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**Diagnosing patients at point of care**

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# Motivation

- “A long and healthy life for all South African” (DOH Key Outcomes)
- “The equalising principles of primary health care is a decentralised, area-based, people-centred approach of the district system” (NDP Vision 2030)
- “Critical elements of primary health care include prevention and the use of appropriate technology” (NDP Vision 2030)

# Point-of-care diagnostics

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- Point-of-care diagnostic are medical tests conducted at or near the site of patient care



- Primarily aimed to provide same-day diagnosis to facilitate immediate decision-making

Image source: <https://en.wikipedia.org/>

# Umbiflow: low-cost Doppler ultrasound for low-resource settings

# Why antenatal care?

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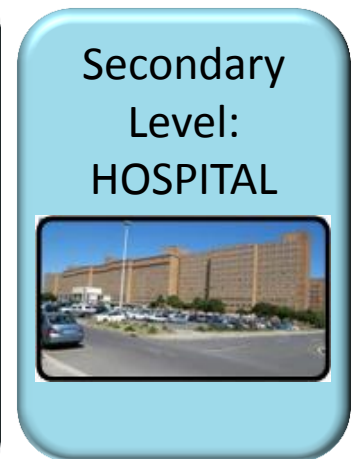
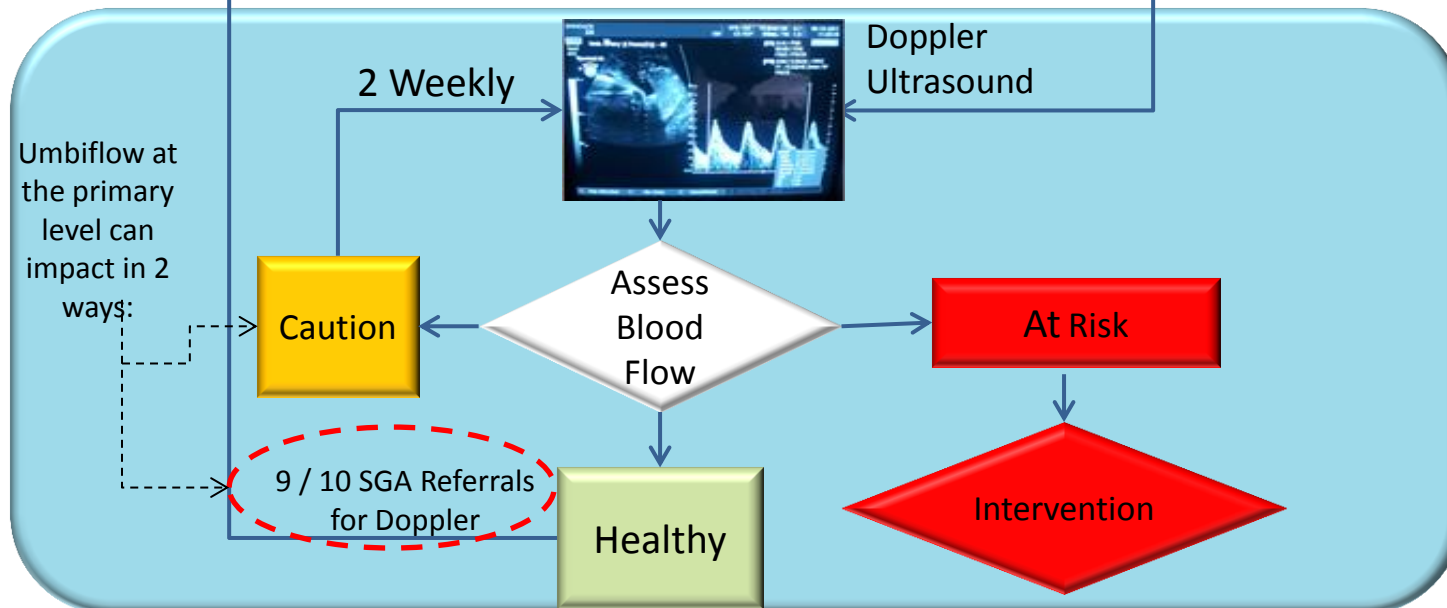
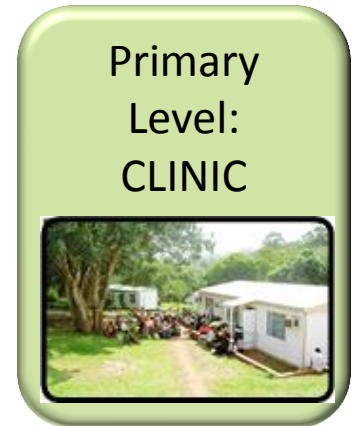
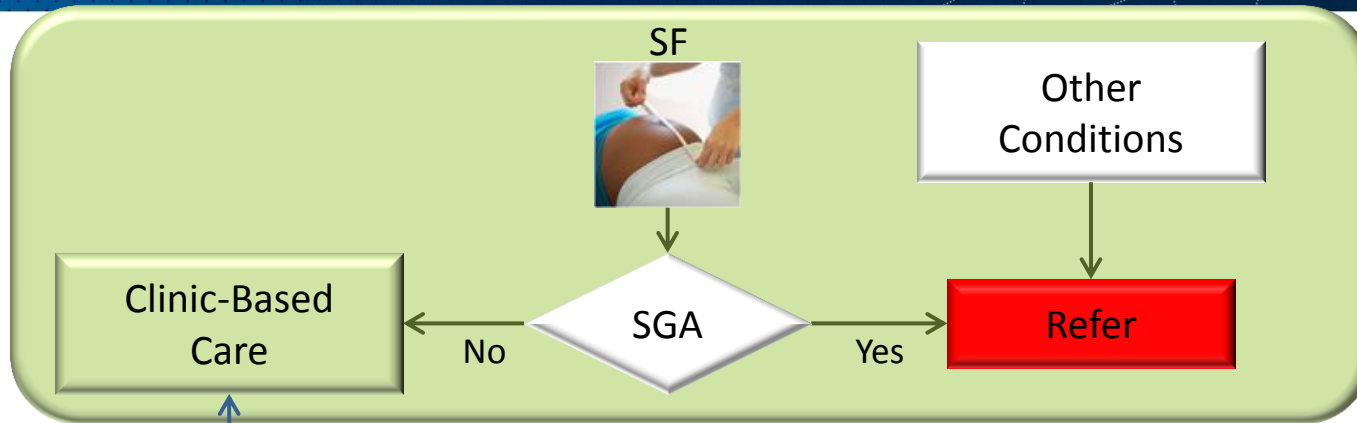
- Millennium Development Goals for Child (#4) & Maternal(#5) Health
  - South Africa & the majority of Sub-Saharan Africa will not meet 2015 deadline
- Perinatal Mortality Rate
  - Developed nations ~ 10 deaths per 1,000 pregnancies
  - South Africa = 37 (WHO)
- 50% of women in developing countries don't receive adequate antenatal care (WHO: 4 visits)



