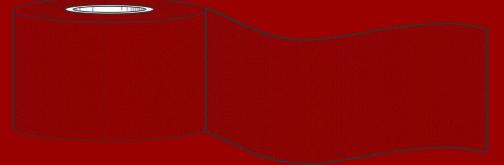
Washington University in St. Louis JAMES MCKELVEY SCHOOL OF ENGINEERING



## A Novel Bandage System Preliminary Report

#### Yushin Lee, Victoria Liu, Hannah Pang Group 15 BME 401A

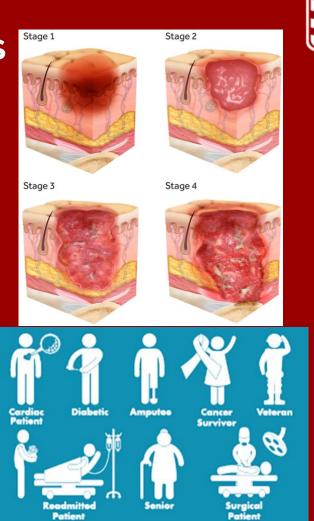


### **Background – Chronic Wounds**

Over 6.5 million people in the U.S. have chronic wounds

- Ulcers: venous, diabetic foot, pressure, arterial insufficiency
- Pressure ulcers categorized into stage 1-4, unstageable, suspected deep tissue injury
- Impaired healing for over 4 weeks
- Costs U.S. healthcare system over \$25 billion annually





### **Background – Wound Care**

Chronic wound care is wasteful and costly

- 12 weeks follow-up: 30.5% diabetic foot ulcers, 29.6% pressure ulcers, and 44.1% venous ulcers healed
- Care given in outpatient departments, skilled nursing facilities, and home
- Global medical tape and bandage market \$7+ billion
- Manual fitting of bandages/dressings leads to wastefulness, imprecision, and sterility concerns

Bauer (2016), Center for Medicare & Medicaid Services, Fife (2018), Grand View Research (2016)





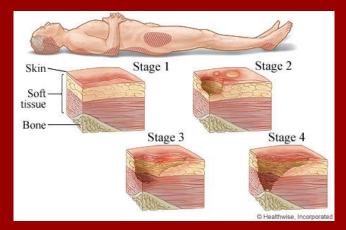




#### There is a need for a wound analysis and care system that:

- Improves clinicians' ability to treat individual chronic wounds
  - Captures chronic wound morphology
  - Generates in a timely manner waste-reducing custom bandages

that promote healing



### **Project Scope**



A system that can be easily used by clinicians for chronic wound care

- Portable imaging device that can be connected to a computer to record and save digital images of wound
- Software that analyzes wound from images, quantifies and models the interior surface of wound, and generates appropriate custom bandage template.
- Software that utilizes the bandage template in a device that will execute design and create custom bandage

By April 2020 the project will be completed with an optimized process that analyzes wound images and creates a schematic for a custom bandage design that can be carried out



### **Design Specifications – Wound and Imaging**

Design Specification	Description and Metric
Size and Ease of Use of Imaging Device	Device should be easily gripped by a person with a 12 cm hand length ("12 cm grip") or larger and operable with 1 hand
Image Brightness	Wound image being analyzed should have a 200:1 contrast ratio or greater in order to be compatible with the software
Image Resolution	Wound image being analyzed should have a 1 megapixel resolution or greater in order to be compatible with the software
Wound Size	Wound sizes that can be addressed are 1~15cm in length, 1~15cm in width, and 0~5cm in depth
Wound Severity	System applicable to stage 2~3 ulcers



### **Design Specifications – Wound Analysis**

Design Specification	Description and Metric
Measurement Accuracy of Image-to-Model Conversion	Maximum measurement error for conversion of wound image to wound surface model is 10%
Processing Time	Processing time required to develop digital wound template from digital image is within 10~30 minutes
Complexity of Software	Software should be simple enough to use after 30 minutes or fewer of training (not including HIPAA regulations, sterility, or other hospital-specific protocol training)
Skill Level of Software User	No special technical skills required except English proficiency and basic understanding of computer use; all healthcare professionals should be able to use program after training



### **Design Specifications – Bandage/Dressing**

Design Specification	Description and Metric
Template Options	Minimum of 3 different template options are generated by the software for each wound image processed
Production Time	Production time required to make customized bandage from digital template is within 0.5~3 hours
Sterility	Bandage must be sterile and meet current U.S. medical standards of sterility; final generated bandage should have equivalent or better bioburden level compared to current bandages

There are no existing solutions that combine wound analysis with bandage production to create a custom bandage/dressing that requires no further modification, but there are solutions for each component.



