# Innovation of Acoustic Research on Biomedical Applications

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## **Acoustic Research Projects in Our Lab**

## 1. Applications on Therapeutic Ultrasound

--- Innovation of Shock Wave lithotripsy (SWL) on Treatment of Kidney Stone Diseases

--- Cavitation Bubbles – Cell Interaction for Ultrasound Enhanced Gene Activation

## 2. Applications on Audible Sound

--- Research on Noise-Induced Human Hearing Loss

--- Diagnosis and Treatment of Human Tinnitus

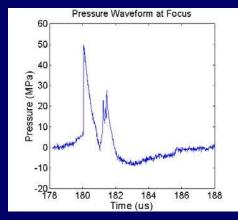


## Comparison of Electrohydraulic (EH) and Electromagnetic (EM) SWLs

- Introduction to SWLs.
- **Characterization of** acoustic fields
- **Stone fragmentation** *in vitro* and *in vivo*

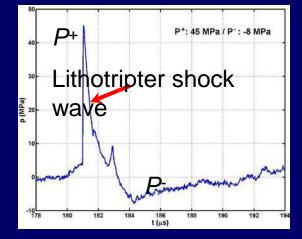


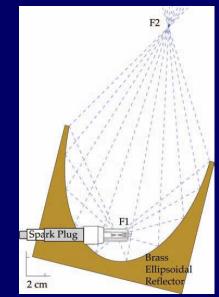




## **Shock Wave lithotripsy**

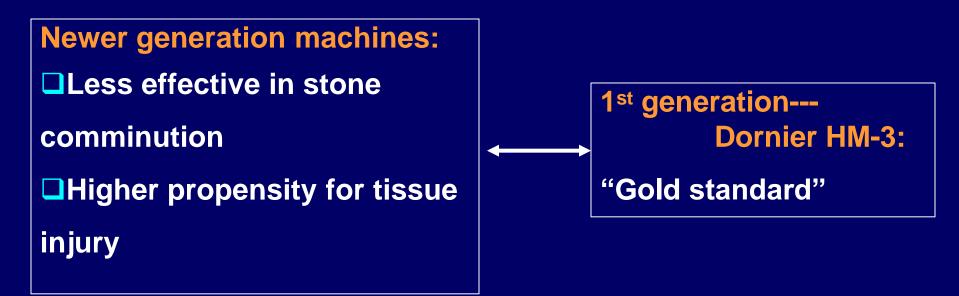






## **Electromagnetic (EM) Shock Wave Generator**

- Widely use in the newer generation lithotripters
- Stable and highly reproducible shock waves, long life time
- High peak pressure and narrow focal beam size



## **Newer is not better! Why?**

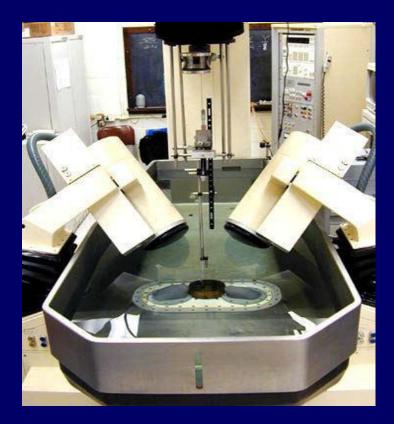
## **Comparison of EH and EM Lithotripters**

- Electrohydraulic
- Unmodified HM-3 at 20 kV
- > Electromagnetic
- **Siemens Modularis at E4.0**
- > In vitro comparison
- **Acoustic fields Stone fragmentation**
- In vivo comparison
- **Stone fragmentation**

