

# Computerised Muscle Modelling and Simulation for Interactive Applications\*

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**Abstract:** The main challenges of collision detection and handling in muscle modelling are demonstrated. Then, a collision handling technique is tested, exploiting the issue of muscle penetrating the bone in some circumstances, mainly when the movement is too rapid or the displacement of the bone is too high. Our approach also detects the problem, using Discregrid to see the immediate direction change towards the penetrated bone. Some alternatives to the described PBD (Position-Based dynamics) technique are presented: PBD with As-Rigid-As-Possible modification and radial basis function approach.

## 1 INTRODUCTION

Osteoporosis (Wade et al., 2014), osteoarthritis (Oatis, 2017), patellar dislocation (Barzan et al., 2017), or hemiplegic diseases (Zhang et al., 2021) are leading researchers to develop a satisfactory model of the musculoskeletal system. Creating such a model is a complex procedure with many issues. The problem of collision detection (CD) between muscle and bone models and its response (CR) is critical.

In this paper, we follow our previous work and newly present the parameter upper bound, where the simulation still works as expected. Another contribution of this paper is exploring novel modelling methods to overcome the current limitations. This paper also briefly describes some techniques of CD and CR.

The paper is structured as follows. The next section gives an idea of the whole muscle modelling overview and the steps to obtain a usable computerised muscle model. The state-of-the-art approaches


to modelling and simulation of the muscles, based on the position-based dynamics, are described in Section 3. The description of existing CD and CR techniques employed during these simulations follows. Sections 5 and 6 present the current approach's limitations and propose several improvements to overcome them. Discussion of future work and concluding remarks follow.


## 2 MUSCLE MODELLING PIPELINE


The muscle modelling procedure involves many steps, including acquiring relevant raw data and its subsequent transformation into a useful form. The last step is formulating the mathematical model, where the main concern is (among others) the definition of the muscle-bone interaction.


An example of a complex pipeline (consisting of data acquisition, model building and inverse kinematics) includes the following steps:

1. obtaining raw data of the patient at rest (such as medical images) representing anatomical objects (bones, muscles, muscle attachment areas, etc.), and movement data,
2. extraction and transformation of the raw data into

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a useful form, using:

- (a) segmentation – separation of different types of tissues present in medical images (if they are distinguishable). Segmentation can be manual, semi-automatic or automatic (depending on the complexity of the segmentation),
  - (b) extraction – the conversion of segmented data into geometrical models,
  - (c) registration – mapping of data and models from different measurements and modalities into the common reference space
  - (d) approximation and interpolation – reconstruction of missing parts or partially corrupted data.
3. acquiring some general apriori knowledge, determined by human anatomies, such as
    - (a) how the attachment areas will be determined (whether based on apriori knowledge only or the measured muscle attachment areas),
    - (b) defining how a bone is connected by a joint to another bone or how a muscle is connected to a set of bones (attachment areas), etc.,
    - (c) defining physiological parameters of studied muscles, such as internal muscle architecture (e.g. figure arrangement: parallel, pennate, etc.), optimal (resting) length and others.
  4. creating a mathematical model that requires:
    - (a) defining the space (discretised or continuous),
    - (b) defining the shape of the data (triangular surface mesh, tetrahedral volumetric mesh, scattered data... / surface defined by Fourier series, implicit RBF,...)
    - (c) defining the interaction between muscle and bone models and thus determining whether or not a transformation of the measured data is necessary.
  5. transformation of the simulation output from its model representation into the final form, e.g., from a triangular surface mesh into a set of internal fibres.

We recommend the following papers for a more detailed view: the foremost step is well described by (Fukuda et al., 2017) for the attachment area acquisition strategy, (Lee et al., 2014) to determine the pennate angle from the source data. There are also data from invasive measurements, e.g. Visible Human Project (the National Library of Medicine) or The Chinese Visible Human (Zhang et al., 2004). The second step (registration) is also well described in (Zhao et al., 2013). There is also an approach from (Li et al., 2008), with promising results. The other steps are highly dependent on the considered application, whether the purpose is a plausible visualisation of muscles in movement (see. e.g. (Romeo et al.,

2018)) or to calculate some physical phenomena of the muscle (see. e.g. (Modenese and Kohout, 2020)), and whether the user should be able to change the modelling or simulation parameters interactively or not.

