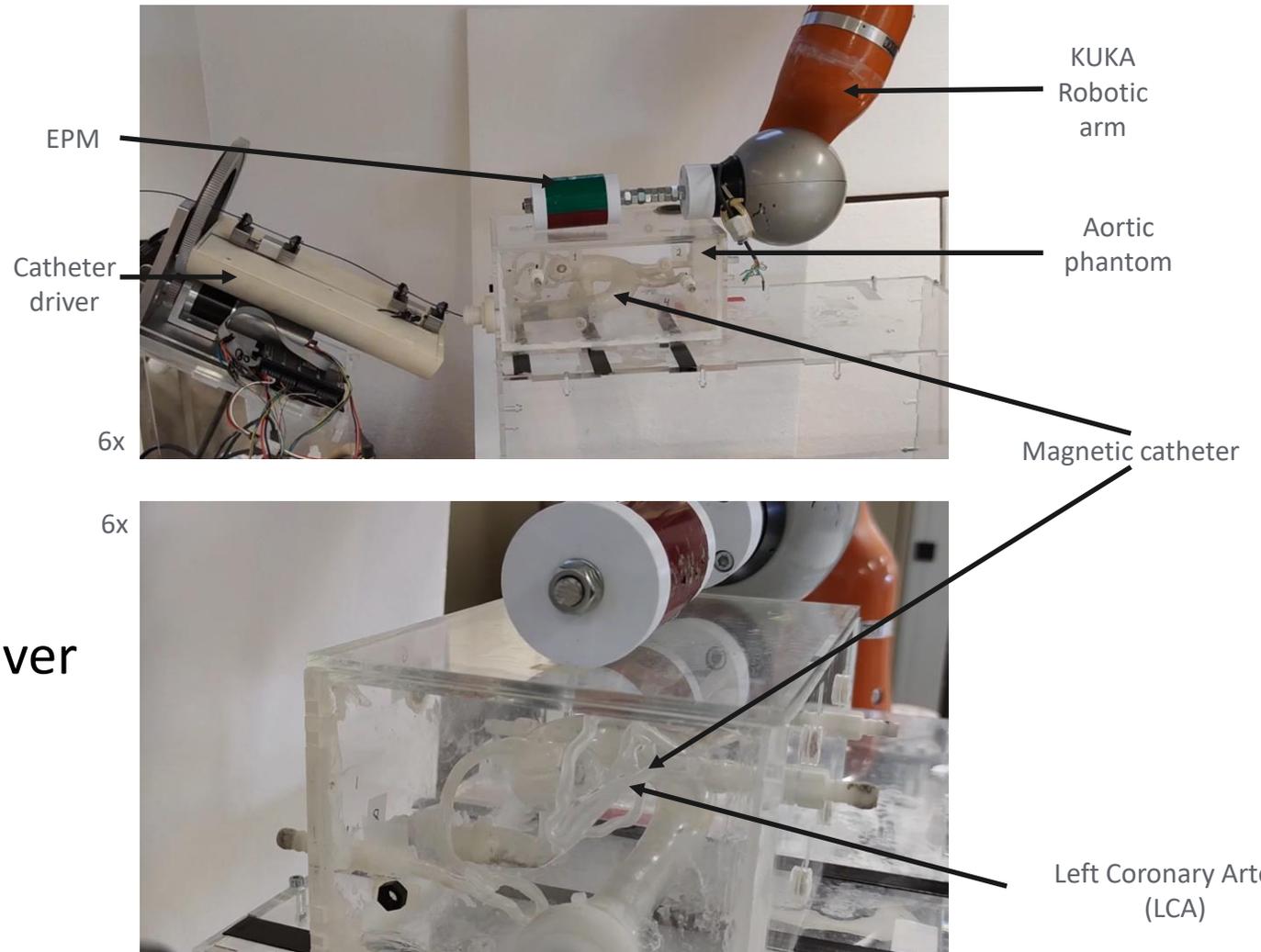
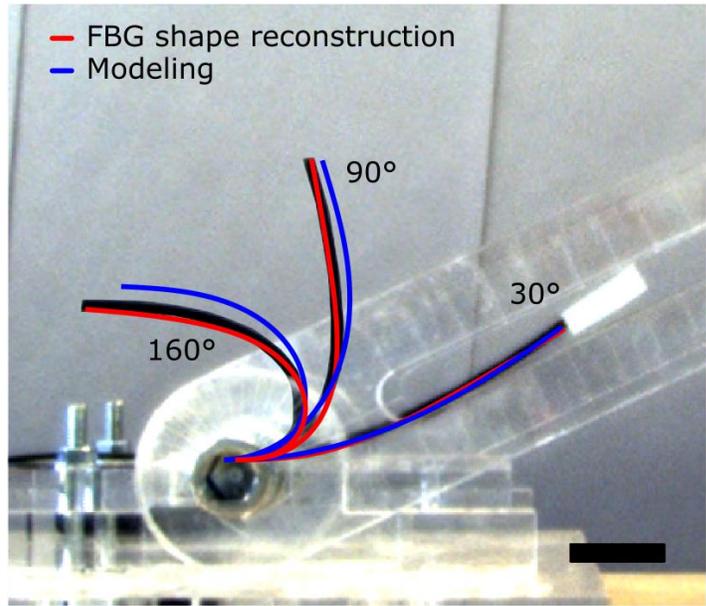
- Distributed magnetic particles – miniaturization
- Magnetic anisotropy – programmed bending – patient-specific
- 3D printing – different materials, sizes, shapes – versatile



1	0.6441mm
2	0.7325mm
3	0.8145mm
4	1.0967mm



# Robot-assisted guidance of the magnetic catheter



## Robot assisted catheterization

- Automatic insertion using catheter driver
- EPM path defined using several waypoints
- EPM moved along the path based on visual feedback of the operator
- Success rate = 83.3% (5/6)



# Main Challenges:

- **For catheters:** flexibility, maneuverability and tip control.
- **For microrobots:** control, biocompatibility, tracking (+ many others!)

- Space constraints
- Need for higher spatial resolution
- Need for higher temporal resolution
- Need to shift from microscope-based lab settings to tissue-compliant imaging modalities
- Lower contrast mismatch between microrobots and tissue

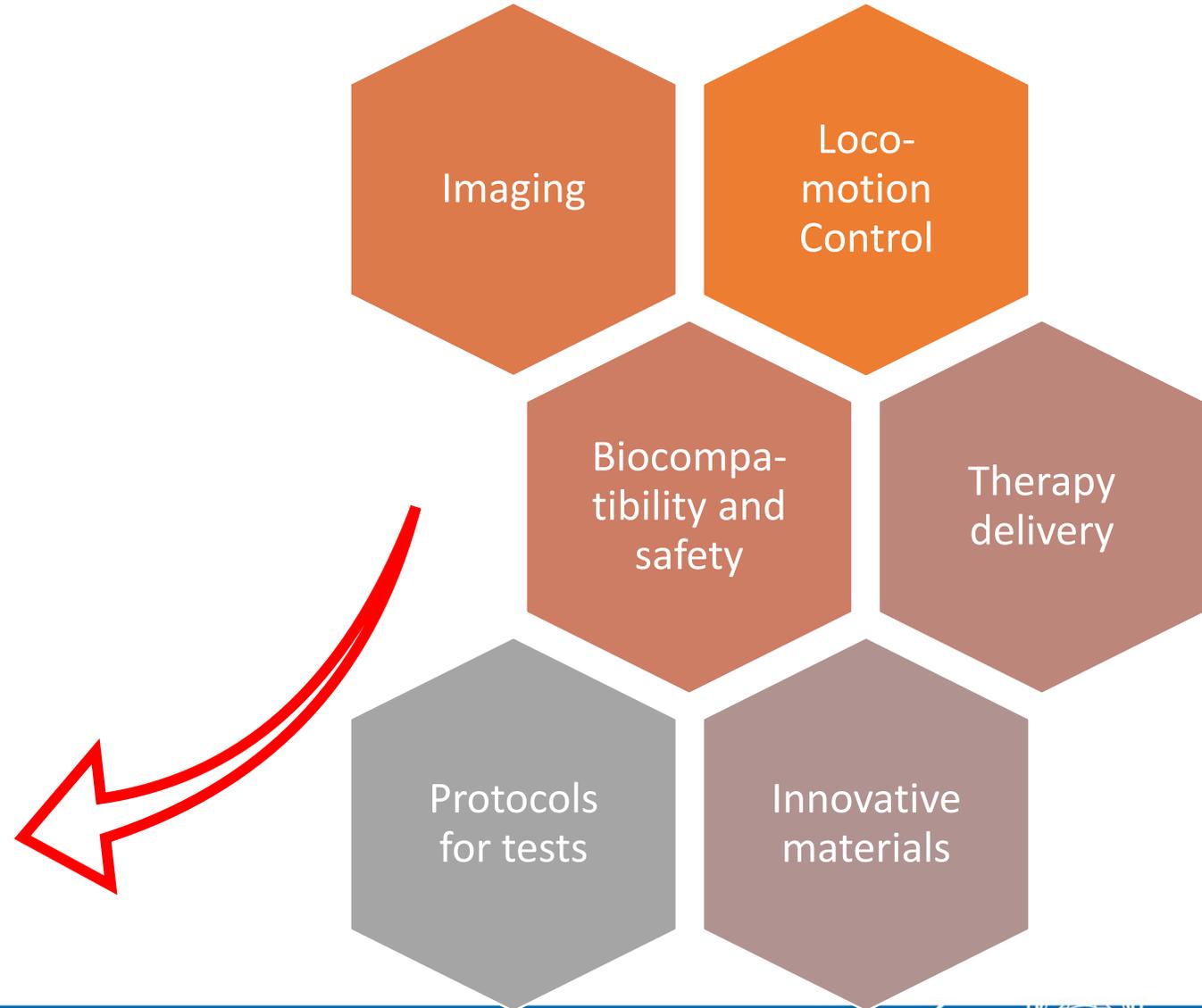
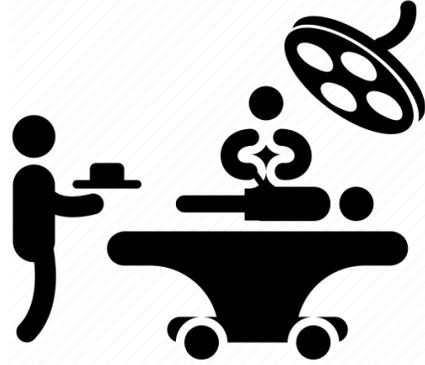


*Microparticles in the blood flow (Fantastic Voyage)*



# Let's focus on challenges for microrobots in the vasculature

**TRANSLATION TO  
RELEVANT CLINICAL  
SCENARIOS**



# (Magnetic) Microrobots for in vivo applications – Open Challenges



A helical micromotor helps an Immobile but healthy bovine sperm cell get to an egg in culture.

M. MEDINA-SÁNCHEZ, O. SCHMIDT, A. A. MENCIA, F. HERRERA, M. A. G. GONZÁLEZ, M. A. G. GONZÁLEZ, M. A. G. GONZÁLEZ, M. A. G. GONZÁLEZ

So far, most microbot experiments have been done *in vitro* under conditions very different from those in the human body. Many devices rely on toxic fuels, such as hydrogen peroxide. They are simple to steer in a Petri dish, but harder to control in biological fluids full of proteins and cells, and through the body's complex channels and cavities.

To enter clinical trials, microbots must clear two major hurdles. First, researchers need to be able to see and control them operating inside the body — current

imaging techniques have insufficient resolution and sensitivity. Second, the vehicles need to be biocompatible and be removed or stabilized after use. Achieving both aims would set the stage for further improvements — in steering and mobility, materials and capabilities.

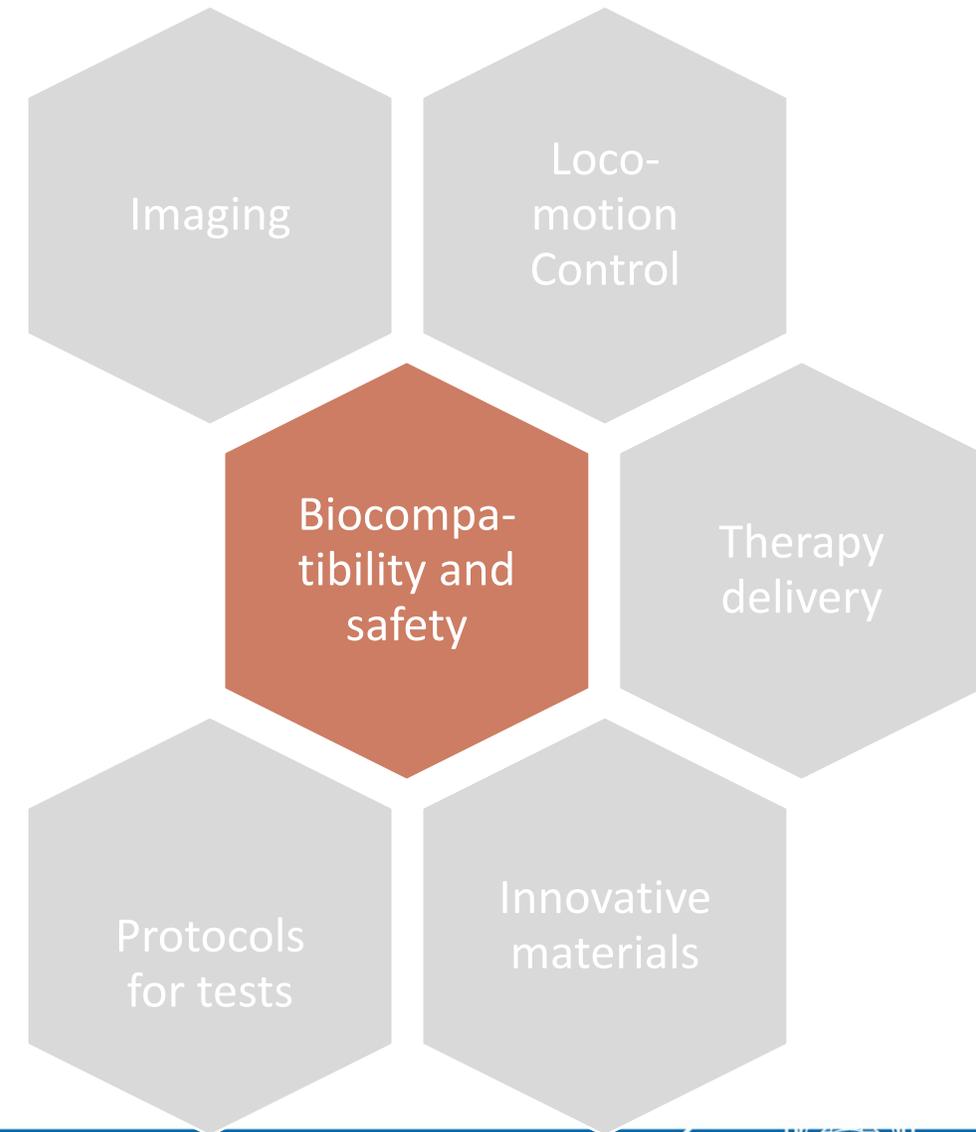
We call on microrobotics researchers, materials scientists and bioimaging and medical specialists to work together to solve these problems. And regulatory agencies need to put in place directives for testing therapeutics that are based on microbots.

## Medical microbots need better imaging and control

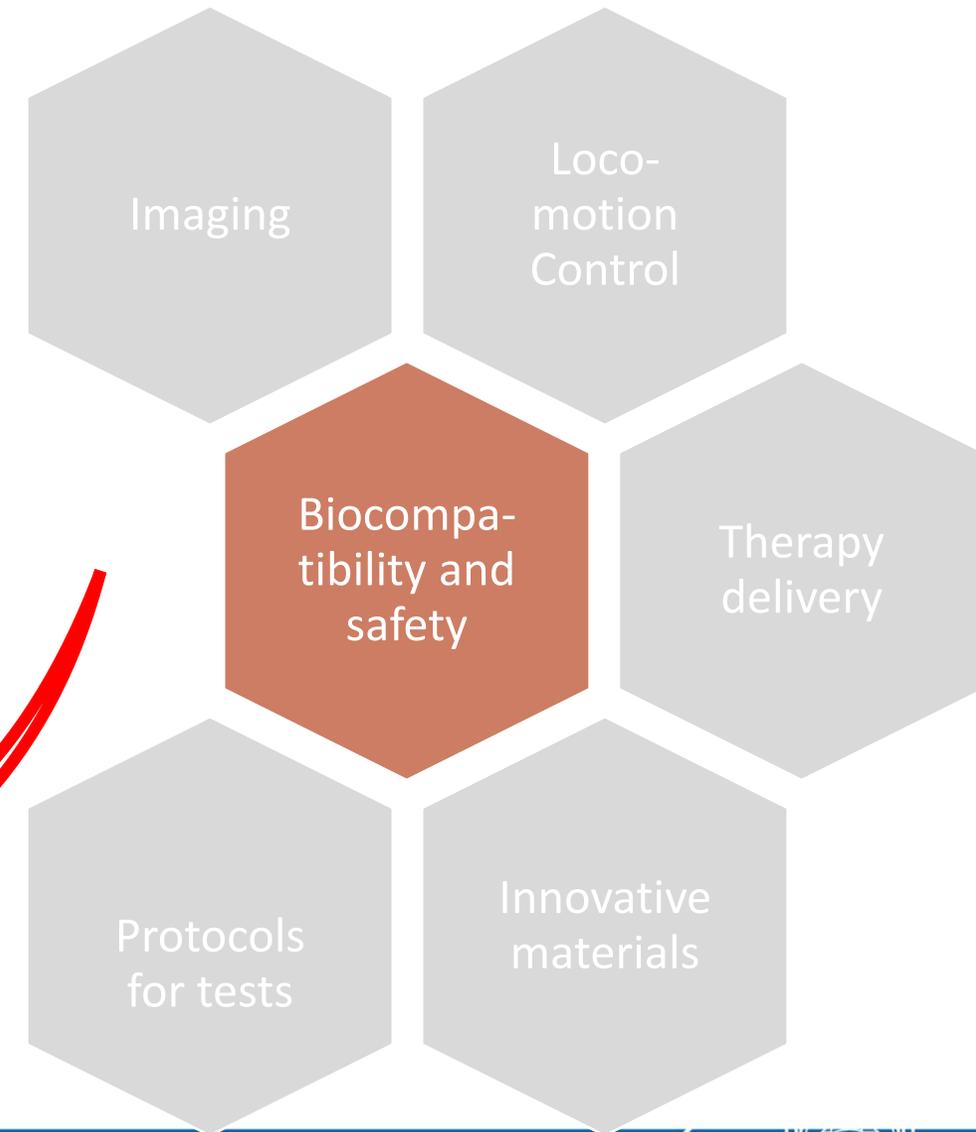
Mariana Medina-Sánchez and Oliver G. Schmidt set priorities for more realistic tests of tiny machines that could be used to diagnose and treat conditions.