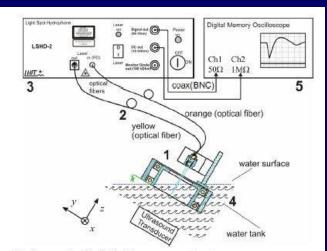




## **Acoustic Field Measurement**





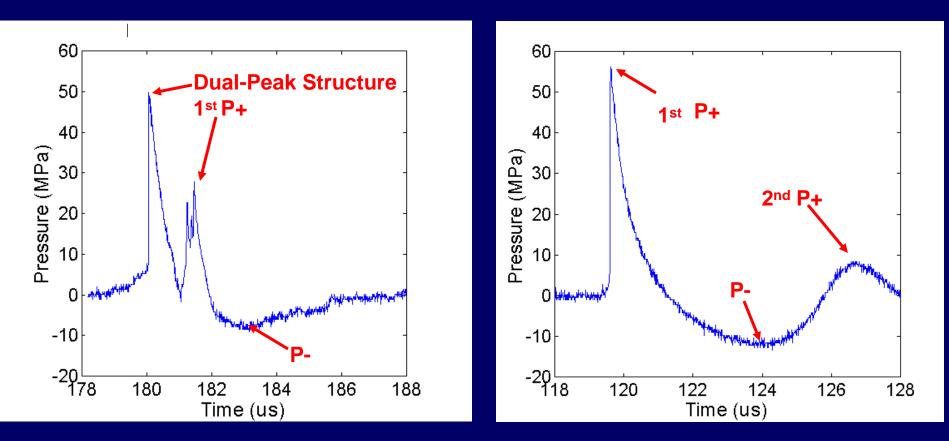


### Light Spot Hydrophone (LSHD-2)

(Siemens/University of Erlangen-Nuremberg)

Figure 1.1 shows a principle sketch of the measurement setup

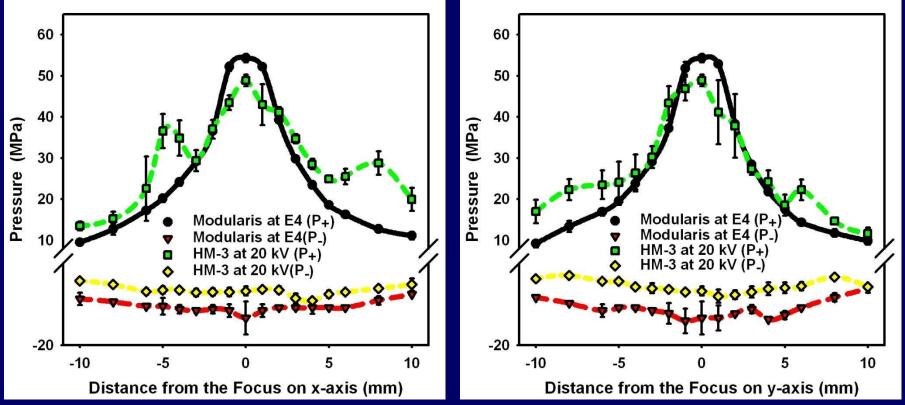
## **Pressure Waveforms at Focus**



HM3 at 20 kV

Modularis at E4.0

## Pressure Distribution and Characteristics of Acoustic Fields



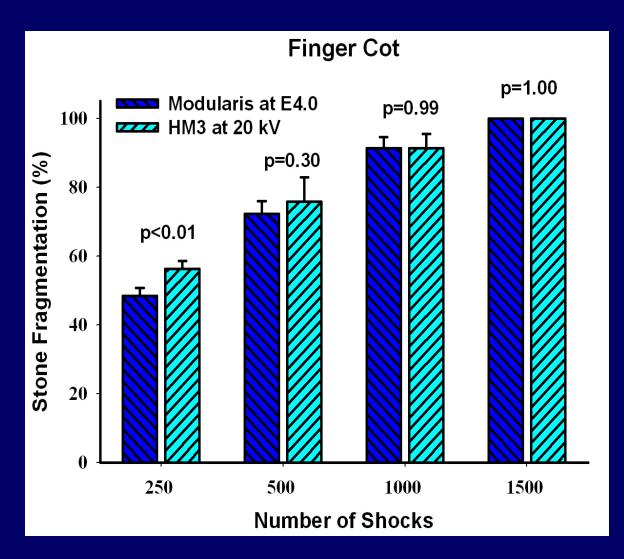
|                   | Peak P+<br>(MPa) | Peak P-<br>(MPa) |      | Size, -6dB Beam Size<br>nm) Left-Right (mm | •    |
|-------------------|------------------|------------------|------|--|------|
| HM3 at 20 kV      | 48.9 ± 1.3       | -10.7 ± 0.6      | 12.5 | 9.3  | 42.9 |
| Modularis at E4.0 | 54.3 ± 1.0       | -14.4 ± 3.4      | 6.8  | 6.6  | 62.1 |

## **Stone Fragmentation in a Finger Cot Holder**

**Finger Cot Holder** 



- Stone fragments are always kept in a 15 mm diameter area during SWL
- Do not represent stone fragmentation in vivo



### **New Stone Holder: Membrane Holder**

30 mm

#### **Finger Cot Holder**

- Stone fragments are always kept in a 15 mm diameter area during SWL
- Do not represent stone fragmentation in vivo

