# Collaborative Research in Medical Sensing: Wearable Wireless Sensor for Pressure Ulcer Prevention

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#### **Disclosures**

- Grant/Research Support:
  - In-kind support, Boston Scientific

- Graphic content warning: Images of
  - Pressure ulcer wound
  - Porcine model animal experiment

## **Development of Biomedical Collaboration**

GREATEST ENGINEERING	ENGINEERING'S
ACHIEVEMENTS OF	GRAND CHALLENGES
THE 20TH CENTURY	Make solar energy economical
1. Electrification	Provide energy from fusion.
2. Automobile	Develop carbon seques-
3. Airplane	tration methods.
4. Water supply & distribution	Manage the nitrogen cycle.
5. Electronics	Provide access to clean water.
6. Radio & television	Restore & improve urban
7. Agricultural mechanization	infrastructure.
8. Computers	Advance health informatics.
9. Telephone	Engineer better medicines.
10. Air-conditioning & refrigeration	Reverse engineer the brain.
11. Highways	Prevent nuclear terror.
12. Spacecraft	Secure cyberspace.
12 Internet	Enhance Virtual reality.

- General direction: NAE Grand Challenges
  - Health; Sustainability; Security

#### **Collaboration History**

#### 2011-12

 MQPs: Wired / Wireless pressure ulcer prevention device Morianos, Jones, Gutierrez; Williams, Truhanovitch, Hause Advisors: Mendelson (BME), Bitar (WPI ECE), Dunn (UMMS)

#### 2015

- McNeill, Dunn meet at UMMS/WPI Research Collaboration event
- \$20K + \$5K WPI/UMMS Seed Grant funding Partial support for MS student Matthew Crivello

#### 2016-17

- McNeill ½ sabbatical at UMMS
- TA support for PhD student Devdip Sen
- 2 MQPs (ECE, BME)
   Agdeppa, Hussain, Kim, Loehle; Ooyama-Searls, Pachucki, Parent Advisors: McNeill, Mazumder, Mendelson

#### 2017-18

- \$25K UMass Technology Commercialization (OTCV) funding
- \$10K Massachusetts Technology Transfer Center (MTTC)

### **Motivation: Pressure Ulcer** *Prevention*

- Painful
- Increases risk for secondary infection
- Wound healing takes up to several months
  - May not heal at all in compromised patients
- Adds \$11B annually to US health care costs
- Demographics: Increasing cost, incidence, prevalence
- → Need compact, low-cost <u>prevention</u> for patients:
  - In hospital setting
  - Confined to bed at home
  - With limited mobility in wheelchairs

Healing of pressure ulcer over several months

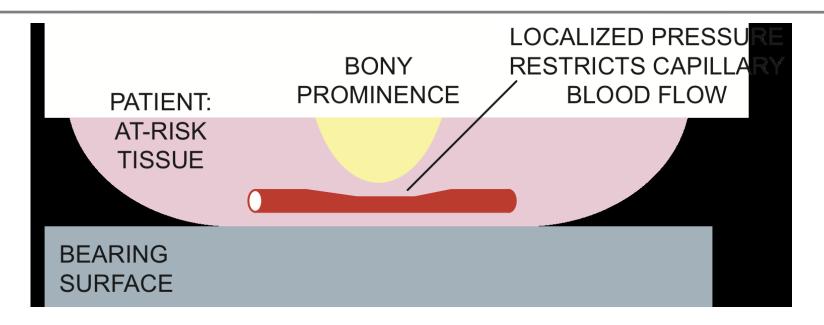








#### **Cause: Localized Pressure**



- External pressure over ~30mmHg restricts blood flow
- Ischemia; tissue deprived of oxygen
- Can lead to tissue necrosis

## **Opportunity for Prevention**

- Well-known locations on body at risk for pressure ulcer formation
- Location depends on patient environment:
  - Hospital setting
  - Confined to bed at home
  - With limited mobility in wheelchair

