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Physical Mechanism of Brain Deformation under Operational Blast Exposure

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NY times

<https://www.nytimes.com/2023/12/21/us/army-blast-safety-brain-injuries.html>



Non-Disclosure

- **Enze Chen, Ph.D., has no conflicts to report.**
- **Disclaimer:** All analysis, findings, and conclusions were prepared independently by the author(s) and are not endorsed or verified by Iowa State University of Science and Technology, its College of Engineering, or the CARES Laboratory.



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(ONR, Code 342)



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PANTHER

Objectives

EXPOSURE



Blunt or inertial loading



Blast or repetitive blasts



Microwave/DE exposure

Unknown Source of AHI



DEFINE
BIO-PHYSICAL
SAFETY
LIMITS

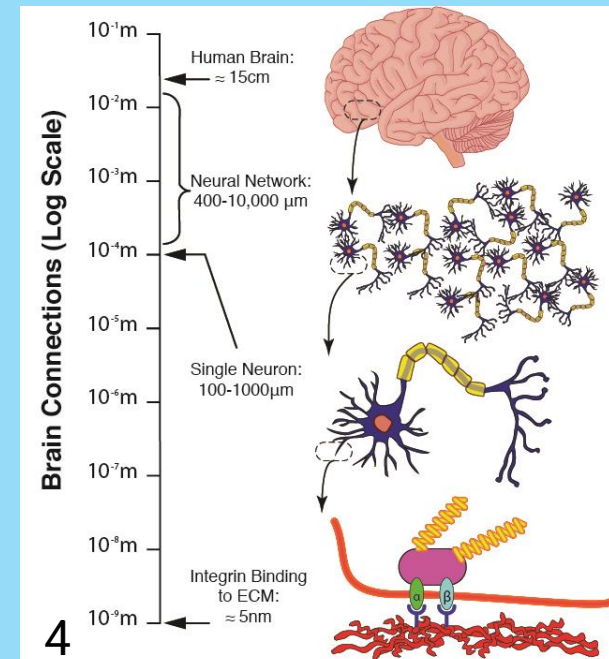
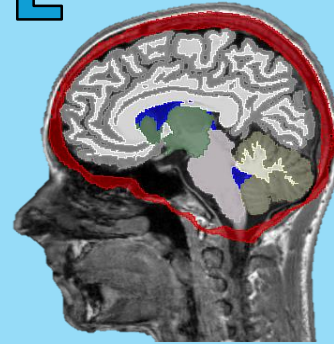
What can the brain withstand?



When is safety limit exceeded?



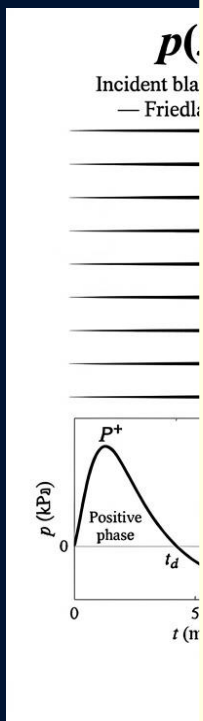
BRAIN CELLS DIE



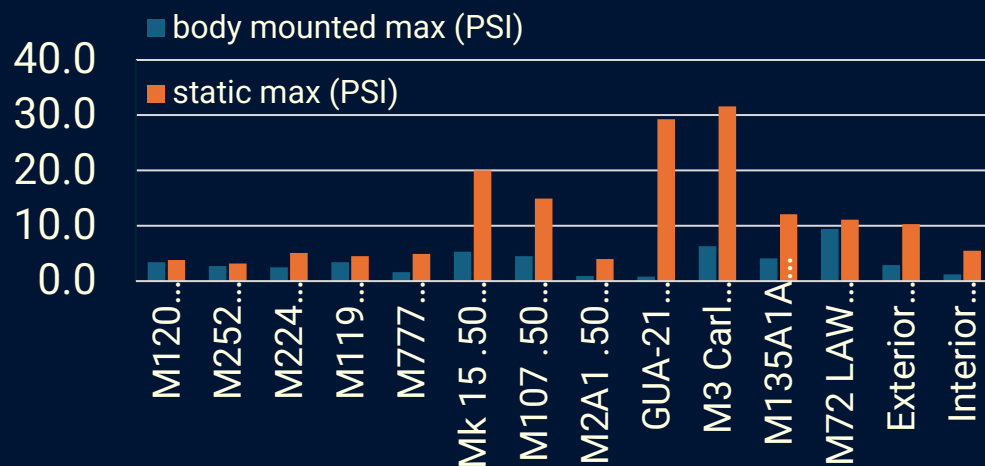


For today's talk: Problem we want to solve...

Primary blast traumatic brain injury (bTBI)



Measured blast overpressure from Tier-1 weapon systems range from 4 to 30 psi



(Tier-1 Weapon Systems Blast Overpressure Manual-CONQUER ENHANCED MAPPING PROGRAM)

Question: What is the *physical mechanism* of blast TBI?

Focus on BOPs of 4 – 30 psi (Tier 1 Weapons Range)