We focus on interactive applications which do not require specialised hardware. Consequently, any model developed in the fourth step needs to trade off some accuracy for the speed of simulation. In this paper, we consider position-based dynamics (PBD) suitable for generating models of such a kind.

### 3 POSITION BASED DYNAMICS

Position-based dynamics (PBD) (Müller et al., 2007) is a fast approach used mainly in the animation industry to model elastic object (and cloth) deformations. Nowadays, the PBD is making its way into physical simulations as well. The original algorithm does not consider the possibility of object anisotropy as far as the algorithm has been developed for general objects. The method accepts a manifold surface mesh and produces its deformed variant as the output.

The PBD also exists in the xPBD (eXtended version of PBD, which respects the concept of elastic potential energy) form. The xPBD incorporates elastic potential energy and eliminates the necessity to know the time step and iteration count (Macklin et al., 2016).

Romeo et al. (Romeo et al., 2018) are the first who proposed using the xPBD algorithm for muscle modelling problems. Their fundamental idea is to build an internal structure above the surface mesh to respect the anisotropy of the muscle (the internal structure respects the general direction of the muscle fibres). They can form a volumetric model better suitable for the PBD algorithm with an intelligent edge-creation process. However, the paper needs to describe their collision detection and handle thoroughly. According to their video of the technique outcome, many collisions occur, suggesting their approach did not address the apparent requirement of avoiding muscle-bone penetrations.

Angles et al. (Angles et al., 2019) developed a PBD-based approach for muscle modelling in 2019. Their approach virtually decomposes the muscle into "rods" (which may approximate the muscle fibres). These rods can adjust their diameter wherever they want to preserve their volume. Their main contribution is the ability to provide real-time simulation, which Romeo's approach cannot because "its  $\approx 40$ s/frame of processing time causes it unfitting to interactive applications" (Angles et al., 2019).

They adopt "Particle simulation using CUDA" from (Green, 2010) for collision detection between rods and response. Again, the problem of muscle-bone penetration is not addressed, though in this case, the extension is relatively straightforward.

The position-based dynamics for muscle modelling is also described in the paper "Fast and Realistic Approach to Virtual Muscle Deformation." (Cervenka. and Kohout., 2020) where the PBD approach has been proposed (finished the same year as Romeo's article (Romeo et al., 2018), working concurrently on the same). The paper "Muscle Deformation using Position Based Dynamics" (Kohout and Červenka, 2021) follows, which tests the approach and compares the results to an existing FEM technique. The primary benefit of our suggested system is that no interior is needed. The anisotropy is computed on the surface of the mesh only, utilising muscle fibres on the mesh surface, representing the fibre direction. The voxelisation technique has been used for collision detection and response purposes.

## 4 COLLISION DETECTION AND RESPONSE

Various approaches to detect and respond to an occurring collision have been proposed. The most common algorithms exploit the D&C (divide & conquer) paradigm. The bounding volume hierarchy is one of them (Teschner et al., 2005), using a primitive (often an axis-aligned bounding box AABB or a sphere) hierarchy to enclose the model and its parts. The spatial hashing (Turk, 1990) is its generalisation over the whole model space.

If there is a necessity to know not only if the collision occurs but how far from the collision the model is, the (signed) distance field approach is an excellent way to go. Numerous techniques can be used to construct such a field. The vast majority use voxelisation to obtain a cell array and then use an interpolation method to determine the value between the cells. Some of these techniques are well described in an older work by (Bærentzen and Aanæs, 2002).

In our research of the PBD approach, the first decision was to use a simple voxelisation method to simplify the collision detection problem. This simple idea, however, leads to some things that could be improved. Luckily, some ideas have emerged to entirely improve or even fix some problems, using more complex collision detection algorithms. Havlicek (Havlicek et al., 2022) changed the collision detection to Discregrid (using a signed distance field) and FLC (using a binary search tree), beating the voxelisation

approach in terms of accuracy. However, there is still some work because even those methods only work correctly in extreme conditions, mainly if the movement is rapid.

The collision response is a complicated task as well. Assume that two bones move towards each other and narrowly miss each other (like shear blades). If a muscle is attached to both of the bones and appears to be in between the bones, there is no such room for the bones to move into. This problem often happens on a smaller scale, near joints, especially where two bones move close. Our former solution (Cervenka and Skala, 2020) was to assume, in this particular case, only one of the bones and move a muscle in the direction opposite of it, but it proved insufficient. Havlicek (Havlicek et al., 2022) targets this problem primarily, and he proposed a better approach of considering all adjacent bones and moving opposite to the sum of all collision vectors. Even this approach, however, does not always guarantee collision resolution.