# Micro & Nanorobotics towards in vivo applications: challenges



# Micro & Nanorobotics towards in vivo applications: challenges

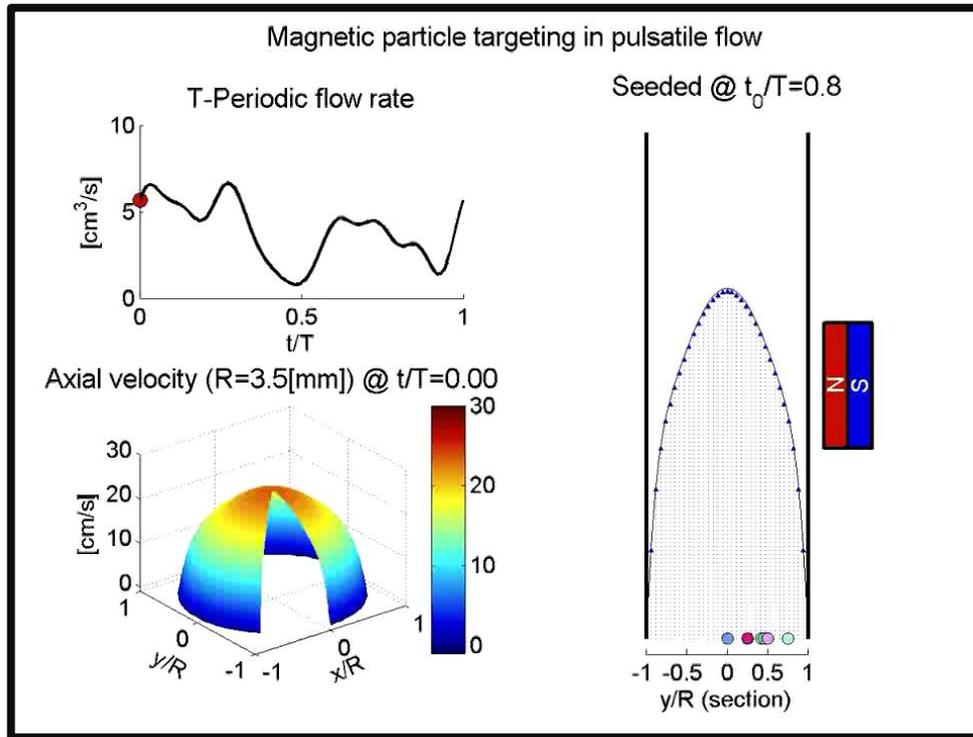


How facing the bio-distribution of magnetic particles in the body?  
How managing the magnetic particles not contributing to the therapy?

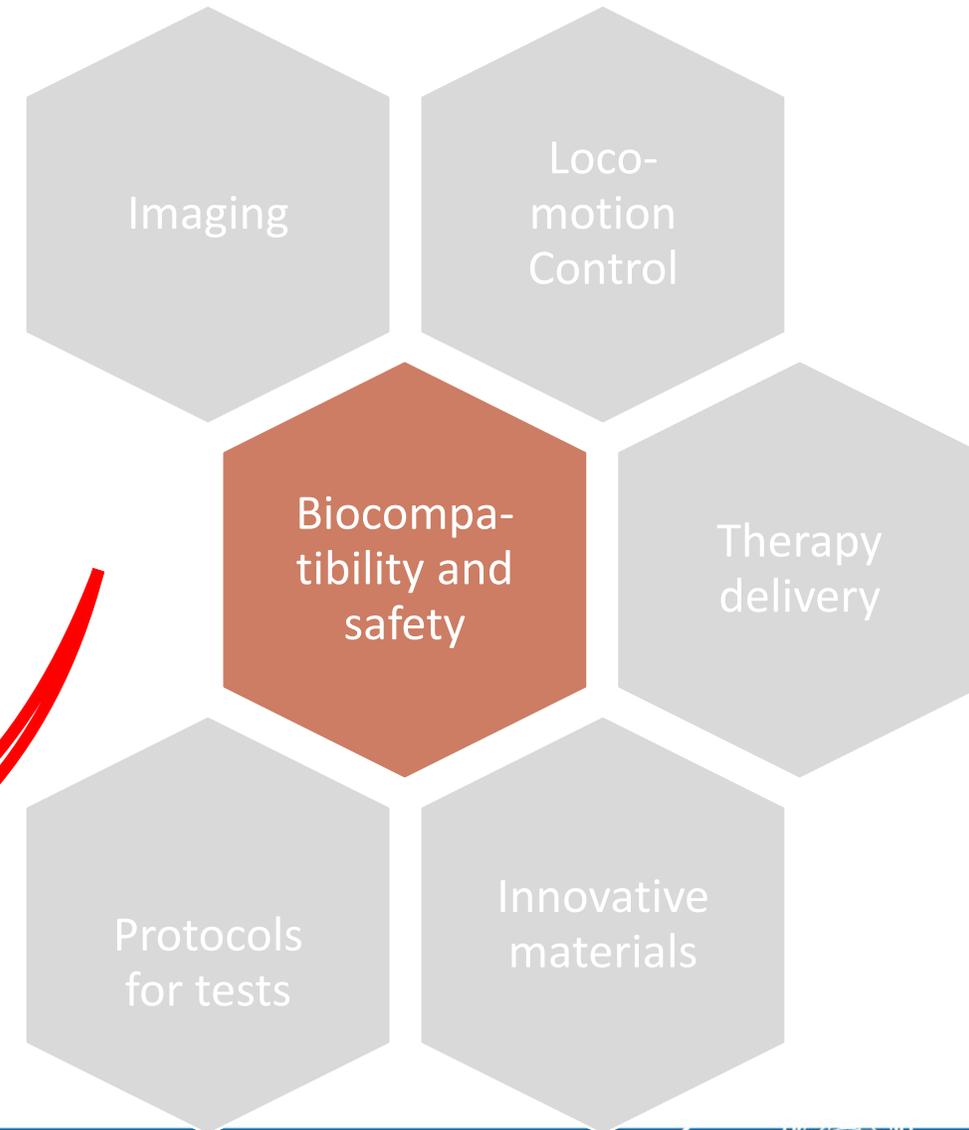
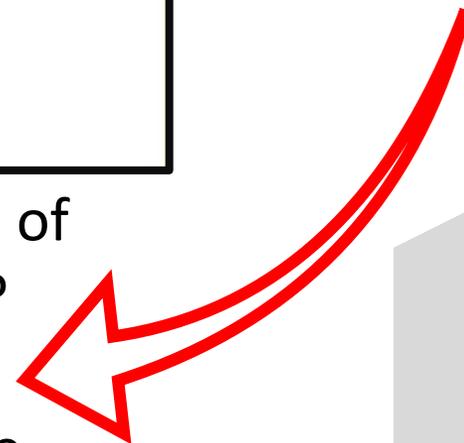


# Micro & Nanorobotics towards in vivo applications: challenges

Berselli, L. C., P. Miloro, et al. (2013) "Applied Mathematics and Computation" **219**(10): 5717-5729.

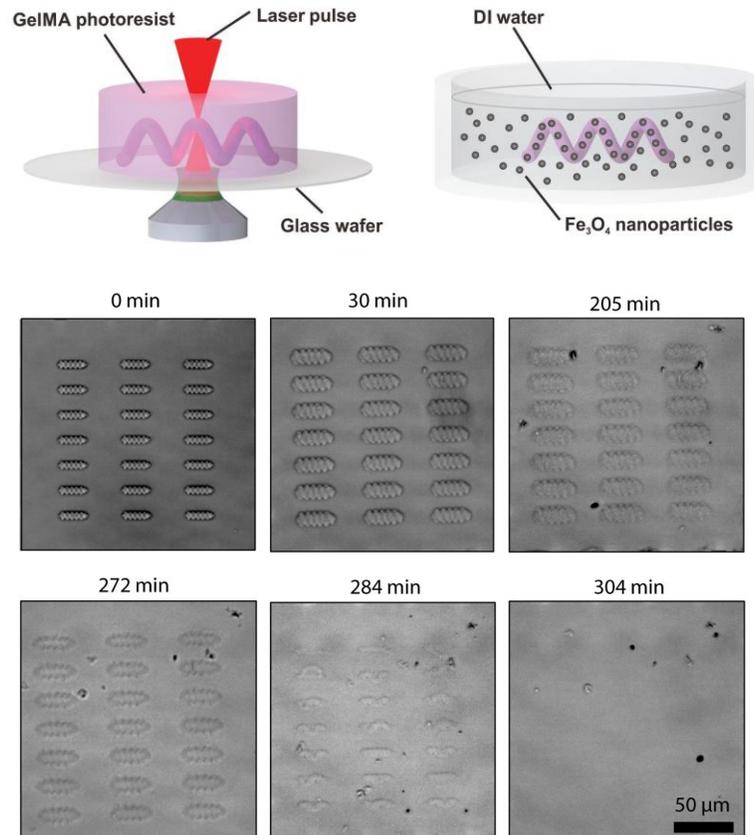


How facing the bio-distribution of magnetic particles in the body?  
How managing the magnetic particles not contributing to the therapy?



# (Magnetic) Microrobots for in vivo applications – Open Challenges

## Development of fully degradable structures



***Loaded drugs and magnetic particles are biodistributed in the body after degradation***

So far, most microbot experiments have been done *in vitro* under conditions very different from those in the human body. Many devices rely on toxic fuels, such as hydrogen peroxide. They are simple to steer in a Petri dish, but harder to control in biological fluids full of proteins and cells, and through the body's complex channels and cavities.

**To enter clinical trials, microbots must clear two major hurdles. First, researchers need to be able to see and control them operating inside the body — current**

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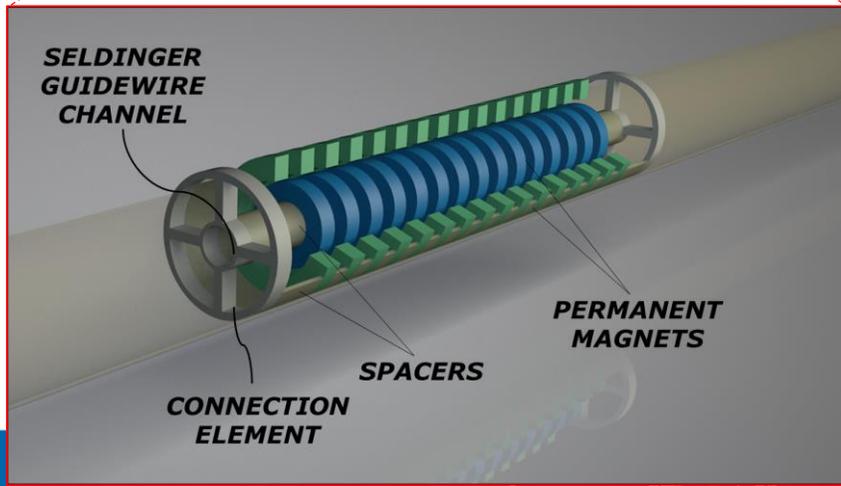
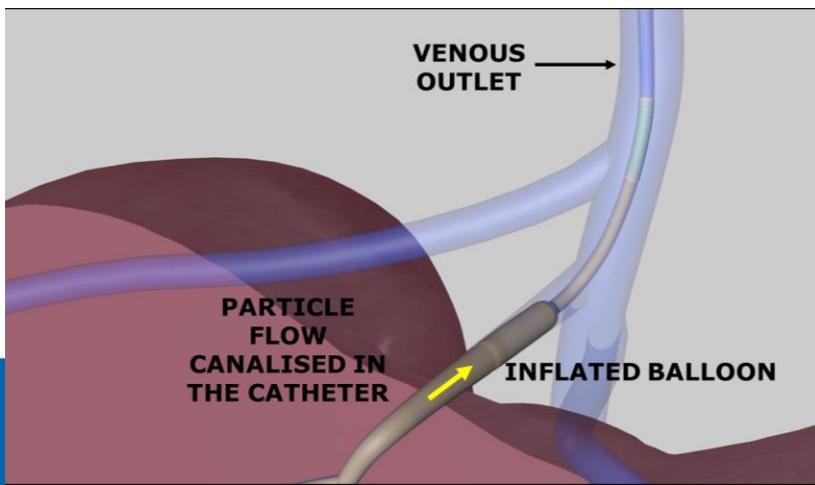
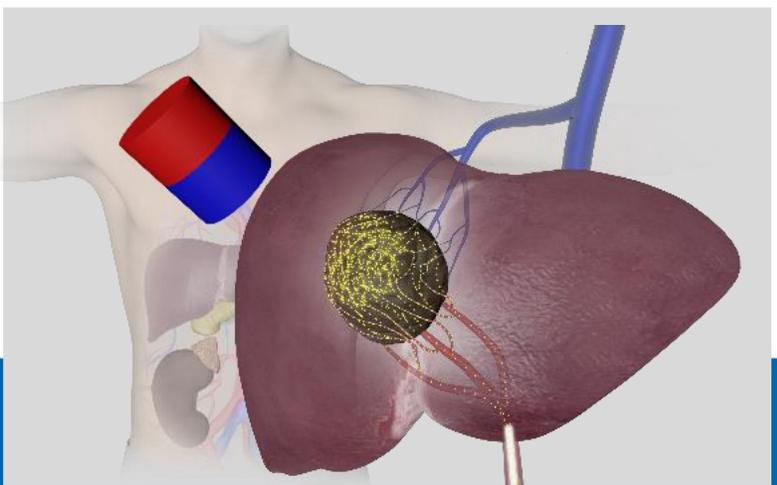
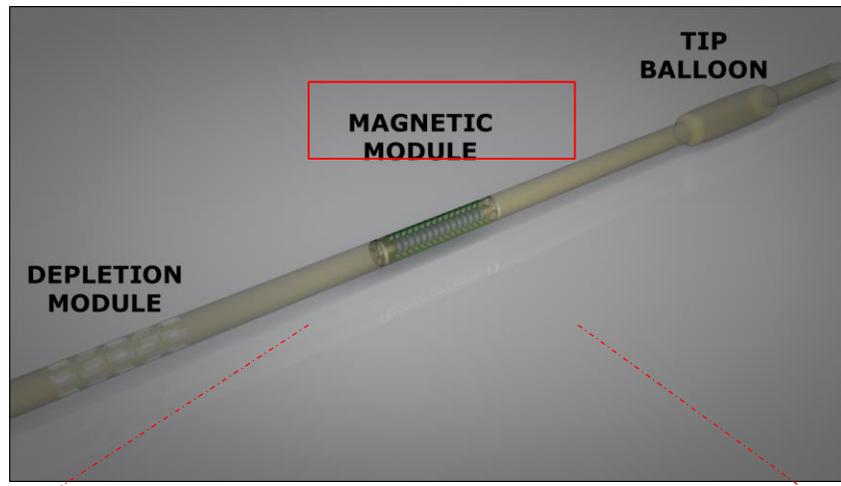
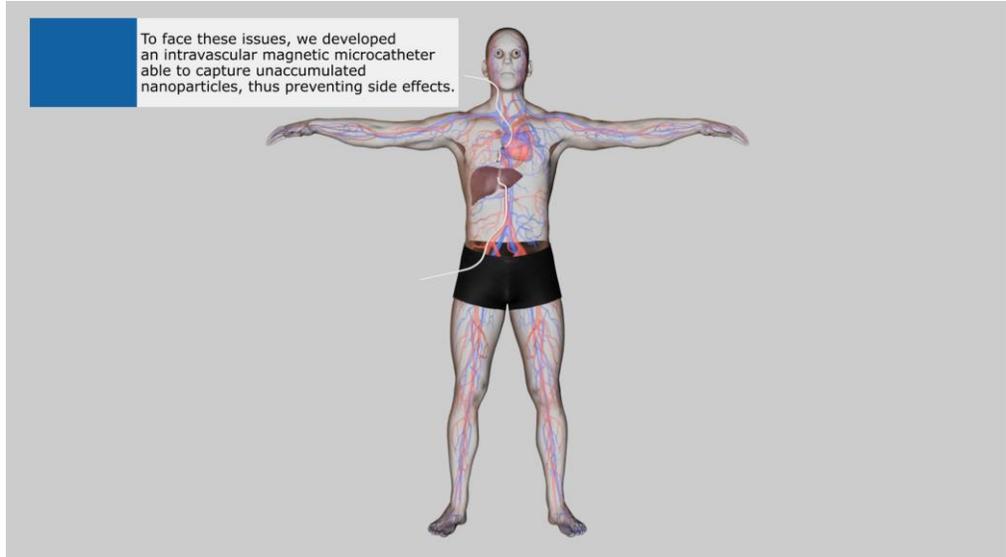