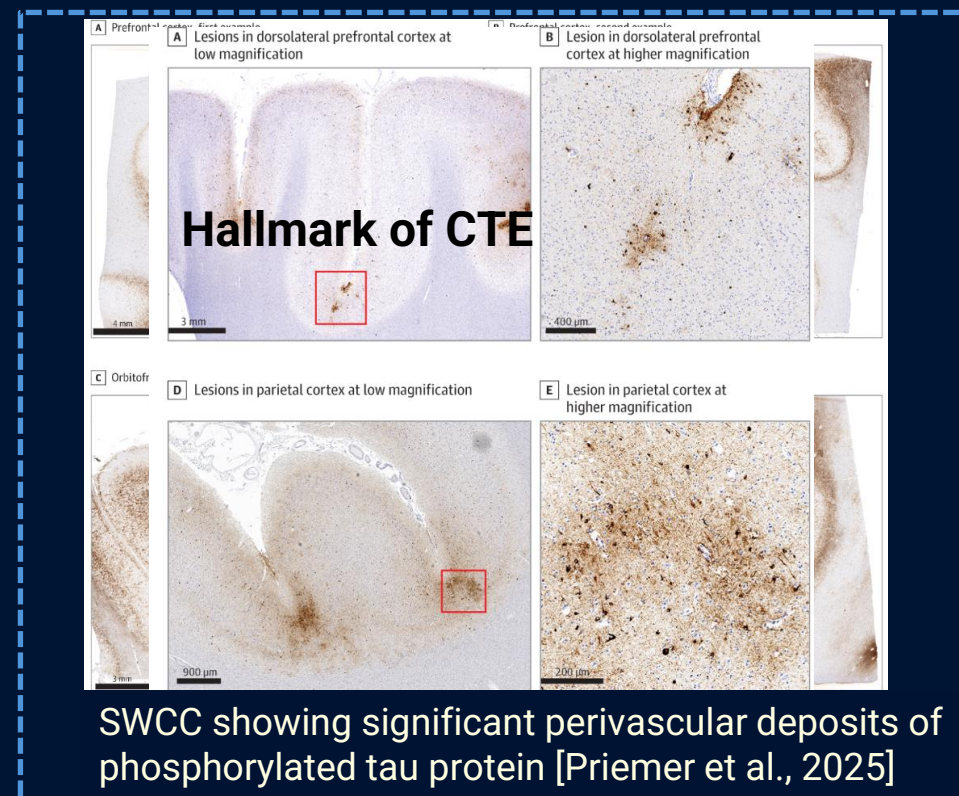
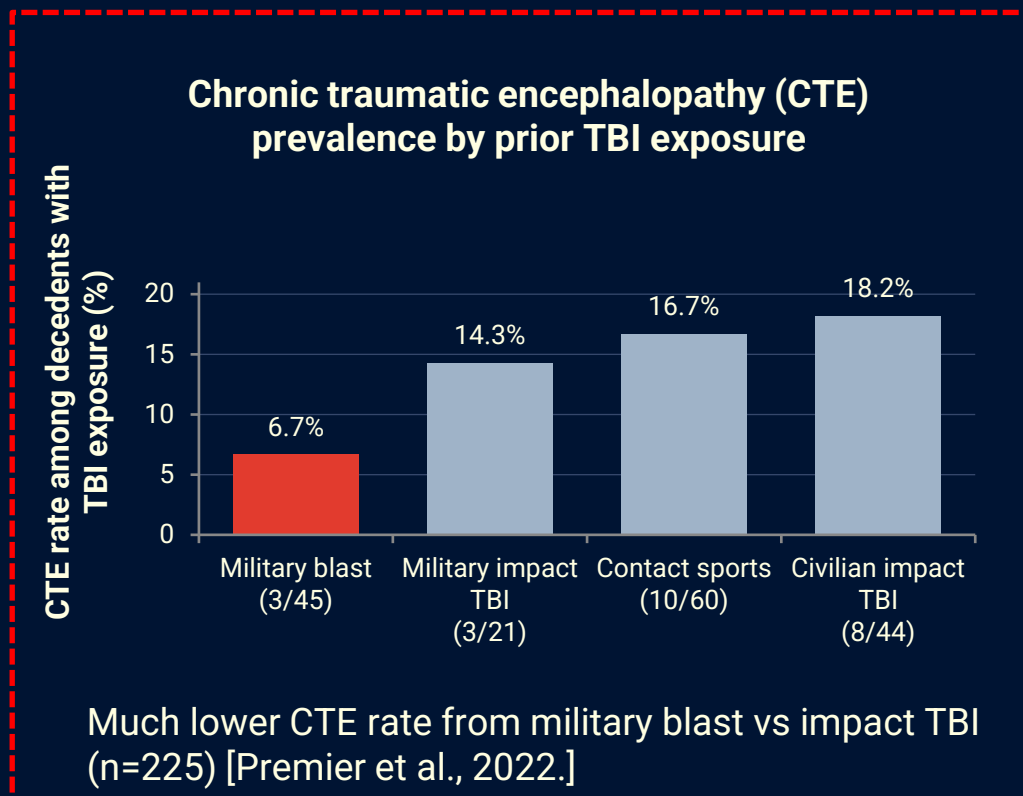




What do we know about bTBI?



- Blast-related traumatic brain injury (TBI) is a significant health burden for the US warfighter, often called the “signature injury” from the wars in Iraq and Afghanistan.
- The injury pathology is somewhat inconsistent with what we know from conventional TBIs



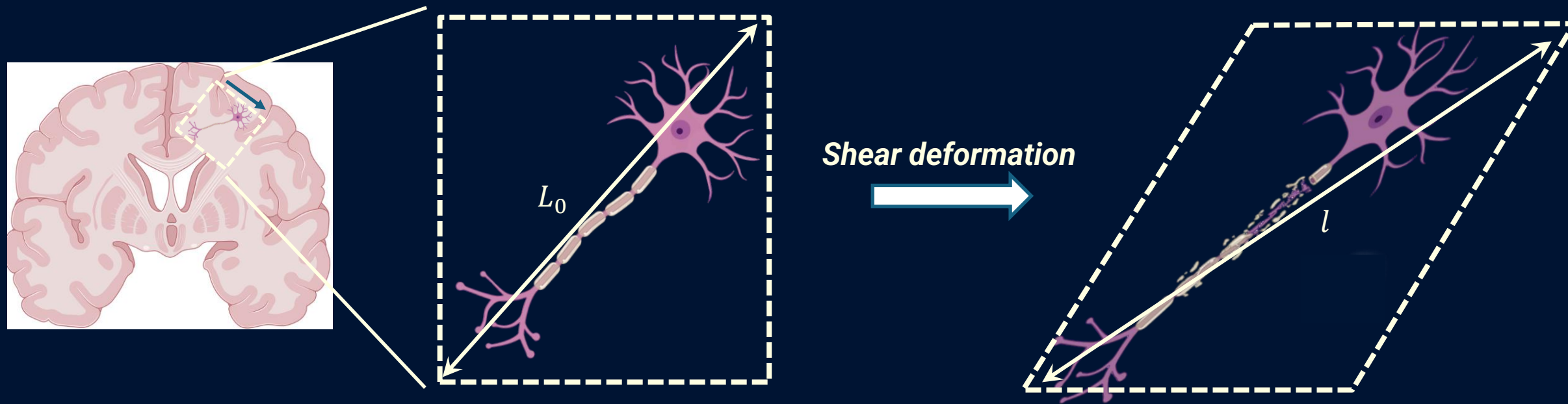
Question: What underlying physics (mechanics) can explain both the shared similarities and differences in pathology? (Brain strain & strain rate)



What do we know about bTBI?



SWCC (Special Warfare Combatant-Craft Crewmen)



$$\text{Strain} \propto \frac{l - L_0}{L_0}$$

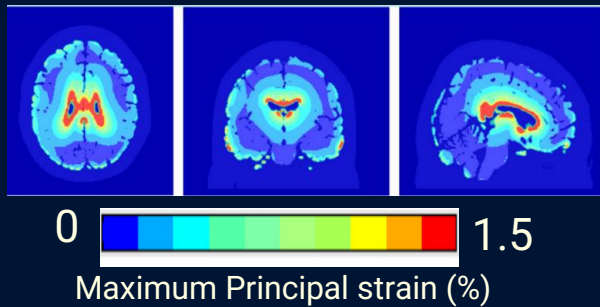
$$\text{Strain rate} \propto \frac{\text{strain}}{\Delta t}$$



