

TITLE OF THE INVENTION

INFUSION METHOD AND INFUSION PUMP

5

BACKGROUND OF THE INVENTION

The present invention relates to an infusion pump and, more particularly, to a peristaltic infusion pump for performing to infuse liquid medicine or the like by pressing the outer surface of a flexible infusion tube.

To deliver the contents or liquid filled in the infusion tube, a peristaltic infusion pump having finger members operating in the longitudinal direction of the infusion tube is used.

15 According to a "pumping apparatus" in European Patent No. 0426273, the following infusion technique is disclosed. Closing means for closing an infusion tube are disposed on the upstream and downstream sides of the infusion tube, and a pair of finger members integrally
20 formed by a plurality of fingers are disposed between the closing means. After the shape portions formed in the finger members hold the infusion tube, the finger members are reciprocated to press the outer surface of the infusion tube at the shape portions to almost
25 completely collapse the infusion tube, thereby reducing the sectional area of the infusion tube.

SUMMARY OF THE INVENTION

In a peristaltic infusion pump having a plurality
5 of finger members which can be independently driven,
infusion is so performed as to almost collapse an
infusion tube.

With this arrangement, a discharge amount changes
depending on the difference in sectional area due to the
10 difference between the inner diameters of infusion tubes,
which difference results from the manufacturing
conditions of infusion tubes.

This will be described with reference to Fig. 9.
Assume that the inner diameter of a cylindrical infusion
15 tube T before collapse and a difference in inner
diameter between the tubes are defined as $2d$ and $2\Delta d$,
respectively. In this case, a discharge amount error ΔV
represented by $\pi\Delta d(2d - \Delta d)L$, which is a discharge
amount difference per period (cycle) of a finger
20 obtained by the difference (ΔA) in sectional area
difference ($2\Delta d$) due to manufacturing conditions or the
like in inner diameter between the tubes.

It is possible to manufacture infusion tubes almost
free from inner diameter errors. These tubes, however,
25 are more expensive than infusion tubes almost free from
outer diameter errors in terms of manufacturing

management and the like. Infusion tubes are often repeatedly used in actual medical services. New infusion tubes which are frequently used are often nonuniform in inner diameter and have errors in inner diameters. As a result, errors occur in discharge amounts.

The present invention has been made in consideration of the conventional problems described above, and has as its object to provide an infusion method and pump capable of performing infusion at a flow rate with high-accuracy by allowing finger members to appropriately press the predetermined portion of the outer diameter (outer surface) of an infusion tube whose dimensional precision is assured in outer diameter due to a reason such as manufacturing management for assuring the accuracy of the outer diameter easier than the accuracy of the inner diameter.

In order to solve the above problems and achieve the above object, according to the present invention, there are provided an infusion method and pump for pressing an outer surface of an infusion tube to supply a liquid, wherein the infusion pump comprises a plurality of fingers which are arranged along a longitudinal direction of the infusion tube having a predetermined outer diameter and independently driven, and holding means for stationarily holding the infusion tube between the fingers, and the infusion tube is

pressed from the outer surface to supply the liquid by setting a small moving amount of each finger and individually driving the fingers, thereby eliminating the influence of the wall thickness of the infusion tube.

5 In the infusion method and pump, the fingers are defined as first, second, ..., Nth fingers from an upstream side of a liquid flow, the first to (N-1)th fingers are sequentially and individually driven from a bottom dead center to top dead centers, the first to 10 (N-1)th fingers are set to simultaneously move toward the bottom dead center when the first to (N-1)th fingers are phase-locked, the Nth finger is set to be individually driven from the bottom dead center to a top dead center next to the (N-1)th finger and move toward 15 the bottom dead center when the first finger reaches the top dead center, the first and Nth fingers are individually driven to perfectly close the infusion tube at the top dead center, and the second to (N-1)th fingers are individually driven not to close an inner 20 cavity of the infusion tube at the top dead center.

A clamping width between the holding means and the bottom dead center of the first to Nth fingers is set smaller than the outer diameter of the infusion tube.

One or a plurality of external fingers are disposed 25 downstream the Nth finger to suppress pulsation caused by individual driving of the fingers, the external

fingers are individually driven from a top dead center to a bottom dead center at a phase for moving the first to Nth fingers toward the top dead center, the external fingers are individually driven from the bottom dead center to the top dead center at a phase for individually driving the Nth finger toward the bottom dead center, and the external fingers do not close the infusion tube at the top dead center.

In order to suppress pulsation caused by individual driving of the fingers, speed for sequentially and individually driving the fingers from the bottom dead center to the top dead centers is set proportional to the reciprocal of the tube collapse amount obtained by subtracting the clamping width from the outer diameter of the infusion tube.

Other features and advantages of the present invention will be apparent from the following description taken in conjunction with the accompanying drawings, in which like reference characters designate the same or similar parts throughout the figures thereof.

BRIEF DESCRIPTION OF THE DRAWINGS

Fig. 1A is a sectional view of an infusion pump eliminating cover, and Fig. 1B is a sectional view thereof along the line X - X in Fig. 1A;

Fig. 2 is a view illustrating a sectional state of the infusion tube;

Fig. 3 is a graph showing the relationship between the discharge amount and the collapse amount obtained
5 when the infusion tube is collapsed;

Fig. 4 is a view illustrating a sectional state of the infusion tube;

Fig. 5 is a view showing the correction effect of flow rate errors;

10 Fig. 6 is a view for explaining the operation of the fingers of the infusion pump;

Fig. 7 is a graph showing comparison in flow rate accuracy between the present invention and the conventional method;

15 Fig. 8 is a graph showing comparison in flow rate accuracy between the present invention and the conventional method; and

Fig. 9 is a view illustrating a sectional state of a conventional infusion tube.

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DETAILED DESCRIPTION OF THE PREFERRED EMBODIMENT

The preferred embodiment of the present invention will be described in detail below with reference to the
25 accompanying drawings. Fig. 1A is a sectional view of an

infusion pump, and Fig. 1B is a sectional view thereof along the line X - X in Fig. 1A.

Figs. 1A and 1B show only the driving portion of the infusion pump, and the remaining parts including
5 cover are not illustrated.

Referring to Figs. 1A and 1B, a driving motor 1 is fixed to a base indicated by a hatched portion. A rotation force generated upon energization is transmitted to a cam shaft 3 through a belt 2. The cam
10 shaft 3 is rotatably supported by a case 9 fixed to the base.

As illustrated in Fig. 1A, six cams 4 are fixed to the cam shaft 3. The cams 4 are respectively brought into contact with collars 5 rotatably supported on the
15 side surfaces of finger plates 6 each having one end fixed to a corresponding one of the fingers 10, so that the rotating motion of each cam 4 is converted into the linear motion of the corresponding finger plate 6.

Each finger plate 6 keeps clamping an infusion tube
20 T (not shown, but indicated by the broken line) with a reception plate 7 locked to an openable door (not shown) through springs. Thereafter, the driving motor 1 is driven to reciprocate the finger plates 6 in directions indicated by the double-headed arrow in FIG. 1B. The
25 infusion tube T clamped between the finger plates 6 and the reception plate 7 is sequentially closed by the

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fingers 10 in a manner to be described alter, thereby supplying the liquid contained in the infusion tube T.

Each cam plate 6 is so supported as to extend through shafts 8 through elliptic guide holes 6a of the corresponding finger plate 6, as shown in Fig. 1B, thereby eliminating lateral backlash. The infusion tube T is always and stably collapsed almost vertically in the directions indicated by the double-headed arrow. Since the plurality of shafts 8 parallel to the shaft 3 which rotatably supports the corresponding cam 4 are disposed and extend through elliptic holes each having a diameter almost equal to that of the shaft mounted in the finger to suppress right-and-left backlash of the corresponding finger.

There are various engaging relationships between the cams 4 and the collars 5, and only an example is illustrated in Figs. 1A and 1B. The engaging relationship and the cam drive mechanism arrangement are not limited to those shown in Figs. 1A and 1B. For example, various mechanisms ranging from a groove-cam system to a mechanism using a collar and a link can be employed, as a matter of course. Alternatively, each collar rotatably mounted on a shaft so as to move a corresponding finger back and forth in accordance with a free cam curve may be brought into contact with the cam,

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and the corresponding finger may move back and forth in accordance with the shape of the cam.

Although not shown, an infusion tube having a drip infusion cylinder (member) connected to the outlet of an infusion bag is often used by being clamped by the fingers.

Referring to Figs. 1A and 1B, in order to allow the finger 10 at the lowermost cam plate 6 to prevent pulsation, this finger 10 is driven to the position of the top dead center (right side in Figs. 1A and 1B) to collapse the infusion tube while the liquid drug is flowing in the infusion tube T. For this reason, in order to continue supplying the liquid drug downstream even in the state of the top dead center position, the lowermost finger 10 gradually moves from the top dead center to the bottom dead center during the discharge operations of the upper fingers. Therefore, part of the liquid drug discharged from the upper fingers 10 can be stored at the tube portion with which the lowermost finger 10 is in contact.