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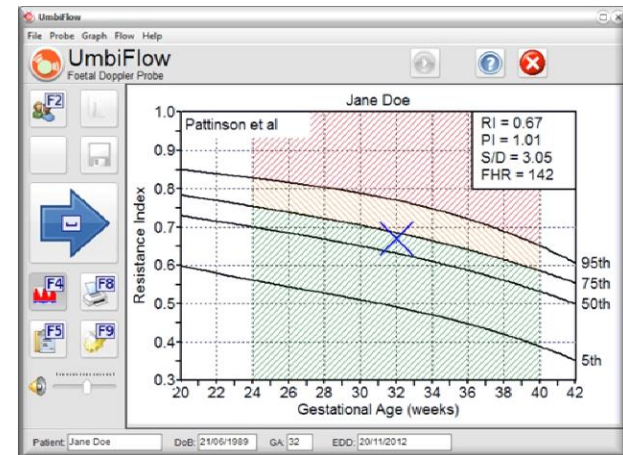
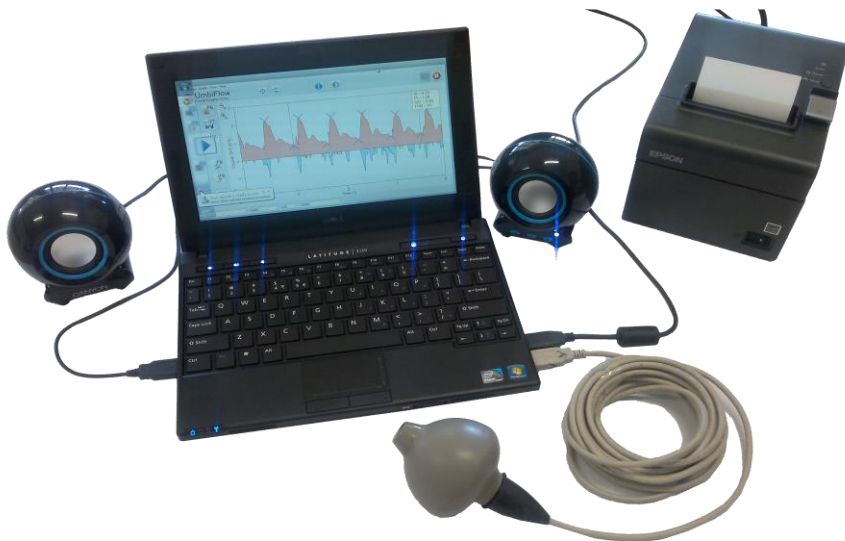
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# Why antenatal care?



