Speech and Humidification in Tracheostomies

INTRODUCTION

Background

- Tracheostomies are surgical procedures to relieve an obstruction to the airway¹
- 3 million patients currently live with tracheostomies in the US²
- Patients suffer from excess of mucus buildup in their tracheostomy tube caused by dry air

Problem

There is no current technology that allows tracheostomy patients to speak while directly addressing humidification of breath.

Need Statement

A reusable device that allows tracheostomy patients the convenience of switching between speech and humidification, while maintaining low risk of infection.







PROPOSED SOLUTION



- Final Design
- Features a sleek and portable design inspired by the natural profile of the human neck, gently curving to reduce its outward profile.
- Speaking plug allows for modification of resistance in cases of heavy breathing, such as walking up a flight of stairs.



Humidification

Humidifies inhaled air by capturing moisture from exhaled air in hygroscopic filter.



Humid Air 💻

- Speech mode activated through use of speech plug.
- Manually activated by pushing into the device, allowing air to travel over vocal cords.

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Current Solution

Heat Moisture Exchanger (HME)

Pressure gauge 0 0 Humidity source **Bicycle pump** Moisture Release in Devic 0.2 -Prototype 2 Prototype 3 **0**.6 -Commerical+foam 0.5 Stu .io M ^{0.4} 번 0.3 Dercel 0.2 0.1

Number of Pumps of Dry Air

SIMULATED BREATHING TESTING





SPEECH CAPABILITY TESTING

Speaking Plug

Filter

Pressure gauge

Bicycle pump



MOISTURE RELEASING TESTING

Methods

- Multiple pumps of air travel through the filter, releasing moisture from device.
- Commercial HME and several prototypes were tested using this method.

Results

- Multiple pumps of air travel through the filter, releasing moisture from device.
- Commercial HME and several prototypes were tested using this method.



Methods

- Experimental set-up of simulated breathing shows function of device under normal conditions.
- Commercial with foam, commercial, prototype 3, and prototype 2 were tested using this method.

Results

- Prototype 3 has the most efficient form factor in capturing and releasing humidification.
- Commercial device with its own foam is better at capturing moisture but not as good at releasing moisture.
- Prototype is a better form factor than the current devices on the market.

Methods

Testing was done to confirm speech capability by mimicking airflow in natural airway.

Results

Device

blocked exit

- If pressure increases at the gauge, the patient would be able to speak
- By performing this test, speech mode activation was confirmed (shown in video)

REIMBURSEMENT

Manufacturing Info

	ABS Plastic (LBS)	Unit-Device Yield	Unit-Device Mfg. Cost
Small Scale Mfg.	2	73	\$3
Large Scale Mfg.	2,000	73,337	\$0.005

Retail Info

	Est. Retail Cost/Unit	Est. # Units Required / Year	Est. Annual Cost
Commercial/Existing	\$2	730	\$1,460
Team 9	\$10	12	\$120

Patentability

- Patent pending for this invention.
- modes of adaptability.

Reimbursement

- month by ~80%.

CONCLUSIONS

- allowing speech.
- Provisional patent filed.

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REFERENCES

1] "Care of the Child with a Chronic Tracheostomy." American Journal of Respiratory and Critical Care Medicine, vol. 161, no. 1, 2000, pp. 297–308., doi:10.1164/ajrccm.161.1.ats1-00. [2] Cheung, Nora H., and Lena M. Napolitano. "Tracheostomy: Epidemiology, Indications, Timing, Technique, and Outcomes." Respiratory Care 6.59 (2014): 895-919. Web.

[3] Balentine, Jerry R. "What Is a Tracheostomy Procedure? Home Care, and Complications." MedicineNet. Web 4]"Medical Grade ABS Plastic." Made-in-China.com. [5] "Injection Molding Machines." Milacron, www.milacron.com/products/injection-molding-machines/. [6]"TRADITIONAL 510(k) SUMMARY MARPAC MESSENGER ." Https://Www.accessdata.fda.gov, 2004, www.accessdata.fda.gov/cdrh_docs/ pdf4/k041485.pdf [7] "510(k) Summary of Safety and Effectiveness ." Https://Www.accessdata.fda.gov, www.accessdata.fda.gov/cdrh_docs/pdf2/K022125.

[8] "GLP: The Difference between PMA and 510(k) Paths." PMI, 24 Mar. 2016, www.pmipreclinical.com/glp-difference-pma-510k-paths/. [9] Center for Devices and Radiological Health. "Overview of Device Regulation." U S Food and Drug Administration Home Page, Center for Devices and Radiological Health, www.fda.gov/medicaldevices/deviceregulationandguidance/overview/default.htm. [10] Local Coverage Determination (LCD): Tracheostomy Care Supplies. U.S. Centers for Medicare & Medicaid Services, 4 May 2017, www. cms.gov/medicare-coverage-database/











MANUFACTURING COST, MARKET ANALYSIS, PATENT,

*Team 9 Pricing discludes labor, shipping, and filter pricing. 510(k) clearance would be most appropriate regulatory pathway for device.

Non-obvious as a result of slitted form factor, speech plug activation, multiple

Price of device is comparable to those currently on the market and promises a longer-term of function, it should be covered under Medicare/Medicaid.^{9,10} Estimated \$150/month saved by reducing amount of devices needed per

In comparison to current devices and previous prototypes, our final design was found to be more effective at humidification of air and successful at

This prototype can significantly improve the quality of life of millions of people by reducing the need for frequent suctioning and allowing patients to easily switch between speech and humidification modes of operation.

Future work includes implementing a gasket material into the prototype and designing a manufacturing procedure for a sturdier prototype.

"Tracheostomy Supplies." Aetna Policies, Aetna, 3 May 2018, www.aetna.com/cpb/medical/data/1_99/0074.html.