# Intravascular magnetic catheter to retrieve micro and nanoagents from the bloodstream

Iacovacci, V., et al. Adv. Sci. 2018  
Iacovacci, V., et al. ICRA 2019

**TARGET: ORGANS FEATURED BY TERMINAL CIRCULATION (e.g. LIVER, KIDNEY, PANCREAS)**

**MODULAR CATHETER STRUCTURE**



# Magnetic module design – FEM modeling

- **SPHERICAL PARTICLE**
- **POINT DIPOLE APPROXIMATION**
- **LAMINAR FLOW IN A CHANNEL**

$$\mathbf{v}_p = \mathbf{v} + \zeta f(H)(\mathbf{H} \cdot \nabla)\mathbf{H}$$

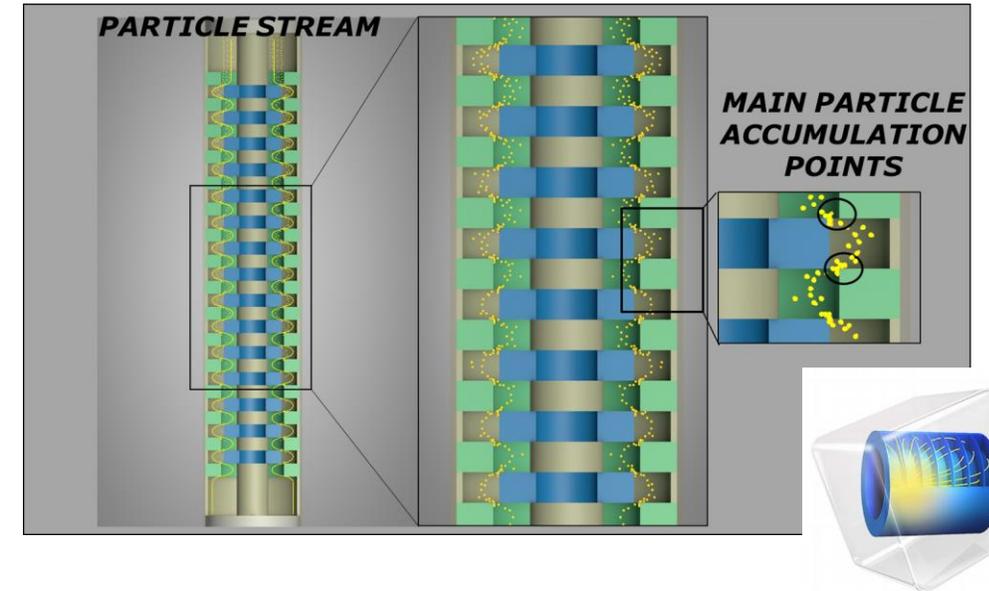
$$\zeta = \frac{\mu_0(1+\chi_f)}{6\pi\eta_f} \frac{V_{mag}}{r_h}$$

$$f(H) = \begin{cases} \frac{3(\chi_p - \chi_f)}{(\chi_p - \chi_f) + 3(1 + \chi_f)} \\ \frac{M_{sp}}{H} \end{cases}$$

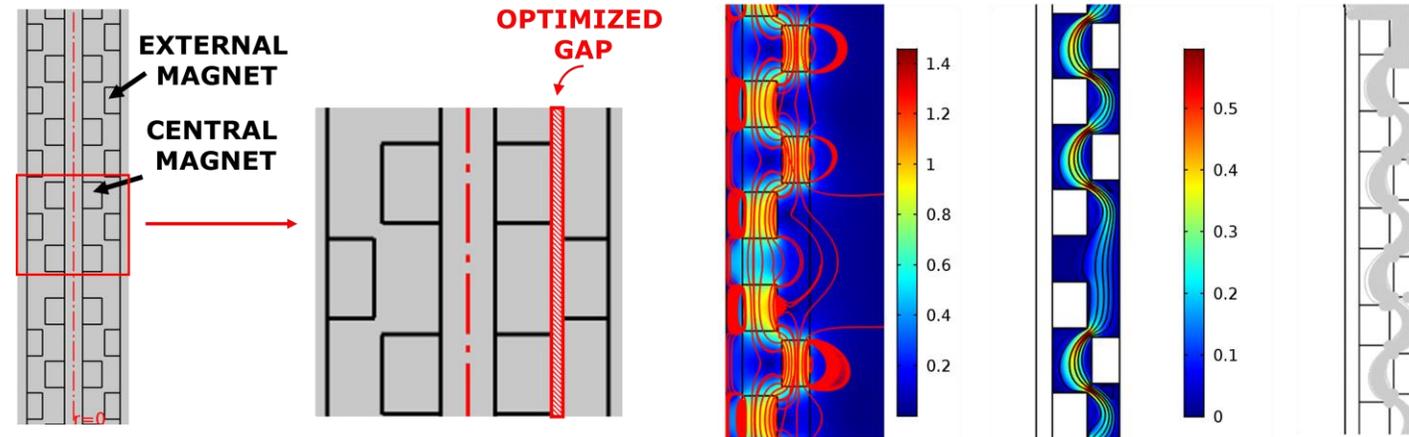
## PARTICLE IN A FLUIDIC AND MAGNETIC FIELD SIMPLIFIED MODELING

$$\frac{M_{sp}}{H} > \frac{3(\chi_p - \chi_f)}{(\chi_p - \chi_f) + 3(1 + \chi_f)}$$

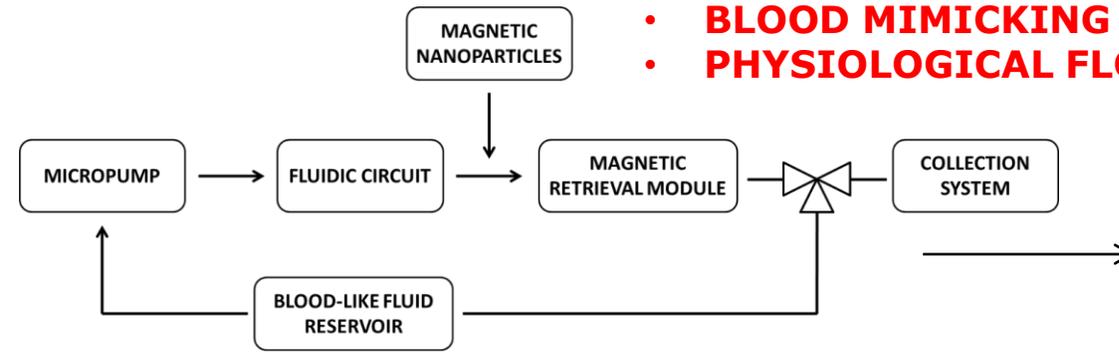
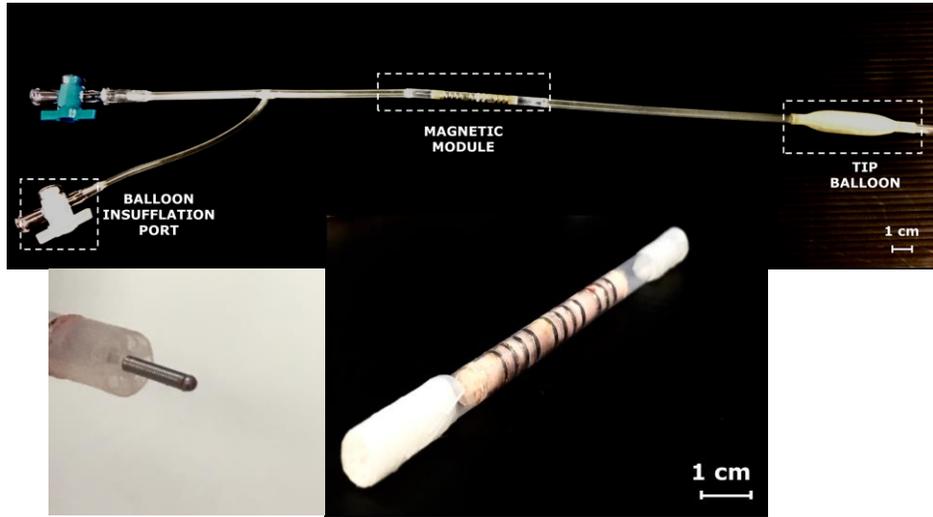
$$\frac{M_{sp}}{H} \leq \frac{3(\chi_p - \chi_f)}{(\chi_p - \chi_f) + 3(1 + \chi_f)}$$



- **CATHETER DIAMETER (12 F, 15 F)**
- **MAGNET NUMBER, GROUPING**
- **PARTICLES DIMENSION**



# Experimental validation

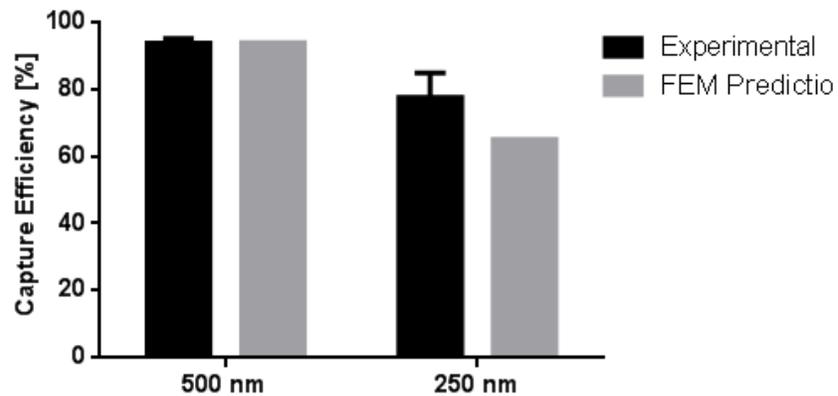


- **BLOOD MIMICKING FLUID**
- **PHYSIOLOGICAL FLOW RATE**

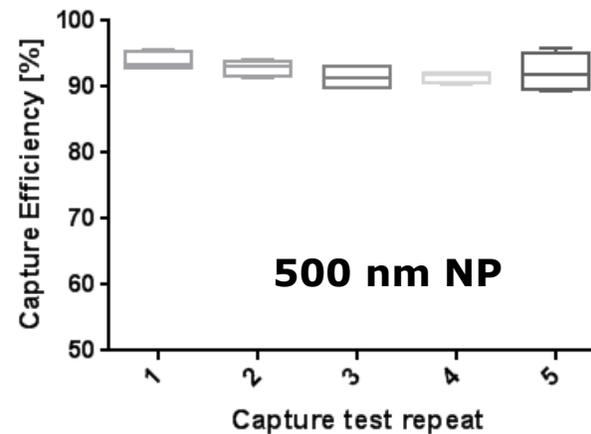
**ICP-MS ANALYSIS**  
to quantify  
the collected  
samples Iron  
content

## MULTIPLE PASSAGE TESTS

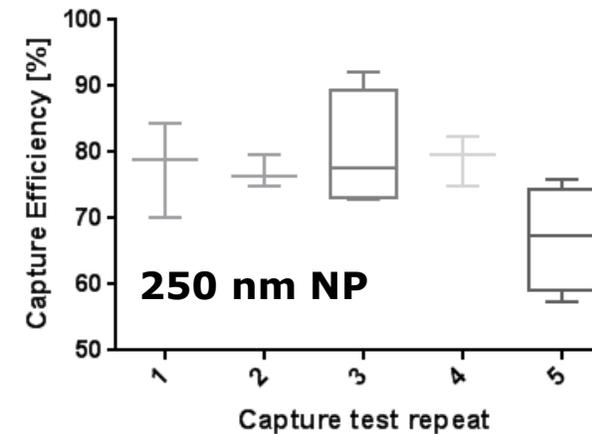
**NO SIGNIFICANT HEMORHEOLOGICAL ALTERATION (BLOOD CELLS COUNT AND HEMATOCRIT)**

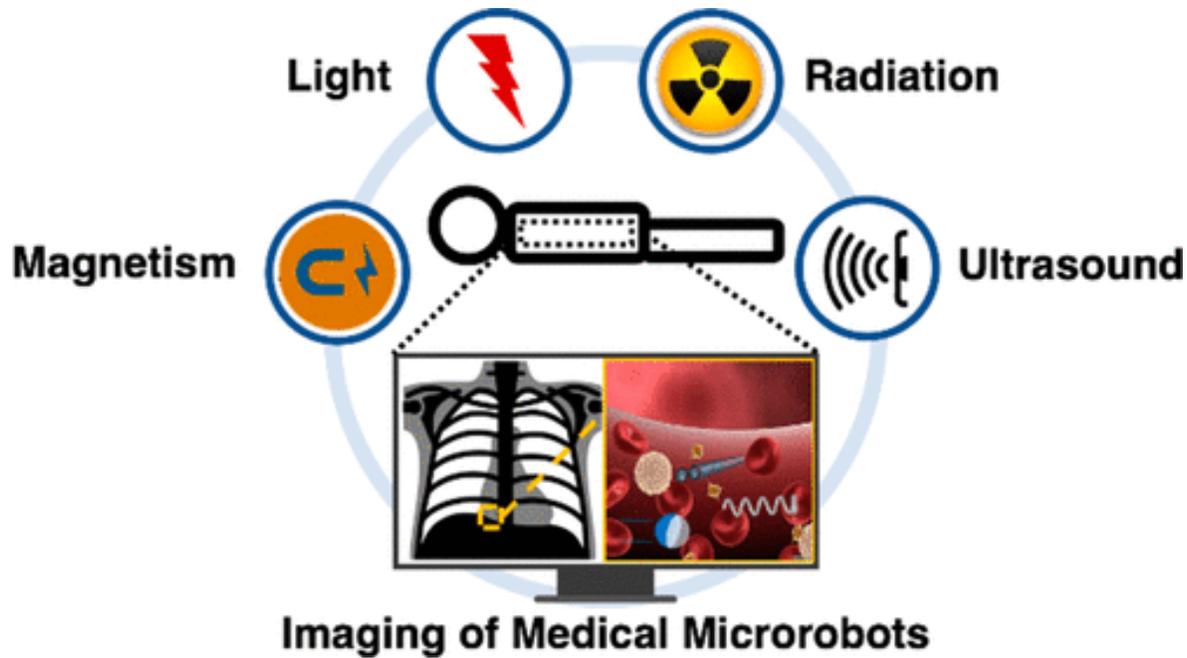


**OPTIMAL CORRESPONDANCE AMONG FEM PREDICTION AND EXPERIMENTAL DATA**



**EXTENSIVE CAPTURE EFFICIENCY FOR MULTIPLE USAGE (MASSIVE DOSES)**



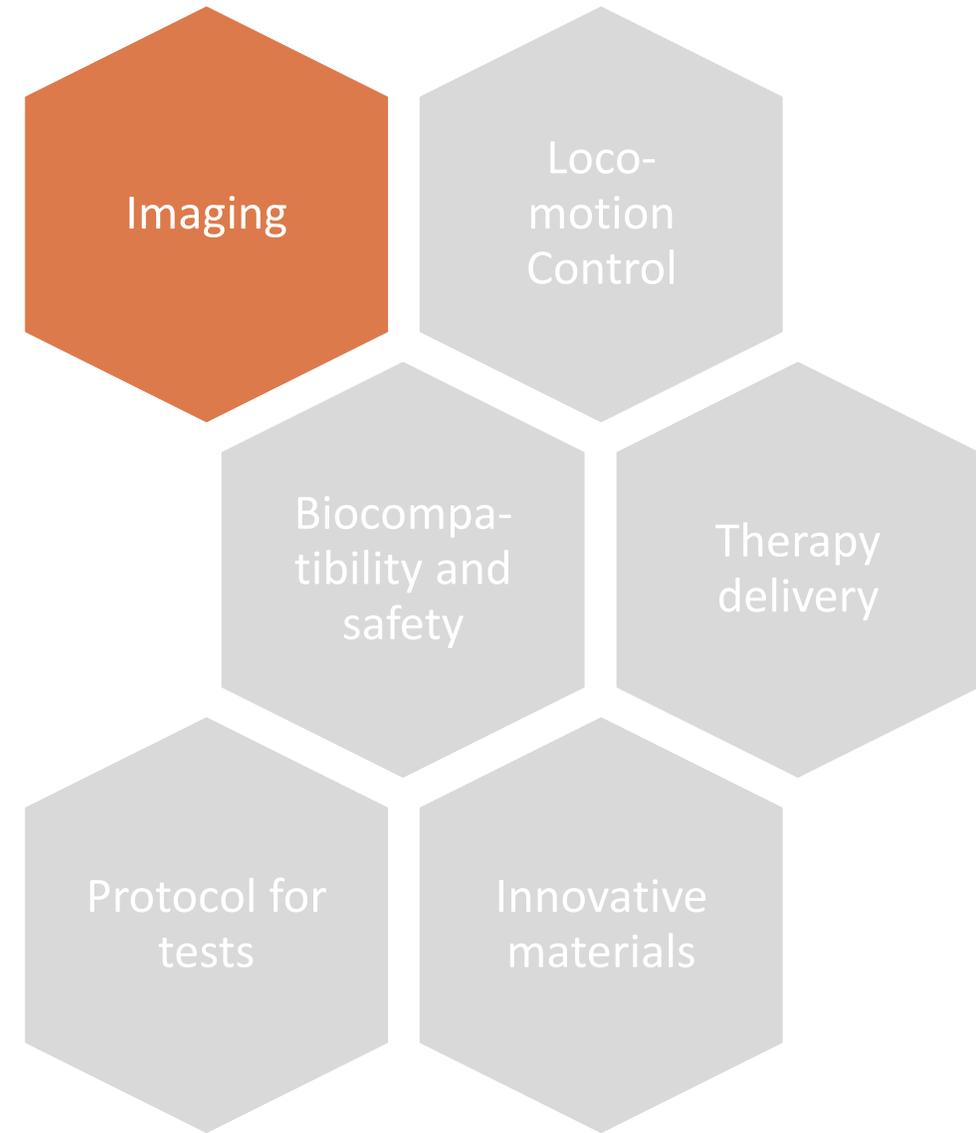


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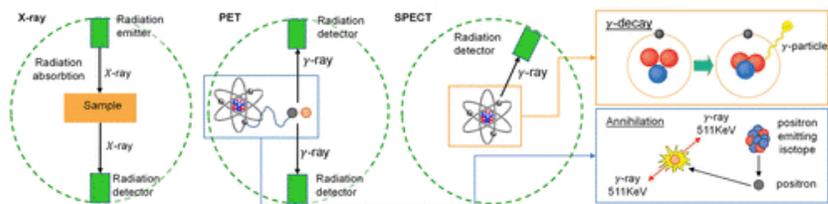
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We call on microrobotics researchers, materials scientists and bioimaging and medical specialists to work together to solve these problems. And regulatory agencies need to put in place directives for testing therapeutics that are based on microbots.

