(12) INTERNATIONAL APPLICATION PUBLISHED UNDER THE PATENT COOPERATION TREATY (PCT)

(19) World Intellectual Property Organization

International Bureau

(10) International Publication Number WO 2009/102640 A1

(43) International Publication Date 20 August 2009 (20.08.2009)

- (51) International Patent Classification: A61N 1/372 (2006.01)
- (21) International Application Number:

PCT/US2009/033436

(22) International Filing Date:

6 February 2009 (06.02.2009)

(25) Filing Language:

English

(26) Publication Language:

English

US

(30) Priority Data:

61/027,983 12 February 2008 (12.02.2008)

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- (81) Designated States (unless otherwise indicated, for every kind of national protection available): AE, AG, AL, AM, AO, AT, AU, AZ, BA, BB, BG, BH, BR, BW, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DO, DZ, EC, EE, EG, ES, FI, GB, GD, GE, GH, GM, GT, HN, HR, HU, ID, IL, IN, IS, JP, KE, KG, KM, KN, KP, KR, KZ, LA, LC, LK, LR, LS, LT, LU, LY, MA, MD, ME, MG, MK, MN, MW, MX, MY, MZ, NA, NG, NI, NO, NZ, OM, PG, PH, PL, PT, RO, RS, RU, SC, SD, SE, SG, SK, SL, SM, ST, SV, SY, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, ZA, ZM, ZW.
- (84) Designated States (unless otherwise indicated, for every kind of regional protection available): ARIPO (BW, GH,

[Continued on next page]

(54) Title: SYSTEMS AND METHODS FOR CONTROLLING WIRELESS SIGNAL TRANSFERS BETWEEN ULTRA-SOUND-ENABLED MEDICAL DEVICES

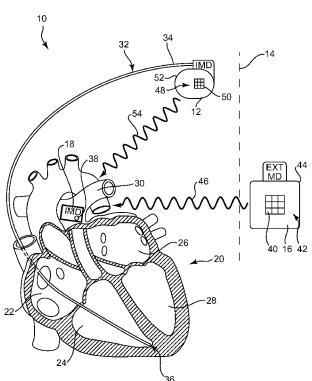
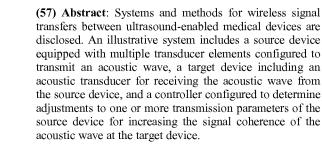


Fig. 1





GM, KE, LS, MW, MZ, NA, SD, SL, SZ, TZ, UG, ZM, ZW), Eurasian (AM, AZ, BY, KG, KZ, MD, RU, TJ, TM), European (AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HR, HU, IE, IS, IT, LT, LU, LV, MC, MK, MT, NL, NO, PL, PT, RO, SE, SI, SK, TR),

OAPI (BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG).

Published:

— with international search report (Art. 21(3))

SYSTEMS AND METHODS FOR CONTROLLING WIRELESS SIGNAL TRANSFERS BETWEEN ULTRASOUND-ENABLED MEDICAL DEVICES

TECHNICAL FIELD

[0001] The present invention relates to systems and methods for communicating between medical devices. More specifically, the present invention relates to systems and methods for controlling wireless signal transfers between ultrasound-enabled medical devices.

BACKGROUND

Implantable medical devices (IMDs) such as pacemakers and implantable cardioverter defibrillators are utilized in monitoring and regulating various conditions within the body. An implantable cardioverter defibrillator, for example, may be utilized in cardiac rhythm management applications to monitor the rate and rhythm of the heart and for delivering various therapies such as cardiac pacing, cardiac defibrillation, and/or cardiac therapy. In some cases, for example, the implantable medical device can be configured to sense various physiological parameters occurring in the atria and/or ventricles of the heart or at other locations to determine the occurrence of any abnormalities in the operation of the heart. Based on these sensed parameters, the medical device may then deliver an appropriate therapy to the patient.

[0003] A variety of techniques have been developed for transmitting wireless signals between medical devices located inside or outside of the body. In an ultrasonic approach, for example, each linked medical device can be equipped with an ultrasonic transducer adapted to generate an acoustic signal for providing data communications from one device to another device, to transfer energy from one device to another device, and/or to delivery therapy to a treatment site. One major obstacle limiting the advancement of the ultrasonic approach is the inefficiency of signal transfer from indirect acoustic pathways within the body between ultrasound-enabled

devices. In a dynamic, heterogeneous environment such as the human body, for example, optimal signal transfer from one ultrasound-enabled device to another requires appropriately designed transmissions, typically in the form of modulated acoustic signals with compensations for phase and amplitude effects during propagation. Accordingly, there is an ongoing need for systems and methods for improving the accuracy, efficiency, and reliability of wireless signal transfers between ultrasound-enabled devices.

SUMMARY

[0004] The present invention relates to systems and methods for controlling wireless signal transfers between ultrasound-enabled medical devices. An illustrative system includes a source device with a plurality of acoustic transducer elements configured to transmit an acoustic signal, a target device including an acoustic transducer for receiving the acoustic signal from the source device, and a controller configured to determine adjustments to one or more transmission parameters of the source device for increasing the signal coherence at the target device. In some embodiments, the controller is configured to adjust the transmission parameters based on phase delay and/or amplitude differences from acoustic signals transmitted by the target device and received on the transducer elements of the source device.

[0005] An illustrative method for controlling the wireless transfer of acoustic signals between ultrasound-enabled medical devices includes initiating a transmission mode of operation in the target device and transmitting one or more acoustic signals from the target device, initiating a reception mode of operation in the source device and receiving one or more acoustic signals from the target device, comparing the acoustic signals received by a plurality of transducer elements of the source device and computing a phase delay parameter for the received acoustic signals, and adjusting one or more transmission parameters of the source device to increase the signal coherence at the target device.

[0006] The systems and methods described herein may enable optimal or near-optimal signal transfer over a wide range of operating conditions and in a variety of applications. Applications that can employ the techniques described herein can include, but are not limited to, telemetry communications, energy transfer or delivery, and therapy delivery. In some embodiments, for example, the techniques described herein can be utilized in cardiac rhythm management applications to control acoustic communications between an implantable pulse generator or an external monitoring device and a remote sensor implanted within the body. Other applications are also possible.

[0007] While multiple embodiments are disclosed, still other embodiments of the present invention will become apparent to those skilled in the art from the following detailed description, which shows and describes illustrative embodiments of the invention. Accordingly, the drawings and detailed description are to be regarded as illustrative in nature and not restrictive.