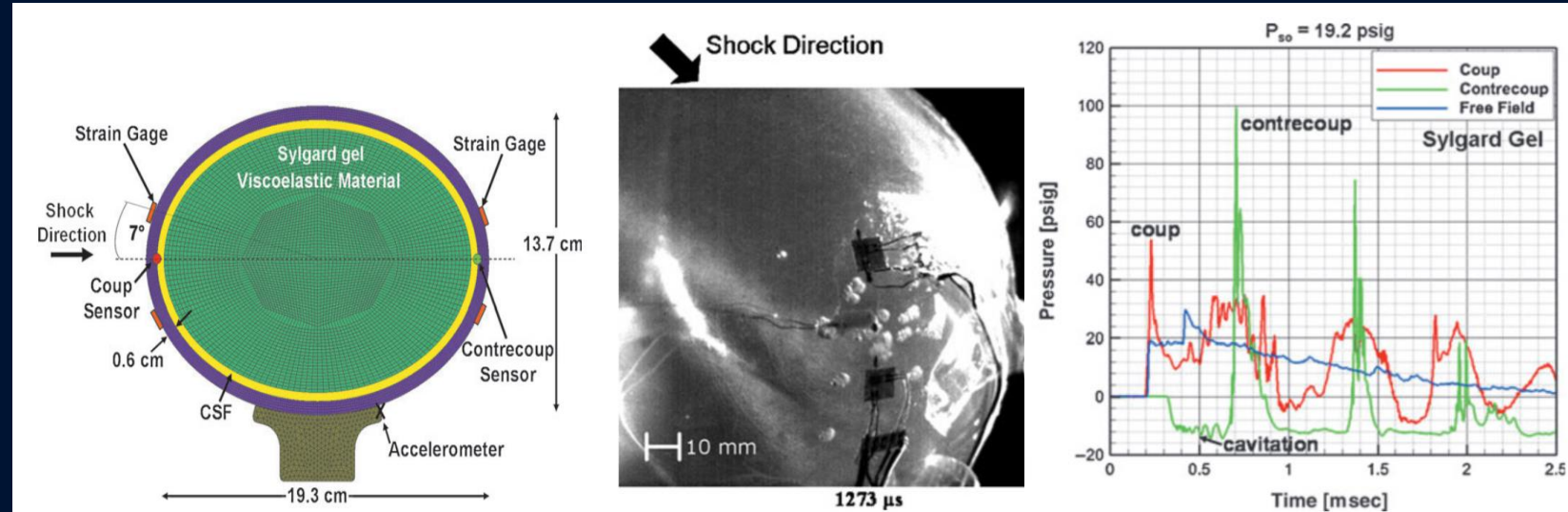
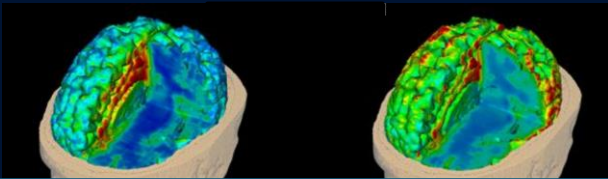
Can current hypotheses explain the pathology?

- Numerical Simulations have shown low tissue strains following blast exposure
- This motivated the hypothesis of *inertial cavitation* as an injury mechanism

Frontal blast pressure of 73.5psi [1]



Frontal blast pressure of 44 psi [2]



Negative pressure from blast exposure [3]

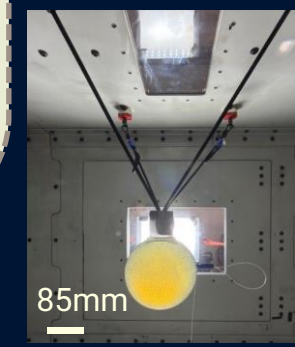
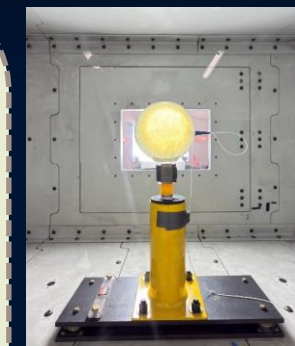
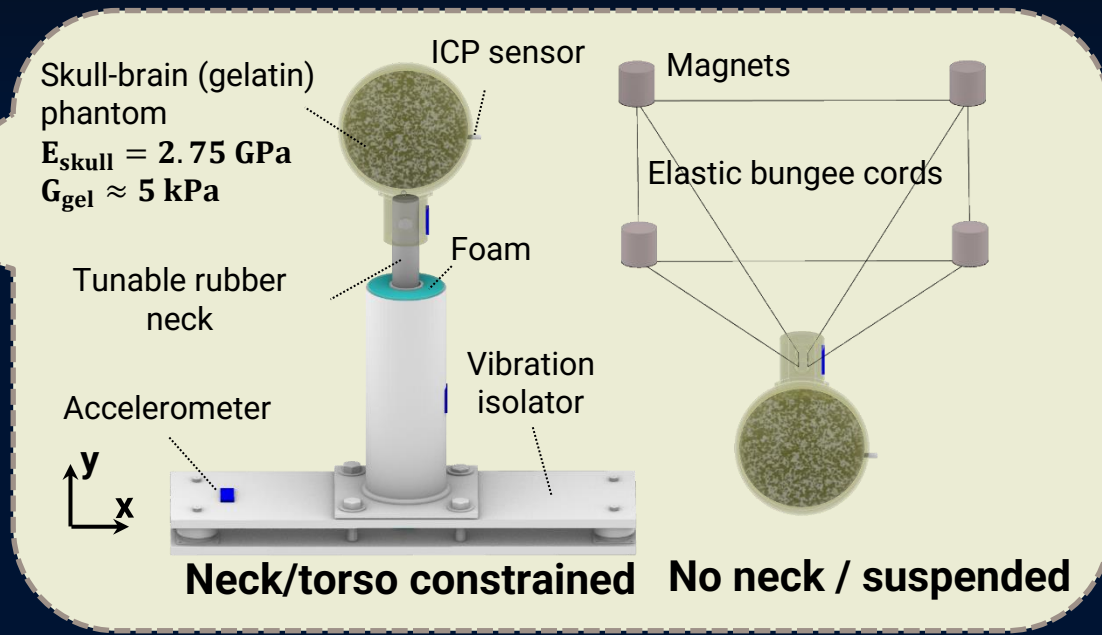
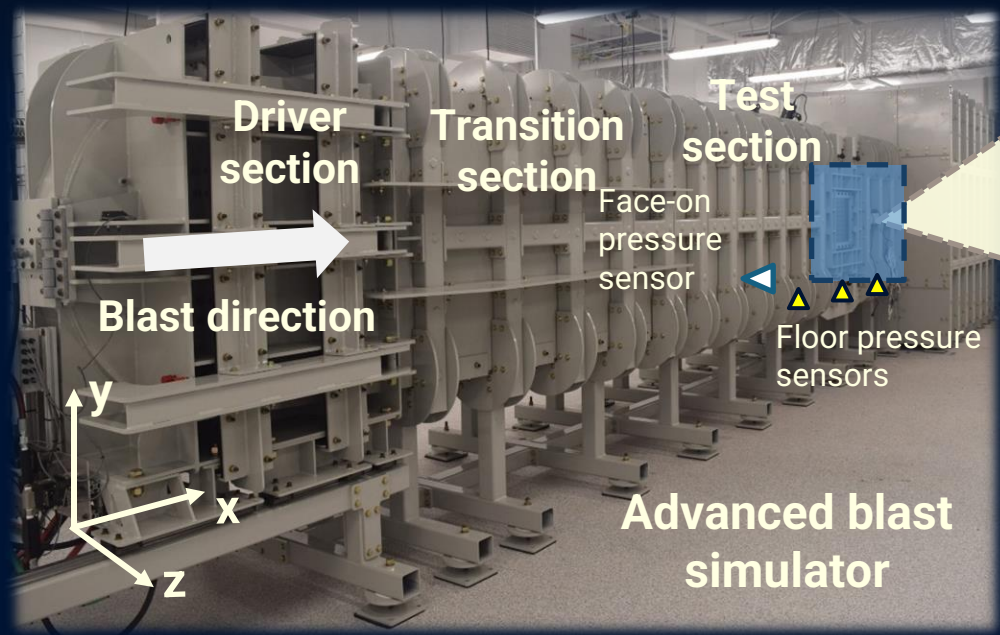
- Inertial cavitation is unlikely to account for widespread injury due to

Bottom Line: Still lacking a physical mechanism consistent with the observed post-mortem pathologies

without experimental validation.

