Prof. George Sutherland

- Lazzaro Spallanzani born Scandiano, Modena, Italy 1729-99.
- Jesuit priest. Universities of Bologna, Modena, Padua, Pavia.
- Experimental studies in bodily function, reproduction and animal echo-location.



- 1793 Showed that reflected echoes of an inaudible ultrasound signal enabled bats to navigate.
- These findings are the basis of all subsequent developments in clinical cardiac ultrasound!

History of Cardiac Ultrasound The Development of the Basic Principles 1700 - 1950





• 1880 – Paris



- The Curies (Curie P. & J.) discovered piezoelectricity and used crystals to create ultrasonic waves.
- Comptes Rendu 1880 ;91:291-5.

History of Cardiac Ultrasound The Military Development of Ultrasound !890 - 1940

1912 - Lewis Richardson. Suggested an ultrasound ranging technique could detect underwater objects.

1915 - Langevin - developed RADAR (Radio Detection and Ranging) to detect submarines in WW1. By 1941 this was developed in the USA to detect airplanes.

Ultrasonic Detection - Acoustic Horns

Used to detect aircraft - Pre-Radar





World War 1

World War 2

The Industrial Development of Ultrasound

 1937 - Sergei Sokolov – used ultrasound waves as a means of detecting flaws in metals.

1942 - Floyd Firestone – Metal Flaw
 Detecting device and measuring instrument.

The Non-Cardiac Development of Clinical Ultrasound

- 1941 Karl Dussik. Austrian Neurophysicist
- Probably the first application of clinical diagnostic ultrasound to outline the ventricles of the brain.
- BUT concluded that this was probably not a viable clinical tool due to sound attenuation and interfering reflective waves!!!

• 1946 - Wolf Dieter Keidel. German Physicist

- Used transmitted ultrasound to measure cyclical variations in cardiac volume. However, he could not make his method quantitative.
- However, both Dussik and Keidel subsequently concluded that, for theoretical reasons, reflected ultrasound could not be used as a diagnostic tool in the clinical setting!!

"The immense technical problems compared to the crude diagnostic possibilities render any work in this field hardly worthwhile"

Early Use of an Ultrasound Device to Detect Metal Flaws



Malmö, May 1953

Kockum's Shipbuilding Cie. Malmö

The Siemens Reflectoscope

- 1953 Hertz and Edler
- Lund University and the Malmo Shipyards.
- Hertz read "Der Ultraschall" by Ludwig Bergman a theoretical ultrasound textbook.
- Theorised that left atrial dimensions could be measured.
- Contacted Inge Edler whose clinical interest was mitral stenosis.
- They borrowed an ultrasonic reflectoscope from Kockums shipyard. Detected pulsatile cardiac signals!

- Hertz's father, a Professor of Physics and Nobel Prize Winner was a Siemens Director.
- His uncle gave his name to the Hertz unit.
- Hertz visited Erlangen where Siemens were developing an advanced reflectoscope.
- 1954 After waterbath expts to validate the A-mode images Hertz and Edler proceeded to measure thickness of cavities and cardiac walls.
- Edler then developed M-mode Echocardiography.

Inge Edler 1911 - 2001

Edler I, Hertz H. The use of ultrasonic reflectoscope for the continuous recording of the movement of heart walls. Kungl Fysiografiska Sällskapets i Lund Förhandlingar 1954; 24: 40-58.



Hertz and Edler - M-Mode Echocardiography

ULTRASOUNDCARDIOGRAPHY

To Prof. Alan Fraser from. Julo Colley

INGE EDLER: The use of ultrasound as a diagnostic aid, and its effects on biological tissues. Continuous recording of the movements of various heartstructures using an ultrasound echo-method.

INGE EDLER, ARNE GUSTAFSON, TORD KARLE-FORS and BO CHRISTENSSON: Mitral and aortie valve movements recorded by an ultra-sonic echo-method. An experimental study.

INGE EDLER: Atrioventricular valve motility in the living human heart recorded by ultrasound.

THIS PAPER IS ALSO PUBLISHED AS A SUPPLEMENT TO VOLUME 170 1961 OF ACTA MEDICA SCANDINAVICA





The First M-Mode Cardiac Ultrasound Recording



ULTRASOUNDCARDIOGRAPHY

INGE EDLER: The use of ultrasound as a aid, and its effects on biological tissues. Continuous recording of the movements of va structures using an ultrasound echo-method.

INGE EDLER, ARNE GUSTAFSON, TOR FORS and BO CHRISTENSSON: Mitral valve movements recorded by an ultra-sonic ec An experimental study.

INGE EDLER: Atrioventricular valve mot living human heart recorded by ultrasound.