Our current contribution, proposed in this paper, follows our recent articles, mainly (Cervenka. and Kohout., 2020; Kohout and Červenka, 2021) and also (Havlicek et al., 2022). In the first article, we developed a PBD-based approach for muscle modelling. The issue with a muscle stuck inside a joint was shown in that article. We believed that "better collision detection can fix the issue" (Cervenka. and Kohout., 2020). In the second article, the voxelisation collision detection approach was proven inaccurate in some cases, mainly in the case of more "complicated" (e.g. concave) bone surfaces, which are located near the joint areas more frequently. The last article explores two existing collision detection algorithms for the PBD approach: Discregrid and Flexible Collision Library. The Discregrid was shown to be more suitable for the problem.

### 4.1 Discregrid

Discregrid library can be considered a Signed Distance Field generator written in C++. The algorithm computes for each point in 3D space the shortest distance and direction towards a given nearby surface represented by a triangular mesh. Also, assuming that the input mesh is at least watertight, the method can make the inside/outside decision because the algorithm provides the sign. A finite bounded subspace is required for the approach to work.

The bounded surface is firstly divided (like in the voxelisation method) into a rectangular grid with a user-defined resolution, where each voxel is a 32-node Serendipity type (Koschier and Bender, 2017).

For each node, the distance and the direction towards the nearest bounded surface are computed, see (Bærentzen and Aanæs, 2002). The article describes the problem of discontinuity of the mesh (where the normal vectors have to be estimated differently).

The field creation process is time-consuming (about half a minute for bone meshes consisting of up to 45 000 vertices with the grid resolution of  $64 \times 64 \times 64$  on standard hardware) and unfeasible for deformable objects like muscles, where recalculation is often needed. There is no such problem with the bone models because their movement is only rigid (allowing for Discregrid results to be transformed using a global transformation).

In the case of muscle modelling, a situation may happen when the muscle collides with a bone or another muscle, even at the start of the simulation. This situation is caused by the different modalities used for the data measurements (see section 2). To fix the issue, the colliding surface vertices are pushed according to the Discregrid result directional vectors so no collision would occur at the start of the simulation.

## 5 MUSCLE SIMULATION

In this paper, we experimented with more types of motion of the hip joint, not just flexion but also rotation and adduction. We also tested a hip extension scenario in the described PBD approach to find the maximum amount of problematic cases possible. The tests will be done on muscles and bones depicted in Fig. 1.

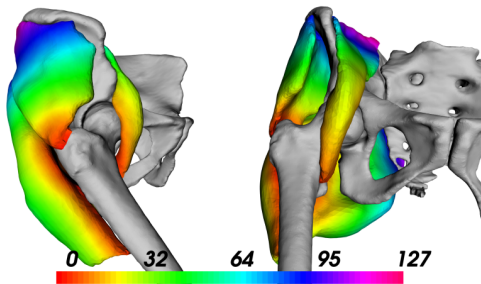


Figure 1: One view from the side and one from the front of a muscle group surrounding the hip joint in rest pose. The vertices of the muscles are coloured by their distance to the femur bone (pointing down) in millimetres given by Discregrid.

### 5.1 Test of Motion Types

For the test of different motion types, we tested the original hip flexion (from  $0^\circ$  to  $+90^\circ$  with the step of  $2^\circ$ ), hip rotation (from  $0^\circ$  to  $+45^\circ$  and also to  $-45^\circ$

with the approximate degree of  $1^\circ$ ) and hip adduction (from  $0^\circ$  to  $+60^\circ$  with the approximate step of  $2^\circ$ ).

The results of hip flexion are shown in Fig. 3. Near the joint area, the muscle nearly touches the femur bone; however, no collision occurs. Fig. 4 shows the results for the rotational motion. As before, the muscle nearly touches the femur's upper extremity without collisions. The adduction is demonstrated in Fig. 5. In this case, the muscle is further from the hip joint, lowering the possibility of collisions. The collision detection and response approach solved all the apriori collisions, so no collisions happened.

### 5.2 Test of Motion Speeds

To test for bone movement speed impact, we chose the extension movement. The initial step of  $2^\circ$  was increased to  $4^\circ$ ,  $5^\circ$  and finally  $10^\circ$ . We also increased the target angle to  $+80^\circ$  for rapid movement to have time and space to show up fully.

