

Challenges of Prolonged Continuous Monitoring of Mechanically Ventilated Pediatric Patients Using EIT

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XVth International Conference on Electrical Bio-Impedance (ICEBI)
XIVth Conference on Electrical Impedance Tomography (EIT)
Heilbad Heiligenstadt, Germany, April 22-25, 2013

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- Experimental Set-up

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- EIT images of ventilation have been successfully compared and validated with:
 - Spirometry;
 - Plethysmography;
 - Radiology;
 - Pulmonary scintigraphy;
 - CT-Scans.
- Most of these studies were performed
 - In controlled environments;
 - Over relatively short periods of time.

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- Prolonged continuous validation over the range of hours or days has not been performed for current EIT systems.*
- Continuous monitoring in the intensive care unit (ICU) is important to:
 - Prevent ventilator-induced lung injury;
 - Detect the onset of pulmonary edema, atelectasis or pneumothorax.

* A Adler, MB Amato, JH Arnold, R Bayford, M Bodenstein, SH Böhm, BH Brown, I Frerichs, O Stenqvist, N Weiler, and GK Wolf, Whither lung EIT: Where are we, where do we want to go and what do we need to get there?, *Physiol. Meas.* **33** (2012) 679–694

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- Main goal:
 - Correlate EIT images with ventilator data during prolonged continuous monitoring of mechanically ventilated patients in a pediatric intensive care unit.
- Specific goals:
 - Study long term variations in EIT images:
 - instrumentation drift;
 - electrode-skin contact impedance variations.
 - Study clinical events leading to large image artifacts:
 - electrode disconnection;
 - patient manipulation during regular staff interventions.

EIT Hardware

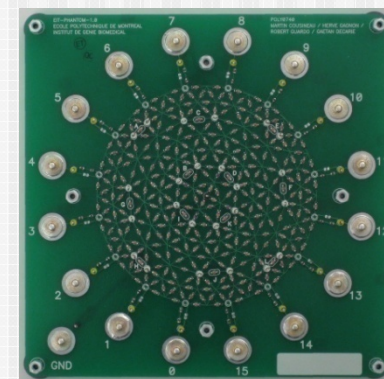
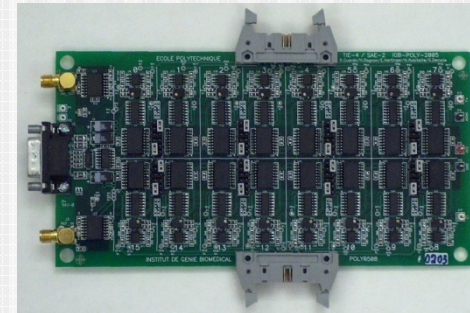
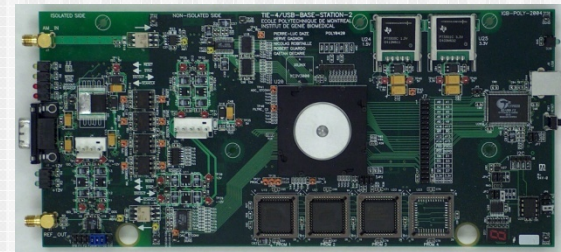
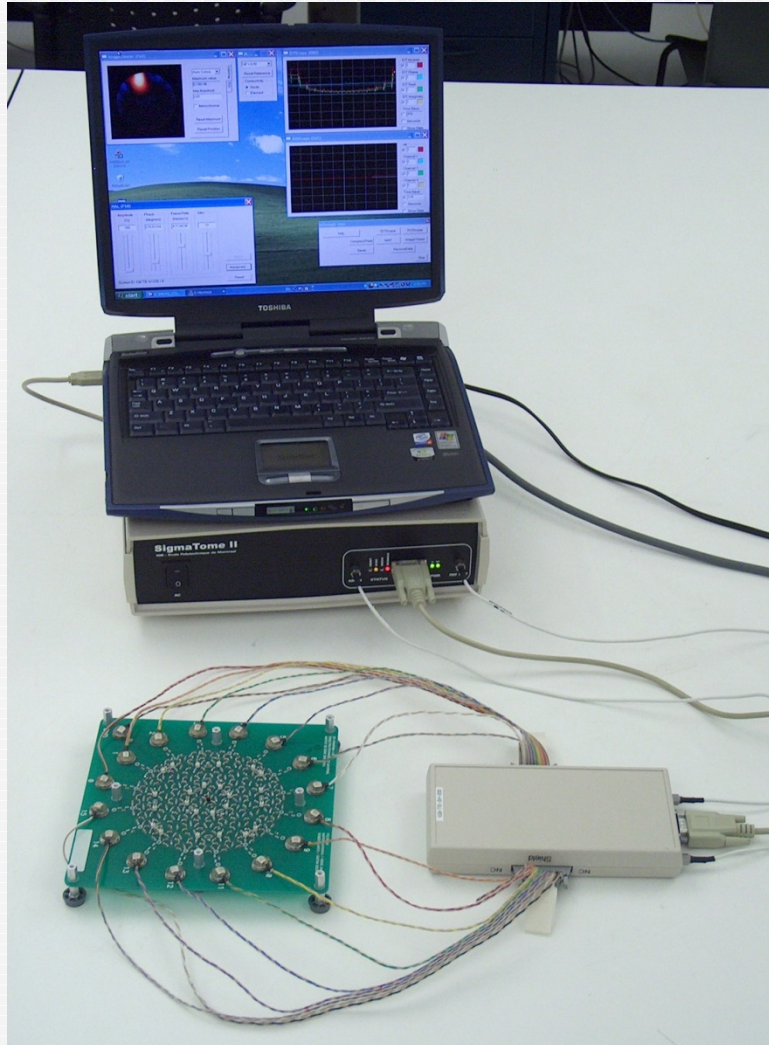
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Acquisition of EIT and Ventilator Data

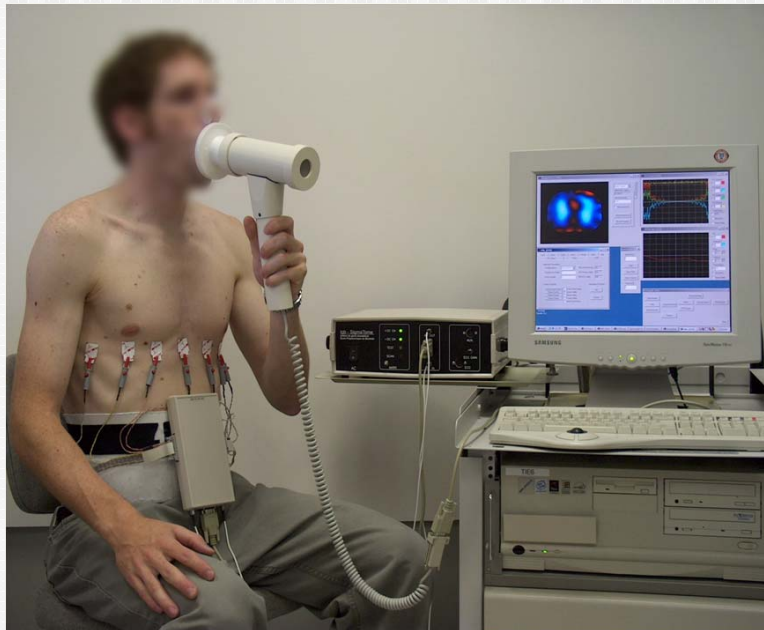
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GUI of the Combined System

