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(54) IMPEDANCE MONITORING DURING ELECTROSTIMULATION

IMPEDANZÜBERWACHUNG WÄHREND DER ELEKTROSTIMULATION

SURVEILLANCE DE L'IMPÉDANCE DURANT UNE ÉLECTROSTIMULATION

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Description

CROSS-REFERENCE TO RELATED APPLICATIONS

[0001] The present application claims priority from and is a continuation-in-part of U.S. Patent Application No. 14/992,046 to Harpak, filed Jan. 11 2016, entitled "Impedance monitoring during electrostimulation."

FIELD OF THE INVENTION

[0002] The present invention relates to medical procedures, and specifically to electrostimulation of tissue.

BACKGROUND

[0003] Transcutaneous electrical nerve stimulation (TENS) is the use of electric current produced by a device to stimulate the nerves for therapeutic purposes. Electrical muscle stimulation (EMS), also known as neuromuscular electrical stimulation (NMES) or electromyostimulation, is the elicitation of muscle contraction using electric impulses.

[0004] US Patent 8,620,434 describes a device and method for applying transcutaneous electrical nerve stimulation via an electrode. The device includes the electrode being arranged for detecting a change of a skin impedance and being configured for switching from a stimulation mode of operation for stimulating the nerve, into a recalibration mode of operation upon detection of the changed skin impedance. The device may include a plurality of electrodes being configured for detecting the change of the skin impedance and being configured for adjusting an electrical current flowing through the skin via the plurality of electrodes.

[0005] US Patent Application Publication 2004/0015212 describes improved operating features for an electrotherapy device are provided by the use of a peel off detection system which monitors device operation and provides necessary corrective action where appropriate. More specifically, the electrotherapy device monitors the connection characteristics of the electrodes, in order to determine if acceptable connections are being maintained to the patient. In order to monitor these connections, a baseline signal measurement is made when the system is first started. Subsequent measurements are then compared to this baseline measurement, to insure that the magnitude stays within an acceptable range. If the measurement shows a non-acceptable connection condition, the electrotherapy device is shut down and appropriate warning signals are provided to the user. Where multiple output channels are used, isolation circuits are included in the feedback network in order to insure no signal coupling exists.

[0006] An article by Degen and Loeliger, entitled "An improved Method to continuously monitor the Electrode-Skin Impedance during Bioelectric Measurements," published in the Proceedings of the 29th Annual International

Conference of the IEEE EMBS, 2007, describes a method that allows to monitor the electrode-skin impedance during bioelectric recordings in a continuous way, without reducing the common mode rejection ratio (CMRR) of the amplifier. The method is based on an additional common mode signal which is superimposed on the bioelectric signal.

[0007] US Patent 6,217,574 describes an RF ablation system comprising an irrigated split tip electrode catheter, an RF generator and a signal processor. The catheter comprises four orthogonally arranged electrodes at the distal tip. The catheter is used to map the electrical activity of a heart chamber to locate site(s) of aberrant electrical pathways to be ablated. Once an ablation site has been located, the signal processor activates the RF generator to transmit a low level RF current to each electrode member of the split tip electrode. The signal processor receives signals indicative of the impedance between each electrode member and one or more surface indifferent electrodes and determines which electrode members are associated with the highest impedance. Such electrode members are those in greatest contact with the myocardium. The signal processor then automatically activates the RF generator to transmit an RF ablation current to the electrode members in contact with the myocardium to create a lesion.

SUMMARY OF EMBODIMENTS

[0008] The invention is defined by the independent claim. In the following any aspect, example and embodiment which does not fall under the scope of the independent claim is not part of the invention. There is provided, in accordance with some applications of the present invention, apparatus for use with (i) stimulation circuitry that includes a pair of electrodes, and (ii) measuring circuitry, the apparatus including: a controller including:

at least one interface configured to couple the controller to the stimulation circuitry and measuring circuitry; and controller circuitry, configured, while the electrodes are coupled to skin of a subject, to:

execute a stimulation procedure by driving the stimulation circuitry to pass a plurality of stimulating pulses between the pair of electrodes, drive the stimulation circuitry to pass one or more reference pulses between the pair of electrodes, the reference pulses being different from each of the stimulating pulses, receive, from the measuring circuitry, an impedance between the electrodes that is measured using the reference pulses, and in response to the impedance measured using the reference pulses, but not in response to any impedance measured using the stimulating

pulses, control the stimulation procedure.

[0009] In some applications, the controller circuitry is configured to control the stimulation procedure in response to the measured impedance by adjusting an amplitude of the stimulating pulses.

[0010] In some applications, the controller circuitry is configured to control the stimulation procedure in response to the measured impedance by generating an alert indicative of a required adjustment to the coupling of the electrodes to the skin.

[0011] In some applications, the controller circuitry is configured to drive the stimulation circuitry to pass the one or more reference pulses between the pair of electrodes by driving the stimulation circuitry to pass one or more symmetric reference pulses.

[0012] In some applications, the controller circuitry is configured to drive the stimulation circuitry to pass the one or more reference pulses between the pair of electrodes by driving the stimulation circuitry to pass one or more asymmetric reference pulses.

[0013] In some applications, the control circuitry is configured to receive, from the measuring circuitry, the impedance between the electrodes that is measured using the reference pulses by receiving, from the measuring circuitry, a voltage between the pair of electrodes during the passing of the reference pulses.

[0014] In some applications, the control circuitry is configured to receive, from the measuring circuitry, the impedance between the electrodes that is measured using the reference pulses by receiving, from the measuring circuitry, a current between the pair of electrodes during the passing of the reference pulses.

[0015] In some applications, the controller circuitry is configured to drive the stimulation circuitry to pass the plurality of stimulating pulses between the pair of electrodes by driving the stimulation circuitry to pass a plurality of current-regulated stimulating pulses.

[0016] In some applications, the controller circuitry is configured to drive the stimulation circuitry to pass the plurality of stimulating pulses between the pair of electrodes by driving the stimulation circuitry to pass a plurality of voltage-regulated stimulating pulses.

[0017] In some applications, the controller circuitry is configured to control the stimulation procedure in response to the measured impedance by controlling a supplied voltage that is used to pass the stimulating pulses between the pair of electrodes.

[0018] In some applications, the controller circuitry is configured to drive the stimulation circuitry to pass the one or more reference pulses between the pair of electrodes by driving the stimulation circuitry to substitute at least one pulse of the stimulation procedure with one of the reference pulses.

[0019] In some applications, the controller circuitry is configured to drive the stimulation circuitry to pass the one or more reference pulses without substituting any pulse of the stimulation procedure with one of the refer-

ence pulses.

[0020] In some applications, the controller circuitry is configured to drive the stimulation circuitry to pass the one or more reference pulses between the pair of electrodes by driving the stimulation circuitry to pass at least one reference pulse having an amplitude that varies less than an amplitude of at least one of the stimulating pulses.

[0021] In some applications, the controller circuitry is configured to drive the stimulation circuitry to pass the one or more reference pulses between the electrodes during the stimulation procedure.

[0022] In some applications, the controller circuitry is configured to control the stimulation procedure in response to the measured impedance by stopping the stimulation procedure.

[0023] In some applications, the controller circuitry is configured to drive the stimulation circuitry to pass the one or more reference pulses between the pair of electrodes by driving the stimulation circuitry to pass a plurality of reference pulses between respective pairs of the stimulating pulses.

[0024] In some applications, the controller circuitry is configured to drive the stimulation circuitry to pass the one or more reference pulses between the pair of electrodes by driving the stimulation circuitry to pass the plurality of reference pulses at regular intervals.

[0025] In some applications, the controller circuitry is configured to:

receive, from the measuring circuitry, a baseline impedance between the electrodes and a subsequent impedance between the electrodes, and control the stimulation procedure in response to comparing the subsequent impedance to a threshold that is based on the baseline impedance.

[0026] In some applications, the controller circuitry is further configured to adaptively adjust the threshold during the stimulation procedure.

[0027] In some applications, the controller circuitry is configured to drive the stimulation circuitry to pass one of the reference pulses before the stimulation procedure, the baseline impedance being measured using the reference pulse that is passed before the stimulation procedure.

[0028] In some applications, the controller circuitry is configured to drive the stimulation circuitry to pass the reference pulse before the stimulation procedure using a first supplied voltage that is lower than a second supplied voltage that is used to pass the stimulating pulses between the pair of electrodes.