To the contrary, during the in-flow (infusion) of the liquid drug by the motion of upper fingers 10, the finger 10 at the lowermost cam plate 6 moves from the bottom dead center to the top dead center. The cam surface timings are so set as to correct the supply of the liquid drug and continue the supply.

Note that one finger 10 is disposed at each cam plate 6 in Figs. 1A and 1B. However, a plurality of fingers 10 may be disposed at each cam plate. If a finger has a large thickness, only one finger may be used. The plurality of fingers may have different thicknesses. As described above, the shape and number of fingers can be arbitrarily selected. In short, the number and shape of the upper fingers 10 are set in accordance with a discharge amount determined by one revolution of the cam shaft 3.

According to the infusion pump having the above structure, fingers except the uppermost finger 10 and the lowermost finger 10 are designed not to completely collapse the infusion tube T.

The principle of operation will be described with reference to the view (Fig. 2) showing a change in sectional area when a thick tube is collapsed.

Referring to Fig. 2, the infusion tube T is made of a flexible material consisting of a thermoplastic resin such as polyvinyl chloride resin almost free from permanent deformation by elongation upon collapse. The peripheral length of the infusion tube T will not change even when fingers press the tube.

The inner diameter of the infusion tube T in a free state before collapse is defined as $2d$, and an L portion

of the tube in the longitudinal direction is collapsed by the fingers.

Assume that the infusion tube T is collapsed by $2\Delta d$ to obtain an ellipse having semicircular portions each having a radius d' , as indicated by the broken line. In this case, when the straight portion of the ellipse is defined as K , as illustrated in Fig. 2, a peripheral length $2\pi d$ does not change, so that the following equations are established:

$$2\pi d = 2K + 2\pi d' \quad \dots (1)$$

$$d' = d - \Delta d \quad \dots (2)$$

Equations (1) and (2) derive the following equation:

$$K = \pi\Delta d \quad \dots (3)$$

An inner area S' obtained by collapsing the infusion tube T by $2\Delta d$ is given as follows:

$$\begin{aligned} S' &= 2d'K + \pi d'^2 \\ &= \pi(d^2 - \Delta d^2) \end{aligned} \quad \dots (4)$$

Since the initial area was πd^2 , a decrease ΔS in area upon collapsing the infusion tube T by the fingers by $2\Delta d$ is given by:

$$\Delta S = \pi\Delta d^2 \quad \dots (5)$$

As can be apparent from equation (5), the discharge amount upon collapsing the infusion tube T is proportional to the square of a collapse amount Δd . This indicates that the flow rate can be accurately controlled even in use of infusion tubes T having

different outer diameters due to manufacturing conditions or the like if the collapse amount is measured and controlled with high accuracy.

The relationships between the collapse and
5 discharge amounts of infusion tubes were actually checked in an experiment. The graph shown in Fig. 3 representing the relationships between the actually measured collapse and discharge amounts of infusion tubes was obtained. Curves obtained by this experiment
10 were parabolic, and it was confirmed that the measured values almost agreed with the calculated values in equation (5).

Actual infusion tubes T have wall thicknesses, and tolerances which vary depending on the manufacturing
15 conditions must be added to the thickness even if these infusion tubes are formed in the same manufacturing method. According to the conventional driving scheme for perfectly collapsing an infusion tube up to zero inner diameter, the relationship between the discharge amount
20 and the collapse amount of the outer diameter of the tube necessarily includes an error corresponding to the wall thickness tolerance. In other words, the inner tube area error caused by the manufacturing tolerance of the inner diameter of the tube directly results in a
25 discharge amount error.

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Even at the top dead center to which each finger moves maximum, when the clamping width is so set not to make the inner diameter zero in consideration of the tolerance of the wall thickness, a change in discharge
5 amount depends on only the tolerance of the outer diameter. The manufacturing tolerance of the outer diameter of the infusion tube T can be controlled easier than that of the inner diameter, and at the same time, measurement can be facilitated, thereby allowing
10 manufacturing management.

When the clamping width between the finger 10 and the receiving plate (receiving member) 7 Figs. 1A and 1B is set larger than the outer diameter at the bottom dead center and larger than the wall thickness of the
15 infusion tube T at the top dead center, the flow rate can be managed with high accuracy even in use of a general inexpensive infusion tube. Such a general-purpose infusion tube greatly varies in outer diameter. For this reason, an outer diameter measurement
20 sensor or outer diameter measuring apparatus (means) can be arranged in an infusion pump to automatically measure the outer diameter of an infusion tube set in a driving portion, calculate a change in discharge amount, and control the driving motor speed or motor rotation rate
25 in accordance with the change in discharge amount. Even

if various types of infusion tubes are used, the flow rates can be controlled with high accuracy.

Fig. 4 is a view illustrating that an infusion amount error can be corrected in an infusion tube having an outer diameter tolerance including an outer diameter tolerance 2α . Fig. 4 shows that the infusion amount error caused by the outer diameter tolerance can be corrected such that the clamping width between the receiving plate and the finger when the finger reaches the bottom dead center is set smaller than the outer diameter of the infusion tube.

Referring to Fig. 4, when an infusion tube T having an inner diameter $2d$ without considering the wall thickness, and an infusion tube having an inner diameter $2(d + \alpha)$ considering the diameter tolerance of 2α are set in the driving portions, the clamping widths are set to $2(d - \Delta d)$ at the bottom dead center. $2\Delta d$ is the collapse amount. Note that the inner diameter portion of the tube is substantially perfectly collapsed at the top dead center.

The sectional areas in the respective states in Fig. 4 are represented by equations (6) to (9):

$$S1 = \pi d^2 \quad \dots (6) \quad \text{State 1}$$

$$S2 = \pi (d + \alpha)^2 \quad \dots (7) \quad \text{State 2}$$

$$S1' = \pi (d^2 - \Delta d^2) \quad \dots (8) \quad \text{State 1'}$$

$$S2' = \pi (d + \alpha)^2 - \pi (\alpha + \Delta d)^2 \quad \dots (9) \quad \text{State 2'}$$

The sectional areas of the two infusion tubes which are set free at the bottom dead center are obtained by equations (6) and (7). A ratio of the sectional areas when perfectly collapsing the tubes from the free state corresponding to the top dead center is given by equation (10). Similarly, the sectional areas of the two infusion tubes which are collapsed at the bottom dead center are given by equations (8) and (9). When a ratio of the sectional areas when collapsing the tubes from the states obtained by equations (8) and (9) is given by equation (11):

$$\frac{\Delta S_2}{\Delta S_1} = \frac{\pi(d+\alpha)^2}{\pi d^2} = \left(1 + \frac{\alpha}{d}\right)^2 \approx 1 + 2\frac{\alpha}{d} \quad (d \gg \alpha) \quad \dots (10)$$

$$\begin{aligned} \frac{\Delta S_2'}{\Delta S_1'} &= \frac{\pi(d+\alpha)^2 - \pi(\alpha+\Delta d)^2}{\pi(d^2 - \Delta d^2)} \quad \dots (11) \\ &= \frac{d + \Delta d + 2\alpha}{d + \Delta d} = 1 + 2\frac{\alpha}{d + \Delta d} \\ &= 1 + 2\frac{\alpha}{d(1 + \frac{\Delta d}{d})} \end{aligned}$$

From equation (10), $2\alpha/d$ can be the flow rate error. On the other hand, the error is defined as $2\alpha/d(1+\Delta d/d)$ in equation (11).

From $2\alpha/d > 2\alpha/d(1+\Delta d/d)$, the error is smaller in equation (11) than in equation (10). The tube collapsed at the bottom dead center has a smaller infusion amount

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error than the tube collapsed at the top dead center to improve the infusion accuracy.

Fig. 5 is a graph showing the collapse amount vs. flow rate error characteristics with respect to the outer diameter of the tube, in which $\Delta d/d$ is plotted along the abscissa. Fig. 5 shows an effect using, as the reference, the sectional area ratio of the two infusion tubes having diameter tolerance $2d$ in a free state at the bottom dead center. Referring to Fig. 5, if a ratio of the collapse amount to the outer diameter is 0.4, and an error upon perfect collapse of the tube is given as 10%, then $10\% \times 0.7 = 7.0\%$. This indicates the improvement of infusion accuracy.

The order of supplying the liquid drug will be described with reference to the view (Fig. 6) for explaining the operation to show the phases of the fingers on the basis of the principle of operation. Referring to Fig. 6, the leftmost position of each finger 10 is the top dead center, while the rightmost position of each finger 10 is the bottom dead center. The number N of fingers 10 is 5, and the five fingers are driven from step A to step F.

In step A, the lowermost fifth finger 10-5 is located at the top dead center to close the infusion tube T on the downstream side, and the remaining fingers are located at the bottom dead center. The tube clamping

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width at the bottom dead center is set smaller than the outer diameter of the infusion tube. In the state indicated by step A, the liquid drug flows from the upstream side and fills the infusion tube.

5 In step B, the uppermost first finger 10-1 moves to the top dead center to close the infusion tube to stop the flow. In step C, the fifth finger 10-5 moves toward the bottom dead center side to open the infusion tube toward the downstream side. In the process of steps D and E, the second, third, and fourth fingers 10-2, 10-3, 10 and 10-4 sequentially move toward the top dead center side to sequentially reduce the sectional area, thereby discharging the liquid drug toward the downstream side (i.e., a direction indicated by an arrow).