BRIEF DESCRIPTION OF THE DRAWINGS

[0008] Figure 1 is a schematic view showing an illustrative system for providing wireless transfer of acoustic signals between ultrasound-enabled medical devices;

[0009] Figure 2 is a schematic view showing another illustrative system for providing wireless transfer of acoustic signals between ultrasound-enabled medical devices;

[0010] Figure 3 is a schematic view showing another illustrative system for providing wireless transfer of acoustic signals between ultrasound-enabled medical devices;

[0011] Figure 4 is a block diagram showing several illustrative components of a source device in acoustic communication with a target device:

[0012] Figure 5 is a flow chart showing an illustrative method for controlling the wireless transfer of acoustic signals between ultrasound-enabled medical devices; and

[0013] Figures 6-8 are schematic views showing an illustrative implementation of the method of Figure 5 using an extracorporeal source device attached to the exterior surface of a patient's body.

[0014] While the invention is amenable to various modifications and alternative forms, specific embodiments have been shown by way of example in the drawings and are described in detail below. The intention, however, is not to limit the invention to the particular embodiments described. On the contrary, the invention is intended to cover all modifications, equivalents, and alternatives falling within the scope of the invention as defined by the appended claims.

DETAILED DESCRIPTION

[0015] Figure 1 is a schematic view of an illustrative CRM system 10 for providing wireless transfer of acoustic signals between ultrasound-enabled medical devices implantable within a patient's body. The system 10, illustratively a system for optimizing the transfer of wireless signals in a cardiac rhythm management system, includes a medical device such as а pulse generator 12 implanted subcutaneously within the body at a location below the patient's skin 14, a monitor 16 located outside of the body, and a remote sensing device 18 implanted deeply within the patient's body (e.g., in one of the arteries or ventricles of the patient's heart 20 or in a pulmonary artery). The heart 20 includes a right atrium 22, a right ventricle 24, a left atrium 26, and a left ventricle 28. The right ventricle 24 leads to the main pulmonary artery 30, as shown.

[0016] In the illustrative CRM system 10 depicted, the pulse generator 12 is coupled to a lead 32 deployed in the patient's heart 20. As shown, the pulse generator 12 can be implanted subcutaneously within the body, typically at a location such as in the patient's chest or abdomen, although other implantation locations are possible. A proximal portion 34 of the lead 32 can be coupled to or formed integrally with the pulse generator 12. A distal portion 36 of the lead 32, in turn, can be implanted at a desired location within the heart 20

such as in the right ventricle 24, as shown. Although the illustrative system 10 depicts only a single lead 32 inserted into the patient's heart 20, in other embodiments the system 10 may include multiple leads so as to electrically stimulate other areas of the heart. 20. In some embodiments, for example, the distal portion of a second lead (not shown) may be implanted in the right atrium 22 or in the right ventricle 24. In addition, or in lieu, another lead can be implanted at the left side of the heart 20 (e.g., in the left atrium 26 or the left ventricle 28) to stimulate the left side of the heart 20, or can be implanted at other locations such as in the coronary veins (e.g., for biventricular pacing and/or heart failure treatment). Other types of leads such as epicardial leads may also be utilized in addition to, or in lieu of, the lead 32 depicted in Figure 1.

electrical signals between the heart 20 and the pulse generator 12. For example, in those embodiments where the pulse generator 12 is a pacemaker, the lead 32 can be configured to deliver electrical therapeutic stimulus for pacing the heart 20. In those embodiments where the pulse generator 12 is an implantable cardiac defibrillator, the lead 32 can be utilized to delver electric shocks to the heart 20 in response to an event such as ventricular tachycardia. In some embodiments, the pulse generator 12 may include both pacing and defibrillation capabilities.

[0018] In the embodiment illustrated in Figure 1, the monitor 16 is in acoustic communication with the remote sensing device 18 and the pulse generator 12. In certain embodiments, for example, the monitor 16 comprises an external device located on a handheld unit or on a garment adapted to be worn by the patient, and can be tasked to monitor the status of the patient's health as well as the operational and/or diagnostic status of the implanted devices 12,18. In certain embodiments, for example, the monitor 16 can be tasked to relay information about or acquired by the remote sensing device 18 to the

pulse generator 12. Alternatively, and in other embodiments, the monitor 16 can be located within the patient's body. In certain embodiments, for example, the monitor 16 can be implanted subcutaneously within the body at a location adjacent to the pulse generator 12 or at some other desired location within the body.

[0019] The remote device 18 can be configured to perform one or more designated functions, including the sensing of physiological parameters within the body. Example physiological parameters that can be measured using the remote device 18 can include, but are not limited to, blood pressure, blood or fluid flow, temperature, and strain. Various electrical, chemical and/or magnetic properties may also be sensed within the body via the remote device 18. The specific configuration and function of the remote device 18 will typically vary depending on the particular diagnostic and therapeutic needs of the patient. In one illustrative embodiment, for example, the remote device 18 includes a pressure sensor that can be implanted at a location deep within the body such as the main pulmonary artery 30 or a branch of the main pulmonary artery 30 (e.g., in the right or left pulmonary artery). Alternatively, the remote device 18 can be implanted at other locations within the body, and can be configured to measure other parameters.

In use, the remote device 18 can be used as part of a system to predict decompensation of a heart failure patient or to optimize pacing and/or defibrillation therapy. The remote device 18 can be configured to transmit an acoustic data signal to the pulse generator 12, to the monitor 18, and/or to other medical devices located inside or outside of the body containing one or more physiological parameters sensed at the implantation location. Based on this information, an indication of any abnormalities within the heart 20 can be determined and an appropriate therapy provided to the patient, as necessary.

[0021] The remote device 18 can be tasked either alone or with other implantable devices to provide or regulate various therapies within the body. In certain embodiments, for example, the remote device 18 includes a glucose level sensor that can be used in conjunction with an insulin pump for providing insulin to the patient. In other embodiments, the remote device 18 can comprise a pulmonary sound sensor, a satellite pacing device, or other sensing and/or therapy-delivering device.

[0022] As further shown in Figure 1, the remote device 18 can include an acoustic transducer 38 adapted to generate and receive acoustic waves for communication with, powering, and/or recharging the remote device 18 via an acoustic link. In certain embodiments, the acoustic transducer 38 is an ultrasound transducer having a resonant structure such as a flexible diagram. In other embodiments, however, the transducer may have a different configuration.

The monitor 16 includes multiple acoustic transducer [0023] elements 40, which as is discussed further herein, is configured to transmit and receive acoustic signals for establishing an acoustic link between the monitor 16 and the remote device 18, the pulse generator 12, and/or other medical devices inside or outside of the body. some embodiments, for example, the monitor 16 includes a multielement transducer (MET) array 42 coupled to a transducer housing 44. In the illustrative embodiment of Figure 1, the MET array 42 is a two-dimensional array of ultrasonic transducer elements 40, although other configurations employing multiple transducer elements are also possible. In one alternative embodiment, for example, the MET array 42 comprises a three-dimensional array of transducer elements coupled to a spherically-shaped housing. In another alternative embodiment, the MET array 42 comprises a one-dimensional array of transducer elements.