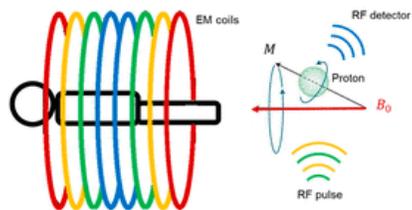
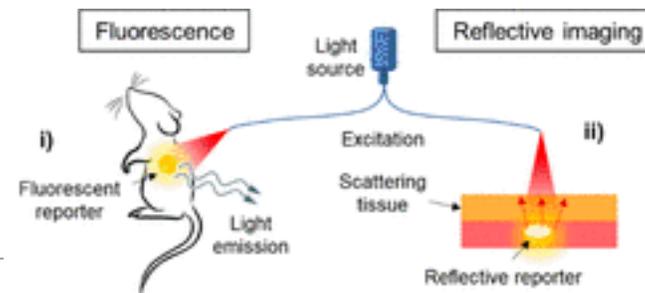


# Microrobots imaging – state of the art



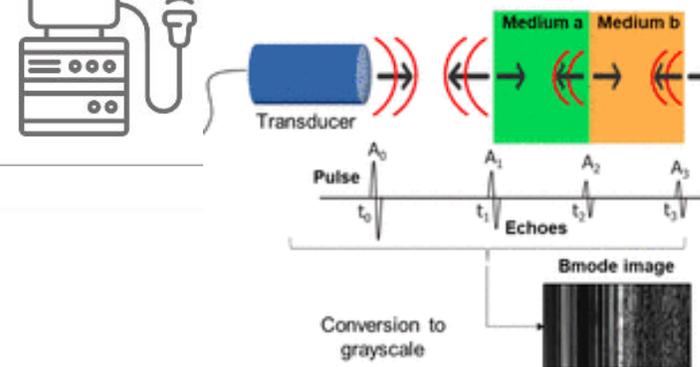
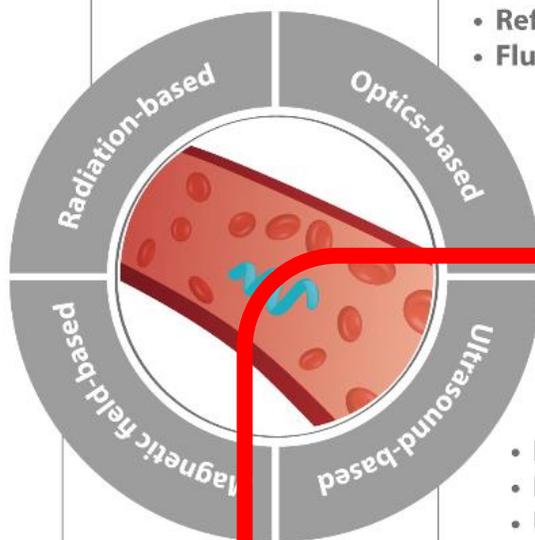
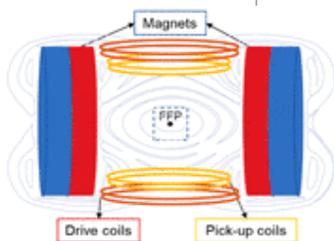
- X-ray
- $\gamma$ -ray

- Reflection-based
- Fluorescence-based

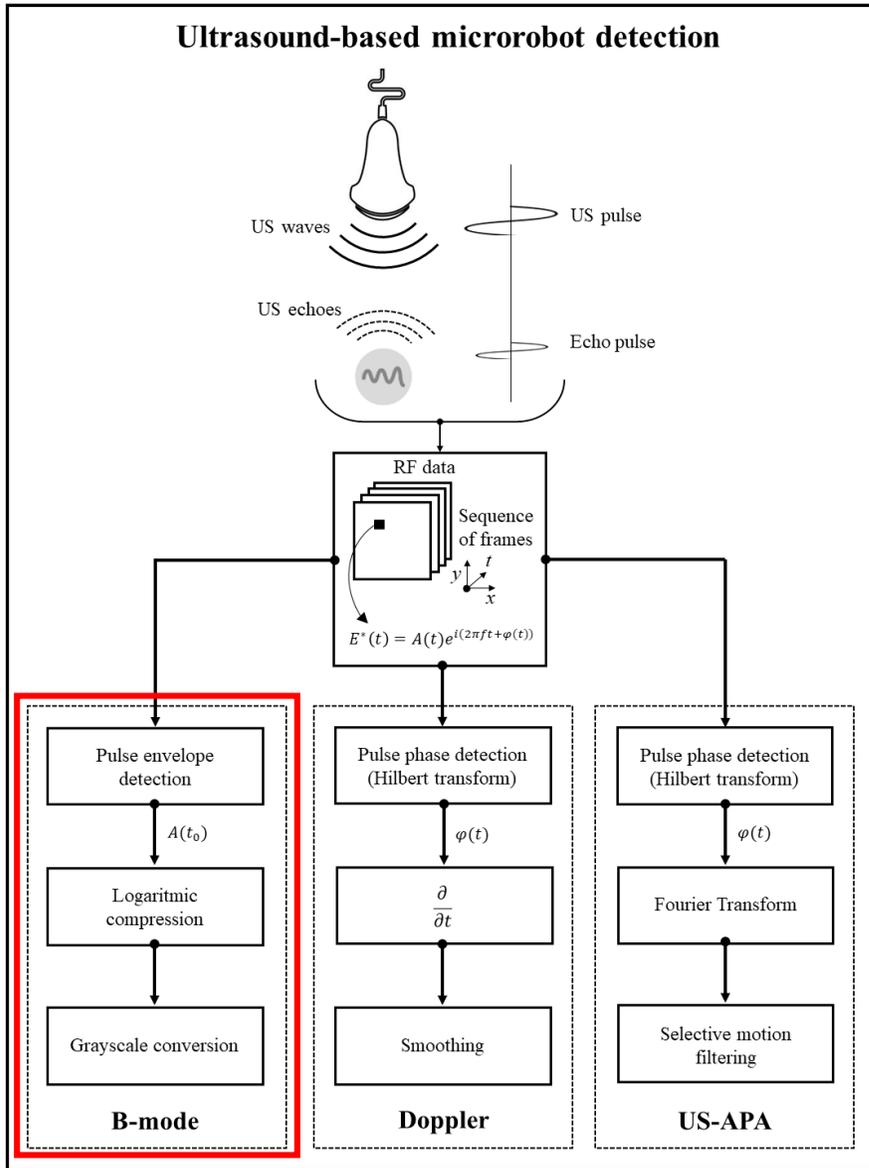


- MRI
- MPI

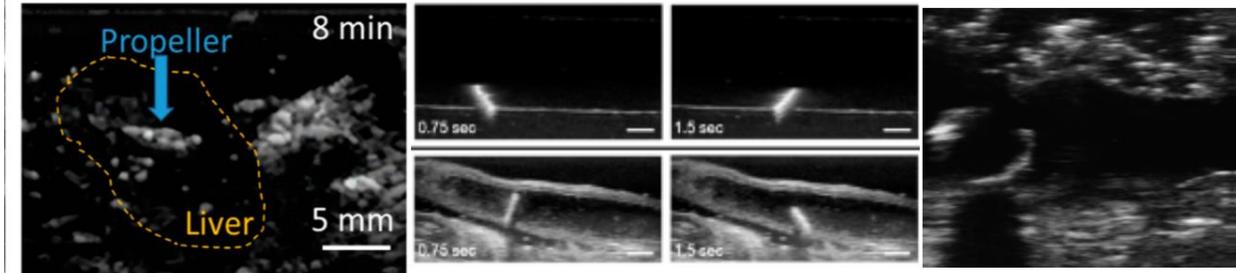
- B-mode
- Doppler
- US-APA



# Microrobots US imaging – examples

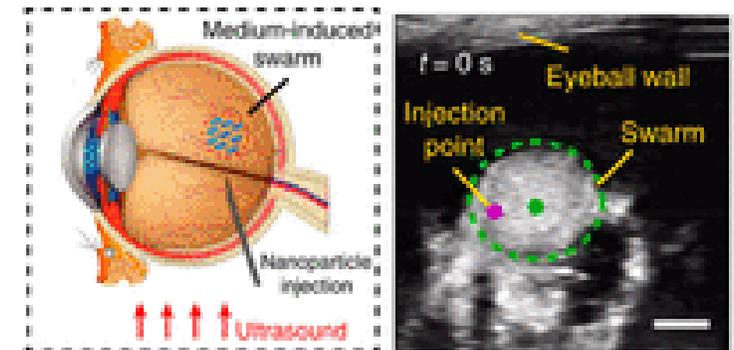
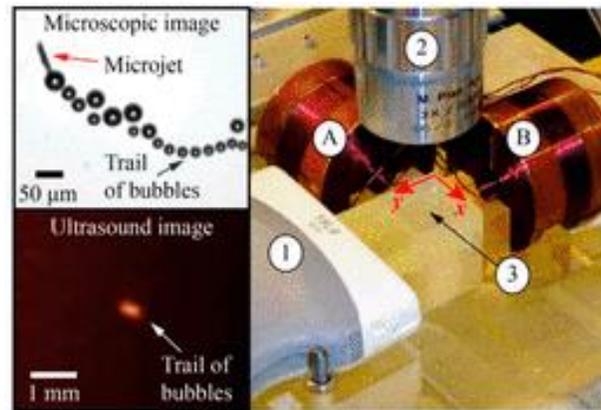


## B-MODE IMAGING OF SUB-MILLIMETRIC ROBOTS

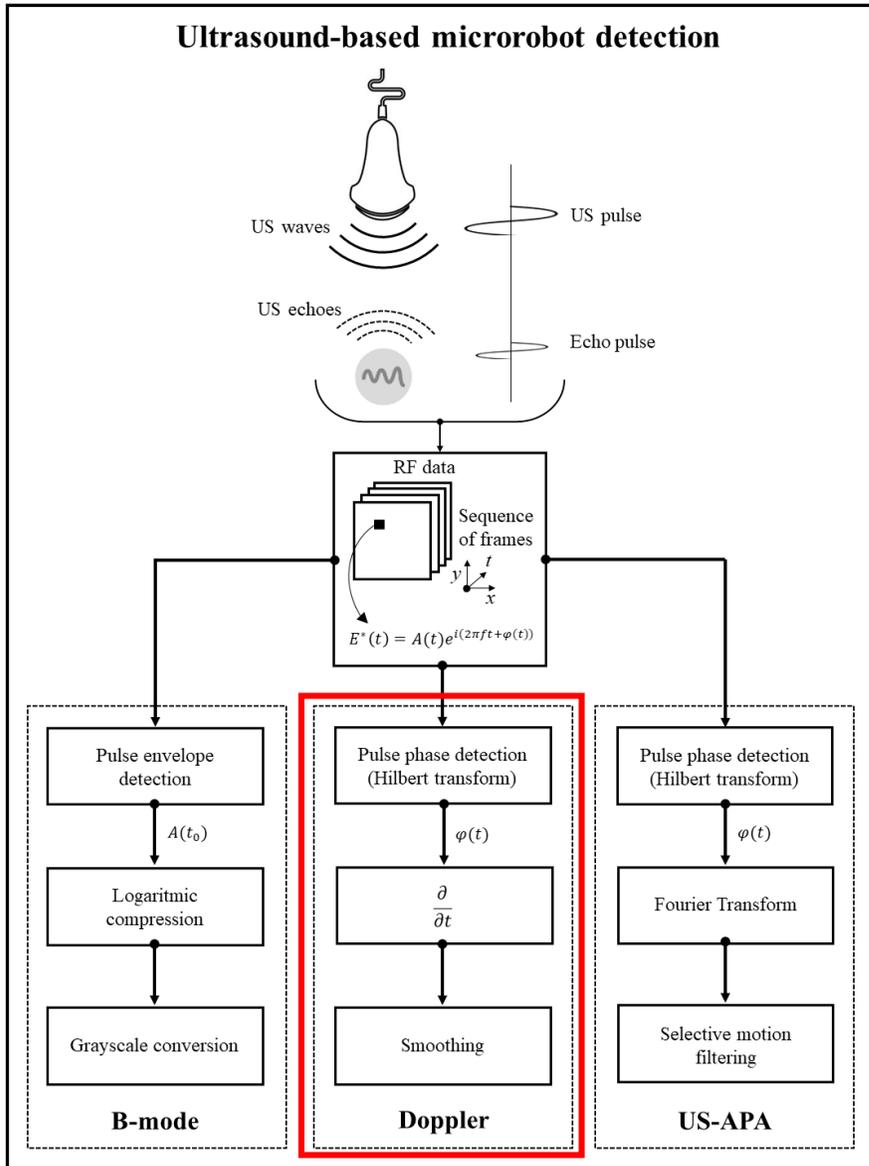


**LOW CONTRAST RESOLUTION IN HIGHLY ECHOGENIC MEDIA**

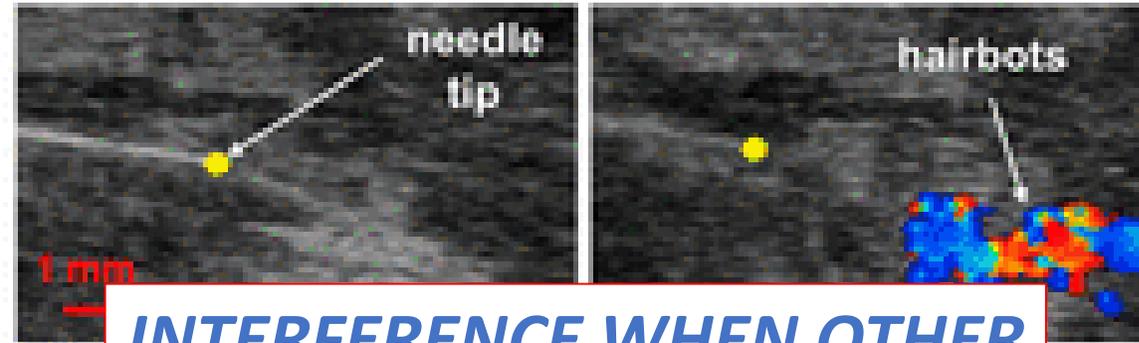
MICROBOTS IN US



# Microrobots US imaging – examples

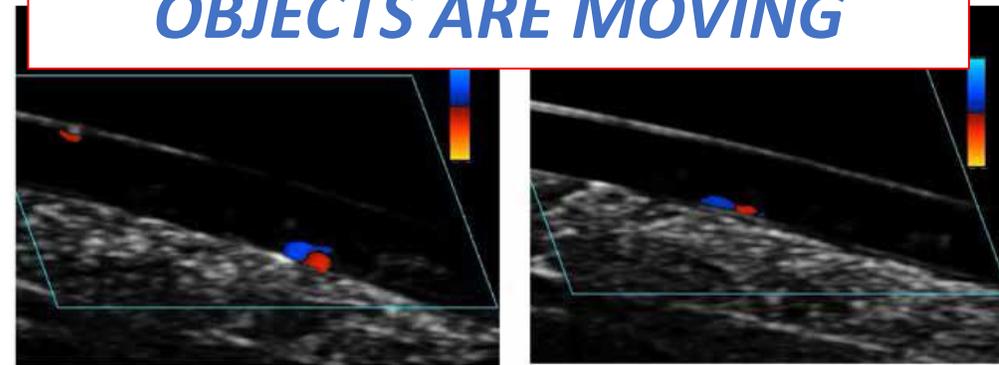


**Motion-based analysis can help  
OPPORTUNITIES OFFERED BY DOPPLER IMAGING**



**INTERFERENCE WHEN OTHER  
OBJECTS ARE MOVING**

2019

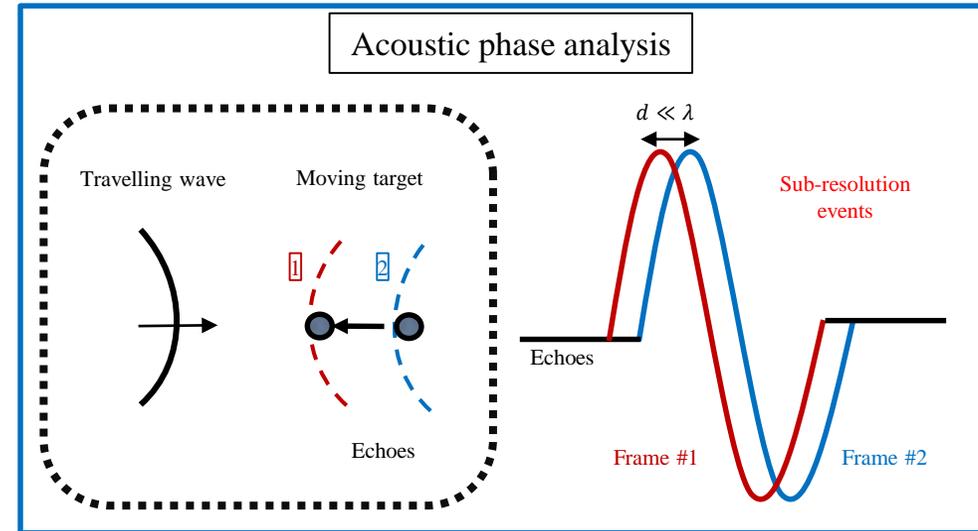
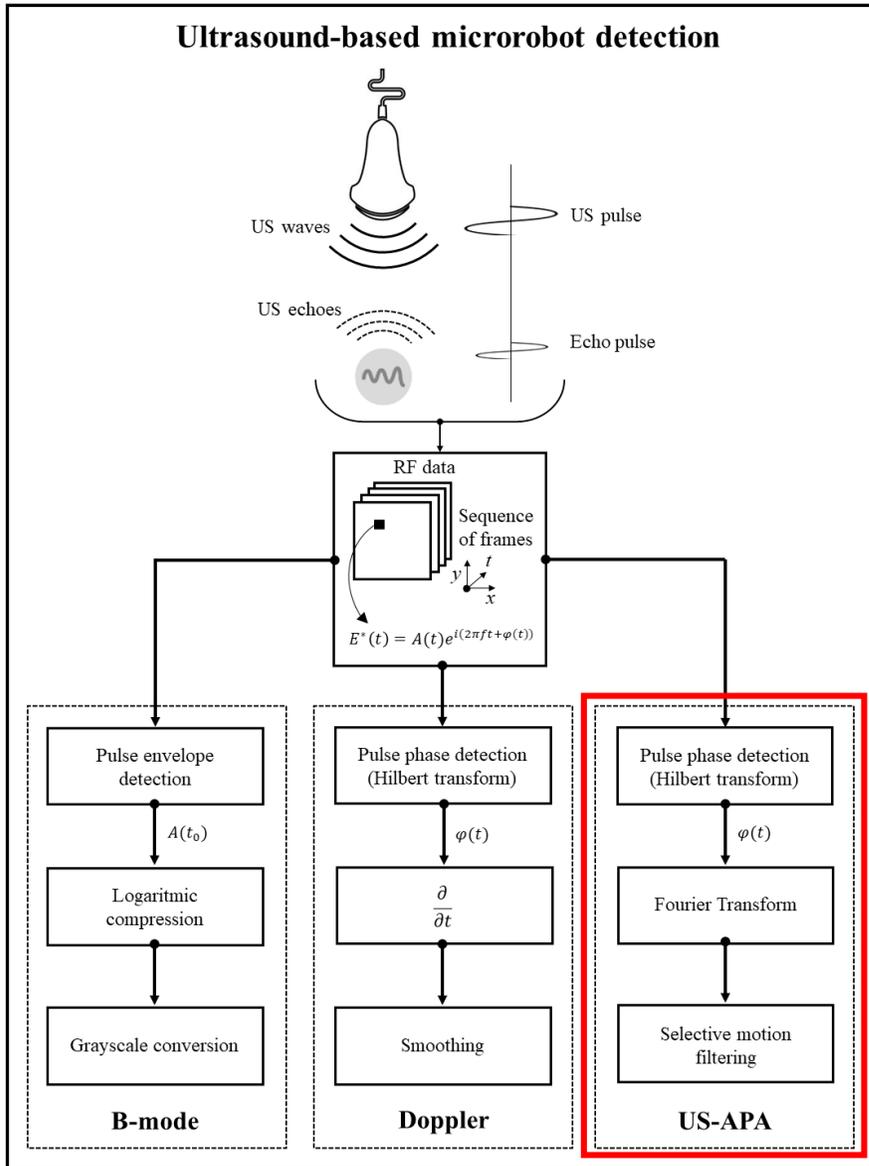


