Published online 9 April 2024 | https://doi.org/10.1007/s40843-024-2910-x



## Wireless multisite sensing systems for continuous physiological monitoring

Ruilai Wei<sup>1,2</sup>, Qilin Hua<sup>1,2\*</sup> and Guozhen Shen<sup>1,2\*</sup>

Respiratory diseases rank as the third leading cause of adult mortality [1], while cardiopulmonary and gastrointestinal issues are the primary cause of death within the first five years of a child's life [2]. The monitoring of cardiac, respiratory, and gastrointestinal sounds plays a vital role in routine care, as alterations or absence of these body sounds can serve as indicators of underlying diseases. These subtle, broadband acoustic-mechanical signals hold significant potential for continuous physiologic monitoring [3–6]. However, existing monitoring devices face limitations in terms of restricted measurement locations and inability to be used outside of controlled environments, resulting in limited applications beyond hospital settings [7–11].

With the advancement of bioengineering, the limitations of traditional human biomonitoring devices are being gradually resolved [7,12,13]. Writing in *Nature Medicine*, Yoo *et al.* [14] developed a wireless broadband acoustic-mechanical sensing (BAMS) network system that enables synchronized and continuous measurement of human body movements and sound information from various locations on the body. This innovative system holds immense potential in guiding clinical decision-making and enhancing outcomes through continuous monitoring of physiological signals [15,16]. Notably, the versatility of the BAMS network system allows for its application in both hospital and home environments.

The BAMS device demonstrates a remarkable broadband operation spanning from approximately 0.01 Hz to about 1000 Hz. Its wearable system design, complemented by a time synchronization mechanism across multiple devices, enables the spatiotemporal mapping of body sounds across different locations. Fig. 1a provides a visual representation of three clinically relevant applications of the BAMS network system: placing a device at the suprasternal notch for continuous monitoring of cardiopulmonary activity, positioning devices on the abdomen for spatiotemporal detection of gastrointestinal sounds, and strategically positioning 13 devices on the chest front and back to monitor lung health.

The BAMS device boasts compact dimensions measuring  $40 \times 20 \times 8$  mm, and a lightweight design weighing merely 6 grams. Encapsulated in a silicone elastomer, it ensures excellent wear-ability and can be comfortably worn on various body parts, making it suitable for individuals of all ages, including premature infants and the elderly. Fig. 1b visually depicts the device's application on a newborn model for cardiopulmonary monitoring. Each BAMS device comprises five essential com-

ponents: a pair of microphones, an inertial measurement unit (IMU), flash memory, a Bluetooth module, and a power source. The exploded view of the BAMS device in Fig. 1c provides a detailed illustration of these components.

The BAMS device combines the functionality of an IMU and a pair of microphones to achieve its broadband operation. The IMU captures three-axis acceleration data, providing precise body movement data in the range of 0-20 Hz, unaffected by environmental sound [17,18]. The microphone system is responsible for capturing sounds associated with respiratory, cardiac activity, and gastrointestinal motion. Fig. 1d illustrates the schematic diagram of the microphone system, wherein microphones facing towards the body and the environment capture sound information from two directions. Adaptive algorithms are employed to minimize the interference of environmental noise. Remarkably, even under the interference of 90-dB white noise, the BAMS device effectively captures cardiopulmonary sounds. Its performance surpasses that of the current widely used digital stethoscopes, namely the 3M Littmann CORE and Eko, by 12% and 15% respectively, thereby expanding its application beyond hospital settings.

To assess the functionality of the BAMS network system, the researchers conducted clinical evaluations and collected data in relevant settings. In one study, the BAMS network system was used to monitor restricted airflow and gastrointestinal motility in 15 neonates within a neonatal intensive care unit (NICU). Additionally, the system was employed to evaluate the local lung function in 55 patients who underwent thoracic surgery. Notably, these data demonstrated high clinical accuracy, as they were benchmarked against devices approved by the US Food and Drug Administration (FDA). Fig. 1e presents a comparative analysis between the clinical results from the BAMS device and those derived from the FDA-approved device, with data from a 19-month-old patient within the NICU.

The BAMS network system, with its simultaneous measurement of body movement and sound, introduces exciting possibilities for monitoring physiological signals in both patients within hospital and home settings. It offers novel perspectives on spatiotemporal monitoring of cardiopulmonary and gastrointestinal disorders, as well as new methods for identifying and classifying subtypes of apnea in preterm infants and quantifying gas retention levels in high-risk neonates. While comprehensive evaluation across all disease contexts is still pending, the BAMS network system has already showcased its potential to enhance clinical decision-making, improve patient outcomes, and alle-

<sup>&</sup>lt;sup>1</sup> School of Integrated Circuits and Electronics, Beijing Institute of Technology, Beijing 100081, China

<sup>&</sup>lt;sup>2</sup> Institute of Flexible Electronics, Beijing Institute of Technology, Beijing 102488, China