[0024] The transducer elements 40 may operate at the same frequency, or alternatively, can operate at different frequencies. In one

embodiment, for example, each of the transducer elements 40 are configured to operate at a frequency of between about 20 KHz and about 200 KHz. In some embodiments the transducer elements 40 may each operate at a frequency of about 40 KHz. The transducer elements 40 can be configured to resonate at the same frequency, or can be configured to resonate at different frequencies.

During operation, one or more of the transducer elements 40 can be actuated to produce an acoustic wave 46 that is used to establish an acoustic link between the monitor 16 and the remote device 18 for powering the remote device 18, for recharging the remote device 18, and/or for communicating sensor readings from the remote device 18. In some embodiments, the transducer elements 40 can also be used to establish an acoustic link between the monitor 16 and the pulse generator 12, if desired.

[0026] The phase delay, and in some cases also the amplitude, of the acoustic signals produced by each of the transducer elements 40 can be controlled by the monitor 16 in order to maximize the phase alignment of the acoustic wave 46 received at the remote device 18. The application of phase delays can be accomplished, for example, using a time-reversal technique with a cross-correlation algorithm that estimates the time-delay between signals from neighboring transducer elements, and then applies a time-reversing or phase-shifting of the signals provided to one or more of the transducer elements in order to align the phases of the acoustic signals received at the remote device 18. Such process of determining the cross-correlation of the signals received by the transducer elements and then applying phase delays to the transducer elements can be used to produce a coherent wave convergent at the remote device 18. This coherence of the acoustic wave can be accomplished, for example, by selecting an acoustic signal received at one transducer element for the monitor 16 as a reference signal and then adjusting the phase delays of the other transducer elements based on the reference signal to maximize the

phase alignment of signals from all transducer elements. Alternatively, and in other embodiments, the coherence of the acoustic wave can be accomplished via a moving reference signal by comparing the phase delay for pairs of transducer elements, and then adjusting the phase delays on each of the transducer elements to maximize the phase alignment across all transducer elements.

[0027] In some embodiments, the process of analyzing the cross-correlation of the acoustic signals received on the transducer elements and then retransmitting the acoustic wave 46 with phase shifted compensation signals applied to one or more of the transducer elements can be performed iteratively, allowing the monitor 16 to continually or periodically adjust the phase attributes of the acoustic wave 46 in order to optimize the coherence of the acoustic wave 46 at the remote device 18.

In some embodiments, modulating the acoustic wave 46 can be conducted so as to improve the signal strength of the acoustic wave 46 received at the remote device transducer 38. In acoustic powering or recharging applications, for example, the increased signal strength of the acoustic wave 46 received at the transducer 38 increases the amount of electrical energy generated by the transducer 38 for powering the remote device 18 and/or for recharging a battery within the remote device 18. In communication applications, the increased signal strength of the acoustic wave 46 at the transducer 38 results in more accurate and efficient data transmissions back and forth between the remote device 18 and the monitor 16.

[0029] In the illustrative embodiment of Figure 1, the pulse generator 12 further includes an array 48 of transducer elements 50 for establishing an acoustic link between the pulse generator 12 and the remote device 18. In some embodiments, for example, the pulse generator 12 includes a multi-element array 48 of transducer elements 50 coupled to a can 52 of the pulse generator 12, as shown. In use, the pulse generator 12 can be configured to transmit an acoustic wave

54 for communicating with the remote device 18 or for powering and/or recharging the remote device 18. In some embodiments, for example, the transducer elements 50 can be used to establish an acoustic link between the pulse generator 12 and the remote device 18 for sending an acoustic wake-up signal that prompts the remote device 18 to take one or more sensor readings within the body. When activated, the remote device 18 takes one or more sensor readings and transmits these readings back to the pulse generator 12 via the transducer 38, which can then used by the pulse generator 12 for providing therapy to the patient, if desired. As with the transducer elements 40 for the monitor 16, a time reversal technique may be used to maximize the phase alignment of the acoustic signals received at the remote device 18.

[0030] Figure 2 is a schematic diagram showing another illustrative CRM system 56 for providing wireless transfer of acoustic signals between ultrasound-enabled medical devices. In the illustrative system 56 of Figure 2, the remote device 18 includes an array 60 of multiple transducer elements 62 configured to transmit and receive acoustic signals for establishing an acoustic link between the remote device 18 and the pulse generator 12, the monitor 16, and/or other medical devices in acoustic communication with the remote device 18. In some embodiments, for example, the remote device 18 includes a multiple element transducer (MET) array 60 coupled to a transducer housing 64 of the remote device 18, although other configurations are possible.

[0031] During operation, one or more of the transducer elements 62 can be actuated to produce an acoustic wave 66 that can be received by an acoustic transducer 68 of the pulse generator 12. In some embodiments, and as further shown in Figure 2, the transducer elements 62 can also be actuated to produce an acoustic wave 70 that is received by an acoustic transducer 72 of the monitor 16. The phase delay of the acoustic signals produced by each of the transducer

elements 62 can be controlled by the remote device 18 in order to maximize the phase alignment of the acoustic waves 66,70. For example, the phase delay of the acoustic signals generated by the transducer elements 62 can be controlled in order increase the signal strength of the acoustic waves 66,70 received by the pulse generator 12 and the monitor 16.

[0032] In some embodiments, the remote device 18 is configured to transmit a single acoustic wave that can be received by both the pulse generator 12 and the monitor 16. As with those embodiments in which a separate acoustic wave 66,70 is transmitted to each device 12,16 in communication with the remote device 18, the single acoustic wave generated can be modulated to improve signal coherence at each of the communicating devices 12,16, thereby optimizing the signal strength of the acoustic wave received by each device 12,16.

[0033] Figure 3 is a schematic view showing another illustrative CRM system 74 for providing wireless transfer of acoustic signals between ultrasound-enabled medical devices. In the illustrative system 74 of Figure 3, a pulse generator 12 equipped with a first array 78 of transducer elements 80 is configured to transmit an acoustic wave 82 that can be received by multiple medical devices 18,84,86 implanted within the body. Each implanted medical device 18,84,86 can be equipped with a transducer element 38,88,90 configured to receive, and in some embodiments also transmit, acoustic waves.