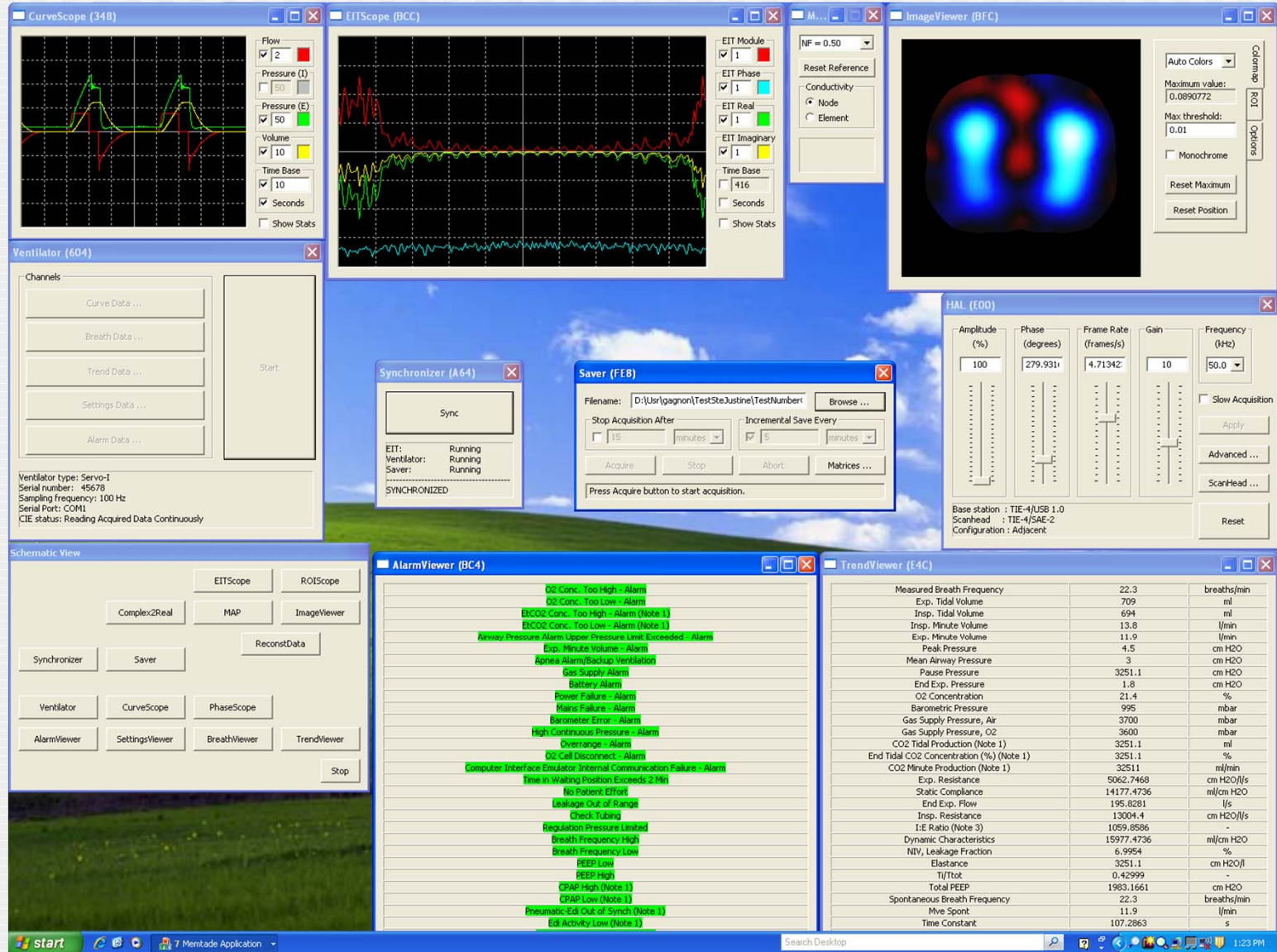
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Experimental Protocol

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- Passive recording with no recruitment protocol.
- Clinical staff were instructed on how to connect the system to the patient.
- Two-hour recording.
- Clinical staff were instructed:
 - to proceed with normal patient care;
 - to reconnect electrodes if they become disconnected.

Patient Information

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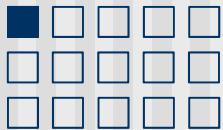
- Criteria for inclusion:
 - Mechanically-ventilated;
 - Age > 1 year;
 - Weight > 10 kg;
 - Stable patient.
- 6 patients have been included.

Observations

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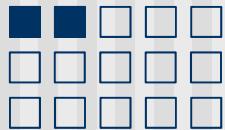
- All patients were awake.
- Interactions with clinical staff included:
 - Repositioning of patient;
 - Caring and cleaning;
 - Airway Suctioning;
 - Percutaneous injection and blood sampling;
 - Clinical examination;
 - Physiotherapy;
 - Respiratory therapy.

Ventilation Mode

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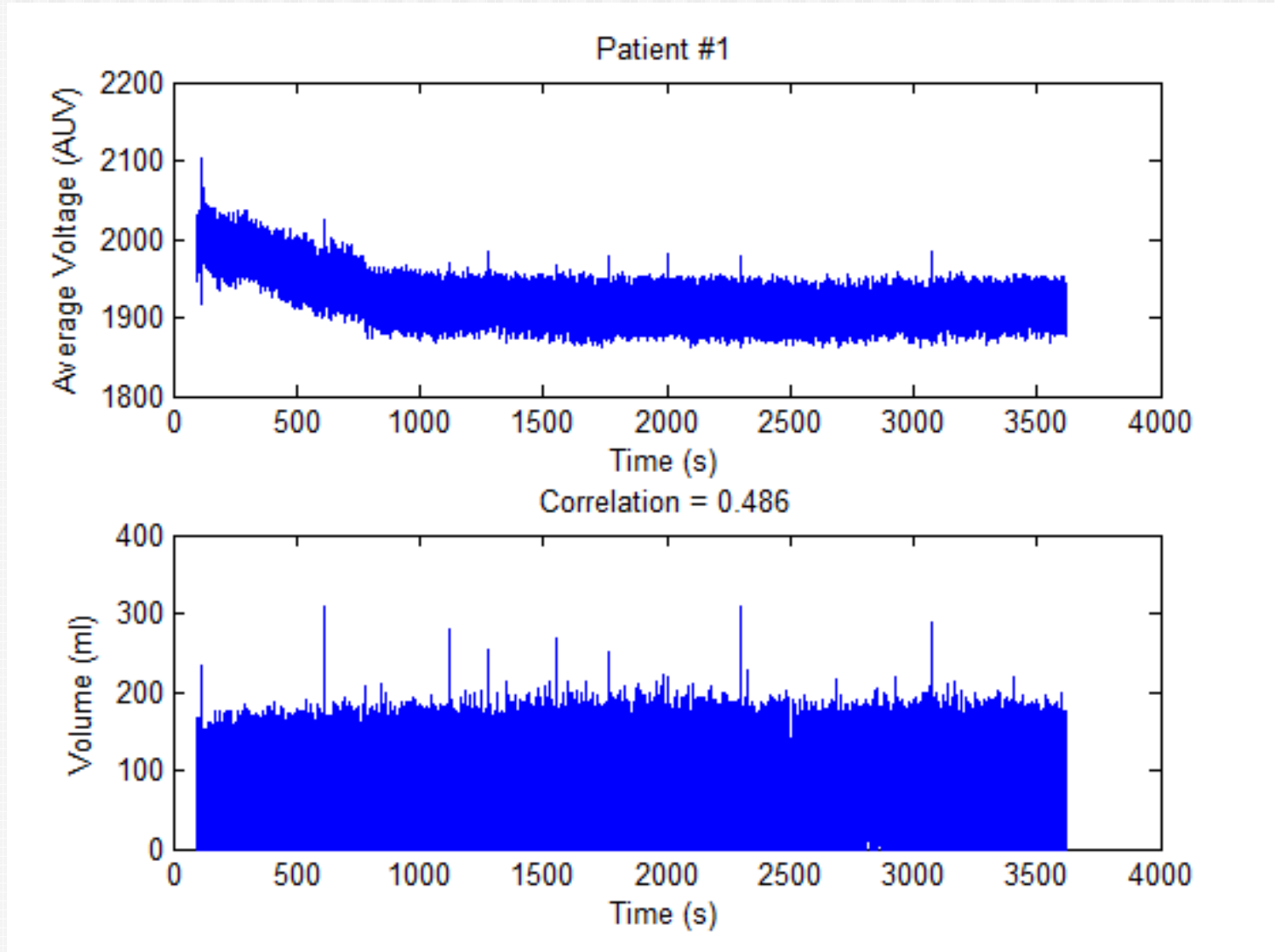
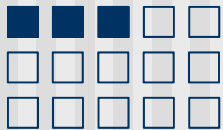
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- Patient Range Selection:
 - Neonate Mode (4)
 - Adult Mode (2)
- Ventilation Mode:
 - Pressure Control (1)
 - Pressure Reg. Volume Control (1)
 - Pressure Support / CPAP (2)
 - SIMV (Press. Contr.) + Pressure Support (1)
 - SIMV (Press Reg. Volume Control) + Pressure Support (1)

