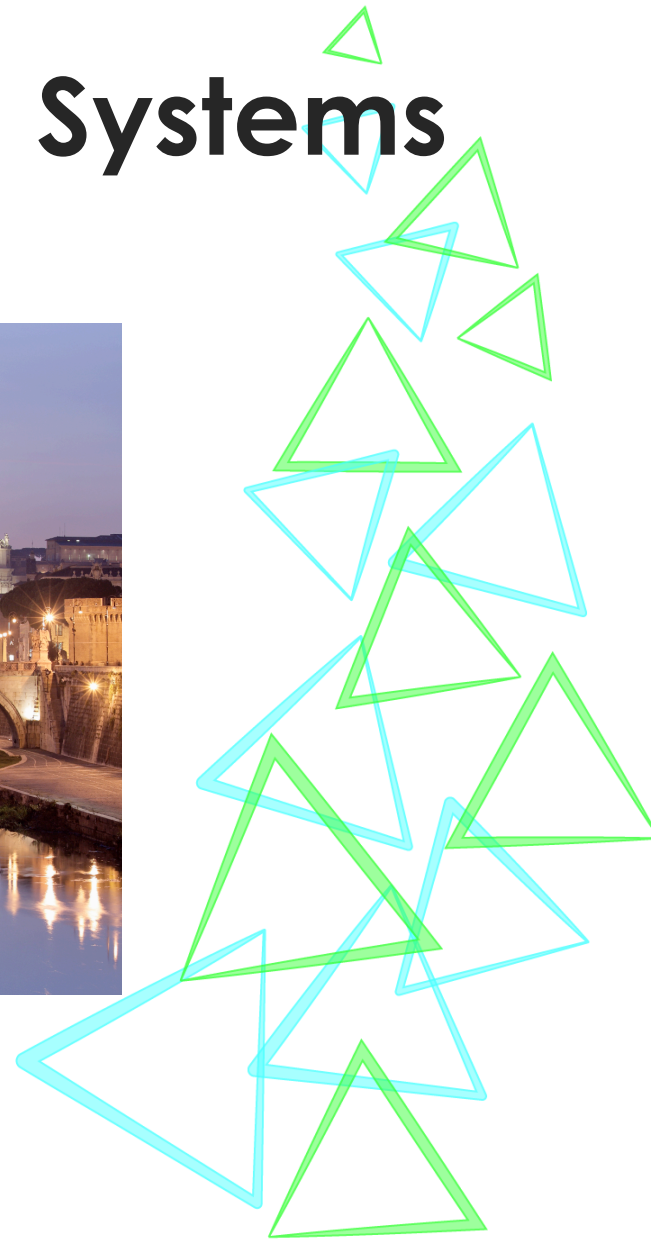


# E-Health Devices, Circuits and Systems

Giovanni De Micheli



# Outline

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## ▲ Introduction

- ▽ Trends in Engineering and Medicine

## ▲ E-Health

- ▽ Technology issues

- ▽ System issues

## ▲ Summary and conclusions

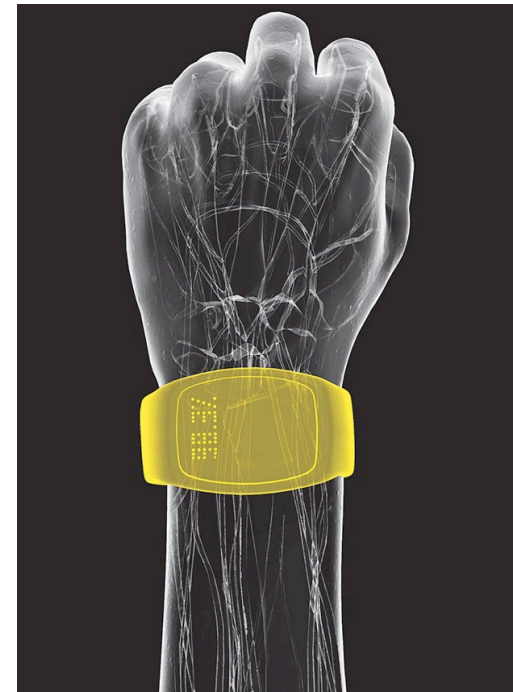
# The megatrends

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- ▲ Relentless growth of computing, storage and communication technologies
  - ▽ Inexpensive terminals providing ubiquitous services
- ▲ Biomedical science becoming more quantitative
  - ▽ Societal need of better care at lower costs
- ▲ Big data issues fueling research and businesses
  - ▽ Models, algorithms, architectures to tame data deluge

# The megatrends: IEEE Spectrum

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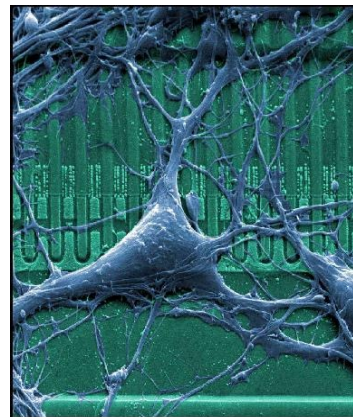
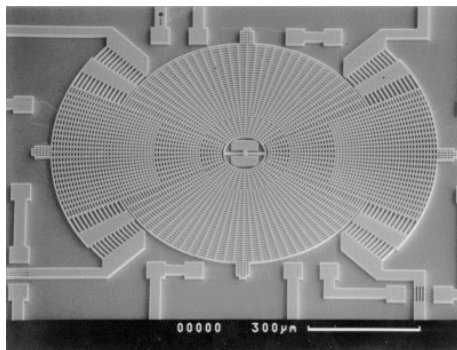
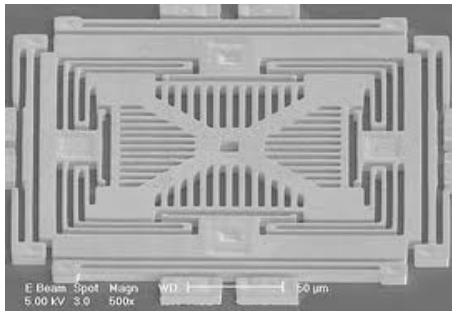






