

## 穿戴裝置與智慧醫療發展

Han Wen Guo 2022.03.28



FocalTech Smart Sensors 敦 捷 光 電

Normal ☐ Internal Use ☐ Confidential ☐ Restricted Confidential

Looking for the Healthy Smart Life

### ▮ 郭瀚文

學經歷 現職 Focal Tech 陽明大學 生醫光電所 台灣大學 金寶電子 敦捷光電 艾克夏 博士 物理所 醫美研發中心 醫療器材 生醫演算法部 博士後研究員 研發部 逢甲大學 光電系 車長 兼任助理教授 光電技術 生醫演算法開發 醫療器材開發



## 敦捷光電 追求健康的智慧生活





#### 愛心鏡心律不整篩檢APP

- -心率偵測
- -心律分析

衛部醫器製字第007323號



### outline



穿戴裝置簡介



醫療穿戴裝置原理與應用



穿戴裝置與智慧醫療目前難題



未來發展趨勢



#### 穿戴裝置與醫療產業交集的商機起飛



全球穿戴装置投資布局-

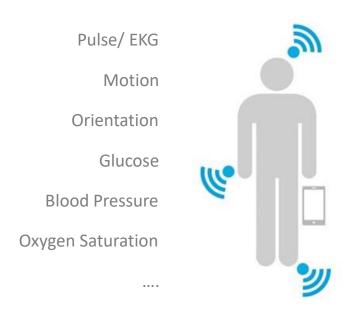
- 軟體與應用(程式)開發: 26%。
- 硬體與材料: 15%。
- 健康與醫療照護: 16%。
- 安全與輔助: 13%。
- 運動與健身: 11%。
- 智慧與人性化互動: 9.7%。
- 服飾: 5.3%。

Classroom-Aid.Com 2020

治療/診斷/照護 -> 養生/保健/預防



### 穿戴裝置於醫療健康上之幫助



- 可隨時監控個人的健康
- 具有連續監測與現場監測的功能
- 即時反饋和警報機制
- 提供更高的舒適度和便利性,以及安全性
- 智慧醫療的可能性-疾病預測、AI判讀
- 改變現有的醫療行為







#### Top companies developing wearable medical devices in US

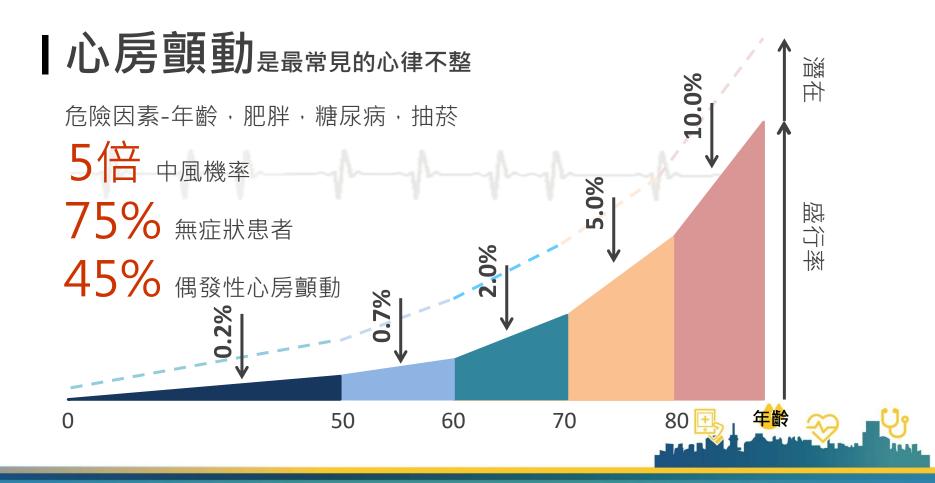


- 穿戴式醫療裝置占全球穿 戴裝置市場的1/5。
- 穿戴式醫療裝置成長率最高。

Wearables in US Healthcare research report from Business Insider Intelligence (2020)