15 Finally, in step F, the fifth finger 10-5 moves toward the top dead center side to close the infusion tube, thereby completing the discharge. The first to fourth fingers then move to the bottom dead center to complete the operation of one period. The top dead 20 center positions of the second, third, and fourth fingers 10-2, 10-3, and 10-4 are set to clamp the infusion tube so as not to completely collapse the inner cavity of the infusion tube.

25 The measurement comparison examples of flow rate accuracy are shown in Figs. 7 and 8. The outer diameters of the infusion tubes are plotted along the abscissa in

Fig. 7, while the inner diameters of the infusion tubes are plotted along the abscissa in Fig. 8. As can be apparent from comparison between the plotted data and between correlation coefficients r calculated on the basis of the data in Figs. 7 and 8, the flow rate accuracy in the conventional peristaltic scheme has a strong correlation with the inner diameter, while the flow rate accuracy in the scheme of the present invention has a strong correlation with the outer diameter. At the same time, the flow rate accuracy of the present invention is higher than that of the conventional scheme.

From equation (5), the sectional area is reduced in proportion to the square of the moving amount of the finger to change the discharge amount. For this reason, when the fingers are moved from the bottom dead center to the top dead center side at a constant speed, pulsation occurs in the discharge amount during the movement. When the cam curve is so set as to make the moving speed of the finger from the bottom dead center to the top dead center proportional to a reciprocal of the moving amount of the finger, i.e., the collapse amount of the tube, the liquid drug can be supplied without any pulsation. Note that the number of fingers except the uppermost and lowermost fingers 10 need not be plural, but may be one having a predetermined thickness.



In the actual infusion pump, by referring Fig. 6, the infusion tube T has outer diameter of 4.45mm and wall thickness of 0.65mm, the fingers 10-2 ~ 10-N-1 have a stroke (between top dead center and bottom dead center) of 1.3mm when not-completely collapsing the tube and a stroke of 1.7mm when completely collapsing the infusion tube T.

That is, a ratio of completely collapsing and not completely collapsing is set as 76% when the ratio is set between 60% ~ 85% it becomes possible to obtain the good effect as described above.

As has been described above, according to the present invention, the flow rate accuracy dependent on the outer diameter of the infusion tube can be obtained, thereby providing an infusion pump capable of obtaining stable flow rate accuracy. In addition, the loss of flexibility (degradation) of the tube can be minimized, thereby providing an infusion pump capable of obtaining stable flow rate accuracy.

As many apparently widely different embodiments of the present invention can be made without departing from the spirit and scope thereof, it is to be understood that the invention is not limited to the specific embodiments thereof except as defined in the appended claims.

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WHAT IS CLAIMED IS:

1. An infusion method of pressing an infusion tube
from an outer surface thereof to supply a liquid,
5 comprising
stationarily holding said infusion tube between a
plurality of fingers which are arranged along a
longitudinal direction of said infusion tube having a
predetermined outer diameter and independently driven,
10 and holding means; and
pressing said infusion tube from said outer surface
to supply the liquid by setting a small moving amount of
each finger to a degree enough to eliminate an influence
of a wall thickness of said infusion tube and
15 individually driving said fingers.
2. The method according to claim 1, further
comprising:
defining said fingers as first, second, ..., Nth
fingers from an upstream side of liquid flow;
20 sequentially and individually driving said first to
(N-1)th fingers from a bottom dead center to top dead
center, setting said first to (N-1)th fingers to
simultaneously move toward the bottom dead center when
said first to (N-1)th fingers are phase-locked, and
25 setting said Nth finger to be individually driven from
the bottom dead center to a top dead center next to said



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(N-1)th finger and move toward the bottom dead center when said first finger reaches the top dead center; and individually driving said first and Nth fingers to perfectly close said infusion tube at the top dead center, and individually driving said second to (N-1)th fingers not to close an inner cavity of said infusion tube at the top dead center.

3. The method according to claim 2, wherein a clamping width between said holding means and the bottom dead center of said first to Nth fingers is set smaller than the outer diameter of said infusion tube.

4. The method according to claim 2, further comprising:

disposing one or a plurality of external fingers downstream said Nth finger to suppress pulsation caused by individual driving of said fingers;

individually driving said external fingers from a top dead center to a bottom dead center at a phase for moving said first to Nth fingers toward the top dead center, and individually driving said external fingers from the bottom dead center to the top dead center at a phase for individually driving said Nth finger toward the bottom dead center; and

setting said external fingers not to close said infusion tube at the top dead center.



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5. The method according to claim 3, further comprising, in order to suppress pulsation caused by individual driving of said fingers, making a speed for sequentially and individually driving said fingers from the bottom dead center to the top dead centers proportional to a reciprocal of a tube collapse amount obtained by subtracting the clamping width from the outer diameter of said infusion tube.
6. An infusion pump for pressing an outer surface of an infusion tube to supply a liquid, comprising:
a plurality of fingers which are arranged along a longitudinal direction of said infusion tube having a predetermined outer diameter and independently driven, and
holding means for stationarily holding said infusion tube between said fingers,
wherein said infusion tube is pressed from said outer surface to supply the liquid by setting a small moving amount of each finger and individually driving said fingers, thereby eliminating an influence of a wall thickness of said infusion tube.
7. The pump according to claim 6, wherein
said fingers are defined as first, second, ..., Nth fingers from an upstream side of a liquid flow,
said first to (N-1)th fingers are sequentially and individually driven from a bottom dead center to top

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dead centers, said first to (N-1)th fingers are set to simultaneously move toward the bottom dead center when said first to (N-1)th fingers are phase-locked,

5 said Nth finger is set to be individually driven from the bottom dead center to a top dead center next to said (N-1)th finger and move toward the bottom dead center when said first finger reaches the top dead center, and

10 said first and Nth fingers are individually driven to perfectly close said infusion tube at the top dead center, and said second to (N-1)th fingers are individually driven not to close an inner cavity of said infusion tube at the dead center.

15 8. The pump according to claim 7, wherein a clamping width between said holding means and the bottom dead center of said first to Nth fingers is set smaller than the outer diameter of said infusion tube.

20 9. The pump according to claim 7, further comprising one or a plurality of external fingers disposed downstream said Nth finger to suppress pulsation caused by individual driving of said fingers, said external fingers being individually driven from a top dead center to a bottom dead center at a phase for moving said first to Nth fingers toward the top dead center, said external
25 fingers being individually driven from the bottom dead center to the top dead center at a phase for

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individually driving said Nth finger toward the bottom dead center, and said external fingers not closing said infusion tube at the top dead center.

10. The pump according to claim 8, wherein, in order to
5 suppress pulsation caused by individual driving of said fingers, a speed for sequentially and individually driving said fingers from the bottom dead center to the top dead centers is set proportional to a reciprocal of a tube collapse amount obtained by subtracting the
10 clamping width from the outer diameter of said infusion tube.

11. The pump according to any one of claims 6 to 10,
further comprising a measuring means for measuring an outer diameter of the infusion tube, a controlling means
15 for speed controlling a driving motor which drives the plurality of fingers, by calculating the variation of flow rate of the liquid based on the outer diameter which is measured by the measuring means.



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ABSTRACT OF THE DISCLOSURE

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INFUSION METHOD AND INFUSION PUMP

According to an infusion method and pump, in order to perform infusion at a flow rate with high accuracy by
5 allowing finger members to appropriately press a predetermined portion of an outer diameter (outer surface) of an infusion tube whose outer diameter accuracy is assured, thereby causing the infusion tube to perform a peristaltic motion, the infusion tube is
10 stationarily held between a plurality of fingers which are arranged along the longitudinal direction of the infusion tube having a predetermined outer diameter and independently driven, and a holding means. The infusion tube is pressed from the outer surface to supply a
15 liquid by setting a small moving amount of each finger to a degree enough to eliminate the influence of the wall thickness of the infusion tube and individually driving the fingers.

