

Problem

Robot **joint limits** and **singularities** are **constraints** that cause the surgeon to re-grasp the needle in the middle of suturing using complex dual-arm hand-off movements [1]. This increases the surgeon's **cognitive workload** and causes severe fatigue and degeneration in performance.

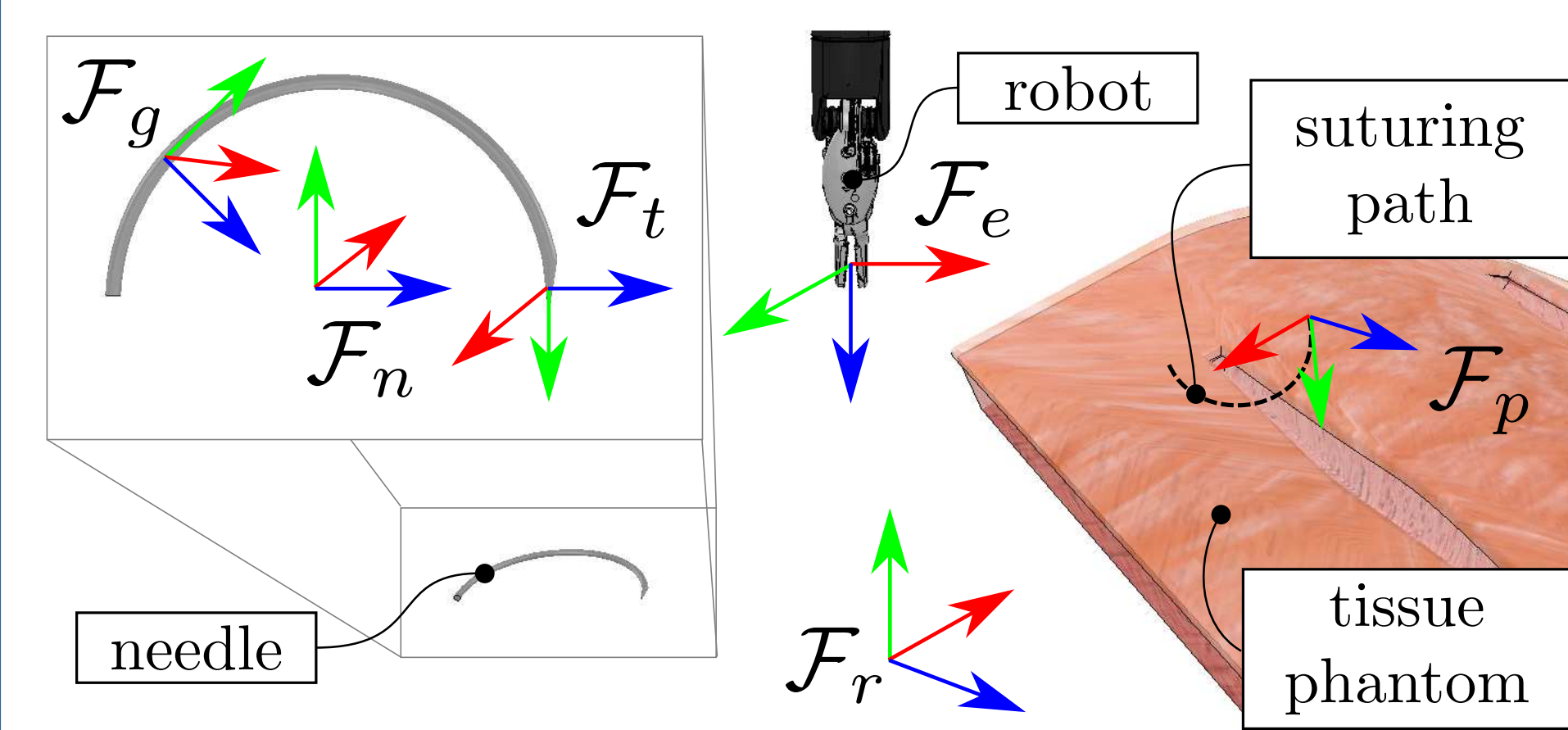
Proposed Solution

Haptic-guided system that helps the surgeon to grasp the needle in an **optimal** configuration, which allows avoiding constraints along **post-grasp** suturing trajectories.

