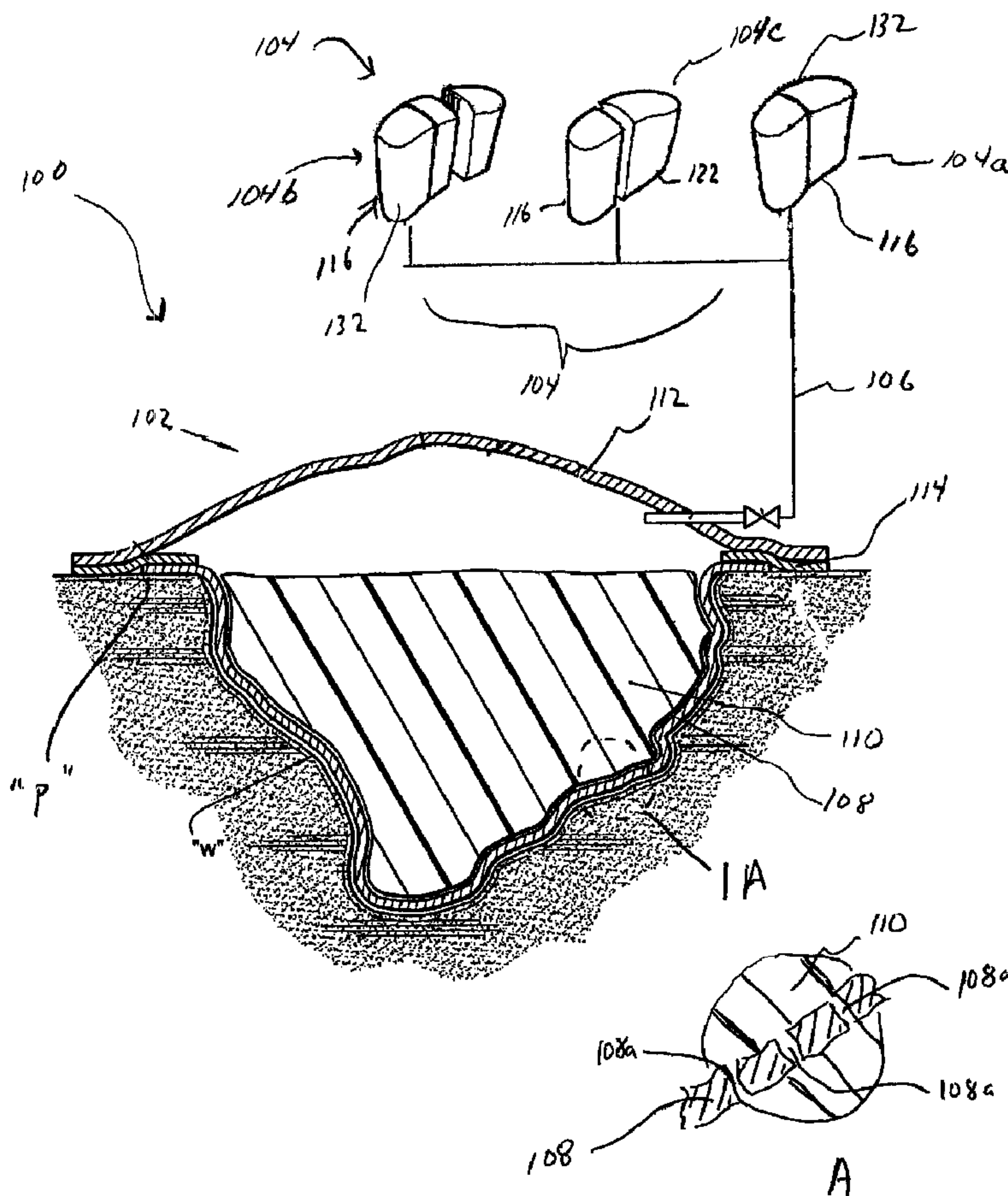




(22) Date de dépôt/Filing Date: 2007/09/27
(41) Mise à la disp. pub./Open to Public Insp.: 2008/03/28
(30) Priorité/Priority: 2006/09/28 (US60/847,886)

(51) Cl.Int./Int.Cl. *A61M 27/00* (2006.01),
A61M 1/00 (2006.01)
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(54) Titre : SYSTEME PORTATIF POUR THERAPIE DE BLESSURES
(54) Title: PORTABLE WOUND THERAPY SYSTEM



(57) **Abrégé/Abstract:**

A portable system for subatmospheric pressure therapy in connection with healing a surgical wound, includes a wound dressing dimensioned for positioning relative to a wound bed of a subject, a portable subatmospheric pressure mechanism dimensioned to

(57) **Abrégé(suite)/Abstract(continued):**

be carried or worn by the subject and a container for collecting exudates from the wound bed removed under the subatmospheric pressure supplied by the subatmospheric pressure mechanism. The portable subatmospheric pressure mechanism includes a housing, a subatmospheric pressure source disposed within the housing and in fluid communication with the wound dressing to supply subatmospheric pressure to the wound dressing and a power source mounted to or within the housing for supplying power to actuate the subatmospheric pressure source.

ABSTRACT

A portable system for subatmospheric pressure therapy in connection with healing a surgical wound, includes a wound dressing dimensioned for positioning relative to a wound bed of a subject, a portable subatmospheric pressure mechanism dimensioned to be carried or worn by the subject and a container for collecting exudates from the wound bed removed under the subatmospheric pressure supplied by the subatmospheric pressure mechanism. The portable subatmospheric pressure mechanism includes a housing, a subatmospheric pressure source disposed within the housing and in fluid communication with the wound dressing to supply subatmospheric pressure to the wound dressing and a power source mounted to or within the housing for supplying power to actuate the subatmospheric pressure source.

PORTABLE WOUND THERAPY SYSTEM

CROSS REFERENCE TO RELATED APPLICATION(S)

The present application claims priority to, and the benefit of U.S. Provisional Patent Application No. 60/847886, filed in the U.S. Patent and Trademark Office on September 28, 2006.

BACKGROUND

1. Technical Field

The present disclosure relates to treating an open wound, and, more specifically, relates to a portable wound therapy system including a wound dressing in conjunction with subatmospheric pressure to promote healing of the open wound.

2. Description of Related Art

Wound closure involves the migration of epithelial and subcutaneous tissue adjacent the wound towards the center and away from the base of the wound until the wound closes. Unfortunately, closure is difficult with large wounds, chronic wounds or wounds that have become infected. In such wounds, a zone of stasis (i.e. an area in which localized swelling of tissue restricts the flow of blood to the tissues) forms near the surface of the wound. Without sufficient blood flow, the epithelial and subcutaneous tissues surrounding the wound not only receive diminished oxygen and nutrients, but, are also less able to successfully fight microbial infection and, thus, are less able to close the wound naturally. Such wounds have presented difficulties to medical personnel for many years.

Negative pressure therapy also known as suction or vacuum therapy has been used for many years in treating and healing wounds. A variety of negative pressure devices have been developed to drain excess wound fluids, i.e., exudates, from the wound to protect the wound and, consequently, improve healing. Various wound dressings have been employed with the negative pressure devices to isolate the wound and maintain the subatmospheric environment.

SUMMARY

Accordingly, a portable system for subatmospheric pressure therapy in connection with healing a surgical or chronic wound, includes a wound dressing dimensioned for positioning relative to a wound bed of a subject, a portable subatmospheric pressure mechanism dimensioned to be carried or worn by the subject and a container for collecting exudates from the wound bed removed under the subatmospheric pressure supplied by the subatmospheric pressure mechanism. The portable subatmospheric pressure mechanism includes a housing, a subatmospheric pressure source disposed within the housing and in fluid communication with the wound dressing to supply subatmospheric pressure to the wound dressing and a power source mounted to or within the housing for supplying power to actuate the subatmospheric pressure source. The subatmospheric pressure source includes a pump member. The pump member is selected from the group consisting of a diaphragm pump, a double diaphragm pump, a bellows pump and a peristaltic pump.

An actuator for activating the pump member may also be provided. The actuator may be mounted to the housing. The actuator may be selected from the group consisting of AC motors, DC motors, voice coil actuators and solenoids. The power

source may include disposable batteries or rechargeable batteries and may be releasably mounted to the housing. The power source may be reused with new components of the subatmospheric pressure mechanism.

The container may be mounted to or within the housing. The container may be relatively flexible. Alternatively, the flexible container may be remote from the housing and worn by the patient. The flexible container includes at least one collection path or a plurality of collection paths defined therewithin for containing the exudates. The plurality of collection paths may define a serpentine or parallel fluid path arrangement.

The subatmospheric pressure mechanism may be discarded after a single period of use. Alternatively, some of the components of the subatmospheric pressure mechanism may be reused.

The wound dressing may include a wound contact member for positioning against the wound bed, a wound packing member and a wound covering to encompass a perimeter of the wound bed. The wound contact member may include a porous section to permit passage of exudates. The wound contact member may be substantially non-adherent to the wound bed. The wound packing member may include a plurality of fibers or filaments in a tow arrangement. The wound covering may be adapted to permit passage of moisture.