# Engineering trends: The sensory interface

- ▲ The *More than Moore* revolution:
  - ▽ Low-cost volume production
  - ▽ Direct interface to information processing systems



[Courtesy: ST]

[Courtesy: EPFL]

# What is health?



State of complex physical, mental and social well-being and not merely the absence of disease or infirmity



treatment

prevention



# New medical trends: the 4 Ps

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## ▲ Predictive medicine

- ▽ Predict diseases using “omics” technologies

## ▲ Participative medicine

- ▽ Share data and experiences using social media

## ▲ Personalized medicine

- ▽ Adapt diagnosis and therapy to individual

## ▲ Preventive medicine

- ▽ Quality of aging through nutrition and lifestyle

# Where medicine and engineering meet

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Sequencing

**Zelboraf.**  
vemurafenib  
The power of personalization



Personalized drugs



Prosthetics  
and implants

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# E-health: objectives

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- ▲ Bettering **medicine** by electronic means
- ▲ Bringing **low-cost** medicine to the people
- ▲ Exploiting electronic **well-being** as a **lifestyle**
- ▲ Opportunities:
  - ▽ Synergy of integrated electronic and sensing
  - ▽ Platform-based design of electro-sensing systems
  - ▽ Mobile telephony as backbone

# Point of care

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▲ Some molecular tests can be done in real time

▽ Efficient and lower cost for routine care

▽ Some diagnostics require multiple tests



▲ Emergency situations require real-time measures

▽ Patient's fluids are often connected

▽ Local tests and remote diagnosis



# Tele-medicine: Monitoring chronic patients

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## ▲ Non-invasive monitors

▽ Heart rate, SpO<sub>2</sub>, blood pressure

## ▲ Invasive monitors:

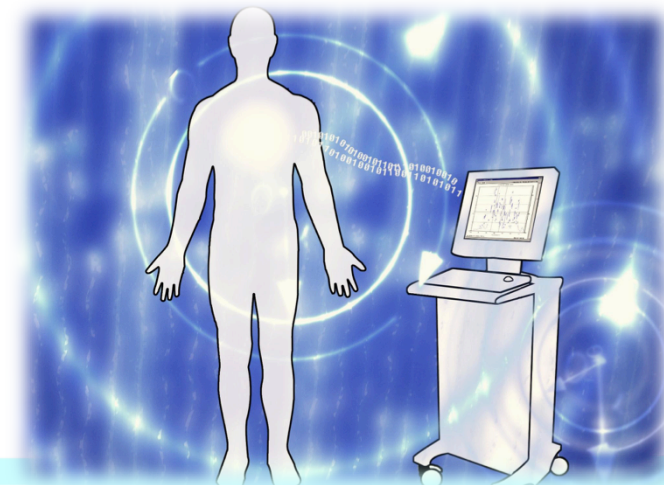
▽ Metabolites: glucose, lactate, cholesterol

▽ Continuous measurements calibrated in  $T$  and  $pH$

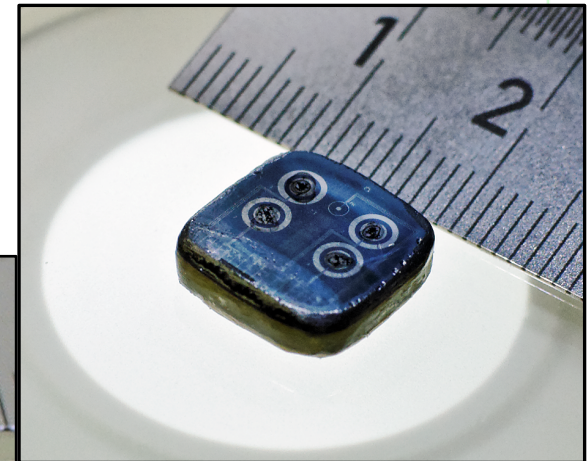
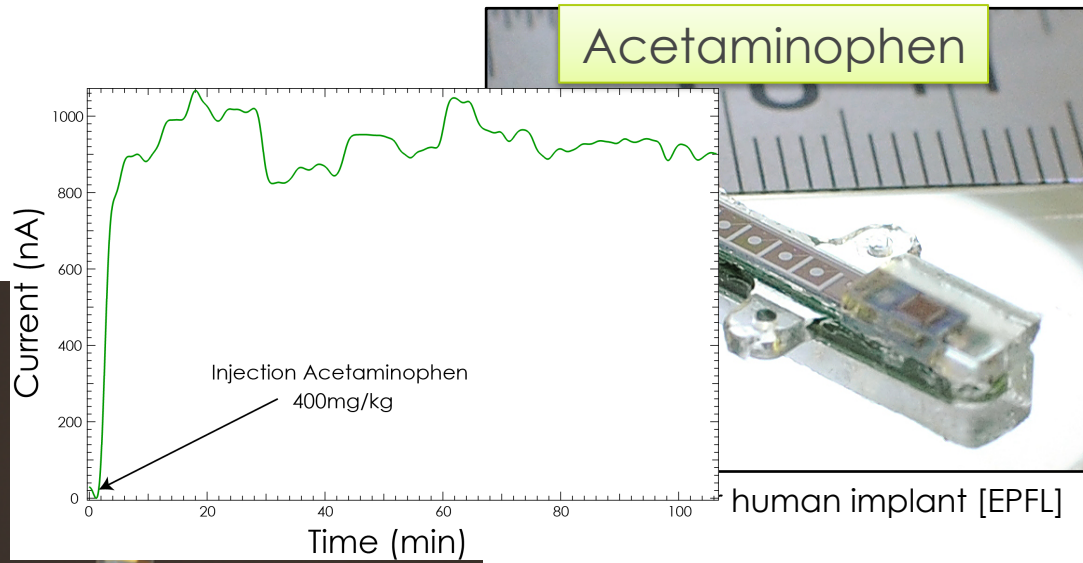
## ▲ Wireless challenges