# The approach

- A low-cost Doppler ultrasound system for assessment of blood flow in the umbilical cord
- Targeted at ante-natal clinics for use by nursing sisters
- Changes the paradigm of ultrasound being used only by specialists at the secondary level



# Route to impact

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- **CSIR has implemented an ISO 13485 Medical Quality System**
  - Permits commercialisation/technology transfer to happen
- **CE Mark targeted for 2015**
  - Will permit commercialisation
- **Umbiflow validated through clinical testing**
  - Reduced referral rates by up to 83% in small population study
  - 9% smaller babies detected in late bookers

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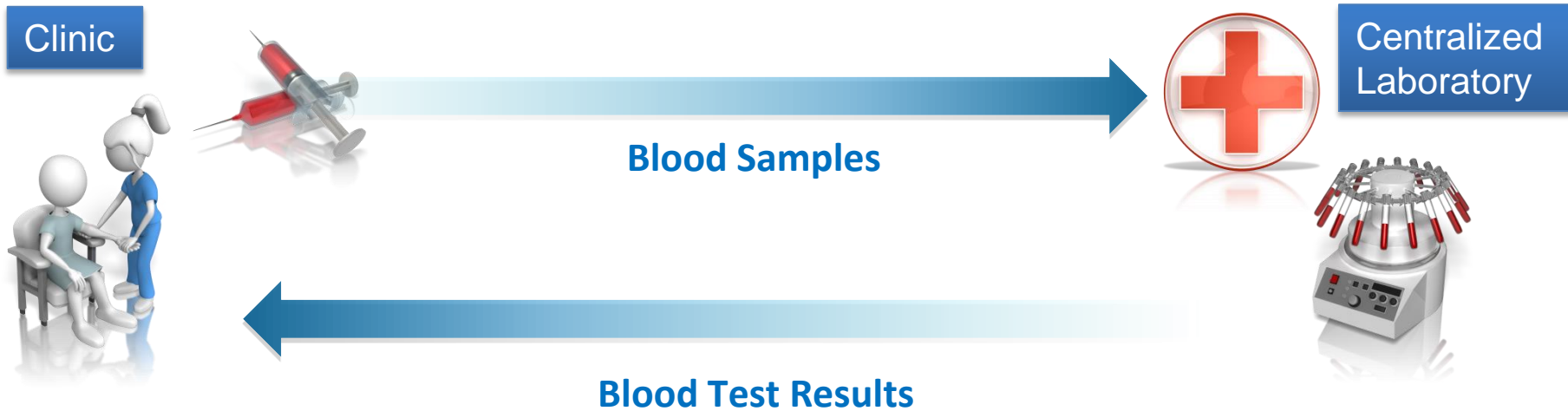