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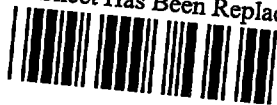


FIG. 1A

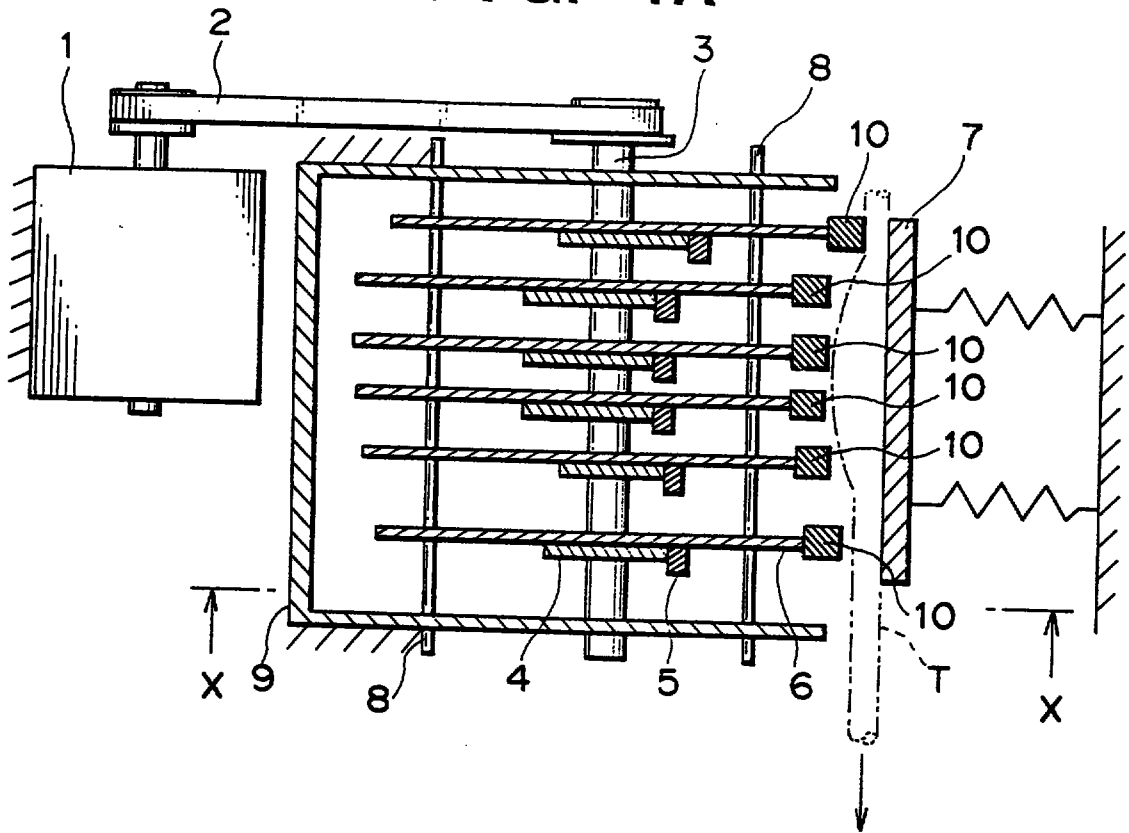


FIG. 1B

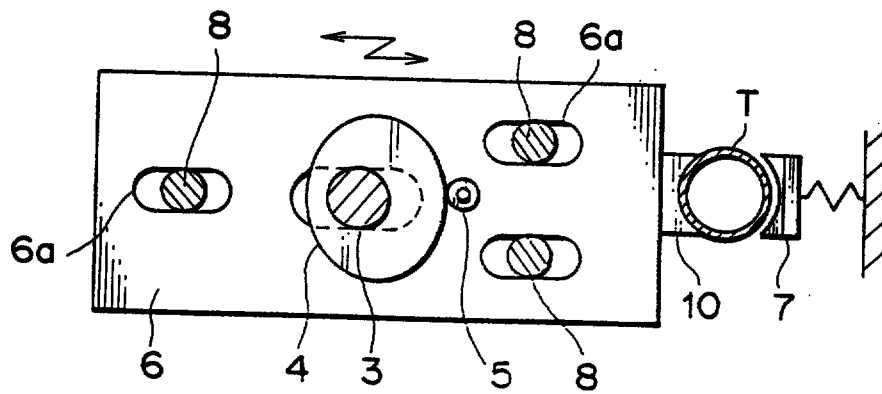


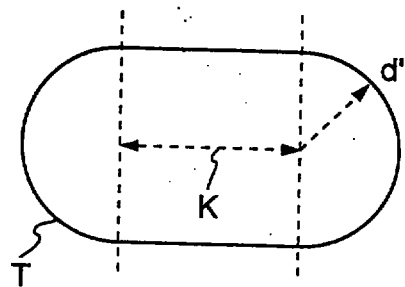
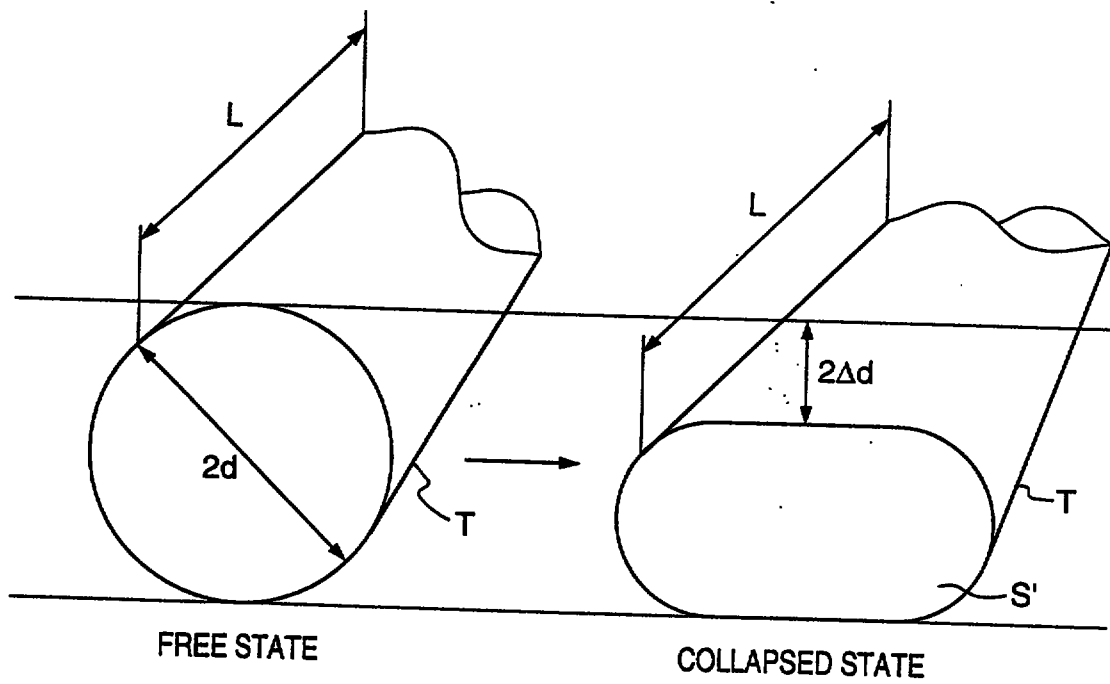
FIG. 2