System Description

Kinematics

Suturing requires the surgeon to grasp the needle through the robot and deliver it along a pre-defined suturing path



Constraints

Cost functions accounting for joint limits and singularities (Task-oriented Velocity manipulability)

$$h_j(\hat{q}_g(t)) = \sum_{i=1}^n \frac{1}{\lambda} \frac{(\hat{q}_{g,i}^+ - \hat{q}_{g,i}^-)^2}{(\hat{q}_{g,i}^+ - \hat{q}_{g,i}(t))(\hat{q}_{g,i}(t) - \hat{q}_{g,i}^-)}$$

$$h_s(\hat{q}_g(t)) = \dot{\hat{x}}^T (\mathbf{J}_s(\hat{q}_g(t)) \mathbf{J}_s(\hat{q}_g(t))^T)^{-1} \dot{\hat{x}}$$

The total cost function along the suturing trajectory is

$$\mathcal{H}(z) = \int_0^{s^*} h(\hat{q}_g(s, z)) ds$$

$$h(\hat{q}_g) = h_j(\hat{q}_g) + h_s(\hat{q}_g).$$

Acknowledgements

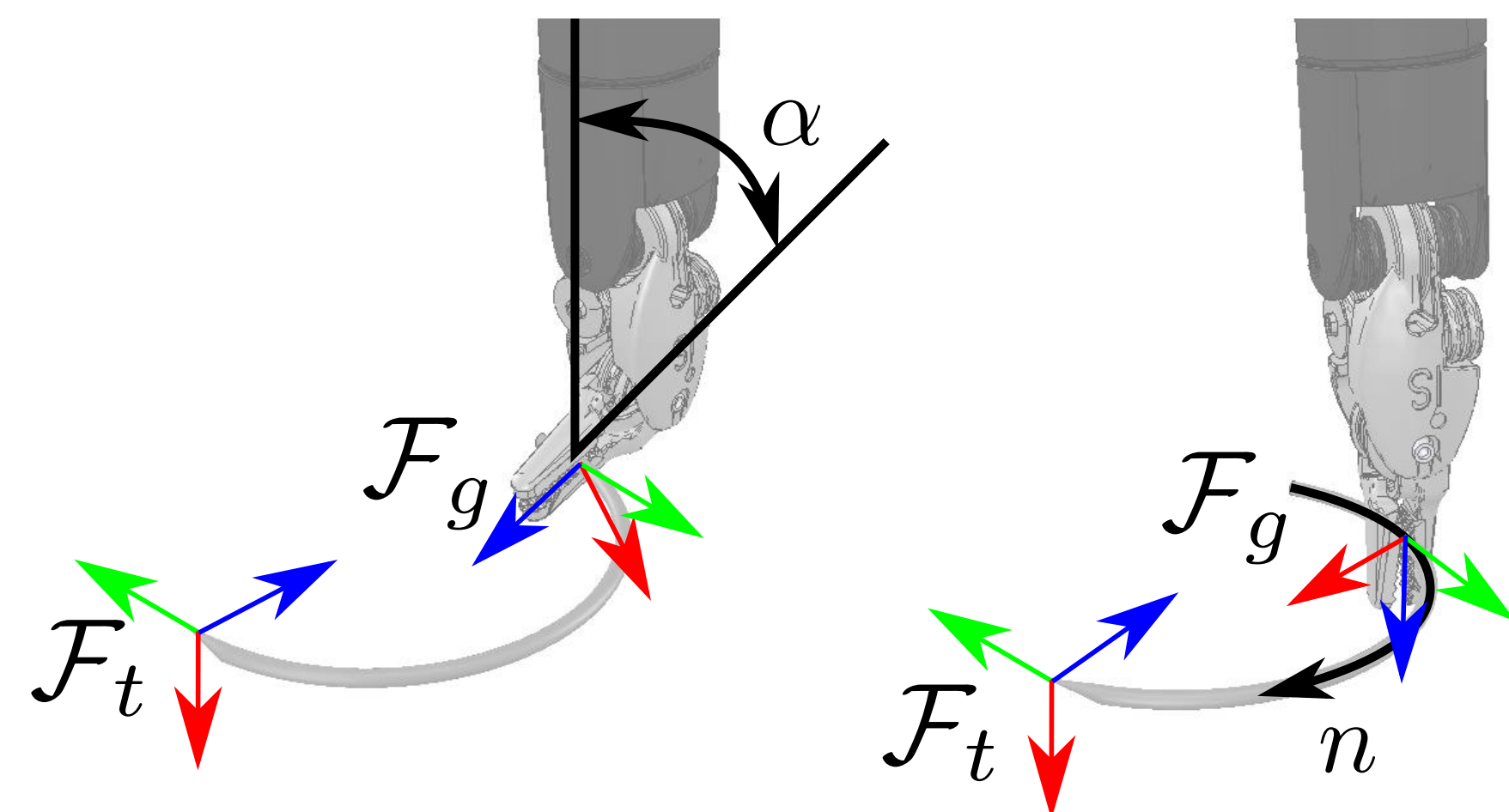
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References

- [1] G. A. Fontanelli, M. Selvaggio, L. R. Buonocore, F. Ficuciello, L. Villani, and B. Siciliano, "A new laparoscopic tool with in-hand rolling capabilities for needle reorientation," *IEEE Robotics and Automation Letters*, vol. 3, no. 3, pp. 2354–2361, July 2018.
- [2] F. Nageotte, P. Zanne, C. Doignon, and M. de Mathelin, "Stitching planning in laparoscopic surgery: Towards robot-assisted suturing," *The International Journal of Robotics Research*, vol. 28, no. 10, pp. 1303–1321, 2009.
- [3] T. Liu and M. C. Cavusoglu, "Needle grasp and entry port selection for automatic execution of suturing tasks in robotic minimally invasive surgery," *IEEE Transactions on Automation Science and Engineering*, vol. 13, no. 2, pp. 552–563, 2016.

