The background of the slide features a dark blue, semi-transparent illustration of a human heart with visible coronary vessels. To the right of the heart, a white ECG (heart rate) waveform is superimposed over a faint grid. The overall aesthetic is medical and scientific.

Mathematically modelling the effect of transfused Dofetilide on Short QT syndrome

BIOE3001 - Quantitative Methods in Biomedical Engineering

Oral Presentation

Clinical Background

Short QT syndrome (Type 1)

A cardiac disorder which generates short QT intervals [1]

Root Cause:

Mutations in the KCNH2 (hERG) gene

- Responsible for regulating K^+ channels that generate cardiac muscles [2]

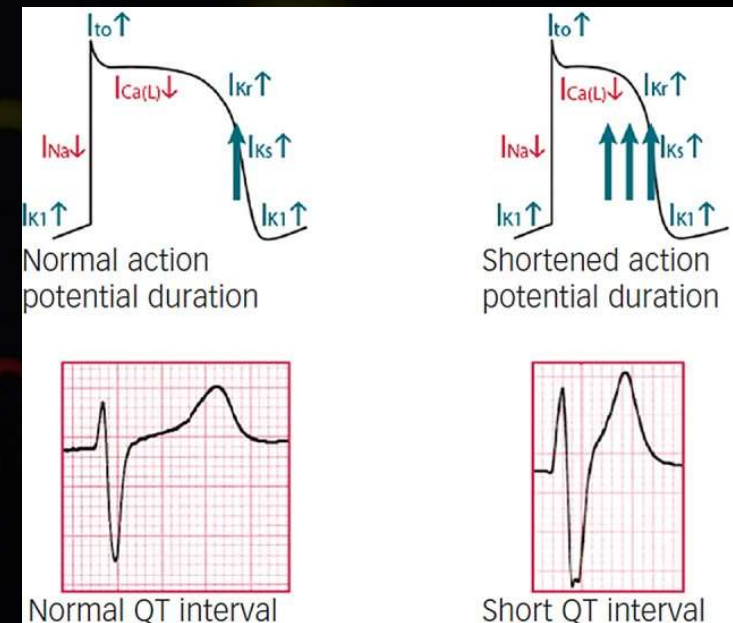


Figure 1: Mechanism of Short QT syndrome, from [11]

Clinical Problem - Biostatistics

Symptoms [5]:

- Sudden Cardiac Arrest
- Heart Palpitations
- Sudden Fainting



Statistics:

Individuals with syndrome: ~ **1.6 million to 16 million** individuals

Globally predicted to have Short QT syndrome, from: [6]

Healthcare Cost: **\$300 Billion USD / year**

Predicted global cost for those that experience sudden cardiac arrest, from [10]



Clinical Problem – Current Treatments

Dofetilide

“An Antiarrhythmic agent used to calibrate atrial fibrillation to the normal sinus rhythm” From: [7]

1. Binds to potassium channels in cardiac tissue
2. Inhibits potassium channels
3. Prolongs action of action potential
4. Increases duration of QT interval on EKG graph

Sources: [7], [8], [9]

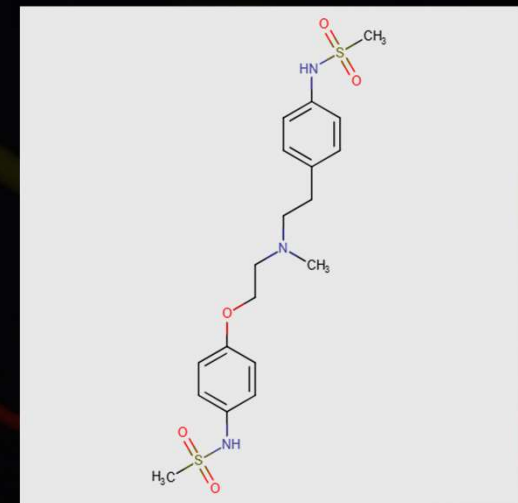


Figure 2: Molecular representation of Dofetilide, from [7]

We must create an effective model that is able to help clinicians to optimize Dofetilide therapy for patients diagnosed with Short QT Syndrome

