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NEBULIZER THROUGH A SMARTPHONE****Publication Classification**(71) Applicant: **KONINKLIJKE PHILIPS N.V.**,
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(2013.01); *A61M 2205/825* (2013.01)(21) Appl. No.: **14/913,144**(22) PCT Filed: **Aug. 21, 2014**(86) PCT No.: **PCT/IB2014/064001**

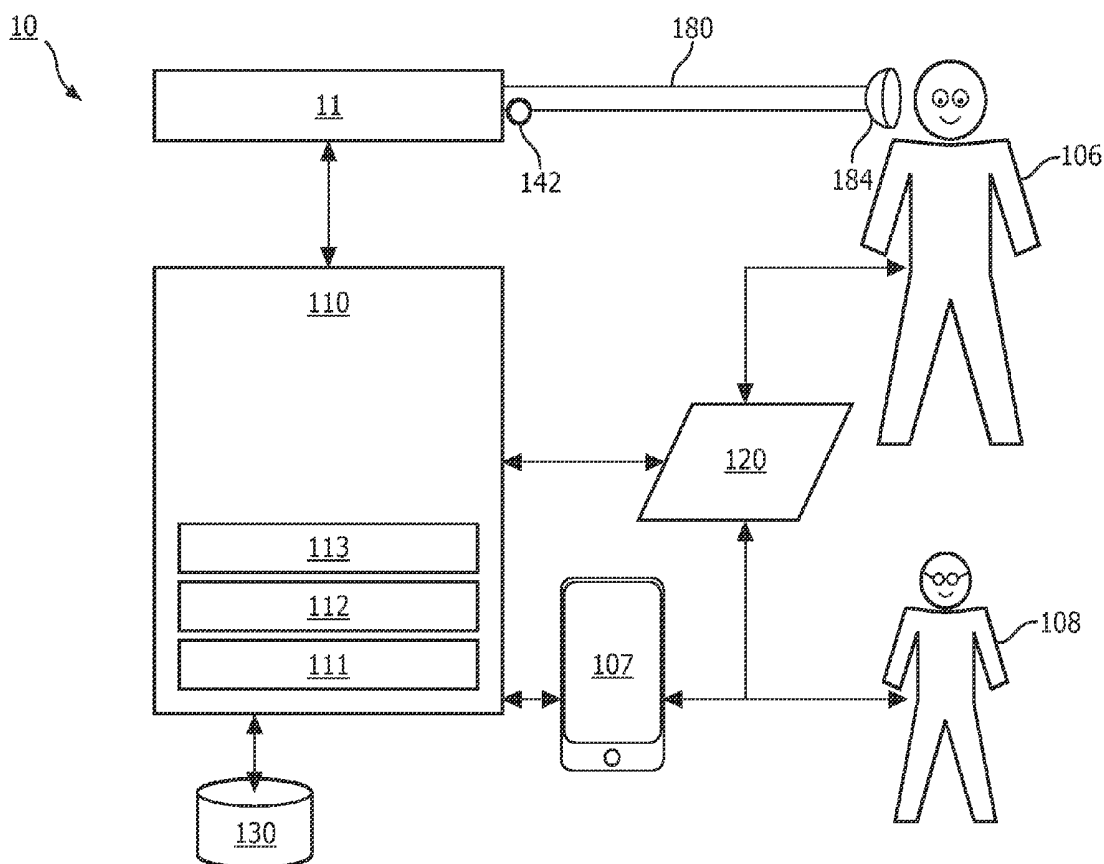
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(57)

ABSTRACT

Systems and methods for delivering medicament using a nebulizer to a subject are controlled and/or powered by a computing device such as a smartphone. Connections may use a USB port, docking connector, and/or headphone jack.