EIT Measurements vs Volume

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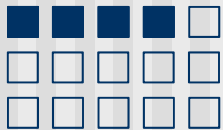


EIT Measurements vs Volume

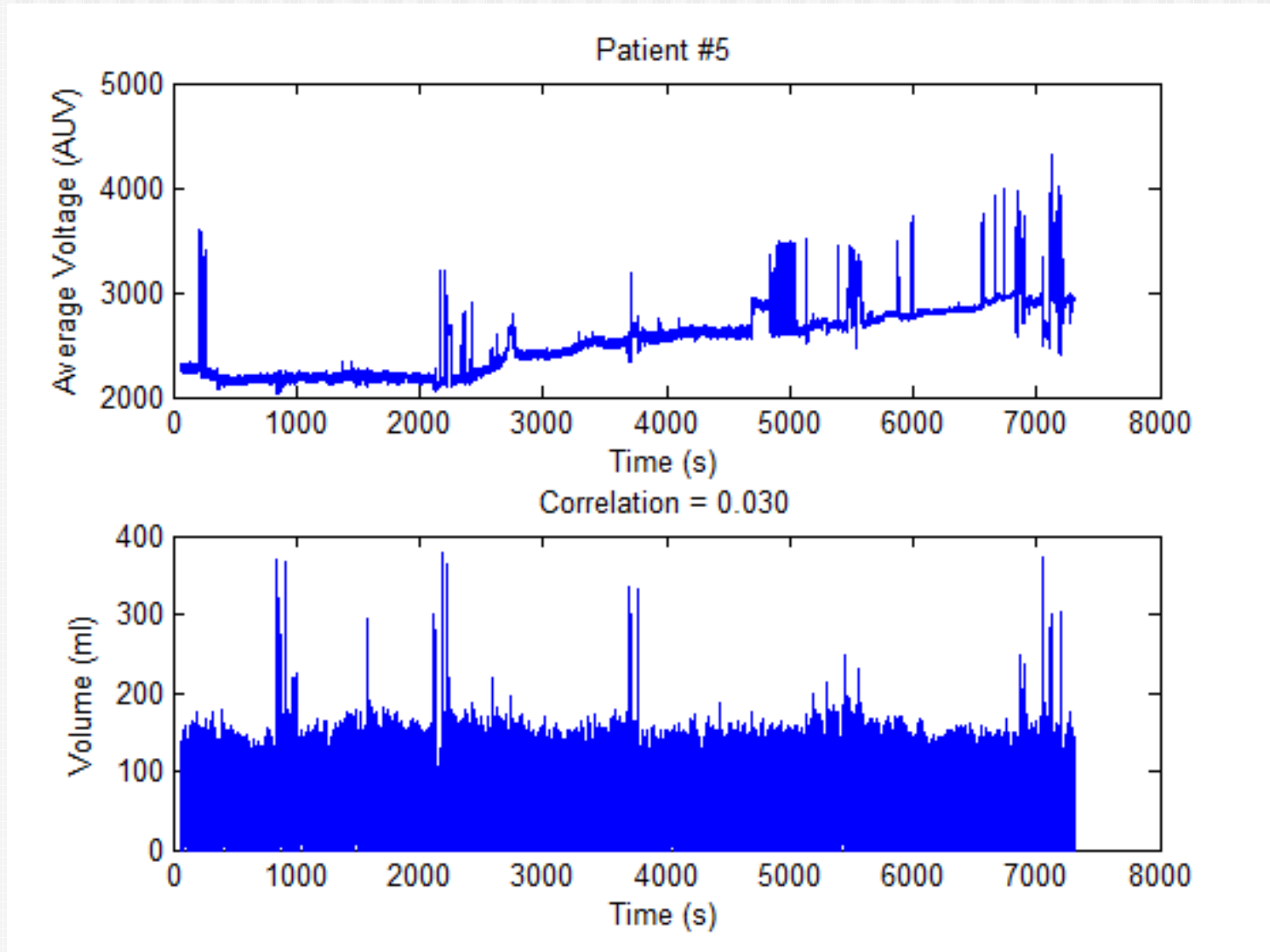
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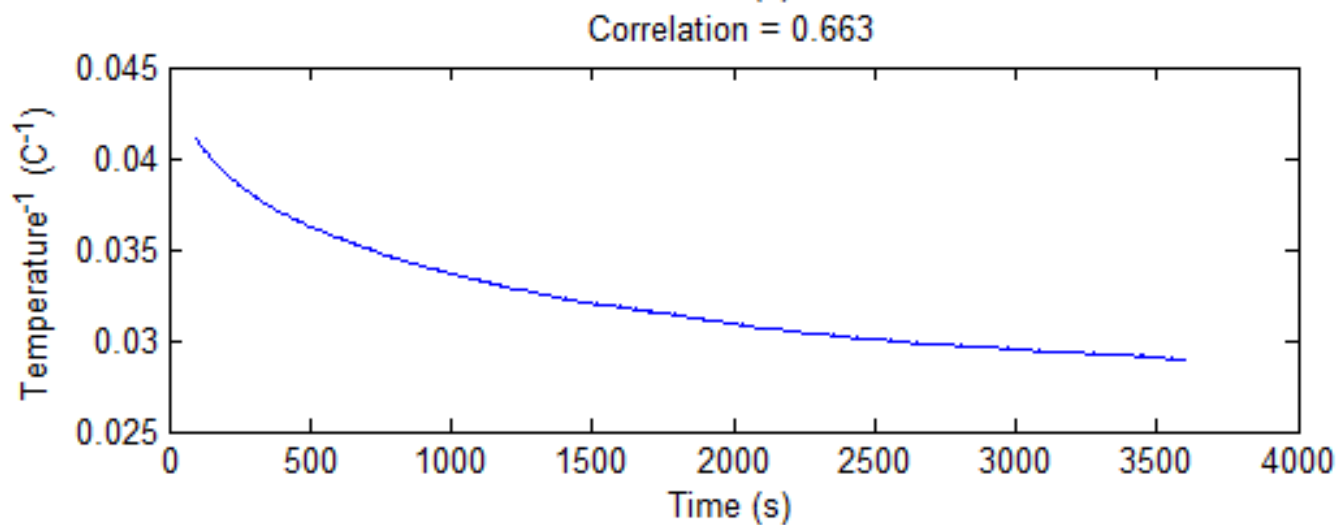
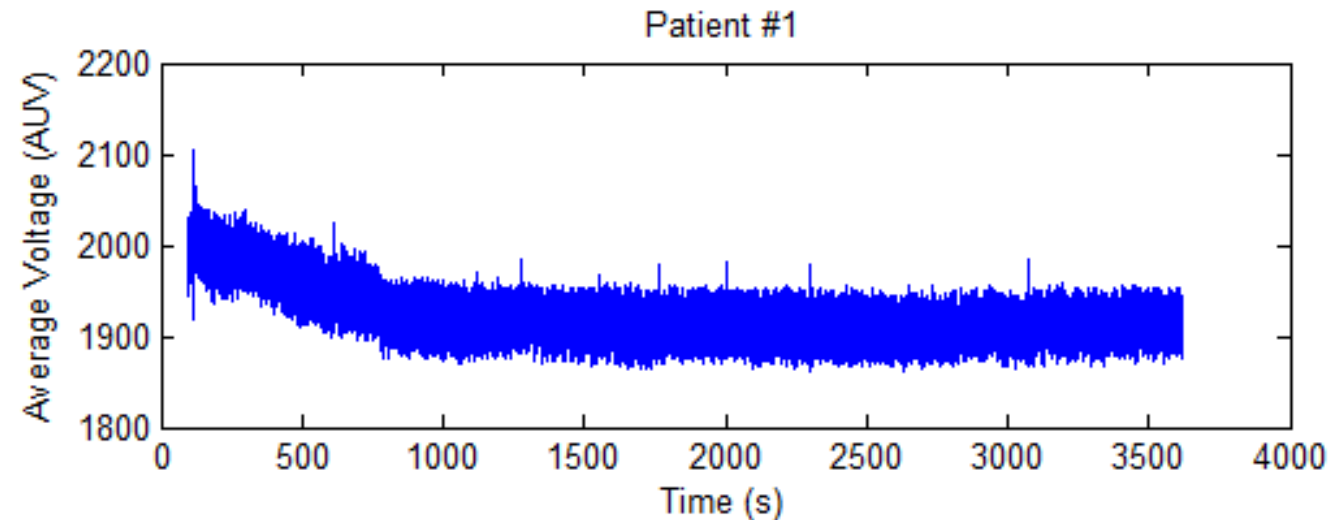
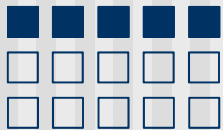