Model Parameters

Table 1: Parameters for treatment model

Mathematical Symbol/Equation	Units	Name	Description
C_{Dof}	ng/mL	Dofetilide concentration	Concentration of Dofetilide plasma within subject patient's blood
$Interval_{QT}$	Ms	QT Interval	Time duration of EKG QT interval
$Interval_{OG}$	Ms	QT Interval OG	Time duration of original QT interval for untreated patient
D_{Dof}	ng	Dofetilide dosage	Dosage amount for diagnosed patient (clinically administered)
$t_{effective}$	hours	Effective drug time	Time required for Dofetilide to have detectable therapeutic effect
t_{max}	hours	Maximum drug time	Maximum time Dofetilide has therapeutic effect on potassium channel
k_{decay}	hours	Dofetilide decay	Half life decay of Dofetilide in the body
V_{Dist}	L/kg	Volume Distribution	Dofetilide plasma volume relative to subject patient's blood volume
B_{Dof}	-	Protein Binding %	Percentage of drug concentration that binds to proteins in cardiac tissue
O_{Dof}	-	Oral absorption %	Percentage of drug that gets absorbed from intestinal system

Estimated and Researched Values

Table 2: Researched Values from literature

Mathematical Symbol	Units	Value	Resource (if applicable)
k_{decay}	hours	10	[7], [8]
V_{Dist}	L/kg	3L/kg	[7], [8]
B_{Dof}	-	70%	[7], [8]
O_{Dof}	-	90%	[7], [8]

Assumptions

1. Body weight of patient: 70kg
2. No external factors or events affect patient heart rate during study observation

Simplifications

1. Method of drug secretion from urine and feces grouped together to have 100% secretion rate as part of k_{decay} [8]

Mass Volume

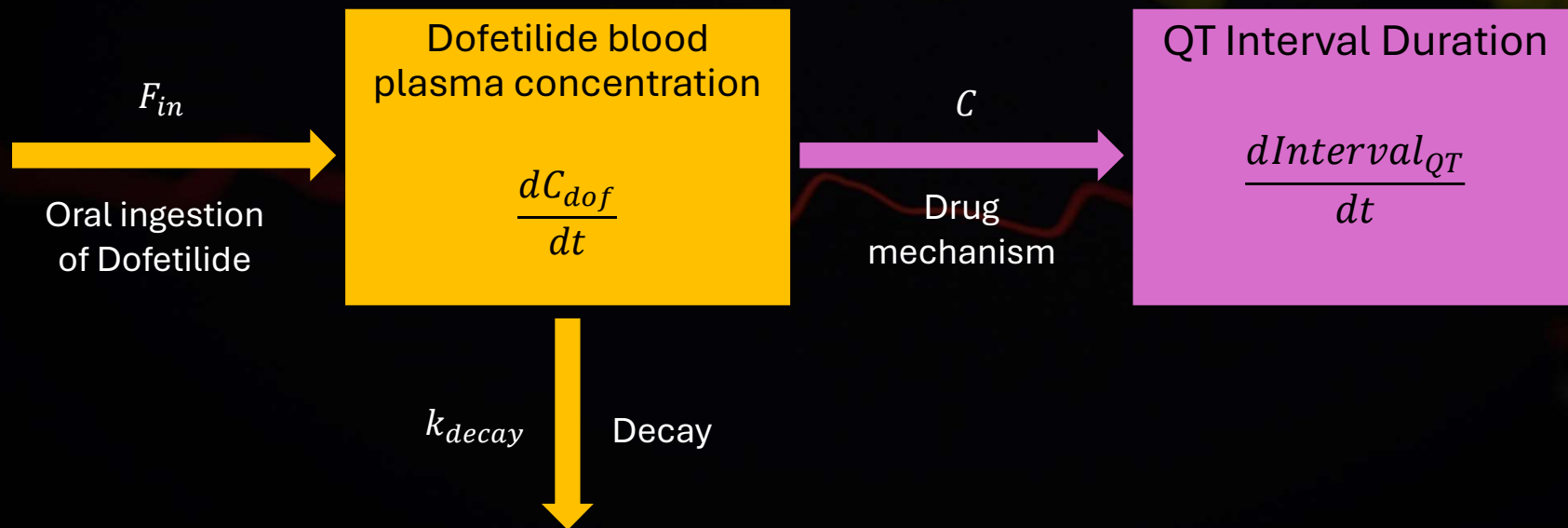


Figure [3]: Model for Short QT Syndrome treatment with Dofetilide

Diagrams

Blood concentration

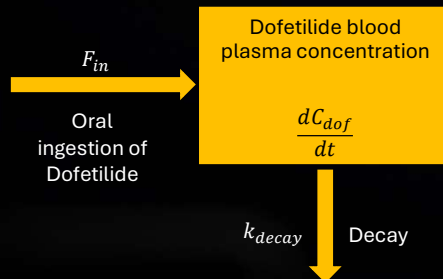
Change of blood Dofetilide concentration in patient blood over time