Grasp Parametrization

The grasping manifold is parameterized by α (angle around the needle tangent) and n (needle curvilinear abscissa) [2, 3]



The vector $z = [n, \alpha]^T$ identifies any point in the grasp subspace $\mathcal{Z} \subseteq \mathbb{R}^2$. The differential mapping to the robot configuration space is

$$\dot{q}_s = \mathbf{J}_s^\dagger(q_s)^r \bar{\mathbf{R}}_n \mathbf{J}_g(z) \dot{z}$$

where $\mathbf{J}_g(z) \in \mathbb{R}^{6 \times 2}$ is the *grasp Jacobian* specific to the object shape and the choice of grasping parameters.

Optimization

Mathematically, the problem writes as follows

$$\begin{aligned} & \underset{z}{\text{minimize}} && \mathcal{H}(\hat{q}_g(z)) \\ & \text{subject to} && z^- \leq z \leq z^+ \end{aligned}$$

Newton-Raphson method is used to solve the optimization problem. At each step z is updated as $z_{n+1} = z_n - \gamma \nabla_z \mathcal{H}$ where

$$\nabla_z \mathcal{H} = \frac{\partial \mathcal{H}}{\partial z} = \int_0^{s^*} \frac{\partial h}{\partial z} ds, \quad \frac{\partial h}{\partial z} = \frac{\partial h}{\partial q_s} \frac{\partial q_s}{\partial z}$$

$$\frac{\partial h}{\partial q_s} \rightarrow \text{analytical}$$

$$\frac{\partial q_s}{\partial z} = \mathbf{J}_s^\dagger(q_s)^r \bar{\mathbf{R}}_n \mathbf{J}_g(z)$$

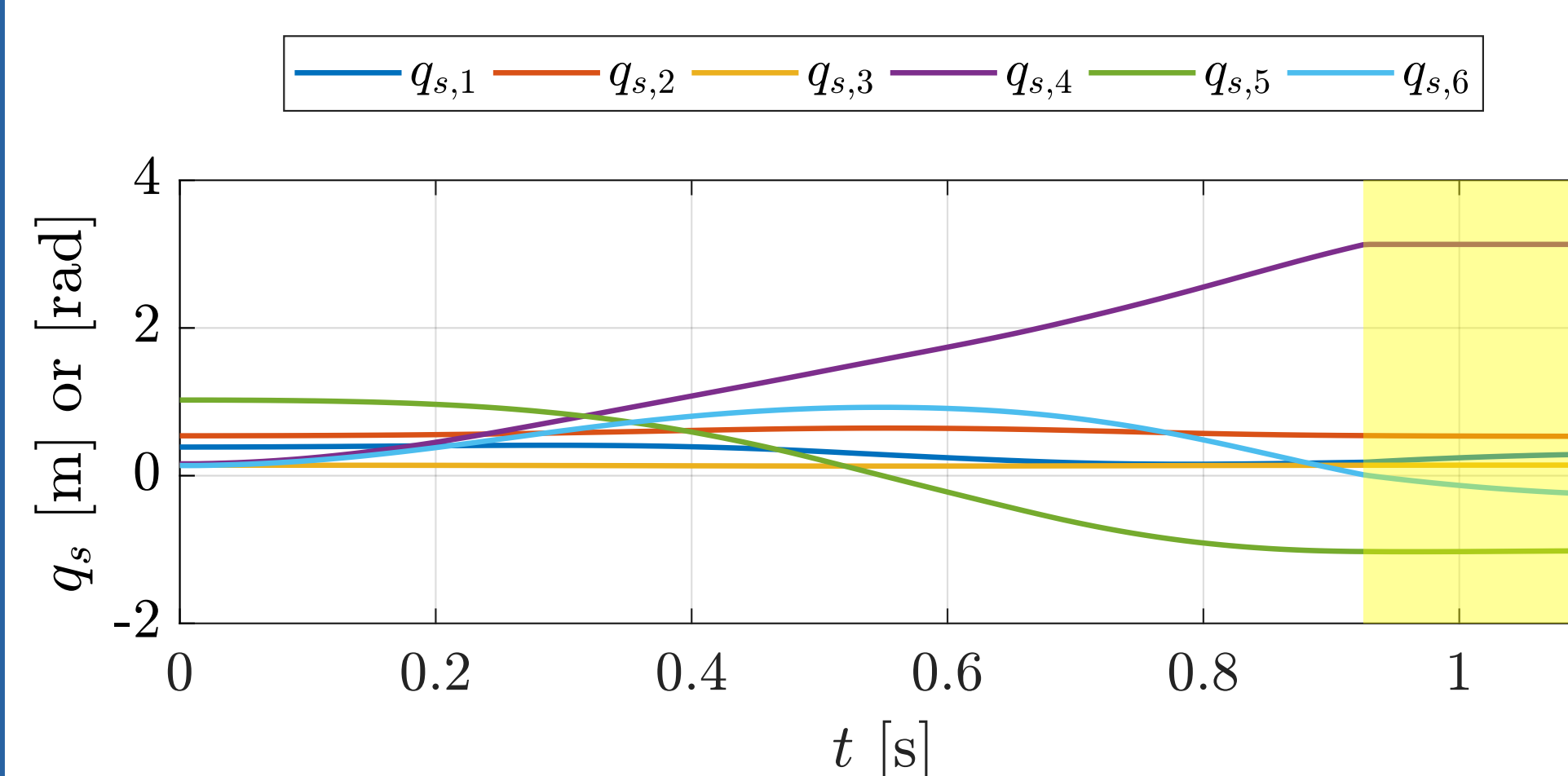
$$\frac{\partial h}{\partial z} = \frac{\partial h}{\partial q_s} \mathbf{J}_s^\dagger(q_s)^r \bar{\mathbf{R}}_n \mathbf{J}_g(z)$$