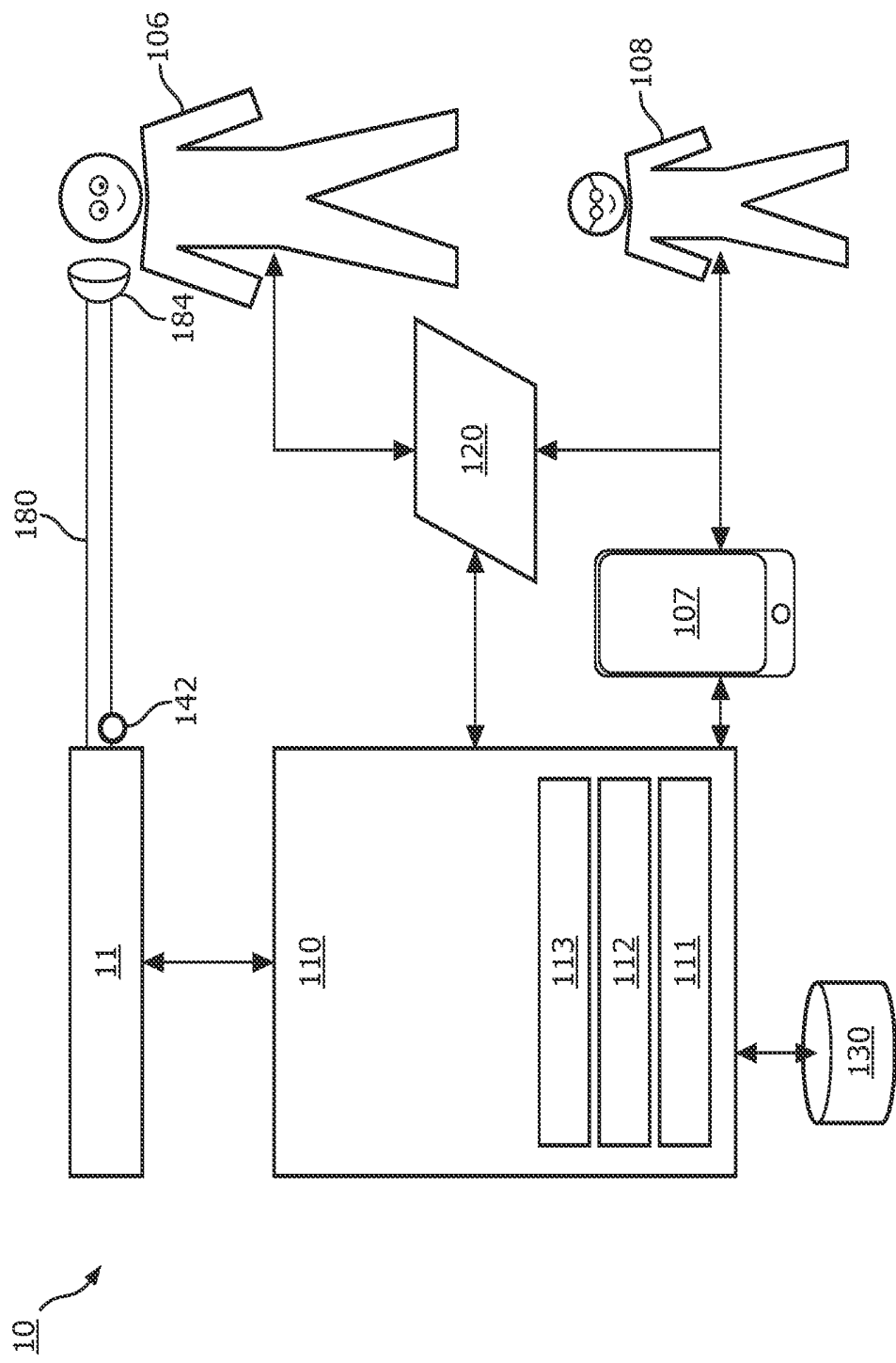


FIG. 1

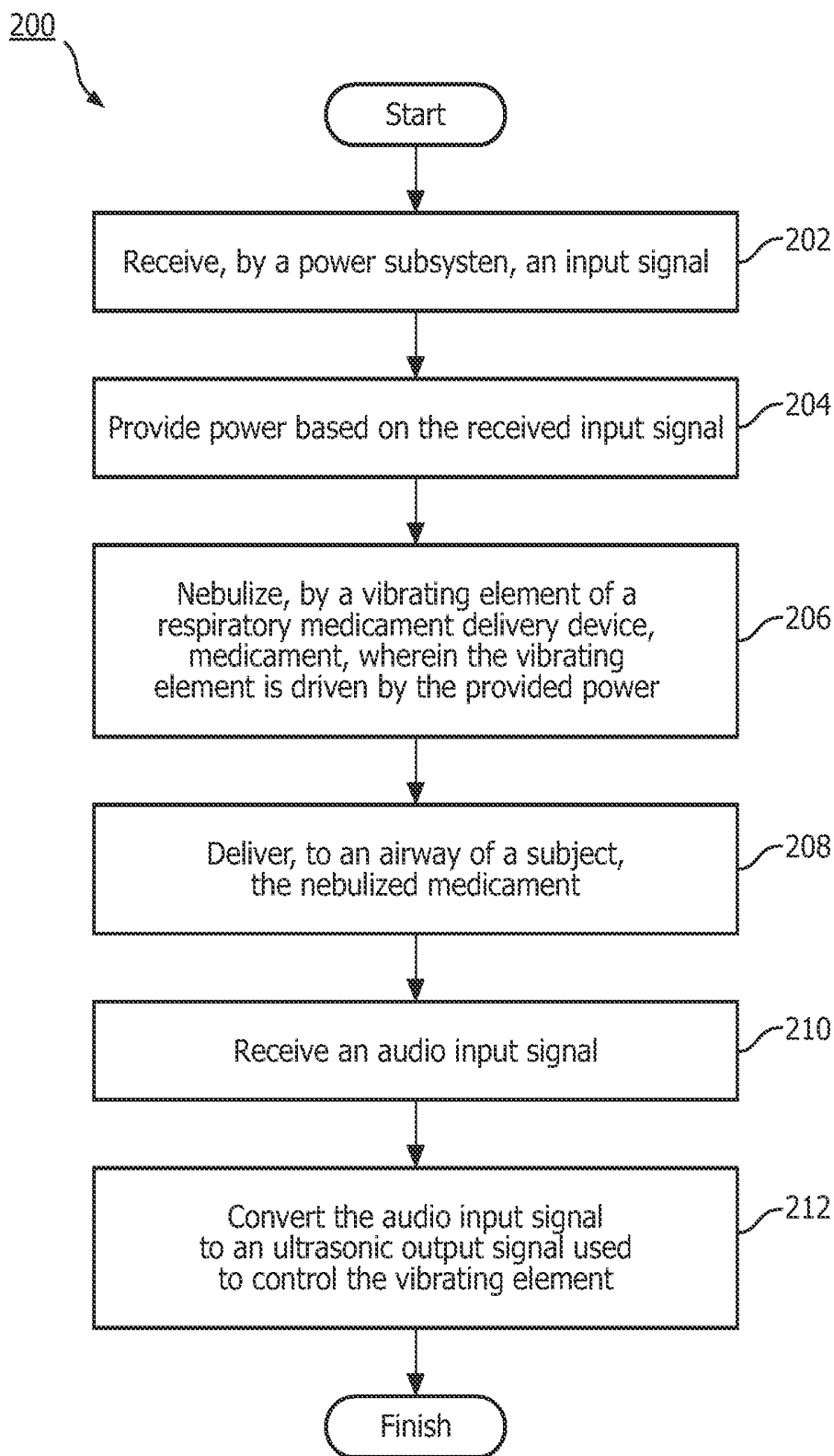


FIG. 2

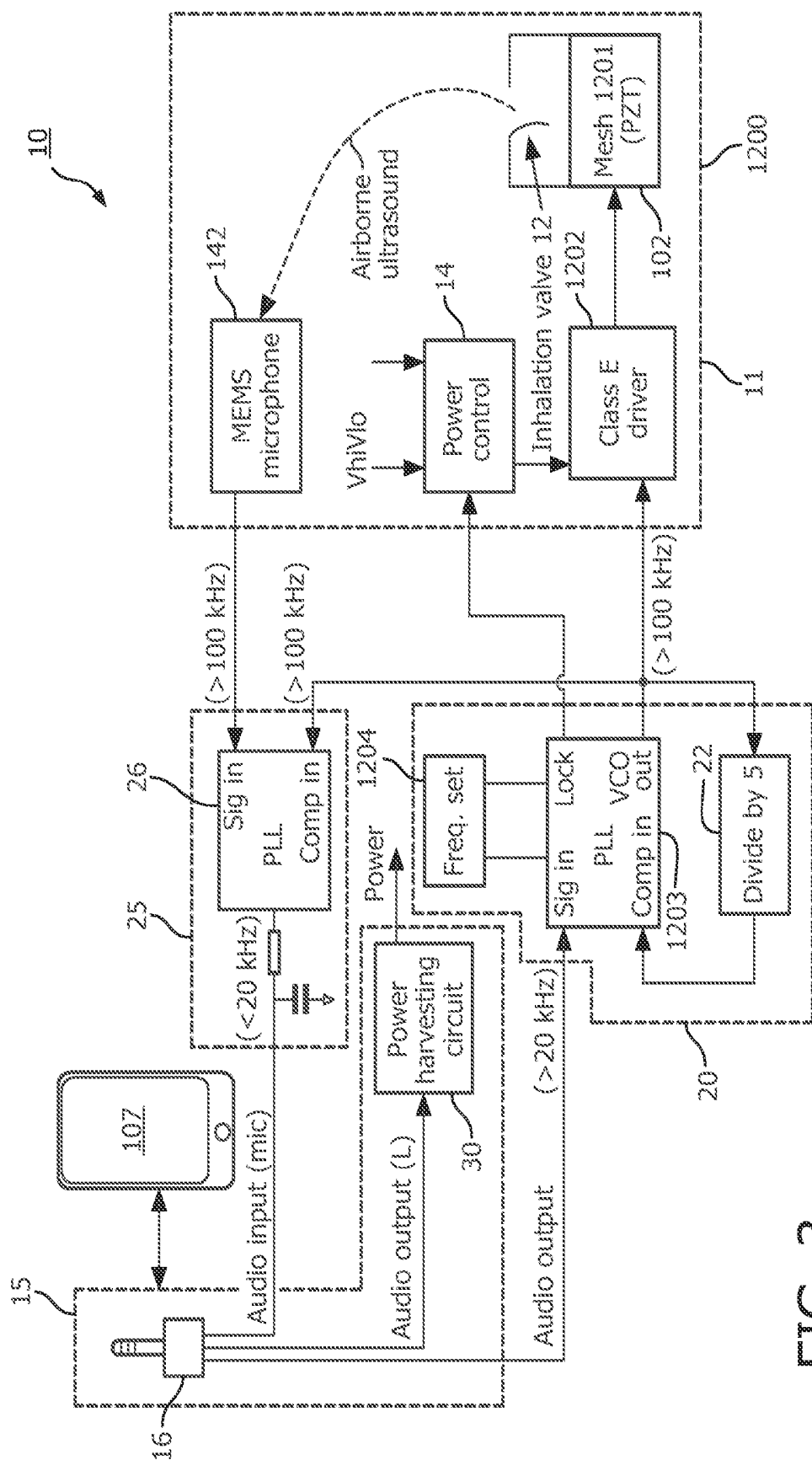


FIG. 3

CONTROLLING A MEDICATION NEBULIZER THROUGH A SMARTPHONE

BACKGROUND

[0001] 1. Field

[0002] The present disclosure pertains to systems and methods that provide power and/or control for respiratory drug delivery devices, and, in particular, to operate a medication nebulizer, at least in part, through a portable computing device such as a smartphone.

[0003] 2. Description of the Related Art

[0004] Respiratory drug delivery devices are used to treat many types of patients. Some types of respiratory drug delivery devices, for example nebulizers, include components that move at frequencies in the ultrasonic range. Device performance may depend on controlling such components with sufficient accuracy and efficacy. Positive treatment outcomes depend on many factors, including patient adherence.

SUMMARY

[0005] Accordingly, one or more embodiments provide a system configured to deliver medicament to a subject. The system comprises a power subsystem, a respiratory medicament delivery device, and a sound input conversion subsystem. The power subsystem is configured to receive an input signal and provide power based on the received input signal. The respiratory medicament delivery device includes a vibrating element that is driven by the power provided by the power subsystem. The respiratory medicament delivery device is configured to deliver medicament, responsive to nebulization of the medicament by the vibrating element, to an airway of a subject. The sound input conversion subsystem is configured to receive an audio input signal. The sound input conversion subsystem is further configured to convert the audio input signal to an ultrasonic output signal. The vibrating element is controlled based on the ultrasonic output signal.

[0006] It is yet another aspect of one or more embodiments to provide a method of delivering medicament to a subject. The method comprises receiving, by a power subsystem, an input signal; providing power based on the received input signal; nebulizing, by a vibrating element of a respiratory medicament delivery device, medicament, wherein the vibrating element is driven by the provided power; delivering, to an airway of a subject, the nebulized medicament; receiving an audio input signal; and converting the audio input signal to an ultrasonic output signal. The step of nebulizing medicament is performed by controlling the vibrating element based on the ultrasonic output signal.

[0007] It is yet another aspect of one or more embodiments to provide a system configured to deliver medicament to a subject. The system comprises means for receiving an input signal; means for providing power based on the received input signal; means for nebulizing medicament, wherein the means is driven by the provided power; delivery means for delivering, to an airway of a subject, the nebulized medicament; means for receiving an audio input signal; and means for converting the audio input signal to an ultrasonic output signal. Operation of the means for nebulizing medicament is performed by controlling the vibrating element based on the ultrasonic output signal.