In some embodiments, the acoustic wave 82 generated by the transducer elements 80 can be modulated to improve signal coherence across each of the communicating devices 18,84,86. For example, the acoustic wave 82 generated by the pulse generator 12 can be configured to produce a coherent acoustic wave 82 in order to optimize the signal strength of the acoustic wave 82 received by each of the communicating devices 18,84,86. In other embodiments, the acoustic wave 82 generated by the pulse generator 12 can be

configured to optimize the signal strength at one of the implanted medical devices (e.g., the remote sensing device 18) while also permitting communications with one or more of the other implanted medical devices. Other configurations, however, are possible.

[0035] The CRM system 74 further includes a second array 92 of transducer elements 94 configured to transmit one or more acoustic waves 96,97,98 within the body that can be received by one or more of the implanted medical devices 18,84,86. In some embodiments, for example, the second array 92 of transducer elements 94 is configured to direct a first acoustic wave 96 that can be received by the remote device 18, a second acoustic wave 97 that can be received by another device 84 implanted within the body, and a third acoustic wave 98 that can be received by yet another device 86 implanted within the body. In the illustrative embodiment of Figure 3, the second array 92 of transducer elements 94 is coupled to the distal portion 36 of the lead 32. In other embodiments, the transducer array 92 can be coupled to other sections of the lead 32, to other leads coupled to the pulse generator 12, or to other portions of the pulse generator 12. In some embodiments, the transducer array 92 can be coupled to other devices or structure located within the body such as a sensor or therapy delivery device.

[0036] As with other embodiments described herein, the phase delay, and in some cases also the amplitude, of the acoustic signals produced by each of the second array 92 of transducer elements 94 can be controlled in order to modulate the acoustic waves 96,97,98 within the body. In some embodiments, for example, the modulation of the acoustic waves 96,97,98 can be accomplished using a time-reversal technique to improve the signal strength of the waves 96,97,98 received at the transducers 38,88,90 for each device 18,84,86.

[0037] Figure 4 is a block diagram showing several illustrative components of a source device 100 acoustically coupled with a target

device 102. The source device 100, which can comprise a pulse generator or external monitor similar to that described above, for example, with respect to Figure 1, includes a power source 104 for powering the device 100, and a processor/controller 106 for controlling the operation of the device 100 including various hardware and circuitry 107 within the device 100. In those embodiments in which the source device 100 is a pulse generator, for example, the processor/controller 106 can be configured to control the hardware and circuitry 107 in order to deliver electrical therapy stimulus or pacing signals to the patient via a lead or multiple leads.

In the illustrative embodiment of Figure 4, the source device 100 further includes an acoustic transducer 108 for transmitting an acoustic wave 110 between the source device 100 and the target device 102. The acoustic transducer 108 includes multiple transducer elements, each of which can be controlled by the processor/controller 106 to steer, shape, focus, and/or otherwise modulate the acoustic wave 110 to improve signal coherence at an acoustic transducer 112 for the target device 102. In certain embodiments, for example, the processor/controller 106 is configured to modulate the acoustic wave 110 using a time-reversal technique to improve the efficiency of acoustic energy transmitted to the target device 102 for acoustically powering and/or recharging the device 102. In other embodiments, the processor/controller 106 is configured to modulate the acoustic wave 110 using a time-reversal technique to improve the efficiency of wireless communications between the source device 100 and the target device 102. In other embodiments, the processor/controller 106 is configured to modulate the acoustic wave 110 using a time-reversal technique to improve the efficiency of acoustic energy transmitted to the target device 102 for providing therapy to a treatment site within the body.

[0039] In some embodiments, the source device 100 further includes circuitry 114 that permits the acoustic transducer 108 to

operate in both a transmit mode and a receiving mode, allowing the transducer 108 to further receive acoustic signals from the target device 102 and/or other medical devices in communication with the source device 100. In other embodiments, the source device includes separate transducers for transmitting and receiving acoustic signals.

[0040] The target device 102 includes a power source 116 for powering the device 102, and a processor/controller 118 for controlling the operation of the device 102 including various hardware and circuitry 120 within the device 102. In those embodiments in which the target device 102 comprises a remote sensor such as a pressure sensor, for example, the processor/controller 118 can be configured to control the hardware and circuitry 120 to sense pressure readings within the body and then transmit those readings as an acoustic signal via the acoustic transducer 112.

[0041] The acoustic transducer 112 for the target device 102 includes one or more acoustic transducer elements configured to receive the acoustic wave 110 transmitted by the source device 100, and then convert those signals into electrical signals for further processing by the processor/controller 118. In some embodiments, the acoustic transducer 112 comprises a single transducer element adapted to receive the acoustic wave 110. In other embodiments, the acoustic transducer 112 comprises multiple transducer elements and/or an array of transducer elements. In certain embodiments, the target device 102 further includes circuitry 122 that permits the acoustic transducer 112 to operate in both a transmit mode and a receiving mode, allowing the transducer 112 to further transmit acoustic signals to the source device 100 or other medical devices. embodiments, the source device includes separate transducers for transmitting and receiving acoustic signals.

[0042] Figure 5 is a flow chart showing an illustrative method 124 for controlling the wireless transfer of acoustic signals between ultrasound-enabled medical devices. The method 124 begins

generally at block 126 with a source device and target device ready to transmit and receive acoustic signals. The source device and target device may comprise, for example, the source device 100 and target device 102 described above in Figure 4, although other configurations are possible.

[0043] Once configured, the source device may transmit an acoustic initiation signal to the target device (block 128). The acoustic initiation signal may comprise, for example, a series of pulses spaced apart by a predetermined period of time, or a single acoustic pulse having a particular characteristic (e.g., amplitude, frequency, duration, etc.) that can be recognized by the target device as a request to initiate communications with the target device. In certain embodiments, the acoustic initiation signal may comprise a first acoustic pulse followed by a second acoustic pulse spaced apart from the first acoustic pulse by a predetermined period of time (e.g., 1 second). In some embodiments, the acoustic initiation signal can be transmitted to the target device from another medical device located inside or outside of the patient's body. In certain embodiments, the acoustic initiation signal may comprise a signal other than an acoustic signal such as an RF or inductive signal transmitted to the target device from another medical device located inside or outside of the patient's body. In other embodiments, initiation of the target device into a transmission mode of operation can be accomplished via an internal clock or timer signal within the target device.

[0044] Upon receiving the initiation signal transmitted by the source device (130), the target device enters into a transmission mode of operation (block 132). In this mode, the target device acts as a beacon, transmitting a number of outward acoustic signals (block 134). The acoustic signals transmitted by the target device can have a predetermined amplitude and duration, or alternatively, can be pulses representing a unique device identification and/or a measured value. In some embodiments, for example, the target device is configured to

transmit an acoustic pulse train that is used by the source device to uniquely identify the target device from other devices implanted within the body. Once the target device has transmitted one or more acoustic signals (block 134), the target device may then return to a reception mode of operation to receive acoustic signals from the source device (block 136).

