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# An Open Source Framework for Surgical Simulation

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## Abstract

In this work a software framework for the virtual surgical simulation is presented. Our environment ESQUI<sup>1</sup> is based on an open software and multi-platform architecture (Unix, Windows, etc.), resulting in a suitable framework for research and development. The modularity and connectivity between its components allow the environment to be extensible and adaptable to any type of virtual simulation. The virtual surgical scene is described by an XML file that contains all the necessary information for the simulation. This file description language has been named Surgical Reality Modeling Language (SRML). Although our framework is still under development and needs validation in education and clinical training, our environment ESQUI has proved to be a modular platform that runs across most important areas of virtual surgical simulation.

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During the last years, surgical simulation has become a versatile means for learning and training surgery, mainly minimally invasive surgery (MIS)[15], which due to its peculiarities (new procedures of access in

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<sup>1</sup>The acronym comes from the Spanish “Entorno para Simulación QUIrúrgica”, i.e. Framework for Surgical Simulation

the intervention, specialized instruments, etc.) needs specific learning and training. For MIS learning and training, surgical simulators do not only contribute to the synthetic creation of interactive scenes that reproduce certain interventions with certain properties, perhaps difficult to reproduce in animals or in corpses, but also reduce the time needed by experts supervising the learning or training process. Therefore, one of the challenges of the technology applied to the medicine has been the surgical simulation. This challenge has a significant impact on groups and research centers, as well as on the surgical industry. Let's consider examples such as the Spanish Network SINERGIA ([www.ctm.ulpgc.es/sinergia](http://www.ctm.ulpgc.es/sinergia)), with more than ten groups (among them we have universities, clinical centers and hospitals) in Spain, and the industrial studies of trends [13].

In this paper we propose a framework called ESQUI based on multi-platform open source software. Although our environment is intended for any surgical technique, at this moment it is applied to laparoscopic surgery. Our framework includes 3D modeling, simulation and haptic connectivity. In addition, our software uses a description file of the surgical scene, which we have named Surgical Reality Modeling Language (SRML).

The paper is organized as follows. First, we make a description of the software architecture of ESQUI, describing briefly the functionality of each one of its components. Then, we present the description SRML file, and the advantages of its use in a surgical simulation environment. Finally, we present some conclusions and future lines.

## 1 ESQUI Overview

The environment ESQUI is a software framework that has been developed in our R&D group as part of our efforts in surgical simulation. Mainly, ESQUI is the result of the second author Master Thesis [11] (supervised by the first author), our participation in the National Network Sinergia ([www.ctm.ulpgc.es/sinergia](http://www.ctm.ulpgc.es/sinergia)), and the interest of the ITC,S.A. in this line of work.

At this moment, ESQUI is distributed under the Creative Commons' "by-attribution" license (<http://creativecommons.org/licenses/by/2.5>).

The framework deals with the three great areas of surgical simulation: design and generation of 3D scenes, software algorithms for simulation (collisions, deformations, etc.), and management of the information in the surgical scene. Although ESQUI has been developed for laparoscopic surgery, it can be applied to any other.

### 1.1 Implementation and Software Requirements

Surgical simulators are computer software projects including some type of hardware (i.e. haptic device) to interact with the user. This kind of software is usually too big and complicated to be written by one person acting alone and it almost always requires collaboration and joint development. Also, many platforms (Unix, windows, etc.) can be used for developing. Therefore, in our opinion, the success of a surgical simulator project depends of the development tools used for the generation of extensible and re-usable software, and the population of the community that support that tools.

ESQUI has been implemented using open source and multi-platform software: Blender [1], python [16], VTK [18][19], and Tcl/Tk [7]. The wide community of these toolkits or packages allows ESQUI benefits of the control version quality and improvement carried out by the international community. In our environment, except Blender, the software has been programmed in our group. We have defined the basic structure

of the framework around VTK, recoding or wrapping algorithms under VTK/ Tcl-Tk.

Platform or compiler dependency is avoided using Cmake open-source make system [12]. We control versions using subversion [6], and the code is documented using doxygen [3]. In the near future, we will include an interface with DART [2] for testing the software.

## 1.2 Surgical Scenes

Although many software packages exist for 3D modeling, in ESQUI we use an open source and multi-platform software: Blender [1]. This software package presents some points of interest for our project:

- Open source and multi-platform.
- Tools for 3D design and modelling.
- A command interface under python that allows to include scripts to modify the 3D scene.

Based on these points we find some advantages:

- To share 3D scenes from different platforms.
- Connect VTK to a 3D modeling software.

