

Motivation and Clinical Relevance

Metrology for Drug Delivery

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Motivation and Clinical relevance

Metrology for Drug Delivery

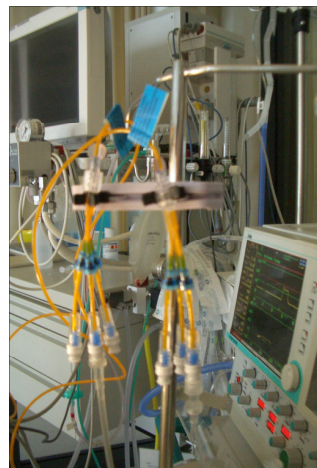
The Clinical Cause



- Infant with acute blood pressure problem
- Dopamine infused to raise blood pressure
- No result
- Increasing dopamine flow rate
- No result
- Increasing dopamine again
- Overshoot
- No relation found with dopamine setpoint
- Decreasing dopamine flow rate
- No result
- Etc..



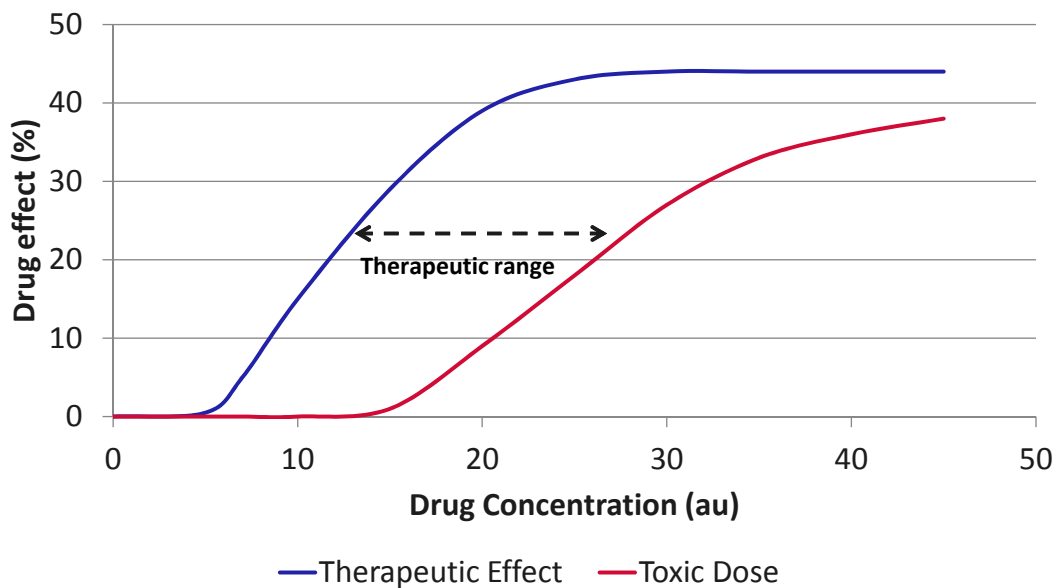
Clinical relevance: widespread use of infusion



- Almost every patient receives IV Therapy
- Many different applications
- Many users
- Many errors/ adverse events
- Potentially high impact