[0045] The source device is configured to enter into a reception mode of operation for receiving the acoustic signals transmitted from the target device (block 138). The acoustic signals transmitted from the target device are then received on each element of the multiple element transducer of the source device (block 140). Circuitry within the source device then converts each acoustic signal into corresponding electrical signals.

[0046] The processor/controller for the source device receives the electrical signals for each transducer element and then compares the differences in each signal (block 142). In some embodiments, for example, the processor/controller is configured to compute a phase delay parameter and, in some cases also an amplitude parameter, corresponding to each transducer element. From these computed phase delay and/or amplitude parameters, the processor/controller computes one or more compensation factors to adjust the characteristics of the acoustic signal transmitted from the source device to the target device (block 144). In some embodiments, the processor/controller is configured to compute a phase delay parameter to be applied to one or more of the transducer elements in order to maximize the phase alignment of the acoustic signals received at the acoustic transducer for target device. Computing of the phase delay compensation parameters can be accomplished, for example, using a time-reversal technique with a cross-correlation algorithm that estimates the time delays between signals received on neighboring transducer elements and then applies a phase shifting of the signals provided to one or more of the transducer elements based on these

time-delay estimates. The computed compensation factors to be applied for each transducer element 50 are then stored within a storage memory of the source device (block 146).

[0047] The compensation factors determined for each transducer element can be obtained sequentially or simultaneously. In a sequential approach, the compensations factors can be determined one at a time, requiring multiple transmissions from the target device. In a simultaneous approach, in contrast, the compensation factors can be determined all at once from a single acoustic transmission from the target device. The process of computing phase delay parameters to be applied to the transducer elements can be performed iteratively in some embodiments. For example, the phase delay parameters can be continuously or periodically updated over time, allowing the system to dynamically compensate for any changes in movement of the target and/or source devices (e.g., due to movement from the cardiac or respiratory rhythms or a change in body position).

[0048] Once the compensation factors are computed and stored in memory, the source device enters into a transmission mode of operation (block 148) and controls the transmission of acoustic signals to the target device based at least in part on the computed phase delay and/or amplitude compensation factors (block 150). The adjustments to the transmission parameters can include the use of multiple sets of temporally-dependent or event-dependent adjustments. In some embodiments, for example, the processor/controller can be configured to control the transmission of the acoustic signals over a particular time period or based on the occurrence of a particular event such as the detection of patient movement or a change in body position from an accelerometer or other motion sensing device.

[0049] With the compensation factors applied to the source device transducer elements, the target device then receives the compensated acoustic signals transmitted by the source device (block 152). The process of iteratively updating the phase delay

compensation parameters applied to the transducer elements can be repeated continuously, at predetermined time periods (e.g., once every 5 minutes), or upon the detection of an event (e.g., upon the detection of movement or orientation of the patient).

[0050] Based on these compensated factors, the acoustic signals can be transmitted optimally through a complicated path or between unaligned source and target devices in the presence of organs and other obstructions located within the body. In some embodiments, for example, the processor/controller for the source device may apply reverse or time-shifted delays to one or more of the source device transducer elements to produce a coherent acoustic wave at the target device.

[0051] The compensation factors can be obtained for both programmed and dynamic tracking use scenarios. If the source device and target device are relatively stationary, a single set of compensation factors can be determined, stored in memory, and then applied successively for future transmissions. If, for example, the source device and target device move cyclically (e.g., in response to cardiac or respiratory rhythms), compensation factors at different portions of the cycle can be computed and utilized. If the source device and target device move within a fixed range, compensation factors at the extremes (e.g., towards the outer periphery of the transducer elements of a transducer array) can be determined and used to create a central average. The compensation factors can be obtained on-demand, prior to each signal transfer session, periodically, or according to changes in an auxiliary signal such as a heart rate signal or a respiration rate signal.

[0052] In some embodiments, the processor/controller for the source device can be configured to operate all of the transducer elements simultaneously. In another embodiment, the processor/controller for the source device may determine which

transducer element or elements have a low attenuation in the acoustic path to the target device and operate only those transducer elements.

[0053] The ability to dynamically modulate the acoustic wave by modification of the phase delay and/or amplitude parameters applied to the transducer elements may increase the efficiency in amplitudedependent applications such as energy transfer and energy delivery. For acoustic charging applications, for example, the modified acoustic wave may increase the efficiency of the energy transfer and reduce the potential for interruptions due to cardiac or respiratory rhythm induced movement of the target device. In some cases, the ability to modulate the acoustic wave may increase usability of the source device by reducing or eliminating the need to place the device at a precise location in the patient's body, enabling use of the device in a variety of different positions and orientations. The ability to modulate the acoustic wave can also increase the accuracy in signal-to-noise dependent applications such as during data transmissions and communications by reducing energy loss within the body.

[0054] The modified acoustic wave generated by the source device transducer elements can be utilized to optimize or near-optimize the transfer of acoustic signals to the target device and perform communications, energy delivery, therapy, or other desired functions within the body. In some embodiments, for example, the modified acoustic wave can be used to optimize the wireless transfer of communications back and forth between the target device and the source device. In addition, in some embodiments the modified acoustic wave can be used to acoustically recharge a battery, power capacitor or other such energy source within the target device. In other embodiments, the modified acoustic wave can be utilized by the target device to provide therapy to one or more treatment sites within the In still other embodiments, the acoustic wave produced is configured to create controlled cell and tissue ablation or to induce

beneficial biological responses or effects such as thrombi dissolution or tissue stimulation.

[0055] Figures 6-8 are schematic views showing an illustrative implementation of the method of Figure 5 using an extracorporeal source device 100 attached adjacent to the exterior surface 14 of a patient's body. As shown in a first view in Figure 6, the processor/controller 106 can be configured to transmit an electrical signal 154 on a separate channel 156 of each transducer element, initially producing an outward acoustic wave 158 through the surface 14 and into the patient's body towards the general direction of the target device 102.

[0056] Upon receiving the acoustic wave 158, the target device 102 can be configured to enter into a transmission mode of operation. In this mode, and as further shown in Figure 7, the target device 102 transmits one or more acoustic pulses 160 to the source device 100. In certain embodiments, for example, the target device 102 transmits an acoustic pulse train that can be used to uniquely identify the target device 102 from any other devices implanted within the body.

[0057] The acoustic transducer 108 for the source device 100 is configured to convert the acoustic signals received at each transducer element into a corresponding electrical signal 162. The electrical signals 162 for each channel 156 are fed to the processor/controller 106, which computes phase delay parameters, and in some cases also amplitude parameters, to be applied to one or more of the transducer elements.