[0029] In some applications, the controller circuitry is configured to drive the stimulation circuitry to pass the one or more reference pulses between the pair of electrodes by driving the stimulation circuitry to pass at least one reference pulse having a lower amplitude than an amplitude of at least one of the stimulating pulses.

[0030] In some applications, the controller circuitry is

configured to drive the stimulation circuitry to pass the at least one reference pulse by driving the stimulation circuitry to pass at least one reference pulse having a current that is less than 15 mA.

[0031] In some applications, the controller circuitry is configured to drive the stimulation circuitry to pass the at least one reference pulse by driving the stimulation circuitry to pass at least one reference pulse having a current that is less than 10 mA.

[0032] In some applications, the controller circuitry is configured to drive the stimulation circuitry to pass the at least one reference pulse by driving the stimulation circuitry to pass at least one reference pulse having a current that is less than 5 mA.

[0033] In some applications, the controller circuitry is configured to drive the stimulation circuitry to pass the at least one reference pulse by driving the stimulation circuitry to pass at least one reference pulse having a voltage that is less than 15 V.

[0034] In some applications, the controller circuitry is configured to drive the stimulation circuitry to pass the at least one reference pulse by driving the stimulation circuitry to pass at least one reference pulse having a voltage that is less than 9 V.

[0035] In some applications, the controller circuitry is configured to drive the stimulation circuitry to pass the one or more reference pulses between the pair of electrodes by driving the stimulation circuitry to pass at least one reference pulse having a shorter duration than a duration of at least one of the stimulating pulses.

[0036] In some applications, the controller circuitry is configured to drive the stimulation circuitry to pass the at least one reference pulse by driving the stimulation circuitry to pass at least one reference pulse having a duration of less than 25 microseconds.

[0037] There is further provided, in accordance with some applications of the present invention, a method, including:

executing a stimulation procedure, by passing a plurality of stimulating pulses between a pair of electrodes coupled to skin of a subject;
passing one or more reference pulses between the pair of electrodes, the reference pulses being different from each of the stimulating pulses;
measuring an impedance between the electrodes, using the reference pulses; and
in response to the impedance measured using the reference pulses, but not in response to any impedance measured using the stimulating pulses, controlling the stimulation procedure.

[0038] There is additionally provided, in accordance with some applications of the present invention, a controller for use with (i) stimulation circuitry that includes a pair of electrodes, and (ii) measuring circuitry, the controller including:

at least one interface configured to couple the controller to the stimulation circuitry and measuring circuitry; and
controller circuitry, configured to, while the electrodes are coupled to skin of a subject:

via the interface:

execute a stimulation procedure by driving the stimulation circuitry to pass a plurality of stimulating pulses between the pair of electrodes,
drive the stimulation circuitry to pass one or more reference pulses between the pair of electrodes, the reference pulses being different from each of the stimulating pulses, and
receive, from the measuring circuitry, an impedance between the electrodes that is measured using the reference pulses, and

in response to the impedance measured using the reference pulses, but not in response to any impedance measured using the stimulating pulses, control the stimulation procedure.

[0039] There is further provided, in accordance with some applications of the present invention, apparatus including:

stimulation circuitry comprising a pair of electrodes, measuring circuitry; and
a controller, the controller comprising:

at least one interface configured to couple the controller to the stimulation circuitry and measuring circuitry; and
controller circuitry, configured, while the electrodes are coupled to skin of a subject to:

execute a stimulation procedure by driving the stimulation circuitry to pass a plurality of stimulating pulses between the pair of electrodes,
drive the stimulation circuitry to pass one or more reference pulses between the pair of electrodes, the reference pulses being different from each of the stimulating pulses, receive, from the measuring circuitry, an impedance between the electrodes that is measured using the reference pulses, and
in response to the impedance measured using the reference pulses, but not in response to any impedance measured using the stimulating pulses, control the stimulation procedure.

[0040] The present invention will be more fully under-

stood from the following detailed description of embodiments thereof, taken together with the drawings, in which:

BRIEF DESCRIPTION OF THE DRAWINGS

[0041]

Fig. 1 is a block diagram of a system for applying, and monitoring impedance during, electrostimulation, in accordance with some embodiments of the present invention;

Fig. 2 is a schematic illustration of various pulse sequences that may be passed between electrodes, in accordance with some embodiments of the present invention;

Fig. 3 is a schematic circuit diagram of stimulation circuitry coupled (e.g., attached) to skin of a subject, in accordance with some embodiments of the present invention; and

Fig. 4 is a flow diagram showing a method for electrostimulation practiced in accordance with some embodiments of the present invention.

DETAILED DESCRIPTION OF EMBODIMENTS

OVERVIEW

[0042] In electrostimulation procedures, at least two electrodes are coupled (e.g., attached) to the skin of the subject, and subsequently, a plurality of stimulating pulses are passed between the electrodes. In current-regulated stimulation, a predefined amount of current is passed between the electrodes during each the stimulating pulses. In voltage-regulated stimulation, a predefined amount of voltage is applied between the electrodes during each of the stimulating pulses.

[0043] In some cases, the electrodes might not be properly coupled (e.g., attached) to the skin before the procedure. Alternatively or additionally, the electrodes may become at least partially uncoupled from the skin, or shorted to one another, during the procedure, e.g., due to movement of the subject or degradation of the adhesive material that keeps the electrodes coupled to the skin. Such a scenario may lead to inefficient power consumption, and/or lessen the effectiveness of the stimulation. For example, if the impedance between the electrodes is higher than normal due to improper coupling of the electrodes to the skin, it may be necessary, for current-regulated stimulation, to increase the supplied voltage that supplies the stimulating current, thus consuming more power than would otherwise be necessary. For voltage-regulated stimulation, the increased impedance may cause a smaller amount of current to pass between the electrodes, thus lessening the effectiveness of the stimulation.

[0044] In light of the above, it may be advantageous, before and/or during the stimulation procedure, to measure the impedance between the electrodes, such that, if the measured impedance deviates from a particular threshold, the coupling (e.g., attachment) of the electrodes to the skin may be adjusted. To measure the impedance, the voltage between the electrodes may be measured while a current of known amplitude is passed between the electrodes. Alternatively, the current between the electrodes may be measured while a voltage of known amplitude is applied between the electrodes.

[0045] One implementation of the above-described impedance measurement is to measure the voltage or current between the electrodes while the stimulating pulses are passed between the electrodes. However, pulse parameters that are suitable for stimulation are not necessarily suitable for impedance measurement, and vice versa. For example, in many cases, the amplitude of the stimulating pulses varies over time in an "intra-pulse" and/or "inter-pulse" manner, thus rendering it difficult to use the stimulating pulses to accurately measure the impedance. That is, at least some of the stimulating pulses may have a varying amplitude, and/or the respective amplitudes of the stimulating pulses may be varied during the stimulation procedure, as the subject tries to find his "comfort zone."

[0046] In light of the above, embodiments of the present invention provide an improved implementation, in which one or more reference pulses are passed between the electrodes, in addition to the stimulating pulses. The reference pulses, but not the stimulating pulses, are used for impedance measurement, while the stimulating pulses, but typically not the reference pulses, are used for stimulation. Parameters such as pulse amplitude, duration, and frequency may be "tailored" differently for each type of pulse, thus facilitating effective stimulation and impedance monitoring. For example, in some embodiments of the present invention, the amplitude of the reference pulses is less time-varying than that of the stimulating pulses (and in fact, is often set to a constant value), thus allowing the reference pulses to be used to accurately measure the impedance between the electrodes.

SYSTEM DESCRIPTION

[0047] Reference is initially made to Fig. 1, which is a block diagram of a system 20 for applying, and monitoring impedance during electrostimulation, in accordance with some embodiments of the present invention. System 20 comprises a controller 22 (e.g., a programmable controller configured to execute, for example, microcode), stimulation circuitry 24 comprising at least a pair of electrodes 26a and 26b, and measuring circuitry 28. Controller 22 comprises at least one interface 62 (e.g., an electric interface, such as a plug or socket) that couples the controller to stimulation circuitry 24 and measuring circuitry 28, and further comprises controller circuitry 64.