■ Discussion and Conclusion



EIT Measurements vs Temperature⁻¹

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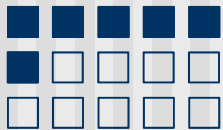


EIT Measurements vs Temperature⁻¹

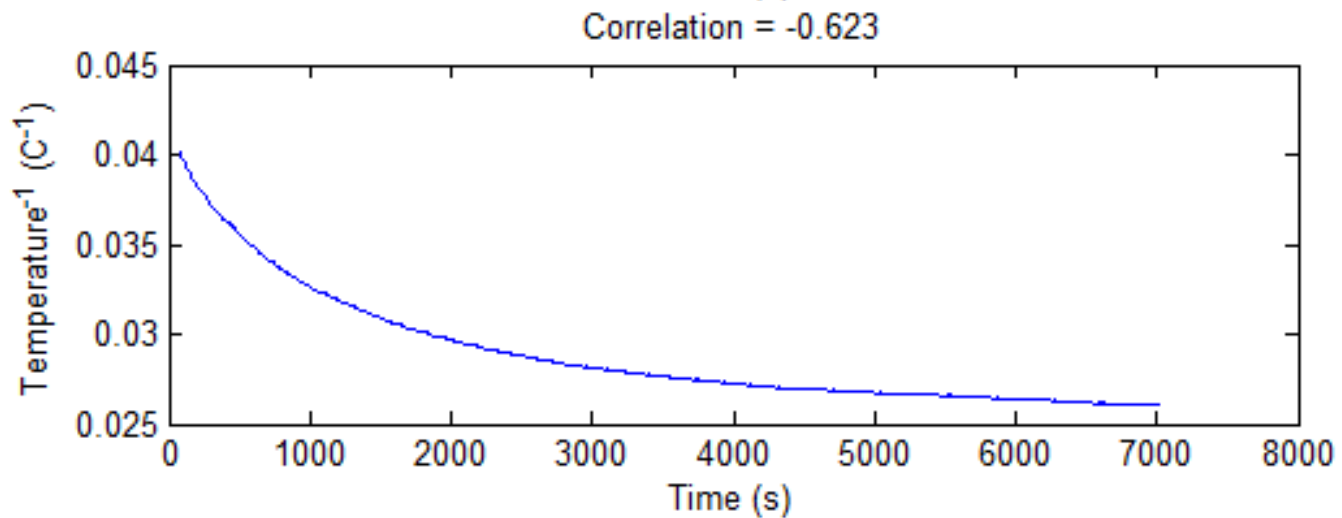
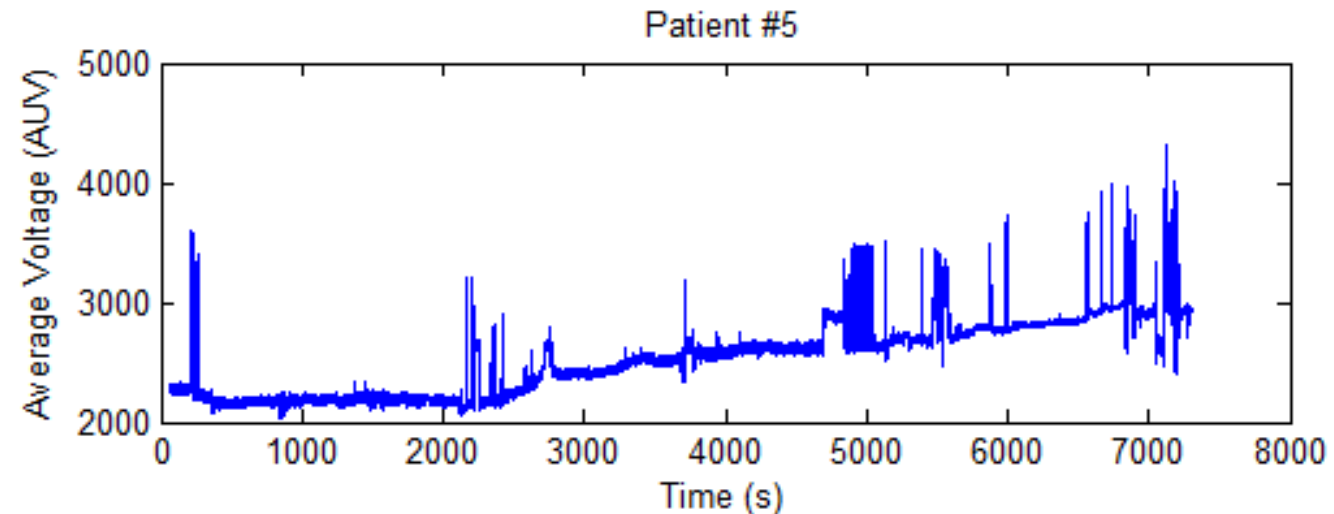
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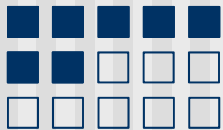