[0058] Based at least in part on the computed phase delay and/or amplitude factors, the processor/controller 106 may then apply compensation factors to one or more of the transducer elements during transmission of an acoustic wave towards the target device. As can be further seen in Figure 8, for example, the processor/controller 106 can be configured to apply compensation factors 164 to produce electrical signals 166 for time delaying and/or adjusting the amplitude of the

acoustic signals outputted by one or more of the transducer elements. As indicated generally by arrow 168, these compensated electrical signals 166 produce a coherent acoustic wave at the target device 102 despite a complex path of organs and other obstructions within the body and misalignment between the target device 102 and the source device 100. The compensated acoustic wave 168 transmitted by the source device 100 can then be used by the target device 102 for charging a rechargeable battery or power capacitor, to provide a communications link between the target device and the source device 100, for delivering therapy to targeted locations of the body, and/or for performing some other desired function within the body.

[0059] Various modifications and additions can be made to the exemplary embodiments discussed without departing from the scope of the present invention. For example, while the embodiments described above refer to particular features, the scope of this invention also includes embodiments having different combinations of features and embodiments that do not include all of the described features. Accordingly, the scope of the present invention is intended to embrace all such alternatives, modifications, and variations as fall within the scope of the claims, together with all equivalents thereof.

CLAIMS

What is claimed is:

1. A method for controlling the wireless transfer of acoustic signals between ultrasound-enabled medical devices, the method comprising:

- providing a source device equipped with a plurality of acoustic transducer elements configured to transmit and receive an acoustic signal;
- providing a target device equipped with at least one acoustic transducer element configured to receive acoustic signals transmitted from the source device and transmit acoustic signals to the source device;
- transmitting one or more acoustic signals from the target device;
- receiving the one or more acoustic signals from the target device on the transducer elements of the source device;
- comparing the acoustic signals received by the source device transducer elements and computing a phase-delay parameter for each transducer element; and
- adjusting one or more transmission parameters of the source device to increase the signal coherence at the target device.
- 2. The method of claim 1, wherein comparing the acoustic signals received by the source device transducer elements further includes computing an amplitude parameter for one or more transducer elements.

3. The method of claim 1, wherein adjusting the one or more transmission parameters at the source device to increase signal coherence at the target device includes computing compensation factors for adjusting one or more transducer elements of the source device.

- 4. The method of claim 3, wherein the compensation factors include phase delay compensation factors.
- 5. The method of claim 3, wherein the compensation factors include amplitude compensation factors.
- 6. The method of claim 3, wherein the compensation factors for adjusting the transducer elements are computed simultaneously based on a single acoustic signal received from the target device.
- 7. The method of claim 3, wherein the compensation factors for adjusting the transducer elements are computed sequentially based on multiple acoustic signals received from the target device.
- 8. The method of claim 1, wherein adjusting one or more transmission parameters of the source device is accomplished using multiple sets of temporally-dependent adjustments.
- 9. The method of claim 1, wherein adjusting one or more transmission parameters of the source device is accomplished using multiple sets of event-dependent adjustments.
- 10. The method of claim 1, further comprising entering the target device into a transmission mode of operation via an acoustic initiation signal from the source device.
- 11. The method of claim 1, further comprising entering the target device into a transmission mode of operation via an acoustic or

electromagnetic initiation signal from a device other than the source device.

- 12. The method of claim 1, further comprising entering the target device into a transmission mode of operation via an internal clock or timer signal within the target device.
- 13. A method for controlling the wireless transfer of acoustic signals between ultrasound-enabled medical devices, the method comprising:
 - providing a source device including a plurality of acoustic transducer elements configured to transmit and receive an acoustic signal;
 - providing a target device equipped with at least one acoustic transducer configured to receive acoustic signals transmitted from the source device and to transmit acoustic signals to the source device;
 - entering the target device into a transmission mode of operation and transmitting one or more acoustic signals using the target device;
 - entering the source device into a reception mode of operation and receiving the one or more acoustic signals from the target device using the plurality of transducer elements of the source device;
 - comparing the acoustic signals received by the source device transducer elements and computing a phase-delay parameter for each transducer element; and
 - adjusting one or more transmission parameters of the source device to increase the signal coherence at the target device, wherein adjusting the one or more

transmission parameters includes applying a compensation factor to one or more of the source device transducer elements.

- 14. A system for controlling the wireless transfer of acoustic signals between ultrasound-enabled medical devices, the system comprising:
 - a source device including a plurality of acoustic transducer elements;
 - a target device including an acoustic transducer;
 - a controller configured to determine adjustments to one or more transmission parameters of the source device to increase signal coherence at the target device; and
 - wherein the controller is configured to adjust the one or more transmission parameters based at least in part on phase delay differences from acoustic signals transmitted by the target device and received at one or more of the transducer elements of the source device.
- 15. The system of claim 14, wherein both the source device and the target device are implantable medical devices.
- 16. The system of claim 14, wherein either the source device or the target device is an implantable medical device.
- 17. The system of claim 14, wherein the plurality of acoustic transducer elements includes an array of ultrasonic transducer elements.

18. The system of claim 14, wherein the plurality of acoustic transducer elements includes multiple ultrasonic transducer devices.

- 19. The system of claim 14, wherein the acoustic transducer of the target device is a single acoustic transducer.
- 20. The system of claim 14, wherein the controller includes one or more sets of compensation factors for adjusting the transmission of acoustic signals from the source device.