BRIEF DESCRIPTION OF THE DRAWINGS

Various embodiments of the wound dressing system of the present disclosure are described herein with reference to the drawings wherein:

FIG. 1 is a side view in partial cross-section of the portable wound therapy mechanism of the present disclosure illustrating the wound dressing and the subatmospheric pressure mechanism;

FIG. 1A is an enlarged view of the area of detail identified in **FIG. 1**;

FIG. 1 B is a view of an embodiment of a packing member of the wound dressing of **FIG. 1**;

FIG. 2 is a schematic view illustrating the components of the subatmospheric pressure mechanism;

FIG. 3A is a view of a carrier support apparatus for supporting components of the subatmospheric pressure mechanism;

FIG. 3B is a view of an alternate carrier support apparatus;

FIG. 4 is a view of another alternate carrier support apparatus;

FIGS. 5A-5C are views of alternate embodiments of the portable wound therapy system illustrating the wound dressing and a flexible exudates container for collecting exudates;

FIG. 6 is a top plan view of the flexible exudates container of the embodiments of **FIGS. 5A-5C**;

FIG. 7 is a cross-sectional view of the flexible exudates container taken along the lines **7-7** of **FIG. 6**;

FIG. 8 is a top plan view of an alternate arrangement of the flexible exudates container incorporating a substantially parallel fluid path; and

FIG. 9 is a view illustrating one methodology for mounting the flexible exudates container to the subject.

DESCRIPTION OF THE PREFERRED EMBODIMENTS

The wound therapy system of the present disclosure promotes healing of a wound via the use of a wound dressing and a portable subatmospheric pressure mechanism. The wound therapy system is entirely portable, i.e., it may be worn or carried by the subject such that the subject may be completely ambulatory during the therapy period. The wound therapy system including the subatmospheric pressure mechanism and components thereof may be entirely disposable after a predetermined period of use or may be individually disposable whereby some of the components are reused for a subsequent therapy application. Generally, the portable subatmospheric pressure mechanism applies subatmospheric pressure to the wound to effectively remove wound fluids or exudates captured by the composite wound dressing, and, to increase blood flow to the wound bed and enhance cellular stimulation of epithelial and subcutaneous tissue.

The wound therapy system of the present disclosure promotes healing of a wound in conjunction with subatmospheric negative pressure therapy. The system may

incorporate a variety of wound dressings and subatmospheric pressure sources and pumps.

Referring now to **FIG. 1**, several embodiments of the wound therapy system **100** of the present disclosure are illustrated. Wound therapy system **100** includes composite wound dressing **102** and subatmospheric pressure mechanism **104** in fluid communication with the wound dressing **102** through conduit, identified schematically as reference numeral **106**. In **FIG. 1**, three alternate subatmospheric pressure mechanisms **104a**, **104b**, **104c** are shown. Subatmospheric pressure mechanisms **104a**, **104b**, **104c** share similar components as will be appreciated. Any of the subatmospheric pressure mechanisms **104a**, **104b**, **104c** are contemplated for use with wound dressing **102**.

Wound dressing **102** may include several components, namely, wound contact layer or member **108**, a wound packing member or filler **110** supported by the contact member **108** and outer layer or cover member **112**. Wound contact member **108** is adapted to substantially conform to the topography of a wound bed "w". Wound contact member **108** is substantially porous to permit exudates to pass from the wound bed "w" through the wound contact member **108**. The porosity of contact member **108** may be adjusted by varying the size of the apertures or perforations both in diameter or size and in distribution about the contact member **108**. Thus, fluid flow from the wound may be optimized and adherence of the contact member **108** to the wound bed may be minimized. Wound contact member **108** may also be non-adherent. This configuration allows fluid and exudates to flow uninhibited through wound contact member **108** with minimal "sticking" of wound contact member **108** to the wound bed "w" while maintaining proper wound moisture balance. **FIG. 1A** illustrates contact member **108**

with pores 108a. The pore 108a may be equal in size or diameter or have varying or random sizes and dimensions.

The passage of wound exudates through the wound contact member 108 is preferably unidirectional such that wound exudates do not flow back to the wound bed "w". This unidirectional flow feature could be in the form of directional apertures imparted into the material layer, a lamination of materials of different fluid transfer or wicking capability or a specific material selection that encourages directional exudates flow. However, a bidirectional layer for the purposes of supplying medicine or anti-infectives to the wound bed "w" is also envisioned and will be described hereinafter.

In addition, agents such as hydrogels and medicaments could be bonded or coated to the contact member **108** to reduce bioburden in the wound, promote healing, increase blood flow to the wound bed and reduce pain associated with dressing changes or removal. Medicaments include, for example, antimicrobial agents, growth factors, antibiotics, analgesics, nitric oxide debridement agents, oxygen enrichment and the like. Furthermore, when an analgesic is used, the analgesic could include a mechanism that would allow the release of that agent prior to dressing removal or change.

Contact member **108** may be constructed from a variety of different materials. These may include but are not limited to synthetic non absorbable polymer fibers such as carbonized polymers, polyethylene (PE), polypropylene (PP), polytetrafluoroethylene (PTFE), Nylon, arimids, Kevlar, polyethylene terephthalate (PET) or natural fibers such as cellulose. It is envisioned that contact member **108** may be transparent to allow improved visual capacity and a better view of wound bed "w". Moreover, contact member **108** may be constructed of a fabric which could be woven,

nonwoven (including meltblown), knitted or composite structures such as spun bonded fabrics. Exemplary materials used as contact member **108** are sold under the trademark EXCILON™ or XEROFLOW™ both by Kendall Corp, a division of TycoHealthcare.

Wound packing member **110** of wound dressing **102** is intended to absorb and transfer wound fluid and exudates. Exemplary absorbent materials include foams, nonwoven composite fabrics, hydrogels, cellulosic fabrics, super absorbent polymers, and combinations thereof. Typically, wound packing member **110** can contain or absorb up to about **100** cubic centimeters (cc) or more of wound fluid. Preferably, the absorbent material includes the antimicrobial dressing sold under the trademark KERLIX® AMD by Kendall Corp., a division of TycoHealthcare. In one preferred embodiment, packing member **110** could be preformed or shaped to conform to varying shapes of the wound bed. Those skilled in the art will recognize that packing member **110** can be formed in any suitable shape. Packing member **110** may include multiple layers. In another performed embodiment, the packing member **110** may be constructed in layers of varying absorbent materials to assist in directional flow or exudates away from the wound.

Additionally, with reference to FIG. 1B, the packing member **110** may include hydrophobic materials such as continuous synthetic fibers intended to transfer wound fluids under negative pressure. The synthetic fibers may be constructed from polymeric materials such as polypropylene, polyethylene, polyester and other like polymers. The continuous fibers may be arranged in bundles or multiple fibers to help facilitate loft or form to the wound packing member **110**, e.g., in a tow arrangement depicted in FIG. 1B. Further, the fiber bundles may be bonded at given lengths using straps or some form of adhesive, into a fused zone 110b. The fused zone 110b may be an

area to cut the fiber bundle to a selected length to adapt the wound packing member 110 optimally to various wound sizes.

Alternatively, wound packing member **110** could be hydrophobic/non-absorbent materials to minimize wound fluids near the wound. Examples of such materials may be fibers in a tow arrangement, felts or foam composed of PTFE, PE, PET or hydrophilic materials treated with silicon or PTFE solution.

Additionally, absorbent or non-absorbent packing member **110** could be treated with medicaments. Medicaments include, for example, an anti-infective agent such as an antiseptic or other suitable antimicrobial or combination of antimicrobials, polyhexamethylene biguanide (hereinafter, "PHMB"), antibiotics, analgesics, healing factors such as vitamins, growth factors, nutrients and the like, as well as a flushing agent such as isotonic saline solution.

In the alternative, absorbent or non-absorbent packing member **110** may include a bead arrangement as disclosed in commonly assigned U.S. Patent Publication No. 2007/0185463, the entire contents of which is incorporated herein by reference. The beads disclosed in the '921 application are preferably substantially rigid so as to maintain their shapes for at least a predetermined period of time during healing. The beads when arranged within the wound bed "w" define spaces or passages therebetween to permit wound exudates to pass through the passages. The sizes of the beads may vary, but they should be sized to achieve the proper pore size through the bead arrangement to facilitate cell proliferation and allow fluid and air to be evacuated from the wound. A porosity in the range of 10-1000 μ m has been found beneficial in stimulating cell proliferation and in

allowing fluid and air to be evacuated from the wound. The beads may work in conjunction with contact member **108** to conform to the wound bed “w” while allowing drainage of wound exudates and release of air from the wound bed “w” without clogging. As the negative pressure is applied, the beads will move and readjust their respective positions to prevent painful ingrowth that can occur with current foam dressing designs.

Referring again to **FIG. 1**, outer member or wound covering **112** encompasses the perimeter of the wound dressing **100** to surround wound bed “w” and to provide a liquid-tight seal around the perimeter “p” of the wound bed “w”. For instance, the sealing mechanism may be any adhesive bonded to a layer that surrounds the wound bed “w”. The adhesive must provide acceptable adhesion to the tissue surrounding the wound bed “w”, e.g., the periwound area, and be acceptable for use on the skin without contact deterioration (e.g., the adhesive should preferably be non-irritating and non-sensitizing). The adhesive may be permeable or semi permeable to permit the contacted skin to breathe and transmit moisture. Additionally, the adhesive could be activated or de-activated by an external stimulus such as heat or a given fluid solution or chemical reaction. Adhesives include, for example, medical grade acrylics like the adhesive used with CURAFOAM ISLAND™ dressing of TycoHealthcare Group, LP or any silicone or rubber based medical adhesives that are skin friendly and non irritating. Wound covering member **112** may be provided with an adhesive backing and/or alternatively, an adhesive may be applied to the wound covering 112 and/or skin during the procedure. As a further alternative, an annular shape adhesive member **114** may be interposed between the periphery of wound covering 112 and overlapping the periphery of contact member **108** to secure the wound covering 112 about the wound “w”.

Wound covering 112 is typically a flexible material, e.g., resilient or elastomeric, that seals the top of wound dressing 102 to prevent passage of liquids or contamination to and from the wound dressing 102. Exemplary flexible materials include the semipermeable transparent dressing manufactured under the trademark Polyskin II[®] by Kendall Corp, a division of Tyco Healthcare Group LP. Polyskin II[®] is a transparent semi permeable material which permits passage of moisture or water vapors from the wound site through the dressing 102, while providing a barrier to microbes and fluid containment. Alternative films could be manufactured from polyurethanes, breathable polyolefins, copolyesters, or laminates of these materials. The transparency of wound covering 112 permits a visual review of the status of the wound dressing 102 and the saturation level of the packing member 110. As an alternative, outer covering member 112 may be impermeable to moisture vapors.