[0008] These and other aspects, features, and characteristics of the present disclosure, as well as the methods of opera-

tion and functions of the related elements of structure and the combination of parts and economies of manufacture, will become more apparent upon consideration of the following description and the appended claims with reference to the accompanying drawings, all of which form a part of this specification, wherein like reference numerals designate corresponding parts in the various figures. It is to be expressly understood, however, that the drawings are for the purpose of illustration and description only and are not intended as a definition of any limits.

BRIEF DESCRIPTION OF THE DRAWINGS

[0009] FIGS. 1 and 3 schematically illustrate systems configured to deliver medicament to a subject, in accordance with one or more embodiments described in this disclosure; and

[0010] FIG. 2 illustrates a method of delivering medicament to a subject in accordance with one or more embodiments described in this disclosure.

DETAILED DESCRIPTION OF EXEMPLARY EMBODIMENTS

[0011] As used herein, the singular form of “a”, “an”, and “the” include plural references unless the context clearly dictates otherwise. As used herein, the statement that two or more parts or components are “coupled” shall mean that the parts are joined or operate together either directly or indirectly, i.e., through one or more intermediate parts or components, so long as a link occurs. As used herein, “directly coupled” means that two elements are directly in contact with each other. As used herein, “fixedly coupled” or “fixed” means that two components are coupled so as to move as one while maintaining a constant orientation relative to each other.

[0012] As used herein, the word “unitary” means a component is created as a single piece or unit. That is, a component that includes pieces that are created separately and then coupled together as a unit is not a “unitary” component or body. As employed herein, the statement that two or more parts or components “engage” one another shall mean that the parts exert a force against one another either directly or through one or more intermediate parts or components. As employed herein, the term “number” shall mean one or an integer greater than one (i.e., a plurality).

[0013] Directional phrases used herein, such as, for example and without limitation, top, bottom, left, right, upper, lower, front, back, and derivatives thereof, relate to the orientation of the elements shown in the drawings and are not limiting upon the claims unless expressly recited therein.

[0014] FIG. 1 schematically illustrates a system 10 configured to deliver medicament to a subject 106. System 10 may include one or more of a respiratory medicament delivery device 11, one or more sensors 142, one or more processors 110, a parameter determination module 111, a control module 112, an adherence module 113, an electronic storage 130, a user interface 120, a computing device 107, and/or other components and/or computer program modules.