▽ Secure transmission

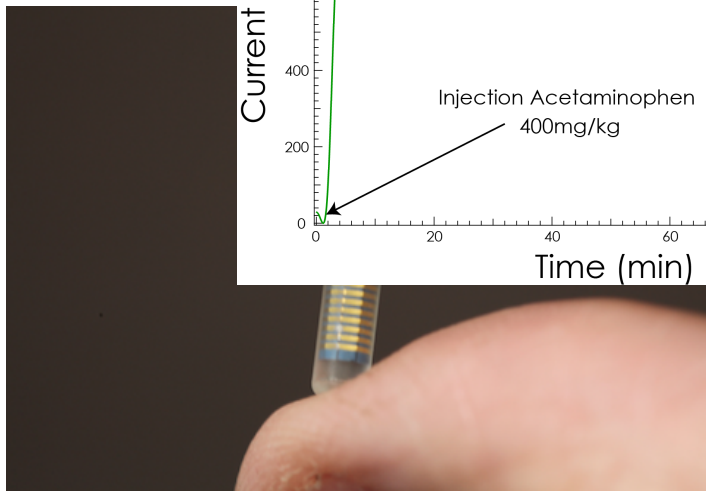
▽ Remote powering



# Examples



Muti-sensor for lab animals [EPFL]



GLUCOSE SENSOR [Senseonics™]

# Tele-medicine

## Remote ultrasound diagnosis

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- ▲ Portable ultrasound head & processor
  - ▽ Untrained operator acquires 3D volumes
  - ▽ Beamforming, compression and transmission
  - ▽ Radiologist/Sonographer evaluates images remotely

New 2D probes for  
3D image acquisition

New low-power, low-  
cost hardware design

Image reconstruction,  
rotation & sectioning

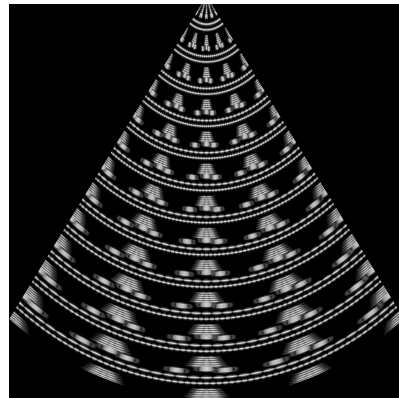


# Challenges:

## Remote ultrasound diagnosis

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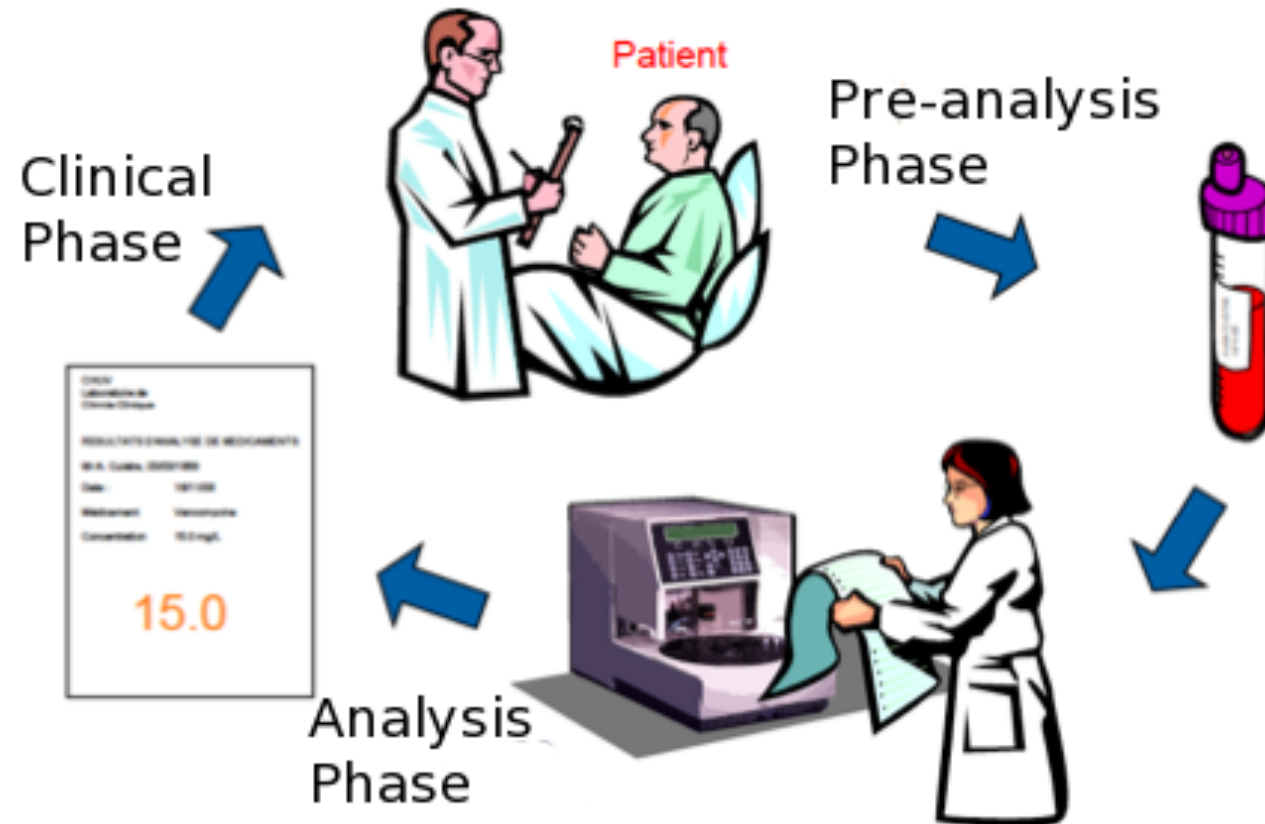
- ▲ 3D Ultrasound imaging requires supercomputing:
  - ▽ TB/sec of bandwidth, GB of storage and TOP/sec
- ▲ Electronics should be confined in small volume
  - ▽ And directly integrated with the probe
- ▲ Wide space of applications, modes and parameters