Outer suitable wound dressing are disclosed in commonly assigned U.S. Patent Publication Nos. 2007/0078366, 2007/0066946 and 2007/0055209, the entire contents of each disclosure being incorporated herein by reference.

Referring now to the schematic diagram of **FIG. 2**, in conjunction with **FIG. 1**, subatmospheric pressure mechanism 104 will be discussed. Subatmospheric pressure mechanism 104 includes housing 116, vacuum source or pump 118 disposed within the housing 116, actuator or motor 120 disposed with the housing 116a for activating the vacuum source 118 and power source 122 mounted relative to the housing 114. Vacuum source or pump 118 may be any miniature pump or micropump that is biocompatible and adapted to maintain or draw adequate and therapeutic vacuum levels. Preferably, the vacuum level to be achieved is in a range between about 75 mmHg and

about **125** mmHg. Vacuum source or pump **118** may be a pump of the diaphragmatic, peristaltic or bellows type or the like, in which the moving part(s) draw exudates out of the wound bed “w” into the wound dressing **102** by creating areas or zones of decreased pressure e.g., vacuum zones with the wound dressing **100**. This area of decreased pressure preferably communicates with the wound bed “w” to facilitate removal of the fluids therefrom and into the absorbent or non-absorbent packing member **110**. Vacuum source or pump **118** is actuated by actuator **120** which may be any means known by those skilled in the art, including, for example, AC motors, DC motors, voice coil actuators, solenoids, etc. Actuator **120** may be incorporated within pump **118**.

Power source **122** may be disposed within housing **116** or separately mountable to the housing **116**. A suitable power source **122** includes alkaline batteries, wet cell batteries, dry cell batteries, nickel cadmium batteries, solar generated means, lithium batteries, NiMH batteries (nickel metal hydride) each of which may be of the disposable or rechargeable variety.

Additional components of subatmospheric pressure mechanism may include pressure sensor **124** to monitor pressure adjacent the vacuum source or pump **118** or selected locations displaced from the pump **118**, and regulation or control means **126**. The control means **126** may incorporate a motor controller/driver **128** including processing and drive circuitry to control or vary the drive voltage to the motor of the vacuum source or pump **118** responsive to the pressure sensed by the pressure sensor **124**. The output of the motor of the vacuum source **118** may be increased or decreased, or initiated or discontinued, as controlled by control means **126**. Pressure sensor **124**

would also provide information to assist in detecting a leak in the wound therapy system **100** if the optimal subatmospheric pressure is not achieved. Regulation or control means **126** may also have an alarm such as a visual, audio or tactile sensory alarm (e.g., vibratory etc.) to indicate to the user when specific conditions have been met (e.g., the desired vacuum level or loss of vacuum). Pressure sensor **124** may be replaced or supplemented with any other type of sensor or detector for measuring or detecting a characteristic or condition of the wound bed “w”. Additional sensors contemplated include thermal sensors, bacterial sensors, oxygen sensors, moisture sensors, etc. which will provide the clinician with additional diagnostic information.

Referring again to **FIG. 1**, wound therapy system **100** further includes collection canister **132** which collects the exudates removed from the wound “w” during therapy through tubing **106**. Collection canister **132** is preferably associated with housing **116** and may be incorporated within the housing **116** or releasably connected to the housing **116** by conventional means. Collection canister **132** is substantially rigid and defines an internal chamber in fluid communication with tubing **106**. As an alternative, the collection canister **132** may include a flexible unit contained within housing **116** and removable to facilitate disposal of wound fluids.

In the subatmospheric pressure mechanism **104** of **FIG. 1**, vacuum source or pump **118**, motor **120**, pressure sensor **124** and control means **126** are incorporated into housing **116**. Pressure sensor **124** may also be displaced from the housing of the micropump **118**, e.g., adjacent packing member **110** at a location displaced from housing **120**, and connected to the control means **126** through an electrical connection. Power

source **122** may be incorporated within housing **116** or may be releasably connected to the housing **116** through conventional means.

In the embodiment of subatmospheric pressure mechanism **104a**, the subatmospheric mechanism **104a** is intended for a single use application, i.e., the subatmospheric mechanism **104a** is disposed after a predetermined period of time. Such period of time may vary from about one day to about seven days or more. One application contemplated is a three-day time period. Thus, after three days of therapy, the entire subatmospheric mechanism **104a** including the components (vacuum source or pump **118**, actuator or motor **120**, power source **122**, pressure sensor **124** and control means **126**) as well as wound dressing **102**, collection canister **132** and tubing **106** are disposed. In the embodiment of subatmospheric mechanism **104b**, all of the components (vacuum source or pump **118**, actuator or motor **120**, pressure sensor **124**, control means **126** and collection canister **132**) are disposed after the predetermined period of time, e.g., from about one day to about seven days, with the exception of power source **122**. In this regard, power source **122** has a greater life capacity, e.g., a duration of about twenty to about forty days, or more about **30** days. Thus, power source **122** may be releasably mounted to housing as shown in **FIG. 1**, and reconnected to the housing **116** for a subsequent application with the new components. Any means for releasably mounting power source **122** to housing may be appreciated by one skilled in the art. Power source **122** may be rechargeable.

In the embodiment of subatmospheric pressure mechanism **104c**, the electrical components will have a greater life expectancy, e.g., between about twenty to

about forty day, more about thirty days. Thus, these components may be reused for a subsequent application after collection canister **132**, wound dressing **102** and tubing **106** are discarded.

With reference now to **FIG. 3A**, there is illustrated a body support bag **134** for supporting at least the subatmospheric pressure mechanism **104** and at least canister **132**. As discussed, the wound therapy system **100** of the present disclosure is adapted for mounting to the body of the patient to be a self contained portal unit. In this regard, the subatmospheric pump mechanism and canister may be at least partially carried or supported by the body support bag **134**. The body support bag **134** generally includes a pouch **136** and at least one strap **138**, preferably two straps, for securing the pouch **136** to the body of the patient. The body support bag **134** is intended to receive and store at least subatmospheric pump mechanism **104** and collection canister **132**. The body support bag **134** may be worn about the waist of the patient such as with a belt loop. This is desirable in that it may reduce the length of tubing needed depending on the location of the wound. In addition, the pouch **136** may be located adjacent the abdomen of the patient which may present a significantly enhanced ability to conceal the system. Tubing **106** may be secured to the body with tape, straps, or the like, or, optionally, may be unsecured and disposed beneath the patient's clothing. Thus, the body support bag **134** permits the patient to move without restrictions or limitations, and provides an entirely portable capability to the patient during wound drainage and healing.

FIG. 3B illustrates an alternate embodiment of the body support bag. In accordance with this embodiment, the body support bag **140** is adapted for mounting to

the shoulder of the patient and has a pouch **142**. In other respects, the body support bag **140** functions in a similar manner to the body support bag of **FIG. 3**.

FIG. 4 illustrates an arrangement where the body support bags **134, 140** are eliminated. In this arrangement, a belt **144** is connected to housing **114** through conventional means such as, e.g., a slide clasp, to permit the housing **114** to slide relative to the belt **144**, or, alternatively, the belt **144** may be directly fixed to the housing **114**. Multiple belt arrangements are also envisioned.

In use, wound dressing is placed adjacent the wound bed “w” as shown in **FIG. 1**. Subatmospheric pressure mechanism **104** is then activated creating a reduced pressure state within wound dressing **102**. As the pumping progresses, exudates are collected and directed to collection canister **132**. When vacuum source or pump **118** is activated and set at a specific set point, the pump **118** will begin to draw pressure until it achieves the set point. The vacuum reading at the pump will stay at this level until the set point is changed, the pump is turned off, or there is a major leak in the system that overcomes the pumps ability to continue to achieve this level. Subatmospheric pressure therapy may be continuous or intermittent.

FIGS. 5A-5C illustrate alternative embodiments of the wound therapy system **200** of the present disclosure. In accordance with these embodiments, collection container **202** is removed from housing **204** and is disposed in line between wound dressing **206** and subatmospheric pressure mechanism **208**. Various containers **202** are contemplated. In one embodiment, container **202** is relatively flexible and expandable, and defines an internal chamber for collecting the exudates. Thus, as exudates are

received within container **202**, the container **202** expands to accommodate the volume of exudates. Container **202** may include multiple chambers. In one embodiment shown in **FIGS. 5A-5C** and **FIGS. 6-7**, container **202** includes multiple channels or collection paths **210** in fluid communication with each other. Channels **210** may be arranged in side by side relation as shown to thereby define a general sinusoidal arrangement.

Container **202** may include super absorbent materials within the internal chamber or collection paths **210** such as superabsorbent polymers or gels, i.e., a polymer having the capacity to absorb liquid to an amount several times larger than its own weight.

Antimicrobials to control bacteria growth may also be added to container **202**. The use of such polymers will significantly enhance the absorbent capability and exudates volume contained within the container **202**. Container **202** also may include a filtration membrane **212** adjacent the exit port leading to the pump or housing **204** to minimize passage of exudates to the pump. Suitable filtration membranes **212** include membrane filters incorporating polymer films with specific pore ratings. Such polymer films may include nitrocellulose, cellulose acetate, hydrophilic PTFE, hydrophobic PTFE, nylon, polycarbonate. **FIG. 5A** illustrates a portion of container **202** removed to depict the location of filtration membrane **212**. The fluid flow of exudates is indicated by directional arrows **214**.