[0015] Respiratory medicament delivery device 11 may be one or more of a jet nebulizer, a mesh nebulizer, an ultrasonic wave nebulizer, a nebulizer, an aerosol generator, and/or another device configured to deliver medicament to a subject through, at least in part, respiration of the subject. In some implementations, respiratory medicament delivery device 11 may include one or more features of one or more of these

devices. Respiratory medicament delivery device **11** may be configured to combine breathable gas, e.g. air, and medicament, e.g. liquid and/or aerosolized drugs, for delivery to the airway of subject **106**.

[0016] Respiratory medicament delivery device **11** may emit energy during operation, including, but not limited to, ultrasonic energy and/or energy in the audible part of the spectrum. As used herein, the audible part of the spectrum may be used to refer to frequencies below about 20 kHz. Respiratory medicament delivery device **11** may be configured such that a constituent component of respiratory medicament delivery device **11** displaces air and/or gas through mechanical movement at an ultrasonic frequency. Such displacement may be indirect, e.g. when a moving component is coupled to another component which transfers energy to air and/or gas. In some implementations, respiratory medicament delivery device **11** may emit energy in a frequency range between about 18 kHz and about 200 kHz, and/or any sub-range thereof. The specific frequency range may depend on the type of respiratory medicament delivery device that is used. For example, mesh nebulizers may include one or more vibrating elements that operate and emit ultrasonic energy at frequencies of about 100 kHz, between about 100 kHz and about 130 kHz, between about 120 kHz and 200 kHz, and/or other suitable frequencies. In some implementations, nebulizers may operate at frequencies of 1 MHz or more.

[0017] Computing device **107** may include one or more of a headphone connector, a universal serial bus (USB) connector, a docking connector, and/or other standardized connectors commonly used in the fields of portable consumer electronics. In some implementations, computing device **107** may include a power source, including but not limited to a (rechargeable) battery. In some implementations, computing device **107** may include information processing capabilities. By way of non-limiting example, computing device **107** may include one or more of a desktop computer, a laptop computer, a handheld computer, a NetBook, a tablet, a smartphone, a wireless telephone, a portable electronic device, a handheld communication device, a digital camera, a gaming console, and/or other computing platform(s).

[0018] By virtue of this disclosure, one or more of power and/or control for respiratory medicament delivery device **11** may be provided by and/or through computing device **107**. In some implementations, computing device **107** may be configured to provide power to respiratory medicament delivery device **11**. In some implementations, computing device **107** may be configured to provide one or more control functions for the operation of respiratory medicament delivery device **11**. In some implementations, computing device **107** may be configured to provide (adherence) monitoring for respiratory medicament delivery device **11**. Provision of one or more functions external to respiratory medicament delivery device **11** may allow a reduction in complexity, components, and/or materials for respiratory medicament delivery device **11**. For example, in some implementations, respiratory medicament delivery device **11** may not need to include a battery or other type of power source, thereby simplifying the design and manufacture of respiratory medicament delivery device **11**.

[0019] In some implementations, respiratory medicament delivery device **11** may be operated, at least in part, by care provider **108**, e.g. a medical professional. In some implementations, respiratory medicament delivery device **11** may be operated, at least in part, through computing device **107**, e.g. through a software application running on the device.

[0020] In some implementations, respiratory medicament delivery device **11** may include a conduit **180** to guide gas and/or medicament to subject **106** and/or a mouthpiece **184** to deliver gas and/or medicament from conduit **180** to the airway of subject **106**.

[0021] In some implementations, respiratory medicament delivery device **11** may include a mesh nebulizer and/or components/features thereof. In some implementations, respiratory medicament delivery device **11** may include an ultrasonic wave nebulizer and/or components/features thereof. In some implementations, respiratory medicament delivery device **11** may include an aerosol generator and/or components/features thereof. Mesh nebulizers, ultrasonic wave nebulizers, aerosol generators, and/or combinations thereof may include one or more piezoelectric elements to provide mechanical vibration and thus displacement of a medium, e.g. liquid or air. Nebulizers filled with liquid may include moving components that transfer ultrasonic energy to air and/or gas. In some implementations, one or more other surfaces in direct contact with air and/or gas may move as a result of the motion of, e.g., a piezoelectric element. Any vibrating surface may emit ultrasonic energy. For example, the backside of a piezoelectric element may contact (and/or be coupled with) air and/or gas. In some implementations, the piezoelectric element is coupled with a mesh (e.g. a mesh nebulizer) having a side that is directly (or indirectly) in contact with air and/or gas. In some implementations, a static mesh may be placed at some harmonic distance from a vibrating piezoelectric element.

[0022] Piezoelectric elements may achieve maximum displacement at one or more particular frequencies, referred to as resonant frequencies. Maximum displacement may be targeted as a preferred mode of operation (and/or the operating frequency). The operating frequency may characterize operation of the piezoelectric element and/or respiratory medicament delivery device **11**. Operating conditions and/or maximum displacement may change over time, e.g. depending on the amount of available medicament within the device, the loading, drift of an oscillator used with/within the device, wear and tear of the device, ambient operating conditions such as temperature, humidity, atmospheric pressure, air density, and/or other factors that may change over time. Operating conditions and/or maximum displacement may differ between individual devices, e.g. based on construction, assembly, and/or other device-specific conditions. The particular operating condition that has maximum displacement may be assumed to coincide, or at least be close to, the operating condition in which respiratory medicament delivery device **11** emits a maximum amount of ultrasonic energy. As used herein, the term "maximum" may refer to a local maximum in a specific range of operation.

[0023] Operational parameters for respiratory medicament delivery device **11** may be adjusted to track changes in (maximum) displacement, operating conditions, emitted (ultrasonic) energy, measured parameters, and/or other changes. Adjustments may be based on (feedback of) measurements of ultrasonic energy emitted by respiratory medicament delivery device **11**, e.g. in a breath-actuated mode of operation. In some implementations, adjustments may be made in real-time or near-real-time. In some implementations, adjustments may be made automatically, autonomously, and/or without manual user intervention. In some implementations, respiratory medicament delivery device **11** may include an electronic oscillator or similar device/component to control

the driving frequency of the piezoelectric element and/or other component configured for intentional displacement of, e.g., a medium.

[0024] One or more sensors **142** of system **10** in FIG. **1** are configured to generate output signals representing one or more characteristics of ultrasonic energy emitted by respiratory medicament delivery device **11**. In some implementations, sensor **142** may include a microphone (interchangeably referred to as microphone **142**). For example, sensor **142** may include a microphone constructed as a micro-electro-mechanical system (MEMS) or nano-electro-mechanical system (NEMS). As used herein, the term “MEMS” may be used to refer to either MEMS or NEMS. As used in this disclosure, the term “microphone” may be used to refer to a MEMS microphone, and may be used for audible and/or ultrasonic frequencies/sounds.