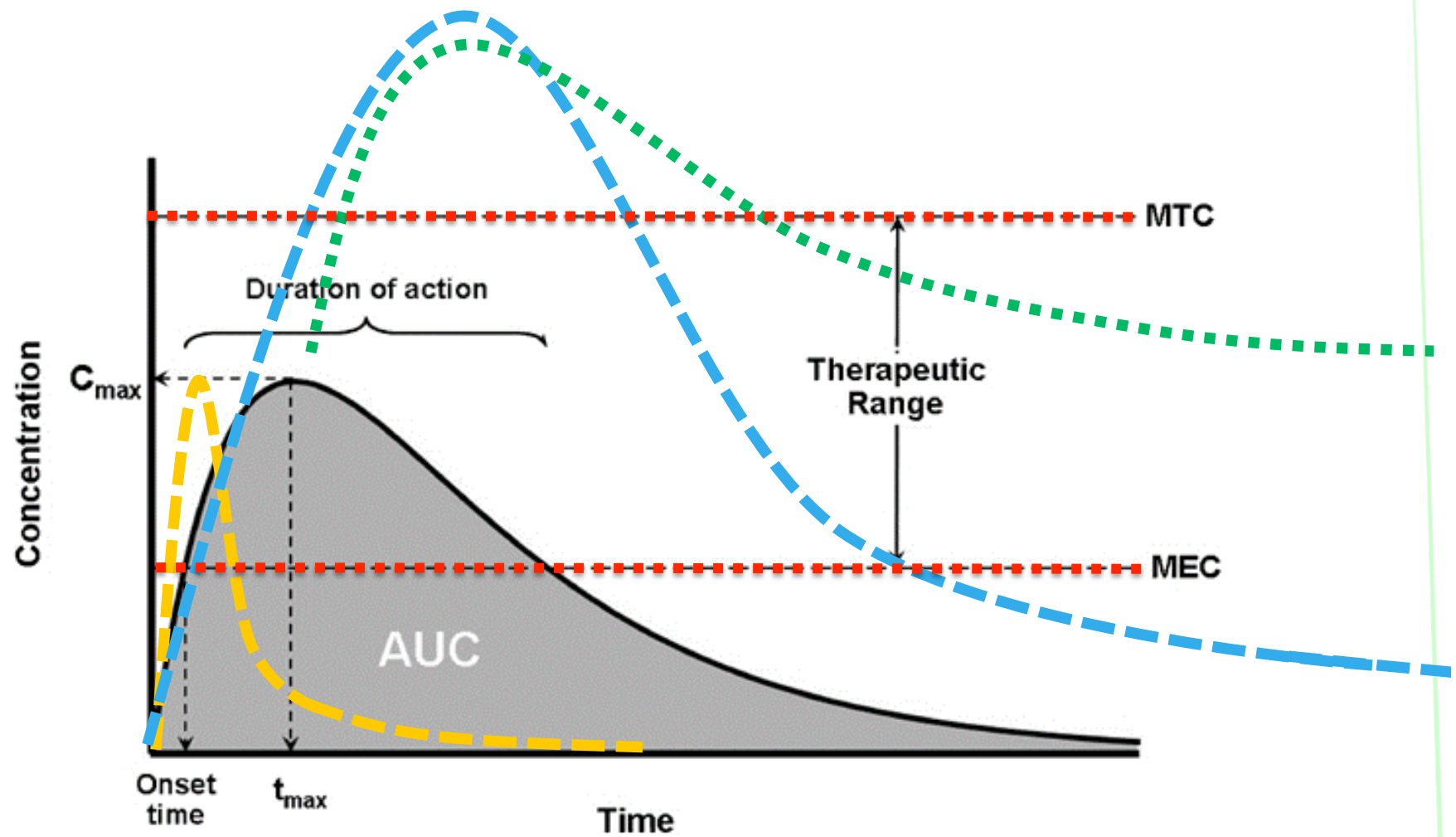


# Therapeutic Drug Monitoring (TDM)

- ◆ Drug dosage according to the individual *pharmacokinetic profile*



# Drug concentration in blood



# Smart drug administration

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## ▲ Policy design:

- ▽ Determine the sequence and dose of the drug

## ▲ Predictive models:

- ▽ Extract *system state* from external parameters

## ▲ Close-loop models:

- ▽ Measure system state: drug concentration

## ▲ Objective:

- ▽ Minimize drug dose/administration
  - subject to drug concentration to be in the band

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- ▽ **Technology issues**

- ▽ System issues

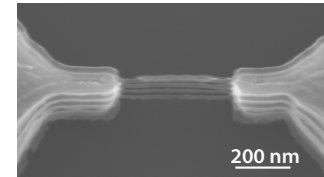
## ▲ Summary and conclusions

# Technologies

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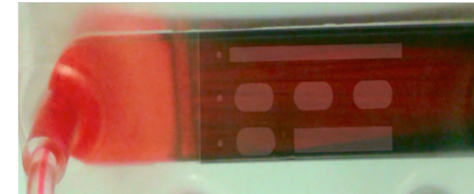
## ▲ Sensing

- ▽ Electrical, mechanical, optical



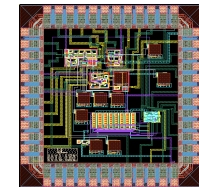
## ▲ Fluidics and transducers

- ▽ Micro tubes, valves, pumps



## ▲ Data acquisition electronics

- ▽ Discrete, integrated, monolithic with sensor



## ▲ Packaging

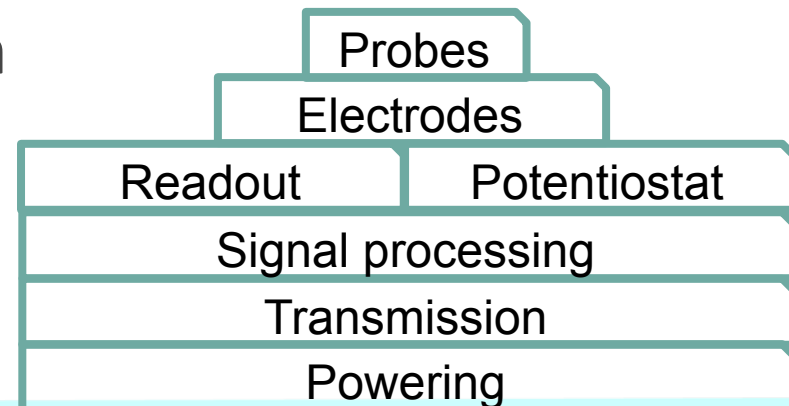
- ▽ Rigid/flexible, bio-compatible



# The platform and its components

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- ▲ Electro-chemical sensors for families of targets benefit from modular integration
  - ▽ Similar scalable geometries
  - ▽ Different molecular functionalization
  - ▽ Different I/V response
- ▲ Components can be stored in a cell library
  - ▽ Semicustom approach



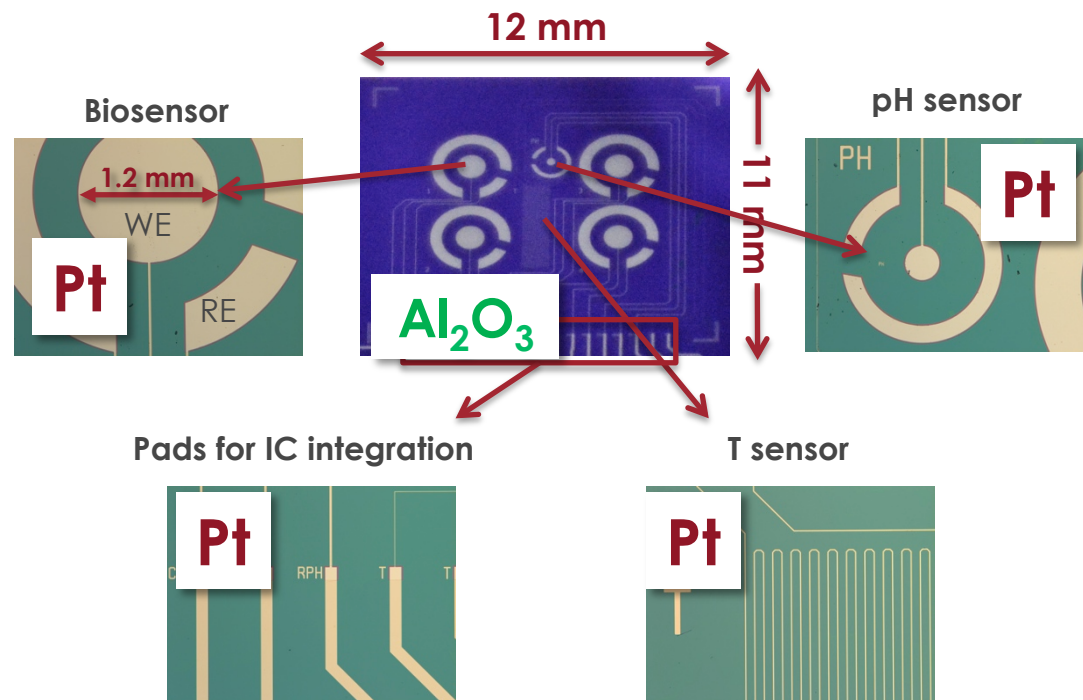


# Platform design example

## Constraints

- ▲ Compact
- ▲ Biosensor array
- ▲ pH control
- ▲ Temperature control
- ▲ IC integration
- ▲ Easy Fabrication
- ▲ Biocompatible