Utilises Dataset 3

$$\frac{dC_{dof}}{dt} = \begin{cases} F_{in}, & t < t_{effective} \\ F_{in} - k_d D_{dof}, & t_{effective} \leq t < t_{max} \\ -k_d D_{dof}, & t \geq t_{max} \end{cases}$$

Where:

$$F_{in} = \frac{D_{Dof} * O_{Dof}}{V_{Dist}}, \text{ from [8], [9]}$$



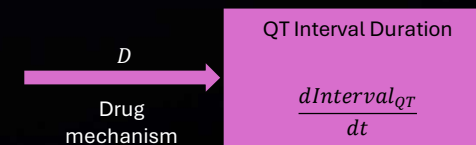
QT Interval

Change of average QT EKG interval over time

Utilises Dataset 2

$$\text{Since } \frac{dInterval_{QT}}{dt} \propto \frac{dC_{dof}}{dt},$$

$$\frac{dInterval_{QT}}{dt} = \begin{cases} k_d * D_{dof} + dInterval_{OG} & t_{effective} \leq t < t_{max} \\ dInterval_{OG} - (UNSURE), & t \geq t_{max} \end{cases}$$



Predicted system outcomes

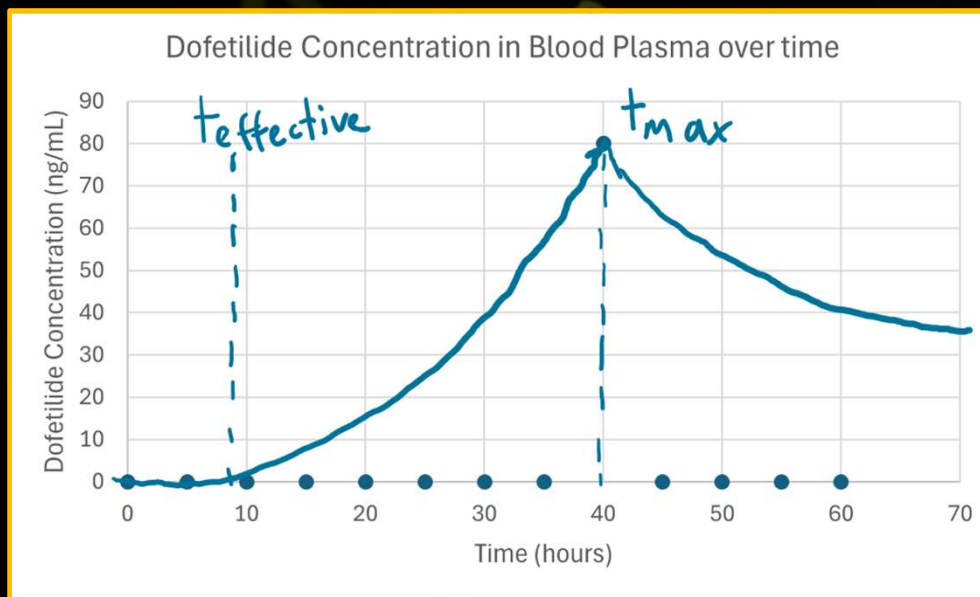


Figure 4: Predicted Dofetilide concentration in blood over time

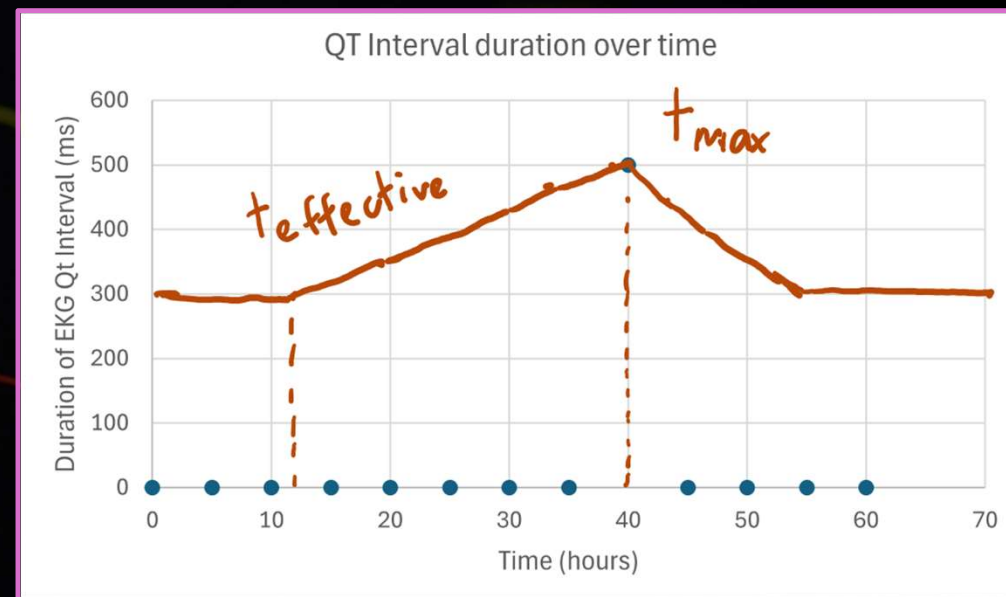


Figure 5: Predicted change of QT Interval duration over time

Further development

1. Use ECG data to work out untreated QT interval time and use that to select clinical dosage, according to [9]
2. Work on pharmacodynamics to find relation between drug effect on QT interval (MM)?

The background is a dark, textured surface. It features several horizontal, wavy lines in green, yellow, and red, resembling an ECG or heartbeat. Faint, glowing circuit components like resistors and capacitors are visible in the background, particularly on the right side.

Thank You

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References

Title Page: R. Pacis. "Cardiac Arrest Vs. Heart Attack: What's The Difference?" University of Michigan. <https://www.mymichigan.org/about/news/healthdoseblog/cardiac-arrest-vs-heart-attack> (accessed 23/08/2025, 2025).

Background: J. Chehov, "ECG Photo." [Online]. Available: https://unsplash.com/@joshua_chehov?utm_source=medium&utm_medium=referral

- [1] I. P. Dewi and B. B. Dharmadjadi, "Short QT syndrome: The current evidences of diagnosis and management," *Journal of Arrhythmia*, vol. 36, no. 6, pp. 962-966, 2020, doi: <https://doi.org/10.1002/joa3.12439>.