From $z^* \rightarrow x_{s,d}$ optimal robot Cartesian pose.

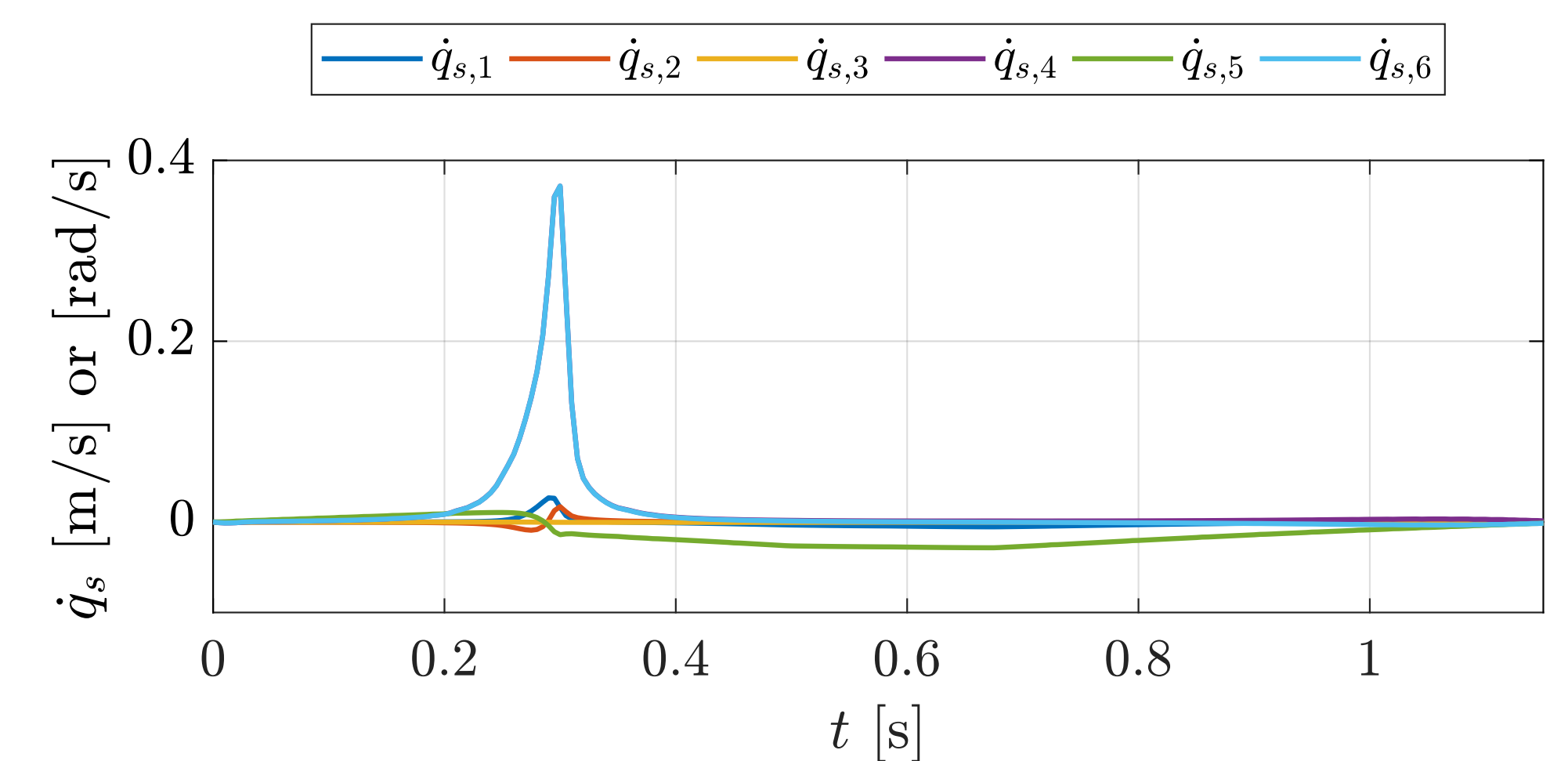
Experiments

Experiment 1: Simulated constraints occurrence