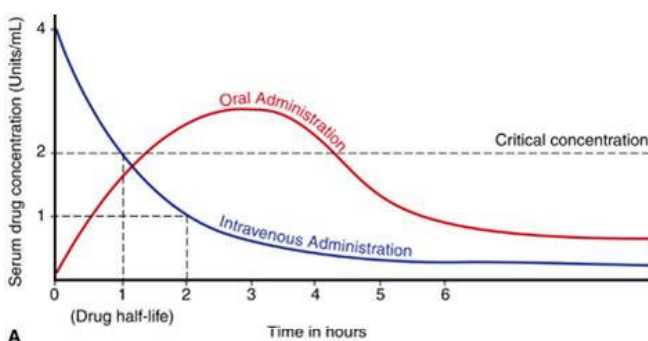
Therapeutic range



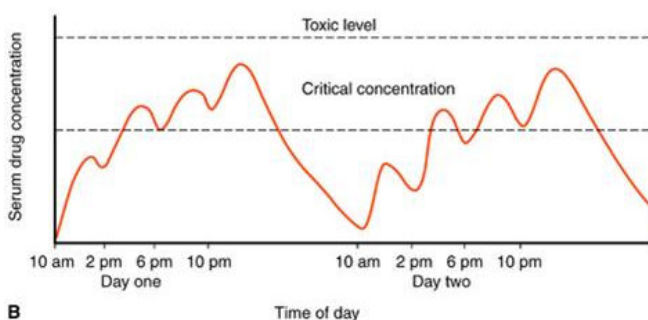
Small therapeutic range: Set point deviations are more relevant



Half life of drugs



A



B

- Serum concentration is determined by
 - Administered dose
 - Half life of drug
- Short half life drugs
 - can be more easily controlled in theory
 - are more sensitive to dose/ flowrate changes

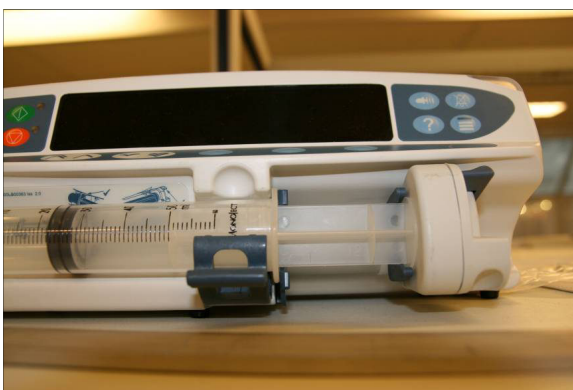


Clinical relevance of flow rate accuracy

- Small therapeutic range
- Small drug half life
 - Vasopressors
 - Inotropics
 - Certain anesthetics
- Condition of the patient
 - Fluid intake restriction
- Drug concentration



Control mechanism infusion



Driving mechanism:

- Displacement of plunger by step motor

Control mechanism

- Change in step motor velocity

Setpoint parameter

- Flow rate



Non plunger displacement induced flowrate changes are not noticed by the system

→ poor measurability
→ poor controllability



Standards and regulations

- Pumps: IEC/EN 60601-2-24
 - Describes “trumpet curve”
- Syringes: ISO 7886-2
 - Describes maximum compliance (compressibility)
 - Describes maximum “dead volume”

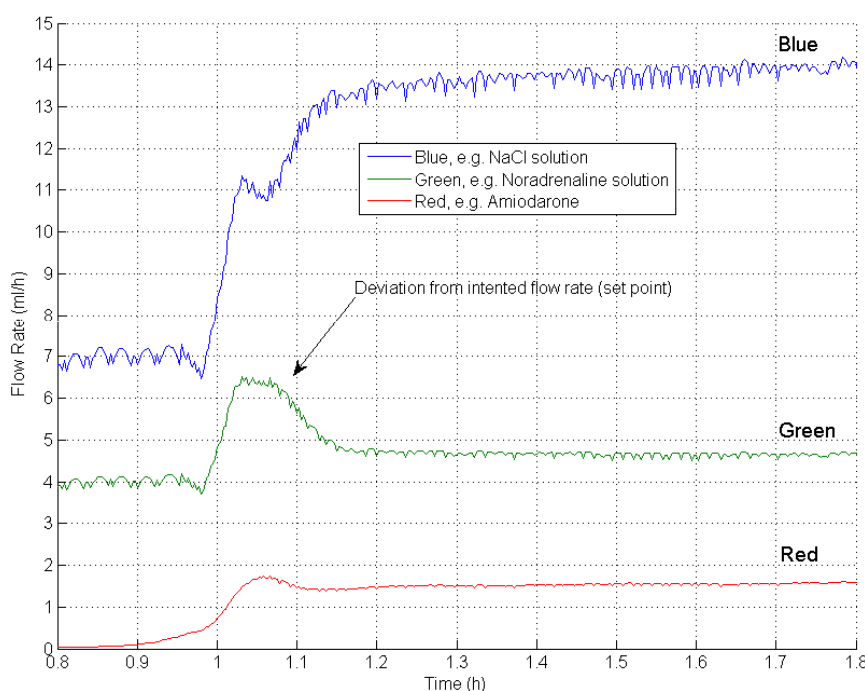
➡ No specific regulations for low flowrate/ specific applications