Wang et al., Science Advances, 2021



# Microrobots US imaging – examples

Selective motion filtering can improve tracking stability and precision  
**ACOUSTIC PHASE ANALYSIS (APA)**



Analytic echo signal

$$E(t) = A(t)e^{\varphi(t)} \longrightarrow \varphi(t) = \frac{4\pi}{\lambda} u(t)$$

Acoustic intensity

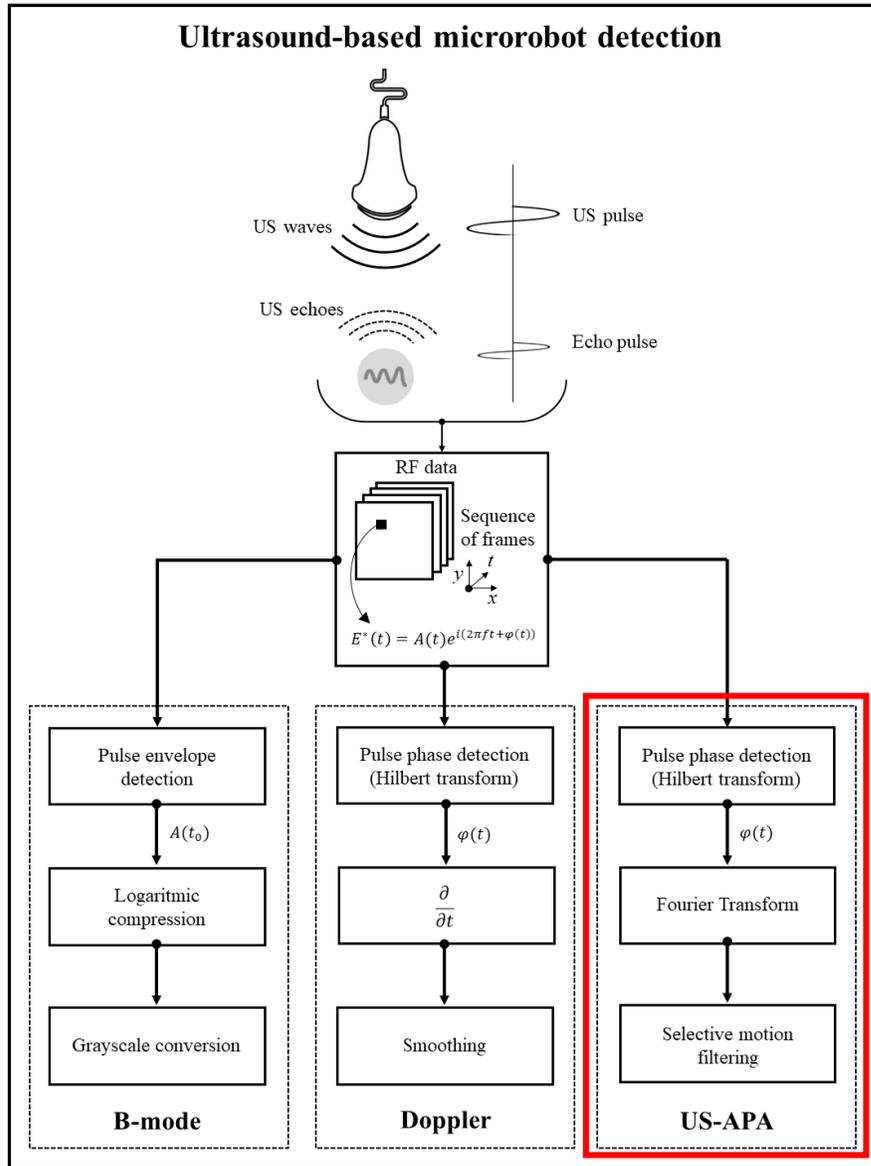
Acoustic phase

Target Motion projection on pulse axis

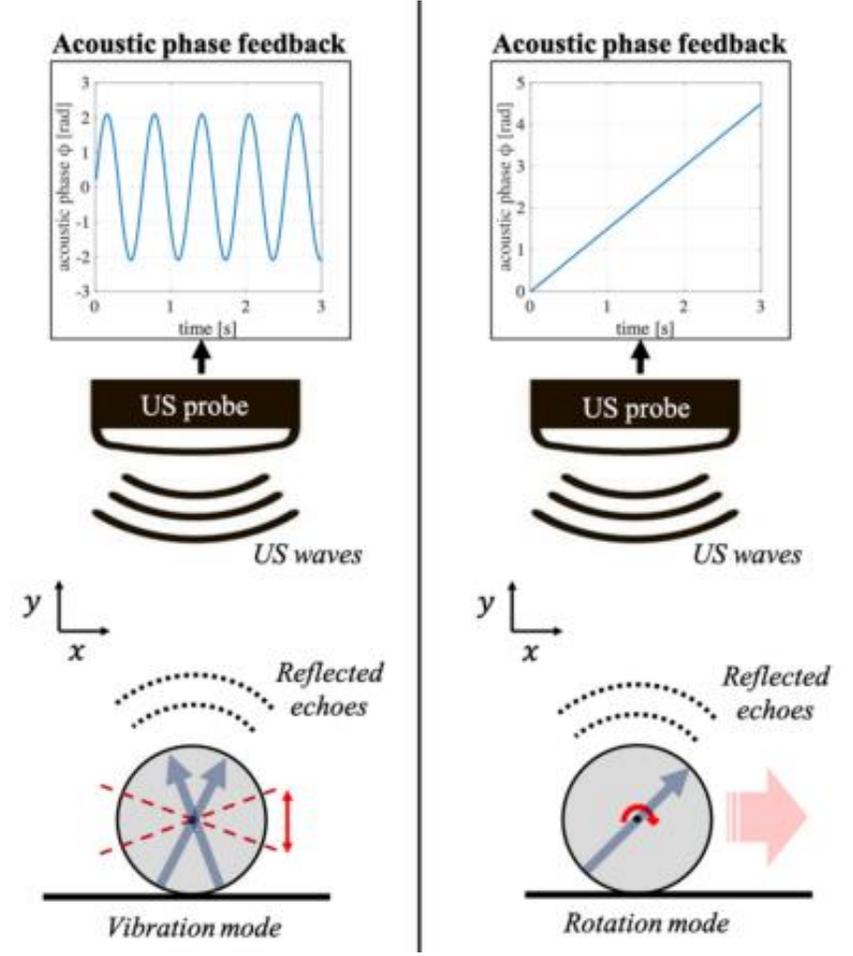


# Microrobots US imaging – APA

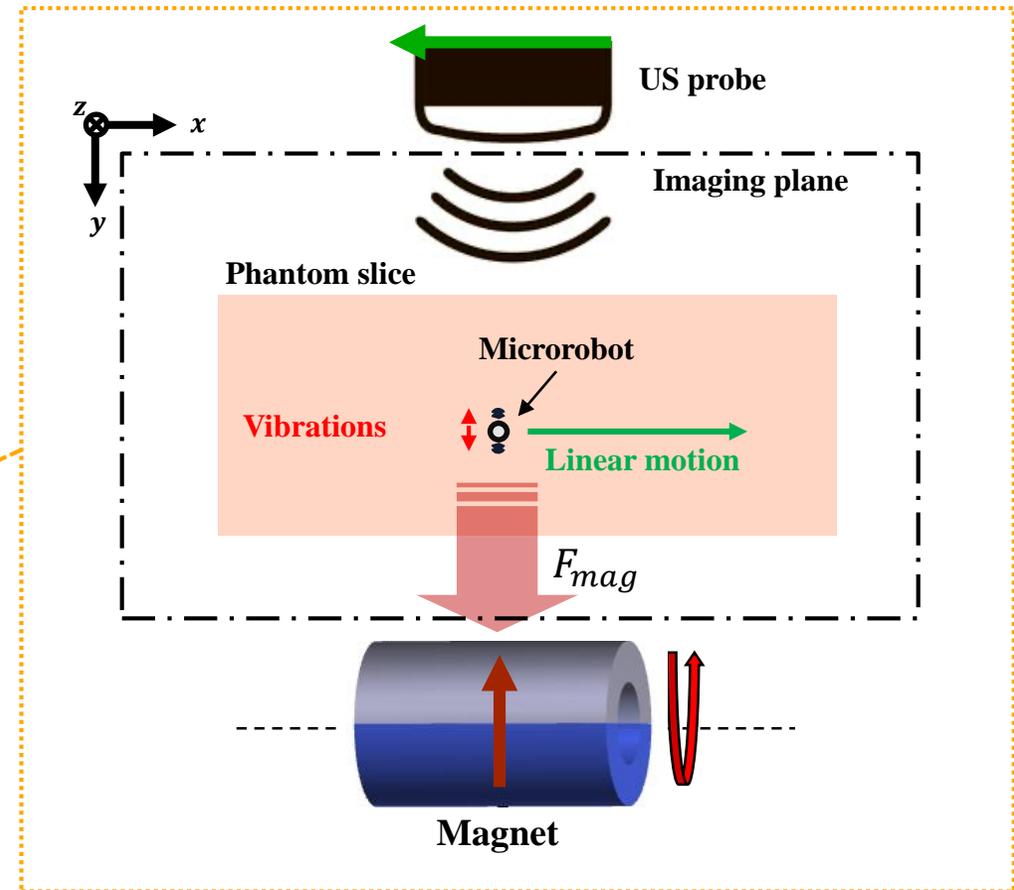
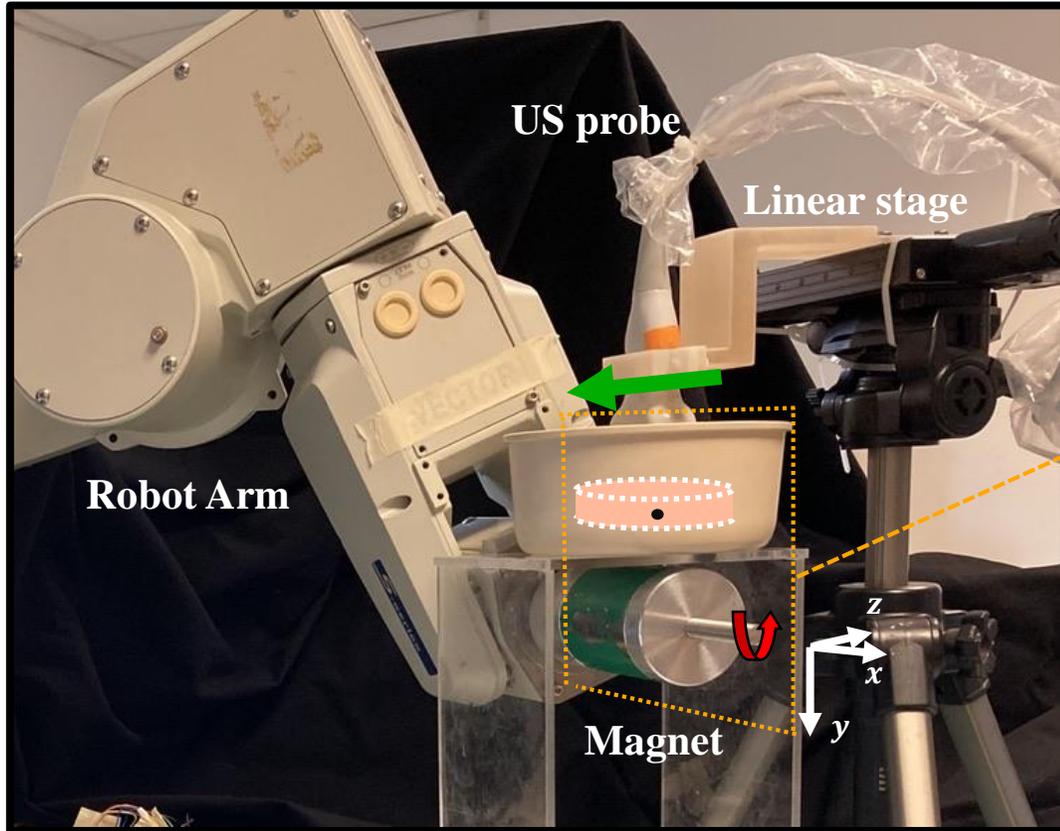
Different microrobot locomotions induce different phase feedback



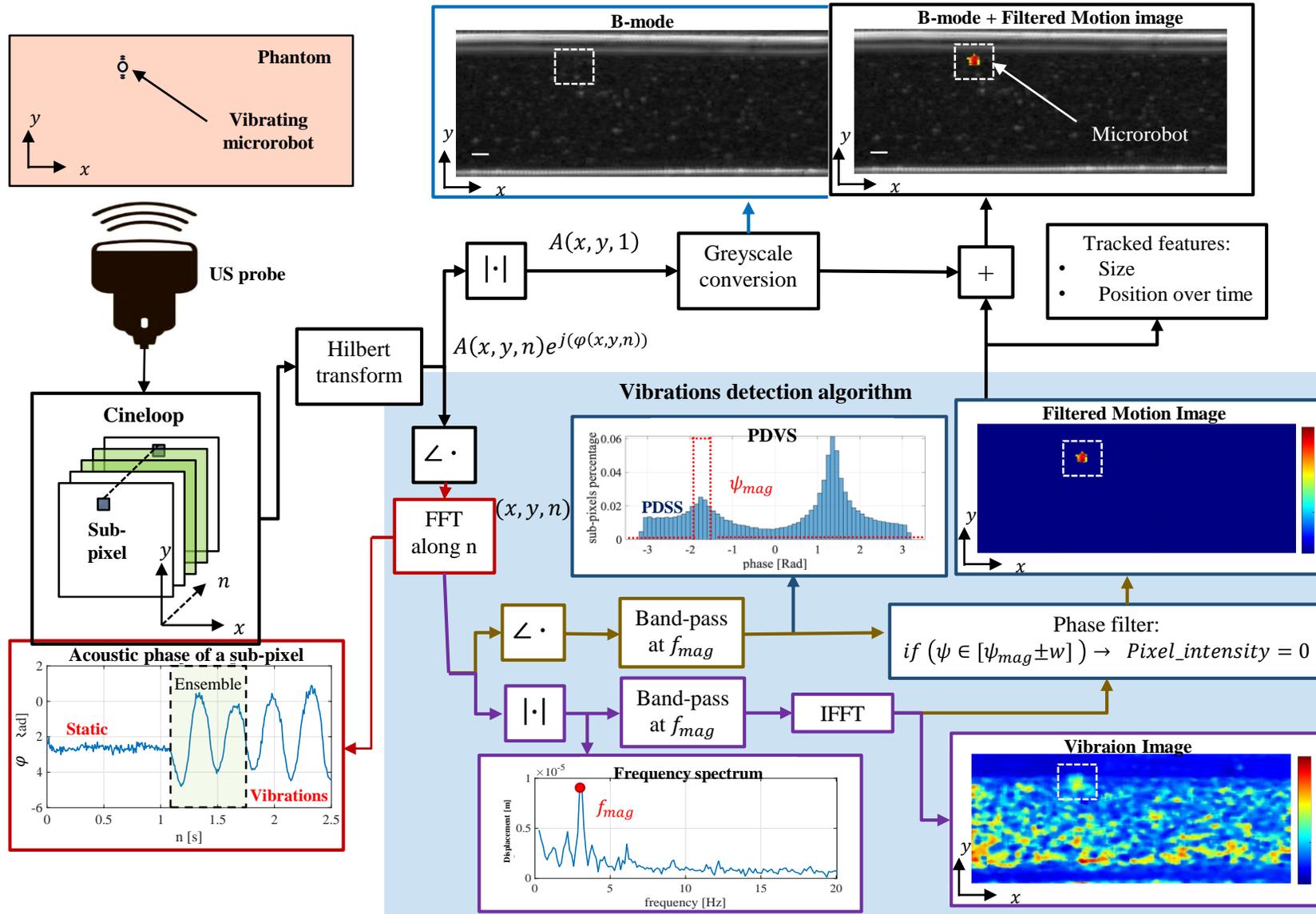
$$\phi(t) = \frac{4\pi}{\lambda} u(t)$$



# Experimental setup for real-time imaging and tracking



# Vibrations detection algorithm



**1. Fourier analysis**  
*Analyze the frequency components of the acoustic phase*

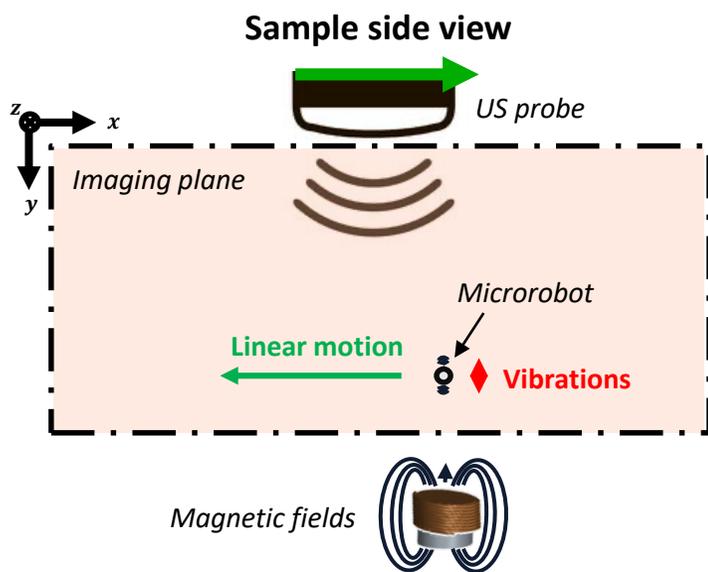
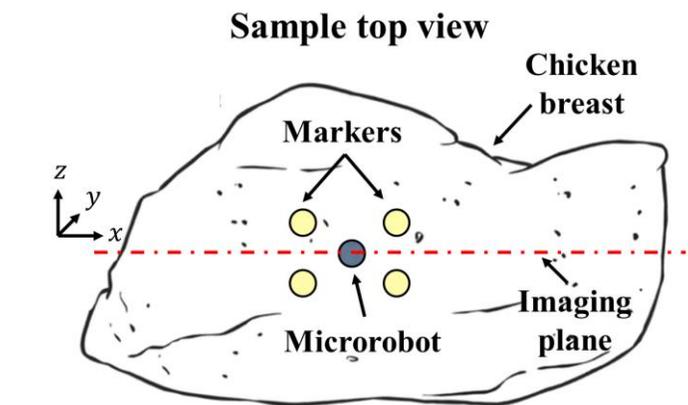
**2. Frequency filtering**  
*Isolate vibrations at microrobot frequency*