FIG. 8 illustrates an alternate arrangement where channels **210** extend in general parallel arrangement within the container **202** along a major portion of the channels **210**. The channels **210** are in communication with inlet and outlet vacuum conduits **216, 218** which are in communication with the respective wound dressing **102**

and the pump **118**. Non-absorbent materials may also be added. Such materials may include TOW, felt or foam.

Container **202** may be supported via either of the body support bags illustrated in **FIGS. 3-4**. Alternatively, as shown in **FIG. 9**, container **202** may be directly affixed to the subject by conventional means including via surgical tape **220** or leg straps (elastic straps). Container **202** may be affixed to the leg area, abdominal area, back area or any inconspicuous location on the body or on or near the wound dressing.

In the embodiment of **FIG. 5A**, container **202**, wound dressing **206** and tubing **222** are intended to be replaced after a predetermined period of time which extends between about one to about seven days, more about three days. Subatmospheric pressure mechanism **104d** including vacuum source or pump, actuator or motor, power source, pressure sensor, control means (similar to the corresponding components discussed hereinabove) are intended for an extended life, for example between about twenty to about forty days, more about thirty days. Thus after, e.g., each three day period, container **202**, tubing **222** and wound dressing **206** are discarded and replaced with new components for connection to subatmospheric pressure mechanism. In the embodiment of **FIG. 5B**, container **202**, tubing **222** and wound dressing **206** will be replaced as discussed hereinabove in connection with the embodiment of **FIG. 5A**. Similarly, the components of subatmospheric pressure mechanism will be replaced in a similar manner. However, subatmospheric pressure mechanism **104e** is a more advanced system and may include a double diaphragm pump operated via a voice coil actuator. Passive dampening capabilities such as foam insulation to reduce the noise levels may also be incorporated into the housing. In the embodiment of **FIG. 5C**, container **202**,

tubing **222** and wound dressing **206** as well as vacuum source or pump and sensor are disposable in a shorter duration of from about one to about seven days, or about three days. The power source, actuator or motor and control means are intended for reuse with new components replacing the earlier discarded components.

While the disclosure has been illustrated and described, it is not intended to be limited to the details shown, since various modifications and substitutions can be made without departing in any way from the spirit of the present disclosure. As such, further modifications and equivalents of the invention herein disclosed can occur to persons skilled in the art using no more than routine experimentation, and all such modifications and equivalents are believed to be within the spirit and scope of the disclosure as defined by the following claims.

WHAT IS CLAIMED IS:

1. A portable system for subatmospheric pressure therapy in connection with healing a surgical wound, which comprises:
 - a wound dressing dimensioned for positioning relative to a wound bed of a subject;
 - a portable subatmospheric pressure mechanism dimensioned to be carried or worn by the subject, the portable subatmospheric pressure mechanism including:
 - a housing;
 - a subatmospheric pressure source disposed within the housing and in fluid communication with the wound dressing to supply subatmospheric pressure to the wound dressing;
 - a power source mounted to or within the housing for supplying power to actuate the subatmospheric pressure source; and
 - a container for collecting exudates from the wound bed removed under the subatmospheric pressure supplied by the subatmospheric pressure source.
2. The portable system according to claim 1 wherein the subatmospheric pressure source includes a pump member and an actuator for activating the pump member.
3. The portable system according to claim 2 wherein the pump member is selected from the group consisting of a diaphragm pump, a double diaphragm pump, a bellows pump and a peristaltic pump.
4. The portable system according to claim 2 wherein the actuator is mounted to the housing.

5. The portable pump system according to claim 4 wherein the actuator is selected from the group consisting of AC motors, DC motors, voice coil actuators and solenoids.
6. The surgical portable system according to claim 1 wherein the container is mounted to or within the housing.
7. The surgical portable system according to claim 1 wherein the container is relatively flexible.
8. The surgical portable system according to claim 7 wherein the flexible container is dimensioned to be worn by the patient.
9. The surgical portable system according to claim 8 wherein the flexible container includes at least one collection path defined therewithin for containing the exudates.
10. The surgical portable system according to claim 9 wherein the flexible container includes a plurality of collection paths for containing the exudates.
11. The surgical portable system according to claim 10 wherein the plurality of collection paths define a serpentine arrangement.
12. The surgical portable system according to claim 1 wherein the portable subatmospheric pressure mechanism is adapted to be discarded after a single use.
13. The surgical portable system according to claim 1 wherein the power source is releasably mounted relative to the housing, and is intended for reuse after the subatmospheric pressure source is discarded.

14. The surgical portable system according to claim 1 wherein the wound dressing includes a wound contact member for positioning against the wound bed, a wound packing member and a wound covering to encompass a perimeter of the wound bed.

15. The surgical portable system according to claim 15 wherein the wound contact member includes a porous section to permit passage of exudates.

16. The surgical portable system according to claim 15 wherein the wound contact member is substantially non-adherent to the wound bed.

17. The surgical portable system according to claim 14 wherein the wound packing member includes a plurality of fibers or filaments in a tow arrangement.

18. The surgical portable system according to claim 14 wherein the wound covering is adapted to permit passage of moisture.

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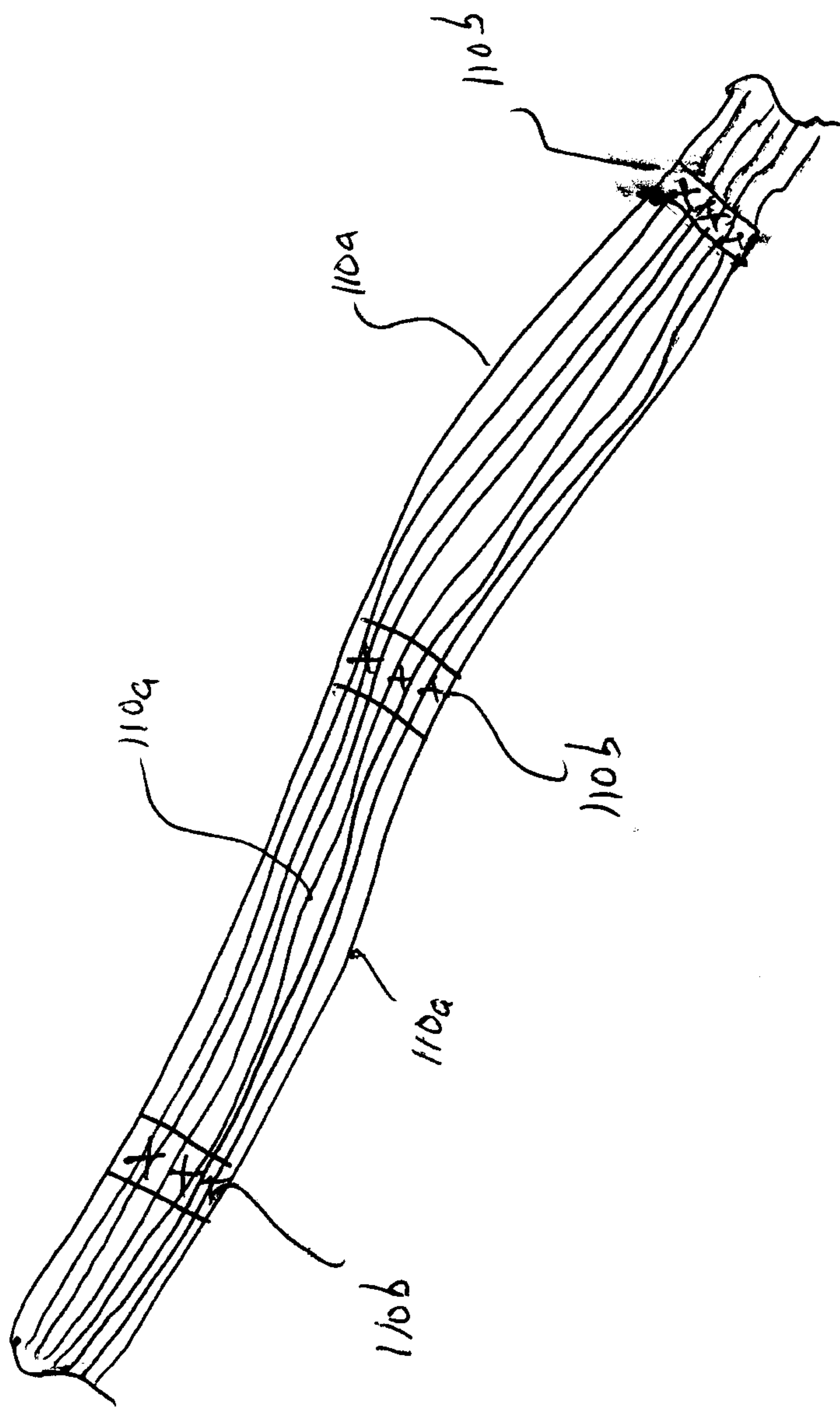