EIT Measurements vs Alarm

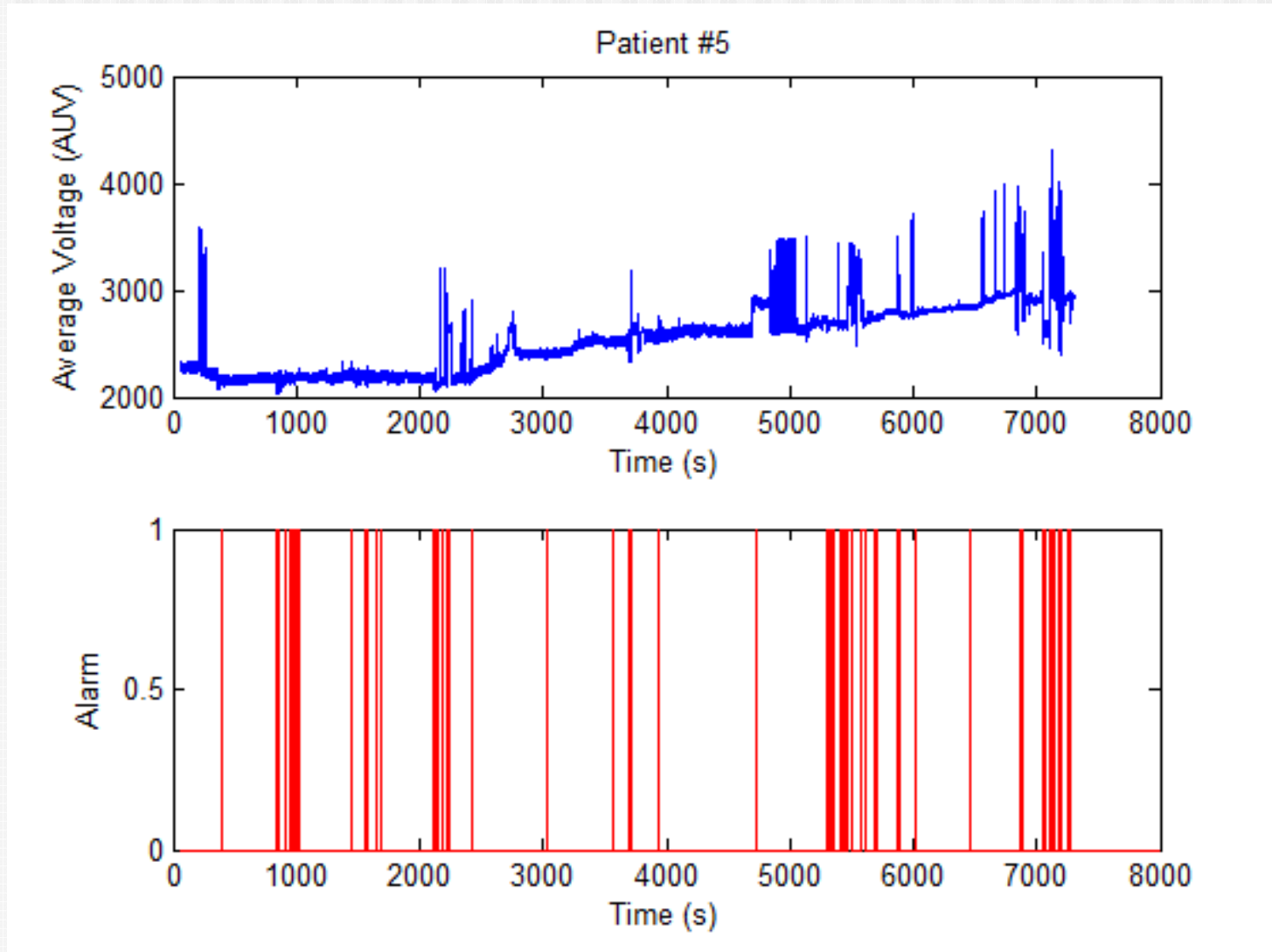
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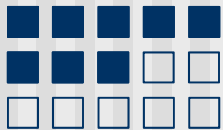


EIT Measurements vs O₂ Concentration

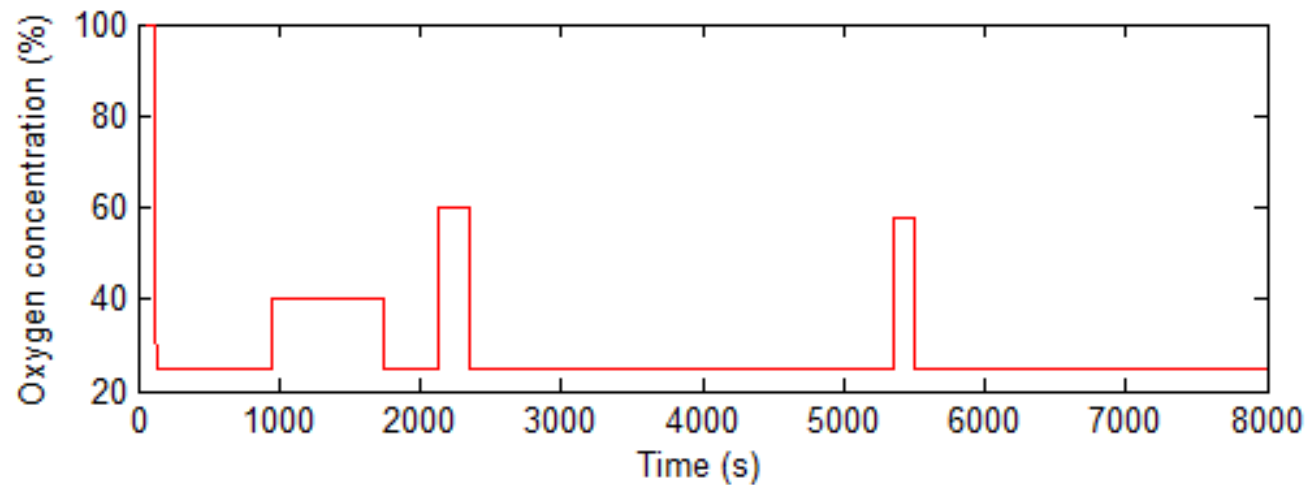
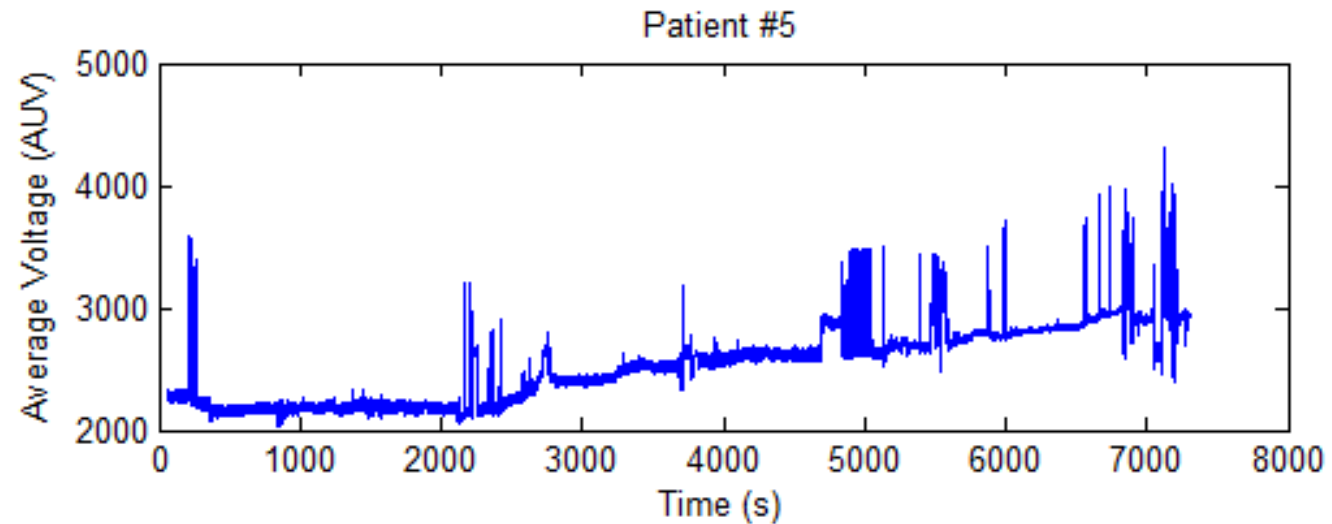
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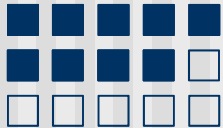


Time Difference Imaging Reference

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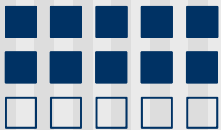
- Full expiration.
- Average of one minute.
- Average of whole dataset.