# Cellnostics: point-of-care device for full blood count analysis

# Current environment

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*Geographical separation between community healthcare centres and centralized lab*



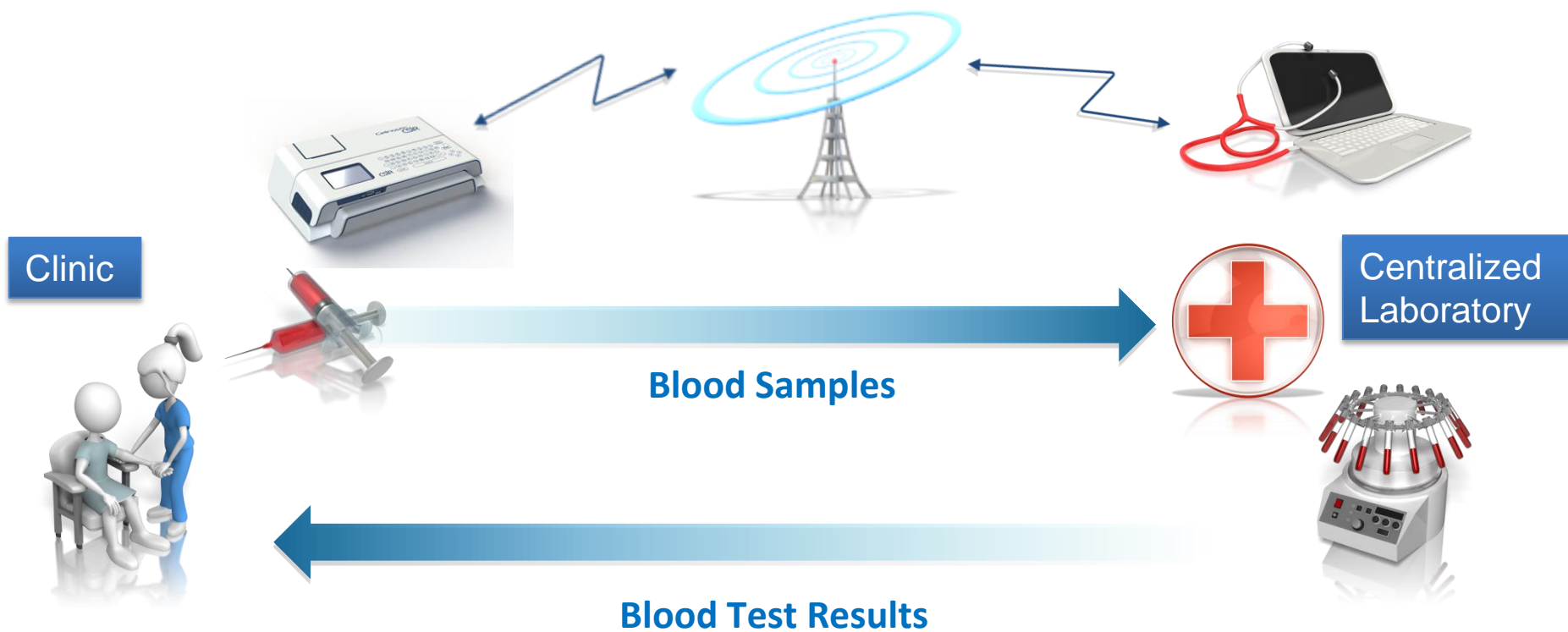
Turnaround time (TAT) directly impacts the quality of patient care

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# The solution: Cellnostics

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# Cellnostics

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Clinic



# Paper-based diagnostics

# The ASSURED criteria

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The World Health Organisation (WHO) states that diagnostics for the developing world should be ASSURED:

**A**ffordable

**S**ensitive

**S**pecific

**U**ser-friendly

**R**apid and robust

**E**quipment free

**D**eliverable to end-users



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Organization**

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# Combining technologies

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Different microsystems technologies each have pros and cons for effective point-of-care diagnostic implementations