FIG. 1B

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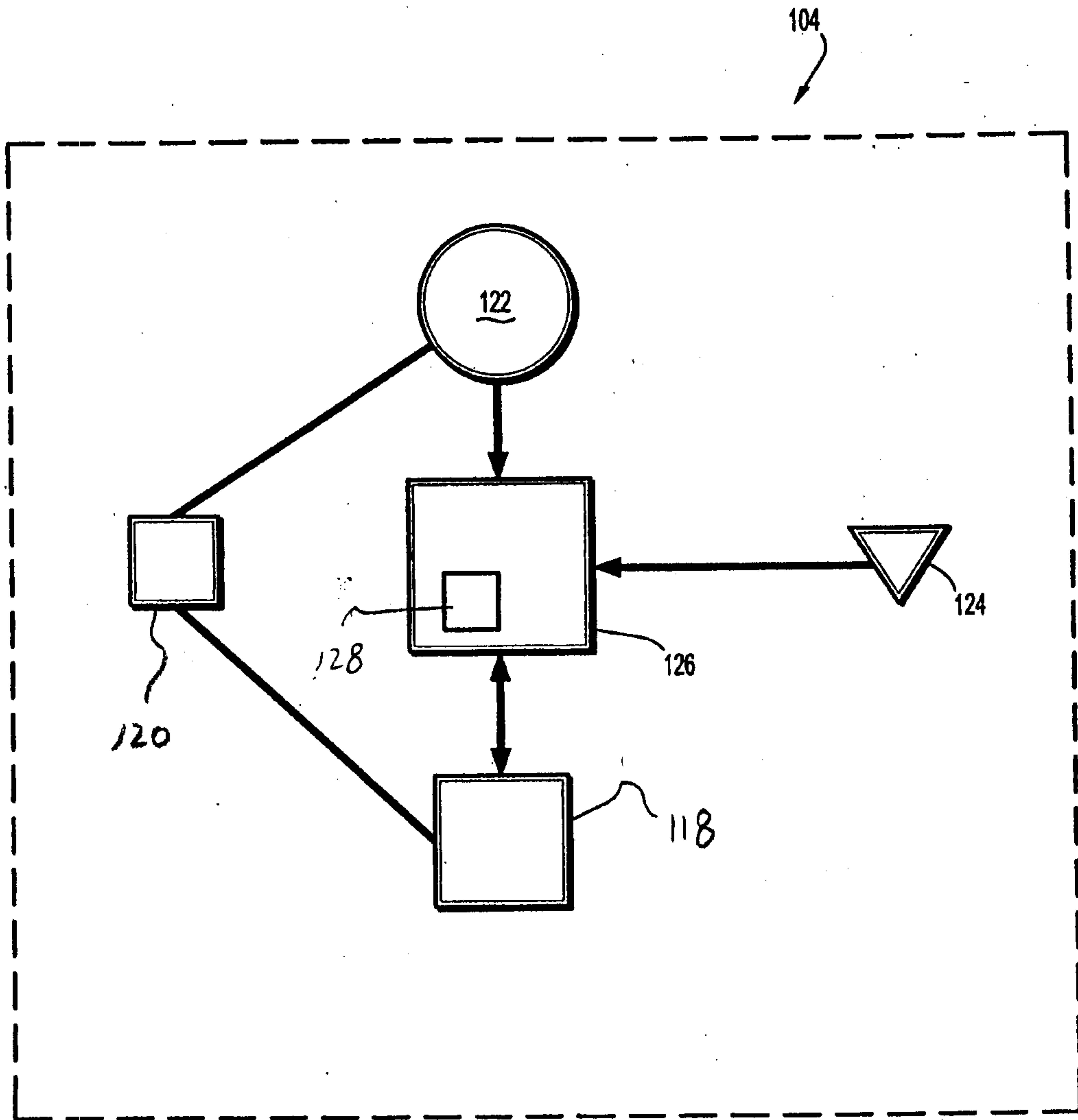


FIG. 2

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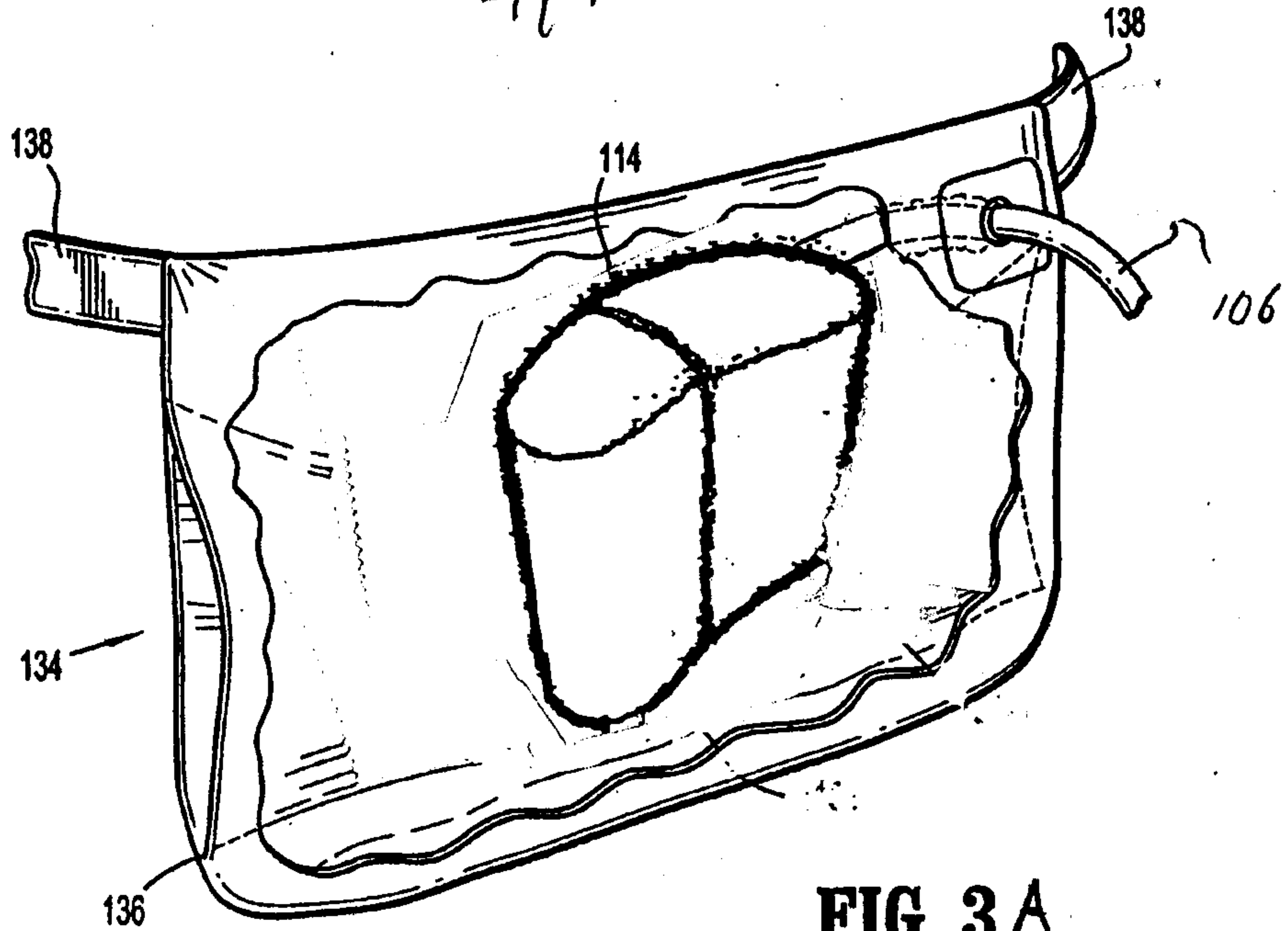