[0048] Electrodes 26a and 26b are coupled (e.g., attached) to skin of the subject who is to be electrostimulated. Subsequently, to execute the stimulation procedure, controller circuitry 64 drives stimulation circuitry 24 to pass a plurality of stimulating pulses between the electrodes. As further described hereinbelow, controller circuitry 64 may also drive the stimulation circuitry to pass one or more reference pulses between the pair of electrodes before and/or during the electrostimulation procedure, the reference pulses being different from each of the stimulating pulses. During the application of the reference pulses, but not during the application of the stimulating pulses, the controller circuitry drives measuring circuitry 28 to measure a voltage or current between the electrodes. The measuring circuitry passes the measured voltage or current to the controller circuitry, which then uses the quantity from the measuring circuitry to measure the impedance between the electrodes. In this manner, the reference pulses, but not the stimulating pulses, are used to measure the impedance. In any case, even if some impedances are measured using the stimulating pulses, the controller circuitry controls the stimulation procedure in response to impedance(s) measured using the reference pulses, but not in response to any impedance measured using the stimulating pulses.

[0049] Typically, at least one of the reference pulses is used to measure a baseline impedance between the electrodes. This reference pulse may be passed before the stimulation procedure (after coupling the electrodes to the skin), or during the procedure (e.g., near the beginning of the procedure). Subsequently, during the procedure, at least one reference pulse is used to measure a subsequent impedance between the electrodes, which, for ease of description, is referred to below as the "intraprocedural impedance." The intraprocedural impedance may be compared to a threshold that is based on the baseline impedance, and, in response thereto, the stimulation procedure may be controlled. For example, if the intraprocedural impedance deviates from the threshold, the controller circuitry may generate an alert that indicates that the coupling of the electrodes to the skin needs to be adjusted. (In some embodiments, the controller circuitry generates the alert by wirelessly or wiredly driving a smartphone 66 of the subject to display an appropriate message to the subject.) Further to receiving the alert, the subject may adjust the coupling (e.g., attachment) of the electrodes to the skin, e.g., by reapplying adhesive material at the electrode-skin interface for at least one of the electrodes.

[0050] In some embodiments, if the intraprocedural impedance deviates from the threshold, the controller circuitry stops the stimulation procedure, alternatively or additionally to generating the alert. While the stimulation procedure is stopped, the coupling (e.g., attachment) of the electrodes to the skin may be adjusted, and subsequently, the stimulation procedure may be restarted.

[0051] The above-described threshold may, for example, be a range of values having a lower bound that is

slightly less than the baseline impedance, and an upper bound that is slightly greater than the baseline impedance, such that the intraprocedural impedance is considered to deviate from the threshold whether it is greater than the upper bound or lower than the lower bound. Alternatively, the threshold may be a single value (e.g., the baseline impedance plus or minus some margin), and the intraprocedural impedance may be considered to deviate from the threshold if it is greater than the threshold, or alternatively, if it is lower than the threshold.

[0052] In some embodiments, the threshold is adaptively adjusted during the stimulation procedure. For example, in some embodiments, the threshold is periodically lowered during the stimulation procedure, to account for the expected decrease in impedance during the procedure caused by sweating of the subject. Alternatively or additionally, the threshold may be adjusted in response to any other relevant factors.

[0053] Alternatively or additionally, in response to measuring the baseline and/or intraprocedural impedance between the electrodes, the amplitude of the stimulating pulses may be adjusted. For example, the amplitude of the stimulating current may be set as an increasing function of the measured impedance, since a higher impedance may be indicative of a greater amount of body fat in the subject, which, in turn, indicates that a stronger current is needed to reach the subject's nerve or muscle. Typically, the controller circuitry is configured to differentiate a stable, high-but-normal impedance from an abnormally high and/or increasing impedance. For the former type of impedance, the controller circuitry typically adjusts the amplitude of the stimulating pulses, as described immediately above. For the latter type of impedance, on the other hand, the controller circuitry typically generates an alert and/or stops the procedure, as described above.

[0054] Reference is now made to Fig. 2, which is a schematic illustration of various pulse sequences that may be passed between electrodes 26a and 26b, in accordance with some embodiments of the present invention. The pulses shown in Fig. 2 may be voltage pulses used for voltage-regulated stimulation, or alternatively, current pulses used for current-regulated stimulation. (Thus, the units of the vertical axes may be any appropriate unit for voltage or current.)

[0055] First sequence 30a is a sequence of stimulating pulses 32, which may be passed between the electrodes while executing a stimulation procedure. As shown in the figure, stimulating pulses 32 have varying intra-pulse amplitudes, such that it may be difficult to use the stimulating pulses to measure the impedance between the electrodes. (As noted above, the stimulating pulses may also vary in an inter-pulse manner, such that a particular pulse may have a different amplitude from that of a neighboring pulse.) Hence, in embodiments of the present invention, a sequence such as second sequence 30b or third sequence 30c, each of which includes a plurality of reference pulses 34 between respective pairs of stimulating

pulses, is used, instead of first sequence 30a.

[0056] Reference pulses 34 typically have an amplitude that varies less than the amplitude of the stimulating pulses. For example, as shown in Fig. 2, each reference pulse may have a constant (i.e., "flat") positive ("+ve") amplitude, and a constant negative ("-ve") amplitude. Hence, as noted above, reference pulses 34, rather than stimulating pulses 32, may be more easily used to measure the impedance. Typically, as shown in Fig. 2, at least some of the reference pulses are passed at regular intervals (i.e., periodically), such that the impedance may be measured at regular intervals.

[0057] In some embodiments, at least one pulse of the stimulation procedure is substituted with one of the reference pulses. For example, in sequence 30c, two of the stimulating pulses of sequence 30a are substituted with respective reference pulses. In other embodiments, no pulse of the stimulation procedure is substituted with a reference pulse. For example, in sequence 30b, two reference pulses are added to sequence 30a, without replacing any of the stimulating pulses. Typically, the reference pulses are added to the stimulating-pulse sequence (as in sequence 30b), rather than substituted for stimulating pulses (as in sequence 30c), unless the frequency of delivery of the stimulating pulses is too high to accommodate the addition of the reference pulses.

[0058] In some embodiments, as shown in Fig. 2, one or more of the reference pulses are symmetric. That is, for one or more of the reference pulses, the duration and amplitude of the positive portion of the pulse are equal to, respectively, the duration and amplitude of the negative portion of the pulse. Alternatively or additionally, one or more of the reference pulses may be asymmetric. (Even though the integral over an asymmetric pulse is typically zero, the amplitude and duration of the positive portion of the asymmetric pulse are different from the amplitude and duration of the negative portion of the pulse.)

[0059] Typically, as shown in Fig. 2, the reference pulses have an amplitude that is lower than that of the stimulating pulses, and/or a duration that is shorter than that of the stimulating pulses. Hence, the reference pulses are unlikely to stimulate the subject, and in fact, may not be noticed by the subject at all. For example, in some embodiments, the amplitude of the current of the reference pulses is less than 15 mA, such as less than 10 mA, e.g., less than 5 mA, and/or the voltage of the reference pulses is less than 15 V, e.g., less than 9 V. Alternatively or additionally, the duration of the reference pulses may be less than 25 microseconds, e.g., less than 20 microseconds.

[0060] Reference is now made to Fig. 3, which is a schematic illustration of stimulation circuitry 24 coupled (e.g., attached) to skin 60 of a subject, in accordance with some embodiments of the present invention. It is noted that the particular configuration shown in Fig. 3 is provided purely by way of example. In practice, any suitable circuitry may be used to apply the stimulating and

reference pulses described herein, for either current-regulated or voltage-regulated applications.

[0061] In some current-regulated stimulation embodiments, stimulation circuitry 24 comprises the half-bridge circuit shown in Fig. 3. In such a circuit, a current source 38 supplies the current that is passed between electrodes 26a and 26b, while the voltage between the electrodes is limited to the voltage supplied by voltage supply 36. (In other words, the current that is passed between the electrodes is the minimum of "I" and "V/R," where "I" is the current supplied by current source 38, "V" is the voltage supplied by voltage supply 36, and "R" is the impedance of the tissue.) To generate pulses of current such as the stimulation and reference pulses shown in Fig. 2, the controller controls switches (e.g., transistor switches) 40a, 40b, 40c, and 40d. In particular, to pass current from electrode 26a to electrode 26b, the controller closes switches 40a and 40d, thus connecting electrode 26a to voltage supply 36 and electrode 26b to current source 38, while switches 40b and 40c remain open. Conversely, to pass current from electrode 26b to electrode 26a, the controller closes switches 40b and 40c, thus connecting electrode 26b to voltage supply 36 and electrode 26a to current source 38, while switches 40a and 40d remain open.

[0062] The direction of current determines the polarity of the pulse. For example, the respective positive portions of the pulses shown in Fig. 2 may be obtained by passing current from electrode 26a to electrode 26b, while the respective negative portions may be obtained by passing current from electrode 26b to electrode 26a. The degree to which the switches are closed determines the amplitudes of the pulses.