In this case, when the angle finally reaches  $72^\circ$  with the angle step of  $4^\circ$ , first bone penetration occurs (see Fig. 6). The muscle is not as fast as needed to keep up with the bone movement, causing the distal part of the muscle to enter the bone volume and go through the whole cross-section. The muscle is also being unnaturally pushed into itself by the bone.

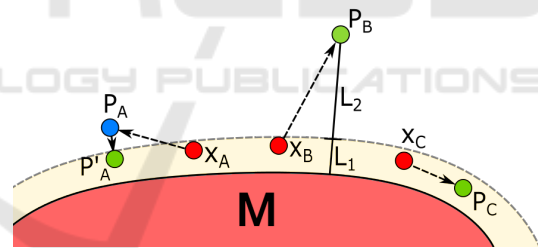


Figure 2: Simplified 2D illustration of the sliding mechanism. Points  $X_A$ ,  $X_B$  and  $X_C$  are being evaluated for the distance from the other muscle  $M$ . Consider the same threshold distance for each of them (yellow margin). Point  $X_A$  is pushed to the position  $P_A$  by previous PBD constraints but returned towards the other muscle to the position  $P'_A$ . Point  $X_B$  is pushed away by the PBD so much it makes sense to leave it to go ( $L_2 > L_1$ ). Point  $X_C$  is free to roam inside the strip.

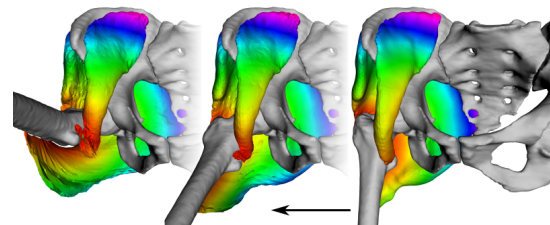


Figure 3: The result of the hip flexion progressing from right to left.

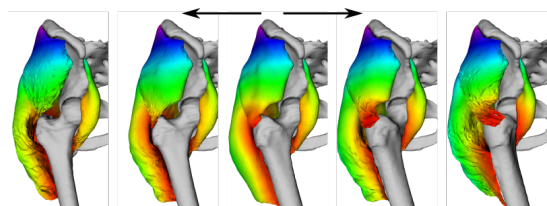


Figure 4: The result of the hip rotation progressing from the centre to the sides.

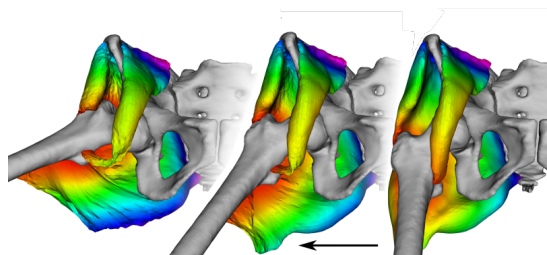


Figure 5: The result of the hip adduction progressing right to the left during the simulation.

### 5.3 Tunnelling Detection

The tunnelling problem (muscle “jumps” in a single iteration through the whole bone to the opposite side) appears at places where the displacement of the bone between two consecutive simulation frames exceeds half the size of a muscle with which the bone collides. According to (Havlicek et al., 2022), “when [the femur] rotates about just  $2^\circ$  (a typical step in simulations), the displacement of the distal part of this bone is nearly 3 cm”. In our experiments with the muscles of the hip, i.e., no part of the muscle is near the distal portion of the bone, this problem arises when the angle step is higher than  $4^\circ$ .

This problem is relatively standard and does not arise only with this particular approach. For example, (Janák, 2012) notes that “if the movement of the object is too fast in relation to the discrete time step, the collision may not be detected”.

The scenario of the muscle movement is so rapid that the whole muscle volume could go through the entire bone model, which is possible (due to the already described displacement issue concerning the change of the angle of the bone). Our solution would be moving a muscle to the bone (rotate around the exact centre of rotation and about the same angle), so the muscle is closer to where it should lie. However, before applying this correction, such an event must be detected.

Generally, a continuous collision detection method could be employed instead of the currently used discrete one. However, such methods are expensive. We, therefore, propose a simple (and fast)

test based on a comparison of the directional vectors to the nearest bone surface, provided automatically by the Discregrid.