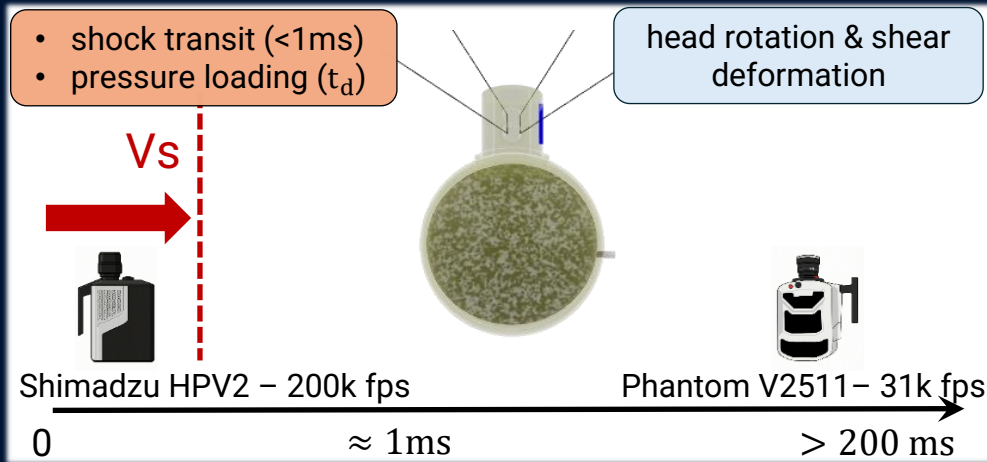
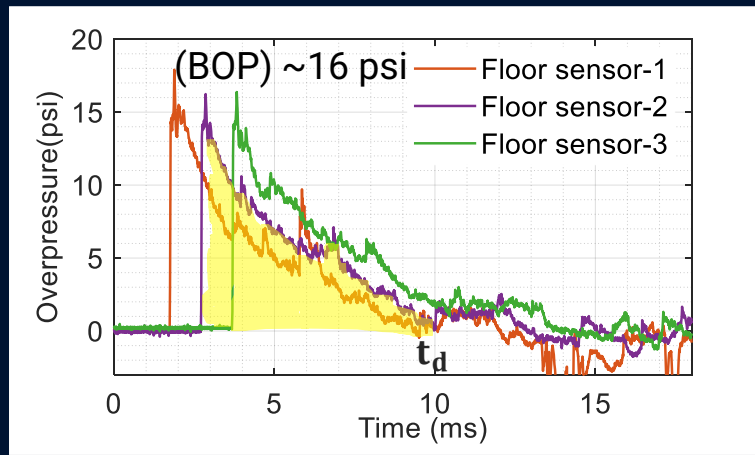
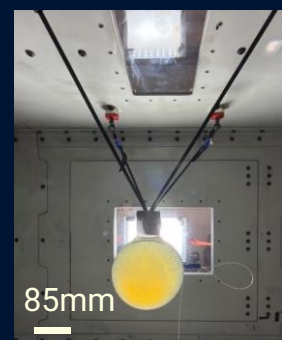
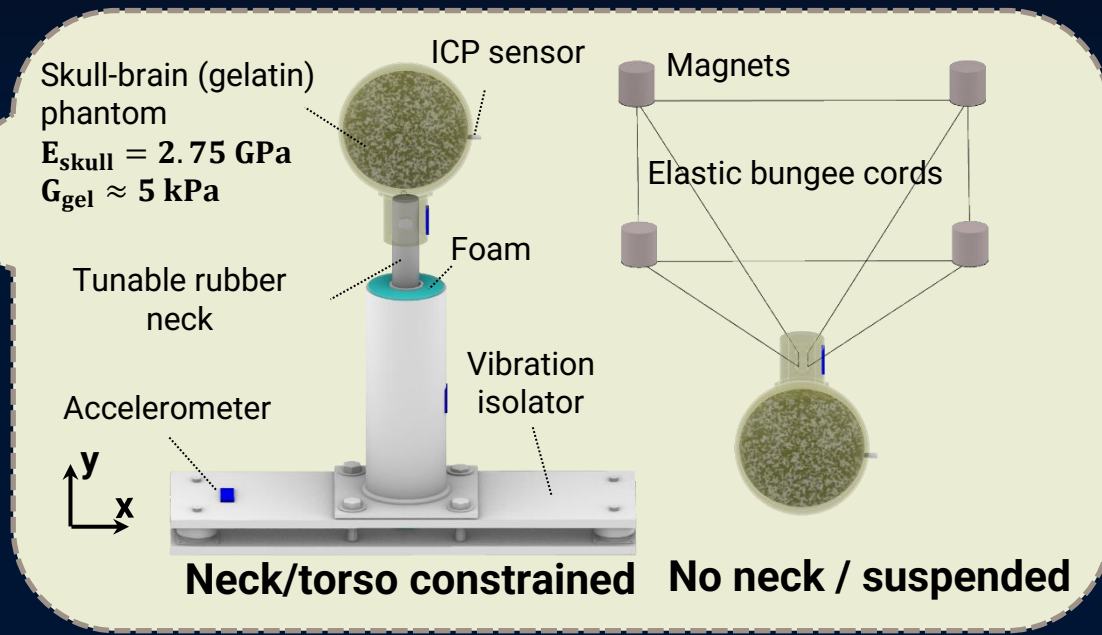
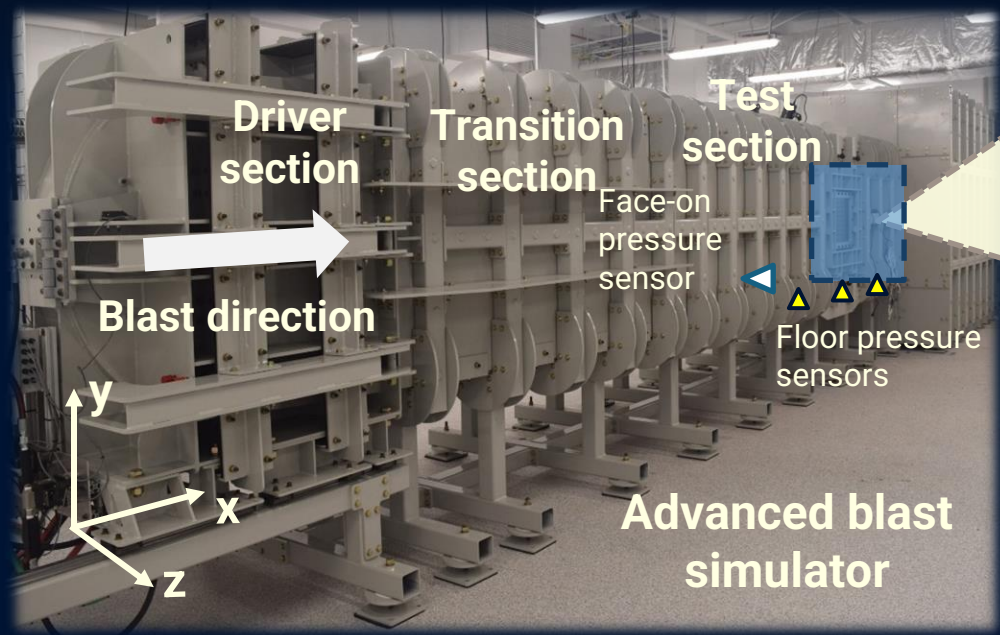