## Solutions

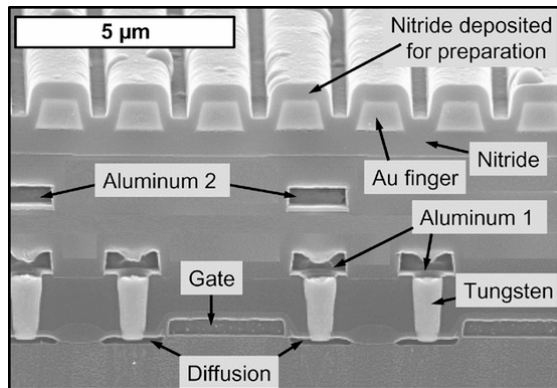


# Key points

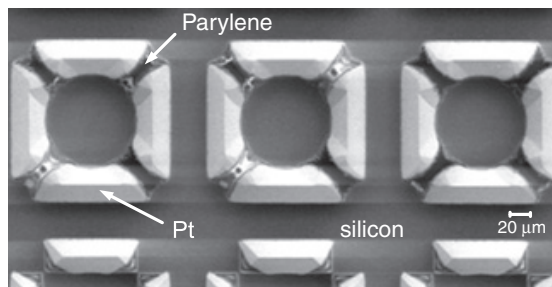
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- ▲ Co-design of electronics and sensing is key
  - ▽ Achieve low-power consumption
  - ▽ Achieve small footprint
- ▲ Platform-based design
  - ▽ Modularity of design is key to reducing NREs
- ▲ Electronic technology can be extended upwards
  - ▽ Monolithic integration
  - ▽ Silicon interposer technologies

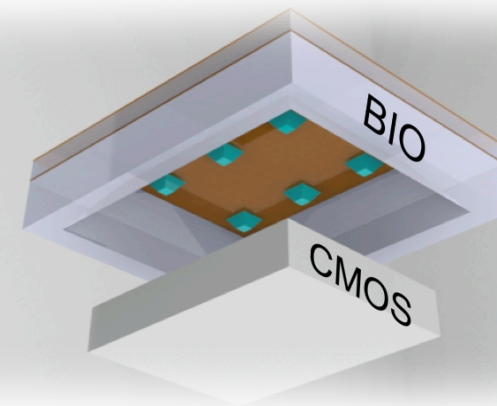
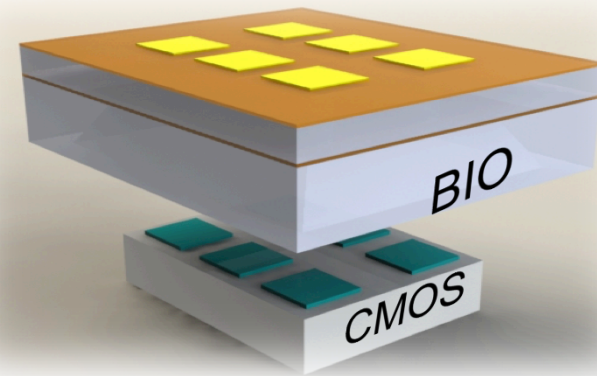
# Monolithic and TSV-based integration



[Schienle et al., JSSC 2004]



[Temiz et al., El Letters 2011]



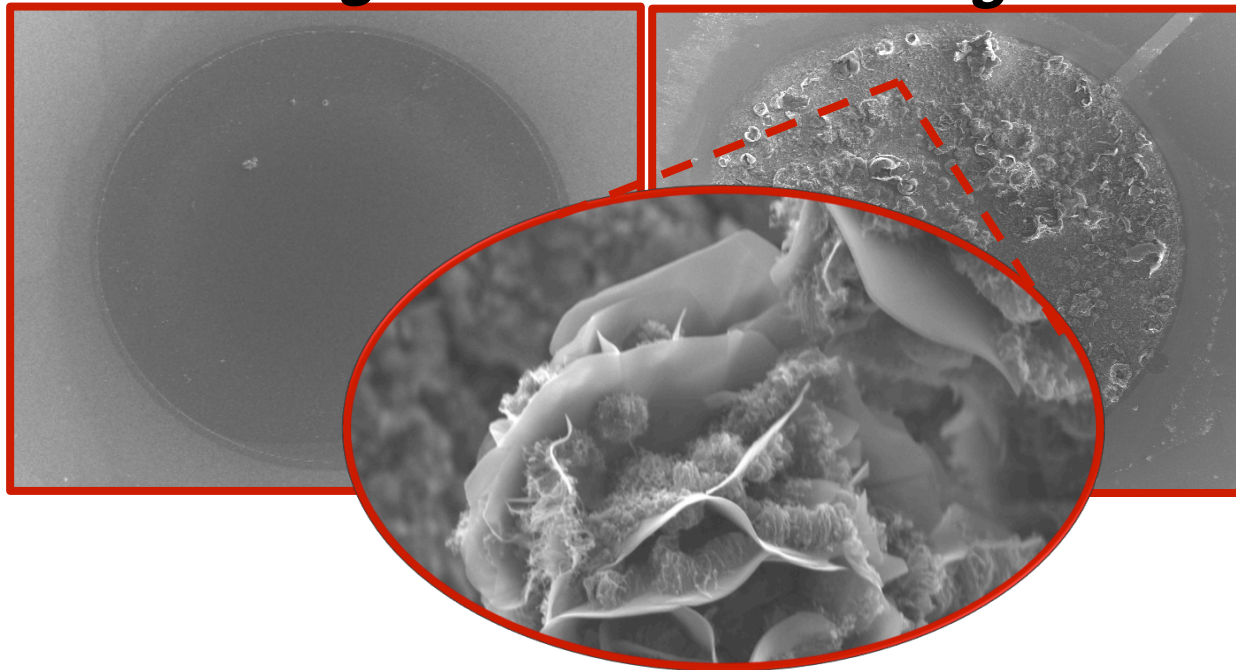
[Temiz et al., Lab on Chip 2012]