➡ No protocols describing maximum internal volume

➡ No output measurements of entire system (pump+syringe+infusion line and catheter)



In-vitro experiment : “push-out” effect

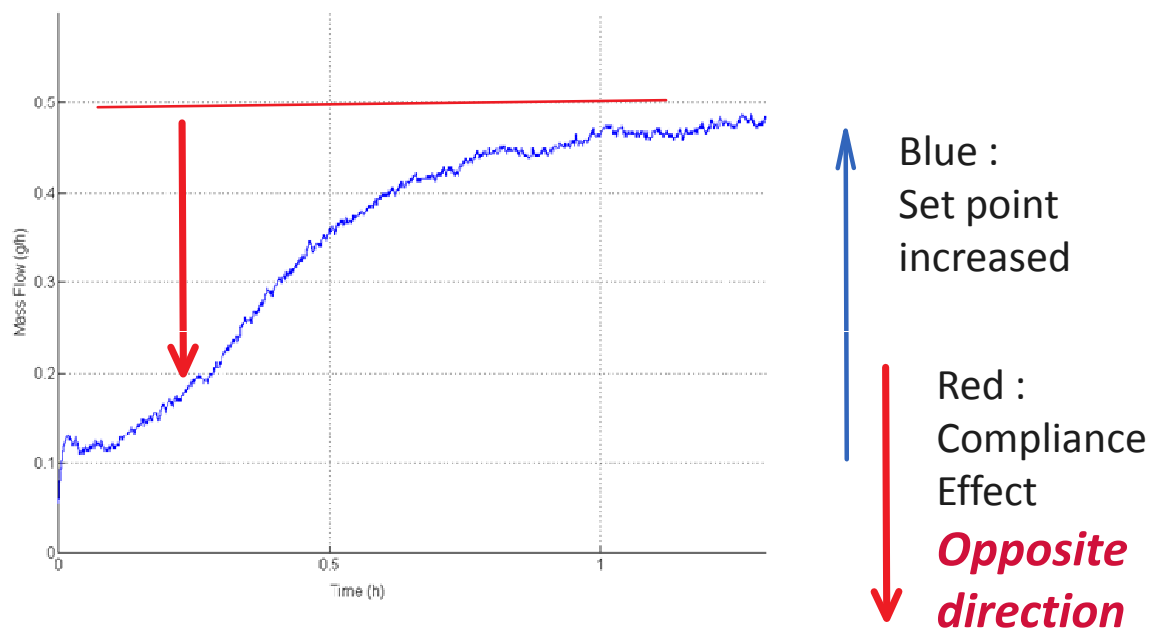


↑ Blue :
Set point
increased

↑ Green:
“push-out
effect”
**Same
direction**



In-vitro experiment : “compliance” effect



- Mass flow rate
- System compliance results in start up time

- This time is long enough to cause thrombosis

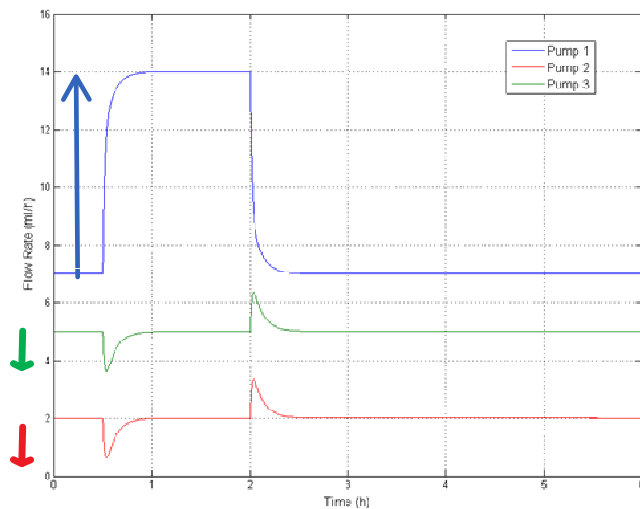


Computer simulation (method)