EIT Images vs Volume (Minimum Ref.)

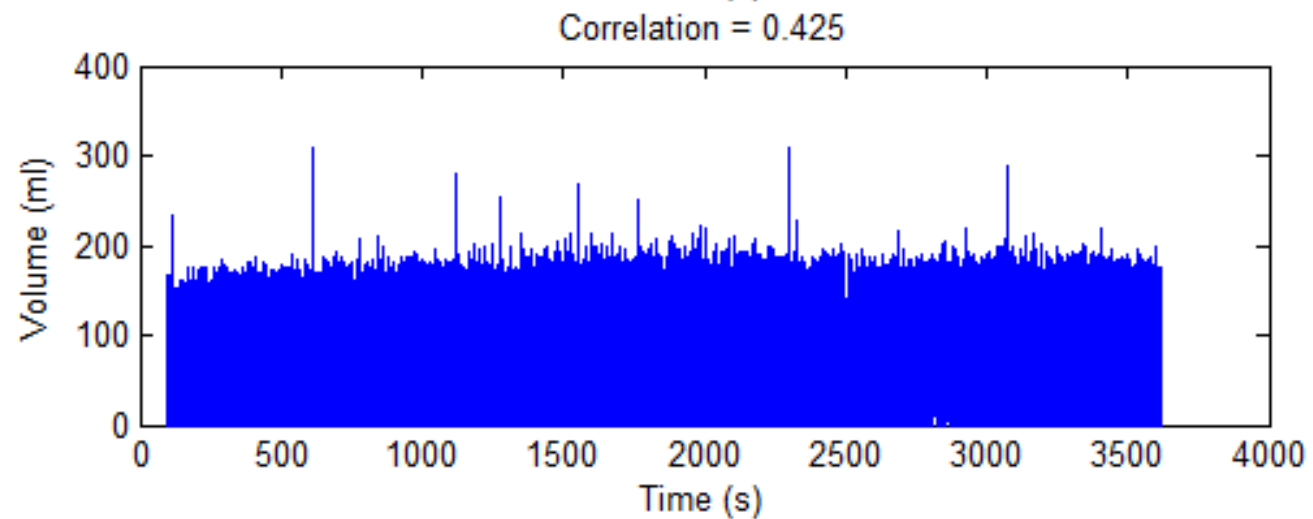
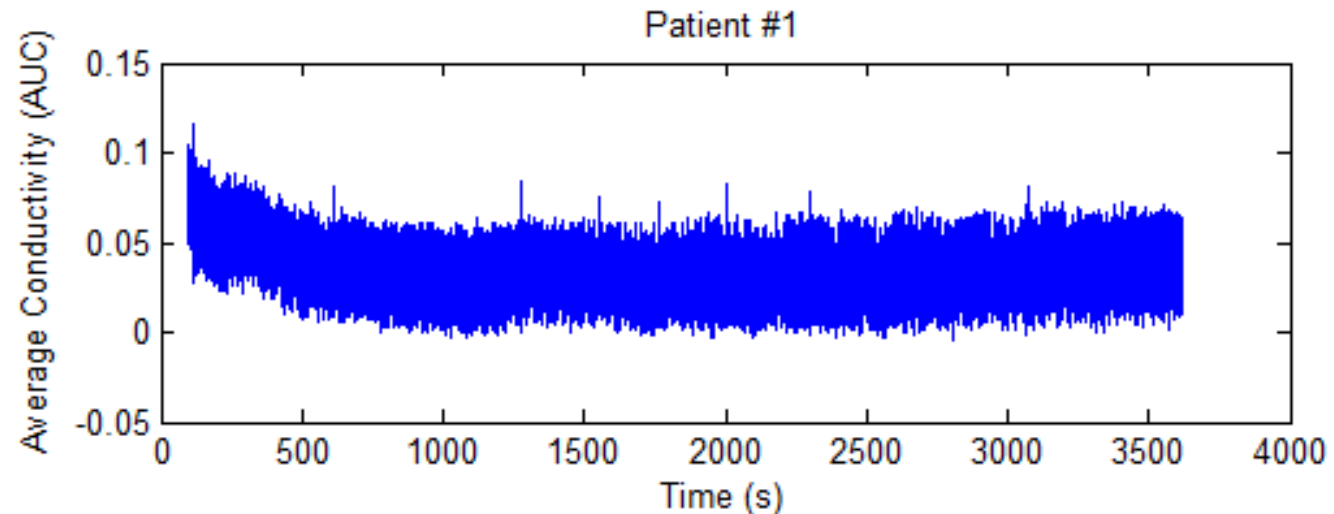
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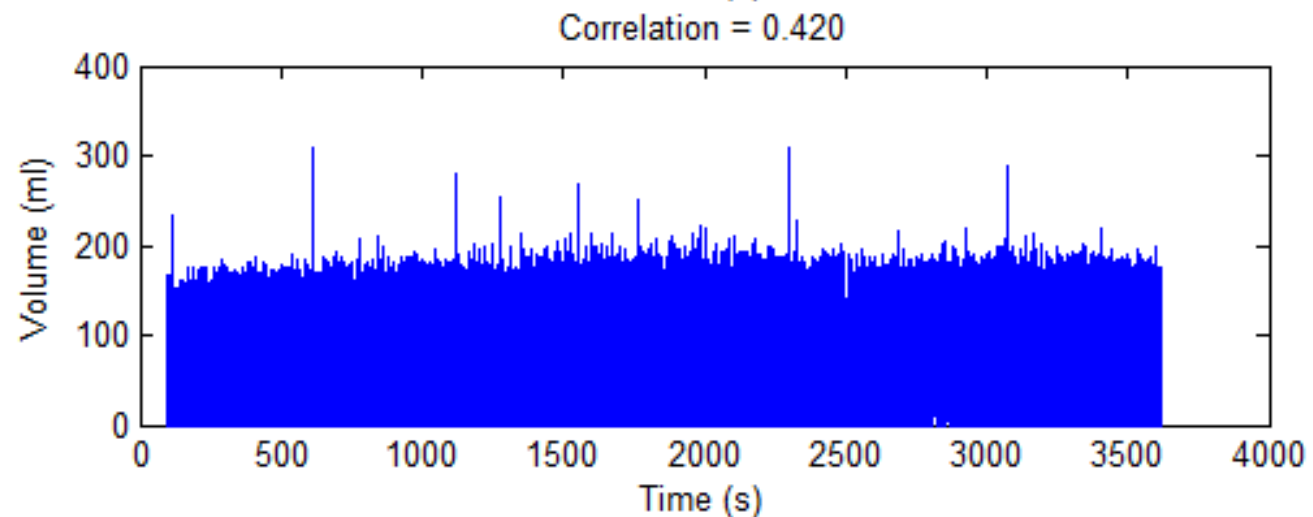
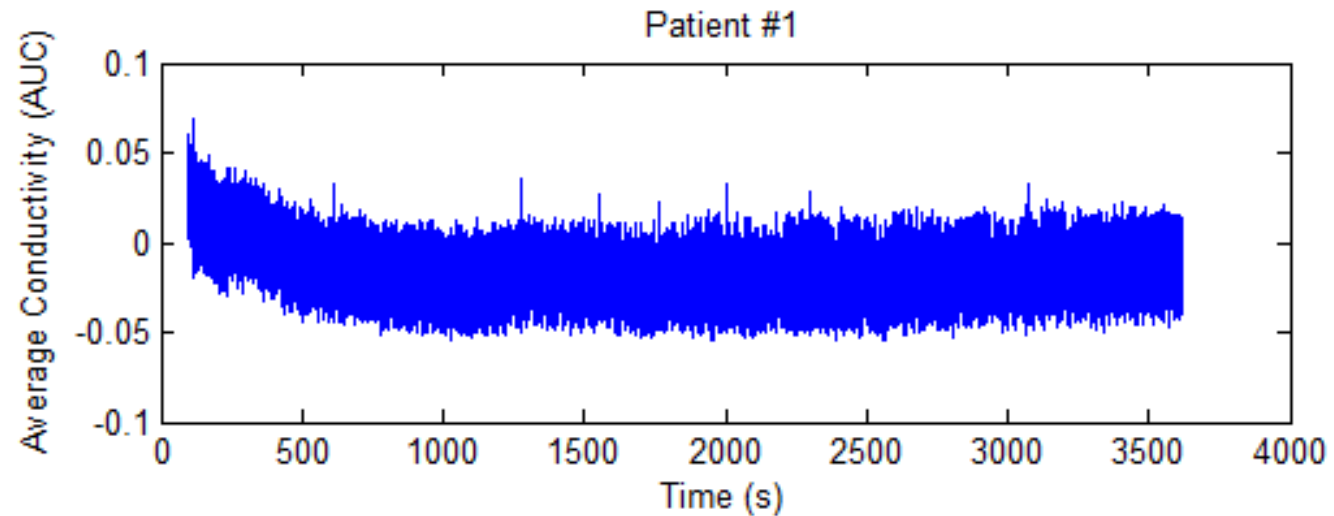
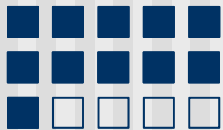