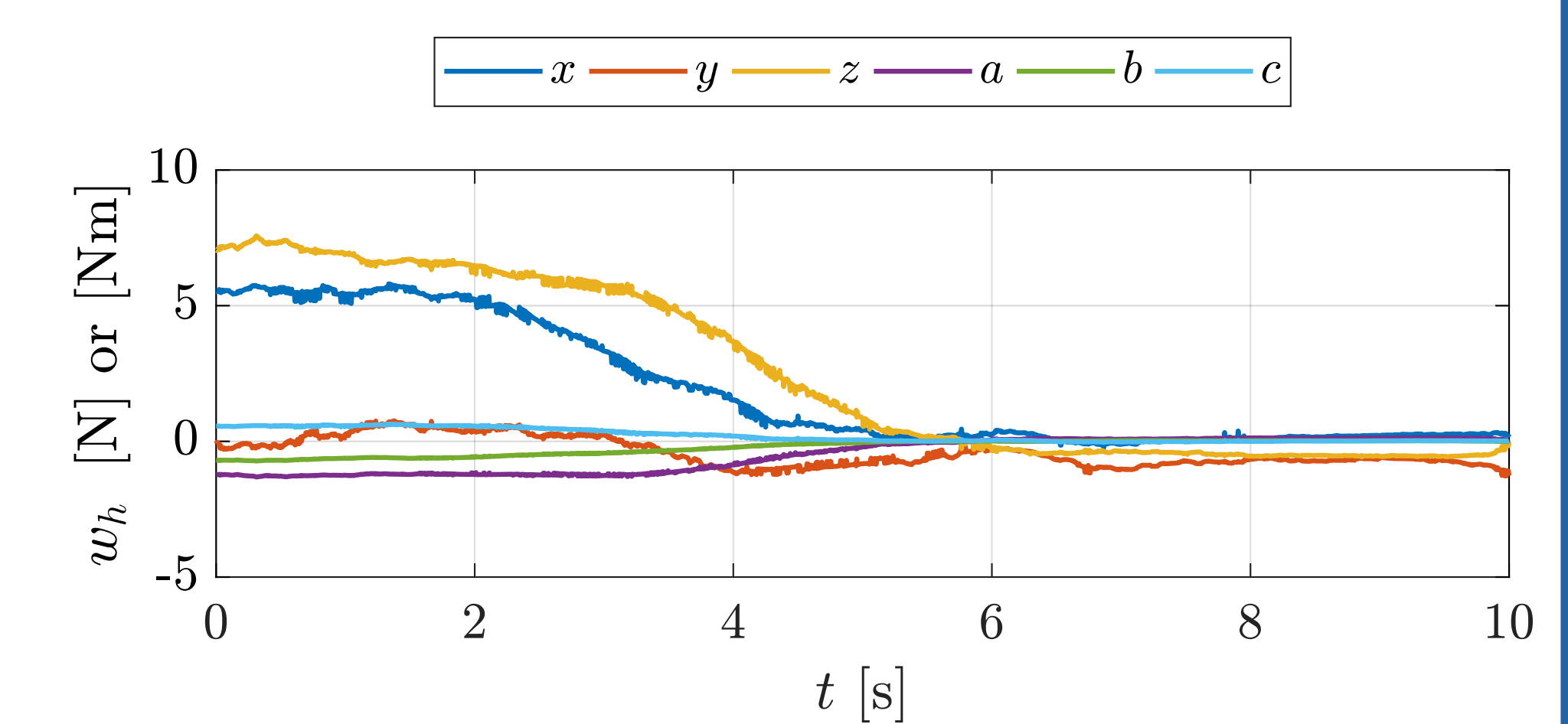
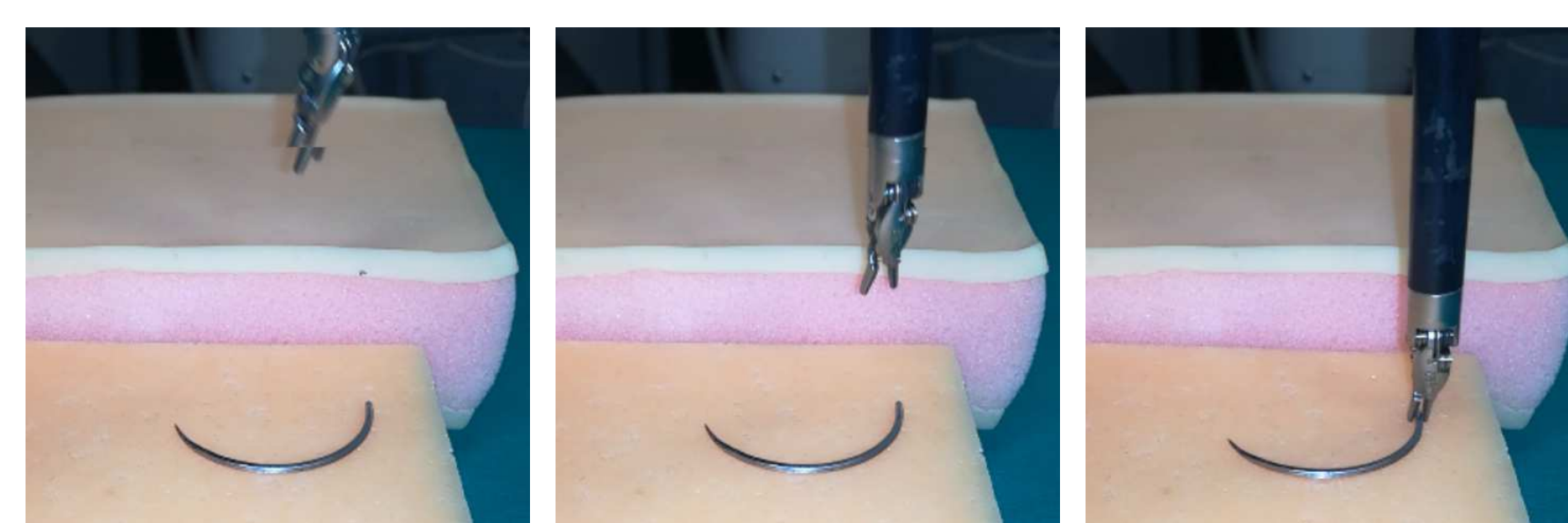
Joint Limits: deviation from desired path