[0063] In the embodiment of the invention, the voltage supplied by voltage supply 36 is controlled, in response to the measured impedance. For example, in the embodiment of the invention, a "calibration procedure" is performed. At least one reference pulse, passed between the electrodes prior to the stimulation procedure, is used to measure the baseline impedance between the electrodes. Subsequently, the voltage supply 36 may be set to a voltage that is slightly higher than the product of the measured baseline impedance and the maximum desired stimulation current.

[0064] The above-described calibration procedure is advantageous, in that it facilitates setting a voltage limit that is high enough to accommodate the stimulation of the subject, yet not too high as to consume a relatively large amount of excess power. In other words, if the voltage supply were set without regard to the baseline impedance, the voltage supply would need to be set, for every subject, as high as needed to accommodate the "worst case scenario," i.e., the highest expected skin impedance. However, some subjects may have a skin impedance that is significantly lower than the highest expected skin impedance. For such subjects, the voltage supply would be too high, such that excess power would be needlessly consumed. Hence, by setting the voltage

supply in response to the measured baseline impedance, an appropriate voltage limit may be set for each subject, thus facilitating more efficient consumption of power.

[0065] Typically, when passing the reference pulse that is used to measure the baseline impedance, the voltage supply is set to a lower voltage than the voltage to which it is subsequently set for the stimulation procedure. For example, the voltage supply may be set to a voltage that is slightly higher than the product of the maximum estimated impedance and the desired reference current. Subsequently, in response to the measured baseline impedance, the voltage supply may be increased in order to accommodate the stimulation, as described above. Since the precision of measuring circuitry 28 (Fig. 1) is typically greater for smaller supplied voltages than for larger supplied voltages, the above-described technique may facilitate a more precise measurement of the baseline impedance. (During the stimulation procedure, however, the voltage supply typically remains at the higher stimulation-accommodating value, even during the application of the reference pulses.)

[0066] For example, reference pulses such as those shown in Fig. 2 may have an amplitude of 10 mA, while skin impedance of human subjects is typically no higher than 1500 Ohm. Thus, during the calibration procedure, the voltage supply may be set to 18 V, which is slightly higher than the product of 10 mA and 1500 Ohm. Stimulation pulses such as those shown in Fig. 2 may have a maximum amplitude of 30 mA. Thus, if, for example, the measured baseline impedance was 1000 Ohm, the voltage supply for the stimulation procedure may be set to 35 V, which is slightly higher than the product of 30 mA and 1000 Ohm.

[0067] Reference is now made to Fig. 4, which is a flow diagram showing a method 58 practiced in accordance with some embodiments of the present invention. Most of the steps in method 58 were already described above, but, for clarity, are again described hereinbelow, with reference to Fig. 4.

[0068] Method 58 begins with a first voltage-setting step 42, in which voltage supply 36 is set to a voltage that is high enough to accommodate a reference pulse, yet lower than the voltage used subsequently during the stimulation procedure. (As noted above, such a lower voltage may facilitate a more precise measurement of the baseline impedance.) Subsequently, in a baseline-impedance-measuring step 44, at least one reference pulse is applied to the subject by being passed between the electrodes, and during the application of the reference pulse, the baseline impedance is measured, by measuring the voltage between the electrodes. At a first decision step 45, the controller assesses whether the measured baseline impedance is reasonable, i.e., whether it falls within an expected range of normal human skin impedance, e.g., 300 - 1500 Ohm. If the baseline impedance is not reasonable (i.e., it is higher than expected, thus indicating that the electrodes may not have been properly coupled to the skin, or it is lower than ex-

pected, thus indicating a possible shorting of the electrodes), an alert may be generated, and subsequently, in response to the alert, the coupling (e.g., attachment) of the electrodes to the skin may be adjusted, at a first adjusting step 47. Subsequently, steps 44 and 45 are repeated. (Steps 42, 44, 45, and 47 collectively form part of the calibration procedure referred to above.)

[0069] Following an assessment that the baseline impedance is reasonable, at a second voltage-setting step 46, voltage supply 36 is set, in response to the baseline impedance, to a higher voltage that is high enough to accommodate the stimulation. Next, at a stimulating step 48, one or more stimulating pulses are applied to the subject, by being passed between the electrodes. At a second decision step 50, the controller, or the subject, decides whether the stimulation procedure is over, i.e., whether enough stimulating pulses have been applied to the subject. If the answer is affirmative, the stimulation procedure ends. Otherwise, depending on the current state of the stimulation procedure, either (i) more stimulating pulses are applied to the subject, at stimulating step 48, or (ii) at an intraprocedural-impedance-measuring step 52, at least one reference pulse is applied to the subject, and during the application of the reference pulse, the intraprocedural impedance between the electrodes is measured. Subsequently to (ii), at a third decision step 54, the controller compares the intraprocedural impedance to a threshold that is based on the baseline impedance. If the intraprocedural impedance deviates from the threshold (i.e., it is higher than the threshold, thus indicating a possible decoupling of the electrodes from the skin, or it is lower than the threshold, thus indicating a possible shorting of the electrodes), an alert may be generated, and subsequently, in response to the alert, the coupling (e.g., attachment) of the electrodes to the skin may be adjusted, at a second adjusting step 56. Following the adjustment, the stimulation may continue, at stimulating step 48.

[0070] In some embodiments, controller circuitry 64 is embodied as a programmable digital computing device comprising a central processing unit (CPU) and random access memory (RAM). Program code, including software programs, and/or data are loaded into the RAM for execution and processing by the CPU. The program code and/or data may be downloaded to the controller in electronic form, over a network, for example, or it may, alternatively or additionally, be provided and/or stored on non-transitory tangible media, such as magnetic, optical, or electronic memory. Such program code and/or data, when provided to the controller, produce a machine or special-purpose computer, configured to perform the tasks described herein. The computer is typically a hardware device programmed with computer program instructions to produce a special purpose computer. Typically, the operations that are performed by the computer transform the physical state of a memory, which is a real physical article, to have a different magnetic polarity, electrical charge, or the like depending on the technology

of the memory that is used.

[0071] It will be appreciated by persons skilled in the art that the present invention is not limited to what has been particularly shown and described hereinabove. Rather, the scope of the present invention includes both combinations and subcombinations of the various features described hereinabove, as well as variations and modifications thereof that are not in the prior art, which would occur to persons skilled in the art upon reading the foregoing description.

Claims

1. Apparatus for use with (i) stimulation circuitry (24) that includes a pair of electrodes (26a, 26b), (ii) measuring circuitry (28), and (iii) a voltage supply (36), the apparatus comprising a controller (22) comprising:

at least one interface (62) configured to couple the controller (22) to the stimulation circuitry (24) and measuring circuitry (28); and
controller circuitry (64), configured, while the electrodes (26a, 26b) are coupled to skin of a subject, to perform a stimulation procedure by:

driving the stimulation circuitry (24) to pass a plurality of stimulating pulses between the pair of electrodes (26a, 26b),
driving the stimulation circuitry (24) to pass one or more intraprocedural-reference pulses between the pair of electrodes (26a, 26b), the reference pulses being different from each of the stimulating pulses,
receiving, from the measuring circuitry (28), an intraprocedural impedance between the electrodes (26a, 26b) that is measured using the intraprocedural-reference pulses, and
in response to the impedance measured using the intraprocedural-reference pulses, but not in response to any impedance measured using the stimulating pulses, controlling the stimulation procedure:

the controller circuitry (64) is configured, while the electrodes (26a, 26b) are coupled to the skin of the subject, to perform a calibration procedure prior to the stimulation procedure, by:

driving the stimulation circuitry (24) to pass a calibration-reference pulse via the pair of electrodes (26a, 26b),
measuring a baseline impedance between the pair of electrodes (26a, 26b), and
characterized in that:

setting the voltage supply (36) to a voltage that is slightly higher than the product of the measured baseline impedance and a maximum desired stimulation current, and
the controller circuitry (64) is configured to use the voltage supply (36), set to the slightly higher voltage, for performing the stimulation procedure.