We have modified the work of [8] to exchange 3D models (polygons and textures) between Blender and VTK. This connectivity is very important for us, because 3D models generated from real medical images (MRI, CT, US, etc.), using own or third-party software (i.e. diSNei [10], Slicer [20], etc.), can be loaded in Blender to add the effects of texture and realism, and finally used in the virtual simulator. Then, the surgical scenes can be made synthetically or with real information.

In figure 1, we present an example of a 3D model scene under Blender.

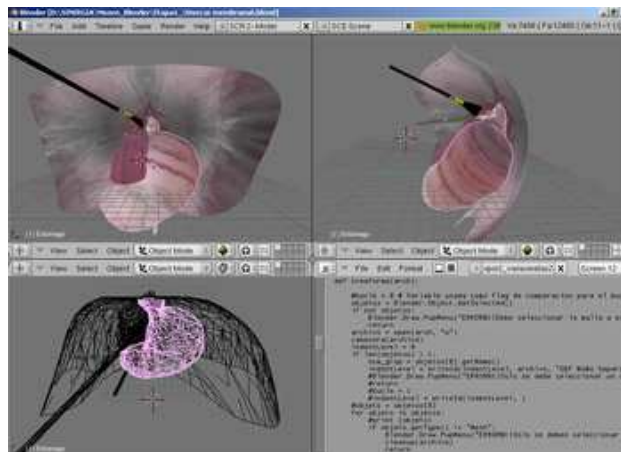


Figure 1: 3D modeling using Blender. The figure shows a surgical scene of the laparoscopic Nissen's procedure.

### 1.3 Scenes Description File: SRML

The complexity of a virtual surgical scene (virtual models, textures, illumination, location of the models, biomechanical properties, instruments, etc.) needs a description file that should be interchangeable and extensible. XML offers a standard for the interchange of data, and presents some important properties:

- The integration of data between applications and also within the own application.
- It shows clearly the relationship between data and information.
- Extensible and adaptable to new or future specifications.

Therefore, it seems suitable to implement a description file of a surgical scene using XML. With this objective the Surgical Reality Modeling Language, from now SRML, was born. SRML contains:

- Path to the virtual models files of tissues (.vtk for the models and .jpg for the textures) and the surgical instruments.
- Information about the tissues biomechanic properties and the biomechanical model to be used.
- Relative position of cameras and surgical instruments as well as positions and restrictions of movement.
- Environment properties in the surgical scene (direction of the gravity force, luminosity, etc.).

In the text below, we show an example of a SRML file.

```
<!DOCTYPE SRML SYSTEM 'SRML.dtd'>
<SRML>
<Undeformable>
  <UnDefModel VTKName='Escenarios/Cuerpo_Inclusion.vtk'
TextureFile= 'Escenarios/black.jpg'></UnDefModel>
  <UnDefModel VTKName= ' Escenarios/FORMAL/Marco.vtk '
TextureFile= ' Escenarios/GRIS.JPG '></UnDefModel>
</Undeformable>
<Deformable>
<DefModel VTKName= 'Escenarios/FORMAL.vtk ' TextureFile= ' Escenarios/FORMAL/FORMAL.JPG '
DEFModel= ' MASS-SPRING ' StrongFactor= '0.000000' CanBeImpudent= '1' CanGetHookedUp= '1'
ContainsFluids= '1' BEMYoungModulus= '15.000000' BEMPoissonRatio= '0.400000' BEMDensity= '1.000000'
BEMAlpha= '10.000000' BEMOmega= '0.300000' BEMGamma= '50.000000'
BoundaryConditionsX= ' {153 154 155 156 157 158 159 160 161 162 163 152 141 129 110 87 64 45 32 20
21 19 17 15 13 11 9 7 5 3 1 0 22 33 46 65 88 111 130 142} '
BoundaryConditionsY= ' {153 154 155 156 157 158 159 160 161 162 163 152 141 129 110 87 64 45 32 20
21 19 17 15 13 11 9 7 5 3 1 0 22 33 46 65 88 111 130 142} '
BoundaryConditionsZ= ' {153 154 155 156 157 158 159 160 161 162 163 152 141 129 110 87 64 45 32 20
21 19 17 15 13 11 9 7 5 3 1 0 22 33 46 65 88 111 130 142} '></DefModel>
</Deformable>
<Entorno>
<Name name= ' FORMAL '></Name>
<Gravity Place= '0.000000 1.000000 0.000000' Direction = '1'></Gravity>
<Ligth EnviromentLigth= '0.000000 0.000000 0.000000'
DifuseLigth= '1.000000 1.000000 1.000000'
```

```

EspeularLigth= '1.000000 1.000000 1.000000'
LigthIntensity='0.750000'>
</Ligth>
<Tools VTKName= '../Tools/tools1.vtk' Ratio= '0.300000'
PointOfEntry= '-1.474732 -4.723502 -7.500000'
InitPoint= '-2.616987 -4.723502 -2.632223'
Orientation= '0.000000 0.114988 0.000000 0.993367'>
</Tools>
<Tools VTKName= '../Tools/tools2.vtk' Ratio= '0.300000'
PointOfEntry= '-8.671877 -4.845428 -7.500000'
InitPoint= '-7.632318 -4.845428 -2.609262'
Orientation= '0.000000 -0.104528 -0.000000 0.994522'>
</Tools>
<Camera OpenAngle='0.698131' PointOfEntry= '-5.034461 -4.793622 -7.500000'
InitPoint= '-5.034461 -4.793622 -7.500000' Orientation= '0.000000 0.000000 0.000000 1.000000'>
</Camera>
</Entorno>
</SRML>