FIG. 3

EXAMPLE OF ACTUAL MEASUREMENT OF COLLAPSE
AMOUNT OF TUBE AND DISCHARGE AMOUNT

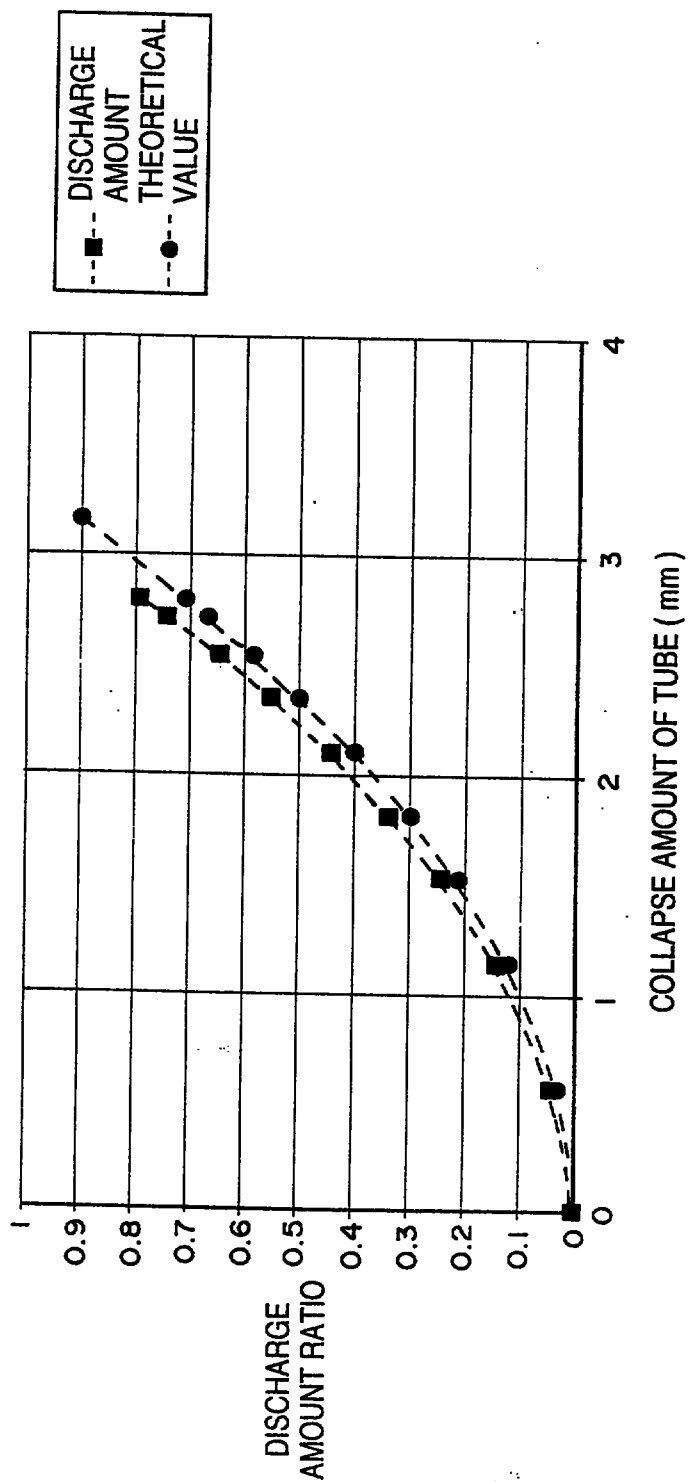


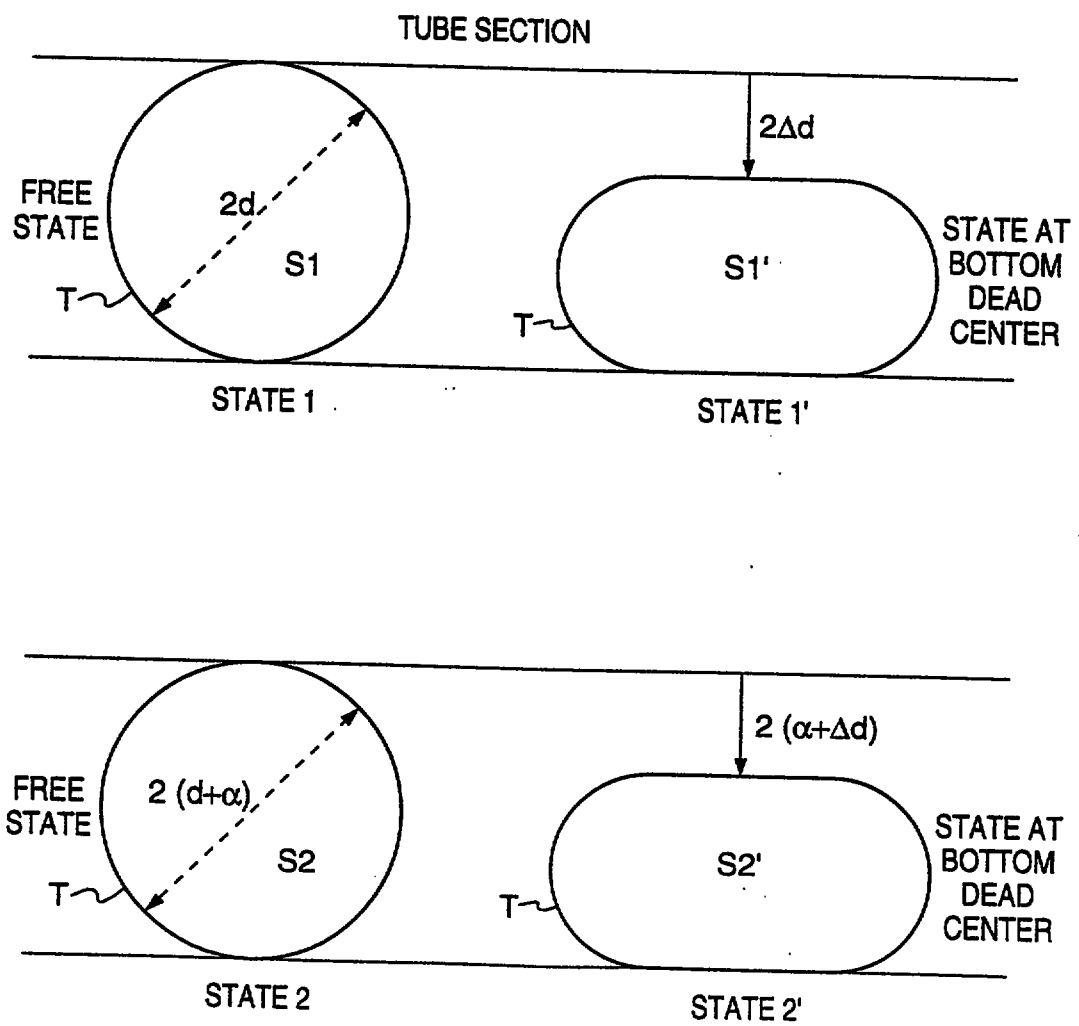
FIG. 4

FIG. 5

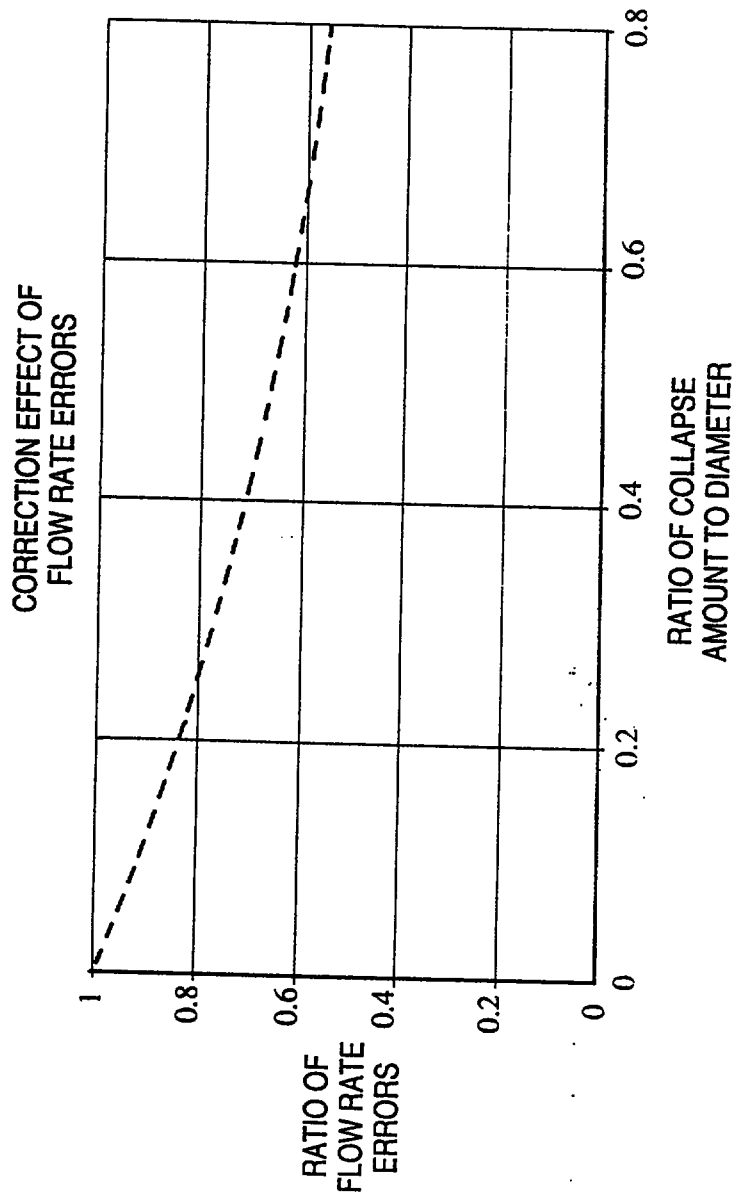


FIG. 6

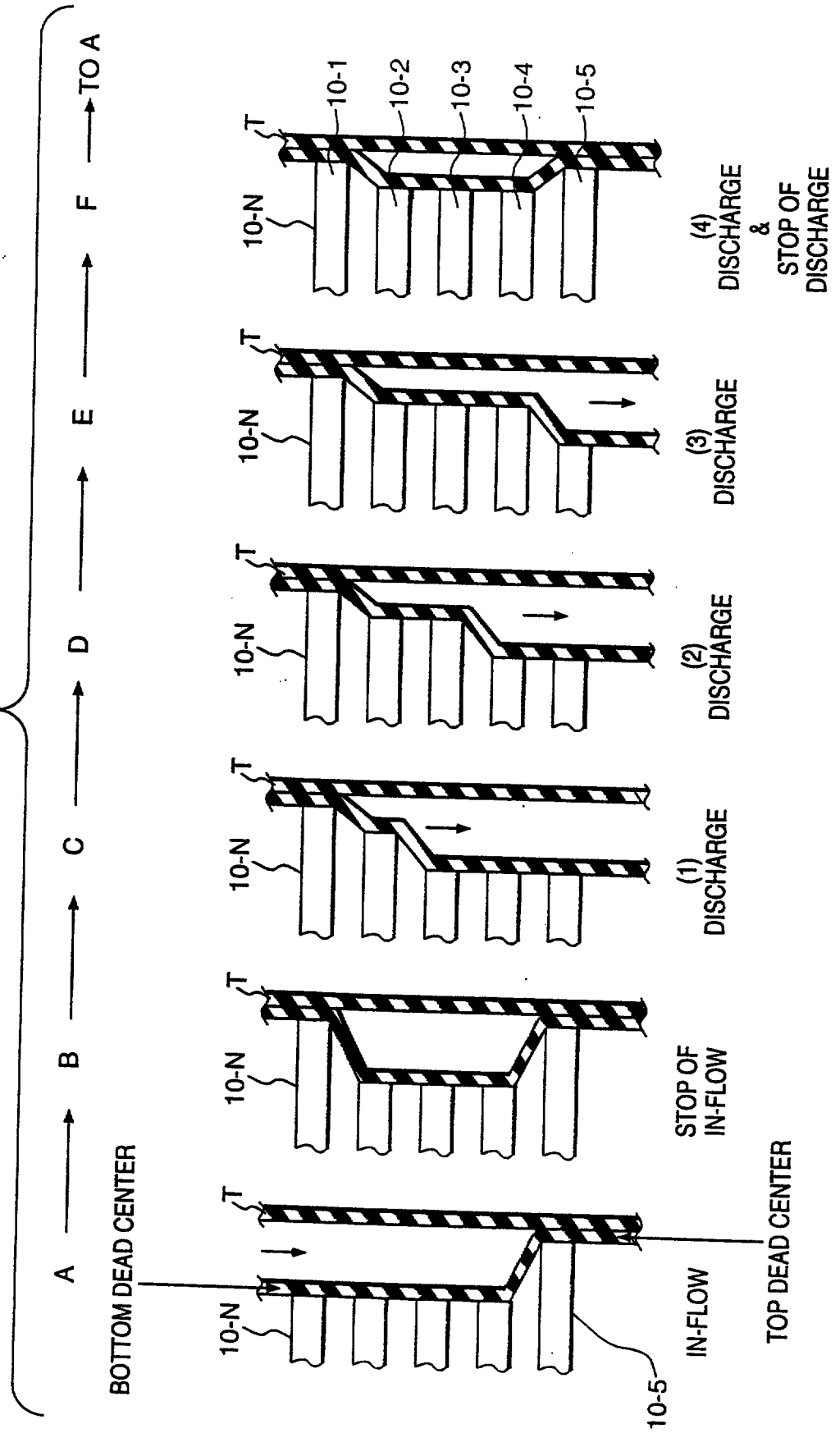
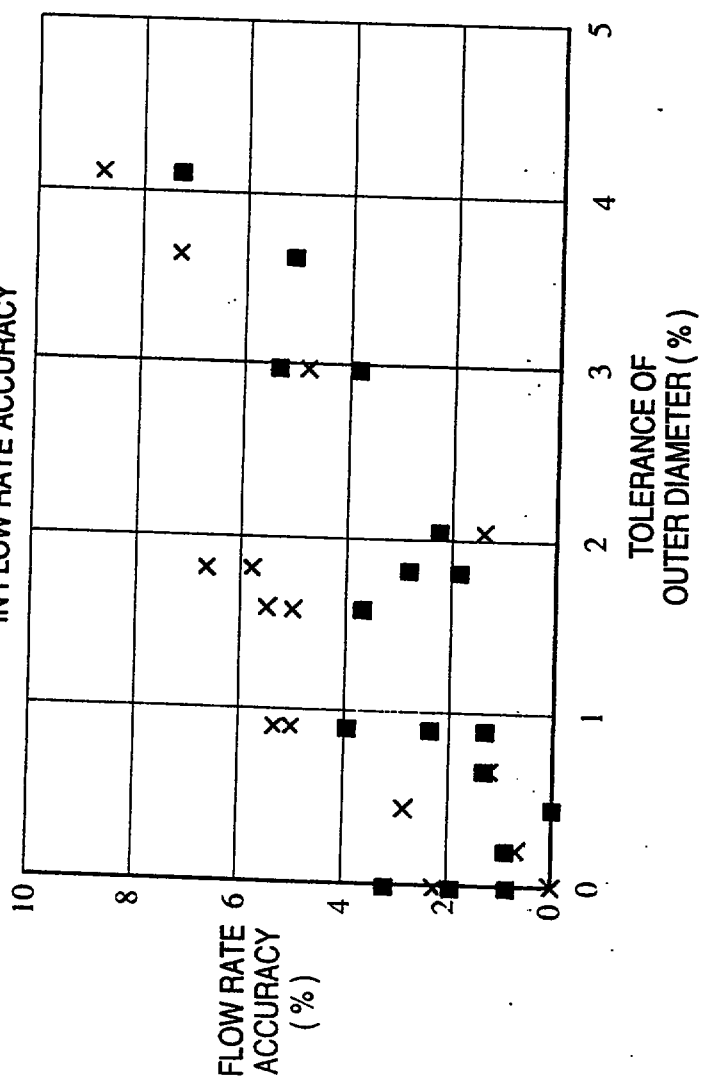


FIG. 7