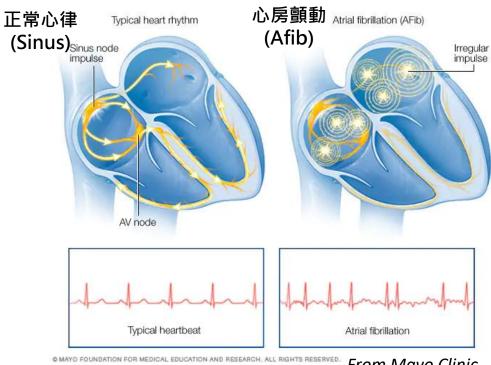








# I心房顫動 (Atrial fibrillation)



- 心律不整的一種,特色是心 房快速而不規則的跳動。
- 大部分沒症狀,少部分可能 會有心悸、昏厥、呼吸困難、 胸痛等症狀。
- 心電圖/脈搏表現-心跳間距 忽快忽慢。



From Mayo Clinic



### 心房顫動的篩檢工具



Patient initiated (or medical professional) oscillometric blood pressure cuff



Pulse palpation, auscultation



Patient initiated (or medical professional) intermittent ECG rhythm strip using smartphone or dedicated connectable device



Patient initiated photoplethysmogram on smartphone



Semi-continuous photoplethysmogram on a smartwatch or wearable



Intermittent smartwatch ECG initiated by semi-continuous photoplethysmogram with prompt or symptoms



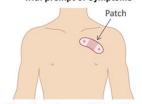
Wearable belts for continuous recordings



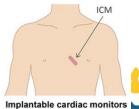
Stroke unit/in-hospital telemetry monitoring