2. The apparatus according to claim 1, wherein the controller circuitry (64) is configured to drive the stimulation circuitry (24) to pass the one or more intraprocedural-reference pulses between the pair of electrodes (26a, 26b) by driving the stimulation circuitry (24) to pass one or more symmetric intraprocedural-reference pulses.
3. The apparatus according to claim 1, wherein the controller circuitry (64) is configured to drive the stimulation circuitry (24) to pass the one or more intraprocedural-reference pulses between the pair of electrodes (26a, 26b) by driving the stimulation circuitry (24) to pass one or more asymmetric intraprocedural-reference pulses.
4. The apparatus according to claim 1, wherein the controller circuitry (64) is configured to drive the stimulation circuitry (24) to pass the one or more intraprocedural-reference pulses between the pair of electrodes (26a, 26b) by driving the stimulation circuitry (24) to substitute at least one pulse of the stimulation procedure with one of the intraprocedural-reference pulses.
5. The apparatus according to claim 1, wherein the controller circuitry (64) is configured to drive the stimulation circuitry (24) to pass the one or more intraprocedural-reference pulses without substituting any pulse of the stimulation procedure with one of the intraprocedural-reference pulses.
6. The apparatus according to claim 1, wherein the controller circuitry (64) is configured to drive the stimulation circuitry (24) to pass the one or more intraprocedural-reference pulses between the pair of electrodes (26a, 26b) by driving the stimulation circuitry (24) to pass at least one intraprocedural-reference pulse having an amplitude that varies less than an amplitude of at least one of the stimulating pulses.
7. The apparatus according to any one of claims 1-6, wherein the controller circuitry (64) is configured to control the stimulation procedure in response to the measured intraprocedural impedance by stopping the stimulation procedure.
8. The apparatus according to any one of claims 1-6,

wherein the controller circuitry (64) is configured to drive the stimulation circuitry (24) to pass the one or more intraprocedural-reference pulses between the pair of electrodes (26a, 26b) by driving the stimulation circuitry (24) to pass a plurality of intraprocedural-reference pulses between respective pairs of the stimulating pulses.

9. The apparatus according to any one of claims 1-6, wherein the controller circuitry (64) is configured to:

receive, from the measuring circuitry (28), the baseline impedance between the electrodes (26a, 26b) before receiving the intraprocedural impedance between the electrodes (26a, 26b), and control the stimulation procedure in response to comparing the intraprocedural impedance to a threshold that is based on the baseline impedance.

10. The apparatus according to claim 9, wherein the controller circuitry (64) is further configured to adaptively adjust the threshold during the stimulation procedure.

11. The apparatus according to any one of claims 1-6, wherein the controller circuitry (64) is configured to drive the stimulation circuitry (24) to pass the one or more intraprocedural-reference pulses between the pair of electrodes (26a, 26b) by driving the stimulation circuitry (24) to pass at least one intraprocedural-reference pulse having a lower amplitude than an amplitude of at least one of the stimulating pulses.

12. The apparatus according to claim 11, wherein the controller circuitry (64) is configured to drive the stimulation circuitry (24) to pass the at least one intraprocedural-reference pulse by driving the stimulation circuitry (24) to pass at least one intraprocedural-reference pulse having a current that is less than 15 mA.

13. The apparatus according to claim 12, wherein the controller circuitry (64) is configured to drive the stimulation circuitry (24) to pass the at least one intraprocedural-reference pulse by driving the stimulation circuitry (24) to pass at least one intraprocedural-reference pulse having a current that is less than 10 mA.

14. The apparatus according to claim 11, wherein the controller circuitry (64) is configured to drive the stimulation circuitry (24) to pass the at least one intraprocedural-reference pulse by driving the stimulation circuitry (24) to pass at least one intraprocedural-reference pulse having a voltage that is less than 15 V.

15. The apparatus according to any one of claims 1-6, wherein the controller circuitry (64) is configured to drive the stimulation circuitry to pass the one or more intraprocedural-reference pulses between the pair of electrodes (26a, 26b) by driving the stimulation circuitry to pass at least one intraprocedural-reference pulse having a shorter duration than a duration of at least one of the stimulating pulses.

Patentansprüche

1. Vorrichtung zur Verwendung mit (i) einer Stimulationsschaltung (24), die ein Elektrodenpaar (26a, 26b) beinhaltet, (ii) einer Messschaltung (28) und (iii) einer Spannungsversorgung (36), die Vorrichtung umfassend eine Steuerung (22), die Folgendes umfasst:

mindestens eine Schnittstelle (62), die konfiguriert ist, um die Steuerung (22) mit der Stimulationsschaltung (24) und der Messschaltung (28) zu koppeln; und
Steuerschaltung (64), die konfiguriert ist, um, während die Elektroden (26a, 26b) an die Haut eines Subjekts gekoppelt sind, einen Stimulationsvorgang auszuführen, durch:

Ansteuern der Stimulationsschaltung (24), um eine Vielzahl von Stimulationsimpulsen zwischen dem Elektrodenpaar (26a, 26b) durchzuleiten,

Ansteuern der Stimulationsschaltung (24), um einen oder mehrere intraprozedurale Referenzimpulse zwischen dem Elektrodenpaar (26a, 26b) durchzuleiten, wobei sich die Referenzimpulse von jedem der Stimulationsimpulse unterscheiden, Empfangen, von der Messschaltung (28), einer intraprozeduralen Impedanz zwischen den Elektroden (26a, 26b), die unter Verwendung der intraprozeduralen Referenzimpulse gemessen wird, und

als Reaktion auf die unter Verwendung der intraprozeduralen Referenzimpulse gemessene Impedanz, jedoch nicht als Reaktion auf eine unter Verwendung der Stimulationsimpulse gemessene Impedanz, Steuern des Stimulationsvorgangs:

wobei die Steuerschaltung (64) konfiguriert ist, während die Elektroden (26a, 26b) an die Haut des Subjekts gekoppelt sind, um vor dem Stimulationsvorgang einen Kalibrierungsvorgang auszuführen, durch:

Ansteuern der Stimulationsschaltung (24), um einen Kalibrierungsreferenzimpuls über das Elektrodenpaar (26a,

- 26b) durchzuleiten,
Messen einer Basisimpedanz zwischen dem Elektrodenpaar (26a, 26b) gemessen wird, und **dadurch gekennzeichnet, dass:**
- Einstellen der Spannungsversorgung (36) auf eine Spannung, die geringfügig höher ist als das Produkt aus der gemessenen Basisimpedanz und einer maximal gewünschten Stimulationsstromstärke, und
die Steuerschaltung (64) konfiguriert ist, um die Spannungsversorgung (36), die auf die geringfügig höhere Spannung eingestellt ist, zum Ausführen des Stimulationsvorgangs zu verwenden.
2. Vorrichtung nach Anspruch 1, wobei die Steuerschaltung (64) konfiguriert ist, um die Stimulationschaltung (24) anzusteuern, um den einen oder die mehreren intraprozeduralen Referenzimpulse durch Ansteuern der Stimulationsschaltung (24) zwischen dem Elektrodenpaar (26a, 26b) durchzuleiten, um einen oder mehrere symmetrische intraprozedurale Referenzimpulse durchzuleiten.
 3. Vorrichtung nach Anspruch 1, wobei die Steuerschaltung (64) konfiguriert ist, um die Stimulationschaltung (24) anzusteuern, um den einen oder die mehreren intraprozeduralen Referenzimpulse durch Ansteuern der Stimulationsschaltung (24) zwischen dem Elektrodenpaar (26a, 26b) durchzuleiten, um einen oder mehrere asymmetrische intraprozedurale Referenzimpulse durchzuleiten.
 4. Vorrichtung nach Anspruch 1, wobei die Steuerschaltung (64) konfiguriert ist, um die Stimulationschaltung (24) anzusteuern, um den einen oder die mehreren intraprozeduralen Referenzimpulse durch Ansteuern der Stimulationsschaltung (24) zwischen dem Elektrodenpaar (26a, 26b) durchzuleiten, um mindestens einen Impuls des Stimulationsvorgangs durch einen der intraprozeduralen Referenzimpulse zu ersetzen.
 5. Vorrichtung nach Anspruch 1, wobei die Steuerschaltung (64) konfiguriert ist, um die Stimulationschaltung (24) anzusteuern, um den einen oder die mehreren intraprozeduralen Referenzimpulse durchzuleiten, ohne einen Impuls des Stimulationsvorgangs durch einen der intraprozeduralen Referenzimpulse zu ersetzen.
 6. Vorrichtung nach Anspruch 1, wobei die Steuerschaltung (64) konfiguriert ist, um die Stimulationschaltung (24) anzusteuern, um den einen oder die mehreren intraprozeduralen Referenzimpulse durch Ansteuern der Stimulationsschaltung (24) zwischen dem Elektrodenpaar (26a, 26b) durchzuleiten, um mindestens einen intraprozeduralen Referenzimpuls mit einer Amplitude, die sich weniger als eine Amplitude von mindestens einem der Stimulationsimpulse ändert, durchzuleiten.
 7. Vorrichtung nach einem der Ansprüche 1-6, wobei die Steuerschaltung (64) konfiguriert ist, um den Stimulationsvorgang als Reaktion auf die gemessene intraprozedurale Impedanz durch Anhalten des Stimulationsvorgangs zu steuern.
 8. Vorrichtung nach einem der Ansprüche 1-6, wobei die Steuerschaltung (64) konfiguriert ist, um die Stimulationsschaltung (24) anzusteuern, um den einen oder die mehreren intraprozeduralen Referenzimpulse zwischen dem Elektrodenpaar (26a, 26b) durchzuleiten, indem die Stimulationsschaltung (24) angesteuert wird, um eine Vielzahl von intraprozeduralen Referenzimpulsen zwischen den jeweiligen Paaren der Stimulationsimpulse durchzuleiten.
 9. Vorrichtung nach einem der Ansprüche 1-6, wobei die Steuerschaltung (64) zu Folgendem konfiguriert ist:

Empfangen, von der Messschaltung (28), der Basisimpedanz zwischen den Elektroden (26a, 26b), vor Empfangen der intraprozeduralen Impedanz zwischen den Elektroden (26a, 26b) empfangen, und
Steuern des Stimulationsvorgangs als Reaktion auf einen Vergleich der intraprozeduralen Impedanz mit einem Schwellenwert, der auf der Basisimpedanz basiert.
 10. Vorrichtung nach Anspruch 9, wobei die Steuerschaltung (64) ferner konfiguriert ist, um den Schwellenwert während des Stimulationsvorgangs adaptiv anzupassen.
 11. Vorrichtung nach einem der Ansprüche 1 bis 6, wobei die Steuerschaltung (64) konfiguriert ist, um die Stimulationsschaltung (24) anzusteuern, um den einen oder die mehreren intraprozeduralen Referenzimpulse zwischen dem Elektrodenpaar (26a, 26b) durchzuleiten, indem die Stimulationsschaltung (24) angesteuert wird, um mindestens einen intraprozeduralen Referenzimpuls mit einer niedrigeren Amplitude als eine Amplitude von mindestens einem der Stimulationsimpulse durchzuleiten.
 12. Vorrichtung nach Anspruch 11, wobei die Steuerschaltung (64) konfiguriert ist, um die Stimulationschaltung (24) anzusteuern, um den mindestens einen intraprozeduralen Referenzimpuls durchzuleiten, indem die Stimulationsschaltung (24) angesteuert wird, um mindestens einen intraprozeduralen Re-

ferenzimpuls mit einer Stromstärke von weniger als 15 mA durchzuleiten.

13. Vorrichtung nach Anspruch 12, wobei die Steuerungschaltung (64) konfiguriert ist, um die Stimulationschaltung (24) anzusteuern, um den mindestens einen intraprozeduralen Referenzimpuls durchzuleiten, indem die Stimulationsschaltung (24) angesteuert wird, um mindestens einen intraprozeduralen Referenzimpuls mit einer Stromstärke von weniger als 10 mA durchzuleiten. 5 10
14. Vorrichtung nach Anspruch 11, wobei die Steuerungschaltung (64) konfiguriert ist, um die Stimulationschaltung (24) anzusteuern, um den mindestens einen intraprozeduralen Referenzimpuls durchzuleiten, indem die Stimulationsschaltung (24) angesteuert wird, um mindestens einen intraprozeduralen Referenzimpuls mit einer Spannung von weniger als 15 V durchzuleiten. 15 20
15. Vorrichtung nach einem der Ansprüche 1 bis 6, wobei die Steuerungschaltung (64) konfiguriert ist, um die Stimulationsschaltung anzusteuern, um den einen oder die mehreren intraprozeduralen Referenzimpulse zwischen dem Elektrodenpaar (26a, 26b) durchzuleiten, indem die Stimulationsschaltung angesteuert wird, um mindestens einen intraprozeduralen Referenzimpuls mit einer kürzeren Dauer als eine Dauer von mindestens einem der Stimulationsimpulse durchzuleiten. 25 30

Revendications

1. Appareil devant être utilisé avec (i) un circuit de stimulation (24) qui comporte une paire d'électrodes (26a, 26b), (ii) un circuit de mesure (28), et (iii) une alimentation en tension (36), l'appareil comprenant un module de commande (22) comprenant : 35 40

au moins une interface (62) configurée pour coupler le module de commande (22) au circuit de stimulation (24) et au circuit de mesure (28) ; et un circuit de commande (64), configuré pour exécuter, pendant que les électrodes (26a, 26b) sont couplées à la peau d'un sujet, une procédure de stimulation en : 45

excitant le circuit de stimulation (24) pour faire passer une pluralité d'impulsions de stimulation entre la paire d'électrodes (26a, 26b),
excitant le circuit de stimulation (24) pour faire passer une ou plusieurs impulsions de référence intraprocedurale entre la paire d'électrodes (26a, 26b), les impulsions de référence étant différentes de chacune des 50 55

impulsions de stimulation, recevant du circuit de mesure (28), entre les électrodes (26a, 26b), une impédance intraprocedurale qui est mesurée au moyen des impulsions de référence intraprocedurale, et en réponse à l'impédance mesurée au moyen des impulsions de référence intraprocedurale, mais pas en réponse à une quelconque impédance mesurée au moyen des impulsions de stimulation, commandant la procédure de stimulation : le circuit de commande (64) est configuré pour exécuter, pendant que les électrodes (26a, 26b) sont couplées à la peau du sujet, une procédure d'étalonnage avant la procédure de stimulation, en :

excitant le circuit de stimulation (24) pour faire passer une impulsions de référence d'étalonnage via la paire d'électrodes (26a, 26b), mesurant l'impédance de base entre la paire d'électrodes (26a, 26b), et **caractérisé par:**

le réglage de l'alimentation en tension (36) à une tension qui est légèrement plus élevée que le produit de l'impédance de base mesurée et d'un courant de stimulation voulu maximum, et le circuit de commande (64) est configuré pour utiliser l'alimentation en tension (36), réglée à la tension légèrement plus élevée, pour exécuter la procédure de stimulation. 55

2. Appareil selon la revendication 1, dans lequel le circuit de commande (64) est configuré pour exciter le circuit de stimulation (24) de manière à faire passer la ou les impulsions de référence intraprocedurale entre la paire d'électrodes (26a, 26b) en excitant le circuit de stimulation (24) pour faire passer une ou plusieurs impulsions de référence intraprocedurale symétriques.
3. Appareil selon la revendication 1, dans lequel le circuit de commande (64) est configuré pour exciter le circuit de stimulation (24) de manière à faire passer la ou les impulsions de référence intraprocedurale entre la paire d'électrodes (26a, 26b) en excitant le circuit de stimulation (24) de manière à faire passer une ou plusieurs impulsions de référence intraprocedurale asymétriques.
4. Appareil selon la revendication 1, dans lequel le cir-

cuit de commande (64) est configuré pour exciter le circuit de stimulation (24) de manière à faire passer la ou les impulsions de référence intraprocédurale entre la paire d'électrodes (26a, 26b) en excitant le circuit de stimulation (24) de manière à substituer au moins une impulsion de la procédure de stimulation avec une des impulsions de référence intraprocédurale.

5. Appareil selon la revendication 1, dans lequel le circuit de commande (64) est configuré pour exciter le circuit de stimulation (24) de manière à faire passer la ou les impulsions de référence intraprocédurale sans substitution d'une quelconque impulsion de la procédure de stimulation avec une des impulsions de référence intraprocédurale. 10
6. Appareil selon la revendication 1, dans lequel le circuit de commande (64) est configuré pour exciter le circuit de stimulation (24) de manière à faire passer la ou les impulsions de référence intraprocédurale entre la paire d'électrodes (26a, 26b) en excitant le circuit de stimulation (24) de manière à faire passer au moins une impulsion de référence intraprocédurale ayant une amplitude qui varie moins qu'une amplitude d'au moins une des impulsions de stimulation. 20
7. Appareil selon l'une quelconque des revendications 1-6, dans lequel le circuit de commande (64) est configuré pour commander la procédure de stimulation en réponse à l'impédance intraprocédurale mesurée en arrêtant la procédure de stimulation. 30
8. Appareil selon l'une quelconque des revendications 1-6, dans lequel le circuit de commande (64) est configuré pour exciter le circuit de stimulation (24) de manière à faire passer une ou plusieurs impulsions de référence intraprocédurale entre la paire d'électrodes (26a, 26b) en excitant le circuit de stimulation (24) de manière à faire passer une pluralité d'impulsions de référence intraprocédurale entre les paires respectives des impulsions de stimulation. 35 40
9. Appareil selon l'une quelconque des revendications 1-6, dans lequel le circuit de commande (64) est configuré pour : 45
recevoir, du circuit de mesure (28), l'impédance de base entre les électrodes (26a, 26b) avant de recevoir l'impédance intraprocédurale entre les électrodes (26a, 26b), et
commander la procédure de stimulation en réponse à la comparaison de l'impédance intraprocédurale à un seuil qui est basé sur l'impédance de base. 50 55

10. Appareil selon la revendication 9, dans lequel le cir-

cuit de commande (64) est en outre configuré pour ajuster le seuil de manière adaptative pendant la procédure de stimulation.