EXAMPLE 1 OF COMPARISON
IN FLOW RATE ACCURACY



PRESENT
INVENTION
CONVENTIONAL
SCHEME

PRESENT INVENTION $r = 0.81$
CONVENTIONAL SCHEME $r = 0.52$

FIG. 8

EXAMPLE 2 OF COMPARISON
IN FLOW RATE ACCURACY

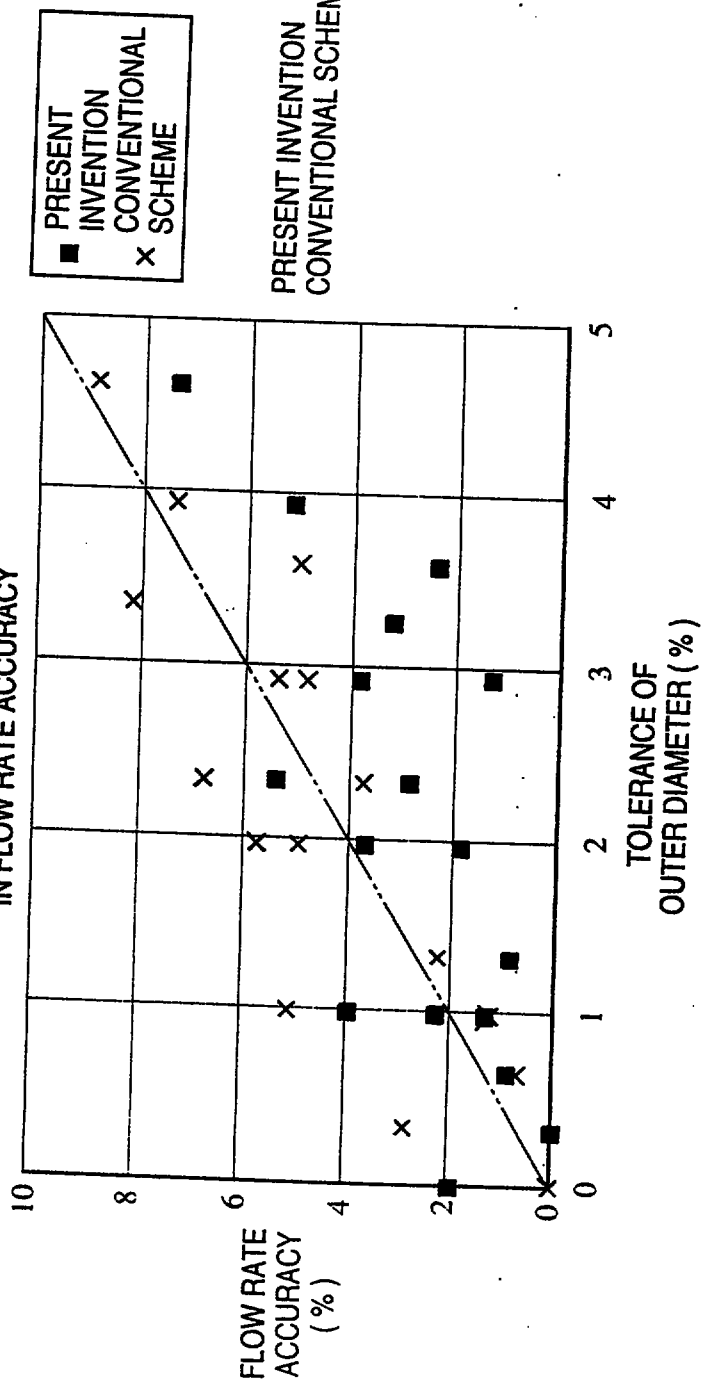
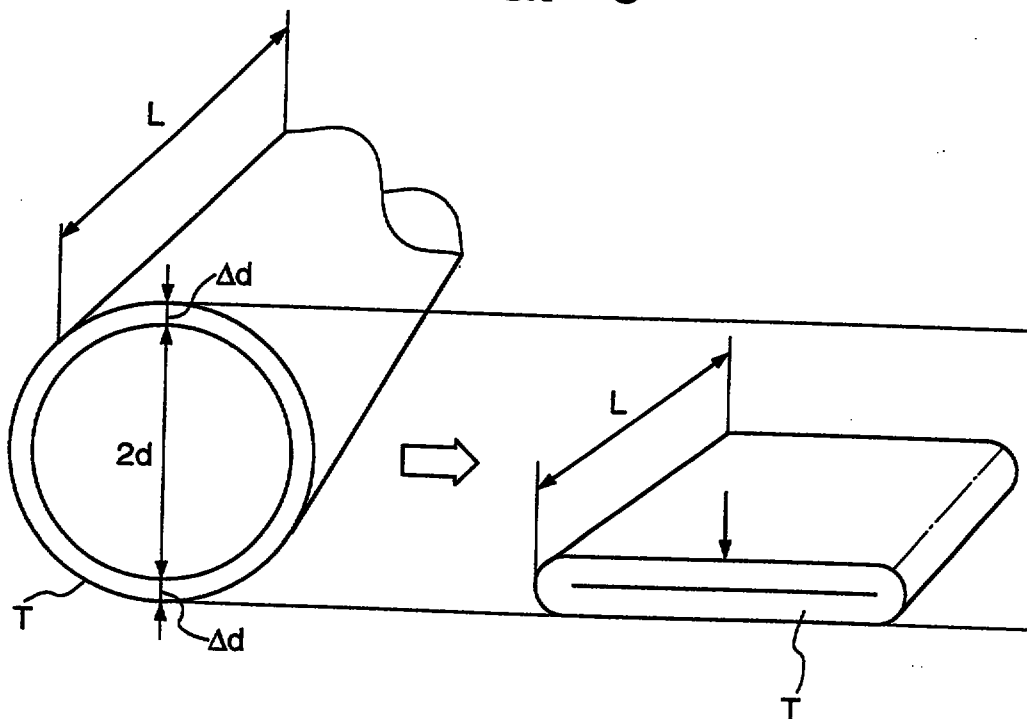
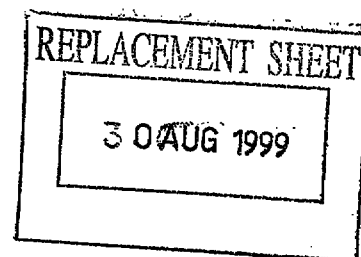