If the direction of one muscle vertex suddenly changes “too much”, we may expect that the penetration through the whole bone has happened. The “too much” is defined as when the angle between the directional vector from the previous step and the new one is greater than  $135^\circ$ , as described in Equ. 1, where  $d_i$  is the direction to the bone in this computational step and  $d'_i$  is the direction to the bone in the previous computational step,  $|\mathbf{a}|_2$  is the euclidean norm of the vector  $\mathbf{a}$ . A tunnelling case can be seen in Fig. 6.

$$\begin{aligned} \arccos |\mathbf{d}_i \cdot \mathbf{d}'_i|_2 &> 135^\circ \\ |\mathbf{d}_i \cdot \mathbf{d}'_i|_2 &> -0.75 \end{aligned} \quad (1)$$

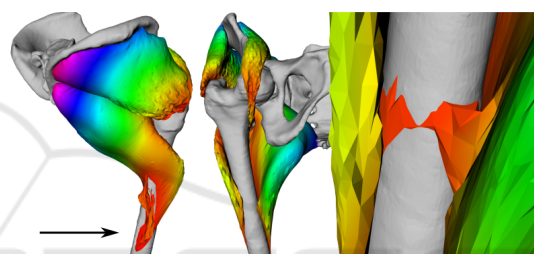


Figure 6: Due to the lack of contraction modelling, the muscles are being dragged during the hip extension (left and centre images). Finally, under the degree of  $72^\circ$ , first tunnelling occurs (right) and is detected successfully by the proposed algorithm.

### 5.4 Problem of Multiple Muscles

When multiple muscles are simulated in the scene, they may also intersect each other. As noted in section 4.1, building the Discregrid structure for the muscle meshes is unusable for the interactive application due to time requirements. An appropriate collision handling system could be, e.g. a BVH structure (see section 4), which would have to be updated each time any muscle moves. As the nearby muscles often touch each other - see Figure 1, this solution would probably be inefficient. Therefore, we propose the “sliding” technique using the so-called “virtual edges” to keep the muscles at a certain distance from each other to prevent collisions and unrealistic detachments.

#### 5.4.1 Sliding over Surfaces

The main idea is to allow the muscles to slide over each other using the virtual edges between the muscles. We may keep chosen vertices up to a certain distance away from the other muscles, i.e. a threshold. The vertices to keep close to the other muscles

can be selected by their initial distance and kept in a list. This list could also be updated if the PBD displacement of a particular vertex away from the other muscle would be greater than its initial distance, letting the point go. Similarly, collecting more vertices into this list could be achieved via checking, for example, the neighbourhood vertices, which would be the likely candidates.

In case the PBD forces are less in magnitude than this *attraction force* but still point away from the muscle, the vertex would be pushed in the closest direction to the other muscle surface, effectively making the point slide along the other muscle surface and hopefully preventing it from colliding or unrealistically spanning out, as illustrated in Fig. 2.

This functionality is implemented preliminarily, using the Discregrid library to preserve the distances between a bone and a muscle. The resulting virtual edges can be seen in Figure 7. The reason for this measure is that the original idea implementation would be beyond the scope of this paper.

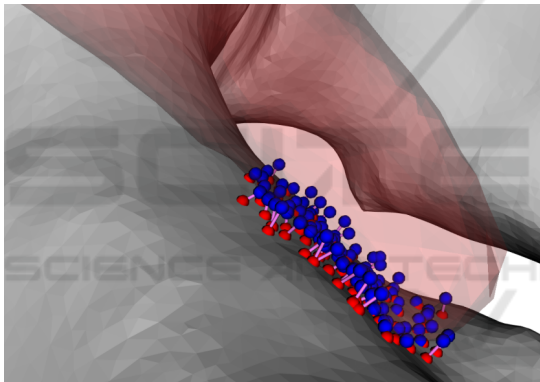


Figure 7: An example of virtual edges between a muscle and a bone with the participating vertices in blue and red, respectively. The points in blue are muscle vertices, which are close enough to the bone at the start of the simulation. For each of them, the closest bone vertex (red) is found. The pairs of vertices are connected with a straight line segment, symbolizing a virtual edge.

## 6 FUTURE WORK

The PBD approach on its own brings some problems to muscle modelling. The shape is not well preserved (see Fig. 5, on the middle image, the bottom central part of the gluteus maximus muscle is unrealistically deformed), and bone penetration happens. Any problems stem from low solver iteration count, essential for real-time model interaction. The options to solve these are to:

- increases the number of PBD iterations, ef-

fectively slowing down the simulation, which would become no longer interactive (Kohout and Červenka, 2021);

- uses the eXtended PBD, which converges more consistently (the iteration count is not as significant) but does not solve the penetration issues;
- uses a different muscle model.