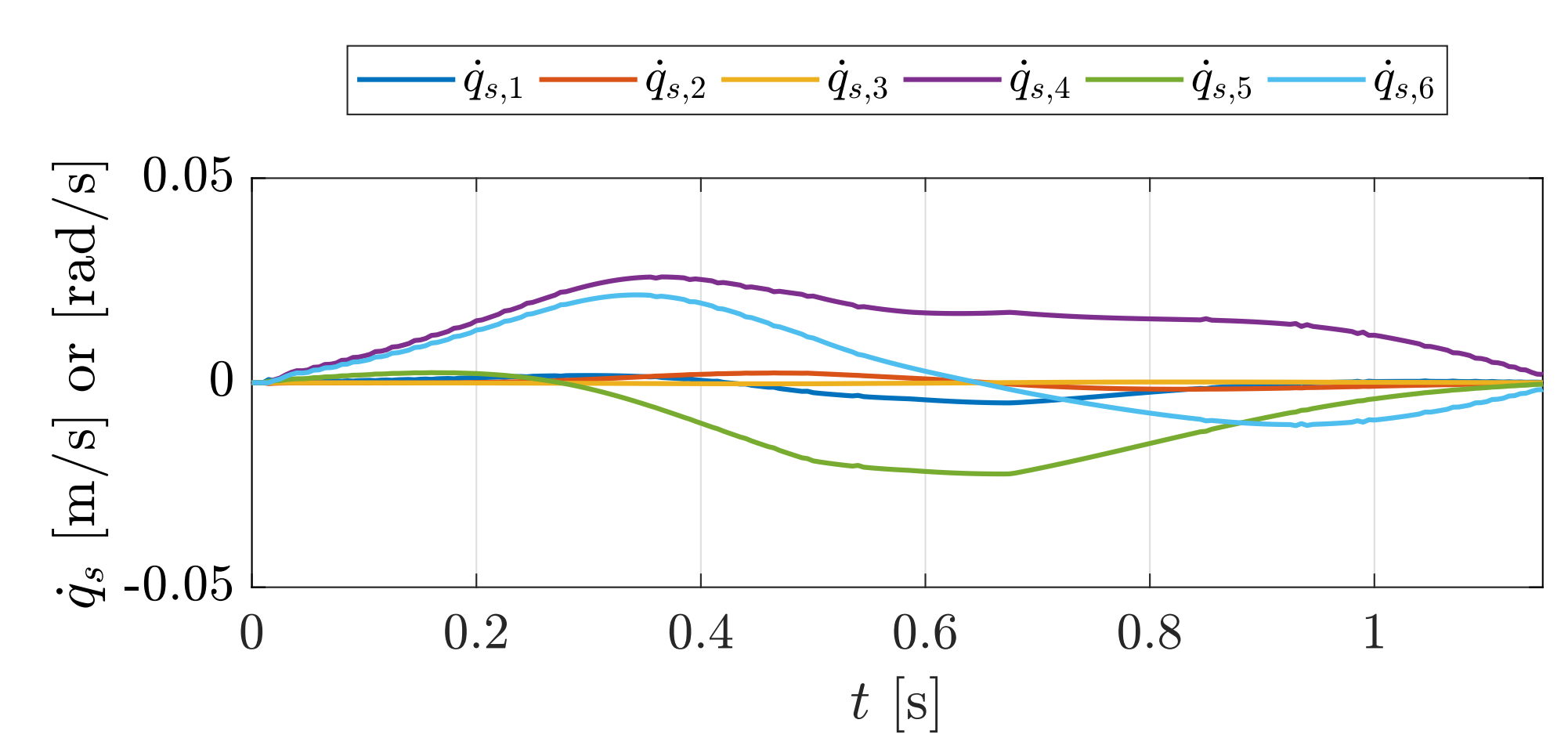