> THIS PAPER IS ALSO PUBLISHED A A SUPPLEMENT TO VOLUME 170 1961 ACTA MEDICA SCANDINAVICA





29th October 1953

- 1954 EDLER & HERTZ A + M-mode
- 1977 2D + pulsed Doppler
- 1970-75 2D-echo (B-scan, linear, 2-D sector scanning)
- 1982 2D + pulsed / CW Doppler.
- 1982- 2-D Transoesophageal echo.
- 1990-2015 3D-echo, Tissue Doppler

The Role of Cardiology Publishing 1973-1985



Centennial Collection		Directed Differentiation of Human Induced Pluripotent Ste	m
Adult Congenital Heart Disease		Cells to Heart Valve Cells	
M Deliborg	1397	Z Gal N Dong	1435
Perspective Fossil Fuels, Climate Change, and Cardiovascular Disease: A Call to Action		Editorial Empowering Valvular Heart Disease Research With Stem Cell-Derived Valve Cells	
CG Solomon and PJ Landrigan	1400	M Shen and JC Wu	1453
Global Rounds Global Rounds: Cardiovascular Care in Australia and New Zi	ealand	THE	PULSE
S Zamae DP Chew	1402	From the Circulation Esmilu	ULUL
		Highlights From the Circulation Family of Journals	1461
ORIGINAL RESEARCH ARTI	CLES		
Reduced Ejection Fraction in Elite Endurance Athletes: Clinical and Genetic Overlap With Dilated Cardiomyopathy		CORRESPOND	DENCE
G Classen on behalf of the Prolitikeart Consortium	1405	Research Letters	
Editorial Unraveling the Unsolved Mysteries of the Athletic Hear	nt	Individuals With Fontan Circulation During 24-Hour High-Altitude Exposure Simulation	
WK Comwell III and BD Lewine	1416	N Müller J Tank	1466
Clonal Hematopoiesis of Indeterminate Potential With Loss of Tet2 Enhances Risk for Atrial Fibrillation Through NIrp3 Inflammasome Activation			
AE Lin BL Ebort	1419		
		and the second se	ierican
		Her	art lociation









Early Cardiac Doppler Pioneers 1957-75

- In France Kalmanson, Peronneau
- In UK Wells, Light, Tunstall-Pedoe
- In USA Baker, Gramiak, Shah
- In Japan Satomura 1957!, Yoshida, Kato



Most early Doppler devices were both directional and rangelimited Zero Crossing Devices. High velocities not resolved.

The Japanese Doppler Contribution

- 1842 Christian Doppler The Doppler Effect.
- 1956 Shigeo Satomura an Osaka Physicist publishes paper on blood flow in limbs and the eye using a mechanical vibration measurement. Essentially Doppler Echocardiography.
- 1957 Satomura, Nimura and Yoshida. Ultrasonic Doppler for inspection of Cardiac Function.
- 1958 Satomura et al. Developed Low pass filters. Simultaneous recording of phono and ECG.
- 1962 Kato et al. verified phase shift proportional to velocity. But no directional information.
- 1966 Kato and Izumi develop a directional Doppler Flow Meter.

The French Contribution

- 1961 Franklin et al. Peripheral arterial CW.
- 1965 George and Pourcelot. Non-directional CW.
- 1968 Bechimol. Catheter tip CW evaluation of venous and coronary flow.
- BUT all were non directional and were discredited as clinical tools.
- 1968 Kalmanson et al. introduced resolved flow velocity recordings.

History of Cardiac Ultrasound The American Role

- 1952. Wild and Reid examine excised hearts ultrasonically.
- 1963 Reid and Joyner. 1st US article on mitral stenosis.
- 1963 Feigenbaum borrowed neurologists reflectoscope and identified a pericardial effusion.
- 1968 Feigenbaum and Dodge. M-mode wall thickness and cavity dimensions. Calls technique "Echocardiography".
- 1968 First Indianapolis Echo course. Inge Edler attends!
- 1970 Eggleton mounts ultrasound crystal on rotating electronic toothbrush to produce first commercial 2-D echo.
- 1973 S.L.Johnson develops the range-gated Duplex Scanner.

Trondheim Doppler Development 1970-76

1968 NTSU founded in Trondheim – Alf Brubakk first Clinical Academic appt.

1970 Rune Aaslid - his friend- developed "Jenny" computer to model CVS flow at the newly created Trondheim NTNU



Rune Aaslid

Bjorn Angelsen 1973 - develops PEDOF Doppler system in Trondheim – gets first signals

Asslid meets Holen in Oslo and shows him PEDOF system

Jarle Holen – Boeing aircraft engineer - is sure cardiac pressure gradients can be measured

Trondheim Doppler Development 1970-76

1974/75 Holen produces equation showing the relationship of pressure and velocity thus allowing the calculation of pressure gradients.

Asslid discusses the Holen equation with Anglesen on return to Trondheim.

Angelsen modifies PEDOF system to combine PW/CW and simplifies the Holen equation

1976 – Angelsen and Kjell Kristoffersen build 10 PEDOF systems at NTNU for clinical trial.