Long-term Holter



1-2 week continuous ECG patches





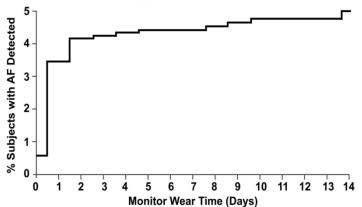
Focal Tech

#### 穿戴式ECG裝置監控偶發性心房顫動

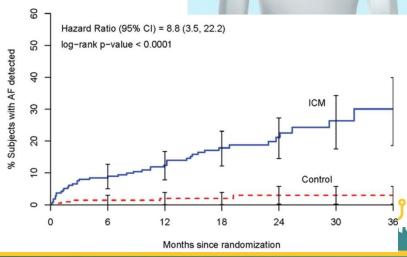




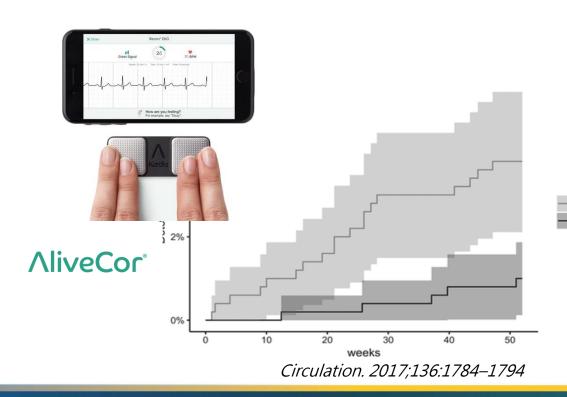
- ECG貼片
- 14天不間斷量測 **ECG**



植入式ECG量測裝置 Insertable cardiac monitor(ICM) 監控長達3年



## 手持式ECG紀錄器篩檢心房顫動



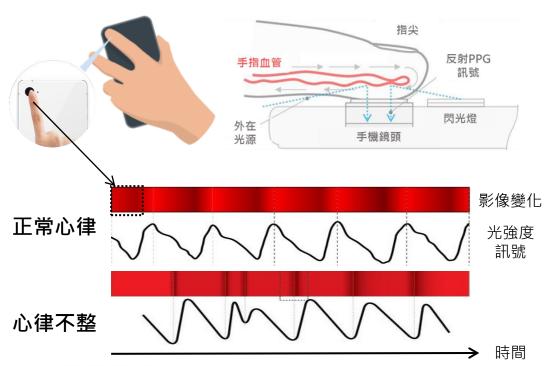
65歲以上老年人。

每周兩次,每次30秒。

一年後篩檢出心房顫動提高兩倍 以上。



## Ⅰ手機鏡頭偵測心律變化介紹



**歐洲心臟科協會**建議心房 顫動初篩工具之一。

88.4%智慧手機高普及率,每天平均使用手機時間近3小時。

最方便使用的心房顫動偵測 工具。





"愛心鏡"心律分析應用軟體 臺大醫院與敦捷光電合作

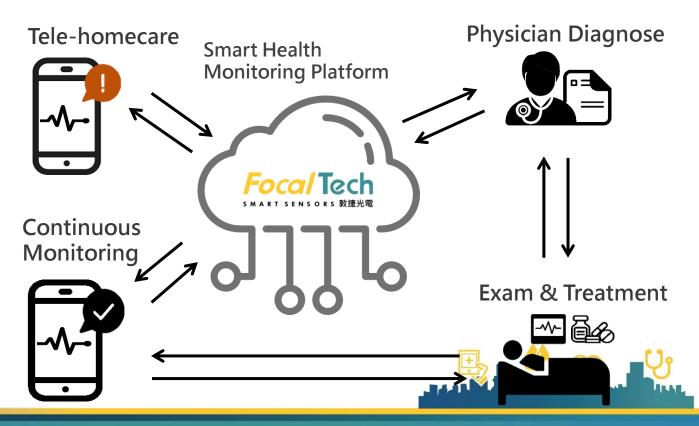
#專業級心律不整檢測APP #一分鐘心律分析 #完整分析報告 #健康小提示 #台大追蹤診斷



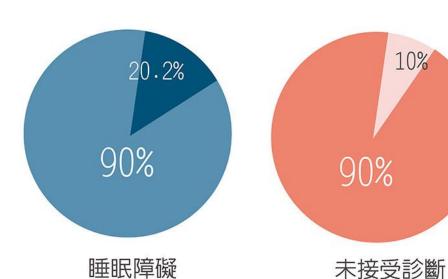


# AFib Screening Tool – Rhythm cam





## 睡眠障礙



https://www.iskin.com.tw/sleep 01

在台灣僅有10%病患接受診斷

,而治療的患者更少

10%

#### 睡眠障礙主要原因

- 1. 疾病
- 2. 晝夜失調(熬夜)
- 精神壓力
- 環境因素

睡眠障礙容易導致糖尿病、

高血壓、肥胖。





台灣2千4百萬人口

慢性失眠盛行率佔2成

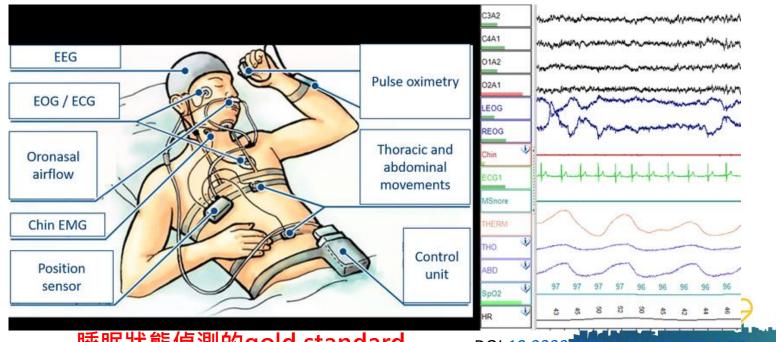
# 呼吸中止症 (sleep apnea)

- 因呼吸道肌肉鬆弛,容易塌陷而造成阻塞。
- 夜間-打呼,淺眠,呼吸暫停。
- 白天-精神不集中,嗜睡,頭痛,口乾。
- 好發於40歲以上男性,肥胖(BMI>27)。