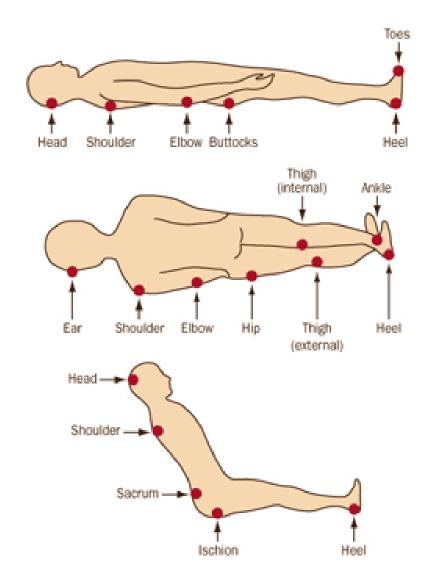
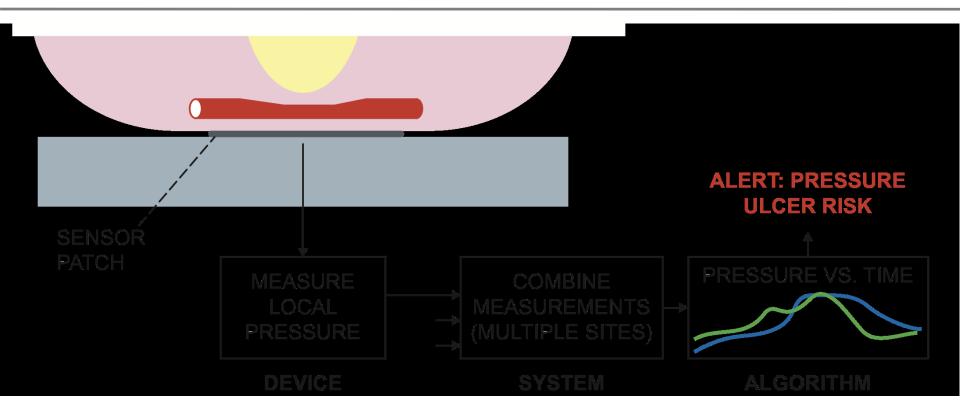


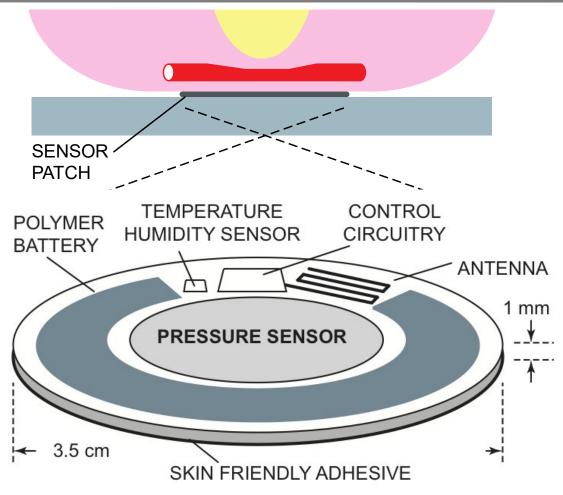
Image: http://www.jgh.ca/en/qiPressureUlcerPrevention (accessed 12Aug2016)

## System Approach: Pressure Ulcer Prevention



- Device: Low-cost, disposable, wearable sensor patch
- System: Wireless data collection from multiple at-risk sites
- Algorithm: Assess risk from pressure vs. time profile

#### **Device**



- Low-cost, disposable, wearable sensor patch
- Measure local pressure, temperature
- Small size, comfortable to wear for long duration

## **Benefits of Our Approach**

- Low cost: \$10 / sensor
- 7-day wearable; disposable
- Meet needs for multiple populations:
  - Caregiver: Reduces workload
  - Doctor: Detailed pressure-time information
  - Patient: Improved independence

#### **Drawbacks of Existing Techniques:**

- 2-hour turn protocol
  - Workload, injury risk for caregivers
  - Not supported by controlled trials
- Offloading beds
  - Expensive (> \$10K), fixed location
- Pressure mapping pad
  - Expensive (> \$1K), caregiver interpretation

## **Commercial Impact**

#### \$11B annual cost in US for pressure ulcer treatment

Potential annual market population:

<ul><li>Hospitals</li></ul>	35.1 million
(2014: No Medicare reimbursement)	
<ul> <li>Nursing homes</li> </ul>	1.4