FIG. 3A

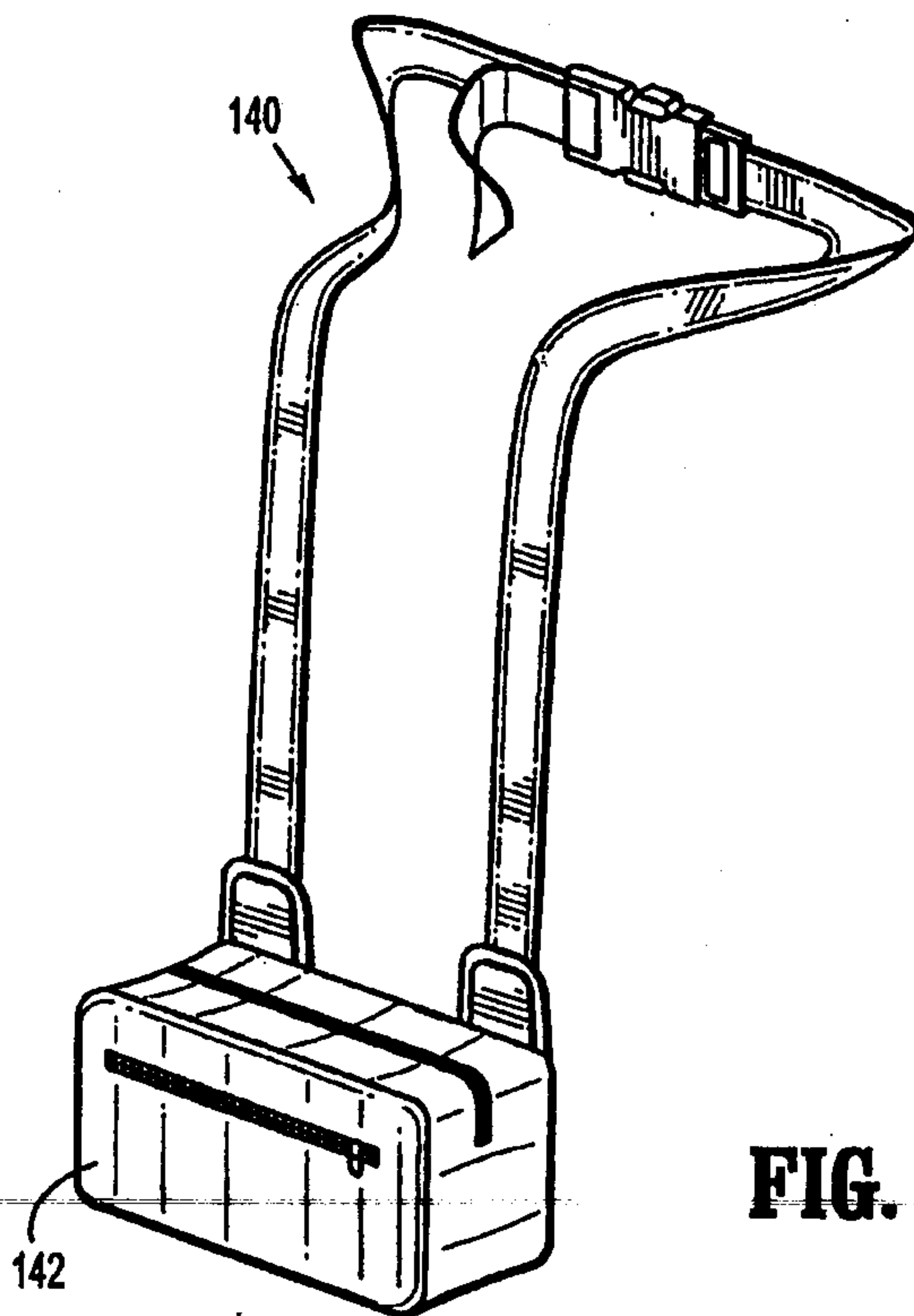


FIG. 3B

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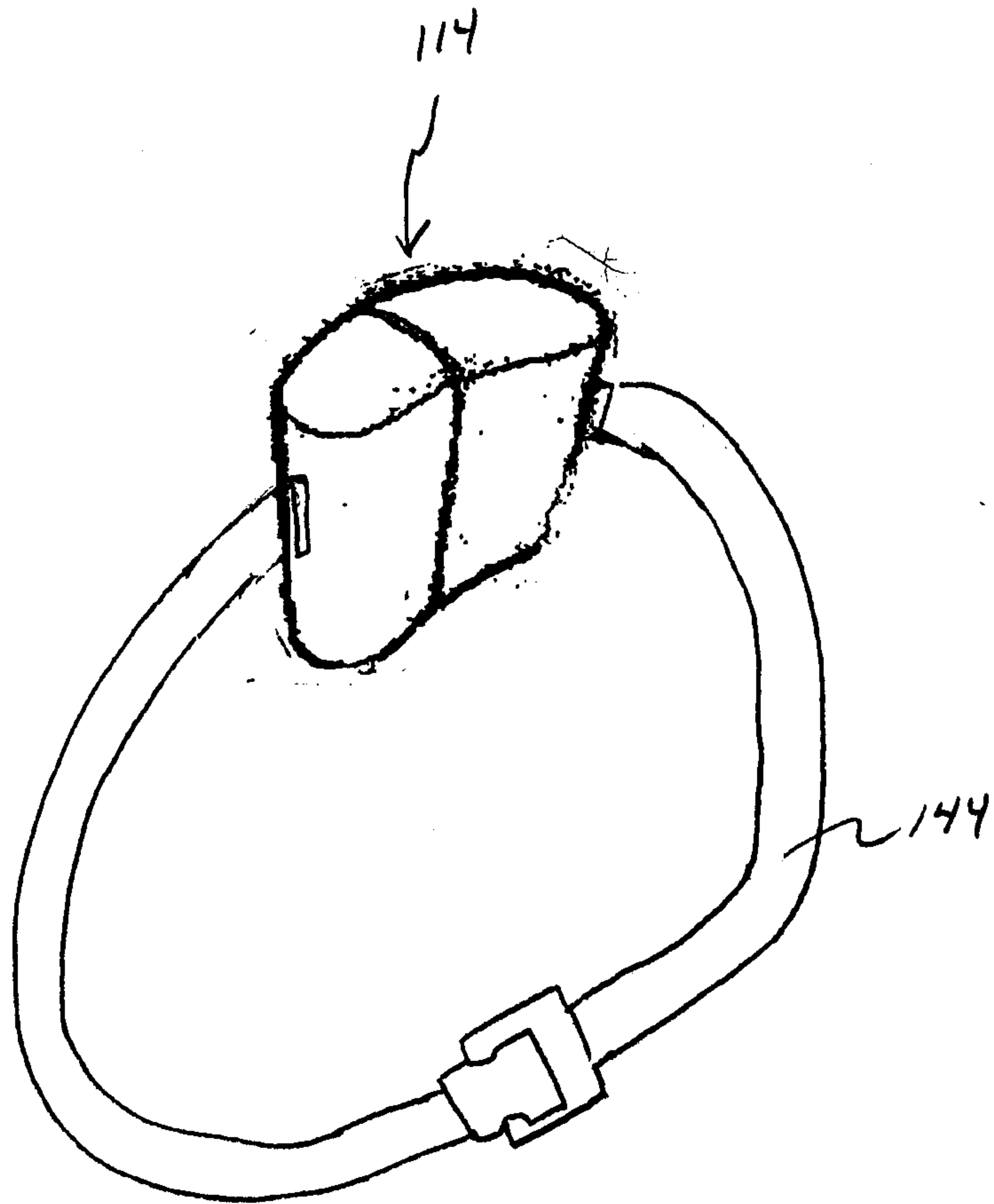


FIG. 4

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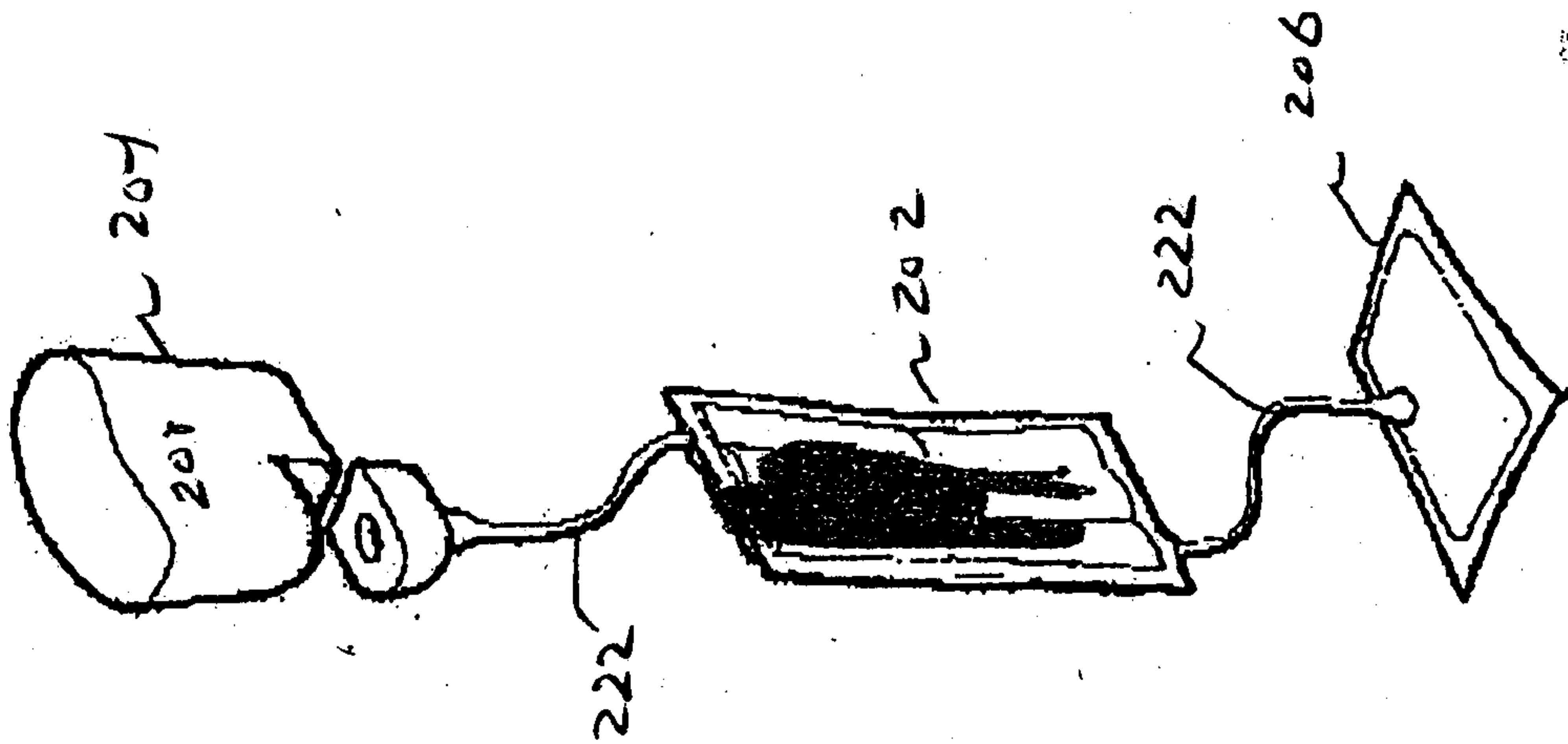