2000 shocks in vivo

**Focal Area** 

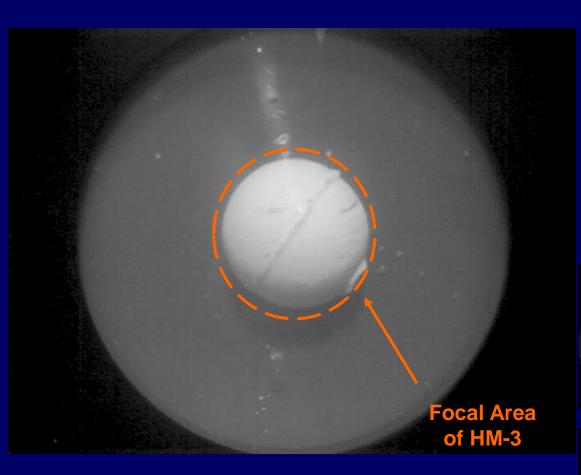
of HM-3

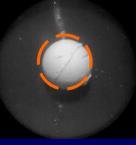
#### **Membrane Holder**



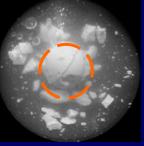
- Allow fragments to accumulate & spread out laterally
- Mimic more closely stone fragmentation in vivo

#### Spreading of Fragments in a Membrane Holder 50 shocks 50 shocks





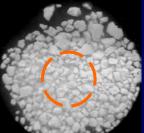
100 shocks

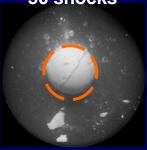


500 shocks

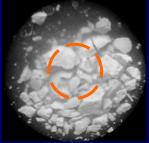


1500 shocks



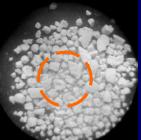


250 shocks



1000 shocks

2000 shocks

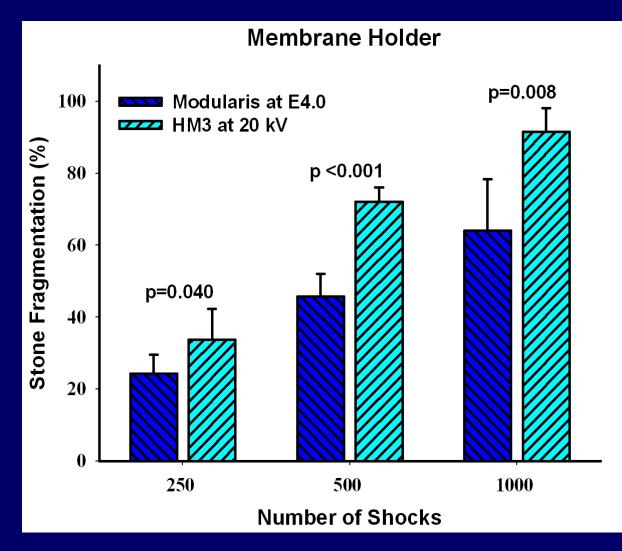


## **Stone Fragmentation in a Member Holder**

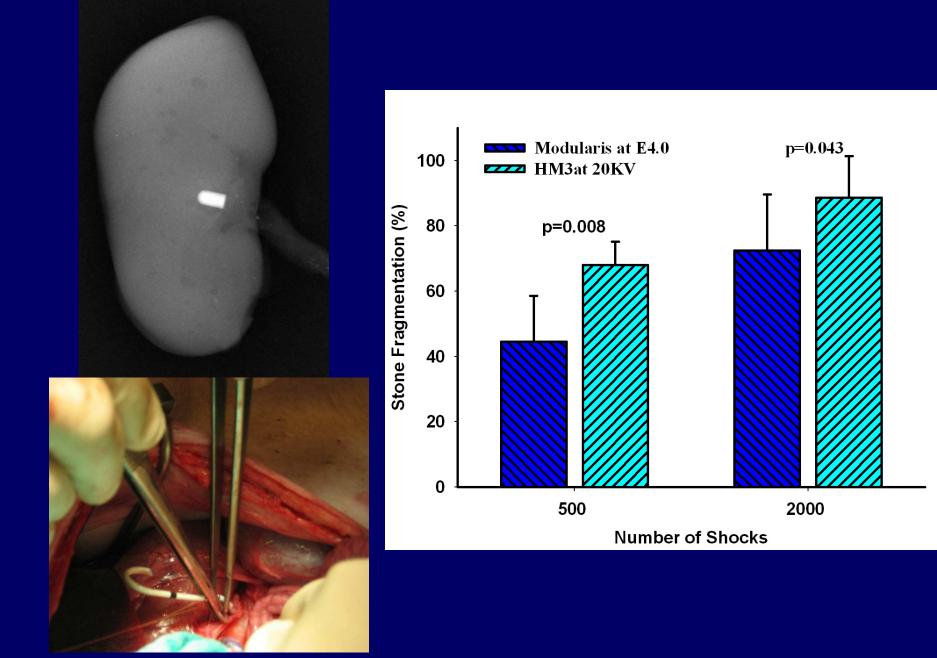
#### Membrane Holder



- Allow fragments to accumulate & spread out laterally
- Mimic more closely stone fragmentation in vivo



### Stone Fragmentation in vivo



# Summary of PART I

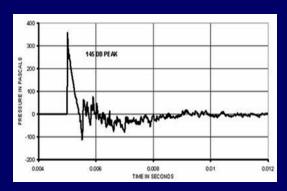