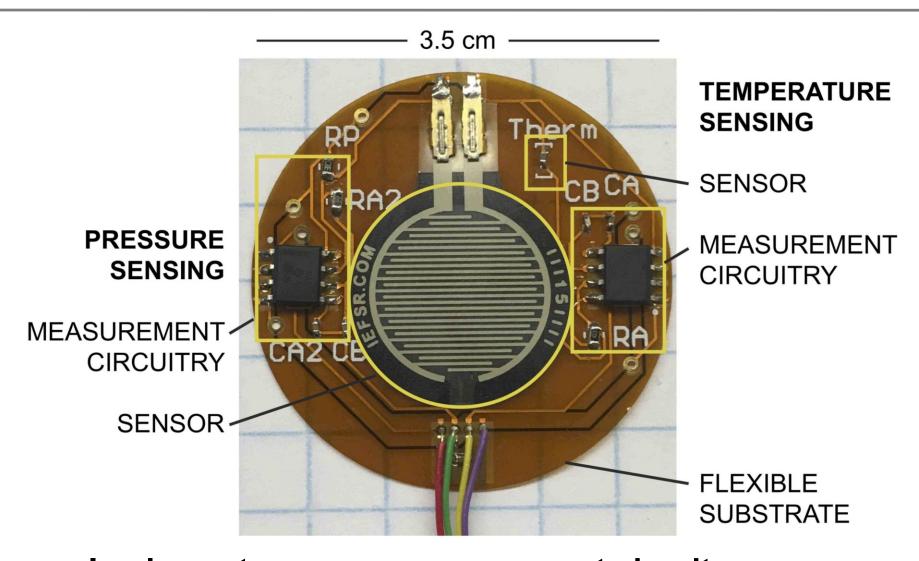
Long term / residential care1.0

In-home care5.3

Potential Population (5% at risk) 2.1 million Estimated Gross Annual Market > \$120 million

- Demographic demand accelerating
  - Aging, longer lived population

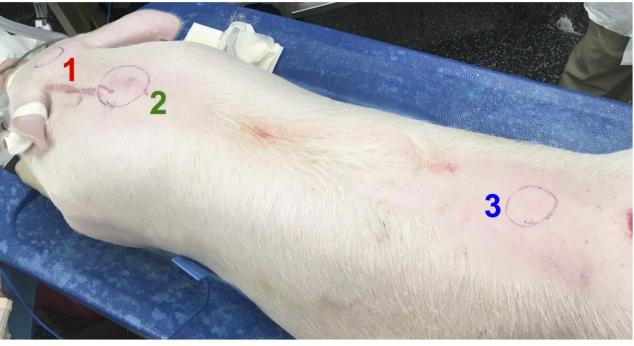
## Flexible Wired Prototype



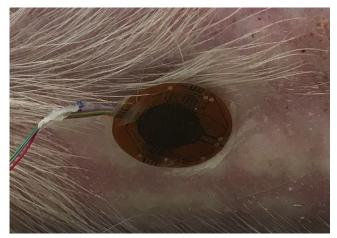
 Implement sensors, measurement circuitry on flexible substrate

## **Animal Experiment Data Acquisition**



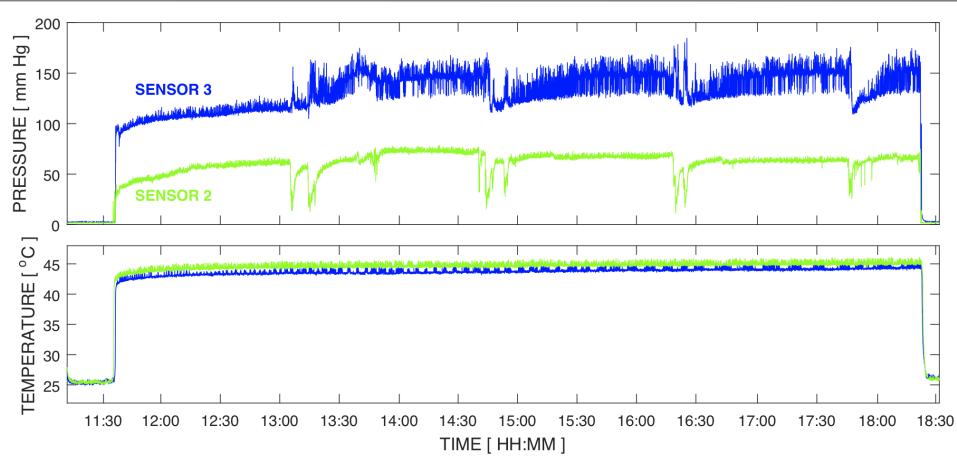


- Surgical protocol: Anesthetized pig immobile on back for ~ 7 hours
- Identified at-risk sites for placement of wired sensors
- Acquire data from multiple sites