FIGURE 5C

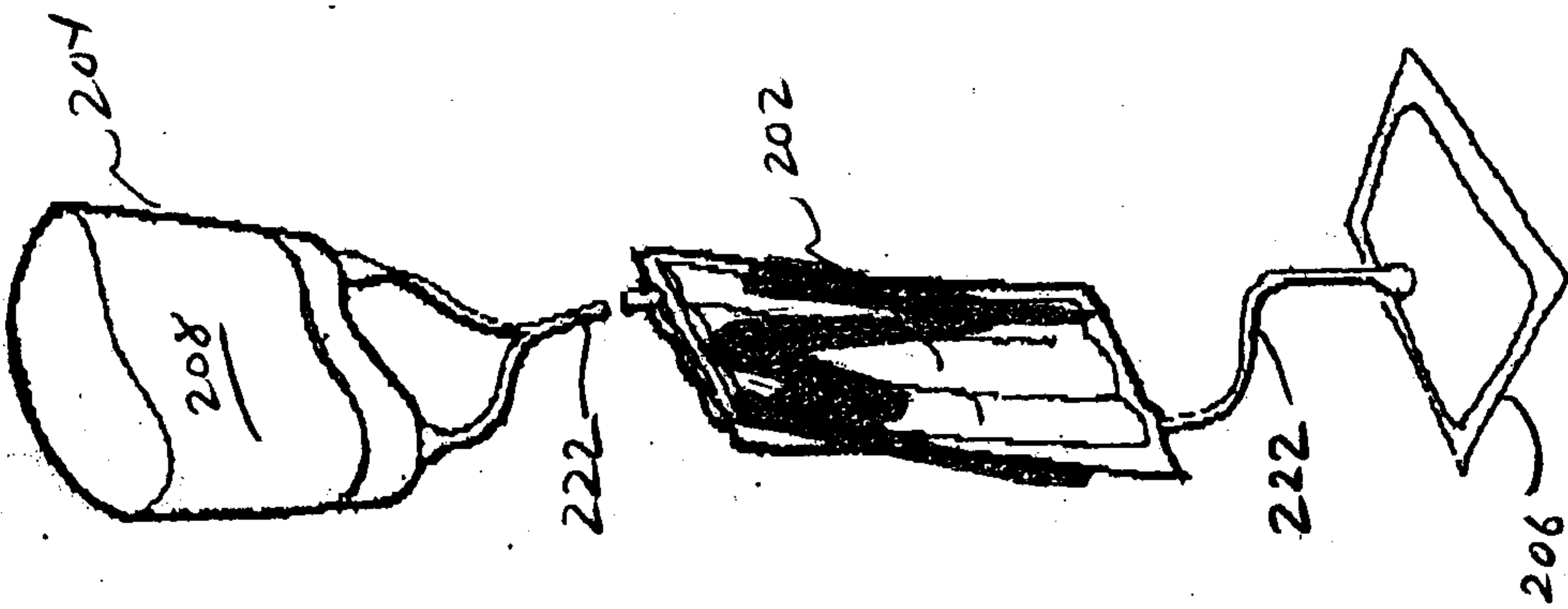


FIGURE 5B

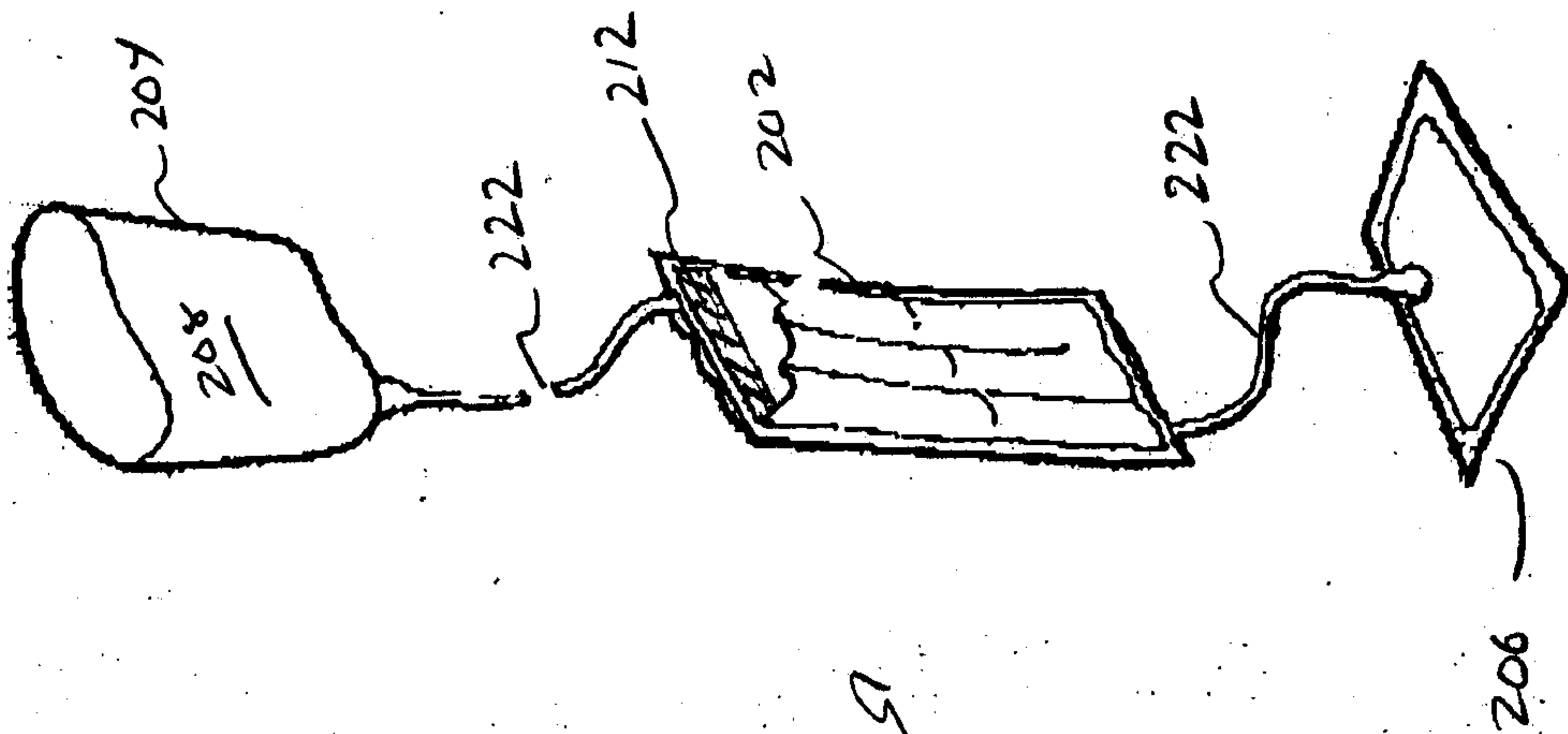


FIGURE 5A

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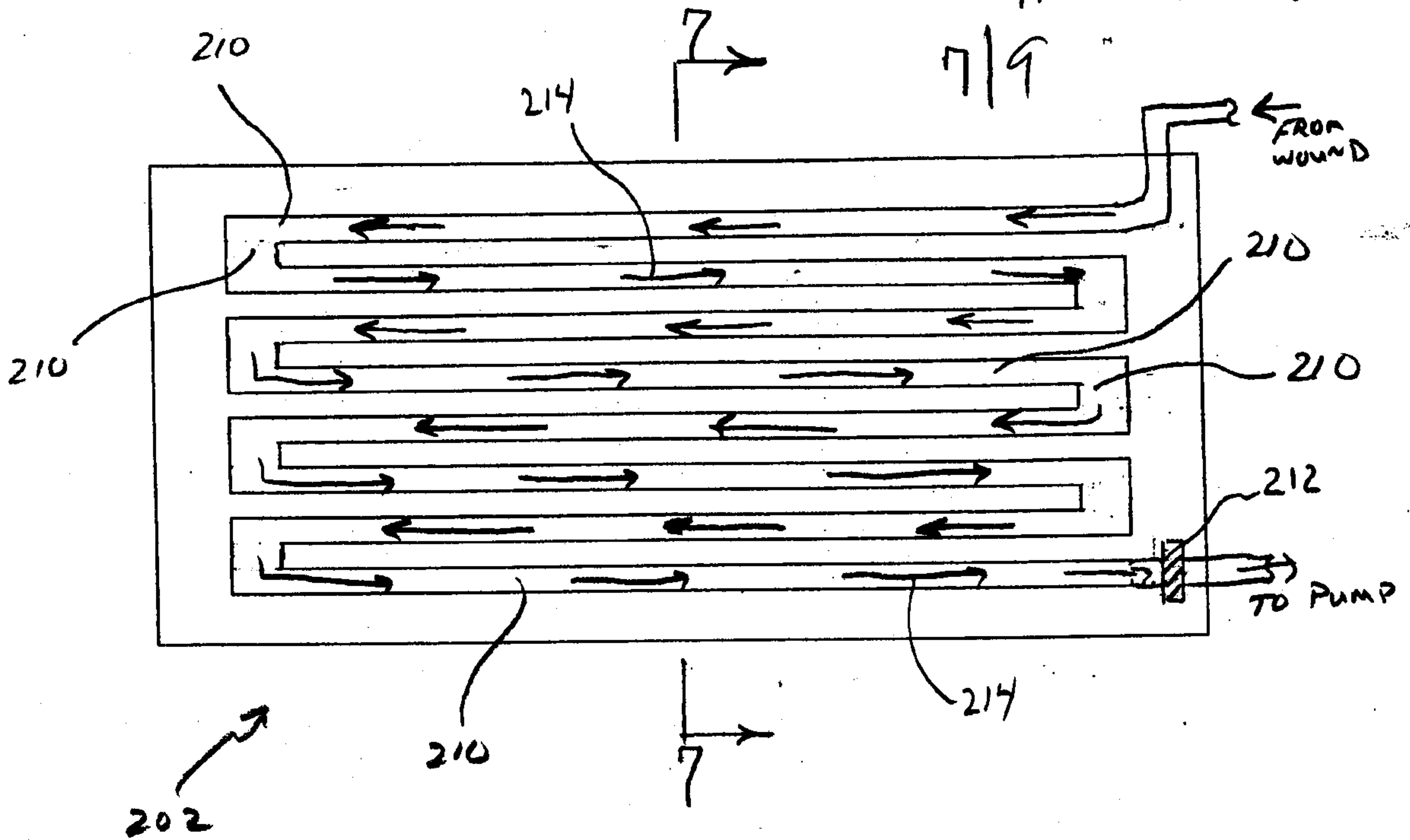