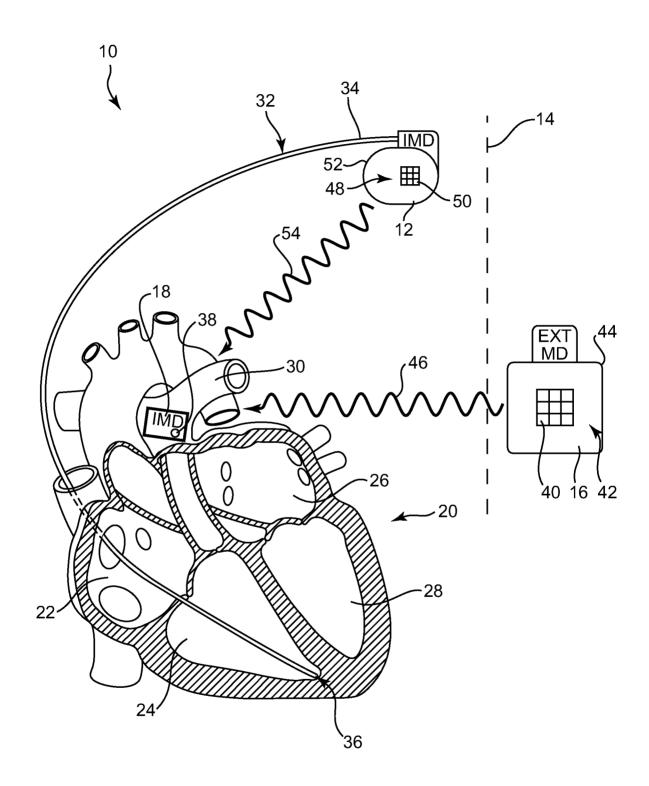


Fig. 1

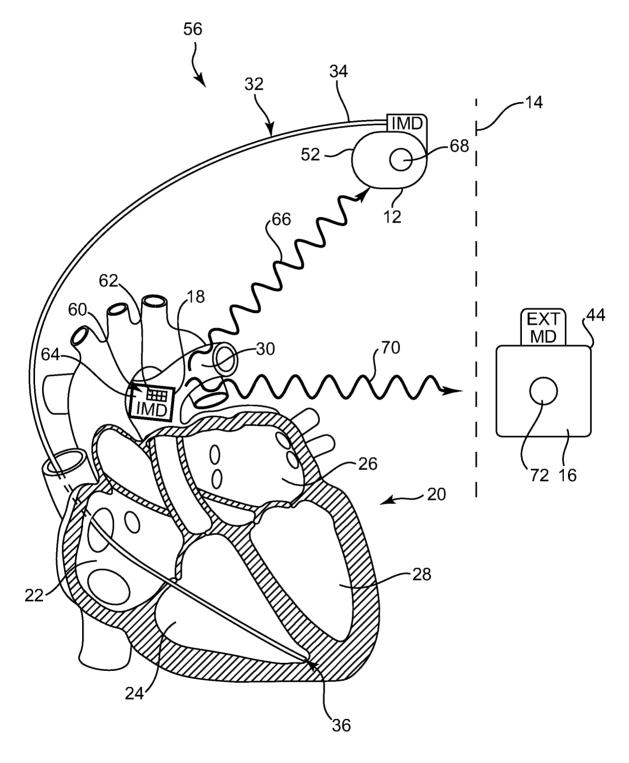
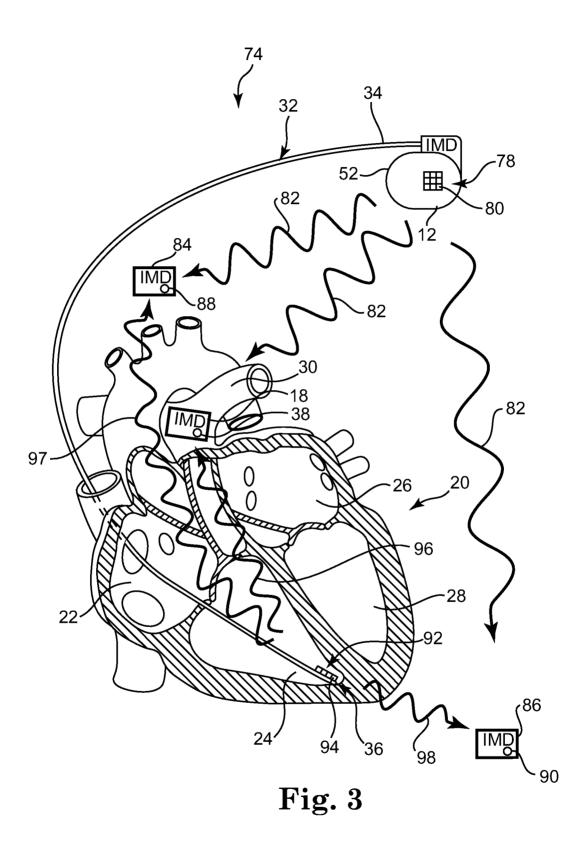


Fig. 2



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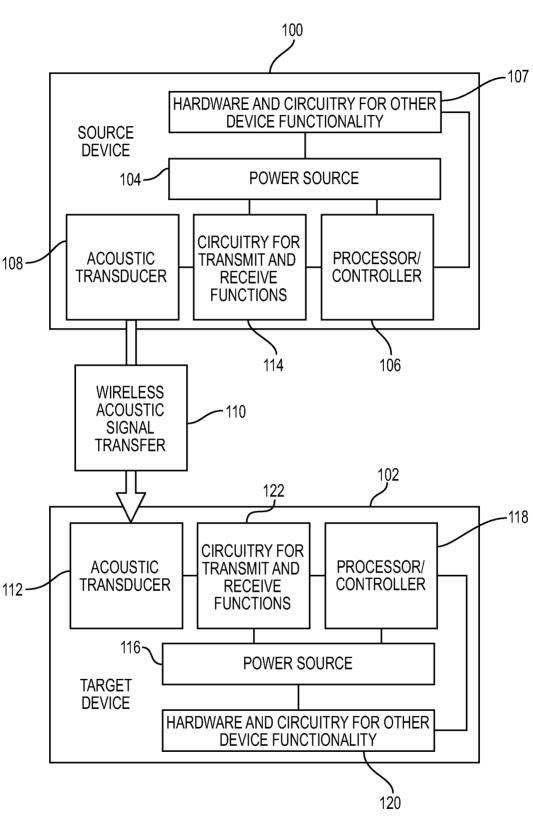