FIG. 9

$$\Delta A = \pi d^2 - \pi (d - \Delta d)^2 = \pi \Delta d (2d - \Delta d)$$

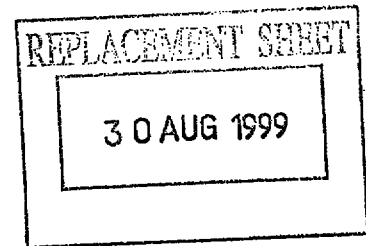
$$\Delta V = \Delta S \cdot L = \pi \Delta d (2d - \Delta d) \cdot L$$



fingers 10 in a manner to be described ~~alter~~^{later}, thereby supplying the liquid contained in the infusion tube T.

Each cam plate 6 is so supported as to extend through shafts 8 through elliptic guide holes 6a of the corresponding finger plate 6, as shown in Fig. 1B, thereby eliminating lateral backlash. The infusion tube T is always and stably collapsed almost vertically in the directions indicated by the double-headed arrow. Since the plurality of shafts 8 parallel to the shaft 3 which rotatably supports the corresponding cam 4 are disposed and extend through elliptic holes each having a diameter almost equal to that of the shaft mounted in the finger to suppress right-and-left backlash of the corresponding finger.

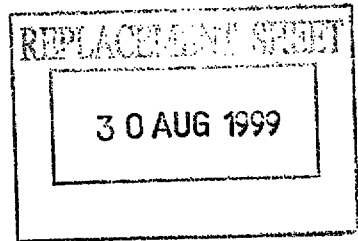
There are various engaging relationships between the cams 4 and the collars 5, and only an example is illustrated in Figs. 1A and 1B. The engaging relationship and the cam drive mechanism arrangement are not limited to those shown in Figs. 1A and 1B. For example, various mechanisms ranging from a groove-cam system to a mechanism using a collar and a link can be employed, as a matter of course. Alternatively, each collar rotatably mounted on a shaft so as to move a corresponding finger back and forth in accordance with a free cam curve may be brought into contact with the cam,



different outer diameters due to manufacturing conditions or the like if the collapse amount is measured and controlled with high accuracy.

The relationships between the collapse and
5 discharge amounts of infusion tubes were actually
checked in an experiment. The graph shown in Fig. 3
representing the relationships between the actually
measured collapse and discharge amounts of infusion
tubes was obtained. Curves obtained by this experiment
10 ~~were~~ ^{were} parabolic, and it was confirmed that the measured
values almost agreed with the calculated values in
equation (5).

Actual infusion tubes T have wall thicknesses, and
tolerances which vary depending on the manufacturing
15 conditions must be added to the thickness even if these
infusion tubes are formed in the same manufacturing
method. According to the conventional driving scheme for
perfectly collapsing an infusion tube up to zero inner
diameter, the relationship between the discharge amount
20 and the collapse amount of the outer diameter of the
tube necessarily includes an error corresponding to the
wall thickness tolerance. In other words, the inner tube
area error caused by the manufacturing tolerance of the
inner diameter of the tube directly results in a
25 discharge amount error.



error than the tube collapsed at the top dead center to improve the infusion accuracy.

Fig. 5 is a graph showing the collapse amount vs. flow rate error characteristics with respect to the outer diameter of the tube, in which $\Delta d/d$ is plotted along the abscissa. Fig. 5 shows an effect using, as the reference, the sectional area ratio of the two infusion tubes having diameter tolerance $2d$ in a free state at the bottom dead center. Referring to Fig. 5, if a ratio of the collapse amount to the outer diameter is 0.4, and an error upon perfect collapse of the tube is given as 10%, then $10\% \times 0.7 = 7.0\%$. This indicates the improvement of infusion accuracy.

The order of supplying the liquid drug will be described with reference to the view (Fig. 6) for explaining the operation to show the phases of the fingers on the basis of the principle of operation. Referring to Fig. 6, the leftmost position of each finger 10 is the bottom ~~top~~ dead center, while the rightmost position of each finger 10 is the top ~~bottom~~ dead center. The number N of fingers 10 is 5, and the five fingers are driven from step A to step F.

In step A, the lowermost fifth finger 10-5 is located at the top dead center to close the infusion tube T on the downstream side, and the remaining fingers are located at the bottom dead center. The tube clamping

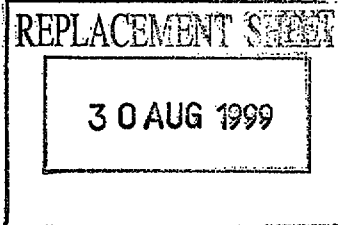
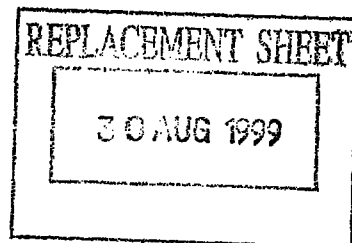


Fig. 7, while the inner diameters of the infusion tubes are plotted along the abscissa in Fig. 8. As can be apparent from comparison between the plotted data and between correlation coefficients r calculated on the basis of the data in Figs. 7 and 8, the flow rate accuracy in the conventional peristaltic scheme has a strong correlation with the inner diameter, while the flow rate accuracy in the scheme of the present invention has a strong correlation with the outer diameter. At the same time, the flow rate accuracy of the present invention is higher than that of the conventional scheme.

From equation (5), the sectional area is reduced in proportion to the square of the moving amount of the finger to change the discharge amount. For this reason, when the fingers are moved from the bottom dead center to the top dead center side at a constant speed, pulsation occurs in the discharge amount during the movement. When the cam curve is so set as to make the moving speed of the finger from the bottom dead ~~center~~ ^{center} to the top dead center proportional to a reciprocal of the moving amount of the finger, i.e., the collapse amount of the tube, the liquid drug can be supplied without any pulsation. Note that the number of fingers except the uppermost and lowermost fingers 10 need not be plural, but may be one having a predetermined thickness.

CLM 5
n-24



WHAT IS CLAIMED IS:

1. An infusion method of pressing an infusion tube from an outer surface thereof to supply a liquid, comprising

stationarily holding said infusion tube between holding means and a plurality of independently driven fingers which are arranged along a longitudinal direction of said infusion tube, said infusion tube having a predetermined outer diameter, ~~and independently driven, and holding means;~~ and

~~{pressing}~~ controlling the amount of discharge of the liquid to be proportional to the square of the amount of collapse of the infusion tube by individually driving said fingers to press said infusion tube from said outer surface to supply the liquid, each of the fingers being individually driven to move by an {by setting a small moving} amount {of each finger to a degree enough to eliminate} which eliminates an influence of a wall thickness of said infusion tube, {and individually driving said fingers.}

2. The method according to claim 1, ~~{further comprising:}~~

~~{defining}~~ wherein said fingers ~~{as}~~ comprise a first, second, ..., Nth fingers from an upstream side of liquid flow;

the method including sequentially and individually driving said first to (N-1)th fingers from a bottom dead center to a top dead center, ~~{setting}~~ simultaneously moving said first to (N-1)th fingers ~~{to simultaneously move}~~ toward the bottom dead center, ~~{when said first to (N-1)th fingers are phase locked, and setting}~~ driving said Nth finger ~~{to be individually driven}~~ from the bottom dead center to a top dead center ~~{next to said (N-1)th finger}~~ and



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driving said Nth finger from the top dead center ~~{move}~~ toward the bottom dead center when said first finger reaches the top dead center; and

~~{individually driving}~~ said first and Nth fingers ~~{to perfectly}~~ being driven to completely close said infusion tube when the first and Nth fingers are at the top dead center, and ~~{individually driving}~~ said second to (N-1)th fingers being driven to not {to} completely close an inner cavity of said infusion tube when said second to (N-1)th fingers are at the top dead center.