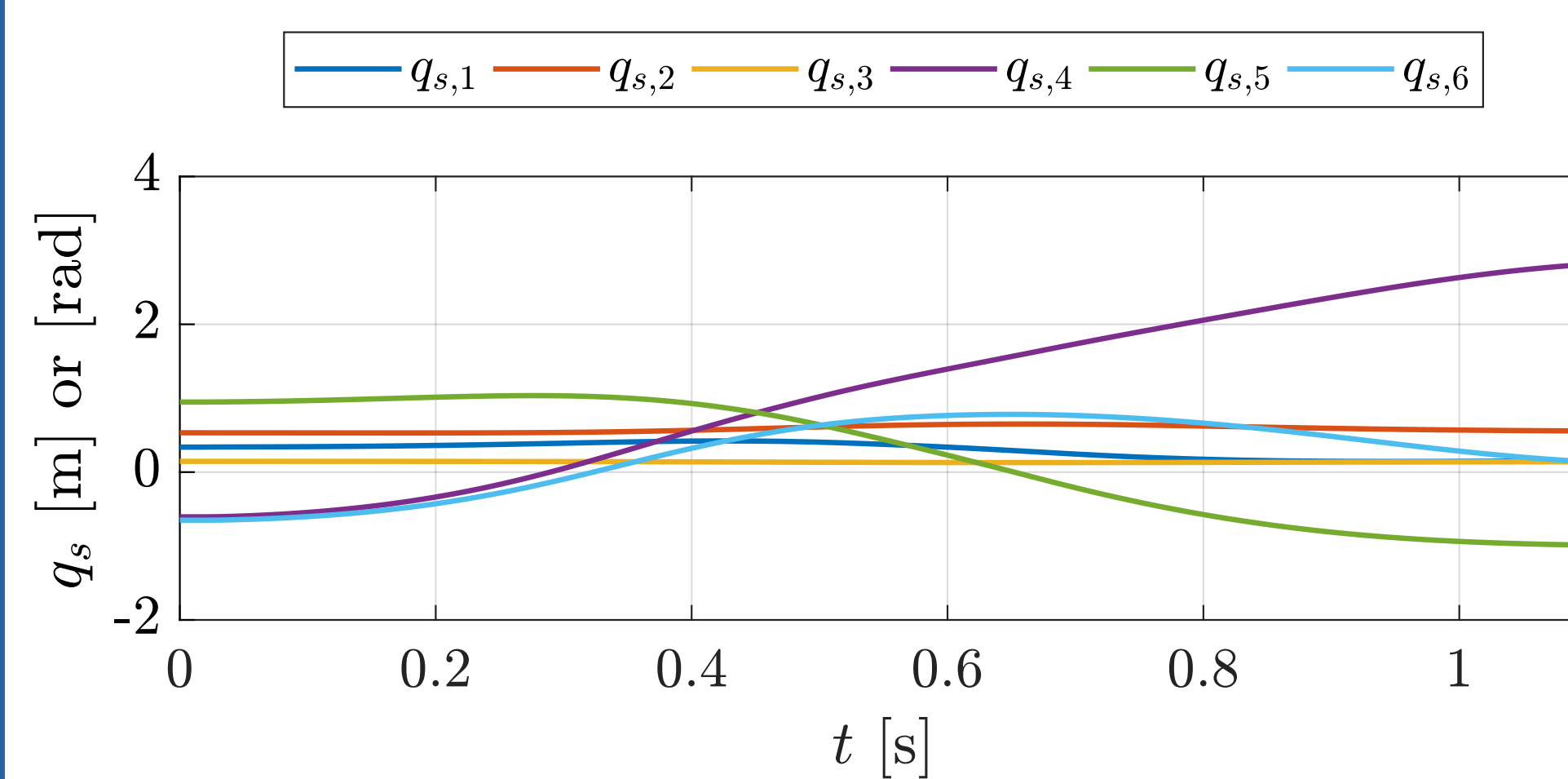
Singularities: high joint velocities