Fig. 4

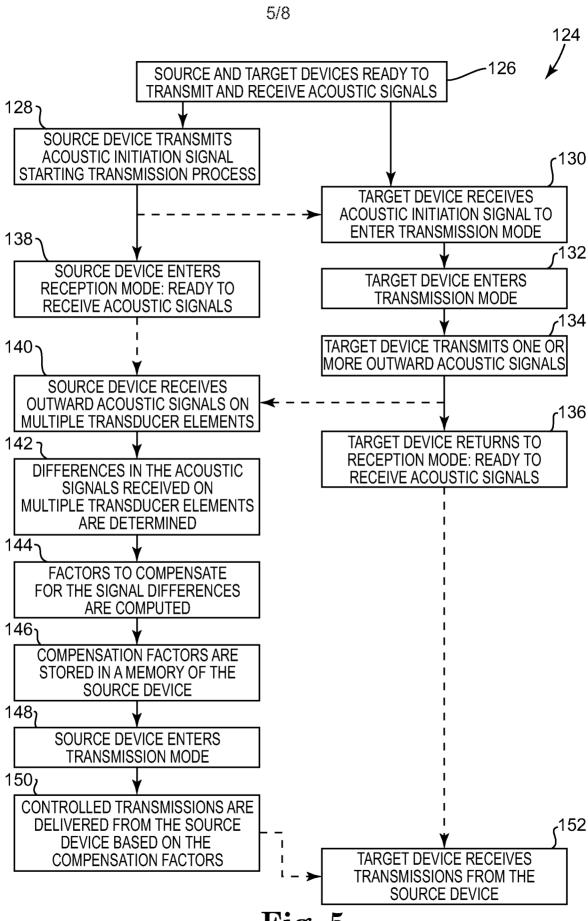
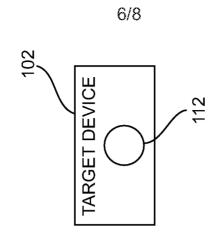
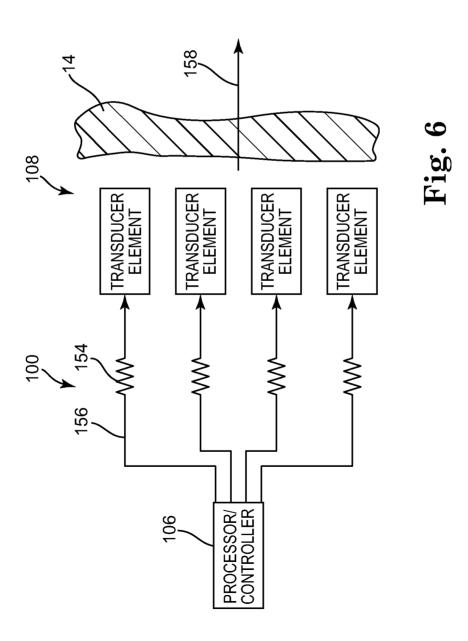
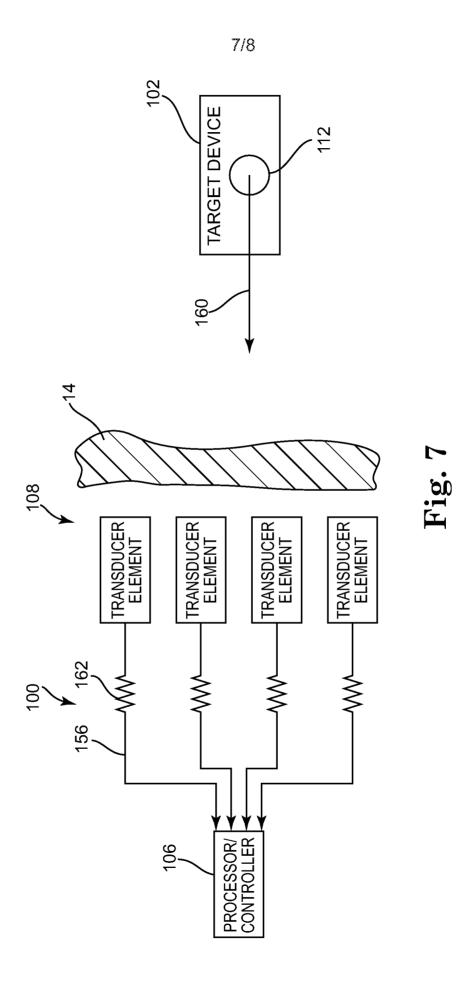
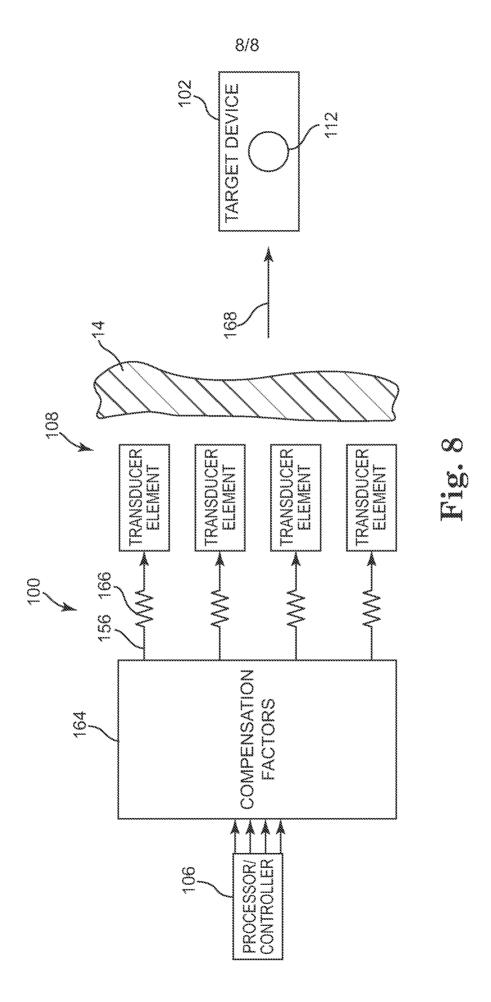


Fig. 5









INTERNATIONAL SEARCH REPORT

International application No PCT/US2009/033436

Α.	CLASS	FICATION	OF S	UBJECT	MATTER
I١	IV.	A61N1/	′372		

According to International Patent Classification (IPC) or to both national classification and IPC

B. FIELDS SEARCHED

Minimum documentation searched (classification system followed by classification symbols) A61N-A61B

Documentation searched other than minimum documentation to the extent that such documents are included in the fields searched

Electronic data base consulted during the international search (name of data base and, where practical, search terms used)

EPO-Internal

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X Further documents are listed in the continuation of Box C.	See patent family annex.
* Special categories of cited documents: *A* document defining the general state of the art which is not considered to be of particular relevance *E* earlier document but published on or after the international filling date *L* document which may throw doubts on priority claim(s) or which is cited to establish the publication date of another citation or other special reason (as specified) *O* document referring to an oral disclosure, use, exhibition or other means *P* document published prior to the international filling date but later than the priority date claimed	 "T" later document published after the international filing date or priority date and not in conflict with the application but cited to understand the principle or theory underlying the invention "X" document of particular relevance; the claimed invention cannot be considered novel or cannot be considered to involve an inventive step when the document is taken alone "Y" document of particular relevance; the claimed invention cannot be considered to involve an inventive step when the document is combined with one or more other such documents, such combined with one or more other such documents, such combination being obvious to a person skilled in the art. "&" document member of the same patent family
Date of the actual completion of the international search 13 May 2009	Date of mailing of the international search report 27/05/2009
Name and mailing address of the ISA/ European Patent Office, P.B. 5818 Patentlaan 2 NL – 2280 HV Rijswijk Tel. (+31-70) 340-2040, Fax: (+31-70) 340-3016	Authorized officer Montes, Pau

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INTERNATIONAL SEARCH REPORT

International application No PCT/US2009/033436

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