### **Existing Solutions – Wound Analysis**

#### **Manual Assessment**

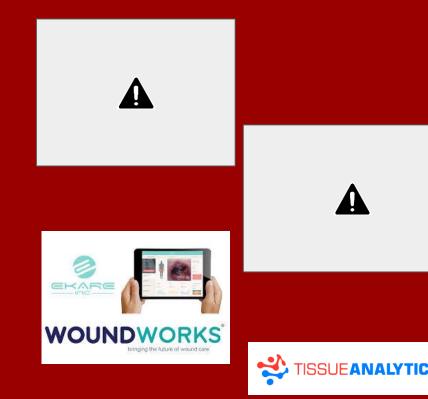
- Ruler/tape measure and probe
- Up to 44% error

#### Wound Works / eKare (US20160206205A1)

- Machine learning-based analysis
- Area and volume measurements
- iOS

#### Tissue Analytics (WO2016069463A2)

- Algorithm-based analysis
- 3D reconstruction of 2D surface
- Android and iOS



Grey et al. (2006), Yee et al. (2017), Wu et al. (2015, 2016), Budman et al. (2015, 2016)



### **Existing Solutions – Wound Analysis**

#### Spectroscopy

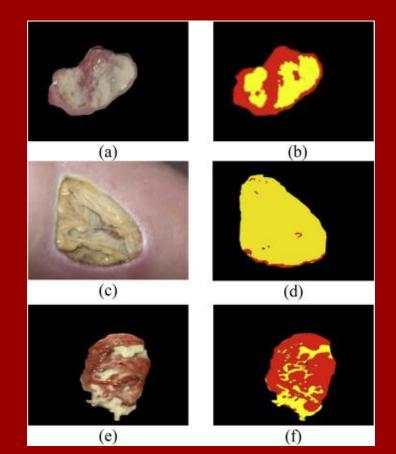
- Raman
- Thermal infrared
- Diffuse optical

#### Fuzzy C-Means Clustering / Color Analysis

- Classify wound types
- Percent composition of different tissues

#### No solutions directly translate wound characterization into customized bandages/dressings!

Murphy et al. (2016), Postel (2010), Cuccia et al. (2010), Nizam et al. (2018)





### Existing Solutions – Bandages/Dressings

#### **3D-Compressible Dressing** (US8535710B2)

- Glass fiber-based
- Adjusts surface area to volume ratio

#### Negative Pressure Therapy Dressing (WO2014140608A1)

- Optimized sealant formulations and layers
- Targets irregularly-shaped wounds

These bandages/dressings are versatile for fitting individual wounds, but still require manual modifications to the existing product to fit it to the patient.



### **Existing Solutions – Production Methods**

#### **Electrofocused Blow Spinning Device** (WO2017059050A1)

• Spin dressing directly onto wound surface

#### Elastic Dressing: Lattice or Netting (US20140081192A1)

3D printing, screen printing, weaving, knitting

#### 3D Printing Repair Construct (W/O2016130953A1)

 Inject biomaterial in 3D pattern into another material that keeps form intact

#### Digital Die Cutting (US6765123B2)

• Cut multi-layered composite web into shapes

Baharlou et al. (2017), Wenske et al. (2014), Marquez et al. (2016), de Jong et al. (2004)



### **Existing Solutions Recap**

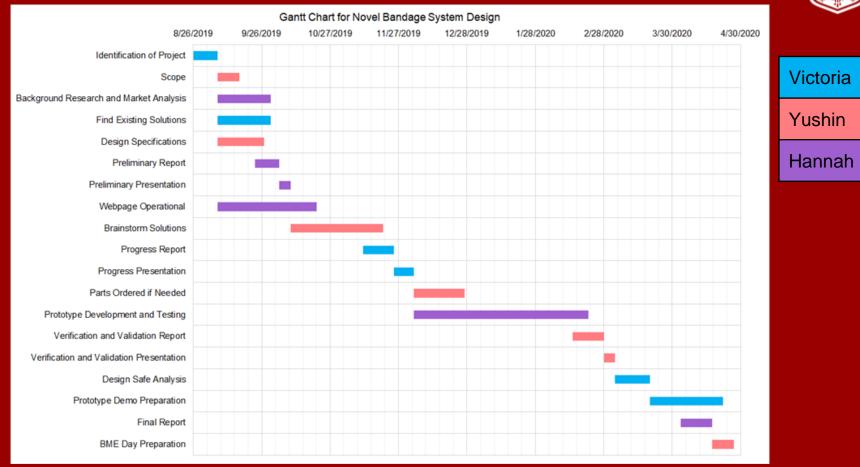


Wound characterization and bandage/dressing production are not integrated

- Wound analysis technology
- Maximize adaptability of bandages/dressings
- Advanced bandage/dressing production methods

Automating processes with personalized wound models in a streamlined way will take advantage of advancements in production methods in order to efficiently generate customized dressings to better facilitate healing

### **Preliminary Design Schedule with Gantt Chart**





### **Team Responsibilities**

#### Victoria

- Circuitry and electronic design
- Communication
  with clients
- Progress
  presentation

#### Yushin

- Coding and software design
- Budget
- V&V presentation

#### Hannah

- Mechanical design
- Webpage
- Preliminary Presentation

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# **Questions?**