PANTHER Approach: Controlled blast exposure on transparent skull-brain phantom via the Advanced Blast Simulator (ABS)





PANTHER Approach: Controlled blast exposure on transparent skull-brain phantom via the Advanced Blast Simulator (ABS)

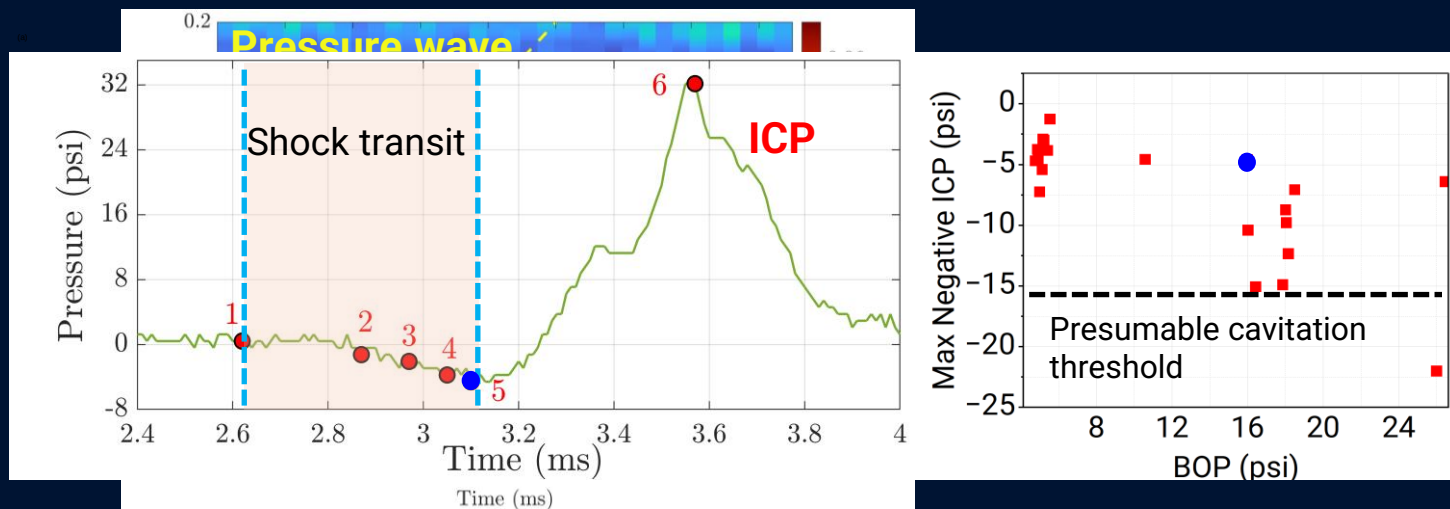
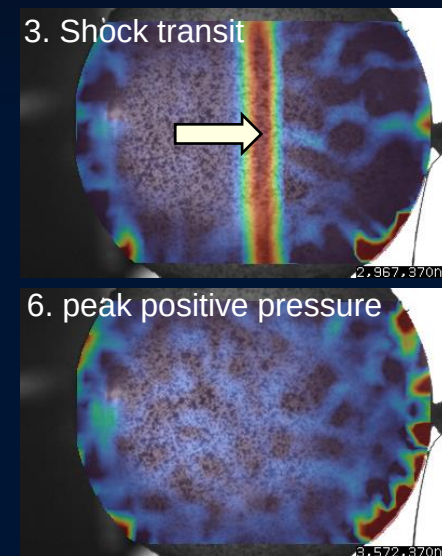
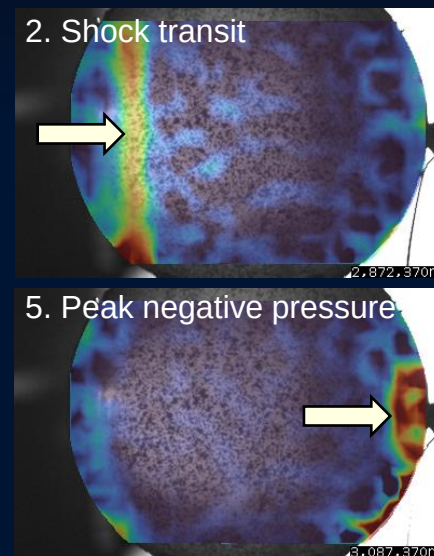




Shock transit dynamics – kinematics + pressure histories



Shock front tracking via DIC (BOP: ~16 psi)