```

Using this type of description avoids to use multiple files that duplicate information, without hierarchy and structure, and it allows our simulator to be extensible to new properties of the surgical scene (a new tag could be defined in the SRML).

#### 1.4 Simulation: Collisions and Deformations

ESQUI includes a software module for simulation (collisions and deformations). It has been implemented under VTK and Tcl/Tk, and our code design allows to include new algorithms (own or other people's) for collisions and deformations. At the present version, we have wrapped under VTK the algorithms of collisions proposed in [17] (distributed under the terms of the GNU Lesser General Public License [4]), and we have coded under VTK the biomechanical model proposed in [14].

In Figure 2 we show an example of ESQUI applied to laparoscopic surgery.

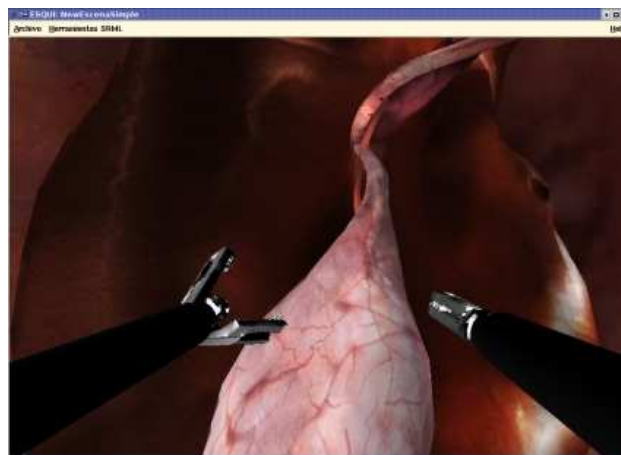


Figure 2: An example of ESQUI applied to laparoscopic surgery

## 1.5 Haptics

ESQUI is intended to work with haptic systems (man-machine interfaces). Our environment presents a VTK class to inherit the haptic's API wrapped under VTK.

Presently, we are using ESQUI for laparoscopic surgery, and it connects to a commercial laparoscopic surgical system. If the user doesn't have an haptic system, he is able to use the keyboard and mouse to drive the simulation.

## 2 Conclusions and Future Lines

In this paper we propose a framework for the virtual surgical simulation based on open source and multi-platform (Unix, windows, etc.) software. Our environment, ESQUI, includes a 3D modeling software (Blender) joined to a simulation software under VTK. Although it needs much work, we think that our software is an example of a open source project, and the community could use or adapt it to specific applications, and moreover, contribute to its development.

Our contribution to the community with this work could be summarized as:

- Description of the surgical scene. At the moment, there is no standard to describe surgical scenes which makes difficult the exchange of information between different simulators, users and developers. Therefore, with the SRML we propose an adaptable and extensible solution.
- A multi-platform and open source based software. Our environment has been developed under libraries/languages with a wide community of development. The code is adaptable and extensible.

Although ESQUI is being applied to laparoscopic surgery, our idea is to be able to extend it to any type of MIS technique. The type of MIS procedure and the haptic related information will be included in the SRML file. In addition, we are working to include more algorithms (own or other people's ) for collisions [9] and deformations, and studying the viability to recode under VTK some third-party algorithms (i.e. OpenTissue [21], Spring [5], etc).

Future lines are focused to develop a database software module for ESQUI to include scores in the didactic exercises for surgeons training. Nevertheless, our framework still needs more development and clinical validation to be able to use it for surgical training.

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