**3. Phase filtering**  
*Isolate vibrations in-phase with the magnetic field*

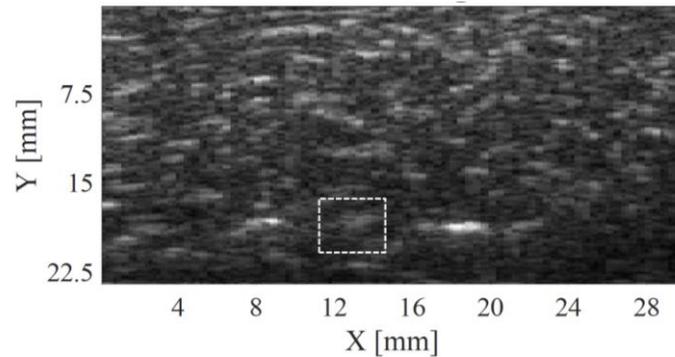
**4. Overlap with B-mode**



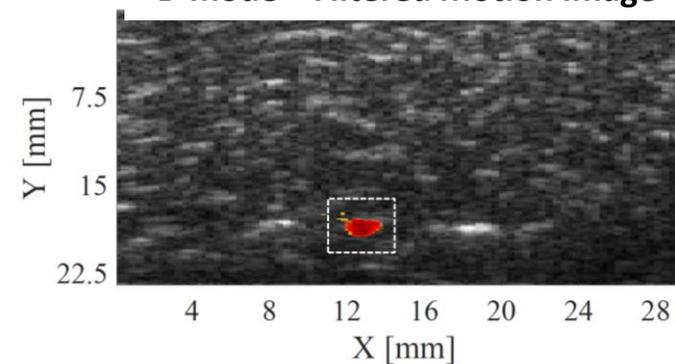
# Tracking soft vibrating microrobots in tissues



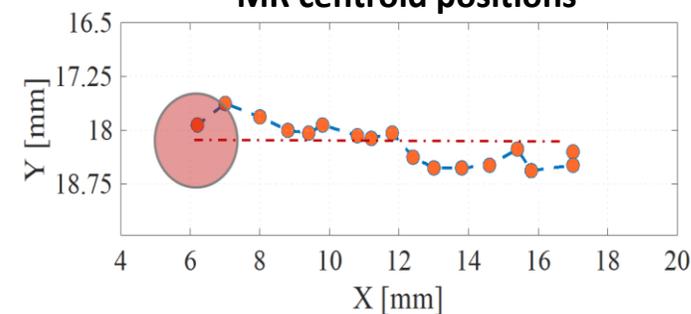
B-mode



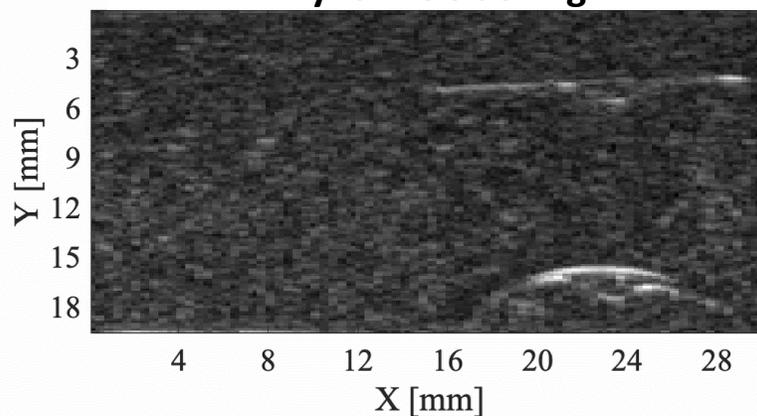
B-mode + Filtered Motion Image



MR centroid positions



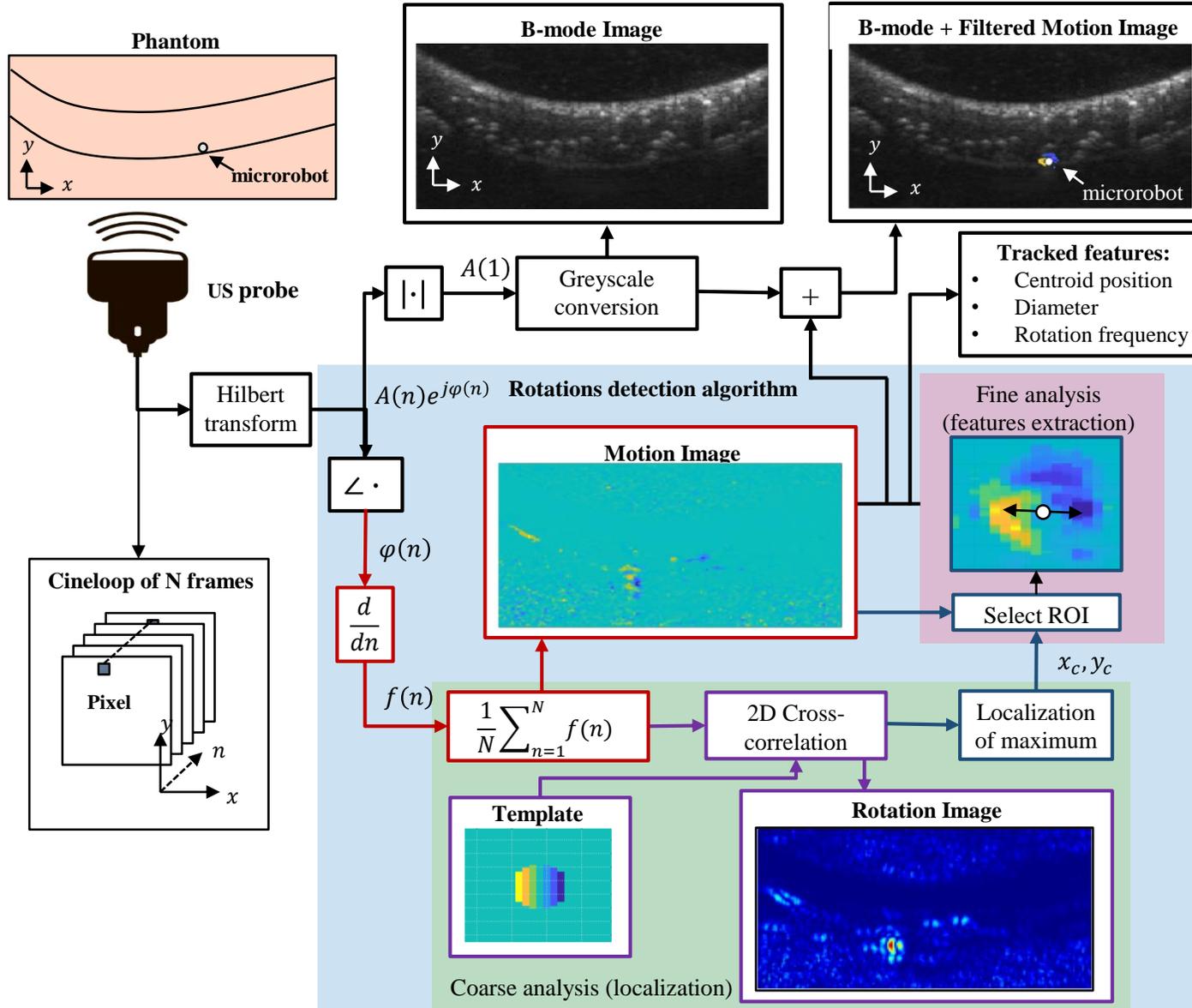
Dynamic tracking



MR diameter	1 mm
MR vibration frequency	3 Hz
MR linear velocity	1 body-length/s
Position tracking err.	0.25 body-length
Tracking frame rate	1.5 fps



# Rotations detection algorithm



**1. Temporal analysis**  
*Analyze the differential phase in the time domain*

**2. Block-matching**  
*Cross-correlate the mean differential phase with a rotation template*

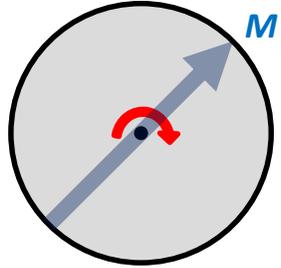
**3. Derive microrobot features**  
*Localize the maximum in the cross-correlation map and identify size of motion diagram*

**4. Overlap with B-mode**

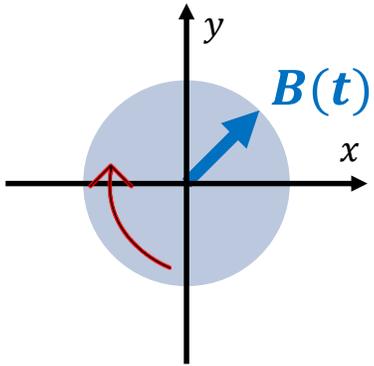


# Tracking rotating microrobots in vascular phantom

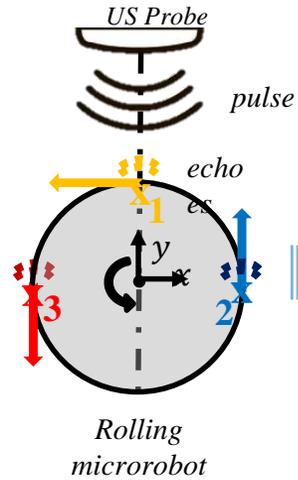
Rotating Microrobot



Magnetic field sequence

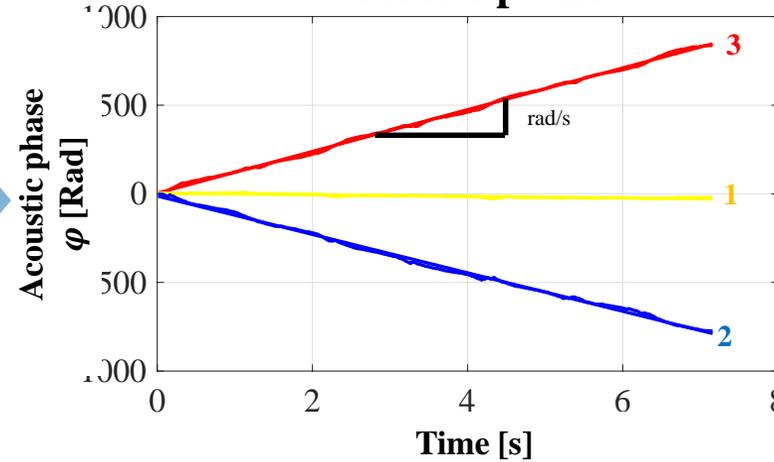


$$\begin{cases} B_x = |B| * \sin(2\pi f_{rot}t) \\ B_y = |B| * \cos(2\pi f_{rot}t) \end{cases}$$



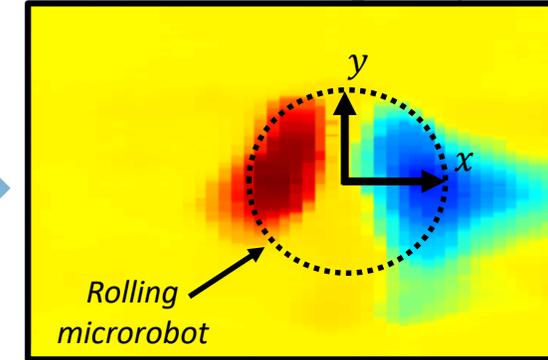
MR diameter	550 $\mu\text{m}$
MR vibration frequency	5 Hz
MR Rotation frequency	1.5 Hz
Flow rate	3 mL/s
Position tracking err.	130 $\mu\text{m}$
Tracking frame rate	3 fps

Acoustic phase

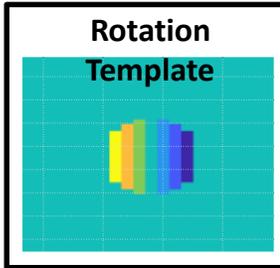
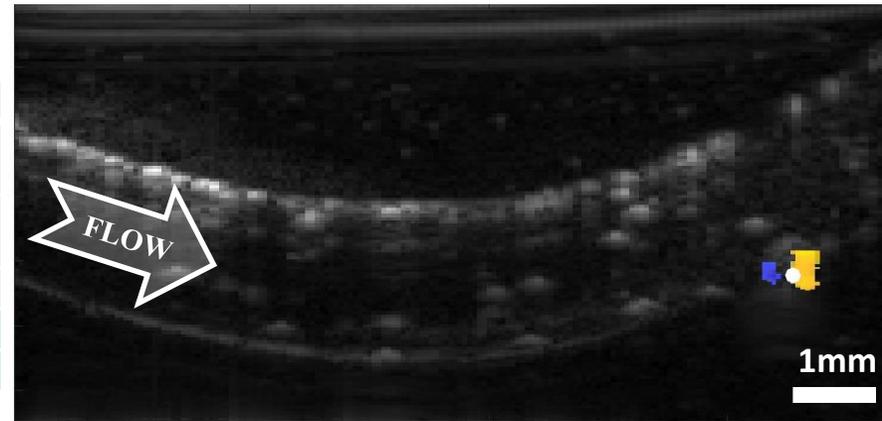