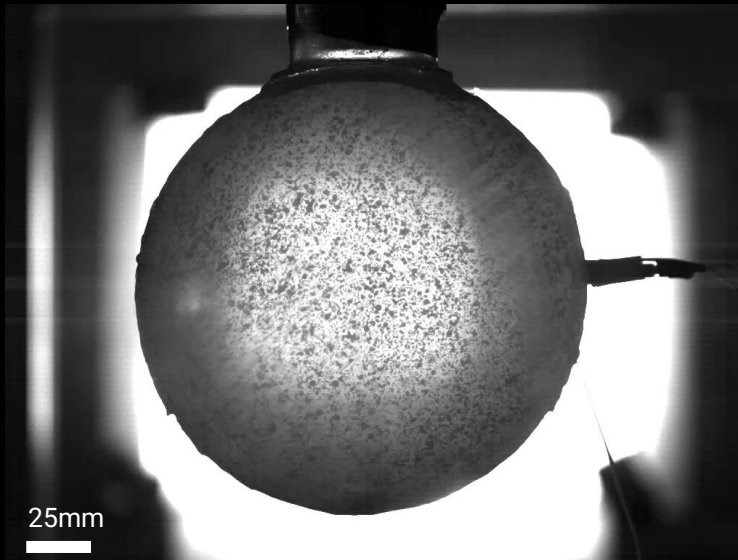
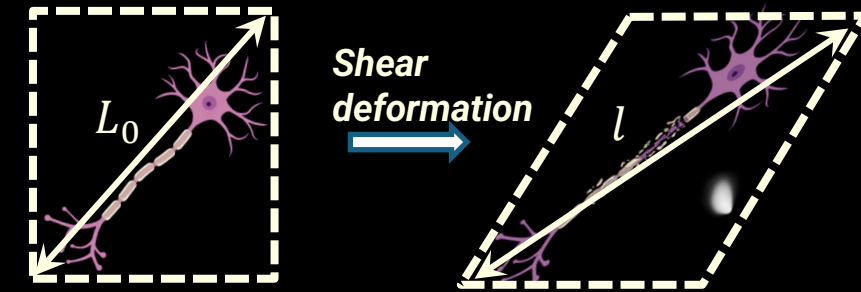
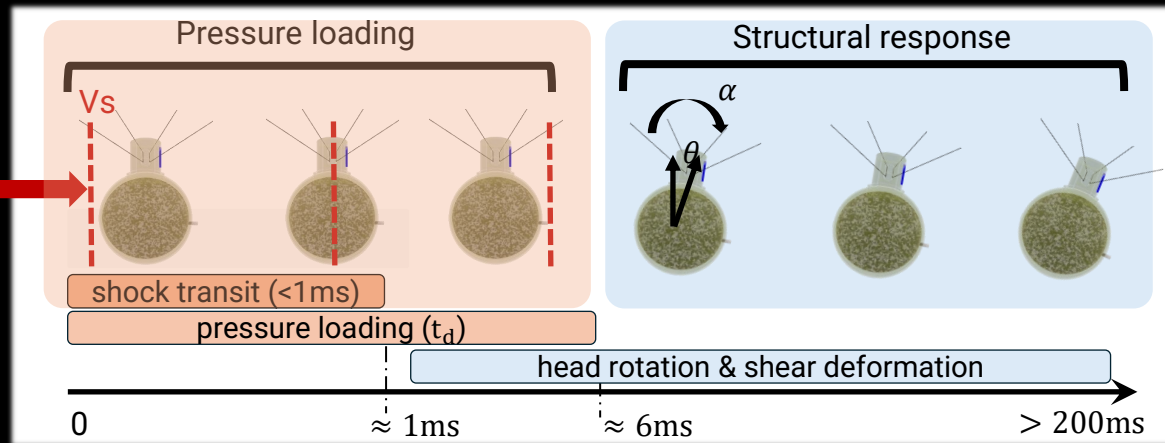


- **No observable deformation** occurs within 1.2 ms of the shock–brain interaction!
- **No cavitation is observed** due to the small magnitude of the negative pressure.



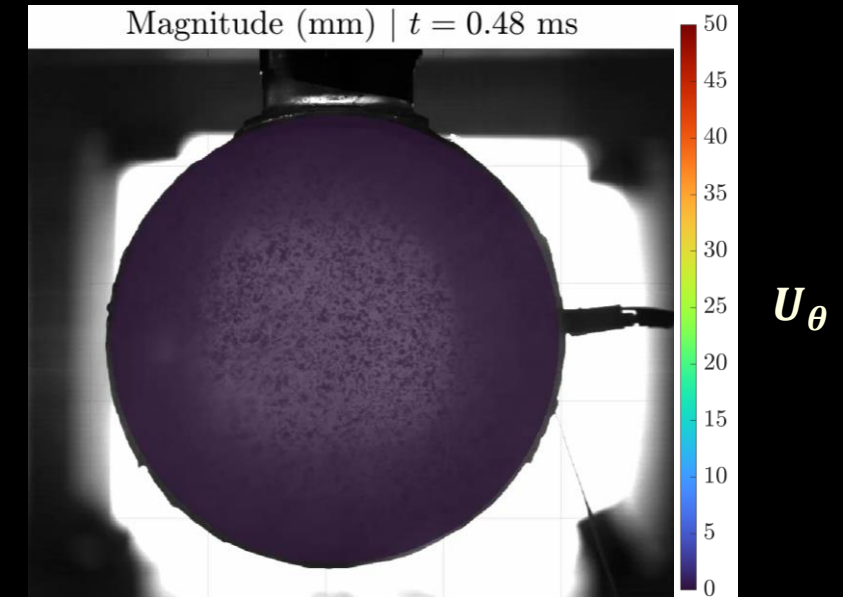
Shear wave regime – creation of internal deformations

- No cavitation
- No deformation



FI+: +0.000 ms

Rigid body motion and gel deformation tracking via **RAFTcorr** deep learning image correlation [1]



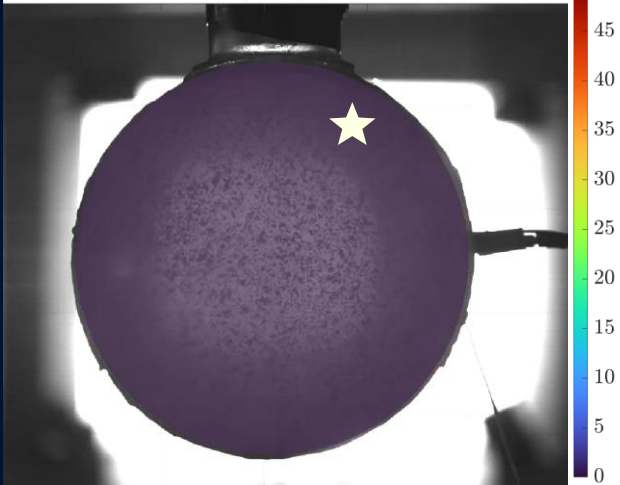
- Internal deformation is predominantly circumferential and is driven by skull rotation.



Spatiotemporal evolution of internal shear strains – the “neck effect” (aka boundary condition effect)