### 6.1 RBF Representation

The radial basis function model opens a new possibility to develop a new approach to the deformation of this model, which would allow smooth and rapid muscle simulation. Collision detection and response, volume preservation, and muscle anisotropy are the challenges for future work.

The critical decision for the suitable model is to select the suitable radial basis function and shape parameters (if any). A comprehensive study of some well-known RBFs has already been made (see, e.g. (Majdisova and Skala, 2017)), and the shape parameters were explored (e.g. in (Skala and Cervenka, 2019) or (Afiahdoust and Esmailbeigi, 2015)).

### 6.2 ARAP & PBD

Because of the deformed and unrealistic shape of the model during the simulation, the As-Rigid-As-Possible (ARAP) approach from computer graphics is proposed for merge with PBD to deform an object respecting its original shape (Sorkine and Alexa, 2007) to obtain "the best of both worlds".

As the preliminary experiment, we tried to use a single PBD iteration to preserve the muscle's original volume, followed by a single iteration from ARAP, which should restore the initial shape of the muscle. The problem is that these two restrictions force most vertices to go in the opposite direction, resulting in a rough surface. (see results in Fig. 8). The volume preservation constraint is not solvable by introducing a new condition into the system since the interleaving approach does not work.

Dvorak et al. (Dvořák et al., 2022) show how to apply the ARAP approach to volume preservation. However, their approach is not used directly for muscle modelling problems. Our goal is to avoid the introduction of an internal muscle structure to reach lower computational complexity, meaning that their approach would have to be altered drastically.

We see two options for fixing the mentioned issues. The first is to start with PBD and replace the shape preservation constraint with the shape preservation constraint from the ARAP approach. A math-

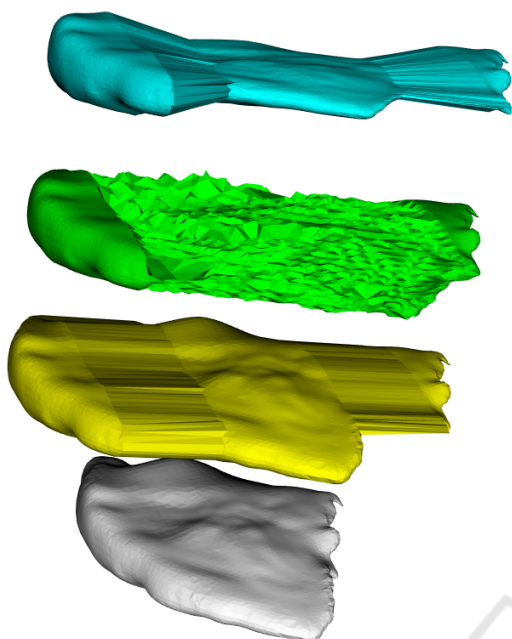


Figure 8: ARAP approach with a simple volume preservation constraint. The initial model is in white, the user deformation is in yellow. The volume preserving model with user defined constraint is in lime blue, the green model is the simple interweaving approach of the ARAP and PBD.

emational reformulation of the shape constraint and finding a gradient expression would be required for the ARAP shape preservation constraint. The other option is to start with ARAP and replace the interleaving approach with gradient descent from PBD. Then, a volume constraint can be added. Either way, both methods should end up with the same result.

## 7 CONCLUSION

All of the described techniques for muscle modelling provide good outcomes; however, each has some drawbacks. Some are inaccurate (Hill-type model (Hill, 1938), incorrect according to (Burzyński et al., 2021), Via-points too approximate according to (Modenese and Kohout, 2020)), some are accurate but difficult to set up or simply too slow to be useful (Finite element methods used by, e.g. (Delp and Blemker, 2005), proved difficult to set up by (Romeo et al., 2018)). Other methods are “compromise solutions” in terms of accuracy and computational complexity (Mass-Spring system, (Georgii and Westermann, 2005; Aubel and Thalmann, 2001; Janák, 2012), PBD, As-Rigid-As-Possible (Sorkine and Alexa, 2007; Fasser et al., 2021; Wang et al.,

2021)). As the reader can probably imagine, many open problems still exist.

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