1976- PEDOF trialed by - Liv Hatle – Alf Brubakk - Ingmar Wallentin – Dan Tunstall-Pedoe

1981 – First commercial implementation of PEDOF in IREX echo system. Duplex echocardiography now possible

Liv Hatle - Scanning with the Trondheim PEDOF Doppler System



 $\Delta P = 4 * (v_2 - v_1)^2$ If v1 < 1m/s

 $\Delta \mathbf{P} = \mathbf{4} + \mathbf{v}^2$ Holen – Hatle – Angelsen Modification

1976 – Controversy!

Echocardiography as clinical hemodynamic GOLD standard.



British Heart Journal, 1978, 40, 131-140 Noninvasive assessment of pressure drop in mitral stenosis by Doppler ultrasound

0.25

L. HATLE, A. BRUBAKK, A. TROMSDAL, AND B. ANGELSEN

Mean PG by Cath (mmHg)

This slide was shown at a big meeting in Amsterdam in 1976 and it resulted in a meeting afterwards with about 20 people - discussing for 2 hours - 19 saying it was not possible - while one finally said it might be -

Hatle et al BHJ 1978



Jae K OH United States of America

Liv Hatle - Original Scientific Contributions

Mitral Stenosis Aortic Stenosis Valve Regurgitation Pulmonary Pressure / Resistance Hypertrophic Cardiomyopathy Congenital Heart Disease

Trondheim 1978-83

Diastolic Dysfunction Constriction / Restriction Cardiac Amyloidosis Prosthetic Valve Function

Mayo / Stanford

1984-90



The Textbook - 1985



Cardiac Scanner Development

- 1974 / 76. Duplex scanners introduced.
- Both phased array (Toshiba / Aloka) and mechanical probes(ATL and Vingmed).
- Mechanical best suited to Paediatric Cardiology. High structure resolution.
- Full description of all complex congenital anomalies by 1981.
- Adult 2-D phased array development lagged behind due to transducer / display limitations.

History of Paediatric Echo 1967 -1995

- L. B.Ultan 1967 Echo in CHD-Preliminary Observations.
- Lundstrom 1971- M-Mode
- Gramiak 1973- M-Mode
- Van Praag Terminology 1977
- Tynan, Becker, Anderson. Terminology 1979
- Rigby et al 1981 UVH Morphology Correlative 2-D Echo
- Hatle VSD Doppler 1981
- Stumper 1900 Paediatric 2-D TEE

Transducer Development – 1980 - 2024

- phased array: 1D array of crystals
- mechanical: internal 'wobbling' of 1 crystal





linear array



sector array



- transesophageal
- intravascular
- transrecta
- transvaginal





Scanner - Development

KULeuven



Portable Ultrasound Systems

Are they just smaller versions of the current generation of clinical cardiac scanners ?

Further Transducer Technology - Materials

Current clinical transducer: 1.5D; soon: 1.75D

3D Imaging Technology

- 1D phased arrays + rotating holder
- 1D fast rotation phased array
- 2D arrays

BUT: frame rate !?!

Lancee, C. et al., Thoraxcentre Rotterdam

Myocardial Doppler - 1991

Measured velocity - TDI

Edinburgh 1991

Myocardial Velocity Gradient

Strain / Strain Rate Imaging

Edinburgh 1991

2D Strain Imaging

Real Time Resolved 4-D Echo Huge Data Management Requirements!

- Sufficient spatial and temporal resolution
 - 500 samples/scanline
 - 100 beams/slice
 - 100 slices (90 angles (every 2°))
 - 150 Hz framerate
 - = 10.000 scanlines @ 150 Hz
 - = 1.500.000 scanlines/s

Amount of data (1 view -1 Heart cycle)

 = 750 MB non-scanconverted
 = 18 GB scanconverted !!!!

Synthetic Aperture Imaging?

Fundamentally different way of beamforming

Very High Frame Rates

3D imaging

2D flow

Courtesy: J.A. Jensen, Lyngby, Denmark

History of Cardiac Ultrasound An Amazing Story 1793-2020

Spallanzani 1793

Edler and Herz 1993

Liv Hatle / Holen /Angelsen 1975

Ultra High Frame Rate Deformation Imaging

Shear Wave Elastography

FPS in excess of 4000 fps.

Machine Learning is already in our machines for feature extraction!

I D I BAPS

Digital Health: Artificial Intelligence and Machine Learning

Loncaric F, Revista Española de Cardiología 2021

AI & Deep Learning surpass human performance in tasks thought impossible for a machine

Playing Go

5:0 vs Fan Hui (Oct. 2015)

VS≡

Interpreting text – Stanford reading comprehension test

Alibaba beats humans on 01/2018

CIO.com.au

Dendrite Terminal Axon Hidden Output Input

Robots with similar/improved dynamics compared to humans/mammals

Artificial Neural Networks Deep Learning

The Power of Machine Learning Hidden Associations

Eichstaedt JC, Psychological Science 2015

Singh L, arXiv:2003.13907v1, 2020

I D 🚺 B A P S

It needs interpretation incorporating domain knowledge !! (= you can't get rid of the expert)