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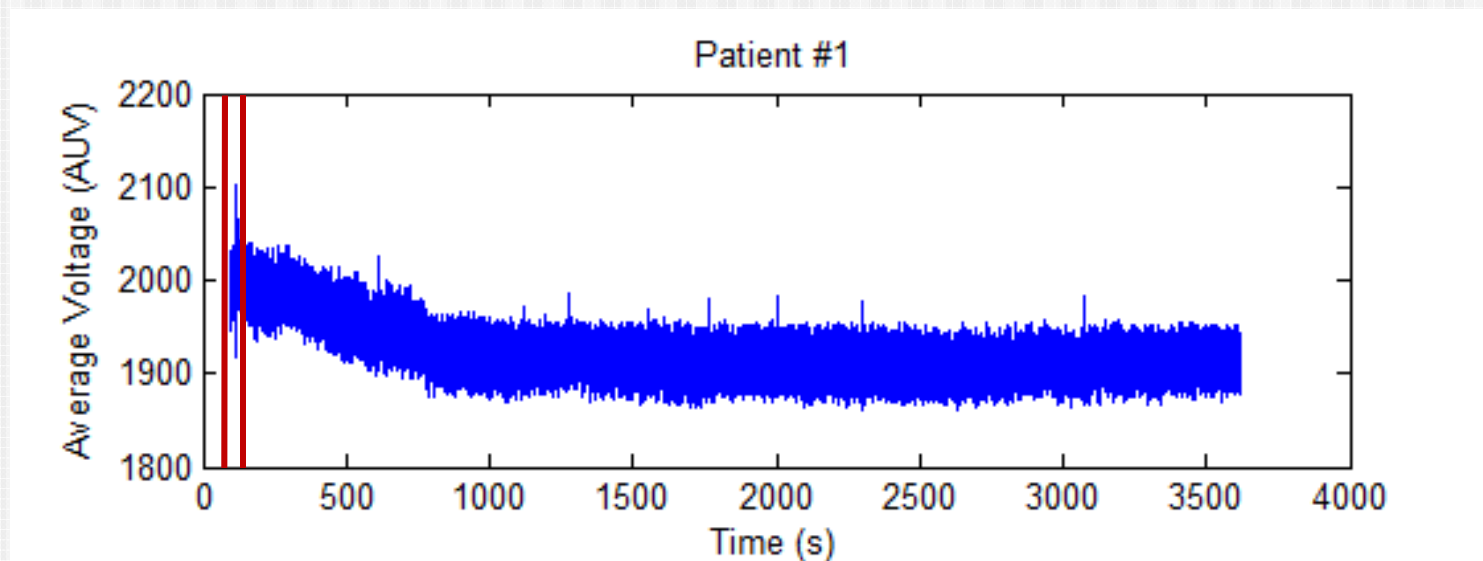
EIT Images vs Volume (Average Ref.)

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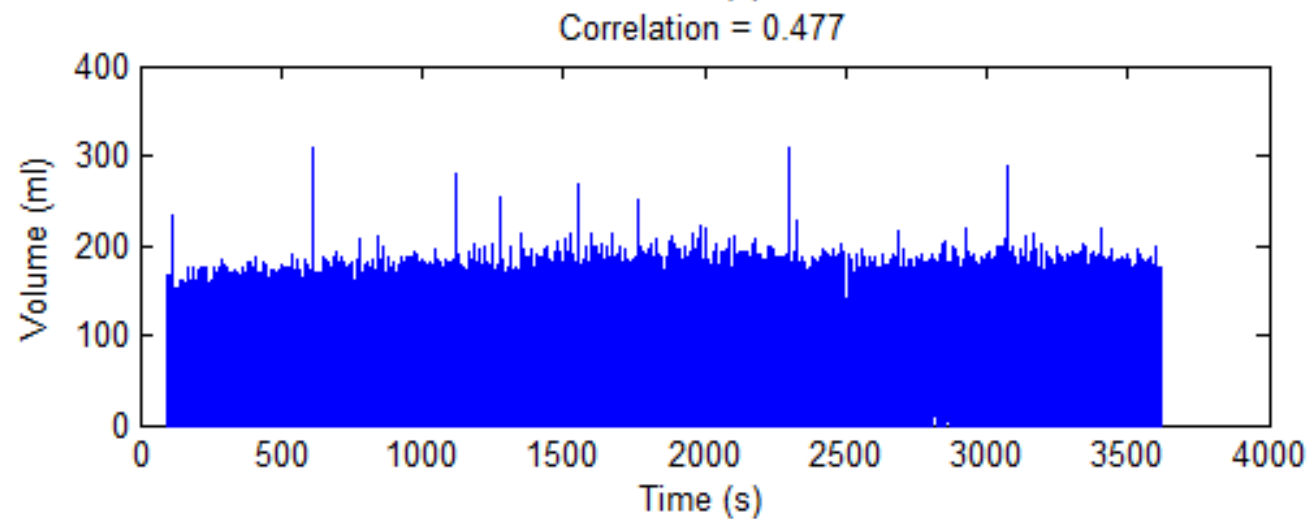
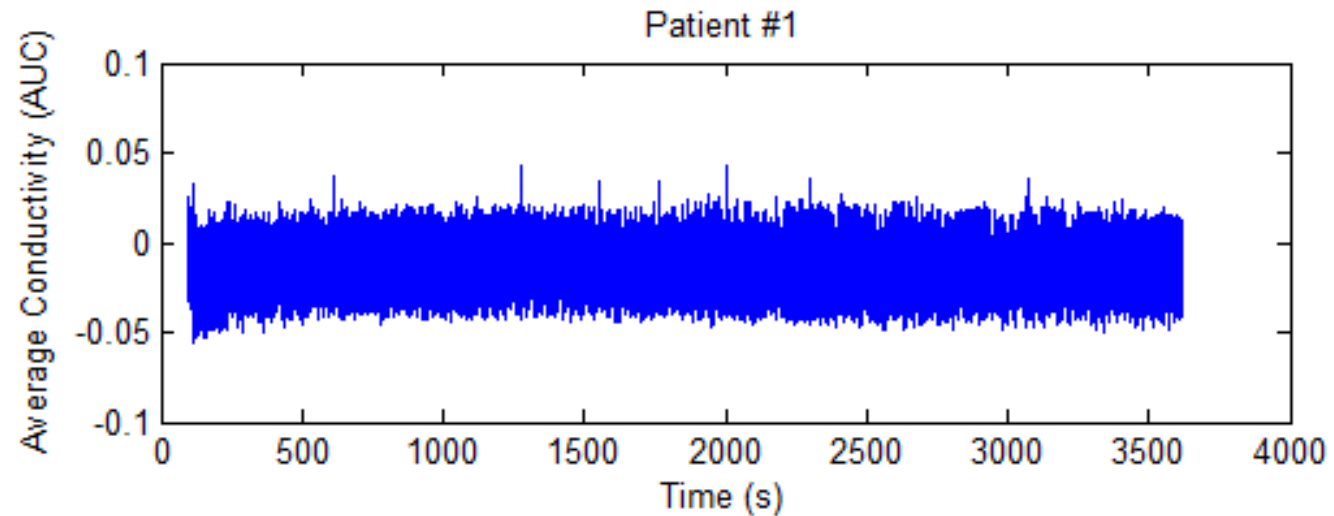
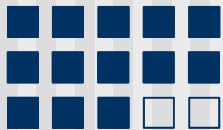
Reference Selection (Sliding Window)