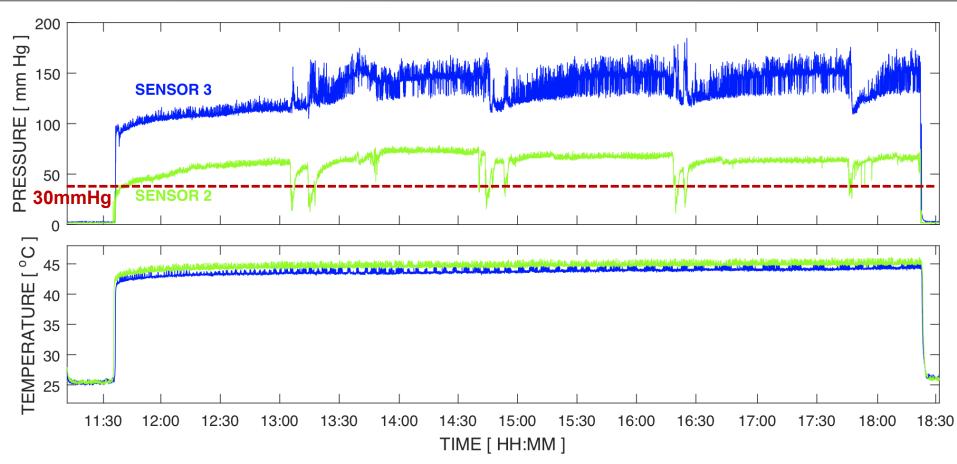
Closeup of attachment site

## **Experimental Results**



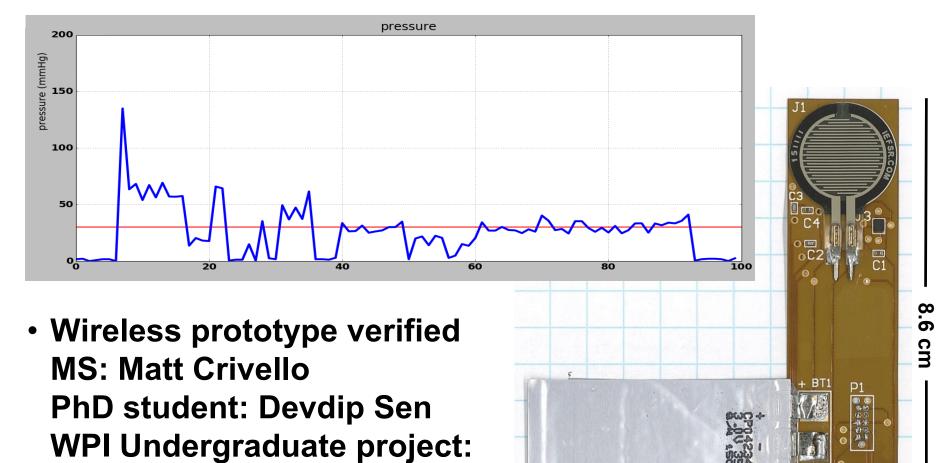
- Pressure, temperature vs. time over 7 hour duration
- Surgical protocol: Animal repositioned every 90 minutes

## **Experimental Results**



- Pressure, temperature vs. time over 7 hour duration
- · Verified ability to resolve threshold, pressure relief events
- Importance of multiple sensors for each at-risk point

#### **Current Status**



ECE MQP: Amanda Agdeppa Ali Hussain David Kim Victoria Loehle

6.4 cm

# **Development Plan Status**



Measure pressure, temperature, moisture	Verified	
Wireless self-powered measurement		
Human wearable, biocompatible sensor	IN PROGRESS	
Animal model trials	(OTCV, MTTC, M2D2)	
Evidence based algorithm	FUTURE FUNDING	
Human trials (Class 2)	(NIH, NSF, SBIR, STTR,	
Clinical use	PARTNERS)	

- Licensing most likely path to commercialization
- IP Status: Provisional patent application filed June 2016
   Potential Partners
- Boston Scientific: Wearable sensors
- Johnson & Johnson: Managing diabetes, surgery recovery
- Convatec, Acelity, Smith & Nephew, Medtronic, GE, ...
- → M2D2 support: Preliminary results for future funding Technology: Disruptive shift in pressure ulcer prevention

# **Interdisciplinary Development Team**

#### **UMMS Division of Plastic Surgery**

Raymond Dunn, M.D.	Chief; P.I.	Head, Wound Care
Kelli Hickle, M.D.	Resident	Surgical resource
Heather Tessier	Lab Director	Animal model resource

#### **WPI Electrical & Computer Engineering**

John McNeill, Ph.D	Professor	Sensor electronics
Xinming Huang, Ph.D	Professor	Internet of Things
Devdip Sen	Student	Prototype fab / test

#### **WPI Biomedical Engineering**

Yitzhak Mendelson, Ph.D. Professor Skin-friendly	materials
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# **Acknowledgments**

- Supported by a grant from the UMMS/WPI Collaborative Seed Funding Initiative.
- William Appleyard [WPI]
  - Assistance with sensor fabrication
- Heather Tessier [UMMS]
  - Access to experimental resources
  - Compliance with the IACUC-approved protocol

# **Summary: Lessons Learned**

- Find an important problem: Listen to practitioners
  - Reduce cost, improve quality of care
  - Meets needs for majority of patient populations
  - Reduce workload on caregivers
- Clinical partner a must
- Engineers:
  - Interdisciplinary team
  - Different experimental constraints
  - Rapid prototyping
- Need credible plan for entire development cycle
  - Bring in partner resources (business, IP, ...)
- Multiple funding sources
  - Get out of your comfort zone