[0025] The one or more sensors **142** may include an accelerometer, positional sensor, movement sensor, light sensor, infra-red (IR) sensor, electromagnetic sensor, electrode, tilt meter, (video) camera, and/or other sensors. The illustration of sensor **142** including one member in FIG. **1** is not intended to be limiting. In some embodiments, system **10** may use multiple sensors. The illustration of the location of sensor **142** as depicted in FIG. **1** is not intended to be limiting. An individual sensor **142** may be located at or near (a body part of) subject **106**, embedded and/or integrated in respiratory medicament delivery device **11**, and/or at other locations. Resulting output signals or conveyed information from one or more sensors **142** may be transmitted to processor **110**, user interface **120**, electronic storage **130**, and/or other components of system **10**. Transmission may be wired and/or wireless.

[0026] The one or more sensors **142** may be configured to generate output signals in an ongoing manner, e.g. before, during, and/or after delivery of medicament. This may include generating signals intermittently, periodically (e.g. at a sampling rate), continuously, continually, at varying intervals, and/or in other ways that are ongoing. The sampling rate may be about 10^{-9} second, about 10^{-8} second, about 10^{-7} second, 10^{-6} second, 10^{-5} second, 10^{-4} second, 0.001 second, 0.01 second, 0.1 second, 1 second, about 10 seconds, about 1 minute, and/or other sampling rates. It is noted that multiple individual sensors **142** may operate using different sampling rates, as appropriate for the particular output signals and/or (frequencies related to particular) parameters and/or characteristics derived therefrom. For example, in some embodiments, the generated output signals may be considered as a vector of output signals, such that a vector includes multiple samples of information conveyed related to one or more parameters and/or characteristics. A particular parameter or characteristic determined in an ongoing manner from a vector of output signals may be considered as a vector of that particular parameter or characteristic.

[0027] In some implementations, sensor **142** may be a MEMS microphone configured and/or arranged to measure ultrasonic energy transferred from any flat and/or curved surface within respiratory medicament delivery device **11** and/or any such exterior surface of respiratory medicament delivery device **11**.

[0028] In some implementations, sensor **142** may be configured to generate output signals conveying measurements related to gas parameters of respiratory airflow, parameters related to airway mechanics, parameters related to respiratory timing, and/or other parameters. Gas parameters may include flow, (airway) pressure, humidity, velocity, acceleration, and/

or other gas parameters. Output signals may convey measurements related to respiratory parameters. Sensor **142** may be in fluid communication with conduit **180** and/or mouthpiece **184**. Sensor **142** may generate output signals related to physiological parameters pertaining to subject **106**. Parameters may be associated with the state and/or condition of an airway of subject **106**, the breathing of subject **106**, the gas breathed by subject **106**, the composition of the gas breathed by subject **106**, the delivery of the gas to the airway of subject **106**, and/or a respiratory effort by the subject.

[0029] By way of illustration, FIG. **3** schematically illustrates a system **10** that includes respiratory medicament delivery device **11** (as depicted including a mesh nebulizer **1200** and an inhalation valve **12**), (MEMS) microphone **142**, a power subsystem **15** (as depicted including a power harvesting circuit **30** and a connector **16**), a sound input conversion subsystem **20**, a sound output conversion subsystem **25**, and/or other components. Components of system **10** may be included, omitted, and/or replaced by other components independently of each other. In some implementations, system **10** may include fewer components and/or different components than depicted in FIG. **3**. By way of non-limiting example, in some implementations, system **10** may not include a sound output conversion subsystem, and/or not include a power harvesting circuit.

[0030] Referring to FIG. **3**, mesh nebulizer **1200** may include one or more of a vibrating element **102** (as depicted including a mesh **1201**), a class E driver **1202**, power control **14**, and/or other components.

[0031] Power subsystem **15** may include one or more of power harvesting circuit **30**, connector **16**, and/or other components. In some implementations, power subsystem **15** may include one or more cable to implement connections described in this disclosure and/or illustrated in the figures. Connector **16** may include one or more of a cable, a headphone jack (including but not limited to a 3.5 mm jack), an earphone jack, a microphone connector, a telephone connector, a TS connector, a TRS connector, a TRRS connector, an audio jack, a docking connector (including but not limited to an iPhone™ docking connector), a docking station (including but not limited to an iPhone™ docking station), a universal serial bus (USB) connector, an XLR connector, and/or another type of connector. Power subsystem **15** may be configured to receive an input signal and provide power based on and/or from the received input signal. In some implementations, the received input signal may include one or more audio signals. In some implementations, the input signal may be received from a computing device, including but not limited to computing device **107**. In some implementations, connector **16** may be used simultaneously for input and output. In some implementations, system **10** may include a cable to connect power subsystem **15** and computing device **107**.

[0032] In some implementations, power harvesting circuit **30** may be configured to harvest power from one or more signals of power subsystem **15**. For example, power harvesting circuit may be configured to provide power from one of the two audio signals provided through connector **16** (as depicted by label “audio output (L)”). In some implementations, power harvesting circuit **30** may provide power to a nebulizer and/or droplet generator that is based on Fourier-horn technology. In some implementations, power subsystem **15** may be configured to provide power through a USB power port (as depicted by label “USB power out”).

[0033] Sound input conversion subsystem 20 may include one or more of a PLL 1203, a frequency set 1204, a divider circuit 22, and/or other components. Sound input conversion subsystem 20 may be configured to receive an input signal (by way of non-limiting example, an audio input signal). Sound input conversion subsystem 20 may be configured to convert an input signal (e.g. an input signal received from and/or through power subsystem 15) to an ultrasonic output signal. PLL 1203 may include inputs “signal in” (or sig in) and “comparator in” (or comp in) and outputs “VCO-out” and “lock,” all of which may be standard for PLLs. Output “VCO-out” may loop back to input “comparator in” through divider circuit 22 (as depicted by way of non-limiting example, a divide-by-five circuit). PLL 1203 may be configured to provide a driving frequency for mesh 1201 and/or a vibrating element of respiratory medicament delivery device 11 that is five times higher (and thus ultrasonic) than the input frequency (through a suitable driver such as Class E driver 1202). The factor for divider circuit 22 is not limited to 5; this is merely exemplary to illustrate the conversion of an audible (or barely audible) input signal of about 20 kHz to an ultrasonic signal of about 100 kHz, used to drive mesh 1201.

[0034] In some implementations, PLL 1203 may be configured to adjust the driving frequency based on a phase difference between the ultrasonic energy measured through microphone 142 and the signal/frequency used to drive mesh 1201 (e.g. from output VCO-out). Note that microphone 142 may need to be positioned such that contact with aerosol is avoided or minimized, e.g. by placing microphone 142 at a suitable harmonic distance (i.e. one or more cycles) from mesh 1201. Note that the signal from output VCO-out may be a square wave, whereas the signal from mesh 1201 may be a sinusoid, though their frequencies are necessarily the same.