- [2] C. Oshiro, C. F. Thorn, D. M. Roden, T. E. Klein, and R. B. Altman, "KCNH2 pharmacogenomics summary," (in eng), *Pharmacogenet Genomics*, vol. 20, no. 12, pp. 775-7, Dec 2010, doi: [10.1097/FPC.0b013e3283349e9c](https://doi.org/10.1097/FPC.0b013e3283349e9c).
- [3] B. Yoo, "Normal Sinus Rhythm on an EKG," in *Circulatory System and Disease*, K. Academy, Ed., ed. Youtube: Youtube, 2014.
- [4] A. Le, "Cardiac Action Potential, Animation.," in *Cardiology*, A. Le, Ed., ed. Youtube: Youtube, 2017.
- [5] C. Giustetto *et al.*, "Short QT syndrome: clinical findings and diagnostic–therapeutic implications," *European Heart Journal*, vol. 27, no. 20, pp. 2440-2447, 2006, doi: [10.1093/eurheartj/ehl185](https://doi.org/10.1093/eurheartj/ehl185).
- [6] M. H. Nikoo, A. Heiran, F. Mashayekh, A. Rezaianzadeh, A. Shiravani, and F. Azadian, "A descriptive report on short QT interval in Kherameh branch of the PERSIAN cohort study," *Scientific Reports*, vol. 12, no. 1, p. 2898, 2022/02/21 2022, doi: [10.1038/s41598-022-06835-y](https://doi.org/10.1038/s41598-022-06835-y).
- [7] Dofetilide [Online] Available: <https://go.drugbank.com/drugs/DB00204>
- [8] M. A. Ibrahim and V. S. Tivakaran, "Dofetilide," in *StatPearls*. Treasure Island (FL): StatPearls Publishing Copyright © 2025,
- [9] Dofetilide Dosage [Online] Available: <https://www.drugs.com/dosage/dofetilide.html>
- [10] M. Darvish *et al.*, "Heart failure: assessment of the global economic burden," *European Heart Journal*, vol. 46, no. 31, pp. 3069-3078, 2025, doi: [10.1093/eurheartj/ehaf323](https://doi.org/10.1093/eurheartj/ehaf323).
- [11] B. Rudic, R. Schimpf, and M. Borggrefe, "Short QT Syndrome - Review of Diagnosis and Treatment," (in eng), *Arrhythm Electrophysiol Rev*, vol. 3, no. 2, pp. 76-9, Aug 2014, doi: [10.15420/aer.2014.3.2.76](https://doi.org/10.15420/aer.2014.3.2.76).