Stone fragmentation produced by the EM lithotripter is lower than that of the EH lithotripter both *in vivo* and in the membrane holder. The acoustic field characterization demonstrates two distinct differences between EM and EH lithotripters

- 2<sup>nd</sup> compressive component in EM pulse, which could reduce maximum bubble size by 50%
- EM lithotripter has much narrower beam size than EH lithotripter

## PART II:

## Development of a Noise Exposure System for Research on Impulse Noise Induced Hearing Loss

- Anatomy of Human Ear
- Noise Induced Hearing Loss
- Development of the Impulse Noise Exposure System







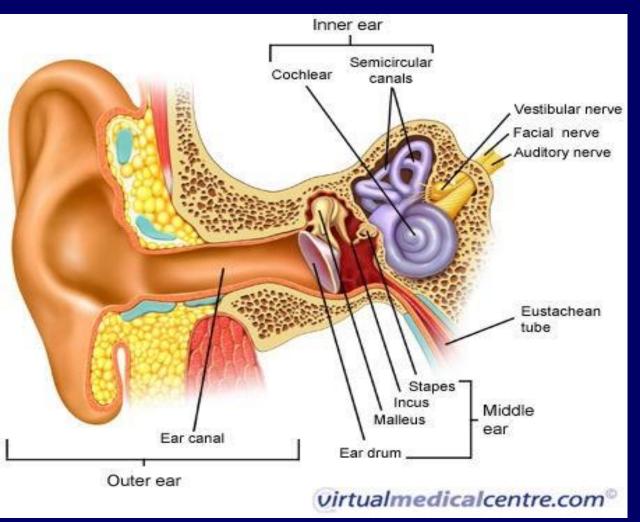
## **Noise-Induced Hearing Loss (NIHL)**

- When an individuals hearing is damaged or altered by noise
- One of the most common occupational in the United States
  - More than 30,000,000 American work to unsafe noise levels at their job
  - Estimated 600 million people world hazardous noise levels





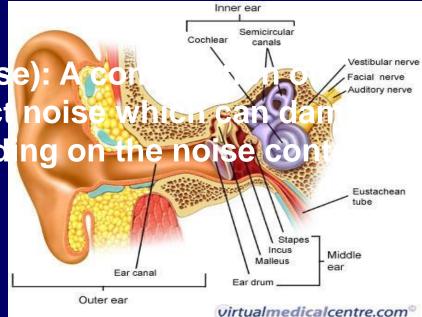
# **Anatomy of the Human Ear**



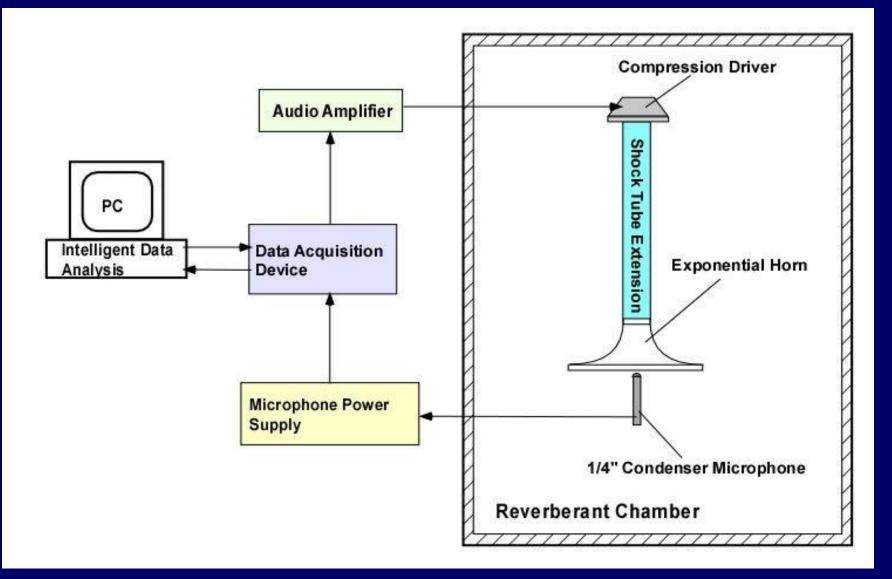
- Pinna
- Tragus
- Exterior Auditory Canal
- Tympanic Membrane
- Ossicles
- Scala Vestibuli
- Scala Tympani
- Cochlea