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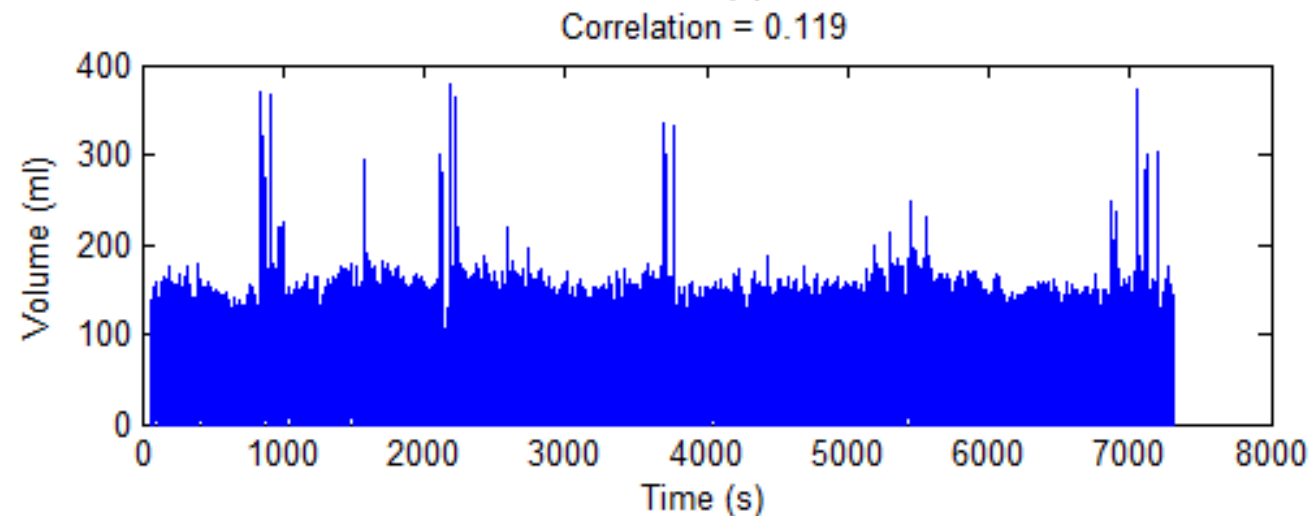
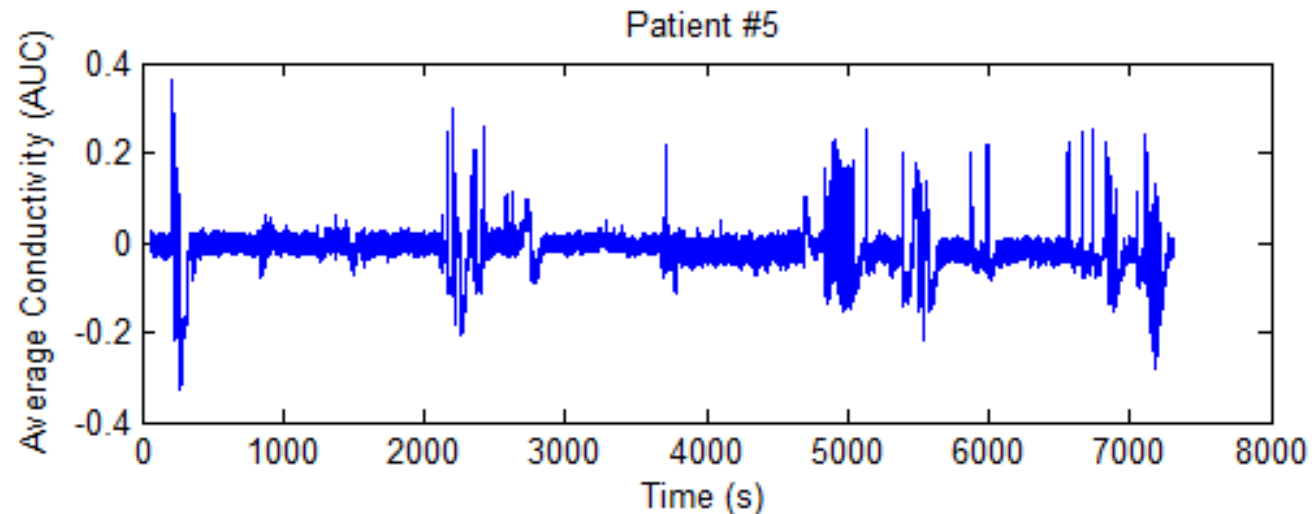
EIT Images vs Volume (Slid. Win. Ref.)

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EIT Images vs Volume (Slid. Win. Ref.)

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Ventilator Data as Prior Information

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- Real-time prior information for image reconstruction algorithms:
 - Breathing frequency.
 - Tidal volume.
 - Ventilation phase (inspiration, pause, expiration).
 - Change in ventilator settings (mode, PEEP, *etc.*).
 - Ventilator alarms to help in assessing data validity.

Planned Data Analysis

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- Statistical analysis:
 - Atypical events in EIT and ventilator data.
 - Correlations between EIT and ventilator data.
- Limiting factors:
 - Low number of patients.
 - Low similarities between patients.
 - Low data quality due to electrode disconnections and numerous staff interventions on patients.

Factors Affecting EIT Image Quality

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- Patients are awake and moving
 - Contact impedance variations
 - Torso geometry variations
- Patients that would more benefit from EIT would more likely be asleep and stand still.

Electrode Placement Constraints

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- Minimization of measurement drift:
 - Hardware design techniques.
 - Mathematical modelling.
- Selection of reference dataset:
 - Sliding window technique.
 - Automatic reset of reference dataset.
 - Algorithm to automatically evaluate the quality and stability of the reference over time.
 - Accelerometer located on the patient.

ICU Applications

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- Electrode disconnections and contact impedance variations:
 - Automatic detection in hardware.
 - Management in software.
- EIT systems should be made more flexible for the number of required electrodes and their placement.

Thank you for your attention!

- This work was supported in part by:
 - Natural Sciences and Engineering Research Council of Canada (NSERC).
 - Canadian Institutes of Health Research (CIHR).
 - Fonds de recherche du Québec - Nature et technologies (FQRNT).