Neurostimulators

J.C. Chiao Associate Professor

Electrical Engineering Automation & Robotics Research Institute University of Texas at Arlington







ARRI

#### Neurostimulators

Neurostimulation is the stimulation of the neural tissues by tiny electrical impulses. These impulses block the transmission of pain messages to one's brain. Patients may feel a mild tingling sensation instead of pain.





#### **APPROVED and FUTURE Neurostimulation Applications**



**Essential Tremor** Parkinson's Dystonia **OCD: Obsessive-Compulsive Disorder Depression Tinnitus Epilepsy Stroke Chronic Pain Respiratory Support Obesity** Gastroparesis **Irritable Bowel Syndrome Profound Deafness Headaches TBI: Traumatic Brain Injury** Epilepsy Depression **Angina Pain PVD Pain: Peripheral Vascular Disease Pain** Incontinence **Pelvic Pain Sexual Dysfunction** 

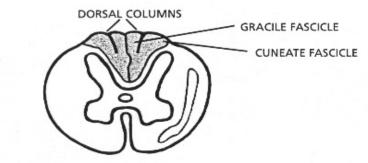


3



# Example: Spinal Chord Stimulation (SCS)

- Last resort for pain treatment.
- Delivery of low intensity electrical pulses to the dorsal column to modify or block pain signals.
- Pain is replaced by a "tingling" sensation.



- Stimulation signals: AC voltage spike trains.
- Single frequency trains and envelopes are usually employed. Multiple frequencies are feasible.
- Single voltage spike: about 100  $\mu$ s, 1-5 V.



# Example: Spinal Chord Stimulation (SCS)



Catheters and electrodes:

- Cylindrical shape catheters with diameters of 1.2–3 mm.
- Flat catheters with 2–4 mm thickness.
- Each catheter with 2–16 independently addressable electrodes.
- Steerable with contourable shapes.

Implantable pulse generators: size, shape, similar to cardiac pacemakers.

Power source

- External RF-stimulation.
- Extended-life internal battery.
- Rechargeable internal battery.

Implant depths for rechargeable pulse generators:

- Less than 1 inch for all FDA-approved devices.
- Implant depths depend on antenna, case design, power required and operational variables.

5

**2**MEMS

JC Chiao©2006



ARRI

Safety and Efficacy of Spinal Chord Stimulation for the Treatment Of Chronic Pain: A 20 Year Literature Review.

T. Cameron, J. Neurosurg (Spine 3) 100: 254-267, 2004.

68 studies, 5 indications Back and leg pain Complex regional pain syndrome Ischemic limb pain Angina pain Miscellaneous pain

- 16 studies, 616 patients
- Follow-up period: 6 months–5 years
- Pain outcome: 56% to 88% reduction in pain following spinal cord stimulation
- 52% patients reported reduction or discontinuation of narcotic consumption

#### Examples

- 12 studies, 260 patients
- Follow-up period: 6 months–5 years
- Pain outcome: 57% to 100% reduction in pain following spinal cord stimulation
- 80% patients reported reduction or discontinuation of narcotic consumption

JC Chiao©2006 **1**MEMS

6



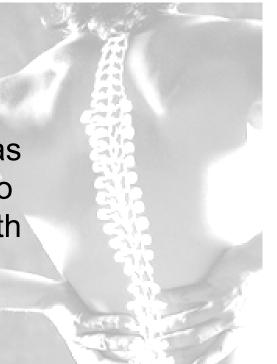
## Market Size – Chronic Pain Management



Business Communications Company, Inc.: The market for pain management, which comprises broadly of pharmaceuticals and devices, is at \$18 billion in 2000. Growing at an AAGR (average annual growth rate) of 12% from 2000 to 2005, it is expected to reach \$32 billion by 2005.

#### BioPortfolio:

The global pain management market was \$21.6 billion in 2000 and it is expected to increase at a compounded annual growth rate of 4.7% to reach \$29.7 billion in 2007.



JC Chiao©2006

7

**UMEMS** 



# Market Size – Neurostimulation

Medtech Insight 2006 November:

In 2005, the total U.S. market for neurostimulation products (including cochlear implants) was estimated at \$830 million.

This market is expected to grow at a compound annual rate of 17.1%, reaching more than \$1.8 billion in 2010, with the potential to double or triple over the next decade.





# **Technical Barriers**



#### Multidisciplinary multi-institute research

Engineering Size Power consumption Power sources Features of stimulation Remote control (wireless) Operation/control difficulty Biocompatibility Surgical apparatus Design standards Design methodology

Neuroscience Fundamental study – science of pain Modeling Optimization Clinical

- Procedures (time, surgery) Size
- Minimally invasive operation
- Surgical apparatus
- Measurement techniques
- Experiment methodology
- Side effects
- Long-term large-scale study Operation/procedure standards

JC Chiao©2006

9

**UMEMS** 

Manufacturing Cost Size Reliability Characterization standards



# **Technical Barriers**

()



#### Multidisciplinary multi-institute research

Engineering Size Power consumption Power sources Features of stimulation	Clinical Procedures (time, surgery) Size Minimally invasive operation Surgical apparatus
Education Medical school Nursing school Patient/public education Clinicians/General practitioners/Nurses/Administrators Insurance/Policy administrators	
Neuroscience	Manufacturing
Fundamental study	Cost
— science of pain	Size
Modeling	Reliability
Optimization	Characterization standards
JC Chiao©2006 10	



### Stage of Innovation Where Barrier Appears

Primary:Research Secondary: Clinical







Measurement – Problem Part of the Barriers

Innovation in power source, wireless communication, size, safe electrodes, recorders, biocompatibility

Innovation in surgical apparatus, procedures, training, characterization

New applications







Potential Solutions to Measurement Problem

Innovation in power source, wireless communication, size, safe electrodes, recorders, biocompatibility

Engineering research and development Neuroscience fundamental study

- Government and industry funding

Innovation in surgical apparatus, procedures, training, characterization

Neurosurgery/neurology/neurophysiology study Clinical participation

13

1 MEMS

JC Chiao©2006

- Government and hospital funding

New applications Academic/clinical collaboration - Government funding



**Potential Providers of Solutions** 

Multidisciplinary nature of the problem, the solutions should be addressed by

Academic laboratories Government laboratories Medical supplier companies Research hospitals Clinical hospitals Industrial laboratories





- Establish testbeds for characterization of biocompatibility, reliability, measurement definition and techniques, surgical procedures
- Define standards for researchers, users, manufacturers, regulators, service providers
- Define safety (e.g. EMI, battery) and policy of applications
- Education: users, manufacturers, regulators, service providers.
- Education: public (e.g. airport security).
- Sponsor fundamental research and long-term studies
- Coordinate multi-institute large-scale long-term clinical studies

*î*MEMS

JC Chiao©2006

15



**NRRI** 

#### Acknowledgement

Valuable discussion with Professor Robert Eberhart at the University of Texas – Southwestern, Medical School

Our research project at the University of Texas - Arlington is supported by the Electrical, Communications and CyberSystems Division, National Science Foundation

J.C. Chiao

jcchiao@uta.edu http//:www.uta.edu/faculty/jcchiao

JC Chiao©2006

16

**UMEMS**