# CMOS-compatible nanostructuring

- ▲ Electrode nano-structuring on top of CMOS
  - ▽ Increases sensitivity and lowers LOD
  - ▽ Carbon structure growth at 450°C in two steps

***1<sup>st</sup> CVD growth***

***2<sup>nd</sup> CVD growth***



I. Taurino, *et al.*, *Nano Letters*, 2014

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# System-level challenges

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## ▲ Correctness:

- ▽ The system must perform its function in any condition

## ▲ Security:

- ▽ No medical information leaking to other parties
- ▽ No access from non-authorized sources

## ▲ Safety:

- ▽ Under no condition the health-device can be a threat
- ▽ Safety must be guaranteed for both patient and operator

## ▲ Dependability:

- ▽ All devices must work long time in possibly harsh condition
- ▽ Graceful degradation mechanisms



# Correctness

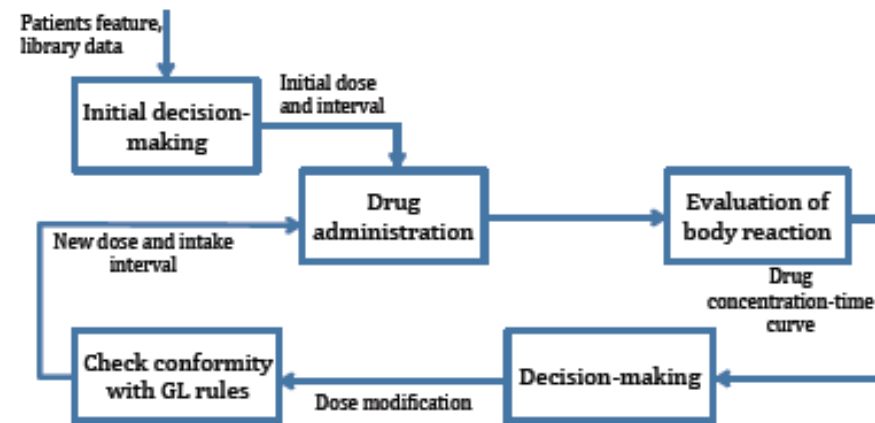
## ▲ Diagnostic systems

▽ Accuracy, linearity, limit of detection

## ▲ Drug administration decision support systems

▽ Decisions based on acquired data must be correct

▽ Life-critical systems

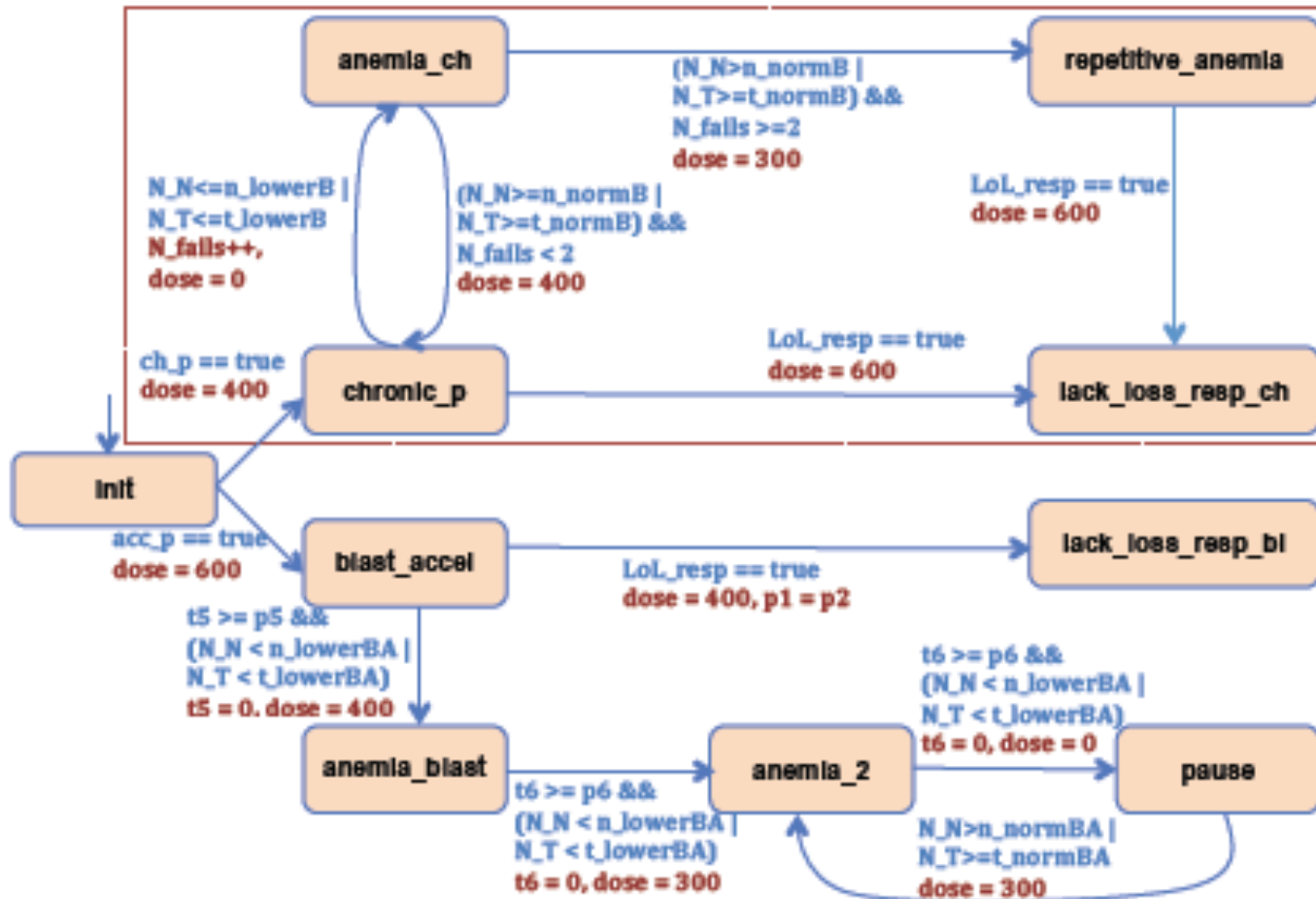


# The verification problem

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- ▲ Verify that a therapeutic protocol is
  - ▽ Consistent
  - ▽ Complete
- ▲ Verify that a drug administration control unit is a correct *implementation* of the protocol
  - ▽ Model checking

# Formal model of *Imatinib* protocol



# Advantages of formal models

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- ▲ Reason about properties in a formal way