## Anatomical Areas Affected by Different Noise Exposure

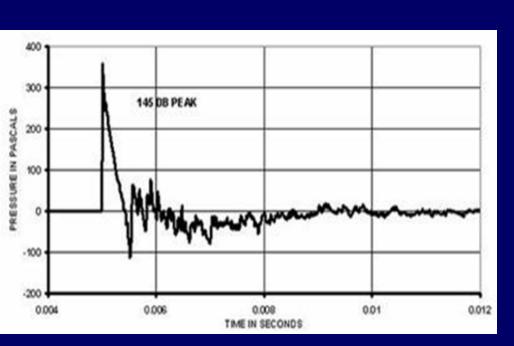
- 1) Gaussian Noise (Steady State Noise): Cochlea and Stria Vascularis
- 2) Impulse/Impact Noise: Cochlea and Stria Vascularis and possible tympanic membrane and ossicular damage depending on level
- 3) Kurtosis Noise (complex noise): A con-Gaussian and impulse/impact noise which can do all of the above areas depending on the noise co



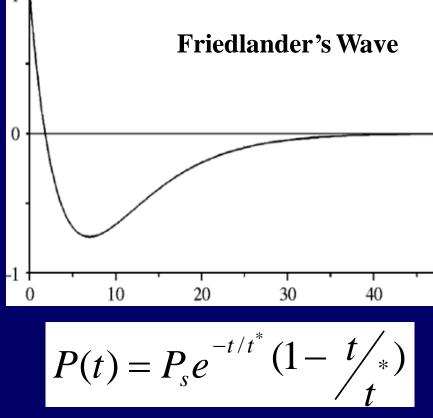
# **Noise Exposure System**



# **Impulse Noise**

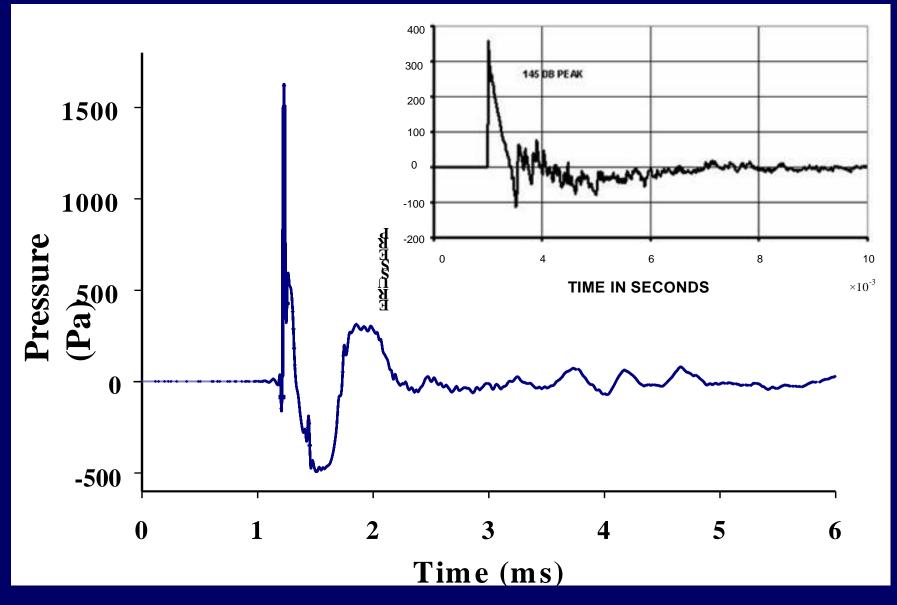


(http://www.arl.army.mil/www/default.cfm?page=352)