[0035] If and/or when the operating frequency of mesh 1201 changes away from resonance, the energy emitted by mesh 1201 will decrease in amplitude (due to the impedance curve of the element used to drive mesh 1201), effectively increasing the phase difference. In response, PLL 1203 may adjust its output frequency to counteract this condition. In some implementations, mesh nebulizer 1200 may include frequency set 1204 configured to manually and/or programmatically control PLL 1203.

[0036] PLL 1203 may be configured, once it is locked, to adjust operating conditions such that the phase difference is minimized, and the energy amplitude (at least locally) maximized. The features described in this disclosure may be used to detect conditions including sputter, end of treatment, and/or other conditions.

[0037] Referring to FIG. 3, in some implementations, system 10 includes an inhalation valve 12 (e.g. an inhalation flap valve). Inhalation valve 12 may be configured to move responsive to a flow of air and/or gas. Inhalation valve 12 may be included in a flow path of respiratory medicament delivery device 11. For example, inhalation valve 12 may be configured to move responsive to respiration by subject 106. For example, inhalation valve 12 may open responsive to inhalation by subject 106 and/or close responsive to exhalation by subject 106, thus forming a basis for breath-actuation. Inhalation valve 12 may be configured and/or arranged to reduce the ultrasonic energy received by microphone 142.

[0038] By virtue of inhalation valve 12, the magnitude of the measured ultrasonic energy of respiratory medicament delivery device 11 may vary with a position of inhalation valve 12 (e.g. being open or closed). The measured magnitude

may be used to control operation of respiratory medicament delivery device 11 and/or monitor respiratory parameters (e.g. as indicative of patient adherence). For example, such information may be used to control delivery of medicament to subject 106. This may, e.g., prevent wasting medicament during exhalation. Referring to FIG. 3, in some implementations, system 10 may be configured to adjust the operating frequency (e.g. off-resonance) and/or reduce (drive) power responsive to the inhalation flap valve being closed. As a result, aerosol production may be reduced and/or halted; at least until the inhalation flap valve is opened upon the next inhalation by subject 106. Such a mode of operation may be referred to as breath-actuated. Variations using an exhalation (flap) valve are considered within the scope of this disclosure.

[0039] Sound output conversion subsystem 25 may include one or more of a PLL 26, and/or other components (e.g. as depicted in FIG. 3). PLL 26 may be structurally similar to other PLLs depicted in FIG. 3. Sound output conversion subsystem 25 may be configured to receive an ultrasonic signal from mesh nebulizer 1200 and/or MEMS microphone 142. By virtue of input “comparator in” (or comp in) being provided by the same divider circuit 22 as described elsewhere in relation to sound input conversion subsystem 20, the output signal of sound output conversion subsystem 25 may be at about 20 kHz (assuming a 100 kHz operation frequency for mesh 1202 for illustrative purposes), and may be suitable for a microphone input of a computing device 107 (for example through connector 16). In some implementations, for example in cases where respiratory medicament delivery device 11 is a type of respiratory medicament delivery device that emits energy at audible or sub-20 kHz frequencies, system 10 may not include a sound output conversion subsystem 25. For example, such systems may include an audio amplifier (not depicted) to connect the output generated by microphone 142 to computing device 107.

[0040] Referring to FIG. 3, in some implementations, system 10 may include power control 14. Power control 14 may be controlled based on, at least in part, an output from PLL 1203, such as, e.g., the lock output. When PLL 1203 is locked, e.g. when inhalation valve 12 is open, power control 14 may be configured to control Class E driver 1202 to use a high power setting that is sufficient for system 10 to produce aerosol. When PLL 1203 is not locked, a low power setting may be used. Alternatively, and/or simultaneously, alternative implementations to control nebulization are contemplated within the scope of this disclosure. Note that the low power setting may need to be sufficiently powerful such that, once inhalation valve 12 is opened again, PLL 1203 can once again lock. Power control 14 may be configured to provide gain control for Class E Driver 1202, and thus for mesh 1201. Note that a breath-actuated mode of operation as described herein may be used for different types of respiratory medicament delivery devices.

[0041] Information derived from output signals generated by MEMS microphone 142 and/or other (energy) measurements may be used to determine device actuation, respiratory rate, inhalation period, exhalation period, flow rate, strength of inhalation by a patient, amount of drug delivered, number of drug delivery sessions in a day or week, etc. Based on a comparison of such measured and/or determined information and the recommended treatment for a subject, a level of patient adherence may be determined. Combinations of different types of measured and/or determined information are contemplated within the scope of this disclosure. For

example, device actuation information may be combined with patient-specific respiratory information to determine a metric for patient adherence. Device actuation and/or detection of device actuation may characterize operating of respiratory medicament delivery device **11** and/or any component thereof.

[0042] Returning to FIG. 1, electronic storage **130** of system **10** comprises electronic storage media that electronically stores information. The electronic storage media of electronic storage **130** may include one or both of system storage that is provided integrally (i.e., substantially non-removable) with system **10** and/or removable storage that is removably connectable to system **10** via, for example, a port (e.g., a USB port, a FireWire port, etc.) or a drive (e.g., a disk drive, etc.). Electronic storage **130** may include one or more of optically readable storage media (e.g., optical disks, etc.), magnetically readable storage media (e.g., magnetic tape, magnetic hard drive, floppy drive, etc.), electrical charge-based storage media (e.g., EPROM, EEPROM, RAM, etc.), solid-state storage media (e.g., flash drive, etc.), and/or other electronically readable storage media. Electronic storage **130** may store software algorithms, information determined by processor **110**, information received via user interface **120**, and/or other information that enables system **10** to function properly. For example, electronic storage **130** may record or store vectors of parameters based on the generated output signals, and/or other parameters (as discussed elsewhere herein), and/or other information. Electronic storage **130** may be a separate component within system **10**, or electronic storage **130** may be provided integrally with one or more other components of system **10** (e.g., processor **110**).

[0043] User interface **120** of system **10** in FIG. 1 is configured to provide an interface between system **10** and a user (e.g., a user **108**, subject **106**, a caregiver, a therapy decision-maker, etc.) through which the user can provide information to and receive information from system **10**. This enables data, results, and/or instructions and any other communicable items, collectively referred to as “information,” to be communicated between the user and system **10**. An example of information that may be conveyed by user **108** to system **10** is patient-specific adherence information. An example of information that may be conveyed to user **108** is a report detailing adherence information for subject **106**. Examples of interface devices suitable for inclusion in user interface **120** include a keypad, buttons, switches, a keyboard, knobs, levers, a display screen, a touch screen, speakers, a microphone, an indicator light, an audible alarm, and a printer. Information may be provided to user **108** or subject **106** by user interface **120** in the form of auditory signals, visual signals, tactile signals, and/or other sensory signals.