<sup>\*</sup> Corresponding authors (emails: huaqilin@bit.edu.cn (Hua Q); gzshen@bit.edu.cn (Shen G))



Figure 1 Wireless BAMS device with clinical-grade continuous physiologic detection and diagnostic capabilities. (a) Schematic of the BAMS device used to track cardiorespiratory activity, gastrointestinal sounds, and multi-location respiratory sounds. (b) Photograph of the BAMS device on a neonatal model. (c) Schematic of the explosion of the BAMS device. (d) Schematic of the sound separation system device. (e). Comparison of clinical results of the BAMS device. Reprinted with permission from Ref. [14], Copyright 2024, Nature Portfolio.

viate the burden on healthcare institutions [19]. With ongoing research and development, the BAMS network system is poised to deliver more efficient and personalized services for both hospitals and homes, further advancing the field of physiological monitoring.

## Received 27 March 2024; accepted 29 March 2024; published online 9 April 2024

- 1 Virani SS, Alonso A, Benjamin EJ, *et al.* Heart disease and stroke statistics—2020 update: a report from the american heart association. Circulation, 2020, 141: e139–e596
- 2 Rajaratnam JK, Marcus JR, Flaxman AD, et al. Neonatal, postneonatal, childhood, and under-5 mortality for 187 countries, 1970–2010: a systematic analysis of progress towards Millennium Development Goal 4. Lancet, 2010, 375: 1988–2008

- 3 Zhao S, Ran W, Wang L, *et al.* Interlocked MXene/rGO aerogel with excellent mechanical stability for a health-monitoring device. J Semicond, 2022, 43: 082601
- 4 Dong C, An X, Wu Z, *et al.* Multilayered PdTe<sub>2</sub> /thin Si heterostructures as self-powered flexible photodetectors with heart rate monitoring ability. J Semicond, 2023, 44: 112001
- 5 Xia S, Fu W, Liu J, *et al.* Recyclable hydrogel for human-machine interface of multi-mode human vital signal acquisition. Sci China Mater, 2023, 66: 2843–2851
- 6 Yang W, Liu H, Du H, *et al.* Robust and superelastic spider web-like polyimide fiber-based conductive composite aerogel for extreme temperature-tolerant linear pressure sensor. Sci China Mater, 2023, 66: 2829–2842
- 7 Hua Q, Shen G. A wearable sweat patch for non-invasive and wireless monitoring inflammatory status. J Semicond, 2023, 44: 100401
- 8 Du X, Allwood G, Webberley KM, *et al.* Bowel sounds identification and migrating motor complex detection with low-cost piezoelectric

acoustic sensing device. Sensors, 2018, 18: 4240

- 9 Lee SH, Kim YS, Yeo MK, et al. Fully portable continuous real-time auscultation with a soft wearable stethoscope designed for automated disease diagnosis. Sci Adv, 2022, 8: eabo5867
- 10 Sharma P, İmtiaz SA, Rodriguez-Villegas E. Acoustic sensing as a novel wearable approach for cardiac monitoring at the wrist. Sci Rep, 2019, 9: 20079
- 11 Dai B, Gao C, Xie Y. Flexible wearable devices for intelligent health monitoring. VIEW, 2022, 3: 20220027
- 12 Hua Q, Meng H, Shen G. Monolithically integrated low-voltage soft eskins designed to emulate biological sensorimotor loop. Sci China Mater, 2023, 66: 4512–4514
- 13 Hua Q, Shen G. Low-dimensional nanostructures for monolithic 3Dintegrated flexible and stretchable electronics. Chem Soc Rev, 2024, 53: 1316–1353
- 14 Yoo JY, Oh S, Shalish W, et al. Wireless broadband acousto-mechanical

sensing system for continuous physiological monitoring. Nat Med, 2023, 29: 3137-3148

- 15 Choi YS, Jeong H, Yin RT, et al. A transient, closed-loop network of wireless, body-integrated devices for autonomous electrotherapy. Science, 2022, 376: 1006–1012
- 16 Jeong H, Lee JY, Lee KH, et al. Differential cardiopulmonary monitoring system for artifact-canceled physiological tracking of athletes, workers, and COVID-19 patients. Sci Adv, 2021, 7: eabg3092
- 17 Lee KH, Ni X, Lee JY, *et al.* Mechano-acoustic sensing of physiological processes and body motions *via* a soft wireless device placed at the suprasternal notch. Nat Biomed Eng, 2020, 4: 148–158
- 18 Kang YJ, Arafa HM, Yoo JY, et al. Soft skin-interfaced mechanoacoustic sensors for real-time monitoring and patient feedback on respiratory and swallowing biomechanics. npj Digit Med, 2022, 5: 147
- 19 Li R. Wireless multisite physiological sensor with clinical-grade accuracy. Nat Biotechnol, 2023, 41: 1689