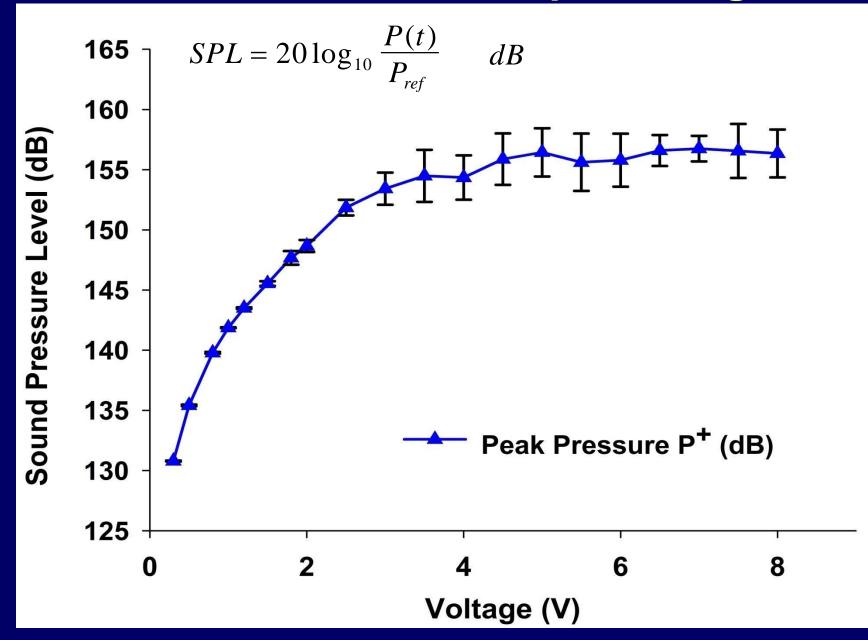


P<sub>s</sub> = peak sound pressure
t\* = the time at which the pressure crosses the x-axis

## Simulated Wave vs. Field-Measured Wave



### Peak Pressure vs. Output Voltage



# Animal Study Verifying the Impulse Noise Induced Hearing Loss

➢Animal Model: Chinchilla

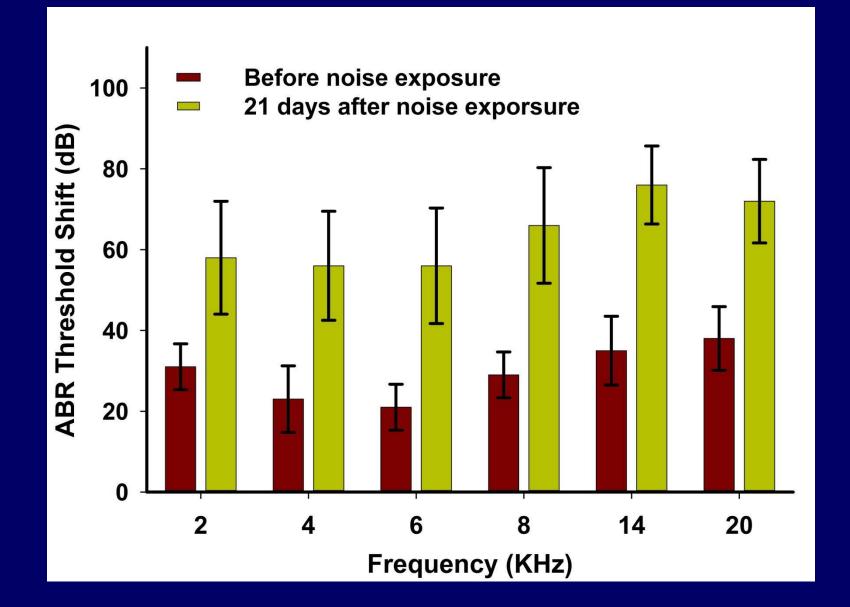
• 1 0 a ni m a ls were tested



➢Noise Exposure: impulse noise with peak SPL=155 dB at 2 Hz pulse repartition rate for 75 seconds (150 pulses).

Auditory brainstem response (ABR) were measured before and 21 days after noise exposure

# **Animal Study Results**



# Summary of PART II

- A digital noise exposure system has been developed to generate the impulse noise.
- The waveforms of impulse noise are comparable to the field measurement test performed by the U.S. Army
- Impulse noise produces significant hearing loss in animal study.
- Future work includes Kurtosis noise simulate and high level impulse noise generation.

# **Upcoming Conference**

• For upcoming conferences please follow the below mentioned link http://www.conferenceseries.com/