[0044] It is to be understood that other communication techniques, either hard-wired or wireless, are also contemplated herein as user interface **120**. For example, in one embodiment, user interface **120** may be integrated with a removable storage interface provided by electronic storage **130**. In this example, information is loaded into system **10** from removable storage (e.g., a smart card, a flash drive, a removable disk, etc.) that enables the user(s) to customize system **10**. Other exemplary input devices and techniques adapted for use with system **10** as user interface **120** include, but are not limited to, an RS-232 port, RF link, an IR link, modem (telephone, cable, Ethernet, internet or other). In short, any technique for communicating information with system **10** is contemplated as user interface **120**.

[0045] Processor **110** of system **10** in FIG. 1 is configured to provide information processing capabilities in system **10**. As such, processor **110** includes one or more of a digital processor, an analog processor, a digital circuit designed to process information, an analog circuit designed to process information, and/or other mechanisms for electronically processing information. Although processor **110** is shown in FIG. 1 as a single entity, this is for illustrative purposes only. In some embodiments, processor **110** includes a plurality of processing units.

[0046] As is shown in FIG. 1, processor **110** is configured to execute one or more computer program modules. The one or more computer program modules include one or more of parameter determination module **111**, control module **112**, and/or other modules. Processor **110** may be configured to execute modules **111-113** by software; hardware; firmware; some combination of software, hardware, and/or firmware; and/or other mechanisms for configuring processing capabilities on processor **110**. In some embodiments, processor **110** and/or one or more computer program modules may be implemented on computing device **107**. For example, one or more computer program modules may be part of a software application (or “app”) being executed on computing device **107**.

[0047] It should be appreciated that although modules **111-113** are illustrated in FIG. 1 as being co-located within a single processing unit, in embodiments in which processor **110** includes multiple processing units, one or more of modules **111-113** may be located remotely from the other modules. The description of the functionality provided by the different modules **111-113** described herein is for illustrative purposes, and is not intended to be limiting, as any of modules **111-113** may provide more or less functionality than is described. For example, one or more of modules **111-113** may be eliminated, and some or all of its functionality may be incorporated, shared, integrated into, and/or otherwise provided by other ones of modules **111-113**. Note that processor **110** may be configured to execute one or more additional modules that may perform some or all of the functionality attributed below to one of modules **111-113**.

[0048] Parameter determination module **111** of system **10** in FIG. 1 is configured to determine one or more parameters from output signals generated by sensor(s) **142**. The one or more parameters may include a first spectral parameter, one or more operational parameters, respiratory timing parameters, and/or other parameters. The first spectral parameter may indicate (magnitude of) energy amplitude in a first frequency band. For example, the first spectral parameter may indicate the amplitude of the ultrasonic energy received by microphone **142** as described elsewhere herein. The first spectral parameter may characterize operation of respiratory medicament delivery device **11**. In some embodiments, parameter determination module **111** is configured to determine additional spectral parameters in a manner similar to the first spectral parameter, though, e.g., corresponding to other frequency bands. As used herein, the term “magnitude” may be used to refer to the energy amplitude at a particular frequency and/or within a particular range of frequencies.

[0049] Operation of parameter determination module **111** may be performed in an ongoing manner, for example at a particular sampling rate. The one or more parameters may be determined at different locations and/or positions within system **10** or near subject **106**. In some embodiments, parameter determination module **111** may derive vectors of parameters

in an ongoing manner during a period of monitoring subject **106**. The vectors of the parameters may be based on vectors of generated output signals and/or other (vectors of) determined parameters. Parameter determination module **111** may be configured to determine an operational parameter that indicates operation of respiratory medicament delivery device **11**, including but not limited to duration of treatment, frequency of treatment (e.g. per week), and/or other parameters.

[0050] Control module **112** is configured to control respiratory medicament delivery device **11** during operation. Operation of control module **112** may be based on one or more parameters determined by parameter determination module **111**. Control by control module **112** may include adjustments, e.g. of the operating frequency, drive power, and/or any other adjustable operating conditions as described herein. Adjustments may be based on determined (spectral) parameters and/or generated output signals. Adjustments may be made such that a particular determined parameter, e.g. the first spectral parameter, is maintained at or above at or above a predetermined threshold level. In some implementations, such a threshold is predetermined at a percentage of the known maximum for the particular determined parameter. The predetermined percentage may be about 80%, about 90%, about 95%, about 97%, about 98%, about 99%, and/or another percentage. Adjustments may be made in an ongoing manner, for example at a particular sampling rate. Adjustments may be made in real-time or near-real-time. The rate of adjustment may be milliseconds, 0.5 second, 1 second, 2 seconds, 5 seconds, 10 seconds, 20 seconds, and/or another appropriate rate.

[0051] Adherence module **113** is configured to determine an adherence metric and/or an adherence parameter for subject **106**. In some implementations, adherence module **113** may be executed on computing device **107**. The adherence metric and/or adherence parameter may be based on one or more parameters determined by parameter determination module **111**. For example, a particular adherence metric may be based on a combination of device actuation information and respiratory information/timing. An adherence metric and/or adherence parameter may for example be expressed as a percentage of perfect compliance with the recommended treatment. For example, if a particular patient scored a 90% adherence, such a score that may be considered by a care giver in determining a course of action. Alternatively, if a particular patient scored a low percentage of adherence, such a score may be considered relevant before the particular drug is deemed ineffective for that particular patient. Low scores may prompt a change in the chosen type of drug delivery device.

[0052] In some implementations, determinations by adherence module **113** may be analyzed, processed, gathered, aggregated, and/or transmitted by adherence module **113** and/or computing device **107**. In some implementations, determinations by adherence module **113** and/or information based thereon may be transmitted by computing device **107** to an external server that may be associated with a caregiver, a doctor, a hospital, and/or other pertinent parties that are authorized to receive such information.

[0053] FIG. 2 illustrates a method **200** to deliver medicament to a subject. The operations of method **200** presented below are intended to be illustrative. In certain embodiments, method **200** may be accomplished with one or more additional operations not described, and/or without one or more of the operations discussed. Additionally, the order in which the

operations of method **200** are illustrated in FIG. 2 and described below is not intended to be limiting.