- Schematic representing a multi-infusion set-up with N pumps. Network $Q_1, Q_2 \dots Q_n$ are sources (pumps). q_n is the flow rate output of pump n - (before the mixing point)
- Electric analogue for multi-infusion setup to simulate the outflow
- Standard analytical methods (Laplace domain)
- System of 3 pumps was calculated



Results of computer simulation (compliance effect)



- initial situation : steady state values
- At $t=0.5$, pump #1 is set to 14
- the flow rates of the parallel pumps #2 and #3 react to the pressure difference caused by the flow rate changes of pump #1, in the form of altered storage of fluid in the compliance (capacitor effect) of the (plunger of the) syringe



Equal lengths



Combining the results

**In-vitro experiment :
“push-out” effect**



Blue :
Set point
increased



“push-out
effect”
**Same
direction**

**In-vitro experiment :
compliance effect**



Blue :
Set point
increased



compliance
effect
**Opposite
direction**

**Computer simulation :
compliance effect**



Blue :
Set point
increased



compliance
effect
**Opposite
direction**
**Equal
lengths**



Implications of results 1



Mathematical fact :

IF :

- Two opposite effects that play a role
- Effects may be of same order of magnitude
- Strength of effects depends on many factors

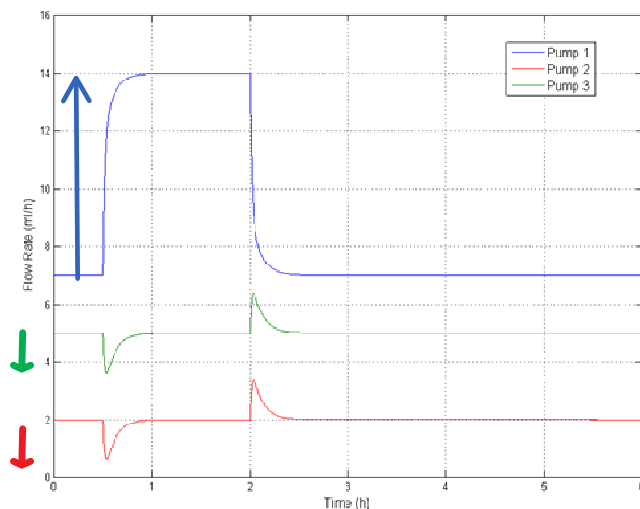


*Direction and strength of total net result may be **hard to predict** and **counter-intuitive***

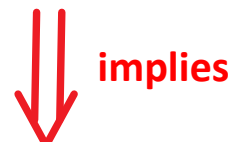


Implications of results 2

Results of computer simulation (compliance effect)



↓ ↓
Equal lengths (absolute : ml/h)



Impact on “red” medication relatively high as a percentage of the red set point value



Discussion

- The in-vitro experiments, as well as the computer simulation, of a 3-pump multi-infusion set-up, show:
- Internal volume effect produces a deviation in *the same direction* as the direction of the change in flow rate set point (of another pump, e.g. the "blue" pump),
- Syringe compliance effect produces a deviation in *the opposite direction* with respect to the direction of the flow rate set point change
- Syringe compliance effects are particularly important at low flow rates
- At low flow rates, deviations have a higher clinical relevance



Conclusions

- In-vitro experiments as well as computer simulations show that the direction as well as the strength of the net compound deviations in multi-infusion are highly unpredictable and often counter-intuitive.
- Accurate measurement of the mechanical compliances in the multi-infusion set-up adds to controllability and thus to safety
- Increased focus and effort should be directed to the metrology of mechanical compliances at low flow rates.
- Regulation concerning mechanical compliances should be updated and more strictly specified, especially for low flow rates



Disclaimer

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