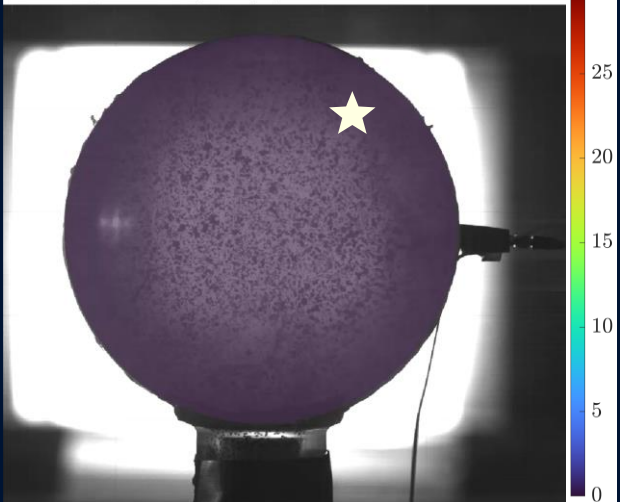
No neck

Magnitude (mm) | $t = 0.48$ ms



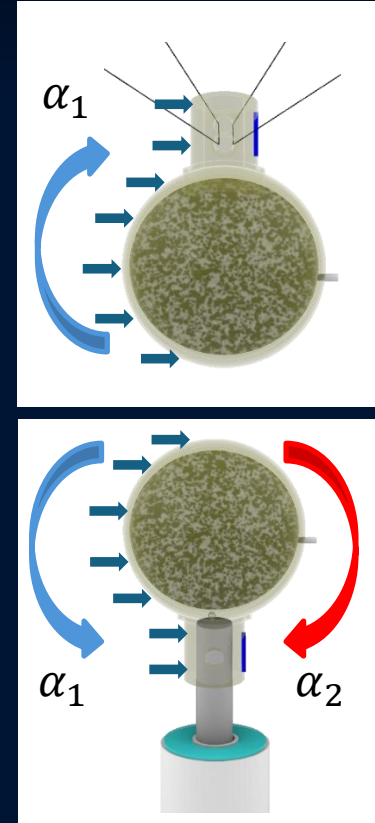
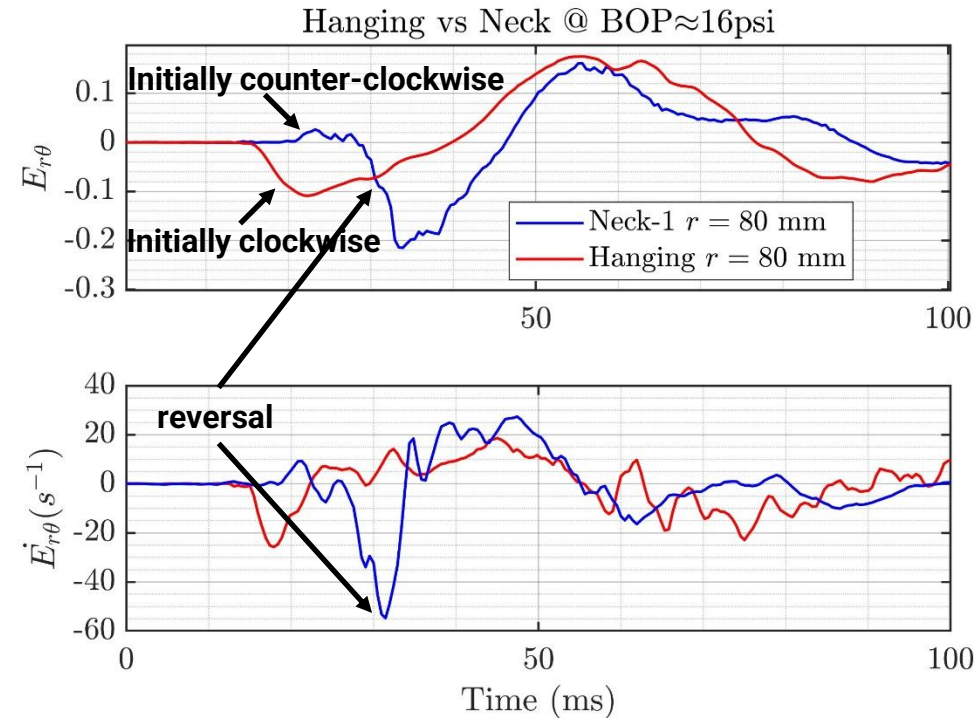
U_θ

Magnitude (mm) | $t = 0.48$ ms



U_θ

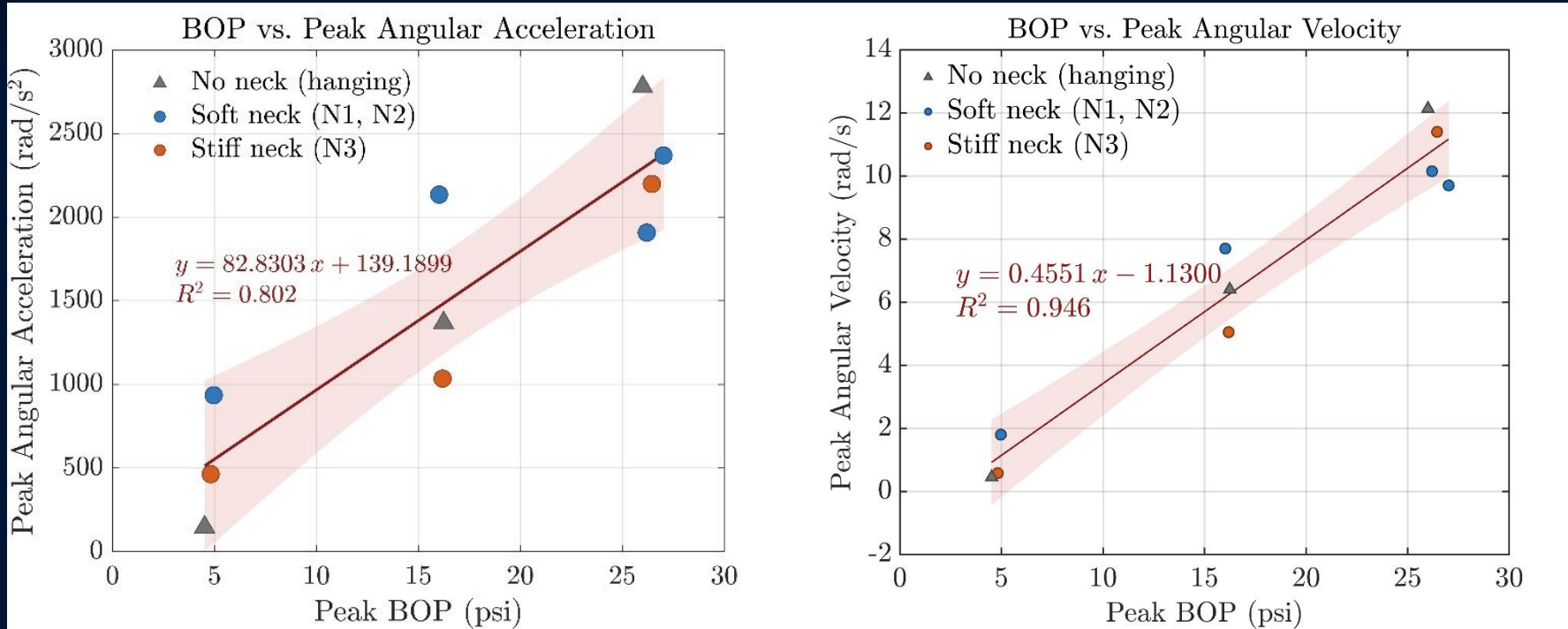
Neck/torso



Neck/torso constraint rapidly reverse the skull motion that generates **significant increase** in shear strain rate!