$d\phi/dt$

Acoustic frequency



Phase-based tracking images

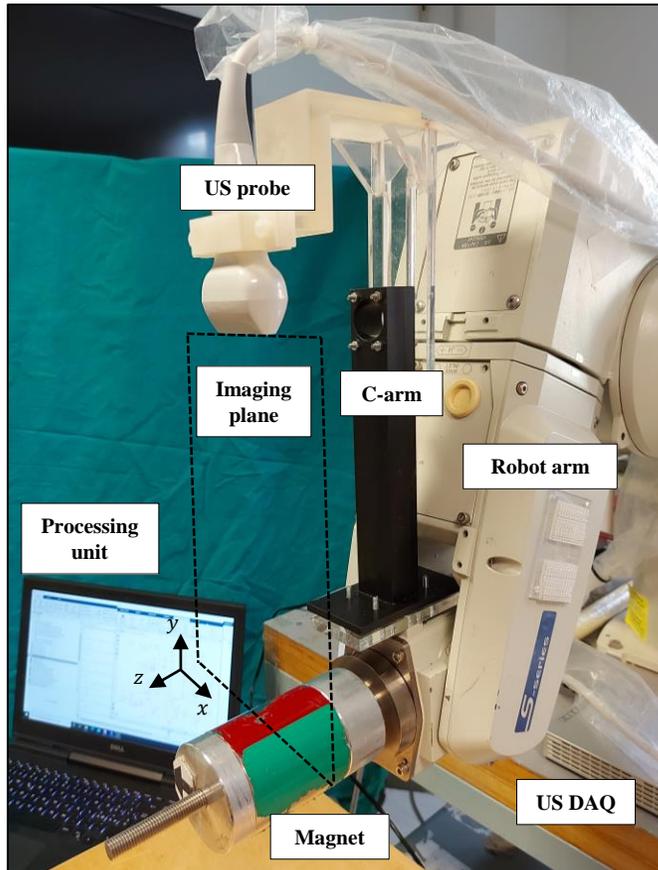


Cross-Correlation

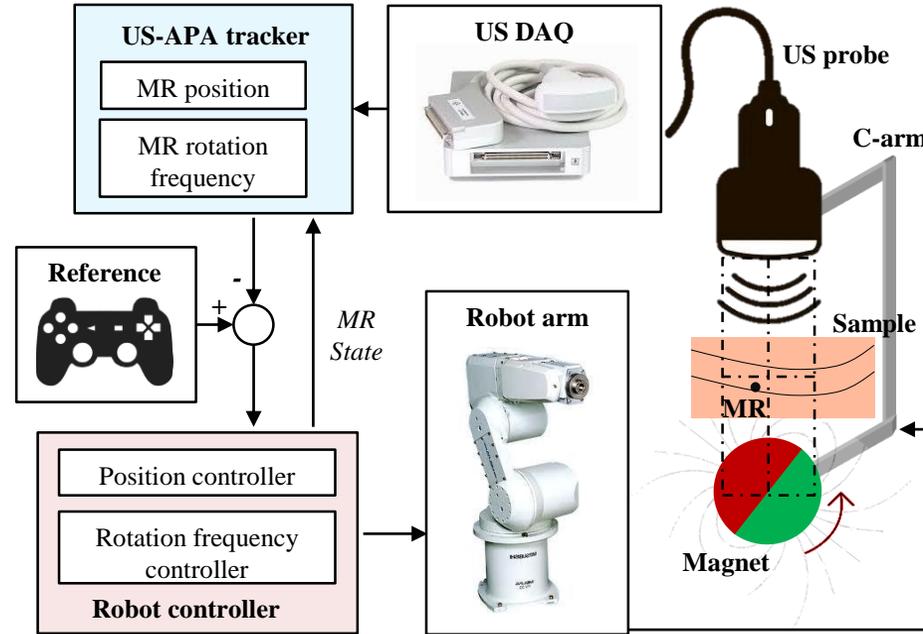


# Use APA feedback for control

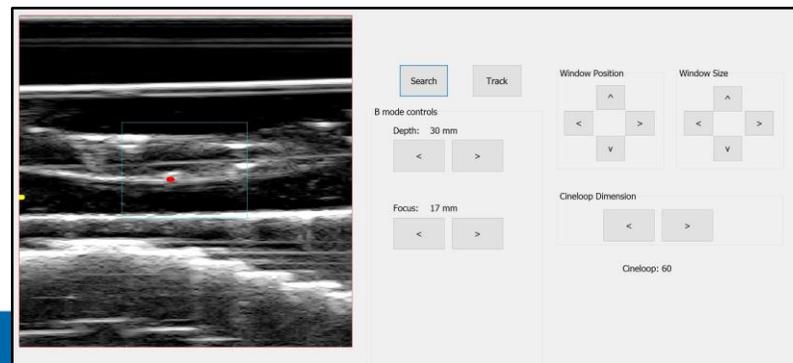
Robotic visual-servoing platform



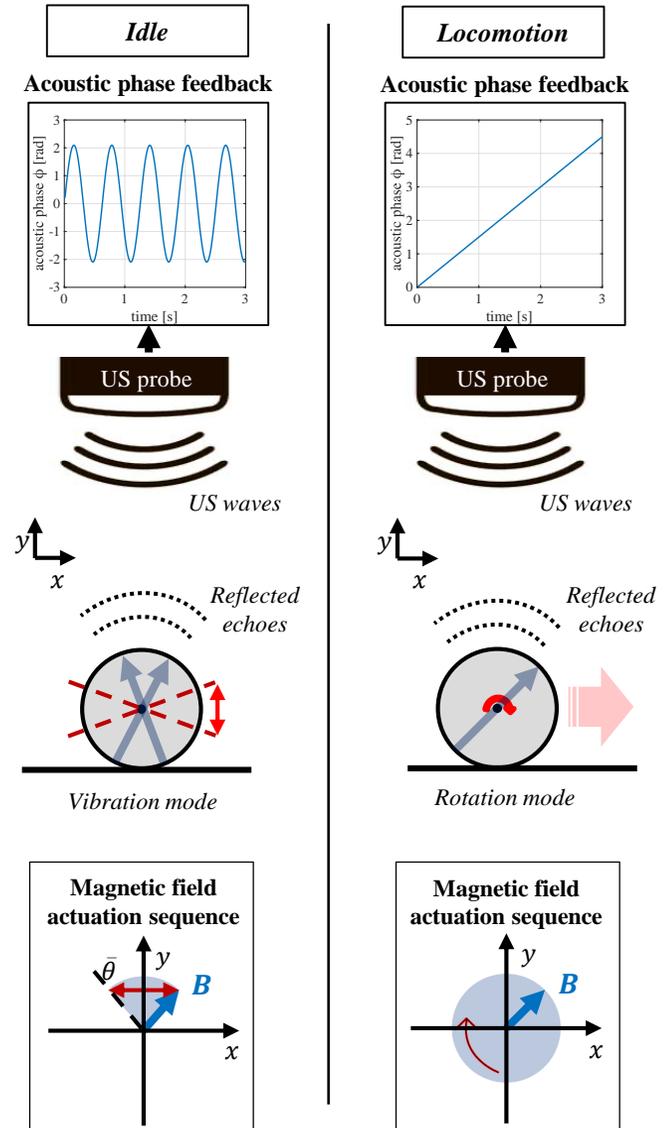
Closed-loop control architecture



User interface

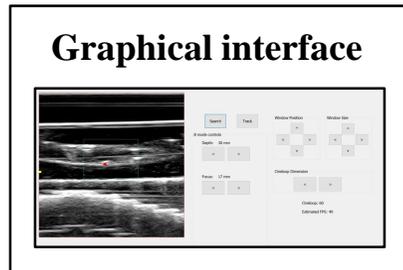


Microrobot states

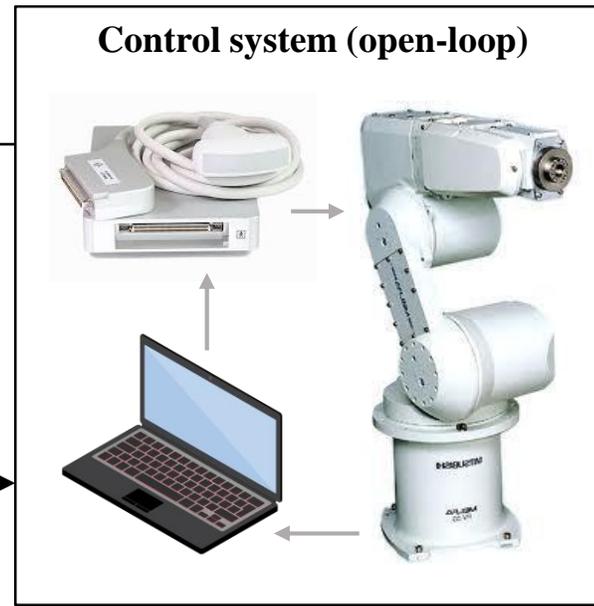


# Microrobot blind localization

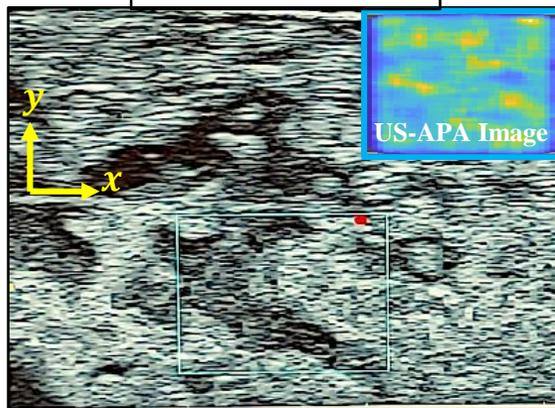
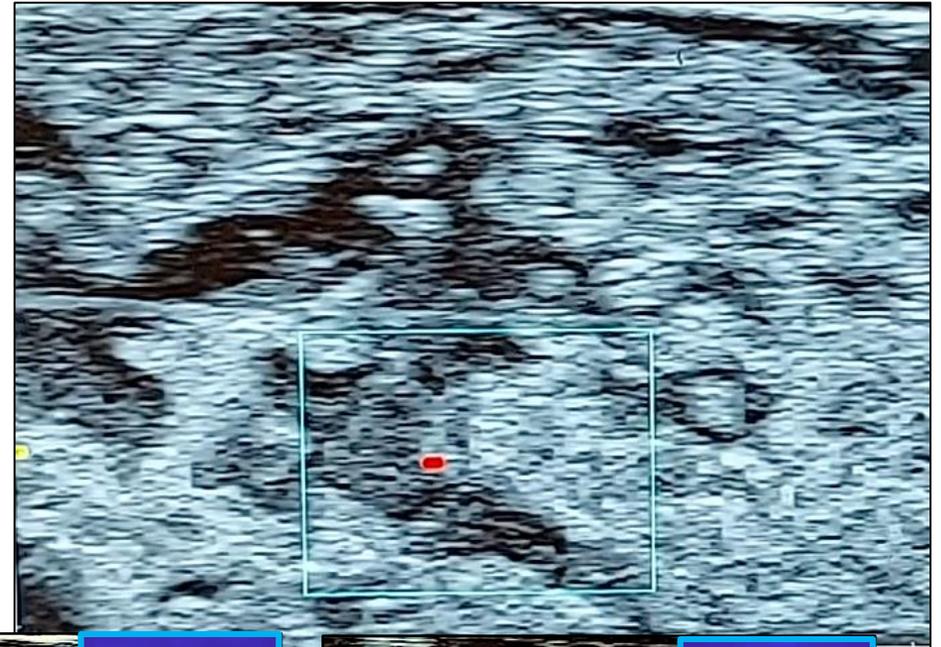
Visual feedback



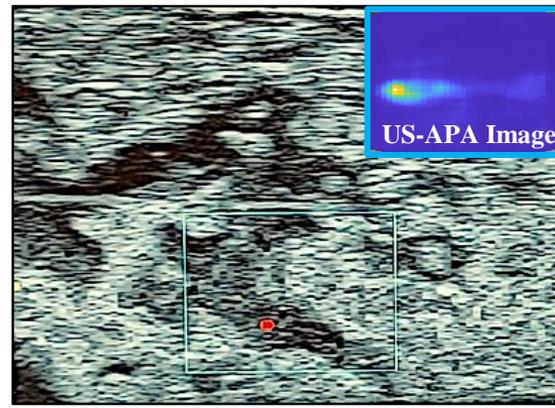
Visual feedback



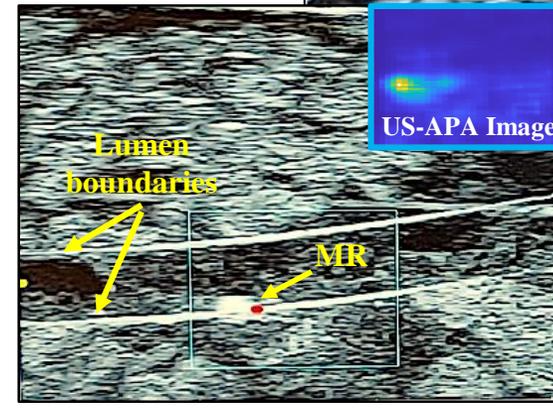
Robot arm  
cartesian position



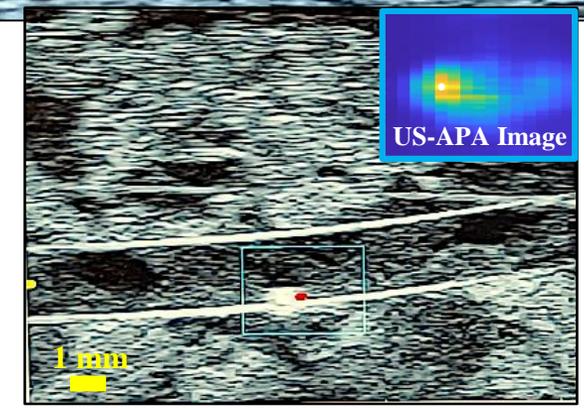
1. System start: MR not vibrating



2. Controller start: supervised search mode



3. MR found: set optimal imaging plane

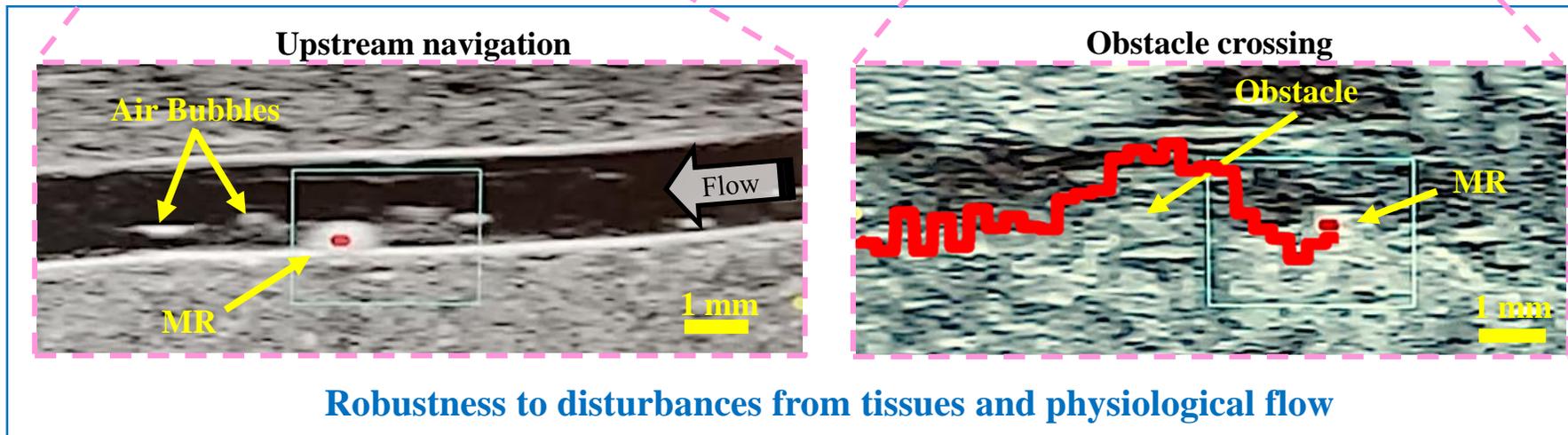
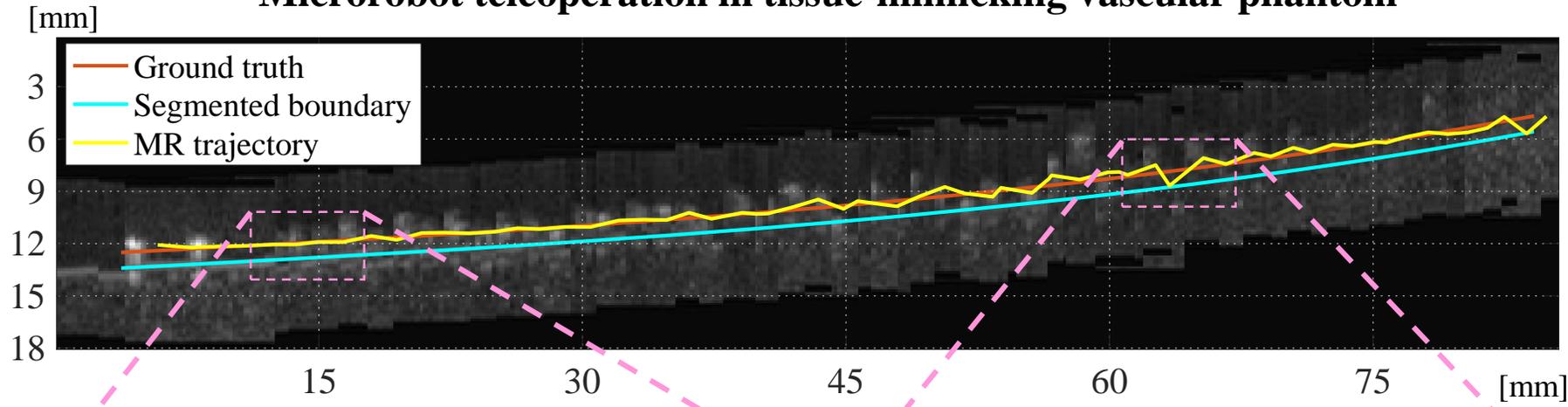


4. Teleoperation start: visual-servoing mode



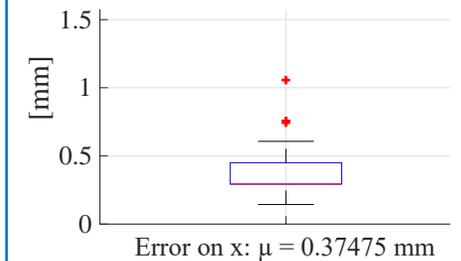
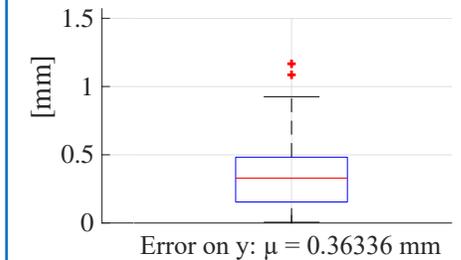
# Closed-loop control performances

## Microrobot teleoperation in tissue-mimicking vascular phantom



## System performances

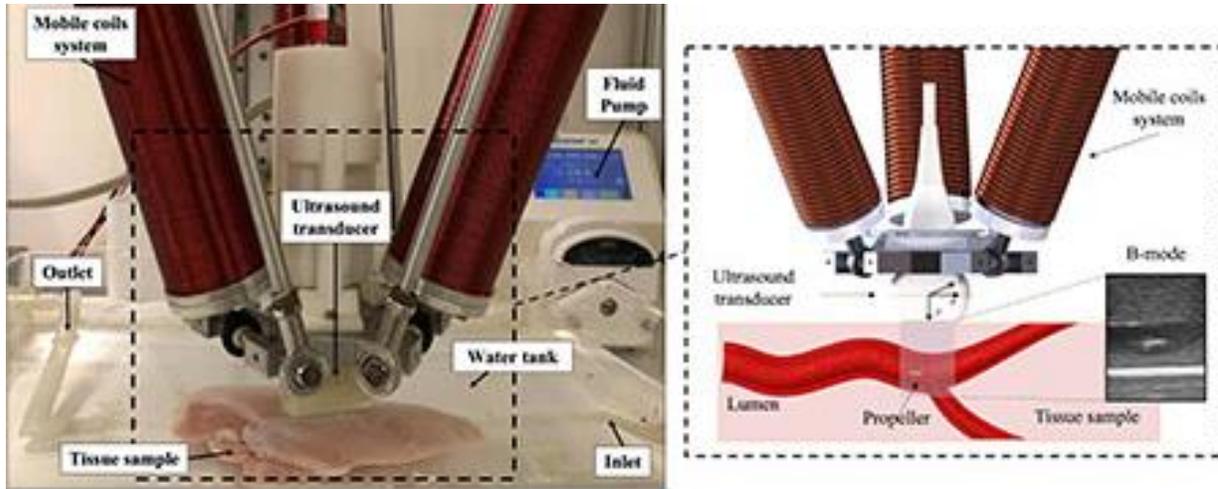
### Average tracking error $\mu$



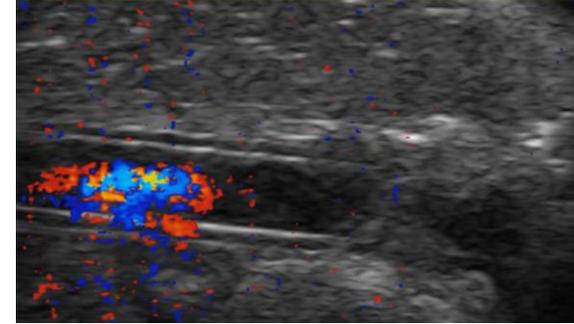
**Precision**  
 $\mu < 1$  body-length



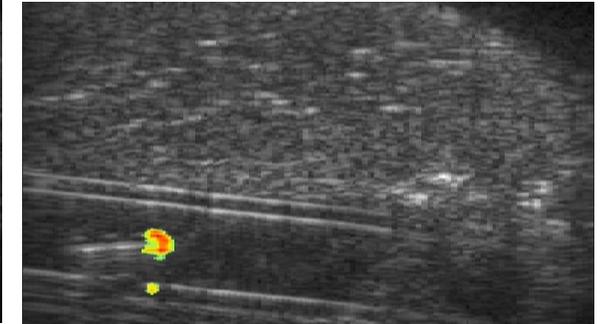
# At a glance comparison between APA and Doppler