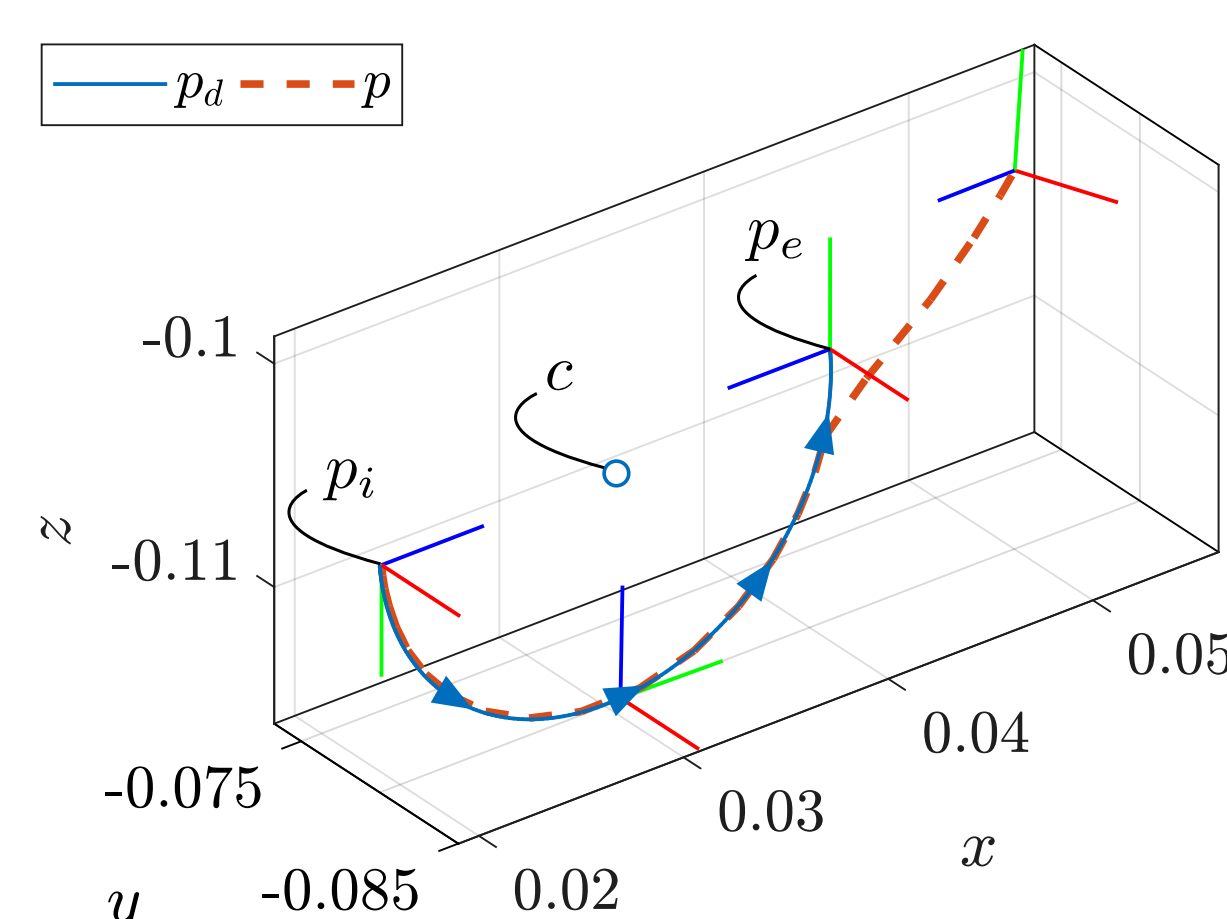
Experiment 2: Optimization and haptic-guided grasping



Experiment 3: Simulated optimal solution



Results



The proposed method

- Guides the surgeon towards the optimal needle grasping configuration through haptic forces while leaving her/him in control of the surgical system;
- Allows following the desired suturing path, thus avoiding joint limits (path deviation) and singularities (high joint velocities).