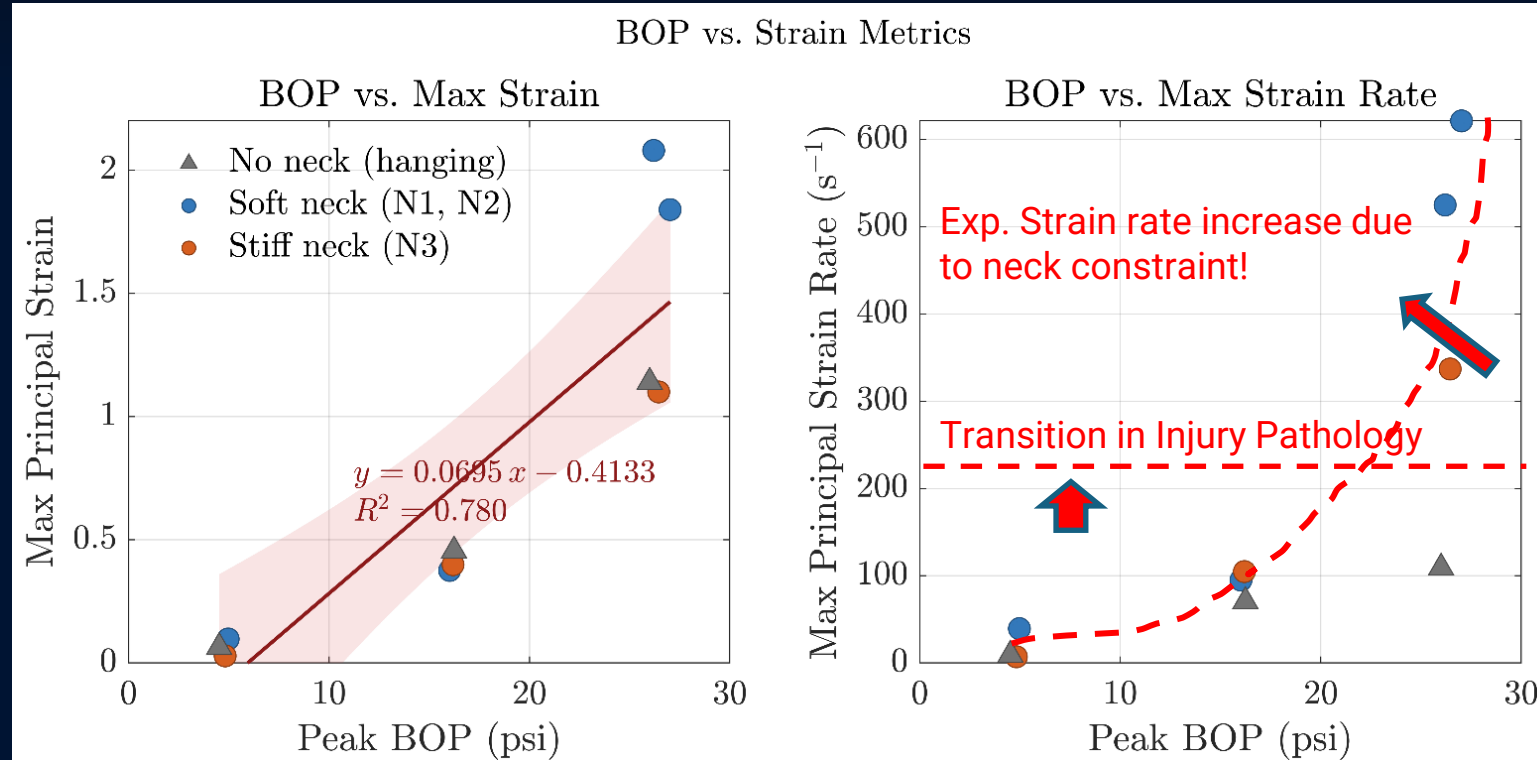
Summary of Key Findings: Blast loading to skull kinematics



- Blast overpressure generates significant angular skull accelerations, albeit with small angular velocities.



Summary of Key Findings: Blast loading to skull kinematics, to internal shear deformation



- Blast overpressure generates significant angular skull accelerations, albeit with small angular velocities.
- BOP correlates strongly with internal strain through peak angular acceleration— potential direct blast-to-injurious deformation link ($R^2 = 0.78$).
- Neck/torso constraint **elevates** strain rate, **not** peak strain.



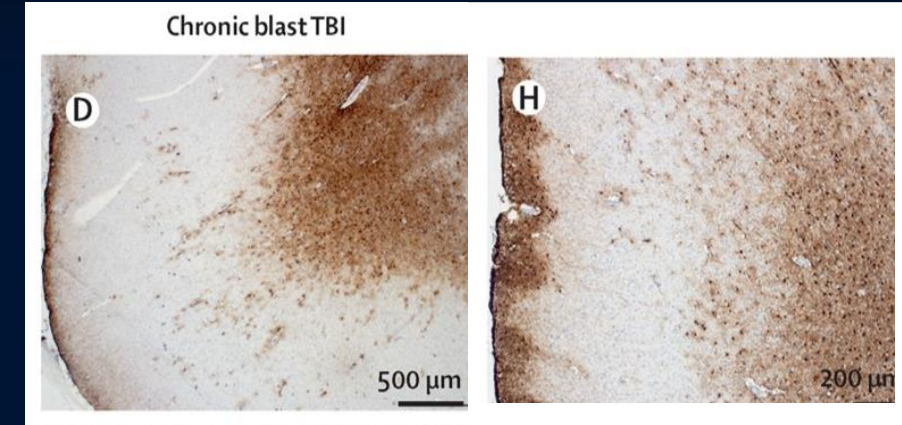
Conclusions

- **Key Findings**

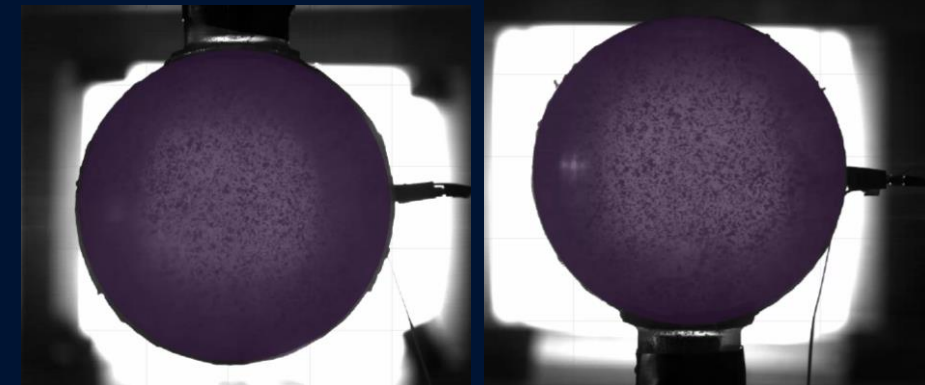
- Shock loading does not directly generate internal strain.
- The **dominant deformation mechanism** comes from **shear waves** emanating from **rapid rotation of the head** (skull) due to a net moment from pressure loading.
- Neck/torso constraint amplifies **strain rate** but not peak strain magnitude.

- **Significance & Broader Impact**

- Results establish a direct, quantifiable blast-to-injury deformation pathway, ***providing a foundation for defining bio-physical safety limits for warfighters***



Widespread astroglia [Shively et al., 2016]





Questions?



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