## Static background conditions



Color Doppler



US-APA + B-mode

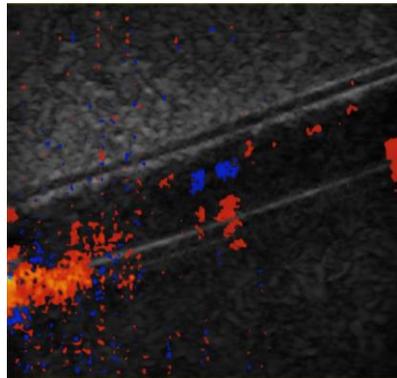


APL Bioengineering

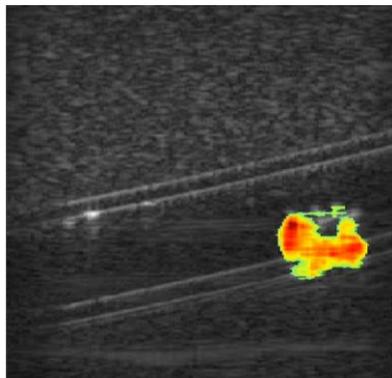
**Disturbance:** fluid flow motion

**Disturbance:** tissue motion

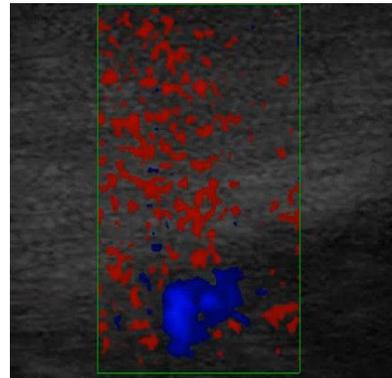
**Disturbance:** fluid flow in bifurcation



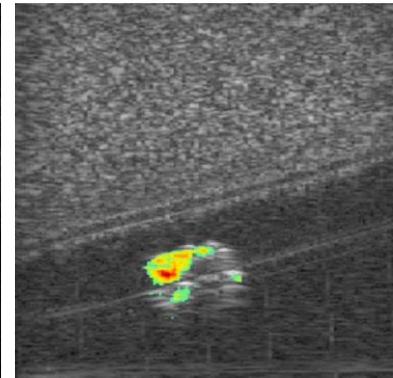
Color Doppler



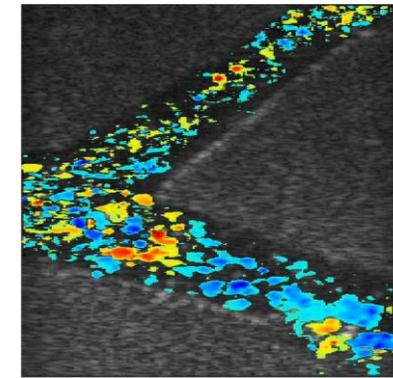
US-APA + B-mode



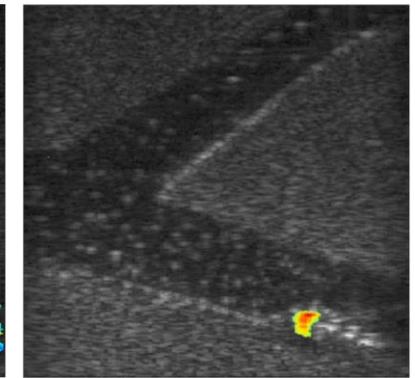
Color Doppler



US-APA + B-mode



Color Doppler



US-APA + B-mode



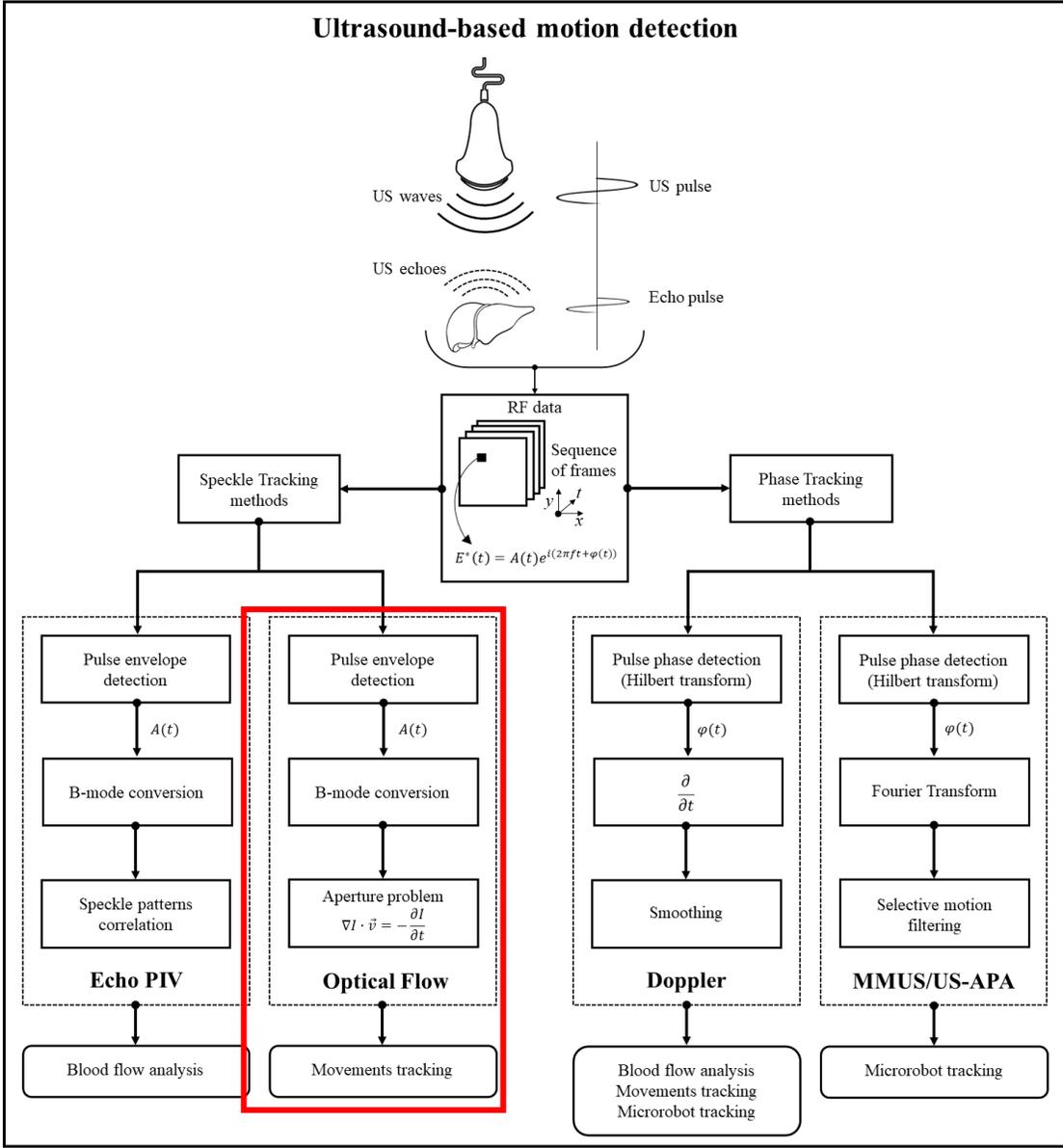
# Motion detection by US imaging: Could more traditional solutions work?

APA requires specific US imaging devices (need for RF data) and low temporal performances (few Hz)

**Difficult translation**

There exist other motion detection strategies with higher output rates and based on standard Bmode

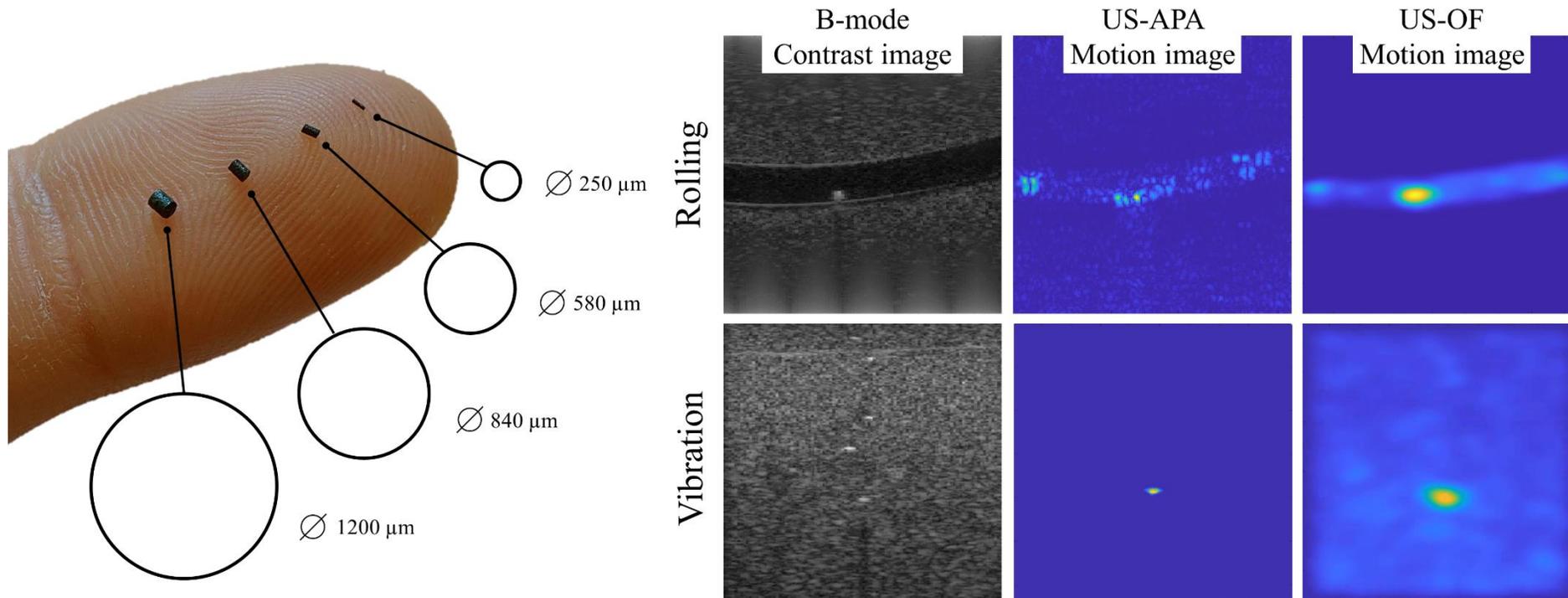
One option is **OPTICAL FLOW**



# Comparison between APA and Optical Flow

The comparison between the two techniques was carried out considering:

- Different microrobot dimensions (from 1200 to 250  $\mu\text{m}$  in diameter)
- Different locomotion patterns (rolling and vibration from 5 to 1 Hz)
- Different environmental conditions (vascular and tissue-like)

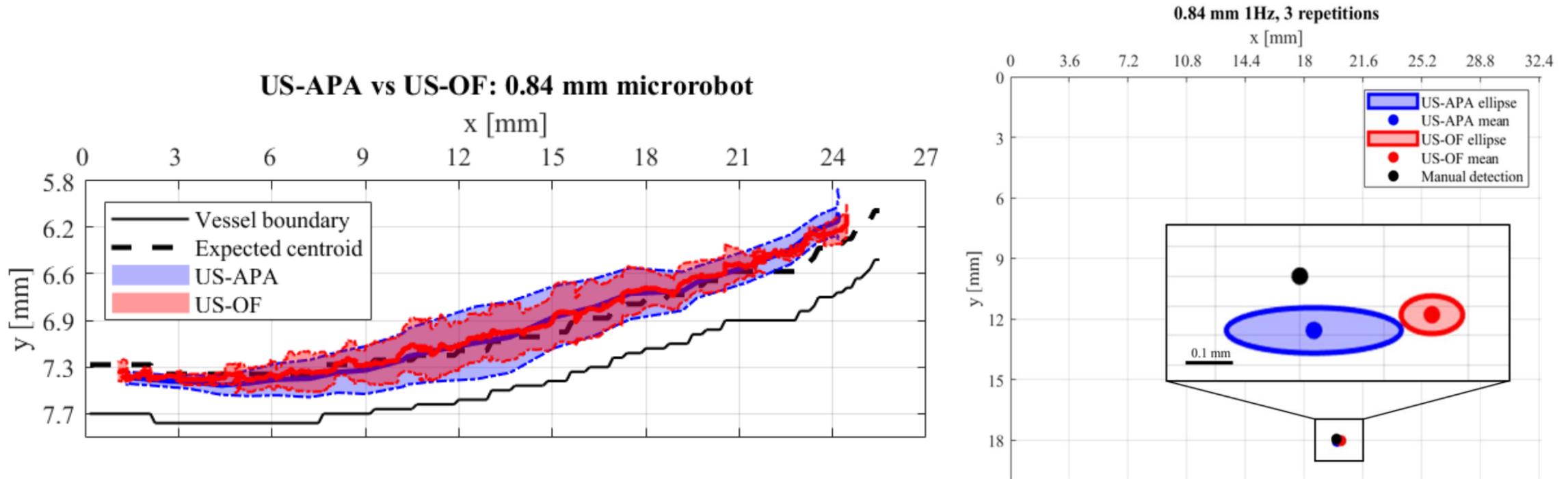


# Comparison between APA and Optical Flow

Optical Flow consistently achieved submillimetric tracking accuracies in all tested conditions  
(error < 0.6 *body length* for rolling ~1 *body length* for vibration)

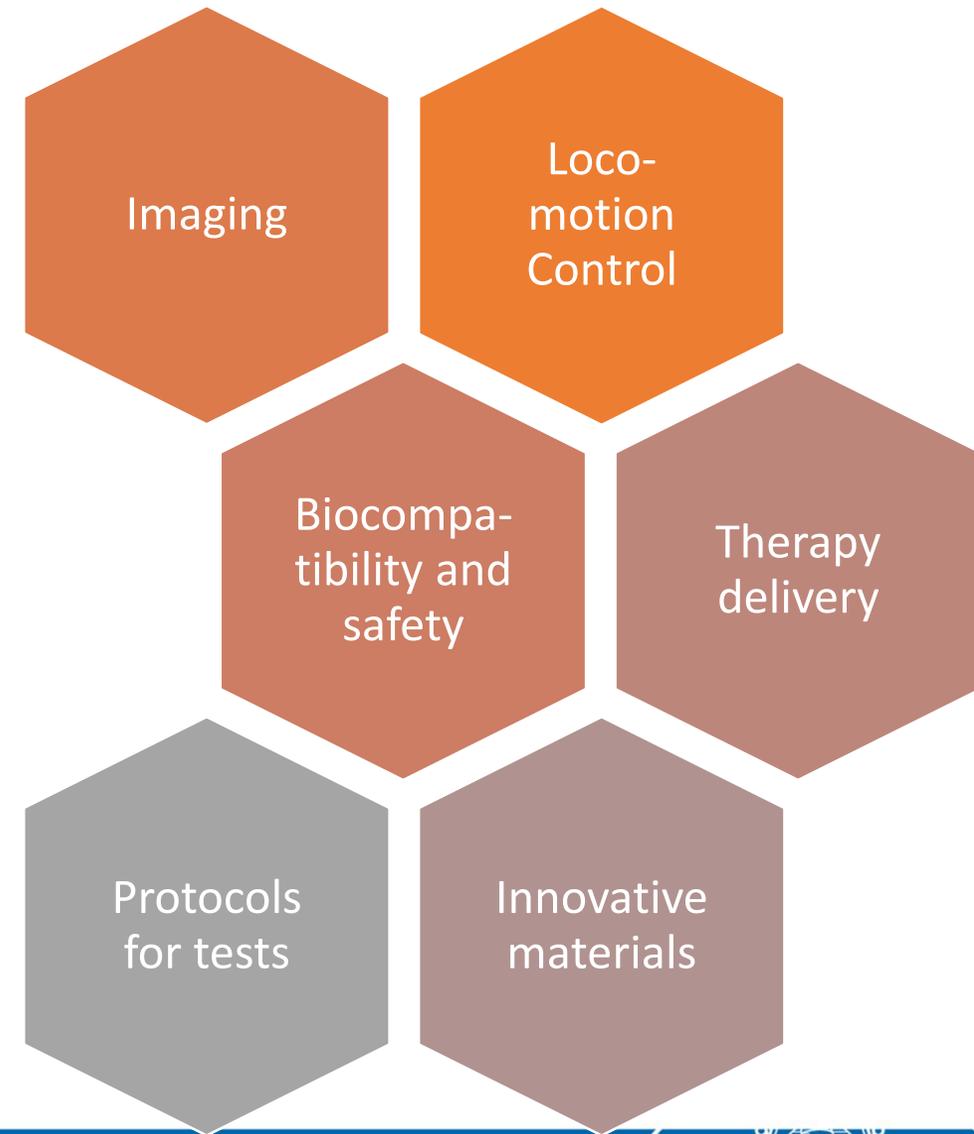
Spatial performances are comparable to US-APA with no need for RF data

Major increase in output rate from 1-2 Hz up to 40 Hz



# Conclusions

- Many challenges are still ahead, but motivations are strong!
- It is time to think about more advanced paradigms for microrobotic control, application, human interaction...
- Open research platforms and published datasets are key for developing / testing new methodologies
- Identifying the correct balance between AI methods and physical modelling in the miniature/micro domain





# Thank you for your attention!



European  
Commission

Horizon 2020  
European Union funding  
for Research & Innovation



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