3. The method according to claim 2, wherein a clamping width between said holding means and the bottom dead center of said first ~~{to}~~ and Nth fingers is set smaller than the outer diameter of said infusion tube.

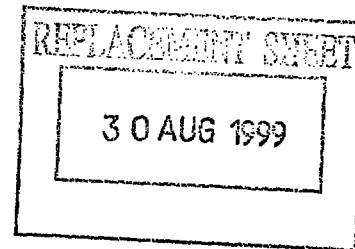
~~4. The method according to claim 2, further comprising:~~

disposing one or a plurality of external fingers downstream said Nth finger to suppress pulsation caused by individual driving of said fingers;

individually driving said external fingers from a top dead center to a bottom dead center at a phase for moving said first to Nth fingers toward the top dead center, and individually driving said external fingers from the bottom dead center to the top dead center at a phase for individually driving said Nth finger toward the bottom dead center; and

setting said external fingers not to close said ~~infusion tube at the top dead center.~~





4 ~~7~~. The method according to claim 3, further comprising, ~~in order to suppress~~ suppressing pulsation caused by individual driving of said fingers~~[,] by [making a speed for]~~ sequentially and individually driving said fingers from the bottom dead center to the top dead ~~centers~~ center at a speed proportional to a reciprocal of a tube collapse amount obtained by subtracting the clamping width from the outer diameter of said infusion tube.

5 ~~6~~. An infusion pump for pressing an outer surface of an infusion tube to supply a liquid, comprising:

a plurality of independently driven fingers which are arranged along a longitudinal direction of said infusion tube having a predetermined outer diameter, ~~and independently driven, and~~

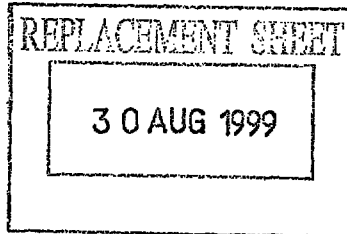
holding means for stationarily holding said infusion tube between said fingers and said holding means, and

~~[wherein]~~ driving means operatively associated with said fingers to individually move said fingers and control the amount of discharge of the liquid from said infusion tube by pressing said infusion tube [is pressed] from said outer surface [to supply the liquid] through individual movement of said fingers by an amount which eliminates an influence of wall thickness of said infusion tube and such that an amount of discharge of the liquid upon collapsing the infusion tube is proportional to the square of the amount of collapse of the infusion tube, [by setting a small moving amount of each finger and individually driving said fingers, thereby eliminating an influence of a wall thickness of said infusion tube.]

6 ~~7~~. The pump according to claim ⁵~~6~~, wherein

said fingers ~~[are defined as]~~ comprise first, second, ..., Nth fingers from an





upstream side of a liquid flow,

said driving means sequentially and individually drives said first to (N-1)th fingers ~~{are sequentially and individually driven}~~ from a bottom dead center to a top dead ~~{centers}~~ center, simultaneously moves said first to (N-1)th fingers ~~{are set to simultaneously move}~~ toward the bottom dead center, ~~{when said first to (N-1)th fingers are phase-locked,}~~

said driving means individually drives said Nth finger ~~{is set to be individually driven}~~ from the bottom dead center to a top dead center ~~{next to said (N-1)th finger}~~ and ~~{move}~~ drives said Nth finger toward the bottom dead center when the said first finger reaches the top dead center, and

said driving means drives said first and Nth fingers ~~{are individually driven}~~ to ~~{perfectly}~~ completely close said infusion tube when the first and Nth fingers are at the top dead center, and drives said second to (N-1)th fingers ~~{are individually driven not}~~ to not completely close an inner cavity of said infusion tube when the first and Nth fingers are at the dead center.

7-8. The pump according to claim ⁶7, wherein a clamping width between said holding means and the bottom dead center of said first ~~{to}~~ and Nth fingers is set smaller than the outer diameter of said infusion tube.

~~9. The pump according to claim 7, further comprising one or a plurality of external fingers disposed downstream said Nth finger to suppress pulsation caused by individual driving of said fingers, said external fingers being individually driven from a top dead center to a bottom dead center at a phase for moving said first to Nth fingers toward the top dead center, said external fingers being individually driven from the bottom dead center to the top dead center at a phase for~~



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~~individually driving said Nth finger toward the bottom dead center, and said external fingers not closing said infusion tube at the top dead center.~~

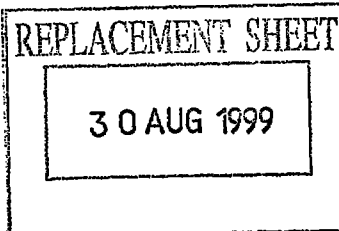
8 ~~10~~. The pump according to claim ⁷~~8~~, wherein, in order to suppress pulsation caused by individual driving of said fingers, a speed for sequentially and individually driving said fingers from the bottom dead center to the top dead centers is set proportional to a reciprocal of a tube collapse amount obtained by subtracting the clamping width from the outer diameter of said infusion tube.

9 ~~11~~. The pump according to ^{claim 5}~~any one of claims 6 to 10~~ ~~6~~ further comprising ~~{a}~~ measuring means for measuring an outer diameter of the infusion tube, ~~{a}~~ controlling means for speed controlling ~~{a}~~ said driving ~~{motor which drives the plurality of fingers}~~ means, by calculating the variation of flow rate of the liquid based on the outer diameter which is measured by the measuring means.

10. An infusion method of pressing an infusion tube from an outer surface thereof to supply a liquid, comprising

positioning the infusion tube between a surface and a plurality of independently driven fingers so that the fingers are arranged along a longitudinal direction of said infusion tube, said plurality of fingers including a first finger, a last finger and at least two intermediate fingers between the first and last fingers, said infusion tube having a wall thickness; and





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individually driving said intermediate fingers to press the intermediate fingers against the outer surface of the infusion tube to supply liquid from the infusion tube in an amount proportional to the square of the amount of collapse of the infusion tube, each of said intermediate fingers being individually driven to move by an amount which eliminates an influence of the wall thickness of said infusion tube.

11. The method according to claim 10, wherein said last finger is driven from a bottom dead center to a top dead center to completely close the infusion tube followed by the first finger being driven from a bottom dead center to a top dead center to completely close the infusion tube, and said intermediate fingers being sequentially driven from a bottom dead center to a top dead center upon the first finger reaching the top dead center.

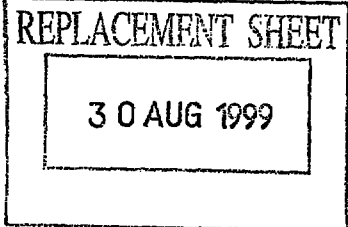
12. The method according to claim 11, wherein said intermediate fingers do not completely close the infusion tube when the intermediate fingers are at the top dead center.

13. An infusion pump for pressing an outer surface of an infusion tube to supply a liquid, comprising:

a plurality of independently driven fingers adapted to be positioned along a longitudinal direction of the infusion tube, said plurality of fingers including a first finger, a last finger and at least two intermediate fingers between the first and last fingers;

a surface positioned in opposition to the fingers, with the infusion tube being adapted to be located between the surface and the fingers; and





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driving means operatively associated with said plurality of fingers to individually move each of said plurality of fingers and cause the fingers to press against an outer surface of the infusion tube to discharge liquid from the infusion tube in an amount that is proportional to the square of the amount of collapse of the infusion tube, said driving means individually driving said intermediate fingers in a manner which eliminates an influence of a wall thickness of the infusion tube.

14. The pump according to claim 13, wherein said driving means drives said intermediate fingers between a bottom dead center and a top dead center, and a clamping width between said surface and the intermediate fingers at the bottom dead center being smaller than an outer diameter of the infusion tube.

15. The pump according to claim 13, wherein said driving means includes a motor operatively connected to a cam shaft to rotatably drive the cam shaft and a plurality of cams fixed to the cam shaft, each of said fingers being provided with a collar that is engaged by one of the cams upon rotation of the cam shaft.

16. The pump according to claim 15, wherein each of said fingers includes an elongated slot through which extends the cam shaft.

17. The pump according to claim 15, wherein each of said fingers includes a plurality of elongated holes, and including a plurality of shafts each extending through one of the elongated holes in each finger.



THIS SHEET HAS BEEN
REPLACED

ABSTRACT OF THE DISCLOSURE

INFUSION METHOD AND INFUSION PUMP

According to an infusion method and pump, in order to perform infusion at a flow rate with high accuracy by
5 allowing finger members to appropriately press a predetermined portion of an outer diameter (outer surface) of an infusion tube whose outer diameter accuracy is assured, thereby causing the infusion tube to perform a peristaltic motion, the infusion tube is
10 stationarily held between a plurality of fingers which are arranged along the longitudinal direction of the infusion tube having a predetermined outer diameter and independently driven, and a holding means. The infusion tube is pressed from the outer surface to supply a
15 liquid by setting a small moving amount of each finger to a degree enough to eliminate the influence of the wall thickness of the infusion tube and individually driving the fingers.

(Fig No. 6)

REPLACEMENT SHEET

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This Sheet Has Been Replaced