Cartridge-based  
microfluidics with readout  
systems  
**ASSURED**



Lateral flow  
devices  
**ASSURED**

Aim to combine best of different  
microsystems from all platforms to  
provide optimal solution that  
encompasses all **ASSURED** criteria

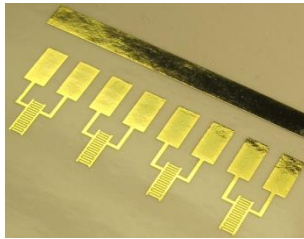
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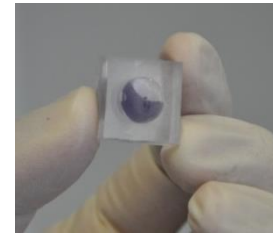
# The platform

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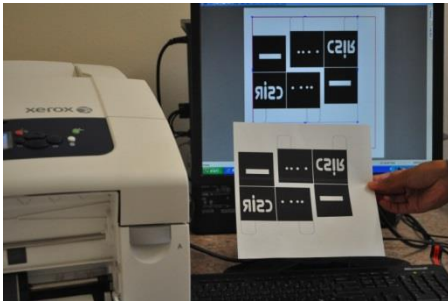
Integrate all components found in more expensive equipment onto pieces of paper. This include:



Design and printing  
Reagent introduction  
Adhesive layers



Assembly and Reagent storage  
3D fluid flow and control  
Electronics on paper  
Readout and Result  
Printed energy storage



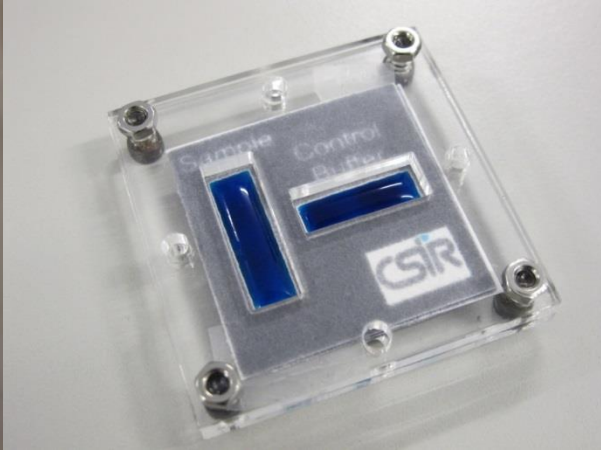
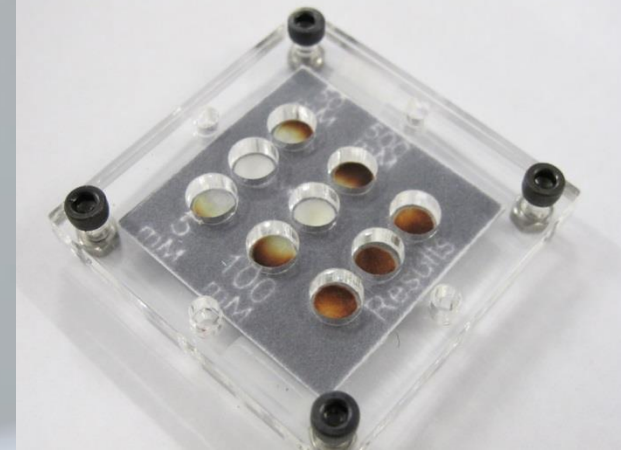
A fully integrated, printable device



# Impact

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Sensors for medical and environmental diagnostics, also agriculture, drug detection, veterinary, and mining.



K. Govindasamy, S. Potgieter, K. Land and E. Muzenda, Fabrication of Paper Based Microfluidic Devices, Proceedings of the World Congress on Engineering 2012 Vol III WCE 2012, July 4 - 6, 2012, ISBN: 978-988-19252-2-0

# Conclusion

- **Increase access to under-served communities**
- **Improve the quality of healthcare provision**
  - Quicker diagnosis at initial point of care
  - Better patient outcomes
- **Reduce cost**
  - In the healthcare system due to reduced work load at secondary hospitals and laboratory
  - For patients who save money on transport costs

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Thank you

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