  - ▽ Check for invariants
- ▲ Synthesize optimal control policies for drug administration
  - ▽ Sequence of (time, dose)
- ▲ Golden model to verify hardware implementation

# Key points

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- ▲ Very few protocols have a formal description
  - ▽ Corner cases are hazardous for patients
- ▲ Personalization of drug dosage is important
  - ▽ But still used in few cases
- ▲ Modeling human body reaction is critical
  - ▽ But often hard to achieve in a deterministic way

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# Summary:

## Opportunities and challenges

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- ▲ E-health is an unstoppable life-changing trend with unlimited possibilities
- ▲ The market is articulated:
  - ▽ Some areas are harder than others to penetrate
  - ▽ Many problems are still not well understood
  - ▽ Ethics and regulations play a major role
- ▲ Exciting field for researchers and developers



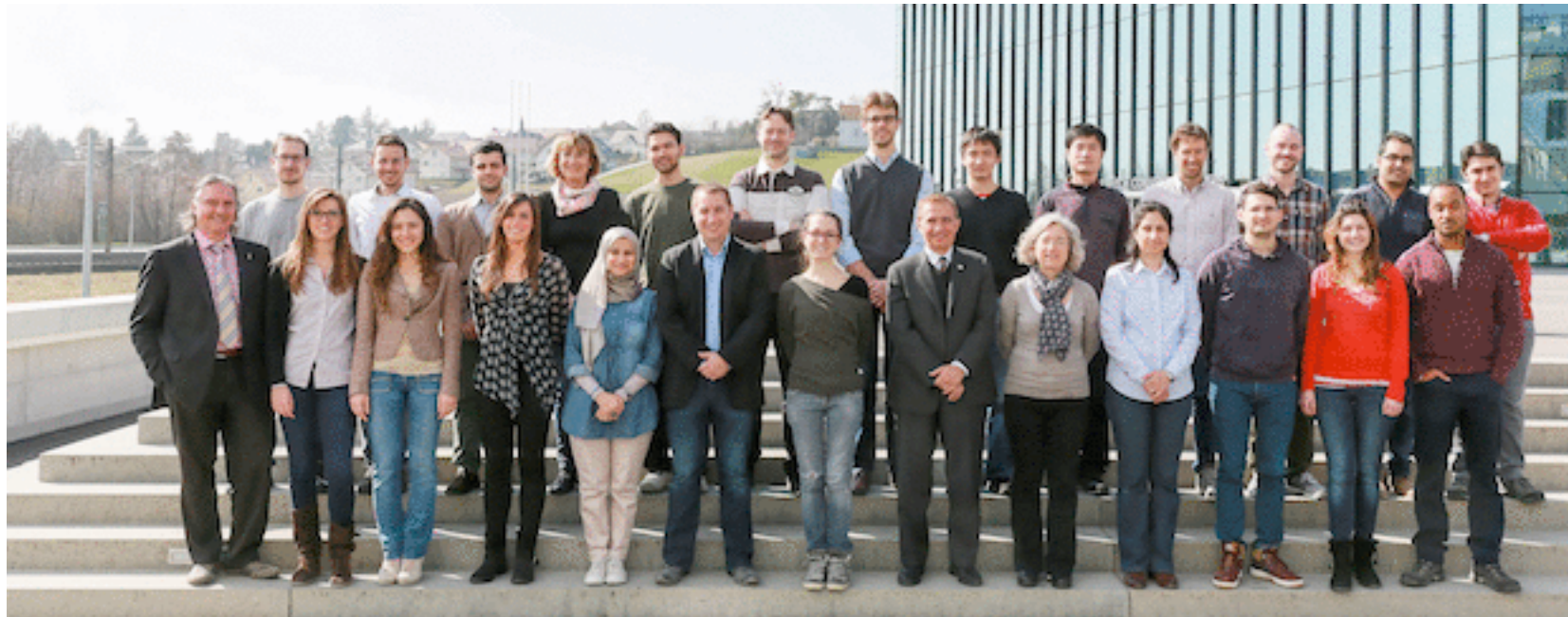
# Conclusions

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- ▲ New electronic health systems and services will be enabled by advances in biology and medicine, in combination with progress in electronics
- ▲ The rationalization of health care will provide advanced care to a broader audience at lower cost
- ▲ Human factors will still be central to decisions in medicine - decision support will be automated

# Thank you

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# Thank you

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