- 5 11. Appareil selon l'une quelconque des revendications 1-6, dans lequel le circuit de commande (64) est configuré pour exciter le circuit de stimulation (24) de manière à faire passer la ou les impulsions de référence intraprocédurale entre la paire d'électrodes (26a, 26b) en excitant le circuit de stimulation (24) de manière à faire passer au moins une impulsion de référence intraprocédurale ayant une amplitude plus basse qu'une amplitude d'au moins une des impulsions de stimulation. 10
12. Appareil selon la revendication 11, dans lequel le circuit de commande (64) est configuré pour exciter le circuit de stimulation (24) de manière à faire passer la ou les impulsions de référence intraprocédurale en excitant le circuit de stimulation (24) de manière à faire passer au moins une impulsion de référence intraprocédurale ayant un courant qui est inférieur à 15 mA. 15
13. Appareil selon la revendication 12, dans lequel le circuit de commande (64) est configuré pour exciter le circuit de stimulation (24) de manière à faire passer la ou les impulsions de référence intraprocédurale en excitant le circuit de stimulation (24) de manière à faire passer au moins une impulsion de référence intraprocédurale ayant un courant qui est inférieur à 10 mA. 25 30
14. Appareil selon la revendication 11, dans lequel le circuit de commande (64) est configuré pour exciter le circuit de stimulation (24) de manière à faire passer la ou les impulsions de référence intraprocédurale en excitant le circuit de stimulation (24) de manière à faire passer au moins une impulsion de référence intraprocédurale ayant une tension qui est inférieure à 15 V. 35 40
15. Appareil selon l'une quelconque des revendications 1-6, dans lequel le circuit de commande (64) est configuré pour exciter le circuit de stimulation de manière à faire passer la ou les impulsions de référence intraprocédurale entre la paire d'électrodes (26a, 26b) en excitant le circuit de stimulation pour faire passer au moins une impulsion de référence intraprocédurale ayant une durée plus courte qu'une durée d'au moins une des impulsions de stimulation. 45 50 55