[0054] In certain embodiments, method **200** may be implemented in one or more processing devices (e.g., a digital processor, an analog processor, a digital circuit designed to process information, an analog circuit designed to process information, and/or other mechanisms for electronically processing information). The one or more processing devices may include one or more devices executing some or all of the operations of method **200** in response to instructions stored electronically on an electronic storage medium. The one or more processing devices may include one or more devices configured through hardware, firmware, and/or software to be specifically designed for execution of one or more of the operations of method **200**.

[0055] At an operation **202**, an input signal is received by a power subsystem. In some embodiments, operation **202** is performed by a power subsystem the same as or similar to power subsystem **15** (shown in FIG. 3 and described herein).

[0056] At an operation **204**, power is provided based on the received input signal. In some embodiments, operation **204** is performed by a power subsystem the same as or similar to power subsystem **15** (shown in FIG. 3 and described herein).

[0057] At an operation **206**, medicament is nebulized by a vibrating element of a respiratory medicament delivery device. The vibrating element is driven by the provided power. In some embodiments, operation **206** is performed by a piezoelectric element the same as or similar to piezoelectric element **102** (shown in FIG. 3 and described herein).

[0058] At an operation **208**, the nebulized medicament is delivered to an airway of a subject. In some embodiments, operation **208** is performed by a respiratory medicament delivery device the same as or similar to respiratory medicament delivery device **11** (shown in FIG. 1 and described herein).

[0059] At an operation **210**, an audio input signal is received. In some embodiments, operation **210** is performed by a sound input conversion subsystem the same as or similar to sound input conversion subsystem **20** (shown in FIG. 1 and described herein).

[0060] At an operation **212**, the audio input signal is converted to an ultrasonic output signal. The step of nebulizing medicament is performed by controlling the vibrating element based on the ultrasonic output signal. In some embodiments, operation **212** is performed by a sound input conversion subsystem the same as or similar to sound input conversion subsystem **20** (shown in FIG. 1 and described herein).

[0061] In the claims, any reference signs placed between parentheses shall not be construed as limiting the claim. The word “comprising” or “including” does not exclude the presence of elements or steps other than those listed in a claim. In a device claim enumerating several means, several of these means may be embodied by one and the same item of hardware. The word “a” or “an” preceding an element does not exclude the presence of a plurality of such elements. In any device claim enumerating several means, several of these means may be embodied by one and the same item of hardware. The mere fact that certain elements are recited in mutually different dependent claims does not indicate that these elements cannot be used in combination.

[0062] Although this description includes details for the purpose of illustration based on what is currently considered to be the most practical and preferred embodiments, it is to be

understood that such detail is solely for that purpose and that the disclosure is not limited to the disclosed embodiments, but, on the contrary, is intended to cover modifications and equivalent arrangements that are within the spirit and scope of the appended claims. For example, it is to be understood that, to the extent possible, one or more features of any embodiment are contemplated to be combined with one or more features of any other embodiment.

1. A system configured to deliver medicament to a subject, the system comprising:

- a power subsystem configured to receive an input signal and provide power based on the received input signal;
- a respiratory medicament delivery device that includes a vibrating element that is driven by power provided by the power subsystem, wherein the respiratory medicament delivery device is configured to deliver medicament, responsive to nebulization of the medicament by the vibrating element, to an airway of a subject; and
- a sound input conversion subsystem, configured to receive an audio input signal having a first frequency, wherein the sound input conversion subsystem is configured to convert the audio input signal to an ultrasonic output signal having a second frequency in dependence of the first frequency, wherein the vibrating element is controlled based on the ultrasonic output signal.

2. The system of claim 1, wherein the input signal includes the audio input signal.

3. The system of claim 1, wherein mechanical movement of the vibrating element causes emission of ultrasonic energy during operation of the respiratory medicament delivery device, the system further comprising:

- a sensor configured to generate output signals representing one or more characteristics of the ultrasonic energy emitted during operation of the respiratory medicament delivery device; and
- a sound output conversion subsystem configured to receive the generated output signals, wherein the sound output conversion subsystem is configured to convert the generated output signals into an audio output signal, and wherein the sound output conversion subsystem is further configured to provide the audio output signal to a computing device.

4. The system of claim 3, wherein the audio input signal is received from a connector of a computing device, wherein the power subsystem is configured to receive the input signal from the connector of the computing device, wherein the power subsystem includes a power harvesting circuit configured to harvest power from the input signal, the system further comprising:

- one or more processors configured to execute computer program modules, the computer program modules comprising:
 - a parameter determination module configured to determine, based on the audio output signal, a spectral parameter that indicates energy amplitude of ultrasonic energy emitted by the respiratory medicament delivery device, such that the first spectral parameter characterizes operation of the respiratory medicament delivery device;

- a control module configured to control the audio input signal based on the spectral parameter; and
- an adherence module configured to determine an adherence metric based on the spectral parameter.

5. The system of claim 4, wherein one or more of the parameter determination module, the control module, and/or the adherence module is included in the computing device.

6. A method of controlling a respiratory medicament delivery device, the method comprising:

- receiving, by a power subsystem, an input signal;
- providing power based on the received input signal;
- nebulizing, by a vibrating element of a respiratory medicament delivery device, medicament, wherein the vibrating element is driven by the provided power;
- delivering, to an airway of a subject, the nebulized medicament;
- receiving an audio input signal; and
- converting the audio input signal to an ultrasonic output signal, wherein the step of nebulizing medicament is performed by controlling the vibrating element based on the ultrasonic output signal.

7. The method of claim 6, wherein the input signal includes the audio input signal.

8. The method of claim 6, wherein mechanical movement of the vibrating element causes emission of ultrasonic energy during operation of the respiratory medicament delivery device, the method further comprising:

- generating, by a sensor, output signals representing one or more characteristics of the ultrasonic energy emitted during operation of the respiratory medicament delivery device;
- converting the generated output signals into an audio output signal; and
- providing the audio output signal to a computing device.

9. The method of claim 8, wherein the audio input signal is received from a connector of a computing device, wherein the input signal is received from the connector of the computing device, the method further comprising:

- harvesting, by a power harvesting circuit, the power from the input signal;
- determining, based on the audio output signal, a spectral parameter that indicates energy amplitude of ultrasonic energy emitted during operation of the respiratory medicament delivery device, such that the first spectral parameter characterizes operation of the respiratory medicament delivery device;
- wherein the audio input signal is controlled based on the spectral parameter, and
- wherein an adherence metric is determined based on the spectral parameter.

10. The method of claim 9, wherein one or more of the steps of determining the spectral parameter, controlling the audio input signal, and/or determining the adherence metric is performed on the computing device.

11.-15. (canceled)

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专利名称(译)	通过智能手机控制药物雾化器		
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摘要(译)

用于使用喷雾器向对象递送药物的系统和方法由诸如智能电话的计算设备控制和/或供电。连接可以使用USB端口，对接连接器和/或耳机插孔。