# 睡眠多項生理功能檢查 (Polysomnography, PSG)



睡眠狀態偵測的gold standard

DOI:10.3233



#### Wearable Sleep Trackers Market



### 大立雲康-居家睡眠檢測

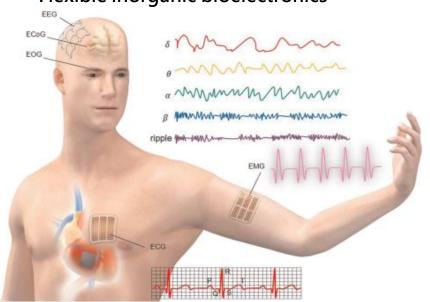


- 衛福部許可睡眠檢測裝置
- 台灣數十醫療院所採用



### 未來的穿戴裝置

#### Flexible inorganic bioelectronics



#### Tattoo sensor

Dermal tattoo sensors for the detection of blood pH change and metabolite levels

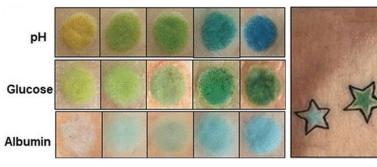


Image by Wiley



Flexible Electronics (2020) 2



## 穿戴式醫療裝置目前的難題









#### 使用者黏著度

✓ 不見棺材不掉淚

#### Who pay the bill?

✓ 穿戴装置的商業模式

#### 醫療法規的限制

✓ 智慧醫療法規





### 針對強需求族群提升產品功能



#### VITOM多功能生理參數裝置

- 心率
- ៣壓
- 心律分析 (2)
- 血氧 1/0、

#### 針對慢性病族群(強需求族群)提供所需功能

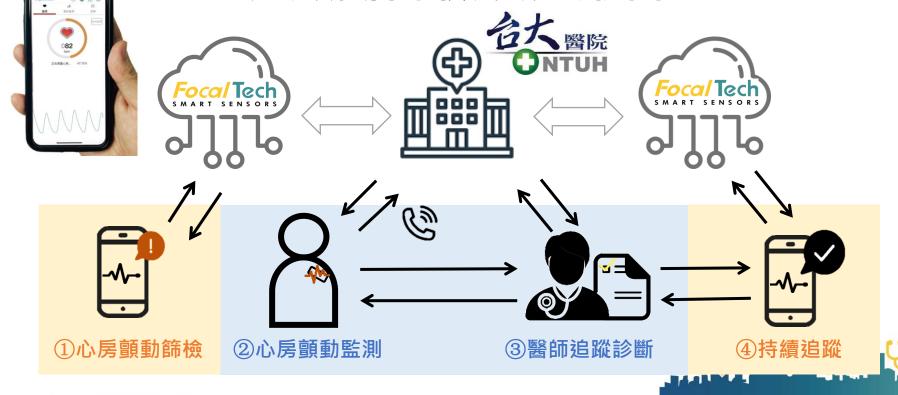
- 1. 腎臟病族群
- ➤ AI判斷透析低血壓發生機率
- ▶ 分析動靜脈廔管堵塞機率

- 2. 心臟衰竭病患
- ▶ 預估心輸出量
- ▶ 肺部電阻抗量測-肺積水

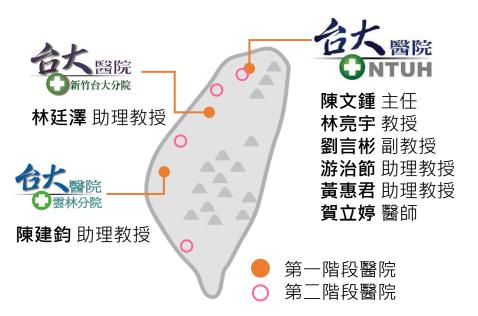




# 心房顫動篩檢及追蹤計畫



# 全民防「顫」拒絕中風



#### 最大規模心房顫動普篩計畫

- 第一階段 臺大醫院分院系統
- ✓ 初步預計篩檢10-20萬人
- ✓ 預期心律不整篩出率+1-2%
- 第二階段 更多醫院參與(邀請中)
- ✓ 亞東,輔大,長庚,中國醫,義大....