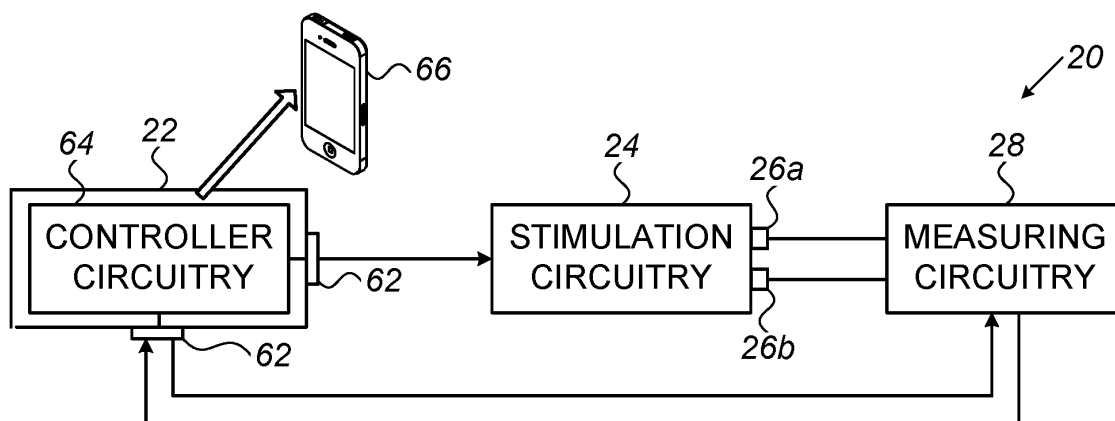


FIG. 1

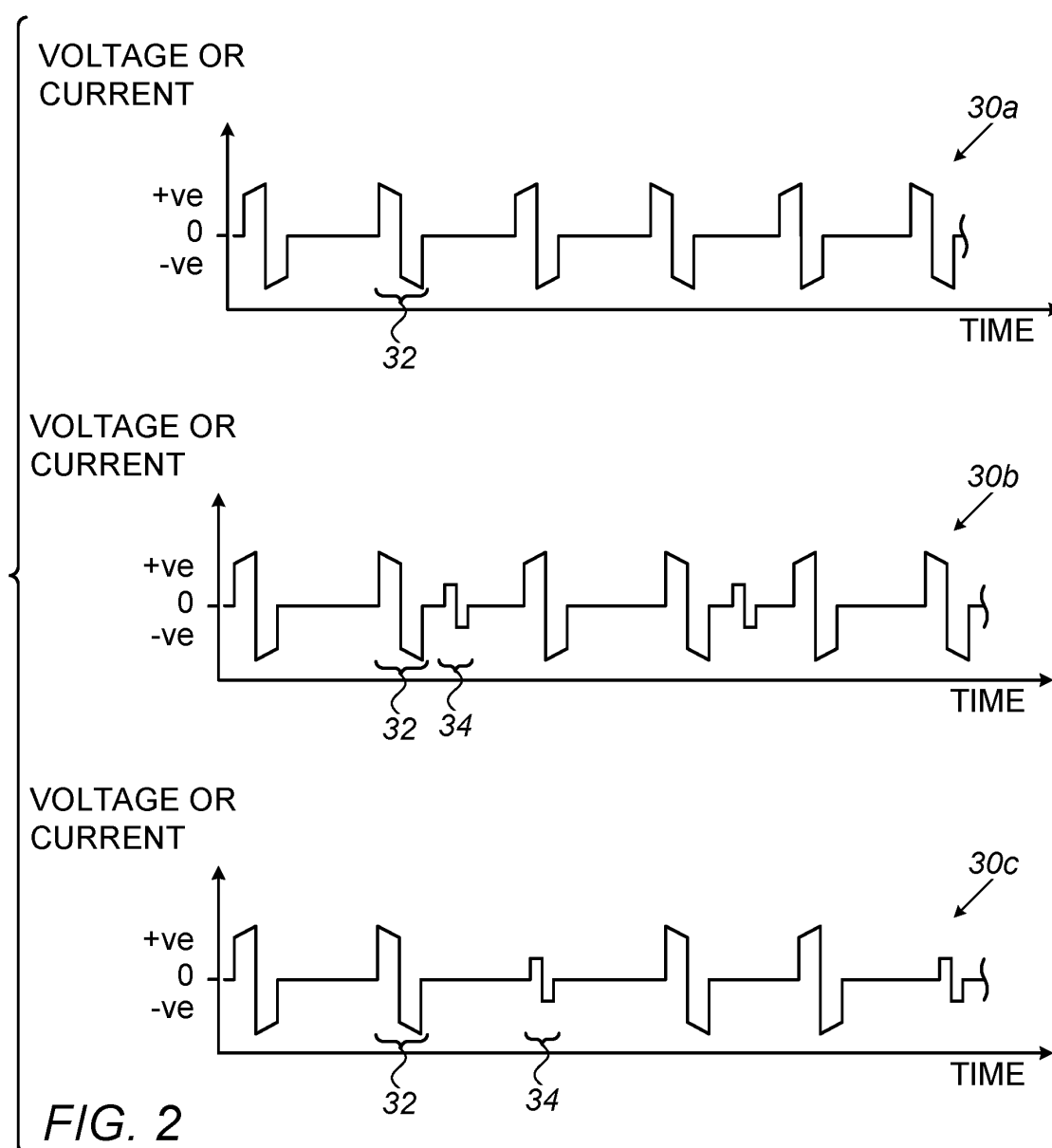


FIG. 2

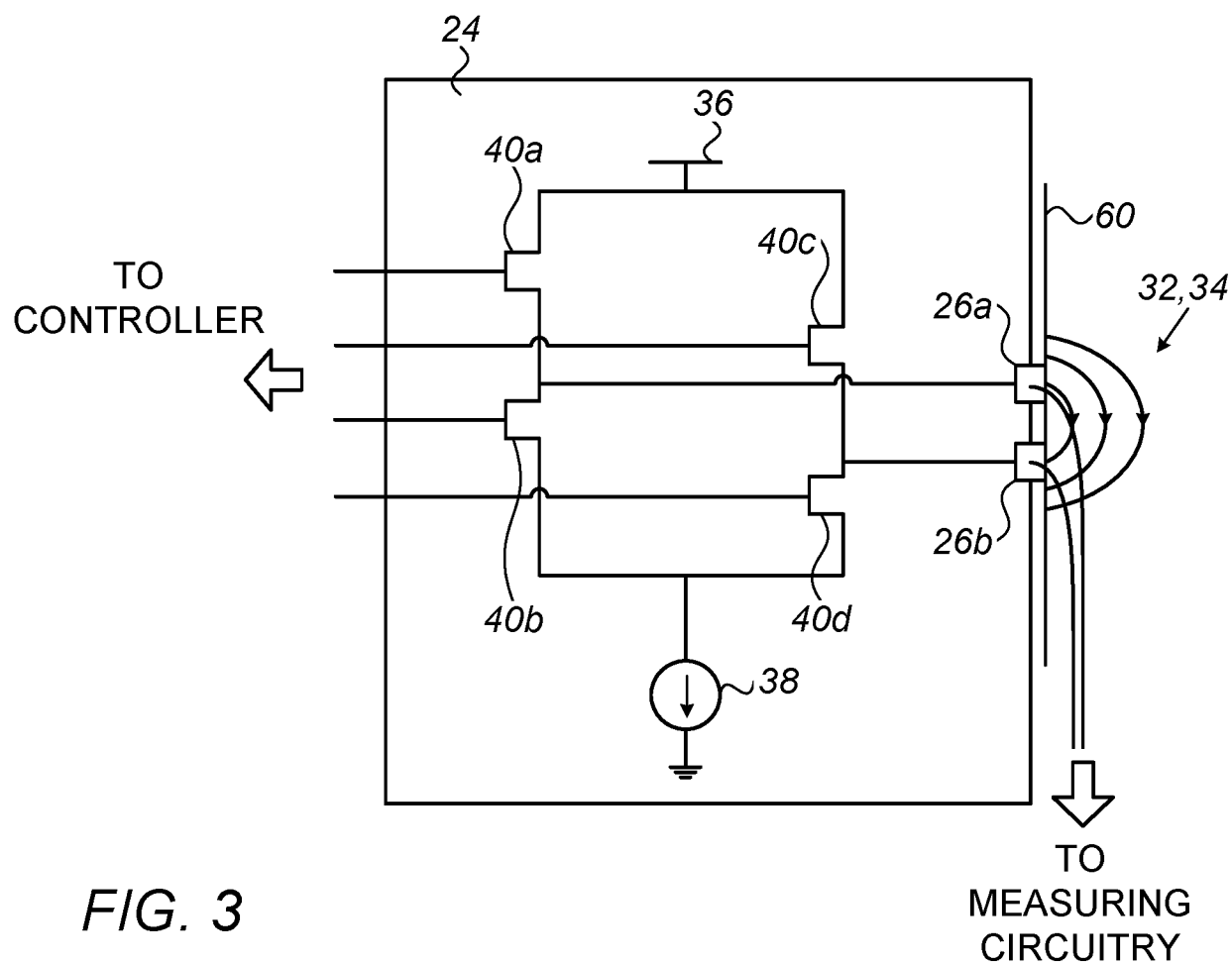


FIG. 3

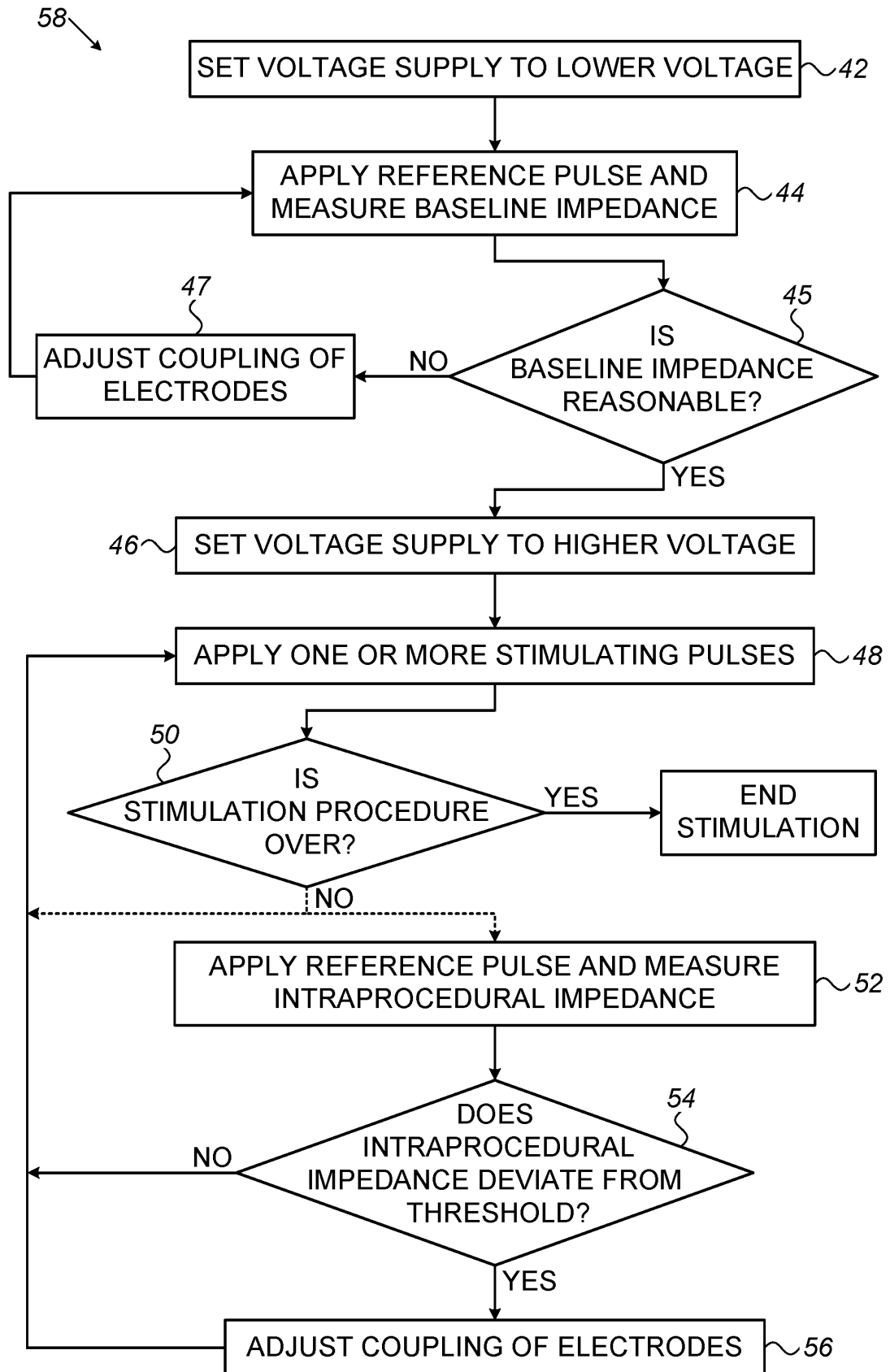


FIG. 4

REFERENCES CITED IN THE DESCRIPTION

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外部链接	Espacenet		

摘要(译)

本文描述的实施例包括控制器 (22)。控制器包括至少一个接口 (62)，该接口将控制器耦合到刺激电路 (24) 和测量电路，刺激电路 (24) 包括一对电极 (26a, 26b)，并且耦合到测量电路，并且还包括控制器电路 (64)。当电极耦合到受试者的皮肤 (60) 时，控制器电路通过接口驱动刺激电路以 (i) 在电极之间传递多个刺激脉冲 (32)，并且 (ii) 通过一个或多个电极之间有更多参考脉冲 (34)，参考脉冲不同于每个刺激脉冲。控制器从测量电路接收使用参考脉冲测量的电极之间的阻抗。响应于使用参考脉冲测量的阻抗，而不响应于使用刺激脉冲测量的任何阻抗，控制器电路控制刺激过程。还描述了其他实施例。