FIGURE 6

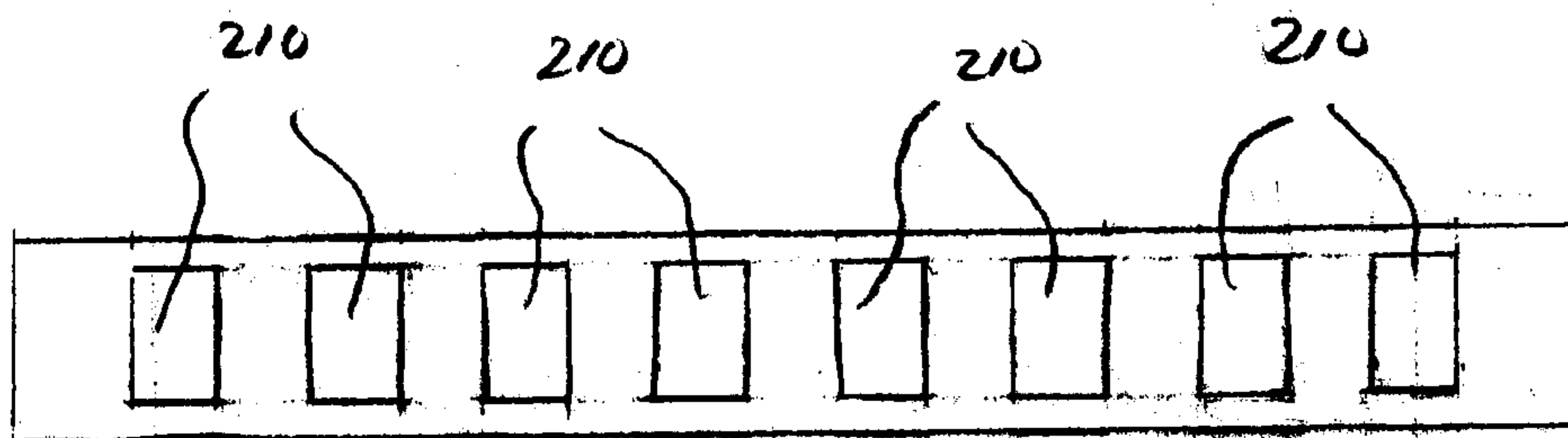


FIGURE 7

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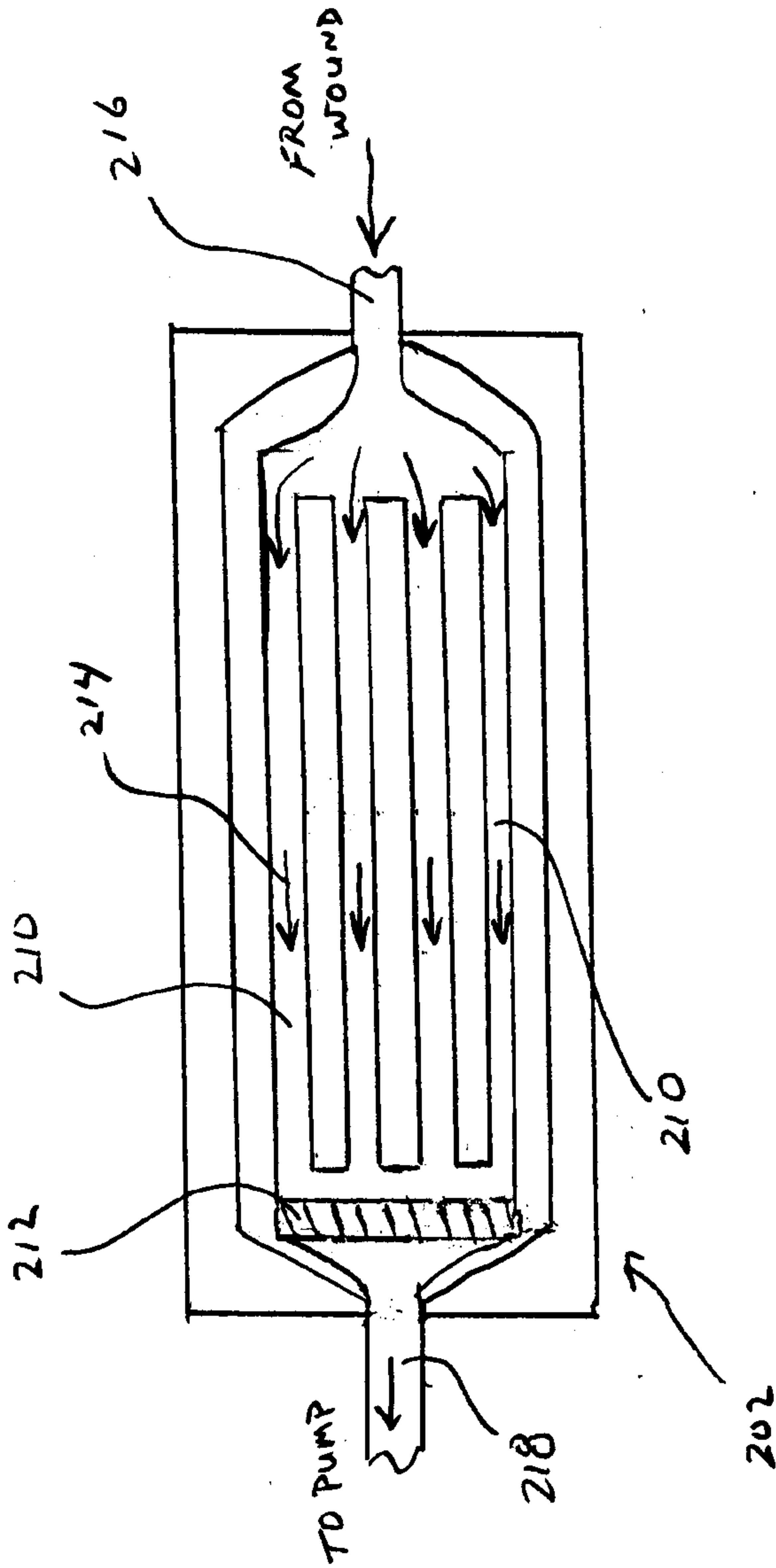


FIGURE 8

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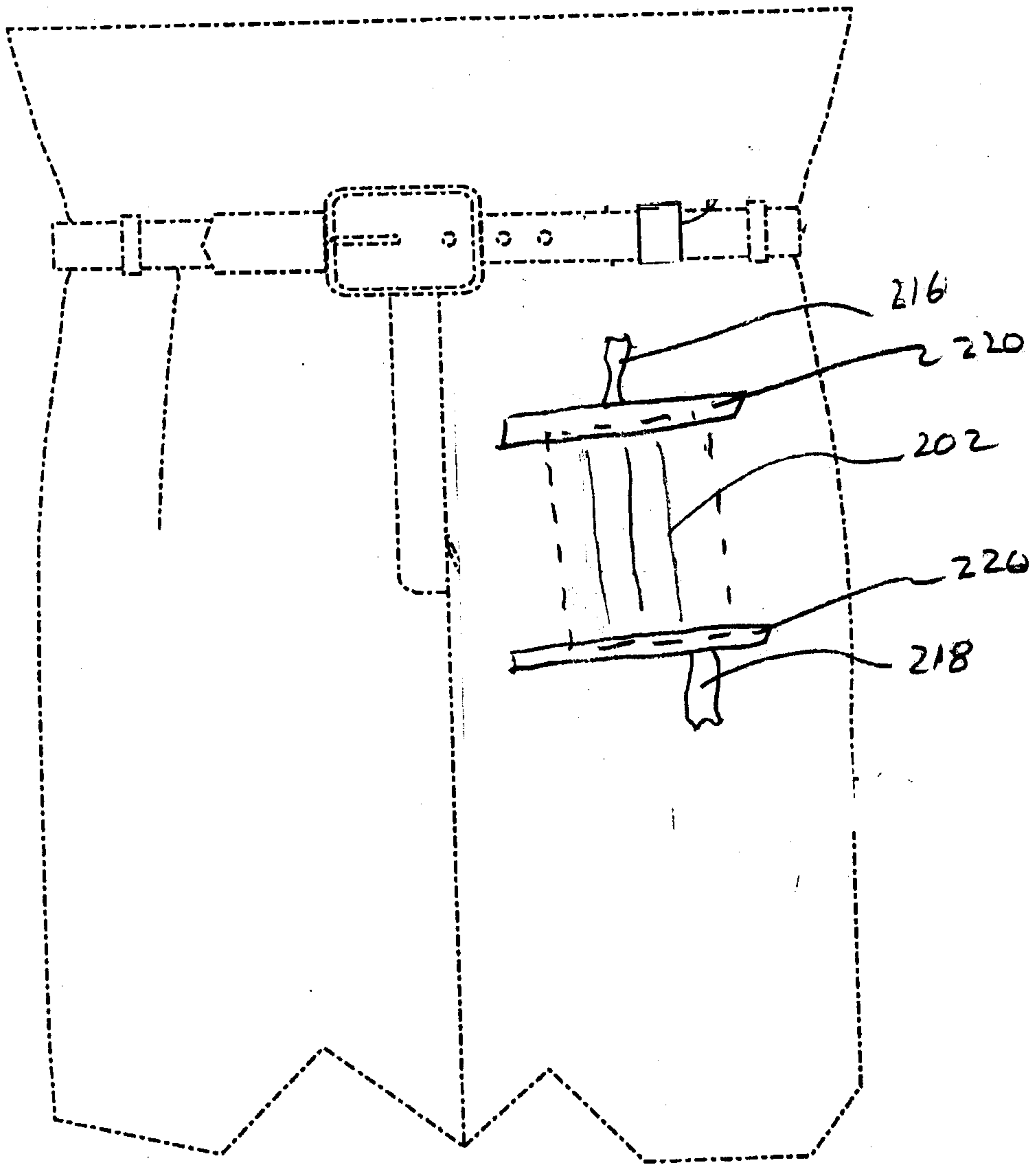


FIGURE 9