#### 全體國民心律不整篩檢

降低國人中風機率。

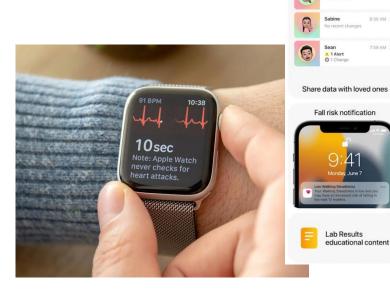


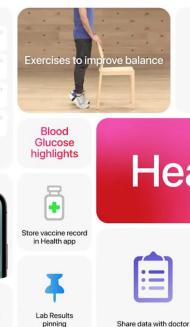
## APPLE Health軟硬體生態圈

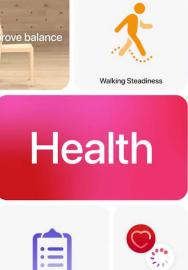
1 Alert

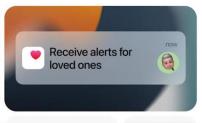
O 2 Changes

關鍵硬體與軟體集成















Lab Results





## AliveCor<sup>®</sup> 專注技術開發 提升不可取代性

#### Prospective blinded evaluation of smartphone-based ECG for differentiation of supraventricular tachycardia from inappropriate sinus tachycardia

Awareness campaigns of atrial fibrillation as an opportunity for early detection by Dig pharmacists: an international crosssectional study

sui

This cross-sectional study was conducted during the Arrhythmia Alliance World Heart Rhythm Week, and  $suggested\ pharmacists\ can\ contribute\ to\ greater\ outreach\ of\ awareness\ campaigns.\ The\ Atrial\ Fibrillation$ Association formed a partnership with the International Pharmacists for Anticoagulation Care Taskforce, and goals to test a model for raising awareness of AF involving pharmacists globally; and to identify barriers and Call enablers to its implementation. Pharmacists from 10 countries invited individuals (≥ 40 years; without ele anticoagulation therapy of AF) to participate in the awareness campaign. Participants agreeing were engaged in  $W_{\varepsilon}$  the early detection of AF (EDAF) using pulse palpation. Individuals with rhythm discrepancies were referred and prospectively assessed to have information on the proportion of confirmed diagnosis, leading to estimate the detection rate. Interviews with country coordinators explored barriers and enablers to implementation. The study involved 4,193 participants in the awareness campaign and 2,762 in the EDAF event (mean age 65.3 ± 13.0), of whom 46.2% individuals were asymptomatic, recruited across 120 sites. Most common CHA2DS2- VASc risk

factor was hypertension. Among 161 patients referred to physician, feedback was obtained for 32 cases, of whom

12 new arrhythmia diagnoses were confirmed (5 for AF, 2 for atrial flutter), all among elders (≥ 65 years). Qualitative evaluation suggested a local champion to enable pharmacists' success; technology enhanced engagement amongst patients and increased pharmacists' confidence in referring to physicians;

Alves da Costa F, Mala-Ladova K, Lee V, Tous S, Papastergiou J, Griffiths D, et al. Journal of thrombosis and thrombolysis (2019): 1-12.

interprofessional relationship was crucial in success.

ire usually not ces them difficult ty of 89% and a 5% with a

ing unnecessary

to record an ECG when they experienced palpitations or mmented that

e type were significant factors of variation in

ostic accuracy of or Holter monitor. ECGs) settings. The 7%) in the hospital.

y ranged from ECG device type (p=0.022) significantly nsitivity and specificity of single-lead

to 98%) in the

aluation of KardiaMobile in a real-world cohort of ambulatory country, Between January 2017 and March 2018, 5,982 eceived, with a median of 28 ECGs per patient per year (mean

ted in a symptom-driven remote arrhythmia

ia remote monitoring program in the Netherlands, initiated by

fibrillation -analysis

vacht ECGs.

as Possible AF, 17% as Unclassified, iterpretable. The AF algorithm had a for detection of AF was high, at being interpreted by the PV, and a specificity of 91% and a y the cardiologist as being sinus lythm with and without ectopy to

Focal Tech

## │ 智慧醫療的未來發展



