Expanding Airways – Approaches in SGS GROUP 33 - TAYLOR HUGHES, BRIAN DALLESASSE, KYLE SACHDEV

Overview

Background

- Current Treatment Strategies
- Our Proposed Solution
- Team Responsibilities
- Conclusion

Background

- Subglottic Stenosis (SGS) partially or completely obstructs the airway region directly beneath the vocal cords
 - Cricoid cartilage
 - Causes
 - Symptoms
 - Grading of severity



Grade 1 Stenosis 0-50%



Grade 2 Stenosis 51-70%



Grade 3 Stenosis 71-99%



Grade 4 Stenosis 100%

Background



- Treatment of SGS depends on the grade of the injury
 - Grades 1 & 2
 - Grades 3 & 4
 - Laryngotracheal reconstruction surgery



Project Scope

- High rate of recurrence
- Stent implant
- Need for a better solution
- Improve quality of life
- Airway expansion



Project Scope



- Airway expansion and hysteresis
- Dr. Randal Paniello
- Cyclic application of pressure and relaxation
- Improved recovery response
- Limit potential for more scar formation

Design Specifications

Dilate cricoid cartilage by 30%

- 20-24 mm to 26-30 mm
- Flow ~ $a * r^4$
- Radial pressure and relaxation
 - 5-10 min : 10-15 min
 - ▶ 7-8 atm
 - Preserve cartilage integrity
- Strength and biocompatibility
- Fit and implant status



Existing Solutions - Devices

- Medical devices Grades I and II
 Surgical procedures Grades III and IV
 Balloon catheter
 SPO2 of 92%
 - Radial incisions
 - Improved models

LT-Mold

Bioabsorbable stent





Existing Solutions - Procedures

Trachiotomy

- Anterior Cricoid split
- Larygofissure
 - Anterior laryngofissure with a graft
 - With division of anterior/posterior cricoid lumina
- Larygotracheal Reconstruction (LTR)
- Criocotracheal resection

Team Responsibilities

- CAD Lead: Kyle Sachdev
- Programming Lead: Taylor Hughes
- Electronics Lead: Brian Dallesasse
- Group shared responsibilities
 - Interviews with SGS Patients
 - Prototyping and testing

Conclusion

SGS is an obstructive airway condition characterized by scar tissue formation around the cricoid cartilage.

- Existing medical devices/procedures do not appreciably improve patient quality of life over the long term.
- There is a need for a device which expands the airway by hysteretic mechanisms.